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Contributors

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Report of Medical Officer for 1922.

GENTLEMEN,

I have pleasure in presenting to you my Annual Report on the health of the district or 1922, and in doing so to bring to your notice the circular from the Ministry of Health, No. 359, which modifies the previous instructions as to the information to be afforded and generally simplifies the Report by (1) summarizing the information required, and (2) by omitting much that can only be a descriptive repetition from year to year.

1. NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.

POPULATION.—At the census in 1911 our population was 24,583.
 " " 1922 " " 29,406.

For this year :—

The Registrar General estimates our population in the middle of the year at 30,490—this estimate will be used in all the necessary calculations for Birth and Death rates, etc.

VITAL STATISTICS.

BIRTHS—During the year the total number of Births registered in the district was 912. This is equivalent to a Birth-rate of 29·91 per 1,000 population. For 1921 the rate was 33·60 per 1,000 and the total Births 1,006 in number. Comparing the figures for this district with the Registrar General's table XV. we find the Birth-rate per 1,000 population to be :—

For England and Wales	...	20·6
„ London alone	...	20·5
„ 105 Great Towns	...	21·4 (Population over 50,000)
„ 155 Smaller „	...	20·5 („ from 20,000 to 50,000)

Our Birth-rate therefore is practically 46% over the average of the 155 smaller towns amongst which we are classified. It was 50% last year.

The illegitimate Births registered in the district are 30, to which 7 inward transfers are to be added giving 37 as the corrected total (16 males and 21 females). This gives an illegitimate Birth-rate of ·984 per 1,000 and of 42·74 per 1,000 children born.

The following table gives the monthly births, sex and distribution :—

Ashington Urban District. BIRTHS—SEX AND DISTRIBUTION, 1922.

Months	Ashington Ward.			Hirst Ward.			District.			Illegitimate.				
	Male	F'm'le	Total	Male	F'm'le	Total	Male	F'm'le	Total	Ash'gt'n		Hirst		Dist.
										M	F	M	F	
January ..	8	10	18	29	27	16	37	37	74	0	1	0	1	2
February ..	10	8	10	35	25	60	45	33	77	0	0	1	1	2
March ..	5	12	17	30	24	54	35	36	71	0	0	1	1	2
April ..	8	4	12	30	30	60	38	34	72	0	0	0	1	1
May ..	6	13	19	40	26	66	46	39	85	2	1	0	2	5
June ..	3	13	16	37	40	77	40	53	93	0	0	0	0	0
July ..	10	7	17	33	24	57	43	31	74	0	0	1	3	4
August ..	10	8	18	29	33	62	39	41	80	0	0	1	2	3
September ..	7	15	17	26	43	49	33	33	66	1	0	0	0	1
October ..	9	11	20	32	20	52	42	31	72	0	0	2	0	2
November ..	8	11	19	19	24	43	27	35	62	0	0	2	0	2
December ..	8	9	17	24	13	35	30	22	52	1	0	0	1	2
Total ..	92	116	208	362	309	681	454	425	879	4	2	8	12	26

DEATHS—The total number of deaths from all causes registered in the district for the year is 400, but there were 3 deaths of non-residents registered here (outward transfers) to be deducted, and there were 50 deaths of residents in the district registered elsewhere (inward transfers) to be added giving 447 as the corrected total number of deaths for the year. This is equal to a Death-rate of 14·66 per 1,000 population. The corrected total last year was only 380, and the Death rate was 12·70. The excess this year may be largely attributed to our high mortality from the Influenza epidemic in January in which month our Death rate was 42·03 per 1,000.

Comparing those figures with the Registrar's table XV. the annual death rates per 1,000 population are :—

For England and Wales ...	12·9
„ London alone ...	13·4
„ 105 Large Towns ...	13·0 population over 50,000
„ 155 Smaller Towns ...	11·7 „ between 20,000 to 50,000

Our Death-rate therefore exceeds that of the 155 Smaller towns among which were a classified, by 2·96 per 1,000. It was 1·40 per 1,000 last year.

Ashington Urban District. CAUSES OF AND AGES AT DEATH.
(M.O.H. Table No. 3).

Causes of Death.	Nett Deaths at the Sub-joined Ages of Residents whether occurring within or without the district.									Total Deaths in Public Institutions
	All Ages	Under 1 yr.	1 and und 2	2 and und 5	5 and und 15	15 and und 25	25 and und 45	45 and und 65	65 and upwds	
Enteric Fever	0	0	0	0	0	0	0	0	0	0
Small Pox	0	0	0	0	0	0	0	0	0	0
Measles	0	0	0	0	0	0	0	0	0	0
Scarlet Fever	0	0	0	0	0	0	0	0	0	0
Whooping Cough	3	1	1	1	0	0	0	0	0	0
Diphtheria and Croup	2	0	0	1	1	0	0	0	0	0
Influenza	71	12	9	6	1	5	16	12	10	5
Erysipelas	0	0	0	0	0	0	0	0	0	0
Pulmonary Tuberculosis	29	0	0	1	2	6	16	4	0	7
Tuberculous Meningitis	3	0	1	1	1	0	0	0	0	1
Other Tuberculo's diseases	5	0	0	2	0	0	2	1	0	1
Cancer, malignant disease	23	0	0	0	0	0	2	12	9	3
Rheumatic Fever	0	0	0	0	0	0	0	0	0	0
Meningitis	2	1	0	0	0	1	0	0	0	0
Organic heart disease	42	0	0	0	3	1	2	16	20	4
Bronchitis	38	8	3	1	0	0	2	10	14	2
Pneumonia	57	21	12	2	1	4	9	4	4	10
Other respiratory diseases	3	0	0	0	0	0	0	2	1	0
Diarrhoea etc (under 2 yrs)	12	10	2	0	0	0	0	0	0	0
Appendicitis & Typhlitis	3	0	0	0	0	0	2	0	1	3
Cirrhosis of Liver	2	0	0	0	0	0	0	1	1	0
Alcoholism	0	0	0	0	0	0	0	0	0	0
Nephritis and Bright's Disease	5	0	0	0	1	0	0	1	3	0
Puerperal Fever	0	0	0	0	0	0	0	0	0	0
Parturition	4	0	0	0	0	2	2	0	0	3
Congenital Debility	39	38	1	0	0	0	0	0	0	0
Violence, not suicide	9	1	0	0	1	0	3	2	2	4
Suicide	1	0	0	0	0	0	0	1	0	0
Other defined diseases	72	13	2	0	5	3	8	16	25	18
Causes ill-defined or unknown	2	0	1	0	0	0	0	0	1	0
Diabetes	0	0	0	0	0	0	0	0	0	0
Cerebral Hemorrhage	19	0	0	0	0	0	0	7	12	1
Arteriosclerosis	1	0	0	0	0	0	0	0	1	1
Ulcer Stomach	0	0	0	0	0	0	0	0	0	0
Total	447	105	32	15	16	22	64	89	104	63

INFANTILE MORTALITY.—The total number of deaths of children under 1 year is 105 this year compared with 121 for 1921. This gives a death rate of 3.31 per 1000 population and a mortality rate of 116.2 per 1000 children born. Last year the death rate was 4.04 and the mortality rate 121.7.

Comparing these figures again with the Registrar General's table XV. the Infantile Mortality Rates are given :—

For England and Wales	77 deaths per 1000 children born.
„ London alone	74
„ 105 Great Towns	82
„ 155 Smaller Towns	75

Our Infantile Mortality Rate is therefore over 41% in excess of that of the 155 smaller towns among which we are classified. It is noteworthy however that a large proportion of the deaths (28% of them) are due to premature birth and causes associated therewith, e.g. Atrophy, Debility, Marasmus, and Injury at Birth, and 23% are due to Pneumonia.

INFANTILE MORTALITY DURING THE YEAR 1922,

Causes of Death.	Under 1 wk.	1-2 weeks	2-3 weeks	3-4 weeks	Total und. 1 month	1-3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths under 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	0	0	0
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	1	0	1	0	2
Diarrhæa and Enteritis	0	0	0	1	1	1	1	0	2	5
Tuberculous Meningitis	0	0	0	0	0	0	0	0	5	0
Abdominal Tuberculosis	0	0	0	0	0	0	0	0	0	0
Other Tubercular Diseases	0	0	0	0	0	0	0	0	0	0
Congenital Malformation	1	0	1	0	1	0	1	0	2	2
Premature Birth, Atrophy Debility and Marasmus	26	1	0	1	28	2	1	0	0	30
Atelectasis	0	0	0	0	0	0	0	0	0	0
Injury at Birth	0	0	0	0	0	0	0	0	0	0
Erysipelas	0	0	0	0	0	0	0	0	0	0
Syphilis	0	1	1	0	2	0	1	0	0	3
Rickets	0	0	0	0	0	0	0	0	0	0
Meningitis <i>not</i> Tuberculous	0	0	0	0	0	0	0	0	1	1
Convulsions... ..	0	2	2	1	7	1	2	0	0	10
Gastritis	0	0	0	0	0	1	3	2	0	6
Laryngitis	0	0	0	0	0	0	0	0	0	0
Bronchitis	0	0	0	0	0	2	4	3	2	11
Pneumonia (all forms)	0	0	2	0	2	2	4	10	7	25
Suffocation, overlying	1	0	0	0	1	0	0	0	0	1
Other Causes	1	0	0	0	1	0	1	1	0	3
Influenza	0	0	0	0	0	0	1	1	4	6
Total	30	4	6	3	43	10	19	18	16	105

Ashington Urban District. VITAL STATISTICS OF WHOLE DISTRICT
DURING YEARS 1917-1922 INCLUSIVE. (L.G.B. Table No. 1).

Year.	Population estimated to middle of each year.	Births.			Total Deaths Registered in the District.		Transferable Deaths		Nett Deaths belonging to the District.			
		Uncorrected Number.	Nett		No.	Rate.	Of Non-residents Registered in the District	Of Residents not Registered in the District	Under 1 Year of age		At all Ages	
			No.	Rate.					No.	Rate	No.	Rate
1917	26000	754	754	25.70	339	13.00			83	112.7	360	13.7
1918	29000	754	759	27.1	425	17.00	25	38	91	119.8	438	17.5
1919	29600	810	813	27.46	397	13.07	3	43		137.6	437	15.3
1920	29565	1094	1090	37.00	411	13.90	3	44	146	133.9	411	13.9
1921	29900	993	1006	33.6	351	11.72	5	34	121	121.7	380	12.70
1922	30490	879	912	29.91	400	13.12	3	50	105	116.7	447	14.66

ZYMOTIC DEATH RATE.—This term includes deaths from the following 7 diseases only They are included among others in Table III.—

Disease.	No. of Deaths.		Rate per 1,000 population.	
Smallpox	...	0	...	0
Scarlet Fever	...	0	...	0
Enteric Fever	...	0	...	0
Enteritis (Diarrhoea) under 2 yrs	12	...	...	.393
Diphtheria	...	2	...	.065
Measles	...	0	...	0
Whooping Cough	...	3	...	.098
	17			.557

Among the other principal causes of death are the following :—

	Cases.	Death Rate.
Pulmonary Tuberculosis	29	.951
Non-Pulmonary ..	5	.164
Pneumonia—both forms]	57	1.869
Bronchitis	38	1.246
Influenza	71	2.328

REGISTRAR GENERAL'S TABLE XV.—BIRTH RATE, DEATH RATE, AND ANALYSIS
OF MORTALITY DURING THE YEAR, 1922.

(Provisional figures. Population as enumerated in 1921 have been used for the purpose of this Table. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the group of towns).

	Birth- Rate per 1000 Total Popu- lation	Annual Death Rate per 1000 Population.										Rate per 1000 Percentage of Total Deaths				
		All Causes	Enteric Fever	Small Pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under 2 years)	Total Deaths under 1 year	Deaths in Public Institutions.	Certified Cases of Death	Inquest Cases	Uncertified causes of Death
England and Wales ..	20.6	12.9	0.01	0.00	0.15	0.04	0.16	0.11	0.54	0.44	6.2	77	25.6	92.7	6.2	1.1
105 County Boroughs & Great Towns including London .	21.4	13.0	0.01	0.00	0.22	0.05	0.19	0.13	0.56	0.41	7.6	82	32.9	92.6	6.7	0.7
155 Smaller Towns (1921 Ad- justed Populations 20,000— 50,000)	20.5	11.7	0.01	0.00	0.10	0.03	0.15	0.09	0.58	0.35	5.6	75	16.9	93.6	5.1	1.3
London	21.0	13.4	0.01	0.00	0.35	0.07	0.25	0.25	0.57	0.45	7.1	74	48.7	92.1	7.8	0.1

NETT MONTHLY DEATHS IN EACH WARD.

Months.	Ashington Ward		Hirst Ward		Total
	All Ages	Under 1 year	All Ages	Under 1 year	All Ages
January ..	38	7	68	18	106
February ..	19	3	30	8	58
March ..	13	4	24	9	37
April ..	9	1	15	7	35
May ..	6	2	24	10	30
June ..	9	0	17	5	26
July ..	7	0	11	2	18
August ..	9	0	9	3	18
September ..	10	1	9	2	19
October ..	9	2	10	0	19
November ..	10	1	13	6	23
December ..	8	3	13	4	21
Total ..	147	24	253	73	400

The Registrar General supplies the following Table :—

CAUSES OF DEATH, 1922.

Causes of Death.			M	F	Causes of Death.			M	F
All Causes	...	...	134	213	23	Appendicitis and typhlitis	...	3	1
1 Enteric Fever	...	...	0	0	24	Cirrhosis of Liver	...	0	1
2 Small-pox	...	...	0	0	25	Acute and Chronic Nephritis	...	2	2
3 Measles	...	...	0	0	26	Puerperal Sepsis	...	0	1
4 Scarlet Fever	...	...	0	0	27	Other accidents and diseases of pregnancy and parturition	...	0	3
5 Whooping Cough	...	...	1	7	28	Congenital debility and malformation, premature birth	...	13	14
6 Diphtheria	...	...	2	0	29	Suicide	...	1	0
7 Influenza	...	...	46	28	30	Other Deaths from Violence	...	8	1
8 Encephalitis lethargica	...	...	0	0	31	Other Defined Diseases	...	40	43
9 Meningococcal meningitis	...	...	0	0	32	Causes Ill-defined or unknown	...	3	1
10 Tuberculosis of respiratory system	...	...	12	15	Special Causes (included above)				
11 Other tuberculous diseases	...	...	4	6		Poliomyelitis	...	0	0
12 Cancer, malignant disease	...	...	12	12		Polioencephalitis	...	0	0
13 Rheumatic Fever	...	...	0	1	Deaths of Infants (Total under 1 year)				
14 Diabetes	...	...	0	0		Illegitimate	...	1	3
15 Cerebral Hæmorrhage, &c.	...	...	22	8	Total Births				
16 Heart Disease	...	...	12	21		Legitimate	...	477	445
17 Arterio-sclerosis	...	...	2	1		Illegitimate	...	12	16
18 Bronchitis	...	...	19	13	Population—30,490				
19 Pneumonia (all forms)	...	...	27	16					
20 Other respiratory diseases	...	...	0	3					
21 Ulcer Stomach or duodenum	...	...	1	9					
22 Diarrhœa, &c. (under 2 years)	...	...	7	5					

MEDICAL RELIEF—ASHINGTON &c. HOSPITAL.

MEDICAL RELIEF.—The “Ashington and District Nursing Association Hospital and Infirmary” is situated to the south-east of the railway Station, and in close proximity thereto. It has accommodation for about 40 beds.

The minimum annual subscription is ten shillings for—

1. The services of the District Nurses.
2. Care at the Hospital, if necessary.
3. Use of Motor Ambulance (for stretcher cases).

The following is extracted from the Association's Report for the year 1922 :—

ADMISSIONS.	Adult—Males	...	193
	Females	...	119
	Children	...	65
			377
	Medical Cases	...	95
	Surgical Cases	...	62
	Accident Cases	...	36
DISCHARGES.	Convalescent	...	142
	Transferred to Newcastle		18
	Deaths	...	16
	Receiving Treatment Dec. 31st, 1922	...	17
	Out-Patients	...	162

The District Nurses made 11,409 visits to :—

Medical Cases	...	108
Surgical Cases	...	163
Maternity Cases	...	387

II. SANITARY CIRCUMSTANCES OF THE DISTRICT.

(a) WATER.—This needs no further description, the supply from the Tynemouth Corporation continues to be ample and constant, and averages about 300,000 gallons per day

At the beginning of this year there were 1,764 houses with private taps and 3,761 houses supplied with water from stand pipes in the back streets. During the year additional houses have been supplied with private taps, and 130 water closets and 114 baths have been fixed.

(b) DRAINAGE AND SEWERAGE.—The population has completely outgrown the capacity of the sewers and the council instructed Messrs. Taylor and Wallin, Civil Engineers, of Newcastle, to prepare a scheme which would provide for the increasing population. This scheme was recently presented and accepted. Its main provisions are that several miles of trunk main sewers are to be laid, these varying from 18-inches to 42-inches in diameter. The work is to be divided into 3 sections and it is proposed to commence with two of the sections at an early date. All the sewerage will gravitate to the sea and no Pumping or Filter Beds will be required.

Flooding still occurs during heavy rainfalls at properties on the east boundary of the district owing to the inadequate size and faulty construction of the sewers into which these properties drain. This will be remedied when the new scheme comes into operation.

There are 42 houses situate in outlying parts of the district which are not connected to the public sewers.

All new and reconstructed drains are tested with water or smoke machine before being covered in.

(c) CLOSET ACCOMMODATION.—There are approximately 4,616 privies and 920 water closets in the district.

During the last year 14 privies have been converted into water closets.

It seems to be impracticable to recommend the conversion on a large scale of privies to water closets with our present sewerage difficulties—directly these are rectified there need be no further delay in proceeding with the conversion—with the probability then of abolishing in great part the fly nuisance to which we are always subject in warm weather and which contributes to a very large extent in the spread of infectious disease.

(d) SCAVENGING.—This work is partly carried out by contract, the contractors providing tips, vehicles and labour. The ashpits are emptied fortnightly and the ashbins twice weekly. The collected material is deposited on tips approved by the Council.

The town is divided into seven districts, four of the districts are cleansed by private contractors and three districts by our own motors.

The work is under the supervision of the Council's Surveyor.

SANITARY INSPECTION OF THE DISTRICT.—In accordance with the general order of the Ministry of Health your Inspector has by systematic inspection kept himself informed in respect of any nuisances existing within this district and the following list gives the nature of nuisances dealt with :—

68 Complaints were received and investigated, and steps were taken to have the causes of complaints removed.

INSPECTIONS—

To premises generally re nuisances ...	...	...	1166
To Slaughter Houses ...	...	...	343
To Offensive Trades ...	...	...	71
To Dairies, Cowsheds and Milkshops ...	...	...	37
To Factories and Workshops ...	...	...	63
To Cases of Infectious Disease ...	...	...	194
			1,873

NOTICES—

		Issued.	Complied with.
Informal Notices ...	...	195	185
Statutory Notices ...	...	7	7
		202	192

NUISANCES—			Found.	Remedied.
Insufficient Sanitary Accommodation	...	...	3	3
Structurally Defective Sanitary Accommodation	...	...	19	19
Foul Sanitary Accommodation	...	...	4	4
Defective Drains	...	...	2	2
Choked Drains	...	...	53	63
Defective Yard Paving	...	...	1	1
Defective House Roofs	...	...	2	2
Defective Eaves, Gutters and Downspouts	...	...	55	49
Other Structural Defects	...	...	46	42
Offensive Accumulations	...	...	12	12
Animals kept so as to be a nuisance	...	...	1	1
Filthy Houses	...	...	0	0
Defective Ashbins	...	...	2	2
Insufficient Water Supply	...	...	2	2
			202	192

The following nuisances are still common in the district:—

- 1 Defective and insufficient drainage.
- 2 Unpaved yards.
- 3 Animals kept in close proximity to buildings.
- 4 Fouling of middens with water.
- 5 Overcrowding.

In accordance with circular 120 dated 25th August, 1920, from the Ministry of Health, theatres and cinemas in the district have been regularly inspected by the Sanitary Inspector.

(e) OFFENSIVE TRADES—

Fish Friers	...	...	18
Gut Scraper	...	...	2
Tripe Boilers	...	...	1
			22

The trades of gut scrapers and tripe boiler where conducted on modern premises erected for the purpose, and were satisfactorily maintained.

FACTORIES AND WORKSHOPS.

Particulars of inspections, etc. are given in the following table required by the Home Office:—

Annual Report of the Medical Officer of Health for the Year 1922, for the Urban District of Ashington on the administration of the Factory and Workshops Acts, 1901, in connection with Factories, Workshops, Workplaces and Homework.

INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.
(Including Inspections made by Sanitary Inspector).

Premises				Number of		
				Inspections	Written Notices	Prosecutions
Factories	...	...	...	26	2	0
Workshops	...	...	...	93	7	0
Total	...	...	...	119	5	0

DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars.	Number of Defects.			Number of Prosecutions
	Found	Remedied	Referred to H.M. Inspector	
Nuisances under Public Health Acts :—				
Want of Cleanliness	4	4	0	0
Other Nuisances	3	3	0	0
Sanitary Accommodation { insufficient	0	0	0	0
{ not separate for sexes	0	0	0	0
{ unsuitable or defective	0	0	0	0
Offences under the Factory and Workshop Act —				
Breach of special sanitary requirements as to Bakehouses (Sec. 97-100) ...	3	3	0	0
Total	10	10	0	0

REGISTERED WORKSHOPS.

Workshops on the Register at the end of the year.	Number
Bakers	7
Blacksmiths	5
Bootmakers and Repairers	9
Cycle Repairers	6
Dressmakers and Milliners	8
Joiners and Undertakers	7
Monumental Mason	2
Picture Framers	1
Plumbers	4
Stocking Knitter	2
Tailors	5
Underclothing	1
Watch Repairers	4
Wheelwrights and Coachbuilders... ..	3
Total Number of Workshops on Register ...	64

OTHER MATTERS.

CLASS (1)	Number (2)
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshops Act (s 133, 1901) ...	2
Action taken in matters referred to H.M. Inspector as remediable under the Public Health Act, but not under the Factory and Workshop Acts (s. 5, 1901) {	1
Notified by H.M. Inspector	
Reports (of Action taken) sent to H.M. Inspector ...	1

(f) SCHOOLS—There are 5 elementary schools providing 4,230 places. 3 of the schools are quite modern.

All the schools in the Urban District were closed for 2 weeks from 20th January on account of Influenza. The epidemic which broke out about the middle of the month had by that date reduced the attendance to 43% and it was noticeable that school children were among the first to be attacked—but while the mortality generally was high we had only 3 deaths between the ages of 5 and 15.

Under Regulations made by the Board of Education and by arrangement with the County School Medical Officer, 63 certificates of exclusion from attendance at public elementary schools on account of infectious disease were issued. The number of children affected at each School is shown in the following table :—

Disease.	North		South		East		Bothal		St. Aidan's		Total
	Patients	Contacts	Patients	Contacts	Patients	Contacts	Patients	Contacts	Patients	Contacts	
Scarlet Fever ..	24	27	3	5	5	14	15	21	1	2	117
Diphtheria ..	1	0	0	0	1	4	1	0	0	0	7
	25	27	3	5	6	18	16	21	1	2	124

Previous remarks on the subject of excluding all the children in any one home from school for six weeks during illness, due to the above infectious diseases and convalescence therefrom seem to be as applicable as ever. The child suffering ought to be removed to an Isolation Hospital immediately the case is notified, and after disinfection of the house and bedding and the clothing of the other inmates, it ought to be quite a practical proposition to allow the other children to return to school at once. Facilities for disinfection are now provided at the Isolation Hospital, and were these conditions fulfilled I think our past policy in regard to this matter might now be reconsidered with advantage to all concerned. We have on several occasions admitted Enteric cases to our Isolation Hospital from a neighbouring district and are now agreeing with them to admit cases of other Infectious disease (Scarlatina and Diphtheria) when we have no Enteric cases of our own in Hospital. The natural outcome of this arrangement seems to me to be the provision of a Joint Infectious diseases Hospital to serve the Morpeth Rural District and Newbiggin Urban District as well as our own. I should strongly advise this Council to give this matter their careful consideration and submit it to Morpeth and Newbiggin for their opinions.

III. FOOD.

(a) MILK SUPPLY.—The bulk of the milk is imported into the district, and its condition during the summer months—probably due to delay and exposure in transit—gives rise to many complaints.

Registered under the Dairies, Cowsheds and Milkshop Order, are :—

Wholesale Traders and Producers of Milk	...	8
Purveyors	...	20

The number of cowsheds is 7, and approximately 90 cows are kept. The sheds were generally found in a fairly clean condition, and regularly lime washed.

(b) MILK (MOTHERS AND CHILDREN) ORDER, 1918.—Under this Order dried milk of various brands was supplied by the Council through the Health Visitors to nursing mothers to the value of £1489. Approximately £144/17/9 was given free to necessitous cases.

(c) OTHER FOODS —The class of cattle slaughtered is very good, but adequate examination of meat is impracticable, owing to the numerous premises on which slaughtering is conducted, and the irregular hours during which the work is done.

The following food was destroyed after inspection, having been found unfit for human consumption :—

- 2 carcases of beef affected with tuberculosis.
- 1 carcase of mutton.
- 1 pig.

There are 15 slaughter houses, all subject to annual licence. Some are in close proximity to dwellings, and 6 of them are unsatisfactory, for one or more of the following reasons :—

- Situated in close proximity to dwellings.
- Inadequate in size, e.g., converted stables and wash-houses.
- Lacking in facilities for the storage of refuse and for the maintainance of cleanliness.
- Slaughter house the only lairage available.

Bye-laws as to slaughter houses have been adopted, printed and circulated amongst the traders concerned.

The erection of an abattoir has been under consideration for several years.

Meat was retailed from 28 shops in this district and 7 butchers living outside the district regularly retailed meat from carts.

There are 7 bakehouses in the district—3 factory and 4 workshops—which require considerable supervision to secure the maintainance of reasonable cleanliness.

IV. PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

The total number of Infectious diseases notified this year is much the same as last year. Last year 208 cases were notified of which 83 were Scarlet Fever; this year the total is 217 with 91 cases of Scarlet Fever.

In common with the rest of the country we experienced at the beginning of the year a very sharp epidemic of Influenza which fortunately was not of long duration. Apparently the first to be attacked were the school children, for within the first two weeks the school attendance dropped to 43%. The fatal cases 46 in number, were, with the exception of 5, all complicated by either Pneumonia or Bronchitis.

Enteric Fever which up till now has been such a serious affair every year has been conspicuous by its absence this year. It is true we had one case notified and admitted to Hospital in May solely on the strength of a positive Widal but further investigation after the patient was admitted gave rise to serious doubt as to the diagnosis. The patient had been inoculated while in the army, and it was evident the positive reaction was due to this as no Typhoid Bacilli were found in the stools. This is expressed in the opinion of the Bacteriologist who says "As there has been no increase in the agglutinin content in the blood and as

this is backed by an entire absence of Enteric organisms in the stool, I think we must accept the agglutinin present as probably due to the inoculation which the man had received. The relative proportions are such as one would expect after T.A.B. vaccine." The case is important as there is a probability of similar cases occurring—both in our own district and elsewhere.

In regard to the question of Enteric Fever generally, a systematic enquiry was instituted early in the year with the view of discovering if our repeated epidemics could be traced to a Typhoid carrier. As a result of many lines of investigation amongst previous Typhoid cases in the part of our district mostly affected (Portia Street, 29 to 82) a carrier was at last discovered—though it then transpired that the case had been treated at Newcastle Infectious Hospital, Walker Gate, and not at our own Isolation Hospital—as the whole matter is still subjudice, my previous recommendation to convert the whole of the privies in that block of Portia Street into flush water closets seems most appropriate.

The following table gives the incidence, etc., of Enteric Fever in the district for the last 15 years :—

Enteric Fever	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922
No. of Cases ..	25	21	11	78	20	25	24	3	10	30	88	76	13	19	1
Cases per 1,000 population	1.25	0.95	0.47	3.18	0.74	0.89	0.80	0.12	0.38	1.17	3.30	2.81	.44	.63	.033
No. of Deaths	1	3	3	12	2	5	5	0	2	0	19	8	4	6	0
Mortality rate per 1,000 population	1.05	0.13	0.13	0.48	0.07	0.17	0.16		0.98		0.76	0.30	.135	.20	
Mortality rate per 1,000 cases	40	142	272	153	100	002	208		200		216	105	207	316	

In regard to other Infectious diseases :—

SMALL POX.—Although we are still experiencing immunity from visitation by this disease, it is prevalent in many parts of the country—many of them mining districts like our own—it behoves us to be prepared to deal with an epidemic should it occur. The only absolute preventive—vaccination in infancy—having practically ceased to be compulsory we find that in the great majority of cases it is not adopted. Out of 912 births registered during the year only 52 were vaccinated and re-vaccination is resorted to only by those who are emigrating and who find that the emigration authorities make no provision for conscientious objectors.

SCARLET FEVER.—Notifications have increased this year to 91 in place of 83 last year, of these 19 were below 5 years of age and 72 were of school age.

		1919	1920	1921	1922
Number of cases	...	120	417	83	91
„ deaths	..	1	4	1	0
Attack rate per 1,000 population		4.2	14.47	2.7	2.98
Death	„	.035	.136	.033	0
Case Mortality	...	.83%	.95%	1.23%	0

DIPHTHERIA.—Has decreased considerably—Notifications this year being only 5 compared with 23 last year. Of these 1 was below 5 years of age and 3 were of school age. There are no deaths.

		1919	1920	1921	1922
Number of cases	...	92	51	23	5
„ deaths	...	4	7	0	2
Attack rate per 1,000	...	3.2	1.73	.768	.164
Death „	...	.14	.24	0	.066
Case Mortality	...	4.3%	13.7%	0	40%

Of these 5 cases notified all were submitted for bacteriological examination and found to be negative. The antitoxin supplied by the Council for prophylaxis and for treatment amounted to 156,000 units. 39 bulbs having been used.

PNEUMONIA.—Notifications this year are 37 compared with 20 last year—12 of the 37 are Influenzal. In many cases Pneumonia supervened as the last stage in the fatal influenza cases.

TUBERCULOSIS (PULMONARY).—Notifications were 36 in number, with 27 deaths.

		1919	1920	1921	1922
Number of cases	...	56	31	24	36
„ deaths	...	20	27	18	27
Attack rate per 1,000	...	1.96	1.05	.801	1.181
Death „	...	.700	.918	.601	.885
Case Mortality	...	35.7%	87%	75%	75%

There are also 26 notifications of Non-Pulmonary Tuberculosis, with 10 deaths, giving a case mortality of over 38%.

With housing conditions improving it is to be hoped that next year may show some definite improvement in our Tuberculosis mortality. The figures for this year are just 50% over those for last year, and although there is slight improvement in the case mortality from the Non-Pulmonary form, Tuberculosis still remains the most fatal notifiable disease in the district. The total Tuberculosis cases notified is 62, and the deaths registered therefrom is 37, giving a case mortality of 61%.

The following table gives the number of houses from which cases of the three principle infectious diseases were notified :—

Disease	Number of cases	Houses affected
Enteric Fever ...	1	1
Scarlet Fever ...	91	80
Diphtheria ...	5	5

The following table issued by the Registrar General gives the attack rate of certain Infectious diseases throughout England and Wales in the second column. The incidence of these diseases, with the exception of Diphtheria, seems to vary very little as the figures in the third column shew :—

Disease	Cases Notified in the District	Case rate per 1,000 living, England & Wales	Case rate per 1,000 living, in Ashington
Small Pox ...	0	0·03	0
Scarlet Fever ...	91	2·85	2·89
Diphtheria ...	5	1·37	·164
Enteric Fever ...	1	0·06	·033
Puerperal Fever ...	2	0·06	·066
Erysipelas ...	13	0·35	·420

78 houses were disinfected on account of infectious disease. The disinfectants used were "Sulphume" and "Formalin."

The following tables gives the ages at incidence and the distribution of cases of notifiable infectious diseases during the year :—

Ashington Urban District. NOTIFIABLE INFECTIOUS DISEASES.
Ages at Incidence, 1922. (Ministry of Health Table No. 2).

Notifiable Disease	Cases notified in whole district At Ages—Years							Total case in each Ward		Cases removed to Hospital	
	At all Ages	Under 1	1 to 5	5 to 15	15 to 25	25 to 65	65 etc.	A	H	A	H
Diphtheria ...	5	0	1	3	0	1	0	3	2	1	0
Scarlet Fever ...	91	0	19	61	9	4	0	40	51	2	0
Erysipelas ...	13	1	2	0	3	6	1	4	9	0	0
Enteric Fever ...	1	0	0	0	1	0	0	0	1	0	1
Ophthalmia Neonatorum	5	5	0	0	0	0	0	1	4	0	0
Cerebro Spinal Fever ...	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis, Lungs ...	36	0	1	6	11	18	0	11	25	0	0
Tuberculosis, Other Forms	26	1	2	11	3	9	0	11	15	1	5
Pneumonia, Acute Primary	25	1	3	4	3	13	1	7	18	1	5
Pneumonia, Acute Influenzal ...	22	0	1	0	0	5	2	2	10	0	3
Puerperal Fever ...	2	0	0	0	0	1	0	1	1	1	0
Dysentery ...	1	6	0	0	0	0	0	0	1	0	1
Totals ...	217	8	29	85	34	57	4	80	137	6	15

Ashington Urban District

NOTIFIABLE INFECTIOUS DISEASES
DISTRIBUTION, 1922.

Month	Diphtheria		Scarlet Fever		Erysipelas		Enteric Fever		Ophthalmia Neonatorum		Phthisis		Other Tubercular Diseases		Pneumonia		Dysentery		Monthly Total		
	A	H	A	H	A	H	A	H	A	H	A	H	A	H	A	H	A	H	A	H	Both
January ...	1	0	0	2	0	1	0	0	1	0	0	1	0	0	3	10	0	0	5	14	19
February ...	0	0	0	0	0	0	0	0	0	0	1	3	0	0	1	1	0	0	5	5	7
March ...	0	1	1	1	0	0	0	0	0	0	3	2	3	1	0	1	0	0	7	6	13
April ...	0	0	1	3	1	1	0	1	0	0	0	2	2	1	1	2	0	0	4	10	14
May ...	0	1	4	8	1	1	0	0	0	3	1	5	1	2	0	1	0	0	7	21	28
June ...	0	0	5	0	0	0	0	0	0	0	1	3	2	3	1	2	0	0	8	8	16
July ...	1	0	9	6	0	1	0	0	0	1	0	0	1	1	0	1	0	0	11	20	31
August ...	0	0	2	3	0	3	0	0	0	0	0	3	1	1	0	3	0	0	3	13	16
September ...	0	0	2	4	0	1	0	0	0	0	0	2	1	0	1	2	0	0	4	9	13
October ...	0	0	9	7	2	0	0	0	0	0	2	1	1	3	0	2	0	0	14	13	27
November ...	1	0	3	5	0	0	0	0	0	0	0	0	0	0	0	2	0	0	4	9	11
December ...	0	0	4	2	0	1	0	0	0	0	4	2	1	1	4	1	0	0	13	7	20
Total ...	3	2	40	51	4	9	0	1	1	4	12	24	13	13	9	28	0	1	50	135	215
	5		91		13		1		5		36		26		37		1				

V. MATERNITY AND CHILD WELFARE.

The Centre during the year has been held in the Wesleyan Methodist Schools at Hirst on Tuesdays, between 2 and 4 p.m. The Centre was open 47 times during the year.

The total attendance for the year was 1839, or an average weekly attendance of 38, a number which, though considerably less than last year, may be taken as a good indication of the high estimation in which the Centre is held by those for whose special benefit it was organised.

The work is conducted by the two Health Visitors with the aid of a voluntary Ladies' Committee and the M.O.H. is also in attendance.

In January, 1922, we transferred the Centre to the Wesleyan Church, Woodhorn Road. This building not being available for Mondays, we had to change the day to Tuesday. We find however that Tuesday is not so convenient for the mothers therefore we have a decrease in the attendance.

The work of the Centre still continues to go forward in a very satisfactory manner mothers being anxious about the welfare and rearing of their infants.

Much good is done by the daily visits to the homes, giving advice to the mothers how to feed, and in cases of sickness how to treat the baby. Many visits being made to infants suffering from Diarrhoea and Enteritis.

The following is the Health Visitors' Report :—

Number of Births registered	...	...	...	905
Number of Births, Notifications received	...	...	...	636
Number of Births, Notifications from Doctors	...	...	...	585
Number of Births, Notifications from other persons	...	...	...	51
Number of Births not notified	...	...	...	269
Number of Infants supervised—First Visits	...	...	...	831
Re-Visits	...	...	...	5494
Wholly breast fed	...	...	...	618
Wholly hand fed	...	...	...	87
Partly hand fed	...	...	...	126

Lactagol and dried milk of various brands are sold on Saturday Mornings at the Council Chambers. During 1922 the value of these was £1,489, the amount given free to necessitous cases was approximately £144/17/9.

Five cases of Ophthalmia Neonatorum were notified, all making a satisfactory recovery.

The deaths from Infantile Diarrhoea and Enteritis show a decrease of 12 over 1920. The following table gives the infant deaths from this cause, and the Infantile Mortality Rate for the past 10 years ;—

Year	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922
Infant deaths from Diarrhoea and Enteritis ...	28	57	12	15	8	19	25	22	17	5
Infantile Mortality ...	150	248	123	151	112	119	147	134	113	0

VI. SANITARY ADMINISTRATION.

DISINFECTION.—A Velox Steam Disinfector has been installed at the Fever Hospital 7ft by 3ft 6in diameter, capacity of about 67 cubic feet. [This disinfector is for Hospital use and also for infected bedding and clothes removed from houses in the district.

The following Statistics are printed in accordance with the Ministry of Health's memorandum

1. GENERAL STATISTICS.

Area (acres)—3056.996.

Population—30,490.

Rateable Value—£82,567/6/0.

No. of inhabited houses (1921)—5,506. Sum represented by a penny rate—£344/0/7

2. EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

			Total		Male		Female	
Births	}	Legitimate ...	912	...	467	...	445	} Birth Rate (R.G.) 29.91.
		Illegitimate ...	30	...	12	...	18	
Deaths		...	447	...	234	...	213	Death Rate (R.G.) 14.66.

Number of women dying in, or in consequence of Child-birth { from sepsis—1.
 „ other causes—3.

Deaths of Infants under one year of age per 1,000 births :—

Legitimate—101. Illegitimate—4. Total—105.

Deaths from Measles (all ages)—0.

„ Whooping Cough (all ages)—3.

„ Diarrhoea (under 2 years of age)—12.

INFECTIOUS DISEASES HOSPITAL.—There were three patients in Hospital, 1st January, 1921, all belonging to Morpeth Rural District Council's area.

The number of cases admitted to Hospital during the year 1922, were five, one of these was Enteric, one Diphtheria, and three Scarlet Fever.

The Hospital was occupied on 138 days in the year. The expenditure amounting to £626/12/5. The average stay in Hospital per patient was 32 days.

ADOPTIVE ACTS IN OPERATION IN THE DISTRICT :—

Infectious Diseases Prevention Act, 1890.

Public Health Acts Amendments Act, 1890.

Private Street Works Act, 1892.

Public Health Acts Amendment Act, 1907 (part of).

CHEMICAL AND BACTERIOLOGICAL WORK —The bacteriological examination of specimens in aid of diagnosis are carried out by arrangement with the County Council at the College of Medicine, Newcastle-on-Tyne. The following Table shows to what extent this arrangement it utilised :—

ASHINGTON URBAN DISTRICT BACTERIOLOGICAL EXAMINATIONS AND RESULTS DURING THE YEAR 1921.

—	Diphtheria.			Tubercle.			Enteric Fever.			Total Specimens Examined.		
	Pos.	Neg.	Total	Pos.	Neg.	Total	Pos.	Neg.	Total	Pos.	Neg.	Total
Sent in by Dr. Moore, County Tuberculosis Officer ...	—	—	—	—	—	—	—	—	—	—	—	—
Sent in by Dr. Hunter, Assistant Tuberculosis Officer ...	—	—	—	8	39	47	—	—	—	8	39	47
Sent in by other Medical Practitioners ...	0	5	5	4	15	19	0	6	6	4	26	30
Totals ...	0	5	5	12	54	66	0	6	6	12	65	77
Cases notified ...			5			62			1			

NOTIFIABLE DISEASE DURING THE YEAR.

Disease.					Total Cases Notified.	Cases admitted to Hospital.	Total Deaths.
Diphtheria	...	...	...	...	5	1	2
Scarlet Fever	...	...	...	...	91	3	0
Enteric Fever (including Paratyphoid)	...	...	...	...	1	1	0
Puerperal Fever	...	...	...	...	2	1	1
Pneumonia	...	...	...	...	38	9	57
Tuberculosis :—							
(a) Pulmonary	{ M	20	...	}	36	0	29
	{ F	16	...				
(b) Non do.	{ M	16	...	}	26	0	8
	{ F	10	...				

HOUSING.

The Sanitary Inspector is the designated Officer under the Housing Regulations, 1910.

The original estimate of the number of houses required to meet the needs of the district was 2,000 under the State Aided Scheme ; 206 houses have been erected. Under the Subsidiary Scheme 102 houses are in course of erection.

The shortage of houses in the district is still very acute, 1,300 applications are in hand and new applications are received daily.

At the present rate of house building the prospects of these applicants getting a house is very remote.

The principal defects are matters remediable under the Public Health Acts, *e.g.*, defective and insufficient drainage, unpaved yards, insanitary privies and middens, and dampness due to defective house roofs, downspouts and eaves gutters. None of the houses were provided with a scullery sink with a water supply over it, and the accommodation for washing clothing was generally unsatisfactory. The Council considered it impracticable to demand a remedy to these defects, which are common in a greater or lesser degree in at least 75% of the houses in the district, under post-war conditions still prevailing.

UNFIT HOUSES.—Long and Cross Rows (48 houses).

These houses were condemned as unfit for habitation. The Ashington Coal Company are carrying out an extensive scheme of improvement, which, when completed will make these houses reasonably fit to live in.

Number of new houses erected during the year :—

(a) Total	...	...	...	...	113
(b) As part of a municipal housing scheme	...	...	...	...	104

1. UNFIT DWELLING HOUSES.

Inspection.—(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	...	181
(2) Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulation 1910	...	...	...	...	—
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for habitation	...	...	...	...	—
(4) Number of dwelling houses (exclusive to those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	...	...	...	...	25

2. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers	...	...	...	...	25
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A—Proceedings under section 28 of the Housing Town Planning, &c. Act, 1919.

(1) Number of dwelling houses in respect of which notices were served requiring repairs	...	...	...	...	7
(2) Number of dwelling houses which are rendered fit :—					
(a) by owners	...	...	...	...	7
(b) by Local Authority in default of Owners	...	...	...	...	—
(3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	...	...	...	...	—

B—Proceedings under Public Health Acts.

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	...	...	...	...	156
(2) Number of dwelling houses in which defects were remedied :—					
(a) by owners	...	...	...	...	149
(b) by Local Authority in default of owners	...	...	...	...	—

C—Proceedings under sections 17 & 18 of the Housing Town Planning Acts, 1919.

(1)*Number of representations made with a view of the making of Closing Orders	48
(The remaining 20 are being rendered fit as the tenants can be found other accommodation).	
(2) Number of dwelling houses in respect of which Closing Orders were made	—
(3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses have be rendered fit	28
(4) Number of dwelling houses in respect of which Demolition Orders were made	—
(5) Number of dwelling houses demolished in pursuance of Demolition Orders	—

* The 20 unfit houses are being rendered fit, as the tenants can be found other accommodation.

SUGGESTED RECOMMENDATIONS.

The following is a summary of my recommendations :—

- 1—That adequate hospital accommodation for the isolation and treatment of cases of infectious disease other than Typhoid, be provided.
- 2—That refuse collection be undertaken by direct labour, that disposal by “tipping” be discontinued and disposal by incineration or pulverization be substituted.
- 3—The Sections 39 to 42 (inclusive) Public Health Acts (Amendment) Act, 1907, be adopted, and that the Council consider the desirability of carrying out the conversions by loan.
- 4—That the provision of a public abattoir be again considered.
- 5—That a separate water supply be provided for each house in the district.

In conclusion I have to thank the various Council Officials who have so kindly co-operated in the preparation of the various Tables and other statistical matter necessary for the preparation of this Report,

I have the honour to be,

Your obedient servant,

M. BRUCE, M.B., C.M.

Medical Officer of Health.

