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Mednesbury.

Annual Report

OF THE

MEDICAL OFFICER OF HEALTH, FOR THE YEAR ENDED DECEMBER 31, 1903.

WALTER C. GARMAN, M.D., EDIN.,

MEDICAL OFFICER OF HEALTH.

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1904,

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BOROUGH OF WEDNESBURY.

REPORT

UPON THE

HEALTH OF WEDNESBURY

FOR THE YEAR 1903,

BY

WALTER GARMAN, M.D., Edin.,

MEDICAL OFFICER OF HEALTH.

TO THE MAYOR AND MEMBERS OF THE WEDNESBURY TOWN COUNCIL.

MR. MAYOR AND GENTLEMEN,

I have pleasure in presenting to you my Annual Report for the year 1903.

The statistics which are given are based upon an assumed population of 26,700, as was the case last year.

1.—VITAL STATISTICS.

The number of births registered during 1903 was 900 (males 464, females 436) which is equal to a birth-rate of 33.7 per 1,000 of the population. The natural increase of births over deaths was 463. The deaths from all causes numbered 437, which is equal to a death-rate of 16.3 per 1,000 of the population. The deaths of children under five years of age numbered 216- or 49.4 per cent of the total deaths. Of these 130 were under one year of age.

Measles \dots \dots 2 59 1 13 1 Whooping Cough \dots 21 1 16 11 19	Diseases Bronchitis and Pn		 81 30	64 39	18 37	27 46	13 41
					3		$\frac{22}{1}$
	Th' I was		 $\frac{21}{59}$	$\frac{1}{43}$	16 29		19 11
Diphtheria 3 1 4	Diphtheria .			1.	3	1	$\frac{4}{105}$
			241	266	193	219	216
241 266 193 219 216		al Deaths	 50.2	50.05	50.00	48.00	49.4

The following table furnishes an analysis of deaths under five years of age during the past five years :—

It will be seen that, as usual, half of the total deaths have occurred amongst children under five years of age.

The next table gives the deaths due to zymotic disease. These, during 1903, numbered 73 – a number equal to a zymotic death-rate of 2.7 per 1000. For the purpose of comparison the corresponding figures for the preceding four years are included in this table.

Dea	th-rat	e per 1	,000		 3.7	4.4	$2 \cdot 4$	1.9	2:7
Tot	al				 97	116	65	53	73
Influenza			••••		 -	-	5	2	5
Whooping Co	ough				 22	1	16	11	19
Diarrhœa					 65	46	31	7	13
Diphtheria					 	-	5	1	5
Measles					 2	59	1	14	1
Scarlet Feve	r				 4	6	3	13	27
Fever-Simp	ole, con	tinued,	and T	yphoid	 4	4	4	5	3
Smallpox					 		-	-	
					1899	1900	1901	1902	190.

Year.	Bronchitis and Pneumonia.	Phthisis.	Total.
1899	73	21	94
1900	83	35	118
1901	72	12	84
1902	98	19	117
1903	81	18	99

The next table gives the mortality from pulmonary disease :---

Following is a statement of the Vaccination performed during the year ending June 30th, 1903 :--

Births Registered.	Successfully Vaccinated.	Insuscepti- ble.	Dead unvac- cinated	Medical post- ponement.	Certificates sent in of conscientious objections.	Removals known.	Removals unkncwn.	Unaccounted for.
931	743	11	92	7	40	7	27	4

The inquests held by the Coroner numbered 19, which may be thus stated : —

Natural C	auses		 	 	8	
Accidents			 	 	8	
Suicide			 	 	2	
Murder			 	 	1	
		Total	 	 	19	

The next table sets forth the deaths occurring during 1903, from all causes, classified according to diseases and ages for the four quarters, and of births for the same period :—

$\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$											
$\frac{1}{10000000000000000000000000000000000$		Other canses	20		19	28	6	16	27	21	161
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automatic access at subjoined ages. automatic and under 55 years Mirths. Paaths. Pa	nde	Phthisis	-	00		9		9		00	18
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Quarter Quarter Quarter Quarter			1 222		8 228		3 214		1 285		906 6
Quarter Quarter Quarter Quarter		ths.									820
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Quarter Quarter Quarter Quarter		E E	10		10:		11		11.		00
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2mil 2mil 4th					Quarter				Quarter		
			1st		2ml		ard		4th		

Urban District of Wednesbury.

CAUSES OF	dea'	тн.		All Ages.	Under 1 year	under	5 and under 15	15 and under 25		65 and up- wards
Measles				1	1				-	
Scarlet Fever				26	4	18	3	-	1	
Whooping Cough				19	9	10				
Diphtheria and Me	embra	nous C	roup	7		6	1			
Enteric Fever		·		3		1		1	1	
Influenza	,			5	1			-	2	2
Diarrhœa				13	10	1			1	ĩ
Enteritis				23	16	6				i
Puerperal Fever				1				1		
Erysipelas				5	1		P	i	2	1
Phthisis				18	-		1	2	15	-
Other Tubercular	Diseas	es		12	1	5	4	Ĩ	1	
Cancer, Malignant					1				ā	6
Bronchitis				53	15	12		1	11	14
Pneumonia				28	4	10	1	1	12	1
Alcoholism)			1.000	1	10	1		12	1
Cirrhosis of Liver	1			8					8	
Venereal Diseases				6	6				0	
Premature Birth				13	13					
Diseases and Acci		of Par	rturi-		10					
Heart Disease			•••	2			1000	1	1	
Accidents	••••	••••	•••			1	1	1	14	12
Accidents Suicides	•••			1	3			1	4	-1
				2	1				1	1
All other causes	••••			144	46	16	6	5	31	40
All cause	98			437	130	86	17	14	110	80

Causes of, and ages at, Death during 1903 : --

Year.	Estimated Population.	No. of Births,	No. of Deaths.	Death-rate per 1,000 living.	Birth-rate per 1,000 living.	Zymotic Death-rate
1894	25,300	825	402	15.8	32.6	2.4
1895	,,	872	499	19.7	34.4	1.9
1896	,,	859	528	20.8	37.9	3.2
1897	,,	899	499	19.7	35.5	2.7
1898	26,000	938	486	18.6	36.0	3.9
1899	,,	900	480	18.4	34.6	3.7
1900	,,	925	526	20.2	35.5	4.4
1901	26,544	876	387	14.5	33	2.4
1902	26,700	954	450	16.8	35.9	1.9
1903	,,	900	437	16.3	33.7	2.7

Following is a table giving the average birth-rate, death-rate and the zymotic-rate for the past ten years :—

Following is a list of deaths occurring during the year in each street, the zymotic deaths being separately indicated :

Street			Deaths from all causes.	Zymotic Deaths
Addison Street		 	3	1
Albert Street		 	7	1
Alma Street		 	1	
Bilston Road		 	6	2
Birmingham Street		 	3	2
Brookside		 	1	
Butcroft		 	3	
Brunswick Park Road		 	7	
Bright Street		 	2	1
Brickkiln Street		 	7	1
Bridge Street		 	10	1
Thapel Street, King's	Hill	 	2	
Corns Street		 	6	
Camphill Lane		 	2	1
Camp Street		 	7	3
Church Hill		 	9	2
Church Street		 	10	1
Church Street, King's	Hill	 	2	1
Cobden Street		 	3	1
Cook Street		 	11	1
Cross Street		 	3	
Delves		 	3	
Dale Street		 		1
Dangerfield Lane		 		
Darlaston Road		 	4	
Darlington Street		 	4	

Street				Deaths from all causes.	Zymotic deaths.
Dudley Street				 6	2
Earp's Lane				 2	
Elwell Street				 5	1
Foley Street				 4	i
Foster Street				8	
Franchise Street				 9	ī
Great Western S	treet			 6	
a a .				 1	
High Street (Up)		Lower)		 7	2
II II D i				 2	2
Holden Road Hitchen's Croft				 5	1
IT:II CL					1
II-l I	••			 4	1
Hobbins Street				 2	1
				 4	
Holyheid Road				 17	4
Hollies Drive		•••	•••	 1	
Hall End	••	•••	•••	 2	
King's Hill	••			 10	1
King Street	••			 4	1
				 4	2
				 2	1
Ladbury's Lane				 13	2
Lea Brook				 3	
Loxdale Street				 4	1
				 4	1
Mill Street				 1	
Meeting Street				 õ	
Moxley				 17	5
				 1	1
Oakeswell Street				 2	
Old Park Road				 4	1
Old Union Street	;			 6	1
				 7	
Perry Street				 2	
				 1	1
Pound Road				 4	2
Pritchard Street.				 i	-
Piercy Street				 13	1
Destar Dal				 17	1
Detter Terr				 9	1
Daula Stand				 5	4
Queen Street				 8	1 -
Dana 11 Street				 3	1
Rooth Street				 1	1
Ridding Lane				 6	
Calcal Street				 2	
				 2	1

Street.			Deaths from all causes	Zymotie deaths
Spring Head		 ·	1	
St. Paul's Road		 	4	
Short Street		 	2	
St. James' Street		 	5	
Stafford Street		 	3	
Sparrows Forge Lane		 	2	1
Terrace Street		 	3	
Frouse Lane		 	6	3
Union Street		 	5	
Vicarage		 	3	
Vicar Street		 	4	1
Windmill Street		 	4 -	1
Well Street			i	-
Wood Street			1	
Wellcroft Street		 	î	
Walsall Road			4	1
Vin de H	au	 ••••	10	
Woodgreen		 	9	1

The following table gives the cases of zymotic disease notified to the Health Authority under the Notification of Infectious Diseases Act:—

Scarlet Fever		 486
Diphtheria		 37
Erysipelas		 35
Enteric Fever		 18
Puerperal Fever		 4
Membranous Crou	ıp	 2
Total		 582

The foregoing figures supply such statistics as are needed in order to form an opinion as to the health of the town during the year. The outstanding feature of the year_l is furnished by the notifications of Scarlet fever, which numbered 486, and which were nearly twice as numerous as those of the preceding year. The epidemic commenced in 1900, and thus has been characterised by marked persistence.

In that year, 154 cases were notified, with 6 deaths. 3 In 1901, 215 22 22 22 22 ,, 1902, 272 13 ., 22 22 27 1903, 486 22,, ... 77 22 22

10

It is thus made clear that a wide-spread epidemic has prevailed, and the only matter for surprise is that there have not been many more deaths than actually occurred.

In view of the foregoing facts, it is obvious that we should come to a decision as to the possibility of coping with such an outbreak by definite steps of a practical nature. In this connection the first thing that arises is the question of isolation-and to this question I have given careful and prolonged consideration. In last year's report I urged what may fairly be regarded as a counsel of perfection. Such counsel, however, is impracticable more often than not-and so I have come to regard it in the present instance. As I then pointed out half measures are useless, expensive, and disappointing. One of the measures then emphasised cannot be practically carried out. I allude to the segregation of the family of an infected house whilst the house and clothing are thoroughly disinfected. This, however, is not the only It must not be forgotten that at the present time expert difficulty. opinion is greatly divided respecting the advantages resulting from isolation. Whilst it may be allowed that the scarlatinal patient can be more efficiently nursed in hospital, it must be remembered that in the opinion of many the virulence of the disease is increased by bringing into one building many cases of the disease, and that thereby the mortality is increased.

Again, in dwelling upon points of practical value it is wise to note the experience of other towns. Taking in the first place those in our own neighbourhood, it is interesting to note that like ourselves Birmingham suffered from a severe outbreak of Scarlatina, which was dealt with by means of isolation upon an extensive scale. So far as I could ascertain the cases of the disease notified in proportion to the population were almost identical with our own, and the mortality was approximately at the same rate. In West Bromwich I understand that a point was reached where the accommodation for isolation was exhausted, and when, therefore, no more cases of the disease could be received. At Tipton isolation was attempted, but I am not aware that the epidemic was thereby controlled. At Walsall the question of isolation was investigated by the Health Authority, and as a result it was decided not to isolate.

Moreover, if we go further afield, we obtain little encouragement to attempt isolation. So far as I can learn the Authorities at Nottingham and Sheffield found isolation unsuccessful and disappointing, and still more so was this the case at Leicester, where, acting upon the advice of their Medical Officer of Health, it was decided to close the Hospital, upon which they had expended many thousands of pounds. It can scarcely be wondered at, therefore, if I hesitate in the face of such experiences to persist in advising you to expend a large sum of money for so doubtful a result.

At any rate, having regard to the divided state of expert opinion upon this difficult question, I think it reasonable to wait until greater unanimity is arrived at. Meanwhile steps have been taken to deal with the outbreak by disinfection, and by issuing instructions in printed form to the public, as to the steps they should take when confronted by the disease, and emphasising the special dangers to be avoided.

The Hospital has not been required for the treatment of Smallpox during the year, no cases of the disease having arisen.

Enteric fever caused 3 deaths. It will be seen that 18 cases of the disease were notified, as compared with 39 in the previous year. There was never during the year anything in the nature of an epidemic.

The other zymotic diseases call for no comment.

With regard to vaccination, I may say that good as the figures were in 1902, this year they are still more satisfactory. Thus out of 839 children alive at the end of June 1903, and born during the preceding twelve months, no fewer than 743 were successfully vaccinated, as compared with 681 children out of 804 vaccinated in the The percentage of successful vaccinations in 1903 was previous year. 88.5, as compared with 84.7 in 1902, and 62.7 in 1901. This indicates very thorough work on the part of the Vaccination Officer. The calf lymph supplied by the Government has again yielded excellent Furthermore, very few cases of vaccination in one place have results. occurred during the year. This record of vaccination, from every point of view, is the best made in Wednesbury for many years past.

Sanitary Work.

Appended is a table showing the work carried out in the Sanitary Inspector's Department :---

SUMMARY OF SANITARY WORK done in the Nuisance Inspector's Department during the year 1903, in the Urban District of Wednesbury.

				Inspections and observations made.	Formal Notices by Authority.	Nuisances abated after Notice.
Foul Conditions	178	58	54			
Structural Defects	Dwe	lling-hou	ises	15	15	13
Overcrowding	and Schools.			10	7	7
Unfit for Habitation				12	7	7
Lodging Houses				130	3	3
Bakehouses				70	1	0
Slaughter Houses				54	1	4
Ashpits and Privies				3460	110	100
Deposits of Refuse and	l Man				140	126
Water Closets		ure		8	6	6
Defective Taps			••••	76	21	21
Other Faults			•••	82	76	72
Waton Suppl				25	15	14
Direction	•••			3	3	3
Animala image				12	9	9
Animals improperly ke	ept			15	12	12
Offensive Trades				1	1	1
Smoke Nuisances				1	1	î
Other Nuisances				48	41	39
Total				4200	420	393

Precautions against Infectious Disease :---

Lots of Houses	Infected Be	dding	ng Disinfected or Destroyed r Infectious Disease			 90	
Schools	Distifiected	atter	Infectious	Disease		 326	
	"	"	37	**		 5	

13

Factory and Workshops Act, 1901.

Under this Act, 26 Bakehouses have been inspected. Note has been taken of their cubic capacity and means of ventilation. In four instances it was found necessary to issue orders for their sanitary improvement. There are also 93 Workshops for various trades. Most of these have been visited, and in five cases orders made as to cleansing structural alterations, &c., which were promptly attended to. The night soil contractor has emptied and cleansed 4954 ashpits and cisterns during the year. His work has been smoothly carried out, and speaking generally, with greater efficiency than in the past.

The Inspectors have 15 cowsheds and 60 dairies under their control, to which 300 visits have been made, and orders given to whitewash in 12 instances.

Amongst other sanitary improvements carried out during the year were the following :--

No. 1, Portway Road.—Here the old privy which discharged into the cistern has been removed, and 2 water closets erected. The yard has also been paved and the drains connected to the public sewer.

No. 47, Foster Street.—Here the old privy and cistern, as also the pig-styes, have been removed, and 2 new closets with an ashpit on modern lines erected. The yard has been part paved, and the drains connected with the sewer.

No. 58, Union Street.—The old privies have been removed, water closets provided, the yard paved, the drains connected with the sewer, and the outbuilding re-built. No. 3 Court Lea Brook.—The three back houses have been taken down, in order to provide room for better sanitary arrangements for the front houses.

No. 5 Court Camp Street.—Here two back houses have been closed and a privy removed.

No. 22, Camp Street.-A water closet has been provided, and the yard paved.

Two special reports have been prepared by me during the year. The first had reference to the File-cutting industry in Wednesbury. This was written in March, and forwarded to the Treasury Solicitor's Department. It was considered, with many others, at a meeting held in Birmingham at that time for the purpose.

The second dealt with the Scarlatinal epidemic in Wednesbury, and was asked for by, and forwarded to the Local Government Board in the autumn.

Action has been called for with reference to the Horse Slaughtering premises at the Delves. The requirements of the Sanitary Committee were not complied with, and in consequence a nuisance resulted which was made the subject of repeated complaints by the residents in the neighbourhood. The outcome of this was that the license required and issued yearly by the Health Authority was refused. The nuisance complained of will, therefore, not occur again.

In the foregoing remarks attention has been directed to such facts and matters as are likely to interest or inform the Committee. It may, I think, be considered that the figures indicate a fairly satisfactory state of health in the town generally, and it will probably be seen that we compare favourably with neighbouring towns, and with those throughout the country.

Finally, I would acknowledge the assistance I have received during the year from your Sanitary Inspector.

I remain, Mr. Mayor and Gentlemen.

Yours faithfully,

WALTER GARMAN, Medical Officer of Health.

