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THE  
ANNUAL REPORT

ON THE  
Health of the County Borough and Port of  
Grimsby,

For the Year ending 31st December, 1907,

BY  
W. BULMER SIMPSON, M.B., D.P.H.

MEDICAL OFFICER OF HEALTH FOR THE BOROUGH  
AND PORT OF GRIMSBY.

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# SANITARY & BUILDING PLANS COMMITTEE,

*From November 9th, 1906, to November 1st, 1907.*

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CHAIRMAN :  
COUNCILLOR M. ABRAHAMS.

VICE-CHAIRMAN.  
COUNCILLOR J. H. TATE.

ALDERMEN :

BROCKLESBY  
MARSHALL  
SOUTHWORTH

HEWSON  
MUDD  
SUTCLIFFE

SIR GEO. DOUGHTY  
T. C. MOSS

COUNCILLORS.

A. J. KNOTT  
COLLINS  
F. MOSS  
HOWE  
A. KING  
CONNELL  
SHEPHARD  
TICKLER  
BEELS  
HARRISON  
WILLOWS  
ELLIS

HOSKINS  
WING  
SMETHURST  
TYSON  
RAMSEY  
JOHNSON  
JACKSON  
BANNISTER  
GIBSON  
WILKIN  
LOCKING.

H. E. KNOTT  
WINTRINGHAM  
T. KING  
G. A. WHITE  
KIRK  
BARRETT  
MILLER  
ROBERTS  
BEST  
ATKINSON  
RIGGALL

AND THE MAYOR, ALDERMAN J. PICKWELL, *ex-officio*.

TOWN CLERK :  
W. GRANGE, Esq.

DEPUTY TOWN CLERK :  
E. L. GRANGE, LL.D.

BOROUGH ENGINEER :  
H. G. WHYATT, A.M.I.C.E.

DEPUTY ENGINEER :  
J. G. R. BAXTER.



# HEALTH DEPARTMENT.

---

MEDICAL OFFICER OF HEALTH :

W. BULMER SIMPSON, M.B., D.P.H., FELL. BRIT. INST. PUB. HEALTH.

CHIEF SANITARY INSPECTOR :

HENRY F. MOODY, Assoc. Royal San. Inst.\*

ASSISTANT SANITARY INSPECTORS :

JNO. G. WATSON, Assoc. Royal San. Inst.\*

MATTHEW CHAPMAN, Mem. Royal San. Inst.\*

PORT SANITARY INSPECTOR :

F. STOKES.

OFFICE CLERK :

H. T. HAY, Assoc. Royal San. Inst.

\*Also hold Certificate of Royal San. Institute, as an inspector of meat and other foods.

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# CORPORATION SANATORIUM.

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MEDICAL OFFICER :

W. B. SIMPSON, M.B., D.P.H.

MATRON.

MISS E. BOWES.

CHARGE NURSE.:

MISS WORTHINGTON.

PORTER :

J. NORMAN.

# SUMMARY OF VITAL STATISTICS,

*Year ending December 31st, 1907.*

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Population of Borough (estimated at middle of 1907) .....	71,220
Area of Borough (in acres) .....	3,260
Density of Population ( <i>i.e.</i> number of persons per acre) .....	21·84
Births :           {   Males 1126   }	Total .....
{   Females 993   }	2119
Birth rate (per thousand) .....	29·75
„           „       England and Wales .....	26·30
Death :           {   Males 638   }	Total .....
{   Females 496   }	1134
Death-rate (per thousand) .....	15·92
„           „       England and Wales .....	15·00
„           „       76 Great Towns .....	15·40
Zymotic Death-rate (per thousand) .....	2·26
Phthisis Death-rate (per thousand) .....	1·13
Respiratory Diseases Death-rate (per thousand) .....	3·10

## INFANTILE MORTALITY.

Total number of deaths of Infants under one year of age .....	325
Equal to a death-rate per thousand births of .....	153



# POPULATION.

The estimated population of the County Borough of Grimsby at the middle of 1907 was 71,220, thus showing an estimated total increase in the number of inhabitants during the year of 1,860 persons; the estimated population at the corresponding period in 1906 being 69,360.

The natural rate of increase (*i.e.* the excess of births over deaths) for the year was 14.08 per thousand of the then population, equal to addition to the 1906 figures of 977 during the year, thus making the total at the middle of 1907 up to 70,337 only, whereas we have estimated it to be 71,220, this variation representing the difference between the inward and outward flow of the stream of individuals. Assuming the correctness of our estimate of the number of inhabitants to-day it may reasonably be computed that the excess of immigration over emigration, so far as this Borough is concerned, during the last 12 years, is somewhere about 12,304.

From these figures it would appear that last year's influx of population is somewhat below the average. This is probably in part owing to the overflow of the population into surrounding districts.

At this stage of the intercensal period all computations of the population must of necessity be more or less problematical.

We may form an estimate in two ways; (1) By taking account of the number of inhabited houses in the Borough and allotting to each a given number of persons, as based on the ascertained conditions in the previous census, or (2) By ascertaining the number of persons in a Borough at one census, finding what this number has become by the time the next census year arrives, and then taking the ratio of increase per unit of population during that intercensal period, and applying the same ratio to the current period year by year.

Both methods are open to certain fallacies, consequent on changes in the social conditions of the people or to trade influences.

For example some new industry may spring up in a district resulting in a large influx of workpeople to the place, and thus the ratio of increase prevailing in the previous intercensal period may be greatly exceeded. On the contrary, when trade in a particular district falls into a depressed condition, the emigration may exceed the immigration for the time being.



That an error is likely to arise in any method of calculation is shown by the fact that at the date of the last census (1901), the estimated population of the Borough as based on the previous census returns exceeded the correct number of inhabitants by about 4,000. Thus the population of the Borough in the year 1900 is given as 65,760, and in the following year, 1901, it has apparently fallen to 63,138.

The reason for this is obvious; between the 1881 and 1891 census years, the Clee and Weelsby District had been added to the Borough, causing an altogether abnormal rate of increase of the numbers of inhabitants during that intercensal period, which rate was not, of course, maintained during the 1891—1901 period—hence the over-estimation.

## Births.

The total number of births registered during the year was 2,119, equal to a birth-rate of 29·75 per thousand living, which is practically the same as that of 1906, which was 29·82. The rate in 1897 was 32·00, and the average for the last ten years 30·45.

These figures show a steady decline in the birth-rate when taken over a number of years, though the rate is still higher than that of England and Wales generally, which for 1907 was 26·3.

## Illegitimate Births.

105 births of illegitimate infants were registered in 1907, a rate per cent. of total births of 4·95 as compared with, in 1906, 104, and a rate of 5·17.

## Deaths.

Last year there were registered in the Borough 1,134 deaths; 638 were males and 496 females.

On a population of 71,220 these equal a death-rate per thousand living of 15·92. Not included in the above numbers are 18 deaths of Grimsby residents which took place in public institutions outside the district, namely, 3 in the Hull Royal Infirmary, 6 in the County Asylum, and 9 in the Caistor Workhouse.

If we deduct from the total deaths, as given above, the deaths of non-residents to the number of 39, and add on the number of 18, we have a corrected total of deaths of Grimsby residents of 1,113, which give a death-rate of 15·62.

Compared with 1906 the rate is slightly higher, being in that year 15·05, while at the same time it is somewhat below the average for the last nine years, which amounts to 16·22 per thousand per annum.



In the whole of England and Wales last year the mortality rate was 15·0 per thousand, while that of the 76 great towns was 15·4, and of the 142 smaller towns 14·50.

It will be seen thus that we compare not unfavourably with other towns of similar size, notwithstanding our many detractors. When once we have fairly "put our house in order" we may look forward to still more favourable statistics; to a time indeed when Grimsby becomes one of the healthiest towns in the kingdom.

The births and deaths registered in each quarter with their respective rates are shewn in the following table :—

	BIRTHS.	RATES.	DEATHS.	RATES.
Spring Quarter . . . . .	499	28·025	380	21·342
Summer Quarter . . . . .	535	30·047	292	16·399
Autumn Quarter . . . . .	555	31·171	203	11·401
Winter Quarter . . . . .	530	29·766	257	14·434
Annual . . . . .	2119	29·752	1132	15·894

## Deaths in Public Institutions.

It is interesting to compare the numbers dying in public institutions to-day with the corresponding numbers ten years ago. Our statistics, unfortunately, are only available for about twelve years (*i.e.* since 1896). In that year the proportion of deaths in public institutions to total deaths was 3·55 per cent., whereas the percentage in 1907 was 10·60, and in 1906 10·45.

The increase is sufficiently interesting to merit more than a passing glance. The figures as given are perhaps more striking than the circumstances warrant. The year 1896, the first for which statistics are at hand, appears to have had an exceptionally low rate of deaths in public institutions. Thus in the following year 1897, the rate has increased to 6·32, and in the year following (1898) it has again fallen somewhat and stands at 5·59.



After making allowance for this, and also for the fact that a General Infectious Diseases Hospital for the treatment of cases of Scarlet Fever, Diphtheria and Enteric Fever has been instituted since the former date, there is still a very remarkable increase.

It is largely due, in my opinion, to the increased favour with which hospitals are viewed at the present day, and is only another expression of the changed sentiment of the people in regard to all institutions of the kind. In our general hospitals the pressure on their accommodation and on their funds is being very keenly felt. Our poor law infirmaries, too, are being much more largely appreciated, and the result is seen in the increased accommodation which is so frequently having to be provided.

It would be interesting to contrast the accommodation (number of beds) per thousand (say) of the population to-day with that which existed twenty years ago, in the whole of our public institutions.

The days of "Bumbledom" are long since past, but prejudice dies hard, and the sentiment of a people changes slowly. Vast improvements, too, have taken effect in the conduct and general management of our public hospitals even during comparatively recent years, and the prejudices of the people have now been largely overcome. For the most part this must be for the public good. It may be argued, however, and with some show of reason, that the number dying in our public institutions, and more particularly in Workhouse Infirmaries, is simply an index to the poverty of the district from which the inmates have been drafted. This would hardly account for the large differences shown in the table, and is not, we think, the real reason of the increased number of deaths in public institutions.



# CAUSES OF DEATH

## ZYMOTIC DISEASES.

161 deaths were registered from these causes as compared with 193 in 1906. The general Zymotic death-rate therefore is 2·26 per thousand living, as compared with 2·78 the year previous, and an average for the past nine years of 2·88 per thousand living.

The deaths from Zymotic Diseases are made up of Scarlatina 11, Diphtheria 11, Enteric Fever 16, Puerperal Fever 1, Erysipelas 3, Measles 50, Whooping Cough 38, and of Diarrhœa 31.

The death-rate from the 7 principal Zymotics was 2·20, as against 2·68 last year, and an average for the past nine years of 2·80 per thousand living.

Both Measles and Whooping Cough were prevalent during the earlier part of the year, and as is well-known both these diseases are very fatal to young children, especially during the cold weather. But for these two diseases the general Zymotic rate would have been very low indeed.

### 1. Measles.

The 50 deaths registered during the year from this cause alone show an increase on the number registered during 1906 of 46, which means that Measles was practically absent from the Borough during that year.

### 2. Whooping Cough

Caused 38 deaths during 1907. This number is but slightly in excess of the deaths (34) registered from the same cause during 1906.

The number of deaths both from Measles and Whooping Cough seem altogether out of proportion to the very slight importance attached to these childish ailments. The fact that they are prone to be much more fatal during the cold weather would seem to suggest that lack of care, and exposure to cold, are largely responsible for giving rise to the complications—Bronchitis and Broncho-pneumonia—which frequently prove fatal. Indeed there is a very prevalent idea that children with Whooping Cough should be sent out of doors. This, during the acute stage, and more particularly during cold weather, is a serious mistake, as apart from the danger of spreading infection, chest troubles are apt to be induced.



## ANNUAL REPORT, 1907.

## Zymotic Diseases.

## All other Diseases.

LOCALITY.	At all Ages.	Under 1 Year.	1 and under 5	5 and under 15	15 and under 25	25 and under 65	65 and upwards.		Small-pox.	Scarlatina.	Diphtheria.	Membranous Croup.	Typhus Fever.	Typhoid Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	Measles.	Whooping Cough.	Diarrhoea.	Rheumatic Fever.	Heart Disease.	Cerebral Disease.	Diseases of the Abdominal Organs.	Phthisis.	Diseases of the Respiratory Organs.	Atrophy and Premature Birth.	Convulsions.	Cancer.	Senile Decay.	Injuries.	Other Causes.	TOTALS.	ALL AGES TOTALS.	
Humber Ward.	122	44	18	5	6	32	17	Under 5												8	4	4		1	2	6	2	13	14	2				6	62	122	
								5 up-wards	1				2						1					9	5	10	11	10			3	6	1	1	60		
Wellington Ward.	125	54	21	7	5	19	19	Under 5	2	2										4	1	4		1	4	2	2	23	20	8				2	75	125	
								5 up-wards	1												1			6	6	3	7	11		1	3	8		3	50		
Weelsby Ward.	51	14	5	1	2	15	14	Under 5						1					1		2				1			3	7	3				1	12	51	
								5 up-wards		2			1										6	5	3	2	4				5	3		1	32		
Wellow Ward.	58	11	4		1	18	24	Under 5	1												2				2		1	2	5	2					15	58	
								5 up-wards					1										15	7	1	3	3				6	5		2	43		
South Ward.	33	10			1	10	12	Under 5													2	1						2	2	3					10	33	
								5 up-wards											1					3	2	2	3	3			3	4		2	23		
Alexandra Ward.	103	26	19	5	6	22	25	Under 5												8	2	5			5	2		8	8	4			1	2	45	103	
								5 up-wards	1				1							2				8	7	1	5	13			5	7	3	5	58		
South-West Ward.	42	14	6	2	1	9	10	Under 5													3	1	3			1	1	1	3	4	3				20	42	
								5 up-wards								1				1				5	3	3	1	2			3	1		2	22		
Central Ward.	119	49	17	6	2	27	18	Under 5												5	6	6			1	3		15	17	7			1	5	66	119	
								5 up-wards	1	2										1		1		10	4	9	4	13				2	4		2	53	
Clee Ward	49	20	5	2	3	12	7	Under 5													8				2	3		6	3	2				1	25	49	
								5 up-wards					1											4	2	2	4	4				2	2	2	1	24	
Victoria Ward.	112	34	21	6	3	26	22	Under 5												8	5	4					1	3	14	13	3		2	2	55	112	
								5 up-wards					2							1				9	7	5	4	13			5	5	3	3	57		
North-East Ward.	109	26	21	6	8	39	9	Under 5												6	3	2			2	3	2	14	8	6			1		47	109	
								5 up-wards	1	1													13	5	2	2	12				7	2	10	7	62		
Hainton Ward.	72	15	9	3	3	21	21	Under 5												1	1	1			2	1		5	5	7			1		24	72	
								5 up-wards					1											8	5	5	6	8			3	6	5	1	48		
General District Hospital.	53	6	9	5	8	24	1	Under 5																			1		6	4				1	3	15	53
								5 up-wards																2	2	16	2	3			5		6	2	38		
Corporation Isolation Hospital.	13		4	5	2	2		Under 5	1	2										1															4	13	13
								5 up-wards	2	2			5																						9		
Workhouse.	73	2	1		2	34	34	Under 5												1									2						3	73	
								5 up-wards					1											4	4	6	16	8			8	19		4	70		
Total under 5.	485	325	160					Under 5	4	4			1						1	45	37	30		2	22	23	11	114	112	50			7	22	485	1134	
Total 5 upwards.	649			53	53	310	233	5 up-wards	7	7			15			1		2	5	1	1			102	64	68	70	107		1	60	72	30	36	649		
Total at all ages.	1134							At all ages	11	11			16			1	3	50	38	31				104	86	91	81	221	112	51	60	72	37	58	1104		
Deaths occurring within, but not belonging to the District.	39	1	1	1	9	19	8	Under 5																					1					1	2		
								5 up-wards					2											8		4	38	2			1	4	12	1	34		





### 3. Diarrhœa.

From this cause 31 deaths were registered during 1907. Of this number 28 were infants under one year of age. Two were under 5 years, and 1 adult. These figures compare very favourably with those of 1906 (an exceptionally hot summer), when there were 127 under one year of age, 20 under 5 years and 5 adults.

In 1905 there were 121 deaths under one year, 7 under five years, and 2 adults.

In 1904 there were 88 deaths under one year of age, 11 under five years, and 4 adults.

---

## GENERAL CAUSES.

Of the general causes, 104 deaths are ascribed to Heart Disease, 86 to diseases of the Brain and Spinal Cord. Diseases of the Abdominal Organs 91, and Phthisis 81. Bronchitis, Pneumonia and other forms of Diseases of the Respiratory Organs gave rise to 221 deaths, while the next highest group, an essentially infantile one, Atrophy and Premature Birth, accounted for 112 deaths. 51 deaths, also infantile, were ascribed to Convulsions and 60 to Cancer. Senile Decay was given as the cause of death in 72 cases, and 37 deaths were due to various forms of injuries. 58 deaths were due to other unclassified causes.

325 deaths (from all causes) occurred in children under one year of age, representing a mortality of 153 per thousand births, as compared with 176 in the previous year.

172 deaths were in persons aged 70 years and upwards, as follows :—

Between	70 & 75 years	.....	57
„	75 & 80 „	.....	60
„	80 & 85 „	.....	26
„	85 & 90 „	.....	21
„	90 & 95 „	.....	7
	aged 98 „	.....	1

These give a rate of 2·41 per thousand living, and 151·94 per thousand of the total deaths.

# General Causes of Death.

## I. PHTHISIS.

Locality.	Humbr.	Welln.	Weelsby	Wellow.	South.	Alex.	S.W.	Cent.	Clee.	Vict.	N.E.	Hainton	D.H.	Work-house.	Total.
Deaths under 5	2	2	—	1	—	—	1	—	—	3	2	—	—	—	11
5 upwards . . . . .	11	7	2	3	3	5	1	4	4	4	2	6	2	16	70
Total . . . . .	13	9	2	4	3	5	2	4	4	7	4	6	2	16	81
Rate per 1,000	1·820	1·201	·372	·840	·791	·725	·628	·563	·766	1·015	·632	·848	—	—	1·137

## II. INFLAMMATORY DISEASES OF THE RESPIRATORY ORGANS.

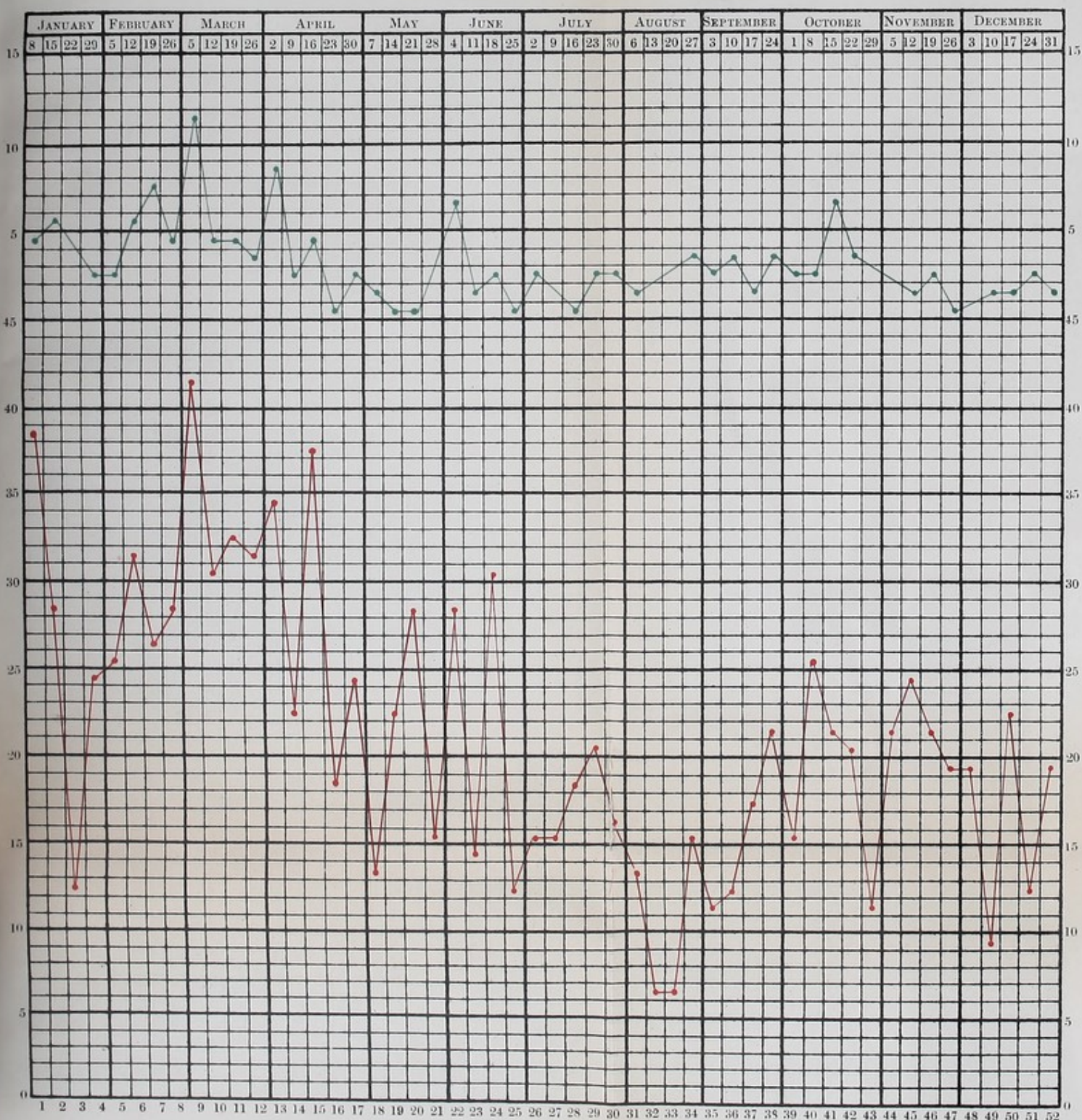
Locality.	Humbr.	Welln.	Weelsby	Wellow.	South.	Alex.	S.W.	Cent.	Clee.	Vict.	N.E.	Hainton	D.H.	Work-house.	Total.
Deaths under 5	13	23	3	2	2	8	3	15	6	14	14	5	6	—	114
5 upwards . . . . .	10	11	4	3	3	13	2	13	4	13	12	8	3	8	107
Total . . . . .	23	34	7	5	5	21	5	28	10	27	26	13	9	8	221
Rate per 1,000	3·221	4·539	1·303	1·050	1·319	3·047	1·572	3·943	1·915	3·918	4·113	1·838	—	—	3·102



# CHART No. 1.

DEATH RETURNS, JANUARY 1st to DECEMBER 31st, 1907 (inclusive).

The **RED** Spots indicate the number of Deaths per week from all causes, the **GREEN** Spots Zymotic.







### III. HEART DISEASE.

Locality.	Humber	Welln.	Weelsby	Wellow.	South.	Alex.	S.W.	Cent.	Clee.	Vict.	N.E.	Hainton	D.H.	Work-house.	Total.
Deaths under 5	1	1	—	—	—	—	—	—	—	—	—	—	—	—	2
5 upwards.....	9	6	6	15	3	8	5	10	4	9	13	8	2	4	102
Total .....	10	7	6	15	3	8	5	10	4	9	13	8	2	4	104
Rate per 1,000	1·400	·934	1·117	3·151	·791	1·161	1·572	1·408	·766	1·306	2·056	1·131	—	—	1·460

### IV. DISEASES OF THE ABDOMINAL ORGANS.

Locality.	Humber	Welln.	Weelsby	Wellow.	South.	Alex.	S.W.	Cent.	Clee.	Vict.	N.E.	Hainton	D.H.	Work-house.	Total.
Deaths under 5	6	2	—	—	—	2	1	3	3	1	3	1	1	—	23
5 upwards.....	10	3	3	1	2	1	3	9	2	5	2	5	16	6	68
Total .....	16	5	3	1	2	3	4	12	5	6	5	6	17	6	91
Rate per 1,000	2·240	·667	·558	·210	·527	·435	1·257	1·690	·957	·870	·791	·848	—	—	1·277

### V. CEREBRAL DISEASES.

Locality.	Humber	Welln.	Weelsby	Wellow.	South.	Alex.	S.W.	Cent.	Clee.	Vict.	N.E.	Hainton	D.H.	Work-house.	Total.
Deaths under 5	2	4	1	2	—	5	1	1	2	—	2	2	—	—	22
5 upwards.....	5	6	5	7	2	7	3	4	2	7	5	5	2	4	64
Total .....	7	10	6	9	2	12	4	5	4	7	7	7	2	4	86
Rate per 1,000	·980	1·335	1·117	1·890	·527	1·741	1·257	·704	·766	1·015	1·107	·990	—	—	1·207



## Phthisis.

The deaths from this cause during 1907 numbered 81, as compared with 88 in the previous year. The rate per ten thousand living was in 1907 11·37, and in 1906 12·68.

There is just one reassuring feature in regard to Phthisis—a very reassuring feature; one which gives cause for hope that in the not very distant future this disease will be relegated to the same category as the now well-nigh extinct Typhus Fever.

Statistics all seem to point in the direction of a steady, though slow, decline in the death rate from Phthisis.

So far as our own town is concerned, *e.g.*, if we divide the last ten years into two quinquennial periods, and average the deaths per ten thousand of the population, in each of these separate periods we find that in the quinquennium ending with the year 1902 the average annual rate was 13·99, whereas in the corresponding period ending December 31st, 1907, the average annual rate is 12·34 per ten thousand.

That the ingestion of Tuberculous Milk is largely responsible for the prevalence of various forms of tubercular manifestations in children, no one would think of disputing. This matter was very forcibly brought home to us recently, when we were called to inspect the carcase of a cow recently killed. This animal was studded with Miliary Tuberculosis in nearly every internal organ. Its pleural and peritoneal surfaces dotted over with Tubercles, and yet the animal itself was in fairly good flesh, and had, until a short time before it was killed, been supplying milk to Grimsby. It is true there did not appear to be any actual disease of the udder, so that possibly the milk supplied might be free from Tubercle Bacilli, and no harm result, yet there is no doubt whatever that the Bacilli are often present in milk that it is a fruitful source of Tuberculous manifestations. Regular systematic, veterinary inspection of milch cows is the only remedy for this condition of affairs.

It would be interesting to find what would be the effect, particularly in regard to children's diseases, of entirely putting a stop to the consumption of fresh milk, and allowing only sterilized milk to be used for a few years. Personally, I am inclined to the belief that we should be able to trace the effect of such a course in the very appreciable diminution of the Tuberculous diseases of childhood.



A very considerable advance in attacking this dreaded scourge was made when once it became recognised that Phthisis, particularly in its early stages, was distinctly curable. This fact was strongly impressed on the mind of your Medical Officer some time ago, when in doing a *post mortem* on the body of a man who had died suddenly at sea the scar found in one lung indicated the position of what had obviously at an earlier period been a cavity, and which had gradually closed in and become firmly healed.

Phthisis Pulmonalis tends to attack persons in the prime of life, and rather more frequently men than women, and by so doing leads to loss of work, and consequently poverty. Hence it is largely a cause of persons becoming chargeable to the rates.

Provision for the treatment of suitable cases on a small scale is eminently unsatisfactory and necessarily expensive, and it is essentially a case where combined action on the part of Authorities is indicated.

## Infantile Mortality.

During the year 1907, 325 deaths of infants under one year of age were registered, equal to a death-rate of 153 per 1,000 births.

It will be noticed by reference to the table giving the deaths from all causes of infants under one year of age, that the diminution is largely due to the relatively small number of deaths from Diarrhoea—a result entirely owing to the unusual weather prevailing during the summer of 1907—a cool wet summer as compared with that of the previous year.

The total number of infantile deaths due to Diarrhoea in 1906 was 28, equal to a percentage of the total infant deaths of 8·61, as compared with 127 and a percentage of 34·69 in 1906.

The number of deaths of illegitimate children under one year of age during 1907 was 38, equal to a death-rate per thousand illegitimate births of 361·90, and a percentage of the total infant deaths of 11·69, as compared with a total of 17, and a rate per thousand of 163, and a percentage of 4·64 in 1906.

The matter of the serious infant mortality prevailing in the Borough, as in most large towns, has engaged the attention of the Sanitary Committee during the year. A Sub-Committee appointed to deal with the subject in detail was appointed, and this Committee acting on the report drawn up by your Medical Officer, made recommendations to the Sanitary Committee with a view to taking steps towards lessening, if possible, the deplorable loss of life which is going on from year to year.



A large part of the loss of life is undoubtedly due to improper feeding. Shall we not, however, take it for granted that in the majority of cases mothers do try to do their best for their offspring, and that if they err it is for lack of knowledge ?

Leaflets giving a few simple rules for the guidance of mothers in the rearing of infants when deprived of their natural food, have for some time been distributed at the office of the Registrar of births, who kindly allows a supply to be there kept within reach. These, no doubt, serve a useful purpose in some instances, yet it would seem as though more than this is required—namely, objective teaching—the showing how to do the things in actual daily life.

It may appear strange that one should have to set about teaching a mother how to care for her offspring. Is it not a fact, however, that with the development of intellect comes the decay of instinct ?

# Infantile Mortality (in Wards).

Wards.....	H.	Welln.	S.	S.W.	N.E.	Alex.	Willow	Weels.	Clee	Haintn	Centl.	Vict.	Total.
<b>Common Infectious Diseases.</b>													
Whooping Cough.....	3	1	2	...	1	1	...	...	7	...	3	1	19
Measles .....	1	1	...	...	1	1	...	...	...	...	...	1	5
<b>Diarrhoeal Diseases.</b>													
Diarrhoea .....	1	..	1	2	2	3	...	...	...	2	3	1	15
Enteritis .....	..	1	...	...	...	3	...	...	...	...	3	...	7
Gastritis.....	...	...	...	...	...	1	...	...	1	...	...	...	2
Gastro Enteritis .....	1	1	...	...	1	...	...	...	1	...	...	...	4
<b>Wasting Diseases.</b>													
Atrophy ... ..	5	4	...	...	4	1	...	...	...	...	1	1	16
Debility .....	2	3	1	...	...	...	1	2	...	2	4	4	19
Marasmus .....	6	4	...	2	2	4	...	1	1	...	3	3	26
Premature Birth .....	3	2	...	1	2	2	3	3	2	1	5	4	28
Congenital Defects .....	3	6	3	...	1	1	...	2	2	...	1	2	21
<b>Tuberculous Diseases.</b>													
Tubercular Meningitis.....	...	2	1	...	..	...	...	...	...	1	1	...	5
Peritonitis .....	...	...	...	2	...	2	...	1	...	...	1	1	7
Other Tubercular Diseases .....	2	1	...	1	1	..	1	...	1	...	...	1	8
Erysipelas .....	...	...	...	...	...	...	...	1	...	...	...	...	1
Convulsions .....	3	7	3	2	5	2	4	2	1	4	5	4	42
Bronchitis .....	3	4	1	2	2	2	...	1	2	1	6	2	26
Pneumonia .....	6	12	1	...	4	2	...	2	2	2	2	4	37
Meningitis (not Tubercular) .....	...	...	...	1	...	1	1	...	1	1	1	...	6
Syphilis.....	...	...	...	...	...	...	...	...	...	...	1	...	1
Other Causes.....	6	3	...	1	2	5	1	...	2	2	6	2	30
<b>Totals .....</b>	<b>45</b>	<b>52</b>	<b>13</b>	<b>14</b>	<b>28</b>	<b>31</b>	<b>11</b>	<b>15</b>	<b>23</b>	<b>16</b>	<b>46</b>	<b>31</b>	<b>325</b>



TABLE 2.—The Annual and Quarterly Death Rate in each Ward.

LOCALITIES.				1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Annual.
Humber Ward	...	...	...	15·686	17·927	12·885	16·240	17·086
Wellington Ward	...	...	...	23·497	17·089	12·288	13·885	16·688
Weelsby Ward	...	...	...	11·173	10·428	6·703	9·683	9·497
Wellow Ward	...	...	...	10·084	16·806	7·563	14·285	12·184
South Ward	...	...	...	10·554	10·554	6·332	7·387	8·707
Alexandra Ward	...	...	...	19·158	16·835	14·513	9·288	14·949
South-West Ward	...	...	...	18·867	15·094	7·547	11·320	13·207
Central Ward	...	...	...	23·661	13·521	7·887	21·971	16·760
Clee Ward	...	...	...	11·494	9·195	9·195	7·662	9·386
Victoria Ward	...	...	...	20·899	17·416	9·288	17·416	16·255
North-East Ward	...	...	...	27·848	15·822	14·556	10·759	17·246
Hainton Ward	...	...	...	14·144	10·183	7·355	9·052	10·183





## NOTIFICATIONS OF INFECTIOUS DISEASES.

The aggregate number of notifications is in excess of that of 1906, due, as will be seen, to the prevalence of Scarlet Fever, this disease accounting for 537 out of a gross total of 835 notifications.

In 1906 the number was 527, and the average for the past nine years 706.

457 cases were removed to the Sanatorium for isolation, equal to a percentage of all cases of 54·73, as compared with 40·00 per cent. in 1906, and 35·29 in 1905.

### Scarlatina.

537 notifications were received with 11 deaths, as against 240 and 1 death during the preceding year.

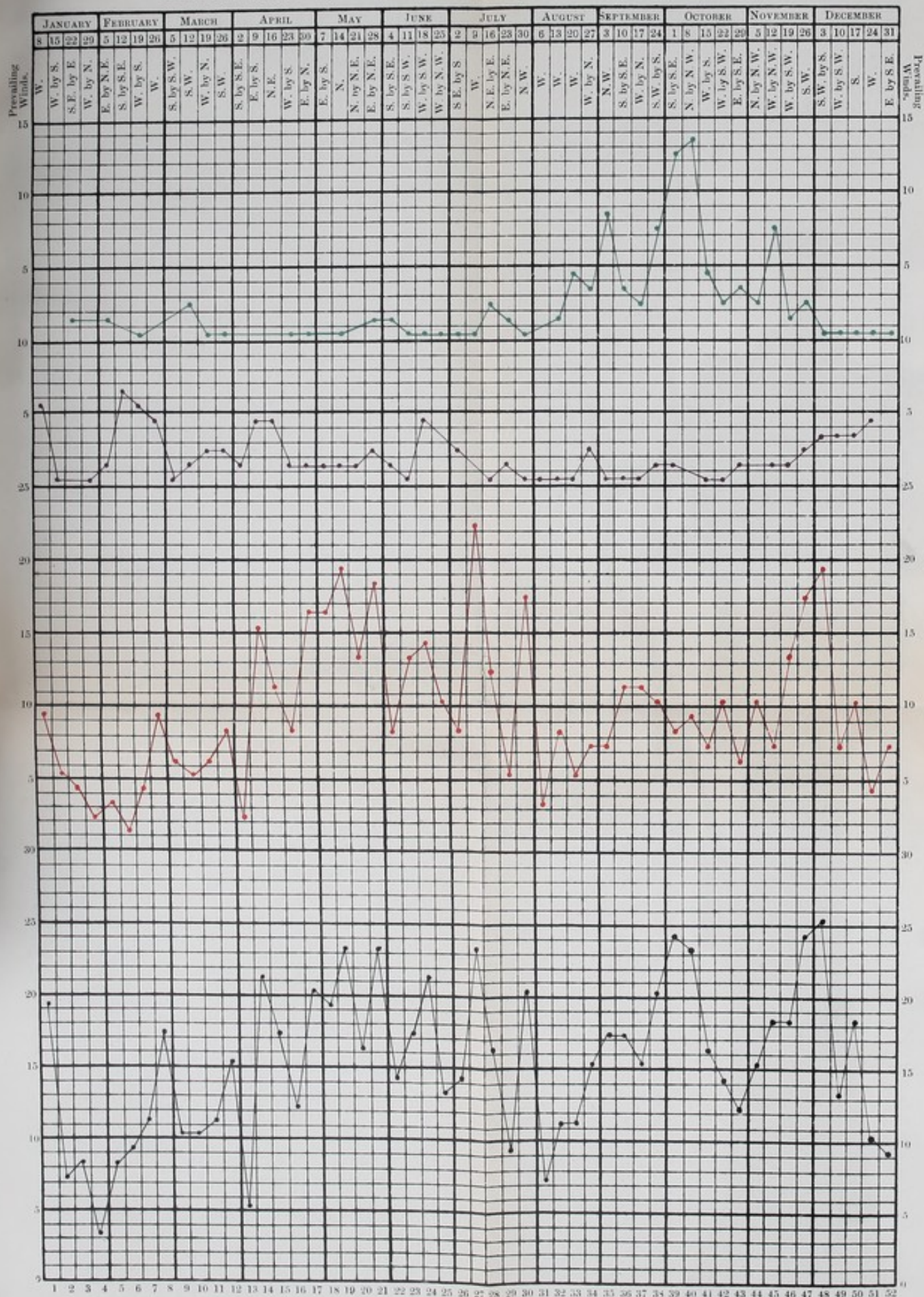
The average for the last nine years was 277, with 4 deaths.

The following Table indicates the distribution of the cases and deaths, and the Chart shows the number of cases in weeks :—



# CHART No. 2.

**BLACK** Spots indicate the total Notifications each week during 1907.  
**RED** " " " " Scarlet Fever Cases each week during 1907.  
**GREEN** " " " " Typhoid Fever " " " " "  
**VIOLET** " " " " Diphtheria " " " " "  
**BLACK** Letters " " " " Prevailing Winds " " " " "







# SCARLATINA NOTIFICATIONS.

WARDS.	H.	Welln.	Clee.	N.E. Weelsby.	Wellow.	Centl. Hainton.	Alex.	Victoria.	S.W.	S.	TOTAL.
March.....	18	9	5	3	7	4	10	—	5	9	1 74
June .....	14	31	14	9	15	7	31	22	7	27	1 181
September .....	30	35	18	12	4	5	15	5	8	6	2 143
December .....	32	9	23	6	10	3	11	21	8	8	5 139
Total .....	94	84	60	30	36	19	67	48	28	50	9 537
Rate per 1,000 .....	13.165	11.214	11.494	4.756	6.703	3.991	9.436	6.789	4.063	7.256	3.773 2.374 7.540

## DEATHS.

WARDS.	H.	Welln.	Clee.	N.E. Weelsby.	Wellow.	Centl. Hainton.	Alex.	Victoria.	S.W.	S.	Sanator.	TOTAL.
March.....	1	—	—	1	—	—	—	—	—	—	1	3
June .....	—	2	—	—	1	—	—	1	—	—	1	5
September .....	—	1	—	—	—	1	—	—	—	—	1	3
December .....	—	—	—	—	—	—	—	—	—	—	—	—
Total .....	1	3	—	1	1	1	—	1	—	—	3	11
Rate per 1,000 .....	.140	.400	—	.158	—	.210	.140	—	.144	—	—	.154

344 cases, or 64.05 per cent. were removed to the Sanatorium.



## INCIDENCE OF SCARLET FEVER IN VARIOUS YEARS.

Year.	No. of cases Notified.	No. treated in Sanatorium.	No. of Deaths.	Mortality per 100 cases Notified.
1893	306	5	4	1.37
1894	203	10	8	3.94
1895	148	12	3	2.03
1896	146	13	6	4.11
1897	135	47	3	2.22
1898	160	31	4	2.50
1899	149	10	2	1.34
1900	102	16	—	—
1901	202	51	1	.49
1902	708	156	10	1.41
1903	354	128	9	2.54
1904	110	54	3	2.80
1905	96	44	—	—
1906	226	111	1	.44
1907	537	344	11	2.04

## Scarlet Fever.

Since the history of this disease began (according to Hirsch, the first record of Scarlet Fever dates back to 1543) its progress has been marked by periods of epidemic prevalence which, however, are not by any means in the form of regular cycles, but rather that epidemics of the disease have occurred at irregular times, often separated by intervals of twenty years or more, and once having gained a foothold the period covered by an epidemic has usually extended over several years.

“ Besides an absence of periodicity in the epidemic cycles of Scarlet Fever, it should also be noted that during the intervals there has not usually been the more or less complete disappearance of the disease, which we see in Measles, Smallpox and Typhus, but that there has been a tendency for Scarlet Fever to hang about a locality in a sporadic form and occasionally, by the aggregation of cases, to constitute a minor epidemic.” (Allbutt's System of Med.).

This is exactly the condition which has prevailed in Grimsby during the last eighteen months. Whereas at no time during recent years could we be said to be entirely free from the disease, yet there has been recently such an increased prevalence as to constitute a minor epidemic.



## Seasonal prevalence.

Although there is a marked absence of anything like regularity in the occurrence of epidemics of Scarlet Fever, the converse is equally true regarding seasonal prevalence. Over a long period, the records of large towns since the notification Act came into force, as well as the admissions into large hospitals, all go to prove that Scarlet Fever as a rule is least prevalent in the months of March and April, after which a steady rise takes place till the mean is passed sometime during the months of June, July and August. From this point the disease reaches its maximum during the month of October, when a decline again sets in, the mean on the downward path of the curve being reached about the middle of January.

Roughly speaking, it appears from the foregoing that Scarlet Fever tends to be more prevalent during the latter half of the year, and less prevalent during the first half.

During the latter half of 1906 and the whole of 1907, there has been an epidemic prevalence of Scarlet Fever in the Borough.

For a number of years past Scarlet Fever has not been markedly in the ascendant either in this Borough or in other similar towns over the county generally.

The history of this Fever is that it tends to assume what are called seasons of Epidemic prevalence, during which, despite the most rigid measures which may be adopted for limiting its spread, it attacks large numbers of the most susceptible persons (*i.e.* children of school age).

The increase in the number of cases first became manifest in the month of July, 1906, followed by a season of diminished prevalence during the latter part of August and up to the fourth week of October, when a decided rise again took place, followed by a still further rise in the second week of November, from this point to the end of December, 1906, there was a steady decline in the number of cases reported.

## Mistaken (Amateur) Diagnosis.

As previously pointed out there was a very decided falling off in the number of cases reported during December, 1906, and the latter part of November also.



Unfortunately a new factor came into operation at the early part of 1907 which, in my opinion, played a not unimportant part in the subsequent rapid increase in the number of attacks of Scarlet Fever. This added factor was a somewhat extensive prevalence of Measles. Judging by the number of cases which came to light it is tolerably certain that many cases of mild Scarlet Fever were looked upon by the parents as Measles, and in consequence no medical man was called in. The mother holds a consultation on the case with several of the neighbours and friends, the "rash" is carefully examined and if, as sometimes happens, the said "rash" is not quite typical it is a rather pardonable error to fall into in calling the disease Measles—yet a most disastrous one from the public health point of view. The child is only "poorly" a few days, the "rash" is quickly gone, and the child, if of school age, is allowed to resume attendance while yet in an infective state, and most likely passes on the infection to its neighbours in school.

Obviously, therefore, it is of the utmost importance that parents and guardians having the charge of children attending elementary schools should think seriously before allowing any child to resume school attendance after an illness accompanied by a "rash."

"Rash" and sore throat together, especially if preceded by an attack of sickness—a bilious attack it is sometimes referred to as—are always to be looked upon with suspicion, and advice should be sought in such cases. Otherwise there is a very real danger that some serious disease may be overlooked, and the child on resuming school may become a source of harm to those in immediate contact with it in school.

It may be here stated as a general rule, and not merely in reference to Scarlet Fever, that it should be the aim of all concerned, both parents and guardians, and also of Education and Public Health Authorities, to see to it that no effort is spared, no stone left unturned to make sure, as far as may be, that in causing children to mix together in school to have instilled into their minds the knowledge which is to be of service to them in after life, we are not at the same time exposing them to the risk of contracting some disease which may possibly prove fatal or leave behind it some permanent physical defect or disablement.

I desire specially to recognise the valuable assistance which has been rendered to the Sanitary Department by Head Teachers and others in calling attention to any suspicious cases of illness occurring amongst scholars attending our elementary schools. Such assistance has often proved of great value in detecting and isolating unrecognised cases of Scarlet Fever, thus possibly occasionally preventing what might have proved a "school" outbreak.



The Education Authorities, too, I have always found ready and willing to support any action which it has been considered advisable to take in closing (temporarily) any School or department for purposes of disinfection and cleansing.

## School Attendance and Scarlet Fever.

There can be no doubt whatever in the mind of anyone having to deal with the statistics regarding infectious disease that this (school attendance) is very largely responsible for its dissemination. A noticeable feature, however, of the present outbreak is its wide prevalence, and in no instance whatever, save one which will be subsequently mentioned, has there been any evidence pointing to one particular school or department as a centre of infection. The cases have been spread over the town generally, and more or less each school in the town has contributed its quota to the total number of cases.

The Summer and 'Xmas vacations have been taken advantage of to have all the elementary schools in the Borough thoroughly disinfected by spraying with Formalin and subsequent cleansing of desks, floors, and as far as possible the various utensils belonging to the children.

Dust is a very important item in the conveying of germs, and the floors of schools should be well covered with\* disinfectant saw-dust prior to sweeping, avoiding thereby the stirring up of dust which subsequently settles on desks, &c.

## Closing of schools and exclusion of children on account of the prevalence of Infectious Disease.

Admitting, as there is no doubt we must, that school attendance is largely responsible for the dissemination of Scarlet Fever, one is tempted to fall back upon school closure as the panacea of prevention. Like the poor, however, Scarlet Fever is always with us to a greater or less extent, and to be constantly resorting to school closure would very seriously interfere with the work of the education department. There are two ways in which this matter may be dealt with :—

- (a) By excluding certain scholars for a specified time.
- (b) By closing a whole school.

In regard to (a) as it is rarely possible to provide for the effectual separation of the sick from the healthy in the houses of children attending elementary schools, it is always insisted upon that where a patient is not sent into hospital for isolation, the whole of the remaining children in that household be excluded from school until the recovery of the patient and disinfection of the premises. The reasons for this are (1) because children might possibly go to school with the disease in a latent form or at any rate in the early unrecognised stage, and (2) because it



is a well recognised fact that the infection of Scarlet Fever may become attached to the clothing of persons living in an infected atmosphere, even though the carrier himself remain unaffected.

(b) Closing of Schools.—In a memorandum issued by the Local Government Board on the subject of schools in relation to infectious disease, the opinion is expressed that “ This, by more seriously interfering with the educational work of a district, is a much more grave step for a Sanitary Authority to take than to direct exclusion of particular scholars. It is a measure that seldom ought to be enforced, except under circumstances involving imminent risk of an epidemic, nor even then as a matter of routine, nor unless there be a clear prospect of preventing the propagation of disease, such as could not be looked for from less comprehensive action.”

Discussing the merits of the two methods (*i.e.* the exclusion system and the total closure) the memorandum goes on to state that :—

“ If the cases be few in number, and their origin known, the exclusion from school of the children of infected households will probably suffice, but this measure will fail where there are many undiscovered or unrecognised cases, or where the known centres of infection are very numerous. Commonly, the failure of carefully considered measures of exclusion to stay the spread of an epidemic which shows a special incidence upon school children, may be regarded as pointing to the continued attendance at school of children with the prevalent disease in a mild or unrecognised form and a strong case will appear for the closing of schools.

“ In places where there are several public elementary schools, if an outbreak of infectious disease be confined to the scholars of one particular school, it may be sufficient to close that school only. But where different schools have all appeared to aid in the spread of the disease (though perhaps to an unequal extent) the Sanitary Authority may consider it advisable that all should be closed lest children in an infectious state who previously attended the schools that are closed should be sent to others that might remain open.”

In considering the question of school closure it is necessary to take into account the opportunities for inter-communication possessed by the scholars apart from school attendance. In this respect sparsely populated rural districts are on a totally different footing from urban districts :—

“ It is less likely to be useful in a town or compact village (particularly where houses are sub-let and yards are in common), where children of different households, when not in school, spend their time in playing together and often run



“in and out of each other’s houses. But it must be remembered that children when at play out of doors are brought into much less close association with each other than when in school.”

There is much truth, in my opinion, in the latter suggestion. It is doubtful I think, if children do infect one another very often while playing out of doors. The atmosphere of schools and of dwellings, with the attendant dust-laden atmosphere, is certainly more conducive to the spread of contagion.

## To secure early Isolation.

In cases where the home conditions preclude any attempt at efficient separation of the affected child, the co-operation of medical men was invited in this way, that, instead of waiting for a notification to be sent through the post in the ordinary way, they were asked, in suitable cases, to ring up the Department on telephone, giving the necessary particulars, and thus enable us to remove a patient to hospital the same day as it is discovered. In many instances a separate room for the affected individual is out of the question, and the moving of a case to hospital a day earlier may mean the difference between the disease being limited to the one patient, and several members of the family becoming infected. The vital principle of hospital isolation, particularly in reference to Scarlet Fever cases, is to get hold of, at as early a moment as we possibly can, the first case in a dwelling.

I am pleased to say that many medical men have been good enough to aid us in the way indicated. It is hardly necessary for me to assure them that such assistance is highly appreciated, and that we shall spare no pains on our part to render them all the aid we possibly can in securing immediate removal of any case where the circumstances call for prompt action.

Scarlet Fever at the present day appears to be of a very different type from that which prevailed in the earlier years of the history of this disease. The outbreak we have recently been experiencing has had, as one of its most characteristic features, that of mildness of type. This is in itself a very gratifying feature, yet it has this unfortunate effect that proportionately more cases go unrecognised, are not kept in strict isolation a sufficient length of time, and thus by coming in contact with others either in school or other places, are the means of handing on the infection. In a recent circular issued by the Education Authorities to Head Teachers I recommended that a child should be kept at home for a fortnight after recovery or discharge from hospital.

## How Scarlet Fever is spread.

A few instances of how contagion is spread will illustrate the foregoing remarks in a sufficiently striking manner to impress upon you the difficulties which are met with in endeavouring to check the progress of the disease. It may reasonably be assumed that many more instances occurred, which did not come to light,



where children were attending school and mixing freely with others while still in a condition capable of infecting others.

CASE I.—R. R. Teacher noticed child's hands appeared to be peeling. Sent home and visited by the Medical Officer of Health, who certified Scarlet Fever.

CASE II.—W. G. On account of non-attendance at school the Attendance Officer notified the Medical Officer who visited the house and found the child suffering from Scarlet Fever and playing about and mixing freely with other children.

CASE III.—R. S. Was ill a fortnight ago—no medical man in attendance—after a few days was allowed to return to school. Teacher noticed child's hands appeared to be unusually rough and sent him home. Visited by Medical Officer of Health; there was found to be free desquamation on palms of hands, and on the feet. Some nasal discharge.

CASE IV.—Teacher giving object lesson in class on the appearances of Scarlet Fever, and describing how the hands peeled afterwards when a child held up her hand and said she "knew a little girl whose hands were like that." Enquiries proved that the statement was correct, and that the case referred to was one of Scarlet Fever which was then removed to hospital for isolation.

CASE V.—H. C. Information reached the office that a child had been sent home from school apparently desquamating. On the Medical Officer visiting the house where the child lived it was found to be a case of Scarlet Fever with profuse desquamation, and also nasal discharge. While this child was being examined (it was just after twelve o'clock) two more children came in from school, and both these also were found to have recently had a mild attack of Scarlet Fever, and were still infective.

During the early part of November it appeared, from the number of notifications of Scarlet Fever which were being received of children affected who were attending one of our elementary schools, that a particular department of this school was being the means of disseminating the disease.

I accordingly visited the school on November 26th and found nothing suspicious in the appearance of any of the class present on that occasion. It was, however, a very wet day, and several children were absent. It was thought probable that if any child had not been very well, or had had any slight illness recently, it would most likely have been kept at home on account of the weather. A second visit was therefore paid on the following morning, and a child was found suffering from a nasal discharge which, it appeared possible, might be of a specific character, though no sign of desquamation could be seen. A visit to the child's home elicited the fact that the whole of the members of the family had, during the previous fortnight or three weeks, suffered from "Sore Throat." The children were accordingly excluded from school, and the Education Authority were advised to close the school for a few days for the purpose of disinfection. These measures served to arrest the progress of the disease as far as that particular department was concerned.



## Children should not be allowed in School under five years of age.

Having regard to the influence exerted by School Attendance on the dissemination of Infectious Diseases generally, and having regard also to the enormously increased fatality of several of these diseases in early life, it appears to me that it is an entirely wrong and mistaken policy to allow children of tender years to congregate together, as is the custom at present in our infant departments. There are grave reasons, in my opinion, against such a course, and all children under five years of age should be rigidly excluded. Opinions on this subject, I am aware, are divided, and it is argued that if not in school they would be playing together out in the streets. Better so, there is infinitely less probability of their contracting any infection under such circumstances than in the confined, dust-laden atmosphere of school.

Not only should children be kept out of school until they attain the age at which attendance is at present compulsory, but the raising of school age to six years might be taken into serious consideration.

Such a step would be conducive to the health of the child and very materially lessen the tendency to its contracting Infectious Disease at an age when it is particularly liable to succumb to an attack, and more time would then be allowed for the development of the brain before commencing its education.

May not some portion of the physical deterioration, about which we are so concerned at the present day, be due to over stimulation of the immature brain-cells of the child—especially if this child's body is already being supplied with an amount of nourishment barely sufficient for the building up of its rapidly growing tissues ?

A glance at the following table will illustrate the two points, incidence of attack and comparative fatality at the different ages :—

SCARLET FEVER.

Age.	Cases Notified.	Deaths.	Case-rate per thousand living.	Percentage fatality.
Under one year.	2679	3405	2·5	13·45
1—2	7095	888	7·4	12·5
2—3	12630	1180	13·7	9·35
3—4	17114	1141	19·05	6·65
4—5	18590	754	21·5	4·05
5—10	71780	1433	1·72	2·00



From this table it will be observed that in respect of Scarlet Fever mortality, there is a steady decline in the percentage from one year upwards. Also that the mortality of the 5—10 year period is just one half that 4—5 year, and putting together the 3—4 and 4—5 year periods the mortality of the combined is rather over two-and-a-half times the 5—10 year period.

Is it a reasonable suggestion then that the longer you can stave off an attack of Scarlet Fever the better? Not only is an attack less likely to prove fatal but it is a well-known fact that the severe attacks are those which are likely to lead to those unfortunate complications which may leave some permanent disablement.

In respect of Diphtheria, too, the conditions are much the same as obtain in regard to Scarlet Fever.

Referring to this disease, Dr. Tatham, in an article on Medical Statistics, says:—"The figures (*i.e.* a table similar to the one just quoted on Scarlet Fever) "represent average annual rates per thousand children living under five years "of age at which age *Diphtheria is more fatal than at other stages of life.*" The case-rate per thousand in the 5—10 years group is only just over one half that of the 4—5 years group, and the percentage fatality about two-thirds only.

#### DIPHTHERIA.

Age.	Cases Notified.	Deaths.	Case-rate per thousand living.	Percentage fatality.
Under 1 year	2605	1158	2·5	44·75
1—2	7605	3016	7·9	39·7
2—3	9996	3025	10·85	30·35
3—4	12408	2950	13·85	23·75
4—5	12653	2514	14·35	19·85
5—10	37182	4802	8·9	12·85

The same remarks apply with not less force in the case of Whooping Cough and Measles, both of which are diseases largely propagated by the aggregation of children in school.



## Scarlet Fever and Milk Supplies.

As a matter of routine, when an Inspector pays a visit consequent on a notification of Infectious Disease, the origin of the milk supply to the household is enquired into.

On one occasion only did there appear to be any undue prevalence of cases in a particular milk-round. Enquiries were at once instituted by communicating with the Sanitary Authorities of the district in which the milk originated. These enquiries (as communicated to me by the Medical Officer of Health) failed to elicit anything of a suspicious nature, either in regard to the persons handling the milk or the animals from which the supply was derived.

The following paragraph appeared in the monthly report to the Sanitary Committee for the month of June, 1907 :—

“Suspicious circumstances having arisen in connection with a few cases of Scarlet Fever whose milk supply was derived from two neighbouring districts, full enquiries were made with negative results. I was assured by the Medical Officer of Health of the districts concerned that nothing specific had occurred at either place, in regard to the cattle or those engaged with the milking process.”

One great difficulty in tracing any supposed infection by milk is the fact that one retailer perhaps obtains his supply from a number of sources, and the milk being mixed in his churns, any given house may be supplied on the same day with milk from different farms.

The Public Health Amendment Act, 1907, gives power to require any milk-seller to provide a list of all the producers from whom he receives supplies.

## Diphtheria.

Of this disease 118 intimations were received with 11 deaths, as compared with 128 and 18 deaths during 1906.

The average for the last nine years was 171 and 22 deaths.

They were located in the various Wards as follows :—



# DIPHTHERIA NOTIFICATIONS.

WARDS.....	H.	Welln.	Clee.	N.E.	Weelsby.	Wellow.	Centl.	Hainton.	Alex.	Victoria.	S.W.	S.	TOTAL.
March.....	2	—	1	1	6	2	5	1	7	6	2	4	37
June .....	3	6	—	5	3	3	6	1	—	3	3	1	34
September .....	4	6	2	1	2	1	1	—	—	1	—	—	18
December .....	2	2	3	1	4	2	8	4	1	1	1	—	29
Total .....	11	14	6	8	15	8	20	6	8	11	6	5	118
Rate per 1,000 .....	1.540	1.869	1.149	1.265	2.793	1.680	2.816	.848	1.159	1.596	1.886	1.319	1.656

# DEATHS.

WARDS. ....	H.	Welln.	Clee.	N.E.	Weelsby.	Wellow.	Centl.	Hainton.	Alex.	Vict.	S.W.	S.	Sanator.	TOTAL
March.....	—	—	—	1	—	—	1	—	—	—	—	—	2	4
June .....	—	1	—	—	—	—	—	—	—	—	—	—	2	3
September .....	—	1	—	—	—	—	—	—	—	—	—	—	—	1
December .....	—	—	—	2	—	1	—	—	—	—	—	—	—	3
Total .....	—	2	—	1	2	—	2	—	—	—	—	—	4	11
Rate per 1,000 .....	—	.267	—	.158	.372	—	.281	—	—	—	—	—	—	.154

The percentage of deaths in the present year was 9.332 of the cases notified.  
60 patients, or 50.82 per cent., accepted isolation at the Sanatorium.

# INCIDENCE OF DIPHTHERIA (INCLUDING MEMBRANOUS CROUP) IN VARIOUS YEARS.

Year.	No. of Cases Notified.	No. treated in Sanatorium.	No. of Deaths.	Mortality per 100 Cases Notified.
1893	121	1	29	23.96
1894	112	2	21	18.75
1895	69	2	13	18.84
1896	82	1	23	27.07
1897	83	12	25	30.12
1898	90	—	9	10.00
1899	148	3	31	20.94
1900	360	76	51	14.138
1901	306	97	38	12.41
1902	136	30	12	8.60
1903	101	28	8	7.92
1904	141	51	19	13.47
1905	105	33	14	13.33
1906	126	47	21	16.66
1907	118	60	11	9.32

The notifications of Diphtheria show a slight decline on the numbers in 1906. The case mortality, too, is low—11 deaths for a total number of notifications of 118 giving a percentage mortality of 9.32.

It is interesting in this connection to note the very appreciable diminution in the death-rate from Diphtheria, since the use of antitoxin became general. In the pre-antitoxin days the percentage mortality would be somewhere about 28.00, whereas the average fatality for the past 7 years is 11.21 per cent.

The importance of early administration of antitoxin is well recognised by all authorities, and in order that treatment may be commenced at the earliest possible moment, medical men have been good enough to communicate direct with the office by telephone, with the result that in many instances the case has been removed, and treatment commenced a day earlier than would have been possible had a notification been sent in the ordinary way through post. As already indicated in speaking of Scarlet Fever isolation this course of action is of great assistance and enhances the patient's chance of recovery.

## Enteric Fever.

123 notifications of this disease were received during the year, as compared with 101 in the year previous. The average for the last nine years was 215 with 19.88 deaths per annum.

The distribution of the cases and deaths are shown in the accompanying table, together with the numbers of notifications and deaths in previous years :—



# ENTERIC FEVER NOTIFICATIONS.

WARDS.....	H.	Welln.	Clee.	N.E. Weelsby.	Wellow.	Centl. Hainton.	Alex.	Victoria.	S.W.	S.	TOTAL.
March.....	1	1	—	1	—	—	3	2	—	2	10
June .....	4	1	—	—	1	—	—	2	1	—	10
September .....	4	4	3	8	5	6	4	3	2	5	53
December .....	3	6	3	1	8	1	3	4	4	5	50
Total .....	12	12	6	10	14	13	8	10	11	7	123
Rate per 1,000 .....	1.680	1.602	1.149	1.582	2.607	2.731	1.126	1.131	1.451	2.201	3.166
											1.727

# DEATHS.

WARDS.....	H.	Welln.	Clee.	N.E. Weelsby.	Wellow.	Centl. Hainton.	Alex.	Victoria.	S.W.	S.	Sanator.	W.H.	TOTAL.
March.....	—	—	—	—	—	—	—	—	—	—	2	1	3
June .....	2	—	—	—	—	—	—	1	—	—	—	—	3
September ...	—	—	—	—	—	—	1	1	—	—	1	—	3
December ....	—	—	1	2	1	1	—	—	—	2	—	—	7
Total ..	2	—	1	2	1	—	1	2	—	—	5	1	16
Rate per 1,000 .....	.280	—	.191	—	.372	.210	—	.141	.145	.290	—	—	.224

53 cases (*i.e.* 43.08 per cent.) were removed to the Sanatorium.

## INCIDENCE OF ENTERIC FEVER (INCLUDING CONTINUED AND RELAPSING FEVER) IN VARIOUS YEARS.

Year.	No. of Cases Notified.	No. treated in Sanatorium.	No. of Deaths.	Mortality per 100 Cases Notified.
1893	368	—	54	14·67
1894	141	—	26	18·44
1895	204	5	21	10·29
1896	129	4	15	10·62
1897	131	6	11	8·47
1898	301	24	24	7·97
1899	305	—	28	9·14
1900	181	41	14	7·73
1901	360	97	37	10·27
1902	410	74	29	7·07
1903	245	91	20	8·16
1904	121	58	13	10·74
1905	119	50	12	10·08
1906	101	47	10	9·90
1907	123	53	16	13·00

Notifications of Enteric Fever show a slight advance as compared with 1906. When, however, we take into account the figures for the past ten years, and note that the yearly average number of cases over this period is 221, the outlook may be said to be reassuring.

We must not, however, rest satisfied until further improvements have been effected in our methods of refuse disposal—until all the sewers are efficiently ventilated, and w.c.'s have replaced our filthy box privies, and the water carriage system has become the one and only method of sewage disposal.

### Erysipelas.

55 notifications were received with 3 deaths, as against 51 and 4 deaths the previous year.

### Puerperal Fever.

2 intimations were received with 1 death, as compared with 4 and no deaths last year, and 8 with 3 deaths in 1905.

The usual notice of suspensions was served upon Nurses in attendance acting as Midwives.



The following is a list of the names and addresses of registered Midwives living in the Borough :—

1 Sarah Blanchard	..37 Ayscough Street	..Not certificated by Exam.
2 Elizabeth Birkett	..70 Corporation Road	..L.O.S. Certificate
3 Elizabeth Cutler	..103 Grafton Street	..Not certificated by Exam.
4 Mary Ann Coddington	..76 Annesley Street	ditto
5 Annie Frances Chase	..50 Sixhills Street	..L.O.S. Certificate
6 Annie East	..17 Garden Street	..Not certificated by Exam.
7 Sarah Ellis	..77 Wellington Street	.. ditto
8 Rebecca Fletcher	..36 Robinson Street	.. ditto
9 Edith Harwood Greenhalgh	..Workhouse Infirmary	..L.O.S. Certificate
10 Maria Hewitt	..64 Bridge Street	..Not certificated by Exam.
11 Martha Frances Johnson	..142 Thorold Street	.. ditto
12 Eliza Mapplebeck	..70 Corporation Road	..Manchester Maternity Hospital Certificate
13 Elizabeth Manson	..Workhouse Infirmary	..L.O.S. Certificate
14 Betsy Paddison	..24 Cobden Street	..Not certificated by Exam.
15 Lois Robinson	..58 Burgess Street	.. ditto
16 Sarah Jane Smith	..Workhouse Infirmary	.. ditto
17 Catherine Ann Pinch	..106 Granville Street	.. ditto
18 Sarah Emma Wakefield	..167 Kent Street	.. ditto
19 Eliza Ann Webster	..198 Cleethorpe Road	.. ditto
20 Sarah Ann Wainman	..30 Fraser Street	.. ditto

## Midwives Act, 1902.

During the year 1907, the number of Midwives who intimated their intention to practice in the district of your Authority, in accordance with Sec. 10 of the Act, is as follows :—

Total number on Roll .....	20
Number holding a Certificate .....	5
From a Licensing Authority .....	—
Retired from practice .....	1
Removed from Roll (by Central Board) .....	1

It is now necessary that anyone intending to practice as a Midwife shall undergo a course of training in Midwifery, and pass the examination of the Central Midwives Board—after receiving the certificate of the Board it is her duty before “holding herself out as a practising Midwife or commencing to practice in any area to give notice in writing of her intention so to do to the Local Supervising Authority.”



Visits of inspection are periodically paid by your Medical Officer to the houses of Midwives for the purpose of examining the register, bag and appliances, noting their condition and suggesting where necessary any improvement with a view to keeping all appliances as aseptic as possible.

Registers of cases attended are in many instances very imperfectly kept, and the book of forms supplied for the keeping of an account of the reasons for calling in medical aid are only occasionally used.

## Small-pox Hospital, Laceby.

This hospital is being maintained in a state of readiness for the admission of a case or cases at any moment. The accommodation for the isolation of families of contacts is also complete and ready for any emergency.

It is satisfactory to note that no case of small-pox having occurred in the town during the year, it has not been necessary to utilise the building at all.

## Sanatorium, Little Coates.

This institution has unfortunately proved quite inadequate to the requirements of the town during the past year. Diminished in size as it was by the removal of the block until recently occupied by Diphtheria cases, the accommodation being thereby reduced to something like 40 beds, recourse to tents was found necessary in order to be able to provide for the isolation of anything like the whole of the cases we were asked to admit.

A site for a new hospital at Scartho having now been decided upon, and the work being already in progress, we hope very soon to be able to deal with all cases which require isolation.

The total number of admissions during the year 1907 to the Fever Hospital at Little Coates amounted to 457. Scarlet Fever cases accounted for no less than 344 of this total, while 60 were cases of Diphtheria, and of Enteric Fever, 53 cases were admitted.

423 were discharged cured, viz., 318 Scarlet Fever, 56 of Diphtheria, and 49 Enteric Fever.

The fatal cases were 6 of Scarlet Fever, equal to a case-mortality of 1·74 per cent., 5 of Diphtheria, equal to a case-mortality of 8·33 per cent., and of Enteric Fever there were 4 deaths, equal to 7·54 per cent. mortality.



The total number of days spent by patients in the hospital were: Of Scarlet Fever patients, 15,732, giving an average per patient of 45·73 days.

In respect to Diphtheria the total number of days spent in hospital by these cases was 1,675—an average stay in hospital for each patient of 27·91 days.

Enteric Fever cases, as might be expected, remained in longer than the other forms of illness, the average per case being 55·13 days, and a total number of days of 2,922.

The accompanying table shows, in detail, the work of the institution :—

# FEVER HOSPITAL REPORT.

**Table of Admissions and Discharges for 1907.**

	ADMITTED.					Total.	DISCHARGED.					Total.	DIED.					Total.
	Small-pox.	Scarlet Fever.	Diph-theria.	Enteric or Typhoid.	Others.		Small-pox.	Scarlet Fever.	Diph-theria.	Typhoid.	Others.		Small-pox.	Scarlet Fever.	Diph-theria.	Typhoid.	Others.	
JANUARY .....	...	13	5	1	...	19	...	18	5	1	...	24	...	1	1	1	...	3
FEBRUARY .....	...	13	12	2	...	27	...	9	3	2	...	14	...	1	3	...	...	4
MARCH .....	...	20	4	...	...	24	...	12	7	2	...	21	...	...	...	1	...	1
APRIL .....	...	38	10	1	...	49	...	23	4	0	...	27	...	...	1	...	...	1
MAY .....	...	43	4	...	...	47	...	27	10	0	...	37	...	2	...	...	...	2
JUNE .....	...	33	5	3	...	41	...	39	6	1	...	46	...	...	...	...	...	...
JULY .....	...	46	5	6	...	57	...	30	5	0	...	35	...	1	...	...	...	1
AUGUST .....	...	18	3	5	...	26	...	47	3	1	...	51	...	...	...	1	...	1
SEPTEMBER .....	...	35	2	11	...	48	...	32	3	7	...	42	...	...	...	...	...	...
OCTOBER .....	...	29	3	15	...	47	...	26	3	10	...	39	...	1	...	...	...	1
NOVEMBER .....	...	34	3	6	...	43	...	31	1	9	...	41	...	...	...	1	...	1
DECEMBER .....	...	22	4	3	...	29	...	24	6	16	...	46	...	...	...	...	...	...
<b>TOTAL .....</b>	...	344	60	53	...	457	...	318	56	49	...	423	...	6	5	4	..	15



## Means adopted to prevent spread of Infectious disease.

On receipt of the notification of a case of Infectious Disease, an Inspector first of all visits the house in question and makes all enquiries relative to the surroundings of the patient, the means available for proper isolation of the case at home, examines into the sanitary surroundings, ascertains the milk and water supplies; and in case of children of school age, the school attended by the patient or other children in the house.

If, as frequently happens, the limited house accommodation does not admit of anything approaching efficient isolation at home, the friends are advised to allow the case to be removed to hospital for the purpose of limiting the further spread of the disease.

On the other hand should the case be kept at home, disinfectants are supplied and also Carbolic Oil for inunction in Scarlet Fever. In dealing with Enteric Fever a pail for the reception of discharges is sent to the house, and changed each night.

All children living at infected houses are excluded from school and any other members of the household, in respect of whose occupation there might be danger to the public from their remaining at home, are requested to find temporary lodging elsewhere.

## Household Scavenging and Cleansing.

This work is very thoroughly done at weekly intervals, the dry refuse collected by your own workmen is satisfactorily disposed of in an efficient manner by the "Horsfall" destructor. Very few complaints are received of inattention, and these chiefly owing to some omission on the part of occupiers, they failing to leave premises accessible to the collectors.

The new nightsoil tip is now available for dealing with the privy box contents, and is as satisfactory as any such arrangement well can be.

## General Drainage.

As will be seen from the report of your Sanitary Inspector, in old drains, wherever possible the smoke test is applied, and many defects thereby discovered and remedied.



It frequently happens that the tributary house drains are found to be leaking, hence, subsoil pollution occurs; what few remain of the old type of brick cess-pools are being rapidly replaced by sanitary gullies.

At the time of writing your Committee have decided to increase the Inspector's staff. It has been felt for some time that a thorough house-to-house inspection, and the institution of what may be called a "sanitary record" of every street and house in the town is desirable. The existing staff being unable to do more than deal with the ordinary routine work, it was quite impossible to undertake a sanitary crusade of the kind indicated without further assistance. There is therefore every reason to anticipate that the step which you have taken in deciding to provide additional help will be effective in improving the sanitary condition of the town generally.

## Water Supply.

The quarterly examination gave satisfactory results, the samples sent for analysis showing the water to be of a high potable quality.

## Area of Wards.

I am indebted to the Surveyor for the following details respecting area of Wards and number of houses in each Ward as given in the new ordnance maps recently published.

Alexandra .....	496	South .....	872
Central .....	89	South-West .....	83
Clee .....	369	Victoria.....	128
Hainton .....	117	Weelsby .....	276
Humber .....	251	Wellington .....	82
North-East.....	296	Wellow .....	201

Total area—3,260 acres.

The following Table gives the number of houses in each of the Wards as under the new arrangement, together with the number of added houses during the year :—



# Number of Houses in the Borough in each Ward.

	Wellow Ward.	South Ward.	S.W. Ward.	Alex. Ward.	Victoria Ward.	Central Ward.	N.E. Ward.	Humber Ward.	Welltn. Ward.	Clee Ward.	Hainton Ward.	Weelsby Ward.	Total.
Number existing December 31st, 1905 .....	1025	790	702	1478	1574	1618	1443	1527	1618	910	1567	1161	15413
Erected during the twelve months	19	16	...	32	...	1	...	...	...	122	...	16	206
Total at December 31st, 1907 .....	1044	806	702	1510	1574	1619	1443	1527	1618	1032	1567	1177	15619

L.G.B.

TABLE 1.—Vital Statistics of whole District during 1907,  
and previous Years.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.					Total Deaths in Public Institu- tions in the District.	Deaths of Non- residents registered in Public Institu- tions in the District.	Deaths of Residents registered in Public Institu- tions beyond the District.	NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT.	
		Number.	Rate.	Under 1 year of Age.		At all Ages.						Number.	Rate.
				Number.	Rate per 1,000 Births registered.	Number.	Rate.						
1	2	3	4	5	6	7	8	9	10	11	12	13	
1897	58450	1895	32.	420	221	1043	17.84	83	19	...	1024	17.50	
1898	62000	1876	30.25	419	223	1001	16.14	84	28	...	973	15.69	
1899	64190	1937	30.17	417	215	1144	17.82	96	19	...	1125	17.52	
1900	65760	2043	31.06	395	193	1210	18.40	106	18	...	1192	18.12	
1901	63138	2048	32.43	379	185	1065	16.86	123	27	...	1038	16.43	
1902	64140	1972	30.74	284	144	981	15.29	144	31	...	950	14.81	
1903	65100	1879	28.86	321	170	953	14.63	141	21	...	932	14.33	
1904	65950	1960	29.71	367	187	1113	16.87	144	27	...	1086	16.46	
1905	67000	1980	29.55	348	175	1022	15.25	130	25	...	997	14.88	
1906	69360	2069	29.82	366	176	1044	15.05	140	35	...	1009	14.54	
Averages for years 1897 1906	64508	1965	30.45	371	188	1057	16.41	119	25	...	1032	16.02	
1907	71220	2119	29.75	325	153	1134	15.92	139	39	18	1113	15.62	



L.G.B.

Table II. Vital Statistics of Separate Localities in 1907.

NAMES OF LOCALITIES...	HUMBER.			WELLINGTON.			WEELSBY.			WELLOW.			SOUTH.			ALEXANDRA.		
	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.
YEAR.																		
1907	7140	122	44	7490	124	54	5370	51	14	4760	58	11	3790	33	10	6890	103	26
NAMES OF LOCALITIES...	SOUTH-WEST.			CENTRAL.			CLEE.			VICTORIA.			NORTH-EAST.			HAINTON.		
	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.	Population esti- mated to middle of each year.	Deaths at all ages.	Deaths under 1 yr.
YEAR.																		
1907	3180	42	14	7100	119	49	5220	49	20	6890	111	34	6320	109	26	7070	72	15

L.G.B.

**TABLE 3.—Cases of Infectious Diseases notified during the Year 1907.**

Cases notified in whole District. At Ages—Years.

NOTIFIABLE DISEASE.	At all Ages.	Under 1.	1 to 5	5 to 15	15 to 25	25 to 65	65 and upwards.
Diphtheria ... ..	118	—	20	59	21	17	1
Erysipelas ... ..	55	1	—	1	10	41	2
Scarlet fever ... ..	537	1	91	350	72	23	—
Typhoid fever ... ..	123	—	12	39	21	50	1
Puerperal fever ... ..	2	—	—	—	2	—	—
Total ... ..	835	2	123	449	126	131	4

L.G.B.

**TABLE 3a.—Total Cases notified in each Locality.**

NOTIFIABLE DISEASE.	1 Hum.	2 Well.	3 Clee.	4 N.E.	5 Wlsby.	6 W'low.	7 Cent.	8 Hain.	9 Alex.	10 Vict.	11 S.W.	12 South.
Diphtheria ... ..	11	14	6	8	15	8	20	6	8	11	6	5
Erysipelas ... ..	6	7	2	4	2	2	11	5	2	4	4	6
Scarlet fever ... ..	94	84	60	30	36	19	67	48	28	50	12	9
Typhoid fever ... ..	12	12	6	10	14	13	8	8	10	11	7	12
Puerperal fever ... ..	—	1	—	—	—	—	—	—	—	—	1	—
Total ... ..	123	118	74	52	67	42	106	67	48	76	30	32



L.G.B.

TABLE 3b.—No. of Cases removed to Hospital from each Locality.

WARDS.....	1 Hum.	2 Well.	3 Clee.	4 N.E.	5 Wisby.	6 W'low.	7 Cent.	8 Hain.	9 Alex.	10 Vict.	11 S.W.	12 South.	Outside District
Diphtheria ... ..	6	4	3	5	4	7	9	3	3	9	2	3	2
Scarlet fever ... ..	53	50	41	20	15	6	50	29	15	44	8	5	8
Enteric fever or Typhoid fever .	4	7	1	9	4	4	3	1	4	4	4	3	5
Total .....	63	61	45	34	23	17	62	33	22	57	14	11	15

The Isolation Hospital is at Little Coates.

L.G.B.

TABLE 5.—Infantile Mortality during the Year 1907.

Deaths from stated causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Wk.	1-2 Wks.	2-3 Wks.	3-4 Wks.	Total under 1 Mth.	1-2 Mhs.	2-3 Mhs.	3-4 Mhs.	4-5 Mhs.	5-6 Mhs.	6-7 Mhs.	7-8 Mhs.	8-9 Mhs.	9-10 Mhs.	10-11 Mhs.	11-12 Mhs.	Total Deaths under 1 Yr.
Measles	...	...	...	...	...	...	1	6	2	...	...	...	2	...	2	1	5
Whooping Cough	...	...	...	...	...	...	...	2	...	...	1	2	2	...	1	3	19
Diarrhoea, all forms	...	1	...	...	1	...	2	2	1	2	2	2	1	1	1	...	15
Enteritis, Muco-enteritis, Gastro-enteritis	...	...	1	1	2	...	1	...	1	1	1	1	1	...	1	1	9
Gastritis, Gastro-intestinal Catarrh	...	...	...	...	...	...	...	1	...	...	...	...	...	1	1	1	4
Premature Birth	20	2	...	...	22	5	...	...	...	...	...	1	...	...	...	...	28
Congenital Defects	3	2	4	1	10	4	...	...	1	2	...	...	...	...	...	1	21
Atrophy, Debility, Marasmus	18	7	4	4	33	6	7	3	5	1	2	...	...	1	2	1	61
Tuberculous Meningitis	...	...	...	...	...	1	2	1	1	...	...	...	...	...	...	...	5
Tuberculous Peritonitis: Tabes Mesenterica	...	...	...	...	...	1	1	1	...	1	1	...	...	1	...	1	7
Other Tuberculous Diseases	...	...	...	...	...	1	1	...	...	...	2	...	1	1	3	...	8
Erysipelas	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1
Syphilis	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Meningitis (not Tuberculous)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Convulsions	1	...	...	...	1	1	...	...	...	1	1	...	1	1	...	...	6
Bronchitis	10	1	4	1	16	3	5	3	3	...	...	1	5	2	3	1	42
Pneumonia	...	1	1	...	2	3	...	...	3	3	4	3	3	2	1	2	26
Other Causes	4	1	2	2	9	6	5	2	1	1	2	1	8	3	7	2	37
	56	16	16	9	97	36	33	20	22	12	19	12	23	15	18	18	325

District or Sub-division of Grimsby.

Births { legitimate 2014.  
          { illegitimate 96.

Deaths all causes 1134.  
Population, 71,220.



L.G.B.

TABLE 4.—Causes of, and Ages at

Causes of Death.	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District.						
	All ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upward.
1	2	3	4	5	6	7	8
Measles ... ..	50	5	40	5	...	...	..
Scarlet fever ... ..	11	...	4	6	1	...	..
Whooping-cough ... ..	38	19	18	1	...	...	..
Diphtheria and membranous croup	11	...	4	5	...	2	..
Enteric fever ... ..	16	...	1	1	4	9	..
Diarrhœa ... ..	31	28	2	1	...	...	..
Puerperal fever ... ..	1	...	...	...	1	...	..
Erysipelas ... ..	3	1	...	...	...	2	..
Phthisis, (Pulmonary Tuberculosis)	81	5	4	5	18	47	..
Cancer, malignant disease ...	60	...	...	...	1	37	2
Other diseases of Respiratory Organs ... ..	221	65	50	8	5	50	4
Premature birth ... ..	112	110	2	...	...	...	..
Heart diseases ... ..	104	1	1	4	3	53	4
Accidents ... ..	37	3	4	6	7	14	..
Cerebral diseases ... ..	86	10	13	4	5	27	2
Abdominal diseases ... ..	91	17	6	5	7	40	1
Convulsions ... ..	51	42	9	...	...	...	..
Senile decay ... ..	72	..	...	...	...	1	7
All other causes ... ..	58	19	2	2	1	28	..
All causes ... ..	1134	325	160	53	53	310	23

## Deaths during Year 1907.

Deaths at all ages of "Residents" belonging to Localities, whether occurring in or beyond the District.												Total deaths whether "Residents" or "Non-Residents" in Public Institutions in the District.
Num.	Well.	Weel.	Well'w	South	Alex.	S.W.	Cent.	Clee.	Vict.	N.E.	Hain.	
9	10	11	12	13	14	15	16	17	18	19	20	21
8	4	...	...	...	10	4	6	...	9	6	1	2
1	3	...	1	...	1	...	1	...	...	1	...	3
4	2	2	2	2	2	1	6	8	5	3	1	...
...	2	2	...	...	...	...	2	...	...	1	...	4
2	...	2	1	...	1	...	...	1	2	...	1	6
4	4	...	...	1	5	3	7	...	4	2	1	...
...	...	...	...	...	...	1	...	...	...	...	...	...
1	...	1	...	1	...	...	...	...	...	...	...	...
13	9	2	4	3	5	2	4	4	7	4	6	18
3	3	5	6	3	5	3	2	2	5	7	3	13
23	34	7	5	5	21	5	28	10	27	26	13	17
14	20	7	5	2	8	4	17	3	13	8	5	6
10	7	6	15	3	8	5	10	4	9	13	8	6
1	...	...	...	...	4	...	1	2	5	11	6	7
7	10	6	9	2	12	4	5	4	7	7	7	6
16	5	3	1	2	3	4	12	5	6	5	6	23
2	9	3	2	3	4	3	7	2	3	6	7	...
6	8	3	5	4	7	1	4	2	5	2	6	19
7	5	2	2	2	7	2	7	2	5	7	1	9
122	125	51	58	33	103	42	119	49	112	109	72	139



# Factory and Workshops Act, 1901.

The details of the work under this heading are as follows :—

## INSPECTION.

Premises.	Number of		
	Inspections.	Written and Verbal Notice	Prosecutions.
Factories (including Factory Laundries) ..	..	..	..
Workshops (including Workshop Laundries) ..	332	12	None
Workplaces .. .. .			

## DEFECTS FOUND.

Premises.	Number of Defects.			No. of Prosecutions
	Found.	Remedied.	Referred to H.M. Insp't'r	
Nuisances under the Public Health Acts :—				
Want of Cleanliness .. .. .	4	4	..	..
Want of Ventilation .. .. .	1	1	..	..
Overcrowding .. .. .	1	1	..	..
Want of Drainage of Floors .. .. .	1	1	..	..
Other Nuisances .. .. .	..	..	..	..
Sanitary Accommodation. { Insufficient .. .. .	1	1	..	..
{ Unsuitable or Defective .. .. .	..	..	..	..
{ Not Separate for Sexes .. .. .	4	4	..	..
Offences under the Factory and Workshops Act :—				
Illegal Occupation of Underground Bakehouse, sec. 101 Breach of Special Sanitary Requirements for Bakehouses (secs. 97 to 100) .. .. .	..	..	..	..
Other Offences .. .. .	..	..	..	..
(Excluding offences relating to outwork which are included in Part 3 of this Report) .. .. .	..	..	..	..

The general nuisances found included the cleansing of 4 dirty workshop floors, fixing of 4 w.c.'s, the provision of 1 privy receptacle, and the investigation of smells in one workshop, found to be due to gas escape. 14 places were discontinued as workshops, and 7 changed occupancy, 8 rooms were measured up, 5 changed addresses, 7 were supplied with abstracts, and 3 letters were sent.

The P.H.A.A.A., sect. 22, is in force in this District.



# GREAT GRIMSBY PORT SANITARY AUTHORITY.

## *REPORT for year ending Dec. 31st, 1907.*

A detailed account of the work done in the District by your officials, the inspection of shipping, of fish and other foods, and the general sanitary work, is herewith presented.

Tables giving the amount and total value of the fish landed in 1907 and previous years, and the amount found to be unfit for consumption, are also appended, together with a return of the alien traffic for the year, compared with 1906.

VESSELS INSPECTED—British Steam Ships 824, British Sailing Ships 168, Foreign Steam Ships 621, Foreign Sailing Ships 115, Steam Fishing Vessels 383, Sailing Fishing Vessels 87, Steam and Sail Herring Boats 56, Canal Boats 227; 2,481. Extra inspections of work in hand 371—Total 2,852.

The Nationalities of the vessels were as follows:—British 1,745, Swedish 280, Norwegian 230, Danish 114, French 56, German 37, Russian 19. Total—2,481.

### **Structural and General Defects.**

	Cases.	Remedied
Defective ventilation to forecandle .....	62	50
No ventilation to forecastles .....	43	31
Broken port lights, causing dampness .....	52	33
Broken port lights, causing darkness .....	9	6
Choked scupper pipes, causing water to stand .....	12	11
Defective floorings in forecastles .....	19	17
Defective flooring to w.c. ....	1	1
Defective deck w.c. pans .....	25	13
Broken pans to cabin w.c.'s .....	2	2
Leaky overhead decks in forecastles .....	42	38
Sweating overhead ironwork in crew's forecastles, causing dampness .....	14	11
Defective stoves causing forecastles to be full of smoke .....	6	5
Leaky combings to deck house, causing dampness .....	3	3
Accumulations of filth between wood and iron decks .....	3	3
Defective bulkheads, allowing communication between w.c.'s and crew's forecastles .....	4	4
	<hr/> 297	<hr/> 228



## **Dirty Forecastles.**

The forecastles or deck-houses on 168 British and 86 Foreign vessels were found in a dirty condition. Orders were given by your Inspector for the cleansing of the same, and in each case they were either cleansed, painted or lime-washed as required.

They were of the following Nationalities :—British 168, Swedish 39, Norwegian 28, French 13, Russian 3, German 3—Total 254.

## **Choked and Dirty Water Closets.**

On 87 vessels the deck or cabin w.c.'s were found in a choked and dirty condition. Orders were given for the same to be cleansed and disinfected ; this in all cases on re-inspection was found to have been carried out.

## **Inspection of Water Boats.**

The boats used for the supply of fresh water to the vessels in dock are regularly inspected, and at all times have been found clean, and the water of good quality.

## **Dirty Water Tanks and Casks.**

On 48 vessels the tanks or casks used for the storage of drinking water were found in a dirty condition. Orders were given for the cleansing of same, and in all cases the work was carried out to the satisfaction of your Inspector.

## **Nuisance from Foul and Dirty Fore Peaks.**

On 20 vessels the forepeaks situate under the crew's forecastles, were found in a foul and dirty condition, causing a nuisance to exist. Orders were given for the cleansing and disinfection of same, and in all cases this has been done.

## **Unfit for Habitation.**

On one vessel the forecastle fittings were found in such a wet state as to be a danger to the health of the crew. Upon notice of this being sent to the agents, they at once caused all the forecastles to be pulled out and new wood-work fitted.

## **Dirty Food and other Lockers.**

On 7 vessels the food or other lockers in the crew's forecastles were found in a dirty condition.

Cleansing of these was at once carried out when the attention of the master had been called to their condition by your Inspector.



## **Sickness on board Vessels during year.**

There has been a marked absence of any serious amount of infectious disease. Out of a total of 31 cases investigated, only 3 proved to be of an infectious character, namely, one of Scarlet Fever, one of Enteric Fever, and one of Diphtheria.

Special attention has been given to all vessels arriving from ports where Cerebro-spinal Meningitis was reported to be prevalent. Nothing of a suspicious character was found on board any vessel, either on arrival or during their stay in port.

The following is a detailed list of the cases of sickness reported to your Officers, and duly investigated :—

- January 7th—S.S. Eden, from Blyth, one of the crew was found suffering from Influenza. Medical attention was advised, and he remained on board.
- January 18—S.T. Brisbane, one of the crew developed Diphtheria after arriving at his home. Vessel fumigated.
- January 23—S.T. Ventnor, one of the crew was found suffering from Catarrh. Sent home.
- January 30—S.T. Gaelic, the master, mate and chief engineer were found to be suffering from Influenza. They were all allowed to proceed to their homes.
- February 11—S.S. Lorne, from Christiania, one of the crew was found suffering from Rheumatism. Remained on board.
- March 8—Canal Boat Emerald, the mate of the vessel was found suffering from the effects of Alcohol.
- March 14—S.T. Rodigo, the mate of the vessel was found suffering from Influenza. Sent home.
- March 14—S.T. Rodigo, one of the crew, the deck hand, was found suffering from Influenza. Sent home.
- March 23—S.T. Lucania, Norwegian, one of the crew was found suffering from Rheumatism. Sent home.
- April 6—S.T. Gleaner, one of the crew was found suffering from Rheumatism. Sent home.
- May 19—S.T. Laurel, one of the crew was found suffering from Gastric Catarrh, and was allowed to proceed to his home.
- June 15—S.T. Kestrel, one of the crew was found suffering from Pleurisy. Sent home.



June 20—S.S. Ashwold, one of the crew was found suffering from Gastric Catarrh.  
Sent home.

June 28—S.S. Nottingham, from Hamburg, one of the crew was found suffering from Scarlet Fever. The man was removed to the Fever Hospital with his effects, and also the effects of another member of the crew who had been left in Hamburg, also suffering from Scarlet Fever. The vessel was fumigated throughout, and no further cases occurred amongst the remaining members of the crew.

July 3—S.S. Julius (Swedish) from Halmstadt, one of the crew was found suffering from Jaundice. Medical man in attendance. Remained on board.

July 6—S.T. Margate, one of the crew was found suffering from Vertigo.

July 20—S.S. Urda (Swedish), one of the crew was found suffering from Bronchitis.  
Remained on board.

July 23—S.T. Valeria, one of the crew was found suffering from Pneumonia.  
Sent home.

August 6—S.T. Amesbury Abbey, the dead body of one of the crew on board,  
Removed to mortuary for inquest.

August 25—S.T. Bradford, one of the crew was found suffering from Palpitation of the Heart. Sent home.

August 22—S.S. Henry Horn (German), from Delfziel, one of the crew was found suffering from Typhoid Fever; removed to Fever Hospital with effects. Vessel fumigated, and the water tanks emptied and cleansed, and refilled with fresh water.

September 25—S.T. Gilderoy, one of the crew was found suffering from Debility.  
Sent home.

October 2—Barque Tropic (Swedish), from Gefle, the master was found suffering from Hernia. Sent to District Hospital.

October 7—S.T. Sir Percivale, one of the crew was found suffering from the effects of drink.

October 18—S.S. Nordstjernen (Swedish), from Hartlepool, the master was found suffering from Pneumonia. Medical man in attendance. Remained on board.

November 12—Schooner Edward, from Swansea, one of the crew was found suffering from Cold. Remained on board.

November 26—S.T. Laurel, one of the crew was found suffering from Acute. Tonsilitis. Sent home.

December 9—S.T. Jedburgh, one of the crew was found suffering from Rheumatism Sent home.

December 28—S.T. Bermuda, one of the crew was found suffering from Influenza. Sent home.

### **Canal Boat Inspection.**

227 inspections of Canal Boats were made. No case of infectious disease was met with, and generally their sanitary condition was good.

Infringements of the Acts that were dealt with were as follows :—

Dirty cabins 6, dirty water casks 4, no cover to water cask 1, defective stoves in cabins 3, leaky overhead decks 5, defective ventilation 3, foul water in bilges 1, broken deck lights 1, rotten water casks 1, cabins re-painted 1 ; total 26.

### **Emigrants Depot.**

This is found, upon inspection, to be kept clean and in good sanitary order.

### **Emigrant Traffic.**

As will be seen by the accompanying Table, there is a very decided falling off in the numbers, both of Immigrants and Transmigrants—a total decrease as compared with the previous year of 4,489. There have been no cases of dangerous infectious disorders amongst the emigrants during the year. The following Table gives the numbers of alien passengers (both inward and outward), passing through the port during 1907 :—



Month.	Number of Vessels.	Cabin.	Second Class.	Trans- migrants.	Immi- grants.	Total.
January .....	66	131	—	746	250	1127
February .....	61	88	7	1447	203	1745
March .....	73	135	2	3099	302	3538
April .....	67	142	5	2777	359	3283
May .....	80	236	7	3541	453	4237
June .....	78	242	10	3460	278	3990
July .....	83	374	8	1921	313	2616
August .....	82	347	17	2033	474	2871
September .....	76	251	8	1855	246	2360
October .....	74	186	2	2524	206	2918
November .....	66	134	3	2780	268	3185
December .....	61	119	5	1223	298	1645
1907 .....	867	2385	74	27406	3650	33515
1906 .....	806	1868	45	31905	4186	38004
Increase .....	61	517	29	..	..	..
Decrease .....	..	..	..	4499	536	4489

## OUTWARD TRAFFIC, 1907.

Alien passengers holding through tickets from one country outside the United Kingdom to another.						Alien passengers not holding through tickets.
January .. .. .	..	..	..	..	1227	591
February .. .. .	..	..	..	..	1361	575
March .. .. .	..	..	..	..	1320	680
April .. .. .	..	..	..	..	1634	527
May .. .. .	..	..	..	..	2679	696
June .. .. .	..	..	..	..	3186	736
July .. .. .	..	..	..	..	2528	806
August .. .. .	..	..	..	..	2031	975
September .. .. .	..	..	..	..	1548	713
October .. .. .	..	..	..	..	1521	559
November .. .. .	..	..	..	..	3560	498
December .. .. .	..	..	..	..	13843	596
Totals .. .. .	..	..	..	..	36438	7952

Statement showing the Total Quantity and Value of Wet Fish and Shell Fish landed  
at Grimsby during each of the years 1898—1907.

# QUANTITY.

	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907
Wet Fish.....	1,754,150	1,869,060	2,149,560	1,989,315	2,683,106	2,739,167	3,038,266	2,980,000	3,510,000	3,747,000
Shell Fish :—										
Crabs .....	No. 220,000	No. 112,400	No. 178,640	No. 245,100	No. 382,740	No. 279,010	No. 500,240	Not available.	Not available.	Not available.
Oysters.....	2,560,000	2,370,000	2,100,000	1,420,000	1,225,000	590,000	301,600	Not available.		
Other Shell Fish	17,360	15,390	10,370	9,140	6,044	3,011	5,865			

# VALUE.

	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907
Wet Fish .....	£ 1,529,824	£ 1,720,263	£ 1,966,647	£ 1,852,865	£ 2,069,609	£ 2,145,355	£ 2,519,464	£ 2,410,600	£ 2,760,000	£ 2,880,000
Shell Fish :—										
Crabs .....	1,800	1,117	1,729	2,061	2,879	2,501	3,490			
Oysters .....	5,150	4,740	4,190	2,890	2,592	1,436	791	9,500	11,600	10,000
Other Shell Fish	10,420	9,525	7,010	6,425	4,881	2,425	4,655			
Total Value .....	1,547,194	1,735,645	1,979,576	1,864,241	2,079,961	2,151,717	2,528,400	2,420,100	2,771,600	2,890,000



## **Inspection of Fish and other Foods.**

Particular attention is paid daily to this important work, and the following list will show the quantities condemned, and received as forfeited, all being destroyed as unfit for human food.

It has not been necessary to resort to legal proceedings in any case throughout the year.

Cat Fish  $13\frac{1}{2}$  tons, Codling 10 tons, Haddocks  $18\frac{1}{2}$  tons, Dabs  $2\frac{1}{4}$  tons, Halibut  $1\frac{1}{2}$  tons, Plaice  $1\frac{3}{4}$  tons, Cod  $\frac{3}{4}$  ton, Skate and Roker  $\frac{3}{4}$  ton, Gurnets  $\frac{3}{4}$  ton, Ling 3 stones, Salmon 20 pounds, Salmon Trout 10 pounds, Roes 32 boxes, Mackerel (52 score) 14 boxes, Smelts 50 boxes, Bloaters 1 box, Shrimps (268 stones) 67 baskets, Prawns (105 stones) 15 kits, Crabs 6 score.

The attention of your Medical Officer was called to some casks of offal (pigs) lying in the sheds at the Royal Dock; upon inspection they were found in a foul condition, due to the want of cleansing. The Medical Officer of Health of the towns to which the goods were consigned were notified.

There was also condemned by a Justice of the Peace, on the report of your Medical Officer and Inspector, and afterwards destroyed as unfit for human food :— 385 fowls, 96 pigeons, 36 ducks.

## **General Sanitary Conditions of the Docks, Closet Accommodation, Nuisances, etc.**

The results of systematic sanitary inspection were satisfactory as shown by the reports of your Inspector from time to time. A large number of nuisances were abated, and much real improvement made. Details of the work done in this connection were as follows :—

Choked drains cleared 47, defective drains re-laid 17, clearing choked gullies 84, fixing new downfall pipes 36, fixing new eave spouts 13, clearing choked downspouts 4, fixing new grids to gullies 12, fixing new sanitary gullies 7, clearing choked water closets 6, cleansing dirty water closet pans 20, repairing flush to w.c.'s 5, fixing new w.c.'s and drains 3, cleansing public urinals 3, fixing new w.c. pans to replace broken 2, repairing defective soilpipes 2, fixing new sanitary gullies to replace broken 3, relaying fish house floors 8, repairing doors to w.c.'s in workshops 2, workshops limewashed 17, passages limewashed 5, water closets limewashed 2.

Re-arrangement of a water closet system, fixing of an anti-syphon pipe, ventilation of w.c.'s, and construction of an inspection chamber, in connection with a set of workshops and offices.



The smoke test was applied to drains in one case, and defects found ; this was remedied by relaying the drains, and caulking the soilpipe joints.

Complaint was made to the Great Central Railway Company *re* water standing at the approach to the Humber Street Bridge ; this was remedied by laying drains and fixing gullies so that the water could run away.

During the herring season, temporary closet accommodation was provided for the use of the persons working on the west side of the Royal Dock, and those on the Humber Bank.

A nuisance was caused by large pieces of whale in a decomposing state, brought by the tide and left on the Humber Bank. The attention of the Great Central Railway Company was called to the nuisance, and they at once caused its removal to the Corporation destructor, and thus abating the nuisance.

A nuisance has at times existed from the whalings around the pontoon, caused by fish and other refuse lying on the top. On notice being sent to the Great Central Railway Company, they have always taken steps to cleanse the same.

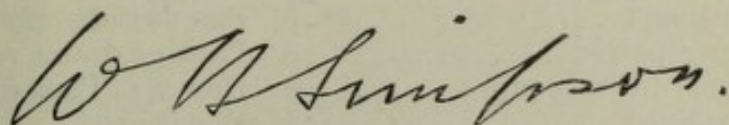
New water closet and urinal accommodation have been erected close to the herring slip. This is a great improvement, and provides what has been greatly needed for some time.

The fish curing houses in the district are generally found clean and in compliance with the Bye-laws.

With few exceptions the removal of fish offal is carried out regularly.

I am, Gentlemen,

Your obedient Servant,



*Port Medical Officer of Health.*



# Grimsby Urban Sanitary Authority.

SANITARY DEPARTMENT,

184 VICTORIA STREET, 1908.

## Report of the Borough Sanitary Inspector for 1907.

GENTLEMEN,

I have the honour to present to you my Annual Report upon the operations of the Sanitary Department.

### SUMMARY.

#### Drainage.

Sharpes Gullies fixed .....	28	New plugs to raking arms .....	3
Wash-out Gullies fixed .....	32	New waste pipes fixed .....	2
P Traps fixed .....	5	Choked Fallpipes cleared .....	6
Tile drains removed .....	11	Soilpipes repaired or renewed .....	1
New w.c.'s with flushing cisterns		Fallpipes repaired .....	9
fixed .....	31	New Drains laid .....	38
Hand-flushed w.c.'s fixed .....	3	Choked Interceptors cleared .....	4
W.c.'s and drains smell tested .....	22	New Interceptors fixed .....	5
Vents fixed on drains .....	17	Choked w.c.'s cleared .....	18
Disconnection of fall pipes from		Defective Drains relaid .....	125
sewer .....	78	Drains re-tested after re-jointing and	
New Gully Covers provided and fixed	14	relaying .....	247
Drains smoke tested .....	247	Choked Cesspools and Drains cleared	290
Urinals repaired .....	3	Inspection Chambers built .....	19
Piggeries drained .....	3	Pan Closets removed .....	1
W.c. Cisterns repaired .....	5	Passage drains relaid .....	2
Disconnection of Waste pipes .....	3	New w.c. Pans fixed .....	5
Grease Traps fixed .....	1	W.c.'s reset .....	6

#### Routine Work, General Nuisances, &c.

Portable Bins provided .....	20	Complaints received .....	911
Insanitary Ashpits abolished .....	1	Letters and Notices dispatched .....	4677
Privy Floors relaid .....	2	Dirty Yards cleansed .....	8
Privies cleansed and limewashed .....	2	Dirty Houses cleaned out .....	27
Privies repaired .....	17	Visits and re-visits <i>re</i> nuisances .....	2325
New Privy Boxes provided .....	119	House-to-house visits .....	186
Yards repaired or relaid .....	29	Visits and re-visits <i>re</i> Infectious	
Dirty Piggeries cleaned out .....	4	Diseases .....	2912



**Routine Work, General Nuisances, &c. (continued).**

Rooms disinfected .....	900	No. of Inspections of Houses let in	
Houses disinfected .....	9	Lodgings .....	607
All the Public Schools in the Borough		No. of Inspections of Slaughter-	
Vehicles disinfected .....	1	houses .....	764
Overcrowding (cases dealt with) ...	66	No. of Inspections of Workshops...	332
No. of Inspections of Lodginghouses	470	No. of Inspections of Cowsheds .....	29
" " Bakehouses ..	102		

Special reports were submitted during the year "re" :—

The urinal in Duncombe Street, behind the " Freeman's Arms."

The open spaces in Corporation Road, and other places.

The fish-curing yard down Cromwell Road.

Manure works smells.

Houses let in Lodgings.

The housing of " herring curers."

Open grids on lines of drainage.

My visit to the Congress of the British Institute of Public Health, at Douglas, in July.

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**Table showing the Quantity of Meat, Fruit, &c., destroyed during the Year**

9 Pigs	50 stones of Gooseberries
1 Calf	1½ Sheep.
50 pieces of Beef	1 Beast Head
59 lbs. of Red Currants	1 box Pig Kidneys
232 barrels of Plums (about 8 tons)	136 lbs. of Strawberries
19 Beast Carcases	4 Beast Hearts
2 Lambs	4 Beast Livers
64 lbs. Pork	2 Beast Tongues
	302 lbs. of Tomates.

**WATER SUPPLY.**

3 samples of the town water supply were submitted for Bacteriological and Chemical examination, and 2 pump waters for Chemical analysis only; they were all reported as of high potable quality.



**Table giving Description and Total Number of Samples submitted to the Public Analyst during 1907, Results of Analysis, and Number of Prosecutions.**

Description of Sample.	No. of Samples.	Result of Analysis		Offence.	Date of Proceedings.	Decision of Court.
		Genuine	Adulterated.			
				Selling Rum 3.73 degrees under proof		Trial sample only.
				Selling Rum 9.57 degrees under proof	Mar. 20, 1907	Fined £3 1s. 6d.
				Selling Whiskey 12.10 degrees under proof		Trial sample only.
				Selling Whiskey 6.46 degrees under proof	Mar. 20, 1907	Fined £3 1s. 6d.
				Selling Gin 1.34 degrees under proof		Trial sample only.
New Milk .....	136	125	11			The official sample certified to be genuine.
Whiskey .....	13	9	4			Trial sample only.
Rum .....	4	2	2	Sample of Milk adulterated with 22.36 per cent. added water		
Brandy .....	1	1	0	Sample of Milk adulterated with 20.83 per cent. added water	Sept. 20, 1907	Defendant to pay Costs, 11s.
Gin .....	6	5	1	Sample of Milk adulterated with 8 per cent added water	Sept. 20, 1907	Trial sample only.
Condensed Milk	2	2	0	Sample of Milk adulterated with 10.95 per cent. added water		Case dismissed, & wholesale dealer fined £6 7s. 6d.
Laudanum .....	2	2	0	Sample of Milk adulterated with 15.65 per cent. added water		
Butter .....	21	21	0	Sample of Milk adulterated with 1.89 per cent. added water		Vendor cautioned by order of the Sanitary Authority.
Potted Meat ...	1	1	0	Sample of Milk adulterated with 4.6 per cent. added water		Trial sample only.
Cream of Tartar	2	2	0	Sample of Milk adulterated with 4.6 per cent. added water		Official sample certified genuine.
Tartaric Acid...	2	2	0	Sample of Milk adulterated with 4.6 per cent. added water		Trial sample only.
Citric Acid .....	2	2	0	Sample of Milk adulterated with 4.6 per cent. added water		Official sample certified genuine.
Margarine .....	2	2	0	Sample of Milk adulterated with 4.6 per cent. added water		Trial sample only.
Pepper.....	1	1	0	Sample of Milk adulterated with 4.36 per cent. added water.		Trial sample only.
Golden Syrup	4	4	0	Sample of Milk deficient in fat 18.66 per cent.	Oct. 18, 1907	Fined £2 2s. 6d.
Marmalade.....	1	1	0	Sample of Milk adulterated with 9 per cent. added water		Trial sample only.
				Selling Whiskey 4.77 degrees under proof		Official sample certified genuine.
				Selling Whiskey 3.61 degrees under proof	Nov. 13, 1907	Trial sample only.
				Sample of Milk adulterated with 8.7 per cent added water.		Fined £2 2s. 0d.
						Trial sample only.
						Official sample certified genuine.



## SUMMARY :—

The total amount of fines (including costs) was £17 6s. The total number of samples submitted was 200.

121 were trial samples, 12 were procured on Sundays, and the number taken at the place of delivery (under the Amendment Act) was 57.

The total number of samples adulterated was 18.

The Board of Agriculture's Inspector, when visiting Grimsby, expressed his continued satisfaction with the administration of the Acts, and again emphasised the value of trial samples in detecting fraud.

**Table of Common Lodging Houses in the Borough.**

SITUATION.	No. of Houses.	No. of Rooms.	Sleeping.	Day.	Registered No. of Lodgers.
Down Yard back of 19 Pasture Street	4	11	9	2	27
50 Upper Burgess Street	1	4	2	1	24
6 Whitgift Street	1	7	5	2	17
8 Whitgift Street	1	3	2	1	6
111 King Edward Street	1	4	3	1	18
130 King Edward Street	1	13	11	1	60
1 Fotherby Street	1	10	7	3	30
31 Fotherby Street	1	4	3	1	12
2 Duncombe Street	1	4	3	1	9
37 Railway Street	1	5	3	2	7
23 Railway Street	1	4	3	1	16
69 Nelson Street	1	7	6	1	33
Back of 25 Havelock Street	1	4	4	Use the large room at No. 29.	17
Back of 27 Havelock Street	1	4	4		10
Back of 29 Havelock Street	1	3	2	1	6
156 and 158 Upper Burgess Street	2	8	7	1	32
8 Upper Burgess Street	1	8	6	1	19
4 Holme Street	1	5	4	1	12
6 Holme Street	1	4	3	1	9
8 Holme Street	1	4	3	1	9
48 Upper Burgess Street	1	4	3	Back Kitchen not used.	12
48 Strand Street	1	13	11	2	60
33 Fotherby Street	1	4	3	1	9
No. 1 back 253 King Edward Street	3	3	3	Use large Kitchen of New Lodging House	9
No. 2       "       "       "	3	3	3		9
Down yard       "       "	1	4	3	1	57
	34	147	116	27	530

The following Summary shows the work of the year :—

Inspections 470, 34 letters sent to occupiers *re* inattention to Byelaws, 8 dirty places cleansed, 4 occupiers cautioned *re* ventilation, 2 defective eave spouts repaired, 1 wood day-room floor replaced with concrete, 3 new Byelaw cards supplied,



2 choked drains cleared, 1 new window fixed, 21 new beds and bedsteads provided (replacing worn out bedding and old bedsteads), 3 yards repaired, 4 new sanitary ashbins provided, 1 bedroom floor repaired, 1 door repaired, new set of cards furnished to one lodginghouse, 4 utensils enamelled out, new bedroom utensils were provided at four houses, 1 new sign affixed, and the walls of four rooms were newly painted out.

1 house (in Burgess Street) changed hands, from Mr. Osgothorpe to Mr. Hyde, from him to Mr. Metcalf, thence back again to Mr. Osgothorpe (present keeper).

A new lodginghouse (down the yard behind 253 King Edward Street) was licenced for 57 beds; this place was specially designed for its purpose, and is up-to-date in every detail. 2 cottages (in the same yard) were also licenced to the same keeper for 18 beds.

### **HOUSES LET IN LODGINGS.**

To these houses 607 inspections were made during the year, 3 houses were added to the total of 1906, making 107 in all of 234 rooms, comprising 74 living rooms, 90 sleeping rooms, and 70 living and sleeping rooms; combined, these accommodate 147 families of 280 adults and 28 children.

6 dirty rooms were cleansed, as were 6 lots of dirty bedding, 4 sets of new bedding being provided, 3 cases of overcrowding were found, 4 rooms disinfected after infectious disease, and 1 window, 1 staircase, 1 ceiling and 1 defective eave spout were repaired. Speaking generally, improvement is made, consequent upon inspection, though in numerous instances the rooms change hands so frequently that it is at times difficult to get occupiers to observe the Byelaws.



# ANNUAL REPORT

"RE"

## Slaughterhouses and Offensive Trades Premises

1907.

MUNICIPAL OFFICES,

184 VICTORIA STREET,

MARCH 16TH, 1908.

MR. CHAIRMAN AND GENTLEMEN,

I beg respectfully to submit the following report on the above matter :—

### SUMMARY.

No. of inspections during the year .....	764
Defaced signs re-painted .....	5
Choked drains cleared .....	1
New offal bins provided .....	2
New Byelaw cards provided .....	9
Houses partially reconstructed .....	2
Smoke nuisances abated .....	1
Paving repairs effected .....	7
Changes of occupancy notified to Inspector .....	13
Dirty places cleansed .....	1
Manure heaps removed on request .....	3
Letters sent to occupiers .....	12
Total number of Slaughterhouses on Register .....	57

Transfers were granted as follows :—House No. 7 from Mr. Smith to Mr. Rowston, and from him to Mr. Hill (present occupier) ; No. 12 from Mr. Charles to Mr. Pettit ; No. 13 from Mr. Cooper to Mr. Shrive ; No. 17 from Mrs. Cook to Mr. Allenby ; No. 26 from Mr. Wressell to Mr. Boyce ; No. 28 from Mr. Dennis to Mr. Charles ; No. 33 from Mr. Ellis to Mr. Burnett ; No. 38 from Mr. Watson to Mr. Green ; No. 40 from Mr. Pawson to Mr. Drust ; No. 50 from Mr. Turner to Mr. Sykes ; No. 35 from Messrs. Tompkins to Humphries and Allenby ; and No. 57 from Mr. Brown to Mr. Turner.

The licence to house No. 48 was returned, nor has the place been used for slaughtering during the year.



The outer yard of house No. 31 was enlarged, and the whole surface paved over, and the approach to house No. 17 in Bridge Street north was paved out.

Houses Nos. 12 & 21 were partially reconstructed, the walls for part of their height being glazed bricks.

1 new licence (to house No. 57) was allowed to Mr. Penrose, of Hainton Avenue, for adapted premises in Willingham Street.

During the year the general management of the slaughterhouses has been found to be good, it will be seen from the summary that only on a few occasions has it been necessary to write to licencees.

It is my pleasurable duty to again report the continued and growing practice of butchers generally in reporting diseased conditions found on slaughtering animals. I encourage it all I possibly can, as in this way the dealer does not suffer, and the public are protected.

The food reported and forfeited was as follows :—9 pigs, 1 calf, 19 beasts, 2 lambs,  $1\frac{1}{2}$  sheep, 1 beast head, 4 beast hearts, 4 beast livers, 2 beast tongues, 1 box of pig kidneys, 64 lbs. of pork, 50 pieces of beef ; a total value of over £400.

1 seizure of diseased meat was made from house No. 40, the defendant (who has since given up the licence and gone to reside in the country) was convicted and fined £10 including costs.

Applications are to hand for renewal of licences, will the Committee authorise their reissue (including those not yet to hand, which will arrive in a day or two).

## **OFFENSIVE TRADES PREMISES.**

As to number these are as reported last year, viz :—6 bone boilers, 7 tripe boilers, 50 fish-houses and fish drying places, 1 soap boiler, 1 fish skin scraper, 2 hide markets, and 3 manure works (2 of them being outside the Borough).

Special reports were made concerning the Oil and Manure Company's works on four occasions during the year, and the Committee were assured that the Company were pushing along with their new premises ; this is a known fact by the Sub-Committee who have twice visited the new works, and as recently as March 10th, 1908, assurances were given to the Committee that in about one month from that date the West Marsh works would be closed.

The manure works of Mr. Hobbs in Pyewipe Road were closed in January last, business being transferred to their new premises at Killingholme.

Mr. Hobbs desires to express his thanks to the Committee for their consideration, in allowing him time to get other buildings away from Grimsby.



Speaking generally, the other offensive trades premises were found to be kept in compliance with the Byelaws framed for their management (excepting the tripe dressing place occupied by Mr. Woollis in Wellington Street). This place is in a more or less dilapidated state, and is not kept as clean as it should be. I respectfully suggest that the Chairman visit it with me and report.

I am, Gentlemen,

Your obedient Servant,

HENRY F. MOODY,

*Borough Sanitary Inspector.*

N.B.—At the time of writing this report (June, 1908) the Fish Cooking plant of the Oil and Manure Company is at South Killingholme, having removed there in the early part of the present year.

### Situation of Licensed Slaughterhouses in the Borough.

1	Beside 70 Garibaldi Street	31	Back of 100 Heneage Road
2	Back of 1 Cleethorpe Road	32	" 48 Sixhills Street
3	" 27 "	33	" "
4	" 84 "	34	" "
5	" 295 "	35	" 40 Convamore Road
6	" 369 "	36	" "
7	" 2 Holles Street	37	" 92 Garibaldi Street
8	" 19 "	38	" 122 "
9	" 39 Corporation Road	39	" 23 Wellowgate
10	" 51 Corporation Road	40	" 14 Grafton Street
11	" 20 "	41	" 38 Pelham Street
12	" 36 Freeman Street	42	" 9 Humber Street
14	" 126 "	43	" 49 Yarborough Street
15	" 78 Victoria Street	44	" 120 Hildyard Street
16	" "	45	" 27 Abbey Walk.
17	" 39 Duchess Street*	46	" 44 Eastgate
18	" 39 "	47	" 33 Bethlehem Street
19	In Hope Street (facing the saw mills)	48	" 79 Lord Street
20	" " " "	49	" 60 Ravenspurn Street
21	In Albion Street (round Brocklesby Hunt corner)	50	" 56 Crescent Street
22	In Foundry Inn yard, Church St.	51	" 2 South Parade
23	" " " "	52	" 6 Wood Street
24	In Strand Street	53	" 128 Weelsby Street
25	" "	54	" 129 Macaulay Street
26	In Redhill	55	" 26 Oxford Street
27	In Catherine Street, East side	56	" 121 Duncombe Street
28	" "	57	" 17 Bridge Street
29	In King Edward Street (near Havelock Street end)	58	" 110 Fildes Street
30	In 10-foot (back of 60 Hamilton St.)	59	" 117 Stanley Street
		60	" 47 Annesley Street
		61	End of Holme Street



**BAKEHOUSES.**

These number the same as in 1906, viz., 85 (*i.e.* including wholesale and retail places).

102 inspections were made, and the places were found generally to be in good sanitary order.

2 changes of occupancy occurred, 2 dirty yards were cleansed, 2 new Bye-law cards supplied, 6 letters sent to occupiers *re* various matters, and at one bakery additional ventilation was provided.

**THE WORKSHOPS ACT, 1901.**

The following is a list of the Workshops (classified under the different headings :

**MEN'S WORKSHOPS.**

Basket Makers .....	2	Dentists .....	1
Blacksmiths .....	19	Engineers .....	3
Blind Makers .....	1	Joiners .....	24
Block Makers .....	1	Masons .....	2
Boot Repairers .....	77	Painters .....	4
Bottlers .....	2	Picture Framers .....	3
Cabinet Makers .....	6	Plumbers .....	15
Carriage Builders .....	2	Polishers .....	4
Saddlers .....	4	Undertakers .....	5
Sail Makers .....	1	Upholsterers .....	5
Snood Makers .....	1	Watch Makers .....	21
Sweet Boilers .....	2	Wheelwrights .....	7
Tailors .....	35	Wood Carvers .....	1
Tinners .....	8	Wood Turners .....	1
Twine Spinners .....	1	Trawl Makers .....	1
Rope Merchants .....	2	Umbrella Maker .....	1
Coopers .....	1	Tattooing .....	1
Cycle Makers .....	6		

**DOMESTIC WORKSHOPS.**

Boot Sewers .....	1	Picture Framers .....	1
Corset Makers .....	2	Plain Sewers .....	8
Dressmakers .....	83	Stocking Knitters .....	4
Laundries .....	2	Tailors .....	12
Fancy Drapers .....	2	Umbrella Makers .....	2
Milliners .....	6	Shirt Makers .....	3

**TENEMENT WORKSHOPS.**

Boot repairers 4, Dressmakers 7, Tailors 1, Plain sewing 1.



## MIXED WORKSHOPS.

Cattle Oil Manufacturers .....	2	Milliners .....	35
Boot Repairers .....	8	Polishers .....	2
Bottlers .....	2	Plumbers .....	3
Blacksmiths .....	2	Rag Stores .....	2
Braiders .....	5	Rope Turners .....	2
Cigar Makers .....	2	Sauce Makers .....	1
Cabinet Makers .....	5	Sweet Boilers .....	1
Carriage Builders .....	1	Stocking Knitters .....	2
Dressmakers .....	59	Tailors .....	43
Dyers .....	1	Twine Spinners .....	6
Firewood Works .....	1	Upholsterers .....	3
Fly Paper Makers .....	3	Wheelwright .....	1
Joiners .....	6	Makers of Rubber Goods .....	1
Picture Framers .....	1	Tinner .....	1
Laundries .....	8	Undertaker .....	1
Cycle Works .....	2	Umbrella Maker .....	1

The number on the registers in 1902 was 336, in 1903 416, in 1904 436, in 1905 557, in 1906 593, and in 1907 616.

The following summary shows the work of the year :—

No sanitary accommodation .....	1	Ventilation provided between w.c.'s and workroom .....	1
No. of outworkers .....	48	Letters sent .....	3
New w.c.'s fixed .....	4	Addresses changed .....	5
Places discontinued .....	14	Abstracts supplied .....	9
Changes of occupancy .....	7	Complaint of smells investigated ....	1
Dirty places cleansed .....	4	W.c.'s removed from workshop .....	1
Rooms measured .....	8	Laundry floor relaid .....	1
New privy boxes provided .....	1		

15 intimations of the opening of new workshops (form 35) were received from His Majesty's Factory Inspector as follows :—3 dressmakers, 5 milliners, 1 fly catcher paper maker, 1 laundry, 3 tailors, 1 braider, and 1 bakery.

Abstracts of the Regulations are supplied through the Factory Inspector.

## INFECTIOUS DISEASES.

Summarised the work of the year is as follows :—

Visits and re-visits to houses	1912	Dirty house surroundings	61
Rooms fumigated	900	Choked drainage	9
Houses ..	9	Defective privies	13
Schools ..	14	W.c.'s smell tested	5
Bedding treated at disinfectant (lots)	738	Defective yard surfaces	11
Bedding burnt (lots)	4	Insanitary gullies and cesspools	22
Rooms fumigated (after Phthisis)	19	Defective fallpipes	3
Rooms fumigated (after Cancer)	7	Low fallpipes on sewer direct	44
Removals for business reasons	45	Dirty w.c.'s	1
		Privy middens found	1



All library books are treated with formaldehyde gas in a closed chamber.

Of the drains smoke tested, 79 per cent. proved to be defective.

A word of thanks is again due to my assistants for willing help on all occasions, including the office Clerk.

I am, Gentlemen,

Your obedient Servant,

*Henry F. Moody*

*Borough Sanitary Inspector.*





