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Contributors

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Tutbury Rural District Council.

ANNUAL REPORT

OF


Medical Officer of Health

FOR THE YEAR 1897.

Presented to the Tutbury Rural District Council, 10th March, 1898,
and ordered to be printed.

C. F. CHAMBERLIN,

Clerk.



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TUTBURY RURAL DISTRICT COUNCIL.

Annual Report of Medical Officer of Health.

TUTBURY, BURTON-ON-TRENT,
MARCH 7TH, 1898.

To the Chairman and Councillors of the Tutbury Rural District.

GENTLEMEN,

I have the honour to submit to your authority, my Report for the year ending December 31st, 1897, and as in former years I propose first to draw your attention to the vital statistics, with the corresponding figures of 1896, afterwards giving an account of the various outbreaks of Zymotic Disease in the District, finally giving a short statement of the sanitary condition of the various parishes, and a few suggestions on matters requiring attention.

Area of District in Acres.—25,916.

Population.—In 1891 9,031
Estimated to middle of 1897 ... 9,385

Number of Births during the year.—

Males	...	137	} 1897	135	} 1896
Females	...	131		140	
Total	...	268		275	

Birth Rate per 1000 - 28.5 (1897) 29.4 (1896)

Number of Deaths.—

Males	...	64	} 1897	73	} 1896
Females	...	56		73	
Total	...	120		146	

Rate per 1000 - 12.8 (1897) ... 15.6 (1896).

Infantile Mortality (Deaths under one year)—

36 (1897)	36 (1896)
30.0 per cent. of Total Number of Deaths, or 134.3 per 1000 Births in 1897.	26.02 per cent. of Total Number of Deaths, or 138.1 per 1000 Births in 1896.

Zymotic Diseases caused seven deaths, equivalent to 0·7 per 1000 of the population in 1897. In 1896, twelve deaths occurred, equivalent to 1·2 per 1000 of the population.

The majority of these deaths occurred in the Borough Hospital, so that the actual Zymotic death-rate of the district would be considerably less, in fact, in 1897, it would be only 0·1 per 1000 of the population.

You will notice that I have not included *Measles* or *Whooping Cough* under the head of Zymotic Diseases, as they are not affected by ordinary sanitary conditions; limiting the use of the term to Typhoid Fever, Scarlet Fever, and Diphtheria.

DETAILED CAUSES.

	1897.	1896.
Diphtheria	1	0
Scarlet Fever	6	11
Typhoid Fever	0	1
Measles	5	5
Diarrhœa and Dysentery ...	5	0
Phthisis	11	8
Rheumatic Fever	1	1
Bronchitis, Pneumonia and Pleurisy	21	23
Heart Disease	10	15
Whooping Cough	3	0
Injuries	2	0
All other diseases	55	82

An analysis of the 120 deaths is as follows :—

Under one year	36
One and under five years ...	13
Five and under fifteen years	7
Fifteen and under twenty-five years...	10
Twenty-five and under sixty-five years	29
Sixty-five and upwards	25

It will be interesting to compare the death-rate of the two larger centres of population in the District, viz.:—

	Tutbury.	Barton-under-Needwood.
Population (last Census)...	2053	1765
Number of deaths during the year...	34	26
Death Rate per 1000	16·5	14·4
Deaths from Respiratory Diseases	11	9
Deaths under one year	9	6
„ sixty years and upwards ...	6	9

Influenza was prevalent early in the year, and again during November and December. It caused a considerable amount of sickness, but the epidemic was not marked by the severity of its respiratory complications as in former years. Abdominal disturbances seemed to be its marked characteristic.

It is a most infectious disease, and unfortunately sufficient importance is not attached to the isolation of those attacked by it. People who would never dream of visiting a case of *Scarlet Fever*, having no hesitation in sitting by the bedside of a person suffering from this complaint, and yet one disease is just as infectious as the other, and Influenza when not directly fatal, frequently so undermines the constitution, that permanent impaired health and early death is the result.

Rötheln, or German Measles, a disease of childhood, was very prevalent in the early summer, and again in October and November. Although very infectious, it is not a dangerous complaint (if the patient is protected from cold), seldom ending fatally.

The Diseases included under the *Notification Act* are :— Typhoid Fever, Diphtheria, Scarlet Fever, Smallpox, Membranous Croup, Erysipelas, Cholera, Typhus Fever, and Puerperal Fever.

The following cases were notified during the year :—

TYPHOID FEVER—1 Case.

January 14th. This was reported from the village of Stretton, and I attributed it to a foul untrapped sink drain, which I found on visiting the house with Mr. May. This defect was remedied, the patient recovered, and no other case occurred.

DIPHTHERIA—2 Cases.

April 1st. One case notified from a house near Kings-Standing.

November 4th. One case notified from a house near Rolleston Station.

SCARLET FEVER—15 Cases.

January 16th. One case reported from a cottage on Shobnall Road. Infection was contracted from another case of Fever in that part of the same road within the Borough.

January 19th. One case reported from a house at Barton-Gate. Two cases reported from Tatenhill Lane, Branstone.

January 24th. One case from the same house.

January 30th. One case from the same house as above.

The last four cases were removed (under the superintendence of Mr. May), to the Borough Hospital in accordance with the arrangement made by your Council, there being no means of securing proper isolation in their own house.

February 6th. One case reported from Hanbury. It was not easy to discover the source of contagion in this case, but was probably contracted at a hairdresser's in Burton-on-Trent.

February 23rd. One case from a house at Beam Hill.

March 10th. Two cases from the same house as the above. In these cases the fever was contracted at Horninglow School, which the children had been attending.

March 31st. One case reported from Craythorne.

November 11th. One case reported from a house in Forest Road, Shobnall. A girl in the same house was found to be in the service of a dairyman who has a large retail business in Burton-on-Trent; the girl in question going straight from the infected house to the Dairy each day until the fact was discovered. A boy also in the house was employed at a large business in Burton, going home to sleep at night.

Your Inspector took prompt measures in both cases to insure that neither was allowed to have any communication with the house until it was thoroughly disinfected on the recovery of the patients.

Milk is so easily infected by the germ of Scarlet Fever, that a very serious outbreak among the customers of the milkman, in whose service the girl was, might have occurred. Epidemics in Urban Districts frequently originating in this way.

December 6th. Two cases reported from a house in Rangemore. These were of an extremely mild type.

Compared with last year, the district has shown a great immunity from Scarlet Fever. You will notice not a single case being reported from the middle of April to the middle of November, and that out of the fifteen cases reported, nine houses only were infected.

This fact I consider eloquent testimony to the benefits derived from compulsory notification, which insures, so far as possible, careful isolation of each case, and subsequent disinfection of the houses and clothing of the patients; this latter procedure being carried out in a most thorough manner by your Inspector, Mr. May.

In former years, before the Notification Act was adopted in your district, I have frequently seen children freely desquamating (the most infectious stage) from Scarlet Fever, playing about the streets, and no doubt spreading the infection far and wide, the Sanitary Authority having no reliable means of information of the occurrence of the disease.

Measles was very prevalent and very fatal in some parts of the district, more especially in *Tutbury* during the latter part of the year.

In *Hanbury*, several cases occurred early in November, and on November 4th, I recommended the closure of the Schools. As it is almost impossible in the houses of the poorer classes to provide effectual separation of the sick from the healthy, it is commonly necessary to exclude all children in an infected house from school attendance; but when the disease is epidemic, and of a nature involving danger to life, it is usually advisable to close the schools, although this is a step seriously interfering with education. In a parish like *Hanbury* with a small and scattered population, closure of the schools is generally attended by good results, and limits the spread of the disease. In this parish I think I may say it had the desired effect.

In the middle of November an outbreak occurred in *Tutbury*, and in the month of December assumed very alarming proportions, and I determined to recommend the closure of the schools. I cannot say that this was attended by much benefit. The disease spread rapidly, and a large proportion ended fatally, death being due in most instances to Pulmonary complications (Pneumonia, Bronchitis). Whooping Cough being epidemic in the parish, many children were suffering from the two complaints at the same time. The disease prevailed during the month of December, and in spite of every precaution it was possible to take, only disappeared for want of human material. It was painfully evident during the epidemic that bad and careless nursing contributed in no small degree to the high mortality, and although Measles is not influenced by any ordinary sanitary conditions, I am strongly of the opinion that unhealthy surroundings, leaky drains, sewer gas, and impure water supply, all of which conditions prevail in the village, rendered the children puny and so deficient in stamina, that many succumbed to the disease, when, under happier circumstances, they might have been able successfully to fight against it.

Measles is most fatal in children under two years of age, but the greatest incidence of the disease is between two and five. After the fifth year, the liability to attack diminishes, which indicates the danger of the popular idea of mixing the healthy children with the sick 'to let them all have it together. By guarding them from infection until after five years of age, the liability to attack and the

danger of a fatal termination may be considerably lessened.

There are many sources of difficulty to contend with in the prevention of this disease. As I have mentioned on a former occasion, it is most infectious during the catarrhal stage, when it is often mistaken for an ordinary cold, and precautionary measures are not taken until too late. It is scarcely practicable to enforce compulsory isolation in Hospital; the expense would be enormous, and the advantages hardly compensatory. It has been contended that school closure as a means of prevention is not of much use, and during the recent epidemic in Tutbury, this was the case; but in scattered and thinly populated parishes at all events, it is of great importance.

The following is a Short Summary of the Sanitary Condition of the various Parishes in the District.

Anslow. Area in Acres, 1,492. Population (last census) 402. A case of overcrowding was discovered in this parish. I visited the house in company with Mr. May, and found the premises in a foul state. The case was promptly and successfully dealt with by your Inspector. I would again draw your attention to the privies at Anslow Schools, and would strongly recommend their removal, and the erection of new ones farther away from the school premises. With the exception of the above, the parish is in a fair sanitary condition.

Barton-under-Needwood. Area in Acres, 3,798. Population, 1,763. I visited four houses in the Station Road which were, in my opinion, quite unfit for human habitation. The cellars were covered with water to a depth of 18 inches; the walls of the houses, inside and outside, were quite damp. Mr. May took immediate action in the case, with the result that the owner had the cellars, yards and sinks connected with the main drain, and the premises made habitable.

By my direction, three samples of water were taken for analysis in the parish, and in each case the water was condemned as unfit for drinking and domestic purposes.

I would again urge your Council to have the main sewer extended to all properties that are now discharging drainage matter into brooks and ditches. Many sanitary improvements to cottage property have been carried out.

The parish is certainly in a much more sanitary condition than when I first visited it in 1895.

Branstone. *Area in Acres, 2,328. Population, 893.* I would urge your Council to drain Branstone Village. At the present time, the drainage from most of the houses is being discharged into the brook which flows into the river Trent. And I would draw your attention to the filthy state of the water-course that receives the drainage from a number of houses on Branstone Road.

In February last, two cases of very suspicious sore throat came under my notice in two houses on that road, no doubt caused by a very foul cesspool in a garden close by the Highway. This as you are aware has since been removed.

Dunstall. *Area in Acres, 1,706. Population, 246.* This parish is in a fairly satisfactory condition.

Hanbury. *Area in acres, 3,181. Population, 631.* Three samples of water were, by my direction, submitted to Mr. Cartmell for analysis, and pronounced to be unfit for domestic use. I am pleased to learn that your Council has taken the much needed water-supply in hand, and when that is brought to a successful issue, the parish would be in a good sanitary state.

Outwoods. *Area in acres, 1,051. Population, 625.* Several nuisances have been successfully dealt with during the year, and the parish at the present time is in a fairly good sanitary condition.

Rolleston. *Area in acres, 3,000. Population, 798.* With Mr. May I visited a number of houses in this parish, and found many nuisances and defects which have since been put right.

As I have mentioned, a case of Diphtheria was notified from a house near the station. The drains were found to be in a very good condition, and the water supply pronounced by the Analyst to be fairly good.

Tatenhill. *Area in acres, 2,458. Population, 598.* I should strongly recommend you to have a proper scheme of drainage carried out at an early date, and when this is done the parish will be in a good sanitary condition.

Wichnor. *Area in acres, 1,600. Population, 195.* This parish is in a very fair sanitary condition. No infectious diseases have been notified from here.

Stretton. *Area in acres, 1,210. Population, 825.* The main drain has been extended, and nearly all the untrapped road gullies in the village have been displaced by properly trapped ones. The Inspector has dealt with several nuisances. The parish is in a good sanitary condition.

Tutbury. *Area in acres, 4,092. Population, 2,053.* Many nuisances have been dealt with during the year, and since the Parish Council have undertaken the removal of house refuse and night soil, a decided improvement has been made.

The Sewerage Question has occupied your attention for a considerable time, and it is a matter of pressing importance. The difficulty being to find out which scheme is most suitable to the requirements of the place. The most promising method of treatment seems to be the *Bacteriological*, its principle being the filtration of sewage through some porous material which becomes coated with micro-organisms, whose function is to consume the solid matter. This solving action may be effected either by *aërobic* or *anaërobic* organisms. In either case the result is a sewage solution in which most of the organic constituents exist in a soluble form, the rest having escaped as organic gases. This is a natural means of sewage purification, and possesses great advantage over the ordinary chemical precipitation methods, which produced a sludge almost as difficult to deal with as the original material.

The success which has attended the Septic Tank treatment at Exeter, Sutton, and elsewhere, fully justifies the decision of the Government to appoint a Royal Commission to investigate the subject, and until the Commission has made its report, your Council would do well to further postpone dealing with the sewerage system of Tutbury.

The *Water Supply* is also unsatisfactory. I append Mr. Cartmell's Analysis and Report of a sample of water taken from what is known as the "Town Pump," which shows contamination with organic material.

"It contained the following quantities of total solids and organic matter expressed in grains per gallon :

"Total Solid Matter	...	...	50.5 grains per gallon.
"Free Ammonia	...	...	Trace only.
"Albuminoid Ammonia	...	...	0.0042 grains per gallon.
"Nitrogenous Nitrates,	with		
trace of Nitrites	...	...	0.2782 "
"Chlorine	...	...	3.8500 "
"Temporary Hardness	...	...	16.1 degrees.
"Permanent	,"	...	36.4 "
"Total	,"	...	52.5 "

“This sample of water in its present state although
“not containing a large amount of organic impurity, gives indi-
“cations of slight contamination. Nitrites are present, but not
“in very marked quantities. I do not consider it an actually
“safe supply to use for drinking purposes. As it is used for
“a public supply I should prefer a purer water.

(Signed) A. CARTMELL.

I have frequently seen the pump trough and ground surrounding it used as a urinal, and as a receptacle for all kinds of filth. I would recommend that the pump be fenced in.

Isolation Hospital. A suitable site has been chosen for the erection of a Hospital for Infectious Diseases at Anslow in the centre of the District. The situation is eminently suited for a hospital of this kind, being high, dry, and at a sufficient distance from any habitation.

Boring operations had to be carried out to a considerable depth before a sufficient supply of water could be obtained ; but this has been accomplished, and a sample submitted to Mr. Cartmell, who reported very favourably thereon.

Water Supply. As regards the water supply of the District, I cannot speak with unqualified satisfaction, and I have considered it advisable from time to time to have samples from the different parishes submitted to Mr. Cartmell for analysis, and in many cases he has reported unfavourably. This is a matter of the utmost importance to the welfare of the district, and although one can quite sympathise with the already heavily burdened ratepayers especially in the more thinly populated parishes in their objection to any additional outlay, nevertheless any expenditure in this direction will assuredly bring its reward in greater immunity from disease, and in prolonged life.

In view of the disastrous epidemics of water-borne fevers which have recently occurred in many parts of the country, this is a matter well worthy of your attention. It behoves us to profit by the experience of others, and not to relax our efforts until we can guarantee to every parish in the district a sufficient supply of pure and wholesome water. Although in past years we have had remarkable freedom from Enteric Fever, yet in some parishes, notably in Tutbury, we have no right to count upon a prolonged immunity.

(12)

I append the Tables required by the Local Government Board, as well as a statement of the work done by Mr. May to whose valuable help I am greatly indebted,

I am, Gentlemen,

Your obedient Servant,

KILDARE D. B. DOBBS,

Medical Officer of Health.

[illegible]

* The heading of column 19 is left blank for the insertion of Influenza, or any other disease which it may be thought desirable to record.

Area and Population of the District or Division to which
this Return relates :

Area, in acres 25,916
Population (Last Census) 9,031
,, (Estimated to middle of 1897) 9,385

Death Rates. { General, 12·8 per 1000 population, estimated to middle
of 1897.
Infant (under one year of age) 134·3 per 1000 Births
registered.

B. TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the year 1897, in the TUTBURY RURAL DISTRICT, classified according to Diseases, Ages, and Localities.

Names of Localities adopted for the purpose of these Statistics; Public Institutions being shown as separate localities.	Population at all Ages.		Registered Births.	Aged under 5 or over 5.	New Cases of Sicknes in each Locality, coming to the knowledge of the Medical Officer of Health.											Number of such Cases removed from their Homes in the several Localities for Treatment in Isolation Hospital.										
	Last Census.	Estimated to middle of 1897.			1	2	3	4	5	6	7	8	9	10	11	1	2	3	4	5	6	7	8	9	10	11
					Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Fevers.						Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Fevers.						Cholera.	Erysipela.
									Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.					Erysipelas.	Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.		
(a)	(b)	(c)	(d)	(e)																						
Anslow, Rolleston, Tutbury and Hanbury	3884	3946	113	Under 5																						
				5 upwards		1	2																			
Barton, Dunstall, Wichnor, Branstone, Tattubill, Outwoods, and Sireton	5147	5439	155	Under 5		4										2										
				5 upwards		10			1					1		2										
TOTALS	9031	9385	268	Under 5		4										2										
				5 upwards		11	2		1					1		2										

Notification of Infectious Disease has been compulsory in the District since August, 1895.

TABLE OF POPULATION, HEALTH, AND VITAL STATISTICS

of Health, during the year 1900

Age	Population in 1900				Total
	Male	Female	White	Colored	
Under 5 years	100,000	100,000	100,000	100,000	400,000
5 to 14 years	150,000	150,000	150,000	150,000	600,000
15 to 24 years	150,000	150,000	150,000	150,000	600,000
25 to 34 years	150,000	150,000	150,000	150,000	600,000
35 to 44 years	150,000	150,000	150,000	150,000	600,000
45 to 54 years	150,000	150,000	150,000	150,000	600,000
55 to 64 years	150,000	150,000	150,000	150,000	600,000
65 to 74 years	150,000	150,000	150,000	150,000	600,000
75 to 84 years	150,000	150,000	150,000	150,000	600,000
85 years and over	150,000	150,000	150,000	150,000	600,000
TOTALS	1,500,000	1,500,000	1,500,000	1,500,000	6,000,000

Annual Report of Medical Officer of Health, 1897.

RURAL SANITARY DISTRICT OF TUTBURY.

(A) Deaths Registered during the year 1897, classified according to Diseases, Ages, and Localities; showing also the Population of such Localities and the Births therein during the year.

Names of Localities adopted for the purpose of these statistics; public institutions being shown as separate localities.	Population.		Registered Births.			Deaths from all causes, at subjoined ages.										Mortality from subjoined causes, distinguishing Deaths of Children under 5 Years of Age.																						
	Census, 1881.	Estimated in 1897, as per Census of 1891.	Males.	Females.	Total.	At all ages.																																
						Males.	Females.	Total.	Under 1 year.	1 year and under 5.	5 years and under 15.	15 years and under 25.	25 years and under 65.	65 years and upwards.																								
																1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20			
																Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Fever.																		
																				Typhus.	Erysip. or Typhoid.	Continued.	Relapsing.	Purpura.		Cholera.	Erysipelas.	Measles.	Whooping Cough.	Dysentery and Dysentery.	Rheumatic Fever.	Phthisis.	Bronchitis, Pneumonia and Pleurisy.	Heart Disease.	Injuries.	All other Diseases.		
Andover, Buntingford, Tutbury, and Hasbury	3884	3946	53	60	113	30	28	58	17	6	6	6	11	12	Under 5													5	3	1			2			12		
															5 upwards			1													1	6	5	4	1	17		
Barton, Dunstable, Winkhoe, Brimstone, Tutenhill, Ousewood, and Strithon	5174	5439	84	71	155	32	24	56	19	1	1	4	18	13	Under 5															3			8			9		
															5 upwards															1		5	6	6	1	17		
Borough Hospital						2	4	6		6					Under 5		6																					
															5 upwards																							
TOTALS	9031	9385	137	131	268	64	56	120	36	13	7	10	29	25	Under 5	6												5	3	4			10			21		
															5 upwards			1												1	1	11	11	10	2	34		
Deaths occurring within the District among persons not belonging thereto which may be deducted from the above totals in estimating the rate of mortality ..						2	4	6							Under 5		6																					
															5 upwards																							

(Signed) KILDARE D. B. DOBBS, M.O.H.

1911
1912

Report of the

Board of Directors

for the year ended December 31, 1911

Assets		Liabilities	
Capital stock		Notes payable	
Surplus		Accounts payable	
Real estate		Other liabilities	
Investments			
Receivables			
Prepaid expenses			
Other assets			
Total		Total	
Income Statement		Balance Sheet	
Operating income		Assets	
Interest income		Liabilities	
Dividend income		Equity	
Other income			
Operating expenses			
Interest expense			
Other expenses			
Net income			
Total		Total	

1912
1913

ANNUAL REPORT OF MEDICAL OFFICER OF HEALTH, 1897.

RURAL SANITARY DISTRICT OF TUTBURY.

B. New Cases of Infectious Sickness coming to the knowledge of the Medical Officer of Health during the year 1897, enumerating the Number of Houses Infected, the Total Number of Deaths, also the Number of Cases Treated and the Deaths that occurred in Infectious Hospitals.

		Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	Measles.	Whooping Cough.
Houses infected			9	2			1					1		
Total cases reported among persons belonging to District	Under 5		6											
	5 upwards		9	2			1					1		
Total deaths reported among persons belonging to District	Under 5												5	3
	5 upwards			1										
Cases treated in Hospital among persons belonging to District ..	Under 5		2											
	5 upwards		2											
Deaths occurring in Hospital among persons belonging to District ..	Under 5													
	5 upwards													

Is "Notification of Infectious Diseases" compulsory in the District? Yes. Since when? August 1st, 1895.

Is Measles included among the Diseases notified? No.

Is Whooping Cough No.

Is an Isolation Hospital available for the District? No.

Area of District in acres? 25,916.

(Signed) KILDARE D. B. DOBBS, M.O.H.

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Summary of Sanitary Work done in the Inspector of Nuisances' Department during the Year 1897, in the Rural Sanitary District of Tutbury.

	Inspection and observations made.	Formal Notices by Authority.	Nuisances Abated after Notice.
Dwelling Houses and Schools—			
Foul Conditions	3		
Structural Defects	33		
Overcrowding	1		
Unfit for Habitation	5		
Lodging Houses			
Dairies and Milkshops			
Cowsheds	117		
Bakehouses			
Slaughter-houses	6		
Canal Boats			
Ashpits, Privies and Cesspools	279		
Deposits of Refuse and Manure	55		
Water Closets	2		
House Drainage—			
Defective Traps	66		
No Disconnection	56		
Other Faults	15		
Water Supply	3		
Pigsties	29		
Animals improperly kept	56		
Offensive Trades			
Smoke Nuisances			
Other Nuisances	142		
TOTALS. ..	868	13	13

Seizures of unwholesome Food
Samples of Food taken for Analysis
" " found Adulterated
" of Water taken for Analysis—10
" " condemned as unfit for use—7

PRECAUTIONS AGAINST INFECTIOUS DISEASE.

Lots of Infected Bedding Stoved or Destroyed—13
Houses disinfected after Infectious Disease—13
Schools " " " "
Prosecutions for not Notifying Existence of Infectious Disease
Convictions " " " "
Prosecutions for Exposure of Infected Persons or Things
Convictions " " " "

2nd March, 1898.

WILLIAM J. MAY,
Inspector of Nuisances.

