

Title **Report on vaccination in Rohilcund, Kumaon and Gurhwal
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ART. V.**REPORT ON VACCINATION IN ROHILCUND, KUMAON AND GURHWAL.**

Report on Vaccination
in Rohilcund, Kumaon, and
Gurhwal.

BY DR. F. PEARSON, *Assistant Surgeon,*

Superintendent of Vaccination in Rohilcund, Kumaon, and Gurhwal.

I HAVE the honor to submit, for the information of His Honor the Lieutenant Governor, North Western Provinces, my Annual Report for the year 1861-62:—

Mahamurree Plague.—I am happy to say that during the past year there has been no outbreak of the disease, in either Kumaon or Gurhwal. I unhesitatingly attribute the immunity to the continued perseverance in sanitary measures. These measures have been fully described in former Reports; they consist mainly in the compulsory exclusion of the cattle from the dwelling-houses in the villages to sheds erected outside. Notwithstanding, however, the manifest advantages accruing to the people—apparent in the greater comfort of cleanliness of their homes and freedom from sickness—they yet cling with strange pertinacity to their old ways, and yield only in obedience to the law. In conversation a few days ago with a high official from the Court of Nepaul, he informed me that Mahamurree was quite unknown in his country, and that, with the exception of its *not* being the custom to house the cattle inside the villages, the habits of the people and character of the climate in no way differed from those of Kumaon and Gurhwal. This corroborative testimony to the right diversion of our efforts for the abolition of plague should confirm us in our course, however temporarily distasteful to the people, feeling assured that eventually the humane intentions of Government will be understood and felt.

Gurhwal Pilgrim Dispensaries.—A full history of these Institutions was given in my last Annual Report, and it is therefore unnecessary again to allude to them, beyond stating that their working has been satisfactory during the past year. The parent Dispensary at Sreenuggur is under the charge of a Sub-Assistant Surgeon, and from this circumstance alone it will always command popularity and enjoy the confidence of the people, for the benefits arising from scientific treatment of disease and surgical skill become rapidly known, and all classes learn to recognize and appreciate them. The Branch Dispensaries (six in number) in Gurhwal, as elsewhere, are in charge of Native Doctors only. As a general rule, I consider all Branch Dispensaries (unless under constant skilled supervision) of very doubtful utility, when compared with the expense incurred. The absence of surgical knowledge, and consequent inability of the Native Doctors to operate, deprives these Institutions of the usefulness and reputation they might otherwise enjoy amongst the Hill people. The natives are slow to avail themselves of *medical* treatment only, evincing a strong disinclination to leave their own houses and the nursing they can there receive to undergo a protracted stay in comfortless wards under strangers' hands. This feeling is particularly strong with the Hill population, and the benefits consequently conferred by the Branch Dispensaries are less in this respect than could be wished. But viewing these Institutions in the light in which they should be regarded—in fact, for the purposes for which they were built, viz., the relief of pilgrims—they are an undoubted success, and I believe are the cause of saving a vast number of lives annually, for it is into these wayside asylums that the weary pilgrim steps to rest awhile his tired limbs and recruit his exhausted frame ere prosecuting his further jour-

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ney. Most of their ailments are the result of fatigue and poor food: in these homes they find the rest and care they stand so much in need of.

Vaccination in Rohileund.—The order for concentrating the whole strength of the Rohileund Vaccine Establishment (34 Vaccinators, two Native Superintendents, and one Deputy Superintendent), upon the two Zillahs of Bijnore and Moradabad was carried out this season: and I feel confident that the wisdom of the change will be apparent ere three or four more years have elapsed. The fact of several thousands of persons being annually successfully protected by Vaccination must make an impression upon the ravages of small-pox, and convince the Natives of the power of the English remedy. When once the apathy of the Native and his disbelief in its efficacy are broken, the present expenses and difficulties of its introduction will cease. Much has already been accomplished in this way; for even at the present time, notwithstanding all our disadvantages of being able to work only during the cold months, and then chiefly amongst unwilling subjects, the rate per head for each successful case is somewhat under one shilling, a sum considerably lower than the cost charge per head in England. The numbers vaccinated in the Zillahs of Bijnore and Moradabad, during the past season, are given in the Return below:—

Successful.	Unsuccessful.	Doubtful.	Result unknown.	TOTAL.
17,761	7,274	2,969	3,859	31,863

The large percentage of unsuccessful cases (nearly one-third) is a source of much regret, but one I fear not likely to be ever materially diminished, for the unpreventible (under present circumstances) exposure of the bare arms of the young naked urchins operated upon to the glare of the sun, dust, flies, and every other possible conceivable source of injury, contributes to this unfortunate result. During my tour through the district, I distributed a large number of my Vaccine Pamphlets, and took every opportunity of securing the aid of influential Natives in the progress of Vaccination. It will take time to sweep away the ignorance and apathy that now so largely prevail regarding it. The Returns submitted may, I feel, be relied on as to their accuracy: the strictest supervision in this matter is exercised to the system pursued in such as to render detection of falsification absolutely certain. Moreover, all motives for falsifying returns have been removed by judging each Vaccinator's work only by the amount of Vaccine crusts supplied. Here is no source of error as to a man's performances, for he cannot manufacture good crusts, except by good vaccination. To the most successful Vaccinators (those who have supplied the largest number of good crusts) substantial prizes are given; the incapable are dismissed. Upon no other system can Vaccination ever be carried out with confidence as to its results. I say this after an experience of ten years. The number of operations performed by each Vaccinator has averaged nearly 250 per mensem: a fair average under present circumstances.

Vaccination in Kumaon and Gurhwal.—The six Vaccinators allowed for Kumaon, in the place of the three Native Superintendents reduced on the Rohileund establishment, were posted out to their several Divisions at the beginning of the season; and, with the four Vaccinators already attached to Gurhwal, these two Provinces

became fully provided for as to their Vaccine requirements. The numbers Vaccinated are given in the Return below :—

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Successful.	Unsuccessful.	Doubtful.	Result unknown.	TOTAL.
12,907	1,447	692	331	15,377

Comparing this Return with that of Rohileund, it will be observed how great is the difference in the percentage of successful cases, showing the favorable effect of the colder climate, not only, I believe, upon the operation of the *virus* itself, but also in its necessitating the wearing of clothes, and so protecting the vesicle on the arm from the various injuries it is exposed to on Plain's subjects. The number of operations performed by each Vaccinator is about the same as on the Plains, viz., 250 per mensem. In the Hills it is hardly possible to do more; for the villages are small and widely scattered. In the Plains, however, a larger number should hereafter be attained.

There has been a very material increase in the supplies of Vaccine *virus* distributed from the Hill Depot during the past season, upwards of 12,000 crusts, besides points and glasses, having been sent to the North Western Provinces, Oudh, and Bengal. At no previous period have such constant demands been made upon it. Every call has, I am happy to say, been abundantly responded to; and with a few exceptions, the *virus* sent has been acknowledged as of excellent quality and vigor. The exceptions alluded to were unmistakably the result of the operator's want of knowledge as to the mode of manipulating the crust. To avoid a repetition of any mischances of the same kind, I purpose next season pursuing the plan of "capillary tubes," as recommended by Dr. Husband, of Edinburgh: it being undoubtedly easier of application, and therefore less liable to failure than the crust solution.

I have, &c.

F. PEARSON, Asst. Surgeon,

Supdt. of Vaccination in Rohileund, Kumaon, and Gurhwal.