[Report 1909] / Medical Officer of Health, Hartismere R.D.C.

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ANNUAL REPORT

OF THE

Sanitary Condition

OF THE

Hartismere Rural District

For the Year ending December 31st, 1909.

EYE:

A. G. Roper, Printer, Church Street.

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For the Year ending December 31st, 1909.

TO THE RURAL DISTRICT COUNCIL OF HARTISMERE.

GENTLEMEN,

The Annual Report of the Sanitary state of your district, which I have the honour of presenting to you, has this year been entirely remodelled to bring it into unison with the recommendations contained in a Memorandum issued last October by the Medical Officer of the Local Government Board. It will be found to contain many things which are perfectly familiar to you all; but it is pointed out by Dr. Newsholme that "these reports are for the information of the 'Local Government' Board and of the County Council as well as of the Council of the district, and that a statement of the local circumstances and a history of local sanitary questions which may seem superfluous for the latter may often be needed by the former bodies."

The district under your control is about 10 miles in length and breadth and comprises 31 parishes, varying in size at the last census from 113 to 961 inhabitants. The district is fairly level without being absolutely flat, ranging

from 80 to 220 feet above sea level. The character of the soil is loamy and in most parts heavy, and the subsoil consists of beds of clay, and, in a few parishes, of sand and gravel resting on the chalk which is reached at a depth of from 80 to 120 feet. The rainfall is small, averaging 23 inches yearly, the average of England as a whole being 36 inches; but owing to the nature of the soil and subsoil the rain is retained and the surface does not dry rapidly. A small stream, the Dove, formed by brooks rising in Westhorpe, Mendlesham, and Rishangles runs through the district and empties into the Waveney at Hoxne on the border of the district. The northern boundary of the district is formed by the river Waveney, which divides it from the county of Norfolk.

The only industry of the district is agriculture, and the whole of the inhabitants are either engaged in tilling the land, which is chiefly arable, or in trades and occupations necessary to the provision of the wants of those so engaged. There is no factory in the district, but milk and eggs are produced for the supply of London and other markets. The district contains an unusual percentage of aged people, due, I think, to the fact that the younger adults migrate to towns in search of employment—a fact which has a distinct bearing on the birth-rate of the district. As a consequence of this migration there is not a very excessive amount of unemployment, except perhaps in winter when some agricultural operations are at a standstill; but taken as a whole the number of unemployed contrasts favourably with town districts.

House Accommodation.—The house accommodation of the district is probably sufficient, numerically—there being an average of 4.5 persons to each house—but there is a distinct lack of houses fitted for large families—

and this fault is one difficult to remedy inasmuch as the cost of building such houses is greater than can be justified from a commercial point of view ; the rental which the poor can possibly pay not yielding an adequate return for the capital invested. The majority of cottages have but two bedrooms, and these in many cases without fire places, which is a serious fault in case of sickness ; and whilst the size of the rooms is such that overcrowding as measured by cubic feet is not frequent, yet what I may characterise as moral overcrowding undoubtedly occurs.

The physical overcrowding, which alone is dealt with in the Public Health Act, has been from time to time reported by your officers and remedied by suitable action on the part of your Council to the extent of about 5 cases yearly ; but the process of remedying this evil is necessarily difficult and slow, on account of the scarcity already mentioned of houses adapted to the needs of large families.

As a rule the houses are provided with gardens so that there is sufficient air, and sufficient space for the disposal of refuse ; but there are numerous exceptions, notably in the larger villages where the houses are more or less adjacent to each other, forming streets ; and in some instances where houses have been built on what was originally a piece of waste land by the roadside. These latter are especially difficult to deal with as there is no space for suitable sanitary conveniences, except in close proximity to the houses.

The erection of new houses proceeds very slowly, but in all cases the local authority has caused them to be inspected, and have required them to be furnished before they are inhabited with a certificate of a suitable water supply under the provisions of the Public Health (Water)

Act, 1878. There are no bye-laws made in connection with this matter. The only action which has been taken under the Housing of the Working Classes Act has been in connection with closing houses unfit for habitation, this has been done in several cases in recent years, and from time to time cases arise in which such action is needed, or in which necessary repairs are carried out in order to obviate such action being taken under Part II. of this Act. Part I. does not apply to Rural Districts, and Part III. only applies after adoption, and inasmuch as working class lodging houses are not existent in the district, in my opinion such adoption is not necessary.

Water Supply.—The water supply of the district is still in many instances not all that is desirable, but shows steady progress. As already mentioned, care is taken in the case of new houses to obtain a wholesome and sufficient supply—but in the case of old houses, practically no action can be taken, as in most cases it is impracticable to provide a supply within the cost prescribed by the Public Health (Water) Act, 1875. There are numerous public wells provided and maintained by the District Council, and of these there are 33 distributed amongst the 31 parishes comprised in your district as follows:—

Bacton	2	Rishangles	1
Brome	1	Stuston	1
Burgate	1	Thorndon	2
Cotton	2	Westhorpe	1
Finningham ..	1	Wetheringsett ..	3
Gislingham ..	2	Wickham Skeith ..	2
Mellis	3	Wortham	1
Mendlesham ..	3	Wyverstone ..	1
Occold	2	Yaxley	2
Palgrave	1		33
Redlingfield ..	1		

The water supply of the district is derived from several sources :—

1. From ponds, or pits in the clay subsoil, which form the supply of many cottages and houses. These ponds are sometimes dependent on rain water for their supply, and sometimes are fed by springs from the clay. Many of the inhabitants prefer pond water to well water, especially for tea making, as the soft pond water, they say, brews better tea than the hard well water. These ponds are as a rule kept free from sewage contamination, but contain an abundance of vegetable organic matter, which gives the water a yellow colour, and water fleas and other animalculæ exist in these ponds in abundance. I have not, however, been able to trace any disease originating from drinking pond water, provided it was free from sewage contamination, except the frequent presence of the "ascaris lumbricoides" in children drinking such water.

2. From surface wells—10 to 30 feet in depth—which derive their supply from surface water percolating through the soil, and yield a moderately hard water, but with great liability to serious contamination.

3. From deeper wells, from 30 to 100 feet in depth, usually supplied by springs at various depths and yielding a hard, and when suitably situated a fairly pure and safe supply. Many of this class of well have been made by the District Council and are maintained by them as public supplies.

4. From borings into the underlying chalk—only one of these exists in the district, viz., at the Kerrison School, Thorndon, in depth about 180 feet and yielding an inexhaustible supply of water, organically pure, but very hard and bringing up with it lime-salts in suspension.

At the Kerrison School the whole supply after pumping passes through specially made spongy iron filters and all the suspended lime is removed.

All the well waters of the district are so hard as to be practically free from any plumbo-solvent action, and contamination of water with lead is unknown in this district. Many of the waters contain a perceptible amount of iron in solution, which forms a red deposit after the water has stood in vessels exposed to the air, and gives rise to doubts in the minds of those using the water as to its organic purity.

With regard to the work done in connection with water supplies during the past year, I have to report that I have made chemical analyses of 16 specimens of drinking water, of which 5 are of satisfactory quality. Six may be characterised as of doubtful quality, whilst 5 were unfit for drinking or domestic uses. With regard to the two latter classes, the necessary steps have been taken to remedy the faults complained of.

During the year 10 wells have been cleansed, and pumps repaired, which supply water to 42 houses.

The public wells in the district have been kept in order, 17 wells and pumps having been cleansed or repaired during the year.

A public pond from which drinking water is obtained has been cleansed.

A contract has been entered into for providing a new public well in Yaxley.

Certificates under the Public Health (Water) Act, 1878, have been granted for 2 new houses during the year,

and in 2 other cases applications for certificates have been deferred to enable suitable supplies to be provided.

Milk Supply.—*Dairies, Cowsheds and Milk Shops Order, 1885.*—The milk supply of the district is entirely in the hands of farmers, and no milk is imported; on the other hand milk is sent away from the district to London and other towns. All such dairies, &c., which come under the Dairies, Cowsheds and Milk Shops Order, 1885, are registered. There are 9 premises thus registered at the present time, all of which have been regularly inspected and have been found to be fairly well kept, and in some instances improvements have been effected in compliance with the recommendations of your officers. Any nuisances found to exist have been dealt with under the Public Health Acts. There are no bye-laws in existence for the management of these registered premises, your Council being of opinion that such bye-laws are unnecessary in this district.

In addition to these registered premises, milk is sold at many farm houses to workmen on the farm and to near neighbours. Milk shops, apart from dairies do not exist in the district, the milk being retailed directly by the farmer.

There is no special action taken to ascertain by inoculation or otherwise the existence or non-existence of tuberculosis in cattle.

Foods.—With regard to foods, there is no reason to believe that any foods of an unsound character are exposed for sale in the district, and the places in which foods are prepared, stored or exposed for sale are only subjected to the same systematic inspection as the other houses of the district, with the exception that the bakehouses are

specially inspected; and their periodical cleansing and lime-washing secured. The supply of meat in the district is to a large extent from the adjacent towns—there being only three slaughter houses for cattle in the district—these are kept in a cleanly state. Samples of various foods, milk, &c., exposed for sale are from time to time taken by the Police, by direction of the East Suffolk County Council, under the Sale of Food and Drugs Acts. No action has been taken during the past year under section 117 of the Public Health Act, 1875, and no carcases nor parts of carcases have been condemned for tuberculosis.

Sewerage and Drainage.—The houses in your district are for the most part isolated from each other, and except in a few instances do not lend themselves to any systematic scheme of drainage. House drains are as a rule properly trapped and disconnected from sewers and cesspools; and in most instances each house has its individual drainage, carried usually to a cesspool situate at some distance from the house, with an overflow into adjacent ditches. Groups of three or four houses are also frequently dealt with in the same way—with a common cesspool and overflow; but there is nothing which can be called a system of drainage except in the parishes of Mendlesham and Palgrave, in both of which sewers with depositing tanks and overflow pipes have been constructed by your Council; and these are cleansed and maintained by the Sanitary Authority. The system seems sufficient for the wants of the district and is not productive of nuisance.

Pollution of Rivers and Streams in the district does not occur to any serious extent. The drains, as already described, and which do not usually convey solid excrementitious matter, empty themselves into

ditches between the fields, which are frequently dry and allow the sewage to soak away into the soil and be absorbed by vegetation ere it reaches the stream.

Excrement Disposal is almost entirely by the midden system which are emptied by the occupiers at irregular intervals, and the time of the inspector is much occupied by periodical visits and notices to secure sufficiently frequent attention. Very few water closets exist, and these entirely at better-class houses and are almost invariably well kept by the occupiers. In some cottages, especially where the ground at the back of the house is limited, the pail system is in use and requires the same constant supervision as the middens; and this remark also applies to the *House Refuse*, which is removed by the occupiers in the same uncertain manner. The ultimate disposal of the house refuse and of the contents of the middens is usually on the garden or the allotment with which many of the cottages are provided, or they are conveyed to the manure heap of the adjoining farm and there covered with farmyard manure and ultimately applied to he land.

Nuisance Removal and Systematic Inspection. —*Nuisances* are dealt with by the constant and systematic inspection of the district by the Sanitary Inspector—many are removed at his request, verbally; in others after report to your Council, a formal notice is served; and this rarely fails to produce a remedy, and only in one or two cases each year are legal proceedings found to be required. In the more difficult cases in which the remedy is not obvious, or in which the owner or occupier disputes the necessity of complying with the Inspector's requirements; inspection is also made by the Medical Officer of Health, and in this way both Officers keep themselves constantly

informed of the sanitary state of the district. Many of the nuisances reported and remedied are found to recur; in fact it appears that some occupiers never take any steps for the removal of refuse, or for the emptying of middens, or for unstopping blocked drains until they are reminded of the omission by your Sanitary Officers. The extent and character of the work done during the year is thus summarised in the Sanitary Inspector's report, and this differs but little, either numerically or in the character of the matters dealt with from the reports of previous years:—

390 Notices have been given for sanitary improvements.
10 New Privies built.
8 Removed from objectionable situations.
67 Repaired and cleansed.
10 Converted into Pail Closets.
7 New Pail Closets built.
5 Houses provided with new drainage.
51 House Drains repaired and trapped.
1 New Urinal provided.
8 Cesspools filled up.
6 Dead Wells made.
12 Dead Wells emptied and cleansed.
22 Foul Ditches cleansed.
11 Accumulations of manure removed.
2 New Dust-bins provided.
3 Dust-bins cleansed.
3 Houses closed by the Justices as unfit for habitation.
16 Houses repaired.
2 Premises cleansed.
8 Cases of overcrowding abated.
5 Cases of swine improperly kept removed.
32 Houses fumigated and cleansed after Infectious Diseases.

The sewage tanks at Mendlesham and Palgrave have been cleansed periodically, and a large foul pond near the School at Thrandeston has been filled up.

The sewage works in Palgrave, belonging to the Diss Urban Council, have been periodically inspected, and have been working more satisfactorily than in the previous year.

Bye-laws.—There are no bye-laws as to houses let in lodgings, offensive trades, etc., and there does not appear to be any immediate necessity for such bye-laws. There are but few houses let in lodgings, and the only offensive trade is that of a horse-slaughterer, which is carried on at a distance from any dwelling or high road and is not productive of nuisance.

Schools.—There are 27 public elementary schools in the district, of which 7 are provided by the County Council, 1 at Botesdale (Dyer's Charity) is endowed, and 19 are voluntary schools. Their sanitary condition is good, and the water supply is usually satisfactory. Their sanitary requirements are provided for by earth closets, which are systematically emptied and provided with dry earth. The arrangements for medical inspection of school children are in the hands of a special Medical Officer appointed by the County Council, and the disinfection of the schools after an outbreak of infectious disease is carried out by the Education Authority under the supervision of the School Medical Officer.

There is also a Reformatory School at Thorndon (the Kerrison School) for 100 boys. This school is provided with a plentiful and pure supply of water from the chalk which is reached at a depth of a little over 100 feet. This school has an outlying farm house attached to it which is used for isolation purposes in the event of the outbreak of any infectious disease.

Infectious Diseases (Tables III. and VII.)—The method of dealing with such infectious diseases as are

notifiable under the Infectious Diseases (Notification) Act, 1889, is as follows :—On receipt of a notification from a medical man, the Medical Officer sends a notice to the Public Elementary School prohibiting the attendance of the child affected, and in the cases of Smallpox, Scarlet Fever and Diphtheria, prohibiting the attendance of any member of the family at school until further notice is given by the Sanitary Authority, and a duplicate of this notice will in future be sent to the School Medical Officer. At the same time the Medical Officer of Health institutes specific enquiries, through the Sanitary Inspector, as to the origin of the outbreak, the means adopted to isolate the patient, the sanitary condition of the premises, the source of supply of water and milk, the attendance of members of the family at Sunday schools, &c., &c. The Inspector sends a request to the superintendents of Sunday schools thus indicated, asking for the family to be excluded, which had already been done in the case of the day school ; and this request though not legally binding, I am glad to say, is invariably complied with. The Inspector is also instructed to take a sample of the drinking water for analysis in all cases of Diphtheria, and Enteric Fever, and in other cases where there appears possibility of pollution. The reason for these enquiries being in the first instance conducted through the Inspector, is to avoid undue interference with patients under the care of other medical practitioners. The information thus gained is carefully considered by the Medical Officer of Health, and if circumstances seem to require it, a personal visit of inspection is made, and this is made in all cases where the outbreak threatens to assume the form of an epidemic. In cases notified by the householder, instead of by a medical man, the Medical Officer of Health visits in order to secure a reliable diagnosis of the ailment. At the

termination of the case, the house is fumigated with formaldehyde by the Sanitary Inspector, and the occupier is required to clean the house after fumigation, and when this has been accomplished, leave is given for the children to return to school. There is no isolation hospital in the district, and cases are isolated as far as is possible in their own homes.

The number of cases notified under the Infectious Diseases (Notification) Act, 1889 (Table III.) was 60, and included :—

47 Cases of Scarlet Fever.
2 Cases of Diphtheria.
2 Cases of Enteric Fever.
1 Case of Puerperal Fever.
8 Cases of Erysipelas.

The results of the investigation made into these cases are shown in Table VII., and from these tables the following points may be deduced :—

Smallpox was entirely absent from the district, as it has been for many years past.

Scarlet Fever occurred in scattered cases throughout the district ; the only approach to an epidemic being in Thorndon and Rishangles during March and April, when 15 cases occurred in 5 different houses, and there was a probability that other mild cases occurred and were overlooked. Scarlet Fever, though it continues to prevail, has been of a much milder type in the district than was the case formerly, and amongst the 47 cases notified there were none that proved fatal.

In many of the cases, evidence was obtained of probable infection from outside the district ; but in many it was impossible to trace the origin of the out-

break. This difficulty arises from the fact that the disease is so readily conveyed by means of clothing, and probably also in some cases by cats and other animals, and some of the cases are of such an exceedingly mild character as to escape recognition, though such cases may readily become centres of infection. Other modes in which the disease may be conveyed in spite of such precaution as can be taken is shown by the fact that in two instances milk was sold on the premises, and one was at a general shop, which was also the Post Office. The association of scarlet fever in many cases of which the origin is unexplained with palpable sanitary faults on the premises suggests that the germs of the disease, if they do not originate, at least find congenial hiding places in foul ditches and offensive drains and cesspools.

Diphtheria.—Two isolated cases occurred, one of which proved fatal. In one case there was evidence that the disease was contracted in London; though inspection showed various sanitary defects, and the water supply was not beyond suspicion.

In the other case also the water supply was not thoroughly satisfactory. The sanitary defects found in both these cases have been remedied.

Enteric (Typhoid) Fever.—Two isolated cases occurred, both in the parish of Occold, but totally unconnected with each other. Both cases were associated with obvious sanitary defects; in one the drinking water was impure, and in the other not thoroughly satisfactory. The necessary steps to remedy these defects have been taken.

Puerperal Fever.—One case occurred, associated with defective drainage and a foul ditch near the house. The

person affected had previously suffered from the same disease, and in the same house.

Erysipelas.—Eight cases were notified during the year, all of whom recovered. This disease has undergone a decided diminution during recent years, the average number of cases annually since the Infectious Diseases (Notification) Act came into force, being as follows :—

Average of	10	years,	1890-99 21
,,	5	,,	1900-04 12
,,	5	,,	1905-09 9

Of the other infectious diseases which are not notifiable :—

Influenza prevailed to a less extent than in the previous year, and 3 deaths were attributed to that cause.

Measles prevailed in the parishes of Redgrave, Botesdale, Palgrave, Thrandeston, and Mendlesham, and caused 4 deaths.

Whooping Cough was not so prevalent as in the former year, and no death was attributable to it.

Epidemic Diseases.—The seven principal epidemic diseases, viz., small-pox, measles, scarlet fever, diphtheria, whooping cough, fever, and diarrhœa, caused 5 deaths, being at the rate of ·45 per 1,000 population. These diseases have shown a very satisfactory decrease in this district during recent years (see Table VI.) The corresponding rate in rural districts in England and Wales in 1909 was ·80 per 1,000.

Tuberculosis.—The only system of notification of cases of pulmonary tuberculosis is that provided in the case of paupers under the Tuberculosis Regulations, 1908.

On receipt of a notification, printed instructions are sent advising disinfection and destruction of sputa, etc., and in case of death, the house is fumigated with formaldehyde.

The number of cases notified during 1909 was 11.

There is no accommodation for such cases in infirmaries nor elsewhere, except in their own homes.

Pulmonary tuberculosis has very considerably decreased in this district during the last 20 years, as was clearly shown by the tables and chart appended to my annual report for the year 1906.

There were 13 deaths from pulmonary tuberculosis, and 2 from other tuberculous diseases in the district during 1909. The former figure is a little higher, and the latter a little lower than the average of recent years.

Vital Statistics.—The area of the district is 49,199 acres; the population at the census of 1901 was 11,509, and is estimated at the middle of the year 1909 as 11,069. The number of inhabited houses in 1901 was 2,739, giving an average number of 4·2 persons per house.

Births (Table I.)—240 Births were registered in your district during the year, being at the rate of 21·6 per 1,000 of the population, the rates in former years being :—

	1908	..	22·1
	1907	..	20·3
	1906	..	21·5
	1905	..	24·8
Average of 5 years ..	1900-4	..	23·2
,, 10 ,, ..	1890-9	..	26·5
,, 10 ,, ..	1880-9	..	31·9
,, 10 ,, ..	1870-9	..	31·2

The marked diminution in the birth-rate is partly due to the fact that so many of the younger adults leave the district in search of work, but is also partly due to causes affecting the whole community, as evidenced by the reports of the Registrar General.

The birth-rate for rural districts in England and Wales amounted in 1909 to 25·6 per 1,000 population, that for your district being more than 15 per cent. lower than that of similar districts.

DEATHS (Table I.)—After correcting the registered number of deaths by the addition of the deaths of residents registered in public institutions beyond the district, the number of deaths was 166, the death-rate being 14·9 per 1,000. The rates in former years were :—

	1908	..	13·1
	1907	..	12·7
	1906	..	14·3
	1905	..	13·6
Average of 5 years ..	1900-4	..	14 4
,, 10 ,, ..	1890-9	..	16·2
,, 10 ,, ..	1880-9	..	15·8
,, 10 ,, ..	1870-9	..	18·0

The death-rate this year is somewhat higher than usual. The corresponding rate in country districts in England and Wales is reported by the Registrar General as being 14·5 per 1,000.

Table II. shows similar statistics as to births and deaths, but divided into "localities," and the localities chosen for this purpose are the same as in former reports, and are the old registration districts, and are constituted thus : –

Botesdale Division.—Consisting of the parishes of Botesdale, Burgate, Gislingham, Mellis, Palgrave, Redgrave, Rickinghall Superior, and Wortham, containing in 1901 a population of 4,005.

Eye Division.—Consisting of the parishes of Braiseworth, Brome, Oakley, Occold, Redlingfield, Stoke Ash, Stuston, Thorndon, Thornham Magna and Parva, Thrandeston, and Yaxley, containing in 1901 a population of 3,158. 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 1901 a population of 4,346.

The following table shows the comparative statistics of the three divisions :—

Divisions.	Birth-rate per 1,000 population.	Death-rate per 1,000 population.	Deaths under 1 year per 1,000 Births Registered.
Botesdale	21·5	16·4	84
Eye	19·1	13·5	137
Mendlesham ..	23·6	14·8	50

I attribute these variations to accidental circumstances, due to small numbers extended over one year only, rather than to any real difference in the sanitary conditions of the divisions.

INFANTILE MORTALITY (Tables I. and V.)—The number of deaths under one year of age occurring in your district was 20, being at the rate of 83 per 1,000 births registered. This is slightly below the average of the last 10 years. The corresponding rate in rural districts in England and Wales in 1909 was 98 per 1,000 births.

Of the 240 births registered in your district, 223 were legitimate, and amongst these the deaths under one year was 15, being at the rate of 67 per 1,000 births, whilst 17 were illegitimate, and amongst them 5 died under one year, being at the rate of 294 per 1,000 births. Comment on these figures is needless.

The Notification of Births Act, 1907, has not been adopted in the district.

CLOSING OF PUBLIC ELEMENTARY SCHOOLS.—The following Public Elementary Schools have been closed during the year on account of the presence of Infectious Diseases, viz :—

REDGRAVE SCHOOL from March 18th to 29th, on account of Measles and Mumps. Closed by Managers on certificate of medical practitioner.

BROME AND OAKLEY SCHOOL from April 3rd to May 3rd. Measles, Mumps, Influenza, and Whooping Cough prevalent. Closed by advice of the Medical Officer of Health.

WORTHAM LONG GREEN AND LING SCHOOLS were closed on July 8th, until after the harvest holiday, on account of Measles and Mumps. Closed by order of the School Medical Officer.

THRANDESTON SCHOOL closed from July 12th to 30th, on account of Measles. Closed by advice of the School Medical Officer.

PALGRAVE SCHOOL closed from July 13th to August 3rd, on account of Measles. Closed by advice of Medical Officer of Health.

MENDLESHAM SCHOOL closed from July 19th, till after the harvest holidays, Scarlet Fever and Measles having oocurred. Closed by advice of Medical Officer of Health.

In all cases the Schools were fumigated with formaldehyde and cleaned before being re-opened.

Arrangements have been made between the School Medical Officer of the East Suffolk County Council and the Medical Officer of Health for the interchange of information concerning Infectious Diseases in Schools, and for promoting harmonious working and prevention of overlapping in their respective duties.

LEGAL PROCEEDINGS were taken in 4 cases during the year, 1 being a nuisance occasioned by night-soil deposited in a manure heap near a public road, in which a conviction was obtained, and the remaining cases were closing orders made by the Justices of houses unfit for habitation, under the Housing of the Working Classes Act, 1890, in each case a closing order was made and a fine imposed. One of these houses has since been put in good repair.

FACTORY AND WORKSHOPS ACT, 1901.—The Register of Factories and Workshops contains this year 128 entries, which may be classified as follows :—

Factories—20	Steam & Wind Mills for grinding corn, &c.	19
	Sewage Farm	1
	Smiths	33
Workshops—108	Carpenters	7
	Wheelwrights	7
	Wheelwrights and Carpenters ...	6
	Builders	5
	Builders and Wheelwrights	3
	Plumbers and Painters	3
	Coachbuilders	3
	Brickmaker	1
	Harness Makers	4
	Dressmakers	6
	Bootmakers...	4
	Tailor	1
	Basket Makers	2
	Brushmaker	1
	Cycle Repairers	3
	Retail Bakehouses	19
		128

There is no underground bakehouse in the district, nor are there any places registered as workplaces.

These workshops have been regularly inspected, 202 visits having been made during 1909. They are satisfactorily kept, and all the bakehouses have been cleansed and lime-

washed. Three workshops have been cleansed and repaired, and the following nuisances, under the Public Health Acts, have been dealt with, viz. :—

2 Accumulations of Manure.
4 Foul Privies.
2 Foul Ditches.

There have been no matters notified to H.M. Inspector of Factories, except 2 instances of failure to exhibit the Abstract of the Factory Act.

Homework does not appear to exist in the district, hence there is no report to be made under this heading.

Section 22 of the Public Health Acts (Amendment) Act, 1890, is not in force in the district.

Almost all the workshops are small, and only employ 2 or 3 workers, and the sanitary arrangements required is left to the discretion of the Sanitary Officers—all the circumstances of the case being taken into consideration. There are no workshops which employ workers of both sexes, except in some retail bakehouses where the wife or daughter of the proprietor superintends or assists in the making of bread.

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, February 28th, 1910.

TABLES

Appended to the Annual Report of the Medical Officer of Health for the year 1909.

TABLE I. HARTISMERE RURAL DISTRICT.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1909 AND PREVIOUS YEARS.

Year.	Population estimated to Middle of each Year.	Births.		Total Deaths Registered in the District.				Total Deaths in Public Institutions in the District	Deaths of Non-residents registerd in the District.	Deaths of Residents registered in Public Institutns beyond the District.	Nett Deaths at all Ages belonging to the District.	
				Under 1 Year of Age.		At all Ages.						
		Number.	Rate.*	Number.	Rate per 1,000 Births registered	Number.	Rate.*				Number.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1899.	11731	304	25·9	24	79	182	15·5	—	—	12	194	16·5
1900.	11620	260	22·3	36	138	154	13·2	—	—	18	171	14·7
1901.	11509	264	22·9	22	83	152	13·2	—	—	6	158	13·7
1902.	11454	258	22·5	31	120	158	13·7	—	1	13	171	14·9
1903.	11399	304	26·6	21	69	164	14·3	—	—	14	178	15·6
1904.	11344	246	21·6	24	97	135	11·9	—	—	12	147	12·9
1905.	11289	280	24·8	22	78	142	12·5	—	—	12	154	13·6
1906.	11234	242	21·5	29	119	146	12·9	—	—	15	161	14·3
1907.	11179	233	20·8	15	64	131	11·7	—	—	12	143	12·7
1908.	11124	245	22·1	10	40	128	11·5	—	—	18	146	13·1
Averages for years 1699-1908	11388	263	23·1	23	88	149	13·0	—	0·1	13	162	14·2
1909.	11069	240	21·6	20	83	148	13·3	—	—	18	166	14·9

* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

NOTE.—The deaths to be included in Column 7 of this table are the whole of those registered during the year as having actually occurred within the district or division. The deaths to be included in Column 12 are the number in Column 7, corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

By the term "Non-residents" is meant persons brought into the district on account of sickness or infirmity, and dying in public institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in public institutions elsewhere.

Area of District in acres (exclusive of area covered by water), 49,199.

Total population at all ages, 11,509.
Number of inhabited houses, 2,739.
Average number of persons per house, 4·2.
} At Census of 1901.

The Public Institutions taken into account in these tables are the Hartismere Union Workhouse, and the East Suffolk Hospital, both situated outside the district.

TABLE II. HARTISMERE RURAL DISTRICT.

VITAL STATISTICS OF SEPARATE LOCALITIES IN 1909 AND PREVIOUS YEARS.

Names of Localities.	1. HARTISMERE R.D.				2. BOTESDALE DIVISION.				3. EYE DIVISION.				4. MENDLESHAM DIVISION.			
Year.	Population estimated to middle of each Year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each Year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.
	a.	*b.*	*c.*	*d.*	*a.*	*b.*	*c.*	*d.*	*a.*	*b.*	*c.*	*d.*	*a.*	*b.*	*c.*	*d.*
1899	11731	304	194	24	4057	113	71	13	3208	73	57	2	4466	118	66	9
1900	11620	260	171	36	4031	90	65	10	3183	77	35	8	4406	93	71	18
1901	11509	264	158	22	4005	96	59	11	3153	69	45	5	4346	99	54	6
1902	11454	258	171	31	3985	87	54	8	3143	72	47	7	4326	99	70	16
1903	11399	304	178	21	3965	122	65	10	3128	79	46	2	4306	103	67	9
1904	11344	246	147	24	3945	81	53	12	3113	64	45	5	4286	101	49	7
1905	11289	280	154	22	3925	87	48	6	3098	84	46	8	4266	109	60	8
1906	11234	242	161	29	3905	83	62	7	3083	64	42	11	4246	95	57	11
1907	11179	233	143	15	3885	88	52	3	3068	60	42	7	4226	85	49	5
1908	11124	245	146	10	3863	87	56	5	3053	73	43	3	4206	85	47	2
Averages of Years 1899 to 1908	11388	263	162	23	3936	93	58	8	3123	71	44	5	4308	98	59	9
1909	11069	240	166	20	3845	83	65	7	3038	58	41	8	4186	99	62	5

Notes.—(*a*) The separate localities adopted for this table should be areas of which the populations are obtainable from the census returns, such as wards, parishes or groups of parishes, or registration sub-districts. Block 1 may, if desired, be used for the whole district: and blocks 2, 3, &c., for the several localities. In small districts without recognised divisions of known population this Table need not be filled up.

(*b*) Deaths of residents occurring in public institutions beyond the district are to be included in sub-columns *c* of this Table, and those of non-residents registered in public institutions in the district excluded. (See note on Table I. as to meaning of terms "resident" and "non-resident.")

(*c*) Deaths of residents occurring in public institutions, whether within or without the district, are to be allotted to the respective localities according to the addresses of the deceased.

(*d*) Care should be taken that the gross totals of the several columns in this Table respectively equal the corresponding totals for the whole districts in Tables I. and IV.: thus, the totals of sub-columns *a*, *b*, and *c* should agree with the figures for the year in the columns 2, 3, and 12 respectively, of Table I.: the gross total of the sub-columns *c* should agree with the total of column 2 in Table IV., and the gross total of sub-columns *d* with the total of column 3 in Table IV.

TABLE III.

HARTISMERE RURAL DISTRICT.

Cases of Infectious Diseases notified during the Year 1909.

Notifiable Disease.	Cases notified in Whole District.							Total Cases notified in each Locality.		
	At all Ages.	At Ages—Years.						1	2	3
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.	Botesdale Division.	Eye Division.	Mendlesham Division.
Small-pox	—	—	—	—	—	—	—	—	—	—
Cholera	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous croup) .	2	—	—	2	—	—	—	—	—	2
Erysipelas	8	—	—	—	—	1	7	1	2	5
Scarlet fever	47	1	9	32	1	4	—	2	17	28
Typhus fever	—	—	—	—	—	—	—	—	—	—
Enteric fever	2	—	—	—	2	—	—	—	2	—
Relapsing fever ..	—	—	—	—	—	—	—	—	—	—
Continued fever ..	—	—	—	—	—	—	—	—	—	—
Puerperal fever ..	1	—	—	—	—	1	—	—	—	1
Plague	—	—	—	—	—	—	—	—	—	—
Totals	60	1	9	34	3	6	7	3	21	36

There is no Isolation Hospital in the District.

TABLE IV. HARTISMERE RURAL DISTRICT.

Causes of, and Ages at, Death during Year 1909.

Causes of Death.	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District.							Deaths at all Ages of "Residents" belonging to Localities whether occurring in or beyond the District.			Total Deaths in Public Institutions in the District
	All Ages.	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards	Botesdale Division.	Eye Division.	Mendlesham Division.	
Small Pox	—	—	—	—	—	—	—	—	—	—	—
Measles	4	—	3	—	1	—	—	3	—	1	—
Scarlet fever	—	—	—	—	—	—	—	—	—	—	—
Whooping-cough	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including membranous croup)	1	—	—	1	—	—	—	—	—	1	—
Croup	—	—	—	—	—	—	—	—	—	—	—
Fever (Typhus)	—	—	—	—	—	—	—	—	—	—	—
Fever (Enteric)	—	—	—	—	—	—	—	—	—	—	—
Fever (Other continued)	—	—	—	—	—	—	—	—	—	—	—
Epidemic influenza	3	—	—	—	—	2	1	1	—	2	—
Cholera	—	—	—	—	—	—	—	—	—	—	—
Plague	—	—	—	—	—	—	—	—	—	—	—
Diarrhœa	—	—	—	—	—	—	—	—	—	—	—
Enteritis	—	—	—	—	—	—	—	—	—	—	—
Gastritis	—	—	—	—	—	—	—	—	—	—	—
Puerperal fever	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	—	—
Phthisis (Pulmonary Tuberculosis)	13	—	—	—	—	9	4	7	1	5	—
Other tubercular diseases	2	1	—	—	1	—	—	2	—	—	—
Cancer, malignant disease	9	—	—	—	—	4	5	5	2	2	—
Bronchitis	17	2	—	—	—	2	13	1	5	11	—
Pneumonia	10	2	2	—	2	—	4	2	4	4	—
Pleurisy	1	—	—	—	—	1	—	1	—	—	—
Other diseases of Respiratory organs	—	—	—	—	—	—	—	—	—	—	—
Alcoholism / Cirrhosis of liver	—	—	—	—	—	—	—	—	—	—	—
Venereal diseases	—	—	—	—	—	—	—	—	—	—	—
Premature birth	4	4	—	—	—	—	—	1	2	1	—
Diseases and accidents of parturition	—	—	—	—	—	—	—	—	—	—	—
Heart diseases	25	—	—	1	—	5	19	7	4	14	—
Accidents	5	—	1	—	1	—	3	1	2	2	—
Suicides	1	—	—	—	—	1	—	—	1	—	—
.....	—	—	—	—	—	—	—	—	—	—	—
.....	—	—	—	—	—	—	—	—	—	—	—
.....	—	—	—	—	—	—	—	—	—	—	—
.....	—	—	—	—	—	—	—	—	—	—	—
.....	—	—	—	—	—	—	—	—	—	—	—
All other causes	71	11	—	4	3	9	44	32	20	19	
All causes	166	20	6	6	8	33	93	63	41	62	—

In recording the facts under the various headings of Tables I., II., III. and IV., attention has been given to the notes on the Tables.

EDGAR G. BARNES, M.D., Lon., *Medical Officer of Health.*

TABLE V. HARTISMERE RURAL DISTRICT.

INFANTILE MORTALITY DURING THE YEAR 1909.

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

	CAUSE OF DEATH.	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 1 month.	1-2 months.	2-3 months.	3-4 months.	4-5 months.	5-6 months.	6-7 months.	7-8 months.	8-9 months.	9-10 months.	10-11 months.	11-12 months.	Total Deaths under 1 year.
All Causes	Certified	6	2	1	1	10	2	1	...	...	...	...	1	1	2	1	...	18
	Uncertified	1	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	2
Common Infectious Diseases.	Small-pox	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...
	Chicken-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..
	Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Scarlet Fever	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...
	Diphtheria : including Membraneous Croup	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...
	Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...
Diarrhœal Diseases.	Diarrhœa, all forms	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Enteritis, Muco-enteritis, Gastro-enteritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Gastritis, Gastro-intestinal Catarrh	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Wasting Diseases.	Premature Birth	3	...	1	...	4	...	...	...	...	...	..	...	...	...	...	...	4
	Congenital Defects	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
	Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Want of Breast-milk, Starvation	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Atrophy, Debility, Marasmus	3	1	...	1	5	1	...	...	...	1	...	...	...	...	...	...	7
Tuberculous Diseases.	Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1
	Tuberculous Peritonitis : Tabes Mesenterica	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...
	Other Tuberculous Diseases	...	..	...	...	...	..	...	...	...	...	...	...	...	...	.	...	...
Other Causes.	Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...
	Meningitis (*not Tuberculous*)	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1
	Convulsions	...	...	...	...	...	1	...	...	...	...	...	1	...	...	...	...	2
	Bronchitis	...	...	...	.	...	...	1	...	...	...	...	...	...	...	1	...	2
	Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...
	Pneumonia	...	1	...	...	1	...	...	...	...	...	...	...	1	...	...	...	2
	Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Other causes	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
		7	2	1	1	11	2	1	...	...	1	...	1	1	2	1	...	20

Population (estimated to middle of 1909), 11,069. Births in the year: legitimate, 223; illegitimate, 17.
Deaths in the year of legitimate infants, 15; of illegitimate infants, 5.

Deaths from all Causes at all Ages, 166.

TABLE VI.

HARTISMERE RURAL SANITARY DISTRICT.

Table showing the Number of DEATHS from each of the 7 Principal EPIDEMIC DISEASES for the years 1905, 1906, 1907, 1908, and 1909, compared with the averages of the five years 1900-04, the ten years 1890-99, the ten years 1880-89, and the ten years 1870-79.

Disease.	1909	1908	1907	1906	1905	Average of 5 years 1900-04.	Average of 10 years 1890-99.	Average of 10 years, 1880-89.	Average of 10 years, 1870-79.
Smallpox	—	—	—	—	—	—	—	—	·4
Measles	4	—	2	—	—	—	1·2	1·7	2·1
Scarlet Fever ...	—	—	—	—	—	—	1·0	2·5	3·5
Diphtheria	1	1	—	—	1	1·6	1·4	3·2	1·7
Whooping Cough ...	—	1	—	7	2	1·4	3·6	4·0	5·8
Fever	—	1	—	—	—	·2	1·1	1·6	4·3
Diarrhœa	—	—	1	3	1	1·6	3·7	3·8	5·7
Totals ...	5	3	3	10	4	4·8	12·0	16·8	23·5

TABLE VII. HARTISMERE RURAL SANITARY DISTRICT.

Table showing particulars of *Outbreaks of Infectious Diseases* investigated during the year 1909.

Date.	Disease.	Locality.	Origin of Outbreak, Sanitary Defects, &c.	Houses affected.	Persons attacked.	Deaths.
January	Scarlet Fever	Yaxley	Origin unknown, but sufferer received letters from a house where "measles" was said to exist	1	1	—
February	,,	Oakley	Patient first attacked had been in town where scarlet fever existed	1	2	—
March and April	,,	Thorndon and Rishangles	Origin not traced, but cases investigated originated from previous unsuspected cases in attendance at school. In one house milk was sold, but this was immediately discontinued. Another house was the Post Office and general shop; arrangements were made for special officer unconnected with the house to deal with letters	5	15	—
March	,,	Burgate	Origin not traced	1	1	—
April and June	,,	Yaxley	Origin not traced	2	2	—
June & July	,,	Mendlesham	Origin of first case not traced	5	6	—
June	,,	Burgate	Imported from Herefordshire	1	1	—
August	,,	Bacton	Infection suspected through borrowed rug. Privy vault required cleansing	1	1	—
September	,,	Wickham Sk'th	Probable infection from London	1	2	—
,,	,,	Yaxley	Origin not traced. Visitor from London stayed in the house about 3 days before outbreak	1	1	—
,,	,,	Brome	Origin not traced. Manure nuisance within 8 yards of house. Milk sold on premises	1	1	—
November	,,	Bacton	Origin not traced	1	1	—
Nov. & Dec.	,,	Thorndon	Imported case. Manure from swine near house	2	3	—
November	,,	Mendlesham	Case supposed to be imported through workman. Sink drain required trapping. Water supply not thoroughly satisfactory.	1	10	—
				24	47	—
January	Enteric Fever	Occold	Privy dilapidated and without vault. Sink drain carried under kitchen floor and across garden to foul ditch. No traps to drain. Pump supplied from pond, and found impure on analysis.	1	1	—
September	,,	Occold	Privy 5 yards from back door. Swine 7 yards from door. Water supply from pond containing large amount of organic matter of vegetable origin, but no evidence of sewage contamination.	1	1	—
				2	2	—
February	Puerperal Fever	Wickham Skeith	Drainage defective. Foul ditch 12 yards from door of house. Patient suffered from a former attack of puerperal fever in November, 1898	1	1	—
May	Diphtheria	Wickham Skeith	General shop. Privy vault broken down and drainage defective. Water supply not thoroughly satisfactory. Case probably imported from London.	1	1	1
June	,,	Bacton	Water supply not thoroughly satisfactory	1	1	—
				2	2	1

TABLE VIII. FACTORIES, WORKSHOPS, LAUNDRIES, WORKPLACES & HOMEWORK, 1909.

1.—INSPECTION.

Including Inspections made by Sanitary Inspector.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (including Factory Laundries)	0	0	0
Workshops (including Workshop Laundries)	202	27	0
Workplaces	0	0	0
Homeworkers' Premises	0	0	0
Total	202	27	0

2.—DEFECTS FOUND.

Nuisances under the Public Health Acts:—

Want of Cleanliness	30	30	remedied.
Want of Ventilation	0	0	,,
Overcrowding	0	0	,,
Total	30	30	,,

3.—OTHER MATTERS.

Matters Notified to H.M. Inspector of Factories:—

Failure to Affix Abstract of the Factory and Workshop Act (s. 133)	2	
Underground Bakehouse	0	
Homework	0	

Workshops on Register at end of 1909:—

Factories—Steam Mills	19	20
Sewage Farm	1	
Workshops—Smiths	33	108
Builders, Carpenters, Painters, &c.	31	
Coachbuilders and Cycle Repairers	6	
Harness Makers	4	
Brick Maker	1	
Basket Makers and Brush Makers	3	
Dressmakers, Tailors, Bootmakers	11	
Retail Bakehouses	19	
Total		128