

[100-112]

Local & Munl. (1897) Department.

MISCELLANEOUS.

G.O., No. 2202M

DATED 11-10-97

INDEXED. *ca*

DESPATCHED

[Despatch Abstract.]

Administration Report

Comd'g to the Munl. Commr. of Madras,
Memorandum by the Army Sanitary Commr.
on the Madras — for 1895-96.

BACK PAPERS.

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

FURTHER PAPERS.

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

Local & Munl. (189) Department.

CURRENT No. 29237.

From

The Secretary of State,
London.

No. 1

Dated 15th July 97

Received 13th August 1897

Registered 13th August 97

Enclosures

Spare copies.

SUBJECT.

Forwarding for information 70 copies
of a memorandum by the Army Sanitary Commis-
-sion on the Administration Report of the
Municipal Commissioners of Madras for 1895
-96.

Misc

Order

No. 2202 N. mis. dt. 11.10.97

Communicated to the Mem.

Apal Commissioners of Madras.

132
24/7/97

H. H.

This report is written in
a tone strikingly different from
that adopted in the previous
Memorandum; & yet the
facts are very much the
same!

H. H.

7/10/97

The President, Municipal Comm. Madras.

Dated 15/10/97

BACK PAPERS.

G.O.	No.	Department.	Date.

FURTHER PAPERS.

G.O.	No.	Department.	Date.

LOCAL & MUNICIPAL DEPT.
CURRENT NO. 2923M

India Office,
London, 15th July 1896.

Statistics,
No. 1.

To His Excellency The Honourable The Governor in
Council, Fort St. George.

4.9.96 2.8.97

* 12 by mail; 58 by book post.

SIR,

I forward for the information of your Excellency's Government 70* copies of a Memorandum by the Army Sanitary Commission on the Administration Report of the Municipal Commissioners of Madras for 1895-96.

I have the honour to be,

Sir,

Your Lordship's most obedient humble Servant,

George Henderson

ENCLOSURE.

MEMORANDUM by the Army Sanitary Commission on the Administration
Report of the Madras Municipality for 1895-96.

1 This Report has the merit of brevity. The main facts relating to the public health of the City of Madras are set forth clearly and concisely. The year, judged from the statistics of mortality, was not quite so healthy as its predecessor. But it is explained by the writer of the report that the higher death-rate was in part due to the increase in the birth-rate. The prevailing meteorological conditions do not show any striking deviation from normal. An opinion is expressed that the increase in the number of bowel complaints in August, September, and October, may partly be attributed to the damp and cloudy weather experienced during those months. But it is generally believed that high temperature during the autumn months in India, as in England, favours the prevalence of those complaints; and it is stated that the mean temperature of the air was below normal in August and October. There was no appreciable change in the price of food as compared with that of the previous year, except in the case of *Ragi*, which was much cheaper.

2 *Vital Statistics.*—The *Births* exceeded in number those of 1894 by 2,075. This increase took place in the second half of the year, and is said to have been due to food having become appreciably cheaper during the year 1894, and to its remaining so during the year under report. The birth-rate per thousand of population was 42.2, and was the highest recorded during the past ten years. The number of still-births was 513 as compared with 541 in the preceding year. These figures contrast strikingly with the corresponding figures for the City of Bombay. In this latter the birth-rate was less than half that recorded in Madras, or 19.08 as compared with 42.2; whilst of a total number of 17,154 children born in Bombay, 1,470 were still-born, as compared with 513, out of a total in Madras of 19,650. It would be of interest to have an explanation of this remarkable difference between the two cities, with regard to the number of still-born children.

3 The *Deaths* registered during the year numbered 17,052 against 16,542 in 1894, and were in the proportion of 37.6 per thousand of population, the mean for the decade being 38.7. Registration of Births and Deaths would appear to be carried out with much thoroughness; only one birth and two deaths remain unregistered. Even as regards these three cases, a satisfactory explanation is given in each of the reason which led to its having escaped registration.

4 *Chief Diseases.*—As usual, fevers caused a greater number of deaths than any other single disease. Under this head 6,265 deaths are entered, or equal to 13.8 per thousand of the population. This is slightly in excess of the mortality from fevers in 1894, and considerably in excess of the average for the previous ten years. The permanent causes of the prevalence of fever are well known, and until they are removed it is hopeless to look for a diminution of this prevalence. The chief of these causes are defective drainage, and an impure water-supply. Both exist in Madras, and as yet no substantial progress has been made towards their removal. Of the temporary causes, the President assigns importance to the price of food; the prevalence of fever has been found to increase and diminish with the rise and fall of the price of food.

5 *Bowel complaints* were considerably less fatal than during 1894, and greatly less fatal than they were on the average during the previous ten years.

6 *Small-pox and Vaccination*, the disease and its antidote, may be taken together. The former is credited with only 3 deaths, the smallest number recorded from this disease in any year except 1886, when only 1 death occurred. No better proof could be given of the efficiency with which vaccination is carried out. It is worthy of note, also, that all three deaths were of persons over 20 years of age, showing that infant vaccination, neglect of which is so generally the main cause of small-pox mortality, receives careful attention in Madras. This immunity of young children from small-pox, is sufficiently accounted for by the vaccination returns. From these latter it is seen that of 19,137 children born, 519 were still-born and 5,408 died under one year of age. This leaves available for vaccination 13,496. Referring to the table given in Appendix IV., it is found that 13,027 of these were successfully vaccinated. Of the remainder, 33 were unsuccessfully vaccinated, whilst the result was not ascertained in 127 cases. Only 309 remain to be accounted for; and many of these, out of so large a total as 13,496 children, would doubtless be found unfit to undergo vaccination, owing to infantile ailments of various kinds.

7 The total number of vaccinations performed during the year was 27,024. Of these, however, only 18,877 were primary vaccinations. The remainder, 8,147, were cases of re-vaccination. In both primary and re-vaccination operations, the recorded percentage of successful cases is somewhat surprising. Of the former, 99·66 per cent. are returned as having been successful, and of the latter 89·76. If almost cent. per cent. of the primary operations were genuinely successful, we cannot accept without hesitation a return which gives so high a percentage of re-vaccinations. In our memorandum of last year we commented on the high percentage of successful cases of re-vaccination recorded in Madras, and pointed out that in other provinces of India, such as Bombay and the North-Western provinces, nothing approaching to these results had been attained. It should not be forgotten that if the quality of primary vaccination is high, the percentage of successful re-vaccinations following thereupon will be proportionately low. Or, put in another way, a high percentage of successful re-vaccination does not indicate a high quality of the primary vaccination which preceded it. But the practical test of the efficiency of vaccination is, after all, the immunity from small-pox which it confers, and judged by this test vaccination as performed in Madras city is efficient.

8 *Cholera* caused 122 deaths, as compared with 77 during the previous year. Yet the number was far below the average of the preceding ten years, which was 481·8. One hardly expects to read that part of the increase in the number of deaths over the number in the last quarter of 1894 "was owing to the outbreak of cholera in the Government Lunatic Asylum." One would naturally expect to find an institution under the direct management of a medical officer, and presumably fortified by scientific sanitary precautions against the ingress of epidemic disease, to be less likely to be attacked by cholera than insanitary city slums; and yet, as in the case of the Jamsetjee Hospital in Bombay in 1894, so in the Madras Lunatic Asylum in 1895, cholera passes over the crowded slums and elects as its field of operation institutions arranged and managed in conformity with modern sanitary principles.

9 *Sanitary defects*.—Practically, no progress has been made during the year in providing the city with an efficient drainage system. The expenditure of the year under the head of drainage amounted to Rs. 52,333. Seeing that the scheme which the Commissioners favour is estimated to cost about 28 lakhs, it is evident that this still remains in abeyance. Yet, the President writes:—"No great reduction in the mortality of the town can be expected until a good system of drainage and sewerage has been carried out." It is encouraging, however, to learn that Government have made a grant of three-and-a-half lakhs of rupees

towards the drainage of Madras, "and it is hoped that some progress may be made during the next year."

10 Although the water-supply has been considerably improved as regards its quantity, no steps have yet been taken to improve its quality. "The analysis of water," writes the President, "is anything but satisfactory." Considering that the supply is unfiltered, this is not much to be wondered at; but, as stated last year, the cost of any efficient scheme hitherto proposed for filtering the water-supply of Madras would be beyond the means of the Municipality.

11 The difficulty in obtaining a sufficiency of conservancy coolies to carry on the every day details of cleansing the city has become serious. "It has been found absolutely impossible to obtain the full complement of scavengers for the conservancy work in Madras." One of the reasons given for the decrease in the quantity of rubbish carted away as compared with that carted during the previous year is "inability to obtain the full complement of men."

12 Many useful improvements have been, and are being, carried out in the interest of the public health. Of these, some of the most important are, the steps being taken to put an end to the practice of intramural burial, the closing of private slaughter-houses in inhabited and crowded localities, the opening out, by driving wide streets through them, of crowded, ill-ventilated parts of the town, the cleansing and regulation of bakeries, and the ventilation, drainage, and paving of cattle-yards. None too soon, "a house-to-house inspection is being conducted in all the divisions with a view to mitigate insanitary conditions. The plans submitted for the erection of buildings are thoroughly scrutinized, and no plan is passed which does not conform to the rules of sanitation as to drainage, ventilation, latrine accommodation, &c." Altogether, it is clear that there is no lack of energy in the management of the Health Department of Madras. The want is the want of the funds needful to carry out the drainage and water improvement schemes which everybody knows to be necessary before any decided impression can be made on the persistent high mortality of the city.

29th May 1897.

atm Dp/A

No. 10.

Statistics,

15th July 1897.

The
Letter to Fort St. George,
No. 1, and enclosure

Given for copying
Copied 11/11/97
Examined 11/11/97
Signed 11/11/97 189.

AD AGAIN G.O., No.
189

DATED

PRESENT No.

ENCLOSURES TO C. No.

ORDER OF GOVERNMENT

LETTER OF GOVERNMENT

STATEMENT WITH DITTO

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