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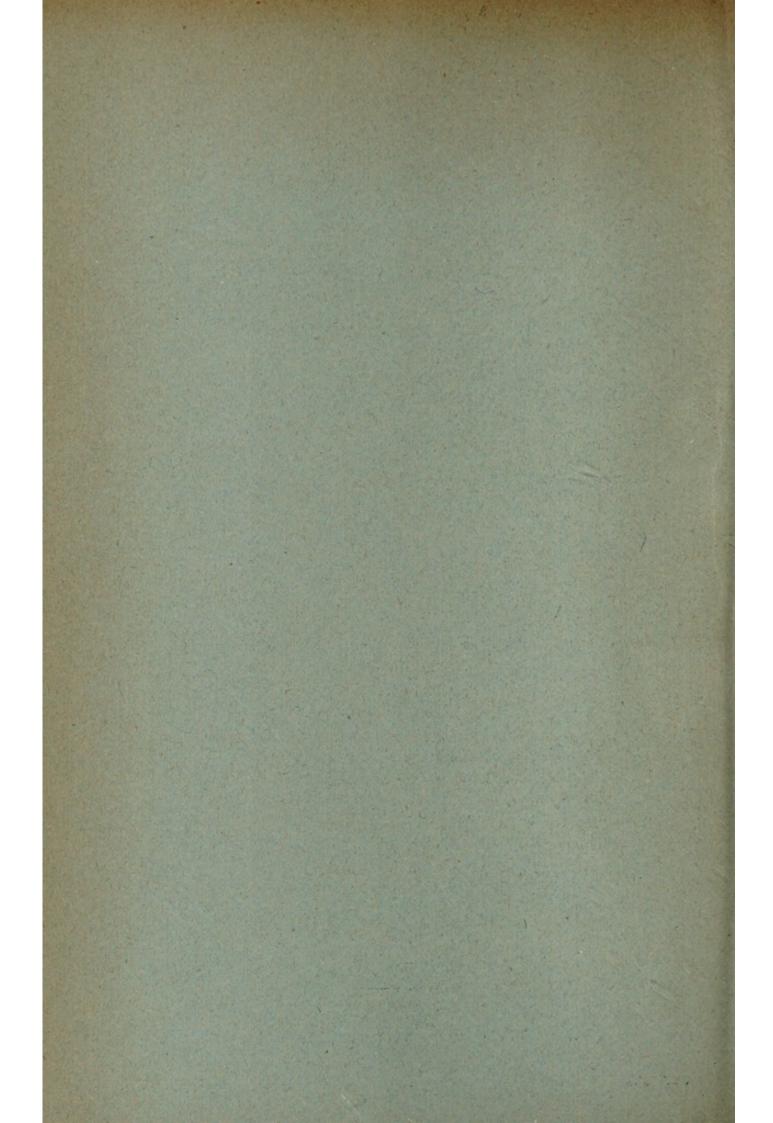
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With Dr. BROWNING'S COMPLIMENTS. ENLARGED BOROUGH OF Weynouth & Melcombe Regis. NCIL. RT DFFICER O Edin., J., FFICE Britain ; ficers of Health f Trade; of the Weymouth acil of Weymouth and Melcombe Regis. WEYMOUTH : R. WATTS, BELLE VUE PRINTING WORKS.







Weynouth & Melcombe Regis.

URBAN DISTRICT COUNCIL.

FIFTH ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1895.

SUBMITTED BY

B. BROWNING, M.D., D.P.F., Edin.,

Staff-Surgeon, R.N.; M.R.C.S., England; L.R.C.P., London; Fellow of the Chemical Society; Fellow of the Sanitary Institute of Great Britain; Fellow of the Incorporated Society of Medical Officers of Health (on the Council) Southern Branch; Admiralty Surgeon and Agent; Medical Inspector of Seamen to the Board of Trade; Consulting Medical Officer to the Watch Committee of the Weymouth Town Council; Medical Officer to the Post Office; Certifying Factory Surgeon; and Medical Officer to the above Urban District Council of Weymouth

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TO THE

URBAN DISTRICT COUNCIL

OF

WEYMOUTH & MELCOMBE REGIS

(AS EXTENDED 1895.)

GENTLEMEN,

For the *fifth* time I have the privilege of placing my annual report in your hands, a privilege which I value more highly, since I feel sure that opportunity will now be afforded me, by your direction and sanction, of dealing with certain defects of sanitation which previously (although the hygiene of our ancient Borough was injuriously affected thereby), you were unable to correct, seeing that they were beyond your control as a public body.

Owing to the recent extension of the Borough, this unfortunate and detrimental position is now a thing of the past, and great benefit has already resulted from the change, as will be presently demonstrated.

The time cannot be far distant when, in the universal interest of the country at large, there will be but one Code of Sanitary Law in England, affecting all districts, Urban and Rural, equally, such as is now enforced in most other civilized countries, notably Scandinavia, Germany, Austria, and France, and great will be the advantages derived from this unification, even though in some places the reign of "laissez faire"—*i.e.* "go as you please," be abolished. I have, as usual, to give you :--

- 1. The Vital Statistics of 1895.
- 2. Reports on General and Special Sanitary Work therein performed.
- 3. The past year's Sanitary History.
- 4. Comments on matters requiring your particular attention, whilst safe-guarding the District's Public Health.

1.—In speaking of Vital Statistics, I may remind you that these are prepared under conditions of some little difficulty, owing to the largely fluctuating numbers of the population in the past year, and the Borough augmentation, the most important fact in our history since the incorporation of old Weymouth and Melcombe Regis in the 16th Century, and the foundation of our reputation as a watering place and health resort by George III. in the 18th. It is not easy to accurately estimate the highest figure of our annual population, owing to the numerous visitors here during the spring, summer, autumn, and late winter, and the temporary presence of the large naval and military forces from our own fleet and army (regular and volunteer), with which we are annually favoured, and of those foreign squadrons and traders who are so often attracted here by the accommodation we can offer them.

The stationary period of Weymouth's statistics, fossilised for so many years since the Georgian epoch, is now happily terminated. Not only the "floating" but the "permanent" population will shortly increase by leaps and bounds, and the speedy arrival of some thirty Battleships, whose headquarters will be always in our waters, the immediate enlargement of our Military Port and Dockyard, and the appointment of an Admiral in command here, with his staff, retinue, and personnel of the augmented force, must greatly add to our constant residents, both in Weymouth and Wyke Regis Wards, and as these new-comers will all be either in easy circumstances, or good work, we may confidently expect that each future report will show an *increasing population*, and a *diminishing death-roll*.

This last, due to the improved health-precautions and sanitary regime, which are your pride as well as duty to carry out, cannot fail to place "Greater Weymouth" first in the choice of South English Health Resorts.

1.—The Vital Statistics are as follows :--

NUMBER OF BIRTHS AND DEATHS.

From the 1st January to the 31st October, 302 Births and 218 Deaths were registered in the "Old Borough," prior to its Municipal enlargement, which was practically enforced on Nov. 1st; the actual increase of population during this period was therefore 84. From the 1st Nov. to the 31st December 76 Births and 42 Deaths were registered in the "New Borough," this, as shown by the appended photograph, now embraces a large acreage formerly in the Rural Sanitary District of Weymouth, the enlarged Borough comprising 1616.4 acres (the old Borough being formerly not more than 763.4 acres, of which 311 were tidal waters, which have not been increased in the new area.) By this extention over 5,000 persons have been permanently added to the new Borough or "Greater Weymouth," as it is sometimes colloquially termed, and the actual increase of population in these two months is 34.

You will see, therefore, that if this new rate continues the same for twelve months from November last, our actual increase will be 204 per annum, as against a probable 100.8 had the "ancient landmarks" been retained.

Births and Deaths in Public Institutions.—There were no births in any of these, but 38 deaths were reported from them. Details are given in Table K 23a appended.

Deaths of Weymouth Residents outside the Borough, and non-Residents within it.—I have failed to trace the death of any regular inhabitant of Weymouth outside the Borough, and you are aware that in a provincial Urban District, such losses are usually known to several people.

40 non-residents died here, all of whom had visited us from other localities for various reasons, health on the one hand, and pauperism on the other being the chief.

Deaths of Octogenarians and Nonogenarians.—As 70 years is the allotted age of man in Holy Writ, I have not taken credit for those dying between 60 and 70, but I may say that in the old Borough from January 1st to October 31st, 22 deaths of persons over 80 years and under 100 were registered; 19 (8 men and 11 women) between 80 and 90 years of age with a mean average of 83.4 years, the oldest being 88, and three Deaths were recorded of persons more than 90 years of age, their average age being 92.3 years, and the oldest attaining 94.5 years.

In the enlarged Borough from November 1st to December 31st, three octogenarians' deaths, in all, were noted ; their average age was 83, the oldest attaining 87.3 years.

I need not remind you, as additional proof of the salubrity of Weymouth as a residence, of the many "grand old men" in their "eighties," whom we have known of late years, some of whom are happily still spared to aid us with their matured wisdom in public life. The change of longevity in Weymouth is therefore 30.5 years in persons of 65, beyond the average of all England.

Estimated Population up to middle of 1895.-If this be calculated by the method indicated by the Registrar-General, it would be 15.939. but owing to our extraordinarily large "floating population" in that time, brought to us by the visits of the Yeomanry, the Volunteers, the Training Squadron, the Channel Fleet, and the Italian Squadrons, with some Russian and other foreign Cruisers and foreign Merchant ships, and of visitors from all parts, these figures, as I have pointed out on former occasions, are far below the actual number I am entitled to consider, and I should be within the mark were I to raise them by quite 12,000, making my population more than 27,000. Indeed Messrs. Bramwell and Harris, more than two years since, provided for a permanent population of 25,000 in their drainage scheme, whilst ignoring the factor of the maritime visitors, though these last spend much time on shore, and so augment the entire number of our inhabitants, but fortunately do not increase our death rate in an appreciable degree.

Birth and Death Rates.—The Birth Rate in "Old Weymouth" was 22.73 per 1,000 in the ten months, an increase of 1.622 per 1,000 on that of last year, probably due to the same causes. The Birth Rate for "Greater Weymouth" since its active enlargement, was 21.3 per 1,000. Naturally this last cannot be compared with previous records, "the bridge not being built, sirs."

The Death Rate, like that of all England, is in excess of 1894, but although of necessity calculated by the factors of the stationary population (to avoid carping criticisms by people not conversant with the peculiarities of the locality popularly known as "Weymouth" and with its mixed Registration and Poor Law Districts, three Sanitary Authorities, and enormously varying "Floating Population"), it may at first appear larger than that of the two past years. This admits of satisfactory explanation, and by no means affects the constant and high reputation of "Healthy Weymouth" as a desirable residence for all, whether in good health or valetudinarians, for whilst if thus worked out, the gross annual uncorrected proportional death rate of "Old Weymouth" would have been 16.4 per 1,000, the corresponding uncorrected death rate of the "extended Borough" with a population computed by some other of your advisers as 21,000, (no allowance being made for the Floating Population), is only 11.9 per 1,000, and these two rates, when corrected by the deduction suggested by the Local Government Board in their Tables, are reduced respectively to 13.6 and 11.18 per 1,000, which last may be quoted as our reliable rate of mortality for 1895.

I have not yet succeeded in obtaining the published death rates of Dorset or the neighbouring watering places for comparison with this, but I have reason to think that ours will contrast favourably with most, if not all of them, the more so, that our death register is chiefly made up by entries of very advanced ages, and not of young lives, and I need not remind you that this is the true test of the healthiness of any locality. Infant Mortality.—Up to the 31st October, 33 Infants under one year old died in the old Borough, which is a proportion of 109.2 Deaths to every 1,000 Births, or if expressed as a percentage of the total Deaths, equals 15.1 per cent. In the remaining period of 1895, 6 Infants under one year old, died; in the new Borough this appears as 78.9 Deaths to 1,000 Births, or as expressed in percentage of total Deaths is 13.2 per cent.

Child Death Rate.—This I have, as previously, calculated by eliminating the "Infant Mortality" from the "Deaths under 5 years."

In the old Borough, it was 0.065 per 1,000 of population during the first ten months of 1895. In the "New Borough" from then till the completion of the year, it was 0.285 per 1,000 for that limited period. This apparent discrepancy is intelligible on reflecting that the old people whose families are grown up, usually end their days in the old Borough, and this year have somewhat raised our general death rate : but that in the extended area of the New Borough, where nearly all the residents have young children, these latter are more likely to succumb to infantile and zymotic diseases than their parents, who having survived these perils, may be classed as "seasoned soldiers."

Zymotic Death Rate.—15 deaths were registered in the "Old Borough" term, one of Typhoid, (this a stranger, who had only been 5 days here and came down ill from London), 1 from puerperal fever, 1 from measles, and 12 from so called "diarrhæa," almost entirely infantile. due to hot weather and little medical attendance until near the termination of the case. The "Old Borough" Zymotic Rate was 1.12 per 1,000, but in the New Borough period there was but one entry, which, without medical evidence, was found by a Coroner's Inquest as "Diarrhœa" — this gave a Zymotic Death Rate of 0.285 per 1,000 per annum.

Violent Deaths.—These were 11 in all, 3 due to suicide, 2 by drowning, 1 by cut-throat, the rest from various accidents.

Inquest Cases and Coroner's Inquiries.—Those were 20 in all, including Inquests, &c, on the above Violent Deaths, and some others which for want of previous medical attendance, could not be certified in in the ordinary manner.

General and Special Sanitary Work of the Year, &c.-As usual, the Inspection of Bakehouses and Slaughterhouses in the Old Borough has been made by myself and the Inspector of Nuisances, and to some extent, so far as yet practicable, in the New Borough. The requirements of the Bakehouses Regulations Act and the Factory Act appear to have been complied with as to the cleanliness in Bakehouses. The special requirements of the Factory Act as to Bakehouses, which as your Medical Officer of Health, it is my duty to see enforced, have not yet been in all cases attended to, but as the fault seems to be more due to ignorance than wilful intention to defraud, I am taking measures to obviate this evil without inflicting punishment on the culprits by a detailed report or magisterial summons, to which I can always resort if necessary.

As for the private *Slaughterhouses*, they are and will be an eyesore in most cases everywhere, both here and in other places, until public Abattoirs are compulsory in towns like Weymouth.

The hour for their total extinction is fast approaching, as it has already reached many other time-honoured "vested interest" nuisances.

Cow-houses, Offensive Trade Premises, Common Lodging Houses, and Piggeries.—Owing to the enlargement of the Borough, there are some more of these than in last year, though the worst Offensive Trade Nuisance has extinguished itself. Special bye-laws are urgently necessary to deal with them, so as to avoid unnecessary publicity and injury to owners. I shall shortly furnish a report on this subject for the consideration of the whole Council in Committee.

Public and Private Schools.—An Occasional visit has been paid to many of these whenever advisable, and as usual, my suggestions were amicably received and attended to. I have not found it necessary to close any school owing to infectious disease amongst the pupils.

Legal Proceedings.—None have been instituted by your Officers on account of the various Sanitary Acts, though a flagrant violation of the Weymouth Improvement Act had to be passed over owing to our legal interregnum.

Routine Sanitary Measures.—I will now give details of the routine carried out according to paragraphs No. 1 to 13 of my instructions, with the efficient help of the Inspector of Nuisances, Mr. Joseph Keeley :—

Complaints received and attended to 125 Number of Houses and Premises Inspected, including Factory Inspections and 23 houses where Infectious Disease was reported.... 175 Orders for Sanitary Improvements issued and complied with 12

Orders for Sanitary Impro	vemen	its issue	ed and e	complie	d with		12
Ditto do do	d	lo a	and not	complie	ed with		3
Houses and Premises clea	ned an	d repai	red, &c				37
Houses disinfected							23
Bedding disinfected (lots)							13
Bakehouses inspected							18
Cowhouses inspected							9
Slaughterhouses inspected							13
Milkshops and Dairies ins	pected						57
Offensive Trades inspected	1						5
Common Lodging Houses	inspec	ted					3
Persons removed to Hospi	tal (Pe	ort San	itary)				9
Dust Complaints received	and at	ttended	to				15
Letters received on variou	s Sani	tary M	atters				179
Written replies to same se							164
Houses reported as unfit for	or Hur	nan Ha	abitation	n or as	Obstruc	•	
tive Dwellings							None
Special Reports by M.O.I	I. to (Jouncil	in Com	mittee			1

In all our dealings with those with whom we were compelled by necessity to interfere, we have as hitherto endeavoured to

> "Be to their faults a little kind" "And to their virtues never blind"

so as to avoid, if possible, unmerited odium in the discharge of our sometimes unpleasant duties.

Special Sanitary Work.—Again, as in last year, the general health of the Borough has been so good, that beyond co-operating with the Mayor and my Colleagues during the visits of the Yeomanry, Volunteers, and the Channel and Italian Fleets during the summer, very little more than ordinary routine work was demanded from me until the beginning of November, when, owing to an outbreak of Typhoid Fever in the "Rural District of Weymouth," I had to take prompt measures to prevent a probable epidemic within the Borough, as detailed below :—

Questions referred to Committees last Year.—Owing to the recent formation of Greater Weymouth, these have been postponed until the present time, and are under your consideration. I again beg that they may be promptly dealt with.

Representations as to Insanitary Houses.—Those which I have from time to time reported to you remain in the same condition as before. Some improvement has been temporarily made in a few instances, but owing to the habits of the social substratum, by whom they are again occupied after partial cleansing, &c., they soon resume their pristine condition.

Nothing short of a general improvement scheme, under section 4 of the Housing of the Working Classes Act, such as has been lately suggested and adopted in Southampton and elsewhere, would meet the present difficulties in dealing with them, and I am of opinion that, pending the completion of important measures of sanitation which you have decided to carry out, the time is not yet arrived for me to propose it with a prospect of immediate adoption, though I have already sketched the broad outlines of such a scheme which, I think, will commend itself to your consideration, particularly if I should have the privilege of personally demonstrating its necessity to all or any of you by a visit to the spots indicated.

Sanitary History of the Year.—The year just passed has not, as I have previously stated, given us quite so bright a record of freedom from notifiable disease, and deaths from preventable causes, as the one preceding it, but in comparison with the mortality elsewhere, we have held our own. The highest number of deaths recorded in any one month was 27 in March, April and October respectively; the lowest, 15 in

July. Summer and Autumnal Diarrhœa, owing to the great heat, chiefly caused most deaths amongst the young, and impaired vital power and chest affections during the cold weather, the fatalities amongst the old. The largest amount of general sickness which came to my knowledge was observed in March and May.

February was the coldest month of the year, and September the hottest.

With no wish to traverse the report of a valuable Public Institution just published, I may say that its statements and mine present the gold and silver side of the shield; that the experience of the Hospital referred to is gained only from cases deemed "Suitable for Hospital Treatment" after special examination, and drawn from all South Dorset, whilst I have to report all deaths amongst those who die at home, or what passes for such, without the great and fully recognised advantages which they would receive in School Street, and that, therefore, any apparent contradiction in the reports annually presented to yourselves and the subscribers to this Charity, is susceptible of the fullest explanation and agreement, seeing that I have to eliminate all "*Uitlander*" elements from your statistics, while it is the interest of the Hospital not to hide its light under a bushel, and so, unintentionally doubtless, to give the public an incorrect idea of the sanitary condition of our Watering Place, making this inferior to what it really is.

The Vital Statistics I have given you might have been calculated more favourably if our 4,275 inhabited houses were taken as their groundwork, but I prefer to continue my former system until the population of the extended borough can be more definitely computed.

Beyond the inevitable "decay of nature," aggravated by the unusually cold weather in the spring, and the excessive heat following it, I thought I should have, as in last year, no great sickness to report up to the 31st October. Only four cases of Scarlet Fever, none fatal and probably imported into a school from outside the town, were noted, with two of Diphtheria, both successfully treated by the new remedy, "antitoxin," and rapidly cured in consequence, and three of Typhoid Fever (all sent down here ill from a distance, one alone of which was fatal), were reported to me, but then we had an unfortunate outbreak of Typhoid Fever from a Rural Neighbouring District, due to infected milk, which I was powerless to deal with, as I at once informed you, until the enemy was within our gates, and I had sent, in rapid succession, five cases to the Port Sanitary Hospital, and received intimation of four more, the whole of these ultimately recovering,the hospital cases owing their cure to the great skill and attention of Dr. Simpson and his colleague. I need not repeat the special report I then made you, which was unanimously adopted and acted on, but I

now say that the evil referred to is "scotched but not killed," and may at any time reappear here unless your rural neighbours are compelled to do their duty, or until you simply "boycott" them, as you probably may have to do.

The Urban District at the end of the year was, to my certain knowledge, free from all infectious disease, and in November and December had no more ailments worth comment.

New Sanitary Acts.—The new Act which now particularly affects Urban Sanitary Authorities is without doubt the Factory and Workshop Act, 1895, which adds enormously to the official duties of the Medical Officer of Health, though, as sometimes happens in other changes of front, he is expected to undertake them without additional remuneration, but with the certainty of severe official censure should he be remiss in carrying them out.

"Overcrowding."—Section 1 of the new Act directs that a Workshop shall be deemed "overcrowded" if such person therein employed has not at least 250 cubic feet of space for himself ordinarily, or 400 whilst doing overtime. The duty of enforcing this regulation devolves upon the Medical Officer of Health, who has to visit these Workshops from time to time and report accordingly to the Factory Inspector.

"Notice as to Nuisances, &c., Fire Escapes, and Employés in Workshops, and Laundries."-Section 4 requires Factories, Medical Officer of Health, the on the requisition of the Factory Inspector to his Urban Authority, to take such measures as may be necessary to abate certain nuisances, not otherwise abateable, and to act as an Inspector of Factories, or as an expert witness, within a month of the date of such requisition, failing which proceedings will be taken against the Urban Authority. The Medical Officer of Health is required also to act as an Inspector of Factories with regard to Fire Escapes, Laundries, Bakehouses, Sanitary Conveniences, and other matters connected with the regulation of these places, vide Sections 3, 10, 22, 27, 6, 35, & 41.

The Urban District Council is responsible for his doing these extra duties, but no one is responsible for any additional salary to him.

OUTCOME OF MY RECOMMENDATIONS TO YOU

LAST YEAR.

Owing to the extinction of the old constituency of Weymouth and the advent of the new, these have not yet been carried out, beyond improving the Mortuary and providing a shelter for the disinfector, both of these steps greatly benefiting the Public Borough Service since their adoption.

COMMENTS ON TABLES A & B.

These have been carefully prepared under unusual difficulties, but will be found strictly correct, and I trust satisfactory. I may say that the boon of an Infectious Hospital for the town can never be more appreciated than it was in November last, and without it we might have shared the late fate of some of our neighbours.

4. MATTERS FOR YOUR SPECIAL CONSIDERATION. (a.) Climatology of Weymouth.

The following table has been compiled by Mr J. R. Eyles, F. R. Met. S., thanks to whose courteousy and your liberality in providing suitable instruments and notably a sunshine recorder for meteorological observations, I am in a position to submit these satisfactory statistics :---

								No. of	No. of
				Sun-	Mean	Mean	Humi-	Rainy	Sunless
1895	Max.	Min.	Rain	shine	Temp.	Range	dity	Days	Days.
Jan.	40.4	31.7	3.90	99.100	36.1	8.7	85	17	9
Feb.	36.0	26.0	0.02	105.00	31.4	9.2	75	1	7
March.	47.8	37.3	2.36	135.00	42.5	10.5	86	15	9
April.	52.5	42.3	2.35	157.25	47.4	10.2	84	13	4
May.	61.4	47.0	0.32	284.00	54.2	14.4	76	4	3
June.	66.9	52.6	1.65	269.25	59.2	14.3	73	9	0
July.	65.8	54.6	2.34	218.25	60.2	11.2	81	12	4
Aug.	66.3	56.3	2.19	257.25	61.3	10.0	80	15	2
Sept.	69.2	55.5	0.27	226.75	62.3	13.7	80	3	3
Oct.	,54.6	44.3	2.61	101.50	49.5	10.3	82	14	6
Nov.	54.4	45.8	5.38	62.25	50.1	8.6	86	24	13
Dec.	48.1	39.4	3.99	37.25	43.7	8.7	84	24	16
			Total						
Averag			inche						
for	55.3	44.5	27.38	1953.75	49.0	10.8	81	151	76
Year									

You will see, therefore, that Weymouth holds first rank among the leading health resorts of the South of England as regards geniality of climate, even temperature, dryness, freedom from fog and predominance in sunshine, — the much-vaunted Bournemouth and Torquay being inferior to us in these advantages, and our death-rate, spite of our large share of invalid visitors, being less than theirs.

What is to hinder our being the Queen of the South ?

(b.) Problems of Sewer Gas Treatment.

Last year I mentioned to you some different ways in which this somewhat difficult problem was being attempted to be solved, and suggested that we might profit by the experience of our neighbours.

We have since had this opportunity, and whilst repeating what I then said as to various methods of procedure for rendering sewage gas innocuous, I may point out to you that from the experience of the past year, the palm of merit rests with the employment of Hermittine Fluid for the purpose referred to in such a town as this, having regard to efficiency, economy, and eminent adaptability. This plan is now being most satisfactorily carried out at Ipswich, Lytham, the Royal Hospital at Netley, and at Newport (Isle of Wight), though in this last only as a temporary measure, pending the completion of certain drainage works. It has been finally adopted in the first three places as a system of complete sterilisation of effluent sewage at a nominal charge, usually one halfpenny per head per annum of population, and is being tried elsewhere, the fluid being not produced locally, but sent from a distance as a commercial article.

I trust shortly to have a practical opportunity afforded me of showing the Committee this at Westham, and to give them some further details too long for mentioning here.

(c) Lessons to be learnt from the late outbreaks in Chickerell (Weymouth Rural District), by all Urban Authorities.

1.—The absolute necessity of keeping a watchful eye on their neighbouring Rural Authorities, to see that neither the gatheringground of their water supply is allowed to be polluted in any way, nor that the dairy products in their vicinity be permitted to enter the urban district unless their Health Officer is satisfied that no appreciable cause of communicable disease exists within a specified zone, which is to be determined on its merits.

2.—For this purpose it must be made imperative (and Urban Councils can do so in more ways than one) on the rural authorities, to notify "forthwith" to their urban neighbours all cases and outbreaks of infectious disease, as they now do to the Local Government Board and County Council,—the word "forthwith" meaning not a fortnight or more after the occurrence, as is usual whilst the case is being treated, but an *immediate* report to the urban and rural Medical Officers of Health supposing that the practitioner is certain or somewhat doubtful as to the exact nature of the complaint, so that the responsibility of removal from, or detention at home may be shared by two or more medical practitioners, instead of, as now, being thrown on the shoulders of one only, to his manifest disadvantage.

3.—The powers of the Urban District Officers should be largely increased by the efforts of their Council. At present they must sit out, as I have lately done, with folded hands powerless to interfere until I had a case or cases in our own district.

A rural population, small generally, though in a large area, has no right to imperil the well-being of an urban population, certain to be larger in numbers and taxation, if with a less area, because the former, through their Parish Council and District Rural Council (the latter often practically a duplication of the former) objects to being hindered from fatally injuring their urban neighbours (and, if they knew it, subsequently themselves) through non-compliance with the letter and spirit of the many useful Sanitary Acts which have been passed since 1875, and which should be the universal law of the land in every district.

4.-It is imperative on Urban Authorities when receiving and considering reports furnished them by water analysts (whether public or private), as to the purity of a water supply which has been stated to be polluted and likely to be injurious to health, not to accept any statement that such water is of "good potable quality," unless that assertion is specially stated to be based upon a bacteriological, as well as a chemical analysis of the suspected water. Certain well waters near here which had been lately pronounced pure, on the ground of chemical analysis only, have been since proved on undoubted testimony, to be loaded with the same sort of bacillus, the bacillus "coli communis" O and bacillus "fluorescens putidus" which were found by the Government Bacteriologists existing in the water supplied to Worthing and Newport, just after this said water had been pronounced "chemically pure" by some of the most eminent London Analysts, and the plague was then raging in both these towns, brought on by the use of this chemically pure water.

5.—Lastly, this most important lesson of all must be learnt by both Urban and Rural Authorities, the *absolute necessity of co-operation in* general sanitation. Whilst dwellers in urban districts have as much moral, if not legal right, everywhere, to be protected from the sale of infected milk or infected water, as they now enjoy with regard to the sale of diseased meat or the presence of offensive trades in their midst, so likewise our rural friends and neighbours should not be sufferers from the scavenging and house refuse, which is too often recklessly deposited by town contractors in country places, where it cannot be otherwise than a nuisance and injurious to health, nor should offensive trades, such as I have referred to, be permitted to be a nuisance anywhere.

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These desirable results can easily be attained by a rapproachmentbetween authorities whose interests are practically identical, and I think that such will take place between the Weymouth Urban and Weymouth Rural Sanitary Districts.

I am sure, Gentlemen, that you will not fail to appreciate the somewhat stiff task with which your Health Officer has in the first year of the existence of the new Borough to grapple, whilst endeavouring to carry out his onerous duty in a large constituency, a large part of which has been practically, in Sanitary matters till now, a law unto itself, and whose idea of its obligations as urban residents is practically *nil*, and that I may rely upon your moral and very material support, such as you have already afforded to some of my colleagues, in endeavouring to perform my allotted task thoroughly, and to your satisfaction.

I am, Gentlemen,

Your very obedient Servant,

B. BROWNING, M.D., D.P.H.,

Medical Officer of Health.

16, Royal Terrace, Weymouth, February 14th, 1896.

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ames of Localities adopted for the	M	lortali	ty fro subjoi	m all ned A	cause ages.	es, at	t.		1			Mort	ality f	from s	ubjoin	ed car	uses, d	listing	uishir	ng De	aths o	f Chik	iren ui	nder I	Five Ye	ears of	Age.			
purpose of these Statistics ; Public		year.	. 5.	r 15.	r25.	r 65.	rds.		1	2	3	4	5		7		9	10	11	12	13	14	15	16	17	18	19	20	21	F
Institutions being shown as separate localities. Notamus for Population and Births are in Table B. (a)	At all Ages. (b)	© Under I ye	(2) 1 and under	(a) 5 and under 15	S 15and under25	S 25and under 65	S 65and upwards	(i)	Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas.	Measles.	Whooping Cough.	Diarrhea and Dysentery.	Rheumatic Fever.	Phthisis.	Bronchitis, Pneumonia, and Pleurisy.	Heart Disease.	•	Injuries.	All other Diseases.	то
Weymouth	73	15	1	3	4	23	27	Under 5 5 upwds.												1		4			1 11			2	10 30	-
Melcombe Regis		10	2	1	4	24	18	Under 5 5 upwds.						 1								:3 2		6 3	$11 \\ 1 \\ 10$	。 11		1 2	30 7 20	
Radipole	22	3			1	7	11	Under 5 5 upwds.																2	1 6				10	
Wyke Regis	3					1	2	Under 5 5 upwds.																						
Military Hospital								Under 5 5 upwds.																						
Workhouse Hospital	24				2	8	14	Under 5 5 upwds.																		4			 15	
toyal Hospital	6			2	2	2		Under 5 5 upwds.																				3	2	
"he Park	29	5	5	2	1	6	10	Under 5 5 upwds.														2		···: 1	3	~~2		ĩ	5 12	
Sanatorium	1					1		Under 5 5 upwds.										***											 1	
Eye Infirmary	1						1	Under 5 5 upwds.																					 1	
Totals	218	33 T	8	8	14	72	83	Under 5 5 upwds. ave also to		 	 		 	 1		 				1		11		 16	6 31			1 8	22 93	1
			ne s	abjoi	neu i	Tum	Jers II	ave also to	1	ken i		l		Judg	ing c		- abo	ve re	corus	5 01 1	l	Inty.		_						_
Deaths occuring outside the district among persons be- longing thereto								Under 5 5 upwds.																						
Deaths occuring within the district among persons not belonging thereto	37	2	6	2	4	21	2	Under 5 5 upwds.														2		7					5 22	2.0
In r	ecordin	g the	e fact	s une	ler ti			headings of Area in A Populatio Death / G Rates. (In	ion o	of the	Dist	riet t	o wh	ich t	his R	tetur 763	n rel:		e not		BRC					D P I	H			



ames of Localities adopted for the	M	ortalit	y from	m all ned A	cause ges.	s, at		1	1			Mort	ality f	rom st	ıbjoin	ed car	ises, d	listing	uishin	ig De	ths of	Child	iren ur	nder F	Tive Ye	ars of	Age.			
purpose of these Statistics ; Public Institutions being shown as		year.	er 5.	er 15.	under25.	under 65.	upwards.		1	2	3	1	5		7 EVERS		9	10	11	12	13		15	16	17	18	19	20	21	-
Separate localities. Solumns for Population and Births are in Tuble B. (a)	At all Ages. (b)	© Under 1 y	2. 1 and under	(a) 5 and under 15	S 15and und	S 25 and und	3. 65andupw	(i)	Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Typhus.	Enterie or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas.	Measles.	- Whooping Cough.	Diarrhea and Dysentery.	Rheumatic Fever.	Phthisis.	Pacunonia, and Plearisy.	Heart Disease.	*	Injuries.	All other Diseases.	To
Weymouth	10	3		2		3	2	Under 5 5 upwds.																		 1			3	
Melcombe (South)	13			3	1	4	5	Under 5 5 upwds.																2			***			
Melcombe (North)	11	1	1	2	2	3	2	Under 5 5 upwds.															***				***	2	24	
								Under 5																						
Vyke Regis	2	2						5 upwds. Under 5																***					2	
filitary Hospital								5 upwds. Under 5																						
Vorkhouse Hospital	2						2	5 upwds. Under 5																	2					
toyal Hospital	1				1			5 upwds.																					1	
ye Infirmary	1						1	Under 5 5 upwds.									***												1	
Sanatorium	2				1	1		Under 5 5 upwds.																					2	
TOTALS	42	6	1	7	5	11	12	Under 5 5 upwds.																					5 22	
		1	The s	ubjo	ined	numł	bers h	ave also to	be ta	ken	into	accou	nt in	judg	ing o	of the	abo	ve re	cord	s of i	morta	ality.								
Deaths occuring outside the district among persons be- longing thereto								Under 5 5 upwds.																						
eaths occuring within the																														
district among persons not belonging thereto	3					2		Under 5 5 upwds.																1 ····					2	

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

Dated, February 14th, 1896.

B. BROWNING, M.D., D.P.H., Medical Officer of Health.



Names of Localities adopted for the		on at all res.	Births	and the second second se	Net	w Case	es of f	Sickne	ss in e he Me	each La dical C	ocality Micer	of He	alth.	o the l	knowl	edge	of	Nu	imber	of s	uch (Cases es for	Remo	wed f	rom t in Isola	heir H	fomes Hospit	in th	e seve
purpose of these Statistics ; Public Institutions being shown as		Esti	d Bi	Aged	1	2	3	4	5	6 F	7 EVERS	8	9	10	11	12	13	1	2	3	14	5	6	7 PEVER	8	9	10	11	12
separate localities.	Census 1891. (b)	mated of 1895. (c)	Registered	under 5 or over 5. (e)	Smallpox.	Scarlatina.	Diphtheria	Membranous Croup.	Typhus.	Enteric or Typhoid.	ment	Relapsing.	Puerperal.	Cholera.	Erysipelas.			Smallpox.	Scarlatina.	Diphtheria	Membranous Croup.	Typhus.	Enterie or Typhoid.	Continued	Relapsing.	Puerperal.	Cholera.	Erysipelas.	
Weymouth	3200	3479	69	Under 5 5 upwds.			1			ï													 1						
Melcombe Regis	7031	7066	133	Under 5 5 upwds.		3				6													4					•••	
Radipole	1200	1337	26	Under 5 5 upwds.																									
The Park	2320	2378	47	Under 5 5 upwds.		1																				•••			
Wyke Regis	1374	1409	27	Under 5 5 upwds.																								•••	
Military Hospital	12	12		Under 5 5 upwds.																									
Workhouse Hospital	169	185		Under 5 5 upwds.																									
Royal Hospital	24	24		Under 5 5 upwds.																									
Eye Infirmary	19	19		Under 5 5 upwds.																									
and the second	Sec.	1 2000	1000	Under 5																									

State here whether "Notification of Infectious Disease" is compulsory in the District (Yes.) Since when? (May, 1888). Besides the above-mentioned Diseases, insert in the columns with blank headings the names of any that are notifiable in the District, and fill the columns accordingly. State here the name of the Isolation Hospital used by the sick of the District. Mark (H) the Locality in which such Hospital is situated ; and if not within the District, state where it is situated (Port Sanitary Hospital, Wyke, without the District).

B. BROWNING, M.D., D.P.H., Medical Officer of Health.



K2 11 (B) TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during November and December, 1805, in the Weymouth Urban District Council, classified according to Diseases, Ages, and Localities.

Names of Localities adopted for the	Populatio	on at all es.	Births		Nev	v Cas	es of a	Sickne tl	ss in e he Me	ach L dical 0	ocality Officer	y, com	ing t dth.	o the	know]	edge	of	Nu	umber	of si Lo	uch C calitie	ases is for	Remov	ved finent i	rom ti n Isoli	heir H	Iomes Hospit	in the	e seve	ral
purpose of these Statistics ; Public		TP-cl			1	2	3	4	5	6	7		9	10	11	12	13	1	2	5	4	5	6	7	8	9	10	11	12	13
Institutions being shown as separate localities.	Census 1891. (b)	Esti- mated middle of 1895. (c)	Registered	Aged under 5 or over 5. (e)	Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Typhus.	Enterie or Typhoid.	Continued	Relapsing.	Puerperal.	Cholera.	Erysipelas.			Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Typhus.	Enteric or Typhoid.	Continued	Relapsing.	Puerperal.	Cholera.	Erysipelas.		
Weymouth		3987	14	Under 5 5 upwds. Under 5							ï																			
Melcombe, South		7066	26	5 upwds. Under 5						2																				••••
Melcombe, North Wyke	100	6154 3588	24 12	5 upwds. Under 5 5 upwds.																			 1	••••						••••
Military Hospital	12	12		Under 5 5 upwds. Under 5																										
Workhouse Hospital		185		5 upwds. Under 5									···· ···					···· ····												**
Eye Infirmary Sanatorium		19 30		5 upwds. Under 5 5 upwds.																					••••					••••
Royal Hospital "The areas of these dist have been enlarged the last census ; so fig are not available.	riets since	24		Under 5 5 upwds.																										
TOTALS		21065	76	Under 5 5 upwds.						5													 1							

State here whether "Notification of Infectious Disease" is compulsory in the District (Yes.) Since when? (May, 1888). Besides the above-mentioned Diseases, insert in the columns with blank headings the names of any that are notifiable in the District, and fill the columns accordingly. State here the name of the Isolation Hospital used by the sick of the District. Mark (H) the Locality in which such Hospital is situated ; and if not within the District, state where it is situated (Port Sanitary Hospital, Wyke, without the District).

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