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ASHINGTON URBAN DISTRICT COUNCIL.

ANNUAL REPORT

FOR 1911,

R. J. MILLS, M.B.,

MEDICAL OFFICER OF HEALTH.

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COUNCIL CHAMBERS,

ASHINGTON,

FEBRUARY, 1911.

SURVEYOR'S AND SANITARY INSPECTOR'S REPORT FOR 1911.

MR. CHAIRMAN AND COUNCILLORS,

I beg to submit my report for the year ended December 31st, 1911.

HIGHWAYS.

During the year no effort has been spared to have all highways and other roads taken over by the Council thoroughly scavenged. The main road in particular has received a good deal of attention, especially during the last four months. A fall of rain being almost a daily occurence, revealing defective construction, and resulting in an abnormal accumulation of mud. The proposed improvements to this road now under consideration, including the removal of obstructive buildings, will be duly expedited, and the whole of the work should be completed during the present year. The widening of Newbiggin Road opposite the North Seaton Hotel, including the setting back of boundry wall has effected a great improvement. The road generally will require to be reconstructed. Arrangements have now been made to remove the telegraph poles to more suitable positions, while the electric light cables, will require to be laid at lower levels. All other roads have received attention as required in the way of repairs, including crossings, etc., also many minor improvements affected. Finger Posts, Motor Caution Posts, Seats, and Street Waste Paper Baskets, have also been fixed where necessary. A sufficient number of Name Plates have been affixed to every street, while a uniform numbering of all houses is in progress, a notice being served on all householders, stating the proper number of their house.

The following additional streets have been taken over by the Council as highways during the year, viz.:—

Back Poplar and Sycamore Streets.

- ,, Juliet and Ariel Streets.
- .. Roseneath Terrace.
- " Roseneath Terrace and Gable End Street.
- " Beechgrove.
- " Beechgrove and Gable End Street.

Plans and Specifications have been prepared for the making up of several other street in Hirst. This work will be carried out under the provisions of the Private Street Works Act, 1892. The work will be put in hands as quickly as possible. A number of roads belonging to the Ashington Coal Company have been scavenged and repaired by their own workmen. Several new roads are also in course of construction. The making up of other streets on His Grace The Duke of Portland's Estate (considering the inclement weather), are progressing favourably.

Proper construction of all streets concomitant with the erection and tenancy of houses should be enforced.

In addition to the disinfecting of houses numerous articles of bedding, etc., have been disinfected in a Thresh disinfector. A supply of disinfectants has been judiciously distributed to all infected houses.

The four public urinals have been daily cleansed, flushed and disinfected, while those to the various Clubs have also been kept in a sanitary condition, and in the case of three Clubs, new urinals of a modern type have been installed.

NUISANCES.

Summary of nuisances for the abatement of which informal notices or letters were served during 1911.

Blocked Drains					 15
Deposit of Refuse in	Highways	and	thorough	nfares	 2
Dilapidated Out-office	ces				 3
Dirty Houses					 5
Smoke Nuisances					 2
Miscellaneous	•••			•••	 23
				TOTAL	 50

In addition to the tabulated notices many minor nuisances were abated after verbal complaint, arising chiefly from uncleanliness and overcrowding.

HOUSING.

There are 4,604 occupied houses in the district. The erection of new houses proceeds steadily. There is a decided improvement in the class of work, now carried out, and that of six months ago. All drains are inspected before being covered up, some of the drainage within late has been exceptionally well executed, and while there has been a number of contraventions of the Bye-laws, in most cases it has been chiefly due to ignorance on the part of the contractors. The proposed revision of Bye-laws for Streets and Buildings will do much to prevent any such misunderstanding in future. The desire to provide bath-rooms and washhouses to existing houses is to be commended, also where practicable, the conversion of privies into water closets. Special attention has been given to the erection of out-offices the substitution of the stone-ware riser in place of wood, the rendering of ash-pit walls with cement and the concrete lintol in place of brick-arch, have affected a great improvement. The compulsory inspection of all new houses before occupation and the issuing of a certificate as fit for habitation has resulted in much good, defects and contraventions being remedied before the tenant takes possession.

New houses erected and occupied during the year are as follows:

100000	CI COUCH WING	ocoup	Tou during	orre Jener con	C 665 101	101115	•
	ASHINGTON		98		HIRST		354
1910			63				242

LIGHTING.

The lighting of streets throughout the district, is not as satisfactory as one would like, the light from the Electric lamps being at times much below their standard candle-power. This is due to the cables being too small.

The petrol lamps, at present, are in fairly good repair.

The number of lamps are as follows:

Electric Petrol	-	 282 57
	TOTAL	 339

A scheme for the general improvement of the lighting of the district should receive consideration at an early date.

WATER.

The Council is the Water Authority of the District.

The main supply is from the mines of the Ashington Coal Coy. There is also a supply from the North Seaton Colliery. Eight bulk meters are used to register the quantity of water used. The consumption for the year was 47,019,000 gallons as compared with 32,882,000 gallons for the previous year. Additional stand-pipes, fitted with special taps, have been fixed in several of the back streets, with necessary gullies and branch drains to sewer as required, while 359 house water connections have been made. This year 3,913 yards of new mains were laid as compared with 2,754 yards for the previous year.

The Council have 65 private meters fixed for trade and business purposes.

Speaking of the water supply generally. I can only repeat what I have already recommended in a Special Report submitted to the Council in July last.

It is anticipated the proposed new agreement, with the Ashington Coal Coy., now under consideration, will effect a considerable improvement in the supply, which should provide for an increased head or pressure and larger storage, while in the distribution larger mains will be necessary.

The laying of the private service pipes by the various plumbing contractors is far from satisfactory, the fittings in many instances being of poor quality, while many of the pipes have been laid at an insufficent depth below ground level. New Rules and Regulations are being prepared which will do much to remove existing difficulties and ensure a better class of work.

FIRE BRIGADE.

There are 15 Fire Hydrants in the district and 16 Minimax Fire Extinguishers. The formation of an efficient Fire Brigade is at present receiving consideration.

DAIRIES, COWSHEDS AND MILKSHOPS.

All Dairies, Cowsheds and Milkshops have been periodically inspected.

The standard of cleanliness in the dairies and milkshops is satisfactory. All vessels used for receiving, retaining, and distributing the milk are thoroughly cleansed and sterilized. I might here add that during the recent outbreak of Enteric Fever, all Dairies, Cowsheds, and Milkshops were also inspected by the County M.O.H. Dr. Hembrough, and in every instance the milk supply was found to be very satisfactory, including that imported from other districts. There are 8 Dairy Farms in the district, and 23 Milkshops or Milksellers, 8 Cowsheds, and 92 Cows.

FACTORIES AND WORKSHOPS.

There are 32 Workshops in the district and 9 Factories.

The lighting, ventilation, and sanitary arrangements are fairly satisfactory.

There are no underground Bakeries.

Two notices of complaint have been received from the Factory Inspector and have received attention.

SEWERAGE.

New sewerage works carried out under my supervision during the year are as follows:

Hirst Sewer.—Extended 45 feet further into river, with 18" C.I. Pipes set in

concrete

Black Close Dene Sewer.—566 yards of old 12" sewer taken up and substituted with a new 15" diameter pipe laid at proper gradient and jointed in Portland cement, with four new manholes complete. Also 167 yards of old 12" pipes taken up and relaid at proper gradient, all defective pipes substituted with sound ones. One new inspection chamber added and existing one improved.

Back Station Road Sewer.—205 yards of 6" pipes taken up and new 6" sewer laid with proper falls and three manholes, all branch drains reconnected as required.

Back Woodbine Terrace Sewer.—100 yards of 6" pipes taken up and relaid new, with proper fall and all branch drains reconnected. In addition to the above many minor improvements to various sewers have also been carried out, including the provision of tall vent shafts, and close covers to manholes.

The Ford at Haydon Letch, near Robson's farm, has been bridged over by a suitable

culvert and the stream fenced off from the cattle as required.

A new drainage system has been installed at the Mortimer and Grand Street Social Clubs, respectively, while in several other Clubs, minor improvements to drains have been affected.

Plans and Specifications are being prepared for the provision of additional new sewers in Garden City, Back Station Road and North Seaton Road.

Ash Pit Refuse and Waste Products Disposal.—The removal of ash-pit refuse is carried out by Contractors in covered waggons and carts and deposited on agricultural land. The work during the month of April up to the month of September inclusive, is carried out between the hours of 11 p.m. and 10 a m. the following day. All ash-pits, except by special arrangement are empted fortnightly. The work generally is being executed according to contract. On the expiration of the existing contracts steps should be taken to have the emptying and cleansing carried out at shorter periods and on more sanitary lines. The improving of the existing ash-pits should receive careful consideration and where advisable and practicable the water carriage system, should be adopted for the disposal of excreta and urine.

The number of Ash-pits, Ash-bins, Privies and W.C's may be summarised as follows:

No. c	of covered Ash-pits	 1693
,,	uncovered ,,	 51
,,	Ash-bins	 4
,,	Privies with fixed receptable (midden vault)	 1744
,,	,, ,, movable ,, (Pail or Tub)	 2
,,	Water Closets	 122
,,	conversions from Privies to Water Closets	 17
,,	Houses with separate Privy accommodation	 4068
,,	,, without ,, ,, .,	 536

DISINFECTING.

All Ash-pits during the month of May and up to October, have been regularly disinfected immediately after emptying, with an antiseptic (15% Carbolic) powder, as a deodoriser, and afterwards lime-sprayed. Special attention has been given to the cleansing and disinfecting of ash-pits and drains of all infected houses. All rooms which were occupied by infected persons have been thoroughly fumigated with a powerful preparation of Sulphur Di-oxide gas and every precaution taken against infection by contact.

No. of Houses disinfected ... 109

SLAUGHTER HOUSES AND MEAT INSPECTION.

There are 13 Slaughter Houses in the district all of which are registered. In most cases there is room for much improvement to the premises generally. The adoption of Model Bye-laws for Slaughter Houses is very desirable. I am at present endeavouring to secure an inspection of all meat, etc., and where considered necessary will arrange with the butchers who slaughter at night to retain all internal organs until the following day for inspection. Supplies of lungs, liver, tripe, etc., from outside districts are being carefully watched, while attention is also being given to Sausage Machines and Meat Pickles.

The close proximity of many of the slaughter houses to the dwellings, and the many difficulties in securing thorough and efficient inspection of all slaughtering justify the

erection of a Public Abattoir.

ALLOTMENTS AND SMALL HOLDINGS.

The results obtained during the year by the various holders have been fairly satisfactory. The appearance of the allotments as a whole, might be much improved by the adoption of Rules and Regulations by the Association requiring all sheds, etc., to be properly erected, while the various types of wood and wire fencing might be substituted by a hedge of privet or uniform creosated wood-fencing.

PLEASURE GROUNDS.

Ashington Park.—The Band Stand has now been fitted with revolving shutters and seats. The handsome donation of £25 has been given by His Grace the Duke of Portland, towards the cost of this work, and as a coronation gift.

Hirst Park.—A complete design has now been prepared, for the laying out of this park, including the provision of Bowling Greens, Miniature Lake, Band Stand, Shelter, Greenhouse, Lavatories, etc. Already some 3,000 trees and shrubs have been planted while good progress is being made with the various other works.

All Plans, Specifications and Bills of Quantities for the whole of the work are being

prepared in the Surveyor's Department.

HOUSING AND TOWN PLANNING ACT, 1909.

House Inspection —Under the provisions of the above Act, the requisite forms have been obtained. The inspection of certain properties is now in progress.

Town Planning.—An effort has been made to secure an improved system of laying out certain land available for building sites, on His Grace the Duke of Portland's Estate and that of the Milburn on North Seaton Estate.

The matter is still under consideration.

GENERAL.

The establishing of a proper system of office routine has entailed much work, while the existing office accommodation is totally inadequate for present day requirements.

The new Council Chambers will be a great acquisition.

The outbreak of Enteric Fever in September last also added to the many other matters requiring urgent and diligent attention. I should here mention the excellent services of your Hospital Matron, Mrs. Robinson, who spared no effort, that the patients should receive every attention and comfort.

In conclusion let me thank you for the confidence you have placed in me, trusting that

confidence will be merited in a constant and faithful discharge of my duty.

I am, Gentlemen,

Your Obedient Servant,

GEORGE BEATY.

MEDICAL REPORT FOR 1911.

Mr. CHAIRMAN AND COUNCILLORS,

I beg to submit my Report for 1911.

Last year I estimated the population of our district 8,000 in Ashington and 16,000 in Hirst, and worked out my tables on a total population of 24,000.

The Census returns are now available for the past year and on those I shall base my

statistics for the year in review, namely :-

8,155 in Ashington and 16,428 in Hirst

24,583 TOTAL.

DISTRICT.

Our Urban District at the institution of the present Council covered an administrative area of 2,786·280 acres. By increments of extension, firstly, of 97·494 acres and, secondly, of 165·000 acres the total area is now 3,048·704 acres:—Ashington Ward containing 2,384·771 acres and Hirst Ward 663·933 acres.

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.

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.

BIRTH RATE.

The total number of births registered during the year in our district is 926, a considerable increase over that of last year which was 794, an actual increase of 132, which is also

considerably over the average of the past. There were 478 males and 448 females.

The distribution in the two wards is as follows:—Ashington 210, Hirst 716, an increase in both wards respectively of 11 and 121. Last year I had to point out a decrease in the birth rate of Hirst for the year, which was unusual, but this year the marked and sudden increase may in a great extent be due to the rapid growth of this ward, a considerable number of buildings being erected to meet the immigration due to the opening out of the new pit at Ellington by the Ashington Coal Co.

The rate per thousand population is 37.74, that of last year being 33.08. In the wards the rates are 24.2 and 43.39 in Ashington and Hirst respectively, the rate in Hirst being

considerably above the national average.

Average	County Rate for 10 years	 	29.91
,,	Urban (Northumberland)	 	28 96
,,	Rural "	 	23.16
,,	England and Wales	 	25.10
,,	Ashington U.D.C.	 	39.8
,,,	,, 1911	 	37.74

The following tables show the respective distribution of births in each ward, in which is included the illegitimate births for the year, 23 in all, an increase of four on that of the preceding year, 10 being in Ashington and 13 in Hirst, giving a rate of 24.8 per thousand births.

There were 4 transferred births during the year making the total 930.

ASHINGTON URBAN DISTRICT COUNCIL. BIRTHS 1911.

Months.	Males.	Females.	Total.
January	 43	29	72
February	 34	34	68
March	 39	38	77
April	 41	35	76
May	 44	41	85
June	 40	36	76
July	 42	40	82
August	 42	35	77
September	 38	45	83
October	 37	39	76
November	 42	36	78
December	 36	40	76
Total	 478	448	926

Transferred ... 4

Total 930

ASHINGTON URBAN DISTRICT COUNCIL. DISTRIBUTION OF BIRTHS 1911.

						ILLEGIT	IMATES.		
Months		Ashington	Hirst.	Total.	Ashir	ngton.	Hi	rst.	Total.
					Male.	Fem.	Male.	Fem.	
January		23	49	72	0	0	0	0	0
February		18	50	68	3	1	1	0	5
March		17	60	77	1	1	1	0	3
April		21	55	76	0	0	1	1	2
May		20	65	85	0	2	0	2	4
June		9	67	76	0	0	0	2	2
July		17	65	82	2	0	0	1	3
August		18	59	77	0	0	0	0	0
September		23	60	83	0	0	2	0	2
October		20	56	- 76	0	0	1	1	2
November		15	63	78	0	0	0	0	0
December		9	67	76	0	0	0	0	0
Total		210	716	926	6	4	6	7	23

DEATH RATE.

The Mortality for the year from all causes is 441--244 males and 197 females, an increase of 108 over that of last year. This is a very considerable increase on that of last year, the causes of which I shall examine in my analysis of the returns.

The numerical increase in Mortality is only in a slight degree influenced by the increased population and also slightly relative to the increased birth rate, but Epidemic factors are the greatest contributing agency.

The gross rate per thousand population is 18.0 which is extremely high but which must be corrected by the deduction of accidents, suicides, premature births, non-viable children, and transferable deaths, so that the net rate in our district is reduced to 14.8 which still considerably exceeds that of the past few years, and which has only been exceeded by the rate of 1901—23.28.

A decennial mortality is given in Appendix showing the average rates for the period.

The distribution of Age Mortality is as follows :-

Under 1 year. 197 deaths; 40 in Ashington and 157 in Hirst.

From 1-5 ,, 65 ; 13 ,, ,, 5-15 ,, 15 11 ; 4 ,, 22 ,, ,, 15-25 ,, 25 ; 14 11 ,, ,, 25-65 ,, 95 ; 39 56 ,, 65 & upwards 44 ; 19

The following tables show the distribution each month.

ASHINGTON URBAN DISTRICT COUNCIL. AGE MORTALITY 1911.

Months.	Males.	Fem'ls	All Ages.	1033 1 D 4 7 T 1 1 1 1 1 1 1		5 to 15 years.			65 yrs and Upds
January	26	18	44	16	6	4	3	9	6
February		13	21	7	1	0	0	8	5
March	10	22	35	11	6	1	2	10	5
April	18	13	31	6	5	1	1	11	7
May	24	14	38	12	5	3	3	11	4
June	11	13	24	5	3	4	2	8	2
July	13	6	19	8	2	1	2	3 5	3
August	39	22	61	42	9	0	1	5	4
September	35	36	71	38	22	0	2	7	2
October	12	17	29	15	2	0	4	6	2
November.	21	6	27	16	2	0	1	8	0
Deeember.	24	17	41	21	2	1	4	9	4
Total	244	197	441	197	65	15	25	95	44

DISTRIBUTION OF AGE MORTALITY. ASHINGTON 1911.

	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	0	2	4	4
February		0	0	0	0	3	1
March	8	3	1	0	0	2	2
April	13	1	1	1	1	4	5
May	9	1	1	1	1	3	2
June	9	1	1	2	1	4	0
July	4	0	- 0	0	1	2	1
August		9	2	0	1	2	1
September		9	3	0	2	4	0
October		6	1	0	3	2	1
November		5	1	0	0	5	0
December	12	3	1	0	2	4	2
Total	129	40	13	4	14	39	19

DISTRIBUTION OF AGE MORTALITY. HIRST 1911.

Months	All Ages.	Under 1 year.	1 to 5 years.	5 to 15 years.	15 to 25 years.	25 to 7fi years.	65 years and Upwards
January	. 31	14	5	4	1	5	2
February	. 17	7	1	0	0	5	4
March	. 27	8	5	1	2	8	4 3 2
April	. 18	5	4	0	- 0	7	2
May	. 29	11	4	2	2	8	$\frac{2}{2}$
June	. 15	4	. 2	2	1	4	2
July	. 15	8	2	1	1	1	2
August	. 46	33	7	0	0	3	3
September	. 53	29	19	0	0	3	2
October	. 16	9	1	0	1	4	1
November	. 16	11	1	0	1	3	0
December	. 29	18	1	1	2	5	2
Total	312	157	52	11	11	56	25

The rate of Infantile Mortality over the district per thousand population is 80 as against 5:4 last year.

In the wards the rates are also increased, Ashington being 5.0 and Hirst 9.5, last year

these rates being 3.6 and 6.3 respectively.

Basing the Infantile Mortality not on the population—but per thousand children born, the rate over the district is considerably high namely 212.7 against 163.7 last year, and 132.9 in 1909. In Ashington the rate is 190.5 and in Hirst 219.2, those rates last year being 145.7 and 169.7.

I have already mentioned the number of non-viable children as represented in Infant Mortality table, and excluding these to the number of 30, the net death rate in promising lives is still 180.3.

ASHINGTON URBAN DISTRICT. CAUSES OF DEATH. 1911.

		D	eaths in		longing o-joined		Distric	et		Total Deaths in Public
Causes of Death.	All Ages.	Under 1 yr. 3	1 and und 2 4	2 and und 5 5	5 and und 15 6				65 and upds. 10	Institutions in the District. 11
Enteric Fever	12	0	0	0	0	5	6	1	0	12
Small Pox	0	0	0	0	0	0	0	0	0	0
Measles	5	1	2	1	1	0	0	0	0	0
Scarlet Fever	0	6	0	0	0	0	0	0	0	0
Whooping Cough	13	0	6	1	1	0	0	0	0	0
Diphteria and Croup	2	0	ő	0	0	0	1	0	0	0
Influenza	1	1	0	ő	0	ő	0.	0	0	0
Erysipelas	0	0	0	0	0	ő	0.	0	0	ő
Cerebro-Spinal Fever Other Septic Diseases	2	1	0	o	o	1	0	0	ő	0
Convulsions	14	13	1	ő	ŏ	ō	o o	o	ŏ	Ö
Heart Disease	32	5	i	ő	1	5	5	7	8	0
Phthisis (Pulmonary	02		-		-					
Tuberculosis)	19	0	0	0	1	5	11	2	0	0
Tuberculous Meningitis	16	8	4	3	1	0	0	0	0	0
Other Tuber. Diseases	5	0	0	1	2	0	1	1	0	0
Rheumatic Fever	1	0	0	0	1	0	0	0	0	0
Cancer, malignant disease	15	0	0	0	0	0	5	7	3	0
Bronchitis	23	12	2	2	0	1	1	4	1	0
Broncho-Pneumonia	29	15	3	7	0	0	4	0	0	0
Pneumonia (all other	1			1	99 0	9 1	-43		9	
forms)	15	4	0	3	0	1	1	4	2	0
Other Diseases of							-			
Respiratory Organs	2	2	0	0	0	0	0	0	0	0
Diarrhœa and Enteritis	84	64	17	3	0	0	0	0	0	0
Appendicitis & Typhlitis	0	0	0	0	0	0	0	0	0	0
Alcoholism	0	0	0	0	0	0	0	0	0	0
Cirrhosis of Liver	0	0	0	0	0	0	0	0	. 0	U
Nephritis and Bright's	0	0	0	0	0	1	4	0	3	0
Disease	8	0	0	0	0	0	0	0	ő	0
Puerperal Fever Other accidents and Di-	U	,0	U	0			·			
seases of Pregnancy										
and Parturition	5	0	0	0	0	0	5	0	0	0
Congenital Debility and	0	U	0							
Malformation, includ-		-								
ing Premature Birth	63	61	1	0	0	1	0	0	0	0
Violent Deaths, exclud-	22000			-				100		
Suicide	12	0	3	1	2	0	6	0	0	0
Suicides	5	0	0	0	0	3	1	0	1	0
Senility	17	0	0	0	0	0	0	0	17	0
Apoplexy	14	. 0	0	0	0	0	2	7	5	0
Other Defined Diseases	1	1923	2							0
Meningitis, etc	10	3	0	0	2	0	3	1	1	0
Diseases ill-defined or					0	0	0	9	0	0
unknown	16	1	1	1	2	2	3	3	3	0
Total	441	197	41	24	14	25	59	37	44	12

An analysis of the foregoing causes of death shows the following from Infectious diseases:—

Diphtheria ... 2 Enteric ... 12 Erysipelas ... 1

15, giving a rate per thousand

population of 0.6.

Infectious diseases not notifiable show :-

Whooping Co	ugh		13
Measles			5
Influenza			1
Diarrhœa (all	forms)		89
Phthisis			17
All Other Tube	rcularI	Diseas	es21

146

The rate per thousand population of these diseases is :-

manu population	OI THUSE G	1300000 13	
Notifiable Infec	tious Dise	eases	 0.6
Non-Notifiable	Infectous	Diseases	
Measles			 0.2
Whooping	Cough		 0.53
Diarrhœa			 3.2
Phthisis			 0.69
Tubercular	Meningit	is	 0.65
Other Tub	ercular Di	seases	 0.2
Respiratory Dis	seases		
Bronchitis			 0.9
Broncho P	neumonia	(29)	 1.18
Pneumonia	a (15)		 0.6

The total number of deaths from Respiratory Diseases (excluding Phthisis) is 69, less by 2 than in 1910, which is still high in consequence of the inclement weather prevailing at the last quarter of the year in which most of the deaths occurred.

The deaths from Whooping Cough are less than last year 13 as against 17, but the mortality is still high and in an epidemic form the disease has persisted especially in the Ashington ward since last year.

The outbreak of Measles which I mentioned as commencing in my last year's report, is responsible for 5 deaths, but the disease has now abated.

There are 2 deaths from Diphtheria out of 16 cases notified.

Out of 78 cases of Enteric Fever there were only 12 deaths, the rate per thousand population being 0.48 or 15% of cases attacked. (See Special Report on Enteric Fever.)

Phthisis is responsible for 19 deaths, as against 21 last year and 20 in 1909; Tubercular Meningitis for 16 deaths and other forms of Tubercular diseases 5 deaths.

Anticipating the notification of Phthisis, the Council had agreed to provide means in the existing Hospitals with additional shelters for the reception of consumptive patients, even if only for educational and protective purposes, and to institute suitable means for the prevention of infection in the homes of patients.

This programme could not be carried out in full owing to the Epidemic of Enteric which taxed all our available space.

The compulsory Notification has been instituted by the Local Government Board from the 1st January, 1912, and the suggestion of last year will be improved and extended. Instructions have been issued to families regarding the care of such patients, and advice of the prevention of infection from the patient to other members.

The Infectivity of the disease is being gradually realised, especially the danger of the discharged sputum in its dried form being conveyed in the air and dust and finding fresh

loci for its spread.

The fresh air treatment is also being insisted on—open door and windows, better ventilation, removal of cumbersome furniture and curtains and the use of spitting receptacles

taught.

The means for combating this plague have been inadequate in the past. Sanatorium treatment has been impossible for the limited means of a working class population, and cases have as a rule been too far wasted with the disease to be admitted with any probability of a cure. The compulsory Notification will remedy this, in so much that your Medical Officer will have his attention drawn to them when diagnosed and the machinery of prevention and if possible, cure instituted at an early date.

Results so far obtained confirm a favourable prognosis in early cases, and I am certain that, at least, by the care with which Councils are empowered to adopt, a longer period of work and usefulness will be a consequence, and the heads of families will be able to secure, without prejudice to their employment, sufficient physical improvement to enable them to continue their work for a longer period, with also the prospects of a possible cure.

I wish to draw attention to the table of the Infantile Mortality as given below.

INFANTILE MORTALITY DURING THE YEAR 1911.

Causes of Death.	Under 1 Wk.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Totat und. 1 month	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months,	Total Deaths uuder 1 year.
Small-Pox	0	0	0	0	0	0	0	0	0	0
Chicken-Pox	0	0	0	0	- 0	0	0	0	0	0.
Measles	0	0	0	0	0	0	0	1	0	1
Scarlet fever	0	0	0	0	0	0	0	0	0	0
Diphtheria and Croup	0	0	0	0	0	0	0	0	0	0
Whooping-Cough	0	0	0	0	0	0	1	3	2	6
(Diarrhœa	0	0	0	0	0	4	8	6	4	22
Enteritis	0	0	0	0	0	4	11	18	9	42
(Tuberculous Meningitis	0	0	0	0	0	0	5	2	1	8
Abdominal Tuberculous	0	0	0	0	0	0	0	0	0	0
Other Tuberculous Diseases.	0	0	0	0	0	0	0	0	0	0
Congenital Malformations	2	0	1	0	3	0	0	0	0	3
Premature birth	16	1	2	1	20	3	0	0	0	23
Atrophy, Debility and	360				19.3	100	200			200
(Marasmus	17	2	2	1	22	9	3	1	0	35
Atelectasis	1	0	0	0	1	0	0	0	0	1
Injury at birth	2	0	0	0	2	1	0	0	0	3
Erysipelas	0	0	0	0	0	1	0	0	0	1
Syphilis	0	0	0	0	0	0	0	0	0	0
Rickets	0	0	0	0	0	0	0	0	0	0
Meningitis (Not Tuberculous)	0	0	0	0	0	1	1	0	1	3
Convulsions	0	1	2	0	3	6	1	2	1	13
Gastritis	0	0	0	0	0	0	0	0	0	0
Laryngitis	0	0	0	0	0	1	0	0	0	1
Bronchitis	0	0	0	0	0	4	2	5	1	12
Pneumonia (all forms)	0	0	0	0	0	3	5	5	6	19
Suffocation, overlying	0	0	0	0	0	0	0	0	0	0
Other Causes	0	0	0	0	0	3	0	1	0	4
Total	38	4	7	2	51	40	37	44	25	No

Nett Births in year | legitimate .. 903 | 926 Nett Deaths in the year of | legitimate infants 197 | legitimate infants unknown

You will notice that the deaths in the first month of life show an increase over that of last year, namely, 51 as against 46. The increase in mortality from debility, marasmus or injury at birth is also notable, no fewer than 38 deaths occurring in the first week of life and practically in the first 24 hours.

Summer Diarrhea and Enteritis are responsible for 64 deaths under 1 year as against 28 last year. This is the highest Infantile death rate recorded since 1904 proportionate to the population. Ten years ago by a strange coincidence Epidemic Diarrhea and Enteric Fever both assumed proportions corresponding to that of this year, the Diarrhea death rate in 1901 being proportionally one third greater than in 1911.

In all the three periods mentioned the climatic conditions have been similar, extreme heat. In all three periods also, the incidence of Diarrhæa has corresponded to a greater prolification of the house fly.

There is no doubt that heat in itself is a causative factor in the diarrhæa in children as is evidenced by the marked improvement in cases on a fall of temperature, but such simple diarrhæa as this results in, is greatly aggravated by infection from contaminated food stuffs. It is undoubtedly true that flies do cause this infection of food, and the proximity of the privy ash-pits to the houses in our district cannot be without a certain amount of danger in hot seasons.

It is to be noted however that since 1901 and 1904 a considerable improvement has taken place in the disinfecting and scavenging of these ash-pits, and much good would follow the replacing of the wood work in the privies with tiles or cement as adopted in the newer buildings in the district.

This year the Diarrheal Mortality is certainly heavy compared to the favourable returns of the last few years which we naturally expected to continue in a diminishing mortality ratio. I am not however depressed that an occasional year (the years I have mentioned) should damp our hopes after such results. Even with unfavourable climatic conditions much improvement has been effected, and we must hopefully bear in mind that these conditions are in a greater degree being counteracted by greater carefulness in the Hygienic treatment of the child—the outcome to a great extent of the educational propaganda persisted in by the Council through the Press and Health Visitors. I have good reason for thus writing, as observations clearly point to the fact of the awakening of the community to the responsibility of parenthood both for the child's sake and because of the recognition of this asset in the social welfare of the future.

The excessive number of non-viable children in our community, a community of parents much above the average in health calls for explanation, should it be found, in so much as prenatal conditions are to a great extent responsible.

It may be argued that a greater death rate under 1 year means a corresponding decreased rate in the periods of adolescence and early manhood and womanhood by the elimination of the unfit—those least able to maintain themselves in the struggle for existence in the environment mentioned above.

This certainly is a probability, but it does not negative the possibility that, healthier surroundings, better education in such matters, and the better care of the mother by herself during pregnancy would not to a great extent modify the excess of such child loss.

The onus of such Education devolves on parent in the first place, helped also by responsible public bodies to provide facilities for such instruction

A good instrument is at hand to local and County Authorities in day and evening classes. Domestic Hygiene and Cookery formed part of the curriculum of these evening classes till this last year, and it is a great pity that such facilities should not have been extended instead of being dropped altogether, the possibilities of improvement in this direction being enormous in a community like ours.

I append a table showing the proportion of biths and deaths in each Ward explaining their ratio, from the relative population of each to that of the combined population, which explains the difference in ratio in the Birth Rate of Hirst which is inhabited by the younger portion of our community to that of Ashington inhabited by the older.

Births in Ashington should be	302 210	Births in Hirst should be ,, , are	628 716	
Deaths in Ashington should be	140	less Deaths in Hirst should be ,, ,, are	289	
Infant Mortality in Ashington should be per 1,000 children born Infant Mortality in Ashington is	44	less Infant Mortality in Hirst shou per 1,000 children bor Infant Mortality in Hirst is	ld be n 154	
	4	less		3 more

The Health Visitor reports having received Notification of 953 births during the year.

The total of her visits to these cases in the year, that is in the way of observation as well as advice is over four thousand. This represents an enormous amount of work which in educational value I expect our community will reap the benefit of, and our Council be able to congratulate themselves on the results of this class of labour.

In this educative propaganda I include the voluntary efforts of many workers in our district since the inception of this work, and I expect that as a result of our success we

shall be adding other workers to the ranks of our volunteers.

The Health Visitor's work does not consist in Infant care only; she has reported and continues to report to your Sanitary Inspector any defects either in housing, drainage or uncleanliness that she may come across in her work, and this continuous observation counts for a great deal in the removal of nuisances and in remedial measures being adopted to insure the results.

I mentioned in last year's report the proportion of Breast and Hand-fed children amongst those visited, and I am still able to assure you that the same healthy condition of our mothers exist in respect to their natural ability to rear children.

The proportion is as follows among those visited:

Breast fed 95% Hand fed 2% Part Breast and Hand fed ... 3%

You will see by these figures that we have no reason to fear any lack of virility in our children from maternal deterioration, the only danger being that of neglecting the natural

opportunities, which education alone will remedy.

I have to thank your Health Visitor for making use of her opportunity in observation in bringing to light the minor sanitary defects, and also for the encouragement, she gives to mothers in an unofficial way of competitive pride in hygienic clothing, the reports of which I have pointed out so often as being essential in infant nurture.

INFECTIOUS DISEASES.

The number of Infectious diseases notified during the year is slightly in excess of that of last year namely, 144 as against 107 last year giving the rate per thousand of 5.8 for district as against 4.04, and the rate in the Wards is 7.5 in Ashington and 5.0 in Hirst. As I mentioned last year the infectious diseases rate is again greater in Ashington than in Hirst. There were 61 in Ashington and 83 in Hirst.

The number of cases of Diphtheria is practically the same as for last year. Scarlet Fever is only one-half of that of last year, the bulk of the cases of the general increase being made up of Enteric due to the epidemic outbreak this summer.

Confirmation of diagnosis by Bacteriological Examination is practised throughout, and

in the case of Diphtheria, Antitoxic Serum is supplied by the Council.

The following tables show the areas of distribution in the different months and ages of those attacked:—

Cases of Infectious Diseases Notified during 12 Months Ending 31st December, 1911. Ashington Urban District.

Notifiable Diseases.		Cases Notifiable in Whole District. At Ages—Years.								Total Cases in each Locality.		ses ved to pital.
Troumant Discussion		At all Ages.	Uud. 1 year.	1 to 5	5 to 15	15to 25	25to 65	65 and upds.	Ash- ington	Hirst	Ash- ington	Hirst.
Diphtheria Scarlet Fever Erysipelas Enteric Fever		16 32 11 78	0 1 2 0	4 8 0 3	10 21 0 13	1 2 0 35	1 0 9 27	0 0 0 0	5 11 3 40	11 21 8 38	0 0 0 39	0 0 0 37
Continued Fever Puerperal Fever Total	::	7 0	0 0 3	0 0	2 0 46	39	4 0 41	0 0	$\begin{bmatrix} 2\\0\\ 61 \end{bmatrix}$	5 0 83	39	37

DISTRIBUTION OF INFECTIOUS DISEASES. 1911.

hs.	Dipht	heria.	Scarlet	Fever	Erysi	pelas.	Ente	eric.	Cont.	Fever.	Puer.	Fever.		Tota	1.
Months.	Ash- ington	Hirst	Ash- ington	Hirst	Ash- ington	Hirst	Ash- ington	Hirst	Ash- ington	Hirst	Ash- ing t on	Hirst	Ash.	H'st	both
Jan.	0	2	2	3	1	0 2	0	0	0	0	0	0	3	5	8
Feb.	0	0	2	1	1	1	0	0	0	0	0	0	3	2	5
Mar.	0	0	1	4	0	2	0	0	0	0	0	0	1	6	7
Apr.	0	0	1	1	0	0	0	2	0	0	0	0	1	3	4
May	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1
June	0	1	1	3	0	3	0	0	0.	0	0	0	1	7	8
July	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Aug.	0	0	0	0	0	0	1	1	0	0	0	0	1	1	2
Sept.	0	1	1	1	1	0	19	19	0	2	0	0	21	23	44
Oct.	1	1	0	2	0	0	18	10	0	3	0	0	19	16	35
Nov.	1	2	3	0.	0	2 0	2	4	2	0	0	0	8	8	16
Dec.	3	4	0	5	0	0	0	2	0	0	0	0	3	11	14
Total	5	11	11	21	3	8	40	38	2	5	0	0	61	83	144

HEALTH OF DISTRICT.

I have commented on the various Epidemics in the body of my Report. I am pleased to state that at the end of the year there has been a considerable abatement of Epidemic Disease especially as regards Enteric. As already mentioned Infantile Diarrhœa has been responsible for our heavy Death Rate this year, and I trust that the steps taken by the Council through the Health Visitors will meet with the success which the work deserves.

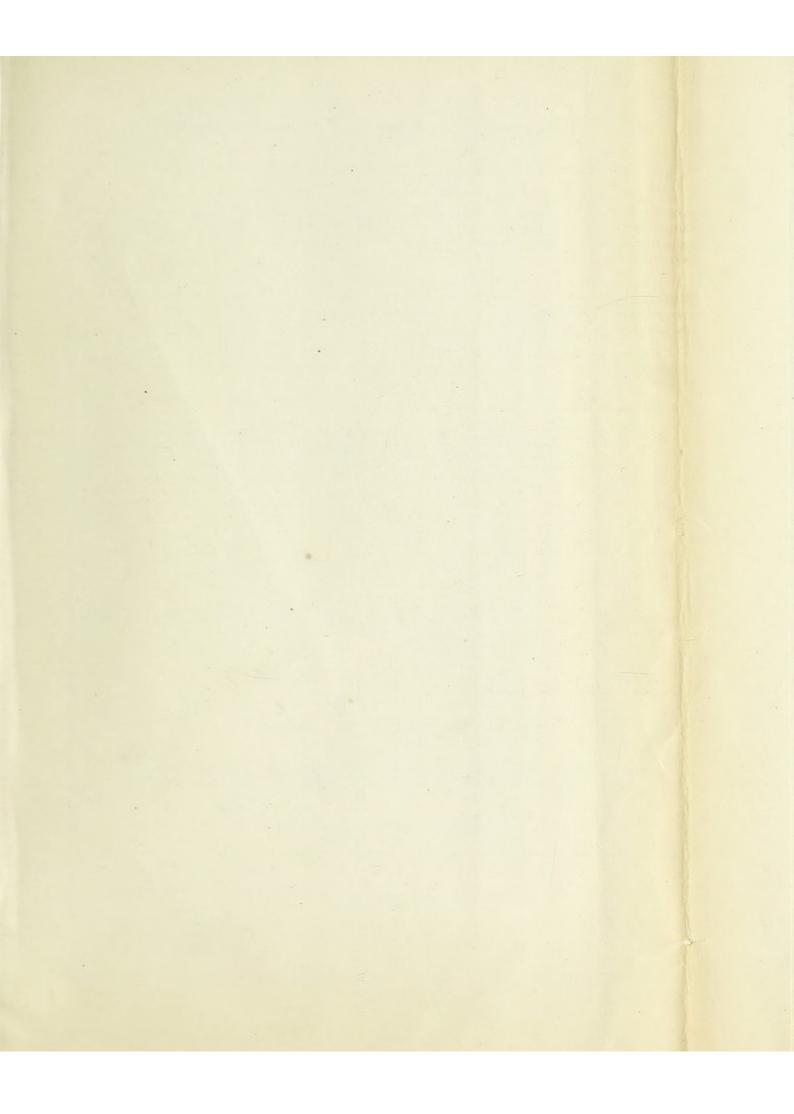
I have to thank your Officials for their able assistance in conducting the Public Health Work during the year, to congratulate Mr. Beaty on the energetic manner in which he has overcome the difficulties of his position and also for his initiative and conceptive work during his first year of office.

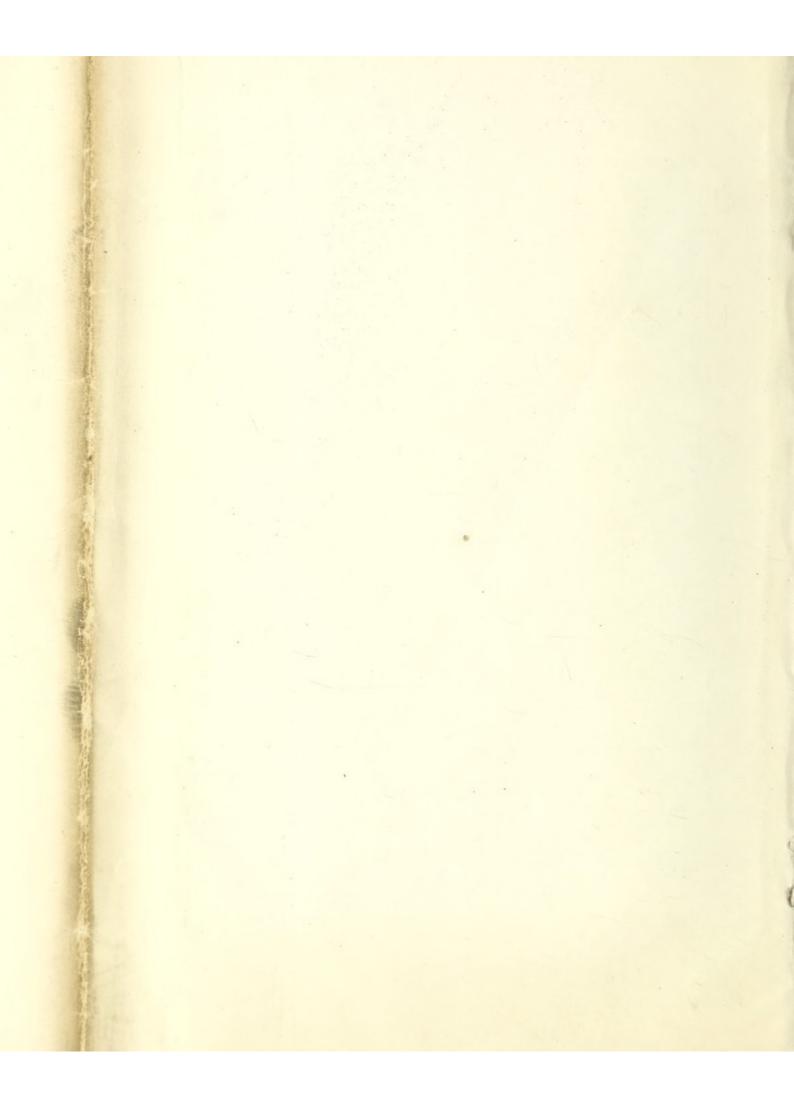
Thanking you again for your continued consideration and courtesy during the year,

I remain Gentlemen,

Your Obedient Servant,

R. J. MILLS.





ASHINGTON

URBAN DISTRICT COUNCIL.

SUPPLEMENTARY REPORT

OF

ENTERIC FEVER

FOR 1911,

BY

R. J. MILLS, M.B.,

MEDICAL OFFICER OF HEALTH

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MEDICAL OFFICER'S SUPPLEMENTARY REPORT FOR 1911.

ENTERIC FEVER.

On the 22nd August a case of Enteric Fever was notified in the Ninth Row, the first case notified since April. The season being exceptionally hot, a great deal of care was exercised to prevent its spread. Almost concurrently one or two cases were notified from Hirst, in the area between Chestnut and Poplar Streets.

The disease, however, spread in the Ninth Row, and no fewer than 6 houses were infected, and 11 patients removed during the month of September.

In September 10 houses had Enteric Fever, the number of patients being 12—24 cases in all being effected by the disease during this period. From the contiguous streets, Seventh, Eighth, Tenth, and Eleventh Rows, cases cropped up in such close relation to the original source by means of avenues of footpaths, as to confine the epidemic areas to the proximity of houses.

The contiguity of the infected houses to the streets Third, Fourth, and Fifth Rows also favours the theory of direct infection from the Ninth Row houses—that in 33 cases from the Ninth Row and its contiguous avenues, and 6 from the higher part of the town in contiguity with the lower houses in the Ninth Row.

Similarly in Hirst the outbreak was practically confined to the three Northern Avenues, embracing an area as explained above at its outbreak, from Myrtle to Chestnut Streets.

The contiguous areas, however, were not exempt—namely, that new part of the community running North and South from Hawthorn Terrace to Beatrice, Juliet, etc., Streets, embracing Woodhorn Road and Castle Terrace, in which locality 8 cases were reported; also, it must be remembered in the area of the Northern Avenues. In these areas practically all the Enteric cases existed. I now append tables to show the distribution of cases during the various months up till the end of the year, with a rough outline map showing the contiguity of the areas already mentioned.

The following tables show the distribution each month since the outbreak, and I have appended in a diagramatic form a map of the contiguous areas.

AUGUST.

Localities.	Number in each Locality.	Females.	Males.	Under 5 years.	Over 5 years.	Houses.
Ninth Row, Ashington 58, Chestnut Street, Hirst	 1 1		1 1		1 1	1

SEPTEMBER.

Localities	Number in each Locality.	Females.	Males.	Under 5 years.	Over 5 years.	Houses	
					*		
Ninth Row	 	11	2	9		11	6
Fifth Row	 	1		1		1	1
Fourth Row	 	1	1			1	1
Seventh Row	 	1	1			. 1	1
Eighth Row	 	1		1		1	1
Beatrice Street	 	1		1		1	1
Clyde Street	 	2		2		2	2
Maple Street		3	1	2		3	3
Medway Street	 	1		1		1	1
Sycamore Street	 	1		1		1	1
Wansbeck Terrace	 	1		1		1	1
Deuchar Terrace	 	1	1	24	1		1
Humber Terrace	 	. 1	1			1	1
Portia Street	 	1		1		1	1
Poplar Street	 	2	1	1		2	2
Castle Terrace	 	1		1		1	1
Rosalind Street	 	2		2		2	2
Myrtle Street	 	1		1		1	1
Chestnut Street	 	1	1			1	1

OCTOBER.

Localitie	s.	Number in each Locality.	Females.	Males.	Under 5 years.	Over 5 years.	Houses.
Ninth Row Tenth Row Eleventh Row Third Row Fourth Row Long Row Church Terrace Juliet Street Poplar Street Welbeck Terrace Clyde Street Sycamore Street Myrtle Street Woodhorn Road Ariel Street		 12 2 3 2 1 1 1 1 1 1 2 1 1 1 1	1 1 	11 1 3 2 1 1 1 1 1 1 1 1 1	1 	12 2 3 2 1 1 1 1 1 1 2 1 1	10 2 3 2 1 1 1 1 1 1 1 2 1 1
Hawthorn Terrace Rosalind Street		 1	1	 1		1 1	1 1

INFECTED AREA WOODHORN.

WOODHORN ROAD NUMBER OF CASES 1.

WOODHORN ROAD

NUMBER OF CASES!

PORTIA ST

NUMBER OF CASES 2

PORTIA ST

JULIETST

ARIELST

ARIEL ST

NUMBER OF CASES !

CASTLE TERRACE

CASTLE TERRACE NUMBER OF CASES 1.

NUMBER OF CASES HAWTHORN TER NUMBER OF CASES ! ROSALINDST

BEATRICEST

NUMBER OF CASES! BEATRICE ST ROSALIND ST

ROSALINDST

NUMBER OF CASES ! HAWTHORN TER.

NUMBER OF CASES ! EAST HUMBER KATHERINE ST

KATHERINE ST

KATHERINE ST

BEATRICEST

JULIET ST

NUMBER OF CASES EAST HUMBER

NOVEMBER.

Localitie	s.		Number in each Locality.	Females.	Males.	Under 5 years.	Over 5 years.	Houses.
Tenth Row			1		1		1	1
53, East Humber			1		- 1		1	1
31, Pont Street			1	1			1	1
38, Pont Street			1	1			1	1
Hospital Contact	Case	(Nurse)	1	1			1	1

We may gather many lessons from such an outbreak as this. Firstly, that the Enteric bacillus is difficult to eradicate, as retrospective investigation often reveals the fact that prior infection has existed in other members of the same family in those infected houses since last epidemic.

The second lesson, which is of a practical nature, is the fact of Enteric Fever occuring in young children. The number of undoubted cases at an early age, as shown in above tables, confirms the impression that there are many cases unreported during a diarrhœa season, as they are so readily mistaken for the summer form of that disease.

Then, again, we have to face the fact that there are some who have the disease in such a mild form who never feel it, but who act as carriers of the disease to others, which leads me to state that a great deal of carelessness exists in the indiscriminate manner in which neighbours visit houses as voluntary nurses without taking any ordinary precautionary measures of cleansing after contact, and thereby carrying the disease to their own homes.

This led our Council to adopting the method of marking all the houses as "Infected," in order to prevent such well meaning carelessness being a danger in "carrying" the disease

The other "carrier" agency is that by flies, which were exceptionally numerous this year; and with the proximity of the ashpits to the houses, a distinct impression is given that, from the radius of the areas of distribution of the disease, this agency was responsible to a great extent for the spread of the infection.

The measures taken for the prevention of further infection were actively carried out, such as prompt removal to Hospital, disinfection of houses, observation of contacts, more frequent cleansing of ashpits, and repeated lime washing of same, as well as a thorough cleansing of all house drains.

An analysis of the water shows no reasons to suspect any infection from that source, nor did any investigation into the milk supply, either in the district or imported, reveal any clue of possible infection.

