ocal & Munl. (1895) Department.

PRINTED.

G.O., No. 170M

DATED 6th February 1895.

[Despatch Abstract.]

Cholera.

Passing orders on Sanitary Commissioner's suggestions for combating---in municipalities.

BACK PAPERS.

G.O.	No.	Department.	Date.	G.O.	No.	Department.	Date.

FURTHER PAPERS.

G.O.	No.	Department.	Date.	G.O.	No.	Department.	Date.

No. 4299.

Office of the Of Medical & Sanitary
January 24th

3-21

[1]

INDEXED.

PRESS.

LOCAL AND MUNICIPAL DEPARTMENT.
G.O., DATED 6. 2. 96
No. 170 m

First copy sent to Press. 6/2/95
Returned for signature. 25/2/95
Despatched in print. 28/2/95

[Despatch Abstract.]

Cholera

Passing orders on Sanitary Commissioner's Suggestions for combating ~~[illegible]~~ in municipalities.

BACK PAPER, NO. of 18

READ AGAIN ORDER OF GOVERNMENT, DATED
12-5-1874 No. 613 m —— P.
again G.O. 25-9-94 No 1329 m. A

FURTHER PAPER, No. C. 1260 R. of 1895

ENCLOSURES.

CURRENT No. 3216 m —— A

STATEMENT WITH DITTO.

ORDER, &c., OF GOVERNMENT—A.

PAPERS KEPT OUT OF FILE FOR DESPATCH IN ORIGINAL (not paged).

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R = Print, but not for monthly volume.

D.O. No. 68

Revenue Board Office,
(Land Revenue),
MADRAS,
28 Jan 1895.

CHIEF SECRETARY'S
30 JAN. 1895
GOVERNMENT OF MADRAS

My dear Price,

I am quite ready to undertake the duty mentioned in your demi-official letter of the 28th inst.

Yours sincerely
C. S. Crole

To
The Hon J. F. Price C.S.I.
I.C.S
Chief Secy. to Govt.

[G/9]
2,000—23-1-95.

D.O

~~Current~~ No. 68

DEPARTMENT.

From

The Hon. Mr. C.S. Crole

No.

Dated 28.1.95

Received 30/1

Enclosures

SUBJECT.

Stating his readiness to undertake the duty mentioned in ~~the~~ D.O of the 28th inst. sent to him:

Subd. to the C.S.

JOB
3/1

[illegible]
[illegible]

...nt headin...
...rint, but not for monthly volume.

III

Office of the District Medical
and Sanitary officer
Bellary 4th December 1894.

No: 3427

OFFICE OF SURGEON-GENERAL
5 DEC. 94
WITH GOVT. OF MADRAS.

Reference: Your Memo No: 6395 / 9.10.94.

I believe Surgeon Lieut Col: King's scheme to be good and likely to be of great benefit.

In most Municipalities probably such money as is spent is not laid out to the best advantage.

2 From my experience of Municipalities money is often wasted in socalled attempts to stamp out Cholera. In Cochin when I was there a fair proportion of the money available during a Cholera epidemic was spent on some infallible Cholera medicine to which the Chairman had once advertised and had great faith.

3 Surgeon Lieut: Col: King has drawn up a scheme of proposed staff &c and if his scheme is sanctioned, detailed rules for working the staff will presumably be issued and the necessary powers will be conferred for compelling contaminated clothing to be given up for cleaning and disinfection and such other measures as are necessary; otherwise no matter how good the scheme it will probably be

D. O.

8/

Copy of despatch
must go together

Desp[d]. 28/1

FORT ST. GEORGE,
~~22nd~~ 28th Jan 1895

My dear Cade

In reporting upon an outbreak of cholera which occurred in Trichinopoly last year the San. Commr. pointed out that the large mortality which had ~~occu~~ taken place was due, as it generally is, to the fact that the Municipal Council had not made adequate preparations beforehand for combating the epidemic. He suggested that all

Councils should be required to provide themselves with the apparatus & disinfectants necessary to deal with similar outbreaks in a scientific manner & that a scheme which Dr. King ~~[illegible]~~ has sketched out, should be laid down for future adoption in case of an ~~outbreak~~ attack of ~~the epidemic~~ cholera.

The Surg. General & the majority of the Dist. Surgeons consulted approve of the scheme ~~in question~~ put forward, & the Govt. views it on the whole ~~& a~~ favourably ~~has~~ ~~accorded its general~~ ~~approval of it~~.

It is however necessary ~~that~~ before any definite orders on the subject can be issued ~~adopted~~ ~~the scheme can be~~ ~~recom-~~ ~~mended for~~ ~~to be adopted~~ ~~general~~ adoption that a set of rules embodying the main ideas ~~put forward~~ advanced by Dr. King ~~in it~~ should be drawn up in such a way that ~~the ordinary~~ staff of an ordinary Municipality could easily comprehend, & remember & ~~also~~ carry them out. ~~these~~

~~that they should be so framed that they would be capable of execution~~

~~by the secretary of~~

It ~~seems~~ appears to Govt. probable that neither the San. Commr. nor the Surg. General have had opportunities of ~~acquiring~~ gaining an intimate acquaintance ~~of~~ with the difficulties of working mofussil municipalities, & it therefore has seemed ~~to Govt.~~ ~~necessary~~ ~~advisable~~ desirable to associate with them for the purpose of framing the ~~rules in question~~ rules required, some officer of ~~[illegible]~~ executive experience in this direction.

I am ~~accordingly~~ therefore to ask ~~if~~ you if you ~~[illegible]~~ oblige Govt. ~~[illegible] so good as to oblige Govt. in this matter~~ by undertaking the office of President of ~~presiding over~~ a Committee consisting of yourself, ~~the San. Commr.~~, the Surg. Genl., the San. Commr., with ~~Mr.~~ Francis as Secretary, to draw up a set of rules on the lines indicated above

MR 22.1.95 Sd. 24/1/95 (from orders.)

Despd. 28/1

III

Office of the District Medical
and Sanitary Officer
Bellary 4th December 1894.

No: 3427

OFFICE OF SURGEON-GENERAL
5 DEC. 94
WITH GOVT. OF MADRAS.

Reference: Your Memo No: 6395/9.10.94.

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3 Surgeon Lieut: Col: King has drawn up a scheme of proposed staff &c and if his scheme is sanctioned, detailed rules for working the staff will presumably be issued and the necessary powers will be conferred for compelling contaminated clothing to be given up for cleaning and disinfection and such other measures as are necessary; otherwise no matter how good the scheme it will probably be

1894

evaded in many ways. 10280

Inq

4. The usual system at present when Cholera appears is for bonfires to be lit, the drains in some of the principal streets to be swept and such dirt &c as is there to be well stirred up, a little white-wash scattered about and poor people attacked to be taken to a "Cholera Hospital" daily reports are sent in and the above represent nearly everything that is really done.

The above procedure probably represents much to the ordinary public but as regards real benefit in preventing the spreading of the disease is of little value.

J W Evans

Surgeon Major
District Medical and
Sanitary officer

B May

1
3216 M of 94

No 685

District medical office.
Salem. 10 November 1894.

OFFICE OF SURGEON-GENERAL
12 NOV. 94
WITH GOVT. OF MADRAS.

From
The District medical & Sanitary Officer,
Salem

To
The Secretary to the Surgeon General
with the Government of Madras.
Madras.

Sir,

In reply to your circular memo No 6395, dated 9th October 1894. I have the honor to submit my opinion on the practical aspect of the Scheme proposed by the Sanitary Commissioner for Madras in his letter dated 4th August 1894. No $\frac{1470}{S}$. G.O. dated 12th May 1894. No 613. M. I have not seen, no copy being available here.

2. The estimated cost of the Scheme has, I think, been much understated. No provision has been made for a suitable Storeroom in which to keep the equipment ready for use. It would, moreover, be highly desirable to have a Special Servant always in charge of the Stores. It is stated that the expenditure for the equipment of a so-called permanent nature would not recur. This is very doubtful if the equipment ever be brought into use. Unless taken great care of, the buckets, boxes, & drums would have to be renewed every 3 or 4 years.

3. Salem town has a population of nearly 70.000 people. According to the Scheme, the town would require equipment and Stores for at least 3 divisions

9337

Salem

2/3216 W of 94

No. 4299.

Office of the Dt Medical & Sanitary Of.
Tanjore, 24th October 1894.

From,
Surgeon Major C. M. Thompson M.B.
District Medical & Sanitary officer,
Tanjore.

To,
The Secretary to the Surgeon General
With the Govt: of Madras,
Madras.

OFFICE OF SURGEON-GENERAL
25 OCT. 94
WITH GOVT. OF MADRAS.

Sir,

With reference to your Memo No. 6395, dated 9th October 1894 referring to me for remarks certain proposals of the Sanitary Commissioner in reference to his scheme for organizing Municipalities and other local bodies so as to prepare them for epidemics of Cholera, I have the honor to say that I have carefully considered the proposals of Surgeon Lieutenant Colonel King and that I most heartily approve of them. I see no difficulty in carrying them out, and as regards expense, I do not think they would entail a greater outlay than is incurred under the present useless system, which consists of distributing compounders, devoid of all medical training, over the District or town armed with so called Cholera pills & medicine.

2. In communication with the Chairman of this Municipality, I have

lready made arrangements for the mmediate entertainment of the necessary staff for one observation circle, as cholera though not actually present in the town of Tanjore may be expected at any moment, s it is prevalent in the neighbouring Districts of Trichinopoly and South Arcot.

The initial expense required n the purchase of Sanitary buckets and antiseptics, would not be objected to by local bodies if they knew that the system would be energetically worked; the only difficulty I foresee lies in the difficulty of procuring the services of a sufficient number of toties, Sweepers, Dholies &c.

I have the honor to be
Sir
Your most obt servant

C M Thompson M.B. Surgeon Major
District Medical & Sanitary Officer.

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Tanjore

3/2216 M of 94

No.

Office of District Medl. and Sanitary
Officer Trichinopoly 29th October 1894

From,

Surgeon Lt Col William O'Hara
District Medl. & Sanitary Officer
Trichinopoly.

To,

The Secretary to Surgeon General
With the Government of Madras
Madras.

OFFICE OF SURGEON-GENERAL
31 OCT. 94
WITH GOVT. OF MADRAS.

Sir,

With reference to your endorsement No. 6395 dated 9th October 1894, I beg to send the following report.

2. In the event of the Surgeon General forwarding it to Government, I should be glad if he could support the recommendations made.

I have the honor to be
Sir
Your Most Obedt. Servant
William O'Hara
Surgeon Lieut Col.
District Medl. & Sanitary
Officer

1894

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Sny

4/3216 mof 94

No. 4

Office of District Medical and
Sanitary Officer Trichinopoly 29th October
1894

From

Surgeon Lieut.Col. William O'Hara
District Medical & Sanitary Officer
Trichinopoly.

To

The Secretary to Surgeon-General
With the Government of Madras
Madras.

OFFICE OF SURGEON-GENERAL
31 OCT. 94
WITH GOVT. OF MADRAS.

Sir,

I have the honor to inform you that I am unable to concur with the Sanitary Commissioner's proposals on the following grounds; although as an abstract Sanitary question the principles and their deductions enunciated by him cannot be disputed.

2. The measures proposed are admittedly experimental, and though based on theories generally accepted, these are still regarded as debatable and incapable of demonstration

3. The hypothesis of the Scheme are complex and interdependent; and it is more than doubtful whether in actual practice the assumptions would be realized.

4. The proposal is analogous to the exploded System of Quarantine, and is untenable for the same reasons.

5. Unless the measures proposed are capable

of indefinite extension they must be manifestly futile. Their indefinite extension is incompatible with Governmental resources.

6. Considering the nature of the (hypothetical) cholera organisms, and their propensity to infinite multiplication (under suitable conditions) one weak spot in the Scheme for their suppression must ensure failure.

7. The nature and conditions of development of the hypothetical cholera germ are not understood, and it is impossible to draw any certain deductions from the results of its action.

8. Following the hypothesis on which the Sanitary Commissioner's proposal is based to its legitimate issue it does not appear why there should ever be an extinction of a cholera invasion, or why on occasions, (and these are so numerous that they cannot be questioned) imported germs disseminated through a large mass of individuals living under conditions which are regarded as favorable do not develop and spread?

9. It is undesirable in the cause of Science, as well as injurious to the prospects of acceptance of Western medicine in India to assume and act on theories which are at best problematical, and which may

soon be shewn to be erroneous.

10. In my opinion the System proposed would be the "best under the circumstances" if the working assumptions could be realized; but failing these the results achieved would be altogether incommensurate with the expenditure incurred.

11. The System presupposes and is dependent upon the co-operation of the masses. — Experience teaches that antagonism - not co-operation is to be expected.

12. The System provides(?) for towns and cities, but cannot possibly legislate for villages and high-ways until the whole country is imbued with Scientific knowledge. With a virus so subtle as cholera, and so capable of multiplication it profits little to secure certain channels and leave an indefinite number of others open. If humans are bearers of cholera bacilli who shall appoint their goings-out and their comings-in?

13. Even if segregation of the infected were possible who could discover those in the incubation stage?

14. As long as segregations cannot be enforced by legal measures and as long as house owners are free to choose their own line of action the

Scheme

4

Scheme proposed cannot be successfully carried out even in large towns - much less in villages.

15. In conclusion I must frankly admit that, though I am unable to recommend for the reasons stated, the large expenditure demanded by Dr. King, I am not in a position to offer a more economic or effective scheme. It only remains for each responsible body to be in a state of preparedness commensurate with the frequency and severity of the epidemics to which they are subject; that by 'slow prudence' they should avert the evil as far as they can, and by a process of Sanitary improvement 'subdue by soft degrees' the chief hindrances to a healthful condition.

This is Dr. K's very point — 'Neream'! is his cry & readiness is just what does not now exist. W.

16. Following this policy I should propose to Government that every Municipality should be provided with a qualified Medical man to act as Sanitary Officer, his Status and Salary will be in accordance with the importance of his charge: he will be required to be a mounted officer, on whom the responsibility of taking prompt action and reporting immediately

Municipalities of 20,000 — 40,000
2nd Class Hospl. Asst. on Rs 40 + 15 horse allowance.
Municipalities of 40,000 — 60,000.
1st Class Hospl. Asst. on Rs 60 + 15.
Municipalities of 60,000 — 100,000
Civil Apothecary of A. M. D. from Rs 80 – 150

5.

any invasion of Epidemic disease will lie. Being in immediate charge of the Sanitary staff he will be in a position to utilise at a moments' notice any members of it that may be necessary - while later he can if desirable enlist additional hands. He will receive advice and support from the District Medical and Sanitary Officer and be subject through the Chairman to the general supervision of the Sanitary Commissioner to whom he will send frequent progress reports.

I have the honor to be
Sir
Your Most Obedt. Servant
William O'Hara
Surgeon Lieut Col.
District Medl. & Sanitary
Officer

Dec 8891

Trichy

5/3226 M of 94

Office of the District Medical and
Sanitary officer — Madura

No 1038
dated 2nd November 1894

OFFICE OF SURGEON-GENERAL
4 NOV. 94
WITH GOVT. OF MADRAS

From

Surgeon Major H. C. Reeves
District Medical and Sanitary
officer — Madura

To

The Secretary to the Surgeon
General with the Government of
— Madras

Sir,

With reference to your Endorsement 6395 No II received 29th ultimo, I have the honor to state that in — Madura — Surgeon Lt: Col: King's scheme would be practicable and, in my opinion, also very useful.

2. I would, however if feasible, in addition to his recommendations, endeavour to enlist the services of the Police who are scattered every where about the town, and who have perhaps the best opportunities of knowing when cholera attacks occur.

3. There are 24 men constantly "on beat" in the town, and I understand

that

that each constable has express orders to report, immediately, cholera cases to his superior. But these reports come very late to the District Medical and Sanitary Officer, and are then practically useless.

4. I consider it unnecessary to make such elaborate arrangements for the disposal of infected clothing and excreta as the Sanitary Commissioner suggests, and I would propose that, instead, cholera excreta be burnt, and infected clothing be boiled in a disinfectant on the spot.

5. The inhabitants, especially those that are poor, not unnaturally object to their clothing being taken away, and, perhaps, destroyed, and they would be much more inclined to give information regarding attacks were it known that their property would, in no way, be interfered with.

I suggest that jars of a concentrated solution of corrosive sublimate (say 1 to 20); with a pinch of red ink powder to colour it, be carried round, and this could be diluted to 1 to 1000 or

1 to 2000 in the house, and the infected clothing boiled in the solution — then the clothing could not spread infection.

7 The Excreta also might be put in chatties with a small quantity of the same solution, then boiled down and finally burnt, or it might be mixed with Mac Dougalls powder, and burnt. One hour would probably complete this process, which would involve about ¼ of the time, labour and money as the method proposed by the Sanitary Commissioner.

8. I can suggest no better means, with modifications, than that proposed by the Sanitary Commissioner, nor do I consider that any other practicable scheme could be devised involving a smaller outlay of Municipal Funds.

9. Madura has 87000 inhabitants, 14,414 houses, and the net yearly income of the Municipality is 119000.

10. The amount spent on conservancy last year was 28,280 rupees, and half of this sum, I would venture to state, was wasted for want of proper supervision; so the expenditure of a few

thousand

thousand rupees more to carry out Surgeon Lt: Col: King's proposals would, in no manner be a tax on the inhabitants.

11. Until Government insist upon Municipalities appointing Competent and responsible Chairman, who will devote all their time to Municipal work, Sanitation, especially, will always be greatly neglected.

12. The Chairman of a Municipality such as this could find ample Employment for at least eight hours a day at Municipal work, but how much time can the present unpaid Chairman be expected to devote daily to Municipal interests who is a practising barrister as well as one of the largest land-owners in the District? Here is a chairman who has the disposal of a more than a lakh of rupees yearly of public money, and who, it is reasonable to infer, has barely time to look after his own important personal interests.

13. When, therefore, it is impossible under existing conditions to improve Sanitation, and thus set up the most effectual barrier against cholera, the next best thing to do is to endeavour to stamp out the disease by the means suggested by the Sanitary Commissioner, should it be imported into the town.

14. It will be seen by the figures quoted that the expenditure would not be great. A "Preventive Staff" for not more than four months would be employed, and it is most unlikely that the Extra Staff entertained in case of an Epidemic would be required for more than 2½ months.

15. The expense mentioned by Government in their order is hardly great in comparison with the large sums now spent on Sanitation, and that in my opinion, owing to the want of proper supervision, is most unprofitably spent.

16. I agree with the Sanitary Commissioner that it is much better to spend money in getting rid of infected clothing and cholera Excreta than to devote Municipal funds to the purpose of procuring cholera pills and chlorodyne wherewith to treat cholera patients, especially as it is now

now stated on some authority that opium instead of helping to relieve symptoms actually favours the propagation of cholera bacteria in the intestines.

17. The Sanitary Commissioner's scheme (modified) might probably not work well the first year on account of inexperience etc, but no doubt a sufficient amount of intelligence and energy would in time be available in the district to make the scheme practicable and useful.

18. About four thousand rupees (the amount required in case of severe epidemic) is not a large additional expenditure where already Rs 28,286 is annually spent on Conservancy in a Municipality with an annual net income of 41978.

19. As regards the practical working of the scheme I would propose that in case of a threatened epidemic in any Municipal town in the district or in a town with a population of 10000 and upwards, a civil apothecary be taken from one of the outlying hospitals and be put on special cholera duty in the affected place,

and during his absence from his station his hospital should be closed.

It might also be necessary to engage the services of one or two Hospital Assistants whose dispensaries would be also temporarily closed.

20. The cholera season seldom or ever lasts in any given area more than four months, and often it does not continue for more than two months, so a few medical institutions would be shut only for a short time during the year.

I have the honor to be
Sir
Your most obedient Servant

F. C. Reeves Surgeon Major
District Medical and Sanitary officer

9026

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6/32

No. 3586

Calicut 29th November 1894

OFFICE OF SURGEON-GENERAL
2 DEC. 94
WITH GOVT. OF MADRAS.

From.

Surgeon major H. St. C. Carruthers
Ag District medical & Sanitary officer
Malabar

To

The Secretary to the Surgeon General
with the Govt of Madras
Madras

Reference:- Surgeon General's minute II 1092 No. 6395 of 9. 10. 94 on letter No. 1470/S of 4. 8. 94 from Sanitary Commissioner to Government and Govt order thereon No. 1329 M. Mis dated 25-9-94.

Sir,

With reference to the above quoted papers forwarded for report and opinion I have the honour to state that having regard to the statistics quoted the idea would seem worth a trial.

It is presumed that the removal of persons attacked by the disease to an hospital provided for their treatment is understood, and in order to round off the whole the question of Compulsory removal, which would however meet with great opposition, requires Consideration. No mention is made of a special place for the baking, disinfecting, & washing of clothing.

The

the cost of this should be added to the dhobies' pay. the scheme as it stands appears to make no provision for treatment of any kind as long as the disease is confined to a "circle" (= 1500 houses or 7500 souls) though a 3rd class Hospl. Asst. is provided for a "division" (= 3 circles or 4500 houses or 22,500 people). In this town the disease is generally pretty well confined to the thickly populated Moplah quarter near the main bazaar and to the neighbourhood of Tali which would form about two circles. A portion of the money alloted for combating epidemics has hitherto always been devoted to treatment & though perfectly willing to allow that any treatment is eminently unsatisfactory still some effort in that direction would seem advisable. If the present scheme be introduced it would I fear more than absorb the funds at the disposal of the Council and throw a severe strain on a revenue already none too elastic. until active liberal, & decided steps are taken to improve the water supply of this town and to close the crowded burial grounds round which the bazaars are built little improvement can be expected from removing vomit & excreta. As matters now stand bodies are buried a few feet deep in raised porous soil & the smell arising from their decomposition is perceptible to the passer-by; while the grave yards drain into tanks & wells, the fluid in which is used for any & every purpose. It would therefore seem highly advisable before launching out on increased expenditure of this kind to devote any money that may be left in hand to making radical improvements in the town. Moreover it would probably be difficult to get competent and intelligent men to fill the posts in the staff of observation, as people of that sort usually have some permanent engagement and are not dependent on such spasmodic employment as is here offered them.

I have the honour to be,
Sir,
your most obedient servant
J. J. Srinivasagam Pillay
for District Medl. & Sany. Officer
Malabar.

1894

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Ely

Malabar

CHIEF SECRETARY
15 DEC 1894
GOVERNMENT OF MADRAS

7/3216 M of 94

Read—also the following papers:—

8

No. 675

Encl. 12

OFFICE OF SURGEON-GENERAL
WITH THE GOVERNMENT OF MADRAS,
Madras, 13th December 1894

Local & Municipal Dept.
CURRENT No. 3216 M

From

SURGEON MAJOR-GENERAL C. SIBTHORPE, F.R.C.S.

SURGEON-GENERAL WITH THE
GOVERNMENT OF MADRAS,
Madras,

To

THE Hon'ble the Chief Secy: to Government
Local & Municipal Department

SIR,

With reference to G.O. No: 1329 M. Mis. dated 25th September 1894 I return herewith the enclosures received with it.

2. I have consulted six District Medical and Sanitary Officers on the subject and attach their answers. Their opinions on the whole are favorable to the scheme.

Surgeon Major Evans, Bellary, considers more detailed rules would be necessary.

Surgeon Major Dymott, Salem, points out the necessity of store rooms for the permanent Equipment and says that if such a staff as is suggested in the scheme were available, it would be invaluable but points out some of the difficulties in getting such a staff –

Surgeon Major Thompson, Tanjore, heartily approves of the suggestions and sees no difficulty in carrying them out except the expense - He has made the necessary arrangements with the Chairman to give the scheme a trial

Surgeon Lieut: Col: O'Hara, Trichinopoly, is most against it as he considers the scheme would not work and would be too expensive - If it would work he considers it "the best there is under the circumstances", but sees that there would be great difficulties in getting over the ignorance of the masses.

Surgeon Major Reeves, Madura, considers the scheme practical and that it would be very useful - He makes some suggestions regarding details which are worth the consideration of the Sanitary Commissioner -

Surgeon Major Carruthers considers this scheme worth a trial.

3 I also am of opinion that the scheme is a good one and worthy of more extended trial than it has already had. I feel sure that from it would develope a thorough system of dealing with such Epidemics and I am sure that District Medical and Sanitary Officers would welcome any true guide to them and the other authorities concerned laying down the lines on which such Epidemics should be dealt with.

4. Regarding the medical treatment of the sick during such epidemics I will address Government separately on the subject.

I have the honor to be,
Sir
Your most obedt: Servant

C Sibthorpe
Surgn Major General
A Surgeon General
with the Govt: of Madras

Ld

613 L 12-5-94

Local & Municipal (1894) DEPARTMENT.

Local & Municipal Dept.
CURRENT No. 3216 M

From

SURGN. MAJOR-GENL. C. SIBTHORPE, F.R.C.P.I.,
SURGEON-GENERAL WITH THE
GOVERNMENT OF MADRAS,

Madras,

To

No. 675

ENCLOSURES. 4 & 5 encls of C. No. 1796 M.

Dated 13th }
Recd 17 } December 1894

No.

Subject.

Returning the enclosures received with G.O. No. 1329 M. mis of 25 September 1894 with remarks regarding the scheme of the Sany. Commissioner for cholera preventive measures

13. S. G.—500—18-4-94.

13/12 Ab/12

LOCAL AND MUNICIPAL DEPARTMENT.

Again G.O. $\frac{613 M}{12\text{-}5\text{-}94}$ & $\frac{1329 M}{15\text{-}9\text{-}94}$ & Current No. 3216 M

From

Some useful suggestions are contained in the replies of the officers consulted by the S.G., for instance, that that storehouses for the apparatus must be provided & someone placed in charge thereof & (Dr. Reeves') that clothing & excreta may be dealt with on the spot instead of by removal to a distance — It is also evident that detailed rules will be required, which should not contain reasons or comments but should be as short & practical as possible, so that they may be readily apprehended & recollected. I see no reason to suppose that, if the matter is properly taken in hand, a great deal of good may not be effected without a great expenditure ~~[illegible]~~ — In fact, I should not be surprised if, without counting the value of lives, systematic action following on a state of preparedness did not in the end prove actually cheaper than the present system of unsystematic action following on a state of unpreparedness. It is so with all or most other departments of human action & I don't see why it should not be so in the matter of the campaign against cholera which it seems to me the duty of Govt. to promote by all means in its power.

I have no doubt that difficulties will be found in the way of working Dr. K's scheme & I admit that we can't expect the poorer municipalities

FOR ORDERS.

In reporting on the prevalence of Cholera in the town of Trichinopoly, the Sanitary Commissioner forwarded a "Memorandum of suggestions as to the organization of sanitary staffs during Cholera epidemics". The Government thereupon asked Dr King (in para 4 of the first order read above) to frame a careful and detailed estimate of the cost of maintaining the special staff recommended by him for one "circle" and of supplying it with the necessary plant & disinfectants. This estimate was submitted by Dr. King with his letter disposed of in the second G.O. read above. In this order the Government remarked that "apart from the large expenditure that the adoption of Dr King's proposals would necessitate, a condition indispensable to their successful working appears to be that the scheme should in each case be organized and controlled with an intelligence and energy that would not always be available." It was also observed that in many towns the responsibility of this organization and control would of necessity require to be entrusted to the Medical & Sanitary Officer of the District, and the Surgeon-General was requested to give his opinion, after consultation with the District Medical & Sanitary Officers in those of the larger Municipalities which are most frequently attacked by cholera, upon the practical aspect of the scheme from this point of view.

2. The current read above contains the Surgeon-General's reply. Dr Sibthorpe has consulted the medical officers of Bellary, Salem, Tanjore, Trichinopoly, Madura & Calicut, and gives in his letter an abstract of their opinions on the matter. He concludes his report by saying that "in his opinion "the scheme is a good one, and worthy of more extended trial than it has already had". He feels sure "that from it would develop a thorough system of dealing with such epidemics," and "that District Medical & Sanitary officers would welcome any true guide to them & the other authorities concerned laying down the lines on which such epidemics should be dealt with".

3. Regarding the medical treatment of the sick during such epidemics, Dr Sibthorpe promises to address Government separately.

S.G.
20/12/94

Orders as to the trial of the scheme are solicited. If a trial is ordered it would appear to be necessary to direct the San. Commr. either to try the experiment on the first Municipality in which there is a bad attack in the next cholera season, or to be ready to organize it at some place like Trichy where cholera is pretty certain to appear. In either case ~~the~~ San. Commr. would have to ask ~~the~~ Govt. to ask the Chairman to be ready with the requisite funds, & Govt would also probably have ~~to appoint~~ direct the Dist. Surgeon to superintend & organize the working of the ~~steps taken~~ system. It seems also for consideration whether expenditure upon it should not be limited in some way. After the order upon cholera in Trichy Chairman will probably be afraid to refuse any demands for money for it, while it seems probable that Dr.

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to undertake all at once the necessary initial expenditure, which, if cholera does not happen to break out, may seem for years to be money wasted. But if clear & definite rules are laid down I think we may reasonably expect some of the wealthier Munies, first to provide themselves with such apparatus as may be decided to be required, & then to incur when cholera comes, the necessary expenditure on the proposed staff. The San: Commr. might no doubt be told to prepare the rules in commn. with the S.G., but neither of these officers has, I imagine, an intimate acquaintance with all the difficulties of working mofussil Munies — I think therefore I should prefer to associate ~~them~~ with them for the purpose of considering the question & preparing rules some officer of wide executive experience. I would suggest Mr Crole — if he would undertake to preside over a Cmtee composed of himself, the S.G. & the San. Commr., to which Mr Francis might act as Secretary, I think we might obtain some useful results.

Circ:

WS
10/1/95

The Leg. Dpt. should have these papers to lay before the Select Cmtee on the Muni. Bill. We must not forget to provide legal powers for disinfecting clothing &c.

WS

I agree with the Hon Mr Bliss as to the Committee proposed by him. Dr King's suggestions seem to me to be good in themselves & practicable as well as economical. If they are adopted they will place Municipalities in a position to fight cholera when it first appears, whereas much money & many lives are lost now for want of preparation.

JG
13/1

By all means let us have the Committee proposed, & get a report from them on the subject.
It seems to me that if each Municipality had a small reserve of the necessary utensils of its own — to meet the requirements of the commencement of an outbreak of cholera — we might have a central store or stores of these articles belonging to & kept by Govt. wh. we could despatch to any town as the cholera spread — and for the use of wh. we might charge the local authorities. Such a plan would not involve a large initial outlay on any locality.

W
16 Jan

The A.S. seems to me to miss the point — He seems to think that the arrival of cholera should be awaited. But the point of the whole thing is that all arrangements should be made before cholera breaks out, so that, when it does break out, not only may everyone know what to do but the necessary apparatus may be at hand.

WS

ing will not consider any expenditure excessive that would assist in proving the ~~success~~ benefits of his system.

All Municipalities cannot afford to spend large sums upon what will be at first an experiment only.

W. 21.12.94

no – but the wealthier ones get ready.

B.S.

The Sanitary Commissioner's scheme has met with general approval and I submit that there is no reason to fear that the cost would be prohibitive – out-breaks of cholera do not occur in the same locality every year and the charge would not be an annual one upon Municipal funds – Moreover it is claimed for the system that the disease could be restricted by its adoption to portions of towns, instead of spreading over their entire areas – In this way expenditure would be curtailed –

A.G. 7/1.

FOR ORDERS.

W.G. 16/1.

170 m

6/2/95

[G./53]
2,500—14-8-94.

L & M. Department.

110

CHIEF SECRETARIAT, MADRAS.

Read again
G.Os No. 613 M / 12.5.94 and 1329 M. / 25.9.94

PROCEEDINGS OF THE MADRAS GOVERNMENT.

READ the following paper :—

Current No. 3216 M.

Order. 6-2-95 No. 170 M

Before this issues, please write d.o. to the Hon. Mr. Cole & ask if he will be so good as to oblige Govt. by presiding over the proposed Comtee.

B.S.
22/1/95

The Surg.-General's in his letter read above apparently anticipates no difficulty in the way of rendering D.M. & San. officers available for the guidance & control of ~~the~~ operations under ~~Dr. King's~~ the Sanitary Commissioner's scheme for the systematic combating of cholera in Municipalities, and the Govt. considers that with their assistance it promises to be of great & general service in reducing the existing mortality from that disease, and in educating the people in the correct methods by which its attacks should be met. It seems probable, moreover, that without taking into account the value of the lives which should be saved under a proper system of dealing with outbreaks of cholera, the proposals could be carried out without excessive expenditure, for systematic action following upon a state of preparedness is seldom as costly in the long run as ~~an~~ unsystematic and hasty action following upon a state of unreadiness such as that which usually exists at present. The scheme is accordingly generally approved.

2. It appears necessary, however, that brief rules such as could be easily comprehended & remembered by the Municipal staff should be drawn up dealing both with the detailed working of the scheme & with the medical treatment of those attacked by the epidemic. ~~that~~ To this end it appears desirable ~~to be desirable~~ that an officer of wide executive experience should be associated with experts in medicine and sanitation to draft such a set of instructions as would treat both the above aspects of the question in a manner compatible with the limited capabilities of the executive of an average Municipality.

3. The Hon. Mr. C. S. Crole, the Surg. Genl., & the San. Commr. will accordingly be requested to form themselves into a Committee, over which the first-named should preside, to frame at an early date a complete set of rules on the lines above indicated. Mr. W. Francis will act as Secretary to the Committee –

[G./53]
2,500—14-8-94.

Department.

120

~~1/8~~

14P

CHIEF SECRETARIAT
MADRAS

PROCEEDINGS OF THE MADRAS GOVERNMENT.

READ ~~the following paper:~~

Orders will thereafter issue as to Municipalities in which the scheme should be first introduced.

4. A copy of this order and of those read above will be communicated to the Legn. Dept. with the request that it will refer to the Select Committee on the Amendment of Act IV of '84 the question of the advisability of providing in the amended Act for powers to enforce the disinfection of clothing etc. in cholera epidemics.

17.1.95 (from orders)

19/1.

Desptd 28/2/95

To Hon Mr. C. S. Crole. C.S. Sd
- Surg. Genl. do
- San. Commr. do
- Legn. Dept. with copy of G.O. 613 M / 12.5.94. & 2 desptd 28/2/95

To W. Francis Esqre. I.C.S.
Editors' table

(it will have to be printed anyway for the Committee)

Yes –

19/1

+ desptd 9/3/95

3216 M

Measures for fighting Cholera. —

Hon. Mr. Bliss.

~~Cl.~~ /

(from order.)

GOVERNMENT OF MADRAS.

LOCAL AND MUNICIPAL DEPARTMENT.

Read—again the following papers:—

G.O., dated 12th May 1894, No. 613 M., Local and Municipal.

Abstract.—Passing orders on the Sanitary Commissioner's report on the prevalence of cholera in the Trichinopoly Municipality.

G.O., dated 25th September 1894, Mis. No. 1329 M., Local and Municipal.

Read—the following letter from Surgeon-Lieutenant-Colonel W. G. KING, M.B., C.M., D.P.H., Acting Sanitary Commissioner for Madras, to the Chief Secretary to Government, dated Fort St. George, 4th August 1894, No. 1470-S.:—

With reference to G.O., dated 12th May 1894, No. 613 M., Local and Municipal, I have the honour to submit the following remarks as to probable cost of arranging for cholera preventive measures in a "circle" and in a "division" respectively. So that no doubt may subsequently arise as to ruling rates in various parts of the Presidency, I have in the estimate taken care to quote outside amounts *both for staff and equipment*.

2. In endeavouring to arrive at an opinion as to the practicability of the system, it would be convenient to imagine it applied to a town of, say, 50,000 inhabitants. Under Government orders, it is presumed that the following equipment of a permanent nature, and for which expenditure, so far as apparatus is concerned, would not recur, would be in store ready for use at a moment's notice:—

(1) *Equipment for one Circle* [that is, a section of a town, or a village, not exceeding 1,500 houses, and containing about 7,500 to 10,000 inhabitants].

	RS.	A.	P.
1 Richardson and Cruddas' mounted conservancy bucket.. ..	45	0	0
4 disinfecting canisters at Rs. 1-8-0	6	0	0
2 air-tight tin boxes for carrying contaminated clothing at Rs. 2-8-0	5	0	0
8 air-tight cholera excreta drums at Rs. 2-8-0	20	0	0
Total ..	76	0	0 [*]

Disinfectants (to be retained in store).

	RS.	A.	P.
100 lb. Sulphur at As. 2 per lb.	12	8	0
1½ lb. Hydr : Perchloride (country made) at As. 3 per ounce ..	4	8	0
3 lb. Acid Hydrochloric at As. 2 per ounce	6	0	0
20 lb. Carbolic Acid at As. 4 per lb.	5	0	0
Total ..	28	0	0

Perishable Articles.

	RS.	A.	P.
400 lb. chunam or saw-dust at 1⅓ pies per lb.	2	12	5
Contingencies	3	0	0

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[*] Expenditure not recurring.

(2) *Equipment for a Division* [that is, the equipment of three "circles" each containing 1,500 houses or an estimated total of 22,500 inhabitants].

	RS.	A.	P.
1 Dindigul single-bullock lorrie	50	0	0
12 portable tin canisters for disinfecting purposes at Rs. 1–8–0	18	0	0
6 air-tight tin boxes for conveying foul clothing at Rs. 2–8–0	15	0	0
24 air-tight excreta iron drums at Rs. 2–8–0	60	0	0
Total	143	0	0 [*]

Disinfectants.

	RS.	A.	P.
300 lb. Sulphur at As. 2 per lb.	37	8	0
4½ lb. Hydr : Perchloride at As. 3 per oz.	13	8	0
9 lb. Commercial Hydrochloric Acid at As. 2 per ounce	18	0	0
60 lb. Carbolic Acid at As. 4 per lb.	15	0	0
Total	84	0	0

Perishable Articles.

	RS.	A.	P.
1,200 lb. chunam or saw-dust at 1⅓ pies per lb.	8	5	4
Contingencies	9	0	0

[*] As estimated by A. Sankaralingam Achari of Dindigul.

3. Presuming that there was reason to dread invasion by cholera, the municipality would be expected to place at the disposal of the Senior Medical Officer of the station (the *ex-officio* sanitary officer) a "staff of observation," as follows :—

For a single Circle.

	RS.
1 temporary inspector	15
1 peon	8
1 toty	7
Total	30

Or for each Division, consisting of three Circles (4,500 houses or 22,500 inhabitants).

	RS.
3 temporary inspectors	45
3 peons	24
3 toties	21
Total	90

The importance of the work expected of this staff cannot be overrated and its appointment in my opinion, in the face of reasonable fear of invasion, should never be neglected; indeed, without the aid that may be expected in this direction, the further measures advised may prove futile; as the whole intention is *from beginning to end—a sine quâ non*—to segregate and destroy all cholera-poison-bearing matter. By means of this staff it should be possible, with the additional aid of intelligent ward councillors, police and municipal servants of all ranks, to gain very early intelligence of the first case of cholera, *and to take immediate action.* Their further duty would be to ascertain and report for remedy to the permanent municipal staff sanitary defects, and thus endeavour to secure a good sanitary state before the arrival of the enemy. Presuming such "observation" lasted for one month, the expenditure would be as follows, for a town of 50,000 inhabitants :—

	RS.	A.	P.
Staff of observation, for two divisions during one month	180	0	0
1 chief sanitary inspector on Rs. 35 + 15 horse allowance	50	0	0
1 mounted orderly on Rs. 8 + Rs. 7–8–0 horse allowance	15	8	0
Total	245	8	0

4. In the meantime, the municipal council would be expected to have informed the Sanitary Officer that, at his discretion, the following *additional* cholera staff could be employed per circle, should the disease actually appear in the town :—

	RS.
3 peons at Rs. 8	24
3 toties at Rs. 7	21
(2 dhobies) per division (3 circles or less)	20
Total	65

Cases of cholera having occurred in one of the areas defined as a circle, the whole authorized staff for this area would at once be placed on duty; but it may be reasonably imagined that up to the end of the first ten days, no extension beyond the limit of the first circle attacked might occur, and, as the Sanitary Officer would add to the observation staff so as to make up the authorized number as he saw necessity from time to time in the various circles, it may be regarded as fairly safe to assume that the total cost of the staff for a division— that is, three circles, or an area embracing 4,500 houses, or one-half of the total town—would not be incurred till the end of one month. Indeed, provided preventive measures were adopted *from the outset*, it is very unlikely that more than one half of the town would be affected; and, consequently, I believe it reasonable to conclude that, at the outside, in a town with a population of 50,000 inhabitants in the cholera season of, say, four months, it would not be necessary to provide for more than an observation staff for the whole city for 4 months, and for the *additional* preventive staff for 2½ months, and that hence the full cost would not amount to more than Rs. 1,081–13–4 as follows :—

For one Division.

	RS.	A.	P.
Observation staff (ultimately merged into cholera staff) for 4 months	491	0	0
9 peons, cholera staff, for 2½ months	180	0	0
9 toties, at Rs. 7 for 2½ months	157	8	0
2 dhobies, at Rs. 10 for 2½ months	50	0	0
1 third-class hospital assistant for 3 months	75	0	0
1 bullock and driver for 3 months	36	0	0
Disinfectants	84	0	0
Perishable articles	8	5	4
Total	1,081	13	4

But if the *whole town* were attacked for the complete period of four months, the cost would be as follows :—

	RS.	A.	P.
Observation staff for 4 months	982	0	0
18 peons, cholera staff, for 3 months	432	0	0
18 toties for 3 months	378	0	0
4 dobies for 4 months	160	0	0
2 third-class hospital assistants (one per division) for 3 months	150	0	0
2 bullocks and drivers for 3 months	72	0	0
Disinfectants	168	0	0
Perishable articles	16	10	8
Total	2,358	10	8

or for the total population of 50,000 protected for 4 months 9 pies a head, or a contribution of 2¼ pies per month.

5. That it may not be imagined the method I advise has not been put to the test of experience, I may state that since 1884 this system has been adopted both in the town of Kurnool and in the district, and to a limited extent in the cholera epidemic in Madras of 1882, under my own supervision. There are so many factors as to

cholera prevalence to be taken into consideration, that I by no means wish to assert that no other cause was in operation; but I consider it reasonable to conclude that mortality that might have been expected in the Kurnool district and town was mitigated by the special mode employed by myself and other medical officers, especially by my assistant, Mr. Oosman Sahib, who has lately proved the efficacy of the same system at Negapatam.* I always received cordial support from the Revenue officers and from the municipality and, practically, I had full discretion to move the medical staff and make generally such sanitary arrangements as I pleased. Indeed, all village officials concerned were in a fair state of sanitary discipline, and intelligence of attacks was conveyed to me by the quickest possible route, and all precautionary measures were instantly put in force. Since 1890, in the beginning of which year I finally left the district, less disposition has, I think, been exhibited by the local authorities to spend money; but whilst their sanitary efforts have resulted in a saving of money, the saving of life has been less. The accompanying Table A contrasts the result of a period of free expenditure and comparative economy in the Municipality of Kurnool. Table B contrasts the condition of the Kurnool district up to 1890 with those bordering upon it. What has been done in this district could undoubtedly be effected elsewhere, and if, instead of municipalities and district boards hiring hakims and vydians, compounders, vaccinators, and the like, to go about stuffing patients with cholera pills, and ignoring all sanitary dictates, the simple measures advised are enforced, I am certain an enormous saving of life would result. The "health, comfort, and convenience" of the inhabitants being the prime object of the existence of a municipality, it seems illogical, in view of the expenditure incurred yearly in the upkeep of permanent establishments intended for the health and safety of the inhabitants, that in the presence of an epidemic causing a mortality of 50 per cent. of attacks, a municipality should neglect from motives of economy to go to the little extra expenditure that is requisite for a *short period* for the purpose of saving human life and suffering. In the mode I advise, there is no new principle involved; it simply secures in a cheap and, I believe, a fairly satisfactory and simple manner, the adoption of primary principles admitted in all civilized countries, during the last thirty years, to be essential in combating so deadly a disease as cholera.

Order—dated 25th September 1894, Mis. No. 1329 M., Local and Municipal.

Apart from the large expenditure that the adoption of Dr. King's proposals would necessitate, a condition indispensable to their successful working appears to be that the scheme should in each case be organized and controlled with an intelligence and energy that would not always be readily available. In many towns the responsibility of this organization and control would of necessity require to be entrusted to the Medical and Sanitary Officer of the district. The Surgeon-General will accordingly be requested to give his opinion, after consultation with the District Medical and Sanitary Officers in those of the larger municipalities which are most frequently attacked by cholera, upon the practical aspect of the scheme from this point of view.

(True Extract.)

(Signed) J. F. PRICE,
Chief Secretary.

To the Surgeon-General.
" Sanitary Commissioner.

READ—also the following paper:—

From Surgeon-Major-General C. SIBTHORPE, F.R.C.P.I., Surgeon-General with the Government of Madras, to the Chief Secretary to Government, dated Madras, 13th December 1894, No. 675.

With reference to G.O., Mis. No. 1329 M., dated 25th September 1894, I return herewith the enclosures received with it.

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* *Vide* Sanitary Report for 1893, para. 47.

2. I have consulted six District Medical and Sanitary Officers on the subject and attach their answers. Their opinions on the whole are favorable to the scheme:—

Surgeon-Major Evans, Bellary.—Considers more detailed rules would be necessary.

Surgeon-Major Dymott, Salem.—Points out the necessity of store-rooms for the permanent equipment, and says that if such a staff as is suggested in the scheme were available, it would be invaluable, but points out some of the difficulties in getting such a staff.

Surgeon-Major Thompson, Tanjore.—Heartily approves of the suggestions and sees no difficulty in carrying them out except the expense. He has made the necessary arrangements with the Chairman to give the scheme a trial.

Surgeon-Lieutenant-Colonel O'Hara, Trichinopoly.—Is most against it, as he considers the scheme would not work and would be too expensive. If it would work he considers it "the best there is under the circumstances," but sees that there would be great difficulties in getting over the ignorance of the masses.

Surgeon-Major Reeves, Madura.—Considers the scheme practical and that it would be very useful. He makes some suggestions regarding details which are worth the consideration of the Sanitary Commissioner.

Surgeon-Major Carruthers.—Considers this scheme worth a trial.

3. I also am of opinion that the scheme is a good one and worthy of more extended trial than it has already had. I feel sure that from it would develope a thorough system of dealing with such epidemics and I am sure that District Medical and Sanitary Officers would welcome any true guide to them and the other authorities concerned laying down the lines on which such epidemics should be dealt with.

4. Regarding the medical treatment of the sick during such epidemics I will address Government separately on the subject.

ORDER—dated 6th February 1895, No. 170 M., Local and Municipal.

The Surgeon-General in his letter read above apparently anticipates no difficulty in the way of rendering District Medical and Sanitary Officers available for the guidance and control of operations under the Sanitary Commissioner's scheme for the systematic combating of cholera in municipalities, and the Government considers that with their assistance it promises to be of great and general service in reducing the existing mortality from that disease, and in educating the people in the correct methods by which its attacks should be met. It seems probable, moreover, that, without taking into account the value of the lives which should be saved under a proper system of dealing with outbreaks of cholera, the proposals could be carried out without excessive expenditure, for systematic action following upon a state of preparedness is seldom as costly in the long run as unsystematic and hasty action following upon a state of unreadiness such as that which usually exists at present. The scheme is accordingly generally approved.

2. It appears necessary, however, that brief rules such as could be easily comprehended and remembered by the municipal staff should be drawn up, dealing both with the detailed working of the scheme and with the medical treatment of those attacked by the epidemic. To this end it appears desirable that an officer of wide executive experience should be associated with experts in medicine and sanitation to draft such a set of instructions as would treat both the above aspects of the question in a manner compatible with the limited capabilities of the executive of an average municipality.

3. The Hon'ble Mr. C. S. Crole, the Surgeon-General, and the Sanitary Commissioner will accordingly be requested to form themselves into a committee, over which the first-named should preside, to frame at an early date a complete set of rules on the lines above indicated. Mr. W. Francis will act as Secretary to the committee. Orders will thereafter issue as to municipalities in which the scheme should be first introduced.

4. A copy of this order and of those read above will be communicated to the Legislative Department, with the request that it will refer to the Select Committee on the amendment of Act IV of 1884 the question of the advisability of providing in the amended Act for powers to enforce the disinfection of clothing, &c., in cholera epidemics.

(True Extract.)

E. GIBSON,
Ag. Chief Secretary.

To the Honb'le Mr. C. S. Crole, I.C.S.
„ Surgeon-General.
„ Sanitary Commissioner.
„ Legislative Department.
To W. Francis, Esq., I.C.S.
Editors' Table.

Exd. A. Raitt.

Govt. of {1895} Madras.

LOCAL AND MUNICIPAL.

Issued

Recd.

Encl.

G.O., 6th Feb. 1895, No. 170 M.

FEBRUARY.

Cholera.

Passing orders on the Sanitary Commissioner's suggestions for combating — in Municipalities.

C.F. 73.

Date taken out.

NUMBER OF COPIES REQUIRED.
Order complete.
Letter only.
Order complete with Letter.

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