

THE

EIGHTH ANNUAL REPORT OF THE SANITARY BOARD,

THE FORTIETH ANNUAL REPORT OF THE
SANITARY COMMISSIONER,

AND THE

FOURTEENTH ANNUAL REPORT OF THE SANITARY ENGINEER,

MADRAS.

1903.

MADRAS:

PRINTED BY THE SUPERINTENDENT GOVERNMENT PRESS.

1904.

1992



A. H. L. 47
செப்பன்குபவர் பெயர்

செப்பனிருவதற்காக எடுத்த
கொள்ளப்பட்ட நாளி

செப்பனீட்டு முடிந்த நாள்

1600096

சுரபி பர்த்மம் ஆராய்ச்சி
மு. ப. ப. உதவியாளர்
கையெழுத்தம் கையெழுத்தம்

ආර්ථික විද්‍යා

CONTENTS.

	PAGE
EIGHTH ANNUAL REPORT OF THE SANITARY BOARD	1
PART I.—GENERAL SANITATION—	
Fortieth Annual Report of the Sanitary Commissioner for Madras	5
PART II.—SANITARY ENGINEERING—	
Fourteenth Annual Report of the Sanitary Engineer to the Government of Madras	42

35

EIGHTH REPORT OF THE SANITARY BOARD.

EIGHTH REPORT OF THE SANITARY BOARD

FOR THE YEAR 1903.

Constitution of the Board.—This remained unchanged.

2. *Personnel.*—Mr. W. B. deWinton, C.E., the President, having availed himself of one year's leave, his place was filled temporarily by Mr. A. H. Garrett, Acting Chief Engineer, Public Works Department, until February 1903. Mr. M. Hammick, C.E., continued to hold charge of the Civil Member's place till February 1903, when Mr. A. G. Cardew took office.

3. *Sanitary schemes.*—As in former years, the labours of the Board consisted principally in the examination of individual works of sanitary improvement, after detailed scrutiny of the plans and estimates by the Sanitary Commissioner and the Sanitary Engineer. One hundred and forty-nine such works, estimated to cost in the aggregate Rs. 17,66,394, came under the review of the Board during the year under notice. Of these, 50 were for Municipalities, 94 for Local Fund Boards, 1 for the Collector of Madura, 1 for the Collector of Salem, 1 for the District Magistrate of Anantapur, and 2 for the Inspector-General of Prisons.

4. The following are among the more important of the schemes reviewed :

	Estimated cost.
	Rs.
(1) Madura drainage	6,57,380
(2) Hospital at Nandyal	55,000
(3) Improvements to the Cuddapah water-works	Not matured.
(4) Yercaud water-supply	74,200
(5) Hospital at Bezwada	58,565
(6) Extension of the Tuticorin water-supply	4,300
(7) Vellore water-supply	3,60,000
(8) Improvements to the market at Coimoor	1,87,000
(9) Vegetable stalls in the market at Ootacamund	10,830
(10) Kodakūmal water-supply	62,250
(11) Improvement of the sanitation of Ootacamund	14,458
(12) Dispensary at Tirukkāttappalli	5,000
(13) Ootacamund drainage	Not matured.
(14) General market at Calicut	30,300

5. *Rules.*—The rules for the conduct of the business of the Board were revised by Government principally in the direction of allowing more discretion of local bodies in the carrying out of small works, and delegating to the Sanitary Engineer the power of according professional sanction to projects. Thus, while under the old rules no work of sanitary improvement estimated to cost more than Rs. 200 could be undertaken by local bodies without the prior approval of the Sanitary Board, the revised rules allow the carrying out by these bodies on their own responsibility of all works the estimated cost of which does not exceed Rs. 500. No work will in future come before the Sanitary Board unless the estimated cost exceeds Rs. 1,000, works ranging between Rs. 500 and this limit being finally disposed of by the Sanitary Engineer. Under these arrangements the Sanitary Board will be relieved of a mass of detailed work which can perhaps be equally well done by other authorities, and the smaller schemes of local bodies will be carried through with greater expedition than has hitherto been practicable. The larger schemes will continue to receive the amount of attention hitherto bestowed on them by the Sanitary Board, while provision has been made for furnishing this Board with an annual report of progress in regard to all works the execution of which it has specifically approved.

6. A considerable amount of attention was also bestowed during the year on the revision of the rules issued by the Board for the designing and execution of hospital buildings. The discussion with sanitary authorities was in active progress when the year closed.

7. The reports of the Sanitary Commissioner and the Sanitary Engineer contain details of sanitary work undertaken during the year.

(Signed) R. PARSONS,
Secretary, Sanitary Board.

4th May 1904.

5

PART I.

GENERAL SANTTATION.

FORTIETH ANNUAL REPORT

OF THE

SANITARY COMMISSIONER WITH THE GOVERNMENT OF MADRAS, 1903.

SECTION V.

GENERAL POPULATION.

RAINFALL.

1. In the district of Tinnevely, the north-east monsoon was 22·5 per cent. and in Madura 2·8 per cent. below the average of the ten years ending 1900. In South Canara, the south-west monsoon was 1·1 per cent. below the average. With these exceptions, the rainfall was above the average in both monsoons in all districts: the total for the Presidency being 29·6 per cent. above it. In estimating the influence of amount of rainfall, it must be remembered that, in the immediately preceding ten years used for this comparison, there were three years in which one or other of the monsoons was 50 per cent. less than in the preceding decennium. The best successive annual rainfall period during the last thirty years was from 1882 to 1887, in which both monsoons gave a good yield. Compared with this average, the 1903 rainfall was 22·9 per cent. in excess.

FOOD-GRAINS.

2. The year must have been disappointing to certain of the native trading classes dealing in grain. Their surplus or reserve of grain, at the approach of the monsoons, is largely the subject of speculation. Day by day, as the monsoon seems to pause before its final declaration of strength, the holder of grain manipulates the market. Both monsoons, however, gave at their origin so unmistakable evidence of their lasting power that there must have been little room for effecting movements of the kind; and selling out of useless reserves must have been more rapid than desirable in the interests of money-making. Although, with the exception of Tinnevely, the production of grains must have been fairly uniform as to size of crops, allowing for the suitability of individual localities for the growth of certain grains and for differences as to means of transport, the prices realized in various districts are less uniform than might be expected. Madras, where considerable capital is in the hands of a few men, shows a marked variation. Here rice per rupee was but 1 seer cheaper than in the previous quinquennium, which was one of high prices; ragi also showed, by no means, the same proportionate fall of price as elsewhere. The natural supposition is that if rice is selling retail in North Arcot at 14·5 seers per rupee, the wholesale dealer would find it pay him

to bring rice thence into the Madras market, where it was selling at 10·4 seers per rupee. If the ryots in the Chingleput district with good crops could have realized a price so much better than their North Arcot prototypes, they ought also to have had a specially prosperous time of it. But, there is no reason to think this is particularly the case. The fact probably is that, with the exception of the larger land-owners, the ryots fail to derive that full amount of benefit from higher prices in the market that might reasonably be expected. The man who fattens on good seasons is the sowcar in whose hands the ryot is forced, as a result of debts for useless ceremonies, and early and imprudent marriages. The effective control of the market in Madras, during 1903, by the sowcar is a case in point. The necessity for an Act for this Presidency that would free the ryot from the demands of the sowcar when these become unreasonable, seems to be very obvious. "The Deccan Agriculturists' Relief Act," which has done much good in Bombay, is the type of Act required.

GENERAL POPULATION.*

3. In the presence of a prosperous season, it is probable that emigration has been less active than in the previous quinquennium, when high prices prevailed; but data are not available, as the usual returns by the Revenue Board have not yet been issued by it. The natural increase of the population according to registration was 768,735. The number for which registration returns were received during the year was 37,315,611, leaving 897,101† of the total census population unaccounted for. As usual, there has been no want of effort on the part of Government and the officers concerned to bring about improvements of methods of registration, and the whole subject was again considered by Government during the year (G.O., No. 329, Rev., dated 25th March 1903). There are, however, two very evident flaws in registration in rural areas that cannot be ignored; one is the fact that control of Revenue authorities of zamindari villages is imperfect, and consequently as a rule the total average results in certain districts have been hitherto seriously reduced by errors owing to the omission of events. The statistics for 1903, however, show great improvement in this particular. The second is the impossibility of trusting registration to the existing agency, when a population assumes certain proportions. I have long held that the moment a town possesses 5,000 inhabitants, it is beyond the powers of the village revenue officials to keep a strict record of vital statistics. If this statement be true of villages containing a population of 5,000, still more is it correct of those of 10,000 and over, and I believe, whether compulsory registration be put in force or not, unless a special staff be employed such as might economically result by a combination of sanitary, vaccination, and registration duties under one department, that registration must still remain defective. Consequently, it has seemed to me necessary to secure that registration returns of towns should be so compiled as to exhibit separately towns having populations of above 5,000 and above 10,000, and showing where the registration is compulsory and where not; so as to be able to point out to the local authorities concerned where the flaws actually exist, notwithstanding the theoretical enforcement of compulsion. With the consent of the Revenue Board (Proceedings No. 177, dated 23rd May 1903), the statements of vital statistics are now procurable compiled in this manner. The ruling had been in force for six months during 1903. The statistics obtained show that my contention as to the size of towns affecting results is sound. Notwithstanding compulsion in both instances, the total average for towns containing over 5,000 and below 10,000 inhabitants amounts to 28·1 for births and 21·1 for deaths; whereas in towns of 10,000 and over, the total average rate for births is 25·2 and deaths 19·8. In some of the towns containing 10,000 inhabitants, under compulsory registration, somewhat

* Throughout the Report rates per mille only are quoted, unless it be specifically stated otherwise: consequently, the constant repetition of the words "per mille" is not thought necessary.

† This figure represents the combined populations of (1) the Agency tracts of Vizagapatam (850,960); Bangana-malle State (32,259); Amindivi islands (3,608); and the Laccadives (10,274).

startling results are obtained; thus, in Yemmiganuru, in the Bellary district, the birth-rate is said to be 9·8 and death-rate 15·8; for Gopichettipolliem in Coimbatore district, the birth-rate returned is 7·8 and the death-rate 4·3; in Gudur in Nellore district, the birth-rate is declared to be 11·5 and death-rate 10·2; whilst Nellikuppam in South Arcot district, not to be outdone by its northern compeers, is content with a birth-rate of 3 and a death-rate of 2·9. The attention of the authorities concerned has been drawn to these results, and, as they are unusually bad, I had no struggle with my conscience in doing so; but, it seems to me a hopeless task for them to exhibit anything approaching correct birth and death-rates in towns possessed of populations of 10,000 or over, if the efforts of the Village Heads alone are to be relied upon. In Ganjam, statistical results are uniformly untrustworthy, owing to the apparent impossibility of the local authorities securing returns from the same number of villages monthly. In G.O., No. 628 L., dated 4th July 1902, Government directed Collectors to select certain localities in their districts and to cause registration to be so effectually supervised that the cause of former inefficiency should be ascertained. Up to date, I am in possession of reports from only four Collectors on this subject. Beyond giving reason for a few cases escaping detection, no new fact of importance is revealed, except that in one union, where compulsory registration was in force, there had been neglect to require attendance of the Registrar at definite hours.

4. To all Municipal Registrars has been sent a pamphlet written by my late Personal Assistant, Assistant Surgeon Kistnamurthi, in which all common diseases are described in simple language. This, in addition to the course of instruction to municipal registrars by District Medical and Sanitary Officer previously arranged for, should go towards improving accuracy of registration of death causation.

5. In municipal areas, disobedience to compulsory clauses of the Act was followed by prosecution in 1,264 cases.

BIRTHS IN DISTRICTS.

6. The total number of registered births being 1,165,080, the birth-rate of the Presidency during 1903, when reckoned upon the Census population, is 31·2, against the average of the preceding 10 years ending 1900 of 28·5, of 25·1 for 1901, and 28·2 for 1902. A certain amount of this increase is discounted by the fact that, when reckoned upon the estimated population, the birth-rate is 30·6. Nevertheless, there is room to think that some improvement has occurred in registration, and no room to doubt that removal of the depressing influence on fecundity of high prices of food has been recovered from, as an effect of the prosperous seasons of 1902 and 1903. In my Report of 1901, I pointed out that the districts of Chingleput, North Arcot, Madras, Kistna, and Kurnool suffered special diminution of their birth-rates, in all probability in response to this influence; and I suggested, in my Report of 1902, it would be of some interest to ascertain whether these districts, which showed decreased birth-rates out of proportion to those of other districts which had been less affected, would exhibit a reaction at a greater rate than these, as soon as the results of better food supplies had time to operate. Taking Chingleput, it is found that, in 1901, the birth-rate was 26·6; this has increased to 39·2, thus exceeding the total average by 3·6. Kistna has from a rate of 27·2 advanced to 33·5. Kurnool from 23·3 has advanced to 31·3, thus exceeding its total average of 30·2. Madras has advanced from 37·1 to 39, but it has not yet reached the total average of 40·9. Here, as already noted, prices have not fallen to the same extent as elsewhere. North Arcot from 19·1 in 1901 has advanced to 29·1 and, therefore, has exceeded the total average by 1·4. On the other hand, the birth-rate of the year has exceeded the total average in 15 of the remaining 17 districts, which were also subjected to the strain of high prices but in a less marked degree. Of these, Nellore and Malabar should have also been selected by me. There is, therefore, sufficient reason to regard the rate of recovery in the affected districts since 1901, with the exception of Madras, as proportionately greater than during the period when prices were continuously nearer normal. Such facts as these go to disprove the popular opinion that high prices of food and epidemics specially affecting infantile life, cause

decrease in the population, or, put in another way, that scarcity of food is a divine dispensation in respect to increase of population; there are physiological reasons why this opinion would be true only if the causes were permanently in operation.

DEATHS IN DISTRICTS.

7. Notwithstanding the increased birth-rate and its frequent sequel of increasing the total mortality by increased infantile deaths, the total death-rate of the Presidency was but 22.2 against the total average of 21.4, and, when reckoned upon the estimated population, 21.7. No notable increase of mortality has occurred except in Anantapur, Coimbatore, Salem, South Canara and Malabar. In the case of the first four districts, the increase is due to plague. In Malabar, irrespective of improved registration (which is offset from the simultaneous better birth-rate registered side by side with the increased mortality), the increase seems to have been chiefly due to cholera. Exclusive of cholera, small-pox and plague, the total mortality of the Presidency was 776,964, affording a rate of 20.7.

8. Reckoned upon registered births, the total deaths of infants below one year of age was 177.6 against 168 of the preceding year—an increase largely due to mortality of infants in plague-infected areas. In both years, the ratio of deaths was practically the same, namely, 100 males to 90.1 females in the year 1903 against 100 males to 90.2 females in the year 1902. In 12 districts the average of 9.9 per cent. difference between male and female deaths was exceeded. The highest rate registered was in Madras and Chingleput districts, where it amounted to 286.1 and 210.6, respectively. It is probable that the marked endemic prevalence of diarrhoea and dysentery in these districts had much to do with this result.

BIRTHS IN MUNICIPALITIES.

9. 85,824 births were registered in municipalities in a Census population of 2,406,455, representing a birth-rate of 35.7. On the estimated population, the birth-rate would be 34.6. The ratio of male to female births was 100 to 94.3. This may be contrasted with the ratio for England and Wales from 1896 to 1900, which was 100 males to 96.6 females. When compared with last year, Coimbatore, Ootacamund, Tirupattūr and Vellore, exhibit slight decreases in their respective rates which may be accounted for by exodus of the people during plague, and by less efficient registration of births during stress of preventive work. But, on the other hand, Adoni and Bellary, which were similarly affected, show no such decrease. Cocanada, Masulipatam, Periyakulam, Kodaikanal, Tirupati, Vaniyambādi, Tinnevely and Srivilliputūr show a falling off in results, which may fairly be ascribed to careless registration. With the exception of the towns named, an increase of the birth-rate has occurred in all municipalities: a result which may be ascribed, in part, to improved registration and, in part, to relief from the conditions incident to dear food which have already been referred to. The highest registered birth-rate of 50.2 is reported by Vaniyambādi against that for the preceding year of 63.1. This falling off of the normally high birth-rate of this town, notwithstanding the continued presence of a large section of Muhammadans who are well off and possessed of zenanas, is probably due to the fact that the population has suffered heavily from plague, and that some amount of emigration has occurred. Of municipal towns not possessed of this abnormal character of the population, Karūr has shown the highest birth-rate, namely, 45.3.

DEATHS IN MUNICIPALITIES.

10. The total mortality rate for municipal towns for the year, namely, 32.7, shows but little change when compared with that for the preceding year, namely, 32.5. The chief change in causation of mortality was a slight decrease in the case of

cholera and small-pox, and a slight increase in the mortality from plague. In the municipal towns of Coimbatore, Ootacamund, Coonoor, Vellore, Vaniyambādi and Tirupattūr, the increased mortality was due to plague. In Chicacole, Berhampur, Palni, Calicut, Gudiyattam, Dindignul, Cuddapah, Parlākimēdi, Karūr, Cochin, Trichinopoly, Mannārgudi, Vizagapatam and Tiruvannāmalai, the apparent increase is due to increased activity in registration, as the birth-rate has synchronously increased. In Tellicherry increased mortality is exhibited under "dysentery and diarrhoea," "respiratory diseases" and "fevers." Such a combination would give rise to suspicion of the existence of unrecognized plague. The Civil Surgeon informs me that he has no reason to suspect that this has been the case. In Salem, there has been a remarkable increase in the efficiency of registration, as the birth-rate has advanced from 37.1 in 1902 to 43; the heavy death-rate obtained is largely due to this cause, as, if deaths from cholera, etc., be subtracted, the more reasonable mortality, having regard to the birth-rate, of 34.0 per mille is arrived at. It is probable, however, the full birth-rate has not yet been secured in this municipality, but I think it very unlikely that cases of death escape notice; as the town has throughout the year been under the system of observation for plague, and, by personal inspection, I have ascertained that the duty of checking mortality is very carefully carried out. The severe rate of 162.4 in the case of Vaniyambādi is in part accounted for by the heavy incidence of plague in the town, owing to the inhabitants obstinately refusing the precaution of evacuation. This was also added to by a number of deaths during floods, which swamped a portion of the town in November 1903.

11. In 1902, the total average infantile death-rate in municipalities reckoned upon the registered births per mille amounted to 233.3 and, in my Report for that year, I pointed out that the decline of 4 per mille compared with 1901 recorded for that period probably represented the withdrawal of the influence of high price of grain upon the adult, and its indirect influence upon infantile life. This remark is justified by the practically unaltered figure for 1903, which is 234 against 233.3 for 1902. The proportion of male to female deaths among infants below one year of age was 100 to 88.5 against 90.2 in the previous year. By way of contrast I may state that the proportion for England is about 100 males to 79.5 females. It is possible the difference may reflect in some degree the less care likely to be taken of females than males when sickness overtakes them in this country by the uneducated classes. The average difference of 11.5 per cent. between male and female deaths was exceeded in 31 towns, in 19 of which the variation was more than 20 per cent. Whilst this total average rate is decidedly heavy and must imply great avoidable mortality, those for Masulipatam (288), Ellore (299.6), Guntūr (331.1), and Bezwada (333.7) are records of a lamentable loss of infantile life. These towns are within the districts of Kistna and Gōdāvari, where the inhabitants must have much the same customs and method of treating infants. The only other places outside these districts where the same results are approached are in the crowded and insanitary City of Madras (286.1) and in Tuticorin, which is famous for its brackish and unsatisfactory water-supply (288). Unfortunately, to arrive at a conclusion as to the nature of this large mortality, information such as is not now available in statistics furnished for this report would be necessary; that is, the actual nature of causation of death has to be ascertained, and even then one is confronted with the difficulty that the causation stated by uneducated mothers must be received as sufficient diagnosis by municipal registrars. It is in the investigation of such matters that my suggestion to group registration according as they have been verified by medical diagnosis or not, would have been of peculiar value (G.O., No. 1767 M., dated 26th November 1903). In the meantime, the matter is one which should engage the attention of the District Medical and Sanitary officers concerned. As soon as the medical aspects of the question are at disposal, the sanitarian's function could doubtless be exercised with value; but this preliminary is necessary. One of the genuine predisposing causes of "convulsions" which form so frequent a cause of death as registered, amongst native children certainly is the means taken by anxious mothers to prevent them, namely, by producing open and slow healing wounds subject to contamination by the earthen floors of dwellings by branding them with a red-hot needle on the abdomen; although I think this is less frequent than in former days. If actually these convulsions be proved to be due to tetanus,

it would be most desirable to attempt Calmette's preventive treatment by the use of dried anti-tetanic serum powder. This, on the opening of the Serum Section of the King Institute is a point that will be kept in mind. In any case, disregarding the trite fact that heavy infantile mortality bespeaks a high grade of local insanitary conditions, it is certain that the sanitary reformer and the educationist have before them a duty in securing that native mothers should better understand the care of infants. In such matters, by the spread of knowledge by means of pamphlets, Mrs. Brander, a late Inspectress of Schools, has to my knowledge done much good; but there is ample room for more lady workers.

CHIEF DISEASES.

SECTION VI.

GENERAL HISTORY OF CHIEF DISEASES.

CHOLERA.

12. There was a decline in the incidence of cholera in the population when compared with the previous year, the rate being 7 against 8. The districts most severely affected were Madura and Malabar. The conditions in Malabar, in the rural parts, are not at first sight favourable to the spread of cholera, owing to the frequency with which the people reside at distances from each other, and utilize water-supplies which are within the private control of individuals. Nevertheless, there are portions of towns, especially parts inhabited by Moplahs, which present exactly the opposite features: there is much overcrowding and the water-supplies are open to contamination. It is customary for local officials to regard the former condition of affairs as typical of the district, and to hold that sanitary requirements are very few. Guided by such opinions, the Malabar District Board last year (1902-1903) spent under the head of sanitation only 0.23 per cent. of the total revenue against an average of 5.57 per cent. expended for that purpose in the other districts of the Presidency. Whatever impression be conveyed to the casual observer of scattered residences and ample water-supply, there can be no doubt there is much solid sanitary work that demands attention in this district. Certainly the idea that no special sanitary care is requisite does not seem to fit in with the fact that typhoid appears to have a special predilection for Malabar, and that it returned the heaviest cholera mortality during 1903. The next district in the order of severity of affection is Madura, where the mortality from this cause was 4,422. Possibly, the large number of zamindari villages in this district handicaps local authorities as to efficiency of sanitary control during epidemics. In any case, neither here, nor in any other area affected with cholera under District Boards, is there reason to believe that the Sanitary or Medical staff employed was sufficient in numbers to cope with the duties on which they were placed.

13. At Guindy, in the Chingleput district, an interesting outbreak came to my notice. A bricklayer, resident in Mylapore, was attacked with cholera when working in the compound of a public building situated on the banks of the Adyar. He was known to have vomited and purged on the banks of the river. The same night there was rain. In three days cholera made its appearance in the village at Guindy, which obtained its water-supply from a spot about a quarter of a mile below it on the same bank. A temporary water-supply was opened by the people; but 24 deaths in the population of 431 occurred before the epidemic was arrested. With one exception, all cases had used the water up to the date when it was declared infected. It so happened that from the same source the Government house at Guindy was supplied after filtration for minor domestic and garden purposes; drinking water being obtainable from a different source. The household was absent during the period, but, although a few servants were present, none of them were attacked. Seeing that this part of the river, in spite of magisterial injunctions to the contrary, is liable to local contamination as well as from the washings of clothing, it certainly is not a spot that can commend itself as a fit source for the water-supply of a large household, notwithstanding its rough filtration and restriction to minor offices. I thought I had obtained in this case an "object lesson" that would not be thrown away upon the local Taluk Board. Therefore, with some confidence that my suggestion would be adopted, I forwarded a scheme for a small-water supply at 10

gallons per head for the village to be derived from a clean subsoil source. Lifting was to be fulfilled by a kerosine-oil engine pumping to an elevated iron reservoir, whence it was to be distributed by pipes and taps throughout the village. The Taluk Board of Saidapet was not, however, to be thus hastily disturbed from that state of equanimity with which it has for years regarded sanitary matters. With the District Medical and Sanitary officer's concurrence, they pointed out that the same well which would have been protected under my scheme was already available for the people, and that "during the prevalence of cholera, the Taluk Board would protect the well from contamination by appointing a watchman." It did not seem to enter into the Taluk Board's calculation to consider this particular well (unprotected mechanically) might be the first contaminated, and be the means of the spread of cholera, notwithstanding the appointment of that constant scapegoat of the sanitary conscience of public bodies, known as the "tank watchman." I quote this little incident, as evidence of the difficulty that is encountered in securing even petty sanitary advance by rural bodies. Although Rs. 2,410 may be regarded as a large sum for a Taluk Board to provide, still it is obvious the arrangement would have represented once and for all a permanent improvement in the village concerned. The upkeep of a kerosine-oil engine neither demands great skill nor unreasonable expenditure for fuel. The question of attempting to persuade local bodies to undertake methods of protection of water-supplies by definite mechanical means, instead of by the omniscient tank watchman, has been much pressed by Government in its Reviews of Reports during 1903, and its importance will, it is hoped, in time force itself upon notice.

14. In municipalities, the incidence of cholera decreased from a rate of 1 of the previous year to .9. The towns most severely affected were Salem (9.8), Periyakulam (5), Cochin (4.9). These towns have notoriously evil water-supplies. In Salem, the washing of clothes proceeds at portions of the river above the town from which water is drawn by people for drinking purposes, although during cholera prevalence its use is discouraged. Into this river is discharged much of the drainage of the town, although of late the Municipal Secretary, who is a Certificated Sanitary Inspector, has managed to persuade the Council to divert a considerable amount of it to sewage filters, so as to use the filtrate for farming. At Periyakulam, the whole washings of the town proceed to the particular part of the river, which forms the chief water-supply. At Cochin, the supply obtainable locally is brackish, and is largely drawn direct from shallow unprotected holes dug in the sandy soil within inhabited areas. The improvement of the water-supply in these three towns has long been considered. In the case of Salem and Periyakulam, the question is chiefly one of finance; whereas, in Cochin, there are certain physical difficulties that have to be overcome. In this latter case, however, the problem of protecting the existing water-supply against both cholera and filariasis (for which the place is notorious) is of the most simple nature: but the Council continue to regard this aspect of the question with apathy. In the meantime, these towns afford good examples of the results of unprotected water-supplies.

15. So far as the method of spread of cholera is concerned, I see no reason, with further experience, to modify the views expressed by me in my Report for 1893 (page 58 *et seq.*). The chances are, irrespective of well-recognized facts following introduction into a locality, that, in certain areas, the cholera microbe exists in water in a modified or feeble condition and that the epidemic appearance is due to enhancement of its virulence following inflow of suitable pabulum especially from the subsoil and possibly from the surface. At any rate, in this Presidency, cholera is confined in certain districts to certain months with clock-like regularity. The bacteriologist has left the sanitarian with no more information than was obtained by Koch originally as to the behaviour of the cholera microbe. It seems to me there is plenty of bacteriological work applicable to epidemiology that should secure attention. As regards distribution, the sacred river Cauvery is obviously an active agent.

SMALL-POX.

16. Vaccination is compulsory in all municipalities, and in only 145 of the 379 Unions in the total area of 142,121 square miles of the Presidency. The fact, however, that of the total municipal population of 2,466,455 only 0.1 died from small-pox goes to show that, in spite of possible frequent chances of importation, the influence of protection afforded by vaccination is demonstrable. In rural areas, 0.4 per mille (or 14.667) of population died of small-pox, against 0.7 (or 22,926) in the previous year. Of these deaths, 6,984 were below 1 year of age, giving a rate of 6.47 per mille of births; whilst 4,017 were between 1 and 10 years of age, or at the rate of 0.46 per mille of the population of that age. In municipalities, there were 71 deaths of infants below one year of age or 0.83 per mille of births, and 127 deaths between 1 and 10 years of age, or at the rate of 0.21 per mille of the population of that age. These figures show clearly the advantage of the more prompt vaccination of infants in municipalities than now occurs in rural areas, and especially the influence of the more uniform protection afforded to children under ten years of age which necessarily follows. The large mortality of children under ten years of age from this preventable disease is a matter that has engaged the attention of Government, for some time past; and it recently called for a scheme for the reorganization of the Vaccination Department coupled with compulsory vaccination in rural tracts. This should prove a most valuable reform and should, within a short period of its inauguration, be capable of showing much life-saving power (G.O., No. 1558 L., dated 7th December 1903).

PLAGUE.

17. A total of 13,291 deaths from plague was recorded; of which 6,203 were cases of females and 7,088 cases of males. The total rate of mortality in the aggregate population of the districts infected was 6.5. Of this figure, the Bellary district contributes the high rate of 6.2. The districts indigenously affected were Anantapur, Bellary, Coimbatore, Kurnool, the Nilgiris, North Arcot, Salem and South Canara. Plague has therefore acquired possession of the central districts of the Presidency. Fortunately, the epidemic in South Canara has never assumed a large proportion, and no spread along the West Coast has yet occurred. As a special report is annually made on the subject by me, it is not necessary here to enter into details. I may however state that the policy pursued by the Madras Government has varied little from the commencement of plague in Bombay up to date, except that the great safeguard of early evacuation has been transgressed, so as to give the enemy a decided advantage. The result has been, on the whole, the contesting of the advance of plague inch by inch, as contrasted with a policy that would first permit of its presence being demonstrated and then taking action. The system is not without the drawback of expense; but even tinellottes cannot be made without breaking eggs. During 1902-1903, the total spent on behalf of Local Fund Boards and municipalities under plague charges was Rs. 4,03,927, so that the contribution per head of the population of the Presidency for the year was 2 pies. So far as it is possible to gauge facts, it would seem that in restraining the advance of plague throughout the Presidency, the money demanded is well spent, in that trade and lives are husbanded. Even if it so happens the advance of the disease should prove irresistible, and the weak measure of attempting to restrain the spread of the disease only after it is proved to be actually present, be resorted to, instead of attempting to prevent its securing a foothold, which is the leading feature of the existing policy, the chances are considerable that the inimical result upon public funds would be even more marked than at present, as the producer would be more seriously crippled.

18. In my report of 1902, I invited the attention of Government to the lack of bacteriological knowledge that should prove a safe guide to the sanitarian, with special reference to the theory of "recrudescence," which is, up to date, popular in India in connection with the supposed survival of the microbes on or in

the soil. It seems to me that it is important that this question should be thoroughly threshed out by a specially appointed bacteriologist. The technique of such a subject is beset with many difficulties, like other matters that require a certain amount of perseverance to overcome them, but it would be absolutely economical to appoint a specialist capable of working out the subject fully, even if a liberal salary for several months and an honorarium were to be debited to "plague charges." At any rate, from the sanitarian's point of view, it is absurd to go on spending money in disinfecting with such rigour the walls and floors of houses, without full knowledge of the microbe's capability of survival and fitness to increase in such environments. If, for instance, the bacteriologist would relieve the sanitarian as to burden of doubt as to the period of survival of the plague microbe in earthen floors and walls, and especially as to possibility of its "growing through" soil, as apparently on poor grounds maintained by Yersin, it would be a cheap, easy, efficient, rapid and cleanly method to apply the intense heat of the kerosine oil blue flame (8,000—25,000 candle power is easily secured) under air pressure at the end of flexible tubes to all indestructible surfaces, so that by merely painting over them death of the exposed plague microbes would be certain. This I have already shown by bacteriological experiment to be the probable result. But such results, when secured otherwise than on the surface of soil, are rendered dubious by the presence of air and moisture in the interstices, and are far too slow for work in practice. Surely, an answer to the question is worth having and paying for. In every village in this Presidency, kerosine oil could be obtained, whilst the machinery to give air pressure need be but of the most simple nature. The method of recording plague in this Presidency and the passport system enable each case of first appearance of the disease to be traced with fair accuracy. Investigation of records by me for this purpose goes to prove that town after town that has been infected has suffered solely from importation, and not from recrudescence of the disease of a past season; and that, similarly, it by no means follows that a town once infected may be visited again by the disease. The truth seems to be that plague is kept up not by germs retaining their vitality in formerly plague-infected dwellings, but by direct descent through cases that are not detected by the local authorities, either as a result of too early withdrawal of the sanitary staff during the hot season, or its too great attenuation for the purposes of economy, so that there is failure to maintain correct surveillance of the population concerned. Therefore, the idea that plague must exist in this or any other country for a number of years until its cycle has been fulfilled, seems to me altogether theoretical; in practice, an honest appreciation of the fact that the surveillance of the population should be as active during the hot season when plague wanes, as during the cold season when it waxes, would definitely refute an opinion that is an excuse for, and breeds, apathy. Above all things, much more attention seems to be necessary to secure plague-infected clothing than is possible under a mode of disinfection which requires soakage in liquid disinfectants, and its temporary removal from the owner. The best way to secure confidence and the clothing of inhabitants is undoubtedly by the use of a good class of steam disinfectors, which is capable of doing its work rapidly at the doors of the infected dwellings in front of the owners concerned, so that they find themselves possessed of their clothing without appreciable deterioration. This view the Government of Madras is now attempting to meet and one light steam disinfecter (Alliot & Paton) has already been imported, and it is hoped before next plague season this Presidency will be in possession of a number of light steam portable disinfectors possessed of vacuum and steam pressure arrangements, worked by means of kerosine oil instead of solid fuel. The use of kerosine oil will enable the apparatus to be lightly built, whilst it possesses the advantage of being procurable in every bazaar in the country. Putting aside the risk of being re-infected from foreign areas, I feel convinced that the energetic working of staffs during the hot weather and more effectual arrangements as to disinfection of clothing than at present existing, would render it possible to absolutely stamp out plague. Such statements ignore infection amongst rats. But I have never yet heard of proved recrudescence through rats. There is against this the evidence of the second appearance of plague in Glasgow, but the chances are there as elsewhere fresh importation had occurred. Rats may be trusted not to stop in

any place where their lives are unsafe by reason of disease, or are rendered uncomfortable by reason of various appliances to that end used by human beings. Undoubtedly, much of the plague infection of this Presidency has been derived from Mysore where there is an unusual method of treatment of plague, the chief feature of which has been that no compulsion has been applied. This is closely allied to the so-called "common-sense plague policy." During the year, a conference with the authorities concerned in Madras and in Mysore was held, at which I was present. Although that grade of sanitary co-operation with this Presidency which, it was hoped would be secured, has not been fully attained in Mysore, the Government of that territory has at least sanctioned a staff, the object of which is to secure inter-communication between Mysore and Madras districts. Nominally, at least, disinfection is now compulsory. It is hoped that, during the ensuing year, Mysore may prove of less danger to Madras than it has hitherto.

FEVERS.

19. In municipalities, the death-rate from fevers was 6.3 against 6.7 in the preceding year, and in districts, 8.4 against 7.7. Having regard to the fact that plague prevailed in certain of the districts, the small variation under the head of "fevers" and absence of a marked increase under "all other causes" bespeak a fair amount of accuracy as to finding cases of plague, and, therefore, the prevention of their being placed under incorrect heads of registration. The town of Madura shows an increase under fevers of 1.2. The Chief Certificated Sanitary Inspector has shown that, in several localities of the town, the anopheles mosquito is present. A possible rise of fever prevalence in this district should be watched for by the local authorities with care. Under the influence of the Periyar project, large tracts of formerly dry land surrounding the town are being placed under wet cultivation. It is possible that the necessary conditions of a human germ bearer and a readily-infected species of anopheles may yet conjointly exist, although at the present time so far as the rural tracts are concerned and statistics disclose, no evil results have occurred. Nevertheless, the necessity throughout this district for carefully getting rid, by efficient drainage, of the water that has fulfilled its function of irrigation should be held in mind. Kurnool shows a decrease of 3.9 of the fever rate. The registration is probably fairly correct when judged by the existence of an increased birth-rate, the total diminished death-rate, and the lack of tendency to quote deaths under any other particular head. This diminution is therefore apparently in direct response to altered conditions as to irrigation surrounding the town. In 1881, when Vice-President of this Municipality, I was able to prove by records in my possession to the Municipal Council that the introduction of malarial fever into the town immediately followed the large use of irrigation in the vicinity, and advised that a zone of a mile radius should be established round the town, in which no wet cultivation should be permitted. Fortunately, the belief deduced from long observation by formerly received authorities as to the influence of moisture on earth and its removal by drainage, which existed at this time, under the impression that the earth contained the germ (which may yet in part be proved correct) made no difference as to the results. On adoption of this measure, a marked fall of the fever rate occurred: but, as years passed, the Council became less strict in observance of the zone and the fever rate increased. Government recently ruled, on a reference by the Collector of the district, that not the mile zone but the whole of municipal limits* should be free of wet cultivation. Cuddapah, which shares with Kurnool the unenviable notoriety of being highly malarious, is also about to secure a dry zone within its municipal limits, which will doubtless prove helpful in restraining the conditions favourable to the incidence of malarial fever. On the opposite, Masulipatam is increasing its wet cultivation in the immediate neighbourhood of the town. I found in pools on its outskirts no lack of anopheles held to be good malaria bearers. Here, the expenditure of considerable capital for conducting

* The change has not materially altered the size of the Zone.

drainage on the method employed in Holland would be necessary to secure efficient results: but much valuable land would thereby be rendered arable, and would be an offset to expenditure.

20. The question of the extent to which malarial fever prevailed in the Madras City has been a matter of medical and sanitary discussion for several years. That malarial fever can be acquired in Black Town is indubitable; but it has been long perceived that the cases recognized as malarial fever and accompanied by enlargement of the spleen did not respond readily to quinine treatment, and pursued a curiously obstinate course. In my own experience, a marked characteristic of this form of Madras fever was the frequency of the occurrence of lobular pneumonia as a complication. Although the subject is yet incomplete, the highly important researches of Captain Donovan, I.M.S., who found certain micro-organisms in the spleen, which have been named after him *Piroplasma Donovanii*, and an investigation which subsequently was opened up, under the orders of the Government of India, by Lieutenant Christophers, lately on duty with the Malaria Commission, go to prove that this fever is not malarial but of a type depending upon the presence of the specific bodies discovered by Captain Donovan, of which the nature is not yet fully ascertained. If this enquiry be successful, it will form an important addition to medical science generally, and will prove of special benefit to the City of Madras which has so long suffered from this hitherto misunderstood form of fever.

21. In June, 1900, I sent a Circular inviting all Local Bodies to take advantage of the discovery of Ross as to the connection between the mosquito and spread of malarial fever, and especially pointed out that, granted the hitherto recognized policy of drainage of large areas was beyond their means, the palliative mode of causing destruction of mosquito larvae in pools by kerosine and of the germ in the human being by means of quinine, was at least open to them. For this end, they were advised to select areas for experiments. With the exception of the Kurnool District Board, which put aside a sum of Rs. 500 for an experiment, no action of importance followed. This seemed to me greatly due to absence on the spot of persons trained to observing mosquitoes and their larvae. I consequently, as stated in last Report, assembled a class of Sanitary Inspectors at the highly malarious village of Dhone in the Kurnool District, and trained them for the work. Since then, I have attempted to follow up action taken by the men on their return to their municipalities, by means of reports through the Chairmen of the Municipalities concerned. They were particularly directed to insert in a map of their towns the spots where anopheles pools were found, and ascertain the subsequent influence of their disappearance under their efforts towards destruction, or removal of the water by filling in or draining. With few exceptions, Certificated Sanitary Inspectors have taken up the matter energetically and the Chairmen concerned have encouraged their efforts. Reports of special interest as exhibiting progress have been received from Certificated Sanitary Inspectors G. C. Nallaswami Pillai (Madura); K. Seshagiri Rao (Cuddalore); T. C. Sankara Kurup (Calicut); S. Sitharama Aiyar (Cocanada); T. S. Venkatarama Aiyar (Conjeevaram); M. Venugopalaswami Pillai (Bellary); and S. Velayudam Pillai (Palamecottah). In reviewing progress of efforts towards extermination of malaria (G.O., No. 1343 L., dated 17th December 1902), the Surgeon-General called the attention of Government to my proposal made to local bodies to select areas for experiment, and suggested that definite orders as to this should be issued. The result has been that Government has directed that funds be allotted by local bodies for experiments in six carefully selected areas, having for their object the extermination of malaria by the conjoint use of mosquito larvae destruction, administration of quinine to human beings, and minor engineering works.* The officer selected for the duty will work under this office, and will have attached to him an intelligent engineering subordinate. There are here, therefore, the elements for a thoroughly honest trial of modern methods of dealing with malaria.

* The necessity for a reversion to the ancient policy of making engineering works the first line of defence, is well borne out by Lieutenant Christophers' candid estimate of results secured in Mian Mir (Second Report of the Anti-malarial operation at Mian Mir, 1901-1903).

DYSENTERY AND DIARRHOEA.

22. In rural areas, the total average death-rate from dysentery and diarrhoea amounted to 1.1 whereas, in municipalities, it amounted to 4.6; in the former case, the highest figures reached were in the Nilgiris (3.3), in Malabar (2.8) and in Chingleput (2.7). Such rates are however small when compared with those obtaining in the municipal towns of Palamecottah (14.9), Tiruvannamalai (11.0), Vizianagram (8.1), Cochin (7.7), Periyakulam (7.5), Coonoor (7.4), Gudiyattam and Vizagapatam (7.2 each), Tuticorin (7.0), Parlakimedi (6.9), Masulipatam (6.8), Chingleput and Vellore (6.6 each), Tirupati (6.1), and Conjeevaram (6.0). It would serve no good purpose for me in this Report to descant upon the individual local causes which lead to these results. It is obvious that the aggregation of human beings upon a site, as found in large towns, is more favourable to the propagation of the causes of diarrhoea and dysentery than in the more thinly populated villages of rural areas, and that defects of water-supply and of badly conserved soils are more liable to exhibit their mark in a locality where certain conditions of natural soil and surface and subsoil drainage exist than in others. The more experience accumulates in reference to these diseases, the more it is evident that a town cannot rely upon abolishing them by simply taking a new supply of water, and that the supply must be so distributed that its inhabitants shall not have recourse to inferior water at intervals, and, even when this is attended to, that the soil must be kept pure, as a result of correctly conceived and correctly carried out conservancy systems. There are eleven towns at the present time which possess expensive water-supply systems in this Presidency to which these criticisms are applicable, whilst in no case can it be said that the conservancy system of any municipal town is complete. It is a curious fact that a people who are possessed of scriptures which are spoken of with reverence by them, and which lay down rules of great hygienic value as to the disposal of human excretions, should find no representative in Municipal Councils that would take up the matter of conservancy seriously. In a town famous for its advance in European education, where the municipal representatives are largely vakils, always profoundly happy at the prospect of a debate at its Council meetings, I found, in a thickly-populated area, up to the door of an important temple, a normal not casual place of easement.

INJURIES.

23. The rate for injuries noted for the year 1902 was maintained during 1903, namely, 4. As usual, suicides of females were in greater proportion than those of males, namely, 100 of males to 125.3 of females.

ALL OTHER CAUSES.

24. Under this most unsatisfactory heading (so far as nosological purposes and the possibility of locating diseases are concerned), 45.9 per cent. of the total mortality was registered. Having regard to the presence of plague in the Presidency, the possibility of an increased number of events being registered by the people under this heading, with the object of getting rid of plague measures, is necessarily of importance to local authorities. Notwithstanding that the total plague cases for the year were 2,496 more than in 1902, the advance under this head, granting there is any necessary connection between the two, does not seem to have been of much importance, namely, 1 per mille more than the former year (9.2). The increase was not confined to districts affected with plague.

SECTION IX.

SANITARY WORKS—CIVIL.

MUNICIPALITIES.

25. It goes without saying that the possession of a soil free from contamination by rubbish and more especially by human excrement, is of prime importance to the health of a town. In recognition of the value of soil cleanliness, in the present day, many towns in Great Britain do not scruple at great expense to flush narrow court-yards within insanitary areas, at regular intervals. The late Boer war afforded a repetition of a familiar hygienic lesson, by again proving that the uncleanly soil of even temporarily inhabited areas was followed by a distribution by means of dust, flies and water, of the causative agents of diarrhoea, dysentery and typhoid, with the attendant heavy, yet preventible, mortality. Municipal Councils, although undoubtedly improving year by year in recognition of the importance of soil cleanliness, still leave much to be desired in this respect. For instance, in the town of Madura, which has a population of 105,984 and therefore ranks as the second largest town in the Presidency, the number of public latrines is eight specially built for the purpose (and, in this respect, it is worth remembering that these latrines are usually for males and females in one spot and, therefore, they should obviously be quoted as four only) together with four brick wall and one mud wall "simple enclosures." It also possesses 12,000 so-called "private latrines," of which, however, only 5,356 (serving a population, say, of 26,780) are cleansed by municipal agency, whilst it is doubtful if any form of systematic cleansing of the remainder really takes place unless that agency be employed. Under such circumstances, a large part of the duty of the night-soil collecting staff consists in perambulating the nooks and corners of inhabited areas. Under this system even if the faecal matter were removed, it cannot be imagined that it is so fully effected as to leave the soil uncontaminated, and that dust and flies may not serve as distributing agents of pathogenic germs. In quoting the case of Madura, I have merely chosen it for illustration, on account of its large population; its incomplete system of conservancy is but typical of what occurs in a less degree in certain other towns. On the other hand, it must not be thought that advance however slow has not been made steadily from year to year. Thus, one of the errors constantly made by Councils is the neglect of the removal of the night-soil in favour of rubbish. Hence, readjustments of staffs demanding an increase of scavengers for night-soil removal and a decrease of sweepers for rubbish removal, usually denote a tendency in the right direction. The use of light tramways, or a suitable adaptation of the Shone system after the Warrington method for rapid removal of night-soil, is within the financial capabilities of some municipalities, but conservatism in favour of lumbering bullock carts will take some time to disappear. During the year, the number of sweepers was decreased from 2,671 to 2,603, whilst that of public scavengers was increased from 1,456 to 1,480. The night-soil carts have been increased from 764 to 867. If the whole mass of the municipal population be regarded, exclusive of Madras City, it is found that, for each 10,000 there are 0.6 Sanitary Inspectors, 3.0 conservancy subordinates, 7.7 public night-soil scavengers, 12.3 municipal scavengers serving private houses and 13.6 sweepers. In 1894, the proportions were 1.2, 2.8, 6.7, 6.1 and 14.3. The Sanitary Inspectors of that year were unqualified, and consequently their reduction in quantity, in favour of the smaller number of Certificated Sanitary Inspectors of the present day, represents loss.

26. In reference to disposal of night-soil, there is evidence of advance: its utility for agricultural purposes, notwithstanding caste prejudices, is year by year more fully recognized. Thus, during 1902-1903, municipalities realized under rubbish and night-soil disposal the sum of Rs. 42,078 against Rs. 41,824 in the previous year and Rs. 22,773 during 1892-93. In regard to utilization of sewage there are promises that action will be taken by Chingleput, Karúr, Chicacole, Tinnevely and Bezwada. Kumbakonam, Negapatam, Tanjore, Rajahmundry and the City of Madras continue to secure good financial results by their efforts in this direction. Vizianagram and Vizagapatam, under the stimulating care of the present District Medical and Sanitary Officer Major Vickers, I.M.S., have made specially useful endeavours by diverting sewage from directions where hitherto its effects were harmful. In Tanjore, the net profit from sewage farming was Rs. 1,875; in Madras City, it amounted to the sum of Rs. 36,016. Modified filter trenches to replace cesspools have been introduced under my advice with success in Cuddalore, Palamcottah and Periyakulam. For the last place, the filter trench principle was also advised for a public latrine with success, and it seems to me by such adaptation economical latrines can be secured.

27. In the important matter of public water-supplies, beyond the completion of the Cocanada scheme, no advance has been made; nor does there seem any possibility of any town undertaking a scheme of any sanitary importance until Government is in a position to again offer grants-in-aid, which usually amounted to one-half the capital to be sunk. As an alternative, seeing that the financial condition of most municipal towns is sound, it seems to me it ought to be possible, by Councils putting their wants before English investors, to secure English capital on the security of taxes for investment. There is, of course, no lack of capital in this country that might be thus suitably invested, but the Indian capitalist's estimate of what is a fair return for his money is warped by his experience of the profit of money-lending.

28. With the advance of plague, it is probable that more attention will be given by municipalities to the condition of overcrowded localities than hitherto. Bad examples of these are in Rajahmundry, Madura, Tinnevely, Negapatam, Coimbatore and Ootacamund. Improvement schemes are in course of preparation in all these localities. Under Mr. Pears, the present President of the Municipal Commission, City of Madras, the subject is also receiving attention in respect to the notoriously insanitary locality known as the Tinnevely Settlement.

29. During the year, Government undertook the amendment of the City of Madras Municipal Act. The introduction of several efficient sanitary clauses is contemplated.

30. Attached is the usual table (Appendix XI) showing the results of completed sanitary works on public health. As to the six towns with protected water-supply, where distribution is fairly efficient, the following average figures are obtained:—For five years previous to the introduction of water-supply, the average cholera rate was 4.1; for the five years ending 1903, it was 1.4 and, during 1903, 1.3. The fever death-rate for five years prior to the introduction of water-supply was 8.9; in the five years ending 1903, it was 4.4, and, in 1903, 3.6. The total death-rate for five years prior to introduction of water-supply was 30.4; for the five years ending 1903, it was 27, and, in 1903, it was 27.6. Under these circumstances, I do not think there is any reason to doubt that the introduction of protected water-supplies (although not in a single instance in this Presidency can it be said that it has been so fully introduced into a town to the exclusion of other sources that its full benefits could be derived by the population) has been followed by a marked reduction in total mortality, and in the fever and cholera rates. In other parts of India, I am aware it is held that the introduction of water-supply into towns when unattended with a drainage system, as is the case in this Presidency, has been followed by an increase of the fever-rate, and it is of course no stretch of theory to ascribe exacerbation to better opportunities for propagation of the anopheles mosquitoes. However, statistics have continued now for some years past to teach the one lesson that, with the introduction of improved water sources in this Presidency, a diminution of fever-rate has followed. It has been long felt by the medical profession that

there prevail amongst the people still imperfectly recognized forms of fever, and it is quite possible that certain of these are connected with the water-supply. For example, we know nothing of the real origin of the *piroplasma Donovanii*, and it may happen this may be proved to be connected with the water-supply, or that the theory that water-supply is connected with malarial fever has still truth in it, notwithstanding the clear demonstration that it is certainly capable of being propagated by transfer by mosquitoes from man to man. In respect to the fever-rate, it is worth remembering that there may be less inclination during the period of plague prevalence to register deaths to be due to "fever"; but how little this possibility need be taken into account can be judged by contrasting the conditions of towns where protected water-supplies have not been introduced. Here, we find that in 14 towns the average fever-rate for the five years ending 1898 was 6.7 and for the same period ending 1903 5.9; a reduction of .9 against 4.5 in the case of the towns supplied with water. Moreover, the total mortality, far from being reduced, rose from 29.4 to 30.0. Although, therefore, I think that the towns that are now supplied with water by no means have obtained the maximum benefit they should secure for the money they have spent, were they to arrange for more perfect distribution and for the closing of all promiscuous water sources, it seems to me evident that the populations in decreased mortality are already reaping the benefit that should compensate for the inconvenience caused by increased taxation. There is, I believe, room for reform in the matter of supplying houses with water. It is rarely necessary for native houses on account of a climate of the character of the South of India, or on account of caste, to require distribution of the water in private premises beyond the reach of ready inspection. When distribution of this nature is necessary, it should be paid for as a luxury, and thus both economy of water and its purity would be controlled better than at present. Unfortunately, no real effort to secure economy of water by Councils seems to be made beyond shutting off the water-supply for a certain number of hours daily—thus causing all the danger of intermittent supplies. Beyond the Cocanada water-works already referred to, which were opened in July 1903, no new major sanitary works were completed during the year.

DISTRICT BOARDS.

31. I regret I have nothing to record as to advance by District Boards that would appeal to the average sanitarian. The people under the administration of these Boards number 34,598,644 against 2,406,455 in municipalities. The total income of these Boards (1902-1903) amounted to Rs. 96,57,247. Of this amount, if the total income after meeting "plague charges" be regarded as that solely available, 5.4 was spent on sanitation, as contrasted with 7.2 per cent. on education (irrespective of Rs. 21,24,402* from Provincial Funds) and 8.5 on medical services. In the midst of a population larger than that of England and Wales, the expenditure in obtaining new sources of water-supply, which are certainly most urgently required, amounted to 1 pie per head. In not a single village, up to date, is there any pretence towards public water-supplies delivered in protected pipes by lifting or by gravitation, after modern methods. Aeromotors and kerosine-oil engines are, at the present time, cheap and require but modest skill for their use, whilst the possibility of landing pipes in rural parts by rail and canal is now infinitely better than 30 years back; yet, District Boards continue to forget that to protect their water-supplies by less crude methods than at that period might reasonably be expected of them. The remainder of the 5.3 per cent. of the total funds was spent in repairing old wells and tanks, in conserving 399 unions and 140 villages, and in the sanitation of fairs and festivals. The absence of new sanitary works to which I have invited attention is in the main due to the Cinderella share that sanitation receives from the income of Boards, but also to the absence of officers who have the time to devote to not only suggesting but drawing up the main outlines of simple schemes. Much may be hoped for in the future in initiating small and useful sanitary schemes, by Government

* This is the figure for 1901-1902.

having sanctioned the employment of District Health officers of the Assistant Surgeon class (G.O., No. 1558 L., dated 7th December 1903). These men, I have recently proposed to Government, should be required to take the "Licentiate of Sanitary Science" degree of the University of Madras. They would be aided by competent Engineering Subordinates. The appointments now sanctioned form an important link in the scheme some years back placed by me for consideration before Government in which Vaccination, Sanitation and Registration of rural areas were placed under the administration of a single Sanitary Department (G.O., No. 435, Public, dated 17th April 1897). All hopes of such an advance have however been aborted by Government which had hitherto fostered the growth of a movement to supply the Presidency with Certificated Sanitary Inspectors suddenly forbidding their use in rural areas, in permanent posts, on the ground that their employment "with a roving commission to point out sanitary defects in villages would be attended with grave danger," and that "their right to recommend or report would furnish a powerful weapon for misconduct" (G.O., No. 1131 L., dated 11th September 1903). Although the same Order secured an improvement in the education of Sanitary Inspectors by giving them a course in Sanitary Engineering, the conditions brought about by it are such as to react generally upon sanitary advance in rural areas. Not only has this Order operated in this manner, but it will undoubtedly greatly limit the outturn of Sanitary Inspectors. It has already rendered the supply of certificated men for plague duty a matter of difficulty.

MECCA PILGRIMAGE.

32. No pilgrim for Mecca departed from ports of the Madras Presidency during the year.

SECTION X.

PERSONAL PROCEEDINGS AND GENERAL REMARKS.

33. On a reference by Government as to the conditions governing malaria prevalence in the municipality of Nandyal, I inspected that town and its neighbourhood. Also in reference to malaria conditions, I inspected the village of Dhone, which had been selected as a suitable site for an experimental improvement. After my return to Madras, I proceeded to Jalarpet, where I inspected the plague hospital and the infected village in its neighbourhood. Plague prevalence in and around Vaniyambadi and Tiruppattur in the Salem district then demanded special enquiry. With the same object, I inspected Udiyandrum and neighbourhood, and the municipal town of Vellore, in the North Arcot district. In March, Certificated Sanitary Inspectors were collected by me at Dhone (the malarious village above referred to) and there they were trained by me with reference to the recognition of malaria-bearing mosquitoes, and the methods for malaria prevention amongst communities. On my return to Madras, I found that plague had appeared at Gudalur in the Nilgiri district, and, in view of the danger which that outbreak implied (in that this district forms a link between the West Coast and the south of India) I thought it desirable to at once proceed thither. I therefore inspected Gudalur, and consulted with the Collector and other officers concerned as to arrangements with reference to Ootacamund, Coonoor and Wellington. From thence, I proceeded to the municipal town of Bellary, and inspected the plague arrangements there. Subsequently, I went to Coimbatore with the object of carrying out an ordinary sanitary inspection. Before this could be completed, it was ascertained that plague had appeared at Ootacamund. As soon as I had, in consultation with the Collector and other authorities concerned, advised as to the defence of the Coimbatore district, I proceeded to the Nilgiri district, and again saw as to arrangements at Coonoor, the Cordite Factory, Wellington and Kotagiri. On my return, I inspected the organization at Coimbatore and then proceeded to Tiruppur, where the local authorities suspected the existence of plague. I then proceeded to Masulipatam, and inspected that town more especially with reference to the proposed water-supply, and, during the same journey, inspected alternative positions for the Bezvada hospital. On my return, I was deputed by Government to attend a conference of Madras and Mysore officials at Bangalore, which had for its object the securing of some method of organized co-operation as to plague. The town of Trichinopoly was inspected with reference to selection of new extension sites. At Srirangam, the condition of an offensive trade was entered into at the request of the District Magistrate. Mettupalaiyam was now infected with plague, and threatened the safety of the rest of the Coimbatore district, and therefrom the south of India. This was now specially inspected. Erode, as forming the junction by rail between these infected districts and the south, was also visited and arrangements examined. The town of Salem was formally inspected, and the question of a source for its water-supply was specially entered into. Yercaud was also visited and its suggested sources of water-supply were sanitarily surveyed. I inspected Nellore in regard to a burial-ground question. With the President, Municipal Commission, Madras, an insanitary area in that city was inspected, with special reference to a scheme for radical improvement. As plague at Coimbatore still showed no signs of abatement I again visited the town, my real objective being Palghat which I considered threatened, but I was unable to effect the inspection of the latter place before the end of the year.

34. On behalf of the Sanitary Board 153 plans and estimates, etc., for sanitary works were scrutinized from a sanitary point of view.

35. Up to July 1903, I had personally trained all Temporary Sanitary Inspectors for plague duty: but I then handed over this work to the Personal Assistant. I have however continued to set the examination questions, and have examined all papers of candidates judged by him to be fit; that is, I have spared myself the duty of examining failures. In this way, 1,152 papers were examined during the year. 33.6 per cent. of the candidates passed the examination. Four hundred and twenty-three Temporary and Certificated Sanitary Inspectors were posted by my office to plague duty. This duty of itself plus the scrutiny of papers embodying complaints of both employes and employed, disputed points as to pay, travelling allowance, etc., cause as much work as administering a special department.

36. My only Deputy, Captain Cornwall, I.M.S. (who is burdened with the following multiple of offices—"Deputy Sanitary Commissioner and Inspector of Vaccination, Professor of Hygiene and of Practical Bacteriology in the Madras Medical College"), being practically an Educational officer was not available, except for sufficient time daily to see to routine papers of the Vaccination Department. He was not at my disposal for inspection duty, except for about six weeks in the year. Of this period he, however, made excellent use, by making an inspection of Mangalore as to plague arrangements, and the borders of Malabar in reference to the existence of plague in the Nilgiri district. He also made a similar inspection of the area around Udiyandrum in the North Arcot district. During his tours, he did his best to obtain a grasp of the working of the Vaccination Department and, for this purpose, managed to ascertain the state of affairs in a large number of villages by means of rapid surprise visits. Since, 1898, when Lieutenant-Colonel Bannerman was first deputed to proceed to Bombay, I have had no Deputy that was more than spasmodically at my disposal, although from July 1902 to November 1903 Government sanctioned the employment of a Personal Assistant. Assistant Surgeon S. Krishnamurthi, who has since secured the appointment of Sanitary Commissioner for Travancore, occupied this post and proved of much utility. He was succeeded by Assistant-Surgeon J. C. Bartley who performed his duty satisfactorily up to 9th December 1903, when he was removed under G.O., No. 513, dated 20th May 1901.

37. In contrast with what may be judged to be the carping spirit adopted in respect to measures which, rightly or wrongly, I judge may stay or trammel sanitary advance, it is a pleasure to record that, during the year, Government sanctioned the addition to the group of buildings (which it has been good enough to pay a compliment to the Indian Medical Service by naming the King Institute of Preventive Medicine) already in process of erection at Guindy, for the preservation of animal vaccine and bacteriological investigation, a further block for the purpose of serum manufacture and investigation. In pursuing the policy of making this combination, there can be no doubt that Government has placed at the disposal of the medical profession in this Presidency opportunities for research such as, so far as I can ascertain, are nowhere else procurable with the same facility; whilst both public bodies and private individuals should, in the capability of securing early bacteriological diagnosis of diseases, find sound cause for comfort. Lieutenant-Colonel Bannerman, I.M.S., joined for duty on the 10th December as the first Superintendent of the still incomplete buildings. For this post, his long experience of bacteriological work in Bombay should eminently fit him. If to this advance be added the fact already alluded to (paragraph 16) that Government has called for a scheme for reorganization of the Vaccination Department of the Presidency during 1903, which if found reasonable there is evidently a wish to adopt, it may be fairly stated that if, in a day, it be not possible to reduce the sanitation of bodies enjoying the privilege of self-government to a state of mechanical accuracy in working that, at least, where advance has been considered feasible by Government, the opportunity has been afforded by it.

38. One hundred and sixty-one reports as to the state of towns and villages were received from 19 District Medical and Sanitary officers. In 174 instances special references to local authorities were made as to the nature of action taken, with the recommendations of this office when thought necessary. Several reports were also received from the District Medical and Sanitary officers as to the sanitary condition of schools and in selected cases action was urged upon local authorities by

this office. In connection with school hygiene, I may state that I specially urged upon the attention of the Director of Public Instruction the desirability of his arranging that licentiates in teaching should undergo a course of training in school hygiene. Intimations of approaching important festivals were received and, in each case, the nature of the sanitary arrangements contemplated was ascertained from the District Medical and Sanitary officers concerned, and, where thought necessary, local authorities were advised on the subject. Reports of fairs and festivals were received in 102 cases and advice was offered in 71 cases for future guidance. Necessary correspondence on matters connected with plague with various authorities added considerably to routine sanitary work.

39. In December last in response to my request (on the requisition of the Army Sanitary Commission) a specimen of water supposed to be contaminated with the cholera microbe was received. The Superintendent of the King Institute of Preventive Medicine examined it bacteriologically with negative result.

40. In 1903, 56 candidates qualified as Certificated Sanitary Inspectors.

41. Excluding Malabar, the Nilgiris and South Canara, where there are no unions and consequently no village sanitation inspection books have been opened, there are 18 districts where they should be maintained. In Vizagapatam no books were opened during the year. Ganjam has furnished no information on the point. Of the remaining districts, in 12 the books were kept with care, in 2 indifferently, and in 2 badly. Some improvement may be expected in future years by Government having directed that village sanitary inspection books should be produced before District Revenue officers, during jamabandi.

42. Orders as to office stores and service registers have been obeyed.

(Signed) W. G. KING, Lt.-Col., I.M.S.,
Sanitary Commissioner for Madras.

OFFICE OF SANITARY COMM., CHETPUT,
MADRAS, 15th May 1904.

APPENDIX.

VITAL STATISTICS OF THE GENERAL POPULATION.

No. I.—Showing the Births registered in the districts of the Madras Presidency during the year 1903.

Number.	Population (exclusive of Europeans and Eurasians) as per census of 1901.		Population (exclusive of Europeans and Eurasians) for which returns were received.		Number of births registered (exclusive of Europeans and Eurasians and still-births).		Ratio of births per 1,000 of population.		Number of males born to every 100 females born.		Excess of births over deaths per 1,000 of population.		Mean ratio of births per 1,000 during previous five years.	
	Males.	Females.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
1	408,030	384,662	787,752	787,752	1,575,504	11,872	11,881	23,753	151	150	150	139	137	276
2	485,642	471,425	957,067	957,067	1,914,134	15,370	14,654	30,024	161	153	157	159	154	318
3	639,992	649,468	1,289,460	1,289,460	2,578,920	20,118	25,192	45,310	200	192	196	173	166	339
4	1,082,528	1,118,115	2,200,643	2,200,643	4,401,286	34,778	39,621	74,399	168	153	160	153	142	297
5	655,730	635,395	1,291,125	1,291,125	2,582,250	18,310	17,848	36,158	142	138	140	124	120	244
6	931,706	1,048,243	2,009,949	2,009,949	4,019,898	25,610	24,057	49,667	128	120	124	134	124	258
7	1,131,231	1,163,569	2,294,800	2,294,800	4,589,600	32,813	31,758	64,571	148	138	143	152	145	297
8	1,089,894	1,064,236	2,154,130	2,154,130	4,308,260	30,660	35,584	66,244	170	165	167	152	145	297
9	436,770	417,426	854,196	854,196	1,708,392	13,455	13,422	26,877	153	154	153	142	137	279
10	248,742	244,938	493,680	493,680	987,360	9,821	9,435	19,256	119	114	116	120	115	235
11	1,336,693	1,473,951	2,810,644	2,810,644	5,621,288	46,938	45,428	92,366	173	163	168	152	145	297
12	1,391,300	1,414,351	2,805,651	2,805,651	5,611,302	45,428	45,428	90,856	148	143	145	142	138	280
13	732,243	744,267	1,476,510	1,476,510	2,953,020	22,130	21,773	43,903	143	139	141	125	123	248
14	58,350	49,323	107,673	107,673	215,346	1,082	1,000	2,082	156	149	152	142	138	281
15	1,100,854	1,093,403	2,194,257	2,194,257	4,388,514	32,611	31,571	64,182	148	143	145	152	145	297
16	1,085,060	1,118,913	2,203,973	2,203,973	4,417,946	32,249	36,772	69,021	173	167	170	152	145	297
17	1,107,748	1,181,492	2,289,240	2,289,240	4,570,732	41,196	39,639	80,835	173	166	169	152	145	297
18	548,275	586,041	1,134,316	1,134,316	2,268,632	10,521	18,205	28,726	173	167	170	152	145	297
19	1,065,791	1,178,158	2,243,949	2,243,949	4,492,098	39,377	37,701	77,078	173	168	170	152	145	297
20	1,001,578	1,057,625	2,059,203	2,059,203	4,116,806	35,772	34,771	70,543	174	169	171	152	145	297
21	690,274	744,421	1,434,695	1,434,695	2,869,390	29,830	33,772	63,602	172	165	168	154	148	302
22	1,410,395	1,482,506	2,892,901	2,892,901	5,785,407	31,142	30,445	61,587	150	146	148	147	142	289
23	18,541,708	19,871,004	38,412,712	38,412,712	76,823,716	568,713	571,867	1,140,580	159	153	156	147	141	288
24	2,031,013	2,108,964	4,139,977	4,139,977	8,248,951	66,865	63,402	130,267	162	152	157	150	141	281
25	16,810,695	17,254,040	34,064,735	34,064,735	68,128,770	526,818	508,365	1,035,183	159	153	156	145	139	284

* Including the Hill Tracts.

* Note.—The population for which the returns were received from the district of Ganjam is not available according to the census of 1901. Hence the ratios have been calculated on the total population of the district.

No. II.—Statement of births and deaths registered in the districts of the Madras Presidency during the year 1903.

Serial number.	Districts.	Area in square miles.	Average population per square mile.	Population (exclusive of Europeans and Eurasians) for which returns were received.		Births.	Number of deaths registered (exclusive of Europeans and Eurasians and born dead).		Ratio of deaths per 1,000 of population from previous five years.	All causes.		Mean ratio of deaths per 1,000 during previous five years.
				Males.	Females.	Total.	Males.	Females.		Males.	Females.	
1	Anantapur	5,557	141.8	403,690	351,692	755,382	23,703	8,695	17,177	102.5	0.001	10.2
2	Bellary	5,875	162.9	453,042	471,428	924,470	30,624	13,563	27,933	105.0	0.001	10.5
3	Chingleput	3,079	425.3	659,902	619,468	1,279,370	81,380	16,323	33,295	104.0	0.001	10.4
4	Coimbatore	7,800	289.0	1,082,245	1,118,145	2,200,390	68,390	23,542	49,402	101.3	0.001	10.1
5	Cuddapah	8,723	148.0	656,730	635,395	1,292,125	30,158	14,046	27,618	103.5	0.001	10.3
6	Ganjām	8,372	243.1	961,706	1,048,243	2,009,949	43,717	14,944	29,409	103.3	0.001	10.3
7	Godavari	7,972	289.6	1,131,281	1,136,369	2,267,650	44,314	17,307	37,618	107.1	0.001	10.7
8	Kistna	8,438	253.5	1,089,904	1,064,236	2,154,140	72,214	23,571	48,075	104.5	0.001	10.4
9	Kurnool	7,578	175.1	1,105,553	1,031,805	2,137,358	27,277	9,824	19,098	106.0	0.001	10.6
10	Madras	27	18,284.1	2,488,742	2,111,985	4,600,727	18,720	9,102	18,720	105.7	0.001	10.5
11	Madura	8,701	325.3	1,376,093	1,473,551	2,849,644	65,547	22,068	45,547	106.4	0.001	10.6
12	Malabar	5,793	480.8	1,376,329	1,408,978	2,785,307	66,708	32,616	66,708	104.5	0.001	10.4
13	Nellore	8,701	170.8	732,243	744,267	1,476,510	43,910	14,933	29,443	102.9	0.001	10.2
14	Nilgiris	997	112.5	58,350	49,323	107,673	3,262	1,448	3,081	112.6	0.001	11.2
15	North Arcot	7,550	292.7	1,055,090	1,118,943	2,174,033	64,182	20,342	40,341	100.9	0.001	10.0
16	South Arcot	5,217	450.3	1,107,748	1,181,429	2,289,177	80,145	28,448	65,814	104.0	0.001	10.4
17	South Canara	4,022	281.1	546,588	584,193	1,130,781	38,426	15,208	38,426	103.7	0.001	10.3
18	Tanjore	3,710	604.8	1,055,731	1,178,158	2,233,889	77,078	20,383	58,030	97.5	0.001	9.7
19	Tinnevely	5,889	382.1	1,001,578	1,057,625	2,059,203	64,843	24,522	49,166	100.3	0.001	10.0
20	Trichinopoly	3,632	397.5	690,274	744,421	1,434,695	48,640	17,726	35,166	101.6	0.001	10.1
21	Vizagapatam	4,690	452.4	1,016,471	1,064,757	2,081,228	61,587	18,638	31,686	101.0	0.001	10.1
22	Grand total for the Presidency.	129,289	288.7	18,385,927	18,929,984	37,315,911	1,163,080	407,388	826,663	102.9	0.001	10.2
Total of Town circles in the Presidency.		...	...	2,081,013	2,106,904	4,187,917	129,897	57,968	55,219	104.4	0.001	10.4
Total of Rural circles in the Presidency.		...	...	16,304,914	16,823,080	33,127,994	1,033,183	361,607	713,776	102.7	0.001	10.2

NOTE.—The born-dead cases are not included in this or any of the other statements.

No. III.—Deaths registered in the districts of the Madras Presidency during each month of the year 1903.

Number.	Districts.	January.												Total deaths registered during the year.
		1	2	3	4	5	6	7	8	9	10	11	12	
1	Anantapur	1,212	1,025	1,056	1,308	1,246	1,312	1,548	1,514	1,534	1,577	1,808	2,042	17,177
2	Bellary	3,330	2,150	1,850	1,526	1,338	1,735	2,007	2,186	2,080	2,418	3,025	4,054	27,933
3	Chingleput	3,134	2,612	2,814	2,283	2,397	2,523	2,900	2,703	2,631	2,831	3,163	3,301	33,295
4	Coimbatore	4,469	3,470	3,363	3,110	3,471	4,006	4,206	3,944	4,140	4,275	4,519	6,310	49,402
5	Cuddapah	2,071	1,941	2,000	2,201	2,117	2,132	2,353	2,388	2,270	2,510	2,801	3,194	27,618
6	Ganjām	1,747	1,567	1,586	1,923	2,261	2,448	3,121	3,473	2,970	2,560	2,609	3,139	29,409
7	Godavari	2,034	2,847	2,840	2,066	2,802	3,429	4,103	4,715	4,165	4,526	4,320	4,658	44,314
8	Kistna	2,662	2,064	2,902	1,645	3,016	3,542	3,812	4,740	5,129	5,590	6,127	6,807	48,075
9	Kurnool	1,515	1,306	1,266	1,272	1,378	1,551	1,579	1,717	1,632	1,787	1,937	2,161	19,098
10	Madras	1,575	1,410	1,638	1,456	1,484	1,450	1,490	1,508	1,567	1,592	1,768	1,794	18,720
11	Madura	3,787	3,077	3,350	3,298	3,196	4,477	4,755	3,801	3,836	3,815	3,767	4,808	45,547
12	Malabar	4,520	4,600	5,335	5,325	6,294	7,147	9,043	6,805	4,874	4,260	4,045	4,880	66,708
13	Nellore	2,480	2,491	2,143	2,136	2,246	2,255	2,109	2,301	2,337	2,580	2,901	3,384	29,443
14	Nilgiris	128	161	209	310	309	334	379	302	232	284	291	242	3,081
15	North Arcot	3,755	3,208	3,570	3,077	2,822	2,663	2,900	3,095	3,102	3,507	4,209	4,813	40,341
16	Salem	5,595	4,544	4,833	3,779	4,007	4,803	5,047	4,442	5,128	5,897	7,910	9,843	55,814
17	South Arcot	4,890	4,863	4,650	3,540	4,020	4,165	4,872	4,801	4,481	4,411	5,017	6,106	29,804
18	South Canara	2,440	2,285	2,182	1,971	1,901	2,395	3,601	2,375	2,406	2,338	2,148	3,020	38,426
19	Tanjore	4,794	4,121	4,132	3,733	4,341	4,132	4,559	4,729	4,716	5,150	5,202	8,450	58,030
20	Tinnevely	7,548	4,638	4,132	3,288	3,208	3,302	3,283	3,329	3,337	3,456	3,975	5,825	49,166
21	Trichinopoly	2,975	2,342	2,224	2,521	2,334	2,650	2,095	2,007	2,686	2,631	3,120	5,241	35,166
22	Vizagapatam	2,914	2,421	2,278	2,188	2,387	2,705	2,506	3,381	4,173	4,134	3,748	4,491	31,686
Total, Madras Presidency		70,496	58,983	59,709	55,010	59,177	65,306	72,839	72,454	68,970	71,965	70,545	86,159	626,663
Ratio of deaths per 1,000 in each month		1.0	1.6	1.6	1.5	1.6	1.8	2.0	1.9	1.8	1.9	2.1	2.5	22.2

No. IV.—Deaths registered according to age in the districts of the Madras Presidency during the year 1903.

1	2	3	4	5		6		7		8		9		10		11		12			
				Under 1 year.		1 to 4.		5 to 9.		10 to 14.		15 to 19.		20 to 29.		30 to 39.		40 to 49.		50 to 59.	
Number.	Districts.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
1	Anantapur	1,928	1,792	1,223	1,195	481	472	280	283	245	381	532	800	659	795	782	571	808	945	1,711	1,629
2	Bellary	2,681	2,643	1,814	1,844	927	1,007	841	766	675	685	1,308	1,398	1,300	1,181	1,284	915	1,206	927	1,325	2,167
3	Chingleput	5,813	5,009	2,072	2,162	879	919	493	427	417	588	821	1,301	1,009	1,048	1,263	1,035	1,301	1,162	2,764	2,772
4	Coimbatore	6,682	5,858	3,040	3,035	1,347	1,356	972	844	837	917	1,691	2,229	2,024	2,043	2,230	1,850	2,297	2,212	3,760	4,260
5	Cuddapah	3,360	2,805	1,805	1,716	828	811	443	423	351	589	815	1,356	1,221	1,268	1,491	1,107	1,671	1,434	2,063	2,067
6	Ganjām	4,779	3,990	1,014	1,771	753	748	535	502	559	725	985	1,190	1,042	936	1,160	905	1,308	1,384	1,703	2,067
7	Godavari	5,578	4,820	3,520	3,465	1,597	1,451	994	898	1,132	1,256	1,001	1,031	1,770	1,442	1,734	1,182	1,613	1,329	3,118	3,589
8	Kistna	7,853	6,671	3,582	3,402	1,363	1,463	731	766	771	1,000	1,045	2,185	1,490	1,414	1,557	1,138	1,720	1,251	3,889	4,064
9	Kurnool	2,473	2,182	1,490	1,464	629	606	312	283	201	318	578	787	816	765	996	829	922	790	1,319	1,457
10	Madras	2,971	2,599	1,204	1,214	381	382	295	249	253	324	680	773	714	676	773	539	718	540	1,629	1,872
11	Madura	4,937	4,287	2,061	2,061	1,305	1,242	993	803	882	902	2,059	2,107	2,273	1,911	2,288	1,805	2,290	3,038	3,455	4,052
12	Mainbar	6,790	5,672	5,548	5,585	2,322	2,341	1,373	1,217	1,118	1,266	2,892	3,385	3,533	3,448	3,164	2,277	2,707	2,046	4,401	5,394
13	Nellore	3,520	2,985	1,879	1,894	1,006	1,128	799	788	660	763	858	1,044	916	958	1,090	947	1,402	1,106	2,707	2,942
14	Nilgiris	382	304	241	273	99	98	72	62	63	83	189	183	180	145	158	88	88	149	150	150
15	North Arcot	5,464	4,569	2,533	2,544	1,117	1,198	681	769	598	894	1,113	1,681	1,426	1,472	1,733	1,003	1,722	3,808	4,003	4,003
16	Salem	9,325	7,229	3,396	4,060	2,041	2,048	1,401	1,272	1,033	1,264	1,963	2,722	2,458	2,596	2,068	2,101	2,388	2,408	4,168	4,624
17	South Arcot	5,232	7,275	4,915	4,939	1,491	1,501	899	743	694	1,005	1,023	2,125	1,748	1,940	2,310	1,700	2,466	2,064	4,177	4,086
18	South Canara	3,903	3,273	1,755	1,800	601	713	411	400	476	585	1,284	1,826	1,478	1,293	1,002	1,120	1,024	1,260	2,179	2,621
19	Tanjore	8,655	7,345	3,257	3,142	1,206	1,187	898	719	700	1,304	1,804	2,061	3,087	2,533	2,218	1,873	2,447	3,307	5,220	6,302
20	Tinnevely	6,380	6,179	4,073	4,273	1,747	1,074	680	653	593	781	1,462	1,784	1,089	1,060	2,002	1,516	2,176	1,351	3,047	4,533
21	Trichinopoly	4,927	4,170	2,486	2,453	927	880	607	526	524	683	1,115	1,537	1,210	1,269	1,322	1,108	1,497	1,615	3,061	3,412
22	Vizagapatnam	4,631	4,157	2,970	2,783	1,214	1,070	735	657	689	775	1,353	1,564	1,483	1,482	1,634	1,349	1,681	1,671	2,664	3,230
Total, Madras Presidency		110,870	91,050	53,064	58,125	24,055	25,475	15,463	14,063	13,631	17,090	28,349	36,489	32,665	31,471	35,375	27,105	36,469	31,586	64,127	71,889
* Ratio per mille of population		203.5	189.6	30.1	28.6	9.1	8.8	6.4	6.5	9.0	12.0	10.6	11.5	12.6	11.5	13.4	14.4	30.0	25.8	68.6	63.4

No. V.—Deaths registered according to Classes in the districts of the Madras Presidency during the year 1903.

Number.	Districts.	Population for which returns were received.					Number of deaths registered.					Ratio of deaths per 1,000 of population.				
		Native Christians.	Muhammadians.	Hindus.	Other classes.	Total.	Native Christians.	Muhammadians.	Hindus.	Other classes.	Total.	Native Christians.	Muhammadians.	Hindus.	Other classes.	Total.
1	Anantapur	2,473	68,917	718,301	8,301	787,792	41	1,072	16,042	32	17,177	18.9	18.2	22.3	27	21.8
2	Bellary	3,756	97,474	851,050	1,781	957,067	61	3,071	24,506	205	27,683	16.2	31.5	28.8	115.1	20.2
3	Chingleput	23,714	30,010	1,265,257	389	1,300,370	375	686	32,240	18	33,295	15.8	21.9	25.7	46.3	25.4
4	Coimbatore	17,808	50,745	2,195,908	6,052	2,260,673	457	1,250	47,653	22	49,402	25.7	25.4	22.4	3.8	22.7
5	Cuddapah	18,781	129,537	1,112,454	353	1,250,125	266	2,316	24,875	161	27,618	14.2	17.9	21.8	45.1	21.4
6	Ganjam	3,042	5,940	1,723,581	277,377	2,000,940	18	135	29,208	48	29,400	2.9	22.7	16.9	2.0	14.6
7	Godavari	15,826	43,481	2,266,863	5,200	2,300,800	297	823	43,000	98	44,314	18.8	18.9	19.3	18.8	19.3
8	Kistna	100,841	132,053	1,912,514	8,122	2,154,350	1,784	2,880	45,308	4	48,076	17.7	21.0	22.7	0.5	22.3
9	Kurnool	33,366	107,029	728,782	1,804	871,948	621	2,208	16,176	91	19,096	18.3	20.5	22.2	66.7	21.9
10	Madras	25,292	57,331	410,648	400	493,680	824	2,308	15,556	2	18,720	32.6	40.3	38.0	4.9	37.9
11	Madura	111,201	158,618	2,550,783	12	2,820,644	1,187	3,303	40,967	10	45,547	10.7	20.1	16.1	238.1	16.1
12	Malabar	46,519	832,970	1,904,174	1,344	2,785,307	1,282	21,831	45,537	53	68,703	27.6	26.2	22.9	39.4	23.0
13	Nellore	53,471	82,886	1,360,245	3,907	1,440,510	465	1,320	27,028	9.8	29,443	15.9	20.4	18.7	12.4	18.7
14	Nilgiris	11,981	5,867	89,608	4,057	107,673	328	241	2,784	328	3,081	29.6	41.1	25.3	80.8	28.6
15	North Arcot	22,000	103,638	2,068,390	13,324	2,206,817	140	1,876	38,651	105	40,541	6.8	15.2	18.7	12.4	17.4
16	Salem	18,701	68,497	2,116,768	07	2,204,033	500	3,314	63,530	20.7	68,343	26.7	48.4	26.7	27.8	27.4
17	South Arcot	65,748	64,670	2,212,548	5,605	2,286,177	1,090	1,311	63,290	156	65,343	16.7	20.2	24.1	25.4	23.8
18	South Canara	83,779	123,201	911,147	9,504	1,004,740	1,208	2,853	21,855	206	23,844	22.8	20.2	25.8	27.0	28.4
19	Tanjore	85,880	123,053	2,044,509	898	2,243,940	2,218	3,218	52,587	7	58,030	23.8	20.2	23.9	27.0	23.8
20	Tinnevely	158,500	101,875	1,798,519	23	2,059,203	3,371	2,658	43,074	19,106	49,106	21.2	20.1	23.9	24.4	24.4
21	Trichinopoly	75,585	45,319	1,321,768	23	1,443,695	1,781	1,067	32,278	63	34,346	23.0	25.2	24.4	1.8	24.4
22	Vizagapatnam	2,787	22,470	2,005,320	50,069	2,080,328	47	278	37,298	63	37,836	17.0	12.4	18.6	1.8	18.1
Total, Madras Presidency.		980,708	2,455,959	33,482,036	398,818	37,317,011	19,073	60,071	746,804	1,715	826,063	19.4	24.5	23.2	4.8	23.2

No. VI.—Births and Deaths registered from different causes in the districts and towns of the Madras Presidency during the year 1903.

Number.	Districts and towns.	3	4										12	13	14																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
			Births.	Total number.	Birth-rate per mille of population.	Cholera.	Small-pox.	Plague.	Fever.	Decadent and diarrhoea.	Respiratory diseases.	Injuries.					Total deaths from all causes.	Ratio of deaths per 1,000 of population.					From all causes.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
												Males.			Females.	Wounds and accidents.		Snake-bites and killed by wild beasts.	Total.	Cholera.	Small-pox.	Plague.		Fever.	Decadent and diarrhoea.	Respiratory diseases.	Injuries.	All other causes.	For the year.	Mean of previous years.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
A.—Districts.*																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						</

* Exclusive of B. Towns.

No. VI.—Births and Deaths registered from different causes in the Districts and Towns of the Madras Presidency during the year 1903.

Number.	Districts and towns.	Population for which returns were received.	Births.		Cholera.		Small-pox.		Plague.		Fever.		Dysentery and diarrhoea.		Eruptive diseases.		Injuries.				Total.		All other causes.		Total deaths from all causes.		Ratio of deaths per 1,000 of population.		All other causes.		From all causes.				
			Total number.	Birth-rate per mille of population.	Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Eruptive diseases.	Scalds.	Wounds and accidents.	Snake-bite and killed by wild beasts.	Total.	All other causes.	Total deaths from all causes.	Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Injuries.	All other causes.	Total deaths from all causes.	Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Injuries.	All other causes.	From all causes.			
B.—Tanjore.																																			
1	Anantapur	7,668	288	37.5									20	57		111	1	1						312											
2	M. T. C. Anantapur	18,578	394	21.2												317									264										
3	M. T. C. Chingleput	18,578	394	21.2												317									264										
4	M. T. C. Madakara	10,668	178	16.7												48									78										
5	M. T. C. Dharavaram	10,668	178	16.7												48									78										
6	M. T. C. Ponnali	10,668	178	16.7												48									78										
7	M. T. C. Gooty	6,682	205	30.7												134									169										
8	M. T. C. Urvakonda	9,865	125	12.6												82									215										
9	M. T. C. Kallandura	8,815	134	15.2												94									118										
10	M. T. C. Yakkil	7,389	105	14.2												118									127										
11	M. T. C. Penukonda	6,996	146	20.9												89									106										
Bellary.																																			
12	M. T. C. Bellary	55,517	1,522	27.2												1,066									2,262										
13	M. T. C. Admi	8,801	278	31.6												317									768										
14	M. T. C. Resamangur	18,469	364	19.7												223									739										
15	M. T. C. Yennamangur	13,400	368	27.4												128									219										
16	M. T. C. Rayadurg	10,488	182	17.4												82									316										
17	M. T. C. Harpanahalli	9,320	86	9.2												30									230										
18	M. T. C. Siragappa	5,666	108	18.9												77									152										
Chingleput.																																			
19	M. T. C. Chingleput	46,161	1,547	33.5												1,065									2,262										
20	M. T. C. Chingleput	10,551	494	47.1												317									768										
21	M. T. C. Nembi	17,667	267	15.1												223									739										
22	M. T. C. Thiruvottur	13,919	267	19.2												128									219										
23	M. T. C. Thomas Mount	15,571	185	11.9												35									316										
24	M. T. C. Ponnammal (C)	15,225	399	26.2												12									317										
25	M. T. C. Suddag	14,251	419	29.4												32									768										
26	M. T. C. Uthamang	10,632	282	26.5												178									285										
27	M. T. C. Tiruvallur	9,952	221	22.3												107									285										
28	M. T. C. Pallavaram (C)	6,016	168	27.9												111									212										
29	M. T. C. Madhavaram	6,296	294	46.7												154									216										
30	M. T. C. Tirukalkulam	5,778	111	19.2												89									89										
31	M. T. C. Superumbalur	5,481	225	41.1												1									135										
32	M. T. C. Puduk	5,441	217	39.9												2									135										
33	M. T. C. Tiruvur	5,716	183	32.0												59									91										
Coimbatore.																																			
34	M. T. C. Coimbatore	18,481	1,063	57.6												20									2,117										
35	M. T. C. Erode	12,700	572	45.0												10									387										
36	M. T. C. Karur	12,700	572	45.0												10									387										
37	M. T. C. Dharavaram	17,178	268	15.6												24									497										
38	M. T. C. Kallagat	18,428	171	9.3												1									424										
39	M. T. C. Uthamang	10,543	269	25.5												3									220										
40	M. T. C. Gobichettipalayam	10,257	89	8.7												2									150										
41	M. T. C. Pollachi	8,938	236	26.4												24									175										

[illegible]

1

114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

9

[illegible]

* Being a new rural town the information is not available,

No. VI.—Births and Deaths registered from different causes in the Districts and Towns of the Madras Presidency during the year 1903.—cont.

[illegible]

* Being a new rural town the information is not available.

No. VII.—Deaths registered from Cholera in the districts of the Madras Presidency during each month of the year 1903.

1	2	3	4	5												6		7		8				
Number.	Districts.	Circles of registration.		Villages.		January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.		Ratio of deaths per 1,000 of population.		Mean ratio per 1,000 for previous 5 years.		
		Number in each district.	Number from which deaths from cholera were reported.	Number in each district.	Number from which deaths from cholera were reported.													Males.	Females.	Total.	Males.		Females.	Total.
1	Anantapur	19	965	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	0.009	0.001	1.4			
2	Bellary	19	915	...	...	...	...	...	...	...	...	...	...	...	...	...	...	55	60	115	0.1	0.1	1.4	
3	Chingleput	21	8	...	...	...	...	...	...	...	...	...	...	...	...	...	...	435	329	764	0.4	0.3	1.3	
4	Coimbatore	16	1,554	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	7	13	0.01	0.01	1.3	
5	Cuddapah	23	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	11	6	17	0.01	0.01	1.3	
6	Ganjam	23	9	...	...	...	...	...	...	...	...	...	...	...	...	...	...	451	439	871	0.5	0.4	1.2	
7	Godavari	25	10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	66	52	118	0.06	0.04	1.2	
8	Kistna	25	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5	5	14	0.005	0.01	1.2	
9	Kurnool	11	767	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1.2	
10	Madras	23	4,132	...	...	...	...	...	...	...	...	...	...	...	...	...	...	12	...	24	0.05	0.05	1.1	
11	Madurai	19	831	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2,565	2,067	4,422	1.7	1.4	1.1	
12	Malabar	19	1,832	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2,588	3,269	6,167	2.1	2.3	1.2	
13	Nellore	20	51	...	...	...	...	...	...	...	...	...	...	...	...	...	...	207	183	390	0.3	0.2	0.7	
14	The Nilgiris	22	9	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	0.06	
15	North Arcot...	20	3,423	...	...	...	...	...	...	...	...	...	...	...	...	...	...	40	33	73	0.04	0.03	0.09	
16	Salem	18	8,846	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2,186	1,440	4,046	2.0	1.7	1.3	
17	South Arcot...	20	7,009	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1,125	973	2,098	5.0	0.8	0.9	
18	South Canara...	7	1,298	...	...	...	...	...	...	...	...	...	...	...	...	...	...	12	7	19	0.02	0.01	0.02	
19	Tanjore	23	2,826	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2,009	1,369	3,378	1.9	1.6	1.7	
20	Tinnevely	26	1,824	...	...	...	...	...	...	...	...	...	...	...	...	...	...	820	581	1,401	0.6	0.6	0.7	
21	Trichinopoly.	11	640	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1,588	1,350	2,938	2.3	1.8	2.1	
22	Vizagapatnam.	27	2,760	...	...	...	...	...	...	...	...	...	...	...	...	...	...	22	27	49	0.04	0.03	0.02	
	Total, Madras Presidency...	417	211	42,729	3,597	1,573	1,281	1,108	1,078	1,556	3,491	3,970	2,314	1,206	1,133	1,480	7,203	14,303	13,088	27,393	0.8	0.7	0.7	1.5

No. VIII.--Deaths registered from small-pox in the districts of the Madras Presidency during each month of the year 1903.

1	2	3	4	5												6		7		8		9						
Number.	Districts.	Number in each district.	Number from which deaths from small pox were reported.	Villages.	Number in each district.	Number from which deaths from small pox were reported.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Males.	Females.	Total.	Under 1 year.	From 1 to 10 years.	Males.	Females.	Total.	Ratio of deaths per 1,000 of population.	Mean ratio per 1,000 for previous 5 years.
							January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Males.	Females.	Total.	Under 1 year.	From 1 to 10 years.	Males.	Females.	Total.	Ratio of deaths per 1,000 of population.	Mean ratio per 1,000 for previous 5 years.
1	Anantapur	19	9	965	57	31	15	23	44	17	17	7	6	4	612	88	88	171	77	77	35	0.2	0.2	0.2	0.2	0.2	0.2	
2	Bellary	19	11	915	390	55	64	32	48	69	101	114	8	56	612	88	88	171	77	77	35	0.2	0.2	0.2	0.2	0.2	0.2	
3	Chingleput	21	11	2,179	175	28	33	51	29	20	16	19	8	19	43	36	36	72	419	419	324	0.9	0.7	0.8	0.7	0.7	0.7	
4	Coimbatore	21	12	1,558	130	69	63	30	61	41	36	45	46	43	31	25	27	242	287	529	1.4	0.9	0.9	0.9	0.9	0.9		
5	Cuddapah	21	14	1,338	186	104	60	55	112	112	63	82	81	63	49	18	28	481	481	962	0.7	0.7	0.7	0.7	0.7	0.7		
6	Godavari	12	7	4,363	196	16	23	26	37	31	51	66	44	28	18	10	24	102	386	488	1.0	0.6	0.6	0.6	0.6	0.6		
7	Gandavari	25	15	2,732	200	51	89	85	77	129	147	188	100	115	145	88	78	643	639	1,282	0.8	0.6	0.6	0.6	0.6	0.6		
8	Kistna	25	13	1,920	141	27	21	60	6	44	89	54	59	62	32	18	4	268	242	510	0.7	0.7	0.7	0.7	0.7	0.7		
9	Kurnool	11	9	787	112	41	26	43	33	36	72	88	59	22	18	4	11	303	186	489	0.8	0.4	0.4	0.4	0.4	0.4		
10	Madras	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0.02	0.01	0.01	0.02	0.02	0.02	
11	Madras	28	10	4,132	584	78	36	78	60	106	105	63	132	87	71	52	61	820	427	1,247	1.7	0.4	0.3	0.3	0.3	0.3		
12	Malabar	19	16	531	120	165	226	209	149	76	39	34	10	19	490	492	982	77	77	154	0.7	0.3	0.3	0.3	0.3	0.3		
13	Nellore	20	18	1,832	263	97	86	74	87	75	62	64	101	98	74	74	73	613	925	1,538	217	0.5	0.7	0.6	0.6	0.6		
14	The Nilgiris	6	2	51	7	240	215	264	226	175	192	207	225	201	221	144	217	1,377	1,221	2,598	1.7	1.2	1.1	1.1	1.1	1.1		
15	North Arcot	22	18	3,428	314	51	56	59	75	45	40	52	59	77	51	97	77	380	363	743	0.8	0.4	0.4	0.4	0.4	0.4		
16	Salem	20	12	8,895	434	136	227	216	143	121	119	134	137	132	111	152	147	906	889	1,795	1.5	0.8	0.8	0.8	0.8	0.8		
17	South Arcot	18	9	2,709	160	61	95	107	117	68	38	32	38	20	30	37	30	307	301	608	0.7	0.4	0.4	0.4	0.4	0.4		
18	South Canara	7	6	1,288	172	40	57	46	18	63	50	49	27	40	39	33	39	254	250	504	0.8	0.5	0.5	0.5	0.5	0.5		
19	Tanjore	28	14	2,625	224	84	90	48	46	45	54	46	40	64	60	41	31	337	334	671	0.8	0.3	0.3	0.3	0.3	0.3		
20	Trichinopoly	36	14	1,624	184	20	8	4	16	1	2	1	2	3	1	5	...	7	23	21	49	0.2	0.04	0.04	0.04	0.04	0.04	
21	Trichinopoly	11	7	940	20	8	4	16	1	2	1	2	3	1	5	...	...	7	23	21	49	0.2	0.04	0.04	0.04	0.04	0.04	
22	Vizagapatnam.	27	12	2,760	31	13	15	6	6	10	4	...	...	...	...	...	...	3	23	97	60	0.2	0.03	0.03	0.03	0.03	0.03	
Total, Madras Presidency.		417	248	42,729	4,946	1,405	1,482	1,543	1,319	1,103	1,190	1,368	1,337	1,144	1,053	986	901	7,306	7,419	16,015	7,055	4,144	0.4	0.4	0.4	0.7	0.7	

No. XI.—Statement prescribed by the Government of India in Letter No. 10—326, dated 8th December 1894, Home Department (Sanitary), communicated with G. O., No. 2654 L. Mis., dated 20th December 1894.

[illegible]

(Comparative Table showing percentage of mortality to total mortality from year to year under each head of death causation.)

Name of municipality.	Date of completion of works of	3		4		5		6	
		Average annual death-rate since the introduction of drainage system or water-supply.		Percentage of deaths to total mortality under each head of death causation.		Average annual death-rate for the five-year period preceding the introduction of drainage system or water-supply.		Percentage of deaths to total mortality under each head of death causation.	
		Drainage.	Water-supply.	Cholera.	Small-pox.	Fever.	Dysentery and Diarrhoea.	Injuries.	All other causes.
Coonoor—cont.	Jan. 1893—cont.	...	...	1898	34.8	...	...	...	...
				1899	28.6	...	...	...	...
				1900	30.5	...	...	...	...
				1901	24.4	1.0	...	...	...
				1902	29.0	...	...	...	...
Cuddalore	July 1893.	...	...	1903	48.0	...	...	...	...
				1893	46.9	...	...	...	...
				1894	33.9	...	...	...	...
				1895	32.9	...	...	...	...
				1896	21.7	...	...	...	...
Dindigul	Aug. 1896.	...	...	1897	28.5	...	...	...	...
				1898	29.7	...	...	...	...
				1899	29.0	...	...	...	...
				1900	31.7	...	...	...	...
				1901	21.2	...	...	...	...

APPENDIX.

(Comparative Table showing percentage of mortality to total mortality from year to year under each head of death causation.)

Name of municipality.	Date of completion of works of	3		4		5		6	
		Average annual death-rate since the introduction of drainage system or water-supply.		Percentage of deaths to total mortality under each head of death causation.		Average annual death-rate for the five-year period preceding the introduction of drainage system or water-supply.		Percentage of deaths to total mortality under each head of death causation.	
		Drainage.	Water-supply.	Cholera.	Small-pox.	Fever.	Dysentery and Diarrhoea.	Injuries.	All other causes.
Kumbakonam	Oct. 1894	...	...	1894	37.5	...	...	...	...
				1895	31.2	...	...	...	...
				1896	34.2	...	...	...	...
				1897	39.9	...	...	...	...
				1898	38.0	...	...	...	...
Kurnool	October 1897.	...	...	1899	36.4	...	...	...	...
				1900	30.4	...	...	...	...
				1901	31.9	...	...	...	...
				1902	29.1	...	...	...	...
				1903	31.2	...	...	...	...
Madras	April 1872.	...	...	1897	53.2	...	...	...	...
				1898	24.6	...	...	...	...
				1899	27.0	...	...	...	...
				1900	29.3	...	...	...	...
				1901	32.0	...	...	...	...

SANITARY CONDITION OF WORKS.

(Comparative Table showing percentage of mortality to total mortality from year to year under each head of death causation.)

1	2	3	4	5	6													
Name of municipality.	Date of completion of works of Drainage.	Average annual death-rate since the introduction of drainage system or water-supply.	Percentage of deaths to total mortality under each head of death causation.															
			Cholera.	Small-pox.	Fevers.	Dysentery and Diarrhoea.	Injuries.	All other causes.										
Madras—cont.	April 1872—cont.	Years.	Death-rate.	Cholera.	Small-pox.	Fevers.	Dysentery and Diarrhoea.	Injuries.	All other causes.	Years.	Death-rate.	Cholera.	Small-pox.	Fevers.	Dysentery and Diarrhoea.	Injuries.	All other causes.	
		1884	40.5	0.2	0.3	24.3	15.7	0.9	48.6	...	...	...	...	...	...	...	...	...
		1885	30.8	0.1	0.4	31.9	13.9	1.1	53.0	...	...	...	...	...	...	...	...	...
		1886	36.2	1.5	0.9	15.8	11.7	1.0	57.1	...	...	...	...	...	...	...	...	...
		1887	30.8	0.6	0.6	17.9	9.3	1.3	70.0	...	...	...	...	...	...	...	...	...
		1888	37.4	0.4	0.6	22.3	10.6	1.6	64.5	...	...	...	...	...	...	...	...	...
		1889	42.0	0.7	0.7	18.7	12.5	1.2	55.6	...	...	...	...	...	...	...	...	...
		1890	42.4	1.3	0.5	13.7	15.4	1.6	64.3	...	...	...	...	...	...	...	...	...
		1891	62.6	4.5	0.5	13.7	15.4	1.6	64.3	...	...	...	...	...	...	...	...	...
		1892	46.0	0.2	0.3	18.8	10.9	0.9	63.0	...	...	...	...	...	...	...	...	...
		1893	41.1	0.2	0.3	14.3	9.8	1.0	43.1	...	...	...	...	...	...	...	...	...
		1894	36.0	0.1	0.4	16.6	10.4	0.5	64.8	...	...	...	...	...	...	...	...	...
		1895	37.7	0.1	0.4	16.6	10.4	0.5	64.8	...	...	...	...	...	...	...	...	...
Madras	April 1894	1896	44.8	0.1	0.3	18.7	10.4	0.5	64.8	...	...	...	...	...	...	...	...	
		1897	35.5	0.1	0.3	18.7	10.4	0.5	64.8	...	...	...	...	...	...	...	...	
		1898	44.8	0.1	0.3	18.7	10.4	0.5	64.8	...	...	...	...	...	...	...	...	
		1899	38.9	0.1	0.3	18.7	10.4	0.5	64.8	...	...	...	...	...	...	...	...	
		1900	46.3	0.1	0.3	18.7	10.4	0.5	64.8	...	...	...	...	...	...	...	...	
		1901	55.0	0.1	0.3	18.7	10.4	0.5	64.8	...	...	...	...	...	...	...	...	
		1902	42.0	0.1	0.3	18.7	10.4	0.5	64.8	...	...	...	...	...	...	...	...	
		1903	37.7	0.1	0.3	18.7	10.4	0.5	64.8	...	...	...	...	...	...	...	...	
		1904	37.7	0.1	0.3	18.7	10.4	0.5	64.8	...	...	...	...	...	...	...	...	
		1905	37.7	0.1	0.3	18.7	10.4	0.5	64.8	...	...	...	...	...	...	...	...	

APPENDIX.

No. XI.—Statement prescribed by the Government of India in Letter No. 10—326, dated 8th December 1894, Home Department (Sanitary), communicated with G. O., No. 2654 I., M., dated 20th December 1894—cont.

(Comparative Table showing percentage of mortality to total mortality from year to year under each head of death causation.)

1	2	3	4	5	6														
Name of municipality.	Date of completion of works of	Average annual death-rate since the introduction of drainage system or water-supply.	Percentage of deaths to total mortality under each head of death causation.					Average annual death-rate for the five-year period preceding the introduction of drainage system or water-supply.					Percentage of deaths to total mortality under each head of death causation.						
			Drainage.	Water-supply.	Years.	Cholera.	Small-pox.	Fevers.	Dysentery and Diarrhoea.	Injuries.	All other causes.	Years.	Death-rate.	Cholera.	Small-pox.	Fevers.	Dysentery and Diarrhoea.	Injuries.	All other causes.
Tanjore	Oct. 1895.	1895	25.5	5.8	0.8	22.1	21.2	0.8	44.3	1890	28.2	11.1	6.3	22.6	20.0	0.9	39.1		
		1896	27.0	3.7	0.6	23.5	25.4	0.9	44.5	1891	29.4	3.8	4.4	21.2	23.3	0.6	46.7		
		1897	25.2	12.3	0.6	20.4	22.4	0.7	43.0	1892	29.2	12.7	0.9	19.1	28.4	0.8	36.1		
		1898	25.5	10.3	0.3	13.1	18.2	0.1	62.0	1893	35.7	28.8	2.2	17.6	22.0	0.3	29.1		
		1899	26.0	6.2	3.1	19.2	16.4	1.1	54.0	1894	26.9	13.2	0.9	16.5	26.3	1.2	39.0		
		1900	27.0	4.8	2.4	22.2	19.8	0.2	60.5	...	...	...	...	...	...	...	...		
		1901	26.0	5.2	0.1	18.2	25.7	0.8	50.0	...	...	...	...	...	...	...	...		
		1902	28.2	3.5	0.6	9.7	18.0	0.6	67.6	...	...	...	...	...	...	...	...		
		1903	29.1	1.7	0.1	10.6	14.0	0.9	73.3	...	...	...	...	...	...	...	...		
Trichinopoly	December 1896, but water supplied from April 1896.	1896	30.4	19.2	0.8	22.4	11.9	1.1	44.6	1891	29.5	17.1	3.8	19.9	11.4	0.6	47.2		
		1897	29.1	10.6	1.4	19.6	9.2	1.0	58.2	1892	25.6	14.0	5.9	28.6	13.7	1.3	39.5		
		1898	30.4	21.1	1.4	14.1	6.7	0.9	52.8	1893	30.6	36.8	3.9	26.8	9.9	0.8	27.8		
		1899	26.6	15.3	0.6	5.9	9.0	1.1	68.1	1894	24.4	12.6	1.6	29.4	11.0	1.1	41.3		
		1900	30.3	7.7	0.6	10.5	7.9	0.7	72.6	1895	23.6	14.0	0.4	31.2	15.7	1.5	37.2		
Vizagapatam	Dec. 1902.	1901	24.8	11.9	0.5	12.8	10.6	1.0	63.2	...	...	...	...	...	...	...	...		
		1902	21.2	2.8	0.6	18.3	10.0	0.9	67.3	...	...	...	...	...	...	...	...		
		1903	25.7	12.9	0.7	12.2	10.8	0.4	63.0	...	...	...	...	...	...	...	...		
		1904	29.5	...	...	19.7	24.7	0.6	55.0	1896	23.6	...	0.2	25.2	20.0	0.9	33.7		
									1899	31.6	...	0.1	26.8	24.0	1.7	47.4			
									1900	33.1	0.8	...	21.3	20.6	1.8	56.3			
									1901	25.8	0.4	...	20.8	13.9	1.1	58.8			
									1902	26.6	...	...	19.8	20.1	1.7	58.4			

SANITARY CONDITION OF WORKS.

251

PART II.

SANITARY ENGINEERING.

98

THE FOURTEENTH ANNUAL REPORT
OF THE
SANITARY ENGINEER TO THE GOVERNMENT OF MADRAS,
1903.

I.—INVESTIGATION OF SCHEMES.

INVESTIGATIONS in respect to the drainage and water-supply of the following towns were carried out during the year :—

(a) *Schemes on the Programme for 1903.*

(1) *Coimbatore water-supply.*—In G.O., Mis. No. 494-M., dated 29th April 1902, Government ordered the investigation of a scheme for the water-supply of the town. The proposed source of supply was the Kumarasawmi tank, the last of a group of tanks fed from the Noyel river by the Chitrachavadi channel. It was supposed that the tank receives a supply for all but two months in the year and that a two months' supply for the town could be secured by forming a reserve tank by bunding off a portion of the Kumarasawmi tank. On further investigation after proper surveys and levels had been taken, it was found that the information on which the original proposal was based was inaccurate. The tank remains dry ordinarily for five months in the year and for a longer period when the season is unfavourable. The capacity of the tank is just equal to a two months' supply to the town. On these circumstances being brought to the notice of the Chief Engineer, Public Works Department, he formulated a new scheme, i.e., to construct a new tank below the existing tanks at one or other of the two sites indicated, sufficiently large to hold a five months' supply to the town. This scheme was investigated during the year and is quite feasible; but, of course, it will cost much more than the Kumarasawmi tank scheme. Detailed plans and estimates will be prepared during 1904.

(2) *Ootacamund drainage.*—A report, plans and estimates of the drainage of Ootacamund were submitted on 11th March 1903. The scheme embraced the following portions of the town :—

- (1) The Kodapamund block.
- (2) The old Ootacamund including Government buildings on Stonehouse Hill.
- (3) The bazaar blocks 1 to 10 dealt with in the scheme submitted in 1899 and to which are now added blocks 9a and 10a.
- (4) The Metucherry block.
- (5) The Kandal and old Ootacamund block.

The Sanitary Commissioner pointed out that the scheme as submitted excludes very important portion of the inhabited areas and proposed the inclusion of certain new areas, the regrading of the main sewer and certain other modifications. Thereupon two estimates, one for regrading the main sewer (Rs. 1,57,000) and the other for regrading only the incorrect portion of the sewer (Rs. 38,000) were prepared and further instructions on the points raised by the Sanitary Commissioner were requested. The Sanitary Board, in its Proceedings No. 400-S. of 23rd October 1903, replying to the various points, considered that the cost of the various items making up the scheme, viz., improvements to the sewer, drainage of the various blocks and areas should be separately estimated for and requested the Sanitary Engineer to remodel the scheme accordingly after obtaining the views of the Collector of the Nilgiris and of the Chairman of the Municipality.

To carry out the investigations proposed by the Sanitary Board, application has been made to Government for the necessary survey establishment and as soon as this is sanctioned the work will be taken up. In the meantime officers referred to have been consulted.

(3) *Anantapur drainage*.—The Sanitary Engineer was requested in G.O., No. 1262-M., dated 17th October 1902, to work out roughly a drainage scheme and submit an approximate estimate of the cost of the same and was informed that, if the scheme was likely to be within the means of the council, the necessary plans and estimates might be prepared. As it was found that no proper maps of the town are available at present, the investigation of the scheme was postponed pending the receipt of the Revenue Survey maps which are under preparation.

(4) *Kadigattam water-supply*.—As it was thought that the scheme for the water-supply of this town which was presented in 1896 could be executed without the aid of Government, the revision of the scheme was included in the programme for the year. The revised scheme is in course of preparation and will be submitted shortly.

(5) *Nellore water-supply*.—As mentioned in the previous year's report, the investigation of the scheme was undertaken early this year and the necessary levels and surveys having been completed, the plans and estimates are under preparation and the scheme, it is hoped, will be presented shortly.

(b) Additional Schemes.

(1) *Cuddapah—Improving the water-supply*.—In G.O., Mis. No. 595-M., dated 18th April 1903, Government accepted the opinion of the Sanitary Engineer and the Sanitary Board that the proposal of the council to dam the Bugga stream was impracticable and approved of the Sanitary Board's recommendation to undertake the experimental borings suggested by the Geological Department and requested the Municipal Council to place Rs. 250 at the disposal of the Sanitary Engineer. Funds were provided in May 1903, but were found insufficient and to continue the investigation further, an additional allotment of Rs. 1,000 was asked for. The council has been requested to provide the necessary funds in its budget for 1904-1905.

(2) *Ellore water-supply*.—At the request of the Sanitary Engineer, the Municipal Council was asked to allot Rs. 325 for taking additional levels required in connection with the above scheme. Funds having been provided, the necessary levels and surveys were completed, but the preparation of plans and estimates will be taken up as soon as the work on hand is overtaken.

(3) *Kodaikāmal water-supply*.—In G.O., No. 1575-M. of 19th December 1902, the Sanitary Engineer was directed to revise the estimate in accordance with the Sanitary Board's views. The original estimate provided for an earthen dam which, under the instruction of the Chief Engineer, Public Works Department, has been altered into a concrete dam with a rubble skin wall two feet thick. The estimate as finally revised amounted to Rs. 62,250 against the original cost of Rs. 49,180 and was approved by the Sanitary Board. Government in its order No. 1243-M. of 7th September 1903 stated that the cost of the scheme was out of proportion to the interests of the community and that it cannot undertake to make any contribution from Provincial Funds. The council was requested to consider and report what further action it proposes to take in the matter.

(4) *Masulipatam water-supply*.—As mentioned in the last year's report, the experiments on the Gudur sand ridge were commenced by the Public Works Department by sinking three wells and as the water from one of the wells was pronounced to be impure by the Chemical Examiner, it was advised that a new site should be selected for an experimental well where it was known that good water existed. The Sanitary Commissioner did not consider the experiments conclusive and suggested the introduction of tube wells at various sites where fresh water existed. The Sanitary Board thereupon recommended that water in the other wells of the ridge should be analysed first and the result reported and should the analysis prove favourable, experiments for testing the yield might afterwards be made.

(5) *Madura drainage*.—The scheme referred to in the last year's report was approved by the Sanitary Board and recommended for sanction of Government.

(6) *Mangalore drainage*.—In G.O., No. 1414-M. of 19th November 1902, the Sanitary Engineer was requested to work out roughly a scheme for draining the western portion of the town and to submit an approximate estimate of cost. A preliminary report with an approximate estimate amounting to Rs. 1,46,000 was submitted to Government on 11th June 1903 and communicated to the council to report their views thereon.

(7) *Srirangam drainage*.—The proposal of the Sanitary Engineer to make a preliminary survey of the town with a view to ascertain how the town drainage can best be dealt with having been approved by Government, the Municipal Council was directed to place Rs. 500 at his disposal. This sum having been placed by the council, levels and surveys were commenced.

(8) *Salem drainage*.—At the request of the council, the Sanitary Engineer was called upon by Government to prepare a drainage scheme for Gogai of Salem town. Two alternative proposals, one with open surface drains to cost Rs. 75,000 and the other with underground pipes to cost Rs. 1,00,000, were submitted. The matter was referred to the Council for report as to its ability to finance the scheme.

(9) *Tiruvannamalai water-supply*.—The Sanitary Board having finally recommended the adoption of the Samudram Valley scheme as being the best, Government ordered in G.O., Mis. No. 679-M., dated 8th May 1903, that the scheme should be further investigated and kept ready for execution so that it may be put in hand when funds permit. In response to the request of Government as to what tests he would propose to ascertain the yield of the trench and what the cost of such tests would be, the Sanitary Engineer reported that the test should be for the full length of the trench and that the cost would be Rs. 14,538. Government approved of the proposals and requested the council to report how it proposes to meet the cost.

(10) *Vellore water-supply*.—The plans and estimates for the water-supply of this town submitted on the 18th December 1902 having been approved by the Sanitary Board, were referred by Government to the Public Works Department for scrutiny.

(11) *Saidapet water-supply*.—The extra borings suggested by the Geological Department and referred to in the report for 1902 were undertaken during the year and a report was submitted to Government. Government considered that the well and gallery should first be constructed and the yield of water tested before sanctioning the scheme for execution and requested the District Board of Chingleput to allot Rs. 13,400 for the purpose, which the Board was not able to meet owing to the crippled state of its finances.

II.—EXECUTION OF WORKS.

(a) Works under execution by the Public Works Department.

(1) *Cocanada water-works*.—The estimate for the works amounted to Rs. 4,66,200 was revised by the Public Works Department for the second time and sanctioned in G.O., No. 2088-W., dated 24th July 1903. The works were completed during the year and taken over by the council in August 1903 and have since been opened for public use.

(2) *Vizagapatam water-works*.—The water-works which were under execution by the Public Works Department were completed during the year and were taken over by the council on 21st May 1903, and the town is now being supplied with water.

(3) *Tuticorin water-works*.—Owing to the alteration in the design of the outlet sluices in consequence of the very large amount of silt being brought down the channel from the Korampallam tank, a revised estimate amounting to Rs. 1,17,780, which was prepared by the Superintending Engineer, VI Circle, in consultation with the Sanitary Engineer, was sanctioned in G.O., No. 3021-W., dated 27th October 1903. The Board of Revenue having put forward the proposal of extending the water-supply to the Loringupuram Salt Factory at Tuticorin, the Sanitary Engineer was requested to report the probable cost of laying a branch pipe to the Factory.

Accordingly an estimate amounting to Rs. 4300 was prepared and submitted. This was sanctioned to be executed by Public Works Department at the cost of Municipal Funds.

(b) Works under execution by the Sanitary Engineer to Government.

(1) *Experimental filters at Guindy.*—The construction of experimental filters for disposal of the sewage from the King Institute of Preventive Medicine at Guindy sanctioned for execution by the Sanitary Engineer was completed and handed over to the Sanitary Commissioner during the year. The estimate for the works was revised during the year owing to the extra cost involved in acquiring the land and it amounted to Rs. 7,870 against the original estimate of Rs. 7,790. In view of the proposal of the Sanitary Commissioner to acquire additional land and lay it out for irrigation by purified sewage approved by the Sanitary Board, a supplemental estimate, amounting to Rs. 3,590, was submitted and sanctioned in G.O., No. 3466-W., dated 3rd December 1903.

(2) *Coonoor water-works.*—The Government of India having sanctioned the utilization, by the Coonoor Municipality, of the water of the Kundamunji stream for the water-supply of Coonoor, the scheme was revised and submitted in July 1903. The scheme in brief consists of a dam across the Coonoor stream, 10,650 feet of delivery main, a service reservoir on Gray's hill and 18,711 feet of distributionary mains varying from 2½ to 6 inches diameter.

The revised scheme which was estimated to cost Rs. 1,16,740 was sanctioned in G.O., No. 1547-M., dated 21st October 1903, for execution by the Sanitary Engineer. Immediate arrangements were accordingly made and the works are in progress.

(3) *Guntur water-works.*—On the earnest representation of the council of the great distress felt in Guntur from want of drinking water during the hot months, Government adopted the scheme for supplying water from the Yengalayapalem springs estimated to cost Rs. 2,17,800 and requested the Sanitary Engineer to report how much could be spent in the current year on the scheme if funds were provided. The Sanitary Engineer reported that it would be possible to spend about 1½ lakhs on the construction of head works, the conduit, the service reservoir and one line of pipes only to the centre of the town.

This proposal having been accepted, Government in its order No. 757-M. of 30th May 1903, made a grant of Rs. 1,00,000 to the Municipal Council and promised to lend Rs. 25,000 as a loan on the usual terms and further promised to raise the grant by Rs. 9,000 to complete the whole scheme leaving the council to provide the balance by further loan. The necessary arrangements were made in allotting contracts and getting materials, etc., and the works are in rapid progress.

The Municipal Council having expressed its desire to proceed with the complete scheme, a revised estimate amounting to Rs. 2,40,095 including a supplemental estimate of Rs. 14,180 for extension of pipe lines and for additional fountains not provided in the original estimate of Rs. 2,17,800 was submitted and sanctioned by Government in G.O., No. 3164-W., dated 7th November 1903.

(4) *Dindigul water-works.*—As stated in the last year's report, a report with plans and estimates for the extension of the gallery and completion of the works in connection with Oodukam Valley scheme for the water-supply of the town was submitted on the 26th January 1903.

The scheme is designed for a supply of 200,000 gallons per day for a population of 25,000 as desired by the council against 160,000 gallons in the original scheme. The scheme comprises a trench 1,200 feet long including the length already cut, an engine and boiler house to be fitted with existing pumping machinery and a 7-inch pumping main to the existing service reservoir and is estimated to cost Rs. 39,300.

The scheme was sanctioned in G.O., No. 1020-M., dated 27th July 1903, for execution by the Sanitary Engineer to Government. Towards the cost of the works the Municipal Council have already provided Rs. 10,000 from a loan and Government made a grant of Rs. 19,650 from Provincial Funds and promised to lend the balance of Rs. 9,650 on the usual terms.

Necessary arrangements have been made to get materials and allot contracts, etc., and the works were in good progress at the end of the year.

(5) *Trichinopoly water-works.*—The protective works to the head works of the water-works were completed during the year. The two additional infiltration wells sanctioned in G.O., No. 2894-W., dated 3rd October 1902, were sunk before the flood season but these were not connected to main owing to the late arrival of materials ordered through the Director-General of Stores.

Twice during the year the collecting pipe, laid in the river bed, was damaged by high floods resulting in the stoppage of pumping as sand entered the screening well through the broken joint. The town supply was stopped for about a fortnight in the first case and about eight days on the second occasion. Temporary arrangements had to be made to exclude sand from the inlet pipe and admit water so that pumping might be resumed.

It was considered that the pipe line in the bed of the Canavery would always be liable to damage by high floods in its present unsupported state and this would result in the stoppage of water for the town. To obviate the possibility of the water-supply being cut off, the acting Sanitary Engineer submitted proposals for drawing flood water in an emergency from the river into the existing screening chamber at a cost of Rs. 2,800 and pointed out that the work can be put in hand from the funds already at his disposal. In submitting the above proposals, it was suggested that the two new wells need not be connected during the ensuing dry season and until the collecting pipe was properly secured and that three alternative designs for permanently restoring the existing collecting pipe line from any damage by future floods, were under preparation and would be submitted at the earliest possible date. The proposals of the acting Sanitary Engineer have since been approved by the Chief Engineer, Public Works Department, and sanctioned by Government.

III.—MAINTENANCE OF WATER-WORKS.

The Municipal Councils have from time to time been advised of the defects found in the maintenance of the water-works. The weekly statements issued to each council has been continued and the consumption of fuel and stores when found to be excessive was promptly brought to the notice of the council concerned for necessary action. In this way an efficient check is kept on the staff at the pumping station.

In the case of Karnool Municipal pumping station where the consumption of fuel was very high, a proposal was submitted by the acting Sanitary Engineer towards the end of the year to substitute an oil engine for one of the present steam engines in order to reduce the cost of running the pumps. This proposal has since been approved by Government and it is hoped that the oil engine will be running during the year 1904.

Complete examinations of the machinery at the water-works were made by the Inspectors of Steam-boilers and Prime-movers and reports on their condition forwarded to the authorities concerned. The report on the condition of the pumping plant and working of the various stations will be found in the Boiler Inspector's report as usual.

The supply of water during the year in the following towns continued to be satisfactory, viz., Madura, Tanjore, Karnool, Dindigul, Conjeeveram, Ooty, Adoni and Cuddapah. At Trichinopoly owing to the damage by high floods to the collecting pipe, only unfiltered water was supplied from August 1903.

IV.—MINOR SANITARY WORKS AND TYPE DESIGNS.

Plans and estimates relating to 101 minor sanitary works, of which 3 were minor drainage works, 31 minor water works, 29 hospitals, 20 markets, 10 slaughter-houses, 4 latrines, 1 incinerator and 3 improvements to roads and buildings, were checked and scrutinised during the year.

One type design for wooden staging for drawing water from tanks was prepared and submitted to the Sanitary Board at the end of the year.

Sanitation of Chepauk.—As stated in the last year's report, plans and estimates, amounting to Rs. 58,453, for the construction of latrines, urinals, and lavatories for the Chepauk Government buildings and for the improvement to the pipe system there were forwarded to the Consulting Architect to Government on 5th February 1903.

Coimoor market improvements.—In response to a request of Government for the preparation of plans and estimates for the above works on the lines indicated by the Collector of the Nilgiris, the Sanitary Board was furnished with plans and estimates, amounting to Rs. 1,87,000. These were returned by the Sanitary Board with a request to lay the matter before the council and obtain their views. In laying the matter before the council, the Sanitary Engineer was requested to prepare an alternative estimate providing for essentials only; and this estimate amounted Rs. 1,14,700. The two proposals were put before the council, who expressed their inability to adopt any of the proposals owing to heavy anticipated outlay in connection with plague. The matter was reported to the Sanitary Board.

V.—CONCLUDING REMARKS.

During the year Mr. J. A. Jones, Sanitary Engineer to Government, having been granted combined leave for 7 months and 11 days, the undersigned assumed charge from Mr. Jones of the office from 2nd November 1903. Mr. H. Nowroji, Assistant Sanitary Engineer, acted as Engineer, Madras Municipality, for 3 months from 10th June to 9th September 1903, during which period Mr. J. E. Lockyer acted as Assistant Sanitary Engineer.

The following officers were in charge of works under execution during the year:—

Mr. J. E. Lockyer, Engineer, Coimoor water-works.
Mr. J. R. Sivasubramania Iyer, Supervisor, Quntur water-works.
Mr. J. E. Heusman, Supervisor, Dindigul water-works.

Inventories of valuable stock have been maintained in the office.
Service registers have been duly maintained and kept up to date.
The staff has worked satisfactorily throughout the year.

W. HUTTON, A.M.I.C.E.,
Ag. Sanitary Engineer to Government.

OFFICE OF SANITARY ENGINEER TO GOVERNMENT,
COLLEGE BRIDGE HOUSE, EGMORE,
MADRAS, 9th March 1904.

Government {1904} of Madras.

LOCAL AND MUNICIPAL.

Recd.

Recd.

} 1904.

Enclosures

Spare copies

G.O., Nos. 803, 804-L., 8th July 1904.

JULY.

Sanitation.

Reviewing the reports on—for 1903.

Nos. 803, 804-L., 8TH JULY 1904.

GOVERNMENT OF MADRAS.
LOCAL AND MUNICIPAL DEPARTMENT.

Read—the following papers:—

Proceedings of the Sanitary Board, No. 153-S., dated 16th May 1904.

Read—the following papers:—

Report of the Sanitary Board for the year 1903.

" " Engineer for the year 1903.

Resolution—

Submitted to Government with reference to rule 23 of the rules relating to the constitution and functions of the Sanitary Board issued with G.O., No. 1081-L., dated 2nd September 1903.

2. The report of the Sanitary Commissioner has not yet reached the Board. It will be submitted on receipt.

(True Extract.)

R. PARSONS,
Secretary.

To

The Secretary to Government, Local and Municipal

Department, with enclosures and 8 spare copies

of the Sanitary Board's report.

Sanitary Commissioner.

Proceedings of the Sanitary Board, No. 153-S., dated 16th May 1904.

Read—the following:—

Report of the Sanitary Commissioner for the year 1903.

Resolution—

Submitted to Government in continuation of Proceedings of the Sanitary Board, No. 153-S., dated 16th May 1904.

(True Extract.)

R. PARSONS,
Secretary.

To

The Secretary to Government, Local and Municipal

Department, with 1 report.

ORDER—No. 803-L., dated 8th July 1904.

The sanitary history of the year 1903 is fully recorded and discussed in the reports of the Sanitary Board, the Sanitary Engineer and the Sanitary Commissioner which are read above. Lieut.-Colonel King's report is especially full and interesting. The Government have but few observations to add.

Nos. 803, 804-L., 8TH JULY 1904.

2. The total number of births registered is higher than in 1902 or than the average of the 10 preceding years. The Government are glad to observe that Lieut.-Colonel King is able to attribute the recorded increase in part to improved registration, which, however, the Government regret to remark, advances but slowly. Registration of both births and deaths is especially defective in Cuddapah, Ganjam, Madura and North Arcot and the attention of the Collectors is directed to the subject. With the exception of thirteen towns, there was an increase in the recorded birth rate in Municipal areas. In Coimbatore, Ootacamund, Tiruppattur, and Vellore, the decrease is ascribed to the exodus of the people during plague. There was no reason, however, why there should have been a falling off in Cocanada, Masulipatam, Periyakulam, Kodaikanal, Tirupati, Vaniyambadi, Tinnevely, Tuticorin and Srivilliputtur, and the Councils concerned are requested to make arrangements to secure accurate registration. In respect of the registration of deaths in Municipalities, the better results obtained there as compared with those in the districts were due partly to the registration of vital statistics being compulsory and partly to increased attention to the subject. There was no change in the arrangements for the registration of vital statistics within railway limits outside Municipal towns, and the Station Masters were entrusted with the duty of reporting to the local registrar, births and deaths occurring within these limits.

3. With regard to the mortality from cholera, the Government desire to call the attention of all Municipalities to the significant fact that in the six Municipal towns which had a protected water supply, the rate of cholera mortality during the five years ending 1903 was lower by 66 per cent. than during the quinquennium preceding the introduction of the water supply. The mortality from small-pox during 1903 fell from 7 to 4 per mille of the population. It was heavy in North Arcot, Bellary, South Arcot and Cuddapah. In North Arcot the compulsory provisions of the Local Boards Act in regard to vaccination have now been brought into force in 14 Unions, while in South Arcot and Cuddapah this course has been adopted in eleven and eight Unions respectively. The District Board of Bellary is requested to take similar steps in regard to the more advanced tracts of the district. It is satisfactory to note that the rate of mortality in Municipalities was only 1 per mille against 8 in the previous year; but the rates were much above the average in Palamcottah, Gudigattam and Cannanore and in the opinion of the Government the increase must be attributed mainly to the neglect of the Councils concerned to enforce effectively the compulsory provisions of the District Municipalities Act. The number of deaths registered under plague was more than in the previous year, being 13,291 against 10,795, representing a mortality of 0.5 per mille. Plague continued to be the chief classified cause of death, the rate of mortality for districts being 8.4 per mille and for Municipalities 6.3 per mille. The Government have read with interest the remarks of the Sanitary Commissioner in paragraph 20 of his report on the subject of the investigation of the nature and causes of the malarial fever prevalent in Madras.

4. The attention of the Municipal Councils concerned is drawn to the remarks of the Sanitary Commissioner in paragraph 22 of his report regarding the causes of dysentery and diarrhoea. The report called for in this connection from the Municipal Council of Conjeeveram in paragraph 5 of G.O., No. 778-L., dated 22nd June 1903 should be expedited.

5. The Vizagapatam and Cocanada water works were completed by the Public Works Department, while the works for the water supply of Coonoor and Guntur and the extension of the existing arrangements for the water supply of Dindigul were under execution by the Sanitary Engineer. This officer prepared and submitted during the year to the Sanitary Board or other authorities plans and estimates for the drainage of Ootacamund, Mangalore and Salem. He also suggested minor improvements in connection with the maintenance of the existing water works and checked and scrutinised for the Sanitary Board the plans and estimates relating to 101 minor sanitary works, besides preparing a type design for wooden staging for drawing water from tanks.

6. The Sanitary Board, whose good work the Government acknowledge with thanks, scrutinised the plans and estimates relating to 149 sanitary works of the total estimated value of Rs. 17,66,394. The rules for the conduct of the business of the Board were revised during the year, so as to empower the local bodies to carry out, without reference to the Board, all works estimated to cost Rs. 1,000 and less (instead of Rs. 200 as before), those costing between Rs. 500 and Rs. 1,000 being, however, subject to the approval of the Sanitary Engineer. Provision has also been made in the revised rules for the Board's being furnished by the local bodies with an annual report of progress in the execution of works which have been approved by the Board.

7. Government need hardly remark that they do not share the Sanitary Commissioner's view that hopes for the advance of sanitation have disappeared under their orders prohibiting the employment of Certificated Sanitary Inspectors in rural areas except for the supervision of sanitary arrangements at festivals and fairs and on the occasion of epidemics. On the contrary, they believe that the desired improvement will proceed more rapidly and satisfactorily from the employment of Assistants to the District Medical and Sanitary Officer.

8. The thanks of Government are due to Lient.-Colonel King for his unwearied labours throughout the year to promote sanitary reform. The year under review was the last year of Mr. J. A. Jones' service as Sanitary Engineer to this Government. For 14 years he has held that important post, and His Excellency the Governor in Council is glad to record his high appreciation of the great care and thoroughness with which during the whole of that period Mr. Jones discharged the very responsible duties of his office.

(True Extract.)

H. D. TAYLOR,
Ag. Secretary to Government.

To

The Sanitary Board.
„ Sanitary Commissioner.
„ Sanitary Engineer.
„ Surgeon-General.
„ Public Works Department.
„ Public Department.
„ Revenue Department.
„ Deputy Adjutant General, Madras Command.
„ Inspector-General of Police.
„ Inspector-General of Prisons.
„ Accountant-General.
„ Director of Public Instruction.
J. A. Jones, Esq.
All Collectors.
„ Presidents of District Boards.
„ Chairmen of Municipal Councils.
The President, Municipal Commission, Madras.
Editors' Table.

ENDORSEMENT—No. 804-L., dated 8th July 1904.

Copy to the Government of India, Home Department.

H. D. TAYLOR,
Ag. Secretary to Government.

