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THE
RURAL DISTRICT COUNCIL
OF SEDGEFIELD.



ANNUAL REPORT

OF THE
MEDICAL OFFICER OF HEALTH,
FOR
THE YEAR ENDING
DECEMBER 31ST, 1925.

DURHAM:

George Bailes, Printer, Stationer, &c., 24, Silver Street, Durham.

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

MR. CHAIRMAN, LADY AND GENTLEMEN,

I have the honour to present the Forty-eighth Annual Report upon the vital statistics and sanitary work of your district for the year ending December 31st, 1925. This survey report reviews the measure of progress and sanitary reform in the area during the preceding five years, and is arranged in accordance with the instructions issued to all medical officers of health by the Ministry in their circular 648.

The Registrar General has supplied the number and nature of the deaths from all causes, the number of births, and also the estimated population of the district, which is precisely the same as that estimated for the year 1924.

After correcting this estimate by subtracting the number of inmates undergoing treatment in the Durham County Asylum, who do not belong to your district, I find the increase of population to be 170 over the year 1924, and the corrected figure 37,338 is the basis upon which the birth rate and death rate of your district is calculated.

Standardising factors for correcting the death rate have also been supplied by the Registrar General, and the factor for your district is 1.083.

Physical Features and General Character of the District.

Your district is bounded on the north by the industrial townships of Cornforth and the Trimdons ; on the east by an agricultural area adjoining that of the Hartlepool and



Stockton Rural Districts ; on the west by the large industrial area of Ferryhill, Chilton and Windlestone, and on the south by the agricultural district of Bishopton.

The surface is undulating and hilly on the north and west sides, while to the south-west and extending from Ferryhill station to Preston-le-Skerne is a large area of low lying, flat, undrained land known as the Middleham, Bradbury and Mordon Carrs. A small stream known as the river Skerne rises close to Hurworth Burn on the north, traverses the central portion of the district to the south-western border at Preston-le-Skerne and passing through the Darlington district finally discharges itself into the river Tees.

The stream is sluggish and slow-moving for the greater part of its course, and in wet weather frequently overflows, flooding the adjacent low lying land.

The soil is light with limestone deposits in the north and west, sand and gravel abound in the central portion of the district and heavy clay in the southern and eastern portions.

Social Conditions.

The chief occupations in order of numerical importance are : coal-mining and bye-product works, limestone quarrying, blast furnace work and agriculture. I am of opinion that these occupations are not unhealthy, the dangerous character of some of them however is responsible for many fatal accidents, whilst major and minor injuries give rise to a great deal of partial and total disablement.

Area in acres	44,939
Population (census 1921).....	35,953
Population (estimated 1924)	37,168
Do. („ 1925)	37,338

Number of inhabited houses (1921).....	7,156
Number of families or separate occupiers (1921)	7,323
Rateable Value—Agricultural Land	£24,270
Do. Buildings	£214,043
Assessable value.....	£220,110
Gross produce of a penny rate.....	£917 2s. 6d.
Amount of Poor Law Relief (1920).....	£9,506
Do. do. (1925).....	£19,974

VITAL STATISTICS, 1925.

BIRTHS.

	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Legitimate	446	444	890
Illegitimate.....	10	17	27
	<hr/> 456	<hr/> 491	<hr/> 917

Excess of female births over male 35, decline in the number of births compared with the year 1921 — 193, and with the year 1924 — 41.

Birth rate (1921)	30·8
Do. (1924)	25·7
Do. (1925)	24·5

Decline in the birth rate in the five years under review is 6·3 per 1,000 of the estimated population.

DEATHS.

	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
All ages	224	200	424
Death rate (1921) 12·8 per 1,000 of the estimated population.			
Do. (1924) 12·3	do.	do.	
Do. (1925) 11·3	do.	do.	

The fall in the death rate per 1,000 of the estimated population in five years is 1·5.

The number of infants who died during the year under one year of age is 77, in (1924) 101, in (1921) 126. The infantile mortality rate, that is the death rate per 1,000 births of infants under one year of age, for (1925) is 83·9, for (1924) 109·5, for (1921) 113·5.

The decline in the infantile mortality rate is a very gratifying feature in this report, and although there are many factors which play a part in this improvement I am nevertheless convinced that the Infant Welfare and Ante-natal centres are responsible for a substantial share of it. The educational value to the mothers attending these centres cannot be over-estimated, and the following up work performed by the Health Visitor staff ably supplements the efforts of the medical officers in their trying, tedious, uphill fight against this deplorable loss of life. I have been privileged to work at some of these centres, to witness the interest the mothers take in them and their friendly rivalry in the progress of their offspring, and a word of praise is due to them for the loyal manner in which they endeavour to carry out instructions under domestic difficulties and in an environment which, in the majority of cases, is depressing and most discouraging. During baby week your medical officer addressed a well-attended meeting at Dean Bank upon "Preventible Blindness in the Newly-born," interesting and instructive films were shown and the arrangements made by the voluntary workers and welfare staff at this centre were excellent and reflect the greatest credit upon all concerned.

Deaths from Measles (all ages).....	16
Do. Whooping Cough (all ages)	5
Do. Diarrhoea (under 2 years of age)	6
<i>Causes of Death.</i>	<i>M.</i> <i>F.</i>
All Causes	224 200
Measles	9 7

<i>Causes of Death.</i>	<i>M.</i>	<i>F.</i>
Whooping cough	2	3
Diphtheria	2	1
Influenza.....	6	6
Encephalitis lethargica.....	—	1
Tuberculosis of respiratory system...	16	13
Other tuberculous diseases	9	11
Cancer, malignant disease.....	16	19
Rheumatic fever	1	3
Diabetes	—	2
Cerebral hæmorrhage, etc.	16	12
Heart disease	21	22
Arterio-sclerosis	2	3
Bronchitis	17	6
Pneumonia (all forms)	25	24
Other respiratory diseases	—	1
Ulcer of stomach or duodenum	1	2
Diarrhœa, etc. (under 2 years).....	3	3
Appendicitis and typhlitis	1	1
Cirrhosis of liver.....	1	—
Acute and chronic nephritis.....	4	5
Other accidents and diseases of pregnancy and parturition	—	3
Congenital debility and malformation, premature birth.....	13	13
Suicide.....	4	—
Other deaths from violence.....	13	2
Other defined diseases	41	37
Causes ill-defined or unknown.....	1	—
Special Causes (included above) :		
Poliomyelitis	—	1

General Provision of Health Services in the Area.

HOSPITALS PROVIDED OR SUBSIDISED BY LOCAL AUTHORITY OR COUNTY COUNCIL.

(1) *Tuberculosis*.—The following is a list of sanatoria and hospitals in the County to which patients from Sedgfield Rural District may be sent for treatment :—

County Sanatorium, Wolsingham.

Black Fell T.B. Hospital, near Birtley.

Sealburn Hospital, near Ryton-on-Tyne.

Hebburn Sanatorium.
 Tindale Crescent Hospital.
 Sunderland Rural Hospital.
 Helmington Row Hospital.
 Stannington (for children).

(2) *Venereal Diseases*.—Durham, Stockton and Darlington Hospitals are the convenient centres provided by the County Council for the treatment of these cases in your district.

(3) *Maternity Hospitals*.—The County Council, in conjunction with the County Nursing Association, have provided a Maternity Hospital at Bishop Auckland for use by residents in the county area, and patients from Sedgfield Rural District have already been treated there.

(4) *Children*.—Children suffering from ophthalmia neonatorum have in certain cases been sent to hospital, usually the Howbeck Infirmary, West Hartlepool. Others requiring convalescent treatment have been sent, with their mothers, to the Mitcham Convalescent Home, partly at County expense. The E. F. Peile Convalescent Home, which was opened on 1st July, 1922, will now be available for cases requiring convalescent treatment from any part of the administrative county. As a rule children suffering from rickets and malnutrition will be sent to this home for treatment. Accommodation ^{for} of 15 children and six mothers.

FEVER.—An isolation hospital is provided by the Local Authority for the reception of Scarlet Fever, Diphtheria and Enteric Fever patients. It contains 35 beds and is situated about a quarter of a mile from Sedgfield Village.

SMALL POX.—Conjointly with the Easington Rural District Council and Seaham Harbour, the Local Authority

provides accommodation for the reception of Small Pox cases at Thornley. The hospital is situated in Thornley Parish and contains twenty-four beds, it is a dismal looking place, the wards, kitchen, corridor, etc., etc., are sadly in need of decorative repair, the grounds are unmade, unkept and untidy, and the outlook for both patients and staff very uninviting. As the result of a conference of medical officers of the county, under the chairmanship of the county medical officer, I recommended to your council the provision for more beds, the hospital is too small to cope with an epidemic and twenty-four beds certainly overcrowds the present floor space.

There is no institutional provision for unmarried mothers, illegitimate infants and homeless children in the district, other than the Poor Law Institution at Sedgefield. St. Monica's Home, Bishop Auckland, admits unmarried mothers for confinement.

AMBULANCE FACILITIES.—For infectious cases a horse ambulance is provided for the joint Small Pox Hospital at Thornley, and a motor ambulance for the Isolation Hospital at Sedgefield.

FOR NON-INFECTIOUS CASES.—Other than the ambulances provided by the colliery companies for the use of their own employees, no provision is made for the removal of accident and non-infectious cases to hospital. Ambulances can be hired from the neighbouring towns and motor cars of various kinds are readily available in most of the townships and are generally employed in these cases.

CLINICS AND TREATMENT CENTRES. *Maternity and Child Welfare*.—There are four Welfare Centres situated within the Sedgefield Rural District: one at Ferryhill (the P.M. Schoolroom, Dean Bank), one at Trimdon Grange (Miners' Hall), one at Coxhoe, and one at Chilton,

There are no Day Nurseries or School Clinics under the control of the County Council in the Sedgfield Rural District.

TUBERCULOSIS DISPENSARIES.—There are no T.B. Dispensaries situated in the area but the following dispensaries serve the area :—Bishop Auckland, Stockton, West Hartlepool and Sherburn Hospital. All these premises either belonging to or are hired by the County Council.

PUBLIC HEALTH OFFICERS OF THE LOCAL AUTHORITY.

Your council employ a part-time Medical Officer of Health, two full-time Sanitary Inspectors for the Northern part of the district, whilst the Sanitary Surveyor acts as Inspector for the Southern area.

Neither office accommodation nor adequate equipment is provided for either the medical officer of health or the inspectors of the northern districts. In so far as equipment is concerned, an application was made to your council by one of the northern inspectors for a typewriter, the application appeared to me to be a reasonable and necessary one, but your council thought otherwise and turned it down. Anything that can make for efficiency in the public health service of your district is not unimportant and such a commonplace accessory for correspondence work as is a typewriter is anything but a superfluous refinement.

The question of office accommodation and equipment merits the favourable consideration of your council, at present the private sitting rooms of your northern sanitary inspectors are sadly encroached upon for their office work, and their equipment is of the most meagre description.

I have been familiar with the public health service in your district for nearly seventeen years, and beyond

the provision of a cupboard for one of the inspectors of the northern district, no other request has been made to facilitate the easy and efficient working of their departments.

Your public health service cannot be of secondary importance to any other of your administrative departments, its work grows *pari passu* with them, it must be progressive, and it is eminently desirable that it should have a central department of its own and be carried on on more up-to-date lines than is possible under the present conditions.

PROFESSIONAL NURSING IN THE HOME.—(a) *General*.—This work is performed by the district nursing associations, of which there are seven in the rural district, as follows: Chilton, Coxhoe, Cornforth, Ferryhill, Ferryhill Station, Fishburn and Sedgefield. These associations are under the supervision of the County Nursing Association, to which they are affiliated. Grants are paid to these associations by the County Council through the County Nursing Association in accordance with the County Scheme of Grants to County Nursing Association in respect of Midwifery.

(b) *For Infectious Diseases, e.g., Measles, etc.*—This work is also performed by district nursing associations, as above, but the County Council pay a grant to the County Nursing Association on behalf of approved associations on the following scale:—

£10 per annum in respect of each affiliated district nursing association, the population of whose area does not exceed 10,000, with an additional grant of £5 per 5,000 people in respect of nursing associations the population of whose area exceeds 10,000, subject to the arrangements made by the district nursing associations for the nursing of these cases being approved by

the County Medical Officer. Sedgefield District Nursing Association does not undertake the nursing of these special diseases.

MIDWIVES.—During 1925 there were 16 certified midwives residing in the Sedgefield Rural District, 12 of whom gave notice of intention to practice during that year. Five of these 16 are midwives employed under the County Trained Midwifery Scheme. Coxhoe, Sedgefield, Fishburn, Ferryhill Station, Cornforth District and Chilton Nursing Association do midwifery work, for which they each receive from the County Council a grant of £30 per annum, plus 4/- bonus per case.

Sanitary Circumstances of the Area.

Water.—This is supplied by the Durham County Water Board to the following townships:—Ferryhill, Chilton, Cornforth, Mainsforth, Bishop Middleham, Thrislington, Garmondsway Moor, Fishburn, Sedgefield, Bradbury. At Fishburn and Sedgefield about 25 and 50 per cent. of the houses respectively are supplied from stand posts. Trimdon township is supplied by the colliery company, and about 75 per cent. of the houses there draw their supply from stand posts, the remaining townships and outlying farms and cottages are supplied from wells. The quality of the water supplied by the Durham County Water Board leaves nothing to be desired, but during the year I received complaints as to the inadequacy of supply from the higher residents in the Fishburn Township.

Rivers and Streams.—These are regularly inspected four times a year by the County Council and District Council officials. Cases of pollution are frequently discovered from the bye-product works and are dealt with by the County Council.

Drainage and Sewerage.—The whole of your district is drained and sewered, the sewage disposal works consist for the most part of detritus and precipitation tanks and filter beds, together with land for final treatment. In other parts of your district precipitation and land irrigation is employed, whilst the hamlets of Mordon and Bishopton are provided with settling tanks only ; these arrangements have so far proved adequate and satisfactory.

During the year additional land has been added at Trimdon Sewage Works and two circular continuous filters have been constructed, 80 feet in diameter, with automatic distributors.

Additional land has also been obtained at Cornforth, and improvements are contemplated.

A reinforced concrete tank is in course of construction at Chilton Lane Pumping Station, and further improvements are contemplated in the near future.

Closet Accommodation.—A substantial advance has been made during the year in the conversion of ashpit privies to water-closets ; in Cornforth and Ferryhill 53 and 47 conversions respectively have been completed, and in addition thereto four ash-closets have been substituted for ashpit-privies where the water supply was found to be inadequate, the following table shows the conditions obtaining in your district during the past five years :—

THE WHOLE DISTRICT.

	<i>Year.</i>	<i>Ash- Closets.</i>	<i>Ashpit Privies.</i>	<i>Water Closets.</i>	<i>Conver- sions.</i>
1921	6095	1153	692	37
1922	5093	1139	776	39
1923	5111	1126	786	2
1924	5112	1092	890	23
1925	5298	865	1069	100

One hundred conversions of open ashpit-privies to water-closets in one year not only speaks well for the support and determination of your council to rid the district of these foul, disgusting, insanitary devices, but also for the zeal displayed by your sanitary inspectors in carrying out the work entailed. Much commendable work has also been done in this respect at East Howle where all the colliery houses are now supplied with water-closets. Similar work is in progress by the same colliery company in Mainsforth Back Row, with further improvements to the houses, here a great step forward is being made and it will be a real pleasure to report fully upon it when the work is completed.

The following Table shows the types of closet accommodation in the various townships at the end of the year 1925 :—

<i>Township.</i>	<i>Water Closets.</i>	<i>Ash- Closets.</i>	<i>Ashpit- Privies.</i>
Ferryhill	335	1838	42
Chilton.....	143	1135	45
Trimdon	186	640	250
Cornforth.....	214	954	121
Bishop Middleham.....	82	74	55
Fishburn	9	237	48
Mainsforth	18	54	—
Thrislington	4	11	4
Garmondsway Moor ...	1	23	2
Southern District	77	332	298
TOTALS.....	1069	5298	865

This Table, however, merely discloses the bare facts, in Sedgfield, Cornforth, Bishop Middleham and Trimdon there are approximately forty houses where foul smelling excreta has to be brought through the living room for removal, “ not a nice thing at breakfast time ” remarked

one householder to me. Sedgefield is the worst offender in this respect where some thirty householders are the victims of this loathsome, insanitary state of things. Deplorable and indefensible it is, but what is the remedy? These houses have no alternative exit, the tiny, cramped backyards admit of no possible alteration and the substitution of the water carriage system means turning the occupiers out without the possibility of them securing other accommodation, and even so the dry ashbin would have to be brought through the house, certainly the lesser of evils, but neither ideal nor sanitary. Many of these houses were condemned years ago as unfit for human habitation, but nothing has been done with regard to them and nothing can be done until alternative accommodation is possible and the occupiers forced to accept it. There are other instances where the contents of privy middens have to be wheeled through and deposited on the public way before removal by cart, a reprehensible state of things which is under consideration by your sanitary departments.

Scavenging.—This work is carried out by contract and consists in the removal and cleansing of ash-closets, privies and ashpits, your council providing and maintaining the tips for receiving the refuse. Farmers also utilise some of this refuse for manuring the land, and no objection is taken to this providing the refuse is not allowed to remain too long before being ploughed in, otherwise it undoubtedly creates a nuisance, especially on land adjacent to the public highway, where in windy weather fouled paper is blown on to the roads and into the hedgerows. The approximate cost of scavenging for the year under review was £4,503, as against £6,500 in 1920. Complaints of neglect of work are not infrequent and constant and close supervision is required to keep the standard of cleaning and removal efficient.

SUMMARY OF WORK DONE IN THE SANITARY INSPECTOR'S
DEPARTMENT DURING THE YEAR 1925.

1.—PUBLIC HEALTH ACTS.	Number of Informal Written Notices by Inspector.	Number of Formal Notices by order of Authority.	Number of Nuisances abated after Notice.
Dwelling Houses :—			
Structural Defects	184	5	149
Overcrowding	14	1	11
Lodging Houses	3	—	3
Cowsheds, Dairies and Milkshops ...	209	—	209
Bakehouses	2	—	2
Slaughter Houses	9	—	8
Ashpit and Privies	251	3	167
Deposits of Refuse and Manure ...	28	—	28
Water Closets	14	—	14
Defective Yard Paving	55	—	41
House Drainage	118	1	113
Water Supply	14	—	5
Pigsties	14	—	11
Animals improperly kept	10	—	10
Other Nuisances	35	8	26
Defective Ash-Closets... ..	43	—	32
TOTALS	1003	18	829

2.—PRECAUTIONS AGAINST INFECTIOUS DISEASE :—

Houses disinfected after Infectious Disease.....	150
Schools do. do. 	3

3.—FOOD.

Seizures of Unwholesome Food.....	8
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Premises and Occupations which can be Controlled by Byelaws or Regulations.

Lodging Houses.—There are two in the southern district and one in the northern district; these are regularly visited and found to be kept in a clean, properly ventilated condition, and are well conducted. The sanitary conveniences at the Cornforth lodging-house is insanitary and notice has been served for the provision of a water-closet.

Factories and Workshops—There are sixty-four in your district and five bakeries; notices have been served on six workshops for necessary repairs and alterations to sanitary conveniences,

Dairies and Cowsheds.—There are 154 on the registers. Limewashing and general cleanliness is required twice a year and frequent inspections are made.

Offensive Trades.—Nil.

Places of Amusement.—The Picture Halls are visited periodically and found to be kept clean and well ventilated. The sanitary arrangements are satisfactory. In one case the owners have been required to provide two water-closets and these have been completed.

Schools.—The Bradbury and Mordon Church School is ill adapted for the purpose of an up-to-date school, it is small, cramped, cold and draughty; the closet accommodation and system of sewage disposal at the Coxhoe Church of England Schools is of the old trough type pattern and should be replaced by separate pedestal wash-down closets.

Medical inspection of schools is carried out by officers appointed by the county authorities, your medical officer visits them whenever necessary for the purpose of tracing

"carrier infections." School absentees are sought out by the school attendance officer and any infectious disease alleged to be the cause of the child's absence is notified to me with the names of the contacts and those are dealt with in the ordinary routine of work.

These intimations are very useful, often they corroborate information already known and frequently they disclose facts which would not have come under my notice so soon. Under the infectious diseases I have enumerated the names of the schools closed during the past year.

Housing.

1.—GENERAL HOUSING CONDITIONS IN THE DISTRICT :

1. The Housing conditions are generally speaking fairly good. In the townships of Ferryhill and Chilton the majority of the dwellings are of modern construction, but at Cornforth and Trimdon many houses are of the older type and consequently are not so satisfactory. In the latter township the old type of streets of houses, without separate yards and with open back streets, still exists.

2. (a)—Extent of shortage :—

Sedgefield	30
Bishopton	6
Bradbury.....	2
Mordon	2
Trimdon	100 (see note below).
Cornforth.....	100
Bishop Middleham.....	10
Fishburn	10
Ferryhill and Chilton.....	250
<hr/>	
TOTAL	510

The shortage at Trimdon is still evident, but owing to the closing down of the colliery for eleven months, a number of families have migrated, whilst other workers have found employment elsewhere and in due course may find accommodation for their families and thus relieve the overcrowding.

(b)—Measures taken to meet any shortage :—

Since 1920 houses have been built as follows :

		<i>By Private Persons.</i>	<i>By Council.</i>
1921	.....	107	...
1922	.....	54	18
1923	.....	13	—
1924	.....	73	—
1925	.....	73	... (see note below).

Groups of houses are in course of erection by the Council at Ferryhill (24) and Cornforth (14).

Arrangements are also well in hand for the building of houses by direct labour at Windlestone (24) Trimdon (18) and Sedgfield (10), whilst permission has also been granted for a further 100 houses in various parts of the district.

2.—OVERCROWDING.

Extent and Causes.—This is very rife in your district, especially so in the four large townships from which I have compiled a table showing its extent. The sanitary officers have done their best to remedy this evil, but it is extremely difficult to cope with owing to the shortage of houses. In many cases overcrowding is due to the fault of the householder who, for personal gain, consents to take in lodgers when the number already in the house was sufficient for the accommodation.

RURAL DISTRICT COUNCIL OF SEDGEFIELD.
STATEMENT AS TO OVERCROWDING.

Township.	Rooms in House.	Houses occupied by more than one Tenant.	Houses overcrowded in excess of 2 persons per room.				Totals.	Gross Totals.
			In excess by 1 person.	In excess by 2 persons.	In excess by 3 persons.	In excess by 4 persons.		
FERRYHILL	1	Totals. — 15 33 187	—	2	1	—	3	
	2		18	18	4	5	45	
	3		13	19	2	—	34	
			26	54	16	12	108	190
CHILTON	1	Totals. — 1 32 112	—	—	—	—	—	
	2		4	8	3	—	15	
	3		11	16	2	5	34	
	4		28	41	6	10	85	134
CORNFORTH	1	Totals. — 4 17 43	—	—	—	—	—	
	2		32	10	11	1	1	
	3		18	16	7	5	65	
	4		18	8	4	7	37	149
TRIMDON	1	Totals. — 7 3 23	1	—	—	—	1	
	2		32	25	21	20	98	
	3		4	—	4	6	14	
	4		7	5	4	7	23	136
TOTALS ... ..	...	...	212	222	85	90	—	609

I also give some concrete examples of overcrowding which have been brought to my notice, they are selected at random and can be multiplied many times over.

(a) Eleven persons occupy a three-roomed house, seven of these are adults, males : 48, 33, 19, 22, $3/52$ years of age ; females : 48, 31, 16, 11, 6 and 7 years of age. Of these eleven persons five are lodgers.

(b) Eleven persons occupy a four-roomed house, six of these are males, aged 57, 55, 27, 24, 21 and $1/12$ years and five are females, aged 27, 25, 24, 19 and $5/12$ years, one girl married and shortly expecting to become a mother.

(c) Eight persons occupy a two-roomed house, father, mother and six children, two of whom are suffering from tuberculosis.

(d) Thirteen persons occupy a four-roomed house, the ages of the males are 50, 25, 17, 12, 6, 4, 3 years, females 47, 25, 21, 9, $18/12$ and $3/52$ years.

(e) In a four-roomed house sub-let a father, mother and five children, all boys, the oldest 13 years of age, occupy one room.

(f) Six persons sleep in one bedroom in a two-roomed house—father, mother and four children, one girl 14 years of age is suffering from tuberculosis.

Measures taken or contemplated for dealing with overcrowding.

The council's housing schemes and the encouragement of building by private enterprise through the £100 subsidy per house.

Action taken to deal with overcrowding.

Arranging with the colliery companies to transfer the large families from the smaller houses to those with more accommodation,

Where lodgers are the cause of the overcrowding, notices are served to abate the nuisance.

3.—FITNESS OF HOUSES.

1. (a) General standard of housing in the district—Fair.
- (b) General character of defects found to exist in unfit houses.

General dampness, dilapidations through age, insanitary closet accommodation, insufficient light and ventilation, cramped back yards, defective and insufficient drainage, absence of damp-proof course, and in some cases the ground floors are below the level of the ground outside.

- (c) How far defects are due to the lack of proper management and supervision by owners :

It is common knowledge that certain properties although all may be of the same type are better managed and supervised by some owners than by others. The uncertainty which exists in the coal trade has had a disturbing effect upon some owners of colliery property, whilst others buoyed up with hopes of better times to come have progressed commendably with the work of improving their property, with the less affluent landlords the high cost of labour and materials has made them very reluctant to do more than the barest necessities, and in the case of the poor landlords it is impossible for them to uphold their property and prevent it from dilapidation. The careless tenant cannot be ignored, he is not very long the occupier of good property before doors are off their hinges, windows broken, drains stopped up and a general lack of order and cleanliness is evident throughout the house, all can call

to mind examples of this type of tenant. The owners of Thrislington and Fishburn collieries have adopted a scheme of carrying out regular inspections and supervision of their property and much has already been done to keep their houses in good repair.

2. General action taken as regards unfit houses under
 - (a) The Public Health Act.—By notices served.
 - (b) The Housing Acts.—By notices served.

3. Difficulties in remedying unfitness, — special measures taken or suggested :—

Depression in the coal trade, cost of materials and labour, and alternative accommodation cause the difficulties.

Your officers are constantly seeking to effect improvements by arrangements with owners as far as is possible.

4. Conditions so far as they effect housing as regards water supply, closet accommodation and refuse disposal, together with measures taken during the year in these matters :—

These are set out in detail under their respective headings in the body of this report.

4.—UNHEALTHY AREAS.—Nil.

Information received as to complaints received or representations made, etc.—Nil.

5.—BYELAWS RELATING TO HOUSES, TO HOUSES LET IN LODGINGS, AND TO TENTS, VANS, SHEDS, ETC.—Nil.

1. As to the working of existing byelaws ; and
2. As to the need for new byelaws *re* revision of existing byelaws :—

Byelaws are under consideration and are being submitted to the Ministry for approval.

Housing Statistics for the Year 1925.

Number of new houses erected during the year : 73 total.

With State Assistance under the Housing Acts :—

(1) By Local Authority	Nil.
(1) By Local Authority	Nil.
(2) By other bodies or persons.....	65

1.—UNFIT DWELLINGHOUSES.

Inspection—(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ...	783
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	117
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	Nil.
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	Nil.

2.—ACTION UNDER STATUTORY POWERS.

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

(1) Number of houses in respect of which notices were served requiring repairs	Nil.
(2) Number of dwelling-houses which were rendered fit after service of notices :—	
(a) By Owners	Nil.
(b) By Local Authority in default of Owners	Nil.

(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by Owners of intention to close	Nil.
B.—Proceedings under the Public Health Acts :—	
(1) Number of dwelling-houses in respect of which Notices were served requiring defects to be remedied..... ⁶	9
(2) Number of dwelling-houses in which defects were remedied :—	
(a) By Owners	6
(b) By Local Authority	Nil.
C.—Proceedings under Sections 11, 14 and 15, Housing Act, 1925	Nil.

Inspection and Supervision of Food.

Milk Supply.—This is fully adequate to the needs of your district, indeed quite a number of farmers send the surplus of their supply out of the district. Distribution within the district is by farms direct to the consumer, by co-operative stores and retailers "door to door delivery," whilst some shops retail a supply over the counter, in all cases as much supervision as possible is given both at the source of supply and its distribution to the consumer. No complaints of dirty milk have been received during the year, but a high order of cleanliness will never be obtained until the grooming of cows, the covered pail, the wearing of clean overalls and caps and thorough cleansing of the hands is made compulsory at all dairy farms.

During the year a public demonstration and lecture on clean milk supply was given at one of the local dairy farms and your medical officer and a sanitary inspector attended, our presence was well known both to the lecturer and demonstrator, but it appeared to be a matter of supreme indifference to them and it was evident that the co-operation of your health department was not a part of their propaganda in this district.

Meat.—It is impossible with slaughtering taking place more or less simultaneously at thirty slaughter-houses for your inspectors to examine every carcase at the time of slaughter, nevertheless by surprise visits and systematic examinations of meat exposed for sale, the consumer is well protected, your inspectors are well versed in the detecting of unsound and diseased meat, and your medical officer not infrequently accompanies them upon a tour of inspection. Stalls, shops, stores and vehicles receive close attention under the administration of the Public Health (Local) Regulations of 1924. Condemned meat and other articles of food are either burned or limed and deeply buried.

Slaughter-houses.—The whole of the slaughter-houses in the district have been registered under the Meat Regulations and are as follows :—

	1920		In Jan., 1925		In Dec., 1925
Registered	18	...	19	...	30
Licensed	9	...	11	...	—
	—		—		—
TOTALS.....	27		30		30

A new slaughter-house has been built at Trimdon Colliery where the occupier formerly used his shop as a place for slaughtering. At West Cornforth a substantial brick building has taken the place of a wooden erection and another slaughter-house has been improved and separated from the selling shop. Other improvements to existing premises are contemplated.

Other Foods.—Systematic inspections are made of all places where food is either prepared, stored or exposed for sale, the sanitary conditions of bakehouses are satisfactory, it is, however, in the small general shops where food is stored and exposed for sale that the difficulty arises of

inducing a high order of cleanliness, these shops generally consist of small houses where the front room is utilised for the retail business of selling food, toys, haberdashery, brushes and hardware, etc., etc., and little or nothing can be done beyond seeing that a standard of cleanliness is maintained and that articles of food are protected as far as possible from contamination. It is a problem which bristles with difficulties, some of which are sentimental, but public health administration is for the common good of all, and in its application some cases of hardship are bound to arise. Brushing aside therefore all sentiment, I am of opinion that the only remedy for dealing with this growing evil is to invest local authorities with the power to require all premises where the sale and storage of food is carried on to be licensed, the licences to be conditional upon a satisfactory report as to suitability from a recognised officer of the health department.

Prevalence of and Control over Infectious Diseases.

SCARLET FEVER.

	1921	1922	1923	1924	1925	Total
Number of cases notified	125	80	145	124	74	548
Removed to Hospital	102	74	117	107	70	470
Treated at Home	23	6	28	17	4	78
Deaths.....	2	1	3	1	0	7

The above table shows at a glance the incidence, etc., of scarlet fever in your district during the past five years, the large proportion of cases admitted to your hospital is gratifying for one very important reason in that the complications of scarlet fever can be more effectively treated there than at home. The case rate per 1,000 of the estimated population (1925) is 1·9, as against 2·36 for England and Wales, there were no deaths during the year, and the seven deaths in the five years under review give a case mortality rate of 1·28.

During the epidemic 1920-21 I drew up posters and pamphlets, outlining in simple language the early signs and symptoms of the disease, with instructions "what to do" and "what not to do," these were freely distributed and posted throughout the whole of your district and focussed the attention of the public upon "how best to arrest the spread of the disease." During this epidemic your hospital was so fully occupied, that temporary accommodation was sought and obtained at Thornley. The disease, however, proved difficult to cope with, what with the mild unrecognised cases, overcrowding, contact at schools and cinemas, the futile means of disinfection, the disease could only be checked in the less crowded parts of your district. There was only one return case last year and this was found to be due to a recurring nasal discharge, and throughout the five years the return cases were a negligible quantity. The Dick test has not been carried out in your district.

DIPHTHERIA.

	1921	1922	1923	1924	1925	Total
Number of cases notified...	60	28	34	17	30	169
Removed to Hospital	56	27	30	16	30	159
Treated at Home.....	4	1	4	1	0	10
Deaths	6	0	2	2	4	14

The above table clearly shows the incidence and number of deaths of diphtheria during the past five years. Of the thirty cases notified during the year and admitted to your hospital six were found not to have the disease. The four deaths were advanced cases of diphtheria admitted too late for antitoxin to be of any use, they were children under the age of five years, which is a most susceptible and vulnerable age period. The case mortality rate for the year 1925 is 15·4 per cent. and the attack rate per 1,000

of the estimated population 68, as against 1.25 per 1,000 living for England and Wales. Diphtheria antitoxin is supplied gratuitously to all practitioners in your district in phials containing 8,000 concentrated units, which constitute an initial dose. Sterile syringes and concentrated antitoxin are kept ready for the use of practitioners at any hour of the day or night and they have all been circularised to this effect.

The Schick test for isolating the susceptible cases and the use of toxin, antitoxin mixtures or modified toxins for the active immunisation of these has not been adopted in your district.

ENTERIC FEVER.

	1921	1922	1923	1924	1925	Total
Number of cases notified...	1	10	5	4	1	21
Removed to Hospital	1	10	5	4	1	21
Treated at Home.....	—	—	—	—	—	—
Deaths	—	2	—	—	—	2

The only case of enteric fever notified during the year proved on admission to your hospital not to have the disease. The outbreak of 1922-23, with one exception, was confined to the Chilton township, the excepted case was that of a wardmaid who had been working in the enteric ward of a hospital. The Chilton outbreak was the subject of a special report to your council, from which I extract the following: "It is impossible to conceive anything more inimical to the public health than the conservancy system of sewage disposal carried out under such conditions as appertains in the streets where the majority of these cases occurred. In Back West Chilton Terrace, Front Oswald Terrace, Victoria, Raby and Ford Terrace the streets are in an indescribably filthy condition and until they are properly channelled, drained and made up it is impossible

to expect the locality to enjoy a complete immunity from infectious disease of this character when once it is brought into the district."

This outbreak did not originate in your district, but was brought into it by a patient who had been nursing enteric cases and who herself contracted the disease and was subsequently removed to the hospital from whence she came. The further spread of the disease was caused by late diagnosis and the resultant untreated excreta, its deposit upon the adjacent allotments, the impossibility of avoiding the spilling of the contents of the scavenger's carts owing to the deplorable condition of these unmade streets, and the strong probability of carrying the infective material in the houses affected. If my report was instructive and informative it proved to be barren of result, for the streets remain to-day in the same condition as they were in 1922.

Of the four cases which occurred in 1924, one was that of an inmate of the Durham County Asylum, one was a contact with a case which was caused through the consumption of shell-fish away from home, and the other an isolated but well marked case of which I was unable to trace the source of infection, it occurred in Sedgefield, in one of the houses I have commented upon under closet accommodation, where the night soil has to be brought through the living room.

ENCEPHALITIS LETHARGICA.

	1921	1922	1923	1924	1925	Total
Number of cases notified...	—	1	2	5	2	10
Removed to Hospital	—	1	—	4	*1	5
Treated at Home.....	—	—	2	1	1	4
Deaths	—	—	2	2	1	5

* Diagnosis not confirmed.

Although encephalitis lethargica became compulsorily notifiable throughout England and Wales on January 1st, 1919, it will be seen from the above table that the first case recorded in your district was in the year 1922 (December), it was an isolated case, typical in character, but I was unable to trace the source of infection. Of the two fatal cases notified in 1923, one was that of an inmate in the Durham County Asylum and the other contracted the complaint in York, and the notification did not reach me until after death. Of the five cases notified in 1924, all occurred in different areas of your district, and in the months of May and June, there was no connection between them, and the four cases removed to your hospital were very typical of the disease, of the two deaths one died in the hospital and the other at home very shortly after the notification reached me and I was therefore unable to make a personal investigation and examination of the case. Two notifications only were received during the past year, in the one removed to your hospital nothing amiss could be discovered, the patient was a young man, strong, healthy and physically fit in every way, admitted with a history of "feeling tired at his work," and the other case was that of a young child, whose death was reported before the notification reached me.

MALARIA, DYSENTRY, TRENCH FEVER.

Not since 1921 have any cases of dysentery been notified, during that year five cases were reported from the Durham County Asylum, the patients were inmates of the institution and beyond taking official notice of the case, no administrative action was taken. There were no cases of malaria or trench fever reported during the five years ending December 31st, 1925.

No vaccinations have been performed by your medical officer of health under the Public Health Smallpox Regulations, 1917. One case of smallpox was notified in the month of October last year, on admission to the smallpox hospital however, the diagnosis was not confirmed. Your medical officer was off duty at the time with a serious illness, but judging from the reports it was evidently a very suspicious case and fully justified all the precautions which were taken.

ACUTE, PRIMARY AND INFLUENZAL PNEUMONIA.

This disease in the majority of cases is nursed at home, and in spite of the regulations of January, 1919, making it compulsory notifiable, the death returns during the past five years have either exceeded, or nearly equaled the number of cases notified, this clearly shows that the regulations are not understood by the practitioners in your area. I have had to call their attention to the supreme importance of strictly observing them. From such imperfect records it is not possible to draw any reliable conclusions, however, during the past year I received fifteen notifications of this disease, of which number thirteen died, if this is a correct record, the mortality rate is truly alarming. Nursing in the home consists of visits by the district nurses, but the environment and conditions existing in many of the homes in your district to-day are not conducive to the successful nursing of these cases. Hospital, isolation and treatment should be available for these cases and then I am sure that the case mortality rate of 86.6 per cent. would not represent the true death rate.

LABORATORY WORK.

Bacteriological examinations are carried out free of all charge to the medical practitioners in your area, complete outfits are gratuitously supplied and the results are

notified in triplicate, one to the practitioner, one to the county medical officer of health, who notifies the M.O.H. of the district in which the suspected case resides. The work done during the year is tabulated and is as follows :—

<i>Specimens Examined.</i>	<i>Positive.</i>	<i>Negative.</i>	<i>Total.</i>
Sputum for the Tubercle Bacillus...	6	43	49
Throat swabs for the Diphtheria			
Bacillus	2	16	18
Blood (Agglutination test for Enteric			
Fever)	—	1	1
	<hr/> 8	<hr/> 60	<hr/> 68

NON-NOTIFIABLE ACUTE INFECTIOUS DISEASES.

The epidemic of measles and whooping cough which was in evidence during the later months of 1924 continued throughout the year under review, measles was responsible for sixteen deaths during the year and whooping cough for five deaths, it is not possible to give the case mortality rate for these diseases, but from personal knowledge of the distribution of the epidemic and the number and duration of school closures for measles, it is surprising that the deaths were so few, it is however in the very young that the mortality rate is so high and not amongst those of school age. The following schools were closed for varying periods on account of measles :—Fishburn Council School, No. 67 ; Chilton Buildings Council Infants' School, No. 277 ; Ru^{sh}ford Council School, No. 252 ; and Great Stainton Church of England School, No. 97. During the closure the opportunity was taken of thoroughly cleansing, ventilating and disinfecting the schools. During the epidemics also leaflets of instructions " what to do " and " what not to do " were circulated throughout the whole of the district.

INFLUENZA.

Happily the mortality from this disease was considerably less than in the preceding year, when thirty-three deaths were registered. For the year under review twelve deaths were reported, which gives a mortality rate per 1,000 of the estimated population of 0·34, as against 0·32 for England and Wales.

FACILITIES FOR THE CLEANSING AND DISINFECTION OF VERMINOUS PERSONS.

The only place where cleansing and disinfection of verminous persons can be carried out is the Poor Law Institution in Sedgefield, where an antiquated portable sulphur chamber is in use ; although somewhat dilapidated it functions very well and the sulphur fumes effectively destroy all vermin discovered in the clothing. An isolation ward and disinfectant baths are also available for the use of vagrants affected with scabies.

DISINFECTION.

This is carried out by means of the formalin vaporizer at the home of every infectious case, either after removal to the Isolation Hospital or after recovery at home or as soon after death as possible ; arrangements are also made for the stoving of bedding or wearing apparel.

Infectious excreta is limed and deeply buried, and the privies cleansed and disinfected with strong disinfectants and disinfecting powder.

Arrangements are also made for the gratuitous supply of disinfecting fluid to all applicants to the sanitary inspectors.

CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR.

	At all Ages.	AGE GROUPS.											Total Deaths.	Admitted to Hospital.	Treated at Home.
		Under one year.	1-2.	2-3.	3-4.	4-5.	5-10.	10-15.	15-20.	20-35.	35-45.	45-65.	65 and over.		
*Smallpox ...	1	...	...	...	...	...	...	...	1	...	...	...	...	1	...
Diphtheria...	30	...	...	...	...	...	...	...	2	...	...	...	...	30	...
Erysipelæ...	22	...	...	...	...	...	...	...	3	...	...	...	...	3	...
Scarlet Fever	74	1	2	5	5	13	28	14	4	1	...	1	...	70	4
§Enteric Fever	1	...	...	...	...	...	...	...	...	1	...	...	...	1	...
Opthalmia Neonatorum ...	3	3	...	...	...	...	...	...	...	...	...	...	...	...	3
Pneumonia (Acute Primary and Influenzal) ...	15	...	...	...	...	1	...	2	1	7	2	2	...	...	15
†Chicken Pox ...	33	2	3	2	2	3	17	4	...	...	...	...	...	...	33
Puerperal Fever ...	2	...	...	...	...	...	...	...	...	1	1	...	...	...	2
*Encephalitis Lethargica ...	2	...	1	...	...	...	...	...	*1	...	...	...	...	*1	1
TOTALS ...	183	6	6	8	8	20	59	27	12	15	9	10	3	106	77

†Notifiable as from November 1st, 1925.

*Diagnosis not confirmed.

§Widals test Negative.

TUBERCULOSIS (NEW CASES AND MORTALITY DURING 1925).

AGE PERIODS.	NEW CASES.				DEATHS.			
	PULMONARY.		NON-PULMONARY.		PULMONARY.		NON-PULMONARY.	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
Under one year	—	—	4	3	—	—	1	—
1 to 5...	2	3	2	4	2	1	—	4
5 " 10	2	4	2	3	1	—	—	1
10 " 15	2	3	3	1	—	—	—	—
15 " 20	4	3	2	3	1	3	1	—
20 " 25	6	7	1	1	7	3	—	—
25 " 35	8	6	1	1	4	3	—	—
35 " 45	6	2	1	1	1	2	—	—
45 " 55	2	—	2	—	2	1	2	—
55 " 65	2	—	—	—	1	—	—	—
65 and upwards	—	—	—	—	—	—	—	—
TOTALS	34	28	18	17	19	13	4	5
				62				
				35				
				97				
				32				
				9				
				41				

In six instances the intimation of the diseases came to me through the registrars of deaths, and the offending practitioners were duly warned of the imperative necessity to notify during life in accordance with the regulations. Satisfactory explanations were given which absolved the practitioners from any intention to wilfully disregard the regulations. The ratio of non-notified tubercular deaths to tubercular deaths is as 6 is to 41, or approximately 1 to 7.

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS REGULATIONS) 1925.

There are no tuberculous employees in the milk trade in your district.

PUBLIC HEALTH ACT, 1925, SECTION 62.

No cause for action under this section has occurred during the year.

STREET IMPROVEMENTS.

During the year the colliery company at West Cornforth have made up Back Coronation Street, Brook Street, Back Burn and Verdun Street, and other streets are also in course of construction. Your council have also made up New Road Terrace, Back Maughan Street, Back George Street, Back High Street (South), and Front Reading Street in the same township. In Ferryhill: Back Rowlandson, Rose, Eldon, Hurford and St. Luke's Street have been completed.

It is four years ago since I called your council's attention to the deplorable insanitary conditions prevailing in the road between Salvin and Stobart Terrace, Fishburn,

The state of this road during the succeeding winter months can only be described as a bottomless quagmire of unutterable filth ; happily for the occupiers on the higher side (*i.e.*, Salvin Terrace), they escape the filth and the storm water which carries it, entering their backyards and living rooms, but nevertheless all suffer from the intolerable nuisance of having to wade through the blackest of mud and slush whenever occasion arises for them to use this right of way. At the west end of this road is a cutting made at right angles to it and also to the road running westward, to Holdforth Lane Ends. Here an attempt is being made to form a permanent way, which will, *in time to come*, be continued between the aforementioned terraces and is probably destined to remedy the abominable nuisance which has been so long in evidence there. It is a little difficult to understand why a commencement of this possible remedy was made at a spot so remote from the actual source of trouble, because on the extreme east of Salvin and Stobart Terrace is a hard macadam road running at right angles and opening into the very quagmire I have endeavoured to describe.

Had the work commenced here a possible two hundred yards of passable roadway would have (by now) been available for the use of the sorely tried residents in the locality. The making up of this road however is not being carried out by your council under the Private Street Works Act, nevertheless, it is a matter of extreme urgency that the intolerable nuisance prevailing there should be abated at the earliest possible moment.

Mr. Chairman, Lady and Gentlemen I have to thank you for your valued help and support during the past year,

for your generous expression of sympathy and good wishes during my serious illness, and for the felicitation so kindly extended to me upon my return to duty.

The year's work has not been barren of result, my report discloses a low death rate, a lower infantile mortality rate, a lower incidence of infectious diseases, more houses, more made up streets, more conversions to the water carriage system and the promise of many additions and improvements which will add to the health and well being of your district.

To your clerk, sanitary surveyor and the inspectors of the northern district I am deeply indebted for their loyal support and unstinted help in the carrying out of my duties.

I have the honour to be

Mr. Chairman, Lady and Gentlemen,

Your obedient Servant,

C. BASAN,

Medical Officer of Health.

May 1926

(J)—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)	Prosecu- tions. (4)
FACTORIES (Including Factory Laundries).	—	—	—
WORKSHOPS (Including Workshop Laundries).	70	6	—
WORKPLACES (Other than Outworkers' Premises).	—	—	—
TOTAL	70	6	—

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

Particulars. (1)	Number of Defects.			Number of Prosecu- tions. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
<i>Nuisances under the Public Health Acts :—*</i>				
Want of cleanliness	—	—	—	—
Want of ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of drainage of floors	—	—	—	—
Other Nuisances	—	—	—	—
Sanitary { insufficient	2	2	—	—
accom- { unsuitable or				
modation { defective	4	3	—	—
{ not separate for sexes	—	—	—	—
<i>Offences under the Factory and Workshop Acts :—</i>				
Illegal occupation of under-ground bakehouse (s.101)	—	—	—	—
Other offences	—	—	—	—
(Excluding offences relating to out-work and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921).				
TOTAL	6	5	—	—

* Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

C. BASAN,

Medical Officer of Health.



