Annual report on the health, sanitary condition, etc., etc., of the Parish of Saint Leonard, Shoreditch for the year 1893.

Contributors

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ANNUAL REPORT

ON THE

HEALTH, SANITARY CONDITION,

ETC., ETC.,

OF THE

Parish of Saint Leonard, Shoreditch,

FOR THE YEAR 1893,

BY

LEWIS T. FRASER BRYETT, M.D. (LOND.), D.P.H.,

Medical Officer of Health;

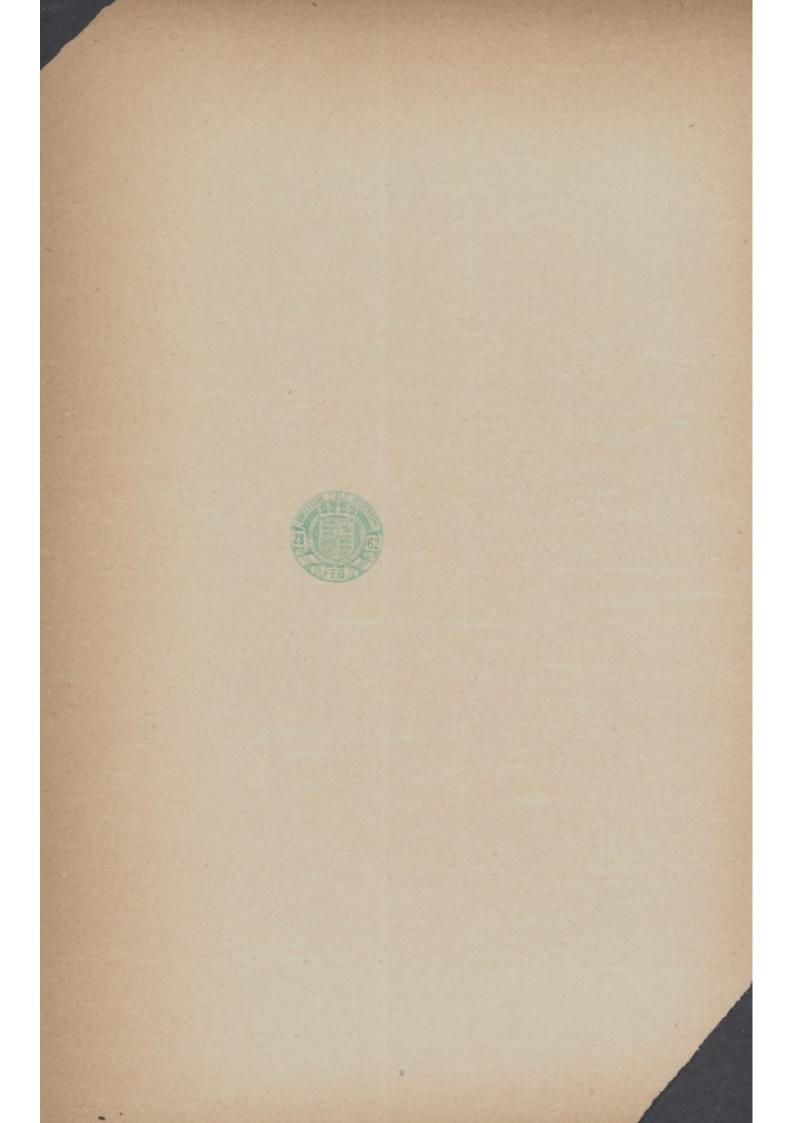
DR. THOMAS STEPHENSON,

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The Vestry of the Parish of St. Leonard, Shoreditch,

REPORT OF THE MEDICAL OFFICER OF HEALTH.

PUBLIC HEALTH DEPARTMENT,

January, 1894.

To the Vestry of the Parish of St. Leonard, Shoreditch. Gentlemen,

I beg to present the report on the public health, sanitary condition, and vital statistics, of the parish, for the year ending December 31st, 1893, during which period I have had the honour of performing the duties of Medical Officer of Health for the parish.

The parish of St. Leonard, Shoreditch, has an extent of 648 acres. It is irregularly triangular in shape, bounded on the north and north-east by Hackney, on the north-west by Islington, on the west by St. Luke's, on the south by the City, and on the east by Bethnal Green, all very densely populated parishes. Generally, the district is flat and lies from 20 to 30 feet above the sea-level. The soil is gravel, varying in depth and overlying the London clay, which is met with from 15 to 20 feet below the surface.

POPULATION.

I estimate the p	opulation as follows :-	_
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The Parish		 	122,420
Shoreditch South		 	19,890
Hoxton New Town		 	28,280
Hoxton Old Town		 	28,850
Haggerston		 	45,400

The following table, which is taken from the last census reports, compares the numbers of inhabited houses and the populations of the different wards of the parish in 1891 with those in 1881. The census population includes the inhabitants of the Holborn Workhouse, which is situate in this parish.

Ward.	Inhabited Houses. 1881.	Population.	Inhabited Houses, 1891,	Population.	Rated Householders
Moorfield Ward Church ,, Hoxton ,, Wenlock ,, Whitmore ,, Kingsland ,, Haggerston ,, Acton ,,	1,290 2,998 2,223 1,768 2,126 1,613 1,545 1,593	9,492 23,273 21,120 15,705 19,996 12,850 11,772 12,383	770 24 21 2,327 1,604 2,061 1,575 1,417 1,593	8,165 22,872 21,839 14,775 19,739 12,647 11,373 12,599	1,832 3,897 2,764 1,838 2,506 1,685 1,582 1,797
Shoreditch	15,156	126,591	13,768	124,009	17,901

BIRTHS.

The number of births registered in this parish during the year was 4,446. Included in this number, are those which took place in the Holborn Workhouse, the mothers not belonging to the parish. Deducting these, which numbered 88, the birth-rate was 35.5 per 1,000 living, that of London being 31.0. The birth-rate of Shoreditch for last year was 35.7 per 1,000, and that of London 30.9. The births were distributed thus:—

Sub-district.	Males.	Females.	Total.
Shoreditch South	273	254	527
Hoxton New Town	576	552	1,128
Hoxton Old Town	510	489	999
Haggerston	892	900	1,792
Totals	2,251	2,195	4,446

In the Haggerston division are included 73 births which took place in the Shoreditch Workhouse Infirmary.

MARRIAGES.

The Superintendent Registrar informs me that 970 marriages were registered within the parish during the year ending 31st December, 1893, the rate being 7.9 per 1,000 population. Last year, the number of marriages was 1,036 or 8.4 per 1,000.

DEATHS.

The total deaths of parishioners, inclusive of those occurring in other parts of London, amounted to 3,146. The numbers during the previous two years were 2,828 in 1892 and 3,042 in 1891.

The corrected deaths of residents were distributed thus:-

District.	Males.	Females.	Total.
Shoreditch South	211	188	399
Hoxton New Town	393	348	741
Hoxton Old Town	377	342	719
Haggerston	674	613	1,287
Totals	1,655	1,491	3,146

The corrected death-rate was 25.7 per 1,000 inhabitants for the whole district. The corresponding rates for the last two years were 23.09 in 1892 and 24.8 in 1891. The London death-rate was 21.3 per 1,000. Of the East-end sanitary districts, Mile End has the lowest death-rate, viz., 22 per 1000, whilst in St. George's-in-the-East 31 in every 1000 inhabitants died; in Limehouse, the rate was 28; in Poplar, 23; in Bethnal Green and Whitechapel, 25; and in St. Luke's, 29.8.

During the first two weeks of the year, influenza and diseases of the chest caused a high death rate. In the second week in January it was 35 per 1,000. In June, July, August and September, diarrhoea was the principal cause of the high death-rate. Influenza and chest disease again, during the last two months of the year, sent the death-rate up.

In Table III, the rates for London and Shoreditch, with its sub-districts, have been worked out so that comparisons may be readily made.

The following table gives the deaths in public institutions:—

			Residents.	Non-residents.	Total.
Holborn Infirmary and W	Vorkho	use	- 1	259	260
Shoreditch ,, ,,	,,		415	9	424
Hoxton House Asylum			1	60	61
North Eastern Hospital			21	89	110
Convent Hospital			1	6	7
Totals	***		439	423	862

In addition to these, there was one non-resident killed on the railway, and two residents drowned in the Regent's Canal.

In public institutions outside the district, there died 384 residents in the parish, of whom 225 were males and 159 females.

Eleven persons, not belonging to the district, died in the parish, elsewhere than in public institutions.

Inquests were held on 273 bodies.

Of the total deaths, 809 were of infants under one year or 25.7 per cent. of the whole deaths, as against 25.6 per cent. in 1892, and 26.36 per cent. in 1891. The mortality amongst infants under one year of age was 186 per 1,000 births. The infant mortality last year was 169. For London, the mortality amongst infants was 164 per 1,000 births.

The chief causes of death at this age were: debility at birth and premature birth, 150; diarrheea and enteric fever, 151; disease of the respiratory organs, 144; tubercular diseases, 57; convulsions and teething, 55; causes not specified or ill-defined, 84. Suffocation in bed with their parents was the cause of 30 deaths.

Between the ages of 1 and 5 years, 591 deaths occurred, the chief causes being diseases of the respiratory organs (bronchitis and inflammation of the lungs), 140; measles, 96; diptheria, 96; and whooping cough, 44.

There were, altogether, under the age of 5 years, 1,400 deaths or 44.5 per cent. of the total, as against 1,264 in 1892, and 1,385 in 1891, the percentage being for these two years 44.6 and 45.5 respectively.

Between the ages of 5 and 15 years, 165 deaths took place. Of these, the largest number, 34, was due to diphtheria; from 15—25 there were 126 deaths, 36 of which were due to consumption; 183 occurred between 25 and 35 years, more than a third of which were caused by consumption. Between 35 and 45, there were 270 deaths, 72 of these were due to consumption and 42 to inflammation of the lungs. 266 deaths were, between the ages 45 and 55, diseases of the respiratory organs; heart disease, Brights disease, apoplexy, cancer and consumption, were the chief causes. There were 96 deaths in the 55—60 age period. Between 60 and 70, 336 persons died, the chief causes being respiratory diseases, heart disease, cancer, Brights disease and old age. In the 70—85 age period there died 268 persons, apoplexy, chest disease and old age carrying off the majority, and over 85 years of age 36 persons died, 22 of them from old age.

In Tables I and II, which are appended, the deaths under the headings of the different diseases are given. It will be seen that 1,048 deaths were from Zymotic diseases, that is to say, about one-third the total deaths. Of these, 266 were from consumption. The various diseases of the respiratory organs caused 758 deaths. Heart disease accounted for 154; premature birth and debility at birth, 150; old age, 103; and apoplexy, 125 deaths.

Cancer was the cause of 67 deaths. Of these, 40 were females and 27 males. 102 deaths were due to violence, this number includes 14, which were suicidal.

ZYMOTIC DISEASES.

Infectious disease has been very prevalent during the year all over London. In Shoreditch, influenza prevailed for a few weeks in the beginning and also during the last two or three months of the year. Small-pox was most prevalent in the spring and early summer. Diarrhœal diseases caused a good deal of sickness in the summer. Scarlet fever and Diphtheria, although prevalent all the year, were markedly so in the autumn, as was also the case with Erysipelas.

The number of notifications of cases of infectious diseases received during the year was 1,987.* The numbers in 1890, 1891 and 1892 were 1,158, 862 and 1,478 respectively. The numbers of cases notified during the four quarters of the year, together with the numbers removed to hospital, are set forth in the following table:—

^{*} There were 17 notifications received, which were subsequently withdrawn; these are not included in this number.

Disease.	First Quarter.	Second Quarter.	Third Quarter.	Fourth Quarter.	Total.	Deaths.
Small Pox Scarlet Fever Diphtheria & Membranous Croup Cholera Enteric Fever Continued Fever Puerperal Fever Erysipelas Totals Removed to Hospital	63 - 12 - 3	10 198 120 — 29 — 2 55 414 165 39.8%	6 344 180 3 47 3 2 96 681 168 24.6%	2 322 150 1 23 1 2 124 625	25 1,007 513 4 111 4 8 315 1,987 588 29.0%	3 38 149 3 17 1 5 15

The notifications received were equal to 16.2 per 1,000 of the population. For the year 1892 the rate was 12 per 1,000. The number of cases of Small Pox and Puerperal Fever has diminished, but there has been a great increase in the number of Scarlet Fever, Diphtheria, and Erysipelas cases notified. It will be observed that during the third and fourth quarters of the year only 24.6% and 19.6% respectively, of the notified cases were removed. This was due to the authorities of the Metropolitan Asylums Board being unable to receive them into their hospitals, from want of sufficient accommodation. The Fees paid to practitioners for notification certificates of infectious diseases during the year 1893, amounted to £231 12s. 6d.

The infectious diseases which are required to be notified by the Public Health (London) Act, 1891, are as follows:—Small-pox, Cholera, Diphtheria, Membranous Croup, Erysipelas, the disease known as Scarlatina or Scarlet Fever, and the fevers known by any of the following names—Typhus, Typhoid, Enteric, Relapsing, Continued, or Puerperal.

METROPOLITAN ASYLUMS BOARD.

Owing to the increasing disposition on the part of the public to make use of their hospitals, together with the further demands on the resources of the Managers consequent on compulsory notification, the accommodation for fever and diphtheria patients was insufficient to meet the demands made upon it during the latter part of the year. The subjoined is abstracted from the report of the Chairman of the Metropolitan Asylums Board (Sir E. H. Galsworthy) the Statistical Committee, and the Ambulance Committee.

The accommodation in the fever hospitals, for the second time in the history of the Board, proved insufficient to meet the usual autumnal increase of scarlet fever, and the Managers were compelled for some months, to limit

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the admission of patients into their hospitals to the vacancies caused by discharges and deaths.

The task of coping with this autumnal increase of fever was rendered much more difficult, by the number of beds at the Managers' disposal in 1892 being decreased during 1893 to the extent of 1,000, firstly by the demolition of certain wooden huts at the Eastern and North-Western Hospitals; secondly, by the reduction, under medical advice, of beds at the Eastern, North-Eastern, and Western Hospitals; and thirdly, by the impossibility of making use (as in the previous year) of the Upper Gore Farm Hospital (for convalescent scarlet fever cases) in consequence of its being required for smallpox.

This reduction was to some extent met, later on in the year, by the erection of a temporary hospital at Tooting Graveney.

It has been computed, that when the number of scarlet fever cases was at its maximum, at least 6,000 beds should have been at the disposal of the Managers, or more than double the numbers they actually had at their command.

The introduction of compulsory notification, and the growing popularity of the Board's hospitals, have increased the demands for admission to such an extent, that whereas in 1890 the Managers admitted 42 per cent of the total number of scarlet fever cases notified in London, in 1892 the percentage had risen to 48, and in the first four months of 1893, to 54 per cent.

It is, however, satisfactory to hear that at no very distant day, there will exist accommodation for about 5,500 beds, the erection of 3 new hospitals for acute cases, and the establishment of one or more convalescent hospitals being now under consideration.

The Board contemplate erecting permanent hospitals at Tooting Graveney, Hither Green, and Kidbrooke (Shooter's Hill Road).

The absence of sufficient accommodation in the Board's hospitals for diphtheria patients has been felt more or less during the whole year. Although the great majority of cases for which application for admission was made to the Board were received, delays, of from one to six days occurred in many cases, and oftentime attended with very disastrous results.

Considering the yearly increasing number of cases of diphtheria notified in the Metropolis, there can be no doubt that ample provision should be made to meet the increasing demand for accommodation in the hospitals, of the Board.

ACCOMMODATION FOR FEVER AND DIPHTHERIA PATIENTS IN 1893.

Eastern Hospital			***			356	Beds.
North Eastern Hospital)		(400	"
North Western Hospital					1	384	
Western Hospital			Ac	ute Cas	ses{	366	
South Western Hospital	***					400	
	· · ·)		(462	,.
Fountain Hospital (Tooting	Grave	eney)	'		,		
						2,774	
Northern Hospital (for conv	alesce	nt case	s)			680	
				Total		3,454	

During 1893, the number of cases of infectious disease notified under the Public Health (London) Act, 1891, amounted to 67,485, as against 46,074 in 1892, 26,522 in 1891, and 29,795 in 1890. Of these 67,485 cases, 36,901 were returned as scarlet fever, 3,663 as enteric fever, 22 as typhus, 13,026 as diphtheria, and 2,813 as small pox: the balance being made up of 11,060 cases of other diseases notified under the Act, but not admissible into the Board's hospitals.

The number of patients suffering from fever, diphtheria, and small pox who were admitted into the several Hospitals of the Board, and the deaths thereat during 1893 are as follows:—

			Admissions.	Deaths.
Scarlet Fever		 	 14,548	901
Enteric (Typhoid))	 	 544	110
Typhus		 	 2	1
Diphtheria		 	 2,848	865
Small Pox		 	 2,376	180

It will be observed how heavy was the mortality from diphtheria,—30.3 per cent of the cases terminated fatally. This is slightly higher (about 1 per cent.) than the case-mortality in Shoreditch. The mortality from typhoid fever, which is nearly 20 per cent. of the cases, is also high.

Small Pox.—This disease, which had been prevailing in different parts of the country, especially in the manufacturing towns in the North and Midlands during 1892, showed its presence in London in the winter of 1892-93. Its introduction and dissemination within the Metropolis during the early part of the year 1893, were mainly due to persons of the vagrant class, who entered London from places in the provinces, where the disease was prevalent. The number of cases notified increased from week to week and attained a maximum in May.

There were 2,557 cases of small pox removed from their homes during the year. The actual number of cases treated in the hospitals of the Asylums Board amounted to 2,376, and the deaths numbered 180.

The number of patients admitted to the small pox hospitals was 98 in January, 153 in February, 251 in March, 440 in April, and 537 in May. Subsequently, the numbers declined from 327 in June, to 215 in July, 99 in August, 70 in September, and 77 in October. In November and December, there were 128 and 89 admissions respectively.

In Shoreditch, 23 cases of small pox occurred. So far as could be ascertained, in only 3 instances was the disease contracted in the parish. Two cases were notified which were not regarded by the hospital authorities as small pox.

The following is a brief summary of the cases of small pox occurring in the parish during the year 1893:—

SUMMARY OF CASES OF SMALL POX occurring in the PARISH OF ST. LEONARD, SHOREDITCH, DURING THE YEAR 1893.

No.of Case.		Sex.	Age.	Occupation.	Date of Notifica- tion.	Probable Beginning of Illness.	Probable Source of Infection.	As to Vaccination.	Re- sult.	Remarks.
1. 2.	Shoreditch Infirmary	M. M.		Tramp Infirmary Attendant	17 Jan. 22 ,,	14 Jan.	Tramping Midland Counties Infirmary Attendant—Bathing, F.G. No. 1	Unknown	R. R.	
3.	Harman Street	M.	17		16 Feb.	12 Feb.		Unvaccinated	D.	Confluent.
4.	Huntingdon Street	M.	27	Cellarman	22 ,,	17 ,,	toti, by letter	Infancy	R.	Discrete.
5.	Witham Street	M.	39	Excavator	23 ,,	19 ,,	Came from Grays, Essex, 16th		R.	
6. 7.	Lynedoch Street	M. M.		Printer, out of work Fish Trade	17 Mar. 1 April		February, 1893	Infancy—1 cicatrix , (neglected to be re-vaccinated)	D.	Confluent. Discrete.
8.	Shoreditch Infirmary	М.	40	Tramp	4 ,,	2 April		,, 4 cicatrices	R.	,,
9.	Victoria Chambers	M.	18	Postman	10 ,,	6 ,,	Not known	,, 4 good	R.	" 2 or 3 spots on face & arms.
10.	Shepherdess Walk	F.	28	Feather Curler	10 ,,	3 ,,	,	" 1.cicatrix	R.	Confluent.
11.	Goldsmith Row	F.	14	At Home	3 May	28 ,,	Visited friends, Islington, suffer-	,,	R.	Discrete.
12.	Essex Street	F.	30	"	15 ,,	12 May	at Wood Green—suffering with	,,	R.	,,
13.	East Road	M.	26	Watchmaker	16 ,,	11 ,,	disease stated to be Influenza In daily work at Leicester Square	" 4 or 5 cicatrices	R.	**
14.	Gladstone Buildings	M.	30	(Out of Work)	17 ,,	8 ,,		Unvaccinated	R	Confluent.
15,	Pitfield Street	M.	37	Sanitary Inspector	3 June	28 ,,	Infected by No. 14	Infancy not re-vac-		Discrete(few spots
16.	Barton Court	M.	13	At Home	7 ,,	31 ,,	Not known	Said to be in Infancy— no marks		,,
17. 18. 19.	Branch Place Hay Street East Road	F. M.	6	At School	14 ,,	12 ,,	,,	Unvaccinated Infancy—2 large cica-	R. R.	,,
20.	Ironmongers Alms- houses	M.	23	Assistant — Civil Service Supply	16 Aug.	11 Aug.	,, ., ., ., .,	trices		Discrete.
21.	Ely Place	М.	10	Association At School	4 Sept.	29 ,,	Said to have been to Hampstead on an Excursion about a fort- night previous	Said to have been vac- cinated—no marks	D.	,, (celluli- tis of neck).
22.	,, ,,	F.	13	At Home	16 ,,	12 Sept.	Sister to No. 21, by whom she was infected	Unvaccinated	R.	Discrete.
23.	Tuilerie Street	M.	14	At School	20 ,,	14 ,,	intected	"	R.	"

In addition to these, two cases were notified and removed, but were returned by the Asylums Board Authorities as not suffering from Small Pox. N.B.—R. and D. in Column 9 signifies Recovered and Died.

Scarlet Fever.—This disease has been very prevalent in the metropolis during the year. The type, however, has been mild and the mortality not great. In Shoreditch, 1,007 cases were notified and 38 deaths were registered. The case-mortality was therefore 3.7 per cent. and the death-rate per 1,000 was 0.31. It will be observed from Table I. that 26 of the 38 deaths were of children under five years of age, and that, with the exception of four, the deaths were all amongst persons under the age of 15 years.

Children are by far the most frequent sufferers from scarlet fever and the mortality is greatest amongst those attacked who are under 10 years of age. The immunity of adults from this disease increases with increasing age. The mild character of the cases in many instances, has, I believe, contributed very materially to the spread of infection. The symptoms not being sufficiently alarming to raise the necessity of calling in a medical man, many cases have escaped observation or have been regarded as ordinary sore throats. The deficiency of beds for fever patients at the command of the Metropolitan Asylums Board has already been remarked upon. It lasted for several months, during which time the removals of numbers of patients had to be put off from day to day, so that ultimately many remained at home until the termination of their illness. It is needless to point out that where the accommodation for the sick and healthy is limited to two or three rooms, the likelihood of the disease affecting the other susceptible members of the family is very great indeed. There is no doubt that this was one of the principal reasons why the disease obtained such widespread prevalence during the latter part of the year.

The greatest number of cases notified in Shoreditch in any one week, was during that ending September 16th, viz.:—50. In the week ending October 28th, there were nearly as many.

The prevalence of this disease is favoured by bad hygienic conditions, such as air vitiated by sewer gas, dampness of dwellings, a polluted subsoil and imperfect ventilation. Thorough ventilation is of the utmost importance where children are gathered together as in schools.

Scarlet fever is infectious from the very commencement of the attack, but it becomes more liable to spread during the period of desquamation, that is to say, when the patient is peeling. The little pieces of skin, which come off the patient, cling to garments, curtains, bedding, &c., and the poison contained in them has been known to retain its vitality for many months. The utmost care is requisite during the stage of peeling, both for the sake of the patient and for the sake of the community. Inasmuch as peeling may continue for very variable lengths of time, extending over from two or three weeks to two or three months, and so long as a patient is peeling, he must be regarded as infectious. It is obvious how difficult becomes the question of isolation of scarlet fever cases in the homes of the poor.

Diphtheria.—This disease has been very prevalent in Shoreditch, and in London generally during the year, and has claimed many victims. To describe it briefly, diptheria is a specific infectious disease, which is characterised by the presence of what is known as "false membranes" in the throat, nose and elsewhere, and by constitutional symptoms, which are more or less severe. The intensity of the local mischief is, however, by no means, always in proportion to the severity of the constitutional symptoms. It is always to be met with in large cities, in fact, it may be said to be endemic in them, but at times, as during the present year, becomes very prevalent. This increasing prevalence in large towns and cities has been now observed for some years past, and this, notwithstanding the great improvements which have been made in sanitation during recent years. The popular impression is that diphtheria is mainly caused by effluvia from faulty drains. That there is a relation between this disease and defective drains, there is no doubt, but it has not yet been satisfactorily determined. It has been suggested that where the drainage is faulty, there is produced a weakened condition of the throat, which affords the germ of diphtheria an opportunity of growing and producing the disease. When once a case has arisen, however, I do not think too much stress can be laid upon the fact that it is extremely infectious, especially amongst children, who are, by far, the most frequent sufferers from this complaint. At least 80 per cent of deaths from this disease occur amongst children below 10 years of age. Amongst adults, those who are in attendance on the sick, are most liable to suffer from it, particularly mothers, nurses and medical men.

The poison which produces this disease shews great tenacity and clings to clothing, bedding, and the room in which the patient has been confined for a considerable period.

In Shoreditch, during the year 1893, there were notified as diphtheria 513 cases of throat illness. Of these, 149 or 29.0 per cent. terminated fatally. Under the age of five years, 181 cases occurred with a mortality of 111 or 61.3 per cent. Of the remaining 332 cases, 38 or 11.4 per cent. died. On referring to Table II, it will be seen that all the deaths, with the exception of four, were amongst children below the age of 15 years.

DISTRIBUTION OF CASES AND DEATHS.

	Number of Cases of Diphtheria	Population.	Attack Rate per 1,000 In- habitants.	Deaths	Death Rate per 1,000.	* Case Mortality per Cent.	Birth Rate	No. of Public Ele- mentary Schools.
Shoreditch South .	47	19,890	2.3	14	0.7	29.7	36.4	4
Hoxton New Town .	. 102	28,280	3.4	36	1.2	35.6	39.8	9
Hoxton Old Town .	. 122	28,850	4.2	28	0.9	22.9	34.6	6
Haggerston	. 242	45,400	5.3	71	1.4	29.3	39.2	13

^{*} Case Mortality = the percentage of attacks terminating fatally.

From this table, it will be seen that Haggerston suffered most severely, and Shoreditch South least severely from the disease. The proportion of cases of diphtheria to the number of people dwelling in the several sub-districts being in South Shoreditch, 1 to 316.8; New Town, 1 to 277.2; Old Town, 1 to 236.4; and Haggerston, 1 to 187.6.

The diminished incidence of this disease in Shoreditch South, as compared with that of the other three sub-districts, is, I think, largely to be accounted for by the fact that there are not so many children in proportion in the former sub-district as in the latter. South Shoreditch contains a very large number of factories and workshops, in which are employed hands, who many of them do not live in the district. The death-rate per 1,000 was highest in Haggerston, and least in Shoreditch, being 1.4 and 0.7 respectively. The attack-rate is, in Haggerston, also more than double that in Shoreditch South. During the months of June and July I visited and inspected 34 houses in Acton Ward, in the Haggerston Sub-district, in which, altogether, 45 cases of diptheria had occurred since the beginning of the year. I also learned that during this period in these same houses there had occurred 14 cases of throat illness, which had not been notified as diphtheria.

The houses in Acton Ward are not so thickly packed together as in other parts of the parish, and have good open spaces, both in front and behind, admitting of the circulation of plenty of fresh air. There were defects in the drainage of some of the houses visited, but by no means in all. The condition of the sewers in the neighbourhood, however, is not satisfactory, and the Vestry has under consideration the advisability of constructing new ones. In some instances they are only a few feet below the surface of the road, which renders it difficult to ensure a proper and efficient fall for the house drains. Complaints have also been made from time to time as to the smells arising from the road gullies, and in a few cases the occurrence of diphtheria in neighbouring dwellings has been attributed to this cause by the friends of the sufferers.

The houses inspected all shewed more or less evidence of dampness in the lower walls. Nothing definite, pointing to illness amongst domestic animals, could be obtained. My enquiries were made, especially with regard to throat illness amongst cats.

There was no evidence pointing to any particular milk supply as being the source of infection.

As to the schools attended by those who suffered from diphtheria, they were as follows:—Haggerston Road Board School, St. Paul's, Broke Road, Scawfell Street Board School, St. Mary's Church School, and the Canal Road Board School. In several instances no school was attended, but in many cases the disease first attacked a child who was attending school, and who became, apparently, the means of introducing the disease in the family.

There is no doubt that diphtheria may be so mild in its character as to give rise to no suspicion, as to its real nature. The parents of the sufferer simply regard the case as one of slight "sore throat," which does not require any medical advice, and after a few days' absence, the patient having apparently recovered is allowed to return to school. Such a case may remain the source of infection for many days.

I do not think that too much weight can be attached to the importance of always paying attention to sore throats, especially to those occurring in young children.

Diarrhæal Diseases caused 170 deaths, as against 93 in 1892. 125 were in children under 1 year, and 29 between the ages of 1 and 5 years. Summer diarrhæa was very prevalent during the prolonged hot and dry weather of July, August, and September. This disease is caused by germs which are introduced into the system by means of food and drink. Dampness of the subsoil, defective drains, and emanations from sewers, sewage pollution of the ground in the neighbourhood of dwellings, together with hot, dry weather, are conditions favourable to the growth and development of these particular germs. Existing in the dust from the ground, they settle on the surface of milk, water and food, and thus reach the intestines, there to produce in susceptible individuals, those changes which result in diarrhæa. Hence the importance of carefully attending to the preparation of all food and drink consumed during the summer months. In view of this, I drew up certain rules for the prevention of this complaint, which were distributed in the parish in the form of handbills. They were as follows:—

(1.)—Food.—All food should be kept in well ventilated and lighted cupboards, protected from dust and flies, and not exposed to any offensive smells.

All food should be thoroughly cooked.

It is very important to wash the hands before partaking of a meal.

Over-ripe or un-ripe fruit, tainted meat or fish, and stale vegetables, are specially to be avoided.

It is desirable to boil all water for drinking purposes.

Milk should be boiled immediately it is received into the house.

Particular attention ought to be paid to the boiling of the milk given to infants who are artificially fed, also to the cleanliness of the feeding bottles, which should always be scalded before use.

Feeding bottles without tubes are preferable to those which have them, as they are more easily cleansed.

(2.)—Ventilation.—It is of the utmost importance to allow as much fresh air as possible to circulate through the dwelling. The windows of every room in the house should be open for at least three or four hours every day, and at night if possible.

- (3.)—Defective Water Closets, or House Drainage, or Offensive Smells should be at once reported to the Sanitary Authority, at the Town Hall, Old Street, E.C.
- (4.)—House Refuse should be removed from premises at frequent intervals, and whilst awaiting removal should be kept in properly constructed dust bins. Complaints of non-removal should be at once addressed to the Scavenging Superintendent, 287, Kingsland Road.
- (5.)—General Health.—Attention should be paid to the general health, as neglect of it renders an individual much more liable to be attacked.
- Intemperance, in eating and drinking, by lowering the vitality, is a strong predisposing cause of this malady. In hot weather, any looseness of the bowels should have immediate attention and treatment.

Too much stress cannot be laid upon the boiling of milk before use, and it will be observed that 73 per cent. of the deaths from diarrhoea, were children under 12 months old, who are, or should be, at this age fed mainly upon this food.

Cholera.—Included amongst the deaths from diarrhoeal diseases are 3 which were registered as being due to cholera. Seven cases of cholera were notified; of these, on investigation, 5 were found to be cases of acute summer diarrhoea. In two cases, however, death ensued so rapidly, that grave suspicions were awakened as to the nature of the disease, and careful investigation and precautions were deemed necessary.

The first case was notified on August 19th, and died before the notification was received at the Town Hall. The history was as follows. The patient, a lad aged 10, living in Wimborne Street, was taken ill about 6 o'clock in the evening of the 18th August, with diarrhoea, vomiting, and cramps. He became collapsed during the night, and died at 9 o'clock next morning. A post-mortem examination was made by Dr. Tighe, in the presence of Dr. Horne, an Inspector from the Local Government Board, and myself. The contents of the stomach and portions of the viscera were reserved, and the coroner communicated with. The result of the inquest was that death was due to English cholera. Dr. Luff, Analyst to the Local Government Board, stated that he had found poison called ptomaines in the contents of the stomach, but whether they were introduced with food, or resulted from the decomposition of the stomach itself. after death, it was impossible to say. The enquiries made by Dr. Horne and myself failed to elicit any history of the lad having taken anything likely to have produced the symptoms exhibited, nor had he, so far as we could determine, been anywhere where he was likely to have been exposed to cholera infection.

The second case was notified on August 22nd. The patient, a young man aged 25, living in Singleton Street, was taken ill in the early hours of the morning of the 20th August, and died about 11.45 p.m. next day. The medical man who was called in some two hours before death, was of opinion that "death had resulted from cholera of some sort." Under the circumstances, I directed steps

to be taken to at once remove the body to the mortuary, and disinfect the room that had been occupied. A post-mortem examination was made by Dr. Dixon, in the presence of Dr. Horne and myself, and we came to the conclusion that death was due to acute gastro-enteritis, or inflammation of the stomach and intestines. A careful enquiry was afterwards made by Dr. Horne and myself into the antecedents of the deceased, and the history of the attack, but there was nothing to indicate that he had been exposed to cholera infection.

An enquiry was held, and a verdict of death from English cholera was given, in accordance with the medical evidence. It is to be regretted that no bacteriological examination were made in these cases.

There is no doubt that Asiatic cholera obtained a footing in this country towards the close of the summer. In August and September, at Grimsby, between 80 and 90 cases occurred, which were variously notified as infective diarrhœa, choleraic diarrhœa, or cholera. Only one was notified as Asiatic cholera. More than 25 per cent. of those affected, died. Cases also occurred at Leeds, Hull, Bradford, Cleethorpes, and other towns in Yorkshire. Some 16 or 17 cases were notified in London, four of which were undoubtedly Asiatic cholera, and cases were reported in many parts of the country.

Special precautions have been taken throughout the country with a view to preventing the introduction and spread of the disease. The utmost vigilance is exercised by the Port Sanitary Authorities in the inspection of ships from infected ports, and information is sent by the Port Medical Officers to the Medical Officers of Health of the places of destination to which passengers from infected ports are proceeding.

Measures have to be taken by the Sanitary Authority, for the prompt removal of any cases which may occur in its district, and for the provision of medical attendance and nursing.

With a view to this, the Shoreditch Board of Guardians is prepared to place at the disposal of the Metropolitan Asylums Board, a small isolated block containing two wards, capable of accommodating 5 male and 5 female patients in case of emergency.

Arrangements have been made by the Metropolitan Asylums Board with the authorities of the various London Hospitals and Infirmaries, for the setting apart of wards for cholera cases, if necessary.

That body has also prepared ambulances to be placed at certain points in the district, should the disease become prevalent. In Shoreditch, the places determined upon as being most suitable for this purpose are:—the Town Hall, the Holborn Union Workhouse, the Metropolitan Free Hospital, and the North Eastern Hospital for Children.

Provision has been made by the Vestry for the accommodation of the other members of a family in which the disease may have occurred, during the time their dwelling is being disinfected, and the Poor Law Medical Officers are prepared to keep their surgeries open day and night, for the treatment of anyone suffering from diarrhœa.

The simple directions which were issued for the prevention of diarrhea, also hold good in the case of cholera. In times when cholera is epidemic, a pure water supply is of the utmost importance, as wholesale outbreaks of this disease have been traced to contaminated water. The Hamburg epidemic, in August and September, 1892, when some 18,000 cases with 8,000 deaths resulted from drinking the cholera-contaminated water obtained from the Elbe, which had been imperfectly filtered, is an illustration of this importance.

Enteric Fever.—The number of cases of this disease notified was 111, an increase of 20 on the number for last year, the number of cases in the parish during the last four years being as follows:—

Year	1890.	1891.	1892.	1893.
	202	111	91	111

The number of deaths was 17, an increase of 5 on that of last year, the rate per 1,000 inhabitants being 0.12, that of London being 0.17.

The number of deaths per 100 cases notified was 15.3.

Outbreaks of enteric fever are often associated with contamination of the drinking water. The recent outbreak at Worthing was an example of the extent to which the disease may be conveyed by a contaminated water supply.

Erysipelas.—The number of cases of this disease notified shows a considerable increase over that of last year. In 1891, there were 137, in 1892, 243, and in 1893, 315.

Of these 315 cases, 15, or 4.7 per cent. terminated fatally. The death rate from this disease per 1,000 inhabitants, was 0.10.

There were 8 cases of puerperal fever notified, of which 5 terminated fatally, as against 6 deaths from this disease in 1892.

Measles and Whooping Cough.—There was an increase in the number of deaths from the former and a diminution in the number of deaths from the latter disease, as compared with the numbers last year.

Taken together, these diseases caused 8 more deaths this year than last. It will be seen from table A, that the vast majority of the deaths were in children below the age of 5 years. The death rate per 1000 persons was 1.04. or more than three times that of scarlatina. In a large proportion of the cases the supervention of chest disease, which is one of the dangerous complications

in measles, was the immediate cause of death; and so also with regard to whooping cough, bronchitis and pneumonia, complicating the cases, the causes of a fatal termination.

Influenza, with its complications was certified as the cause of death in 36 cases.

Tubercular disease.—There is shown a slight diminution in the number of deaths from this cause, as compared with last year. Of the 384 deaths, 266 were from phthisis or consumption. There is now no doubt that the disease is infectious, and that in the case of persons suffering from consumption of the lungs, special care should be exercised to prevent the material coughed up, which contains the germs of the disease, being a source of danger to others.

VACCINATION.

Mr. Waterer, the Vaccination Officer, has kindly supplied me with the numbers of persons vaccinated during the year 1893.

There were 2,750 primary vaccinations performed, as against 3,156 in 1892.

PARISH DISPENSARY.

I append a Table of the cases treated by the District Medical Officer, during the year, at the Parish Dispensary. (See Table IV.) Of some 5,353 patients, 1,495 were suffering from disease of the respiratory system (bronchitis, pneumonia, and pleurisy); 909 from diseases classed under the heading zymotic; 360 from rheumatic fever and rheumatism; 296 from digestive disorders; 192 from heart disease and disease of the circulatory system; and 119 from various forms of skin disease.

DISINFECTION.

In consequence of the number of infectious cases dealt with, the work of the disinfecting officers has been very heavy, particularly during the latter half of the year.

The following table shews the number of premises and articles disinfected during the year. The figures for 1891 and 1892 being placed alongside for comparison:—

		1891.	1892.	1893.
Number of premises		816	1,027	1,363
Total number of articles		9,630	10,867	11,829
Number of beds		833	1,157	1,313
,, pillows		1,602	1,801	2,186
,, palliasses		568	545	645
,. bolsters		504	559	767
,, other articles	***	6,123	6,758	6,918

In addition to those disinfected,—20 beds, 31 palliasses, 15 bolsters, 20 pillows, 1 pair of sheets, and 1 pair of blankets were destroyed and replaced with new ones.

The working of the disinfecting apparatus during the year has been satisfactory. Nearly 12,000 articles have been passed through it, and no damage to any of them reported to me by the disinfecting officer.

Three or four instances have been brought under my notice of infectious diseases again occurring in a family, within a short period of the return of a member of the family from a fever hospital. After careful investigation, I find it very difficult to eliminate the possibility of infection being introduced a second time into the same family from other outside sources.

In the particular instances referred to, there were intervals of some ten days or a fortnight between the return of the patients from the fever hospital and the occurrence of the fresh cases, and the children were attending school, so that it was quite possible that infection was from some other source.

DISINFECTANTS.

From the end of June to the end of November packets of disinfecting powder were given away on application to the clerk of the sanitary department. Altogether 5,040 half-lb. packets, or 1-ton 2½-cwt. of 'Sanitas' disinfecting powder were distributed to 4,930 applicants. Enquiry was made in each case as to the use for which the powder was intended, and insanitary conditions thus came under the notice of the department. The cost of the "Sanitas" powder distributed was £14 8s. 0d.

In addition to the general distribution of powder, there was used one 32-gallon cask of carbolic acid and 1-cwt. of loose "Sanitas" at a cost of £5. 16s. 0d.

These last were largely used for mortuary purposes, and in connection with special cases of infectious disease, where the drains required extra flushing, and the floors and wood-work of rooms cleansing and purifying.

THE SHELTER.

Under the Public Health (Lond.) Act, 1891, sect. 60 (4), the Sanitary Authority shall provide, free of charge, temporary shelter or house accommodation, with any necessary attendants, for the members of any family in which any dangerous infectious disease has appeared, who have been compelled to leave their dwellings, for the purpose of enabling such dwellings to be disinfected by the Sanitary Authority.

The necessity of making provision for such temporary accommodation is obvious. In order to meet this necessity, an 8-roomed house, situate at 18, Branch Place, was taken by the Vestry, at a rental of 18s. per week, and furnished with such articles as are likely to be required by any family who may be placed in temporary occupation. A caretaker and his wife were put in charge to look after the premises, air the rooms, bedding, &c., and to make ready for any persons whom it may be necessary to send there whilst their own dwellings are being disinfected.

Since August, 18, Branch Place has been used for the temporary accommodation of a family of seven, amongst whom a case of cholera had occurred; of a second family of seven, amongst whom two cases of small-pox had occurred; and of a father and two children, the remainder of the family, consisting of the mother and four children, having been removed to the hospital stricken with scarlatina.

The total cost of furnishing the house was just under £10.

MORTUARY.

During the year, 471 bodies were received into the mortuary, the numbers during the last five years were as follows:—

Year	1889.	1890.	1891.	1892.	1893.
	300	337	346	375	471

The bodies of 19 persons, who had died of infectious disease were removed to the mortuary by the Sanitary Authority.

The number of post-mortems made in the post-mortem room, attached to the mortuary, was 29.

In the autumn, the ventilation of the building was improved and the whole of the interior was thoroughly cleansed, limewashed and painted. The existing glass partition was extended up to the roof so as to make a small lobby of one end of the mortuary. This arrangement affords protection from infection of jurymen and others viewing bodies, as there is no necessity to go beyond the glass partition which shuts off the lobby from the rest of the mortuary.

These alterations were carried out at a cost of £32.

CUSTOMS AND INLAND REVENUE ACTS.

Under this act, 177 applications were made to me for certificates of the sanitary fitness of dwellings, whereby an abatement of the inhabited house duty might be obtained, in 87 instances certificates were granted.

SALE OF FOOD AND DRUGS ACT, 1875.

Under the above act, 119 samples were taken by Inspector Quelch during the year. Of these, 99 were milk, 16 butter, and 4 coffee. In 24, analysis shewed that adulteration had taken place and legal proceedings were instituted. In 23, prosecutions followed. Of these, 22 were for adulterating milk, and one for adulteration of coffee One case was dismissed. Fines were inflicted amounting to £94 5s. 6d., and costs allowed amounting to £2.

There was one prosecution under the "Margarine Act, 1887," the fine inflicted and costs allowed amounting to £1 4s.

The reports of the Analyst, Dr. Stevenson, for the year 1893, containing the details of the work done during the year by the department under the Act, are appended.

FOOD CONDEMNED AND DESTROYED.

The street markets have been kept under surpervision by your Inspectors, and special steps taken to prevent vegetable and animal refuse being thrown on the roadways. The following articles have been seized and destroyed during the year as unfit for human food:—

Cheeses			8 (96 lbs.)	Whelks			2 cwt.
Onions			1 box	Fowls			57
Bananas			1 bush.	Ducks			2
Currants (black)		30 lbs.	Rabbits			222
Plums			10 ,,	Kidneys			
Cherries			294 ,,	Pork (cuttings)			
Greengage	s		104 ,,	" (pickled)			
Tomatoes			1½ bush.	Veal 3 hin			
Fish Roes			3 boxes				es, 2 hind
Skate			1 cwt.				
Mussels			2 bags	Beef	_		
Hake				,, (cuttings)			
Soles				Beef & Muttor			7.5
Oysters	part of	barrel	& 3 boxes	Pigs head			
Mackerel				0		1000	

PUBLIC HEALTH (LONDON) ACT, 1891. LEGAL PROCEEDINGS.

There were 24 prosecutions under this Act, involving 14 parties. Fines were inflicted in 10 instances, amounting to £11 5s. 0d. Closing orders were obtained in 3 instances, distraint was levied in 6 instances, in one, the case was dismissed, and in the remainder, abatement orders were obtained.

The following is the list of premises thus dealt with: -

Hoxton Street, 114 ... Abatement order

Clarence Terrace, 1 and 2 ... Fined 5s. and costs 2s.

Kingsland Road, 119 ... (works completed)

Holywell Row, 8 ... ,, ,, ,, Shap Street, 34, 36, 38 and 40... , ...

Alma Street, 48 ... Case dismissed

Haggerston Road, 2 ... Fined 5s. and costs 2s.

Hoxton Street, 291 ... Costs allowed, 6s., closing order

Clinger Street, 1 ... Fined 5s. and costs 2s.

Weymouth Terrace, 90 ... Costs allowed, 6s., closing order Wenlock Street, 44, 46, 48 ... Fined (each case) £2 and costs 2s.

Kossuth Buildings ... Closing order

Queen's Road, 39, 41, 43 ... Work completed, costs 17s.

Charles Street, 2, 7 ... Fined (each case) £2 and costs 2s.

Kingsland Road, 147 Fined 10s. and costs 2s.

BYE LAWS UNDER THE PUBLIC HEALTH (LONDON) ACT, 1891.

The Vestry have had under consideration the framing of bye-laws with respect to:—

- (a) Houses let in lodgings (Sec. 94, I.)
- (b) Particular nuisances (Sec. 16. 1.)
- (c) Keeping of water closets supplied with sufficient water for their effective action (Sec. 39, II.)
- (d) The cleansing of tanks, cisterns, and other receptacles used for storing water for drinking purposes, or for manufacturing drink for the use of man (Sec. 50);

and have submitted to the Local Government Board copies of the bye-laws which it is proposed shall be in force in the parish. The Local Government Board have not yet signified their approval.

Bye-laws, under the Public Health (London) Act, 1891, have been made by the County Council, and were allowed by the Local Government Board on the 28th June, and are, therefore, now in force. They deal with:—

- (a) The removal or carriage by road or water of any feecal or offensive or noxious matter or thing in or through London.
- (b) The closing and filling up of cesspools and privies.
- (c) The removal and disposal of refuse, and the duties of the occupier of any premises in connection with house refuse, so as to facilitate the removal of it by the scavengers of the Sanitary Authority (Sec 16, 2)

and

(d) The construction of water closets, earth closets, privies, ashpits, cesspools, and receptacles for dung, and the proper accessories thereof in connection with buildings, whether constructed before or after the passing of the Act (Sec. 39, 1.)

SLAUGHTER-HOUSES AND COW-HOUSES.

Notices of applications to the London County Council, for the renewal of licenses, were received from the owners of 20 slaughter-houses. They were all personally inspected, and were, with one or two exceptions, found to be in excellent condition. The defects, in the case of the exceptions, were nothing serious, and did not necessitate more than a caution. In no instance was the application opposed by the Sanitary Authority.

Of the 17 cow-houses inspected, only 2 were in a really satisfactory condition. In the majority of the remainder, there exists the grave nuisance of a dung-pit sunk below the level of the ground.

Many of these pits are inefficiently drained, too large, and very dfficult to thoroughly clean out. My attention has, on one or two occasions, been called to the nuisance caused during the cleansing of these pits. If the dung is allowed to accumulate, putrefactive changes ensue, and the stench during its removal becomes an intolerable nuisance.

Section 25 of the bye-laws made by the London County Council, pursuant to Section 39, (I) of the Public Health (London) Act, 1891, makes provisions with regard to dung receptacles. They are not to have a capacity greater than two cubic yards. They must be so constructed that their floors are above the surface of the ground, so that they can easily be cleansed and drained. They must not abut on the wall of any dwelling, and must be rendered impervious to moisture. It is necessary, also, that they should be freely ventilated into the open air, and provided with a proper protection against the entrance of rain or water. Steps are being taken to enforce these provisions, and satisfactory progress is being made.

BAKEHOUSES.

There were 99 bakehouses inspected. Of these, 27 were in a good sanitary condition, 7 were fair, 51 were more or less defective, and 11 were distinctly bad and most insanitary. Three were not in use as bakehouses.

The majority are situate underground. The principal defects were imperfect ventilation, badly constructed floors, imperfectly trapped drains, and in one or two instances, W.C.'s badly constructed, opening directly into the bakehouse.

These evils are being dealt with, and satisfactory progress is being made, but there still remains a good deal of work to be accomplished.

FACTORIES AND WORKSHOPS.

During the year, notifications were received from Her Majesty's Inspector of Factories of insanitary conditions existing in 62 workshops and factories situate in the Parish. In 51 of the premises, works were effected in compliance with sanitary notices duly served. Many of the notifications received referred only to dirty conditions of the walls and ceilings, and in a number of cases it was found necessary, in addition, to order extensive works to be carried out, such as the introduction of additional w.c. accommodation, the improvement of light and ventilation, and the abatement of overcrowding.

SMOKE NUISANCE.

There were 29 communications received from the London County Council referring to black smoke issuing from chimneys on 41 premises.

No legal proceedings have been taken by the Vestry in any of the cases, it being deemed advisable, in each instance, to serve three notices before taking out a summons against the person or persons responsible for the nuisance. It has also been considered necessary, in certain cases, to secure the services of a practical engineer, to report as to whether the best possible means have been adopted for abating the nuisance.

NUISANCE FROM GAS WORKS IN SHOREDITCH.

In consequence of the complaints received by the Sanitary Authority, of the nuisance arising from effluvia evolved during the process of manufacturing gas at the works situate in their district, the Vestry referred the question to the Vestry Clerk, Medical Officer of Health, and Chief Sanitary Inspector to make enquiries as to the cause of, and methods of dealing with the nuisance, and report to them thereon. This report, including the correspondence with the Gas Referees, was submitted to, and ordered to be printed by the Vestry on September 4th, and has been circulated among the members of the Vestry.

The conclusions arrived at by your Officers were, that the processes in use at the Gas Works in Shoreditch, were productive of a nuisance in the neighbourhood, by reason of effluvia given off, but that there was not sufficient evidence to show that these effluvia were actually injurious to the health of the community. The Vestry were also advised to take proceedings against the Gas Light and Coke Company, only upon a certificate by two medical men, or ten inhabitants, given under Section 21 of the Public Health (London) Act, 1891.

The suggestions offered by your Officers for mitigating the nuisance were :-

- 1.—The provision of funnel-shaped collectors connected with the furnace flues placed above the doors of the retorts to collect the smoke and fumes arising during the drawing and charging of the retorts, and to prevent their dissemination through the retort house.
- 2.—The enlargement and better covering of the shoot at the Whiston Street Works, to prevent unnecessary contact of the lime with the air.
- 3.—Watering the surface of the dry lime in the lower tiers of the purifiers to prevent dust from rising, and covering the unworked surface of the purifier and of the sieves when removed with sacking or tarpaulin, as is done in some works described by Dr. Ballard in his report to the Local Government Board.
- 4.—The passing of air through the purifiers just preceding the removal of the cover, in order to take up as much of the free sulphuretted hydrogen and residual coal gas as possible.

As the question was an engineering and technical one of great importance, the Vestry were advised to employ a competent Gas Engineer, practically versed in the manufacture of coal gas, to examine and report on the means adopted to prevent nuisance at the Shoreditch Gas Works, and to suggest any remedies for mitigating the nuisance, its entire abatement being apparently impracticable.

After due enquiries as to several Gas Engineers in London, Mr. Helps, the Gas Engineer of the Croydon Gas Company, was engaged for the purpose.

The report of this gentleman, dated December 6th, has been printed and circulated among the members of the Vestry. In it, he agrees with the second and third suggestions made by your officials. With regard to the first suggestion, however, he was of opinion that it would be an operation of an almost impracticable nature to collect the fumes in the manner therein stated, and that its adoption would not be attended by any beneficial results. As to the fourth suggestion, it has been found that great nuisance arises from the oxide of iron purifier which is necessary to take up the sulphuretted hydrogen expelled from the lime.

The tenor of his report is favorable to the Gas Company, as was also the opinion of the Gas Referee, contained in his letter of September 2nd, in which he states:—

"I think it right to say that from the excellent order and cleanliness which I see to prevail, and from the account of the precautions taken when a purifier is discharged, I think it extremely unlikely that any nuisance is caused at either of their works, beyond what is inseparable from the manufacture of gas. The purifiers are only discharged at considerable intervals of time. The discharging was not going on to-day, and I did not witness it, but I saw all the appliances in readiness for avoiding nuisance during the discharging."

On December 15th, the report of Mr. Helps was considered by the Parliamentary Committee, and it was recommended that the Vestry Clerk be instructed to write to the Gas, Light and Coke Company, setting forth the points embodied in the report, and requesting the Company to carry out the same.

This was approved of by the Vestry on the 9th January, 1894.

SPECIAL REPORTS.

During the year, in addition to the above, reports were presented to the Vestry on the alterations required in the Shoreditch Public Mortuary, on the conferences with the London County Council as to the condition of the Regent's Canal, and on the conferences respecting the accommodation of cases of infectious disease at the disposal of the Asylums Board authorities, which was held at the Court House, Marylebone.

MOIRA PLACE AND PLUMBER'S PLACE SCHEME.

In the quarterly report which was presented to the Vestry for the first quarter of the year, is contained a summary of the evidence given by your late Medical Officer, Dr. Allan, by your Surveyor for the Scheme, Mr. Eve, and by myself, in favour of the Scheme, at the enquiry held at the Town Hall, on February 22nd, by Mr Smith, one of the Inspectors of the Local Government Board.

SANITARY WORK.

The following list summarises the work which has been done under the supervision of the Department during the year:—

			TOTAL P	EEMISES.			As com-
		Chief Inspt'r.	Inspt'r. Lear.	Inspt'r. Stiles.	Inspt'r. Quelch.	TOTAL.	with last year 1892.
Glazed pipe drains provided in lieu of dilapidated brick							
drains	in	4	26	9	32	71	163
Defectively constructed pipe drains repaired or relaid	in	237	192	245	70	744	882
Drains provided where there were none before	in	4	58	18	68	148	122
Rats infesting, and sewer gas impregnating (cured)	in	78	3	81	58	220	301
Cesspools emptied and filled up	in	22	2	3	5	32	34
Accumulation of sewage removed fr	om	7	2	42	81	132	148
Stack pipes (having their heads dangerously close to be room windows, permitting sewer gas to pass into the dwellings) disconnected from drains		47	175	95	212	529	775
Stack pipes provided	in	249	196	226	82	753	774
Eaves, gutters provided	in	249	141	199	41	630	614
Waste pipes of sinks within doors (untrapped and per mitting sewer gas to impregnate the dwellings) hav been securely trapped, or otherwise disconnected from drains, and have now their ends in the open air, and immediately over the yard sinks	0	26	265	120	128	539	886
Back fronts re-pointed	in	187	10	118	12	327	298
Roofs repaired	in	202	31	231	96	560	570
Stairs repaired	in	170	14	120	76	380	345
Floors repaired	in	179	16	154	81	430	498
Ground Floors re-instated and ventilated	in	21		53	16	90	45
Walls and ceilings cleansed, whitened and repaired	d						
throughout	in	194	25	155	33	407	460
Ditto ditto in part	in	21	101	147		269	242
Total number of rooms cleansed and repaired	in	764	692	1168	680	3304	2542
Sashes repaired	in	147	9	144	76	376	404
Water closets (foul and dilapidated) cleansed, repaired	,						
and fitted to "Shoreditch Model" and with improve	in	260	896	277	242	1175	1515
Water restored or newly laid on to water closets			147	269	102	729	908
Obstructions in water closets removed	in	9	28	34	15	86	85
Water closets in close, dark, and otherwise injurious situations removed into light and air		22	53	10	34	119	92
Water supplied direct from main in lieu of cisterns	in	6	32	41	74	153	312
Leaking water pipes, causing dampness, repaired	in	65	3	50	8	126	53
Yards and areas and w.c's lime-washed	in	159	629	460	364	1612	1243
Dust bins provided	in	108	254	262	90	714	958
Yards paved imperviously with stone or cement concrete	in	230	332	315	157	1034	1154
Areas and forecourts paved imperviously with stone o cement concrete		47	178	179	65	469	668
Sculleries ditto ditto	in	55	37	190	78	360	412
Premises unfit for habitation closed	in	102		5	1	108	27

STAFF OF THE SANITARY DEPARTMENT.

The Staff of the Sanitary Department consists of the Medical Officer of Health, Chief Sanitary Inspector, three Sanitary Inspectors, a Clerk, an Assistant Clerk and Messenger, a Disinfecting Officer, and an Assistant Disinfecting Officer. It has been found necessary to engage a second Assistant Disinfecting Officer, as it requires two men to go with the disinfecting vans. From time to time during the year, it was necessary to engage a third assistant to aid in the work of disinfection.

Owing to the prevalence of infectious disease, the work, especially during the latter half of the year, was exceptionally heavy. I have to report that there were several cases of illness amongst the staff. Two of the Inspectors suffered, one from small pox and enteric fever, and the other from scarlet fever, and two of the disinfecting officers were attacked with pneumonia. I regret to say one of the latter cases terminated fatally.

I am, Gentlemen,

Your obedient Servant,

LEWIS T. FRASER BRYETT,

Medical Officer of Health.

SHOREDITCH TOWN HALL,
OLD STREET, E.C.

TABLE I.

SUMMARY OF THE DEATHS IN THE PARISH OF SAINT LEONARD, SHOREDITCH, AND IN EACH SUB-DISTRICT, FOR THE YEAR 1893.

	DEAT	HS IN	EACH S	UB-DIS	TRICT.
CAUSES OF DEATH.	Shoreditch South.	Hoxton New Town.	Hoxton Old Town.	Haggerston.	TOTAL.
I.—ZYMOTIC DISEASES.					
1. Miasmatic Diseases		122	90	180	447
2. Diarrhœal ,,	20	37	46	67	170
A Zoogonous	1				1
5. Tubercular ,,	20	88	90	156	384
6. Venereal ,,		3	4	6	13
7. Septic ,,	2	10	6	15	33
Total Zymotic Diseases	128	260	236	424	1,048
II.—PARASITIC DISEASES		1			1
III.—DIETIC ,,	5	2	6	7	20
IV.—CONSTITUTIONAL ,,	17	25	28	37	107
W LOCAL DISPLANCE		1000			
V.—LOCAL DISEASES.	90	00	00	110	
1. Diseases of the Nervous System 2. ,, Circulatory ,,	OF	68 41	82 30	118 79	307
3. ,, Respiratory Organs	404	180	158	319	175 758
4. ,, Digestive ,,	4.4	22	23	55	114
5. ,, ,, Urinary ,,	40	7	14	30	67
6. ,, Generative System		3	8	2	13
7. ,, Bones and Joints		3	5	4	12
8. ,, ,, Integumentary System					
9. ,, Organs of Special Sense.					
10. ,, ,, Glandular Organs	•••	•••	•••		
Total Deaths Local Diseases	195	324	320	607	1,446
VI.—DEVELOPMENTAL DISEASES	32	58	63	114	267
VII.—VIOLENT DEATHS.					
1. Accident or Negligence	4	25	21	38	88
2. Homicide					
3. Suicide	2	4	4	4	14
TOTAL VIOLENT DEATHS	6	29	25	42	102
VIII.—CAUSES ILL-DEFINED	16	42	41	56	155
Total Deaths from all causes	399	741	719	1,287	3,146

TABLE II.

DEATHS FROM ALL CAUSES IN THE PARISH OF SAINT LEONARD, SHOREDITCH, AND IN EACH SUB-DISTRICT.

Note.—The Deaths of Non-Parishioners occurring in Hospitals, &c., in the Parish, are excluded; and the Deaths of Parishioners occurring in Hospitals, &c., situated in London beyond the limits of the Parish, are included.

	DEC		URIN ER,		THE	Y	EAR	EN	DIN	G						IN E	
						AGES						ths ve.	South.	wn.	wn.	on.	
CAUSES OF DEATH.	Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 60.	60 to 70.	70 to 85.	85 and upwards.	Total Deaths under Five.	Shoreditch	Hoxton New Town.	Hoxton Old Town.	Haggerston.	TOTAL.
(Classes.)																	
I.—ZYMOTIC DISEASES	270	351	85	57	84	92	56	12	27	13	1	622	128	260	236	424	1,048
II.—PARASITIC ,,	1			1								1		1			1
HI.—DIETIC "	7				3	4	5	1				7	5	2	6	7	20
IV.—CONSTITUTIONAL DISEASES .	3	4	4	6	6	21	24	11	21	7		7	17	25	28	37	107
V.—LOCAL "	240	199	65	54	79	142	167	66	254	167	13	439	195	324	320	607	1,446
VI.—DEVELOPMENTAL ,, .	164								15	66	22	164	32	58	63	114	267
TI.—VIOLENT DEATHS	40	13	8	4	7	6	10	3	7	4		53	6	29	25	42	102
II.—NOT SPECIFIED	84	24	3	5	4	5	4	3	12	11		108	16	42	41	56	155
	809	591	165	126	183	270	266	96	336	268	36	1,400	399	741	719	1287	3,146

I.—ZYMOTIC DISEASES. (1) MIASMATIC. Small Pox) 2) 1	 28 96 1 25 15 96 1 26 44	8 34 2 1	2 2 1 3 1 3 4 1	1 5	6	 1 8			124 26 111 1 70	21 4 14 6 7	39 11 36 10 22	26 7 28 4 20	3 42 16 71 16 23	3 128 38 149 36 72	
Enteric or Typhoid Fever Simple Continued Fever Other Miasmatic Diseases (2) DIARRHŒAL DISEASES.		3	5	6 3 1 	3					3	1	3 1	3 2	9	17 1 3	
Diarrhœa and Dysentery Simple Cholera (Choleraic Diarrhœa) (3) Zoogenous Diseases.	12	25 29	- 4	2	2		2	3	1	154	20	35 2	45	67	167	31
Cowpox and effects of Vaccination (4) Tubercular Diseases.		1								1	1				1	
Tabes Mesenterica	s 1	22 7 11 10 16 26 9 11	8	36 64 1	1 72 1 1	40 1 .	9 13	3		29 21 42 20	2 40 4 4	6 54 18 10	9 63 12 6	14 109 21 12	31 266 55 32	
(5) VENEREAL DISEASES. Syphilis	1									13		3	4	6	13	
Erysipelas			1	1 1 3	4 1 1		3 1	1		3 2	1 1	4 4 2	2 2 2	8 6 1	15 13 5	

DEATHS FROM ALL CA						EY	EAR	E	NDI	NG]		HS I B-DIS			
						AGES	5.					ths	South.	wn.	711.	n.		
CAUSES OF DEATH.	Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 60.	60 to 70.	70 to 85.	85 and upwards.	Total Deaths under 5.	Shoreditch S	Hoxton New Town.	Hoxton Old Town.	Haggerston.	TOTAL.	
II.—PARASITIC DISEASES. Thrush and other Vegetable Diseases	1											1		1			1	
III.—DIETIC DISEASES.																		
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	1				 2 1	 3 1	 5	 1				6 1 	1 2 2	2	4 1 1 	1 2 4	6 1 5 8	32
IV.—CONSTITUTIONAL DISEASES.																		
Gout Rheumatic Fever and Rheumatism of Heart Rheumatism Cancer Rickets Anæmia, Chlorosis, &c. Diabetes Other Constitutional Diseases		3 1	2 2 	5 1 	 2 1 1 2 	1 1 16 2	1 20 1 1	7 1 1 1	 18 1 1	 1 4 1 1		 5 1	 1 2 12 1 1	1 3 1 15 1 4 	 2 1 19 1 3 2	1 5 1 21 4 1 2 2	2 11 5 67 5 3 9 5	
V.—LOCAL DISEASES.																		
(1) DISEASES OF THE NERVOUS SYSTEM. Inflammation of the Brain or Membranes Apoplexy or Brain Paralysis Insanity Epilepsy	7 1 2	13 1 	6 4	2 3 4	1 5 3 2	1 9 4 3	1 20 6 2	1 10 2 1	39 6 1	1 33 4 1	 7 1	20 2 2	2 13 4 4	10 26 6 2	8 32 6 6	13 54 13 8	33 125 29 20	

	1		1 1									11	1	,	1	,	h	
V.—LOCAL DISEASES.—Continued.																		
Convulsions		9	1						1			56	13	17	13	15	58	
Teething	1	6					***					14	1	4	8	1	14	
Diseases of Spinal Cord Other Nervous Diseases		4		1 1	1	7	1	···	2 4	1 2	1	1 4	2	3	4 5	2 12	6 22	
(2) Diseases of Circulatory System.	***	-		-	-		-		-1	4	1	4	2	9	9	12	22	
Pericarditis			1		1	2									1	3	4	
Aneurism	55000	1				2	1		1			ï	4	1			5	
Heart Disease		1	13	17	11	25	28	7	36	26		1	21	39	28	76	164	
Diseases of Blood Vessels						1	1							1	1		2	
(3) Respiratory Organs.	1																	
Laryngitis		7	1		1	1						7	1	1	4	4	10	
Bronchitis	88	64	5	2	7	21	29	15	91	62	4	152	48	104	79	157	388	
Pleurisy		76	17	11	26	2 42	36	16	2	2		100	1	3	1	5	10	
Acthma		1000	190007	1	1000		2	1000000	40	18	• • • •	130	50	66		149	336	
Other Lung Diseases	0	3	***	1	ï	2			1			5	1	4	1 2	1 3	10	
(4) Digestive Organs.						-			-			0	1	-	4	0	10	
Quinsy		1										1				1	1	00
Diseases of Gullet and Stomach	9			1	1		2		2			3	2	2	1	4	9	co
Enteritis	24	6	3	2	2				1			30	5	2	7	24	38	
Peritonitis		3	6	1	2	3	6			1		3	1	7	8	6	22	
Hernia									2	5			1	2	1	3	7	
Obstruction of Intestines	1	1				1	2 9			2		2		1	***	6	7	
Other Liver Diseases			***		2	3 2	2	4	3 2	1			2 3	5 2	5	10	22	
Disease of Spleen					1									1			7	
(5) URINARY ORGANS.																	-	
Duight's Discoss		2	1	2	4	5	16	6	14	5		2	13	6	12	24	55	
Other Kidney Diseases					1	2	1			1			1	1	1	2	5	
Diseases of Bladder or Prostate					1			1	4	1			2		1	4	7 .	
(6) Diseases of Generative System.																		
Child-birth				1	4	3								2	4	2	8	
Other Diseases				1		1	1	1	1					1	4		5	
(7) Diseases of Bones and Joints.																		
Caries and Necrosis,	2	1	6	3								3		3	5	4	12	
				200	-													

			-	
31 2 25	41 4 18	61 6 47	150 14 103	
7	4	15	26	34
1 1 3 I	3 1 5 1	4	5 2 12 2	

DEATHS IN EACH SUB-DISTRICT.

						AGES						ths 5.	South.	wn.	wn.	on.	
CAUSES OF DEATH.	Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 35.	85 to 45.	45 to 55.	55 to 60.	60 to 70.	70 to 85.	85 and upwards.	Total Deaths under 5.	Shoreditch S	Hoxton New Town.	Hoxton Old Town.	Haggerston.	TOTAL.
VI.—DEVELOPMENTAL DISEASES.																	
Malformations	150								15	66	22	150 14 	17 2 13	31 2 25	41 4 18	61 6 47	150 14 103
By Falls	7 1 1 30 2	4 7 1	3 1 3 1	3 1	 1 1 	1 2 1 	2 2	1 1 	1 2 3	4		11 1 7 31 2 1	1	7 1 3 1 10 1	4 3 1 5 1 1 5 	15 4 1 13 1 4	26 5 2 12 2 2 31 2 6
Wounds—Gunshot, Cut, Stab					1 1 3 	1	1 2 2 1	1	1				2	1 2 1	1 3 	3 1	5 3 5 1
VII.																	
Causes not specified or ill-defined	. 84	24	3	5	4	5	4	3	12	11		108	16	42	41	56	155

DEATHS FROM ALL CAUSES DURING THE YEAR ENDING

31st DECEMBER, 1893.

TABLE III.—ANALYSIS AND COMPARISON OF LONDON AND SHOREDITCH BIRTHS AND DEATHS FOR THE YEAR ENDING 31st DECEMBER, 1893.

					Annu	AL RAT	E PER	1000	PERS	ONS L	IVING.						year s.		ENTAG	
District	Estimated		TOTA	L DEAT	HS DURI	NG				D	EATHS	FRO	ME					sa sa	ublic is.	causes
Districts.	population 1893.	BIRTHS.					Principal Zymotic Diseases.	Small Pox.	les.	et sver.	Diphtheria.	Whooping Cough.	c	hœa.	Tubercular Diseases.	Violence.	Deaths under 1 to 1000 Birth	nquest Cases.	Deaths in Public Institutions.	Uncertified causes of Death.
			1890.	1891.	1892.	1893.	Prin Zyn Dise	Smal	Measles.	Scarlet Fever.	Diph	Who	Fever.	Diarrhœa.	Tube	Viole	Des	Indae	Deatl	Unce
London	4,306,411	31.0	21.5	21.4	20.6	21.3	3.08	0.05	0.39	0.37	0.76	0.54	0.17	0.80	2.69	0.80	164	8.1	26.9	0.9
Shoreditch	122,420	35.5	25.4	24.8	23.09	25.7	4.72	0.02	1.04	0.31	1.21	0.58	0.12	1.38	3.13	.83	186	8.6	26.1	0.00
Sub-Districts.																				
Shoreditch South	19,890	26.6		22.4	21.45	20.0	3.46	_	1.05	0.20	0.70	0.35	0.15	1.00	2.51	0.30				
Hoxton New Town	28,280	36.7		24.1	22.35	26.2	5.23	-	1.37	0.36	1.27	0.72	0.10	1.29	3.11	1.02				
Hoxton Old Town	28,850	34.6		26.1	22.77	24.9	4.50	-	0.40	0.24	0.97	0.69	0.17	1.59	3.11	0.86				
Haggerston	45,400	*39-4		25.2	24.02	28.3	5.08	0.06	0.93	0.35	1.55	0.50	0.19	1.46	3.43	0.92				

* Includes Births in the Shoreditch Infirmary.

Note.—Where the Deaths under any heading are too few to express as a rate per 1000 within two places of decimals, 0.00 is inserted; where no deaths have occurred it is expressed thus:—.

TABLE IV.

DISTRICT MEDICAL OFFICERS' ANALYSIS OF CASES.

For the year ending 31st December, 1893.

Disi	EASES.			DISEASES.	
1 Small Pox Vac	DISEASES. ecinated vaccinated stated	No. 5853 2 — 96	38 39 40 41 42 43	Congenital malformations Old age Apoplexy Epilepsy Convulsions Other diseases of brain and nervous system	. 161 . 17 . 26 . 10
3 Scarlet fever 4 Typhus 5 Relapsing fever 6 Influenza		83 — 93	44 45	Diseases of organs of special sense Diseases of circulatory system	. 37
7 Whooping Coug 8 Diphtheria 9 Simple, Contin defined fever 10 Enteric fever 11 Simple Cholera	nued and ill-	82 29 36 8	46 47 48 49 50	Laryngitis Bronchitis Pneumonia Pleurisy Other respiratory diseases	. 1288 . 67 . 43
12 Diarrhœa, Dyse 13 Remittent fever 14 Hydrophobia 15 Glanders 16 Cow pox and vaccination 17 Venereal affecti	entery effects of ons	180	51 52 53 54 55 56	Dentition Quinzy, sore throat Enteritis Peritonitis Diseases of liver Other diseases of digestive system	. 98 . 16 . 2 . 10
18 Erysipelas 19 Pyæmia and Se 20 Puerperal fever 21 Tabes Mesenter	pticæmia	45 1 —	57	Diseases of lymphatic system and ductless glands	40
22 Tubercular Mer		3	58	Diseases of urinary system	. 51
23 Phthisis 24 Scrofula, Tuber	culosis	193 15	59	Diseases of generative system	n 62
25 Other Zymotic	diseases	2	60	Accidents of child-birth	27
26 Thrush		3	61	Diseases of locomotive system	n 171
27 Worms and or diseases		20.	62	Diseases of integumentar system	y 119
28 Starvation, wan 29 Alcoholism	t of breast-milk	3 26		VIOLENCE.—Accident.	
30 Rheumatic fever tism of heart 31 Rheumatism 32 Gout 33 Rickets 34 Cancer 35 Other constitut 36 Premature birth	ional diseases	76 274 52 6 24 87	63 64 65 66 67 68 69 70	Fracture and contusion Gun shot wounds Cut, stab Burn or scald Poison Drowning Suffocation	
37 Atelectasis		-	71	Other causes	. 661

(A.) TABLE OF DEATHS, during the 52 Weeks ending the 30th December, 1893, in the Metropolitan Sanitary District of Saint Leonard, Shoreditch, classified according to Diseases, Ages, and Localities.

NAMES OF LOCALITIES				OINED /		8E8,			-			M	ORTALII	TY PROS	d BUBJO	ENED C	AUSES,							NDER F						
adopted for the purpose of these Statistics; public Insti- tutions being shown as separate localities.	At all	Under	1 and	5 and	15 and	25 and	65 and		, i	19.	dia.	e sno	b	6	Fevens		9	-	11	12	bo	14 g 6	15	16	17	ils, hoy.	19	20	21	22
(Columns for Population and Births are in Table B.)	ages.	year.	5.	under 15.	25.	65.	wards.		Smallpox.	Scarlatina.	Diphtheria	Membran Croup.	Typhus.	Enterio or Typhoid.	ntinued.	Relapsing.	nerperal.	Cholera	Erysipela	Measles	Whoopin Cough.	Diarrhose and Dysentery	Rheumation Fever.	Ague.	Phthisis	Bronschitsi Pneumoni ad Pleura	Heart	Injuries	All other Diseases.	TOTAL.
(a)	(6)	(c)	(d)	(e)	(1)	(9)	(h)	(i)				100	н	H	8	2	ď.					1000				A di				
St. Leonard, Shoreditch	2,336	740	501	110	76	648		Under 5 5 upwds.		6	52 21	15 5	::	8	ï	.,	5	2	6	121 2	72 1	154 5	13	::	10 162	255 373	1 95	36 22	504 379	1,230 1,106
Shoreditch Infirmary and Workhouse	425	24	16	3	14	203		Under 5 5 upwds.		**	::	1	::	::	::	::	::	::	4	3		5	2	**	59	6 102	38	5	27 171	39 386
Holborn Infirmary	259	8	1		1	58		Under 5 5 upwds.		**	ï		**	::		::		::	6		::	2	.,		iò	88	3	î	9 189	9 250
Hoxton House Asylum	61				3	47	11	Under 5 5 upwds.		**		**	**	**	::		::	::		::	::			::	2	2	5	**	52	ėi.
North Eastern Hospital	110	36	64	10	**	**	**	Under 5 5 upwds.		4	20	1	::	::	::	::	::	ï		1	::	5			5	17	2	6	41 5	100
Convent Hospital	7	**	3	4	**	***		Under 5 5 upwds.		::	::	::		11			::	**		**	::		::	::	::	1	::	::	1 4	2 5
Totals	3,198	808	585	127	94	956		Under 5 5 upwds.		10 6	72 23	17 5	::		ï	::	5	3	4 16	125 2	72 1	159 12	15	::	16 233	279 566	1 143	43 29	582 750	1,380 1,818
				Т	he su	bjoine	d nun	nbers ha	ve als	so to	be tal	ken in	to ac	count	in ju	dging	of the	e abov	re rec	ords c	of mor	rtality								
Deaths occurring outside the district among persons be- longing thereto.	384	24	71	52	40	160	37	Under 5 5 upwds	. 3	17	34 11	·i	::			::	::	::	2	1	1	5	::	·i	1 27	11 39	35	7 26	18 129	95 289
Deaths occurring within the district among persons not belonging thereto.	486	41	57	10	4	122	902	Under 5 5 upwds		2	14	1	::	::	::			'i	·6	2	::	4 3	ï	::	5 16	14 91	ii	4 3	50 207	96 340

(B.) TABLE OF POPULATION, BIRTHS, and of NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the 52 Weeks ending 30th December, 1893, in the Metropolitan Sanitary District of Saint Leonard, Shoreditch, classified according to Diseases, Ages, and Localities.

					- 30																							
NAMES OF LOCALITIES	Popular ALL		Births.		New C	Cases o	F SICK	NESS I	EDICAL	LOCAL	ITY CO	MING T	O THE	KNOWL	EDGE (OF THE	NUMBI	IR OF S	UCH CA	ses Re FOR T	MOVED	FROM T	THEIR I	Homes ton Ho	IN THE	SEVER	al Lo	CALITTES
adopted for the purpose of				10 00				20		1	EVERS									100		3	PEVERS					
	1891.	Esti- mated to middle of 1893.	Regi	Age under over 5	Smallpox.	Scarlatina.	Diphtheris.	Membranot Croup.	Typhus.	Enteric or Typhoid	Continued.	Relapsing.	Paerperal.	Cholera.	Erysipolas.	Total	Smallpox.	Scarlatina.	Diphtheria	Membranou Croup.	Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Paerperal.	Cholera,	Erysipelas.	Total.
(a)	(6)	(0)	(d)	(e)	1	2	3	4	5	6	7	8	9	10	11	12	1	9	3	4	5	6	7	8	9	10	11	12
SUB-DISTRICTS— (1) Shoreditch South,,	20,098	19,890	527	Under 5 5 upwards	3	40 97	17 30		::	13	2		ï		8 57	60 203	14	9 51	4 11	::		7			::		3	18 76
(2) Hoxton New Town	29,313	28,280	1,128	Under 5 5 upwards		83 162	32 70			1 27	ï		2	3	5 74	121 342	3	39 72	13 12			15					2	52 104
(3) Hoxton Old Town	28,354	28,850	999	Under 5 5 upwards	· à	77 126	41 81	::		1 21			2	i	2 61	121 296	4	30 55	14 16			1 12		**	::			45 87
(4) Haggerston	46,244	45,400	1,792	Under 5 5 upwards	iż	126 296	91 151	::		3 45	ï		3		11 98	231 606	ii	34 83	92 36			3 17	ï		::		i	59 149
Shoreditch Infirmary and Workhouse	.,	**		Under 5 5 upwards	3			::	::						ï	-4	3								::		.:	3
Holborn Infirmary		**	*88	Under 5 5 upwards					**						3	3			::					**	**			**
Hoxton House				Under 5 5 upwards													**	**				::						
North Eastern Hospital				Under 5 5 upwards				::	**									::		12	::				::	::	::	::
Convent Hospital				Under 5 5 upwards														::			**						::	::
TOTAL	124,009	122,420	4,446	Under 5 5 upwards	25		181			5 106	4		8	4		588 1,454	25	112 261	53 75			4 51	1				6	169 419

* These are included amongst those in New Town.

TOTAL .. . 1,987

TOTAL

39

The Vestry of the Parish of Saint Leonard, Shoreditch, in the County of London.

SALE OF FOOD AND DRUGS ACT, 1875.

The Report of the Analyst appointed under the above Act for this County, of the number of Articles of Food, Drink, and Drugs, which have been received and Analysed by such Analyst, specifying the nature and kind of Foreign Ingredients detected in such Articles, &c., during the Year ending the 31st day of December, 1893.

Date of receipt by Analyst of the Article to be Analysed.	Name of Person from whom the Article was received.	Number marked on the parcel con- taining the Article by which it is to be identified by the Inspector in lieu of the name of the person from whom it was procured.	Article received.	Result of Analysis specifying the nature and kind of foreign ingredients detected in such article (if any).	Observations.	Fines.	Costs.
1893. Jan. 23 """"""""""""""""""""""""""""""""""""	C. H. Quelch	K 65 K 66 K 66 K 67 K 68 K 69 K 70 K 53 K 54 K 55 K 56 K 57 K 58 K 59 K 60 K 61 K 62 K 63 K 71 K 72 K 73	New milk " " " " " " " " " " " " " " " " " "	Genuine Genuine Genuine, of low quality 5 per cent. of water beyond the normal Genuine, of low quality Water beyond the normal, 6 per cent. Genuine Water beyond the normal, 4 per cent. Added water, 11 per cent. Water beyond the normal, 5 per cent. Genuine Genuine Genuine Genuine Genuine Foreign fats, i.e., fats other than butter fat, 80 per cent., water, salt and curd, 15 per cent. Butter fat not exceeding 5 per cent. Genuine, of low quality Genuine 5 per cent. of water beyond the normal Gennine, of low quality Genuine, of low quality Genuine	Not decomposed """""""""""""""""""""""""""""""""	10/6 £1	2/-

Date of receipt by Analyst of the Article to be Analysed.	Name of Person from whom the Article was received.	Number marked on the parcel con- taining the Article by which it is to be identified by the Inspector in lieu of the name of the person from whom it was procured.	Article received.	Result of Analysis specifying the nature and kind of foreign ingredients detected in such article (if any).	Observations.	Fines.	Costs
1893. Feb. 4 """""""""""""""""""""""""""""""""""	C H. Quelch	K 74 K 75 K 76 K 77 K 78 K 79 K 80 K 81 K 82 K 83 K 84 K 85 K 86 K 87 K 88 K 89 K 90 K 91 K 92 K 93 K 94 K 95 K 96 K 97 K 98	New milk	Genuine Genuine, of low quality. 6 per cent. of water beyond the normal Added water, 15 per cent. 4 per cent. of water beyond the normal 6 per cent. of water beyond the normal 6 per cent. of water beyond the normal Added water, 10 per cent. Added water, 11 per cent. Genuine Genuine, of low quality Added water, 9 per cent. 6 per cent. of water beyond the normal Genuine Genuine, of low quality Genuine Geneuine	13	£5 £5 10/- £3	2/-
" " " " " " " " " " " " " " " " " " "))))))))	K 98 K 99 K 100 L 1 L 2 L 3 L 4 L 5 L 6 L 7	" " " Butter" " " " New milk "	Added water, 11 per cent. Genuine Genuine, of low quality Genuine Genuine Genuine Genuine Genuine Genuine Genuine Genuine 3 per cent. of water beyond the normal Added water, 15 per cent.	" " " " "	£2	2/-

Date receip Analyst of Article Analys	t by of the to be	from wh	ne of P nom the s receiv	e Article	on the tainin by wh ident Inspec the i	ber mark e parcel c g the Arti ich it is to tified by tl ctor in lieu name of th n from wh as procure	on- cle be ne ne nof ne om		ticle eived		Result of Analysis specifying the nature and kind of foreign ingredients detected in such article (if any).		Observations		Fines.	Cost
Apr.	27	C. H. Q	nelch			L 10		New	mill	k	6 per cent. of water beyond the normal	Not d	ecomposed			
***	11	33	>>			L 11		"	33		3 per cent. of water beyond the normal	33	11			
99	111	33	99			L 12		11	"		Genuine, of low quality	33	11			40
- 11	11	33	33			L 13		33	33		Added water, 20 per cent	33	33		£5	2/-
11	33	23	53			L 14		"	22		Added water, 18 per cent	, ,,			£2	2/-
- 22	33	"	33			L 15		11	33		Added water, 35 per cent		when receiv	ved	£3	2/-
23	23	"	33			L 16		93	22	* *	Genuine, of low quality	Not d	ecomposed		0.4	0.1
33	2.5	11	22			L 17		23	22		Added water, 9 per cent	11	","		£1	2/-
2.2	22	33	37	******		L 18		"	12		6 per cent. of water beyond the normal	23	53			
3.5	"	11	22			L 19		13	22	* *	Genuine, of low quality	11	1)			
May	29	33	27			L 20		22	7.7		Genuine, of low quality	33	23			
33	"	33	33			L 21		12	22		Genuine, of low quality	22	**			
2.7	>>	"	"			L 22		"	,,		Genuine	33	"			
9.9	11	33	93			L 28		27	72		Genuine	33	,,,			
**	11	33	2.2					11	- 33		Added water, 12 per cent	22	33			
11	33	39	33			L 25		7.5	17		Genuine	22	33			
22	31	"	22					11	22		3 per cent. of water beyond the normal	33	"			
27		>>	33			L 27		. 27			Genuine	33	11			
,,	13	"	33					11		* *	5 per cent. beyond the normal of water	12	- 33			
"	23		23			L 29 L 30		33			Genuine	"	"			
17	11	**	27			L 31		33		**	Genuine	"	22			
Aug.	22		27			L 32		33	33		Genuine, of low quality	33	"			
			22			L 88		**			Genuine	27	"			
33	7.7		"			L 84		**		* *	Added water, 11 per cent	"	",		£4 10/-	2/
11	"		11			L 35		"		**	3 per cent. of water beyond the normal	11	"		101-	-1
"	77		17			L 36		"		* *	Added water, 14 per cent	11	"		£5 10/-	2/
"	"		33			L 37		"			Added water, 13 per cent, also a trace	33	19			1
"	"	"	**				*	13	"		boracic acid as a preparation					
											thereof—a preservative	100			£5 5/-	2
11	**	33	15			L 38		**	11		2 per cent. of water beyond the normal	"	**			1
11	"		11			L 39		,,	33		Genuine	37	"			
"	"		**			L 40		"	"		Added water, 14 per cent., also a trace	77	"			
.66.	-		0.00					-33	33		of boracic acid as a preparation					
	-										thereof—a preservative	22	"		£5 10/-	2/
"	33	**				L 41	30	,,			Added water, 10 per cent	11	"		£4	2/

Analyst's Report for the Year ending 31st December, 1893-continued.

	Date of receipt b Analyst of Article to Analyse	the be	from w	me of P whom th as receiv	e Article	Number marked on the parcel con- taining the Article by which it is to be identified by the Inspector in lieu of the name of the person from whom it was procured.	Article received.	Result of Analysis specifying the nature and kind of foreign ingredients detected in such article (if any).	Observation	s.	Fines.	Costs.
28	"	22	C. H. G	Quelch "" "" "" "" "" "" "" "" "" "" "" "" "		L 42 L 43 L 44 L 45 L 45 L 46 L 47 L 48 L 49 L 50 L 51 L 53 L 54 L 55 L 56 L 56 L 60 L 61 L 62 L 63 L 64 L 65 L 66 L 67 L 68 L 69 L 70 L 71	New milk	Genuine Genuine, of low quality 5 per cent. of water beyond the normal Genuine, of low quality Added water, 18 per cent. 7 per cent. of water beyond the normal Added water, 10 per cent. Added water, 10 per cent. Genuine, of low quality Added water, 7 per cent. Deficient in butter fat 20 per cent. 3 per cent. of water beyond the normal 4 per cent. of water beyond the normal 5 per cent. of water beyond the normal 6 per cent. of water beyond the normal 7 per cent. of water beyond the normal 8 per cent. of water beyond the normal 9 per cent. of water beyond the normal 9 per cent. of water beyond the normal Added water, 10 per cent. Genuine, of low quality Genuine	Not decomposed """""""""""""""""""""""""""""""""""	d	£7 10/-	2/- 2/- 2/-

CHEMICAL LABORATORY,
GUY'S HOSPITAL, LONDON, S.E.

THOMAS STEVENSON, M.D.,

Public Analyst.