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City and County Borough of Lincoln.



# ANNUAL REPORT

OF THE

## MEDICAL OFFICER OF HEALTH

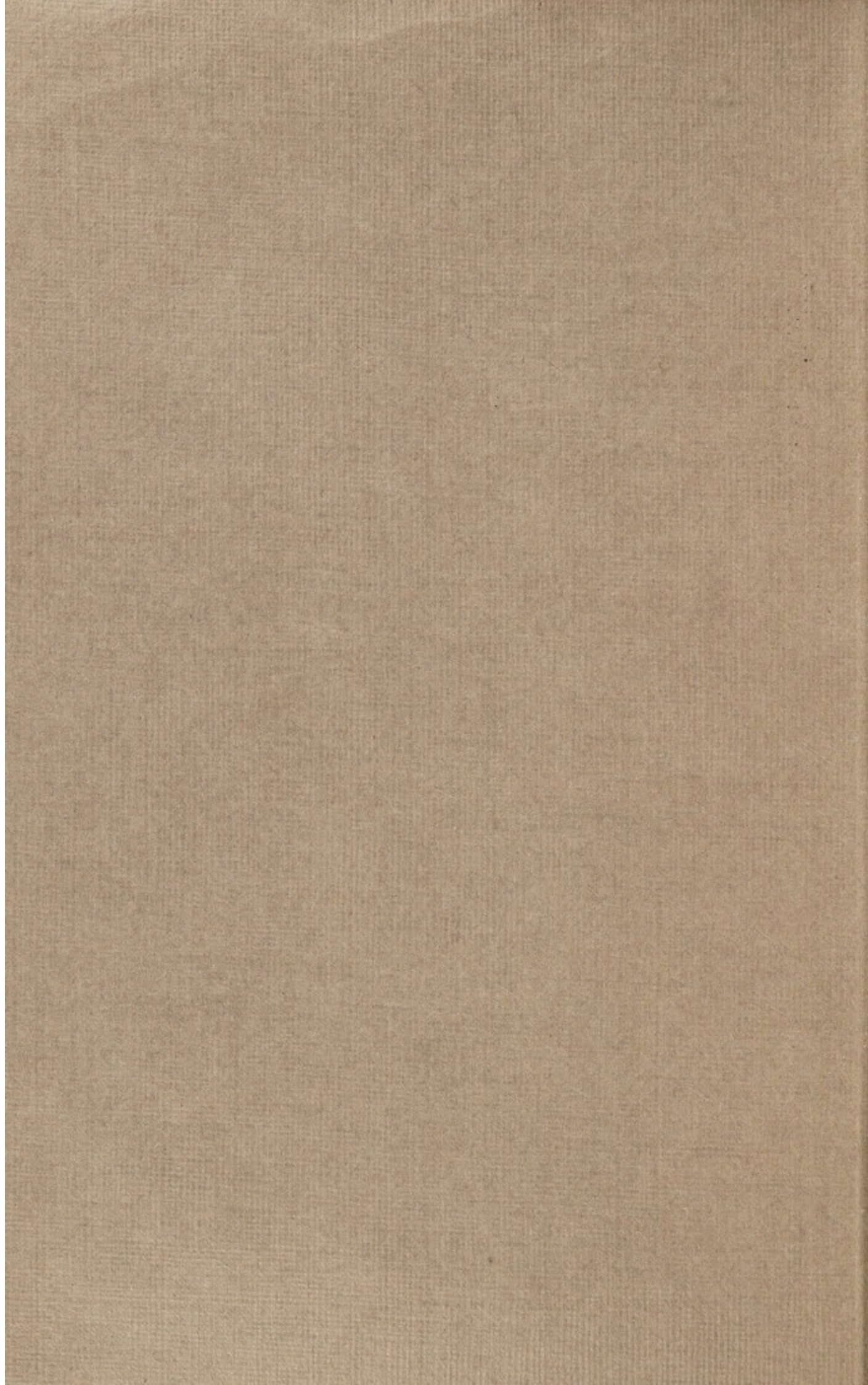
FOR THE YEAR

### 1925.



Lincoln :

LINCOLNSHIRE CHRONICLE, LTD., PRINTERS, SALTERGATE.



City and County Borough of Lincoln.



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# City and County Borough of Lincoln.



## The Mayor :

MISS MARIA ELIZABETH NEVILE, M.B.E.

## Public Health and Hospitals' Committee :

Chairman : COUNCILLOR J. HAGUE.

ALDERMAN E. HARRISON	COUNCILLOR J. B. ANDERSON
„ P. MILNER	„ J. J. LEAMY
COUNCILLOR R. A. TAYLOR	„ W. SINDELL
„ W. H. MARTIN	„ J. SMALLEY

## Maternity and Child Welfare Committee :

Chairman : THE MAYOR (MISS COUNCILLOR M. E. NEVILE)

COUNCILLOR J. HAGUE	COUNCILLOR J. T. KITCHEN
„ G. ROBSON	„ W. SINDELL
„ C. E. SNOOK	MRS. J. HARRIS
„ W. H. MARTIN	„ H. RAYMENT
„ G. DEER	„ E. SANDARS
„ J. K. FOX	„ E. WESTWOOD

## STAFF ON DECEMBER 31st, 1925.

---

### Medical Staff.

H. GORDON SMITH, M.D. (State Medicine) B.S., M.R.C.S.,  
L.R.C.P., D.P.H.  
Medical Officer of Health, School Medical Officer, Tuberculosis Officer  
and Medical Superintendent of Isolation Hospitals.

M. L. BERY, M.B., Ch.B., D.P.H.  
Assistant Medical Officer of Health, Assistant Tuberculosis Officer  
and Resident Medical Officer at City Isolation Hospital.

ELIZABETH J. FINDLAY, M.B., Ch.B., D.P.H.  
Assistant Medical Officer for Maternity and Child Welfare and  
Assistant School Medical Officer.

\*A. S. PLANT, M.R.C.S., L.R.C.P.  
Venereal Diseases Medical Officer.

### Public Analyst.

\*E. M. CHAPLIN, Ph.D., F.I.C.

### Sanitary Inspectors.

†J. K. CRAWSHAW, M.B.E.  
Certificate of Royal Sanitary Institute and Certificate of Sanitary  
Inspectors' Association Examination Board. Chief Inspector.

†DUNCAN G. MCGILL.  
Certificate of Royal Sanitary Institute. Meat and Foods Inspector.

A. GARNER.  
Certificate of Royal Sanitary Institute. Assistant Inspector.

J. W. HOE.  
Certificate of Royal Sanitary Institute. Assistant Inspector.

### Superintendent of Health Visitors and Matron of Maternity Home.

§||E. M. DAVIES, C.M.B.  
Certificate of Royal Sanitary Institute, Diploma of Hygiene R.S.I.

### Matron of City Hospital and Sanatorium.

§||E. O'KANE.

**MEDICAL STAFF—(continued).**

**Health Visitors.**

||A. WOOD, (Tuberculosis).  
 ||¶M. SENDALL. (Tuberculosis).  
 §H. HUBBARD, C.M.B. (Infant Welfare).  
 §A. M. EMPRINGHAM, C.M.B. (Infant Welfare).

**District Midwives.**

E. WAKELIN, C.M.B.  
 †M. CORBETT,     "  
 †D. GRAINGER,    "

**Ante-Natal and V.D. Nurse.**

M. V. ARMSTRONG, C.M.B.

**Laboratory Attendant and V.D. Orderly.**

J. H. SIMS.

**Clerks.**

M. M. HERRING	...	...	Health Office.
M. M. HOPPINS	...	...	"     "     "
B. G. STREET	...	...	City Hospital.
G. M. SHEPHERD, C.M.B.	...	...	Infant Welfare Centre. (Records).
H. CLAY	...	...	"     "     "
E. KETTLEBORO	...	...	"     "     "

**And Nursing and Domestic Staffs at City Hospital and  
Maternity Home.**

\* Part Time.

† Meat Certificate.

‡ Part-time Health Visitors.

§ General Trained.

|| Fever Trained.

¶ Part-Time V.D.



PUBLIC HEALTH DEPARTMENT,  
LINCOLN,  
*May 1926.*

MR. MAYOR AND GENTLEMEN,

I beg to submit my Annual Report on the health of the City of Lincoln. As directed by the Ministry, this is a survey report and contains a considerable amount of information. Much of this has been supplied to me by colleagues in other Departments, by Members of the Public Health Staff, particularly Mr. Crawshaw, and several other Officials.

To these I am greatly indebted.

I wish also to thank Dr. Bery who handed over the Department when I commenced my duties at the beginning of June.

I would like, moreover, to express my appreciation to the Chairman and Members of the Health and Maternity and Child Welfare Committees as well as other Members of the Council, for the considerate attention they have given to me since I entered the service of the Corporation.

I trust that this consideration will continue to be extended as it appears to me from my first year's experience in Lincoln that the Public Health Service of the City is in need of much practical support.

I have the honour to be

Your Obedient Servant,

H. GORDON SMITH,  
Medical Officer of Health.

## GENERAL STATISTICS.

---

Area of Borough in acres ... ..	6,166
Population—Census 1921 ... ..	66,600
,, —Estimated 1925 ... ..	66,790
Number of inhabited houses, 1921 ... ..	15,257
Number of families or separate occupiers, 1921 ... ..	15,898
Rateable Value, 1925 ... ..	£329,501
Sum represented by Penny Rate ... ..	£1,257
Birth-rate per 1,000 of population... ..	17.0
Death-rate ,, ,, ,, ... ..	11.8
Deaths of Infants under one year of age per 1,000 births	70.4

### Death-rates per 1,000 of Population from:—

Pulmonary Tuberculosis ... ..	.96
Other Tuberculous Diseases ... ..	.22
Diphtheria ... ..	.00
Scarlet Fever ... ..	.00
Measles ... ..	.09
Whooping-Cough ... ..	.10
Diarrhoea (under two years) ... ..	.13
Cancer ... ..	1.42
Influenza ... ..	.27

## VITAL STATISTICS.

### Deaths.

During the year 872 deaths were registered; these divided into sexes for each quarter are:—

	Males.	Females.	Total.
1st Quarter ... ..	127	112	239
2nd Quarter ... ..	107	103	210
3rd Quarter ... ..	107	78	185
4th Quarter ... ..	125	113	238
Totals ... ..	466	406	872

### Births.

During the year 1925, 1,196 births were registered, of which 57 were illegitimate. These divided into sexes for each quarter are:—

	Males	Females	Total
1st Quarter .. ..	139	135	274
2nd Quarter .. ..	149	172	321
3rd Quarter .. ..	165	145	310
4th Quarter .. ..	158	133	291
Totals .. ..	611	585	1,196

Comparative Table of Birth-rate, Death-rate and Infantile Mortality for the year 1925:—

	Death-rate per 1,000	Birth-rate per 1,000	Infantile Mortality per 1,000 Births
England and Wales ..	12·2	18·3	75·
105 Greater Towns, including London ..	12·2	18·8	79·
157 Smaller Towns ..	11·2	18·3	74·
London .. ..	11·7	18·0	67·
<b>Lincoln</b> .. ..	<b>11·8</b>	<b>17·0</b>	<b>70·</b>

## Causes of, and ages at, Death during the year 1925.

CAUSES OF DEATH	Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the district.											
	All Ages.			Under 1 year	1 and under 2 y'rs.	2 and under 5 y'rs.	5 and under 15 y'rs.	15 and under 25 y'rs.	25 and under 45 y'rs.	45 and under 65 y'rs.	65 and Up- ward.	
	Male	Fm'le	Total									
All Causes { Certified ... ..	419	361	780	78	18	16	10	27	88	189	354	
{ Uncertified ... ..	4	3	7	2	...	...	...	...	1	1	3	
1 Encephalitis Lethargica ... ..	3	1	4	...	...	...	...	1	2	1	...	
2 Enteric Fever ... ..	1	...	1	...	...	...	...	...	1	...	...	
3 Small Pox ... ..	...	...	...	...	...	...	...	...	...	...	...	
4 Measles .. ... ..	4	2	6	1	2	2	1	...	...	...	...	
5 Scarlet Fever ... ..	...	...	...	...	...	...	...	...	...	...	...	
6 Whooping Cough ... ..	5	2	7	4	...	2	1	...	...	...	...	
7 Diphtheria & Membranous Croup ... ..	...	...	...	...	...	...	...	...	...	...	...	
8 Influenza ... ..	8	10	18	...	...	...	...	...	1	6	11	
9 Erysipelas ... ..	...	...	...	...	...	...	...	...	...	...	...	
10 Phthisis (Pulm. Tub.) ... ..	41	23	64	...	3	...	1	16	23	19	2	
11 Tuberculous Meningitis ... ..	4	1	5	...	2	2	...	1	...	...	...	
12 Other Tuberculous Diseases ... ..	6	2	8	2	...	2	...	...	4	...	...	
13 Cancer, Malignant Disease ... ..	39	56	95	...	...	...	...	...	5	42	48	
14 Rheumatic Fever ... ..	...	1	1	...	...	...	...	...	1	...	...	
15 Meningitis ... ..	2	...	2	1	1	...	...	...	...	...	...	
16 Heart Disease ... ..	58	40	98	1	...	...	1	1	7	28	60	
17 Bronchitis ... ..	33	39	72	5	4	2	...	...	3	5	53	
18 Pneumonia (all forms) ... ..	36	31	67	11	4	3	1	1	9	13	25	
19 Other Diseases of Respiratory Organs ... ..	5	6	11	...	...	...	...	1	1	5	4	
20 Diarrhœa and Enteritis ... ..	5	6	11	8	1	...	1	...	...	1	...	
21 Appendicitis and Typhlitis ... ..	4	1	5	...	...	...	...	2	1	1	1	
22 Cirrhosis of Liver ... ..	1	2	3	...	...	...	...	1	...	2	...	
22 Alcoholism ... ..	1	...	1	...	...	...	...	...	...	1	...	
23 Nephritis and Bright's Disease ... ..	16	9	25	...	...	...	...	1	3	16	11	
24 Puerperal Fever ... ..	...	...	...	...	...	...	...	...	...	...	...	
25 Other Accidents and Diseases of Pregnancy and Parturition ... ..	...	2	2	...	...	...	...	...	1	1	...	
26 Congenital Debility and Mal- formation, including Pre- mature Births ... ..	21	17	38	38	...	...	...	...	...	...	...	
27 Violent Deaths, excluding Suicides ... ..	11	4	15	1	...	2	3	1	3	2	3	
28 Suicides ... ..	6	2	8	...	...	...	...	1	2	2	3	
29 Other Defined Diseases ... ..	63	43	106	8	1	1	1	...	21	36	38	
30 Diseases, Ill-defined and un- known ... ..	1	1	2	...	...	...	...	...	...	1	1	
31 Senility ... ..	12	24	36	...	...	...	...	...	...	...	36	
32 Arterio-Sclerosis & Apoplexy ... ..	37	39	76	...	...	...	...	...	1	14	61	
TOTALS ... ..	423	364	787	80	18	16	10	27	89	190	357	

### Vital Statistics of whole District in 1925 and previous Years.

YEAR.	Population estimated to Middle of each Year.	Births.			Total Deaths Registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
		Uncorrected Number.	Nett.		Number.	Rate.	Of Non-residents registered in the District.	Of residents not registered in the District.	Under 1 year.		At all Ages.	
			Number.	Rate.					Number.	Rate per 1,000 Nett Births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1916	55,078	1,272	1,271	21·2	868	15·2	142	26	96	75·5	752	13·6
1917	65,341	1,110	1,113	17·0	878	14·9	149	48	95	85·3	777	13·2
1918	BR 67,348 OR 60,707	1,204	1,206	17·9	1,149	18·9	266	36	87	72·0	919	15·3
1919	BR 63,107 OR 60,581	1,160	1,158	18·2	856	14·1	151	21	92	79·0	726	11·98
1920	63,655	1,479	1,455	22·7	800	12·5	107	39	117	79·0	732	11·5
1921	65,600	1,526	1,478	22·2	818	12·3	110	45	128	86·6	753	11·3
1922	66,930	1,237	1,232	18·4	885	13·0	106	31	99	80·2	810	12·1
1923	66,910	1,227	1,174	17·5	830	12·4	113	37	75	63·8	754	11·2
1924	67,060	1,178	1,137	16·9	913	13·5	134	31	82	72·1	810	12·0
1925	66,790	1,196	1,135	17·0	872	13·0	113	28	80	70·4	787	11·8

### PHYSICAL FEATURES.

The County Borough of Lincoln is situated six miles from the Nottinghamshire border.

Its area is 6,166 acres, and it is divided into North and South districts by the River Witham.

The Southern portion of the town is flat but to the North is a prominent hill on which the Cathedral stands. This is the northern escarpment of the Lincoln Gap; the southern escarpment being formed by the Canwick Hills. The valley through which the river flows towards the Wash is the Gap formed by the prehistoric Trent. Oolitic limestone enters into the composition of these hills, but the northern hill as it slopes towards the river is mainly covered with clay.

## SOCIAL CONDITIONS.

Lincoln is an important shopping centre for the surrounding districts. The most important industries are those connected with engineering. There are several firms engaged in the manufacture of engines, boilers, pumps, wagons and agricultural implements. During the war Lincoln was engaged on a large scale in the production of "tanks," water-carts, gun-carriages and other vehicles, as well as munitions. In consequence many workers established themselves in the City, and a number has, since the war, experienced difficulty in obtaining employment.

The census figures of 1921 give the following numbers indicating the proportions engaged in certain occupations in Lincoln:—

Occupation.	Number engaged.	
	Males.	Females
Metal Workers ... ..	7926	138
Electrical apparatus makers ... ..	228	—
Makers of textile goods ... ..	315	596
„ „ foods, drink and tobacco ... ..	317	199
Workers in wood and furniture ... ..	1411	29
Builders, bricklayers, stone and slate workers ... ..	933	1
Painters and decorators ... ..	508	5
Employed in transport and communication ... ..	1984	94
Commercial, Finance and Insurance occupations ... ..	1875	1122
Engaged in personal service ... ..	403	2751
Clerks and Draughtsmen ... ..	1030	680
Agricultural occupations ... ..	436	63
Professional „ ... ..	446	755
Retired or not gainfully occupied ... ..	2938	19785

## POOR LAW RELIEF.

1. The amount of money expended in Poor Law Out-Relief in 1925 was £35,654 15s. 8d.

2. The amount expended in Unemployment Relief was £17,054 2s. 9d.

3. Total number of persons on Register of Labour Exchange, 1925. Included in this figure were 199 temporarily suspended from work.

## GRATUITOUS MEDICAL RELIEF.

The County Hospital and General Dispensary are much patronised.

During the year under consideration the County Hospital dealt with the following number of patients :—

Number of In-Patients at beginning of year	...	...	100
" " " admitted during the year	...		1729
" " " at end of year	...	...	91
Total number of Out-Patients	...	...	4377
" " " Out-Patient attendances	...	...	27654
" " " Casualty Patients (included in above)	...		1238
" " " Casualty attendances	...	...	3080

## GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

### Hospitals provided or subsidised by the Local Authority.

(a) *The City Hospital, Long Leys Road*, provides accommodation for Cases of Infectious Disease. The patients usually admitted are those suffering from the ordinary notifiable diseases. The nominal accommodation is 58 beds.

(b) *The Dawber Sanatorium* adjoins the above and contains 42 beds for male and female patients suffering from Tuberculosis. Early, intermediate and advanced cases are received.

(c) *The County Hospital* is subsidised by the Local Authority and maintains two beds for cases of surgical Tuberculosis.

(d) *The Smallpox Hospital* is situated on the West Common. 20 beds are available for patients suffering from this disease.

(e) *The City Maternity Home, Newland*, is attached to the Infant Welfare Centre. The total number of beds is 16. This includes accommodation for septic cases.

### Institutional provision for unmarried mothers, illegitimate infants and homeless children.

Unmarried mothers are received for their confinement into the City Maternity Home.

The St. Hugh's Home for Boys is provided by the Waifs and Strays Society.

Provision is made by the Guardians in various homes for homeless children.

### **Ambulance facilities.**

(a) A motor ambulance is kept at the City Isolation Hospital for infectious cases.

(b) A motor ambulance is provided for non-infectious and accident cases and housed at the Central Police Station.

### **Clinics and Treatment Centres.**

(a) *The Maternity and Child Welfare Centre, Newland*, is a centrally situated building which has recently been extended. It provides clinics for residents in all parts of the City and to a small extent for those outside the boundaries.

The Local Authority provides :—

Infant Welfare Clinics.  
Dental Clinics.  
Ante-Natal Clinics, and  
Venereal disease Clinics for mothers or expectant mothers.

(b) *The School Clinic*. The Local Education Authority has adapted the premises known as the Old Free Library, Silver Street and provides minor ailment, dental, ophthalmic and special clinics. The last are intended for children needing a thorough examination for any reason.

(c) *The Tuberculosis Dispensary*, in Bank Street, is a small building in which are held the Tuberculosis Clinics. The existing accommodation is scarcely adequate.

(d) *Treatment Centre for Venereal Diseases*. The Tuberculosis Dispensary is used for this purpose. Consultations and treatment are available for those in the City and surrounding districts. The V.D. Medical Officer from Grimsby is in charge of the Clinics, but the expenses are shared between the City of Lincoln and the Lindsey, Holland and Kesteven County Councils.

### **Professional Nursing in the Home.**

The Lincoln District Nursing Association provides nurses who undertake sick nursing in the Homes. They attend cases of any nature with the exception of certain notifiable diseases. The Association has a scale of charges based on the income of the family, but free nursing is available when the income is below the scale. In 1925, 580 cases were nursed free. The Association receives a grant from the City Council in respect of the nursing of certain cases particularly patients suffering from Tuberculosis Pneumonia, Measles and Whooping Cough.

### **Midwives.**

There are 8 midwives practising in the City. Three of these are employed by the City Council.



**Chemical Work.**

The Public Analyst of Wakefield holds the same office for Lincoln. The results of the year's work appear in the section on Food.

**Legislation in force.****General Adoptive Acts with dates when coming into force in Lincoln.**

<i>Act.</i>	<i>Parts.</i>	<i>Sections.</i>	<i>Date came into force.</i>
Infectious Diseases (Prevention) Act, 1890			21 Feb., 1891
Public Health Act (Amendment) Act, 1890	II-III-IV-V		21 Feb., 1891
do. 1907	II	The whole	16 Oct., 1909
do. do.	VII	79, 80, 81, 85, 86	} 30 July, 1915
do. do.	VIII	The whole	
do. do.	IX	The whole	
do. do.	IV-V-VI	The whole	
do. do.	III	34-38 and 43-51	24 Sept., 1915
do. do.	X	92, 93, 95	
Bath and Wash-houses Act			6 Jan., 1892

There are also the following :—

(a) *Local Acts.*

Lincoln Corporation Act, 1915.

Lincoln Corporation (Water, etc.) Act, 1908.

(b) *Bye-laws and Regulations, etc.*

New Streets and Buildings.

Regulations as to mode of connecting drains to sewer.

Common Lodging Houses.

Dairies, Cowsheds and Milkshops (Regulations).

Public Abattoir and Cold Air Stores (Regulations).

Children Trading in Streets.

Nuisances

Cleansing of Footways and Pavements, and of Privies, Ashpits and Cesspools.

Slaughterhouses.

Tents, Vans, Sheds and Similar Structures used for Human Habitation.

Prevention of waste, misuse or contamination of water (Regulations).

Closing of Shops (Order).

## The Measure of Progress made in the Area during the preceding Five Years in the Improvement of the Public Health.

In Lincoln during recent years much consideration has been given to Maternity and Child Welfare and to Housing.

The former is now established on a sound footing and is developing according to modern methods. The latter is also producing definite, if expensive results. Progress in other directions has been hindered particularly by two causes, viz., the industrial unrest prevailing in the City and the unfortunate illness and resignation of Dr. Coleman, formerly Medical Officer of Health. For the first reason, money badly needed has not been available and for the second a clearly defined policy has not been forthcoming. It would appear that the Public Health Department has been doing excellent work and producing good results, but it has not developed in the manner that is to be expected of a City of nearly 70,000 inhabitants. If Lincoln is to have an up-to-date Health Service it must be provided with an adequate staff, convenient offices and clinics well-built and suitably furnished. In his Annual Report of 1920, Dr. Coleman said: "A report on the re-organisation of the Health Department was presented to the Health Committee during the year, in view of the extended City boundaries, and after careful consideration it was decided that the personnel should consist of:—

1. A Chief Inspector of Nuisances.
2. A special Inspector for meat, food, slaughter-houses and cow-sheds.
3. Three District Inspectors
4. A Chief Clerk of mature experience to superintend the clerking and records of the Department.
5. Certain alterations to increase existing accommodation at the Health Offices were also discussed.

My original report suggested the appointment of a Special Housing Inspector, but this was not agreed upon at present."

Five years after the above was written the Department still lacks a Chief Clerk and is without the third District Inspector. As to the need of the extra Inspector there can be no doubt, the two at present employed can barely do the necessary work in normal

times, in 1925 with epidemics of Infectious Diseases, a certain amount especially in connection with Housing was perforce left undone. A Chief Clerk is also required, but if the offices are to remain as they are, his scope will be limited. Apparently on account of the insufficient offices the Health Department has been divided against itself, two branches for which the Medical Officer of Health is supposed to be held responsible, viz., Maternity and Child Welfare and the School Medical Service perform their duties in separate premises, with separate nursing and clerical staffs. The result is that the "central department" has been left behind in premises which have been very vividly described by members of the Council, and perhaps even more so by visitors seeking the Health Department. Although many people do not seem to realise it, a Public Health Department must be run on similar lines to a trading concern. Correspondence should be dealt with promptly and accuracy encouraged in every possible way. Furthermore, in order to demonstrate the value of Public Health work one or more showrooms is needed. Just as a gay shop-window induces customers to walk in and purchase the goods, so do bright, clean offices and well-equipped clinics encourage people to think of Health and the best means of obtaining it.

It is difficult to attempt the education of the public in Health matters when one's own house needs putting in order, moreover from the financial aspect it is most unsatisfactory.

In my opinion, if the Department is to be run economically and to be properly organised, the provision at an early date of adequate offices and clinics is essential.

## SANITARY CIRCUMSTANCES OF THE AREA.

### \*Water.

The Water Supply to the City is derived from boreholes on the outcrop of the new Red Sandstone formation at Elkesley, Nottinghamshire, about 22 miles due west, and is pumped to a storage reservoir on the outskirts of the City. The works are adequate to meet the present demands and also for some years to come.

\* Supplied by Waterworks Engineer.

It is a constant supply, of excellent quality, both chemically and bacteriologically, and is analysed twice a year. The analyst's repeated report being that "it maintains its high standard of organic purity." It has no action on lead.

The pumping station is very isolated, and owing to the close texture of the rock forming a most efficient filtering medium, the risk of contamination of the supply at the source is very remote.

Practically all the dwelling-houses in the City are supplied with a tap direct inside the houses. A few cottages are supplied by taps in yards common to the row, and a small percentage of houses on the extremity of the City boundary is still supplied by private wells.

The City is well served, and in addition, the compulsory water area includes all the bordering parishes, viz., Bracebridge Heath, Canwick, North Hykeham, Skellingthorpe, Greetwell, Burton and Saxilby.

#### Analysis of Lincoln Water—15th February, 1925.

*Parts per 100,000 by weight.*

Total Solids (dried at about 100°C)	...	...	...	...	...	21.6
Ammoniacal Nitrogen	...	...	...	...	...	Nil
Albuminoid Nitrogen	...	...	...	...	...	.0018
Nitrous Nitrogen	...	...	...	...	...	Nil
Nitric Nitrogen	...	...	...	...	...	.53
Oxygen absorbed from n/80 permanganate in 4 hours at 27°C	...	...	...	...	...	.0114
Chlorine (present as chloride)	...	...	...	...	...	1.94
Hardness, by soap test, in terms of carbonate of lime	...	...	...	...	...	13.0
Permanent Hardness by soap test in terms of carbonate of lime	...	...	...	...	...	6.5
Alkalinity	...	do.	do.	do.	...	9.3
Oxygen in Solution	...	...	...	...	...	1.04*
Lead in Solution	...	...	...	...	...	Nil
Lead dissolved from non-encrusted lead piping in 48 hours :—						
Pipe 2	...	...	...	...	... about	.018
Pipe 4	...	...	...	...	... about	.031

\* Equal to 7.3 c.c. per litre.

The above figures are virtually the same as those of the preceding samples for some years back.

The water, was, as usual, clear and colourless and it was free from floating particles and sediment.

Speaking from a chemical point of view, the water maintains its high standard of organic purity.

GEORGE MCGOWAN,  
Ph.D., F.R.S.E., F.I.C.

## RIVERS AND STREAMS.

These include the River Witham, The Foss Dyke, The Sincil Dyke and several smaller Dykes. There is also the wide expanse of water between the River Witham and the Foss Dyke, known as "Brayford." At intervals all the above are liable to pollution from oil which is produced at various engineering works, garages, etc. Prompt attention is given to these when discovered and the nuisance remedied. Recently, however, difficulty has been experienced as regards Brayford. A number of houseboats have been moored on this waterway and the occupants appear to be discharging their excreta directly into the water. Owing to the sluggish current there is a tendency for the excreta to stagnate and cause a nuisance. Brayford is used by bathers who obviously run some risk in bathing in contaminated water. The Council is giving consideration to the best means of abating the nuisance and it is hoped that a remedy will be found at an early date.

## \* DRAINAGE AND SEWERAGE.

The Drainage and Sewerage of the City is largely on what is known as the combined system, i.e., the drains and sewers taking the sewage and storm water drainage, but in several districts a limited amount of storm water sewerage has been laid, which discharges into watercourses and the river.

There are, however, still a number of outlying houses not served by the water carriage system of sewerage and drainage and still having soak-pits and cesspools; these are being converted as favourable opportunities present themselves.

New sewers have been laid during last year in Skellingthorpe Road, Highfield Avenue (off Skellingthorpe Road), Jellicoe Avenue (off Monks Road), in addition to several roads on the St. Giles Estate. A portion of Long Dales Road has also been sewered. During the year separate surface water sewers have been laid in part of Nettleham Road and part of Wragby Road.

The sewage is disposed of at the Canwick Sewage Farm, having a total area of 82 acres. The whole of the sewage and storm water is pumped by the recently-installed pumps at the Sewage Pumping Station adjoining the Refuse Destructor, to the farm where it is divided into sewage and storm water. Up to

\* Supplied by City Surveyor.

three times the dry weather flow is treated as sewage in precipitation tanks, and through a double series of continuous percolating filters the effluent from which is further purified in humus tanks, and the final effluent discharged into the South Delph. So efficient has the plant at the Sewage Disposal Works been that no complaints have been received for very many years, and the final effluent discharged into the drain is of a very high order.

### CLOSET ACCOMMODATION.

In Lincoln there are still remaining closets on the conservancy system. A certain number of these cannot be converted, as it will not be possible to obtain sufficient fall to the sewer, or because no sewer is near. Section 39 of the Public Health Acts (Amendment Act) 1907 has not been adopted by the Corporation, but proceedings are taken whenever a closet becomes "insufficient," and others have been voluntarily converted by the owners.

The number of conversions during recent years is as follows:—

Year	Privy Vaults	Privy Boxes	Total
1921	9	28	37
1922	9	15	24
1923	18	41	59
1924	9	21	30
1925	3	14	17
	—	—	—
Total	48	119	167
	—	—	—

The number of each type remaining at the end of 1925 is:—

Privy Vaults	Privy Boxes	Total
52	152	204

### \*SCAVENGING.

As regards house scavenging, there is a weekly house-to-house collection of refuse once a week throughout the City, with an additional weekly collection in certain areas, such as shopping and business centres. The refuse is dealt with at the Refuse Destructor and out of the total average daily collection of 63 tons, a total average of 40 tons per day is destroyed at the Refuse Destructor, the remainder being tipped and covered with soil and destructor clinker.

\* Supplied by City Surveyor.



Choked W.C's. cleansed ... ..	98
Urinals cleansed ... ..	1
„ provided ... ..	2
Drains tested with smoke, etc. ... ..	450
„ found defective and repaired ... ..	70
„ re-laid ... ..	54
„ found choked and cleansed ... ..	178
New inspection chambers built ... ..	29
Manhole covers provided... ..	9
Drain ventilating pipes tested ... ..	399
„ „ „ choked ... ..	18
„ „ „ repaired ... ..	27
„ „ „ fixed new ... ..	14
„ „ „ lengthened ... ..	9
Sink waste pipes trapped ... ..	81
„ „ „ repaired ... ..	24
Eaves, spouts and down spouts repaired ... ..	76
Yards and passages asphalted ... ..	382
Defective roofs repaired ... ..	98
Foul sinks removed ... ..	37
Windows of houses made to open ... ..	56
Ashpits abolished ... ..	2
Covered metal ash-bins provided ... ..	300
General repairs ... ..	180

## SMOKE ABATEMENT.

Much consideration has been given by the Health Committee to this problem. In 1924 a lecture on Smoke Abatement was given in Lincoln by an expert. The various firms in the City were invited to send their engineers and stokers to attend this lecture with the object of educating them and securing their co-operation. A good attendance was recorded and some results obtained. There is, however, still a great need for improvement as regards the production of smoke, and it is unfortunate that greater keenness is not displayed by many of the firms responsible. The Health Committee are unwilling to adopt severe measures, having regard to the fact that the industries of the City have been severely crippled during recent years. Nevertheless, notices have been served in several instances, but legal proceedings have not been taken.

Domestic smoke is not a matter to be forgotten. An observer who looks down on Lincoln from a spot near the Cathedral will be struck by the large amount of smoke issuing from house chimneys and will realise how much an individual can help in smoke abatement.



## Premises and Occupations which can be Controlled by Byelaws and Regulations.

There are Byelaws which have been adopted to deal with :—

Tents, Vans and Sheds

Common Lodging Houses.

Slaughterhouses.

Dairies, Cowsheds and Milkshops (Regulations).

There are no Byelaws in respect of offensive trades, but Section 112 of the Public Health Act, 1875, has been extended to include a number of trades which are or may be offensive.

As regards Tents, Vans and Sheds, these are particularly in evidence during "Fair week," when special arrangements are made by the Corporation in respect of water supply, scavenging, etc.

There is no need in Lincoln for regulations in respect of underground sleeping rooms.

The number of premises and occupations referred to above is :—

*Slaughterhouses*—9 Registered and 6 Licensed.

*Offensive Trades*—

Under Section 112 Public Health Act, 1875 :—

Blood Boiler	...	...	...	0
Bone Boiler	...	...	...	0
Fellmonger	...	...	...	1
Soap Boiler	...	...	...	0
Tallow Melter	...	...	...	0
Tripe Boiler	...	...	...	1

Since 22nd November, 1915, the following are scheduled as Offensive Trades in Lincoln under Section 51 Public Health Acts Amendment Act, 1907 :—

Blood Dryer	...	...	...	0
Hide and Skin Dealers	...	...	...	2
Tanner	...	...	...	1
Leather Dressers	...	...	...	2
Fat Melter	...	...	...	0
Fat Extractor	...	...	...	0
Glue Maker	...	...	...	1
Size Maker	...	...	...	1
Gut Scraper	...	...	...	1

*Rag and Bone Dealers	...	...	...	...	14
Fish Friers	...	...	...	...	47

\* In this order the expression " a rag and bone dealer " means any person who for the purpose of sale carries on upon any premises the trade of receiving, storing, sorting and manipulating any rags in an offensive condition, or in a condition likely to become offensive, or any bones, rabbit skins, fat or other putrescible animal products of a like nature.

#### Dairies Cowsheds and Milk Shops.

<i>Cow-keepers</i>	...	...	...	...	22
<i>Cowsheds</i>	...	...	...	...	33
<i>Dairymen (Other than shops)</i>	...	...	...	...	51
„ (Residing outside the City)	...	...	...	...	24
<i>Milk Shops</i>	...	...	...	...	80

### SCHOOLS.

The sanitary condition of the Public Elementary and Secondary Schools has been described in detail in my Annual School Report for 1925.

The defects discovered are mainly concerned with lighting and ventilation, matters which cannot be remedied in many cases, except by considerable structural alterations.

Many children have been excluded from school on account of Infectious Diseases, but no schools have been closed. Further details are given in this report in the section dealing with Infectious Diseases.

The number of exclusions and the reason for exclusion are as follows :—

Scarlet Fever	...	...	...	...	709
Diphtheria	...	...	...	...	76
Smallpox	...	...	...	...	1
Encephalitis Lethargica	...	...	...	...	5
					<hr/>
					791
					<hr/>

### HOUSING.

#### General Housing Conditions in the Area.

##### (1). General Housing Conditions.

These compare favourably with towns of a similar size.

Like most ancient Boroughs, Lincoln has an appreciable proportion of old houses that fall short of modern requirements, but there is nothing that can be described accurately as a slum.

There is a population of 66,790 in 16,313 houses giving an average of 4.09 persons per house. At first sight this would appear satisfactory, but 707 houses have no through ventilation; moreover there are 20 house-boats and a number of vans used as dwellings.

(2.) (a) **Extent of Shortage or Excess of Houses.**

There is a shortage of 1,000 houses at least, estimated as follows:—

Number (as shown by house to house enquiry in 1923) desiring houses who are in apartments or wish to marry, Estimated at ... ..	800
To meet the requirements of persons displaced by the Improvement Scheme ... ..	130
To replace houses which should be closed ... ..	50
To meet natural growth at rate of 330 persons per annum... ..	80
Houses required to change on... ..	100
Total ... ..	1160

During the year ended March 31st, 1926, 30 houses have been taken out of assessment for the following reasons:—

Under closing orders ... ..	8
Houses in the area of the Improvement Scheme which have become vacant and are not allowed to be re-let	1
Huts demolished near Abbey Works ... ..	7
Turned into a public lavatory ... ..	1
"    "    workshops or offices ... ..	8
For street improvement ... ..	1
Demolished ... ..	3
Being rebuilt ... ..	1
Total ... ..	30

(b) **Measures taken or contemplated to meet any shortage.**

- A. Total number of houses erected or taken over (e.g., from Bracebridge Urban District Council) up to the end of 1925 ... .. 370
- B. Measures contemplated.  
Number of houses to be built in all areas and the rate at which they are to be built:—
1. St. Giles Estate—Nettleham Road Site—slum clearance ... .. 60  
(40 by December, 1926 and 20 more March, 1927)

2.	Cannon Street—slum clearance area ...	14
	(To be completed by December, 1926)	
3.	Highfield Avenue Site—Boultham ...	136
	(44 completed by July, 1926)	
	(50 more completed by June, 1927)	
	(42 more completed by March, 1928)	
4.	Jellicoe Avenue, Monk's Road ...	39
	(To be completed by December, 1926).	

## OVERCROWDING.

### II. Overcrowding.

#### (1.) *Extent.*

There are probably 180 cases of overcrowding on the basis of more than 3 adults per bedroom.

#### (2.) *Causes.*

Shortage of houses or rather of a certain type of house is the chief cause.

The rents of new houses and the increased rents of old houses are beyond the reach of the labourer who while earning about £2 per week has to maintain a wife and children.

In 1922-3 there were 1356 houses in which there were two or more families, the second family frequently being that of married son or daughter.

#### (3.) *Measures taken or contemplated for dealing with overcrowding.*

The Corporation has built and proposes to continue building several hundred houses as shown in the statements appended.

#### (4.) *Principal Cases of overcrowding during 1925 and action taken.*

No statutory action has been taken in cases of overcrowding, but help has been given whenever possible to enable those concerned to find better accommodation.

### III. Fitness of Houses.

#### (1.) (a) *General standard of housing.*

The standard of housing is fairly high. A big proportion of the houses has gardens. The older and smaller houses have a common yard with one gully and one water tap which all use—and no sink or drainage inside.

(b) *General character of the defects found to exist in unfit houses.*

The principal defects are :—

Dampness from defective roofs and from want of efficient damp-proof course.

Asphalt yards and paths breaking up for want of attention.

Choked drains due to foreign articles getting in and from insufficient flush of water after frosts.

Cords missing from windows, broken fireplaces, ovens and boilers.

(c) *How far defects are due to the lack of proper management and supervision by owners or to acts of waste or neglect by tenants.*

For six years from the commencement of the war repairs were neglected, the painting of houses stopped and small property lapsed into poor repair. The owners must be held responsible for these conditions, but many of the minor defects such as choked drains and burst water-pipes are caused by the tenants or their children.

(2.) *General action taken as regards unfit houses under*

(a) *The Public Health Acts.*

(b) *The Housing Acts.*

The method of dealing with the defects is to serve an informal notice first. If the work required is not done, a statutory notice is served—under section 3 of the Housing Act if possible. In the case of a serious nuisance the notice is usually complied with, but in other cases it is necessary for the Local Authority to do the work.

(3.) *Difficulties found in remedying unfitness and any special method taken or suggested.*

One of the chief difficulties in getting repairs done quickly is shortage of builders. In respect of small property there is difficulty in getting repairs carried out when the rent is in arrears, or where the owner cannot find money for repairs owing to increased charges or reduced income. A few of the owners keep men to do repairs.

135 of the worst houses are being dealt with under an improvement scheme and other houses are being closed gradually as unfit for habitation.

(4.) *Conditions as regards water-supply, closet accommodation and refuse disposal.*

The water supply of the City is laid on to most houses. There are a few wells that have caused no trouble and which are being eliminated gradually.



**2. Remedy of Defects without service of formal notices.**

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers ... .. 542

**3. Action under Statutory Powers.**

*A. Proceedings under Section 3 of the Housing Act, 1925.*

- |  |      |
|--|------|
| (1) Number of dwelling-houses in respect of which notices were served requiring repairs ... ..   | 45   |
| (2) Number of dwelling-houses which were rendered fit after service of formal notices :—   |      |
| (a) By Owner ... ..  | 43   |
| (b) By Local Authority in default of Owners...   | 1    |
| (3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close | Nil. |

*B. Proceedings under the Public Health Acts.*

- |   |     |
|---|-----|
| (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ... .. | 123 |
| (2) Number of dwelling-houses in which defects were remedied after service of formal notice :—                |     |
| (a) By Owners ... ..  | 105 |
| (b) By Local Authority in default of Owners ... ..  | 9   |

*C. Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925*

- |   |   |
|---|---|
| (1) Number of representations made with a view to the making of Closing Orders ... ..   | 4 |
| (2) Number of dwelling-houses in respect of which Closing Orders were made ... ..   | 4 |
| (3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit ... .. | 0 |
| (4) Number of dwelling-houses in respect of which Demolition Orders were made ... ..  | 1 |
| (5) Number of dwelling-houses demolished in pursuance of Demolition Orders ... ..   | 0 |

**INSPECTION AND SUPERVISION OF FOOD.**

**(A) Milk Supply.**

From a chemical point of view the bulk of the milk sold in the City is of good quality. There have been no recent complaints

as to the presence of dirt, and it would appear that gradual improvements are being effected in this direction. As regards bacteriological findings, considerable variations are found.

All grades of milk can be obtained in Lincoln, but an appreciable amount is sold as pasteurised. Successful pasteurisation depends to some extent on the methods of the staff employed, and although the apparatus may be satisfactory, there have been occasions when the bacteriological findings have been unsatisfactory. It is to be hoped that the public will discover the value of "certified" milk and support the producers to the best of their ability. Until they have done so they should realise that the average sample of raw milk is a questionable article and that pasteurisation tends to protect the consumer from most of the risks.

The Food Inspector has devoted a considerable amount of time to dairies, cowsheds and milkshops, and has caused to be remedied certain defects.

There is no scarcity of milk in Lincoln: it is usually distributed twice a day in the summer, but once only in the winter.

i. No samples have been taken to detect the presence of Tubercle Bacilli in milk, but several cows have been condemned at the Abattoir as suffering from Tuberculosis.

ii. Sixty-eight licences have been granted for the sale of milk under special designations as follows:—

Pasteurised	...	...	...	...	...	64
Grade "A"	...	...	...	...	...	1
Certified	...	...	...	...	...	3

#### Types of Apparatus used in Pasteurisation.

The type used is of the positive holding variety with an automatic recorder.

Each pasteuriser submits weekly his chart which is carefully checked in the Public Health Department. Thus it is possible to see the temperature at which the milk is pasteurised and the period for which it has been maintained at that temperature.

iii. It has not been necessary to refuse nor to revoke the registration of retailers or of licences for graded milk in 1925.

iv. The summarised results of the bacteriological examination of samples of milk are given below.



## MILK.

## Samples submitted for the Count of BACTERIA.

Sample No.	Nature of Sample.	Number of Micro-Organisms for 1 c.c. in dilution		B. Coli present in
		of 1/10	of 1/1000	
1.	Milk	16,400	19,000	1/10 of a c.c.
2.	" (Pasteurised)	1,240	1,000	5 c.c.
3.	" "	18,620	19,000	1/100 of a c.c.
4.	" "	6,820	4,000	1/10 of a c.c.
5.	" (Certified)	1,930	2,000	5 c.c.
6.	" "	900	1,000	Absent in 5 c.c.
7.	" "	750	Nil.	Absent in 5 c.c.
8.	" "	30,420 (approx.)	28,000	1/10 of a c.c.
9.	" "	81,640 "	80,000	1/10 of a c.c.
10.	" (Pasteurised)	1,440	2,000	1 c.c.
11.	" "	Too numerous to count accurately	59,000	1 c.c.
12.	" "	14,420	15,000	1 c.c.
13.	" (Certified)	20,300	18,000	1 c.c.
14.	" (Grade "A")	450	Nil.	Absent in 5 c.c.
15.	" (Certified)	960	2,000	Absent in 5 c.c.
16.	" (Grade "A")	420	Nil.	Absent in 5 c.c.
17.	" "	1,340	1,000	Absent in 5 c.c.
18.	" (Pasteurised)	16,800	14,000	1 c.c.
19.	" (Certified)	Too numerous to count.	37,000	1/10 of a c.c.
20.	" (Pasteurised)	Too numerous to count.	38,000	Absent in 5 c.c.
21.	" (Certified)	1,200	2,000	Absent in 5 c.c.
22.	" "	840	2,000	Absent in 5 c.c.
23.	" "	1,680	4,000	Absent in 5 c.c.
24.	" (Pasteurised)	Too numerous to count.	240,000	1/100 of a c.c.
25.	" (Grade "A")	800	1,000	Absent up to 1/100 c.c.
26.	" (Pasteurised)	2,100	Nil.	1 c.c.
27.	" "	Too numerous to count.	1,104,000	1/100 of a c.c.
28.	" (Certified)	Impossible to count owing to spread	188,000	Absent in 1/10 c.c.
29.	" (Pasteurised)	Specimen useless as milk was	exuding from cap.	
30.	" "	" " " " "	" " "	
31.	" "	Uncountable owing to spreading type of growth	9,000	1/100 of a c.c.
32.	" "	5,860	15,000	1/10 of a c.c.
33.	" (Certified)	70	1,000	Absent in 1 c.c.
34.	" "	1,060	3,000	Absent in 1/10 c.c.
35.	" (Pasteurised)	Uncountable	380,000	1/100 of a c.c.
36.	" "	Plate unfortunately destroyed	1,000	Absent in 1 c.c.
37.	" "	Uncountable.	42,000	Absent in 1 c.c.
38.	" "	Uncountable owing to spread.	56,000	1/1000 of a c.c.
39.	" (Certified)	2,760	4,000	Absent in 1 c.c.
40.	" "	Uncountable owing to spread.	232,000	1/100 of a c.c.
41.	" "	Uncountable owing to spread.	17,000	1/10 of a c.c.
42.	" "	Too numerous to count.	260,000	1/1000 of a c.c.
43.	" (Pasteurised)	Uncountable owing to spread.	3,000	1 c.c.
44.	" "	Not countable.	85,000	Absent in 1 c.c.
45.	" "	15,720	44,000	1/100 of a c.c.
46.	" (Certified)	570	Nil.	Absent in 1 c.c.
47.	" "	Unreadable owing to spread.	39,000	1 c.c.
48.	" (Grade "A")	Uncountable (Cap faulty)	838,000	1/100 of a c.c.

**(B) Meat.***(I) Meat Inspection.*

Two qualified meat inspectors, one of whom is the Chief Sanitary Inspector, arrange for the examination of meat at the Public Abattoir and the Private Slaughter-houses. There are some difficulties experienced, chiefly due to the fact that there are many slaughter-houses and that the butchers frequently slaughter on the same day and at the same time.

As will be observed a considerable amount of meat has been condemned, a fact which has caused some dissatisfaction amongst the butchers. The City has two qualified Meat Inspectors who naturally set a fairly high, but reasonable standard, which is doubtless higher than that prevailing in some of the Rural Districts where a qualified Meat Inspector may not be available. Many of the butchers fail to understand why a carcass should be condemned when the organs are extensively diseased. Tubercular pigs have usually been the animals causing discussion. In these the carcass often looks normal and well-nourished when marked signs of disease are present in the offal.

The Memorandum issued by the Ministry relating to Meat Inspection is being carefully observed and consideration is given to the butchers whenever possible.

Condemned meat is destroyed in the Corporation's refuse destructor.

No arrangements have been made for the marking of meat under the Public Health (Meat) Regulations, 1924.

*(II) Administration of the Public Health (Meat) Regulations, 1924.*

The butchers observe these fairly carefully.

The shops have windows which in most cases are kept closed, the handling of meat is not a common practice, and general cleanliness receives consideration.

The vehicles used for the transport of meat are kept in a wholesome state, and it is customary for the men who carry the meat to wear overalls.

Stalls in the streets are not seen in Lincoln; there are some in the markets which hitherto have caused no difficulties.

(III) *The Management of the Public Slaughter-house.*

This is under the control of the Commons and Markets Committee.

The meat, as already stated, is inspected by the two Meat Inspectors.

The number of Private Slaughter-houses in use in the area is as follows:—

	In 1920.	In Jan., 1925.	In Dec., 1925.
Registered ... ..	9	9	9
Licensed ... ..	5	7	6
(Came into Borough, Nov., 1920) ...	3	—	—
	17	16	15
	—	—	—

(C) **Other Foods.**

The Inspectors have paid frequent visits to premises where foods are manufactured, prepared, etc., and to bakehouses.

Minor defects have been found and attended to, but generally speaking there is little to complain of.

In two cases proceedings were taken for exposing unsound meat as follows:—(1) 20th May, 1925. Convicted and fined £30 for exposing decomposed, imported meat for sale. (2) 18th Dec., 1925. Convicted and fined £1 for exposing diseased pork for sale.

(D) **Food-Poisoning.**

There has been no case of food poisoning brought to the notice of the Department.

**PUBLIC ABATTOIR AND PRIVATE SLAUGHTER-HOUSES.**

**Number of Animals slaughtered at Public Abattoir, January to December, 1925:—**

Beasts.	Sheep.	Pigs.	Calves.	Horses.
2,173	6,979	2,653	59	20

### Number and Class of Animals Found Affected with Tuberculosis.

	Bulls.	Bullocks.	Cows.	Heifers.	Calves.	Pigs.
Whole Carcases & organs.	0	3	19	3	0	33
Part do.	0	15	19	5	0	125
Organs only.	7	34	35	8	0	34
Totals ... ..	7	52	73	16	0	192

### Number and Class of Animals Affected with Disease or Conditions other than Tuberculosis.

Class.	Whole Carcase and organs affected.	Part Carcase and organs affected.	Organs only affected.	Totals.
Bulls ... ..	1 Croker	2 Actinomycosis	1 Parasitic	4
	—	—	1 Abscesses	1
Bullocks ... ..	1 Croker	4 Actinomycosis	21 Abscesses	26
	1 Inflammation	1 Abscesses	16 Cirrhosis	18
	1 Septicaemia	—	35 Parasitic	36
Cows ... ..	1 Dropsy	2 Actinomycosis	8 Abscesses	11
	1 Johne's Disease	—	13 Cirrhosis	14
	1 Septicaemia	—	4 Parasitic	5
Heifers ... ..	1 Febrile Disease	—	27 Parasitic	28
Calves ... ..	1 Emaciation	1 Inflammation	2 Abscesses	4
	1 Febrile Disease	—	—	1
Pigs ... ..	3 Crokers	—	17 Cirrhosis	20
	8 Febrile Disease	—	96 Parasitic	104
	1 Inflammation	—	—	1
	5 Jaundice	—	—	5
	2 Urticaria	—	—	2
Sheep ... ..	4 Crokers	—	3 Abscesses	7
	5 Dropsy	—	3 Parasitic	8
	1 Emaciation	—	—	1
	2 Septicaemia	—	—	2
Lambs ... ..	1 Croker	—	—	1
	Total number of animals ... ..			299

In addition to the meat detailed in the two foregoing tables a quantity of Beef, Veal, Pork, Mutton and Frozen Meat was destroyed, i.e., 445 stones 2 lbs. These items were generally in a state of decomposition.

The total weight of butcher's meat destroyed was :—

Meat	...	...	...	3,079 st.	4½ lbs.
Offal	...	...	...	872 st.	3 lbs.
				<hr/>	
				3,951 st.	7½ lbs.
				<hr/>	

### TUBERCULOSIS ORDER, 1925.

Commencing 1st September, 1925.

There were seven cows slaughtered under this Order.

#### Other Foodstuffs Destroyed.

	st.	lbs.
Bacon ... ..	—	11
Rabbits ... ..	11	0
Fish ... ..	22	5
Crabs ... ..	6	0
Fruit ... ..	8	5
Vegetables ... ..	200	0
Eggs ... ..	—	2
Tinned Meat	32	10
„ Milk ... ..	9	0½
„ Fish ... ..	10	2½
„ Fruit ... ..	37	3
„ Liquid Eggs ... ..	3	9
<hr/>	<hr/>	<hr/>
Total Weight ... ..	341	6

The total weight of foodstuffs destroyed during the year is thus 4,292 stones 13½ lbs., as compared with 2,915 stones 13½ lbs. in 1924, and 3,114 stones 7½ lbs. in 1923.

### Inspections made *re* Food, Etc.—1925.

Visits to Cowsheds, Dairies and Milkshops ... ..	243
„ „ Abattoir ... ..	375
„ „ Private Slaughterhouses ... ..	783
„ „ Markets ... ..	507
„ „ Factories, Bakehouses and Making-up Rooms ...	594
„ „ Ice-Cream Makers ... ..	100
„ „ „ Shops ... ..	3
„ „ Fried Fish Shops ... ..	90
„ „ Restaurants and Hotel Kitchens ... ..	21
„ „ Fishmongers ... ..	223
„ „ Grocers' Shops ... ..	21
„ „ Butchers' Shops ... ..	33
„ „ Tripe Boilers ... ..	53
„ „ Hide and Skin Yards ... ..	1
„ „ Knackers' Yards ... ..	4

### Sale of Food and Drugs Acts.

During the year 147 samples of food and drugs have been procured and submitted to the Public Analyst, who certified 140 samples genuine and 7 samples adulterated (i.e., 4.79 per cent. of adulteration).

TABLE I.

Nature of Sample	Adult'ed	Genuine	Informal	Formal	Total
Milk ... ..	4	73	—	77	77
Butter ... ..	—	21	6	15	21
Margarine ... ..	—	7	1	6	7
Lard ... ..	—	1	—	1	1
Cream ... ..	1	2	1	2	3
Preserved Cream ... ..	—	6	3	3	6
Honey ... ..	—	2	2	—	2
Jam (For glass) ... ..	—	14	14	—	14
Aerated Water (for glass) ... ..	—	2	2	—	2
Dried Milk ... ..	1	2	3	—	3
Coffee ... ..	—	1	1	—	1
Pepper ... ..	—	6	6	—	6
Condensed Milk ... ..	—	2	2	—	2
Sponge Cake ... ..	—	1	1	—	1
Bread ... ..	1	—	1	—	1
Totals ... ..	7	140	43	104	147

TABLE II.

Administrative action regarding samples not reported to be genuine:—

No. in Record	Date 1925	Article	Adulteration	Amount of Adulteration	Action taken
39	Apl. 28	Dried Milk	Cane Sugar	1.3 per cent.	Sample labelled "Modified," should have been labelled "Sweetened." The whole stock of Dried Milk in possession of the vendor was returned to the makers and a fresh stock obtained.
40	"	Cream	Boric Acid	0.37 per cent.	Sample should have been labelled "Preserved Cream." A fresh sample was obtained which was in order and the vendor was cautioned with respect to the labelling of the cream.
51	July 7	Milk	Added Water	3.0 per cent.	Summary proceedings taken. Vendor convicted and fined £1.
62	July 9	"	Deficient in Milk Fat	6 per cent.	The vendor asked for samples to be taken from his suppliers. This was done by the County Police who found the milk to be below the standard in milk fat. The matter was to be followed up by the County Police.
63	"	"	"	10 per cent.	
69	Aug. 26	"	"	10 per cent.	Summary proceedings taken. Case dismissed on payment of costs.
65	July 16	Bread	Unsound Flour	—	The bread was found to be "Ropy" but the matter was put right.

The following Table shows the monthly average composition of milk samples.

Month.	No. of Samples.	Milk Fat per cent.	Solids not Fat per cent.
January ... ..	11	3.63	9.11
July ... ..	17	3.38	8.79
August ... ..	16	3.76	8.79
September ... ..	12	3.6	8.78
October ... ..	6	4.23	8.89
November ... ..	9	3.8	8.91
December ... ..	6	3.55	9.03
Average for the year ... ..		3.7	8.9
Requirements of the Sale of Milk Regulations, 1901 ... ..		3.00	8.50

## PUBLIC HEALTH (MILK & CREAM) REGULATIONS, 1912 & 1917.

### Report for the year ended 31st December, 1925.

#### 1. *Milk and Cream not sold as Preserved Cream.*

	(a). Number of Samples examined for the presence of a preservative.	(b). Number in which pre- servative was reported to be present and percentage of pre- servative found in each sample.
Milk Cream.	77 2	0 1 (0.37%).

Nature of preservative in case in column (b) :—Boric Acid.  
Action taken under the Regulations in regard to it :—

This was an informal sample. The cream contained 0.37% Boric Acid and should have been labelled "Preserved Cream." A fresh sample was obtained which was in order and the vendor was cautioned with respect to the labelling of the cream.

#### 2. *Cream sold as preserved cream.*

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct.



(I). Correct statements made	...	...	7
(II). Statements incorrect	...	...	0
			—
	Total	...	7
			—

(III). Percentage of Preservative found in each sample.      Percentage stated on Statutory label.

Sample No.	Boric Acid	Percentage	Statutory label
41	0.31		" Not exceeding 0.4 per cent."
42	0.31		" " " " "
43	0.37		" " " " "
44	0.37		" " " " "
53	0.4		" " " " "
54	0.29		" " " " "
55	0.36		" " " " "

(b) Determination made of milk fat in cream sold as preserved cream.

(I). Above 35 per cent	...	...	7
(II). Below 35 per cent.	...	...	0
			—
	Total	...	7

(c) Instances where (apart from Analysis) the requirements as to labelling or declaration of preserved cream in Article V (1) and the proviso in Article V (2) of the Regulations have not been observed.

— NIL. —

3. *Thickening Substances.*

Evidence of their addition to cream or preserved cream.

— NIL. —

4. *Other Observations.*

— NIL. —

## PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

Several of the Infectious Diseases have been unusually prevalent in the year 1925. From an administrative point of view the most troublesome has been:—

### Scarlet Fever.

Throughout the summer notifications were coming in at a steady rate, and it was evident that the Elementary and Sunday Schools were playing an important part. At this period the

disease presented itself in such a mild form that its existence was frequently not suspected by parents, teachers, or even doctors. The symptoms were usually trivial; vomiting rarely occurred, and the throat was but slightly sore. The rash was so faint and transient that in many cases it must have been overlooked. The difficulty was increased by the presence of Measles and German Measles in the City, which led to mistakes in diagnosis. From time to time the notification of a fairly typical case drew attention to children who had previously escaped notice. Some of these exhibited slight desquamation, in others the tongue was suggestive. Occasionally a history of sore throat was obtained, but a few of the children had not been absent from school for even a day. Unless seen at the onset of the disease, the diagnosis has frequently been very difficult. One of the most useful features "a strawberry tongue" has been little in evidence, yet for those who have had experience of a mild epidemic of Scarlet Fever it has been sufficiently suggestive. The rash in many patients was peculiar. With a punctate throat and strawberry tongue there has sometimes been no more than a blush on the chest, which faded in the course of an hour or two. Desquamation also has been atypical in some instances, inasmuch as it only occurred on the hands or legs, and that to a slight degree.

After the summer months the disease tended to become more normal in type, though the mild cases persisted. The complications have been few and not serious. Not a death has occurred. Naturally the question of isolation became an acute problem. In October, with as many notifications in the month as there had been in the previous year, the accommodation at the Hospital proved inadequate. As many as possible of the patients were nursed at home. Although the type of Scarlet Fever has been mild it proved to be highly infectious, nevertheless, the policy of home nursing has appeared to produce no bad results, in spite of the overcrowded state of many houses. Numerous patients were discharged from the City Hospital at the end of four weeks. The results of this practice have also been satisfactory.

Throughout the epidemic the great problem has been the missed cases which must have numbered scores. Realising the importance of these, a circular letter was sent by me to all head teachers in the Elementary and Secondary Schools asking for their co-operation. As a result the Medical and Nursing Staff had many opportunities of examining children with suspicious symptoms and of dealing with them in an appropriate manner.

In spite of all efforts, however, the epidemic was most persistent.

### **Diphtheria.**

This disease has not assumed epidemic form, the total number of notifications being 48. In the early part of the year several cases occurred, but latterly only an occasional one was reported. No death was attributable to Diphtheria, although some of the patients had been ill several days before they were notified.

A supply of antitoxin can be obtained when needed through the Health Department, but patients are removed promptly to the Hospital at the request of the Doctors, and usually receive their antitoxin at the time of admission.

Swabs are also examined daily if required, for the presence of Diphtheria Bacilli, but when a patient presents clinical signs of Diphtheria, he can always be removed to Hospital if the Doctor wishes, before the swab result is available.

### **Smallpox.**

One case occurred in the City. The patient, a woman of 52, was a visitor from Gainsborough, and was notified 10 days after her arrival in the City. Arrangements were made with the Public Vaccinator to have the contacts vaccinated and they were kept under close observation. The patient made a satisfactory recovery and no further case was discovered.

### **Encephalitis Lethargica.**

Seven cases were notified, and of these four died.

### **Ophthalmia Neonatorum.**

Three cases were notified, two of them from Institutions.

### **Enteric Fever.**

Although one death was attributed to Enteric, this related to an inhabitant of the town who developed the disease in a Mental Hospital where he died.

### **Pneumonia (all forms).**

Twenty-one cases were reported, and 67 deaths were attributed to this disease.

**Erysipelas.**

Fifteen cases occurred and no deaths.

The above includes all the cases of notifiable disease, except those due to Tuberculosis.

As regards non-notifiable diseases, Measles, Whooping-cough, Chicken-pox, and Mumps have all been prevalent. The local Education Authority supplies the Public Health Department with lists showing the number of absentees on account of these diseases. As regards all infectious conditions, close co-operation exists between the two Departments.

Unfortunately little has been done in the case of Measles, except to arrange for home nursing. Owing to the prevalence of Scarlet Fever there has been no accommodation available for non-notifiable diseases in the City Isolation Hospital.

Six deaths were attributed to Measles and seven to Whooping-cough, very striking figures, inasmuch as the diseases are regarded by the general public as minor complaints.

Influenza has not been prevalent in epidemic form, but it has been responsible for 18 deaths.

**THE CITY ISOLATION AND SMALLPOX HOSPITALS.**

During the year the Staff of the City Hospital has been sorely tried and it is most creditable that the results have been so good.

The epidemic of Scarlet Fever has taxed the resources of the Hospital to the utmost, and it has required considerable manipulative skill to accommodate all the patients that have been admitted. The Nursing Staff has experienced a certain amount of inconvenience, but each member has performed her duties ungrudgingly. Several of the Nurses and Maids have contracted Infectious Diseases, five suffering from Scarlet Fever and one from Diphtheria. So far no attempt has been made to employ the Shick and Dick tests to test the immunity of the Staff, but the matter is receiving consideration.

As regards the Smallpox Hospital, when this has been opened, Nurses have been supplied from the City Hospital.

The epidemic of Scarlet Fever has demonstrated that the accommodation at the City Hospital is neither adequate nor suitable. Sufficient provision has not been made for observation or complicated cases. The only small wards available are those

attached to the big pavilions. The Council has therefore decided to provide a block of eight cubicles which should prove most useful.

The question of central heating is also receiving consideration.

The accommodation at the Smallpox Hospital is likewise limited. Should an epidemic occur it would not be possible to erect temporary buildings in the grounds as the site is too small.

The Council is also considering the matter of another ambulance. The only one available has to be used for the removal of all cases of Infectious Diseases, which involves a certain risk. Moreover, it can only take one stretcher case at a time.

## THE LABORATORY OF THE PUBLIC HEALTH DEPARTMENT.

A limited amount of work is done of an essential nature. The examinations are mainly in connection with throat swabs for the detection of the Diphtheria Bacillus and of sputum for the presence of the Tubercle Bacillus.

The following table shows the number of specimens examined at the Health Laboratory during the year 1925 :—

EXAMINED.	Positive.	Negative	Total
Diphtheria (Swabs) ... ..	145	681	826
Tuberculosis (Sputum) ... ..	177	417	594
Ringworm (Hair) ... ..	44	29	73
Other examinations ... ..	6	28	34
Totals ... ..	372	1,155	1,527

## DISINFECTION.

Routine disinfection is practised after the removal of all cases of notifiable disease to Hospital and at the request of the Medical Attendant when the patient is nursed at home and considered to be no longer infectious.

In certain instances disinfection is performed in connection with non-notifiable disease such as Measles.

Spraying with Formalin is the method usually employed for disinfecting rooms. Infected articles are conveyed to the City Hospital, where a steam disinfector is provided.

No provision is made for the cleansing of verminous persons. There are no public baths in the City, other than swimming baths. Verminous clothing can be disinfected by steam at the City Hospital, and infested premises are fumigated.

#### Summary of Year's Work.

Premises disinfected ... ..	613
Rooms disinfected ... ..	3180
Beds disinfected ... ..	464
Bedding disinfected ... ..	559
Mattresses disinfected ... ..	182
Wearing Apparel disinfected ... ..	15
Carpets and Rugs disinfected ... ..	26
Beds destroyed ... ..	21
Bedding destroyed ... ..	7
Mattresses destroyed ... ..	30
Wearing apparel destroyed ... ..	7
Carpets and Rugs destroyed ... ..	2

#### SCARLET FEVER.

Year.	Number of Cases notified.	Number of Cases removed to Hospital.	Number of Deaths.
1921	37	21	0
1922	41	21	0
1923	64	45	1
1924	64	43	1
1925	440	237	0

#### DIPHTHERIA.

Year.	Number of Cases notified.	Number of Cases removed to Hospital.	Number of Deaths.
1921	99	80	9
1922	50	34	3
1923	38	31	3
1924	60	55	4
1925	48	47	0

## SMALLPOX.

Year.	Number of Cases notified.	Number of Cases removed to Hospital.	Number of Deaths.
1921	0	0	0
1922	1	1	0
1923	1	1	0
1924	0	0	0
1925	1	1	0

1923 (2 Cases were admitted to Hospital for Observation).

## ENCEPHALITIS LETHARGICA.

Year.	Number of Cases notified.	Number of Cases removed to Hospital.	Number of Deaths.
1921	5	1	3
1922	0	0	0
1923	1	0	0
1924	15	7	5
1925	7	4	4

## PUERPERAL FEVER.

Year.	Number of Cases notified.	Number of Cases removed to Hospital.	Number of Deaths.
1921	1	0	1
1922	2	0	0
1923	0	0	1
1924	4	0	1
1925	0	0	0

## OPHTHALMIA NEONATORUM.

Year.	Number of Cases notified.	Number of Cases removed to Hospital.	Number of Deaths.
1921	3	0	0
1922	5	2	0
1923	8	3	0
1924	6	1	0
1925	3	0	0

## ENTERIC FEVER.

Year.	Number of Cases notified.	Number of Cases removed to Hospital.	Number of Deaths.
1921	1	1	0
1922	1	1	0
1923	0	0	0
1924	4	4	1
1925	0	0	0

1925 (1 Enteric Lincoln Inhabitant notified and died outside the City).

## PNEUMONIA (ALL FORMS).

Year.	Number of Cases notified.	Number of Cases removed to Hospital.	Number of Deaths.
1921	6	0	32
1922	18	0	79
1923	12	0	51
1924	18	0	89
1925	21	0	36



## ERYSIPELAS.

Year.	Number of Cases notified.	Number of Cases removed to Hospital.	Number of Deaths.
1921	16	0	0
1922	13	0	0
1923	9	0	0
1924	10	0	0
1925	15	0	0

## MALARIA.

Year.	Number of Cases notified.	Number of Cases removed to Hospital.	Number of Deaths.
1921	2	0	0
1922	0	0	0
1923	0	0	0
1924	0	0	0
1925	0	0	0

## CEREBRO-SPINAL FEVER.

Year.	Number of Cases notified.	Number of Cases removed to Hospital.	Number of Deaths.
1921	2	2	0
1922	0	0	0
1923	0	0	0
1924	0	0	0
1925	0	0	0



## TUBERCULOSIS.

## New Cases and Mortality During 1925.

The following are the particulars of new cases and of deaths from the disease in 1925 :—

AGE PERIODS.	NEW CASES.				DEATHS.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0... ..	—	—	—	—	—	—	1	1
1... ..	—	1	6	1	1	2	5	1
5... ..	4	9	2	4	—	—	—	—
10... ..	5	10	5	3	—	1	—	—
15... ..	4	7	1	4	—	4	1	—
20... ..	4	10	—	1	6	6	—	—
25... ..	6	24	2	2	7	4	2	—
35... ..	15	5	—	1	11	1	1	1
45... ..	8	4	—	1	7	2	—	—
55... ..	3	3	—	—	9	1	—	—
65 and upwards	—	1	—	—	—	2	—	—
Totals ... ..	49	75	16	17	41	23	10	3

The number of primary notifications was 152, and the number of cases which came to the knowledge of the Medical Officer of Health otherwise was twenty-one.

Generally speaking Tubercular conditions are promptly notified, but in a few cases patients obviously Tubercular have not been notified until moribund. Apparently some medical practitioners hesitate to make a diagnosis on clinical grounds if the Tubercle Bacillus has not been found in the sputum.

Of the 77 deaths, 59 have been notified and 18 have not been notified.

#### Public Health (Prevention of Tuberculosis) Regulations, 1925.

The Public Health Department supervises carefully the milk trade of the town; it has not been found necessary to take proceedings against any employee under these Regulations. So far as is known no Tubercular patient is employed in connection with any dairy.

**Public Health Act, 1925, Section 62.**

No application has been made to a court of summary jurisdiction for an order to remove to Hospital any person suffering from Tuberculosis and considered to be in an infectious state.

**TUBERCULOSIS SCHEME.****Tuberculosis Dispensary.**

This is situated in Bank Street, at the back of the Public Health Department, and is not an imposing building. The rooms used for Tuberculosis are also utilised for V.D. Clinics. They are included with the Laboratory of the Public Health Department and certain rooms used by the Sanitary Inspectors. The Clinic comprises a waiting-room and a consulting room only. The latter is not suitable for Tuberculosis work as it is small and noisy, owing to the traffic in the adjoining street.

The premises are receiving consideration and alterations are contemplated.

The Medical Officer of Health and Assistant Medical Officer of Health are the Tuberculosis Officers, and they are assisted by two Nurses. One of these gives half of her time to V.D. work, but in future will devote herself entirely to Tuberculosis.

The Assistant Tuberculosis Officer is also Resident Medical Officer at the City Hospital and Dawber Sanatorium.

The latter is a substantial two-storied building originally intended for patients of both sexes. It is now used for males only, including boys. There are medium and small sized wards suitable for early and advanced cases, together with good dining and recreation rooms, and sleeping quarters for the nurses.

The site is contiguous to that of the City Isolation Hospital. The Administrative Block of the latter is common to both Institutions. Female patients are received in a separate building, which is outside the City Hospital enclosure, but nearer to it than it is to the Male Tuberculosis Block.

The Female Ward is of similar construction to those erected for Infectious Diseases. It consists of a central duty room with a large ward on each side and two small wards leading out of it. There are no separate dining or recreation rooms.

Women and children are under the same roof, but in separate wards. At the moment the Side Wards provide the only accommodation for advanced cases, but these had been nursed in the "Enteric" Pavilion until this was required to deal with an epidemic of Scarlet Fever. There are also five shelters used in connection with the Female Block. The Council now proposes to erect a cubicle block for Infectious Diseases, in which case it is likely that the "Enteric" Ward will again become available for advanced cases of Tuberculosis.

The number of beds available for Tuberculosis patients, and the type of case for which these beds are used is as follows:—

	PULMONARY TUBERCULOSIS.		
	"Sanatorium" Beds.	"Hospital" Beds.	Total.
Adult Males ...	20	4	24
Adult Females ...	8	2	10
Children under 15 ...	8	—	8
Total ...	36	6	42

When necessary one of the above beds has to be utilised for Observation or Non-Pulmonary Cases.

#### **Co-operation with Hospitals and other Institutions.**

The County Hospital is always willing to perform X-Ray Examinations at the request of the Tuberculosis Officer, and two beds are reserved in that Institution for suitable cases of surgical Tuberculosis.

The School Medical Service is in close touch with the Tuberculosis Officers who take Clinics on the premises of the local Education Authority.

#### **Co-operation of Medical Practitioners.**

Numerous patients are sent to the Dispensary by local Practitioners, but they are mainly of the working classes. Probably a more commodious building would tempt others to come for an opinion and thereby reduce the number of patients notified in late stages of the disease.

Several of the local Practitioners request the Tuberculosis Officers to visit patients in their homes for an opinion as to diagnosis or treatment.

#### **Arrangements for following up Patients**

When the diagnosis is doubtful the patient is asked to attend the Dispensary at frequent intervals until a diagnosis is made.

#### **Examination of Contacts.**

When a notification is received one of the nurses visits (unless the doctor attending has requested otherwise) and arranges among other things for the examination of contacts. School children are examined at the School Clinic, Infants under five at the Welfare Centre, and adults at the Dispensary.

In future a special Clinic for children will be held at the Dispensary.

There is a need for more contacts to submit themselves for examination and it is hoped that by increasing the number of visits made by the nurses, better results will be obtained.

#### **Special methods of Diagnosis and Treatment.**

The Council has no special methods of diagnosis or treatment available. The County Hospital, however, will usually oblige with an X-Ray report.

#### **Provision of Dental Treatment**

Arrangements have been made with a dentist to fill or extract the teeth of patients recommended by the Tuberculosis Officers, but dentures are not provided.

#### **Provision of extra nourishment and home nursing.**

Milk and Cod Liver Oil and Malt are provided for suitable cases. When necessitous, the patient is supplied free.

School children obtain these through the Education Committee.

Very few drugs are supplied.

Nursing in the Home is undertaken by the Bromhead Nursing Institution for a payment of £65 per annum on the recommendation of the Tuberculosis Officer.

### **The relative value of each form of Treatment.**

Sometimes excellent results are obtained by giving an allowance of Milk or Cod Liver Oil and Malt. There is no doubt that many of the patients are unable to obtain suitable nourishment at home.

For the same reason one frequently observes an increase in weight when a patient is admitted to the Sanatorium and a loss soon after he is discharged. In this case, however, the question of housing, rest and home circumstances are auxiliary factors.

### **Treatment of Non-Pulmonary Tuberculosis.**

Early cases of Tuberculosis of joints, bones, etc., are admitted to the Dawber Sanatorium.

When operative interference is necessary the patient is sent to the County Hospital, which reserves two beds for City cases.

Surgical apparatus can be obtained in the case of adults with the aid of the Dawber Relief Committee and in respect of school children with the help of the Children's Care Committee.

### **Arrangements for Care and After-Care.**

There is no After-Care Committee and there is no doubt that one might do good work.

Many patients have serious problems, particularly in respect of employment and housing.

Owing to the large amount of unemployment in the City it is very difficult for a Tuberculosis patient to obtain suitable work. The fact that an applicant has had Tuberculosis often leaks out, and the door is promptly closed.

Apart from the possibility of infection, employers realise that a Tuberculosis patient is rarely able to work regularly or to do the same amount of work in a day as a normal individual. Consequently, very few Tuberculosis patients do work.

Housing is a still more acute problem. No definite policy has been adopted by the Council, but one is badly needed.

It seems almost waste of energy and time to keep a patient at the Sanatorium for several months and then to send him home to an overcrowded, insanitary house. So far little help has been given to these unfortunate individuals.

Generally having no means of livelihood they are unable to pay the rent of a Corporation house.

Two families have recently provided a good illustration of the difficulties encountered. Two men were discharged on the same day from the Sanatorium and returned to their families, who had been sharing a small house. This consisted of a living-room and two bedrooms. In addition to the men were their wives and eight children. Soon after their fathers returned home the children developed Measles, and were then specially susceptible to Tuberculosis. It was impossible to obtain better houses for these families, with several children they were unable to secure rooms, so the only thing that could be done to relieve the situation was to provide the men with shelters, which they placed on an allotment. It probably would be a good investment for the Corporation to grant Municipal houses to such patients and help them to pay the rent, rather than keep them in the Sanatorium for long periods, or allow them to stay at home and infect their wives and families. It will be remembered that the cost of maintenance of one patient in the Sanatorium exceeds £2 per week.

## VENEREAL DISEASES.

(a) The Clinics are held in two buildings.

Two Sessions are held each week for men and two for women at the Tuberculosis Dispensary. In addition there is a Weekly Clinic at the City Welfare Centre for married women. The first-named Clinics are conducted by the V.D. Officer from Grimsby; that at the Welfare Centre is held by the Assistant Medical Officer for Maternity and Child Welfare.

(b) This scheme has been in existence for some years.

(c) The Sessions are sufficient, but the building is unsuitable internally. The situation is very convenient as the Clinic can be approached through three different entrances.

(d) The scheme requires to be modified in so far as the V.D. Medical Officer from Grimsby is concerned. He needs more time to conduct the Clinics at Grimsby. To meet this difficulty a new scheme has been devised in collaboration with the Grimsby and Lindsey Councils and forwarded to the Ministry of Health for approval.

(e) Generally speaking, the Practitioners send their V.D. cases to the Clinics.



(f) The general public appears to be well informed as to the facilities provided for diagnosis and treatment, and patients seem ready to avail themselves of these facilities. It is intended, however, to more thoroughly advertise the existence of the Clinics.

The Clinic is open daily (except Sunday) for irrigations for both sexes. The facilities are ample.

1. The Practitioners in the area have not been informed recently of the facilities provided for diagnosis and treatment, but judging from the number of patients sent by them to the Clinics they are well aware of the arrangements.

2. The number of Medical Practitioners in the area who are qualified to receive free supplies of arsenobenzol compounds is ten.

3. Two hundred and eighty-one doses of Sulfarsenol have been supplied, the number of cases is not known.

4. Thirty-two samples of blood were sent by local Doctors, and 64 other samples by the County Hospital for Wasserman Tests.

5. No action has been taken under the V.D. Act, 1917.

I give below the statistics for 1925 :—

Number of new cases who attended the Clinics from 1st January, 1925, to 31st December, 1925, and the disease from which they were suffering, are :—

	Syphilis.	Soft Chancre.	Gonorrhoea.	Other than V.D.	Total.
Males ... ..	13	1	44	26	84
Females ... ..	16	0	12	35	63
Children ... ..	11	0	5	15	31
Totals ... ..	40	1	61	76	178

Total number of attendances at the Clinic during the year :—3298.

(a) Seen by Doctor ... .. 1805

(b) For Intermediate Treatment ... .. 1493

Pathological Specimens examined at the Clinic ... .. 141

Pathological Specimens sent to the Nottingham Laboratory 215

(a) Blood Examinations ... .. 208

(b) Cerebro-Spinal Fluid ... .. 7

## MATERNITY AND CHILD WELFARE.

During the year 8 Midwives notified their intention to practice within the City. Of these 3 are in the service of the Corporation.

Of the 8 Midwives 2 were in *bona fide* practice in 1901.

Until the present Medical Officer of Health was appointed in June, 1925, the Assistant Medical Officer for Maternity and Child Welfare had been the Inspector of Midwives. 18 visits to Midwives were made during the year. These were either routine or special visits for enquiry.

In accordance with the rules of the Central Midwives Board the following notices have been received from Midwives :—

Records of sending for medical help ... ..	40
„ „ substituting artificial for breast feeding ...	10
„ „ death of child ... ..	1
„ „ laying out of dead body ... ..	Nil
Still-births notified. ... ..	17

## NOTIFICATION OF BIRTHS ACT, 1907.

In 1925, 1234 births were notified as follows :

By Doctors ... ..	286
„ Midwives ... ..	855
„ Parents ... ..	93

Of the births notified by Midwives in 692 cases the notifications were sent by the Corporation's Midwives on the District, or at the Maternity Home.

This Institution is becoming steadily more popular as the following figures show :—

When accommodation permits patients from outside the City are admitted and the figures include these "Outside" cases.

## CITY MATERNITY HOME.

### *Patients Admitted.*

Lying-in cases ... ..	256
Ante-Natal cases ... ..	12
Post-Natal cases ... ..	1
Total ... ..	<hr/> 269 <hr/>



(d) *Infant.*

Prematurity (5 minutes)	...	...	...	...	1	
"    (15 hours)	...	...	...	...	1	
"    (1 day)	...	...	...	...	2	
Rise of Temperature (5 days)	...	...	...	...	1	
Atelectasis Neonatorum (7 days)	...	...	...	...	1	
Convulsions(3 days)	...	...	...	...	1	
"    (2 days)	...	...	...	...	1	
Jaundice (3 days)	...	...	...	...	1	
Meningitis (5 days)	...	...	...	...	1	
Septic Spots (3 days)	...	...	...	...	1	
Asphyxia (5 mins)	...	...	...	...	1	12
Number of cases notified as Puerperal Sepsis						Nil
"    "    "    in which Temperature rose above 100.4 for 24 hours with rise of pulse rate	...	...	...	...	4	
Number of cases notified as Ophthalmia Neonatorum	...					Nil
"    "    "    of inflammation of the eyes, however slight					5	
"    "    Infants not entirely breast fed while in the Institution and reasons for not breast feeding :—						
Mother returning to work	...	...	...	...	3	
Epileptic	...	...	...	...	1	
Baby adopted	...	...	...	...	1	
Mother refused	...	...	...	...	3	
Anaemia	...	...	...	...	10	
Cardiac Disease	...	...	...	...	1	
Tuberculosis	...	...	...	...	4	23
Number of maternal deaths with causes :—						
Double Pneumonia and premature birth (Doctor's emergency case)	...	...	...	...	1	
Pernicious Anaemia	...	...	...	...	1	2
Number of foetal deaths (still-born or within ten days of birth) and their causes, and the results of the post-mortem examination, if obtainable :—						
Miscarriage	...	...	...	...	...	1
Stillborn	...	...	...	...	...	14
Reasons :—						
Caesarean Section	...	...	...	...	1	
Macerated	...	...	...	...	3	
Instrumental Delivery	...	...	...	...	3	
Breech (Primipara)	...	...	...	...	1	
Placenta Praevia	...	...	...	...	2	
Malformation	...	...	...	...	1	
Prematurity	...	...	...	...	3	14

Died within 10 days of birth ... .. II

Reasons :—

Prematurity	...	...	...	...	5
Atelectasis Neonatorum	...	...	...	...	2
Icterus Neonatorum	...	...	...	...	1
Convulsions ...	...	...	...	...	3 II

It will be observed that a considerable amount of good Midwifery is done at the Maternity Home, which is helping many families in the City and also providing a good training centre for Pupil Midwives. Thirteen of these entered for the examination of the Central Midwives Board and all were successful.

Throughout the City two women died as the direct result of pregnancy or parturition. One was a case of abortion followed by Sepsaemia.

In close proximity to the Maternity Home is the Infant Welfare Centre. This has recently been enlarged by the Maternity and Child Welfare Committee and provides premises which are commodious and fairly central.

The following Clinics, etc., are available :—

- (a). *Ante-Natal Clinics* are held on two afternoons of the week. The attendances are increasing and will continue to do so. It is anticipated that every woman booked by the District Midwives, or at the Maternity Home will eventually be examined at the Clinic early in pregnancy. It is also hoped that the Midwives not employed by the Corporation will induce their patients to attend for examination.

A certain number of Post-Natal cases are also seen at the Clinic.

In 1925 there were 336 cases on the register and 715 attendances were made.

Among these 336 women 76 were normal.

In other words 77.3 per cent. of those who attended the Clinic were abnormal and needed advice to a greater or less degree.

These abnormal patients were dealt with as follows :—

Treated at the Clinic	...	...	180
„ „ their homes	...	...	58
Referred to Dentist	...	...	7
„ „ County Hospital	...	...	3
„ „ District Nursing Association	...	...	6
Transferred to Maternity Home...	...	...	6

- (b). *A special V.D. Clinic* is also held once a week for Ante and Post-Natal cases. Treatment is given when necessary by a nurse between the Clinics.

For 34 weeks the attendances have been as follows :—

Number of cases on Register ...	42
„ „ attendances ...	135

- (c). *Dental Clinic.*

Dental treatment is now available once a week for Mothers or Expectant Mothers and for children not of school age.

For a period of 25 weeks the figures are :—

Number of cases inspected ...	388
„ „ „ treated ...	169
These 169 were treated as follows :—	
Extractions with local anaesthetic	88
„ „ general „	57
Fillings ...	24

- (d). *School for Mothers.*

The School for Mothers like the Clinics has been somewhat hindered in its activities by alterations to the premises. Nevertheless, excellent work has been done and the Mothers are greatly indebted to the Voluntary Workers. In addition to sewing and cooking demonstrations, talks on hygiene are given by the Health Visitors. During a period of 19 weeks 43 Mothers on the Register recorded 456 attendances.

- (e). *Necessitous Cases* receive careful consideration and are helped in various ways. Nearly a day is devoted every week to consideration of applications which have to be made on a most comprehensive form.

The nature of the assistance given and the cost thereof is shown by the details appended for the year :—

	<i>Expectant Mothers.</i>	<i>Nursing Mothers.</i>	<i>Children under 5.</i>	<i>Total.</i>
Number of cases ...	172	201	668	1041
Number of attendances ...	1447	2332	14147	17926
<i>Number of cases.</i>		<i>Cost.</i>		
Milk and Food ...	1041	...	£1335 19 1	
Home Helps ...	51	...	149 19 6	
			(£86-12-5 has been refunded).	
Home Nursing ...	10	...	11 0 11	
Maternity Home cases ...	15	...	57 6 8	
District cases ...	12	...	9 5 9	
Medical Help ...	21	...	33 16 0	
			<hr/>	
			£1597 7 11	

Under the heading of necessitous cases is considered the unmarried mother who is treated in all respects as a married one. She can be received into the City Maternity Home where no distinction is made. When due to leave the home the mother either makes her own arrangements, or she is helped as far as possible to find a suitable foster-mother or home for the child.

(f). *Welfare Clinics.*

Three afternoons are devoted to Infant Consultations, all of which are held at the Newland Centre. A vast amount of work is done, much remains undone. The Medical Staff is so much occupied in dealing with abnormal children that very little attention can be given to those apparently healthy. At present it is not possible for every child who attends the Clinic for the first time to be examined by a Doctor.

During the year in question very many defects have been discovered. Infectious Diseases, particularly Measles and Whooping-Cough have been prevalent and sequelae such as Bronchitis, Ear-discharge and Debility have been much in evidence.

Apart from these, conditions due to faulty feeding are far too common. But a small proportion of the Mothers who attend the Clinics observe modern methods of feeding. Some Mothers dislike breast feeding, others give it up on the slightest provocation and experiment with one or many, usually the latter, different kinds of food. Frequent and irregular feeding is also practised. It is not surprising that many babies develop indigestion. It is usual then for the Infant to receive a dose of castor oil or other aperient which only temporarily relieves the condition.

Again, Rickets is quite a common complaint. As is well known, if a child is to avoid Rickets it must have a well-balanced diet, plentiful supplies of fresh air and sunlight, with adequate exercise. There is no doubt that in spite of the assistance given by the Maternity and Child Welfare Committee, some parents, especially those with large families, do find it difficult to provide suitable food for their children. There is a tendency to give excess of starchy food which is regarded as cheap and filling, but will not take the place of milk and fat in the Infant's dietary.

It is evident that much patience, tact and sympathy are needed to emphasise the importance of correct feeding and to bring it about by every possible means.

The following table gives details of attendance at the Infant Clinic for a period of 44 weeks :—

**Infant Consultations.**

Number of children on the register ...	...	2504
Total number of attendances ...	...	13039

Number of babies first visits					Number of visits by babies who have previously attended.					Kesteven Babies	TOTAL.
Under 1 yr.	Under 2 yrs.	Under 3 yrs.	Under 4 yrs.	Under 5 yrs.	Under 1 yr.	Under 2 yrs.	Under 3 yrs.	Under 4 yrs.	Under 5 yrs.		
733	137	142	107	92	5364	3050	1493	871	631	419	13039

## WORK OF THE HEALTH VISITORS.

In addition to the assistance given at Clinics the Health Visitors have made a large number of visits. Not only do they give advice to the parents but they make reports on the sanitation and general housing conditions.

The following table shows the number of Home Visits paid by the Health Visitors during the period under report:—

	Breast fed.	Bottle fed.	Total.
First visits to infants ...	842	180	1022

Re-visits under					Special Visits.	Visits to Illeg. Infants.	Lost Visits.	Total.
1 yr.	2 yrs.	3 yrs.	4 yrs.	5 yrs.				
1921	1347	1085	545	1716	1125	120	328	8187

The following unsatisfactory housing conditions were found at the visits:—

Houses where parents are in lodgings ...	120
„ where two or more families occupy separate rooms ...	185
„ overcrowded ...	47
„ dirty ...	14
„ damp ...	25
„ with unsuitable food storage accommodation ...	174
„ with no through ventilation ...	49
„ infested with vermin ...	17
„ without laundry accommodation ...	90
Referred to the N.S.P.C.C. ...	2



## Sanitary Defects.

No ash bins	...	...	...	...	...	...	41
Defective ash bins	...	...	...	...	...	...	21
„ water closets	...	...	...	...	...	...	7
„ drains	...	...	...	...	...	...	10
Houses in bad repair	...	...	...	...	...	...	23
Other various defects	...	...	...	...	...	...	21

## INFANTILE MORTALITY.

CAUSES OF DEATH.	Under 1 week.	1-3 weeks.	3-3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total Deaths Under 1 Year.		
										M	F	Total
										All causes { Certified .. ..	29	6
{ Uncertified .. ..	2	..	..	..	2	..	..	..	..	..	2	2
Smallpox .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Chicken pox .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Measles .. ..	..	..	..	..	..	1	..	..	..	1	..	1
Scarlet Fever .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Whooping Cough .. ..	..	..	..	..	..	..	2	1	..	3	..	3
Diphtheria and Membranous Croup .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Tubercular Meningitis .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Abdominal Tuberculosis .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Other Tuberculous Diseases .. ..	..	..	..	..	..	..	1	1	..	1	1	2
Meningitis (not Tuberculous) .. ..	..	1	..	..	1	..	..	..	..	1	..	1
Convulsions .. ..	1	..	..	..	1	1	1	..	..	1	2	3
Laryngitis .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Bronchitis .. ..	..	..	..	..	..	4	1	1	..	1	5	6
Pneumonia (all forms) .. ..	..	..	..	..	..	..	4	3	3	3	7	10
Diarrhoea .. ..	..	..	..	..	..	..	1	..	..	..	1	1
Enteritis .. ..	..	..	..	..	..	3	..	1	..	2	2	4
Gastritis .. ..	..	..	..	..	..	2	1	..	..	1	2	3
Syphilis .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Rickets .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Suffocation, overlying	..	..	..	..	..	..	..	..	..	..	..	..
Injury at birth .. ..	1	..	..	..	1	..	..	..	..	..	1	1
Atelectasis .. ..	2	1	..	..	3	..	..	..	..	2	1	3
Congenital Malformations .. ..	..	..	1	..	1	..	..	..	..	1	..	1
Premature birth .. ..	25	3	2	3	33	..	1	..	..	18	16	34
Atrophy, Debility and Marasmus .. ..	..	..	..	..	..	1	1	..	..	1	1	2
Other Causes .. ..	2	1	..	..	3	1	..	1	..	4	1	5
Epilepsy .. ..	..	..	..	..	..	..	..	..	..	..	..	..
TOTALS .. ..	31	6	3	3	43	13	13	8	3	40	40	80

There were 80 deaths of Infants under one year belonging to the City. Six of these children were illegitimate.

The Infantile Mortality rate was 70.4 but for illegitimate children it was 127.6.

The most important causes of death were :—

- (a) Infectious Diseases.
- (b) Respiratory Complaints.
- (c) Gastro-Intestinal Conditions.
- (d) Prematurity.

The prevalence of the first two has already been mentioned, and as regards the third the importance of correct feeding has been emphasized. The fourth and biggest group is a great problem. It has been suggested that the number in Lincoln is due to a certain extent to unemployment. There is no evidence of this and the proportion is no higher than it is in districts comparatively prosperous. The importance of Ante-Natal work is, however, obvious.

Some of the above deaths were investigated and details obtained as to feeding, etc. :—

Total number of deaths	...	...	...	...	80
Died shortly after birth	...	...	...	...	22
Inquest held	...	...	...	...	1
Number not investigated	...	...	...	...	10
Breast fed	...	...	...	...	15
Artificially fed	...	...	...	...	31
Mixed feeding	...	...	...	...	1

Of the artificially and mixed fed infants there were : —

Fed on breast and dried milk	...	...	...	1
„ „ breast and proprietary foods	...	...	...	0
„ „ dried milk	...	...	...	21
„ „ cows milk	...	...	...	6
„ „ proprietary preparations	...	...	...	4

The following unsatisfactory housing conditions were found at the visits :—

Houses where parents were in lodgings	...	...	...	0
„ where two or more families occupy separate rooms	...	...	...	1
„ overcrowded	...	...	...	7

Houses dirty and ill-kept	...	...	...	...	0
„ damp and dark	...	...	...	...	3
„ with unsuitable food storage accommodation	...	...	...	...	4
„ with no through ventilation	...	...	...	...	3
„ infested with vermin	...	...	...	...	0

#### Sanitary Defects.

No ash bins	...	...	...	...	0
Defective water closets	...	...	...	...	0
Condemned houses	...	...	...	...	2
Yard in bad repair	...	...	...	...	1

### DISEASES AFFECTING PARTURIENT WOMEN, INFANTS & YOUNG CHILDREN.

No case of puerperal fever was notified in 1925, but provision is made for nursing septic cases at the Maternity Home, where two beds are available.

#### Ophthalmia Neonatorum.

Infants suffering from this disease are admitted into the County Hospital and also into the City Isolation Hospital. Cases notified in 1925:—

- Case (a) Notified from County Hospital—Not resident in City—Result not available.
- „ (b) Do. Do.
- „ (c) Treated at Home—Vision unimpaired.

Measles and Whooping-Cough, as already mentioned, have been very prevalent in 1925.

In normal years it would be possible to admit severe cases to the City Hospital. Unfortunately no beds have been available during the year under consideration, on account of the epidemic of Scarlet Fever. Home nursing is undertaken by the Bromhead Nursing Institution. Cases of Epidemic Diarrhœa can also be nursed at home if required; when accommodation permits beds would be available at the City Hospital. There has been no outbreak of this disease of recent years.

Among children under five, 5 deaths were attributed to Measles and 6 to Whooping-Cough in 1925.

## PROGRESS IN MATERNITY AND CHILD WELFARE.

It would appear that the Maternity and Child Welfare scheme might well be extended in the following directions:—

- (a) Increase in Ante-Natal Clinics.
- (b) Increase in Infant Welfare Clinics.
- (c) Provision of massage and of "light" treatment for debilitated children, those suffering from Rickets and certain cases of Deformity.
- (d) A sick nursery for infants suffering from nutritional disorder would be a great asset.
- (e) Extra lectures and demonstrations to mothers and expectant mothers.

### FORM 572.—1925.

The Administration of the Factory and Workshop Act, 1901, in connection with  
**FACTORIES, WORKSHOPS AND WORKPLACES.**

1.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.		Including Inspections made by Sanitary Inspectors.			
PREMISES.		Number of			
		Inspections.	Written Notices.	Prosecutions.	
Factories (Including Factory Laundries) ... ..		416	3	0	
Workshops (Including Workshop Laundries) ... ..		428	13	0	
Workplaces ... ..		338	0	0	
	Total ... ..	1182	16	0	
2.—DEFECTS FOUND IN FACTORIES WORKSHOPS AND WORKPLACES.		Number of defects.			
PARTICULARS.		Found	Remedied.	Referred to H.M. Inspector	Number of Prosecutions.
Nuisances under the Public Health Acts:—					
Want of cleanliness ... ..		13	13	2	0
Want of ventilation ... ..		0	0	0	0
Overcrowding ... ..		0	0	0	0
Want of drainage of floors ... ..		0	0	0	0
Other nuisances ... ..		2	2	0	0
Sanitary accommodation	{ Insufficient ... ..	{ 2	{ 2	{ 0	{ 0
	{ Unsuitable or defective ... ..	{ 3	{ 3	{ 0	{ 0
	{ Not separate for sexes ... ..	{ 1	{ 1	{ 0	{ 0
Offences under the Factory and Workshop Acts:—					
Illegal occupation of underground bakehouse (s.101)		0	0	0	0
Other Offences ... ..		0	0	0	0
	Total ... ..	21	21	2	0

## CANAL BOATS ACT.

## Annual Report for the Year Ended 31st December, 1925.

Number of boats on the Register	...	...	51
"    "    "    " inspections made	...	...	29
"    " men on board	...	...	52
"    " women on board	...	...	7
"    " children on board	...	...	1
Legal Proceedings taken	...	...	0
Cases of Infectious Diseases	...	...	0
Detention of Boats for cleansing	...	...	0
Number of Boats believed to be available	...	...	51
"    " Motor propelled Boats registered	...	...	1

## Infringement of the Acts and the Regulations with respect to :—

(a) Registration	...	...	...	...	3
(b) Notification of change of Master	...	...	...	...	1
(c) Certificates	...	...	...	...	14
(d) Marking	...	...	...	...	5
(e) Overcrowding	...	...	...	...	0
(f) Separation of Sexes	...	...	...	...	0
(g) Cleanliness	...	...	...	...	2
(h) Ventilation	...	...	...	...	0
(i) Painting	...	...	...	...	4
(j) Provision of water cask	...	...	...	...	1
(k) Removal of Bilge water	...	...	...	...	0
(l) Notifications of Infectious Diseases	...	...	...	...	0
(m) Admission of Inspectors	...	...	...	...	0

## RATS AND MICE (DESTRUCTION) ACT, 1919.

The Chief Sanitary Inspector has supplied me with the following information :—

*Rat Week—2nd-7th November, 1925.*

During Rat Week 351 circulars were sent out and advertisements were put in all the Local papers. By the kindness of two of the Picture House Proprietors a most interesting Film dealing with the subject was shown twice nightly.

Only 54 circulars were returned and of these 28 stated they had no rats on the premises in these days. 297 circulars were not returned and it is fair to assume that these 297 persons have no trouble with rats or mice.

The returned circulars show that all methods have been used for the destruction of rats and 235 have been picked up dead, while those estimated to have been killed are 500 (including those estimated killed in the sewers).

The following summary shows some of the work which was done :—

Number of premises treated	...	...	...	...	133
„ „ baits laid	...	...	...	...	1525
„ „ „ taken	...	...	...	...	1016
„ „ dead rats found killed by poison	...	...	...	...	58
„ „ rats caught by dogs and ferrets	...	...	...	...	165
„ „ „ „ in traps	...	...	...	...	21
„ „ „ „ on Dak Lime Card	...	...	...	...	8
„ „ „ killed by Cyanogas	...	...	...	...	28
„ „ „ „ as shown by returned circulars	...	...	...	...	235

The Commons Warden dealt with the Commons, laying poison baits in the rat holes in the drain banks and hedgerows. Baits were also laid at the West Common Baths, the Ornamental Pond, the Island on Brayford, the Asphalt yard and the Highways Depot. The hedgerows and allotments by the South Common were gassed with Cyanogas.

In addition a considerable amount of work has been done during the year by the officials who are paid by the Corporation to deal with the rat nuisance.

The following figures give some indication of the extent to which help has been given.

No. of premises dealt with by officers	...	...	...	...	162
No. of householders to whom rat-poison has been supplied and advice given as to the methods that should be employed	...	...	...	...	177

## RAINFALL.

1925	Total Depth in inches.	Greatest Daily Rainfall.		No. of Rainy Days.
		Depth.	Date.	
January ... ..	1.36	.35	14	13
February ... ..	1.66	.26	9	15
March ... ..	.80	.33	20	15
April ... ..	1.55	.29	26	15
May ... ..	3.67	1.27	19	16
June ... ..	.05	.05	26	1
July ... ..	.69	.17	19	8
August ... ..	1.35	.29	21	15
September ... ..	2.58	.70	19	15
October ... ..	2.23	.62	19	15
November ... ..	2.50	.75	29	14
December ... ..	1.35	.49	22	11
Total, 1925 ...	19.79			153
Total, 1924 ...	22.23			160

## RAINFALL, 1895 TO 1925.

Year	Inches	Year	Inches	Year	Inches	Year	Inches
1895	24.27	1903	29.53	1911	18.88	1919	24.98
1896	26.50	1904	19.72	1912	27.76	1920	24.74
1897	26.29	1905	18.22	1913	19.80	1921	14.70
1898	20.59	1906	23.53	1914	20.42	1922	24.83
1899	26.57	1907	24.47	1915	27.52	1923	26.99
1900	27.01	1908	20.75	1916	26.69	1924	22.23
1901	23.01	1909	27.24	1917	20.80	1925	19.79
1902	21.43	1910	24.83	1918	21.12		





