[Report of the Medical Officer of Health for Merton].

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Merton Urban District Council.

REPORT

OF

Medical Officer of Health

ON THE

Sanitary Condition and Vital Statistics,

AND

Report of Sanitary Inspector

FOR

The Year 1909.

Submitted to the Council 28th January, 1910.

WIMBLEDON :
W. H. STOAKLEY & Co., 11, ST. GEORGE'S ROAD.

CONTENTS.

Merton Urban District Council.

HEALTH REPORT FOR 1909.

TO THE CHAIRMAN AND MEMBERS OF THE MERTON URBAN DISTRICT COUNCIL.

GENTLEMEN,

I have the honour of submitting, for the year 1909, my second Annual Report, the second issued since Merton became an Urban District.

The DEATH RATE for the year was 7 per thousand. This compared favourably with the average of 10·6 for the ten years ended 1908. The lowest in this decade was in 1908, when it was 7·9, whilst the highest equalled 13·7 in 1901.

The reduction of the death rate in England and Wales was from 14·7 in 1908 to 14·5 in 1909, which is the lowest rate on record. Compared with the average for the ten years 1899-1908, there was a saving of 1·6 lives per thousand in 1909.

For Merton the INFANT MORTALITY was again low, being 50 per thousand registered number of births. The average for the ten years ended 1908 was 94; the lowest recorded in this period was in 1908 at 48, and the highest in 1902 at 136 per thousand.

For England and Wales the mortality of infants under one year was 109, which was 11 per thousand below the rate of 1908, thus creating another record. Compared with the average in the ten years 1899-1908, the infantile mortality showed a drop of 29 per 1,000.

For Merton the BIRTH RATE was 23·6, a decline of 4·4 per thousand population from 1908. The average for the previous mentioned number of years was 29·8.

For the country the birth rate was 25·6, which was ·9 lower than in 1908, and this is again the lowest on record. Compared with the average rate of the years 1899-1908, there was a fall in the birth rate of 2·2 per thousand.

Copies of the Report are required to be sent to the Local Government Board and the County Council of Surrey, for whose information many facts will be mentioned which will no doubt be familiar to members of the Council.

In conclusion, I would like to express my thanks to the Council for the help they have afforded me, and to their Officers for the assistance I have received.

In the body of the Report will be seen the nature of Mr. Pointon's work, which speaks for itself, but to him is due also my thanks for the great help I have always had.

I am, Gentlemen,

Your obedient servant,

D. A. BELILIOS, D.P.H.

Medical Officer of Health.

REPORT.

PHYSICAL FEATURES.

Generally speaking, the District is flat, and has a subsoil for the greater part of loamy gravel, which thins out and merges into the underlying clay at the east, west and southern portions. The acreage is approximately 1,764, apparently about 1,256 of this not having yet been built on. The surface is drained by the River Wandle, the Pyl, and the Beverley Brooks.

The statistics are allocated to the Wards into which the District has been divided, and the reason for the separation is that should any particular disease show a predominance in any one area, data will be available for enquiries to be made on rational lines. It should, however, be borne in mind that the figures in each are still too small for any accurate deductions to be made unless a substantial difference is revealed; but the observations extended over a few years, will be sure to give valuable information.

The Boundaries, estimated population in the middle of year, etc., are shewn in the Table.

TABLE A.

Ward.	Boundaries.	Approximate Size in Acres.	Estim'td Population.	Occupied Houses.	Factor per House.
West Barnes	Western portion of Grand Drive to Malden Boundary	594	1100	220	5
Bushey Mead	Eastern portion of Grand Drive to West Cannon Hill Lane	405	5969	1066	5·6
Merton Park	Eastern portion of Cannon Hill Lane to Railway Line, London, B. & S. C.	522	2733	536	5·1
Abbey ... (formerly called Morden Road.)	The above Railway line to Mitcham Boundary	243	4395	879	5
		1764	14197	2701	

The whole of the north being bounded by Wimbledon, and south by Morden and Mitcham. The approximate areas of the Wards are somewhat different to those given in my report last year, but the figures now given are the same as were presented by Mr. Mountifield, your Clerk, at the Wards Inquiry in July last.

Bye-laws are in force to ensure proper construction and ventilation of the houses, the greater number having been built in recent years. Revised Bye-laws have been prepared by the Roads and Works Committee, and are now under consideration of the Local Government Board.

Mr. Jerram, your Surveyor, informs me that 144 certificates for new houses fit for human occupation were given during the year, against 221 in 1908, and he has also supplied me with the names of the new streets., etc.

The consent of the Local Government Board has been obtained to practically the whole of the Public Health Acts Amendment Act of 1907. So far as I know, all closets, with the exception of two, are of the water carriage type, and the exceptions are instances where the sewer is over 100 feet away.

Water is supplied by the Metropolitan Water Board, and there is a constant supply. I have access to the Reports issued monthly by the Board, as to the nature of the supply.

The following new streets have been made up:—

I Adela Avenue.
II Seaforth Avenue.
III Douglas Avenue.
IV Estella Avenue.
V Melrose Road.
VI St. Mary's Road.
VII Clifton Park Avenue.
VIII Richmond Avenue.
IX Claremont Avenue.
X Station Road.
XI Park Road.
XII Milner Road.

Roads to be made up. Notices have been served:—

I Burlington Road.
II Melbourne Road (being made up).
III Wilton Crescent.
IV Chatsworth Avenue.
V Oxford Avenue.

VITAL STATISTICS.

Population.

My estimate of the population in the middle of the year was 14,197. It is somewhat a relief that the actual numeration is to take place in March, 1911, and the Census will give use more exact figures with which to base our returns. It is so important for a better basis to be available, that a five-yearly count should be instituted in place of the decennial, because however carefully the rules regarding the estimate of population are followed, there is substantial room for error. On the one hand, whilst an over-estimate gives a false sense of security, an under-estimate gives the District an unjust reputation.

For the purposes of calculation I have again taken the number of houses in occupation; and for this I am again indebted to your Rate Collector, Mr. Downing, and his Assistant, Mr. Greig; and multiplied by a factor obtained by a partial census in each area.

I gave reasons last year why age periods influenced statistics, and in my opinion Merton is fairly comparable with the uncorrected rates of the 142 smaller towns, specially of the suburban towns, of the Registrar General's return. People of the young adult class congregate in these places.

Generally speaking, the population is suburban in character, and there are no industries liable to affect public health. House accommodation is ample, and the average number of inhabitants per house is estimated at 5 in West Barnes, 5.6 in Bushey Mead, 5.1 in Merton Park, and 5 in Abbey Ward.

The majority of the houses are let on weekly tenancies, with probably the average rental prevailing in that class of London suburban property.

BIRTHS.

Of the 336 births registered during the year, 187 were males and 149 were females; two were returned as illegitimates. The number registered last year, with a smaller population, was actually greater. The rate of 24 per thousand is very low, and compares with 25.6 for England and Wales as a whole, and 24.8 for the 143 smaller towns.

The steady decline in the rate for the whole country continues, and the comparatively low rate of the year 1908 of 26.5 is now further reduced to 25.6.

DEATHS.

The total number was again 100, this including the deaths of Merton residents at the Union Infirmary and other public Institutions, as recorded in Table I. Communications have been addressed to the Medical Officers of Health of the Districts in which the various London Hospitals are situated, for information of deaths of our inhabitants. The rate was 7 per thousand, as against 7·9 in 1908.

TABLE B.

BIRTH RATE, DEATH RATE, AND ANALYSIS OF MORTALITY, 1909.

	Annual Rate per thousand living.										Deaths under 1 year per 1000 registered births.
	Births.	Deaths.	Principal zymotic diseases.	Small Pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	Fever.	Diarrhœa.	
England and Wales	25·6	14 5	1·12	0·00	0·35	0·09	0·14	0·20	0·16	0·28	109
76 Great Towns ...	25·7	14·7	1·42	0·00	0·48	0·11	0·15	0·24	0·06	0·38	118
142 smaller ,, ...	4·8	13·9	1·08	...	0·33	0·09	0·16	0·17	0·06	0·27	111
England and Wales, less the 218 towns	25·6	14·5	·80	0·00	0·21	0·06	0·14	0·16	0·06	0·17	98
Merton	23·6	7	·63	...	·07	·07	·35	...	·07	·07	50

ZYMOTIC DISEASE DEATH RATE.

Under this heading are included deaths from Small-pox, Measles, Scarlet Fever, Diphtheria, Typhus, Enteric and Puerperal Fevers, Whooping Cough and Epidemic Diarrhœa.

They number 9, or 9 per cent. of our total deaths, or .63 of our total population.

The Table, B, will show at a glance the various rates. The diseases will be spoken of under their respective headings later.

In Table III it will be again seen that, which was pointed out last year, much the largest incidence of infectious disease is experienced up to 15 years, the proportion being 230 to 28 for all the remainder of the ages put together. The total of 258 notified cases, included 153 Measles. Of the deaths from these diseases 8 took place before the age of 15, and 1 over.

It is important to shield children from infection as long as possible, because not only is there a lessened chance of contracting infection, but the later they get it the better are their chances of recovery.

INFANT MORTALITY.

By this term is meant the proportion of deaths of children under one year to the actual number of births registered within the year, and the result is expressed as deaths per 1,000 of registered births. If other statistics could be worked out with such exact data, deductions would be made which ought to be more useful and less liable to errors.

The number of infants dying in 1909 in the District are, curiously, the same as in 1908, viz.: 17. But, owing to there being in 1909 a lesser number of births, the proportion is slightly greater, being 50 per thousand, against 48 in 1908. The rate is in any case satisfactory, and one which compares favourably with even the country districts where conditions tending to make healthy children are more favourable than in the towns. From my inspection of the children in the Schools, also in the investigation of epidemic diseases, and the data supplied to me by your Sanitary Inspector in his house to house visits in this and past years, as well as his observations in the houses where infectious diseases have occurred, make me of the opinion that the causes of this low mortality are: (1) the care taken by the average Merton mother of her children, (2) the fairly clean condition of the houses (of course there are exceptions to both these), (3) the absence of overcrowding, (4) the greater part of the District being comparatively new, modern sanitation exists, and care is taken that they are kept in an efficient state. A large number of houses have passages at the back, and this gives opportunities for the early detection and remedy of nuisances in yards.

In the matter of infant rearing, conditions which are important are: (a) suitability of food, and in this connection nothing can in the vast majority of cases take the place of breast milk in the first year of life: (b) adequate supply of fresh air; (c) cleanliness in person and surroundings; (d) suitability of clothing.

I am not at present going into the complex question of heredity, but the one simple fact has only to be stated to be recognised that the healthier the conditions under which the parents live the greater are the chances of their offspring attaining healthy adolescence.

Analysis into the causes of Infant Mortality for Merton shews that out of the 17 deatns, 8, or nearly half, were due to congenital defects and debility. Of these, 5 were born in such a condition that life was not possible owing to congenital defects in vital organs, and the other 3 described as deaths from debility and marasmus, had not sufficient vitality to live. The causes of this debility and marasmus, conditions where either a full term baby, healthy in appearance and weight, dwindles away, or a child, puny at the very beginning, dies without obvious cause, are not fully understood, but investigation into the medical histories of the parents (which, however, in any large scale is not practicable at present) may possibly supply some clue to this source of wastage of infant life. Marasmus may, however, in some instances, mean a specific congenital disease.

Of the other causes of death, diarrhœal diseases were accountable for four. Diarrhœal diseases vary in their significance according to the causes from which they arrise. The form which prevails when the ground temperature is high, proves fatal in a large number of instances, and it is because of a happier termination in cases due to other causes, that the gravity of Summer Diarrhœa is not sufficiently recognised.

The past summer was cool and wet, and these meteorological conditions were probably inimical to the growth of the germs suspected of causing the disease. Flies are the possible carriers of the germ from the soil, where they probably grow to food, which is one of the important vehicles of infection.

MORTALITY FROM PULMONARY TUBERCULOSIS.

The deaths registered in 1909 were 7, against 10 in 1908 and 12 in 1907. The 7 deaths were distributed as follows:— 1 in West Barnes, 4 in Bushey Mead and 2 in the Abbey Ward, the Ward having the largest population having the largest number of deaths.

The Order of the Local Government Board making the notification of Poor Law consumptives compulsory has been in force for the past year, but no notifications belonging to the District have been received. Although voluntary notification is not in force, by courtesy of the London County Council's Medical Officer, 3 cases were notified from the Brompton Hospital. These cases were visited and re-visited by Mr. Pointon, who supplied the patients with antiseptics and saw that the advice in the following pamphlet was not neglected:—

MERTON URBAN DISTRICT COUNCIL.

PREVENTION OF TUBERCULOSIS.

This disease is infectious, and can spread to healthy people unless precautions are taken.

The spit of the affected person contains the germs, which after being dried can be carried in the air as fine dust. This infected dust may not only be breathed by others but also swallowed if deposited in food.

The patient should sleep in a room by himself, with the windows quite open.

The phlegm should be coughed in the flask, into which disinfectant is placed. If the patient is well enough to walk about, the flask is to be carried in the pocket. The contents are to be burnt.

No milk or other food should be kept in the sick room. The floor must be frequently damped with disinfectant, and the whole place kept as free from dust as possible.

Issued by the Public Health Committee.

Merton Urban District Council.

N.B.—The disinfectant was supplied by the Council, and method of using it was explained. Sputum flasks were also provided. Opportunity was taken to impress on the relatives the necessity of early advice being taken if any suspicious symptoms occurred in any other inmate.

The prevention of Tuberculosis has of late years been occupying the attention of the Medical Profession very much, and since the germ discovered by Koch has been quite proved to be the cause of the disease, more rational methods have been employed for its prevention.

We are all of us liable to inhale or swallow the germs, and no doubt we do so at some time or other. Immunity of those who do not fall victims is partly due to natural defensive forces within the body, which literally wage war with the invaders. The better the general condition of health, the greater is the resistance, and it is more common than is thought by the public that victory has lain with the human forces; for it is not so very uncommon to find traces of the battlefield when people have died from quite other diseases at a later date. Clean sanitary houses, with their full provision for air, constructed in such a way that sunlight can get into every room, help considerably, as fresh air and sunlight can kill the germs, and at the same time strengthen the body.

The very difficult question of limiting infection by compulsory segreation of known cases in sanatoria is one which may be decided in the future, but at present the uses of the sanatoria have been much more in the direction of the attempted cure of suitable cases and in the education of the patients in the treatment of the disease. Education itself, however, leads to preventative measures being employed when they leave the place.

Other Tubercular Diseases.—Three deaths were registered from this cause, against 2 in 1908 and 4 in 1907.

Respiratory Diseases. — From Bronchitis, Pneumonia, Pleurisy and other Respiratory Disease, 22 deaths have been registered, or no less than 22 per cent. of the total deaths, or 1.5 of the population. In 1908 these diseases were responsible for 16 per cent. of the total deaths. I am of the opinion if some scheme were devised by which the ground water could be lowered, some considerable improvement in the prevalence of the complaint would be apparent.

INFECTIOUS DISEASES.

Methods of Prevention.—The diseases to be notified by the Medical Practitioners are Small-pox, Measles, Diphtheria, Erysipelas, Scarlet, Typhus, Enteric, Puerperal and Continued Fevers, and Cholera.

On receipt of a notification, the house is visited, and enquiries made as to the possible source of infection. The surroundings, and the number of persons living in the premises are noted, and the drains examined. Care is taken that the infected linen does not go to the laundries. The question of action in outworkers' premises has again not arisen, as no case was notified.

Hospital accommodation is offered in Diphtheria, Typhoid and Scarlet Fever, and the cases are removed as early as possible. Erysipelas can also be treated at the hospital.

In cases treated at home, it is seen that proper isolation is available, and instructions are given as to the disinfection of clothing and articles liable to be contaminated. Special instructions are given as to the excreta in typhoid.

At the termination of the illness, the walls of the infected rooms are stripped, and disinfected, and all contaminated articles are removed to the Croydon Rural Isolation Hospital, at Beddington Corner, for disinfection by steam. Children from infected households are prohibited from attendance at school for the full incubation period.

Means are placed at the disposal of the practitioners for the early diagnosis of Diphtheria and Typhoid Fever. A wire is sent them as to the result of the bacteriological examination.

A stock of diphtheria antitoxin is kept for the use of doctors.

Disinfection is offered also in houses where deaths have occurred from Tuberculosis of the lungs and Cancer.

Schools. — The segregation of children in schools at a susceptible age is an important way in which infectious disease may be spread ; and the recognition at an early period of symptoms should result in limiting the number.

The Education Authority is the Surrey County Council, whose system of notifications, under the able directions of Dr. T. Henry Jones, gives great assistance to our public health work.

The Teachers in the schools have had sent them a memorandum, issued by the County, giving the early symptoms and signs of the infectious and contagious diseases likely to occur among the scholars, so that suspicious cases may be at once excluded. These names are notified to me, as are also the names of suspected absentees, unless known to have been otherwise notified.

As occasions arise, I visit the schools, and classes have been examined by me for Diphtheria, Scarlet Fever, Measles and Whooping Cough. Head Teachers are informed by us of the cases to be excluded on account of disease, either in the scholars themselves, or in their homes, and notices are again sent when they are to be re-admitted.

A memorandum was issued jointly by the Local Government Board and the Board of Education on closure and exclusion of children from school. This is an extension and amplification of the previous memorandum, and among other things stress is laid on the cordial co-operation between the School Medical Officer and the Medical Officer of Health when they are not the same individual, and from what has already been stated this co-operation exists. The methods by which school closure can be effected are as follows :—

(a) It can be compelled by the Local Sanitary Authority, or any two Members thereof acting on the advice of the Medical Officer of Health, with a view to preventing the spread of disease, or any danger to health likely to arise from the condition of the school.

(b) Or the Local Education Authority, acting on the advice of the School Medical Officer, may close the school voluntarily.

Exclusion from school of particular scholars can be effected by the Sanitary Authority by the same procedure as in (a), or it may be authorised by the School Medical Officer on particular grounds.

So far as Merton is concerned, the Surrey Education Committee has authorised the District Medical Officer of Health to deal with communicable disease, and to advise as to voluntary closure after consultation with the School Medical Officer, so that, besides the advisory power to the Sanitary Authority I already possess as a Medical Officer of Health, to act as in (a), I can advise the Managers as in (b) after conference with the School Medical Officer whenever practicable. With respect to the individual exclusions, I may act on behalf of the School Medical Officer, but notice of any action will be sent to the School Medical Officer.

Sunday Schools.—Although no power is possessed by the Sanitary Authority over Sunday Schools, I would express my appreciation of the action of those in authority to the suggestions that have been made by me, their co-operation cannot have failed to have had good results in the prophylaxis of disease.

School closure was effected twice during the year as follows:—

Merton Park Infants' Department. — On May 19th, 44 children were away from the school, either suffering from or having been in contact with Measles. On examination of the other children, three were found to have certain spots in the mouth (called Kopliks spots), which is probably the earliest reliable sign in the complaint. There were other children who had suspicious appearances. Owing, therefore, to the fact that a fresh crop of infection was imminent, and the difficulty of so excluding infected individuals as to be certain that some source of infection would not be missed, I advised the Local Sanitary Authority to close the school for a fortnight, so as to prevent the spread of the disease. On June the 8th it was deemed advisable to close the school for another fortnight. In the other Departments of the school (Boys' and Girls') exclusion of individual children sufficed.

Raynes Park Council Schools.—Measles and Whooping Cough: At the end of June three from the Infants' and Girls' Department were away suffering from Measles, and other absentees were reported on account of the disease as follows:—July 1st 4, July 9th 3, 13th 5, and 14th 6, bringing the total to 21. Whooping Cough also accounted for 26 cases, but of a total 359 possible attendances, 248 were present. Owing to the large number of absentees caused by infection or contact, I on the 14th advised closure of the school, as, in spite of watching individual children, the disease continued to spread.

Boys' Department.—At the end of June 3 were away suffering from Measles, but by July 14th there were 70 absentees. Some of these, however, owed their abence, I think, to the Scarlet Fever scare, alluded to in another section. In this instance also I advised closure, and as it was so near the holidays, the closure corresponded to the remaining days of the term.

NOTIFIED DISEASES.

DIPHTHERIA.—Thirty-one cases were notified, as against 33 in 1908, and 28 in 1907. There were 5 deaths, the same number as in 1908. The rate of incidence was 2.2 and the mortality .35 calculated per thousand of population.

It will be seen from the Table that 23 cases were over 5 years and 8 under. That is to say, that the bigger portion occurred in the school ages of life, only 6 people over 15 years of age having contracted the disease.

The usual precautions of isolation and disinfection were taken, and school children in contact with infected people were excluded from classes for the full period in which the disease might be expected to develop and show itself. I have made it a practice of examining the throats of all the children in the class from which any single case of Diphtheria has been notified, as also any other child to whom my attention may have been attracted. Isolated cases occurred in all the schools, but in my visits, I could not obtain any proof of contacts having developed the disease.

A good deal of work is being done in the profession to guage the extent by which people, who do not have any symptoms, or show any physical signs, may carry infection. These are known as "carriers," and are not necessarily ill themselves. Examination by bacteriological means would, however, throw light on the subject; therefore, in addition to my usual examination, I am taking swabs of the throats of three school children who have sat next to the notified case. It is hoped that this procedure will help to eliminate, at any rate so far as the Public Elementary Schools are concerned, one factor in the propagation of disease.

—	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.		
Diphtheria—														
Over 5 yrs.	0	3	2	0	0	1	0	2	4	1	6	4	23	31
Under 5 yrs.	1	2	0	0	0	1	0	1	1	1	0	1	8	
Scarlet Fever														
Over 5 yrs.	2	2	0	0	2	24	4	2	3	1	0	3	43	62
Under 5 yrs.	1	0	0	0	0	15	0	1	1	0	1	0	19	
	4	7	2	0	2	41	4	6	9	3	7	8	Total	93

SCARLET FEVER.

Sixty-two cases were notified, as against 18 in 1908, and 50 in 1907. The incidence of the disease was 4.4 per thousand population. There was 1 death, equal to a death-rate of .07.

The increase in the notifications was caused by the epidemic which prevailed in June and early in July, conveyed by infection of a particular milk supply. I shall, in the appropriate section, deal with the difficulties which may be encountered in the investigations so far as they relate to milk brought into the district from outside places.

The following is the special report made by me to the Council, copies of which were sent to the Local Government Board and the Surrey County Council:—

SPECIAL REPORT TO THE CHAIRMAN AND MEMBERS OF THE PUBLIC HEALTH COMMITTEE ON THE OUTREAK OF SCARLET FEVER IN JUNE, 1909.

GENTLEMEN,

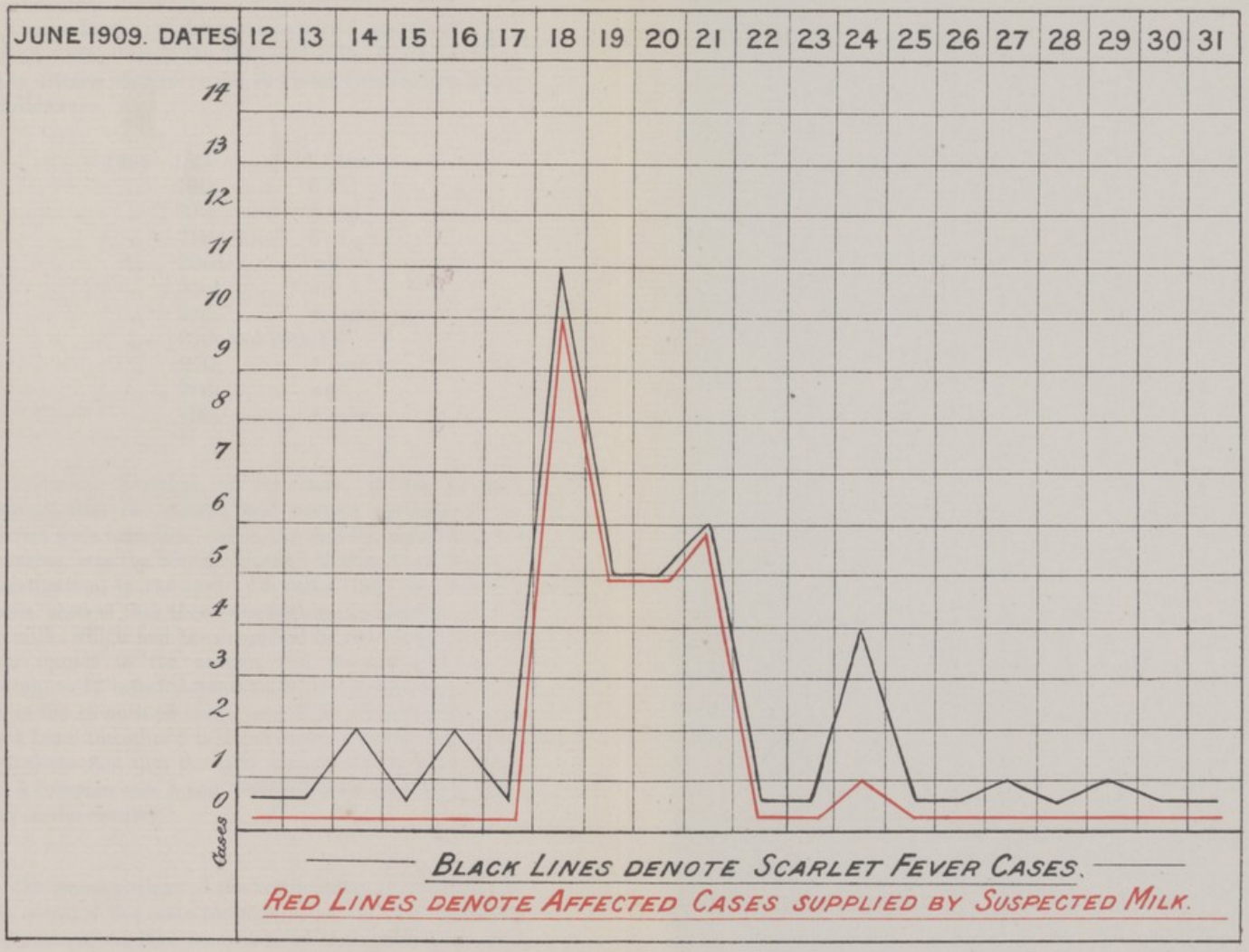
I beg to submit a special report on the outbreak of Scarlet Fever which occurred in the District in the past month of June.

Copies, after submission to the Council, will be sent to the Local Government Board and the Surrey County Council, in accordance with the Order of the Board.

Since the beginning of the present year and up to the end of May, only seven cases of Scarlet Fever had been notified, and were distributed as follows:—

January	3
February	2
March	nil
April	nil
May	2

Whilst up to the 16th June, four cases came under notice, and these were not attributed to milk infection, since two of them had attended a School, outside the area, where Scarlet Fever had prevailed, and where the incubation period was quite consistent with the disease having been contracted by contact. Moreover, the milk supplied to the four households was quite different from the source which subsequently came under suspicion, and where, so far as information can be relied upon, there could have been no possibility of the milk having been obtained, in the first place, from the contaminated supply.


JUNE 1909. DATES
12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
14
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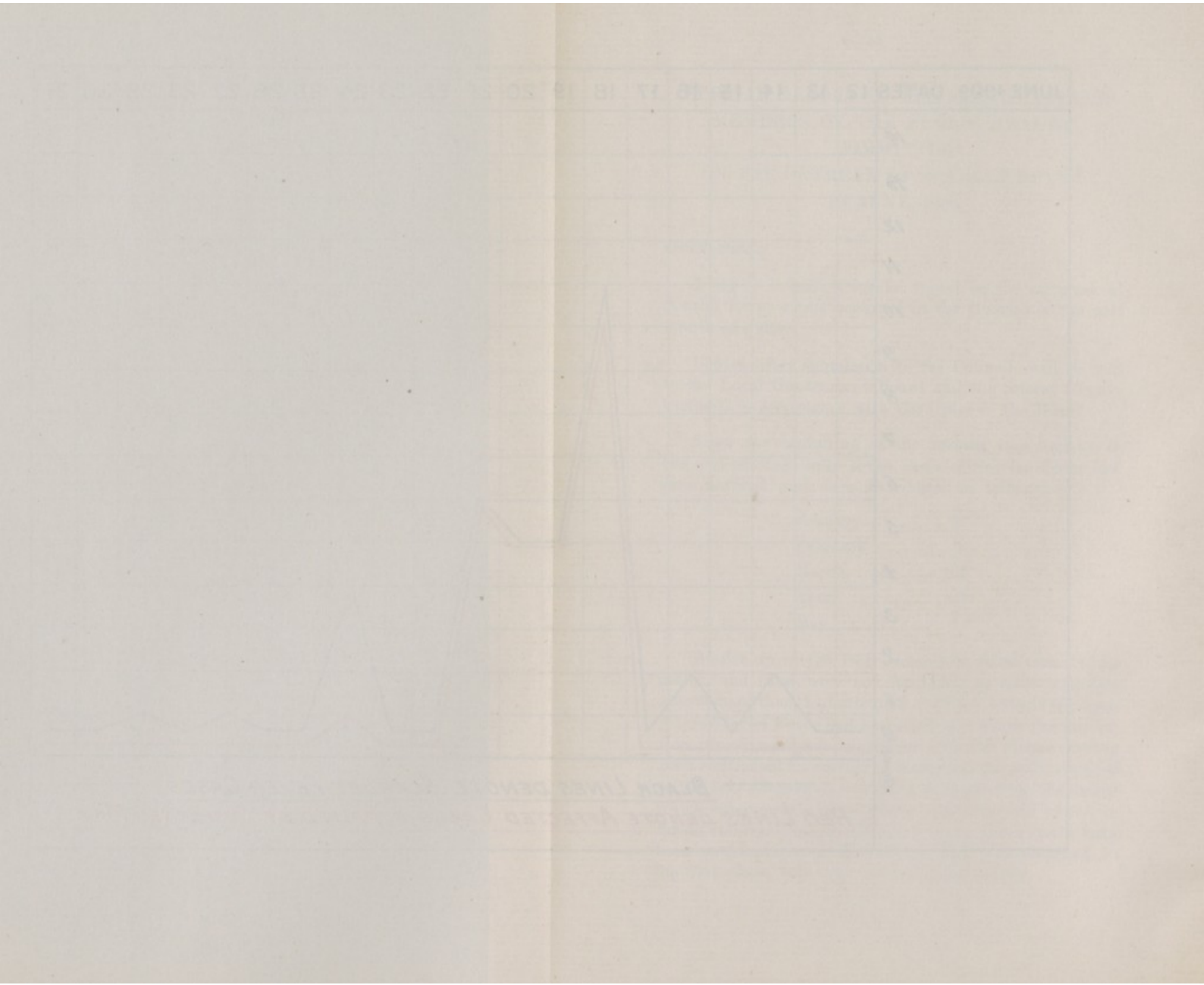
Cases
BLACK LINES DENOTE SCARLET FEVER CASES.
RED LINES DENOTE AFFECTED CASES SUPPLIED BY SUSPECTED MILK.



The contrast with the previous period was all the more marked when, during the 18th and 19th, 16 notifications of the disease were received, the total notifications being as follows:—

June	18th	11 cases
,,	19th	5 ,,
,,	20th	5 ,,
,,	21st	6 ,,
,,	22nd	nil
,,	23rd	nil
,,	24th	4 cases
,,	25th and 26th	nil
,,	27th	1 case
,,	28th	nil
,,	29th	1 case

From the incidence of the cases, it was at once apparent that the eastern and western portions of the District were attacked, and in the middle, separating the two areas, was the almost immune Merton Park District. Investigation, in the early 16 cases, into the possible causes, showed that there was nothing in common except the milk, which had been supplied by two shops who had their rounds in the eastern and western portions of Merton, to 12 infected households, and accounting for 15 out of the 16 notified cases, one of the shops having supplied 7 and the other 8 infected cases. Further enquiries elicited the fact that the milk supply of both these shops was a common one, being obtained from one Dairy Company in the country.

The investigations of the notifications of the 20th and 21st revealed the same common cause, in that the whole of the eleven notified cases derived their milk from that source.

Taking the whole epidemic, it will be noted that the intensity of the attack fell on the 18th, 19th, 20th and 21st with 27 notifications, whilst 4 were received on the 24th, and one each on the 27th and 29th.

The District having been previously almost free from the disease in question, the sudden nature of the onset, coupled with the fact that the cases were almost wholly in houses receiving the particular milk, and the absence of the disease from the area where these particular milkmen supplied very little milk, gave presumptive evidence as to the cause of the epidemic. The fact also that the attack was almost confined to children under ten years, that is to say, that portion of the population who consume most milk, supplied confirmatory evidence as to the cause. Only four persons were over fifteen, of whom three were of the female sex, again the incidence being in the milk-drinkers. Another interesting point observed: unboiled milk was used in 27 instances.

From the table of notifications and the enclosed map, it will be seen that the last date on which a case supplied by the suspected milk occurred was on the 24th, so that, as far as the particular cause under discussion is concerned, it may with reason be assumed to be at an end.

Up to now, I have narrated the course of events so far as Merton is concerned, and reasons have been given for my conclusion that the milk was at fault.

To Dr. Henry Jones, the acting County Medical Officer of Health for Surrey, and also to Dr. Hamar of the London County Council, must be given the great credit of having supplied the proof, when he went to the suspected district and traced the actual cause to one particular farm, where suspected cases of Scarlet Fever had occurred, and where there were a large number of cows with udder disease.

PREVENTATIVE MEASURES.

On the 19th all the milkmen known to be supplying milk in the District were seen, and pending further investigations, were asked to sterilize their milk. The Medical Practitioners were asked to advise their patients to boil the milk. The Manager of the suspected dairy was asked to cease sending any supplies to the District,

The usual precautions as to isolation, where possible by removal to the hospital, and disinfection, were carried out, and the school children in the District were kept under observation, and the teachers warned.

I cannot conclude the Report without expressing my appreciation of Mr. Pointon's help in connection with the outbreak, and the great amount of work he had to do, so that the infection should not spread. The work was necessarily complicated by having to investigate all possible channels of infection, and this necessitated, among other things, enquiries in suspected households where cases were supposed to have occurred, and where no doctor was known to be in attendance.

I am, Gentlemen,

Your obedient servant,

(Signed) D. A. BELILIOS,

Medical Officer of Health.

To the above I have nothing to add, except that a valuable and full report on the conditions found at the farm was made to the Surrey County Council and the London County Council (in whose area also many cases had occurred) by T. Henry Jones and Dr. Hamar, and the opinion is there expressed, and reasons are given, that the outbreak originated from bovine infection. The condition found in many of the cows in affected herds was an eruption on teats and sometimes

on udders, of a discrete papular nature, passing on to the formation of pus. The pus dried and left crusts and scabs. The lessions probably lasted from a week to a fortnight, and in all likelihood there were some constitutional disturbances which were slight and had escaped notice. The report concluded with the bacteriological researches of Dr. M. H. Gordon.

MEASLES.

It will be noticed that no fewer than 153 out of a total of 258 notifications were due to this disease, and one death resulted. The question of the continuation of the notification of Measles was discussed by the Council on account of the expense. But it was decided to go on with the past practice.

As already mentioned, school closure was necessitated twice, and on both occasions, the numbers of reported cases fell off soon after.

Undoubtedly the disease is serious from the complications and sequelæ which may follow, and in the first two years of life, may prove fatal in a not inconsiderable number of cases. The one death we had was under 1 year, and this in spite of the fact that those who were diagnosed to have the complaint thus early, were in a very great minority, viz. 5.

In my opinion medical advice is not called in far too many instances, and in others too late to be of use. The importance of Measles in the creation of ill-health in children is not sufficiently recognised by parents.

ENTERIC FEVER.

One case was notified, as against 4 in 1908, and 2 in 1907.

In the investigation as to the cause, the taking of such articles of diet as shellfish, watercress, etc., is specially enquired into.

SMALL POX.

Early in the year was received a notification, which in the opinion of the certifying practitioner, was one of Small Pox. This was removed within an hour. After detention in the hospital for two days the patient was discharged, as it was found to be a bad attack of Chicken Pox. In some of these instances the immediate differentiation may be exceedingly difficult, and when in doubt it is far better to take full precautions, specially in the matter of isolation, watching, and the vaccination of contacts, than to run any risks.

GENERAL SANITARY CONDITION. FOOD SUPPLY.

During 1909, I again made a systematic inspection of the District, which included all the cowsheds, milk shops, bakeries slaughter-houses, etc. I have satisfied myself that efficient and thorough attention is paid by your Inspector, Mr. Pointon, to all the conditions, and more specially to the way in which the food supply is prepared and stored. All places where people congregate, such as laundries, workshops and factories, were also visited. Mr. Pointon also made a house to house inspection in parts of Edna Road and Morden Road.

MILK SUPPLY.

The cowsheds are situated as follows:—

I Morden Hall Farm, Morden Road.
II Cannon Hill Farm, Cannon Hill Lane.
III Broadwater Farm, Kingston Road.
IV West Barnes Farm, West Barnes Lane.
V Melody Farm Dairy, Seaforth Avenue.

Regulations are in force under the Dairies, Cowsheds and Milkshops Order. Attention is paid to the lighting, ventilation, cleanliness, drainage and water supply, so as to ensure, as far as possble, the proper health of the cows and the prevention of contamination of milk. Efficient cooling apparatus is installed in every farm. Inspections of the cows include the examination of their teats and udders, but there is no veterinary surgeon attached to the Council.

The special circumstances connected with the outbreak of Scarlet Fever have brought forcibly to my notice, the serious delays which may arise, before an implicated milk supply is prohibited entry into the district where it is causing disease.

By the Infectious Diseases Prevention Act, 1890, I am empowered to visit any dairy outside the district, if in my opinion, the milk therefrom is likely to cause infectious disease in Merton. But the Order of a Justice of the Peace of the place in which the dairy is situated must be first obtained, before a compulsory inspection can be made. If satisfied that the milk sent out is likely to cause infection, I must report to my own Council, who may give twenty-four hours' notice to the dairyman to appear before them, and after hearing him, may make an order prohibiting the supply within the district.

It will thus be seen that the procedure involves, in face of an epidemic, a very serious loss of time. In the first place, a Justice's Order has to be obtained, and this may take time in a county district, specially as actually happened, the information of the outbreak was obtained at the week-end. In the second place, and in all probability, a special meeting of the Council would have to be called, thus involving another delay, and after that, a twenty-four hours' notice has to be given to the dairyman before another meeting can be held and the milk stopped. But what is to happen in the meanwhile?

Luckily, in our own case, very willing co-operation was given by the owners of the farms, and the entry of milk was at once stopped without recourse to these cumbersome proceedings. But the absence of a proper spirit in a vendor may easily cause serious harm to a district.

Milkshops.—Frequent inspections are made, and it is seen the milk is kept properly covered. In practically all the shops efficient arrangements exist for the scalding of cans. In the exception I have reason to believe that sufficient cleansing arrangements are made in another place.

MEAT.

There are four registered slaughter houses, and the Bye-laws provide for the cleanliness, water supply, etc., of the places. Whitewashing is required at least four times in the year, and oftener if necessary. The surrender of four carcases was accepted. In coming to a decision as to whether the whole or parts of a carcase should be destroyed in tuberculosis, the recommendations of the Royal Commission on Tuberculosis have been borne in mind.

Mr. Pointon, your Sanitary Inspector, who holds the special Meat Certificate of the Royal Sanitary Institute, visits the houses when slaughtering is in progress. Further details are given in his portion of the Report.

The meat in the butchers' shops is kept under supervision for disease or decomposition.

Fish.—Notice is taken of the condition of fish sold.

Bread. — There are six bakehouses, all of which are built above ground.

SEWERAGE AND DRAINAGE.

The level of Merton varies from about 100 feet above Ordnance Datum in the highest part at Cannon Hill, to Coombe Bridge, where it is 41 feet. In Merton Park and Morden Road it is about 50.

Separate conduits are employed for the carriage of foul and surface water in the new and greater portion of the District.

The new drainage works at West Barnes, affecting about 300 acres, were completed early in the year, and are now in working order.

The sewage of the District is treated at the Farm controlled by the Croydon Rural District at Colliers Wood, and the process employed is one of precipitation and filtration. The question of control of the main sewers has been the subject of negotiations between the two Councils of Merton and Croydon Rural, and I understand that a settlement will soon be arrived at.

Drains of houses are tested as a routine measure after Diphtheria, Enteric and Scarlet Fevers, and in all other instances of suspected defects.

Streams.—The streams receive full attention, and there were no complaints.

House Refuse.—The Council now effect their own dust removal. Mr. Pointon has been given control over the men. A weekly removal is effected. Further details are given later.

Nuisances.—The details of the work of your Inspector of Nuisances, Mr. Pointon, are separately reported on, and I would here like to place on record the ability and tact he displays in his work. His assistance in the Public Health work of the District has been of great value and always willingly rendered.

APPENDICES.

TABLE I.—Vital Statistics of Whole District during 1909 and Previous Years.

Year.	Population estimated to middle of each year.	Births.		Total Deaths Registered in the District.				Total Deaths in Public Institutions in the District.	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District	Nett Deaths at all ages belonging to the District.	
				Under 1 year of age.		At all ages.						
		Number.	Rate.*	Number.	Rate per 1000 births registered.	Number.	Rate.*				Number.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1899	4280	109	25·4	12	110						50	11·6
1900	4398	116	26·3	14	120						48	10·9
1901	4510	164	36·3	18	109						62	13·7
1902	5350	168	31·4	23	136						71	13·2
1903	6060	221	36·4	20	90						70	11·5
1904	7450	219	29·3	21	95						73	10
1905	9150	258	28·1	22	85						80	8·7
1906	9290	280	30·1	32	114						117	12·5
1907	11300	332	29·3	30	90						120	10·6
1908	12550	353	28·1	17	48·1	85	6·7	Nil	Nil	15	100	7·9
Averages for Years, 1899—1908	7433·8	222	29·8	20·9	94						79·3	10·6
1909	14197	336	23·6	17	50	100	7	13	13	13	100	7·0

* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

NOTE.—The deaths to be included in Column 7 of this Table are the whole of those registered during the year as having actually occurred within the district or division The deaths to be included in Column 12 are the number in Column 7, corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

By the term "Non-residents" is meant persons brought into the district on account of sickness or infirmity, and dying in public institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in public institutions elsewhere.

The "Public institutions" to be taken into account for the pnrposes of these Tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, workhouses and lunatic asylums. Institutions in respect of the deaths in which corrections have been made are given at the foot of this Table.

Total population at all ages	4510	At Census of 1901.
Number of inhabited houses	937	
Average number of person per house	4.8	

Area of District in acres (exclusive of area covered by water). ... 1765

Institutions within the District receiving sick and infirm persons from outside the District.

St. John's Nursing Home.

Institutions outside the District receiving sick and infirm persons from the District.

Brookwood Asylum.
Croydon Union Infirmary.
Croydon Rural District Council's Isolation Hospital, Beddington Corner, Mitcham.

Other Institutions, the deaths in which have been distributed among the several localities in the District.

St. Joseph's Hospital, Chiswick.

The Union Workhouse is not situated within the District.

TABLE II.—Vital Statistics of separate Localities in 1909 and previous year.

Names of Localities.	1. West Barnes. Acres 594.				2. Bushy Mead. Acres 405.				3. Merton Park. Acres 522.				4. Abbey. Acres 243.			
Year.	Population estimated to middle of each year.	Births registered	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered	Deaths at all Ages.	Deaths under 1 year.
1908 ...	818	24	12	1	5408	168	39	8	2364	68	14	2	3960	93	35	6
1909 ...	1100	22	13	4	5969	151	39	6	2733	71	14	3	4395	92	34	4

TABLE III.—Cases of Infectious Disease notified during the Year 1909.

Notifiable Disease.	Cases Notified in whole District.							Total Cases Notified in each Locality.				No. of Cases removed to Hospital from each Locality.				
	At all ages.	At Ages—Years.						1	2	3	4	1	2	3	4	5
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.	West Barnes.	Bushey Mead.	Merton Park.	Abbey	West Barnes.	Bushey Mead.	Merton Park.	Abbey.	Total Cases removed to Hospital.
Small-pox	1	1	...	...	...	...	...	...	...	...	1	...	...	...	I	1
Cholera	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria (including Membranous croup)	31	...	8	17	2	4	...	2	14	3	12	...	12	3	8	23
Erysipelas...	9	...	1	3	1	4	...	2	4	...	3	...	...	...	...	...
Scarlet fever	62	1	19	32	6	4	...	7	28	2	25	3	25	2	17	47
Typhus fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric fever	1	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...
Relapsing fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Continued fever	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal fever	1	...	..	...	...	1	...	...	...	...	1	...	...	...	...	...
Plague ...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...
Measles ...	153	5	50	93	5	...	...	7	75	23	48	...	...	...	...	...
Totals	258	7	78	145	14	14	...	18	122	28	90	3	37	5	26	71

The Isolation Hospital is situated at Beddington Corner (joint Hospital with Croydon Rural).
The joint Small-pox Hospital is situated at North Cheam (joint with Wimbledon, Croydon Borough, Croydon Rural, and Penge Urban Districts).
Number of Diseases that can be concurrently treated—Small-pox, Enteric, Scarlet Fever, Diphtheria and Erysipelas.

TABLE IV.—Causes of, and Ages at, Death during Year 1909.

1	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District.							Deaths at all ages of "Residents" belonging to localities, whether occurring in or beyond the District.							Total deaths whether of "Residents" or "Non-residents" in Public Institutions in the District.
Causes of Death.	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	All ages.	Under 1 year.	1 & under 5.	5 & under 15.	15 & under 25.	25 & under 65.	65 & upwards.	West Barnes.	Bushey Mead.	Merton Park.	Abbey Ward.	...	...	...	...
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	1	1	...	...	...	...	...	...	...	1	...	...	...	...	...
Scarlet fever	1	...	...	1	...	...	...	...	...	...	1	...	...	...	...
Whooping-cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria (including Membranous croup)	5	...	2	2	...	1	...	...	2	...	3	...	...	...	...
Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Fever (Typhus)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Fever (Enteric)	1	...	...	...	...	1	...	...	1	...	...	...	...	...	...
Fever (Other continued)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Epidemic influenza	3	1	...	...	...	1	1	...	1	...	2	...	...	...	...
Cholera	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Plague	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diarrhœa	1	1	...	...	...	...	...	...	1	...	...	...	...	...	...
Enteritis	3	3	...	...	...	...	...	...	1	...	2	...	...	...	...
Gastritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal fever	1	...	...	...	...	1	...	...	...	...	1	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Phthisis (Pulmonary Tuberculosis)	7	...	...	...	2	5	...	1	4	...	2	...	...	...	1
Other tuberculous diseases	3	...	...	1	1	1	...	...	3	...	...	...	...	...	1
Cancer, malignant disease	4	...	1	...	2	1	...	...	2	2	...	...	...	...	...
Bronchitis	8	...	1	...	1	2	4	...	3	1	4	...	...	...	...
Pneumonia	11	3	2	...	...	6	...	1	4	2	4	...	...	...	...
Pleurisy	1	...	...	...	...	1	...	...	...	...	1	...	...	...	...
Other diseases of Respiratory organs	2	...	1	...	...	1	...	...	1	...	1	...	...	...	...
Alcoholism—Cirrhosis of liver	1	...	...	...	...	1	...	...	1	...	...	...	...	...	...
Venereal diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Premature birth	1	1	...	...	...	...	...	...	1	...	...	...	...	...	...
Diseases and accidents of parturition	2	...	...	...	...	2	...	...	...	...	1	...	...	...	...
Heart diseases	7	1	...	...	...	4	2	2	3	1	1	...	...	...	...
Accidents	2	...	...	...	...	1	1	...	1	1	...	...	...	...	...
Suicides	1	...	...	...	...	1	...	...	...	...	1	...	...	...	3
Kidney disease and Arteris Pelerosis	6	...	...	...	1	2	3	1	1	1	3	...	...	...	...
All other causes	28	6	3	1	...	8	10	7	9	5	7	...	...	...	7
All causes	100	17	10	5	7	40	21	13	39	14	34	...	...	...	13

NOTES.—(A) In Table IV., all deaths of "Residents" occurring in public institutions, whether within our without the district, are to be INCLUDED with the other deaths in the columns for the several age groups (columns 2-8). They are also in columns 9-15, to be INCLUDED among the deaths in their respective "Localities" according to the previous addresses of the deceased as given by the Registrars. Deaths of "Non-residents" occurring in public institutions in the district are in like manner to be EXCLUDED from columns 2-8 and 9-15 of Table IV.

(B) See notes on Table I. as to the meaning of "Residents" and "Non-residents," and as to the "Public Institutions" to be taken into account for the purposes of these Tables. The "Localities" in Table IV. should be the same as those in Tables II. and III.

(C) All deaths occurring in public institutions situated within the district, whether of "Residents" or of "Non-residents," are, in addition to being dealt with as in note (A), to be entered in the last column of Table IV. The total number in this column should equal the figures for the year in column 9, Table I.

(D) The total deaths in the several "Localities" in columns 9-15 of Table IV. should equal those for the year in the same localities in Table II., sub-column c. The total deaths at all ages in column 2 of Table IV. should equal the gross total of columns 9-15, and the figures for the year in column 12 of Table I.

(E) Under the heading of "Diarrhœa" are to be included deaths registered as due to Epidemic diarrhœa, Epidemic enteritis, Infective enteritis, Zymotic enteritis, Summer diarrhœa, Dysentery and Dysenteric diarrhœa, Choleraic diarrhœa, Cholera and Cholera Nostras.

Deaths from diarrhœa secondary to some other well-defined disease should be included under the latter.

Deaths from Enteritis, Muco-Enteritis, Gastro-Enteritis, and Gastritis (see under the heading Diarrhœal Diseases in Table V.) in Tables IV. and V. should be placed immediately below, but separately from, those enumerated under the heading Diarrhœa as defined by enumeration above. This is particularly important for deaths under one year of age, as many of the deaths in infancy returned as due to Enteritis are really caused by Epidemic Diarrhœa. In the course of years, by the adoption of this recommendation, it will be practicable to ascertain the probable amount of transfer between these different headings.

(F) Under the headings of "Cancer" and "Puerperal fever" should be included all registered deaths from causes comprised within these general terms. Thus: Under "Cancer" should be included deaths from Cancer, Carcinoma, Malignant disease, Scirrhus, Epithelioma, Sarcoma, Villous tumour, and Papilloma of bladder, Rodent ulcer Under "Puerperal Fever" are to be included deaths from Pyæmia, Septicæmia, Sapræmia, Pelvic peritonitis, Peri- and Endo-Metritis occurring in the Puerperium.

(G) Under "Congenital Defects" in Table V. are to be included deaths from Atelectasis, Icterus neonatorum, Navel hæmorrhage, Malformations and Congenital hydrocephalus.

(H) Under "Tuberculous Meningitis" are to be included deaths from Acute hydrocephalus.

(I) Under "Other Tuberculous Diseases" are to be included deaths from Tuberculosis, Tuberculosis of bones, joints and other organs, Lupus and Scrofula.

(J) All deaths certified by registered Medical Practitioners and all Inquest cases are to be classed as "Certified"; all other deaths are to be regarded as "Uncertified."

In recording the facts under the various headings of Tables I., II., III., IV. and V., attention has been given to the notes on the Tables.

TABLE V.—Infantile Mortality During the Year 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age
(*See notes to Table IV.*)

CAUSE OF DEATH.		Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under One Year.
All Causes	Certified 17	...	.	...	..	...	...	...	...	...	...	...	...	..	...	...	...	...
	Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
i. Common Infectious Diseases	Small-pox	...	...		...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Chicken-Pox	...	...		...	...	...	...	..	...	...	...	...	...	...	...	...	...
	Measles	...	...		...	...	...	...	...	...	...	...	...	...	1	...	...	1
	Scarlet Fever	...	...		...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Diphtheria (including Membranous Croup)	...	...		...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Whooping Cough	...	...		...	...	...	..	...	...	...	...	...	...	...	...	...	...
ii. Diarrhœal Diseases. (*See Notes to Table IV.*)	Diarrhœa, all forms	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1
	Enteritis, Muco-enteritis, Gastro-enteritis	...	...	...	1	...	...	..	...	...	...	...	1	...	...	...	...	2
	Gastritis, Gastro-intestinal Catarrh	..	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1
iii. Wasting Diseases.	Premature Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Congenital Defects (*See Notes to Table IV.*)	2	...	2	..	...	...	1	...	...	...	...	...	...	...	...	...	5
	Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Want of Breast-milk, Starvation	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Atrophy, Debility, Marasmus	..	...	...	...	...	1	1	1	...	...	...	...	...	...	...	...	3
iv. Tuberculous Diseases.	Tuberculous Meningitis ... (*See Notes to Table IV.*	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Tuberculous Peritonitis : Tabes Mesenterica	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	(*See Notes to Table IV.*)																	
v. Other Causes	Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Meningitis (*not Tuberculous*)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Convulsions	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Bronchitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Pneumonia	...	...	...	...	...	1	1	...	...	...	...	...	1	...	...	...	3
	Suffocation, overlying ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Other Causes	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
		2	...	2	1	5	3	3	2	...	...	...	1	1	2	...	...	17

Population (estimated to middle of 1909), 14,197.

Births in the Year :—Legitimate, 334; Illegitimate, 2. Deaths in the year of legitimate infants, 16; Illegitimate infants, 1.

Deaths from all Causes at all Ages, 100.

FACTORY AND WORKSHOPS.

By the Factory and Workshops Act, 1901, I am required to "report specifically on the administration of this Act in workshops and workplaces," and to send a copy to the Home Secretary. The details will be found appended, and it will be seen that four defects were found and remedied. In my personal visits, I saw that there was sufficient airspace, ventilation, and proper sanitary conveniences separated for the sexes. Mr. Pointon visits the places regularly, so that no conditions inimical to health may arise.

Annual Report of the Medical Officer of Health for the year 1909 for the Urban District of Merton on the administration of the Factory and Workshop Act, 1901, in connection with Factories, Workshops, Workplaces and Homework.

1.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises.	Number of Inspections.	Written Notices.
FACTORIES (including Factory Laundries) ...	26	1
WORKSHOPS (including Workshop Laundries) ...	67	—
WORKPLACES (other than Outworkers' premises inciuded in Part 3 of this Report)	—	—
	—	—
Total	93	1
	—	—

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORK-PLACES.

Particulars.	Number of Defects. Found.	Remedied.
Nuisances under the Public Health Acts:—*		
Want of cleanliness	—	—
Want of ventilation	—	—
Overcrowding	—	—
Want of drainage of floors	—	—
Other Nuisances	—	—
†Sanitary accommodation insufficient	—	—
†Sanitary accommodation unsuitable or defective	3	3
†Sanitary accommodation not separate for sexes	1	1
Offences under the Factory and Workshop Act:—		
Illegal occupation of underground bakehouse (s. 101)	—	—
Breach of special sanitary requirement for bakehouses (ss. 97 to 100)	—	—
Other offences (excluding offences relating to outwork which are included in Part 3 of this report)	—	—
Total	4	4

3.—HOMEWORK.

OUTWORKERS' LISTS' SECTION 107.

Nature of Work—Wearing Apparel.	Addresses of Outworkers'.
Lists received from other Councils	4
Lists forwarded to other Councils	—
Inspections of Outworkers' premises	8
Total	12

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year.

	Number.
Laundries	10
Bakehouses	6
Printers	1
Lampmakers	1
Block Cutters	1
Cycle Makers and Farriers	2
Total number of workshops on Register	21

*Including those specified in sections 2, 3, 7 and 8, of the Factory and Workshop Act as remediable under the Public Health Acts.

†For districts not in London, state here whether section 22 of the Public Health Acts Amendment Act, 1890, has been adopted by the District Council; and if so, what standard of efficiency and suitability of sanitary accommodation for persons employed in factories and workshops has been enforced.

5.—OTHER MATTERS.

Class.		Number.
Matters notified to H.M. Inspector of Factories:—		
Failure to affix Abstract of the Factory and Workshop Act (s. 133)		—
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5)	Notified by H.M. Inspector	2
	Reports (of action taken) sent to H.M. Inspector ...	2
Other		—
Underground Bakehouses (s. 101):—		
Certificates granted during the year		—
In use at the end of the year		—

Sanitary Inspector's Report.

Mr. Chairman and Gentlemen,

I have the honour to present my report of the work carried out in the district during the year 1909. The detail of the work is given at the end of the report.

HOUSE REFUSE COLLECTION.

The members will remember that it was decided to carry out ~~in the district during the year 1909. The details of~~ the unsatisfactory system which was in vogue when this work was carried out by contract. During the summer months, and particularly at holiday times, the work always became disorganised, with the result that some parts of the district were left with the refuse not collected for periods varying from 7 to 21 days. The work was commenced by the Council's workmen on October 1st, and so far has been very successful. This success will, with care and thought, no doubt continue, but there is one thing that will sooner or later cause a considerable amount of thought, and that is the provision of some adequate means of dealing with the disposal of the refuse after collection. At the present time we are depositing the refuse in the Merton brickfield, and this site will be available for some time to come, but the question will arise, and it is best to be prepared with some alternative scheme for the disposal of the refuse.

In connection with the cleansing of rooms after Infectious Disease, and the abatement of nuisances under the Public Health Acts, 209 notices were served, and it is pleasing to note that in no case was it necessary to take legal proceedings.

True, the Council were compelled to take proceedings in respect of Avenue Cottages, but that was an old outstanding debt. I have always given every facility, by means of personal interviews and reminding letters, to property owners and builders, and I find that this is nearly always sufficient to obtain what is required in the abatement of nuisances.

HOUSE DRAINAGE.

The drains of the following houses were entirely reconstructed:—

1 to 6, Mostyn Gardens.
13 and 15, Claremont Avenue.
31, Dorset Road.
24, Richmond Avenue.
The Prince of Wales, public-house, Morden Road.

COWSHEDS, DAIRIES, AND MILKSHOPS.

Under the Dairies, Cowsheds, and Milkshops Order every person carrying on the trade of a Cowkeeper, Dairyman, or Purveyor of Milk must be registered by the Local Authority. Periodical inspections of all the registered premises have been made, and the utensils inspected. The cowsheds have been regularly cleansed and the condition of the cattle noted. During the winter months a difficulty occurs in keeping the animals free from mud, but I have no great trouble in convincing the cowkeepers of the necessity of great cleanliness, and I find them generally willing to adopt any suggestion I have to make. The number of persons whose name appears upon the register at the end of the year was as follows:—5 Cowkeepers, 8 Dairymen, and 8 Purveyors of Milk.

Number of visits to these premises:—84.

SLAUGHTERHOUSES.

Frequent inspections have been made during the year of the four Slaughterhouses situated within the district. A considerable amount of slaughtering takes place at two of these, and this necessitates constant supervision in the preparation of the carcases. It is my practice to visit these places at irregular intervals, and as the premises are situated in the main road I am constantly passing and repassing them, and I am thus enabled to be present on nearly every occasion when slaughtering is in progress. In this way I have inspected the carcases and organs of over 700 animals immediately after slaughter, and while in the process of being dressed, and numerous other carcases after having been dressed. The majority of these carcases are forwarded to Smithfield Market and there undergo another examination by the Corporation Inspectors. But during the time I have been Inspector for this district (nearly five years) I have never known it happen that a single one of these carcases has been rejected. Slaughtering frequently takes place on Sundays (the reason of this is to catch the market early on Monday morning) and I always endeavour to visit these premises upon those days. On Saturday evenings I pay particular attention to the food exposed for sale in the Butchers', Fishmongers', Fruiterers', and other shops. During the year the following quantities of food were surrendered and destroyed: and destroyed:

Total visits to Slaughterhouses:—209.

Pork	3 complete carcases
Beef	1 complete carcase
Fish	130 lbs.
Vegetables	120 lbs.

HOUSING AND TOWN PLANNING ACT.

This Act, which became law in December, 1909, imposes new duties upon Local Authorities. The Act was passed with

the view of improving the conditions of houses in which the working class dwell, and producing more healthy towns. The part which particularly affects the Sanitary Department is chiefly composed of amendments to the Housing of the Working Classes Act, 1890, to which there are a large number of cross references. Previous to the passing of this Act, part three of the Housing of the Working Classes Act, 1890, was only adoptive, but now becomes law without adoption. This gives the Authority power to build houses for the Working classes where such houses are needed. This becomes an actual duty, and a complaint made by any four persons that the Authority has failed to carry out that duty will result in an enquiry by the Local Government Board, and if the Board are satisfied as to the default of the Authority, they may order the carrying out of any works which may be necessary. The old machinery in relation to the closing and demolition of unhealthy dwellings is revised. It now becomes imperative for the Local Authority to cause inspection of their district to be made from time to time with a view to ascertain what dwelling houses are unfit for habitation. If any such houses are discovered, it is then their duty to make a closing order, and if the owner does not appeal to the Local Government Board within 14 days, the order comes into force, and remains so until the house is placed in proper repair. If this is not done within a certain time the Local Authorty may proceed, after notice to the owner, to demolish the building. The Act particularly deals with Cellar Dwellings and Back to Back Houses. These clauses do not affect this district to a great extent, as there are only a few houses built with basements, and only a very few of these are occupied as dwellings. It will, however, be necessary to inspect those that are occupied, to ensure that they comply with the terms of the Act. With regard to the Back to Back houses I am pleased to say that we are entirely free from dwellings of this description. The powers contained in certain sections of this Act are more extensive than those of the Public Health Acts. All sorts of conditions which Sanitary Officers are continually meeting with but which our

powers to deal with have previously been somewhat doubtful, may be brought within the scope of these sections, and enable us to improve the condition of that class of property which is commonly known as slums. Other parts of the Act deal with the planning and laying out of towns, and the appointment of Officers and Committees.

The foregoing is a brief outline of the parts which materially affect the Sanitary Department, and I would here like to point out that for the purpose of examination or inspection the officer inspecting must be authorised in writing by the Council. Although the suggested quinquennial inspection has not become law you will probably be required to make arrangements for the inspection of the dwellings of the working classes in this district at least once in that period, and although there is no definitition of the expression of Working Classes contained in the Act, it is generally understood to include Mechanics, Artisans, Labourers, Hawkers, etc. It will easily be understood that the work will take up a considerable amount of time of the department.

I am, Gentlemen,

Your obedient Servant,

J. B. POINTON.

SUMMARY.

Total Visits paid	1897
Whole Houses Cleansed	3
Rooms Cleansed	31
Premises Disinfected after Infectious Disease	83
Premises Cleansed after Infectious Disease	66
Drains Tested	60
,, Re-constructed	11
,, Repaired	17
,, Obstructions removed from	26
,, Fresh air inlet valves repaired	22
Inspection Chambers provided or repaired	23
Roofs Repaired	8
Cisterns Covered	12
W.C.s Cleansed or Repaired	17
Yard Pavings Repaired	9
New Dustbins provided	42
Overcrowding Nuisances Abated	3
Water Supplied from Main	6
Sink Wastes Repaired	3
Offensive Accumulations Removed	8
Nuisances Abated where animals were improperly kept	4
Number of Articles Disinfected at Hospital	1104