[Report 1909] / Medical Officer of Health, Romsey R.D.C.

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ROMSEY RURAL DISTRICT (HANTS).

THE MEDICAL OFFICER OF HEALTH'S ANNUAL REPORT for 1909.

To the Romsey Rural District Council.

Gentlemen,

This Report is prepared in accordance with a syllabus ~~supported~~ suggested by the County Medical Officer, its object being to facilitate the collation of material for the County Report as well as to attain some uniformity in the methods of Sanitary administration in the several districts comprised by the Administrative County.

As this Report has to be submitted to the Local Government Board and the County Council as well as to the Local Authority it is desirable that some space should be devoted to a brief description of the general features of the district to which the report relates.

Physical features, etc. The District is a purely rural one embracing an area of 31,855 acres and surrounding the small Municipal Borough of Romsey which, being a separate Urban District, is not dealt with here. There are large tracts of woodland and common but most of the land is devoted to pasture and agriculture, dairy-farming being now perhaps the most important branch of industry.

The Sub-soil is mostly of gravel with patches of clay, of sand and of peat except at the Northern extremity of the District where chalk comes to the surface.

In height above Sea-level it ranges from 20 feet to 400 feet.

ROMNEY RURAL DISTRICT (WALES).

THE MEDICAL OFFICER OF HEALTH'S ANNUAL REPORT

for 1909.

To the Romney Rural District Council.

Gentlemen,

I have the honour to present herewith my Report on the Health and Sanitary Circumstances of the District for the year 1909.

The Report is prepared in accordance with a syllabus suggested by the County Medical Officer, the object being to facilitate the collation of statistics for the County Report, as well as to attain some uniformity in the methods of sanitary administration in the several districts comprised by the Administrative County.

As this Report has to be submitted to the Local Government Board and the County Council as well as to the Local Authority it is desirable that some space should be devoted to a brief description of the general features of the district to which the report relates.

Physical Features, etc. The District is a purely rural one embracing an area of 31,000 acres and surrounding the small municipal Borough of Romney Marsh, being a separate Urban District, is not dealt with here. There are large tracts of woodland and common but most of the land is devoted to pasture and agriculture, dairy-farming being now perhaps the most important branch of industry.

The sub-soil is mostly of gravel with patches of clay, of sand and of peat except in the Fortstein extremity of the District where chalk comes to the surface.

In height above Sea-level it ranges from 50 feet to 400 feet.

The Climate is that of the South of England generally without any special local features.

The rainfall table which I have compiled from records kindly supplied me by the Revd. Vere Awdry of Ampfield is appended. Ampfield Vicarage is not within the District but being only about a mile outside its boundary the rainfall may be taken as the same.

The table shows that the average annual rainfall for the previous 10 years was 28. 84 inches and that in the year under notice it was much heavier amounting to 34. 33 inches.

The number of days on which rain fell was 174. The average annual number has been about 155.

The early months to the end of May were remarkably dry and the Summer months from June to October were exceedingly wet. October was the wettest month with 8 inches of rain while the driest months were February and November with half-an-inch each and January with only one inch.

There are no centres of population in the District, such Villages as there are being of a straggling character. Their communications are with Romsey especially and other Market towns rather than with each other. In the case of Nursling and Rownhams the associations are more with Southampton than with Romsey.

The District comprises 14 civil parishes and for the statistical purposes of this report these are very conveniently grouped into 5 sub-divisions of nearly equal population, Romsey Extra forming the first sub-division, Timsbury & Michelmersh (including Braishfield and Awbridge) the second, Mottisfont, Lockerley and East Dean the third, Dunwood, Sherfield, Melchet, Plaitford, East and West Wellow the fourth, and Nursling and Rownhams the fifth.

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The second, first and fifth of these occupy successive positions in the main Valley of the River Test above and below Romsey while the third and fourth are in exactly the same geographical relation to the Lockerley and Wellow rivers which are the principal tributaries to this section of the Test, both being on its western side.

Population. At the time of the last Census in 1901 there were 6,270 inhabitants. In the 9 years since then there has been a natural increase of population (excess in the number of births over the number of deaths) of 610, but judging by the fact that in the decade ending with 1901 it was found that there had been an actual decrease of population of 355 it is probable that the large natural increase since then has been at least balanced by migration. The census to be taken next year will show whether the tendency to depopulation of this District and of rural districts generally which has been so remarkable in the last generation still continues. For the present rather than hazard any speculation as to an increase or decrease I prefer to adhere to the figures returned by the last census as the basis of population on which to calculate the birth and death rates &c.

Births and Birth-rate. The births registered in the District in 1909 numbered 152 giving a birth-rate of 24.2 per 1000 of the population.

Reference to the appended Table No I shows that the average birth-rate of the District in the previous 10 years was 24. 1. This is not far below the national birth-rate - What difference there is may probably be explained on the assumption that it is the younger people who gravitate to the Town the older folks remaining.

That the District contains a large proportion of old people is also apparent from the death returns.

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Births and Birth-rate. The births registered in the District in 1903 numbered 182 giving a birth-rate of 24.3 per 1000 of the population.

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That the District contains a large proportion of old people is also apparent from the death returns.

Deaths and Death-rate. The actual number of deaths in the District in 1909 was 84 giving a death-rate of 13.3 per 1000 of the population.

This has to be modified by the deduction of 10 deaths in the Workhouse of persons who properly belonged to the Romsey Urban District and by the addition of 2 deaths in the Romsey Cottage Hospital of residents of the Rural District. When these are taken into consideration (as shown in Tables 9 - 13 of Table I) it is found that the proper number of deaths was 76 and the true death-rate 12.1.

The figures for the previous ten years as given in the same Table show an average death-rate of 13.4 (actual) and 12.7 (corrected).

An unusually large number of deaths (29) occurred at the Workhouse in the year under notice.

Uncertified deaths. There was only one death uncertified.

Still-Births. The number of still-births I have no means of ascertaining.

Referring next to the Age at which death occurred (classified in Table IV) it is noticeable that considerably more than half (44 out of 76) of the deaths were of people above 65 years of age. This is a regular feature of the District returns year by year and is an important and satisfactory reflection of the health of the District, although, as I have already conjectured it is probably in some measure to be accounted for by circumstances depending on the tendency of the younger elements of the population to for-sake the country life. Would it not be well if consideration of the prospect here shown of better health and longer life induced them to remain?

Considering now the figures for the five sub-divisions as shown

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in Tavle II it should first be noted that the figures given are the actual numbers of deaths etc. in each division and not death-rates per 1000. On reducing them to their proportions according to population we find that in 1909 the death-rates were - for Nursling and Rownhams 7.7, for Romsey Extra 9.7, for Michelmersh and Timsbury 11.2, for Wellow, Sherfield etc. 12. 2 and for Mottisfont, Lockerley and East Dean 19.0.

The population of these sub-divisions is much too small to permit of any deductionsfrom the figures for any one year.

In taking the larger figures for the 10 previous years we find the order of merit was Romsey Extra 10.7, Mottisfont etc. 12.8, Nursling and Rownhams 12.9, Michelmersh and Timsbury 13.3 and Wellow etc. 14.5

Whether the central parish of Romsey Extra offers any real advantages in respect of health or whether it has merely been rather more fortunate than its neighbours in the last few years I am not prepared to say but the difference in the returns is so considerable that I think it should be credited with some significance.

Infantile-Mortality. There were only 8 deaths of Infants under 1 year of age giving an infantile mortality rate of 52.6 per 1000 births registered.

Zymotic death-rate. There were no deaths from any of the Zymotic diseases during the year. Consequently the zymotic death-rate for 1909 was nil.

On the great importance of the infantile mortality rate not only in its effect but as an index of the general sanitary condition and of the material and moral welfare of the population I have often dwelt and it is therefore satisfactory to find that the low rate of infantile mortality which has been the rule in this District - the average for the last 10 years was 71.7 - has again been more than maintained.

in Table II it should first be noted that the figures given are the actual numbers of deaths etc. in each division and not death-rates per 1000. On reducing them to their proportions according to population we find that in 1909 the death-rates were - for Mursling and Nowmbens 7.7, for Romsey Extra 9.7, for Michelmersh and Timsbury 11.3, for Wellow, Sherfield etc. 12. 3 and for Mottisfont, Looperley and East Dean 19.0.

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Notification of Births Act. The question of the adoption of this new Act was brought before the Council during the past year and after careful consideration it was decided not to adopt it at any rate for the present. The Act provided for the immediate notification to the Medical Officer of Health of all births and for the appointment of Visitors (who would generally be ladies acting gratuitously) to go to the homes and proffer advice to the Mothers as to the feeding and care of their infants.

This District is already provided with three Maternity ~~Xxxx~~ Nursing Institutions and a movement is on foot to extend the operations of one of these to meet the need arising from the requirements of the Midwives' Act. There are also Church organizations and voluntary workers in the numerous parishes and moreover the Medical practitioners of the District are in close touch with practically the whole of the population. The Council recognizing these facts deemed it undesirable as well as unnecessary to acquire the powers conferred by an Act the adoption of which is optional and therefore is presumably meant only to be applied to Districts where its objects are not already attained by conditions such as those referred to above. If however - as seems not unlikely - the Act is going to be applied in all or nearly all the other parts of the County it may be worth while to adopt it here if only to be in conformity with the other Districts.

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I have prepared a Table which is appended giving the number of deaths from the Zymotic diseases separately and collectively for each of the last ten years and for the whole period of ten years, and showing the total zymotic death-rate for each year,

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the average annual death rate for each disease and the average total zymotic death-rate per 1000 of the population per annum.

Briefly the results may be thus stated, -

Small-Pox, -	No deaths in 10 yrs.		Av. Ann. Death rate	-	0
Measles, -	9	" "	" "	-	.14
Scarlet-Fever, -	3	" "	" "	-	.04
Diphtheria, -	12	" "	" "	-	.19
Membranous Croup, -	0	" "	" "	-	0
Other "Fevers" (Enteric etc.)	1	" "	" "	-	.01
Whooping-cough, -	1	" "	" "	-	.01

Total from all (Zymotic) causes in 10 years 26.

Average total zymotic death-rate per 1000 per annum -.41

This is about one-third of the National Zymotic death-rate and less than half of that for the County according to the latest available returns.

It is also rather less than the rate for the Borough of Romsey the difference being mostly in respect of Whooping-cough, which, while in the Borough it accounted for 13 deaths, in the Rural District with probably at least an equal number of cases was only responsible for 1 death. Here is an illustration, if not a proof, that Whooping-cough particularly is much more fatal in the ill-ventilated and stuffy quarters of a town than it is under the better conditions that generally obtain in that respect in a Rural District.

Influenza death-rate. Only two deaths were attributed to Influenza in 1909 giving an Influenza death-rate of .31 which is much lower than it has generally been during the last 20 years

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Whooping-cough,	3	"	"	- .01
Measles				
	1	"	"	- .01
Other "Fevers" (Enteric etc.)				
	0	"	"	- 0
Erysipelas,	0	"	"	- 0
Diphtheria,	12	"	"	- .19
Scarlet-Fever,	3	"	"	- .04
Measles,	9	"	"	- .14
Small-Pox,	No deaths in 10 yrs.		Av. Ann. Death rate	- 0

Briefly the results may be thus stated, -

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average total zymotic death-rate per 1000 of the population

the average annual death rate for each disease and the

Cancer death-rate. From Cancer there were 7 deaths yielding a death-rate of 1.1

The deaths ascribed to Cancer in the last 10 years have numbered 2, 6, 5, 5, 5, 8, 2, 8, 4, 7.

Average number of deaths per annum = 5.2 and the rate per 1000 living = .82 These are approximately normal figures.

Tuberculosis Death-rate. There was only one death from Tuberculosis (Consumption) in 1909 giving a death-rate of .15 Deaths from this cause in the last 10 years have been as follows - 2, 3, 6, 4, 1, 3, 7, 4, 2, 1. Average No.= 3.3 Rate per 1000 = .52

This is quite a low figure but we should look for improvement in this direction and do what we can to hasten it Tuberculosis coming well within the category of preventable diseases. This subject must be referred to again presently.

Other Respiratory Diseases. Deaths from Bronchitis, Pneumonia, Pleurisy etc. were in about the usual proportions, and the same may be said generally of the other diseases specified in Table IV.

Prevalence of Infectious Diseases in 1909. There were altogether 21 notifications of Infectious Illness which is somewhat less than the average number.

Diphtheria, - As has been usual of late years Diphtheria was the disease most in evidence. The number of cases reported was 12, of which 1 occurred in Romsey Extra in February, 1 in another part of the same parish in March, 1 in East Wellow in March, 1 at Nursling and 1 at Timsbury in August, 1 at Plaitford and 1 at Lockerley in September and 5 at Michelmersh in October and November.

These last 5 cases were the only ones which were

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These last 5 cases were the only ones which were

clearly associated and here it was found there had been two earlier cases which had been overlooked and which had infected the others through the medium of School attendance. The School was promptly closed and the outbreak was soon suppressed. None of the cases were fatal.

Scarlet Fever. The four cases of Scarlet Fever were all in one family at Mottisfont.

Erysipelas. Of the 5 cases notified 3 were at Mottisfont early in the year, 1 at Rownhams, and 1 at the Workhouse. The last was fatal.

Of the Non-Notifiable Infectious Diseases -

Measles. The few cases of Measles I heard of in 1909 were instances of infection outside the District.

Whooping-cough was prevalent at Braishfield in March and less so in the neighbouring parishes of Michelmersh and Timsbury a little later.
There were a few cases at Wellow and some at Sherfield towards the end of the year.

There were no deaths from Measles or from Whooping-cough.

Zymotic Disease Prevention - Methods of dealing with Infectious Disease.

Notification. The Infectious Disease (Notification) Act of 1889 is of course in operation. No difficulties in the working of the Act have ever arisen in this District and here as elsewhere it has proved itself a valuable enactment not only because it gives those responsible for the Public Health Administration the opportunity of enquiring into the cause and circumstances of infectious cases as they arise, and of dealing with them accordingly, but also because the mere necessity for

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notification has brought home to those concerned their responsibilities to the public in these matters.

Only the diseases scheduled as compulsory in the Act are notifiable in this District.

Other diseases such as Measles or Whooping-cough may be included at the option of Local Authorities. There is much to be said in favour of including these two very infectious disorders, the total mortality from which is quite as great as that of any two of those that are notifiable, but on the other hand there are practical difficulties in applying the law to Measles and whooping-cough the principal of which arise from the fact that so many cases of these disorders do not come under medical observation.

Isolation Hospital. We have no Isolation Hospital and for the last five years we have been without any provision for hospital accomodation by arrangement with other Authorities.

During that time several schemes for the establishment of an Isolation Hospital jointly with other Districts have been considered but the only one that found favour was the proposal for a joint hospital for this and the Romsey Urban District. This was dropped because the Borough Authority was disinclined to proceed in the matter.

In several of my Annual Reports I have discussed at length the general question of Isolation Hospitals and the merits of and objections to the several proposals that havebeen made. To summarise briefly the views I have expressed I should say again that the advantage of an Isolation Hospital to a District such as this is the great convenience it offers the public rather than the comparatively small part it can play in the prevention of epidemics.

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and as I have pointed out there is usually no difficulty in securing the effectual isolation of these patients in their own homes when once the cases have been notified.

It is principally the cases that are altogether overlooked that are responsible for the spread of infection, and when it can be traced to the known cases it is nearly always apparent that the mischief was done before the nature of the illness had been recognized in the earlier case.

Having no Isolation Hospital we have become accustomed to rely on such facilities for isolation as the dwelling-house affords and, inadequate though these would often at first sight seem to be, it is usually a matter of inconvenience rather than of insuperable difficulty to secure the effectual isolation of patients.

As a matter of fact instances of infection through failure in isolation have been very uncommon in this District and unless our experience has been singularly fortunate the results attained so far as they can be juedged by the number of cases and the very low zymotic death-rate that I have already alluded to would appear to fully justify the means employed.

Disinfection. In all cases of Notifiable infectious disease Carbolic Acid Solution and other disinfectants are freely supplied for use during the illness, and on the termination of the cases the rooms that have been occupied are disinfected by the vaporization of Formic Aldehyde and by scrubbing the floors etc. with carbolic solutions. We have no means of dealing specially with clothing and bedding. In rare cases these are destroyed.

Bacteriological Examinations. Realizing the importance of bacteriological examination in otherwise doubtful cases of Diphtheria etc. this District and the Romsey Urban District were among the first in the County to make provision for it.

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As a matter of fact instances of infection through failure rather than of insurmountable difficulty to secure the effectual isolation of patients.

sight seem to be, it is usually a matter of inconvenience affords and, inadequate though these would often at first to rely on such facilities for isolation as the dwelling-houses Having no Isolation Hospital we have become accustomed of the illness had been recognized in the earlier case. always apparent that the mischief was done before the nature and when it can be traced to the known cases it is nearly overlooked that are responsible for the spread of infection, Is principally the cases that are altogether their own homes when once the cases have been notified.

In securing the effectual isolation of these patients in and as I have pointed out there is usually no difficulty

For several years the Medical practitioners in the District have been given a free hand to avail themselves of an arrangement with the Clinical Research Association by which all such examinations and re-examinations are chargeable to the Local Authority.

This has become the established practice in almost every case and although the expense has not been inconsiderable the arrangement has I believe led to the detection of many otherwise doubtful cases which in the absence of any such certain means of identification would have been potent sources of infection.

The institution of a Bacteriological Laboratory for the County has recently been proposed to the County Council. If it is approved the local Council will I trust see its way to participate in the Scheme though it is not at present clear what form of contribution would be required.

Assuming the estimate of expenditure to be correct it would appear that the proportionate amount due from this District would not exceed the costs incurred under the existing arrangement.

Tuberculosis. "The Public Health (Tuberculosis) Regularions 1908" came into force at the beginning of the year.

These regulations apply to all Districts but they provide only for compulsory notification in the case of paupers who are found to be suffering from Consumption.

The Regulations empower Sanitary Authorities to take all appropriate action to prevent the spread of infection provided that nothing shall be done which would in any way interfere with the occupation, employment or residence of the poor person affected.

Voluntary Notification. To supplement the effect of the above Regulations Sanitary Authorities are authorized by the Local Government Board to adopt a system of voluntary notification with regard to cases of Consumption in persons who are not paupers. This has now been done in our District and the

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local Medical men have been invited to notify such cases when their patients have no objection to their doing so. It should be clearly understood that notification under these circumstances though adopted by the Authority is optional on the part of the persons concerned, that any advice or assistance that is proferred in consequence of such notification may be accepted oe declined, and above all that no attempt is to be made to impose any restrictions whatever on the person whose case is so notified.

It is not intended in this District to do more at present than undertake the disinfection of rooms etc. and provide for Bacteriological examinations when required, but before leaving the subject of Tuberculosis I should say that a representative of the Council recently attended a meeting at Winchester which was called to discuss a proposal for a Sanatorium for the County.

A Committee has been formed to consider the matter further and to draw up a Scheme for submission to the several Local Authorities. Until that has been presented I cannot offer an opinion as to the desirability of our joining in the project. The Meeting referred to was well attended by representatives from all parts of the County and it was apparent that the importance of provision for the Sanatorium treatment of early cases of Consumption is recognised but I fear it will be difficult to reconcile the comflicting ideas that prevail as to the kind, as well as to the extent of the accommodation that would be required. For that reason I think it would be more promising if the proposal had originated with the County Authority and if the formulation of the Scheme had been entrusted to it.

It so happened that in 1909 no cases of Consumption were notified either under the Regulations respecting paupers or under the voluntary system. With regard to the latter it does not necessarily mean that no cases occurred but I think that when

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the objects of notification are more generally understood objections to it will be easily overcome and nearly all cases will be reported.

Schools. The Schools in the District are those at Crampmoor, Lee and Ridge in the parish of Romsey Extra, Nursling, Rownhams, Braishfield, Timsbury, Michelmersh, Mottisfont, Lockerley, East Dean, Awbridge, Sherfield English, Plaitford and Wellow.

The Sanitary condition of the Schools has in several instances been substantially improved within the last few years and is now I think for the ~~maxx~~ most part satisfactory.
We have not been concerned with any improvements in School buildings in the year under notice.

The occasions for action to be taken with regard to School Attendance for the prevention of the spread of disease were remarkably few in 1909. At Braishfield early in the year the exclusion of children under the age of 5 was recommended during the prevalence of Whooping-cough, and at Michelmersh towards the end of the year it was deemed necessary owing to particular circumstances connected with the outbreak of Diphtheria there to close the School for four weeks.
On these questions of School Closure as they arose and also in certain steps taken on the latter occasion in tracing infectious cases action was taken jointly with the County Medical Officer (who is also the principal School Medical Officer).

House Accommodation. The number of inhabited houses in the District is large in proportion to the population, the numbers according to the last census being respectively 1475 and 6270, giving an average of 4.2 persons to each house. So rare is it to see an untenanted house that I doubt whether a score could be found in all the fourteen parishes. The demand is evidently greater thanthe supply and so long as that continues it is difficult to deal with housing conditions

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Houses Accommodation. The number of inhabited houses in the District is large in proportion to the population, the number according to the last census being respectively 1475 and 8270, giving an average of 4.3 persons to each house. So far is it to see an untenanted house that I doubt whether a score could be found in all the fourteen parishes. The demand is evidently greater than the supply and so long as that continues it is difficult to deal with housing conditions

except in extreme cases, With regard to the quality of house accommodation I think it can be said that on the whole it is good and certainly no complaint can be found with the new Cottages that are built which is probably the reason why it has never been deemed necessary in this District to formulate any Bye-laws respecting new buildings; but, more especially perhaps at Plaitford, Wellow Wood, Newtown, and Nursling there are many miserable old Cottages which are barely fit for habitation and which would have long since been demolished had better houses been available.

Overcrowding. Bad instances of overcrowding are not common, which is fortunate because having regard to the difficulty in finding houses it is practicable to deal only with the worst cases. In two cases last year it was found necessary to serve notices for the abatement of overcrowding.

Wooden Buildings. There are only two or three wooden buildings used as Dwelling-houses.

Van-Dwellers, Gipsies, Pickers etc. Withthese we are not much concerned the usual camping places being just outside the District.

Excrement and Refuse Disposal. There is no public Scavenging, Refuse Collection or system of Excrement Disposal nor is there any need for them the population being so scattered.

Sewerage and Sewage Disposal. In a purely Rural district such as this Sewers are out of the question and it happens that there is not a single locality in the District requiring such provision.

Practically all the houses have ample gardens or waste ground to deal satisfactorily with their own waste-products, hence it follows that in these matters the Sanitary work of the District resolves itself almost entirely into supervision of

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domestic sanitation. This duty is very thoroughly carried out by the Sanitary Inspector whose observations are duly recorded in his Journal and are summarised in his Report appended as "Table VI".

In November last I made with the Sanitary Inspector a house-to-house visitation in and around the neighbourhood of Lockerley Green. Some 50 houses were carefully inspected and notes were made in each case of the number of inhabitants, the number of rooms and as to the state of cleanliness and general sanitary condition of the premises, the water-supply, privy accommodation etc.

The result of this inspection was on the whole very satisfactory and in the few cases where complaint had to be made the required improvements have, I understand, already been effected.

Pollution of Rivers and Streams. There is no appreciable pollution either by trade refuse or by house-drains etc,. of the section of the Test which traverses this District, or of any of the numerous streams which all eventually join it the District being entirely within the watershed of the Test and its tributaries.

What little pollution there may be is probably of no importance as the River water is no where used for drinking.

Water-supply. With the exception of a few houses at Timsbury near the South Hants Company's Waterworks and a few more on the line of the mains from Timsbury to Romsey and Southampton the water-supply is almost entirely from Wells, a separate well being provided in most cases for each house.

These vary in depth according to position and the water varies in quality with the subsoil in different localities and with the amount of rain in different seasons. A common cause of suspicion especially at West Wellow and in some parts

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In November last I made with the Sanitary Inspector a house-to-house visitation in and around the neighbourhood of Lookerley Green. Some 80 houses were carefully inspected and notes were made in each case of the number of inhabitants, the number of rooms and as to the state of cleanliness and general sanitary condition of the premises, the water-supply, privy accommodation etc.

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These vary in depth according to position and the water varies in quality with the subsoil in different localities a with the amount of rain in different seasons. A common cause of pollution especially at West Wellow and in some par

of Romsey Extra proves to be the presence of a trace of iron in the water and a more general cause of complaint is that in dry seasons many of them are so shallow that the supply gives out or the small quantity of water remaining becomes dirty unless the Wells are particularly clean. Another frequent fault is that the top of the Well is not protected by a curb from the influx of surface-water after heavy rain. I have at different times, though not in the past year, met with several cases of lead poisoning which an analysis of the water has proved the presence of a trace of lead from the use of lead pumps or lead pipes. Although it is true that the greatest danger from lead pipes occurs where the water is soft or peaty a moderate degree of hardness in the water does not altogether prevent the solution of lead a small dose of which frequently repeated leads to very serious and long-continued ill-health. For that reason if there are any lead pipes or pumps still in use these should be removed.

Several samples of water were taken and analysed by Thresh's method during the year and in 3 cases the water was condemned as unfit for use.

Water and Enteric Enteric Fever. As I have already said cases of Enteric fever have been very uncommon here for many years and there have been none in the last 5 or 6 years. I do not remember any cases in this District in which there has been reason to suspect the water-supply as the source of the illness.

Milk-Supply. In this Districtwwe are not only concerned with the milk-supply of our own residents but we have the added responsibility arising from the fact that large quantities of Milk are daily sent out of the District to Southampton, London and other centres of population.

In view of the now generally accepted belief that Milk is not only a common medium for the transference of any infectious

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organisms with which it may happen to be contaminated while it is being handled, but that Consumption in man may be directly caused by the milk of Tuberculous Cows the care taken by Cow-keepers and dairymen in very important and the supervision of Cow-sheds and Dairies is no less onerous on the Sanitary Authority.

The regulations in force in this District are those contained in the Dairies, Cow-sheds and Milk-shops Order of 1885 supplemented by a set of Bye-laws made in 1890. The latter are quite practical in their scope and take as, I think, as far as we can go at present; but it may well be that increased knowledge on the subject, to say nothing of promised legislation, will shortly bring home to us the need for their extension.

Considerable improvements have been carried out in many of the Cowsheds in the District during the last few years.

The number on the Register is now about 50. Their supervision is entrusted to the Sanitary Inspector who visits them all from time to time. In 17 cases last year defects of one kind or another were found by the Sanitary Inspector and these were all rectified on his representation.

Slaughter-houses. There are no regular Slaughter-houses in the District the meat - except that of pigs killed for home consumption - coming from Romsey and the other neighbouring Towns. The Slaughter-house included in the Inspector's list is one where horses are killed.

Common Lodging-houses. Of these there are none.

Bake-houses. There are twelve village bake-houses. These have all been inspected at least once in the year by the Sanitary Inspector or by myself without occasion for fault being found. There are no underground bake-houses requiring special license.

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Factories and Workshops. Except the above mentioned 12 bakehouses there are no Factorites or Workshops in the District. Neither are there as far as I am aware any Out-workers except one in respect of whose employment notice is received twice a year from another Council.

Bye-laws. The only Bye-laws in use in the District are those just referred to respecting Cow-sheds and Dairies and as far as I can see there is no likelihood of our requiring Bye-laws for any other purpose.

Adoptive Acts. ~~The only one at present in use in the Infectious Diseases (Notification) Act.~~

The Public Health Acts Amendment Act, 1907. The question of its adoption was considered in 1908 but it was not adopted.

The Notification of Births Act 1908. This I have already referred to giving the reasons why it has not been adopted and intimating certain circumstances which may in the future render its adoption desirable.

Local Government Enquiries in Area. There have been none during the thirteen years of my appointmentor, as far as I am aware, in the time preceding it.

Nuisances. There were no proceedings for the abatement of Nuisances in 1909. Such Nuisances as are from time to time found to exist are practically invariably abated on informal notice.

Food and Drugs. No samples were taken for Analysis. Bread and a small amount of groceries are the only kinds of food sold in the District. There are no drug-stores.

SUMMARY, -

1. Health matters now under the consideration of the Council. The only important question at present engaging

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SUMMARY. -

1. Health matters now under the consideration of the Council. The only important question at present engaging

its attention is the proposal for a Consumption Sanatorium for the County and no decision can be arrived at or opinion given on the subject until the Scheme has assumed a more definite shape.

2. Improvements made during the past 3 years. There are no large public undertakings and consequently no capital improvements have been made. Nevertheless the Sanitary condition of the District has been improved in the aggregate by the attention given to details of administration and I doubt not that in the future as in the past this will be reflected into a corresponding and continuous improvement in the health of the inhabitants.

3. Improvements required. From the foregoing statement of the character of the District it must be apparent that our requirements are very simple and consequently of the many measures and new provisions which would appropriately be urged in most Urban ~~xx xxxx~~ and many Rural Districts the only one I can at present recommend to you is the proposal for a Bacteriological Laboratory for the County, which I think should receive your support. That and the Scheme for a Consumption Sanatorium are the most important questions that are likely to engage your attention in the immediate future.

I trust not only that this Report will be considered a satisfactory statement of the Public Health in 1909, but also that whatever success we may have achieved in the past, and however few suggestions I have to make for the present, we shall in the future be ready to embrace every opportunity to better the Sanitary conditions and thus improve the health of the District.

I remain, Gentlemen,

Yours faithfully,

Ralph C. Bartlett

Medical Officer of Health.

The Limes, Romsey,

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Yours faithfully,

Percy C. Boulter

The Limes, Romsey, Medical Officer of Health.

March, 1910.

RAIN-FALL TABLE

From records of rainfall measured by the Revd. Vere Awdry at Ampfield Vicarage.

Month.	Rainfall in 1909.	Average rainfall in 10 years 1899 - 1908.	No. of days on which rain fell in 1909.	Average no. of wet days in year
January	1.00	2.585	8	
February	.46	2.159	8	
March	3.96	2.145	23	
April	1.33	2.198	12	
May	1.88	2.097	7	
June	4.27	2.409	22	
July	3.17	1.588	14	
August	2.39	2.835	8	
September	3. 50	1.636	18	
October	8.04	3.889	28	
November	.52	2.548	8	
December	3.81	2.759	18	
TOTAL	34.33	28.848	174	About 155

Ralph C. Davis
Medical Officer of Health

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Henry C. Bowen
Chairman of Board

HAMPSHIRE COUNTY COUNCIL.

RURAL DISTRICT OF ROMSEY.

TABLE VI. - SUMMARY OF ~~XXI~~ SANITARY WORK DONE IN THE INSPECTOR OF NUISANCES DEPARTMENT DURING THE YEAR 1909.

		Number of		Abatement Notices		Nuisances abated after Notices by	
		Inspections & observations made.	Defects found	Informal by Inspector	Formal by Authority.	Inspector.	Authority
Dwelling-houses & Schools.	Foul Conditions	76	3	3	0	3	-
	Structural Defects.		16	16	0	16	
	Over-crowding		2	1	1	1	1
	Cowsheds	48	17	17		17	
	Bake-houses	12	0				
	Slaughter-houses.	1	0				
	Ashpits & Privies.	78	68	68	0	68	
	Deposits of Refuse & Manure		2	2	0	2	
House Drainage.	Defective Traps.		2	2	0	2	
	Water Supply.	71	6	6	0	6	
	Total	286	116	115	1	115	1

Samples of Water taken for Analysis. 4

" " Condemned as Unfit for Use. ... 3

Precautions against Infectious Disease.

Houses Disinfectedafter Infectious Disease. 19

Schools ditto ditto 1

HAMPSHIRE COUNTY COUNCIL.

RURAL DISTRICT OF ROMSEY.

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Month.	Number of Inspections & observations made.	Defects found	Abatement Notices Informal by Inspector	Abatement Notices Formal by Authority.	Nuisances abated after Notices by Inspector.	Nuisances abated after Notices by Authority.
Dwellings & Houses & Schools.	Foul Conditions	3	3	0	3	-
	Structural Defects.	16	16	0	16	
	Over-crowding	2	1	1	1	1
Cowsheds		48	17		17	
Bake-houses		12	0			
Slaughter-houses.		1	0			
Ashpits & Privies.		78	68	0	68	
Deposits of Refuse & Manure		2	2	0	2	
Houses Defective Traps.		2	2	0	2	
Drainage.						
Water Supply.		71	6	0	6	
Total		236	116	1	115	1

Samples of Water taken for Analysis. 4

" " Condemned as Unfit for Use. ... 3

Precautions against Infectious Diseases.

Houses Disinfected after Infectious Disease. 19

Schools ditto ditto 1

ROMSEY RURAL DISTRICT - Population 6270.

TABLE OF DEATHS from Zymotic Diseases and Zymotic Death-rates for 10 years ending with 1909.

Year	Deaths from Small-pox.	Deaths from Measles	Deaths from Scarlet Fever	Deaths from Diph-theria	Deaths from Membran-ous Croup	Deaths from Enteric & other Fevers.	Deaths from Whoop-ing cough	Total of deaths from Zymotic diseases	Zymotic Death-rate (per 1000 living).
1900	0	2	1	0	0	0	0	3	.47
1901	0	0	0	2	0	1	0	3	.47
1902	0	1	1	0	0	0	0	2	.31
1903	0	0	0	1	0	0	0	1	.15
1904	0	0	1	0	0	0	0	1	.15
1905	0	1	0	2	0	0	1	4	.63
1906	0	0	0	3	0	0	0	3	.47
1907	0	3	0	3	0	0	0	6	.95
1908	0	2	0	1	0	0	0	3	.47
1909	0	0	0	0	0	0	0	0	.00
Total for 10 years.	0	9	2	12	0	1	1	26	Average total Zymotic death-rate per 1000 per annum .41
Average death-rate per annum	-	.14	.04	.19	-	.01	.01	-	

Ralph C. Bousfield

Medical Officer of Health.

RONSHY RURAL DISTRICT - Population 6870.

TABLE OF DEATHS from Zymotic Diseases and Zymotic Death-rates for 10 years ending with 1909.

Year	Deaths from Small-pox.	Deaths from Measles	Deaths from Scarlet Fever	Deaths from Diphtheria	Deaths from Membranous Croup	Deaths from Enteric & other Fevers.	Deaths from Whooping cough	Total of deaths from Zymotic diseases	Zymotic Death-rate (per 1000 living
1900	0	8	1	0	0	0	0	3	.47
1901	0	0	0	2	0	1	0	3	.47
1902	0	1	1	0	0	0	0	2	.32
1903	0	0	0	1	0	0	0	1	.15
1904	0	0	1	0	0	0	0	1	.15
1905	0	1	0	2	0	0	1	4	.63
1906	0	0	0	3	0	0	0	3	.47
1907	0	4	0	3	0	0	0	8	.95
1908	0	2	0	1	0	0	0	3	.47
1909	0	0	0	0	0	0	0	0	.00
Total for 10 years.	0	9	2	12	0	1	1	26	Average total Zymotic death-ra per 1000 per annum .41
Average death-rate per annum	-	.14	.04	.19	-	.01	.01	-	

Medical Officer of Health.

TABLE I.

Vital Statistics of Whole District during 1909 and previous Years.

Name of District Romsey Rural District.

Year.	Population estimated to Middle of each Year.	Births.		Total Deaths Registered in the District.				Total Deaths in Public Institutions in the District.	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District.	Nett Deaths at all Ages belonging to the District.	
				Under 1 Year of Age.		At all Ages.						
		Number.	Rate.*	Number.	Rate per 1,000 Births registered	Number.	Rate.*				Number.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1899.*	6,625	155	23.3	11	70.7	94	14.2	15	4	1	91	13.7
1900.	6,625	163	24.6	13	79.7	90	13.5	11	3	0	87	13.1
1901.	6,270	152	24.2	12	78.9	92	14.6	16	8	1	85	13.5
1902.	6,270	157	25.0	8	50.9	75	11.9	12	10	3	68	10.8
1903.	6,270	160	25.5	12	75.0	84	13.3	12	7	1	78	12.4
1904.	6,270	156	24.8	12	76.9	74	11.8	13	6	2	70	11.1
1905.	6,270	153	24.4	6	39.2	94	14.9	22	8	3	89	14.1
1906.	6,270	153	24.4	14	91.5	90	14.3	19	12	6	84	13.3
1907.	6,270	139	22.1	13	93.5	95	15.1	20	7	7	95	15.1
1908.	6,270	144	22.9	9	62.5	68	10.8	7	6	1	63	10. 0.
Averages for years 1899-1908.	6341	153.2	24.1	11	71.7	85.6	13.4	14.7	7.1	2.5	81	12.7
1909.	6270	152	24.2	8	52.6	84	13.3	29	10	2	76	12.1

* Rates in Columns 4 and 8 should be calculated per 1,000 of the estimated gross population. In districts in which large public institutions seriously affect the statistics, the rates in Column 13 may be calculated on a nett population, obtained by deducting from the estimated gross population the average number of inmates not belonging to the district in such institutions.

Note.—The deaths to be included in Column 7 of this Table are the whole of those registered during the year as having actually occurred within the district or division. The deaths to be included in Column 12 are the number in Column 7, corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

By the term "Non-residents" is meant persons brought into the district on account of sickness or infirmity, and dying in public institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in public institutions elsewhere.

The "Public institutions" to be taken into account for the purposes of these Tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, workhouses and lunatic asylums. A list of the Institutions in respect of the deaths in which corrections have been made should be given on the back of this Table.

Area of District in acres (exclusive of area covered by water) 31,855

At Census of 1904.

Total population at all ages 6270

Number of inhabited houses 1475

Average number of persons per house 4.2

M. 190.

[61]. Wt. 13997-90 9,200. 8/09. W.H.S. & S., N. Sch. 30a

[SEE OVER.

* Population at Census of 1891

I. Institutions within the District receiving sick and infirm persons from outside the District.	II. Institutions outside the District receiving sick and infirm persons from the District.	III. Other Institutions, the deaths in which have been distributed among the several localities in the District.
The Romsey Union Workhouse (receiving persons from the Borough of Romsey).	The Romsey Cottage Hospital (in the Borough of Romsey).	

Is the Union Workhouse within the District ? Yes.

TABLE II. **Vital Statistics of separate Localities in 1909 and previous years.**

Name of District Romsey Rural District

Names of Localities.	1. Romsey Extra				2. Michelmersh & Timsbury				3. Mottisfont Fordingbridge & East Dean.				4. Ltl Wallow, Dunwood Hurstfield Braishfield Michelmersh & Mailford				5. Nursling & Rownhams.				6.				7.			
Year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.
	a.	*b.*	*c.*	*d.*	*a.*	*b.*	*c.*	*d.*	*a.*	*b.*	*c.*	*d.*	*a.*	*b.*	*c.*	*d.*	*a.*	*b.*	*c.*	*d.*	*a.*	*b.*	*c.*	*d.*	*a.*	*b.*	*c.*	*d.*
1899 ...	1298	26	23	0	1307	31	16	4	1383	33	19	0	1484	31	17	3	1153	34	19	4								
1900 ...	1298	28	14	5	1307	36	16	2	1383	32	17	4	1484	48	24	1	1153	19	16	1								
1901 ...	~~1298~~	29	15	3	1157	35	11	1	1257	29	19	2	1464	34	27	3	1160	25	13	3								
1902 ...	1232	33	11	0	1157	30	12	2	1257	28	14	1	1464	38	19	3	1160	28	12	1								
1903 ...	1232	33	8	2	1157	29	17	1	1257	34	18	3	1464	46	23	5	1160	18	12	1								
1904 ...	1232	29	10	4	1157	~~29~~	~~17~~	~~2~~	1257	31	8	0	1464	42	24	5	1160	25	14	1								
1905 ...	1232	37	17	2	1157	21	15	0	1257	24	20	4	1464	53	20	0	1160	18	17	0								
1906 ...	1232	32	17	5	1157	25	21	2	1257	32	14	4	1464	35	15	0	1160	29	17	3								
1907 ...	1232	21	13	2	1157	27	22	2	1257	32	24	4	1464	33	28	2	1160	26	18	3								
1908 ...	1232	22	6	0	1157	31	14	0	1257	29	12	0	1464	39	19	5	1160	23	12	4								
Averages of Years 1899 to 1908.	1245	29	13.4	2.3	1187	~~29.4~~ 29.4	15.8	1.6	1282	30.4	16.5	2.2	1468	39.9	21.6	2.7	1158	24.5	15	2.1								
1909 ...	1232	28	12	1	1157	34	13	1	1257	27	24	2	1464	37	18	4	1160	26	9	0								

NOTES.—(*a*) The separate localities adopted for this table should be areas of which the populations are obtainable from the census returns, such as wards, parishes or groups of parishes, or registration sub-districts. Block 1 may, if desired, be used for the whole district: and blocks 2, 3, &c., for the several localities. In small districts without recognised divisions of known population this Table need not be filled up.

(*b*) Deaths of residents occurring in public institutions beyond the district are to be included in sub-columns *c* of this Table, and those of non-residents registered in public institutions in the district excluded. (See note on Table I. as to meaning of terms "resident" and "non-resident.")

(*c*) Deaths of residents occurring in public institutions, whether within or without the district, are to be allotted to the respective localities according to the addresses of the deceased.

(*d*) Care should be taken that the gross totals of the several columns in this Table respectively equal the corresponding totals for the whole districts in Tables I. and IV.: thus, the totals of sub-columns *a*, *b* and *c* should agree with the figures for the year in the columns 2, 3, and 12, respectively, of Table I.: the gross total of the sub-columns *c* should agree with the total of column 2 in Table IV., and the gross total of sub-columns *d* with the total of column 3 in Table IV.

[62] 13997-90. 9,200. 8/09. W.H.S. & S., N. Sch. 30b.

TABLE III.

Cases of Infectious Disease notified during the Year 1909.

Name of District Romsey Rural District

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.							TOTAL CASES NOTIFIED IN EACH LOCALITY.							No. OF CASES REMOVED TO HOSPITAL FROM EACH LOCALITY.							
	At all Ages.	At Ages† — Years.						1	2	3	4	5	6	7	1	2	3	4	5	6	7	8
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.															Total cases removed to Hospital.
Small-pox																						
Cholera																						
Diphtheria (including Membranous croup) ...	12		1	7	3	1		2	6	1	2	1										
Erysipelas	5					5		1		3		1										
Scarlet fever	4			3	1					4												
Typhus fever																						
Enteric fever																						
Relapsing fever																						
Continued fever																						
Puerperal fever																						
Plague																						
*																						
Totals	21		1	10	4	6		3	6	8	2	2										0

NOTES.—The localities adopted for this table should be the same as those in Tables II. and IV.

State in space below the name of the isolation hospital, if any, to which residents in the district, suffering from infectious disease, are usually sent, and the accommodation, available for the district, afforded by it. Mark (H) the locality in which it is situated, or if not within the district, state where it is situated, and in what district. The name of the authority by whom the hospital is provided should also be given. Mark (W) the locality in which a workhouse is situated.

* This space may be used for record of other disease the notification (compulsory or voluntary) of which is in force in the district.

† These age columns for notifications should be filled up in all cases where the Medical Officer of Health, by inquiry or otherwise, has obtained the necessary information.

*** Column 8 should be filled up with the Totals of cases removed to Hospital, whether the District is divided into separate localities or is treated as one undivided area.

M 192.

Isolation Hospital—Name and Situation There is no such Hospital. *Total available beds* _____ *Number of Diseases that can be concurrently treated* _____

(63.) Wt. 13997-90. 9,200. 8/09. W.H.S. & S., N. Sch. 30c.

| | | |

Causes of, and Ages at, Death during Year 1909.

Name of District Romsey Rural District.

(See Notes at Back.)

Causes of Death.	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District.							Deaths at all ages of "Residents" belonging to Localities, whether occurring in or beyond the District.							Total Deaths whether of "Residents" or "non-Residents" in Public Institutions in the District.
	All ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.								
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Small-pox															
Measles															
Scarlet fever															
Whooping-cough ...															
Diphtheria (including Membranous croup)															
Croup															
Fever (Typhus ...)															
Fever (Enteric ...)															
Fever (Other continued)															
Epidemic influenza ...	2						2			1	1				
Cholera															
Plague															
Diarrhœa. (*See* notes at back.)															
Enteritis. (*See* notes at back.)															
Gastritis. (*See* notes at back.)	1	1								1					
Puerperal fever. (*See* notes at back.)															
Erysipelas	1						1		1						1
Phthisis, (Pulmonary Tuberculosis).	1				1					1					
Other tuberculous diseases.															
Cancer, malignant disease. (*See* notes at back.)	7					2	5	1	1	3	1	1			5
Bronchitis	3					1	2	1	1	1					2
Pneumonia	5	1	1				3	1	2			2			
Pleurisy	1						1					1			
Other diseases of Respiratory organs.	3				1	1	1		1	2					3
Alcoholism } Cirrhosis of liver }															1
Venereal diseases ...	1					1		1							1
Premature birth ...	3	3						1			2				2
Diseases and accidents of parturition ...	11				1	4	6		2	2	4	3			
Heart diseases... ...															
Accidents	1					1			1						
Suicides															
All other causes ...	36	3			3	7	23	7	4	13	10	2			17
All causes ...	76	8	1		6	17	44	12	13	24	18	9			29

[64]. Wt. 13997-90. 9,200. 8/09. W.H.S. & S., N. Sch. 30d.

NOTES TO TABLES IV. AND V.

(*a*) In Table IV., all deaths of "Residents" occurring in public institutions, whether within or without the district, are to be *included* with the other deaths in the columns for the several age groups (columns 2-8). They are also, in columns 9-15, to be *included* among the deaths in their respective "Localities" according to the previous addresses of the deceased as given by the Registrars. Deaths of "Non-residents" occurring in public institutions in the district are in like manner to be *excluded* from columns 2-8 and 9-15 of Table IV.

(*b*) *See* notes on Table I. as to the meaning of "Residents" and "Non-residents," and as to the "Public Institutions" to be taken into account for the purposes of these Tables. The "Localities" in Table IV. should be the same as those in Tables II. and III.

(*c*) All deaths occurring in public institutions situated within the district, whether of "Residents" or of "Non-residents," are, in addition to being dealt with as in note (*a*), to be entered in the last column of Table IV. The total number in this column should equal the figures for the year in column 9, Table I.

(*d*) The total deaths in the several "Localities" in columns 9-15 of Table IV. should equal those for the year in the same localities in Table II, sub-columns c. The total deaths at all ages in column 2 of Table IV. should equal the gross total of columns 9-15, and the figures for the year in column 12 of Table I.

(*e*) Under the heading of "Diarrhœa" are to be included deaths registered as due to Epidemic diarrhœa, Epidemic enteritis, Infective enteritis, Zymotic enteritis, Summer diarrhœa, Dysentery and Dysenteric diarrhœa, Choleraic diarrhœa, Cholera (other than Asiatic or epidemic), and Cholera Nostras.

Deaths from diarrhœa secondary to some other well-defined disease should be included under the latter.

Deaths from Enteritis, Muco-Enteritis, Gastro-Enteritis, and Gastritis (see under the heading Diarrhœal Diseases in Table V.) in Tables IV. and V. should be placed immediately below, but separately from, those enumerated under the heading Diarrhœa as defined by enumeration above. This is particularly important for deaths under one year of age, as many of the deaths in infancy returned as due to Enteritis are really caused by Epidemic Diarrhœa. In the course of years, by the adoption of this recommendation, it will be practicable to ascertain the probable amount of transfer between these different headings.

(*f*) Under the headings of "Cancer" and "Puerperal fever" should be included all registered deaths from causes comprised within these general terms. Thus: Under "Cancer" should be included deaths from Cancer, Carcinoma, Malignant disease, Scirrhus, Epithelioma, Sarcoma, Villous tumour, and Papilloma of bladder, Rodent ulcer. Under "Puerperal Fever" are to be included deaths from Pyæmia, Septicæmia, Sapræmia, Pelvic peritonitis, Peri- and Endo-Metritis occurring in the Puerperium.

(*g*) Under "Congenital Defects" in Table V. are to be included deaths from Atelectasis, Icterus neonatorum, Navel hæmorrhage, Malformations and Congenital hydrocephalus.

(*h*) Under "Tuberculous Meningitis" are to be included deaths from Acute hydrocephalus.

(*i*) Under "Other Tuberculous Diseases" are to be included deaths from Tuberculosis, Tuberculosis of bones, joints and other organs, Lupus and Scrofula.

(*j*) All deaths certified by registered Medical Practitioners and all Inquest cases are to be classed as "Certified"; all other deaths are to be regarded as "Uncertified."

In recording the facts under the various headings of Tables I., II., III., IV. and V., attention has been given to the notes on the Tables.

Ralph C. Bolton *Medical Officer of Health.*

Date March 16 *1910.*

Table V.

Romsey Rural — *Borough. / District.*

INFANTILE MORTALITY DURING THE YEAR 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

(See Notes at back of Table IV.)

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under One Year.
All Causes. Certified	3				3				1	1		1	1	1			8
All Causes. Uncertified																	0
i. Common Infectious Diseases. Small-pox																	
Chicken-pox																	
Measles																	
Scarlet Fever																	
Diphtheria (including Membranous Croup)																	
Whooping Cough ...																	
ii. Diarrhœal Diseases. *(See Notes to Table IV.)* Diarrhœa, all forms ...																	
Enteritis, Muco-enteritis, Gastro-enteritis																	
Gastritis, Gastro-intestinal Catarrh									1								1
iii. Wasting Diseases. Premature Birth ...	3				3												3
Congenital Defects ... *(See Notes to Table IV.)*																	
Injury at Birth																	
Want of Breast-milk, Starvation																	
Atrophy, Debility, Marasmus																	
iv. Tuberculous Diseases. Tuberculous Meningitis ... *(See Notes to Table IV.)*																	
Tuberculous Peritonitis: Tabes Mesenterica																	
Other Tuberculous Diseases *(See Notes to Table IV.)*																	
v. Other Causes. Erysipelas																	
Syphilis																	
Rickets														1			1
Meningitis (*not Tuberculous*)												1					1
Convulsions										1							1
Bronchitis																	
Laryngitis																	
Pneumonia													1				1
Suffocation, overlying ...																	
Other causes																	
	3				3				1	1		1	1	1			8

District (or sub-division) of Romsey (Rural)

Population. Estimated to middle of 1909 6270

Births in the year { legitimate 144 / illegitimate 8

Deaths in the year of { legitimate infants 5 / illegitimate infants 3

Deaths from **all Causes at all Ages** 76

[65] Wt. 13997-90. 12,000. 8/09. W.H.S. & S., N. Sch. 30e.

Form 572.
Sept., 1909.

This Table is enclosed, by request of the Secretary of State, for the guidance and convenience of Medical Officers of Health in preparing that part of their Annual Report which relates to factories, workshops, workplaces and home work. It is not intended to supersede the fuller statement which is desirable in the text of the Report, but to provide for uniformity in the presentation of such particulars as lend themselves to statistical treatment.

Further copies can be supplied on application to the Chief Inspector of Factories, Home Office, London, S.W.

Annual Report of the Medical Officer of Health for the year 1909,

for the* Rural District — of Romsey —

e.g., Metropolitan Borough, County Borough, Borough, Urban District, Rural District.

on the administration of the Factory and Workshop Act, 1901, in connection with

FACTORIES, WORKSHOPS. WORKPLACES AND HOMEWORK.

1.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR INSPECTORS OF NUISANCES.

Premises. (1)	Number of Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories ... ... (Including Factory Laundries)	-	-	-
Workshops ... ... (Including Workshop Laundries)	12	-	-
Workplaces ... ... (Other than Outworkers' premises included in Part 3 of this Report)	-	-	-
Total	12	-	-

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars. (1)	Number of Defects, Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	Number of Prosecutions. (5)
*Nuisances under the Public Health Acts:—**				
Want of cleanliness				
Want of ventilation				
Overcrowding				
Want of drainage of floors				
Other nuisances				
†Sanitary accommodation — insufficient				
†Sanitary accommodation — unsuitable or defective				
†Sanitary accommodation — not separate for sexes				
Offences under the Factory and Workshop Act:— Illegal occupation of underground bakehouse (s. 101)				
Breach of special sanitary requirements for bakehouses (ss. 97 to 100)				
Other offences ... ... (Excluding offences relating to outwork which are included in Part 3 of this report)				
Total...	-	-	-	-

* Including those specified in sections 2, 3, 7 and 8, of the Factory and Workshop Act as remediable under the Public Health Acts.

† For districts not in London, state here whether section 22 of the Public Health Acts Amendment Act, 1890, has been adopted by the District Council; and if so what standard of sufficiency and suitability of sanitary accommodation for persons employed in factories and workshops has been enforced.

(1751). Wt.21,055—61. 12,000. 11/08. A.& E.W.
(15,700). „ 19,132—37. 12.000. 10/09. „

NATURE OF WORK.*	Lists received from Employers						Addresses of Outworkers. §		Notices serv on Occupiers to keeping sending list
	Sending twice in the year.			Sending once in the year.					
	Lists. †	Outworkers. †		Lists	Outworkers.		Received from other Councils.	Forwarded to other Councils.	
		Contractors.	Workmen.		Contractors.	Workmen.			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Wearing Apparel—									
(1) making, &c.							2	-	
(2) cleaning and washing									
Lace, lace curtains and nets ...									
Artificial flowers									
Nets, other than wire nets ...									
Tents									
Sacks									
Furniture and upholstery ...									
Fur pulling									
Feather sorting...									
Umbrellas, &c.									
Carding, &c., of buttons, &c. ...									
Paper bags and boxes... ...									
Basket making...									
Brush making									
Racquet and tennis balls ...									
Stuffed toys									
File making									
Electro-plate									
Cables and chains									
Anchors and grapnels									
Cart gear									
Locks, latches and keys ...									
Pea picking									
TOTAL... ...	-	-	-	-	-	-	2	-	-

* If an occupier gives out work of more than one of the classes specified in column 1, and subdivides his list in such a way as to show t principal class *only*, but the outworkers should be assigned in columns 3 and 4 (or 6 and 7) into their respective classes. A footnote should

† The figures required in columns 2, 3 and 4 are the *total* number of the lists received from those employers who comply strictly with the be *even* numbers, as there will be two lists for each employer—in some previous returns odd numbers have been inserted. The figures in c and August lists of the same employer the same outworker's name will often be repeated.

§ In view of the wide discrepancies found to exist between the totals in the two columns when the returns are added together, it is desir to other Councils during the year covered by the report.

4. REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year. (1)	Number. (2)
Important classes of workshops, such as workshop bakehouses may be enumerated here.	
Bakehouses	12
(No other Workshops or Factories in the District)	
Total number of workshops on Register	12

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NOTE.—The Factory and Workshop Act, 1901 (s. 132), requires the Medical Officer of Health in his Annual Report to the District Cou much of it as deals with this subject, to the Secretary of State (Home Office). If the Annual Report is presented otherwise than in print, or homework. The duties of Local Authorities and the Medical Officer of Health under the Act of 1901 are detailed in the Home Office Me and Medical Officers of Health in October, 1906.

Prosecutions.		Inspections of Outworkers' premises.	OUTWORK IN UNWHOLESOME PREMISES, SECTION 108.			OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110.		
Failing to keep or permit inspection of lists.	Failing to send lists.		Instances.	Notices served.	Prosecutions.	Instances.	Orders made (S. 110).	Prosecutions (Sections 109, 110).
(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
-	-	-	-	-	-	-	-	-

number of workers in each class of work, the list should be included among those in column 2 (or 5 as the case may be) against the added to show that this has been done.

cutory duty of sending *two* lists each year and of the entries of names of outworkers in those lists. The entries in column 2 must necessarily mns 3 and 4 will usually be (approximately) double of the number of individual outworkers whose names are given, since in the February

that care may be taken to give exact figures. Only those addresses should be counted which have actually been received from or forwarded

5. OTHER MATTERS.

Class (1)	Number. (2)
Matters notified to H.M. Inspector of Factories:—	0
Failure to affix Abstract of the Factory and Workshop Act (s. 133)	0
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5) — Notified by H.M. Inspector	0
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5) — Reports (of action taken) sent to H.M. Inspector ...	0
Other	0
Underground Bakehouses (s. 101):—	1
Certificates granted during the year	0
In use at the end of the year	0

March 16 1910. (*Signature*) Ralph C. Daniels
Medical Officer of Health.

to report specifically on the administration of that Act in workshops and workplaces, and to send a copy of his Annual Report, or so s unnecessary to include in the copy sent to the Home Office the portions which do not relate to factories, workshops, workplaces randum of December, 1904. A further Memorandum, on the Home Work Provisions of the Factory Act, was issued to all District Councils