

[Report 1925] / Medical Officer of Health, Skelton & Brotton U.D.C.

Contributors

Skelton and Brotton (England). Urban District Council.

Publication/Creation

1925

Persistent URL

<https://wellcomecollection.org/works/wncwpb24>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

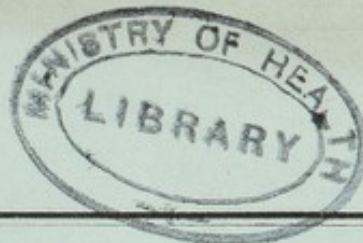
This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.

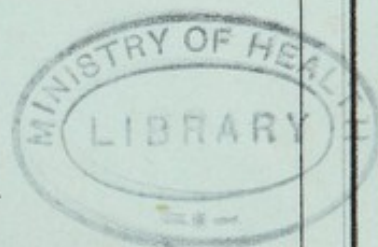


Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

Paulk. C. 10/11
INTELL. LIBRARY



Skelton and Brotton Urban District.



**NORTH RIDING (GUISBOROUGH)
COMBINED DISTRICTS.**

. REPORT . for the Year 1925

of the Medical Officer of Health,
**C. R. GIBSON, M.A., M.B., Ch.B.
D.P.H.**

Guisborough :

*Printed by Stokeld & Sons, Fountain Street,
1926.*



Digitized by the Internet Archive
in 2018 with funding from
Wellcome Library

<https://archive.org/details/b30089463>



TO THE CHAIRMAN AND MEMBERS
OF THE
SKELTON & BROTON URBAN DISTRICT COUNCIL.

GENTLEMEN,

THE Ministry of Health, in circular 648, have requested that the Annual Report, for 1925, of the Medical Officer of Health be drawn up on fuller lines than the immediately preceding ones: that it be, in fact, what is called a Survey Report, and I therefore present this Report in accordance with the Ministry's requirements.

Natural and Social Conditions of the Area.

Area (acres) 15,557.

Population : Census 1921, 15,788.

Estimated, 1925, 15,800.

Number of Inhabited Houses (1921) 3,262.

Number of families or separate occupiers (1921) : 3,346.

New houses erected, mid-1921 to mid-1925 : 50.

Rateable Value : £53,850.

Sum represented by a penny rate : £224.

Physical Features and General Character of the Area :—The district is roughly oblong, three-and-a-half miles wide along the coast, extending inland some six-and-a-half miles. The most inland portion is a moorland belt, about a mile wide, at a height of from 500 to 900 feet; north of this the ground falls to cliffs at the coast, with small hills in the west, between Charlton and Skelton, and again near the coast at Brotton. The geological formation is oolite and lias, with important ironstone mines.

Social Conditions :—The population is concentrated in ten hamlets, mostly in the centre of the district, near the ironstone mines, the largest hamlets, Skelton and Brotton, giving their names to the district. According to the 1921 census 54% of the occupied males were employed in the ironstone mines, as against 63% similarly engaged in 1911. Just over 10% were metal workers, employed in the steel works on the borders of the adjoining Loftus Urban District, and slightly more than 5% followed agricultural occupations. These are the main industries of the district. The 1921 census further showed that 87% of the houses had five, or fewer, rooms.

Vital Statistics :—Neither the main industries, nor the general surroundings and habits of the population can be regarded as unhealthy, since the standardised death-rate over the five years 1921 to 1925 has been 11.0, that for England and Wales in the same period

having been 12.2. In 1925 the local death-rate was 10.4, against 11.9 in 1924. The infant mortality rate, previously tending to be above the average for the whole country has, during the last three years, maintained a more satisfactory level; in 1925 the rate was $50\frac{1}{2}$, in 1924, 77, the average for England and Wales in each year being 75. The birth-rate shows a continued decline: in 1925 it was 18.7, compared with 20.6 in the preceding year.

Poor-Law Relief:—In common with neighbouring ironstone-mining districts, the area has suffered severely from the depression which, in 1921, succeeded the post-war boom. Some mines are still closed and those that are working have been, for the most part, on short time. Unemployment therefore continues at a high level, and unemployment pay or poor relief has been the source of income of a serious proportion of the inhabitants, who have been living for some years at a bare subsistence level. Any injurious effects of this on health have been masked by improvements in other directions, so that the net result is still a diminishing death rate.

Extent to which Hospitals are used:—In the three years 1923—1925 thirty-three deaths of residents in the district—1 in 16 of the total deaths of residents—occurred in hospitals. Of these, nine were in the Union Infirmary at Guisborough, seven in the North Ormesby Hospital, six in the Admiral Chaloner Hospital, Guisborough, five in the North Riding Infirmary, and six in other hospitals, including one in the Brotton Cottage Hospital. The proportion of deaths in hospital to total deaths is the lowest of any district in the Guisborough Union, the average ratio for all districts being 9%: this would indicate that smaller use is made of hospital facilities for the treatment of the sick than in neighbouring districts.

General Provision of Health Services in the Area.

Hospitals provided or subsidised;

	(a) by the Local Authority.	(b) by the County Council.
(1) Tuberculosis	—	Wensleydale Sanatorium, Aysgarth. Rutson Hospital, Northallerton. Phillipson's Home, Stannington. Morris Grange, Catterick.
(2) Maternity	—	Middlesbrough Maternity Hospital.
(3) Children	—	—
(4) Fever	Isolation Hospital, Lingdale.	—
(5) Smallpox	Joint Smallpox Hospital, near New Marske.	—
(6) Other	—	—

Isolation Hospital:—The Council's Isolation Hospital for fever cases is a converted two-storeyed double cottage standing in a small site near the village of Lingdale. Four of the rooms are used as wards, containing twelve beds, while a fifth room is used as a convalescent room; then there is a bath-room, nurse's bedroom, and caretaker's bedroom, sitting-room and kitchen: four rooms on the ground floor and the remainder on the first floor. The premises are unsuited for the isolation at the same time of more than one disease: if scarlet fever patients are being treated there, patients with diphtheria cannot be admitted owing to the risk of some of those under treatment contracting both scarlet fever and diphtheria. In 1920 a small Thresh current steam disinfector was installed in a wood and galvanized iron building and has proved satisfactory. Water supply is from the Cleveland Water Company, of good quality but occasionally indifferent pressure. The drainage is taken to a small treatment tank on the hospital site and the effluent into a ditch: this cannot be regarded as satisfactory. Lighting is by oil-lamps, and the hospital is on the telephone system.

Joint Smallpox Hospital:—The Council is a member of the Guisborough Joint Smallpox Hospital Board, maintaining a hospital on a site in the Guisborough Rural District, between New Marske and Dunsdale, and east of the Redcar Waterworks Pumping Station. The buildings comprise: (a) a wood and galvanised iron ward-block, containing two wards, each with six beds, and, in the central portion, a kitchen and three bedrooms; (b) a contact block, asbestos cement sheets and wood, containing two bedrooms and a connecting living-room; (c) a wood and galvanised iron laundry, ambulance and coal-shed; (d) a small disinfecting hut.

The water supply was altered in 1924 and is now pumped to a storage tank on the hospital site from the neighbouring Redcar pumping station. The drainage system also has been entirely relaid during the latter half of 1925, and is now taken to a small covered settling tank outside the hospital site, from which it is discharged through open-jointed agricultural pipes by land filtration. Heating of the wards is by coke stoves, lighting by oil lamps. The hospital is not on the telephone system. There is a resident caretaker and nurses are obtained when required. Thirteen smallpox patients were admitted to the hospital from Redcar in the first half of 1925, as well as three patients from the Guisborough Rural District. In 1924 twenty smallpox cases from Redcar were treated there, and in the preceding two years two suspected cases had been admitted, one from Redcar and the other from Guisborough Urban District, neither being finally diagnosed as smallpox.

Institutional Provision for Unmarried Mothers, Illegitimate Infants, and Homeless Children in the Area: Nil.

Ambulance Facilities: (a) for Infectious Cases: a horse-drawn rubber-tyred four-wheeled ambulance is maintained.

(b) for non-infectious and accident cases: the mining companies have their own arrangements for the use of an ambulance when required. Outside these, no arrangements have been made.

Clinics and Treatment Centres:

	Provided by the Local Authority.	Provided or subsidised by the County Council.
Maternity and Child Welfare Centres.	(1) Wesleyan Schoolroom, Brotton, one large room, alternate Mondays, 3—5 p.m. (2) The Institute, Skelton, hall and two small rooms, alternate Mondays, 3—5 p.m. (3) Church Hall, Lingdale, one large and one small room. alternate Mondays, 3—5 p.m.	—
School Clinic	—	St. John Ambulance Room, Carlin How.
Tuberculosis Dispensary ...	—	Skelton.
Treatment Centre for Venereal Diseases ...	—	Steckton & Thornaby Hospital.

Public Health Officers of the Local Authority: particulars of these are given in Table 6. Up till the end of March Mr. Cranmer, Surveyor to your Council, was also Sanitary Inspector. The two offices were separated and Mr. Cummings was appointed Inspector, commencing duties on April 1st. He holds the Sanitary Inspector's Certificate of the Royal Sanitary Institute, and obtained during the year the Meat Inspector's Certificate of that body.

Professional Nursing in the Home:—All the villages in the district are served by District Nursing Associations, Moorsholm being in the area served by the Lingdale District Nurse, and Margrove Park and Charlton in that of the Boosbeck one. These are voluntary associations subsidized by the County Council for midwifery work, but with no co-ordination with the local authority.

There is no provision for the nursing of infectious diseases, such as measles, etc., in the home.

Midwives: The local authority make no payment to practising midwives, of whom there are five in the area, connected with District Nursing Associations.

Chemical Work:—Any chemical work required has been done by Mr. B. A. Burrell, County Analyst, Leeds. A copy of a water analysis performed in 1923 is given herewith:

“Report on Water received from Skelton & Brotton District Council,
September 21st, 1923.

Locality and Source: Service pipe at 1, Margrove Park, connected with Cleveland Water Co.'s Main.

Colour of water in 2-ft. tube, Lovibond's units; 1.3 yellow.

Smell at 100° Fahrenheit: none.

The sample contains, in grains per gallon :

Chlorides, equivalent to common salt	...	...	...	2.07
Nitrates, equivalent to calcium nitrate	...	...	...	none
Nitrites	...	...	...	none
Calcium, magnesium, salts, etc.	...	...	...	3.58
Volatile and organic matter (lost by careful ignition)	...	...	...	0.84
Total dissolved solids (dried at 100° C.)	...	...	...	6.49
Containing injurious metals	...	...	...	none
Containing ammonia	...	...	...	0.002
Containing also organic ammonia	...	...	...	0.006

Sediment: Large, mainly peaty matter and oxide of iron.

Microscopic Examination: Shows the presence of a number of animalculæ.

This water shows an abnormal quantity of sediment. This may be due to its imperfect filtration at the water works, or it may be derived from encrusted mains, but in any case it should be removed by further filtration or sedimentation. After the removal of the sediment, the water would be of good quality for drinking and domestic use.

Signed B. A. BURRELL, F.I.C."

In reference to the above the trouble was assigned to the condition of the mains, which were scraped by the Water Company, and the local cause of complaint removed.

Following is a copy of another water analysis made in 1923 of the supply for the half-dozen houses at New Brotton :

"Report on Water received from Skelton & Brotton District Council,
per Dr. Gibson, June 27th, 1923.

Locality and source: Stand pipe at New Brotton supplied from covered-in spring 200 yards distant.

Colour of water in 2-foot tube, Loviband's units: 0.9 yellow.

Smell at 100° Fahrenheit: none.

The sample contains, in grains per gallon :

Chlorides, equivalent to common salt	...	...	...	8.54
Nitrates, equivalent to calcium nitrate	...	...	...	4.30
Nitrites	...	...	...	none
Calcium, magnesium, salts, etc.	...	...	...	15.58
Volatile and organic matter (lost by careful ignition)	...	...	...	2.10
Total dissolved solids (dried at 100° C.)	...	...	...	30.52
Containing injurious metals	...	...	...	none
Containing ammonia	...	...	...	0.001
Containing also organic ammonia	...	...	...	0.003

Sediment: Very minute.

Microscopic Examination: Does not show the presence of animalculæ.

The vicinity to the sea probably accounts for the abnormal quantity of chlorides, a quantity which, if present in an inland water, would be regarded with suspicion. In its

present state the water is suitable for drinking and domestic purposes as any nitrogenous organic matter that may have been originally present in the water has been completely oxidised to nitrates, in which condition it is harmless."

The explanation of the high amount of chlorides is supported by the figures for waters in neighbouring districts at similar distances from the sea, e.g. 7.39 for a spring at Old Lackenby, 7.16 for the High St. Fountain, Loftus.

Legislation in force in the District: See Table 4.

Sanitary Circumstances of the Area.

Water: There are three main water supplies in the district.

The small village of Moorsholm has a Council supply which is brought from springs on the south side of Freeborough Hill. The water, collected in a small reservoir, was brought through iron mains to stand pipes in the village, but of recent years the water has been taken into some ten houses through lead service pipes of sometimes considerable length. At the beginning of the current year, on receiving information of the occurrence of a case of lead poisoning in one of these houses, I tested the water and found it was acid, and, therefore, as a moorland water, likely to act on lead. A sample of water from a tap in the house was submitted to Mr. Burrell and his report stated that it contained 0.07 grains of lead per gallon, and had a further very strong solvent action on lead. Another sample was taken from a tap in another house in the village and found to contain 0.05 grains of lead per gallon, and also to have a very distinct solvent action on lead. A third sample, from a stand-pipe, was found to contain no lead. As, however, the stand-pipes were connected to the mains by short lengths of lead pipe, the Council have replaced these by copper-lined pipes, so that water from the stand-pipes can now be relied upon as free from any risk of causing lead-poisoning. The same cannot be said for water from taps at the end of long lead service-pipes: the Council have circularised householders with such pipes pointing out the danger of water that has lain in them and recommending that all lead pipes be replaced by other suitable ones, and I would strongly urge the adoption of this course.

Another small village, Charlton, has a private supply from springs behind Hollin Hill farm. This has been quite satisfactory.

The great bulk of the district is supplied by the Cleveland Water Company, from the Lockwood Beck Reservoir at the edge of the southern moorland. An analysis of a sample of their water, which is a soft moorland water of—apart from occasional trouble with mains—very satisfactory quality, is given on an earlier page. Some of the villages supplied, particularly Skelton Green and the higher parts of Brotton, are situated at almost as high a level as the reservoir, and as the mains take water further to a large population in much lower districts, these high areas have in the past experienced an intermittent supply in at least the summer months, when the demands from the lower levels are greater. The Water Company at these two places maintain elevated storage tanks to improve the constancy of the

supply and during recent years have enlarged these, with consequent amelioration of the supply. Some of the loss of pressure was alleged to be due to incrustation of the mains and, to remove this, the Water Company undertook to have the mains throughout the district scraped.

The supply, as regards quantity, cannot yet be regarded as completely satisfactory in all portions of the area. Conversions of privies and pail-closets to water-closets, which has been commenced during the year, has had to be confined to certain localities only, where no difficulties with the water supply might be anticipated.

Rivers and Streams: There is no serious pollution of any of the few small streams in the area. A small beck at Stanghow was found to be polluted by leakage from an overflowing farm cesspool: this was remedied as the result of informal action.

Drainage and Sewerage:—All the ten villages in the area are sewered. Carlin How sewers join those of the neighbouring Loftus Urban District and discharge at a sea outfall at Skinningrove. In Moorsholm the sewage is led through filtering tanks and the effluent discharged into a ditch: no complaint of nuisance has been received but the arrangement is hardly satisfactory. Sewers from the other villages join the main through Brotton which is taken to a sea outfall near Old Saltburn.

Closet Accommodation:—At the end of the year the numbers of closets of different types in the district were reported to be:—

Pail-closets	-	-	2,731
Privies	-	-	355
Water-closets	-	-	216
Total			3,302

In July your Council appointed a Committee to consider the practicability of converting the pail-closets and privies in the district to water-carriage. Owing to difficulties with water supply it was decided that a complete scheme was not at present feasible, but that in suitable localities conversion to water-carriage under Sec. 39 of the Public Health Acts Amendment Act 1907, should be carried out: tenders for 36 conversions were asked for, and before the end of the year 32 pail-closets and 3 privies were converted to water-carriage. During the year also 4 privies were converted to pail-closets. Your Sanitary Inspector hopes that conversions will be proceeded with in the current year. The improvement in general cleanliness, and consequently in health, effected by the change, wherever adopted, is so great that I have no hesitation in recommending strongly that conversion to water-carriage should be completed up to the limits of practicability.

Scavenging:—As detailed in your Inspector's report rather more than half the district is scavenged by Contractors and the remainder by direct labour. The refuse is used as manure by farmers, being first led to various tips situated so as not to cause nuisance. Pail-closets and ashbins are emptied weekly, privies and ashpits monthly.

Sanitary Inspection of the Area :—This is dealt with fully in the Sanitary Inspector's report, on pages 22 to 27, and an abstract is given in Table 5.

Smoke Abatement :—With the exception of that from the Skinningrove Ironworks, outside your area, practically all smoke in your district is from domestic hearths. It is not excessive, and no action has been taken with a view to its abatement.

Premises and Occupations which can be controlled by Byelaws and Regulations :—

(1) Common Lodging-houses: Bye-laws adopted 1879. There is one in the district, situated in Brotton, and the bye-laws are satisfactorily observed.

(2) Offensive trades: The Council declared the trade of fish-frier to be an offensive trade, confirmed by Local Government Board Order in 1913. There are 12 such in the district which have been permitted: the standard of cleanliness is good.

(4) Underground sleeping-rooms: There are none in the district.

Schools :—There are 10 public elementary schools in the district. All but Moorsholm have a water-supply laid on. Schools at Brotton, Boosbeck, North Skelton and Skelton Green have water-closets; the remainder pail-closets.

Information as to infectious disease affecting scholars is obtained from two sources :—

- (1) As to notifiable diseases, from notification by general practitioners and the subsequent enquiry made at the home.
- (2) From the intimations which, under arrangements made by the County School Medical Officer, are sent by head teachers of elementary schools, both to the County School Medical Officer and myself. These intimations furnish practically my sole information as to the existence of non-notifiable infectious disease and are highly appreciated.

In the notifiable diseases notice is sent to the head teacher, recommending exclusion of the patient or contacts, and a later notice when re-admission to school may be regarded as safe. These recommendations are based on the joint "Memorandum on Closure of and Exclusion from School" issued in 1925 and follow these lines in scarlet fever: (1) Patients (whose minimum period of isolation is four weeks): exclude for a further two weeks after discharge from hospital or final disinfection of premises if treated at home; (2) Home contacts: (a) where patient is removed to hospital, exclude contact until one week after disinfection of premises; (b) where patient is treated at home, exclude contact until two weeks after final disinfection of premises. In Diphtheria the recommendations are: (1) Patients, exclude until three weeks after discharge from hospital or final disinfection of premises if treated at home; (2) Home Contacts: (a) where patient is removed to hospital, exclude until two weeks after the removal or until two negative swabs are obtained; (b) where patient is treated at home exclude contact for two weeks or two negative swabs subsequent to final disinfection of premises.

Of recent years school closure for infectious disease has been officially discountenanced, and the action of the medical officer of health has been more limited to advice as to the exclusion of individual children and to arranging for the disinfection of pencils and pen-holders used in common, and the occasional disinfection of school buildings.

Housing.

General Housing Conditions in the Area:—Nine-tenths of all the houses in the area have less than six rooms, and one quarter of them have not more than three rooms. The Housing Survey carried through in 1919 elicited the information that 53 per cent. of the dwellings have not more than two bedrooms, and in Brotton indeed the proportion rose to 61 per cent. A house with only two bedrooms cannot be regarded as at all suitable for the decent upbringing of a family. Conditions as to overcrowding are, however, better than they have been in the past: at the census of 1911 the average number of persons per occupied dwelling was 5.2, which had dropped at the census of 1921 to 4.7. Since mid-1921 49 new houses have been erected in the district (45 of them by the Council), and the population is estimated not to have increased, but rather slightly diminished, so that the average number of persons per occupied dwelling is now in the region of 4.6. In the houses inspected under the Housing (Inspection of District) Regulations the average number of persons per house in each of the five years commencing with 1921 has been: 5.0, 5.5, 5.5, 5.6, and 4.5. This figure would usually be rather above the average for the whole district.

The 1921 census was taken during a stoppage of the ironstone mines and they have never since got back into full work. The population of the district therefore has been stationary or showing a slight tendency to decline, due to the increased numbers of families leaving the district and to a diminution in the access of new population by births. The population, in its rise and fall, will tend to follow the fortunes of the local ironstone mining industry, again severely hit by a coal stoppage.

Overcrowding:—No serious case of overcrowding has come to notice, and general density of population, as indicated above, has decreased: in 1921, out of 201 houses inspected, 15 contained more than one family, while in 1925, out of 232 inspected, only 8 contained more than one family.

Fitness of Houses:—The great majority of houses inspected are found to require repair in some direction or other, but, while this is so, extreme degrees of disrepair and unfitness are, happily, very rare. The most frequent defects are enumerated in the following table, detailing their percentage occurrence in the 201 houses examined in 1921, and the 232 in 1925.

Percentage of houses inspected		1921	1925
presenting			
Defective roofs ...	...	74	47
Dampness ...	...	19	42
Defective plastering	...	73	30
Defective spouting	...	16	18
Defective yard paving	...	13	14
Defective floors ...	...	51	12
Defective coppers	...	11	8
Defective ovens ...	...	16	6

Such defects as the above are due to lack of proper supervision by owners, who, again, in some cases have not been receiving the rents wherewith to carry out the repairs.

Further particulars as to defects, and action taken in remedy, will be found in your Inspector's report.

Delay is sometimes experienced in the remedying of defects owing to the shortage of skilled labour. What labour there is available locally for the purpose, attends, as far as possible, to the most urgent jobs first.

Unhealthy Areas:—No complaints have been received nor representations made.

Bye-laws relating to Houses, etc.:—Remodelled bye-laws for New Streets and Buildings were approved in 1925 and no difficulty in their operation has yet occurred. There are no bye-laws for houses let in lodgings, nor for tents, vans and sheds, and any need for them is small.

Housing Statistics for the year 1925 are displayed in Table 7.

Inspection and Supervision of Food.

(a) **Milk Supply**:—All the fresh milk consumed in the district is produced on local farms, and a certain amount is sent into neighbouring towns. The number of producers and retailers on the register—68—is four fewer than in 1924, but no registration of retailers has been refused or revoked. No licences have been granted for the sale of milk under special designations, (i.e. "Grade A" etc.) and no bacteriological examination of milk has been made.

(b) **Meat**:—Arrangements for the inspection of meat under the Public Health (Meat) Regulations, 1924, work satisfactorily. The duties are necessarily onerous, owing to the wide area of the district and the distances separating the numerous private slaughter-houses. Your Inspector obtained the Meat Inspector's Certificate of the Royal Sanitary Institute during the course of the year. The regular days and hours of slaughtering for each butcher are registered at the office; notice of slaughter outside these regular hours is to be given three hours before the time of slaughter, and this regulation has been, on the whole, well observed. Your inspector examines the carcasses soon after slaughter, and any signs of disease are noted. In cases of doubt or of a serious character the medical officer of health is notified, and inspects the carcass before a decision is taken. No arrangements have been called for for the marking of meat. As will be noticed from the Sanitary Inspector's Report the amount of unsound meat that has been surrendered is very much higher than in previous years: in 1924 and 1923 no unsound fresh meat came under the Inspector's purview, while in 1925 five whole carcasses and several quarters were surrendered for tuberculosis as well as a carcass of mutton unsound for various reasons—in all, 2,977 lbs. The difference is entirely due to the more efficient inspection rendered possible by the Public Health (Meat) Regulations, which have only been operative during the last nine months of the year. The outstanding cause of the unsoundness discovered has been tuberculosis. Condemned carcasses are removed free of cost by the salvage department of the neighbouring County Borough of Middlesbrough.

There are no meat stalls nor stores in the district ; those parts of the Regulations dealing with shops and vehicles have been more difficult to carry out, but meat in vehicles is, in general, adequately covered and kept clean, and the windows of butchers' shops are usually closed in dusty weather.

Private Slaughterhouses in use :

	In 1920.	In January, 1925.	In December, 1925.
Registered	1	—	—
Licensed	12	13	13
Total	13	13	13

(c) **Other Foods** :—No unsound food, apart from meat already mentioned, came under notice. Bakehouses are generally satisfactory and fried-fish shops are maintained in an excellently clean condition.

(d) No cases of **food-poisoning** in the district have come to my notice: a small epidemic was referred to in my report for 1924.

Prevalence of, and control over, Infectious Diseases.

The following table indicates the prevalence of the most important notifiable infectious diseases (excluding tuberculosis) in recent years :—

Total Notifications received in period

	1916-1920.	1921.	1922.	1923.	1924.	1925.	1921-1925.
Scarlet Fever	169	30	17	10	21	17	95
Diphtheria	83	13	14	16	13	5	61
Enteric Fever	11	0	0	0	3	0	3
Encephalitis lethargica	0	0	0	1	2	1	4

In comparing the prevalence of the first two diseases in the earlier five-year period and in the later, it must be remembered that the number of younger children in the district has diminished, owing to the decrease in the birth-rate; this reduction, however, does not amount to ten per cent.

The fatality caused by the commoner infectious diseases is indicated in the following table :—

Deaths from	Total 1916-1920.	1921.	1922.	1923.	1924.	1925.	Total 1921-1925.
Scarlet fever	4	—	—	—	1	1	2
Diphtheria	13	1	1	—	3	—	5
Measles	16	16	—	—	—	9	25
Whooping-cough	5	5	15	—	—	8	28

Scarlet fever has been less serious, both as regards its prevalence and as regards the mortality caused by it, during the last five years than previously.

An important change in procedure with regard to the control of scarlet fever was instituted in 1923. The minimum period of isolation in this disease insisted on by the sanitary department had, up till then, been six weeks. I recommended, however, that cases could be discharged from hospital, or, if treated at home, released from isolation, in not less than four weeks from the date of appearance of the rash, provided convalescence was completed and there was no sore throat, discharge from the ear or nose, suppurating or recently enlarged glands, or eczematous patches. This recommendation has been acted upon, so that the average stay in hospital has been reduced with safety by some ten days, or one-fourth of the former usual period of hospital treatment. From the point of view of the patient there has been a considerable reduction in the irksome confinement imposed, and, from the point of view of the community, economy both of money and of labour, and a lessening of the long break in education of the child patient and child contacts. There have been no return cases (i.e. fresh cases appearing in the home after the return of a patient discharged from hospital).

Diphtheria has also been less prevalent in your district in the last five years than previously, but the diminution has not been so marked as in the case of scarlet fever. It has had, in the past, a high rate of fatality: since 1910 there have been about 14 deaths in every hundred cases, as compared with the 6 or 7 deaths per hundred cases which has been the general average throughout the country. In the latest few years, however, the fatality rate has not been so high, and it is to be hoped that this lessened seriousness of the disease, or better response to treatment, may continue.

The district can now be regarded as entirely free from enteric fever, save for imported cases. During the last five years only three cases were notified, and two of these gave negative results with repeated Widal tests: the third one, under the Widal test, was positive for the bacillus of typhoid fever and this patient came, while suffering from the disease, into the district from a neighbouring county. One of the probable causes of the disappearance of the disease, which was diminishing before the war, is the gradual increase in the general standard of cleanliness: more care is taken over the cleanliness of water, of food, of backyards, of kitchens, and of houses, persons and habits. Cleanliness may have been pursued for its own sake, but the reward is wider in its application.

The new disease, encephalitis lethargica, or sleepy sickness, has appeared in the district, but not to any extent. The first case was notified here in 1923, two more in 1924, and one in 1925: the first case was a typical example of the disease, and also one of those in 1924, which ended fatally and was noteworthy as having been a contact at work of a preceding case in a neighbouring district.

Measles and whooping-cough are now easily the most serious of the acute infectious diseases: large epidemics occur at intervals of a few years and the increase in the deaths caused by them in 1916—1925 over those in the previous five years, 1921—1920, is partly due to the latter period containing two major epidemics while the former included but one. Between them they were responsible for 53 deaths in the five years 1921—1925, nearly as many as tuberculosis. Deaths in these diseases are usually due to pulmonary complications, the onset of which is fostered by even mild overcrowding, by unskilled nursing, and possibly previous improper feeding. While the diseases affect both rich and poor, the fatal endings

happen usually among the children of the poor, or, at least, the worst housed. The spread of these diseases would be lessened by the isolation of those suffering from them, but unfortunately this is, under existing conditions, often impracticable.

Your Council, through the sanitary department, lessen the spread of infectious disease in various ways, which may be summarized as :—

- (1) Assisting in the diagnosis, by, for example, bacteriological methods.
- (2) Insisting on proper isolation, where it can be legally enforced and providing a hospital for isolating cases where home conditions are inadequate for the purpose.
- (3) Advising as to the abstention from day-school, Sunday-school, etc., of contacts.
- (4) Disinfecting infected articles and rooms.
- (5) Aiding the treatment by the provision of a hospital and nursing for the purpose.
- (6) Aiding the treatment, in diphtheria, by the free provision of diphtheria antitoxin.

Free examination of bacteriological material from suspected cases of diphtheria has been afforded by the Council since 1901. Up till 1924 this was carried out at the Laboratory of the College of Medicine, Newcastle, but, in order to avoid postal delays, from 1924 onwards, swabs have been examined by the medical officer of health. There is no doubt that the value of this examination is appreciated, and the number of swabs submitted for report increases steadily: in 1902 and 1903 there were 120 notified cases of diphtheria in the whole Guisborough Union and 58 swabs were submitted, or about 10 swabs for every 20 cases: in 1908 and 1909, for every 20 cases there were 15 swabs sent in: in 1920 and 1921, 37 swabs for every 20 cases; and in 1924 and 1925, 84 swabs for every 20 cases.

Free bacteriological examination is also provided in suspected cases of enteric fever, this being performed by the Laboratory of the College of Medicine, Newcastle. Both Widal tests, and examination of dejecta and of urine, have been carried out.

The Isolation Hospital accommodation has been described on a previous page. In 1925 five out of the 17 cases of scarlet fever notified were treated there; in 1924, 15 out of the 21 cases of scarlet fever, 3 of the 13 cases of diphtheria, and 1 of the 3 cases notified as enteric fever; in 1923, 4 of the 10 cases of scarlet fever, and 1 of the 16 cases of diphtheria. In the last three years, therefore, 29 cases have been removed to the Isolation Hospital and treated there.

Disinfection of premises and articles is carried out by means of formalin spray and formalin lamps. Clothing and bedding are subjected to disinfection by steam at the Isolation Hospital.

Diphtheria antitoxin has been supplied free by the Council since 1910 and local practitioners avail themselves fully of this aid to treatment. I have recommended that it should be given only by injection through a needle and preferably by injection into the muscles. A store is maintained, in 4000-unit phials, at the Council Offices, for the local practitioners to obtain when necessary; the provision of concentrated serum in 8000-unit phials, has been offered. Neither Schick nor Dick tests have yet been employed.

Particulars of notifications received during the year are given in Table 1.

Tuberculosis:—The number of new cases that have come to my knowledge, by notification or otherwise, during 1925, and also the number of deaths from the disease, at different ages, is given in Table 2. My report for 1924 contained a table giving the annual rates, per thousand of population, of notifications of tuberculosis and of all deaths from that disease, in this district and in all urban districts in the North Riding respectively, from which it appeared that, while the notification-rate in this district had increased of recent years, and was considerably higher than the average in urban districts in the Riding, the local death-rate from tuberculosis had shown decrease rather than increase, and was definitely below the figure for all urban districts in the Riding. The latest figures, given below, are in agreement with this.

Tuberculosis: All forms; Annual Rates per 1000 of population.				
<i>Notifications.</i>			<i>Deaths.</i>	
	Skelton & Brotton U.D.	All U.D.'s in North Riding.	Skelton & Brotton U.D.	All U.D.'s in North Riding.
1904—08	—	—	1.63	—
1909—13	—	—	0.91	—
1914—18	1.56	—	1.08	—
1919—23	1.80	1.50	0.75	1.20
1924	2.28	1.66	0.89	1.09
1925	2.28	—	0.76	—

This one disease is responsible for rather less than one-thirteenth of all the deaths in the district: if premature deaths, those before the prime of life, only were considered, the importance of tuberculosis in the health of the district would loom still larger.

The administrative measures that are employed are:—

- (1) As an aid to diagnosis free examination of sputa is offered by the local authority.
- (2) When a case is notified, the premises are visited by the medical officer of health or the sanitary inspector, action is taken in regard to any housing defects or overcrowding discovered, general advice as to admission of fresh-air and prevention of infection is given, and assistance offered through the private medical attendant in bringing the patient into touch with the County Council scheme for treatment:—
- (3) Spitting cups and disinfectant are supplied free.
- (4) Disinfection of rooms occupied by the patient is carried out when the patient is removed.

Less advantage is taken of the bacteriological facilities offered in tuberculosis than in diphtheria. Throughout the Guisborough Union, taking all the cases stated by medical practitioners, in notification or in death-registration, to have suffered from pulmonary tuberculosis, in about three out of four sputum is never submitted for examination. In many cases, of course, the clinical signs of pulmonary tuberculosis may seem obvious without recourse to sputum examination, which latter again may yield negative results for some time in

undoubted cases. Notwithstanding its limitations the laboratory report may be of value in every case: it certainly gives point to advice as to precautions to be taken to guard against infection, and it should be of assistance in the prognosis, or forecast of the progress of the disease. To illustrate this latter point none of the 104 patients whose sputum has been reported during 1924 and 1925 as not containing tubercle bacilli has, so far as I have been able to discover, died, as yet, from this disease. 36 have been reported by myself as containing tubercle bacilli in sputa, and of these patients four have left the district, and nineteen of the remaining thirty-two have died before the middle of May, 1926. In nine of those with positive sputa the report stated that the number of bacilli per microscope field was not more than one in two or more fields: seven of these patients still survive, periods of from 7 to 27 months having elapsed since the sputum examination; two have died, surviving 11 and 18 months respectively after the report, and in the first the tuberculosis was complicated by cancer elsewhere. In eleven cases the report stated the average number of bacilli per field as between 1 and 10; one of these left the district, five of the remainder died, and five still survive. In sixteen cases the number of bacilli was stated as being more than ten per field: three of these left the district, one still survives, after eight months, and twelve died after an average interval of $4\frac{1}{2}$ months. The prognosis can therefore be regarded as good, doubtful, or bad, according to the number of bacilli found in the sputum, and this forecast may itself be of assistance in the treatment of the disease.

The notification of cases of tuberculosis, although in this the district compares favourably with others, is not yet complete. Out of the twelve fatal cases in 1925 three died without having been notified as suffering from the disease.

Under the Articles of the Public Health (Prevention of Tuberculosis) Regulations 1925, relating to tuberculous employees in the milk trade, no action has yet been found necessary. Also under sec. 62 of the Public Health Act 1925, referring to compulsory removal to hospital of certain tuberculous cases, no action has yet been found necessary.

At the beginning of September, 1925, the County Council opened a Tuberculosis Dispensary in your district at Skelton, and I was appointed to attend there. A dispensary in this locality meets a real need, and my duties as medical officer of health of the district and as local tuberculosis officer mutually assist each other.

Maternity and Child Welfare.

Under the Notification of Births Act practically all the births are notified to me within 36 hours. The information received is transmitted weekly to the County Medical Officer of Health and to the local registrar of births.

Births registered in 1925	-	-	-	-	296
Live births notified in 1925	-	-	-	-	297
Still births notified in 1925	-	-	-	-	12
Total births notified by midwives in 1925	-	-	-	-	202

As mentioned earlier in this report, three Maternity and Child Welfare Centres are provided by the Council, viz. at Brotton, at Skelton, and at Lingdale. The County Council

contribute £25 annually to each of these. The average attendance of children at each session in 1925 was, at the Skelton Centre, 16; at Brotton, 25; and at Lingdale, 30. Local medical practitioners are appointed as medical officers and attend each session to examine the children and give advice to the mothers. The district nurse in each place is appointed as nurse superintendent, and the County School Nurse for the district also attends. Addresses are given to the mothers by the County School Medical Inspectors and others. By the regular weighing, and medical and nursing supervision, the healthy progress of the children is ensured, and any departures from full health are recognised at the time when they are most easy to correct, that is, at their beginnings. Such dried milks or cod liver oil preparations, etc., as may be recommended by the medical officers are usually supplied on payment at the centres. Baby clothing stalls are also maintained and occasional demonstrations given as to the making of suitable outfits for children. These Centres have been in existence since October, 1920.

The course of infant mortality in the district is given in the following table :—

Infant Mortality Rate
(infant deaths per 1000 births).

5 years 1889—1893	(average for 3 years is 159)
5 years 1894—1898	- - - 151
5 years 1899—1903	- - - 146
5 years 1904—1908	- - - 127
5 years 1909—1913	- - - 112
5 years 1914—1918	- - - 124
5 years 1919—1923	- - - 96
1924	- - - 77
1925	- - - 50½

In comparing the rate for 1925 with those at the end of last century it will be seen that two out of every three infant deaths that occurred under the earlier conditions are now avoided. When it is recollected that death is but the last stage of disease, and that disease in the early months of life often handicaps the whole later existence of the individual, one cannot but possess a confident hope of seeing grow up a stronger and better race than ever yet lived within these bounds.

A scheme for the supply of milk, free or at half-price, to necessitous mothers and children, has been in operation in the district since the end of October, 1921. Fresh milk has been given, the usual rate being one pint daily, for four weeks, after which a fresh application is made if the need continues. The number of applications granted has been :—

in 1921	- - 13
1922	- - 141
1923	- - 21
1924	- - 2
1925	- - 5

The five applications in 1925 related to two individuals.

Particulars of the frequency of sepsis and deaths of mothers connected with child-bearing are given below :—

Notifications of puerperal fever in eight years 1918—1925	-	-	4
Deaths from puerperal sepsis, 1918—1925	-	-	1
Deaths from other causes connected with child-birth, 1918—1925	-	-	11

Rates per 1,000 births.

	Skelton & Brotton District.	Guisborough Union.	England & Wales.
	1918—1925.	1918—1925.	1918—1924.
Deaths from sepsis	0.32	0.92	1.54
Deaths from other causes	3.52	3.85	2.23
Total deaths from child-bearing	3.83	4.76	3.77

While the death-rate from puerperal fever, or sepsis in the lying-in period, has been commendably low in your district, the other causes of death threatening the mother in child-birth have been rather more active than in the country as a whole, so that the nett result is that the mother's chances in child-birth are little different in your district from the average throughout England and Wales.

A scheme for the provision of hospital accommodation for confinement cases in your district where that might be advisable on account either of special complications or the unsuitability of the home conditions was prepared in 1924, but a County Council scheme embracing this area was approved in preference by the Ministry of Health. I understand one case has been admitted from your area under the scheme.

Ophthalmia neonatorum is an inflammation of the eyes occurring in new-born babies, which sometimes leads to an opacity of what should be the transparent front of the eye. Two cases of this disease were notified in 1925, but recovered under treatment at home, without impairment of sight.

I am, Gentlemen,

Your obedient servant,

C. R. GIBSON.

18th June, 1926.

REPORT OF THE SANITARY INSPECTOR.

To the Chairman and Members of the
Skelton and Brotton Urban District Council.

GENTLEMEN,

I beg to submit my report for the year 1925, showing particulars of the work done with regard to the sanitary inspection of the district. I commenced duty as Sanitary Inspector on April 1st, 1925, and have included the work carried out by my predecessor, Mr. A. R. Cranmer.

Inspection of the District. The district has been systematically inspected as far as possible and a considerable number of inspections made on receipt of complaints. In a large number of cases it has been a difficult matter to have the necessary repairs, alterations, etc. carried out owing to the industrial depression prevailing in the district, which has resulted in a considerable proportion of the property owners being unable to meet the expenditure incurred. Under the circumstances, however, a fair amount of progress has been made.

The total number of miscellaneous inspections made to premises during the year was 1,135. Houses, the common lodging house, dairies, cowsheds, milkshops, slaughter-houses, and premises where foods, etc. are deposited, prepared, and exposed for sale have been inspected as far as circumstances would permit. Houses in which cases of infectious disease have occurred have been visited under the direction of the Medical Officer of Health. Certain cases have been removed to the Isolation Hospital and the necessary disinfections have been carried out.

The bulk of the complaints discovered in the district have been abated by the owners or their agents on request or on receipt of an informal notice. In only a few cases has it been necessary to report the matter to the Council for power to serve statutory notices.

No legal proceedings have been instituted during the year.

Number of nuisances reported to Council	-	-	63
„ „ Statutory Notices served	-	-	5
„ „ Statutory Notices complied with	-	-	4
„ „ Informal Notices served	-	-	29
„ „ Informal Notices complied with	-	-	28
„ „ Informal Notices outstanding	-	-	1
„ „ privy ashpits converted into water-closets	-	-	3
„ „ pan closets converted into water-closets	-	-	32
„ „ privy ashpits converted into pan closets	-	-	8

The majority of the above nuisances were blocked drains, keeping of swine and pigeons, etc. and leaking pans.

Dairies, Cowsheds, and Milkshops. There are 68 names of cowkeepers, dairymen, and milksellers on the Register: 24 at Skelton, 10 at Boosbeck, 17 at Lingdale and 17 at Brotton

It was found necessary to serve 5 Informal Notices for repairs. They were all complied with without further trouble.

The cowsheds in the district are, on the whole, kept in a satisfactory condition. Various wholesale producers who send milk into neighbouring towns have been complimented by the responsible authorities on their clean milk standard.

Slaughter-houses. There are 13 slaughter-houses in the district: 5 at Brotton, 3 at Skelton, 2 at Lingdale, and 1 each at Boosbeck, North Skelton and Moorsholm. These premises have all been regularly inspected under the Public Health Meat Regulations, 1924, as well as farms where emergency slaughtering has taken place and private premises where swine have occasionally been slaughtered.

Since commencing duty in the district in April last, I have been successful in obtaining the Meat and Food Inspector's Certificate of the Royal Sanitary Institute.

There have been 9 cases of emergency slaughter in the district involving 6 cows, 1 calf, and 2 pigs. These were notified to me for inspection, and as a result, the entire carcase of 1 cow, and all the organs of 2 cows, were surrendered and destroyed.

The total weight of food condemned and destroyed during the year was 1 ton, 6 cwts., 4 stones, 9 lbs., approximate.

The whole of the food condemned was voluntarily surrendered to me by the owners and destroyed.

The following is a brief summary of all meat, etc. condemned by me under the supervision of the Medical Officer of Health during the year.

Meat.		Cause of Seizure.		cwts.	st.	lbs.
5 carcasses and organs (beef)	...	Tuberculosis	...	21	3	10
Portions of carcasses	...	Tuberculosis	...	—	15	0
1 carcase of mutton	...	Pneumonia, pleurisy, strongyli, and generally out of condition	...	—	6	0
Lungs	5 sets—	Echinococcus veterinorum	...	—	4	2
	2 sets—	Pneumonia	...			
	1 set—	Tuberculosis	...			
Livers	2—	Bacterial Necrosis	...	1	7	6
	1—	Echinococcus Veterinorum	...			
	18—	Cirrhosis (due to flukes)	...			
1 Piece of Beef		Putrefaction	...			5
				26	4	9

Common Lodging House. There is one common lodging house in the district which is registered for 17 lodgers. It has been visited from time to time and is kept in a fairly clean condition.

Factories and Workshops. There are 45 workshops and 5 bakehouses on the register. These have been regularly visited during the year and there has been practically no cause for complaint. In one or two minor instances the complaint was remedied without serving notice.

Hospital. During the year 5 cases were admitted to the Hospital which was occupied for 9 weeks during 1925.

Disinfections. There have been 76 rooms disinfected after cases of infectious disease during the year.

Scavenging. Seven districts are scavenged by contractors i. e. Lingdale, Margrove Park, Charltons, Old Saltburn, Moorsholm, Brotton and Carlin How. The remaining parts of the are scavenged by direct labour.

Sanitary Conveniences.

Ashpits and privies emptied	-	-	-	Monthly
Pan closets and dry ash receptacles emptied	-	-	-	Weekly
Method of disposal:—farmers and allotment holders in the district.				
Number of pan closets	-	-	-	2735
Number of privy ashpits	-	-	-	351
Number of water closets	-	-	-	216
Number of privies	-	-	-	17

Privy Conversion. During the latter part of 1925 a privy conversion scheme has been initiated in the district under Sec. 39 Public Health Act Amendment Act, 1907. Various difficulties, such as the great difference in the level of various parts of the area and the consequent effect which would follow too great a drain on the water supply in certain localities, militated against procedure on too rapid a scale. It was therefore decided by the Council to ask for tenders for the conversion of 36 privy ashpits, etc., to the Water Carriage system. 34 of these have now been completed in a very satisfactory manner, and will, I hope, give added inducement to proceed on similar lines in 1926.

Cinemas. There are three cinemas in the district. These have been visited periodically and are kept in a sanitary condition.

Offensive Trades.—There are 12 fried fish shops which have been regularly inspected and found to be kept in a cleanly condition.

Public Health Acts.

Number of defects remedied during 1925.

Houses cleansed	-	-	-	4
Overcrowding dealt with	-	-	-	6
Damp remedied	-	-	-	43
Spouting provided or repaired	-	-	-	21
Plaster repaired	-	-	-	38
Roofs repaired	-	-	-	52
Floors repaired	-	-	-	16
Other faults	-	-	-	35

Drainage.

Defects repaired	-	-	24
Disconnected	-	-	3
Stopped drains, gullies, etc., cleansed	-	-	34
Sinks fixed	-	-	2
Sink wastes repaired or replaced	-	-	10

Closets.

Pan closets substituted for ashpits and privies	-	-	8
Closet structures repaired	-	-	14
Closet fittings repaired	-	-	5
New pans provided to closets	-	-	256

Outbuildings.

Structures repaired	-	-	12
---------------------	---	---	----

Various.

Yards repaired	-	-	19
Accumulations removed	-	-	23
Keeping of animals discontinued	-	-	3
Rooms disinfected	-	-	76
Number of premises inspected in connection with infectious disease	-	-	53

Many of the above nuisances have been abated on verbal request to the respective owners.

Housing, Town Planning Act, 1919.

A certain amount of difficulty has been experienced in carrying out the provisions of this Act and the later one of 1925 owing to the exceptional industrial conditions prevailing in the district. The following table includes work carried out under the Housing Act, 1919, and under the Housing, etc., Act, 1925, which came into operation in September last.

Detailed Statistics of work carried out under the Housing and Town Planning, etc., Act, 1919, and Housing, etc., Act, 1925.

Number of houses inspected	-	-	232
Number of houses defective	-	-	190
Number of houses repaired by Council	-	-	3
Number of preliminary notices served	-	-	190
Number of preliminary notices complied with	-	-	117
Number of statutory notices served	-	-	10
Number of statutory notices complied with	-	-	7
Number of statutory notices outstanding	-	-	3
Number of houses repaired	-	-	124

Number of houses in which the rents were:—

4/- to 5/-	-	-	30
5/- to 6/-	-	-	121
6/- to 7/-	-	-	37
7/- to 8/-	-	-	36
8/- to 9/-	-	-	4
9/- to 10/-	-	-	4

Number of rooms in houses were:—

2 up and 1 down	-	97
2 up and 2 down	-	82
3 up and 2 down	-	53

Number of re-inspections - - 232

Number of occupants in houses inspected:—

Over 14 years of age	-	571
Under 14 years of age	-	464

Number of houses overcrowded - - 6

Average number of persons per house - 4.46

Number of houses containing two families 8

Number of houses containing three families - —

<i>Condition of house</i> —Clean		-	78	
Fair		-	136	
Dirty		-	18	
				232
<i>Lighting</i> —	Good	-	57	
	Fair	-	145	
	Bad	-	30	
				232
<i>Ventilation</i> —	Good	-	59	
	Fair	-	138	
	Bad	-	35	
				232

<i>Defects.</i>		<i>Notified.</i>	<i>Remedied.</i>
Leaky pans	-	256	256
Defective roofs	-	109	76
Defective spouting	-	41	39
Dampness	-	97	85
Defective plaster	-	69	56
Defective floors	-	28	26
Defective coppers	-	19	19
Defective ovens	-	14	12
Blocked drains	-	14	13
Defective yard paving	-	33	29
Defective ashpits	-	15	15

Outbuildings	-	68	63
Miscellaneous	-	87	74

I am, Gentlemen,

Your obedient Servant,

ARNOLD CUMMINGS,

Sanitary Inspector and

Inspector of Meat and Foods.

1. Notifiable Diseases during the Year 1925.

Disease.		Total Cases notified.	Cases admitted in Hospital.	Total Deaths.
Smallpox	..	—	—	—
Diphtheria	...	5	—	—
Scarlet Fever	...	17	5	1
Enteric Fever (including Paratyphoid)	...	—	—	—
Puerperal Fever	...	—	—	—
Pneumonia	...	14	—	6
Other diseases generally notifiable :—				
Enceph. Lethargica		1	—	1
Erysipelas	...	1	—	—
Ophthalmia Neonatorum	...	2	—	—

2. TUBERCULOSIS.

Age-Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year ...	—	—	1	—	—	—	—	—
1—4 years ...	1	—	2	3	—	—	—	1
5—9 years ...	—	—	2	1	2	—	—	—
10—14 years ...	3	2	2	1	—	—	—	—
15—19 years ...	1	2	—	1	—	—	—	—
20—24 years ...	1	4	—	—	—	1	—	—
25—34 years ...	—	4	—	—	1	3	—	—
35—44 years ...	1	2	—	—	—	1	—	—
45—54 years ...	—	—	—	—	—	1	—	—
55—64 years ...	2	—	—	—	1	—	—	1
65 years and upwards ...	—	—	—	—	—	—	—	—
All ages ...	9	14	7	6	4	6	—	2

3. LABORATORY WORK, ETC.

	Borough of Redcar.	Guisborough Rural District.	Guisborough Urban District.	Loftus Urban District.	Saltburn- by-the-Sea Urban District.	Skelton and Brotton Urban District.	Total.
Sputa examined for Tubercle bacilli	31	7	7	9	6	9	69
Sputa found positive	10	3	2	1	1	1	18
Swabs from Diphtheria suspects examined	19	10	12	2	2	9	54
Swabs from Diphtheria suspects found positive	4	1	6	0	0	3	14
Swabs from Diphtheria convalescents examined	2 (0 positive)	6 (3 positive)	9 (3 positive)	0	0	9 (3 positive)	26
Swabs from Diphtheria contacts	—	—	—	—	—	—	—
Blood examined for Enteric Fever (Widal Test)	2 (negative)	2 (negative)	1 (negative)	—	—	1 (negative)	6 (negative)
Examination of Milk for Tubercle Bacilli	10 (all neg.)	—	—	—	—	—	10 (negative)
Other examinations	—	2	1	—	—	2	5
Diphtheria Antitoxin issued by Local Authority	Yes	Yes	Yes	Yes	Yes	Yes	Yes

4. ADOPTIVE ACTS, BYELAWS AND REGULATIONS

in force in the Districts.

	Borough of Redcar.	Guisborough Rural District.	Guisborough Urban District.	Loftus Urban District.	Saltburn- by-the-Sea Urban District.	Skelton and Brotton Urban District.
A. ADOPTIVE ACTS.						
Infectious Diseases (Prevention) Act, 1890	Adopted 1921	—	—	Adopted 1891	Adopted 1891	—
Public Health Acts (Amendment) Act, 1890, Part III ...	Adopted 1891	Adopted 1896	Adopted 1893	Adopted 1891	Adopted 1891	Adopted 1896
Public Health Acts (Amendment) Act, 1907, Chief Sanitary Sections	Adopted 1908	—	Adopted 1912	Adopted 1908	Adopted 1908	Adopted 1912
B. BYELAWS.						
New Streets and Buildings ...	1921	1925	1925	1925	1923	1925
Cleansing of Footways, Removal of House Refuse, Cleansing of Privies, etc. ...	1893	1901	1893	1879	—	1879
Nuisances ...	1893	—	1893	1879	1882	1879
Common Lodging Houses ...	1893	1878	1893	1879	1882	1879
Slaughter-houses ...	1893	1901	1893	1879	1882	1879
Tents, Vans and Sheds ...	1924	1914	1917	—	1911	—
Offensive Trades ...	1922	—	—	—	—	—
Houses let in lodgings ...	1925	—	—	—	—	—
C. REGULATIONS.						
Dairies, Cowsheds and Milkshops ...	1895	—	1900	1900	1900	1906
Removal to Hospital of Persons brought within the District by any ship or boat	—	—	—	1909	—	—

5. ABSTRACT OF THE WORK OF THE SANITARY DEPARTMENT.

	Number dealt with.	Informal Notices.	Statutory Notices.	Result.	Remarks.
Nuisances ...	63	29	5	Compliance, except for 1 informal and 1 statutory notice outstanding.	Renewal of 256 Pans.
Slaughter-houses ...	13	0	0	—	2,977 lbs. of meat was surrendered as unsound and destroyed.
Dairies and Cowsheds ...	68	5	0	Compliance	Notices were for repairs.
Bakehouses ...	5	0	0	—	—
Factories and Workshops	45	0	0	—	—
Common Lodging House ...	1	0	0	—	—
Offensive Trades ...	12	0	0	—	These are all fried fish shops.
Music Halls, Cinemas, etc. ...	3	0	0	—	—
Premises Disinfected ...	56	—	—	—	—

6. PUBLIC HEALTH STAFF.

	Borough of Redcar.	Guisborough Rural District.	Guisborough Urban District.	Loftus Urban District.	Salburn-by-the-Sea Urban District.	Skelton & Brotton Urban District.
A. WHOLE-TIME OFFICERS.						
Medical Officer of Health ...						
Sanitary Inspectors ...	Mr. W. Tutin Mr. R. Milligan from July 21	Mr. G. W. Shipley*	Mr. R. H. Kilburn*	Mr. P. H. Audsley*	Mr. T. Young*	Mr. A. R. Crauner* until March 31 Mr. A. Cummings from April 1
B. PART-TIME OFFICERS.						
Medical Officers to Maternity and Child Welfare Centres	—	—	Dr. Bland Dr. Stainthorpe	Dr. Stephen	—	Dr. Botham Dr. Caldwell Dr. Howe

* Also Surveyor for the district concerned.

7. HOUSING.

	Borough of Redcar.	Guisborough Rural District.	Guisborough Urban District.	Loftus Urban District.	Salburn Urban District.	Skelton & Brotton Urban District.
New Houses erected in 1925						
{ Total ...	381	15	2	1	66	0
{ With Subsidy ...	115	13	2	0	66	3 Temporary Buildings 0
{ Without Subsidy ...	50	2	1	1	0	0
{ Under District Council Scheme ...	216	0	0	0	19	0
Houses inspected under Public Health or Housing Acts ...	33	0	27	21	6	232
Houses inspected under Housing Regu- lations ...	27	0	9	3	6	232
Houses found unfit for habitation ...	10	0	0	0	0	0
Houses found requiring repair ...	50	0	9	8	6	190
Houses repaired in consequence of informal notices ...	50	0	7	5	3	121
Proceedings under Sec. 3 of the Housing Act 1925						
(1) Houses respecting which formal notices were served ...	0	0	2	3	3	10
(2) Houses rendered fit by Owners ..	0	0	2	3	3	4
(3) Houses rendered fit by L. A. ...	0	0	0	0	0	3
(4) Houses voluntarily closed by Owners	0	0	0	0	0	0
Proceedings under Public Health Acts :						
(1) Houses respecting which formal notices were served ...	0	0	0	0	6	5
(2) Houses repaired by Owners ...	0	0	0	0	6	4
(3) Houses repaired by L. A. ...	0	0	0	0	0	0
Proceedings under Secs. 11, 14, 15 of the Housing Act 1925						
Closing Order made ...	10	0	0	0	0	0
Other action ...	0	0	0	0	0	0

8. COMPARATIVE SUMMARY OF VITAL STATISTICS.

	Skelton & Brotton Urban District.	Loftus Urban District.	Guisborough Urban District.	Guisborough Rural District.	Borough of Redcar.	Salburn- by-the-Sea Urban District.	England and Wales.
Percentage of houses in 1921 with fewer than six rooms ...	87	86	84	75	69	35	(70)
Birth-rate { 1925 ...	18.7	17.7	21.0	18.7	17.2	12.0	18.3
{ 1924 ...	20.6	19.9	20.9	20.0	19.1	11.7	18.8
Death-rate { 1925 ...	10.4	10.4	14.2	11.9	11.2	13.1	12.2
{ 1924 ...	11.9	9.2	14.6	13.9	12.0	11.7	12.2
Infant Mortality Rate { 1925 ...	50½	66½	82	110	81	43½	75
{ 1924 ...	77	43	68	132½	75	66½	75

Comparisons between localities are open to many fallacies: differences in social composition (such as are indicated in the first row of the table) must be taken into consideration; further, before comparing birth-rates a knowledge of the relative proportion of young married women in the districts is necessary, or before comparing death-rates, information as to the relative numbers of people at ages when death is less avoidable.

