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Contributors

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THE HATFIELD RURAL DISTRICT COUNCIL

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR

1913

HATFIELD:

PRINTED AT THE HATFIELD PRINTING WORKS.
1914.

HATFIELD RURAL DISTRICT COUNCIL.

Report of the Medical Officer of Health for 1913.

HATFIBLD,

9/3/14.

GENTLEMEN,

I have the honour to present my Annual Report for 1913.

The district is purely agricultural and possesses a soil, which in the south is chiefly clay and in other parts is either loam or gravel, with occasional outcrops of chalk.

The population is chiefly concerned in agriculture, but in Hatfield there is a considerable railway population. None of the occupations have any influence on the public health. Full information will be found in the Schedules, which are annexed, relative to population and vital statistics.

The population in 1911 was 8,592, and is estimated at the same for the purposes of this Report.

The following table shows the birth-rate, death-rate and death-rate under 1 year to 1,000 births for the District as compared with those of England and Wales, less 241 towns, and with those of England and Wales:—

	Births.	Crude.	Standardisation	Deaths under 1 year to 1000 Births.
England and Wales	28.9	13.7	13.4	109
Hatfield District	21.5	10.3		48.6
England and Wales less 241 Towns	22.2	13·1	12·1	96
Hertfordshire rural	19.9	12.7	11-1	55.9

This comparison will, it is to be hoped, satisfy the minds of those who become panic-stricken whenever a case of infective disorder appears, and must, at all events, be a matter of congratulation by those who are responsible for the health of the district. There were three cases of Scarlet Fever notified in Hatfield, one of which was notified in error, the other two were isolated ones—of which one was removed to the Isolation Hospital. Six cases of this disease were notified in North Mymms, and four were removed to the Isolation Hospital. In view of the prevalence of Scarlet Fever in this country, it is a matter of some importance to account for these results.

In Hatfield, during the years 1910 and 1911, there was a prevalence of Diphtheria, and for many months the children were under the constant supervision of a Health Visitor, either at school or at home, who sprayed the throats of a very large number with a strong antiseptic solution. At the commencement of this method of treatment, Scarlet Fever notifications, which had been noticeable, dropped in number and soon ceased altogether. In 1912 there were only four notifications in Hatfield, only two of which occurred amongst children attending the Elementary Schools, and in 1913 there was only one case as occurring in this class.

It certainly does appear to me that this method of treatment is not only of value when epidemic conditions exist, but should be employed before epidemic conditions are thoroughly established, and I shall so advise you when occasion arises. It is to be noted that the effects of the treatment is not transitory, and that, while other districts have had a considerable amount of Diphtheria and Scarlet Fever, especially during 1913, yours had been, for the most part, immune from Scarlet Fever and entirely from Diphtheria.

Water Supply.—Hatfield Village is sufficiently supplied from the Hatfield Estate Waterworks. North Mymms is amply supplied by the Barnet Waterworks and some good deep wells.

Northaw and Cuffley are supplied in the same way.

Essendon has a supply derived from deep wells in the Lea Valley, the water being pumped to a tower in the village.

Samples of water have been taken for analysis in these cases.

Rivers and Streams.—Two watersheds, the Lea and the Colne, exist, and no case of pollution of either has come to my notice.

Closet Accommodation .-

		Houses.	Earth Closets.	Closets.
Hatfield	 	1,210	648	551
North Mymms	 	409	289	120
Essendon	 	136	90	46
Northaw	 	138	95	43

Drainage and Sewerage.—The outfall arrangements both at Little Heath and Hatfield are satisfactory, and the two systems for the disposal of sewage appear in every way sufficient. In other parts of the district the disposal of excreta is provided for by earth closets, and, in a small number of cases, water closets and either private plants or cesspools.

Scavenging.—In Hatfield this is provided by contract and is efficiently carried out. Owing to the widely scattered and rural conditions of other parts of the district, this is not undertaken by the District Council, but the work is sufficiently carried out by the occupiers, or by arrangements made by owners of property.

Schools.—These are regularly inspected by the School Medical Officer. The schools at Little Heath were closed in June for 14 days, in consequence of the prevalence of Measles, but there has been no other school closure in the district. Their sanitary condition and water supply are satisfactory.

Milk Supply.—I have visited two sets of cowsheds and dairies in which I have recommended special action to be taken. In neither case were the premises registered, and the premises were in a very unsatisfactory condition. The Inspector should be more careful in future in dealing with such premises. The Milk Supply in the district is good, and in none of the six samples taken was an adverse report made by the Analyst.

Food.—Eighty carcases have been inspected and one condemned, but no other action has been taken. The condition of bake-houses, slaughter-houses and other trade premises has given no occasion for complaint, and sufficient care is given by purveyors of various foods as to the condition of the articles sold by them.

Housing.—Thirty-two houses have been built. The number of houses surveyed and reported upon, under sec. 17 of the Act of 1909, is 164.

The number of houses which on inspection were considered to be in a state so dangerous or injurious to health as to be unfit for human habitation is 15.

I have made representations to you in two cases with a view to closing orders being made, but, in both cases, the owners agreed to extensive improvements. No closing orders have been made.

Nine dwelling-houses possessed defects which were remedied without the making of closing orders. The general character of defects is that possessed by old property.

The problem of the housing of the working classes is one to which much attention is being given, but it is frequently subjected to very curious treatment. The first question which arises is as to the necessity for provision of accommodation for those who live in the district, because they work there, or because they are old inhabitants—or for those who desire to live there for their own private reasons. If provision for accommodation is considered necessary for all these three classes, there is no doubt a great deficiency in the number of houses required, but there are, in my opinion, sufficient houses for those actually employed in the district, if the latter class is left out of consideration.

The next question is that of the class of accommodation to be provided. Now, there is no doubt that the standard of comfort has materially advanced during the last quarter of a century, and that there is small probability that this standard will diminish—on the contrary, its increase is certain. The standard of accommodation hitherto provided is about that which obtained 20 years ago in too many instances. More than this, there is a tendency in the direction of the construction of houses which are economical absurdities. In my opinion, in the course of the next quarter of a century a demand for the abolition of such houses will arise. The building of houses which possess less than the accommodation which modern requirements demand is a mistake, and should not be encouraged.

A pair of first-class houses for the accommodation of the working classes will cost £520, and, from information which I have obtained, a pair of houses with the minimum of accommodation which is reasonable will cost rather over than under £400.

If your Council proposes to undertake the provision of houses for the working classes, I cannot advise that any accommodation at a less cost should be provided. Our bye-laws are obsolete, and require alteration in many particulars. Their reconsideration is desirable, and if this is undertaken the erection of houses which do not possess accommodation up to the modern standard should be made impossible.

Workshops, Factories, etc.—The Inspector's Report provides information as to the work done by him. I have nothing to add to it.

Sanitary Administration.—In consequence of my report you appointed a Committee to consider the work of the Sanitary Inspector, and his work has been clearly defined. A great improvement in this work is to be expected of him—as I hope my next report will testify.

Hospital Accommodation consists of a service of eight beds in the Hertford and Ware Joint Hospital; there is ample accommodation provided. No chemical or bacteriological examinations have been necessary.

Prevalence and Control over Tuberculosis.—Fourteen cases have been reported primarily as occurring in the lungs, and four in other parts of the body. There have been 27 notifications of admission to, or discharge from different institutions, of persons, nearly all belonging to other districts.

The control of patients is now under the charge of a Tuberculosis Officer appointed by the County Council. An attempt is thus being made to deal with the disorder by special official methods. If infective disorders of any kind are to be dealt with satisfactorily, the only methods which can be considered of any avail are those which are called clinical, and are the result of a considerable knowledge of disease. It is quite idle to suppose that any disease can be strangled by mere official methods and statistics.

I here append the number of notifications received in England and Wales of Scarlet Fever and Diphtheria:—

Scarlet Fever		Diphtheria.
8,309	 Jan	. 3,673
8,207	 Feb	3,580
8,982	 March	4,403
7,001	 April	3,012
9.049	 May	3,535
7,747	 June	2,901
8,878	 July	3,359
9,886	 Aug	3,698
11,032	 Sept	3,829
14,161	 Oct	4,931
20,794	 Nov	7,164
13,584	 Dec	. 5,568

These diseases have been specially dealt with officially for many years, and to a large extent in Hospitals set apart for them, and these results are not encouraging. In dealing with the death-rate from these diseases and their severity, there is no doubt in my mind that Lord Lister's work is entirely responsible for the improvement in the death-rate and the lessening of the vigour of the disease. It may possibly be denied that Diphtheria has decreased in vigour, although it will be generally admitted that Scarlet Fever has. The death-rate from both has much diminished, and I have no doubt that the antiseptic methods of treatment are entirely responsible for this in the case of the latter, and, in that of the former, more improvement would be made if the clinical differences between the different conditions in the throat, which are nearly all now classed under the head of Diphtheria, were recognised and treated accordingly. The official treatment is that by anti-toxin. and too many practitioners are not alive to the fact that anti-toxin can only be of avail in cases where there is no other infection but that of the Diphtheria bacillus. Recent experience in this District has amply confirmed this view.

Official action has certainly not resulted in the stamping out of either of these diseases, and now attempt is made to deal with Tuberculosis upon somewhat similar lines. There is no indication that there will be any more success with this disease than with the others, and indeed there is probability that there will be less. There is much more resistance in the human body to the attacks of

the tubercle bacillus than there is to many other infections, because tuberculosis is encouraged in those only whose bodily powers have been lowered by bad ventilation, exposure to bad Nutrition hygienic conditions, by want of sufficient food, or by the attacks of the result disease which has left the sufferer in a weak state of health, or by over indulgence in alcohol. With the better conditions which are noticeable in every class of the population, and which are the result of more money to spend, of a more sufficient knowledge of the proper methods of life, and of a greater attention paid to Sanitary surroundings, the death-rate from this disease has steadily declined. This improvement in the death-rate has also coincided with the gradual assimilation of the teaching of Lord Lister as to treatment.

The official treatment is now based upon the fundamental principle of Sir Almroth Wright: "to exploit, in the interest of infected tissues, the unexercised immunising capacities of the uninfected tissue," and is carried out by the administration of the dead organism, in various degrees of attenuation, which are connected with the causation of the disease. In the case of tubercle every specialist appears to have different serums for carrying out his treatment, and the number of tuberculin preparations is large. success obtained does not appear to be very remarkable, and indeed equally favourable results can be obtained by the use of chemical substances which excite in the body reactions of as favourable a nature as those induced by tuberculins. Besides this medicinal treatment, the official method is banishment to open-air The disease in its earliest stages can be treated satisfactorily by several methods without isolation, and probably the only value which is obtained from the Sanatorium is the instruction given in general management (by the individual) of his health. The expenditure involved is very great, and out of all proportion to the number of persons who return to work after treatment. must not be forgotten that a great number of chronic cases have always lived and worked for many years in the absence of any treatment—so great are the powers of resistance of the body to the disease.

The practical conclusions at which I have arrived are these:—
That the results which can be obtained by special official action in
the control of the disease, are out of proportion to the expense in
administration. That the money now being expended would be
more profitably employed in providing better housing accommodation for the working classes, even if this involved an uneconomic
rent. That it is not desirable that tuberculosis should be looked
upon in the same light as the ordinary infective disorders.

It has been estimated that not more than 4 per cent. of married persons contract consumption one from the other, and this observation gives about the right idea of the chances of the contraction of the disease.

Means for preventing Mortality in Childbirth and in Infancy.—Just short of 2,000 notifications of Puerperal Fever were received in England and Wales in 1913. In view of the circumstances connected with this disease, there were doubtless many more cases not notified. The Midwives Bill, the Notification of Births Act, 1907, were passed with the avowed intention of dimishing the disease, but there is probably, putting hospitals on one side, no diminution at the present time. Official action is again inoperative for good! The County has a Head Midwife who carries out the inspection of Midwives in the County.

The Schedule relative to infantile mortality shows that there are no deaths of the preventable kind amongst infants. There was also no case of puerperal fever notified.

Opthalmia Neonotomium has practically been non-existent in the District for the last 27 years.

Your District is, it may be concluded, in satisfactory condition.

I remain, Gentlemen,
Your obedient Servant,
LOVELL DRAGE,
Medical Officer of Health.

THE HATFIELD DISTRICT COUNCIL.

Factories, Workshops, Workplaces and Homework.

1.-INSPECTION.

Including Inspections made by Inspector of Nuisances.

Premises.		Number of	
PREMISES.	Inspections.	Written Notices.	Prosecutions
Factories (Including Factory Laundries)	 4	1	
Workshops (Including Workshop Laundries)	 22	1	
Workplaces	 		
Homeworkers' Premises	 		
Total	 26	2	

2.- DEFECTS FOUND.

	PARTICULARS.	N	umber of Defec	ets.	Number
	PARTICULARS.	Found.	Remedied.	Referred to H.M. Inspector.	Prosecu-
Healt	under the Public				
Want o	f Cleanliness	7	7		
Want o	f Ventilation				
Overcro	wding				
Want of	Drainage of Floors				
Other N	Nuisances				
Sanitary	insufficient				
accom- modation	unsuitable or defective	1	1		
	not separate for sexes				
Т	otal	8	8		

Workshops on the Register

Table 1.

Vital Statistics of Whole District during 1913 and Previous Years.

Name of District - - - HATFIELD RURAL.

	-		-				ar services	444	and the same	
ONING	At all ages.		Rate.*	13	10	11-2	13.7	11.8	8.6	10.3
S BELON DISTRICT	At all		Num- ber.	12	92	85	105	102	85	89
NETT DEATHS BELONGING TO THE DISTRICT.	Under I year of age.	Rate	per 1,000 Nett Births	11	43.4	82.9	64.5	67	70	48.6
NET	Under of		Num- ber.	10	6	17	12	14	12	6
INSPERABLE DEATHS.		dents not	registered in the District.	6	4	2	11	80	6	11
TRANSPERABLE DEATHS.		Residents	registered in the District.	8	:	:	:	8	61	2
TAL	TERED THE RICT.		Rate.*	7	9.2	6.01	12.7	11	6	9.3
TOTAL	KEGISTERED IN THE DISTRICT.		Num- ber.	9	72	93	94	97	78	80
	Nett.		Rate.*	5	27.2	27-1	24.6	22.5	19.5	21.5
BIRTHS.	Z		Number.	4	207	205	186	194	168	185
		Un-	Num- ber.	3	207	205	186	194	168	185
	lation estim-	middle	of each year.	2	7551	"	"	8592	:	8592
	VEAD	YEAK		1	1908	1909	1910	1161	1912	1913

*Rates in Columns 3, 7 and 13 calculated per 1,000 of estimated population.

Average number of persons per house at ditto, 4.5. Area of District in acres (land and inland water), 23,486.

Total population at all ages at Census of 1911, 8,592.

Number of inhabited houses at ditto, 1,850.

Average number of persons

Table II.

Cases of Infectious Diseases notified during the Year 1913.

	Total Cases removed	Hospital	:	5	:	8	œ
fied iy.		Essendon	:	:	2	11	63
s Noti		Northaw	:	:	2	:	61
Total Cases Notified in each Locality.	·sww	North Mi	:	9	4	-	11
Tota		Hatfield.	-	2	9	8	12
		65 and up- wards.	1	:		i	1
		45 to 65.	:	-	23	:	60
Distric	ars.	25 to 45.	:	-	69	:	4
Whole	At Ages—Years.	15 to 25.	:	-	7	-	6
ed in \	At Ag		:	2	2	-	00
Cases Notified in Whole District.		1 to 5. 5to 15.	:	:	:	67	67
Case		Under 1.	:	:	:	:	:
		At all Ages.	-	80	14	4	27
	Notifiable Disease.		Erysipelas	Scarlet Fever	Pulmonary Tuberculosis	Other forms of Tuberculosis	Totals

Isolation Hospital | Sanatoria, &c.

HERTFORD AND WARE JOINT HOSPITAL. CHANTRY HOUSE, HATFIELD.

Causes of, and Ages at Death during the Year 1913.

Total Deaths	Public Institu- tions in the District.	- -s-	6
	65 and upwards	::24年七:- :2 #2:	36
Deaths at the subjoined ages of Residents whether occurring in or beyond the District.	45 and under 65.	& C	28
at the subjoined ages of Residents occurring in or beyond the District.	25 and under 45.	:-4-0::- ::+:-	9
iges of yond th	5 and 15 and under 15.	14	9
oined a	5 and under 15.	11111111111111	2
he subj	2 and under 5.	11111-1-1-1111	3
ths at t	1 and under 2.	1111-111 11111	1
Deal	Under 1 year.	1 1 1 2 1 1 2 1 1 1 1	6
	All ages.	-00000-4 0000-	3
	Cause of Death.	Influenza Phthisis (Pulmonary Tuberculosis) Cancer, malignant disease Organic Heart Disease Bronchitis Diarrhœa and Enteritis Nephritis and Bright's Disease Congenital Debility and Malformation, including Premature Birth Violent Deaths, excluding Suicide Other Defined Diseases Diseases ill-defined or unknown Poerperval Fency	

Infant Mortality during the Year 1913.

Nett deaths from Stated Causes at various Ages under one Year of Age.

				Show !		
Total Deaths under One Year.	1	63	1	0101	1	6
-8-12 months.	:	:	:	11	·	:
.edmonths.	:	1	:	::		1
3-6 months.	:	:	:	::	1	1
1-3 months.	-	:	:	::	:	1
Total under I month.		1	1	8181		9
3-4 weeks.	:	:	:	::	:	:
2-3 мескв.	:	:	:	::	:	:
I-2 weeks.		-	:	::	:	1
Under 1 week.	:	:	1	0101	:	2
	:	:	:	sn	:	
	:	:	:	Premature Birth Atrophy, Debility and Marasmus		
Death	:	(su	:	and N	:	
Cause of Death.	:	Ill for	:	irth	:	
Cause	80	nia (a		Tre B	nses	
	Brochitis	Pneumonia (all forms)	Atelectasis	Premature Birth Atrophy, Debility	Other causes	
	Br	Pn	Ate	Pr	Oth	

Births in the year (Legitimate, 179.

Deaths [9.

Report of Sanitary Inspector.

For the Rural District of Hatfield, for the Year 1913.

HOUSES-		INS	PEC	TION	S.			Number of Premises Inspected.
Houses inspe	ected in	routi	ne					491
Do. re-in:	spected							369
Do. inspe	ected on	com	plaint					21
	infectio			, visits	to			8
Common Loc	dging-ho	uses	inspec	ted				2
Common Yar					pecte	d		491
SCHOOLS-Vis	sits to							8
TRADE PREM								8
								8
TRADE PREM	WISES.	-						
TRADE PREM Bakehouses	MISES							8
TRADE PREM Bakehouses Laundries Cowsheds	MISES		1000			110993		8 4
TRADE PREM Bakehouses Laundries	wises						1000	8 4 30
TRADE PREM Bakehouses Laundries Cowsheds Slaughter-hor	wises hops					:::		8 4 30 3
TRADE PREM Bakehouses Laundries Cowsheds Slaughter-hou Other Works	wises shops places							8 4 30

NEW OR REMEDIAL WORKS.

HOUSES-

Houses erected, 32; Placed in Habitable Repair, many; Houses Disinfected, 8; Cleansed, 120; Houses in which Overcrowding Abated, 8; Walls, damp and defective, remedied, 120. Roof, guttering, or spouting, repaired, 60. Windows made to open, 20; Lighting improved, 20; Ventilation improved, 20.

DRAINAGE-

Privies abolished, 4; Repaired, 2; Ditto changed to pail-closets, 4; Changed to water-closets, 30; Pail-closets, new, 20; Water-closets to old houses, 31; Cisterns and flushing apparatus repaired, many. Urinals repaired, 2. Drains newly constructed, 39; Ditto tested by water, 39; Houses connected to sewers, new houses, 12; Old, 39; Cesspools emptied, 15.

WATER-

Wells cleansed or repaired, 3; Samples of water taken for analysis, 3; Houses connected with water mains, new, 30; Old, many.

YARDS-

Yards paved, many; Repaired, many. Ashpits removed, 2; Sanitary dustbins provided, 20. Accumulations of manure, etc., removed, 12. Erections in yards removed, 2.

TRADE PREMISES-

Factories, ventilation improved, 1; Workshops cleased or limewashed, 20; Bakehouses ditto, ditto, 8.

FOOD-

Carcases inspected, 80; Condemned, or partly so, 1; Samples of milk taken, 6; Convictions for adulteration or otherwise, none.

VARIOUS-

Cases in which infected bedding destroyed, one. Temporary or moveable dwellings inspected, 3. Birds and animals improperly kept removed, cases, fowls and pigs; numbers, 6.

(Signed) H. T. SIDWELL, F.I.S.E., Mem.S.E., M.I.Mun.E.,

District Surveyor and Inspector of Nuisances.

Hatfield,

Feb. 11th, 1914.