

Promotion of HEALTH
through *Prevention* of DISEASE
and *Prevention* of DISABILITIES



COOK COUNTY DEPARTMENT OF PUBLIC HEALTH



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FOREWORD

A Board of Health shall "within its jurisdiction, enforce and observe all state laws pertaining to the preservation of health . . ." This quote from the law permitting the establishment of county health departments is the theme of this report. Activities directed to the preservation of health are highlighted.

One aspect of our work is aimed at preventing disease. Immunization and health supervision are prime examples of this approach. Another area vital in preserving health is directed toward those conditions which cannot be prevented but whose further damages can be reduced.

Public health activities have been designated as primary, secondary and tertiary prevention . . .

PRIMARY PREVENTION refers to activities like immunization which can prevent the disease.

SECONDARY PREVENTION refers to early diagnosis and the institution of measures to prevent disabilities, such as PKU, a form of mental retardation.

TERTIARY PREVENTION relates to rehabilitation, which aids the person to live as independently as possible within the limits of his disability.

The stabilization of the health of each individual enables that person, within his capabilities, to make his contribution to society.

Prevention Starts Before The Baby Is Born

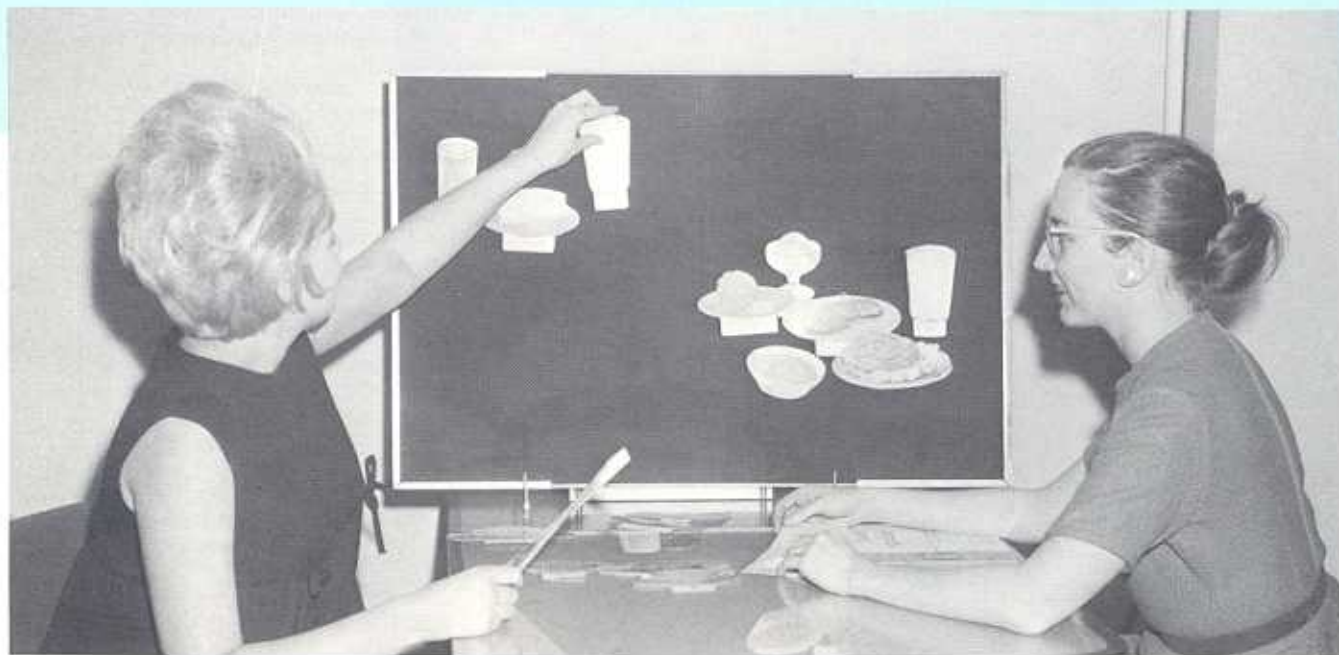
Good medical care of the expectant mother is a safeguard to the well-being of the infant-to-be. Prevention of disease in the mother, especially during the first three months of pregnancy, is important in the prevention of developmental defects in the fetus. Where private medical care is not possible, pregnant women are referred for clinic care. The objective of this part of the program is to assure proper medical supervision to every expectant mother.



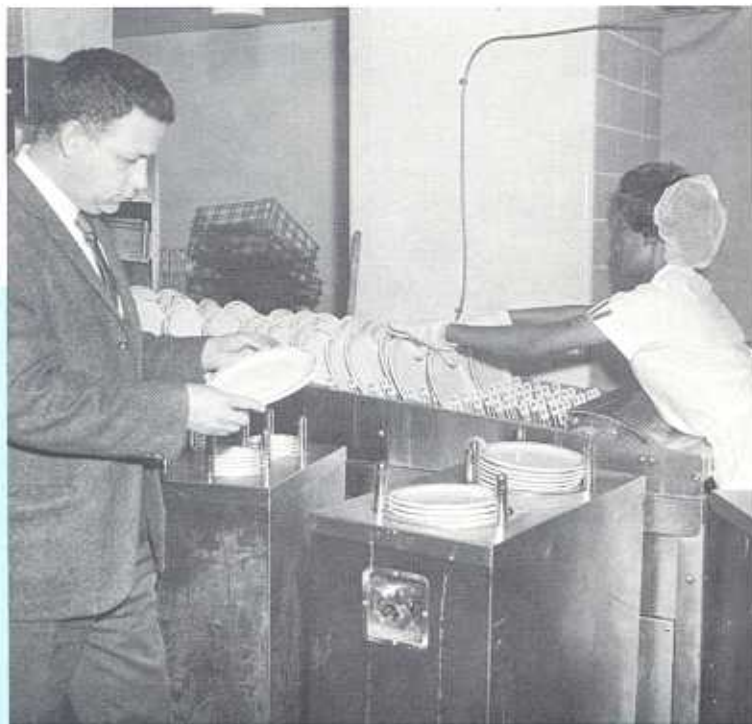
Public health nurse takes blood pressure for physician's review.

For expectant mothers CCDPH operates a prenatal clinic twice each month at Robbins. Mothers-to-be are urged to come to the clinic early in their pregnancy and continue under medical care until the baby is born. Classes for expectant mothers stress the importance of wholesome family life, the influence of the mother's physical condition upon her emotional health, instructions about diet and meal planning, the importance of preparing the family for the baby's arrival, and instructions about caring for the newborn infant.

Food and health are partners.



Prevention Continues Into The Hospital



Ninety-nine percent of the infants are born in hospitals. Even before the total hospital inspection program was instituted, the possibility of the spread of disease to newborns had been well-recognized and the maternity sections of hospitals had been inspected to seal off all avenues of disease spread to this group. Now the whole hospital is routinely inspected to prevent the spread of diseases from personnel to patient, patient to patient, and patient to personnel. All hospital facilities are inspected including water supply, sterilizers, laundry and food-handling equipment.

Babies Born Prematurely Require Special Care

"Premies" are infants of low birth weight, usually less than 5½ pounds, born ahead of schedule and therefore need special care in special surroundings. CCDPH arranges transportation by specially equipped ambulances for such babies who require hospitalization in established premature nurseries. When the premature infant is big enough and strong enough to be cared for at home, the public health nurse visits regularly to advise the parents about care, feeding and immunizations.

From the day the baby is born . . .

All efforts are directed toward preventing any hazard to his growth and development

This consists of assuring every newborn of immediate and continuous medical supervision and protection against all the common diseases which can be controlled . . . whooping cough, diphtheria, tetanus, measles, polio and smallpox. For the usual infant and preschool child, the CCDPH's aim is one of health supervision and parent education.

In the child health conferences co-sponsored by the Department and community groups, well children receive high quality medical and nursing supervision. These services are extended to families who are financially unable to provide for this care.



In the home public health nurse demonstrates baby bath to new mother.



Mother registers baby at child health conference.



Volunteer assists public health nurse at child health conference.

The Review of Vital Records Reveal Valuable Information



Birth and death certificates often disclose clues that are significant to public health workers. These records are routinely reviewed by the medical staff to discover premature births, home deliveries, and birth defects. When the cause of death of a newborn infant is due to a communicable disease or complications of pregnancy, additional information is obtained to determine if the death might have been preventable.

The review of birth certificates helps to uncover conditions that require further study.

Birth and death certificates can be obtained on request from the Health Department. This confidential information is recorded and filed by the Department and copies of these records are sent to the County Clerk's office.



Prevention...

PKU Mental Deficiency



When PKU is discovered early, a special diet will prevent the mental retardation.

A relatively new preventive measure is the testing of newborn infants for the defect known as phenylketonuria (PKU). This is a rare hereditary disease which causes severe mental retardation unless diagnosed and treated during infancy. Early detection and treatment will permit normal and near normal development.

On the local scene CCDPH moved to combat PKU by urging hospitals to test the blood of all newborn babies before they leave the hospital and by encouraging physicians to test the urine of all infants for PKU. CCDPH provides the rather expensive, but necessary, dietary formula for these infants as well as nursing supervision in their homes.

If the infant having PKU is promptly diagnosed and treated he can become a self-sufficient citizen rather than an institutionalized dependent.

Prevention...

Accidental Poisoning In Children

Prevention of accidental poisoning in children is receiving skilled attention. The Department is prepared to assist individuals and groups in examining this health program in the community, and to plan programs aimed at prevention. Parents are warned to be especially alert to the danger of potential poisoning accidents in the home.

Poison Control Centers have been established in many hospitals to aid in this program. These centers have complete lists of materials that are poisonous when ingested, and an up-to-date list of antidotes. All reports from these centers are reviewed for preventable factors to help in the educational program.



Drugs, poisons, and other household chemicals should be kept out of the reach of children.

Joseph A. Bowen

Prevention and control of communicable diseases is a continuing effort

Since the problem of communicable diseases is an ever changing one, CCDPH is constantly on the alert to apply protective measures to safeguard the individual and the community.

Promotion of immunization, investigation of cases, medical consultation to physicians, and home visits by public health nurses to selected cases are de-

signed to prevent and control communicable diseases.

Coupled with the control measures are education programs to inform the public about the nature of these diseases and the advantages of protection by immunization.



Immunization clinics are held for persons in need of this service.

Biologics are distributed to physicians to be used in the control of communicable diseases.



VENEREAL DISEASE in Young People Has Become a Significant Health Problem

The stepped-up activities of the Department in controlling venereal disease lies in the physician visitation program initiated in 1964. Private physicians were visited to encourage reporting all cases of V.D. treated by them, and to offer them health department services.

Venereal Disease investigators interview all persons suspected of having a venereal disease. The increase in reported cases among teen-agers has stimulated a broad attack on this problem with educational programs in the schools, discussions in PTA meetings, and with church groups.

The registry contains records of all reported cases of rheumatic fever and rheumatic heart disease.



Prevention Of Rheumatic Fever Is Possible

Through new methods of diagnosis and treatment prevention of rheumatic fever is possible. The Department's program is designed for the prevention of recurrent attacks of rheumatic fever for medically indigent individuals who have a diagnosed case of rheumatic heart disease. Once a case is registered, it is continued on the registry and receives prophylactic medication unless the diagnosis is changed or the physician decides that the medication can be discontinued.

A home visit is made by the public health nurse on each newly diagnosed case. Thereafter, home visits are made on the basis of health needs in the home.

Through the Department's public health education services, community education programs are promoted to increase an awareness of the need for prompt diagnosis and treatment of "strep" infections, such as "strep sore throat." Prompt recognition and treatment can prevent both initial and recurring attacks of rheumatic fever and lessen the possibility of rheumatic heart disease.



The tuberculin testing programs have been streamlined on the basis of knowing the tuberculin status of each school child. Each child whose test shows a positive reaction is examined further and members of the family X-rayed to determine if active TB is present.

TB Continues To Be a Major Health Problem

Detection of exposure to TB among children can lead to adults who have the disease without knowing it. Searching out persons who have tuberculosis before they can infect others and while there is a chance for cure is an important means of protecting the entire community. Finding unknown cases of TB through chest X-rays and tuberculin tests are carried on jointly by official and voluntary health agencies in the area.

The Mentally Retarded Child Can Be Helped

Retarded children need love and good medical and physical care as do all children.

The public health nurse helps parents of these children to understand the need to develop and use self help skills that will lead them toward independence in later life.

She helps by teaching and demonstrating to parents ways in which they can teach their child to self feed, to play, to talk, to dress, to be clean, to be toilet trained, to develop social skills and to discipline wisely.

She helps parents to help the retarded child to become an important part of the family group. She gives understanding support to the parents helping them to realize their contribution in the development of the child to his fullest potential.

The cooperation between the school, the physician and the parent is most important in the care of the retarded child and the public health nurse acts as the liaison person.



The public health nurse helps this mother to understand the need to develop whatever potential the child has for self help skills. Here she teaches self-feeding.

The public health nurse observes the teacher teaching nutrition which also involves manual skills to retarded children.



On a visit to the school, the public health nurse observes the skilled teacher helping a student to develop better coordination.



Environmental Health Services

Are Important To Disease *Prevention*

Constant attention is paid to the purity of drinking water and the disposal of sewage. If unsupervised these are prime methods of spreading disease. Swimming is another use of water which can be involved in the spread of disease.

▶ Inspections are made of public, private and semi-private water supply and sewage disposal systems. In addition, many facilities that serve the public are not only inspected but are also licensed, such as public swimming pools, hospitals, nursing homes, trailer parks, and motels.

▶ Analyses of samples from public and private water supply systems, swimming pools, private wells, new main installations and Forest Preserve District wells are made for quality control purposes. Reports of approximately 15,000 samples a year are prepared and forwarded to the responsible individuals.

▶ The public water supply program within the Department's jurisdiction is unique in that, of the 123 incorporated areas, approximately 60 receive their water from the city of Chicago. All water supplies are routinely sampled on a monthly basis; the results analyzed and transmitted to the town affected.

▶ Small sewage treatment plants are of concern since they are usually heavily loaded and poorly maintained. The engineers work with the owners to keep a plant in condition so that it produces an acceptable effluent. When the owner fails to cooperate, however, the case is then sent to the State's Attorney for legal action. Inspections are made of sewage treatment plants serving trailer parks, restaurants, motels, and private disposal systems serving individual homes. Approval must be obtained from the Department to install a private water or sewage disposal system and prior to issuance of an approval, a field survey of the lot is made by a staff member. Subsequent to the Health Department approval, the Cook County Building Department issues the building permit and makes all field inspections of the installation.

▶ Acting as agent for the State Health Department, the Department enforces the State Law governing public swimming pools. Therefore, at least once a year all operating pools are inspected. In addition, the Cook County Building Ordinance requires yearly inspections. This code also requires approval of plans for private pools prior to issuance of a building permit.

▶ Trailer parks and motels are regulated by the Department through enforcement of the County Tourist Camp Operating Ordinance. Operating permits are issued following inspection. Municipalities having adequate local ordinances exercise control over the trailer parks and motels within their limits. In these instances the Health Department acts in an advisory capacity in the enforcement of local ordinances.

▶ In 1961 State legislation required the inspection and licensure of migrant labor camps. Subsequent legislation eliminated camps having less than ten workers and camps that operate for 20 days or less in any one calendar year. To date, 23 camps have been licensed and all camps regardless of restrictions have been visited.

▶ The most challenging and time consuming program is that in respect to requests for service or abatement of nuisances received in connection with private water supplies, sewage disposal systems, recreational areas, drainage, subdivision problems, stream pollution, nuisances and garbage and refuse dumps.

The Cook County Health Department had its antecedents in the wartime Cook County Public Health Unit. The County Board, the Illinois State Health Department, and the U. S. Public Health Service combined to set up this service in the Cook County Bureau of Public Welfare . . . the first County Health Unit in the State of Illinois. When enabling legislation was passed, the Cook County Board of Commissioners authorized the establishment of the CCDPH in 1945.

JURISDICTION

Of the *suburban* Cook County population (estimate 1964—1,773,000), 88 percent is under the jurisdiction of this Department; the rest is served by three other official health agencies.

PERSONNEL

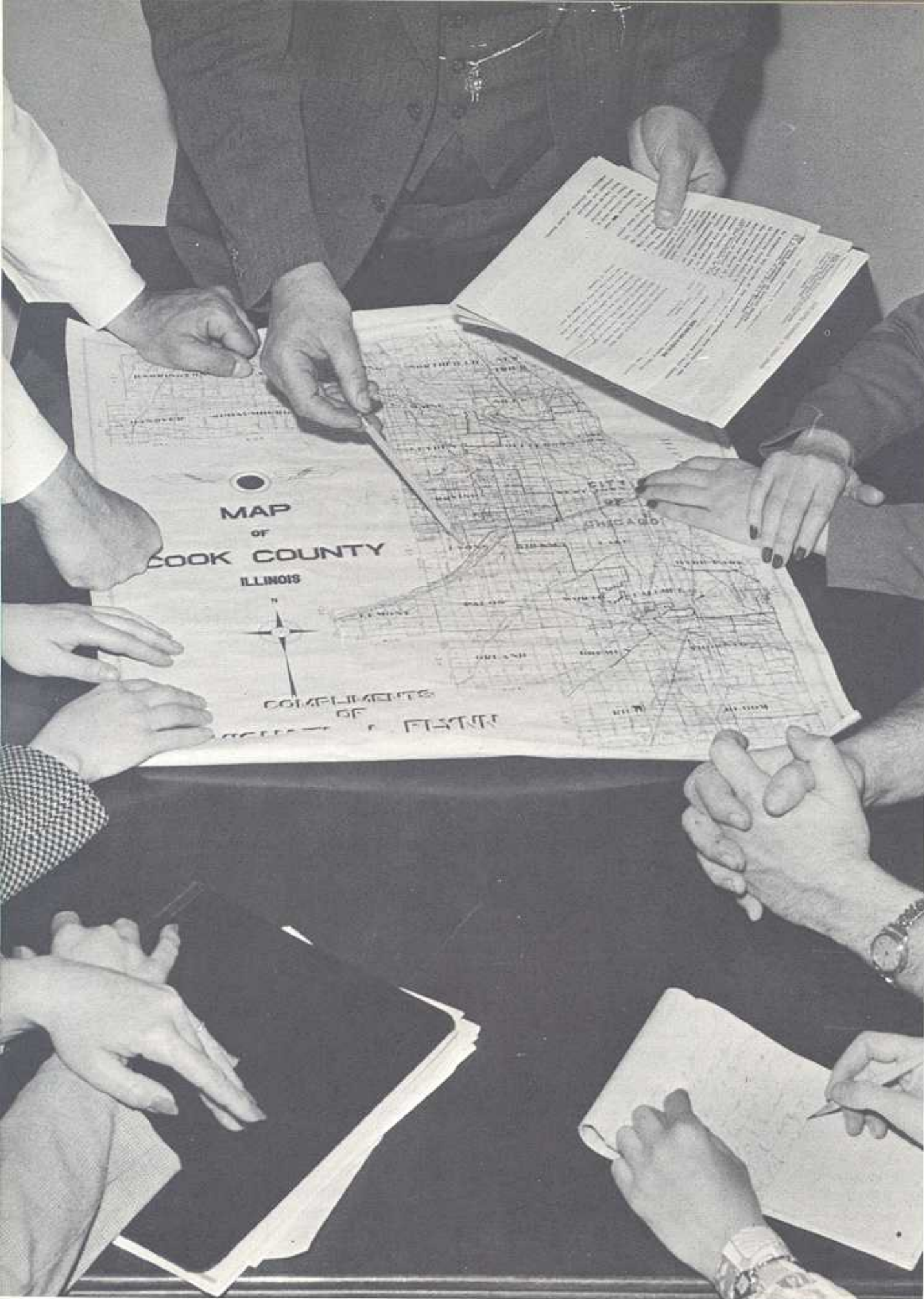
Appointments are made by the President of the Cook County Board of Commissioners. All professional personnel must meet minimum educational and experience requirements established by the Illinois Department of Public Health.

The department operates through nine major divisions: Preventive Medicine and Epidemiology; Dental Health; Maternal and Child Health; Nursing; Public Health Education; Nutrition; Sanitary Engineering; Veterinary Public Health, and Vital Statistics.

The division heads are responsible to the Chief Medical Officer who is the Director of the Department. These division heads plan programs and the implementation thereof with the Director. Field services are supplied through four district offices situated in strategic places throughout the County.

BUDGET

The budget comes from the corporate funds of Cook County and is appropriated yearly by the County Board. The Department is also subsidized by the Illinois Department of Public Health. The total budget from all sources for 1964 was approximately \$700,000 (this included funds for special projects).



PLANNING is essential to good public health practice.

People Are Talking About Public Health . . .

PEOPLE ARE TALKING ABOUT . . . the CCDPH, the largest county health department in the State of Illinois, serves more than a half million people in an area of 725 square miles . . . its services are designed to prevent disease, prolong life, and improve the health of the public. **PEOPLE ARE TALKING ABOUT** . . . the educational efforts of CCDPH to keep the citizen aware of his responsibilities towards his personal health as a major part of the prevention programs . . . the laboratory services provided through the Illinois Department of Public Health to help physicians diagnose, treat and prevent disease.

PEOPLE ARE TALKING ABOUT . . . a new Food Service Establishment Ordinance passed by the Cook County Board of Commissioners to become effective on April 1, 1965 . . . this ordinance will exercise control over all food establishments in the unincorporated areas of Cook County . . . in 1964 the Department continued its program of advising communities having food handling regulations . . . several courses of instruction were held for food handlers. **PEOPLE ARE TALKING ABOUT** . . . a program to prevent the feeding of uncooked garbage to swine as an aid to the eradication of hog cholera and the control of porcine trichinosis . . . surveillance of the County's animal population to control diseases that can be transmitted to humans through contact or by consumption of animal food products.

PEOPLE ARE TALKING ABOUT . . . the way CCDPH works to prepare people to care for themselves in the event of a widespread disaster . . . volunteers, recruited by CCDPH staff, are given instruction in teaching the Medical Self Help Training course . . . at least one person in every family should be prepared to provide emergency care until medical help is available. **PEOPLE ARE TALKING ABOUT** . . . In Illinois, CCDPH is one of three health departments approved by the American Medical Association to provide experiences for physicians in the specialty of Preventive Medicine and Public Health . . . Nurses, nutritionists, public health educators, and dietetic students also are provided opportunities to gain insights into public health through supervised field training experiences.

PEOPLE ARE TALKING ABOUT . . . how CCDPH encourages cities and communities to pass legislation to permit fluoridation of local water systems which lack these natural fluorides . . . adjusting the fluoride content of the public water supply is an inexpensive method of reducing the incidence of dental cavities, especially among children . . . CCDPH operates 20 dental clinics in schools, health centers and, also, has a mobile unit for preventive dental treatment of children who are in need of this service. **PEOPLE ARE TALKING ABOUT** . . . the increase in the incidence of the venereal diseases has stimulated a program in cooperation with the U.S. Public Health Service . . . the series of four half-day seminars on VD education in the school curriculum held for nurses . . . intelligent VD education in the school is one way of combating the increasing incidence of this disease.

STATISTICS 1964

VITAL STATISTICS*

POPULATION	1,570,000**
Live Births	
Total	33,076
Hospital births	32,911
Non-hospital births	165
Premature births	2,231
Deaths	
All ages	10,937
Total Infants	
Under 1 year	717
Under 28 days	559

*CCDPH jurisdiction.
**1963 estimates U.S. Census.

TOP TEN KILLER DISEASES

1. Heart Disease	4,553
2. Cancer	2,095
3. Vascular lesions of central nervous system	1,010
4. Congenital malformations and diseases of early infancy	631
5. All accidents	447
Motor vehicle	216
Other accidents	231
6. Influenza and pneumonia	323
7. General arteriosclerosis	202
8. Diabetes	182
9. Cirrhosis of liver	159
10. Other Circulatory	140

VITAL RECORDS FILED

Live Births	12,488
Stillbirths	173
Deaths	6,282
Total	18,943

VITAL RECORDS SERVICES

Certified Copies Issued	33,595
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CHILD HEALTH CONFERENCES

Number of sessions held	159
Number of locations	7
Children registered	700
Under 1 year	522
1 to 4 years	178
Visits	2,536
Under 1 year	2,105
1 to 4 years	431

PRENATAL CLINICS

Sessions per year	44
Pregnant women registered	119

SCHOOLS

Total number of schools	899
Nursing service given to	117
Public	33
Enrollment	11,273
Parochial	93
Enrollment	55,438

NURSING SERVICES

Patients admitted to nursing service	11,733
Home visits to patients	17,685
Office visits by patients	1,563

RHEUMATIC FEVER

Total cases in registry	1,159
Inactive	234
Active	925
New cases registered	199
Cases reported not receiving medication	317

SELECTED REPORTABLE DISEASES*

Diphtheria	0
Encephalitis	37
German measles	5,211
Gonorrhea	422
Infectious hepatitis	108
Measles	1,703
Meningitis (all types)	72
Polio myelitis	0
Rheumatic fever	256
Strep infections (including scarlet fever)	2,630
Syphilis	220
Typhoid fever	1

*Cases reported to the CCDPH.

Animal bites reported	7,573
(2 positive for Rabies)	

TUBERCULOSIS

Cases under investigation	358
Cases under active supervision	1,234

TUBERCULIN TESTING PROGRAMS IN SUBURBAN COOK COUNTY**

Schools tested	98
Public	75
Parochial	23
Students tested	15,192
Public	12,148
Parochial	3,044

**Cooperative programs with official and voluntary health agencies.

IMMUNIZATIONS

Administered in:	
Child health conferences	4,787
District office clinics	2,152
Total	6,939

NURSING HOMES

Services to Nursing Homes, Homes for the Aged, Homes for Children and Sheltered Care Homes.	
License visits	136
Consultant service	349
Interviews and conferences	884

ENVIRONMENTAL HEALTH SERVICES

Swimming Pools inspected	296
Private	35
Indoor	59
Outdoor	202
Water analyses reported	15,000
Septic Tank and Seepage System Applications	
Processed	430
Approvals	370
Tourist and Trailer Parks	
Licensed and inspected	97
Motels inspected	49
Nuisance complaints	
Received	385
Investigations	800
Food Handling Schools	
Conducted	6
Attendance	220
Migrant Labor Camps	
Inspected and licensed	23
Visited	48
Stream Pollution Investigations	105
Water samples reported	450
Water Treatment Plant Inspections	
Inspection surveys	60
Visits to water supplies	154
Subdivisions	
Approvals	6

PERSONNEL

Director.....John B. Hall, M.D., M.P.H.
 Business Manager.....Leo V. Hennessy
 Administrative Assistant.....Jessie Pierson

PREVENTIVE MEDICINE AND EPIDEMIOLOGY

Chief.....Colette Rasmussen, M.D., M.P.H.

MATERNAL AND CHILD HEALTH

Chief.....Helen Heinen, M.D., M.P.H.

NURSING

Chief.....Thelma Cline, R.N., M.A.

ASSISTANT CHIEFS

Elaine Nemoto, R.N., M.S., Myrtle Sorenson, R.N., M.Litt.

CONSULTANTS TO NURSING HOMES

Faye Krause, R.N., BSPHN, Helen Nystrom, R.N., M.A.

SUPERVISORS

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 Patricia Maloney, R.N. Trainee
 Mary Lou Merritt, R.N., BSN
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 Loretta Prize, R.N., BSN*
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 Carol G. Yukich, R.N., BSN

ASSISTANT SUPERVISORS

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 Dorothy Wickliffe, R.N., BSPHN

STAFF NURSES

Marian Alich, R.N., BSN
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VETERINARY PUBLIC HEALTH

Chief.....Clarence Hostetler, D.V.M.

PUBLIC HEALTH EDUCATION

Chief.....Irene Fahey, M.P.H.

NUTRITION

Chief.....Kathleen T. Hoyi, M.P.H.
 Institutional Nutrition Consultant.....Myrtle Merritt, M.S.

DENTAL HEALTH

Supervisor.....Seymour Gould, D.D.S.
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 Dental Mobile Driver.....Walter Bak

SANITARY ENGINEERING

Chief.....Robert R. deJonge, B.S., R.P.E.
 Assistant Chief.....Steven W. Nich, B.S., R.P.E.

PROGRAM SUPERVISORS

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 LeRoy V. Dzierzanowski, B.S.

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 John Schultz

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 Carl M. Biondi
 Stephen Shemanski, Nursing Home Consultant
 Jack Levinson
 James Pacelli

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 Walter J. Hackett
 Sidney B. Kanter
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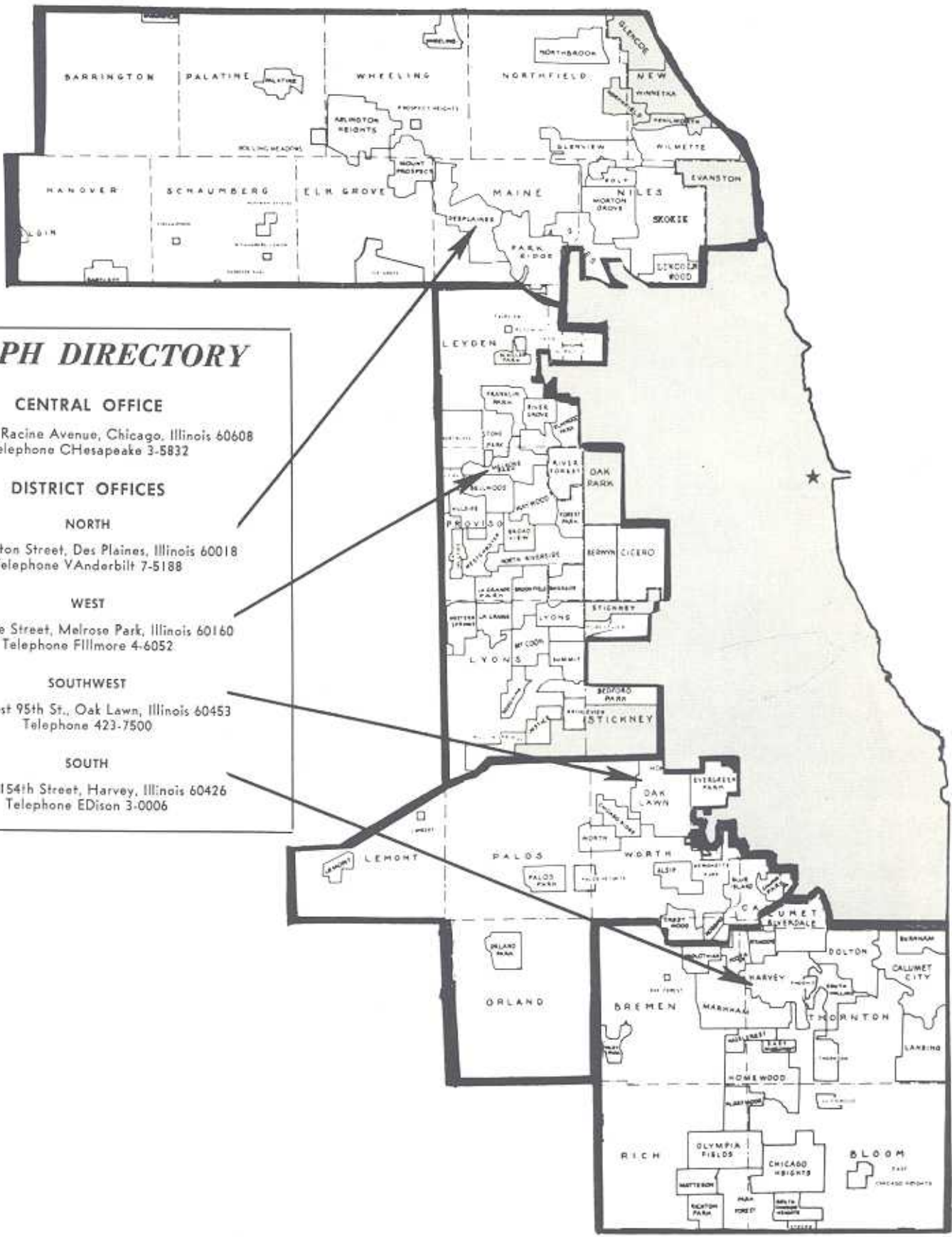
SECRETARIAL STAFF

Chief.....Lorraine Johnson
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 Alice Buck
 Jeanette Buffie
 Mylah Diffay
 Jennie Di Pofi
 Marilyn Dufkis
 Shirley Evans
 Betty Ferro
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 Thelma Lloyd
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 Margaret Moulding
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 Celia Riffkind
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 Geraldine Sepel
 Julia Sullivan
 Rose Tivolino
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Nathaniel Jones
 Leo V. Hennessy, Jr.*
 Edward Hennessy

*Resigned



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*Deceased

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