

[Report of the Medical Officer of Health for Camberwell,

Contributors

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BOROUGH OF CAMBERWELL.

Town Hall,

Camberwell, S.E.

5. 12. 01.

*With the Compliments of the
Medical Officer of Health.*

Appendix III. to Annual Report.

Report of the Medical Officer of Health.

GENTLEMEN,

During the 52 weeks ending December 29th, 1900, the number of births registered in London amounted to 130,868, and the deaths to 86,007. The Registrar-General estimates the population of London at the middle of that year to be 4,589,129, and the birth-rate, marriage-rate and death-rate are all calculated on these figures. The birth-rate, which has been steadily declining since 1896, last year reached 28·6 per thousand, and is the lowest that has yet been recorded. The marriages numbered 40,499, and the rate per thousand was 17·6, thus being lower than in 1899, when the rate per thousand was 18·4. The deaths, as stated above, numbered 86,007, and therefore corresponded to an uncorrected rate of 18·8 per thousand, the average in the previous ten years having been 19·8. Included in this total are the deaths of Londoners who died in metropolitan institutions outside London, and also those of strangers who had been admitted into London hospitals and infirmaries from districts outside its boundaries. If these last be excluded the death-rate of London as a whole will be reduced to 18·3 per thousand.

On next page in tabular form, are shown the births and the deaths, together with the birth-rate and death-rate for London taken as a whole, and also for the various groups of its sub-districts.

TABLE I.—BIRTHS, DEATHS, AND CORRECTED BIRTH-RATES AND DEATH-RATES OF LONDON AND ITS GROUPS OF DISTRICTS FOR 1900.

	London.	West D.	North D.	Central D.	East D.	South D.	Metropolitan Asylum and Hospitals outside London.
Births ..	130,868	19,238	28,460	6,284	25,692	51,194	—
Deaths ..	86,007	14,259	18,220	4,762	15,962	30,914	1,890
Birth-Rates	28·6	24·0	26·3	26·8	35·4	29·2	—
Death-Rates (corrected)	18·3	16·6	16·7	22·3	21·9	18·0	—

Table II. shews the estimated population of Camberwell and its registration sub-districts at the middle of 1899, and also at the middle of 1900. These estimates are based on the assumption that the rate of increase in the population has continued in the same proportion as in the years 1891-6, but as I pointed out in my report last year, the figures are probably over estimated. The estimated population obtained by taking the average number of persons per assessment existing in previous years is 263,593. This method of calculation, however, is open to some objection, as in Camberwell there were formerly many single houses with large grounds which are now rapidly giving way to streets of smaller houses, each of which, although assessed as one house, is let out to two families.

TABLE II.—POPULATION OF CAMBERWELL AND ITS SUB-DISTRICTS.

	Parish.	Dulwich	Camberwell.	Peckham.	St. George's
As enumerated at census, 1896	253,076	7,519	90,286	88,242	67,029
As calculated for middle of 1899	265,385	8,018	96,379	91,476	69,520
As calculated for middle of 1900	269,276	8,178	98,335	92,495	70,305

Table III. gives the total number of births registered during the year in the Parish, showing a decrease of 232 contrasted with the increase of 16 that 1899 showed over 1898. The decrease is most marked in St. George's and Camberwell, and the increase in Peckham and Dulwich. The increase in the latter district is not a matter of surprise considering the number of new houses that are there being erected.

TABLE III.—BIRTHS IN CAMBERWELL AND ITS SUB-DISTRICTS.

	Parish.	Dulwich.	Camberwell.	Peckham.	St. George's.
1899	7,443	101	2,443	2,669	2,230
1900	7,211	109	2,356	2,705	2,041
Difference ..	— 232	+ 8	— 87	+ 36	— 189

Table IV. shews the birth-rate of the whole Borough, together with its sub-districts. The decrease has been well marked except in Dulwich, where there has been an increase, and in Peckham which remains nearly as in 1899.

TABLE IV.—BIRTH-RATES OF CAMBERWELL AND ITS SUB-DISTRICTS.

	Parish.	Dulwich.	Camberwell.	Peckham.	St. George's.
1899	28·04	12·59	25·34	29·17	32·07
1900	26·77	13·32	23·95	29·24	29·03

The total number of deaths registered of inhabitants of the Borough, excluding 767 which occurred in St. Saviour's Infirmary, amounted to 4,455, compared with 4,693 in 1899, the deaths of parishioners occurring in institutions outside the Borough being of course included in these totals. The number of deaths is consequently 92 below the average number of deaths in the years 1890-1899. 1,107 deaths were those of infants under one year, compared with 1,181 in the last year, being 54 below the decennial average.

Since last year the population was smaller, and this diminution, both in the total deaths and also in those of infants, of course, is of greater import than it may seem at first sight. The deaths of those persons occurring in institutions outside the Borough have been distributed according to the sub-districts whence they were removed, in those instances where we have been able to get the requisite information; when this has been impossible they have been considered separately and have been re-distributed among the sub-districts in proportion to the recorded deaths in those localities. A similar plan has been followed out with regard to the Infirmary, Workhouses and Lunatic Asylums, but in the latter there are of course many persons who have perhaps been brought in many years ago from districts outside Camberwell; the deaths of such persons have accordingly been re-distributed according to the plan mentioned above.

This seems the fairest way, since otherwise the death-rate of Camberwell sub-district would be unfavourably affected by the extra number of deaths occurring in these institutions.

RE-DISTRIBUTION OF DEATHS AMONG THE SUB-DISTRICTS OF
CAMBERWELL.

	Deaths returned classified according to sub-districts.	Deaths of persons removed from unknown addresses in Camberwell re-distributed.	Estimates of deaths due to sub- districts.
Dulwich	80	+ 3	83
Camberwell	1,339	+ 62	1,401
Peckham	1,591	+ 73	1,664
St. George's	1,250	+ 57	1,307
Total	4,260	+ 195	4,455

The number of deaths occurring in the Lunatic Asylums amounted to 68. After all these allowances and calculations have been made it is found that the death-rate for Camberwell is 16·54 per 1,000, a diminution of 1·14 on the 1899 rate. There is a decrease in each of the sub-districts, especially in Camberwell and Peckham. The real decrease, however, both in this and in the birth-rate is not so great, because of the population being estimated on the basis of its conforming to the rate of increase in the years 1891-6. The Registrar-

DEATH-RATES IN CAMBERWELL AND ITS SUB-DISTRICTS.

	Parish.	Dulwich.	Camberwell.	Peckham.	St. George's.
1895	18·88	9·85	16·75	20·03	21·28
1896	18·66	8·73	16·11	20·35	20·78
1897	16·98	8·69	14·31	18·98	18·91
1898	16·70	10·05	15·07	18·74	17·03
1899	17·68	10·60	15·30	19·01	19·05
1900	16·54	10·14	14·24	17·96	18·59

General's estimate of our death-rate is 16·3. As a rule his estimate is below mine, and this is probably due to the fact that he excludes some of the deaths of those who have occurred in outside institutions as deaths of inhabitants of Camberwell, and which are included in my report. As in last year, I give the death-rate of the South London parishes. It will be seen that Camberwell is now fourth on the list, whereas in 1899 it took the sixth place.

DEATH-RATES OF LONDON AND ITS SANITARY AREAS DURING THE FIFTY-TWO WEEKS OF 1899, AFTER DISTRIBUTION OF DEATHS IN PUBLIC INSTITUTIONS.

Sanitary Areas.				All Causes.	Principal Zymotic Diseases.
Registration London				19.3	2.46
West London				18.0	1.91
North London				17.8	2.16
Central London				23.0	2.21
East London				22.9	3.17
South London				18.8	2.62
South London.	Wandsworth			15.3	1.89
	Plumstead			14.3	1.35
	Lee			15.1	2.06
	Lewisham (excluding Penge) ...			16.3	2.23
	Battersea			16.7	2.22
	CAMBERWELL			17.4	2.52
	Greenwich			18.8	2.76
	Lambeth			19.2	2.65
	Rotherhithe			21.1	2.80
	Woolwich			21.2	2.44
	Newington			24.0	3.67
	Bermondsey			24.1	3.46
	St. Olave			24.9	2.61
	St. Saviour			25.1	3.51
St. George-the-Martyr			27.7	4.53	

DEATH-RATES OF LONDON AND ITS SANITARY AREAS DURING THE FIFTY-TWO WEEKS OF 1900, AFTER DISTRIBUTION OF DEATHS IN PUBLIC INSTITUTIONS.

Sanitary Areas.				All Causes.	Principal Zymotic Diseases.
	Registration London	...	...	18.3	2.19
	West London	...	...	16.6	1.84
	North London	...	...	16.7	1.97
	Central London	...	...	22.3	2.15
	East London	...	...	21.9	2.89
	South London	..	..	18.0	2.20
South London.	Wandsworth	...	..	14.8	1.65
	Lee	...	...	15.1	1.40
	Lewisham (excluding Penge)	...	...	15.7	2.14
	CAMBERWELL	..	..	16.3	1.99
	Plumstead	...	...	16.3	2.30
	Battersea	..	..	16.8	2.34
	Lambeth	...	...	17.4	1.66
	Greenwich	...	...	18.0	2.27
	St. Olave	..	..	21.2	1.85
	Rotherhithe	...	...	22.5	3.40
	Newington	...	...	21.9	2.85
	Woolwich	...	...	22.1	2.79
	Bermondsey	...	...	22.7	3.24
	St. Saviour	...	...	25.2	2.93
St. George-the-Martyr	...	...	27.3	3.53	

In comparing the death-rate of Camberwell with those of other districts in South London, I have given the Registrar-General's estimate of the rate, to bring it into uniformity with those of the other districts. As I noted above, these are all probably under estimated.

It will be noticed that the forms of tables prepared this year are different to those in previous reports, the chief variation being the different classification of diseases by the Local Government Board. These now so closely approach the forms used for so many years in Camberwell that it is no longer necessary for me to give the latter as a comparison with the prevalence of disease in previous years, for this can be readily made from the classification adopted by the Local Government Board. There are, however, one or two points in the tables to which I shall presently draw attention.

Coming to the causes of the deaths, there were 156 deaths in 1899 from the various forms of accidental or other violence, compared with 167 in 1900; of this total 22 were returned as suicide. The deaths from premature birth and defective vitality were 358, compared with 341 in 1899. Convulsion of infancy was the cause of 89 deaths, as against 105 in the previous year. Sixteen deaths were caused by child-birth, either directly or remotely, and of these eight were due to one or other of the septic diseases following on this condition, a slight improvement on 1899, when there were 11 deaths from this disease. I need hardly repeat what I have previously urged, namely, that of all the so-called preventible diseases this particular one has the best claim to the description.

Among other new diseases classified separately by the Local Government Board we have alcoholism, together with cirrhosis of the liver. I give the figures for these two diseases separately, for the reason that although cirrhosis of the liver is most frequently caused by alcohol, it is not so in every case. The figures for alcoholism are 13, and for cirrhosis of the liver 37.

Venereal diseases accounted for 15 deaths, but, as in alcoholism, the fatal effects of the degenerative changes set up by the poisons of syphilis and alcohol are in part associated with the mental diseases, and also classified as changes in the arteries, kidneys and nervous system, which are grouped together among "other diseases."

Two hundred and seventy-seven deaths were registered from heart diseases, as compared with 251 in 1899. These include all those cases in which heart mischief itself appeared to be the primary cause of death, but do not include those cases of congenital heart diseases, which are classified under other causes.

Two hundred and seventeen deaths were ascribed to cancer, including all the forms of malignant disease, compared with 199 in 1899. It is often stated that cancer is on the increase, but this point is by no means proved; the increased registration of such disease is, I think, chiefly due to the fact that new growths are now diagnosed as cancer which were formerly certified as tumours of various kinds.

Among the "zymotic" diseases, hooping-cough caused 110 deaths, and measles 38, a contrast to the records of 1899, when there were 76 from hooping-cough, and 127 from measles. The above deaths, classified according to the locality in which they occurred, were, so far as hooping-cough is concerned, 32 in Camberwell, 38 in Peckham, and 40 in St. George's, while as regards measles, 1 was in Dulwich, 8 in Camberwell, 14 in Peckham, and 12 in St. George's. In three instances the address from which the patient had been removed to the Infirmary, &c., could not be ascertained. As usual in these maladies the fatal effects were almost entirely shewn in children under the age of 5. The deaths from measles were fewer than in any year since 1876.

Sixty-one deaths from hooping-cough, and 6 from measles took place in one or other of the public institutions, chiefly the Infirmary and Workhouse.

There were 126 deaths from influenza, 29 more than in 1899. I have included under this heading all cases where this appeared to be the primary cause of death, although bronchitis or some other inflammatory affection of the lungs was the disease which carried the patient off.

There were 204 deaths from diarrhœa, and 78 from other forms of inflammatory diseases of the intestines, such as enteritis, compared with a total of 371 in the previous year. The classification of the Local Government Board shews the mortality from the epidemic form of the disease, to which most of the deaths of infants are due, and which is probably caused by certain micro organisms. It is, however, decided that in future under this head should be included not only deaths from diarrhœa alone, but also from cholera and dysentery.

The causation of the summer diarrhœa of children has been brought prominently before the profession during the past year by the Milroy Lectures at the College of Physicians.

From the incidence of the disease, both as regards locality and age, the opinion was enunciated in these lectures that the milk in the various shops was infected by the dust blowing in from the streets, and that contamination largely arises through the agency of horse dung. I have before pointed out the result of the observations made in Liverpool some years ago, showing that the mortality among breast-fed children even

under the most insanitary conditions of residence was less than that of hand-fed children under good circumstances. It might, perhaps, be urged that the children of those mothers who were unable to nurse their offspring were not probably of the most robust kind, and therefore more liable to disease and death, but the difference appears to me to be too great to be explained in this way, and it would therefore seem evident that the cause of diarrhoea is in great measure associated with contamination of the milk which is the chief article of diet among infants. Anyhow, last year I recommended that a still further use should be made in what had been inaugurated in previous years—the practice of watering the streets and washing out the gullies with a weak solution of permanganate of potash. I was strengthened in this recommendation by a report from the Bacteriologist on the same subject.

Enteric fever caused 33 deaths, compared with 32 in 1899; of these 19 were of persons who had been removed to hospital. One death occurred in a resident of Dulwich. Camberwell, Peckham and St. George's have been respectively credited with 9, 10 and 11, while in two instances the deaths were of persons whose previous address we have been unable to ascertain. The notifications amounted to 186, of which the majority came from Camberwell. Inquiries were made into the history of each of these cases, but so far as we were able to ascertain there was no one factor especially at work. It was supposed in some parts of London that the disease had been spread by means of infected linen through the agency of mangling. In only one case in Camberwell were we able to find that linen from a house attacked by this disease was washed at a laundry where another case of enteric subsequently occurred.

The death-rate per 1000 from this disease is below that of London as a whole, and considerably under the rate of most of the South London parishes, a matter of congratulation, as this disease may be considered as "everywhere an index of the sanitary intelligence of a community." (Osler.)

Scarlet fever caused 19 deaths in 1899, and 11 in 1900; all these last occurred in persons who had been removed from their homes for treatment in one or other of the infectious disease hospitals. Six deaths were of inhabitants of Camberwell, 4 came from Peckham, and 1 from St. George's. The

total number of notifications of this disease was 784, compared with 1,175 in 1899. I may here remark that the death-rate from this disease in Camberwell is among the lowest of the London parishes.

Among the deaths registered during the year we have 7 from heat-stroke. These occurred in July and were among those who were either young, or exposed to the sun in the course of their work.

The report I have to present on diphtheria is almost the exact contrary to last year. Now I find myself in the pleasant position of being able to point out a decrease in the notifications, which amounted to 886, compared with 1,251 in 1899, while the deaths amounted to 131, as compared with 153 in the previous year. The notifications were diminished in all the districts, especially in Camberwell and St. George's. The death-rate for the whole of London was $\cdot 34$ per thousand, while that of Camberwell was $\cdot 49$, so that we are still above the average both for London and its south districts, but we are below most of the parishes bordering on our eastern and northern boundaries.

I give the figures for 1899 and 1900 for the neighbouring Sanitary Authorities :—

Sanitary Areas.	1899.	1900.
St. George-the-Martyr	1·04	0·38
St. Olave	0·81	0·28
Bermondsey	1·03	0·69
Battersea	0·86	0·19
Rotherhithe	0·78	0·63
Lambeth	0·51	0·32
Camberwell	0·61	0·49
Lewisham (excluding Penge) ...	0·75	0·34

It was not found that there were any special schools affected, so that there was no need for the closure of any of these institutions.

I have again to call the attention, not only of the Council, but of the public, to the fact that virulent diphtheria bacilli have been found after seven weeks from the disappearance of all naked-eye signs of the disease from the throat, and again to emphasise the importance of having a bacteriological

examination made of every case which has been notified as diphtheria. In the case of the Metropolitan Asylums Board's hospitals I understand that these examinations are made as a matter of routine before the child is returned to its home as cured, but in the case of those children who have been kept at home the whole time, this precautionary measure is not so systematically carried out by the medical men in attendance. We invariably send a letter to the head of the house where a child is attacked by this disease, pointing out that it will not be possible for the children to attend school until notice has been sent by the Council to the head teacher. Some of the authorities of the Board Schools have been most careful in refusing to allow such children to attend school until they have communicated with me, but I cannot by any means pay the same compliment to all, for I have found in many cases that children have been taken back without any certificate of disinfection from us, and without a bacteriological examination having been made of the throat. Now that there are facilities for the absolutely gratuitous examination of such cases, there can be no reason why the opportunities so provided should not be used by all the medical men in the Parish, and it would save many fresh cases if all the teachers were to satisfy themselves that this had been done before re-admitting the children who have either been notified as suffering from this disease, or have come from an infected house.

I give below the percentage of fatal cases in relation to the number of persons attacked by diphtheria and scarlet fever since 1895.

CASE MORTALITY OF DIPHTHERIA AND SCARLET FEVER.

	Diphtheria.	Scarlet Fever.
1895	19·5	5·3
1896	18·4	4·2
1897	14·3	2·7
1898	12·4	1·9
1899	12·7	1·6
1900	14·6	1·4

Altogether in the past year three cases of small-pox were notified. Of these, two were returned by the authorities of the Metropolitan Asylums Board as not being small-pox. This opinion I have no doubt was a correct one, for the persons who were sent back immediately mixed with others in the house as if they were non-infectious, and no further outbreak occurred. The third case was of a young man who had clearly contracted the disease on board ship. In this case we carried out the necessary precautionary measures, with the fortunate result that no further case occurred in the house. He was removed from Commercial Road to the Hospital Ship.

The Bacteriological Department instituted by the late Vestry has enabled me to give a more definite opinion as regards cases where people had been exposed to diphtheria, and where it was essential that they should not return to work if there were any chance of their being in an infected state. This has been particularly useful when cases occurred among school teachers and servants, who were kept away from their duties until it was certain that they were non-infective.

As the Council are aware, we systematically examine houses as regards their sanitary condition when a case of infectious disease has occurred. It may be of interest to supply the following table showing the defects usually met with, and the proportion in which they occur in the infected houses:—

NUMBER OF INFECTIOUS CASES NOTIFIED FROM JANUARY 1ST, 1900,
TO DECEMBER 31ST, 1900 = 2,285.

Drains Intercepted.			Defects.		Defective w.c.	Water Supply.		
Yes.	No.	?	House	Drain.		Main.	Cistern.	Defective.
934	429	378	626	274	366	1,687	543	270

The percentage of houses disinfected by the Council's officers after consumption rose from 15·4 to 18·2, but this year in a notably larger number of cases in answer to our circular offering disinfection we were informed that all necessary precautionary measures had been enjoined by the doctor during the illness, and had been fully carried out, so that there was no need for the assistance of the Council.

The By-laws for Houses Let in Lodgings were again considered by the Sewers and Sanitary Committee, especially with regard to the definition of the word "landlord," that is, the person upon whom the duty would devolve of carrying out the annual cleansing of the premises. As I have before pointed out, it is a matter of great importance that we should be able to look to some person of a more responsible holding than that of a weekly tenancy of the whole house, to carry out this work, and it was with this idea that I suggested that the Local Government Board should be asked to make some alteration. The matter was, however, deferred until after the election of the new Council.

At the request of the Committee, on October 9th I brought up a report for the re-organisation of the Sanitary Department. In view of the change of administration to the Borough Council this was adjourned, and at the end of the year 1900 was still under consideration.

SANITARY STAFF.

LOCAL GOVERNMENT BOARD, WHITEHALL, S.W.,

SEPTEMBER 3RD, 1900.

SIR,—I am directed by the Local Government Board to acknowledge the receipt of your letter of the 4th ultimo forwarding a statement showing the area and estimated population of each of the eleven districts into which the Vestry of the Parish of Camberwell propose to divide the Parish for sanitary purposes.

The proposed arrangement involves a reduction in the number of Sanitary Inspectors, and on comparing the staff employed by the Vestry with that in the service of the various Sanitary Authorities in the Metropolis, it will be seen that the population proposed to be assigned to the Sanitary Inspectors of all except the first and eleventh districts is considerably above the average population of a Sanitary Inspectors' district in the Metropolis generally, and this is especially so in the fourth, fifth and sixth districts. Calculated on the basis of the Metropolitan average (which is about 17,000 population to each Inspector) the number of Sanitary Inspectors' districts in the Parish of Camberwell should be fifteen.

Having regard to the above facts, the Board have considered whether in the interests of the Parish the Vestry are doing well to reduce the number of their Sanitary Inspectors. The Board are not aware of the reasons which have induced the Vestry to make the proposed reduction, and in asking them to reconsider the matter I am to suggest whether

instead of reducing the number of Sanitary Inspectors the Vestry should not rather add to their number.—I am, Sir, your obedient Servant,

(Signed) JOHN LITHIBY, *Assistant Secretary.*

C. W. TAGG, ESQ., VESTRY CLERK, PARISH OF CAMBERWELL.

REPORT OF MEDICAL OFFICER OF HEALTH.

To the Chairman and Members of the Sewers and Sanitary Committee.

GENTLEMEN,—On January 18th, 1898, I reported to the Committee on the subject of the supervision and working of the Public Health Department, and the recommendation of the Committee to the Vestry was that in future I should be the absolute head of my Department, responsible for myself and the Sanitary Staff direct to the Committee, and that I be responsible for all the correspondence of the Department, and that all complaints relating to the Sanitary Department at once be referred to me for report to the Committee direct. This was shelved by the Vestry with the exception of the question of the appointment of two additional clerks, to which the "previous question" was moved as an amendment and carried.

To the recommendations then put forward in the main I still adhere to, but certain modifications are necessary, first of all in consequence of the increased duties which will be imposed on the Sanitary Authority by the new Act, and also to effect some necessary improvement in the administration of the Sanitary Department.

First of all as regards the number of Inspectors. The Local Government Board imply that fifteen would be the proper number for a district the size of Camberwell, while your Committee apparently consider that eleven are sufficient.

In my opinion, however, I think that twelve, excluding the Inspector in charge of the Food and Drugs Acts, is the minimum, but I think that if the clerical staff be increased to the number that I propose, with this number we shall be able to carry out the Public Health Act in a proper manner, but not otherwise.

If, however, the Vestry should decide to carry out those sections of the Public Health Act which relate to Houses Let in Lodgings as they should be carried out, a further increase in the number of Inspectors will become necessary.

Now as regards the clerical staff. I think that in the future much should be done by the clerks that is at present done by the Inspectors, work which necessitates them being much longer in the Vestry Hall than is advisable. The latter should simply have as their clerical work their pocket books (of which they should have a double set), which they use as memoranda of their visits, &c., their time sheets and their books in which they ask power from the Committee to serve statutory notices and to make out the same. The clerks would fill up the complaint sheets and make out intimations. They should also keep the register of inspections of schools and cowhouses.

All the clerks should be able to write shorthand, further I think that one of them should be a sufficiently skilled draughtsman to draw plans of the reconstruction of drains when we have no chance of getting the same from those whose duty it is to carry out the work.

At present there is no such record kept, and I think it is highly desirable that this procedure should be adopted.

I should put one of the clerks on to the special duty of keeping a biography, so to speak, of each house, noting everything which occurs there.

All these additional clerks and the work that they will have to carry out will need much closer and more detailed supervision than it is possible for me to give, and I therefore recommend that provision should be made for an officer, who should be a qualified Sanitary Inspector, to be appointed, whose duty chiefly would be to see that all the clerical work of the office is carried out.

(a) He would see that all complaints are duly entered and that they are attended to and remedied without unnecessary delay.

(b) He would see that the insanitary conditions which may be discovered on the inspection of a house where infectious disease has occurred should be remedied as soon as possible.

(c) He would see that all places, such as schools, &c., have the regular inspection that they need.

(d) He would see that all letters are duly attended to and answered, and arrange for the drawing of plans of drainage works carried out when no plans are submitted by the builders. He would see that all registers and diaries are properly kept.

(e) He would act as an additional Inspector where my presence is not necessary.

(f) He would countersign all certificates relating to drainage works, except when I judged that I should give these personally.

(g) He would receive instructions from me relating to any matters I wished attended to and give out these instructions to the Inspectors. In other matters not set out here he would act under my guidance. In case of difficulty or doubt on any point the Inspectors as heretofore are to consult me.

Under this scheme it will therefore still remain with me to decide what house-to-house inspections are to be made, and ratepayers and owners must look to me for appeal unless they should choose rather to apply to the Committee for redress.

I recommend, therefore, that the following appointments be made :—

1. A Superintendent or Chief Clerk.
2. Another Sanitary Inspector.
3. Three Clerks all able to write shorthand, and one of these able to draw out plans.

I also recommend that the other recommendations with regard

to the opening of letters, &c., contained in my report of 1898 be still carried out.

In conclusion I would mention that I have been in communication with some of the other Vestries, and have tried to introduce some of their good regulations. I can only repeat that in my opinion it is, as in 1898, that our weakness is in the clerical part of the work and not in outdoor inspections.—I am, Gentlemen, your obedient Servant,

(Signed) FRANCIS STEVENS, *Medical Officer of Health.*

Below is shown a table giving details of the work of the Disinfecting Department showing the enormous number of articles dealt with. I am glad to say that we had practically no well-founded complaints with regard to the work of disinfection, while loss and wrong delivery of articles collected by your staff were practically unknown.

As the Council are aware, we only have one disinfecting machine, and in the course of the year owing to necessary repairs having to be carried out we were compelled to make use of the station at Lambeth, by the kind permission of their Medical Officer of Health, but on another occasion when Lambeth were not able to assist us we were helped by Bermondsey, who made a charge of 10s. per lot.

It appears to me now, however, that it would be wise in view of the extension of the Borough, and also to provide for cases of extra stress, that another machine should be provided, and that it might be well considered as to whether this second machine should not be placed in a different part of the Borough so as to avoid the long journeys from Dulwich, which is so rapidly being covered with houses, down to Peckham Park Road.

RETURN OF HOUSES, CLOTHING AND MISCELLANEOUS ARTICLES DISINFECTED
DURING THE YEAR 1900.

No. of Houses.	Beds.	Blankets.	Sheets.	Pillows.	Bolsters.	Cushions.	Mattresses.	Palliasses.	Quilts.	Clothing.	Carpets.	Curtains.	Rugs.	Sundries.
1758	4037	5865	7384	8345	1767	927	721	2308	1742	15783	375	483	1417	12006

Tables V. and VI. give the work carried out by your Inspectors during the past year, arranged in tabular form under the head of each Inspector and also the nature of the work. The total number of house to house inspections amounted to 7,116, instead of 6,206 in 1899. The complaints numbered 957, while the inspections made in consequence of such complaints amounted to 1,131. There is thus a considerable increase even on the figures of 1898. As a result of the house-to-house inspections and the complaints referred to above, and the occurrence of infectious disease, 5,061 intimations were served under the Public Health (London) Act, followed up in 1,217 cases by statutory notices, 220 of which related to houses let in lodgings. Further, in 116 instances it was necessary to issue summonses to enforce the requirements of the Committee. There were 722 inspections of Cowhouses and Dairies, the former number, together with that for the Slaughterhouses, excluding the inspections made by myself of each of these premises previous to the licensing day. This is an increase of over 200 on the figures for the previous year. All our requirements were satisfactorily carried out before the meeting of the Licensing Committee of the London County Council, so that in no case was it necessary for us to offer any opposition to the renewal of the licenses.

There were 504 inspections of Bakehouses by the Inspectors, including those made by myself.

The Department sustained the loss of an able and zealous servant in the case of Mr. Griffiths, who died in February of this year. He had been ailing for some time past, and this necessitated the employment of Mr. H. K. Wright, who was temporarily appointed the notification clerk.

In conclusion I have to thank all the members of the Public Health Staff for the assistance they have rendered me during the past year.

I am, Gentlemen,

Your obedient servant,

FRANCIS STEVENS.

TABLE V.—RETURN OF WORK PERFORMED IN THE SANITARY DEPARTMENT DURING THE 52 WEEKS ENDING DECEMBER 29TH, 1900.

TABLE A. Description of Work.	INSPECTORS.											Totals.
	Pointon.	Eagle.	Chadder- ton.	Scudamore	Collins.	Heath.	Kerslake.	Morley.	Homer.	Farmer.	Dewey.	
Complaints	81	105	70	104	44	80	50	76	94	117	136	957
Inspections arising from Complaints ..	107	152	86	80	70	119	95	82	129	182	188	1290
House-to-House Inspections	571	779	820	328	261	846	705	473	888	731	714	7116
No. of inspections of Bakehouses.. ..	48	45	24	47	65	12	14	41	59	46	29	430
Do. do. Cowhouses and Dairies ..	26	26	0	45	12	16	4	97	40	64	33	472
Do. do. Slaughterhouses	24	30	25	0	45	3	3	33	38	26	3	230
Do. do. Laundries	67	22	23	31	13	16	10	18	18	38	13	269
Do. do. Infectious Cases	203	224	144	196	100	273	93	144	173	162	231	1943
Do. do. Schools, Board	109	66	96	93	38	39	9	76	61	102	114	803
Do. do. do. Private	42	7	15	27	33	2	3	18	3	17	3	170
Do. do. Workshops	35	39	38	15	22	18	23	17	140	39	9	395
Do. do. Sanitary Conveniences, Public Urinals, &c.	80	0	2	46	4	22	36	0	51	36	61	338
No. of inspections of Sanitary Conveniences, Private Urinals, &c.	104	251	152	161	109	315	204	280	209	294	129	2208
No. of inspections of Railway Stations ..	48	35	17	0	97	0	4	0	0	24	0	225
Houses Let in Lodgings Inspected ..	1	0	4	2	0	3	204	0	0	0	0	214
Tenement Houses Inspected	1	85	92	12	8	405	113	4	77	6	101	904
Miscellaneous Inspections	7	0	0	0	75	7	34	23	82	3	84	315
Intimations served under the P.H. Act ..	369	707	367	321	178	706	522	442	261	544	644	5061
Notices served under the P.H. Act ..	33	147	23	64	58	137	131	132	56	138	157	1076
Do. do. Houses Let in Lodgings ..	1	0	0	0	22	0	197	0	0	0	0	220
Summons taken out under the P.H. Act ..	3	5	4	6	5	14	6	4	9	21	13	140
Re-Inspections of Works in hand	4763	4572	4212	3970	3803	4335	4299	4124	5494	5552	3694	48818
" Infectious Diseases	35	244	92	227	124	208	48	96	115	74	119	1382
New Buildings Inspected and Re-Inspected	144	23	90	525	646	171	84	67	67	328	116	2261
TABLE B.												
Reconstruction of Old Drains Completed	149	157	93	70	101	112	49	106	125	152	97	1211

TABLE VI.

TABLE C.		Totals.
Description of Work.		
Houses Ventilated on Staircase	634	634
" " under Floors	406	406
" Cleansed	1141	1141
" Repaired (Gutters, &c.)	1000	1000
Water Supplied to Premises	201	201
Drains Cleansed, Repaired and Trapped	1647	1647
Sinks, Rainwater Pipes, &c., Disconnected	620	620
Stables, Yards and Areas Paved, Levelled, and Drained	1028	1028
Closets Provided, Repaired, Cleansed or Removed	1294	1294
Water Laid on to Closets	1267	1267
Cisterns Provided or Reconstructed	72	72
" Repaired, Covered or Cleansed	311	311
Dustbins Provided, Repaired, or Removed	916	916
Cesspools Emptied, Abolished, or Drained into Sewer	7	7
Refuse or Manure Removed	620	620
Animals, &c., Removed, or to be Kept Clean	39	39
Private Urinals, Cleansed and Supplied with Water	62	62
Public	4	4
Overcrowding Abated	80	80
Smoke Nuisances Abated	80	80
Trade Nuisances Abated	26	26
Manure Pits Supplied	105	105
Interceptors and Chambers Supplied	291	291
Seizures of Unwholesome Meat	11	11
TABLE D.—SALE OF FOOD AND DRUGS ACT, &c.		
Samples Submitted for Analysis	572	572
Summonses under the above Act	121	121
Inquests	266	266
Bodies Removed to Mortuary	300	300
Post-Mortem Examinations	112	112

TABLE VII.

MORTALITY RETURNS OF ZYMOTIC DISEASES QUARTERLY
FOR THE LAST SIX YEARS.

YEAR.	Hooping Cough.	Measles.	Scarlet Fever.	Diphtheria.	Fever.	Small Pox.	Diarrhoea.	Influenza.
1895. 1st Quarter	13	3	8	43	9	0	22	98
2nd "	22	3	9	41	3	0	20	17
3rd "	7	23	10	50	12	6	174	8
4th "	19	71	20	47	6	1	38	10
1896. 1st Quarter	73	146	15	52	13	0	14	8
2nd "	67	34	11	55	6	0	24	9
3rd "	31	8	11	71	11	0	183	3
4th "	9	4	15	84	4	0	17	5
1897. 1st Quarter	34	2	6	51	6	5	17	10
2nd "	30	4	6	27	4	0	16	10
3rd "	20	34	8	46	4	0	288	5
4th "	17	85	12	43	14	0	18	6
1898. 1st Quarter	35	65	5	20	5	0	18	57
2nd "	40	40	4	26	6	0	16	14
3rd "	31	4	4	14	4	0	292	4
4th "	15	4	5	26	10	0	18	11
1899. 1st Quarter	44	18	6	23	4	0	18	36
2nd "	23	49	2	25	0	0	14	29
3rd "	8	39	5	42	11	0	322	4
4th "	1	21	6	72	17	0	17	28
1900. 1st Quarter	5	21	3	54	6	0	19	99
2nd "	25	9	1	20	6	0	13	18
3rd "	62	1	1	18	7	0	219	1
4th "	18	7	6	39	14	0	31	8

TABLE VIII.
ANNUAL MORTALITY RETURN OF ZYMOTIC DISEASES,
FROM 1856 (inclusive).

YEAR.	Hooping Cough.	Measles.	Scarlet Fever.	Diph- theria.	Fever.	Small Pox.	Diarrhoea.
1856 ..	32	48	30		19	5	29
1857 ..	30	7	44		24	4	50
1858 ..	51	28	129	14	20	7	26
1859 ..	66		82		31	12	?
1860 ..	36	40	34	11	26	5	?
1861 ..	72	8	13	25	25	2	?
1862 ..	53	32	101	40	64	0	?
1863 ..	57	32	124	29	41	14	?
1864 ..	61	29	83	16	51	10	?
1865 ..	52	39	55	14	31	12	118
1866 ..	72	38	59	11	53	35	76
1867 ..	64	20	75	8	41	9	67
1868 ..	58	67	71	17	45	13	146
1869 ..	134	43	164	9	46	9	133
1870 ..	49	24	192	10	57	23	160
1871 ..	50	29	60	9	40	153	143
1872 ..	132	46	86	1	38	41	124
1873 ..	60	49	7	7	38	2	137
1874 ..	76	54	24	9	57	2	93
1875 ..	125	64	177	14	40	1	107
1876 ..	93	33	78	16	31	32	126
1877 ..	61	72	38	12	27	124	94
1878 ..	206	88	59	29	41	81	176
1879 ..	122	123	76	31	35	80	75
1880 ..	206	59	126	32	36	33	223
1881 ..	74	95	120	29	44	190	127
1882 ..	180	168	76	60	44	66	100
1883 ..	91	112	48	49	35	19	122
1884 ..	173	171	82	78	40	34	240
1885 ..	136	91	20	68	27	154	135
1886 ..	156	97	18	48	30	2	215
1887 ..	203	133	99	71	41	0	239
1888 ..	130	101	105	65	31	1	115
1889 ..	149	193	37	76	27	0	145
1890 ..	191	163	51	60	26	0	144
1891 ..	123	67	29	56	21	1	142
1892 ..	128	189	63	85	21	1	169
1893 ..	104	78	80	118	30	11	213
1894 ..	126	164	45	193	21	2	115
1895 ..	61	100	47	181	30	7	254
1896 ..	180	192	52	262	34	0	238
1897 ..	101	125	32	167	28	5	339
1898 ..	121	113	18	86	25	0	350
1899 ..	76	127	19	162	32	0	371
1900 ..	110	38	11	131	33	0	282

Under the head of fever I have only included the deaths from enteric fever.

TABLE A.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.		DEATHS UNDER ONE YEAR OF AGE.		DEATHS AT ALL AGES. TOTAL.		DEATHS IN PUBLIC INSTITUTIONS.	Deaths of Non-residents registered in District.	Deaths of Residents registered beyond District.	DEATHS AT ALL AGES. NETT.	
		Number.	Rate.*	Number.	Rate per 1,000 Births registered.	Number	Rate.*				Number.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1891	236,693	7,338	31.0	1,051	143.2	4,861	20.5	1,224	650	282	4,493	18.9
1892	242,264	7,478	30.9	1,155	154.2	4,942	20.3	1,194	663	339	4,618	19.0
1893	247,950	7,471	30.1	1,197	160.2	5,024	20.2	999	650	432	4,806	19.3
1894	253,770	7,384	29.1	1,105	149.6	4,288	16.8	1,114	574	431	4,145	16.3
1895	259,725	7,531	28.9	1,238	164.3	4,879	18.7	1,192	610	458	4,727	18.2
1896	253,998	7,665	30.2	1,197	156.1	4,856	19.1	1,271	613	483	4,726	18.6
1897	257,772	7,478	29.0	1,187	158.7	4,525	17.5	1,222	620	472	4,377	16.9
1898	261,551	7,427	28.3	1,191	160.3	4,639	17.7	1,213	643	373	4,369	16.7
1899	265,385	7,443	28.0	1,181	158.6	4,941	18.6	1,468	732	484	4,693	17.6
Averages for years 1891-9.	253,234	7,468	29.5	1,167	156.1	4,772	18.8	1,210	639	417	4,550	17.9
1900	269,276	7,211	26.7	1,107	153.5	4,748	17.6	1,421	767	474	4,455	16.5

* Rates calculated per 1,000 of estimated population.

Area of District in acres (exclusive of area covered by water) } 4,342	Total population at all ages, Number of inhabited houses, Average number of persons per house,	235,344 33,849 6.9	} At census of 1891.
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TABLE B.

NAMES OF LOCALITIES.	1. BOROUGH.				2. DULWICH.				3. CAMBERWELL.				4. PECKHAM.				5. ST. GEORGE'S.			
	Population estimated to middle of each Year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each Year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each Year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each Year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each Year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.
YEAR.	<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>
1890 ..	231658	7298	4521	1112	6718	74	80	13	79963	2291	1375	329	82553	2657	1758	421	62424	2276	1298	349
1891 ..	236693	7338	4493	1051	6843	65	79	8	82325	2360	1431	293	83821	2655	1583	406	63720	2228	1400	344
1892 ..	242264	7478	4618	1155	6979	73	89	10	85028	2377	1418	305	85179	2744	1728	471	65142	2284	1383	369
1893 ..	247950	7471	4806	1197	7118	64	86	5	87822	2405	1523	349	86599	2724	1696	450	66597	2278	1501	393
1894 ..	253770	7384	4145	1105	7260	78	57	4	90706	2397	1350	324	87961	2667	1559	425	68084	2242	1179	352
1895 ..	259725	7531	4727	1238	7404	76	73	6	93685	2405	1490	367	89386	2742	1753	468	69604	2308	1411	397
1896 ..	253998	7665	4726	1197	7556	75	66	12	90740	2487	1462	369	88486	2784	1801	423	67217	2319	1397	393
1897 ..	257772	7478	4377	1187	7707	94	67	5	92582	2385	1325	367	89472	2789	1699	442	67976	2210	1286	373
1898 ..	261551	7427	4369	1191	7861	91	79	8	94461	2427	1424	384	90469	2737	1695	447	68744	2172	1171	352
1899 ..	265385	7443	4693	1181	8018	101	85	9	96379	2443	1475	371	91476	2669	1739	429	69520	2230	1394	372
Averages of Years 1890 to 1899.	251076	7451	4547	1161	7346	79	76	8	89869	2397	1427	345	87540	2719	1701	438	66902	2254	1342	369
1900 ..	269276	7211	4455	1107	8178	109	83	8	98335	2356	1401	315	92495	2705	1664	430	70305	2041	1307	354

TABLE C.—CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1900.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.							TOTAL CASES NOTIFIED IN EACH LOCALITY.				NO. OF CASES REMOVED TO HOSPITAL FROM EACH LOCALITY.			
	At all Ages.	At Ages—Years.						Dulwich.	Camberwell.	Peckham.	St. George's.	Dulwich.	Camberwell.	Peckham.	St. George's.
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.								
Small-pox	3	..	1	1	1	..	..	..	1	1	1	..	1	1	1
Cholera .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria	886	13	310	426	78	59	..	7	342	326	211	2	230	244	153
Membranous Croup	10	1	9	..	..	..	..	..	3	6	1	..	1	2	..
Erysipelas	215	5	6	14	29	145	16	2	73	70	70	..	11	4	7
Scarlet Fever ..	784	6	223	462	69	24	..	17	286	303	178	2	174	217	137
Typhus Fever ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever ..	186	1	3	49	59	72	2	3	69	58	56	1	35	38	34
Relapsing Fever ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Continued Fever ..	6	..	..	1	2	3	..	..	1	2	3	..	1	..	2
Puerperal Fever ..	11	..	..	..	2	9	..	..	6	3	2	..	1	..	..
Plague .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	2101	26	552	953	240	312	18	29	781	769	522	5	454	506	334

TABLE D.—CAUSES OF, AND AGES AT, DEATH DURING YEAR 1900.

CAUSE OF DEATH.	DEATHS IN WHOLE DISTRICT AT SUBJOINED AGES.							DEATHS IN LOCALITIES (AT ALL AGES.)					
	All Ages.	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	Dulwich.	Camberwell.	Peckham.	St. George's.	Locality unknown.	Deaths in Public Institutions.
Small-pox .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles	38	5	31	2	..	..	..	1	8	14	12	3	6
Scarlet Fever	11	..	7	3	1	..	..	..	6	4	1	..	11
Hooping-cough	110	52	53	5	..	..	..	..	32	38	40	..	6
Diphtheria and Membranous Croup	131	6	85	39	1	..	..	..	45	52	34	..	94
Croup .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Fever { Typhus .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Enteric	33	..	..	2	14	15	2	1	9	10	11	2	19
{ Other continued .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Epidemic Influenza	126	..	2	..	2	61	61	1	48	32	38	7	18
Cholera .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Plague .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Diarrhœa	204	165	32	1	..	1	5	..	37	89	78	..	2
Enteritis	78	55	10	1	..	8	4	1	28	30	16	3	17
Puerperal Fever	8	..	..	..	3	5	..	..	3	3	1	1	1
Erysipelas	12	3	..	..	..	8	1	..	1	4	7	..	2
Other Septic Diseases	43	10	3	4	5	16	5	..	8	16	17	2	24
Phthisis	356	2	11	8	40	280	15	5	108	121	100	22	105
Other Tubercular Diseases	173	51	62	28	8	22	2	2	48	68	53	2	40
Cancer, Malignant Disease	217	..	..	1	2	140	74	7	78	86	39	7	77
Bronchitis	585	187	96	4	1	128	169	8	154	224	183	16	77
Pneumonia	212	27	26	5	15	92	47	8	64	65	67	8	42
Pleurisy	18	..	..	1	1	11	5	..	1	5	12	..	1
Other Diseases of Respira- tory Organs	39	9	11	2	1	15	1	1	13	17	8	..	5
Alcoholism	50	..	1	..	..	42	7	..	21	15	14	..	7
Cirrhosis of Liver } .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Venereal Diseases	15	9	2	..	..	4	..	..	8	3	3	1	7
Premature Birth	124	124	..	..	..	..	..	2	43	35	44	..	4
Diseases and Accidents of Parturition	8	..	..	..	2	6	..	..	1	2	5	..	..
Heart Diseases	277	3	..	19	20	157	78	4	101	91	75	6	58
Accidents	145	32	10	10	8	56	29	6	52	49	37	1	54
Suicides	22	..	..	1	1	19	1	..	2	11	8	1	8
Mental Disease	69	..	..	..	2	54	13	2	9	13	8	37	63
Old Age	314	..	..	..	..	8	306	7	97	113	63	34	118
All other causes	1037	367	66	15	31	336	222	24	314	381	276	42	262
Male, 2,313.	4455	1107	508	151	158	1484	1047	80	1339	1591	1250	195	1128
All causes .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Female, 2,142.	..	..	..	..	..	..	..	..	..	..	..	..	..



BOROUGH OF CAMBERWELL.

PUBLIC HEALTH DEPARTMENT.

TELEPHONE HOP, 1207 & 1443.

TOWN HALL.

CAMBERWELL, S. E.

4th July, 1901.

Dear Sir,

My report for the year 1900 will be out of the printer's hands in the course of a few weeks, when I will forward you a copy.

Yours faithfully,

Ernie Stevens
Medical Officer of Health.

CAM 8

The Librarian,

Library of the British Medical Association,

429, Strand, W.C.

BOROUGH OF CAMBERWELL

PUBLIC HEALTH DEPARTMENT

TOWN HALL

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PUBLIC HEALTH DEPARTMENT,

TOWN HALL,

CAMBERWELL, S. E.

TELEPHONE HOP, 1207 & 1443.

11th September, 1901.

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Yours faithfully,

Frank Stevens

Medical Officer of Health.

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BOROUGH OF CAMBERWELL

PUBLIC HEALTH DEPARTMENT

TOWN HALL

STRENGTH FOR TOGETHER

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