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Contributors

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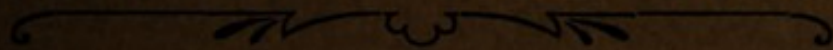
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SCARBOROUGH RURAL
DISTRICT COUNCIL.



ANNUAL REPORT



On the Sanitary Condition of the
District for the Year 1925, by :

Geo. J. B. Candler-Hope

M.A., M.B. (Edin.) and C.M.

Medical Officer of Health. :



Printed by Order of the Scarborough Rural District Council.

SCARBOROUGH:
G. R. MARSHALL & SON, ROYAL PRINTING WORKS,
14, ST. NICHOLAS STREET.

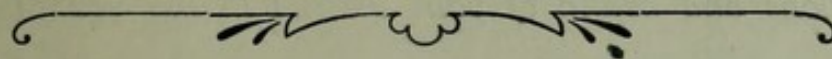
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14, ST. NICHOLAS STREET.

1926.

**To the Chairman and Members
of Scarborough Rural District Council.**

Gentlemen,

I beg to submit the Annual Report on the sanitary conditions and health of your district in the year 1925.

The Ministry of Health require this Report to be fuller and more comprehensive than usual, being the end of a quinquennial period, consequently we have departed from the economy of the last few years, and are having it printed instead of typed.

I have the honour to remain,

Your obedient Servant,

GEO. J. B. CANDLER-HOPE,

M.A., M.B. (Edin.) & C.M.

Medical Officer of Health.

West Ayton,

June, 1926.

SCARBOROUGH RURAL DISTRICT COUNCIL.

Annual Report of the Medical Officer of Health.

Scarborough Rural District is of very considerable area, but a large portion consists of sparsely populated tracts. The Southern portion is very flat and lies on the North side of what is known as the Carr Land. There is very little fall consequently, and this gives rise to difficulty in the drainage of all the villages in the area between Snainton on the West and Gristhorpe in the East. In the higher portion of the district the drainage is easily removed from the villages, and the only question that arises is its disposal after removal. Water shed is from North to South.

The Rural District is divided into two Registration Districts.

The area is 60,225 acres.

Population (1921), 6,705. (1925 estimated), 6,186.

No. of Inhabited Houses } Information
No. of Families or separate occupiers } not available.

Rateable Value, £64,218.

Penny rate yields approximately £150.

Poor Law Relief, £533 11s. 6d. (year ending March 31st, 1926).

There are no trades or occupations in the district likely to increase the death-rate or be detrimental to the health of the population. The area is entirely devoted to agriculture.

The total number of DEATHS corrected for incoming and outgoing cases is 67, of which 36 are males and 31 females. The DEATH-RATE therefore on the estimated population is 10·83 compared with 12·2 for the whole country. The greatest number (18) is certified as being due to Heart Disease, but this term includes all deaths due to

heart failure of old age and any other condition where the heart gives out, as well as genuine cases of disease of the valves and heart substance. The greatest number due to a specific disease is that under malignant disease (Cancer), viz., 10. Going back to 1897 I find that only in 1910 has this number been exceeded. So far as this disease affects the district I think the conclusion must be that it has not increased during the last 30 years—on the other hand it has not grown less. This year the deaths due to Tubercular disease in all forms number 6—5 of them disease of the lung. That is probably rather less than the average for the last 30 years. The provision made for the institutional treatment of this disease is that of the North Riding County Council. There is only one death from what we generally understand as infectious diseases. This is a great improvement on the first reports I made as your Medical Officer of Health, when such deaths averaged 6 for ten years. Infantile Diarrhœa is now a comparatively rare condition, and if persons supervising food in the homes would take precautions to keep flies from being in contact with it the disease would disappear altogether.

BIRTHS in the district during 1925 amounted to 93 (49 males and 44 females). This gives a birth-rate of 15·03 per 1,000, one of the lowest recorded in the district, and much below the rate for England and Wales, which is 18·3. Looking back on my report for 1899 the birth-rate was 24·94, then come the words—“This is the lowest yet recorded in the district. The falling off may in part be accounted for by the want of cottage accommodation. The available cottages are occupied by old or elderly people. When a young man gets married there is no room for him in the country, so he must seek a home and (incidentally) work in the town.” These words apply to-day nearly 30 years later. Of the 93 births two were illegitimate. There were no deaths of illegitimate children.

INFANTILE MORTALITY.—There were three deaths of children under 12 months—that is a death-rate of 32·25 per 1,000 children born. The rate for the whole country is 75. This is one of the directions in which great progress has been made. The average for my first ten years was 95·7, and it reached as high a figure as 149.

The cases of infectious disease notified were: Scarlet Fever, 17; Diphtheria, 2; Enteric, 1; Chicken-pox, 15. There was one death from Measles, which is non-notifiable. One case of Small-pox was notified, but a further examination led to the withdrawal of the notification. In addition there was a case of Encephalitis Lethargica (sleepy sickness). This, however, was an imported patient in camp on the Racecourse, for whom the Military Authorities were responsible.

Under the new regulations for closing schools it is only when the Medical Officer of Health considers that the school is the focus of the disease, and after consultation with one or more District Councillors, that the school is closed. I considered it advisable during one period to exclude from Hackness School a few children all residing at or above Low Dales, some of whom were suffering from Scarlet Fever.

Notifications of tubercular disease are still incomplete—more deaths occurring than cases notified.

For some years I have reported the WATER SUPPLY of the villages as being satisfactory, and that it was only at some outlying houses where the wells were doubtful. The consideration of building developments has brought to light that Leubberston supply is inadequate. Such as it is the quality is good, but plans for a further supply either from Filey or Scarborough Corporation are being considered.

With regard to SEWERAGE there are special difficulties in the area. As I said in my introductory remarks all our Southern villages are on the border of what was at one time practically a marsh, with only a very slight fall towards the South. The consequence is that serious difficulties arise with regard to sewage disposal. Of late years houses have been built with water closets and baths. Through these being connected with what were at first surface water drains the latter have now become sewers, so in every village the question of the disposal of sewage has arisen. Under the circumstances all schemes for this purpose are so costly as to be almost prohibitive. Such schemes, however, have in several cases been brought out, and although it has not been found possible to carry them out in toto all new drainage and extensions are so designed as to be part of the ultimate whole.

For several years now I have called attention to the conditions at Wheatcroft. Much attention and time has been given to this matter, but difficulties have arisen and delay caused by the inability of the Council to get the necessary land. The original scheme has proved unsatisfactory, and now a larger and more expensive plan awaits the sanction of the Ministry of Health.

The rivers and streams are in the same condition as previously reported. No arrangements for public scavenging are made. Previously difficulty was found in keeping ash-pits dry and closets clean. Now conditions are much improved, and generally the district needs little supervision.

Inspections in the district are made as occasion arises, and the whole district is covered at least once a year. Inspections included 38 drains, 11 water supplies, 1 piggery and 11 sundries. Sixteen houses were disinfected, and some 24 houses inspected on various grounds.

This Council has no hospital of its own; but arrangements that have always worked satisfactorily have been in existence for over 30 years whereby the Council's patients are received into the Infectious Diseases and Small-pox Hospitals of Scarborough Urban District. The cases are removed by the Corporation Ambulance. For non-infectious cases the Red Cross stationed at Cloughton and the Scarborough Police Ambulances are available.

The Sanitary Officers of the Council are the Medical Officer of Health and the Sanitary Inspector, both of whom are part time officers. The former is also Meat Inspector for the area.

No Nurses are directly employed by the Authority, but the greater part of the district is covered by Nurses subsidised by the County Council. Such Midwives as there are in our district are also under the control of the County Council.

The County Public Analyst is usually employed in the examination of water, &c., but the "North Riding" laboratory in Scarborough is now licenced and has been approved by the Ministry for the qualitative, quantitative and bacteriological examination of milk and other foods. Usually the sputums, swabs and other specimens are examined there, as much time is thereby saved.

HOUSING.—At the end of 1925 the housing conditions remained much as they have been since the War, but steps were being taken to take up building schemes by the Council, and at the time of writing contracts have been entered into for the building of over 30 cottages. As these schemes were on the way, and as yet no new houses were available, we felt that condemning of present houses was useless. There are several that are not fit to live in, and as soon as other houses are available special reports will be made on these and all other houses that require bringing up-to-date. Some 24 houses were inspected for various reasons.

Thirty new houses have been erected during the year. Of these all are erected by private persons, and 7 are subsidised.

Meat inspection began in this district in July, 1925. Up to the end of the year 72 inspections had taken place. Of these, 21 were special calls to see animals which for one cause or another had to be slaughtered. Three pigs, two sheep, one calf and one bullock, with parts of another, were condemned. No provision has been made for the disposal of condemned carcasses.

There are 12 registered private slaughter-houses in the area. At the commencement of the Act none of these conformed to regulations, but there was little difficulty in getting the necessary alterations and additions carried out. Only in two cases had no steps been taken to bring the premises up-to-date. The shops, vans and carts have been kept under continual observation. All suggested improvements have been carried out, and regulations for cleanliness obeyed. In only one case have I noticed no improvement, in which action is threatened if the regulations are still neglected.

Appended is a table showing causes of death.

I am,

Your obedient Servant,

GEO. J. B. CANDLER-HOPE,
M.A., M.B. (Edin.) and C.M.
Medical Officer of Health.

CAUSES OF DEATH IN SCARBOROUGH RURAL DISTRICT, 1925.

Causes of Death.	M.	F.
ALL CAUSES	36	31
Small-pox ... ..	...	...
Measles	1	...
Scarlet Fever ... ..	...	...
Whooping Cough ... ..	...	...
Diphtheria ... ..	...	...
Influenza... ..	...	1
Tuberculosis of Respiratory System .	2	3
Other Tuberculous Diseases	1	...
Cancer, Malignant Disease	5	5
Rheumatic Fever ... ..	...	...
Cerebral Hæmorrhage, &c	1	4
Heart Disease	12	6
Arterio-Sclerosis... ..	3	2
Bronchitis	1	2
Pneumonia (all forms)	2	...
Other Respiratory Diseases ... ..	...	...
Diarrhœa, &c. (under 2 years)	1	1
Puerperal Sepsis... ..	...	1
Other Accidents and Diseases of Pregnancy and Parturition ... ..	...	...
Congenital Debility and Malformation, Premature Birth ... ..	...	...
Other Deaths from Violence	1	...
Other Defined Diseases... ..	6	6
Deaths of Infants { Total	2	1
under 1 year { Illegitimate ... ..	...	...



