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DORSET COUNTY COUNCIL.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH,

J. E. ROBINSON, M.B., B.S., (Lond.), D.P.H. (Lond.),

For the Year 1920,

with Abstracts of Reports of
District Medical Officers of Health.

AREA.

The total *area* of the Administrative County is 625,612 acres. This acreage is inclusive of land and inland water.

VITAL STATISTICS.

Population. The Registrar General estimated the population of the Administrative County in the middle of 1920 at 216,727, and this figure has been used as the basis of calculations in this Report. The population of the *Urban* Districts he estimated at 115,775, and of the *Rural* Districts at 100,952.

Note :—The Registrar General's figure for this County has proved to be much too low. The Census taken this year (1921) on 19/20 June, gives a figure of 228,258 as the population of the County on that date, an increase in population of 4,992 over the Census population of 1911.

Birth-Rate. The nett number of births registered in the County in 1920 was 4,898, as compared with 3,494 in the previous year and 4,127 in 1914. The *nett Birth-rate* in 1920 was 22·3, as compared with a rate of 16 in 1919, and 18·1 in 1914. For calculating the Birth-rate the Registrar General's Estimate of population was 219,389 (to allow for men absent on service). The illegitimate births numbered 265.

The Birth-rate for *England and Wales* in 1920 was 25·4. In the *Urban* Districts in 1920 the birth-rate was 22·6. In 1919 it was 16·7.

In the *Rural* Districts in 1920 the birth-rate was 21·9. In 1919 it was 15·3.

A marked increase in the birth-rate in 1920 was anticipated as a consequence of the demobilisation in 1919 of the men on service.

The Birth-rate for 1920 is the highest in this County during the past 10 years.

Death-rate. The nett number of deaths registered in the County in 1920 was 2,566. In 1919 the number was 2,854. The *nett death-rate* in 1920 was 11·8 (on estimated population 216,727). In 1919 it was 13·7. The death-rate in 1920 for *England and Wales* was 12·4. The *nett death-rate* in *Urban* Districts in 1920 was 11·5. In 1919 it was 13·5. The *nett death-rate* in *Rural* Districts was 12·1. In 1919 it was 13·9. The *decrease* in the *number of deaths* is chiefly due to a reduction of 179 in the deaths due to influenza, of 38 in the deaths due to pulmonary tuberculosis, of 73 in the deaths from bronchitis. There was an increase (30) in the number of deaths due to cancer, to diarrhoea (40), and to congenital debility and premature birth (29). In the last case the increase is accounted for by and is in proportion to the great increase in the number of births.

Infantile Mortality. The number of deaths of infants under one year of age was 279, 163 in the *Urban*, and 116 in the *Rural* Districts. The deaths of illegitimate infants numbered 27.

The *number of deaths of infants under one year per 1,000 births* was 56·9. This is the lowest rate ever recorded for this County, and it is particularly noteworthy that contrary to the usual experience it has markedly decreased in spite of the large increases in the number of births.

The rate in the *Urban* Districts fell from 70 to 60, and in the *Rural* Districts from 61 to 52. The most remarkable decrease in the rate occurred in Weymouth Borough where the rate fell from 84 to 38. A noteworthy fall occurred at Portland where the rate for 1920 was 48 as compared with 68 in the previous year. In Poole Borough there was a small increase. Sherborne *Urban* District has the smallest rate (29) of the *Urban* Districts and Wimborne the highest (101). Of the *Rural* Districts, Bridport has the highest rate (90) and Shaftesbury the lowest (19). These smaller districts, however, shew marked annual variations in rates, as a few more or less deaths make a large difference in the rate, *e.g.*, in Wimborne *Urban* in 1919 the rate was only 42.

Dorset has a very low infantile mortality as compared with the country as a whole. The *preventible* mortality is about 20 as compared with 50 in the whole Kingdom, assuming 30 as the rate due to non-preventible causes, although with increased knowledge and methods a reduction in this figure may be looked for.

ADMINISTRATIVE COUNTY : POPULATION, CENSUS, 1921.

Urban Districts.	Population	Incr.	Decr.	Rural Districts.	Population	Incr.	Decr.
Blandford ..	3194	—	283	Beaminster ..	8313	—	900
Bridport ..	5910	—	9	Blandford ..	8139	—	630
Dorchester ..	9554	—	288	Bridport ..	6877	146	—
Lyme Regis ..	2883	111	—	Cerne ..	4466	—	449
Poole ..	43661	4776	—	Dorchester ..	8776	—	838
Portland ..	12434	—	4577 ^a	Poole ..	7378	1073	—
Shaftesbury ..	1808	—	65	Shaftesbury ..	10141	—	769
Sherborne ..	6394	441	—	Sherborne ..	5446	—	472
Swanage ..	7112	2423	—	Sturminster ..	7933	—	571
Wareham ..	1994	—	8	Wareham ..	13646	3079	—
Weymouth ..	24570	2246	—	Weymouth ..	8783	385	—
Wimborne ..	3742	31	—	Wimborne ..	15104	140	—
Total	123256	nett. 4798	—	Total	105002	nett. 194	—
Total Population of Administrative County ..						228,258	

^a Due to Decrease in Prison and Ship population.

MATERNITY AND CHILD WELFARE.

HEALTH VISITING SCHEME.

The whole County is covered *except the Boroughs of Poole and Weymouth*, which have their own Schemes. The County area is divided into eleven districts, six of which are worked by the County Council nurses, and the remaining five by the County Nursing Superintendent, and the Assistant Superintendents, assisted by 40 district nurses. The populations respectively covered being 70,000 and 85,000. Ante-natal visiting is undertaken to some extent and also the visiting children up to school-age. In addition to Maternity and Child Welfare work the Health Visitors and Nurses also act as school nurses, tuberculosis visitors, and visitors under the Mental Deficiency Act. The County Council Nurses and County Nursing Superintendents also act as inspectors of midwives. The former act as Dispensary nurses, and undertake the tuberculosis and mental deficiency visiting in the boroughs of Poole and Weymouth, which are under the County Council for these purposes.

INFANT VISITING DURING 1920.

(exclusive of Boroughs of Poole and Weymouth).

Number of Births Registered	Legitimate 3174	Illegitimate 179.	Total 3353.
Number of Births Notified	Live Births 2794.	Stillbirths 65.	Total 2859.
	(By Midwives 1071	By Parents and Doctors 1788.)	

(Note.—Particulars are also obtained from the Registrar's returns of births registered but not notified).

Summary.

No. of Cards issued to Health Visitors during 1920	..	..	..	2995
Left district	}	810		
Not traceable				
Over Rental limit				
Objections to visits				
No. of Infants reported on born during 1920	..	..	..	2185
Total number of infants visited during 1920	..	..	..	4208
Total number of visits	..	..	..	17,129
Average number of Visits to each Infant	..	..	..	4

MATERNITY AND CHILD WELFARE CENTRES.

County Council Centres.

In August, 1918, the County Council adopted a scheme for providing Maternity and Child Welfare Centres, at Bridport, Dorchester and Portland. The Dorchester Centre was opened in April, 1919, the Bridport Centre in January, 1920, The Swanage Centre opened in December, 1920, the equipment having been provided by the generosity of Mrs. Edwin Burt.

Voluntary Centres.

Centres have been opened by Voluntary Associations at Beaminster, Blandford, Gillingham, Maiden Newton, Sherborne, Thorncombe, Lyme Regis and Sturminster Newton.

These Centres are affiliated to the County Nursing Association, who have appointed a Child Welfare Committee, and an Organising Secretary.

The County Council make grants toward the expenses of certain of the Voluntary centres.

The *attendances* at the Centres during the year ended 31st December, 1920, were as follows.

	Date of Opening.	Number of Persons' Attendances; 1920.		Number of times opened, 1920	
Dorchester	15th April, 1919	102	513	..	48
Beaminster	25th Oct. 1917	90	335	..	47
Blandford	15th Aug. 1918	47	240	..	24
Lyme Regis	14th May, 1918	29	133	..	19
Sherborne	31st Oct. 1918	45	244	..	49
Bridport	Jan. 1920	81	501	..	49
Swanage	10th Dec. 1920	8	8	..	2

The Assistant Medical Officers attend at the County Council Centres and also at the Lyme Regis Centre. At the other Voluntary centre arrangements have been made with local medical practitioners.

PROVISION OF MIDWIVES.

Urban Districts.—The County Council pay a direct subsidy at the rate annually of £45 to the support of a qualified midwife at each of the Boroughs of Dorchester and Lyme Regis.

Rural Districts.—The County Council have made a grant of £900 to the County Nursing Association to aid in the establishment and maintenance of nurse-midwives in the rural and smaller urban districts.

LYING-IN ACCOMMODATION.

The County Council have sanctioned that the annual grant be increased from £200 to £300 as from the 1st December, 1920, for the admission of 32 cases yearly to the Maternity Wards at the Princess Christian Hospital, Weymouth, and a sum of £75 for 8 maternity cases yearly to the St. Mary's Home, Sturminster Newton, but owing to financial reasons the Committee of the St. Mary's Benefit Nursing Association are not at present able to carry out the alterations required by the Minister of Health.

FOOD AND MILK FOR MOTHERS AND INFANTS.

All the local Sanitary Authorities having expressed their willingness to provide food and milk for mothers and infants at a reduced price or free of cost in necessitous cases, the County Council made no provision except in connection with the two Welfare Centres provided by the Council, where the Medical Officer ordered what was necessary for mothers and children in attendance where the income available was below a certain scale. The method adopted as regards the County generally was as follows: The Health Visitor makes a declaration as to what quantities of milk are necessary, and the parent makes a declaration as to means on the back of the form, and this is sent to the County Medical Officer who certifies the case, and transmits the certified form to the Clerk of the District Council, who submits the case to his authority, and with their sanction, issues the order for the supply of milk.

The County Council decided to discontinue provision of milk at the two centres as from 1st April, 1921, and to leave the provision entirely to the District Sanitary Authorities.

Poole Borough.—Abstract of Dr. Nankivell's (M.O.H.) Report :—

There are four Borough Health Visitors, who are also School Nurses, each has a separate district. There were 1,031 births notified, and the Municipal Health visitor paid 1,024 visits to new babies, and 8,413 visits altogether.

Maternity Beds are provided at the Cornelia Hospital.

Centres—There are 5 centres. Number of Infants seen by doctor—360.
Number of attendances, 2,425 110 Health Lectures attended by 342 mothers.
Ante-natal advice given to 453 mothers by Lady-Superintendent at their homes.

Borough of Weymouth and Melcombe Regis.—Abstract of Dr. Barclay's (M.O.H.), Report :—

Five hundred and seventy-one births were notified in 1920, 39 of which were illegitimate.

Health Visitors.—Three Health Visitors giving half-time to maternity and child welfare, and half to school nursing.

They visit children from the tenth day up to twelve months, and in certain cases until school age. In 1920, 2,793 visits were paid to 480 infants. Printed cards giving advice as to the care and feeding of infants are distributed.

Centre-Municipal.—There is a Maternity and Child Welfare Centre at Enderby House. Mothers attend with their infants for advice and weighing of infants. A Lady's Auxiliary Committee has been appointed. An Ante-natal Clinic has been instituted. Maternity outfits are loaned to necessitous cases.

Cases which require advice other than the Health Visitor is authorised to give are referred to the Medical Officer of Health. *Lying-in accommodation* has been provided at the Princess Christian Hospital, 18 cases were admitted in 1920.

Statistics for 1920.

Number of Children attending Centre—601. Number of Attendances—3,074.
Number of consultations with Medical Officer—1,072.
Number of attendances of expectant mothers—120. Number of consultations with Medical Officer 30.

Milk (Mothers' and Children) Order 1919.—This is administered under the Maternity and Child Welfare Committee. No standard of wages is fixed. Each case is dealt with first by the Health Visitors, and upon their report, and after a personal interview the Medical Officer of Health deals with each case upon its merits. Thirty-four families were assisted for longer or shorter periods throughout the year.

INFECTIOUS DISEASES (Table II).

For the numbers of cases of the different diseases and the removals to Hospital reference should be made to Table II.

DIPHTHERIA.

The number of cases notified in the whole county was 229, of these 185 occurred in the Urban, and 44 in the Rural Districts. The majority of the cases occurred in the Borough of Poole where 141 cases were notified. Dr. Nankivell, M.O.H., states that 39 of these were "carriers," and 86 genuine cases of Diphtheria, and 16 cases of simple tonsillitis.

It is to be noted that a number of the Poole cases were removed to hospital chiefly on bacteriological evidence alone. I visited the Borough and suggested to the Medical Officer of Health that steps be taken to decide whether these "carriers" were infected with virulent bacilli, since it has been found that only from 10 to 20 per cent of "carriers" have bacilli capable of causing disease. The cost of making the special test is much less than the cost of maintaining cases in hospital.

Portland Urban District.—Extract from Dr. Howard's (M.O.H.,) report.

"Twenty-five cases were notified during the year. Three in the first, eight in the second, seven in the third, and seven in the fourth quarter of the year. Thirteen were residents of the Tophill and twelve of the Underhill District. Thirteen cases were removed to Hospital. Six cases occurred in three households. Swabs were taken from all contacts as a routine measure. As a result eight "carriers" were discovered, one of whom later developed Diphtheria."

Sherborne Rural District.—Dr. Rickett, M.O.H., reports as follows :—

"In the southern area there were seven cases of diphtheria, two of which terminated fatally. The outbreak was probably caused by visits to the neighbouring town of Yeovil in which the disease was prevalent. These seven cases occurred in three separate localities and no widespread epidemic occurred from them."

SCARLET FEVER.

There were no severe outbreaks during the year. 70 cases occurred in Poole Borough, 10 in Weymouth Urban District.

Beaminster Rural District.—Dr. Pim, M.O.H., reports as follows :—

"An outbreak of Scarlet Fever in the Parish of Poorstock at the beginning of the year which necessitated the closure of the Schools for 10 weeks.

The disease was introduced into the village by an unnotified case from Cardiff. The eleven cases which occurred were removed to Bridport Joint Isolation Hospital and the influx of such a number proved that the accommodation was inadequate. The Committee has now provided a temporary observation ward and permanent wards and offices are in course of construction which will, I believe, be sufficient to meet any demands in the future."

ENTERIC FEVER.

Seven cases were notified in *Poole Borough*. Of these two apparently had acquired the infection abroad ; in the other five cases the infection was presumably acquired within the district, but the source of the infection could not be definitely ascertained.

There were seven cases notified in the *Dorchester Rural District*, all of which occurred at the County Asylum. For a number of years cases have occurred from time to time and in November, 1918, there was a small epidemic. I have visited the Asylum at intervals and conferred with the Medical Superintendent. The cases in our opinion have been mainly due to infection by "carriers" or through direct contact, and possibly in some cases due to food and milk infection, or fomites. The number notified in recent years is as follows :—

1916	1917	1918	1919	1920	1921 (to Sept. 30th).
7	13	29	9	9	3
(M-4 F-3)	(M-8 F-5)	(M-3 F-26)	(M-2 F-7)	(M-3 F-6)	(M-1 F-2).

The evidence pointing to any of the cases being due to water infection is small, but the bacteriological investigations show that there is an intermittent contamination of the deep well, and possibly a few of the cases which have occurred may have resulted from this, but the chief, if not the only causes of the infection have been as mentioned above.

The alternative methods of avoiding any risk due to pollution are to boil the water to be used for drinking, and in preparation of food, or to sterilise the water by chlorination. The most satisfactory course would be to sink a new deep well at a considerable distance from the buildings, and in a position where there would be no reasonable possibility of contamination, the chief objection at the present time being the expense. It may be that the pollution of the present well would be prevented by dealing with defective drains where they exist.

Portland Urban District.—Dr. Howard, M.O.H., gives the following particulars about one of the cases in his district :—

"Two cases were notified. The second case, a child aged 4½ years, was notified on July 19th. Blood was obtained from the other members of the family for Widal's reaction. The mother gave a positive reaction. She had suffered from Typhoid Fever 16 months previously. She was now suffering from Jaundice, the result of an accumulation of gall stones in the gall bladder for which she has since been successfully operated upon."

ENCEPHALITIS LETHARGICA.

This disease is known in popular parlance as "sleepy sickness." It appears as a severe infection which attacks the brain, causing squint and stupor, and in many cases ends in death. In its predilection for the nervous system it resembles cerebro-spinal fever, and poliomyelitis (infantile paralysis). *Epidemic hiccough* is believed to be a mild or early manifestation of the infection, a different part of the brain being attacked.

Seven cases of encephalitis lethargica were notified. It is probably spread by "carriers." Two cases in the same house are rare, but several cases have occurred in one place. Three cases were notified from Poole, two from Sherborne, one from Shaftesbury, and one from Swanage, but there was also another probable case of a mild character in this town.

MALARIA.

The number of cases notified was 37, only one being a primary case, notified from the Beaminster Rural District. As regards this Dr. Pim, M.O.H. reports as follows :—

"One case of Primary Malaria occurred at Clapton Bridge. I failed to find any larvae of the *Anopheles Maculipennis* in the pools in the immediate neighbourhood, and I consider that the disease was contracted in the neighbouring County where the patient worked." (The C.M.O.H. reported the case to the M.O.H. of Somerset).

CEREBRO-SPINAL FEVER.

Four cases were notified, 1 in Urban and 3 in Rural districts. The cases were usually isolated ones.

POLIOMYELITIS.

No cases of this disease were notified.

MEASLES.

There were 31 cases notified, 26 in Urban and 5 in Rural Districts.

GERMAN MEASLES.

There were 2 cases notified, both in Urban Districts.

(NOTE.—Measles is only notifiable in a few of the County districts.)

PUERPERAL FEVER.

Twelve cases were notified 5 of these occurred in the practice of Midwives, and were inquired into by the Health Visitors. In no case was negligence reported.

OPHTHALMIA NEONATORUM.

Thirty-five cases were notified, of which 14 were in Midwives' practice. The latter were inquired into by the Health Visitors. Fifteen of the cases occurred at Poole and 14 at Weymouth.

TUBERCULOSIS.

NOTIFICATIONS.

The total number of notifications (all forms) in 1920 was 397. Excluding duplicate notifications and cases previously notified the number of primary notifications was 365.

Pulmonary Tuberculosis.—The primary cases, notified in 1920 numbered 326 ; in 1919, 275 cases ; in 1918, 358 cases ; in 1917, 249 cases ; in 1916, 199 cases ; in 1915, 181 cases.

Non-Pulmonary Tuberculosis.—The number of cases of non-pulmonary tuberculosis notified in 1920 was 46. The primary cases numbered 43.

DEATHS.—The total number of deaths in the County from all forms of Tuberculosis during 1920 was 215, of these 166 were from pulmonary tuberculosis (phthisis), 17 from tuberculous meningitis, and 32 from other forms, such as hip and spinal disease, tuberculous peritonitis, tabes mesenterica, etc. In 1920 there were 38 less deaths from pulmonary tuberculosis than in 1919.

VENEREAL DISEASES.

Existing Facilities for Treatment and Diagnosis.

Centres are available for Dorset patients at the following places :—Bournemouth (Boscombe Hospital) ; Yeovil (Yeovil Hospital) ; Salisbury (Salisbury Infirmary) ; Dorchester (Dorset County Hospital) ; Wyke Regis (Port Sanitary Hospital).

Provision has been made in the Budget for additional centres at Weymouth (Weymouth and District Hospital) and Poole (Cornelia Hospital).

(The expenses of patients travelling to the centres are paid when they are unable to afford them).

Table of Numbers Treated and Attendances at Treatment Centres during 1920.

TREATMENT CENTRE.	Dorchester	Wyke Regis (civil cases)	Bournemouth	Yeovil	Salisbury	Weymouth Port Cases	TOTAL.
Number of persons dealt with during the year at or in connection with the <i>Out-patient Clinic for the first time</i> and found to be suffering from:—							
Syphilis	30	19	52	3	1	20	125
Soft chancre	4	1	—	0	0	4	9
Gonorrhoea	24	26	50	3	3	25	131
Conditions other than venereal.. .. .	19	13	36	3	2	4	77
TOTAL ..	77	59	138	9	6	53	342
Total number of <i>attendances</i> at the <i>Out-patient Clinic</i> of all patients residing in the County	303	846	*1526	42	43	101	2861
Aggregate number of "In-patient days" of all patients residing in the County	42	174	177	10	—	303	706
Number of doses of Salvarson substitutes given in the :—							
1. Out-patient Clinic	96	162	486	8	1	26	779
2. In-patient Dept.	13	16	12	0	—	48	89
to patients residing in the County.							

*The number of attendances is exclusive of attendances for irrigation and local applications by nurses. The staff does not admit of sufficient supervision to ensure that patients attending record their numbers as instructed.

Laboratory Examinations.—Arrangements have been made with the Hampshire County Laboratory for examination of specimens from cases and suspected cases of venereal disease.

Propaganda Work.—This is undertaken by the County Branch of the National Council for Combating Venereal Diseases. The County Branch was formed in July, 1919, the Earl of Shaftesbury, K.P., being elected Chairman. An Executive Committee was appointed and also a Secretary. A number of Lectures have been given in various parts of the County.

Publicity arrangements.—Advertisements are inserted from time to time in the local papers. Circulars are sent to Local Authorities, Medical Officers of Health, Medical Practitioners, Midwives, Chemists, Clerks to Magistrates, and Social Workers. Information as to the Clinics is also given by placards.

ISOLATION HOSPITAL ACCOMMODATION.

In the whole County there are 228 beds available for isolating cases of infectious disease occurring within the County, and in addition 49 beds available for port cases. Part, however, of the port hospital accommodation is used occasionally for County cases, viz :—ten beds at the Poole port hospital and seven at the Weymouth one. On the proportion of one bed per 1,000 of population the number of beds available is sufficient but some of the accommodation is unsatisfactory. All the *Boroughs and Urban Districts* except Portland, Shaftesbury, Wareham and Wimborne, have Isolation Hospitals either of their own or jointly with another authority. Wareham send their cases to the Rural District Hospital and Wimborne send theirs to the Blandford Hospital, Lyme Regis to the Bridport Urban Hospital. Shaftesbury is thus the only district which is without any arrangements for isolating cases. Portland Urban Council has an arrangement with the Weymouth Corporation for the admission of their cases to the Borough Hospital. The number of beds available at the Weymouth Hospital has been increased to 70.

The following *Rural Districts* have no Isolation Hospitals :—Cerne, Dorchester, Sturminster and Wimborne. Beaminster have arrangements with the Bridport Borough for the reception of their cases. Poole Rural District have the right to send their cases to the Borough Isolation Hospital. Sturminster and Wimborne send their cases into the Blandford Isolation Hospital when considered necessary and when there is room for them.

Under the present circumstances I consider that the proper course is to make the best use possible of the present isolation hospital accommodation and not to provide new hospitals. Much of the existing isolation hospital accommodation is unused during a large part of the year. A new hospital will only be necessary for the Shaftesbury Urban and Rural Districts, and the Sturminster Rural district could advantageously be joined with these.

The attitude of some local sanitary authorities is to leave the provision of Isolation Hospital accommodation to the County Council. The local sanitary authority are, however, the Statutory Authority for preventing and dealing with cases of infectious diseases, and they cannot divest themselves of such responsibility. The County Council have no powers for enforcing notification, isolation, disinfection, and other measures necessary for dealing with infectious outbreaks, and their powers for providing isolation hospitals are optional and strictly limited under the Statutes, whereas the local sanitary authorities have very wide powers for hospital provision.

HOSPITAL ACCOMODATION FOR SMALL-POX.

Excluding the Port Hospitals, there is no *special* accommodation for small-pox. If outbreaks occur, the ordinary isolation hospitals must be used. Some of these are unsuitable owing to their nearness to centres of population and for other reasons. I have presented several special reports to the County Council advising that the County provide special hospitals for the purpose, but the Council are unwilling to incur the expenditure, and have requested the District Councils to consider the question of making the necessary provision.

Dorchester Rural District.—Dr. E. J. Day, M.O.H., reports as follows :—

" There is no Isolation Hospital in the District. This Council has made renewed efforts to combine with the Borough of Dorchester for the joint use of their Isolation Hospital, but so far without effect. The conditions offered by the Urban Authorities not being acceptable to this Council. The Scheme for combining with the Cerne Rural District Council to erect a joint Isolation Hospital has been indefinitely postponed owing to the cost of building."

Portland Urban District.—Dr. Howard, M.O.H., reports as follows :—

" Arrangements have been made during the year with the Corporation of Weymouth for the isolation of infectious cases at the Borough Isolation Hospital. Considerable difficulty has been experienced in the removal to Hospital of cases of Infectious Disease from the Tophill District, even when the sufficiency of the home isolation is bad. On the other hand, objections to removal to Hospital are rarely made in the Underhill District."

Disinfection.—" Arrangements have now been made with the Weymouth Port Sanitary Authority for the disinfection of articles of bedding and clothing at that Authority's disinfectory. The articles are removed in a covered van."

WATER SUPPLY.

The County Districts generally speaking have sufficient supplies. Water-borne disease is comparatively rare, except goitre, which is prevalent in places, usually in the slighter forms.

All the **Urban Districts** have public water supplies, which in most cases are reported to be of satisfactory quality. At Poole the question of installing a water softening plant is under consideration.

Bridport Borough.—The supply is not constant. Two of the Company's reservoirs are not in use.

Shaftesbury District Water Supply.—The water undertaking has been purchased by the town from the syndicate.

Swanage Urban District.—A new supply has been obtained from a source near Corfe Castle. It is estimated that 240,000 gallons daily will be available. The estimated cost is £35,000 and the Ministry of Health have sanctioned a loan for the purpose. The scheme as been prepared by Mr. Goodman, the Council's Surveyor, and is being carried out under his direction.

Lyme Regis Urban District.—Dr. Spurr reports as follows :—

"The supply is not constant but is turned off at night in the lower parts of the town. No analysis was made during the year. In July a section of the main 1½ in. galvanized pipe from Alexandra Hotel to Style Lane was replaced by 3 inch iron pipes."

The **Rural Districts** depend largely on supplies from wells and streams, and in a number of instances there is risk of pollution of these. A considerable number of villages have piped supplies. I reported on the water supplies of the Rural Districts in detail in my reports of previous years.

Shaftesbury Rural District Council—Buckhorn Weston Water Supply.—I attended and gave evidence at the Local Government Inquiry on the 4th of May.

Under the present Scheme only one-third of the houses in the parish are supplied. The District Council submitted a Scheme for an additional supply, the effect of which would be that three-fourths of the houses would be supplied and also most of the dairies. The estimated cost of the Scheme would involve an additional 2¼ rate, and there was opposition on the part of the owners whose properties would not be supplied, under the new Scheme. An alternative Scheme would be the continuation of the supply from Gillingham. If this were adopted the whole of the village could be supplied but there are certain difficulties.

Sherborne Rural District.—Dr. Rickett, M.O.H., reports as follows :—

"The difficulties mentioned in my previous reports for supplying part of the Southern area (*i.e.*, Bishop Caundle, Holwell Bishops Down) have not, and probably never will be overcome, the estimated cost of supplying, approximately £12,000 for 500 people is too great for the council to undertake. There is a distinct shortage of water in this area.

DRAINAGE AND SEWERAGE.

Blandford Borough.—For many years the question of providing a system of sewerage and sewage disposal for this Borough has been under consideration. Plans were prepared by the Engineers consulted and application was made for a loan of £30,000 by the Borough Council. An inquiry was held in November at which the Council stated their unwillingness to proceed with the Scheme at present owing to the expense

I attended the Inquiry and gave evidence as to the desirability of a sewerage scheme. There are at present 670 pail closets, 60 middens, and 150 water-closets in the town, the latter emptying into cesspools. Ashe are not used in the pail closets, which may be generally regarded therefore as potential nuisances. Although the town experienced extreme overcrowding during the War, there was on the whole a remarkably low prevalence of infectious diseases

Poole Borough.—Dr. Nankivell, M.O.H. reports as follows :—

"There are large areas of the Borough which are still unsewered. The Ministry of Health have sanctioned a Scheme for the sewerage of the Parish of Hamworthy, but up to the time of writing this Report the work of constructing these sewers has not been begun. There are no sewers for the large and populous district of Sandbanks where there are 110 houses; the people who live there have to get along as best they can with pail closets and cesspools. The whole of the district of Newtown with 179 houses is also unsewered, and there are no sewers in Rossmore. The part of the Borough known as "Heavenly Bottom" is unsewered and the so-called roads there are unpassable during wet weather; this disgusting state of this area was the matter for a strong report by the Medical Officer to the Health Committee during the past year. Although the Council has decided to sewer three of the roads in Heavenly Bottom, no action has yet been taken.

Cesspools and pail closets are relics of barbarism, and no excuse can be made for their retention in this Borough, parts of which, at any rate, claim to be fashionable health resorts. The cost of sewerage of the Borough might be considerable, but year by year over a thousand pounds is spent in emptying these cesspools and pail closets."

Portland Urban District.—Dr. Howard, M.O.H. reports as follows :—

" Last year I commented upon the fouling of the foreshore at the Freshwater Bay outfall. The Surveyor has since inspected the outfall, and reported to the Sanitary Committee, in February 1921, that he found the foreshores to be fouled for at least 26 feet, and made certain recommendations for dealing with it. The matter is still under consideration."

" Following upon my last Report and a communication from the Ministry of Health, the Surveyor was instructed to examine the sewers in King Street, Mallams, and Artist Row. For this purpose two trial holes were sunk in each of these three streets."

" The Council has now sufficient evidence as to the condition of these sewers in the Underhill District. As soon as the work of amendment or renewal is carried out, other sewers should be surveyed and reported upon, not waiting, as we did in the past, until defects became so manifest as to compel amendment, to avoid serious nuisance. I would also suggest that a sum be inserted each year in the estimates for such renewals or requirements, until the sewerage system of the district is completely overhauled."

" With a few exceptions the sanitary system of the district is entirely one of water closets, with adequate flushing by separate cisterns."

Weymouth Borough.—Dr. Barclay, M.O.H., reports as follows :—

" Several sewers reported to be defective prior to 1914 have not yet been repaired. The systematic flushing and cleansing of the sewers, many of which have very slight falls, has not yet been resumed."

" Towards the end of the year a beginning has been made to replace the old catch pits with their overflow pipes and drains, which for many years had been an eyesore, after a rainstorm, by substituting rubble drains extending for some distance under the sands. This is an improvement upon the old system, but my previous experience of these rubble soak-away drains has made me pessimistic as to their ultimate utility."

" The enforcement of a flushing cistern for each W.C. ceased during the period of the war, and has not yet been resumed, though the number of closets still hand-flushed is now very small."

Poole Rural District.—Dr. W. T. G. Robinson, M.O.H., reports as follows :—

" The district is still unsewered ; but Broadstone has a complete Sewerage Scheme awaiting the sanction of the Ministry of Health. Application for the latter has been postponed by the Council for financial reasons."

" The cesspool system is therefore still in use ; the Council have a satisfactory emptying plant which works well, and the numerous complaints of former years are never received, except in a bad wet time, when several of the cesspools overflowed, but not often."

Shaftesbury Rural District.—Dr. Gould, M.O.H., reports as follows :—

" The small water-courses which flow into the larger streams are the frequent recipients of farm drainage and sewerage, while into the Stour direct flows much sewage and objectional matter."

" Gillingham is provided with sewers, otherwise the district is practically without sewers, the exceptions being a small portion of Alcester, Bourton and Cann."

MARSHLANDS.

Weymouth Borough and Rural District—Marshlands at Lodmoor.

Serious complaints were received during the year regarding the nuisance caused by the mosquitoes to the inhabitants living in the parts of Weymouth in the neighbourhood of the Marshlands at Lodmoor. There can be no question that the presence of these mosquitoes constitutes a potential risk to the health of individuals in the neighbourhood. A Conference has taken place between the representatives of the Weymouth Borough and Rural Councils and their Officials, which I attended.

The Weymouth Corporation have in previous years treated large portions of the Marsh with paraffin in order to destroy the mosquito larvae, and with considerable success, but owing to the extent of the marshes, and their present condition, the expense is a serious one, and it is desired that systematic efforts should be made to improve the drainage, some of the channels having become blocked, and the containing banks having become broken down.

Since the larvae of the anopheles mosquito, the carrier of the malarial organism, have been found in a number of the ditches and pools in the marshlands, and specimens of the mosquito itself have been found in the neighbourhood, it is of the utmost importance that the matter should be adequately dealt with, or an outbreak of malarial fever may occur, in the event of the mosquitos becoming infected with the malarial organism ; such outbreaks have occurred in several places in other parts of the country near marshy areas.

Dr. Barclay, M.O.H., Weymouth Borough, makes the following statement in his report :—

"At the North-East end of the Borough the drainage from the higher agricultural land around passes through a series of dykes or channels, and by means of a culvert, thereafter, to the sea. These also cause a section of marshland, which extends considerably beyond the Borough area. These marsh lands of recent years have become the breeding grounds for mosquitoes, and for some years past extensive measures have been used for the destruction of the mosquito larvae, by means of spraying with petroleum. Though this spraying has had some effect in lessening the number of these winged pests, the condition of the greater part of this marsh, thickly covered as it is with reeds, has not allowed of a large surface of it being treated, with the result that complaints continued to be received as to the discomforts arising from the bites of the insects. As only some 50 acres, about one-fourth part of the marsh land, is within the Borough area, the owners, lessees, Rural Sanitary Authority and County Council have been communicated with for joint action, and a conference of such held on the spot."

POLLUTION OF STREAMS.

River Brit.—The chief places of pollution are at Beaminster and Bridport. At Beaminster the river receives drainage of the village (in which there are 1,860 inhabitants), and at Bridport there is pollution by the Factories.

River Stour.—There is some pollution of this stream by the towns and villages on its banks. The provision of sewage disposal systems for the towns and larger villages would be the most satisfactory way of dealing with the matter, but none of the pollutions appear to be of an important nature.

COWSHEDS AND DAIRIES.

In certain districts the Dairies and Cowsheds are not being inspected with sufficient regularity. A number of cowsheds are defective as regards construction, drainage, and water supply.

The Milk and Dairies (Consolidation) Act, 1915, has been postponed from coming into operation until not later than the expiration of one year after the termination of the War. Under this Act important powers and duties are imposed upon County Councils.

I have been engaged during the past year in systematically personally inspecting the cowsheds and dairies in the county. Up to the present I have inspected 172, chiefly in the following rural districts :—Bridport, Poole, Sherborne, Sturminster, Weymouth and Wimborne. I have reported my findings generally to the various councils and have called especial attention to the defective condition of 65 of the sheds, which I have inspected.

Portland Urban District.—Dr. Howard reports as follows :—

" There are now 20 cowsheds in the occupation of 18 cowkeepers. There are also four purveyors of milk produced outside the district. The premises are periodically visited by the Sanitary Inspector. An inspection of the cowsheds was recently made by the Inspector and myself, and in over 50 per cent of the sheds insanitary conditions were found. The milkers' hands were not clean. The impression left on my mind as the result of this inspection was that so far as cleanliness was concerned, the conditions in the cowsheds have reverted to what they were 15 years ago."

" I would urge on the Council the necessity of at once enforcing the Dairies, Cowsheds, and Milkshops Regulations. It is of little value to make inspections and reports unless they are followed by action. The apathy of the cowkeeper in relation to the simplest rudiments of hygiene has got to be shaken off. We are not calling on the cowkeeper to make any capital expenditure all we ask for is improvement in the methods of production and of handling milk, and that the sheds, yards and cows are kept clean. I would also suggest that authority be given to call in a veterinary surgeon in any suspected case of tuberculosis."

Blandford Rural District.—Dr. Daniell reports as follows :—

" I have inspected all the dairies during the year. Out of 67 inspections, 32 were found to be badly kept or requiring sanitary amendment."

Wareham Rural District.—Dr. Courtenay reports as follows :—

" We have about 30 milk sellers, but no milk shops. The number of cows milked is roughly about 900 ; and about 265,750 gallons of milk sold. The general condition of sheds and dairies is not all that might be desired, and a general improvement is hoped for in the ensuing year. More frequent whitewashing and cleaning out yards is much desired ; and structural alterations in several dairies are necessary."

Wimborne Rural District.—Dr. Thomson, M.O.H., reports as follows :—

" Dairy Farms are numerous, and some of them large, supplying not only the district, but also sending large quantities of milk to Bournemouth, Southampton and London. Unfortunately we cannot get anyone in the district to supply Grade A Milk or Grade A. (Certified) Milk."

" The cowsheds and yards are still in a great many instances very unsatisfactory, little has been done during the war and the cost of labour and materials since have prevented it. It is important now however, to make an effort to obtain repairs and improvements and regular inspections will be necessary in order to ensure that these will be carried out."

" The difficulty of the inspector having to cover such great distances is still unsolved and in my opinion he should have a Motor Cycle."

" Cowsheds and Dairies, &c.—Approximate number in District	..	..	..	..	..	261
Inspections made	..	..	..	..	..	82 "

Weymouth Rural District.—Dr. Pridham, M.O.H., reports as follows :—

" The standard of cleanliness of the milk produced in this district must be raised. The dangers of unclean milk, especially to infants, should be realized, and the responsibility thereby incurred must be brought home to each individual who is concerned either in the production of milk or in its transport to the consumer."

GRADE "A" MILK AND GRADE "A" (CERTIFIED) MILK.

The Local Authorities (Milk) Order No. 379 of 1921, of Ministry of Health, and the Milk Order No. 359 of 1921, made by the Food Controller.

Licences for the sale of Grade "A" Milk and Grade "A" (Certified) Milk will be issued by the Minister of Health instead of by the Food Controller.

The Local Authority (under the Sale of Food and Drugs Act) that is in this County, the County Council (except as regards the Boroughs of Poole and Weymouth) are authorised to execute and enforce the provisions of this Order within their area and to institute proceedings for any offence against this Order.

The licensing of Wholesale Dealers, and the registration of Retail Dealers will be continued for the present by the Board of Trade.

Grade "A" Milk is milk produced under specially clean and hygienic conditions from a herd free from tuberculosis.

Conditions of Licence (Abstract) :—

- i. All the herd must have passed the tuberculin tests.
- ii. Facilities must be given for taking of samples.
- iii. A minimum standard of 300 points out of 500 for equipment and methods.
- iv. The milk must be cooled on the farm and be consigned by the producer to the consignees in a sealed container, having a descriptive label with the address of the farmer or farm where it is produced, day and time of production (morning or evening), and the words "Grade A Milk" must be painted in white 4-in. letters on the body of the container used.

Grade "A" (Certified) Milk.

Additional Conditions for Licence.

- i. The milk must be cooled and bottled in steam sterilized bottles immediately after production.
- ii. Every bottle must have a suitable cap and be labelled with name and address of producer, date of production, and words "Grade A (Certified) Milk."
- iii. The milk must not contain before delivery *Bacillus Coli* in 0.1 cubic centimetre or more than 30,000 bacteria per cubic centimetre.
- iv. The milk must not be delivered to the consumer more than two days after the day of production.

The *advantages* of Grade "A" (Certified) Milk are :—

1. The Milk, owing to the conditions under which produced, is practically free from contamination, and therefore keeps much longer than the milk ordinarily sold.
2. It is free from tubercle infection.
3. It usually shows a much higher cream percentage than the average milk, which is probably due to the cows being carefully selected, and to methods of feeding.

The Ministry of Health require that the County Council arrange for samples of Grade "A" (Certified) Milk to be taken at intervals for bacteriological examination.

There is at present only one producer of Grade "A" (Certified) Milk in Dorset (Mr. Symes, Manor Farm, Fordington). Authority has been given me to procure samples for bacteriological examination at intervals.

ADMINISTRATION OF THE HOUSING OF THE WORKING CLASSES ACTS.

The action which has been taken by Local Sanitary Authorities is shown in the Abstracts of the reports.

HOUSING INSPECTION (See Table VI.)

The regular inspections required under the 1909 Act are not being carried out satisfactorily in certain districts, and proper records are not being kept. There is much delay in carrying out necessary repairs.

HOUSING SCHEMES.

The progress made with the Housing Schemes cannot be considered satisfactory. The excessive cost of building provided reluctant local authorities with reasons for not proceeding more rapidly with their Schemes, but undoubtedly the exorbitant prices acted as a deterrent to willing authorities, for instance the lowest tender the Dorchester Rural District received for 16 houses worked out at £1,382 15s. 0d. per house and was not accepted. The total number of houses completed or under construction, September, 1921, is 425. Although much below requirements, the number is a substantial one.

I have obtained the opinions of Surveyors to the Local Authorities in this County as to the reasons for the high cost of Housing and these may be summarised as follows :—

1. The greatly increased cost of labour and materials.
2. The absence of competition among Contractors, who have to be solicited to undertake building under the Schemes.
3. The greater margin of profit required by the Contractors.
4. Short hours and decreased output.
5. The contracts under the housing schemes sanctioning all increases in the cost of labour and material.
6. State assistance.
7. The special requirements as to construction demanded by the Ministry of Health.

Pre-War Cost.—Before the War excellent six-roomed cottages were built by the Borough Councils of Bridport and Lyme Regis at a cost (including sites) of £232 each, and five-roomed cottages were built at Sherborne and Bridport at a cost of about £160 and £182 each respectively.

Having regard to the pre-war cost, and having made due allowances for the increased cost of living, one cannot see any justification for the present charges. The cost of building a five-roomed cottage ought not to exceed £500, and for a six-roomed cottage £600 should be sufficient and these prices ought to be greatly reduced with the fall in cost of materials and of living.

The actual cost of the houses built under the various Schemes in the County has varied from £792 to £900 for a five-roomed cottage, and from £900 to £1,200 for a six-roomed house. (See Table).

The action of the three Authorities in the County who built houses before the War has been amply justified, and the undertaking has been a profitable one from the ratepayers' standpoint.

Effect of the Government Subsidy.—Although the Government grant has resulted in an exorbitant rise in the cost of building, it has been successful in securing the construction of a number of houses in this county in districts where there had been great housing scarcity before the war, and where the local authorities had taken no means to provide dwellings under the 1909 Act.

PRESENT POSITION OF HOUSING SCHEMES (SEPTEMBER, 1921).

DISTRICT.	The approximate number of houses for the building of which contracts have been entered into or other arrangements made	The approximate number of houses under construction.	The approximate number of houses completed.	The approximate cost per house of the non-parlour type.	The approximate cost per house of the parlour type.	The rentals (excluding rates) charged or proposed for each type.
<i>Urban.</i>						
Blandford ..	Nil	—	—	—	—	—
Bridport ..	40	40	—	£800	£900	not yet fixed
Dorchester ..	14	14	12	—	£1100—£1200	9/- weekly
Lyme Regis ..	Nil	—	—	—	—	—
Poole ..	115	—	115	—	—	—
Portland ..	Nil	—	—	—	—	—
Shaftesbury ..	16	10	6	£792	£1027	6/6 & 10/- weekly
Sherborne ..	36	—	36	—	£1200	9/6 wkly & rates
Swanage ..	22	10	12	£863 7s. 10d.	£973	5/3 weekly
Wareham ..	10	10	2	£822	—	"A" type 10/6, "B" type 12/6
Weymouth ..	Tenders have	been invited for	30 houses	—	—	7/- per week, plus rates
Wimborne ..	20	12	8	—	£1100 approx.	10/- weekly
	273					
<i>Rural.</i>						
Beaminster ..	Nil	—	—	—	—	—
Blandford ..	18	18	—	—	£1063	6/- weekly
Bridport * ..	60	60	—	—	—	—
Cerne ..	10	—	10	—	£1200—£1300	5/6 weekly (temp)
Dorchester ..	Nil	—	—	—	—	—
Poole ..	16	—	16	—	10 at £900 6 at £937 10s.	15/- & 11/6 in- clusive of rates
Shaftesbury ..	20	20	12	—	—	9/- per week
Sherborne ..	Nil	—	—	—	—	—
Sturminster ..	22	22	2	£900	£1000	6/6 weekly, Non- Parlour type
Wareham ..	Nil	—	—	—	—	—
Weymouth ..	Nil	—	—	—	—	—
Wimborne ..	6	—	6	—	£1000	7/6 weekly, Parlour type
	152					10/- weekly
Total	425					

* In addition 4 Army Huts are being converted into dwellings.

In the *Urban Districts*, 273 houses have been completed or are under construction.

In *Poole Borough*, ^{are being or} 115 houses have been constructed.

This number is much below the estimated requirements, but still even this number is to be regarded with satisfaction, and as a result of the subsidy, since the Town Council constructed no houses under the Housing Act of 1909.

The *Portland Urban Council* have failed to provide any houses although these are much needed for their district.

Bridport Borough has 40 houses under construction ; Dorchester, 14 building or completed ; Shaftesbury, 16 ; Sherborne, 36 ; Swanage, 22 ; Wareham, 10 ; and Wimborne, 20.

In the *Rural Districts* the number of houses provided has fallen far short of expectations, but even here in isolated instances, the grant has resulted in a number of cottages being constructed, and 152 houses are completed or building.

In *Blandford Rural District* 18 houses are being built, in Bridport Rural District 60 (this is the highest of any rural district) ; in Cerne district, 10 ; in the Poole District, 16 ; in the Shaftesbury district, 20 ; Sturminster, 22 ; and Wimborne, 6.

Poole Borough.—Dr. Nankivell, M.O.H., reports as follows :—

Housing.—" The Council has prepared a Housing Scheme with the ultimate object of providing 400 working class houses."

" There is, owing to the housing shortage, considerable overcrowding. At the last Census 1.9 per cent. of the population was living in a condition of overcrowding. The next Census will show a much higher figure. It is useless to prosecute persons who live in overcrowded houses until the proper remedy, namely additional houses, has been provided. Throughout the year the Health Department has been unable to ameliorate conditions of physical and moral overcrowding.

" An area to the east and south of the High Street, Poole was represented as an unhealthy area by the Medical Officer of Health during 1920. The Council has decided to clear this area, which is indeed already partly cleared, and to rehouse the population.

" During the year 34 complaints were received from house-holders under the Rent Acts and otherwise that their houses were not in all respects reasonably fit for human habitation. All these complaints were at once investigated, and all the defects which were discovered were remedied."

Portland Urban District.—The following are extracts from Dr. Howard's Report :—

" The shortage is, however, very evident by the long continued search that has been necessary to secure a house, and the fact that tenants, in many instances, have been compelled to purchase, in order to obtain a house. In the Underhill District, the Housing shortage is most acute. Every small house that can be considered habitable, even by old standards, is occupied. There is a tendency for the poorer classes to demand the better houses which their increased wages allow them to pay for, at least, so long as rents are limited by law.

" To meet the shortage it was estimated that 70 workmen's dwellings would be required within the next three years. Reviewing the position this year, after an inspection of various parts of the district, I am satisfied that the number of houses was under-estimated. The 70 houses which the Council proposes to build are all of the same type, commonly known as " parlour cottages."

Overcrowding.—" Extent.—There is undoubtedly a large amount of overcrowding in the district. The extent may be gauged in some degree by a recent inspection I made, in the Underhill District, with the Sanitary Inspector. Two-thirds of the houses examined had one apartment overcrowded. Hundreds of houses originally intended for one family, are now occupied by two or three.

(2) The main cause is, of course, lack of houses. Even in very gross cases it has been found impossible to take action. Three bad cases were reported to the Committee, but only in one instance was the nuisance satisfactorily abated."

Fitness of Houses.—“(1) (a) and (b). The general standard of working class houses in the District is decidedly poor. The unfit houses are mainly the very old houses built long before any bye-laws were in force. These comprise, in many instances, the dwelling-houses of the alleys in the Underhill District. Their principal defects are, deficient ventilation, low ceilings, defective lighting, insufficient window space, damp walls of living and sleeping rooms, lack of conveniences for decent living, e.g., proper facilities for cooking and storing food, and washing accommodation.”

Difficulties in remedying unfitness, etc.—There is great difficulty in getting ordinary repairs done owing to the cost of labour and materials. The impossibility of obtaining other accommodation for the tenants of unfit houses, if they were temporarily closed for repairs, was also a factor.

“The cost of labour and materials, the Rent Restriction Act and the absurd uneconomic rents which obtain in the district render owners of cottage property unable or unwilling to undertake repairs.”

Dorchester Borough.—The following are extracts from Dr. Day's Report :—

“Under Section 17, of the Housing and Town Planning Act, 1909, the number of dwelling-houses inspected during the year amounted to 337.”

“The various defects which have been discovered in the course of the inspections have necessitated the service of two notices under Section 15 and 117 notices under Section 28 of the Housing and Town Planning Act, and 56 notices under the Public Health Acts.”

“At the Committee Meetings following the expiration of the periods specified in the notices, reports are submitted with respect to the progress made towards compliance, and a full list of all outstanding work is also presented at each meeting.”

General Housing Conditions.—“There is a shortage of houses, to meet which there are two building schemes. In one of these 14 houses are already commenced and will probably be completed in 1921.”

Weymouth Borough.—The following are extracts from Dr. Barclay's Report :—

Housing—General Housing Conditions in the District.—“(1) Conditions remain as formerly; one cannot add more to what has been written for years past, that the need for houses fit for human beings to live in, not the tumble-down, back to back, airless, sunless, insanitary hovels, relics of the pre-reform days, when houses were run up solely for the purpose of manufacturing Parliamentary votes, which are in present use—continues to increase. (2) Extent of shortage or excess: (a) I estimate the shortage of houses for present use and in the immediate future as not less than 300, probably more (b) Measures taken or contemplated to meet any shortage; Land has been secured and a scheme sanctioned for the erection of 150 houses. At the end of the year the roads and sewers were under construction. (3) The reduction in the number of employees at Whitehead's Torpedo Works (outside the area) has to a slight extent relieved the congestion arising from two or three families occupying one working-class house not adapted for a tenement dwelling, and the contemplated closing of the Works entirely will also tend in the same direction; otherwise it is unlikely that any important change in the population will occur.”

(2) “General action taken as regards unfit houses. Prior to 1914 active measures were being enforced under the Public Health Acts Amendment Act, 1907, and to a lesser degree under the Housing Acts, to make these latter type of houses in all respects reasonably fit for habitation. From 1915 to 1919 action generally, unless in grave cases, was suspended, but resumed in this latter year, but owing to the high price of materials, with more difficulty than formerly. During the past year action has been taken under Section 28, Housing Acts, 1919.”

Swanage Urban District.—Dr. McCausland Reports as follows :—

“There is still a demand for Working class houses, some of the older cottages being overcrowded. We have deferred condemning any houses till the housing scheme has been completed.”

Sherborne Urban District.—Dr. MacCarthy reports as follows :—

“Thirty-six new houses are nearly completed, 28 being occupied, just fulfilling the local demand for such houses. The rental and rates of these amounts to 15s. 3d a week a sum far greater than the average working-man can afford.”

Overcrowding.—“The hopes expressed in last year's report that the proposed new houses would relieve the overcrowding have been falsified.”

“It seems well nigh impossible to deal satisfactorily with the few bad cases of overcrowding.”

Fitness of Houses.—“One of the pressing necessities for Sherborne is a comprehensive and well thought-out scheme for pulling down, and in part rebuilding a large number of cottages and building about 50 non-parlour cottages.”

Weymouth Rural District.—Dr. Pridham reports as follows :—

Housing.—The housing accommodation is far from good. Many of the cottages are old and in a bad state of repair. In some cases repairs and alterations have made such premises suitable for occupation, but in many other cases nothing has been done. There is a great need of new cottages so that closing orders may be made in respect of the old ones. At present it is useless to ask for a closing order as the present occupants have nowhere else to go. There is a certain amount of overcrowding.”

SCAVENGING.

Poole Borough.—Dr. Nankivell reports as follows :—

" During the summer and autumn an attack was made by the Health Department on the collections of horse manure, especially in the old Town. Over thirty filthy manure heaps were discovered. These were removed and the further accumulations taken away once a week."

Blandford Borough.—Dr. Daniell, M.O.H., reports as follows :—

" I would again draw attention to the faulty Dust Bins and to the need of dealing with Refuse. The Pit at the top of Milldown is objectionable and an eyesore to passers by. There is another huge dump at Mr. Upshall's farm. The proper method of dealing with this is by the use of an Incinerator."

Portland Urban District.—Dr. Howard reports as follows :—

" In 1917 I submitted a Report calling attention to the method of collection of house refuse, and the nuisance caused by it. There has been practically no change since that Report. Refuse is still collected and conveyed in an uncovered wagon. Apart from the fact that refuse and paper are blown about the streets when the refuse is being collected, there are times (more particularly in the summer) when most unpleasant odours arise therefrom. Many complaints as to the nuisance have been received."

" A large number of houses are without properly covered receptacles for refuse, and attention has been frequently called to this omission."

" The house refuse, together with the contents of the cesspools that are emptied, is conveyed to Wide Street, where it is tipped into a quarry, situated about 250 yards from the highway, and in close proximity to a factory. Complaint has been made as to the noxious smells arising therefrom at certain times. The nuisance arising at times is considerable, and I have again to call your attention to the urgent necessity that exists for a Refuse Destructor."

Weymouth Borough.—Dr. Barclay, M.O.H., reports as follows :—

" A beginning was made in 1912 to enforce the provision of a suitable bin to replace the varied receptacles, foul and uncovered, that were in almost universal use, but has been in abeyance during the past six years. Its enforcement has been again urged, but has not received sanction. The removal is by means of covered carts."

Poole Rural District.—

" The Council undertake the work of emptying cesspools and earth closets and the collection of house refuse in the Parish of Canford Magna only."

" Parts of the Parish of Kinson are assuming such an Urban character that it will be advisable for the Council to consider the question as to whether they should undertake this work here. During the last twelve months 40 new houses have been erected in this Parish and if it had not been for the fact that the proposed extension of the Government grant had been rejected by the House of Lords, probably as many more would have been well on the way to completion. Provided the Subsidy goes through and materials are obtainable, there is no doubt that this parish will go on increasing at an abnormal rate, and the question of adequate sanitation will require serious attention."

Wimborne Urban District.—Dr. Auld, M.O.H., reports as follows :—

" This is done twice a week. The material being removed to deposit grounds. A new deposit ground has been acquired in a more suitable place, this will shortly be in use. Arrangements are being made for the erection of a Destructor. The Bucket system is in use, each house retaining its own bucket. Suitable mould is provided by the Council."

ADMINISTRATION OF THE MIDWIVES ACT.

The administration of the Midwives Act is under the Public Health and Housing Committee. A special Sub-Committee of this has been appointed to deal with urgent cases. The Local Sanitary Authorities are asked to co-operate with the supervising Authority by reporting cases of malpractice, negligence, or mis-conduct, and in furnishing information where a midwife has been exposed to infection, or a case of puerperal fever has occurred in her practice.

The number of certified midwives on the County Register at the end of the year was 84. Of these, 72 had been certified by examination and 12 by reason of having been in *bona-fide* practice prior to the passing of the Act. The midwives attend about 40 per cent of the births.

During the year 226 visits were made for inspection purposes, 215 being routine and 11 special visits, Instructions were issued to 26 Midwives respecting the keeping of their registers and the condition of their instruments and appliances. Several uncertificated women who were suspected of having acted as Midwives habitually and for gain were warned. Owing to the lack of certified Midwives in certain districts there has been much uncertified practice. It was not found necessary to report any cases to the Central Midwives Board during the year.

The inspections have been carried out partly by the County Nursing Superintendent and County Health Visitors, and partly by the Assistant Medical Officers. All Midwives known to be practising in the County are provided with a supply of forms for the various notifications which they are required to send to the Supervising Authority under the rules of the Central Midwives' Board. They are also supplied with a Register.

The notifications received during 1920 were as follows :—

Of sending for medical help	..	..	..	241
Of still-birth	..	..	..	43
Of the death of mother	..	..	..	—
Of the death of child	..	..	..	5
Of laying out of dead	..	..	..	27
Of liability to be a source of infection	..	..	..	25
Of artificial feeding..	..	..	..	27

Midwives Act, 1918.—The effect of Section 14, has been excellent. This section requires a midwife in any emergency (as defined in the Rules) to call in to her assistance a registered medical practitioner whose *fee will be paid* (according to a scale) by the County Council, who may recover the fee from the patient or husband, or other person liable to maintain the patient, unless these persons are by reason of poverty unable to pay.

Previous to this Act, a midwife not infrequently hesitated to advise that medical help be obtained with occasional disastrous results to the mother and child, and with the result to herself that she was reported to the Central Midwives Board and her name removed from the Roll.

In view of the uncertainty of being paid his fee there was sometimes difficulty in obtaining the services of a doctor in an emergency. In a number of instances when the doctor did attend he received no adequate fee.

It is impossible for anyone who has not conducted a difficult confinement to realize the great anxiety and responsibility involved, and if this is felt by an experienced doctor one can imagine how much more heavily it must be experienced by a midwife working single-handed under difficult conditions with her reputation and living at stake.

Financial Statement.—Regarding working of the Act from 1st January 1918—30th June, 1921 (2½ years).

No. of cases in which Doctors requested to attend	..	..	..	560
No. of cases in which Doctors had been paid by County	..	..	..	119
Amount paid to Doctors,	..	..	£201 18s. 6d.	
Amount of Fees recovered from patients,	..	..	£36 14s.	
Amount not recovered,	..	..	£165 4s. 6d.	

Some objection has been raised to the Section of the Act, and attention has been called to the difficulties in recovering the fees from those who are able to pay.

It is possible that in a limited number of instances the fees or a sufficient proportion are not recovered from persons who are able to pay. I confess I am not in sympathy with the objections raised on financial grounds. The birth of children is the most important function in the world and is attended with peculiar perils. No woman should be grudged adequate assistance during her confinement. If there is one service which deserves assistance out of public funds it is midwifery and nursing services and assistance to the mothers at childbirth. In effecting economies these should be the last services touched. One could indicate economies in other directions of less useful services.

ADMINISTRATION OF THE SALE OF FOOD AND DRUGS ACTS, 1875 TO 1907.

The administration of these Acts is in the hands of the Public Health and Housing Committee. The Chief Constable is the Chief Inspector, and the Sergeants of the Police have been appointed Inspectors. Formerly the Superintendents acted as such. The Chief Inspector reports quarterly to the Committee. The Joint County Analysts, Mr. C. G. Moor and Mr. W. Partridge (30, Great James Street, Bedford Row, W.C.) report annually.

During 1920, 245 samples were analysed by the County Analyst. Of these 6 were found to be adulterated, a percentage of 2.42.

Table showing samples taken in separate County Districts and Results.

	URBAN DISTRICTS.										RURAL DISTRICTS.										TOTAL.				
	Blandford	Bridport	Dorchester	Lyme Regis	Poole	Portland	Shaftesbury	Sherborne	Swanage	Wareham	Weymouth	Wimborne	Beaminster	Blandford	Bridport	Cerne	Dorchester	Poole	Shaftesbury	Sherborne		Sturminster	Wareham	Weymouth	Wimborne
Arrowroot ..			1							1		2	1				1		1		2				9
Baking Powder ..		1		1					1								2				2				7
Bread ..	1	1	1			2		1	2	1											1				10
Butter ..		1								1							1	1	1	2		1			8
Camphorated Oil ..			1			1																			2
Carbonate of Soda ..			1	1		1											1								4
Castor Oil ..						1											1								4
Cheese ..		1		1		1		2				2							2						8
Cocoa ..	1		1				1	1		1									2		1				8
Coffee ..	1		2			2						2							1		1				9
Curry Powder ..	2			1				2							1							1	1		8
Custard Powder ..	1		1					1				1	1						3						8
Cream of Tartar ..	1	1							1			1													4
Citrate of Magnesia ..		1	2																						3
Egg Powder ..			2	1		1				1									1						6
Epsom Salts ..	2									1		1									1				5
Flour ..		1	1						1	1				1		2									8
Gregory's Powder ..								1		1											1				2
Jam ..			1					2	1			1	1	1					1			1			9
Lard ..	1					1				1		2						1	1	1					9
Lime Water ..	1		1	1								1	1								1				5
Liquorice Powder ..									1	1		1									1				4
Margarine ..		1	1			1		1		1											1				6
Marmalade ..									1	1		1	1	1	2				2		2				10
Milk ..		1	1	1		1		1	2	1		2		4	1	1	1			2	2	1		1	21 (+3*)
Mixed Pickles ..			1	1		2				2		1					1		1						9
Oatmeal ..	1		1			1		2		1			1						1						8
Olive Oil ..								2												2					4
Piccalilli ..	1		2			1			1									1	2		1				9
Pepper ..						1							1												2
Self-Raising Flour ..		1		2				1				1		1							1		1		8
Sugar	1	1	1			2				1		1					1								8
Tea	1		2	1				1				1		1		1	1				1				10
Tapioca ..	1	1	1	1		1	1										1				2		1		10
	16	12	25	12		20	2	18	11	17		21	6	9	2	11	8	3	20		26	2	3	1	245(+3*)

* Taken under Milk and Cream Regulations but dealt with also under Acts.

ADULTERATED SAMPLES.

URBAN.	Blandford	Milk	Prosecution	Conviction (Fined 5/-)
	Portland	Milk (2)	Prosecutions	Dismissed
	Wimborne	Milk	Prosecution	Conviction (Fined £5)
RURAL.	Dorchester	Milk	Prosecution	Dismissed
	Wimborne	Milk	Prosecution	Conviction (Fined £5)

ANNUAL REPORT OF THE JOINT COUNTY ANALYST, MR. W. PARTRIDGE, F.I.C.

In the absence of Captain C. G. Moor, I beg to lay before you a Report on my work as Joint Public Analyst for the year 1920.

Two-hundred and forty-five Samples were submitted under the Sale of Food and Drugs Acts, this total being made up as follows:—

Milk 21, *Butter* 8, *Margarine* 6, *Cheese* 8, *Lard* 9, *Bread* 10, *Flour* 16, *Arrowroot* 9, *Oatmeal* 8, *Tapioca* 10, *Baking Powder* 7, *Egg Substitute Powder* 6, *Custard Powder* 8, *Coffee* 9, *Tea* 10, *Cocoa* 8, *Sugar* 8, *Marmalade* 10, *Jam* 9, *Pickles* 18, *Pepper* 2, *Curry Powder* 8, *Olive Oil* 4, *Cream of Tartar* 4, *Lime Water* 5, *Liquorice Powder* 4, *Bicarbonate of Soda* 4, *Epsom Salts* 5, *Citrate of Magnesia* 1, *Camphorated Oil* 2, *Castor Oil* 4, *Gregorys Powder* 2, and *Magnesia and its Carbonate* 2. In addition, three samples of milk submitted under the Public Health (Milk and Cream) Regulations, 1912, were further dealt with under the Sale of Food and Drugs Acts.

Six Samples were reported as adulterated, a percentage of adulteration of 2.42. All adulterated samples were of milk.

The average percentage of fat in milk was 3.72 and of solids-not-fat was 8.65. To deal with a point that periodically arises, if 10 parts of water were added to 90 parts of this average milk, the product would have the composition of fat 3.348 per cent., and solids-not-fat 7.785 per cent. The fat is still well above the amount mentioned in the Sale of Milk Regulations, 1901, but the solids-not-fat are below the 8.5 per cent. therein mentioned by 0.715 per cent., which would allow a calculation of 8.4 per cent. of added water.

Three samples of Butter containing no preservative contained on an average 12.5 per cent. water. The other five samples averaged 15.4 per cent of water and averaged 0.11 per cent. of boric acid. All samples of margarine contained boric acid, the average amount being 0.30 per cent. and this article contained an average water content of 15.5 per cent.

The average "water soluble extract" of *marmalade* was 70.6 and that of *jam* 68.2 per cent. respectively.

Bread contained on an average 35.3 per cent. of water which is slightly less than the corresponding figure for 1919 which was 36.9.

In addition to samples received under the Sale of Food and Drugs Acts, 40 samples were received under the Public Health (Milk and Cream) Regulations, 1912.

(Signed) WILLIAM PARTRIDGE, F.I.C.

Joint Public Analyst.

Boroughs of Poole and Weymouth and Melcombe Regis.

The Administration of the Acts in these Boroughs is in the hands of the Town Councils.

<i>Poole.</i>						<i>Weymouth.</i>			
Samples during 1920 :—						Samples taken during the year 1920 :—			
Nature of Samples.	Total	Genuine	Adulterated	Vendor Cautioned	Vendor Prosecuted	Name.	No.	Genuine	Adulterated
Baking Powder ..	2	2	..	..	..	Brandy ..	1	1	..
Butter ..	1	1	..	..	..	Butter ..	7	7	..
Milk ..	69	57	12	5	7	Cheese ..	4	4	..
Skimmed milk ..	3	3	..	..	..	Baking Powder ..	4	4	..
Cream of Tartar ..	2	1	1	..	..	Egg Powder ..	1	1	..
Vinegar ..	6	6	..	..	..	Lard ..	3	3	..
White Pepper ..	4	4	..	..	..	Margarine ..	3	3	..
Mustard ..	5	1	4	1	..	Milk ..	23	20	3
Egg Substitute Powder ..	2	2	..	..	..	Vinegar ..	6	6	..
Beer ..	1	1	..	..	..	Cream ..	2	2	..
Totals ..	95	78	17	6	7	Whisky ..	2	2	..
						Totals ..	59	56	3
						Administrative action regarding samples not reported to be genuine :— Milk, 3 samples : 2 Cases dismissed and one withdrawn.			

Public Health (Milk and Cream) Regulations, 1912.

County Medical Officer's Report on Administration during 1920.

1. Milk and Cream not sold as Preserved Cream.

	(a) Number of Samples examined for the presence of a preservative.	(b) Number in which a preservative was reported to be present.	Kind	Action taken.
Milk	40	Nil	—	—
Cream	0	Nil	—	—
	40	Nil	—	—

2. Cream sold as Preserved Cream—No samples taken.

3. Thickening Substitutes. No samples taken.

POOLE.—(Administered by Borough Council). No samples reported as examined during 1920.

WEYMOUTH.—(Administered by Borough Council). No samples reported as examined during 1920.

TABLE I.
VITAL STATISTICS OF WHOLE COUNTY AND SEPARATE DISTRICTS DURING 1920.

		Population estimated to Middle of 1920	NETT BIRTHS.		NETT DEATHS BELONGING TO THE DISTRICT.			
			Number.	Rate*	Under 1 year of age.		At all ages.	
					Number	Rate per 1000 Net.	Number.	Rate
WHOLE COUNTY.		216727	4898	22.3	279	56.9	2566	11.8
URBAN DISTRICTS.	Blandford	3712	82	22	8	97.5	43	11.5
	Bridport	5786	126	21.7	7	55.5	82	14.1
	Dorchester	9261	252	25.9	16	63.4	114	12.3
	Lyme Regis	2282	50	21.9	3	60	30	13.1
	Poole	42831	1030	24	77	74.8	481	11.2
	Portland	8988	246	24.6	12	48.7	91	10.1
	Shaftesbury	1831	36	19.6	2	55.5	28	15.2
	Sherborne	5649	103	18.2	3	29.1	74	13.09
	Swanage	6719	132	19.6	6	45.4	64	9.5
	Wareham	2403	46	19.1	2	43.4	33	13.7
Weymouth	22508	515	21.7	20	38.8	261	11.5	
Wimborne	3805	69	18.1	7	101.4	39	10.2	
TOTAL OF URBAN DISTRICTS.		115775	2687	22.6	163	60.6	1340	11.5
RURAL DISTRICTS.	Beaminster	8044	181	22.4	9	49.7	115	14.2
	Blandford	8212	188	22.8	7	37.7	103	12.5
	Bridport	6965	144	20.6	13	90.2	93	13.3
	Cerne	4177	96	22.9	7	72.8	63	15.08
	Dorchester	8545	190	22.2	16	84.2	93	10.8
	Poole	7229	166	22.9	7	42.1	74	10.2
	Shaftesbury	9705	208	21.4	4	19.2	117	12.05
	Sherborne	5332	116	21.7	7	60.3	63	11.8
	Sturminster	8931	188	21.0	10	53.1	103	11.5
	Wareham	10294	239	23.2	12	50.2	127	12.3
Weymouth	8188	164	20	12	73.1	101	12.3	
Wimborne	15330	331	21.5	12	36.2	174	11.3	
TOTAL OF RURAL DISTRICTS.		100952	2211	21.9	116	52.4	1226	12.1
ENGLAND AND WALES. ..				25.4		80		12.4

*For calculating this rate the Registrar-General has supplied another population figure (219389) to allow for the men absent on service.

NOTIFIABLE DISEASE.	BLANDFORD		BRIDPORT		DORCHESTER		LYME REGENT		POOLE		PORTLAND		SHAFTESBURY		SHERBORNE		SWANAGE		WAREHAM		WEYMOUTH		WIMBORNE		Total Cases Notified.	Total Cases removed to Hospital.
	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.		
Pneumonia	5	..	1	..	..	..	30	2	14	..	..	..	..	..	..	..	..	..	13	..	..	..	63	2
Chicken-pox	2	..	..	..	..	..	102	2	..	..	..	..	..	..	..	..	..	..	8	..	..	..	112	2
Dysentery
Diphtheria (including Membranous Croup)	1	1	4	4	..	..	141	141	25	13	..	..	..	..	2	..	..	..	4	3	8	3	185	165
Erysipelas	4	..	..	..	16	..	5	..	..	..	1	..	2	..	..	..	6	..	..	..	34	..
Scarlet Fever ..	5	5	3	3	2	2	..	..	70	71	3	..	4	..	5	5	6	..	..	..	10	7	1	..	109	99
German Measles	2	..	..	..	2	..
Enteric Fever	7	5	2	..	..	..	..	..	..	..	..	..	2	1	..	..	11	6
Puerperal Fever	1	..	..	..	..	..	1	..	4	..	..	..	3	..	..	..	9	..
Encephalitis Lethargica	3	3	..	..	1	..	2	..	1	..	..	..	..	..	..	..	7	3
Cerebro-Spinal Fever	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..
Poliomyelitis
Whooping Cough	40	..	..	..	40	..
Pulmonary Tuberculosis	6	2	14	..	4	..	160	..	14	..	1	..	2	..	4	..	2	..	36	..	..	..	243	2*
Other forms of Tuberculosis	3	2	3	..	1	..	15	5	6	..	..	..	1	..	..	..	1	..	7	..	..	..	37	7*
Measles	1	..	..	..	..	..	10	..	..	..	..	..	..	..	..	16	..	..	..	26	1
Small Pox
Ophthalmia Neonatorum	15	3	1	..	..	..	..	..	1	..	..	..	14	..	..	..	31	3
Malaria	3	..	5	..	..	..	10	..	1	..	..	..	..	..	..	..	..	..	2	..	..	..	21	..
Other conditions	2	..	..	..	113	1	1	..	..	..	..	..	..	..	1	..	..	..	..	..	2	116
Totals ..	5	5	23	8	33	9	5	..	571	345	72	14	16	..	12	5	20	6	4	..	163	11	9	3	933	406

RURAL DISTRICTS.

NOTIFIABLE DISEASE.	BEAMINSTER		BLANDFORD		BRIDPORT		CERNE		DORCHESTER		POOLE		SHAFTESBURY		SHERBORNE		STURMINSTER		WAREHAM		WEYMOUTH		WIMBORNE		Total Cases Notified.	Total Cases removed to Hospital.
	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.	No. of Cases.	No. removed.		
Pneumonia ..	..	..	..	..	15	..	..	..	..	..	2	..	7	..	..	..	..	..	..	..	3	..	11	..	38	..
Chicken-pox ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Dysentery ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria (including Membranous Croup) ..	..	..	4	4	1	..	3	..	1	..	8	1	1	1	7	..	4	..	..	..	1	1	14	6	44	13
Erysipelas ..	..	..	..	..	..	..	3	..	2	..	1	..	4	..	..	..	2	..	..	..	3	1	1	..	16	..
Scarlet Fever ..	11	11	16	16	7	..	..	..	2	..	9	9	5	2	6	..	12	3	..	..	6	5	16	1	90	47
German Measles ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever ..	..	..	1	1	1	..	..	..	7	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	9	1
Puerperal Fever ..	..	..	..	..	..	..	..	..	..	..	1	..	2	..	..	..	..	..	..	..	..	..	..	..	3	..
Cerebro-Spinal Fever ..	1	1	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3	3	
Poliomyelitis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pulmonary Tuberculosis ..	7	..	..	..	9	..	1	..	20	..	10	..	5	..	..	..	6	..	10	..	11	..	29	..	108	..*
Other forms of Tuberculosis ..	..	..	..	..	1	..	..	..	4	..	..	..	..	..	..	..	..	..	3	..	..	..	1	..	9	..*
Measles ..	..	..	..	..	..	..	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	5	..
Ophthalmia Neonatorum ..	..	..	..	..	1	..	2	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	4	..
Malaria ..	1	..	..	..	4	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	3	..	6	..	16	..
Influenza ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1	..
Other Conditions ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3	..	..	..	3	..	..
Totals ..	20	12	23	23	39	..	14	..	37	..	32	10	25	3	13	..	24	3	14	..	30	6	78	7	349	64

TABLE III. (a).
Causes of and Ages at Death during the year 1920.
WHOLE COUNTY.

CAUSES OF DEATH.	NETT DEATHS OF "RESIDENTS," WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT.								
	All Ages	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards
1	2	3	4	5	6	7	8	9	10
All Causes.	2566	279	25	31	62	110	277	569	1213
1. Enteric Fever ..	2	..	..	..	1	..	1	..	..
2. Small-pox ..	..	..	..	..	..	..	..	..	..
3. Measles ..	10	2	1	4	1	..	2	..	..
4. Scarlet Fever ..	4	1	..	1	..	2	..	..	..
5. Whooping Cough ..	15	9	2	4	..	..	..	..	..
6. Diphtheria and Croup ..	12	1	..	4	6	..	1	..	..
7. Influenza ..	56	2	..	..	1	5	12	13	23
8. Erysipelas ..	4	..	..	..	..	..	..	2	2
9. Phthisis (Pulmonary Tuberculosis) ..	166	..	..	..	6	43	68	42	7
10. Tuberculous Meningitis ..	17	7	2	1	6	1	..	..	..
11. Other Tuberculous Diseases ..	32	2	..	..	6	5	10	6	3
12. Cancer, Malignant Disease ..	300	..	..	..	..	2	22	129	147
13. Rheumatic Fever ..	7	..	..	..	4	1	..	1	1
14. Meningitis ..	15	3	2	2	2	2	3	1	..
15. Organic Heart Disease ..	348	..	..	..	2	4	14	86	242
16. Bronchitis ..	122	18	1	..	2	1	2	9	89
17. Pneumonia (all forms) ..	101	22	8	3	4	5	14	21	24
18. Other Diseases of Respiratory Organs ..	32	4	..	..	2	1	3	5	17
19. Diarrhoea and Enteritis ..	40	15	3	1	1	..	4	7	9
20. Appendicitis and Typhlitis ..	12	..	..	..	2	2	2	2	4
21. Cirrhosis of Liver ..	9	..	..	..	..	..	1	6	2
21A. Alcoholism ..	2	..	..	..	..	..	1	1	..
22. Nephritis & Bright's Disease ..	61	..	..	..	2	4	6	23	26
23. Puerperal Fever ..	10	..	..	..	..	2	8	..	..
24. Other Accidents and Diseases of Pregnancy and Partu- rition ..	9	..	..	..	..	6	2	1	..
25. Congenital Debility and Mal- formation, including Pre- mature Birth ..	143	140	..	1	1	..	1	..	..
26. Violent Deaths, excluding Suicide ..	73	1	..	6	7	6	25	12	16
27. Suicide ..	26	..	..	..	..	..	8	12	6
28. Other Defined Diseases ..	923	50	6	4	6	18	66	183	590
29. Diseases ill-defined or unknown ..	15	2	..	..	..	..	1	7	5
Totals ..	2566	279	25	31	62	110	277	569	1213

TABLE III. (b)

Causes of Death at all Ages in each District during the year 1920.

CAUSES OF DEATH.	URBAN DISTRICTS										RURAL DISTRICTS.										Total for whole County						
	Blandford	Bridport	Dorchester	Lyme Regis	Poole	Portland	Shaftesbury	Sherborne	Swanage	Wareham	Weymouth	Wimborne	Total Urban Districts	Beaminster	Blandford	Bridport	Cerne	Dorchester	Poole	Shaftesbury		Sherborne	Sturminster	Wareham	Weymouth	Wimborne	Total Rural Districts.
1. Enteric Fever	43	82	114	30	481	91	28	74	64	33	261	39	1340	115	103	93	63	93	74	117	63	103	127	101	174	1226	2566
2. Small-pox	..	..	..	..	2	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	2
3. Measles	..	1	..	..	3	2	..	..	..	..	..	..	4	..	2	..	..	..	..	1	1	2	..	..	1	..	10
4. Scarlet Fever	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	4
5. Whooping Cough	..	..	..	3	2	2	..	..	..	..	4	..	11	..	..	..	..	..	..	..	..	..	..	3	1	..	15
6. Diphtheria and Croup	..	..	..	..	1	1	..	5	1	1	..	..	3	..	..	2	1	..	1	..	2	..	..	2	3	9	12
7. Influenza	..	1	1	..	8	..	..	..	..	..	4	1	21	5	1	4	1	3	3	7	4	2	1	..	2	35	56
8. Erysipelas	..	..	..	..	2	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	1	..	..	1	4	..
9. Phthisis (Pulmonary Tuberculosis)	..	5	6	2	38	4	1	3	5	2	13	4	83	10	6	8	2	6	2	7	5	10	10	5	12	83	166
10. Tuberculous Meningitis	..	1	1	..	4	..	1	..	..	..	..	2	9	..	..	1	..	2	1	..	2	1	1	..	..	8	17
11. Other Tuberculous Diseases	..	2	4	..	9	..	1	..	..	..	4	1	22	1	2	2	..	1	..	..	1	2	2	1	..	10	32
12. Cancer, Malignant Disease	3	10	12	6	56	12	2	11	9	3	37	3	164	9	11	6	5	6	10	15	9	13	11	19	22	136	300
13. Rheumatic Fever	..	1	..	..	2	1	..	..	..	..	1	..	5	..	..	..	..	..	..	..	1	1	1	..	..	2	7
14. Meningitis	..	..	..	..	4	..	..	..	..	2	..	..	7	..	2	1	1	..	1	..	..	1	1	..	..	8	15
15. Organic Heart Disease	8	13	23	3	56	7	5	9	11	9	25	3	172	16	16	16	6	16	7	14	7	13	29	12	24	176	348
16. Bronchitis	1	3	6	4	27	6	..	6	4	4	14	2	73	3	5	1	3	4	4	8	3	5	3	4	6	49	122
17. Pneumonia (all forms)	2	..	9	1	23	8	1	3	1	..	7	2	57	5	2	5	1	4	4	4	3	3	4	1	8	44	101
18. Other Diseases of Respiratory Organs	..	1	1	..	11	..	..	1	..	..	6	1	21	1	2	1	..	..	2	..	..	1	..	1	3	11	32
19. Diarrhoea and Enteritis*	..	..	2	..	8	3	1	..	..	..	..	..	14	..	..	1	..	..	1	..	..	..	..	..	2	4	18
20. Appendicitis and Typhlitis	..	..	..	..	2	..	..	1	..	..	1	..	4	..	..	1	..	..	3	1	1	1	..	1	..	8	12
21. Cirrhosis of Liver	..	1	1	..	..	1	..	..	..	..	2	1	6	1	1	..	..	..	..	..	..	..	..	..	1	3	9
21.A. Alcoholism	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	2	2
22. Nephritis and Bright's Disease	..	2	2	1	11	6	1	2	2	1	7	1	36	1	1	3	1	3	3	2	2	1	2	2	4	25	61
23. Puerperal Fever	..	1	1	..	2	1	..	..	..	..	2	..	7	1	..	..	..	..	1	1	1	..	..	..	..	3	10
24. Other Accidents and Diseases of Pregnancy and Parturition	..	1	..	..	..	..	..	..	..	..	..	..	1	1	..	2	..	1	..	..	..	1	1	1	1	8	9
25. Congenital Debility and Malformation, including Premature Birth	6	5	4	..	42	4	..	1	5	1	8	6	82	5	5	10	4	8	2	2	3	5	7	5	5	61	143
26. Violent Deaths, excluding Suicide	2	1	1	1	12	1	..	4	..	..	8	..	30	3	3	1	2	4	1	3	2	..	16	2	6	43	73
27. Suicide	..	1	2	1	6	..	..	..	2	1	1	..	13	3	2	..	1	..	2	3	..	..	2	..	..	13	26
28. Other Defined Diseases	..	32	38	8	150	32	15	27	30	7	114	11	485	45	41	28	34	34	24	49	17	41	37	39	71	460	945
29. Diseases Ill-defined or Unknown	..	..	..	..	..	..	..	1	..	..	2	1	4	3	1	..	1	..	3	..	..	1	..	1	1	11	15
Totals	43	82	114	30	481	91	28	74	64	33	261	39	1340	115	103	93	63	93	74	117	63	103	127	101	174	1226	2566

* Under 2 years of age.

ABSTRACTS OF REPORTS of District Medical Officers of Health.

NOTE.—Information given in Reports of previous years has been omitted. For Vital Statistics and Infectious Diseases of separate Districts see Tables I. II. and III. (b). For other information see body of this Report under various headings.

TABLE IV. SLAUGHTER HOUSES (SEPARATE DISTRICTS).

	URBAN DISTRICTS.							RURAL DISTRICTS.					
	Registered			Licensed				Registered			Licensed.		
	In 1914	In Jan. 1920	In Dec., 1920	In 1914	In Jan., 1920	In Dec., 1920		In 1914	In Jan., 1920	In Dec., 1920	In 1914	In Jan., 1920	In Dec., 1920
BLANDFORD ..	2	3	3	2	3	3	BEAMINSTER ..	8	7	7	8	7	7
BRIDPORT ..	3	3	3	3	3	3	BLANDFORD ..	3	3	3	..	..	..
DORCHESTER ..	5	4	4	1	1	1	BRIDPORT ..	3	3	3	3	3	3
LYME REGIS ..	3	3	3	3	3	3	CERNE ..	not available			..	..	..
POOLE ..	5	2	2	7	5	10	DORCHESTER ..	4	4	4	..	..	..
PORTLAND ..	2	2	2	..	..	..	POOLE ..	6	6	6	6	6	6
SHAFTESBURY ..	2	1	1	..	..	..	SHAFTESBURY ..	9	16	16	..	..	..
SHERBORNE ..	..	..	..	3	3	3	SHERBORNE ..	..	..	..	1	1	1
SWANAGE ..	2	2	2	..	..	..	STURMINSTER ..	..	..	13	..	..	4
WAREHAM ..	3	3	3	3	3	3	WAREHAM ..	..	..	..	..	..	..
WEYMOUTH ..	..	..	..	5	4	4	WEYMOUTH ..	7	7	7	..	..	..
WIMBORNE ..	4	3	3	..	..	..	WIMBORNE ..	6	6	6	..	..	..

TABLE V. SANITARY INSPECTIONS (SEPARATE DISTRICTS).

	URBAN DISTRICTS.						RURAL DISTRICTS.				
	No. of Inspections.	No. of Informal Notices.	No. complied with.	No. of Statutory Notices.	No. complied with.		No. of Inspections.	No. of Informal Notices.	No. complied with.	No. of Statutory Notices.	No. complied with.
BLANDFORD ..	97	10	10	..	..	BEAMINSTER ..	30	8	8	..	..
BRIDPORT ..	12	6	6	..	..	BLANDFORD ..	153	14	13	3	3
DORCHESTER ..	4262	139	136	203	189	BRIDPORT ..	483	33	32	20	11
LYME REGIS ..	247	87	87	38	37	CERNE ..	..	16	16	..	..
POOLE ..	6481	290	145	75	49	DORCHESTER ..	160	20	16	3	3
PORTLAND ..	2672	231	200	..	..	POOLE ..	1080	17	..	..	..
SHAFTESBURY ..	53	24	21	15	11	SHAFTESBURY ..	51	1	1	26	22
SHERBORNE ..	856	10	10	..	..	SHERBORNE ..	67	15	15	2	2
SWANAGE ..	258	87	75	..	..	STURMINSTER ..	34	19	19	..	..
WAREHAM ..	38	..	17	..	..	WAREHAM ..	87	23	20	2	1
WEYMOUTH ..	1967	29	23	31	19	WEYMOUTH ..	685	131	131	7	7
WIMBORNE ..	100	20	20	..	..	WIMBORNE ..	80	104	104	..	..

URBAN DISTRICTS.

RURAL DISTRICTS.

TABLE VI.

HOUSING.—ABSTRACT OF RETURNS FROM COUNTY DISTRICTS.

TABLE VI.		HOUSING.—ABSTRACT OF RETURNS FROM COUNTY DISTRICTS.																									
		<div>BLANDFORD BRIDPORT DORCHESTER LYME REGIS POOLE PORTLAND SHAFTESBURY SHERBORNE SWANAGE WAREHAM WEYMOUTH WIMBORNE BEAMINSTER BLANDFORD BRIDPORT CERNE DORCHESTER POOLE SHAFTESBURY SHERBORNE STURMINSTER WAREHAM WEYMOUTH WIMBORNE</div>																									
GENERAL.		(1) Estimated population	3712	5919	9729	2282	43800	8988	1831	6552	6719	2403	22508	3800	8044	8212	6965	4177	8545	7229	9705	6200	8931	10294	8188	15330	
		(2) General death rate	11.5	13.5	12.3	13.1	10.8	10.1	15.2	11.21	9.6	13.7	11.6	10.5	14.1	12.5	14.78	15	10.8	10.1	12	8.36	11.5	12.3	12.3	11.3	
		(3) Death-rate from tuberculosis	1.01	1.2	0.4	0.4	9.0	0.44	..	0.45	0.86	..	0.75	1.31	1.3	..	0.47	1.05	..	0.72	0.9	1.1	..	0.73	..		
		(4) Infantile mortality	97.5	55.1	63.0	60	75	48.7	55.5	29.12	45.14	43.4	38	101.4	49.7	37.7	90.2	62.5	84.2	42.1	19.23	74.07	53.1	50.2	78	36.2	
		(5) Number of dwelling-houses of all classes	450	1475	2136	540	9500	1950	..	1200	..	4965	..	1935	..	1872	1250	1998	1081	2684	785	2052	..	2073	3890		
		(6) Number of working-class dwelling-houses (say below £16)	300	1172	1582	300	7500	1693	..	745	..	3320	..	1407	..	1663	..	1497	..	..	610	1236	..	1477	2826	
		(7) Number of new working-class houses erected .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(8) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	90	42	337	..	3264	183	53	514	258	50	234	300	100	28	244	..	160	125	51	112	..	..	403	89
		(9) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910 .. .. .	..	..	337	120	..	69	23	304	..	..	70	..	..	44	..	..	75	32	82	34	..	..	32	43
		(10) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	118	..	..	..	..	5	2	2	..	9	13	1	30	1	5	..	4	5	..	3	..	..	2	..
		(11) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	23	16	175	..	340	178	13	6	15	24	151	10	25	10	18	10	..	21	22	12	19	..	13	28	
		Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	17	15	163	..	224	119	6	34	51	24	3	20	40	6	32	10	16	15	3	12	8	..	63	28	
		Proceedings under section 28 of the Housing, Town Planning, &c., Act, 1919.																									
		(1) Number of dwelling-houses in respect of which notices were served requiring repair .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(2) Number of dwelling-houses which were rendered fit—	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(a) by owners .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(b) by Local Authority in default of owners .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close Proceedings under Public Health Acts— .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(2) Number of dwelling-houses in which defects were remedied—	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(a) by owners .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(b) by Local Authority in default of owners .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		Proceedings under sections 17 and 18 of the Housing, Town Planning &c., Act, 1909																									
		(1) Number of representations made with a view to themaking of Closing Orders .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(2) Number of dwelling-houses in respect of which Closing Orders were made .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(4) Number of dwelling-houses in respect of which Demolition Orders were made .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(5) Number of dwelling-houses demolished in pursuance of Demolition Orders .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		Areas represented to the Local Authority with a view to Improvement Schemes under (a), Part I. or (b), Part II., of the Act of 1890 :—																									
		(1) Number of areas	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(2) Acreage	14	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(3) Number of working-class houses in area	13	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		(4) Number of working-class persons to be displaced	60	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		Number of houses not complying with the building byelaws, erected with consent of Local Authority under section 25 of the Housing, Town Planning, &c., Act 1919 .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..

PORT SANITARY DISTRICTS.

Port of Bridport.

MEDICAL OFFICER OF HEALTH. — A. B. MacCARTHY,
L.R.C.P. M.R.C.S.

No. of coastwise vessels entering port in 1920	..	3
„ vessels entering port from foreign	..	4

Port of Lyme Regis.

MEDICAL OFFICER OF HEALTH—J. SPURR, B.A. (Camb.).
M.R.C.S. (Eng.).

No. of coastwise vessels entering port in 1920	..	..	nil.
„ vessels entering port from foreign	..	..	nil.

Port of Weymouth.

MEDICAL OFFICER OF HEALTH—THOMAS HOWARD, M.D.

(The Port of Weymouth includes Portland Roads and Weymouth Harbour).

The following table shows the number and registered tonnage of steam and sailing vessels entering Portland Roads and Weymouth Harbour during 1920.

	Number	Tonnage
Portland Roads ..	783	822,457
Weymouth Harbour ..	644	157,230
Total ..	1427	979,687

Cases Infectious Diseases on ships—Typhoid fever, 2
Typhus Fever, 2; Small Pox, 1; Encephalitis Lethargica, 1;
Scarlet Fever, 1.

Port Sanitary Hospital—Cases admitted during 1920 :—
From Shipboard. From Portland.

Typhoid fever ..	2	Urban District.	
Scarlet fever ..	1		
Typhus fever ..	2	Diphtheria ..	14
Encephalitis Lethargica	1		
Small Pox	1		

Supervision of Foodstuffs—The following represents the principal Unsound Foodstuffs destroyed during the year :—

Brawn	2 cases (55 glasses)	Pickles	63 bottles
Asparagus	11 tins	Milk (Tinned)	12 tins
Bacon	1 qr. 9 lbs.	Yeast	7lbs.
Sausages	23 lbs.	Ox Tongue	1 qr. 21 lbs.
Apples	50 „	Poultry	1 case (3 birds)
Lettuce	46 „		

STATEMENT FROM REPORT OF SANITARY INSPECTOR, MR. JOHN GRIFFITHS.

Number of Ships Inspected in the Port during the year 1920

Where inspected	No. of	No. com-	
Weymouth.	Portland.	Notices served.	plied with.
		Statutory Notice	2
		Formal Notices	8
221	393	Informal „	99
		Total served	109

Port of Poole.

MEDICAL OFFICER OF HEALTH—A. T. NANKIVELL, M.D.
D.P.H.

During the year 128 vessels entered the Port of Poole from home ports; 234 from the Channel Islands and 76 from foreign ports.

Only one case of sickness on board ship was reported to the Health Office during the year, namely a case of gonorrhœa in a sailor. No insanitary conditions have been discovered during the year.

PORT RAINIER, WASH.

1891

REPORT OF THE PORT RAINIER, WASH.

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