

**BENNIAL REPORT OF THE BOARD  
OF HEALTH OF THE STATE OF  
MISSISSIPPI; SEPTEMBER 30TH  
1899 TO SEPTEMBER 30TH 1901**

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**VARIOUS**

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OF HEALTH OF THE STATE OF  
MISSISSIPPI; SEPTEMBER 30TH  
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BIENNIAL REPORT  
—OF THE—  
**BOARD OF HEALTH**  
OF THE  
State of Mississippi,  
FROM  
SEPTEMBER 30TH. 1899 TO SEPTEMBER 30TH. 1901.



H. A. GANT, PRESIDENT.  
J. F. HUNTER, SECRETARY.

JACKSON, MISS.:  
CLARION-LEDGER PRINT.  
1901.

## Members of the Board.

### *PRESIDENT,*

H. A. GANT, M. D., Jackson.

### *SECRETARY,*

J. F. HUNTER, M. D., Jackson.

### *FROM THE STATE-AT-LARGE,*

J. F. HUNTER, M. D., Jackson.

H. H. HARALSON, M. D., Vicksburg.

H. A. GANT, M. D., Jackson.

S. R. DUNN, M. D., Greenville.

WM. M. PAINE, M. D., Aberdeen.

*First District*—W. S. Greene, M. D., Aberdeen.

*Second District*—P. W. Rowland, M. D., Oxford.

*Third District*—J. N. D. Shinkle, M. D., Friars Point.

*Fourth District*—C. D. Mitchell, M. D., Pontotoc.

*Fifth District*—H. S. Gully, M. D., Meridian.

*Sixth District*—B. D. Watkins, M. D., Natchez.

*Seventh District*—E. P. Jones, M. D., Hermanville.

### *EXECUTIVE COMMITTEE.*

J. F. HUNTER, M. D., Chairman.

W. S. GREENE, M. D.

H. S. GULLY, M. D.,

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REPORT OF  
**MISSISSIPPI BOARD OF HEALTH.**

*To His Excellency, A. H. Longino, Governor of Mississippi:*

SIR: We have the honor to submit herewith the following report of the proceedings of the State Board of Health for the years 1900 and 1901 as required by Sec. 2272 of the Annotated Code:

In 1900 and 1901 there were examined for license to practice medicine in the State of Mississippi in accordance with the provisions of the law 261 applicants and 158 were granted license. The percentage of licentiates to the number of applicants, it will be observed, is greater than in previous years. This is due to the fact that the Board has established a high standard of requirements and all reputable medical colleges have adopted a four years course of teaching before granting their diplomas. This has had the effect of very materially elevating the standard of requirements for entering the medical profession in the State of Mississippi. The classes of applicants in the last few years show decided improvement in both general and medical attainments over those of ten years ago.

At the time the present Board was organized small-pox was prevailing in the State to an alarming extent, so much so that the former Board, whose term expired with that of Gov. McLaurin, recommended that a compulsory vaccination law be passed. This the legislature failed to do, but enacted the following:

AN ACT to provide compulsory vaccination, and to provide a penalty for enforcing same.

Section 1. Be it enacted by the legislature of the State of Mississippi, That the Board of Supervisors in the counties in which small-pox exists, are hereby empowered to pass ordinances for providing for compulsory vaccination to enforce same as hereinafter provided.

Sec. 2. The President or Clerk of the Board of Supervisors shall make application to the Secretary of the State Board of Health for a sufficient quantity of bovine virus to do the necessary vaccinating, and the cost of said virus shall be borne by the county so ordering.

Sec. 3. The Board of Supervisors may make contracts with any reputable physician or physicians to do the vaccinating and pay for same.

## REPORT OF THE

Sec. 4. Any person refusing to be vaccinated when requested by the authorized representatives of the Board of Supervisors, shall be punished as for a misdemeanor. Provided, however, satisfactory evidence of successful vaccination within the preceding five years shall constitute a sufficient defense to any prosecution under this act.

Sec. 5. That all acts in conflict with this act be and are hereby repealed.

Sec. 6. That this act take effect and be in force from and after its passage.

Approved February 8, 1900.

Signed,

J. L. POWER,  
Secretary of State.

It will be seen that this law left it to the option of the Boards of Supervisors whether or not they should pass ordinances requiring compulsory vaccination. As a matter of fact many Boards of Supervisors refused to take action and in others the management of the disease was so ineffective that it continued to spread and caused the loss of hundreds of lives. In one of the largest counties of the State the following order was issued by the Board of Supervisors and addressed to the County Health Officer :

## SMALL-POX NOTICE.

Dear Sir : Your appeal to the Board of Supervisors for aid for the small-pox cases that now exist in this county, has been duly received.

Answering for the Board, I will say that we have decided not to aid anybody who has small-pox, either with guards, nurses, medical attention or food, and any expenses incurred by you in handling such cases will not be borne by the county.

All parties who are sick with small-pox or any other contagious disease, must look to their friends, or to their landlords or merchants for aid.

This conclusion has been reached after carefully considering the vast expense such cases would necessarily inflict upon the county.

In other counties it was impossible to have the bodies of persons who died of small-pox buried promptly, and in one county a body was left unburied and the matter reported to this Board on Christmas day. The house in which the person died was in the corporate limits of a town, and in order to get rid of the body, the house, corpse and all were burned by its citizens. It has been abundantly proven time and again that thorough vaccination, and by that we mean successful vaccination, does protect against small-pox. Vaccination does not endanger life. There has not been a death authoritatively reported from this cause within the State. It is a reflection upon the intelligence and good judgment of our people that this loathsome disease, the most easily preventable of all infectious diseases, should cause the loss of the lives of so many of our citizens.

From November 15, 1900 to April 15, 1901, there were reported 2,720 cases, 595 deaths, 21.87 per cent. from small-pox, and this was only an approximate report. The disease still exists and with the



return of cold weather will again spread, unless prevented. The chief County Health Officers were not required to make monthly reports until November 15, 1900. Since that period there have been reported 496 cases of scarlet fever and 51 deaths, 10.28 per cent.; and 71 cases of diphtheria and 11 deaths, 15 per cent. Scarlet fever is still quite prevalent in the State. The small death-rate from diphtheria is accounted for from the very general use of inoculation with antitoxin. A procedure now regarded as perfectly safe, but which at one time, like vaccination, was violently opposed as being dangerous to life.

In November, 1900, there were a number of cases of yellow fever at Natchez and Brookhaven in this State, but on account of lateness of the season a spread to other places was prevented. During the year 1901 there have been no cases reported in the United States, and as the season is so far advanced we do not look for an importation of the disease this year. The very thorough sanitary work carried out in the City of Havana and other ports of Cuba since their occupancy by the United States Government has cut off the most dangerous sources of infection, and if the theory now advanced by the commission appointed by the Surgeon-General of the army that the mosquito is the only means of transmission of the disease to be true, we need never any more resort to quarantine, but rather to the extermination of the mosquito to protect the State from yellow fever. In combating disease, sanitation is now more than ever the order of the day and this applies not only to epidemic diseases which cause comparatively a small number of deaths, but to other infectious diseases also, such as typhoid fever, diphtheria, scarlet fever, dysentery and others that are caused by local and general unsanitary conditions, and by improper hygienic surroundings, such as impure air, adulterated food and impure water. Each year the State of Mississippi loses more lives from tuberculosis and typhoid fever than from yellow fever and small-pox combined and they are preventable diseases, but in order that the health authorities may successfully contend against the unsanitary conditions existing in many parts of the State and be enabled to detect impurities in milk, water, food and air they must be provided with means for investigating and detecting said impurities. We therefore suggest that the State Board of Health should be provided with a well-equipped bacteriological laboratory, which will enable the Board to make prompt reports to the health officers and physicians in the State of any specimens submitted by them for examination.

The State should also be provided with more recent authorities on medicine, especially, on the subjects of hygiene, dietetics, sanitation, bacteriology, physiology, toxicology and medical jurisprudence. An investigation of the medical works in our State Library will reveal the fact that the medical department is very poorly sup-

plied and modern medicine is not represented, there being no authorities later than 1870 or 1880.

Our State is notably behind in the matter of vital and mortuary statistics, and we suggest that legislation should be had requiring a perfect system of registration, marriages, births, deaths and diseases. The Board has been appealed to numbers of times for information along this line by citizens of other States who represented business interests desiring to locate in our midst. It is accepted by all sanitarians and up-to-date business people that no State can keep abreast of the times that is not prepared to furnish such important statistics.

We regret to say that the small appropriation for the past two years has not been sufficient to maintain the Board in carrying out the responsible duties devolving upon it in the protection of the health and lives of the people.

For further information we would respectfully call your attention to the minutes and expenditures.

Respectfully,

H. A. GANT, President.

J. F. HUNTER, Secretary.

## MINUTES.

OFFICE STATE BOARD OF HEALTH, }  
JACKSON, MISS., October 31, 1899.

Whereas, On account of frost and the lateness of the season we believe that Mississippi has become non-infectible territory, therefore, order of this Board bearing date of September 7th quarantining Key West and Miami, Florida, and order of September 8th quarantining Mississippi City, and order of September 10 and subsequent ones, quarantining infected localities in Jackson, and order of September 11th, quarantining New Orleans, are hereby repealed, except to household goods from infected points.

This order to take effect at 12 o'clock midnight, October 31st.

J. F. HUNTER,  
Secretary State Board of Health.

Jackson, Miss., November 14, 1899.

Board met for the purpose of examining applicants for license to practice medicine.

Present, Drs Trimble, Gant, Gully, Haralson, Murry, Dunn and Hunter.

The following rules for conducting the examination were adopted:

1. The statute of the State of Mississippi requires of applicants to practice medicine an examination on the following branches: Anatomy, Physiology, Chemistry, Obstetrics, Surgery, Materia Medica, Hygiene and Pathology.

2. There shall be given eight questions on each of the above branches.

3. The questions on each branch shall be given the applicant at the beginning of the examination and the applicant shall have until 10 o'clock p. m. of the day given to answer them.

4. No applicant shall withdraw himself from the presence of the examiners during his examination without permission. For cause an applicant may withdraw temporarily, but shall be accompanied in such retirement by a member of the examining board.

5. No applicant shall communicate in any way with any other applicant nor have books or helps of any kind.

6. A correct set of answers to the questions propounded on a subject shall entitle the applicant to the full mark for that subject, viz: 100 points, each full and correct answer rating 12½ points. Partial or imperfect answers shall be rated by the examiners in accordance with their degree of fullness and correctness.

7. A general average of not less than 75 of a possible 100