

[Report of the Medical Officer of Health for Surbiton UDC 1909].

Contributors

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ANNUAL REPORT
OF THE
Medical Officer of Health
OF THE
Surbiton Urban District Council,
1909.

BY
OWEN COLEMAN, M.D., M.R.C.S.E., D.P.H.,
MEDICAL OFFICER OF HEALTH;
FELLOW OF THE INCORPORATED SOCIETY MEDICAL OFFICERS
OF HEALTH;
FELLOW OF THE ROYAL INSTITUTE OF PUBLIC HEALTH.

SURBITON :
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1910.



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The Urban District Council of Surbiton.

SANITARY COMMITTEE,

1909-10.

Chairman :

W. SANGER, ESQ.

The Chairman of the Council :

REV. A. E. BEAVAN, M.A.

The Vice-Chairman of the Council :

P. G. C. SHAW, ESQ.

Messrs. EDSSELL, HAWKEY, HEPWORTH, MENCE,
ORLOPP, PALMER, PARRY, RAY, AND WEST.

Medical Officer of Health :

OWEN COLEMAN, M.D., D.P.H.

Sanitary Inspector :

W. NESFIELD, A.R.SAN.I.

The Urban District Council of Surbiton,

1909-10.

GENERAL STATISTICS.

Area of Urban District (exclusive of water) ... Acres	3,031
Rateable Value	£188,400
Produce of Penny Rate	£634
Populations at Census of 1901	15,017
Number of Inhabited Houses at Census of 1901 ...	2,874
Average Number of Persons per House at Census of 1901....	5'225
Population at Middle of 1909, Estimated ...	18,800
Density of Population per Acre	6'2
Number of Inhabited Houses at Middle of 1909 ...	3,572
Death Rate 1909, per 1,000 Persons living ...	10'1
Average Death Rate for previous 10 years ...	10'2
Death Rate from Seven Chief Epidemic Diseases ...	0'95
Birth Rate 1909	18'4
Average Birth Rate for previous 10 years ...	20'3
Infant Mortality Rate (under 1 year old) per 1,000 Births	78'03
Average Mortality Rate (under 1 year old) per 1,000 Births for previous 10 years	88'03

VITAL STATISTICS FOR 1909.

The following are the provisional figures showing the birth-rates and death-rates in England and Wales in the year 1909 :—

	Annual rate per 1,000 living.			Deaths under 1 Year to 1,000 Births.
	Births.	Deaths.	Principal epidemic diseases.	
England and Wales...	25'6	14'5	1'12	109
76 Great Towns ...	25'7	15'6	1'42	118
143 Smaller Towns ...	24'8	14'5	1'08	111
England and Wales, less the 219 towns ...	25'6	13'6	0'80	98
Surbiton	18'4	10'1	0'95	78

Surbiton Urban District Council.

Thirty-Third Annual Report

OF THE

MEDICAL OFFICER OF HEALTH,

1909.

Mr. CHAIRMAN AND GENTLEMEN,

Another year has passed round, and again in accordance with the regulations of the Local Government Board I have to submit to you my Report on the Sanitary conditions of the district under your administration, of the vital statistics for the past year and of the work done by the department; and also of my views on health matters generally, so far as they concern our present conditions and further advancement.

This makes the Thirty-Third Report I have sent in, and with it there comes an almost irresistible temptation to indulge in something like a retrospect over the vista of past years—to tell of how things were when I took office in 1876 and of how they are now, of how the changes came about, of what we used to endure in the way of sanitation and sickness, and, by way of comparison, of what we have arrived at and of what we now require and insist on, together with the aspirations we have of the future ; also of the sickness and mortality that used to be looked upon as being sent by Providence until we came to know that this same Providence occasionally assumed the forms of criminally careless milk sellers or of indifferent and self seeking property owners, or of still more careless and ignorant occupiers, and to expatiate on the wonderful changes effected, and of how all these changes, regulations and improvements, begotten of an ever increasing knowledge—mainly on the part of the medical profession—have collectively resulted in such an extraordinary lessening of sickness and mortality that we have, as actuaries know, added many years to the average of human life.

These and many other kindred topics would, I believe, be most interesting and might be considered germane to the subject, even in so matter-of-fact a compilation as the Annual Report of a

Medical Officer of Health, but perhaps a lengthy description of the transition period from the old sanitary go-as-you-please days to the present state of almost—I say it respectfully—grandmotherly legislation might not be deemed quite appropriate, even if taken as illustrations of justifiable progress, by a prosaic Local Government Board, nor held to be exactly in accordance with regulations as they are.

I will, not therefore, dilate on this aspect of local sanitary progress, but proceed to deal with facts and figures as they are furnished by the circumstances of the past year.

VITAL STATISTICS.

The statistical parts of this Report, termed vital statistics, are chiefly embodied in the various Tables that are completed in the forms required by the Local Government Board, which, in addition to giving the information for the past year under the various headings, also embody those of previous years for comparative purposes. They are to be found at the end of the Report, and are made use of by the County Medical Officer of Health in preparing his Annual Report for the County, and also by the Local Government Board for general statistical information, and it is part of the duty of every Medical Officer of Health

throughout the kingdom to complete these Tables and base a portion of his Report upon them.

The forming of a reliable estimate of the population of most localities or towns towards the close of the decennial period becomes an increasingly difficult task, in the absence of any accurate or trustworthy figures as a basis.

There are places no doubt where a long series of years show such little variation in population and such few varying local conditions that the addition of a few newly-built houses and the excess of births over deaths give a fairly approximate estimate of the extent by which the population has varied since the last census.

But this does not apply to Surbiton, Tolworth and Hook as during the last decade the increase of population and the number of new houses built in all parts has been very considerable.

The last census was taken in 1901, so that this is the last year but one of the decennial period, and naturally almost the most difficult of which to form an estimate. At the census of 1901 the population of the whole district was 15,017 and the average number of persons per house at that time was officially given as 5.225.

As the number of new houses built since that date have been properly recorded the record was of some assistance in endeavouring to frame an estimate, so in the year 1908 a careful calculation

was made, based upon the houses occupied and the average increase of births over deaths, together with other data, so that in that way an estimate was arrived at of 18,747 as being about the population at the time. For last year, that is 1909, the estimated number is taken to be 18,800, hoping thereby to be under and not over the figures that the next census in April, 1911, will give us.

I find that in 1900, the year before the last census, I estimated the population at 14,732, and the census of the next year proved to be 15,017, so that the calculation then made was sufficiently accurate and quite satisfactory.

A similar method now leads to the inference that 18,800 in round figures is about the mark, but a new factor has arisen in later years, and that is the conversion of many houses into flats with the result that whereas formerly one occupied house as a rule sheltered but one family, there are now, owing to this sub-division, often under the same roof two or more families with their dependents.

In the absence of any official figures the difficulty of forming an estimate becomes almost insuperable, so that it can at best be but taken as a carefully considered guess, but as long as it is

under and not over the figures presently to be declared, I shall be content.

VITAL STATISTICS continued.

The deaths registered for the year of residents within the district were 166, which give a death rate of 8·8 per thousand, but to this number there has to be added 23 deaths at the Union Infirmary and 2 at the County Asylum, making 191 in all, which give a corrected death rate for the year of 10·1 per thousand of the population. The rate for last year was 10·08, and the average for the preceding ten years was 10·2. Tables I and II show these details and also the distribution of death as between Surbiton, Tolworth and Hook.

BIRTHS.—This past year there were 39 fewer births than in 1908, the numbers for 1909 being 346 as against 385 for 1908. This deficiency was distributed over the whole district, Surbiton having 14, Tolworth 12, and Hook 13 fewer than the year before. The birth rate for the whole district is 18·4, which is the lowest recorded for the last 13 years, the average for the last 10 years being 20·3. The birth rate for England and Wales is 25·6. There were 332 legitimate and 14 illegitimate births in the year, and the deaths were registered of 22 legitimate and 5 illegitimate infants. The following table shows how and where these births were distributed :—

BIRTHS—SURBITON URBAN DISTRICT.

	SURBITON.		TOLWORTH.		HOOK and SOUTH- BOROUGH.		TOTALS.		TOTAL.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	
January ...	6	8	4	3	1	1	11	12	23
February ...	8	5	6	2	1	2	15	9	24
March ...	8	7	8	6	1	2	17	15	32
April ...	8	5	5	6	0	1	13	12	25
May ...	10	9	4	7	2	3	16	19	35
June ...	4	11	4	5	1	2	9	18	27
July ...	2	5	3	9	1	1	6	15	21
August ...	11	6	9	8	1	2	21	16	37
September...	3	8	5	7	1	1	9	16	25
October ...	7	6	11	3	2	1	20	10	30
November...	13	11	7	6	1	0	21	17	38
December...	10	7	4	4	2	2	16	13	29
	90	88	70	66	14	18	174	172	346
	178		136		32		346		

VACCINATION.

No cases of small pox have been notified during the year, but there are not wanting indications of an approaching recrudescence of this disease, which runs in well-known cycles, and flourishes or not in proportion to the number of unprotected persons.

Vaccination is being neglected in far too many cases and Medical Officers of Health are everywhere throughout the country deploring the falling off that is now taking place. Of course it is well-known that prejudice is rampant in some districts while making but little headway in

others—reliance being placed on isolation and sanitary measures—but when the test comes to be applied, apart from the feelings of the potential victims which may perhaps be imagined, it will certainly be found that the cost of these methods, whether more or less successful or not, will far and away exceed the preventive cost of vaccination.

I have recently come across some figures that show very strikingly the spread of this movement. The Medical Officer of Health of St. Albans, in his Annual Report just issued, says that in 1906 there were vaccinated 150 infants, in 1907—139, in 1908—96, in 1909—64 !

It is also very suggestively stated that the St. Albans Urban, jointly with the St. Albans Rural and the Harpenden Urban Districts, are now in actual course of building a small pox hospital. Compare this with the practice of Germany and Japan, two admittedly very enlightened and progressive countries where vaccination and re-vaccination are compulsory, and there we find they have no small pox hospitals at all, have no need for them.

The following Table, which is now being included by an increasing number of Medical Officers of Health in their Annual Reports, provides some interesting and instructive particulars.

RETURNS OF THE VACCINATION OFFICER FOR SURBITON, HOOK AND TOLWORTH DISTRICTS, 1909.

Total births registered 1909	...	...	...	346
Successfully vaccinated	...	...	...	189
Insusceptible	...	...	...	—
Died unvaccinated	...	...	...	17
Removed from district or gone away	...	...	...	15
Cases postponed over the year	...	...	...	7
Certificates granted to "Conscientious Objectors"	...	...	...	59
Unaccounted for	...	...	...	59

N.B.—Many of the "unaccounted for" are not yet 6 months old, and a not inconsiderable number were on the waiting list at the end of the year and would doubtless be vaccinated early in the present.

The number of exemptions in 1908 were 45.

LONGEVITY.—Certainly when the table given below is examined it speaks very well for Surbiton as a residential district favourable to the prolongation of life. Here we have 191 as the accredited number of deaths for the year 1909, and no less than 67 or 35·07 per cent. of them are beyond the allotted span, and as there were also 27 children under one year of age this leaves but 97 to represent the number of deaths between one year of age and 70, that is, between the very young and the very

old, or a mortality of 5·1 per 1,000 of the population.

Years.	Males.	Females.	Total.
70 to 80	16	28	44
80 to 90	11	11	22
90 to 100		1	1
	<hr/>	<hr/>	<hr/>
	27	40	67

INQUESTS.—By the courtesy of Dr. M. H. Taylor, H.M. Coroner for this division of Surrey, I have received a return of the inquests held in the district during the year. There were 13 inquiries in all, of which 8 were on cases resident in Surbiton, 3 in Tolworth, 1 in Hook and one was the case of a body found in the River Thames and taken out within this area.

The verdicts returned were :—

Deaths from natural causes	...	...	6
„ accidental injuries—burns	...		1
„ want of attention at birth	...		1
„ improper feeding (neglect)	...		1
„ suicide—jumping out of			
window	...	...	1
„ „ cut throat	...	...	1
„ „ poison	...	...	1
„ open verdict—“found drowned”			1
			<hr/>
			13
			<hr/>

MORTUARY.—Statement of bodies received into Mortuary during the last 3 years :—

Year.	For Inquests.	To await burial.	Total.
1907 ...	12	1	13
1908 ...	17	2	19
1909 ...	13	4	17

The Mortuary itself and the post-mortem room with all its appliances are in good order, thoroughly clean and always ready.

INFECTIOUS DISEASES (NOTIFICATION) ACTS,
1889 and 1899.

EXTRACT FROM NOTIFICATION REGISTER.

	Scarlet Fever.	Diph- theria and Memb. Croup.	Enteric Fever.	Puerperal Fever.	Ery- sipelas.	Contin Fever.	Small Pox.	Totals.
1890	3	36	1	2	4	0	0	46
1891	3	21	1	0	10	0	0	35
1892	4	16	3	1	5	0	0	29
1893	94	23	5	2	15	2	1	142
1894	9	20	12	2	12	0	0	55
1895	18	12	5	0	2	0	0	37
*1896	27	9	4	1	10	0	0	51
*1897	16	9	2	1	3	0	0	31
*1898	13	6	2	0	6	0	0	27
*1899	48	2	7	1	11	0	0	69
*1900	15	22	2	0	7	0	0	46
*1901	59	47	2	0	7	0	0	115
*1902	22	19	2	1	8	0	0	52
*1903	58	9	6	0	5	0	1	79
*1904	22	10	4	1	4	0	0	41
*1905	72	3	2	0	4	0	0	81
*1906	41	7	2	0	9	0	0	59
*1907	25	15	2	0	7	0	0	49
*1908	30	13	5	0	7	0	0	55
*1909	30	21	2	0	9	0	0	62

*The combined Districts.

The notifications of the last 20 years, including last year, are set forth in the above Table, but it must be observed that the first 6 years are the returns of Surbiton only as, prior to 1896, Hook, Tolworth and Southborough were in the district of the Kingston Rural Sanitary Authority. Taking the 14 years of the combined districts, the average number of notifications for these years is 58·3 per annum, while the average number of scarlet fever cases is 34·1 and of diphtheria, 13·7.

This Table is of some interest and has some bearing in relation to the question of whether or no the sanctuary of an Isolation Hospital has in any appreciable measure, and if so to what extent, served to reduce the number of notifiable cases. Returns of this sort are of course very fallacious and the fact is evident that one or more outbreaks of either disease would tend to upset the deductions that might be drawn of a progressive improvement in case incidence, which in turn might be in process of being brought about by sanitary, isolation or other measures.

On the face of it it would appear that practically nothing had been done to lessen the incidence of these diseases, but on the other hand it is wholly impossible to say by how much the total number of notifications would have been affected, had all these cases been treated in their own homes. In other words is the expense of maintaining such an institution, administered as at present, a gain

to the community or not? It is idle to argue pro or con with such few figures as we have before us, but the question is one that is exercising and is bound to exercise the minds of not a few, and it is quite possible that some modifications in the present system may ultimately result.

I do not bring this forward to uphold an argument on either side, but I can quite well remember that when the question of creating an Isolation Hospital was first mooted by the Kingston Rural Sanitary Authority, and the proposal was made that it should be placed where it now is, a considerable opposition was raised in Surbiton to so undesirable a building—as it was then held to be—being placed so near to our own then boundaries. Of course, per se, the aggregation of a number of infectious sick in a suitable building administered under appropriate conditions has long since falsified the views of those who maintained that danger would result to individuals, or that depreciation to property must follow, but I do not think that the views of another section, viz., that no diminution in the average number of cases would be found to result in the long run are, as shown by those figures, so very wide of the mark, and I have a general belief, not based upon any definite statistics, that the experiences of many other hospitals and districts will be found to be much as are our own.

As these special hospitals have now been in existence for some 25 years or so, it is likely enough that their special utility and their exact position in state economy may be one day a matter for much interesting debate.

Reflections of this sort come to me mostly in connection with the now almost universal custom of sending nearly every case of scarlet fever to the hospital, and I find for instance that of 30 cases notified me last year 28 were so removed, not be it observed necessarily for treatment so much as for isolation, and also possibly because the present routine is largely due to the fact that there is here an Isolation Hospital available and perhaps still more to the obligations of the Public Health Act.

I am influenced to some extent by the knowledge that the type of scarlet fever with which we have to deal has year by year for some time past been of an inoreasing mildness generally, and that it no longer presents the severe and malignant characteristics of 30 to 40 years ago. In the last four years 126 cases of this disease were notified here and only one death resulted, and that was in 1906. Types of disease vary, they may gradually, possibly under improved sanitary conditions, become milder and milder, but it is well known that there is always a tendency, under altered conditions or under circumstances beyond our present knowledge, to revert to former

unfavourable types, and it may well be so at any future time in the case of scarlet fever.

I am much interested in this question of universal hospital treatment and am influenced, I also admit, by considerations bearing on treatment as affecting the infectivity of the individual and of finance as affecting the community. An Isolation Hospital cannot cope with an extensive outbreak nor do I think it should be expected to do so, but I am of opinion that it is serving its most useful purpose when it is able to receive, what I will call selected cases, that is to say, those which on account of their environment might prove greater sources of danger to the public than others not so similarly circumstanced. I need not particularize, I am sure, for what I wish to convey must be obvious.

ZYMOTIC DISEASES.—These mean the seven chief epidemic diseases, and the deaths to be referred to them are respectively :—Small pox, 0 ; Measles, 7 ; Scarlet Fever, 0 ; Whooping-cough, 7 ; Diphtheria, 3 ; Enteric Fever, 0 ; Diarrhœa, 1 ; making a total of 18 and a death rate 0·95. This low rate would seem to be due to the exceptionally few cases of diarrrhœal diseases, only 1 case being returned as epidemic diarrrhœa, the others being described as gastro-enteritis, &c. The cool and wet summer was probably a determining influence in this.

In last year's Report, on page 13, I alluded to an article that had appeared in the British Medical Journal of October, 1908, by Dr. Milne, which gave at some length the results of his long experience in the preventive treatment of scarlet fever, carried out under conditions so exceptional that there could be but few medical men so favourably situated for extensive practice and observation as he, and which, whether viewed in the light of possible limitation of infection, advantage to the individual, or of public expenditure, seemed to me well worthy of closer investigation and enquiry, and I stated that I proposed to make myself further acquainted with the subject and its possibilities.

This is not the place for entering into professional details, and I do not propose to do so, but I may shortly state certain facts of common knowledge that came under my personal notice.

I corresponded with Dr. Milne, who is the Medical Officer in charge of Dr. Barnardo's Homes at Ilford and elsewhere, and, at his invitation, I recently paid a visit to the Homes, at which there are some 1,300 children—all girls from a few months old to 15 years—living in a village consisting of detached and semi-detached cottages. Dr. Milne had written me—"I have at present one of the most interesting cases yet

experienced. Early in February a little girl was taken by the Sister in charge of our Receiving House here to London, and there she mingled with many poor children. On the third day she developed scarlet fever. She occupied the same room with 24 tiny children, the eldest of them being four years of age, and they were in the same room day and night except when the healthy ones went out to play, and in spite of this there has not been any spread of infection nor complication. It is now the fifth week and her hands and feet are peeling. Since the 10th day she has been up and at play with the others."

I went down to Ilford and there saw and examined this child, who was playing on the floor with a crowd of other children and their toys. She was peeling freely but was in all other respects perfectly well. The Sister told me that on February 4th, when the rash appeared, there were 23 other children in the ward, aged from two months to four years, and in residence in the house 63, all of whom had access to the room. Since that date 65 had been admitted and 56 had been passed on to other cottages and boarded out, and that there were in residence at the time of my visit 72. From February 4th to March 12th this scarlet fever patient had been in contact with 128 children, and there had been no spread of the illness. Replying to a question, she told me that

12 of these children had been in the ward the whole time with her.

I then went to the Infirmary Cottage where was a girl, a worker of 15 years old, who had caught this illness about 5 weeks ago, supposed to have done so in the town. She was immediately removed to the general infirmary, as is the custom, and put in a ward with 5 other girls who were laid up with various complaints. After 10 days she was up and assisting in the ward. I found her desquamating very freely, but otherwise quite well and with no throat or nose trouble. Two of those in bed had been there all the time with her. Dr. Milne reports that during 25 years while he has had hundreds of cases, even in the next beds to operation cases, he has had no nose, ear or kidney complications when his treatment has been used as directed.

The notifications in the several months of the year, together with the admissions to Hospital, were as follows :—

1909.

	Scarlet Fever.	Diphtheria.	Enteric Fever.	Erysipelas.	Total.
January ...	2	5	1	0	8
February ...	2	3	0	1	6
March ...	0	5	0	1	6
April ...	3	0	1	0	4
May ...	1	4	0	1	6
June ...	2	1	0	1	4
July ...	2	0	0	2	4
August ...	1	0	0	1	2
September ...	4	1	0	0	5
October ...	6	0	0	1	7
November ...	2	2	0	0	4
December ...	5	0	0	1	6
Total ...	30	21	2	9	62
To Hospital	28	19	0	0	47

DIPHTHERIA.—There were a larger number of cases notified last year than usual though there was nothing at any time in the way of an outbreak. There were 21 cases notified as occurring in 17 houses, and these were distributed over the whole year, though the larger number were in the first three months. Four cases were from one house, being notified successively on March 12th, 25th, 31st, and May 7th. All were removed to hospital and the first two—one of whom had measles co-existing with and prior to the diphtheria—both died.

There were three deaths in all out of the 21. Nineteen were treated in hospital and two at home. The other fatal case was suffering from whooping cough when attacked by diphtheria. Two cases were notified as having originated in the hospital itself, one being a child from Malden, who was admitted with scarlet fever but subsequently developed diphtheria and the other was one of the nurses. An examination of the various premises was made with the result that in six houses it was reported—"very defective drains—relaid throughout;" in five houses there were "defects of various kinds which were made good;" and in five houses the report was—"satisfactory." The Isolation Hospital, of course, was not examined. These were all sporadic cases and had no connection with each other beyond the four cases from the one house.

No reason can be assigned for these more numerous cases as they were not connected in any way with the schools, and as far as sanitary conditions are concerned it is only in a very few cases where the conditions are exceptionally bad, and, in my experience where damp walls are involved as well, that a case may originate. On the other hand where children live under insanitary surroundings, there is an undoubted pre-disposing cause towards receiving infection if in contact. As regards age there were seven cases under five

years of age, from five to ten years five cases, from ten to twenty years, seven cases, and from twenty upwardstwo cases. Besides these three deaths there were other three deaths in the Isolation Hospital of cases admitted from other districts.

Respecting the diagnosis and the duration of infection in cases of diphtheria, I am able to report that the number of cases verified by the bacterial examination of throat swabs is now proportionately larger than at any time, and it is the practice at the Isolation Hospital that no case is discharged as cured until the apparent, i.e., the clinical recovery is confirmed by a negative swab. In no other way is it possible to be sure that a case ceases to be infective, for while it is a well established fact that the diphtheria bacilli remain in the throat for an average period of about three weeks from the onset of the attack, occasionally a few days less, yet on the other hand they may and often do remain persistent for many weeks in spite of local antiseptic treatment. I would again repeat that in the case of the necessitous poor arrangements are in force, whereby swabs can be examined at the Clinical Research free of charge on application at the Council Office, or on emergency, by applying to the Medical Officer of Health or the Sanitary Inspector at their residences. With the facilities afforded by the Sanitary Authority it should be understood that it is a recommendation that in

case of patients treated for diphtheria at their own homes no disinfection will be undertaken at the public charges at the conclusion of the case until it is notified that a swab has been returned negative. Also that no disinfection will be carried out at the home of a patient removed to the Isolation Hospital until notification has been received that a swab has been returned positive.

ENTERIC FEVER.—Only 2 cases were notified, both were treated at home and recovered. One was an imported case from abroad, but I have no knowledge of the source of contagion in the other.

MEASLES.—This was very prevalent throughout the district, together with Whooping Cough and Chicken-pox, during the first three months of the year. There were 7 deaths from measles and the same from Whooping Cough, occasioned in nearly all the cases by lung complications.

PHTHISIS.—There were 15 deaths from pulmonary tuberculosis. The deaths from this disease recorded in 1906-07-08-09 were respectively 7—14—7—15.

CANCER.—Occasioned 11 deaths, which is the average of the past four years. After deaths

from phthisis, in nearly every case, thorough disinfection of room, bedding, etc., has been carried out, and on application in some cases of cancer also.

EPIDEMIC INFLUENZA.—This annual visitant claims more fatal cases this year than usual. The deaths in 1906-7-8-9 were respectively 1—2—3—8, and of these latter 7 were people of 65 years of age and upwards. This is a disease that will not tolerate indifference and very serious illnesses and complications are apt to be a consequence of not taking proper precautions at the onset. As everyone knows, it is a highly infectious disease, and yet only too frequently there are to be seen the most extraordinary contradictions in the conduct of people ordinarily reckoned to be mentally well balanced, and not assumed to be wanting in their duty to their neighbours.

Take the case of the man who has been exposed to and contracts Influenza, he knows he has got it, perhaps from former experience, yet the line of action he decides upon is what he is pleased to call "fighting against it." He does so, he mixes with his own household, goes to town cooped up in a compartment with five or six unsuspecting possible victims, sits in his office, shop, warehouse, &c., all day long, or goes about amongst people generally. He struggles on and with good luck, perhaps eventually gets well. What about the

number he has probably, nay certainly, infected? Or it may be that at last he has to give up, takes to his bed and possibly develops pneumonia, or some of the many complications that might reasonably have been avoided by a little more wisdom and patience. Do we not all know of valuable lives that have been, and will be, needlessly sacrificed in this way, and on reflection we shall surely agree that it is strange so little thought is given for others by so many of those suffering from an infectious disease? If it were a notifiable disease such as scarlet fever or diphtheria the law would have a word to say on the subject, and with respect to complaints like measles, mumps, whooping cough, &c., the moral obligation is pretty generally observed, so equally when Epidemic Influenza is prevalent there should be more consideration for the public health and welfare.

INFANTS MORTALITY.—It is noteworthy that the deaths of children under one year of age are at a very low average this past year. The number of children who die before reaching one year of age is expressed, in relation to the births that have occurred in the district during the past year, in the proportion or ratio, as it is called, of what it would have been if there had been 1,000 births annually. In this way we see that had there been each year in succession 1,000 births then there

would have been in 1906 just 101 who would have died before reaching one year of age, so in 1907 there would have been 64, in 1908—70, and in 1909—78. On the first page of this Report the comparative figures of infant mortality for the whole of the country and for the great towns, etc., are given, and what I mean will be apparent. One of the most fatal illnesses to infants is diarrhoea, which is brought about by many different causes, but has mostly to do with the food and is much affected by conditions of weather.

For instance, in 1906 there were 15 of such deaths amongst children under one year old. It was a very hot summer, and under the conditions that the soil temperature has attained a certain point, the diarrhoeal mortality becomes greater in dry seasons and less in wet; in 1907 there was only one death, in 1908 there were three, and last year there were but four. But as there is always a large amount of illness amongst the children of the poorer classes, due to insufficient or improper food, or to both combined, it is when they are weakened or stunted in growth by such living that they the more easily become victims to any of the numerous illnesses that may be prevalent. Infant mortality together with a seeming degeneration in the stamina and growth, both mental and physical, of the oncoming children and youth of the present time, more especially in the towns, has rightly

aroused serious attention, the more so as it is associated of late years with an ever diminishing birth rate.

There are various causes put forward as contributing their respective influences to bring this about, such as early and improvident marriages, over crowding, improper feeding and want of proper attention in early life, but certain it is that the evil is existent mainly amongst the poorer and the working classes, and those of us who are of the older generation are well able to compare unfavourably the undersized, unhealthy-looking average town lad with his forbears of 30 or 40 years ago. And all this notwithstanding the improvements of sanitary science and hygiene together with better food and housing.

Parliament recognizing this evil has passed an Act—the Notification of Births Act—optional at present, that is probably destined to ultimately do much good in the larger towns where the evil is most rife, as its chief recommendation is that it provides means of access to the mother and the newly born for those who in the form of Health visitors are qualified to advise, instruct and assist the often totally ignorant mother in the approved methods of feeding and rearing her offspring. It was not adopted here for reasons that were mentioned in my Reports of the last two years, but it will in all probability be considerably

amended in the light of experience and then some day made compulsory. Improper feeding is more common than is generally supposed and far more so than is at all necessitated by the lack of means; insufficient feeding is another thing, and has to be combated by other measures. There are not a few mothers hereabouts giving their children boiled bread and thinking they are doing quite rightly; in certain parts of this district milk that has had every vestige of cream, which is the fat, removed from it is being sold to the poor as separated milk at about half the retail price of fresh milk and is given to their children in lieu of it. The law allows of this, but how can children thrive on milk of this sort, they starve, and is it to be wondered at that they become rickety, pale faced and don't grow as they should.

Some mothers will not, and some cannot, nurse their babies and the bottle has perforce to be resorted to, and here it is that ignorance and carelessness come in and it would seem that any and every advertisement of some patent food or other—good or bad—finds speculative purchasers.

Thinking this over, I have, from various sources, drawn up carefully and concisely some directions for bottle feeding, and have introduced them here, in tabular form, in the hope that they may reach some of the poorer homes and be of some assistance—as a working basis, subject of course in

special cases to the advice and modification of the doctor in charge.

The best substitute for breast milk is fresh cow's milk suitably prepared. The same food does not suit all infants, but fresh cow's milk should always be patiently tried before anything else. Milk fed children have a clear skin and good colour, their bones are harder and their teeth grow better than do those of most children reared on some of the numerous "Infant's Foods."

Times per day.	Age. Days old.	Boiled Milk. Teaspoons.	Cream. Teaspoons.	Barley Water Teaspoons.	Total Quantity. Teaspoons.
Feed every two hours.	3	1	1	6	8
	7	3	1	8	12
	14	4	1	11	16
	21	6	2	12	20
	28	8	2	14	24
	Weeks old.				
Nine Meals.	5	10	3	16	29
	6	13	3	18	34
	7	16	3	21	40
Eight Meals.	8	20	4	24	48
	10	22	2	24	48
	Months old.	Tablespoons.	Tablespoons.	Tablespoons.	Tablespoons.
Eight Meals.	3	7	0	5	12
	4	8	0	6	14
	5	10	0	6	16
Seven Meals.	6	12	0	4	16
	7	14	0	4	18
	8	16	0	2	18
Six Meals.	9	18	0	0	18
	10	20	0	0	20

BARLEY WATER.—Put two full teaspoonsful of well washed pearl barley into a saucepan with one pint of cold water and let it simmer gently till only two-thirds remain ; strain carefully, Must not boil. Barley water does not keep well, so should be prepared twice a day. During summer keep in a cool place or it will soon turn sour. Never heat to boiling point again or it quickly goes bad.

OR

Take two full teaspoonsful of Robinson's Patent Barley, mix smoothly with a pint of cold water, just as starch is made, and add a pinch of salt. Pour into a clean enamelled saucepan and boil for from 15 to 20 minutes, taking care to stir until it boils. Then pour into a bowl and allow to get cold, and when the skin that forms on the top has been removed it is ready for use just as water is used for diluting or mixing with the milk freshly scalded in the proportions directed according to age.

MIDWIVES ACT.—This Act of 1902 came into force in 1903, to a partial extent, as women then practising "for gain" were to be allowed to continue doing so, provided they were favourably reported upon by the Medical Officer of Health of the district as being up to a certain standard of knowledge, cleanliness, &c., until 31st March, 1910, so as to

give them an opportunity of becoming properly qualified, and also to allow time for the entry and training of those who ultimately would be taking on the work. On April 1st of this year, therefore, the Act will come fully into force and some change will be inevitable. There are five women so practising here, but only one is a properly qualified midwife. As a result of my inspection during the year I was able to say that on the whole the work done had been satisfactory and no mishaps had occurred or complaints received. Between them they had attended 119 cases, or about 34·3 per cent. of the registered births. It has been a question as to whether or no there would be a shortage in the number forthcoming of midwives that would be required to carry on the work, but the departmental committee of The Central Midwives Board reported last August "that a shortage was only anticipated in 15 out of 50 English Counties, and that they regarded the question as mainly one of distribution, and that an effective organization would provide the solution of the question."

SCHOOLS.—During the year the drains and sanitary fittings at Christ Church Schools and St. Matthew's Schools have been entirely re-constructed. Slight defects were discovered in the drains at the Council's Infant School in Alpha Road, and at the temporary School in Red Lion Road. These defects were made good. The

drains of the remaining Elementary Schools were tested and found to be satisfactory.

I would especially draw attention to the full details given by the Sanitary Inspector in his Report of the inspections and tests made by him during the year in the various Public Elementary Schools and also in all the private schools, with one exception, and would add that this periodical examination of the sanitary arrangements is a matter of extreme importance, not only to the schools themselves, but is in the interests of the public health and is thoroughly up-to-date and forms, together with the other districts that have adopted it, an example that is bound to be extensively followed.

On January 11th, the Hook Schools should have been re-opened after the holidays, but their remaining closed till February 1st was recommended on account of the numerous cases of measles.

On January 13th, I visited Tolworth Schools and recommended the closing of the Infant School till February 1st consequent on the prevalence of measles and chicken pox.

SANITARY WORK.

In connection with the Surveyor's Department, and in addition to the usual work and that provided for in the annual estimates, the following works

have been carried out:—Clay Lane has been sewered throughout on the separate system, and the old lane, some 2,000ft. in length, has been reformed to entirely new levels, it is now a 40 foot road with two footpaths, and has been re-christened “Villiers Avenue.”

Guilford Avenue has been made up under the Private Street Works Acts, 1892, with tarred macadam road and stone paved footpaths.

The preliminary legal notices and plans for making up Lenelby Road, Tolworth Park Road, Tolworth Road, St. Matthew's Avenue, Cranes Park Avenue and St. Leonard's Square under the same powers have been completed, and work on the two first roads is now in hand. Ventilation of the sewers has been improved by the addition of many ventilation shafts, and several surface water sewers have been provided with much required means of access.

Defective sewers have been relaid in St. Mary's Road and Cottage Grove.

Dangerous corners have been improved at the junction of Thornhill Road and Red Lion Road, of Claremont and St. James's Roads, and at Claremont Gardens. These have been made possible by the dedication of strips of land to the public use by several private owners free of cost.

A considerable number of sewer improvements have been made including the piping in of open ditches.

Trees have been planted in Villiers Avenue, Guilford Avenue, Dennan Road and Southborough Road.

In some of the residential parts of the district stonepaving will be laid of not less than 5 feet in width with gravel margins, and in the more thickly populated parts where there is greater traffic, and in the narrower roads, the whole width will be paved. Tar paving will, if this is generally adopted, not be used in future for new paths but merely to renovate those already existing and not paved.

The number of new dwelling houses erected during the past year is shown in the following Table :—

Year.	HOUSES BUILT.			Total.
	Surbiton.	Tolworth.	Hook and Southboro'.	
1901	19	94	6	119
1902	28	79	16	123
1903	18	61	33	112
1904	41	81	9	131
1905	27	69	18	114
1906	35	71	23	129
1907	19	44	5	68
1908	22	42	12	76
1909	35	23	4	62
Total for 1901-9	244	564	126	934

Average number of persons per house (1901 census) 5'225.

·WATER SUPPLY.—The supply is now constant throughout the district and there have been no complaints as to insufficiency since this was really made constant on January 1st, 1909, but it should

be continuously borne in mind that though a constant water supply is now in force yet storage cisterns are still in use in practically, at present, every house and that these will still require periodical cleansing at least twice a year. It should also be known that even in cases where cisterns only exist for domestic purposes the Public Health Amendments Act of 1907 provides, by section 35, that "Any cistern used for the supply of water for domestic purposes so placed, constructed, or kept as to render the water therein liable to contamination, causing or likely to cause risk to health, shall be deemed to be a nuisance within the meaning of the Act of 1875."

SLAUGHTER HOUSES.

The larger portion of meat consumed here is slaughtered elsewhere, that which is killed here does not exceed four bullocks a week besides some other animals. The Sanitary Inspector frequently inspects these houses and arranges his visits to time, as far as possible, with the hours when slaughtering is being done, but he has seen nothing to complain of. As regards the meat, the quality is first class without exception, the character of the district rendering that a necessity, and on no occasions have any cattle or meat been found unfit or of doubtful quality. The Sanitary Inspector does not at present hold the recently instituted special certificate for meat inspection

granted by the Royal Sanitary Institute, but if anything of doubt were to be seen on the occasion of inspection he would at once requisition the services of the Council's Veterinary Surgeon.

SEWERAGE SCHEME.

This matter has not made the progress during the past year that was anticipated when I referred to it in my last Report wherein I gave a short sketch of the way in which the sewage of Surbiton had been dealt with from the time of the Improvement Commissioners onward. It will be remembered that as the agreement with Kingston for sewage disposal would expire on the 30th June, 1912, the Council had decided themselves to undertake the treatment of the enlarged district when that time arrived, and to that end selected an engineer and provisionally obtained a site on the banks of the Malden River. A plan was put forward and a Local Government Board enquiry was held in February, 1907, but after consideration it was rejected by them on the ground of cost, and that the effluent could not be permitted to flow into the Malden stream as proposed. In February, 1908, an enquiry was held as to the suitability or otherwise of a site in the Lower Marsh Lane, with the result that the site was approved, and the engineer was subsequently instructed to produce a plan for

see woct okrdt berethere. This he did, and his plan formed the subject of yet another Local Government Board enquiry in November, 1908, but on that occasion considerable opposition was offered on certain specific grounds, and a very long wait followed before the Upper Board gave any decision. This they did in the form of not absolutely rejecting it, but of allowing it to be clearly understood that they withheld their sanction in its then present condition. We had now got well into 1909, but in the end the engineer produced an amended scheme that was sent up to the Local Government Board for their further consideration. A long delay again ensued and it was not until late in the Autumn, about last October, that a reply was received, which was to the effect that without expressing any general disapproval they indicated certain points on which they would require modifications, and if the Council ultimately adopted this amended plan they would direct a fresh enquiry to be held. This naturally necessitated frequent and prolonged discussions and examinations with the object of elucidating and thoroughly understanding all the points that were being subjected to criticism, and it was during these discussions that there were developed no little differences of opinion as to the next step to be taken. Finally the Council passed a resolution not to adopt an amended plan at all but to entrust to Mr. Mather, their Surveyor, the preparing of a

new scheme on certain lines that were to be submitted to them, and that if this scheme, when elaborated, met their views the work was then to be carried out by him, subject of course to the approval of the Local Government Board. This scheme is in course of preparation and the Council is awaiting its submission to them.

Briefly, it is proposed to treat the sewerage of the whole district on its reception at the Lower Marsh Lane by chemical precipitation and subsequent filtration through artificial filters, the effluent then going direct to the Thames. In connection with this, the earliest portion of the undertaking will be directed to the doing away of the works at Tolworth and the carrying off of the sewage by new and direct gravitating sewers along the valley where the Tolworth brook now runs, up to a certain point before its confluence with the Malden River, at which point it will turn left handed and be conducted by a tunnel under the hill and railway to the new site. This portion of the work will, it is hoped, be completed and the sewage diverted, provided that the scheme as a whole is approved, within some eighteen months from the work being started.

It is also the intention of the Council, with a view to economy, to dispose of the house refuse by using it on this site as a fuel in a steam producing plant, for the purpose of driving the various engines required on the sewage works.

Before concluding I wish to draw attention to the extremely careful and well prepared report of the Sanitary Inspector, Mr. Nesfield. I cannot speak too highly of his work and of the thorough and methodical way in which it is done, and I am much indebted to him for his ready and willing co-operation on all occasions.

I am,

Mr. Chairman and Gentlemen,

Yours obediently,

OWEN COLEMAN, M.D., D.P.H.,

Medical Officer of Health.

March 31st, 1910.

SANITARY INSPECTOR'S ANNUAL REPORT.

TO THE MEDICAL OFFICER OF HEALTH.

SIR,

I beg to submit my Fourteenth Annual Report showing the work of the Sanitary Department during the year ended December 31st, 1909.

COMPLAINTS.

During the year 111 complaints were received relating to nuisances. Each complaint was duly registered in the complaint book and promptly investigated, and all necessary steps were taken in respect thereto.

INSPECTION OF DISTRICT.

In accordance with the provisions of section 92 of the Public Health Act, 1875, and the general orders of the Local Government Board, the district has been systematically inspected, and all necessary steps taken to enforce the proper observation of the Council's Bye-laws and Regulations, and to secure the abatement of nuisances where found to exist.

The total number of visits made in reference to the business of the department during the year was 3,296, which includes those to premises in respect of which complaints of a nuisance had been received and those in which cases of infectious disease had occurred; also those to works in

progress, inspection of Dairies, Cowsheds, Bake-houses, Slaughter Houses, Workshops, etc.

NOTICES SERVED.

During the year, 419 notices for the abatement of nuisances were served ; of these 149 were preliminary and 270 statutory notices.

In most cases the notices were readily complied with. In four instances it was necessary to institute summary proceedings before the Magistrates to enforce compliance with the Acts and Bye-laws in force in the district or with notices served, or to recover the cost of carrying out the work in default.

The following table contains particulars of such proceedings :—

NO.	NATURE OF OFFENCE.	RESULT OF PROCEEDINGS.
1	To recover the sum of £19 9s. 5d., the cost of relaying a combined drain belonging to two houses in Brighton Road.	Order made for the amount claimed together with £17 9s. 8d. costs.
2	Failing to disclose the name and address of the owner of the premises	Fined £1 and £2 10s. 6d. costs.
3	For carrying on the business of a Purveyor of Milk without being registered.	Fined 1/- and £1 9s. 6d. costs.
4	Failing to comply with a notice, under section 22 of the Public Health Acts Amendment Act, 1890, to provide a sufficient water-closet.	Fined 10/- and £2 10s. 6d. costs, the defendant giving an undertaking to carry out the work.

DETAILS OF SANITARY IMPROVEMENTS EFFECTED DURING THE YEAR.

Defective drains cleansed, repaired, trapped, etc.	38
Defective surface water drains re-laid ...	1
Approved iron or glazed stoneware gullies fixed in lieu of defective brick and iron bell traps	245
Houses sub-soil drained	2
Premises supplied with a sufficient water- closet	5
Water-closets re-built	12
Water-closet pans cleansed or repaired ...	10
Old iron container and long hopper pans abolished and pans of an approved form fixed	128
Water-closet flush pipes disconnected from domestic supply cisterns and separate flushing cisterns fixed	17
Defective water-closet flushing cisterns repaired	51
Defective flushing cisterns removed and new ones fixed	49
Soil pipes repaired	13
New soil pipes fixed	26
Soil pipes inside dwelling-houses removed and fixed outside	3
Defective ventilating pipes repaired	7
New ventilating pipes fixed	54
Additional ventilating pipes provided	4
Storage cisterns cleansed	3
Storage cisterns provided with covers ...	7
Storage cisterns abolished and water fittings connected direct to main	17
Sink and other waste pipes trapped or discon- nected from drain	17
Sink and other waste pipes repaired	12
Defective sinks and lavatory basins abolished and new glazed ware sinks or basins fixed ...	46

New waste pipes provided to sinks, etc.	...	88
Rainwater pipes disconnected from drains or soil pipes	... ..	90
Defective rainwater pipes repaired	... ..	77
Additional rainwater pipes provided	... ..	5
Defective eaves gutters repaired	... ..	18
Houses and premises provided with eaves gutters		5
Defective roofs made water-tight	... ..	15
Urinals reconstructed	... ..	1
Urinals provided with flushing apparatus	... ..	5
Urinals cleansed	... ..	2
Urinals abolished	... ..	1
Sites of houses concreted to prevent dampness		1
Damp course provided in outside walls	... ..	1
Defective house walls repaired	... ..	5
Defective house ceilings repaired	... ..	7
Defective floors repaired	... ..	14
Dirty houses cleansed and whitewashed	... ..	64
Accumulations of manure, etc., removed	... ..	16
Manure receptacles provided	... ..	2
Manure receptacles provided with covers	... ..	2
Yards cleansed	... ..	5
Nuisances from animals improperly kept abated	... ..	6
Houses provided with a supply of water	... ..	1
Total		1198

HOUSE DRAINAGE.

As the result of complaints having been received alleging that the drainage system was in a defective condition, applications were made to the Sanitary Committee for authority to enter the

premises and open the ground and examine the drains of 56 houses under the provisions of section 41 of the Public Health Act, 1875.

With one exception, all were found to be in a defective condition, and notices were served upon the persons responsible requiring the re-construction of the drains and other sanitary work.

The drains belonging to sixteen dwelling-houses, one stable, and two elementary schools, were re-constructed by the Council in accordance with plans and specifications prepared by me and under my supervision, either at the request of the owners, or in default of the persons responsible complying with the notices served.

In each case, a charge of 5 per cent. on the cost of the work was made for preparing the plan and specification of the necessary work. The income from this source during the year amounted to £26 15s. 7d.

Eight combined drains, each being a sewer within the meaning of section 4 of the Public Health Act, 1875, were re-constructed at the expense of the Council, and an additional house connection with the public sewer was also provided in lieu of re-laying a combined drain belonging to two houses, thus enabling each house to be drained separately into the public sewer instead of in combination.

The following table shows the position of each combined drain re-constructed at the Council's expense, and the cost of the work.

POSITION.	COST OF RE-CONSTRUCTION.		
	£	s.	d.
41 to 44, Cottage Grove and 43 to 45a, Victoria Road	71	14	4
1 to 27 (odd Nos.), Beaconsfield Road ...	66	2	6
22 to 25, Alpha Road	34	14	10
85 and 86, Brighton Road and 1, 2 & 3, Lorne Cottages, Maple Road ...	27	0	9
14, 16, 18 & 20, Pyne Road	26	16	1
7 to 10, Brown's Road	28	13	5
1 to 5, Hornsey Cottages, Gladstone Rd.	13	14	2
266, 270, 272, 274, 276 & 278, Ewell Rd.	28	13	6
140 & 142, Brighton Road (new house connection for No. 142 instead of re-laying combined drain)	8	6	5
	<hr/> £305 16 0 <hr/>		

In all, the drains and internal sanitary fittings belonging to 86 houses have been entirely re-constructed and brought up-to-date, and in 38 instances the drains have been repaired.

The increasing popularity of the use of iron pipes for drainage work in preference to stoneware is shown from the fact that 47 per cent. of the houses re-drained during the year have been re-laid wholly or mainly with iron pipes. In the case of iron drainage, when the work has been tested it has always withstood the test. This

cannot be said of stoneware, for in numerous instances the pipes, although only laid a few weeks, have been found to be defective, due principally to the expansion of the concrete bed or of the cement used in the jointing, causing the pipe to fracture. The extra cost of iron drainage over stoneware is comparatively small, and is more than repaid by the reliability of the work executed and its undoubted durability.

All drains re-laid are tested with water, and soil pipes and internal sanitary fittings with smoke or air, on completion of the work. A plan of the work executed is also prepared and filed in the office for future reference.

During the year 195 water tests have been applied to drains, and 268 smoke or air tests have been applied to soil and ventilating pipes.

PAVING OF YARDS.

Intimately connected with the sanitary condition of dwelling-houses is the necessity for paving the whole or part of the yard or open space for a sufficient distance around the building so that the surroundings can be kept dry, clean, and in a sanitary condition.

Where these conditions exist they are much appreciated by the occupiers, especially tenants of small property, as cleansing is greatly facilitated and encouraged, and rain and other water rapidly

drains away into the gully provided, instead of soaking into the foundations, causing damp walls, or standing in pools upon the surface until it becomes stagnant.

This work is carried out under the powers given by Bye-laws approved by the Local Government Board, which empower the Council, where it is necessary for the prevention or remedy of insanitary conditions, to insist upon the whole or part of any yard or open space in connection with a dwelling-house being paved with suitable material.

During the year the yards, and where necessary the side passages and forecourts, of sixty-one dwelling-houses have been paved with concrete or other durable and impervious material, making a total of 519 dealt with since the Bye-laws came into operation.

At four houses the paving was found to be insufficient, and it was extended a distance of six feet beyond the dwelling-house and the full width of the site.

HOUSES UNFIT FOR HUMAN HABITATION.

Two old houses situated on the Tolworth Common were found on examination to be unfit

for human habitation owing to their being in a dilapidated and insanitary condition, and not provided with proper means of drainage and a sufficient water supply.

The owner's attention was called to this fact and also informed that they must be made fit for human habitation. Rather than spend the amount necessary for this purpose he got rid of the tenants and sold the property.

The purchaser has since informed me that it is his intention to demolish the houses and to build two or more houses of a better class on the site. Plans of his proposals have been submitted to and approved by the Building Plans Committee.

DUST RECEPTACLES.

New portable galvanized iron dustbins with tight-fitting lids have been provided to thirty-four houses where none previously existed. Similar appliances have also been substituted for two brick ashpits which were in such a state as to constitute a nuisance.

OVERCROWDING.

During the year two houses were found to be so overcrowded as to constitute a nuisance likely to be injurious or dangerous to health.

They were both very bad cases. One was

abated after a preliminary notice had been served; the other was reported to the Council and a statutory notice had to be served to enforce an abatement of the nuisance.

SCHOOLS.

In accordance with the arrangements made with the Managers last year, the floors, walls and ceilings of all the public elementary schools have been sprayed with formaline three times during the year, and the drains tested and examined.

The drains belonging to St. Mark's and Hook non-provided Schools and the Tolworth Council Boys' School were found to be satisfactory. Those belonging to the Council Infants' Schools in Alpha Road and Red Lion Road were found to be slightly defective. The attention of the County Education Committee was called to this fact, they being the authority concerned, and the defects were made good.

The drainage belonging to Christ Church and St. Matthew's non-provided Schools, which I mentioned in my last report as being defective, has been re-modelled on up-to-date sanitary lines. All the defective drains were removed and replaced with cast iron pipes. The old insanitary trough and pedestal closets which were flushed automatically were removed, and replaced with strong

fire-clay pedestal closets, each provided with a separate two-gallon flushing cistern having a syphon action and chain pull. The old insanitary urinals were abolished and new glazed stoneware urinals fitted with automatic flushing cisterns fixed.

The whole of this work was carried out by the Council at the request of the Managers, who agreed to pay the cost. Plans and specifications of the work necessary were prepared by me, and the work carried out under my direct supervision.

I am now in a position to report that the drainage of the public elementary schools is in a perfectly satisfactory sanitary condition.

As a result of the recommendation I made in my report of last year, the Sanitary Committee again directed the Clerk to write to the owners of the private schools who had not given permission for the drains belonging to their premises to be tested annually. All the owners, with one exception, have now given permission for the test to be applied.

There are thirteen private schools in the district. The drains of twelve of these have been thoroughly tested and examined, and a report has been sent to the owner where necessary showing the nature of the defects found and the work required to remedy the same.

The following is briefly a summary of the results of such examinations and the action taken in regard thereto :—

SCHOOL	DEFECTS FOUND.	ULTIMATE RESULT.
No. 1	Cement rendering on internal walls of manholes defective ; ventilating pipe at top end of drain defective ; insufficient supply of water to w.c.s in hall and on top floor : slop sink in bath room broken and water supply to flushing cistern disconnected ; bath waste pipe defective.	Work done.
No. 2	Drains defective.	Report under consideration of owner.
No. 3	Drains defective and not intercepted from the public sewer ; soil pipe constructed of light iron pipes, defective at every joint ; pan in ground floor w.c. broken ; yard in an insanitary condition owing to it not being paved.	Work done.
No. 4	Drains defective ; soil and ventilating pipes defective ; scullery sink waste pipe defective.	Under consideration last year ; work now completed.
No. 5	Drain which receives scullery sink gully in area at rear of house defective.	Work done.
No. 6	Part of drains defective ; gully defective ; cement rendering on internal walls of manholes defective ; joint between trap of hall w.c. and drain and where anti-syphonage pipe connects, defective.	Report under consideration of owner.
No. 7	Drains defective ; soil pipe defective ; ventilating pipe at top end of drain choked with rust and joints defective ; flushing apparatus to w.c. defective ; bath waste pipe untrapped ; waste pipe belonging to housemaids' sink defective.	Report under consideration of owner.
No. 8	No defects found.	These premises were re-drained last year.
No. 9	No defects found.	

SCHOOL	DEFECTS FOUND.	ULTIMATE RESULT.
No. 10	Part of drain defective ; drains insufficiently ventilated ; soil pipe defective ; wash-out pan in top floor w.c. and long hopper pan in basement w.c. in an insanitary condition ; flushing cisterns belonging to three w.c.s defective ; waste pipes belonging to bath, housemaids' sink, lavatory basin and scullery sink untrapped.	Work done.
No. 11	Part of drains defective ; cement rendering on internal walls of manholes defective ; joints of soil pipe defective.	Report under consideration of owner.
No. 12	Cement rendering on internal walls of manholes defective ; soil pipe defective ; ventilating pipe at top end of drain defective.	Work done.

During the coming year I hope to be able to report that the defects found in the private schools have all been made good. The foregoing table, showing the result of my inspections of the private schools, taken in conjunction with my reports of this and last year relating to the drainage of the public elementary schools, shows clearly the necessity for such inspections, and I am of opinion that the health of the district will be materially benefited thereby.

FACTORY AND WORKSHOP ACT, 1901.

The total number of workshops and work-places now on the register is 214, an increase of nine over the number reported last year.

During the year inspections have been made from time to time to ensure the proper observance of the requirements of the Act. Eighty-six such inspections have been made, and as a result the following sanitary defects have been detected and remedied, viz. :—

Defective drains relaid	4
Drains unstopped and cleansed	1
Defective w.c. pans removed and new ones fixed	5
Defective w.c. flushing cisterns removed and new ones fixed... ..	2
Defective w.c. flushing cisterns repaired ...	1
Sufficient w.c. accommodation provided ...	2
Dirty w.c. apartments cleansed... ..	1
Defective sink causing dampness in workshop abolished	1
	<hr/>
	17
	<hr/>

Legal proceedings had to be resorted to in one instance, the occupier of a workplace having refused to comply with a notice requiring him to provide his premises with a sanitary convenience, none having previously existed. At the hearing, the defendant gave an undertaking to carry out the work, and was fined 10s. and £2 10s. 6d. costs. A satisfactory water closet was subsequently provided.

The factory mentioned in my last report as having been notified by the Factory Inspector as being without sufficient sanitary accommodation,

has now been provided with suitable sanitary conveniences.

BAKEHOUSES.

The bakehouses in the district, 14 in number, have been regularly visited during the year, and I am able to report that their condition is generally satisfactory.

In seven instances, however, it was found that the periodical cleansing required by the Act had not been carried out, and notices requiring this work to be done were served.

The stable attached to one bakehouse was found to be without a receptacle for manure, which in consequence was liable to be carried by the wind and otherwise into the bakehouse. The matter was reported to the Council, who ordered a statutory notice to be served upon the occupier to provide a properly covered receptacle in accordance with the Bye-laws. The necessary work was then carried out.

SLAUGHTER HOUSES.

There are only six registered slaughter houses in the district, and none of these are very much used.

They have been frequently inspected during the year, the visits having been made, as far as practicable, during the time that slaughtering was in progress.

In no case has any breach of the regulations been detected.

DAIRIES, COWSHEDS, AND MILKSHOPS.

During the year four persons who reside outside the district have been registered as purveyors of milk.

Three purveyors of milk residing outside the district have been struck off the register, having discontinued retailing milk within our borders.

One cowkeeper and one purveyor of milk residing in the district have transferred their businesses.

At the end of the year there were 31 persons registered under the Order as follows :—

Cowkeepers and purveyors of milk	...	...	3
Cowkeepers, dairymen, and purveyors of milk			3
Dairymen and purveyors of milk	...	...	5
Purveyors of milk residing in the district	...		11
Purveyors of milk who reside outside the district but retail milk within the district	...		9
			—
			31
			—

It was necessary in one instance to take legal proceedings before the magistrates to compel a purveyor of milk to register as provided by the Order. He was fined 1s. and £1 9s. 6d. costs.

Regular and frequent inspections have been paid to all the cowsheds, dairies, and milkshops in the district, special attention having been given

to the cleanliness of the premises, vessels, and appliances.

The periodical lime washing of these places has on all occasions been carried out. In no instance was it found necessary to serve a formal notice for the work to be done.

The following work has been executed in the cowsheds, milkshops, and dairies during the year :—

Drains unstopped and cleansed...	...	...	1
Floor of cowshed repaired	...	...	2
Floor of dairy repaired	...	...	1
Dirty w.c. pan cleansed	...	...	1
Defective flushing cistern to w.c. repaired	...	...	1
Dairy provided with a sufficient w.c.	...	...	1
Dairy provided with a manure receptacle	...	...	1
Accumulations of manure removed	...	...	2
			—
			10
			—

In none of the above cases was it necessary to make a report to the Sanitary Committee, as all the nuisances were abated on the owners' attention being called to them.

The average number of cows kept in the registered cowsheds during the year was 259. All have been inspected quarterly by the Council's Veterinary Inspector.

One case of tubercular disease of the udder was detected, and the cow was removed from the herd.

The cleansing of the hands of the milkers, and the hind quarters and udders of the cows, has received attention. In two instances I found it necessary to call the attention of the cowkeepers to their neglect in not keeping the udders and hind quarters of their cows clean.

DISINFECTION.

In accordance with the instructions of the Medical Officer of Health, at 58 houses, in which 68 cases of infectious disease have occurred, disinfection has been carried out upon the removal, recovery, or death of the patient. Of these, 33 were in consequence of cases of Scarlet Fever, 19 of Diphtheria, one of Typhoid Fever, 14 of Consumption, and one of Measles.

Disinfection has also been carried out after two cases of Cancer, at the expense of the occupiers of the premises, and on their application for such work to be done. Two van loads of bedding which had been used in the wards at the Cottage Hospital were disinfected at the request of the Committee during the time the Hospital was closed for renovation, the Committee paying the expense of removal.

Disinfection of infected rooms is carried out by the staff of the Sanitary Department under my supervision by spraying and fumigating with

formaline, and all bedding and other articles likely to retain infection are removed in a covered van to the steam disinfecter at the Tolworth Isolation Hospital and disinfected by super-heated steam, under the supervision of the Hospital staff.

After the rooms have been disinfected, the owners or occupiers of the premises are required, where necessary, to strip and cleanse the walls, whitewash the ceilings, and wash the floors and other woodwork with suitable disinfectant, which is supplied by the Council. This applies to all cases of infectious disease. In the event of cases of Phthisis occurring, the rooms, as well as the bedding, clothing, etc., are disinfected free of charge.

In every case of infectious disease, enquiries are made as to the number of persons in the house, where they are employed, the milk supply, water supply, laundry, condition of drains, etc., together with the history of the case and the probable source of infection. Disinfectants are supplied free of charge during illness.

The following is a list of goods disinfected at the Tolworth Isolation Hospital under the supervision of the Hospital staff :—

Beds	...	...	...	...	...	...	42
Mattresses	...	...	...	...	...	...	96
Palliasses	...	...	...	...	...	...	62
Bolsters	...	...	...	...	...	...	72

Pillows...	...	...	...	...	...	189
Sheets ...	...	...	...	...	...	94
Blankets	...	...	...	...	...	228
Counterpanes	...	...	...	...	...	80
Carpets...	...	...	...	...	...	52
Rugs ...	...	...	...	...	...	72
Cushions	...	...	...	...	...	64
Toilet covers	...	...	...	...	...	47
Towels ...	...	...	...	...	...	44
Wearing apparel	...	...	...	...	...	1,005
Curtains	...	...	...	...	...	133
Blinds ...	...	...	...	...	...	12
Sundries	...	...	...	...	...	109
Bed valances	...	...	...	...	...	5
Quilts ...	...	...	...	...	...	31
Pillow cases	...	...	...	...	...	74
Mattress covers	...	...	...	...	...	19
						<hr/>
						2,530
						<hr/>

SUMMARY OF WORK OF DEPARTMENT.

Number of houses and premises inspected	...	283
„ „ „ „ „ re-inspected	613	
„ „ miscellaneous inspections	...	63
„ „ visits to works in progress	...	1,963
„ „ „ „ bakehouses	...	43
„ „ „ „ slaughter houses	...	72
„ „ „ „ dairies, cowsheds, and milkshops	...	81
„ „ „ „ factories...	...	10
„ „ „ „ workshops	...	17
„ „ „ „ homeworkers' premises	...	10
„ „ „ „ workplaces	...	6

Number of visits to schools	22
„ „ „ „ <i>re</i> cases of infectious disease	111
„ „ drains examined under section 41 of the Public Health Act, 1875	53
„ „ drains tested with water	195
„ „ „ „ „ smoke or air	268
„ „ „ „ „ chemical	4
„ „ complaints received and investi- gated	111
„ „ preliminary notices served	149
„ „ statutory „ „	270
„ „ letters written on the business of the department... ..	893
„ „ houses and premises disinfected	58

I am, Sir,

Yours obediently,

W. NESFIELD, ASSOC. R. SAN. INST.,

Sanitary Inspector.

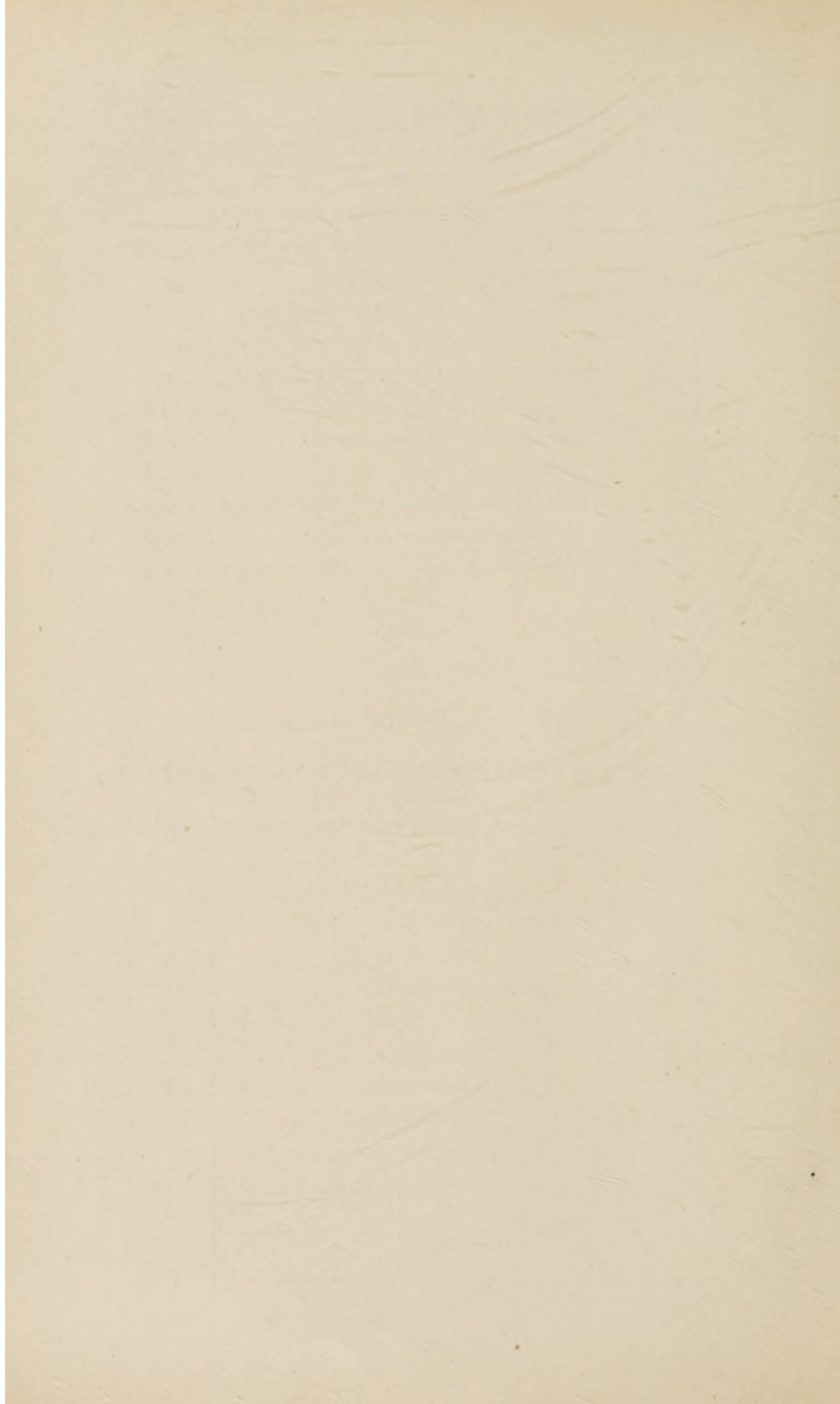


Table I.—Vital Statistics of Whole District during 1909 and previous Years.

YEAR.	Population estimated to middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.				TOTAL DEATHS IN PUBLIC INSTI- TIONS IN THE DISTRICT.	Deaths of Non- residents registered in Public Institu- tions in the District.	Deaths of Residents registered in Public Institu- tions beyond the District.	NET DEATHS AT ALL AGES BELONGING TO THE DISTRICT.	
		Number.	Rate.*	Under 1 Year of Age.	At all Ages.		Number.				Rate.*	
					Rate per 1000 Births registered	Number.						Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1899	14458	296	20.47	23	77.7	164	11.34	17	8	7	163	11.2
1900	14732	295	20.02	29	98.3	168	11.4	14	5	13	176	11.9
1901	15017	324	21.57	24	74.07	152	10.12	19	9	15	158	10.52
1902	15386	288	18.7	34	118.0	157	10.2	13	5	17	169	10.9
1903	15703	351	22.3	36	102.5	149	9.4	11	5	19	163	10.3
1904	16460	347	21.0	41	118.1	178	10.8	20	7	24	195	11.8
1905	16916	321	18.9	18	56.07	134	7.9	15	10	18	142	8.4
1906	17367	356	20.4	36	101.0	135	7.7	13	4	22	153	8.8
1907	17639	341	19.3	22	64.5	142	8.05	13	11	12	143	8.1
1908	18747	385	20.5	27	70.1	177	9.4	12	5	17	189	10.08
Averages for years 1899- 1908.		330	20.3	29	88.03	155.6	9.6	14.7	6.9	16.4	165.1	10.2
1909.		346	18.4	27	78.03	171	9.09	14	5	25	191	10.1

* Rates in Columns 4, 8, and 13 calculated per 1000 of estimated population.

The "Public Institutions" to be taken into account for the purposes of these Tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, workhouses and lunatic asylums. A list of the Institutions in respect of the deaths in which corrections have been made should be given on the back of this Table.

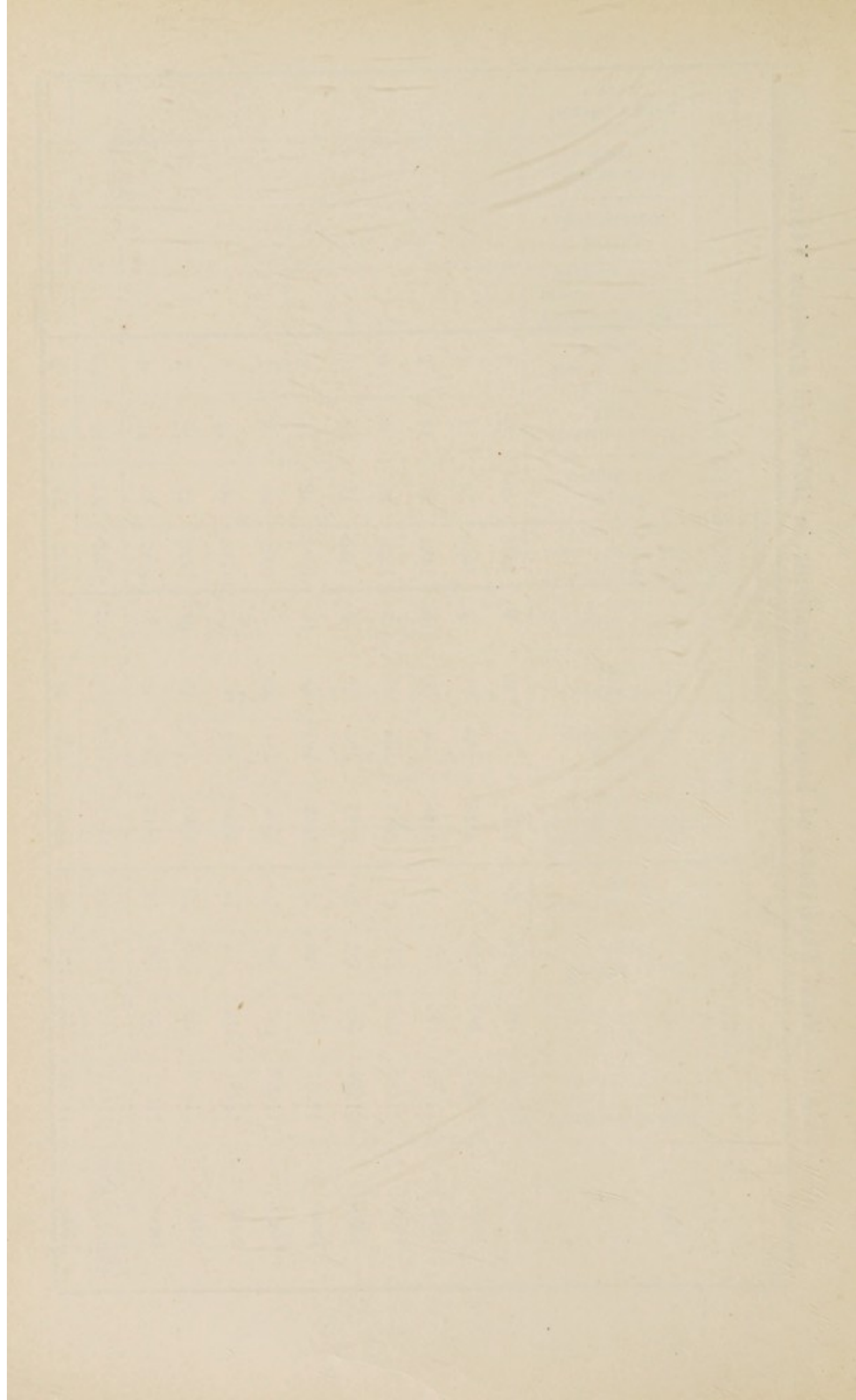
At Census of 1901.—Total population at all ages, 15017. No. of inhabited houses, 2874. Average No. of persons per house, 5.225.

Area of District in acres (exclusive of area covered by water), 3031.

I. Institutions within the District receiving sick and infirm persons from outside the District.	II. Institutions outside the District receiving sick and infirm persons from the District.	III. Other Institutions, the deaths in which have been distributed among the several localities in the District.
<p>Surbiton Cottage Hospital.</p> <p>Isolation Hospital.</p> <p>Surrey Nursing Home.</p>	<p>Brookwood Asylum.</p> <p>Union Infirmary, Kingston.</p>	<p>None</p>

Table II.—Vital Statistics of Separate Localities in 1909 and previous Years.

YEAR.	NAMES OF LOCALITIES.											
	SURBITON.				TOLWORTH.				HOOK & SOUTHBORO'.			
	Population esti- mated to middle of each Year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each Year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each Year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.
1899	10869	185	119	15	2162	71	20	8	1416	40	22	1
1900	10972	191	129	18	2310	68	23	7	1450	36	11	4
1901	11075	195	117	12	2458	94	30	10	1484	35	11	2
1902	11214	159	128	21	2643	104	35	13	1529	26	6	0
1903	11339	182	123	22	2798	126	30	9	1566	43	10	5
1904	11557	181	129	22	3280	124	48	15	1623	42	18	4
1905	11665	157	104	10	3556	131	30	7	1695	38	8	1
1906	11787	172	94	14	3804	138	44	17	1776	46	15	5
1907	11863	159	96	10	3980	139	29	10	1796	43	18	2
1908	11772	192	119	14	4848	148	49	9	2127	45	21	4
Avg. of yrs. 1899 to 1908.	11411	177.2	115.8	15.8	3183	114.3	33.8	10.5	1646	39.4	14	2.8
1909	11788	178	127	14	4880	136	47	11	2132	32	17	2



**Table III.—Cases of Infectious Disease notified during the year 1909
in the Surbiton Urban Sanitary District.**

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.							Total Cases Notified in each Locality.				No. of Cases Removed to Hospital from each Locality.					
	At all Ages.	At Ages—Years.															
		Under 1.	1 to 5	5 to 15	15 to 25	25 to 65	65 and upwards	Sur- biton	Tol- worth	Hook & S'th- boro'.	Sur- biton	Tol- worth	Hook & S'th- boro'.	Sur- biton	Tol- worth	Hook & S'th- boro'.	Total
Small-pox ...																	
Cholera ...																	
Diphtheria (includ- ing Membranous Croup) ...	21	1	6	8	5	1		13	7	1		12	6	1		19	
Erysipelas ...	9	...	1	...	...	4	4	6	3	...		...	...	...		...
Scarlet Fever ...	30	...	5	18	4	3		10	14	6		9	13	6		28	
Typhus Fever ...																	
Enteric Fever ...	2	...	...	..	1	1		2	...	...		...	...	...		...
Relapsing Fever																	
Continued Fever																	
Puerperal Fever																	
Plague ...																	
Totals ...	62	1	12	26	10	9	4	31	24	7		21	19	7		47	

Isolation Hospital—Tolworth. Total available beds, 38. Number of Diseases that can be concurrently treated, 3.

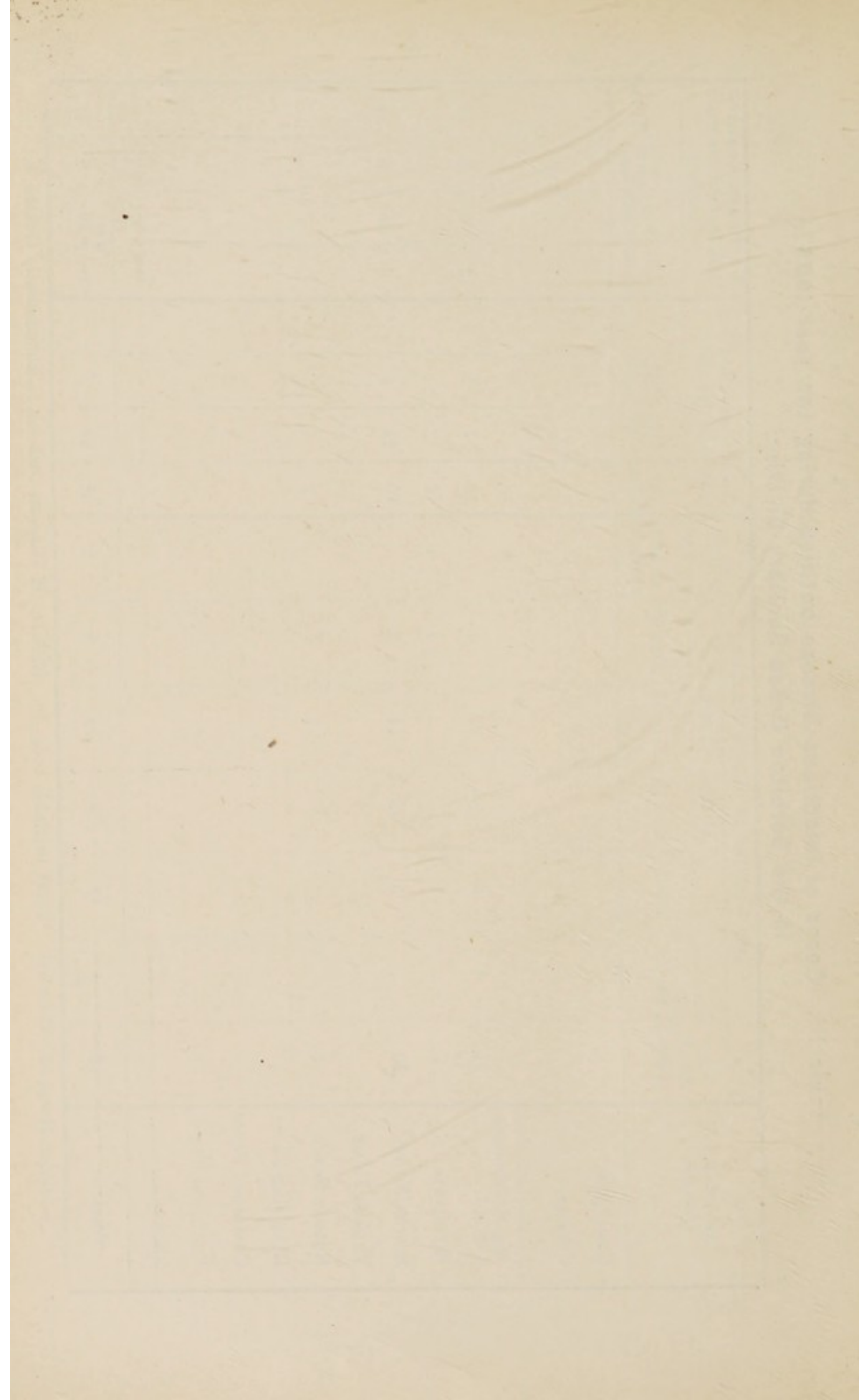


TABLE IV.
Causes of, and Ages at, Death during Year 1909.

CAUSES OF DEATH.	DEATHS IN WHOLE DISTRICTS AT SUBJOINED AGES.							DEATHS IN LOCALITIES (AT ALL AGES).			DEATHS IN PUBLIC INSTITUTIONS.
	All ages.	Under 1 year.	1 and under 5.	5 & under 15.	15 & under 25.	25 & under 65.	65 & upwards.	Surbiton.	Tolworth.	Hook & St. Albans.	
Small-pox											
Measles	7	...	6	1	...	...	...	6	1	...	
Scarlet fever ... ..		...	...	...	...	...	...	...	...	...
Whooping-cough	7	3	4	...	...	...	...	4	3	...	
Diphtheria and membranous croup	3	1	2	...	...	...	...	3	...	...	6
Croup											
Fever :—											
Typhus											
Enteric											
Other continued											
Epidemic influenza	8	...	...	...	...	1	7	7	...	1	
Cholera											
Plague											
Diarrhœa	1	1	...	...	...	...	...	...	1	...	
Enteritis	5	4	...	...	...	...	1	4	1	...	
Puerperal fever											
Erysipelas											
Phthisis (Pulmonary Tuberculosis)	15	...	...	...	3	11	1	11	3	1	
Other tubercular diseases	2	...	1	...	...	1	...	...	2	...	
Cancer, malignant disease	11	...	...	...	...	5	6	9	...	2	
Bronchitis	23	3	...	...	...	3	17	15	6	2	1
Pneumonia	14	2	2	...	...	4	6	9	5	...	1
Pleurisy	2	...	...	...	...	1	1	1	1	...	
Other diseases of Respiratory organs	2	1	...	...	...	1	...	...	2	...	
Alcoholism : Cirrhosis of liver	3	...	...	...	...	3	...	2	...	1	
Venereal diseases											
Premature birth	4	4	...	...	...	...	...	1	1	2	
Diseases & accidents of parturition	2	1	...	...	...	1	...	...	2	...	
Heart diseases	24	1	...	...	1	7	15	18	5	1	1
Accidents	2	...	...	1	...	...	1	1	1	...	1
Suicides	3	...	...	...	...	1	2	2	...	1	
Found Drowned	1	...	...	...	...	1	...	1	...	...
All other causes	52	6	...	2	1	16	27	33	13	6	4
All causes	191	27	15	4	5	56	84	127	47	17	14



Deaths from stated Causes in Weeks and Months under One Year of Age.

		District (or sub-division) of Surbiton.	
Births in the year	{	Legitimate, 332.	Population, estimated to middle of 1909, 18800.
		Illegitimate, 14	Deaths from all Causes at all Ages, 191.
Deaths in the year of	{	Legitimate Infants, 22.	
		Illegitimate Infants, 5.	



**Report on the Administration of the Factory and Workshop Act, 1901,
in connection with Factories, Workshops, Laundries, Workplaces
and Homework.**

I.—INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances

Premises. (1)	Number of		
	Inspection. (2)	Written Notices. (3)	Prosecutions. (4)
Factories (including Factory Laundries) ...	10	—	—
Workshops (including Workshop Laundries) ...	60	13	—
Workplaces (Other than Outworkers' premises included in part III. of this Report) ...	6	2	1
Total ...	76	15	1

2.—DEFECTS FOUND.

Particulars. (1)	Number of Defects			Number of Prosecutions. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector (4)	
<i>Nuisances under the Public Health Acts :</i>				
Want of Cleanliness ...	1	1		
Want of Ventilation ...	1	1		
Overcrowding ...				
Want of drainage of floors ...	1	—		
Other Nuisances ...	12	8		
Sanitary accommodation—				
Insufficient ...	3	2	—	1
Unsuitable or defective ...	9	5		
Not separate for sexes ...	1	—		
<i>Offences under the Factory and Workshop Act :—</i>				
Illegal occupation of underground Bakehouse (s. 0) ...				
Breach of special sanitary requirements for Bakehouses (ss. 97 to 100) ...	7	7		
Other Offences (Excluding offences relating to outwork which are included in Part III. of this Report)...				
Total ...	35	24	—	1

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3.—HOME WORK.

Nature of Work.	Lists received from Employers.			Notices served on Occupiers as to keeping or sending lists.	Inspections of Outworkers' Premises.
	Lists.	Outworkers.			
		Con-tractors.	Work-men.		
Making and Altering Wearing Apparel ...	10	7	21	—	10

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the Year.	Number.
(1)	(2)
Important Classes of Work-shops, such as Workshop Bakehouses, may be enumerated here.	<div> <div> Bakehouses 14 Dressmakers 36 Bootmakers 24 Laundries 20 Tailors 20 Milliners 17 Other Trades 83 </div> </div>
Total number of Workshops on the Register ...	214

5.—OTHER MATTERS.

Class.	Number.
(1)	(2)
MATTERS NOTIFIED TO H.M. INSPECTOR OF FACTORIES :—	
Failure to affix Abstract of the Factory and Workshop Act (s. 133)	
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5) {	Notified by H.M. Inspector ...
	Reports (of action taken) sent to H.M. Inspector
	1
Other	Nil.
UNDERGROUND BAKEHOUSES (s. 101) :—	
Certificates granted during the year	Nil.
In use at the end of the year	1

