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Contributors

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ANNUAL REPORT

OF THE

Medical Officer of Health

TO THE

GRIMSBY

Rural District Council

FOR THE YEAR 1925,

BY

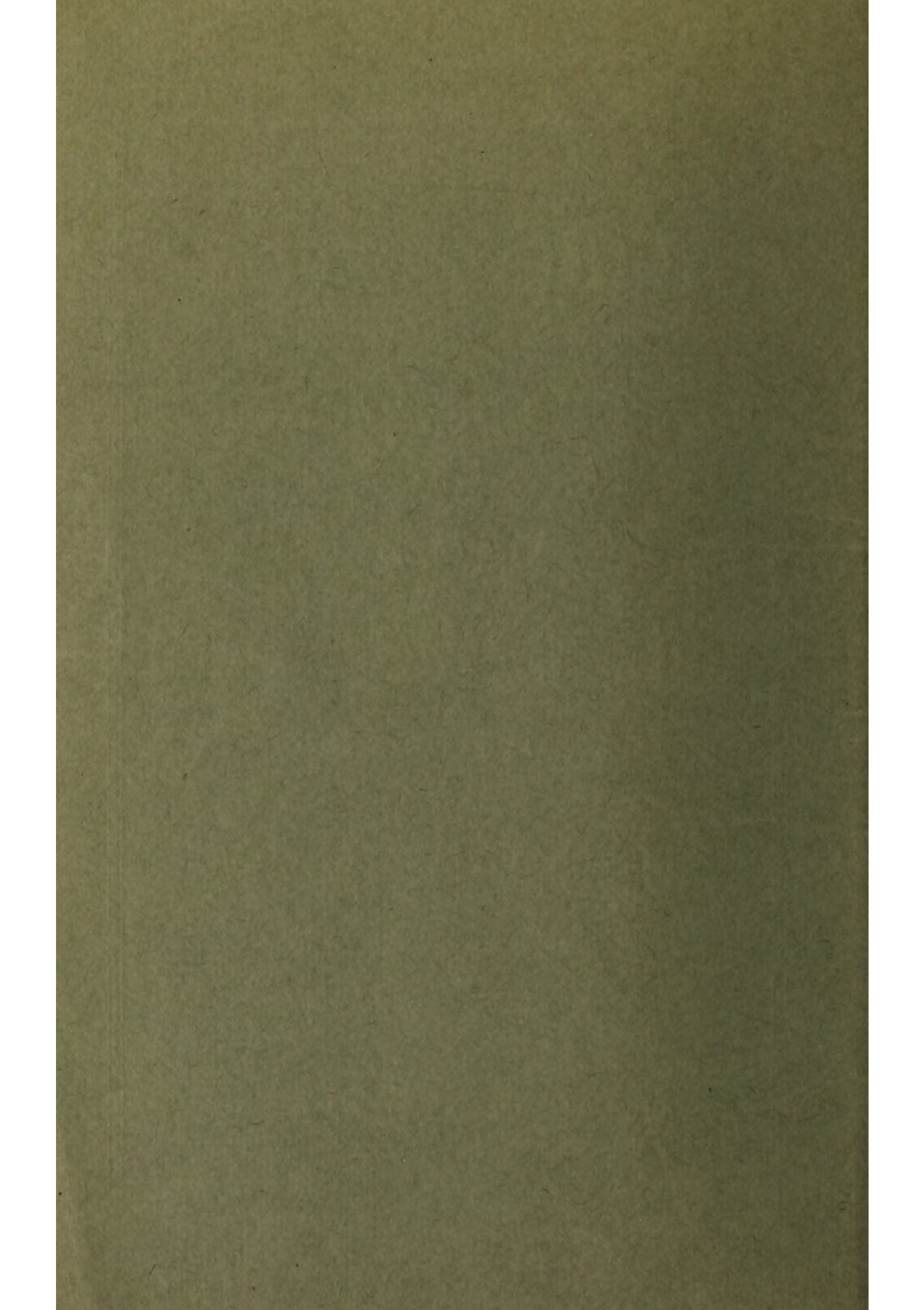
PERCIVAL VIVIAN PRITCHARD,

M.B., Ch. B., D.P.H.,

DEPUTY MEDICAL OFFICER OF HEALTH.

GRIMSBY :

BURNETTS (GRIMSBY) LTD., PRINTERS, STRAND STREET.



THE RURAL DISTRICT COUNCIL OF GRIMSBY.

Offices: DEANS_GATE, GRIMSBY,

Tel.—2199 Grimsby.

AND

Port Sanitary Office, Immingham Docks,

Tel.—18 Immingham.

Chairman of Council—

W. D. FIELD, Esq., J.P., B.A. (Camb.).

Sanitary and Building Plans Committee.

Chairman—

C. W. HEWSON, Esq.

Members—All Members of the Council.

Clerk to the Council—

T. J. HARRISON, Esq.

Medical Officer of Health—

Dr. A. H. SHENNAN (on Sick Leave).

Deputy Medical Officer of Health—

Dr. PERCIVAL V. PRITCHARD.

Assistant Port Medical Officer—

Dr. F. HEBER.

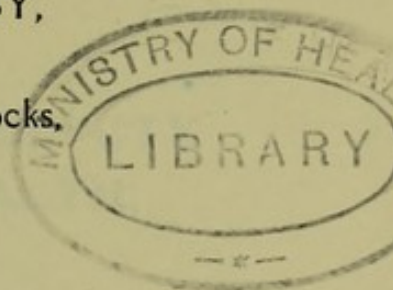
Sanitary Inspectors—

Northern District and Port of Immingham—

Mr. J. FLANAGAN, C.R.S.I.

Southern District—

Mr. C. KING, C.R.S.I.

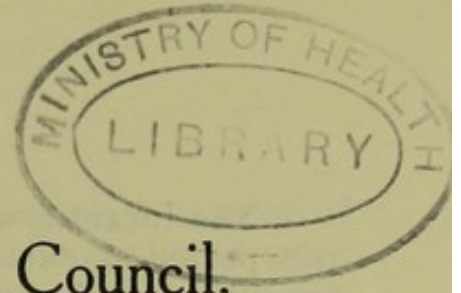


THE ROYAL HORTICULTURAL SOCIETY OF LONDON

COMMUNICATIONS
AND
PUBLICATIONS
FOR THE YEAR 1901
W. D. FIELD, F.R.S. (Chairman)

SECTIONS AND SUBSECTIONS

- 1. FRUIT AND VEGETABLES
- 2. FLOWERS
- 3. TREES AND SHRUBS
- 4. PALMS AND FERNS
- 5. HOUSE PLANTS
- 6. ROCK GARDENS
- 7. WATER GARDENS
- 8. ALPINE PLANTS
- 9. STONE PLANTS
- 10. WILDLIFE
- 11. GARDEN ARCHITECTURE
- 12. GARDEN HISTORY
- 13. GARDEN ARTS
- 14. GARDEN LITERATURE
- 15. GARDEN TOOLS
- 16. GARDEN MACHINERY
- 17. GARDEN MATERIALS
- 18. GARDEN PRODUCTS
- 19. GARDEN SERVICES
- 20. GARDEN MANAGEMENT



Grimsby Rural District Council.

ANNUAL REPORT OF THE DEPUTY MEDICAL OFFICER OF HEALTH, FOR THE YEAR 1925.

MR. CHAIRMAN AND GENTLEMEN,

I have the honour to present this Report upon the Health and Sanitary Conditions of the Grimsby Rural District for the year 1925.

Dr. SHENNAN was taken seriously ill in June, 1925, and I have had the honour to deputise for him. We all sympathise with him for his long illness, and trust that after his year's leave of absence he will return full of his old enthusiasm and completely restored to good health.

Although this is called the "Annual Report" the Minister of Health has requested that it should be in the nature of a survey Report of the last five years' progress.

The Birth Rate fell in 1925, but the District has maintained a better figure throughout the five years under review than the County or the Country. This rate has been steadily falling throughout England and Wales for many years, but the sharp fall in the District in 1925 is out of proportion to the general decline, and points to some local defects.

The percentage of Illegitimate Births was abnormally high in 1925.

These two facts from the statistics are largely related to economic and social problems, especially the question of "Housing." The figures from Little Coates are particularly noticeable, and it is in that part of the District where the need of a progressive "Housing Policy" is most required.

The Death Rate for the year is one that any Council can be well proud of. With one exception it is a record.

The Infantile Mortality figures are very disappointing for the period under review. The rate for Legitimate Infants, except in 1923, was poor. The rate for Illegitimate Infants, except in 1924, was alarmingly bad. Except for 1923 we have compared very unfavourably with other rural areas or even the county as a whole in this important rate—a rate which indicates clearly the social as well as the healthy or unhealthy conditions of the community.

Some areas of the District are worse off than others. Little Coates with about 25% of the population of the District had 40% of the Infantile Deaths. Immingham with about 20% of the population had only 11% of these deaths. That is, there were nearly four times as many deaths of Infants in Little Coates as in Immingham.

An analysis of the causes of these infantile deaths is interesting. More than one-fifth of these infants lived less than 24 hours. Their deaths were notified as due to "Premature Birth" in 50% of the cases and to "Conjenital Defects and Inanition" in the other cases. These causes are well-known as being due to defects in the parents, particularly the mother, and these defects are recognised as a direct indication of, among other things, bad housing and bad health.

Destructive criticism is simple, whilst constructive advice is not always easy to carry out.

The falling Birth Rate and the high percentage of Illegitimate Births show, I think, the need for houses of such a type and size that young people may be induced to marry, without that present horror, and obstacle in many cases, of "having to live in rooms."

I advocate the non-parlour type of house because such a residence can be let at a rent which is possible for the average man to pay—without having recourse to the sub-letting of rooms in a larger house to meet his liabilities of rent.

In the past, little or no consideration has been given to the small family. The father had to rent a house much too large for his purse or purpose, or, do what so many are still doing, rent a few rooms. Does that really constitute a home?

These remarks apply to the discussion on the Infantile Mortality where the mother is the chief actor. Here the issue is much wider, but the problem of "Housing" especially overcrowding, insanitary conditions and building defects, is still all important.

The County Council has provided an excellent scheme of Clinics and Centres. These are all helping in the good work and their influence is being clearly shown—but that is not sufficient.

We have a mixture of housing defects from the insanitary to the overcrowded. It is a large District and parts of it are only visited when complaints are received. I think that one of the first steps towards better conditions should be a complete house to house inspection throughout the District. This inspection is long overdue, but I wish to point out that it is in no way the fault of our two very able Inspectors. With the data from this a plan of campaign could be made to improve the conditions of the Rural District as a whole and not merely in patches.

A further suggestion for improvement is that an intensive campaign of propaganda should be carried out. Owing to the fact that my engagement was temporary, and for short periods at a time, I was unable to launch such a general campaign. I have been able to perform a certain amount of propaganda work in Little Coates and from the results obtained am confident that if carried out on a large scale the Council will be repaid many times over for its small outlay and trouble.

NATURAL AND SOCIAL CONDITIONS.

General Statistics.

Area ...	...	...	43,201 acres.
Population—Census 1911	...	...	... 10,629
Census 1921	...	...	... 12,290
Estimated 1925	...	...	... 13,680
Number of Inhabited Houses, 1921	...	...	... 5,586 ²⁶⁹
Number of Families or Separate Occupiers, 1921	...	...	... 6,320 ²⁸²
Rateable Value—Buildings	...	...	£81,466
Land	...	...	£38,726
Sum represented by a Penny Rate	...	...	... £380

Vital Statistics.

TABLE I.—BIRTHS AND DEATHS.

	1925			TOTALS			
	Male	Fem.	Total	1924	1923	1922	1921
Births: Legitimate	136	116	252	317	294	265	301
Illegitimate	6	12	18	8	9	11	16
Total ...	142	128	270	325	303	276	317
Deaths: All Deaths	69	74	143	150	118	156	133
All Infants under 1 year ...	14	13	27	22	18	34	30
Illegitimate In- fants under 1 year ...	3	3	6	0	1	4	2
From Measles	0	0	0	0	0	2	0
„ Diphtheria	0	0	0	0	0	0	2
„ Whooping Cough ...	0	2	2	1	0	3	4
„ Diarrhœa (und. 2 yrs)	4	0	4	1	1	1	7
Percentage of Illegitimate Births			6.7	2.5	2.9	4.0	5.0

Number of Women dying in consequence of childbirth—

- (a) From Sepsis 0
 (b) From other causes 1

TABLE II.—BIRTH AND DEATH RATES.

Per 1000 of the Population		1925	1924	1923	1922	1921
For Grimsby	} Birth Rate	19.8	24.4	23.9	22.2	25.8
Rural District						
	Death „	10.4	11.3	9.4	12.5	10.8
For the County	} Birth Rate	18.8	19.8	20.3	21.1	24.2
	Death „	11.4	11.8	11.5	12.9	11.8
For England and Wales	} Birth Rate	18.3	18.8	19.7	20.6	22.4
	Death „	12.2	12.2	11.6	12.9	12.1

TABLE III.—DEATHS OF INFANTS UNDER ONE YEAR
PER 1000 BIRTHS.

	1925	1924	1923	1922	1921
Legitimate ...	79.3	69.4	57.8	113.2	93.3
Illegitimate ...	333.3	—	111.1	363.6	125.0
For all Infants ...	100.0	67.0	59.4	123.2	94.6
For the County ...	65.67	60.0	62.4	83.5	73.4
For England & Wales ...	75.0	75.0	69.0	77.0	83.0
For County Rural Areas	—	53.8	61.2	74.5	70.1

TABLE IV.

Causes of Death in Infants.	TOTAL	In Districts.					At these Ages.					
		Little Coates	Immingham	Laceby	Bradley	Other Parts	Under 1 day	1 day—1 week	1 week—1 month	1 month—3 months	3 months—6 months	6 months—1 year
Premature Births ...	7	2	1	1	—	3	3	1	3	—	—	—
Conjenital Defects ...	2	1	—	—	1	—	2	—	—	—	—	—
Inanition ...	1	—	—	1	—	—	1	—	—	—	—	—
Marasmus ...	2	1	—	1	—	—	—	—	1	1	—	—
Enteritis, Diarrhœa, &c.	4	3	1	—	—	—	—	—	—	2	1	1
Pnuemonia, Bronchitis, &c.	10	4	1	1	1	3	—	—	—	4	3	3
Dentition, Convulsions	1	—	—	—	—	1	—	—	—	—	—	1
	27	11	3	4	2	7	6	1	4	7	4	5

TABLE V.—CAUSES OF ALL DEATHS.

	1925		TOTALS				
	Males.	Fem	1925	1924	1923	1922	1921
1 Enteric Fever	—	—	—	—	—	—	1
3 Measles	—	—	—	—	—	2	—
4 Scarlet Fever	—	1	1	—	—	—	—
5 Whooping Cough	—	2	2	1	—	3	4
6 Diphtheria	—	—	—	—	—	—	2
7 Influenza	3	3	6	4	1	5	—
10 Tuberculosis of Respiratory System... ..	2	9	11	11	9	11	12
11 Other Tuberculous Diseases	1	1	2	4	—	6	4
12 Cancer, Malignant Disease	4	6	10	25	16	11	13
13 Rheumatic Fever	1	—	1	1	—	1	—
14 Diabetes	1	1	2	2	1	1	1
15 Cerebral Hæmorrhage, &c.	1	—	1	8	4	7	6
16 Heart Disease	12	14	26	18	10	21	18
17 Arterio-sclerosis	1	—	1	3	3	1	1
18 Bronchitis	6	3	9	8	4	9	4
19 Pneumonia (all forms)	8	2	10	16	9	6	4
20 Other Respiratory Diseases	1	1	2	1	—	—	3
21 Ulcer of Stomach or Duodenum	—	1	1	1	—	—	1
22 Diarrhœa, &c. (under 2 years)	4	—	4	1	1	1	7
23 Appendicitis and Typhlitis	—	—	—	—	3	1	1
24 Cirrhosis of Liver	—	—	—	—	1	—	—
25 Acute and Chronic Nephritis	—	1	1	2	3	2	—
26 Puerperal Sepsis	—	—	—	—	—	—	—
27 Other Accidents and Diseases of Pregnancy and Parturition	—	1	1	—	1	2	1
28 Congenital Debility and Malformation, Premature Birth	5	6	11	10	5	17	13
29 Suicide	1	—	1	1	—	2	1
30 Other Deaths from Violence	2	3	5	3	8	5	3
31 Other Defined Diseases	16	18	34	30	39	42	33
TOTALS	69	74	143	150	118	156	133
Population (Estimated)			13,680	13,330	12,710	12,452	12,290

Birth-rate, Death-rate, and Analysis of Mortality during the year 1925.

(Provisional figures. The Rates for England and Wales have been calculated on a population estimated to the middle of 1925 while those for the towns have been calculated on populations estimated to the middle of 1924. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns.)

TABLE VI.

	BIRTH RATE PER 1,000 TOTAL POPULA- TION	ANNUAL DEATH RATE PER 1,000 POPULATION								RATE PER 1,000 BIRTHS		
		All Causes	Enteric Fever	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under two years)	Total Deaths under one year
England and Wales	18.3	12.2	0.01	0.00	0.13	0.03	0.15	0.07	0.32	0.47	8.4	75
105 County Boroughs and Great Towns, including London	18.8	12.2	0.01	0.00	0.17	0.03	0.18	0.09	0.30	0.43	10.8	79
157 Smaller Towns (1921 Adjus- ted Populations 20,000-50,000)	18.3	11.2	0.01	0.00	0.15	0.02	0.14	0.06	0.31	0.38	7.6	74
London	18.0	11.7	0.01	0.00	0.08	0.02	0.19	0.11	0.23	0.46	10.6	67
Grimsby Rural District ...	19.8	10.4	0.00	0.00	0.00	0.07	0.14	0.00	0.44	0.36	14.8	100.0

Physical Features and General Character of the Area.

The Rural District of Grimsby is situated in the North Eastern part of the Lindsey Division of the County of Lincoln. It has a long frontage to the Humber river.

Geologically the District is for the greater part of boulder clay which overlies the cretaceous or chalk formation. In certain parts there are areas of alluvium overlying the boulder clay. The soil varies in character—rich alluvial, stiff, strong loam, medium clay, chalk and clay, and clay and silt soils are found in different areas. Generally speaking, it is very low lying land, which makes the problem of an efficient sewerage system difficult. This is especially so in Little Coates and Immingham.

The District, for the greater part, is agricultural, producing good crops of wheat, barley, turnips, oats, and beans. Scartho is noted for its artificial grasses. There are also rich grazing lands, especially round Immingham and Stallingborough.

Immingham is a Port and is growing rapidly in importance. It handles coal, timber, grain and wool chiefly. The Dock is considered to be one of the finest in the world, and ships may come and go without consulting the tides.

Little Coates is purely residential and many of the Immingham dock workers live there. A very good service of electric trains connect the two parishes but there is no direct or convenient road at present.

Scartho is fast losing its rural atmosphere and building is very active in that parish.

Social Conditions.

The following extract has been taken from the census of 1921 :—

			Males.	Females.
Total Population	...	...	6,168	6,151
Age 0—11	...	...	1,588	1,520
Age 12 and above	...	...	4,580	4,631

CHIEF OCCUPATIONS :—

Fishermen	...	...	75	—
Agricultural	...	...	1,176	33
Including Farmers	...	...	171	—
Agricultural Labourers	...	...	679	15
Metal Workers	...	...	263	—
Makers of Foods, Drinks, etc.	...	...	82	43
Workers in Wood...	...	...	132	4
Paper Workers	...	...	70	14
Builders, etc.	...	...	242	—
Transport Workers	...	...	715	19
Including Railway Workers	...	...	298	—
Dock Labourers	...	...	162	—
Commercial and Financial Occupations...	...	...	318	77
Professional Occupations	...	...	84	96
Personal Service	...	...	60	495
Including Domestic Servants	...	...	—	413
Clerks, Typists, etc.	...	...	111	44
Stationary Engine Drivers	...	...	83	—

The Grimsby Rural District has a varied population. The Agricultural Workers are in the majority. The Transport Workers are mostly employed at Immingham.

None of these occupations influence the general health of the community in any particular way.

Poor Law Relief.

The amount of Outdoor Relief granted in the area of the Grimsby Rural District during the last four years is as follows :—

GRIMSBY RURAL DISTRICT.

		£	s.	d.
Year ended 31st December, 1925	...	3,377	6	4
" " " 1924	...	2,539	10	9
" " " 1923	...	2,559	3	8
" " " 1922	...	2,615	0	1

The above figures include relief granted to able-bodied men on account of unemployment. Medical relief is given gratuitously in all cases receiving relief in money.

Cases are also visited by members of the Laceby Nursing Association, to whom the Guardians pay an annual subscription of £5.

The number of cases admitted to the Guardians' Institution during the year ended 31st December, 1925, was 144 for the Grimsby Rural District.

General Hospitals.

The Grimsby and District Hospital provides general treatment for the area, and 150 patients from the Rural District were treated there during the year. Some patients make use of the various hospitals in Hull.

A system of "Recommends" is in force and these may be obtained from subscribers to the Hospital Funds.

GENERAL PROVISIONS OF HEALTH SERVICES.

Hospitals provided or subsidized by the County Council or the Local Authority.

1. Tuberculosis.

The County provides treatment for early cases of Tuberculosis. Branston Hall Sanatorium is just outside Lincoln and has accommodation for 35 Females and 35 Children.

There are also 4 beds for Children at Gringley-on-the-Hill Hospital, and 8 beds in Lincoln and 2 in Ipswich for Adult Males. Other accommodation is provided as the necessity arises in Institutions outside the County.

A Hospital with 10 beds has recently been provided for advanced cases at Louth, and steps are being taken to obtain additional beds at Gainsborough and Scunthorpe.

In approved cases the County Council supplies patients with Shelters (Chalets) for use at their own homes. These shelters have proved to be very useful factors in home treatment and in carrying on the good work after leaving Sanatorium.

Special facilities for the Treatment of Tuberculosis Patients available through the County Council.

- (a) The Heatherwood Hospital at Ascot provides the treatment of surgical tuberculosis in Children of ex-service men.
- (b) The Ministry's scheme for the concurrent treatment and training of Tuberculosis ex-service men has been taken

over by the National Association for the Prevention of Tuberculosis at Burrow Hill Colony, and is now also available for civilians. Instruction is given in carpentry and joinery, market gardening, pig and poultry farming and bee keeping.

- (c) The United Services Fund provides an Institution at Southborne, Bournemouth, for use as a Convalescent Home for ex-service men who have suffered from Tuberculosis.

2. Maternity.

There is one Hospital provided by the County at Scunthorpe with accommodation for 6 patients. There is no institutional provision for unmarried mothers, illegitimate infants and homeless children.

3. Children.

Ten Beds are reserved by the County at the Children's Convalescent Home at West Kirby.

4. Infectious Diseases.

Whenever the circumstances permit Infectious Diseases are treated at home by the family doctor. Otherwise patients are sent to the Isolation Hospital of the Caistor Rural District at Osgodby.

5. Small Pox Hospital.

The Small Pox Hospital which has been erected at Osgodby by the Caistor and Grimsby Rural District Councils and the Cleethorpes and Market Rasen Urban District Councils was formally opened on the 1st November, 1924. The Hospital contains accommodation for 16 patients, with two extra beds for observation purposes, the combined population for which these are provided being 53,350 (census 1921).

Brigg Rural District Council and Brigg Urban District Council have been included in the combined district, and a further additional 16 beds are being provided. Under this new arrangement there will be one bed for each 2,565 persons, and this proportion is much more satisfactory.

The Hospital is under the Medical Supervision of Dr. Fraser, and a scheme has been prepared by which it only requires four hours' notice to have the whole unit in working order. The site and situation are ideal for the purpose and the hospital is very well equipped.

6. Orthopaedic.

Non-Tubercular cases are received into Lincoln County Hospital. They are also treated in the Grimsby Hospital, but cases are not sent there officially by the County Council.

The County Council have prepared an Orthopaedic Scheme which is at present before the Minister of Health. This scheme will provide for out-patient clinics, and one will be established in Cleethorpes. A sum of money has been provided for in the estimates for sending Non-Tubercular cases to the County Hospital and Tubercular cases to institutions outside the County.

At present certain forms of Orthopaedic cases are treated at an "Out-Patient" Clinic in connection with the School Clinic under the supervision of the Assistant School Medical Officer.

Ambulance Facilities.

Cases of Infectious Diseases are removed by the Ambulance belonging to the Fever Hospital.

There is no Ambulance for general purposes in the District. When required, such is obtained by payment from the Borough of Grimsby. There is an Ambulance at Immingham Dock.

Clinics and Treatment Centres.

Nature.	Address.	Officer in Charge.	Accommodation	When held.	By whom provided.
School Clinic	Immingham	Dr. MacLaren	Good	Mondays (fortnightly) 10-12 a.m.	Lindsey County Council
Maternity and Child Welfare Centre.	"	"	"	Mondays (fortnightly) 2-4 p.m.	
School Clinic	Laceby	"	"	Fridays (fortnightly) 2-15 p.m.	
Maternity and Child Welfare Centre	"	"	"		
Tuberculosis Dispensary	Conservative Club, Dunmow Street, Little Coates	Dr. Pritchard	Poor	Tuesdays 11-30 am.—1 pm	
School Clinic	" "	"	"	Tuesdays 10--11-30 am.	
Maternity and Child Welfare Centre	Prim.Meth.Chapel Stortford Street, Little Coates	"	Fair	Mondays 2-5 p.m.	
Ante Natal Clinic	" Springfields," Clee Road, Cleethorpes.	Dr. MacLaren	Sufficient	Monthly	Lindsey County Council
Eye Clinic ...	" "	"	"	Tuesdays 9-30 a.m.	
Dental Clinic ...	" "	Mr. Lewis	"	Fortnightly by arrangement	
Venereal Disease	38 Queen Street, Grimsby	Dr. Plant	"	Borough of Grimsby	

Public Health Officers of the Local Authority.

In 1924 the Rural Council, in conjunction with the Cleethorpes Council and the Lindsey County Council, made the innovation of appointing a Medical Officer whose whole time would be devoted to Public Health Work. This Officer is the District Medical Officer of Health for the two Local Councils and Assistant Medical Officer of Health for the County in the various clinical schemes such as Tuberculosis, Maternity and Child Welfare and School Medical Inspection Service.

Attached to the District under the County schemes, but not paid by the Local Council, is a clinical staff, consisting of:—

Dr. J. E. Gains. Tuberculosis. School Medical Service.

Dr. Gertrude MacLaren. Maternity and Infant Welfare.
Ante-Natal. School Medical Oculist.

Dr. Evan Lewis. Dental Services.

And Dr. Percival V. Pritchard acting for Dr. Shennan in the above combined appointment.

The following Nurses:—		Qualifications.	Period of Service
Miss E. E. Jenkinson	3 years	Td. C.M.B.Ct.	12 years.
Miss V. Walker		3 years Td.	11 years.
Miss C. Clarke	3 years	Td. C.M.B.Ct.	5½ years.
Miss C. Reynolds	3 years	Td. C.M.B.Ct.	5½ years.
Miss K. Cohen	3 years	Td. C.M.B.Ct., H.V.Ct.	—
Miss M. Waller	3 years	Td. C.M.B.Ct.	—

Together with 3 part time District Nurses.

They are paid by the County Council and are under the supervision of:—

Miss Wright, Superintendent of the Lincolnshire Nursing Association.

They undertake the combined services of Infant Health Visiting, visiting of cases of Tuberculosis and following up of Defective School Children. They also attend the various Clinics and Dispensaries in the District.

There are also 2 Infectious Diseases Nurses.

The Staff proper of the Public Health Department of the Council consists of a whole time Medical Officer of Health, an Assistant Port Medical Officer, and 2 Sanitary Inspectors.

PROFESSIONAL NURSING.

General.

There are 3 District Nurses belonging to associations which are affiliated to the Lincolnshire Nursing Association. They are fully trained.

Infectious Diseases.

In addition to the Nurses for the general County Health Schemes there two Nurses provided by the same Authority for Infectious Diseases. They visit the homes of all cases notified by school teachers. As a rule they give advice, but in some homes they actually nurse the cases. Their services are, in my opinion, most valuable, but two nurses are not sufficient to cope with the work.

These Nurses also attend all cases of Ophthalmia Neonatorum and Puerperal Fever. When such diseases are notified to this office the County Medical Officer is immediately informed and one of these nurses is sent to the case. She acts under the private practitioner's instructions.

Midwives.

Fifteen Midwives work in the Area. Three of these are the above District Nurses. Five are from the District Nurses Home in Grimsby and three belong to the Wesleyan Nurses Home in Grimsby. These eleven Nurses are paid by their Associations. The other four midwives live in Grimsby and practice on their own account.

They are all under the supervision of Miss Wright, the County Inspector, and those living in Grimsby are subject to the supervision of the Borough Inspector in addition.

Laboratory Work.

Swabs for examination for Diphtheria, and specimens of Sputum for Tuberculosis, have been sent to the County Laboratory at Lincoln.

The following work has been done on behalf of the Rural Council.

Diphtheria, for Diagnosis, 10 specimens	...	{	Positive	1
			Negative	9
Tuberculosis, 13 specimens	...	{	Positive	3
			Negative	10

The following Acts, Bye-Laws, and Regulations are in force in the District.

Adoptive Acts.

Infectious Diseases Prevention Act, 1890.
Public Health Act Amendment Act, 1890, Part III.
Public Health Act Amendment Act, 1907, (Parts of).
Private Street Works Act, 1892 (In Little Coates only).

Bye-Laws in Force.

New Streets and Buildings (Sec. 157 P.H.A. 1875 and Sec. 23 P.H.A.A.A. 1890).
Bye-Laws under Sec. 44 P.H.A. 1875.
Offensive Trades Bye-Laws (in Draft).

Regulations under Dairies, Cowsheds, and Milk-Shops Order, 1886.

SANITARY CIRCUMSTANCES OF THE AREA.

Water.

Those parts of the District in the vicinity of Grimsby and Immingham are supplied by the Water Company. The Great Grimsby Waterworks Company has artesian bores made into the chalk limestone. The supply of water is protected throughout by a cap of boulder clay on the top of the limestone to a thickness of 80 to 90 feet, which is a uniform protection in keeping the water free from surface percolation. The supply is practically constant and the water excellent. The chemical analysis of a sample taken from a house tap supplied by this Company is reported:—

Total Solid	32.4	
Organic Carbon	.017	Almost Clear.
„ Nitrogen	.006	Colourless.
Ammonia	0	Palatable.
Nitrogen as Nitrates or Nitrites	.148	Free from Nitrites and poisonous metals.
Total combined Nitrogen	.154	
Chlorine	3.03	
Temporary Hardness	19.1	
Permanent Hardness	3.8	

The quality of this water may be best stated in the words of the late Sir E. Frankland, Analyst to the London County Council—"It may be permitted to me to congratulate you on having a water supply which, for chemical and biological purity, cannot be surpassed in Great Britain."

Drainage and Sewerage.

The system varies. In the thickly populated parts such as Little Coates, a complete water carriage system is in use. In the purely Rural Areas, and in connection with isolated houses, sumps are used, and these are emptied from time to time by their respective owners. There is a partial water carriage system at Immingham for waste household water, and the sewers are of such a nature that conversions to the complete water carriage system can be carried out without difficulty—This is being gradually done.

Rivers and Streams.

No notice of pollutions of these has been brought to my notice.

Closet Accommodation.

About 50% of the houses in the District are supplied with water closets. The rest of the District use pail closets, and each parish has its own arrangements for disposal.

Scavenging.

The greater part of the District is scavenged by contractors and, considering the nature of the area, this method is generally speaking very satisfactory. Few complaints have been received. Most of the parishes have a weekly collection.

Table showing the amount of Refuse removed and cost of removal during 1925.

	Houses Scavenged.		Loads Removed.		Contract Price per year.
	Night S.	House Ref.	Night S.	House Ref.	
Great Coates	—	106	—	67	£32 0 0
Healing	—	225	—	118	£85 0 0
Little Coates	—	527	—	278	£260 0 0
Scartho	110	356	92	205	{ £50 0 0
					{ £110 0 0
Immingham	425	463	468	364	£348 7 6
1925	535	1,677	560	1,032	£885 7 6
1924	534	1,566	555	921	£832 2 0
1923	536	1,454	444	885	£849 14 0
(9 months).					

Average Cost per Load—

1925	...	£0 11 1½
1924	...	£0 11 3
1923	...	£0 10 0

SANITARY INSPECTION OF THE AREA.

Movable Dwellings, Tents, Vans, &c.

Number inspected during the year	...	...	4
Number of nuisances therefrom abated	...	...	2
Number removed from district	...	...	1

Bakehouses.

Number in district	...	...	10
Number of underground bakehouses	...	...	0
Number of inspections	...	...	60
Contraventions of Factory Acts	...	...	18
Defects remedied	...	...	18

All bakehouses are limewashed, etc., twice a year. These are generally speaking very satisfactory.

Slaughterhouses.

Number on register	...	...	10
Number of inspections	...	...	303
Frequency of inspection—Fortnightly, and at other times when slaughtering is in progress or has been done.			
Contraventions of Byelaws—(none in force).			
Defects remedied	...	...	55
All Slaughterhouses are limewashed 4 times per year.			
Breaches of the P.H. Meat Regulations, 1924			0

One Slaughterhouse was closed as unfit. A set of bye-laws should be framed for these slaughterhouses.

Cowhouses.

Number on register	...	...	113
Number of inspections	...	...	290
Frequency of inspections—Intermittently.			
Contraventions of regulations	...	...	67
Contraventions remedied	...	...	53
Number of Milch Cows in District	...	...	1150
What arrangements for Veterinary Inspection of Cows—None			

These cowsheds require constant inspection as they are not all in an up-to-date and good condition. The importance of pure milk is becoming more evident year by year, and these cowsheds will have to fall into line with the general stream of progress.

Dairies and Milk Shops.

Number on register	...	...	...	48
Number of inspections	...	...	...	130
Frequency of inspections—Intermittently.				
Contraventions of regulations	...	...	...	4
Contraventions remedied	...	...	...	4
Any instances of disease attributed to milk during the year—No.				

Unsound Food.

Food condemned after being forfeited:—

Beasts	5	3 Tuberculous
		1 Emaciated
		1 Septic Metritis
Sheep	2	1 Gangrene
		1 Asphyxia
Calves	1	1 Asphyxia
Lambs	4	4 Traumatism
Miscellaneous Offal: Total weight—1 ton 19 cwt.		

Offensive Trades.

Number of premises in District:—				11
(a) Fried Fish Shops	...	...	...	4
(b) Fish Meal Works	...	...	...	4
(c) Gut Scraper	...	...	...	1
(d) Fish Curers	...	...	...	2
Number of inspections	...	...	...	252
Contraventions of byelaws—None in force.				
Contraventions remedied	...	...	...	—
Defects remedied	...	...	...	30

There is an urgent need for byelaws to regulate these trades now that the Council has been granted the necessary powers.

Water Supply.

Wells	{	New sunk		
		Cleansed, repaired		
		Closed as insufficient	...	1
Public Supply	{	Area supplied—Immingham, Little Coates, Great Coates, Scartho, Healing.		
		Percentage of houses supplied—about 65%.		

Closets.

Number of houses with privy vaults in district		0
Number of houses with pail closets in district		1861
Number of pail closets substituted for privy vaults		—
Number of pail closets repaired	... ..	37
Number of water closets substituted for dry receptacles		2
Number of water closets provided	... ..	2
Number of water closets repaired	... ..	58
Number of water closets cleared	... ..	53
Number of water closets cleaned	... ..	4

Drains.

Drains examined, tested, exposed, etc.	126
Drains unstopped, repaired, trapped, etc	... ..	126
Water pipes, rain water pipes disconnected, repaired, etc.		23
New soil pipes or ventilating shafts fixed	... ..	—
Existing soil pipes or ventilating shafts repaired		6
Drains reconstructed	... ..	—
Drains Inspection Chambers constructed or rebuilt		1

Cesspools.

Cesspools rendered impervious	—
Cesspools emptied, cleansed, etc.	... ..	28
Cesspools abolished	... ..	—

Disinfection and Disinfestation.

Rooms disinfected :—

(a) Ordinary Infectious Disease	... ..	98
(b) Tuberculosis	... ..	22
Rooms stripped and cleansed	... ..	5
Articles disinfected or destroyed :—		
(a) Ordinary Infectious Disease (Bedding Lots)		45
(b) Tuberculosis	... ..	6
Visits made re Infectious Disease	... ..	254
Visits made re Disinfections	... ..	174

House Refuse.

Number of bins substituted for ashpits	...	...	37
Number of houses using bins	...	approx.	2,163
Is refuse removed by householders or by Public Scavenger	...	{ Contractors do the Scavenging in the various parishes.	
How frequently is refuse removed from each house	...	Weekly	in most cases.
Number of complaints of non-removal	...		27
Method of final disposal	...	Burnt on dumps by Contractors.	
Are existing arrangements for refuse removal satisfactory	...	{ Yes, for the nature and size of the District.	

Nuisances.

Total number of nuisances during year	...	743
(1) Abated as result of informal action by Sanitary Inspector	...	713
(2) Reported to Council	{ Statutory Notice issued 30 Statutory Notice not issued —	

Details of Nuisances Abated.

	After Informal Intimation.	After Statutory Notice.
Overcrowding	6	0
Smoke	6	0
Accumulation of Refuse	20	0
Foul ditches, ponds, & stagnant water	17	1
Foul pigs and other animals (Chickens, Pigeons, Rabbits, Ducks).	11	1
Dampness	59	—
Yards re-paved or repaired	54	1
Back passages re-paved or repaired	—	—
Defects remedied Housing Acts	624	—
Other nuisances	577	20

FACTORIES, WORKSHOPS AND WORKPLACES.

1.—INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises. (1)	Number of		
	Inspections (2)	Written Notices (3)	Prosecution (4)
FACTORIES (5) (Including Factory Laundries)	156	6	0
WORKSHOPS (6) (Including Workshop Laundries)	18	0	0
WORKPLACES (None) (Other than outworkers' premises)	0	0	0
Total	174	6	0

2.—DEFECTS FOUND.

Particulars (1)	Number of Defects.			No. of Prose- cution (5)
	Found (2)	Reme- died (3)	Referr'd to H M Insp'ct'r (4)	
<i>Nuisances under the Public Health Acts*</i>				
Want of Cleanliness	6	6	...	...
Want of Ventilation ... ..	...	...	...	...
Overcrowding ... ..	...	...	...	...
Want of Drainage of Floors ... ..	...	...	...	...
Other Nuisances ... ..	...	...	...	...
Sanitary { Insufficient ... ..	...	...	...	...
Accommo- { Unsuitable or Defective ... ..	...	...	...	...
dation { Not separate for sexes ... ..	...	...	...	...
<i>Offences under the Factory and Workshops Acts:</i>				
Illegal occupation of underground Bakehouse (s. 101) ... ..	...	...	...	...
Other offences ... ..	...	...	...	...
(Excluding offences relating to out- work ... ..	...	...	...	...
Total	6	6		

*Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

Schools.

There are 18 schools in the District. Generally speaking they are in good sanitary condition and well kept. Whenever defects have been noticed during my routine School Inspections they have been reported to Lincoln and remedied.

There have been no serious epidemics in any of the schools necessitating closure. In November there was a sharp outbreak of Scarlet Fever in the two Schools at Immingham.

Chicken-pox was epidemic in most Schools, and at times, especially in Little Coates, became alarming.

The Medical Inspection of the School Children is done, with the exception of Clee Grammar School, by the District Medical Officer.

HOUSING.

The accompanying table is very instructive. Looking first at the table as a whole it is seen that in 1921, with a population in private families of 12,169, there were 2,690 houses with 14,381 occupied rooms, giving 1.18 rooms per person. For a Rural District this is generally considered poor accommodation.

Since then our population has increased by 1,500 persons and we have built 242 houses and 318 bungalows. If we allow an average of 5 rooms for houses and 4 for bungalows the conditions at the end of 1925 were that we had 16,863 rooms for 13,680 people, or 1.23 rooms per person.

This is a marked improvement, but anything below 1.3 rooms per person for a Rural Area is unsatisfactory.

In some of the parishes building has been very active but in other cases little or nothing has been done to improve the conditions. There has probably been an increase in population in all the parishes, so that in parishes such as Aylesby, Hatcliffe and West Ravendale, where no new houses have been erected, the conditions are worse now than in 1921.

In 1921 the following parishes also showed a bad figure—Bradley, Little Coates, Immingham and Stallingborough. Houses have been built in these areas since then. Bradley has done well on paper, but in reality the conditions are worse now than before. Most of the 26 Bungalows are unfit to dwell in and their addition has been of no help.

I will deal with Little Coates separately. It was the worst area in 1921 and it is still the worst part of the District. Houses have been built there but the improvement has only been from .88 to .91 rooms per person.

Immingham has only built 14 houses in 5 years. I am sure that the population has increased by some 200 people at least, and from what I personally know of the area, apart from statistics, its poor figure of 1.13 in 1921 is even worse now.

Stallingborough has built 9 houses and in my opinion has not improved greatly.

Still, we have improved notably at Healing, Humberstone, Laceby, Scartho and Waltham. Some of these parishes would, if figures were available, show up exceedingly well.

The plans for 1926 are more than satisfactory in certain parishes and the Council might look through this part of the Report and see where much work is still needed. Little Coates and Immingham will need your constant attention for some time.

Looking at the subject as a whole it is quite evident that this District has been very active and that at the present rate of progress the Housing conditions should be highly satisfactory in the near future.

Table of Housing Statistics.

ANALYSIS OF HOUSES BUILT FROM 1921 TO 1925.

PARISHES.		1921	1922	1923	1924		1925		Totals.		Houses at Census, 1921.	Total Houses Dec. 31st, 1925	Population 1921	Rooms per Person, 1921.
					Non-Subsidy	Subsidy	Non-Subsidy	Subsidy						
Ashby-cum-Fenby	....										58	58	205	1.43
Aylesby	....										26	26	139	1.13
Barnoldby-le-beck	....										43	43	163	1.44
Beelsby	....										33	33	150	1.23
Bradley	Houses	2	—	2	—	—	—	2	6	32	42	74	180	1.16
	Bungalo	3	16	6	—	1	—	—	26					
Brigsley	H	—	—	1	1	—	—	—	2	8	43	51	165	1.27
	B	—	—	5	1	—	—	—	6					
Coates, Great	H	—	1	—	1	—	—	—	2	6	112	118	493	1.29
	B	2	—	—	—	—	—	2	4					
Coates, Little	H	—	—	1	1	26	4	24	56	61	475	536	2768	0.88
	B	1	—	—	—	—	—	4	5					
Habrough	H	—	—	—	—	2	—	—	2	2	100	102	411	1.31
	B	—	—	—	—	—	—	—	—					
Hatcliffe	....										37	37	157	1.13
Hawerby-cum-Beesby											14	14	66	1.41
Healing	H	—	1	3	5	4	—	6	19	49	164	213	746	1.39
	B	—	6	6	7	5	2	4	30					
Humberstone	H	2	4	1	1	2	—	1	11	58	144	202	609	1.25
	B	9	13	10	2	1	2	10	47					
Immingham	H	—	—	6	—	7	—	—	13	14	457	471	2030	1.13
	B	—	—	—	—	1	—	—	1					
Irby	....										32	32	145	1.39
Laceby	H	—	—	—	—	4	2	4	10	13	273	286	1092	1.26
	B	—	—	1	1	—	1	—	3					
Ravendale, East	....										23	23	97	1.48
Ravendale, West	....										11	11	57	1.00
Scartho	H	8	1	4	20	25	16	30	104	225	176	401	734	1.31
	B	9	17	30	17	21	8	19	121					
Stallingborough	H	—	1	1	1	—	—	—	3	9	111	120	498	1.12
	B	—	—	4	—	2	—	—	6					
Waltham	H	1	2	3	2	5	1	5	19	69	250	319	978	1.45
	B	12	10	10	6	7	1	4	50					
Weelsby	H	—	2	—	—	—	3	—	5	14	34	48	152	1.40
	B	—	—	—	—	6	1	2	9					
Wold Newton	....										32	32	134	1.34
TOTALS	H	13	12	22	32	75	26	72	242					
	B	36	62	72	34	44	15	45	318					
					66	119	41	117						
		49	74	94	185		158		560		2690	3250	12169	1.18

Little Coates.

During the year I had a detailed house-to-house inspection of Little Coates, carried out by Mr. King. From the figures he gave me I was able to make a report on the housing question and the following is an extract from that report.

It will be seen from the Table that by various combinations of groups Little Coates can be divided into four areas. Area I consists of groups A—E and includes all houses with five or less inmates. It shows that one-third of the population of this district is well and comfortably housed. Area II, with .78 rooms per person, is only moderately housed. Area III, with .63 rooms per person, is on the border line. Combining these three areas, that is groups A—H, we find that 87% of the houses with 77% of the population taken on an average gives one room per person. Area IV, with 12.7% of the houses and 22.8% of the population has only .49 rooms per person or 2 persons per room, which is gross overcrowding.

Presuming the population to remain stationary, about 50 additional houses would change the district from having an average of .88 to 1 room per person.

It is my opinion that Little Coates is the part of the District which is mostly in need of houses and that 40 or 50 should be built to relieve the overcrowding. The method would then be to force those people in the overcrowded groups from "O" upwards to improve their housing conditions. This is quite possible if the new houses were of such a size and cost to permit a low rent. This can be done and should be done soon.

Analysis of Housing Statistics in Little Coates.

Group	Number of Persons per House.	Number of such		Percentage of		Rooms per Person	Statistics for Combination of Groups.					
		Houses	Persons	Total Houses	Total Popula't'n		Groups	Houses	Persons	Total Houses	Total Populat'n	Rooms per Person
A	One	2	2	.43	.07	5						
B	Two	42	84	8.6	3.1	2.5	A—B	44	86	9.03	3.1	2.6
C	Three	69	207	14.1	7.5	1.7	A—C	113	293	23.1	10.6	1.9
D	Four	63	252	12.9	9.2	1.3	A—D	176	545	36.0	19.8	1.6
E	Five	76	380	15.6	13.8	1.0	A—E	252	925	51.6	33.6	1.4 Area I.
F	Six	69	414	14.1	15.0	.83						
G	Seven	54	378	11.1	13.8	.7	F—G	123	792	25.2	28.7	.78 Area II.
H	Eight	51	408	10.5	14.8	.63	H	51	408	10.5	14.8	.63 Area III.
I	Nine	28	252	5.7	9.3	.56	A—H	426	2125	87.3	77.2	I
K	Ten	12	120	2.5	4.4	.5						
L	Eleven	13	143	2.6	5.2	.46						
M	Twelve	4	48	.86	1.8	.42						
N	Thirteen	4	52	.86	1.9	.38						
O	Fourteen	1	14	.22	.5	.36	I—O	62	629	12.7	22.8	.49 Area IV.
	Total	488	2754			.91						

Housing Statistics for the Year 1925.

NUMBER OF NEW HOUSES ERECTED DURING THE YEAR—

(a)	Total (including numbers given separately under (b)	158
(b)	With State Assistance under the Housing Acts :—	
	1. By the Local Authority	—
	2. By other bodies or persons	117
1.	UNFIT DWELLING-HOUSES —	
	INSPECTION —	
(1).	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	961
(2).	Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925	104
(3).	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	none
(4).	Number of dwelling-houses (exclusive of those referred to under the preceding sub head) found not to be in all respects reasonably fit for human habitation	77
2.	REMEDY OF DEFECTS WITHOUT SERVING OF FORMAL NOTICES —	
	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	624
3.	ACTION UNDER STATUTORY POWERS—	
	A—Proceedings under Section 3 of the Housing Act, 1925. (Compare Secs. 17-18 H.T.P.A. 1909).	
(1).	Number of dwelling-houses in respect of which notices were served requiring repairs	8
(2).	Number of dwelling-houses which were rendered fit after service of formal notices—	
	(a) By Owner	8
	(b) By Local Authority in default of owner	none

- (3). Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close none

B -Proceedings under Public Health Acts.

- (1). Number of dwelling-houses in respect of which notices were served requiring defects to be remedied 22
- (2). Number of dwelling-houses in which defects were remedied after service of formal notice—
- (a) By Owner 22
- (b) By Local Authority in default of owner none

The programme for 1926 is, as it stands at present, very promising. The Council is Building:—

		Parlour.	Non-Parlour.	
At Immingham...	...	8	6	Houses
At Stallingborough	...	—	6	"
At Humberstone	...	4	4	"

Negotiations are being made for 4 acres of land at Little Coates for 48 houses. This is a very progressive policy. Private Building is also on the increase.

INFECTIOUS DISEASES.

Chicken Pox.

This disease is, from a clinical point of view, unimportant but, due to its resemblance to Smallpox, it is very necessary to keep a check on it while the more serious disease is close at hand

Unfortunately parents do not always, nor even frequently, call in a Medical Practitioner for Chicken Pox, and much of the benefit of having made the disease notifiable is lost.

The real danger lies in the possibility of a mistaken home-made diagnosis of Chicken Pox which turns out to be Small Pox after a few days illness. Those few lost days are the days in which much damage can be done. It is therefore the duty of every parent to seek medical advice and make certain in all cases.

The Law of Notification is quite plain, and definitely states that all Notifiable Diseases shall be notified to the

Medical Officer of Health by the head of the family. There is a penalty attached for non-compliance. This fact is not appreciated sufficiently and I have made an effort to make it more widely known in my addresses to the people. A short circular, in plain English, stating the facts of these Laws, should be printed and distributed through the medium of the schools.

Scarlet Fever.

An Epidemic occurred at Immingham in November. It was very explosive in nature, spread rapidly, and declined just as rapidly. It lasted two weeks and resulted in 40 cases. The schools were not closed. The value of the special Nurse supplied by the County Council to help in the epidemic was marked. This is part of a County Scheme which could be enlarged with great advantage. The incidence of Scarlet Fever has been rising for several years.

Diphtheria.

The District has been remarkably free from Diphtheria during 1925. The year showed a low record. There has been a gradual improvement since 1921 when out of 14 cases there were 2 deaths.

Antitoxin is supplied free to Doctors by the Council, and the more frequent use of this as a prophylactic measure has resulted in this improvement.

Measles.

There has been a marked falling off in the incidence of this disease. No schools had to be closed owing to it during the year.

Disinfection and Disinfestation.

The Council has a Steam Disinfector at Immingham. It is not used because it is too far away from the village and would require a system for transporting the articles for disinfection. Under the circumstances I think the present system of sending all such articles to the Fever Hospital is the best.

The routine practice of disinfecting the rooms of houses from which notifications of Infectious Diseases have been received is carried out in all cases.

All the schools have been disinfected and in some cases this has been done several times during the year.

INFECTIOUS DISEASES

Notified during 1925.

TABLE I.

	Scarlet Fever	Diphtheria	Pneumonia	Chicken Pox	Erysipelas	Puerperal Fever	Typhoid Fever	Acute Anterior Poliomyelitis	Total
Healing				7	1				8
Immingham ..	45						1		46
Great Coates ..		1	2				1	1	5
Little Coates ..	2		2			1			5
Habrough ..				1					1
Holton-le-Clay ..									
Ashby-cum-Fenby, Wold Newton ..				2	2				4
Scarthoe... ..	6						1		7
Waltham ..	5		2	11	1				19
Laceby & Bradley	12	2				1			15
Barnoldby-le-Beck	1								1
Hatcliffe ..			1						1
Irby									
Beelsby									
Weelsby... ..				3					3
Stallingborough ..	3								3
Killingholme Haven	1								1
Total for 1925 ..	75	3	7	24	4	2	3	1	119

INFECTIOUS DISEASES.

Notified according to Ages.

TABLE II.

	Scarlet Fever	Diphtheria	Pneumonia	Chicken Pox	Erysipelas	Puerperal Fever	Typhoid Fever	Acute Anterior Poliomyelitis	Total	Cases removed to Hospital
Under 1 year	1			1					2	1
1 to 2 years	1			2					3	1
2 to 3 "	3			2			1		6	2
3 to 4 "	2			2	1		1		6	2
4 to 5 "	2	1		4					7	5
5 to 10 "	38	1		13				1	53	27
10 to 15 "	21	1							3	15
15 to 20 "	3		1			1			5	3
20 to 35 "	3		4		2	1	1		11	2
35 to 45 "	1		1						2	1
45 to 65 "			1		1				2	1
65 and over										
Total for 1925	75	3	7	24	4	2	3	1	119	60
Cases removed to Hospital	56	3			1				60	

There were no cases of Ophthalmia Neonatorum notified during the year.

GRIMSBY RURAL DISTRICT.
Deaths from Infectious Diseases.

TABLE III.

Age Period.		Scarlet Fever	Rheumatic Fever	Pneumonia	Influenza	Whooping Cough	Total
Under 1 year	...			5		2	7
1 to 2 years	...			1			1
2 to 3 "	...						
3 to 4 "	...						
4 to 5 "	...						
5 to 10 "	...						
10 to 15 "	...						
15 to 20 "	...				1		1
20 to 25 "	...		1	1			2
25 to 35 "	...	1			1		2
35 to 45 "	...			1	1		2
45 to 55 "	...			1	2		3
55 to 65 "	...				1		1
65 and over	...			1			1
		1	1	10	6	2	20
Districts—							
Immingham	...			1	2		3
Little Coates	...			3		2	5
Bradley	...			1			1
Waltham	...			2	2		4
Barnoldby	...			1			1
Humberstone	...			1			1
Weelsby	...		1				1
Healing	...				1		1
Laceby	...	1					1
Stallingboro'	...			1			1
Hatcliffe	...				1		1
		1	1	10	6	2	20

Tuberculosis Statistics for 1925.

TABLE IV.

Age Periods	Notifications				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Males	Females	Males	Females	Males	Females	Males	Females
Under 1 year								
1 to 5 years	2							
5 to 10 "	1	1	1					
10 to 15 "		3						
15 to 20 "	1	3		1		1		
20 to 25 "		3				4		
25 to 35 "	3	3			1	2		
35 to 45 "		4	1	1		2	1	1
45 to 55 "	1				1			
55 to 65 "		1						
65 years & over								
Totals	8	18	2	2	2	9	1	1

Tuberculosis Mortality according to Occupation.

MALE.

Pulmonary. Non-Pulmonary.

Occupation described as—

Coffee Taster	...	1	—
Hairdresser	...	1	—
Bricklayer's Labourer	...	—	1
		<u>2</u>	<u>1</u>

FEMALE.

Occupation described as—

(Wife) Housework	...	3	1
Domestic Servant	...	2	—
Daughter (no occupation)	...	3	—
Barmaid	...	1	—
		<u>9</u>	<u>1</u>

From these tables it seems that females are more susceptible to Tuberculosis, and that those persons following indoor occupations are most severely and fatally affected.

PORT SANITARY WORK.

The measures which have been taken during the year to ensure the exclusion of Infectious Diseases were as follows :—

- (1) Ships have been inspected by the Assistant Port Medical Officer and Port Sanitary Inspector.
- (2) Provision of facilities for Fumigation and Disinfection of Ships have been made and carried out when necessary by order of our officials stationed there.
- (3) When necessary, instructions have been given to Ships' Officers to put out "Rat Guards" on the guy ropes and cables to prevent any chance of infection due to rats leaving the ship. Measures have also been taken to destroy rats.
- (4) An Isolation Hospital at Immingham has been kept in readiness for cases of Infectious Diseases.

The Local Authority owns a Steam Disinfector on the Docks.

From time to time the Assistant Port Medical Officer has examined members of the crews when there was any cause for suspicion.

The Port is not exposed to very great risks from the introduction of infectious diseases. The chief danger probably is from ships from the far East, as an average of one of these arrive each week. Generally these ships call at Hull or Middlesbrough before Immingham.

The trade consists chiefly of :—

Imports	From
Iron Ore	Sweden, Spain.
Timber	Russia, Sweden.
Exports	To
Coal	Germany, Holland, France, Belgium, Sweden, Denmark.
General Cargo	China, Japan, India, Australia.

AMOUNT OF SHIPPING ENTERING THE PORT SANITARY
DISTRICT DURING THE YEAR 1925.

FORM A.

		Number	Tonnage	Number inspected		Number reported to be Defective	Number of orders issued
				By the Medical Officer of Health	By the Sanitary Inspector		
Foreign	Steamers	871	1,349,473	81	209	52	—
	Motor	13	45,272	—	3	—	—
	Sailing	1	63	—	1	—	—
	Fishing	—	—	—	—	—	—
Total Foreign ..		895	1,395,408	81	213	52	—
Coastwise	Steamers	680	592,664	—	27	6	—
	Motor	—	—	—	—	—	—
	Sailing	—	—	—	—	—	—
	Fishing	—	—	—	—	—	—
Total Coastwise		680	592,664	—	27	6	—
Grand Total 1925 ...		1565	1,990,072	81	240	58	—
Total for 1924		1643	2,010,098	78	45	10	—
Total for 1923		1901	2,708,772	26	117	12	—
Total for 1922		1358	2,087,970	9	101	7	—
Total for 1921		374	730,474	10	52	4	—

Rats Destroyed in 1925.

FORM B.

Number of	January	February	March	April	May	June	July	August	September	October	November	December	Total in year
Black Rats	25	22	32	21	34	13	27	50	15	21	15	14	289
Brown Rats	3	2	4	3	4	2	3	6	2	3	3	2	37
*Rats examined													
Infected with Plague													
Not Infected													
Total Killed	28	24	36	24	38	15	30	56	17	24	18	16	326

*It appears that while the Port Sanitary Inspector provided the Dock Authority with Containers for Rat Examination no rats were given to him. I think that some steps should be taken to see that this is remedied in future.

FORM C.

There were no ships reported "Infected" or "Suspected," nor were there any from "Infected Ports."

FORM D.

No ships were subjected to measures of Rat Destruction beyond the routine carried out by the ships en voyage.

PUBLIC HEALTH PROPAGANDA.

Very little has been done in the line of Propaganda in the District. Owing to the circumstances—Dr. Shennan's illness and my period of office being at first very uncertain—no campaign was organised.

I have taken every opportunity of giving short talks to parents and to children in between my various Clinics and School Inspections in the District. These short addresses are, in my opinion, valuable methods of educating the community.

I have also distributed, on these and other occasions, numerous leaflets on Health Subjects. I am greatly indebted to Mr. A. L. Hunt, the General Manager of the Wesleyan and General Assurance Society of Birmingham, from whose Health Service Bureau I have obtained most of these useful and attractive leaflets.

Towards the end of the year I started to stress the desirability of Vaccination in Little Coates, and made arrangements for free Vaccination at stated hours. About 200 children and mothers were treated early in 1926.

Throughout the District the influence and good work of the Nurses under the County Schemes proved to be of great value.

Fish Meal and Fish Oil Works.

Several such factories are situated in the Pyewipe area of Little Coates. They are included in the list of Offensive Trades drawn up by the Council.

Throughout the year complaints have been received about the noxious odours produced by them. The Sanitary Inspector and myself have paid numerous surprise visits and we have come to the conclusion that definite bye-laws should be made for the proper control of such places. These have been drafted and when they have been accepted and applied the control of these offensive trades will be easier and more effective.

Gentlemen, I trust that this Report will be of some assistance to you in framing your future policies, and I have the pleasure and honour of being

Your obedient servant,

PERCIVAL V. PRITCHARD.

PUBLIC HEALTH PHARMACY

The Public Health Pharmacy is a branch of pharmacy which is concerned with the preparation and distribution of drugs for the treatment of disease and the promotion of health.

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