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# Report

FOR THE YEAR 1902,

PRESENTED TO THE

## Spilsby Rural District Council

BY

FRANCIS J. WALKER, M.D., L.S.Sc.,

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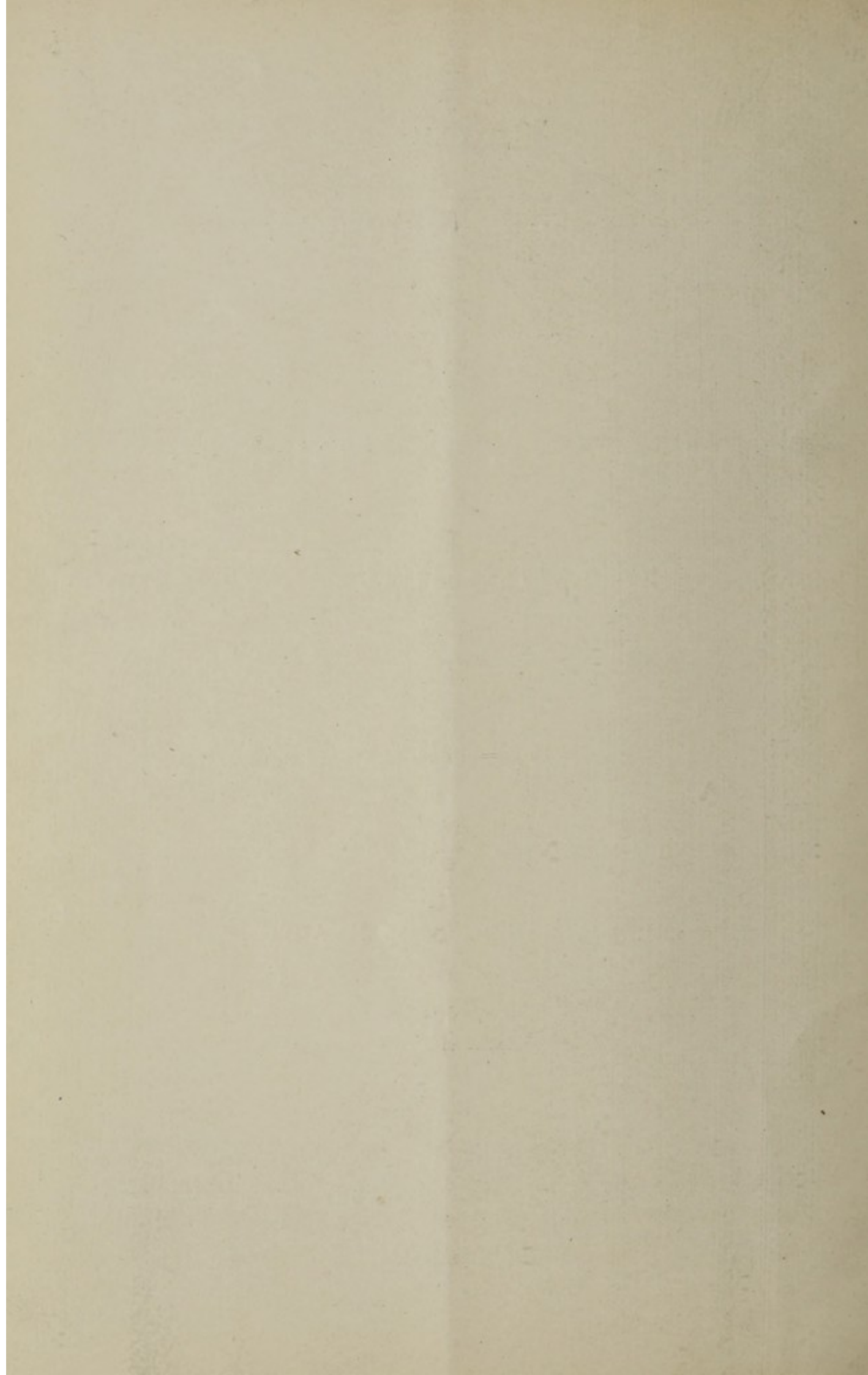
MEDICAL OFFICER OF HEALTH.

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SPILSBY :

W. E. PARSONS, PRINTER, MARKET PLACE.

1903.



TO THE

**Spilsby Rural District Council.**

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GENTLEMEN,

As your Medical Officer of Health I beg to lay before you my Report for the year ending December 31st, 1902.

From a statistical point of view the year just passed may be looked upon as satisfactory, for, although the birth-rate remains about the same, the death-rate has diminished and is 1·46 below the average of the past 6 years. The Zymotic death-rate is remarkably low, being only ·29 per 1000 population. The unsatisfactory feature is the great increase in the prevalence of Scarlet Fever, which is responsible for 175 notifications out of a total of 201, a total which is nearly double that of any year since the notification of infectious diseases became compulsory.

I will now proceed to give a detailed account of the various infectious diseases that have occurred in the district during the year, then speak of the sanitary work, and conclude with the vital statistics.



## EPIDEMIC DISEASES.

SMALL POX.—In my last Report I alluded to the outbreak of Small Pox which prevailed in the Metropolis, and ventured to predict both its continuance and extension, which prediction unfortunately came true. Under such circumstances it clearly behoved your Authority, in common with all others, to be on the alert and in a state of preparedness to meet an invasion of the disease. To this end re-vaccination, possibly the most efficacious means, was extensively carried out, and the isolation hospital, which had been erected at the behest of the Local Government Board, and which was standing in the Workhouse grounds, was overhauled and made ready for removal. On the evening of April 15th I received a notification from Wainfleet that a case of Small Pox had broken out in that town, and I at once visited the locality. I found the patient to be a woman, who was a teacher in the National School, living with her two children in a small house in John Street, in the centre of the town. She had been taken ill on the night of April 11th, after finishing school. The following day being Saturday and a holiday she stayed at home, and the same applied to Sunday. On Monday, being distinctly worse, she called in a medical man, and he on his visit the following day, finding the characteristic eruption, at once notified to me by telegram. As she was living in a somewhat crowded locality I immediately decided to have her and her children removed as



speedily as possible to an isolation hospital. Steps were therefore promptly taken to convey our hospital to Wainfleet, a distance of ten miles, and have it re-erected in the middle of a field on the outskirts of the town. This was successfully accomplished, and the woman and her two children were with every care transferred into the building. A woman, who was nursing the patient at the time of my first visit, was retained as nurse, and remained with her in the hospital until all fear of contagion was removed. The two children, aged 4 and 2, had each of them good marks of primary vaccination; and the woman herself had been vaccinated in infancy, but not since. The children stayed with the mother in the hospital during the whole time without taking the disease, doubtless their primary vaccination having been sufficient to protect them. The patient and her two children were discharged from the hospital on June 4th, and since then we have heard no more of Small Pox in this or any other part of the district. It is somewhat difficult to explain with certainty the source of the contagion in this case. The woman had not been out of Wainfleet for some months, and there was not the slightest suspicion of anything of the nature of Small Pox being in the neighbourhood. She had however been in the habit of receiving second-hand clothes from away, and some of this clothing had come from Tring. On enquiry I found that 5 cases of Small Pox were notified on March 25th as existing in that town. It therefore seemed possible that these clothes may have been the carriers



of the contagion. After the woman's removal to the hospital her home was thoroughly stoved on two occasions with sulphur, and the bedding, carpets, and curtains were destroyed. Subsequently the house was thoroughly cleansed throughout and limewashed.

As modified Small Pox, that is Small Pox in a person who has been successfully vaccinated, may be sometimes mistaken for Chicken Pox, your Authority availed themselves of the power given to them by sub-section 6 section 7 of the Infectious Diseases (Notification) Act, 1889, and added for a period of 12 months Chicken Pox to the list of diseases notifiable, and since then I have received 12 notifications of Chicken Pox, but in no instance was the milder mistaken for the more serious complaint.

MEASLES.—Except for an epidemic in August in Welton, this disease did not come to my knowledge during the year, and no death was returned under this heading.

SCARLET FEVER.—This has indeed been the great trouble of the year, and in almost every month notifications were received. These notifications amounted to a total of 175, but out of these only 2 deaths were recorded, and in each instance from brain complications. These figures go to show that the type of the disease was mild, but this again cuts two ways. In the first place it tends to drive away alarm, and in the second to foster ignorance and



negligence. The incidence of the complaint may for purposes of classification be considered as connected with five principal centres.

I. *Spilsby*.—Here 30 cases were notified. The cause of this outbreak was probably imported from Alford, where a servant girl had been residing, and falling ill with Scarlet Fever, was removed to her home in Spilsby. During her convalescence a child living near contracted the disease, which subsequently spread to 29 other persons.

II. *Wainfleet*.—Here there were really two outbreaks. The earlier one began in January, and was clearly traceable to a family of 6, who had the disease towards the end of the previous year but who had failed to notify it or to take any precautions towards preventing its spread. Altogether 35 cases followed from this origin, 30 in Wainfleet and 5 in the neighbouring village of Friskney. The later one began in August and extended to 15 cases. Though unable to closely trace the cause I cannot but think that both these outbreaks were connected the one with the other, and that the connecting link had partly to do with unrecognised cases and partly with the fact that the period after which a patient from Scarlet Fever ceases to give off infection is both uncertain and various.

III. *Sutton*.—Here again there were two outbreaks. The first commenced in February and was probably imported from the neighbouring village of Trusthorpe, in the Louth Rural District, and ended



on the last day of March, and accounted for 20 notifications. Luckily nothing more was heard of this disease in Sutton during the summer months, and so the success of a seaside resort was not interfered with, but the disease did extend to the neighbouring parish of Markby, where during the month of April there were 5 cases. In November the second outbreak took place, and was confined to 4 houses, and altogether 10 cases were notified. This was probably entirely unconnected with the earlier outbreak.

IV. *Toynton*.—Here possibly some mild cases existed in the early part of the year, but it was not until April that a case was notified. Most probably these earlier cases were connected with the Spilsby outbreak. The disease continued to crop up in a mild form for several months, and altogether 19 notifications were received.

V. *Burgh*.—The disease broke out as late as November, and I am inclined to think that the origin had nothing to do with the previously mentioned epidemics, but was imported. The number notified was 12.

These 5 epidemics accounted for 155 out of the 175 notifications. The remainder referred to single cases in Skendleby, Orby, Hogsthorpe, Sloothby, and Bolingbroke, to two in one house at Cumberworth imported from Sheffield, to two in Willoughby but in different houses and at different times, and to seven in one family at Welton.



In every instance on the receipt of a notification the patient was visited without delay, and strict injunctions were given with regard to isolation, disinfectants were freely supplied and detailed instructions as to their use were given, and when convalescence was sufficiently advanced, and it was safe, the houses were stoved with sulphur.

WHOOPING COUGH.—In May two cases occurred in Hundleby, and on investigation it was found that the disease had been imported from Bedford. Here no other case followed. In October a child aged 13 months died from Whooping Cough at Claxby, and another death occurred at Cumberworth in December, the victim being 8 years old. In the same month a more serious outbreak arose in South Ormsby, several children being attacked, but in no case fatally; from enquiry I am led to believe the disease was imported from Grantham.

DIPHTHERIA.—I received 12 notifications of Diphtheria during the year, but they all referred to single cases, the disease never spreading to others, and this notwithstanding there were often several children living in the same house. As a rule the cases were very mild, though unfortunately in two instances death occurred. In one of these the child had only just recovered from Whooping Cough. It is a somewhat interesting geographical fact that 11 out of the 12 cases occurred in a limited district bounded on the north by Orby and on the south by Friskney. Virtually all the rest of the district was free from the disease.



ENTERIC FEVER.—This disease has not given much trouble during the year, for only 3 cases have been notified. They occurred one in Bolingbroke in May, and two in Friskney in September. The Bolingbroke case was obscure, and after investigation I failed to find any fact that would throw light upon its origin. The two Friskney cases, although occurring about the same time, had no connection with each other. One was mild in character and the origin difficult to trace; but the other was more severe, and facts relating to it were more clearly defined. The man was taken ill at Swineshead on September 12th, and came home on September 20th. On the day this man was taken ill, his master with whom he had been living died from Enteric Fever, and there can therefore be no doubt as to the source of the disease in this case. The 3 patients recovered, and therefore we are to be congratulated on the unusual circumstance that no death from Enteric Fever was registered in this district during the year.

ERYSIPELAS. — Nine notifications were received, which is slightly below the average. They all referred to isolated cases, and no death was returned.

No fatal case of Influenza, Puerperal Fever, or Diarrhœa was reported.

The number of notifications received during 1902 was 201, a number nearly double that of any previous year, and 120 above the average of the last 6 years. Their distribution under their several headings will be seen in the following table :—

Year.	Small Pox.	Scarlet Fever.	Diphtheria.	Membranous Croup.	Typhus Fever.	Enteric or Ty- phoid Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever	Cholera.	Erysipelas.	Total.
1896		31	20			4	1		1		15	72
1897		27	26			7					9	69
1898		8	19	1		6	1		1		17	53
1899		37	19			13			1		14	84
1900		71	9			5			1		21	107
1901		44	41			10			1		7	103
1902	1	175	12			3	1				9	201

## SANITARY WORK.

SPILSBY.—A new drain of nine-inch sanitary pipes was laid straight down Spence Street in place of an old barrel tunnel, which was found to be small in calibre and circuitous in route.

HOGSTHORPE.—Inefficient drainage at the north part of the village having brought about a nuisance,



a new sanitary pipe drain was taken down Mumby Road, and the outfall thus removed about 75 yards further away.

SUTTON.—Complaints were received from time to time about the insufficient purification of the sewage of this place where it enters the Orr Lees Drain, so I am afraid the time has now come when some alterations and improvements in the system of drainage must be taken in hand. Eight years ago when Sutton was much smaller than it now is, sewage was taken into a deposit tank and then disinfected, and the effluent allowed to run into the before mentioned drain. Since then the population has much enlarged, especially during the summer months when the influx of visitors to this seaside resort probably increases it four-fold. As a result of this, the purification of the effluent has now become well nigh impossible, and in spite of all we can do, complaints have been made not only by dwellers near the outfall but also by the Louth Rural District Council in whose district the adjoining village of Trusthorpe, through which the Orr Lees Drain runs, is situated. The beginning of any approach to a system of drainage for Sutton took place in 1886, when a number of small sewers were laid and allowed to discharge themselves eventually into the Orr Lees Drain. As the place developed, this arrangement proved unsatisfactory, and in 1895 an intercepting tank was built for the purpose of purifying the sewage before it was discharged into an



open drain. Of late years even this has failed to satisfy the needs of the locality, for fresh houses are constantly being built, and these being supplied with water closets rather than earth closets, the amount of sewage has increased in a still greater proportion. The present tank is not sufficiently capacious to retain the sewage long enough to allow of its purification, and the drains in connection with it are small and have but little fall. Taking all these circumstances into consideration, I do not think it would be wise to try to remedy matters by adopting any slight modification of the present arrangement, but I do recommend that a proper system of sewers be provided for Sutton, and that the effluent be treated on land.

FRISKNEY CEMETERY has been completed, and the ground has already been used for interments.

WAINFLEET is still wanting sufficient burial ground, for no addition has as yet been made to Northolme Churchyard.

The following is the Surveyor and Inspector's Report for 1902:—

Number of nuisances reported	...	...	...	78
Number abated without formal notice	...	...	...	31
Number of formal notices served	...	...	...	47
Number unabated at the close of the year	...	...	...	2
Total number abated	...	...	...	76
New drainage to houses	...	...	...	12
Defective drainage to houses remedied	...	...	...	19
Houses cleansed and disinfected	...	...	...	89



Houses reported unfit for human habitation	...	5
Houses placed in habitable repair	... ..	4
Houses pulled down and rebuilt	... ..	1
New water supply to houses	... ..	5
Wells sunk and supply improved	... ..	4
Wells sunk for new water supply	... ..	3
Samples of water collected for analysis	... ..	13
New earth closets erected	... ..	14
New water closets erected	... ..	3
Water closets repaired and ventilated	... ..	3
Old privy vaults emptied, cleansed, and filled in, and earth closets inserted	... ..	12
New dust bins erected	... ..	7
Old dust bins repaired and covered in	... ..	6
Cases of overcrowding reported	... ..	4
Cases of overcrowding abated	... ..	4
Legal proceedings taken	... ..	2
Schools cleansed and disinfected	... ..	5
Slaughter-houses inspected	... ..	15
Slaughter-houses drained and ventilated	... ..	3
Dairies, cowsheds, and milkshops inspected	... ..	31
Cowsheds drained and ventilated	... ..	5

Buildings erected under Bye-laws:—

Spilsby	... ..	3
Burgh	... ..	2
Chapel	... ..	1
Hundleby	... ..	3
Hogsthorpe	... ..	1
Sutton	... ..	9
Wainfleet	... ..	2
Winthorpe	... ..	17

Buildings erected in other parts of the district ... 14

The four cases of overcrowding were abated, three by reducing the number of inmates, and one by the family removing to a larger house.



During the year I have analysed 13 samples of drinking water, and the results were that in 4 cases the water was classed as good, in 3 suspicious, and in 6 bad.

Legal proceedings were taken in two cases— (1) against a man for failing to notify cases of Scarlet Fever in his family; he was convicted and fined with costs £2 10s. 0d. (2) against a woman for exposing herself in the public street while suffering from Scarlet Fever; she was convicted and fined with costs £1 15s. 0d.

Additional duties have been imposed upon your Officials by the passing of the "Factory and Workshop Act, 1901." By this Act it becomes the duty of District Councils to see (a) that all factories in which more than 40 persons are employed are provided with means of escape in case of fire, (b) that all workshops and workplaces are kept in a sanitary condition, and (c) that all bakehouses conform to certain new and special regulations. A register of all workshops situated in the district has to be kept, and the Medical Officer of Health is required in his Annual Report to refer specifically to the administration of the Act so far as matters under the charge of his Council are concerned, and to send a copy of his Report on the subject to the Secretary of State. I have endeavoured since the Act came into force to find out the workshops, workplaces, and bakehouses situated in this district, but as the Act must take some little time to get into



working order, I have commenced by inspecting bakehouses. Up to the present, I have visited 37 bakehouses, and for the most part have found them in a satisfactory state. Five were defective with regard to their sanitary arrangements, and these are being remedied. More scrupulous care, especially with regard to frequent limewashing was enjoined in many instances. As to factories, there are none in this district to which the Act applies. Another important provision of this new Act is that if any inmate of a house, in which home work is done, is suffering from any notifiable infectious disease, the Council may serve notice on the person giving out the work to prohibit him from so doing during such time as the Council may fix. This will give us increased powers to aid in preventing the spread of such diseases as Scarlet Fever and Diphtheria.

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### VITAL STATISTICS.

In 1902 the Births were 481 and the Deaths 298. The Births were 11 less than last year, but equalled the average of the last 6 years. The Birth-rate was 23·66 per 1000 population. The Death-rate was 14·66, which is 1·46 below the average of the last 6 years. The Birth-rate in England and Wales in 1902 was 28·6 per 1000 of the population, which is ·1 per 1000 higher than the rate in 1901, but lower than that in any other year on record; compared with the average in the 10 years 1892–1901 the Birth-rate shows a decrease of 1·0 per 1000.



The Death-rate in 1902 was 16·3 per 1000, and is the lowest on record; compared with the average rate in the 10 years 1892–1901 the Death-rate shows a decrease of 1·6 per 1000.

The class of Zymotic diseases contributed 7 to the total death list, and these deaths were put down to Diphtheria 2, Whooping Cough 2, Scarlet Fever 2, and Varicella 1, and they have already been alluded to. The Death-rate per 1000 of the 7 principal Zymotic Diseases amounted to ·29. The Death-rate for England and Wales for the same Zymotic diseases was 1·64.

The Births were distributed according to quarters as follows :—

	LEGITIMATE.				ILLEGITIMATE.			
	MALES.		FEMALES.		MALES.		FEMALES.	
Quarter ending March 31st	45	...	62	...	5	...	1	
Quarter ending June 30th	64	...	68	...	1	...	5	
Quarter ending Sept. 30th	57	...	53	...	3	...	3	
Quarter ending Dec. 31st	54	...	54	...	2	...	4	
	<hr/>		<hr/>		<hr/>		<hr/>	
	220		237		11		13	
	<hr/>		<hr/>		<hr/>		<hr/>	
Total Legitimate	...	457	Total Males	...	...	231		
„ Illegitimate	...	24	„ Females	...	...	250		
	<hr/>				<hr/>		<hr/>	
Grand Total	481				Grand Total	481		
	<hr/>				<hr/>		<hr/>	

In filling up the Tables relating to Vital Statistics issued by the Local Government Board and added as an appendix to this Report, I have taken the liberty of altering the averages from 10 years to 6, as it is only for that number of years that the district has been as it is now with regard to area.



TABLE of DEATHS from the Seven Principal Zymotic Diseases during the last ten years.

	1893.	1894.	1895.	1896.	1897.	1898.	1899.	1900.	1901.	1902.
Small Pox ...	—	—	—	—	—	—	—	—	—	—
Measles ...	4	3	3	—	2	1	1	1	—	—
Scarlet Fever ...	—	5	2	1	—	—	—	4	—	2
Diphtheria ...	—	3	3	1	2	3	1	1	10	2
Whooping Cough ...	8	2	1	1	2	9	—	4	1	2
Fever, Typhus ...	—	—	—	—	—	—	—	—	—	—
" Typhoid or Enteric ...	3	1	2	3	1	1	1	—	1	—
" Other or doubtful ...	1	—	—	—	—	—	—	—	—	—
Diarrhoea and Dysentery ...	3	—	1	1	1	—	2	3	3	—
Total Deaths from the 7 principal Zymotic Diseases ...	19	14	12	7	8	14	5	13	15	6
Deaths from other causes ...	369	310	325	290	313	363	349	316	299	292
Total Deaths ...	388	324	337	297	321	377	354	329	314	298
Death-rate per 1000 Zymotic Diseases	·79	·58	·49	·32	·37	·66	·23	·61	·73	·29
Death-rate per 1000 from all causes	16·10	13·53	13·82	13·88	15·13	17·92	16·97	15·91	15·22	14·66
Death-rate for England and Wales	19·2	16·6	18·7	17·1	17·4	17·6	18·3	18·3	16·9	16·3

Were it not for the somewhat extensive prevalence of Scarlet Fever, this Report would have been in every respect satisfactory. We find however that epidemic diseases such as this seem to follow a certain law of periodicity, and as a consequence to reappear after a longer or shorter interval. So far as our recent epidemic was concerned, the gratifying feature lies in the fact that, considering the number of cases, the mortality was so low.

I have the honour to be, Gentlemen,

Your obedient Servant,

FRANCIS J. WALKER.

SPILSBY,

February, 1903.



TABLE I.—For Whole District.

YEAR.	Population estimated to Middle of each year.	BIRTHS.		DEATHS UNDER ONE YEAR OF AGE.		DEATHS AT ALL AGES. TOTAL.		DEATHS IN PUBLIC INSTITUTIONS.	Deaths of Non-residents registered in District.	Deaths of Residents registered beyond District.	DEATHS AT ALL AGES. NETT.	
		Number.	Rate.*	Number.	Rate per 1,000 Births registered.	Number.	Rate.*				Number.	Rate.*
1892.	24,249	595	24.53	51	86.0	349	14.39	26	1	0	348	14.39
1893.	24,090	570	23.66	75	131.6	388	16.10	13	0	0	388	16.10
1894.	23,950	545	22.75	52	95.4	324	13.53	17	0	0	324	13.53
1895.	24,382	560	22.96	62	110.0	337	13.82	16	0	0	337	13.82
1896.	21,385	489	22.86	46	94.2	297	13.88	21	5	0	292	13.46
1897.	21,208	459	21.64	47	102.4	321	15.13	16	3	0	318	14.99
1898.	21,031	491	23.34	59	120.1	377	17.92	26	1	0	376	17.87
1899.	20,854	508	24.36	62	122.0	354	16.97	26	2	0	352	16.87
1900.	20,677	452	21.86	60	111.0	365	17.62	17	2	0	327	15.81
1901.	20,500	492	24.00	45	89.4	314	15.22	21	3	0	311	15.17
Averages for years 1897-1902.	20,942	480	23.01	51	106.5	338	16.12	21	3	0	330	15.69
1902.	20,323	481	23.66	43	89.4	298	14.66	20	1	1	298	14.66

\* Rates calculated per 1,000 of estimated population.

TABLE II.

NAMES OF LOCALITIES.	SPILSBY.				ALFORD.				WAINFLEET.				BURGH.				STICKNEY.			
	Population estimated to middle of each Year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each Year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each Year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each Year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each Year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.
1892 ..	6410	178	117	13	7058	149	97	16	4904	132	56	9	3628	74	52	6	2249	62	27	7
1893 ..	6360	160	128	22	7032	153	106	24	4872	127	65	18	3578	71	61	9	2248	60	28	2
1894 ..	6310	142	87	15	7012	159	92	13	4843	109	73	14	3533	74	46	7	2252	61	26	3
1895 ..	6260	141	112	18	6992	150	92	14	4814	126	59	15	3488	78	38	8	2828	65	36	7
1896 ..	6212	134	128	15	4149	93	41	9	4752	123	52	12	3502	68	47	5	2770	59	29	5
1897 ..	6167	134	87	8	4121	103	67	11	4679	96	63	8	3538	68	69	9	2703	59	35	11
1898 ..	6127	126	129	19	4065	91	58	4	4648	113	88	23	3539	83	68	4	2652	78	34	9
1899 ..	6083	130	107	23	4015	90	59	6	4613	124	82	13	3541	91	67	10	2602	73	39	10
1900 ..	6039	123	112	12	3963	73	64	10	4582	114	64	11	3542	76	44	7	2551	66	45	13
1901 ..	5994	148	94	15	3919	80	45	3	4539	108	69	9	3543	88	63	8	2505	68	40	9
Averages of Years 1896, to 1901.	6104	132	109	15	4039	87	56	7	4635	113	70	12	3534	80	59	7	2630	67	37	9
1902 ..	5949	113	112	17	3875	95	46	6	4496	114	55	10	3543	93	58	6	2460	66	27	4



TABLE III.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.						TOTAL CASES NOTIFIED IN EACH LOCALITY.				
	At all Ages.	At Ages.—Years.					SPILLSBY.	ALFORD.	WAINFLEET	BURGH.	STICKNEY.
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.					
Small-pox ...	1	...	...	...	...	1	...	...	1	...	...
Cholera ...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria ...	12	...	3	4	3	2	...	1	8	3	...
Membranous croup ...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas ...	9	1	...	...	2	...	3	...	...	3	3
Scarlet fever ...	175	...	24	95	35	19	46	48	62	18	1
Typhus fever ...	...	...	...	...	...	...	...	...	...	...	...
Enteric fever ...	3	...	...	...	3	...	1	...	2	...	...
Relapsing fever ...	...	...	...	...	...	...	...	...	...	...	...
Continued fever ...	1	...	...	1	...	...	...	1	...	...	...
Puerperal fever ...	...	...	...	...	...	...	...	...	...	...	...
Plague ...	...	...	...	...	...	...	...	...	...	...	...
Totals ...	201	1	27	100	43	22	50	50	73	24	4





## APPENDIX.

## RAINFALL FOR 1902.

Month.	No. of days on which '01 or more fell.	Amount in inches.	Average for last 28 years.
January .....	14	1·04	2·02
February .....	16	1·42	2·02
March .....	17	1·63	1·74
April .....	15	1·66	1·71
May .....	22	3·65	2·01
June.....	15	3·68	1·83
July .....	11	1·82	2·70
August.....	15	3·88	2·78
September .....	14	1·08	2·61
October ... ..	23	2·76	3·32
November .....	12	1·77	2·77
December .....	15	1·60	2·62
Total .....	189	25·99	