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CITY OF YORK.

1915.

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# Annual Reports

OF

The Medical Officer of Health,

The Tuberculosis Officer,

The Inspector of Nuisances,

and the Public Analyst.

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# STAFF OF THE HEALTH COMMITTEE, DURING THE YEAR 1915.

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## Medical Officer of Health and School Medical Officer—

EDMUND M. SMITH, M.D., C.M. Edin., D.P.H., Camb.

## Tuberculosis Officer—

J. BELL FERGUSON, M.B., Ch.B., D.P.H.

## Chief Inspector of Nuisances—

\*A. E. DRUMMOND, A.R. San. Inst. and Certificated Meat Inspector.

## Deputy-Chief Inspector—

\*FRANK FISHBURN, A.R. San. Inst. (enlisted August, 1915).

§\*R. HAGYARD (since August, 1915).

## Special Drainage Inspectors—

§\*R. HAGYARD ; §\*†T. H. MILLAR (enlisted November, 1915).

## Assistant Inspectors of Nuisances—

§\*†J. W. BEAUMONT ; §\*F. L. LEACH ; §W. G. PYATT.

## Health Visitors—

NURSE BOSTON and NURSE HIRST, C.M.B., and Royal San. Inst.,  
H.V. and S.N. Certificates.

## Temporary Clerks—Mrs. A. L. CLARK, and Miss M. Y. YOUNG.

## Senior Clerk—F. POWELL (mobilised August, 1914).

## Junior Clerks—W. V. MORRIS and L. SAWYER.

## Foreman of Ambulance and Disinfecting Staff—F. W. VOLANS.

## Matron of Fever Hospital—Miss A. E. PROCTER.

## Meat and Cattle Inspector—W. FAWDINGTON, M.R.C.V.S.

## Canal Boats Inspector—J. B. MUMMERY.

## Public Analyst—JOHN EVANS, F.I.C., Sheffield.

§ Holds the Sanitary Inspector's Certificate of the Royal Sanitary Institute.

\* Also holds the Meat Inspector's Certificate of the Royal Sanitary Institute.

† Also holds Certificate of Royal Sanitary Institute in Sanitary Science as applied to Buildings and Public Works.

‡ Also holds Victoria University Inspector's Certificate.

## Town Clerk—PERCY J. SPALDING, B.A., LL.M.

## City Treasurer—J. W. DAVISON.

## City Surveyor—F. W. SPURR.

## Temporary Assistant School Medical Officer—NORAH KEMP, M.B.



YORK, June, 1916.

*To the Right Hon. The Lord Mayor, The Aldermen, and the  
Councillors of the City of York.*

My Lord Mayor and Gentlemen,

I have the honour to present my Annual Report on the Health of the City and its Sanitary Conditions and on the work of the Health Department during the year 1915. This constitutes my eighteenth Annual Report.

Not for many years has it been my lot to have to record such unsatisfactory vital statistics—a high death-rate, the lowest birth-rate on record, and an infant mortality rate even higher than last year's. Explanatory notes will be found in the text of the Report. The war and the weather have been chiefly to blame. But there is a possible grain of comfort in the fact that the migratory movements—of soldiers, recruits and civilians—involved by the war have created great difficulties for the Registrar-General in estimating the population of the City for last year; the provisional estimate of the civilian population which he has given, and upon which the death-rates have had to be calculated, may prove to have been an under-estimate, and, therefore, these rates may not really be so unsatisfactory as they appear to be. The higher infant mortality rate is, however, unaffected by that consolation, and remains decidedly disappointing, the more so as considerable progress in developing schemes for maternity and child welfare has been made during the past two or three years; however, we must not grow downhearted—the work is difficult and delicate, and demands persistent and persevering educational and ameliorative effort.

Although only such urgent work has been attempted during the year as was expedient in order to try to maintain the City in a tolerably sanitary condition, and to preserve the health of its mingled civilian and military population, much—far too much—of the time of the heads of the Department has again been absorbed by the ever-recurring re-arrangements of the staff involved by the enlistment of some of its members in the Army and the engagement of temporary substitutes. We regret the enforced absence of those members, we miss their help very much, and I cannot but think that the serious depletion of sanitary staffs which has been permitted by Government is fraught with much danger and anxiety for the public health of the near future. It is remarkable that the appreciation of the value of sanitation is evidently still low, even in this day and generation.

It is with deep regret that we have also to record that no practical advance in this sad time of arrested progress, has been possible with such important schemes—so nearly matured before the war—as the new Tuberculosis Sanatorium, the Extension of the Fever Hospital and the proposed provision there for advanced cases of Phthisis, the improvement of the



Walmgate District, the Re-housing Scheme, the Re-ventilation of the Guildhall Offices, etc. Consequently, I fear that this Report will prove, as I predicted, much less interesting than most of its predecessors.

There has been much controversy during the year about the quality and price of that most essential food, Milk, and increasing evidence of the need for re-modelling the whole of the legislative regulations with regard to its production, sale, and distribution—and the same may be said in regard to other food supplies, the supervision of which demands increasing vigilance.

It only remains to be stated that, because of considerations of time and economy, this Annual Report for 1915 has been much reduced in size and subject matter in comparison with its predecessors ; some of the former interesting statistical tables have been condensed, others it has been impossible to compile for want of sufficient reliable data. Nevertheless the utmost effort has been made to contribute that annual review of the vital statistics, of the sanitary conditions of the City, and of the work carried out in relation thereto, which is so desirable in the interests of public health progress, and which is so much more valuable than the brief records made monthly in the Minutes of the Council.

My most cordial thanks are due to the Chairman (Mr. Alderman Carter), who has ever been most kind and ready in giving me the benefit of his shrewd counsel, and to him and to the Vice-Chairman (Mr. Alderman Inglis) and Members of the Health Committee for their support ; to my Deputy M.O.H., Dr. Bell Ferguson, Tuberculosis Officer, for his management of my department during my periods of absence, and for much kind and able help on numerous other occasions ; to my colleagues in office and in my profession ; to the Head Teachers of the schools ; to the Chief Sanitary Inspector and his permanent and temporary assistants and to the clerical and other members of my staff, for their earnest co-operation in the work of the department.

I am, my Lord Mayor and Gentlemen,

Yours obediently,

(Signed) EDMUND M. SMITH,

*Medical Officer of Health.*



## CITY AND COUNTY BOROUGH OF YORK.

### STATISTICAL SUMMARY FOR 1915.

Area in acres, 3,730.

Population of County Borough, Census 1911, 82,282.

Do. at middle of 1915 (Registrar-General's revised estimate), 79,802 (civilian population only).

Number of "families or separate occupiers,"	18,078	}	Census
Do. inhabited houses ... ..	17,517	}	1911.

Proportion of persons per acre,	22.06	}	Census 1911.
Do. do. family	4.33	}	

Birth-rate, 21.3 per 1,000 living.

Nett general death-rate, 16.4 per 1,000 living (civilian population only).

Infantile mortality, 122 per 1,000 births.

Total Zymotic mortality ... 1.15 per 1,000 living at all ages.  
(Civilian population only).

Death-rate of Diarrhoea and Enteritis (under two years)	0.42	,,	,,
---	------	----	----

Death-rate of Bronchitis and Pneumonia and other Respiratory Diseases ... ..	2.91	,,	,,
--	------	----	----

Phthisis death-rate ... ..	1.25	,,	,,
----------------------------	------	----	----

Total Tuberculosis death-rate	1.75	,,	,,
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Cancer death-rate ... ..	1.07	,,	,,
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Epidemic Influenza death-rate	0.31	,,	,,
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## ANNUAL REPORT, 1915.

### POPULATION.

The following communications were received from the Registrar-General's Office, in February, 1916:—

(Received February 17th, 1916).

#### "MORTALITY IN THE ARMY AND NAVY.

The attention of Medical Officers of Health is drawn to the fact that for the year 1915, the Registrar General proposes to exclude from his Returns for local areas the deaths of all members of the armed forces of this or other countries, and not only those dying in institutions. The estimates of local populations now distributed are estimates of civilian population only, and it is, therefore, appropriate that all deaths of combatants should be excluded in the calculation of death-rates founded upon them."

(24th February, 1916).

"Sir,

A number of letters having been addressed to the Registrar-General raising questions respecting the estimates of Civil populations for 1915, I am directed to forward the enclosed copy of a memorandum dealing with the method of framing these estimates and the reasons for its adoption.

I am, Sir, etc.,

T. H. C. STEVENSON, M.D.,

Superintendent of Statistics."

#### ABSTRACT OF ABOVE-MENTIONED MEMORANDUM, *re* ESTIMATE OF CIVIL POPULATION, 1915.

"The war has made it impossible to adhere to the methods of estimation of local and national populations hitherto in use. Men of military age have been largely drafted to military training centres or sent abroad with the army, and the remainder of the male adult population, as well as, to a lesser extent, the female population, has migrated on an unprecedented scale into areas other than those in which it was enumerated at the last census.

Under these circumstances estimates of local populations based on the census returns were clearly inadmissible, and it became necessary to search for a substitute. Fortunately this was ready to hand in the shape of the National Register, which referred to a date only six weeks removed from that for which estimates were required, viz., the middle of the year 1915. No doubt this does not form a perfect record, as it is known that a number



of persons escaped registration. From investigations, however, which have been made in another connection, it appears that the defects in the register taken as a whole are not on such a scale as to affect seriously the estimates of population based upon it. By the method described below it was possible to derive from these returns estimates of the *civil* population only of each administrative area on August 15th. No attempt has been made to increase these by allowance for members of the fighting forces because, apart altogether from the difficulty of ascertaining the average military population of each district during the year, experience has shown that under present circumstances *only civilian deaths can be tabulated for local areas*. If military deaths were to be included they would have either to be debited to the area in which they occurred, a course which would render the death-rates of districts containing large military hospitals meaningless, or to the area of residence. An attempt made to pursue the latter course has had to be abandoned owing to military authorities having been unable to furnish to the registrars the necessary information. *It has been found necessary, therefore, to limit the tabulation of deaths by local areas to deaths of civilians, and under these circumstances the civilian population is obviously the proper one to use for the calculation of death-rates.*

An additional advantage in the use of National Register populations is that these consist of habitual residents in each locality and not merely of the persons who happened to be present therein on a certain date. The deaths tabulated from the year 1911 onwards are those of habitual residents only. It is felt that the present estimates will furnish death-rates calculated to indicate as nearly as may be *the health conditions of the civil population*.

The question of the population to be used for the *calculation of birth-rates* has also required consideration. The births registered are not only those of the children of civilians, and the estimates of civil population, therefore, form an unsuitable basis for the calculation of birth-rates. It is impossible to frame any estimate that would give reliable birth-rates, and it is suggested, therefore, that the birth-rates for 1915 be based upon the existing estimates of total population for 1914.

Difficulties, which will probably prove insoluble, remain as to estimation of populations in sex and age groups and the standardising factors dependent upon them. Moreover, the present method of estimation will obviously not apply to 1916, or subsequent years unless the National Register is effectively kept up-to-date or further enumeration made. Nothing can, at present, be decided as to these matters."

The death-rates in the following Report, therefore, are of civilians only, and are based upon the estimate of the civilian population furnished by the Registrar-General along with the above letter of the 17th February, viz. :—79,802.

The birth-rate is that relating to the whole population of the City, the estimate of the entire population for 1914 (viz. :—83,380) having been used in accordance with the above correspondence.



**TABLE 1.—CITY OF YORK.**

Year.				Estimates of Population at June 30th each year.	Birth Rate.	Death Rate.
1891 (census)	...	...	...	†67,841	30.0	23.8
1901 (census)	...	...	...	78,023	30.2	16.6
1909	...	...	...	81,505	25.4	‡12.2
1910	...	...	...	81,951	24.2	12.8
1911 (census)	...	...	...	82,399	23.6	13.5
1912	...	...	...	82,863	22.9	13.8
1913	...	...	...	83,329	23.7	12.4
1914	...	...	...	83,380	22.8	13.8
1915	...	...	...	*79,802	‡21.3	16.4

Average birth-rate during ten years 1905-14, inclusive = 25.3.

Average death-rate during ten years 1905-14, inclusive = 13.7

\* Civilian Population only.

† Population of city as afterwards extended in 1893.

‡ Lowest on record.

## THE BIRTH-RATE.

The total number of births notified to me by the Sub-Registrars during the year ending Saturday, January 1st, 1916, was 1,790, but of these a nett total of *eleven* births has been deducted by the Registrar-General (on a system introduced during 1911) as not belonging to the City, the mothers having been brought into the City for child-birth.

The nett City total of births for the year was, therefore, 1,779. (*The nett number of births in 1914 was 1,903.*)

The birth-rate in 1915 was, therefore, 21.3 per 1,000 living, and was the lowest on record.

The average birth-rate for the 96 Great Towns for the same period was 22.8, and for England and Wales 21.8, which was 3.6 lower than the average for the previous ten years and the lowest on record.

The average birth-rate in York for the ten years 1905-14 was 25.3. These birth-rates do not include the still-births, which ought also to be registered.



The births in 1915 were registered as follows :—

	Whole City.	SANITARY SUB-DISTRICTS.		
		Bootham district.	Micklegate district.	Walmgate district.
First quarter of year ... ..	520	97	175	248
Second " " ... ..	478	104	170	204
Third " " ... ..	430	97	165	168
Fourth " " ... ..	362	80	123	159
Gross Total ... ..	1790	378	633	779
Less nett "transferable births" deducted by Registrar-General ... ..	11			
Nett Total ... ..	1779			

Males ...	895	Registered as legitimate ...	1682
Females ...	884	Registered as illegitimate ...	97
	<u>1779</u>		<u>1779</u>

It is interesting to record that ten of the births were amongst the Belgian refugees in the city.

The following are the birth-rates for the year 1915 for the three Sanitary Sub-districts calculated upon the estimated populations of those districts for 1914 :—

		1915.	1914.	Averages for 1909—1913.
Whole City	Bootham	16.9	16.5	18.9
	Micklegate	21.6	22.4	23.6
21.3	Walmgate	24.6	27.7	27.7

**TABLE 2.**—SHOWING TOTAL BIRTHS AND DEATHS AND THE NATURAL INCREASE OF POPULATION. (EXCESS OF BIRTHS OVER DEATHS).

Year.	Total births.	Total (nett) deaths.	Excess of births over deaths.
1909	2067	994	1073
1910	1983	1047	936
1911	1948	1113	835
1912	1894	1142	752
1913	1977	1034	943
1914	1903	1153	750
1915	1779	1315	464



Considering how many potential parents have left the City to join the Army or Navy, the birth-rate is probably not so unsatisfactory as it appears. Then we have to remember that women (married and marriageable) are being employed to an extent hitherto unknown. Actually, therefore, the proportion of births to population may have been above the average. It is, perhaps, interesting to note that the "Home Secretary of Germany" has recently referred with anxiety to the serious fall in the birth-rate in Germany, not merely since the war commenced, but for some years before, viz. :—from 35 to 27 per thousand, the decline being 75 per cent. more than the death-rate. He attributed the decline of the birth-rate to industrial causes, housing difficulties, the change of opinion which regards children only as an unfortunate burden, the adoption of preventive measures and the destruction of the unborn—causes which it is to be feared have also operated in Great Britain.

### Illegitimate Births.

The total number of births registered as illegitimate in 1915 was 97 ; the rate per 1,000 persons living remains about the same as during the last twelve years. Of the total of 97 illegitimate births, 25 of the mothers resided in Bootham district, 35 in Micklegate, and 37 in Walmgate district. A total of 28 births occurred in the Workhouse, 3 of which were illegitimate.

The following table is interesting in relation to all the recent talk about "war babies."

**TABLE 3.—CITY OF YORK—ILLEGITIMATE BIRTHS.**

Year.	Total births (legitimate and illegitimate).	Total illegitimate births.	Illegitimate births per cent. of total births.		Illegitimate births per 1,000 persons living.	
			York.	England and Wales.	York.	England and Wales.
Averages for 5 years, 1903–1907.	2264	106	4.6	4.0	1.3	1.1
Averages for 7 years, 1908–1914.	1995	100	5.0	4.2	1.2	1.0
1914 ...	1903	108	5.6	4.2	1.3	1.0
1915 ...	1779	97	5.5	—	1.2	—



## The Marriage Rate.

I am indebted to the Superintendent Registrar for the following data regarding the number of marriages solemnised in the City:—

**TABLE 4.**

Year.	Total number of marriages in York.	Marriage-rate per 1,000 of population in York.	Marriage-rate in England and Wales.	
			Per 1,000 of total population at all ages	Per 1,000 marriageable persons
Average for 5 years, 1901–1905.	631	16.0	15.6	48.0
Average for 5 years, 1906–1910	643	15.8	15.3	46.8
1911... ..	649	15.8	15.2	46.5
1912... ..	669	16.1	15.6	47.4
1913... ..	656	15.7	15.7	47.5
1914... ..	702	16.6	15.9	48.7
1915... ..	887	21.2	19.3*	—

\* 3.9 above average for previous ten years.

The 1915 total includes numerous marriages of Officers and men serving in His Majesty's Forces —“ war marriages.”

## Infantile Vaccination.

I am indebted to the Vaccination Officer for the following information. (The figures for 1915 are not yet available).

The total number of children successfully vaccinated in 1914 was 918 (total births 1,903); vaccination was postponed in 53 cases; 3 children were declared insusceptible; there were 575 declarations of “conscientious objection”; 175 died unvaccinated; 174 children were not vaccinated, or left the City unvaccinated.



**TABLE 5.—YORK UNION.**

Year.	Successfully vaccinated.	Percentage of total births.	Vaccination postponed or certified as insusceptible of vaccination	Died or removed from York unvaccinated	Declarations of "conscientious objection."		Re-vaccinated by Public Vaccinator, year ended 30th Sept., 1915.
					No.	Percentage.*	
Averages for 7 years, 1901—1907.	1884	83.4	26	276	58	—	—
Averages for 5 years, 1908—1912.	1401	69.4	24	241	350	20.3	28
1913 ...	1058	53.5	43	297	590	36.0	21
1914 ...	918	48.3	56	349	575	38.4	26

\* = Percentage of total births less figures in columns 4 and 5.

The above table shows that the 1907 Act is producing a large increase in the percentage of unvaccinated children in York, as in the rest of the country.

### THE GENERAL DEATH-RATE.

The gross total number of deaths registered within the City of York during the year ended Saturday, January 1st, 1916, was 1356.

If the deaths of 14 members of the armed forces, and of 79 civilians who died in York but who did not belong to the City ("Non-Residents" or "Outward Transfers") be deducted and those of 52 civilian citizens who died outside the City ("Residents" or "Inward Transfers") be added (as required by the Local Government Board), the nett total number of deaths of York civilian citizens was 1,315, giving a nett recorded death-rate of 16.4 per 1,000 living of civilian population only.



These nett civilian deaths in 1915 were registered during the four quarters of the year as follows :—

	WHOLE CITY.	SANITARY SUB-DISTRICTS.		
		Bootham.	Micklegate.	Walmgate.
First quarter ... ..	421	101	158	162
Second „ ... ..	304	79	101	124
Third „ ... ..	253	61	76	116
Fourth „ ... ..	337	78	107	152
Totals ... ..	1315	319	442	554

The distribution of the Deaths of York citizens, according to Sanitary Sub-districts and age-periods, was as follows :—

AGE-PERIODS.	SANITARY SUB-DISTRICTS.			WHOLE CITY. Totals.
	Bootham.	Micklegate.	Walmgate.	
0—1 ... ..	37	70	110	217
1—2 ... ..	13	14	35	62
2—5 ... ..	8	11	23	42
5—15 ... ..	14	15	23	52
15—25 ... ..	2	17	25	44
25—45 ... ..	38	63	61	162
45—65 ... ..	67	102	112	281
65 and over ... ..	140	150	165	455
Totals ... ..	319	442	554	1315

# VITAL STATISTICS OF THE SANITARY SUB-DISTRICTS IN 1915 AND PREVIOUS YEARS.

Names of Localities.	Bootham Sanitary Sub-District.			Micklegate Sanitary Sub-District.			Walmgate Sanitary Sub-District.		
	Births registered.	Deaths at all ages.	Deaths under 1 year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Births registered.	Deaths at all ages.	Deaths under 1 year.
1910 ... ..	446	262	30	688	343	61	849	442	95
1911 ... ..	393	270	34	677	358	75	885	485	113
1912 ... ..	377	276	27	661	369	53	864	497	104
1913 ... ..	397	231	33	691	353	51	897	450	101
1914 ... ..	370	235	28	658	391	67	878	527	130
Av. of 10 yrs., 1905–14	422	259	38	712	370	72	934	488	116
1915 ... ..	378	319	37	633	442	70	779	554	110

The deaths of males in 1915 numbered 683, of females 632.

The nett total of deaths for the City for the year 1914 was 1,153, and the death-rate 13.8.

The average death-rate in York for the preceding ten years 1905–1914, was 13.7.



The gross totals and death-rates, and the nett totals and death-rates, in previous years, are set forth in the following Table 7 (L.G.B. Table 1), columns 6 and 7, 12 and 13.

Of the deaths in Bootham district, 13 occurred in the York Union Workhouse and had no other residence.

There were no uncertified deaths, whereas the percentage of deaths in which the cause was uncertified was in England and Wales 1.4, and in the 96 Great Towns 0.9.

Comparing the totals of 1915 with those of 1914, it will be observed in Table 8 that there was an *increase* in 1915 in the deaths from the following causes:—

	Total deaths in 1914.	Total deaths in 1915.	Increase in 1915.
Influenza ... ..	15	25	10
Phthisis ... ..	79	100	21
Meningitis (all forms) ...	23	34	11
Various other Cerebral Diseases... ..	75	97	22
Bronchitis ... ..	65	105	40
Pneumonia (all forms) ...	70	122	52
Senile Decay ... ..	93	137	44
Diseases of Stomach ...	7	14	7
	<hr/> 427	<hr/> 634	<hr/> 207

and there was a decrease in the following causes:—

	1914.	1915.	Decrease in 1915.
Diphtheria ... ..	19	8	11
Heart Disease ... ..	143	135	8
Diarrhœa ... ..	53	35	18
Developmental Diseases & Premature Birth ...	91	81	10
Epilepsy ... ..	9	4	5
	<hr/> 315	<hr/> 263	<hr/> 52

The mortality during the months of November and December was unusually high, even for that period of the year, and was due to the exceedingly bitter weather experienced in November and the remarkable mortality amongst very aged people. In the opinion of medical practitioners, the depressing effect of the war is not without its fatal influences, especially upon the aged. During this period there were some most remarkable records of longevity. Out of a total of 240 deaths for the nine weeks ended January 1st, 1916, 77 were of persons over the age of 65 years, and of these 40 were over the age of 75, and 9 over the age of 85. During the week ended November 6th, 1915, there were three deaths of persons between 90



and 98 years of age, giving a total of 280 years ; and in the following three weeks there were three deaths of persons over 85 years of age, totalling 265 years. On the other hand, there has been a very striking fall in the birth-rate, as has been general all over the country. The average birth-rates and death-rates in York for the months of November and December have been as follows during the past three years.

					Birth-rate.		Death-rate.
1913	...	...	...	...	22.5	...	9.6
1914	...	...	...	...	19.2	...	13.7
1915	...	...	...	...	17.2	...	16.6

The following were the average death-rates for the periods approximately specified, as submitted at the meetings of the City Council :—

Average Death-rate for weeks in :—					YORK.		Average of the 96 Great Towns, 1915.
					1914.	1915.	
January	...	...	...	...	17.4	17.4	19.0
February	...	...	...	...	11.8	21.6	20.0
March	...	...	...	...	14.2	17.4	19.7
April	...	...	...	...	11.4	14.9	17.3
May	...	...	...	...	11.8	15.4	14.3
June	...	...	...	...	12.6	12.4	12.5
July and August	...	...	...	...	12.4	10.9	11.6
September	...	...	...	...	13.4	13.4	14.0
October	...	...	...	...	11.3	14.6	13.8
November	...	...	...	...	12.2	17.0	16.6
December	...	...	...	...	18.9	15.6	15.7

Deaths of members of the Armed forces occurring in the City during 1915 (excluded from City totals of deaths and from death-rates) :—

Cause.	Total Deaths.	Cause.	Total Deaths.
Phthisis	1	Rheumatic Fever	1
Lobar Pneumonia	2	Accident (Fall)	1
Acute Bronchitis	1	Battle Wound	1
Influenza	1	Other causes	3
Appendicitis	2		—
Apoplexy	1		14
			—

None of these deaths were of naval men.



*Deaths of York Civilian Residents* (total 282) occurring in the Institutions within the City during the year 1915 :—

	Total Deaths.	Previous Residence or Home Address.			
		Sanitary Sub-Districts.			Union Workhouse.
		Bootham.	Micklegate.	Walmgate.	No other address known.
York Union Workhouse ...	152	24	36	79	13
Bootham Park ...	1	—	—	1	—
York County Hospital (General Infirmary) ...	113	21	35	57	—
Maternity Hospital ...	10	5	2	3	—
The Pleasaunce (Private Asylum) ...	1	1	—	—	—
Purey-Cust Nursing Home ...	5	3	2	—	—

In the statistical tables the above deaths are allocated to the Sanitary Sub-districts in which the deceased resided

*Deaths of Civilian "Non-Residents,"* (Registrar-General's "Outward Transfers"), i.e., persons coming into the district of the City of York and dying in Public Institutions, etc. :—

At the Union Workhouse ...	...	...	...	...	15	} 79
At Bootham Park Asylum ...	...	...	...	...	10	
At the Retreat (Asylum) ...	...	...	...	...	9	
At the County Hospital ...	...	...	...	...	30	
At other Hospitals and Asylums ...	...	...	...	...	7	
At private residences ...	...	...	...	...	5	
By accidents in rivers, railway stations, etc. ...	...	...	...	...	3	

All these deaths have been excluded from the totals for the City of York and referred by the Registrar-General to the districts whence they came.

The percentage of the deaths of York civilian residents dying in Public Institutions within and without the City area was 24.2, as compared with 22.3 for England and Wales, and 28.6 for the 96 Great Towns.



Deaths of Civilian "Residents" (Registrar-General's "Inward Transfers"), *i.e.*, citizens of York who died outside the City area in institutions and otherwise, all included in the civilian totals for the City of York:—

Where died.	Total.	From—		
		Bootham District.	Micklegate District.	Walmgate District.
In York Corporation Fever Hospital	6	1	2	3
In York City Asylum, Water Fulford	15	3	8	4
In North Riding Asylum, Clifton ...	1	—	—	1
In other institutions in other districts	14	2	8	4
In River Ouse outside the City ...	2	—	2	—
In private houses in other districts ...	14	6	5	3
	52	12	25	15

**TABLE 6.**

COMPARATIVE MORTALITY DURING LAST DECENNIUM.

The following Table shows the Principal Causes of Death in the City for the past ten years:—

CAUSE OF DEATH.	NUMBER OF DEATHS.									
	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915
Zymotic Diarrhœa and Enteritis ... ..	85	45	60	28	50	69	15	44	53	35
Other Principal Zymotic Diseases ... ..	66	60	56	28	24	52	55	23	67	57
Epidemic Influenza ...	10	35	21	6	19	12	16	21	15	25
Tuberculosis (including Phthisis) ... ..	128	146	104	115	97	101	128	96	115	140
Infantile Developmental Causes under five years of age ... ..	123	133	112	98	75	96	83	82	91	79
Bronchitis and Pneumonia	143	207	160	151	180	153	177	122	135	227
Cancer ... ..	73	77	77	73	87	74	74	77	86	86
Organic Diseases of Heart ...	104	119	103	115	93	101	122	114	143	135
Senile Decay ... ..	102	88	107	82	91	100	128	107	93	137
Disease of Brain & Nervous System ... ..	88	125	99	107	91	117	108	105	116	132
Bright's Disease ... ..	34	31	33	38	38	41	27	34	32	32
Violence (Accidents, Suicide, etc.) ... ..	35	42	31	30	35	40	43	46	42	43

"Infantile Developmental Causes" comprises:—Premature birth, Congenital Malformation, Rickets, Atrophy, Debility and Marasmus.

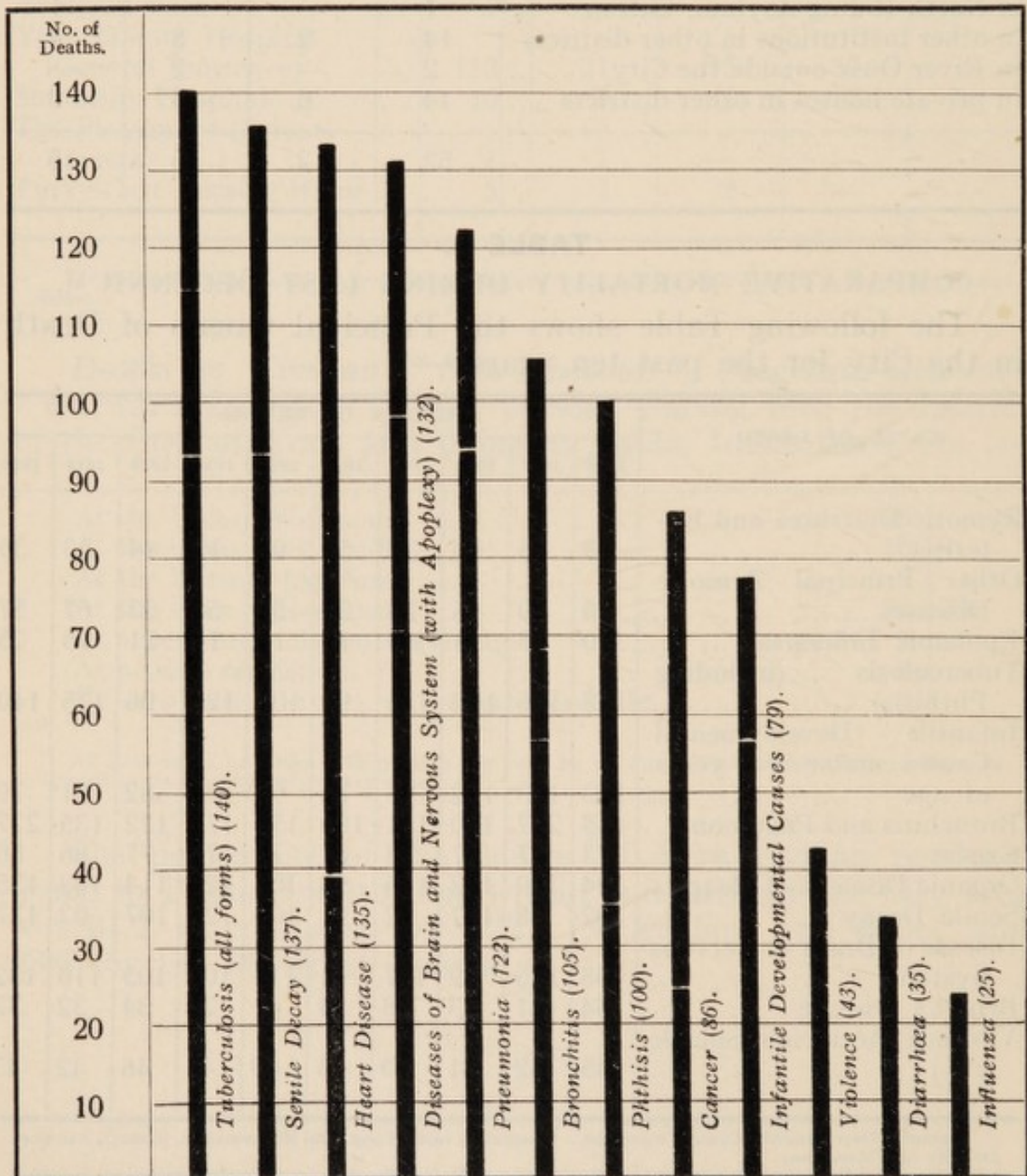
"Diseases of Brain and Nervous System" comprises:—Meningitis, Apoplexy, Cerebral-Softening, Insanity, Diseases of Spinal Cord, Epilepsy.

"Organic Diseases of Heart" comprises:—Disease of Aortic and Mitral Valves, Dilatation, Senile, Fatty and other forms of Degeneration.



**CHART C.****CITY OF YORK.**

Comparative view of the principal causes of death during the year 1915.





**TABLE 7.—CITY OF YORK.—(LOCAL GOVERNMENT BOARD'S TABLE 1).***Vital Statistics of Whole District during 1915 and previous Years. The rates are per 1,000 living.*

Year.	Population estimated to middle of each Year.	Births.			Total Deaths registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
		Uncorrected Number.	Nett.		Number.	Rate.	Of Non-residents registered in the District.	Of Residents not registered in the District.	Under 1 year of Age.		At all Ages.	
			Number.	Rate.					Number.	Rate per 1,000 nett births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1910	81951	—	1983	24.2	1058	12.9	42	31	186	94	1047	12.8
1911	82399	1955	1948	23.6	1133	13.8	61	41	222	114	1113	13.5
1912	82863	1902	1894	22.9	1146	13.9	58	54	184	97	1142	13.8
1913	83329	1985	1977	23.7	1055	12.7	60	39	185	94	1034	12.4
1914	83380	1906	1903	22.8	1152	13.8	56	57	225	118	1153	13.8
1915	79802	1790	1779	21.3	1342	16.7	79	52	217	122	1315	16.4
...												
(Civilians only).												

NOTES.—This Table is arranged to show the gross births and deaths in the district, and the births and deaths properly belonging to it with the corresponding rates.

"Transferable Deaths" are deaths of persons who, having a fixed or usual residence in England or Wales, died in a district other than that in which they resided.

Area of District in acres, land, and inland water).	3,730.	Total population at all ages	82,282
		Number of inhabited houses	17,517
		Average number of persons per house	4.33

At Census of 1911.

1915 :—In column 6 are included the whole of the deaths registered during the calendar year as having actually occurred within the district, but excluding the deaths of Soldiers and Sailors that have occurred in hospitals and institutions, &c., in the district.



**TABLE 8.—CITY OF YORK.**  
**CAUSES OF, AND AGES AT, DEATH DURING THE YEAR 1915**  
**(LOCAL GOVERNMENT BOARD'S TABLE III.)**

CAUSES OF DEATH.			NETT DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT.										Total Deaths whether of "Residents" or "Non- Residents" in Institu- tions in the District.
			All Ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 & upwards		
All Causes	Certified ...	...	1315	217	62	42	52	44	162	281	455	353	
	Uncertified ...	...	Nil.	—	—	—	—	—	—	—	—	—	
1.	Enteric Fever ...	...	5	—	—	—	1	2	1	—	1	2	
2.	Small-pox ...	...	Nil.	—	—	—	—	—	—	—	—	—	
3.	Measles ...	...	23	11	7	5	—	—	—	—	—	2	
4.	Scarlet Fever ...	...	3	—	—	2	1	—	—	—	—	—	
5.	Whooping Cough ...	...	18	7	9	2	—	—	—	—	—	3	
6.	Diphtheria and Croup ...	...	8	—	1	—	7	—	—	—	—	1	
7.	Influenza ...	...	25	—	—	—	1	2	7	6	9	3	
8.	Erysipelas ...	...	1	—	—	—	—	—	—	1	—	—	
9.	Phthisis (Pulmonary Tuberculosis) ...	...	100	—	—	1	7	16	48	25	3	22	
10.	Tuberculous Meningitis ...	...	20	—	6	6	3	—	5	—	—	3	
11.	Other Tuberculous Diseases ...	...	20	2	2	1	6	3	3	3	—	12	
12.	Cancer, malignant disease ...	...	86	—	—	—	1	1	5	41	38	22	
13.	Rheumatic Fever ...	...	1	—	—	—	—	—	1	—	—	1	
14.	Meningitis ...	...	14	4	2	2	1	2	1	—	2	2	
15.	Organic Heart Disease ...	...	135	—	—	—	3	2	15	57	58	42	
16.	Bronchitis ...	...	105	11	3	1	—	—	8	29	53	19	
17.	Pneumonia (all forms)...	...	122	28	24	16	5	3	13	12	21	28	
18.	Other diseases of respiratory organs ...	...	6	—	1	—	—	—	—	3	2	1	
19.	Diarrhoea and Enteritis ...	...	35	32	2	—	—	—	1	—	—	8	
20.	Appendicitis and Typhlitis ...	...	7	—	—	—	3	2	—	2	—	9	
21.	Cirrhosis of Liver ...	...	12	—	—	—	—	—	2	6	4	4	
21a.	Alcoholism ...	...	2	—	—	—	—	—	1	1	—	—	
22.	Nephritis & Bright's Disease ...	...	32	—	—	—	1	2	6	11	12	6	
23.	Puerperal Fever ...	...	2	—	—	—	—	—	2	—	—	—	
24.	Other accidents and diseases of Pregnancy and Parturition ...	...	3	—	—	—	—	1	2	—	—	2	
25.	Congenital Debility and Malformation, including Premature Birth ...	...	81	75	4	—	1	—	—	1	—	14	
26.	Violent Deaths, excluding Suicide ...	...	36	2	1	3	4	3	7	9	7	22	
27.	Suicide ...	...	7	—	—	—	—	1	1	3	2	—	
28.	Other Defined Diseases ...	...	401	45	—	3	7	4	32	70	240	123	
29.	Diseases ill-defined or unknown	...	5	—	—	—	—	—	1	1	3	2	
Totals ...			1315	217	62	42	52	44	162	281	455	353	

SUB-ENTRIES included in above figures :—

17 (a).	Lobar Pneumonia ...	...	49	5	3	3	2	2	12	11	11	12
28 (a).	Poliomyelitis ...	...	2	—	—	1	1	—	—	—	—	—
"	Infantile Convulsions ...	...	16	16	—	—	—	—	—	—	—	1
"	Syphilis (Congenital)...	...	9	9	—	—	—	—	—	—	—	5
"	Syphilis (not Congenital) ...	...	1	—	—	—	—	—	—	1	—	1
"	Senile Decay ...	...	137	—	—	—	—	—	—	2	135	41
"	Various Cerebral Diseases ...	...	97	1	—	—	1	—	7	29	59	16
"	Diseases of Spinal Cord ...	...	16	—	—	—	—	—	3	5	8	4
"	Diseases of Stomach ...	...	14	4	—	—	—	—	3	5	2	2
"	Diabetes Mellitus ...	...	8	—	—	—	—	2	1	3	2	1
"	Septic Diseases ...	...	12	1	—	—	2	1	4	1	3	6
"	Intestinal Obstruction ...	...	10	1	—	—	—	—	1	4	4	9
"	Anthrax ...	...	1	—	—	—	—	—	—	1	—	1
"	Epilepsy ...	...	4	—	—	—	—	—	2	1	1	3



**TABLE 8a.—CITY OF YORK.**  
CHIEF CAUSES OF DEATH DISTRIBUTED ACCORDING TO  
SANITARY SUB-DISTRICTS.

CAUSES OF DEATH.	Bootham.	Mickle- gate.	Walm- gate.	Whole City.
Small-pox ... ..	—	—	—	—
Measles ... ..	3	6	14	23
Scarlet Fever ... ..	—	1	2	3
Diphtheria and Membranous Croup ... ..	5	1	2	8
Whooping Cough ... ..	1	7	10	18
Enteric Fever ... ..	—	3	2	5
Zymotic Diarrhoea and Enteritis ... ..	7	7	21	35
Epidemic Influenza ... ..	7	10	8	25
Puerperal Fever ... ..	1	1	—	2
Phthisis (Pulmonary Tuberculosis) ... ..	14	37	49	100
Tuberculous Meningitis ... ..	5	6	9	20
Other Forms of Tuberculosis ... ..	7	4	9	20
Cancer ... ..	21	31	34	86
Premature Birth and Developmental Diseases... ..	19	29	33	81
Infantile Convulsions ... ..	2	4	10	16
Senile Decay ... ..	31	44	62	137
Meningitis ... ..	7	4	3	14
Various other Cerebro-Spinal Diseases ... ..	32	47	34	113
Organic Heart Disease ... ..	43	31	61	135
Bronchitis ... ..	30	38	37	105
Pneumonia ... ..	19	40	63	122
Other Diseases of Respiratory Organs... ..	1	2	3	6
Nephritis and Bright's Disease ... ..	15	6	11	32
Cirrhosis of Liver ... ..	3	7	2	12
Appendicitis ... ..	—	5	2	7
Diabetes Mellitus ... ..	1	5	2	8
Deaths by Accident ... ..	7	13	14	34
Deaths by Suicide ... ..	1	2	4	7
Manslaughter ... ..	—	—	1	1
Infanticide ... ..	—	1	—	1
Septic Diseases ... ..	4	3	5	12
Congenital Syphilis ... ..	2	4	3	9
Insanity ... ..	—	—	1	1
All other causes ... ..	31	43	43	117
All Causes ... ..	319	442	554	1315

DEATHS AT ADVANCED AGES :—

Age-periods.	Sanitary Sub-districts.			Total.
	Bootham.	Mickle- gate.	Walm- gate.	
At ages 65 to 75 years ... ..	78	71	90	239
„ 75 to 85 years ... ..	44	59	61	164
„ 85 years and over ... ..	19	21	14	54
Totals ... ..	141	151	165	457

457 = 34.7 per cent. of total deaths at all ages.

Nearly half of these deaths, it will be observed, were at 75 years and over.

Chief causes of death :—Cancer, Cerebral Diseases, Heart Disease, Bronchitis, and Senile Decay.



**TABLE 9.—CITY OF YORK.**  
DEATH-RATES PER 1,000 LIVING IN YEAR 1915,  
*as compared with those for England and Wales.*

	Average for England and Wales.	Average for the 96 great towns including York.	Average for the 148 smaller towns.	Rural England and Wales.	YORK.
Birth-rate ... ..	21.8	22.8	21.6	20.7	21.3
*General death-rate ... ..	14.8	15.9	14.2	13.6	16.4
Infant mortality (per 1,000 births) ...	110	117	114	98	122
Measles death-rate ... ..	0.43	0.50	0.52	0.32	0.28
Scarlet Fever death-rate ... ..	0.06	0.07	0.06	0.05	0.04
Diphtheria death-rate ... ..	0.15	0.16	0.15	0.14	0.10
Whooping Cough death-rate ... ..	0.21	0.23	0.22	0.19	0.22
Typhoid Fever death-rate ... ..	0.04	0.04	0.04	0.04	0.06
Diarrhoea and Enteritis death-rate (under 2 years) per 1,000 births ...	18.18	24.48	17.15	9.79	19.1
Average birth-rate for 10 years, 1905—14 ... ..	25.2	—	—	—	25.3
Average general death-rate for 10 years, 1905—14 ... ..	14.2	—	—	—	13.7
Average infant mortality for 10 years, 1905—14 ... ..	115	—	—	—	—

\* "Standardised" as to the 96 Great Towns and the other groups.

**TABLE 10.—CITY OF YORK.**  
TOTAL DEATHS AT AGE-PERIODS EXPRESSED AS PER-  
CENTAGES OF TOTAL DEATHS AT ALL AGES.

Year.	Age-periods.						Total deaths at all ages.
	Under 1 year.	1 to 5 years.	5 to 15 years.	15 to 25 years.	25 to 65 years.	65 years and upwards.	
Averages for five years.							
1904—8	24.1	10.2	3.9	4.5	30.5	26.5	1202
1909—13	18.5	8.3	3.6	3.6	34.8	31.1	1066
Year 1914	19.5	9.2	4.0	3.6	32.8	30.8	1153
„ 1915	16.5	7.9	3.9	3.3	33.7	34.6	1315

It will be observed that on the whole the proportion of persons dying under five years of age is declining, whilst that of aged persons is increasing.

Owing to the upset of estimates of population by the migratory movements produced by the war, it is impracticable to estimate the population at different age-periods and, therefore, impossible to state the death-rates per thousand living in those age-periods as in previous Reports (see Table 9, 1914 Report).



**TABLE 11.**—TOTAL DEATHS DISTRIBUTED IN AREAS AND IN AGE-PERIODS CHIEFLY AFFECTED.

Area.				Under 1.	1—5.	25—65.	65 and upwards.	All Ages.
A.	Leeman Road ...	...	...	18	7	22	6	58
B.	Poppleton Road ...	...	...	6	—	4	6	16
C.	Acomb Road ...	...	...	—	1	7	2	10
D.	Holgate Road ...	...	...	7	2	12	13	35
E.	Mount ...	...	...	1	—	5	10	16
F.	South Bank ...	...	...	9	3	21	12	52
G.	Nunthorpe ...	...	...	1	—	1	3	5
H.	Scarcroft ...	...	...	2	—	13	15	33
J.	Clementhorpe ...	...	...	10	4	18	16	54
K.	Nunnery Lane...	...	...	6	4	26	27	67
L.	Skeldergate ...	...	...	6	4	32	34	82
M.	Tower Street ...	...	...	4	—	4	6	14
N.	George Street ...	...	...	30	8	44	39	128
O.	Fulford Road ...	...	...	14	12	41	35	106
P.	Hull Road ...	...	...	17	11	24	22	81
Q.	Heworth ...	...	...	7	—	5	8	26
R.	Groves ...	...	...	23	21	45	36	142
S.	Central ...	...	...	11	4	29	28	75
T.	Hungate ...	...	...	7	3	6	13	29
U.	Marygate ...	...	...	3	1	4	10	22
V.	Clarence Street ...	...	...	7	1	14	27	53
W.	Haxby Road ...	...	...	7	7	27	32	76
X.	Burton Lane ...	...	...	5	4	10	20	42
Y.	Clifton ...	...	...	4	3	18	15	40
Z.	Layrthorpe ...	...	...	12	4	8	12	42
Workhouse (no other address) ...				—	—	3	8	11
Totals ...				217	104	443	455	1315

**TABLE 12.**  
1915 —THE QUARTERLY GENERAL DEATH-RATES PER 1,000 LIVING.

	England and Wales.	96 Great Towns.	City of York. *
First Quarter— (Jan., Feb., and March) ...	19.3	19.6	20.0
Second Quarter— (April, May and June) ...	14.9	15.1	14.4
Third Quarter— (July, August and Sept.) ...	11.6	12.3	11.7
Fourth Quarter— (October, Nov. and Dec.) ...	14.6	15.5	15.9

\* Registrar-General's Figures.



## CITY OF YORK.

**TABLE 13.**—QUARTERLY DEATH-RATES FOR TWELVE YEARS, 1904—1915.

GENERAL DEATH-RATE PER 1,000 LIVING.						DEATH-RATE DUE TO BRONCHITIS AND PNEUMONIA PER 1,000 LIVING.			
Quarter of Year.		Average for five years. 1904—08	Average for five years. 1909—13	1914	1915	Average for five years. 1904—08	Average for five years. 1909—13	1914	1915
First	...	17.2	15.6	15.3	21.1	3.2	2.98	2.97	4.95
Second	...	13.2	12.3	12.9	15.2	1.8	1.60	0.96	2.15
Third	...	14.2	10.7	13.4	12.6	0.7	0.92	0.91	1.50
Fourth	...	15.4	13.0	13.6	16.8	2.7	2.06	1.58	2.75
Whole Year	...	15.0	12.9	13.8	16.4	2.8	1.91	1.61	2.83
EPIDEMIC OR ZYMOTIC DEATH-RATE PER 1,000 LIVING.						INFANTILE MORATLITY (AGES 0—1 YEAR), PER 1,000 BIRTHS.			
First	...	1.16	0.74	0.8	0.65	113	117	124	102
Second	...	0.83	0.58	1.3	0.55	97	70	96	92
Third	...	3.56	1.53	2.5	1.8	173	109	126	142
Fourth	...	1.83	0.93	1.0	1.6	129	102	124	163
Whole Year	...	1.85	0.94	1.4	1.15	130	100	118	122



## INFANT MORTALITY.

### DEATHS UNDER THE AGE OF TWELVE MONTHS.

The nett total number of deaths in 1915 was 217, or 122 per 1,000 births (or 16.5 per cent. of the nett total number of deaths at all ages), as compared with 117 per 1,000, the average for the 96 great towns, and 110 for England and Wales.

**TABLE 14.—INFANT MORTALITY RATE.**

Year.	YORK.			ENGLAND AND WALES.
	No. of deaths.	Proportion per 1,000 births.	Percentage of total deaths at all ages.	Proportion per 1,000 births.
Averages 1904	388	170	29.3	145
1905-07	281	126	23.6	126
1908	227	104	20.5	120
1909	206	100	20.7	109
1910	186	94	17.7	105
1911	222	114	20.0	130
1912	184	97	16.0	95
1913	185	94	17.9	108
1914	225	118	19.5	105
<b>1915</b>	<b>217</b>	<b>122</b>	<b>16.5</b>	<b>110</b>

**TABLE 15.—INFANT MORTALITY IN 1915.**

DEATHS UNDER ONE YEAR PER 1,000 BIRTHS.

	England and Wales.	96 Great Towns.	City of York.
First Quarter ... ..	128	125	102
Second „ ... ..	97	99	92
Third „ ... ..	98	118	142
Fourth „ ... ..	114	128	163
Whole year	110	117	122



**TABLE 16.**

The York deaths in 1915 occurred in the Sanitary Sub-districts as follows:—

(a).	Bootham.	Micklegate.	Walmgate.	Total.
First quarter of year	6	24	23	53
Second „ „	10	17	17	44
Third „ „	10	13	38	61
Fourth „ „	11	16	32	59
	—	—	—	—
Whole year	37	70	110	217
	—	—	—	—

The special causes of the higher mortality in the third and fourth quarters of the year were:—Measles, Whooping Cough, and Diarrhœa.

(b) *Past Mortality rates for the third quarter:—*

Sanitary Sub-District.	1911.	1912.	1913.	1914.	1915.
Bootham ... ..	132	51	44	49	103
Micklegate ... ..	128	87	49	109	79
Walmgate ... ..	210	85	140	174	226
Whole City ... ..	170	78	88	126	142
„ „ (whole year)	114	97	94	118	122

The infant mortality rates for past years in the Sanitary Sub-districts of the City are stated in Table 17, and the quarterly rates for the Whole City in Table 13.

**TABLE 17.**

INFANT MORTALITY PER 1,000 BIRTHS IN SANITARY  
SUB-DISTRICTS OF THE CITY, 1909-15.

	1909.	1910.	1911.	1912.	1913.	1914.	1915.
Bootham ...	90	68	89	72	83	75	98
Micklegate ...	94	89	111	80	74	102	110
Walmgate ...	109	112	128	120	112	148	141
	—	—	—	—	—	—	—
Whole City	100	94	114	97	94	118	122
	—	—	—	—	—	—	—



TABLE 18.

ANNUAL AVERAGE INFANT MORTALITY PER 1,000 BIRTHS  
during decennial and quinquennial periods.

		York.	England and Wales.	96 Great Towns (York inclusive).
Ten Years	1891—1900	167	154	...
Five	1901—05...	143	138	147
„	1906—10...	109	117	126
„	1911 ...	114	130	140
„	1912 ...	97	95	101
„	1913 ...	94	109	117
„	1914 ...	118	105	114
„	1915 ...	122	110	117

N.B.—The figures down to 1900 are from the Registrar-General's Decennial Reports. The figures for 1901—1915, are from our own records.

The following Table, numbered 19 (Local Government Board's Table IV.), sets forth in detail the deaths of infants under the age of twelve months in York in 1915, classified according to the principal causes of death and the ages at death in weeks and months. The chief causes of Infant Mortality during the year were as follows:—

	1915.	1914.	1913.
Premature Birth ...	...34	...33	...38
*Other Developmental Causes ...	...41	...50	...41
Zymotic Diarrhoea (Enteritis)	32	39	29
Gastritis ...	4	2	0
Convulsions ...	16	16	14
Pneumonia ...	...28	...	...
Bronchitis ...	...11	33	36
Meningitis (non-tuberculous)	4	2	4
Tuberculosis ...	2	8	4
Whooping Cough ...	7	10	4
Congenital Syphilis ...	9	8	4
Accidents ...	2	5	2
Measles ...	11	—	—

\* This group of diseases comprises the deaths registered as due to "Debility at Birth," Congenital Defect, "Want of breast-milk," Atrophy, "Marasmus," and Rickets.



TABLE 19.—CITY OF YORK.

## INFANT MORTALITY, 1915.

*Nett Deaths from stated causes at various Ages under 1 Year of Age.*

(LOCAL GOVERNMENT BOARD'S TABLE IV.).

CAUSES OF DEATH.			Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks & under 3 months.	3 months & under 6 months.	6 months & under 9 months.	9 months & under 12 months.	Total Deaths under 1 year.
All causes	Certified	...	—	—	—	—	—	—	—	—	—	—
	Uncertified	...	—	—	—	—	—	—	—	—	—	—
{	Small-pox	...	—	—	—	—	—	—	—	—	—	—
	Chicken-pox	...	—	—	—	—	—	—	—	—	—	—
{	Measles	...	—	—	—	—	—	—	—	9	2	11
	Scarlet Fever	...	—	—	—	—	—	—	—	—	—	—
{	Whooping-Cough	...	—	—	—	—	—	2	—	3	2	7
	Diphtheria and Croup	...	—	—	—	—	—	—	—	—	—	—
{	Erysipelas	...	—	—	—	—	—	—	—	—	—	—
	Tuberculous Meningitis	...	—	—	—	—	—	—	—	—	—	—
{	Abdominal Tuberculosis	...	—	—	—	—	—	—	—	—	—	—
	Other Tuberculous Diseases	...	—	—	—	—	—	1	—	—	1	2
{	Meningitis ( <i>not Tuberculous</i> )	...	—	—	—	—	—	—	—	2	2	4
	Convulsions	...	4	—	2	1	7	3	3	1	2	16
{	Laryngitis	...	—	—	—	—	—	—	—	—	—	—
	Bronchitis	...	—	—	—	1	1	5	4	—	1	11
{	Pneumonia (all forms)	...	—	—	1	—	1	5	3	10	9	28
	Diarrhœa	...	—	—	1	1	2	3	14	8	5	32
{	Enteritis	...	—	—	—	—	—	—	—	—	—	—
	Gastritis	...	1	—	—	—	1	2	—	1	—	4
{	Syphilis	...	—	2	—	1	3	3	1	2	—	9
	Rickets	...	—	—	—	—	—	—	—	—	—	—
{	Suffocation, overlying	...	—	—	—	1	1	—	—	—	—	1
	Injury at birth	...	4	—	—	—	4	—	—	—	—	4
{	Atelectasis	...	1	1	—	—	2	—	—	—	—	2
	Congenital Malforma-	...	5	—	1	—	6	2	—	—	—	8
{	tions	...	22	3	4	2	31	3	—	—	—	34
	Premature birth	...	10	—	1	2	13	8	8	2	2	33
{	Atrophy, Debility and	...	2	—	—	1	3	1	—	5	2	11
	Marasmus	...	—	—	—	—	—	—	—	—	—	—
{	Other Causes	...	—	—	—	—	—	—	—	—	—	—
	Totals	...	49	6	10	10	75	38	33	43	28	217

Nett Births registered during the calendar year	legitimate	1682
	illegitimate	97
Nett Deaths registered during the calendar year	legitimate infants	198
	illegitimate infants	19



## DEATHS OF ILLEGITIMATE INFANTS.

Year.	Total illegitimate births.	Total deaths of illegitimates under the age of twelve months.	Mortality of illegitimate children per 1,000 illegitimate births.	Mortality of legitimate children per 1,000 legitimate births.
1910	103	24	233	86
1911	89	28	314	104
1912	92	14	152	94
1913	105	21	200	88
1914	107	24	224	112
1915	97	19	227	116

These deaths in 1915 occurred at the following ages:—

Under one week	...	5	Three to six months	...	2
One to four weeks	...	3	Six to twelve months	...	5
One to three months	...	4			

And were certified as due to the following causes:—

Premature birth	...	5	Bronchitis	...	...	1
Atrophy, debility and marasmus	...	1	Pneumonia	...	...	3
Diarrhoea and enteritis	...	2	Syphilis, congenital	...	...	5
Convulsions	...	1	Injury at birth	...	...	1

The illegitimate child should be saved in the interests of humanity and as an asset to the State.

**TABLE 20.**—CITY OF YORK.

The age-distribution of the Infant Mortality in York in 1915 may be stated thus:—

Age-period.	Total Deaths.	Percentage of total Infant Deaths.
In first week of life	49	22.6
In first month of life	75	34.5
In second and third months	38	17.5
In fourth, fifth and sixth months	33	15.2
In seventh to twelfth months	71	32.7

There were 113 deaths in the first three months of life, or 52 per cent. of the total infant deaths; and 146 deaths in the first six months of life, or 67 per cent. The chief causes of these deaths were Immaturity, Atrophy, Debility, Convulsions, Bronchitis, Pneumonia, and Diarrhoea.

The 71 deaths between six and twelve months were due chiefly to Diarrhoea, Measles, Whooping-Cough, and Pneumonia.



**TABLE 21.—CITY OF YORK. INFANT DEATHS.**

(a) TOTAL DEATHS. (b) PERCENTAGES OF TOTAL INFANT DEATHS.

Year.	Total deaths under one year of age.	Total deaths at ages :—					Total deaths due to :—			
		Under one week.	Under one month.	Under three months.	Under six months.	From six to twelve months.	Premature birth and other developmental causes.	Bronchitis and Pneumonia.	Diarrhoeal diseases.	Other common infectious diseases.
(a) 1911	222	43	86	133	170	52	93	21	55	13
1912	184	48	73	107	129	55	84	39	14	14
1913	185	42	77	113	150	35	79	36	29	4
1914	225	47	75	126	167	58	83	33	39	12
1915	217	49	75	113	146	71	75	39	32	18
(b) 1911	...	19.4	38.7	59.9	76.5	23.4	41.9	9.5	24.8	5.9
1912	...	26.1	40.0	58.0	70.0	30.0	45.6	21.2	7.7	7.7
1913	...	22.7	41.6	61.1	81.1	19.0	42.7	19.5	15.7	2.2
1914	...	20.9	33.3	56.0	74.2	25.8	39.1	14.6	17.3	5.3
1915	...	22.6	34.5	52.1	67.3	32.7	34.5	17.9	14.7	8.3

(c).

(d).

TOTAL DEATHS UNDER ONE YEAR OF AGE OCCURRING IN THE SANITARY SUB-DISTRICTS.					PERCENTAGES OF THE TOTAL INFANT DEATHS OF THE CITY OCCURRING IN SANITARY SUB-DISTRICTS (approx.).			
Year.	Bootham.	Micklegate.	Walngate.	Whole City.	Year.	Bootham.	Micklegate.	Walngate.
1911	34	75	113	222	1911	15	34	51
1912	27	53	104	184	1912	15	29	56
1913	33	51	101	185	1913	18	28	56
1914	28	67	130	225	1914	12½	30	58
1915	37	70	110	217	1915	17	32	51

**Dead-births (or Still-births).—**In continuance of the arrangement made with the Registrar of the York Cemetery in 1907, I have received from him weekly returns of the particulars concerning each still-born sent to the cemetery for burial. We are greatly indebted to him for the regularity and completeness of the returns. Particulars of 69 such burials (of children at all stages of pregnancy) were received from him during the year 1915, and when considered necessary some further enquiries were made concerning them; 43 had been certified for burial by doctors, and 26 by certified midwives.



## DEATHS OF CHILDREN UNDER THE AGE OF FIVE YEARS.

The nett total number of deaths of children under the age of five years (0—5) was 321, or 24.4 per cent. of the nett total of deaths at all ages, or 4.0 per 1,000 living at all ages in the whole City, being the same as in 1914.

Year.						Total deaths under five years.
1910	...	...	...	...	...	288
1911	...	...	...	...	...	324
1912	...	...	...	...	...	285
1913	...	...	...	...	...	255
1914	...	...	...	...	...	331
1915	...	...	...	...	...	321

The deaths at this age-period occurred during the year as follows:—

First quarter	...	88, or 20.9	} per cent. of total deaths at all ages in that quarter.
Second	„	57, or 18.7	
Third	„	81, or 32.0	
Fourth	„	95, or 28.2	

**The deaths under the age of five years in 1915 were distributed as follows:—**

Sanitary Sub-district.					Totals.	Percentage of total deaths at all ages in that district.
Bootham	...	...	...	...	48	15.0
Micklegate	...	...	...	...	95	21.5
Walmgate	...	...	...	...	168	30.3

Of the total City deaths under the age of five years, it will be observed that over 52 per cent. occurred in Walmgate Sanitary Sub-district.

**The total deaths in 1915 in three age-groups, in the three Sanitary Sub-districts, were as follows:—**

Sanitary Sub-districts.	Age 0—1.	Age 1—5.	At all ages over 5.	Totals.
Bootham district	...	37	21	261
Micklegate	„	70	25	347
Walmgate	„	110	58	386
Totals	...	217	104	994



**The chief causes of death amongst the 104 children between one and five years of age were as follows :—**

Measles	...	...	...	...	...	...	12
Whooping-Cough	...	...	...	...	...	...	11
Tuberculosis (Tuberculosis of Lungs, Tubercular Meningitis, Tabes Mesenterica, etc.)	...	...	...	...	...	...	16
Bronchitis and Pneumonia	...	...	...	...	...	...	44
Developmental diseases	...	...	...	...	...	...	4
Accidental	...	...	...	...	...	...	4
Meningitis	...	...	...	...	...	...	4

**Inquests on deaths of young children :—**

During the year 21 inquests were held on the deaths of children under the age of five years, 3 children belonging to Bootham District, 8 to Micklegate District, and 10 to Walmgate District. The causes of death were registered as follows :—

Under one year of age.				At ages one to five years.			
Convulsions	...	...	6	Developmental Diseases	...	...	1
Developmental Diseases	...	...	3	Diphtheria	...	...	1
Accident	...	...	1	Bronchitis	...	...	1
Injury at birth	...	...	1	Broncho-pneumonia	...	...	2
Infanticide	...	...	1	Burns	.....	...	2
			—	Other Accidents	...	...	2
			12				—
			—				9
							—

It is very disappointing that the progressive decline in our Infant Mortality rates of recent years has experienced such a check as in the years 1914 and 1915. There has been the marked fall in the birth-rate in those two years on the one hand, and yet the Infant Mortality has been higher and out of proportion. As will be seen from the above figures, the only marked definite causes of this mortality have been Measles, Pneumonia, Congenital Syphilis, and Gastro-Intestinal troubles. Probably the upset of family life, and the anxiety caused by the absence of the fathers of families at the war has led to some relaxation of maternal care and may account in some degree for the mortality. There are also the factors of bad housing, the employment of mothers, insufficient lying-in and care after maternity, and the increased cost of milk and other foods. The increase in the national Infant Mortality rate since the outbreak of war has been proving so serious that a special conference under the auspices of the "Central Committee for



National Patriotic Organisations," and the "National Association for the Prevention of Infant Mortality," was held in the Guildhall, London, on October 26th, 1915, to consider the question. It was addressed by The Duchess of Marlborough, The Right Hon. Walter Long, M.P. (President of the Local Government Board), Sir Thomas Barlow, Bart., M.D., K.C.V.O., Sir James Crichton Browne, M.D., F.R.S., and Mr. Benjamin Broadbent, of Huddersfield. The York Corporation, however, did not send delegates. Attention was called by the Right Hon. Walter Long to the fact, among others, that many wives of soldiers absent from home were spending their separation allowance in drink, to the serious neglect of the young children. Many of these women have had more money to spend since the war began than they ever had in their lives before, and it was tending towards ruin for them and their households. It would have been well if it had been possible to arrange to let wives and mothers have only such portion of their allowance as was necessary for their maintenance and comfort—the remainder should have been banked on their behalf. It has seemed to be impossible for social workers to alter the matter appreciably. The only way would have been for the Army Pay Office to curtail the supplies of money.

With the permission of the Health Committee, I inserted the following letter in the local papers, in November, 1915 :—

#### "THE BABIES AND THE WAR.

May I, through your columns, call the attention of mothers and social workers to the fact that, although the careful rearing of young children was never of such vital importance as at the present time, the infants are being lost all over the kingdom at a higher rate since the war commenced than at any time during the previous four years. This increased death-rate in York has not been due to any excessive prevalence of infectious or other disease, neither has it been due to any slackening of effort on the part of the Health Department Staff or of the Infants' Welfare Association or other help-giving societies. To those who have had opportunities of studying the matter closely, it appears to be due to the disturbance of the usual conditions of home life produced by the war.

I want particularly to call the attention of all mothers whose husbands are now away from home, on military service or otherwise, to the great importance of keeping themselves and their children well-nourished if they are to keep in good health. When the husband does not come home to dinner it frequently happens that his wife does not go to the trouble of preparing a good dinner for herself and her children, but puts up with a mere scrappy meal of tea and bread, and cakes, etc., whereas she and the older children need meat or other



food of more substantial and nourishing character. This is true also for the mothers who go out to work, and it is especially important for the mother who is suckling her baby, as she ought to do for the first nine months of its life, if that is at all possible. If she feeds merely on bread and tea, she cannot nourish her baby sufficiently; her baby will pine and die, and she herself will become thin and run-down. Printed information about the cheapest and most nourishing foods can be obtained upon application at the Health Department, 50, Bootham, or at the Infants' Welfare Association, 22, St. Saviourgate. I should like to emphasise the great value of good rich fresh milk for all young children, and of well-cooked oatmeal porridge, bread and dripping, cheese, and suet puddings for children who have grown up beyond the baby stage. Oatmeal porridge is one of the principal foods of one of the most sturdy peoples on earth—the Scots—the people who have produced the Scots Greys, the Seaforth Highlanders, and the Black Watch.

Another cause of the excessive mortality amongst children must be referred to:—It is stated upon good authority, that some wives of soldiers are spending their separation allowance far too largely upon drink, with consequent neglect of their young children, and with fatal results for the babies. It may be only a comparative few who are so foolish, but still it is the babies who suffer first, in consequence. When the war is over, such wasters will probably expect the further support of public funds; they may live to find that the pockets of the generous and of the tax-payer can do no more for them. On the other hand, it is a pleasure to state that many soldiers' wives are saving and banking their surplus money. However much upset and depressed wives and mothers may be by the absence of husbands and sons on active service—we all feel sympathy for them—that should not be made an excuse for excessive drinking, still less for the neglect of the children, or for the spending of a large proportion of the income on drink instead of on proper food. Drink is a fatal substitute for food.

There never was more need than there is to-day for the mother, or the woman who is expecting her baby, to take care of herself, and to be cared for by those who belong to her, in every possible way—for her child is going to be of value and importance, not only to her, but to England. If any such woman who is not well-off needs advice, let me strongly recommend her to visit the Infants' Welfare Association, at 22, St. Saviourgate; there she will meet those who are ready and able to advise and help her in several ways and with kindness and sympathy.

Yours faithfully,

EDMUND M. SMITH, M.D.,

*Medical Officer of Health."*

4th November, 1915.



The subject of Maternity and Child Welfare work in York and elsewhere was fully reviewed in the sections of my Annual Report for 1914 on "Infant Mortality," pages 34 to 49, and on "Maternity and Child Welfare Work," pages 50 to 69, which were specially written in view of the vital and immediate importance of this matter.

We are faced at the present time with a serious position of a three-fold character, viz. :—

(a) The terrible war wastage of life and limb. The present struggle may leave us too poor in manhood and womanhood to regain in half a century the level of two years ago. There will be fewer babes to come, and their heritage of health and strength will probably be seriously diminished as one result of the war ; it may cost us as much to save ten thousand of them as it does at present to destroy an equal number.

(b) The declining birth-rate.

(c) The continuance of a high Infant Mortality rate.

In order to arrest the latter, it is necessary to save both our mothers and infants, and for that purpose to carry out :—

- (1) Ante-natal care for the sake of both ;
- (2) Special care for both at the time of parturition ;
- (3) Post-natal care of both ;
- (4) Care of the young children up to school age.

The care of the children *during* school age is now being actively carried on under the system of Medical Inspection of School Children.

Very successful work has so far been accomplished—through sanitary administration and through the educational work of Health Visitors, leaflets, lectures to mothers, etc—in the diminution of Infant Mortality, per the reduction of ignorance and improper feeding, and of Summer Diarrhœa. This has, however, been largely post-natal work only.

### **Ante-Natal Work—**

But it is evident that if the Infant Mortality is to be still further reduced, the deeper and more difficult causes, which have all the time been in the background, must now be tackled, viz. :—those conditions existing before, during, or after birth,



which prejudice the life and health of both mother and child, and which lead to such appalling (and alas, increasing) mortality, not only in the early weeks of infant life, but even before birth as is evidenced by the excessive proportions of abortions and still-births. The mortality from the last two causes *alone* is probably equal, says the Principal Medical Officer of the Local Government Board (Dr. Newsholme), to an *additional* mortality of 150 per thousand births.

It is becoming more and more clear that the prevention of infant disease and mortality is inseparable from the prevention of maternal disease and mortality. Maternal disease involves the occurrence of pre-natal death, premature birth, infant mortality in the early weeks and months of life, much maternal damage and suffering. Every doctor, nurse, and educated mother knows that much of this could be saved by skilled advice and increased care, feeding, and supervision, before, at the time of, and after parturition. They know that there are a hundred and one things in which an expectant or nursing mother needs skilled advice and help. Such is one of the functions of the present "Maternity Centre" (The York Infants' Welfare Association), with its allies, the Corporation Health Department, the Dispensary and the Maternity Hospital.

Now and in the immediate future we need to urge:—

The increased care of expectant mothers ;

The utmost possible return to the natural methods of baby feeding ;

And the provision of greatly-improved housing conditions for the poorer classes. This is an exceedingly vital problem.

The basis of a great deal of the maternal disease and of the mortality of infants, especially in the early months of life, is Venereal disease; alcoholism and the use of the abominably advertised abortifacients also have serious mortal influences. I referred to abortifacients in my last Annual Report, it is time there was some legislation in regard thereto. The two principal venereal diseases, gonorrhea and syphilis, account for a large proportion of the premature and dead births and of maternal and infantile disease. That is a fact which cannot be too fully emphasised, serious and degrading though it be. The subject has recently been minutely investigated by a special Govern-



ment Commission, which has made valuable recommendations. There is reason to believe that we are on the eve of an important Government campaign, educational and ameliorative, in regard to these diseases, and that the great social canker, which has been so studiously kept dark, will, before long, be dragged out into the light, and will not only be the subject of much discussion and of educational propaganda, but also the object of free public facilities for early and skilled diagnosis and treatment. We shall probably have much more to say upon the matter when another Annual Report comes round; in the meantime, it may be mentioned that during recent years the diagnosis and treatment of these wretched diseases—which entail so much suffering for the innocent as well as the guilty—has made remarkable progress, so that there are greater prospects of their eradication than has ever been possible before.

*Pre-School Age:—*

The Medical Inspection of School Children has made it evident that there is great need for similar helpful supervision of children prior to school age (Infant Clinics).

All such work may now rightly be considered to be the direct duty of a Public Health Authority, but some of it can certainly be more appropriately carried out by voluntary institutions, managed by educated and enthusiastic men and women, than by Committees of overworked Sanitary Authorities. The latter, however, should furnish their utmost financial and co-operative support.

All this work becomes still more vital in the interests of the Nation as well as of the local community, owing to the fact that the birth-rate, which has been declining for some twelve or fifteen years past, is declining even still more rapidly, and is coming down to the level of the death-rate. As Dr. Newsholme says:—"The death-rate cannot continue to fall at the same rate as the birth-rate." Unfortunately, owing to the shortage of men, the uncertainty of the future, and the sudden development of so much more employment for women, it is probable that the diminished birth-rate will continue as long as the war continues, and, perhaps, for long afterwards. The decline in the birth-rate has been much more marked among the more opulent classes than among the labouring classes\*. It is the latter chiefly who have been maintaining

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\* Whatever economic and other possible causes might be referred to, the following recent remark by a veteran sanitarian may well be quoted at the present time:—"If the increase of patriotism which the events of the present time have produced could be utilised for checking such intentional restriction of births as is really the product of selfishness and love of ease, it would tend to improve the morality of the Nation as well as its future security."



the population in recent years. That being so, it surely becomes the duty of the community, in the interests of the national existence and welfare, to do all in its power to promote the preservation and physical welfare of their children—and also of the mothers, for the welfare of infancy is obviously and inseparably dependent upon the welfare of motherhood.

Setting aside all sentiment and counting the national cost in money and hard work (for the work will not be easy), “there are as strong national reasons for lavishing every care upon our infant life as there are military reasons in war time to heal the wounded and guard the Army from disease.” As The Right Hon. Herbert Samuel has said :—“We have to realise now that the security of our own civilisation depends not only on the quality and efficiency of our people, but also on their numbers ; and it is a fact which gives us food for thought that while the population of the United Kingdom increased in ten years by about  $3\frac{1}{2}$  millions, the population of Germany increased in ten years by  $8\frac{1}{2}$  millions.” “We must save all the children we can, and any help given to this task is the best sort of national service. We believe that a blessing will come out of it, and that the war will not have the disastrous effect upon our population which some seem to expect. The ways of nature are dark to us, and war has driven us back to nature in many ways. A century ago, when we were fighting, as now, for existence, the population increased at a greater rate than it has ever done since.” (*The Times*). But there can be no retrenchment in expenditure in the near future on the education and care of mother and child.

There are two other points which also require to be kept in mind in regard to this work of the salvation of the babies and the care of the mothers, viz. :—

- (a) That although more males are born than females, yet the boys are harder to rear than girls, and they perish in larger numbers, even before birth. So that, in view of the present terrible losses in men, the necessity of saving the male babies gives the whole problem an additional importance.
- (b) “Female labour in war-time is attended by a two-fold danger—that, while fewer babies are born owing to women being unwilling to sacrifice the time necessary for childbirth, the constant strain of monotonous work,



long hours, hurried meals, the lack of exercise and recreation in the open-air, may all add their quota in rendering such babies as are born weak and delicate, and, therefore, handicapped from the commencement."

Professor A. Pinard, the greatest French medical authority on the rearing of infant children, makes the interesting and remarkable statement that infantile mortality has been lower in France during the war than ever before, whilst the health of the children has been better. During the first year of the war, in the first place, the death-rate of mothers after confinement was reduced; secondly, the proportion of still-born children, instead of increasing, as had always been the case during previous wars, diminished; thirdly, the proportion of children placed in foundling hospitals at birth also decreased. The number of prematurely born children was reduced. The average weight of children at birth increased. "Never have so fine and healthy children been seen in Paris as now," says the professor, "and the reason is that they have never been better cared for." He points out that this is a triumphant justification of the measures taken at the beginning of the war for protecting mothers before and after child-birth; for encouraging and assisting mothers to nurse their own children; and, when necessary, for supplying scientifically sterilised milk obtained from cows in a special herd—the property of, and under the supervision of, the City of Paris.

Professor Pinard, however, sounds a warning note. In the last few months infantile mortality, although still below that of 1913, has risen above that of the first year of the war. He accounts for this by saying that as trade is being gradually resumed, while the number of male workers has scarcely increased, mothers have been tempted to work under conditions less favourable to their offspring, and also to take up harder kinds of work."—(*Daily Telegraph*).



## PROGRESS OF MATERNITY AND CHILD WELFARE WORK IN YORK

AND IN ENGLAND AND WALES.

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What is being done to reduce all this maternal and infantile disease and mortality?

**Grants.**—In July, 1914, circulars were issued by the Board of Education and by the Local Government Board, offering the payment of grants in aid of Maternity and Child Welfare schemes and “Schools for Mothers,” working in co-operation with the Local Education and Sanitary Authorities, and a joint committee of representatives of the York Education and Health Committees, and of the Committees of the York Dispensary, the Maternity Hospital, and the York Infants’ Welfare Association, authorised application to be made to the said Boards for these grants. The Health Committee have since received two grants from the Local Government Board, amounting to over £176, in aid of the work of their health visitors; and the York Infants’ Welfare Association has received two grants *for its educational work* from the Board of Education, amounting to over £162.

The excellent practical work being carried on by the York Infants’ Welfare Association was fully reviewed in my Annual Report for 1914. Cases of mothers, and of children under school age, requiring special treatment, are referred through this Institution to the Dispensary or Maternity Hospital, which form absolutely necessary links in the chain of this important branch of modern public health work (see also below).

The application for grants (above referred to), made September 24th, 1914, included separate applications on behalf of the York Dispensary and the Maternity Hospital. After prolonged delay, pending the settlement of some difficulties, a communication was received from the Local Government Board (September 3rd, 1915) to the effect that the Board was at present unable to make grants direct to such institutions—“Where, however, the Local Authority enters into arrangements with a hospital for the provision of facilities in connection with its scheme of maternity and child welfare, the Board will be prepared to entertain application for a grant



in respect of any contribution which may be made by the Local Authority to the hospital in consideration of those facilities." The York Dispensary and its Maternity Hospital do not come in for grants, therefore, except through the Local Authority, and yet these Institutions, along with the others, are carrying out practical life-saving work (some of which is actually carried out by Local Sanitary Authorities themselves elsewhere), and the Maternity Hospital could readily extend its usefulness in that direction if it commanded such a grant. The practical detail of this class of work cannot be left in better hands than in those of the said institutions, and Local Authorities are urged to make the utmost use of existing voluntary institutions—expenditure in their aid at the present time being both permissible and desirable.

In May and July, 1915, circulars, modifying previous arrangements, were received from the Local Government Board and the Board of Education, with regard to the future payment of grants in aid of Maternity Centres and Schools for Mothers, which set forth that it had been agreed between the two departments that the Local Government Board on the one hand will pay grants, under certain conditions, in aid of (a) salaries and expenses of Inspectors of Midwives and of Health Visitors; (b) the provision of a midwife or doctor for the aid in confinement of necessitous women; (c) the expenses of a Maternity Centre, *i.e.*, an institution providing any or all of the following activities, *viz.*:—medical supervision and advice for expectant and nursing mothers and for infants and little children, and medical treatment for cases needing it. That Board will also pay grants in aid of approved voluntary agencies co-ordinated with the Public Health and School Medical Services. The Board of Education, on the other hand, will, as a rule, pay the grants in aid of Schools for Mothers—with their infant consultations and home visiting.

A circular of the Local Government Board, dated July 29th, 1915, calling the attention of Sanitary Authorities to the Notification of Births (Extension) Act, 1915, and to their powers and the urgent need for advancing Maternity and Child Welfare Schemes, was referred, together with the above Regulations, by the Health Committee to the Midwives and Maternity Subcommittee for their consideration and report, and a copy of the circular was forwarded to every member of the Health Committee.



To quote the circular:—"At a time like the present the urgent need for taking all possible steps to secure the health of mothers and children and to diminish ante-natal and post-natal infant mortality is obvious, and the Board are confident that they can rely upon Local Authorities making the fullest use of the powers conferred on them under this and other Public Health Acts. . . . It will be seen, therefore, that the Act definitely contemplates that the powers of Sanitary Authorities will be used to promote the care of mothers and young children. In the development of general schemes the Board desire that the services of hospitals and other efficient voluntary agencies should be fully utilised. The importance of conserving the infant life of the population makes it desirable that steps should be taken in the directions indicated even at the present time when strict economy is required in the expenditure both of public bodies and of private individuals. It is not, however, intended that any large outlay should be involved in the provision of the services mentioned. No capital expenditure is needed and the maintenance expenditure need not be heavy. The health visitors and many of the doctors required to work such a scheme will be women, and no labour need be employed which is required for the more direct purposes of the war."

The Council meeting of the Corporation, held March 6th, 1916, endorsed the Health Committee's adoption of the following recommendation of the Maternity and Midwives Sub-Committee, viz.:—"That, in order to complete the York Maternity and Child Welfare Scheme, as urged by the Local Government Board in their communications of July, 1914 (*re* Maternity and Child Welfare), and July, 1915 (*re* the Notification of Births (Extension) Act, 1915), a grant of £100 be made to the York Dispensary and Maternity Hospital, in view of their continuing and extending their present work, in affording ready facilities for giving medical advice and treatment at the Dispensary and at the Maternity Hospital to mothers and children found to be in need by those who are working the scheme, it being understood that the Local Government Board will be prepared to pay the Local Authority a return of 50 per cent. of that grant; also that the Joint Representative Committee (referred to above), be continued as a permanent joint committee. The Sub-Committee do not see their way, at present, to recommend a similar grant to the York Infants' Welfare Association, another important factor in the scheme."



Regarding the Notification Act, of 1915, copies of the circular *re* the 1907 Act were again issued to the general medical practitioners, together with the following note :—

"28th January, 1916.

*Please Note:—*

The operation of this Act has now been made compulsory throughout the kingdom by the Notification of Births (Extension) Act, 1915, which also urges the utmost use of their powers by Sanitary Authorities to promote in every way the care of expectant and nursing mothers, and of young children from babyhood up to school age. The co-operation of medical practitioners is earnestly solicited at the present time in the interests of the national welfare.

The utmost possible care is taken by this department to avoid interference or cross advice during the attendance at a maternity case of a medical practitioner or competent certified midwife.—EDMUND M. SMITH, *Medical Officer of Health.*"

*The following is a summary of the York Maternity and Child Welfare Schemes:—*

Work is being carried on in the City, falling within the scope of the Local Government Board's memo. of July 31st, 1914, as follows :—

The local supervision of Midwives is carried out by the Medical Officer of Health and his two official Health Visitors.

*The York Infants' Welfare Association*, is the Maternity Centre, Infants' Clinic, and School for Mothers, and is conducting :—

Practical instruction in home nursing, personal hygiene, the making of proper clothing and numerous other things useful to a mother ;

A Thrift Club for mothers ;

Dinners for starving necessitous mothers (when necessary) ;

Consultations and supervision (detailed) *re* the health of expectant and nursing mothers (Ante-Natal Clinic) ;

Consultation and supervision (detailed) *re* the health of babies and young children under school age ( "Medical Inspection of Infants " ), etc.

(These consultations are conducted with a minuteness and thoroughness impossible for a general dispensary or a busy medical practitioner).



Cases requiring special treatment are referred from thence to the *York Dispensary*, which provides :—

Medical *treatment* for expectant and nursing mothers ;  
 „ „ for babies, and children under school age ;  
 „ „ and attendance on necessitous maternity cases at home ;

or to the *York Maternity Hospital*, which provides :—

Skilled treatment for complicated cases of pregnancy ;  
 „ „ for complicated cases of parturition ;  
 „ „ for very feeble young babies ;  
 receives maternity cases from very poor, or insanitary or otherwise unsatisfactory homes, or of unmarried (hitherto respectable) mothers ;  
 and provides for the training of midwives.

The home visiting of expectant mothers is carried on according to opportunity by the Superintendent and voluntary workers of the Infants' Welfare Association by the York Sanitary Authority's Health Visitors, and the Nursing Staff of the York Maternity Hospital, acting in co-operation.

The home visitation of infants and of children not on a school register is carried on by the York Corporation Health Visitors, by the Visiting Medical Officers of the York Dispensary, and by the York Infants' Welfare Association.

All the above work is conducted in co-operation.

Regarding the calling in of medical help by certified midwives, the present arrangements in the City may be stated as follows :—

*In a case so poor* that a doctor's fee is out of the question, a certified midwife can send for one of the Poor-Law Medical Officers, who obtains his fee from the Board of Guardians. If the services of a Poor-Law Medical Officer are not readily available, a certified midwife may recommend her patient to apply to any other medical practitioner, who may thereafter apply to the Clerk of the Board of Guardians for his fee ; the application for the fee being accompanied by a brief statement of the particulars regarding the character of medical help rendered and the circumstances. In any such case which may reasonably be expected to pay the doctor's fee, the medical



practitioner should not apply to the Guardians therefor, until after he has made reasonable efforts to obtain the fee direct from the patient or her responsible relatives.

### **The Notification of Births Act and the work of the Health Visitors :—**

**The Notification of Births Act, of 1907**, was adopted by the York Corporation, and came into operation in the City on the 12th February, 1908. The Notification of Births (Extension) Act, of 1915, has made the operation of the 1907 Act universal throughout the country.

Operation of the Act in the City of York during the year 1915 :—

Total births registered with the Sub-registrars	...	...	...	1790
"    "    notified to the Medical Officer of Health within 36 hours, as required by the Act...	1387	}	87.7 per cent. of total births registered.	
"    "    notified after 36 hours after birth	184			
	1571			
<hr/>				
Total births <i>not</i> notified at all	...	...	...	219 (percentage 12.3).
Total births notified by general medical practitioners	...	...	...	130
"    "    by registered ("certified") midwives	...	...	...	1267
"    "    by nurses	...	...	...	65
"    "    by parents, or occupiers of houses	...	...	...	109
				1571
<hr/>				
Total births notified (of the above 1790) as still-births (after 28th week of pregnancy)	...	...	...	44

### ***The Work of the Corporation Health Visitors:—***

The main duties of the Health Visitors are to advise mothers about the rearing and feeding of their infants (About 65 to 70 per cent. of total births are visited, and from 4 to 24 re-visits paid per case, according to need); to advise mothers *re* cleanliness and other points in domestic hygiene; and to help in the supervision of the certified midwives, etc.

As it is essential that the Health Visitors should give sufficient time to their visits in order to establish friendly relationships with the people they visit, and to have helpful conversation with them, it is impossible to summarise the work fully by means of statistics, but so far as statistics go, the following will be of interest :—



TABLE 22.

Summary of work performed by Health Visitors during the year 1915:—

<i>Houses Visited:—</i>	East side of City.	West side of City.	Total.
First visits <i>re</i> Births ... ..	802	489	1291
Re-visits to Infants ... ..	1912	2411	4323
<i>Re</i> Still-births (to verify and advise) ...	10	4	14
To Midwives (inspection and advice) ...	117	69	186
<i>Re</i> Phthisis cases (advice and help) ...	32	—	32
<i>Re</i> Diarrhœa cases and Infant deaths (as to causation, etc.) ... ..	64	25	89
<i>Re</i> Elder Children ... ..	120	140	260
<i>Re</i> Convalescent Cases of Sickness ... ..	86	68	154
Called in to see Ailing Children ... ..	80	12	92
<i>Re</i> cases of Ophthalmia Neonatorum (visits and re-visits) ... ..	34	26	60
<i>Re</i> cases of Puerperal Sepsis ... ..	9	2	11
To Expectant Mothers ... ..	25	21	46
Obtaining Swabs ... ..	53	3	56
Attendance at Infant Welfare Clinics ...	95	86	181
Housing Defects, etc., referred to Medical Officer of Health and Chief Sanitary Inspector ... ..	70	62	132

*Facts regarding the feeding of the infants visited between July 1st, 1914, and July 1st, 1915, as observed at different periods of infancy:—*

TABLE 23.

Total births given to visit, 1343.	About the end of 3rd month.	About the end of 6th month.
Total children being breast-fed entirely ... ..	872	773
„ breast-fed plus bottle (cow's milk and water) ... ..	38	36
„ breast-fed plus tinned whole milk ...	6	4
„ breast-fed plus spoon-food (starchy foods) ... ..	3	10
„ bottle-fed (cow's milk and water entirely) ... ..	165	212
„ bottle-fed (tinned whole milk) ...	23	21
„ bottle-fed (starchy foods) ... ..	19	30
„ bottle-fed (dried milks) ... ..	23	30
Percentage entirely breast-fed ... ..	64.9	57.5
Percentage entirely bottle-fed (with various foods) ...	17.1	21.8
	First Visit.	Second Visit.
Total babies in clean condition ... ..	1206	945
„ dirty „ ... ..	29	27
Total houses in clean condition ... ..	1187	1077
„ dirty „ ... ..	48	39
Total babies ailing at time of visits ... ..	66	57
Visits declined ... ..	8	
Total deaths occurring amongst infants visited	69 (51 per 1,000 births)	
Not visited (for various reasons) ... ..	91	
Removed or left City during the six months...	80	



The results of this work cannot be expressed in statistics. It is reasonable to act on the assumption that the hygienic advice given in the visits following notification must have invaluable influence in securing improved health in childhood.

Some excellent work has been done in the direction of the teaching of the senior girls in the elementary schools on "Infant Care and Management," at the new Domestic Centre at White Cross Lodge, near Haxby Road Council School, and on four occasions during the year one of the Corporation's Health Visitors has given demonstrations to these pupils (who are often deputy-mothers at home) on the washing and dressing and personal hygiene of a live baby, the mother of which has always been present.

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### *The work of the York Infants' Welfare Association*

(Rooms at No. 22, St. Saviourgate, and at No. 74, Stamford Street, Leeman Road).

*President*:—Mrs. Edwin Gray.

*Hon. Sec. and Treasurer*:—Dr. Micklethwait ; *Asst. Hon. Sec.*:—Miss Mabel Simpson.

*Hon. Medical Consultants*:—Drs. Norah Kemp, Janie S. Baugh, and Mary Bell Ferguson.

*Superintendent*:—Miss Follows ; *Asst. and Probationer*:—Miss Mollie Swanson.

Miss Follows is a fully trained nurse and midwife of many years experience. Miss Mollie Swanson possesses the certificate of the Central Midwives Board, and was added to the staff during last year. The Medical Officer of Health and the Corporation Health Visitors are on the Executive Committee and introduce a large proportion of the "clients," and the Visitors are usually present and help at the consultations, where their previous knowledge of the "clients" is of value.

Hundreds of the Corporation leaflets and cards on the care and feeding of infants, and on infectious diseases, Summer Diarrhoea, Flies, Tuberculosis, the value of Vaccination, etc., are distributed to the mothers freely. "Advice cards," weight and other detailed records are kept of each child's progress, systematically and elaborately.







HOME VISITING :—Voluntary Visitors have paid 42 visits ; the Superintendent has visited 777 homes ; Assistant Nurse visited 560 homes.

FEEDING :—

Breast feeding	...	...	...	...	...	102
Breast, supplemented with Cow's Milk	...	...	...	...	...	29
" " " Bread, Rusks, or other starchy food	...	...	...	...	...	13
" " " Glaxo, or other dried milks	...	...	...	...	...	3
" " " Nestle's Milk	...	...	...	...	...	1
" " " Cream	...	...	...	...	...	1
Cow's Milk	...	...	...	...	...	30
Peptonised Milk	...	...	...	...	...	3
Cow's Milk with Albulactin	...	...	...	...	...	1
Glaxo and other dried milks	...	...	...	...	...	3
Allenbury's Food	...	...	...	...	...	2
Nestle's Milk	...	...	...	...	...	9
Neave's and other patent foods	...	...	...	...	...	6
Whey	...	...	...	...	...	2
A mixture of several kinds	...	...	...	...	...	5

"There have been 1,503 visits paid to mothers and children in their own homes, 777 of which were paid by the Superintendent herself. The value of these visits cannot be over-estimated, and they are appreciated by the mothers ; ten minutes' quiet talk enables Miss Follows to get into closer touch with the mothers than is possible on their first attendances at the Centre, and to individually suggest methods of carrying out the advice received.

"The Mothers' Dinners were discontinued on March 6th, as the attendance was very small and all the mothers were in receipt of regular allowances or the husband was in full work. Two hundred and fifty-five dinners cost £2 14s. 6d. (2½d. a dinner).

"It is now possible, after two years' working, to draw some definite conclusion about the work of the Association, and the attitude of the mothers towards it. At first the mothers were suspicious, but the visiting has done much to allay this, and the fact stands out clearly that the foundation of the work accomplished is to be found in the mothers' consultations with the doctors. These consultations give the Superintendent the authority needed to carry on her work of advice and supervision.

"The prevention of illness by nipping it in the bud is another important feature of the work. A watch is kept on the health of the mothers as well as on the health of the babies, and a



word of advice as to food or general care, a hint to see her own doctor or to attend the Hospital or Dispensary, often tends to put a stop to a condition which might have led to something more serious. Sometimes it is evident that the mother needs extra milk to improve her own health for the child's sake. Twenty milk tickets and 5 Invalid Kitchen tickets have been distributed. The mother is usually the last to consider herself.

"Our ante-natal work is making headway. Forty-three women have been seen at the clinic, and there have been sixty attendances, with the result that five Maternity Hospital Notes have been given in cases where difficulty might be expected. This work is in its infancy, but its utility and importance are obvious. These expectant mothers are inclined to be very reticent, and the value of a visit to the home does much to smooth the way. The mothers, too, neglect their own feeding and it is noticeable how pleased they seem when the doctor takes an interest in their health as well as in the baby's. Midwives are invited to accompany their patients when they come to see the doctor.

"The absence of many of the women's husbands at the war has naturally caused a good deal of worry to them, and the fact that the meals of the household in peace time are regulated by the husband's times off for meals, the present meal times being irregular result in a weakening of resistance to any illness. Miss Follows has been unremitting in her efforts to encourage mothers to get as good food for themselves and their children as they did for their husbands, and to have it at fixed hours.

"We attach great importance to the Class for mothers at which Miss Follows gives more scientific and detailed advice than is possible at the weekly talks, and we hope to further develop these Classes.

"It is satisfactory to report that the attendance of children between babyhood and school age is increasing. During the year 53 children above one year of age have been on the books. It is at this age that early cases of consumption, rickets, and hereditary diseases can be most successfully dealt with. The large number of children found by the School Medical Officers of the United Kingdom to be defective at the age of entry into school life proves the necessity of bringing children under trained supervision at the earliest possible moment.

"We have been greatly helped in our work by our close association with the Maternity Hospital, which refers many mothers to us, and also with the Infants' Clinic of the York



Dispensary to which we have sent many children who required further medical aid than we could give.

“ Mothers now often bring two or three children to the Clinics and these are inspected ; and in visiting babies, enquiries are also made about the health of the older little ones, whose welfare is being increasingly kept in mind.”

*The Maternity Hospital in Ogleforth*, was opened in 1908, and its work increases in usefulness and variety.

During 1914 there were 115 in-patients and 150 out-door.

During 1915 the hospital received 138 in-patients, of which 115 belonged to the City of York ;

350 out-door visits were paid to expectant mothers.

Amongst the cases received were 56 complicated cases of pregnancy, or cases with complications after parturition.

The hospital is also a teaching institution, and trains women for the certificate of the Central Midwives Board. Sixty midwives have so far been trained in this institution.

*Other agencies at work* in the interests of mothers and infants, besides those above-mentioned, are :—

The Infants' Crèche of the Sisters of St. Vincent de Paul, in Fishergate ;

The Charity Organisation Society ;

The York Citizen's Committee ;

The York District Nursing Association ;

The York County Hospital ;

The Soldiers' and Sailors' Families Association, etc.

By a circular of the Board of Education (No. 879), dated November 26th, 1914, grants are now made towards the cost of working *day nurseries*, voluntary or otherwise, such nurseries being institutions which receive for care in the day-time, primarily the infants and children under three years of age (and secondarily children over three years of age, if urgently required) of mothers who are obliged to go to work during the day-time, and who cannot leave their children to be properly nursed at home. The Medical Officer of Health has to be satisfied with the day nursery and its work, its arrangements for feeding, sleeping, washing, and obtaining fresh-air, and the Matron must be a person of some nursing experience. Such annual grants are now being paid to the Crèche established by the private charity of the Sisters of St. Vincent de Paul, in 1896, in Fishergate, which can receive fifteen to twenty children, and has for some years done a useful and necessary work.



*Future Developments of all this work* will probably include :—

The extension of the Maternity Hospital so as to accommodate more mothers (married and unmarried), and so as to deal with a larger number of feeble babies requiring incubator and other special care and treatment—in short, an Infants' Ward or Infants' Hospital. Also more beds will probably be required for complicated pre-maternity cases.

Increased grants will be paid by the Local Authority to the York Dispensary and Maternity Hospital, and grants should also be paid to the York Infants' Welfare Association (50 per cent. of such grants will be repayable by the Local Government Board).

Provident Maternity Funds will probably be developed, and more ready facilities for the attendance of poor mothers at confinement.

More branch Maternity Centres; also a Day Nursery or Nurseries, where mothers may also receive practical instruction in the care of delicate infants, and a small Home where the young children of mothers who need treatment in the Maternity Hospital can be cared for during the absence of the mothers.

The Medical Officers of all the Maternity Centres should be paid for their services.

Records made at the Infant Clinics will be passed on to the School Clinic, so that there will be a continuous record of the child's physical welfare.

Additional Health Visitors may be required.

Possible Dispensary and Hospital developments for the treatment of Summer Diarrhoea and other urgent ailments, without "recommendation notes."

The provision of pure, cheap, whole, unaltered milk is urgently required.

It is likely that there will be considerable development in the practical teaching of teachers and of senior girls in our elementary and secondary schools, and in continuation classes, in domestic hygiene, and as to wifehood and motherhood, with practical demonstrations at the Infants' Clinic, the School Clinic, the Crèche, etc.

Further education as to food values and food economy.

Reference has already been made to the future of the diagnosis and treatment of venereal disease.



As to the training of midwives, the York Maternity Hospital has hitherto received pupils for the three months' training required by the Central Midwives Board for 15 guineas inclusive. The Central Midwives' Board has just recently given notice of an extension of training (to six months) to be required from July 1st, 1916. This involves a large increase of fee, which falls more heavily than before upon otherwise suitable pupils, viz.:—intelligent women, not well-to-do, who cannot, therefore, afford the full fee. There is a demand for such women, and we ought to help them to obtain their training; it is a branch of technical education, and has been so treated by the Durham County Council and other education authorities. The York Education Committee should follow suit, and consider the foundation of midwifery scholarships for York citizens studying at the Ogleforth Maternity Hospital; £100 spent in this way per annum would be well-spent money in the public interest.

During the past year, an exceedingly well-written and well-illustrated little book has been published by Messrs. P. S. King & Sons. It was written by Councillor E. J. Smith, Chairman of the Health Committee of the Bradford Corporation, and describes the extensive maternity and child welfare scheme now at work in that City. This scheme, inaugurated July, 1912, took over four voluntary "Babies' Welcomes." It now comprises an Ante-Natal Clinic; a Maternity Home with nine beds and an operating theatre; Infants' Clinic, dealing with over 600 babies per week; an Infants' Hospital of 20 beds (and open-air balcony), with staff of whole-time lady doctors and nurses (the hospital deals mostly with cases of malnutrition); a Milk Dépôt for the sale of prepared milk for babies, and of pure milk for the Municipal institutions; a Cooking Dépôt supplies free meals for necessitous mothers, and eight feeding centres feed 500 mothers per week; a Pre-School Clinic deals with ailing children between the baby stage and school age; a Post-School Clinic deals with children after leaving school up to the Insurance age; there is also a special department for the treatment of diseases of the eye, ear, throat, and nose in children. The work of a large staff of Health Visitors links up all these institutions.



## THE PRINCIPAL EPIDEMIC DISEASES.

The "seven principal" Epidemic Diseases in this country are:—Small-pox, Measles, Scarlatina, Whooping-Cough, Diphtheria, Typhoid Fever, and Summer Diarrhœa.

The total number of deaths from these Epidemic Diseases in the year 1915 was 92, equivalent to a death-rate of 1.15 per 1,000 living at all ages, as compared with 1.43 for 1914.

This "Zymotic" death-rate, however, demands analysis, and the following Table gives the death-rates for each of these principal diseases:—

**TABLE 24.**  
EPIDEMIC DEATH-RATES FOR TEN YEARS,  
1905-14 and for 1915.

	YORK—1915.		Average Death-rate in York, 1905—14.	Average Death-rate, 96 Great Towns, 1915.
	Total Deaths.	Death-rate.		
Per 1,000 living:—				
Small-pox ... ..	—	—	—	0.00
Measles ... ..	23	0.28	0.16	0.50
Scarlet Fever... ..	3	0.04	0.04	0.07
Diphtheria ... ..	8	0.10	0.21	0.16
Whooping-cough ... ..	18	0.22	0.15	0.23
Typhoid Fever ... ..	5	0.06	0.08	0.04
Per 1,000 births:—				
Diarrhœa and Enteritis ... .. (under two years)	34	19.1	20.4*	24.5

\* Average for past four years.

The following figures show how large a constituent of the "Zymotic" death-rate that for Summer or Zymotic Diarrhœa has been in some recent years:—

Year.	Seven principal "Zymotic Diseases."		Zymotic Diarrhœa or Enteritis.
	No. of Deaths.	Rate per 1,000 living.	Death-rate per 1,000 living.
Average death-rates, 1904-13	113	1.39	0.77
1914 ... ..	120	1.43	0.63
<b>1915 ... ..</b>	<b>92</b>	<b>1.15</b>	<b>0.43</b>

If the decimal points be omitted in reading the above table, the reader obtains the more graphic death-rate per 100,000 living.

The distribution of the cases and of the deaths due to the Epidemic or Zymotic diseases in 1915, in districts and in age-periods, will be found in the large Tables 8 and 8a, and is referred to at greater length in the section of the Report dealing with each of the diseases.

The occurrence of the Seven Principal and other infectious diseases will now be discussed more in detail.



## SUMMER DIARRHŒA (EPIDEMIC OR ZYMOTIC ENTERITIS).

There were 35 deaths due to this distinct and specific disease in 1915, equivalent to a death-rate of 0.43 per 1,000 living at all ages. The average death-rate for this disease for the years 1905-14 was 0.53.

Of these 35 deaths, 34 were of children under two years of age (as compared with 44 last year), which is equivalent to 19.1 per 1,000 births.

Nineteen of the 35 deaths occurred in the third or Summer quarter of the year. Seven deaths occurred in Bootham, 7 in Micklegate, and 21 in Walmgate Sanitary Sub-district.

For the death-rates in previous years see above Tables.

Epidemic, Summer, or Zymotic Diarrhœa is a specific, infective disease, and now receives the more accurate title of *Epidemic or Zymotic Enteritis*. The numerous organisms in polluted refuse, soil, and dust are carried by flies or by gravitation into milk and other moist food, where they rapidly multiply and produce the toxins or poisons which cause the specific Enteritis (inflammation of the mucous membrane of the intestines). It is, therefore, a filth disease, and its prevalence is reduced by all measures tending to secure pure water, pure milk, pure food, a pure soil, and the prevention of and prompt destruction of filth and flies. The evidence as to the evil influence of the common house-fly as the carrier of filth and germ-life to milk and other food is now overwhelming.

Among the great lessons indicated by this disease which all require to realise and act upon to the full, is that no refuse of any kind, especially manure, should be allowed to accumulate long enough to become the breeding-ground of flies; the necessity for the utmost personal domestic and civic cleanliness—the diminution of dust, the proper use of ashbins, thorough scavenging, etc., the hygienic production and delivery of milk of best possible quality, and its proper storage, both in dairy and home.

Special attention is being given every spring and summer to the condition, situation, and frequent clearance of manure receptacles, the emptying of ashbins, and other phases of public scavenging. The storage and disposal of manure and the construction of manure receptacles is claiming increasing attention, but owing to shortage of labour under war conditions it is proving difficult to give the full attention which this important matter demands.

Active measures have been taken in recent years in giving special public advice on the prevention of Summer Diarrhœa, and the evil work of flies in the pollution of milk and other



foods, in leaflets and by advertisements in the public press, and personally by our Inspectors and Health Visitors; and disinfectants were distributed freely where necessary.

The summer of 1915 was fairly favourable to the prevalence of Zymotic Enteritis.

During the year 1915, the maximum shade temperature of the air attained in York was 84° Fahrenheit, viz., on June 8th. There were 47 days with a maximum temperature of 70° and over, as compared with 60 days in 1914.

The mean temperature of the air for the third quarter was 58.5, and the total rainfall 7.5 inches. The total rainfall for the year was 24.5 inches, as compared with 25.3 for 1914, and the average of 24.0 inches for the previous ten years.

The temperature of the earth at 4 feet depth reached 56° Fahrenheit early (viz., July 9th), and that was maintained until October 2nd (86 days), after which it declined rapidly. The maximum attained was 59.5, on September 18th.

**TABLE 25.**

Year 1915.	Temperature of the air.		Mean 4-ft. earth Temperature.	Total rainfall in inches.	Total deaths due to Zymotic Enteritis.	Total cases of Enteric Fever notified.
	Mean Temperature.	Maximum Temperature attained.				
May ... ..	51.4	74	49.1	1.32	3	0
June ... ..	58.9	84	53.3	0.49	1	6
July ... ..	59.4	73	56.1	3.93	1	1
August ... ..	60.0	75	57.9	1.83	5	0
September ... ..	56.3	73	57.3	1.74	13	2
October ... ..	48.0	64	54.0	0.97	7	1

The air and surface soil attained high temperatures early, and maintained such temperatures for long periods.

For further meteorological data, see Tables at end of this Report.

**TABLE 26.**

Death-rates due to Diarrhoea and Enteritis under two years of age per 1,000 births:—

1915:—	3rd Quarter.	4th Quarter.	Whole Year.		
			1913.	1914.	1915.
City of York ... ..	41.86	27.62	18.2	23.1	19.1
96 Great Towns ... ..	54.35	24.48	29.3	26.1	24.5
England and Wales ... ..	35.44	18.18	23.4	20.4	18.2



## MEASLES.

During the year twenty-three deaths occurred, being equal to a death-rate of 0.28 per 1,000 living.

Fifteen cases died of secondary Broncho-pneumonia and one of Bronchitis. Seven deaths certified as due only to Broncho-pneumonia had recently had an attack of Measles.

Fourteen of the deaths occurred in the Walmgate district ; eighteen were between one and two years of age, and twelve occurred in the third quarter of the year.

Year.				Total Deaths.	Death-rate per 1,000 living.	Death-rate per 100,000 living.
1903 (A marked year)	...	...	...	43	0.54	54
Averages, 1904-13	...	...	...	13	0.16	16
1914	...	...	...	21	0.25	25
<b>1915</b>	...	...	...	<b>23</b>	<b>0.28</b>	<b>28</b>

Educational leaflets about both Measles and Whooping-Cough were distributed, calls were made upon the schools, and letters of advice were sent to Head Teachers of the schools affected.

An epidemic of Measles commenced in July, pursued a somewhat erratic course to the end of the year, and was continuing in the early months of the new year ; 86 per cent. of the cases of Measles occurred in the second half of the year ; 87.7 per cent. in the Infant Schools.

In the blue book Memorandum on "Closure of and Exclusion from School," issued in 1909, and compiled by the Chief Medical Officers of the Local Government Board and the Board of Education, the following direction was given in regard to Measles :—

"If Measles is introduced into a school, the first crop of secondary cases will occur about 12 days after the original case, and in 12 days more there will be a second crop comprising the majority of the unprotected children." In view of this experience a class closure of short duration after the occurrence of *the first cases of Measles* in the class is recommended, the class being closed on the ninth day after the sickening of the first child, for a period of five days only.

I believe these suggestions to be sensible and scientific and entirely reasonable in the prevention of the spread of this disease. The above rule is one which involves a minimum of exclusion from school and of school closure, but it requires that the epidemic should be followed very closely, and to that purpose the School Nurses and I have devoted dozens of hours during this epidemic, with the result that I sincerely believe



we have done a good deal actually to prevent the spread of the disease, and to reduce its mortality; most certainly we retarded the progress of the epidemic, and were thus enabled to give more individual attention to cases.

The number of cases which were reported by Head Teachers was about half as great as in 1912 (namely 505—see Table 30).

The outbreaks occurred mostly in Bootham and Micklegate groups of Infant Schools. Five Infant Departments had to be closed for one week, one department for two weeks, one for three weeks, and one for a month; and in addition, five classes were closed for one week, and one class for two weeks.

In the early part of December, 1915, the prospects were so bad that I advised the Health Committee to use for the first time their new powers for the closing of Sunday Schools and allied meetings of children. The fear was that the various Christmas entertainments in particular would be likely to cause a great spread of the epidemic. The following letter was sent out to the Superintendents of all known Sunday schools in the City:—

“ 16th December, 1915.

To the Superintendents of Sunday Schools in the City of York,

I am requested by the Health Committee of the York Corporation to inform you that they have just had under their serious consideration the present extensive epidemic of measles prevailing in the City among young children, which has already produced serious mortality. They have, therefore, decided to act upon the Section 88 of the York Corporation Act, 1914 (a copy of which Section is set forth below), and hereby require you, from this date, to exclude from attendance at your Sunday School, or any department thereof (Band-of-Hope meetings, Christmas, or other entertainments, etc.) all the young children under the age of eight years, until further notice, *i.e.*, until the epidemic is over.”

Just before Christmas the epidemic showed some signs of abatement, and, therefore, I advised the Education Committee to exclude only the children under five years of age upon the reassembling after Christmas holidays, so as to reduce the amount of exclusion from day schools and so as more closely to watch the progress of the epidemic, as of course, we were able at any time—even between morning and afternoon school sessions—to close an infant day school or part of a school immediately if the outlook appeared to be worse. This procedure was well justified by subsequent events, although the difference in treatment as to age-periods between day schools and Sunday schools caused a good deal of controversy.



## WHOOPIING-COUGH.

There were 18 deaths certified as due to Whooping-Cough during 1915.

Year.				Total Deaths.	Death-rate per 1,000 living.	Death-rate per 100,000 living.
1903 (A marked year)	...	...	...	36	0.46	46
Averages, 1904-13	...	...	...	13.6	0.16	16
1914	...	...	...	18	0.21	21
<b>1915</b>	...	...	...	<b>18</b>	<b>0.22</b>	<b>22</b>

The number of cases notified by Head Teachers of schools was nearly as many (220) as in 1914 (see table 30) ; 88 per cent. of the notifications were from infant schools. The schools chiefly affected were those in Bootham Ward.

Eleven cases of Whooping-Cough died of secondary broncho-pneumonia.

One death certified as due only to broncho-pneumonia had recently had an attack of Whooping-Cough.

All the deaths occurred under five years of age. Seven deaths were under the age of one year, nine between one and two years, and two between two and five years.

Of the eighteen deaths, eleven were in the last quarter of the year.

Seven of the deaths were in Micklegate sub-district and ten in Walmgate sub-district.



TABLE 27.

## THE NOTIFIABLE INFECTIOUS DISEASES.

INFECTIOUS DISEASE (NOTIFICATION) ACTS, 1889, AND 1899, AND  
PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1912.\*

CASES NOTIFIED TO THE SANITARY AUTHORITY IN EACH YEAR, 1906—1915.

DISEASE.	1906.	1907.	1908.	1909.	1910.	1911.	1912.	1913.	1914.	1915.
Small-pox ...	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ...	217	360	184	127	169	331	358	161	278	245
Diphtheria and Membranous Croup ...	104	93	86	79	66	52	93	107	190	102
Typhoid (Enteric) Fever ...	75	30	50	38	14	58	24	24	27	12
Puerperal Fever ...	5	11	13	3	1	1	5	3	3	6
Erysipelas ...	34	57	28	32	26	69	40	25	25	30
*Phthisis (Tuberculosis of Lungs)	—	—	—	—	—	—	182	203	176	113
*Other forms of Tuberculosis ...	—	—	—	—	—	—	—	105	90	59
Cerebro-Spinal Fever (made notifiable in York, July 10th, 1912) ...	—	—	—	—	—	...	1	—	—	—
Ophthalmia Neonatorum (Infantile Ophthalmia), (made notifiable in York, July 10th, 1912) ...	—	—	—	—	...	...	7	6	10	11
Acute Poliomyelitis (Infantile Paralysis), do. do. do.	—	—	—	—	July 10th, 1912) ...	...	6	2	2	—

\* The Compulsory Notification of Phthisis came into operation on January 1st, 1912, and of all forms of Tuberculosis on February 1st, 1913.

All Military cases in 1914 and 1915 are omitted.



**TABLE 28.**—CITY OF YORK. (LOCAL GOVERNMENT BOARD'S TABLE II.).

*Cases of Infectious Disease notified during the year 1915. (Civilian cases only).*

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.										TOTAL CASES NOTIFIED IN EACH SANITARY SUB-DISTRICT.			TOTAL CASES RE-MOVED TO HOSPITAL.
	At ages—Years.										Bootham.	Mickle-gate.	Walm-gate.	
	At all Ages.	Under 1.	1 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.						
Small-pox	Nil.	—	11	55	27	9	—	—	—	45	32	25	¶ 53	
Diphtheria (including Mem-branous Croup)	102	—	—	2	1	10	13	4	—	4	9	17	† 4	
Erysipelas...	30	—	—	144	40	18	1	—	—	30	138	77	144	
Scarlet Fever	245	1	41	—	—	—	—	—	—	—	—	—	—	
Typhus Fever	Nil.	—	—	3	3	4	1	1	—	2	7	3	* 5	
Enteric Fever (Typhoid)	12	—	—	—	1	5	—	—	—	3	1	2	§ 3	
Puerperal Fever...	6	—	—	—	—	—	—	—	—	—	—	—	—	
Cerebro-Spinal Meningitis	Nil.	—	—	—	—	—	—	—	—	—	—	—	—	
Poliomyelitis (Infantile Paralysis)	Nil.	—	3	18	33	43	16	2	—	14	45	55	† 70	
Pulmonary Tuberculosis	115	—	14	29	13	5	1	—	—	16	23	24	† 15	
Other Forms of Tuberculosis	62	—	—	—	—	—	—	—	—	4	4	3	—	
Ophthalmia Neonatorum	11	10	1	—	—	—	—	—	—	—	—	—	—	
Totals	583	11	70	251	118	94	32	7	—	118	259	206	294	

† One case was received into the York County Hospital.

‡ Three cases were received into the Union Workhouse.

• Two cases were received into the York County Hospital (General Infirmary).

§ These cases were received into the County Hospital.

† Eighteen of these Tubercular cases were received into the County Hospital.

All the other cases were received into the City Isolation Hospital.

The York Isolation Hospital and the Small-pox Hospital (The Bungalow) are both situate in Flaxton Rural District.



1915. **TABLE 29.**

Showing the Attack-rate (*i.e.*, the number of persons attacked by the disease) per 100,000 of the population for infectious diseases in various County Boroughs and in neighbouring Rural Districts, and the aggregate for 82 County Boroughs.

County Boroughs, &c.	Estimated Civil Population.	Small-pox.	Scarlet Fever.	Diphtheria.	Enteric Feve.	Puerperal Fever.	Erysipelas.
Aggregate of 82 County Boroughs in England and Wales ... ..	11,253,780	—	371	149	20	8	76
YORKSHIRE :—							
Hull ... ..	269,530	—	213	241	34	7	68
Middlesbrough ... ..	116,901	—	281	222	14	3	50
Barnsley ... ..	50,409	—	304	85	14	6	95
Bradford ... ..	280,737	—	177	151	34	11	84
Dewsbury ... ..	53,299	6	366	34	15	8	49
Halifax ... ..	99,497	—	265	87	26	2	58
Huddersfield ... ..	111,139	—	336	156	7	2	51
Leeds... ..	446,349	—	323	89	24	5	78
Rotherham ... ..	64,324	—	524	132	50	12	73
Sheffield ... ..	476,012	—	456	214	13	13	82
Wakefield ... ..	48,407	—	105	192	33	8	54
CITY OF YORK ... ..	79,802	—	308	130	18	8	38
RURAL DISTRICTS :—							
Escrick ... ..	5,209	—	288	58	19	—	19
Riccall ... ..	4,062	—	148	49	25	—	25
Easingwold ... ..	9,956	—	231	30	—	—	30
Flaxton ... ..	7,411	—	229	67	40	—	54
Bishopthorpe ... ..	2,116	—	614	—	47	—	—
Great Ouseburn ... ..	10,611	—	867	57	28	9	9



TABLE 30.

Cases of Disease notified to the Medical Officers by Head Teachers of York Elementary Schools, under "The Regulations regarding Contagious Diseases," during the year 1915, and during 1914.

Disease or Condition.	Absentees notified by Head Teachers.				Suspects sent Home from School by Head Teachers.				Totals.	
	Upper Dept.		Infants' Dept.		Upper Dept.		Infants' Department.			
	1914	1915	1914	1915	1914	1915	1914	1915		
Scarlet Fever ...	37	31	17	14	7	1	—	8	61	54
Diphtheria ...	21	9	14	4	4	2	2	—	41	15
"Sore Throat" ...	142	84	52	42	52	34	22	9	268	169
Mumps ...	237	21	376	23	73	10	69	7	755	61
Measles ...	54	44	574	406	26	19	10	36	664	505
Whooping-Cough ...	27	25	195	172	—	2	25	21	247	220
Chickenpox ...	17	25	84	120	5	9	3	15	109	169
"Influenza or Cold" ...	84	107	182	197	3	1	13	65	282	370



**TABLE 31.—CITY OF YORK.**

CASES NOTIFIED DURING EACH MONTH, 1915.

	Scarlet Fever.	Diphtheria.	Enteric Fever.
January ... ..	19	8	1
February ... ..	31	13	—
March ... ..	21	10	3
April ... ..	11	10	1
May ... ..	15	7	—
June ... ..	13	1	4
July ... ..	13	4	—
August ... ..	19	6	—
September ... ..	32	14	2
October ... ..	18	6	1
November ... ..	17	13	1
December ... ..	36	10	1
Totals for year ...	245	102	14

1915. **TABLE 32.**

DISTRIBUTION OF TOTAL NOTIFIED CASES OF SCARLET FEVER AND DIPHTHERIA AMONGST SCHOOL-CHILDREN AND OTHERS DURING THE YEAR 1915.

	SCARLET FEVER.		DIPHTHERIA.	
	Primary Cases.	Secondary Cases.	Primary Cases.	Secondary Cases.
Upper Elementary Schools ... ..	66	18	26	2
Infants' do. do. ... ..	31	5	17	3
Patients 7 years of age and over (not attending school) ... ..	49	32	36	6
Patients under 7 years of age (not attending school) ... ..	22	18	7	1
Attending Private Schools ... ..	4	—	4	—
Total cases notified ...	172	73	90	12
	245		102	

**SCARLATINA (SCARLET FEVER).**

During the year 1915, 245 cases (nett) were notified, 144 (58.8 per cent.) of which were received into the Fever Hospital (see Table 28).



**TABLE 33.—CITY OF YORK.—SCARLET FEVER.**

Year.	Total cases notified.	Persons attacked per 1,000 of population.	Total Deaths.	Death-rate per 1,000 living.	Death-rate per 100,000 living.	Mortality per cent. of cases.	Total cases removed to Fever Hospital.	Percentage of total cases removed to Hospital.
Averages, 10 years, 1903—12.	289	3.6	7.4	0.092	9.3	2.6	154	55.4
1913	161	1.9	1	0.012	1.2	0.62	91	56.5
1914	278	3.33	2	0.024	2.4	0.72	162	58.2
1915	245	3.06	3	0.037	3.7	1.22	144	58.8

The average attack-rate in 1915 in the 78 English County Boroughs was 3.71 per 1,000 of the population.

The average death-rate from Scarlet Fever in England and Wales has declined from 72 per cent. per 100,000 in 1871-80 to 6 in 1915.

The occurrence of the notified cases was distributed through the year as follows :—

Sanitary Sub-District.	First Quarter.	Second Quarter.	Third Quarter.	Fourth Quarter.	Totals.
Bootham ... ..	9	7	4	10	30
Micklegate ... ..	35	14	49	40	138
Walmgate ... ..	26	19	9	23	77
Whole City ...	70	40	62	73	245

Altogether 257 cases of Scarlet Fever were notified ; of these, 9 cases were notified amongst the troops located in the City since the outbreak of war, and these were deducted, according to L.G.B. instructions.

1 case proved to be a case of Measles, and

2 cases were subsequently cancelled by the medical notifier.

5 cases admitted to the Fever Hospital and 1 case retained at home proved to be doubtful as to being cases of Scarlet Fever, but we have counted 245 cases as the nett total ;

24 cases were “ peeling ” before being notified ;

22 missed cases were discovered by the school nurses ;

1 case was certainly imported into the City from another district ;

109 cases occurred in the first six months, and 136 in the second six months of the year.



The elementary schools and departments principally affected were :—

Castlegate Upper School, 7 cases between January and June, and three in the Infants' Department.

Cherry Street Upper School, 8 cases between May and December, and 4 in the Infants' Department.

Scarcroft Road Upper School, 12 cases between May and December, mostly in July to September (7 cases).

South Bank Temporary School, 12 cases in the second half of the year, 3 occurring in September.

The districts of the City chiefly affected by Scarlet Fever were :—Fulford Road (18) ; Leeman Road (18) ; Groves (26) ; South Bank (45) ; Micklegate and Holgate Road (24) ; Bishopthorpe District (40) ; Hull Road and Walmgate (26).

The same *special measures of prevention* were carried out as in previous years.

In the early part of the year there was an outbreak of Scarlet Fever in a large private boarding school, of such an explosive character as to be very suggestive of infected milk. The outbreak, however, was short-lived, and all efforts to trace its origin failed.

#### **Hospital Isolation of Scarlet Fever—**

Twenty-three cases were received into the City Fever Hospital from Bootham Sanitary Sub-district, 69 from Micklegate District, and 52 from Walmgate District ; total 144.

The total number of probable "return" cases from the same households in the City was 6, being 4.2 per cent. of total cases received into Hospital, which is about our average.

The 98 primary cases removed to Hospital were followed by 21 secondary cases in the same homes. These secondary cases were equivalent to 21.4 per cent. of total primary cases removed, much in excess of our average, due probably to delays in removal, owing to the shortage of hospital accommodation, and to the large number of intermediary indefinite cases of Scarlatinal sore-throat.

Eighteen secondary cases had occurred in the homes before or at the time of the removal of the primary cases to Hospital.

The 74 primary cases retained at home in the City gave rise to 24 secondary cases in the same homes, or 32.4 per cent. of the total primary cases retained at home ; the average percentage of the past five years was 45.

Thirty-two cases were declined admission to Hospital owing to lack of accommodation.



## DIPHTHERIA AND MEMBRANOUS CROUP.

During the year 1915, 102 cases were notified, and there were 8 deaths, giving a death-rate of 0.10 per 1,000 living, and a case-mortality of 8 per cent.

**TABLE 34.**—CITY OF YORK.—DIPHTHERIA.

Year.	Total cases notified.	Persons attacked per 1,000 of Population.	Total Deaths.	Death-rate per 1,000 living.	Death-rate per 100,000 living.	Mortality per cent. of cases.	Total cases removed to Hospital.	Percentage of total cases removed to Hospital.
Averages for 5 years, 1904—1908.	90	1.12	10	0.132	13.2	12.5	21	21.9
Averages for 5 years, 1909—1913.	79	0.96	8	0.096	9.6	9.9	41	51.3
1914	190	2.28	19	0.227	22.7	10.0	95	50.0
<b>1915</b>	<b>102</b>	<b>1.27</b>	<b>8</b>	<b>0.100</b>	<b>10.0</b>	<b>8.0</b>	<b>53</b>	<b>51.9</b>

The attack-rate in England and Wales in 1915 was 1.52 per 1,000 of the population.

The average death-rate for the 96 Great Towns in 1915 was 0.16 per 1,000 living.

The cases notified in 1915 were distributed as follows :—

Sanitary Sub-district.	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Totals.
Bootham ...	15	12	8	10	45
Micklegate ...	10	1	12	9	32
Walmgate ...	6	5	6	8	25
Whole City ...	31	18	26	27	102

Altogether 115 cases of Diphtheria were notified ; of these, 12 cases have been notified amongst the troops located in the City, and these were deducted according to L.G.B. instructions ;

and 1 case was subsequently cancelled by the medical notifier ;

4 cases admitted to the Fever Hospital proved to be doubtful, and one proved to be Scarlatina ;

but we have counted 102 cases as the nett total.

2 cases were certainly imported into the City from other districts ;

18 cases were discovered by the School Nurses.

At least 2 were cases of Laryngeal Diphtheria (formerly called Membranous Croup) ; with one of these (at the County Hospital) the operation of tracheotomy was called for.



Hospital Isolation :—15 cases were received into the City Fever Hospital from Bootham Sanitary Sub-District, 23 from Micklegate, and 14 from Walmgate District—total 52.

No cases were declined admission for want of room ; 4 cases died in Hospital, most of them being extremely ill on admission. One case was received into the County Hospital and three cases occurred in the Union Workhouse and were treated there.

The cases retained at home gave rise to 8 secondary cases, (17.4 per cent.) ;

Three secondary cases had occurred in the homes before or at the time of removal of the primary cases to Hospital ; there were no return cases ; the 49 primary cases removed to Hospital were followed by 1 secondary case.

The 90 primary cases notified at all ages were mostly distributed amongst the following areas :—

	Houses.
Fulford Road District ... ..	11
Clifton and Burton Lane Districts ...	18
Clarence Street and Haxby Road Districts ...	13
Lawrence Street and Hull Road Districts ...	6

#### **School Cases.**

The Infant Schools affected numbered 9 :—Shipton Street School had 10 cases.

The 26 primary cases at ages 7 to 14 years were distributed amongst 17 schools.

In the first half of the year there were troublesome recurrent outbreaks of Sore-throat, some very diphtheritic in appearance, in one of the Charity Schools of the City, which led to full enquiries being made and an investigation of the school buildings. Some suggestions as to the improvement of the ventilation of the dormitories, as to making the larder fly-proof, and as to re-painting and whitewashing certain parts of the school buildings, were made—otherwise, the school was found to be in excellent condition.

Adult Cases :—At 10 of the houses affected by adult cases there were sanitary defects. Ten patients were confectionery workers, and 5 domestic servants.



At the 90 separate houses in which cases of Diphtheria occurred during the year :—

There were foul midden-privies at	...	...	5 houses.
No sufficient ashbin at	...	...	10 "
Defective water-closets at	...	...	5 "
Other defects of drainage at	...	...	16 "
Foul and defective sinks at	...	...	5 "
Defective sink waste-pipes at	...	...	8 "
Defective yard pavements at	...	...	2 "
Defective floors at	...	...	4 "
Overcrowding at	...	...	2 "
No proper ventilation and light at	...	...	4 "
Defective roofs at	...	...	2 "
Dampness at	...	...	1 house.

Although the occurrence of Diphtheria is by no means entirely dependent upon insanitary conditions of dwellings, yet such conditions undoubtedly predispose persons, especially children, to the disease, and, therefore, demand investigation and amendment. Most of the above defects were duly remedied.

The *Milk Supply* of the cases was distributed amongst 55 milk dealers.

In addition to hospital isolation and disinfection, distribution of warnings, leaflets, etc., the following preventive measures were adopted :—

Numerous "swabs" from suspicious throats were examined for the bacillus of Diphtheria, and in nearly all positive cases two or more negative swabs were obtained before the patient returned to school or work. Cases of "sore-throat" were excluded from school attendance and investigated. Eighteen such cases, discovered by the School Nurses, proved to be Diphtheria upon bacteriological examination. Children who had suffered from the disease were excluded from school from four to eight weeks after apparent cure, in order to ensure the safety of their return to school, and their complete restoration to health.

Antitoxin was promptly administered, as in previous years, to every true or suspected case admitted to the Fever Hospital. The free supply of Antitoxin to medical practitioners for use in poor cases was extended and its prompt use stimulated; 44 cases were so served during the year 1915.



## ENTERIC (TYPHOID) FEVER.

During the year 1915, a total of 21 patients in the City were notified to me as suffering from Enteric or Typhoid Fever ;

Of these, five were military cases ; one case admitted into the County Hospital ultimately proved to be a case of Colitis only ; two cases admitted to the Fever Hospital proved to be of pneumonic type ; and one notification was subsequently cancelled by the medical practitioner.

The military cases, as in the case of Scarlet Fever and Diphtheria, were deducted according to the Local Government Board's instructions.

There was, therefore, a nett total of only 12 *bona fide* civilian cases, the lowest number on record ; of the 12 nett cases, 2 were isolated in the County Hospital, and 3 in the Fever Hospital.

The Widal blood test was used in 14 suspects, 4 with positive and 10 with negative results.

There were 5 deaths, 1 of which occurred in the Fever Hospital.

**TABLE 35.**—CITY OF YORK.—ENTERIC (TYPHOID) FEVER.

Year.	Total cases.	Persons attacked per 1,000 of population.	Total Deaths.	Death-rate per 1,000 living.	Death-rate per 100,000 living.	Mortality per cent. of cases	Total cases removed to County or Fever Hospital.	Percentage of total cases removed to Hospitals.
Averages for 5 years, 1904—08.	61	0.76	10	0.12	12	16.9	37	53.1
Averages for 5 years, 1909—13.	32	0.38	5	0.06	5.7	18.0	18	54.0
1914 ...	27 nett	0.32	7	0.08	8	26	20	74
<b>1915 ...</b>	<b>12 „</b>	<b>0.15</b>	<b>5</b>	<b>0.06</b>	<b>6</b>	<b>41.6</b>	<b>5</b>	<b>41.6</b>

The average death-rate from Enteric Fever in England and Wales per 100,000 of population has declined from 20 in 1881-90 to 4 in 1915.

The attack-rate for England and Wales was 0.18 per 1,000 persons.

None of the cases were traceable to polluted water, milk, or shellfish, or to "carriers."

Two cases were imported into the City.



At five of the houses, and at one of the workshops of the patients, there were defects of drainage, or of sinks or closets, since duly remedied.

The special pails for the collection and removal of the excreta of typhoid cases served eight cases, and prevented, therefore, the specific pollution of eight privies or house drains.

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#### SMALL-POX.

No cases have occurred in York since April, 1905, but in England and Wales 90 cases were notified during 1915 (as compared with 65 in 1914). 43 cases occurred in or about port towns, being chiefly imported cases ; 3 cases occurred in Dewsbury, and 20 in Oldham.

During the year I was called into consultation about one case of suspected Small-pox, which turned out, however, to be a curious combination of Measles and Chicken-pox.

*Other great Epidemic diseases:*—In England and Wales, during 1915, 45 cases of Typhus Fever were notified, chiefly at the ports (these figures include some cases notified which subsequently proved not to be Typhus). No such cases occurred in York.

No cases of Plague or Cholera occurred during 1915.

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#### CEREBRO-SPINAL FEVER.

This disease consists of inflammation of the membranes covering the brain and spinal cord, caused by the invasion of a definite organism—the Meningococcus. The disease so much resembles other forms of Meningitis, also Typhus and Typhoid Fever, that it is sometimes not recognised. The infection appears to enter and to be given off by the nasal passages.

Only one case (an Army case) of this disease was notified in the City of York during the year 1915, but 624 cases were notified in London, 695 in the County Boroughs, 787 in other Boroughs and Urban Districts, 452 in Rural Districts and 8 in Port Sanitary Districts, a total of 2,566 in England and Wales, as compared with totals of 315, in 1914, and 305, in 1913.



## ACUTE POLIOMYELITIS (INFANTILE PARALYSIS).

This disease consists of inflammation of the spinal cord, caused by an indefinite organism, and in recent years some serious outbreaks of the disease have occurred in England and Wales. 517 cases were notified in England and Wales during the year 1915, as compared with 509 in 1914.

No case of this disease was notified in York during the year.

## PUERPERAL FEVERS.

Under this general term or heading are included the following diseases:—Puerperal Pyæmia, Puerperal Septicæmia, Puerperal Sapræmia, Puerperal Pelvic Peritonitis, Puerperal Peri- or Endo-Metritis.

During the year 1915, six cases were notified in York, two of which were fatal—our average percentage.

The national death-rate from Puerperal Fevers has declined 40 per cent. since 1901, viz. :—from 2.2 to 1.4 per 1,000 births ; but it is still considered that the amount of mortality from this cause is unsatisfactory. In York during the last three years the mortality has been respectively 0.5, 0.5, and 1.1 per 1,000 births.

The national death-rate from all causes connected with Pregnancy and Childbirth is stated to have been 4.17 in 1914 ; the death-rate varies greatly in different parts of the country. The corresponding death-rate in York during the last three years was respectively 4.0, 3.7, and 2.8 per 1,000 births.

In all cases of Puerperal Fever which come to our notice in York, the Health Visitors make careful enquiries, advice is given regarding precautions, and all possible disinfection is carried out at the end of the case.

## ERYSIPELAS.

The figures regarding this septic and contagious disease for recent years are as follows :—

	Year.	Cases notified.	Total Deaths.	Mortality per cent. of cases.
Five years	... 1901—05...	260	18	6.9
Five years	... 1906—10...	177	13	7.3
	1914 ...	25	2	8.0
	1915 ...	30	1	3.3



## OPHTHALMIA NEONATORUM.

(Ophthalmia of the Newborn).

This disease was made notifiable (under the Infectious Disease Notification Acts of 1889 and 1899) in York, on July 10th, 1912, and by regulations of the Local Government Board was made compulsorily notifiable throughout England and Wales from April 1st, 1914. The total cases notified during 1915 in England and Wales are equivalent to 8.34 per 1,000 births.

Five notifications were received from doctors up to the end of the year 1915—one from the County Hospital—and six other suspected cases were reported by certified midwives, one of which proved gonorrheal and one Contagious Ophthalmia (Koch-Weeks).

One case notified was four weeks, another five weeks, and four were ten days old.

Each of the cases was visited by the Health Visitors until well, and the following information was elicited:—

Five of the cases notified were mild or doubtful.

Three of the children were illegitimate.

Ten of the mothers had been attended at confinement by certified midwives; one had been attended by a doctor and an uncertified monthly nurse.

All the cases except one were kept more or less under medical treatment—three at the County Hospital.

In six cases bacteriological examination was obtained, and in three cases the gonococcus was obtained.

All of the cases recovered, except one, which died of bronchitis.

The cases so far notified in the City of York number about 3.0 to 3.5 per 1,000 births per annum.

Since May, 1914, small bottles of Protargol solution (5 per cent), have been distributed, along with "instructions," to the certified midwives practising in the City, for preventive use.



## HUMAN TUBERCULOSIS.

The following tables state the Tubercular Mortality in recent years; and the numbers of cases notified are stated later on:—

**TABLE 36.—CITY OF YORK.****(a) Deaths due to Tuberculosis of the Lungs (Phthisis—"Consumption.")**

Year.	Number of Deaths.	Death-rate per 1,000 living.	Death-rate per 100,000 living.	Percentage of total number of Deaths from all diseases.
Averages for five years				
1904—08 ... ..	116	1.20	120	7.9
Averages for five years				
1909—13 ... ..	78	0.95	95	7.7
1913 ... ..	73	0.88	88	7.1
1914 ... ..	79	0.95	95	6.8
<b>1915 ... ..</b>	<b>100</b>	<b>1.25</b>	<b>125</b>	<b>7.6</b>

**(b) Deaths due to other forms of Tuberculosis.**

\*Tubercular Meningitis, Tubercular Enteritis, Tabes Mesenterica, "Acute Miliary," "General Tuberculosis," Tuberculosis of Joints, Skin and other Organs.

Year.	Number of Deaths.	Death-rate per 1,000 living.	Death-rate per 100,000 living.	Tubercular Meningitis only. Number of Deaths.
Averages for five years,				
1904—08 ... ..	36	0.45	45	17
Averages for five years,				
1909—13 ... ..	29	0.35	35	16
1913 ... ..	23	0.28	28	12
1914 ... ..	36	0.43	43	16
<b>1915 ... ..</b>	<b>40</b>	<b>0.50</b>	<b>50</b>	<b>20</b>

\* Tubercular Meningitis is tubercular disease of the membranes of the brain.

Tubercular Enteritis is tubercular disease of the intestine.

Tabes Mesenterica is tubercular disease of the mesenteric glands in the abdominal cavity.

The other terms relate to form and distribution of tubercular disease.

**(c) Total Deaths due to Tuberculosis.**

Year.	Phthisis.	Other Tubercular Diseases.	Totals:	All forms of Tuberculosis (Revised rates).	
				Death-rate per 1,000 living.	Death-rate per 100,000 living.
Averages for 5 years,					
1904—08 ... ..	96	36	132	1.65	165
Averages for 5 years,					
1909—13 ... ..	78	29	107	1.30	130
1913 ... ..	73	23	96	1.15	115
1914 ... ..	79	36	115	1.38	138
<b>1915 ... ..</b>	<b>100</b>	<b>40</b>	<b>140</b>	<b>1.75</b>	<b>175</b>



TABLE 37.

## Deaths due to all forms of Tuberculosis in 1915.

	Bootham district.	Micklegate district.	Walmgate district.	Whole City Totals.
Phthisis ... ..	14	37	49	100
Tubercular Meningitis ...	5	6	9	20
Other forms of Tuberculosis	7	4	9	20
Totals ... ..	26	47	67	140

The total of 140 deaths was equivalent to a death-rate of 1.75 per 1,000 living (175 per 100,000), and constituted 10.6 per cent. of total deaths from all diseases.

TABLE 38.

## Showing the decline in Tubercular mortality since 1871.

Average death-rates per 100,000 living during the following decennial and quinquennial periods :—

Year.	Tuberculosis of Lungs (Phthisis).		Other forms of Tubercular Disease.		All forms of Tuberculosis.	
	City of York.	England and Wales.	City of York.	England and Wales.	City of York.	England and Wales.
1871—1880 ...	213	213	62	63	275	276
1881—1890 ...	198	173	76	69	274	242
1891—1900 ...	156	139	65	61	221	201
1901—1905 ...	129	122	52	52	181	174
1906—1910 ...	108	111	37	46	145	157
1911 ... ..	82	105	40	40	122	145
1912 ... ..	111	98	44	37	154	135
1913 ... ..	88	95	28	37	115	132
1914 ... ..	95	102	43	33	138	135
<b>1915 ... ..</b>	<b>125</b>	<b>*</b>	<b>50</b>	<b>*</b>	<b>175</b>	<b>*</b>

\* The figures for England and Wales for 1915 are not yet published.

Pulmonary Tuberculosis, which is chiefly a disease of adults, causes about 70 per cent. of the total mortality from Tuberculosis and is about 25 per cent. lower for females than for males.

The mortality at age-periods usually works out in about the following percentages :—

	Under 15 years of age.	Over 15 years of age.
Pulmonary Tuberculosis ... ..	7	93
Non-Pulmonary Tuberculosis ... ..	70	30
All forms of Tuberculosis ... ..	25	75



**TABLE 39.**—CITY OF YORK.

COMPULSORY NOTIFICATION OF ALL FORMS OF HUMAN TUBERCULOSIS.  
(Per Public Health (Tuberculosis) Regulations, 1912). Local Government Board's Table.

Summary of Notifications during the period from the 2nd of January, 1915, to the 1st January, 1916.

Age-periods.	Notifications on Form A.													Notifications on Form B.				Number of Notifications on Form C.		
	Number of Primary Notifications.													No. of Primary Notifications.				Total Notifications on Form B.	Poor Law Institutions.	Sana- toria.
	Total Primary Notifications.													Un- der 5	5 to 10	10 to 15	Total Prim- ary noti- fications.			
	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and up- wards	Total Prim- ary Notifi- cations.	Total Notifi- cations on Form A.							
Pulmonary Males ...	—	—	4	6	12	8	11	14	8	2	1	66	75	—	2	2	7	3		
„ Females	—	3	2	4	6	7	12	6	3	3	1	47	50	—	—	—	2	1		
Non-pulmonary Males	—	6	13	4	6	1	1	—	1	—	—	32	37	—	2	2	—	—		
„ Females	—	8	5	4	2	4	2	2	—	—	—	27	29	—	—	1	—	—		
Totals ...	—	17	24	18	26	20	26	22	12	5	2	172	191	—	4	1	9	4		

Many of the school cases of suspected Tuberculosis were referred to the Tuberculosis Dispensary and ultimately notified by the Tuberculosis Officer (14 pulmonary cases were so notified and 11 non-pulmonary)



The notifications are sent in to the Medical Officer of Health classified per different forms as follows :—

Form A.—(Notification by Medical Practitioners of cases not previously notified, *i.e.*, Primary Notifications) ;

Form B.—(Notification by Assistant School Medical Officer of cases among school children) ;

Form C.—(Notification by Medical Officers of Poor Law Institutions and Sanatoria of patients who are suffering from Tuberculosis on admission and who have been notified before admission) ;

Form D.—(Notification by ditto on discharge of patients).

The total notifications in 1915 included 25 by the Tuberculosis Officer (Dr. Bell Ferguson), as follows :—

	At ages 5—15.	At all ages.
Tuberculosis of Lungs ... ..	6	14
Other forms of Tuberculosis (non-pulmonary)	7	11
		—
		25
		—

*Total new cases of Tuberculosis notified per Public Health (Tuberculosis) Regulations of 1912 :—*

	1913.	1914.	1915.
Pulmonary Tuberculosis ...	203	176	115
Non-pulmonary Tuberculosis ...	105	90	62
	—	—	—
	308	266	177
	—	—	—

Thirty-three fatal cases of Tuberculosis occurred during the year which had not been notified.

Of the 177 cases notified in 1915, 51 died within the year 1915 (38 from Phthisis, 12 from other forms of Tuberculosis, and 1 from Broncho-Pneumonia), and 7 have died in the early months of 1916 (6 from Phthisis).

*The attack-rate (i.e., the number of persons notified during the year as suffering from Tuberculosis, per 1,000 of the population) is given below for England (excluding London), for London, and for the City of York :—*

**TABLE 40.—1915.**

	Pulmonary Tuberculosis.	Other forms of Tuberculosis.	All forms of Tuberculosis.
	Rate per 1,000.	Rate per 1,000.	Rate per 1,000.
England ...	1.90	0.62	2.52
London ...	3.41	0.92	4.33
City of York	1.25	0.50	1.75

If the decimal points be omitted, the reader will obtain the rates per 100,000 of the population—perhaps a more vivid way of expressing the facts.



*Child Tuberculosis:—*

*Cases of Tuberculosis amongst children of school age* (between 5 and 15 years of age), which were notified to the Medical Officer of Health during the year 1915 :—

		Males.	Females.	Total.	
Tuberculosis of Lungs (Phthisis)*	...	13	7	20	
" of Mediastinal Glands	...	—	1	1	
" of Tracheo-Bronchial Glands	...	1	—	1	
" of Submaxillary Glands	...	1	—	1	
" of Neck Glands	...	7	7	14	
" of Meninges (Meningitis)	...	—	1	1	
" of Abdominal Glands	...	3	—	3	
" of Intestines	...	1	—	1	
" of Skin	...	3	—	3	
" of Hip Joint	...	2	2	4	
" of Other Joints	...	1	1	2	
" of Finger	...	2	—	2	
Totals	...	34	19	33	

53

\* Two of these cases had also developed other forms of Tuberculosis.

This total is equivalent to about 0.45 per cent. of total elementary school children in York, which appears to be our average rate.\*

Three cases of Phthisis and 14 cases of Non-Pulmonary Tuberculosis were also notified amongst children under five years of age.

Total children excluded from school attendance during whole or part of year, 40.

Total deaths of children at ages 5—15 in York, in 1915 :—

	Total.
Pulmonary Tuberculosis	7
Non-pulmonary Tuberculosis	9

There is much need for some system of standard classification of *Child Tuberculosis* on broad lines, such as the following scheme suggested by our Tuberculosis Officer, Dr. Bell Ferguson :—

*Pulmonary Tuberculosis:—*

- (1). Definite clinical Pulmonary Tuberculosis ;
- (2). Indefinite Pulmonary Tuberculosis—children with the following signs and symptoms suggestive of infection of the tracheo-bronchial glands :—inadequate increase in weight, langour, anorexia, irritability, "growing pains," persistent dry cough, accompanied by dilated chest-veins, projecting scapulæ, interscapular dulness, and possibly harsh breathing in the nipple regions.

\* The Board of Education's average percentage for England and Wales is 2; the standard of the observers varies very considerably however.



*Other forms of Tuberculosis:—*

(1). Clinically definite forms.

(2). Indefinite but highly suspicious forms, such as operation scars in the neighbourhood of glands, small enlargements of cervical and supra-clavicular glands, scrofulosis in general, the latter term including scrofuloderma, lupus-like conditions, recurrent phlyctenules and chronic blepharitis, corneal ulcers, tuberculides, lichen, etc.

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*Investigation of, and Assistance given to, cases of Tuberculosis notified and otherwise discovered in York:—*

Since the commencement of the work of the Tuberculosis Officer, he and his staff make the enquiries about the personal factors of the case, and the Health Department investigates the sanitary structural conditions of the house. The chief personal factors and some of the chief home conditions are recorded at the Tuberculosis Dispensary, whilst some of the chief personal factors and the detailed home conditions are recorded at the Health Department, per the "card" system. The details of the Tuberculosis Dispensary's investigation of the cases will be found fully set forth in the attached Annual Report of the Tuberculosis Officer.

The bacteriological examinations of sputum and other discharges, are carried out at the Health Department's laboratory in Bootham by the Tuberculosis Officer, who examined the high proportion of 231 specimens per 100 deaths.

Thousands of our leaflets of advice and instruction on "The Prevention of Consumption and of the other Forms of Tuberculosis," "Special advice to Consumptive Persons," "Disinfection after recovery, removal, or death of a Consumptive Person," have been distributed in recent years, also large card warnings against indiscriminate spitting in tramcars, workshops, inns, common lodging-houses, and other public places.

During 1915, 170 infected houses, with bedding and other unwashable goods, were disinfected by the Corporation Staff, 92 after death, 22 after removal to other houses, and 56 after removal for sanatorium treatment—the householder doing the cleansing work; wall-papers were stripped, ceilings and walls white- or colour-washed, etc., and in some poor cases help has been given per gifts of limewash, etc. In the case of dirty



houses, cleansing has been procured by compulsory order (Notice to cleanse and limewash), and overcrowding has been remedied when possible, which has not been as often as desirable, by any means.

A detailed account of the measures of treatment carried out at the Tuberculosis Dispensary, in sanatorium and in hospital, and at the homes of the patients, etc., will be found in the attached report of the Tuberculosis Officer. The local institutional facilities may be briefly summarised here as follows:—

York Corporation Tuberculosis Dispensary, No. 11, Castlegate ;

York Corporation Open-Air Ward and Shelters at the Isolation Hospital at Yearsley Bridge—Accommodation for 22 cases ;

“ Hospital ” beds at the County Hospital for insured persons, subsidised by the local Insurance Committee ;

Ditto, for non-insured persons, subsidised by the Corporation ;

Union Workhouse, a varying number of beds used for the treatment mostly of advanced cases ;

The small Open-Air Class for 20 tubercular school children, situated in the garden behind the Tuberculosis Dispensary.

The sanitary structural conditions of the homes and precincts, and of the workshops, especially as to ventilation, access of daylight, dampness, general fitness for habitation, are inspected and remedied by the Health Department, as far as possible.

*The following provision has been made for the treatment of tubercular cases occurring amongst City school children:—*

(a) All child cases are referred to the York Tuberculosis Dispensary as a clearing house, for diagnosis in doubtful cases, for supervision, for the purposes of clinical record, and for tuberculin or other treatment when required.

(b) Children of school age, fit or likely to become fit to receive education, even in modified form, are referred to the temporary Open-Air School at No. 11, Castlegate, where they undoubtedly benefit.

			Boys.	Girls.
Admitted to the Class in 1915	...	...	30	19
Discharged	...	...	21	10
On books December 31st, 1915	...	...	14	11



The after-care of the tubercular children is entrusted to the Tuberculosis Crusade Committee.

(c) Cases of tubercular disease of the lungs or of other organs, if suitable for open-air treatment, are referred to the Open-Air Ward and Shelters for tubercular patients at the Isolation Hospital, Yearsley Bridge.

Eighteen cases of children of school age were so referred by the Tuberculosis Officer during 1915.

(d) Cases requiring surgical treatment are sent into the York County Hospital, at the cost of the Corporation Health Committee.

Ten cases of children of school age were so referred by the Tuberculosis Officer during 1915.

(e) The provision of meals for necessitous children, which has been generously carried out in the City, has also an important bearing upon the salvation of these children and upon the prevention of the occurrence of new cases of the disease.

*Still wanted:—*

The completion of the Raywell House Joint Sanatorium Scheme. This matter has been held up owing to the war, but the owner has given an option for the purchase of the site at the price originally agreed to, extending to a period of 6 months after the war ;

The Completion of our larger Open-Air School at Fulford Field House ;

Provision for advanced cases of Phthisis in an extension of the Isolation Hospital at Yearsley Bridge—which is pre-eminently the most suitable place for such provision—This provision has been repeatedly urged by the community during 1914 and 1915.

The essential work of the Tuberculosis Crusade Committee, for the after-care of cases which had been under treatment, is also summarised in the Tuberculosis Officer's Report.



## DEATHS DUE TO BRONCHITIS, PNEUMONIA, AND OTHER RESPIRATORY DISEASES.

*From Bronchitis, Pneumonia, and other Respiratory Diseases, in 1915, there were 233 deaths registered, or 2.91 per 1,000 living, or 17.7 per cent. of total deaths from all diseases.*

The following are the figures for recent years:—

**TABLE 41.—CITY OF YORK.**

Year.	TOTAL DEATHS—ascribed to—							Bronchitis, Pneumonia, and other Respiratory Diseases.		
	Acute Bronchitis.	Chronic Bronchitis.	Total Bronchitis.	Lobar Pneumonia.	Broncho-Pneumonia.	Total Pneumonia.	Other Respiratory Diseases.	Total Deaths.	Death-rate per 1,000 living.	Percentage of total deaths (all causes).
Averages for five years, 1909-13 ...	—	—	—	—	—	—	—	160	1.97	15.2
1914 ...	25	40	65	21	49	70	9	144	1.72	12.5
<b>1915 ...</b>	<b>47</b>	<b>58</b>	<b>105</b>	<b>49</b>	<b>73</b>	<b>122</b>	<b>6</b>	<b>233</b>	<b>2.91</b>	<b>17.7</b>

The average death-rate for these diseases for ten years, 1905—14, was 1.99.

The deaths from Bronchitis and Pneumonia in 1915 occurred as follows:—

First Quarter ...	99	=	1.23	} Per 1,000 living.
Second „ ...	43	=	0.53	
Third „ ...	30	=	0.37	
Fourth „ ...	55	=	0.68	

Their distribution in districts and in age-periods is shown in Tables 8 and 8a.

The “other Respiratory Diseases” comprise various diseases of the Larynx, False Croup, Pulmonary Congestion and œdema, Gangrene of Lungs, Pleurisy, Empyema, etc.

## DISEASES OF THE HEART.

The total number of deaths due to Diseases of the Heart was 135 (10.3 per cent. of total deaths from all causes), which is equivalent to a death-rate of 1.68 per 1,000 living. For the number of deaths in previous years see Table 6, and for the distribution of the deaths in 1915 see Tables 8 and 8a.



The certification of the exact class of Heart Disease is so often stated in vague terms that classification is rendered very difficult. The certification in 1915 gives the following totals:—

Disease of Aortic Valves ...	15	Dilatation ...	2
Disease of Mitral Valves ...	36	Fatty Degeneration ...	4
Disease of Mitral and Aortic Valves ...	1	Other forms of Degeneration...	2
Indefinitely certified as "Valvular Disease" ...	9	Senile ...	3
Indefinitely certified as "Heart Disease" or "Cardiac Disease" ...	63	<b>Total Deaths ...</b>	<b>135</b>

104 of these deaths occurred between the ages of 45 and 75.

### CANCER.

Under the title "Cancer" are comprised:—Deaths from Cancer, Carcinoma, "Malignant Disease," Scirrhus, Epithelioma, Sarcoma, Villous Tumour and Papilloma of Bladder, and Rodent Ulcer—different terms for or different structural manifestations of the disease.

During the year 1915 there were 86 deaths from Cancer in the City (6.6 per cent. of total deaths from all causes) or 1.07 per 1,000 living. The figures for previous years are as follows:—

**TABLE 42.—CITY OF YORK. Death from Cancer.**

Year.	Total Deaths.	Death-rate per 1,000 living.	Death-rate per 100,000 living.
Averages for ten years, 1904–1913	73.9	0.90	90
1914 ...	86	1.03	103
<b>1915 ...</b>	<b>86</b>	<b>1.07</b>	<b>107</b>

Twenty-one deaths occurred in Bootham Sanitary Sub-district (including the Workhouse); 31 in Micklegate Sub-district; 34 in Walmgate Sub-district.

The following table differentiates the deaths in 1915 and in the five previous years, according to the certified primary site of the disease, as accurately as possible considering that the certification is sometimes vague or incomplete:—

	Year 1915.	Five years, 1909–13. Yearly average.		Year 1915.	Five years, 1909–13. Yearly average.
Brain ...	0	0.6	Rectum ...	10	5.6
Face and Scalp ...	1	2.4	Uterus, Ovary, etc. ...	11	10.4
Tongue and Mouth ...	6	2.2	Bladder ...	1	1.2
Lip ...	—	1	Prostate, etc. ...	1	0.8
Neck Glands ...	6	2	Intestines (colon and cæcum) ...	5	9.6
Gullet ...	2	3.4	Jaw ...	—	1.2
Larynx ...	1	1.6	Other bones ...	—	2.2
Lungs ...	2	0.8	Fore Arm ...	1	—
Female Breast ...	11	7.2			
Liver ...	8	10.2			
Pancreas ...	1	2.8			
Stomach ...	15	10.6	Totals ...	86	—
Abdominal ...	4	1.2			



## INQUESTS.

During the year 1915, 88 Inquests (6.7 per cent. of total deaths) were held on deaths of York citizens, as compared with 89 Inquests (7.7 per cent. of total deaths) in 1914. They are classified as follows :—

**Deaths from Natural Causes.**

Diphtheria ... ..	2	Cerebral Disease ... ..	6
Developmental Causes ... ..	4	Tubercular Meningitis ... ..	1
Infantile "Convulsions" ... ..	7	Septicæmia ... ..	3
Heart Disease ... ..	9	Senile Decay ... ..	4
Bronchitis ... ..	2	Appendicitis ... ..	1
Pneumonia ... ..	2	Miscellaneous Causes ... ..	4
			—
			45
			—

Of these 45 Inquests, 14 were of residents in Bootham Sanitary Sub-district, 11 in Micklegate, and 20 in Walmgate.

**Deaths by Accident and Suicide.**

There were 34 deaths due to Accident, and 7 to Suicide, which may be scheduled as follows :—

ACCIDENT.					Sanitary Sub-districts.			Totals
					Bootham.	Micklegate.	Walmgate.	
Suffocation ... ..					—	2	—	2
Burns ... ..					—	1	3	4
Drowning ... ..					2	2	1	5
Fall ... ..					5	3	7	15
Crushed ... ..					—	2	1	3
Run over ... ..					—	3	1	4
Anæsthetic ... ..					—	—	1	1
Totals ... ..					7	13	14	34
<hr/>								
SUICIDE.								Totals
Hanging ... ..					—	—	2	2
Drowning ... ..					—	2	2	4
Cut Throat ... ..					1	—	—	1
Totals ... ..					1	2	4	7
<hr/>								
Manslaughter ... ..					—	—	1	1
Infanticide ... ..					—	1	—	1

# MEDICAL INSPECTION AND SUPERVISION OF THE CHILDREN IN THE PUBLIC ELEMENTARY SCHOOLS.

(For complete report see *Annual Report of Education Committee for 1915*).

The Medical Officer of Health is the "School Medical Officer" recognised by the Board of Education. He supervises and directs the work, and attends the meetings of the Education Committee and its Sub-Committees when the work is under discussion. He also frequently attends the Sites Sub-Committee to give assistance in devising improvements in the older school buildings, and in designing new schools.



Staff during the year 1915 :—Dr. Norah Kemp, Temporary Assistant School Medical Officer ; Drs. Macdonald and Gostling, Ophthalmic Surgeons ; Mr. Constant, Dental Surgeon ; two School Nurses, two women clerks and office boy, the clerical work and clinic work being carried out in the medical offices at 24, St. Saviourgate.

The following brief statement of the work and of some of the results of the inspections may be appropriately given here, as they are matters of public health importance.

On September 30th, 1915, there were 14,660 children on the school registers, distributed as follows :—

Upper Department, Boys ...	...	...	...	5,025
" " Girls ...	...	...	...	4,841
Infants' " Boys ...	...	...	...	2,443*
" " Girls ...	...	...	...	2,351*

\* Among the Infants are included 1,107 children under 5 years of age (573 boys and 534 girls).

Average attendance for the school year ended 30th September, 1915, 12814 (88.6 per cent.)

Total children inspected in routine inspections in 1915, 1,586 (10.8 per cent.)—739 "entrants," and 847 "leavers"; 800 boys, 786 girls; also 99 children attending the Special Schools for mentally defective and tubercular children.

*Some of the principal conditions observed at the time of Inspection in 1915 :—*

	CITY OF YORK (Percentages).	
	1915.	1914.
Unsatisfactory Clothing ...	5.8	8.9
Unsatisfactory Footgear ...	8.6	8.9
Verminous Hair ...	13.7	15.7
Dirty or Verminous Body ...	10.8	9.0
Ringworm (Scalp and Body) ...	0.6	0.12
Impetigo ...	0.4	0.6
Other Skin Diseases ...	1.3	1.3
Malnutrition ...	11.7	10.7
Mouth Breathers ...	5.4	5.6
Adenoids (marked) ...	1.3	1.8
Tonsils (markedly enlarged) ...	4.1	3.7
External Eye Disease ...	1.5	1.5
Otorrhœa (Discharging Ears) ...	0.6	1.3
Heart Disease (Organic) ...	1.2	1.7
Anæmia ...	0.3	0.9
Bronchial Diseases ...	7.4	5.5
Nervous Diseases ...	0.4	1.0
Rickets ...	0.9	0.3
Deformities ...	3.7	3.0
Tuberculosis (all forms) ...	0.12	0.20



The percentage of cases of ringworm of the scalp in 1915 was 0.04, as compared with 3.0 in the first whole year of medical inspection, 1909.

In every case of disease or defect the parents or guardians were advised personally or by letter to obtain qualified medical treatment.

It is satisfactory to note the improving percentages as regards unsatisfactory clothing and footgear but it is disappointing that those concerning dirty and verminous conditions and malnutrition do not come out well. As to verminous conditions and the incessant battle therewith, fresh sources of contagion are constantly being imported into the schools by new pupils; there is the factor of inadequacy of some of our school cloakrooms; and, in this connection, as well also as regards the maintenance of normal nutrition, our observations lead us to fear that one effect of the anxieties and general upset caused by the war has been a general slackening of effort on the part of many mothers in the rearing of their young children.

Most marked in recent years has been the great improvement in the prevalence of Ringworm; this is to the credit of the School Clinic, but the disease is a very ubiquitous foe and demands unceasing efforts to keep it in check.

Printed leaflets regarding the prevention and cure of several of the above conditions are freely distributed to parents.

60.4 per cent. of boys and 59.7 per cent. of girls had one to four defective teeth.

17.7 per cent. of boys and 19.6 per cent. of girls had four or more defective teeth.

To the complete Annual Report on this work is appended a special report by Mr. Constant, the Dental Surgeon of our School Clinic, on "The Condition of the Teeth of ten thousand Children attending the Elementary Schools in the City of York during the years 1914-15." The work covered by this Report constitutes a piece of research work which Mr. Constant has been able to carry out in addition to giving full measure of time at the Dental Clinic, and is as unique as it is valuable. So far as I know, no such thorough investigation of so large a number of elementary school children has been attempted before, and it is a matter for congratulation that the City of York should have the credit of its achievement.



During the year, the sale of cheap toothbrushes to the children in the elementary schools was continued, and the co-operation of the teachers solicited in regard thereto, and in the active teaching of dental hygiene and of proper feeding and mastication.

Our thanks are due to the Teachers, School Attendance Officers and to the School Nurses for their co-operation, and for a vast amount of hard work, requiring intelligence, tact and patience.

The School Clinic comprises the conservative treatment of defective teeth and the skilled examination of eyes and prescribing of spectacles (by part-time Dental Surgeons and by part-time Ophthalmic Surgeons, respectively), in addition to the work carried on in the general clinic with respect to ringworm and other contagious diseases, diseases of the ear and external eye, etc. There is now no excuse for parents not obtaining treatment for the more common defects, with the Clinic and Medical Charities at hand.

School Clinic :—3,455 children attended during 1915, including 255 cases of ringworm, 90 of lice or nits, 365 of impetigo, 96 of eczema, 36 of itch, 214 of contagious ophthalmia, 16 of abscess, 127 of discharging ears, 1,479 with defective teeth, and 267 children with defective vision and squint. Parents of all cases of contagious scalp or body are compelled to effect the complete cure thereof.

Nearly 12 per cent. of the children medically inspected appeared to be suffering from *Malnutrition*. The factors which enter into the causation of malnutrition are various, and have been summed up as follows :—

Inherent lack of vitality ; insufficient food ; improper food ; mal-assimilation of food—due to disease ; unhealthy home and school conditions ; insufficient sleep ; exhausting work outside school hours ; lack of sunlight and fresh air.

Probably the increasing cost of foodstuffs, etc., contributes no small part to the causation of malnutrition. There is undoubted need, in the opinion of the School Medical Service, for some carefully planned regulation of the employment of children ; otherwise children are exploited, to their excessive fatigue, insufficiency of sleep, arrest of growth, and general physical detriment. The "Provision of Meals" Sub-Committee of the Education Committee is doing increasingly careful work in compensation for this malnutrition.

"*The Regulations regarding Contagious or Communicable Diseases in the York Public Elementary Schools*," compiled by



your Medical Officer of Health, revised in 1913, prove essential in controlling and supervising such cases amongst the school children.

*Cleansing of School Children under the Children Act of 1908 (Section 122), during 1915.*

Number of Cleansing Notices served on parents by the Education Department (with printed directions) ... ..	33
Number of cases referred to the Medical Officer of Health ... ..	33
These were dwelling in 55 houses—	
of which were—very filthy ... ..	4
“     “     —filthy ... ..	7
“     “     —moderately clean ... ..	44
Number of children cleansed at home by parents ... ..	31
Number of children cleansed at Disinfecting Station ... ..	4
Number of houses where bedding was removed for steam disinfection by Sanitary Department ... ..	21
Number of houses where bedding was not removed owing to the bedding being clean ... ..	34

Special visits in connection with threatened outbreaks of infectious disease, suspicious cases amongst the children, sanitation and equipment of schools, etc., were carried out by the S.M.O. and School Nurses as required.

*Abridged Tabular Statement of Work done by the School Nurses:—*

At Homes :—	Total Visits.
Infectious Cases notified by Head Teachers ... ..	1,720
Other Diseases notified by Head Teachers ... ..	2,600
“ Following-up ” Defects ... ..	472
Re Medical History ... ..	29
Re Domestic Conditions ... ..	26
Notifications by Parents of Ailing Children ... ..	178
Special Clinic Cases ... ..	811
Infectious Cases Convalescent ... ..	171
Physically Defective Children not in attendance at School ... ..	7
At Schools :—	
Re Medical Inspection ... ..	47
Re Infectious and Contagious Cases and Ailing Children ... ..	139
Open-Air School ... ..	30
Assisting School Medical Officer at Inspections ... .. (days)	69½
Inspecting for Ringworm and Verminous Conditions ... .. (days)	33½
At Clinic Sessions ... .. (days)	174½
Number of throat and nasal Swabs taken (suspected Diphtheria)	97

Brook Street School was closed in October as an elementary school. The only other matter to record is that the building of the new Knavesmire School dragged along during the year. The School Medical Officer had much to do with the provision of the south side open-air teaching arrangements, the spray baths and the choice of hygienic lavatory basins, etc.—new ideals which cannot fail to be beneficial to the scholars. It only



remains to add that all measures should be taken to prevent encroachment on the lighting of the windows by possible adjacent house building.

During the winter Mr. Constant and I delivered in the Museum two lectures on the work of the School Clinic, under the auspices of the Education Committee, to the Teachers and pupil-teachers of the Elementary Schools and the Students of the Training College, the lectures being freely illustrated by lantern slides.

### THE CITY ISOLATION HOSPITALS.

The following cases of infectious disease were admitted into the Hospitals during the year 1915, (for further details of City cases see Table 28, and the sections of the Report relating to each disease) :—

	Scarlet Fever.	Diphtheria.	Typhoid Fever.	Tubercular Cases.	Totals.
From the City ... ..	144	52	5	67	268
„ Flaxton Rural District	9	1	—	—	10
„ Escrick „	10	3	1	—	14
„ Bishopthorpe „	2	—	—	—	2
A City case of Erysipelas...	—	—	—	—	1
Totals ... ..	165	56	6	67	295

Of the City cases, 6 paid the full weekly charge of ten shillings for maintenance in Hospital, and 5 were attended by their own medical attendants; 42 cases partially paid for maintenance; 151 were for various reasons received as free cases; 3 paid for private wards.

Seven of the cases of “Scarlet Fever” admitted proved doubtful, six “Diphtheria” cases proved to be Tonsillitis and one to be Scarlet Fever, two “Typhoid” cases proved negative.

There were 6 “return” cases of Scarlet Fever from the City. There were no “return” cases of Diphtheria.

One of the Escrick cases was secondary to a previous case.

DEATHS :—There were two deaths from Scarlet Fever in the Hospital, both being City cases; one death due to Typhoid Fever—a City case; three City cases of Diphtheria proved fatal; three City cases of Phthisis and one of Tubercular Meningitis.



The following *complications* occurred amongst the cases treated:—

*Amongst Scarlet Fever Cases:—*

Otorrhœa	...	...	...	12
Rhinorrhœa	...	...	...	9
Rheumatism	...	...	...	1
Abscess ...	...	...	...	5
Nephritis	...	...	...	5
Diphtheria (on admission)	...	...	...	4

*Amongst Diphtheria Cases:—*

Paralysis	...	...	...	3
-----------	-----	-----	-----	---

*Amongst Typhoid cases:—*

Internal Hæmorrhage	...	1
---------------------	-----	---

The Staff consisted of Matron, Assistant Matron, two Charge Nurses, four Assistant Nurses, and four Probationer Nurses; eight Maids (cook, two housemaids, two wardmaids, kitchenmaid, and two laundresses), and Porter—21 in all; two nurses were engaged from outside, temporarily, for short periods of stress.

Probationer Nurses are engaged for Fever training, for an inclusive term of two year's service—salary £15 to £18 a year.

All the female members of the staff are provided with indoor uniform, in addition to salary. No outdoor uniform is provided or required. To the Probationers I gave the usual course of demonstrations on Elementary Physiology and Fever Nursing.

The administration of the Hospitals is under my supervision, and I have much pleasure in testifying to the devotion with which Dr. Angove attended the large number of poorer cases, and with which the Matron (Miss Proctor) and her staff performed their work, both at the Fever Hospital and the Bungalow.

During the year electric light was substituted for gas throughout the scarlet and typhoid pavilions, in part of the administrative block, at the main gates, and at a point on the roadway between the gates and Yearsley Bridge which had proved dangerously dark in these days of increasing motor traffic. The old pine floors of the scarlet block, which had become very worn and insanitary, were covered with patent "Wood-Dura" material, a decided improvement. A minimum of re-painting, etc., was carried out at Yearsley Bridge, but at the Bungalow a much-required renovation was carried out throughout, also some necessary re-drainage of roof and surface waters.

On July 22nd, the members of the Corporation and their ladies were invited to visit the Isolation Hospital at Yearsley Bridge; about 80 responded, and inspected the buildings and grounds; the Chairman and Vice-Chairman provided refreshments at the close of a very pleasant afternoon.



## LABORATORY WORK.

During the year the following work was carried out in the Medical Officer of Health's Laboratory, chiefly by Dr. and Mrs. Bell Ferguson, or at the Yorkshire Pathological Laboratory, Leeds :—

## \*Swabs examined for Diphtheria Bacilli :—

From suspected cases, positive	...	...	...	87	
"                    negative	...	...	...	308	
From convalescent cases, positive	...	...	...	126	
"                    negative	...	...	...	248	
From contact cases, positive	...	...	...	5	
"                    negative	...	...	...	27	801
Blood submitted to Widal's test for Typhoid Fever :—					
With positive result	...	...	...	4	
With negative result	...	...	...	10	14
Fæces examined for Typhoid Bacilli :—					
With negative result	...	...	...	...	4
Pus from Eyes, examined for Gonococcus :—					
With positive result	...	...	...	3	
With negative result	...	...	...	5	8
†Hairs examined for Ringworm Spores :—					
With positive result	...	...	...	70	
With negative result	...	...	...	30	100
Cerebro-Spinal fluid :—					
With negative result	...	...	...	...	1
Milk with negative result	...	...	...	...	7

*Specimens examined for Tubercle Bacilli by the Tuberculosis Officer :—*

## Sputum :—

With positive result	...	...	...	...	56	
With negative result	...	...	...	...	250	306
Urine :—						
With negative result	...	...	...	...	...	5
Pus from Vagina :—						
With positive result	...	...	...	...	1	
With negative result	...	...	...	...	5	6
Empyæma Swab, negative	...	...	...	...	...	1
Lupus	...	...	...	...	...	1
Blood Film	...	...	...	...	...	1
Fluid from Joint	...	...	...	...	...	1
Total						1256

\* (Examined at Health Department Laboratory, 729).  
(Examined at Leeds Pathological Laboratory, 72).

† (Examined at Health Department Laboratory, 19).  
(Examined at Leeds Pathological Laboratory, 81).

I am much indebted to Mrs. Ferguson for consenting to carry out the bacteriological work above-mentioned, at very reasonable terms, to my entire satisfaction; I am also indebted to Dr. John Bell Ferguson for much able assistance with regard to special work of this kind.



*The Water Supply of the City:*—There is nothing to add on this subject to my previous Reports.

*Public Baths:*—The Public Baths are under the control of the Health Committee and the City Surveyor. Scholars of the Elementary Schools are admitted free for learning swimming.

YEAR ENDING 31st MARCH, 1916.

Total persons using :—	At St. George's Baths.	At New Yearsley Baths.
First class swimming baths ...	3172	} Admission free.
Second class „ ...	3111	
First class slipper baths ...	2438	} 3279
Second class „ ...	4187	

These totals do not include coupon, monthly and season ticket holders. 289 swimming coupons were sold, at 3/- each, at St. George's Baths. Facilities for the schools have been extended, and free scholarships for swimmers established in conjunction with the Education Committee.

The City of York New Yearsley Swimming Bath gives great satisfaction to its numerous users.

Free facilities were given to the troops in the City for the use of both Public Baths.

*Pollution of Streams:*—There is nothing to add to previous Reports, except to mention that we have still to maintain watch upon Holgate Beck.

*Sewage and Refuse Disposal:*—All that need be said under this heading is that we have secured the abolition of privy-middens when their condition was urgent, and that during the year 1915 we have given very special and active supervision with regard to ashbins and manure heaps.

## MILK AND MEAT AND GENERAL FOOD SUPPLY.

The inspection of meat is carried out by a Veterinary Surgeon, who is Meat Inspector and Veterinary Inspector, along with the Chief Inspector of Nuisances, who possesses the qualifying certificate of the Royal Sanitary Institute in Meat Inspection; five of his assistant Inspectors also possess the said certificate in Meat Inspection, and each has assisted him in day and evening inspections of meat and other foods in their own sub-districts.



The established system whereby butchers request our inspection of doubtful meat, as the outcome of their system of insurance of animals, continues to operate very successfully in favour of a wholesome meat supply.

In view of the increasing dearness of food and of the consequent risks of selling unwholesome food, and in view of the extensive local requirements of the Army, very special attention has been paid to this work throughout the year 1915.

The results of such inspections, and the action taken thereupon, both in regard to milk, meat, and other foods, will be found fully stated in the reports of the Inspector of Nuisances and of the Public Analyst, forming part of this volume.

There are 66 private slaughter-houses, over which constant supervision is maintained.

The number of private slaughter-houses is diminishing ; in 1903 there were 83, and at the present time there are 66.

From time to time the dairy cows in the City are examined by the Veterinary Inspector of the Corporation, and samples of milk from tubercular or other suspects are sent when required to the pathological laboratories at Leeds for inoculation or other special tests, and subsequent action is taken, when found necessary and as far as possible, under the Milk (Tuberculosis) Clauses contained in the York Corporation Act, of 1902, and under the Dairies, Cowsheds, and Milkshops Orders and Regulations. Five such samples were sent to Leeds during the year.

There are 61 cowsheds in the City (containing about 351 cows), and these are periodically inspected, as also the premises of retail purveyors of milk and cream.

Important as it is that the nutritive quality of the milk should be maintained and that the public should be protected from fraudulent sales, the *cleanliness of milk*, as to dirt and micro-organisms (bacteriological cleanliness), is still more vital, and towards the attainment of this there is still much room for improvement.

The facilities for ascertaining bacteriological cleanliness are increasing, and will be utilised as time goes on.

In the autumn, an attempt, by a certain proportion of the milk dealers of the City, to economise in their working costs by delivering milk only once a day, was abandoned, in deference



to public opinion and a representation from the Health Committee, and also owing to the fact that some of the milk delivered on the "once-a-day" system proved to be sour on delivery or became sour soon afterwards.

No particular case of food poisoning came to our notice during the year 1915.

A discussion on the question of preservatives in food, instituted by a communication from the Clerk to the West Sussex County Council, resulted in the following resolution being forwarded to the County Councils' Association and the Association of Municipal Corporations:—

That this Council is of opinion that further legislation or regulations in regard to the use of preservatives in food are desirable.

REPORT OF ADMINISTRATION IN CONNECTION WITH THE  
PUBLIC HEALTH (MILK AND CREAM) REGULATIONS, 1912,  
*during the year ended 31st December, 1915.*

**1.—Milk and Cream not sold as Preserved Cream.**

	(a) Number of samples examined for the presence of a preservative.	(b) Number in which a preservative was reported to be present.
Milk ... ..	58	2
Cream ... ..	3 (see Nos. 99, 108, & 111).	3

Nature of preservative in each case in column (b) and action taken under the Regulations in regard to it:—

Milk (separated) Sample No. 64:—

Milk-fat ... ..	0.350 per cent.
Non-fatty Solids ... ..	7.950 „
Boric Acid ... ..	0.055 „
Water ... ..	91.645 „
	<hr/> 100.000 <hr/>

Milk (Machine skimmed) Sample No. 68:—

Milk -fat ... ..	0.390 per cent.
Non-fatty Solids ... ..	9.010 „
Boric Acid ... ..	0.052 „
Water ... ..	90.548 „
	<hr/> 100.000 <hr/>

Cream, Sample No. 99:—

Milk-fat ... ..	48.68 per cent.
Non-fatty Solids ... ..	3.86 „
Boric Acid ... ..	0.35 „
Water ... ..	47.11 „
	<hr/> 100.00 <hr/>



Cream, Sample No. 108 :—

Milk-fat	...	...	...	...	48.93	per cent.
Non-fatty Solids	...	...	...	...	2.44	„
Boric Acid	...	...	...	...	0.29	„
Water	...	...	...	...	48.34	„
					<hr/> 100.00	

Cream, Sample No. 111 :—

Milk-fat	...	...	...	...	46.35	per cent.
Non-fatty Solids	...	...	...	...	4.20	„
Boric Acid	...	...	...	...	0.37	„
Water	...	...	...	...	49.08	„
					<hr/> 100.00	

## 2.—Cream sold as Preserved Cream.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the labels as to preservatives were correct.

(i.) Correct Statements made	...	...	...	2
(ii.) Statements incorrect	...	...	...	0
				<hr/> 2

(b) Determinations made of Milk-fat in cream sold as Preserved Cream.

(i.) Above 35 per cent.	...	...	...	2
(ii.) Below 35 per cent.	...	...	...	0
				<hr/> 2

(c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article V. (i.) and the proviso in Article V. (ii.) of the Regulations have not been observed :—3.

(d) Particulars of each case in which the Regulations have not been complied with and action taken :—

No. 64.—The vendor was afforded an opportunity of furnishing an explanation as to the addition of preservative and water.

As no satisfactory explanation was given, summary proceedings were taken, and the vendor was convicted and fined 10/- without costs.

No. 68.—The vendor was afforded an opportunity of furnishing an explanation, and his explanation was that he had purchased it from a wholesale dealer, and did not know that it contained any preservative. By order of the Health Committee he was cautioned against a repetition of the offence.

No. 99.—This was an informal sample. The purchaser asked for Cream and the receptacle containing it was delivered to the purchaser without having a declaratory label describing it as preserved cream. It was certified by the Public Analyst as having a boron preservative. See No. 108.



No. 108.—This was a formal sample from the same vendor as No. 99. The receptacle did not have a declaratory label describing it as preserved cream. The vendor was afforded an opportunity of personally furnishing an explanation to the Town Clerk, and as his explanation was not satisfactory, summary proceedings were taken and the vendor was convicted and fined 2/6 and costs, amounting to £1 1s. 0d. altogether.

No. 111.—This was an informal sample purchased from the same vendor as Nos. 99 and 108, and was taken before the summary proceedings in respect to No. 108, in order to ascertain whether the vendor was still selling cream which contained a preservative without properly labelling the receptacle.

### 3. Thickening Substances.

Any evidence of their addition to cream or to preserved cream:—Nil.  
Action taken where found:—Nil.

### 4. Other observations, if any:—Nil.

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## HOUSING OF THE WORKING CLASSES.

The City Council relegated the working of Part I. of the Act to the Health Committee and its Housing Sub-Committee. Housing work during 1915 was almost entirely suspended owing to the shortage of houses and the war.

One of the Assistant Inspectors of Nuisances is allocated as Housing Inspector—to carry out the detailed inspection, “following up,” and clerical work, and in other ways to assist the Medical Officer of Health and Chief Inspector of Nuisances in the work involved by the Acts and “The Housing (Inspection of District) Regulations, 1910.” The records required by the Regulations are kept on the card system (“one house—one card,”) and these cards are now building up a valuable house-to-house inspection record. Our cards now number over 4,200.

The Medical Officer of Health, in his Annual Report, must state fully and in tabular form the work done under Section 17 of the Act (see table 43, post).

The serious shortage of the cheaper dwelling-houses still continues, even more acutely than in 1913-14, and great difficulty is experienced in obtaining dwellings suited to the requirements of the would-be tenants and in dealing with cases of overcrowding.



*Tang Hall Lane—Housing Site:*—It is most deeply to be regretted that, in accordance with their policy of preventing as far as possible capital expenditure during the war, the Local Government Board, in spite of very urgent representations and all manner of negotiations, have not seen their way to sanction a loan for the purchase of the land in connection with this scheme. The Ecclesiastical Commissioners (the owners), who have throughout dealt with the matter in a very friendly and courteous manner, have, however, informally expressed their willingness to allow the matter to stand over until one year after the war, so that the Corporation may have an opportunity of obtaining the necessary sanctions for purchasing the land before that date.

**Total number of new houses** completed in the City of York since 1902, of all rentals :—

Year.		Total Whole City.	Micklegate Sanitary Sub-district.	Bootham Sanitary Sub-district.	Walngate Sanitary Sub-district.
Totals,					
1902—14	...	1941	1028	393	520
1915 ...	...	42	27	—	15

**Classification of the smaller houses completed during the year 1915.**

Probable Rental.			East side of River.		West side of River.		Totals	
£13 or under	...	...	—	...	—	...	—	
£14 to £18	...	...	—	...	19	...	19	} Total 28.
£18 to £30	...	...	6	...	3	...	9	

Plans for the building of new houses pass through the hands of the City Surveyor and the Streets and Buildings Committee, who approve or reject them according to the Bye-laws in force. Occasionally such plans are referred to the Medical Officer of Health for his opinion as to site, position, etc., of proposed new buildings.

**Average number of persons per house (whole City).**

At Census of	1861	...	...	...	...	...	...	4.90
"	1871	...	...	...	...	...	...	4.79
"	1881	...	...	...	...	...	...	4.88
"	1891	...	...	...	...	...	...	4.82
"	1901	...	...	...	...	...	...	4.71
"	1911	...	...	...	...	...	...	4.33

**Hungate Area.**

The shortage of cheap cottages has made it difficult to press some dilatory owners to carry out or complete the required improvement work. Nevertheless, some work has been achieved during the past year (see Table 44, post).



*Houses at present altogether closed, no works of improvement as yet carried out thereon :—*

Nos. 9—31, Lower Dundas Street and Providence Place	15 houses, all very unhealthy.
Nos. 7—13, Palmer Lane ... ..	4 „ „
Nos. 14—18, Palmer Lane ... ..	3 „ „
Nos. 5 and 6, Clark's Yard, Palmer Lane ...	2 „ „

*Houses under Closing Orders not yet improved according to requirements:—*

Nos. 11 and 12, St. John's Place ... ..	2 houses.
Nos. 1, 3, 5, and 7, Lower Dundas Street ... ..	4 „
Nos. 5—7, Cross Wesley Place, 4—8, Leadley's Yard	6 „
No. 3, Sawmill Lane ... ..	1 house.
Nos. 33 to 41, Hungate ... ..	5 houses.
Brenton Place ... ..	3 „

*Houses under Closing Orders—houses mostly made through and considerably improved, further improvements still awaiting completion:—*

Nos. 21 to 29, Hungate ... ..	5 houses.
Nos. 5 to 8, Drummond's Court ... ..	4 „
Nos. 9 to 12, Drummond's Court ... ..	4 „
Nos. 12 to 20, Garden Place ... ..	5 „
Outhwaite's Yard ... ..	3 „
Nos. 2—10, Dundas Street and Dundas Court ...	5 „
Nos. 1 and 2, Cross Wesley Place ... ..	1 house.
Nos. 6—16, Haver Lane ... ..	4 houses.



TABLE 43.

TABULAR STATEMENT OF ACTION TAKEN DURING THE YEAR ENDED MARCH 31st, 1916,  
UNDER SECTION 17 OF THE HOUSING ACT OF 1909.

(As required by the "Housing (Inspection of District) Regulations, 1910.")

DISTRICT.	Total dwellings inspected.	Total dwellings or tenements unfit.	Representations for Closing Orders.	Closing Orders made.	Improved without Closing Order.	Improved after Closing Order.	Total dwellings awaiting further action.	Total dwellings unaltered.	Total on which work is in progress.	Total on which Demolition Orders were made.	Total Houses demolished.	Back to back houses made, or to be made, through houses.
Hungate District	...	...	...	...	...	...	...	...	...	...	...	...
Walmgate District	...	...	...	...	...	...	...	...	...	...	...	...
Miscellaneous	...	...	...	...	...	...	...	...	...	...	...	...
Totals	...	...	...	...	...	...	...	...	...	...	...	...

Most of these figures cover houses on which Closing Orders have been made in previous years.



**TABLE 44.**—HUNGATE AREA. IMPROVEMENT WORKS COMPLETED DURING THE YEAR 1915.

Situation of House.	No. of houses or tenements.	Chief Defects.	Chief Works of Improvement carried out.
Nos. 6, 8, and 10, Garden Place, and No. 1, Outhwaite's Yard	4	Dilapidated, back-to-back ...	Made into two through-houses and repaired.
Nos. 42 and 44, Hungate, and Nos. 1, 2, and 3, Sawmill Lane.	5	Extremely dark ...	Nos. 42 and 44, made into Warehouse; Nos. 1 and 2, made into one house.
Nos. 4 and 5, Sawmill Lane ...	2	Very dark, and ill ventilated, practically sunless.	Plan submitted, nothing yet done, still occupied.
Nos. 13 and 14, St. John's Place, Haver Lane, and No. 7, Haver Lane.	3	Dark, damp, dilapidated ...	Closed; owner has decided not to proceed with works of improvement.
Nos. 11 and 12, St. John's Place	2	Dark, damp, dilapidated; defective drainage; congested.	Partly improved, further improvements deferred.
Nos. 2, 3, 4, 5, 6, 7, 8, and 9, Tower Buildings, and No. 25, Dundas Street.	9	Damp, dilapidated; defective drainage.	Houses much improved, cement and flagged paths laid in front of houses, remainder of yard surface gravelled.
No. 4, Cross Wesley Place, and No. 2, Lower Wesley Place.	2	Back-to-back, damp. ...	Made into one through house.
Nos. 10, 12, 14, 16, 18, and 20, Lower Wesley Place.	6	Do. ...	Nos 10 and 12, and 18 and 20, made into two through-houses; remainder of work in abeyance.
Nos. 20, 21, and 22, Dundas Street	3	Dark, damp, ill-ventilated; defective drainage.	Greatly improved; now occupied.



**TABLE 45.—WALMGATE DISTRICT. IMPROVEMENT WORKS CARRIED OUT DURING THE YEAR 1915.**

Situation of House.	No. of houses or tenements.	Chief Defects.	Chief Works of Improvement carried out.
Nos. 7 and 9, Navigation Road ...	2	Dilapidated, ill-ventilated houses, with foul privies.	Much improved, made through-houses, with an enclosed yard and new water-closet.
Nos. 1, 2, 3, 4, and 5, Wrightson's Yard, Walmgate.	5	Filthy, dilapidated, back-to-back.	Temporarily cleansed and improved.
Nos. 1, 2, 3, 4, and 5, Turner's Yard, Walmgate.	5	Dark, damp, dilapidated; foul box-privies.	Works of improvement under consideration.
Nos. 6, 8, 10, 12, 14, and 16, Willow Street, and Nos. 1, and 2, Voake's Yard.	8	Damp and dilapidated ...	Voluntarily closed some years ago; recently temporarily improved, now occupied again.

**TABLE 46.—MISCELLANEOUS HOUSES.**

Situation of House.	No. of houses or tenements.	Chief Defects.	Chief Works of Improvement carried out.
Ebor Buildings, Bedern (tenement flats).	45	Filthy and dilapidated, etc.	Considerably improved.
Nos. 22 and 23, Waterloo Place, Coney Street.	2	Light obstructed by building of Cinema Theatre and by a tree.	Improved by fixing additional and larger windows and removing tree.
Nos. 2, 3, and 4, Pinder's Court, Stonegate.	3	Damp, dilapidated. ...	Much improved.
Nos. 1, 2, and 3, Phoenix Court, Phoenix Street.	3	Damp walls, dilapidated brick-work; insufficiently lighted and ventilated pantries; defective drainage.	Greatly improved without Closing Order.
No. 18, Swann Street, and Nos. 1, 2, and 3, Smith's Yard, Swann Street.	4	Dilapidated, ill-ventilated ...	Much improved; Nos. 2 and 18 made into a through house.
Cundall's Buildings, Skeldergate (tenement flats).	15	Dilapidated, ill-ventilated and very verminous.	Works of improvement agreed-to progressing <i>very</i> slowly indeed.



***Administration of the Midwives Act (1902) during the year 1915:—***

There are now 23 certified midwives practising as such within the City area, 17 of whom gave notice during 1915 of their intention to practice.

There are 20 certified midwives who for one reason or another are not practising as midwives, 8 of them working as monthly nurses in conjunction with medical practitioners, 8 being engaged in house-keeping only, and 4 being engaged officially in connection with maternity and child welfare work in the City.

Three newly-certified midwives were added to the local roll during the year; one certified midwife left the city, and one died.

Ten stillbirths were notified by certified midwives to me (per Rule No. 20 of the Rules of the Central Midwives Board).

Eighteen notifications of certified midwives having had to send for medical help were received (per Rule No. 20).

One case was notified by a certified midwife where an infant had died before the services of a doctor could be obtained (per Rule No. 21).

No cases of Puerperal Fever were notified by midwives (per Rule No. 18), and only one case notified by a doctor involved a midwife, who was duly disinfected.

Ten notifications of having laid out a dead body were notified under Rules 17 and 21.

During the year the apparatus and case books of each of the 23 certified midwives, who were practising as midwives in the City, were inspected under my supervision on two or more occasions. No serious warnings or other action had to be taken.

Our health visitors have carried out the detailed work of inspection and have tried to improve the untrained midwives in various ways.

***The York Corporation Act, 1914:—***We have commenced to make use of the Sanitary Clauses in this Act—for instance, under Section 59 the seizure of unhealthy live animals sent into the cattle market; Section 73, dealing with ruinous buildings; Sections 87 to 91, *re* the closure of Sunday Schools, etc.—but the disorganisation of the work of our department created by the war has so far prevented our giving effect to some of the Clauses providing for the making of special bye-laws—this work will require to be cleared up when normal times return.



### ***The Office Staff and the War:—***

During the year our staff has had to be reconstituted several times in consequence of the enlistment of some of the sanitary inspectors, and the heads of the department have felt to be much in accord with the following extracts from a leading article in the "Sanitary Record" last October:—

"We are somewhat alarmed to hear that in many towns the sanitary services are beginning to suffer from shortage of men. . . . Something must be done at once to meet this emergency, for it is fraught with great danger to the health of the community. We understand that in some places men are no longer able to leave their work in municipal electricity works when current is supplied to firms on Government work. This same provision is urgently required in our public sanitary departments. . . . We must face facts. The public sanitary service is in danger, and at a time when it was never so necessary that it should be carried on efficiently. The public health must be protected. We cannot afford to neglect it even in the present crisis, and, therefore, the comparatively few men engaged on this work should not be allowed to leave the service. More than this, our executive sanitary officers should be "starred," in the interests of the health of the community. We hope to see something done in this matter without delay. We have enemies enough without adding preventable disease to the list."

It has seemed as if the sanitary progress, which has cost so many weary and almost agonising years to build up, could go overboard and be wrecked, that it is largely a luxury, and that the years of training and experience involved in making a good sanitary inspector should count for nothing.

We have not had so much to do for the Military Sanitary Service in some directions as in the first months of the war. In other respects our relationships have been still closer, and the fact that the City health has been no worse than it has been during the year is no doubt due to the vigilance of both the civilian and military sanitary services of the City.

During two winters my department has carried out considerable work in the supervision of military billets and of military food supplies, details of which will be found in the attached Report of the Chief Inspector of Nuisances. Cases of Scarlet Fever, Diphtheria, or Enteric Fever, occurring amongst the soldiers in the City, were removed by the military authorities, by arrangement, to the adjacent Acomb Fever Hospital, which happened to be available. The following military articles were disinfected during the year at our City Disinfecting Station:—



Blankets ...	...	...	...	...	...	...	...	1,111
Horse Rugs	...	...	...	...	...	...	...	64
Mattresses	...	...	...	...	...	...	...	145
Overcoats ...	...	...	...	...	...	...	...	33
Coats	...	...	...	...	...	...	...	580
Caps	...	...	...	...	...	...	...	18
Pairs of Trousers	...	...	...	...	...	...	...	296
Pairs of Putties ...	...	...	...	...	...	...	...	9
Jerseys	...	...	...	...	...	...	...	5
Soldiers' Belts	...	...	...	...	...	...	...	300
Articles of Underclothing	...	...	...	...	...	...	...	26
Kit Bags ...	...	...	...	...	...	...	...	38
Total								2,625

*The Ventilation of the Guildhall Offices:*—Numerous complaints having been received as to the inadequacy of the ventilating arrangements in these offices, I was requested by the Health Committee to report thereon ; I made an investigation and observations, and my report, together with a previous report of the City Surveyor, in 1908, was printed and referred to the Estates Committee, which, however, decided that nothing could be done during the war, although the matter is really one of very considerable urgency.

### METEOROLOGICAL OBSERVATIONS FOR THE YEAR 1915.

The more remarkable features of the weather of the year 1915 may be summarised as follows :—

A year of very irregular weather ;

A dry April and October, a very wet July, an extremely cold November, and a very wet December ;

Considerable prevalence of N.E. and N.W. winds ;

Total rainfall for the year, 24.62 inches ;

The rainfall system has largely shifted from the western to the eastern side of our islands ;

Total sunshine, 1,337 hours, 30 per cent. of total possible amount.

The Philosophical Society has adopted a new way of stating the barometer and rainfall readings, which is not very intelligible to the general reader ; so that, in the following meteorological tables, I have stated the readings taken from our own charts.

(See following Meteorological Tables for details).

EDMUND M. SMITH,

*Medical Officer of Health and School Medical Officer.*







YORK MUSEUM, 1915—Range of Monthly Barometer readings. Barometer at 32° and Mean Sea Level.

Month.	Highest Barometer.		Lowest Barometer.	
		Date.		Date.
January ...	30.33	19th	28.57	2nd
February ...	30.26	26th	28.81	19th
March ...	30.40	9th	29.24	1st
April ...	30.37	27th	29.00	7th
May ...	30.48	9th	29.69	1st
June ...	30.22	13th	29.63	29th
July ...	30.12	2nd	29.31	17th
August ...	30.20	23rd	29.53	3rd
September ...	30.32	10th	29.28	26th
October ...	30.33	19th	29.38	28th
November ...	30.71	21st	28.92	10th
December ...	30.39	19th	28.89	25th
Year ...	30.71	Nov. 21st	29.69	May 1st

# YORK (BOOTHAM)—SUNSHINE.

Month.	Total hours recorded.	Daily Mean.	Percentages of total possible hours of sunshine.	
			1915.	1914.
January ...	24	0.77	10	9
February ...	48	1.71	18	22
March ...	104	3.35	29	25
April ...	148	4.93	35	48
May ...	183	5.90	37	27
June ...	201	6.70	40	45
July ...	148	4.77	29	28
August ...	155	5.00	34	35
September ...	163	5.43	43	46
October ...	59	1.90	18	25
November ...	74	2.47	29	16
December ...	30	0.97	13	12
Year ...	1337	3.66	30	31



Heights above Ground:—Barometer, 3 feet; Thermometers, 4 feet; Rain-gauge, 1 foot.

1915.	Rainfall.			Weather—Number of Days of									Wind—Number of Observations of									
	Total.	Max.	Day.	Rain.	Snow.	Hail.	Thunder-storm.	Clear Sky.	Overcast.	Fog.	Gale.	Calm.	Strong Wind (4-7).	N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.	
	inches.	inches.																				
January	2.94	0.62	3	25	3	1	0	2	17	2	0	3	5	25	0	6	5	5	13	12	23	6
February	2.57	0.41	7	20	3	0	0	3	7	3	0	1	6	12	0	5	9	9	87	6	12	2
March	1.05	0.37	18	14	6	0	0	6	9	1	0	0	2	28	2	6	1	9	5	33	9	
April	1.03	0.27	12	10	0	0	0	3	7	0	0	0	6	15	3	4	2	15	7	30	14	
May	1.37	0.61	11	9	0	1	1	3	6	0	0	0	0	22	14	19	2	13	2	13	8	
June	0.49	0.15	26	6	0	0	2	3	5	1	0	2	0	15	12	19	6	14	4	15	3	
July	3.94	0.82	16	16	0	0	5	2	7	0	0	0	5	3	0	3	3	12	11	57	4	
August	1.83	0.39	31	17	0	0	5	5	8	0	0	2	0	9	4	5	1	14	4	39	15	
September	1.74	1.09	1	8	0	1	1	5	2	0	0	0	9	19	5	10	9	9	12	23	3	
October	0.98	0.45	27	10	0	0	0	2	16	7	0	2	5	16	8	9	9	25	6	14	4	
November	1.45	0.74	12	13	4	0	0	4	8	2	0	0	5	24	5	7	5	15	1	15	18	
December	5.23	0.88	5	28	1	0	0	3	15	4	0	2	2	6	1	8	4	42	5	15	10	
Year	24.62	1.09	Sept. 1	176	17	3	14	41	107	20	0	12	45	194	54	101	56	218	75	289	96	



ANNUAL REPORT OF THE CHIEF INSPECTOR OF  
NUISANCES FOR THE YEAR 1915.

MR. A. E. DRUMMOND, A.R.S.I.

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*To the Chairman and Members of the Health Committee.*

Gentlemen,

I have the honour to submit for your information a statement of Sanitary work, carried out under my supervision, for the abatement of Nuisances, etc., during the year 1915. This constitutes my thirteenth Annual Report.

Five years ago the card-index system was adopted in order to meet the requirements of the Housing Act of 1909, and to record the details of inspection with respect to those premises where the sanitary condition required alteration or improvement. We have now (March, 1916), 4,251 recorded on the above-mentioned system.

In the period named 7,822 houses and other premises have been inspected, 1,232 of which were found to require sanitary improvement.

1,837 notices have been served on owners and occupiers to execute various sanitary works to remedy the defects found on the premises.

It will be seen from the tabular statement :—

That a large amount of work has again been carried out by owners without notice from this Department. The owners generally in these cases ask us to inspect their premises and advise them as to the works necessary to put them into a sanitary condition.

That during the year, 340 privies and 391 ashpits have been abolished, and the privies converted into water-closets.

We have, as in previous years, had much difficulty in dealing with overcrowded houses. Only 18 of such houses were dealt with, because the occupiers were unable to obtain houses with more bedroom accommodation. For the last two years there have been practically no unoccupied houses in the City, and it has been impossible to deal with cases of overcrowding except where an exchange of houses was effected.



### **Common Lodging-Houses.**

The powers for the re-registration of these houses, under Section 80 of the York Corporation Act, 1902, enable the Sanitary Authority to effect improvement before certifying the houses as fit *to be used* as Common Lodging-houses, and the provisions of the Act have been enforced.

There are 13 keepers of the 20 Common Lodging-Houses in the City. The houses registered contain 88 rooms for sleeping purposes, and afford accommodation for 339 lodgers nightly, this number being slightly less than last year.

Twenty applications were received from the keepers for the re-registering of the houses in their occupation, and all the applications were acceded to.

During the year the keepers of No. 3, Newgate, and No. 110, Walmgate, died, and the premises not being altogether suitable, have been discontinued as Common-Lodging-Houses.

Three hundred and ninety-nine inspections have been made, and the premises have been kept in a satisfactory condition.

It was found that many mattresses, bed ticks, sheets and counterpanes required renewing and repairing, and we took the opportunity when the applications for re-registration were being considered, to request that the necessary renewals and repairs be carried out.

Large cards, calling the attention to the possibility of spreading Consumption amongst the lodgers by spitting on the floors, were again provided and hung in the day-rooms and bedrooms at each of the houses.

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### **Houses-let-in-Lodgings.**

There are 40 houses on the Register and 10 landlords, and the houses are let in tenements to 67 separate families.

These houses are registered under the Bye-laws made under the Public Health Act, 1875, with respect to Houses-let-in-Lodgings, which gives power to the Local Authority for fixing the number of persons who may occupy a house, or part of a house, which is "let in lodgings or occupied by members of more than one family," and for enforcing the sanitary condition of the said houses. The cleansing and limewashing of the same is carried out in January and July of each year, and it will thus be seen that we are able to exercise considerable control over this class of house.



Three applications were received from landlords for the houses in their occupation to be registered, and the applications were acceded to.

One hundred and forty visits of inspection have been made, and the premises and bedding were invariably found in a clean and satisfactory condition.

The rooms and passages have been regularly limewashed in accordance with the Bye-laws, and 78 notices intimating that lime-washing must be carried out were complied with.

The rooms are let furnished to married couples at rents varying from 1/6 to 5/- per week.

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### **Slaughter-houses.**

There are 66 private Slaughter-houses in the City. 1,517 day and 29 evening inspections have been made, and 261 notices to limewash were complied with.

Considering the situation and construction of most of them, they have, on the whole, been kept in a fairly satisfactory condition. One notice was served to provide a proper covered receptacle for refuse.

Eight notifications were received of change of occupier.

There are 44 "registered" slaughter-houses, and 22 "licensed" slaughter-houses in the City, making a total of 66. Three are at present temporarily unoccupied.

There are 95 butchers using the 66 slaughter-houses, *i.e.*, Forty-one are used by the registered occupiers solely ;

Twenty-two are used by two or more butchers.

By far the larger proportion of visits have been made at the time of slaughtering by the Meat Inspector (who is a qualified Veterinary Surgeon) and by myself, or my Assistant Inspectors, five of whom hold the Meat Inspector's Certificate of the Royal Sanitary Institute.

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### **Knacker's Yards.**

Robert Bridge, Little Hallfield Road, made application for the renewal of the licence to use the premises in Little Hallfield Road, and this was granted at a fee of 10/- to be paid annually.



Eighteen inspections of these premises were made during the year and I have pleasure in recording that no complaints were received, the premises having been kept in a very satisfactory condition, all the offal being removed from the premises every day.

#### Offensive Trades.

Number on Register, 16 :—

Tripe Boilers ... ..	4	Leather Dressers ... ..	2
Gut Scrapers ... ..	3	Bone Boiler ... ..	1
Fat Melters ... ..	2		—
Fellmongers ... ..	3		16
Tanner ... ..	1		—

One hundred and eighty-nine inspections have been made in connection with the above premises.

Thirty notices to limewash were served upon the occupiers.

Whenever complaints have been made of nuisances it is generally found that the occupiers have neglected to properly use the means provided for carrying off the effluvia in connection with the trade. On the whole, during the year, we have had very few complaints.

No less than 47 inspections have been made of the Yorkshire Bone and Oil Company's premises, Hull Road, and it was found that the premises were being kept in a fairly satisfactory condition.

In July an application was received for permission to establish the trades of gut-scraper and tripe boiler on premises situate in Lower Dundas Street. The City Council decided to grant permission to establish only the trade of a gut-scraper for twelve months, a report to be made at the end of that period as to the manner in which the business had been carried on.

#### Fried Fish Shops.

Ninety-two visits during the day and 11 in the evening have been made to the fried fish shops in the City, and the premises were found in a clean and satisfactory condition.

There are 61 of these premises registered in the City.

During the year 11 premises were discontinued and 16 new occupiers were registered.



As previously reported, many of the older premises have had the old-fashioned apparatus substituted by up-to-date cookers, which prevent nuisances arising from the process of frying. No complaints of the effluvia from frying were received during the year. We continue to require that the fish and potatoes be wrapped up in clean white papers, and we invariably found that our instructions were being carried out.

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### **Cowsheds.**

There are 61 Cowsheds in the City and 37 Cowkeepers.

Four Cowsheds have been discontinued as such, and there has been one change of occupier.

Two hundred and sixteen visits of inspection have been made.

The whole of the cowsheds have been limewashed twice during the year in accordance with the Dairies, Cowsheds, and Milkshops Regulations.

At 8 cowsheds the drains and the lighting and ventilation were improved.

There were kept in the 57 cowsheds about 351 cows.

I am glad to say that the greater number of the cowkeepers are endeavouring to produce a clean milk supply, and this is borne out by the Public Analyst, who informs me that all samples submitted to him are examined for dirt.

In company with Mr. Fawdington, our Veterinary Inspector, I have, during the year, made many visits to the cowsheds, and we found in one shed, along with other cows which were in a healthy condition, a cow suffering from Tuberculosis of the Larynx, and as it was not completely isolated, the owner was requested to remove the diseased cow and completely isolate it. This was done by removing it altogether away from the farm.

Seven samples of milk were obtained and submitted for bacterial examination, and they were certified as not containing tubercular bacilli. One was certified as distinctly dirty, two clean, and two as containing slight faecal contamination.



### **Dairies and Milkshops.**

During the year we continued to systematically inspect these premises.

One hundred day and 15 evening visits of inspection were made. The attention of 8 unregistered purveyors was called to the provisions of the Dairies, Cowsheds and Milkshops Order, and they forthwith registered themselves as purveyors of milk.

At the end of the year there were 281 persons on the register as purveyors of milk in the City of York ; 37 of these were cowkeepers as well as purveyors of milk residing in the City, and 158 were purveyors of milk also residing in the City ; 86 purveyors supplying the City have their premises outside the boundary ; 21 purveyors of milk registered themselves during the year, 18 of which resided in the City and 3 outside.

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### **Ice-cream Dealers.**

There are 39 premises registered in which ice-cream is manufactured, sold, or stored, being 6 less than last year.

Thirty visits of inspection were made, 15 of which were made in the evening.

At the time of inspection of carts, shops and stalls, the attention of several dealers was called to the dirty condition of the inner portion of the " wafer-holders."

On the whole the premises were found in a satisfactory condition.

The powers with respect to the manufacture, sale or storage of ice-cream under the Corporation Act of 1902 were repealed and re-enacted in the Corporation Act, 1914, with additional powers as to the name and address of the vendor appearing on his cart ; of entry into premises by authorised officers for the purpose of inspection ; and imposing of penalties for failing to comply with the requirements of the Act.

Copies of the Sections were served upon the Dealers during the year 1914.

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### **Smoke Nuisance.**

I am glad to report that we had no serious complaints about smoke nuisances during the past year.

Fifteen observations of 14 chimneys were taken, and in 5 cases black smoke was emitted in such quantities as to be a nuisance. This was mainly due to an intermittent system of



stoking, sufficient care not being taken to stoke regularly ; when the latter was carried out—after cautioning the stokers—improvement was at once noticed, and has since been maintained.

The following were the chimneys of which observations were taken :—

Name and Address of Firm :—

Yorkshire Laundries, Ltd., Peasholme Green.

Messrs. Raimes & Co., Micklegate.

Corporation Electricity Works.

Messrs. H. Leetham & Sons, Ltd., Hungate.

Yorkshire County Hygienic Laundries, Ltd., Foss Islands.

Engines of nine shows in the Fair, Parliament Street.

### Water Supply to Dwelling-houses.

During the year 11 houses were provided with a sufficient supply of water.

Wherever possible with regard to provision of a separate supply of water to dwelling-houses, we usually require the owner to fix a sink under the water-tap, the provision of which is much appreciated by the tenants, and contributes to a greater degree of comfort and cleanliness.

### General Notices in Default.

When owners fail to comply with the notices served upon them to effect sanitary improvements, the works are carried out by the Corporation under the provisions of the Public Health Act, 1875, and the costs recovered from the owner.

The figures for previous years are given for purposes of comparison :—

	YEARS.						
	1909.	1910.	1911.	1912.	1913.	1914.	1915.
Number of houses provided with a sufficient drain ... ..	2	0	10	0	1	26	21
Number of houses provided with a sufficient water-closet ... ..	1	0	10	0	1	26	21
Number of houses provided with ashbins ... ..	1	0	10	0	1	28	21

*The attention of the City Surveyor* has been called to the following defects :—

The condition of back roads ... ..	...	...	...	...	...	0
Nuisances arising from sewers ... ..	...	...	...	...	...	7
Choked or foul street gullies ... ..	...	...	...	...	...	11
Offensive smells from sewer ventilators ... ..	...	...	...	...	...	2
Miscellaneous ... ..	...	...	...	...	...	6



**Sanitary Work carried out during the year 1915.**

Number of inspections made ... ..	7,822
Number of re-inspections made ... ..	8,694
Number of premises which required sanitary improvement	1,232
Number of Notices served ... ..	1,837
Number of letters sent ... ..	846
Number of complaints received ... ..	487

**Description of Work carried out.****PRIVIES :—**

	Under Notice.	Without Notice.
Converted into water-closets ... ..	326	14
Abolished ... ..	6	0
Lime-washed ... ..	11	12

**ASHPITS :—**

	Under Notice.	Without Notice.
Abolished ... ..	358	33
Floors laid with cement concrete ... ..	352	34
Portable receptacles provided ... ..	527	37

**DRAINS :—**

New drains constructed ... ..	745	67
Re-constructed ... ..	349	34
Disconnected from sewer ... ..	301	27
Ventilated ... ..	304	17
Waste pipes of sinks disconnected ... ..	2	0
Drains under house abolished ... ..	62	4
Stoneware syphon traps fixed ... ..	272	28
Waste pipes of sinks trapped or renewed ... ..	322	28
Bath and lavatory waste pipes ventilated ... ..	13	2
Cleansed or repaired ... ..	117	29
Urinals improved ... ..	2	0
Additional gullies fixed in yards ... ..	384	18
Cesspits abolished ... ..	1	0
Inspection chambers built ... ..	336	38
Drain openings removed from inside buildings ... ..	29	10
Smoke-tests ... ..	1,222	
Grenade tests ... ..	16	

**WATER-CLOSETS :—**

Provided with a sufficient supply of water ... ..	352	29
Limewashed or cleansed ... ..	43	9
Additional provided ... ..	11	0
"Wash-down" water-closets provided in lieu of "old pan" apparatus ... ..	1	0
"Wash-down" water-closets provided in lieu of "waste-water" closets ... ..	2	1
Repaired ... ..	115	12
Re-constructed ... ..	8	3
Soil pipes repaired or renewed ... ..	18	1
New flush pipes fixed ... ..	364	31
Light and ventilation provided or improved ... ..	12	1
New cisterns fixed ... ..	354	31



## HOUSES :— ...

Cleansed and limewashed	...	...	...	...	66	...	2
Provided with damp-proof courses	...	...	...	...	31	...	1
Roofs, etc., repaired	...	...	...	...	104	...	12
Water spouts fixed or repaired	...	...	...	...	346	...	20
Down spouts disconnected from drain	...	...	...	...	384	...	27
New sinks fixed	...	...	...	...	203	...	23
Accumulation of manure or refuse removed	...	...	...	...	39	...	7
Nuisances arising from the keeping of swine and other animals abated	...	...	...	...	17	...	1
Pavements of yards repaired	...	...	...	...	211	...	19
Yards re-paved with asphalt	...	...	...	...	4	...	0
Yards re-paved with cement concrete	...	...	...	...	114	...	27
Supplied with a sufficient supply of water	...	...	...	...	11	...	0
Means of ventilation improved	...	...	...	...	127	...	0
New floors laid or repaired	...	...	...	...	371	...	12
Overcrowding abated	...	...	...	...	15	...	3
Miscellaneous works not classified above	...	...	...	...	134	...	6

## COWSHEDS (61) :—

Visits of inspection made—216	Under Notice.
Limewashed	122
Closed or discontinued as such since January 1st, 1915	4
Improved—drains, lighting and ventilation	8
Overcrowding abated	0
New sheds constructed	1

## SLAUGHTER-HOUSES (66) :—

Visits of inspection made—1,517 daily and 29 evening	
Limewashed, cleansed	261
Repaired	0
Closed or discontinued as such since January 1st, 1915	3
Number of notifications as to change of occupier	8
Receptacles for refuse provided	1

## OFFENSIVE TRADES (16) :—

Visits of inspection—189.

Number of notices to limewash	30
Improvements—provision of receptacles, etc.	0

## COMMON LODGING-HOUSES (20) :—

Visits of inspection made—399.	
Limewashed	40
Improvements—bedding renewed, etc.	33
Closed or discontinued since January 1st, 1915	2

## HOUSES LET IN LODGINGS (40) :—

Visits of inspection made—130.	
Number limewashed	78
Improvements—bedding renewed, etc.	2



## INFECTIOUS DISEASES:—

Patients removed to Hospital in Ambulance	...	...	235
Rooms disinfected	...	...	947
Articles disinfected by steam disinfectors	...	...	10,730
Articles disinfected for the Military Authorities	...	...	2,625
Library books disinfected	...	...	60
Number of houses inspected, and reports made to the Medical Officer of Health, where cases of infectious disease have occurred (including all forms of Tuberculosis)	...	...	754
Notifications of infectious disease sent to Head Teachers of Schools	...	...	418
Notifications sent to the Secretary of the Education Committee	...	...	285

## SMOKE OBSERVATIONS:—

Number of chimneys of which observations were taken	...	14
Number of observations	...	15
Number of observations in which black smoke was emitted in such quantities as to be a nuisance	...	5
Number of occupiers cautioned	...	4
Number of notices served to abate nuisance	...	2

**Administration of the Factory and Workshop Act, 1901.**

During the year 1915, 472 workshops were on the register, and the names of 76 out-workers (or home-workers) were received.

On the whole the workshops, retail bakehouses, etc., were found to be in a satisfactory condition. No legal proceedings had to be instituted.

The following is a summary of the work carried out during the year 1915 under the Act:—

Total number of Workshops on the Register, 472, including:

Retail Bakehouses	...	59
Laundries	...	12
"Workplaces"	...	23
Number of "Domestic Factories"	...	0

Number of lists of Outworkers received, representing 28 Employers and 76 Outworkers, 74 of whom are engaged in making wearing apparel, and 2 in furniture and upholstery work ... | 55 |

Notices of Occupation of Workshops received from H.M. Inspector of Factories ... | 20 |

*Workshops and Domestic Workshops:—*

Number inspected	...	220
Number of inspections made	...	242
Notices served under Public Health Acts <i>re</i> Sanitary defects	...	12
Number of notices to cleanse and limewash	...	8
Number of notices to abate over-crowding	...	0
Number of notices to provide means of ventilation (Sec. 7)	...	1
Number of notices <i>re</i> wet floors (Sec. 8)	...	0
Summary proceedings taken	...	0



*Retail Bakehouses (59 in number):—*

Number inspected	...	...	...	...	...	40
Number of inspections	...	...	...	...	...	44
Notices served as to water-closets	...	...	...	...	...	0
Notices served as to water-cisterns	...	...	...	...	...	0
Notices to remove drain openings	...	...	...	...	...	0
Notices served to limewash	...	...	...	...	...	2
Number of bakehouses dealt with as sanitarily unfit (under-ground bakehouses)	...	...	...	...	...	0
Summary proceedings taken	...	...	...	...	...	0
Number where sanitary arrangements improved	...	...	...	...	...	0

*Workplaces (Restaurant Kitchens, Stables, etc.):—*

Number on Register	...	...	...	...	...	23
Number inspected	...	...	...	...	...	10
Number of inspections	...	...	...	...	...	27
Notices or other action taken	...	...	...	...	...	0

*Sanitary Conveniences in Workshops:—*

Closets were insufficient or unsuitable or defective at	...	1*
There were "no closets separate for the sexes" at	...	2*

\*(These were dealt with under Sec. 22 of the Public Health Acts Amendment Act, 1890, which was adopted by York Corporation, April 4th, 1892).

*Homework (Sections 107 to 115):—*

Number of inspections	...	...	...	...	...	125
Number of outworkers' premises inspected	...	...	...	...	...	125
Number found unwholesome and occupiers ordered to cleanse	...	...	...	...	...	0
Work stopped because of the prevalence of infectious disease, <i>vide</i> Section 110	...	...	...	...	...	0
Names of outworkers, with places of employment, forwarded to the Clerks of Councils in whose districts their places of employment were situated	...	...	...	...	...	0
Number of employers failing to send in lists	...	...	...	...	...	0

Six premises were reported to the York Sanitary Authority by H.M. Inspector of Factories during 1915, viz.:—

- (1) Workshops—Two had no separate sanitary convenience for female workers.
- (2) Workshops—One basement work-room was in a damp condition.
- (3) do. Sanitary convenience was not properly screened.
- (4) do. Small and possibly overcrowded.
- (5) Factories—Two were not provided with means of escape in case of fire.

Two infringements of the Act were reported by me to H.M. Inspector of Factories (S. 133, 1901).

Full details of the Workshops and of our Inspections were placed on record, in accordance with the Act.



## WORKSHOPS ON THE REGISTER AT THE END OF 1915.

Bakehouses, retail ... ..	59	Needlework ... ..	3
Blacksmiths ... ..	6	Paper Bag Making ... ..	1
Bottling... ..	2	Patent Medicine Making ... ..	1
Boot and Shoe Making and		Plumbing ... ..	13
Repairing ... ..	46	Picture Framing ... ..	2
Blind Making ... ..	1	Printing ... ..	1
Brickmaking ... ..	2	Photography ... ..	2
Brushmaking ... ..	1	Restaurants ... ..	11
Bookbinding ... ..	2	Rope Making ... ..	1
Basket Making ... ..	1	Saddlers... ..	9
Cabinet Makers ... ..	9	Salt Packing ... ..	1
Coach Builders ... ..	3	Stable Yards ... ..	2
Carver and Gilder ... ..	1	Sculptor... ..	1
Cycle Making and Repairing	14	Shoeing Smiths ... ..	3
Corset Making ... ..	3	Shirt Making ... ..	3
Cork Cutting ... ..	1	Stocking Knitter ... ..	1
Dressmaking ... ..	67	Sugar Boiling ... ..	2
Engraving ... ..	1	Ticket Writers ... ..	2
Fellmonger ... ..	1	Tailoring ... ..	64
French Polishing ... ..	2	Taxidermist ... ..	1
Gelatining Show Cards ... ..	1	Tinsmiths ... ..	13
Halter Weaver ... ..	1	Umbrella Making ... ..	1
Jam Making ... ..	1	Undertaker ... ..	1
Joiners ... ..	15	Upholsterers ... ..	4
Laundries ... ..	12	Whitesmiths ... ..	6
Leather covering of scientific		Watch Makers and Repairers	11
Instruments ... ..	1	Wheelwrights ... ..	4
Mantle Making ... ..	1	Workplaces ... ..	5
Marine Stores ... ..	3	Weighing Machine Repairer ... ..	1
Milliners ... ..	42		
Malting ... ..	1		
Mackintosh Making ... ..	1		
Motor repairing ... ..	1		
		Total ... ..	472

**Sale of Food and Drugs Acts.**

During the year 143 samples of Food and Drugs have been procured and submitted to the Public Analyst, who certified 136 samples genuine, and 7 samples adulterated (*i.e.*, 4.9 per cent. of adulteration).

All the samples obtained for analysis were (with the exception of 47 samples of Milk and one each of Butter, Sausage, and Margarine), procured by an Agent.

For full particulars see the following report of the Public Analyst.

58 samples of Milk were submitted, including one formal sample of Separated Milk and one formal sample of Machine Skimmed Milk. Five (*viz.*:—8.6 per cent.) of the samples of Milk and 66.6 per cent. of the samples of Irish Whisky were adulterated.



CITY OF YORK.—**TABLE 47.** (Required by the Local Government Board).  
ADMINISTRATIVE ACTION REGARDING SAMPLES NOT REPORTED TO BE GENUINE DURING  
THE YEAR 1915.

1 Nature of Sample.	2 Identification number given to samples in the quarterly Report.	3 Result of Analysis.	4 If any legal proceedings were instituted under the Sale of Food and Drugs Acts, state the result, showing fines and costs separately.	5 If any legal proceedings were taken under Acts other than the Sale of Food and Drugs Acts, state the results, showing fines and costs separately.	6 If no legal proceedings were instituted, state briefly the course adopted in regard to each sample.	7 Information, if any, as to previous convictions.	8 Remarks on any point of special interest.
Milk ...	10	Milk-fat...     ...     2.71 Non-fatty solids     8.77 Water ...     88.52 100.00			Sample obtained from retail vendor. Town Clerk instructed to ask for an explanation, and the vendor said he sold it as he received it from the wholesale vendor. The Committee decided that the Town Clerk should warn the retail vendor.		
Milk ...	44	Milk-fat...     ...     2.85 Non-fatty solids     8.21 Water ...     88.94 100.00  Deficient in milk-fat to extent of 5.0 per cent.	Case dismissed without costs as the information had not been laid within 28 days of the time that sample was purchased.				



TABLE 47.—Continued.

Milk ...	61	Milk-fat... Non-fatty solids Water ...	... 2.79 8.98 88.23 <hr/> 100.00			Sample obtained from retail vendor. Town Clerk instructed to ask for an explanation, and the vendor said he sold it as he received it from the wholesale vendor. The Committee decided that the Town Clerk should warn the retail vendor.	
		Deficient in milk-fat to extent of 7 per cent.					
Milk ... (Separated)	64	Milk-fat... Non-fatty solids Boric Acid Water ...	... 0.350 7.950 0.055 91.645 <hr/> 100.000	Vendor convicted and fined 10/- without costs.		(The sample contained Boric Acid in the proportion of 38.5 grains per gallon, and also contained 8.6 per cent. of added water).	
Milk ... (Machine skimmed)	68	Milk-fat... Non-fatty solids Water ... Boric Acid	... 0.390 9.010 90.548 0.052 <hr/> 100.000			Sample obtained from retail vendor. Town Clerk instructed to ask for an explanation and the vendor said he sold it as he received it from the wholesale vendor. The Committee decided that the Town Clerk should warn the retail vendor.	
		Sample contained Boric Acid in the proportion of 36.4 grains per gallon.					
Cream	99	Milk-fat... Non-fatty solids Boric Acid Water ...	... 48.68 3.86 0.35 47.11 <hr/> 100.00			Informal sample sold by vendor of Nos. 108 and 111.	



TABLE 47.—Continued.

Whiskey (Irish)	101	<p>Sample had an alcoholic strength of 35.27° under proof, and contained the parts as under:—</p> <p>Absolute Alcohol 30.72%  Water ... 69.28%  Extractive matter ... Trace.</p> <p>100.00</p>	<p>This corresponds to a mixture of:—</p> <p>Whiskey of the minimum legal strength (25° under proof) 86.30  Excess of water 13.70</p> <p>100.00</p>	Informal Sample from the same vendor as No. 107.	
Whiskey (Irish)	107	<p>Sample had an alcoholic strength of 32.52° under proof, and contained the parts as under:—</p> <p>Absolute Alcohol 32.09%  Water ... 67.91%  Extractive matter ... Trace.</p> <p>100.00</p>	<p>This corresponds to a mixture of:—</p> <p>Whiskey of the minimum legal strength (25° under proof) 90.0  Excess of water 10.0</p> <p>100.0</p>	Formal sample. Court proceedings not taken. Vendor interviewed, and satisfactory explanation given to Town Clerk, by whom vendor was cautioned.	



TABLE 47.—Continued.

Cream	108	Milk-fat... .. Non-fatty solids Boric Acid ... Water ...  48.93 2.44 0.29 48.34 <hr/> 100.00	Convicted and fined 2/6 & costs 18/6— Total £1 1s.		Informal sample purchased from the same vendor as Nos. 99 and 108, and was taken before the summary proceedings in respect to No. 108, in order to ascertain whether the vendor was still selling Cream which contained a preservative without properly labelling the receptacle.	Vendor had been previously cautioned as to selling Cream without being properly labelled.
Cream	111	Milk-fat... .. Non-fatty solids Boric Acid ... Water ...  46.35 4.20 0.37 49.08 <hr/> 100.00				



**Offences other than adulteration.**

Obstructing Inspector	...	...	...	...	...	...	0
Attempting to bribe Inspector	...	...	...	...	...	...	0
Refusing to serve Inspector	...	...	...	...	...	...	0
No name on milk-can	...	...	...	...	...	...	0
Condensed, separated or skimmed milk unlabelled	...	...	...	...	...	...	0
Breaches of Margarine Act, 1887 (not properly labelled, offenders verbally cautioned by Inspector)	...	...	...	...	...	...	0
Breaches of Butter and Margarine Act, 1907	...	...	...	...	...	...	0

*Preservatives:*—All samples of cream, milk and butter, and any articles likely to contain preservatives, are examined for the same. (See Analyst's Report).

*Informal or test samples:*—Of the total number of samples obtained and submitted to the Public Analyst, 52 were formal samples and 91 were obtained informally. Forty-seven of the milk samples were formal; all the other samples, with the exception of one each of cream, sausage, Irish whiskey, separated milk, and machine skimmed milk, were informal. Informal samples are in all cases purchased by an agent, and if any are found adulterated further formal samples are obtained with a view to summary proceedings being taken. It has been found that the obtaining of informal samples is a very convenient and reliable method of estimating whether vendors are supplying genuine articles, and does not cause inconvenience to the shop-keeper as is the case when samples are taken formally, the latter method involving explanation why the sample has been purchased, the subsequent division of samples into three parts and the sealing up of the same, all of which takes up a considerable amount of time.

**TABLE 48.**

(a) PERCENTAGE OF ADULTERATION IN ALL SAMPLES OBTAINED IN PREVIOUS YEARS, 1906—15.

Years	...	...	...	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915
Total number of samples				117	131	85	138	133	140	131	132	153	143
Number adulterated	...			5	2	1	9	6	9	5	13	14	7
Percentage adulterated	...			4.27	1.52	0.85	6.5	4.5	6.4	3.8	9.84	9.1	4.9



(b) SAMPLES OF MILK PROCURED BY THE INSPECTOR  
FOR ANALYSIS UNDER THE FOOD AND DRUGS ACTS.

Year.	Total Samples obtained.	Total Samples genuine.	Total Samples Adulterated.	Total Persons warned.	Total Persons prosecuted.
1906 ... ..	60	58	2	1	1
1907 ... ..	69	68	1	—	—
1908 ... ..	41	41	—	—	—
1909 ... ..	69	62	7	4	2
1910 ... ..	58	63	5	2	1
1911 ... ..	77	69	8	2	6
1912 ... ..	51	49	2	1	1
1913 ... ..	65	52	13	1	3
1914 ... ..	59	55	4	3	1
1915 ... ..	58	53	5	4	2
Total for 10 years	607	570	47	18	17

**The Margarine Act, 1887, and The Sale of Food and Drugs Acts, 1899.**

Every manufactory of margarine or margarine cheese must be registered by the owner or occupier thereof, and any premises where the business of a wholesale dealer in margarine or margarine cheese is carried on are also required to be registered with the Local Authority.

There are no manufacturers of margarine or margarine cheese in this City. Thirteen wholesale dealers in margarine or margarine cheese, and nineteen premises in their occupation, are registered. During the year no applications were received for registration.

**Butter and Margarine Act, 1907.**

There are no Butter-making Factories in the City.

**Inspection of Meat.**

During the year, 1,517 visits of inspection have been made to the slaughter-houses, and a large proportion were made by the Meat Inspector (who is a Veterinary Surgeon) and myself.

The following Table gives the number of carcasses, etc., dealt with, and shows the number of seizures and surrenders. The large number of surrenders is again accounted for in that, whenever the butchers find any unusual appearance in a carcass, they notify me of it, and ask that it be inspected. If upon inspection the carcass or any part of it is found to be unfit for human food, a surrender note is signed by the owner, and the



meat is forthwith destroyed. This is mainly due to a system of insurance which obtains amongst the members of the York and District Butchers' Association, the rules of which require a certificate from the Inspector of Nuisances before compensation is paid. This has been in operation in the City for over seven years and has proved most helpful to the Health Department.

I have to record that the arrangement made seven years ago with the above-mentioned Association, to permit the butchers to strip the fat from surrendered tuberculous carcasses, still obtains, and the fat is dealt with at a tallow chandler's premises under the supervision of one of my assistants, who sees that it is deposited in a tank containing sulphuric acid, and cannot, therefore, be used for the food of man.

The majority of the animals, to the carcasses of which my attention was called, were sold by auction at the York Fat Stock Auction Mart, and the average price paid for such animals amounted to £19 15s. 7d.

During the year 1912, the York Butchers' Association petitioned the Markets Committee that all animals exhibited in the York Cattle Market should be considered as exposed for sale, and intended for the food of man. As a result, the following notice was posted up at entrances to the market:—

“NOTICE.—This market is open on Tuesdays for the sale of fat stock only, and all animals exhibited will be treated as fat stock intended for the food of man, and all persons must take notice accordingly.

(Signed) H. CRAVEN,

Guildhall, August, 1912.

Town Clerk.”

On account of the difficulty in instituting proceedings against owners (chiefly farmers from outside the City), because they excused themselves on the ground that the animals, when found to be diseased, were not intended for the food of man, and that they did not know that the market was for fat stock only, the Markets Committee, therefore, obtained special powers under the Corporation Act, 1914 (Section 59).

Acting under these powers, three emaciated sheep were seized as being unfit for the food of man, and Magistrates' Orders were obtained for their destruction, which was accordingly carried out. For result of prosecutions, see page 131.



TABLE 49.—CITY OF YORK.—RESULTS OF INSPECTION OF MEAT DURING 1915.

Carcases, &c.	Disease or condition.	Inspector's attention called by Owner.	Inspector called Owner's attention.	Surrendered by Owner.	Seized by Inspector.	Result of Action.
24 whole carcasses with all organs.	Tuberculosis	Yes—in each case	—	Yes—in each case	—	Removed by Corporation and destroyed at Corporation Destructor.
11 part carcasses ...	do.	do.	—	do.	—	do.
Internal organs (lungs, liver, etc.) from 26 carcasses ...	do.	do.	—	do.	—	do.
Carcass of a sheep ...	Fevered condition.	do.	—	do.	—	do.
Carcass of a bullock ...	do.	do.	—	do.	—	do.
Carcass of a calf ...	do.	do.	—	do.	—	do.
40 stones of chilled beef...	Putrid.	do.	—	do.	—	do.
Carcass of a pig ...	Putrid.	do.	—	do.	—	do.
Carcass of a sheep ...	Joint ill.	do.	—	do.	—	do.
Carcass of a bullock ...	Extensively bruised.	do.	—	do.	—	do.
2 carcasses of pigs...	Rickets.	do.	—	do.	—	do.
Carcass of pig ...	Suffocated	do.	—	do.	—	do.
60-lbs. of beef ...	Extensively bruised.	do.	—	do.	—	do.
6 carcasses of pigs ...	Swine fever	do.	—	do.	—	do.
Internal organs from 37 carcasses of Pigs	do.	do.	—	do.	—	do.
Internal organs from 4 pigs.	Abscesses, putrid, etc.	do.	—	do.	—	do.
3 sheep at Cattle Market	Emaciated and parasitic.	—	Yes	—	Yes	do.

The total weight of butchers' and other meat surrendered and seized during the year amounted to 1,771 stones as compared with 1,894 stones in 1914 and 2,294 stones in 1913.



TABLE 50.—CITY OF YORK.

PARTICULARS OF SURRENDERS AND SEIZURES OF UNSOUND ANIMALS AND MEAT  
(MOSTLY AFFECTED WITH TUBERCULOSIS), DURING THE YEARS 1910—1915.

Year.	SURRENDERS.				SEIZURES.		Number of carcasses from which some of the internal organs were surrendered at slaughter-houses.	Total Surrenders and Seizures.	NUMBER AND CLASS OF ANIMAL AFFECTED WITH TUBERCULOSIS.						
	At Slaughter-houses.		At York Auction Mart and on private premises		Whole or part Carcasses.				Bulls.	Oxen.	Cows.	Heifers.	Calves.	Sheep.	Pigs.
	Whole Carcasses.	Part Carcasses.	Animals.	Carcasses.	In Slaughter-houses.	In Shops.									
1910 ...	36	2	2	1	1	2 (both half carcasses).	14	58	1	7	18	20	1	—	7
1911 ...	38	5	4	7*	—	2 (both half carcasses).	11	67	—	13	26	8	1	—	11
1912 ...	34	3	4	2	—	2	12	57	—	17	20	14	—	—	3
1913 ...	37	17	1	2	2	2 at Cattle Market.	13	72	1	13	31	13	2	—	2
1914 ...	35	4	1	2	—	—	16	58	—	11	22	8	1	—	6
1915 ...	38	14	2	2	3	3 at Cattle Market.	64	123†	—	8	18	15	—	—	9

\* 6 were carcasses of lambs, frozen.

† 43 of these were surrenders of carcasses or internal organs of swine where outbreaks of swine fever occurred.



**TABLE 51.—CITY OF YORK.**

Year.	Number of Voluntary SURRENDERS of diseased carcasses, or part carcasses by butchers to Chief Sanitary Inspector.		Number of SEIZURES (with subsequent destruction) of diseased carcasses or part carcasses by the Chief Sanitary Inspector.	
	Tuberculosis.	All diseases including Tuberculosis.	Tuberculosis.	All diseases including Tuberculosis.
1906... ..	3	6	2	24
1907... ..	3	3	—	8
1908... ..	6	9	—	1
1909... ..	7	10	1	1
1910... ..	34	40	2	3
1911... ..	44	59	2	2
1912... ..	34	56	0	2
1913... ..	62	70	0	2
1914... ..	48	58	0	0
1915... ..	54	110	0	3
Total for 10 years	295	421	7	46

**Verminous Children.**

Complaints were received from the Assistant School Medical Officer that children from certain houses were attending school in a verminous condition, and, in consequence, 55 houses and the bedding therein were inspected: 4 were found in a very filthy condition, 7 filthy, and 44 were moderately clean. It was found necessary to steam-disinfect the bedding and fumigate the rooms at 21 of these houses, and notices were served upon 12 of the occupiers to cleanse and disinfect. The bedding at 34 was found in clean condition.

**Billets.**

With regard to the occupation of billets in the City by the troops, a less number were in occupation during 1915, on account of larger schools and other buildings being used for billeting purposes. Among the premises occupied were the following:—

Lumley Barracks; Park Grove School; Salvation Army Barracks; Central Mission, Swinegate; Railway Institute; Scarcroft Council School; Knavesmire Race Course Buildings; Skating Rink, Fishergate; Fishergate Council School; Melbourne Sunday School.

Several large premises were in occupation as Military Hospitals.



No less than 18 stable yards were occupied for the stabling of horses.

The temporary Assistant Inspector (Herbert K. Blundell), who was specially appointed to inspect the billets and the food stuffs supplied to the troops, resigned his position on April 24th, he having accepted a permanent appointment at Gosforth. Since the period mentioned the work of inspecting the billets, etc., has been carried out by the District Inspectors.

The resumé of the work carried out in connection with the above-mentioned premises is as follows:—

234 Visits of Inspection.

21 Preliminary Notices were served.

<i>Re</i> Choked water-closets	...	...	...	...	...	1
„ Water-closets to be put into proper order	...	...	...	...	...	2
„ Defective and Choked Drains	...	...	...	...	...	13
„ Latrines	...	...	...	...	...	4
„ Requiring new ashbins	...	...	...	...	...	1
„ Removal of manure and other refuse matters	...	...	...	...	...	8
„ Paving of yard surfaces	...	...	...	...	...	2
„ Insufficient ventilation	...	...	...	...	...	1
„ Overcrowding	...	...	...	...	...	4
„ Miscellaneous (dirty billets, etc.)	...	...	...	...	...	3
„ Defective ablution troughs...	...	...	...	...	...	2
						—
						41
						—

Seventeen samples of food stuffs, which included butter, margarine, lard, milk, sausage, polony, potted meat, sugar, jam, etc., were obtained from the various firms which supplied food stuffs to the troops, and submitted to the Public Analyst for analysis, who certified all as genuine.

The names and addresses of firms who contracted for the supply of food to the troops were obtained and the goods in many cases were inspected before delivery.



**Prosecutions.**

There were 10 prosecutions instituted during the year, as follows :—

No.	Date.	Offence.	Result.
1	March 11	Swine so kept as to be a nuisance.	Convicted and fined 5/-
2	„ 11	Manure deposited in contravention of the Bye-laws.	Convicted and fined 5/- and costs
3	„ 22	Emaciated sheep exposed for sale at Cattle Market.	Convicted and fined 10/- and costs.
4	„ 30	Selling adulterated milk ...	Case dismissed without costs.
5	April 8	Emaciated sheep exposed for sale at the Cattle Market.	Convicted and fined 30/- including costs.
6	„ 8	Ditto. ... ..	Convicted and fined £1 with 5/6 costs.
7	May 5	Selling adulterated separated milk.	Convicted and fined 10/- without costs.
8	Nov. 1	Failing to comply with Notices to provide a sufficient water-closet, ash-bin, and drain at three houses.	Summons dismissed as Corporation failed to prove that the Defendant was the owner.
9	„ 11	Delivering preserved cream without the receptacle being properly labelled.	Convicted and fined 2/6 and 18/6 costs.
10	„ 22	Failing to comply with Notices to provide a sufficient water-closet, ash-bin, and drain.	Convicted and ordered to pay costs.

**Staff.**

Owing to members of the staff leaving to enlist into the army or to take up other appointments, considerable difficulty was experienced in carrying on the work of the Department.

The following permanent members of the staff left for enlistment into Sanitary Sections :—

Frank Fishburn, Deputy-Chief Inspector, left in August, and during his absence he is temporarily succeeded by Robert Hagyard, the Drainage Inspector.

Thomas H. Millar, Assistant District Inspector (appointed Drainage Inspector in July), left in November.

As mentioned in the Report for 1914, W. G. Pyatt, who was appointed Assistant District Inspector, had been mobilised on August 4th, 1914, and we were not able to obtain his services until February 1916, upon his receiving his discharge as a time-expired Territorial.



The following temporary Assistant Inspectors left to take up permanent appointments :—

Herbert K. Blundell, appointed in November, 1914, to inspect the Billets, left in April to take up an appointment at Gosforth.

Raymond A. Bishop, appointed in October, 1914, left in June to take up an appointment at Bradford.

A temporary member of the staff, Albert H. Hardcastle, who succeeded Mr. Bishop, in June, left at the end of the year for enlistment into the army.

In conclusion, I take this opportunity to express my thanks to the members of the Health Committee, to the Medical Officer of Health, and to the members of the staff for their cordial support throughout the year.

I am, Gentlemen,

Yours obediently.

A. E. DRUMMOND,

*Chief Inspector of Nuisances.*

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I have studied the above Report of the Chief Inspector of Nuisances, and am of opinion that it is an exceedingly creditable record of work, taking into consideration the innumerable difficulties experienced during the year.

EDMUND M. SMITH,

*Medical Officer of Health.*



## REPORT OF THE CANAL BOATS INSPECTOR.

Ouse Navigation Offices,

Naburn Locks, York,

*January 7th, 1916.**To the Health Committee, Guildhall, York.*

Gentlemen,

I beg to submit to you my Annual Report.

I am employed as Canal Boats Inspector for the City of York, at a salary of £10 per annum. I am also Canal Boats Inspector for the Escrick Rural District Council, at a salary of £2, and for the Bishopthorpe Rural District Council at a salary of £1 1s. per annum.

During the year ended December 31st, 1915, I have inspected 204 Canal Boats, upon which I found 400 men, 20 women, and 5 children ; the cabins were mainly in good condition, and there has been no case of illness reported.

I have met with 7 boats with no certificates on board, 2 whose certificates did not identify the owners ; 1 boat not numbered ; 2 with no water cask ; and 2 with not sufficient ventilation. These infringements were on 11 boats, and were remedied after notice was given to the owners.

The total number of boats on my register at the end of 1915, was 258, out of these 132 have been broken up, withdrawn, or are not traceable, which leaves 126 which I believe are in use in this district.

I have re-registered 1 boat which has changed ownership, and registered 2 new boats.

I am, Gentlemen,

Your obedient servant,

JAS. B. MUMMERY.



REPORT OF THE CITY PUBLIC ANALYST FOR 1915.  
MR. JOHN EVANS, F.I.C., F.C.S.

Sheffield, March 27th, 1916.

*To the Right Honourable the Lord Mayor, The Aldermen,  
and Councillors of the City of York.*

My Lord Mayor and Gentlemen,

I have the honour to present the following Report of the work done by me during the year ending December 31st, 1915, in my capacity of Public Analyst for the City of York.

The general character of the work executed, and the number of samples submitted and analysed during the year will be seen on reference to the following table:—

Article.	Number Examined.	Number Genuine.	Number Adulterated.	Adulterated per cent.
Milk ... ..	58	53	5	8.6
Cream ... ..	5	5	—	—
Butter ... ..	16	16	—	—
Margarine ... ..	4	4	—	—
Cheese ... ..	4	4	—	—
Lard ... ..	6	6	—	—
Jams ... ..	10	10	—	—
Marmalade ... ..	1	1	—	—
Potted and Tinned Foods ...	8	8	—	—
Tea ... ..	2	2	—	—
Coffee ... ..	1	1	—	—
Coffee Mixture ... ..	2	2	—	—
Cocoa ... ..	2	2	—	—
Sugar ... ..	2	2	—	—
Rice ... ..	2	2	—	—
Arrowroot ... ..	1	1	—	—
Malt Vinegar ... ..	1	1	—	—
White Pepper ... ..	2	2	—	—
Baking Powder ... ..	6	6	—	—
Ground Ginger ... ..	1	1	—	—
Crushed Linseed ... ..	1	1	—	—
Olive Oil ... ..	2	2	—	—
Glycerine ... ..	1	1	—	—
Castor Oil ... ..	1	1	—	—
Camphorated Oil ... ..	1	1	—	—
Whiskey ... ..	3	1	2	66.6
	143	136	7	4.9



Of the 143 samples examined, 52 were formal (taken in accordance with the Regulations of the Sale of Food and Drugs Acts) and the remaining 91 were informal samples.

The number of samples taken per 1,000 of the population represents 1.74, which is a slight decrease as compared with the previous year when the rate was 1.85 per 1,000.

The Local Government Board suggest as a minimum two samples per 1,000 of the population.

The following table shows the rate of adulteration during the past six years.

Year.			Number of Samples Analysed.	Number Adulterated.	Rate of Adulteration per cent.
1910	...	...	133	6	4.5
1911	...	...	140	9	6.4
1912	...	...	121	5	3.8
1913	...	...	132	13	9.8
1914	...	...	153	14	9.1
1915	...	...	143	7	4.9

#### Milk.

Fifty-eight samples of Milk were examined during the year consisting of 56 samples of New Milk, one sample of Separated Milk, and one sample of Machine Skimmed Milk. Of these, two were condemned as being deficient in Milk-fat to the extent of 7 and 9.6 per cent. respectively. One was condemned as being deficient in milk-fat to the extent of 5 per cent., and also low in non-fatty solids. The sample of Separated Milk contained 8.6 per cent. of added water and also Boric Acid added as a preservative in the proportion of 38.5 grains per gallon of the Milk. The sample of Machine Skimmed Milk also contained 36.4 grains of Boric Acid per gallon.

The following table shows the composition of the milk samples received during the year.

Mark.	Milk-fat per cent.	Non-fatty Solids per cent.	
8	3.70	8.84	<p>FEBRUARY.</p> <p>Total number of samples examined :—9.</p> <p>Average composition (including adulterated samples) :—</p> <p>Milk-fat, 3.22 per cent.</p> <p>Non-fatty solids, 8.93 per cent.</p>
9	3.20	9.19	
10	2.71	8.77	
11	3.20	9.02	
12	3.05	8.88	
13	3.60	8.65	
14	3.50	9.04	
15	3.00	8.86	
16	3.00	9.15	



Mark.	Milk-fat per cent.	Non-fatty Solids per cent.	
25	3.15	8.83	<p>MARCH.</p> <p>Total number of samples examined :—15.</p> <p>Average composition (including adulterated samples) :—</p> <p>Milk-fat, 3.55 per cent.</p> <p>Non-fatty solids, 8.95 per cent.</p>
26	3.20	8.81	
27	3.00	9.51	
28	3.65	8.59	
29	3.00	8.83	
30	3.90	9.34	
31	4.00	9.04	
32	3.20	8.97	
33	4.05	9.09	
34	4.35	8.96	
43	4.20	8.72	
44	2.85	8.21	
45	3.45	9.33	
46	3.75	8.92	
47	3.50	9.13	
48	3.00	8.72	APRIL.
57	3.45	9.13	<p>MAY.</p> <p>Total number of samples examined :—9.</p> <p>Average composition (including adulterated samples) :—</p> <p>Milk-fat, 3.34 per cent.</p> <p>Non-fatty solids, 9.06 per cent.</p>
58	4.50	9.14	
59	3.01	8.80	
60	3.05	9.03	
61	2.79	8.98	
62	3.00	9.07	
63	3.90	9.25	
65	3.00	8.98	
66	3.40	9.20	
77	3.20	9.32	<p>JUNE.</p> <p>Total number of samples examined :—4.</p> <p>Average composition (including adulterated samples) :—</p> <p>Milk-fat, 3.35 per cent.</p> <p>Non-fatty solids, 9.31 per cent.</p>
78	3.60	9.28	
79	3.40	9.46	
80	3.20	9.16	
81	3.10	8.75	<p>JULY.</p> <p>Total number of samples examined :—2.</p> <p>Average composition (including adulterated samples) :—</p> <p>Milk-fat, 3.10 per cent.</p> <p>Non-fatty solids, 8.86 per cent.</p>
82	3.10	8.97	
94	3.25	8.81	<p>AUGUST.</p> <p>Total number of samples examined :—4.</p> <p>Average composition (including adulterated samples) :—</p> <p>Milk-fat, 3.59 per cent.</p> <p>Non-fatty solids, 9.02 per cent.</p>
95	3.60	9.24	
96	3.80	8.94	
97	3.70	9.08	



Mark.	Milk-fat per cent.	Non-fatty Solids per cent.	
109	3.70	9.10	SEPTEMBER.
125	3.60	8.88	NOVEMBER.
126	3.60	8.81	
127	3.45	8.47	Total number of samples examined :—8.
128	3.75	8.96	Average composition (including adulterated samples) :—
129	2.92	8.30	Milk-fat, 3.66 per cent.
130	4.15	9.34	Non-fatty solids, 8.86 per cent.
131	3.70	8.97	
132	4.10	9.12	
141	3.85	8.91	DECEMBER.
142	2.95	9.04	Total number of samples examined :—3.
143	3.60	8.49	Average composition (including adulterated samples) :—
			Milk-fat, 3.47 per cent.
			Non-fatty solids, 8.81 per cent.
	3.40	8.96	Average composition for the year.

#### Butter.

Sixteen samples were examined and all proved to be genuine. The amount of water present varied from 8.5 to 14.4 per cent. (maximum limit 16 per cent.). Two of the samples contained Boric Acid added as a preservative in the respective proportions of 0.23 and 0.30 per cent.

#### Margarine.

The four samples of Margarine examined during the year proved to be genuine. They all contained Boric Acid in proportions varying from 0.17 to 0.36 per cent.).

#### Cheese.

The four samples of Cheese examined were found to be genuine and were prepared from unskimmed milk. They were free from Boron Preservatives.

#### Cream.

The five samples of Cream received during the year contained Boric Acid in proportions varying from 0.27 to 0.37 per cent. They all contained the full proportion of Milk-fat for preserved cream and with two exceptions were labelled Preserved Cream in accordance with the Public Health (Milk and Cream) Regulations, 1912. No gelatine or other thick substance was detected in any of the samples.



### **Jams and Marmalade.**

Ten samples of Jam and one of Marmalade were received. Two of these contained Salicylic Acid added as a preservative, in the proportion of 0.14 and 0.63 grain per pound respectively. The remaining samples were free from chemical preservatives.

### **Potted and Tinned Foods.**

Eight samples were received, consisting of three samples of Potted Meat, three of Sausage, one of Polony, and one of Shrimp and Salmon Paste. These were all examined more especially for the presence of preservatives. Two of these were free from preservatives, and the remaining six contained Boric Acid in proportions varying from 0.16 to 0.33 per cent.

### **Coffee and Coffee Mixtures.**

Two samples of Coffee and one of "Coffee Mixture" were examined. One of the Coffee samples was genuine, and the other contained 60 per cent. of Chicory, which fact was acknowledged on the label. The sample sold as "Coffee Mixture" was found on analysis to consist of 25 per cent. of Chicory and 75 per cent. of Coffee, which conformed to the specification submitted by the Inspector.

### **Rice.**

Of the two samples of Rice submitted, one was a polished rice, that is, it had been treated with talc. This treatment is technically known as "facing." The amount of "facing" material left on the sample was 0.4 per cent. This is below the maximum limit recommended in Dr. Hamill's Report to the Local Government Board. The other sample was free from any "facing" material.

### **Drugs.**

The following Drugs were submitted for analysis:—Crushed Linseed (1), Olive Oil (2), Glycerine (1), Camphorated Oil (1), Castor Oil (1). All these were in accordance with the requirements of the British Pharmacopœia.

### **Spirits.**

Three samples of Whisky were received. Of these, two contained excess water to the extent of 10 and 13.7 per cent. respectively. The remaining sample had had an alcoholic strength above the minimum legal limit. These samples were received prior to the Order of the Central Control Board (Liquor Traffic) for the West Riding Area, which came into force on the 22nd November, 1915. In this area the City of York is included. Paragraph 10 of this Order permits the dilution of Whisky,



Brandy and Rum to 35 degrees under proof, and Gin to 45 degrees under proof.

**Preservatives.**

Boric Acid was detected in Milk on two occasions. The Public Health (Milk and Cream) Regulations, 1912, prohibit the addition of any preservatives whatever to Milk—including Skimmed and Separated Milk—which is intended for human consumption.

Boric Acid was found in Butter on two occasions, and in all the samples of Margarine.

The five samples of Cream were found to contain Boric Acid as mentioned in an earlier paragraph dealing with Cream.

Two samples of Potted Meat, two of Sausage, one of Polony and one of Shrimp and Salmon Paste, were also found to be preserved with Boric Acid.

Salicylic Acid was present in two samples of Jam to the extent of 0.14 and 0.63 grain per pound respectively.

None of the other samples call for comment.

I am, Gentlemen,

Your obedient servant,

JOHN EVANS,

*City Analyst."*



# INDEX OF ANNUAL HEALTH REPORT FOR 1915.

	PAGE.
Accident, Deaths due to	84
Analyst's Report...	134—139
Bacteriological Work	91
Baths, Public	92
Billets for Troops	129—130
Births and Birth-rate	8—10
Bronchitis and Pneumonia	82
Canal Boats	133
Cancer	83
Cerebro-spinal Fever	71
Children under five years of age (Deaths)	31—32
Cleansing of School Children	88
Common Lodging-houses and Houses let in Lodgings	109
Corporation Act, 1914	102
Cowsheds and Milkshops	112—113, 116
Cream and Milk Regulations	93—96
Dairies and Milkshops	93, 113
Deaths, Causes and Totals of	12—24
Death-rates (General)	12, 22
Diarrhœa, Summer	54—56
Diphtheria and Membranous Croup	67—69
Drainage	115
Disinfection	79, 103—104, 117
Enteric Fever (see Typhoid Fever).	
Epidemic or Zymotic Diseases	54—72
Factory and Workshop Act	117—119
Fever Hospital	66, 68, 89—90
Flies and Disease	55
Food and Drugs Act	119—125
Food Inspection and Food Poisoning	92—96, 119—129
Fried Fish Shops	111, 112
Guildhall Offices, Ventilation of	104
Health Visitors	45—47
Heart Disease	82—83
Housing of the Working Classes	96—101
Ice Cream Dealers	113
Illegitimate Births and Deaths	10, 29
Infant Mortality	25—53
Infantile Paralysis (see Poliomyelitis, Acute)	72
Infants' Welfare Association	43, 47—51
Infectious Diseases	62, 78, 89—90
Inquests	32, 84
Knackers' Yards	110, 111
Laboratory Work	91
Marriage-rate	11
Maternity and Child Welfare	32—53
Measles	57—58



	PAGE.
Meat Inspection ... ..	92—93, 125—129
Meteorological Data ... ..	...104—107
Midwives Act, 1902 ... ..	102
Milk Supply ... ..	93—96
Notification of Births ... ..	45
Nuisance Inspector's Report ... ..	...108—132
Offensive Trades ... ..	111
Old-age (Senile Decay) ... ..	20, 21
Ophthalmia Neonatorum ... ..	73
Overcrowding ... ..	108
Phthisis ; Mortality, Prevention, etc. (see Tuberculosis—Human)	
Pneumonia (see Bronchitis).	
Polluted Streams ... ..	92
Population ... ..	6—8
Public Institutions, Deaths in ... ..	16
Puerperal Fever ... ..	72
Quarterly Statistics ... ..	9, 13, 23, 24—26
Refuse Disposal ... ..	92
" Residents " and " Non-residents "—Deaths of ... ..	16—17
Sanitary Defects ... ..	69, 71, 92, 108, 114, 117
Scarlet Fever ... ..	64—66
School Children, Medical Inspection of ... ..	84—89
Schools, Infectious Diseases in ... ..	63—64, 68
Slaughter-houses ... ..	110
Smallpox ... ..	71
Smoke Nuisance ... ..	113—114, 117
Staff of Health Department ... ..	2, 131
Statistical Summary ... ..	5
Stillbirths ... ..	30
Suicide ... ..	84
Tuberculosis, Human—Mortality, Prevention, etc. ... ..	74—81
and Tuberculosis Officer's Report Appended.	
Tuberculosis, Bovine ... ..	93, 126, 127
Typhoid Fever ... ..	70—71
Vaccination ... ..	11
War, The, and Civil Sanitary Service ... ..	103
Water-Closets ... ..	115
Whooping Cough ... ..	59
Workshops ... ..	...117—119
" Zymotic " Death-rate (see Epidemic Diseases).	

## CHART :—

Chart C.—Principal causes of Death in 1915 ... ..	18
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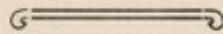








**CITY OF YORK.**



**THE THIRD**  
**ANNUAL REPORT**

**OF THE**  
**TUBERCULOSIS OFFICER**

**For the Year 1915.**



**YORK:**  
**YORKSHIRE PRINTING COMPANY, HULL ROAD,**  
**1916.**



# CONTENTS.

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	<i>Pages.</i>
PART I.—General Survey            -       -	5—9
PART II.—Institutional Treatment of Tuberculosis in York       -	10—12
(a) Open-Air Wards.	
(b) County Hospital.	
PART III.—Work of the City of York Tuberculosis Dispensary    -	13—26



# STAFF OF THE TUBERCULOSIS DISPENSARY, 1915.

---

*Tuberculosis Officer*     -     -     -     **J. BELL FERGUSON,**  
M.B., Ch.B. (Edin.)  
D.P.H. (Manchester).

*Secretary to Dispensary and to  
the Tuberculosis Crusade  
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*Nurse*     -     -     -     -     -     **Miss B. MANGHAM.**

*Dental Surgeon*     -     -     -     -     -     **T. E. CONSTANT,**  
M.R.C.S., L.D.S.

---

## *Tuberculosis Sub-Committee of the Health Committee :*

**Alderman CARTER**  
(Chairman).

**Alderman INGLIS**  
(Vice-Chairman).

**Alderman BIRCH.**

**Councillor WISEMAN.**

**Councillor O. ROWNTREE.**

**Councillor WRIGHT.**



# CITY OF YORK.

## APPROXIMATE EXPENDITURE AND RECEIPTS IN CONNECTION WITH ANTI-TUBERCULOSIS SCHEME, APRIL 15TH TO MARCH 31ST, 1916.

### *Approximate Expenditure:—*

Dispensary	...	...	£ 963
Sanatorium beds at Years- ley Bridge	...	...	1212
Surgical beds at County Hospital	...	...	343
			<hr/>
			£2518
			<hr/>

### *Receipts:—*

York Insurance Committee in regard to treatment of Insured Persons :—		£
* (a) Dispensary	...	284
† (b) Sanatorium	...	451
Grants from the Local Gov- ernment Board :—		
(a) <i>Re</i> Dispensary	...	293
(b) <i>Re</i> Sanatorium beds and County Hospital beds	... ..	553
		<hr/>
Approximate nett cost to City	... ..	937
		<hr/>
		£2518
		<hr/>

The L.G.B. grants are equivalent to 50 per cent. of the costs of treatment of the non-insured.  
 \* Equivalent to about 33½ per cent. of total costs.  
 † At the rate of 25 shillings per case per week.



## PART I.

**General Survey.**

During the past year there has been a decrease in the number of primary notifications of both the pulmonary and non-pulmonary forms of tuberculosis.

	1913.	1914.	1915.
Pulmonary Tubercle ... ..	203	176	115
Other forms ... ..	105	90	62
	<hr/> 308	<hr/> 266	<hr/> 177

There has been an apparent increase in the mortality from the disease, 100 persons dying from Pulmonary Tubercle, and 40 from other forms of the disease, compared with 79 and 36 respectively during 1914.

This rise is not peculiar to Tuberculosis, as similar increases in the death-rates are recorded for several other diseases, especially Respiratory and Zymotic diseases, not only in York, but in other towns. This increase in the death-rate may be explained by the marked changes in the population and in the life of the people produced by the war. Numerous families have moved into York, including many cases of Tuberculous disease, and their search for a home in a city where houses were already scarce, to the verge of a house famine, has not always been attended by the happiest results, and much overcrowding has ensued.

The billeting of troops during the winter months has added to this factor of overcrowding.

Women have found new sources of work, and often, perhaps, the home and children have suffered in consequence. Men and women clerks have come to the City in large numbers, and all have had to find a lodging somewhere.

The increased prevalence of Measles and Whooping-Cough has, no doubt, had an influence on the mortality from non-pulmonary tubercle. Associated with general overcrowding and its co-existent lack of efficient ventilation in the home, the presence and persistence of an "Influenza type" of Catarrh in the City during the first and last quarters of 1915 has materially assisted in breaking down the resistance of many cases of Lung Tuberculosis and determining a fatal issue.

**DEATHS DUE TO PULMONARY TUBERCLE DURING 1915.**

1st quarter ... ..	31	3rd quarter... ..	17
2nd " ... ..	28	4th " ... ..	24

**DEATHS DUE TO OTHER RESPIRATORY DISEASES, 1915.**

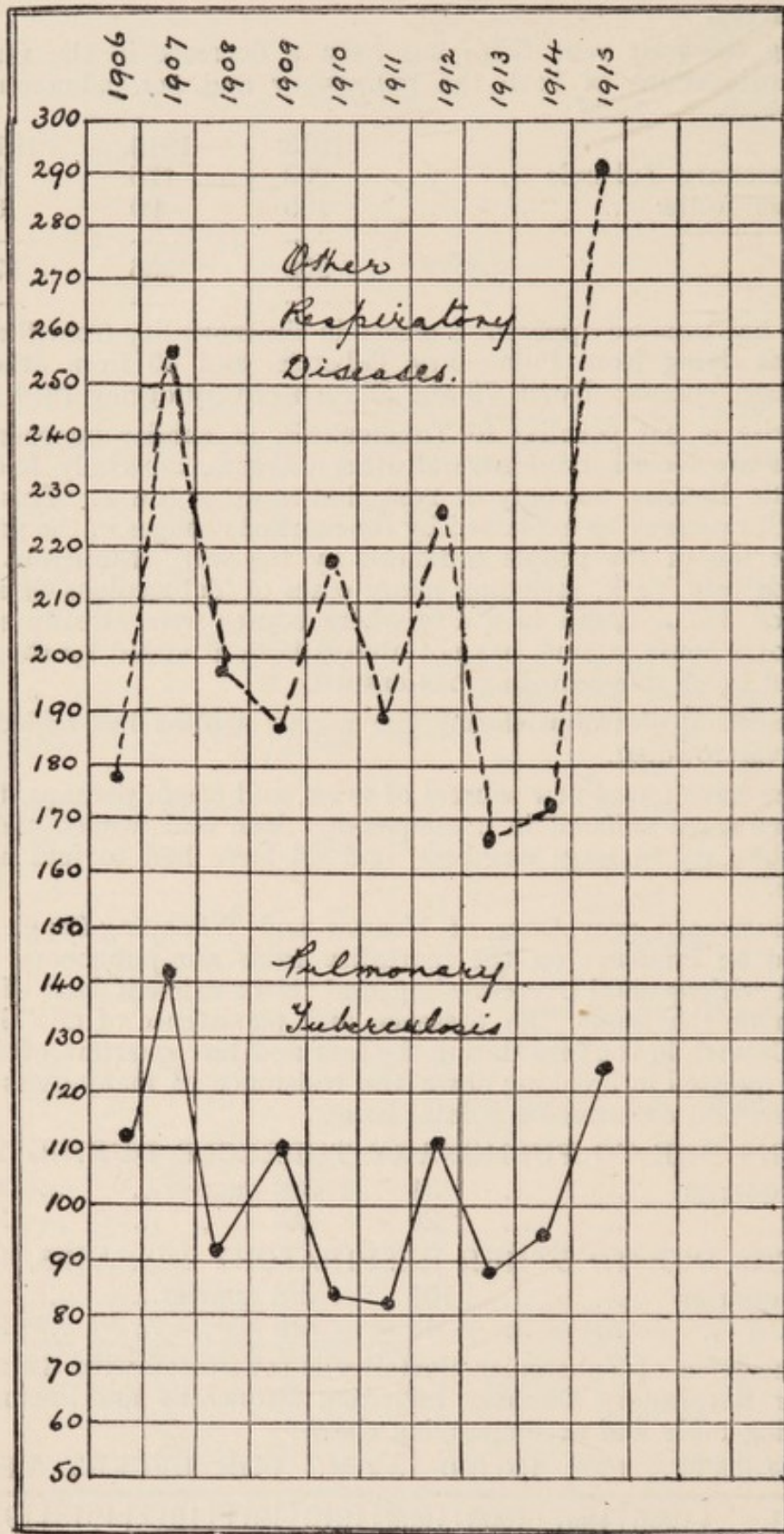
1st quarter ... ..	101	3rd quarter... ..	31
2nd " ... ..	43	4th " ... ..	58

The incidence of Tubercular Mortality is contrasted with the mortality from other Respiratory Diseases, including Bronchitis and Pneumonia, in the following table and accompanying chart :—

**DEATH-RATES PER 100,000 LIVING FOR RECENT YEARS.**

Table I.	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915
Pulmonary Tubercle ...	112	141	92	110	84	82	111	88	95	125
Other Respiratory Diseases	178	257	197	186	219	188	227	166	172	291





This table shows how closely the increased mortality of other respiratory disease is followed by an increased Phthisis mortality.



There is invariably an increased mortality from respiratory disease wherever populations become overcrowded, where housing conditions are bad, and where, in consequence, catarrhal organisms are met with in enormous doses.

It has long been known that life for a consumptive patient is impossible under such conditions, and, indeed, at the Dispensary all our discharged patients are warned against exposing themselves to catarrhal infection as far as possible.

It becomes increasingly clear that our efforts towards the control and eradication of Tuberculous disease will ever meet with but measured success until we boldly and comprehensively attack the fundamental problem—the proper housing of the people as a whole, and of the infective patient, in particular.



**TABLE 2.**—HOME CONDITIONS *re* 155 NOTIFICATIONS OF ALL FORMS OF TUBERCULOSIS DURING  
THE YEAR 1915.

CLEANLINESS AND GENERAL ASPECT OF HOUSES.

Clean.	Good Light.	Moderate Light.	Damp.	Close.	Dirty.	Back to Back.	Defective Windows.	Windows, open day only.	Windows, open night and day.	Windows, not opened.
115	115	40	34	34	40	19	5	52	38	65

**TABLE 3.**—SLEEPING ARRANGEMENTS.

Separate Bedroom. (a)	Separate Bed, but others in Room. (b)				Others in same Bed.						In Kitchen.		In Front. Sitting Room.	Over-crowding.	
	No. in Room.				In bed. (c)		In room. (d)		Alone.	With others.					
	1	2	3	4	1	2	3	4	1	2	3	4			
36	15	15	4	2	65	17	2	2	9	12	5	4	6	0	46



### Notifications.

177 notifications of Tuberculosis were received through the Medical Officer of Health.

115 were cases of Pulmonary Tuberculosis, and 62 of other forms of the disease.

These cases were visited, and full particulars of disease and home conditions entered on a form, and filed at the Dispensary. An analysis of the home conditions of 155 cases, in which defects were found, will be seen in the accompanying tables:—

Table 2 gives particulars of the general aspect and cleanliness of the homes, and Table 3 gives details of the sleeping arrangements.

The task of educating the public to consistently avail themselves of the benefits of pure fresh air in the homes is a most difficult one.

Table 2 shows that in no less than 42% of the houses investigated the inmates confessed to an avoidance of open windows both by day and by night. In 33% of the cases the windows were opened at times during the day only, while in only 24% were the houses efficiently ventilated.

Table 3 shows that only 36 out of 155 cases of Tuberculous disease were found sleeping under satisfactory conditions from the point of view of avoiding spread of infection.

In 46 cases there was evidence of "legal" overcrowding (*i.e.*, less than 400 cubic feet per person in each bedroom), but a glance at columns *b* and *c* of this table will show the extent of "physiological" overcrowding which existed on visiting the cases. Thus, in column *c* we see that in 65 cases the patient slept with another person in bed; in 17 cases two others in bed; in 12 cases, in addition to overcrowding in the patient's *bed*, there were two other persons in the same *room* (column *d*).

The Dispensary Staff do all in their power to advise the people in these cases, and to obtain some amelioration of the existing conditions, but often the isolation of the patient means simply a transference of the overcrowding to another apartment of the house. It is this factor which renders imperative the need in the near future of isolation accommodation for certain cases. The tables above illustrate the conditions under which many of these cases are living and dying, and the table below shows the number and percentages of those who have died at home compared with those who have died suitably isolated and properly cared for in hospital.

**TABLE 4.**—SHOWING THE PERCENTAGES OF TOTAL DEATHS OF YORK CITIZENS FROM PULMONARY TUBERCULOSIS OCCURRING IN INSTITUTIONS COMPARED WITH THE PERCENTAGES OF CASES DYING AT HOME.

Year.	TOTAL CASES.			PERCENTAGES.		
	Workhouse Infirmary.	Other Hospitals. *	At Home.	Workhouse Infirmary.	Other Hospitals.	At Home.
1910...	11	3	55	16%	4.3%	79.7%
1911...	9	5	54	13.2%	7.3%	79.5%
1912...	10	5	77	10.9%	5.1%	84.0%
1913...	12	7	54	16.4%	9.6%	74.0%
1914...	15	2	62	19.0%	2.5%	78.5%
1915...	15	11	74	15%	11.0%	74.0%

\* All other hospitals (Fever Hospital, County Hospital, Fulford Asylum, &c.).



## PART II.

## INSTITUTIONAL TREATMENT OF TUBERCULOSIS IN YORK.

## SANATORIUM TREATMENT.

## CITY OF YORK OPEN-AIR WARDS.

Patients are examined for admission to these Wards at the Tuberculosis Dispensary on Monday, Wednesday, and Friday afternoons, from 3 to 5 p.m.

Non-insured persons who are resident in York are treated in these wards free of cost.

Insured persons are paid for by the York Insurance Committee at the rate of twenty-five shillings per week per bed. Six beds are reserved for insured persons, and any additional beds required are paid for by the Insurance Committee.

**Types of Case admitted.**

While we are anxious to reserve these beds for cases in which the disease is early, and the constitutional disturbance slight, it has been found necessary to admit many cases not coming under this category for short periods of educational treatment.

**Co-ordination between the Open-Air Wards and the Tuberculosis Dispensary.**

The cases, as a rule, stay from two to three months in the Open-Air Wards, and the more suitable cases, who have shown signs of improvement on Tuberculin, are transferred to the Tuberculosis Dispensary to continue their "course," which usually lasts for nine or twelve months, and in some cases even longer.

Should any patient show signs of relapse while being treated at the Dispensary, he is at once re-admitted to the Sanatorium.

**TABLE 1.**—SHOWING ADMISSIONS and DISCHARGES to the above wards during the twelve months ending December 31st, 1915.

No. of Cases in Open-Air Wards on Dec. 31st, 1914.				No. of Cases admitted during 1915.				Cases discharged, died, or transferred to Tuberculosis Dispensary during 1915.				No. of Cases in Wards on Dec. 31st, 1915.			
M.	F.	Children.	Total.	M.	F.	Children under 14.	Total.	M.	F.	Children under 14.	Total.	M.	F.	Children under 14.	Total.
5	1	10	16	29	22	16	67	26	21	22	69	9	2	5	16
								Died:—							
								1	1	1					



During the year 67 cases were admitted to the Open-Air Wards for treatment. *These include one re-admission.*

These cases included 3 cases of non-pulmonary tuberculosis who were admitted owing to pressure on beds elsewhere, and 66 cases of pulmonary tuberculosis. Two cases were found to be non-tubercular after observation.

Altogether, 29 men, 22 women, and 16 children of both sexes under the age of 14, were admitted, and with the 16 patients who were in the wards at the end of 1914, this makes a *total of 81 cases treated during 1915.*

*Of the cases admitted, 33 were insured persons, 24 males and 9 females. 18 were non-insured, and there were 16 children under fourteen (9 boys and 7 girls).*

69 cases were discharged during the year, including 3 who died, and 16 remained under treatment on December 31st, 1915.

Of the cases discharged, 23 were transferred to the Tuberculosis Dispensary, at 11, Castlegate, for further active treatment by Tuberculin or otherwise, and 46 cases were referred to their own doctors, or to the Panel doctor for domiciliary supervision.

These 46 cases included 2 cases who had been admitted for observation, and were found to be free from active Tuberculosis. For the most part, the remainder were more or less advanced cases, who had been admitted for purposes of education, cases transferred to other Sanatoria, cases in which it was found that Tuberculin was contra-indicated, or cases who either refused further treatment or discharged themselves from the wards (2).

### **Duration of Sanatorium Treatment.**

The average length of stay in the wards was 13 weeks, the longest stay being 34 weeks, and the shortest 2 days.

The average stay last year was 15 weeks. Applications at the Dispensary for admission to the Sanatorium have again increased, after a fall in 1914.

The immediate results of treatment in the 64 cases of Pulmonary Tuberculosis (of whom 33 were insured persons), were as follows:—

Improvement.	No improvement.	Worse.	Died.
50	9	2	3

Of the three non-pulmonary cases treated, two were cured, and one so much improved that he was enabled to return to school. 43% of the 64 Phthisis patients admitted had Tubercle Bacilli present in sputum.

**Remarks.**—In addition to the routine methods of treatment by means of graduated work, rest, attention to hygiene, inhalation of volatile antiseptics, and administration of Tuberculin, several new methods were tried in certain cases.



I have to thank Miss Proctor, the Matron at the Isolation Hospital, and the nursing staff for their loyal help and co-operation with a rather trying and difficult class of patient.

### HOSPITAL TREATMENT.

13 Cases sent to the "Hospital Beds" at the County Hospital. Two others refused treatment.

One insured person and 12 uninsured were sent to the County Hospital, including 2 women, and 11 children under fourteen. The diagnosis was as follows :—

Tuberculosis of	Cases.	Cured.	Improved.	I.S.Q.	Died.
Cervical Glands ...	2	1	1	...	...
Hip ...	6	4	...	1	1
Knee (One Amputation) ...	3	1	1 (one still in)	...	...
Ankle ...	1	1	...	...	...
Wrist (re-admission) ...	1	...	1	...	...
	—	7	3	2	1
Total ...	13.				

**Remarks.**—The average duration of stay was 11 weeks. Difficulty is sometimes met with in securing a bed for these cases in the County Hospital, but this will tend to be obviated when we secure further Sanatorium accommodation. These Non-Pulmonary cases can then be transferred to the Sanatorium to pursue their somewhat prolonged convalescence, thus freeing the Hospital beds.

Increased difficulty has been experienced since the war commenced in obtaining admission for tuberculous cases. The prolonged treatment required for many cases of surgical tuberculosis renders it a difficult matter to keep the few beds at our disposal free, and many patients have to wait long periods for admission, often in very adverse surroundings.



## PART III.

**WORK OF THE TUBERCULOSIS DISPENSARY, 11, CASTLEGATE.****Summary** of work done during the year 1915.

	Adults over 14.		Children under 14.	Total.
	Males.	Females.		
No. of New Cases Applying ... ..	103	128	177	408
Re-attendances ... ..	—	—	—	6,501
No. of insured persons commencing treatment at Dispensary ... ..	18	16	—	34
No. of insured persons commencing treatment at O.A.W. ... ..	19	12	—	31
New Cases taken on at the Dispensary for treatment ... ..	21	26	19	66
Cases passed for Open-Air Wards ... ..	28	23	18	69
Referred to other Institutions ... ..	—	—	—	57
New Patients Examined (Round No.) ... ..	—	—	—	408
Old Patients Re-examined ... ..	—	—	—	671
O.A.W. Cases transferred to Dispensary ... ..	13	5	5	23
Dispensary Cases transferred to O.A.W. ... ..	3	2	1	6
Patients who have ceased attending on their own accord ... ..	2	3	2	7
Patients who have ceased attending on advice of T.O. ... ..	1	1	—	2
Home Visits :—Tuberculosis Officer—First Visit ... ..	—	—	—	115
Re-Visits ... ..	—	—	—	121
First Visit ... ..	—	—	—	265
Nurse —Re-Visits ... ..	—	—	—	1,370
Special Visits in connection with After-Care (paid by Dispensary Secretary) ... ..	—	—	—	350
And also by the Hon. Sec., After-Care Co. (Miss Jalland). ... ..	—	—	—	200
Patients Discharged after Injection Treatment.				
Markedly Improved ... ..	—	—	—	36
Improved ... ..	—	—	—	22
<i>In Statu Quo</i> ... ..	—	—	—	5
Worse ... ..	—	—	—	1
Contacts.				
No. of Infecting Cases ... ..	22	29	4	53
No. of Contacts Examined ... ..	20	36	57	113
No. of Contacts Re-examined ... ..	2	11	57	70
No. of Contacts found Tuberculous ... ..	1	7	6	14
No. of Contacts under suspicion of Tuberculosis ... ..	5	5	11	21
Total Attendances at Dispensary, Old and New Cases ... ..				6,909
Average Weekly Attendance ... ..				133
Surgical Dressings (56 Cases) ... ..				1,396
Number of Meetings of Tuberculosis Crusade (After-Care) Co. ... ..				3
Number of Meetings of Acting Sub-Committee ... ..				11
Number of Children sent away to Convalescent and other Homes ... ..				27
Number of Children referred to Open-Air Class ... ..				23



### Attendances at the Dispensary.

The Dispensary has been open three afternoons a week and two forenoons, with the exception of Public Holidays. New cases are seen on Mondays, Wednesdays, and Fridays, from 3 to 5 p.m., and cases for treatment are seen, by appointment, on Tuesdays and Fridays, from 9-30 a.m. to 1 p.m.

During the year 1915, 408 persons have applied to the Dispensary for advice or treatment. Of these, 153 were insured under the National Insurance Act.

**TABLE 1.**

				Males.	Females.	Both Sexes.
Insured persons	...	...	...	91	62	153
Uninsured persons	...	...	...	26	19	45
Dependants of insured	...	...	...	91	119	210
Totals	...	...	...	208	200	408

### Sex and Age Constitution.

The sex and age constitution of the 408 persons who applied at the Dispensary for advice or treatment is shown in the following table:—

**TABLE 2.**—Sex and Age constitution of Persons who applied at the Dispensary for Treatment or Advice, during the year 1915.

Ages.	1—5	6—10	11—15	16—25	26—35	36—45	46 and upwards.	Total No. of all Ages.
Males...	22	60	29	34	30	22	12	209
Females ...	16	35	23	60	36	24	5	199
Total No. of Both Sexes ...	38	95	52	94	66	46	17	408



The results of examination as to the presence or absence of Tuberculosis are shown in the following table :—

**TABLE 3.**—SEX AND AGE, CONSTITUTION AND DIAGNOSIS OF 408 PERSONS WHO APPLIED AT DISPENSARY, FROM JANUARY 1ST, 1915, TO DECEMBER 31ST, 1915.

AGES.		1	—	5	6	—	10	11	—	15	16	—	25	26	—	35	36	—	45	46 and upwards	Totals.				
SEX.		M. & F.		M. & F.		M. & F.		M. & F.		M. & F.		M. & F.		M. & F.		M. & F.		M. & F.		Totals.					
Pulmonary Tuberculosis Other Forms of Tuberculosis Non-Tubercular Total number of Both Sexes	Definite Suspected Tuberculosis Other Forms of Tuberculosis Non-Tubercular Total number of Both Sexes	...	...	—	...	1	8	...	3	2	...	3	20	...	18	12	...	11	7	...	5	4	...	1	95
		...	...	2	...	—	5	...	2	2	...	2	3	...	7	4	...	3	1	...	—	—	...	—	31
		...	...	6	...	3	12	...	6	8	...	7	1	...	7	—	...	1	—	...	2	—	...	—	53
		...	...	14	...	12	35	...	24	17	...	11	10	...	28	14	...	21	14	...	17	8	...	4	229
		...	...	28	95	52		94		66		46		17		408									

The total number of attendances of old and new patients throughout the year was 6,909.

Thus, of the 408 cases who applied, it will be seen that 148 were found to be Tuberculous, 229 Non-tuberculous, and in 31 no definite diagnosis was made, but the patients were kept under observation.

Of the 148 definite cases, 59 were insured (40 males and 19 females), and 89 uninsured.



## Visits.

During the year the Tuberculosis Officer paid 115 first visits to patients in their own homes, and 121 re-visits. The Nurse paid 265 first visits and 1,370 re-visits. The Secretary paid 350 visits, chiefly in connection with the After-Care of patients who had undergone treatment or who were attending the Dispensary. In addition, 200 visits were paid to the homes of patients by the Hon. Assistant Secretary to the Tuberculosis Crusade Committee (Miss Muriel Jalland), making a **total of 2,421 visits to the patients' homes.** These visits paid to patients in their own homes are of the greatest importance, for it is an undoubted fact that the chief sources of infection exist in the dwelling-houses of the patients. Persons who have been exposed to infection ("contacts") are thus sought out, and persuaded to submit to examination, and can thereafter be kept under observation.

Many of the advanced cases have been visited twice and three times weekly, and some of the most serious cases daily, and a good deal of actual nursing has been done. The patients have a great objection to Poor Law Institutions, and are constantly pleading to be sent to a Sanatorium or Hospital. Many of these poor patients have to lie in bed weeks and months, and see nothing but brick walls.

## "Contacts."

Where a severe or "open" case of consumption has been known to exist, an endeavour is made to examine carefully every member of the family. Any case showing doubtful signs or symptoms is kept under observation, and re-examined in three months. In this way some of our earliest and most promising cases have been secured for treatment. Cases who are "suspect" are kept under supervision for long periods, and seen from time to time.

**TABLE 4.—TABLE OF "CONTACTS."**

No. of Infecting Cases.			No. of Contacts Examined.			No. found Tuberculous.			No. Suspected.			No. of Non-Tuberculous.		
M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
22	29	4	20	36	57	1	7	6	5	5	11	14	24	40
55			113			14			21			78		



**TABLE 5.—ANALYSIS OF TRADE OR OCCUPATION IN NOTIFIED CASES INVESTIGATED.**

**Tuberculosis.—All Forms.**

No Occupation ... ..	21	Housework ... ..	28
Children at or under School		Laundry Workers ... ..	2
Age ... ..	51	School Teachers ... ..	1
Factory Workers ... ..	12	Hairdresser ... ..	1
Domestic Servants ... ..	6	Machinists ... ..	1
Soldiers ... ..	14	Trained Nurse ... ..	1
Shop Assistants ... ..	3	Milliner ... ..	1
Clerks ... ..	7	Coach Builder ... ..	1
Labourers ... ..	8	Crane Driver ... ..	1
Dressmaker ... ..	1	Lamplighter ... ..	1
Cab Driver ... ..	1	Painter ... ..	1
Fitters ... ..	2	Policeman ... ..	1
Chef ... ..	1	Woman Polisher ... ..	1
Engine Cleaners ... ..	2	Printers ... ..	2
Errand Boy ... ..	1	Stone Breaker ... ..	1
Farm Labourer ... ..	1	Stone Mason ... ..	1
General Dealers ... ..	2	Waiter... ..	1
Polisher ... ..	1		

**Tuberculin Treatment at the Dispensary.**

As a general rule, patients for Tuberculin treatment are selected with care during their stay in the Open-Air Wards at Yearsley Bridge. It has been found most satisfactory to endeavour to get the patients well on with graduated work without signs of auto-inoculation before commencing tuberculin. When tuberculin is begun, the amount of exercise is temporarily curtailed, and then gradually increased to the amount which was well borne before.

A few cases of lung tubercle and a larger number of cases of non-pulmonary tubercle are taken on directly at the Dispensary for treatment with Tuberculin, without previous observation in the Sanatorium.

During the year 104 patients were treated at the Dispensary ; 34 *were insured persons*.

Sixty-four cases were discharged after treatment, including 25 cases of non-pulmonary tubercle.

Nine cases left off treatment.

Thirty-one cases remained under treatment on December 31st, 1915.



**TABLE 6.**—GIVING DIAGNOSIS, SEX, AND AGES OF PATIENTS TREATED AND **DISCHARGED** DURING  
THE YEAR ENDING DECEMBER 31st, 1915.

AGES.	5—10		11—15		16—25		26—35		36—45		All ages.						
	M—F	Both	M—F	Both	M—F	Both	M—F	Both	M—F	Both	M—F	Both					
SEX.																	
Pulmonary Tuberculosis ...	—	1	2	4	6	6	12	18	4	6	10	3	1	4	15	24	39
Other Forms ...	4	1	3	3	6	4	9	13	1	—	1	—	—	—	12	13	25
Totals ...	—	6	—	12	—	—	—	31	—	—	11	—	—	4	27	37	64

NOTE.—31 were insured persons and 19 had previous treatment in the Open-Air Wards.



### Classification of Cases on Admission.

The Turban-Gerhardt classification of Pulmonary Tubercle has been adopted. This embraces three main stages, roughly as follows:—

Stage I. implies slight disease of one lobe of a lung, or at most half of two lobes.

Stage II. means definite infiltration of one whole lobe, or moderate disease of only half of two lobes.

Stage III. implies any condition more advanced than Stage II. or considerable cavities in the lung.

Turban's classification merely states the anatomical extent of the disease, and gives no indication of the amount of constitutional disturbance. I have, therefore, attempted to amplify it by adding the letters "s.s." and "m.s." to each of Turban's stages, the former implying "systemic disturbance slight," and the latter "systemic disturbance marked." This will be seen in the table underneath.

**TABLE 7.**—SHOWING EXTENT AND SEVERITY OF DISEASE ON ADMISSION IN 39 CASES OF **PULMONARY** TUBERCULOSIS WHO HAVE COMPLETED TREATMENT.

	Males.	Females.	Both.
Stage I. S.S. ... ..	9	13	22
Stage I. M.S. ... ..	—	1	1
Stage I.—II. S.S. ... ..	1	2	3
Stage I.—II. M.S. ... ..	1	2	3
Stage II. S.S. ... ..	—	2	2
Stage II. M.S. ... ..	3	2	5
Stage II.—III. S.S. ... ..	—	1	1
Stage II.—III. M.S. ... ..	—	—	—
Stage III. S.S. ... ..	1	—	1
Stage III. M.S. ... ..	1	—	1
Totals ... ..	16	23	39

### Classification on Discharge.

It is an exceedingly difficult thing to classify cases of Pulmonary Tuberculosis after treatment, as the disease is so protean in its character, and subject to quiescent periods and periods of exacerbation. Further, after a long and tedious course of treatment, extending over months, the personal bias of the physician must be avoided as far as possible. Considering the nature of the disease, therefore, the word "cure" must be excluded. Tubercle Bacilli have been found alive and virulent in apparently healed and cured foci in the lung.



So much depends upon the future conduct of the individual—his home surroundings, nutrition, environment in the place of work, and the incidence or otherwise of factors tending to promote the arrest or progress of the disease.

The cases treated have, therefore, been designated "*Markedly Improved*," where they have practically lost all symptoms and signs, and are well able to overtake their full everyday work.

In those marked "*Improved*" the systemic disturbance caused by the disease has been minimised or abolished, and a state of "compensation" has resulted.

In many of these the physical signs in the lungs have become modified for the better, and the progress of the disease retarded.

The patients in this category are well able to perform their work.

Those labelled "*In Statu Quo*," may have improved subjectively, but the lung condition does not share in the improvement.

Several cases who did not undergo a full course of treatment are included under this heading.

The term "worse" explains itself.

It is to be remembered that these cases have been carefully chosen as responding best to this form of treatment. This preliminary selection of cases is best done during the stay in the Sanatorium.

## RESULTS IN 64 CASES DISCHARGED AFTER TUBERCULIN TREATMENT AT THE DISPENSARY.

I.—39 Pulmonary Cases	...	...	See Table 8.
II.—25 Non-pulmonary Cases	...	...	See Table 9.

In addition, 90 cases received treatment on general medical lines at the Dispensary.



**TABLE 8.**—39 CASES OF **PULMONARY TUBERCULOSIS TREATED WITH TUBERCULIN**

(Showing immediate clinical results on discharge in relation to stage of disease on admission).

STAGE.	SEX	STAGE I.						STAGE II.						STAGE III.						TOTALS.		
		Systemic Disturbance, Slight.		Systemic Disturbance, Marked.		Both		Systemic Disturbance, Slight.		Systemic Disturbance, Marked.		Both		Systemic Disturbance, Slight.		Systemic Disturbance, Marked.		Both				
		M.	F.	M.	F.			M.	F.	M.	F.			M.	F.	M.	F.			M.	F.	M.
Markedly Improved	...	7	7	—	1	15		1	3	1	2	7		—	—	—	—	—	—	9	13	22
Improved ...	...	2	3	—	—	5		—	1	2	1	4		1	—	—	—	—	—	5	5	10
In Statu Quo	...	—	3	—	—	3		—	1	—	1	2		1	—	—	—	—	—	1	5	6
Worse	...	—	—	—	—	—		—	—	—	—	—		—	—	1	—	—	—	1	—	1
Totals	...	9	13	—	1	23		1	5	3	4	13		2	—	1	—	—	—	16	23	39
Since Died	...	—	—	—	—	—		—	—	1	—	—		—	—	1	—	—	—	—	—	—



### Methods of Diagnosis.

The methods of diagnosis adopted in the work of the Dispensary have included the following, in order of importance :—

- (a) Examination of sputum.
- (b) History of symptoms, together with definite physical signs.
- (c) Indefinite but suggestive physical signs associated with disturbances in the temperature curve and pulse rate.
- (d) Indefinite but suggestive physical signs, without febrile disturbance but with distinct evidence of sensitiveness when tested with Tuberculin.

It will be seen, therefore, that Tuberculin is used as a help to diagnosis when the other three methods have been insufficient to lead the Medical Officer to form an opinion.

In the 39 cases of lung Tuberculosis discharged after treatment, 15 had Tubercle Bacilli present in the sputum on coming to the Dispensary and 9 had lost Bacilli after treatment.

Of the 64 cases of Phthisis admitted to the Open-Air Wards, 27 had Tubercle Bacilli in the sputum (43 per cent.).

### Non-Pulmonary Cases.

Twenty-five cases of Non-pulmonary Tuberculosis have been treated and discharged, as follows :—

**TABLE 9.**

			<i>Cases.</i>	<i>Cured.</i>	<i>Improved.</i>
Scrofuloderma	...	...	2	—	2
Cervical Adenitis	...	...	17	9	8
Bone and Joints	...	...	2	2	—
Keratitis	...	...	2	1	1
Abdomen	...	...	2	2	—

Very encouraging results are obtained in cases of Cervical Adenitis, and prompt treatment with Tuberculin in these cases should do much to lessen the number of individuals seen with scarred necks and discharging sores. In suitable cases injection of the dose directly into a gland produces very satisfactory results.

When a gland softens, and Pus forms during treatment, an attempt is made to aspirate the Pus with a needle introduced through healthy skin. Injection of a few minims of Ether hastens liquefaction and aids subsequent aspiration.

Fibrous matted glands, with thick capsules, are best excised, and such cases are referred to the County Hospital.



Owing to the decreased staff at the County Hospital, and improved co-ordination between the School Clinic and the Tuberculosis Dispensary, an increasing number of cases of Non-pulmonary Tubercle have found their way to the Dispensary. Many of these cases are dressed daily by the Dispensary Nurse, and absorb an increasing amount of her time. Thus, for the latter half of 1915, 56 cases, mostly cases of discharging neck glands, received 1,396 dressings. It is to be earnestly hoped that national measures to secure a pure milk supply will be undertaken in the near future, to reduce the appalling amount of misery and disfigurement produced by these infections in childhood, apart from the more serious bone and joint lesions due largely to the same cause.

### Working Capacity.

In the 64 cases discharged, the restoration of working capacity was as follows :—

**TABLE 13.**

Working during treatment.	Working Capacity.		
	Fully restored.	Partly Restored (i.e., may have to break off again).	Not Restored.
16	37	9	2

### Shelters.

During the year thirteen shelters have been lent to patients. Eleven of these belong to the Tuberculosis Crusade Committee, and two belong to the Corporation. The shelters have been lent without any fee, and are erected in the patient's back yard by men of the Corporation Dépôt on Foss Islands.

### Dental Treatment.

The Dental Surgeon commenced visiting the Dispensary in May, 1913. Patients who show evidence of carious teeth, with oral sepsis sufficient to interfere with the proper assimilation of food, are instructed to attend on Saturday mornings at 10 a.m.

Teeth are extracted under Novocaine, and if the condition of the mouth demands a clearance, a general anæsthetic is administered in the patient's home.

Nine patients attended, and 44 extractions were made. An enormous amount of dental caries exists amongst Tuberculous patients, and in these cases with oral sepsis at all marked it is useless to attempt treatment while the patient's gastro-intestinal tract is being constantly dosed with Pus from the septic mouth.

In addition, 2 patients had clearances under a general anæsthetic.



### Temporary Open-Air Class, 11, Castlegate.

During the year 1915, 75 children were dealt with by the Open-Air School. Of these cases, 23 were sent to the School through the agency of the Tuberculosis Dispensary.

Number of Children in O.A.S. School in 1915	Boys.	Girls	Total.
In Open-Air School on December 31st, 1914 ... ..	14	12	26
Admitted during 1915 ... ..	30	19	49
Discharged during 1914 ... ..	21	10	31
In Open-Air School on December 31st, 1915 ... ..	14	11	25

A full account of the work of this School will be found in the Report of the School Medical Officer for 1915 (see pages 36-38).

### Bacteriological Work.

The Tuberculosis Officer uses the Laboratory at the Health Department in 50, Bootham, and during the year carried out the following examinations :—

		<i>T.B. Pos.</i>	<i>Negative.</i>
Sputa ... ..	306	56	250
Urines ... ..	5	—	5
Faeces ... ..	4	—	4
Pus ... ..	6	1	5
Empyæma Swab ... ..	1	—	1
Cerebro-Spinal Fluid ... ..	1	—	1
Lupus ... ..	1	—	1
Blood Films ... ..	5	—	—
Fluid from Joint ... ..	1 (Sterile)	—	—
Milk ... ..	4	—	4

As a rule, sputa are examined by the Antiformin method. In many cases films are stained by Gram's method, and an endeavour made to identify catarrhal organisms present.

In seven cases, Autogenous Vaccines were prepared from the spatum.

Examination of sputum takes a considerable time, and I am indebted to Nurse Mangham for her very valuable assistance in this work.

### AFTER-CARE OF PATIENTS AND FLOWER CRUSADE.

The Tuberculosis Crusade Committee received from the Flower Crusade funds amounting to £211 18s. 6d., in June, 1915. We are again indebted to Mr. Joseph Rowntree for defraying the whole cost of the Crusade. As in past years, Mr. Arthur Anderson acted as honorary organising secretary, and to his energy and initiative our continued success is due.

Full details of the work of the Tuberculosis Crusade Committee will be found in the Annual Report of the York Health and Housing Reform Association, under whose auspices the Committee was formed.



Appended is a summary of the work done, and the various forms of assistance given :—

### Number of Cases Considered.

The number of cases referred to the Sub-Committee were 73. Of these,  
26 children were sent to the Scarbro' Convalescent Home, for periods  
varying from one to three months, at a total cost of 8/6 each  
per week.

3 needed only the loan of a shelter ;

1 was granted a loan to be repaid in weekly instalments ;

6 were granted financial assistance ;

5 sick room appliances provided ;

5 were granted a small sum weekly towards rent ;

3 received bedsteads and bedding, on loan ;

3 were unable to avail themselves of the help offered ;

3 received clothing ;

8 were granted extension of treatment at the Scarbro' Convalescent  
Home ;

10 women were employed in sewing.

---

73

---

In addition to the above :—

Fifty-four families received milk ;

Seventy-three patients were given Hospital or Dispensary Notes.  
and numerous cases received help without reference to Committee (*e.g.*,  
coal tickets, maternity loan notes, clothing, bedding, and bedsteads, etc.).

Our best thanks are due to the Relieving Officers, Mr. Anderson, Mr. Stoker, and Mr. Kirby, for the co-operation and invaluable help which they so gladly and promptly extend to us when called upon. Without their tactful help it would be impossible to remove many difficult advanced cases to the only institution at present available for purposes of isolation, viz., the City Infirmary.



### “Following-up” of Cases.

The present condition of patients who have received treatment and been discharged from 1913 to 1915, is summarised below :—

#### CLASSIFICATION OF ULTIMATE RESULTS OF TREATMENT AT SANATORIUM OR DISPENSARY OR BOTH.

(PULMONARY CASES ONLY—ALL STAGES).

A.—Patients in whose discharges Tubercle Bacilli have at some time been demonstrated :—

MALES.						FEMALES.					
Year of Discharge	Number Discharged.	Condition in 1916 on May 31st.				Year of Discharge.	Number Discharged.	Condition in 1916 on May 31st.			
		Full Work.	Alive.	Dead.	Lost sight of.			Full Work.	Alive.	Dead.	Lost sight of.
1913	15	8	—	5	2	1913	15	2	3	10	—
1914	19	7	3	7	2	1914	13	3	—	6	4
1915	18	7	2	7	2	1915	13	7	1	4	1

B.—Without Tubercle Bacilli being found in discharges :—

1913	26	21	3	1	1	1913	37	20	9	2	6
1914	17	16	—	—	1	1914	29	28	1	—	—
1915	18	14	2	1	1	1915	31	27	2	1	1

TABLE SHOWING ABOVE RESULTS OF TREATMENT IN BOTH SEXES AND ALL CLASSES OF CASE.

	Number Discharged.	Full Work.	Alive.	Dead.	Lost sight of.	* Percentage Alive on May 31, 1916.
1913 ... ..	93	51	15	18	9	78%
1914 ... ..	78	64	4	13	1	95%
1915 ... ..	80	55	7	13	5	82%

\* In working out the percentages alive the numbers lost sight of are deducted from the total cases discharged each year.



