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DEPARTMENT OF HEALTH
BULLETIN ON PREVENTION

ABOUT SANITARY INSPECTORS.

I am glad to have an opportunity of expressing my views as to the very great importance of the sanitary inspectors in the present constitution of the Provincial Health Department. My experience in connection with Public Health goes back for a good many years before the inauguration of the present Act, as I was secretary of the Woodstock Board of Health under the old system. Under the new system, one of the things that struck me, at once, as excellent was the provision for sanitary inspectors, and in the practical working of the Act I have found that my judgment was not mistaken.

In this sub-division we have seven sanitary inspectors, one for the town of Woodstock and the others covering districts including in most instances, two or three parishes. Our only changes have been two, caused in the one case by death, and in the other by removal from the province, and it is my strong opinion that, reasonable care being taken in the first selection of officials, changes should be avoided except for very urgent cause.

It is hardly to be expected that inspectors in the rural districts can perform their duties with the exactitude of detail that obtains in the city or town. The rural inspector has long distances to cover and of necessity his remuneration is inadequate. Yet he is always at call in special emergencies, and in my experience he acts with commendable promptitude. Is there a dead horse unburied at the furthest end of the district? The inspector is notified and he leaves whatever he is doing, goes to the spot and has the menace to health removed. Is there a case of diphtheria or scarlet fever? At the notice from secretary or doctor he goes at once and placards and quarantines the house. Then he continues to deal with the case in cooperation with the attending physician. It is impossible to over-estimate the protection to the public health of a community, that lies in the having a good staff of sanitary inspectors. Each and every one of them is at the call of the public and faithfully they perform their duties.

It must be borne in mind that in the carrying out of the provisions of the Health Act, much of necessity must be left in the hands of laymen, and it takes some time for the layman, as it were to enter, even in its elementary stage, into the atmosphere of medical science. Yet, this he must do, and as each year passes and he acquires more knowledge on the subject, then the more valuable is he to the community.

I find it a most admirable thing to have a good feeling between the secretary and the inspectors. Hardly a week goes by that one or two of the outside town inspectors does not call at my office and talk over matters, and what I particularly notice is the growing interest shown in the working out of the provisions of the Act.

In the winter-time, the duties of the rural inspector are not heavy unless there be some epidemic. Old King Frost holds the situation in his grip, but when the spring arrives the inspector must get busy. He is instructed to examine all outhouses of public buildings, schools, hotels and, as far as possible all dwellings in built-up sections if there be such in his area. He posts up notices as to the removal of nuisances and above all he tries to impress upon his community that the Health Board is not an enemy which they have to fight, but a friend with which they should gladly cooperate.

He is bound to meet with difficulties. In the country, everyone is very anxious about his neighbor's backyard, much more so than about his own, and quite often the inspector has complaints founded on no more real substantial basis than personal unfriendliness amongst neighbors and the desire to "get even" with someone. So the inspector must have tact; he must be able to distinguish between a public health matter and a private grudge.

At a meeting of the Carleton County Council last January when the application for the grant was made, a member of the council who is also a member of the Board of Health, spoke of the sanitary inspectors as the "very keystone" of the public health system. That is my view of the matter and I believe it is the view of any reasonable man who gives the matter the least consideration.

T. C. L. K.

THE "CLEAN UP" PERIOD.

Spring is, proverbially, the time of house cleaning with good housekeepers and it should also be as invariably applied to the premises and surroundings of the house as to the house itself.

While cleanliness, like every other good quality should be maintained every day irrespective of time or season without as well as within the house, in our country it is evident that the winter's frost and snow prevent to a certain degree, the maintenance of tidiness of yards and outbuildings. Rubbish, garbage and "trash" of all sorts are almost sure to accumulate during the winter. It is the duty of every owner and householder to make proper disposal of such matter and it is also the duty of every local health authority to see to it that such disposal is properly made. The methods of disposal will largely depend upon the nature of the material in question. Everything that is of no practical value and is readily combustible should be burned. This is the best method of all for getting rid of "trash". The amount of ash left behind is trifling, even if the stuff be consumed in the very yard where it is found and can easily be raked into the soil of the yard, to the nourishment of the latter and to the sanitary improvement of its character. Intelligent care, of course, should be exercised in all such instances to prevent the fire from spreading where it should not, for it is an old and true saying that "fire is a most excellent servant but a very bad master". If such local burnings are prohibited in towns and villages, the rubbish should be carried to some open and unoccupied place where it may be consumed with relative safety.

But many "trashy" substances are not susceptible of burning, such as old food

cans, wire mattresses and the like. These, especially the cans, are capable of becoming very real and even dangerous nuisances when the warm weather comes on. Many of them will assuredly maintain an upright or partially upright position; they will become filled with water by the rain and this water soon becomes very foul indeed and a breeding place for mosquitoes and other insects. Empty cans, therefore, are a real nuisance besides being the most unsightly things that usually accumulate in a household. They, with all other incombustible material should be removed to a dump authorized by the town or village authorities. This dump, while not too far removed from the town, should be in an isolated inconspicuous place and not near any source of drinking water. It should be placed specially under the supervision of a careful and reliable man. All combustible rubbish should be burnt upon its deposit there.

The garbage accumulation (kitchen waste) presents a greater problem. Properly there should be none to remove from yards. Garbage should not be deposited in yards at any season unless it be enclosed in proper garbage containers, with tight fitting covers. Perhaps the strongest argument against such exposure of garbage is that it attracts and maintains rats, the greatest and most dangerous animal enemies of the human race.

But in private families there is, really, no occasion for removing solid kitchen waste and sweepings and so forth, from the house at all. This material can all be readily burned in the kitchen stove or range and will produce good heat and so save fuel. Wet material like vegetable peelings can be easily dried behind or on the back of the stove for a half hour or so. If they then be thrown upon a bright fire they will burn very readily. It is not necessary to say that all sorts of fats and grease and other animal material from the table will burn still more readily and thus be got rid of in the least troublesome way and with the best possible result.

In hotels and large boarding houses, it is generally worth while to make arrangements with farmers to carry garbage away for fertilizing or animal feeding purposes, but this plan necessitates, again, the storage of the material for a greater or less time and, has, consequently, pretty nearly all the defects of the yard deposit system.

In these places (hotels and large boarding-houses) there is almost, invariably, the furnace. A little extra effort will suffice for drying and burning arrangements by means of the furnace, especially during the colder seasons.

In a word, all householders, whether in private families or of public or semi-public houses should take to heart the maxim, "do not let garbage get loose".

G. G. M.

PRECIS OF SOME FACTS RELATIVE TO VACCINATION — AN DSMAALL-POX.

Previous to the occupation of the Philippine Islands by the United States over 40,000 died yearly from small-pox. Upon systematic vaccination of all the inhabitants, the disease promptly died out, until at present the deaths from it are reduced to insignificant numbers.

In Manila, the capital, after general vaccination not one death from small-pox occurred for seven years, where formerly 6,000 people died annually from it. While during the war years 1916-1919, vaccination of young children and new adult arrivals was relaxed, in 1918, over 700 deaths from small-pox were reported from that city.

In the Philippine group, between 1905 and 1915 over ten million vaccinations were done without loss of life or limb. (Amer. Jour. Pub. Health May, 1921.)

The State law of New York requires that no child shall be admitted into any school in a first or second class city until it has been vaccinated. The Department of Health offers vaccination to all who cannot secure it elsewhere and is ready to pass judgment as to whether or not any indicated school child has been successfully vaccinated.

It is felt that unvaccinated pupils are a source of danger in any community, as far as the spread of small-pox is concerned. The Bureau, therefore, in co-operation with the school authorities has made special effort to see that all school children are properly vaccinated, either by their own physicians or by the Department of Health. (Monthly Bulletin N. Y. Dept. of Health, May, 1921.)

Before the introduction of vaccination, epidemics of small-pox visited the city every few years and, in 1872, 119 out of every 100,000 of the population died from this disease. In 1875 the death-rate reached 124 per 100,000. Contrasted with this dread record is the encouraging one that there has not been a death in this city from this disease during the last nine years. Our people have learned the value of vaccination, and, as a result, we rarely have a case of small-pox, unless it is imported into the community. (Weekly Bulletin, N. Y. Dept. of Health, July 15, 1922.)

In Denver, Colorado, from November 1921 to November 1922, inclusive, there were 854 cases of small-pox with 233 deaths. Of the 263 deaths, 23 had been vaccinated and 240 were not vaccinated. Of the cases in vaccinated persons those from which vaccination histories could be obtained showed that the average time elapsed between vaccination and contracting of the disease to be 38 years. Not one contracted the disease within five years of vaccination, and only six out of 159 such cases contracted it within ten years of vaccination, while 65 out of 159 cases contracted the disease after 40 years from vaccination. (U. S. Pub. Health Reports, Dec. 15, 1922.)

In a small-pox epidemic in Nottingham, England, in 1921, it was stated that about half the children of the city had been vaccinated, and that none of these vaccinated children contracted small-pox. (U. S. Pub. Health Reports, April 21, 1922.)

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