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❖ R E P O R T ❖

OF THE

Medical Officer of Health

FOR THE

URBAN DISTRICT COUNCIL

OF


WALTON-LE-DALE.

For the Year 1898.

PRESTON :

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T H E
MEDICAL OFFICER'S REPORT
FOR THE YEAR 1898.



MR. CHAIRMAN AND GENTLEMEN,

In presenting my Annual Report for the Year 1898, it will be my endeavour to furnish as briefly and with as little repetition as possible a summary of those reports which have been laid before you from month to month, and with which you are already perfectly familiar. Such reports afford little opportunity for variation, treating as they do year after year almost similar occurrences and statistics, a stereotyped method of expression becomes indispensable, which must be most monotonous to those who are obliged to give them their attention; but this much I may be permitted to say, they involve matters which are of paramount importance to the health, comfort, prosperity and longevity of a population.

The population of the Township has been estimated at 11,733. It has been worked out on the plan adopted by the Registrar-General by means of logarithms, which is assumed to be most accurate.

During the year there were recorded 351 births and 189 deaths, giving a birth-rate for the year in each thousand of the population of 29·21, and a death-rate of 15·25. The excess of births over deaths gives a natural increase to the population of 162, while the births exceeded those of 1897 by 13. Of the births 175 are males and 176 females. Of the deaths 92 were males and 97 females.

The variations in the death-rate from year to year afford matter for thought, and forcibly bring home to us the consciousness of how much or how little can be done towards lowering it. In the year 1894 the rate was 15·19, in 1895 20·76, in 1896 14·36, in 1897 19·49, and in 1898 15·25. From the fact that the great proportion of the population is composed of artisans working year in and year out in not the most salutary surroundings, a death-rate of 15·25 must not be looked on as excessive.

Under one year old there were 53 deaths, one year and under five 19, five and under fifteen 6, fifteen and under twenty-five 8, twenty-five and under sixty-five 68, sixty-five and upwards 35. Of these latter, 7 were over seventy-five, 7 over eighty, and 1 ninety-one. If we look on all the deaths under five years as those of infants, during the past year there has been a marked improvement over 1897, in that year there were 98, while in the past year there were only 72. This mortality might be diminished by greater care on the part of parents and nurses. Disease and untimely death are not the heritage of all new-born infants. At no period of life will improved sanitary surroundings, judicious feeding, and comfortable clothing do more to lower mortality than during the tender years of infancy. These conditions appear, at first sight, as very simple and such as might be followed without putting an undue amount of trouble on the parents ; but from the fact that many of the mothers seek employment in the factories,

their infants are handed over to day nurses, the bulk of whom devote but little time and less attention on them, with the result that many die from disorders which would not have occurred under more favourable auspices.

Four deaths were caused by typhoid fever, one by puerperal fever, one by measles, fifteen by diarrhœa, one by rheumatic fever, thirteen by phthisis, thirty-one by diseases of the respiratory organs, twenty-two by heart disease, one by injury, and one hundred are classed as having occurred from "all other diseases." Of the latter, nineteen were caused by tuberculosis; this disease is engaging a great deal of attention both from the medical profession, the different county authorities, and the Board of Agriculture, with a view to the most successful means of preventing its spread by the consumption of milk obtained from infected animals. This movement we must recognise as one in the right direction and calling for the assistance of all who may be able to give it any additional impetus. The view taken at the present time that tuberculosis is not hereditary and not incurable is rather comforting to those who have it in their families. With the first of these assertions, for my part, I am not wholly able to concur. With the latter, under given conditions, I am quite in accord. Should the first theory prove to be correct, we are quite within measurable distance of seeing consumption stamped out of the land.

The deaths from zymotic diseases number 21, and give a death-rate in each thousand of the population of 1.78 or 11.11 per cent. of the total deaths. These figures show a marked improvement if contrasted with 1897, in that year the rate was 3.20 or 16.43 per cent. of the total deaths. Four of these deaths were from typhoid fever, one from puerperal fever, one from measles, fifteen from diarrhœa. Fourteen occurred under five years old. Two of the typhoid fever cases occurred in Bamber Bridge, one in Gregson Lane, and one in Tardy Gate. The death

from puerperal fever took place in Bamber Bridge, that from measles also occurred in Bamber Bridge. The first death from diarrhœa was in the month of May, and took place in Higher Walton; then in September nine occurred, three in Bamber Bridge, three in Higher Walton, two in Walton-le-Dale, and one in School Lane; in October four occurred, all in Bamber Bridge, the last was recorded in November and fell to the lot of Bamber Bridge. Twelve out of a total of 21 zymotic deaths occurred in Bamber Bridge.

In comparison with 1897 the deaths from diseases of the respiratory organs and heart disease combined show a much higher mortality; in 1897 they numbered 50, in the past year 66. It is unnecessary to localise them, in a township like ours no special importance attaches to such classification.

The deaths from diarrhœa were fifteen, or four less than during the previous year, thirteen died from the infantile form of the disease. The causes of diarrhœa are so numerous it is almost impossible to combat them all, yet there are some quite within our power or control, and I would again urge on parents the absolute necessity there is on their part for careful management in diet, clothing, cleanliness, and abstinence from the use of many of the patent medicines that flood the chemist shops. Should they desire to bring their infants up to be strong and healthy children they must observe such rules.

Under the Infectious Diseases Notification Act, 1899, twenty-five cases were notified, or twenty-seven less than in the previous year, giving 2.13 infectious cases in each thousand of the population, or 2.62 less than in 1897; this falling away is due to the decline of the epidemic of erysipelas from which the township suffered during the greater part of that year. Nine of the notifications were for erysipelas, three scarlatina, eleven typhoid fever, and two diphtheria. One case of erysipelas occurred in

Higher Walton, two in Bamber Bridge, one in Lostock, and five in Walton-le-Dale; the three scarlatina cases occurred in Bamber Bridge; seven of the typhoid fever cases occurred in Bamber Bridge, one in Gregson Lane, two in Lostock, and one in Walton-le-Dale. One of the diphtheria cases occurred in Lostock, the other in Coup Green.

As heretofore Bamber Bridge monopolized a much greater number of cases in proportion to its population than any other section of the township, Higher Walton, Gregsen Lane, and Coup Green, escaped with one each.

The opening month of the year was ushered in with an awe inspiring number of infectious cases, the epidemic of erysipelas of the previous year not having exhausted itself until the end of April. February and March were healthy months. In the month of April I inspected and reported on the dilapidated condition of a cottage in Meany Gate. Influenza of a mild form appeared and continued prevalent during the months of May and June. In the latter month a large number of chest cases were under observation. My report for July and August finished with the sentence "the health of the township is satisfactory." In September, I remarked, but for the nine deaths which occurred from diarrhœa, which the township might possible have escaped as it did in the corresponding months of 1878, 1882, and 1891, the mortality would have been very low or only at the rate of 9·20. Although the deaths numbered twenty in the month of October there was not an infectious case notified.

In the month of December five cases of typhoid fever were notified. One of these occurred in what I might call an isolated house in Gregson Lane, really a country place. With the Nuisance Inspector, I visited the house, which I found clean, well-built, and thoroughly drained. Up to a short time

before the fever appeared, the inmates drank rain water, collected from the roof where pigeons frequented; the water was stored in a cistern under the floor and had a most unpleasant smell. I cannot help thinking the cause of the illness was due to the use of this water; the other four cases occurred in Bamber Bridge. It is a most difficult matter to satisfactorily account for the prevalence of zymotic disease in this part of the township, it cannot be due to the water-supply else the rest of the township would suffer in a like manner; this not being the case, to what then am I to attribute it. I am firmly of the conviction it is caused by the filthy condition of the soil, brought about by a sewage saturated condition anterior to the completion of the new Sewage Works. In a lesser degree the same evil is still going on and may be seen in full operation in most of the back yards in the township. Suds and other filth are thrown on the badly paved yards, which become saturated and so continue the mischief. All these yards should be paved with setts, the interstices filled with pitch and tar rendering them perfectly water-tight and so putting an end to further percolation.

A patient suffering from typhoid fever was the only case admitted and treated during the year in the Bradkirk Fever Hospital.

I have not been informed of any want of cleanliness on the part of owners of bake or slaughter houses, those that I visited I found in good order.

From your Sanitary Inspector I have received the following information, which gives some idea of the amount of work carried out by him.

The owners of 136 houses have been served with notices to remove nuisances. Two occupiers have been served with notice to remove fowls. Four owners have been served with

notice to remove and re-build closets at a greater distance from the houses. Owners of nine houses have been required to clean and lime wash their houses. Sixteen owners have been required to re-drain their houses, the drains being in an imperfect condition, some of them passing under the houses. Two persons were served with notice to enlarge back-yards and re-build closets. Eighty-three closets have been altered to use the waste water. The owners of three farms have been required to provide a good water supply, they have had the District Council Water put in. Twenty-three houses have been supplied with the District Council Water where the former supply was inadequate. One house was condemned as unfit for habitation, and one for over-crowding. Thirty-six ash-pits made dry. Twenty parcels of bedding disinfected in the hot air chamber. Nineteen houses were disinfected by fumigation, 5,725 bogs and ash-pits were emptied, and 32,495 pails.

Forms A, B, and C, are attached to the report.

I am Gentlemen,

Your obedient Servant,

ROBT. TRIMBLE, M.D., F.R.C.S., D.P.H.

*The Walton-le-Dale Urban District Council,
27th February, 1899.*

NOTES ON TABLES A AND B.

- NOTE 1. *Medical Officers of Health of 'Combined Districts' must make a separate Return for the District of each District Council.*
2. *Medical Officers of Health acting for a portion only of the District of a District Council should write, in the heading of the Table, the designation of the Division for which they act.*
3. *The words "Urban," "Rural," or "Metropolitan" must be inserted in the appropriate space in the heading, according as the District is Urban or Rural, or is within the Metropolitan Area.*
4. *The "Localities" adopted for the purpose of these statistics should be areas of known population; such as parishes, groups of parishes, townships or wards.*

As stated at the head of the first column in each Table *Public Institutions* should be regarded as separate localities, and the deaths in them should be separately recorded. Workhouses, Hospitals, Infirmarys, Asylums, and other establishments into which numbers of people, and especially of sick people, are received are Public Institutions for the purpose of these statistics.

5. *The deaths which have to be classified in this Table (A), and summed up in the horizontal line of "Totals," are the whole of those registered as having actually occurred in the several localities comprised within the Division or District. But the registered number of deaths frequently requires correction before it can give an exact view of the mortality of a Division or District; and the two lowest horizontal lines are provided for the purpose of enabling Medical Officers of Health to indicate, to the best of their ability, what the extent of such corrections should be. Details concerning the corrective figures, e.g., the institutions that have been considered, or the particular localities to which corrections apply, may appear in the text of the report or in supplementary tables.*

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

Area in Acres, 4682.

Population (last Census), 10,930.

Population (estimated to middle of 1898), 11,733.

Death Rates.	{	General, 15.25	{	per 1,000 Population, estimated to middle of 1898.
		Infant (under one year of age)	{	per 1,000 Births Registered.

In recording the facts under the various headings of Tables A. and B, attention has been given to the notes endorsed on the Tables.

ROBT. TRIMBLE, Medical Officer of Health.

(Date), 27th February, 1899.

(A)—TABLE OF DEATHS during the Year 1898, in the Urban Sanitary District of Walton-le-Dale, classified according to DISEASES, AGES, and LOCALITIES.

NAMES OF LOCALITIES adopted for the purpose of these Statistics; public institutions being shown as separate localities (see note 4 on back of sheet) (Columns for Population and Births are in Table B)	Mortality from all causes, at subjoined ages.							Mortality from subjoined causes, distinguishing Deaths of Children under Five Years of Age.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
	b	c	d	e	f	g	h	1 Smallpox.	2 Scarlatina.	3 Diphtheria.	4 Membranous Croup	Fevers.					10 Cholera	11 Erysipelas.	12 Measles.	13 Whooping Cough.	14 Diarrhoea and Dysentery.	15 Rheumatic Fever.	16 Phthisis.	17 Bronchitis, Pneu- monia, & Pleurisy	18 Heart Disease.	19 *	20 Injuries.	21 All other Diseases.	22 TOTAL.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
	At all ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.					5 Typhus.	6 Enteric or Typhoid.	7 Continued.	8 Relapsing.	9 Puerperal.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
WALTON-LE-DALE	189	53	19	6	8	68	35	72																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
URBAN DISTRICT..	

* 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.

**(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 1898, in the Urban Sanitary
District of Walton-le-Dale; classified according to DISEASES, AGES, and LOCALITIES.**

NAMES OF LOCALITIES adopted for the purpose of these Statistics ; Public Institutions being shown as separate localities. (See Note on back of sheet.)	Population at all ages.		p. Registered Births.	Aged under 5 or over 5.	New Cases of Sickness 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 1898.			Fevers.													Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Fevers.								
					1	2	3	4	5	6	7	8	9	10	11	12	13					1	2	3	4	5	6	7	8	9	10	11	12	13
WALTON-LE-DALE	10930	11733	351	*	..	3	2	..	..	11	..	..	..	9	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..
URBAN DISTRICT..	10930	11733	351	*	..	3	2	..	..	11	..	..	..	9	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..

* Have no means of knowing the ages of cases notified.

State here whether "Notification of Infectious Disease" is compulsory in the District. — Yes. Since when?—1893. Besides the above-mentioned Diseases, insert in the columns with blank headings the names of any other diseases that are notifiable in the District, and fill the columns accordingly. State here the name of the Isolation Hospital used by the Sick of the District. Mark (H) the Locality in which such Hospital is situated; or if not within the District, state where it is situated. — Bradkirk Hospital, in the District.

Notes on Table B.

(See also Notes on back of Table A.)

- NOTE 1. The present *Table B.* is concerned with population, births, and sickness (not with mortality) in the district or division to which the Table relates.
2. As stated in the heading of Col. (a), *Public Institutions* should be regarded as separate localities, and the new cases of sickness in them should be separately recorded. Workhouses, Hospitals, Infirmaries, Asylums, and other establishments into which numbers of people, and especially of sick people, are received, are Public Institutions for the purpose of these statistics.
3. *Comments on any unequal incidence of notifiable disease upon the several localities, and considerations as to the local incidence of Consumption and other prevalent diseases, should be made in the text of the Report.*

TABLE C.

COUNTY OF LANCASTER.

Summary of Medical Officer's Report

FOR 1898.

URBAN SANITARY DISTRICT OF WALTON-LE-DALE.

Area in Statute Acres	-	-	4,682 3r. 1p.
Population (Census) 1891	-	-	10,556.
Population, Estimated 1898	-	-	11,733.

Name of Medical Officer of Health: ROBT. TRIMBLE.

SALARY £50.

Births registered: Male, 175; Female, 176; Total, 351.

Deaths registered: Male, 92; Female, 97; Total, 189.

Birth-rate, 29·21. Death-rate, 15·25. Rate of Infant deaths, under one year, to 1,000 births, 150·99. Death-rate from the seven principal Zymotic Diseases, per 1,000 of population, 1·78. Diseases prevalent? Erysipelas, cases of Typhoid Fever occasionally. Period? January, February, March, April. What action taken? Disinfection. Any Schools closed? No.

What is the character of the Hospital Accommodation? Hospital, eight beds. Is it joint or otherwise? No. No. of Beds available for the District? Eight. What were the Cases treated? One of Typhoid Fever. Deaths in Hospital? None.

How is Disinfection carried out? Fumigation. Apparatus used? Hot-Air Chamber.

Is the Infectious Disease (Notification) Act in force? Yes. Are any Diseases not specifically mentioned in the Act notifiable? No.

SUMMARY. — Continued.

What is the character of House Accommodation?	Cottage Houses.
Has any action been taken under "The Housing of the Working Classes Act, 1890"?	No.
Have any houses condemned as unfit for human habitation been closed or demolished? If so, how many? ...	One.
Is the Water Supply good and subject to your inspection	Yes, excellent.
Is Scavenging carried out satisfactorily?	Fairly well.
By Sanitary Authority or Contract?	Contract.
How is the Refuse disposed of?	Manure.
What is the character of Drainage and the form of Sewage Disposal? ...	Sewers, Tanks, Precipitation with Lime, afterwards Ferri Sulph.
Canal Boats?	Very seldom.
What is the condition of the Bakehouses? ...	In good order.
Slaughter Houses?... ..	Like the Bakehouses.
Lodging Houses? Are they Registered? ...	None.
Are the Dairies, Cowsheds and Milkshops periodically inspected?... ..	No Dairies of a public character.

SUMMARY - Continued

Have the Factories and Workshops been inspected, and with what result?	Yes, satisfactory.
Food unfit for Human Consumption, amount seized?... ..	None.
Any Special Report of Medical Officer of Health during the year?	No.
Department of Inspectors of Nuisances	(No. of Notices served ... 168. (No. of Nuisances remedied 18.
Smoke?	None.
Has the Authority adopted (a) "The Infectious Disease (Prevention) Act, 1890"? ...	Yes.
(b) "The Public Health Acts Amendment Act, 1890"? ...	Yes.

