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Contributors

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ASHINGTON
URBAN DISTRICT COUNCIL.

ANNUAL REPORT

FOR 1909,

R. J. MILLS, M.B.,

MEDICAL OFFICER OF HEALTH.

PRINTED BY ORDER OF THE DISTRICT COUNCIL.

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—
1910.

MEDICAL REPORT FOR 1909.

MR. CHAIRMAN AND COUNCILLORS,

I beg to submit my report for 1909.

In last year's report the population was estimated as 20,000, even though our administrative area as regards contiguity of houses and streets from a sanitary point of view, embraced an area with an additional 1,000 inhabitants.

The extension of our district since last year has given us not nominal, but legal control of this part, and I estimated for the year as soon as control was given, the corrected figure of population as 22,000.

I still keep this figure as the basis of the population for 1909, with the knowledge that I am still under-estimating the population to the proportion obtained at the 1901 census.

The following table will show the reasons on which I base my estimate.

Ashington in June 1908	...	7,445	Hirst in June 1908	...	13,903
„ Excess of births over deaths from June 1908-09	...	90	„ Excess of births over deaths from June 1908-09	...	349
„ New houses occupied from June 1908-09, 5 to each house	...	380	„ New houses occupied from June 1908-09, 5 to each house	...	1,455
		<u>7,915</u>			<u>15,707</u>

Estimating the number of inhabited houses by the rate shown at last census, and bearing in mind that there is now a greater congestion, and scarcity of houses, I find that 5.5 inmates to each house, the figures work out from June to June in each year to be 22,300 and up to the end of this year 23,000.

I have therefore for working purposes put Ashington at 7,000 and Hirst at 15,000, and on these figures my birth and mortality returns have been calculated.

DISTRICT.

Our Urban District at the institution of the present Council covered an administrative area of 2,384.771 acres.

The extension necessary for the sanitary work of streets in proximity to ours, and a continuation of ours, which I mentioned last year has now been effected, and an additional 663.933 acres been acquired making the area now 3,048.704.

The district is bounded on the north, east and west by agricultural land in the Morpeth Rural District and on the south by the river Wansbeck.

The surface soil all over our area is very shallow, resting on a deep bed of clay, a consequence of this being changes of temperature night and morning, due to the easy receptivity of heat by the surface soil, and the equally easy parting of this absorbed heat at sundown.

There is but one staple industry in the district, namely coal mining, at which the bulk of the population find employment. There is however a great and increasing number of persons employed in a growing population such as this, by private traders, by stores, and especially by the builders, to whose energy and enterprise a large amount of employment has been found necessary for the increasing demands of the district.

In both wards the bulk of the house property belongs to the Ashington Coal Company, built in rows of two storey buildings, with yards, ashpits, the latter now almost all covered in conformity with the Bye-laws of the Council—and privies after the earth system attached to ashpits. The streets and communicating avenues between the rows are the property of the Coal Company, their upkeep devolving on the owners, regulated by the Bye-laws of the Council.

An effort is being made by the Council to accelerate the acquisition of the private streets, which on their being brought up to the necessary standard of efficiency will be taken over and kept by the local Council as Highways. One street has already been taken over, Mortimer Street, and others in due course as prepared.

The water supply of the district is from the Ashington and North Seaton Mines, the distribution of which is under Council control.

The building operations have been proceeded with on an extensive scale, and a double street of shop frontage now existing to the single line of a few years ago, the rapid construction of which is the best index of increasing prosperity and employment. The Black Close estate building on the Duke of Portland's ground is being rapidly carried out, streets being laid out concomitant with tenancy of houses.

BIRTH RATE.

The total number of births registered during the year was 820, a slight increase on that of last year 809, but not in a corresponding degree and increase of previous years, there being 106 more in 1908 and only 11 this year. Of these 403 were females and 417 males.

The distribution in the two Wards is as follows:—Ashington 177, and Hirst 643, a decrease in Ashington of 13 and an increase in Hirst of 24 since last year.

The rate per thousand population for the whole district is 37·27, that of last year being 40·45; while the rate in the respective Wards is: Ashington 25·2, as against 27·14 last year, and Hirst 42·86 as against 47·6 last year.

The apparent decrease in the Hirst birth rate is accounted for by the increased inhabited area added to our district, this being in the Hirst Ward only, involving such an increase in the population factor as to slightly reduce the rate in spite of the actual increase which is only 24 in number of births.

The year 1908 showed a phenomenally high birth rate, almost the maximum in each Ward. This year we are lower, but still above that of 1907, and maintaining a district rate considerably above the average County and Urban Rate:—

Average County Rate for	1908	...	29·47
„ Urban „ „	1908	...	31·8
Ashington „ „	1908	...	40·45
England and Wales „ „	1908	...	26·50
Ashington Urban „ „	1909	...	37·27

In the following tables you will find the respective distribution of births in each Ward, in which is included the illegitimate births for the year, 19 in all, 6 in Ashington and 13 in Hirst, as against 21 last year, 8 in Ashington and 13 in Hirst, giving a rate per thousand to the birth rate of 23·1 as against 25·8 last year.

ASHINGTON URBAN DISTRICT COUNCIL. BIRTHS 1909.

Months.	Males.	Females.	Total.
January ...	42	27	69
February ...	26	31	57
March ...	34	25	59
April ...	32	41	73
May ...	39	34	73
June ...	33	35	68
July ...	34	45	79
August ...	31	45	76
September...	31	38	69
October ...	37	31	68
November...	28	26	54
December ...	36	39	75
Total ...	403	417	820

ASHINGTON URBAN DISTRICT COUNCIL. DISTRIBUTION OF BIRTHS. 1909.

Months.	Ashington.	Hirst.	Total.	ILLEGITIMATES.				Total.
				Ashington.		Hirst.		
				Male	Fem	Male	Fem	
January ...	10	59	69	0	0	1	0	1
February ...	16	41	57	0	0	1	0	1
March ...	16	43	59	0	0	0	0	0
April ...	12	61	73	0	0	0	3	3
May ...	17	56	73	0	0	0	0	0
June ...	16	52	68	0	0	2	1	3
July ...	14	65	79	0	1	0	0	1
August ...	13	63	76	0	0	0	0	0
September ...	18	51	69	0	0	1	0	1
October ...	11	57	68	0	0	2	0	2
November ...	15	39	54	2	1	1	0	4
December ...	19	56	75	1	1	1	0	3
Total ...	177	643	820	3	3	9	4	19

DEATH RATE.

The Mortality for the year from all causes is 289 ; 150 males and 139 females, a decrease of 42 on that of last year.

The rate per thousand population is 13·13, which corrected by excluding 14 cases of premature birth, 7 fatal accidents and 2 cases of suicide, we have a corrected return of 12·08.

With the exception of 1907 this is the lowest death rate recorded in the history of the Council. The immense decrease in the mortality is not fully appreciated by the numerical fact of there being only 42 fewer deaths, but in the fact that combined with this we had an extra two thousand population to take our figures from as compared with last year, which worked out would give us a real numerical decrease of 75 proportionately to last year.

A comparison of the yearly mortality since the formation of the Council is as follows:—

Year, 1896	Total Mortality, 17·8	Corrected Mortality, 17·4
" 1897	" " 17·8	" " 16·6
" 1898	" " 16·3	" " 15·4
" 1899	" " 18·5	" " 16·8
" 1900	" " 17·45	" " 15·17
" 1901	" " 23·28	" " 21·28
" 1902	" " 17·02	" " 15·3
" 1903	" " 16·25	" " 14·25
" 1904	" " 18·29	" " 17·35
" 1905	" " 15·13	" " 13·6
" 1906	" " 16·35	" " 14·7
" 1907	" " 13·45	" " 11·95
" 1908	" " 16·5	" " 15·1
" 1909	" " 13·13	" " 12·08

The Mortality in each Ward per thousand population is, Ashington 13·4 and Hirst 13·0.

This is almost the first time in a year's summary that we have an equal rate, the cause of which to a great extent being the comparative absence of Diarrhoeal diseases.

The distribution of age Mortality is as follows:—

Under 1 year, 109 deaths ; 20 in Ashington and 89 in Hirst.

From 1-5	" 53	" ; 15	" 38	"
" 5-15	" 22	" ; 8	" 14	"
" 15-25	" 19	" ; 7	" 12	"
" 25-65	" 63	" ; 35	" 28	"
" upwards	23	" ; 9	" 14	"

The following tables show the above distribution each month.

ASHINGTON URBAN DISTRICT COUNCIL. AGE MORTALITY. 1909.

Months.	Males.	Fem'ls	All Ages.	Under 1 year.	1 to 5 years.	5 to 15 years.	15 to 25 years.	25 to 65 years.	65 yrs. and Ups.
January ...	14	14	28	9	5	3	1	9	1
February ..	11	7	18	4	3	1	3	6	1
March ...	11	12	23	7	8	1	0	7	0
April ...	15	17	32	11	8	4	1	5	3
May ...	14	12	26	11	3	3	1	4	4
June ...	15	16	31	6	9	3	2	7	4
July ...	10	8	18	4	5	0	0	7	2
August ...	15	6	21	13	2	1	1	4	0
September	9	13	22	12	3	0	1	5	1
October ...	9	8	17	5	1	4	4	0	3
November	13	12	25	11	2	1	3	6	2
December	14	14	28	16	4	1	2	3	2
Total.	150	139	289	109	53	22	19	63	23

DISTRIBUTION OF AGE MORTALITY. ASHINGTON. 1909.

Months.	All Ages.	Under 1 year.	1 to 5 years.	5 to 15 years.	15 to 25 years.	25 to 65 years.	65 years and Upwards
January ...	13	2	1	2	0	8	0
February ...	7	1	1	0	2	2	1
March ...	6	1	1	1	0	3	0
April ...	10	2	4	0	1	1	2
May ...	5	0	1	1	0	2	1
June ...	11	1	1	2	0	6	1
July ...	9	1	2	0	0	6	0
August ...	5	3	0	0	1	1	0
September ...	5	3	1	0	0	1	0
October ...	6	1	0	1	3	0	1
November ...	5	0	1	0	0	3	1
December ...	12	5	2	1	0	2	2
Total ...	94	20	15	8	7	35	9

DISTRIBUTION OF AGE MORTALITY. HIRST. 1909.

Months.	All Ages.	Under 1 year.	1 to 5 years.	5 to 15 years.	15 to 25 years.	25 to 65 years.	65 years and Upwards
January ...	15	7	4	1	1	1	1
February ...	11	3	2	1	1	4	0
March ...	17	6	7	0	0	4	0
April ...	22	9	4	4	0	4	1
May ...	21	11	2	2	1	2	3
June ...	20	5	8	1	2	1	3
July ...	9	3	3	0	0	1	2
August ...	16	10	2	1	0	3	0
September ...	17	9	2	0	1	4	1
October ...	11	4	1	3	1	0	2
November ...	20	11	1	1	3	3	1
December ...	16	11	2	0	2	1	0
Total ...	195	89	38	14	12	28	14

The rate of Infantile Mortality over the district per thousand population is 4·9 as against 8·2 last year.

The Wards show a similar proportion of 2·85 for Ashington, and 5·9 for Hirst, a considerable decrease in both Wards; Hirst being less than half that of the previous year.

Basing the Infant Mortality not on the population—but per thousand children born, the rate over the district is the lowest we have ever had, even less than our good year in 1907, namely 132·9 as against 202·7 last year and 146·9 in 1907. In Ashington the rate is

116.9 and in Hirst 138.3; these rates last year being 142.1 and 221.3 respectively. The following will show how we stand comparatively with other districts:—

Infantile Mortality in County for	...	1908	...	146.41
" " County Urban District for		1908	...	154.89
" " " Rural District for		1908	...	129.92
" " " England and Wales for		1908	...	121.0
" " " mean of 10 years			...	137.8
" " " Ashington for	...	1909	...	132.9

Our district this year comes nearer to the Rural rate than to the Urban, and it is gratifying to find that in the Hirst Ward where it has always been greatest it has been reduced to 138.3.

ASHINGTON URBAN DISTRICT. CAUSES OF DEATH. 1909.

Causes of Death. 1	Deaths in or belonging Whole District at Sub-joined Ages.							Deaths in Localities at all Ages.		
	All Ages. 2	Under 1 yr. 3	1 and und. 5 4	5 and und 15 5	15 and und 25 6	25 and und 65 7	65 and upds. 8	Ash- ington 9	Hirst. 10	Total Deaths in Public Instit'ns in District. 11
Measles ..	17	3	11	3	0	0	0	1	16	0
Whooping Cough ...	3	2	1	0	0	0	0	1	2	0
Diphtheria ..	5	0	2	3	0	0	0	1	4	0
Senility ..	5	0	0	0	0	0	5	3	2	0
Continued Fever ..	1	0	0	1	0	0	0	1	0	0
Enteric Fever..	3	0	0	2	1	0	0	3	0	3
Apoplexy ..	7	0	0	0	0	4	3	4	3	0
Epidemic Influenza ..	2	0	0	0	0	2	0	1	1	0
Bright's Disease ..	8	0	1	0	2	5	0	4	4	0
Convulsions	11	9	2	0	0	0	0	3	8	0
Diarrhoea ..	9	9	0	0	0	0	0	1	8	0
Epidemic Enteritis ..	11	10	1	0	0	0	0	1	10	0
Erysipelas ..	1	0	0	0	0	1	0	1	0	0
Other Septic Diseases ..	2	0	0	1	0	1	0	1	1	0
Phthisis ..	15	0	0	1	3	11	0	3	12	0
Other Tuber. Diseases ..	20	6	5	4	4	1	0	9	11	0
Cancer ..	9	0	0	0	1	6	2	5	4	0
Bronchitis ..	16	6	2	0	0	5	3	5	11	0
Pneumonia ..	5	0	2	1	1	0	1	0	5	0
Other Respiratory Diseases ..	1	0	0	0	0	1	0	1	0	0
Meningitis Non-Tuber...	10	1	6	2	1	0	0	7	3	0
Premature Birth ..	14	14	0	0	0	0	0	3	11	0
Diseases and Accidents of Parturition ..	5	1	0	0	2	2	0	0	5	0
Heart Disease..	24	0	1	2	3	13	5	11	13	0
Accidents ..	7	0	2	1	1	2	1	2	5	0
Suicides ..	2	0	0	0	0	2	0	1	1	0
Broncho Pneumonia ..	24	11	12	1	0	0	0	7	17	0
Debility ..	35	32	2	0	0	0	1	5	30	0
All other Causes ..	17	5	3	0	0	7	2	9	8	0
All Causes ..	289	109	53	22	19	63	23	94	195	3

An analysis of the foregoing table of causes of death, shows the following from infectious diseases, namely :—

Diphtheria	...	5
Continued Fever	...	1
Enteric	„	3
Erysipelas	...	1

—
10, giving a rate per thousand of

these diseases of 0.45.

Infectious diseases not notifiable show :—

Measles	...	17
Whooping Cough	...	3
Epidemic Enteritis	...	11
Tuberculosis	...	35

The rate per thousand population of these diseases is as follows :—

Notifiable Infectious Diseases	...	0.45
Non-Notifiable Infectious Diseases		
Measles	...	0.77
Whooping Cough	...	0.13
Phthisis	...	0.68
All forms Tubercular Diseases	..	1.58
Epidemic Enteritis	...	0.5
Respiratory Diseases		
Bronchitis	...	0.72
Broncho Pneumonia	...	1.09
Respiratory Diseases of all kinds (excluding Phthisis)	...	2.09

The total number of deaths from Respiratory Diseases (Phthisis excluded) is 46, less by 10 than the number last year.

You will notice that our record in Typhoid Fever is not as good as last year, there being 3 deaths from this disease out of 21 cases notified, as against 1 death in 1908 out of 25 cases notified; of these 3 cases 1 died shortly after admission, 1 within a week, and the other case had only residence for 8 days.

The deaths from Diphtheria number 5, out of 39 cases notified, the rate being practically the same as last year.

The deaths from Phthisis are 15, less by 2 than last year, but the aggregate of all kinds of Tubercular diseases is greater namely 35, as against the aggregate of 34, in 1908.

You will have noticed the comparative inconsequence of our methods of treating the various kinds of Infectious disease, a result the cause of which is the non-adaptability by Health Authorities of applying preventative and remedial measures to new conditions and exigencies. We have done much for prevention both in Hospital and at home, yet the most important disease calling for heroic treatment is left to foster and spread in our community, a disease productive of more national as well as local bankruptcy than any of the others—Tuberculosis.

This year I again urge the Council to consider the advisability of making this disease notifiable, in order that all cases of the Pulmonary Type should be provided with means, in the households affected, that would prevent its spread both in the family and to others.

I mention this from a financial point of view as regards effectual prevention. There is however the remedial question to be considered, which is also financial in so much that it involves a long unproductive period in a workman's life, it involves expenditure on the part of Friendly Societies, and Sick Clubs, and ultimately on the Board of Guardians or ratepayers.

The Northern Sanatorium at Barrasford is a convenient site and the results of the treatment are convincing. Were these Societies, the local Clubs, with the help of the Council to contribute an inappreciable sum of money so far as the individual pocket is concerned, a great amount of good would accrue both in saving early cases and also in preventing those cases from infecting others. A rational expenditure in this as in the case of our Hospitals conserves the local as well as the National Capital—the well being and health of the community.

In order to appreciate the causes of our Infant Mortality and the age incidence of the various diseases and especially in regard to Debility and Malnutrition I append the following table:—

INFANTILE MORTALITY DURING THE YEAR 1909.

Causes of Death.		Und. 1 week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total und. 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 1 year.
I Common Infectious Diseases.	Small-Pox ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Chicken-Pox ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Measles ..	0	0	0	0	0	0	0	0	0	1	0	0	2	0	0	0	3
	Scarlet Fever ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Diphtheria ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Whooping Cough ..	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	2
II Diarrhoeal Diseases.	Diarrhoea, all forms ..	0	0	0	0	0	1	2	1	0	0	0	0	1	1	1	2	9
	Enteritis, Muco-Ent. ..	0	0	0	0	0	0	1	0	4	2	1	0	1	1	0	0	10
	Gastro Ent. ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Gastritis Catarrh and Gastro Intest ..	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	2
III Wasting Diseases.	Premature Birth ..	12	1	0	1	14	0	0	0	0	0	0	0	0	0	0	0	14
	Congenital Defects ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Injury at Birth ..	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
	Atrophy, Debility Marasmus ..	11	1	0	4	16	10	0	0	4	1	1	0	0	0	0	0	32
IV Tuber Diseases.	Tuberculous Meningitis ..	0	0	0	0	0	0	1	0	0	1	1	2	1	0	0	0	6
	Tuberculous Peritonitis ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Tuber Diseases ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
V Other Diseases.	Rickets ..	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
	Erysipelas ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Syphilis ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Meningitis Non-Tuber. ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
	Convulsions ..	2	0	1	0	3	2	1	3	0	0	0	0	0	0	0	0	9
	Bronchitis ..	0	1	0	0	1	0	0	2	1	0	1	0	0	0	1	0	6
	Laryngitis ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Pneumonia and Broncho-Pneumonia ..	0	0	0	0	0	1	0	0	2	2	1	1	2	1	1	0	11
	Suffocation ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other Causes ..	0	1	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Total ..		26	4	1	5	36	15	6	6	11	7	7	3	7	5	3	3	109

You will notice in the above table that exactly one-third of the total Infantile Mortality takes place in the first 4 weeks of life. We have no fewer than 14 cases of Premature Birth, and 16 cases of Debility in that period, thus forcing on us the conclusion that prenatal conditions are responsible for this waste of life. The elimination of these unfit cannot certainly be deplored at that early age, but what is deplorable is that the number could be greatly reduced. While we teach mothers how to feed and bring up their children it is at the same time essential that we should educate these same mothers in how to take care of themselves. It is most regrettable to notice the irresponsible way in which our young people even in their teens take on their matrimonial obligations, and at the same time insist on having their usual pleasure, both at their own risk and that of their progeny.

Our educative propaganda to meet this need, must reach further afield than can be done by issuing printed instructions. A great part of the obligation rests with the parents, with their teachers and on the institution of classes even before leaving school, in household management and domestic economy.

Our Health Visitors when the Notification of Births Act comes into force will also afford a very valuable means of imparting such knowledge, especially as regards maternity, and the sympathetic instruction given, will be the means of making the innocently careless girl-wife into a capable and self-reliant mother, who relying on her own educated resourcefulness will be able to dispense with the precarious and conflicting advice of her neighbours.

On turning to the table again we notice that up to the seventh month, we have another 16 cases of Debility, some of which we may infer could be saved by proper dietary. One can hardly imagine such a thing as destitution in a community like ours, and though these deaths may occur in homes of plenty, yet malnutrition follows just as readily through want of knowledge in Infantile dietary.

We have one particularly bright spot in our table this year, namely the almost complete absence of deaths from Epidemic Enteritis, only 9 cases being registered under 1 year, and only 21 deaths from Gastric and Diarrhoeal Diseases of all kinds. The climatic conditions have been favourable this year, but I think the constant agitation, the continual reiteration, the wide spread advising both by teaching and by printed instruction, is beginning to bear fruit. We should not and can never be content with sporadic success, we require to still further improve, to put our streets into such a condition of cleanliness that there will be a minimum of contamination of infant foods from the outside, and also press home the fact, whereas that being a condition impossible to perfect, it is possible to prevent such contamination by cleanliness in preparing food, in excluding dust, and in bottle-fed children, seeing that they get pure milk out of clean hottles.

The foregoing diseases appear to me every year to be more or less preventable and we can also include Broncho Pneumonia in the same list (the mortality of which is the same numerically as last year). Pulmonary diseases in children are to a great extent due to exposure, to sudden change of temperature, to the taking of children from the excessively heated apartments out to the cold night air—and our air owing to the condition of the sub-soil already mentioned, even in summer is cold, and irrespirable by infants. This habit in spite of constant teaching is hard to break off. The neglect in this matter is nothing short of criminal, but I am still hopeful that a more serious view will yet be taken by parents as to their responsibility to their children, and their duty to curtail every entertainment that necessitates the exposure of their children to dangerous ailments.

I append a table showing the proportion of births and deaths in each Ward relative to their population, explaining the difference in ratio to the birth rate in Hirst which inhabited by the younger people of the community is necessarily higher than in Ashington.

ASHINGTON.				HIRST.			
Births should be	...	...	261	Births should be	...	...	559
„ are	...	...	177	„ are	...	...	643
84 less				84 more			
Deaths should be	...	...	92	Deaths should be	...	...	197
„ are	...	...	94	„ are	...	...	195
2 more				2 less			
Infantile Mortality should be			23	Infantile Mortality should be			85
„ „ is			20	„ „ is			94
3 less				9 more			

The Mortality proportion is reversed this year, the other relations being the same as last year.

INFECTIOUS DISEASES.

There is a slight increase in the number of Infectious diseases notified during this last year, namely—129 against 104 last year and 118 in 1907.

The rate per thousand attacked over whole district is 5·8, as against 5·2 last year, and the rate in the Wards is Ashington 8·3 and Hirst 4·7. There is a greater number of cases in the Ashington Ward than in Hirst proportionate to their population.

Diphtheria is less this year by 3 cases, Enteric by 4, while Scarlet Fever has increased by 29.

The following tables explain the area of distribution in the different months and the ages of those attacked:—

CASES OF INFECTIOUS DISEASES NOTIFIED DURING 12 MONTHS ENDING 31ST DECEMBER, 1909. ASHINGTON URBAN DISTRICT.

Notifiable Diseases.	Cases Notifiable in Whole District.								Total Cases in in each Locality.		Cases Removed to Hospital.	
	At Ages—Years.											
	At all Ages.	Und. 1 year.	1 to 5	5 to 15	15to25	25to65	65 and upds.	Ash- ington	Hirst	Ash- ington	Hirst	
Diphtheria	39	1	6	26	2	4	0	13	26	0	0	
Scarlet Fever	46	1	9	30	6	0	0	17	29	0	0	
Erysipelas	18	1	0	0	0	15	2	11	7	0	0	
Enteric Fever	21	0	0	6	12	3	0	13	8	13	8	
Continued Fever	4	0	0	2	2	0	0	4	0	0	0	
Puerperal Fever	1	0	0	0	0	1	0	0	1	0	0	
Total	129	3	15	64	22	23	2	58	71	13	8	

DISTRIBUTION OF INFECTIOUS DISEASES. 1909.

Months.	Diphtheria.		Scarlet Fever		Erysipelas.		Enteric.		Cont. Fever.		Puer. Fever.		Total.		
	Ash- ington	Hirst	Ash- ington	Hirst	Ash- ington	Hirst	Ash- ington	Hirst	Ash- ington	Hirst	Ash- ington	Hirst	Ash.	H'st	both
Jan.	1	7	0	1	0	1	0	0	2	0	0	0	3	9	12
Feb.	0	1	0	0	1	1	2	0	0	0	0	0	3	2	5
Mar.	2	2	0	7	2	2	1	0	0	0	0	0	5	11	16
Apr.	0	2	0	0	3	0	0	0	0	0	0	0	3	2	5
May	0	2	0	1	3	0	1	1	0	0	0	0	4	4	8
June	1	0	0	0	0	0	0	0	0	0	0	1	1	1	2
July	0	2	0	4	1	1	0	1	0	0	0	0	1	8	9
Aug.	0	0	1	1	0	1	3	0	1	0	0	0	5	2	7
Sept.	4	0	3	3	0	0	2	3	0	0	0	0	9	6	15
Oct.	0	4	3	8	1	0	4	3	0	0	0	0	8	15	23
Nov.	3	2	3	1	0	0	0	0	0	0	0	0	6	3	9
Dec.	2	4	7	3	0	1	0	0	1	0	0	0	10	8	18
Total	13	26	17	29	11	7	13	8	4	0	0	1	58	71	129

A considerable aid to confirmatory diagnosis, is the Bacteriological examination of suspected cases in Enteric, Diphtheria and Phthisis. I am glad to say that this means, instituted by the County Council is being more and more utilised now by practitioners. In school cases I still further urge the necessity of negative results before the child is again sent back to school. The use of Serum for Diphtheria cases has also greatly reduced the mortality of this disease, and should be used as a prophylactic in the other members of the family. I have found its use in this way a most efficient means of prevention.

Under the Public Health (Tuberculosis) Regulation 1908, I have received the notice of change of address, and 2 notifications of Phthisis of poor persons resident in the district.

SCHOOLS.

In the month of March it was deemed advisable to close the schools in the Hirst Ward owing to an extensive outbreak of Measles, and at Easter I recommended the Managers to close the Infant department of the Bothal Schools in Ashington, which was accordingly done for a fortnight. The epidemic very quickly subsided.

A slight epidemic of Rotheln or German Measles broke out all over the district during the summer, but of a very mild type. I mentioned in my last year's Report that a better standard of cleanliness prevailed in school children. Partly this is due no doubt to the inspection by the School Medical Officer, but I attribute it in a still greater degree to the insistence on cleanliness by the teachers. The periodic examination by the Medical Officer of Schools is not sufficient to maintain this standard, and is ineffectual in dealing with conditions such as the discovery of Infectious diseases in children attending school. I have advised the teachers in such cases to send the children home with a note to the parents to consult their Medical adviser on the matter.

It would be a distinct advantage if all teachers had in their training curriculum the means of understanding the initial signs of symptoms of Infectious diseases and report thereon to the Medical Officer of Health. By this means many of our class epidemics or room Epidemics would be suppressed early.

HOSPITAL.

During the year there were 21 cases of Enteric Fever admitted for treatment, 13 from Ashington and 8 from Hirst.

As already explained there were 3 deaths in that period.

Early notification and prompt removal of patients is steadily keeping Enteric away from the community and the good work done these last seven years has justified its upkeep.

I asked for several improvements in the household department for some time. Building operations were commenced and are now completed, though the final result is not altogether as convenient as it might have been. The extra space was however very badly wanted and the accessories in water arrangements will I hope when completed, greatly facilitate the Ward work.

SEWAGE, SCAVENGING AND DISINFECTING.

In a rapidly growing district such as ours where extensive building operations are being conducted, and the area extending, it is necessary to construct *pari passu* with the development a changing and extending system of drainage.

The Council have been able to cope with this difficulty successfully and several new and larger sewers are being laid down.

A new main sewer has been provided for new buildings at Hirst and a new branch sewer for Station Road north side. The sewers in the vicinity of Miners' Hall have been extended and improved, and a much needed extension is about to be put in progress in order to relieve the existing inadequacy of the Park Road sewer, which will take the form of an additional sewer for that locality. All the sewers and drains are flushed regularly, there being an abundant supply of water available for that purpose. To meet the requirements of the buildings on the Black Close Estate or Garden City—a township of new houses estimated when completed of housing 5,000 inhabitants, a new outlet has been made for sewage. A large sewer (18 in. pipe) has been laid through Rollington Dene already connected with the branch sewers from the neighbourhood referred to, and conducted to its outlet in the Wansbeck river.

Personal inspection of Ashpits by your Sanitary Inspector and myself has improved the nuisance I complained of last year, the "tipping" into them of all kinds of decaying vegetable refuse. Printed notices are also posted up warning householders as to the danger of such, but a great deal still remains to be done for the complete abatement of this nuisance.

A small Distructor would be of advantage for destroying trades refuse.

Ashpit cleaning is done by contractors, and this year several vital improvements have been instituted. All carts and wagons have now to be covered and the work must be done as much as possible during the night. This will tend to lessen the nuisance from dust, etc., blowing about the streets in transit.

Lime spraying of ashpits is most effectively carried out, especially in the hot weather and has proved in our district a most satisfactory oxidizer, deodoriser and disinfectant.

Deodorising of ashpits is systematically carried out after cleansing by Antiseptic Powder.

Infected houses, dirty houses, and suspicious houses are disinfected, the means adopted being Sulphur Fumes and Formaline sprays.

Clothing, bedding, etc., are disinfected by the "Thresh" disinfector at the Hospital. Izal is used for distribution at the homes.

The Sanitary Inspector or Medical Officer is notified by the Practitioners in the district on the recovery of patients suffering from notifiable diseases and steps taken to disinfect the premises.

WATER.

The Council is the Water Authority of the district.

The Supply is from the Pits of the Ashington Coal Coy. It is tapped a considerable distance underground in from the shaft bottom, where it filters through the free-stone roof, is conducted along a specially built channel to which no one has access but officials connected with same, is pumped to the surface, where it is filtered and distributed from tank reservoirs throughout the district. It is a deep well water and its gathering ground is many miles from the district. The sub-soil over our district is of clay and to such a depth that contamination from the surface is impossible. From frequent analysis, I find the quality of the water satisfactory both chemically and bacteriologically.

There is also a supply from the North Seaton Collieries of equal purity, for the supply of the Seaton Hirst part of the town. It is proposed that the connecting up of these supplies will greatly increase the pressure and give a better distribution.

The filters have been thoroughly cleaned out and charged with new sand and gravsl.

New mains are being laid to meet the demands of the extensive building, and last year mains to the extent of 2,773 yards were laid, as against 2,248 the previous year.

Additional taps—24 this year have been fixed at convenient places in the colliery rows and gulleys and drains to suit, a still further extension of which will be a great boon to householders.

On trades premises the Council have 51 private meters for trades purposes.

At the Colliery they have also 8 bulk meters to register consumption.

The amount consumed by the Council last year was 33,099,000 gallons, and the supply is practically unlimited. Although this only gives 4 gallons per head per unit population per day, it must be understood that this water is almost exclusively used for potable purposes. For clothes washing and personal lavation, rain water is almost entirely used, in fact to more than double the extent of the harder tap water.

EXTENSION AND IMPROVEMENTS.

New Houses.—The new houses erected during the year are of a better type, with more air space and better street accommodation than has hitherto obtained.

In Hirst during the last year 367 and in Ashington 65 new houses were erected all in conformity to the Bye-laws of the Council.

Of this number 325 have had the water laid in and connected to Council mains, 40 bath-rooms have been fitted up with baths and lavatories as against 12 in the previous year, and 35 water closets have been fixed as against 8 in 1908.

An improvement in the new buildings, which I hope will yet become universal in our district is the cementing of yards and the constructing of wash houses.

Urinals.—We have now 4 public urinals, one having been constructed during the year. There were also 4 private urinals erected in club premises, which is a great sanitary improvement. These urinals are all well flushed and fitted with light.

Highways.—The Station Road, Hirst, is being considerably widened to meet the needs both of passengers and vehicular traffic, and is required in consequence of the shop premises in course of erection on the North side. I mentioned in last report that the main street was being laid with tar macadam. This proved an improvement for a time but the experiment on the whole has not been justified by its success.

The Council have embarked on a scheme for the taking over of Private Roads and Streets, conditional on the same being put into such a condition as the Bye-laws of the Council require. Mortimer Street has already been completed in that respect and I hope before another year some of the smaller streets will also be under the Council control.

Footpaths have been improved and during the last year about 2,000 yards of asphalt paving has been accomplished.

Private Streets.—In the existing private streets a considerable improvement is still desirable, but a great deal has been done throughout the year. Following on the reconstruction of the Long Row, the Fourth Row has been turned in to a good street and had it been widened would have left nothing better to be desired.

Public Seats are being fixed up and repaired as required.

Lighting.—The lighting of the district in spite of the most assiduous efforts on the part of the Council, is not by any means perfect. More street lamps are required or better ones. The system is somewhat erratic and the all night lamps are certainly not efficiently maintained. These all night lamps are of the utmost importance in our town, as men are coming and going to their work, at all hours. A number of Petrol lamps have been purchased to suit the needs of the newer parts of the town till some more satisfactory arrangements are brought about between the Electric Company and the Council.

Slaughter Houses—I requested in last report that the Council consider the advisability of erecting a public Abattoir. I have to report that that question is now under consideration.

DAIRIES, COWSHEDS AND MILKSHOPS.

During the year I have inspected the Cowsheds and Milkshops in our district and find the standard well maintained, and in some farms considerable improvements installed in the form of milk coolers, and still more effective cleansing arrangements.

It was difficult at first proving the necessity of grooming cows, but the prejudice has been to a great extent overcome. The milkers hands are clean and the vessels and distributing cans thoroughly sterilised.

In every case there is now an adequate water supply both for cattle and cleansing purposes. The water supply is now in the hands of the Council.

The Cowsheds are well ventilated, lighted and drained, as are also the Dairies.

In a congested district like ours a pure milk supply is indispensable, and I am assured that every precaution is taken on the part of the vendors to ensure this. There are 8 Dairy Farms in our district, a considerable portion of milk supply coming from outside also,—the outside Farms that I have seen being in the same satisfactory condition as reported above.

FACTORIES AND WORKSHOPS.

In Hirst there are 17 Workshops and 3 Factories. In Ashington there are 12 Workshops and 7 Factories.

Several improvements have taken place in the Workshops as I suggested last year. In one case I insisted on certain improvements, as to paving and drainage which was only partially carried out in one of the Factories when the business was discontinued.

Sanitary arrangements and W.C. accommodation are satisfactory.

There are no underground Bakeries.

There are no out-workers.

ALLOTMENTS AND SMALL HOLDINGS.

Under the above Act an Association has been formed, and registered as required.

Last year I reported that 10 acres had been obtained from the Duke of Portland and sub-leased to the above Association, which is now occupied by the 100 applicants, who have made a very successful effort with satisfactory results. Numerous applications are still being made for more land, the difficulty being to procure such in convenient localities.

The County Council this last year were offered 111 acres in proximity to our township, at a reasonable price, but after much negotiation the matter was allowed to drop. The Association was much aggrieved at this as they had applicants who would have taken all the land. A considerable portion was then let by the owner the Duke of Portland, the Association however managing to get 40 acres for Small Holdings but at a much higher price than if leased by the County Council.

The remaining 11 acres was taken by the Urban District Council for Allotments. The people are anxious to get still more land, and I regret to report that no prospect of getting it from the North Seaton Estate exists now, which I was so optimistic about in my last report.

THE HEALTH OF THE DISTRICT.

The health of the district as judged from the foregoing may be considered very good. Both Adult and Infantile Mortality being much lower than usual. The epidemics mentioned were not of long duration and the mortality slight.

The severe weather at the end of the year however had rather a disastrous effect on the aged, especially with respiratory diseases, and at the same time a severe Influenzal Epidemic necessitated the enforced idleness of a great many workers. The other diseases I have commented on in the body of my report.

I have to thank Mr. Wood, Mr. Marshall and Mr. Shield, for facts and figures in connection with their various departments.

Thanking you again for your continued consideration and courtesy during the year.

I remain, Gentlemen,

Your Obedient Servant,

R. J. MILLS.

