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# ANNUAL REPORT

OF THE

## HEALTH

OF THE

**Pontypool Urban District,**


**FOR THE YEAR 1902,**

BY

**S. BUTLER MASON, M.R.C.P.,**

**&c. &c.,**

**Medical Officer of Health.**



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Denham House,  
Pontypool,  
12th February, 1903.

To the Pontypool Urban District Council.

Mr Chairman and Gentlemen,—

In handing you my 25th annual report respecting the health of your area according to the regulations of the Local Government Board, I regret not being able to say that you have extended your borders, therefore your district as regards configuration and area remain exactly as it was. I hope before long that some extension of your district may be allowed, as at present there is no room for building in suitable spots any sewage works, isolation hospitals, or even to find tipping ground for dust and street refuse; these are matters of importance for the health of your inhabitants, and require great consideration at your hands. The construction of proper sewage works is becoming daily of more importance, and I am sure that delay will not be much longer allowed, especially as such marked success has been recorded with the many improvements in the septic tank system.

*Description of Area.*—It lies upon the carboniferous system, or more particularly the millstone grit, or farewell rock, or the lower portion of the true coal measures, and forms the eastern outcrop of the South Wales coalfield. The strata dip or slope about three inches per yard in a south-westerly direction.

*Configuration.*—The surface of the district is extremely irregular and hilly, and lies to the north of the Trosnant Brook and to the west of the Avon Llwyd river. It comprises the angular portion of land formed by the above-named streams. The ground rises or slopes up in a northerly, north-westerly, and westerly direction from the before-mentioned streams, and lies at an elevation of from 400 feet to 700 feet above the mean sea level, and comprises an area of 234 acres.

*The Death-rate.*—During the year ending Dec-31st, 1902, 75 persons at all ages died in your district, 40 males and 35 females, the death-rate being 12·1 per 1,000 of the estimated population. Six persons belonging to your area succumbed in the Pontypool Union Infirmary; these added to those who died in their own homes will give a corrected death-rate of 13·1 per 1,000 per annum of the estimated population. By looking at Table I., "Vital statistics of the whole district during 1902 and previous years," supplied for me to fill up by the Local Government Board, you will observe that the death-rate is lower than has been the case for the past seven years; the average death-rate for the past 10 years is 16·01. Taking into consideration many things, and one especially that an epidemic of scarlatina has been going on the whole year, I think I can congratulate the Council on such a very low rate of mortality.

*The Birth-rate.*—Throughout the same period under review 200 children—102 males and 98 females—were born in your district, the birth-rate being 32·4 per 1,000 per annum of the estimated population. The increase of births over deaths being 125,



the average birth-rate for the past 10 years is 31·97 ; by this it will be seen that the population is not decreasing. Twenty-three of those born during the year died before completing one year of age, giving a rate of infant mortality per 1,000 born of 115. This is exceedingly satisfactory, as the average death-rate for infants under one year of age for the past 10 years in your district is 152·66 per 1,000 born. The rate of infant mortality during the year under review is the lowest since 1896, when it was 21 per 1,000 born. By the preceding figures you will observe that your population during the past year has made a nett gain of 119.

Several remarks in my former annual reports have dealt with the want of care taken in the proper feeding of infants, and I am inclined to think that some heed has been taken by those having charge of young children in this respect, as I find that the rate of infant mortality for several years past has been gradually decreasing, and I can only repeat what I have so often said, that the improper feeding of infants, together with the wanton exposure they are often subject to by inexperienced mothers, is the first and foremost cause of the increased infantile death-rate. The extremes of life, whichever end is taken, are the least robust portion of it, and it behoves those having charge of infants to get the best possible advice as to the feeding. When the mother's milk fails, the natural food supply to the infant is lost, then great care and discretion is required to find it a suitable sustenance. A high rate of infant mortality is a serious infliction on a population from whatever cause it may arise, and it means in the future fewer men and women. Probably the higher rate of wages now obtainable by the working classes, and which enables them to get more home comforts, may have considerably assisted in greater care.

The zymotic death-rate from all notifiable diseases, including diarrhoea and whooping-cough was '97 per 1,000 of the population during the year ; this is very low, and compares well with the same death-rate of former years.

I enclose Tables I., III., and IV., properly filled up as required by the Local Government Board.

Table I. gives the vital statistics for 1902 and the previous 10 years. This is a very useful table, and the birth-rates, death-rates, and their averages for that period can be seen at a glance.

Table II., which does not apply to your area, I have not enclosed.

Table III. supplies you with all the information you require respecting cases of infectious disease notified during 1902.

Table IV. gives the causes of death and the ages of persons dying during 1902.

These various tables are supplied by the central authority, and have been very carefully filled up by myself. They are statistics of no mean value, and I presume they will be printed at the end of this report for the use of members of your Council. It is only by carefully considering each table separately



that improvements in various details can be kept in view.

*Diphtheria*.—During the year six cases of this disease were notified, and all recovered. As far as inspection of the premises went, there was no very apparent reason why they occurred. The disease attacked four persons between the ages of five and 15, and one over 25 years. Therefore I am inclined to think the disease was caught outside the dwelling in those cases, as children are very fond of playing about a drain, and gases emanating from such places will give rise to all sorts of throat troubles.

*Membranous Croup*.—Two cases of this disease were notified, and one proved fatal. This disease and the former are so closely allied as to make it almost impossible to draw a line between them. In any case it is not so apparent to the naked eye. The treatment is more difficult, as the disease occurs out of sight and usually in very young children.

*Erysipelas*.—There were two cases of erysipelas notified during the year, both adults. They recovered. As far as I could make out each case was the result of chill, both persons being very delicate.

*Scarlatina or Scarlet Fever*.—The epidemic of this disease, which I alluded to in my last annual report as having gone on through the whole year 1901, has quietly continued its way through 1902, and is still going on. Every now and then a break occurs, and for two or three weeks no case is notified. Then several cases are notified one after another. During the year I am reviewing, 88 cases were notified. It is rather interesting to observe how during the months of the year the cases were distributed, viz.:—January, 11; February, 11; March, 13; April, 3; May, 7; June, 6; July, 10; August, 6; September, 2; October, 8; November, 6; December, 5; total, 88. Notwithstanding this number of cases only two deaths occurred; therefore I think I am right in saying that the disease was of a mild type. As far as sanitation goes, everything was done except isolation, and even that measure has been carried out as far as possible, but I scarcely need say that isolation is a very difficult matter in cottages of the sort used by the labouring classes in your district. At no time during the year has the disease assumed such a virulent nature as to warrant me in recommending the closing of any particular school. My impression is that the disease was kept up by the mild nature of it. I frequently have seen children whom I felt certain had scarlatina, and the rash was absent, or so indistinct as not to be observable except on very close inspection, and the only evidence of the disease was in the throat and on the tongue, and the signs of desquamation during the period of convalescence; the consequence being that probably many children have had (unobserved by the parents) the disease, and mixing with others in school have kept up the epidemic; and this is observable in the fact that after the month's summer holiday in August only two cases of scarlatina occurred in September.

*Enteric or Typhoid Fever*.—This disease has been



singularly absent from your district during the year. Two cases were notified and both recovered. Both cases were children and in the same house. I regret I can offer no satisfactory explanation of the cause. Various theories were suggested at the time, but no real suggestion explained the cause of the first case.

*Whooping Cough.*—There has been one death due to whooping cough. How many children have had the disease I have no means of knowing, but I do know that the disease had been going on at intervals, but no very serious cases have occurred.

*Diarrhœa.*—This disease was fairly common among children throughout the year. It is quite likely that the excessive amount of wet which characterised the year 1902 had the effect of increasing intestinal diseases. Adults also were more than usually subject to these affections. There were two deaths, both under one year of age.

*Phthisis*, or tuberculous disease of the lungs, and with this disease I may classify other tuberculous diseases.—Nine persons succumbed to the former and three to the latter. The death-rate per 1,000 of the population for consumption was 1·6, the previous year it was 1·3; the death-rate for all tuberculous diseases was 1·9 per 1,000 of the estimated population. This is not a very serious death-rate for a damp valley, and in all probability in the years to come this rate will be materially lessened when the population thoroughly understand the value of plenty of fresh air as a therapeutical remedy. It is as well to warn all persons who have an invalid in their homes suffering from tuberculous disease, especially of the lungs, not to allow any expectoration to be ejected about the house; it should be burned or buried deeply. Also these unfortunate sufferers should have a room entirely to themselves with free ventilation from the outer air, even in cold weather.

*Bronchitis, Pneumonia, and Pluerisy.*—As is usual, a large number of the above-named maladies have occurred during the past twelve months under review, chiefly among children, but the mortality has been less than in former years. There was no death from pluerisy, and but fourteen from the other two, nine of those being under five years of age. In the previous year 20 deaths occurred from one or other of these diseases. The diseases of the respiratory organs among children form the major part of the work of the general practitioner in this district, and the number that recover under very adverse circumstances is amazing. The cause of the disease as a rule is chill, due to exposure to cold in some way or other. The houses of the working classes are not as a rule too good, and the great bulk of illness referable to the organs of respiration is generally to be found among those who are badly housed and improperly clad.

*Influenza.*—This infectious disease has been cropping up occasionally during the year, and towards the end of December showed signs of becoming very general. No death was registered as due to it, but it is quite likely it was the forerunner of some



of the cases of lung disease.

*Measles.*—An occasional case of this infectious disease has shown itself. There may have been more cases than I have heard of, but as it is a non-notifiable disease, I have no chance to know the exact number. One case, however, proved fatal, in consequence of inflammation of the respiratory tract.

*Isolation Hospital.*—The building of an isolation hospital is still under the consideration of the Council. Fortunately, we have not seriously required its use this past year, but no one can say how soon such a need may arise. I am very glad to say that, as regards the small pox tents, I believe we are equal to an emergency if a case arises. Notification has cost the Council about £12 12s during the past 12 months. The probability is that the greater part of this would have been saved had there been a place to properly isolate the early cases of scarlatina, besides avoiding the great risk to life. The district has been very fortunate in having no case of smallpox brought in. Many other districts less exposed to the infection have had cases imported into them. Pontypool, being on the direct road from Newport to Abergavenny and the North, is made the halting ground for a large number of tramps, who are continually on the move, and are the great conveyers of all sorts of infectious disease. I shall be very glad to know that the Council have determined to erect a suitable building as an isolation hospital.

*The Water Supply.*—During the year under review I have had no complaint respecting the water supply. Its quality has been as heretofore, good, and I am very glad to say the supply has been more regular and constant. I feel pleased to be able to say this, as for years I have had to complain of the inconstant supply of water to your district.

*The Food and Meat Supply.*—No unsound meat or food has been brought before me, and I consider your district very fortunate in having so good a meat supply.

*The Public Slaughterhouse.*—I regret that nothing has been done to carry out my suggestion as to the erection of a proper public slaughterhouse. I particularly emphasized this in my last annual report, as I had received so many complaints respecting the existing ones.

*The Avon Llwyd River.*—This river, which receives the sewage of your district, has been regularly looked after during the year. Fortunately, the rains have been so constant and so heavy as to keep it naturally flushed, but, apart from that, your Inspector of Nuisances has kept it constantly under observation, so that no impedimenta have blocked the proper flow of matter running into it.

*Precautions Taken to Prevent the Spread of Infectious Diseases.*—Immediately a certificate notifying an infectious disease is received, the Sanitary Inspector or myself visits the spot and directions are given as to properly observing isolation, all drains, closets, and backyards inspected



and any defects ordered to be made good, disinfectants are supplied to all with directions how to use them, the house is kept under observation until the case is well, and then the premises are disinfected with Formalin. All children are kept from school and the headmasters warned. All these details take up an amount of time, and I regret to say that, to a great extent, are unappreciated by many of your inhabitants, especially when it comes to a little outlay by the landlord having to put into sanitary condition some drain, or supply that very necessary appliance—a water tank to a w.c. All w.c.s should have a flushing tank, with a constant supply of water, and I wish to mark my appreciation of your Sanitary Inspector's diligence in steadily getting every house in your area supplied with a proper flushing tank to the w.c.

*Sewerage and Drainage.*—The sewerage of your district is under constant supervision, and we are continually coming across old box drains that no one knew anything about. These are always taken up, and after disinfecting the ground, suitable glazed sanitary pipes put in their place. A new sewer has replaced an old box drain in Moreton-street. The same thing has been done in Chapel-lane, and a new relief outfall sewer has been constructed in Lower Crane-street. Altogether 266 yards of 12, 9, and 6 inch pipe sewer, with manholes and chambers, have been laid down.

*The Queen Victoria's Jubilee Institute of Nurses.*—This institution, through its resident district nurse, continues to do good work. I find that Miss Thomas and her predecessor, Miss Phillips, attended in your district alone 70 cases and made 1,420 visits. The district nurse is very popular and well received by the poor, and I regret that my recommendation of last year respecting a district nurse for infectious diseases has not been carried out. The rules of the Institute do not allow the general district nurse to take charge of infectious diseases, and these very often are the cases when skilled supervision is most required.

The health of the district during the past twelve-months has not been so good as usual, although the mortality has been lower. Scarletina, measles, and whooping cough, together with chest affections in children have been very prevalent. It has been a very damp year, and, considering the amount of sickness, I am rather surprised that the deathrate has not been higher. The number of new cases of pauper sickness was 482, as compared with 471 in the previous year.

*The Factory and Workshops Act, 1901.*—Section 132 of the Factory and Workshops Act, which came into force January 1st, 1902, requires that

The Medical Officer of Health of every District Council shall, in his annual report to them, report specifically on the administration of this Act in workshops and workplaces, and he shall send a copy of his annual report, or as much of it as deals with this subject, to the Secretary of State.

This being a new departure and the investigations connected with it requiring a lot of time, your



officers have not been able to get such a grip during the year as will be the case in the future. I find there are 66 factories and workshops in your district, as under:—

Dressmaking...	...	...	...	6
Millinery	...	...	...	6
Tailoring	...	...	...	12
Bootmaking and repairing	...	...	...	6
Saddlers	...	...	...	3
General smiths	...	...	...	5
Wheelwrights	...	...	...	4
Joinery	...	...	...	7
Plumbers and tinworkers...	...	...	...	6
Fish cleaners...	...	...	...	1
Bakehouses	...	...	...	10
				—
				66

In this list most of them appear to have been well kept. A ready compliance with any suggestion made by your Sanitary Inspector is the rule. In one workshop the ventilation was found insufficient, and the owner at once fixed a more efficient ventilator. In another the w.c. accommodation was found insufficient, and this was immediately remedied by an improved sanitary convenience. Four workshops have been limewashed and painted. One of the most important matters connected with inspections under the Factory Act, 1901, is the list of home-workers. It appears that all persons giving out home-work of a specified class must keep detailed lists of the parties, or contractors, employed on such work. Such lists are to be open for inspection by officers of the District Council, and copies are to be sent to the District Council twice a year—1st February and 1st August. In default the District Council may prosecute. By this means the Inspector and Medical Officer can discover where work is being carried on and under what conditions—sanitary or otherwise, in the midst of disease or squalor. At present there are very few out-workers in the district and, I am glad to say, are all clean, tidy people. As far as the list goes which I have collected, the number is not half-a-dozen. The requirements of this Act are so great, as far as the District Council are concerned, that to properly carry out its provisions, an extra inspector is really required, but still, if the lists are regularly sent in, and proprietors and owners of establishments will readily do the necessary improvements, as suggested by your officers, I think we shall be able to go along as before.

*A Summary Detail of Sanitary Work done throughout the Year.*

Undrained premises furnished with surface drains and connected with sewer	...	...	10
Defective and untrapped w.c.'s	...	...	54
Choked drains opened and cleansed	...	...	45
Closets built to serve old premises	...	...	20
Defective drains taken up and cement-jointed pipes substituted	...	...	10
Houses provided with eaves troughing	...	...	16
Iron lip traps taken up and replaced by stone-ware gullies	...	...	20



Pigs removed	...	...	...	...	...	4
Nuisances arising from defective soil pipes	...	...	...	...	...	2
Slop sinks, lavatory, and bath washes, which were found directly connected to house drains, disconnected and arranged to discharge over external traps	..	...	...	...	...	10
Overcrowding in cottages	..	...	...	...	...	4
Defective urinal walls concreted, &c.	...	...	...	...	...	2
Accumulations of manure, wash, &c.	...	...	...	...	...	42
Workshops linewashed	...	...	...	...	...	4
Houses provided with proper and efficient flushing cisterns	...	...	...	...	...	130
Defective buildings rebuilt	...	...	...	...	...	4
Houses disinfected and purified	...	...	...	...	...	70
Schools in district disinfected	...	...	...	...	...	2

Total of sanitary work ... 449

*To enforce the work summarised there were*

Statutory notices served	...	...	...	...	...	260
Written intimations and other notices	...	...	...	...	...	165
Verbal requisitions and other notices	...	...	...	...	...	200
Visits and revisits to workmen to work in course of progress to secure efficient completion	...	...	...	...	...	920
Number of complaints received	...	...	...	...	...	6

Total ... 1751

The slaughter-houses have been regularly inspected and kept as clean as possible, and all offal regularly removed. Yet, notwithstanding every care, complaints are frequently received, and at this I am not surprised, as the chief slaughter-house is in the heart of the town and surrounded by houses. The common lodging-houses, workshops, bakehouses, tallow-melting workshops, sugar-boiling and fish-frying shops have all been regularly inspected. The Public Elementary Schools have also been frequently visited and all out-buildings examined.

*Work done by the Council.*—Hanbury-road has been widened from 27 to 36 feet; this is a very great improvement. Re-sewering of Moreton-street and Chapel-lane with the relief outfall sewer in Lower Crane-street.

*Work Required to be Done.*—Isolation hospital; public slaughter-house; sewage scheme: sewer, as recommended in last year's annual report, from the Labour in Vain to the North-road.

I am,

Mr Chairman and Gentlemen,

Yours obediently,

S. BUTLER MASON, M.R.C.P., &c.,

Medical Officer of Health.



**TABLE I.**  
**VITAL STATISTICS OF WHOLE DISTRICT DURING 1902 AND PREVIOUS YEARS.**

YEAR.	Population estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.				TOTAL DEATHS IN PUBLIC INSTITUTIONS BEYOND DISTRICT.	NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT.	
				Deaths under 1 Year of Age.		At all ages.				
		Number.	Rate. <sup>a</sup>	Number.	Rate per 1,000 Births Registered.	Number.	Rate. <sup>a</sup>		Number.	Rate. <sup>a</sup>
1892.	5,902	238	40.3	42	176.4	135	22.8	9	144	24.3
1893.	5,962	213	35.7	32	150.2	105	17.6	13	118	19.7
1894.	6,022	210	34.8	30	142.8	99	16.4	12	111	13.4
1895.	6,082	211	34.6	30	142.1	86	14.1	14	100	19.7
1896.	6,142	162	26.3	21	128.3	73	11.8	8	81	13.1
1897.	6,202	191	30.8	31	163.2	91	14.6	6	97	15.6
1898.	6,255	172	27.4	26	151.1	91	14.5	8	99	15.8
1899.	6,314	174	27.5	29	166.6	96	15.2	10	106	16.7
1900.	6,373	217	34.0	35	161.7	122	19.1	7	129	20.2
1901.	6,126	174	28.3	25	144.2	86	14.0	6	92	15.0
Averages for years 1892-1901.	6,138	196.2	31.97	30.1	152.66	98.4	16.01	9.3	107.7	17.35
1902.	6,156	200	32.4	23	115	75	12.1	6	81	13.1

\*Rates calculated per 1,000 of estimated population.

Area of District in acres (exclusive of area covered by water.)	}	234	Total population at all ages, 6,126 Number of inhabited houses, 1,178 Average number of persons per house, 5.2	}	At Census of 1901
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**TABLE III.**  
**CASES OF INFECTIOUS DISEASE NOTIFIED DURING**  
**THE YEAR 1902.**

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.						
	At all Ages.	At Ages—Years.					
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.
Small pox .. ..							
Cholera .. ..							
Diphtheria .. ..	.. 6..	.....	.. 1..	.. 4..	.....	.. 1..	.....
Membranous croup..	.. 2..	.....	.. 2..	.....	.....	.....	.....
Erysipelas .. ..	.. 2..	.....	.....	.....	.....	.. 2..	.....
Scarlet fever ... ..	.. 88..	.....	.. 23..	.. 56..	.. 6..	.. 3..	.....
Typhus fever .. ..							
Enteric fever .. ..	.. 2..	.....	.. 1..	.. 1..	.....	.....	.....
Relapsing fever .. ..							
Continued fever .. ..							
Puerperal fever .. ..	.. 1..	.....	.....	.....	.. 1..	.....	.....
Plague ... ..							
Totals .. ..	.. 101..	.....	.. 25..	.. 61 .	.. 7..	.. 6..	.....

Isolation Hospital .. .. Nil



**TABLE IV.**  
**CAUSES OF AND AGES AT DEATH DURING YEAR 1902.**

CAUSES OF DEATH	DEATHS IN OR BELONGING TO WHOLE DISTRICT AT SUBJOINED AGES.						
	All ages.	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and up- wards.
Small pox .. ..							
Measles .. ..	.. 1..	.. 1..	.....	.....	.....	.....	.....
Scarlet fever .. ..	.. 2..	.....	.. 2..	.....	.....	.....	.....
Whooping cough .. ..	.. 1..	.. 1..	.....	.....	.....	.....	.....
Diphtheria and mem- branous croup .. ..	.. 1..	.....	.. 1..	.....	.....	.....	.....
Croup .. ..							
Fever:							
Typhus .. ..							
Enteric .. ..							
Other continued .. ..							
Epidemic influenza .. ..							
Cholera .. ..							
Plague .. ..							
Diarrhœa .. ..	.. 2..	.. 2..	.....	.....	.....	.....	.....
Enteritis .. ..							
Puerperal fever .. ..							
Erysipelas .. ..							
Other septic diseases .. ..	.. 1..	.....	.....	.....	.. 1..	.....	.....
Phthisis .. ..	.. 9..	.....	.. 1..	.....	.. 2..	.. 6..	.....
Other tubercular di- seases .. ..	.. 3..	.. 1..	.. 1..	.....	.....	.....	.. 1..
Cancer, Malignant di- sease .. ..	.. 4..	.....	.....	.....	.....	.. 3..	.. 1..
Bronchitis .. ..	.. 9..	.. 5..	.. 2..	.....	.....	.....	.. 2..
Pneumonia .. ..	.. 5..	.. 1..	.. 1..	.....	.. 2..	.. 1..	.....
Pleurisy .. ..							
Other diseases of Res- piratory organs .. ..	.. 3..	.. 1..	.. 1..	.. 1..	.....	.....	.....
Alcoholism .. ..							
Cirrhosis of liver .. ..							
Venereal diseases .. ..							
Premature birth .. ..	.. 2..	.. 2..	.....	.....	.....	.....	.....
Diseases and accidents of parturition .. ..	.. 1..	.. 1..	.....	.....	.....	.....	.....
Heart diseases .. ..	.. 4..	.....	.....	.....	.....	.. 1..	.. 3..
Accidents .. ..	.. 2..	.....	.....	.. 1..	.....	.. 1..	.....
Suicides .. ..	.. 1..	.....	.....	.....	.....	.. 1..	.....
All other causes .. ..	.. 24..	.. 8..	.....	.. 2..	.. 1..	.. 3..	.. 10..
All causes .. ..	.. 75..	.. 23..	.. 9..	.. 4..	.. 6..	.. 16..	.. 17..



