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THE HEALTH OF SIDMOUTH. Annual Report of the Medical Officer of Health (Dr. T. H. S. Pullin), for the Year 1894.

THE HEALTH OF SIDMOUTH.

Annual Report of the Medical Officer of Health (Dr. T. H. S. Pullin), for the Year 1894.

To the Chairman and Members of the Sidmouth Urban District Council.

Gentlemen,-

In accordance with the General order of the Local Government Board, I have the honour to furnish you and the County Council and the Local Government Board with a report embodying the Births, Sickness, and Deaths that occurred in the Urban Sanitary District under your charge during the year 1894, the advice that has been given by me, the measures and proceedings taken in relation thereto and the public health generally. As connected with the question of health it may be interesting to preface my report by quoting two meteorological data of the district, recorded by our reliable observer, Dr. Radford. The mean temperature of 1894 was 50.5, which has been twice equalled in the last 24 years, but only twice exceeded. So too the rainfall of the year—39 of inches is 6 inches above the average and the largest yet registered with only two exceptions.

The births registered during the year were Males 37; Females 33. Total 70, or an average rate of 17.5 per 1,000. This is a very low birth rate, being just half (34) of All England. During the previous 5 years it averaged 18.6.

The deaths registered were Males 38; Females 34. Total 72, or an average rate of 18 per 1,000. 8 were invalid visitors, which gives a resident death rate of 16 per 1000. All England being 19.6 Six were from injuries. For the previous 15 years the average death-rate was 17 per 1,000. The infant mortality for the year was 8 as in 1893, equal to 96 per 1,000 births or 7 below the late Registrar General's Healthy District, average 103. England and Wales being 159. The average infant mortality for the last ten years has been 6 or 72 per 1,000 births.

The resident death-rate would have placed it in his, the late

Registrar General's 1st table of healthfulness.

8 deaths took place under I year. " between I and 5 years. 5 5 and 15 ,, 15 and 25 ,, 25 and 60 ., 3 22 31 ,, 25 and 60 ., 19 ,, from 60 and upwards, (6 were between 82 and 95).

The causes of death and sickness appear in Appendices A and B. On a general analysis of the causes of death, we find them connected with the three following groups of disease as follows: General (fever and allied diseases) 4. Constitutional 21. Local

(various organs) 47.
No death from diarrhœa has been registered in the district for 15 years, a fact of the highest sanitary importance to any district as pointing both to purity of air and water; 3 deaths from zymotic disease took place, viz.: Diphtheria 1, Membranous Croup (a diphtheritic disease) 1, Erysipelas 1. This zymotic death rate 07 per 1,000 is not an unsatisfactory one. Eleven notifications of zymotic (infectious) disease were furnished during 1894, viz., Diphtheria 3, Membranous Croup 2, Scarlet Fever 4, Enteric Fever 1, Erysipelas 1. The premises in each case were promptly and carefully inspected and disinfectants gratuitously supplied, and all necessary precautions taken, including notice to school authorities. The Notification of Diseases Act has been in operation in the district under your charge for 5 years, and the wisdom of its adoption has been year by year more and more evident by its affording early knowledge of infectious disease and a chance afforded to stamp out many a dangerous nucleus, thereby preventing its spread through the neighbourhood. It should be mentioned that the use of the Sanitorium situated in the Alexandra Road and rapidly erected in the year 1885, in consequence of a neighbouring epidemic of Small Pox, has happily never been called in requisition. Altho' the building does not embrace the demands of present sanitary requirements, its use may quickly be made available for the reception of zymotic cases, in the event of urgent need. In reference to the Notification of Disease I wish to draw

the attention of the Council to the numerous instances of sanitary regret that occur to me that the river Sid from its estuary to its northern boundary at Sid, and all land on its western side is not within the jurisdiction of the Council. As to the river, its lower portion is frequently in a disgracefully insani-tary state, especially in the vicinity of its three bridges--drowned cats and dogs, building and house refuse, and last, tho' by no means least, a leaking offensive parish drain contribute chiefly to the nuisance. In the case of floods from heavy rain, the prevention of inundation of the lower portion of the district under the Council's charge is carried out exclusively by Sidmouth parishioners, and on a recent occasion when the river flood reached its height at the same time as high water, but for the promptitude and energy of Sidmouthians the whole of the lower portion of the town would probably have been the scene of an inundation unparalleled, and the health of the locality

seriously affected throughout the winter months.

As to the land on its west side many instances exist of one side of the street or road being in the parish of Salcombe-Regis, and the other in Sidmouth. In the case of infectious disease being notified on the Sidmouth side, strong measures can be at once taken by the sanitary officials with a view to stamping it out and preventing its spread. Whereas if on the Salcombe side, the case has to be notified first to the Medical-officer of Health, at Ottery St. Mary, and by him to the Surveyor at Honiton, whose earliest appearance on the scene must necessarily include 2 or 3 days delay. As an instance of a case in point, I would beg to cite one that recently occurred in my own practice. In a block of three newly-elected respectable cottages, under the same roof, situated on the west side of the river near Sid bridge, a case of Diphtheria occurred. The house stood on land belonging to Salcombe-Regis, the other two being in Sidmouth. In an official point of view, I was powerless to take action beyond reporting the case to the Medical-Officer at Ottery St. Mary, and suffer delay, to the imminent danger of the adjoining Sidmouth tenants, but a sense of ordinary duty prompted me to carry out the same necessary precautions against danger as I should have been officially expected to do, had the disease been in either of the adjoining houses in the Urban Sanitary District of Sidmouth under the Council's charge. Further, I am sorry to feel it a duty to allude to the Salcombe land forming the Eastern end of our beach—adjoining H.M. Coastguard House. Its insanitary state and disgracefully neglected appearance frequently contrasts unfavourably with the Council's Parish yard at Woollyrook, and is a source of danger to health to both parishes. Woolbrook, and is a source of danger to health to both parishes. Also the meadow, so called 'Ham' lately presented to Sidmouth and situated north of the spot in question, has been constantly the cause of strong complaint from an extensive piggery kept there, and built against the boundary wall of the Sidmouth National Girls' and Infants' School playground. The pigs at times escape from the meadow and wander over the Sidmouth Esplanade, and into the town, through the absence of any local supervision. Lastly the possible collapse of the Alma Bridge close by would not be a serious disaster if it proved who is or should be respon-

sible for its safety.

The adoption of the Acts by the Council which are now in force efficiently carried out, together with the established bi-annual systematic inspection of the district, should bring the Sanitary Officials in touch with every existing and suspected nuisance, and prove sufficient to remove all cause for insanitary complaint. Nothing would tend to this end more effectually in the opinion of your Medical-Officer, than the early adoption of the new Bye-Laws, as revised by the Council in accordance with the Model Bye-Laws of the Local Government Board, which would not only greatly strengthen the authority of the Council, but materially aid the efforts of its Sanitary Officials. By their adoption, two sanitary blots frequently alluded to by your Medical-Officer, viz: Piggeries and Poultry keeping would at

once hecome things of the past. The practice of keeping Fowls and Ducks in small open spaces contiguous to houses, is generally looked upon as unobjectionable, whereas it may really constitute a more dangerous nuisance than pigs, by the excreta being trodden into and with rain absorded by the earth.

The Acts referred to above, are Infectious Disease (Notification) Act, 1889. Part 3 of Public Health Acts Amendment Act, 1890; Dairies, Cowsheds and Milk Shops Order, under Contagious Diseases (Animals) Act, 1886. By the efficient carrying out of the last named, the Council have it in their power not only to permanently remove an important sanitary blot of the District, viz: the housing of cattle and accumulation of offensive manure in the town, and its removal at all hours of the day, but also sweep away a serious long suffered social grievance by the driving of cattle through the town, and polluting our pathways and streets. The Council I hope, will pardon my again urging it, to rigidly enforce in the case of new houses, the condition that all bedrooms have fire-places, being as necessary for ventilation as for warmth. During the present severe weather, with a temperature of 15 to 20° of frost, I have seen many cases of sickness critically aggravated, and two aged deaths hastened, if not occasioned through their absence—oil stoves and lamps as I have before pointed out, prove in many cases but dangerous substitutes.

In connection with houses the authority and advice of the Council may be beneficially excercised in a matter that I brought before the late Local Board some months since, viz: The erection of private external house ventilators—50, or I may say 75 per cent of which in Sidmouth I consider may be deemed useless for their intended purpose by their mode of construction, many having, two or more angles and curves at the eaves and ridges of the houses. I have heard it argued that an "elbow" differing from an "acute angle" is not objectionable. Personally I recognise no difference, both violate the law of ventilation and destroy its purpose. To be an efficient ventilator, it should be perpendicular from top to bottom. The practise of erecting "shaft ventilators" in lieu of the open road ones is a highly commendable policy of the Council, and the continued adoption of it whenever and wherever practicable, must prove an important sanitary advantage. The strong public predujice against "shaft" ventilators which was the sole cause of the order of the Local Government Board for the "open" road ones, is well night exploded and removes a troublesome difficulty.

exploded and removes a troublesome difficulty.

I have the pleasure to report that during the year in question (1894) the long required W.C. accommodation in the hamlets of Stowford, Woolbrook, and Bulverton, have been supplied. With a District Water Act and an in-exhaustible supply of water by reservoir and well "hand flushing" in connection with the conveniences named, will, it is hoped soon become a sanitary blot

of the past. Another want that your Medical Officer has often alluded to, viz: Cottages for the bona-fide labouring class we may hope to see supplied by the adoption by the Council of the "Housing of the Working Classes Act, 1890." With the many vacant spaces existing in the district, suitable for no other purpose, the Council should experience no difficulty.

As the result of inspections of the district during the year in question, a conviction was obtained in a case of premises becoming a public nuisance through pig-keeping, and several cottages at Stowford and Mill Street were condemned as being un-inhabitable. Those at Stowford have all been re-roofed and thoroughly renovated, and those in Mill Street with one exception are habitable. Several specimens of suspected water were officially analysed by order of the Council, and when certified as unsatisfactory, a compulsory order was made on the owner to furnish a pure supply. In addition my monthly reports have explained various sanitary defects and their requirements, which have received the needed attention of the Council.

On reviewing the foregoing particulars, the general, infantile, and zymotic death-rate, together with the exceptional absence of fatal Diarrhœa over a long period of years, and the rareness and mildness of epidemics, and total absence of endemics and many serious ailments, conclusively point in your Medical Officer's opinion to a state of great sanitary healthfulness in the district, which, coupled with its great natural advantages, second probably to none in the Kingdom, and the efficient exercise of the powers vested in the Council should place the healthy sanitation of Sidmouth beyond question.

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In conclusion, the result of your Medical-Officer's long experience as a Sanitary Officer convinces him year by year of the recognition by the public of the importance of Sanitary measures and an aroused energy towards their accomplishment. However laudable the intentions and endeavours of the Council may be to support and strengthen this feeling in matters affecting the public health and welfare of the District in its charge, it cannot be too strongly insisted on, that the essence of all Sanitary work is the individual house, and the unit of Sanitary success individual co-operation. Without home attention to the one, and the ready assistance of the other, the wisest intentions and best endeavours of the Council and its Officials, must be largely jeopardised

I have the honor to remain, Your obedient Servant,

Thos. H. S. Pullin, M.D., F.R.C.S., Edin., M.R.C.S Medical-Officer of Health.

Member of the Sanitary Institute of Great Britain. January 26th, 1895.