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Doncaster (England). County Borough Council.

**Publication/Creation**

1894

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ANNUAL REPORTS  
OF THE  
MEDICAL OFFICER OF HEALTH  
FOR 1894.

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DONCASTER BOROUGH  
AND THE  
COMBINED DISTRICT COUNCILS.

DONCASTER RURAL.

GOOLE RURAL.

SELBY RURAL.

TADCASTER RURAL.

GOOLE URBAN.

SELBY URBAN.

TICKHILL URBAN.





BOROUGH OF DONCASTER.



DONCASTER:

A. CHAPMAN, PRINTER, THE BOROUGH PRINTING WORKS, HIGH STREET.





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DONCASTER URBAN SANITARY AUTHORITY.

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ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH,

*For the Year ending 31st December, 1894.*

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POPULATION 1891	..	..	..	..	..	..	25,954
ESTIMATED POPULATION DURING 1894	..	..					27,620
PART ESTIMATED AS BUILT UPON, IN ACRES	..	..					1,609

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*To the Doncaster Sanitary Committee.*

GENTLEMEN,

I HAVE NOW TO PRESENT MY ANNUAL Report for the year 1894. In preparing it, I have been guided by the printed instructions of the Local Government Board.



## Population.

During last year the borough was re-arranged into 6 wards instead of 3, the latter arrangement had existed for many years. To arrive at some better idea of the population of each ward than the mere number of persons on the burgess list, it was arranged at the same time as the census of children at school age was taken for the work of the School Attendance Committee, that inquiries should also be made as to the total number of persons inhabiting each house. An approximate census was thus obtained, and the whole population in the borough is, for the purpose of this report, based upon these returns; up to the middle of 1894, I estimate the population as 27,620. According to the rate of increase found at the last census period the population increases a rate beyond that which the excess of births over deaths year by year would account for.

## Birth-rate.

The births registered in 1894 were 884—males, 418; females, 466. The birth-rate for the year was 32 per 1000. The average birth-rate of the previous 10 years was 33.

Throughout the whole of England and Wales last year the birth-rate was only 29·6, and was the lowest ever recorded.

In the Central Ward the birth-rate was 23·4 per 1000.

„	East	„	„	25·5	„
„	North	„	„	42·0	„
„	South	„	„	37·5	„
„	St. George's	„	„	20·0	„
„	West	„	„	40·6	„

There were 501 deaths registered in the borough last year—males, 250; females, 251. Twenty of these occurred at the Workhouse or the Infirmary, these were either strangers or belonged to the rural districts; the correct number of deaths was therefore 481, and the death-rate for the year was 17·4 per 1000.

During the first quarter of last year the				
death-rate was	-	-	21·3	per 1000
During the second quarter	„	„	14·9	„
During the third quarter	„	„	17·1	„
During the fourth quarter	„	„	20·1	„

The average rate for the previous 10 years was 18·8. It is satisfactory to note that the death-rate was last year 1·4 below the 10 years average, but throughout the whole of England and Wales the death-rate was the lowest ever registered: it was 16·6 per 1000. If not the actual lowest the death-rate in Doncaster was last year next to the lowest yet registered. Before any calculation of the death-rate in the wards of the town is made, all the deaths, other than strangers, at the Workhouse and the Infirmary are distributed according to the population throughout the several wards.

In the Central Ward the death-rate was 17·0 per 1000				
„ East	„	„	15·2	„
„ North	„	„	17·0	„
„ South	„	„	14·6	„
„ St. George's	„	„	18·4	„
„ West	„	„	19·7	„

Fifty-two deaths were caused by zymotic diseases: these are almost all infectious, and 72 per cent. were deaths of children under 5 years of age.

Deaths from  
zymotic  
diseases.



The total number was equal to a death-rate of 1·8 per 1000, the 10 years—1884-93—average rate was 2·1.

16 deaths were caused by whooping cough.

10	„	„	„	measles.
9	„	„	„	diarrhœa and dysentery.
7	„	„	„	scarlet fever.
6	„	„	„	enteric do.
3	„	„	„	membranous croup.
1	„	„	„	diphtheria.

The differences in the wards of the rate from these zymotic diseases were very slight, the greatest excess was in the West Ward, the rate there was 2·7 ; in the North Ward it was nearly 1·0 per 1000.

Deaths from  
diseases of the  
lungs.

From phthisis or consumption there were 32 deaths, equal to 1·1 per 1000 ; from bronchitis and other forms of disease of the lungs there were 82 deaths, equal to 2·9 per 1000 ; in both groups the death-rate last year was 4·1, the average rate of the previous 10 years 4·8. In the South Ward that rate was only 2·4, in the Central Ward it was 4·4 per 1000, the rates in the other wards closely agree with the general average.

Seventeen males of an average age of 30 years died from consumption, two-thirds of these had been engaged at outdoor work ; 15 females died at an average age of 33 years, none had been engaged at any special occupation likely to affect their health.

Deaths at  
different ages.

The deaths among infants under one year was 154 per 1,000 births registered ; the proportion for the previous 10 years was 167, while for the whole of England and Wales, last year, the proportion was only 137.

This calculation is independent of any possible errors in calculating the numbers of the population, as the actual numbers of both births and deaths are given as registered, and therefore it is of importance to give the figures for each ward.

In the South Ward the deaths under one year were equal to 120 per 1,000 registered, during the year, in that ward.

In the North Ward the proportion was	...	130.
In the West Ward	„ „	150.
In the Central Ward	„ „	168.
In the East Ward	„ „	181.
In the St. George's Ward	„ „	213.

Deaths from measles, whooping cough, and diseases of the lungs, account for these wide differences.

Children under 5 years of age contributed 38 per cent. of all the deaths during last year. Taking special note of the deaths in the common yards, it is found that the children under 5 years of age contributed 48 per cent. of all the deaths which occurred there.

Twenty-three per cent. of the persons who died last year had reached 65 years of age ; but among those living in the yards just named, the proportion of old persons was 40 per cent. It is, however, well known that it is not considerations of health that induce people to occupy the houses in our common yards.

Twenty-nine deaths were returned on a certificate from the Coroner, 20 of these were due to natural causes, 6 resulted from accidents, and 3 were cases of suicide. Only 3 deaths were uncertified by a medical man or the Coroner.



Cases of  
infectious  
diseases  
notified.

Last year 143 notifications of cases of infectious disease were received :—

66 were cases of scarlet fever.

22 were cases of enteric fever.

4 were cases of puerperal fever.

17 were cases of diphtheria.

3 were cases of membranous croup.

30 were cases of erysipelas.

1 was a case of small-pox.

Cases of measles or whooping cough are not reported.

Scarlet fever.

The total number, 143, is only about one-fourth of those reported during 1893. Among the 66 cases of scarlet fever there were 7 deaths, equal to 10 per cent. of the persons attacked; whereas among the 15 children under 5 years of age, ill of scarlet fever, there were 5 deaths. The lesson is surely to strive more to protect young children against contracting this disease, which they are so unable to bear.

Three exceptionally difficult cases to manage at their homes were received at Carr House. The cases were reported from each ward in the town; and as the cases were reported during every month, and spread over 32 weeks of the year, there was at no time any prevalence of the disease in an epidemic form. Fully one-half the cases occurred as single cases in a house, but the infection spread in 9 houses until a 2nd or 3rd and even 6 and 7 persons had been attacked. How much sickness and anxiety might have been prevented if the earliest of these cases had been removed where isolation could have been carried out! There is almost too much credit given to the power of various disinfectants to prevent the spread of the infection of scarlet fever: these do good, and are absolutely necessary; but their use must not be trusted to take the place of strictly



separating the infected persons from the rest of the household until the patient is not only better in himself, but until he has lost the power of infecting others. This last condition is far too often lost sight of, especially if the attack has been mild and other cases follow, which in their turn may be far more severe.

A large number of articles (1010) of bedding, Disinfection. clothing, &c., were disinfected last year, and the care taken in removing them in one van and, after disinfection, returned in a separate van, insures that no possibility of infection remains. We find now less objection to the disinfection of the bedding, clothes, &c., by steam, when the illness is entirely over. This disinfection the law has made compulsory, and the apparatus provided is most effectual, without in any way injuring the materials.

Among the 25 cases of enteric fever reported there Enteric fever. were 6 deaths, a percentage higher than during the previous year, or the usual average death-rate in other places. Nine of the cases were treated at the Hospital, and 2 at the Workhouse. At only 2 houses was there a second case.

An inquiry was made as to the possible origin of each case. Four of these began to be ill with fever on recovering from a previous illness, in 5 cases the previous history showed that there was a great probability of the illness having been contracted away from Doncaster, in 4 cases the local sanitary matters were so defective as likely to cause injury to health, but in the remaining cases no clue could be had as to a cause for the disease beginning. The larger number of cases was in the same ward where so many cases of this fever occurred in the previous year, but cases were reported this year more equally from each of the six wards.



Small-pox.

Two cases of small-pox were treated in the Hospital in 1894 : one was the result of infection from cases of the previous year, the other was a tramp who showed the disease the following day after coming to Doncaster from Sheffield. The husband was also kept in quarantine there for a time, lest he might also have caught the infection. He was not affected.

Diphtheria  
and  
membranous  
croup.

From diphtheria, diphtheritic croup, and membranous croup there were 19 cases; there were 4 deaths, 3 of these were of very young children who were notified as ill of membranous croup. The death-rate from cases of diphtheria was only 6 per cent. of the persons attacked.

In only 2 houses was a second case reported. A careful examination of the sanitary surroundings in and near the several houses did not give any satisfactory reason for the occurrence of the disease. In a few cases the drains were badly trapped ; but the great majority of the cases were evidently traceable to cold.

The 4 cases of puerperal fever were not traceable to any source of infection.

Cases treated  
in Carr House.

Fifteen persons from Doncaster were last year treated to Carr House Hospital.

2	suffered from	small-pox.
3	„ „	scarlet fever.
9	„ „	enteric fever.
1	was placed there in	quarantine.

One child was only 3 years old, and 5 were under 17 years of age. The cases were there under treatment throughout the greater part of the year.

The visits paid to all the houses where cases of <sup>Inspection.</sup> infection were reported were the means of having many sanitary defects remedied. In addition, there are constantly going on inspection of houses and premises, and, when necessary, alterations are advised, and the Sanitary Committee have frequently, on the whole facts being reported, issued notices insisting upon such work being carried out. The details of this work are given in the Inspector's Table following this Report. But last year a special inspection of the town and all its sanitary conditions, of the waterworks, and of the sewage farm, was made by a Medical Inspector of the Local Government Board.

The reason for this inquiry was to ascertain how far the sanitary equipment of the town was efficient in the event of a possible re-appearance of cases of Asiatic cholera. Dr. Wheeler met the Council in Committee and read his report containing suggestions regarding the water supply, hospital accommodation, the construction and scavenging of ash-pits, the paving of yards, the condition of some of the older dwelling-houses, and also the amount of accommodation provided in the common lodging-houses. These several matters embrace nearly every department of work which is the special purpose of the Sanitary Committee to deal with.

The water supply for the town has been anxiously <sup>Water supply.</sup> considered by the the Waterworks Committee last year, and the evident intention of that Committee is to provide, both in quality and quantity, fully for the increasing population of the town.



The Sanitary Committee considered whether it would be safe to re-open any of the old public wells in the streets. An analysis of 3 of these was made, and as the result was far from being satisfactory it was decided not to re-open them.

Improvements  
in Sewers and  
private drains.

The laying of the sewer for carrying off the sewage from several streets in the Hyde Park district has been prevented, but there is a likelihood of the work being immediately carried out. The Sanitary Committee ordered a large automatic flushing tank to be put down at the head of the town's sewer on Thorne Road. Complaints had frequently been made of manholes on that line of sewers smelling offensively, and the new means of cleansing provided, it is hoped, will remove the cause of such complaints. It is not always the condition of the sewers which are at fault, for often an examination of the private house drainage shows that serious defects exist in them, which are more serious in their effects.

Such defects are constantly being detected and remedied, and private householders themselves have similar works carried out, without the intervention of the Sanitary Authority.

Scavenging of  
ash-pits.

The scavenging of the contents of the closets, ash-pits, movable boxes, &c., has been carried out by workmen employed by the Corporation during recent years. The advantage of the water closet system, and a small receptacle for house refuse emptied weekly, commends itself to an increasing number of persons. The retention of foul, decaying matter in an ash-pit, especially when near to a dwelling house, has nothing to recommend the plan, only that it has long existed. The

removal of all such refuse, at frequent short intervals, is a necessity. Dr. Wheeler strongly advised the lessening of many of the old, large, ash-pits, and this advice has been, and is still further being, acted upon, and other alterations have been made to lessen any cause of complaint from the existing ash-pits.

The Sanitary Committee have repeatedly considered the best means of dealing with the houses in French Gate, which were condemned as unhealthy, and it is their desire to replace these old and badly arranged houses with new streets and houses, built after the requirements of the new Bye-laws.

Four additional houses were reported as unfit to occupy, one has since been altered and allowed to be again inhabited. The requirement of the new Bye-laws, that a portion of the yard surface and open space, near to new houses, is to be paved or asphalted, is one which, I hope, the owners of many old houses may be induced to carry out. To have a clean, dry surface, close to the house is a better sanitary state than many of the sodden waste pieces, which are not gardens, but only receive so much of the household refuse.

I hope the Committee will not overlook the subject previously discussed, namely—the need for better accomodation for nightly lodgers. For their own sake, and especially considering their liability to introduce infection into the town, there is need for all the requirements of our Bye-laws, and some of the existing houses are ill adapted to receive lodgers.



Trades  
registered.

There are 40 dairies, or milk-sellers, on the register. The importance of the cows being housed, and milk-selling being carried on with some regard to it being a trade for the supply of human food, is the reason for the regulations required to be observed by the persons registered. The regulations are not severe; but some cow-keepers are indifferent as to the cleanliness of the sheds, and the need for the regular removal of the manure. A verbal notice is given to remedy such neglect, and another visit paid to see the result. I recently inspected 18 bakehouses and found the great majority satisfactory. The sinks in 3 were not sufficiently cut off from the drain. Over-crowding is a rare condition to find. Our supply of bread is baked in clean premises.

Other workshops have been visited, and over-crowding of young persons pointed out, which has been reduced. The tenants of some of these rather resent visits, which recent legislation has compelled sanitary authorities to have carried out.

Analysis of  
foods.

Twenty samples of food were submitted to the public analyst last year :—

2 were of butter, both certified as genuine.

6 were of lard, all certified as genuine.

12 were of milk—

1 was certified as being of superior quality.

1 „ „ as being adulterated.

2 were „ as being genuine.

5 „ „ as being of fair quality.

3 „ „ as being of poor quality.

The seller of the second was, on being summoned, fined 10s. and costs.

The Sanitary Committee ordered the Inspector to inform the persons, from whom the samples were taken, of the result of the analysis. It was necessary in 3 cases to follow up the notices served by the Sanitary Committee by issuing a summons. The Justices made the order, required in each case, to abate a nuisance caused by over-crowding a dwelling-house; to remedy a very defective state of house drainage; and to make the cabin of a canal boat clean and habitable.

One hundred and seventeen canal boats were inspected last year. These are the dwellings not only of the adults managing the boats but 130 young people, from 2 months up to 17 years, were found living on board, so that these boats are their dwelling-houses for the time. Thirty-seven notices were served to remedy some neglect of the regulations made for these boats. No case of infectious disease was found on board.

I remain, Gentlemen,

Your obedient Servant,

J. MITCHELL WILSON, M.D.,

Medical Officer of Health.

DONCASTER,

*26th February, 1895.*



## NUISANCES ABATED, ETC., DURING 1894.

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Inspections made	...	...	...	...	...	290
Written and verbal notices given	...	...	...	...	...	178
Ash-pits covered and ventilated	...	...	...	...	...	41
Privies converted into water closets	...	...	...	...	...	94
House and yard drains repaired and trapped	...	...	...	...	...	67
Sinks disconnected and trapped	...	...	...	...	...	3
Houses disinfected after illness from infectious diseases	...	...	...	...	...	77
Ash-pits, &c., scavenged	...	...	...	...	...	7495
Other nuisances under The Public Health Act	...	...	...	...	...	123
Canal Boats inspected	...	...	...	...	...	117
Notices for breach of the Canal Boats Regulations	...	...	...	...	...	37
Common lodging-houses on the register	...	...	...	...	...	9
Bakehouses on the register	...	...	...	...	...	20
Dairies and milkshops on the register	...	...	...	...	...	38
In addition to the Public Slaughter-house, private ones on the register	...	...	...	...	...	4
Cattle Trucks at landing stage of Railway Companies frequently inspected.						
Two carcasses of meat and 1 pig were destroyed by order of the Justices, having been found unfit for human food.						

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## SAMPLES OF FOOD SUBMITTED FOR ANALYSIS, ETC.

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1. Milk (1 superior quality, 1 genuine, 5 fair quality, 3 poor quality, and 1 adulterated)	...	...	...	...	12
2. Lard (both genuine)	...	...	...	...	6
3. Butter (2 genuine)	...	...	...	...	2

Four persons were summoned before the Justices :

Adulteration of milk ; fined 10s. and costs.

Offence against Canal Boats Act ; fined 5s. and costs.

Overcrowding dwelling-house ; to pay costs.

Nuisance from drains ; to pay costs.

BEDDING, &c., DISINFECTED BY STEAM AT THE PUBLIC  
DISINFECTING APPARATUS—1894.

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Beds	...	...	...	...	...	...	...	...	106
Mattresses	...	...	...	...	...	...	...	...	214
Pillows and bolsters	...	...	...	...	...	...	...	...	339
Pairs blankets	...	...	...	...	...	...	...	...	47
Pairs sheets	...	...	...	...	...	...	...	...	12
Counterpanes	...	...	...	...	...	...	...	...	121
Articles of Clothing	...	...	...	...	...	...	...	...	40
Sundry Articles	...	...	...	...	...	...	...	...	131
									<u>1010</u>

JOHN THOMPSON,

INSPECTOR.



**TABLE I.**

SUMMARY OF BIRTH AND DEATH RATES IN THE BOROUGH, AND IN EACH WARD, DURING 1894,  
COMPARED WITH THE RETURNS FOR THE WHOLE OF ENGLAND AND WALES.

	Population in 1894.	Rate per 1,000 of the Population.					Deaths in Children under one year per 1,000 Births.
		Births.	Deaths.	From Zymotic Diseases.	From Phthisis.	From other Respiratory Diseases.	
THE BOROUGH ...	27,620	32.0	17.4	1.8	1.2	2.9	154
CENTRAL WARD ...	5,070	23.4	17.1	1.7	1.0	3.4	168
EAST WARD ...	3,882	25.5	15.2	2.0	0.5	3.1	181
SOUTH WARD ...	5,119	37.5	14.6	1.5	0.7	1.7	120
NORTH WARD ...	4,185	42.0	17.0	1.1	0.9	2.8	130
ST. GEORGE'S WARD	3,807	20.0	18.4	1.3	1.0	3.0	213
WEST WARD ...	5,557	40.6	19.7	2.7	1.2	2.8	150
ENGLAND AND WALES	...	29.6	16.6	1.7	...	...	137

**TABLE II.**

DEATHS FROM THE PRINCIPAL ZYMOTIC DISEASES,  
DURING 1894, AND THE FIVE PREVIOUS YEARS.

	1894	1893	1892	1891	1890	1889
Small-Pox .....	0	3	0	0	0	0
Measles .....	10	3	25	14	3	0
Scarlet Fever .....	7	9	10	5	10	5
Enteric and Continued Fevers .....	6	9	6	5	3	5
Diarrhœa and Dysentry	9	43	10	22	21	39
Whooping Cough .....	16	8	18	5	22	11
Diphtheria.....	1	4	5	6	1	0
Membranous Croup.....	3	2	1	2	0	0
Cholera .....	0	2	0	0	0	0
Total for each year.....	52	83	75	59	60	60



**TABLE III.**

SUMMARY OF THE BIRTH AND DEATH RATES IN DONCASTER  
DURING THE TEN YEARS—1884 TO 1893.

Year.	Rates per 1,000 of the Population.					Deaths among Children under one year per 1,000 Births registered.
	Births.	Deaths.	From Zymotic Diseases.	From Phthisis.	From other Respira- tory Diseases.	
1884	34·7	18·7	2·5	1·7	3·1	180
1885	33·6	18·3	1·1	2·4	3·9	122
1886	34·0	19·5	2·1	1·7	3·9	180
1887	35·4	19·6	1·5	1·6	3·7	154
1888	32·4	18·0	2·3	1·0	3·5	167
1889	31·4	17·0	2·3	1·4	2·4	179
1890	29·5	19·9	2·3	1·3	3·5	183
1891	32·0	19·0	2·2	1·0	4·5	168
1892	32·0	17·6	2·7	1·2	3·1	150
1893	33·3	21·0	3·0	1·3	3·3	188

**TABLE IV.**

DEATHS FROM SEVERAL GROUPS OF DISEASES IN THE BOROUGH,  
AND FOR COMPARISON IN THE COURTS AND COMMON  
YARDS IN THE TOWN IN 1894.

	Total.	Deaths per 1000 of the Popula- tion.	Proportion of Deaths in every 1,000 from all causes.	
			In the Borough.	In the Courts.
From				
1.—Zymotic Diseases.....	52	1·8	104	90
2.—Pulmonary Diseases (other than Phthisis)	82	2·9	164	136
3.—Tubercular Diseases...	34	1·3	68	
4.—Wasting Diseases of Infants .....	47	1·7	94	227
5.—Convulsive Diseases of Infants .....	37	1·3	74	113

1.—Includes Measles, Scarlet Fever, Whooping Cough, Enteric or Typhoid Fever, Diphtheria, and Diarrhœa.

2.—Includes Bronchitis, Pneumonia, Pleurisy, and Asthma.

3.—Includes Phthisis, Scrofula, Tabes Mesenterica.

4.—Includes Marasmus, Atrophy, Debility, and Premature Birth.

5.—Includes Hydrocephalus, Menengitis, Convulsions, and Teething.







TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH, DURING THE YEAR 1894, IN THE DONCASTER URBAN DISTRICT; CLASSIFIED ACCORDING TO DISEASES, AGES AND LOCALITIES.

NAMES OF LOCALITIES.	Estimated Population.	Registered Births.	Aged under 5 or over 5.	New Cases of Sickness in each Locality, coming to the knowledge of the Medical Officer of Health.										Number of such Cases Removed from their Homes in the several Localities for Treatment in Isolation Hospital.											
	1894			Small-Pox.	Scarlatina.	Diphtheria.	Membranous Group.	Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas.	Small-Pox.	Scarlatina.	Diphtheria.	Membranous Group.	Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas.
CENTRAL WARD .....	5070	119	Under 5 ..... 5 upwards .....	...	4 5	1 2	1	...	3	...	...	1	...	7	...	...	...	...	...	...	...	...	...	...	...
EAST WARD .....	3882	99	Under 5 ..... 5 upwards .....	...	4 17	0 2	...	...	2	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...
NORTH WARD .....	3980	175	Under 5 ..... 5 upwards .....	1	3 4	2	1	...	2	...	...	2	...	6	1	...	...	...	...	2	...	...	...	...	...
SOUTH WARD .....	5119	192	Under 5 ..... 5 upwards .....	...	2 5	2	...	...	8	...	...	...	...	3	...	...	...	...	...	4	...	...	...	...	...
ST. GEORGE'S WARD .....	3807	75	Under 5 ..... 5 upwards .....	...	...	...	1	...	2	...	...	1	...	4	...	...	...	...	...	...	...	...	...	...	...
WEST WARD.....	5557	226	Under 5 ..... 5 upwards .....	...	4 7	...	...	...	4	...	...	...	...	7	...	2	...	...	...	3	...	...	...	...	...
THE WORKHOUSE .....	205	...	Under 5 ..... 5 upwards .....	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTALS .....	27620	886	Under 5 ..... 5 upwards .....	1	17 49	3 14	3	...	1 23	...	...	4	...	30	1	3	...	...	...	9	...	...	...	...	...

“Notification of Infectious Diseases” is compulsory in the District since 17th March, 1893.  
The Isolation Hospital used by the sick of the District is in the Rural Sanitary District.





**Doncaster Rural District Council.**





TO THE  
**Doncaster Rural District Council.**

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REPORT OF THE MEDICAL OFFICER OF  
HEALTH FOR 1894.

Population of the District in 1891 .....	28,364
Population estimated in 1894 .....	30,532
Area in Acres .....	106,326

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GENTLEMEN,

I have now to present my Annual Report, prepared in agreement with the instructions of the Local Government Board.

This report deals with the whole district, which last year included an area of 106,326 acres and an estimated population of 30,532. In future the parishes of Misson and Finningley will be separated from this district.

POPULATION.

The whole rural district for registration purposes is divided into four sub-districts with the following areas and estimated populations :

Barmbrough.....	21,660 acres ...	4,618 population.
Bawtry .....	36,078 ,, ...	6,642 ,,
Campsall .....	26,323 ,, ..	5,253 ,,
Tickhill.....	22,265 ,, ...	14,019 ,,

The conditions under which those in the purely agricultural districts of Bawtry and Campsall live are more conducive to long life than those which prevail in the more closely-built colliery townships in the Tickhill districts especially, and also in some parts of those included in the Barmbrough district. In comparing the death rates it is essential to keep this fact constantly in view. It is in these latter townships and in the sub-urban parishes around Doncaster that the rapid increase of the population during the past has taken place. In 1871 the population of the whole rural districts was 20,431 ; in 1881, 24,751 ; in 1891, 28,364 ; and through a special increase of houses during the last few years at Conisboro', Thurnscoe, and Bolton, I think the estimate of the population as 30,532 does not now over-state it.



## BIRTHS.

Last year 1010 births were registered—males 520, females 490 ; the birth-rate was 33 per 1000. The average birth-rate for the previous ten years in these districts was 31, and for the whole of England and Wales the average was 31·4 per 1000. In the Barmbrough sub-districts the birth-rate was 31·3 ; in the Bawtry it was 27 ; in the Campsall 27·6 ; but in the Tickhill districts it was 38·5. In the parish of Conisboro' the birth-rate was 43 per 1000, and in Balby and Hexthorpe it was 41. Among populations which contain so large a proportion of young persons the death-rate may be expected to be much higher than in districts with lower birth-rates, as a large share of every year's deaths is among children under 5 years.

## DEATHS.

475 deaths (males 255, females 220) were registered last year in the rural districts ; that number is corrected by adding 8 others, so as to include those who, belonging to the districts, died at the Workhouse or Infirmary in Doncaster, the total of 483 was equal to an annual death-rate of 15·8 per 1000. It has been very exceptional to register a death-rate of less than 16 per 1000 in these districts. From previous reports I find that during the years 1876 to 1880 the average death-rate was 18 per 1000. The average of the 10 years previous to 1894 was 17 per 1000.

The following were the death rates in each sub-district and the average for the previous ten years :—

	1894.	Average rate 1888-1893.
Barmbrough .....	17·1	15·5
Bawtry .....	11·0	16·0
Campsall .....	14·6	15·5
Tickhill .....	17·5	18·5

The death-rate in the largest townships also showed a similar reduction. The death-rate in Conisboro' parish was 21, but when the returns of infectious sickness are given it will be shown that the large proportion of all these cases occurred in that parish during last year, the death-rate therefore will not appear excessive.



In the agricultural parishes of Bawtry and Finningley the death-rate last year was 20 per 1000. In neither of these parishes was there any death from infectious disease, but in each a large proportion of the year's deaths were among persons aged 65 years.

In many of the townships having a population exceeding 500 the death-rate last year was exceptionally low. In Wheatley, Bolton-on-Dearne, Cantley, and Misson the deaths for the year were less than 10 per 1000, in Wadworth the death-rate was 10·6, Barnby Dun 11·6, Balby-with-Hexthorpe 15·6, and at Denaby 17·7.

#### DEATHS DUE TO ZYMOTIC DISEASES.

53 deaths were due to cases of zymotic disease ;—

16				were caused by measles,
12	„	„	„	enteric fever,
9	„	„	„	scarlet fever,
7	„	„	„	whooping cough,
7	„	„	„	diarrhœa,
1	„	„	„	diphtheria,
1	„	„	„	membraneous croup.

The death-rate from these was 1·7 per 1000, and is less than the average rate for the previous ten years. In the Tickhill sub-districts deaths from these causes equalled 3·2 per 1000 ; in all the other sub-districts the rate was less than 1 per 1000. In Conisboro' parish this death-rate was 4·9, in Denaby 4·4. In the last parish the deaths were due to measles and whooping cough ; in no other parish did that rate amount to 2 per 1000. 70 per cent. of these deaths were of children under five years of age. Among infants under one year the deaths equalled 131 per 1000 registered births, but in Denaby parish, through deaths from measles and whooping cough, the proportion was 226 ; in Conisboro' it was 172 ; in Bentley-with-Arksey, 160. Among smaller populations this comparison is not a safe test for any single year.

#### DEATHS AT DIFFERENT AGES.

The varying proportion of aged people in any district often affects the death-rate for any single year. Throughout the whole districts



21 per cent. of all persons who died had reached the age of 65 years or over. In the sub-districts of Bawtry and Campsall 39 and 36 per cent. of the deaths were of aged persons, whereas in the Tickhill there was only 13 per cent. In Misson last year there was 80 per cent., in Cantley 60, and in Finningley 50 per cent. of the deaths in persons aged 65.

#### DEATHS CAUSED BY DISEASES OF THE LUNGS.

The deaths from diseases of the lungs were last year very much below the average : the rate was 3·3 per 1000. Included are 26 from phthisis, equal to 0·8 ; from bronchitis, &c., 76, equal to 2·5 per 1,000. In the Barmbrough districts that rate was 5·8, in the township of Bawtry it was 7·3.

25 deaths were returned on certificates from the Coroner, 10 were the result of accidents, 9 from disease, and 6 from other causes. 16 deaths were returned as uncertified.

#### CASES OF INFECTIOUS DISEASES NOTIFIED.

Last year 270 notifications of cases of infectious disease were received—

174	were	cases	of	scarlet	fever,
49	„	„		enteric	fever,
2	„	„		puerperal	fever,
2	„	„		small-pox,	
12	„	„		diphtheria,	
31	„	„		erysipelas.	

Compared with the previous year there was a very great lessening in the number of cases. Cases of measles and whooping cough are not in the list of diseases to be reported. Each of the cases notified, unless those of erysipelas, was visited, and inquiries made as to the probable origin of the disease, the means taken to separate the infected patient from others, verbal and printed instructions given as to the use of the disinfectants supplied, and also an examination made of the sanitary arrangements in and about the infected house.

#### CASES OF SCARLET FEVER.

Among the 174 cases of scarlet fever there were 9 deaths, the



the death rate was equal to 5 per cent of the persons attacked, but as 59 of the patients were under 5 years of age, and as 7 deaths occurred among these, the proportion of deaths among the very young was 12 per cent. In Hexthorpe 3 infants died after only a few days illness which contradicts an opinion not uncommon that children under a year are not liable to catch the infection of scarlet fever. The cases of scarlet fever were reported from 12 parishes. In 5 of these the disease did not spread beyond the houses first reported, in others the disease had infected several houses before it was reported and several persons in each house; but another year's experience of trying to control this highly infectious disease only more strongly proves the need for the mothers' careful co-operation if there is to be any success with cases at their own homes. Where reasonable care could be taken and the mother willingly helped the disease rarely spread, but among the many over crowded cottage houses, and with little care taken, the disease naturally attacked several others in the same household. 119 cases of this fever occurred in the parish of Conisbro'. The disease had been rife during the first 6 months of the year and the cases were scattered widely over the parish. Personal infection was readily traceable from other houses close to, and the number of cases were increasing every week. At the beginning of July the hospital at Denaby was free, and it was decided to open it for the treatment of cases of scarlet fever. During the next 3 months 37 cases were treated there, or one-half the number notified during the same time. To obtain the removal, pressure had to be used in a few cases, but for several weeks the hospital was full. I think there is no doubt but that the removal of the infection from the houses virtually stopped the outbreak, for only 12 new cases were reported in that parish during the next 3 months, and these could not be removed.

#### CASES OF ENTERIC FEVER.

49 cases of enteric or typhoid fever were notified, 12 deaths were registered from that cause, the death rate of 24 per cent of the persons attacked is unusually high. Some part of that excess is due to the deaths of 5 young children, average age of these was only 2 years, having been certified from fever.



Again a very large proportion of the cases of fever, viz. 36, occurred in Conisbro' parish, particularly in the newer portion. A considerable number of cases of this fever were reported from the same streets in the Autumn of 1893, and as 28 of the cases occurred from August to December of last year, it seemed as if the infection had been revived after the heat of the Summer. That the infection was largely traceable to the closets seems most probable, because a large population living under almost exactly the same conditions of house-accommodation, water and milk supply, and engaged in the same occupation in Denaby, had among them no cases of this fever during the Autumn. Every endeavour was made to disinfect all the infected matters, and the contents of the closets and ashpits were regularly scavenged, but with a dry system of refuse removal the greatest care does not insure the destruction of all the germs of the disease. 18 patients were removed to the hospital during the last quarter of the year. 6 cases occurred in one house, very much due to the refusal to have a child removed on the ground that the case was a very slight one, 4 others of that family were afterwards ill, including the father who died. The good use of the hospital was proved by the removal of 2 cases of this fever, reported during one week at Bolton-on-Dearne. No other case has occurred there since. 3 of the cases in Wheatley were suspected of having been due to the milk used, but further inquiries did not bear out that view.

#### DIPHTHERIA.

12 cases of diphtheria were notified with 1 death, a very favourable result. Several cases reported were very slight. In 2 houses the person who nursed the patients was also afterwards ill. At 2 of the houses the sanitary conditions were bad; the surroundings were either very dirty from manure and sodden ground; the water was found to be very impure from 2 wells which were in use. Other cases appeared as slight cases of diphtheria, following upon exposure to cold.

#### SMALL-POX.

The two cases of small-pox were both imported from other districts, they were removed to hospitals and no other person was attacked.



Outbreaks of measles and whooping cough have been especially severe at Conisbro', Denaby, Adwick-le-street, Barmbrough, and Bawtry. Both to prevent the too early exposure of the children, who had been ill, and also the spread of the disease, the kind assistance of the school teachers was obtained, and where actually needed a certificate was given to close the school for a few weeks.

#### CASES ADMITTED INTO THE FEVER HOSPITAL.

The hospital at Denaby was occupied throughout nearly the whole of 1894. The total number of patients admitted was 62.

1 was a case of small-pox.

37 were cases of scarlet fever, of which one patient died.

24 were cases of enteric fever, with 2 deaths.

14 of the patients were under 5 years of age.

17       "       "       between 5 & 10       "

14       "       "       "       10 & 15       "

16       "       "       over 15 years.

8 patients were in the hospital on December 31st.

#### SANITARY INSPECTIONS.

In addition to the detailed sanitary inspection made of the houses where cases of infectious diseases existed, a more general inspection has been made throughout the district of the conditions likely to effect the health of the inhabitants. In the early part of last year Dr. Wheeler, an Inspector of the Local Government Board, made a rapid inspection of the several districts, mainly in view of the danger of the reappearance of cases of Asiatic cholera.

#### WATER SUPPLY.

Dr. Wheeler met the Sanitary Authority at their meeting in April, and read several recommendations (1) as regards water supply. He urged that a better supply is needed for Conisbro', Wadworth, Armthorpe, Askern, and Loversall. This matter had previously been discussed by the Sanitary Authority after reports and investigations made in each of these townships. The additional testimony of Dr. Wheeler will no doubt induce the District Council to again carefully consider these reports. The supply for Conisbro' village has been



greatly improved during the last 10 years by conveying water from the town well and from Holywell Springs to such parts of the village as the levels would permit of. But there is still a large part of the population which have to carry their supply a long distance, and the existing supply is very precarious in dry seasons. A memorial was sent to the Sanitary Authority last year, urging that some steps should be taken to improve the supply at Conisbro'. The newer portion of Conisbro', built by the Colliery Company, are now supplied with water laid on to the houses, the supply is obtained from the sandstone of the coal measures at a depth of 93 yards from the surface. That water is pure but hard. The newly erected houses at Hickleton Main, Thurnscoe, and Goldthorpe Lane Ends obtain their supply from a similar strata, but nearer the surface, from a borehole sunk near to the new coal pit at Hickleton Main.

A recent analysis of the public supply for Barmbrough proved the water to be very pure, and although hard, the hardness does not exceed that in the well waters previously used in that parish. In the townships of Balby, Hexthorpe, and Wheatley, 107 additional houses last year obtained a water supply from the mains of the Doncaster Corporation. A deep well sunk last year at the new Hydro, Askern, yielded a water both purer and softer than that now obtained from the shallow wells there. The water from the public well is far from satisfactory, and rain water is a too uncertain supply.

At Loversall the water now flowing in the stream should be conveyed in pipes to protect it against being fouled in its course. Among the well waters analysed 5 were so fouled as to be dangerous to use, in these cases notices were served requiring a wholesome supply to be provided.

#### SEWAGE WORKS.

Dr. Wheeler also reported upon the need of works for the removal and disposal of sewage, and specially named Conisbro' and Bentley-road as being urgently in need of a better system. Before that report was received plans for the drainage of Conisbro' and Denaby had been decided upon by the Sanitary Authority and they only waited the sanction of the Local Government Board to be proceeded with. That work is now being carried out,



No scheme has, as yet, been considered for Bentley, that portion which has increased rapidly, viz., Doncaster Road now depends upon cesspools for the disposal of the sewage. Some portion finds its way into the stream close to and complaints have been made of this as a danger to cattle drinking the water below. A more urgent reason is because the water supply of that district is obtained from wells, and although the cesspools are as far off as the bye-laws require yet it is a serious matter to have the subsoil fouled by sewage.

The Sanitary Authority have instructed Mr. Spink, A.M.I.C.E., to carry out a scheme for effectually dealing with the sewage of Thurnscoe. In 14 parishes there were laid last year 5300 yards of new sewers and 2600 yards of house drains connected with these sewers, and at least 5 old cesspools filled up.

At Loversall the sewage is now purified on a plot of ground laid out by Mr. Barras.

No scheme for dealing with the sewage of Bolton-on-Dearne has yet been decided upon, but owing to the large number of new houses at Goldthorpe, which is in the parish of Bolton, the question every day becomes more pressing. In addition to all the length of sewers both old and of recent construction, Mr. Barras reports that  $6\frac{1}{2}$  miles of drains and water courses have been cleansed and repaired.

The ventilation of the existing sewers has been improved by 8 additional upright shafts, and wherever the means exist the sewers have been systematically flushed.

The other recommendations of Dr. Wheeler regarding the providing the means of isolating cases of infectious disease and for the scavenging of house refuse, the Sanitary Authority had anticipated. I have already reported the good results of hospital isolation even in its present limited amount. The existing bye-laws prescribe a satisfactory form of closet and ashpit. For the removal of such refuse, contracts were again made for the districts of Wheatley, Hexthorpe, and Conisbro', and during the past year the work was carried out satisfactorily.



## REVISING OF THE BYE-LAWS.

During the year the existing bye-laws were revised by a sub-committee, they were afterwards submitted to, and adopted by the Sanitary Authority; as decided upon they have now received the approval of the Local Government Board, and will be applicable to the whole of the district. The work of considering plans for new houses especially rapidly increases, plans for 449 houses were passed last year, and the consideration of these has required a large amount of time and inquiry. But the welfare in the future of this district will be greatly influenced by requiring all new houses to be built with reasonably good sanitary surroundings.

Two houses were condemned as being unfit for occupation, and 30 notices were served requiring the abatement of overcrowding. At several of the houses where cases of fever were reported there was found serious overcrowding.

## SPECIAL INSPECTIONS MADE TO TRADE PREMISES REGISTERED.

Inspections have been made of the 167 cowsheds and dairies, 16 slaughter houses on the registers, and the few bake houses and other workshops in the district. During the visits made to these, it has been necessary to draw attention to omissions in observing the regulations and to require the abatement of overcrowding. Mr. Barras's report gives a full and interesting statement of the year's completed sanitary work.

I remain,

Your obedient servant,

J. MITCHELL WILSON, M.D.

*January 19th, 1895.*

1894.

TO THE CHAIRMAN AND MEMBERS OF THE RURAL DISTRICT  
COUNCIL OF DONCASTER.

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GENTLEMEN,

I have the honour to present to you herewith a short summary of the work done during the past year, full particulars of which will be found in the appendix hereto.

NEW STREETS AND BUILDINGS.—The number of plans for these submitted to the Authority during the past year has been exceptionally large, particularly at Conisborough, Bolton-on-Dearne, and Hexthorpe, the work in connection therewith having been satisfactorily carried out.

SEWERAGE.—At Loversall, small sewerage works have been carried out, which are working satisfactorily. At Conisborough and Denaby an extensive sewerage scheme is being carried out, which will deal with the sewerage of these places. At Thurnscoe also a scheme is under consideration for dealing with the sewerage of the township, rendered necessary by the opening out of the Hickleton Main Colliery.

Throughout the district generally new sewers have been laid where required.

LIGHTING.—CONISBOROUGH—This village has during the year been lighted with gas, the Authority having obtained urban powers for these purposes. ASKERN.—The dispute between the ratepayers of this parish and the Gas Company having been settled, the village is now being lighted with gas.



SCAVENGING.—The contracts for scavenging at Conisborough, Hexthorpe, and Wheatley are working satisfactorily and are of great benefit to those localities.

PRIVATE STREETS WORKS ACT, 1892.—Powers having been obtained under the Urban Act for certain streets in Wheatley, and under your direction I have prepared the plans, specifications, &c., necessary for carrying out the works which were adopted by the late Authority.

I am, Gentlemen,

Your obedient servant,

CHAS. C. BARRAS,

Surveyor and Inspector.

STATEMENT SHOWING SANITARY WORK COMPLETED  
AND NUISANCES ABATED DURING THE YEAR 1894.

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Number of Inspections made	...	...	...	3020
Number of Notices served by order of the Rural Sanitary Authority relating to defects of drain- age, ventilation of Sewers and W.C.'s, clean- ing of ashpits, &c.	...	...	...	33
Verbal Notices	...	...	...	806
New Sewers laid in several Parishes	...	...	...	5301 yards
New Drains	...	...	...	2602 „
Houses connected with New Sewers	...	...	...	248
Number of Cesspools abandoned by connecting House Drains to Sewers	...	...	...	5
Number of New Cesspools	...	...	...	1
Drains and Water-courses cleaned and repaired:	6½	miles		
Number of Sinks disconnected over trapped Gullies	...	...	...	248
Number of W.C. Soil pipes ventilated	...	...	...	11
New Trapped Gullies for Surface Water...	...	...	...	10
Houses stoved and disinfected	...	...	...	89
Houses closed (2), Houses cleansed (10), and over- crowding in Houses abated (30)	...	...	...	42
Wells cleansed and puddled	...	...	...	6
New Wells sunk	...	...	...	8
Pumps and Hydrants repaired	...	...	...	12
Number of Houses connected with the Doncaster Watermains in Balby, Hexthorpe, and Wheatley	...	...	...	1207
Ditto ditto in Barmbrough 42, Harlington 18, supply	...	...	...	60



W.C.'s provided for New Houses. . . . .	12
"    "    "    Old    "    . . . . .	1
Privies and Ash-pits New Houses . . . . .	242
Additional ditto ditto, for Old Houses... . . . .	4
Pigs and Manure Nuisances abated . . . . .	10
Plans considered . . . . .	92
Plans for Dwelling-houses . . . . .	449
Ditto ditto Other Buildings and Alterations . . . . .	24
New Man-holes provided to Sewers . . . . .	6
Old    "    repaired and altered . . . . .	12
Additional Flushing Chambers provided . . . . .	1
New Ventilating Shafts for Sewers . . . . .	8
New Conisbro' Water Mains laid . . . . .	700 yards
Number of Inspections of Houses made with reference to the Compulsory Notification of Infectious Disease . . . . .	180
Cow-sheds on the Register . . . . .	167
Slaughter-houses inspected . . . . .	16
Number of houses in Conisboro' 1310, Hex- thorpe 458, Wheatley 436 ; the ashpits for each house in these parishes are cleansed every three months under the supervision of this Authority . . . . .	2204
Dangerous buildings closed . . . . .	2

List of Parishes in which new sewers and drains have  
been laid or new houses erected :—

	New Sewers.	New Drains.	New Houses
Conisboro' . . . . .	1260	940	126
Bolton-on-Dearne & Gold- thorpe . . . . .	1137	816	49
Hickleton . . . . .	972	...	...
Sprotboro' . . . . .	400	12	...
Adwick-on-Dearne . . . . .	...	200	10
Loversall . . . . .	140	...	...
Bentley . . . . .	120	84	4

Askern .....	110	...	80	...	4
Braithwell .....	105	...	...	...	...
Thurnscoe .....	100	...	...	...	5
Balby .....	75	...	108	...	6
Hexthorpe ... ..	...	...	50	...	32
Norton .....	72	...	...	...	...
Campsall .....	70	...	...	...	...
Armthorpe .....	10	...	...	...	...
Adwick-le-Street .....	...	...	112	...	...
Denaby .....	...	...	10	...	..
Kirk Bramwith .....	...	...	10	...	...
Wheatley .....	...	...	180	...	12
Cantley.. .....	..	...	60	...	4
Loversall, 1 Screen Chamber for Sewage and 3 man-holes.					
Thurnscoe, 1 Screen Chamber for Sewage.					
New Streets made and completed	...	...	...	...	3
Wells new ... ..	...	...	...	...	7
„ cleansed ... ..	...	...	...	...	4
„ closed ... ..	...	...	...	...	2



TABLE A.

*Table of Deaths during the Year 1894, in the Rural Sanitary District of Doncaster, classified according to Diseases, Ages, and Localities.*

Names of Localities adopted for the purpose of these Statistics ; public institutions being shown as separate localities.	Mortality from all causes at subjoined ages.							Mortality from subjoined causes, distinguishing deaths of Children under 5 years of age.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
	At all Ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 60.		65 and upwards.	Small-Pox.	Scarlatina.	Diphtheria.	Membranous Group.	Fevers.						Erysipelas.	Measles.	Whooping Cough.	Diarrhoea and Dysentery.	Rheumatic Fever.	Ague.	Phthisis.	Bronchitis, Pneumonia, & Pleurisy.	Heart Disease.	Injuries.	All Other Diseases	Total.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
Barnbrough Sub-Registration Dis.	79	25	3	3	2	31	15	Under 5 5 upwds.	...	...	...	Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...</

The subjoined numbers have also to be taken into account in judging of the above records of mortality.

[illegible]



*Table of Population, Births, and of New Cases of Infectious Sickness, coming to the knowledge of the Medical Officer of Health, during the year 1894, in the Rural Sanitary District of Doncaster; classified according to Diseases, Ages, and Localities.*

Names of Localities adopted for the purpose of these Statistics ; public institutions being shown as separate localities.	Population at all Ages.		Registered Births.	Aged under 5 or over 5.	New Cases of Sickness in each Locality, coming to the knowledge of the Medical Officer of Health.										Cases Removed, &c. to Isolation Hospitals.		
	Estimated in 1894.				Small-pox.	Scarlatina.	Diphtheria.	Membranous Croup.	Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas.	Small-pox.	Enteric Fever.
Barrabrough Sub-Dist.	4618	145	Under 5 5 upwds.	...	3	...	...	2	...	1	...	3	...	2	...	...	
Bawtry	6642	179	Under 5 5 upwds.	1	14	5	...	...	7	...	...	1	...	...	1	...	
Campsall	5253	145	Under 5 5 upwds.	...	1	8	...	...	...	...	...	1	...	...	...	...	
Tickhill	14019	341	Under 5 5 upwds.	1	53	1	...	...	10	...	...	26	...	1	3	11	
				...	94	6	...	...	30	...	...	...	...	...	19	26	
Totals .....	30532	1010	Under 5 5 upwds.	2	55	1	...	...	10	...	...	31	...	2	5	11	

“ Notification of Infectious Disease ” is compulsory in the District since 1st March, 1890.  
Hospital for Infectious Cases provided in Denaby ; 1 case was treated in the Hospital of the Doncaster Corporation.



TABLE I.

STATISTICS FOR THE RURAL SANITARY DISTRICT AND  
REGISTRATION SUB-DISTRICTS DURING 1894.

	Rates per 1,000 of the Population.				Deaths under one year to every 1000 Births.	Percentage of Deaths among persons 65 years of age and upwards.
	Births.	Deaths.	Deaths from Zymotic Diseases.	Deaths from Respira- tory Diseases.		
The Rural Sani- tary District..	33.0	15.8	1.7	3.4	131	21
Barmbrough....	31.3	17.1	0.8	5.8	172	18
Bawtry .....	26.9	10.9	0.4	2.5	78	39
Campsall .....	27.6	14.6	0.1	3.4	131	36
Tickhill .....	38.5	17.5	3.2	2.9	136	13

TABLE II.

BIRTH AND DEATH RATES IN THE LARGEST PARISHES  
DURING THE YEAR 1894.

Parishes.	Popula- tion, 1894.	Rates per 1000.				Deaths under one year to every 1000 Births.	Percent- age of Deaths among persons 65 years of age and up- wards.
		Births.	Deaths.	Deaths from Zymotic Dis- eases.	Deaths from Respira- tory Dis- eases.		
Askern .....	593	20.2	13.4	..	3.3	166	25
Balby-with-Hex- thorpe.....	4600	41.5	15.6	1.7	3.2	94	25
Barnby Dun.....	516	31.0	11.6	1.9	1.9	125	33
Bawtry .....	947	25.3	20.0	..	7.3	125	26
Bentley-with-Arksey.	1948	28.7	12.8	0.0	3.0	160	32
Bolton-on-Dearne ..	1328	26.3	8.2	1.5	3.7	142	..
Cantley .....	547	29.2	9.1	0.0	0.0	125	60
Conisboro'.....	5618	43.2	21.1	4.9	2.8	172	5
Denaby .....	1798	29.4	17.7	4.4	2.2	226	6
Finningley .....	328	33.5	24.5	0.0	3.0	181	50
Misson .....	574	24.3	8.7	0.0	0.0	..	80
Norton .....	500	40.0	20.0	2.0	4.0	150	40
Wadworth.....	561	32.0	10.6	0.0	3.5	..	16
Wheatley .....	1906	32.0	9.4	1.0	2.0	65	33

TABLE III.

## DENABY ISOLATION HOSPITAL.

NO. OF CASES TREATED DURING 1894.

Disease from which Patients Suffered.	Jan.	Feb.	March	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Died.	Re- covered.
Small-pox .....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	1
Scarlet Fever ..	.....	.....	.....	.....	.....	.....	20	14	3	.....	.....	.....	1	36
Enteric Fever ...	4	.....	1	.....	.....	.....	.....	.....	2	2	6	9	2	22
Total .....	4	.....	1	.....	.....	1	20	14	5	2	6	9	3	59











GOOLE

RURAL SANITARY AUTHORITY.



# Goole Rural Sanitary Authority

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POPULATION, CENSUS 1891	...	...	8,977
ESTIMATED POPULATION IN 1894	...	...	8,977
AREA IN ACRES	...	...	42,097

THE SUB-REGISTRATION DISTRICTS ARE.—

	POPULATION.	AREA IN ACRES.
GOOLE RURAL	1,410	9,105
SNAITH	3,950	13,687
SWINEFLEET	3,617	19,305

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TO THE GOOLE RURAL DISTRICT COUNCIL.

GENTLEMEN,

I have now to present my annual report prepared in accordance with the instructions of the Local Government Board.

After an inquiry held in the autumn, an order was made separating the parishes of Luddington and Garthorpe from the Goole Union to a new District Council in Lincolnshire, for sanitary purposes. This report, however, deals with all the matters considered last year, in the district before the alteration.

Population.

The population of the whole district at the census of 1891 was 8,977.

Up to the middle of last year, there had been no amount of house building to indicate any increase in the population, but in the coming year the houses for which the plans were recently passed at Rawcliffe, will, if occupied, materially increase the number in that parish.

Birth & Death  
Rates.

There were 278 births registered last year—males, 144 females, 132; the birth rate was 31 per 1000; that agrees closely with the average rate of the previous ten years.

In the Snaith sub-district the birth rate was 35·4 per 1000.

„ Swinefleet	„	„	27·0	„
„ Goole Rural	„	„	28·0	„

In the parish of Rawcliffe the birth rate was 42, in Luddington it was 45, in Swinefleet 32, and in Hook 33.

The new trades started within the last few years at Rawcliffe Bridge has brought there a considerable number of young married people ; both in Hook and Swinefleet are found many of the same class who work at Goole, whereas the high birth rate in the purely agricultural village of Luddington is exceptional.

The deaths registered in the rural districts were 150—males, 64 ; females, 86 ; 7 deaths of persons belonging to the rural districts who died at the workhouse have to be added ; the corrected number, 157, is equal to a death rate of 17·6 per 1000, which has also been the average death rate for the previous 10 years.

In the Swinefleet sub districts the death rate was 14·3 per 1000.

„ Goole rural	„	„	„	13·5	„
„ Snaith	„	„	„	21·7	„

In the parish of Luddington the death rate was 25 per 1000, in East and West Cowick it was also 25, in Snaith it was 23·4, in Hook it was 21.

The special reason for the heavy mortality in Luddington will be named in reporting upon the recent epidemic there. The average death rate in Snaith is just over 20 per 1000, which is far higher than the situation of the village with its dry sand subsoil would lead us to expect ; and yet both in Snaith and Cowick, which is similarly favoured, the death rate from diseases of the lungs last year was more than double the average rate for the whole district.

From zymotic or infectious diseases there were 13 deaths ; 3 occurred in the Goole Rural, 3 in the Snaith, and 7 in the Swinefleet sub-districts.

4	were caused by scarlet fever.
3	„ whooping cough.
2	„ enteric fever.
2	„ measles.
1	„ diphtheria.
1	„ diarrhoea.

The death rate for these was 1·4 per thousand, which is about the average rate ; in Luddington deaths from diseases in this group equalled 8·6 per thousand ; in Hook it was 5·8.



From all diseases of the lungs there were 27 deaths, equal to a rate of 3 per 1000; the average for a number of years has been 4 in the whole Snaith sub-district it was 5 per 1000 last year.

Among children under one year the deaths were in the proportion of 143 per 1000 births; the average rate is 150, which must be considered unnecessarily high in a agricultural district. In Luddington there was the same number of infants died last year as occurred in Swinefleet and the latter place has  $2\frac{1}{2}$  times more population.

Rather more than one third of all the deaths during the year were among children under 5 years of age, and 28 per cent. were persons who had reached the age of 65 years or over.

11 deaths were registered on a certificate from the Coroner. 8 of these were accidental deaths (6 from drowning), and 3 were due to natural causes.

Cases of Infectious Diseases Notified.

44 notifications of cases of infectious disease were received last year.

34 were cases of scarlet fever.

6 „ diphtheria.

2 „ enteric fever.

2 „ erysipelas.

29 of these cases were reported from the parishes in the Swinefleet sub-districts, 9 from those in the Snaith, and 6 in Goole rural parishes.

Cases of scarlet fever were unusually prevalent throughout the district last year, but during 4 months the disease was especially rife and severe in Luddington.

24 cases were reported there, but the inquiries made into the origin of these showed that many other cases occurred, and because medical aid was not called in no information of the illness was received.

Neglect of Notifying by House-holders.

It needs to be repeated that every householder is responsible under the Notification of Infectious Diseases Act for sending notice of every such case in his house, and that there is a penalty incurred by neglecting to give the information. It is a mistake to think that the medical practitioner is alone responsible; his certificate is accepted as sufficient of itself, but the householder must



notify if no doctor is called in. After many enquiries into cases of fever I have rarely met with such utter indifference to the risks of spreading infection as were met with last year in Luddington. A case of illness seemed to attract neighbours rather than to warn them off; very slight attempts were made—if made at all—at isolating the patient, and the rule was to find them being nursed in the kitchen. One child died before medical aid was called in, an inquest was held, and the cause of death returned as “malignant scarlet fever.” Several of the unreported cases were mild, but during the prevalence of an epidemic the illness of those I enquired into was characteristic of scarlet fever, and most parents might have suspected what it was. Unfortunately, the distance to the fever hospital at Goole—10 miles—was too far for the parents to willingly allow the children to be removed. When the disease was rife very frequent visits were made by Mr. Tudor and myself to Luddington; handbills were issued, giving information as to notifying cases and warning everyone against carelessness which would spread the infection; clothing was disinfected by stoving and rooms lime-washed. Two cases of scarlet fever were treated at the Hospital from other parishes in the district.

Outbreak of  
Scarlet Fever at  
Luddington.

The 4 deaths caused by scarlet fever occurred in Luddington; the death rate was 10 per cent of the persons attacked, as probably 40 cases were ill. That death rate is nearly twice the usual average. The cases of scarlet fever in other parishes were as a rule single isolated ones; in Rawcliffe, however, it was found afterwards that one unreported case accounted for a few that occurred there; three were found after having been evidently ill five weeks, and then accidentally detected. The two cases of enteric fever reported died; there was no spread of the disease from either.

There were six cases of diphtheria notified, but a death was also registered from measles and diphtheria. Four cases broke out in one family; one died; the history there was that often found in cases of diphtheria, viz., a child kept at home a few days with a supposed cold and sore throat; others taken ill with a more serious illness which the doctor finds to be diphtheria. These cases occurred at an isolated house. Three others broke out in separate houses in Hook, one appeared as having originated in Goole, and was removed to the Hospital there.

Cases of  
Diphtheria.



Cases of measles are not notified, but that disease was very prevalent in Reedness and Swinefleet, and there were also a number of cases in Hook. Inquiries were made in each district, but the disease in Reedness and Swinefleet spread very rapidly, and it was considered necessary to close the Schools there for a few weeks.

#### Sewers.

The increase of houses at Rawcliffe Bridge called for the laying of a new main sewer. This sewer, 940 yards in length, has been laid in the main road, to it are connected the branch sewers from the estate recently laid out.

For the groups of new houses near the railway station, a new sewer is necessary, a committee visited the district and decided what should be done, the work, however, has not yet been begun.

#### Pollution of streams.

The plan agreed upon for the drainage of the village of Rawcliffe has been under the consideration of the Board of Trade for several months. I again reported the results of analysis made of the water turned from the 'pulp works into the Dobella drain. The pollution was considerable, 300 yards above where the liquid is discharged into that drain the water was distinctly acid in reaction and the total solid matter per gallon was three times the usual amount in the water in the drain. Complaints were made on more than one occasion of refuse from a Brewery polluting a stream at West Cowick; inquiries were made and the facts being reported, a notice was served requiring more effectual means to be provided for purifying the sewage before it reaches the stream.

After several meetings in Swinefleet, the Sanitary Authority instructed Mr. Tudor to prepare a scheme for draining the village, and so prevent the nuisance complained of arising from the sewage being discharged into open ditches.

That scheme was considered at a local Inquiry held by an Inspector of the Local Government Board. After receiving his report, that Department suggested that another scheme should be prepared which would allow of a better fall for the sewers.

This matter was adjourned owing to the separation of Swinefleet and Reedness districts.

The actual work of last year consisted in re-laying about 300 yards of old sewers in 11 parishes where these had become



locked up, but in all the parishes the open ditches which frequently receive sewage, have been cleansed, these together measure several miles in length.

The several new works and alterations to sewers carried out, have been followed by the re-laying and improvement of several private drains. 570 yards of new sewers have been laid by private owners. Cesspools removed from near houses have been replaced by properly trapped gullies.

Several reasons have prevented the work of supplying Hook with water from the Goole mains being begun. The health of this township will be better protected when a sufficient supply of wholesome water is obtained. Last year the death rate was 21. per 1000. There are also many cowsheds and dairies, and it is essential for those carrying on the trade of milk selling that they should have a free use of wholesome water. While inspecting several of these premises from which milk is sold at Airmyn, it was seen that the water had to be carried a long way, and a recommendation was made that the village main should be extended; that has since been carried nearer to the houses in question. Water supply.

Last year the water from two wells sunk near Rawcliffe station was analysed; in both cases the water was found to be unfit to use. It contained considerable traces of iron, and in addition one was heavily charged with other impurities. It is proposed to supply the new houses on the Bridge road from wells, and the analysis of the water from one of these wells just completed is not satisfactory.

I think that as the works for the water supply for Goole are at Rawcliffe Bridge, and as the parish of Rawcliffe is included in the district which can be supplied, the only reliable water for the houses which are now seeking a supply there, is to be had from the Goole service. It would only mean a comparatively short length of new main being laid, and the number of houses which now and will immediately require good water, would soon make that outlay a profitable one. 9 wells are said to have been cleansed last year, but that work very rarely succeeds in restoring a polluted water to a satisfactory degree of purity. The source of the previous impurity is in the ground surrounding the well, from which also the supply of the



water is obtained, therefore, to cut off all the impurities by effecting work at the well would too often mean stopping the supply. To sink a new well in a well chosen situation at a point furthest from any likely source of impurity, such as cesspools, ashpits, fold yards, and all such like, will prove, in the very great majority of cases, the most satisfactory method of providing and keeping a wholesome water supply. Throughout the whole of the parishes in the Swinefleet sub-district, rain water is used for drinking and generally for cooking. Should the increased supply now being carried out for Goole prove abundant, Swinefleet might look to obtain water on far more reasonable terms than was originally proposed. A dry season means in the Marshland districts great scarcity and cost in obtaining the least needful supply.

Scavenging.

In two parishes—Swinefleet and Snaith, the cleansing of Ashpits and other refuse is carried out by contract, the work is done at short intervals. At Swinefleet there are 35 pail closets not of a satisfactory type, but both in Swinefleet and Snaith the old middle type of closet is common; at Snaith there are still several closets with cesspits below the floors. The removal of manure from many of the cowsheds is rather neglected. Mr. Tudor reports the general condition of the 54 cowsheds as follows:—"Many of them are imperfectly drained, arising chiefly from the need of main sewers, the floors would then be in a better condition. The ventilation is improved, but it is often impeded by the cowkeepers, notices to lime wash are frequently given, owing to the condition in which the sheds are kept by the occupiers."

Cow sheds.

Five houses were condemned as being in such an insanitary condition as to be unfit for human habitation. One case had to be taken before the Magistrates who confirmed the action of the Sanitary Authority. Three other houses were reported as being damp and unhealthy for want of spouting.

Sewers

v.  
Drains.

Plans for 105 houses were passed last year, the drainage for these caused the Sanitary Authority to consider the case lately decided at Halifax as to the definition of the word sewer, and following upon it the responsibility of the Authority as to keeping and maintaining drains for private houses. The Sanitary Authority decided that each house must have a separate junction to the sewer.

Other details of the year's work is given in the following table drawn up by Mr. Tudor.

I remain, Gentlemen, Your Obedient Servant,

J. MITCHELL WILSON, M.D.

MEDICAL OFFICER OF HEALTH.

GOOLE, 30th JANUARY, 1895.



INSPECTIONS MADE, WORK CARRIED OUT, AND NUISANCES ABATED  
DURING 1894.

Number of Inspections made	...	...	...	...	535
Number of Nuisances found	...	...	...	...	191
Number abated after written Notice	...	..	...	...	139
Main Drainage taken up and re-constructed	...	...	...	...	289 yards
New Main Drains laid	...	...	...	...	940 yards
Houses connected with New Sewers	...	...	...	...	38
House Drains examined and cleansed	...	...	...	...	64
Newly-constructed House Drains	...	...	...	...	43
New Gullies provided	...	...	...	...	28
Sinks disconnected	...	..	...	...	2
Cesspools removed and Pot Gullies substituted	...	...	...	...	20
Old Privies and Ashpits re-constructed	...	...	...	...	12
Privies (new)	...	...	...	...	12
Houses cleansed, lime-washed, and disinfected after infectious diseases	...	...	...	...	30
New Houses and other Buildings, plans passed for	...	...	...	...	105
Lodging Houses Inspected	..	...	...	...	4
Slaughter Houses cleansed and lime-washed	...	...	...	...	14
Wells cleansed	...	..	...	...	9
Cow-shed and Dairies Inspected	...	...	...	..	54
Other Nuisances abated, referring to the removal of Manure, &c.	...	...	...	...	92
Village Water Courses cleansed	...	..	...	about 8¼ miles	
Number of Notices requiring better Water supply	...	...	...	...	10
Pig-sties removed	...	...	...	...	8
Houses condemned as unfit for human habitation	...	...	...	...	5

E. C. B. TUDOR,  
SURVEYOR AND INSPECTOR.





TABLE A.

TABLE OF DEATHS, during the year 1894, in the Rural Sanitary District of Goole, classified according to Diseases, Ages, and Localities.

NAMES of LOCALITIES adopted for the purposes of these statistics; public institutions being shown as separate localities.	Mortality from all causes at subjoined ages.							Mortality from subjoined causes, distinguishing deaths of Children under Five Years of Age.																			
	At all Ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 60.	60 and upwards.	Small-Pox.	Scarlatina.	Diphtheria.	Croup.	Enteric or Typhoid	Puerperal	Measles.	Diarrhoea.	Whooping Cough.	Erysipelas.	Rheumatic Fever.	Ague.	Phthisis.	Bronchitis and Pneumonia.	Heart Disease.	Injuries.	All other Diseases.	Total.		
Goole Rural Sub-Registration District.....	17	3	5	1	3	5	5	Under 5 5 upwds	..	1	..	1	..	1	..	1	..	..	..	1	..	..	..	1	2	8	
Snaith do. ....	83	23	7	1	3	26	23	Under 5 5 upwds	..	..	..	..	..	..	1	2	..	..	1	..	6	8	6	..	118	30	
Swinefleet do.....	50	14	4	3	2	16	11	Under 5 5 upwds	..	3	..	..	..	1	..	..	..	..	..	1	3	1	..	..	13	18	
Totals.....	150	40	16	5	5	45	39	Under 5 5 upwds	..	3	1	1	..	2	1	3	..	1	..	1	7	9	..	233	56		
The subjoined numbers have also to be taken into account in judging of the above records of mortality.																											
Deaths occurring outside the District among persons belonging thereto.	4	.....	.....	.....	.....	.....	.....	Under 5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
		.....	.....	.....	.....	.....	.....	4 5 upwds	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	4	4	



TABLE B.  
TABLE OF POPULATION, BIRTHS, and of NEW CASES of SICKNESS coming to the knowledge of the Medical Officer of Health, during the year, 1894, in the Rural Sanitary District of Goole; classified according to diseases, Ages, and Localities.

NAMES OF LOCALITIES.	Population at ages.	Registered Births.	Aged under 5 or over 5.	New Cases of Sickness in each locality, coming to the knowledge of the Medical Officer of Health.						Number of cases removed from their homes in the several Localities for treatment in Isolation Hospital.		
				Small-Pox.	Scarlatina.	Diphtheria.	FEVERS.			Small-Pox.	Scarlatina.	Diphtheria.
	1894.						Enteric or Typhoid.	Puerperal	Erysipelas			
Goole Rural Sub-Registration District	1410	41	Under 5 5 upwds	.. ..	.. 2	.. 3	.. 1	.. ..	.. 1	.. ..	.. 1	.. 1
Snaith do. ....	3950	140	Under 5 5 upwds	.. ..	2 6	.. ..	.. ..	.. ..	.. 1	.. ..	.. ..	.. ..
Swinefleet do. ....	3617	98	Under 5 5 upwds	.. ..	11 29	1 3	.. 1	.. ..	.. ..	.. ..	.. 1	.. ..
Totals.....	8977	278	Under 5 5 upwds	.. ..	13 37	1 6	.. 2	.. ..	.. 1	.. ..	.. 2	.. 1

Notification of Infectious Diseases compulsory since 1st December, 1889.  
Isolation Hospital in Goole Urban District.

SELBY  
RURAL DISTRICT COUNCIL.

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1894.

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SELBY :  
W. H. SPENCER, PRINTER, BOOKSELLER, &c.  
1895.





# SELBY RURAL DISTRICT COUNCIL.

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## ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1894.

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POPULATION IN 1894	...	...	...	...	9,263
AREA IN ACRES	...	...	...	...	53,341

SUB-REGISTRATION DISTRICTS :—					POPULATION.	AREA IN ACRES.
CARLTON	...	...	...	...	2,261	13,741
SELBY	...	...	...	...	3,876	21,570
RICCALL	...	...	...	...	3,126	18,030

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### TO THE SELBY RURAL DISTRICT COUNCIL.

GENTLEMEN,

I have now to present to you my Report for the year 1894, regarding the Health and Work carried out by the old Rural Sanitary Authority. It has been prepared in accordance with the instructions of the Local Government Board.

This Report deals with the whole undivided district of the old Rural Sanitary Authority, but special reference will be made to the Parishes which now form a new district.



Area and  
Population.

The area of the Selby Rural Sanitary undivided district was 52,975 acres, with a population at the Census of 1891 of 9,253. That district included 19 parishes in the West Riding; area, 34,870 acres; population, 6,137, and 8 parishes in the East Riding, with an area of 18,105 acres, and a population of 3,126.

The portion situated in the West Riding now forms the Selby Rural District Council, and the parishes in the East Riding have been formed into the Riccall Rural District Council.

As the result of an inquiry held recently, 144a. 2r. 2p., with an estimated population of 165, previously within the parish of Brayton, were added to the Local Board district of Selby. That change did not come into operation until the end of 1894, and will not effect the statistical returns in this report.

The Selby Rural Sanitary Authority began its work in 1874, and since then the yearly reports have recorded the measures taken to safeguard the health of the inhabitants.

Of the 27 parishes included in the district at the last Census, one had a population exceeding 1,000,

	There were	5	with a population between	500	and	1,000
		7		300	and	500
and		14				under 300

The district is one in which the inhabitants are, with few exceptions, engaged in agricultural pursuits.

The sanitary state of each part of the district has year by year been inspected and unsanitary conditions taken notice of, equally at the isolated cottage as in the large villages. The alterations ordered to be carried out by the Sanitary Authority have been only such as would either remove conditions injurious to health or provide what was required to secure a reasonable degree of protection against preventible disease. Since the notification of cases of infectious disease was adopted in 1890, every such case has been visited, inquiries have been made as to the source of the infection, how far the immediate surroundings of the case would effect the illness, and detailed advice given as to the best means to prevent the disease spreading to others. The returns of the deaths and the amount of infectious sickness show how far the work is being successful.



During 1894 I have taken the population as remaining unaltered since the Census of 1891, viz.:—9,253.

257 births were registered last year—males, 122 ; females, 135. The birth rate was 27 per 1,000.

Birth and  
Death Rates.

In the Selby Rural Sub-District the birth rate was 29 per 1,000

„ Carlton	„	„	25·6	„
and Riccall	„	„	27·5	„

Throughout the whole rural districts there were 136 deaths registered—males, 63 ; females, 73 ; 3 deaths of persons belonging to the rural districts, who died at the Workhouse in Selby, have to be added ; the total number, 139, was equal to a death rate of 15·0 per 1,000.

In the 2 West Riding Sub-Districts the death rate was

Selby Rural	...	...	...	18 per 1,000
in the Carlton	...	...	...	12·8 „
and the East Riding or Riccall Sub-District				

the death rate was ... 13·7 „

As a standard by which to compare last year's returns the following are the average death rates for the 10 years, 81-90

In the Selby Rural Sanitary District it was 16·4 per 1,000

„ Selby Sub-District	„	16·5	„
„ Carlton	„	18·7	„
and „ Riccall	„	15·1	„

In several parishes the death rates last year exceeded the general average, *e.g.*, in the Selby Sub-District, it was 38 for Barlow, 22 for Brayton, and 18 for Cawood.

In the Riccall Sub-District the rate at Cliffe was 23·4 per 1,000, for Riccall it was 11, and at Kelfield and Barlby only 7 per 1,000.

These figures are merely the results for a single year, and returns from among small populations are very readily affected by even one or two deaths. The population among whom the deaths occur have an unusually large proportion of persons living at and over 65 years of age.

In every 1,000 persons living in the Selby Rural Districts at the last Census period 78 were aged 65 or over ; in the whole of the West Riding of Yorkshire the proportion of such aged



persons was 28 per 1,000. It does not have the same serious significance when a death rate exceeds the general average if one half of all the deaths occurred among persons at least 65 years of age. At Cawood, Carlton, Chapel Haddlesey, and Hambleton that proportion of aged persons died, and at Cliffe and Riccall there was one third.

The deaths in the zymotic class of diseases were 5, and the death rate was but 0·5 per 1,000.

2 of these were caused by whooping cough.

1 „ was from diphtheria.

1 „ „ enteric fever  
(A very doubtful case).

1 „ was from diarrhoea.

From phthisis or consumption there were eight deaths, and from other forms of disease of the lungs there were 21 ; together, the death rate from these was 3·1 per 1,000. There was scarcely any difference in the rate in any of the sub-districts.

In the parishes of Barlby, Brayton, and Hambleton deaths from these causes equalled 4 per 1,000 ; in Carlton and Riccall, 5 per 1,000 ; and in Cliffe, 6 per 1,000.

Among infants under a year the deaths equalled 132 per 1,000 registered births.

In the Riccall Sub-District the proportion was 127.

„ Carlton „ „ „ 120.

„ Selby „ „ „ 140.

In 8 cases the cause of death was returned as “not certified,” 11 cases were registered on the Coroner’s certificate, 6 of this last group were found to be due to natural causes, and 5 were due to some form of accident.

During 1894, 51 notifications of cases of infectious disease were received.

Cases  
of Infectious  
Disease reported

40 reported cases of scarlet fever.

3 „ „ enteric fever.

2 „ „ diphtheria.

5 „ „ erysipelas and

1 was a case of puerperal fever.

28 of these occurred in parishes in the East Riding, and 23 in parishes in the West Riding.



The cases of scarlet fever were prevalent throughout the year, but one half broke out in February and March. The cases were many of them so slight as to escape detection until friends or servants who had associated with the previous case were found ill at their own homes with the rash of scarlet fever, while the earlier case was then found in the later stages of peeling. Mr. Christie during one of his visits to a school detected that state of peeling in a scholar. Two new cases followed in that scholar's house, and three others in the near neighbourhood. The infection was clearly traceable in six instances as having been brought into these districts from outside.

The disease was confined to one case in 22 houses. A second case followed in two families, in two families there were three cases, and in two families there were four cases. On one day three in one house were reported, and on another occasion four in one house.

The two undoubted cases of enteric fever occurred in houses near to each other, but after an interval of 8 months. Although to be expected no common cause for the disease could be traced.

Two cases of diphtheria were notified. One of these was preceded in the house by a supposed case of simple sore throat. The disease was certainly infectious, for three others in the family and three neighbours who had visited the house were all attacked with similar illness in a mild form. The details of each of the cases notified and the advice given to the parents, together with a report upon the sanitary condition of the premises, were read at the monthly meeting of the Sanitary Authority.

At Cliffe, many of the school children were attacked with measles, and it was considered necessary to close the school for four weeks.

The question of providing a hospital for infectious cases was again discussed and adjourned until the new District Councillors were elected. If some provision were made in conjunction with other authorities in a central situation, the whole Union District would be better protected against the spread of infection, for there is no village in the Union which may not have infection carried into it from a near neighbour, and all are interested in checking these outbreaks in their earliest stages.



The work of the Rural Sanitary Authority has been referred to in the earlier part of this report; to record year by year the length of sewers provided and other details of work done, if not seemingly very important, yet when totalled up, say at the end of 10 years, the amount shews that the actual wants of the district have been considered and in part provided for.

During the last 10 years the Sanitary Authority caused 4,300 yards of new sewers to be laid in the several parishes, and also re-laid 3,000 yards of old sewers. In addition, the condition of these sewers have in a sense been in the care of the Guardian of each parish and any defects brought promptly to the knowledge of the Inspector.

These sewers have been provided or re-laid so that a better means of drainage, with trapped gullies and properly disconnected sinks might be substituted at private houses in place of many foul cesspools and similar nuisances.

Private owners have carried out the requirements of the Sanitary Authority during the same 10 years by providing over 7,000 yards of private drains. This work is not yet completed, several parishes, such as Carlton and Cliffe, are as yet but imperfectly provided with sewers, and extensions are needed in other districts.

The work of last year in this department consisted of improving several of the existing sewers, and 1,000 yards of private drains were newly provided or re-laid.

There are good reasons for the complaints made by landlords when required to take up and make good drains which the careless tenant has allowed to get blocked. It is but reasonable that drains with gullies having been put down, the tenants using these should be required to keep them in a usable condition.

The water supply of the whole district is a question constantly before the Sanitary Authority. On an average 12 new wells have been made every year during the last 10 years, in addition to a very large number of old wells which have been cleansed, deepened, and better protected against fouling of the water from the surroundings of the well. An increasing number of wells have been bored to a greater depth than the ordinary made wells. The new red sandstone rock exists at varying depths over the greater part of the whole union, and from it a fair wholesome water supply can be obtained by the process of boring.



The so-called cleansing of old wells from which the water has been found to be polluted is nearly always very disappointing work. The cause of the impurity is not in the well itself but in the ground surrounding it, and to remove all that earth which has probably been long soaked with the matter which has escaped from a cesspool, drain, ashpit, or manure heap is about equal in labour and expense to that of sinking a new well, and the latter work is more likely to provide a wholesome supply of water.

Of 16 samples of water analysed last year 11 were found to be so polluted as to be unsafe to drink. Seven of these had been in use in parishes in the East Riding, and four in the West Riding. Four of these wells were said to have been cleansed but with no improvement in the quality of the water. Five samples were fairly satisfactory as compared with the best water obtainable in the district; three of these wells are in West Riding Parishes, and two in the East Riding.

As to the storage of house refuse, the effect of the work of Scavenging, etc. the Sanitary Authority can be gathered from an extract from Mr. Christie's report for last year:—"15 privies and ashpits have been removed, having been too near dwellinghouses, and 21 new closets provided." The removal of all such refuse is left to the householder, with very little cause to complain.

Urban powers under sections 42, 44, and 157 of the Public Health Act, 1875, and section 23 of the Public Health Acts Amendment Act, 1890, were conferred upon the Sanitary Authority, and came into force on the 13th August last. These apply to the whole district of the Rural Sanitary Authority. The adoption of bye-laws under these powers so far as they relate to new streets and buildings was adjourned so that the new District Councillors might consider them. Certificates were given for the closing of three houses where the sanitary conditions were so defective as to make them uninhabitable.

Urban Powers  
Conferred.

There are 31 dairies and cow-sheds on the register, 17 in the West Riding, and 14 in the East Riding. These have been inspected and found in a fairly satisfactory state; as a rule only a few cows are kept in each shed, often only one.

Mr. Christie in his report on the 20 canal boats inspected last



year states that he found no cause of complaint the regulations being complied with. No women nor children were found living on the boats, and no case of infection was found among the men.

I remain, Gentlemen,

Your obedient Servant,

J. MITCHELL WILSON, M.D.,

Dip. Public Health, Cambs.,

MEDICAL OFFICER OF HEALTH.

SELBY, 28th Jan. 1895.

TABLE I.

TABLE SHEWING PARTICULARS OF NUISANCES ABATED AND SANITARY  
WORK DONE IN THE SELBY RURAL DISTRICT DURING  
YEAR 1894.

Number of inspections made...	...	...	...	...	...	323
Number of nuisances found ...	...	...	...	...	...	131
Number of notices served ...	...	...	...	...	...	76
Number of water notices served ...	...	...	...	...	...	13
Old drains lifted and re-laid by Sanitary Authority ...	...	...	...	...	...	331 yds.
New drains laid by private owners ...	...	...	...	...	...	496 „
Old drains lifted and re-laid by private owners...	...	...	...	...	...	581 „
Open dyke deepened ...	...	...	...	...	...	500 „
Old drains and water courses cleansed ...	...	...	...	...	...	3360 „
New privies and ashpits built ...	...	...	...	...	...	21
New box closets ...	...	...	...	...	...	4
Privies converted into box closets ...	...	...	...	...	...	1
Old privies removed from dwelling-houses...	...	...	...	...	...	15
New bored wells ...	...	...	...	...	...	1
New brick wells ...	...	...	...	...	...	1
Old wells deepened and repaired ...	...	...	...	...	...	9
Rain water cisterns in lieu of wells ...	...	...	...	...	...	1
New pumps ...	...	...	...	...	...	1
Old pumps repaired ...	...	...	...	...	...	3
New cesspools ...	...	...	...	...	...	7
Old cesspools filled up ...	...	...	...	...	...	7
New gullies ...	...	...	...	...	...	27
Sinks disconnected...	...	...	...	...	...	5
Canal boats inspected ...	...	...	...	...	...	20
Cow-sheds inspected ...	...	...	...	...	...	31
Samples of water taken...	...	...	...	...	...	16

*The many Cesspools and Gullies in the respective Parishes in this Union have been frequently cleansed during the year. The open Dykes have also been attended to, some of them having been deepened.*

T. CHRISTIE, Inspector.



TABLE II

STATISTICS FOR THE RURAL SANITARY DISTRICT AND THE SUB-REGISTRATION DISTRICTS, 1894.

UNION AND SUB-DISTRICTS.	RATE PER 1,000 OF THE POPULATION.				Deaths under 1 to every 1,000 Births Registered.	Percentage of Deaths in Persons aged 65 years and over.
	Births.	Deaths.	From Zymotic Diseases.	From Respiratory Diseases.		
Rural Sanitary District ...	27.7	15.0	0.5	3.1	132	39
Carlton Sub-District...	25.6	11.9	0.8	3.5	120	44
Riceall-Sub District ...	27.5	13.1	0.3	3.1	127	36
Selby Sub-District ...	29.1	17.5	0.5	3.0	102	38

TABLE III.  
 AVERAGE BIRTH AND DEATH RATES IN THE WHOLE DISTRICTS AND SUB-  
 REGISTRATION DISTRICTS, DURING THE 10 YEARS, 1881-1890.

RATES PER 1,000 OF THE AVERAGE POPULATION.	
	Births. Deaths. Zymotic Diseases. Respiratory Diseases.
Rural Sanitary District... ..	30·4 16·4 1·6 3·1
Carlton Sub-District ... ..	32·2 18·7 1·5 3·5
Riccall Sub-District ... ..	30·4 15·1 1·2 2·9
Selby Sub-District... ..	29·2 16·5 2·0 3·1



TABLE IV.

BIRTH AND DEATH RATES IN THE LARGEST PARISHES, DURING 1894.

PARISHES.	POPULATION.	RATES PER 1000 OF THE AVERAGE POPULATION.				
		Births.	Deaths.	Zymotic Diseases.	Respiratory Diseases.	Deaths under 1 year per 1000 Births.
Barby ... ..	442	31·6	6·7	0·0	4·5	0·0
Brayton ... ..	509	27·5	21·6	0·0	3·9	285
Carlton .. ...	759	23·7	10·5	0·0	5·2	111
Cawood... ..	1008	23·8	17·8	0·0	3·9	0·0
Cliffe ... ..	640	15·6	23·4	1·5	6·2	200
Hambleton ... ..	489	34·7	16·3	0·0	4·4	116
Riccall ... ..	736	32·6	12·2	0·0	5·4	125
Wistow... ..	674	32·6	10·3	0·0	1·4	136





TABLE B.

TABLE of POPULATION, BIRTHS, and of NEW CASES of SICKNESS coming to the knowledge of the Medical Officer of Health, during the year 1894, in the Rural Sanitary District of Selby; classified according to Diseases and Localities.

NAMES OF LOCALITIES.				New Cases of Sickness in each Locality coming to the knowledge of the Medical Officer of Health.											
				Fever.											
Population at all ages, Census, 1891.				Registered Births.				Aged under 5 or over 5.				Smallpox.			
												Scarlatina.			
Carlton Sub-District ... ..				Under 5 5 upwards.				Diphtheria.				Membraneous Croup.			
Riccall Sub-District ... ..				Under 5 5 upwards.				Enteric or Typhoid.				Continued.			
Selby Sub-District... ..				Under 5 5 upwards.				Puerperal.				Cholera.			
Totals ... ..				9263				257				Under 5 5 upwards.			

*Notification of Infectious Disease is compulsory in the district since 1st December, 1889.*  
*There is no Isolation Hospital in or used by the Sick of the district.*

TADCASTER  
RURAL DISTRICT COUNCIL.

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1894.

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SELBY :  
W. H. SPENCER, PRINTER, BOOKSELLER, &c.

1895.





# TADCASTER RURAL DISTRICT COUNCIL.

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## ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1894.

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POPULATION AT CENSUS, 1891	...	...	25,977
ESTIMATED POPULATION IN 1894	...	...	26,726
AREA OF DISTRICT IN ACRES	...	...	72,865

### REGISTRATION SUB-DISTRICTS :—

#### ESTIMATED POPULATION.

	1894.	AREA.
ABERFORD ... ..	16,586	29,859
APPLETON ROEBUCK ... ..	5,504	25,038
TADCASTER ... ..	4,636	17,968

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### TO THE TADCASTER RURAL DISTRICT COUNCIL.

GENTLEMEN,

I have now to present to you my annual report, prepared in accordance with the instructions of the Local Government Board.

This report deals with the health of the district and the sanitary work carried out during the past year by the Rural



Population  
and Area of the  
District.

Sanitary Authority, but it will also contain recommendations for work yet needed which concerns the newly-elected District Council.

The district has not been altered in Area by the new legislation, it corresponds exactly with the area of the Union as there is no Urban District within its boundaries. For registration purposes the district is divided into 3 sub-districts, viz.:—Aberford, with an estimated population of 16,586, living on 29,859 acres, which is equal to 1·8 acres to each inhabitant. Appleton Roebuck sub-district has a population of 5,504 and 25,038 acres, which is equal to 4·5 acres to every person. The third is the Tadcaster sub-district, the estimated population is 4,636, and the area is 17,968 acres, which is equal to 3·8 acres for each person.

These figures are of importance in considering the death rate in each district, and how far sanitary work can lessen the effects of the generally excepted law, that the closer people live to each other there is a natural tendency for a higher death rate to prevail among them.

In the Aberford sub-district are the townships of Allerton Bywater, population 2,405; Barwick-in-Elmet, 2,503; Garforth, 2,645; Kippax, 2,844; Great and Little Preston including Bower's Rows, 1,626; Micklefield, 1,188; and Swillington, 900.

In each of these districts there are parts where the inhabitants live rather more under the conditions existing in small towns than in what is usually considered a country district.

Each of these townships mainly consist of a population employed in mining work.

In the Appleton district there are the townships of Sherburn, population 1,860, and South Milford, 1,060, but the population of these differs in no way from the general agricultural character of the rest of the sub-district.

In the Tadcaster sub-districts the town of Tadcaster with its population of 2,790 is the only centre where there is any special trade carried on—brewing—the rest of the district includes small agricultural villages.

At the census of 1871 the population of the union was 21,080, during the next 10 years it had increased to 23,955, and during the following 10 years to 1891 the population had further increased to 25,977. Naturally the increase had been chiefly in the colliery villages.

Up to the middle of 1894 I estimate the population to be 26,726, and the following calculations of the birth and death rates during the year 1894 are calculated from that population.

Births.

There were 929 births registered last year, males 455, females 474. The birth rate was 34·7 per 1,000 of the population.

The birth and death rates for any one year require some standard of comparison. I have full particulars of these in the



Tadcaster districts from 1875 to 1894, the average birth rate of these 16 years was 34 per 1,000, so that the rate for 1894 is in excess of the general average, and nearly 2 per 1,000 above the birth rate of 1893.

In the Aberford sub-districts the birth rate was 36·2 per 1,000.

In several of the townships in that sub-district the birth rate exceeded the general average considerably, thus in Allerton Bywater the births equalled 53 per 1,000, in Kippax 42·5, in Great and Little Preston 43·6, while in Garforth and in Micklefield the birth rate was about 30 per 1,000.

In the Tadcaster sub-districts the birth rate was 33, in the township of Tadcaster it was 34·4.

In the Appleton sub-districts the birth rate was 31·7, in South Milford it was 44, and in Sherburn 35.

The total number of deaths registered during the year were 447—males, 241; females, 206. The death rate was 16·7. The average death rate of the last 16 years was 18 per 1,000. During the first half of these years the average death rate was 18·6, and during the latter half the average was 17·4. There has therefore been a reduction of over 1 per 1,000 during recent years and the rate for 1894 is below that improved average rate. Spread over a period of 8 years a lessened death rate of 1·2 per 1,000 among a population of 26,000 is equal to 250 fewer deaths during these years.

Deaths.

In the Aberford sub-districts the death rate was last year only 15·8, the average for the last 3 years was under 16. Taking the longer period of 16 years for comparison the death rate for the whole period was 18, during the first 8 years 18·7, and during the latter 17, showing a very satisfactory lessening of nearly 2 per 1,000.

The death rate last year in Allerton Bywater was greatly in excess of that prevailing in the rest of the district, it was nearly 26 (25·7) per 1,000. The causes of this excess will be noticed afterwards. On the other hand the death rate in Barwick township was only 10, in Garforth under 13 (12·8), and in Kippax 16. These townships have close upon the same numbers of population.

In the Appleton sub-districts the death rate last year was 19 per 1,000, as compared with 17·8 the average rate of the 16 years. In these districts the death rate has been but little influenced when the earlier half of those years is compared with the latter.

In South Milford the death rate was 22·5, in Sherburn 18·8 during 1894.

In the Tadcaster sub-districts the death rate last year was 17·8 per 1,000; the 16 years' average was 18·7, the average of the earlier 8 years was 19·4, of the latter 8 years it was 18. In Tadcaster township the deaths last year equalled 20 per 1,000.



The deaths at the workhouse have been distributed to the parishes from which the inmate was sent.

Last year 49 deaths were registered from the list of diseases known as zymotic, or better known as infectious.

Deaths  
from Zymotic  
Diseases.

17 were caused by whooping cough.			
7	"	"	measles.
7	"	"	scarlet fever.
5	"	"	enteric or typhoid fever.
1	"	"	continued fever.
6	"	"	diarrhoea.
4	"	"	diphtheria.
2	"	"	membraneous croup.

The death rate from these was 1·7 per 1,000.

In the Aberford and Appleton sub-districts that rate was 1·9, in the Tadcaster only 0·8 per 1,000.

In several townships outbreaks of these diseases has been accompanied with many fatal cases, *e.g.*, in South Milford the death rate from zymotic diseases was 5·7, in Allerton Bywater 5, in Kippax, Micklefield, and Sherburn just over 2 per 1,000.

The average death rate in this group has been lessened by 1 per 1,000 throughout the whole district. The reduction has been greatest in the Aberford sub-districts; less in the Tadcaster districts, and but slight in the Appleton.

Diseases  
of the Lung.

From phthisis or consumption there were 31 deaths equal to a death rate of 1·1 per 1,000, from other forms of disease of the lungs there were 76 deaths equal to a death rate of 2·8, together the rate from these was 3·9, in this group there is a slight reduction on the average rate of previous years. 5 deaths were registered in the early part of last year from influenza, and these cases were associated with some form of disease of the lungs.

In several parishes many young children have been carried off by various forms of diseases of the lungs. In Allerton the death rate in this group was 5·8, in Great and Little Preston 5·5 per 1,000.

Deaths at  
different Ages.

Throughout the whole district 135 infants under 1 year died per 1,000 registered births. In Micklefield the proportion was 222, in Allerton, 210, and in Kippax 181.

23 per cent. of all the deaths were among persons who had reached the age of 65 years or over; in the Appleton districts every third death was of such an aged person; in the Tadcaster districts 26 per cent.; and in the Aberford only 18 per cent. were among the aged.

39 deaths or 8 per cent. of the total for the year were returned on certificates from the coroner. 12 of these were returned as due to natural causes, 21 as caused by accidents, 3 persons were found drowned, and 3 were cases of suicide. Only 1 death was uncertified.



## Cases of infectious disease reported :—

	1894.	1893.	1892.	1891.	1890.	Cases of Infectious Disease notified.
Scarlet fever ...	82	122	26	83	151	
Enteric or typhoid fever	21	45	18	11	19	
Continued fever	5	2	—	3	5	
Puerperal fever	1	6	2	1	1	
Diphtheria ...	11	10	3	3	6	
Membraneous croup	5	—	2	1	3	
Erysipelas	10	21	9	14	7	
Small-pox	—	8	—	1	—	
Cholera	—	2	—	—	—	
Totals ...	135	316	60	117	192	

The table above gives a comparative statement of the number of cases of infectious disease which have been reported in each year since the act was adopted.

Last year the total number of cases notified was 135.

82 of these reported were cases of scarlet fever. Among these there were 7 deaths, the death rate was therefore 8·5 per cent. of the persons attacked. The 82 cases occurred in 13 parishes, 30 cases were notified from Tadcaster, 20 from Aberford, and 10 from Garforth, the remainder were chiefly isolated cases in several parishes. Scarlet Fever.

On the whole the notification Act has been and is being carried out satisfactorily in the Tadcaster districts. The exceptions are where the householder having a case of infectious illness in his house with no medical man in attendance forgets that he is also and equally liable to send notice of the case, in fact the householder is at all times as liable as the medical attendant to send the notice, only the former is excused when the latter is called in.

Ignorance or neglect of this fact has resulted last year and repeatedly in previous years of cases of scarlet fever being traced to families where children had been ill but not reported. These had been sent again to school at the end of 3 weeks or a month, when not actually free from infection and following upon their return a fresh crop of cases occurred.

In Aberford, both in April and in June, inquiries as to the cases notified brought to light others which were said not to have been suspected as cases of fever, from these houses children had freely mixed with others and had also attended the school.

It is difficult to accept the statement in these days that mothers have no idea of the illness known as scarlet fever. Other notifications have been long in being received owing to doubts as to the real nature of the illness. The occurrence of a second case in the family decides the point, the disease is then notified and so, 3 and 4 certificates have been received from one house at the same time.

But it is certain that we do not get to know all the cases that occur, for repeatedly no possible clue can be found other than



infection from some suspected but unreported case in the near neighbourhood.

In October last 5 families in Tadcaster were attacked within a few days and no actual source of infection could be ascertained.

As happens every year the infection of scarlet fever was repeatedly traced to infection brought into these districts. The means of disinfection used, viz., by the soaking of all bed clothing in a disinfecting solution, and stoving the sick room with every infected article left in it are not all that is required, but at present judging by the fair proportion of cases where the disease is confined to one house the results are not altogether unsatisfactory.

Only one case of scarlet fever was removed to the hospital, the chief reason why other cases were not isolated there was, that, while the greatest number of cases of scarlet fever were ill, the wards of the hospital were occupied with cases of typhoid fever; the present arrangements do not permit of two different diseases being treated there at the same time.

Cases of scarlet fever were very prevalent during the first 4 months of 1894, but only 3 cases were reported during the months of November and December last.

Diphtheria  
and  
Membranous  
Croup.

Of the 11 cases of diphtheria notified, 10 occurred in the parish of South Milford, 4 deaths were registered there from that disease.

2 cases were reported in February, the second was a child who had been taken into the first infected house by its mother. In June a death occurred at a house where a previous death from the same disease took place 12 months before. To make the history more complete I may here note that in September 3 cases were notified as membranous croup in the same village 2 of these sufferers had been to see the corpse of a child who was certified as having died of acute laryngitis.

Both these children died, and the third was a brother who took ill, a week after the illness began in the house.

With this history I venture to say that diphtheria would probably more accurately describe the nature of the illness in all of these four cases.

In the last week in December no less than 7 cases in 6 houses of diphtheria were notified in South Milford. In 3 of these houses there was a similar history of one child suffering from a supposed cold, and within a week a younger child being attacked with diphtheria, the elder and first attacked were children attending the school. No diphtheritic patches were seen, however, in these cases. The question of sanitary arrangements will be noted in reporting upon the drainage of the village.

The only case of diphtheria outside South Milford was a boy taken ill while recovering from an attack of scarlet fever.



I have already noted 3 of the 5 cases notified as membranous croup. 2 others were in villages widely apart and not traceable to any direct cause other than cold.

21 cases of enteric or typhoid fever were notified from 10 parishes. In 7 of these only one case occurred; in 2 parishes, a second case followed, but in the parish of Sherburn there were 10 cases. Enteric Fever.

5 deaths were registered from this fever, so that the death rate was 24 per cent. of the persons attacked, which is a high rate of mortality. One of these deaths followed after only 3 days' illness, and may be considered a doubtful case. 2 women were taken ill of this fever very soon after they had been confined. In both cases the sanitary conditions about their homes were very unsatisfactory, although no case of typhoid fever had recently occurred near to them.

2 patients had contracted the disease outside these districts, while 3 others had been nursing similar cases of illness before they took ill. At Sherburn, however, there were ample proofs of the infection being communicated to others, for 8 of the 10 cases broke out in houses either in or close to the same yard from which cases had been removed to the hospital during the last 4 months of the previous year. In reporting upon these cases I drew attention to the foul leaking state of the ashpits in yards. On the cases recurring this year another report was made, and an order requiring a removal of all the existing nuisances, the cleansing and repair of every house, a better system of house drains, and paving of the yard, was sent to the owners by the Sanitary Authority. Much delay in carrying out that work took place through the property changing hands, and during that time fresh cases of fever occurred. 5 of these were removed to the hospital at Garforth, and all recovered. 2 deaths took place among patients unable to be removed. 2 cases in another part of the township could not be traced to the previous cases, but were also associated with serious nuisances near to their houses, caused by large open and leaking ashpits. Inquiries were carefully made as to other likely causes for these cases. There never was any question of the milk supply, but the water supply must be again referred to. The steps taken in removing some of the cases, in thoroughly disinfecting the houses and the important sanitary improvements carried out were successful in preventing any further cases, as there has been none since June last.

The 5 cases of continued fever were children affected with simple fever, probably increased by the over-crowded and often dirty condition of their homes. The only case of puerperal fever was reported from the Workhouse.

Cases of measles and whooping cough are not on the list of infectious diseases to be notified. Last year both diseases were very rife in the parishes of Garforth, Kippax, Allerton, Mickle-

Measles  
and Whooping  
Cough.



field, and Aberford. The deaths from these exceeded all that were caused by every other form of infectious disease. 22 children under 5 years of age died from measles and whooping cough. The latter disease caused 15 of these deaths, due in many cases to the children having been attacked soon after having recovered from illness due to measles. Illness caused by either of these complaints receives far too little attention, and the fatal result is due more to the want of ordinary care to protect the sufferers from the very great danger of them getting a chill than to sanitary deficiencies in or about their homes. The same want of care encourages the spread of the diseases until such a large proportion of the children in attendance at the schools are affected as to necessitate their closing for a few weeks.

In dealing with each of the cases of infectious disease referred to in this part of the report I would like to repeat that in addition to the steps taken directly for controlling the spread of the disease, a detailed inquiry is made into all the existing sanitary surroundings of the case. From this work many alterations of the water supplies, the house drainage, the closet accommodation, and repeatedly the abatement of over-crowded houses are brought about.

In addition to these special inquiries, a more extensive inspection of the district is kept up, and the recommendations made have been carefully considered by the Sanitary Authority.

**Water Supply.** The condition of the water supply in several districts has very often been anxiously dealt with.

The extensive scheme for supplying Allerton, Preston, Kippax, Garforth, and Swillington Common has, during the past year, not given satisfaction, and those who would have been new consumers have been greatly deterred in obtaining the water, owing to the discoloration and insufficiency of the supply from Castleford.

Similar complaints have been made at Crossgates and Stanks of a defective supply obtained from the Leeds mains after passing through Seacroft. There is, however, every probability of an effectual remedy being carried out there shortly.

**Micklefield.** The supply for Micklefield has long been unsatisfactory, and the only reply from the Colliery Company, who are the responsible owners, is that some means of filtration is about to be provided. The work should be completed without delay, as the result will have to be reported upon, whether the proposed method will render the water in all respects wholesome.

For the better supply of East Tadcaster, a scheme was proposed for obtaining water from the Wharfe. An inquiry was held by an Inspector of the Local Government Board.

On receiving his report, the Department, however, declined to sanction the proposal, and recommended that a more extensive



scheme to provide for both East and West Tadcaster townships should be considered.

Following upon the receipt of that letter, the Guardians for West Tadcaster accompanied the Sanitary Inspector and myself, making a house to house inquiry as to the existing supply.

Tadcaster.

It was found that a very large proportion—168 out of 276 houses visited—have no supply on their own premises, but are indebted to owners of wells in the neighbourhood. Several of the wells used were considered as only supplying water suspicious in quality. The Sanitary Authority ordered 6 well waters to be analysed; 3 were reported as being polluted and unsafe to drink, 2 were found to be satisfactorily pure but containing a large amount of salts of lime. During the inquiry, we were told by over 40 householders that they obtained the supply of water for drinking from one or other of the breweries.

2 of the wells found to be polluted have since been cleansed and more carefully protected against pollutions from their surroundings.

In East Tadcaster a very earnest endeavour was made by Mr. Lankaster to obtain a better supply by boring near the river; so far as the work has gone the water obtained is not satisfactory. The average death rate in the combined townships of Tadcaster for the last 16 years has been 19 per 1,000. There is both a softer and purer water supply now pumped by the large brewers than the best of the existing wells afford. One of these was analysed, and to substitute a better supply would in some measure help to reduce the present unnecessarily high death rate.

Sherburn.

During the past 2 years a considerable amount of infectious disease has prevailed at Sherburn. The death rate for the last 4 years has averaged almost 22 per 1,000. The cost of maintaining the patients suffering from fever at the hospital has been considerable. In addition to the serious sanitary defects reported in connection with the outbreak of fever in the early part of last year, the existing water supply at Sherburn is very far from satisfactory. There is a large number of householders who pay either 1d. per week or 1/- yearly to neighbours for the privilege of obtaining water from their wells. That water has to be often carried a long distance. These wells are sunk to a great depth in the fissured magnesian limestone formation, and the surroundings of privies and ashpits on such strata is very likely to add dangerous impurities to the well waters. If there is any doubt that a better supply is required for Sherburn I should advise that a similar house to house inquiry be made as was done last year at Tadcaster, and the facts obtained submitted to the District Council. In several other parishes the water supply from wells has been improved, chiefly by works intended to prevent any pollution reaching the water. 7 new wells have been sunk with every care to obtain a good water. I have analysed 10 well waters, 4 of these were reported as satisfactory.



A considerable number of wells have been cleaned out, and greater care taken to protect the water against being polluted.

Reports have been made to the Sanitary Authority regarding the work of purifying the sewage where suitable means have been provided.

Sewage disposal.  
Crossgates.  
Kippax.  
Sherburn,

The sewage of Crossgates has been fairly well purified on the land laid out there. At Kippax and Sherburn the results have not been so satisfactory, mainly because the first and chief object of the work, viz., the purification of the sewage, has not been sufficiently considered. The new arrangement proposed for letting the land at Kippax will, it is expected, remove any cause for complaint.

Garforth.

The experiment of purifying the sewage of Garforth by means of filtration through peat, produced a very satisfactory effluent when the works were regularly attended to.

In considering a further trial and extension of that work at Garforth, the whole time of one workman should at least be required.

New Micklefield.

The filtration of the sewage of New Micklefield by artificial filter beds of sand, coke, &c., has not been sufficient to purify the sewage; the effluent has at times been very offensive and quite like untreated sewage. The colliery would relieve themselves of the worry of the notices of complaint frequently sent by the Sanitary Authority if they would consider and carry out some scheme for real purification of the sewage by filtration through properly prepared agricultural land.

Aberford.

The experiment tried at Aberford of collecting the sewage in cesspools and pumping it out at intervals of a few weeks has never been a success. Complaints have repeatedly been received. As the result of again considering this matter both at Aberford and at the Sanitary Meeting it has been decided to complete the scheme originally proposed, which will do away with the cesspools, the sewage to be conveyed to land direct. The Sanitary Authority have also instructed the Inspector to prepare a plan of the best means of dealing with the sewage of Scholes and Stanks, hamlets which are increasing in population.

Preston.

The sewage of Great Preston and that from the houses in Preston Lane, Kippax, has been the cause of several complaints; the present method of dealing with sewage there in foul cesspools is a positive danger to the increasing number of persons living near. A far more effectual means of removing and purifying it is needed.

Allerton.

It would be very desirable for the new District Councillors to consider how the sewage of Allerton is to be dealt with. Fresh houses with more cesspools, or the sewage discharged into others, which are not regularly cleansed, has occurred last year. The death rate in Allerton is year by year considerably above the average rate for the whole of the Aberford sub-districts. The



situation of both Allerton village and the part between the bridges is very low and close to the river Aire, which causes the air to be often very offensive. There is the greater need for the removal from near the houses in the village of all liquid offensive sewage.

For 2 years the death rate of South Milford has exceeded 20 per 1000. The continuance of cases of diphtheria there throughout nearly the whole year has caused some anxiety as to its sanitary condition. The water supply is obtained from wells, and the few I have analysed showed the water to be passable. It is nearly 20 years since a scheme for draining the village was decided upon and submitted to an engineering inspector of the Local Government Board. Instead of the scheme suggested being carried out some improvements were carried out by a parochial committee. Old brick sewers were replaced with sanitary pipes. Recently the Sanitary Authority ordered the sewer in Low Street to be flushed and the street grates to be trapped, and since the last outbreak of diphtheria that sewer is to be opened out and a report made upon its condition.

South Milford.

The Inspector reports that the scavenging of night-soil and ashes continues to be regularly carried out with few complaints in the districts of Allerton and Kippax. The cleansing is done every 3 months. I can speak of the marked difference in the condition of the closets and ashpits since the work was let to a contractor. In districts where the tenants remove the refuse no less than 269 notices had to be served last year through the neglect of this work.

Scavenging of  
Ashpits at  
Kippax and  
Allerton.

34 houses situated in 6 parishes were certified as being unfit to be occupied. The chief reasons were the house walls being saturated with wet from bad construction and the floors being below the level of the adjacent ground. Again, want of ventilation, air space around the buildings, and filthy sanitary conditions close to the houses. Among other houses inspected some of these defects have also existed, and the smallness of the bedrooms has repeatedly caused a notice to be served in order to abate over-crowding, but the houses in themselves are fit to be inhabited.

Houses  
condemned.

The District Council has now urban powers in the townships of Allerton Bywater, Barwick, Garforth, Kippax, Micklefield, Sherburn, South Milford, and Tadcaster, and plans for 129 houses were passed, after being carefully compared with the bye-laws. Outside these special districts there are no bye-laws to control the building of houses, so that the same defective construction as has been the cause of the 34 houses being condemned last year may be repeated. I would strongly advise that the Tadcaster District Council make application that their present urban powers be made to apply to the whole district. There is no sound reason why every house which it is proposed to build should not conform to that reasonable standard of

Urban powers  
needed for the  
whole Union.



sanitary perfectness which is now required by the existing bye-laws. Under the Local Government Act of 1894 it is the evident intention of the Local Government Board to apply these powers by a general order rather than receiving a special application and increased powers in this direction are now conferred upon the County Councils.

Workshops.

The workshops visited, that of tailors, dressmakers, builders, etc., did not call for more than an explanation of the requirements of the Act. There were found no over-crowding nor conditions likely to affect the health of the workers.

Sanitary  
Inspector's  
Report.

Following upon this report, the Sanitary Inspector has given a full and detailed list of all the sanitary work carried out last year. His report year by year of a large amount of sanitary improvements carried out and supervision of the sanitary state of the whole district, shows the great increase of the work and the greater consideration it now receives from the Sanitary Authority and by householders in every part of the district. The statement in the earlier part of this report of the lessened death rate may fairly be looked upon as part of the good results which sanitary improvements can bring about.

I remain, Gentlemen,

Your obedient Servant,

J. MITCHELL WILSON, M.D.,

Dip. Public Health, Cambs.,

MEDICAL OFFICER OF HEALTH.

TADCASTER, 28th Jan. 1895.

TABLE SHEWING PARTICULARS OF NUISANCES ABATED AND SANITARY  
WORK DONE DURING 1894.

Number of inspections made during the year—nuisances...	1,405
Number of Inspections of New Buildings ... ..	237
"          "          Cow Sheds ... ..	164
"          "          Lodging Houses by night ...	8
"          "          Slaughter Houses ... ..	22
Nuisances found requiring abating ... ..	528
Notices served by Inspector ... ..	566
Number of Notices served from the Rural Sanitary Authority ... ..	111
New Drains laid ... .. yards	3,961
House Drains disconnected ... ..	29
New Trapped Gullies provided ... ..	205
Old do. do. cleansed and repaired ... ..	72
Old Drains cleansed and repaired ... .. yards	137
Open Drains and Water Courses cleansed ... .. yards	1,447
New Privies, Ashpits, and Earth Closets built ... ..	7 6
Old do. do. repaired ... ..	143
Do. do. do. removed ... ..	61
New Water Closets and old ones repaired and ventilated...	25
Privies and Ashpits cleansed out after notice ... ..	269
Cesspools, new, ... ..	8
Do. old, cleansed or removed ... ..	27
Houses whitewashed and cleansed ... ..	41
Do. disinfected after Zymotic Disease ... ..	105
Do. overcrowding, abated ... ..	11
Do. repaired and ventilated ... ..	58
Pigstyes removed from against dwelling houses ... ..	10
Manure heaps removed, found to be a nuisance ... ..	13
New Wells sunk ... ..	7
Wells cleansed and Pumps repaired ... ..	38
Rain Water Tanks made and repaired ... ..	6
Cowsheds and Dairies on the Register ... ..	158
Do. do. altered ... ..	10
Do. do. whitewashed after notice ... ..	17
Plans passed for New Houses ... ..	129
Plans passed for other buildings and new street ... ..	34
Canal Boats inspected... ..	44
Do. requiring painting, cleaning, or repairs ... ..	4
Do. without registration certificate... ..	3
Do. without name plate ... ..	2
Urinals provided for licensed houses ... ..	2
Other Nuisances abated ... ..	50

HODGSON DENHAM, *Inspector,*



(A)

TABLE I

TABLE OF DEATHS during the year 1894, in the Rural Sanitary District of Tadcaster; classified according to Diseases, Ages, and Localities.

Mortality from all causes at subjoined ages.										Mortality from subjoined causes, distinguishing deaths of Children under Five years of age.																						
NAMES OF LOCALITIES adopted for the purpose of these Statistics; public Institutions being shown as separate localities.	(a)	(b) At all ages.						(c) Under 1 year.	(d) 1 and under 5.	(e) 5 and under 15.	(f) 15 and under 25.	(g) 25 and under 65.	(h) 65 and upwards.	(i)	FEBERS.																	Total
		Small-pox.	Scarlatina.	Diphtheria.	Membranous Croup.	Typhus.	Enteric or Typhoid.								Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas.	Measles.	Whooping Cough	Diarrhoea, and Dysentery.	Rheumatic Fever	Ague.	Phthisis.	Bronchitis, Pneumonia, and Pleurisy.	Heart Disease.	Injuries.	All other Diseases			
ABERFORD ... (Sub-registration district)	259	94	43	11	9	55	47	Under 5 upwards	2	1	1	...	2	...	...	...	...	...	7	14	2	...	4	...	3	31	1	3	71	137		
APPLETON ROEBUCK ... (Sub-registration district)	100	13	14	10	3	27	33	Under 5 upwards	2	3	1	...	2	...	...	...	...	...	1	...	1	...	1	...	6	11	5	5	18	27		
TADCASTER ... (Sub-registration district)	78	19	8	7	5	21	18	Under 5 upwards	1	...	...	...	1	...	...	...	...	...	...	...	...	1	...	...	7	5	...	1	19	27		
WORKHOUSE ...	15	...	...	...	1	7	7	Under 5 upwards	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	2	...	7	15			
Totals ...	452	126	65	28	18	110	105	Under 5 upwards	5	3	2	...	5	...	...	...	...	...	7	15	1	...	3	...	4	36	1	5	108	191		
Persons not belonging to the district ...	5	...	...	...	...	4	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	1	5			



(B)

TABLE II.

TABLE OF POPULATION, BIRTHS, and of NEW CASES of INFECTIOUS SICKNESS coming to the knowledge of the Medical Officer of Health, during the year 1894, in the Rural Sanitary District of TADCASTER; classified according to Diseases, Ages, and Localities.

NAMES OF LOCALITIES adopted for the purpose of these Statistics; Public Institutions being shown as separate localities.	Population at all ages.		Registered Births.	Aged under 5 or over 5.	New Cases of Sickness in each Locality coming to the knowledge of the Medical Officer of Health.										Cases Removed.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
	Census, 1891.	Estimated 1894.			Small-pox.	Scarlatina.	Diphtheria.	Membraneous Group.	FEVER.								Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas.	Scarlet Fever.	Enteric Fever.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
ABERFORD ... .. (Sub-registration district)	15,920	16,586	601	Under 5 5 upwards.	16 26	..... .....	2 2	..... .....	1 9	..... .....	4 4	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... .....	..... 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.....	..... .....	.....

No case originated at any Public Institution.

Notification of Infectious disease is compulsory in the district since 1st December, 1890. Hospital provided in the parish of Garforth.

\* Number of such Cases Removed from their Homes in the several Localities for Treatment in Isolation Hospital.



TABLE III.

STATISTICS FOR THE RURAL SANTIARY DISTRICT AND THE SUB-REGISTRATION DISTRICTS, 1894.

UNION AND SUB-DISTRICTS.	Population in 1894.	RATE PER 1,000 OF THE POPULATION.				Deaths under 1 to every 1,000 Births Registered.
		Births.	Deaths.	From Zymotic Diseases.	From Respiratory Diseases.	
Rural Santiary District ...	26,726	34.7	16.7	1.7	4.0	135
Aberford ... ..	16,586	36.2	15.8	1.9	4.2	156
Appleton Roebuck ... ..	5,504	31.7	19.0	1.9	3.6	74
Tadcaster ... ..	4,636	33.0	17.9	0.8	3.6	124

TABLE IV.

BIRTH AND DEATH RATES IN SEVERAL OF THE LARGEST TOWNSHIPS, DURING 1894.

TOWNSHIPS.	ESTIMATED POPULATION 1894.	RATES PER 1000 OF THE AVERAGE POPULATION.				
		Births.	Deaths.	Zymotic Diseases.	Respiratory Diseases.	Deaths under 1 year per 1000 Births.
Allerton-Bywater, Township of	2405	53.2	25.3	4.9	5.8	210
Barwick,                   "	2503	23.5	10.3	0.3	1.5	118
Garforth               "	2645	29.8	12.8	1.1	3.7	113
Kippax                 "	2844	42.5	16.1	2.1	4.5	181
Micklefield           "	1188	30.3	14.3	2.5	2.5	222
Great and Little Preston "	1626	43.6	15.3	1.8	5.5	112
Sherburn              "	1859	35.0	18.8	2.1	4.3	74
South Milford       "	1064	44.1	22.5	5.7	1.8	85
Tadcaster             "	2790	34.4	20.0	1.4	4.6	156
Swillington           "	912	31.7	15.3	1.0	3.2	137





**GOOLE**

**URBAN SANITARY AUTHORITY.**



GOOLE

URBAN SANITARY AUTHORITY

# Goole Urban Sanitary Authority.



# GOOLE

## URBAN DISTRICT COUNCIL.

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### ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1894.

POPULATION IN 1891	...	...	15,413
ESTIMATED POPULATION IN 1894			16,466
AREA IN ACRES	...	...	1,332

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### TO THE GOOLE URBAN DISTRICT COUNCIL.

GENTLEMEN,

I have now to present my annual report prepared in agreement with the instructions of the Local Government Board.

There is more than usual interest attached to this the first report to the District Council, as it also records the health and sanitary condition of the town during the 20th year of the existence of the Local Board.

Every yearly report has told of some work carried out to safeguard the health of the inhabitants, but it is chiefly during later half of the existence of the Local Board that the results of their labours could be noted in the lessening of the death rate and the control of cases of preventible disease.

I propose to give some statistics as to the health of the town during recent years as compared with the conditions before sanitary improvements had begun to have much effect.

Population.

The present area of the town is 1332 acres, the estimate of the population up to the middle of last year was 16,466. The density is therefore nearly 13 persons to each acre. The population has more than doubled since the formation of the Local Board. In 1875 it was estimated as 8,700, so that as the area of the town has been unaltered, the density has also been greatly increased.



It is a well-proved fact that the closer aggregation of houses upon any given area means an increase of the risks of unsanitary conditions to those living there. But the population is very far from being evenly distributed over the whole district. In those parts of the town first erected, the houses were closely built together with very insufficient air space, and their arrangement so faulty that there are great hindrances to the free circulation of air near to the houses. Before the bye-laws of the Board had come into force, groups of houses were erected in the newer parts of the town also closely crowded on a small space. The inhabitants of these houses live more under the conditions found in densely built portions of our large cities.

The houses built under the existing bye-laws were required to have a free air space at the rear, but in very many cases that space has been built upon, and all that is now left is a narrow strip at the side of the latest additions to the original building.

All these facts are of importance when we consider the health of the town during recent years.

In November last an order was made to divide the Local Board district into six wards. No local census was taken, so that I am unable to give any indications of the prevailing birth and death rates in these wards as compared with those for the whole town.

I have estimated the population to the middle of last year at 16,466, or the same as estimated for the previous year. There have not been the signs of any increase of new buildings, but rather an increased number of empty houses.

Last year there were 590 births registered—males, 302 ; females, 288 ; that number is less than those for the year 1893. The birth rate last year 35·8 per 1,000.

Births.

From 1875 to 1884, the average birth rate in Goole was 40 per 1,000 ; from 1885 to 1894 the birth rate was 38. It is necessary to note the following facts regarding the birth rate throughout the whole of England and Wales during the two periods. During the first 10 years, the average of the birth rate was 34·8 per 1,000, but during the last 10 years it has fallen to 31 per 1,000. The birth rate in Goole during recent years although lower has not fallen in the same proportion as that of the whole country.

In 1894, 325 deaths were registered in Goole—males 166, females 159. There was therefore an apparent increase of the population by the excess of births over the deaths of 265, but probably there were removals equal to that number from the town. Among the 325 deaths there were 13 registered at the Workhouse, the Cottage Hospital, or on ships of persons belonging to other districts.

Deaths.



It has been usual to deduct the deaths of these strangers and calculate the death rate on the lessened number. Thus last year from 312 deaths the rate was just under 19 per 1,000.

Death rates

During the first	quarter	the death rate was	16	per 1,000
„	second	„	it was	14'0 „
„	third	„	„	14'8 „
„	fourth	„	it reached	33'0 „

The cause of that excessive mortality during the fourth quarter will be noted immediately, but the result was to raise the death rate for the whole year by 4 per 1,000.

During the first 10 years that there are complete statistics for the district of the Goole Local Board, i.e., from 1875 to 1884, the average death rate was 21 per 1,000; from 1885 to the end of last year the average death rate was just under 18 per 1,000—17'8. If we make a similar comparison for the whole of England and Wales we find that the death rate during the earlier ten years was 20'4, and during the latter, 18'7 per 1,000. The reduction throughout the whole country was 1'7 for the last ten years, in Goole it was 3'4, from 21'2 to 17'8. The real importance of these figures can be clearly understood if the results are stated as follows. If the reduction of the death rate in Goole had not taken place during the last 10 years, but had continued as a little over 21 per 1,000, and the average number of the population had been 14,000, then there would have occurred 470 deaths, above the number which actually took place. It is equally true that there must have a very large number of non-fatal cases of sickness prevented, for many persons are sick and recover for each one who dies.

The favourable death rate in Goole must be considered, however, along with the fact that the population has but a very small percentage of aged persons, among whom the death rate, apart from all sanitary matters, is always high. There is also an unusually high proportion of young children up to five years of age, and as that class contribute nearly one half of all the deaths, it is among them that there is yet great need to bring about a reduction of the death rate.

Deaths at different ages.

Last year among children living under 5 years, the death rate was equal to 70 per 1,000, whereas among those living between 5 and 15 years, the death rate was less than 7 per 1000. What an enormous gain if the lives of very young children could be better safe-guarded.

In 1894 the proportion of deaths in children under one year was 150 per 1,000 registered births, the average has been 146 so that the greatest mortality was among children over one year and under 5.



There were 58 deaths registered from zymotic diseases.

21	were caused by measles,	20	were under 5 years
20	" " whooping cough,	19	" "
6	" " diphtheria,	2	" "
3	" " scarlet fever,	1	was "
4	" " diarrhoea,		all under 5 years
2	" " croup,		
1	" " enteric fever,		under 5 years
1	" " puerperal fever		

Deaths from  
Zymotic  
diseases.

The death rate was 3.5 per 1,000 while the 10 years average rate was 2.2, for the first 9 months of last year these deaths were less than 1 per 1,000, for the last quarter it was nearly 11 per 1,000.

29 deaths were last year caused by phthisis or consumption, equal 1.7 per 1,000. 12 of these were males, the average age at death was 31 years, 17 were females of an average age of 28 years. This is a disease which is largely preventible, and everything which is done to provide free and ample air space outside the dwelling house, and good ventilation and lessened overcrowding inside the house and workshops will all help in reducing the death rate from consumption, from which 29 persons were last year carried off at an age when life was from every consideration most valuable and useful.

Phthisis and  
Consumption.

From other diseases of the lungs such as bronchitis, &c., there 44 deaths, equal to a death rate of 2.8 per 1,000.

27 deaths were registered on the Coroner's certificate. 7 were caused by drowning, 9 by other accidents, and 11 were due to natural causes.

During 1894, 126 cases of infectious disease were notified:—

61	were cases of scarlet fever.
10	" " enteric "
2	" " puerperal "
20	" " diphtheria.
3	" " membranous croup and
30	" " erysipelas.

Cases of infec-  
tious disease  
notified.

The 61 cases of scarlet fever occurred in 49 houses, in 42 houses there was only one case of fever, there was a second case in two houses, there were three cases in two houses, and in one house five persons were attacked. 57 per cent of these cases were treated in the Hospital. Three deaths—two in one house—were caused by scarlet fever, equal to 5 per cent of the persons ill. All the 37 cases treated in Hospital recovered. During the first half of the year there were but few cases of scarlet fever. In July a group of seven cases were reported from one street. The origin of these was traced to a case which had not been notified, in fact

Scarlet Fever.



nothing was acknowledged regarding the illness until three children in the family were ill. Four neighbouring families were infected. Mr. Ellis the Inspector, discovered another suspicious case which was not reported,—the patient had returned to school. On examining the boy I found evidence that he was then in an infectious state. The reason given was that his illness was only considered to be a cold. Cases were reported about the same time in three houses close to. The infection is undoubtedly spread from such as these, and every fresh case may become a centre for another crop.

In September the number of cases began to increase, and from cases treated at home there is every probability that the infection will spread. The desire to do neighbourly acts in a time of illness is a reason given for so much of the visiting which we see, and the subsequent cases of fever which arise are frequently traceable to these visits. In a few cases the sick child was carefully isolated in the house, and after the disinfection of the clothing and room by the usual method by the fumes from burning sulphur, no new case occurred in these houses.

Diphtheria and  
Membranous  
Croup.

The 20 cases notified as diphtheria were in excess of the usual prevalence of this disease in Goole. There were also three cases reported as membranous croup, a disease often difficult to distinguish from diphtheria. These three were children not over 18 months and all died before the notification was received. From diphtheria alone there were 3 deaths, in 3 others death was due to diphtheria associated with measles, whooping cough, or laryngitis, 2 deaths in very young children were caused by laryngitis, and these also may have been due to similar causes as the others previously noticed. 9 deaths, however, were due to diphtheria or croup, and as these occurred among 23 persons notified as ill the death rate was nearly 40 per cent. of those attacked. All the cases were nursed at home. With 2 exceptions all the cases occurred in that part of the town to the north of North-street. I have already said that several of the cases were associated with other illness, i.e., following upon or being followed by some other disease. In 2 of the houses there were also cases of scarlet fever at the same time as the one of diphtheria. The inquiry made about each did not give any satisfactory clue at the individual houses. Sanitary defects were found at a few houses caused by sinks smelling badly, and in one house through foul sewage having overflowed from a low gulley into the cellar under the house. But in others there was no history but of a cold rapidly developing into a bad sore throat. I expressed my opinion that there were good grounds for suspecting that foul air from the sewers was to some extent responsible for these cases. This suspicion was afterwards confirmed by Mr. Chambers who on taking over the duties as Surveyor had made an inspection of the sewers. He described to me in a letter the condition of the Hook



sewers as very unsatisfactory, owing to the presence of a large amount of sediment. Work had been begun to remove much of that foul matter, but I am afraid such deposits must recur while the sewage is being kept back by the tides ; then much of the solid matter must settle, and flushing does not prove very effectual in removing it. I have ventured in previous years to ask for some consideration as to the need for pumping the sewage instead of allowing it to settle, and the experience in the neighbouring town of Hull similarly placed as to its tide-locked sewers, and the beneficial effects of pumping in the prevention of this same disease, diphtheria, is, I think, valuable as a guide.

Dr. Mason, Medical Officer of Health, in his Annual report for 1892 says, "Local insanitary surroundings are a necessary factor in the origin and diffusion of diphtheria, and it is interesting to note that in those districts in which diphtheria was most prevalent in Hull *since the introduction of auxiliary steam power to the sewerage system, there has been a material lessening of the mortality from diphtheria.*"

10 cases of typhoid or enteric fever were notified, all recovered. One child notified in 1893 died in the first week of January, 1894. Six of the cases were treated in the Hospital, one of these was only a case of slight continued fever ; one was a case where the illness had been contracted away from Goole ; another died as certified from "acute disease of the brain." Goole was exceptionally free last year from cases of this fever.

Enteric Fever.

The two infectious diseases which by their widespread and long continued prevalence and heavy mortality caused much anxiety, were cases of measles and whooping cough. I have no means of ascertaining the actual number of children who were ill, but judged by the number of fatal cases and the returns from the elementary schools there must have been several hundreds of cases. There have been an average of three deaths each year since 1890 from measles, in 1888 there were 25 deaths. In 1890 there were 23 deaths from whooping cough and 18 in 1892, with only 2 in the intervening years. As it would be impossible to find hospital accommodation large enough to admit all cases of measles and whooping cough during an epidemic our chief hope is that parents will be induced to deal with these cases not as a trifling children's ailment but as with a highly infectious disease and especially dangerous to very young children. 3 of the workhouse children ill with measles were promptly isolated in your hospital and no further spread of the disease occurred in the house. The outbreak caused a very large proportion of the children to be absent from schools either because they were ill or lived in houses where others were ill, and it was considered necessary to close nearly all the elementary schools in the town for several weeks. A

Measles and  
Whooping  
Cough.



suggestion made to close the Sunday schools was also adopted by the superintendents.

Fever Hospital I have already mentioned the cases of infectious disease removed to the hospital, the following is a complete summary :—

Cases of scarlet fever admitted	37
(2 of these were from the rural districts)	
„ „ enteric „ „	6
„ „ measles (from the workhouse)	3

1 case of diphtheria from the rural districts; total number admitted, 47; it is very satisfactory to report that all the cases made a good recovery.

Sewers.

I have already referred to the cleansing out of the Hook sewer which Mr. Chambers had carried out soon after he became Surveyor to the Local Board. The flushing of the main sewers and also the branch sewers in back streets and common yards has been systematically carried out. 5 new ventilating shafts were provided last year. The Navigation have changed the position of the outlet of one of their main sewers, the sewage is now delivered without any obstruction into the Dutch river and beneath low water. No work of repairing back streets was carried out last year. I have very frequently referred to the need for such works as equally necessary to prevent such places being deposits for all sorts of objectionable refuse and at other times to prevent them from being flooded and impassible through the want of drains. Under the existing bye-laws in Goole a secondary means of access is required, and this back lane should, I think, be properly made and sewered as soon as the houses are built.

Plans for 50 houses were sanctioned last year, and the proposal to amend and add to the bye-laws now in force was put off until after the election of the new Council. I understand this work will be begun at once.

Water Supply. The Gas and Water Works became the property of the Local Board in 1894; the advice of an engineer was called in and the work of deepening the bore hole at Rawcliffe Bridge, from which it is hoped a large supply of good water will be obtained from the new red sandstone formation, is now being actively proceeded with. 64 additional houses were last year supplied with water from the town's mains. I analysed five samples of well water from Goole last year, two of these could only be classed as very suspicious and unsafe to drink.

Five houses were reported as unfit for occupation, the reasons were excessive damp, want of ventilation, the only air space with large manure heaps close to, and general neglect of premises, rendering them dangerous to live in.

Sanitary inspection and scavenging

Since Mr. Ellis became the Inspector of Nuisances, the work has been systematically and thoroughly attended to. The



scavenging of the closets, &c., by the contractors has been well kept up, the closets are emptied once a month and the boxes nearly once a week. No complaints have been made to me of nuisance caused by depositing the refuse outside the Local Board district. I have accompanied the Inspector in his visits frequently, and especially to the dairies and cowsheds, &c. The sheds require a great deal of attention to see that the milk supply is well protected. We find them in crowded neighbourhoods with little convenience for storing manure, and the milk seller not always willing to make an effort to have it removed sufficiently often.

Cowsheds.

Another troublesome matter which grows worse as the town increases is the keeping of pigs; even where the owner tries his best it is difficult to avoid complaints caused by the sties and the manure becoming offensive to the neighbours, especially in warm weather.

Pig-keeping.

There are 12 bake-houses inspected and suggestions made as to carrying on the work with the greatest regard to cleanliness and in suitable rooms. Several workshops have also been inspected, and the requirements of the Act in the particulars of space required, and the cleanliness of the premises explained.

Bakehouses and other work-shops.

The inspection and regulating the work of the canal boats is increasing. As Authorities in other districts are more active their work has often to be followed up when the boats arrive in Goole. It was satisfactory to note that among the 136 boats inspected only one case of infectious disease was reported last year, and although the patient had been left the boat for some days the cabin and its contents were thoroughly disinfected.

Canal boats

I remain, Gentlemen,

Your obedient servant,

J. MITCHELL WILSON, M.D.,

Medical Officer of Health.

Goole,

13th February, 1895



TABLE I.  
LIST OF NUISANCES ABATED, AND STRUCTURAL ALTERA-  
TIONS MADE DURING THE YEAR 1894.

No. of Inspections made ...	...	...	...	2,929
„ Verbal notices given ...	...	...	...	147
„ Written notices served ...	...	...	...	145
„ Notices complied with ...	...	...	...	282
„ Nuisances partly abated or in progress ...	...	...	...	10
The Nuisances abated include:—				
No. of House drains repaired and defects remedied ...	...	...	...	266
„ Cesspools replaced with Pot Gullies ...	...	...	...	20
„ Closets and Ash-pits ...	...	...	...	884
„ Middens emptied ...	...	...	...	10,039
„ Closets and Ash-pits repaired ...	...	...	...	82
„ Box Closets and Dry Ash-pits ...	...	...	...	2,625
„ „ emptied ...	...	...	...	132,934
„ Sinks and Cisterns disconnected from drains ...	...	...	...	5
„ Dry Ash-boxes emptied ...	...	...	...	11,652
„ Loads of Night-soil removed ...	...	...	...	9,063
„ Houses disinfected and cleansed ...	...	...	...	74
„ Other Nuisances abated ...	...	...	...	53
„ *Canal Boats Inspected ...	...	...	...	136
„ Boats on Goole Register ...	...	...	...	759
„ „ Registered in 1894 ...	...	...	...	12
„ Regulations cancelled ...	...	...	...	1
„ Canal Boats Notices served 14, also 18 Verbal Notices ...	...	...	...	32
„ „ Letters as to ...	...	...	...	78
„ „ No Certificate on Board ...	...	...	...	16
„ „ Not Registered ...	...	...	...	4
„ „ Change of Owners not notified ...	...	...	...	0
„ „ Requiring better ventilation, cleans- ing, &c. ...	...	...	...	2
„ „ Transfer of Ownership and Certificate ...	...	...	...	17
„ „ „ Captain's and Boat's Names ...	...	...	...	3
„ „ Duplicate Certificate provided ...	...	...	...	7
„ Houses now supplied with Town Water ...	...	...	...	3,041
„ Cow-sheds, Dairies and Milk-shops registered ...	...	...	...	47
„ Common Lodging-Houses inspected ...	...	...	...	5
„ Bodies placed in Mortuary ...	...	...	...	5

\*One Case of Infectious Disease has been noted during 1894.

W. H. ELLIS, INSPECTOR.

TABLE II.  
BIRTH AND DEATHS RATES IN GOOLE, IN 1894, AND FOR THE PREVIOUS FIVE YEARS, COMPARED  
WITH THOSE OF THE WHOLE COUNTRY.

Year.	Rate per 1000 of the Population.						Deaths in Infants per 1000 Births.	
	Births.		Deaths.		Deaths from Zymotic Diseases		Goole.	England and Wales.
	Goole.	England and Wales.	Goole.	England and Wales.	Goole.	England and Wales.		
1894	35.8	29.6	18.9	16.6	3.5	1.7	150	137
1893	36.6	30.8	17.4	19.2	3.0	2.4	187	159
1892	39.6	30.5	16.6	19.0	1.9	1.9	152	148
1891	38.7	31.4	17.5	20.2	0.9	1.8	141	149
1890	35.8	29.7	20.8	19.2	3.4	2.0	200	151
1889	40.8	30.5	20.0	17.9	2.0	2.1	141	144



TABLE III.  
DEATHS FROM THE PRINCIPAL ZYMOTIC DISEASES IN 1894 AND DURING THE FIVE PREVIOUS YEARS.

	1894	1893	1892	1891	1890	1889
Small-Pox .....	0	3	0	0	0	0
Scarlet Fever .....	3	1	0	2	8	3
Membranous Group	2	2	2	0	0	0
Diphtheria .....	6	2	1	1	0	1
Fever, Enteric .....	1	3	3	6	6	9
Puerperal Fever .....	1	1	1	0	0	0
Measles .....	21	0	7	0	4	25
Whooping Cough ...	20	2	18	2	23	8
Diarrhoea .....	4	33	3	4	16	2
Total .....	58	47	35	15	57	48
Rate per 1000 .....	3.5	2.9	1.9	0.9	3.4	2.9

TABLE IV.  
DEATHS IN 1894 FROM SEVERAL GROUPS OF DISEASES, CHIEFLY AMONG CHILDREN UNDER  
FIVE YEARS OF AGE.

	Total.	Deaths per 1000 of Population.	Proportion of Deaths in every 1000 from all causes.
1.—Seven principal Zymotic Diseases .....	58	3'5	180
2.—Pulmonary Diseases.....	45	2'7	140
3.—Tubercular Diseases .....	34	2'0	105
4.—Wasting diseases of Infants.....	23	1'4	71
5.—Convulsive Diseases of Infants .....	25	1'3	73

- 1.—Includes Measles, Scarlet Fever, Whooping Cough, Enteric and Continued Fevers, Diphtheria,  
Membranous Croup, and Diarrhoea.
- 2.— " Bronchitis, Pneumonia, Pleurisy, and Asthma.
- 3.— " Phthisis, Scrofula, Tabes-Mesenterica.
- 4.— " Marasmus, Athropy, Debility, and Premature Birth.
- 5.— " Hydrocephalus, Infantile Meningitis, Convulsions, and Teething.



TABLE V.

SUMMARY OF CASES ADMITTED INTO THE FEVER HOSPITAL, GOOLE, DURING 1894.

DISEASES.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Recov- eries.	Died.
Scarlet Fever ...	1			2	6	2	5	2	5	5	4	5	37	
Enteric Fever ...	2							2	2				6	
Diphtheria .....											1		1	
Other Diseases ...									1	2			3	
Totals .....	3			2	6	2	5	4	8	7	5	5	47	

TABLE A.

TABLE OF DEATHS, during the year 1894, in the Urban Sanitary District of Goole, classified according to Diseases, Ages, and Localities.

NAMES of LOCALITIES adopted for the purposes of these statistics; public institutions being shewn as separate localities.	Mortality from all causes at subjoined ages.							Mortality from subjoined causes, distinguishing deaths of Children under Five Years of Age.																			
	At all Ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	Small-Pox.	Scarlatina.	Diphtheria.	Members. Croup.	Enteric or Typhoid	Puerperal	Measles.	Whooping Cough	Diarrhoea.	Erysipelas.	Rheumatic Fever.	Ague.	Phthisis.	Bronchitis Pneumonia, and Pleurisy.	Heart Disease.	Injuries.	All other Diseases.	Total.		
Goole Town.....	304	89	71	24	18	60	42	Under 5 5 upwds	1	2	3	1	...	20	4	4	...	...	...	...	27	19	2	2	99	160	
The Cottage Hospital .....	5	...	1	...	...	4	...	Under 5 5 upwds	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	1	1	4	
The Fever Hospital .....	...	...	...	...	...	...	...	Under 5 5 upwds	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
The Workhouse .....	16	...	...	...	...	8	8	Under 5 5 upwds	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	16	
Totals.....	325	89	72	24	18	72	50	Under 5 5 upwds	1	2	3	1	...	20	19	4	...	...	...	...	27	21	3	381	161		
The subjoined numbers have also to be taken into account in judging of the above records of mortality.																											
Deaths occurring within the District among persons not belonging thereto.	....	....	....	....	....	....	....	Under 5	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	1	...	1	
	13	....	1	...	5	7	5 upwds	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	3	9	12	

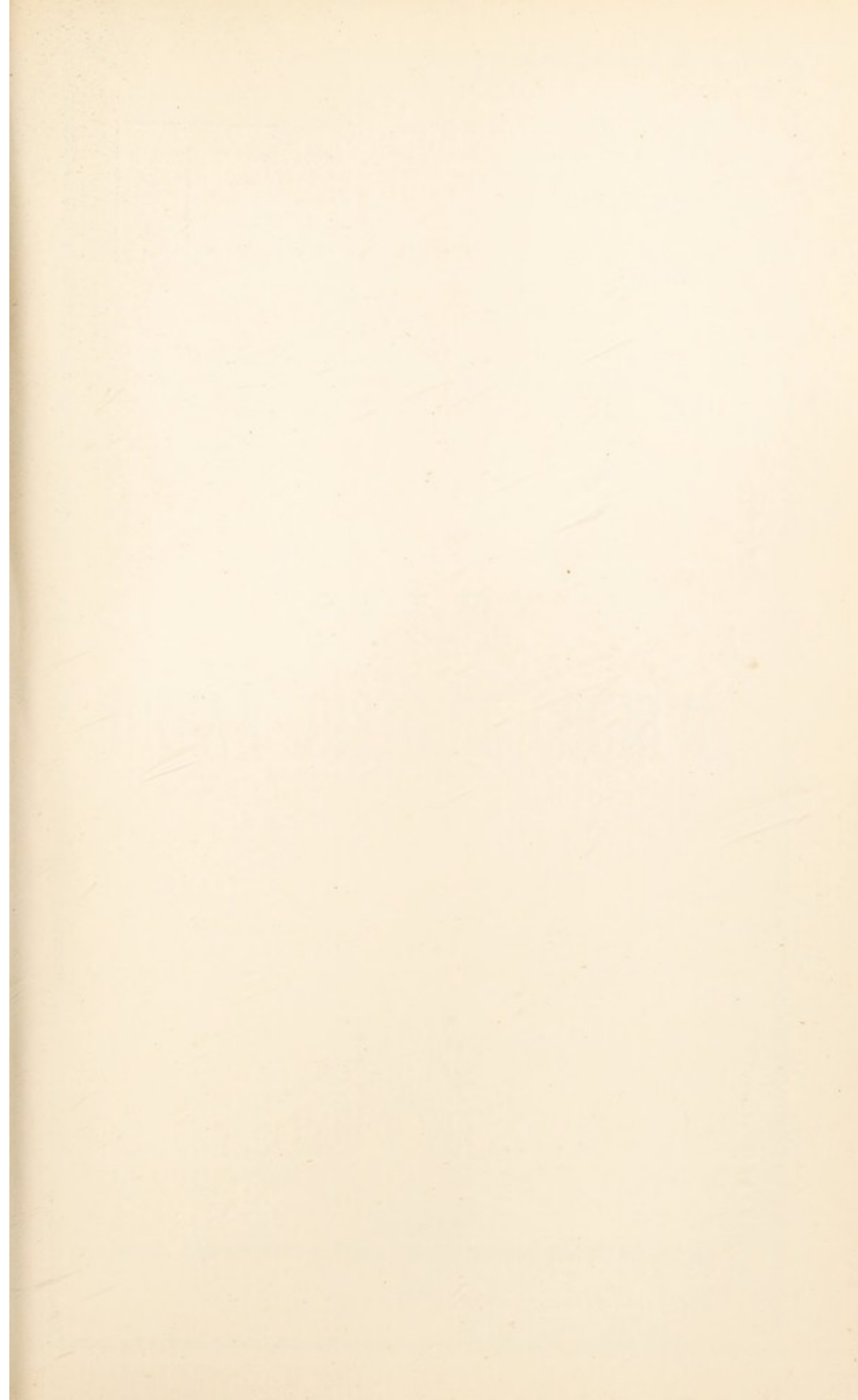


TABLE B.  
TABLE OF POPULATION, BIRTHS, and of NEW CASES of SICKNESS coming to the knowledge of the Medical Officer of Health, during the year, 1894, in the Urban Sanitary District of Goole; classified according to diseases, Ages, and Localities.

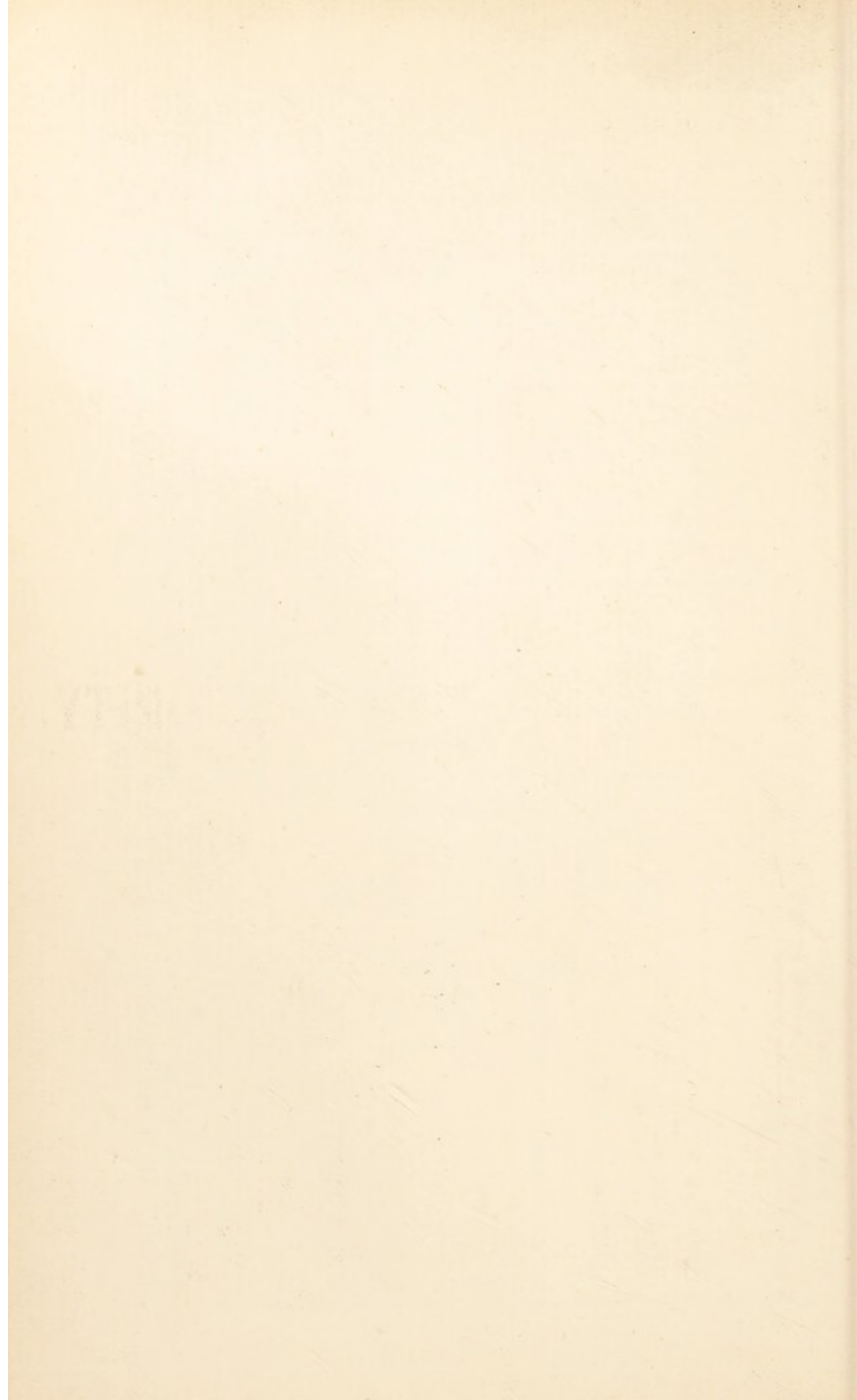
NAMES OF LOCALITIES. adopted for the purpose of Statistics; Public Insti- tutions being shown as separate localities.	Population at all ages.		Registered Births.	Aged under 5 or over 5.	New Cases of Sickness in each locality. coming to the knowledge of the Medical Officer of Health.					Number of cases removed from their homes in the several Localities for treat- ment in Isolation Hospital.			
	Census 1891	Estimated to middle of 1894.			Scarlatina.	Diphtheria.	Measles.	FEVERS.			Small-Pox	Scarlatina.	Enteric or Typhoid Fever.
								Enteric or Typhoid.	Puerperal	Erysipelas			
Goole Town	15305	16358	590	Under 5 5 upwds	19 41	3 17	3 ..	.. 10	.. 30	.. ..	7 27	.. 6	
The Cottage Hospital.				Under 5 5 upwds	.. 1	.. ..	.. ..	.. ..	.. ..	.. ..	.. 1	.. ..	
The Workhouse.....	108	108		Under 5 5 upwds	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	
Totals.....	15413	16466	590	Under 5 5 upwds	19 42	3 17	3 ..	.. 10	.. 30	.. ..	7 28	.. 6	

"Notification of Infectious Disease" is compulsory in the District since 9th December, 1889.

The name of the Isolation Hospital used by the sick in the District is the Fever Hospital.







SELBY  
URBAN DISTRICT COUNCIL.

SELBY :  
W. B. BELLERBY & SON, PRINTERS, BOOKSELLERS, &c.

1895.





SELBY  
URBAN DISTRICT COUNCIL.  

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ANNUAL REPORT  
OF THE  
MEDICAL OFFICER OF HEALTH.  
FOR 1894.

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POPULATION, CENSUS, 1891	...	...	...	6,022
ESTIMATED POPULATION IN 1894	...	...	...	6,022
AREA IN ACRES	...	...	...	3,643

---

TO THE SELBY URBAN DISTRICT  
COUNCIL.

GENTLEMEN,

It is now my duty to present my Annual Report for the year, 1894. This Report has been prepared in agreement with the instructions of the Local Government Board.

As the extension of the District did not take place until the end of the year, this Report deals only with the area of the old Local Board. At the Census taken in 1891, the population was then found to be 6,022, by comparison with the previous Census, there was but a very slight decrease. Since 1891, and especially during the last two years, there has probably been an increase up to the middle of 1894; but the following statistics are calculated upon the unaltered population.

Population.

Last year a much larger number of houses were built, or are now being built, than has taken place in Selby for many years. The 50 new houses will, when all are occupied, mean an apparent increase of 200 to the population; but I am told that



many of the occupiers are merely changing from old to the better sanitary equipped new houses.

In December last, after a local Inquiry, an addition of 114 acres, with an estimated population of 165 (previously in the Parish of Brayton, in the Selby Rural Sanitary District), was added to what is now the Urban Sanitary District. As I am required to make my calculations upon an estimate of the population up to the middle of the year, these changes will first be noted in dealing with the statistics of 1895.

**Births.** The births registered last year were 199—males 98, females 101. The birth-rate for the year was 33 per 1000. The average birth-rate for a series of years is a fair test of any change going on in the population of a district. In Selby, during the ten years 1875-1884, the birth-rate averaged 34·5 per 1000; during the next ten years, *i.e.*, until the end of last year, the birth-rate was 30·8. The birth-rate last year was the highest of any of the ten.

**Deaths.** In the town of Selby there were 111 deaths registered—males 43, females 68. A death of a Selby person who died out of the town is added; but the deaths of 6 persons at the Workhouse of persons belonging to the Rural Districts are deducted. The corrected number is 106, and is equal to a death-rate of 17·5 per 1000.

Past  
Death Rates  
in Selby.

Turning again to the average rate of past years, between 1875-1884 the death-rate was 21 per 1000, and during the last ten years it was 18·6. This comparison means that during the last ten years there have been 150 fewer deaths than there occurred during the earlier ten years, among a population given as 6,000. It is satisfactory to find that the death-rate last year was 1 per 1000 below the reduced rate of the last ten years.

Some members may not be aware that the earlier history of Selby, before the Local Board was formed, was that the average death-rate for nine years was over 29 per 1000; during the ten years 1851 to 1860 the average was reduced to 25 per 1000. It was during that latter period that sanitary work was really seriously undertaken in the town; then, the present water supply was obtained, and the means of sewage disposal provided. The work of more recent years has been to extend and improve these, and by many other means to provide reasonably good sanitary conditions at every house.

The fact that the death-rate is given as under 18 per 1000 is not a complete statement, for if the death-rates are calculated at



different groups of ages, a further correction favourable to Selby must be made. The deaths of children under 5 years of age were equal to 52·8 in every 1000 children living under that age last year.

Deaths at  
different ages.

Among those from 5 to 15	the rate was	2·0	per 1000.
„ „ 15 to 25	„	4·1	„
„ „ 25 to 65	„	13·5	„
And among those living at 65 years and above	„	100·0	„

Now the numbers of people living in Selby at 65 and above is twice the proportion in every 1000 than is found in the population of the whole of the West Riding; therefore, as that class must of necessity contribute a large number of deaths apart from anything sanitary improvements can control, they increase the death-rate beyond what a population of younger persons would contribute to it.

Last year 8 deaths were caused by diseases in the zymotic as is generally considered, the infectious class.

Deaths from  
Zymotic  
Diseases.

4 were caused by scarlet fever.

2 „ „ whooping cough.

1 was caused by enteric fever.

1 „ „ diphtheria.

The death-rate from these was 1·3 per 1000, which is near to average rate of the last ten years. During the earlier ten years the average number of deaths in this group equalled 3 per 1000.

Last year only 3 persons belonging to Selby died from phthisis or consumption, and only 11 from other diseases of the lungs; these together were equal to a death-rate of 2·4 per 1000. This return is very much under the rate for the previous years, when it was 6, and also the average rate for the last 20 years, which has continued at 4·5 per 1000. Last year there were no deaths caused by influenza; in 1893 there were 7.

Diseases of  
the Lungs.

Among infants under a year the proportion of deaths was 141 in every 1000 births registered. This rate is higher than the average of recent years. This increase was not due to infants dying of infectious diseases, nor from summer diarrhoea, but 14 were registered from the vague term “convulsions”; probably this was only a sign of some undeveloped disease, and, in other cases, of a premature birth.

One-third of all the deaths during the year were among children under 5 years of age, and nearly the same proportion were of persons aged 65 years and above.



Certificates of 6 deaths were received through the Coroner; 4 of these were caused by accidents; only one death was "not certified."

Cases of  
Infectious  
Disease reported

During 1894, 79 notifications of cases of infectious disease were received:—71 reported cases of scarlet fever, 1 was a case of small-pox, 3 were cases of enteric fever, 3 were cases of erysipelas, and 1 was a case of diphtheria.

Cases of  
Scarlet fever.

The outbreak of scarlet fever last year was a continuation of the infection from the Autumn of 1893. Cases were reported in 1894 during every month unless in August; the death-rate was 5·6 per cent. among the persons attacked, but among children under 5 who were ill the deaths were 10 per cent. The disease was confined to a single case in 33 houses; in 10 houses a second case occurred; in 3 houses there was a third case; in 1 house a fourth, and in 1 house five cases. Particulars were given as to the probable origin and the conditions under which each of the cases were being treated in my monthly reports to the Local Board. There was repeatedly the history of undetected cases infecting others, those in charge of the patients so little impressed with the nature of the illness as to be ready to send the family, the patient included, to school at the end of a fortnight, which of course was prevented. On the other hand, some cases were as carefully isolated as the size of the house would allow, although carried out at great personal inconvenience. The cases were especially rife during the first half of the year, in spite of repeated visits to each house and the advice given as to the nature of the infection. Disinfectants were given, but such work was unable to overcome the ready means by which the infection of scarlet fever spreads among susceptible persons. At an interview with the schoolmasters of those schools at which very many of the infected children had attended, their aid was sought in preventing children returning there too soon. A handbill was posted in the town warning everyone as to the penalties against the spread of infection. Through a communication received by the Local Government Board from a gentleman living away from Selby as to children being allowed to come daily to school in Selby, a Medical Inspector (Dr. Copeman) visited the town. His chief suggestion—viz., as to informing teachers of any case of infectious disease notified among the scholars of their school—was adopted by the Local Board, and is carried out by the Sanitary Inspector.

Need for  
an Isolation  
Hospital.

The insufficiency of house isolation of infectious cases was felt, and the need for a small hospital again advised. The Local Board endeavoured to get the Selby Rural Sanitary Authority to consider the advisability of a joint-hospital being provided, but they preferred to adjourn the question pending the election



of the new District Councillors. It seems the most satisfactory method of settling this almost yearly recurring question, that the authorities in the neighbourhood, being mutually interested in the health of the whole Union District, would best protect the health of all by providing some means of controlling cases of infection. This view is strengthened by the history of two out of the three cases of enteric fever notified last year. Both the patients contracted their illness in the rural districts, and as one of these had his home in a common lodging-house the others living there had to leave, and the occupier was left for eight weeks with a sick stranger in her house. The Local Board agreed to assist this woman for her services as nurse.

Enteric Fever.

Again, in August a tramp found himself ailing at another lodging-house, and being without means he was admitted into the Workhouse the next day, and was found in a few hours to be suffering from small-pox. A little delay, and he would have been refused admission there, and the public of Selby would have run the risk of another outbreak like what happened in the previous year. He was at once isolated at the Workhouse, and no other case followed.

Small-pox.

The case of diphtheria was a very young child who was attacked after an older one in the same house had recovered from a supposed cold and slight sore throat.

Two deaths were due to whooping cough in very young children. This disease, which is highly infectious, persists for such a long time that any isolation of the patient is but very rarely thought of; but yet the children ought throughout the whole period of their illness to be prevented from going to school.

Whooping  
Cough.

It is about thirty years since the existing system of sewers in Selby was begun. The outfalls discharge into tidal waters, and the clause in the recent Bill of the West Riding Conservancy Board, which proposed to prohibit that practice, was opposed by the Sanitary Authorities whose districts are situated near the outfalls of the rivers Ouse and Aire and Calder; and in conferences it was decided that all tidal waters should be exempt which had not been declared streams by the Local Government Board.

Sewers  
and Sewage  
Disposal.

Extensions of the sewers have been made year by year to meet the requirements of new buildings, and the means of ventilating and flushing the sewers have been increased. This work is of extreme importance in a district so flat as Selby is, and the assistance owners of property can give by allowing ventilating shafts to be placed at suitable points is to a considerable extent



a protection against the air of the sewers when confined forcing the water trap of their house drains. Flushing of the sewers is occasionally carried out by means of the steam fire-engine, and in the sewers constructed recently special flushing chambers have been provided. Last year 70 yards of 9-inch sewer was laid by the Local Board in Armoury Lane, and 550 yards by the owner in Nalton Street. One new ventilator was placed in the Doncaster Road sewer last year, and others in the new sewers.

**Water Supply.** The water supply of Selby was obtained in 1853 from a well then 336 feet deep. For many years the supply appeared to be inexhaustible. The source of supply is the new red sandstone; it is pure in quality, and of a moderate degree of hardness. Unless when there was an evident lessening of water in the well the supply has been constant. It was found necessary to sink a second well to a depth of 390 feet close to the first in 1885. From that time until 1893 the supply was adequate for all wants; but from June of that year until March of 1894 the supply was found to be lessening even when being constantly pumped. The Local Board decided, after taking skilled advice, to deepen well No. 2. That work was completed in August of last year, and it is now 674 ft. deep, and the supply now is equal to that obtained from 1886 to 1890. The water I find, on analysis, to be very satisfactory. The Local Board have decided to lay 400 yards of duplicate water mains in several districts of the town.

There are a far larger proportion of water-closets used in Selby than of the midden closet. A large number of the old W.C.s are not provided with a cistern, and the flushing from the lead service pipe is not sufficient to keep the pan always in a thoroughly clean condition. All new closets, and also old ones when altered, are required to be provided with a cistern. From inspections made on account of outbreaks of fever, and especially those made of the general sanitary state of the town, it has been necessary to report a number of cases where three and four families have been compelled to use one closet. That insufficient supply has been remedied to the extent of 14 new and additional W.C.s being provided.

**Scavenging of House-refuse.** The scavenging of all house-refuse is carried out by the Board's workmen at intervals, the Surveyor says, of three weeks. A large amount of refuse is collected weekly from moveable receptacles. The cost is equal to 2/6 per house. An experiment is being tried at the new houses now being occupied of a box-closet for excreta and house-refuse to be cleansed weekly. The system, in my opinion, has nothing to recommend it when water and sewers are provided, and when cases of enteric fever



occur, I have found the box when returned, even with its partial cleansing and dusting with disinfecting powder, a source of danger to other persons using the closet.

At the meeting of the Board on December 28th, additional Bye-laws were adopted under the Public Health Acts Amendment Act, 1890, by which the height of rooms, the paving of back yards, the providing of a secondary means of access to houses for scavenging purposes, are all secured for all new houses, and in some cases additional powers are obtained for old houses.

Bye-laws.

Four houses were last year certified as being in such an insanitary condition from damp, want of air space and ventilation in the rooms, as to make them uninhabitable. Others were reported in December as causing a danger to health from excessive damp, due in part to want of spouting.

Unwholesome  
Houses.

In Mr. Curry's report there is a full statement of the sanitary work carried out during the year. Nuisances have been remedied due to many causes. The list of Bakehouses, Dairies and Cowsheds, Slaughter-houses, Workshops, and Common Lodging-houses on the several Registers are also given. Amongst all these we find a general desire to carry out either the bye-laws or reasonable sanitary requirements; and nothing but good comes from the systematic oversight kept up in the public interest.

Dairies and  
Cowsheds,  
Workshops, &c.

The report of the 64 canal boats inspected shows that they have all been found in a clean and wholesome condition, and that the regulations have been complied with, and no case of infectious disease found among those living on board.

Canal Boats.

I remain, Gentlemen,

Your obedt. Servant,

J. MITCHELL WILSON, M.D.

*Selby, 30th January, 1895.*



ANNUAL REPORT OF NUISANCES ABATED AND OTHER SANITARY  
WORK FOR THE YEAR ENDING 31ST DECEMBER, 1894.

---

Inspections made	...	...	...	...	...	1572
Verbal and Written Notices from Inspector	...	...	...	...	...	130
Notices from the Board	...	...	...	...	...	6
Defective Drains cleansed and relaid	...	...	...	...	...	8
Do. W.C.'s do. repaired	...	...	...	...	...	15
Premises cleansed and limewashed	...	...	...	...	...	26
West Ashpits drained	...	...	...	...	...	4
Defective and delapidated Privies and Ashpits re-built	...	...	...	...	...	16
W.C.'s provided with flushing apparatus	...	...	...	...	...	3
Overcrowding	...	...	...	...	...	2
Offensive accumulations removed	...	...	...	...	...	6
Privies abutting upon Dwellings removed	...	...	...	...	...	2
Yards repaired	...	...	...	...	...	3
Houses unfit for habitation	...	...	...	...	...	4
New W.C.'s provided in addition	...	...	...	...	...	14
Branch Drains provided	...	...	...	...	...	3
Sinks disconnected	...	...	...	...	...	4
Pigs within 40ft. of dwellings removed	...	...	...	...	...	14
No. of Ashpits emptied	...	...	...	...	...	2553
Dairies and Cowsheds registered	...	...	...	...	...	25
Bake Houses registered	...	...	...	...	...	9
Common Lodging Houses registered	...	...	...	...	...	6
Slaughter Houses do.	...	...	...	...	...	8
Workshops do.	...	...	...	...	...	5
Rooms disinfected	...	...	...	...	...	48
Canal Boats inspected	...	...	...	...	...	64
Plans passed for Dwelling Houses	...	...	...	...	...	8
Do. other Buildings	...	...	...	...	...	6
Notices served for dangerous Buildings	...	...	...	...	...	4
New Sewers laid	...	...	...	...	yards	621
No. of Houses connected with new Sewers	...	...	...	...	...	53

W. CURRY,

Surveyor and Inspector.

*Town Hall, Selby, 10th January, 1895.*

TABLE A.

TABLE OF DEATHS during the year 1894, in the Urban Sanitary District of Selby, classified according to Diseases, Ages, and Localities.

NAMES OF LOCALITIES.	Mortality from all causes at subjoined ages.							Mortality from subjoined causes, distinguishing deaths of Children under Five years of age.																							
	At all ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 60.	65 and upwards.	FEVERS.																							
								Small-pox.	Scarlatina.	Diphtheria.	Membranous Croup	Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas.	Measles.	Whooping Cough.	Diarrhoea and Dysentery.	Rheumatic Fever.	Ague.	Phthisis.	Bronchitis, Pneumonia, and Pleurisy.	Heart Disease.	Injuries.	All other Diseases.	Total.		
SELBY .. ..	90	25	10	4	3	23	25	Under 5 ..... 5 upwards	..	2	1	..	..	..	1	..	..	..	..	..	2	..	..	..	..	1	4	1	..	24	35
WORKHOUSE .. ..	21	3	1	1	6	10	10	Under 5 ..... 5 upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	3	..	..	12	18
TOTALS .. ..	111	28	10	5	4	29	35	Under 5 ..... 5 upwards	..	2	1	..	..	..	1	..	..	..	..	..	2	..	..	..	..	1	4	1	..	27	38
Deaths occurring outside the district among persons belonging thereto.	1					1	1	Under 5 ..... 5 upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	5	73
Deaths occurring within the district among persons not belonging thereto.	6		1			2	3	Under 5 ..... 5 upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	..



TABLE B.

TABLE of POPULATION, BIRTHS, and NEW CASES OF INFECTIOUS SICKNESS coming to the knowledge of the Medical Officer of Health, during the year 1894, in the Urban Sanitary District of Selby; classified according to Diseases, Ages, and Localities.

NAMES OF LOCALITIES.	Population at all ages.	Registered Births.		New Cases of Sickness in each Locality coming to the knowledge of the Medical Officer of Health.											
	1894	Aged under 5 or over 5.		Small-pox.	Scarlatina.	Diphtheria.	Membranous Croup.	Fevers.					Cholera.	Erysipelas.	
SELBY LOCAL BOARD DISTRICT..	5914	199	Under 5 ..... 5 upwards	.....	18 ..... 51	1	.....	.....	.....	3	.....	.....	.....	.....	3
WORKHOUSE .. .. .	108		Under 5 ..... 5 upwards	.....	1 ..... 1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Totals .. .. .	6022	199	Under 5 ..... 5 upwards	.....	19 ..... 52	1	.....	.....	.....	3	.....	.....	.....	.....	3

Notification of Infectious Disease is compulsory in the District since December 9th, 1889. There is no Hospital for cases of Infectious Disease.

TABLE I.

BIRTH and DEATH RATES during 1894, and Five Previous Years, in the Selby Urban Sanitary District, and in England and Wales.

Year.	Rate per 1000 of the Population.						Deaths in Children under 1 year to every 1000 Births.	
	Births.		Deaths.		Deaths from Zymotic Diseases.			
	Selby.	England and Wales.	Selby.	England and Wales.	Selby.	England and Wales.	Selby.	England and Wales.
1894	33.0	29.7	17.5	16.6	1.3	1.7	141	137
1893	30.8	30.8	21.2	19.2	1.4	2.0	139	159
1892	32.3	30.5	16.9	19.0	0.9	2.4	109	148
1891	30.5	31.4	18.4	20.2	1.8	1.8	152	149
1890	30.0	29.7	16.0	19.2	1.2	2.0	146	151
1889	32.5	30.5	17.8	17.9	1.2	2.1	120	144

TABLE II.

SUMMARY of the BIRTH and DEATH RATES during the 10 Years 1881-90.

	Average of the 10 years 1881-1890.
Birth Rate per 1000 .. .. .	31.2
Death " " .. .. .	18.4
From Zymotic Diseases .. .. .	1.5
" Phthisis or Consumption .. .. .	1.4
" other Lung Diseases .. .. .	2.9
Deaths in Infants under 1 year per 1000 births	133



TABLE III.  
MORTALITY FROM SEVERAL GROUPS OF DISEASES DURING 1894.

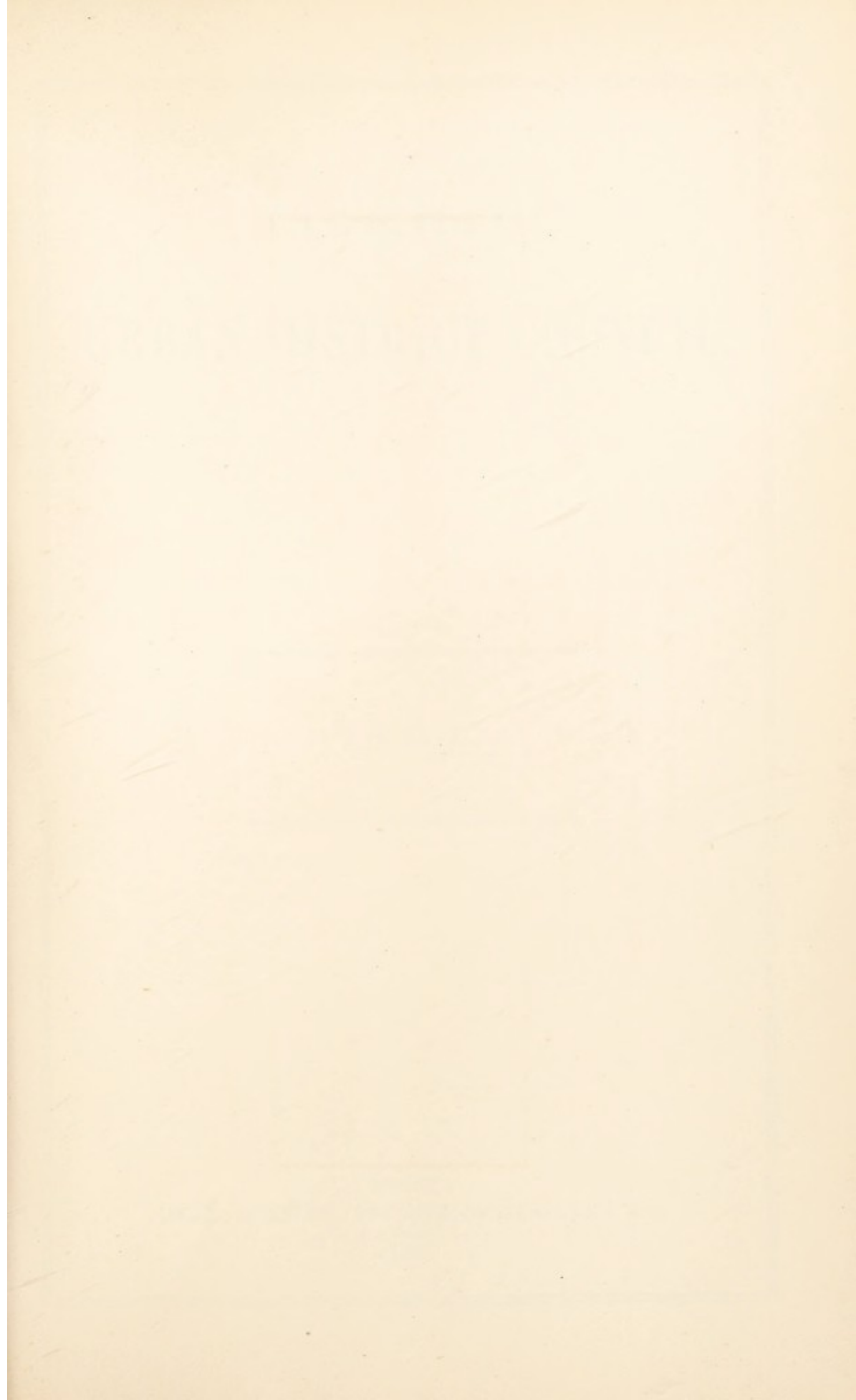
	Total.	Deaths per 1000 of Population.	Proportion of Deaths in every 1000 from all causes.
1.—Seven Principal Zymotic Diseases .. ..	8	1.3	71
2.—Pulmonary Diseases (other than Phthisis) .. ..	11	1.8	100
3.—Tubercular Diseases .. ..	8	1.3	71
4.—Wasting Diseases of Infants .. ..	5	0.8	49
5.—Convulsive Diseases of Infants .. ..	16	2.6	142

2.—Includes Bronchitis, Pneumonia, Pleurisy, and Asthma.

3.— " Phthisis, Scrofula, Tabes Mesenterica.

4.— " Marasmus, Atrophy, Debility, and Premature Birth.

5.— " Hydrocephalus, Menengetis, Convulsions, and Teething.







TICKHILL  
URBAN DISTRICT COUNCIL.

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1894.

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SELBY :  
W. H. SPENCER, PRINTER, BOOKSELLER, &c.

1895.





# TICKHILL URBAN DISTRICT COUNCIL.

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## ANNUAL REPORT

OF THE

### MEDICAL OFFICER OF HEALTH FOR 1894.

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POPULATION AT CENSUS, 1891	...	...	1,450
ESTIMATED POPULATION IN 1894	...	...	1,400
AREA IN ACRES	...	...	488

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### TO THE TICKHILL URBAN DISTRICT COUNCIL.

GENTLEMEN,

I have now to present my Annual Report for the year 1894. It is prepared in accordance with the instructions of the Local Government Board.

The district of the new Council is unaltered from that known as the Local Board. A proposal was made to extend the area so as to include those portions of the parish of Tickhill which now form part of the Doncaster Rural District. The question was adjourned, and another inquiry is to be held shortly.

The population of the district is lessening, as it is a purely agricultural one. At the Census of 1891 it was 1450, to the middle of last year I estimate that it is only 1400. The population is one in which the number of persons living at and over 65 years far exceeds the proportion in other districts.

Population.

In 1881 the proportion of these aged persons was found to be 102 per 1000. In 1891 it was 113. The proportion in other of my districts varies from 35 to 75 per 1000. This fact is of importance in considering the death rate during each year, as sanitary work can do but little to lengthen life after 65.

During 1894 there were 32 births registered in the district—males, 18; females, 14. The birth rate was exceptionally low,

Birth and  
Death Rate.



only 22 per 1000, considerably under the average rate. Since 1881, the average was 27.

19 deaths were registered in the district—males, 9; females, 10. In addition, 3 old persons died at the Doncaster Workhouse belonging to Tickhill. The total of 22 is equal to a death rate of 15·6 per 1000. The average of past years since 1881 was 17 per 1000.

The only deaths in the zymotic class of diseases were 2 from whooping cough in very young children

There were 3 deaths from disease of the lungs, and one in the early part of the year from influenza. Deaths from lung diseases have lessened by 1 per 1000 when we compare the previous 5 years (but omitting the year 1891, which was altogether an exceptional one on account of the epidemic of influenza) with the 5 years, 1880-1884.

Among infants under one year the deaths equalled 12 per cent. of the registered births, which is the usual average.

50 per cent. of all the deaths occurred among persons aged 65 years and above that age.

Cases  
of Infectious  
Disease notified.

6 cases of infectious disease were reported in 1894, 4 were cases of enteric fever and 2 of diphtheria. One of the latter occurred at a house where a case of the same disease was investigated a few months before. It appeared to result from the the old infection rather than from insanitary surroundings.

No clue was obtained regarding the other case, which occurred in another part of the town 3 months after.

The 4 cases of enteric fever were reported during one week, and all lived in one block of buildings. There were 2 suspected sources for the introduction of the infection. One of these in another of my districts I made careful inquiries about, but with no very satisfactory result. However the infected matter got an entrance into the water supply, and 4 persons living in 3 houses, using that one well water, were attacked with fever.

I reported at your meeting in November the full particulars of the outbreak, how the well water was conclusively proved to have received a portion of sewage matter from a blocked drain used by the family first ill. The Inspector, Mr. Rawson, acted promptly by having the pump handle removed. At the urgent request of the Medical Attendant and with the consent of the Corporation, 2 of the cases were removed to the fever hospital at Doncaster. The cases were severe and were in the hospital 7 weeks. No doubt the expense was heavy, but on the other hand, when the condition of the family and the sanitary condition of the houses and their surroundings were considered there was a very great danger of the disease spreading from that source. The prevention of that risk and the speedy stamping out of the infection was certainly, in a large measure, due to the removal of the cases. The well was afterwards thoroughly cleansed out and



protected against being fouled. The drains were re-laid, and after notices had been served, additional and better arranged closets were provided.

The clothing rooms, &c., were disinfected. No fresh cases of fever have occurred since. The analysis of the water after the improvements were carried out shewed it now gives no signs of being affected from outside impurities.

The question of providing a more efficient system of sewers for Northgate, Sunderland Street, Manningham and Back Lanes has been during the year very carefully considered. A scheme prepared by Mr. Nunery, C.E., of Sheffield, has been adopted. It is proposed to purify the sewage on  $4\frac{1}{2}$  acres of land, well situated both as allowing of the necessary fall and far removed from any houses. Sewers and  
Sanitary Work.

Several properties were last year provided with better drains: 458 yards were laid and the cause of complaints thus removed.

The scavenging of the ashpits, &c., is done through the householder, but notices had to be given in 25 cases, on account of neglect in having this work done. Better closet accommodation was provided in 8 cases.

The cow sheds are inspected at intervals and verbal advice given as to the need for carrying out the regulations.

The few bakehouses are always found clean and satisfactory.

I remain, Gentlemen,

Your obedient Servant,

J. MITCHELL WILSON, M.D.,

Dip. Public Health, Cambs.,

MEDICAL OFFICER OF HEALTH.

TICKHILL, 12th February, 1895.

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NUISANCES, &c., ABATED, DURING 1894.

New Privies	...	...	...	...	...	...	8
New Drains	...	...	...	...	...	yards	458
New W.C.	...	...	...	...	...	...	1
New E.C.	...	...	...	...	...	...	1
Ashpits cleaned out	...	...	...	...	...	...	25
New Piggery	...	...	...	...	...	...	1
Old ones condemned	...	...	...	...	...	...	3
Wells cleaned out	...	...	...	...	...	...	2
Besides other nuisances abated and several cottages cleaned and disinfected.							

R. H. RAWSON, *Nuisance Inspector.*



(A)

TABLE OF DEATHS during the year 1894, in the Rural Sanitary District of Tickhill; classified according to Diseases, Ages, and Localities.

Mortality from all causes at subjoined ages.										Mortality from subjoined causes, distinguishing deaths of Children under Five years of age.																										
NAMES OF LOCALITIES adopted for the purpose of these Statistics; public Institutions being shown as separate localities.	(a)	(b) At all ages.								(i)	FEBERS.																									
		(c) Under 1 year.									Small-pox.	Scarlatina.	Diphtheria.	Membranous Croup.	Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas.	Measles.	Whooping Cough	Diarrhœa, and Dysentery.	Rheumatic Fever	Ague.	Phthisis.	Bronchitis, Pneumonia, and Pleurisy.	Heart Disease.	Injuries.	All other Diseases	Total				
		(d) 1 and under 5.									...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...			
		(e) 5 and under 15.									...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
		(f) 15 and under 25.									...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
		(g) 25 and under 60.									...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
		(h) 60 and upwards.									...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
											...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TICKHILL (Urban) ...	19	4	1	1	1	1	3	9	Under 5 upwards	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	1	2	2	...	3	5	14			
Totals ... ..	19	4	1	1	1	1	3	9	Under 5 upwards	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	1	2	2	...	9	5	14			
Deaths occurring outside the district among persons belonging thereto.	3	.....	.....	.....	.....	.....	.....	3	Under 5 upwards	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	2	...	3				

(B)

TABLE II.

TABLE OF POPULATION, BIRTHS, and of NEW CASES of INFECTIOUS SICKNESS coming to the knowledge of the Medical Officer of Health, during the year 1894, in the Rural Sanitary District of TICKHILL; classified according to Diseases, Ages, and Localities.

NAMES OF LOCALITIES adopted for the purpose of these Statistics ; Public Institutions being shown as separate localities.	Population at all ages.		Registered Births.	Aged under 5 or over 5.	New Cases of Sickness in each Locality coming to the know- ledge of the Medical Officer of Health.										*Cases Removed.			
	Census, 1891.	Estimated 1894.			Small-pox.	Scarlatina.	Diphtheria.	Membranous Croup.	FEVER.							Erysipelas.	Scarlet Fever.	Enteric Fever.
									Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.				
TICKHILL (URBAN)	1,450	1,400	32	Under 5 5 upwards.	.....	.....	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	
Totals	1,450	1,400	32	Under 5 5 upwards.	.....	.....	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	

Notification of Infectious disease is compulsory in the district since 1st March, 1890. No Hospital for Infectious cases is provided.

Two of the cases of Enteric Fever were removed to the Hospital in the Doncaster Urban Sanitary District.





