

1878.

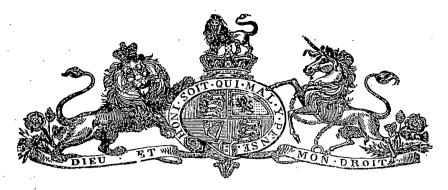
TASMANIA.

HOUSE OF ASSEMBLY.

## VACCINATION:

REPORT FOR 1877.

Laid upon the Table by the Colonial Treasurer, and ordered by the House to be printed, July 16, 1878.



## VACCINATION REPORT FOR 1877.

SIR,

I HAVE the honor to lay before the Government my Report on Vaccination for the year 1877.

From the year 1868 to 1877 public vaccination was entirely suspended, so that, with the exception of a comparatively small number of children operated upon by private practitioners, the whole of the population born during a period extending over eight years remained unvaccinated.

Several cases of small-pox having occurred in New South Wales, the Government deemed it advisable to reorganise a system of public vaccination; and vaccinators were accordingly appointed in all the more populous districts. They received instructions to vaccinate all children who were brought to them, irrespective of their social condition; a fee of two shillings and sixpence for each case being the remuneration to which they were entitled, and an allowance of one shilling per mile for travelling expenses when visiting outlying stations.

Under this system vaccination commenced in February, 1877, and during that and the four following months upwards of nine thousand cases were returned as having been successfully vaccinated. But after the month of June vaccination entirely ceased in nearly all the districts.

In looking over the appended returns it will be seen that only an insignificant proportion of the children were under one year of age, and a still smaller proportion under six months. It is during the first months of infancy that vaccination is most effective; but there is a wide-spread prejudice amongst the less intelligent portion of the community against the performance of the operation at this early period of life.

An efficient system of vaccination can be kept up only by the passing of a compulsory Act. That passed some years since is inoperative, and even if it were workable is insufficient. The Act should contain penal provisions, not only for compelling parents to have their children vaccinated before a certain age, but also for ensuring their return upon the eighth day for inspection, and allowing lymph to be taken when necessary.

A proper system of registration should also be instituted, analogous to that which exists in England. There it is the duty of the Registrar to deliver to parents at the time of registering a birth a notice requiring the vaccination of the child in conformity with the Act, with forms of certificate attached, and with information as to the attendance for public vaccination; and upon the receipt of the certificate of successful vaccination, recording it in the register against the name of the child. By this system of registration defaulters could be readily detected.

As the success attending arm to arm vaccination is far greater than that obtained by the use of stored lymph, it becomes a matter of great importance that vaccination should be carried out by the former means.

With a compulsory Act in operation there would be no difficulty in accomplishing this in Hobart Town and Launceston; but in the rural districts it would be impossible to keep up a continuous arm to arm vaccination throughout the year. It would be necessary, therefore, to adopt a system of periodical visitation.

The present system of vaccination is, for many reasons, a most unsatisfactory one; it is also a very expensive one. I would therefore respectfully submit for the consideration of the Government the following sketch of a plan which I feel assured would be more efficient, and at the same time more economical than that now in operation.

The number of births in Hobart Town and Launceston are sufficiently numerous to keep up arm to arm vaccination at one station at each of these places throughout the year; and as the duties connected with these stations would only require an attendance of one or two hours weekly, they could easily be performed by the House Surgeons of the respective hospitals.

The children born in the rural districts do not amount to more than about two thousand annually. One medical man would, therefore, find no difficulty in vaccinating these, so far as numbers are concerned. But as they are scattered throughout the Island, it would be necessary to devise a scheme of periodical visitations which would embrace the whole of the districts in the course of the year.

This could be effected by dividing the Island into five or six portions, such as north, south, east, west, midland, &c.; the vaccinator spending three or four weeks in each division. He would thus be enabled to sweep a division once or twice a year. Taking for example the Western District: vaccination would be started at New Norfolk on Monday, at Macquarie Plains on Tuesday, at Hamilton on Wednesday, at the Ouse on Thursday, &c. On the following Monday New Norfolk would be revisited and vaccination continued, on Tuesday Macquarie Plains, and so on. By proceeding in this way the vaccination of a whole division could be effected in three or four weeks.

As bearing upon the question of the benefits which would accrue from keeping the vaccination of the community in as few hands as possible, I take the following extract from a work on vaccination by Dr. Seaton, Medical Inspector to the Privy Council:—

"The advantages which would result from confining the practice of vaccination to such persons only, even among those of the medical profession, as are duly qualified to undertake it, along with other considerations, induced one of the most distinguished of the early vaccinators to propose that vaccination of rich and poor alike should be carried on entirely by a special class of medical practitioners not otherwise occupied in medical practice. The benefits which would have resulted to the public had such a course been adopted are, in my opinion, incalculable; nor must I withhold the expression of the strong conviction to which my experience has led me, that the best of all events it is indispensable that all who vaccinate should be trained to the work. In the enquiry which was made by myself and Dr. Buchanan into the state of vaccination in London in 1863, we compared the results obtained by various vaccinators, as shown by the cicatrices on the arms of large numbers of children, and could not but express ourselves as struck with the great difference of results of different operators working under apparently the same conditions. This difference we stated was quite irrespective of general professional attainments, and depended altogether on special knowledge and special practical skill; for, however trifling as a surgical operation vaccination may be, there is nothing more certain than this, that careful observation, practical experience, and painstaking accuracy are indispensable for securing its proper results. We do not hesitate for a moment to express our strong conviction that the vaccination of London would be best done by a few thoroughly trained vaccinators who devoted themselves exclusively to the work."

I have the honor to be, Sir,

Your most obedient Servant,

GEORGE TURNLEY, Supt. of Vaccinations.

## VACCINATION Return for the Island of Tasmania, 1877.

Registration District of—	Name of Public Vaccinator.	Total Vaccinated.	At and under 6 Months old.	6 Months to 12 Months.	One Year and upwards.	Returned on 8th day.	Entirely successful.	Partially successful.	Entirely unsuc-
Hobart Town Launceston Deloraine Franklin Westbury Fingal Hamilton Stanley Campbell Town George Town Three Hut Point Oatlands Richmond Torquay Longford Sorell	Dr. Murphy Dr. M'Neece Dr. Smith Dr. Dickie Dr. Lever Dr. M'Donald Dr. Govett Dr. Crowther Dr. Richardson	592 1440 1305 975 1131 237 335 298 335 54 106 368 662 228 972 532	5 32 36 27 50 10 14 7 3 1 1 11 24 1 16 1	13 39 69 30 44 11 7 14 2 7 15 21 6 37 15	574 1369 1200 918 1037 216 314 277 330 53 98 342 617 221 919 516	461 1440 1305 975 1131 237 263 298 335 54 106 364 662 228 972 532	450 1440 1305 975 1131 237 257 298 335 53 104 322 662 228 972 532	3 - 39 - 46	3 - 1 2 3 - - -

GEORGE TURNLEY, Supt. of Vaccinations.

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