

Contributors

Swinton and Pendlebury (England). Borough Council.

Publication/Creation

1904

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Swinton and Pendlebury Urban
Sanitary District.

Annual Report

OF THE

Medical Officer of Health

AND THE

Inspector of Nuisances.

1904.



SWINTON AND PENDLEBURY URBAN SANITARY
DISTRICT.

ANNUAL REPORT
OF THE
Medical Officer of Health
FOR THE YEAR 1904.

TO THE CHAIRMAN AND MEMBERS OF THE COUNCIL.

GENTLEMEN,

The total number of Births registered in the district
for the year 1904 was as under :—

North Ward ... Males 118, Females 123 = 241	Total for Swinton
South Ward ... Males 105, Females 98 = 203	444
West Ward ... Males 125, Females 121 = 246	Pendlebury
East Ward ... Males 114, Females 91 = 205	451
Grand total...	895
(Males 462, Females 433).	

The nett total number of Deaths, *i.e.*, inclusive of those
occurring outside the district (which were 43) was 598. The
deaths belonging to the district which occurred outside it
were as under :

Ladywell Sanatorium ... Swinton 1, Pendlebury 2 = Total 3	
Hope Hospital „ 3 „ 3	
In Salford Borough (other than the above) „ 7, „ 10 „ 17	

Manchester Hospitals and

(ditto) District, Swinton 3, Pendlebury	1 = Total	4
Barton Union Workhouse	,, 13,	,, 13
Clifton District	,, 2	,, 2
Borough of Leeds	,, 1,	,, 1

In addition to these were the deaths of two children (from Swinton) at Pendlebury Children's Hospital, making a total of 45, to be added to the purely district total of 553.

In 1902 these "non-resident" deaths numbered 62, and in 1903 there were 28. The whole of the "non-resident" deaths will be found allocated to the respective localities, and separated into age and mortality groups in Table IV. appended to this report.

STATEMENT OF POPULATION, BIRTH RATES AND RATES OF MORTALITY, ALSO OF NUMBER OF DEATHS UNDER ONE YEAR, FOR SEPARATE LOCALITIES, 1904.

	Whole District.	SWINTON.	PENDLEBURY.	North Ward.	South Ward.	West Ward.	East Ward.
Estimated Population (middle of 1904) ..	28,200	15,400	12,800	7,720	7,680	7,450	5,350
Birth Rate (per 1000 living)	31'5	28'8	35'2	31'2	26'4	33	38'3
Nett Death Rate	21'05	18'1	24'8	18'7	17'5	23'7	26'3
Infant Death Rate (per 1,000 Births) ..	224'7	184'6	263'8	215'7	147'7	272'3	253'6
* Zymotic Death Rate	4'96	3'9	6'3	4'1	3'5	6'5	6'
Respiratory Death Rate ..	5'7	4'8	6'8	5'3	4'4	6'1	7'6
Total Deaths under 1 year.	201	82	119	52	30	67	52

* Smallpox, Measles, Scarlet Fever, Diphtheria, Whooping Cough, Enteric Fever and Diarrhoea.

|| Bronchitis, Pneumonia, Pleurisy, Phthisis, and other Inflammatory Diseases of the Lungs.

The four death rates enumerated above, and particularly the three latter, show a very large increase on several years past, as will be seen from the following comparative table of the years 1899-1903 :—

YEAR.	NORTH WARD.				SOUTH WARD.				WEST WARD.				EAST WARD.			
	General Death Rate.	Infant Death Rate.	Zymotic Death Rate.	Respiratory Death Rate.	General Death Rate.	Infant Death Rate.	Zymotic Death Rate.	Respiratory Death Rate.	General Death Rate.	Infant Death Rate.	Zymotic Death Rate.	Respiratory Death Rate.	General Death Rate.	Infant Death Rate.	Zymotic Death Rate.	Respiratory Death Rate.
1899.....	17.12	195.4	4.12	4.5	14.56	174.1	2.71	3.58	19.59	217.7	2.58	5.15	18.46	175.3	1.53	6.15
1900.....	16.8	178.1	2.9	4.8	14.1	165.6	2.9	3.9	20.1	227.5	3.7	5.1	20.9	227.8	1.9	6.1
1901.....	19	260	4.99	5.14	15.8	179	2.86	2.86	21.7	205	4.91	5.89	22.1	190.4	4.33	4.76
1902.....	17.10	124.5	2.5	5.26	18.44	169	3.24	4.15	20.97	154.13	4.16	8.05	18.08	138.3	4.25	5.10
1903.....	18.05	105.05	1.55	5.06	12.5	127.85	1.57	3.94	18.10	208.8	1.62	7.16	18.67	187.8	2.07	3.01
5 years' Average..	17.6	173.4	2.8	4.7	15	123.6	2.8	3.9	19.9	202.9	2.9	6.7	20.1	183.6	2.6	5.1
1904.....	18.7	215.7	4.1	5.3	17.5	147.7	3.5	4.4	23.7	272.3	6.5	6.1	26.3	253.6	6.01	7.6

From this table it will be seen that not only the general death rate, but also the "Zymotic," "Respiratory," and infant death rates were very much higher in 1904 than those for the quinquennial period, 1899-1903.

The increase in the Zymotic rate has been due to the unusual number of deaths, not only from measles and whooping cough, but also from diarrhoea, which latter disease caused a very high mortality amongst infants in the course of the exceptionally dry summer of the past year. It will be observed that these higher mortality rates have been general throughout all the wards of the district, and that the increase, with few exceptions, has been pretty evenly distributed over its whole area.

The comparatively high death rate of the district for the year 1904 (21·05), as will be seen from Table IV. (page 25 of this report), has been largely due to the higher percentage of deaths up to five years of age, and, to a less extent, to those of 65 years and upwards. The mortality from measles, whooping cough, and diarrhœa has been much in excess of many previous years, and this has necessarily had an effect on the general rate. This fact should be mentioned here, because the diseases in question are not notifiable, and are, moreover, largely due to causes over which the Sanitary Authority has little control.

The same remark applies to diseases of the lungs, such as bronchitis, pneumonia and pleurisy, upon which I have commented at a later stage of my report (pages 16-18). It will be seen, on reference to Table IV. before mentioned, that 76 per cent. of the total number of deaths from bronchitis and pneumonia occurred at the two age periods named above.

The total number of cases of infectious disease notified to me during the year was (exclusive of "non-resident" cases at the Schools and Children's Hospital) 349, as compared with 431 in 1903, 670 in 1902, 430 in 1901, 341 in 1900, and 241 in 1899 (a quinquennial average of 423).

Of the total number, 60·4 per cent. were those of scarlet fever; there were 47 cases of diphtheria (a much smaller number than in some recent years), 20 of small-pox, and 41 of enteric fever. The percentage mortality from scarlet fever was slightly over 6 per cent., that from diphtheria slightly under 15 per cent., whilst that from enteric fever reached the somewhat high figure of 26 per cent.

Remarks *re* specific infectious diseases :—

Small-pox.—The first outbreak of this disease occurred just prior to the end of September, and the first case was that of a female mill worker, the nature of whose attack was not recognised for three days from the outset, and despite all our efforts to trace its source we were unable to do so. Two other workers in the same mill were effected, and five cases

were directly traceable to the first one, making a total of seven. The last case from this outbreak was on October 11th. The first case of the second outbreak occurred on November 25th, and was traceable to one which at first was thought to be chicken-pox in a boy aged 13, who had worked in Manchester. Twelve other cases in ten families were more or less directly traceable to the first one, making a total number of 13 cases from November 25th to December 31st, or 20 for the whole year. The means adopted in dealing with the outbreaks were :

1. Early removal to Hospital of the patient.
2. The keeping in quarantine of the other members of the household for not less than ten days (and in most cases 14).
3. Disinfection of clothes and other belongings of the patient, articles of furniture, bedding, etc.
4. Stripping and thorough disinfection of the walls and ceilings of affected dwellings.
5. Vaccination of all known "contacts," and a watchful and effective supervision over these, wherever discoverable.
6. There were also issued precautionary notices to the public, setting forth the nature of the early symptoms of the disease, the advisability of seeking medical advice at an early stage of any such symptoms during the progress of the epidemic, and the importance attached to efficient vaccination as a strong protective against the disease.

It ought to be here stated that out of the 20 cases referred to three (an adult female and two children each aged eight) were thought by the hospital authorities to be of a doubtful character. At the time the cases were sent, however, there was little doubt on the part of the medical men called in to see the patients, and it may be urged that during the progress of an epidemic of small-pox similar instances not unusually

occur. That no serious consequences may ensue the hospital authorities have erected an "observation" ward in their institution, to which cases of a doubtful nature are at first admitted. By this means a due and proper safeguard is provided. It should be added that 15 of the 20 cases occurred in Swinton North Ward.

Scarlet Fever.—The total number of cases reported (not including the Children's Hospital and the Industrial Schools) was 198, as compared with 298 in 1903, 373 in 1902, 176 in 1901, 219 in 1900, and 66 in 1899, a quinquennial average of 226; so that both in regard to the total number of infectious cases and to that of scarlet fever the year 1904 shows a very favourable decrease.

The number of cases removed to hospital for treatment is shown on Table III of the Local Government Board tables herewith appended. They were small-pox 20, scarlet fever 27, diphtheria 10, and enteric fever 5. The largest proportion of the cases of scarlet fever occurred in Swinton wards, the North Ward being 70, and South Ward 55—total 125; the periods of the year in which the disease was most prevalent being its first and last quarters, the latter being the heaviest of all.

Measles.—During the second quarter of the year this disease was very prevalent in the district, no less than 24 out of the total of 40 deaths from the disease having occurred during the quarter ended July 2. This fact having come under the notice of the Local Government Board, a special report thereupon was requested, which was duly forwarded to that body. The report contained a detailed statement setting forth the probable cause of the outbreak, the number of deaths, the areas chiefly affected, and the steps which had been taken in endeavouring to check the spread of the disease. Out of the total number of deaths for the year (40) 13 occurred in Swinton (chiefly in the South Ward) and 27 in Pendlebury (chiefly in East Ward). The ward totals were

North 3, South 10, West 11, East 16. The age mortality was greatest between the ages of one and five, no less than 75 per cent. having occurred between these ages. I would remark here that as a very large percentage of the children attacked had not been attending school—as being under school age—the question of school closing on anything like a general scale did not arise, but in dealing with this matter (as also in the case of scarlet fever) it was thought advisable to proceed on the lines suggested by the Education department and its advisers, and to resort, rather, to the exclusion of particular scholars. Special precautionary notices were, at the time of its prevalence, issued to the public calling attention to the steps necessary to be taken in preventing the spread of the disease, but unfortunately these are not so seriously regarded as they should be. There appears to be an ever-increasing difficulty in impressing the public mind with an adequate idea of the great fatality often attending this common disease of childhood, and it is no unusual thing to find it made extremely light of. Many take no care whatever to prevent their children contracting what they persist in regarding as almost incidental to infant life, and often thoughtlessly and needlessly expose them to the risk of infection. The consequence is, as the result of 1904 shows, often deplorable.

Whooping Cough.—From this disease 22 deaths occurred—one half of these being under the age of one year. The incidence of the disease was highest in West Ward and lowest in East Ward, the deaths being respectively, North Ward 6, South 5, West 8, East 3. For the previous five years the deaths were 1899, 7; 1900, 12; 1901, 15; 1902, 0; 1903, 1; so that from this (often times fatal) disease the year 1904 showed three times the mortality of the quinquennial average 1899-1903. I know of no special cause to account for this beyond the fact that, like measles, whooping cough is a disease which under certain conditions (such as neglect

of proper precaution and undue exposure) is liable to spread very rapidly amongst young children.

Diphtheria and Membranous Croup.—In my report for the year 1903 I wrote, “There was a very marked diminution in this disease during the year, the cases being 80 (2 deaths), as compared with 221 (4 deaths) for 1902, 147 (3 deaths) for 1901, and 104 (9 deaths) for 1900.” Adding 61 (21 deaths) for the year 1899 it will be seen that the year 1904 (47 cases, 7 deaths) compares most favourably with the previous quinquennial average, although the percentage mortality shows somewhat higher than one or two of those years.

Enteric Fever.—Of this disease there were belonging to the district 41 cases, with 11 deaths (one case at the Children’s Hospital is not included in this number). The greater number of cases occurred during the months of September and October (especially the former), and of the total number for the year 27 occurred in West Ward during those two months. The 11 deaths also all occurred in this ward.

In my report to the Sanitary Committee for the month ending September 24th, 1904, I wrote, “During the past four weeks there has been a severe outbreak of typhoid fever in Newtown, Pendlebury, duplicate cases having occurred in four houses, viz.: 15-17 Dumbell Street, 44 Worsley Street, and 12 Carrington Street. The two latter originally resided at 19 Dumbell Street, but removed before the nature of the disease was discovered. The first case of which we received official notification was from 15 Dumbell Street on September 7th, and on visiting this it was ascertained that some days previous two cases had occurred at No. 17, and also in one or two of the adjoining streets. These had not been officially notified. What the actual cause of the original outbreak may have been can only at present be approximately stated. The Inspector and I have personally investigated each case, and have spent much time in examining

“ into such causes as appeared likely to account for it. I may
 “ say that no special insanitary condition of the dwellings
 “ was found which could satisfactorily account for the result.
 “ I am of opinion that it must be very largely attributable to
 “ the prolonged dryness of the season. The absence of our
 “ normal rainfall has necessarily been accompanied by an inad-
 “ equate flushing of the drains generally ; consequently there
 “ has been a greater dissemination of disease particles
 “ through the air, which is a well recognised factor in pro-
 “ ducing epidemics, both of diarrhoea and typhoid fever. In
 “ support of this opinion I refer to the corresponding period
 “ of the years 1902-3, in both of which the rainfall, being of
 “ a more normal character kept this, and other districts
 “ similarly circumstanced comparatively free from these
 “ diseases. Both the Inspector and I are still engaged in
 “ investigations into the matter. I would inform the Com-
 “ mittee that only one case has occurred in the district during
 “ the seven days preceding the date of this report (September
 “ 26th, 1904), and there is evidence that the epidemic is
 “ showing a declining tendency. What we really need to
 “ accelerate this, is a suitable and satisfactory rainfall which
 “ is bound to effect a beneficial result.”

Our subsequent investigation into the causes of this outbreak failed to elicit any definite result, so far as ascertaining any particular insanitary conditions existing, and I am of opinion that my statement of the probable cause given in the above quoted report to your Committee conveyed the likeliest explanation. It may be asked why such general conditions as I have spoken of should have specially affected West more than any of the neighbouring wards. My reply is that the disease had apparently taken a fairly firm hold of the affected area for at least from 8 to 10 days prior to our having become aware of it from any authorised or definite source, and therefore we were unable to deal with it at the outset as we otherwise should have been. Had it not been for this particular outbreak at the period and in the

locality named the district generally would have been, in 1904, comparatively free from a disease which for years past has considerably troubled us, but which we had hoped we had at last got fairly under control. The fact that no case of typhoid fever occurred in the East Ward during the year 1904 is one certainly requiring special note. This is a circumstance which is, I believe, unparalleled in the history of the district, at any rate for a very long series of years, and is distinctly a matter for satisfaction, when we consider its past record in this connection.

Taking a general review of the question of infectious disease for the year 1904, it may be stated that on the whole there has been a satisfactory improvement so far as the actual number of cases occurring is concerned. The systematic supervision and visiting of infected dwellings which is carried out by the Sanitary Inspector and his staff has undoubtedly produced better results in checking the spread of disease than in previous years. Exclusive of the small-pox cases, which were, of course, all removed from their homes, there were 45 cases treated in hospital, the bulk being scarlet fever and diphtheria, and the percentage being 13·9 of the whole number. One reason why the comparatively smaller percentage was dealt with in this manner is that a large proportion of the cases occurred in dwellings where the infected could be better kept apart from the healthy than has been the case in other years. In every individual case the advantages and disadvantages of home as against hospital treatment are always carefully weighed, and the surroundings and circumstances of each one fully taken into consideration (in consultation with the Chairman of the Sanitary Committee) before removal is effected. Every case is, in fact, dealt with on its merits, *i.e.*, whether or not reasonable facilities exist for treating it at home, and this, it is believed, has on the whole proved satisfactory.

Diarrhœa.—The deaths from this disease, known also as zymotic enteritis, epidemic enteritis and epidemic or

summer diarrhœa, numbered 47, and of this number 40 were those of children under one year. The relatively larger percentage of deaths for the year must, in my opinion, be mainly attributed to the unusual dryness of the summer, which is always a determining factor in the rise and fall of the death rate from this disease. I need only point to the years 1902-3 in corroboration of this. In these years the deaths numbered 15 and 16 respectively. There are, of course, other causes which also tend to swell the mortality rates from this very fatal disease in the case of infants, and upon these I shall comment in dealing with the subject of infant mortality, which, I regret to say, has, during the past year, been unusually and exceptionally high.

Infantile Mortality.—During the year 1904 the very high rate of 227·4 deaths per 1000 births was reached, for the whole district (ranging from 147·7 per 1000 in the South Ward to 272·3 in the West Ward) as compared with the decennial average for the years 1894-1903 of 181·7. The large number of deaths of infants from measles, whooping cough, diarrhœa, tubercular and wasting diseases, and from pneumonia and other lung diseases, is to a great extent accountable for this, but other causes have also tended thereto, such as improper food and inadequate clothing, upon which I have in former years so frequently enlarged.

Various suggestions have been made from time to time for remedying a condition of things which, when presented in a simple statistical column, fairly appals us by its magnitude, but, in spite of all these, the evil still continues in a more or less acutely recurrent form. There is, in fact, no great evidence of a permanently progressive character. In my annual report for the year 1900 I observed that “The average
“rate for town districts is about 165 (per 1000 births) and
“that for country districts ranges from 90 to 100 per 1000,
“so that the comparison will at once be seen to be unfavour-
“able to us. . . . Improper feeding and undue exposure

“ are two of the chief causes contributing to the result, and
 “ ‘hereditary’ influences also very largely assist. As to the
 “ first-named it cannot too often be insisted on that infants
 “ should neither be fed nor clothed on the principle fre-
 “ quently adopted by parents, too careless or too ignorant to
 “ study their requirements. This is, as regards foods to
 “ give infants, just what they happen to be partaking of
 “ themselves (whether food or drink) without giving care or
 “ thought to their weaker digestive powers ; and, as regards
 “ clothing, to neglect the simplest precautionary measures
 “ necessary in our changeable climate. . . . The bottle
 “ or pobby-fed infant often suffers greatly from want of
 “ proper care on the part of the mother even in so simple a
 “ matter as the cleanliness of the bottles ; besides which
 “ filth and general neglect as to the child’s bodily condition
 “ are all too frequent accompaniments. The larger number
 “ of diseases occurring under the head of ‘enteritis,’ ‘gastric
 “ catarrh,’ ‘diarrhœa’ and ‘wasting diseases of the bowels,’
 “ may be put down as mainly due to the first cause ; whilst
 “ such as pneumonia, bronchitis, &c., (of which there is
 “ always a large percentage under the age of one year) are,
 “ of course, very strongly associated with the second.”

These remarks apply with equal force to the present time.
 Again, in my report for the year 1901, I wrote : “ Though
 “ repeatedly warned by medical officers of health,
 “ medical practitioners, district visitors and nurses, and by
 “ what they cannot fail to read in the newspapers as to
 “ coroners’ remarks on this subject, mothers will persist in
 “ feeding their babies on anything which comes handy,
 “ ignoring the fact that they might as well give them so
 “ much poison at once. . . . It cannot be too strongly
 “ insisted on that for the first six months of its life an infant
 “ should be given nothing but milk in varying stages of
 “ dilution, as this is the only kind of food containing within
 “ itself all the elements necessary to an infant’s growth. Of
 “ course it is best that every mother should at least make

“ an effort to nurse her own baby. The best substitute is
 “ ordinary cow’s milk, but unless the greatest care is taken
 “ to keep the milk sweet and good, and also the strictest
 “ precautions in the way of cleanliness of the bottles is
 “ observed, the results will be disastrous. The bottles and
 “ other vessels containing the milk should be thoroughly
 “ washed and cleaned every time they are used, the old-
 “ fashioned boat-shaped bottle with a small teat being far
 “ preferable to the modern syphon tube arrangement, which
 “ can scarcely ever be satisfactorily cleaned.”

I have thought it might be useful to reproduce these remarks as bearing upon a similar condition of things for the year 1904 ; and when we reflect that in that year for every 100 children born in the district no less than 22 died before attaining the age of one year (*i.e.*, for the whole district ; in the Pendlebury district it was much higher), it must be admitted that the position is a very serious one, and requires the most earnest consideration on the part of all concerned with the welfare of our population.

Amongst remedies that have been advocated, and which have probably proved very efficacious in some districts, are—
 (1) The establishment of crèches or day nurseries for the care of children whose mothers are perforce obliged to go out to work. (2) The institution, in connection with local technical instruction, of classes for the teaching of sick nursing and infant feeding, &c. To both these valid objections may be urged on the ground—(1) That the supervision is not sufficiently continuous and (2) That the very people who might be supposed to derive the most benefit to themselves and their children from such course of teaching would be the very ones to absent themselves therefrom.

An alternative suggestion, and one which I should think more likely to be productive of good results, would be to make arrangements whereby a female inspector, well versed in her work, should, under the auspices of the District

Council, be enabled to visit the homes of the people, and, where found necessary, instruct them, in a simple homely fashion, in the principles of domestic economy, and in the duties devolving upon them in properly feeding and rearing their children. I believe this plan, if adopted and properly carried out, with due thought and judgment on the part of the instructress, or inspector, would inevitably result in a considerable lessening of our heavy infantile mortality. Something of this kind is being done in some of our larger towns, but chiefly, I believe, under "voluntary" auspices. The Council will, I think, agree with me that it would be preferable for such work, if entered upon, to be undertaken by a regularly appointed and properly responsible official, who should be adequately remunerated for her services and should necessarily devote the whole of her time and attention to the discharge of duties which would of course be onerous.

Respiratory Diseases.—Including phthisis the year 1904 saw the respiratory death rate as high as 5·7 per 1000 for the district, varying from 4·4 in South Ward to 7·6 in East Ward. In 1899 the rate was 4·96; in 1900, 6·1; in 1901, 4·63; in 1902, 5·66; and in 1903, 4·92—a quinquennial average of 5·28.

In my report to the Committee for April, 1904, I wrote, after giving statistics for the various wards of the 43 deaths which had occurred for the first quarter of the year, as follows :—

“ Nearly one-half of the deaths were under five years of
 “ age, as against one-seventh above the 65 years' limit. This
 “ leads to the conclusion that greater precautions should be
 “ exercised in the care and treatment of young children in the
 “ earlier stages of the affection, as, apart from the climatic
 “ conditions invariably present at this quarter of the year and
 “ which more especially affect the mortality rates from this
 “ class of disease, much can be done in this direction to
 “ lessen its great fatality. In view of the high death rate

“ from lung diseases, the Medical Officer of Health feels
 “ justified in once more calling attention to this matter, and
 “ in asking the public to co-operate with the Sanitary
 “ Authority by doing everything which lies in its power to
 “ lessen this high rate—

- “ 1. By avoiding needless exposure of young children to
 “ varying conditions of temperature.
- “ 2. By providing them with suitable and sufficiently warm
 “ clothing and surroundings.
- “ 3. By proper attention to damp clothing, and more
 “ particularly to damp feet.
- “ 4. By careful avoidance of indiscriminate expectoration
 “ in places frequented by large numbers of people,
 “ and also in dwelling-houses (unless under precau-
 “ tions as to its immediate destruction by burning).
 “ The sputa when dried becomes a source of infec-
 “ tion, especially in persons afflicted with a con-
 “ sumptive tendency, and in this way not only may
 “ phthisis, or consumption, be conveyed by direct
 “ infection through the contaminated air to other
 “ members of a family, but probably also other lung
 “ affections. Hence it is of the greatest importance
 “ that the habit of spitting should not be thought-
 “ lessly indulged in ; and I may point that so potent
 “ a factor in connection with the dissemination of
 “ phthisis and other lung diseases is this considered
 “ to be that many of our large centres of population
 “ (Manchester among others) have adopted very
 “ stringent measures to put a stop to what is un-
 “ questionably a public danger.”

One may, I think, sum up the situation as regards the mortality from this class of disease by stating that the element of personal care and attention enters very largely indeed into the question of its rise and fall. Other conditions there are which, of course, affect this, but they are such as are inseparable from districts like ours, where not only is the climate

more variable and uncertain than in many other parts of the country, but the occupations of the bulk of its inhabitants render them especially liable to attack from this form of disease. When with this we take into consideration the overcrowding which is to be observed in many working class dwellings of the poorer sort, an explanation of the result may at once be seen.

Cowsheds, Dairies and Milkshops.—These remain about the same in number as heretofore. They are frequently visited. This year in two or three instances a complete re-arrangement of the drainage and other improvements have been effected, and efforts are being made to keep them in a satisfactory condition.

Slaughter-houses.—Taken as a whole the structural conditions are good, and the removal of offal, etc., twice weekly, which is done by the Council's workmen, appears to act more satisfactorily, so far as the more regular prevention of nuisance is concerned, than was formerly the case.

Bake-houses.—There has been no increase in the number of these during the past year, but in the course of my periodical visits I have noted that further alterations have been made in a few cases in order to bring them up to the required standard. Among other important details it may be mentioned that limewashing has been carried out much more frequently, owing to the increased supervision exercised by the sanitary staff.

Underground bake-houses (eight in number) are kept under careful observation, and the requirements of the Act regulating these have been so far met that no apprehension need be felt as to their present continuance. I have visited them several times during the year, and the Council may rest satisfied that any defects will be from time to time, as occasion requires, duly noted and laid before it.

A report of the work done under the Factory and Workshops Act of 1901 will be found appended to this report, and,

in accordance with the provisions of that Act, I shall, in due course, forward a copy of this (annual) report embodying the above, to the Home Office.

Special reports have been made during the year on the mortality from measles in the second quarter of the year, and on the outbreak of small-pox in the district—referred to in an earlier part of my report dealing with these diseases.

In the matter of unsound meat and unwholesome food no case has arisen during the past year which has called for my intervention, and I may inform the Council that on this subject there has, in the last year or two, been considerably less ground for complaint.

Among the sanitary improvements effected during the year it may be stated that 471 house drains have been re-laid and re-arranged, nearly 200 downspouts disconnected from drains, intercepting traps fixed and ventilating shafts erected where thought necessary in particular instances. 266 water closets have been substituted for privies, and 200 ashbins provided for dry refuse. This, of course, involves a weekly removal of such refuse, but I would urge upon the Council a continuance of this gradual process of conversion from a necessarily offensive and insanitary condition to a much more sanitary one. There can be no doubt whatever of the superiority of the water closet system over the old privy midden arrangement so long in vogue in this district, and every available statutory power should be used to compel its adoption.

The question of the provision of a refuse destructor is one which may well engage the future attention of the Council, as I believe its advantages are obvious in a district such as this where the facilities for disposing of refuse are not always of a satisfactory nature.

Housing of the Working Classes.—No special action has been taken under the Housing Acts, and no houses have been condemned as unfit for habitation, or closed, or demolished. In many cases, however, it has been necessary to

serve notices on owners to remedy specified insanitary conditions which have been carried out without resort to legal proceedings.

As in former years it has been my practice not only to systematically visit various portions of the district (in accordance with the requirements of the Local Government Board) in order to ascertain general sanitary circumstances affecting each part thereof, but have also placed my services, as your Medical Officer, at the disposal of the various medical practitioners in the district in connection with the diagnosis and early determination of infectious cases—more particularly in the case of small-pox—wherever any such practitioner may have requested them.

Though a somewhat higher general death-rate, a higher zymotic rate, and a very greatly increased infant death rate show the district to be in a retrograde position so far as 1904 is concerned, there is, nevertheless, evidence to show that much good work has been accomplished, which a reference to Inspector Bleakley's report (issued herewith) will amply show; and it remains for the Council and its sanitary staff to push on with continued vigour the various schemes now in hand with the object of effecting a still further improvement. A greater advance in this direction will, I believe, be made by the early adoption of the suggestions I have made, not only to the Council, as the official guardians of the public health, but also, through this report, to the inhabitants generally as to the personal assistance they may individually render towards its attainment.

I am, Gentlemen,

Your obedient Servant,

SAML. HOSEGOOD, M.R.C.S., L.S.A.,

Medical Officer of Health.

Briar Cottage, Swinton,

13th February, 1905.

TABLE I.

VITAL STATISTICS OF THE WHOLE DISTRICT DURING 1904 AND PREVIOUS YEARS.

Name of District : Swinton and Pendlebury.

Year.	Population estimated to middle of each Year.	Births.		Total Deaths Registered in the District				Total Deaths in Public Institutions in the District.	Deaths of Non- residents registered in Public Institu- tions in the District.	Deaths of Residents Registered in Public Institutions beyond the District.	Nett Deaths at all Ages belonging to the District.	
		Number.	Rate. §	At All Ages.		Number.	Rate. §				Number.	Rate. §
				Under 1 Year of Age.	Rate per 1000 Births registered.							
1	2	3	4	5	6	7	8	9	10	11		
1894	23100	754	32.8	142	188.3	499	21.6	60	60		439	19
1895	23700	787	33.2	128	162.6	505	21.3	76	76		429	18.1
1896	24600	807	32.8	142	175.9	478	19.4	54	54		424	17.2
1897	25400	820	32.2	174	212.2	496	19.2	57	57		439	16.9
1898	26300	815	30.9	157	192.6	491	18.6	59	55		440	16.7
1899	27500	864	31.4	167	193.2	555	20.1	116	71	31	515	18.7
1900	28700	817	28.4	157	192.1	613	20.4	90	67	37	583	20.3
* 1901	27005	808	29.9	172	212.8	589	19.9	64	59	39	519	19.2
1902	27200	924	34	133	143.9	519	19.08	73	68	57	508	18.6
1903	28000	922	32.9	144	156.1	518	18.5	79	75	24	467	16.7
Averages for years 1894-1903.	26150	831	31.7	151	181.7	526	20.1	72	64	37 (5 years only)	476	18.2
1904	28200	895	31.5	201	224.7	630	22.1	76	74	42	598	21.05

§ Rates in columns 4, 8 and 13 calculated per 1000 of estimated population.

NOTE.—The deaths to be included in Column 7 of this Table are the whole of those registered during the year as having actually occurred within the district or division. The deaths to be included in Column 12 are the number in column 7, corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

By the term "Non-residents" is meant persons brought into the district on account of sickness or infirmity and dying in Public Institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in Public Institutions elsewhere.

The Public Institutions to be taken into account for the purpose of these Tables are those into which persons are habitually received on account of sickness or infirmity, such as Hospitals, Workhouses and Lunatic Asylums. A list of the Institutions in respect of the deaths in which corrections have been made should be given on the Back of this Table.

Total population at all ages 27005 } At Census of 1901.
 Number of inhabited houses 5400
 Average number of persons per house 5

Area of District in acres (exclusive of area covered by water 2222

* Enumerated.

[SEE OVER

1 Institutions within the District receiving Sick and Infirm Persons from outside the District.	2 Institutions outside the District receiving Sick and Infirm Persons from the District.	3 Other Institutions, the Deaths in which have been distributed among the several localities in the District.
1. Children's Hospital (Pendlebury) 2. Industrial Schools (Swinton) [Belonging to Manches- ter Board of Guardians.]	1. Ladywell Sanatorium for Infectious Cases [Salford Borough.] 2. Hope Hospital, Salford. [Pauper cases from Pendlebury District of Salford Union.] 3. Small-pox (joint with this district) Hospital at Linnyslaw, in Worsley Urban District. 4. Manchester Hospitals (various). 5. Royal Hospital, Salford.	Barton Union Workhouse
Is the Union Workhouse within the District?—No. 1. At Patricroft (in Borough of Eccles) for Swinton District. 2. At Eccles New Road (in Borough of Salford) for Pendlebury District, in Salford Union.		

TABLE II.
VITAL STATISTICS OF SEPARATE LOCALITIES IN 1904 AND PREVIOUS YEARS.
Name of District : Swinton and Pendlebury.

NAMES OF LOCALITIES.	1 North Ward (Swinton).				2 South Ward (Swinton).				3 West Ward (Pendlebury)				4 East Ward (Pendlebury).			
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.
	<i>a.</i>	<i>b.</i>	<i>c.</i>	<i>d.</i>	<i>a.</i>	<i>b.</i>	<i>c.</i>	<i>d.</i>	<i>a.</i>	<i>b.</i>	<i>c.</i>	<i>d.</i>	<i>a.</i>	<i>b.</i>	<i>c.</i>	<i>d.</i>
1897	7100	260	115	44	7300	184	92	26	6780	225	135	60	4220	151	97	44
1898	7300	249	118	47	7500	189	92	30	7100	240	130	50	4400	137	96	30
1899	8000	261	137	51	7900	201	118	35	7150	248	145	54	4450	154	84	27
1900	8190	256	159	40	8310	173	142	32	7530	237	175	51	4690	151	107	34
1901	7578	242	144	68	7689	190	118	34	7124	229	155	47	4614	147	102	28
1902	7600	257	130	32	7700	213	142	36	7290	266	151	41	4700	188	85	26
1903	7700	257	139	27	7600	219	95	28	7400	249	134	52	5300	197	99	37
Average of Years, 1897 to 1903.	7638	254	134	44	7714	195	114	31	7195	242	146	50	4625	160	95	32
1904	7720	241	145	52	7680	203	135	30	7450	246	177	67	5350	205	141	52

NOTES.—(a) The separate localities adopted for this table should be areas of which the populations are obtainable from the census returns, such as wards, parishes or groups of parishes, or registration sub-districts. Block 1 may, if desired, be used for the whole district; and blocks 2, 3, &c., for the several localities. In small districts without recognised divisions of known population this Table need not be filled up.

(b) Deaths of residents occurring in public institutions beyond the district are to be included in sub-columns *c* of this table, and those of non-residents registered in public institutions in the district excluded. (See note on Table I. as to meaning of terms "resident" and "non-resident.")

(c) Deaths of residents occurring in public institutions, whether within or without the district, are to be allotted to the respective localities according to the addresses of the deceased.

(d) Care should be taken that the gross totals of the several columns in this Table respectively equal the corresponding totals for the whole districts in Tables I. and IV.: thus, the totals of sub-columns *a*, *b* and *c* should agree with the figures for the year in the columns 2, 3 and 12 respectively of Table I.; the gross total of the sub-columns *c* should agree with the total of column 2 in Table IV., and the gross total of sub-columns *d* with the total of column 3 in Table IV.

TABLE III.
CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1904.
Name of District : Swinton and Pendlebury.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.						TOTAL CASES NOTIFIED IN EACH LOCALITY						
	At all Ages.	At ages + Years					SWINTON.			PENDLEBURY.			
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.	1 North Ward.	2 South Ward.	3 Industrial Schools.	4 West Ward.	5 East Ward.	6 Children's Hospital.
Small-pox	20	..	..	5	2	13	15	2	..	3	..	..	
Cholera	..	..	..	..	..	..	..	..	..	..	..	..	
Diphtheria	47	..	13	26	4	4	14	9	..	8	13	3	
Membranous Croup	9	..	6	3	..	..	2	..	..	7	..	..	
Erysipelas	41	1	..	10	8	21	9	16	5	9	2	..	
Scarlet Fever	211	3	66	127	11	3	70	55	1	47	26	12	
Typhus Fever	..	..	..	..	..	..	..	..	..	..	..	..	
Enteric Fever	42	..	..	7	19	16	5	3	..	33	..	1	
Relapsing Fever	..	..	..	..	..	..	..	..	..	..	..	..	
Continued Fever	..	..	..	..	..	..	..	..	..	..	..	..	
Puerperal Fever	1	..	..	..	1	..	..	..	..	..	1	..	
Plague	..	..	..	..	..	..	..	..	..	..	..	..	
Totals.....	371	4	85	178	45	57	2	115	85	6	107	42	16

Small-pox ...	20
Diphtheria ...	10
Scarlet Fever	27
Enteric Fever	5
	62

NOTES.—The localities adopted for this Table should be the same as those in Tables II. and IV.

State in space below the name of the isolation hospital, if any, to which the residents in the district suffering from infectious disease are usually sent. Mark (H) the locality in which it is situated, or if not within the district, state where it is situated, and in what district. Mark (W) the locality in which a Workhouse is situated.

* This space may be used for the record of other disease the notification (compulsory or voluntary) of which is in force in the district.

+ These age columns for notifications should be filled up in all cases where the Medical Officer of Health, by inquiry or otherwise, has obtained the necessary information.

Isolation Hospital : Ladywell Sanatorium (in the Borough of Salford).

TABLE IV.
CAUSES OF, AND AGES AT DEATH DURING THE YEAR 1904.
Name of District : Swinton and Pendlebury.

Name of District : Swinton and Pendlebury.																
CAUSES OF DEATH.	DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING IN OR BEYOND THE DISTRICT.							DEATHS AT ALL AGES OF "RESIDENTS" BELONGING TO LOCALITIES, WHETHER OCCURRING IN OR BEYOND THE DISTRICT							TOTAL DEATHS WHETHER OF RESIDENTS OR NON-RESIDENTS IN PUBLIC INSTITUTIONS IN THE DISTRICT.	
	I							SWINTON		PENDLEBURY		13	14	15		16
		All Ages. 2	Under 1. 3	1 and under 5. 4	5 and under 15. 5	15 and under 25. 6	25 and under 65. 7	65 and upwards. 8	North Ward 9	South Ward 10	West Ward 11					
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	40	7	30	3	...	...	...	3	10	11	16	...	...	...	...	2
Scarlet Fever... ..	13	...	10	3	...	...	...	6	2	4	1	...	...	...	...	...
Whooping Cough	22	11	11	...	...	...	...	6	5	8	3	...	...	...	...	...
Diphtheria and Membranous Croup	7	...	3	4	...	...	...	2	2	...	3	...	...	...	...	...
Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Fever : Typhus	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric	11	...	...	2	4	5	...	...	...	11	...	...	...	...	...	...
Other continued	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Epidemic Influenza	4	...	...	...	...	3	1	1	...	3	...	...	...	...	...	1
Cholera	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Plague	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diarrhœa (see notes at back)	47	40	6	...	...	...	1	15	8	15	9	...	...	...	...	2
Enteritis (see notes at back)	2	2	...	...	...	...	...	1	...	1	...	...	...	...	...	2
Puerperal Fever (see notes at back)	1	...	...	...	1	...	...	...	...	...	1	...	...	...	...	...
Erysipelas	1	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...
Other Septic Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5
Phthisis (Pulmonary Tuberculosis)	20	...	...	...	6	12	2	6	6	4	4	...	...	...	...	2
Other Tubercular Diseases	44	29	11	1	...	2	1	7	3	14	20	...	...	...	...	9
Cancer, Malignant Disease (see notes back)	13	...	...	...	...	10	3	4	7	1	1	...	...	...	...	...
Bronchitis	49	17	9	...	...	9	14	12	12	14	11	...	...	...	...	1
Pneumonia	87	30	13	7	2	26	9	20	15	27	25	...	...	...	...	10
Pleurisy	4	...	...	...	1	3	...	3	...	1	...	...	...	...	...	1
Other Diseases of Respiratory Organs	2	...	...	...	1	...	1	...	1	...	1	...	...	...	...	...
Alcoholism, Cirrhosis of Liver	5	...	...	...	...	5	...	...	1	2	2	...	...	...	...	...
Venereal Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Premature Birth	26	26	...	...	...	...	...	8	4	9	5	...	...	...	...	...
Diseases and Accidents of Parturition	2	...	...	...	...	2	...	...	1	...	1	...	...	...	...	...
Heart Diseases	40	...	...	2	4	24	10	9	16	6	9	...	...	...	...	1
Accidents	13	1	6	...	2	4	...	1	2	3	7	...	...	...	...	2
Suicides	1	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...
Convulsions	10	8	1	...	...	1	...	5	3	2	...	...	...	...	...	1
Diabetes	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Rheumatic Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
All other Causes	134	29	9	6	2	45	43	35	36	41	22	...	...	...	...	35
All Causes	598	201	109	28	23	152	85	145	135	177	141	...	...	...	...	76

NOTES.—(a) In this Table all deaths of "Residents" occurring in public institutions,

whether within or without the district, are to be *included* with the other deaths in the columns for the several age groups (columns 2-8). They are also, in columns 9-15, to be *included* among the deaths in their respective "Localities" according to the previous addresses of the deceased as given by the Registrars. Deaths of "Non-residents" occurring in public institutions in the district are in like manner to be *excluded* from columns 2-8 and 9-15 of this Table.

(b) See notes on Table I, as to the meaning of "Residents" and "Non-residents," and as to the "Public Institutions" to be taken into account for the purposes of these Tables. The "Localities" should be the same as those in Tables II. and III.

(c) All deaths occurring in public institutions situated within the district, whether of "Residents" or of "Non-residents," are, in addition to being dealt with as in note (a) to be entered in the last column of this Table. The total number in this column should equal the figures for the year in column 9, Table I.

(d) The total deaths in the several "Localities" in columns 9-15 of this Table should equal those for the year in the same localities in Table II., sub-columns c. The total deaths at all ages in column 2 of this Table should equal the gross total of columns 9-15, and the figures for the year in column 12 of Table I.

(e) Under the heading of "Diarrhoea" are to be included deaths certified as from diarrhoea, alone or in combination with some other cause of ill-defined nature; and also deaths certified as from

Epidemic enteritis;
Zymotic enteritis;
Epidemic diarrhoea. Summer diarrhoea;
Dysentery and dysenteric diarrhoea;
Choleraic diarrhoea, cholera, cholera nostras
(in the absence of Asiatic cholera).

Under the heading of "Enteritis" are to be included those certified as from Gastro-enteritis, Mucro-enteritis, and Gastric catarrh, unless from information obtained by enquiry from the certifying practitioner or otherwise, the Medical Officer of Health should have reason for including such deaths, especially those of infants, under the specific term "Diarrhoea." Deaths from diarrhoea secondary to some other well-defined disease should be included under the latter.

Under the headings of "Cancer" and "Puerperal fever" should be included all registered deaths from causes comprised within these general terms.

In recording the facts under the various headings of Tables I., II., III. and IV., attention has been given to the notes on the Tables.

January 23rd, 1905.

SAML HOSEGOOD,
Medical Officer of Health.

COUNTY OF LANCASTER.

TABLE C.

SUMMARY OF MEDICAL OFFICER'S REPORT
FOR 1904.

URBAN SANITARY DISTRICT OF SWINTON AND PENDLEBURY.

Area in statute acres, 2,222. Population (Census 1901),
27,005.

Name of Medical Officer of Health: SAMUEL HOSEGOOD.
Salary, £90.

Births registered: Males, 462; Females, 433; Total, 895.

Deaths registered: Males, 284; Females, 314; Total, 598.

Birth rate, 31·5. Death rate, 21·05. Rate of infant deaths,
under one year, to 1,000 births, 224·7.

Death rate from the seven principal zymotic diseases per 1,000
of population, 4·96.

Diseases prevalent? Scarlet Fever, Measles, Small-pox.
Period? First quarter, third and fourth.

What action taken? Exclusion of scholars (Measles and
Scarlet Fever), hospital isolation for first and last named.
Any schools closed? Yes. If so, for what disease?
Small-pox.

What is the character of the hospital accommodation? At
Ladywell Sanatorium, Salford (general), at Linnyshaw
(Small-pox).

Is it Joint or otherwise? Latter joint with Worsley (in
Worsley district).

SMALL-POX JOINT HOSPITAL.

AGREEMENT BETWEEN THE URBAN DISTRICT COUNCILS OF WORSLEY
AND SWINTON AND PENDLEBURY.

The Agreement provides—

That the full control and management of the Hospital shall be vested
in a Committee composed of six members, of whom three shall be
appointed from time to time by the Worsley U.D.C. from amongst
their own body, and three shall be similarly appointed by the
Swinton and Pendlebury U.D.C.

That the Chairman of the first Joint Committee shall be appointed
from amongst the members of the Worsley U.D.C.

That the Medical Officer of Health for the time being of the Worsley U.D.C. shall act as Medical Officer for the Hospital.

That all payments shall be made by the Worsley U.D.C. on behalf of the Joint Committee.

That all capital charges and establishment expenses of the Joint Committee shall be ultimately borne by and divided between the two Councils in the proportions of their respective populations.

That all expenses incurred by the Joint Committee in the treatment and maintenance of patients using the Hospital shall be paid and borne by the Council from whose district such patients shall be brought.

Number of beds available for the district ? Ladywell 20, Linnyshaw 14.

Number of cases treated ? Small-pox, 20 ; Diphtheria, 10 ; Scarlet Fever, 27 ; Typhoid Fever, 5 ; Total, 65.

Deaths in Hospital ? 3. From what causes ? Diphtheria and Scarlet Fever.

How is disinfection carried out ? Houses, sulphur and sulphur dioxide, aerial chinosol liquid on walls and ceilings. Clothing, bedding, &c., taken to Sanatorium, steam disinfected.

Number of cases of infectious disease notified ? 349.

Are any diseases not specially mentioned in the Act notifiable (for instance, Measles, Whooping Cough, Diarrhœa, Chicken-pox, &c.) ? If so, what are they ? No.

Has any arrangement been made for the "voluntary" notification of Phthisis ? No.

Has any action been taken under "The Housing of the Working Classes Act" ? No.

How many houses condemned as unfit for human habitation, and how many closed or demolished ? None.

From where is the water supply obtained, and what is its condition ? Is it subject to your inspection ? Manchester Corporation. No.

Is scavenging carried out satisfactorily? Yes. By Sanitary Authority or contract? Sanitary Authority. How is the refuse disposed of? Dry ashes to "tips" on boundary of district, excreta to surrounding farm lands.

What is the character of drainage and the form of sewage disposal? Double contact bacteria beds.

Canal boats (number inspected, &c.)? None.

What is the condition of the bakehouses? Good.

Slaughter-houses? Good.

Lodging-houses? Are they registered? None.

Dairies, Cowsheds and Milkshops.—Are they periodically inspected? Yes.

What is their condition? Fairly satisfactory.

Are they subject to Regulations made under the Order of the Local Government Board? Yes.

What amount of air space in cubic feet is required for each cow? 800 feet in the case of new sheds, not less than 600 in the old.

Food unfit for human consumption.—Amount seized? None.

Any special report of Medical Officer of Health during the year? One *re* Measles, one *re* Small-pox.

Department of Inspector of Nuisances.—No. of notices served? Verbal, 210; informal, 99; legal, 216; total, 525. No. of nuisances remedied? 1722. No. of legal proceedings taken and result? None.

Smoke.—No. of observations? 20. No. of legal proceedings taken and result? None. What is the time limit allowed for the emission of black smoke per hour? Five minutes.

Has the Authority adopted (a) "The Infectious Disease (Prevention) Act, 1890"? Yes. (b) "The Public Health Acts Amendment Act, 1890"? Yes.

REPORT ON THE ADMINISTRATION OF THE FACTORY AND
WORKSHOPS ACTS, 1901, FOR THE YEAR 1904.

In connection with this subject I may inform the Council that under the provisions of this Act all the necessary details in regard to proper ventilation, cleanliness, overcrowding, drainage of floors, sanitary conveniences and other matters have received regular attention at the hands of myself and the sanitary staff. As the result of the visits which I have made to the places in question I find that, generally speaking, they fully meet the requirements of the Act. Wherever suggestions have been made to owners of the various properties involved they have, for the most part, been readily adopted and carried out, and a general desire has invariably been shown to comply with the law in every important detail.

SAMUEL HOSEGOOD,

Swinton,

Medical Officer of Health.

January 23rd, 1905.

FACTORIES, WORKSHOPS, LAUNDRIES, WORKPLACES AND
HOMEWORK.

1.—INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises.	NUMBER OF Written		
	Inspections.	Notices.	Prosecutions.
Factories (including Factory Laundries), Workshops (including Workshop Laundries), Workplaces	67	12	Nil
Total	67	12	Nil

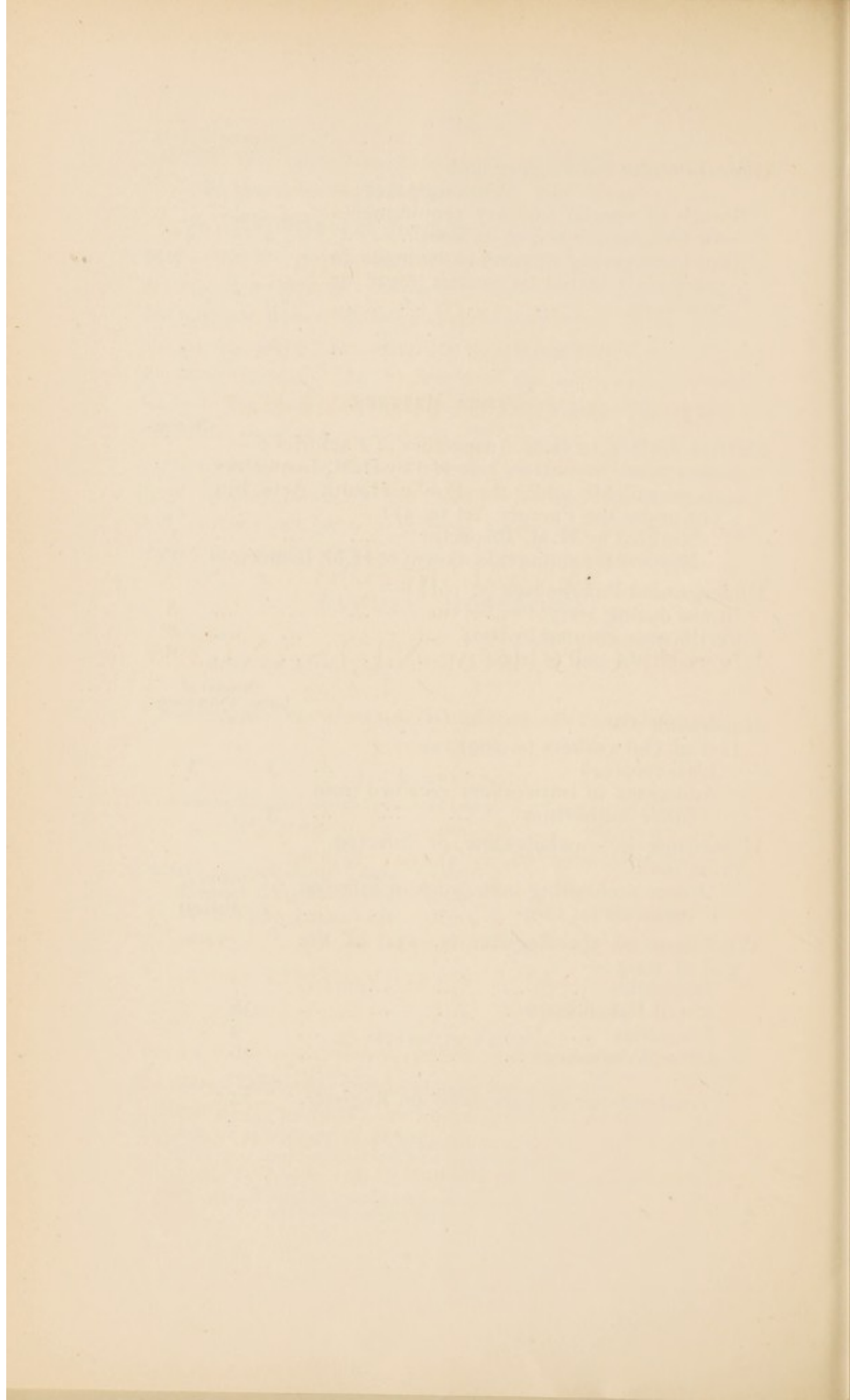
2.—DEFECTS FOUND.

Particulars.	NUMBER OF DEFECTS.	
	Found.	Remedied.
Nuisances under the Public Health Acts :—		
Want of cleanliness	12	12
Want of drainage of floors	2	2
Sanitary accommodation not separate for sexes	1	1
(Sec. 22 adopted. Separate closets for each 25 persons employed.)		

Particulars.	NUMBER OF DEFECTS.	
	Found.	Remedied.
Offences under the Factory and Workshop Act :—		
Breach of special sanitary requirements for bakehouses (ss. 97 to 100)...	Limewashing 4	4
Allowing wearing apparel to be made in premises infected by scarlet fever or small-pox...	Caution 1	—
Total	19	19

3.—OTHER MATTERS.

Class.	Number.	
Matters notified to H.M. Inspectors of Factories :—		
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factory Act (s. 5) :—		
Notified by H.M. Inspector		1
Reports (of action taken) sent to H.M. Inspectors		1
Underground Bakehouses (s. 101) :—		
In use during 1903		8
Certificates granted in 1904		8
In use at the end of 1904		8
Homework :—		
List of Outworkers (s. 107) :—		
Lists received	3	5
Addresses of outworkers received from other Authorities	3	
Homework in unwholesome or infected premises :—		
Orders prohibiting homework in infected premises (s. 110)	1	caution
Workshops on the Register (s. 131) at the end of 1904 :—		
Domestic		7
Retail Bakehouses... ..		38
Laundries		3
Other Workshops		26
Total number of workshops on Register.		74



THE URBAN DISTRICT COUNCIL OF SWINTON
AND PENDLEBURY.

SANITARY AND CLEANSING DEPARTMENTS' STAFF :

Inspector : ALBERT BLEAKLEY.

Assistant : W. T. GORMAN.

ANNUAL REPORT
OF THE
INSPECTOR OF NUISANCES

FOR THE YEAR ENDED DECEMBER 31ST, 1904.

TO THE CHAIRMAN AND MEMBERS OF THE SWINTON AND
PENDLEBURY URBAN DISTRICT COUNCIL.

GENTLEMEN,

I have the honour of submitting my report of the work done in the Sanitary and Cleansing Departments during the year ended December 31st, 1904.

As will be seen by the following summary, much useful work has again been done in securing the abatement of nuisances, and in removing insanitary conditions, which may be dealt with under the provisions of the Public Health Act, 1875, other later and Amendment Acts, and the Council's Bye-Laws.

Summary and details of House Drainage defects, etc.,
and Nuisances remedied, January to December, 1904 :

	1904	1903
House drains re-laid and re-arranged ...	471	274
House drains repaired ...	18	36
Blocked drains cleared ...	25	60
Cellar drains re-laid—brought outside ...	18	15
Additional drains provided ...	1	11
Anti-flooding traps fixed ...	0	3
House drains disconnected from sewer ...	23	28
Downspouts repaired ...	13	11
Downspouts disconnected from drains ...	189	325
Water closets—repairs to fittings, etc. ...	34	38
Water closets substituted for privies ...	266	185
Additional water closets provided ...	5	23
Ashbins provided in lieu of ashpits ...	200	133
Soil pipes repaired and renewed ..	14	8
Lavatory and bath waste pipes repaired ...	3	27
Sink pipes repaired and renewed ...	196	63
Cellar and yard surfaces re-flagged and re- paired, etc. ...	93	81
Yards, privies and water closets cleansed (foul through tenants' neglect)...	128	16
Accumulations of manure, filth, etc., removed..	17	25
Nuisances from overcrowding abolished ...	4	8
Privies and ashpits structurally repaired ...	50	57
Ashpit drains trapped ...	71	55
Dwelling-houses lime-washed and cleaned ...	11	20
Householders fined for firing soot in house chimneys ...	44	27
Bake-houses — alterations, lime-washed and cleansed ...	4	26
Workshops lime-washed ...	3	5
Miscellaneous nuisances ...	48	9
	1949	1569

No. of inspections and re-inspections to premises in dealing with nuisances, etc. (not including those relating to house drainage)	1214
No. of notices—given verbally	210
informal—printed and by letter ...	99
legal notices served	216

TESTING OF DRAINS AND SANITARY FITTINGS.

No. of premises where the drains or sanitary fittings (in many cases both) have been tested and examined	379
No. of premises where defects were found	330
No. of inspections and re-inspections made at premises where examinations, tests, and the work of remedying defects were being proceeded with ...	1666

The nature of defects found and reported on each month are evidence of the necessity for the continued examining and testing of drains and sanitary fittings.

The applied tests have disclosed 330 defects, which might otherwise have continued to be a source of danger to health to the occupiers of the premises.

With reference to the legal notices served, in order to facilitate the owners or agents of properties complying with same, the Council, after inviting a number of tenders, accepted two from local contractors, with scheduled prices, covering the various works required to be done.

Upon a written application being made by the owners to the Council requesting them to do the work required, the said work has been carried out and supervised by this department, the cost of same being afterwards paid by the owners.

In four instances where the owners and agents have failed to comply with legal notices served, the Council have

proceeded to execute the works by the same method, the owners being sued afterwards for the expenses incurred.

The total cost of work done during 1904 by our contractors amounts to £660.

An ordnance map has been obtained, and wherever alterations to the drains are made under our supervision, note is made of same and the new arrangement is marked out on the map. This will be of good service in the future.

EMPTYING OF GULLIES.

	1904.	1903.
No. reported emptied—Swinton ...	25,600 ...	16,178
Pendlebury ...	23,671 ...	18,973

This work of emptying gullies in the yards and cellars of dwelling-houses, &c., together with the gullies in private streets and back passages, which are now attended to systematically, is undoubtedly of good effect. The decided increase in numbers this year is accounted for by the men continuing at the work, instead of being repeatedly taken off as hitherto to assist in other duties.

SMOKE OBSERVATIONS.

Only 20 observations (of 60 minutes' duration) have been taken during 1904 of the smoke emitted from the chimneys of the manufactories within the district.

The five minutes' limit was exceeded in one instance, and the offenders had their attention specially drawn to the fact.

A letter of explanation was subsequently submitted to the Committee attributing the offence to inexperienced firemen temporarily engaged owing to sickness.

The time taken up by the outbreaks of small-pox have prevented additional observations being taken.

DAIRIES, COWSHEDS AND MILKSHOPS.

The Dairies, Cowsheds and Milkshops Register shows the number of cow-keepers to be 5 in Pendlebury, 14 in Swinton. Keepers of dairies, 4 in Pendlebury and 6 in Swinton. There are also 9 other non-residents supplying milk in the district, making a total of 38 purveyors of milk.

During the year an addition has been made to the shippons at Moss Farm, Swinton, structural alterations to the shippons at Wainwright Farm, Folly Lane (giving increased cubic space, better ventilation and lighting), and at Swinton Park Farm the drains have been entirely re-constructed and re-arranged.

SLAUGHTER-HOUSES.

These have been regularly visited in order to ensure the necessary cleansing and limewashing being attended to.

One has been given up, viz., Bairstowe's, on Manchester Road, Irlams-o'th'-Height. There are still 19 on the register—9 in Pendlebury and 10 in Swinton.

Considerable alterations have been made in two instances, the drainage being re-constructed and disconnected from any house drains. Structural alterations have also been made to obtain more convenience for the work carried on.

FACTORY AND WORKSHOPS ACTS.

There has been a marked improvement in the attention paid by the occupiers of these to cleanliness and limewashing.

The notices and instructions served upon them last year, together with more frequent inspections, have rendered unnecessary the serving of many legal notices. Verbal suggestions and reminders of what was necessary have invariably been acted upon.

No. of inspections made, 67. No. of notices served, 12.

With regard to bake-houses, one in Moorside Road has been given up owing to the inability to make satisfactory alterations. The tenant has had another place altered in Wardley Street, and a new oven built. The surroundings here are not yet completed.

The 8 underground bake-houses (three of which during the year have had to remove the openings to the drains to an outside area) have now carried out the necessary alterations.

FOOD AND DRUGS ACT.

Inspector Petch, of the County Police, has kindly supplied me with the following particulars and results obtained of samples of food, etc., purchased within this district and submitted to the County Analyst at Liverpool for analysis :—

Sample.	No. obtained.			Result.
Milk ...	...	28	...	Genuine
Bread ...	...	1	..	do.
Coffee ..	...	3	...	do.
Tea ...	...	1	...	do.
Honey ...	...	1	...	do.
Pepper...	...	2	...	do.
Butter ...	...	3	...	do.
Beer ...	...	8	...	do.
Whiskey	...	11	...	10 do. 1 below proof

In the instance where whiskey was sold below proof the seller was prosecuted, but the magistrate (owing to defendant's previous good character) imposed no fine, only ordering him to pay the costs.

Table showing number and nature of cases reported each month, number of cases sent to Sanatorium, rooms fumigated, inspections paid to the infected dwellings, etc., for the purpose of inquiries, giving instructions, supervision and disinfecting, number of houses infected, and the nature of closet accommodation :—

	No. of Weeks	Scarlet Fever	Enteric Fever	Diphtheria	Small-pox	No. and Nature of Cases removed to Hospital				No. of Rooms Disinfected	School-rooms Disinfected	No. of Visits paid to Houses	No. of Houses Infected	With Water-closets	With Privies
						Scarlet Fever	Enteric Fever	Diphtheria	Small-pox						
January	4	25	1	6	..	6	..	..	..	21	53	163	28	5	23
February	5	17	1	6	..	1	..	2	..	27	..	132	19	5	14
March	4	13	1	6	..	..	..	4	..	35	..	97	16	5	11
April	4	10	1	3	..	4	..	..	..	17	49	86	12	3	9
May	5	13	..	2	..	..	..	..	..	25	40	136	12	2	5
June	4	8	..	7	..	..	..	1	..	21	..	75	14	5	9
July	3	9	..	2	..	..	..	1	..	12	52	52	8	3	5
August	6	25	1	7	..	3	1	1	..	30	51	167	35	11	24
September	4	11	23	..	..	2	3	..	..	30	..	125	26	5	21
October	5	31	10	7	7	6	..	1	7	69	..	308	42	8	34
November	4	27	2	2	3	4	1	..	3	48	12	250	28	4	24
December	4	16	1	1	10	1	..	..	10	83	17	219	23	8	15
Total 1904....	52	205	40	49	20	27	5	10	20	418	274	1810	263	69	194
Total 1903....	52	295	34	77	6	24	3	5	6	642	..	1928	355	65	290
Total 1902....	52	371	37	219	..	84	9	45	..	831	..	1609	539	64	475
Total 1901....	52	176	78	147	..	36	14	35	..	335	..	923	..	..	..

Houses with Water-closets ...	No. 1300	No. affected 69 = 5 per cent.
Houses with Privies ...	4750	194 = 4 per cent.

The chart appended indicates the increase or decrease week by week throughout the year of the notification of infectious diseases.

During the year 314 cases of infectious diseases, dealt with in this department, have occurred at 263 houses.

Immediately the cases are notified the houses are visited, printed cautionary instructions are tacked on the walls of the houses, generally in the living kitchen.

Additional inspections have been made—as often as twice and thrice weekly in some cases—in order to keep those in charge of the cases up to the requisite standard of carefulness as regards isolation and preventing indiscriminate visiting.

The 20 cases of small-pox were the cause of much extra work, both day and night, in order to effect the patients' removal to hospital without delay, disposing of infected matter, disinfecting, stripping of the house walls, together with the supervising and supplying of food to those contacts kept in quarantine during the 14 days following the notification of the outbreak.

One hundred and thirty inspections were entailed in keeping under observation and suggesting re-vaccination to contacts brought to our notice as having been in contact in outside districts.

A specially anxious time in regard to outside contacts occurred at the beginning of May, when a footballer of Ashton-under-Lyne, who had been playing in a match at Swinton a few days previously, was found to be suffering from small-pox. No efforts were spared in communicating with the members of the team resident in other districts, and a thorough disinfecting was done to all the clothing and dressing-rooms used by the players.

Fortunately no further cases were reported.

Where the cases of enteric are nursed at their own homes sealed receptacles are provided for the depositing therein of all waste matter from the patients; they are emptied twice weekly of their contents and thoroughly disinfected.

In addition to the above precautions taken, carbolic soap, chinol disinfecting solution and sanitary chloride of lime are supplied to those in charge of all infectious cases.

Where infectious patients are nursed at their own homes a certificate is issued, to be signed by the medical attendant, stating that the patient is free from infection, previous to the rooms, etc., at the houses being disinfected, or the patients and members of the same family being allowed to attend school again. This has necessitated the issuing of 287 certificates during the year.

After having inspected at an infected house, and ascertained answers to the usual inquiries, notices are sent to the schools where the families attend of the patient's illness. By this means the teachers of the classes affected may at once keep a sharp outlook on the other members of his or her class in order to detect if any other child shows symptoms, or appears to be suffering from a mild and previously unnoticed attack.

The whole of the Schools (excepting one on account of alterations being in progress) have been disinfected three times.

Sanitary Chloride of Lime and Diarrhœa Mixture are kept at both Pendlebury Town Hall and Swinton Council Offices for the convenience of the residents, for free distribution, upon application being made.

CLEANSING DEPARTMENT.

	No. of Weeks.	No. of Ashpits emptied monthly	No. of Ashbins emptied monthly	No. of Privy Pails emptied	Loads carted to Tips and surrounding Farms		No. of Complaints received	Loads of Offal removed
					Dry Ashes	Privy		
January ...	4	710	2510	...	547	106	9	24
February ..	5	950	3142	...	873	196	16	31
March	4	832	2521	...	705	133	17	26
April	4	682	2506	...	620	117	23	28
May	5	907	3115	...	847	183	18	33
June	4	598	2605	...	587	107	25	27
July	3	599	1982	..	546	111	15	21
August ...	6	1144	3959	...	1089	204	38	41
September.	4	766	3793	245	638	158	10	28
October ...	5	1295	4932	328	806	183	5	35
November.	4	1082	4138	225	651	109	4	27
December .	4	926	4189	226	522	126	3	27
Total 1904	52	10491	39392	1024	8431	1733	183	348
Total 1903	52	10694	26635	...	8780	1710	...	...
Total 1902	...	10022	15226	...	7506	1511	...	...

ASHPITS.

By the increase in the adoption of the water carriage system, and the general provision of ash-bins in lieu of ash-pits in these cases, a reduction in the numbers emptied is only what may be expected.

This reduction was most noticeable during the first eight months of the year, when only an average of 184 per week were being emptied, which was found to be unsatisfactory. During the latter four months the average was brought up to 240 per week, which, if continued, will exceed former totals, and will be the means of allowing the emptying to be done more systematically and much more frequently than hitherto.

There is a marked increase in the number of ash-bins emptied. Two hundred houses, in addition to new ones, having commenced using them during the year.

Previous to September the ash-bins and privy-pails were totalled together.

The privy-pails are those in use at the Victoria Park, mills and colliery, the number also includes those pails supplied to houses where enteric fever cases have been nursed at home.

The total number of loads show a decrease, this is accounted for somewhat by the Council having purchased a new cart, which holds more than double the quantity placed in the one previously used for the same work.

I would here place on record the able assistance rendered during the year by Mr. Gorman, my Assistant.

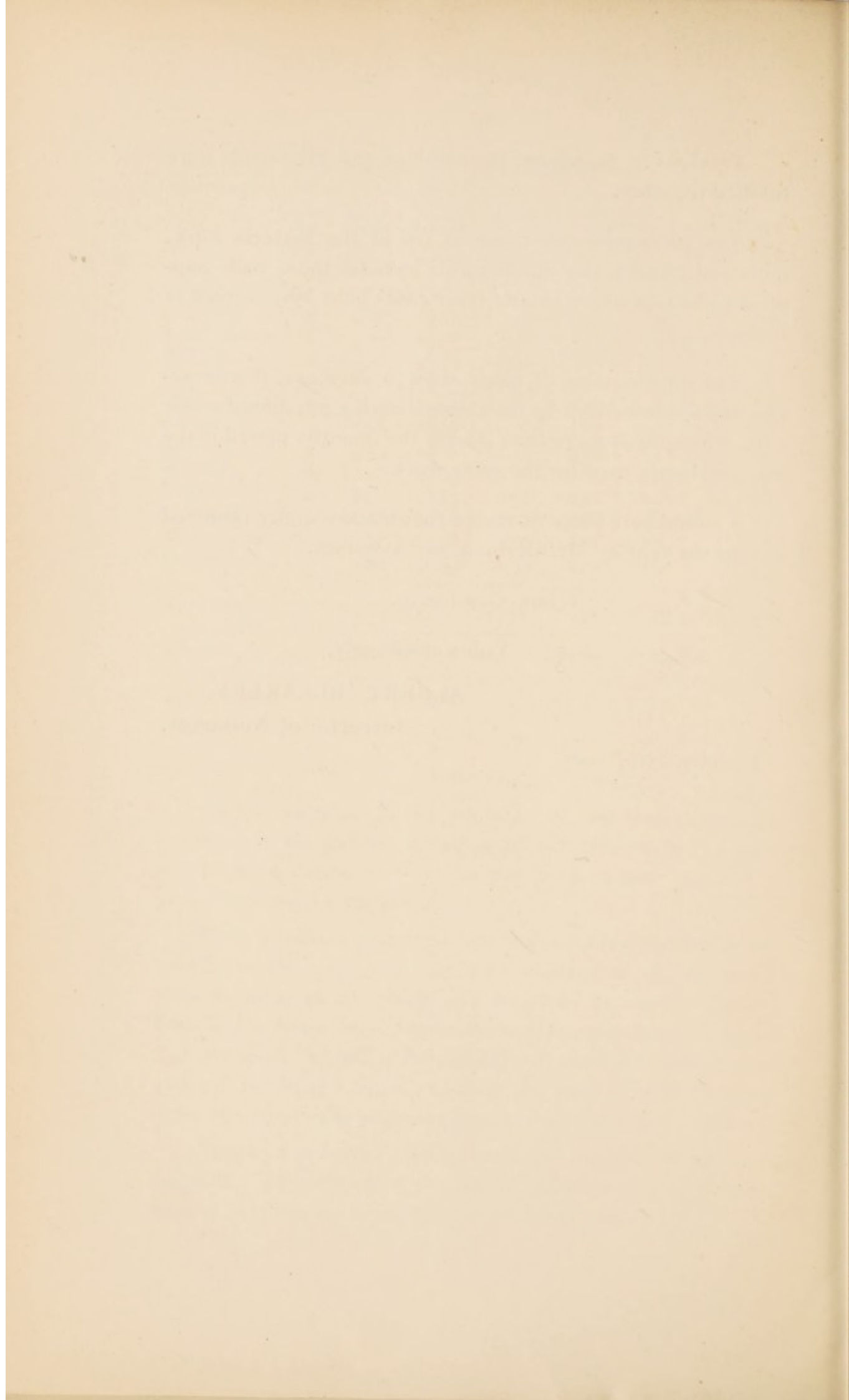
I am, Gentlemen,

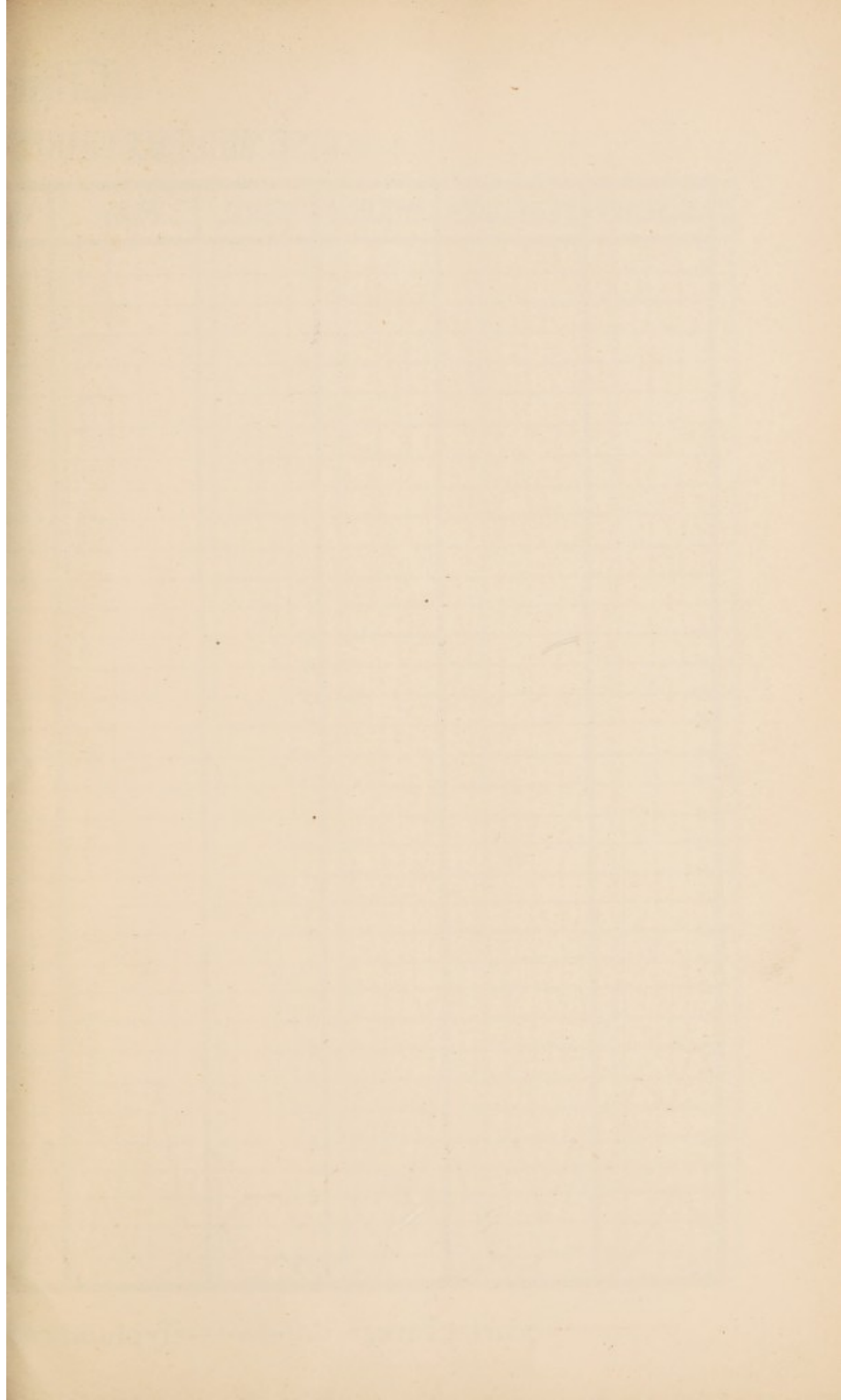
Yours obediently,

ALBERT BLEAKLEY,

Inspector of Nuisances.

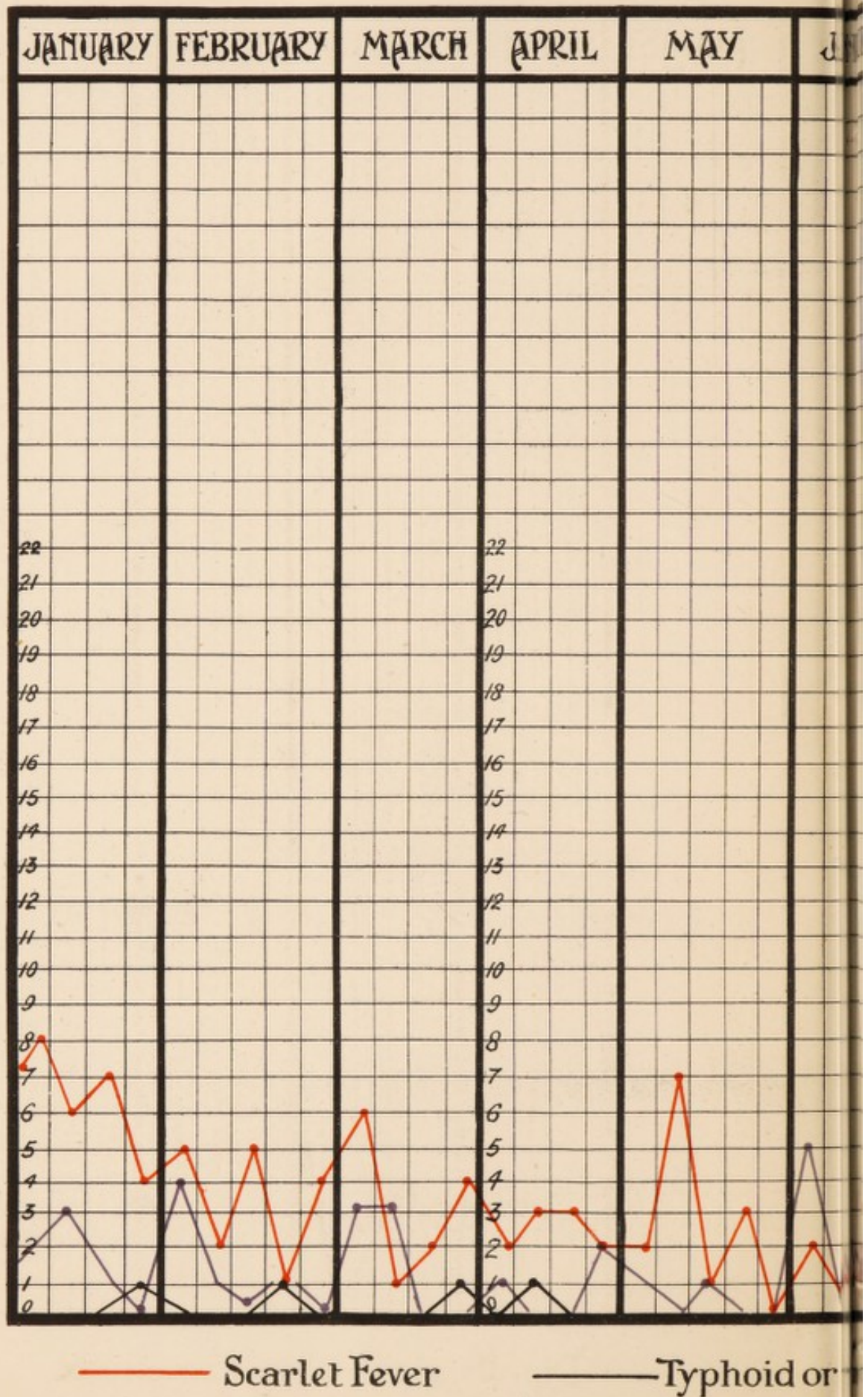
January 25th, 1905.





CHAPTER

RISE AND FALL OF INFECTIOUS DISEASES



SHOWING

DISEASE DURING YEAR 1904

