[Report 1904] / Medical Officer of Health, Kingsbridge R.D.C.

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Kingsbridge Rural District Council.

MEDICAL OFFICER OF HEALTH'S ANNUAL REPORT FOR 1904.

Gentlemen,—I have the honour to present to you my eleventh Annual Report dealing with the health matters of your district for the year ending December 31st, 1904.

Last year, as you doubtless recollect, I entered at considerable length into a description of the "PHYSICAL FEATURES AND GENERAL CHARACTERISTICS OF THE DISTRICT," touching upon "HOUSE ACCOMMODATION, ITS ADEQUACY AND FITNESS" and "SUPERVISION OVER THE ERECTION OF NEW HOUSES." It is therefore unnecessary for me to recapitulate on these points this year, as the conditions as then described have existed during the period I have now under consideration.

SEWAGE AND DRAINAGE.

The general system of sewage and drainage for the district described in my last annual report remains the same, as consisting of privy middens and dry earth closets for cottages and groups of cottages, and a water-borne system for most of the villages. During the year many "pail closets" have been substituted for the privies, and, where the owners are at all cleanly people, are found a decided improvement.

The Malborough School has, as the result of a recommendation of mine, been re-drained; and at Hope a new sewer is now under construction. Part of the main sewer at Aveton Gifford, which, though comparatively new, was found to be defective, has been relaid in a satisfactory manner.

At Bigbury Rectory the drainage arrangements have been considerably improved, and the adjoining glebe farm court has been provided with drains, the previously existing arrangement being of the most primitive kind. The sewage system of Eston Farm, Bigbury, is being extensively altered, whilst the County Council Authority has under consideration the reconstruction of the drainage of the public school. At East Prawle plans have been drawn for a slop-drain system for a portion of the village, and it is likely that the work will be begun at an early date. This, in my opinion, will confer a distinct advantage on the locality, as heretofore there was no provision for either rain or slop-water, and consequently the road-sides and waste places were utilised for the throwing out of house slops, and so caused a nuisance.

The drainage of Well-street, Loddiswell, though recently undertaken, had proved, owing to defective levels, to be unsatisfactory; it has now been remodelled, with additional provision for storm water.

In the middle of the year I reported unfavourably on the drainage of Sorley Cottage, and the owner is under an order from your Authority to remodel the arrangements.

At Modbury the outfall of the sewer has been improved by removing obstructions in the channel and building up the sides of the ditch through which the sewage flows. The imperfections which this remedies, however, are, in my opinion, very liable to recur, and I cannot but think that this part of the drainage scheme is far from satisfactory.

Slapton.—The better drainage of Rag-lane has during the year been under consideration, but it has been deemed expedient to postpone the matter for a short time.

REMOVAL AND DISPOSAL OF HOUSE REFUSE.

All cottages and isolated houses, together with those in villages, dispose of their house refuse by means of pits, generally covered and often connected with their privies; and eventually use the same for their gardens and farms.

The town of Modbury alone possesses a public scavenger, who collects and removes the refuse at stated intervals.

WATER SUPPLY.

In my last annual report I entered into detail with regard to the water supply of the district.

During this year the only improvements carried out have been the installation of the long-considered public supply for a portion of the village of Slapton, and the repairing of the damaged dip-well which supplies the cottages at Sorley.

The conditions prevailing in Aveton Gifford and Hope, to which I drew attention in my last annual report, remain the same.

During the year I have analysed 11 samples of drinking water from the various supplies, and have rendered you my reports thereon in due course.

SUPERVISION OF LODGING-HOUSES, WORKSHOPS, ETC.

There are no common lodging-houses in the district.

"Offensive trades" are referred to under "operation of the Factories and Workshops Act."

The slaughter-houses, dairies, cowsheds, bakehouses, and workshops have been inspected, and been found generally satisfactory. As regards the cow-houses, I have in previous reports drawn attention to the fact that in many of the farms the paving and drainage of the sheds are far from ideal, and that the statutory amount of air space per animal is often not reached. Fortunately this is compensated by the fact that the animals seldom remain stalled for any length of time.

NUISANCES.

As in previous years, numerous minor nuisances have been discovered in my inspections during 1904, and have mostly in due course been abated under your orders.

Last year I mentioned that one of the most serious

recurring nuisances was that of the pond in Well-street, Loddiswell. I am glad to say that during the year under consideration much has been done to remove this nuisance, but I am afraid not with complete success. In my opinion, until the retaining wall has been made water-tight, the nuisance is liable to recur in dry seasons.

INFECTIOUS DISEASES.

As I stated in last year's report, the means at our disposal of dealing with infectious disease consists in compulsory notification, and as a consequence the domestic isolation of the cases and disinfection of the premises so far as circumstances permit. We still have no isolation hospital, and measles and whooping-cough are not yet scheduled by your authority as notifiable. Owing to the great apathy and ignorance of persons who are responsible for the custody of those suffering from infectious disease in the district, I suggested to your Council the advisability of providing me with circulars setting forth the legal responsibilities of those who offend against the requirements of the Public Health Act, 1875, as touching infectious disease. These circulars have been provided, and are distributed as occasion requires.

In villages where infectious disease is very prevalent, it is often considered advisable, in order to prevent the spread of infection, to close the elementary schools. I would take this opportunity however of pointing out how futile is such a measure unless it is supported by the co-operation of those responsible for the custody of susceptible children, who should not in such circumstances allow them to assemble in any number at private gatherings and public entertainments. Moreover those responsible persons should most decidedly refrain from visiting houses where infectious disease is known to exist.

During the year I have received 44 notifications of the existence of infectious disease in the district, as compared with 46 last year, 39 in 1902, and 49 in 1901.

The 44 cases were made up as follows :—

Diphtheria	... 1	as against	16	last year.
Erysipelas	... 8	"	9	"
Scarlet Fever	... 21	"	14	"
Enteric Fever	... 13	"	5	"
Puerperal Fever	1	"	0	"

Of these 44 cases of notifiable infectious disease, three proved fatal; the one of diphtheria in West Alvington, and two of enteric, one in the Kingsbridge Rural District and one in the Modbury district.

DIPHTHERIA.

In a report of October 28th, I stated that from my investigations I was of opinion that this case was not due to any local insanitary conditions. It appeared to have been one of those cases of a low inflammatory type, difficult or impossible to separate from those of a distinctly specific nature.

Having regard to the comparatively large number of cases of diphtheria to which I had to refer in last annual report, it is extremely satisfactory to find the district this year practically free from this disease.

ENTERIC FEVER.

Of these 13 cases, six occurred in one family in a farm-house in the Kingsbridge Rural District, and I have no doubt that the initial case, which being of a doubtful nature was not at first recognised, infected the succeeding five. I visited the house to investigate the matter, and analysed the water supply, but found no evidence of insanitary conditions, and was compelled to ascribe the primary case to an outside origin, as the patient had been visiting outside the district.

The remaining case in the Kingsbridge district occurred at Sorley Cottages, and certain insanitary conditions were found and reported upon at the time. Up to the present these defects have been only partially remedied.

One case occurred in the Blackawton district in a person who had so recently returned from abroad that I consider he contracted the disease outside the district.

With regard to the two cases in the Modbury district, though no very serious sanitary defects were discovered, it was significant that the persons affected inhabited adjoining houses, and measures were taken to perfect the sanitary arrangements of their dwellings. The water supply was not above suspicion, as upon the first analysis it was found to contain organic matter: a subsequent analysis showed the water to be of fair quality, leading one to conclude that the supply was open to superficial contamination.

The remaining three cases, two in the West Alvington district, and one in the Stokenham district, had in my opinion no local insanitary conditions to account for them.

ERYSIPELAS.

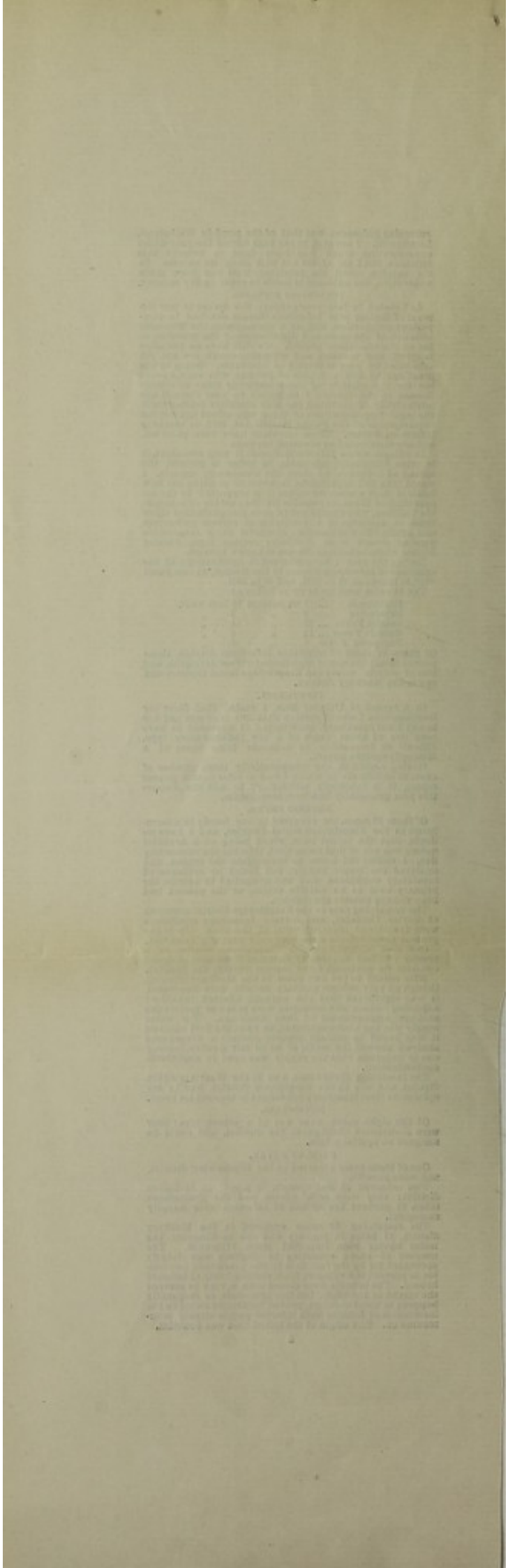
Of the eight cases, none was of a severe type: they were distributed throughout the district, and could be assigned no special origin.

SCARLET FEVER.

One of these cases occurred in the Blackawton district, and was sporadic.

Two occurred at Malborough, in the West Alvington district: they were both adults, and the precautions taken to prevent the spread of infection were happily successful.

The remaining 18 cases occurred in the Modbury district, 17 being in Bigbury and one in Kingston, the latter having been imported from Plymouth. The number of cases occurring in Bigbury was largely accounted for by the fact that it was practically impossible to prevent the villagers from visiting freely at infected houses. The schools were closed with a view to prevent the spread of infection, but this procedure, as frequently happens in rural districts, proved ineffective owing to the intercourse of healthy with infected people already commented on. The origin of the initial case was doubtful,



SCHOOLS.

During the year I have had occasion to close the following schools for the periods and causes mentioned :—

Charleton	... Chicken pox	... 7 days	from	24th May
"	... Whooping Cough	21	"	28th Aug.
West Alvington	Measles ...	... 10	"	27th July
Bigbury	... Scarlet Fever	... 31	"	15th Sept.
South Milton	... Measles ...	... 14	"	14th Oct.
Malborough	... Measles ...	... 14	"	1st Nov.

On the outbreak of infectious disease in a school district, I find that the managers almost invariably apply to the medical officer of health for authority to close the school, ostensibly with a view to prevent the spread of infection, but I am strongly of opinion that often better results could be obtained by a judicious exclusion from attendance of scholars coming from infected houses : the unaffected children would be safer at school than running about the village, and the process of education would be less interfered with, though the percentage of attendance would not be so good as if the school were closed. By this method two most important results would be attained, viz., the better education of the majority of the children, and the safe-guarding of a larger number from the risk of infection.

OVERCROWDING.

Though I have not had occasion to report to your authority any specific case during the year, I have found many instances where the sleeping accommodation is decidedly meagre. This disadvantage is certainly in an agricultural district minimised by the fact that the occupiers live an outdoor life ; and it is difficult to exercise stringency in dealing with such cases, as the labourer is confronted with a serious difficulty in finding adequate accommodation for himself and a sometimes large family in the vicinity of his work.

INSPECTION.

As in former years I have devoted much time to the systematic inspection of the district. I have found this especially necessary this year, as Mr. Bailey, the inspector appointed by your authority at the beginning of the year, was of course quite ignorant of the systems of sanitation prevalent in the area.

VITAL STATISTICS.

During the year there have been registered 160 deaths at all ages, giving a general death-rate from all causes of 14 per thousand of population, and 138 births, making a birth-rate of 20·8 per thousand of population. There have been registered seven deaths from the "principal zymotic diseases," viz., one from whooping cough, one from diphtheria, two from typhoid, and three from continued fever. The zymotic death-rate is ·61 per thousand of population, as compared with ·44 last year.

The deaths of children under one year as percentage of total deaths is 17·4.

The deaths of children under five years of age as percentage of total deaths is 20·7.

The deaths of children under one year of age as percentage of registered births is 10·2.

The birth-rate is again lower than in the previous year : it is three per thousand less than the average for the last ten years in this district, and six per thousand less than the birth-rate this year in "Rural England and Wales."

The death-rate may be considered satisfactory, as it is one of the lowest recorded, and below both the average for the last decade in this district and the general death-rate for 1904 in "Rural England and Wales," the figures for which are 15·4 and 15·3 respectively.

The zymotic death-rate, though higher than last year, may be regarded as a favourable one.

The mortality of children under one year of age, though considerably higher than last year, does not exceed the average for the last 10 years, nor the rate for "Rural England and Wales," the former being 106 and the latter 125 per thousand of registered births.

The death-rates in the various registration districts for the last ten years is appended hereunder to afford a means of ready comparison. The figures indicate the rate per thousand of population :—

	Black-awton.	Kings-bridge.	Mod-bury.	Stokem-ham.	W. Alv-ington.
1895	17·3	12·8	23·1	24·6	22·1
1896	13·1	8·7	12·9	10·9	15·9
1897	15·8	12·9	17·0	17·7	14·5
1898	15·5	8·8	10·2	13·5	13·4
1899	16·8	9·9	14·2	11·9	13·9
1900	14·7	12·9	11·9	14·04	16.3
1901	13·0	8·9	16·2	14·6	13·9
1902	13·0	10·5	14·8	19·9	11·8
1903	17·4	7·4	11·9	12·7	18·8
1904	13·0	11·3	9·9	19·5	16·6

Of the 27 deaths in the Blackawton district, 16 occurred at the age of 70 or over, and eight at the age of 80 or over, the oldest being 88.

Of the 23 deaths in the Kingsbridge district, 10 occurred at 70 or over, and one over the age of 80.

In the Modbury district, of the 27 deaths 11 occurred at the age of 70 or over, six of these being over 80, and the oldest 94.

Of the 52 deaths in the Stokenham district, 23 or nearly half were 70 or over, eight being 80 or over, and the oldest 92. In the West Alvington district, of the 31 deaths 10 were at the age of 70 or over, half of these at 80 or over, and the oldest 90.

Summarising these figures we find that of the total 160 deaths 70 or 43 per cent. took place beyond the natural expectation of life, and 28 or 17 per cent. at the age of 80 or over.

ZYMOTIC DISEASES.

The fatalities from zymotic disease were distributed evenly throughout the district.

INFLUENZA.

Influenza accounts this year for one death, making six recorded from this disease during the last sixteen years.

PHTHISIS.

There have been registered 13 deaths as resulting from phthisis, occurring throughout the district as follows:—Blackawton, 3; Kingsbridge, 2; Modbury, 1; Stokenham, 3; West Alvington, 4—giving a death-rate of 1·14 per thousand of population, which is not excessive.

In November last, acting under your instructions, I attended, together with your vice-chairman, a local inquiry held at Exeter by the General Purposes Committee of the Devon County Council to consider the question of establishing an isolation hospital for pulmonary tuberculosis only, in the county of Devon.

This inquiry was held under the provisions of the Isolation Hospitals Acts, 1893 and 1901, and by an order of the County Council of the county of Devon, which applied the expression "infectious disease" to the infectious disease known as pulmonary tuberculosis or phthisis. I then reported to you that the inquiry consisted entirely of eliciting the opinions of those persons who happened to attend, as to whether the provision of such hospitals would be of any general utility, and that the medical opinion, though unanimous with regard to the nature of the disease in question, was divided concerning the desirability of establishing isolation hospitals to cope with it.

Personally I am inclined to consider that unless numerous hospitals (one available for every reasonably sized district) could be provided, and compulsory powers be possessed for compelling all cases of phthisis to be isolated in these hospitals, the idea of thus grappling with the disease would prove futile. Such a provision as I have mentioned would involve an enormous outlay, and would be ineffective unless carried out throughout a large area.

CANCER.

For the third year in succession there have been registered nine deaths as due to cancer, occurring throughout the district.

VIOLENCE.

Eight deaths are this year attributed to violence, seven of them being due to accident and one to suicide.

OPERATION OF THE FACTORIES AND WORKSHOPS ACT, 1901.

Under section 132 of this Act, it is my duty as Medical Officer of Health to your Council to report as follows:—I have personally from time to time inspected various workshops and work-places in the district (there are no factories), and as regards (a) general cleanliness, (b) air space, (c) ventilation, and (e) provision of suitable sanitary arrangements, have found them generally satisfactory. (d) "Trades involving wet processes"—The only "offensive trade" carried on in the district is that of a fellmonger, the premises of which have been frequently inspected, and found satisfactory.

There is no register of workshops kept by your authority, and as far as I am aware there is no home work carried on.

Appended herewith is the new table provided by request of the Secretary of State, showing the number of inspections of workshops and work places made during the year, the number of defects found as regards nuisances under the Public Health Acts, and offences against the Factories and Workshops Act, and other matters.

Along with these are also the tabular statements required by the Local Government Board, the contents of which I have furnished to the extent of the information in my possession.

I am, gentlemen, your obedient servant,

WILLIAM HY. WEBB,
Medical Officer of Health.

The Kingsbridge Rural District Council.