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Aldershot Urban District Council.

Annual Report

OF THE

Medical Officer of Health,
Annual School Report &
Report of the Inspector of
Nuisances :: for 1919.

BY

E. W. ROUTLEY, M.D., M.R.C.P., D.P.H.

ALDERSHOT:
JOHN DREW (PRINTERS) LTD.,
UNION STREET.

ALDERSHOT URBAN DISTRICT

STATISTICAL SUMMARY FOR 1919

Latitude			51° 15′ N.
Longitude			46′ W.
Area of Urban District			4,178 acres.
Rateable Value			£160,621
Population at Census 1911 (Town)			19,464
,, ,, ,, (S. Camp)			15,711
Population estimated to July 1st, 1919	9 (Tow	n)	22,500
Birth Rate, 1919 (Civilian)			21.1
Death Rate, 1919 (Civilian)			12.1
Infantile Mortality Rate (Civilian)			86.
Rainfall, 1919			31·9in.
Mean Temperature for the year			47.5°

To the Chairman and Members of the Aldershot Urban District Council.

GENTLEMEN,

I have the honour to present my Annual Report on the health of the district in 1919, and at the same time wish to thank you for your courtesy and assistance during the past year.

I am, Gentlemen,

Your obedient Servant,

E. W. ROUTLEY.

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REPORT for 1919.

Natural and Social Conditions of the District.

POPULATION.—The population of the Census of 1911 was as follows:—

The estimate for the average population in 1919 so far as regard the Town is based mainly on the rationing returns, and is placed at 22,834.

The average population for the South Camp for 1919 is estimated at 15,189, divided as follows:—

Men	 13502
Women	 1061
Children	626
	15189

The average total population, therefore, of the military and civil inhabitants is estimated at 38,023.

AREA, DENSITY OF POPULATION.—The Urban District comprises 4178 acres divided thus:—

The density of the town population is 15'9 per acre.

Geology.—The Northern portion of the district lies on the Bagshot Sands, while the Southern part comprising most of the Civil area, lies on the London Clay. Along the banks of the Blackwater stream, which is the eastern boundary, the soil is alluvial. The lowest part of the district is 231

feet above Ordnance Datum; the elevation at the extreme western part is 393 feet. The Town itself is built on the top, and along the sides, of a hill.

Social Conditions.—There are a few small factories and a corresponding number of workshops, connected with the various commercial businesses. A large number of the houses are let in lodgings. The industries of the Town almost entirely live by reason of the camp.

VITAL STATISTICS, 1919.—Births (civilian) 483 (M. 259, F. 224), of which 45 (9 per cent.) were illegitimate. The birth-rate for the year was 21 per 1,000 of population, a distinct increase on the preceding year. The birth-rate for England and Wales for the year was 18.5.

Deaths.—266 deaths were registered (males 151, females 115). Of this number 49 (18 per cent.) died in the Farnham Infirmary; 18 died in hospitals elsewhere (London, Guildford, etc.), and 8 died in the County Lunatic Asylum. The main causes of death were Pulmonary Tuberculosis, 26; Cancer, 30; Pneumonia and Bronchitis, 41; Epidemic Influenza, 21; and Heart Disease, 21. Two deaths took place from Diphtheria, one from Whooping Cough, one from Poliomyelitis, and one from Anthrax; 7 deaths took place from violence, and there were 4 suicides. The death rate for the year was 12:1 per 1,000 of population, that for England and Wales being 13.8. In spite of the presumed increase in the population, the number of deaths was less than in any of the three preceding years. The following table of mortality should be consulted for fuller details.

CAUSES OF D	EATH IN	ALDERSHOT	U.D.,	1919.
-------------	---------	-----------	-------	-------

C	auses of Death (Ci All Causes.	vilians	only)		Males.	Females.
1	Enteric fever					
2	Small-pox					
3	Measles				Town I	
4	Scarlet fever					
5	Whooping cough		*******		1	
6	Diphtheria and co	roup				2
7	Influenza			*******	10	11
8	Erysipelas					1
9	Pulmonary tuber	culosis			13	13
10	Tuberculous meni	ingitis				2
11	Other tuberculous	disea	ses		2	
12	Cancer, malignan	t disea	se		18	12
13	Rheumatic fever		leave-		1	

			Males.	Females.
14	Meningitis		19019	non one
15	Organic heart disease		11	10
16	Bronchitis		11	7
17	Pneumonia (all forms)		16	7
18	Other respiratory diseases		1	
19	Diarrhœa, &c. (under 2 years)		1	THE
20	Annandicitie & trublitie		1	2
21	Cirrhosis of liver			
21A	Alcoholism			
22	Nephritis and Bright's disease		7	4
23	Puerperal fever			
24	Parturition, apart from puerper	al		
	fever			nent of
25	Congenital debility, &c.		17	5
26	Violence, apart from suicide	- Company	700 700	
27			4	
28	Other defined diseases		28	34
29	Causes ill-defined or unknown .		1	3
Spec	rial Causes (included above).			
1000	Cerebro-spinal fever	3		
	Doliomyolitic			1
	Anthony		1	
	Deaths of infants under 1 year	of		
- POIT	age		29	13
	Illegitimate		2	2
	TOTAL BIRTHS	223377	259	224
	Legitimate		239	199
-	Illegitimate		20	25
Po	OPULATION.			
	For Birth-rate		22834	
	For Death ,,	250000	21920	
	,,			

Hospitals.—The following are available for the civil population:—Civil Isolation Hospital, the Cottage Hospital, and the Union Infirmary. These are used to their fullest extent possible under the circumstances, there is, however, an imperative want in this, as in other towns, that should be supplied, namely an institution for the sick, which shall not on the one hand be dependent on charity, and on the other be associated with the Poor-Law.

Sanitary Circumstances of the District.

WATER.—The Town water is in the hands of a Public Company, and is derived from a series of Artesian Wells sunk in the chalk underlying the London clay at the southern border

of the district. There is a sufficient and constant supply, and the quality is excellent. The following is an average analysis

of samples taken in 1919:-

Free ammor	nia				absent
Albuminoid	ammonia		0.00		0042
Oxygen abs	orbed (2 h	nours)			.01
Nitrites					absent
Nitrates					.33
Chlorine				*******	2.5
Total solids				*******	48.0
Total hardn	ess				22.0
Poisonous m	netals				absent

RIVERS AND STREAMS.—There is one stream, the commencement of the Blackwater river, which forms a portion of the boundary of the district. It receives no pollution except from the ordinary surface water channels.

DRAINAGE AND SEWERAGE.—The sewerage is mostly carried out on the separate system, although in some directions it is combined. The purification is effected by contact beds, and irrigation over the sewage farm area 15 acres in extent. I have examined the effluent several times during the year, and its average character has been found satisfactory, the amount of absorption of dissolved oxygen in five days rarely exceeding 1 part to 1 5 parts per 100,000.

With the exception of eight cottages in outlying districts, in which part closet or cesspools are used, all the houses in the district are connected with the main drainage system,

and have separate water closet accommodation.

Scavenging.—This is carried out by the Surveyor's Depart ment twice a week throughout the district, and so far as the collection, removal, and disposal of the houe refuse is concerned, the character and efficiency of the arrangements are excellent. The storage, however, of the house refuse is far from satisfactory, and is open to serious objection on grounds of health. It is an exception to find a house properly provided with a suitable covered receptacle as is enjoined not only in the Public Health Act, 1875 (Sec. 36), and the Amendment Act of 1890 (Sec. 11), but also in the Town's own Nuisance Byelaws, Section 5. The Health Committee, however, have the matter under their serious consideration from time to time, but no definite line of procedure has been arrived at. It would appear that the financial burden which would be placed upon owners or occupiers, if they are to be compelled to purchase sanitary dustbins of approved type, forms a serious obstacle to effective improvement in this direction.

It would, however, be a right and proper thing if the Council would, at all events, insist, in the case of every house in the district, that the receptacle used, although not necessarily of the best type, should be reasonably fit for its purpose, and, in addition (and this is the most important point), that it should at all times be kept properly covered.

Sanitary Inspection of District.

NUMBER AND NATURE OF INSPECTIONS.

Number of	visits to	houses re infectious disease		24
Complaints	received		2	20
Ordinary ar	nd re insp	pections	6'	78
Number of	visits to	Bakehouses		21
,,	,, ,,	Cowsheds, Dairies, and Milkshops	s 1:	37
,,	,, ,,	to Slaughterhouses	10	66
,,	,, ,,	Premises where food is exposed	or	
		in preparation for sale	33	30
,,	,, ,,	Common Lodging Houses and		
		Houses let in lodgings	2	53
,,	,, ,,	Offensive Trades		7
	,, ,,	Drainage Works in progress	5	27
	,, ,,	Piggeries		3
	,, ,,	Workshops		9
		The state of the s		
DEFECTS	or Nui	SANCES DISCOVERED AND REME	DIED.	
Defeative de	roina			10
Defective di		Annual Control of the		12
Chokages in				30
Defective W		NING THE RESERVE THE PROPERTY OF THE PROPERTY		8
Foul W.C. p Defective W		ing cictorne		9 50
Dilapidated		mg cisterns		31
THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLU		nk wash-pipes		
Defective go				19
		ry scullery sinks		5
		ent yard pavements		24
		ent eaves, gutters, and drain-pipe		83
Defective an				83
Damp house				54
		walls and ceilings		02
Overcrowde				13
Keeping of				9
		fensive matters •		30
		able bedroom windows		59
		and ceiling plaster		71
Delective II	ouse wall	and centing plaster		1

Defective house floors			130000000	al Disto	48
Defective scullery floors				-	19
Insufficient water supply			-		3
Insanitary urinals				*******	5
Defective firegrates				3140.000	17
Miscellaneous					13
Number of preliminary no	otices	s served	TOBE.		340
" ,, statutory		,,	******		19
Resulting on the remedyi	ng of	f the defects	enumer		ove.

Premises and Occupations which can be Controlled by Byelaws or Regulations.

OFFENSIVE TRADES.— 1	Tripe B	oiler.	
	Fish Fr		
horoges at hoot orange 2	Rag and	d Bor	ne Dealers.
	Gut Scra		
Houses let in lodgings			150
Common Lodging Houses			4
Cowsheds			4
Dairies			8
Milkshops			28
Slaughterhouses			3

There are no underground sleeping rooms as defined by Section 17 (7) Housing and Town Planning Act, 1909.

FOOD.

MILK SUPPLY.—Excepting the milk produced by the 80 milch cows housed within the district, the milk supply is imported by rail.

The wholesomeness and the general adequacy of the arrangements for the supply and distribution of the milk are very satisfactory. There has been no necessity to take action in regard to tuberculosis milk.

OTHER FOODS.—There are three private slaughter houses in the district—2 licensed from year to year and 1 registered. The two licensed slaughter houses comprise one building divided into two compartments, and are in the occupation of one butcher only.

Most of the slaughtering is carried on at the registered slaughterhouse, where much difficulty is experienced as regards the inspection of carcases owing to congestion and the lack of facilities usually appertaining to a modern slaughter house. The provision of a public abattoir (where meat,

whether killed within or without the district, would be inspected before distribution) is urgently needed, and the question of such provision is at the present time under considerations

No doubt an abattoir would long ago have been in existence but for the apparent unwillingness of the majority of butchers in consenting to make use of its advantages when erected. The cleanliness of the three slaughter houses mentioned is of a high standard, and with the exception of one or two small matters requiring attention—which were immedtaely remedied by verbal request—no fault can be found with them in that respect.

Visits of inspection have been paid to slaughter houses on

166 occasions, mostly when killing was in progress.

Twenty-eight instances are recorded of butchers requesting inspection of meat at slaughter houses prior to being deposited

and exposed for sale at the shop.

One seizure only took place during the year, which was in respect of a carcase of a pig affected with tuberculosis, and found in one of the slaughter houses immediately after completion of dressing. A magistrate's order for destruction was obtained, and legal proceedings were eventually taken with unsatisfactory results.

The magistrates dismissed the case in the first instance without hearing evidence for the defence, and the case was sent back to the magistrates for rehearing by decision of the Higher Court. The magistrates again dismissed the case on the ground that the carcase was not deposited for preparation for food, and that the butcher was on the point of requesting inspection by the Sanitary Inspector.

Butchers' shops, sausage making premises, bakehouses, and premises were food is prepared or exposed for sale have been regularly inspected, 351 inspections having been made during the year. No difficulty has been experienced in this respect, and every facility is afforded in such inspection.

SUMMARY OF FOODSTUFFS CONDEMNED AND DESTROYED.

		ben le	Weight	(lbs.)
2 complete carcases of bee	f (tuberculo	sis)		1280
6 complete carcases of por	k do.		ann.	1097
1 complete calf carcase	do.	THE STREET		40
1 complete sheep carcase.	do.	To the same of	-	88
Parts of carcases of beef (tuberculosis)		565
Parts of carcases of defros	ted beef (pu	trefaction)		616
Fish (putrefaction)				9072
Sausages (putrefaction)		[1112 mm.		430
Fruit (unwholesome)		*******		3126

Prevalence of, and Control over, Infectious Diseases.

With the exception of a number of cases of influenza in March and April, there has been but little infectious disease present in the Town generally. The notifications received include the following:—

		9
77 - 616.		18
		15
		15
		16
erculosis	to Vidaon	5
		8
		27
a .		4
L' sosia.		3
		1
orum .		1
		1
	ulosis perculosis nia a	ulosis

SCARLET FEVER.—The whole of the cases were removed to the Isolation Hospital, and in four of them the diagnosis of Scarlet Fever was not confirmed. The remaining cases were of a very mild type. One girl of fourteen admitted with a definite attack of Scarlet Fever, had been employed in the Hippodrome chorus during the previous week, and doubtless received the infection from a carrier in the visiting company.

Disinfection has been carried out in all instances.

DIPHTHERIA.—Eighteen cases were notified, of which 2 did not give a positive result on bacteriological examination. In five of the houses infected the drainage was found to be seriously defective, and in 4 cases there was more or less serious overcrowding. Bacteriological examination is carried out in all suspected cases. Antitoxin is supplied free on demand to all medical practitioners. All contacts are examined personally by myself, and throat cultures prepared. In all cases disinfection is carried out, and all patients, with one exception, were removed to the Isolation Hospital. Two deaths took place faom the disease. The mortality in Diphtheria is nearly always due to the fact that medical attention is not directed to the condition in its early stages either on account of the necessary expense, or due to carelessness of observation when such cases (usually children) are showing signs of illness. At times when there are a number of cases

of Mumps known to be in the neighbourhood, any swelling of the neck is frequently thought to be due to that complaint; but not uncommonly the swelling of the glands is directly the result of the infection in the throat of Diphtheria. Two such mistakes occurred in December, and generally produce serious results, as by the time medical advice has been obtained, the opportunity of saving life by early administration of antitoxin and removal to hospital has been defeated.

Disinfection, with quarantine of contacts, was carried out

in all instances.

MEASLES AND GERMAN MEASLES.—Only a few sporadic cases of these disorders were notified, and there was no mortality in the Town from measles in 1919. It should be borne in mind, however, that measles is always a disease to be taken seriously, inasmuch as, although the risk to life may not be alarming, the after effects—e.g., liability of contracting tuberculosis or pneumonia, and the life-long afflictions of ear disease and deafness—are to be especially feared.

INFLUENZA.—The deaths of 21 persons were registered as due to this serious disease, which had already, in the previous year, taken such heavy toll in the regular mortality. Circulars and handbills dealing with necessary precauions, were largely circulated in the Town. A copy is as follows:—

The Medical Officer of Health recommends the following

PRECAUTIONS.

to be taken for the prevention of the spread of

INFLUENZA.

Influenza is particularly infectious during its incipient stage, and while the person who has contracted it is still able to follow his vocation and to mix with his fellow men. Almost everybody, therefore, is exposed to infection at one stage or another of an epidemic. While no certain safeguard against the disease is as yet known to exist, it is important to give attention to the following points during an epidemic wave.

PREVENTION.

Infection may be guarded against by :-

(A) Healthy and regular habits, and avoidance of :-

(i) Fatigue. (ii) Chill.

- (iii) Alcholoic excess.
- (iv) Crowded meetings and hot rooms.

(v) Unnecessary travelling.

(B) Good ventilation in working and sleeping rooms.

(c) Warm clothing.

(D) Gargling from a tumbler of warm water to which has been added enough permanganate of potash to give

the liquid a pink colour.

(E) Vaccination.—A vaccine against influenza has been prepared by the Ministry of Health, and is available for general use in the same way as the War Office have provided similar vaccine for the troops. It is issued to Medical Officers of Health for distribution free of charge among medical practitioners within their districts, and any person who wishes to be vaccinated should apply to his private medical attendant. The purpose of the vaccine is prevention, and therefore to obtain its value it should be used before an epidemic occurs. It cannot be guaranteed that the vaccine will necessarily protect from attack, but there is reason to expect that if an attack occurs vaccination will do much to lessen the risk of complications.

Influenza is dangerous mostly because of what may follow it

CURE.

In the event of an attack of influenza, the patient is advised to adopt the following measures with a view to securing a speedy return to convalescence and avoidance of complications:—

- (A) At the first feeling of illness or immediately on a rise of temperature the patient should leave his work, go home and go to bed; he should keep warm, and should send for the doctor.
- (B) On convalescence, the patient should avoid meetingplaces and places of entertainment for at least one week after his temperature has become normal.
- (c) Recovery should be fully established before return to

PERSONS NURSING INFLUENZA.

(A) The patient should, if possible, occupy a separate bedroom or a bed screened off from the rest of the room. This rule should be observed until the temperature is normal.

(B) The patient should be kept warm.

(c) All curtains and other articles which prevent a free circulation of the air about the patient's bed should, as far as possible, be removed.

(D) Inhalation of the patient's breath should be avoided.

(E) A handkerchief or other screen should be held before the mouth, and the head should be turned aside while the patient is coughing or sneezing.

(F) The hands should be washed at once after contact

with the patient.

EMPLOYERS.

Workers who are obviously ill should be sent or taken home at once. Their continuance at work is bad for them and dangerous to others.

E. W. ROUTLEY,

Medical Officer of Health.

ALDERSHOT, January, 1920.

Pulmonary Tuberculosis.—Twenty-six deaths were registered due to this disease. Sixteen notifications of fresh cases were received. One or two of these were notified only just before death. These, however, appeared to be old cases of the disease, which had probably been previously notified in other districts. I note that there is a disinclination to notify in some cases, due to the not unnatural wish to avoid stamping an individual with a tuberculosis label, until the diagnosis is practically certain. Early suspected cases are, however, constantly being sent for diagnosis to the Tuberculosis Dispensary.

MALARIA.—The case notified was, on inquiry, found not to be a primary case.

Dysentery.—One case was reported which was of a primary nature, and in which the Bacillus of Flexuer was found on bacteriological investigation. All available precautions were taken, and no further cases were reported.

SMALL Pox.—No cases were reported. No primary vaccinations or revaccinations were performed by the Medical Officer of Health under the Small Pox Prevention Regulations, 1917.

ANTHRAX.—A death, which was thought at the time to be attributable to ordinary septic poisoning from a wound in the neck, occurred in October. The history of the case, in the course of investigation of the circumstances of the illness, led me to institute, with the kind assistance of Captain Lundie, R.A.M.C., a bacteriological examination of the shaving-brush in use by the deceased, and it was established beyond doubt, by culture methods and by animal inoculation, that the case was one of anthrax.

The unusual nature of the case was illustrated by the fact that the brush used for shaving was a painter's sash-tool prepared with hair, and had been used by the deceased for shaving purposes for at least three years previously without any ill result.

Rabies.—There were no cases reported, but precautionary notices were issued in posters and in the local press.

MATERNITY AND CHILD WELFARE.

1. Inspection of Midwives.—Eight midwives were practising in the Town during 1919, and their case books, bags, and appliances are inspected every quarter. Seven of them have had a long experience in the work, and are careful and capable women. The remaining one only commenced to practise during the year, but has had few cases.

Thirty-nine records of sending for medical help were received by me during the year. No case of Puerperal Fever were reported in 1919, and one case only of Ophthalmia in

the new born.

The following is a summary of the returns furnished to me by the midwives themselves at the close of the year. (The return of one is wanting, as she left for India before the close of the year.)

being entirely breastfed. As far as possible they do their best to see that infants have a good start in life in being brought up by the natural method.

Notified Births.—345 births (330 living, 15 still) were notified as occurring in the town, and 131 (129 living, 2 still) in the South Camp. The number of civilian registered births in the same period was 483 (of which 45 were illegitimate). The I.M. Rate was 86—42 infants under one year died, of whom 4 were illegitimate.

2. The Maternity and Child Welfare Scheme, which was originated in April, 1918, has been continued with success in 1919. The welfare clinic is held on Monday afternoons at Llantinsant, Church Lane, and since the arrival of the new Health Visitor (Miss Carswell), in April, 1919, the attendance

of mothers and children has very greatly increased, so that under good meteorological conditions, between 40 and 50 mothers come with their children for inspection and advice.

Owing to the generous assistance of Mrs. Ronald Brooke and Mrs. Alexander, the mothers are invited to have tea and light refreshments and very hearty thanks are due to Mrs. Wright, of the Education Committee, for her kindness in coming so regularly to help in these arrangements. Her assistance is invaluable, and is highly appreciated.

Below is a detailed summary of the work done during the

year :-

THE RESERVE TO THE RESERVE THE PARTY OF THE	
First visits to children under one year	378
Total visits to children under one year	1669
Visits to children under five years	2785
Visits paid to children suffering from the common infec-	
tious diseases (measles, etc.)	29
Total number of actual visits to houses during the year	2814
Welfare Clinic.	
Number of mothers who have attended	204
Number of children who have attended	240

ailments		9
Total number of children		249
Number of attendances of children		898
Number of attendances of children for treatment	*******	118
Total number of attendances of children	*******	1,016
Total number of attendances of mothers		915
Average attendances of mothers in 1919	-	18
		00

Number of children attending for treatment of minor

Average attendances of mothers since May 1st 28

Average attendances of children 20

Number of houses reported to Sanitary Inspector for further

investigation as to sanitary condition _____ 32
Cases referred to N.S.P.C.C. _____ 3

Dried milk is supplied at cost price in appropriate cases.

Under the Food and Milk Order, 26 nursing or expectant mothers were furnished with a daily supply of milk (usually 2 pints) for specified periods (usually three months) free of charge. The Soldiers' and Sailors' Families' Association have done good work in attending to necessitous cases occurring in such families.

INFANT DEATHS.—These have been the subject of inquiry in every instance. Although only two deaths were actually certified to be due to syphilis, there is little doubt that a large proportion of the 19 deaths which come under the heading of

Premature Birth, inanition, etc., were due to ante-natal causes, the principal one being venereal disease. One death was attributed to whooping cough, 6 others occurring from Bronchitis and Pneumonia. One death, the subject of an inquest, was from overlaying. The infant mortality rate for 1919 was 86 per 1,000 registered births.

DAILY CRECHE.—This is carried on at the Child Welfare and School Clinic, under the charge of the resident matron (Miss Thynne Cordner), with the assistance of three probationers. The average number of children received daily is 12, and the number of individual children who have been admitted during 1919 was 39. The need for the Crêche, which was very marked throughout the war, has somewhat diminished since the armistice, owing, of course, to the corresponding diminution of employment of women in the military establishments. The nursery was closed from October 21 to November 10, owing to the number of cases of Whooping Cough in young children.

3. Puerperal Fever.—No cases were reported.

OPHTHALMIA NEONATORUM.—One case only was notified both by the midwife and the medical practitioner who was called in. The condition affected one eye only, was apparently of a very mild character, and entirely cleared up within a comparatively short time.

The Health Visitor made daily visits until recovery was complete.

MEASLES.—Fifteen cases in all were notified, mainly of sporadic cases. These were all visited by the Health Visitor, who hands a circular dealing with the precautions to be taken, sees that the patient has isolation (as far as practicable), and reports any insanitary condition that may be met with. There were no deaths from the disease in 1919. Those in charge of young children should always bear in mind that Measles is by no means a trivial disease, and that it often leaves behind some actual organic defects which later is of serious importance, or may by weakening the natural resistance of the body, conduce to serious disease of the lungs.

Whooping Cough.—This also is a serious disease in that it frequently leads to chronic lung complaints and Tuberculosis. Fifteen cases were reported in school children, mainly in the East end district, and one death took place.

EPIDEMIC DIARRHOEA.-No cases reported during the year.

Poliomyelitis.—Three cases were notified during Aguust and September, with one death in a child of ten months. All cases were investigated, and inquiries from medical practitioners led to the conclusion that several other cases had occurred but escaped notification, apparently owing to difficulty in diagnosis while in the acute stage. Later on various instances of slight paralysis of one or more muscles led to a revision of opinion as to the real nature of the acute illness. It is noteworthy that the cases occurred mainly in the warmest month, and that most of them were in the Holly Road and its neighbourhood. Personal disinfection (antiseptic gargles, etc.), with isolation as far as it was practicable, were the measures relied on for prevention. One child of six years of age remains completely paralyzed in her lower limbs as the result of this disease.

SANITARY ADMINISTRATION.

1. The staff consists of the Medical Officer of Health (who is also School Medical Officer and Assistant Tuberculosis Officer), the Inspector of Nuisances, and the Health Visitor. There is no clerical staff.

CIVIL ISOLATION HOSPITAL.

2. ACCOMMODATION.—The institution comprises an ad ministrative block, three isolation blocks, two single isolation wards for observation cases, a discharge block, and laundry and disinfecting station. The Scarlet Fever wards have accommodation officially for eight beds, the Diphtheria block ten beds, the new block (as yet unused) six beds, which, with the two observation wards, makes a total of 26 beds, with statutory cubic space allowance available for patients.

The staff normally consists of matron, three assistant nurses, three domestic helps, and porter. The number of staff employed during the year has been much less than this, owing to the increasing difficulty of obtaining satisfactory

nursing and domestic service.

The disinfection in use is a modified Washington Lyon, worked with a pressure of 25 lbs. per square inch in the

jacket, and 10 lbs. in the chamber.

A Climax spraying machine, working with a 6 per cent. formaline solution, is employed for general outside disinfecting purposes.

Forty-four cases were admitted during 1919—namely, 17 Diphtheria cases, 24 Scarlet Fever cases, and 3 observation

cases.

Fifteen out of the 44 cases were those from other districts (Farnborough 11, Fleet 3, Hartley Wintney 1).

Bacteriological examinations are made in all Diphtheria cases before final discharge.

SMALL Pox.—A temporary building of corrugated iron supported on brick piers, is in readiness on a piece of land adjoining the Sewage Works. Gas and water supply are provided, and two earth closets represent the necessary lavatory accommodation. The building contains ten rooms, eight of which could be utilized, when necessary, for small pox patients. It is now under the authority of the County Council, by whom a yearly rent is paid to the District Council. It represents, therefore, a joint District Hospital, which would doubtless be used for all cases occurring in the north-eastern area of the county.

3. Adoptive Acts in Force in the district.

Public Health Amendment Act			1890
Infectious Disease Prevention Act			1890
Private Street Works' Act	******		1892
Public Health Amendment Act (Parts II.,	III., IV.	, V.,	
VI., and certain sections of VII., IX.,	and X.)	*******	1907

ByF-LAWS IN FORCE

DIE-LAWS IN TORCE.		
	Date	Made.
Cleansing of Footways, Pavements and Cesspools	*******	1887
Common Lodging Houses	*******	1887
Hackney Carriages		1887
Hackney Carriages (mechanically driven)		1910
Houses Let in Lodgings	*******	1908
Mortuary		1888
New Streets and Buildings		1887
Nuisances	-	1887
Offensive Trades (Blood Boiler, Blood Drier,	Bone	
Boiler)		1888
Pleasure Grounds		1888
Slaughter Houses		1887
Tents, Vans and Sheds		1907
REGULATIONS are in force in the district in respect	to:-	ELL ET
Dairies Cowsheds and Milkshops		1900
Danies, Cowsieds and Mikshops	*********	

4. CHEMICAL AND BACTERIOLOGICAL LABORATORY.

The following examinations have been carried out during the year:—

Examination	in	suspected			98
rol waln firm	,,	032 11 10	Tuberculosis		10
,,	,,	,,	Venereal Diseases		6
,,,	,,	,,	Cerebro-spinal Fever		2
,,,	,,	,,	Dysentery		2
"	,,	**********	other cases		2
				7 30 1393	
					120

In addition. 10 samples of sewage effluent and 2 of drinking water were analyzed.

OTHER SERVICES.—The authorities of the Cottage Hospital afford willing co-operation in admitting special cases arising more particularly from the medical inspection of schools. Their accommodation, however, is very limited. The Union Infirmary, situated three miles distant at Farnham, is also largely utilized for the admission of patients whom it is thought desirable to remove from their surroundings, and who are ineligible for any reason for admission to the Isolation or the Cottage Hospitals. Cases of illness occurring in Military families are likewise, in certain instances, removed to military hospitals.

HOUSING.

1. Houses.—Estimated total number of dwelling houses, 3,950, of which about 75 per cent. are occupied by the working classes.

No new houses for the working classes were erected during 1919, nor are any in course of erection.

- 2. POPULATION.—The population (which is in this town of a fluctuating character) is estimated at 22,500. Changes are, of course, constantly taking place in the camp, and this is reflected in the civil population. No important changes are to be anticipated in the future.
- 3. (a) Three hundred is the number that is being depended on to satisfy present needs, together with those for a few years ahead. The supply of 100 houses would probably meet the housing difficulties at the present moment.
- (b) Aldershot Park, an estate of about 157 acres, has been purchased by the Council for the erection of 300 houses. Tenders have been issued for the immediate erection of 106

on this site as a first instalment. A site in King's Road, sufficient for the erection of 20 houses, has also been purchased; but it is intended first of all to proceed with the Aldershot Park scheme.

The Manor Estate, of 35 acres, has also been purchased by the Council for the provision of open spaces, and also for education purposes.

- (i) Overcrowding.—(1) Serious overcrowding is only present in a few cases, affecting one or two particular streets. There is, however, generally a slight amount of undesirable crowding, which would be dealt with by the provision of new houses.
- (2) Excessive Overcrowding.—In cases where it has been discovered, has usually been found to be due—firstly, to the inability to find suitable quarters; and this in turn, in many cases, is ascribable to insufficient means.
- (3) Measures Taken.—In some cases, families, or members, have been removed to the infirmary, as the only way of dealing with the difficulty; in others, alternative accommodation has been found in different quarters.
- (4) There were 13 marked cases of overcrowding brought to notice in 1919, of which eight were of a serious nature; the particulars of these are as follows:—
 - Case A. 2 adults and 4 children living and sleeping in small back bedroom of 800 cubic feet capacity.

B. 9 adults and 5 children in 6-roomed house.

- C. 10 adults and 5 children in 6-roomed house.
 - D. 4 adults living and sleeping in small room of 900 cubic feet.
 - E. 6 adults and 2 children occupying 2 small rooms, 800 cubic feet and 500 cubic feet respectively.
 - F. 2 adults and 6 children using as a bedroom a small room of 960 cubic feet.
 - G. 6 adults and 5 children in a house of 5 rooms.
 - H. 3-roomed house occupied by a family, which consisted of 4 adult males, and 1 male of 10;
 4 adult females and 1 female under 10;
 10 persons in all.

In every case informal notices were served, and the conditions remedied.

ii. Fitness of Houses.—1. (a) The general standard of housing in the district is good, there being very few old buildings.

(b) The defects found are classified in another section of this report. The general character of the defects has relation (1) to structural evils—namely defective guttering of roofs and consequent dampness of upper rooms; (2) dirty walls and cellings.

2. The action taken was usually that under Sections 15 and 17 of the Housing Acts, by preliminary notices, repeated

in certain cases in statutory form.

3. Difficulties in remedying unfitness were ascribed to inability to attain material or labour, and perhaps unwillingness on account of cost. No special measures were, however, required beyond the serving of the usual notice.

- iii. Unhealthy Areas.—No representations have been made before or during 1919.
- iv. Bye-laws Relating to Houses, etc.—(1) The existing byelaws appear to work quite satisfactorily, and there is not, as a rule, much difficulty in obtaining compliance. (2) There does not appear at present any need for new or revised bye-laws.
- v. General and Miscellaneous.—No action other than that described in preceding paragraphs has been taken.
- vi. APPENDICES.—(1) Complaints by householders with respect to houses unfit for habitation. None.

(2) Action under Section 17, Housing Act, 1909.

(a) Preliminary notices, and in certain cases statutory notices were issued with regard to 35 dwelling houses.

(b) One dwelling house was considered to be unfit for

human habitation, and was voluntarily closed.

(c) All the dwelling houses, except that described in (b),

were made fit without the making of closing orders.

- (3) No action has been taken during the year under Section 28 of the Housing Act, 1919, but it is intended during 1920 to take action in the majority of cases under this particular Section.
- (4) Closing Orders.—No statutory representations were made. One house, as above stated, was closed voluntarily.

(5) Demolition Orders .- None.

(6) No voluntary Demolition of Dwelling Houses.

(7) Obstructive Buildings. None.

ANNUAL REPORT TO THE ALDERSHOT EDUCATION COMMITTEE OF THE SCHOOL MEDICAL OFFICER FOR THE YEAR 1919.

GENTLEMEN,

I beg to present my Report for the year 1919, with regard to the Medical Inspection of children in the Elementary Schools in your area.

(23)

The following is a general summary of school attendance for the month of June, 1919, also 1918:—

190 30013	TIF	rs.		phey,	191			SHIPTS.	191	8	
SCHOOL.		No. of Teachers.	Accommodation	Number on Books.	Highest No. Present.	Average Attendance.	Percentage of Absentees.	Number on Books.	Highest No. Present.	Average Attendance.	Percentage of Absentees.
West End. Boys Girls Infants	25	12 10 11	295 666	361 460	423 355 448	403 329 411	6 9 8	399 467	423 388 439	403 359 406	8 10 13
Total		33	1331	1250	1226	1143	9	1304	1250	1168	10
East End. Boys Girls Infants		11 9 6		350	397 342 182	381 327 174	6 6 9	358	404 351 184	393 331 177	6 7 5
Total		26	875	948	921	882	7	967	939	901	7
Newport Roa Mixed Infants	ad.	13 5 18	300	189	512 188 700	476 171 647	8 10 9	225	516 216 732	495 200 695	7 11 8
C. of E. School	ol.	5 2	78	66	146 63	141 61	4 8	72	158 68	151	
Total		7	190	215	209	202	6	234	226	214	8
Rom. Catholi Mixed Infants		6 3 - 9	112		206 105	193 98	9 14	100	214 94	203 90	8 9
Total		-	294	323	311	291	10	320	308	293	8
Grand Totals		93	3482	3446	3367	3165	8	3576	3455	3271	9

School Clinic.—This is open every morning at 9 o'clock for the treatment of minor ailments. Two half days per week are arranged for dental treatment, an average of 14 cases

being dealt with by Mr. Glover at each session. One morning every two weeks is devoted to eye cases. Operations for throat cases (adenoids and enlarged tonsils) are carried out on an average once monthly.

STAFF.—Dr. E. W. Routley, S.M.O.; Mrs. Eleanor Shearwood, S. Nurse; Mr. H. Glover, Dental Surgeon. A rota of the resident medical practitioners supplies the anaesthetist. Miss Cordner, the Creche matron, assists at all operations, and also attends the dental sessions. Beds are provided in case of necessity for children after operation whom it may be considered desirable to retain for the night under nursing supervision. One child during the year was thus kept until the following morning.

The Dental Surgeon reports the following summary of the

vear's work :-

Number of Inspections at Schools		 3
Number of children inspected at schools at clinic	$\{269\}$	 641
Number of children found to require treat	and the second second	 541
Number of cases treated at clinic Number of refusals of treatment		 604
Number of objections to inspection —	*******	 None

Eighty-four half-days were employed. The total number of cases seen by him (including cases examined but not

requiring treatment) was 1,384.

At an inspection of children between the ages of seven and nine in 1918, it was found that 90 per cent. required treatment, which was then carried out. At a recent inspection of the same children it was found that less than 20 per cent. required further treatment. The great value of early dental treatment cannot be too strongly insisted on. The amount of time given at present by the dentist is by no means adequate to deal with the large amount of defects in the 3,000 odd school children, and I would strongly urge that four half-days at least should be devoted to dental treatment.

The school nurse has paid 452 visits to the schools, and 349 to the homes of school children. The number of actual children attending for treatment at the Clinic was 484, and the number of their attendances totalled 6,189.

In connection with the inspection of children 13 houses were reported to the Sanitary Inspector for further investigation into the sanitary conditions, while 12 cases were reported to the Inspector for the National Society for the Prevention of Cruelty to Children. Forty-four cases of adenoids and enlarged tonsils were operated on during the year.

Physical Training.—There is no official organizer for this subject, the area being of small size. The work of organization, however, is done by Sergeant Goodbody, who drills the boys at all the schools regularly, and instructs and supervises the women teachers in arranging for the girls the physical exercises prescribed by the code.

EMPLOYMENT OF CHILDREN OF SCHOOL AGE.—Children of school age are not employed to any extent in Aldershot. It is computed that not more than 12 are engaged in employment out of school hours.

LEGAL PROCEEDINGS.—In the cases of 8 children the parents were summoned and convictions obtained for uncleanliness. The legal proceedings were taken in all cases under the School Attendance Byelaws. No proceedings were taken under the Children Act, 1908.

Mental Deficiency.—Approximately 30 children with marked mental deficiency attend the Elementary School, with very little advantage to themselves. Admission to mental institutions, except in a very few selected cases, appears to be extremely difficult. A special school, or a Mental Defective Class, ought to be instituted, where the very backward and mentally defective children could be properly dealt with by specialised and individual supervision.

TABLE I.—NUMBER OF CHILDREN INSPECTED 1st JANUARY, 1919, TO 31st DECEMBER, 1919.

A. "CODE" GROUPS.

1313			Entran	ts.		
Age.	3.	4.	5.	6.	Other Ages	Total.
Boys	2		198	61	9	268
Boys	- 1	_	181	70	19	270
Totals	-	-	379	131	28	538

	Intermediate Group.	e	L	eaver	s.		Grand
Age.	8.	12	13	14	Other Ages.	Total.	Total
Boys	152 135	127 114	18	-	-	297 256	565 526
Totals	287	241	25	_		553	1091

B. Groups other than "Code" X.

(1)	Intermediate Group (other than 8 yrs.).	Special cases.	Re-Examina- tions (i.e. No. of Children Re-examined) (4)
Boys		385	77
Girls		782	504
Totals		1167	581

Table II.—Return of Defects Found in the Course of Medical Inspection in 1919.

		Code	GROUPS	SPEC	IALS
	DEFECT OR DISEASE	Number referred for Treatment	Number requiring to be kept under obseravtion but not referred for Treatment	Number referred for Treatment	Number requiring to be kept under observation but not referred for Treatment
0	(1)	(2)	(3)	(4)	(5)
	Malnutrition	6 -	The state of	-	P. S. S. S. S.
	Uncleanliness		×	-	-
	Head	43		449	-
	Body	3		*	
	Ringworm:				-
	Head	3		52	-
Skin	Body Scabies			28	
	Townstins			10	-
	Other Discose			75 9	1007
	f Defective Vision & Squint	34	4	44	5
Eye	External Eye Disease	5	*	5	0
E-	Defective Hearing	30	6	6	-
Ear	Ear Disease	15	100	33	Total and
Teeth	Dental Disease (see N.B. (2)	221	983	1 9 2	1330
Nose	(Enlarged Tomaile	7	0	11	1
and	Adenoids	7 5	9	11	1
Throat			10	15	1 13/10
	Defective Speech				
Heart	(Heart Disease		5		1
and	Organic		15		
Circula	-] Funtcional			-	
tion	(Anaemia	2	-	1	
	Pulmonary Tuberculosis:	-		A Colombia	Marin Janes
	Definite	1			
Lungs	Suspected	-	4		
	Chronic Bronchitis Other Disease	13	3		2
	-/ Eniloper		3	1	-
Nervou	Chores	170000	9		
System	Other Disease		6	-	-
	Non-pulmonary Tuberculosis:	N 1 - 1			
	Glands	2	3	-	
	Bones and Joints			2	
	Other Forms		12	-	
	Rickets		12		
	Deformities			100	
	Other Defects or Diseases	20	12	132	3

TABLE III.—NUMERICAL RETURN OF ALL EXCEP-TIONAL CHILDREN IN THE AREA IN 1919.

E Inc			Boys	Girls	Total
Blin (including par		Attending Public Elemen- tary Schools Attending Certified Schools for the Blind.	1	Distantia di Salamania di Salam	1
Deaf and	Dumb	Not at School Attending Public Elemen-	1		î
		tary Schools. Attending Certified Schools	2	2	4
(including pa	rtially (lear)	for the Deaf	4	3	7
25	Feeble	Attending Public Elementary Schools. Attending Certified Schools	6	1	7
Mentally Deficient.	Minded.	for Mentally Defective Children. Notified to the Local	1		150
1 1 1	Imbeciles.	(Control) Authority during the Year. Not at School At School. In Home	2	3	2 4 1
		Not at School	1		1
-	Idiots.	Attending Public Elemen-		1 889	18
Epilej	ptics.	tary Schools. Attending Certified Schools	1	1	2
-		for Epileptics. Not at School		1	1
	Pulmonary Tuber-	Attending Public Elemen- tary Schools. Attending Certified Schools		1	1
	culosis.	for Physically Defective Children. Not at School			
Physically Defective.	Other forms.	Attending Public Elemen- tary Schools. Attending Certified Schools	2		2
	of Tuber- culosis.	for Physically Defective Children. Not at School	3	2	5
	Cripples others than Fubercular.	Attending Public Elemen- tary Schools. Attending Certified Schools for Physically Defective	1	2	3
	The Second	Children. Not at School			
Dull or 1	Backward.*	Retarded 2 yearsRetarded 3 years	49 23	39 19	88 42

^{*}Judged according to age and standard.

TABLE IV.

TREATMENT OF DEFECTS OF CHILDREN DURING 1915.

	A STATE OF THE PARTY OF THE PAR	No of which consi	No of defects found for which treatment was considered necessary.	und for it was essary.	si tor eport is	beteatt	Result	Results of Treatment	tment	not treated	f defects
CONDITION		From previous year	*w9V	Total	No. of defe which no re availab	No of defects	Remedied	Improved	Unchanged	No. of defects n	Percentage of
Clothing — — — — — Footwear				TOO	isto)	orași autor	odos	or family	outon		WE WE
Cleanliness of Head			495	495	7	888	888	1 3	1 5	-	100
Nutrition.		11	9	17	1	16	9	6	1		94
Nose and Throat		15	55	70	5	47	47	×	The State of the S	18	100
Ear Disease		15	48	63	9	57	27	29	1		96
Teeth	-	234	541	775	47	621	617	4	THE PERSON NAMED IN	107	08
Lungs		3	1	4	ol to	4	011	4	517		100
Nervous System		6	I	10	67	8	1	9	15	100	80
Skin — — — Rickets		- 2	169	174	4	170	162	00			100
Deformities Tuberculosis Non-Pulmonary		7	2	. 6	nde	00		7			88
Speech Vision and Souint		15	78	93		-8	74	. 60	4	11	87
Hearing Miscellaneous —		113	36	47	4	43	32	111	his i	5	92
Total	-	344	1602	1946	82	1723	1613	102	8	141	89%
000					25 1/2		27	14 15	1		

* The return should show comprehensively all defects found during the year, from whatever source derived, which required treatment.

TABLE V.—INSPECTION, TREATMENT, &c. OF CHILDREN DURING 1919.

	77
(1) The total number of children medically inspected (whether Code Group, special or ailing child).	2228
(2) The number of children in (1) suffering from defects (other than uncleanliness or defective clothing or footgear) who require to be kept under observation (but	119
not referred for treatment).	113
(3) The number of children in (1) who were referred for treatment (excluding uncleanliness, defective clothing, etc.).	1186
(4) The number of children in (3) who received treatment for one of more defects (excluding uncleanliness, defective clothing, etc.)	1080

HE W. LINERED FIRM, THERATHERNT, ACTOR the midstraydo relieu treal of or minper