

Report upon the public health & sanitary condition of Battersea during the year 1900.

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Battersea Borough Council.

Memorandum to

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In re

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

London
B-I
BAT 8

From

G. F. McCLEARY, M.B., D.P.H.
Medical Officer of Health,
MUNICIPAL BUILDINGS,
LAVENDER HILL, S.W.

Telephone No. 68,
BATTERSEA.



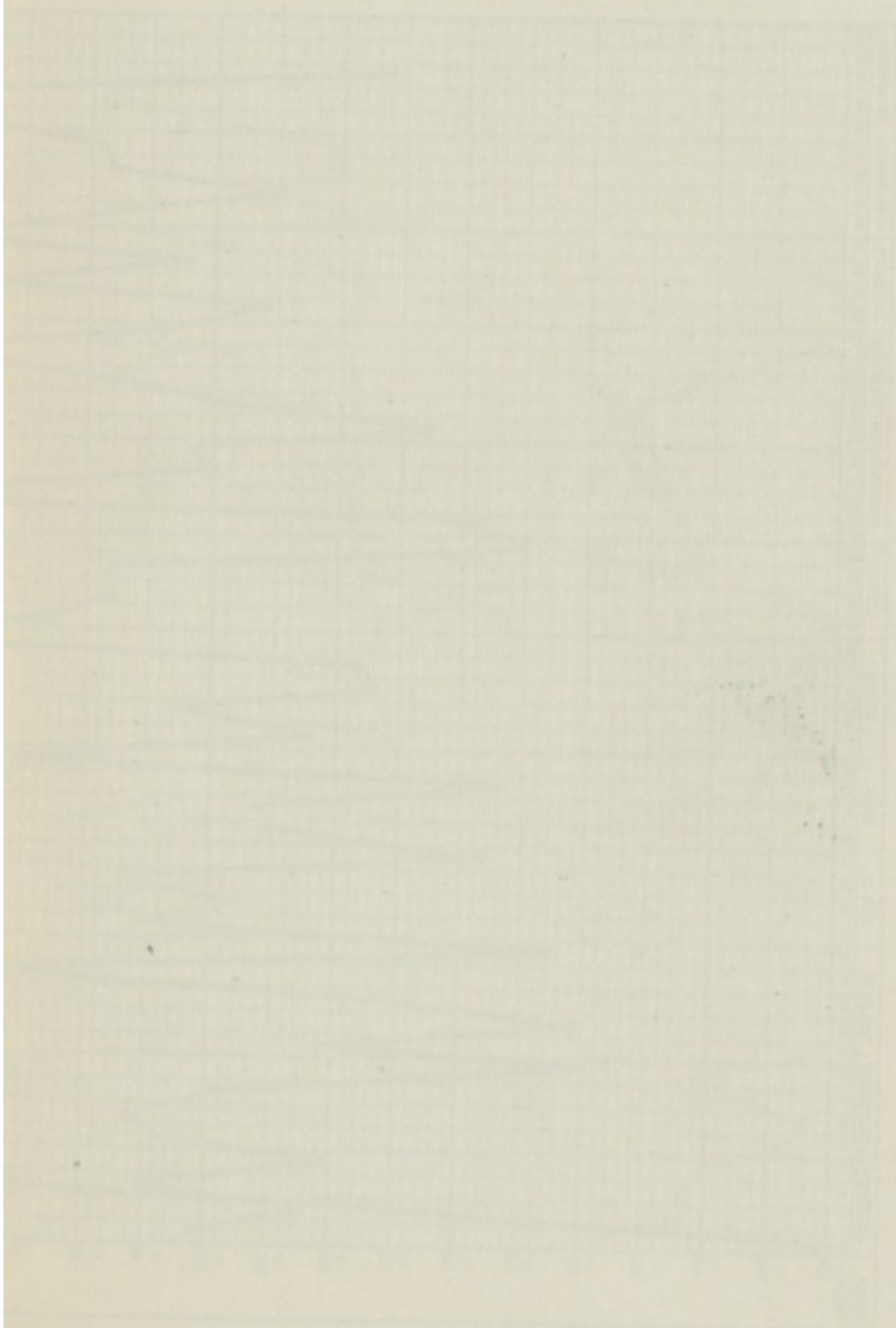
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REPORT

PUBLIC HEALTH & SANITARY CONDITION



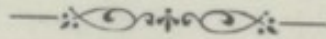


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Battersea Borough Council.



REPORT

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PUBLIC HEALTH & SANITARY CONDITION

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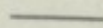
BATTERSEA

During the Year 1900,

BY

W. H. KEMPSTER, M.D.,

MEDICAL OFFICER OF HEALTH.



1901.

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A List of the Officers and Staff of the Public Health Department during the year 1900.

OFFICERS.

Medical Officer of Health.

W. H. KEMPSTER, M.D.

Public Analyst.

C. E. CASSAL, F.I.C.

Chief Sanitary Inspector.

ISAAC YOUNG.

Sanitary Inspectors.

No 1 District	...	...	...	JOHN HERRIN.
„ 2 „	...	...	...	ALFRED CHUTER.
„ 3 „	...	...	...	JAMES LAWRENCE.
„ 4 „	...	...	...	ARTHUR EDWARD PURNELL.
„ 5 „	...	...	...	JOHN THOMAS BAXTER.
„ 6 „	...	...	...	HORACE MARRABLE.
„ 7 „	...	...	...	ARTHUR ODELL.
„ 8 „	...	...	...	HUBERT HARRY MAY.

Clerks.

Senior Office Clerk	...	...	DANIEL ELWYN RICHARDS.
Junior Clerks	}	...	ISAIAH GEORGE BRIGHTING.
		...	BERTRAND WILLIAM SEARS.
		...	THOMAS FREDERICK DUNNING.

STAFF.

Disinfectors and Drain Testers.

S. TERRY.	H. HAYLLAR.
A. NASON.	J. SMITH.
J. BRADSHAW.	G. WHEABLE.
J. HOLLOWAY.	G. SEWELL.

Mortuary Keeper.

W. SHOESMITH.



To the Council of the Metropolitan Borough of Battersea.

GENTLEMEN,

I have the honor to present my Thirtieth and last Annual Report upon the Public Health and Sanitary Condition of Battersea.

During the year under report, several important changes have taken place; in May the Registration District of West Battersea was divided, and there are now three Registration Districts—East Battersea, North-West Battersea, and South-West Battersea; and by the Local Government Act, 1899, Battersea became a Metropolitan Borough, and several changes were made in the boundaries. In order, however, to render the statistics of the year of value for comparative and other purposes, the original Registrar's Districts and Parish Boundaries have continued to be adopted until the 29th December, 1900. By the recent changes in Local Government, duties which were formerly imposed upon the London County Council have been transferred to the Borough Council, viz., the registration of Dairies and Milkshops under the Dairies, Cowshed and Milkshops Order of 1885, and the supervision of Cowhouses, Slaughter-houses, and Offensive Trades. The Sale of Food and Drugs Act, 1899, also places upon the local authority the duty of the registration of wholesale dealers in Margarine and Margarine Cheese.

The remarkable and highly satisfactory feature of the Public Health during the year has been the enormous diminution of notifiable infectious disease. In no year since notification became compulsory has such freedom from diseases of this class been attained, the reduction being most pronounced in regard to Diphtheria.

Estimated Population.

The Census Enumeration which will be made on April 1st, 1901, would form a more correct basis for estimating the population of the year 1900 than would the Census figures of 1896; but as the result of the coming Census will not be obtainable probably until early in May, it is necessary as in previous years to rely upon an estimate based upon the assumption that the increase shown in the intercensal period (1891-1896) has since been maintained. The population as estimated for the year 1899 was 174,640, and if to this be added the average annual increase during the five years ending 1896, viz., 2,931, the population for 1900 would be 177,571, and upon this figure will be based the various birth, death and other rates.

Births and Birth-Rate.

Five thousand one hundred and sixty-one births were registered in Battersea during the year; of these, two thousand six hundred and eight were males and two thousand five hundred and fifty-three females. The birth-rate hereby shewn is equal to 29.0 per 1,000 of the population, and although higher than the Metropolis which was 28.6 per 1,000, is the lowest ever recorded in Battersea. The birth-rate for Battersea is, in fact, steadily declining each year, as the following rates for the last ten years will show. This reduction cannot be definitely explained, but is probably due to the fact that Battersea is not so largely populated by young married people of child-producing age as formerly.

1891	...	...	...	...	34·6
1892	...	...	...	...	32·3
1893	..	...	...	...	33·2
1894	...	....	...	...	31·4
1895	...	...	...	...	32·3
1896	...	..	...	...	32·3
1897	...	...	...	...	31·2
1898	...	...	...	...	30·0
1899	...	...	...	...	29·6
1900	...	...	...	...	29·0
Average for 10 years			...	...	31·5
Birth-rate for London, 1900				...	28·6

Deaths and Death-Rates.

Two thousand nine hundred and fifty-one deaths were registered during the year. Of these, one thousand five hundred and seventeen were males and one thousand four hundred and thirty-four females, the distribution between the sexes being fairly equal. The registered death-rate was therefore equal to 16·6 per 1,000 of the population compared with 18·8 in the whole Metropolis, where the deaths registered numbered eighty-six thousand and seven.

The following table classifies the deaths registered in Battersea in regard to locality and as to the number of "residents" and "non-residents":—

TABLE I.

LOCALITY.	DEATHS OF "RESIDENTS."	DEATHS OF "NON- RESIDENTS."	TOTALS.
East Battersea ...	1,042	7	1,049
West Battersea (excluding institutions) ...	1,294	10	1,304
Wandsworth and Clapham Union Infirmary }	307	260	567
Bolingbroke Hos- pital	15	16	31
Totals	2,658	293	2,951

It will be seen from the above table that two hundred and ninety-three of the deaths registered related to "non-residents," and, therefore, to arrive at a correct figure as to the mortality of Battersea "residents," it is necessary to eliminate that number from the statistics and include those deaths of "residents" which have occurred during the year in other parts of the Metropolis outside Battersea, numbering three hundred and twenty and producing a corrected total of two thousand nine hundred and seventy-eight. The corrected death-rate is thus equal to 16.7 per 1,000 of the population.

The localities in which the deaths of "residents" registered in other parts of the Metropolis occurred are here set out:—

In Union Workhouses and Infirmaries	15
General and Special Hospitals	161
Metropolitan Asylums Board Hospitals ...	53
County and other Lunatic Asylums ...	71
Elsewhere (including River Thames, and other violent or sudden deaths in Streets, &c.)	20
Total	<u>320</u>

The following Table II. classifies according to age, sex, cause of deaths, &c., those registered in the Metropolis outside Battersea. Zymotic Diseases contributed fifty-seven deaths most of these occurring in the hospitals of the Metropolitan Asylums Board. Deaths from violence numbered twenty-six compared with twenty-seven during the preceding year; and those from Phthisis and other Tubercular Diseases forty-three compared with forty-nine during 1899.

TABLE II.

DEATHS OF BATTERSEA "RESIDENTS" OCCURRING OUTSIDE THE
BOROUGH IN PUBLIC INSTITUTIONS AND ELSEWHERE WITHIN THE
METROPOLIS.

CAUSE OF DEATH.	TOTALS.	SEX.		AGE.							INSTITUTIONS, &c.				
		Males.	Females.	Under 1 year.	1 to 5 years.	All under 5.	5 to 15 years.	15 to 25 years.	25 to 65 years.	65 and upwards.	Union Workhouses, &c.	General and Special Hospitals.	Asylums Board Hospitals.	County and other Lunatic Asylums.	Elsewhere.
ZYMOTIC DISEASES.	Small Pox ...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Scarlatina ...	11	5	6	8	8	3	...	...	...	...	11	...	...
	Diphtheria ...	19	12	7	2	10	12	5	2	...	...	1	18	...
	Membranous Croup ...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Typhus Fever ...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Enteric " ...	15	11	4	...	...	...	4	3	8	...	1	14	...
	Continued Fever ...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Relapsing " ...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Puerperal " ...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Cholera ...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Erysipelas ...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Measles ...	1	1	...	...	...	...	...	1	...	...	1	...	...
	Whooping Cough ...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Diarrhœa ...	7	5	2	6	1	7	...	...	...	...	7	...	...
Other Zymotics ...	4	...	4	...	...	...	...	...	4	3	...	...	1	
Total Zymotics...	57	34	23	8	19	27	12	5	9	4	3	10	43	1	
Rheumatic Fever...	2	...	2	...	...	...	...	...	2	...	...	2	...	...
Ague ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Phthisis and other } Tubercular Diseases }	43	28	15	1	11	12	3	6	22	...	2	31	2	8	
Respiratory ...	25	11	14	1	5	6	4	...	10	5	1	12	4	6	
Circulatory ...	35	21	14	...	1	1	2	4	16	12	3	23	...	5	
Nervous ...	55	33	22	1	2	3	6	4	34	8	2	15	2	35	
Cancer ...	29	13	16	...	...	...	1	1	19	8	...	25	...	4
Violence ...	26	19	7	1	3	4	2	3	16	1	...	15	...	11	
All Other Diseases	48	21	27	7	1	8	4	4	20	12	4	28	2	12	
TOTALS ...	320	180	140	19	42	61	34	27	148	50	15	161	53	71	

In the foregoing table, twenty deaths will be found recorded as having occurred "elsewhere," the places where death occurred being here set out:—

Devonshire Road, Hackney.

St. John's Park, Holloway.

Charing Cross.

Hibernia Wharf, London Bridge.

Cable Street, E.

Buckingham Palace Road.

York Road, Wandsworth.

Chelsea Embankment.

Grosvenor Road, Pimlico (2).

Gasworks, Wandsworth.

Wimbledon.

St. Martin's-in-the-Fields.

West Hampstead.

St. Anne's House.

Vauxhall Bridge Road.

River Thames (4).

Tables III. and IV. show the number of births and deaths registered weekly in East and West Battersea respectively, and include the deaths of all persons whether "residents" or otherwise. The incidence of births and deaths at the various periods is also shown, the figures being grouped in quarters for that purpose, with additional particulars as to causes of death to be found in Table V.

TABLE III.

BIRTHS AND DEATHS REGISTERED IN EAST BATTERSEA
DURING THE FIFTY-TWO WEEKS OF 1900.

Week of Year.	Week ending:—	BIRTHS.			DEATHS.		
		Males.	Females.	TOTAL.	Males.	Females.	TOTAL.
1	6th Jan.	22	21	43	23	33	56
2	13th „	30	28	58	19	11	30
3	20th „	20	26	46	18	14	32
4	27th „	19	25	44	16	11	27
5	3rd Feb.	19	22	41	10	10	20
6	10th „	16	26	42	9	6	15
7	17th „	26	24	50	15	14	29
8	24th „	32	36	68	12	11	23
9	3rd March	19	20	39	11	8	19
10	10th „	24	34	58	11	11	22
11	17th „	20	29	49	13	9	22
12	24th „	26	19	45	15	9	24
13	31st „	35	31	66	11	7	18
	1st Quarter ...	308	341	649	183	154	337

14	7th April	24	26	50	10	8	18
15	14th „	21	36	57	12	9	21
16	21st „	24	27	51	6	9	15
17	28th „	29	18	47	13	9	22
18	5th May	26	24	50	9	8	17
19	12th „	31	24	55	6	8	14
20	19th „	33	29	62	9	3	12
21	26th „	23	18	41	11	7	18
22	2nd June	28	26	54	10	3	13
23	9th „	14	29	43	7	10	17
24	16th „	21	28	49	6	14	20
25	23rd „	20	29	49	8	5	13
26	30th „	25	17	42	5	7	12
	2nd Quarter...	319	331	650	112	100	212

BIRTH AND DEATHS IN EAST BATTERSEA, 1900—*continued.*

Week of Year.	Week ending :—	BIRTHS.			DEATHS.		
		Males.	Females.	TOTAL.	Males.	Females.	TOTAL.
27	7th July	20	22	42	10	3	13
28	14th „	21	20	41	7	3	10
29	21st „	24	22	46	6	8	14
30	28th „	22	36	58	11	15	26
31	4th August	31	13	44	8	15	23
32	11th „	12	15	27	14	9	23
33	18th „	26	17	43	19	9	28
34	25th „	27	20	47	11	21	32
35	1st Sept.	24	28	52	13	14	27
36	8th „	24	23	47	14	4	18
37	15th „	22	26	48	16	10	26
38	22nd „	21	13	34	6	14	20
39	29th „	20	27	47	9	7	16
	3rd Quarter...	294	282	576	144	132	276

40	6th Oct.	29	23	52	9	7	16
41	13th „	18	19	37	8	3	11
42	20th „	27	19	46	11	4	15
43	27th „	23	17	40	7	12	19
44	3rd Nov.	20	18	38	11	6	17
45	10th „	18	29	47	11	5	16
46	17th „	20	20	40	8	6	14
47	24th „	18	22	40	6	9	15
48	1st Dec.	21	17	38	9	10	19
49	8th „	16	21	37	13	7	20
50	15th „	28	26	54	10	10	20
51	22nd „	24	19	43	9	10	19
52	29th „	16	15	31	14	9	23
	4th Quarter...	278	265	543	126	98	224
	WHOLE YEAR	1,199	1,219	2,418	565	484	1,049

TABLE IV.

BIRTHS AND DEATHS REGISTERED IN WEST BATTERSEA DURING
THE FIFTY-TWO WEEKS OF 1900.

Week of Year.	Week ending :—	BIRTHS.			DEATHS.		
		Males.	Females.	TOTAL.	Males.	Females.	TOTAL.
1	6th January	28	28	56	38	56	94
2	13th "	24	26	50	29	46	75
3	20th "	28	21	49	26	23	49
4	27th "	30	36	66	33	17	50
5	3rd February	22	33	55	23	23	46
6	10th "	25	27	52	13	11	24
7	17th "	32	19	51	22	24	46
8	24th "	31	31	62	26	18	44
9	3rd March	35	35	70	14	22	36
10	10th "	39	32	71	15	16	31
11	17th "	28	36	64	19	22	41
12	24th "	23	14	37	16	20	36
13	31st "	35	26	61	21	19	40
	1st Quarter	380	364	744	295	317	612

14	7th April	22	23	45	21	11	32
15	14th "	25	20	45	22	19	41
16	21st "	19	23	42	17	19	36
17	28th "	38	37	75	19	24	43
18	5th May	24	31	55	20	17	37
19	12th "	27	22	49	25	21	46
20	19th "	38	23	61	16	15	31
21	26th "	22	22	44	12	18	30
22	2nd June	28	26	54	17	6	23
23	9th "	31	23	54	18	12	30
24	16th "	34	30	64	14	12	26
25	23th "	26	37	63	12	19	31
26	30th "	17	13	30	15	11	26
	2nd Quarter	351	330	681	228	204	432

BIRTHS AND DEATHS IN WEST BATTERSEA, 1900—*continued.*

Week of Year.	Week ending:—	BIRTHS.			DEATHS.		
		Males.	Females.	TOTAL.	Males.	Females.	TOTAL.
27	7th July	21	24	45	13	12	25
28	14th "	24	27	51	10	11	21
29	21st "	23	23	46	11	14	25
30	28th "	32	35	67	20	21	41
31	4th August	44	33	77	20	28	48
32	11th "	17	22	39	28	16	44
33	18th "	29	28	57	23	28	51
34	25th "	24	27	51	16	23	39
35	1st Sept.	36	29	65	18	21	39
36	8th "	27	27	54	18	7	25
37	15th "	20	22	42	16	18	34
38	22nd "	25	17	42	18	18	36
39	29th "	29	20	49	14	12	26
3rd Quarter		351	334	685	225	229	454

40	6th October	26	26	52	13	12	25
41	13th "	28	17	45	11	17	28
42	20th "	23	29	52	15	13	28
43	27th "	16	22	38	17	22	39
44	3rd Nov.	27	26	53	10	8	18
45	10th "	24	34	58	14	19	33
46	17th "	27	25	52	14	14	28
47	24th "	27	24	51	13	14	27
48	1st Dec.	20	18	38	15	18	33
49	8th "	17	23	40	24	16	40
50	15th "	36	24	60	18	17	35
51	22nd "	34	23	57	14	12	26
52	29th "	22	15	37	26	18	44
4th Quarter		327	306	633	204	200	404
WHOLE YEAR		1,409	1,334	2,743	952	950	1,902

TABLE V.

QUARTERLY AND ANNUAL SUMMARIES OF BIRTHS AND DEATHS.

BATTERSEA. 1900.		Births	Deaths		Small Pox	Measles	Scarlet Fever	Diphtheria	Whooping Cough	Fever	Diarrhoea	Cholera	Violence	Inquests	Public Institutions (including Non-Parishioners.)	
			Under 1 Year	Above 60 Years												
1st Quarter	E ...	649	337	83	85	...	16	1	1	5	3	1	...	11	35	...
	W ...	744	612	106	221	...	24	1	1	21	4	1	...	27	51	188
2nd Quarter	E ...	650	212	71	40	...	2	...	2	11	2	3	...	11	25	...
	W ...	681	432	86	123	...	14	...	1	20	3	2	...	23	46	122
3rd Quarter	E ...	576	276	141	34	...	5	...	4	19	2	60	2	11	27	...
	W ...	685	454	155	110	...	2	...	1	16	2	69	1	17	34	146
4th Quarter	E ...	543	224	91	39	...	3	...	2	14	...	3	...	7	26	...
	W ...	633	404	93	120	...	15	...	2	2	1	7	...	18	34	142
Whole Year	E ...	2418	1049	386	198	...	26	1	9	49	7	67	2	40	113	...
	W ...	2743	1902	440	574	...	55	1	5	59	10	79	1	85	165	598
| TOTALS		5161	2951	826	772	...	81	2	14	108	17	146	3	125	278	598

It will be seen that the greatest mortality occurred in the first quarter of the year when nine hundred and forty-nine of the deaths were registered. The highest weekly mortality was the first week of the year ending 6th January, 1900, when one hundred and fifty deaths occurred, principally from diseases of the respiratory organs. The last quarter of the year had the lowest mortality, six hundred and twenty-eight deaths being recorded, and the lowest weekly mortality was that for the week ending 14th July, when only thirty-one deaths occurred.

The births and deaths registered during the four quarters of the year are here set out:—

				BIRTHS.	DEATHS.
1st Quarter	...	...	...	1,393	949
2nd	„	...	...	1,331	644
3rd	„	...	...	1,261	730
4th	„	...	...	1,176	628
Totals				5,161	2,951

By a coincidence the births registered during the first and last quarters, similarly to deaths, represent the highest and lowest records respectively.

The following Tables VI., VII. and VIII., the first of which has been in use for many years, and the two others which are introduced for the first time, at the request of the Local Government Board, are excellent comparative records of mortality, &c., of present and past years, particularly No. VI., which contains a veritable sanitary history of Battersea since the year in which modern sanitation first came into existence, and when Battersea consisted of a congeries of small villages, between which extended market gardens, the inhabitants and dependents of some few dozens of large houses, the residences chiefly of merchants, with the workers at the market gardens constituting the principal population. It will be seen that the year 1900 compares favourably with the forty-five years included in that table, having, with six exceptions, the lowest death-rate.

Births and Deaths.

TABLE VI.
COMPARATIVE STATISTICS OF BIRTHS, MORTALITY, &c.

Year.	Mean Population for Year.	Births.	Birth Rate.	Deaths.	Death Rate.	Zymotic Deaths.	Natural Increase.
1856	15,069	536	36.2	320	21.2	45	216
1857	15,970	582	36.0	343	21.4	46	239
1858	16,872	562	33.3	380	22.5	100	182
1859	17,774	685	38.5	394	22.1	96	292
1860	18,676	680	36.4	399	21.3	62	281
1861....	19,582....	750....	38.3....	505....	25.7....	112....	245
1862	23,108	784	33.9	491	21.2	106	293
1863	26,635	1,042	39.1	522	19.5	86	520
1864	30,161	1,140	37.7	669	22.1	129	471
1865	33,688	1,357	40.2	785	23.3	177	572
1866	37,145	1,386	37.3	1,002	26.9	244	384
1867	40,741	1,734	42.5	870	21.3	122	864
1868	44,267	1,975	44.6	1,046	23.6	194	929
1869	47,749	2,096	43.8	1,121	23.4	247	975
1870	51,320	2,170	42.2	1,375	26.7	404	795
1871....	54,847....	2,220....	40.4....	1,472....	26.8....	463....	748
1872	60,244	2,349	38.9	1,202	19.9	220	1,147
1873	65,614	2,659	40.5	1,307	19.9	205	1,352
1874	70,984	2,865	40.3	1,387	19.5	238	1,478
1875	76,354	3,080	40.3	1,724	22.5	307	1,356
1876	81,704	3,455	42.2	1,745	21.3	340	1,710
1877	87,094	3,481	39.9	1,725	19.8	280	1,756
1878	92,464	3,748	40.5	1,803	19.4	322	1,945
1879	97,834	4,001	40.8	1,980	20.2	355	2,021
1880	103,204	4,095	39.6	2,040	19.7	383	2,055
1881....	108,342....	4,452....	41.8....	2,033....	18.7....	381....	2,419
1882	112,661	4,504	39.9	2,214	19.6	353	2,190
1883	116,980	4,711	40.2	2,344	20.0	369	2,367
1884	121,299	5,275	43.4	2,569	21.1	568	2,706
1885	125,618	4,654	37.0	2,566	20.4	432	2,088
1886	129,937	5,140	39.5	2,477	19.0	398	2,663
1887	134,256	5,186	38.6	2,451	18.2	502	2,735
1888	138,565	5,061	36.5	2,187	15.7	363	2,874
1889	142,884	5,161	36.1	2,240	15.6	366	2,921
1890	147,203	5,105	34.6	2,854	19.3	543	2,251
1891....	151,190....	5,237....	34.6....	2,619....	17.3....	398....	2,618
1892	154,121	4,990	32.3	2,692	17.4	473	2,298
1893	157,052	5,225	33.2	2,801	17.8	564	2,424
1894	159,984	5,024	31.4	2,404	15.4	468	2,620
1895	162,915	5,264	32.3	2,901	17.8	491	2,363
1896....	165,847....	5,358....	32.3....	2,941....	17.7....	608....	2,419
1897	168,778	5,266	31.2	2,620	15.5	391	2,646
1898	171,709	5,157	30.0	2,762	16.0	517	2,395
1899	174,640	5,179	29.6	2,858	16.3	377	2,321
1900	177,571	5,161	29.0	2,951	16.6	442	2,210

The years marked thus ... were census years.

TABLE VII. BATTERSEA.—COMPARATIVE VITAL STATISTICS.

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
1890	147,203	5,105	34·6	855	167	2,854	19·3	381	185	239	2,908	19·7
1891	151,190	5,237	34·6	736	140	2,619	17·3	395	196	274	2,697	17·8
1892	154,121	4,990	32·3	791	158	2,692	17·4	411	204	294	2,782	18·0
1893	157,052	5,225	33·2	842	161	2,801	17·8	363	204	377	2,974	18·8
1894	159,984	5,024	31·4	718	142	2,404	15·4	354	204	377	2,577	16·1
1895	162,915	5,264	32·3	907	172	2,901	17·8	481	247	307	2,961	18·1
1896	165,847	5,358	32·3	937	174	2,941	17·7	507	266	319	2,994	18·0
1897	168,778	5,266	31·2	845	160	2,620	15·5	459	270	387	2,737	16·2
1898	171,709	5,157	30·0	840	162	2,762	16·0	495	258	388	2,892	16·8
1899	174,640	5,179	29·6	838	161	2,858	16·3	597	301	348	2,905	16·6
Averages for years 1890-99.	161,343	5,180	32·1	830	160	2,745	17·0	444	233	331	2,842	17·6
1900	177,571	5,161	29·0	826	160	2,951	16·6	598	293	320	2,978	16·8

* Rates calculated per 1,000 of estimated population.

NOTE.—The deaths included in Column 7 of this table are the whole of those registered during the year as having actually occurred within the district or division. The deaths included in Column 12 are the number in Column 7 corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

By the term "Non-residents" is meant persons brought into the district on account of illness, and dying there; and by the term "residents" is meant persons who have been taken out of the district on account of illness, and have died elsewhere.

Area of District in acres (exclusive of area covered by water), 2,170 acres. Total population at all ages, 150,458; number of inhabited houses, 20,779; average number of persons per house, 7·2—at Census of 1891.

Causes of Death.

Table VIII. is a new one introduced by direction of the Local Government Board to ensure uniformity; being used by all the Medical Officers of Health throughout the Kingdom. This gives the mortality for the whole of Battersea and shows the number of deaths occurring in the two registrars' districts and the local public institutions. A column has also been added showing the number of deaths in each class which were those of non-residents in Battersea. The classification of the causes of deaths are considerably altered in the new table, amongst the most important features being the sub-division of Respiratory Diseases; the classification of deaths from Alcoholism associated with Cirrhosis of Liver, and also of Venereal Diseases. In regard to the two latter causes of death it is exceedingly doubtful whether the mortality records ever correctly show the true extent to which these contribute to mortality, and until the law relating to the registration of deaths is so amended that the death certificate is forwarded to the registrar direct, instead of passing as at present through the hands of relatives, sentiment will continue to prevail and deaths from Venereal Diseases will continue to be recorded as from Blood Poisoning, &c., and deaths from Alcoholism will be recorded as from the diseases associating it, without reference to the primary cause.

TABLE VIII.

BATTERSEA.

CAUSES OF, AND AGES AT, DEATH DURING THE YEAR 1900.

CAUSES OF DEATH.	DEATHS IN WHOLE DISTRICT AT SUBJOINED AGES.						DEATHS IN LOCALITIES AT ALL AGES.				DEATHS IN PUBLIC INSTITUTIONS.		
	All Ages	Under 1 year.	1 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 65 years.	65 years and upwards.	East Battersea.	West Battersea.	Wandsworth and Clapham Union Infirmary.	Bolingbroke Hospital.	DEATHS IN PUBLIC INSTITUTIONS.	NON-RESIDENTS.
Small-pox ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	81	23	53	3	2	...	...	26	49	6	...	6	3
Scarlet Fever	2	...	1	...	1	...	...	1	1	...	...	...	...
Whooping Cough	108	54	51	3	...	...	...	49	58	1	...	1	1
Diphtheria and Membranous Croup	14	2	7	4	...	1	...	9	5	...	...	...	1
Croup	4	1	3	...	...	...	...	2	2	...	...	...	...
Fever { Typhus ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric	17	...	2	4	3	8	...	7	10	...	...	...	...
Other Continued ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...
Epidemic Influenza	54	...	...	2	3	34	15	18	34	2	...	2	1
Cholera ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...
Plague ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...
Diarrhœa	149	126	18	...	1	3	1	69	77	2	1	3	4
Enteritis	82	60	10	1	1	9	1	26	40	16	...	16	9
Puerperal Fever	4	...	...	...	1	3	...	2	1	1	...	1	1
Erysipelas	12	3	...	...	...	6	3	2	3	7	...	7	1
Other Septic Diseases	1	1	...	...	...	...	...	1	...	...	...	...	...
Phthisis	299	12	12	14	36	212	13	90	114	95	...	95	44
Other Tubercular Diseases... ..	53	27	9	10	2	5	...	26	24	3	...	3	2
Cancer, Malignant Disease	101	...	...	1	...	72	28	27	43	28	3	31	16
Bronchitis	307	84	23	2	...	110	88	118	143	46	...	46	23
Pneumonia	279	59	70	10	11	109	20	122	127	30	...	30	16
Pleurisy	15	2	2	1	2	8	...	8	6	1	...	1	1
Other Diseases of Respiratory Organs	7	3	1	...	...	2	1	3	4	...	...	...	...
Alcoholism	10	...	...	...	...	8	2	6	3	1	...	1	1
Cirrhosis of Liver } ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...
Venereal Disease	17	11	3	...	...	2	1	3	4	10	...	10	9
Premature Birth, &c.... ..	254	251	2	1	...	...	...	114	132	8	...	8	4
Diseases and Accidents of Parturition	16	...	...	...	3	13	...	7	6	3	...	3	2
Heart Diseases... ..	250	2	3	13	11	140	81	58	91	100	1	101	41
Accidents	81	21	10	10	7	20	13	26	27	12	16	28	22
Suicides	14	...	...	...	1	12	1	5	6	1	2	3	2
All other Causes	720	84	33	24	21	218	340	224	294	194	8	202	89
TOTALS	2951	826	313	103	106	995	608	1049	1304	567	31	598	293

During the year, three hundred and thirty-nine cases of violent or other forms of sudden death were brought before the notice of the Coroner, and in two hundred and seventy-eight cases inquests were held. The verdicts of the respective juries were to the effect that one hundred and fifty-three of the deaths were due to natural causes and one hundred and twenty-five to violence. The latter included several deaths in which there was insufficient evidence to show whether the fatal injuries were self-inflicted or otherwise, and they are therefore recorded as "found dead." A brief summary is here given of the inquests held during the year:—

Natural Causes	153
----------------	-----	-----	-----	-----	-----

Violence:—

Found Dead—

Found drowned, &c.	26
--------------------	-----	-----	-----	----

Accidental—

Suffocation in bed with parents	...	15
---------------------------------	-----	----

Falls, &c.	...	20
------------	-----	----

Run over in streets and on railway	...	13
------------------------------------	-----	----

Burns and Scalds	...	17
------------------	-----	----

Drowning	...	4
----------	-----	---

Shot	...	1
------	-----	---

Poisoning	...	1
-----------	-----	---

Asphyxia	...	4
----------	-----	---

Want of attention at birth	...	2
----------------------------	-----	---

Other injuries, &c.	...	4
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———— 81

Suicide—

Poisoning	...	3
-----------	-----	---

Cut throat	...	3
------------	-----	---

Hanging	...	3
---------	-----	---

Shot	...	2
------	-----	---

Drowning	...	1
----------	-----	---

Fall	...	1
------	-----	---

Run over on railway	...	1
---------------------	-----	---

———— 14

Carried forward 153

					Brought forward	153
<i>Homicide—</i>						
Run over	...	...	...	...	I	
Suffocation	...	...	...	...	I	
Want of food	...	...	...	...	I	
Injuries...	...	...	...	...	I	
					—	4
						— 125
						—
Total	...	...	...	...		278
						==

Deaths from suffocation in bed with parents showed a slight decrease during the year, fifteen deaths being recorded from this cause compared with seventeen in 1899, eighteen in 1898, twenty-one in 1897, and twenty in 1896. Notwithstanding the reduction it remains a very serious matter that in five years ninety-one infants should die from suffocation due to the carelessness of parents. Drunkenness of parents no doubt, in many cases, is the contributing factor, and it is therefore of interest to compare the days upon which the deaths occurred and which are here set out. It must be remembered that the day refers to the morning on which the death of the children was discovered:—

Sunday	...	...	...	...	...	4
Monday	...	...	...	...	...	1
Tuesday	...	...	...	...	...	1
Wednesday	...	...	...	...	...	1
Thursday	...	...	...	...	...	4
Friday	...	...	...	...	...	2
Saturday	...	...	...	...	...	2
						—
Total	...	...	...	...	...	15
						==

It will be seen that Sunday and Thursday show the largest number, and whether there is any connection in the circumstance that those mornings follow the night of "Early Closing" on Wednesday and the general half-holiday on Saturday is open to suspicion.

Ages at Death.

Of the two thousand nine hundred and fifty-one deaths recorded during the year, eight hundred and twenty-six were of children under one year of age, three hundred and thirteen between one and five years, one hundred and three between five and fifteen years, one hundred and six between fifteen and twenty-five, nine hundred and ninety-five between twenty-five and sixty-five, and six hundred and eight were sixty-five years of age and upwards.

Infantile Mortality.

Premature birth, low vitality, and congenital defects of necessity contribute more or less to infantile mortality, and of the eight hundred and twenty-six deaths recorded among children under one year of age, two hundred and fifty-one were actually due to these causes. The diseases which principally contributed to the remainder of the infantile mortality were Diarrhœa, from which one hundred and twenty-six deaths occurred; Bronchitis, eighty-four; Pneumonia, fifty-nine; Whooping Cough, fifty-four; Tubercular Disease, thirty-nine; and Measles, twenty-three. The mortality at this period of life was equal to one hundred and sixty per thousand of the birth registered during the year. This shows a slight reduction upon the previous year and is exactly equal to the average of the last ten years.

TABLE IX.
INFANTILE MORTALITY.

YEAR.	NUMBER OF DEATHS OF INFANTS UNDER 1 YEAR OF AGE.	RATE PER 1,000 BIRTHS REGISTERED.
1890	855	167
1891	736	140
1892	791	158
1893	842	161
1894	718	142
1895	907	172
1896	937	174
1897	845	160
1898	840	162
1899	838	161
1900	826	160
Preceding Decennial Averages	831	160

At five years and under, one thousand one hundred and thirty-nine deaths were recorded; by a most remarkable coincidence this number exactly corresponds with that of the previous year and is, therefore, again well below the annual average. The following table compares the mortality at this age period during the past six years:—

TABLE X.

Year.	No. of Deaths of Infants under 5 years of age.
1895	1,332
1896	1,432
1897	1,202
1898	1,222
1899	1,139
1900	1,139

Of the deaths recorded in Battersea at the other extreme of life, six hundred and eight were sixty-five years of age and upwards; of these ninety-four were "non-residents," and by deducting this number and adding those of fifty "residents" occurring outside Battersea, a corrected total of five hundred and sixty-four is produced compared with five hundred and six during the previous year. The deaths at high ages continue to increase annually and indicate a great improvement in longevity. The annual average for the preceding five years was four hundred and thirty-four; two hundred and sixty-three of these deaths were recorded as from "old age."

Causes of Non-Zymotic Mortality.

Of the two thousand nine hundred and fifty-one deaths registered in Battersea, two thousand five hundred and nine were from diseases other than those included in the zymotic class. Diseases of the Respiratory System contributed the largest number to the mortality, namely, six hundred and eight, a very large proportion occurring during the first few weeks of the year and were doubtless associated with the outbreak of Influenza then prevailing. Phthisis and other Tubercular Diseases occupy the next place numerically, three hundred and fifty-two deaths being recorded. From Diseases of the Brain and Nerves, two hundred and seventy-three deaths took place; from Premature Birth, low vitality, and other congenital defects, two hundred and fifty-four; Disease of the Heart, two hundred and fifty; of the Digestive Organs, one hundred and eighty-four; from Violence, one hundred and twenty-five; Age, two hundred and sixty-three; Diseases of the Urinary Organs, forty-two; of the Organs of Generation, sixteen; Locomotory Diseases, two; and all other Non-Zymotic Diseases, one hundred and forty.

The following table compares the Non-Zymotic Mortality in Battersea during the past eleven years:—

TABLE XI.

Comparative Table of non-zymotic causes of Deaths recorded in Battersea during the past 11 years.

	1890	1891	1892	1893	1894	1895	1896	1897	1898	1899	1900
Tubercular, including											
Phthisis	320	285	237	355	304	353	374	355	376	368	352
Of Brain, Nerves, &c.	261	195	259	213	211	334	211	241	181	241	273
Of the Heart, &c. ...	148	141	183	159	173	213	182	189	164	252	250
Of the Respiratory Organs, excluding Phthisis	618	572	635	653	471	623	531	439	383	540	608
Of Digestive Organs...	118	122	112	127	197	114	154	202	168	194	184
Of Urinary Organs ...	34	49	72	60	57	56	88	69	75	70	42
Of Organs of Genera- tion	15	16	15	14	12	7	22	14	16	12	16
Of Joints, Bones, &c.	4	7	2	3	6	—	5	6	2	6	2
Premature Birth, Low Vitality, Malforma- tion, &c.	206	238	256	295	273	332	298	286	288	297	254
Other Constitutional Diseases (including Cancer, Syphilis, &c.) and all other Diseases	70	91	245	153	134	148	150	160	153	146	140
Age	71	74	122	103	118	128	207	150	317	259	263
Violence	77	60	81	102	70	102	117	118	122	96	125
TOTAL ...	1942	1850	2219	2237	2026	2410	2339	2229	2245	2481	2509

The foregoing table shows very little variation in the proportionate distribution of the deaths from several causes except in the case of violence, which contributes the largest number recorded during the decennium. The larger number of deaths from Respiratory Diseases has already been referred to. It is, therefore, not necessary to enter into any minute discussion of the various diseases except with regard to those of the tubercular class, this being a subject occupying the particular attention of all sanitarians.

Phthisis, or Consumption, and other Tubercular Diseases.

In my report for the year 1899 (pages 62 to 78), I dealt very fully with this subject, giving the probable causes of the disease,

its mode of treatment, and the means to be adopted for its elimination. The report also contained a summary of the recommendations of the Royal Commission appointed in 1896 to enquire as to what administrative procedures were available and would be desirable for controlling the danger to man through the use, as food, of the meat and milk of tuberculous animals; and what were the considerations which should govern the action of responsible authorities in condemning for the purpose of food supplies, animals, carcasses, or meat exhibiting any stage of tuberculosis. The advantages and difficulties of compulsory notification were also discussed, and particulars given as to the experience of local authorities who had taken action in this matter. These included New York, where compulsory notification had been made law on condition that an inspector does not visit the house where the case is reported by a private medical practitioner, unless requested to do so by the practitioner; Manchester, where pending the approval of the Local Government Board to Phthisis being included amongst the diseases notifiable under the Local Act, a voluntary system of notification was in force, medical practitioners receiving the same fees as for other cases; Brighton, where a similar system of voluntary notification was in force; and Blackburn, where an unsuccessful application had been made to the Local Government Board for their consent to an order relative to the compulsory notification of Phthisis.

It would doubtless be desirable to give a condensed summary of the action which has already been taken at Battersea in the matter.

Early in the year 1899 a circular containing precautions against Consumption was delivered to every house in the district, endorsed by an urgent request that it might not be destroyed, but placed in such a position as to be readily referred to. The question of compulsory notification was in the meanwhile considered, and on the 25th January, 1899, the

following recommendation was adopted by the Vestry: "That the necessary steps be taken with a view to ordering that Section 55 of the Public Health (London) Act, 1891, shall apply in this Parish to cases of Phthisis." On the 22nd February the subject was again brought forward for formal approval, but was held over until the 8th March, when the matter was again adjourned for a period of six months, being a subject for consideration at the meeting on the 13th September, when it was resolved that the matter be referred back to the Health Committee for further consideration and report. Subsequently I submitted an exhaustive report on the subject of the probable causes of Tuberculosis, the advantages and difficulties of notification, and the action taken by some other authorities in regard to notification. Upon re-considering the subject, the Health Committee submitted the following report, which was adopted by the Vestry on the 8th November, 1899: "Your Committee are unable to recommend that any further steps be taken at present in the direction of compulsory notification, but they recommend that the handbill advising the public as to precautions to be taken to prevent the spread of the disease be re-issued throughout the Parish, that the Registrars of Deaths be requested to immediately notify all fatal cases of Phthisis to the Medical Officer of Health with a view to disinfection of the premises, and that the medical officers of local public institutions be asked to notify all cases admitted into such institutions."

This system has now been in force for over a year, and has been found very effective, resulting in disinfection being carried out in a very large number of cases, inasmuch as of 201 deaths from Tubercular Diseases in private houses disinfection was allowed in 142 instances, representing over 71 per cent. In most of the cases disinfection not only included the fumigation of the premises, but also the steaming of the bedding or other similar articles. In another case disinfection was carried out upon a patient changing his residence.

The mortality recorded in Battersea during the year from diseases of the Tubercular Class numbered three hundred and fifty-two; of these two hundred and ninety-nine were due to Phthisis or Consumption, and fifty-three to Tubercular Diseases of Bowels, Brain, &c. Of the number in question, however, forty-six were "non-residents," and this number must therefore be deducted, and the deaths of "residents" occurring outside the district, forty-three in number, included, representing a corrected total of three hundred and forty-nine. These figures compare very favourably with those of 1899 and preceding years, the corrected total for the year 1899 being three hundred and seventy-one.

Statistics shew an enormous reduction compared with half-a-century ago. For instance, the Tubercular Mortality for England and Wales during the five years 1851-60 is shewn as being equal to 2679 per million per annum, whereas in the five years 1890-95 this has been reduced to 1463. Although the mortality from the disease has unquestionably been reduced there is some doubt but that the statistical effect is partly produced by improved diagnosis, cases of Pneumonia, &c. being formerly frequently certified as "Gallopig Consumption," and thus classified with the tubercular deaths.

Zymotic Sickness and Mortality.

Zymotic Sickness and Mortality being more or less controllable by the observance of hygienic laws, this subject most readily appeals to those having the administration of sanitary districts.

Compulsory notification is the only effective method of dealing with this class of disease, affording, as it does, the means of tracing the cause and ascertaining those areas which are principally affected, and also of enforcing isolation and disinfection.

The subject of sickness and mortality from these diseases is therefore dealt with under the two distinct headings of "non-notifiable infectious sickness and mortality" and "notifiable infectious sickness and mortality."

The following table compares the mortality from these diseases during the past ten years, the death-rate being equal to 2.4 per 1000 of the population.

TABLE XII.

Comparative Table of Zymotic Mortality in Battersea during the past ten years.

	1891	1892	1893	1894	1895	1896	1897	1898	1899	1900
Small Pox ... ..	...	...	...	...	...	...	...	...	...	...
Measles	37	90	90	151	99	185	76	119	103	81
Scarlet Fever	10	15	17	5	10	5	7	6	...	2
Diphtheria	35	28	90	67	60	50	52	45	21	14
Enteric, &c., Fevers...	19	8	14	13	15	11	8	8	10	17
Whooping Cough ...	104	100	115	77	52	137	82	71	52	108
Epidemic Diarrhœa...	104	99	120	93	151	169	141	154	123	149
Other Zymotic Diseases	89	133	118	62	104	45	25	114	68	71
Total Deaths from Zymotic Diseases...	398	473	564	468	491	602	391	517	377	442
Zymotic Death Rate	2.6	3.0	3.5	2.8	2.9	3.6	2.3	3.0	2.1	2.4
Death-rates from all Diseases	17.3	17.4	17.8	15.4	17.8	17.7	15.5	16.0	16.3	16.6

Further details of Zymotic Sickness and Mortality are dealt with under the headings of Non-Notifiable and Notifiable Infectious Diseases.

Non-Notifiable Infectious Sickness and Mortality.

The more important diseases under this heading are Measles, Whooping Cough, Diarrhœa, Influenza, and Chicken-pox, the first four being the larger contributors to mortality. In the absence of such means as are afforded in the case of notifiable infectious diseases of recording the amount of sickness from these diseases, it is impossible to arrive at the relative

34 Non-Notifiable Infectious Sickness and Mortality (*contd.*)

proportion between the cases and the mortality therefrom. Valuable information is, however, afforded by the system adopted by the London School Board, whereby head-teachers bring to the notice of the Medical Officer of Health any cases of infectious disease occurring amongst the children where notice has not already been sent by the latter to the School Authorities, and as notices of all notifiable infectious cases *are* sent to the schools, it follows that the sickness reported by the head-teachers relates to non-notifiable diseases. During the year, one thousand one hundred and fifty-one such notices were received, but there is reason to believe that this does not represent the total amount of sickness which occurred, many of the schools appearing to show greater or less activity in adopting the School Board's regulations in the matter.

The notices received had reference to the following cases of sickness occurring either among the scholars or in houses occupied by such children :—

Measles	...	...	...	...	...	446
Whooping Cough	...	...	...	...	...	256
Chicken-pox	...	...	...	...	...	198
Mumps	...	...	...	...	...	161
Other sickness, including Diarrhoea, &c.						90
						<hr/>
Total	...	...	...	...	...	1,151
						<hr/> <hr/>

A summary of the notices received indicates that sickness was most prevalent during the third quarter of the year, which, in view of the summer holidays, really only represents about two months of school attendance. The disease which contributed most largely to that total was Measles. During the first quarter of the year only forty-nine notices were received, and it is in regard to this period of the year that I am inclined to assume that the system was not fully adopted; inasmuch

as forty *deaths* actually occurred amongst children in Battersea during that period from Measles and Whooping Cough, the mortality from these two diseases together, considerably exceeding the number of notices received from the schools. For what such statistics are therefore worth, they are given here showing the number of cases of each class of sickness brought to notice during the four quarters of the year :—

TABLE XIII.

	Measles.	Whooping Cough.	Chicken- pox.	Mumps.	Other sickness, including Diarrhoea.	Total.
1st Quarter ...	19	8	17	—	5	49
2nd „ ...	144	76	45	70	22	357
3rd „ ...	136	111	51	59	42	399
4th „ ...	147	61	85	32	21	346
Whole Year ...	446	256	198	161	90	1,151

Measles.

During the year 1900, Measles again showed a reduced mortality compared with the two preceding years, the deaths registered in the district for the last three years being as follows :—

1898	...	...	...	...	119
1899	...	...	...	...	103
1900	...	...	...	...	81

The annual average for the last preceding ten years being 110.

This reduction in the mortality is satisfactory in a measure, but, nevertheless, it cannot be regarded as other than a very

grave matter that a disease of a preventible character should be accountable for eighty-one deaths in a year. As, however, I have stated in previous reports it is not Measles *per se* that is so fatal but the complications resulting from want of care and attention in the convalescent stages of the disease. It is practically impossible in the absence of notification to ascertain the extent or locality of outbreaks nor to deal with the question of isolation. Judging, however, from the recorded mortality, Measles was most prevalent in the first quarter of the year when forty or nearly one-half of the deaths occurred. Concerning notification, frequent efforts have been made by this, supported by other sanitary authorities, to render the same compulsory and in April last, with a view to further combined action, the views of the whole of the Local Authorities were sought and the replies are here summarised :—

**Summary of replies from Vestries and District Boards
as to inclusion of Measles in the list of notifiable
infectious diseases.**

CHELSEA.—Vestry have suggested to the L.C.C. the desirability of Measles being declared a dangerous infectious disease.

FULHAM.—The Vestry some time since communicated with the L.C.C. on the matter, who, it is believed, have the question still under consideration.

LAMBETH.—Vestry of opinion that Measles should be placed within the category of "dangerous infectious diseases," but notification should not be made compulsory.

ST. GILES.—Board have been continually in correspondence with Local Government Board, and they think that if any further action is taken it should be by communicating with the L.C.C. rather than with the Board.

ST. MARGARET AND ST. JOHN, WESTMINSTER.—Vestry made considerable efforts some seven years ago in the direction suggested, but the result was not sufficiently encouraging to induce them to renew their active interest in the matter.

STOKE NEWINGTON.—Concur.

BERMONDSEY.—Of opinion that no practical public advantage would result from Measles being included as a dangerous infectious disease, while a large increase of hospital accommodation would be required.

CAMBERWELL.—Notification undesirable.

GREENWICH.—Ditto.

HAMPSTEAD.—Not advisable at present time to classify Measles as a notifiable disease.

ISLINGTON.—Cannot advise Vestry to approach the Local Government Board upon the subject.

LEWISHAM.—Of opinion that Measles should not be included in list of notifiable diseases.

PLUMSTEAD.—Not in favour.

ST. GEORGE, HANOVER SQUARE.—Cannot recommend that Measles be added to list of notifiable diseases.

ST. GEORGE THE MARTYR.—Vestry of opinion that no sanitary authority in London would be justified in embarking upon so great an expenditure as would be necessary for the compulsory notification of Measles.

ST. JAMES, WESTMINSTER.—Do not concur.

WANDSWORTH.—Of opinion that no advantage would arise from Measles being added to list.

WHITECHAPEL.—Not desirable.

HAMMERSMITH.—Under consideration.

CLERKENWELL, HACKNEY, HOLBORN, KENSINGTON, NEWINGTON, PADDINGTON, POPLAR, ROTHERHITHE, ST. GEORGE-IN-THE-EAST, ST. LUKE MIDDLESEX, ST. MARYLEBONE, ST. SAVIOUR SOUTHWARK, ST. PANCRAS and SHOREDITCH.—No action taken.

BETHNAL GREEN, LEE, LIMEHOUSE, MILE END, ST. MARTIN IN-THE-FIELDS, STRAND and WOOLWICH.—No reply received.

In view of the lack of general support shown in the opinions expressed the subject was temporarily abandoned by this authority, but has subsequently been revived by the London County Council, who have recently asked for the views of this authority as to the desirability of extending to Measles, as apart from the provisions contained in Section 54 of the Public Health (London) Act, 1891, those contained in Sections 60, 61, 62, 63, 64, 65, 66, 68, 69, 70, 72, 73 and 74 of that Act, and in accordance with the instructions of the Health Committee, I submitted the following report which was directed to be forwarded to the London County Council:—

Public Health Department,
Municipal Buildings,
Lavender Hill, S.W.
17th December, 1900.

GENTLEMEN,

In accordance with the instructions of the Health Committee at their last meeting I beg to report upon the letter from the London County Council asking for the views of this Sanitary Authority as to the desirability of extending to Measles the provisions contained in Sections 60, 61, 62, 63, 64, 65, 66, 68, 69, 70, 72, 73 and 74 of the Public Health (London) Act, 1891.

The late Vestry on numerous occasions expressed their opinion as to the desirability of Measles being notifiable, and I now re-endorse that recommendation with

a suggestion that the duty of notifying should be specially placed upon parents or guardians, as a very large number of cases of this disease are never seen by a medical practitioner.

The question, however, which I am more especially directed to consider, is whether the system of notification shall be utilized purely for statistical purposes, or that the same provisions shall govern the notification of Measles in the matter of isolation, disinfection, &c., as already apply to the dangerous infectious diseases already included in Section 55 of the Public Health (London) Act, 1891.

Measles occurs principally amongst children and contributes largely to the mortality returns. Measles however *per se* is not a dangerous infectious disease, the mortality too often resulting from want of proper care and nourishment during the convalescent stage of the disease, the real cause of death being Bronchitis or some similar disease as a sequel or complication of Measles. Notification therefore would doubtless reduce the mortality by reason of the means thereby afforded the officers of the authority of advising those in charge of the sick as to the necessary care to be taken.

As to the application to Measles of the various sections referred to in the letter from the London County Council I am of opinion that although they could doubtless with advantage be enforced in many instances yet they would not be generally applicable, and should therefore be *adoptive* and enforced only at the discretion of the Medical Officer of Health. I therefore recommend that in the event of Measles being made a notifiable disease it should be subject to the following provision:—

“ That in the case of Measles, Section 60, 61, 62, 63, 64, 65, 66, 68, 69, 70, 72, 73 and 74 of the Public Health (London) Act, 1891, shall not apply except where in the opinion of the Medical Officer of Health the enforcement

of the provisions of those sections would tend to prevent or check the spread of the disease, and that in such cases a notice be served requiring such precautions to be adopted as are contained in the foregoing sections."

I am GENTLEMEN,

Your Obedient Servant,

W. H. KEMPSTER, M.D.,

Medical Officer of Health.

To the HEALTH COMMITTEE,

BATTERSEA BOROUGH COUNCIL.

At present it is not officially known what action the London County Council propose to take in the matter.

Whooping Cough.

It has been shown that a considerable reduction in Measles mortality took place during the year, but this is not so satisfactory when the deaths recorded from Whooping Cough are taken into consideration with the fact that the two diseases are generally associated. During the year 1900 the mortality from Whooping-Cough, which in the preceding year was only fifty-two, increased more than two-fold, one hundred and eight deaths being recorded. The distribution of the deaths during the four quarters of the year was as follows:—During the first quarter, twenty-six; the second, thirty-one; the third, thirty-five; and the last quarter, sixteen. The following shows the mortality during the past six years and also the annual average during that period:—

	DEATHS.					
1895	52
1896	137
1897	82
1898	71
1899	52
1900	108
<i>Annual average</i>	83

The question as to the correct certification and classification of Diarrhœa deaths has of late occupied the attention of those responsible for statistics concerning sickness and mortality, and more particularly the Incorporated Society of Medical Officers of Health, and as a result of enquiries made by them from all available sources as to the classification generally adopted, it was found they were so varied as to render the statistics of Diarrhœa deaths, and consequently of death-rates, in different localities misleading and altogether useless for comparison. As a result of their enquiries a memorandum on certification of "Diarrhœa" deaths has been issued by them to registered medical practitioners in England, Scotland, Ireland and Wales to the effect that in future the only authorised names to be used in certifying deaths from this disease are: *epidemic enteritis*, *zymotic enteritis*, or *epidemic diarrhœa*, and all other synonyms are to be entirely discarded.

The new tables issued by the Local Government Board provide for the distinct separate classification of the Diarrhœa or zymotic enteritis deaths from those of the non-specific gastro-enteritis, &c., deaths.

Under the head of Diarrhœa and English Cholera one hundred and forty-nine deaths were recorded during the year, and although this is as nearly as possible equal to the average of the past six years, the mortality is higher than during 1899.

The following shows the mortality recorded during each of the past six years:—

Year.	Deaths.
1895	151
1896	169
1897	141
1898	154
1899	123
1900	149
<i>Annual average for the past six years</i>	<i>147</i>

One hundred and thirty-two, or 88 per cent. of the deaths occurred during the third quarter of the year which embraces the months of July, August and September, being that portion of the year when, by reason of high temperature, milk and other food is subject to rapid decomposition. As usual a very large percentage of the deaths were those of children under five years of age, and this emphasises the necessity of those having care of young children ensuring cleanliness, particularly during the summer months, of all receptacles for food; the boiling of milk and water; and the withholding of any fruit or other article of food which is in the least degree decomposed; and the desirability of the constant flushing of house drains. So great an influence has a high temperature upon the germination of the Diarrhœa bacilli that it is found in practice that when the earth-temperature exceeds 56° Fahr. an outbreak of Diarrhœa may be regarded as imminent.

Influenza.

This disease, which seems to have become quite endemic in this country, contributed fifty-four deaths to the total mortality. It is highly probable, however, that many more deaths were attributable to the disease and were recorded as from Bronchitis or Pneumonia, which are generally associated with or follow it. The disease is doubtless of a zymotic character and one in which strict isolation should be observed. The exact period of quarantine, however, has not yet been determined.

In January the mortality was specially prevalent, and the usual handbill of precautions to be adopted against Influenza was re-issued, advising the public of the extremely infectious character of the disease, and pointing out that to those exposing themselves whilst in an infectious condition the spread and maintenance of the disease is chiefly due, the breath of those so affected being probably the principal medium of infection, and further that the early symptoms of Influenza are chiefly chills and shivering accompanied by great muscular weakness and

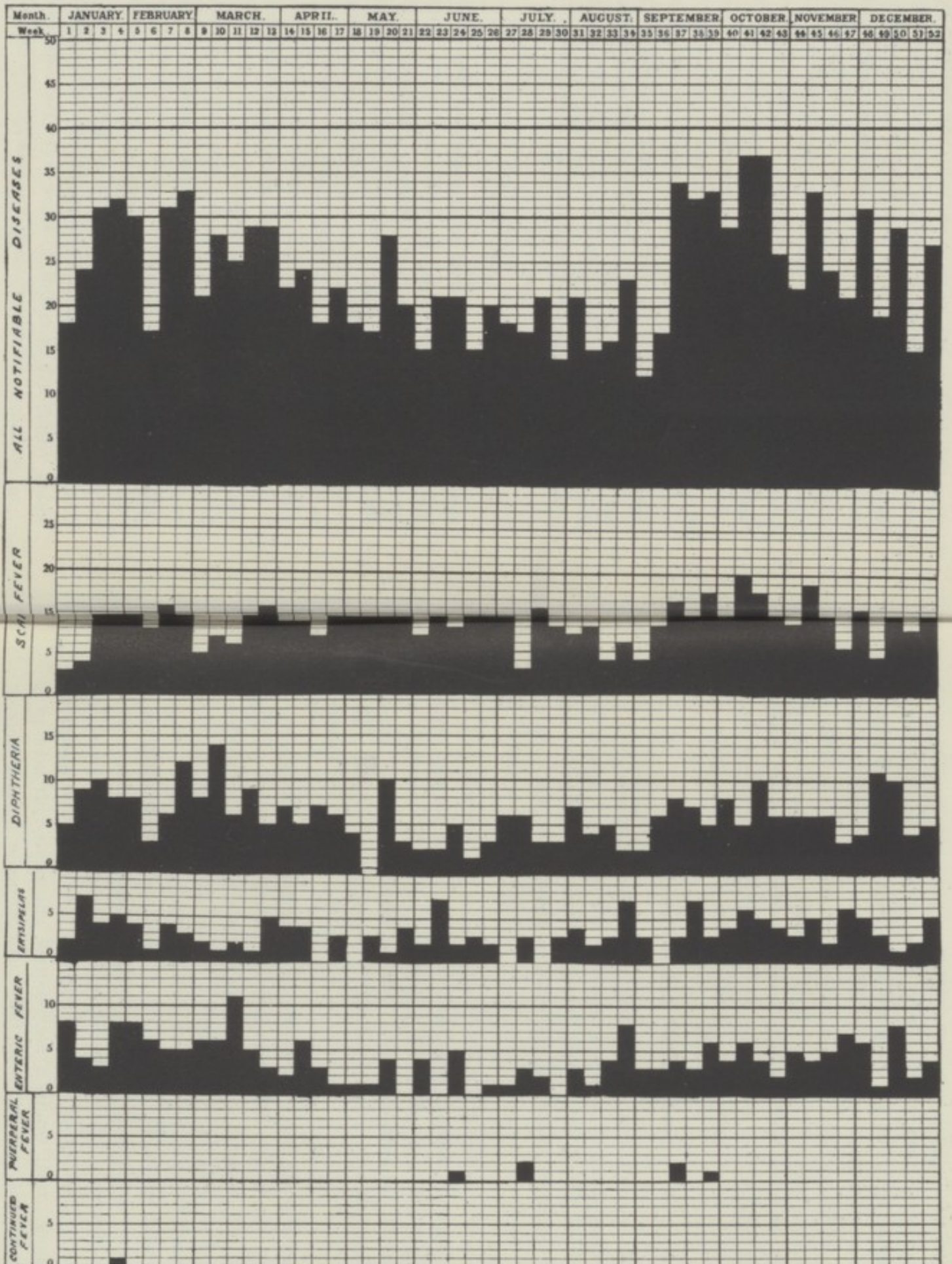
Year	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971	1972	1973	1974	1975	1976	1977	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030																																																		
Population	100	105	110	115	120	125	130	135	140	145	150	155	160	165	170	175	180	185	190	195	200	205	210	215	220	225	230	235	240	245	250	255	260	265	270	275	280	285	290	295	300	305	310	315	320	325	330	335	340	345	350	355	360	365	370	375	380	385	390	395	400	405	410	415	420	425	430	435	440	445	450	455	460	465	470	475	480	485	490	495	500	505	510	515	520	525	530	535	540	545	550	555	560	565	570	575	580	585	590	595	600	605	610	615	620	625	630	635	640	645	650	655	660	665	670	675	680	685	690	695	700	705	710	715	720	725	730	735	740	745	750	755	760	765	770	775	780	785	790	795	800	805	810	815	820	825	830	835	840	845	850	855	860	865	870	875	880	885	890	895	900	905	910	915	920	925	930	935	940	945	950	955	960	965	970	975	980	985	990	995	1000

Population of the United States

1900-2025

Battersea Borough Council.

Chart indicating the prevalence of notifiable infectious disease during each week of the year 1900.



Of other notifiable infectious diseases, including Small-pox, Cholera, and Typhus Fever, no cases occurred during the year.

prostration, often amounting to inability to stand or move, with pains in the spine or other parts of the body; and urging that persons thus affected should at once go to bed and there remain until convalescence is established, in order to avoid the danger of Pneumonia or Bronchitis, which are the chief complications to be feared as likely to lead to fatal results. The sick are also advised to resort early to medical aid in every case, for the determination of the real nature of the disease, and to avoid the more serious complications previously referred to.

Infectious Disease Notification.

Compulsory notification of certain infectious diseases has now been in force here for over eleven years, by the Infectious Disease (Notification) Act, 1889, and later by the Public Health (London) Act, 1891, which included the provisions contained in the former Act.

The diseases at present notifiable are Smallpox, Scarlet Fever, Diphtheria and Membranous Croup, Cholera, Erysipelas and Typhus, Enteric, Continued, Relapsing and Puerperal Fevers, and by an order of the Local Government Board, dated 19th September, 1900, "Bubonic Plague" was also made notifiable.

Hospital accommodation is provided by the Metropolitan Asylums Board for Smallpox, Scarlet Fever, Diphtheria and Membranous Croup, Enteric Fever, and the Plague; but for the other diseases the Union Infirmary is the only accommodation other than the General Hospitals. This arrangement necessitates application being made to the Relieving Officer for the removal of cases of Erysipelas and Puerperal Fever, and such an arrangement is very unsatisfactory, inasmuch as the person removed is in a very large measure pauperised. I am of opinion that either the Metropolitan Asylums Board should provide hospital accommodation for these cases, or that cases

Infectious Disease Notification.

should be admitted to the Union Infirmary upon the order of the Medical Officer of Health of the Borough instead of upon the order of the Relieving Officer, and I would recommend that the Guardians be approached with a view to effecting the latter arrangement.

During the year under report twelve hundred and thirty-one cases were notified, and included three hundred and six of Diphtheria and Membranous Croup, one hundred and sixty-five of Erysipelas, five hundred and forty-eight of Scarlet Fever, two hundred and five of Enteric, one of Continued Fever, and six of Puerperal Fever.

The total notifications shew a most remarkable record, being the lowest recorded during any year since notification has been compulsory, as will be seen from the following figures relating to the last complete eleven years. The Infectious Disease (Notification) Act came into force very late in the year 1899, and therefore the figures for that year are of no value for comparative purposes, and are not included.

Year.	No. of Notifications received.		
1890	1,260
1891	1,383
1892	1,972
1893	2,798
1894	1,845
1895	1,657
1896	1,929
1897	2,569
1898	1,887
1899	1,702
1900	1,231
<i>Annual Average for preceding</i>			
10 years	1,900

The largest number of notifications received during any complete week of the year was thirty-seven, and this occurred on two occasions, namely, each in the second and third weeks of October. At the other extreme, twelve cases only occurred during the first week of September.

Of the various diseases included in the notification statistics, Diphtheria shews the greatest reduction, representing three hundred, or nearly 50 per cent. less than the previous year. On the contrary, Enteric Fever shows an unsatisfactory increase. Each of these diseases, however, is dealt with more extensively in a later part of this report.

Eight hundred and forty-nine of the cases were removed to hospital, representing 68·9 per cent. of the cases notified. This is a slightly lower proportion than that in the previous year, which was 70·5 per cent., but when compared with 22·8 per cent. in 1890 shews an exceedingly increased proportion of removals. The average annual percentage during the preceding ten years was 44·6.

The following shews the percentage of notified cases removed to hospital during the eleven years, 1890-1900:—

Year.			Percentage of Cases removed to Hospital.
1890	...	...	22·8
1891	...	...	33·2
1892	...	...	43·3
1893	...	...	31·3
1894	...	...	43·0
1895	...	...	40·5
1896	...	...	46·8
1897	...	...	52·5
1898	...	...	62·9
1899	...	...	70·5
1900	...	...	68·9
<i>Annual Average for preceding</i>			
10 years	...	...	44·6

TABLE XIV.

WEEKLY SUMMARIES OF NOTIFICATIONS RECEIVED DURING THE YEAR 1900
(excluding duplicates).

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MONTH.	WEEK OF YEAR.	CASES OF INFECTIOUS DISEASE NOTIFIED.									TOTALS.
		Small-Pox.	Cholera.	Diphtheria.	Erysipelas.	Scarlet Fever.	Typhus Fever.	Enteric Fever.	Continued and Relapsing.	Puerperal Fever.	
January ...	1	...	...	5	2	3	...	8	..	...	18
	2	...	...	9	7	4	...	4	...	...	24
	3	...	...	10	4	14	...	3	...	...	31
	4	...	...	8	5	10	...	8	1	...	32
February ...	5	...	...	8	4	10	...	8	...	...	30
	6	...	...	3	1	7	...	6	...	...	17
	7	...	...	6	4	16	...	5	...	...	31
	8	...	...	12	3	13	...	5	...	...	33
March ...	9	...	...	8	2	5	...	6	...	...	21
	10	...	...	14	1	7	...	6	...	...	28
	11	...	...	6	2	6	...	11	...	...	25
	12	...	...	9	1	14	...	5	..	...	29
	13	...	...	5	5	16	...	3	...	...	29
April ...	14	...	...	7	4	9	...	2	...	...	22
	15	...	...	5	4	9	...	6	...	...	24
	16	...	...	7	...	7	...	3	...	...	17
	17	...	...	6	3	12	...	1	...	...	22
May ...	18	...	...	4	...	13	...	1	...	...	18
	19	...	...	...	3	13	...	1	...	...	17
	20	...	...	10	1	13	...	4	...	...	28
	21	...	...	3	4	13	...	...	...	...	20

June ...	22	...	...	2	2	7	...	4	...	...	15
	23	...	...	2	7	12	...	...	...	...	21
	24	...	...	5	2	8	...	5	...	1	21
	25	...	...	1	3	11	...	...	...	...	15
	26	...	...	3	2	14	...	1	...	...	20
July ...	27	...	...	6	...	11	...	1	...	...	18
	28	...	...	6	3	3	...	3	...	2	17
	29	...	...	3	...	16	...	2	...	...	21
	30	...	...	3	3	8	...	...	...	...	14
August ...	31	...	...	7	4	7	...	3	...	...	21
	32	...	...	4	2	8	...	1	...	...	15
	33	...	...	5	3	4	...	4	...	...	16
	34	...	...	2	7	6	...	8	...	...	23
September ...	35	...	...	2	3	4	...	3	...	...	12
	36	...	...	6	...	8	...	3	...	...	17
	37	...	...	8	3	17	...	4	...	2	34
	38	...	...	7	7	15	...	3	..	...	32
	39	...	...	5	3	18	...	6	...	1	33
October ...	40	..	...	8	4	13	...	4	...	...	29
	41	...	...	5	6	20	...	6	...	...	37
	42	...	...	10	5	18	...	4	...	...	37
	43	...	...	6	4	14	...	2	...	...	26
November ...	44	...	...	6	3	8	...	5	...	...	22
	45	...	...	6	5	18	...	4	...	...	33
	46	...	...	6	2	11	...	5	...	...	24
	47	...	...	3	6	5	...	7	...	...	21
December ...	48	...	...	4	5	16	...	6	...	...	31
	49	11	3	4	...	1	19
	50	10	1	10	...	8	29
	51	4	2	7	...	2	15
	52	5	5	13	...	4	27
Whole Year	306	165	548	...	205	1	6	1,231	

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TABLE XV.
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.						East Battersea.	West Battersea.	W. and C. Union Infirmary.	Emanuel School.	East Battersea.	West Battersea.	W. and C. Union Infirmary.	Emanuel School.	Total.
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upward.									
Small-pox ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria	298	4	104	132	30	28	...	144	152	...	2	111	108	...	2	221
Membranous Croup	8	...	6	2	...	...	...	7	1	...	...	1	...	...	...	1
Erysipelas	165	5	2	11	21	110	16	65	95	5	...	14	22	5	...	41
Scarlet Fever	548	5	149	314	61	19	...	272	276	...	...	219	220	...	...	439
Typhus Fever ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric Fever	205	1	13	76	47	67	1	108	97	...	...	87	57	...	...	144
Relapsing Fever ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Continued Fever	1	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...
Puerperal Fever	6	...	...	...	...	6	...	2	4	...	...	...	3	...	...	3
Plague ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTALS	1,231	15	275	535	159	230	17	598	626	5	2	432	410	5	2	849

The cases removed to hospital included four hundred and thirty-nine of Scarlet Fever, two hundred and twenty-two of Diphtheria and Membranous Croup, one hundred and forty-five of Enteric, three of Puerperal Fever, and forty-one of Erysipelas.

The total mortality from notifiable diseases was ninety-seven, fifty-one occurring in hospital, and forty-six at the homes of the deceased. The average for the preceding three years was one hundred and seventy-one per annum. The excellent record for the year will be seen upon reference to Table XVII. Of the ninety-seven deaths, thirty-two were from Diphtheria, thirty-two from Enteric Fever, seventeen from Enteric Fever, thirteen from Scarlet Fever, and three from Puerperal Fever.

As further evidence of the enormous reduction in the mortality it will be observed that the deaths from *all* notifiable diseases were only equal in number to the average annual mortality during the preceding three years from *one* disease, namely, Diphtheria.

Various tables are inserted in this report to assist in indicating the prevalence of infectious disease during the various periods of the year, and this applies more particularly to Table XIV., which shews the number of notifications of each disease received during the fifty-two weeks of the year, and the same information is more graphically recorded in the chart facing page 43. It will there be seen that notifiable infectious disease was at its lowest in the first week of September, and at its highest in the second and third weeks of October. The month of November was marked by a continuous succession of rises and falls, and the months of April, May, June, July and August shewed the greatest general freedom. The largest number of cases occurred in the month of November, and the greatest freedom prevailed in that of July.

Infectious Disease Notification.

As indicating the incidence of infectious disease in the various sub-districts, Tables XVIII. and XV. are of great value. Table XVIII. distributes the cases amongst the various Sanitary Districts, and it is perhaps in this form that they are of the greatest value, and will be much more so if, as it is to be hoped, the arrangements of the census of 1901 will allow of reliable populations being attributed to each of these districts. Table XV., which replaces Table B. of former reports and which is inserted at the request of the Local Government Board, deals with notifications in areas of known populations, and this is therefore at present necessarily confined to the Registrar's Districts and Public Institutions. The following figures very briefly summarise the statistics referred to:—

DISTRIBUTION OF NOTIFICATIONS AMONGST THE AREAS AND INSTITUTIONS OF KNOWN POPULATION.

East Battersea	...	...	598
West Battersea (excluding Public Institutions)	...	...	626
Wandsworth and Clapham Union Infirmary	...	...	5
Bolingbroke Hospital		...	—
Royal Masonic School		...	—
Emanuel School	...	...	2
			—————
Total	...	...	1,231
			—————

The following places the Sanitary Districts in the order of incidence of infectious disease.

Infectious Disease Notification.

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District.			Cases
No. 8	83
" 7	117
" 6	135
" 5	138
" 4	140
" 3	179
" 2	218
" 1	221
			—
	Total	...	1,231
			—

A very remarkable feature will be observed in the above, namely, the relative position of the several Sanitary Districts in regard to prevalence of infectious disease exactly coincides with the numerical order of the Districts in question.

I propose to deal now with each of the notifiable diseases.

Small Pox.

Battersea has again to be congratulated upon absolute freedom from Small Pox, during a period which now considerably exceeds two years, the last case having been notified in the year 1898.

One "reported" case, however, came to notice during the year. On 30th January a communication was received to the effect that a child at Russell Street was "covered with a rash resembling small pox." Enquiries were forthwith made

TABLE XVI.

PREVALENCE OF NOTIFIABLE
INFECTIOUS DISEASE AND MORTALITY THEREFROM.

	No. of Cases notified.	No. of cases removed to Hos-pital.	Deaths other than in Hos-pital.	Deaths in Hos-pital.	Total Mor-tality.
Small Pox ...	...	...	...	...	...
Scarlet Fever ...	548	439	2	11	13
Diphtheria ...	298	221	10	19	29
Membranous Croup ...	8	1	3	...	3
Typhus Fever ...	...	...	...	...	...
Enteric Fever ...	205	144	17	15	32
Relapsing Fever ...	1	...	...	...	...
Puerperal Fever ...	6	3	3	...	3
Cholera ...	...	...	...	...	...
Erysipelas ...	165	41	11	6	17
TOTALS. ...	1,231	849	46	51	97

TABLE XVII.

COMPARISON OF NOTIFIABLE INFECTIOUS DISEASE MORTALITY
WITH THAT OF PREVIOUS YEARS.

	Small Pox.	Scarlet Fever.	Diphtheria and Membranous Croup.	Typhus Fever.	Enteric Fever.	Relapsing Fever, &c.	Puerperal Fever.	Cholera.	Erysipelas.	TOTAL.
1897	...	47	108	...	18	...	3	...	11	187
1898	...	28	120	...	15	...	6	...	18	187
1899	...	14	62	...	39	...	7	...	17	140
1900	...	13	32	...	32	...	3	...	17	97
Average for preceding 3 years.	...	30	97	...	24	...	5	...	15	171

TABLE XVIII.

Particulars of the Prevalence of Notifiable Infectious Diseases in the several Sanitary Districts.

Sanitary Districts.		CASES NOTIFIED.										CASES REMOVED TO HOSPITAL.											
		Small Pox	Scarlatina	Diphtheria and Membranous Croup	Typhus Fever	Enteric Fever	Continued Fever	Relapsing Fever	Puerperal Fever	Cholera	Erysipelas	Totals	Small Pox	Scarlatina	Diphtheria and Membranous Croup	Typhus Fever	Enteric Fever	Continued Fever	Relapsing Fever	Puerperal Fever	Cholera	Erysipelas	Totals
No.	1	...	88	64	...	50	...	...	...	...	19	221	...	70	51	...	40	...	...	...	...	3	164
"	2	...	100	55	...	32	...	...	1	...	30	218	...	83	44	...	25	...	...	...	...	10	162
"	3	...	84	32	...	35	...	...	2	...	26	179	...	62	23	...	25	...	...	1	...	10	121
"	4	...	69	17	...	23	1	...	1	...	29	140	...	56	15	...	12	...	...	1	...	7	91
"	5	...	66	35	...	22	...	...	...	...	15	138	...	61	22	...	18	...	...	...	...	1	102
"	6	...	39	37	...	30	...	...	...	...	29	135	...	37	30	...	21	...	...	...	...	9	97
"	7	...	66	29	...	9	...	...	2	...	11	117	...	47	14	...	2	...	...	1	...	...	64
"	8	...	36	37	..	4	...	...	...	...	6	83	...	23	23	...	1	...	...	...	...	1	48
Battersea	...	548	306	...	205	1	...	6	...	165	1231	...	439	222	...	144	...	...	3	...	41	849	

and there being no doctor in attendance the child was examined by the Medical Officer of Health, and the case found to be one of chicken pox only.

Many notices have been received during the year from Port Sanitary Authorities to the effect that troopers and other passengers had proceeded to this district after having been exposed to infection during the voyage from South Africa and elsewhere. In all such cases the persons were kept under close observation during the period of quarantine.

As a further precautionary measure, all cases of chicken-pox brought to notice by school teachers and others were visited, and if it were found that no doctor was in attendance such cases were examined by the Medical Officer of Health, it being found that outbreaks of small pox are frequently preceded by chicken pox, and in view of the possibility of a case of the former disease, in the absence of medical advice, being mistaken as the less dangerous disease.

The following is a history of the prevalence of small pox in Battersea since compulsory notification has been adopted:—

1890	...	...	1
1891	...	...	0
1892	...	...	2
1893	...	...	108
1894	...	...	8
1895	...	...	20
1896	...	...	4
1897	...	...	1
1898	...	...	1
1899	...	...	8
1900	...	...	0

The last fatal case was that of an unvaccinated person occurring in October, 1895.

During the year, five hundred and forty-eight cases were notified, shewing a great reduction upon previous years, the annual average being nine hundred and seventy-five. The following shews the number notified during each year from 1890 to 1900:—

1890	...	...	505
1891	...	...	738
1892	...	...	1,171
1893	...	...	1,407
1894	...	...	837
1895	...	...	830
1896	...	...	1,111
1897	...	...	1,621
1898	...	...	809
1899	...	...	721
1900	...	...	548
<i>Annual average for preceding</i>			
	10 years ...	...	975

The cases were fairly equally distributed throughout the year, being rather more prevalent in the month of October, when sixty-five cases were notified, the monthly average for the year being 42·1 cases.

Age Distribution.—As usual, most of the cases occurred between the ages of five and fifteen years; five were under one year of age, one hundred and forty-nine between one and five years, three hundred and fourteen between five and fifteen years, sixty-one between fifteen and twenty-five, and nineteen were twenty-five years and upwards.

Local Distribution.—The distribution of the cases in the East and West Divisions was most remarkably equal, two hundred and seventy-two occurring in the former, and two hundred and seventy-six in the latter. The sanitary districts at first sight do not appear to shew such equality in that respect, but it must be remembered that their sizes and populations greatly vary. The following table compares the incidence of Scarlet Fever in the eight Sanitary Districts during the past three years. It will be observed that District No. 6 shews the greatest improvement.

TABLE XIX.

Sanitary District.	Number of Cases of Scarlet Fever Notified.		
	1898.	1899	1900
No. 1	69	71	88
„ 2	123	146	100
„ 3	132	46	84
„ 4	130	89	69
„ 5	74	123	66
„ 6	175	113	39
„ 7	55	83	66
„ 8	51	50	36
TOTALS	809	721	548

Hospital Treatment. Four hundred and thirty-nine of the cases were removed to hospital, representing 80·1 per cent. of

the cases notified, compared with 78·9 per cent. during the preceding year; as in former years, cases have occurred in houses where patients have returned from hospital, notwithstanding that thorough disinfection has been carried out, and to the further fact that between the date of disinfection and the date of the return of the patient, a period of many weeks, and in some cases of months, no further cases have occurred, yet within a few days of such return, other members of the family have contracted the disease. These circumstances forcibly suggest that in such cases the patients have been discharged from hospital whilst still in an infectious condition. The Metropolitan Asylums Board, in November, 1898, appointed a special Medical Officer to investigate all such cases occurring in the Metropolis for a period of six months, but his report has not been published.

The following are cases which occurred during the year under report:—

Case 1. F. L., removed to hospital from Earlsfield, in 1899, discharged 10th January, 1900, and went to 86 Eland Road, Battersea. On the 22nd January, E. L., of that address, developed the disease.

Case 2. R. P., removed to hospital from — Elsley Road, on the 15th November, 1899; returned 24th February, 1900.

On the 1st March, A. P. developed the disease (R. P., after return, was reported to have had discharges from ears).

Case 3. W. S., of — Tyneham Road, was removed to hospital on the 13th January, 1900, suffering of Diphtheria and returned 4th March.

On the 9th March, the same patient developed Scarlet Fever, and was sent back to hospital.

Case 4. A. S., of — Lockington Road, was removed to hospital on the 3rd February, and returned on the 14th April.

On the 25th April, L. S., and on the 2nd May, W. S., were attacked; on the latter date also M. B., living next door, and who had been playing with A. S., was attacked.

Upon examination by the Medical Officer of Health, A. S. was found to be still in an infectious condition, with discharges from ear, and was sent back to hospital on the 30th April.

Case 5. P. D., of — Motley Street, was removed to hospital on 23rd February, and returned on or about 23rd April.

On the 4th May, E. S. was attacked.

Case 6. E. M. and A. M., of — Salcott Road, were removed to hospital with Diphtheria on the 5th March, and whilst there were reported to have developed Scarlet Fever. They returned on the 9th May, and went to — Comyn Road, the family having changed their address.

On the 24th May, E. B., of Comyn Road, developed Scarlet Fever.

Case 7. G. B., of — Battersea Park Road, was removed to hospital on 29th January, and returned on or about 29th June.

On the 5th July, S. B. was attacked.

Case 8. R. W., of — Battersea Park Road, was removed to hospital on 2nd July, and returned on the 18th August.

On the 30th August, S. W. was attacked.

It is stated that the child had a rash on its chest when it returned, and that the scales from desquamation could be shaken from the clothes.

Case 9. H. C., of — Sabine Road, was removed to hospital on 25th June, and returned on 22nd September.

On the 1st October J. C. was attacked.

Case 10. F. B. was removed to hospital from — Francis Street, Chelsea, on the 16th August, 1900, and was discharged on 28th September, and went to — Knowsley Road, where the parents then resided. On the 4th October, F. B. is stated to have been still desquamating.

On the 3rd October, P. B., of the latter address, was attacked.

Case 11. E. B., of — Sterndale Road, was removed to hospital on 18th July, and returned on or about 1st October.

On the 6th October, F. E. was attacked.

Case 12. J. J., of — Linford Street, was removed to hospital on 12th September, and returned on or about the 23rd October.

On the 29th October, E. J., and the 6th November, G. T. were attacked.

Case 13. F. Y., of — Elsley Road, was removed to hospital on the 25th September, and returned on the 4th December.

On the 19th December, C. Y., who had slept with the above, was attacked.

Case 14. C. G., of — Wickersley Road, was removed to hospital on the 9th October, and returned on the 12th December, and is reported to have then suffered from discharges from the ear.

On the 23rd December, E. G., who had slept with the above case, was attacked.

All the above cases are those in which Scarlet Fever has recurred in houses after patients have returned home, and the following cases therefore slightly differ, inasmuch as Diphtheria was developed in patients who only a few days previously were discharged from hospital after treatment for Scarlet Fever.

Case 15. W. S., of — Tyneham Road, was removed to hospital on the 13th January, suffering from Scarlet Fever, and was discharged on the 4th March.

On the 9th March, W. S. was sent back to hospital, suffering from Diphtheria.

Case 16. G. W. E., of — Battersea Park Road, was removed to hospital, suffering from Scarlet Fever, on the 20th September, and was discharged from hospital on the 9th November.

On the 14th November, G. W. E. was returned to hospital, suffering from Diphtheria.

These cases were from time to time brought to the notice of the Metropolitan Asylums Board, and the following are extracts from some of the reports of the Medical Superintendents of the hospitals upon the complaints forwarded.

Grove Hospital.

Case 9. "Desquamation was completed when H. C. was discharged, and the patient was free from all mucous discharges, and appeared quite well."

Northern Hospital.

Case 10. "When examined on September 26th, her mouth, nose, and ears were healthy; and on inspection immediately before she left the hospital, on September 28th, no morbid condition about her was discovered. I should be interested to learn whether anything suggestive of possible infectiousness was observed after she returned home."

(In reply, attention was directed to the desquamation observed on the 4th October.)

Gore Farm Hospital.

Case 11. "On E. E.'s discharge, he showed no signs of being infectious. It is possible that the Scarlet Fever contracted by his brother may be due to some other cause than the discharge of E. E."

Grove Hospital.

Case 12. "The patient, J. J., was detained forty-three days in hospital, and was free from desquamation and all mucous discharges before he left the hospital."

"The usual precautions were taken in discharging him."

Gore Farm Hospital.

Case 13. "F. Y. was as far as I could judge, free from infection on her discharge, nor do I see from the facts referred to any reason to suppose that the return case was directly connected with the child in question."

Grove Hospital.

Case 14. "She had a discharge from both ears while in hospital, which commenced from the right ear on the 13th, and from the left ear on the 14th October."

"It had ceased before she was discharged, and must have recurred again. She was discharged in the ordinary way, and the usual precautions were observed."

The reports of the Medical Superintendents are of value, as shewing the precautions adopted to prevent the recurrence of cases, but are not, in my opinion, sufficiently strong as a whole to remove the grave suspicion that further cases are contracted from insufficiently recovered, discharged cases.

Personal Infection. Several groups and individual cases have been very clearly traceable to personal infection.

On 5th April, a case of Scarlet Fever was notified from — Orville Road, and although at once removed to hospital, four other members of the family were attacked, the first case not having been recognised until it was in the highly infective stage.

On the 10th October, a case was notified from — Morrison Street. The patient was then in a state of desquamation, having been treated for some other ailment, and had attended business whilst in that state, whereby another engaged in the same office contracted the disease.

On the 10th November, a case occurred at — Jedburgh Street, and upon investigation, it was found that the patient had been playing with a child suffering from the disease in an adjoining road.

On the 23rd November, a case was notified from — Montholme Road, and it was found that the child was then desquamating, and had been attending Honeywell Road School whilst in that condition. The school was immediately disinfected by this Department, and doubtless owing to this prompt action only one further case occurred.

Mortality. Deaths from Scarlet Fever during the year numbered thirteen. Eleven of these occurred at hospital, and two amongst the cases treated at home; the fatality rates being 2·5 and 1·8 per cent. respectively, or altogether, equal to 2·3 per cent. of the cases notified.

The Scarlet Fever mortality rate was equal to 0·07 per 1,000 of the population, comparing most favourably with 0·13 per 1,000, being the rate for the thirty-three great towns during 1900.

Diphtheria and Membranous Croup.

It is difficult to refer in sufficient terms to the almost wonderful reduction which has been effected in the sickness and mortality from these diseases during the present year, the number of cases notified being only three hundred and six. Two hundred and ninety-eight were notified as Diphtheria, and eight as Membranous Croup, but these diseases are practically synonymous. In the year 1891 alone has there been such

freedom from the disease. The annual average for the ten years preceding 1900 was 500. The following shews the number of cases notified during each of the years 1890-1900.

1890	...	...	349
1891	...	...	260
1892	...	...	366
1893	...	...	682
1894	...	...	504
1895	...	...	411
1896	...	...	426
1897	...	...	614
1898	...	...	791
1899	...	...	606
1900	...	...	306
<i>Annual average 10 years 1890-9</i>			500

Periodical Distribution.—The distribution of the disease during the year was remarkably equal, the monthly average being 23.5 cases. The extreme variations from the monthly average were the first four weeks of June, when only ten cases were notified, and the month ending the 10th March when 40 cases were notified. The weekly extremes were those ending May 12th and March 20th. In the former week no cases were notified, and in the latter fourteen.

Age Distribution.—Children between the ages of five and fifteen years contributed the largest number to those attacked with Diphtheria. The following are the numbers for the various age periods: Under one year of age, four; from one to five, one hundred and ten; from five to fifteen, one hundred and thirty-four; from fifteen to twenty-five, thirty; and from twenty-five to sixty-five years, twenty-eight.

Local Distribution.—As in the case of Scarlet Fever, the cases of Diphtheria are almost exactly equally distributed between the two divisions of Battersea. In East Battersea one hundred and

fifty-one cases occurred, and in West Battersea one hundred and fifty-three. The following table shews the distribution of the cases in the eight sanitary districts and comparison with the two previous years.

TABLE XX.

Sanitary District.	No. of Cases of Diphtheria.		
	1898.	1899.	1900.
No. 1	131	119	64
„ 2	234	132	55
„ 3	141	61	32
„ 4	55	67	17
„ 5	55	62	35
„ 6	82	92	37
„ 7	42	34	29
„ 8	51	39	37
TOTALS	791	606	306

Each district shews a reduction upon the previous year, the largest being in the case of No. 2 District. It will be remembered that since 1898 extensive improvements have been carried out in that part of Battersea on the re-construction of sewers and street gullies and the provision of more efficient means of sewer ventilation and flushing. These were effected as the result of the recommendations of a Special Sub-Committee appointed to investigate the undue prevalence of

Diphtheria in that locality, and it is most reasonable to assume that this improvement in the public health has thereby resulted. The following figures will show the marked reduction in the prevalence of Diphtheria in that district during the past three years.

Year.	Cases of Diphtheria Notified in No. 2 District.		
1898	234
1899	132
1900	55

Hospital Treatment.—Two hundred and twenty-two cases were removed to hospital, being equal to 72·5 per cent. of the cases notified, the proportion being slightly lower than during the previous year, which was 74 per cent. Under the heading of “Scarlet Fever” I have already dealt with two cases where Diphtheria was developed within a few days after they had been discharged from hospital for the treatment of Scarlet Fever.

Personal Infection, &c.—It is frequently exceedingly difficult to trace the source of infection, but the few following cases are of interest, and shew little doubt in this matter.

On the 26th January A. B., of Latchmere Road, was attacked with Diphtheria. It was subsequently ascertained that a few days previously he had visited a case at — Everleigh Road.

On the 29th October F. D. was attacked by Diphtheria after wearing a suit of clothes which, upon enquiry, were found to have been worn by a person who had died of Diphtheria at Yarmouth.

Several cases occurred during the year in which the presence of Diphtheria was not ascertained until after the post-mortem examination.

Exposure of an Infected Person.—At their meeting held on the 20th March, the Health Committee considered the case of C. T., of — Kathleen Road, who, on the 13th March, was allowed to be exposed in a public place whilst suffering from Diphtheria, and the Committee gave the necessary instructions for proceedings to be taken in the matter. Upon a subsequent interview with the medical attendant, however, it was ascertained that, although the parents were not acting under his authority, yet he was of opinion that the patient had then recovered and was not infectious. The Committee therefore approved of a cautionary letter being addressed to the parents.

Mortality.—The deaths from Diphtheria during the year numbered twenty-nine; nineteen of these occurred in hospital, and ten amongst the cases treated at home, the fatality rates being 8·5 and 11·9 per cent. respectively, or together, equal to 9·4 per cent. of the cases notified.

Diphtheria mortality was equal to 0·16 per 1,000 of the population compared with the rate for the thirty-three great towns of 0·35 per 1,000 of the population.

Enteric Fever.

This disease again shewed an increase during the year, the number of cases notified exceeding that of any year since compulsory notification came into force, being two hundred and five compared with one hundred and eighteen, representing the annual average during the preceding ten years. Notwithstanding the increased prevalence the mortality was however lower than the preceding year. The following shews the number of cases notified in Battersea during the years 1890 – 1900:—

Enteric Fever.

Year	No. of Cases of Enteric Fever Notified.		
1890	129
1891	111
1892	74
1893	129
1894	153
1895	135
1896	110
1897	95
1898	94
1899	157
1900	205
<i>Annual average for 10 years 1890-9</i>			118

Periodical Distribution. This disease usually prevails in the later months of the year, but during 1900 continued throughout each month, there being only four weeks when there was an entire absence of notifications. These were the fourth week of May, the second and fourth weeks of June, and the fourth week of July. The average weekly number of cases was 3.9, the largest number occurring in the third week of March when eleven cases were notified. The monthly average was 15.7 cases, the largest number occurring in any one period of four weeks being twenty-eight, in the month ending 17th March.

Age Distribution. In Enteric Fever, we find the cases distributed among all the age periods, that from five to seven years claiming the largest number followed next by the age period of twenty-five to sixty-five years of age. The number at the various ages was as follows:—Under one year, one; from one to five years, thirteen; from five to fifteen years, seventy-six; from fifteen to twenty-five years, forty-seven; from twenty-five to sixty-five years, sixty-seven; and sixty-five years, one.

Local Distribution. One hundred and eight of the cases occurred in East Battersea and ninety seven in West Battersea. The following tables shew the distribution of the cases in the eight sanitary districts during the past three years. The disease has been the most prevalent during each of the past two years in No. 1 Sanitary District.

TABLE XXI.

Sanitary District.	Number of cases of Enteric Fever notified.		
	1898	1899	1900
No. 1	14	33	50
„ 2	16	22	32
„ 3	12	11	35
„ 4	12	30	23
„ 5	11	20	22
„ 6	10	23	30
„ 7	14	11	9
„ 8	5	7	4
TOTALS.	94	157	205

Hospital Treatment. One hundred and forty-four cases were removed to hospital representing 70·2 per cent of the cases notified compared with 79·6 during the preceding year.

General Remarks. It is difficult to account for the great increase in prevalence of Enteric Fever during the past two years. In

some quarters it is suggested that this may in a measure be due to the large number of invalids continuously returning from South Africa retaining infection in their persons and clothing, and this seems highly probable and may account for some of the cases where no other cause was traceable.

Although not imported from abroad many cases have been clearly found to have been contracted outside Battersea, particularly during the period of the summer holidays. Many persons after spending a few weeks in different parts of England returned to Battersea to be stricken down with Enteric Fever within a few days. In each of these cases the Medical Officers of Health were communicated with.

In a few other cases, patients had consumed shell-fish, but it could not be proved that this had been the cause of the illness.

Other cases were clearly traceable to personal infection, four occurring in one house where an unrecognised case had been kept at home occupying the same room as other members of the family, and even when two of the further cases had occurred considerable difficulty was experienced in persuading the parents to allow the cases to be removed. The Medical Officer of Health, however visited and insisted upon removal and this was speedily effected. The fourth case occurring a few days later was also removed.

A group of cases occurred in Linford Street which was doubtless also the result of personal infection, the class of people occupying the houses being such as are always in and out of their neighbours' houses. Notwithstanding that in every case prompt removal to hospital was carried out, immediately followed by disinfection, eleven cases occurred during the year, and taking into consideration the number of houses in the street this shewed the worst record in Battersea. Of the eleven cases, one was of quite an isolated character, occurring in March, but the remaining

ten, the first of which occurred on the 30th July, were clearly grouped, following one another in regular succession during three months, the last case occurring on the 3rd November. During the three succeeding months which brings us down to the time of writing, no further case occurred.

In the course of an enquiry made by Dr. Hamer, Assistant Medical Officer of Health to the London County Council, in November concerning the undue prevalence of Enteric Fever in the Metropolis generally, those cases occurring in Battersea were also investigated by him, but he was unable to find that any common cause existed here.

Mortality. The deaths from Enteric Fever during the year numbered thirty-two; fifteen of these occurred amongst those cases treated at hospital, and seventeen of those kept at home. The fatality rates respectively were 10·4 and 27·8 per cent., a record very favourable in support of hospital treatment. The Enteric mortality rate was equal to 0·18 per 1,000 of the population compared with 0·20, representing the mortality rate for the thirty-three great towns.

Typhus Fever.

No notifications of this disease were again received during the year. In fact, the disease is now very rare in England, and yearly becomes more so, in view of the greater vigilance and enforcement of the various powers for improving sanitary conditions. This disease is one dependent upon poor living, filth and overcrowding, and under conditions suitable for its propagation, is of a highly infectious and fatal character.

Erysipelas.

This disease covers so many forms and degrees of inflammatory affections, that very little room is afforded for discussion. One hundred and sixty-five cases were notified during the year, most of them following wounds and abrasions, and therefore were

what is known as Traumatic Erysipelas. The following shews the number of cases occurring during each year since the commencement of the system of notification, from which it will be seen that the record of this year is most satisfactory in being not only far below the annual average, but the lowest recorded in any year:—

Year.	Number of cases of Erysipelas notified.		
1890	250
1891	240
1892	333
1893	439
1894	325
1895	244
1896	263
1897	225
1898	178
1899	204
1900	165

Annual average for 10 preceding years 270

Age Distribution.—The age period from twenty-five to sixty-five was as usual, the most largely affected, considerably more than one half of the cases occurring at those ages. The following was the age distribution of the whole of the cases notified:—Under one year of age, five; from one to five years, two; from five to fifteen years, eleven; from fifteen to twenty-five years, twenty-one; from twenty-five to sixty-five, one hundred and ten; and above sixty-five years, sixteen.

Local Distribution.—Sixty-five cases occurred in East Battersea, ninety-five in West Battersea and five were developed in the Wandsworth and Clapham Union Infirmary. The following table shews the distribution of the cases in the eight Sanitary Districts, and for the purposes of comparison those of the two preceding years:—

TABLE XXII.

Sanitary District.	Number of cases of Erysipelas notified.		
	1898.	1899.	1900.
No. 1	34	34	19
„ 2	39	41	30
„ 3	29	40	26
„ 4	21	29	27
„ 5	24	16	15
„ 6	15	24	29
„ 7	8	11	11
„ 8	8	9	6
TOTALS	178	204	163

Hospital Treatment.—Forty-one cases were removed to hospitals, namely, the Union Infirmary or general hospitals, but principally the former. Those cases thus removed represented 25·2 per cent. of the cases notified.

Mortality.—The deaths recorded during the year numbered seventeen; of these six occurred in hospital and eleven at home, representing 14·6 and 8·8 per cent. respectively, or together 10·3 per cent. of the cases notified.

The Erysipelas mortality rate was equal to 0·09 per 1,000 of the population.

Puerperal Fever.

This most fatal disease also shews a very satisfactory record during the year, being the lowest since the passing of the Notification Act of 1889. Six cases were recorded compared with an annual average of 12.5 cases during the preceding ten years, the number recorded during each of those years being here shewn.

Year.			Number of cases of Puerperal Fever notified.
1890	...	...	18
1891	...	...	12
1892	...	..	16
1893	...	...	18
1894	...	...	10
1895	...	...	10
1896	...	...	10
1897	...	...	7
1898	...	...	10
1899	...	...	14
1900	...	...	6
<i>Annual average for 10 preceding years</i>			12

Local Distribution, &c.—In so small a number of cases local distribution is simplified. The cases occurred on the following dates and in the following places :—

11th June	...	Rollo Street.—(Fatal.)
11th July	...	Duffield Street.
13th „	...	Grove Mansions.—(Fatal.)
11th September	...	Home Road.—(Fatal.)
12th „	...	Albany Mansions.—(Fatal.)
24th „	...	Shelgate Road.

In each case enquiries were made as to the nurses attending upon the patients, and these were duly cautioned by letter against attending any midwifery cases for at least six weeks.

An important case occurred in an adjoining district, where one of the nurses who had attended the fatal case at Rollo Street,

Battersea, attended upon another woman in her confinement notwithstanding that she had been duly cautioned by letter against doing so. This second case also terminated fatally and, as the result of the Coroner's inquiry, the woman was charged with manslaughter.

Hospital Treatment and Mortality.—Three of the cases notified were removed to hospital, where one died, and the remainder treated at home were all fatal.

The proportion of Puerperal Fever cases to the number of births occurring during the year was equal to 0·11 per cent.

Continued Fever.

One notification of Continued Fever was received in January from Totteridge Road. The patient was treated at home and eventually recovered. This disease is a kind of Low Fever and is of doubtful cause and origin.

Cholera.

The term Cholera, as understood in regard to notification, relates only to Asiatic Cholera, of which there have been no cases, nor any great danger of invasion for many years.

English Cholera, which is certainly of a specific character, frequently occurs during the summer months and has done so in Battersea during the past year, but this is only a synonym of Diarrhœa or Epidemic Enteritis.

Bubonic Plague.

During the year under report this country has been seriously threatened by plague, a number of imported cases occurring in August and on subsequent occasions. The first cases were discovered in Glasgow, which may be regarded as the chief

centre of infection. The strictest quarantine and isolation were enforced, which has fortunately resulted in the disease being kept under control. The Port and other Sanitary Authorities immediately notified the Health Department when any persons were proceeding to this district after having subjected themselves to possible contagion, and all such persons were kept under the strictest observation by the Health Officers for the full period of incubation.

On the 1st September the Metropolitan Asylums Board issued a circular notifying that the Superintendents of the Board's Ambulance Stations had received instructions to remove forthwith to the South Eastern Hospital any person duly certified to be suffering from plague, and by an Order of the Local Government Board, dated 19th September, 1900, "Plague" was made compulsorily notifiable, and the following are the more important terms of the Order in question:—

"In the District of every Sanitary Authority which is situate without the Administrative County of London the persons mentioned in Section 3 of the Infectious Disease (Notification) Act, 1889, and the Sanitary Authority shall, under this Order, have the same powers and duties in relation to the notification of cases of Plague as they would have under that Act if Plague were an infectious disease to which that Act applied.

"In the District of every Sanitary Authority in the Administrative County of London, and in the District of the Port Sanitary Authority of the Port of London, the persons mentioned in Section 55 of the Public Health (London) Act, 1891 (including the Managers of the Metropolitan Asylums District), and the Sanitary Authority shall, under this Order, have the same powers and duties in relation to the notification of cases of Plague as they would have under that Section if Plague were an infectious disease to which that Section applied.

Bubonic Plague.

If, therefore, you have any case of suspected Plague please forward *immediately* the usual notification, and steps will be taken for the removal of the patient to hospital for observation, the result of which you will be duly informed.

I am, Dear Sir,

Yours faithfully,

W. H. KEMPSTER, M.D.,
Medical Officer of Health.

On the 9th October, 1900, the London County Council communicated the arrangements made by them for facilitating diagnosis in respect of any suspected cases of Plague, and that the services of Mr. James Cantlie, M.B., F.R.C.S., formerly Medical Officer in one of the Plague Hospitals of Hong Kong, had been employed for that purpose, and requesting that any *suspected* cases of the disease might be immediately brought to the notice of the Council's Medical Officer of Health. The London County Council further stated that they were prepared to provide refuges for the accommodation of persons who have been in contact or living with persons attacked by Plague.

On the same date the Local Government Board issued memoranda prepared by their Medical Officer, containing suggestions likely to be of assistance to Sanitary Authorities and their officers in guarding against the Plague or dealing with any cases which may occur, and also containing details of the arrangements under which Medical Officers of Health might send to the offices of the Local Government Board for bacteriological examination material from suspected cases. The memoranda in question were classified under two headings: (1) Administrative Considerations; (2) Symptoms of Plague; and the more important points therein are here summarised:—

ADMINISTRATIVE CONSIDERATIONS.

Plague has, for the space of nearly two centuries, receded from Europe, but has in recent years once more trended westward, and has re-appeared in Great Britain. Sanitary authorities need be on the alert to detect the presence of the disease and prevent its becoming epidemic. Plague will not readily fasten on that section of our population which is properly housed, cleanly, and generally, in a sanitary sense, well-to-do; that rather it will especially affect insanitary areas such as are peopled by the poorest class, and where overcrowding of persons in houses and dirt and squallor of dwellings and of inhabitants tend to prevail.

The following facts respecting Plague deserve to be borne in mind :—

(1) Plague has an incubation period of 3 to 5 (in exceptional cases of perhaps 8 to 10) days.

(2) Plague is wont, especially in its earlier manifestations, to assume a mild form, or even to present anomalous symptoms, tending to confound it with other and more innocent diseases.

(3) Plague in all its forms must needs be regarded as personally infective.

(4) Plague affects rats as well as the human subject. It may, indeed, be found causing mortality among those lower animals antecedent to its definite invasion of the population. There can be no doubt that the rat and the man are, as regards Plague, reciprocally infective.

The memoranda further refers to the diminution of Typhus due to improved sanitary conditions, and compares its close resemblance to Plague, and also suggests the general measures which should be adopted in dealing with an outbreak, including prompt isolation, disinfection, and the quarantine of persons who have been exposed to infection; the abatement as speedily as possible of all insanitary conditions in the locality; and in the case of death the prompt disposal of the bodies.

SYMPTOMS OF PLAGUE.

The memoranda gives also the symptoms of several forms of Plague, the more common usually beginning some three to five days after exposure to infection. Such attack may develop gradually, but, as commonly met with, there is a sudden onset with much fever, as indicated by a high temperature, rapid pulse, headache, hot skin, and thirst. The eyes are injected as if inflamed; the expression, at first anxious and frightened, becomes subsequently vacant and dull; the utterance is thick, and the gait unsteady as in one under the influence of drink. There is at times a distinct tendency to faint. The tongue is at first covered with a moist white fur, except at the edges, which are red, but later on it becomes dry and of a mahogany colour.

Further information is contained in a report prepared by Mr. James Cantlie, and issued by the London County Council in October on "The Signs and Symptoms of Plague."

On the 15th October a communication was received from the Town Clerk of the City of London to the effect that the Port of London Sanitary Authority would be glad to receive notification of cases of Plague occurring in the vicinity of the docks and river, and would be prepared to pay the usual fee to medical practitioners for certificates, although such cases might not actually occur within the district of the Port of London.

On the 21st October a communication was received from Dr. Shirley F. Murphy, asking that inasmuch as unusual mortality amongst rats had been observed in some localities in which the inhabitants have subsequently suffered from Plague, the Health Committee of the Council may be immediately informed if at any time such mortality among rats is observed in the district.

It will thus be seen that elaborate arrangements have been made throughout the country and Metropolis for combating

the disease, and which, together with the generally improved sanitary conditions now existing, has undoubtedly prevented the disease from so far becoming epidemic.

Disinfection.

Disinfection by fumigation was carried out in 1,404 instances during the year. In the majority of cases, sulphurous acid gas was the agency employed; in other cases, however, where the sulphur fumes would be liable to injure metal work or delicate fabrics, formalin was used. Disinfectants were also gratuitously supplied in 5,631 instances, either at the houses or upon application at the Disinfectant Stores, Town Hall Road. The disinfectants distributed, consisted of 2-lb. packets of carbolic powder and 1-pint bottles of Sanitas fluid.

Steam disinfection was carried out during the year in four hundred and ninety-two instances; the articles weighing 39 tons, 10 cwt., 3 qrs., 27 lbs. The amount paid to the contractor (Mr. W. G. Lacy) during the year amounted to £732 9s. 9d.

The present practice is to disinfect by steam after *all* cases of enteric fever, after *fatal cases* of *all* notifiable diseases and phthisis, the latter subject to permission, and in *all* cases where patients are treated at their homes. When the Council's Disinfectant Station is erected it is proposed to disinfect by steam after every case of infectious disease notified.

At the time of writing my last report, the recommendation to provide a disinfecting station had been referred back to the Health Committee, who appointed a Sub-Committee of View, to consider details and cost, and on the 1st May, 1900, the following report was submitted by them to the Health Committee :—

“Your Sub-Committee have had before them a return,

prepared by the Medical Officer of Health, shewing the methods adopted for disinfection by heat in thirty-five Metropolitan districts.

“In twenty-five instances steam disinfection is carried out under the direct control of the sanitary authorities; in one case, disinfection is carried out by dry heat, in another, the Vestry was constructing a station, in three cases the authorities make use of apparatus provided for adjoining parishes; in one case, that provided at a local hospital, and in four instances, exclusive of Battersea, steam disinfection is carried out by contract.”

Your Sub-Committee have visited three of the stations, viz. : at Camberwell, Lambeth, and Newington.

At Camberwell, a Goddard, Massey and Warner machine is provided. This system your Sub-Committee found would be totally impracticable for the requirements of this Parish.

At Newington, where in 1899, the Parish had a population of 123,183, a Manlove Alliot (Washington Lyon) machine, vacuum arrangement is provided. (This machine is manufactured in three sizes). By the courtesy of Dr. Millsom, the Medical Officer of Health, the working of the apparatus was fully and practically demonstrated. Steam disinfection is there carried out after all cases of infectious disease, and it is found that the apparatus is capable of effectually dealing with the whole of the articles. The process of disinfection occupies from 40 to 50 minutes, the temperature reached during the operation being 240° f. under a 10 lb. pressure in the steam jacket. The temperature is subsequently reduced to 160° f. for the purpose of creating a vacuum, and finally raised to 260° f. under a 20 lb. pressure. An incinerator for the destruction when necessary of infected articles is also provided, distinct from the dust-destroyer, which immediately adjoins. The Parish Mortuary and Coroner's Court is situated on the same site, and it is found a matter of great convenience that they should be in so close proximity.

At Lambeth, with a population of 304,073, in 1899, two stations are provided, at one of these the machinery is of an old type, and at the other a modern machine, an "Equipex," manufactured by Messrs. Defries, is provided. Your Sub-Committee have viewed the latter, and were shown the process of disinfection carried out by the machine, which differs from the Manlove Alliott, the goods being saturated with steam, supplied by means of a steam sparge pipe in place of the steam jacket arrangement provided in that machine. The goods were readily dried upon being shaken for a moment in the air. This building likewise immediately adjoining the Mortuary.

In both the latter machines, automatic indicators were provided, shewing the temperature and time of exposure to the disinfection process, forming a permanent record of each operation.

By the arrangement of the apparatus as at Lambeth, the services of one permanent attendant only at the station are rendered necessary, but such a principle is probably applicable to other machines of the same class. Your Sub-Committee, however, although pleased with both the two latter forms of machines, are inclined to prefer the "Equipex." Your Sub-Committee beg to recommend :—

1. That the Vestry take immediate steps to provide the necessary means of carrying out steam disinfection without the intervention of a Contractor.
2. That in the event of the foregoing recommendation being adopted, your Sub-Committee recommend that one of the two following sites be selected for the purpose.
 - (a) Adjoining proposed mortuary in Sheepcote Lane.
 - (b) On one of the Vestry's wharves, Lombard Road.

Disinfection.

3. That the Surveyor be requested to prepare plans and specifications, and estimates of the cost of buildings, machine, incinerator, &c.

On the 30th June, 1900, the Health Committee further considered the subject, and submitted the following report, which was adopted at the meeting of the Vestry on the 11th July.

Your Committee now recommend:—

- (a) That immediate steps be taken to provide the necessary means of carrying out steam disinfection without the intervention of a Contractor.
- (b) That a disinfection chamber, with duplex machinery, be erected on land between the proposed mortuary and the western wall of the Vestry's Depôt, Sheepcote Lane, in accordance with the plan prepared by the Surveyor, and that it be referred to your Committee to prepare the necessary detail drawings, specification, &c.

At a meeting of the Health Committee, held on the 27th November, the Surveyor submitted the following estimate of the cost of the works:—

Building	...	...	£2,369	0	0
Two Steam Disinfectors	...	...	736	0	0
Two Vans	...	...	100	0	0
Bags, &c.	...	...	25	0	0
			<hr/>		
			£3,230	0	0
			<hr/> <hr/>		

and that Committee submitted the following report, which was adopted by the Borough Council, on the 28th November.

Your Committee have considered detail drawings, specification, and bills of quantities for the erection of a disinfecting

station; on land adjoining Latchmere Road Baths, and they recommend that the buildings be erected in accordance therewith, subject to a loan being obtained for the purpose.

Disinfection and destruction of Library Books. For some years past a practice has been adopted whereby all books borrowed from the Public Lending Libraries by persons from houses in which infectious disease exists, are forwarded to this Department, and unless they are such as are practically not replaceable, in which case they are thoroughly disinfected, they are destroyed and replaced. During the past year ninety-four such books were received, of which seventy-eight were destroyed and replaced, and the remaining sixteen disinfected, and returned to the Library Department.

Destruction of Bedding, &c. In no case during the year was it found necessary or desirable to destroy bedding, &c. This practice is adopted when the cost of disinfection would exceed the value of the article infected.

Unavoidable damage to clothing and bedding occurred in two instances, and in these cases the articles were replaced by direction of the Health Committee. The cost during the year amounting to £1 12s. 6d.

Flushing of House Drains, &c. After all cases of Enteric Fever and Diphtheria and in other cases, when considered necessary, the drains of the houses were flushed by the staff with disinfectants, and this was carried out in 764 instances.

Certificates of Disinfection. During the year 1,192 certificates were granted, the majority of these being supplied to the Head Teachers of Schools to whom it is a practice to forward them when there are school-children occupying the house which has been disinfected. The remainder of the certificates were supplied where such were required by employers before allowing employés to return to their duties.

Mortuary.

In my report for the year 1899, I dealt at some length with the question of the recognised necessity for increased mortuary accommodation and gave details of the scheme for the erection of a Mortuary on the ground adjoining Latchmere Road Baths at an estimated cost of £4,795. Applications were then being made to the Local Government Board and London County Council respectively for the following loans which have now been granted subject to the usual conditions.

Local Government Board	£985	for Post-Mortem Room.
”	”	”
”	£2,723	for Coroner's Court.
London County Council	£1,087	
Total	<u>£4,795</u>	

The work of erection will now, therefore, be speedily put in hand.

During the year 1900 the existing Mortuary has been in greater requisition than during the previous year. Two hundred and ninety-one bodies having been received. One hundred and eighty-nine were the bodies of males and one hundred and two those of females.

The following return shews the number of admissions and other particulars relating to the Mortuary during the past thirteen years :—

TABLE XXIII.

	Number of bodies received in the Mortuary.	Number of bodies upon which <i>post- mortem</i> examinations were held.	Number of bodies upon which Coroner's inquests were held.
1888	134	106	134
1889	140	118	140
1890	199	148	194
1891	176	139	169
1892	193	163	187
1893	243	200	237
1894	224	197	208
1895	259	210	232
1896	293	242	278
1897	289	246	273
1898	294	238	267
1899	274	221	260
1900	291	234	273

The largest number of bodies received during any one day of the year was on the 15th day of March when six were admitted.

Two hundred and thirty-four post-mortem examinations were carried out during the year and two hundred and seventy-three inquests held; the latter at the Coroner's Court in Althorpe Grove. In connection with the new Mortuary a Coroner's Court is to be provided, and great benefits will accrue to coroner, jury, and witnesses, when the same is ready for use. The London County Council will contribute £150 per annum as a rental for the use of the same.

Eighteen bodies were admitted to the Mortuary for sanitary reasons in view of the limited accommodation at the homes of the deceased's relatives. &c. Of the bodies admitted to the Mortuary during the year three were those of persons who had died of infectious disease and were isolated in the infectious chamber.

In my report upon the previous year I suggested the possibility of the existing Mortuary being retained for special purposes after the new one is erected, and this would be particularly useful and desirable for receiving bodies recovered from the river which during the year under report numbered fifteen.

The unidentified bodies received during the year numbered eight, and these were subsequently interred at the expense of the Guardians. The following particulars relate to the bodies in question :—

TABLE XXIV.

Particulars of unidentified bodies admitted to the Mortuary during the year 1900.

Date body was admitted to Mortuary.	Sex.	Age.	Cause of death.	Where found.
1900. 19th January.	M	Newly born	Not stated, probably "drowning"	River Thames
2nd February	M	35-40 years	Drowning	do.
11th May ...	F	About 20 years	Do.	do.
20th ,, ...	F	Newly born	Suffocation	do.
23rd June ...	M	About 40 years	Drowning	do.
26th ,, ...	F	Newly born	Suffocation by pressure	do.
17th October.	M	Newly born	Want of food and exposure	Wandsworth Common
26th Dec. ...	F	Newly born	Asphyxia	Amies Street

The bodies admitted to the Mortuary during each month of the year numbered, in January, thirty-nine; in June, twenty-nine; in February, March, September and December, each twenty-seven; in April, twenty-six; in August, twenty; in October, nineteen; in May, eighteen; in July, seventeen; and in November, fifteen. The number received during each month are also here shewn in their calender order:—

Mortuary.

January	...	39
February	...	27
March	...	27
April	...	26
May	...	18
June	...	29
July	...	17
August	...	20
September	...	27
October	...	19
November	...	15
December	...	27
Total	...	<u>291</u>

The arrangements for the care and cleansing of the Mortuary have been altered during the year, and are now carried out by the Coroner's Officer and his wife. The Coroner's Officer, as the title implies, is an officer under the control of and paid by the Coroner, and, in addition to other duties, on his behalf is responsible for cleansing the bodies of those admitted when circumstances require, the fees paid by the Coroner for this work being refunded by the Borough Council. The wife of the Coroner's Officer is the Mortuary Keeper under the Borough Council, and is responsible for the cleanly condition of the Mortuary, the cleansing of towels and for keeping the Register of bodies admitted, which latter is submitted to the Health Committee at each meeting.

Châlets.

Five of these now exist in Battersea, the last having been opened during the year under report in York Road, at the corner of Plough Road. At the time of writing the erection of another was being considered, the probable site being in Bridge Road, near Battersea Park Road. The following are those now in use and under the control of the Health Committee:—

- (1) Lavender Hill, at junction with Falcon Road.
- (2) Battersea Park Road, at corner of Cabul Road.
- (3) Victoria Road, by Victoria Suspension Bridge.
- (4) Victoria Circus (opened 1899).
- (5) York Road, corner of Plough Road (opened 1900).

Each of the châlets are provided with accommodation for both sexes, and have lavatories attached. There are also eight public urinals maintained by the Borough Council at:—

Town Hall Road.

Nine Elms Lane (near steam-boat pier).

Do. (by Rifleman Public-house).

Battersea Park Road (near S. E. & C. & D. Railway Station).

Do. (near L. B. & S. C. Railway Station).

Forfar Road.

Church Dock, Church Road.

Wye Street.

Vicarage Road.

Urinal accommodation, accessible to the general public, is also provided at one hundred and twenty public houses. The number of public conveniences in Battersea is therefore one hundred and thirty-three, and these are all kept under the close and constant supervision of the Sanitary staff.

Water Supply.

At the time of writing my previous report, a complaint was being laid before the Railway and Canal Commission, with reference to the quality of the water supplied in Battersea, by the Southwark and Vauxhall and the Lambeth Water Companies, more particularly as shewn by samples taken in November, 1899, which, according to the Analyst's report, "represented waters insufficiently purified for public supply and for drinking purposes."

Water Supply.

The complaint came on for hearing on the 22nd and 24th January, 1901, strong expert evidence being produced on both sides. The Court were satisfied that the complaint at the time it was presented was fully justifiable, but that in view of the extensive work which the two Water Companies had since carried out, and had in contemplation, there was no alternative but to dismiss the cases, but without costs. There is every reason to be satisfied with the result of the action, which has doubtless had the effect of compelling the Water Companies to carry out those necessary works.

Samples have been taken monthly during the year, from the supplies of both the Water Companies, and in no case has the Analyst found it necessary to recommend that objection should be taken to quality of the supplies of either Company, at the point where the samples were obtained.

Food Supply.

The sources of food supply have received careful and constant supervision during the year, and particularly on Saturdays. In four instances it was found necessary to seize articles exposed for sale, in a state unfit for human food, and these were subsequently conveyed before the Magistrate at the Police Court for condemnation and subsequent destruction. The articles seized consisted of apples, damsons, ham and pork, and in each of the cases proceedings were taken for the recovery of penalties.

It is the practice that when retail vendors become aware that articles of food purchased are unfit for human food, they attend with the same at the Public Health Department, when, if the condition of the articles justifies it, and there appears to have been no attempt to sell the same, a certificate is granted, which enables the retailer to claim the return of the money paid to the wholesale dealer. Fifteen such certificates were granted during the year, relating to the following articles:—

Herrings, haddocks, kippers, mixed fish, crabs, mussels, conger eels, rabbits, potatoes, tomatoes, strawberries, black currants and plums.

Under the Sale of Food and Drugs Acts, five hundred samples are taken annually, and during the year under report, milk again received special attention, representing more than 33 per cent. of the total number of samples taken. In consequence of the number of cases of arsenical poisoning occurring in some parts of the country as the result of drinking poisoned beer, it was considered desirable to procure samples in Battersea, and eighteen such were taken, which upon analyses, were found to be free from arsenic or other foreign poisonous matter.

Bakehouses. The usual half-yearly inspections of bakehouses were carried out in the months of April and September. There are at present one hundred and ten such premises in Battersea. At the April inspection ninety-nine of these were in use, and the necessary limewhiting, &c., had been carried out, except in seventeen instances, in which the Health Committee directed statutory notices to be served. In September, the same number were in use, and it was necessary to serve fourteen statutory notices. At the last inspection those in use consisted of forty-one bakehouses above ground, ten semi-basement, and forty-eight entirely beneath the floor level.

Cowhouses and Slaughterhouses. The usual annual inspection was carried out by a Sub-Committee of the Health Committee, previous to the meeting of the Licensing Committee of the London County Council, when it was found that with few exceptions, the same were in good and clean condition. No objection was offered by the Health Committee to the renewal of the licenses, but they directed that the attention of the Licensing Committee should be called to defects existing at three of the premises. Application for the renewal of the license in respect of No. 43 Usk Road, was not made, and the same

consequently lapsed, reducing the number of cowhouses to five, the slaughterhouses numbering nine. The following premises have been licensed for the year 1900-1 :—

SLAUGHTER-HOUSES (9).	COW-HOUSES (5).
205 St. John's Hill.	14 Belle View Road.
163 " "	Alderney Dairy, Wiseton
351 York Road.	Road.
189 " "	43 Usk Road.
49 " "	Hope Dairy, Hope Street.
139 Bridge Road West.	62 High Street.
345 Battersea Park Road.	
235 " " "	
96 Falcon Road.	

Vaccination.

The Vaccination Act, 1898, came into operation on the 1st day of January, 1899, and is fully dealt with in the report for that year.

During the year under report the number of children successfully vaccinated was two thousand three hundred and seventy-eight, the births registered during the same period numbering five thousand one hundred and sixty-one. The proportion of children vaccinated to the number of births registered was equal to 46 per cent. Five others were insusceptible of vaccination; five hundred and forty-six died unvaccinated; in three hundred and eight cases vaccination was postponed by medical certificates; fifty-two removed to other districts, the vaccination officers of which were duly apprised; in ninety-one cases the privilege of conscientious objection was taken advantage of, and the remainder were neither duly entered in the Vaccination Register nor accounted in the Report Book on the 31st January, 1901.

The following table, furnished by the Vaccination Officer, gives details of vaccination during the year 1900 :—

TABLE XXV.

Battersea Vaccination Returns, January to December, 1900.

Registration Sub-District.	Number of Births returned in the Birth List Sheets—1900.	Nos. of those births duly entered by the 31st January, 1901, in Cols. 10, 11, and 13, of the Vaccination Register. (Birth List Sheets), viz.:—					No. of Births which on, the 31st January, 1901, remained unentered in the Vaccination Register on account.			
		Col. 10, successfully vaccinated.	Col. 11, Insusceptible of vaccination.	Had Smallpox.	Col. 13, Dead unvaccinated.	Conscientious Objection Certificates received.	Postponement by Medical Certificate.	Removed to Districts the vaccination officers of which have been apprised.	Removed to places unknown.	Number of those Births remaining on 31st January, 1901, neither duly entered in Vaccination Register (Col. 3, 4, 5, and 6 of this Return) nor accounted in the Report Book.
EAST BATTERSEA	2435	1219	4	...	252	49	126	24	176	585
WEST BATTERSEA (North and South)	2734	1159	1	...	294	42	182	28	213	815
TOTALS ...	5169	2378	5	...	546	91	308	52	389	1400

Customs and Inland Revenue Acts.

In the year 1891 this Act first came into operation, its object undoubtedly being to encourage the erection of tenement dwellings. Houses certified by the Medical Officer of Health under these Acts are subject to abatement of house duty.

By the Act of 1890 the rental qualification was £20 per annum and under, but the 1891 Act raised this to £40.

Ninety-three certificates have been granted during the year 1900, after personal inspection by the Medical Officer of Health, and the following shews the number granted annually since the Act came into force.

Customs and Inland Revenue Acts.

Year.			Certificates granted by the Medical Officer of Health.
1890	...	...	243
1891	...	...	113
1892	...	...	165
1893	...	...	201
1894	...	...	91
1895	...	...	91
1896	...	...	120
1897	...	...	27
1898	...	...	82
1899	...	...	68
1900	...	...	93

The following requirements are taken into consideration when dealing with applications:—

(1) That it be satisfactorily shewn that the house in question comes within the Sections of the Acts. (2) That a definite minimum height and superficial area for living and sleeping rooms, as defined by the London Building Act, 1894, exists. (3) That there is a sufficient and available supply of water on each floor. (4) That there is at least one water closet properly supplied with water for every twelve occupants (or less) on each floor. (5) That the drainage of the premises is in accordance with the regulations recognised by the Authority in whose jurisdiction the house is situated. (6) That accommodation for clothes-washing is provided sufficient for the number of persons inhabiting the house.

Houses Let in Lodgings.

The houses registered under the bye-laws with respect to houses let in lodgings or occupied by members of more than one family have been regularly inspected during the year. Forty-nine such premises are now upon the register, and should

at any time the inspectorial staff of the Department be so increased as to permit of the necessary time being specially devoted to this class of property, the number upon the register might possibly be increased. There is, however, considerable difficulty in selecting the class of property which should come within the scope of these bye-laws, the definition of "a house let in lodgings" being so exceedingly wide as to permit of the inclusion of by far the greater proportion of the houses in Battersea. It is found that the occupiers of the class of houses already registered are of such a destructive character that defects even when remedied are not by any means of a permanent character.

Flooding.

There has been no very serious flooding of houses during the year as the result of the heavy rainfall, although there was a little of a temporary nature on Saturday, 25th August, when for about half-an-hour the rainfall was so heavy that rain-water pipes, gullies, &c., even in the highest parts of Battersea, were quite insufficient to carry the water away during the continuance of the storm.

Public Health Legislation of the Year.

NEW BYE-LAWS, ORDERS OF LOCAL GOVERNMENT BOARD, &c.

Bye-laws. Under the provisions of the Public Health (London) Act, the local Sanitary Authority has certain powers to make bye-laws. Certain of these the Authority is compelled to frame and enforce, whereas others may be made at the discretion of the Sanitary Authority, and one of the latter is for "regulating the decency of persons using the public lavatories and sanitary conveniences provided and maintained by the Sanitary Authority." Such bye-laws have been framed during the year under report and the Council have received the approval of the Local Government Board relative thereto.

Drainage Bye-laws. The London County Council has again had under consideration the draft bye-laws for regulating the construction of drains, &c. throughout the whole metropolis, and are applying to the Local Government Board for their approval.

Carbolic Acid—Poisons Order. By an Order dated 26th July, 1900, and issued by the Lords of the Privy Council, it is henceforth required that liquid preparations of Carbolic Acid and its homologues containing more than three per cent. of those substances, except any preparation prepared for use as sheep-wash, or for any other purpose in connection with agriculture or horticulture and contained in a closed vessel, distinctly labelled with the word "Poisonous," the name and address of the seller and a notice of the agricultural or horticultural purpose for which the preparation has been prepared, shall be deemed poisons within the meaning of the Pharmacy Act, 1868, and shall be deemed poisons in the second part of Schedule A. of the said Pharmacy Act, 1868.

L.C.C. re Proposed Amendment of Bye-laws re Offensive Matter. During the year the L.C.C. have had under consideration the amendment of their bye-laws relative to the removal of offensive matter and have invited suggestions, and upon the recommendation of the Health Committee, the London County Council was informed that this Authority were of opinion that the most suitable times for the removal of offensive matter by road, are between 4 a.m. and 10 a.m. from March to October, and between 6 a.m. and 11 a.m. from November to February, and that they were opposed to the removal of any such matter during the evening, and that the bye-laws should apply to the removal of horsedung-manure mixed with either straw or moss litter.

Medical Examination of Officers and Employés.

Two hundred and forty-one medical examinations have been carried out during the year. The persons examined

included four candidates for appointments, two hundred and nineteen applicants for admission into the Sick and Accident Society, of whom it was necessary to recommend the non-acceptance of three; seventeen members of the Society who were receiving sick or accident allowance and of whose unfitness for work the Society desired to have further medical evidence; and one person claiming damages for alleged injuries received whilst following his employment.

Appendix.

The Appendix contains a summary of the Sanitary Operations of the Year and also a return shewing the number of cases of each of the notifiable infectious diseases occurring in each street, &c., in Battersea during the year 1900.

W. H. KEMPSTER, M.D.,
Medical Officer of Health,

APPENDIX.

Summary of Sanitary Operations of the Year.

Total Sanitary Operations	76,098
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Inspections.

House-to-house, &c.	37,590
Bake-houses	540
Urinals	468
Complaints	2,855
Gipsy vans	...	...	...	101

Notices Served.

Intimations, &c.	...	...	...	3,330
Notices under Sec. 4	...	...	...	1,040
" " " 62 and 65	...	...	...	1,257

Drainage Work.

Drains Tested by Smoke	...	...	...	1,250
" " Water	...	...	...	7,408
Drains Laid to New Houses	...	...	...	524
Drains Relaid to Old Houses	...	...	...	867
Drains Cleansed or Repaired	...	...	...	759
Soil-Pipes and Drains Ventilated...	...	...	...	1,013
Sink and Rainwater Pipes Disconnected or Repaired	...	...	...	333
Water Closets Cleansed, Repaired or Reconstructed	...	...	...	285
Yards Drained and Paved	...	...	...	470
Mews and Stables Drained and Paved	...	...	...	30
Cesspools abolished	...	...	...	1

Water Supply.

Houses Supplied with Water or Fittings Repaired	...	...	...	166
Water Closets Supplied with Water or Supply Disconnected from Drinking Water Cistern...	...	...	...	714
Cisterns Covered, Cleansed or Repaired	...	...	...	498
Certificates of Water Supply granted in respect of New Houses	...	...	...	521

Summary of Sanitary Operations of the Year. 101

Food.

Samples taken under the Sale of Food and Drugs Acts	500
Seizures effected in respect of Unsound Food :—	
Meat	2
Fruit	4
Food Condemned and Certificates granted :—	
Fish	8
Meat	1
Fruit	14

Other Sanitary Defects Remedied or Work Carried out.

Urinals Altered, Repaired or Water laid on	69
Structural Improvements effected in Bakehouses or cleansing, &c., carried out	32
Overcrowding Abated	78
Premises Cleaned or Repaired	1,111
Accumulations of Manure, &c., Removed or Proper Receptacles Provided	90
Dust Receptacles Provided	881
Leaky House Roofs and Gutters Repaired	326
Keeping of Animals in Unfit State Discontinued	19
Sanitary Conveniences Provided and other Improve- ments effected in Factories and Workshops	78
Occupation of Underground Rooms illegally used for sleeping purposes, Discontinued	8
Smoke Nuisances Reported and attended to	546

Disinfection.

Premises Disinfected by Fumigation	1,404
Cases after which Steam Disinfection was carried out	492
Houses Supplied with Disinfectants	5,621

102 **Summary of Sanitary Operations of the Year.**

House Drains Flushed with Disinfectants after Infectious Disease	...	...	...	...	764
Infected Bedding and Goods Destroyed and Replaced	...				2
Infected Library Books Disinfected, or Destroyed and Replaced	...	...	...	...	94
Public Conveyances Disinfected	...	...	...	...	—
Certificates of Disinfection Granted	...	...	...	...	1,192

Summary Proceedings.

Proceedings Ordered to be taken if necessary	...	2,196
Summonses Issued	...	337
Magisterial Orders obtained	...	312

NOTE.—This Table does not include a large number of Sanitary Improvements voluntarily effected by owners, &c., for instance in the case of Bakehouses, cleansing, &c., is shewn to have been carried out in thirty-two instances, whereas that number represents those cases only in which it was necessary to serve notices, the whole of the Bakehouses in the Parish having been cleansed at least twice during the year, representing more than 200 operations. Similar remarks apply to many other items.

TABLE XXVI.

Return shewing the number of cases of each of the notifiable infectious diseases occurring in each street in Battersea during the year 1900.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Abercrombie Street...	...	5	1	...	...	...	...	...	...	1	7
Abysinnia Road
Acanthus Road	1	...	...	...	...	...	...	...	1
Acre Street	...	1	1	...	1	...	...	...	...	1	4
Ægis Grove	1	...	...	...	...	...	1
Afghan Road	1	...	...	...	...	...	...	...	1
Albert Road	...	2	...	...	...	...	...	1	...	...	3
Alexandra Avenue
Alfred Place
Alfred Street	1	1
Aliwal Road	...	2	2	...	1	...	...	...	...	1	6
Almeric Road	1	...	...	...	...	...	1
Altenburg Gardens...	...	1	...	...	...	...	...	...	...	1	2
Althorpe Road	1	...	1	...	...	...	...	1	3
Althorp Grove
Amies Street	...	1	...	...	...	...	...	...	...	...	1
Carried forward	...	12	7	...	5	...	...	1	...	6	31

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	12	7	...	5	...	...	1	...	6	31
Amner Road
Andoe Road
Anerley Street
Anhalt Road	...	2	1	...	...	...	...	...	...	...	3
Arden Street	3	...	...	...	...	...	...	...	3
Arliss Road	...	1	...	...	...	...	...	...	...	...	1
Arthur Street	...	1	2	...	...	...	...	...	...	3	6
Ascalon Street	...	1	2	...	1	...	...	...	...	...	4
Ashbury Road	...	3	1	...	...	...	...	...	...	1	5
Ashness Road
Ashton's Buildings	...	1	...	...	...	...	...	...	...	1	2
Ashurst Street
Atherton Street	...	2	2	...	...	...	...	...	...	...	4
Auckland Road	1	...	...	...	...	...	...	...	1
Austin Road	...	3	1	...	4	...	...	...	...	...	8
Balfern Street	...	1	4	...	2	...	...	...	...	1	8
Balham Park Road...	...	1	1	...	...	...	...	...	...	...	2
Ballingdon Road
Banbury Street	1	1
Barmore Street
Carried forward	...	28	25	...	12	...	...	1	...	13	79

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	28	25	...	12	...	...	1	...	13	79
Basnett Road	...	2	1	...	...	...	...	...	...	1	4
Battersea Park Road	...	16	12	...	4	...	...	...	...	5	37
Battersea Rise	...	5	...	...	...	...	...	...	...	...	5
Beauchamp Road	...	1	...	...	...	...	...	...	...	...	1
Beaufoy Road	...	1	2	...	1	...	...	...	...	...	4
Beechmore Road
Belfour Street	1	1
Belleville Road
Bellevue Road
Benfield Street	...	1	...	...	3	...	...	...	...	1	5
Benham Street
Bennerley Road	...	1	...	...	...	...	...	...	...	...	1
Berber Road
Berkeley Street
Bewick Street
Birley Street
Blenkarné Road
Blondel Street	1	...	...	...	...	...	1
Bolan Street	...	2	...	...	1	...	...	...	...	...	3
Bolingbroke Grove	...	3	1	...	...	...	...	...	...	...	4
Carried forward	...	60	41	...	22	...	...	1	...	21	145

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	60	41	...	22	...	...	1	...	21	145
Bolingbroke Road
Boundaries Road
Bourne's Place
Boutflower Road	1	...	...	...	...	...	1
Bramfield Road	2	...	1	...	...	...	...	...	3
Bramwell Street
Brassey Square	3	...	...	...	...	1	4
Brewery Cottages
Bridge Road	...	7	1	...	1	...	...	...	...	4	13
Bridge Road West	...	2	1	...	1	...	...	...	...	...	4
Brighton Terrace
Britannia Place	1	...	...	...	...	...	...	...	1
Broadlands Terrace	...	1	...	...	...	...	...	...	...	...	1
Brodrick Road	...	1	1	...	...	...	...	...	...	...	2
Broomwood Road	...	7	2	...	...	...	...	...	...	...	9
Brougham Street	2	...	...	...	...	...	2
Broughton Street	...	1	2	...	...	...	...	...	...	2	5
Broxash Road
Brussels Road
Brynmaer Road	...	5	...	...	...	...	...	...	...	...	5
Carried forward	...	84	51	...	31	...	...	1	...	28	195

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward		84	51	...	31	...	...	1	...	28	195
Bullen Street	...	2	2	...	...	...	...	...	...	1	5
Burland Road	...	1	...	...	...	...	...	...	...	...	1
Cabul Road	...	5	...	...	...	...	...	...	...	1	6
Cairns Road	1	1
Cambridge Road
Candahar Road	...	2	...	...	...	...	...	...	...	2	4
Canterbury Place	...	1	...	...	...	...	...	...	...	...	1
Carlton Grove
Carpenter Street	...	4	2	...	3	...	...	...	...	1	10
Castle Street	...	5	...	...	1	...	...	...	...	...	6
Ceylon Street	1	...	...	...	...	...	1
Chalmers Street	...	1	1	...	1	...	...	...	...	...	3
Chatham Road	...	1	7	...	...	...	...	...	...	...	8
Chatham Street	...	6	4	...	5	...	...	...	...	1	16
Chatto Road	...	3	...	...	...	...	...	...	...	1	4
Cherwell Street
Chesney Street
Chivalry Road
Church Lane
Church Road	...	1	...	...	...	...	...	...	...	2	3
Carried forward		116	67	...	42	...	...	1	...	38	264

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward		116	67	...	42	...	...	1	...	38	264
Clapham Common ... North Side	1	...	...	1	...	...	2
Clapham Common ... West Side
Colestown Street
Cologne Road	...	2	...	...	1	...	...	...	...	...	3
Comyn Road	...	1	...	...	...	...	...	...	...	1	2
Corunna Place	...	1	...	...	...	...	...	...	...	...	1
Corunna Road	...	1	1	...	...	...	...	...	...	...	2
Corunna Terrace	1	...	...	...	...	...	1
Cottage Place	...	1	...	...	...	...	...	...	...	...	1
Creek Street	...	1	...	...	...	...	...	...	...	...	1
Crescent Place
Crichton Street
Cringle Street
Culmstock Street
Culvert Road	...	2	9	...	...	...	...	...	...	2	13
Cupar Road
Currie Road
Currie Street	1	...	...	...	...	...	...	...	1
Darien Road	...	2	1	...	...	...	...	...	...	...	3
Darley Road	...	1	3	...	1	...	...	...	...	2	7
Carried forward		128	82	...	46	...	...	2	...	43	301

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward		128	82	...	46	...	...	2	...	43	301
Dashwood Road	2	...	2	...	...	..	...	...	4
Dents Road
Dermot Road
Devereux Road	1	...	...	...	...	...	...	...	1
Dickens Street
Doddington Grove	...	2	...	...	...	...	...	...	...	...	2
Dorothy Road	...	2	1	...	...	...	...	...	...	1	4
Duffield Street	1	...	...	1
Dulka Road	2	...	...	...	...	...	...	...	2
Eccles Road	1	..	...	...	...	...	...	2	3
Eckstein Road	1	...	...	...	...	...	...	2	3
Edna Street
Eland Road	...	2	1	...	...	...	...	...	...	...	3
Elcho Street	...	3	...	...	3	...	...	...	...	...	6
Elsley Road	...	10	1	...	2	...	...	...	...	2	15
Elsbeth Road	...	1	1	...	...	...	...	...	...	2	4
Emanuel School	3	...	...	...	...	...	...	...	3
Emu Road	...	1	...	...	...	...	...	...	...	...	1
Estcourt Road	1	...	...	...	...	...	...	...	1
Este Road	...	1	...	...	...	...	...	...	...	1	2
Carried forward		150	97	...	53	...	...	3	...	53	356

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	150	97	...	53	...	...	3	...	53	356
Ethelburga Street
Etruria Street	3	...	...	...	...	...	...	...	3
Everett Street
Eversleigh Road	...	3	3	...	1	...	...	...	...	...	7
Falcon Grove	...	1	...	...	...	...	...	...	...	1	2
Falcon Road	...	2	1	...	...	...	...	...	...	3	6
Falcon Terrace	...	1	...	...	...	...	...	...	...	...	1
Field's Place	1	1
Fontarabia Road	...	1	..	...	1	...	...	...	...	1	3
Foote's Row	1	...	...	...	...	...	...	...	1
Ford's Place	1	...	...	...	...	...	1
Forfar Road
Forthbridge Road	...	5	...	...	...	...	...	...	...	...	5
Foxmore Street	1	...	...	...	...	...	...	...	1
Francis Street	1	...	1	...	...	...	...	1	3
Freeland Street	1	...	...	...	...	...	1
Freke Road	...	4	...	...	...	...	...	...	...	...	4
Frere Street	1	...	...	...	...	...	1
Froude Street
Gambetta Street	...	1	1	...	...	...	...	...	...	...	2
Carried forward	...	168	108	...	59	...	...	3	...	60	398

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	168	108	...	59	...	...	3	...	60	393
Garden Place
Garfield Road	...	1	1	...	...	...	...	...	...	...	2
Gayville Road	...	1	1	...	1	...	...	...	...	...	3
Gideon Road
Gladstone Street	...	5	1	...	1	...	...	...	...	2	9
Gladstone Terrace	...	3	1	...	1	...	...	...	...	...	5
Glycena Road
Gonsalva Road	...	4	1	...	...	...	...	...	...	...	5
Gorst Road
Goslings Yard
Goulden Street	...	1	...	...	2	...	...	...	...	2	5
Gowrie Road
Granard Road
Grandison Road	2	...	1	...	...	...	...	...	3
Granfield Street	2	2
Grant Road	...	3	1	...	1	...	...	...	...	1	6
Grayshott Road	...	3	...	...	...	...	...	...	...	1	4
Green Lane	...	1	...	...	3	...	...	...	...	...	...
Gwynne Road	...	4	...	...	1	...	...	...	...	2	7
Hafer Road
Carried forward	...	194	116	...	70	...	...	3	...	70	453

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	194	116	...	70	...	...	3	...	70	453
Haines Street	...	2	2	...	...	...	...	...	...	...	4
Hanbury Road	...	1	...	...	...	...	...	...	...	...	1
Harbut Road	...	4	...	...	...	...	...	...	...	1	5
Harley Street	...	1	...	...	...	...	...	...	...	...	1
Harroway Road
Hart Street
Hauberk Road
Havelock Terrace	1	...	...	...	...	...	1
Heaver Road	...	1	...	...	1	...	...	...	...	...	2
Henley Street	...	3	...	...	...	...	...	...	...	1	4
Henning Street
Henry Street	...	2	2	...	...	...	...	...	...	...	4
Hermitage Gardens
Heslop Road
Hibbert Street	1	...	...	...	...	...	...	...	1
High Street	1	1
Hillier Road	2	...	...	...	...	...	...	...	2
Holden Street	...	1	...	...	...	...	...	...	...	...	1
Holman Road
Home Road	...	2	1	3
Carried forward	...	211	123	...	72	4	...	73	483

Notifiable Infectious Sickness.

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Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	211	123	...	72	...	...	4	...	73	483
Honeywell Road	...	4	5	...	...	...	...	...	...	...	9
Hope Street
Howie Street	1	...	1	...	...	...	...	...	2
Hyde Lane	1	...	4	...	...	...	...	...	5
Ilminster Gardens	1	...	...	...	...	...	...	...	1
Infirmary (W. & C. Union)	5	5
Ingelow Road	...	6	3	...	1	...	...	...	...	...	10
Ingrave Street	...	1	1	...	2	...	...	...	...	6	10
Inworth Street	...	5	...	...	...	...	...	...	...	...	5
John Street (New Road)
John Street (York Road)	...	1	...	...	...	...	...	...	...	...	1
Juer Street	...	1	2	...	1	...	...	...	...	...	4
Jedburgh Street	...	1	1	...	...	...	...	...	...	...	2
Kamballa Road	...	1	...	...	1	...	...	...	...	...	2
Kassala Road
Kathleen Road	3	...	...	...	...	...	...	1	4
Keildon Road	2	...	...	...	...	...	...	...	2
Kelmscott Road	...	6	2	...	...	...	...	...	...	...	8
Kennard Street	...	4	...	...	...	...	...	...	...	...	4
Kerrison Road	...	2	1	...	2	...	...	...	...	...	5
Carried forward	...	243	146	...	84	...	...	4	...	85	562

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	243	146	...	84	...	...	4	...	85	562
Kersley Mews
Kersley Street	...	4	...	...	...	...	...	...	...	1	5
Khyber Road	...	1	...	...	...	...	...	...	...	...	1
Kilton Street	...	1	1	...	...	...	...	...	...	...	2
Kingsley Street	...	3	3	...	1	...	...	...	...	...	7
Kirtling Street
Knowsley Road	...	4	2	...	...	...	...	...	...	...	6
Knox Road
Kyrle Road	...	3	1	...	...	...	...	...	...	1	5
Landseer Street	...	3	2	...	1	...	...	...	...	1	7
Latchmere Grove	...	4	...	...	1	...	...	...	...	...	5
Latchmere Road	...	3	5	...	5	...	...	...	...	1	14
Latchmere Street	...	1	...	...	...	...	...	...	...	...	1
Lavender Gardens	...	1	...	...	...	...	...	...	...	...	1
Lavender Hill	...	6	6	...	2	...	...	...	...	...	14
Lavender Road	...	3	...	...	1	...	...	...	...	2	6
Lavender Sweep	...	2	...	...	...	...	...	...	...	...	2
Lavender Terrace	1	...	...	...	...	2	3
Leathwaite Road	...	5	2	...	...	...	...	...	...	1	8
Limburg Road	...	1	2	...	...	...	...	...	...	...	3
Carried forward	...	288	170	...	96	...	...	4	...	94	652

Notifiable Infectious Sickness.

115

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	288	170	...	96	...	...	4	...	94	652
Linda Street	...	2	1	...	...	...	...	...	...	...	3
Lindore Road
Linford Street	...	3	...	...	11	...	...	...	...	...	14
Lithgow Street
Little Europa Place...	4	...	...	...	...	1	5
Livingstone Road	1	...	4	...	...	...	...	1	6
Lockington Road	...	5	...	...	...	...	...	...	...	...	5
Lombard Dwellings	...	3	...	...	...	...	...	...	...	...	3
Lombard Road	...	1	...	...	...	...	...	...	...	...	1
Longbeach Road
Longhedge Street	...	1	4	...	...	...	...	...	...	1	6
Lothair Street
Louvaine Road
Lubeck Street	...	2	...	...	...	...	...	...	...	...	2
Lurline Gardens	2	2
Macduff Road
Mallinson Road	...	4	...	...	1	...	...	...	...	...	5
Mantua Street	1	...	...	...	...	...	1
Marjorie Grove	...	2	...	...	...	...	...	...	...	1	3
Marmion Road	...	4	...	...	1	...	...	...	...	...	5
Carried forward	...	315	176	...	118	...	...	4	...	100	713

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward		315	176	...	118	...	...	4	...	100	713
Marney Road	...	7	3	...	...	...	...	...	...	...	10
Mayford Road
Maysoule Road	...	2	5	...	1	...	...	...	...	2	10
Meath Street
Mendip Road	2	...	...	...	...	...	2
Meteor Street
Meyrick Road	...	7	1	...	3	...	...	...	...	2	13
Middleton Road	...	1	...	...	...	...	...	...	...	...	1
Millgrove Street	1	1
Montefiore Street	...	5	...	...	...	...	...	...	...	...	5
Montholme Road	...	2	3	...	...	...	...	...	...	...	5
Morella Road	...	1	...	...	...	...	...	...	...	...	1
Morrison Street	...	2	1	...	2	...	...	...	...	...	5
Mossbury Road	...	1	1	...	...	...	...	...	...	...	2
Motley Street	...	4	...	...	...	...	...	...	...	1	5
Mundella Road	1	...	3	...	...	...	...	...	4
Musjid Road	...	2	...	...	2	...	...	...	...	...	4
Mysore Road	3	3
Nepaul Road	1	...	1	...	...	...	...	...	2
New Bridge Terrace	1	...	...	...	...	...	...	...	1
New Road	...	1	1	...	3	...	...	...	...	3	8
Carried forward		350	194	...	135	...	...	4	...	112	795

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	350	194	...	135	...	...	4	...	112	795
Newcomen Road
Newman Street	...	1	1	...	...	...	...	...	...	...	2
Nightingale Lane	...	2	...	...	...	...	...	...	...	...	2
Nine Elms Lane
Northcote Road	...	1	3	...	2	...	...	...	...	...	6
Nottingham Road
Oberstein Road	1	1
Octavia Street	...	1	1	...	...	...	...	...	...	...	2
Old Park Avenue	1	...	...	...	...	...	...	...	1
Orbel Street	...	1	...	...	...	...	...	...	...	...	1
Orkney Street	...	3	1	...	...	...	...	...	...	1	5
Orville Road	...	9	...	...	3	...	...	...	...	1	13
Oulton Street
Ouseley Road
Pagden Street	...	2	...	...	...	...	...	...	...	...	2
Palmerston Street	...	3	...	...	...	...	...	...	...	...	3
Park Grove	1	1
Park Road (Bridge Road)	...	3	...	...	...	...	...	...	...	...	3
Park Road (St. John's Hill)
Parkham Street	1	...	1	...	...	...	...	...	2
Carried forward	...	376	202	...	141	...	...	4	...	116	839

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	376	202	...	141	...	...	4	...	116	839
Parkside Street	...	1	1	...	1	...	...	...	...	...	3
Parma Crescent
Patience Road
Patmore Street	...	1	...	...	...	...	...	...	...	...	1
Pearson Street	...	2	...	...	...	...	...	...	...	...	2
Petworth Street	1	...	...	...	...	...	...	...	1
Peveril Street	...	5	1	...	...	...	...	...	...	...	6
Plough Road	...	3	...	...	1	...	...	...	...	2	6
Plough Terrace
Ponton Road	...	1	...	...	1	...	...	...	...	1	3
Ponton Street
Porson Street	...	1	...	...	1	...	...	...	...	...	2
Portslade Road	...	2	2	...	...	...	...	...	...	...	4
Pountney Road
Power Street	1	...	...	...	...	...	...	...	1
Poyntz Road	2	...	3	...	...	...	...	1	6
Prairie Street	...	2	...	...	...	...	...	...	...	...	2
Prested Road
Prince of Wales Rd.	...	2	...	...	...	...	...	...	...	...	2
Cyril Mansions
Carried forward	...	396	210	...	148	4	...	120	878

Notifiable Infectious Sickness.

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Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	396	210	...	148	...	...	4	...	120	878
Norfolk Mansions
Overstrand ,,	...	1	...	...	1	...	...	...	...	...	2
Primrose ,,
Clifton Gardens	1	1
Princes Terrace
Queen's Road	...	7	6	...	2	...	...	...	...	1	16
Queen's Square	...	1	...	...	...	...	...	...	...	1	2
Radstock Street	...	1	...	...	...	...	...	...	...	...	1
Ramsden Road
Randall Street	1	...	...	...	...	...	...	2	3
Raywood Street	...	1	1	...	...	...	...	...	...	...	2
Ravenslea Road
Robertson Street	...	9	3	...	1	...	...	...	...	1	14
Rollo Street	...	2	7	...	1	...	...	1	...	2	13
Rosenau Crescent	...	1	...	...	...	...	...	...	...	...	1
Rosenau Road	...	1	1	...	...	...	...	...	...	...	2
Rosemeath Road
Roundel Street
Rowena Crescent	...	4	1	...	...	...	...	...	...	...	5
Rusham Road
Carried forward	...	424	230	...	153	...	...	5	...	128	940

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	424	230	...	153	...	...	5	...	128	940
Rushill Mews
Rushill Road	...	1	1	...	...	...	...	...	...	...	2
Ruskin Street	...	1	1	...	...	...	...	...	...	1	3
Russell Street	...	2	...	...	1	...	...	...	...	1	4
Sabine Road	...	3	1	...	1	...	...	...	...	1	6
St. Andrew's Street...	1	...	...	...	...	1	2
St. Ann's Road
St. George's Street
St. James' Grove
St. James' Road
St. John's Hill	1	...	...	...	...	...	...	...	1
St. John's Hill Grove	...	1	...	...	...	...	...	...	...	...	1
St. John's Road	...	1	...	...	...	...	...	...	...	...	1
St. Peter's Place
St. Phillip Street	...	3	3	...	1	...	...	...	...	1	8
Salcott Road	...	2	4	...	...	...	...	...	...	1	7
Sangora Road	1	...	...	...	...	...	1
Sarsfeld Road	...	1	1	...	...	...	...	...	...	...	2
Savona Place	2	...	...	...	...	...	...	...	2
Savona Street	...	1	1	...	2	...	...	...	...	2	6
Carried forward	...	440	245	...	160	...	...	5	...	136	986

Notifiable Infectious Sickness.

121

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	440	245	...	160	...	...	5	...	136	986
Seldon Street
Severus Road	1	...	...	...	...	...	1
Sewell Road	1	...	...	...	...	...	...	2	3
Seymour Street
Shaftesbury Park Chambers	1	1
Sheepcote Lane	2	...	...	...	...	...	...	...	2
Shelgate Road	...	1	...	...	1	...	...	1	...	1	4
Shellwood Road
Shillington Street	...	3	2	...	1	...	...	...	...	...	6
Shirley Grove	...	1	...	...	...	...	...	...	...	...	1
Silverthorne Road	1	...	1	...	...	...	...	...	2
Simpson Street	...	1	...	...	1	...	...	...	...	1	3
Sisters Avenue	...	3	1	...	...	...	...	...	...	...	4
Sleaford Street
Somerset Street	...	1	1	...	...	...	...	...	...	...	2
Soudan Road	...	1	...	...	...	...	...	...	...	...	1
Southolm Street	...	4	...	...	1	...	...	...	...	...	5
Speke Road	3	...	5	...	...	...	...	1	9
Spencer Road
Spencer Street	...	5	2	...	1	...	...	...	...	...	8
Carried forward	...	460	258	...	172	...	...	6	...	142	1038

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward	...	460	258	...	172	...	...	6	...	142	1038
Spicer Street	...	2	...	...	...	...	...	...	...	...	2
Stainforth Road	...	5	1	...	...	...	...	...	...	...	6
Stanley Street	...	2	...	...	...	...	...	...	...	...	2
Stanmer Street	...	4	1	...	1	...	...	...	...	2	8
Starch Factory Road	2	...	...	...	...	...	...	...	2
Sterndale Road	...	3	1	...	1	...	...	...	...	...	5
Stewarts Lane West
Stewarts Road	...	6	7	...	1	...	...	...	...	...	14
Stockdale Road	4	...	...	...	...	...	...	2	6
Stockwood Street
Stonells Road
Stormont Road	...	2	...	...	...	...	...	...	...	...	2
Strath Terrace
Strathblaine Road	1	...	...	...	...	...	1
Sudbrook Road
Sugden Road	...	3	...	...	1	...	...	...	...	...	4
Surrey Lane	1	...	...	...	...	...	...	...	1
Surrey Lane South	1	...	1	...	...	...	...	...	2
Taybridge Road
Tennyson Street	...	3	2	...	1	...	...	...	...	...	6
Carried forward	...	490	278	...	179	...	...	6	...	146	1099

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward		490	278	...	179	...	...	6	...	146	1099
Thackeray Street
Theatre Street
Thessaly Square
Thibet Street
Thirsk Road	2	...	...	1	...	...	...	...	...	3
Thurleigh Road	1	...	...	1	...	...	...	...	...	2
Tidbury Street	1	...	1	...	...	...	...	...	2
Tidmore Street	2	...	...	...	...	...	...	...	...	2
Tipthorpe Road
Totteridge Road	4	...	...	...	1	...	...	...	...	5
Town Hall Road
Tritton Street	1	...	...	...	...	...	...	...	1
Tregarvon Road	2	...	...	...	...	...	...	...	...	2
Trollope Street	1	...	...	1	...	...	...	...	...	2
Trott Street	1	1	...	...	...	...	...	...	...	2
Tweed Street	2	1	...	...	...	...	...	...	...	3
Tyneham Road	5	1	...	...	...	...	...	...	1	7
Upper Tooting Park
Ursula Street	1	...	...	...	...	...	...	...	...	1
Urswicke Road	1	1
Carried forward		511	283	...	183	1	...	6	...	148	1132

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward		511	283	...	183	1	...	6	...	148	1132
Usk Road	...	1	3	...	1	...	...	...	...	2	7
Vardens Road
Verona Street	1	1
Vicarage Road
Victoria Crescent
Victoria Dwellings	...	1	2	...	...	...	...	...	...	...	3
Victoria Road	...	3	...	...	...	...	...	...	...	1	4
Wadhurst Road	...	1	...	...	4	...	...	...	...	...	5
Wakehurst Road	...	2	...	...	...	...	...	...	...	...	2
Wandsworth Common (North Side)
Warriner Gardens	...	3	...	...	...	...	...	...	...	2	5
Warriner Mews
Warsill Street	...	3	...	...	...	...	...	...	...	1	4
Watford Villas
Wayford Street	1	...	...	...	...	...	...	1	2
Wayland Road	...	1	...	...	1	...	...	...	...	...	2
Webbs Road	1	1
Wellington Road	2	2
Weston Street	2	...	...	...	...	...	...	...	2
Wexford Road
Carried forward		526	291	...	189	1	...	6	...	159	1172

Notifiable Infectious Sickness.

Street, Road, or Place.	Small Pox.	Scarlet Fever.	Diphtheria.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	All notifiable diseases.
Brought forward		526	291	...	189	1	...	6	...	159	1172
Wickersley Road	8	1	...	1	...	...	...	...	...	10
William Street	3	1	...	...	...	...	...	...	...	4
Wilson Street	1	...	...	1	...	...	...	...	...	2
Winsham Street	1	2	...	...	...	...	...	...	...	3
Winders Road
Winifred Grove
Winstanley Road	1	4	...	4	...	...	...	...	1	10
Winstead Street	2	1	...	1	...	...	...	...	...	4
Wiseton Road
Wix Lane
Woodgate Street	6	...	...	...	...	...	6
Worfield Street	1	...	...	...	...	...	...	...	1	2
Wroughton Road
Wycliffe Road	4	1	...	2	...	...	...	...	2	9
Wye Street	1	...	...	...	...	...	...	...	...	1
Yelverton Road	1	...	...	...	...	...	...	...	1
York Place
York Road	4	...	1	...	...	...	...	2	7
Totals...	...	548	306	...	205	1	...	6	...	165	1231

