[Report 1900] / Medical Officer of Health, Jarrow Borough.

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BOROUGH OF JARROW.

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR 1900,

BY

J. M. NICOLL, M.B., C.M., Edin.

Jarrow-on-Tyne:
Printed by the "GUARDIAN" Ltd:, Grange Road and
Walter Street.

1901.

To the Chairman and Members of the Sanitary Committee.

—o—

GENTLEMEN,

I beg to present you with my Seventh Annual Report—the 27th of the series.

We again occupy a favourable position as regards our Mortality Rates.

Last year, I had to bring under your notice the unsatisfactory scavenging of the town. Since then, there has been an improvement, which I hope will be permanent.

I am, Gentlemen,

Your obedient servant,

J. M. NICOLL.

Jarrow, February 11th, 1901.

HEALTH REPORT, 1900.

Area of Borough.—1,064 acres.

Density of Population, 38·53 per acre.

There were 127 houses added to the Borough during the year, 104 being tenements and 23 self-contained.

VITAL STATISTICS.

Population.—The population to the end of June is estimated at 41,000, and on this basis all the subsequent calculations are made.

Births.—There were 1,185 births registered during the year, being 17 less than last year, the birth-rate per 1000 of the population being 28·9, as compared with 30·0 in the previous year. This is the second occasion during the last ten years on which our birth-rate has fallen below 30 per 1000, the first being in 1896, when the rate was only 28·3. Our birth-rate, like that of the country generally, show a large and persistent decrease. The following table compares our birth-rates for the last three decades, and also shows the rate for each year in the last decade.

BIRTH-RATES (JARROW) PER 1000 OF THE ESTIMATED POPULATION.

Mean, 1871-80	45·2
,, 1881-90	40·5
,, 1891-1900	32·0
1891	38·1
1892	35·7
1893	35·8
1894	30·5
1895	30·9
1896	28·3
1897	32·2
1898	30·2
1899	30·0
1900	28·9

The birth-rate for the country generally, *i.e.* England and Wales, was 28·9, the lowest on record. The average rate for the smaller towns among which we are grouped was 29·3. The rate for the administrative County of Durham, according to statistics forwarded by Dr. Hill, was 35·0.

Of the births registered in the Borough, 34 were returned as illegitimate, being equal to 2·8 per cent., as compared with 2·2 per cent. last year. Of the total births, 594 were males, and 591 females.

Deaths.—There were 645 deaths registered as having occurred within the Borough during the year. In addition to this, there were 43 deaths which occurred at Harton Workhouse, and six at Sedgefield Lunatic Asylum among the inmates belonging to Jarrow, which gives a total of 694. Deducting from this two which were non-residents, and which occurred one each at Harton Workhouse and Floating Hospital, we get a corrected total of 692, representing a death-rate of 16·8 per 1000, as compared with 17·5 last year. This is the third lowest recorded death-rate, the two previous records being in 1894 and 1897, when the rate was 15·5. Fifteen deaths were registered as having occurred in Public Institutions within the Borough, viz., 7 at Palmer Memorial Hospital, 7 at Primrose Hill Hospital, and 1 at Floating Hospital, Jarrow Slake. Our death-rate of 16·8 compares favourably with that of the country generally, which is 18·3, with that of the large towns, which is 19·5, and with the smaller town rate, which stands at 18·1. The rate for the county is 18·6

In the following table the death-rate for the last three decades is shown, as well as the yearly death-rate occurring during the last decade.

DEATH-RATES (JARROW) PER 1000 OF THE POPULATION.

Mean of Decennium 1871-80	23·9
,, ,, 1881-90	21·1
,, ,, 1891-1900	17·9
1891	21·8
1892	19·1

1893	20·2
1894	15·5
1895	18·3
,, Quinquennium 1891-95	18·1
1896	17·3
1897	15·5
1898	17·0
1899	17·5
1900	16·8
1896-1900	16·8

In comparing these rates, it is worth noticing that we have reduced our death-rate by no less than one-fourth for the last decade, as compared with the decade 1871-80. Again, while for the decade 1881-90, there was a reduction of 2·8 per 1000 of the estimated population, as compared with the previous ten years, we have, during the last decade, made a further reduction of 3·2 per 1000, as compared with 1881-90, making a reduction of 6 per 1000 for the last decade, as compared with the decade 1871-80. This is most satisfactory, and rendered more so by examining our death-rates more in detail, for if we take the two five-year periods of the last decade, we find that whereas the death-rate for the first five years was 18·1, for the last five years it is only 16·8 per 1000.

Of the deaths registered in the Borough during the year, 367 were males and 325 females, a proportion of 1135 males to 1000 females.

Coroner's Inquests.—There were 30 Coroner's Inquests held, being 4·3 per cent. of the total deaths, as compared with 5·1 per cent. last year, and 7·8 the year previous.

THE NATURAL INCREASE of the population, or number of births in excess of deaths, was 493, as compared with 500, 519, and 618 in the three years previous.

In the following table the Quarterly Death-rates throughout the year are shown.

Quarterly Death-Rates per 1,000 of the Population, Jarrow.

	Total Death-rate.	Zymotic Death-rate.	Phthisis Death-rate.	Disease of Respiratory System excluding Phthisis Death-rate.	Infantile Mortality Rate.
First Quarter	17·95	1·26	1·26	4·39	96
Second Quarter	18·24	1·75	0·97	5·26	159
Third Quarter	14·73	3·12	0·78	2·04	196
Fourth Quarter	16·58	1·07	0·97	4·29	188
Year	16·81	1·80	1·00	4·00	159

In examining this table, the most striking feature is the very low general death-rate of the third quarter, in spite of this being the quarter in which we, as a rule, have the heaviest Zymotic mortality. Last year, the death-rate for this quarter was 20·0. It may also be noted how the first two quarters of the year show very much higher death-rates than the last two; this, no doubt, is due a great deal to climatic conditions, the very mild weather of the autumn and early part of this winter being in striking contrast to the severe conditions prevailing at the end of last winter and the early spring. The usual Autumnal Diarrhœa leaves its impress on our Zymotic mortality for the third quarter, as is shown by the very much comparatively higher rate. The rate is also increased by the Enteric deaths, six out of the ten deaths from this cause occurring during this quarter. The rates for the other three quarters are fairly low, and are chiefly due to Measles and Whooping Cough. The Phthisis Death-rate of 1·0 per 1000 per annum, as against 1·12 last year, and 1·79 the year previous, shows an improvement. The rate varies from 1·26 the first quarter to ·78 the third. Disease of the Respiratory System, excluding Phthisis—chiefly Bronchitis and Pneumonia—shows a rate of 4·0 per 1000 per annum, as compared with 3·70 last year, and 3·07 the year previous. The Mortality was heaviest in the second quarter, and lightest in the third. Of the Infantile Mortality Rate, that of the third and fourth quarters was the heaviest, and was due mostly to Diarrhœa, twenty-two of the twenty-seven deaths from this cause being in infants under one year of age. The rate for the first quarter was exceptionally low.

Infantile Mortality.—There were 189 deaths registered of infants under one year of age, equivalent to 27·3 per cent. of the total deaths. Last year, the percentage was 28·9, and the year previous 31·1. Of children under five years of age, there were 291 deaths, being 42·0 per cent. of the whole, as compared with 46 per cent. last year. 46·2 in '98, 47·2 in '97, and 52·7 in 1896.

THE INFANTILE MORTALITY RATE, or the number of deaths under one year to every 1000 registered births was 159, as compared with 168 last year, and 174 the year previous

In the following table the chief causes of death in infants under one year of age are set forth :—

Causes of death in Infants under One Year of Age (Jarrow).

Diarrhœa	22	
Whooping Cough	9	
Measles	2	
		—33
Premature Birth	25	
Congenital Debility	14	
Bronchitis	22	
Pneumonia	23	
Convulsions	18	
Tubercular Disease	11	
Marasmus	10	
Enteritis	5	
Accident	3	
Meningitis	3	
Congenital Syphilis	2	
Other Causes	20	
		—156
		189

Last year, there were 40 deaths from Zymotic Disease of infants under one year of age, this year there are 33. Of the remaining causes of death, it need only be pointed out the large number due to Premature Birth, Congenital Debility, Convulsions, and Inflammatory Disease of the Respiratory System, The Ward distribution of these

deaths was as follows :—Central 45, North 38, East 29, Grange 29, West 27, South 21.

In the following table the average Infantile Mortality Rates are shown for the last thirty years.

Infantile Mortality Rates, Jarrow.

Mean of Decennium 1871-80	175
,, ,, 1881-90	152
,, ,, 1891-1900	158
1891	162
1892	153
1893	150
1894	144
1895	148
,, Quinquennium 1891-1895	151
1896	179
1897	146
1898	174
1899	168
1900	159
,, ,, 1896-1900	165

It is rather disappointing, in comparing the above figures, to find that our Infantile Mortality Rate for the last ten years is higher than that of the preceding decade, the rates respectively being 158 and 152. Why this should be so, or what diseases contributed to the higher rates in the last ten years is impossible now to say, as owing to the method of compiling the death statistics there has been no special return for infants under one year of age; the ages of those dying being grouped as under 5 years, and five and upwards. This year, the Tables issued by the Local Government Board setting forth the cause of death—and which are appended—are much more detailed, and not only classify all the more important diseases in age groups of under 1 year, 1-5, 5-15, 15-25, 25-65, and 65 years and upwards, but also show the Mortality for each disease in each of the different Wards. This will, in future, enable a very much more perfect comparison to be made. If the Infantile Mortality Rate for the last ten

years is examined in more detail, it will be found that dividing it into two five-year periods that the rate for the period 1891-95 was 151, or one less than that of the decade preceding it, while that for the period 1896-1900 is 165, or thirteen more than the average of the preceding decade. In 1896, when our Infantile Mortality Rate was as high as 179, I then, and in subsequent years, gave a table of the chief causes of death in infants under one year. The most striking features in these tables have been the very large proportion of deaths returned as due to Premature Birth, Congenital Debility, and Convulsions, as well as to Inflammatory Diseases of the Respiratory System. Whatever influence sanitary conditions may have on the latter cause, they can have practically none on the first three.

In the following table, the Death-rates and Birth-rates throughout the country are contrasted.

Birth-Rates and Death-Rates per 1,000 of the Population throughout England and Wales, 1900.

	Birth-rate.	Death-rate	Zymotic Death-rate.	Infantile Mortality Rate.
England and Wales ...	28·9	18·3	2·00	154
33 Large Towns ...	29·4	19·5	2·50	172
67 Smaller Towns ...	29·3	18·1	2·25	166
Jarrow	**28·9**	**16·8**	**1·80**	**159**
Durham Administrative County	35·0	18·6	1·72	167

As compared with the average prevailing rates in the Towns and Country generally, we occupy a fairly satisfactory position.

In the following table the mortality occuring in the different Wards of the Borough is shown. In this connection I might again mention that it would be most desirable, to be able to give the Infantile Mortality Rates occuring in the different wards. At present it is impossible to do this, as no Ward return of Births is given. This will in future require to be got as in Table II of the Local Government Board, which is in appendix there is a special column, for births occuring in Wards, which at present can not be filled in.

Deaths and Death-Rates according to Wards.

Ward.	Estimated Population.	Total Deaths and Death-rate.	Zymotic Deaths and Death-rate.	Phthisis Deaths and Death-rate.	Deaths from Inflammatory Diseases of the Lungs & Death-rate.	Deaths of Infants under One Year with Percentage Mortality.
West ...	7400	118 15·94	9 1·21	6 0·81	33 4·45	27 22·88
Grange ...	6400	98 15·31	12 1·87	5 0·78	17 2·65	29 32 22
North ...	6200	127 20·48	19 3 06	9 1·45	32 5·16	38 29·92
South ...	7100	96 13·52	9 1·26	5 0·70	19 2·67	21 21·87
East ...	6300	110 17·46	10 1·58	8 1·26	25 3·96	29 26·36
Central ...	7600	143 18·81	15 1·97	8 1·05	38 5·00	45 32·16

In compiling the above table, I have again given, not only the Mortality Rates—which, owing to the difficulty of estimating the population, might be very misleading—but also the actual number of deaths occurring in each Ward from the diseases specified, so that those interested can at once see the position occupied by each Ward. It will be observed that the Ward with the lowest estimated general death rate—13·5—is the South, followed by the Grange, West, East Central and North, where the death rate reaches the high figure of 20·4. The Zymotic Rate is lowest in the West—1·21—of the estimated population, followed by the South, Grange, East, Central and North, which again heads the list with a rate of 3·06. The Phthisis Death Rate is lowest in the South Ward—·70—followed by the Grange, West, Central, East, and North. Of diseases of the Respiratory System, excluding Phthisis, the rate is lowest in the South Ward, followed by the Grange, East, West, Central, and North; so that all through the North Ward holds the unenviable position of being the most unhealthy.

Fatal Diseases.

DEATHS.	1897	1898	1899	1900
All Causes	574	664	702	692
The Seven Principal Zymotic Diseases ...	63	89	111	74
Smallpox	..	...	...	...
Measles	5	3	32	10
Scarlet Fever	1	...	12	4
Diphtheria, including Membraneous Croup	3	3	5	2
Whooping Cough	7	42	7	20
"Fever"	5	8	10	11
Diarrhœa	42	33	45	27
Septic Diseases	...	...	2	3
Phthisis	56	70	45	41
Bronchitis, Pneumonia, &c. ...	95	120	148	164
Heart Disease	28	41	53	51
Injuries	19	28	28	18
Other Causes	313	316	315	341

As compared with last year, there have been ten fewer deaths registered, whilst among the Zymotic diseases, there have been thirty-four fewer. Measles, Scarlet Fever, Diphtheria and Diarrhœa show the largest reductions, while Whooping Cough shows a large increase. Amongst the other diseases there is a slight decrease in the number of deaths from Phthisis, whilst deaths from Inflammatory Diseases of the Lungs show a considerable increase. There were nine deaths from Influenza, as against eight last year. Under the heading "Injuries" are included deaths from violence of all sorts.

Zymotic Disease.—The number of deaths registered from the seven principal Zymotics was 74, equivalent to a Zymotic Death Rate of 1·80 per 1000 per annum, as compared with 2·77 last year. With one exception this is the lowest recorded Zymotic Rate there has been in the Borough. The years in which the lowest rates occurred previous to this were '97 (1·70), '88 (1·9), '90 (2·15) and last year (2·77). The rate for the 67 smaller towns is 2·25. This is only the third occasion on which our Zymotic Rate has fallen below the average smaller town rate; the two former occasions being 1897 and 1898.

The Zymotic deaths registered were as follows :

Small-pox.	Measles.	Diphtheria including Membranous Croup	Whooping Cough.	Scarlet Fever.	"Fever."	Diarrhœa.
..	10	2	20	4	11	27

Of these deaths, 17 or 22·9 per cent were due to the notifiable diseases, whilst 57 or 77·1 per cent were due to diseases not notifiable.

The percentage mortality of these deaths was as follows :—

Diarrhœa	...	...	...	36·48 per cent.
Whooping Cough		...	...	27·02 ,,
Measles	...	...	...	13·51 ,,
"Fever"	...	...	...	14·86 ,,
Scarlet Fever	...	...	...	5·40 ,,
Diphtheria and Membranous Croup				2·70 ,,

The Ward distribution of the Zymotic Mortality is shown in the following table.

Zymotic Deaths, showing the Wards in which they occurred

Ward	North.	South.	East.	West.	Central	Grange.	Total.
Measles ...	1	3	1	1	2	2	10
Diarrhœa ...	7	1	4	3	9	3	27
Whooping Cough ...	6	4	1	3	2	4	20
Scarlet Fever ...	...	0	2	1	...	1	4
"Fever," ...	4	1	1	1	2	2	11
Diphtheria & Membranous Croup ...	1	...	1	...	...	...	2
Total ..	19	9	10	9	15	12	74

The deaths at Primrose Hill Hospital are considered as having occurred in the Wards from which the patients were removed. The mortality in the East Ward again shows an improvement as compared with that of recent years.

In the following table the Zymotic Mortality occurring since 1871

in England and Wales, the large and smaller towns and Jarrow, is shown and compared.

Zymotic Death-Rate per 1000 of the Population.

	Mean. 1871-80.	Mean. 1881-90.	Mean. 1891-1900.	Mean. 1891-95.	Mean. 1896-1900.	1900.
England and Wales ...	3·38	2·24	2·08	2·01	2·14	2·00
33 Large Towns ..	...	2·90	2·73	2·68	2·78	2·50
67 Smaller Towns ...	3·84	2·38	2·30	2·21	2·40	2.25
Jarrow	**6·14**	**3·66**	**2·84**	**3·34**	**2·34**	**1·80**

In comparing our Zymotic Rates with the average rate for the smaller towns, it may be pointed out that while for the first of the three decades shown in the table our Zymotic Rate was 2·30 per 1000 of the estimated population higher, for the last decade it is only ·54 higher, while for the last five years of the decade we are actually ·06 *lower*. Again, while the average rate for the smaller towns has been reduced during the last decade by 1·54 per 1000, as compared with the period '71-'80, we have during the same period reduced our Zymotic Rate by 3·30 per 1000.

Smallpox.—For the fifth year in succession the Borough has been free from this disease.

Plague.—Considering the possibitity of this disease being introduced into the Borough, the Hospital Committee considered what steps ought to be taken to provide the necessary accommodation in the event of an outbreak occurring. This question was also being considered by the neighbouring authority of South Shields, which, from its position, is much more liable than we are to have the disease introduced. As the result of an interview I had with Dr. Turnbull, of South Shields, it was decided to get as many of the Sanitary Authorities on the river as possible to approach the Tyne Port Sanitary Authority and lay the suggestion before them, that if the Tyne Port Sanitary Authority undertook to isolate in their Hospital all cases of Plague occurring in their own and the other districts represented, the other Authorities in return would take over all the other cases of Infectious Disease with which the Tyne

Port Sanitary Authority might have to deal, This was ultimately, with the sanction of the Local Government Board, agreed upon, and it has undoubtedly saved a very considerable amount to some of the Authorities, who, from their position, were almost bound to provide Plague Hospitals.

Measles.—This disease was present in the Borough during the whole year, being a continuation of the epidemic of the previous year. The prevalence of the disease can be fairly well traced by the notifications of the School Board Authorities, which were as follows : January 29, February 5, March 7, April 7, May 26, June 19, July 59 August 19, September 1, October 2, November 13, December 12. It was not confined to any particular locality, but was general throughout the Town. It was not thought necessary to resort to school closure, but owing to the increasing prevalence of the disease during the summer holiday, it was considered advisable to prolong that of the Infant Departments by another fortnight. This was done and on their reassembling we had very few more cases notified. The disease had almost entirely disappeared, when it was again introduced into the Borough, and, Monkton School becoming infected, its Infant Department was closed on the 1st December, and afterwards on the 13th the remainder of the School, for a period extending to the end of the Christmas Holiday. It did not stop here, as early in the present year both the Grange and Croft Terrace Schools became infected. In the two latter cases, the School Board Authorities adopted the plan of excluding at once the whole class in which the disease broke out, for a period of a fortnight or longer if necessary. How far this plan will act in helping us to deal with the Measles epidemics is yet premature to say. It is however, worthy of trial, and the School Board Authorities may be congratulated on its adoption.

The Ward Mortality was as follows :—North, East and West 1 each, Grange and Central 2 each, South 3.

The death-rate per 1,000 of the population was ·24 as compared with ·80 last year. That for the smaller Towns was ·51, and for the Administrative County ·20.

Scarlet Fever.—We have had this year with one exception, the largest and most wide-spread epidemic of Scarlet Fever, ever experienced in the Borough. There were 286 cases notified, the number last year being 231. The number of notifications received each month was as follows :—January 26, February 22, March 14, April 26, May 10, June 8, July 29, August 28, September 31, October 27, November 28, December 37. Only in May and June did the epidemic show signs of abating, but this unfortunately was not maintained, as in July the disease showed increasing prevalence, which continued right up to the end of the year. It was not confined to any special part of the Borough, but was more prevalent in the Grange, East and South Wards, as can be seen from the following table, which shows the Ward distribution of the disease :— Grange and East Wards 57 cases each, South 50, West 47, Central 40, North 35.

It did not appear to have any connection with our milk supplies, neither did school life appear to have much influence on its spread, indeed the number of notifications received during August when the Schools were all closed was among one of the largest.

It is rather disappointing, that in spite of Hospital isolation, which was carried out to the utmost possible extent of our accomodation, and other means taken to isolate the disease, that we should have it amongst us in epidemic form for nearly two years. Every case that was at all likely to be a scource of danger to others was promptly removed to Hospital, houses and bedding were disinfected as far as circumstances would permit, and though at first this did appear somewhat to check it, later on it broke out with renewed vigour. I believe this disease is largely propagated by the occurence of large numbers of mild and even abortive cases. The first class of case is so mild that as a rule no medical advice is sought, the symptoms being set down as an ordinary cold, which in due course, passes off ; the patient probably all the time attending school, or at any rate mixing freely among other children. It is only some time after when desquamation appears that the true nature of the disease is suspected. There was more than one instance where children had been

sent home from school in the desquamating state, and whose history when enquired into left no donbt whatever, but that they had Scarlet Fever. I believe these mild cases are largely responsible for the continuance of the epidemic and are much more numerous than supposed. Again we have the cases which appear to be only a sore throat, but very soon after some other members of the family develop Scarlet Fever, though the first case of what only appears to be a sore throat, never exhibits any furthur symptoms. These "sore throats" are probably abortive attacks of Scarlet Fever sufficient to infect others, but by some means or other suddenly cut short.

There were only four deaths due to it, the death-rate per 1000 of the population being ·09 as compared with ·30 last year. For the County the rate was ·20, while that of the Towns was ·12.

The case mortality was 1·3 per cent as compared with 5·1 last year.

Of the 286 cases, 171 or 59·7 per cent were removed to Hospital. There were 2 deaths in the Hospital, equal to a case mortality of 1·1 per cent as compared with 1·6 per cent among the home treated cases.

I have already stated that with one exception, there has been more cases notified this year than any other. The exception was in 1882, when 323 cases were notified, and it may be interesting to compare the mortality then and now. In 1882, there were 74 deaths from Scarlet Fever, equal to a case mortality of 22·9 per cent., as compared with 1·3 per cent last year. In 1882, the death rate per 1000 of the population from Scarlet Fever alone was 2·85; this year it is only ·09. Comment is needless.

Enteric Fever.—There were 56 cases of this disease notified, the number being the same as that of last year. The notifications received each month were as follows:—January 4, February 4, March 1, April 1, July 1, August 9, September 17, October 12, November 4, December 2. The Ward distribution was—North 15, Central 14, West 10, East 7, Grange 6, South 4. It will be observed that May and June were the only months in which there were no notifications received, also that the usual Autumnal increase is very evident.

The North Ward had the largest number of cases, followed by the Central, West, East, Grange, and South. Last year, the distribution of the disease was as follows:—Central 16, South 14, West 10, North and East 6 each, Grange 4, so that as regards the North Ward its position is practically reversed this year. The 56 cases notified represent 42 centres of infection, in some of the houses there being two or more cases notified. In enquiring into the probable cause, our water and milk supplies can again, I think, be excluded. The water, because if water-borne, it would hardly have been so limited; and our milk, as there was no special incidence of the disease on any of our supplies. In enquiring into the local sanitary conditions—apart from cleanliness—almost all the places where the disease occurred were provided with box-closets and cemented yards, the old-fashioned privy-midden being very much the exception. With the exception of one house where a bath waste pipe went direct into the drain without any trapping, there was, in no no other instance, a case of where there were any house drains, beyond, of course, the ordinary drain leading from the yard. These were tested, and with one or two exceptions nothing defective was found. It is, however very doubtful how far Enteric Fever is caused by a defective drain, and especially when it has no connection whatever with the inside of a dwelling, and is usually a good distance away from it. Again, taking the condition of the houses and surroundings as reflected by the habits of the people, there were a few instances where the conditions were notoriously filthy. These were, however, very much the exception, and in fully 50 per cent. of the cases the conditions, as far as the habits of the people were concerned, were all that could be desired. The probability is that we have an infected soil. It is a well established fact that the bacillus of Enteric Fever grows in the soil, reaching a maximum period of growth and infectivity, and so accounting largely for our Autumnal increase. Enteric Fever in itself, almost more than any other disease, shows exceeding great variations. What is known as Ambulatory Typhoid is a well marked type—a patient having Enteric Fever, but at the same time going about, may be for weeks, attending business much as usual, but as far as he knows only feeling out of sorts, with nothing to indicate to the patient

the real state of affairs. Such a person, in certain circumstances, may be the means of indefinitely spreading the disease. During the year several such cases came under notice, the patients, of course, up until such time as the disease was diagnosed, continuing to use the ordinary earth-closet. Now, this closet is emptied every week, and no matter how carefully it is done, some of the contents will be strewn about the street, and in such a way the bacillus may get implanted in the soil, ready to propogate the disease when conditions are favourable for so doing, or perhaps may get carried about in the form of "dust." Not only is the closet, in such circumstances, a danger to the community at large, but it is a greater danger to those using it, they, of course, being more liable to get the disease from an infected closet. I have no doubt but secondary cases arising in a house or family, do often arise in this way. That we have some very radical defect in our sanitary system is shown by the marked tendency of Enteric Fever to increase in recent years. It may be again as well to emphasise the fact, as it can't be too often repeated, that Enteric is purely a "filth disease," and the more cleanly our houses, yards, streets and lanes are kept, the more will that be reflected in our immunity from Enteric Fever occurring under local conditions.

Of the cases notified we had two very distinct groups of cases, one in the North Ward, the other in the Central. The cases in the Central Ward occurred early in the year; those in the North Ward towards the autumn. In the Central Ward the first case occurred in a patient of most dirty habits, who had come from Gateshead. She was visited by neighbours adjoining in the lane, with the result that besides the original case we had four more, three in one family and one in another. In the North Ward we had six centres all adjoining, with a back lane common to all. These six centres were responsible for thirteen cases, in one house the whole family of six becoming infected. The conditions in this lane, though not of the best, was on the whole, satisfactory. The disease was in some of the cases, I believe, got by visiting, but it is quite probable that it might have been got through infected soil or air.

The Ward Mortality was as follows: North 4, Grange 2, South,

East, West and Central, 1 each. The "Fever" rate was ·26 per 1000 as compared with ·25 last year. For the County the rate was ·18, and for the smaller towns ·19.

Of the 56 cases, 32 or 57·1 per cent. were removed to Hospital, the case mortality there being 15·6 per cent as against 16 6 per cent among the home treated cases. The total case mortality was 16 per cent.

Continued Fever.—Of this disease there were eight cases notified, as against two last year. Seven of the cases were notified in August, and one in September. The Ward distribution was—Central 4, East 3, Grange 1. There was one death from it, which is included under the general term "Fever."

Diphtheria.—There were 8 notifications of this disease received and 2 of Membranous Croup. The monthly notifications were:—January 3, June and December 2 each, April, August and November 1 each. The Ward distribution was North 2, East 3, West 2, Central 3. There were two deaths, which occurred one each in the North and East Wards. The death-rate per 1000 of the population was ·04 as compared with ·12 last year. The rate for the Towns was ·29, and for the County ·10.

Whooping Cough.—There were twenty deaths from this cause, the greater number of which occured in the earlier part of the year. The Monthly Mortality was as follows:—February 2, March 2, April 4, May 5, June 2, July 2, August 1, December 2. The Ward Mortality was as follows:—North 6, South and Grange 4 each, West 3, Central 2, East 1. The death-rate per 1000 of the population was ·48, as compared with ·17 last year. The rate for the Smaller Towns was ·34, and that for the County ·43.

Diarrhœa.—There were 27 deaths from this cause, as compared with 45 last year. Twenty-two of these deaths were in infants under 1 year, three in children between 1 and 5 years, and two in adults, one being over 65 years of age. The Ward Mortality was as follows —Central 9, North 7, East 4, West and Grange 3 each, South 1. The death-rate per 1000 of the population was ·65, as compared with

1·12 last year. The rate for the Smaller Towns was ·81, and that for the County ·59.

It may be pointed out that the Local Government Board, at the suggestion of the Incorporated Society of Medical Officers of Health, have this year adopted a different classification, separating Diarrhœa from Enteritis. A memorandum on the subject is enclosed with this report for the benefit of the Medical Practitioners of the district.

Infectious Diseases' (Notification) Act.—There were 390 Notifications of Infectious Disease received at the Health Office during the year, as compared with 348 last year. For details see appendix.

Hospital.—The following table shows the admissions, recoveries and deaths in Hospital, along with the percentage Mortality occurring there.

Disease.	Admitted.	Recovered.	Died.	Mortality per cent of Admissions.
Scarlet Fever	172	170	2	1·1
Enteric Fever	33	28	5	15·1
Total	205	198	7	3·4

Owing to the very severe epidemic of Scarlet Fever, and the endeavour to curtail its spread by means of Hospital Isolation ; the admissions to Hospital greatly exceeds that of any previous year. Last year the total number of cases admitted was 185, which up to that time was our record. This year there were 172 Scarlet Fever patients admitted as against 160 last year, the largest numbers prior to this of Scarlet Fever being 143 in 1892, and 105 in 1893. There were 33 Enteric patients admitted, the largest number in any one year except 1893, when 56 patients were admitted. With a view of checking the Scarlet Fever Epidemic, every endeavour was made to isolate the cases as far as possible in the Hospital. This at first seemed to be fairly effective, and during May and June the disease subsided very considerably, but broke out in July with renewed energy, and continued so right up to the end of the year. As a consequence our Scarlet Fever Wards, which were fairly full at the

commencement, were very much overcrowded towards the end of the year. In fact, towards the latter part, it was sometimes extremely difficult to accommodate all the cases we had on hand. One had however to consider whether it was better, to perhaps overcrowd these patients in Hospital for a short time, where they were well nursed and cared for, than to leave them in houses of one or two rooms, only too often under conditions and surroundings of the most unfavourable description, with sick and well practically living together, and with all the probabilities of an unlimited extension of the epidemic. I considered that of the two evils the former was the lesser, and acted accordingly. That Hospital Isolation is the only sure way of cutting short or putting down these epidemics, there can be no doubt, and if it was not for this the epidemic would undoubtedly have been much more extensive. It is hardly necessary to state that Mrs. William, the Matron, and our nursing staff have had a very busy time of it, and have done during the year a lot of very hard work. It is, however, satisfactory to state that in spite of all this amount of work, and the congested state of our Wards, that the Mortality was at the very low rate of practically 1 per cent., it being 1·1. There were only two deaths from Scarlet Fever, and both of these cases were of the malignant type, the patients dying shortly after admission, despite all care and treatment. All the others admitted — though some was most severe — recovered. That the Hospital is doing a large amount of good work in a very unostentatious way may be gathered from the following figures. During the last seven years—the period I have been in charge—our Mortality there has averaged for Scarlet Fever slightly over 1 per cent., for the same time the Mortality of the home-treated cases has averaged 4 per cent. Again with Enteric Fever, the percentage Mortality for the same period being Hospital thirteen per cent, home-treated cases eighteen per cent. There can be no question that this is entirely due to the better nursing arrangements and better facilities in Hospital. I hardly think our nursing staff could have a very much better tribute. I believe our Mortality will compare favourably with that of any similar institution. We had unfortunately during the year two of our Nurses laid up, one with Scarlet Fever and the other with

Enteric. Both recovered. This however rather handicapped us, owing to the great difficulty of securing suitable Nurses for a Hospital of this kind.

I must congratulate the Committee on the disinfector which they have erected at the Hospital, and which will very soon be in working order.

Owing to the want of accommodation in the administrative building, it has been decided during the year to add considerably to them.

The advantages of telephonic communication with the Hospital has again been demonstrated.

I should like to draw the attention of the Committee to the system of "visiting" in vogue at the Hospital. The visitors are, of course, only allowed to see the patients through the windows. Each patient is allowed to have two visitors twice each week, and they are allowed twenty minutes at each visit. For patients who are convalescent it does not much matter, but for patients who are seriously ill, and especially in the case of little children, such visits upset them very considerably. It has over and over again happened that children who were getting better, and were progressing favourably and quite happy and contented, were, at the sight of their friends, so much excited as to do themselves positive harm, and often so much upset as to cry for hours afterwards.

General Sanitary Work.—Owing to the large number of cases of Infectious Disease notified, as well as the large number removed to Hospital, Mr. Batey's time has been very largely occupied in superintending removals, disinfection, and the supervision of cases left at home. For breaches of the Public Health Acts he served 487 notices on owners or occupiers of property. Details regarding these will be found in his Report which is appended. Owing to the complaints made regarding the sewer emptying into Jarrow Slake, from the houses at the Quay Corner, it was decided to extend this sewer so that it should empty permanently into the river at the level of ordinary tides. Previous to this it only emptied at the level of high water spring tides. Though the sewer only carried ordinary

slop water, during the summer season especially it was a source of annoyance to those engaged on the timber ponds at the Slake. By way of precautions against Infectious Disease, no less than 472 children were excluded from school for notifiable disease, whilst for diseases notified by the School Board Authorities, no less than 749 were excluded, making a total of 1221. The cases notified by the School Board Authorities were as follows ;—Whooping Cough 263, Measles 199, Chicken-pox 85, Mumps 58, Ringworm 36.

Insanitary Property.—The difficulties of dealing with insanitary property have been repeatedly mentioned in these Reports, especially in dealing with certain sections of the population who uniformly inhabit the oldest and generally the worst parts of the town. Their destructive and dirty habits make it most difficult to keep this property in a satisfactory condition. I think very much more might be done if property owners or their agents would help the Sanitary Authority by letting these people know that if their habits were not improved they would have to find accommodation elsewhere. During the year, in some instances, one or two owners were warned that owing to the habits of the people occupying their property it was approaching such a state as to be unfit for habitation, and that unless steps were taken to have matters altered a closing order would be asked for against the property in question. Acting on this informal notice steps were at once taken by the owners and the matters complained of remedied ,the occupiers being promptly ejected. I think in future, while not by any means relieving the owner of his responsibility, that very much more attention should be given to the occupiers, where in any case their habits are becoming offensive. In recent years, owing to the pressing nature of other duties which require more immediate attention, it was quite impossible for this to be done systematically, but now that our Staff is to be increased I trust that a systematic inspection, not only of all yards and outhouses but also of the houses themselves, will be carried through, and that most rigid steps will be taken to deal as far as possible with this class of people whose habits not only disgrace themselves but also their town; as well as being a constant menace to the health of the district. That we have a fairly large number of such

people was very conclusively shown, to those Members who accompanied the Sanitary Committee in its tour of inspection round the town during the year. Though the object of that inspection was not primarily for the purpose of finding out these people, they were unfortunately so much in evidence that the difficulty was not in finding them out, but rather avoiding them. As the result of that inspection notices were served on several property owners to remedy insanitary conditions such as badly cemented yards; leaking privies, etc., or other defects in their property. That these owners knew that the Committee was in no mood to be trifled with was shown by the promptness with which most of the notices were obeyed. That the inspection very strongly strengthened the hands of the officials there can be no doubt. There were during the year 86 defective yards cemented; in the ensuing year I trust that many more will be treated in the same manner, as there are still a very large number in the Borough where this could be done with advantage.

Scavenging.—Last year I reported very unfavourably on what appeared to me to be the very inefficient scavenging of the Town. As the result of that report and also on representation from the Local Government Board on the matter, there was a special inspection made of the Town by the Sanitary Committee, some members of whom did not consider my report was justified. In that inspection there was a good deal discovered, but at the finish of it the feeling of the majority of the Committee was that the scavenging was most certainly far from satisfactory and that something more would have to be done, a report to this effect being sent to the Local Government Board. Since making my last report and especially about the time of that inspection there can be no denying the improved conditions in the matter complained of. I only hope the improvement will be permanent; though the fact can not be overlooked that there have been several complaints since regarding the dilatory way the lanes have been swept after the night soil carts have been round. It is most important that the scavengers should immediately follow the soil carts and sweep up at once any refuse left. As regards the scavenging generally, I am of opinion that in these congested areas nothing short of having the lanes scavenged every other day will be entirely satisfactory.

Removal of Refuse Excrement.—Considering the nature of the work, this is on the whole satisfactory done, the earth-closets being emptied once a week, and the large privy middens once a month. Complaints have occasionally been made of negligence in this respect. This will occur, I daresay, under any circumstance. If, however, the persons who have been so neglected would at once report to the Sanitary Office, the matter would at once be remedied. I consider those who complain that their middens have not been emptied for as many months are really as much to blame as the contractors.

Privy Middens.—Seventy of these were removed during the year and eighty-four box-closets substituted.

Earth Closets.—As I daresay every one knows these have been gradually substituted for the old fashioned privy middens. That the change has been one of unmixed good is very doubtful. As between an ordinary privy midden and a well kept earth closet there can be only one opinion and that entirely in favour of the closet, but there are earth closets and earth closets. An earth closet to a certain extent requires to be looked after, a privy midden requires none beyond the emptying of it. Here we have had the greatest possible difficulty in preventing people putting fluids—beyond those that should go—into the closet. Again, often as not in some districts, it is regularly used as a urinal. In warm weather, when ashes are scarce, even the normal amount of fluid, which should go in, is not absorbed, with the result that almost at all seasons, a very large number of these closets soak out into the adjoining lane, tainting and infecting both soil and air. This of course only occurs where gross carelessness, ignorance, or both combined exist. Proceedings have been taken over and over again, but owing to the trifling penalities inflicted in these cases, no benefit has occurred. Again, these closets may be very thoroughly emptied, but no one can for a moment say, that they are ever properly cleaned. Owing to their construction this is practically impossible. There they are, constantly more or less filth stained and becoming more saturated each year. Then, again, their very emptying means a more or less touling of the adjoining lanes once every week, as it matters not what care is taken in emptying them, some of

the contents will get scattered about. These latter objections to our closets, hold good under any circumstance or condition. Whatever improvement they may be on the privy midden, I hardly think we have reached finality in this matter. Neither is it a matter which should be allowed to rest, as if we can adopt any better means for excrement removal, the sooner it is done, or commenced with, the better. I have already mentioned the fact that Enteric Fever is tending to increase in the Borough. How far this has to do with our system of excrement removal, it would be unwise at present to say, but they are suggestive. The only other alternative to the earth closet is, of course, the water carriage system, which I think ought to be applied, at any rate, to all new houses being built in the Borough.

For actions under the Foods and Drugs Act, for Precautions against Infectious Disease, and for Inspection of Dairies, Milk Shops, Cowsheds, Lodging Houses, &c., &c., as well as for proceedings before Magistrates, see Inspector's Report.

TABLE 1.—For Whole District.

Year.	Population estimated to Middle of each Year.	Births.		Deaths under One Year of Age.		Deaths at all Ages. Total.		Deaths in Public Institutions.	Deaths of Non-residents registered in District.	Deaths of Residents registered beyond District.	Deaths at all Ages. Nett.	
		No.	Rate.*	No.	Rate per 1,000 Births registered.	No.	Rate.*				No.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1890	32000	1283	40·0	214	167	675	21·0	12	...	43	718	22·4
1891	33682	1284	38·1	208	162	696	20·6	9	...	41	737	21·8
1892	34500	1232	35·7	185	153	621	18·0	4	1	40	660	19·1
1893	35860	1284	35·8	193	150	672	17·6	17	4	58	726	20·2
1894	35860	1097	30·5	158	144	518	14·4	5	1	40	557	15·5
1895	35860	1110	30·9	164	148	618	17·2	4	6	46	658	18·3
1896	37000	1058	28·3	190	179	614	16·5	12	4	33	643	17·3
1897	37000	1192	32·2	175	146	550	14·8	8	11	35	574	15·5
1898	39000	1183	30·2	207	174	615	15·7	16	10	52	664	17·0
1899	40000	1202	30·0	203	168	676	16·9	14	12	38	702	17·5
Averages for years 1890-1899.	36076	1192	33·1	189	159	625	17·2	10	4	43	663	18·4
1900	41000	1185	28·9	189	159	694	16·9	15	2	49	692	16·8

*Rates calculated per 1 000 of estimated population.

Area of District in acres (exclusive of area covered by water). } 906.

Total Population at all ages, 33,682.....
Number of inhabited houses, 4,075.....
Average number of persons per house, 8·2
} At Census of 1891.

TABLE II

Names of Localities.	The Borough.				North Ward.				South Ward.				East Ward.				West Ward.				Central Ward.				Grange Ward.			
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.	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*	*a*	*b*	*c*	*d*	*a*	*b*	*c*	*d*	*a*	*b*	*c*	*d*
*1890																												
*1891																												
*1892																												
*1893																												
1894	35860	1097	557	158	5700		119	40	5800		73	20	5700		91	29	6260		100	31	7100		121	25	5300		53	13
1895	35860	1110	658	164	5700		156	44	5800		76	21	5700		109	22	6260		106	32	7100		142	29	5300		69	16
1896	37000	1058	643	190	5850		135	38	6000		80	28	5900		128	35	6450		110	37	7300		130	35	5500		60	17
1897	37000	1192	574	175	5850		94	27	6000		76	28	5900		111	43	6450		99	22	7300		141	40	5500		53	15
1898	39000	1183	664	207	6000		131	46	6400	do.	95	33	6100	do.	126	32	7000	do.	103	35	7500	do.	153	41	6000	do.	56	16
1899	40000	1202	702	203	6100		154	48	6700		115	39	6200		108	36	7300		113	22	7500		137	32	6200		75	26
Averages of Years 1894 to 1899.	37453	1140	633	182	5866	Ward distribution of Births not given by Registrar.	131	40	6116		85	29	5916		112	32	6620		105	29	300		137	33	5633		61	17
1900	37453	1185	692	189	6200		127	38	7100		96	21	6300		110	29	7400		118	27	7600		143	45	6400		98	29

* No record of Ward Mortality kept previous to 1894.

TABLE III.—Cases of Infectious Diseases notified during the Year 1900.

Notifiable Disease.	Cases notified in Whole District.							Total Cases notified in each Locality.							No. of Cases of removed to Hospital from each Locality.						
	At all Ages.	At Ages—Years.						1	2	3	4	5	6	7	1	2	3	4	5	6	7
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards	North Ward.	South Ward.	East Ward.	West Ward.	Grange Ward.	Central Ward.	Total.	North Ward.	South Ward.	East Ward.	West Ward.	Grange Ward.	Central Ward.	Total.
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria	8	...	5	3	...	...	...	2	...	2	1	...	3	8	...	...	...	...	...	...	...
Membranous Croup	2	...	2	..	...	...	...	...	...	1	1	...	...	2	..	...	...	...	...	...	...
Erysipelas	30	2	...	4	12	12	...	12	5	1	5	2	50	30	...	...	...	...	...	...	...
Scarlet fever	286	5	78	182	18	3	...	35	50	57	47	57	40	286	24	36	46	15	22	28	171
Typhus fever	...	...	...	...	..	..	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...
Enteric fever	56	...	9	16	14	16	1	15	4	7	10	6	14	56	11	3	2	5	...	11	32
Relapsing fever	...	...	..	...	...	...	...	...	..	...	...	...	...	...	.	...	...	...	...	...	...
Continued fever	8	...	2	3	3	...	...	...	...	3	...	1	4	8	...	...	...	...	...	...	...
Puerperal fever	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...
Plague	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	390	7	96	208	47	31	1	64	59	71	64	66	66	390	35	39	48	20	22	39	203

Isolation Hospital—Primrose Hill Hospital situated a short distance outside Borough.

TABLE IV.—Causes of, and Ages at, Death during Year 1900.

Causes of Death.	Deaths in whole District at subjoined Ages.							Deaths in Localities (at all Ages).							Deaths in Public Institutions.
	All ages.	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	North Ward	South Ward	East Ward	West Ward	Grange Ward.	Central Ward.	Total.	
Small-pox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles	10	2	8	..	..	..	..	1	3	1	1	2	2	10	..
Scarlet fever	4	..	1	2	1	..	..	..	..	2	1	1	..	4	2
Whooping-cough	20	9	10	1	..	..	..	6	4	1	3	4	2	20	..
Diphtheria and membranous croup	2	..	2	..	..	..	..	1	..	1	..	..	..	2	..
Croup	2	1	1	..	..	..	..	..	1	..	..	..	1	2	..
Fever—Typhus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Fever—Enteric	10	..	1	1	1	7	..	4	1	1	1	2	1	10	6
Fever—Other continu'd	1	..	1	..	..	..	..	..	..	..	..	..	1	1	..
Epidemic influenza	9	..	..	..	1	5	3	1	1	1	3	2	1	9	..
Cholera	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Plague	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diarrhœa	27	22	3	..	..	1	1	7	1	4	3	3	9	27	..
Enteritis	10	5	5	..	..	..	..	1	3	2	1	1	2	10	2
Puerperal Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas	1	..	..	..	1	..	..	1	..	..	..	..	..	1	1
Other septic diseases	2	..	1	1	..	..	..	1	..	1	..	..	..	2	..
Phthisis	42	..	2	5	14	19	1	9	5	8	6	5	8	41	3
Other tubercular diseases	34	11	5	6	3	9	..	4	7	7	3	4	9	34	2
Cancer, malignant diseases	31	..	..	..	..	23	8	5	4	8	8	4	2	31	2
Bronchitis	79	22	9	..	..	23	25	17	10	11	18	7	16	79	4
Pneumonia	73	23	24	2	1	20	3	14	6	13	14	6	20	73	4
Pleurisy	1	..	..	..	1	..	..	..	..	..	..	1	..	1	..
Other diseases of Respiratory organs	11	2	1	..	1	3	4	1	3	1	1	3	2	11	..
Alcoholism	7	..	..	..	..	6	1	..	1	..	5	..	1	7	..
Cirrhossis of liver															
Venereal diseases	2	2	..	..	..	..	..	1	..	..	1	..	..	2	..
Premature birth	25	25	..	..	..	..	..	6	2	3	3	4	7	25	..
Diseases and accidents of parturition.	10	..	..	..	5	5	..	1	3	2	1	3	..	10	..
Heart Diseases	51	1	..	1	2	30	17	11	9	3	6	11	11	51	8
Accidents	18	3	3	4	4	4	..	5	..	5	3	1	4	18	5
Suicides	1	..	..	..	1	..	..	..	..	1	..	..	..	1	..
Rheumatic fever	6	..	..	1	1	4	..	..	..	1	1	3	1	6	..
Congenital Debility	14	41	..	..	..	..	..	..	1	4	2	1	6	14	..
Convulsions	22	18	3	1	..	..	..	3	1	2	2	5	9	22	..
Apoplexy, Hemiplegia, and Cerebral Hemorhage	29	..	..	1	..	21	7	8	5	6	3	4	3	29	1
Morasmus	11	10	1	..	..	..	..	..	3	2	1	3	2	11	..
Meningitis	17	3	9	4	1	..	..	4	1	5	5	2	..	17	1
All other causes	111	16	12	2	3	50	28	15	21	14	22	16	23	111	21
All causes	692	189	102	32	41	230	98	127	96	110	118	98	143	692	82

TABLE V.—Deaths occuring during the year 1900, in the Jarrow Urban Sanitary District, classified according to ages, disease, and the months in which they occurred.

Ages at Death.						Deaths at all Ages.	Months.	Fatal Diseases.																					
													Continued Fevers.																
Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 60.	60 upwards.			Smallpox.	Scarlet Fever.	Diphtheria.	Membranous Croup.	Typhus.	Enteric or Typhoid.	Continued.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	Measles.	Whooping Cough.	Diarrhœa and Dysentry.	Rheumatic Fever.	Phthisis.	Bronchitis, Pleurisy, and Pneumonia.	Heart Disease.	Tubercular Disease other than Phthisis.	Injuries.	All other Diseases.	Total.
6	9	3	4	22	14	58	January	....	....	....	.....	....	.....	.....	....	....	....	....	2	....	....	....	2	19	5	....	3	27	58
7	9	1	2	27	14	60	February	....	....	....	....	....	.....	.....	....	....	....	....	1	2	2	....	7	13	5	1	1	28	60
17	7	4	8	19	11	66	March	....	1	....	....	....	.....	.....	....	....	....	....	1	2	2	1	4	9	3	4	5	34	66
18	16	1	3	26	15	78	April	....	1	....	.....	....	1	.....	....	.....	....	....	....	4	....	1	2	28	7	1	1	32	78
14	7	5	5	17	5	53	May	....	....	....	....	....	.....	.....	....	.....	....	....	1	5	2	1	4	12	7	3	2	16	53
13	10	3	4	21	5	56	June	....	.....	1	.....	....	.....	.....	....	.....	....	1	1	2	....	....	4	12	5	7	....	23	56
19	3	4	3	12	4	45	July	....	2	.....	....	....	.....	.....	....	....	....	....	....	2	2	1	1	7	4	2	....	24	45
21	9	2	3	16	5	56	August	....	....	1	....	.....	2	1	....	.....	....	....	2	1	7	....	4	3	2	2	2	29	56
21	7	3	1	15	3	50	September	....	.....	....	....	....	4	.....	....	.....	....	....	1	....	7	....	3	8	....	5	....	22	50
21	9	2	2	18	4	56	October	....	.....	....	....	....	1	....	....	.....	....	....	....	.....	4	....	5	15	4	1	3	23	56
19	6	3	5	15	10	58	November	....	....	.....	....	....	2	....	....	.....	....	....	....	....	1	1	4	15	4	4	....	27	58
13	10	2	1	22	8	56	December	....	....	.....	....	....	.....	....	....	.....	....	....	1	2	....	1	1	12	5	4	1	29	56
189	102	32	41	230	98	692	Totals	....	4	2	.....	....	10	1	...	.....	....	1	10	20	27	6	41	153	51	34	18	314	692

Summary of work done in the Inspector of Nuisances' Department during the year 1930 in the Urban Sanitary District of Jarrow.

I.—PUBLIC HEALTH ACTS.	No. of Informal Written Notices by Inspector.	No. of Formal Notices by order of Authority.	No. of Nuisances abated after Notice.	General Remarks.
Dwelling-houses—				*Bye-Laws for Prevention of Nuisances.*—Sixteen persons were summoned under Bye Law 3, for permitting Offensive Liquid to run from Box-Closets into Back Streets, convictions were obtained in each case.—8 were fined 2s 6d each, including costs, 5 were fined 5s each, and costs, 3 were fined 2s 6d each, and 7s 6d costs. 1 person was summoned under Sec. 91 P. H. Act, for Insanitary Ashpits, an order was made, with costs, to abate the nuisance. by removing the Ashpits, and building 4 Box-Closets. *Ashpits Altered.*—70 Ashpits were removed and 84 Box-closets substituted. *Infectious Disease.*—390 Certificates were received under this Act. In each case the house was visited, and the person in charge received instructions as to isolation and disinfecting, when the patient was not removed to Hospital. 3 or more visits were made to the house under quarantine, on ascertaining what school the children attended, the school authorities got a notice to prevent children from attending school for a certain time, thus 472 were excluded. *Hospital.*—204 were removed to the Hospital, under my supervision, 749 children were excluded from attending school owing to Measles, Whooping Cough, etc. These notices were sent to the School Board Authorities by an arrangement by the Town Council and the School Board.
Foul Conditions	17	..	17	
Structural Defects	2	..	2	
Lodging-houses, To Limewash	32	..	32	
Dairies and Milkshops	...	..	...	
Cowsheds To Limewash	2	..	2	
Bakehouses To Limewash	5	...	5	
Slaughter-houses To Limewash	25	...	25	
Ashpits and Privies	84	15	84	
Deposits of Refuse and Manure	15	...	15	
Water Closets	3	...	3	
Defective Yard Paving, all Cemented	86	12	86	
House Drainage—				
Defective Traps	3	..	3	
No disconnection from Sewers	1	..	1	
Other Faults	55	..	55	
Water Supply	16	...	16	
Pigsties	19	..	19	
Animals Improperly Kept	3	..	3	
Offensive Trades	...	..	...	
Smoke Nuisances	...	...	...	
Other Nuisances	119	..	119	
Totals	487	27	487	

II.—WATER, FOODS AND DRUGS.	No.	Remarks.
Samples of Water taken for analysis ...		
Samples of Water condemned as unfit for use		
Seizure of Unwholesome Food		
Convictions for exposing or selling unwholesome Food		All genuine, including — Milk 36, Butter 3, Beer 13, Spirits 1
Samples of Food and Drugs taken for Analysis	53	
Samples of Food found Adulterated		Beer was specially tested for Arsenic, no trace of it was found.
III.—PRECAUTIONS AGAINST INFECTIOUS DISEASE.		
Lots of infectious bedding stoved or destroyed	2	25 Houses were disinfected by fumigating with sulphur, all others being 1 or 2 rooned houses and not practicable to fumigate. All washing materials were washed with a solution of disinfectants, supplied by the Corporation, and the rooms thoroughly cleaned.
Houses disinfected after Infectious Disease ...		
Schools do. do. do. ..		
Prosecutions for exposure of infected persons or things		
Convictions for do. do. do.		

EDWARD BATEY, INSPECTOR OF NUISANCES

February, 1901.