INVESTIGATION
OF AN
OUTBREAK OF
ENTERIC FEVER
IN THE
VILLAGE OF FORTUNES WELL,
PORTLAND, DORSET.

BY

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MR. CM. LACS Edin
1889.
Having been in general practice in the Island of Portland, Dorsetshire since the year 1870, I have had considerable opportunity of observing the nature and character of the diseases which are most prevalent in this district. Up to the year 1886 no enteric fever cases had come under my notice, and then suddenly in the month of September and October a sudden outbreak took place within a very limited area, in the village of Fortunes Well affecting about eighty-seven individuals. And as the disease began about the same time in almost every house that was attached the history and circumstances associated with its first appearance and future development are well worthy of consideration from a sanitary point of view. For this purpose therefore I shall first give a short description of the locality description of Fortunes Well.

The Parish of Portland contains about 3,500 acres, and is surrounded entirely by the English Channel, except where it is connected with the mainland.
by the Chesil Beach at the north-west corner (see map). There are nine villages in the island with a population of about 10,500 at the last census. Of these, the Garrison Farm about 1,000 and the convicts with their wardens and families about 2,000.

The only village however where the entire plan appeared, was in Fortunes Well situated at the north-west corner of the island, and containing a population of over 4,000 inhabitants. This village is in the most part built on the Kimmeridge clay formation which is frequently cut into in digging the foundations of the houses. In some parts the Portland sandstone is above the clay to the depth of twenty or thirty feet and this arrangement tends to prevent the sand above the clay from getting into the wells, from which the water supply is in most cases derived.

Fortunes Well looks to the south and south-west, and is situated on the side of the hill sloping from the Iron Knights in a westerly direction towards the Chesil Beach and the sea.

Its form may be described as that
SECTION OF THE ISLE OF PORTLAND

A  Kimmeridge Clay
B  Portland Sand
C  Portland Stone
D  Purbeck Beds
Of an irregular parallelogram, of which the upper side is formed by Fortunes Well Street, and the lower side by Maidm Well and Chiswells. The two ends being closed in by High St at the top of the village and Lower Lane at the other end.

The two sides are united by a number of cross streets viz. Spring Gardens, Artist Row, King St., Millam, Ciner Lane and Albert Furnace; all of which streets are very steep, the average fall being from 76 to 160 feet in a distance of 200 yards.

The map which indicates the following:

First. The general plan of the streets.
Second. All the houses in the infected district.
Third. The public water tanks marked.
Fourth. The houses with Fever.
Fifth. The houses without Fever.
Sixth. The numbers at the bottom and top of the streets indicate the height in feet above the sea level.
Seventh. The name of each family is also entered opposite the dwelling.
Eighth. The houses in the non-infected portion of the streets are not depicted.
Ninth. The direction & position of the
drains in Maiden Well in relation to the
suspected tank.
The houses of the inhabitants, with few
exceptions, are clean and comfortable
no overcrowding and as a rule each
family lives in a separate house of
from four to nine rooms. The men
earn good wages working in the
portland quarries and as a class are
robust and steady and therefore there
is an absence of poverty.
There is no regular system of drainage
although the situation is naturally most
favorable for the carrying out of a
well-planned scheme. In the street
under consideration (Maiden Well) there
is a pipe drain on one side, and a
dry stone one on the other covered over
with slabs of stone. In fact this drain
passes at the side of the tank in
Maiden Well—the side of the tank
forming the side of the drain at this
particular point. The drains are
indicated on the map by red dotted lines.
Most of the houses have closets with
cesspits four or five feet deep, situated in
their backyards; these are emptied at
considerable intervals as occasion may
require frequently not till they are
Closets
Pull up to the floor of the closet. When they are emptied it is not an
uncommon practice to dig a large hole in the small garden attached to most
of the houses. Fill in with the contents of the closet and by covering over
with about a foot of earth & lime.
Into many of these closets the numerous springs predominate, and when pull to a
certain height it flows away, in all probability passing to the street
house below. This is particularly the
case in Malwaus which is sixty four
feet above the sea level at the bottom,
and one hundred and fifty at the top.
The total length being only two hundred
yards. There are underground drains
in all the streets, which are only
supposed to take slop water and
surface drainage. Only a few of the
houses in the infected area have
house drains connected with the
street sewers so that there can be
no suspicion of sewer gas escaping
into the houses this back pressure
in the drains.
Many houses in the village have private
wells but the public supply is mostly
obtained at the tanks situated
at Fortunes Well, Maiden Well (this place) Chiswell and Castle Road. These tanks are built of stone and are covered in with large slabs and the water supply is generally derived from springs close at hand being conducted to the tank in ordinary clay pipes, placed on a two foot mound in the ground. There are no private wells within the infected circle.

The only important tank in connection with this investigation is the one situated in Maiden Well, about half way between the bottom of Mallams and the bottom of King St; as from it the lower half of Mallams, a King St. Core Cottages & the Crooms adjacent to the tank in Maiden Well, drew almost their entire supply of water. Taking this tank therefore as a centre, I have described a circle with a radius of one hundred yards which circle includes all the houses in which the fever first made its appearance, with only three exceptions. These latter are well accounted for and will be considered in detail further on. The spring which supplies this tank is situated in
the centre of the street and only two
put under the surface, and at a
distance from the tank of forty ten
feet (see red cross in map). From the
shoal who last put this place in
repair I have ascertained the following
particulars regarding the arrangement
for conducting the water from this
spring into the tank. The water is
just collected in a small square space
shaped with four stone slabs, and one
flat slab on the top: the whole being
kept together by some blue clay
being puddled in round the sides.
Clay pipes conduct the water from
the spring to the tank, about a foot
under the ground at the spring
end, but not more than a foot
inclus near the tank. After heavy
rains these pipes are sometimes emptied
at various points, by the rush of
water which comes down the step
stret Maiden Well. During the
Epidemic I had this pipe opened
and found that the portion next
the tank was formed out of a piece
of old shooting coved with small
flat portions of stone. This bit of
iron shooting was four feet long.
Such is this arrangement therefore that any pitty or fecal matter thrown into the street near this spring can easily soak into the soil, and the next rain will wash it into the collector, or it might be washed along the outside of the pipes leading from the spring into the tank.

Then again, the close relation of the drains to this tank is to be noted; of these there are two one on each side of the street. That on the side opposite the tank is a pipe drain, and is connected with the cross streets in this manner:

Ring S 1. See large Plan of Drains c c. The description of the other is given at page 4. The overflow pipe from this tank passes into this drain, and there is nothing to prevent the sewer gas being conducted into the tank thru this pipe.

There are two houses close to the tank where there were three cases of typhoid at Henwood's Gibbs. They have only one closet in common in the back yard and this is full now (Sept 86) and has been for several months with water and fecal matter. This closet is not more than 70 feet from the tank & 90 feet from the spring in the road.
Another important fact is that Smith's Closet was emptied one night during the week between the 20th and 21st of September, and the whole of the contents were deposited in a hole dug in the garden at Henwood's Gibbs, at a point marked * on the map, and close to the closet already mentioned. The Smith family consisted of nine individuals and as this closet had not been emptied for some time I calculated that about a ton of local matter had been buried at this spot.

Such then were the sanitary arrangements and arrangements before and at the time when this pond made its appearance. Before describing the epidemic I would mention that during serious complaints regarding the water supply and sanitary aspects Mr. Harrison was put down by the Local Government Board to undertake an inspection in June 1876, and again on the 6th of September 1886. Dr. Blaxall made a second inspection by order of the L.G.B. Dr. Blaxall pointed out to the Urban Sanitary Authority here, who are responsible for the health of the place, that the
conditions existing in this district were such as to favour the development of diseases as Cholera and Typhoid Fever, making special mention of the extent to which the springs were exposed to dangerous pollution by reason of their near proximity to impure streams and foul privy pits.

Within about ten days of the Government Inspector visit the epidemic began and continued for some months, and as nearly the whole of the cases were under my own professional care it gave me very restricted opportunities for making notes and observations.

From my own experience I can say that there have been no cases of intemperate in Fortune's Well during the last fifteen years, and the only cases approaching it were three in a village two miles distant about twelve months since.

After the cessation of the epidemic at the end of four months there were no more cases till the summer of 1887 when we had eight more attaining swine cases of which three died - then have been none since that date.
Within the hundred yards from the tank there are

Houses occupied 77 { Total

1st " vacant 4 } = 81

Inhabited by

Adults 207 { Total

2nd " Children 84 } = 291

Number ill within circle

Adults 21 { Total

3rd " Children 55 } = 76

4th There are three houses outside the circle which had ill

Adults 3 { Total

Children 1 } = 4

There is one house in the middle of

Ring No which should have been in

the margin of the circle

The above makes a grand total of

eighty cases: in the detailed list

however eighty-five are mentioned

and this margin is put in to allow

for several doubtful ones.

The deaths were Adults 3 Children 5 = Total 8

and their position is indicated on the

map by a black dot.

The first case that came under observation

was No 10 in the list Eliz Mitchell living

in the last house on the left at the

bottom of Mallams who was taken
ill, and seen for the first time on the 12 Sept. Enteric fever was not suspected by me till the following week when the Pearce family no 1 to 5 at Core Cottages and the Mitchell family 6 to 9 were suffering from the early symptoms. Before the end of September almost every case in Mallams, Core Cottages, King St. and Maiden Well began to show signs of the disease viz. rigors, general malaise, foul tongue, loss of appetite, high temperature, diarrhea &c &c and in 22 cases the characteristic rose coloured spots on the body were very well marked. There were many and varied complications most of which are noticed under the heading of remarks in the list of cases. Within the circle there were thirty seven houses attacked and forty-four escaped (four of the latter being definitely at this particular time.) The first case outside the circle was no 319 in list a man residing at Low Lane marked no 1 on map. He had been living in Mallams on the left hand side in the house shaded in the upper left hand corner of the map. He died the second week of September and had been using the tank water very regularly.
He took ill two days after going to his new house in South Lane.

The second case is situated on the Chestnut Road. Case no. 31 in list a no. 2 on map. This was a school girl aged 6 years living with her parents and sister and four other children none of whom had the slightest symptom of being ill, and as they had never used the water of this tank in the house under any circumstances, no had the girl or any member of the family been near any of the infected hounds.

The source of infection baffled me for more than a week. One day known when I was passing this tank, I saw some children on their way to school drinking at this tank and going at once to no. 31, I found that she also was in the habit of drinking at the tank almost every day when going to school, and that she had done so during the early part of September. The third case was no 45 in list, no 3 on maps in the middle of Spring Gardens. Mrs. Way no doubt took the fun from being constantly in the house in Core Cottages where the four other Mitchell family were ill, and in
all probability had been infected
through the food or drink.

The three cases in the house situated
in the middle of King St. should be
considered by cutting the circle. No. 49 Case Gray was
sent out of the house to prevent it spreading
the Yan, but it took ill the day after
arriving at Portsmouth and died. There
see notes on list.

Considering that many of the houses
had from three to six cases of
Yan it is surprising that there
were not more cases of secondary
infection than really occurred.

Altogether five women took ill
from nursing others or there were
Nos. 42, 45, 46, 41 & 50. in list.

Great care was taken in regard
to disinfecting the excreta from
the patients, a liberal supply of
Carbolic acid, Carbolic soap &
Chloric of lime being supplied to
all the houses every second or
third day. and every day the
drains were disinfected, the
various sinks and traps cleaned out. The houses which were
not purely received the same sanitary
attention as those infected
The question now comes when did all these cases get the cutie fur poison almost at the same time? And is it not in the highest degree possible that it was in this tank about the end of August or during the first week of September?

In order to still further elucidate this matter I made a complete census of almost every house within the circle infected, and non infected. The following questions were put to every household.

First. The name, second, address.
Third. Number of inmates, fourth number of adults, fifth number of children.
Sixth. What water generally used.
Seventh. How used, boiled or otherwise.
Eighth. The milk supply.
Ninth. The number of inmates ill.
Tenth. The number well.
Eleventh. The condition of the closets, drains examined into.

The general conclusions arrived at may be summarised as follows.

First. As regards the milk supply.
This was from five different dairies all of which are well known to me none of them or their families...
were, or had been ill with enteric fever, and none of them took ill during the epidemic, may more these five dairies also supplied a large number of families outside the infected circle and in not one of these families was there a single case of fever so that it may be fairly concluded that the milk supply was not to blame.

Second As to the use of the water from the Maiden Well tank.

Twenty-six of the thirty-seven houses attacked with fever drank this water regularly, seven houses used it intermittently; occasionally getting their water from the Stones Well or Cheswell tank and three houses only stated that they had never used this tank water.

In the case of the houses whose none were taken ill an extensive investigation was made into the conditions and surroundings of 24 hours out of the remaining forty within the circle and it was ascertained that ten never used this tank water but obtained their supply from Stones Well or Cheswell tank. Eight drew their
water from the upper tanks in maids' well & sic only had used this tank water and then only when boiled. Two families for instance may be mentioned as very striking examples - they lived in Maryman's on the right hand side and were perfectly free from sickness both adults & children at the same time they had thirteen cases of pueri in the houses just above them & seven cases in the houses just below them (see map). These two families never used this tank. In the primary infection there were fifty six children attacked and nineteen adults. In the secondary infection five adults who contracted the disease in nursing their relation. The excessive amount of sickness amongst the children may be accounted for in this way.

First, children & young people are more susceptible than adults.

Second. In very many instances I found that the children were the only members of the household drinking the water in its natural condition as it was drawn from the tank; the adults drinking beer, tea or cocoa.
From the above circumstances we say in answer to our question that it is highly probable and possible that the disease was in the tank.

First. From the fact that in almost every house where the water was regularly used during the end of August or early part of September there was sickness.

Second. There was no sickness in the houses that did not use it at this time, i.e., in the midst of the epidemic.

Third. There was no pure in the upper half of Mahaults or Kings with a population about the same in number as with regard to sanitary matters under precisely the same conditions and surroundings. There was no pure in any other part of the island and amongst the civil population.

The case of the school girl Sarah White is in the list is to my mind the strongest case in evidence against the tank. She being the only member of the family who drank this water at the same time the only one taken ill.
The next consideration is did this Fever start de novo or was there any epidemic in the neighbourhood from which an isolated case might have been introduced into the Island just previous to this outbreak? And within the usual time after its introduction did numerous cases of intrinsic Fever appear?

Sofar as can be ascertained the connecting link in the chain of evidence is as follows. On the 9th of August 1889 H.M.S. troopship "Himalaya" arrived at Portland having on board the 1st Bn. Regiment just returned from Egypt where they had been stationed up the river Nile at a place called Sheball. They were put home on account of the severe losses the Regiment had sustained at this place and intrinsic Fever no less than eighty men having died of this disease within a few months. The Regiment disembarked on the 15th of August and took up their quarters in the large barracks on the Vine citadel having about forty men convalescents from Interitis and few ill with the Fever. During the next 3 or 4 weeks
Five more men contracted the disease viz. on the 12th, 13th, 16th & 30th of August and one on the 17th of September and were admitted into the Garrison Hospital. During the first week after their arrival a large amount of leave was granted to those who were usual led to a good deal of drinking going on, and in Dr. Hayes return this is a very significant remark in regard to the two last cases, that one came sick on the 11th and the other probably on the ninth day of the disease. The third we have a list of five names Black, Hubley, Hawkes, Wall & Bloomfield who took ill after their arrival and who in all probability were in the village very coming up to the date of their admission to hospital.

D. Blaxall thru' Sir John Watt Reid for the Navy & Sir Thomas Crawford for the Army obtained the following particulars in regard to Pte. S. Fromala.

During the passage home three were now ill except the Regiment others there were 250 men & boys on board in addition to the military and and of necessity there must have been a very large amount of intercommunication. The military passengers requested the...
same closets as the rest of the ships company.

All the garrison ears were treated in their own hospital at the vermic which is at a distance of about half a mile and about three hundred feet above the level of the village.

All the drains from the vermic pass to the east side of the Island and none of the sewage can in any way enter the village drains.

The garrison washing also is done in the barracks & the garrison hospital washing is done by a contractor living some miles from this, and in no way connected with the village. or any one living in it.

In the end we have a regiment arriving in Portland which had suffered very much from bilious fever and then between the 16th August (the day of arrival) & the 30th eight cases are recorded and one on the 19th of September who was no doubt ill on the 16th Sept. so that we may consider that all these cases had the poison in them before leaving the ship. This would give from a few days to 25 days as the period of incubation.
Following on this development of the

two at the Barracks we have several
cases amongst the civil population
on the 12th & 13th September and within
a period of from fourteen to twenty days
every case in the long list of primary
infections was ill, and this beast
remained in a population where
intoxication had been unknown
for more than fifteen years.
Then or four weeks thereafter comes
the whole period of time, and arguing
from the recorded history of similar
outbreaks in other places it is almost
conclusive evidence that the 1st
Fusilier Regiment was the means
of introducing the poison into the
Village, whereby numerous individuals
were attacked either simultaneously
or successively.

How then could this have taken place?
These are several channels thru which
the poison could have entered the tank.
First. It might have been thru a man
suffering with enteric thru using the
closet at the back of Kenwood's and
Sible's house as this is a side
entrance to it which would enable
any poison passing thru this
closet without the owner of it knowing anything about it. In connection
with this note the condition of the closet
mentioned at page 8 & its relation to
the tank.
Second. There would be no difficulty for
any settle or excrement deposited in the
street being washed thru the thin
covering of earth and thus finding its way into the spring along the
side of the pipe into the tank.
Third. The condition of the dry stone drain
next the tank was most favorable
for anything soaking into the tank
it comes from the higher part of the
village and has numerous sewers &
the draining from cess pits flowing
into it so that thru were a variety of
sources by which the poison might
have entered this drain.
After carefully weighing the different
probabilities I am inclined to think that
the infection came from Ruth Hawkes
or Wall who were about in the village
between the 10th to the 30th of Aug. and as
they were suffering from diaphaean one
or more of them had passed their
injected motion in the corner close
by the tank. And this is confirmed
by the fact that I have noticed this spot was used as a similar purpose before this occasion.

The analysis of the water did not give any positive indications regarding the condition of the tank as unfortunately it was not taken for examination till nearly every case was ill, and at the same time the tank being a small one all the water containing the poison was drained during two or three days or flown off through the overflow pipes. There were two analyses made by D. C. Leach County Analyst on water taken on or about the 20th of September. Two samples suit.

Both these waters hold a very large excite of chlorides and mineral muts in solution; this however may be due to the proximity of the supply to the sea, or to the geological formation whence they are derived, and, if so, no great importance is to be attached to their presence. In No. 1 the amount of free ammonia is rather high, but neither that nor the albuminoid ammonia is insufficient quantity to indicate the contamination of the supply by sewage. I am of opinion that although the water...
is low down in the second class of drinking waters of this country, as far as chemical analysis can indicate it may be used palably safely for dietetic purposes. A higher quality of water would, however, be more desirable for a public supply. The second report is on a sample taken by myself on the 27th Sept. 1886 a is by W. A. H. Taylor of London.

The water was faintly cloudy from holding in solution minute floculent matter, which subsided on long standing. It emitted no pronounced odour either at ordinary or elevated temperatures. One gallon of it contained 7 g. grains of solid matter and 7 g. grains of chlorine. It yielded traces only of free ammonia, and a nontoxic amount of albuminoid ammonia. Intact and poisonous metals were absent. Intact amounted to 3/4 grain of nitric acid per gallon. The water showed no evidence of sewage contamination of recent origin. Having regard to the large quantity of solid matter, and the high proportion of chlorine, we are
of opinion that it would be ill-advised to use this water for drinking purposes. I have found as a rule that the water in the springs, and wells throughout the island, is very good, and notwithstanding the numerous sanitary defects there seldom any epidemics of diarrhoea even in the summer months. The soldiers who were ill with typhus were all treated in their own garrison hospital, and none of them had been in lodgings in the village. Had we been able to take the water from this tank about the fifth of September I have no doubt the analysis would have given a very different character to the water. There are a large number of observations to show the frequent occurrence of infection from drinking water, and there is no doubt that infection from this source can be more clearly proven than from any other. The following epidemics of a somewhat similar character have
been recorded.

Epidemic in Solothurn in 1865. Between August 15th and Sept. 15th, 82 persons were taken ill. All the houses supplied with a certain water had sickness and other houses near it between these houses escaped and the only difference was a separate water supply. In this instance the poisoned water supply received the future poison from a single case of two in the first instance and after the middle of August the whole locality became infected.

A similar case at Launen (Canton Bacland) there had been no human form pass on August 7th 1871 that form were attacked, during the next nine days sixty-nine were and altogether one hundred sickness were taken sick in a population of eight hundred.

In this case also the disease only appeared in those houses that used a particular running stream, whilst those who did not use it were free from sickness.

The starting point was a single case of human and commencing on July 15th a form which case the executa got into the running stream.
At Stuttgart there was an epidemic in 1872 from poisonous matter obtaining an entrance into the aqueduct and thus alternate hours supplied from the source had Vitriol in it.

A fourth illustration is the epidemic at "Schenenfabrik" in Basel in 1867, and the epidemic in the barrack at Zurich in 1865.

The case of the village of Northawton in Devonshire on which Dr. Budd wrote a paper in the "J. med. 9 July 1859 was also one of infected water supply. Besides the above there have been many other recorded cases of local outbreaks: one within my own recollection at the village of Slateford near Edinburgh during the time that I was a student at the University, and in this case it was discovered to be owing to the sewer leaking into the village well. For some years there the water has been looked upon as the great channel by which this sewer can be conveyed, and the need of this epidemic which I have had under investigation has proved no exception to the rule.
The conditions existing here are the same as they have been for many years, and are similar to the surroundings of hundreds of county villages.

Every evil from a sanitary point of view may be present, yet if there is noanie who presented introduced no new will be developed.

Concluding remarks.

The number of secondary infections appears large. But considering that in some houses there were two or three cases of him in one small room and the illness had cut the same time to wash all the linen we often mixed with buttocks excrion.

I think it is not for wonder at.

Dr. La Harpe found that the first series of persons infected by buttocks from who almost always females this proved to be the case in this epidemic.

It is a rare thing for a medical man to take buttocks from a patient yet this occurred to myself when staying at Ayr in Ayrshire during the summer of 1866. I was attending some forty cases in Ayr with a fellow
student now Dr. W. Salom Rockstraw and I fell ill within a fortnight of attending these cases, and went through a distinct attack lasting four weeks, there being no other known source from which I could have caught it.

2 It is to be noted that none of those who drank the water after being boiled appear to have suffered in any way, showing that a certain temperature destroys the power of the enzie poison.

3 From this and other examples therefore we hold the opinion that enzie poison can only appear in a previously healthy locality by the introduction of an enzie vector.

4 The lesson the Dranant is the absolute necessity of educating public opinion and local sanitary authorities to the great importance of having a perfectly pure water supply for the inhabitants, and so arranged as to make it utterly impossible for any sewage to attain access to it; as a good system of drainage and a pure water supply are the two most important sanitary considerations in all towns & villages.
General view of the village of Fortuneswell

The position of the tank
The tank in Maiden Well looking up the street

The tank in Maiden Well looking down the street. The point where the water from percolated into tank.
List

Of the Cases of Enteric Fever in the Village of Fortunes Will Portland Dorset

Between Sept. 1st 1886 & Dec. 1st 1886

with

Particulars regarding each case

and

Temperature charts of six
### Case No. 25 in list

**RECORDS OF TEMPERATURE, PULSE, RESPIRATION AND EXCRETA.**

**Name:** Way Hung Po  
**Age:** 35 years  
**Disease:** Enteric Fever  
**Result:** Death Nov 4th at 4 A.M.

<table>
<thead>
<tr>
<th>Month</th>
<th>Date</th>
<th>Temperature</th>
<th>Pulse</th>
<th>Respiration</th>
<th>Urine</th>
<th>Treatment</th>
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<tr>
<td>October</td>
<td>14</td>
<td>91°F</td>
<td>120</td>
<td>100</td>
<td>yellow ochre</td>
<td>Ag. Nt. &amp; Bicarbonate of Soda</td>
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<td>15</td>
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<td>108</td>
<td>110</td>
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<td>Vomiting from 3 P.M.</td>
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<td>110</td>
<td>cloudy</td>
<td>Vomiting from 3 P.M.</td>
</tr>
<tr>
<td></td>
<td>25</td>
<td>91°F</td>
<td>108</td>
<td>110</td>
<td>cloudy</td>
<td>Vomiting from 3 P.M.</td>
</tr>
<tr>
<td></td>
<td>26</td>
<td>91°F</td>
<td>108</td>
<td>110</td>
<td>cloudy</td>
<td>Vomiting from 3 P.M.</td>
</tr>
<tr>
<td></td>
<td>27</td>
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<td>110</td>
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</tr>
<tr>
<td></td>
<td>28</td>
<td>91°F</td>
<td>108</td>
<td>110</td>
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<td>Vomiting from 3 P.M.</td>
</tr>
<tr>
<td></td>
<td>29</td>
<td>91°F</td>
<td>108</td>
<td>110</td>
<td>cloudy</td>
<td>Vomiting from 3 P.M.</td>
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<tr>
<td></td>
<td>30</td>
<td>91°F</td>
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<td>110</td>
<td>cloudy</td>
<td>Vomiting from 3 P.M.</td>
</tr>
<tr>
<td></td>
<td>31</td>
<td>91°F</td>
<td>108</td>
<td>110</td>
<td>cloudy</td>
<td>Vomiting from 3 P.M.</td>
</tr>
</tbody>
</table>

**Remarks:**
23rd Night: Pulse well  
24th Night: Pulse taken, temperature 98.7°F, on first 2 days.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
22nd Night: Pulse taken, temperature 98.7°F, on first 2 days.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
21st Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
20th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
19th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
18th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
17th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
16th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
15th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
14th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
13th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
12th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
11th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
10th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
9th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
8th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
7th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
6th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
5th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
4th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
3rd Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
2nd Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
1st Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  
0th Night: No pulse.  
Chest and tongue, scarlet fever.  
Respiration 18 per minute.  
Feverish, much discoloration of skin.  

**S. Maw, Son & Thompson, London.**
No. 33 in List.

RECORDS OF TEMPERATURE, PULSE, RESPIRATION AND EXCRETA.

Name: Allen Elijia  Age: 30  Disease: Enurias Fever

Sept. 20: Rigor & General Malaise

10:00: Shifted with rise of blood pressure counted random spots.
8:00: Going well
16:00: Eating light food
20:00: Progressing favourably towards recovery.
25:00: Right Abdominal pains.

Saw Dr. very thin

S.Maw, Son & Thompson, London.
**Case 38 in List.**

**Records of Temperature, Pulse, Respiration and Excreta.**

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Disease</th>
<th>Recall</th>
<th>Recovery</th>
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<tbody>
<tr>
<td>John Clarke Mallins</td>
<td>40</td>
<td>Intoxic Fire</td>
<td>21st day</td>
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<table>
<thead>
<tr>
<th>Date</th>
<th>Temperature</th>
<th>Pulse</th>
<th>Respiration</th>
<th>Urine Reaction</th>
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<td>Oct 4</td>
<td>98</td>
<td>120</td>
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<td>Oct 5</td>
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</table>

**Remarks:**
- 25 Sept. Felt much better.
- Oct 9 going on favorably.
- Tongue brown and flakes, slight in the last few days.
- Oct 15 body free.
- Oct 21 tongue still brown but able to eat a little.
- Oct 26 swelling of the throat.
- Oct 29 throat better.
- Nov 26 up and doing well.
- Nov 28 quite recovered.

S. Maw, Son & Thompson, London.
Case No. 42 in List.

Records of Temperature, Pulse, Respiration and Excreta.

Name: J. Samuelson  Age: 24 years  Disease: Enteric Fever  Infection from Nos. 34 & 35  Result: Recovery

<table>
<thead>
<tr>
<th>Month</th>
<th>13</th>
<th>14</th>
<th>15</th>
<th>16</th>
<th>17</th>
<th>18</th>
<th>19</th>
<th>20</th>
<th>21</th>
<th>22</th>
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<th>26</th>
<th>27</th>
<th>28</th>
<th>29</th>
<th>30</th>
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<th>1</th>
<th>2</th>
<th>3</th>
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<tbody>
<tr>
<td>59° F</td>
<td>108°</td>
<td>108°</td>
<td>104°</td>
<td>103°</td>
<td>102°</td>
<td>101°</td>
<td>101°</td>
<td>100°</td>
<td>100°</td>
<td>99°</td>
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<td>99°</td>
<td>99°</td>
<td>99°</td>
<td>99°</td>
<td></td>
</tr>
</tbody>
</table>

Remarks:
Oct 15: Rigor.
Oct 16: Diarrhoea.
Oct 16: Slight fever.

Urine:
Sediments: 3, 3, 4, 1, 2, 4, 3, 2, 3, 3, 6, 2, 7, 8, 4, 3, 2, 2, 1 - 1

Specific gravity:
Colour:
Cloudiness:
Specific gravity:
Sugar in:
Albumen in:
Sediments in:
Microscopic:

Treatment:

S. Maw, Son & Thompson, London.
Case no 45 in List.

RECORDS OF TEMPERATURE, PULSE, RESPIRATION AND EXCRETA.

Name: Maggie May
Age: 24 years
Disease: Encephalitis

Date: November

14 20 21 22 23 24 25 26 27 28 29 30 31 1 2 3 4 5 6 7 8 9 15 19

Remarks:
In bed since Oct 11th. Began on 8th with severe headache has not been well since. 18th Frankly x rains Tongue white, thrushous edges.
21st Tongue moist, slight dull pains in brain. N.P.
24th Pains about very sharp. Tongue brown.
25th Abdominal very tender a small trouble.

Pulse:
100 100 84 84 90 108 100 90 82 96 96 84 80 84 120 100 100 100 90

RESPIRATIONS

Urine:
REATION OF 24 HOURS
SPECIFIC GR. OF
COLOUR OF
CLEAN OR TURBID
UREA (MILLIG.)
SUGAR IN
ALBUMEN IN
SOLIDS IN
MICROSCOPIC SEDIMENTS

TREATMENT

S.Maw, Son & Thompson, London.
Case No.50 in List.

Name: M. Elizabeth Burden, Age: 50 years, Disease: Enteric Fever

Had been missing Eliza Allen, No 33, Case for three weeks.

Date

Temperature

Centigrade:

C° 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

Fahrenheit:

° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Remarks

Infection from No. 33

Temperature:

Slight rise Oct 26th, ill Nov 1st. Died on that date.

Respirations:

40, 42, 42, 40, 36, 36, 36, 36, 36, 36, 36, 36, 36, 36

Urine:

44 in 24 hours

Specific Gravity:

1.012, 1.014, 1.014, 1.014, 1.014, 1.014, 1.014, 1.014, 1.014, 1.014

Colour:

Clear

Microscopic Examination:

Sediments

Treatment

S. Maw, Son & Thompson, London.
<table>
<thead>
<tr>
<th>No.</th>
<th>Name</th>
<th>Address</th>
<th>Age</th>
<th>Date of Birth</th>
<th>Result</th>
<th>Remarks</th>
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<tr>
<td>1</td>
<td>Pearce</td>
<td>3 Coral Cottage</td>
<td>10</td>
<td>1892-09-13</td>
<td>Recovered</td>
<td>twins</td>
</tr>
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<td>2</td>
<td>Alice</td>
<td></td>
<td>10</td>
<td>1892-09-25</td>
<td></td>
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</tr>
<tr>
<td>3</td>
<td>Edward</td>
<td></td>
<td>6</td>
<td>1892-09-25</td>
<td></td>
<td>All in one house</td>
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<tr>
<td>4</td>
<td>Margaret</td>
<td></td>
<td>8</td>
<td>1892-09-25</td>
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<tr>
<td>5</td>
<td>Woodley Lizzie</td>
<td></td>
<td>4</td>
<td>1892-09-20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Mitchell Harry &amp; Coral Cottage</td>
<td></td>
<td>18</td>
<td>1892-09-18</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>George</td>
<td></td>
<td>12</td>
<td>1892-09-19</td>
<td></td>
<td>One family all mild cases</td>
</tr>
<tr>
<td>8</td>
<td>Alice</td>
<td></td>
<td>20</td>
<td>1892-09-14</td>
<td></td>
<td></td>
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<tr>
<td>9</td>
<td>Christopher</td>
<td></td>
<td>24</td>
<td>1892-09-19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Mitchell Eliza &amp; William</td>
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<td>18</td>
<td>1892-09-12</td>
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<tr>
<td>11</td>
<td>Pinn</td>
<td></td>
<td>20</td>
<td>1892-09-27</td>
<td></td>
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<tr>
<td>12</td>
<td>John</td>
<td></td>
<td>6</td>
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<td>Died Oct 22</td>
<td>Acid &amp; Sore-Meningitis</td>
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<td>one family</td>
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<td>Harry</td>
<td></td>
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<td>1892-09-20</td>
<td></td>
<td>Mother's house</td>
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<td>Attwood Abel</td>
<td></td>
<td>3</td>
<td>1892-09-20</td>
<td></td>
<td>Mother's house</td>
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<tr>
<td>16</td>
<td>Alice</td>
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<td>8</td>
<td>1892-10-21</td>
<td></td>
<td>Probably took it from</td>
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<td>17</td>
<td>Wallis Rebecca</td>
<td></td>
<td>6</td>
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<td>6 days convalescence</td>
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<tr>
<td>19</td>
<td>Bessie</td>
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<td>8</td>
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</tr>
<tr>
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<td>Mary</td>
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<tr>
<td>21</td>
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<td>22</td>
<td>Gray, Hume, King Street</td>
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<td>2 1/2</td>
<td>1892-10-16</td>
<td>Died Oct 24</td>
<td>Bronchitis</td>
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<tr>
<td>23</td>
<td>Hulie</td>
<td></td>
<td>5</td>
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<tr>
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<td>Way Harry &amp; William</td>
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<td>Way W.</td>
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<td>24</td>
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<td>29</td>
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<td>60</td>
<td>14 Sept</td>
<td>Died Nov 7, 1880, la Ruebmine</td>
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<tr>
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<td>White Sarah</td>
<td>Chirnside</td>
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<tr>
<td>32</td>
<td>Robinson W.</td>
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<td>29 Sept</td>
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<td>Parker Martha</td>
<td>Maidin Well</td>
<td>10</td>
<td>20 Sept</td>
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<td>Sarah</td>
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<td>Pettus P.</td>
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<td>3 Oct</td>
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<td>22</td>
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<td>?</td>
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<td>?</td>
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<tr>
<td>83</td>
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<td>7</td>
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<tr>
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</table>
Remarks

This list contains all the cases of Asiatic Fever and all who suffered from distinct symptoms of the disease after not under medical care from the 12th September to the end of November 1886. All the cases from No. 1 to 63 were under my own professional care and many of the remainder were attended by Dr. Blake & some few had no attendance. The cases of secondary infection were

First. Mrs. Edmunds No. 42 who was nursing her two sisters Parker Nos. 34 & 35
Second. Mrs. Maggie Way, who was attending the Mitchell family No. 6.7.869
Third. Mrs. Laura Way No. 46 attending her sister No. 45
Fourth. Mrs. Jane White No. 41 who nursed the child Clara John No. 42 who died
Fifth. Nurse Buxton No. 50 who took ill & died after nursing No. 12 for three weeks and some time after the Buxton child took ill Case 87.
The child W. Gray in R. 49 in King St. went away to Portsmouth to escape infection; however, he took ill the day after his arrival there and died in about fourteen days. This was the only family that had two deaths at this time from smallpox with from five to even seven cases of the disease. With such a large amount of work it was impossible to take careful records of admissions and a few that were taken are introduced with short clinical notes in margin.
PAN OF DRAINS
IN
MAIDEN WELL