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ANNUAL REPORT

OF THE

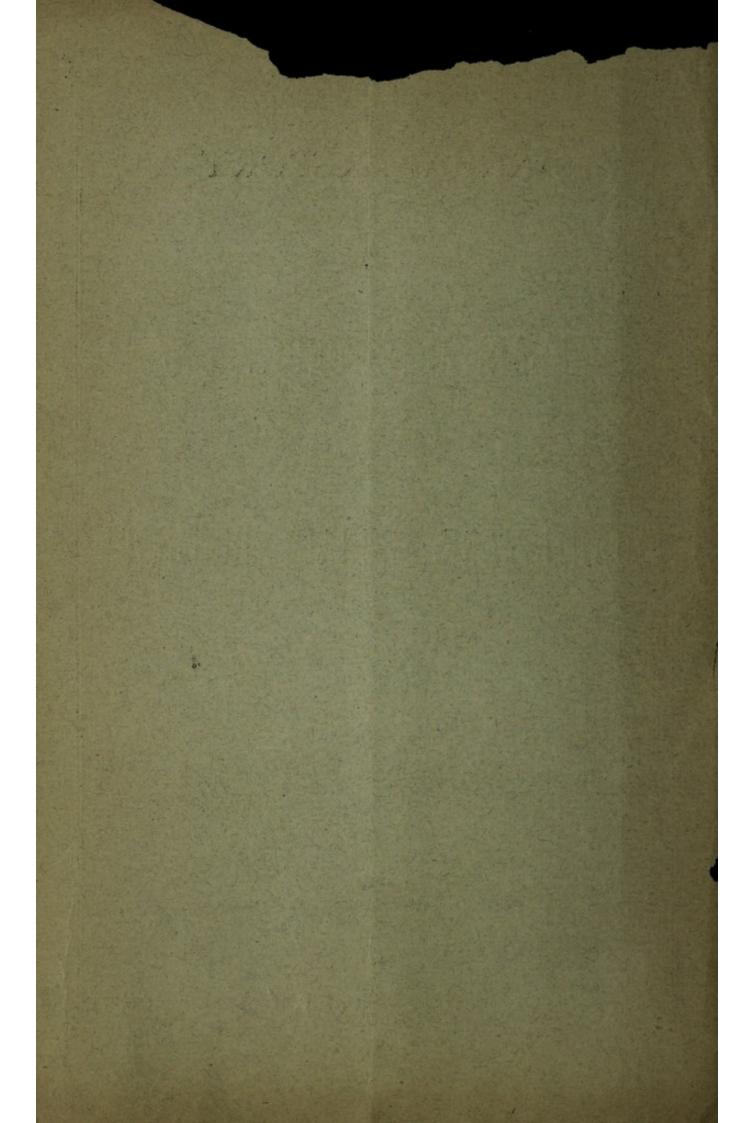
SANITARY CONDITION

OF THE

HARTISMERE RURAL DISTRICT

For the year ending December 31st, 1894.

EYE:
W. ROPER, PRINTER, BOOKSELLER AND STATIONER,
CHURCH STREET.



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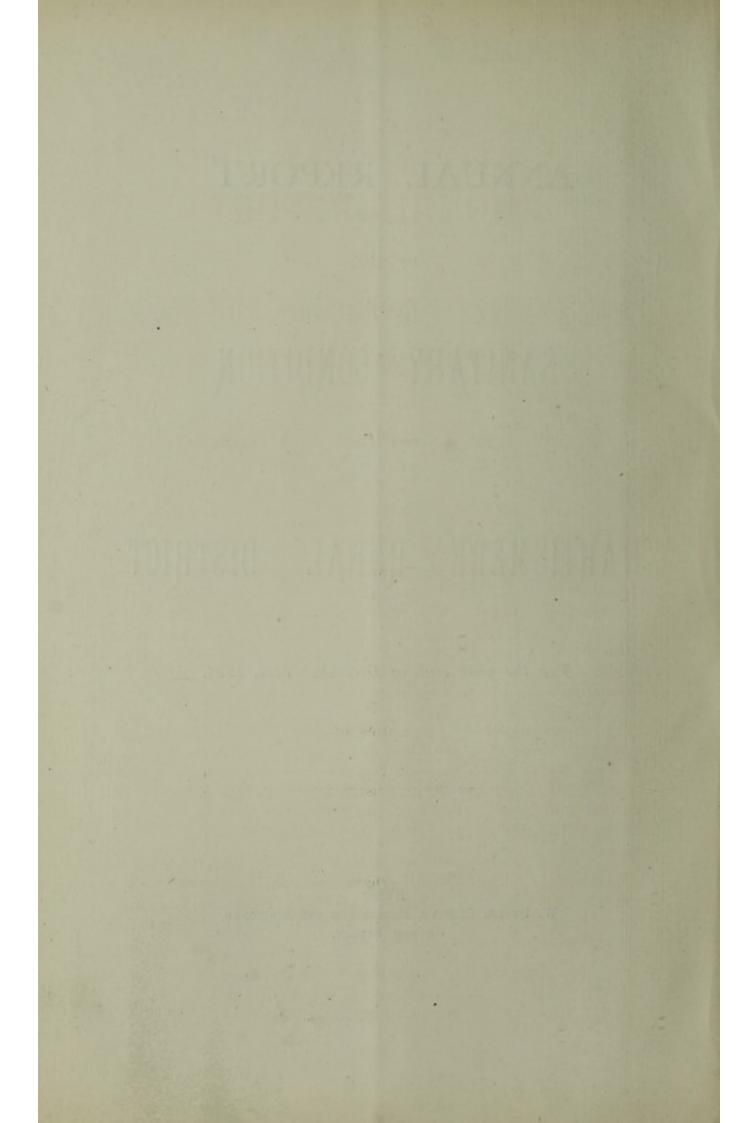
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ANNUAL REPORT

OF THE

Sanitary Condition of the Hartismere Rural District,

FOR THE YEAR ENDING DECEMBER 31st, 1894.

To the Rural District Council of Hartismere.

GENTLEMEN,

I beg to present my Annual Report of the Sanitary state of your district, prepared in accordance with the instructions issued by the Local Government Board, and in so doing I shall take the opportunity of pointing out the work done in the district in the past, as well as considering the present state of the district and indicating the lines on which, in my opinion, future action is required.

Localities.—The localities adopted for the statistical parts of this report are the same as in previous reports. These are in reality the old Registration Districts, and are continued, although the Registration Districts have been altered, in order to allow of just comparison with previous reports. These "Localities" are constituted thus:—

Botesdale Division:—Consisting of the parishes of Botesdale, Burgate, Gislingham, Mellis, Palgrave, Redgrave, Rickinghall Superior, and Wortham, containing in 1891 a population of 4,209, exclusive of the children in the Wortham Workhouse Schools.

Eye Division:—Consisting of the parishes of Brayesworth, Brome, Oakley, Occold, Redlingfield, Stoke Ash, Stuston, Thorndon, Thornham Magna and Parva

Thrandeston and Yaxley, containing in 1891 a population of 3,413. The municipal borough of Eye is excluded, as it forms a separate Sanitary District.

Mendlesham Division:—Consisting of the parishes of Aspall, Bacton, Cotton, Finningham, Mendlesham, Rishangles, Thwaite, Westhorpe, Wetheringsett-cum-Brockford, Wickham Skeith and Wyverstone, containing in 1891 a population of 4,950.

Decline of Population:—There has been, in common with other Rural Districts, a considerable decline in the population of the District in recent years. This is shown in detail by the subjoined table.

		POPULAT	ION.	DECLINE PI	ER CENT.
	1871.	1881.	1891.	1871-81.	1881-91.
Hartismere District *	14,346	13.495	12,627	5.9	6.4
Botesdale Division †	4,907	4.685	4.264	4.5	8.9
Eye Division *	3,940	3.616	3,413	8.2	56
Mendlesham Division	5,499	5,194	4,950	5.3	4.7
* Exclud	ling the	Borough o	of Eye.		
		ates of We		Schools.	

It will be noticed that the various localities show very different rates of decline—the least being in the Mendlesham Division, whilst the Eye Division showed a rapid decline during the first period, which was somewhat retarded subsequently. The Botesdale Division, on the contrary, shows the more rapid decline in recent years.

Statistics relating to Births and Deaths are given in extenso in the appended tables, but the following principal conclusions may be here noted.

Births.—339 births were registered in your district during the year, being at the rate of 26.8 per 1,000 of population, the rates in former years being:—

1893				26 6
				30 5
				277
1890				28 4
Average			1885-89	29.8
"			1880-84	32.2
.,	10	years,	1870-79	31.3

It will be noticed that with the exception of the year 1892, the Birth-rate in recent years shows a considerable decline. The Birth-rate throughout England and Wales shows a similar tendency to decline; that for 1894 being

29.6, and the average of the previous 10 years being 31.6. These rates, it will be noticed, are considerably higher than the corresponding rates in the Hartismere Rural District.

Marriages.—The number of Marriages in the District, which had shown a decided decrease in recent years, showed a further very considerable decrease in 1893—the returns for 1894 are not yet complete. The actual number of Marriages that took place in your District, and the Urban Sanitary District of Eye (which is not separated in the quarterly returns of the Registrar-General) was

1893		79
1892		96
1891		94
1890		109
Average	of 5 years, 1885-89	92
"	5 years, 1880-84	94
"	10 years, 1870-79	107
- 77	7 1	1100

The Registrar-General has repeatedly pointed out that a high or low Marriage-rate bears a close correspondence with the prosperity or want of prosperity of the country. Studied from this point of view, the figures of the Hartismere Rural District are painfully significant of the depressed state of agriculture.

Deaths.—After correcting the registered number of deaths by the addition of the deaths in public institutions of persons belonging to the District, and the omission of deaths of persons not belonging to the District, but brought into the District with their fatal disease on them, the number of deaths was 189, the Death-rate being 14.9 per 1,000. This is very satisfactory as being the lowest Death-rate yet recorded for the District. The rates in former years were—

1893	15.4
1892	19.3
1891	17.3
1890	18.7
Average of 5 years, 1885-89	15.7
" 5 years, 1880-84	16.0
" 10 years, 1870-79	18.0

The death-rate in country districts in England and Wales is recorded by the Registrar-General as 15.6 per 1,000 in 1894, and as averaging 17.5 per 1,000 in the ten years 1884-93. The increase in the death-rate during the years 1890, 1891, and 1892 is, in my opinion, entirely due to the outbreaks of Influenza in those years. The diminution in the death-rate, which amounts to 3.1 per 1,000 as compared with the 10 years 1870-79, when the

Sanitary Acts were yet in their infancy, is very satisfactory. It means that in your District 40 less persons die annually than in that period, and beyond doubt a corresponding, but much greater number of cases of sickness are prevented.

The mortality of children under one year of age was 14.2 per cent. of the total deaths, and 7.9 per cent. of the registered births. The mortality amongst children under 5 years of age was 22.7 per cent. of the total deaths. Reference to Table D. shows that these rates indicate a satisfactory decrease in infantile mortality when compared with previous years.

Zymotic Diseases. — The seven principal zymotic diseases, viz.: small-pox, measles, scarlet-fever, diphtheria, whooping cough, fever, and diarrhoa, caused 14 deaths.

Table B. (which shows the new cases of infectious sickness coming to the knowledge of the Medical Officer of Health—the principal diseases being classified), shows that small-pox was entirely absent from the district throughout the year; that scarlet fever prevailed to a considerable extent throughout the district (but principally in the Mendlesham Division); that a considerable number of cases of diphtheria prevailed in the Botesdale Division, and 2 cases in the Mendlesham Division; that only 1 case of typhoid occurred in the district (in the Botesdale Division). One case of puerperal fever occurred in each of the Mendlesham and Eye Divisions. Twenty-nine cases of erysipelas were reported. No infectious disease occurred in the Workhouse at Eye, but two cases of erysipelas occurred in the Workhouse School at Wortham.

Comparison of Localities.—The following table shows the comparative mortality statistics of the three Divisions:

	Death ra	te per 1000.	Percentage	to total deaths
Divisions.	From all causes.	From seven principal zymotic diseases.	Deaths under one year.	Deaths under five years.
Eye	15.8	-8	11.1	22.2
Botesdale	14.0	-4	18.6	25.4
Mendlesham	15.3	1.4	13.1	21.0

Systematic Inspection. — The work of systematic inspection and nuisance removal has been carried on as in former years, namely, by frequent inspection of all parts of the district by the inspector of nuisances, accompanied on some occasions by the Medical Officer of Health, the visits being so arranged that no portion of the district has escaped their joint supervision during the year, while separate visits have been made to such parts as seemed from special circumstances to require it. The sanitary state of the district is well maintained. The following is a summary of the work done during the year, taken from the Sanitary Inspector's report: -302 notices have been given for sanitary improvements, 26 new privies have been built, 50 old ones cleansed and repaired, 9 removed from objectionable situations, 9 vaults filled up and converted to the pail system, 13 houses provided with new drainage, 16 housedrains repaired and trapped, 15 foul ditches cleansed, 22 accumulations of manure removed, 1 new cesspool made, 3 cesspools cleansed, 4 cesspools or gutters filled up, 7 cases of swine improperly kept removed, 3 cases of overcrowding abated, 7 houses repaired, 2 premises cleansed, 74 houses cleansed after infectious diseases, 2 public schools cleansed after infectious diseases. In addition, the public drainage at Palgrave has been finished, and a portion of the drainage at the Wortham Workhouse Schools has been rearranged. Further improvements in the drainage at these schools both as to arrangement and ventilation are in my opinion necessary, and these are now under the consideration of the Board of Guardians.

In Table G will be found a summary of the work of nuisance removal since my appointment as Medical Officer of Health in 1878, from which it appears that in your district during 17 years the number of notices given for sanitary improvements has averaged 274, and the number of nuisances removed has averaged 298 each year.

Drainage.—The drainage of the district varies in different parts. In four parishes only is there any real system of public drains, viz. in Mendlesham, Palgrave, Botesdale, and Rickinghall Superior. The houses in the remaining parishes are so scattered that no drainage scheme is practicable to embrace any considerable number of houses. The drainage in Mendlesham was carried out by the Rural Sanitary Authority some years ago, and a small addition to it is now under the consideration of your Council. The Palgrave drainage has been carried out

during the past two years; whilst that for Botesdale and Rickinghall Superior, which practically form one drainage district, is a survival of old drainage not by any means equal to modern requirements; but in face of the fact that it is not productive of nuisance and that the health of the parishes continues good, I have not felt justified in urging any great modification of it.

Water Supply.—The water supply of the district is derived in four distinct methods:—

- a. From ponds, which collect rainfall from their immediate surroundings, or are sometimes fed by a small running stream. These ponds are sunk in the clay, which forms an impervious reservoir and retains the water for a considerable period. The water thus stored is soft, usually muddy from suspended clay, and contains a large amount of vegetable débris. Though this water is unsightly and often apparently very impure, I have not been able to trace any great danger attending its use-provided that the ponds are protected from infiltration of sewage. only diseases which I have traced to the use of such water have been a certain amount of mild diarrhoea and the occurrence of an intestinal parasite (ascaris lumbricoides) in children. I have therefore advised in many instances the formation of such ponds, and have directed the. cleansing and protection from pollution of existing ones, and I have done so more especially, as in the case of existing houses no better supply is obtainable without exceeding the cost as limited by section 3 of the Public Health (Water) Act, 1878.
- b. From shallow wells 8 or 10 feet deep fed by land springs and surface waters. These exist especially in the parishes forming the northern portion of my district, where the subsoil is gravel instead of clay. These wells are in my experience very liable to contamination, and require careful supervision.
- c. From deeper wells in the clay from 30 to 100 feet in depth, generally fed by a bottom spring, but sometimes having land-springs entering their sides. These occur in the greater part of the district where the subsoil is clay of varying depth. These wells yield a very hard water, but of much greater purity than the shallow wells before mentioned.

d. By a deep boring some 50 or 60 feet into the chalk which underlays the clay. One well only of this description (that at the Kerrison Reformatory) exists in your district. The water is chemically pure, but is hard, and contains fine chalk in suspension, which renders it necessary either to filter it or allow it to stand and settle in a reservoir prior to use. It then forms a wholesome drinking water.

I have made chemical analyses of 15 specimens of drinking water, of which I have reported seven "unfit" for drinking or domestic uses. In consequence of my reports, the following results have been obtained:—Seven wells have been repaired and cleansed, supplying water to 35 houses; two pumps have been repaired, supplying water to 12 houses; and one pond has been cleansed, supplying water to three houses. Thus 50 houses have during the year received an improved supply of water, and in addition, the two wells which supply the Wortham Union Schools have been cleansed. The public wells throughout the district have been kept in order, seven wells and pumps and one pond having been cleansed or repaired during the year, and a new public well has been sunk in the parish of Cotton. Certificates that a proper supply of water has been provided have been granted for five new houses under the Public Health (Water) Act, 1878.

Notification of Infectious Diseases.—The number of cases notified under the Infectious Diseases (Notification) Act, 1889, during the year was 168, and included:—

113 cases of scarlet fever.
29 cases of erysipelas.
23 cases of diphtheria.
2 cases of puerperal fever.
1 case of typhoid (enteric) fever.

The results of the investigations made into these cases are shewn in Table F, and may be thus summarised—Scarlet fever occurred in 13 parishes, 53 houses were affected, and 113 cases and four deaths occurred. The cases as a rule were of a mild character. In 24 of the 53 houses affected, the disease did not spread, only one case occurring in each of these houses. The disease spread in some instances through the contact of children in the public schools, but more frequently by the culpable carelessness of those in charge of the sufferers in allowing them to mix with healthy children; this was noticeably

the case in Westhorpe, where, although a very small parish, containing only 216 inhabitants, 25 cases occurred, and from this parish the disease was conveyed to the adjacent parish of Wyverstone. In Westhorpe, cases occurred and were not notified to the Medical Officer of Health, and no doctor was in attendance until three weeks after the first cases occurred. During this period the sufferers were allowed to mix with healthy children, and the extensive outbreak already mentioned was the result. In two instances the responsible persons were summoned for not having notified the occurrence of the disease under the Infectious Diseases (Notification) Act, and also for wilfully exposing infected persons in a public place under the Public Health Act, but unfortunately at the hearing, owing to a missing link in the chain of evidence, one summons was dismissed, and the Inspector, acting under the advice of the Medical Officer of Health, withdrew the other three.

Diphtheria occurred in 3 parishes, 11 houses being affected, and 23 cases occurred, 2 of them proving fatal. Of these outbreaks two originated outside the district, and the other was associated with obvious sanitary defects. The disease at Wortham was spread by the culpable carelessness of those in charge of the sufferers in allowing healthy children to mix freely with those affected by visiting at each other's houses. The one case in Palgrave was part of the Wortham outbreak, as it occurred in a cottage close to the affected ones at Wortham, though situated just within the boundaries of Palgrave parish.

Typhoid (Enteric) Fever.—Only one case, and that an exceedingly mild one, occurred during the year. No obvious sanitary defect was found, and its origin was not traced.

Puerperal Fever.—Two cases occurred—one fatal. In one case there was a possibility of the infection being derived from a case of erysipelas in a house near by. It cannot be too widely known that persons who have been in close attendance on erysipelas cases are liable to infect puerperal women, and give rise to one of the worst forms of puerperal fever.

Erysipelas.—Twenty-nine cases were reported, two of them being fatal.

Whooping Cough.—Four deaths from whooping cough occurred in the district. There were no deaths due to any other form of infectious disease than those mentioned.

The Infectious Diseases (Notification) Act, 1889, continues to work beneficially. The duty of notification imposed on householders has been on the whole better carried out than in previous years.

Closure of Public Elementary Schools.—During the year 1894 the schools at Bacton, Westhorpe and Aspall have been closed on account of Scarlet Fever; the school at Wortham Ling on account of Diphtheria; and that at Redlingfield on account of German Measles and Whooping Cough.

Offensive Trades.—The offensive trades of the district are few in number, and require no special comment. They are regularly kept under supervision.

Legal Proceedings were only taken in the four instances previously spoken of.

Drainage of Wortham Union Schools.—This has been to some extent improved, but is still in need of further additions, which are under the consideration of your Council.

Future Action.—The future action required to maintain and further improve the sanitary condition of the district is in my opinion mostly a continuation of the past policy of the Board of Guardians, i.e., the gradual improvement of the district by constant repression of nuisances as they arise, the protection of the water supplies from pollution, and great care with regard to the sanitary arrangements and water supply of the few newlyerected houses in the district, with regard to which your Council have great powers. The water supply has been and must remain a difficulty, it being in many instances impracticable to obtain a proper supply of water to existing houses within the cost limited by Act of Parliament. The Infectious Diseases (Notification) Act should, I think, continue to be persistently enforced, whilst, as I stated in my former report, I considered the provision of Isolation Hospitals can only be economically and efficiently done by the action of the County Council.

Inspection of Bakehouses.—The principal bakehouses of the district have been visited from time to time by your Inspector, by myself, or sometimes by both in conjunction, and are generally well kept.

The duties of the Inspector of Nuisances have in my opinion been satisfactorily carried out.

I am, Gentlemen,

Your obedient Servant,

EDGAR G. BARNES, M.D., Lond., Medical Officer of Health.

Eye, Feb. 11, 1895.



TABLES

Appended to the Annual Report of the Medical Officer of Health for the year 1894.

A TABLE

Table of DEATHS during the year 1894, in the Rural Sanitary District of Hartismere, classified according to Diseases, Ages, and Localities.

44 53 134 12 16 37 15 13 1 # 01 TOTAL. Diseases 00 122 26 9 31 54. 98 81 21 All Other 00 30 01 :00 00 I Injuries. 18 MORTALITY FROM SUBJOINED GAUSES, DISTINGUISHING DEATHS OF CHILDREN FIVE YEARS OF AGE. 1 9 7 17 Heart Disease. Bronchitis, Pneu-monia & Pleurisy. 115 4 1 18 00 10 00 00 1-00 1 00 14 I ı 17 Phthisis. 16 I 1 Agne. 15 Fever. **** Rheumatic Diarrhea and Dysentery. 03 . 0.1 9 10 11 12 13 14 : 01 1 П ı 1 1 The subjoined numbers have also to be taken into account in judging of the above records of mortality. 00 1 Whooping Cough 1 1 : I I Ħ ı Measles, General 14.9 per 1,000 Population. Infant 79 per 1,000 Births Registered. 1 .. 01 Erysipelas. 1 -1 1 I Cholera. 1 I Puerperal. 1 1 00 i I I 1 Relapsing. FEVERS. -1 1 П 1 : 1 Continued. Enteric or Typhoid. 11 1 • 1 11 9 I 1 I I 2 ı 1 П L'abpus. 1 Croup. + П П I 1 1 1 1 Membranous 1 01 I 1 0.3 1 Diphtheria. 01 01 01 . 01 20 П 1 1 1 Scarlatina. Death Rates, Smallpox. spwdn spwdn spwdn spwdn g spwdn spadn Under 5 nder 5 nder 5 nder 5 nder 5 Inder 5 nder 5 upwds 3 3 10 83 27 25 84 1 65 and upwards. 49,199 MORTALITY FROM ALL CAU AT SUBJOINED AGES. 6 35 -П 8 15 = 25 and under 65. Area in Acres Population (1891) 00 01 9 -H 1 5 15 and under 25. 6 10 00 -П П 3 5 and under 15. 9 4 1-H 17 (g) 1 I and under 5. 9 9 10 = 27 Under I year. 178 12 20 At all ages. 69 59 3 district eaths occurring within the district among persons not belonging thereto. NAMES OF LOCALITIES adopted for the urpose of these Statistics; public astitutions being shown as separate (Columns for Population and Births are in Table B). : 1 : : Deaths occurring outside the dis among persons belonging thereto. : 8 : : : Mendlesham Division... TOTALS 8 : ä (a) Deaths occurring Botesdale Division Wortham House Eye Division purpose of institutions localities.

TABLE B.

TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the year 1894, in the Rural Sanitary District of HARTISMERE; classified according to DISEASES, AGES and LOCALITIES.

	1	Statistics: Public Institutions		(a.)		Mendlesham Division 4		Botesdale Division 4		Eve Division 3		Wortham House		Totals 19	
POPULATION AT ALL AGES.			·śi .	(9)		4950		4509		3413		50.0		19697	
AGES.			Estimated to middle of 1893.	(c.)		4950		4209		651		47		1961	CYOTY
	pə.	ths	sigeA Tid	(g)		142		105		66		1		839	
	Aged	under 5	over 5.	(e)	Under 5	5 upwds.	I'nder 5	5 nnwds	- In	Under 5	epwdn g	Under 5	spwdn g	Under 5	5 upwds.
4	1	.,	Smallpox		1	1	-	1		1	ı	1	1	1	1
NEW CASES	5	-18	enitafras	3	21	19	6	1 6		œ	12	1	Ī	31	82
40	00	ъ.	oiphtheri	a	1	2	y	10		1	1	1	1	9	17
SICKNESS OF THE	4	sn	етртапо Стоир.	K	1	1	1			. 1	1	1	1	1	-
IN EACH MEDICAL	5		'snud.C	C	1	1				1	1	1	1	1	-
H LOCALITY, L OFFICER C	9	H	Enteric or yphoid.		1	1	1	-		1	1	1	1	1	1
0	- 1	FRVERS.	penuituo	co	1	1				1	1	1		1	
OF HEALTH.	00		-Bujsdele	R	1	1	-			1	1	1	1	1	1
THE KNOWLEDGE	6		Isragrai	ы	1	1				1		1	1	1	62
WLEDGE	10		Cholera.		1	1				1	1	1	-	1	1
	111	-	Lysipelas	E	1	10		6		1	œ	1	2	1	29

"Notification of Infectious Disease" is compulsory in the District since January 1st, 1890. There is no infectious hospital in the district.

HARTISMERE RURAL SANITARY DISTRICT. TABLE C.

Table showing the Population, Births, Deaths and Marriages for the year 1894, compared with the years 1890, 1891, 1892 and 1893, and the averages of the five years 1885-89, the five years 1880-84, and the 10 years 1870-79.

	Hartisme	re Rura	Sanitar	Hartismere Rural Sanitary District.	Botesda	Botesdale Division.	sion.	Eye	Eye Division.	n.	Mendlesham Division.	ham Div	rision.
	Estimtd. Births Deaths	Births	Deaths	Marriages including Boro' of Eye	Estimtd. Popultn.	Births.	Deaths	Births. Deaths Popultn.		Births. Deaths	Estimtd. Popultn.	Births. Deaths	Deaths *
1894.	12619	339	1		4209	105	- 69	3413	92	54	4950	142	92
1893.	12605	336	194	79	4209	110	59	3413	7.9	43	4950	147	92
1892.	12612	385	242	96	4209	139	92	3413	101	59	4950	145	91
1891.	12627	350	218	76	4209	111	73	3413	97	47	4950	1 + 2	97
1890.	12713	362	238	109	4248	116	75	3433	86	63	4974	147	66
Average of 5 years / 1885-89.	12973	387	204	92	4365	127	75	3493	103	53	9709	157	75
Average of 5 years (13408	432	215	16	4559	143	83	3597	113	55	5170	177	81
Average of 10 years, 1870-79.	11032	440	253	101	4801	145	92	3825	111	62	5390	179	102
The children in Wortham	ortham					Hartismere R S.D.		Botesdale Divn.	Divn.	Eye D	Eye Division.	Mendlesham Division.	esham ion.
Schools are included in the population of the Hartismere District, but not in that of	in the tismere that of	No. of Popul	Inhabi ation at	No. of Inhabited Houses 1891 Population at Census, 1891	1891	2857 12627	7	980		2. 25.	766	1111	0
the Botesdale Division.	n.	Average House	ge No. of	of Persons in each	in each		4.4	4	4.3		†. †		4.4
		Area i	n Acres	Area in Acres		49199	6	14602		14	14716	19881	1

. Corrected by the addition of deaths in Workhouse, and the exclusion of persons coming into the District with their fatal illness on them.

TABLE D.

HARTISMERE RURAL SANITARY DISTRICT

Table showing Annual Birth-rate, Rate of Mortality and Percentage of Deaths amongst children during the year 1894, compared with the years 1890, 1891, 1892 and 1893, and with the averages of the five years 1885-89, the five years 1880-84, and the ten years 1870-79.

	ł														-	Ì	I	I	I	I
								7.1.7		Deat	hs of (Deaths of Children under one year.	under	one ye	ar.		Death	Deaths of Children under	ildren	under
	Ann. 1,	Annual Birth Kate per 1,000 population.	oulation	a per	Annu	Annual Kate of Mortality per 1,000 population.	or Mol	tanty ion.	Per	Percentage to Total Deaths.	to To	tal	Percer	Percentage to Registered Births.	Regis	tered	5 years. Tot	E	Percentage to Deaths.	geto
Division or District.	Har.	Har. Botes.	Eye.	Eye. Mend.		Har. Botes.	Eye.	Mend.	Har.	Botes.	Eye.	Mend.	Har.	Botes.	Eye.	Mend.	Har.	Botes.	Eye. Mend	Mend.
1894	26.8	24.9	26.9	28.6	14.9	14.0	15.8	15.3	14-2	18.6	1111	13.1	6-2	10.4	f.9	0.2	22.7	25.4	22.5	21.0
1893	26.6	26.1	23.1	29.7	15.4	14.0	12.6	18.5	18.0	18.6	13-9	18.9	10.4	0.01	9.2	12.2	26.3	28.8	25.6	25.0
1892	30.5	33-0	29.6	29.3	19.2	6-12	17.3	18.4	21.5	23.9	20.3	19.7	13.5	15.8	6-11	12.f	28.9	35-9	25.4	24.5
1891	27-7	26.4	28·4	28.7	17.3	17.3	13.8	19.6	13.3	12.3	8.5	16.5	8.3	8.1	1.1	11.3	24.8	19-2	19.1	31-9
1890	₹-85	27.3	28.5	29.5	18.7	9.21	18.3	19.9	15.6	14.7	14.4	16-2	10.5	9.5	9-5	10-9	22.7	20.0	19.5	26.3
Average of 5 years	29.8	29-0	29.4	31-1	15.7	17:1	15:1	14.8	18.4	17.2	18.3	19.8	2.6	10-3	9.5	9.5	26.6	25.7	23.9	29-2
Average of 5 years (32.2	31.3	31.4	34.2	16.0	18.2	15.2	15.6	20.5	8.02	20.0	20-2	2.6	11.4	9.6	8.7	31.4	32.5	31-1	31.7
Average of 10 years 1870-79	31.3	30-2	30.2	33-1	18.0	19.1	16-2	18.8	20-9				12.1				28.4			

TABLE E.

HARTISMERE RURAL SANITARY DISTRICT.

year 1894, compared with the years 1890, 1891, 1892, and 1893, and the averages of the Table showing the Number of DEATHS from each of the 7 Principal ZYMOTIC DISEASES for the five years 1885-89; the five years 1880-84; and the ten years 1870-79.

Average of 10 years, 1870-79.	7.	2.1	3.0	1-7	8.0	4.3	5.7	23.5
Average of 5 years, 1880-84.	1	2.4	4.8	†- †	3.5	.2.6	1.1	21.8
Average of 5 years, 1885-89.	1	1.0	ć,	2.0	4.8	9.	3.5	11.8
1890	1	1	. 1	60	61	61	က	п
1891	1	10	61	1	12	1	15	25
1892	1	+	1	-	1	-	10	13
1893	-1	1	1	60	4	60	9	17
189;	1	1	#	C1	60	1	+	14
Disease.	Smallpox	Measles	Scarlet Fever	Diphtheria	Whooping Cough	Fever	Diarrhea	Totals

TABLE F.

HARTISMERE RURAL SANITARY DISTRICT.

Table showing particulars of Outbreaks of Zymotic Diseases investigated during the year 1894.

Date.	Discase.	Lecality.	Origin of Outbreak, Sanitary Defects, &c.	Houses affected.	Persons attacked.	Deaths.
January Jan. & Feb Feb. to May Feb. to June March March May May June	Scarlet Fever.	Thorndon Wetheringsett Gislingham Finningham Bacton Thornham Magna&Parva Stoke Ash Rishangles Aspall Brockford Westhorpe	Probable infection from last year's outbreak in adjacent parishes. Probable infection from last year's outbreak in adjacent parishes. Probable infection from last year's outbreak in adjacent parishes. Infection from Gislingham. Spread through medium of school. Revival of last year's outbreak. Adjacent parish to Thornham. Probable survival from former case by germs laid up in clothing or otherwise. Imported from adjacent district. Origin not traced. Infection from Bacton. Spread by great carelessness on the part of those in charge of earlier sufferers. Origin not traced.		120 21 22 21 22 1 2 2 2 2 2 2 2 2 2 2 2	
August Aug. to Oct. September November		Wyverstone Occold Gislingham Wetheringsett	Infection from Westhorpe. Imported from Lowestoft. Origin not traced.	4 8 1 1 1 3 4	113	63 #
January February Aug. to Dec.	Diphtheria "	Rishangles Rishangles Wortham and Palgrave	Sink drainage defective. Fowls near house badly kept. Imported from Littlehampton. Imported from adjacent district. Spread by culpable carelessness, e.g., by allowing a healthy child to visit and sit by the bedside of a sufferer.	9 11	23	01 01
February November	PuerperalFever	Mendlesham Thorndon	Manure accumulation near pond from which drinking water is obtained. Probable indirect contact with case of erysipelas.	1 1 2	10 10	1
November	Typhoid Fever	Wortham	Exceedingly mild case; origin not traced.	1	1	1

TABLE G. HARTISMERE RURAL SANITARY DISTRICT

Summary of Sanitary Work from 1878 to 1894 inclusive.

	of 5 years, 1878-82.	Averages of 5 years, 1883-87.	Averages of 5 years, 1888-92.	1893.	1894.	
Notices given for Sanitary Improvements	255	275	280	317	302	
Privies new (including earth and water closets)	39	34	15	14	26	_
" repaired, &c	112	106	64	120	89	
Drainage, new	.25	23	15	13	13	-
" repaired, &c	28	34	26	41	16	
Cesspools, new	60	60	00	1	1	
" and foul ditches cleansed	17	17	24	18	18	
" filled up " "	23	12	12	80	4	
Manure nuisances removed	23	91	17	30	25	_
Animals improperly kept removed	11	10	20	7	7	
Houses and premises cleansed	2	5	4	5	2	
Overcrowding abated	0	4	+	65	00	4.774
Houses cleansed after infectious diseases	++	25	26	63	92	
Analyses of drinking water made	20	- 19	32	27	15	
New water supply provided	8	10	60	1	1	
Existing water supply purified	6	15	13	34	12	
New houses certified under Public Health (Water) Act	at 3	8	+	1	20	
Unclassified	0.0	0.5	1.2	1	1	
Legal proceedings	2.4	0.5	1.2	2	4	

