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## WORCESTERSHIRE COUNTY COUNCIL.

TO THE CHAIRMAN AND MEMBERS OF THE COUNTY COUNCIL.

I have the honour to submit my Annual Report upon the health of the County for the year 1938.

This report is being curtailed in view of the national circumstances, which demand a saving of paper. At the same time, this action will afford some relief to a Department which is already more than fully occupied with additional duties in connection with Civil Defence and the Emergency Hospitals Service.

In the early months of the year 1938, a number of meetings including film demonstrations bearing on health matters and physical training display by "Keep Fit" classes were held in most towns in the County. This effort to maintain health and encourage healthy habits and pastimes was sponsored by the then Minister of Health, Sir Kingsley Wood. A large audience of interested persons from the City and County had the opportunity of hearing the views of Mr. Bernays, Parliamentary Secretary to the Ministry of Health, and Dr. Stanley Barnes, Dean of the Faculty of Medicine, Birmingham University, at a meeting held in Worcester.

Generally, it may be said 1938 was a good year from the point of health in this County.

A study of the vital statistics discloses the following favourable features :

The birth-rate, 15·6, is slightly higher than 1937 ; and infant mortality rate of below 50 is, I think, satisfactory evidence of progress ; the crude general death rate, 11·5 per 1,000 of the population is below that of the country as a whole ; the deaths from Pulmonary Tuberculosis are the lowest ever recorded for the County and the records of deaths caused by or associated with pregnancy provide evidence of improvement which is encouraging to both the midwives and the County Maternity Units.

## SECTION A.

## Statistics and Social Conditions of the Area.

Area in Acres	-	-	-	-	438,221
Population, Census 1931	-	-	-	-	308,787
Registrar-General's estimate of resident population, mid 1938	-	-	-	-	334,780
Rateable Value (1st April 1938)	-	-	-	-	£1,672,195
Sum represented by a penny rate	-	-	-	-	£6,967

		Males.	Females.	Total.
Live Births	Legitimate	- 2,570	2,483	5,053
	Illegitimate	- 98	82	180
Birth-rate per 1,000 of estimated resident population				15·6

		Males.	Females.	Total.
Still Births	-	- 121	81	202
Rate per 1,000 total (live and still) Births				37

		Males.	Females.	Total.
Deaths	-	- 2,048	1,806	3,854
Death-rate per 1,000 of estimated resident population				11·5

## Deaths from Puerperal Causes :

		Deaths.	Rates per 1,000 total (live and still) births.
Puerperal Sepsis	-	- 3	·55
Other Puerperal Causes	-	- 15	2·76
Total	-	- 18	3·31

## Death rate of infants under one year of age :

All infants per 1,000 live births	-	-	48
Legitimate infants per 1,000 legitimate live births	-	-	47
Illegitimate infants per 1,000 illegitimate live births	-	-	67
Deaths from Cancer (all ages)	-	-	504
Deaths from Measles (all ages)	-	-	3
Deaths from Whooping Cough (all ages)	-	-	5
Deaths from Diarrhoea (under 2 years of age)	-	-	2







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Information as to Social conditions including the chief industries carried on in the County have been given in previous reports and I do not propose to make further comment.

*Death Rates 1938.*

In connection with the death rates given in Table I. of this Report the following Table is submitted in order to allow of comparison between the Districts, viz. :

District.	No. of Deaths.	Crude Death rate.	Correcting Factor.	Adjusted Death rate.
URBAN.				
Bewdley Boro'	49	11·4	·92	10·5
Bromsgrove	295	12·5	·96	12·0
Droitwich Boro'	61	13·1	·76	10·0
Evesham Boro'	137	12·6	·96	12·1
Halesowen	332	9·2	1·16	10·6
Kidderminster Boro'	379	11·6	·91	10·5
Malvern	223	12·9	·70	9·0
Oldbury Boro'	474	10·4	1·22	12·7
Redditch	267	11·8	·99	11·7
Stourbridge Boro'	374	10·6	1·04	11·0
Stourport	94	12·2	·96	11·7
RURAL.				
Bromsgrove	198	9·7	·90	8·8
Droitwich	148	13·2	·80	10·5
Evesham	169	12·1	·86	10·4
Kidderminster	98	12·8	·83	10·6
Martley	133	12·6	·82	10·3
Pershore	190	14·4	·82	11·8
Tenbury	85	16·2	·78	12·6
Upton-on-Severn	148	11·7	·70	8·1

The correcting factor is said to represent the population handicap to be applied to the area, so as to allow of the variations in age and sex constitution of the district being taken into account ; the adjusted death-rate then allows of comparison with the figure for England and Wales or the adjusted death-rate of any other district.

## SECTION B.

**General Provision of Health Services for the Area.***Staff.*

The Annual Report for 1937 included information as to changes in Headquarters and District Council Health Staff occurring in the earlier part of 1938 ; no other changes occurred during the year.

Owing to delay in writing this Report, I include changes which have taken place in 1939.

As is mentioned in another section of this Report, the County of Worcester suffered a great loss in the death of Dr. H. Gordon Smith (Chief Tuberculosis Officer) in May, 1939. Dr. S. Deaner has been appointed Chief Tuberculosis Officer and Dr. J. D. Lendrum was appointed Medical Officer of Knightwick Sanatorium and Assistant County Tuberculosis Officer, but has since been called up for service with the Navy.

Dr. M. Clover has fortunately been able to again take up County duties and assist in these difficult times.

*Redditch Urban.*

Mr. G. H. Champion replaces Mr. W. Jameson as Sanitary Inspector.

*Stourbridge Borough.*

Mr. A. E. Kent, Junr., replaces Mr. A. Kent as Chief Sanitary Inspector.

*Laboratory Services.*

A well equipped Laboratory is provided in the County Buildings and a separate report is published by the County Analyst and Bacteriologist, Mr. H. E. Monk.

*Ambulance facilities.*

The ambulance services in the County for infectious and non-infectious cases have been set out in detail in previous reports.

The number of ambulances available for civilian cases of sickness or accidents remains unchanged although in several instances the ambulance provision inaugurated by voluntary bodies has been taken over by the Local Authorities as part of the general Health Service of their area.

*Nursing in the Homes.*

This is chiefly effected through the District Nursing Associations (80 in number) each affiliated to the County Nursing Association ; the service covers the whole county.

Financial assistance is given in respect of general nursing, midwifery, and in certain rural areas, towards Health visiting undertaken by the District Nurse Midwives.

The difficulty in obtaining the services of Nurses still persists.

**Hospitals—Public and Voluntary.**

No additions have been made to the list of Hospitals given in extenso in my report for 1935.

Full co-operation exists between the Council and the Voluntary Hospitals and their Medical Staffs.

In addition to per capita payments on account of Maternity, Tonsil and Adenoids, Crippled Children and Tubercular cases, unconditional grants amounting to £1,400 were made by the Council to Hospitals in and serving the County in 1938 in aid of the general work performed for the sick and poor in the county.

**Institutional Medical Services.**

The Public Assistance Officer (Mr. S. C. Meredith) informs me that improvements were carried out or approved during 1938 as under :—

- |                       |   |
|-----------------------|---|
| <i>Bromsgrove.</i>    | New Hydro-Extractor and self-contained electrically driven Calender installed in laundry, by way of replacement.  |
| <i>Kidderminster.</i> | Scheme approved for the erection of a Nurses Home which has, owing to existing circumstances been postponed.<br><br>Provision of new equipment in Sick Wards by way of addition and replacement authorised. |
| <i>Pershore.</i>      | New Calender installed in laundry by way of addition.<br><br>Entrance Hall and Women's Day Room refloored.  |

*Stourbridge.*

Land acquired to serve as an approach to the Cottage Homes from the new road adjacent to the boundary of the Homes for the convenience of the children attending the several schools.

Roadways at Homes resurfaced and new road made in the grounds.

New foul and soil and rain and surface water drainage system provided at Walton House at the Cottage Homes.

Redecorative work was carried out generally at the several Institutions and Homes during the year.

#### **Poor Law Medical Out-Relief.**

The general policy of the Council under this heading remains unchanged as the existing arrangements appear adequate and satisfactory to both the Local Authority and local representative bodies of the Medical profession.

#### **Institutional Provision for the Care of Mental Defectives.**

No substantial progress appears to have been made in the provision of the proposed new Colony for Mental Defectives near Kidderminster.

Cases are sent as required to Institutions maintained by other Authorities.

#### **Midwives Act 1902-36.**

The County Scheme under the Act of 1936 has been in operation since the 1st June 1937, and the whole of the Administrative County is now covered by Midwives.

The number of Midwives giving notice of intention to practise has been considerably reduced; the reduction is partly accounted for by the surrender of Certificates; also a number of Midwives who previously used to send in formal notice in January of each year of their intention to practise (whereas they did not intend to act as Midwives) have now ceased to do so; this means the present Roll of practising Midwives is becoming a more accurate indicator of the number of available practising midwives.

It will be remembered that the County Scheme provided for four whole time County Council Midwives in the Borough of Stourbridge whilst the remainder of the County is covered by District Nurse Midwives in the employ of Voluntary Associations; these District Nursing Associations received grants in 1938 amounting to £4,970 10s. 0d. in aid of this midwifery service.

The Borough of Oldbury is not included in these arrangements as that Authority is a separate Local Supervising Authority under the Midwives Acts.

I am of opinion that the County Midwifery Service is now sufficient and reasonably efficient. The Minister of Health has made an order prohibiting unqualified persons in the area of the Local Supervising Authority from attending on Women in labour; this provision is intended to substitute the trained Nurse or Midwife for the handy woman in all midwifery cases whether a doctor is in attendance or otherwise.

#### *Compensation to Midwives.*

Since the Act of 1936 came into force twenty-eight Midwives have surrendered their Certificates, and a total sum of £4,354 15s. 11d. has been paid to them by way of compensation.

In thirteen cases the surrender was voluntary and in fifteen cases the Midwife was, after due enquiry, required to cease practice on account of age or infirmity.

Several cases of hardship have arisen, in that Midwives who previously had fairly large practices, attended for various reasons, such as illness or accident, a lesser number of cases during the statutory three year period prior to surrender, with a consequent reduction in the amount of compensation.

#### *Post Certificate Instruction.*

The Midwives Act of 1936 made it obligatory upon all Midwives to attend these courses at intervals of not exceeding seven years.

The Central Midwives Board have approved the Radcliffe Infirmary, Oxford, as an Institution at which Worcestershire Midwives will take their post certificate instruction. In normal times it is anticipated that 22 Midwives will go to Oxford annually from this County, so that the total number to receive this training will be approximately 150 in seven years as opposed to a total number on the Roll of 187, which figure, as previously mentioned, is tending to fall. The course of post Certificate instruction ceased in September 1939, but eleven County Midwives had already taken the Course.

As the Minister of Health is paying a Grant direct to the Radcliffe Infirmary, the cost will be £8 12s. 0d. per Midwife, plus travelling expenses.

The County Council have accepted responsibility for this expenditure, together with the cost of the necessary Relief Nurses. Independent Midwives not in Institutions will, however, make their own arrangements for a Relief, and the same principle will apply to Nurses in the employment of private Nursing Homes.

*Number of Midwives.*

273 Midwives, excluding Oldbury Borough, gave notice of their intention to practise midwifery in the Administrative County in 1938; this total included a number of Midwives who undertook very little midwifery work and by the end of the year the Register included 187 practising Midwives.

*Number of Births.*

The total number of live births belonging to the County in 1938 was 5,233 (including Oldbury Borough 904 registered births).

The births (live and stillbirths) notified in the County (excluding the Borough of Oldbury) was 4,248 and of these 88% were attended by Midwives.

*Medical Aid.*

In 1938, medical aid was sought by Midwives in the Administrative County in 1,481 cases.

The following Table gives some particulars of this service :—

Year.	Registered Births (Live & Still)	Medical Aid Records.	Number of Claims.	Fees paid.	Amount recovered.
1928	5108	986	602	£1043	£141
1929	5142	1088	725	£1282	£211
1930	5145	1082	697	£1260	£210
1931	5233	1110	828	£1341	£223
1932	4975	1121	813	£1250	£298
1933	4678	1224	880	£1375	£382
1934	4914	1258	767	£1124	£335
1935	5060	1462	836	£1450	£309
1936	5295	1475	1105	£1753	£416
1937	5236	*1352	*992	*£1434	*£478
1938	†4495	1481	1051	£1586	£147

\* Includes Oldbury Boro' from 1.1.1937 to 31.3.37.-

† Administrative County for purpose of Midwives Acts.

On the 1st May 1938 a revised procedure was adopted for the recovery from patients of the whole or a part of the fees paid to general practitioners ; this has resulted in a considerable fall in the amount recovered.

Of the 4,248 births notified in the Administrative County, 790 were confined in Hospitals or Maternity Homes in the County.

Midwives attended 2,382 domiciliary cases as Midwives, and 1,036 cases as Maternity Nurses with a Doctor.

In the Borough of Stourbridge, the four whole time County Council Midwives attended 311 cases during 1938, and the service provided appears to give satisfaction.

The fees charged are £2 2s. 0d. per case, but a reduction is made in necessitous cases.

The fees are collected by the part time School Attendance Officers and the sums they collected in 1938 amounted to £299 13s. 6d.

#### *Home Helps.*

Home Helps were authorised in 19 cases during the year.

The expense of most of these was borne by the Worcestershire Federation of Women's Institutes.

### **Maternity Hospitals.**

#### *The Lucy Baldwin Maternity Hospital, Stourport-on-Severn.*

This Hospital was provided through the generosity of Sir Julian Cahn and the personal interest of the Countess Baldwin of Bewdley.

The accommodation now consists of 18 beds with an Isolation Unit of two beds.

Some three acres of land adjoining the Institution have been purchased in order to protect the amenities of the Hospital and during the War this land will be used as allotments.

The record of the work undertaken at the Hospital during 1938 is quite satisfactory.

Several members of the Nursing Staff have obtained Certificates of proficiency in the administration of gas to lying-in women.



This special apparatus was in use during 1938 ; and in each instance the request for its use came from the patient.

A stand-by electric light apparatus has been purchased in case there should be a failure of the main supply.

A Ladies Committee has been functioning for some years and their assistance has been of great value in connection with the domestic side of the Institution.

This Ladies Committee will in future undertake the examination of the accounts for the purchase of domestic supplies, as the maintenance cost of this Institution is above the average.

The main difficulty during 1938 has been to provide a sufficient Staff of Nurses.

Raising salaries has not solved the problem of obtaining permanent staff and the employment of temporary Nurses has resulted.

This latter system is very expensive and less efficient, for as soon as the Nurse knows the Hospital and its ways, she is replaced by a new Nurse.

The shortage of Staff has also made it extremely difficult to give effect to the desire of the Management Committee to shorten the hours worked by the Nursing Staff.

The Chairmanship of the Committee has now passed to Mr. R. B. Worth, of Stourport-on-Severn, who devotes much time to the administrative work of the Institution.

The following particulars refer to the year's work :—

Number of beds	—	—	—	—	18
Isolation Unit	—	—	—	—	2 beds.
Number of cases admitted	—	—	—	—	289
Average stay	—	—	—	—	17.6 days.
Cases delivered by Midwives	—	—	—	—	194
“ “ “ Doctors	—	—	—	—	64
					—
			Total	—	258
					—

Number of cases where medical assistance was sought	-	-	-	-	-	60
Puerperal Fever	-	-	-	-	-	Nil
Puerperal Pyrexia	-	-	-	-	-	6
Pemphigus	-	-	-	-	-	Nil
Ophthalmia Neonatorum	-	-	-	-	-	Nil
Maternal deaths	-	-	-	-	-	Nil
Infant deaths						
(a) Stillborn	-	-	-	-	-	9
(b) Within 14 days	-	-	-	-	-	4
Ante-Natal cases						
(a) First visits	-	-	-	-	-	239
(b) Total attendances	-	-	-	-	-	1,402

The Medical Staff consists of Dr. R. S. MacArthur and Dr. C. Mackie.

The Consultants are Professor Sir Beckwith Whitehouse, Mr. A. Danby and Mr. J. S. M. Connell.

I am most grateful to these gentlemen, to the Matron (Miss E. Sayers) and to the Staff for the very efficient services they continue to render at this Hospital.

*The Mary Stevens Maternity Home, Stourbridge.*

This Home was the gift of Mr. Ernest Stevens of Prescott House, Stourbridge, who retains his keen interest in the welfare of the Institution.

The Home contains 16 beds with an Isolation Unit of 2 beds. The record of work in this Home has been very satisfactory and there is nothing outstanding to report.

The question of providing a blood transfusion service from the volunteers included in the Corbett Hospital Scheme is being considered, and the arrangements have functioned in the few cases requiring this form of treatment.

The Ladies Committee continues to render valuable advice in the domestic administration.

The difficulty in obtaining Midwives mentioned in connection with the Lucy Baldwin Maternity Hospital is equally applicable to this Home.

Lt.-Col. C. F. Milward continues his services as Chairman, a position he has held since the Home was opened seven years ago.

Several members of the Nursing Staff have obtained Certificates of proficiency in the administration of Gas to lying-in cases.

The following information is given as to the year's work :—

Number of beds	—	—	—	—	16
Isolation Unit	—	—	—	—	2 beds
Number of cases admitted	—	—	—	—	307
Average stay	—	—	—	—	14·6 days
Cases delivered by Midwives	—	—	—	—	157
„ „ „ Doctors	—	—	—	—	113
				Total	— 270
Number of cases where medical assistance was sought					
	—	—	—	—	70
Puerperal Fever	—	—	—	—	Nil
Puerperal Pyrexia	—	—	—	—	7
Pemphigus	—	—	—	—	Nil
Ophthalmia Neonatorum	—	—	—	—	1
Maternal deaths	—	—	—	—	1
Infant Deaths					
(a) Still born	—	—	—	—	8
(b) Within 10 days	—	—	—	—	11
Ante-Natal cases					
(a) First visits	—	—	—	—	131
(b) Total attendances	—	—	—	—	701

The case of Ophthalmia Neonatorum did not develop until after the Baby left the Home.

The Maternal Death was due to 1 (a) Shock (b) Post Partum Haemorrhage. The patient had a history of ante-partum haemorrhage and was admitted as an emergency case on the advice of a Consultant. The delivery presented no difficulty, but serious post partum haemorrhage occurred later and the patient, in spite of all treatment, died.

The Medical Officer of the Home is Dr. G. J. Meldon, of Stourbridge.

Consultants are Professor Sir Beckwith Whitehouse, Mr. A. Danby and Mrs. Bertram Lloyd.

Specialists are Dr. J. Smellie (children's diseases) and Dr. A. Shepherd (mental diseases).

To the above members of the Medical Staff and also to the Matron (Miss F. M. Garrett), the Sister (Miss G. E. Winters) and the Staff I am most grateful for their assistance.

*Maternity Home—South Worcestershire.*

A suggestion was made that a Maternity Home was needed for the South East part of the County, but after taking into consideration the number of cases and the facilities already existing, it was not considered advisable to proceed with any proposal in this direction.

*Greenhill Hostel, Kidderminster.*

This Hostel is a Home for unmarried mothers; the County Council make an annual grant of £430 towards the maintenance expenses. During 1938, 27 girls were admitted and 27 babies born. It is usual for the girls and their babies to be retained for six months after the birth. This requires suitable nursing provision.

During 1938 the Hostel was enlarged by voluntary effort, including a grant from the County Council.

The extensions include a new Nursery with verandah, new Sanitary annexes and Milk Room, and also additional and improved accommodation for staff, including Nursery Nurses in training; the estimated cost was £2,000, the actual cost is £2,300; it was little thought when the alterations were undertaken that war would make demands on this Unit,—it has now become one of the Emergency Maternity Units for the evacuated expectant mothers. The training of girls as Nursery Nurses has continued; some girls continue the work and no difficulty has been experienced in finding well paid posts for those who pass their examinations; others who finally take up general nursing as a career cannot help but benefit from the experience of handling and caring for young infants. I am always impressed by the healthy appearance of the babies in this Home who, but for such an Institution, would probably be further handicapped in their start of life.

*Public Assistance Hospitals.*

Sixty-two maternity cases were admitted to the County Public Assistance Institutions during 1938, as under:

	Beds provided.	Admissions.	Births.
Kidderminster	— 4	39	26
Evesham	— 6	38	30
Upton-on-Severn	— 1	—	—
Martley	— 2	4	4
	—	—	—
	13	81	60
	—	—	—

### Complications of Pregnancy and Labour

(excluding notified Puerperal Pyrexia).

Consultants were provided to assist General Practitioners in connection with domiciliary cases in 12 instances at a cost of £51 3s. 0d.

Consultant Ante Natal Sessions were held at the Mary Stevens Maternity Home and the Lucy Baldwin Maternity Hospital, when 64 cases were examined. In addition Consultants were provided at the Maternity Homes in 23 instances for serious complications arising during pregnancy. The cost of this service was £232 11s. 10d.

In addition Hospital treatment was given in 40 cases at a cost of £371 11s. 0d. for complications (other than febrile) of pregnancy.

The cases were admitted as under :

Worcester Royal Infirmary	—	—	24
Kidderminster General Hospital	—	—	6
Birmingham Maternity Hospitals	—	—	5
Other Hospitals	—	—	5

### Puerperal Pyrexia.

During 1938, 67 cases of Puerperal Pyrexia were notified. Twenty-five cases were removed to Hospital. The Consultants' fees amounted to £54 4s. 0d. and the Hospital fees to £123 4s. 0d. An ambulance was necessary to convey patients to Hospital in 6 instances at a cost of £6 17s. 6d.

### Health Visiting and Infant Welfare.

Infant Mortality per 1,000 births, 1938	—	—	48
Average Infant Mortality rate for the years 1927-38	—	—	58

The critic of child welfare campaigns sometimes advances the suggestion that improvement in figures may mislead and really indicate the saving of weakly infants temporarily, with a resultant increase in deaths in after years of infancy and childhood, or alternatively that the net result is the survival of weakly members of the population. That this argument is wrong is proved by figures of survivors in after years, not only is there improvement under 1 year of age, but better environmental conditions and improved maternal care, which is at any rate in part due to health visiting, has resulted in a further saving of lives in each of the age groups 1-2, 2-3, 3-4 and 4-5 years; this improvement is definite and relates to pre-War and post-War periods.

Further, it is, I think, generally agreed that the average state (both mental and physical) of the school child to-day has improved, and most of us believe that it is the care in these early years of life which is a dominant factor in producing an AI nation; there can I think be no doubt that the Maternity and Child Welfare Service in this County is one of the most important and useful branches of preventive medicine which the County Council has the responsibility of administering.

The following Table shows the County Council and Voluntary Infant Welfare Centres in the County, together with average attendances:

*County Council Centres.*

	Opened.	Average attendance.
Blackheath - -	Twice weekly - -	78
Bromsgrove - -	Weekly - -	77
Cradley - -	Weekly - -	58
Crabbs Cross and Astwood Bank - -	Fortnightly - -	36
Catshill - -	Weekly - -	54
Droitwich - -	Weekly - -	35
Fairfield - -	Fortnightly - -	16
Halesowen - -	Weekly - -	118
Lye - -	Weekly - -	82
Pershore - -	Fortnightly - -	29
Rubery - -	Weekly - -	42
Redditch - -	Twice weekly - -	47
Stourport-on-Severn - -	Fortnightly - -	56
Worcester - -	Fortnightly - -	11

*Voluntary Infant Welfare Centres.*

	Opened.	Average Attendance.
Alvechurch --	Monthly --	19
Beoley --	Monthly --	22
Broadway --	Fortnightly --	15
Belbroughton --	Weekly --	17
Bretforton --	Fortnightly --	22
Badsey --	Fortnightly --	29
Cofton Hackett --	Fortnightly --	24
Evesham --	Weekly --	56
Fladbury --	Fortnightly --	20
Hagley --	Fortnightly --	26
Littleton --	Fortnightly --	21
Malvern Link --	Weekly --	48
,, Poolbrook --	Weekly --	31
,, Newtown --	Weekly --	43
Norton --	Monthly --	35
Omersley --	Fortnightly --	10
Rock --	Fortnightly --	9
Stourbridge --	{ I.W.C. twice weekly Toddler's Clinic Fortnightly }	69
Severn Stoke --	Fortnightly --	8
Tardebigge --	Fortnightly --	28
Upton-on-Severn --	Fortnightly --	8
Wribbenhall --	Fortnightly --	30
Wythall --	Fortnightly --	24
Welland --	Fortnightly --	9

**Ante Natal Clinics.**

The average attendances and first visits are set out below :—

Ante Natal Clinic.	Average Attendance.	First Visits.
Bromsgrove --	11	80
Blackheath --	12	115
Cradley --	13	110
Evesham --	15	110
Halesowen --	20	99
Lye --	13	121
Lucy Baldwin Maternity Hospital --	13	247
Mary Stevens Maternity Home --	9	131
Newtown, Malvern --	10	41
Redditch --	7	41
Stourbridge --	15	103
Worcester --	8	95
Other Infant Welfare Centres --	—	107
Total cases attending for first time		1,400

In addition to the 1,400 cases supervised at Clinics, 1,789 first visits were made by Nurses and Midwives to the homes of Expectant Mothers.

### Maternal Mortality.

The following Table sets out the Registrar General's figures for Worcestershire based on death Certificates. These deaths are classified as due to (1) Puerperal Sepsis, and (2) Other accidents and diseases of pregnancy :—

Year.	No. of Live Births. Registered.	Deaths from		Puerperal Mortality	
		Puerperal Sepsis.	Other Puerperal Causes.	Total.	Rate per 1,000 Live Births.
1938.	5233	3	15	18	3·44
1937.	5029	8	16	24	4·77
1936.	5095	12	16	28	5·5
1935.	4858	6	9	15	3·08
1934.	4703	8	16	24	5·10
1933.	4488	10	10	20	4·45
1932.	4772	10	12	22	4·61
1931.	5033	6	11	17	3·37
1930.	4964	17	11	28	5·64
1929.	4953	13	12	25	5·04
1928.	5108	5	15	20	3·90
1927.	5090	13	19	32	6·28
Average	4936	9	13	22	4·60

During 1938, the returns of the Registrar General include 18 deaths in Worcestershire arising in connection with the 5,435 registered births.

The maternal mortality rate is 3·31 per 1,000 (live and still) births registered, or 3·44 per 1,000 live births.

This figure is well below the average of the last 10 years.

The reduction in deaths from sepsis is appreciable, the improved rate, 0·55 per 1,000, is no doubt in part due to new methods of treatment; that chemotherapy is of importance is demonstrated by the fact that in the Country as a whole there is an appreciable reduction in the number of deaths from sepsis; this alteration is not caused by a reduction in the number of cases of notified Puerperal Sepsis, but by improvement in the case mortality rate, which one must attribute to the better results of treatment. The figures relating to other accidents connected with pregnancy do not indicate similar improvement, but it is at any rate encouraging to think that sepsis, which has long been recognised as the most important single cause of deaths associated with pregnancy, is at last being controlled.



### Dental Treatment to Expectant Mothers.

Assistance under the County Scheme was given in 38 cases during the year at a cost of £47 3s. 6d.

The treatment was given by private Dentists and the amount contributed by patients was £6 5s. 6d.

The treatment is limited to extractions and fillings and dentures are not provided.

### Nursing Homes.

The following action was taken in 1938 :

No. of applications for Registration	-	-	4
No. of Homes Registered	-	-	4
No. of Orders refusing or cancelling registration	-	-	-
No. of appeals against such orders	-	-	-
No. of applications for exemption from registration	-	-	-
No. of applications for re-registration when removed to new premises	-	-	-
Homes have been exempted from Registration	-	-	10

### Ophthalmia Neonatorum.

The following Table shows the number of cases in 1938 together with particulars of treatment and the result :—

Cases.		Treated.	Vision unimpaired.	Vision impaired.	Total Blindness.	Deaths.	Removal from district.
Notified.	Treated.						
		At Home.	In Hospital.				
County M. & C.W. area - -	11	11	19	-	-	3	-

### Itinerant Infant Welfare Centres.

In June 1938, a commencement was made with the Itinerant Welfare Centres and with the valuable assistance of local ladies interested in the work it was possible for a Doctor and Health Visitor to attend in the rural County areas.

The attendance of Mothers with Infants and Toddlers has been most satisfactory.

The places at which these Itinerant Infant Welfare Centres have been held include the following parishes, viz. :

Clifton-on-Teme.  
 Chaddesley Corbett.  
 Corse Lawn.  
 Callow End.  
 Eardiston.  
 Eastham.  
 Eckington.  
 Grimley.  
 Hartlebury.  
 Martley.  
 Little Comberton.  
 Witley.  
 Stone.

Total Attendances, 323.

So far it would appear that the institution of this new arrangement would justify its continuance.

### Milk for Mothers and Infants.

The amount allocated for this work is £1,200 per annum, £600 being used in the Urban and £600 in the Rural areas.

Every endeavour is made to keep the expenditure within these limits: although the applications, particularly in Rural areas, tend to increase in the winter months.

The assistance given is usually in the form of liquid milk, dried milk or cod liver oil.

Each case is reviewed every two months when the District Nurse submits a report on the case and indicates whether the supply of milk is satisfactory and whether there is any change in the family circumstances and what milk the mother takes in addition to that given by the County Council.

In an appreciable number of cases it was discovered that when the County Council Grant was made, the parents discontinued taking milk themselves and the resultant amount of milk available was not increased; a warning is sent to the applicant in such cases which is usually effective and in the few cases where the parents refused to supplement the County Council Grant, the supply from official sources was dropped.

Each child receiving milk is subsequently examined at an Infant Welfare Centre (when available) and the reports of the Maternity and Child Welfare officers give abundant testimony to the improvement in the health of Mothers and Infants who have received grants under this Scheme.

#### **Homes for District Nurses.**

At a Conference in connection with the introduction of the Midwives Act, 1936, I found it necessary to call attention to the fact that unsatisfactory housing for District Nurses provides a factor which tends to make District Nursing less attractive than other branches of the profession; special mention was made of the necessity for proper bathrooms and lavatories inside the house.

I have to record that at Kidderminster a very complete and convenient Nurses Home (accommodating both Midwives and District Nurses) has been provided through the generosity of Mr. G. Eddy whilst Mayor of the Borough.

At Wolverley a new and attractive house for the District Nurse has been made available through the kindness and generosity of Mrs. Mitchell.

At Eastham, through the initiative of Mr. K. D. Briggs, a cottage has been set aside for the District Nurse Midwife—it was only the generosity of Mr. Briggs and his family that made it possible for a District Nursing Association to be provided for this district.

#### **Infant Welfare Centres.**

Several changes have been necessary; in two instances (Bromsgrove and Redditch), Centres held in local Drill Halls were removed at the request of the Military Authorities.

##### *Bromsgrove.*

A new Clinic has been built at a cost of £5,000 and was opened in April, 1939. This Clinic provides for all health services, including a Tuberculosis Dispensary.

*Droitwich.*

This Centre will in 1939, be moved to new premises which are structurally much more satisfactory.

*Halesowen (Blackheath).*

A site has now been purchased for a new Infant Welfare Centre but it is not proposed to commence building for the present.

*Redditch.*

This Centre was moved from the Drill Hall to the Old Vicarage ; the new premises are small but have proved quite convenient ; it is hoped that at some later date the Handicraft Centre in South Street, Redditch, now used as an A.R.P. Post, may be available as a Health Centre.

*Pershore.*

The gravel floor of the Perambulator Shelter has been tarmaced at a cost of £6 10s. 0d.

*Worcester.*

The attention of the County Council has on several occasions been directed to the unsatisfactory accommodation provided in the Buildings in the Forecourt of the Shirehall.

### Venereal Diseases.

*Worcester.*

At a Joint Conference with representatives of the City of Worcester and of the County Council it was agreed that the existing arrangements at Worcester Royal Infirmary could be improved and that if better accommodation was provided the assistance given should take the form of an increased rental rather than by way of a contribution towards the capital cost.

*Oldbury.*

At the request of the Oldbury Borough Council, arrangements were made for a course of Lectures on Sex and Marriage to be given in Oldbury. The County Council were fortunate in obtaining the service of Dr. J. Selwyn Edwards of West Bromwich, as Lecturer ; the attendances were particularly good, the average attendance of males was 47 and for the women's lectures the average was 93.

*Cleveland House, Wolverhampton.*

Two cases of pregnancy, complicated by Venereal Diseases, were sent to this Hostel from the County in 1938.

*Other Clinics.*

There are no particular matters at Birmingham, Kidderminster, Dudley or Stourbridge to which attention need be drawn.

The usual statement of work carried out on behalf of the Council is given in the following Tables.

VENEREAL DISEASES, 1938.

Treatment Centre.	"NEW" OUT-PATIENTS.					"NEW" IN-PATIENTS.					Total Attendances of all Patients.					SALVARSAN SUBSTITUTES.		No. of specimens examined.	
	Syph- ilis.	Gonorr- hoea.	Soft Chancres	Not V.D.	Total	Syph- ilis.	Gonorr- hoea.	Soft Chancres	Not V.D.	Total days.	Syph- ilis.	Gonorr- hoea.	Soft Chancres	Not V.D.	Total attend- ances.	No. Treat- ed.	No. of doses		
																			No. ceasing attendance before completion of treatment.
Worcester	13	34	-	22	69	3	8	-	2	567	611	2979	-	200	3790	-	237	10	786
Royal Infirmary Kidderminster	17	31	-	103	151	-	3	-	-	207	334	1101	-	146	1581	50	193	8	254
General Hospital Birmingham	11	39	-	52	102	12	6	-	9	771	1186	2060	-	722	3968	179	962	21	1428
General Hospital Guest Hospital, Dudley	-	5	-	2	7	-	-	-	-	-	172	349	-	3	524	7	150	6	57
Corbett Hospital, Stourbridge	7	29	-	8	44	2	-	-	-	41	359	2117	-	13	2489	-	162	27	338
Totals 1938 -	48	138	-	187	373	17	17	-	11	1586	2662	8606	-	1084	12352	236	1704	72	2863
Corresponding totals 1937 -	48	110	1	145	304	5	19	-	-	1303	2861	7576	4	771	11219	269	1896	109	1885

VENEREAL DISEASES.

This Table compares the number of new County cases treated at Clinics in 1938, with those in the ten preceding years, viz. :—

Year	Worcester			Kidderminster			Birmingham			Dudley			Stourbridge			Grand Total
	Syphilis	Gonorrhoea	Total	Syphilis	Gonorrhoea	Total	Syphilis	Gonorrhoea	Total	Syphilis	Gonorrhoea	Total	Syphilis	Gonorrhoea	Total	
1928	-	25	41	17	19	36	17	18	35	3	16	19	10	17	27	158
1929	-	42	66	33	25	58	18	51	69	1	4	5	4	15	19	217
1930	-	40	60	35	27	62	23	43	66	15	14	29	17	36	53	270
1931	-	41	62	21	24	45	30	42	72	9	12	21	10	29	39	239
1932	-	35	55	21	23	44	23	55	78	4	15	19	11	15	26	222
1933	-	21	38	9	16	25	33	48	81	12	19	31	11	23	34	209
1934	-	21	38	14	10	24	21	35	56	6	11	17	12	17	29	164
1935	-	15	30	10	21	31	19	34	53	4	16	20	11	13	24	158
1936	-	32	43	10	26	36	9	30	39	5	13	18	12	16	28	164
1937	-	27	40	15	21	36	9	33	42	2	4	6	9	25	34	158
1938	-	34	47	17	31	48	11	39	50	-	5	5	7	29	36	186

### Orthopaedic Treatment of Cripples.

#### *In-Patient Treatment.*

The following Table shows the number of Orthopaedic cases treated under the Scheme as in-patients in Hospitals:—

Hospital.	Tuberculous Crippling defects.	Crippling defects (other than T.B.)		Total.
		School Children.	Infants	
Birmingham Royal Cripples Hospital	42	27	4	73
Shropshire Orthopaedic Hospital	— 3	5	—	8
Warwickshire Orthopaedic Hospital	—	1	—	1
Worcester Royal Infirmary	— 6	6	3	15
Worcester, Newtown Hospital	— 16	—	—	16
Birmingham Children's Hospital	— 4	—	—	4
Margate—Rob Roy Home	— 1	—	—	1
	<b>72</b>	<b>39</b>	<b>7</b>	<b>118</b>

The 72 cases of tuberculous crippling defects were:—

Spine Cases	—	—	—	31
Other Bone and Joint Lesions				41

#### *Out-Patient Treatment.*

The numbers of cases and total attendances at the Clinics are set out in the following Table:

1937.

Out-patient Centre.	Number of School Children attending.	Total attendances by School Children.	Number of Infants attending.	Total attendances by Infants.	T. B. Cases attending.	Total attendances by T. B. cases.
Stourbridge -	267	754	86	358	23	75
Redditch -	88	273	42	213	7	16
Worcester -	72	237	30	42	35	133
Broad St., Birmingham -	27	596	15	126	38	120



No change has been made in the general working of the Scheme.

(a) *Stourbridge.*

The attendances at this Clinic have been well maintained. It would appear that a larger number of new cases have been recommended by the assistant County Medical Officer for examination by the Surgeon, and arrangements were made for him to hold two doctor's sessions per month instead of only one. The majority of these new cases are generally early postural defect of the spine and flat feet, but the principle of an examination by a Surgeon before any treatment is given has been thought advisable.

*Massage Clinic.*

There were 4,862 attendances at this Clinic, 3,939 were school children, 592 infants and 331 tubercular cases. The arrangements by which the Sister in charge of the Massage Clinic, which is open daily, attends when her cases are seen by the Surgeon has been continued.

(b) *Redditch.*

As mentioned in last year's report, the Clinic has been removed to the premises taken by the Council for other Clinics at the Old Vicarage, Redditch. The attendances have been well maintained.

(c) *Worcester.*

The arrangements at this Clinic work very satisfactorily. Miss Woods, the Orthopaedic Sister, attends weekly, and the attendances have been well maintained.

*Postural Classes in Schools.*

These have been continued in the South of the County by Miss Woods and an Assistant.

Similar work in the North of the County has been carried out by a qualified Education Gymnast appointed by the Birmingham Royal Cripples Hospital. Details of this work are given in the Annual School Report.

SECTION C.

**Sanitary Circumstances of the Area.**

*Water Supplies.*

As this matter was dealt with at considerable length in my last Report I propose this year to comment only upon additional work carried out or contemplated.

*Malvern Urban District.*

The local Council have applied for assistance towards the cost of the provision of water mains (estimated at £1,450) for Interfields but the County Council decided that the development to date of the area concerned did not justify the proposed heavy expenditure but they are prepared to reconsider the position if at a later date circumstances alter.

*Redditch Urban District.*

The Urban District Council applied for a grant towards the cost of a water supply to be obtained from the East Worcestershire Water Works Co. for the Callow Hill, Ham Green and Elcocks Brook areas.

These areas which are essentially rural in character were added to the Urban District when the district boundaries were reviewed and the County Council agreed to contribute half the net annual deficiency in connection with the Scheme. On the present estimate the contribution of the County Council would be £122 per annum.

The Council are also making an annual contribution of £25 in connection with a scheme for supplying water by means of an extension of the mains belonging to the Urban Council for Berrow Hill, Littleworth and Moat Farm. As in the former instance this area is essentially rural in character, and was as a matter of convenience included in the Redditch Urban District, when the old Feckenham Rural District was abolished under the county review of boundaries.

*Evesham Rural District.*

The Evesham Rural District Council have obtained the consent of the Ministry of Health to carry out works of extension replacement of mains and improvement of the existing Evesham villages water supply at an estimated cost of £17,100 and the County Council have agreed to contribute annually a sum equal to one half the nett deficiency during the currency of the loan after crediting the revenue account with the proceeds of a penny rate levied on the whole area of the Rural District, provided that the County grant shall not exceed in one year the sum of £300. The Evesham Rural District have always been progressive in regard to both Housing and Village water supplies. Their action in this latter connection has been of great assistance to Evesham Borough, where the water supply has caused considerable anxiety in recent years.

*Upton-on-Severn Rural District.*

*Powick Water Supply.* Subject to certain conditions the County Council have intimated their willingness to contribute towards the cost of a water supply for the portion of Powick parish without a public supply.

*Coventry Water Supply.*

The City of Coventry are seeking Powers to obtain a supply of water from the River Severn at Upton-on-Severn. The pipe line will run through a considerable part of this County and the County Council are taking active steps to ensure that the interests of those districts in the County adjacent to the pipe line and where the present supply is insufficient are duly considered.

Conferences have already been held with representatives of the Evesham, Pershore and Upton-on-Severn Rural District Councils: joint action has been taken and the services of Major A. H. S. Waters, V.C. were retained to advise the three Authorities in the preliminary investigations.

The District Councils are lodging formal petitions against the Bill although it is hoped that it will not be necessary to proceed with objections to the bill if agreement can be reached with regard to questions relating to the supply of water.

**Drainage and Sewerage.***Camping Sites on River Banks.*

At the request of the Worcester City Authority, who obtain their water supply from the River Severn, Mr. Owen, the County Sanitary Inspector, visited various camping sites near the River during the Whitsuntide holidays.

Although the sanitary conditions in several encampments were far from satisfactory there was no evidence that pollution of the river arose from the camps.

Probably some pollution of the River Severn occurs from house boats but the method of detecting and controlling this offence is far from easy.

A suggestion was made by one District Council that the appropriate course would be to take action under the Rivers Pollution (Prevention) Acts but it is doubtful whether the complicated and cumbersome procedure laid down in the Act could be used for this purpose.

## Rivers and Streams.

### *River Stour.*

The polluted state of the River Stour has been reported on in this County for a number of years and efforts to effect improvement have been going on since 1925.

So far as pollution with sewage is concerned it may be expected that the proposed Joint Sewage Disposal Scheme for the towns of Kidderminster, Stourport and Bewdley will result in a greatly improved state of the lower reaches of the River Stour and also the River Severn.

The principal pollution in the upper portion of the Stour at the present time is by acid liquor or pickle. In almost all cases these trade wastes reach the River Stour untreated.

As a result of detailed surveys of the River the Council decided to ask for the approval of the Ministry of Health to legal proceedings being taken against certain firms.

An Inspector of the Ministry of Health held an enquiry at Stourbridge on the 23rd March 1939 with the result that the Minister has decided to defer his decision on the Council's application for a period of six months to enable the firms concerned to conduct negotiations with the Local Authorities with a view to the discharge of their waste into the public sewers.

The Ministry has requested the County Council to furnish a report by the 30th September 1939 as to the progress made with the negotiations and a communication from the Minister adds "Should this report disclose that little or no progress has been made in this matter he would be disposed to consent to the taking of proceedings in the case of at least four of the firms."

### *River Severn.*

The County Analyst continues his periodical survey of the River.

### *Rivers Arrow and Avon.*

The County Analyst continues to make periodical surveys of these rivers. The principal pollution in Worcestershire of the River Arrow arises from the Alvechurch Disposal Works (Bromsgrove Rural District) and the Redditch Disposal Works. In both instances works are in progress to improve the existing arrangements. At the Alvechurch Works additional tanks and filters are being constructed and at Redditch new works further down the river are being built.

### Housing (Rural Workers) Act 1938.

The principal event of note was the amending Act of 1938 which came into force on the 23rd June 1938 and which extended the operation of schemes made by Local Authorities so as to cover applications for assistance made up to the 30th September 1942.

The Act contains certain new provisions including a change whereby persons exercising the option to relieve themselves of the conditions attached to grants by making repayment shall in future be required to repay not the whole of the grant as hitherto but an amount proportionate to the unexpired part of the period during which the conditions were to operate. In addition to the conditions laid down under the earlier Acts, in future applications approved, all reasonable steps must be taken for twenty years to maintain the house in a fit state for working class habitation.

The number of applications submitted in 1938 was 131 of which 115 were approved, the grants involved amounting to £11,365. In addition, loans to a total of £1,182 3s. 0d. were approved.

The following table gives details of the applications and grants dealt with up to the 31st December 1938 :—

No. of applications submitted.	No. of applications approved.	Grants approved.			Loans approved.		
		£	s.	d.	£	s.	d.
773	602	56,698	16	10	4,630	2	10

#### SECTION E.

### Milk and Dairies Acts and Orders.

*The Milk (Special Designations) Orders, 1936 and 1938.*

*Tuberculin Tested Milk.*

At the end of the year, 25 producers held Tuberculin Tested milk licences, all of which licences were renewed for 1939. Eleven of the licences were for production only and 14 for combined production and bottling.

The number of new licences issued during the year was nine.

Nine of the licensed producers hold certificates of Attestation granted by the Ministry of Agriculture and Fisheries under the Tuberculosis (Attested Herds) Scheme.

Of the 166 samples taken during the year, only 8 failed to comply with the requirements of the Order. The fact that 5 of these unsatisfactory samples were obtained during the months of June, July and August, emphasizes the need for special care in the handling of the milk during the summer months of the year. The results of the sampling are also shown on the graph attached.

#### *Accredited Milk.*

Forty-five new licences were issued during the year (compared with 33 in 1937 and 42 in 1936), the total number of licences in force at the end of the year being 213 (164 production only and 49 combined production and bottling).

The licence of one producer was suspended on the 22nd June, 1938, following three consecutive unsatisfactory samples and adverse reports by the County Sanitary Officer upon the conditions at the farm generally. The producer exercised his right of appeal to the Minister of Health and the licence accordingly remained in force until the Minister's decision was given on the 22nd September, 1938. This decision dismissed the producer's appeal. The licence remained suspended until the end of the year but was renewed for 1939 as by that time the necessary action had been taken by the producer to remedy the unsatisfactory conditions.

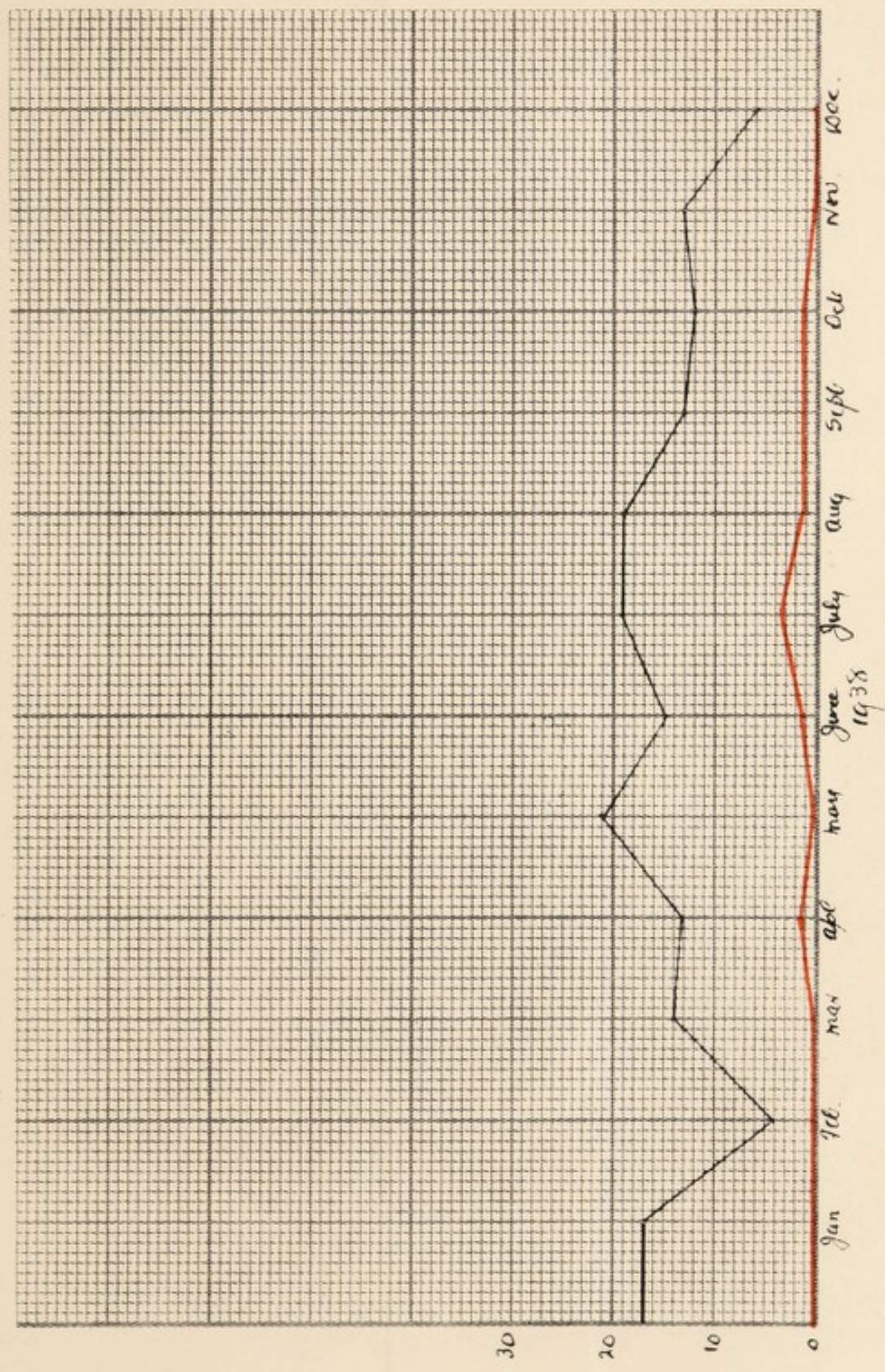
The routine clinical examinations of licensed herds have been undertaken since the 1st April 1938 by officers of the Ministry of Agriculture and Fisheries under the provisions of the Agriculture Act, 1937, whereby a national service of veterinary inspectors was established. Mr. Walter Scott, F.R.C.V.S., D.V.S.M. the former County Veterinary Officer, is the Ministry's Divisional Inspector and the co-operation between the two Departments, both as regards Accredited herds and Tuberculin Tested herds, is excellent.

The arrangements for the periodical sampling of Accredited milk have been commented upon in previous Reports and remained unchanged until the end of the year. As, however, notice was received from the City of Birmingham that pressure of other work made it impossible for them to continue to take samples on behalf of the County Council, and as it was becoming increasingly difficult for the Local Sanitary Inspectors to continue to assist the County Council in taking samples in their respective areas, it was necessary for the County Council to appoint a Milk Sampling Officer. This officer (Mr. G. T. Brooke) commenced his duties on the 2nd January, 1939.

I wish to record my appreciation of the assistance willingly given by the Local Sanitary Inspectors over a number of years in connection with routine sampling ; I am also grateful to Dr. H. P. Newsholme, Medical Officer of Health for the City of Birmingham, for his co-operation, and to the City of Worcester who are still taking on behalf of the County Council samples of the Accredited and Tuberculin Tested milk produced in the County but consigned to firms in their area or retailed in the City.

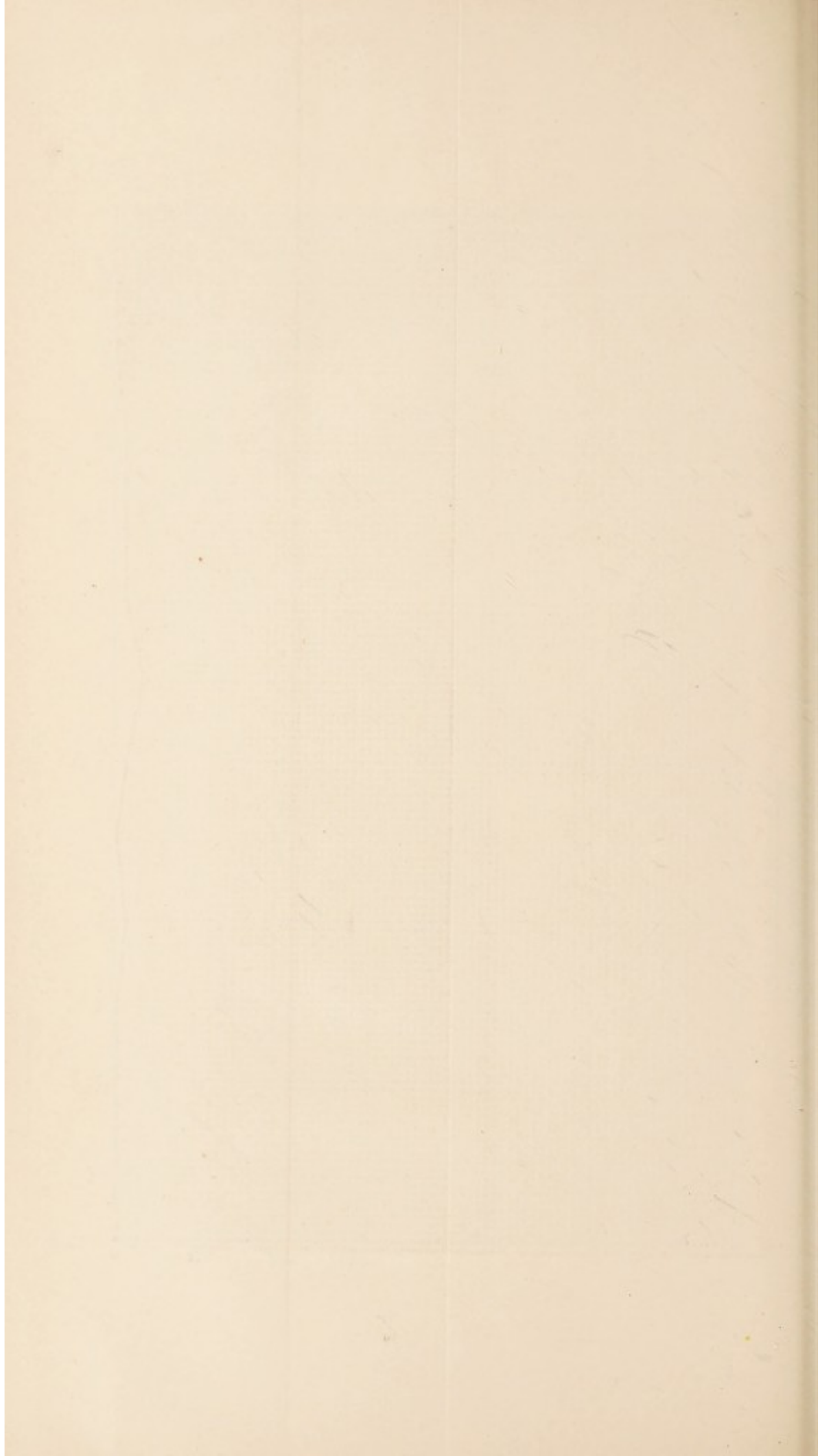
The results of the sampling for the year are shown on the attached graph. The total number of samples taken was 758, of which 74 failed to comply with the requirements of the Order. The highest number of unsatisfactory samples recorded in any one month was 19 in August.

**Tuberculin Tested Milk.**  
**Routine Sampling 1938.**



— Total number of Samples.  
 — Unsatisfactory.





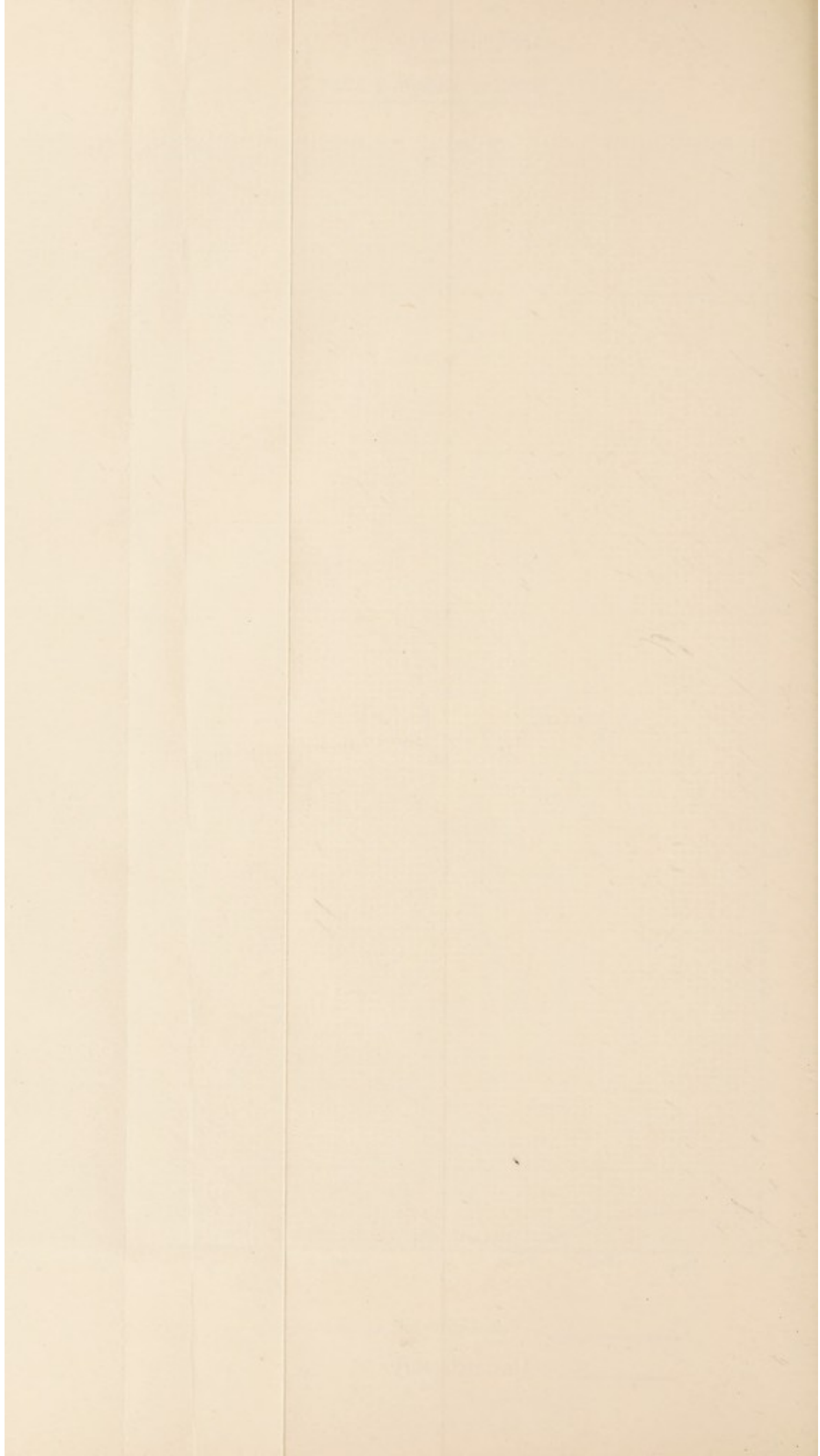
Accredited Milk.

Routine Sampling 1938.



— Total number of Samples.

— Unsatisfactory.



Mr. R. W. T. Owen, the County Sanitary Officer, has again paid a great many advisory visits in connection with applications for licences. While it is impossible with the present staff to arrange for regular inspections at short intervals of licensed farms, Mr. Owen has paid as many surprise visits as possible to see that the conditions under which licenses are granted were being complied with, and he makes the following comments with regard to licensed farms generally :—

The number of farms licensed for the production of graded milks has increased during the year but not to the extent that was anticipated. According to information kindly supplied by the Regional Officer of the Milk Marketing Board there were 1,604 producers registered with the Board in the County at the end of the year. Of this number, 243 held licenses for the various grades which represents 15% of the registered producers. The figure for the West Midland region, which comprises the counties of Hereford, Gloucester, Shropshire, Monmouthshire and Worcestershire, is 14%, the percentages varying from 9 to 20 in the various counties in the Region. In this connection, however, it should be remembered that Worcestershire is not one of the leading milk producing counties in the West Midlands.

In an article appearing in "Agriculture," the Journal of the Ministry of Agriculture, contributed by the Agricultural Education Officer of the Wiltshire County Council, he states that 26% of the registered milk producers in his county (one of the leading milk producing counties) are licensed, and his experience, like ours, shows that many of the small herds are not becoming accredited. Possibly one explanation is that the farm buildings on the smaller farms are somewhat below standard and that with small herds the outlay required on improving the conditions would not be covered by the bonuses awarded by the Board. Be this as it may, the fact remains that with the exception possibly of improved methods of sterilization nothing further is asked for in the structural condition of the premises than what already applies to all milk producers under the requirements of the Milk and Dairies Order.

During the year more and more farmers installed milking machines due to the difficulty in obtaining, and retaining, skilled milkers. A word of warning is always necessary when these machines are first installed about the need for extreme cleanliness in all the parts, and we always advise that special taps should be provided, taken off the main steam pipe leading from the steam boiler, for blowing steam through the rubber milk tube and teat cups. In several instances we have found, also, that unsatisfactory samples were due to the contamination of the milk from leakages in connection with escaped milk in the vacuum pipe line. Normally, no milk should get into this pipe but we have found that occasionally it does, and when this happens the milk seeps back again to contaminate the fresh milk.

The number of farms where separate milking sheds, known as "milking parlours," are in use, is steadily increasing. These are special buildings used exclusively for milking in. The cow enters the building, is washed and milked, and either returns to the cowshed, yards or pastures. The ideal lay-out is one in which two sets of standings are used, the first where the cow is washed, from which she proceeds to the second standing, where she is milked.

Mainly owing to the labour difficulty, due to inducements offered in other directions, I have noticed that the standard of cleanliness is not being maintained on several farms. One has every sympathy with the producer but trouble is bound to ensue sooner or later if any slackening off in the methods sets in, especially in the summer time when the Methylene blue reduction test tends to be more severe.

Systematic sampling of the farms is now carried out following the appointment of the County Milk Sampling Officer. Sampling is carried out in accordance with the instructions of the Ministry of Health laid down in their circular No. 139/Foods, and the technique and time limits within which the milk has to be delivered to the County Laboratory are strictly observed. Special sampling outfits have had to be obtained consisting of long handled dippers, plungers, and carrying cases, all of which are sterilized in the County Laboratory, separate dippers and plungers being used for each sample. Special sample bottles are also used.

With this appointment it has been possible to devise a regular routine in dealing with unsatisfactory samples. Where a bad sample is obtained the farmer is notified and arrangements are made for a further sample to be collected within a week to ten days. If this second sample should prove unsatisfactory the result is again communicated to the producer and he is advised to immediately get into touch with the County Dairying Instructress. She then visits the farm in an advisory capacity and assists the farmer in detecting and remedying the fault. She later reports to the County Medical Officer upon her investigations and arrangements are then made for an official sample to be taken by me. So far, this third sample has always proved satisfactory. Should a case arise where the assistance of the County Dairying Instructress is not sought, the third sample would automatically be taken, which, if it failed the test, would result in the farmer being reported to the Committee with the view to the suspension of his licence. This scheme is working very well, and in my opinion is much to be preferred to the automatic suspension of the licence following three successive bad samples.

One of the conditions of all licences is that every cow in the herd shall be marked for the purposes of identification and a complete register of such cows kept. Our view is that this register should be called for and checked by the Veterinary Inspector at the time he makes his periodic herd inspection, and with the co-operation of the Divisional Inspector of the Ministry of Agriculture, who is responsible for the herd examinations, this is now being arranged for.

Complaints have been received of the unsatisfactory state of some of the churns supplied by the dairy companies, both from the point of view of cleanliness and their dilapidated condition. When it is remembered that the official samples are taken from the churn, this becomes an important matter to the farmer.

The clean milk competitions organized by the County Agricultural Department, continue to be held. These competitions are of extreme assistance in getting the farmer and his milkers into the routine of clean milk production, for, valuable as good buildings are in that they make it much easier to produce clean milk, proper methods are of equal importance.

It is hoped that it may be possible in the near future to organize, in conjunction with the Ministry of Agriculture, a course of lectures for sanitary inspectors on clean milk production.

#### Milk and Dairies (Consolidation) Act, 1915.

##### *Section IV.*

Up to the 1st April, 1938, complaints under this heading were dealt with by Mr. Walter Scott, F.R.C.V.S., D.V.S.M., the County Veterinary Officer, and thereafter were referred to and dealt with by him in his capacity as Divisional Inspector of the Ministry of Agriculture and Fisheries.

The following Table shows the name of the Local Authority from which emanated the complaint that milk produced in the County and coming into their area had been found to contain tubercle bacilli, and the result of the subsequent investigation :—

Local Authority.	No. of Notices Received.	No. of animals slaughtered under the Tuberculosis Order.	No. of cases in which results were negative.
City of Birmingham	14	13	4
Smethwick County Borough	2	1	1
Staffordshire County Council	1	1	—
Total	17	15	5

In addition, Mr. Scott dealt with the one sample of school milk positive for tubercle referred to elsewhere in this Report.

### Supply of Milk to School Children.

#### *Scheme of the Milk Marketing Board and the Board of Education.*

The difficulty experienced in obtaining supplies of milk for the children attending rural schools in the County has been commented upon in previous reports. The matter has again been taken up with the Board of Education who stated that steps had been taken whereby the distribution allowance under the Scheme had in effect been increased by 1d. per gallon as from the 1st October, 1938, and that they had approached the Milk Marketing Board on the matter who would investigate the possibility of finding supplies if a list of schools lacking a supply was sent to them.

Up-to-date information was accordingly obtained from the schools without an approved supply, which showed the position to be as follows:—

No. of Schools or separate Departments without an approved supply under the Scheme	—	—	37
No. of these Schools where the Head Teacher was satisfied with existing arrangements (including the supply of cocoa, milk substitutes, etc.) and did not wish to participate in the Scheme	—	—	17
No. of Schools or separate Departments wishing to have a supply of milk	—	—	20

Details of the twenty Schools wishing to have a supply of milk were sent to the Milk Marketing Board, and the following Table shows the position at the time of writing:—

#### *Elementary Schools.*

Grade of Milk.	No. of approved Suppliers.	No. of Schools or separate Departments.	Average Attendance.
Pasteurised	14	171	22,625
Tuberculin Tested	3	3	132
Accredited	28	48	2,796
Undesignated	17	19	763
Supplied	—	241	26,316
Supply not required	—	17	966
Supply not yet available	—	16	729

The Director of Education informs me that on the 31st March 1939 the number of children having milk at school (including those having free milk, 1,748) was 16,492.

In addition, Pasteurised milk is being supplied to six Secondary Schools, one Technical School and an Arts and Crafts School, while two Secondary Schools have a supply of Accredited milk. Tuberculin Tested milk is supplied to the West Malvern Open Air Council School.

The arrangements for supervising the supplies were similar to those in previous years, special arrangements having been made with the Ministry of Agriculture and Fisheries for their officers to continue the examination at regular quarterly intervals of herds producing undesignated milk for consumption at schools.

The following Table shows the numbers of samples taken during the period under review and the result of the examination of such samples :—

Grade of Milk.	Total No. of Samples.	Result of Examination.			
		Bacteriological.		Biological.	
		Pass	Fail	Negative	Positive
Pasteurised	82	42*	11	29	—
Tuberculin Tested	11	6	1	4	—
Accredited —	131	74	6	50	1
Undesignated	86	49	3	34	—
<b>Total</b>	<b>310</b>	<b>171</b>	<b>21</b>	<b>117</b>	<b>1</b>

\* B.Coli were present in 10 of these samples, but as no standard is legally laid down with reference to B.Coli in Pasteurised Milk, the samples have been included as satisfactory.

The Phosphatase Test (which with certain reservations indicates whether or not the samples were milks properly pasteurised under the conditions prescribed by the Milk (Special Designations) Orders 1936 and 1938) was applied to each of the 53 samples of Pasteurised milk taken for bacteriological examination. Twelve of the samples failed to pass this test; of these 8 also failed on the bacteriological standard but 4 were satisfactory from the point of view of cleanliness.

It will be seen that only one sample (of Accredited milk) out of 118 was positive for tubercle bacilli, compared with 7 out of 113 for last year. This case was at once notified to the Divisional Inspector of the Ministry of Agriculture and Fisheries with the result that one cow was slaughtered under the Tuberculosis Order and found to be affected with Tuberculosis "Not advanced." A "repeat" sample taken at the school was negative biologically.



As mentioned earlier in this Report, a Milk Sampling Officer was appointed at the beginning of 1939. This officer will in future take the samples at schools and he will also take an annual sample at the place of production if situated within the County.

#### **Child Life Protection.**

At the end of the year there were 70 children in the care of 64 registered foster-mothers. 38 new cases were registered during the year, and 26 new homes were approved. Three children attained the age of 9 years and therefore ceased to be subject to supervision. There were 30 removals or transfers, and three legal adoptions.

Miss J. C. Butler, Child Protection Visitor, submits the following report :—

During 1938, two hundred and forty-six visits were paid by me to or in respect of foster-children. New cases numbered 38. In the latter figure, one infant is not included whose foster-home was of such doubtful standard that the Administrative Health Committee considered it on three separate occasions.

Foster-mothers continue to do excellent work in face of many difficulties. These women actually cover a very important field in social service. Homes continue to improve in standard because demands for children fortunately increase, making an advantageous choice possible in many instances. Gentle supervision appears to be the keynote of success in the work where reasonably satisfactory conditions prevail, but the bad cases remain in some degree an unsolved problem, for the children remain in homes frankly considered unsuitable.

In May of this year (1938) a visit was made by Miss Alden of the Ministry of Health. The interest shown by her was most encouraging. Her appreciation of records was especially gratifying because a concentrated co-ordinate effort has been made over a period of eight years to ensure that an efficient record of each child shall be maintained. One sometimes feels that a national register would be an advantage. Where children are moved from place to place, no single Authority has sufficient information to adequately judge the circumstances and occasionally insufficient time in which to act.

#### **Vaccination.**

The records of the Vaccination Officers and Public Vaccinators have been examined each Quarter.

The Annual Returns of Vaccination Officers with respect to infants whose births are registered are not made until 13 months after the completion of the year to which they relate; the last available figures are those for the year 1937.

Of the 4,732 children reported by the several Vaccination Officers in the Administrative County as having their births registered during the year 1937, 1,662 (35·1%) were successfully vaccinated, while certificates of conscientious objection to vaccination were received in respect of 2,648 (55·9%). Of the remaining 422 children, 167 (3·6%) died unvaccinated; 37 (0·8%) had their vaccination postponed by medical certificate; 5 (0·1%) were certified to be insusceptible to vaccination; leaving 213 (4·5%) as "removed," "not found," or otherwise unaccounted for as regards vaccinations.

As will be seen from the following Table the numbers of infants successfully vaccinated continues to decline. The figure for the County has fallen from 41·6% in 1930 to 35·1% in 1937.

Year.	Births.	Vaccinated.		Objections.		Died unvaccinated.		Vaccination Postponed.		Insusceptible.	
		No.	%	No.	%	No.	%	No.	%	No.	%
1929	4752	1889	39·8	2459	51·7	233	4·9	38	0·8	9	0·2
1930	4667	1943	41·6	2403	51·5	184	3·9	17	0·4	8	0·2
1931	4665	1898	40·7	2364	50·7	225	4·8	30	0·6	19	0·5
1932	4251	1717	40·4	2225	52·3	183	4·3	24	0·6	19	0·5
1933	4178	1660	39·7	2171	52·0	192	4·6	17	0·4	9	0·2
1934	4363	1649	37·8	2427	55·6	150	3·5	18	0·4	13	0·3
1935	4488	1653	36·8	2500	55·7	178	4·0	29	0·7	10	0·2
1936	4789	1701	35·6	2714	56·7	174	3·6	22	0·4	9	0·2
1937	4732	1662	35·1	2648	55·9	167	3·6	37	0·8	5	0·1

The numbers of persons successfully vaccinated and re-vaccinated at the cost of the rates during the year ended 30th September 1938, are given in the following Table:—

Number of Successful Primary Vaccinations of persons:—			Number of Successful Re-vaccinations.
Under one year of age.	One year and upwards.	Total.	
1418	115	1533	53

## SECTION F.

**Prevalence of, and Control over, Infectious Diseases.**

The year 1938 was a satisfactory one from the point of view of the general health of the county. The incidence of Diphtheria only was above the average, but fortunately the type was less severe than that experienced in recent years.

The preparation of plans for extensions at the North Worcestershire Isolation Hospital at Hayley Green and the Hill Top Hospital, Bromsgrove, proceeded, and but for the War both these very necessary Schemes would have been in progress at the time of writing this report.

Apart from the incidence of Diphtheria, which has resulted in a good deal of immunisation work, there is little to record. Only six elementary schools were closed during the year on account of infectious disease, which is the lowest figure I remember.

The following Table gives details of Infectious Diseases occurring in the County during 1938.

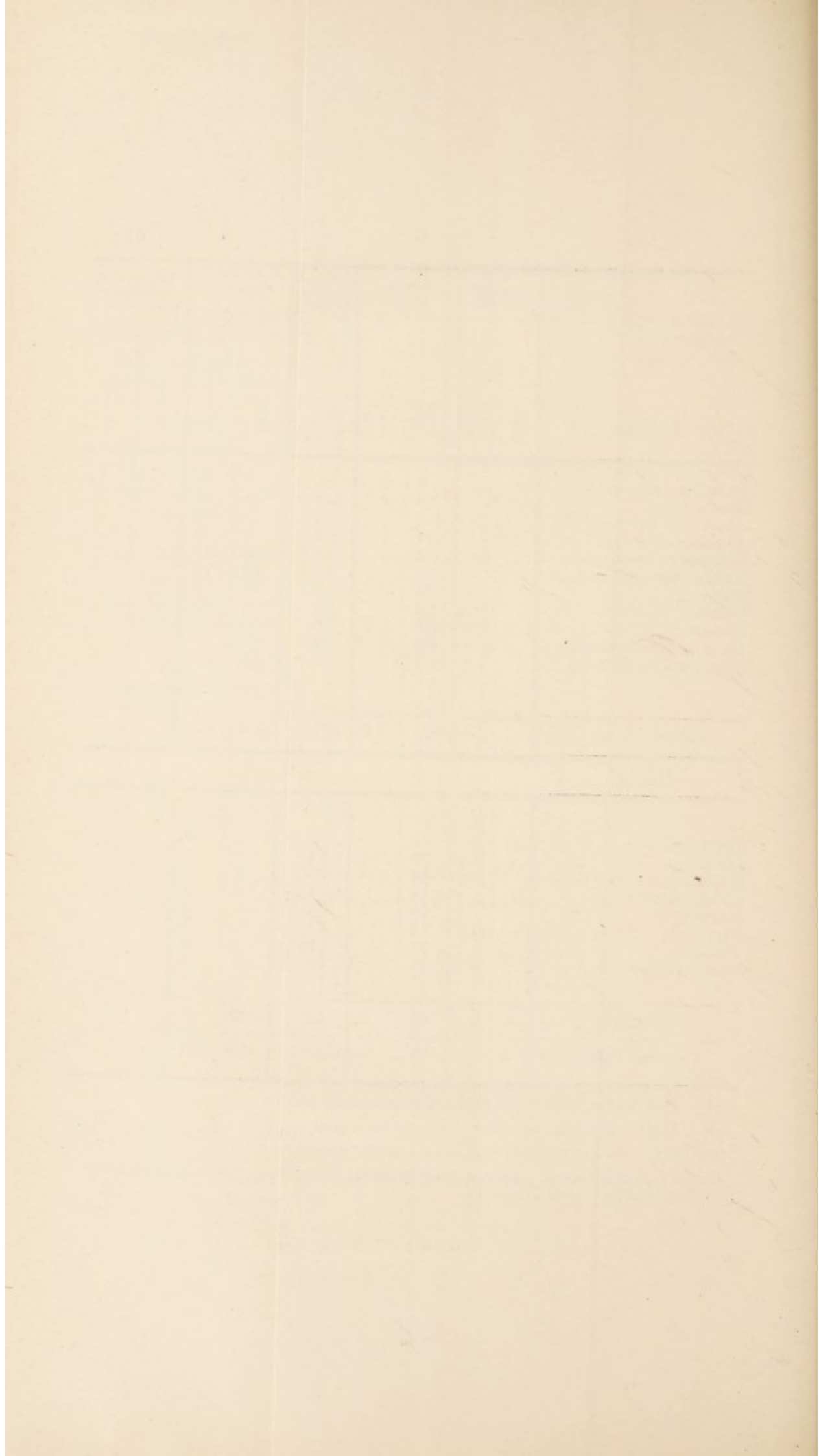
District.	Smallpox.		Scarlet Fever.		Diphtheria and Membraneous Croup.		Enteric Fever.		Puerperal Pyrexia.		Pulmonary Tuberculosis.		Non-Pulmonary Tuberculosis.		Ophthalmia Neonatorum.		Acute Poliomyelitis & Polio Encephalitis.		Pneumonia		Encephalitis Lethargica.		
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths (b)	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths (a)	Cases	Deaths	
<i>Urban</i>																							
Bewdley Borough			3		25	1			2		3	1	1							7	4		
Bromsgrove			52		103	3			3		25	11	9		2					13	20		3
Droitwich Borough			2		6	1					9	2	2								5		
Evesham Borough			14		5				2		15	5	5	3	1					2	11		
Halesowen Borough			37		11	1			7		28	8	10		5		1	1		50	19		
Kidderminster Borough			104	1	41	3			7		34	19	13	6	6					66	23	1	3
Malvern			44		3	1			2		13	11	3				1			17	5		
Oldbury Borough			85		63	5			12		50	30	12	6	8					116	43		1
Redditch			17	1	29	2			1	1	24	14	6	1						19	14		
Stourbridge Borough			25		49	2			12		30	22	6	2	6					52	25		
Stourport-on-Severn			17		2				6		8	5	3		3			1		28	5		
Totals			400	2	337	19			54	1	239	128	70	19	31		4	2	370	174	1	7	
<i>Rural</i>																							
Bromsgrove			29		5				5		23	10	8		1				7	10			
Droitwich			39	1	14	1	1		4	1	7	6	4	2			2		4	7			
Evesham			18	1					3		12	7	6	3	2				4	5			
Kidderminster			8		3				2		9	6	1						3	8			
Martley			25	1	5				7		4		4	1	1		1		15	8			
Pershore			13		2		1		1		17	10	3						10	8			
Tenbury			31		1	1			1		6	3	1	1	1				2	9			1
Upton-on-Severn			35		13	1		1	2	1	9	1	9	2					14	5			
Totals			198	3	43	3	2	1	25	2	87	43	36	9	5		3		59	60		1	
Grand Totals			598	5	380	22	2	1	79	3	326	171	106	28	36		7	2	429	234	1	8	

(a) The deaths refer to all cases of pneumonia, not those which are notifiable.

(b) The deaths refer to cases of Puerperal Sepsis.

Anthrax. Two cases were notified in Kidderminster Borough.

Cerebro Spinal Fever. Eleven cases were notified; One in Bromsgrove Urban, One in Halesowen, Three in Kidderminster, Three in Oldbury, and Three in Stourbridge Boro' Districts.



*Smallpox.*

No case occurred in the County during 1938, in fact, only eight cases, with one death, have been recorded during the last twenty-nine years.

*Scarlet Fever.*

Average annual number of cases, 1918-1937	-	=	608
Average annual number of deaths, 1918-1937	-	=	6
Number of cases, 1938	-	-	= 598
Number of deaths, 1938	-	-	= 5

Of the 400 cases in Urban areas, 52 occurred in Bromsgrove, 104 in Kidderminster (1 death) and 85 at Oldbury. A death occurred at Redditch where 17 cases were notified.

The disease was not epidemic in the Rural areas and the deaths were reported from Bromsgrove (One), Evesham (One) and Martley (One).

Dr. J. R. Craig, Medical Officer of Health, Kidderminster Borough, says that for some years the local incidence of Scarlet Fever has been above that for the County as a whole. In January 1938 the incidence among the adult population was unusual.

*Diphtheria.*

Average annual number of cases, 1918-1937	-	=	269
Average annual number of deaths, 1918-1937	-	=	23
Number of cases, 1938	-	-	= 380
Number of deaths, 1938	-	-	= 22

Of the 337 cases occurring in the Urban areas, 103 were notified in Bromsgrove, 41 from Kidderminster, 63 from Oldbury and 49 from Stourbridge.

There was no special incidence in the Rural areas.

Dr. G. Dudley, Medical Officer of Health for Stourbridge Borough states that in the case of a few of the patients the source of infection could be ascertained but for the greater part no obvious connection between the cases could be discovered. One case occurred in a house with one bedroom, fourteen in houses with two bedrooms and one in a house with four bedrooms. Twenty-five of the patients resided in Council houses.

In the Stourbridge Borough, 3,340 children have been immunized against Diphtheria and Dr. Dudley expresses the opinion that immunization is so satisfactory that it should be made compulsory.

In Bromsgrove Urban District rather more than 25 per cent. of all children have been immunized. Dr. Follows draws attention to the appreciable number of adults contracting Diphtheria. In Bromsgrove more than one third of the total number of cases were over 15 years of age.

#### *Enteric Fever.*

Average annual number of cases, 1918-1937	-	=	16
Average annual number of deaths, 1918-1937	-	=	2
Number of cases, 1938	-	-	= 2
Number of deaths, 1938	-	-	= 1

The County was very free from Enteric Fever in 1938, only two cases being notified, viz. One in Droitwich Rural and one in the Pershore Rural District.

The fatal case occurred at Upton-on-Severn in a case notified during 1937.

#### *Measles.*

Average annual number of deaths, 1918-1937	-	=	22
Number of deaths, 1938	-	-	= 3

#### *Cerebro Spinal Meningitis.*

Eleven cases were notified during the year. These occurred as follows, One in Bromsgrove Urban, One in Halesowen, Three in Kidderminster, Three in Oldbury and Three in Stourbridge.

#### **Welfare of the Blind.**

In view of the Blind Persons Act 1938 which came into force on the 1st April 1938, it was necessary for consideration to be given to the policy to be adopted by the County Council.

It was decided that "unemployable" blind persons who had been assisted by the Worcestershire Voluntary Association for the Blind out of grants made by the County Council should be dealt with direct. In this connection, a special Case Sub-Committee has been appointed to deal with domiciliary financial assistance to blind persons and their dependents. This Sub-Committee includes representatives of the Worcestershire Association for the Blind,

It has been decided not to fix a scale of assistance but that each case shall be considered on its merits.

Miss E. M. Mence, the Honorary Secretary of the Worcestershire Association for the Blind has been appointed as Supervisor of Blind Welfare, while the two Home Teachers employed by the Association have been appointed as whole time Officers of the County Council. The Home Teachers undertake the duty of investigating the financial and other circumstances of blind persons.

With the concurrence of the Public Assistance Committee the Relieving Officers have been appointed as almoners to distribute domiciliary financial assistance to blind persons, but in all other respects, other than assistance in an institution or medical assistance, the operation of the scheme has been removed from the poor law.

The revised procedure necessitated some slight amendment of the Council's Scheme and of the Regulations for the allocation and distribution of relief to unemployable blind persons and their dependents.

At the beginning of 1939, there were 125 cases in which assistance was being granted, the weekly sum involved being £45 9s. 9d.

The number of blind persons on the Register at the 31st March 1939 was 420.

#### **Tuberculosis.**

The Report of Dr. S. Deaner, the Chief Tuberculosis Officer will be found in the Appendix to this Report.

#### *The Death of Dr. H. Gordon Smith.*

It is with deep regret that I have to record the death, early in 1939, of Dr. H. Gordon Smith who had been Medical Superintendent of the Knightwick Sanatorium since 1908 and Chief Tuberculosis Officer since 1912.

In Dr. Gordon Smith the Council have lost a most efficient Officer whose skill and long experience will be greatly missed both at the Sanatorium and in the County.



### Voluntary Associations.

I again wish to record my appreciation of the work undertaken by Voluntary Associations including the Women's Institutes, the County Nursing Associations and the Infant Welfare Centre Committees.

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I desire to acknowledge the valuable assistance rendered by the District Medical Officers, and Sanitary Inspectors, also the loyal co-operation of the Assistant County Medical Officers, the County Sanitary Officer, Dental Officers, Health Visitors and Clerical Staff.

Your obedient Servant,

WYNDHAM PARKER, M.C.,

M.B., Ch.B. (Edin.) D.P.H. (London),

County Medical Officer.

Public Health Department,  
County Buildings,  
Worcester.

December 1939.

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WORCESTERSHIRE COUNTY COUNCIL.

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REPORT OF THE CHIEF TUBERCULOSIS OFFICER FOR 1938.

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**Staff.**

Dr. Gordon Smith, Chief Tuberculosis Officer and Medical Superintendent of Knightwick Sanatorium, died on the 6th May 1939. His death is an irretrievable loss to the County, and those who worked under him would like to take this opportunity to pay tribute to the ever-willing help and sound teaching of a most esteemed Chief.

The following appointments have been made :

- |   |                                       |
|---|---------------------------------------|
| (1) Chief Tuberculosis Officer and Medical Superintendent of Knightwick Sanatorium.       | S. DEANER,<br>M.R.C.S., L.R.C.P.      |
| (2) Assistant Tuberculosis Officer for Oldbury, Halesowen, Stourbridge and Kidderminster. | R. B. MAYFIELD,<br>M.D., D.P.H.       |
| (3) Resident Medical Officer at Knightwick Sanatorium and Assistant Tuberculosis Officer. | D. J. LENDRUM,<br>M.B., Ch.B., D.P.H. |

In addition, the treatment of the tuberculosis patients at Hill Top and Hayley Green Hospitals is supervised by the Tuberculosis Officers.

The following report on the Tuberculosis work for the year 1938 is prepared on the lines of previous reports.

**Notifications and Deaths.**

The following are the notifications and deaths for 1938, together with averages for the previous years :

Year.	Notifications.			Deaths.		
	Pulmonary.	Non-Pulmonary.	Total.	Pulmonary.	Non-Pulmonary.	Total.
Average						
1928-37	336	119	455	196	43	239
1938	293	92	385	171	28	199

It is gratifying to note that the number of notifications and deaths of cases of pulmonary tuberculosis in the County as a whole is the lowest ever recorded. It is therefore most regrettable that the onset of war with its necessary adverse conditions will tend to set the clock back with regard to our efforts in the prevention and control of tuberculosis. One effect already observed has been the increasing number of transfer cases coming from large Urban areas such as London and Birmingham into the south of the County as a safe area.

TABLE I.  
*Notifications of Tuberculosis during 1938 showing Age Periods.*

Age periods :	under 1 yr.	1-4 (4 yrs.)	5-9 (5 yrs.)	10-14 (5 yrs.)	15-19 (5 yrs.)	20-24 (5 yrs.)	25-34 (10 yrs.)	35-44 (10 yrs.)	45-54 (10 yrs.)	55-64 (10 yrs.)	65 and up- wards	Total
<b>Pulmonary—</b>												
Males -	-	-	1	5	17	26	35	18	20	19	3	144
Females -	-	3	1	3	26	29	45	19	10	9	4	149
<b>Non-Pulmonary—</b>												
Males -	-	4	5	8	5	6	4	2	4	-	-	38
Females -	-	7	12	8	4	7	9	4	2	1	-	54
<b>Total -</b>	-	14	19	24	52	68	93	43	36	29	7	385

TABLE II.  
NOTIFICATIONS OF ALL CASES OF TUBERCULOSIS SHOWN IN SANITARY AREAS.

District.	Total cases notified 1938.	Population, 1938.	Notification Rate per 1,000 of Population.		Death Rates per 1,000 of Population.	
			Average 1933-37.	1938.	Average 1933-37.	1938.
Bewdley Borough	3	4296	1.37	0.70	0.57	0.23
Bromsgrove Urban	30	23540	1.15	1.27	0.59	0.47
Droitwich Borough	8	4662	1.20	1.71	0.49	0.64
Evesham Borough	18	10910	1.20	1.65	0.68	0.73
Halesowen Borough	34	35970	1.20	0.95	0.68	0.22
Kidderminster Borough	46	32570	1.84	1.41	0.83	0.77
Malvern Urban	15	17320	1.00	0.86	0.75	0.64
Oldbury Borough	58	45450	1.80	1.28	0.80	0.79
Redditch Urban	27	22560	1.33	1.20	0.69	0.63
Stourbridge Borough	32	35130	1.10	0.91	0.71	0.68
Stourport-on-Severn Urban	9	7692	1.58	1.17	0.62	0.65
Bromsgrove Rural	25	20340	1.05	1.23	0.53	0.49
Droitwich Rural	9	11220	0.99	0.80	0.50	0.71
Evesham Rural	17	13950	1.03	1.22	0.65	0.72
Kidderminster Rural	8	7667	1.00	1.04	0.51	0.78
Martley Rural	7	10520	1.06	0.66	0.71	0.09
Pershore Rural	18	13140	0.98	1.37	0.75	0.76
Tenbury Rural	5	5233	1.50	0.95	0.80	0.76
Upton-on-Severn Rural	16	12610		1.27	0.60	0.24
	385	334780	1.32	1.15	0.63	0.59

Table I. reveals the persistent high incidence of the disease in the 15-19 year age group, particularly in the females, and also the increasing tendency to higher incidence in the male age groups over 45. The cases in the younger age groups are invariably acute and require urgent treatment; those in the higher age groups are usually chronic cases who disseminate the disease and need isolating.

Table II. A scrutiny of this Table shows a slight rise in the death rates of the Oldbury and Kidderminster Boroughs. The maintenance of a higher death rate in Oldbury was anticipated because of the number of transfer cases in the previous years, while Kidderminster provides an example of the acute adult type of case where the disease takes a rapidly fatal course often within a year of notification. The figures for Stourport are associated with increasing urbanisation and transfer cases. The sudden fall in the death rate in Halesowen is to be noted.

#### New Cases and Mortality.

Table III. sets out the total number of new cases heard of in 1938 by notification and transfer, including cases transferred from one local authority to another within the County. The deaths are those given by the Registrar General.

TABLE IIIa.

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0-1 -	-	-	-	1	-	-	1	3
1-4 -	-	3	4	8	-	-	-	2
5-14 -	6	4	14	22	1	21	3	2
15-24 -	46	61	12	12	17	21	4	2
25-34 -	40	52	10	9	24	16	1	3
35-44 -	23	23	3	4	12	7	2	3
45-54 -	22	10	4	3	18	5	1	1
55-64 -	25	11	-	1	19	2	-	-
65 and upwards -	7	5	-	-	7	1	-	-
TOTALS -	169	169	47	60	98	73	12	16

### Returns under Tuberculosis Regulations 1927.

The following cases remained on the registers of Medical Officers of Health at the end of 1938 :

	Males.	Females.	Total.
Pulmonary cases - -	640	605	1245
Non-pulmonary cases - -	220	241	461
	<hr/>	<hr/>	<hr/>
	860	846	1706
	<hr/>	<hr/>	<hr/>

### Deaths of Un-notified Cases.

In six cases notification should have been effected. Four were thought to be notified elsewhere and in two, the diagnosis was not made until after death.

### Institutional Treatment.

Table IV. gives the average number of beds occupied in the year.

In order to avoid a long waiting list for admission into Sanatorium, it has been necessary to increase the number of beds at our disposal. Arrangements have been made with the City of Birmingham for the use of six beds (four males, and 2 females) at the Romsley Hill Sanatorium.

The contemplated enlargement of the Tuberculosis Pavilion at Hayley Green will unfortunately have to be postponed in view of the outbreak of hostilities.

The following shows the number of patients who received treatment for pulmonary tuberculosis at Institutions out of the County during the year :

Preston Hall - -	-	-	1
Cranham - - -	-	-	2
Papworth - - -	-	-	1
Midhurst - - -	-	-	2
Newtown - - -	-	-	1
Nieuport - - -	-	-	2
London - - -	-	-	1

It is most undesirable that a patient who is doing very well but who is not yet quiescent, should have to be discharged in order to make way for a newcomer, and it is therefore essential that there should be a sufficient number of beds at our disposal so as not to interfere with the proper length of treatment required by all patients.

TABLE IV.

	Observation.	Pulmonary Tuberculosis.		Non-Pulmonary Tuberculosis.	Total
		"Sanatorium" Beds.	"Hospital" Beds.	Disease of Bones and Joints. Other Con-ditions	
Adult Males ... ..	3	43	16	15	77
Adult Females ... ..	2	30	17	5	54
Children under 15 ...	1	3	2	31	37
Total ... ..	6	76	35	51	168

#### Immediate Results of Institutional Treatment.

Table VI. sets out the immediate results of Institutional treatment.

#### Dispensaries.

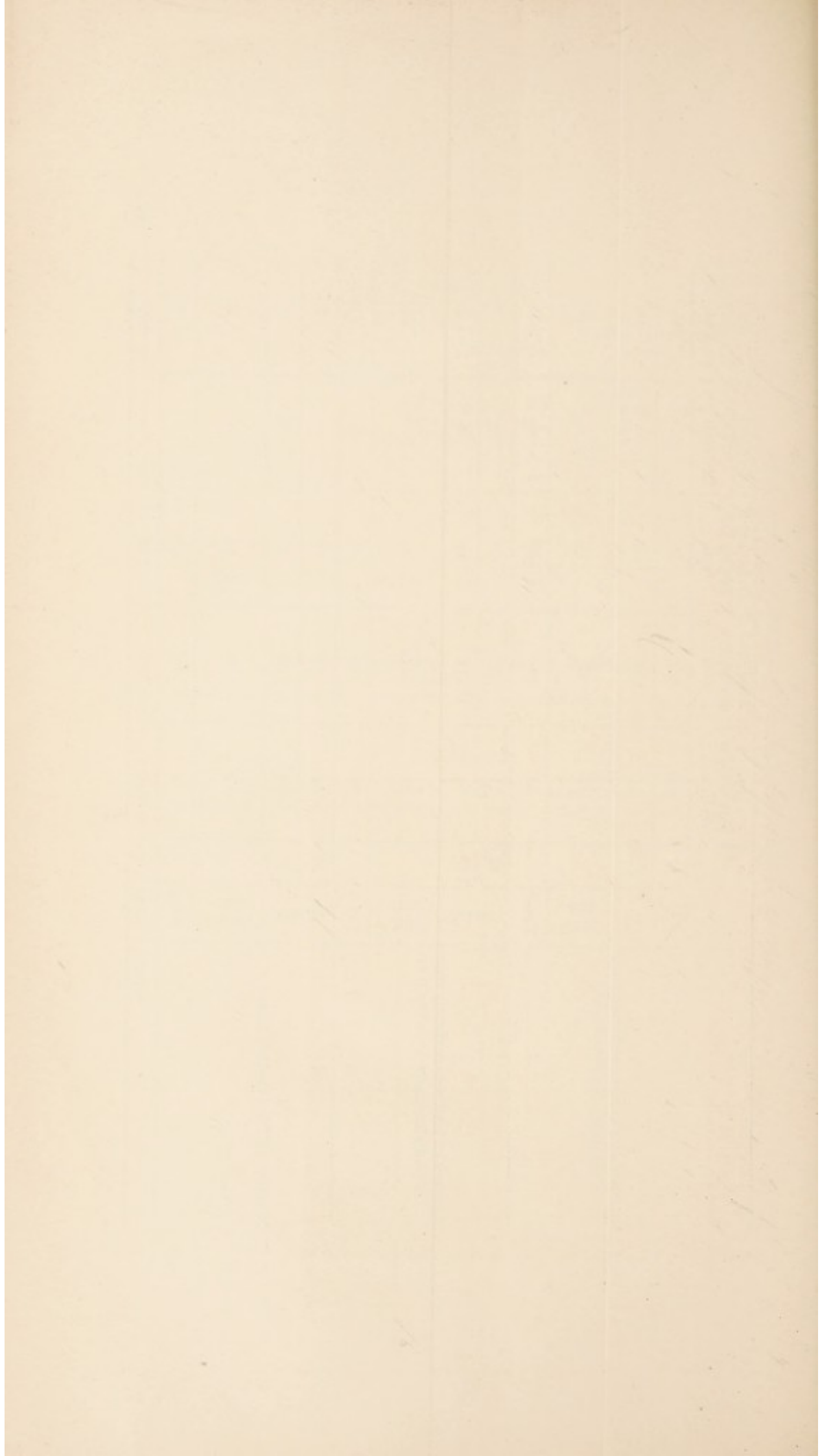
Table VII. sets out particulars as to the Dispensary sessions, attendances, etc., and Table VIII. gives a record of the work carried out at the Dispensaries.

The premises at Bromsgrove were opened in April, 1939 and are very satisfactory.

TABLE V.  
RETURN SHOWING THE EXTENT OF RESIDENTIAL TREATMENT.

	Adults	Child- ren.	Total	In Institutions on Jan. 1.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31.
Number of Patients suffering from Pulmonary Tuberculosis.				48	121	88	27	54
				41	115	90	20	46
				4	14	11	1	6
				93	250	189	48	106
Number of Patients suffering from non-Pulmonary Tuberculosis.				11	23	18	-	16
				5	15	12	2	6
				32	21	24	-	20
				48	59	54	2	51
Number of Observation Cases				2	18	18	-	2
				4	14	16	1	1
				2	16	16	-	2
				8	48	50	1	5
Grand Total				149	357	293	51	162







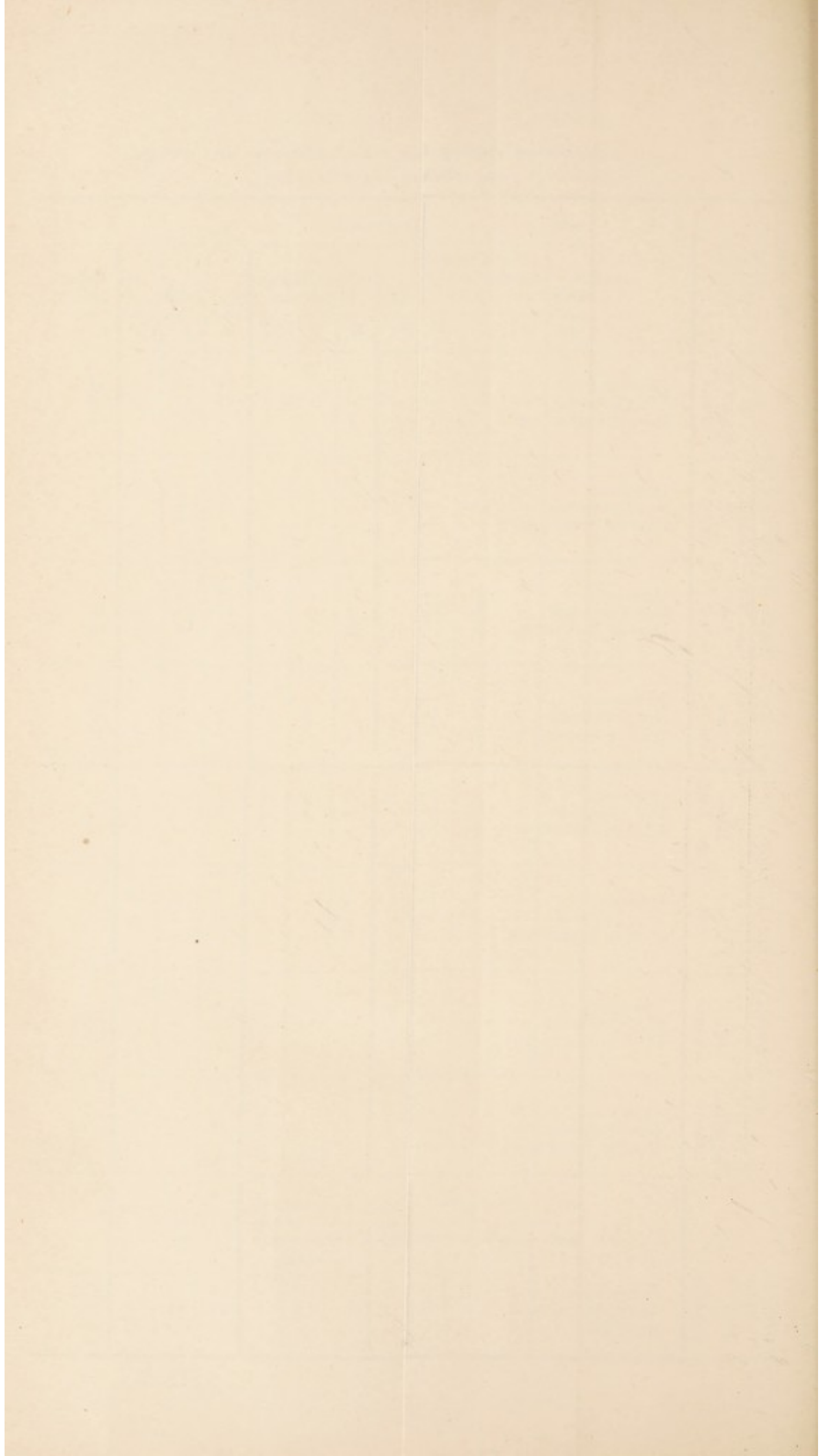


TABLE VII.  
*Dispensary Work.*

Dispensary.	Address.	Medical Officer.	Day and Time.	Total No. of Attendances 1938	Average attendance per Session 1938
Promsgrove	Clinic, Recreation Road	Dr. Mayfield	Tuesday, 3 p.m.	241	5
Halesowen	14 Laurel Lane	Dr. Deaner	Wednesday, 5 p.m.	553	10.6
Kidderminster	General Hospital	Dr. Deaner	Thursday, 2 p.m.	642	12.3
Oldbury	Greenwood Avenue, Langley	Dr. Deaner	Monday, 5 to 7 p.m.	869	18.0
Redditch	Elm Road	Dr. Mayfield	Friday, 2 to 4 p.m.	359	7.0
Stourbridge	Dispensary	Dr. Deaner	Tuesday, 2 p.m.	431	8.8
Worcester	Shirehall Yard	Dr. Mayfield	Wednesday, 3 p.m.	441	8.5

TABLE VIII.

RETURN SHOWING THE WORK OF DISPENSARIES DURING THE YEAR 1938.

Diagnosis.	Pulmonary.				Non-Pulmonary.				Total.				
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
<b>A.—NEW CASES</b> examined during the year (excluding contacts) :													
(a) Definitely tuberculous .....	98	108	5	3	16	23	18	17	114	131	23	20	
(b) Doubtfully tuberculous .....	—	—	—	—	—	—	—	—	47	66	22	14	
(c) Non-tuberculous .....	—	—	—	—	—	—	—	—	79	91	31	25	
<b>B.—CONTACTS</b> examined during the year :—													
(a) Definitely tuberculous .....	7	7	—	1	—	—	1	1	7	7	1	2	
(b) Doubtfully tuberculous .....	—	—	—	—	—	—	—	—	5	6	6	6	
(c) Non-tuberculous .....	—	—	—	—	—	—	—	—	82	112	109	104	
<b>C.—CASES</b> written off the Dispensary Register as													
(a) Recovered .....	33	37	12	6	9	10	7	10	42	47	19	16	
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error) .....	—	—	—	—	—	—	—	—	219	269	177	150	
<b>D.—NUMBER OF PERSONS</b> on Dispensary Register on December 31st :—													
(a) Definitely tuberculous .....	505	466	52	52	72	79	97	101	577	545	149	153	
(b) Diagnosis not completed .....	—	—	—	—	—	—	—	—	83	100	52	40	

TABLE VIII.—Continued.

1.	Number of cases on Dispensary Register on January 1st, 1938	—	1,752
2.	Number of patients transferred from other areas and of "lost sight of" cases returned	— — — —	53
3.	Number of patients transferred to other areas and cases "lost sight of"	— — — —	110
4.	Died during the year	— — — —	167
5.	Number of attendances at the Dispensaries (including Contacts)	—	3,536
6.	Number of consultations with medical practitioners :—		
	(a) Personal	— — — —	88
	(b) Other	— — — —	1,042
7.	Number of visits by Tuberculosis Officers to Home	— —	2,110
8.	Number of visits by Nurses or Health Visitors to homes for Dispensary purposes	— — — —	10,711
9.	Number of—		
	(a) Specimens of sputum, etc., examined	—	399
	(b) X-Ray examinations made in connection with Dispensary work	— — — —	751*
10.	Number of "Tb plus" cases on Dispensary Register on December 31st	— — — —	593

\*In addition 298 films were taken of County patients at Knightwick Sanatorium.

#### Bacteriological Work.

The following number of specimens were examined under the County Scheme :

Sputum tests	— — — —	397
Guinea pig tests	— — — —	2
Pleural effusions, &c.	— — — —	5

We should like to acknowledge the close co-operation of Mr. Monk, the County Analyst, and his Staff, upon whom we are making heavy demands.

#### Contacts

The number of contacts examined in 1938 was 447. Of these, 17 were found to be definitely tuberculous and 23 were referred for further observation.

#### Beds in Public Assistance Institutions.

Table VIIIa gives the beds available and in use by tuberculous patients at the County Public Assistance Institutions during the year.

TABLE VIIIa.

NUMBER OF BEDS AVAILABLE FOR THE TREATMENT OF TUBERCULOSIS ON THE  
31ST DECEMBER, 1938.

IN PUBLIC ASSISTANCE INSTITUTIONS BELONGING TO THE COUNCIL.

Name of Institution.	For PULMONARY cases.		For NON-PULMONARY cases		TOTAL
	Adults	Children under 15	Adults	Children under 15	
Bromsgrove Evesham Martley Kidderminster Persnore Upton on Severn	No beds reserved, but cases are admitted when required.				

Return showing the Extent of Residential Treatment provided during the year in Public Assistance Institutions for persons chargeable to the Council.

		In Institutions on January 1st	Admitted during the year.	Discharged during the year	Died in the Institution.	In Institutions on Dec. 31st
Number of patients suffering from pulmonary tuberculosis admitted for treatment	Adult Males	1	5	3	2	1
	Adult Females	-	4	2	2	-
	Children	-	-	-	-	-
	TOTAL	1	9	5	4	1
Number of patients suffering from non-pulmonary tuberculosis admitted for treatment.	Adult Males	1	-	-	-	1
	Adult Females	-	-	-	-	-
	Children	-	1	-	1	-
	TOTAL	1	1	-	1	1
GRAND TOTAL		2	10	5	5	2

### After-Care Committees.

The following is a summary of the work of the After-Care Committees :

Committee.	No. of Meetings.	No. recommended for re-housing during 1938.	No. having rent relief during 1938.	No. having food allowances in 1938.
Halesowen	- 5	5	1	7
Oldbury -	- 5	9	5	15
Redditch -	- 2	-	-	7
Kidderminster	- 5	4	-	13
Stourbridge	- 3	6	-	14
South of County*	- -	-	-	50

\*In those areas where After-Care Committees have not been appointed the supervision is undertaken from the office at Worcester.

### Prevention of Tuberculosis Regulations 1925.

#### Public Health Act 1925. Section 62.

It was not necessary to take action under either of these Regulations during the year.

### Non-Pulmonary Tuberculosis.

No change has been made in the routine of the Orthopaedic Scheme.

Cases were treated in the following Institutions :—

Birmingham Royal Cripples Hospitals	-	-	-	42
Shropshire Orthopaedic Hospital	-	-	-	3
Worcester Royal Infirmary	-	-	-	6
„ Newtown Hospital	-	-	-	16
Birmingham Children's Hospital	-	-	-	4
Margate Home	-	-	-	1
				—
				72
				—

### Out-patient treatment.

There were 344 attendances of 103 cases at the Clinics maintained by the County Council at Stourbridge, Redditch and Worcester, and at the Clinic at Broad Street, Birmingham.



### Artificial Pneumothorax Treatment.

During the year this treatment was attempted in 37 cases. 29 of these were at Knightwick Sanatorium, 6 at Hill Top Tuberculosis Pavilion, and 2 at Hayley Green Tuberculosis Pavilion. In 6 of these it was not possible to get a successful induction owing to adhesions, etc.

The following is a summary of the condition at 31st December 1938 of all patients for whom this treatment had been attempted since 1924 :

			Successful induction.	Unsuccessful induction.
<i>Refills continuing :</i>				
Negative or no sputum	-	-	30	
Positive sputum	-	-	17	
<i>Refills discontinued :</i>				
Negative or no sputum	-	-	20	1
Positive sputum	-	-	36	15
<i>Left County</i>	-	-	20	4
<i>Dead</i>	-	-	70	46
			193	66
			259	

The treatment tends to cause healing in the diseased areas of the affected lungs, and therefore at the same time renders the patient non-infectious.

It will be seen from the above Table that out of 193 cases, 50 have been rendered non-infectious.

Where artificial pneumothorax treatment is incomplete and the affected lung cannot be sufficiently collapsed, surgical intervention is often necessary and arrangements have been made with the Kidderminster General Hospital where phrenic evulsion and adhesion cautery are performed. Cases requiring major surgical operation are sent to the London Chest Hospital.

### After Results of Treatment.

Tables IX. and X. set out the condition of all patients who have received treatment under the County Scheme.

(Signed) S. DEANER,

M.R.C.S., L.R.C.P.,

Chief Tuberculosis Officer.

October 1939.







