#### Contributors

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# INTELL LIBRARY Marlborough Borough.

## **MEDICAL OFFICER'S ANNUAL REPORT** FOR THE YEAR 1925.

Mr. Mayor, Lady and Gentlemen,

I have the honour to submit to you my 6th Annual Report on the Public Health and 'Sanitary Administration of your District.

I am following out the lines indicated in the Ministry of Health Circular No. 648, dated December 10th, 1925.

The Report will be a "Survey Report" and consequently somewhat fuller than in previous years.

I have the honour to remain,

Your obedient servant,

A. H. WILSON. Medical Officer of Health.

3. King's Road, Salisbury. May, 1926.

NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.

Population-Census 1921: 4,194. Estimated 1925-4,204.

Area, 598 Acres. Rateable Value : £22,845.

Sum represented by Penny rate : £91 3s. 5d.

Amount of Poor Law Relief : £25 10s. 7d. Number of Inhabited Houses (1921): 804. " Families or Separate Occupiers (1921): 831.

..

Marlborough is a market town situated in the valley of the Kennett on the main road between London and Bath.

The subsoil is mainly chalk with small outcroppings of clay and gravel.

The River Kennett passes through the town.

The occupations of the inhabitants are those usually carried on by people in a small market town, but the presence of the College and the position of the town on one of the main roads of the Country brings many visitors.

The Borough formerly consisted of three Parishes, viz. : St. Peters, St. Mary's, and Preshute Within, but in October, 1925, the three Parishes were united and the Borough now consists of one Parish, viz.: The Parish of Marlborough.

### VITAL STATISTICS.

Births.	M	lale.	Female.				
Legitimate Illegitimate		26	$\left\{ \begin{smallmatrix} 22\\3 \end{smallmatrix} \right\}$	Males, 26.	Females,	25.	Total, 51.
		1925	1924	1923	1922	1921	Average last 5 Years.
Birth Rate England and	Wales	$12.1 \\ 18.3$	11.1 18.8		11.7 20.6	$\begin{array}{c} 13.7\\22.4\end{array}$	11.86 19.9
Deaths. 1	Male, 22.	Fe	emale, 21.	Total, 43.			
		1925	1924	1923	1922	1921	Average last 5 Years.
Death Rate England and	Wales	$10.2 \\ 12.2$	$10.2 \\ 12.2$		86 12.9	$\begin{array}{c} 6.5\\ 12.1 \end{array}$	9.4 12.2

Both birth rate and death rate are well below the average for the Country as a whole for each of the five years under consideration. The presence of 700 boys of school age in so small a total of inhabitants has a good deal to do with this fact, as none of these 700 are of marriageable ages producing births, nor are they of the ages which help to swell the deaths; thus there are fewer births and deaths than one would expect in an ordinary population.

Number of Deaths of Infant			: Male, 1. Illegitimate.	Female,	0.	Total, 1.
Infantile Mortality Rate	1925	1924	1923	1922	1921	Average last 5 Years.
(per 1,000 Births) England and Wales	$19.6 \\ 75$	$\frac{61.2}{75}$	$\begin{array}{c}133.3\\69\end{array}$	49 77	52.6 83	43.1 75.8

It will be noticed that the infantile mortality has varied tremendously during the five years, but when it is noted that the largest number of deaths of infants under one year was 6 (1923) and the smallest, one, it will be realised that it is the small numbers we have to deal with which makes the difference. The number 43.1, being the average for the five years, gives a better idea of the true state of things.

Deaths from Measles (all ages), Nil, giving no deaths in five years.

" Whooping Cough (all ages), Nil, giving two deaths in five years.

" Diarrhœa (under two years), Nil, giving no deaths in five years.

Number of Women dying in consequence of Child Birth, one, giving one death in five years. This death was not due to puerperal fever, but followed an operation for ectopic gestation.

Disease.		Total Cases notified.	Cases admitted to hospital.	Total deaths.
Small Pox		 0	0	-
Scarlet Fever		 1	1	0
Diphtheria		 13	5	0
Enteric Fever		 0	0	0
Puerperal Fever		 0	0	0
Pneumonia		 0	0	2
Erysipelas		 2	0	0
Ophthalmia Neo	natorum	 0	0	0

#### INFECTIOUS DISEASES.

The two deaths from Pneumonia had not previously been notified to me.

Scarlet Fever and Diphtheria.—Only one case of scarlet fever occurred during the year.

With regard to diphtheria, the first case was on August 1st in a man arriving in the town two days before; he arrived with a sore throat. The second case was on October 17th, and so far as I could ascertain had nothing to do with the first case; further cases arose on October 22nd, 24th, and November 11th. On November 26th a case arose in a boy at the College and between then and the end of the term eight cases occurred in the College. All these cases were treated in the College Sanatorium under the direction of the Medical Officer, Dr. Hallows, and I am indebted to him for the following account:—

#### Pathological Report on epidemic of eight cases of Diphtheria at Marlborough College, Wilts.

As these cases occured at the end of the term it was decided that all boys in the Houses affected should be sent home at once following a negative bacteriological examination.

It was found that were these examinations carried out by a laboratory at a distance a delay of from thirty-six to forty-eight hours would occur, and the results obtained would then be of little practical value.

All examinations were therefore carried out by me at the College pathological laboratory.

Swabs were taken in the evening and a finding obtained in time to allow boys to catch the 9 o'clock train the following morning.

In all a hundred and twenty two examinations were made.

The parents of all boys in the School were notified of the position and with their consent Schick reactions were carried out in the case of boys leaving for the continent or where isolation could not be carried out.

Eight cases only were tested ; two gave a positive reaction and the remainder a negative or pseudo-negative reaction.

The positive reactors were inoculated with a view to obtaining both a passive and an active immunity.

The importance of Schick testing and if necessary immunisation on return home was pointed out to all parents; this was carried out in many cases, but the actual figures are not available.

Only one further case of diphtheria occurred during the holidays.

The great difficulty in dealing with the situation was that it was considered only right that a parent's consent should be obtained before carrying out a Schick test, and as only a few days remained before the School returned home this course was impracticable on a large scale.

#### NORMAN HALLOWS, M.D., M.R.C.P., D.P.H.

Three diphtheria "carriers" were treated in the hospital, one being admitted twice as he again became positive after being cleared up once.

No further cases have arisen.

The average number of cases per annum during the last five years of Scarlet Fever and Diphtheria respectively has been 7 and 3.8.

The largest numbers being 16 in 1922, and 11 in 1924 of scarlet fever, and this year with 13 being far the largest number in diphtheria the next number being 3 in 1921.

Considering that so large a proportion of the population is of school ages and consequently of ages most susceptible to these diseases the state is very satisfactory.

Puerperal Fever.—No case was notified in five years and one woman has died in consequence of child birth.

**Pneumonia**.—Nine cases have been notified in the last five years with only two deaths which were this year, and unfortunately neither of these cases had been previously notified to me.

Ophthalmia Neonatorum.—No case of this disease has been notified during the last five years.

Enteric Fever.—Two cases have been notified, one in 1924, and one in 1921. The one in 1921 was in a College boy and was definitely imported as the boy developed it immediately on return to school after spending his holidays on the continent. The case in 1924 was of the Para. B variety, of a mild type and efficiently nursed at home.

Bacteriological Examinations.—Till the Autumn of this year all examinations were paid for by the Council and were conducted by the Clinical Research Association or the Pathologist at Salisbury Infirmary, but now diphtheria swabs are paid for by the County Council and for this district are done entirely at Salisbury Infirmary. These examinations of course constitute the large marjority but others such as Widal for typhoid and Virulence tests for diphtheria are still paid for by the District Council.

The tests known as "Schick" and "Dick" in diphtheria and scarlet fever respectively have not been undertaken in the district except in those cases mentioned by Dr. Hallows.

No Vaccinations have been done by me as no Small Pox has been in the neighbourhood.

**Disinfection**.—The houses of all cases of notifiable infectious disease are disinfected with Formalin lamps and/or spray, and after deaths from tuberculosis, but there is no public station for disinfecting or cleansing persons or articles. I encourage bedding and clothes to be exposed to the air and the house generally cleaned, it often proves a good opportunity to get the house thoroughly cleaned.

None of the elementary schools were closed during the year for infectious disease.

#### New Cases. Deaths. Pulmonary. Non-Pulmonary. Pulmonary. Non-Pulmonary. F. M. M. F. M. F. M. F. 0 ... 1 ... 5... 1 10 ... 1 1 2 15 ... 20 1 ... 25 ... 1 1 35 ... 1 45 ... 55 ... 65 and up ... 1 0 Total 2 3 2 0 0 1 ...

#### TUBERCULOSIS.

All the deaths had been previously notified except one who died away from the town.

No action has been taken by me with regard to Tuberculosis employees in the milk trade.

No action has been taken by the Council under Section 62, P.H.A., 1925.

### HEALTH SERVICES AND SANITARY CIRCUMSTANCES OF THE DISTRICT.

Hospitals.—The Joint Isolation Hospital provides accommodation for the infectious diseases, scarlet fever and diptheria. Till January 1924 this hospital, provided under Public Heath Act, 1875, served the Borough and Rural District, but on this date the Ramsbury Rural District having built an addition to the existing hospital was admitted as part of the joint hospital district.

Dr. W. Maurice, of Marlborough, has undertaken to attend all infectious cases sent into the Isolation Hospital for a fee of one guinea per case.

For other than infectious cases the Savernake Hospital at Marlborough provides excellent accommodation for the wants of this District.

A Motor Ambulance for Infectious Cases is provided by the Marlborough Isolation Hospital.

For Non-Infectious and Accident Cases.—At Marlborough there is a Motor Ambulance supplied by the British Red Cross Society, and this is available for anyone who sends for it. It is kept at the New Road Garage (Telephone 30) and the charge is 1/- per mile. I am sorry this is not made use of as much as it might be; it is much better for the patient to be conveyed to Hospital in a comfortable Ambulance than in an ordinary Motor Car; if it is not requisioned more in the future than it has been in the past, I fear the expense will be too much to retain it.

**Professional Nursing in the Home.** - None is undertaken by the Council; all that is done is provided either by the County Council or by Voluntary Nursing Associations.

**Public Health Offices.**—Mr. A. Percy Harcourt was appointed Borough Surveyor and Sanitary Inspector August 1st, 1925, in place of Mr. Cutter who resigned on obtaining another appointment.

His qualifications are :--

1.-Certificate of the Royal Sanitary Institute.

2.—Assoc. M.Inst.C.E.

His office is at the Town Hall.

Water Supply.—Is from a well and bore-hole situated  $\frac{1}{5}$  mile South of railway station, and produces an average daily quantity of 140,000 gallons.

The supply is constant and on analysis has always proved good, the latest analysis by Messrs Waterfall & O'Brien, of Bristol, is as follows:—

			Parts	s per 100,000
Free and Saline Ammonia	 			nil.
Albuminoid Ammonia	 			0.006
Chlorine	 			1.4
Oxygen absorbed (4 Hours)	 			0.027
Nitrates	 			0.4
Total Dissolved Solids	 			30.8
Hardness	Temporary	21.8		
	Permanent	3.0		
		24.8		

These figures indicate a good drinking water.

Drainage and Sewerage.—The Town is drained by sewers to sewerage works, the effluent from which runs into the Kennett which is a tributary of the Thames. Much money and time has been spent on these during the last two or three years and more than £5000 has been spent on these works. With efficient supervision they should now prove satisfactory.

Four new bacteria beds, new Dortmund and Humus tanks, new pumps driven by electricity are among the work that has been completed.

**Closets.**—99% of the town has water closets the remaining 1% being earth closets, these few are being converted into water closets when opportunity arrives, seven are being now so converted.

Scavenging is done by the Council.

Chemical Work.—Satisfactory arrangements exist with Messrs. Waterfall and O'Brien, of Bristol, for the analysis of any water samples sent to them by me or the Sanitary Inspector.

Legislation in Force.-

Acts.-Parts II and III Public Health Amendment Act, 1907.

Parts II-V Public Health Act, 1925, have been adopted, but not in force at the end of the year.

Bye-laws and Regulations.—New Streets and Buildings (1923); Common Lodging Houses, Nuisances, Cleansing of Footpaths, etc.; Slaughter Houses (1888); Offensive Trades (1919); Dairies, Cowsheds, and Milkshops Regulations (September 1905); Regulations for House Connections with Sewers and House Drainage (1909).

#### SANITARY INSPECTION OF DISTRICT.

Mr. Harcourt reports :--

	No. of Inspections. 1	No. of Defects. 2	Informal Notices. 3	Statutory Notices. 4	Remedied by 3.	Remedied by 4. 6	Remedied after Verbal Instructions. 7
Nuisances	161	138	19	1	19	1	118
Factory and Workshop	16	3	3	-	3	-	-
Bakehouses	26	1	1	-	1	-	
Slaughter-houses	208	4	-			-	4
Total	411	146	23	1	23	1	122

Number of Disinfections after Infectious Disease ... 10.

#### INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.—No licenses have been granted for the sale of Milk under the Special Designations classified as in the Fourth Schedule to the Milk (Special Designation) Order, 1923.

	Retail.	Wholesale,
1-Number of Inspections	 30	5
2- " Defects found	 2	1
3- " Informal Notices served	 0	0
4- " Statutory Notices served	 0	0
5- ,, remedied under 3	 0	0
6 ,, remedied under 4	 0	0
7-Remedied after Verbal Instructions	 2	1
Number of Retail Purveyors Registered	 	. 10
" " Wholesale Producers	 	. 1

No special action has been taken under the Milk and Dairies (Consolidation) Act, 1915, but I intend shortly to take samples of Milk from Retail Distributors to be examined for Tuberculosis.

Meat.—The four slaughter houses have all given written notice of their usual times of slaughtering and 96 inspections have been made.

One carcase of Pork, one of Veal and some frozen Mutton have been condemned.

In addition notice has been given of intention to kill of four pigs.

The four slaughter houses in the district have been inspected several times in the past year and were found to be in a reasonable condition.

	1920.	Jan. 1925.	Dec. 1925.
Registered	 4	 4	 4
Licensed	 —	 -	 -
Total	 4	 4	 4

Number of Slaughter-Houses in the District.

#### HOUSING.

The Houses built during the past five years are as follows :---

P

		With Assi	istance.		Without Assistance.	
arish.	By Lo	cal Authority.	By Priva	te Enterprise.	By Private Persons.	Total
	No.	Under Housing Act.	No.	Under Housing Act.	No.	54
	16	1919	10	1923	21	54
	7	1923				

Twelve are now in course of construction (1923 Act) and 28 are sanctioned by the Ministry of Health, but not yet commenced.

A considerable improvement has taken place in some of the old houses of which there are a goodly number in this ancient Borough and the Borough Council has done its share well to the houses owned by the Borough.

Eighteen Closing Orders have been made this year, but it has not been possible to get these all empty as there is no alternative accommodation, nevertheless, this action will render it impossible for the owners to re-let them as they become vacant and gradually these undesirable dwellings will become demolished.

#### HOUSING ACTS, 1909-1925.

Statement of Work carried out during the Year ended 31st December, 1925, under the above Acts, in the Amesire Development.

Nu	mber of new houses erected during the year :	
	(a) Total (including numbers given separately under (b) )	19
	(b) With State assistance under the Housing Acts :	
	(i) By the Local Authority (uncompleted)	12
	(ii) By other bodies or persons	5
1.	Unfit dwelling houses.	
	Inspection(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	135
	(2) Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925	_
	(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	18
	(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for	
	human habitation	7
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	128

		8 . SLIBRAI	RY)I
3.	Action	under Statutory Powers.	//
	A. P	roceedings under section 3 of the Housing Act, 1925.	
	(1)	Number of dwelling houses in respect of which notices were served requiring repairs	21
	(2)	Number of dwelling houses which were rendered fit after service of formal notices :	
		(a) By Owners         (b) By Local Authority in default of owners	21
	(3)	Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	
	B. P.	roceedings under Public Health Acts.	
		Number of dwelling houses in respect of which notices were served requiring defects to be remedied	7
	(2)	Number of dwelling houses in which defects were remedied after service of formal notices :	
		(a) By Owners(b) By Local Authority in default of owners	7
	C. Pi	roceedings 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	18
	(2)	Number of dwelling houses in respect of which Closing Orders were made	18
	(3)	Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit	-
	(4)	Number of dwelling houses in respect of which Demolition Orders were made	
	(5)	Number of dwelling houses demolished in pursuance of Demolition Orders	

RY OF HEAD

### CAUSES OF DEATH (Civilians only).

				M.	F.	1				M.	F.
	All Causes .			22	21	22	Diarrhœa, etc.	, (under 2 y	ears)		
1	Entonia forran					23	Appendicitis a	nd typhlitis			
2	Small nov					24	Cirrhosis of li	ver			
3	Manalas					25	Acute and chr	onic nephrit	is		
4	Sanulat formar					26	Puerperal seps	is			
5	MTL					27	Other acciden	ts and disc	eases		
6	Dishtherie						pregnancy a	nd parturiti	on		1
7	Influenza				1	28	Congenital de	bility and	mal-		
8	Encephalitis lethan						formation, p	remature bi	rth	1	-
9	Meningococcal men					29	Suicide	***			1
10	Tuberculosis of re					30	Other deaths		08	1	100
	system	in allow the		2		31	Other defined			2	5
11	Other tuberculous	diseases			1	32	Causes ill-defi				
12	Cancer, malignant	disease		3	4	1 1	Special Causes		bove)		
13	Rheumatic fever						Poliomyel				
14	Diabetes .			2	1	Sec. 19	Polioence				
15	Cerebral hæmorrh:	age, &c.		2	2	1	Deaths of Infan	ts under 1 y	ear :		
16	Heart disease			5	2		Total			1	
17	Arterio-sclerosis			1	1 .		Illegitima	ite		1	-
18	Bronchitis			1	2	1 1 1 1	Total Births			26	25
19	Pneumonia (all for	rms)		2		10000	Legitimat			26	22
20	Other respiratory	diseases					Illegitima	ite	***		3
21	Ulcer of stomach o	or duodent	am	1		Pop	ULATION				4204