

Annual report of the Medical Officer of Health of the Borough of Hammersmith for the year 1902.

Contributors

Hammersmith (London, England). Metropolitan Borough.
Collier, N. C.

Publication/Creation

[Place of publication not identified] : [publisher not identified], [1903]

Persistent URL

<https://wellcomecollection.org/works/bn9sxhnh>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution, Non-commercial license.

Non-commercial use includes private study, academic research, teaching, and other activities that are not primarily intended for, or directed towards, commercial advantage or private monetary compensation. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
OF THE BOROUGH OF HAMMERSMITH.

Annual Report
OF THE
MEDICAL OFFICER OF HEALTH
OF THE BOROUGH OF HAMMERSMITH,
For the Year 1902.



ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
OF THE BOROUGH OF HAMMERSMITH,
For the year 1902.

PUBLIC HEALTH DEPARTMENT,
TOWN HALL,
HAMMERSMITH.
January, 1903.

GENTLEMEN—I beg to present to you my Annual Report for last year. The Report will deal with the vital statistics, and with the Sanitary work carried out under the direction of your Council during the 53 weeks ending on January 3rd, of the present year.

The statistics in this report will, in consequence of the new directions issued by the Local Government Board and the 4 new prescribed forms, be on the same basis as those published in the previous year's report.

The deaths of non-Burgesses have been deducted, and the deaths of Burgesses occurring in other parts of London have been added, in accordance with the Local Government Board direction. Deaths of persons occurring in institutions receiving sick and infirm persons alone have been regarded for the purpose of correction.

BIRTHS.

During last year 3,192 births were registered in this Borough against 3,022 in the previous year. Making due allowance for the increase of the population, the number of births registered last year was 34 below the average number registered during the last 10 years. On the population estimated up to the middle of the year, *i.e.*, 114,210 inhabitants, the number of births registered was equal to an annual rate of 27·9 births per 1,000 persons living. The birth-rate in London on the estimated population of London up to the middle of the year, *i.e.*, 4,579,110 inhabitants, was equal to an annual rate of 28·5 births per 1,000 persons living.

DEATHS.

During last year 1,597 deaths were registered in this Borough, against 1,655 in the previous year. Making due allowance for the increase of the population, the number of deaths registered in this Borough last year was 136 below the average number registered during the last 10 years. Adding 435 deaths of Burgesses of this Borough, which took place in general hospitals and other public institutions in other Boroughs of London, in London County Lunatic Asylums and Metropolitan Imbecile Asylums, and deducting 160 deaths of non-Burgesses which occurred, 122 at West London Hospital, and 38 at Nazareth House, the corrected number of deaths of Burgesses registered last year was 1,872. On the before-mentioned estimated population, the corrected number of deaths of Burgesses registered last year was equal to an annual rate of 16·4 deaths per 1,000 persons living; the death rate in London on the estimated population of London up to the middle of the year was equal to an annual rate of 17·7 deaths per 1,000 persons living.

No allowance is made in this report as heretofore of deaths of non-parishioners which occurred at the Convent of the Good Shepherd, St. Joseph's School,

H.M. Prison, Wormwood Scrubs, and those which otherwise occurred in the Borough, as, in accordance with the definition in Table I., non-residents are to be restricted to "persons brought into the district on account of sickness or infirmity and dying in public institutions there."

DEATHS OF INFANTS.

The corrected number of deaths of Burgesses under one year of age registered was 441 against 503 in the previous year. The number of deaths of infants under one year of age registered last year was equal to 236 per 1,000 of the total deaths of Burgesses registered, and to 138 per 1,000 of the total registered births. The number of deaths of infants under one year of age in London last year was equal to 227 per 1,000 of the total deaths registered, and 141 per 1,000 of the total registered births. The mortality rate of infants under one year of age was, as compared with the total deaths of parishioners registered, 9 per 1,000 greater in this Borough than in London, and, as compared with the total births registered, 3 per 1,000 less in this Borough than in London.

DEATHS OF AGED PERSONS.

The corrected number of deaths of Burgesses at 60 years of age and upwards that were registered during last year was 565, against 489 in the previous year. These deaths last year were equal to 4.9 per 1,000 of the total persons living, and 302 per 1,000 of the total deaths of Burgesses registered. The deaths of persons registered at 60 years of age and upwards in London last year was equal to 4.9 per 1,000 of the total persons living and 273 per 1,000 of the total deaths in London registered. This death-rate was, therefore, in this Borough the same as in London as compared with the total inhabitants living, and 29 per 1,000 greater in this Borough than in London as compared with the total deaths.

TABLE I.

Vital Statistics of Whole Districts during 1902 and previous Years.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.				TOTAL DEATHS IN PUBLIC INSTITUTIONS IN THE DISTRICT.	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District.	NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT.	
		Num-ber.	Rate.*	Under 1 Year of Age.		At all Ages.					Num-ber.	Rate.*
				Num-ber.	Rate per 1,000 Births registered.	Num-ber.	Rate.*					
1	2	3	4	5	6	7	8	9	10	11	12	13
1892	99203	2904	29.3	469	162	1754	17.7	171	118	295	1931	19.4
1893	100539	2950	29.3	456	155	1642	16.3	193	129	321	1834	18.2
1894	101875	2902	28.5	402	139	1510	14.8	217	137	293	1666	16.4
1895	103211	2909	28.2	470	162	1611	15.6	203	142	305	1774	17.2
1896	104547	3007	28.8	489	163	1556	14.9	169	111	331	1776	17.0
1897	106016	3139	29.6	508	162	1570	14.8	200	139	291	1722	16.2
1898	107352	3026	28.2	505	167	1670	15.6	194	123	383	1930	18.0
1899	108705	3061	28.2	527	172	1801	16.6	229	152	369	2018	18.6
1900	110076	2994	27.2	470	157	1615	14.7	204	140	383	1858	16.9
1901	112619	3022	26.8	475	157	1455	14.7	241	168	398	1885	16.7
Averages for years 1892-1901	105414	2991	28.4	477	160	1638	15.6	202	136	337	1839	17.5
1902	114210	3192	27.9	402	126	1597	14.0	246	160	435	1872	16.4

* Rates in Columns 4, 8, and 13 calculated per 1000 of estimated population.

NOTE.—The deaths to be 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 to be 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 sickness or infirmity, and dying in public institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in public institutions elsewhere.

The "Public institutions" to be taken into account for the purposes of these Tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, work-houses, and lunatic asylums. A list of the Institutions in respect of the deaths in which corrections have been made should be given on the back of this Table.

Area of District in acres (exclusive of area covered by water)	2282.555	At Census 1901.
Total population at all ages	111,970	
Number of inhabited houses	15,198	
Average number of persons per house	7.4	

I.	II.	III.
Institutions within the District receiving sick and infirm persons from outside the District.	Institutions outside the District receiving sick and infirm persons from the District.	Other Institutions, the deaths in which have been distributed among the several localities in the District.
West London Hospital Nazareth House	General Hospital, Fulham Infirmary, Fulham Work- house, and other Public Institutions of a like character London County Lunatic Asy- lum Metropolitan Asylums Board, Small-pox and Fever Hos- pitals	The Convent of the Good Shepherd St. Mary's Orphanage, St. Joseph's School, Ken- sington & Chelsea District School, King Street H.M. Prison, Wormwood Scrubs, St. John's Hos- pital, for Skin Diseases, Uxbridge Road

Is the Union within the District. There is a temporary one, and a permanent one is in course of erection

TABLE II. VITAL STATISTICS OF SEPARATE LOCALITIES IN 1902 AND PREVIOUS YEARS.
Borough of Hammersmith.

NAMES OF LOCALITIES.	1 Whole Borough.				2 North Districts Wards 4, 5 & 6.				3 Centre Districts Wards 2 & 3.				4 South District Ward 1.				5 West London Hospital.				6 Nazareth House.			
	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.
	a	b	c	d	a	b	c	d	a	b	c	d	a	b	c	d	a	b	c	d	a	b	c	d
1892	99203	2904	1931	489	42544	..	..	..	40527	..	..	..	15503	..	..	..	129	..	..	..	500	..	..	..
1893	100539	2950	1834	470	43062	..	..	..	41020	..	..	..	15692	..	..	..	151	..	..	..	614	..	..	..
1894	101875	2902	1666	423	43647	1288	..	..	41578	1120	..	..	15905	494	..	..	137	0	..	..	608	0	..	..
1895	103211	2909	1774	469	44210	1308	..	..	42114	1071	..	..	16110	530	..	..	146	0	..	..	631	0	..	..
1896	104547	3007	1776	517	44802	1388	..	..	42678	1092	..	..	16325	524	..	..	137	3	..	..	605	0	..	..
1897	106016	3139	1772	523	45433	1435	..	..	43280	1204	..	..	16554	500	..	..	141	0	..	..	608	0	..	..
1898	107352	3026	1930	543	46009	1401	..	..	43829	1159	..	..	16764	465	..	..	142	1	..	..	608	0	..	..
1899	108705	3061	2018	547	46577	1455	..	..	44370	1114	..	..	16971	492	..	..	187	0	..	..	600	0	..	..
1900	110076	2994	1858	476	47184	1424	..	..	44948	1152	..	..	17192	417	..	..	193	1	..	..	559	0	..	..
1901	112619	3022	1885	503	48274	1384	836	250	45987	1178	678	168	17589	457	297	70	197	3	71	15	572	0	3	0
Averages of Years 1892 to 1901, or of 8 years in which the figures are available	105414	2991	1839	496	45174	1385	..	..	43033	1136	..	..	16460	485	..	..	156	1	..	..	590	0	..	..
1902	114210	3192	1872	441	48949	1535	820	224	46630	1154	687	135	17835	502	278	62	208	1	83	20	588	0	4	0

NOTES.—(a) The separate localities adopted for this table should be areas of which the populations are obtainable from the census returns, such as wards, parishes or groups of parishes, or registration sub-districts. Block 1 may, if desired, be used for the whole district: and blocks 2, 3, &c., for the several localities. In small districts without recognised divisions of known population this Table need not be filled up.

(b) Deaths of residents occurring in public institutions beyond the district are to be included in sub-columns c of this Table, and those of non-residents registered in public institutions in the district excluded. (See note on Table I. as to meaning of terms "resident" and "non-resident.")

(c) Deaths of residents occurring in public institutions, whether within or without the district, are to be allotted to the respective localities according to the addresses of the deceased.

(d) Care should be taken that the gross totals of the several columns in this Table respectively equal the corresponding totals for the whole districts in Tables I. and IV.: thus, the totals of sub-columns a, b, and c, should agree with the figures for the year in the columns 2, 3, and 12, respectively, of Table I.: the gross total of the sub-columns c should agree with the total of column 2 in Table IV., and the gross total of sub-columns d with the total of column 3 in Table IV.

TABLE III.
CAUSES OF, AND AGES AT, DEATH DURING YEAR 1902

CAUSES OF DEATH.	DEATHS IN OR BELONGING TO WHOLE DISTRICT, AT SUB- JOINED AGES.							DEATHS IN OR BELONG- ING TO LOCALITIES (AT ALL AGES).					Total Deaths in Public Institu- tions in the District.
	All Ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	North District.	Centre District.	South District.	West London Hospital.	Nazareth House.	
Small-pox	14	0	1	0	5	8	0	6	2	6	0	0	0
Measles	75	17	51	6	1	0	0	46	14	15	0	0	0
Scarlet Fever	7	0	6	1	0	0	0	2	3	2	0	0	0
Whooping Cough	25	14	11	0	0	0	0	11	7	7	0	0	0
Diphtheria and Membranous Croup	23	1	13	7	0	2	0	13	8	1	1	0	2
Croup	3	0	2	1	0	0	0	2	0	1	0	0	0
Fever { Typhus	0	0	0	0	0	0	0	0	0	0	0	0	0
{ Enteric	11	0	0	1	4	6	0	3	7	1	0	0	1
{ Other continued ..	0	0	0	0	0	0	0	0	0	0	0	0	0
Epidemic Influenza	32	0	1	1	3	14	13	19	10	3	0	0	0
Cholera	0	0	0	0	0	0	0	0	0	0	0	0	0
Plague	0	0	0	0	0	0	0	0	0	0	0	0	0
Diarrhoea (see Notes at back) ..	81	69	8	0	0	1	3	36	32	8	5	0	9
Enteritis (see Notes at back) ..	11	8	1	0	0	2	0	7	4	0	0	0	0
Puerperal Fever	2	0	0	0	1	1	0	1	1	0	0	0	0
Erysipelas	6	1	0	0	0	3	2	4	2	0	0	0	0
Other Septic Diseases	36	9	2	4	4	15	2	9	11	4	12	0	22
Phthisis	167	0	6	6	15	129	11	76	72	18	1	0	6
Other Tubercular Diseases ..	44	7	14	5	6	12	0	20	16	4	3	1	10
Cancer, Malignant Disease ..	100	0	1	1	1	61	36	40	40	14	6	0	15
Bronchitis	187	32	23	0	1	41	90	76	77	33	1	0	15
Pneumonia	194	52	30	6	8	64	34	81	72	26	15	0	28
Pleurisy	4	0	1	0	0	3	0	3	1	0	0	0	0
Other Diseases of Respiratory Organs	7	1	4	0	0	1	1	3	3	1	0	0	0
Alcoholism—													
Cirrhosis of Liver	33	0	0	0	0	29	4	11	14	8	0	0	1
Venereal Diseases	11	8	0	0	0	3	0	5	6	0	0	0	1
Premature Birth	58	58	0	0	0	0	0	23	25	10	0	0	0
Diseases and Accidents of Parturition	3	1	0	0	1	1	0	2	1	0	0	0	1
Heart Diseases	145	5	3	5	6	76	50	65	51	24	5	0	25
Accidents	59	19	6	0	3	20	11	26	14	10	9	0	28
Suicides	14	0	0	0	3	10	1	4	8	1	1	0	8
Manslaughter	2	0	0	0	0	2	0	1	0	0	1	0	1
Murder	1	0	0	0	0	1	0	1	0	0	0	0	0
All other Causes	517	139	21	6	12	157	182	224	186	81	23	3	73
All Causes	1872	441	205	50	74	662	440	820	687	278	83	4	246

See Notes at foot of this form.

NOTES.—(a). In this Table all deaths of "Residents" occurring in public institutions, whether within or without the district, are to be included with the other deaths in the columns for the several age groups (columns 2-8). They are also, in columns 9-15, to be included among the deaths in their respective "Localities" according to the previous addresses of the deceased as given by the Registrars. Deaths of "Non-residents" occurring in public institutions in the district are in like manner to be excluded from columns 2-8 and 9-15 of this Table.

(b) See notes on Table I. as to the meaning of "Residents" and "Non-residents," and as to the "Public Institutions" to be taken into account for the purposes of these Tables. The "Localities" should be the same as those in Tables II. and III.

- (c) All deaths occurring in public institutions situated within the district, whether of "Residents" or of "Non-residents," are, in addition to being dealt with as in note (a), to be entered in the last column of this Table. The total number in this column should equal the figures for the year in column 9, Table I.
- (d) The total deaths in the several "Localities" in columns 9-15 of this Table should equal those for the year in the same localities in Table II., sub-columns c. The total deaths at all ages in column 2 of this Table should equal the gross total of columns 9-15, and the figures for the year in column 12 of Table I.
- (e) Under the heading of "Diarrhoea" are to be included deaths certified as from diarrhoea, alone or in combination with some other cause of ill-defined nature; and also deaths certified as from

Epidemic enteritis;
 Zymotic enteritis;
 Epidemic diarrhoea. Summer diarrhoea;
 Dysentery and dysenteric diarrhoea;
 Choleraic diarrhoea, cholera, cholera nostras
 (in the absence of Asiatic cholera).

Under the heading of "Enteritis" are to be included those certified as from Gastro-enteritis, Muco-enteritis, and Gastric catarrh, unless from information obtained by inquiry from the certifying practitioner or otherwise, the Medical Officer of Health should have reason for including such deaths, especially those of infants, under the specific term "Diarrhoea."

Deaths from diarrhoea secondary to some other well-defined disease should be included under the latter.

In recording the facts under the various headings of Tables I., II., III., and IV., attention has been given to the notes on the Tables.

N. C. COLLIER.

Medical Officer of Health.

January, 1903.

DEATHS FROM THE 9 PRINCIPAL ZYMOTIC DISEASES.

The total number of deaths of Burgesses that were registered from the nine principal zymotic diseases was 236 against 339 in the previous year. The deaths of Burgesses last year from these diseases were equal to 126 per 1,000 of the total deaths of Burgesses registered, and were at the rate of 2·1 deaths per 1,000 persons living. The deaths from the 9 principal zymotic diseases in the whole of London were equal to 126 per 1,000 of the total deaths registered, and were at the rate of 2·3 deaths per 1,000 persons living. These deaths were, therefore, as compared with the total deaths of Burgesses registered the same in this Borough as in London, and as compared with the population 0·2 per 1,000 less in this Borough than in London.

TABLE IV.

The following table shows the deaths of Burgesses registered from the 9 principal zymotic diseases which occurred in the 10 years 1893 to 1902.

YEAR.	Smallpox.	Measles.	Scarlet Fever.	Diphtheria and Membranous Croup.	Whooping Cough.	Typhus Fever.	Enteric Fever.	Simple Continued Fever.	Diarrhoea and Cholera.	TOTAL.
1893	0	4	32	56	51	0	15	2	126	286
1894	0	72	10	53	55	0	15	0	67	272
1895	1	28	14	47	42	0	14	0	104	250
1896	0	58	20	52	60	1	14	1	125	331
1897	0	4	10	30	28	0	8	0	204	284
1898	0	128	21	24	36	0	12	0	199	420
1899	0	22	13	26	45	0	21	0	204	331
1900	0	87	7	28	7	0	18	0	138	285
1901	14	50	13	36	75	0	16	1	134	339
1902	14	75	7	23	25	0	11	0	81	236

CASES OF ILLNESS REPORTED AS DUE TO INFECTIOUS DISEASE.

There were 779 cases reported as due to notifiable infectious diseases in this Borough against 813 in the previous year. There were also 643 cases of chicken-pox, and 127 cases of phthisis notified, which diseases were not notifiable in the previous year; chicken-pox having been made notifiable on February 7th, and phthisis on April 7th. There were also reported 387 cases of infectious diseases that were not notifiable under the Act, against 428 in the previous year, 16 of these were chicken-pox, 293 measles, and 78 whooping cough.

SMALL-POX.

Ninety-two cases were reported as due to small-pox, against 46 cases in the previous year. The 92 cases reported last year occurred in 52 streets in 66 houses. In 2 streets there were 7 cases in each street. In 1 street there were 6 cases, in 4 streets there were 4 cases

in each street, in 3 streets there were 3 cases in each street, in 5 streets there were 2 cases in each street, in 37 streets there was 1 case in each street, in 4 houses there were 4 cases in each house, in 3 houses there were 3 cases in each house, in 7 houses there were 2 cases in each house, and 53 cases occurred singly in different houses. Up to the 3rd of January, 1903, 14 deaths were registered; this gives a mortality rate on the cases reported of 15·2 per cent. *From the information obtained it is clearly demonstrated that, allowing for the usual period of incubation in the disease, not one single inhabitant of the borough contracted the complaint from any one of the ninety-two cases that occurred, from the moment that information of the existence of a case was obtained by myself. This fact cannot be otherwise than highly gratifying to your Council and highly satisfactory to the inhabitants of the borough.* The following is the information obtained in reference to the cases. They were all specially reported upon by me to the Public Health Committee:—

No. 1.—Case of H— C—, age 21, no occupation, residing at Hanover Cottages. She was first taken ill on December 25th: A rash appeared on December 27th. The case was diagnosed by the private medical attendant on December 29th, and she was removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for some months. There had been no previous case of illness lately at the house, but it was stated that the patient was visited by her brother and by the man J— P— about a fortnight before. J— P— was removed on December 16th from R— H—, and was then in about the fourth day of the illness. It is probable, therefore, that J— P— visited this house while he was suffering from the complaint on or about December 12th. It was stated that he visited the house on December 15th with H— C—, the brother of this patient.

No. 2.—Case of E— C—, age 32, a draughtsman employed at —, Cursitor Street, Chancery Lane, and residing at Percy Road, Shepherd's Bush. He was first taken ill on December 24th. A rash appeared on December 29th: The case was diagnosed by the patient's private medical attendant on December 31st, and he was removed the

same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. There had been no previous case of illness lately at the house, and I was unable to trace as to how he had contracted the disease. He had been vaccinated in infancy, but never re-vaccinated.

No. 3.—Case of H— C—, age 28, a hawker of periodicals, residing at R— H—. On January 1st, when in attendance at R— H—, my attention was called to this man. I found that he was suffering from variola in the vesicular stage. He had been ill for several days, but had not reported himself, notwithstanding my notice which was posted in the hall, requesting that all persons ill should notify themselves to me. I had him at once removed by the Metropolitan Asylums Board to Rotherhithe. He had resided at R— H— for two months. He occupied cubicle 141. He was a friend of the patient J— P—, who was removed from R— H— on December 16th. I am informed he was constantly in the company of J— P— just previous to his removal, and he went with J— P— on December 15th to visit his sister at Hanover Cottages. J— P— was then suffering from the disease. No information as to vaccination was obtained.

No. 4.—Case of C— A— M—, age 20, a milliner employed at —, Cotton Street, Australian Avenue, and residing at Coningham Road. She was first taken ill on December 28th. A rash appeared on December 30th. The case was diagnosed on January 2nd by the patient's private medical attendant, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for some months. There had been no previous case of illness lately at the house, and I was unable to obtain any evidence as to the source of infection. She had been vaccinated when a child, but never re-vaccinated.

No. 5.—Case of H— C—, age 27, a carman employed at —, Westbourne Grove, and residing at St. Ann's Road, was first taken ill on December 30th. A rash appeared on January 2nd. The case was diagnosed as variola on January 3rd by the patient's private medical attendant and he was removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. There had been no previous case of illness lately at the house, and I was unable to obtain any evidence as to how he had contracted the disease. He had been vaccinated in infancy, but never re-vaccinated.

- No. 6.—Case of W— L—, age 35, a labourer, employed at —, Charles Street, Kensington, and residing at Southerton Road. He was first taken ill on January 1st. A rash appeared on January 3rd. The patient went to the out-patients' department of the West London Hospital on January 4th, when his illness was diagnosed as variola. He was detained there until removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at Southerton Road for some months. There had been no previous case of illness lately at the house, but a case, that of J— F—, was removed from No. —, Southerton Road, on December 22nd, and a second case from the same house on December 28th. As this patient was first taken ill on January 1st, he probably contracted the disease on or about December 20th. By reference to my notes on the case J— F—it will be seen that he was suffering from the disease on that date. As No. — is nearly opposite No. —, the infection may have been carried across the street from No. — to this patient. No information as to vaccination was obtained.
- No. 7.—Case of J— E— F—, age 48, a coachman, residing at R— H—. When vaccinating at R— H— on January 4th, my attention was called to this man. I found that he had a temperature of 102° , and an erythematous rash. I had him at once removed to your Council's Shelter, Brook Green Road. The following day the rash had become distinctly vesicular, and was indicative of variola. I therefore had him at once removed by the Metropolitan Asylums Board to Rotherhithe. He had resided at R— H— for three months. He occupied cubicle 71. He had been vaccinated when a child, and was re-vaccinated on December 14th. On January 4th, when I saw him, he had been ill for three days. He had evidently contracted small-pox five days after I vaccinated him, during the incubation period of the vaccination. I found that his symptoms were very slight, and the rash was very modified, owing to the effect of the concurrent vaccination. Had he been vaccinated a few days before, there can be no doubt he would not have contracted the disease at all.
- No. 8.—Case of J— J— P—, age 42, a frame maker, employed at —, Westbourne Grove, and residing at Netherwood Road. He was first taken ill on January 1st. A rash appeared on January 4th. The complaint was diagnosed by the private medical attendant on January 6th, and he was removed the same day by the Metropolitan Asylums

Board to Rotherhithe. He had resided at the house for some months. There had been no previous case of illness lately at the house. I am informed, however, that there had lately been several cases of small-pox among the employés where he worked. He had been vaccinated when a child, but never re-vaccinated.

No. 9.—Case of W— E— B—, aged 38, a clerk out of employment, residing at Leysfield Road. He was first taken ill on January 3rd. A rash appeared on January 5th. On January 6th the case was diagnosed as variola by the private medical attendant, and the patient was removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. There had been no previous case of illness at the house, and I was unable to obtain any information as to the source of infection.

No. 10.—Case of F— P—, age 27, a hosier's assistant, employed at —, New Oxford Street, and residing at Cromwell Grove. On January 7th I received a letter from a Dr. England, informing me that he was in attendance on the patient, and would like to have my opinion as to the nature of the disease. I at once visited and examined the patient, and diagnosed the disease as variola, and had him at once removed by the Metropolitan Asylums Board to Rotherhithe. It appears that he was first taken ill on January 2nd. A rash appeared on January 5th, but it was not until I saw him on the 7th that the complaint was diagnosed. He had resided at the house for some months. There had been no case of illness lately at the house, and it was not known how he had contracted the disease. He had been vaccinated in infancy, but not re-vaccinated.

No. 11.—Case of F— E—, age 28, a goldwire worker, out of employment, residing at Shepherd's Bush Green. He was first taken ill on January 4th. A rash appeared on January 7th. The case was diagnosed by the patient's private medical attendant, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for several months. It appears that the patient had, on December 26th, visited the small-pox ship at Darenth to see the patient J— L—, who was dying, and that he refused to be vaccinated at the hospital when so advised by the Medical Superintendent. As he was taken ill on January 4th this would, assuming that he contracted the disease from G— L—, give an incubation period of only 10 days. It is more than probable, nevertheless,

that he contracted the disease at the time of his visit to the ship. He had been vaccinated in infancy, but never re-vaccinated.

- No. 12.—Case of E— M— C—, age 19 months, daughter of a labourer, residing at Mardale Street. She was first taken ill on January 3rd, a rash appeared on January 6th, and the case was diagnosed as variola by the patient's private medical attendant on January 9th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house since birth. There had been no previous case of illness lately at the house, and it was not known as to how she had contracted the disease. She had never been vaccinated.
- No. 13.—Case of A— C—, aged 35, a postman, employed at Kensington, residing at Havelock Road. He was first taken ill on January 6th. A rash appeared on January 9th. The case was diagnosed by the patient's private medical attendant on January 10th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. There had been no previous case of illness lately at the house. It appears that he was employed in the same Post-office as the man A— B—, who was removed suffering from small-pox on December 24th. As the man A— B— was taken ill on December 21st, and his case was not diagnosed until December 24th, and as he continued at his work until the day before he was removed, it is probable that A— C— was exposed to infection, and contracted the disease from the man A— B—. He had been vaccinated in infancy, but never re-vaccinated.
- No. 14.—Case of W— H— B—, age 69, a maker of invalid chairs, and residing at Goldhawk Road. He was first taken ill on January 5th. A rash appeared on January 8th. The case was diagnosed as variola by the patient's private medical attendant on January 11th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. No information as to how he had contracted the disease was obtainable. He had been vaccinated when a child, but not since.
- No. 15.—Case of A— J—, age 26, a liftman employed by the Central London Railway and residing at Stowe Road. He was first taken ill on January 5th. A rash appeared on January 11th. The case was diagnosed by the patient's private medical attendant on January 12th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He

had resided at the house for some months. No previous case of illness had lately occurred at the house, and no information was obtained as to how he had contracted the disease. A liftman on the Central London Railway coming in contact with such an enormous number of persons would run considerable risk of contracting the disease. No information as to vaccination was obtained.

No. 16.—Case of A—J—B—, age 30, a managing clerk, employed at a poultry dealers, Smithfield Market, and residing at Percy Road, was first taken ill on January 7th. A rash appeared on January 10th. The case was diagnosed on January 13th by the patient's private medical attendant, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. No previous case of illness had lately occurred at the house, and no information was obtained as to how he had contracted the disease. He had been vaccinated in infancy, but not re-vaccinated.

No. 17.—Case of A—P—, age 18, a typewriter, employed at Messrs. —, Princes Street, and residing at Wood Lane. She was first taken ill on January 6th. A rash appeared on January 8th, and the case was diagnosed on January 13th, and notified to me on January 14th. The parents refused an offer to have the patient removed to a hospital, and as there was moderately efficient accommodation for treatment and isolation at the house, I did not deem it desirable to try and enforce removal. The patient had resided at the house for some months. There had been no previous case of illness lately at the house, and no information as to how the patient had contracted the disease was obtainable. She had been vaccinated in infancy, but not since.

No. 18.—Case of W—W—, age 25, a plumber, employed and residing at Banim Street. He was first taken ill on January 6th. A rash appeared on January 11th. The case was diagnosed as variola by the patient's private medical attendant on January 15th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had only just come to reside at the house. It appears that on December 24th he visited at — West Street, Warminster, Wiltshire, where his father had just died of small-pox. His brother Henry was also suffering from small-pox at the same address at the time of his visit. It is therefore most probable that he contracted the disease at his father's house, which he visited just 13 days before he was taken ill. He had been vaccinated when a child, but not since.

- No. 19.—Case of W— M—, age 58, a harness maker, employed at —, Brook Green Road, lately residing at R— H—. He was first taken ill on January 16th. On January 21st he applied to the Casual Ward of the Fulham Infirmary, when it was found he had a rash upon him, and it was diagnosed that he was suffering from variola. He had resided at R— H— for about eight weeks, and occupied cubicle 96 for one week, and 197 for about eight weeks. The last case of small-pox removed from R— H— was on January 5th, which would be about 11 days previous to the man W— M— being taken ill. He had been vaccinated when a child, but never re-vaccinated.
- No. 20.—Case of F— J—, age 35, a shirt and collar dresser, employed at and residing at Uxbridge Road. On January 22nd I was asked by Dr. Bellis to see this patient with him. I found that she was suffering from variola, and that the disease was in the vesicular stage. She was first taken ill on January 19th. The rash appeared on the 22nd, and she was removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for some months. There had been no previous case of illness lately at the house, and it was not known as to how she had contracted the disease. She had been vaccinated in infancy, but never re-vaccinated.
- No. 21.—Case of W— J— C—, age 33, a labourer, residing at Mardale Street. He was first taken ill on January 20th. A rash appeared on January 22nd. The disease was diagnosed by the patient's private medical attendant on January 23rd, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. On January 9th, 11 days before the patient was taken ill, a child, E— M— C—, a daughter of this patient, was removed from the same house suffering from variola. This child was taken ill on January 3rd, and the disease was not diagnosed until January 9th, so that the patient W— J— C— had every chance of being exposed to infection before the child was removed. It is therefore most probable that he contracted the disease from the child. He had been vaccinated, when a child, but not re-vaccinated.
- No. 22.—Case of W— E—, age 25, a wood chopper, employed at the Railway Arches, Sulgrave Road, Shepherd's Bush, and residing at Brackenbury Road. He was first taken ill on January 25th, when it was noticed that he had a rash

upon him. The case was diagnosed the same day by the patient's private medical attendant, and he was at once removed by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. No information as to how he had contracted the disease was obtained. He had been vaccinated when a child, but not since.

No. 23.—On January 27th I received a notification certificate of a case of small-pox at Brunswick Terrace. Upon inquiry I found that the patient C— M—, age 23, a carpenter, residing at the above address, was first taken ill on January 20th. A rash appeared on January 27th. The patient was removed the same day by the Metropolitan Asylums Board to the hospital at Darenth. He had resided at the house for many years, but he had lately, for about six weeks previous to his being taken ill, been working at the new small-pox hospital at Dartford, which is near Gore Farm Hospital. He had been lately sleeping at a temperance hotel, at Dartford. He was vaccinated when a child, but not since. I understand that many cases of small-pox have occurred among the employes at this hospital. It is greatly to be regretted that the Metropolitan Asylums Board have not deemed it to be necessary to require that all employes at this hospital who have to work in the neighbourhood of an occupied small-pox hospital should be re-vaccinated. If public bodies do not realise the importance of protecting their employes by vaccination, how can we expect private individuals and private firms to do so?

No. 24.—Case of M— G—, age 14, a packer and sorter, employed at a laundry, and residing at Leffern Road, Shepherd's Bush. She was first taken ill on January 25th. A rash appeared on January 27th. The case was diagnosed by the patient's private medical attendant on January 29th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided in the house for some months. There had been no case of illness lately at the house, nor was I able to obtain any evidence as to the source of infection. She had been vaccinated in infancy, but never re-vaccinated.

No. 25.—Case of R— R—, age 36, residing at Woodstock Road. She was first taken ill on January 29th. A rash appeared on January 31st, when the case was diagnosed as variola by the patient's private medical attendant, and she was removed the same day by the Metropolitan Asylums Board

to Rotherhithe. She had resided at the house for some months. It appears that a girl residing at the house had lately been ill with what was supposed to have been chicken-pox. This girl had recovered and gone back to work at a dye works. The patient R—R— had been vaccinated when a child, but never re-vaccinated.

No. 26.—Case of A—P—, age 30, housekeeper to her father, residing at Mardale Street. She was first taken ill on January 27th. A rash appeared on January 30th. The case was diagnosed by the patient's private medical attendant on January 31st, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for some months. No previous case of illness had lately occurred at the house, and I was unable to obtain any evidence as to how she had contracted the disease. She had been vaccinated in infancy, but never re-vaccinated.

No. 27.—Case of F—D—, age 25, a master jeweller, residing at Thomas Cottages, King Street. On February 4th a medical practitioner called upon me at my office late in the afternoon. He informed me that he was in attendance upon this patient, and that he had been ill for several days. Upon his description of the illness I came to the conclusion that most probably it was a case of variola. Owing to a previous important engagement I was not able to go and see the patient then, so I arranged with him that I should send an ambulance and remove the patient to the Council's Shelter at Brook Green Road, and that if I decided it was a case of variola I would send the patient the following morning to Rotherhithe, but if I otherwise decided I would send him back to Thomas Cottages. I accordingly sent the ambulance to the house. When I arrived at the office the same night at 10 o'clock, I was informed that the medical practitioner met the ambulance at the house, and refused to allow the patient to be removed. He stated that he had quite decided it was a case of chicken-pox, because he had, since his interview with me, ascertained that the patient F—D— had been visiting another patient of his at Carthew Road, who he had been treating for chicken-pox. The following morning I visited the patient F—D—, and decided the case was an undoubted one of variola, and I afterwards called upon the practitioner, and got him to visit the case with me, and had the patient immediately removed by the Metropolitan Asylums Board to Rotherhithe. It appears that he was first taken ill on February

1st. A rash appeared on February 3rd, and the case was not diagnosed until as aforesaid, on February 7th. A very regrettable incident in reference to the case is that previous to my visiting him the patient was visited by two relations from Fulham, both of whom contracted the disease and died. I shall have more to report in reference to the case at Carthew Road, and the harm that resulted from that case not having been diagnosed until after I discovered the case of F—D—. He had resided at the house for many months. From the history of the case at Carthew Road there can be no reasonable doubt that he contracted the disease from being in company with that patient after she had recently recovered from an attack of discrete variola. He had been vaccinated when a child, but never re-vaccinated.

No. 28.—Case of E—A—, age 22, an ironer, employed at a laundry, in Jeddo Road, and residing at Carthew Road. It appears that she was first taken ill on January 16th. A rash appeared on January 19th. The case was seen by the patient's private medical attendant, and diagnosed as chicken pox. The patient was ill about 10 days, at the end of which she returned to her work at the laundry. She was visited during her illness by the man F—D—, to whom she was engaged to be married. The case was notified to me as variola on February 10th, in consequence of a communication I sent to the attendant medical practitioner, after I had seen the girl. She had resided at the house for nine months. There had been no previous case of illness at the house, and no information was obtained as to how she had contracted the disease. By reference to Case No. 27 it will be seen that that case of small-pox occurred in consequence of this case having been treated at home undiagnosed. On hearing that this patient had returned to work at the laundry, I sent word to her requesting that she should immediately cease to do so, and I also interviewed the proprietor of the laundry. I advised him to immediately have all his employes re-vaccinated. The patient complied with my request, and consented to take a series of disinfecting baths. She had been vaccinated when a child, but not since.

No. 29.—Case of A—P—, age 21, an electrician out of work, and residing at Carthew Road. He was first taken ill on February 6th. A rash appeared on February 8th, and the disease was diagnosed as chicken-pox by the attendant medical practitioner (not the same practitioner who had wrongly

diagnosed the case of E—A—). Hearing that a person was ill at this house on February 11th, I visited him and found that he was suffering from variola. After calling upon the attendant medical practitioner I had the patient removed by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for many months. There can be no doubt that he contracted the disease from E—A—, who had been treated at home as suffering from chicken-pox. He had been vaccinated as a child, but never re-vaccinated.

No: 30.—Case of W—G—, age 34, a journalist, employed in Rosebury Avenue, and residing at Hebron Road. On February 12th, a medical practitioner called upon me at my office, and asked me to see the patient in consultation with him. I found that he was suffering from variola, and I had him immediately removed by the Metropolitan Asylums Board to Rotherhithe. It appears that he was first taken ill on February 8th. A rash appeared on February 10th. He had resided at the house for nine months. No previous case of illness had lately occurred at the house, and no information as to how he had contracted the disease could be obtained. He had been vaccinated when a child, but not since.

No: 31.—Case of S—S—, age 28, married, of no occupation, residing at Tabor Road. On February 10th I received a notification certificate that this patient was suffering from chicken-pox. I visited the patient, and found she was suffering from variola. It appears that she was first taken ill on February 7th. A rash appeared on February 8th. The case was diagnosed by myself as variola on February 13th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for some months. No information as to how she had contracted the disease could be obtained. She had been vaccinated when a child, but never re-vaccinated.

No: 32.—Case of J—J—, age 25, a joint maker, employed by — in laying pipes for the small-pox hospital at Dartford, and residing at Carthew Road. He was first taken ill on February 10th. A rash appeared on February 12th. The case was diagnosed as small-pox by the patient's private medical attendant on February 14th, and he was removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at Carthew Road for nine months, but he had lately been residing in lodgings at Dartford, returning home for the week-end.

No evidence as to the cause of infection except that he had been working in the neighbourhood of Dartford could be obtained. He had been vaccinated in infancy, but never re-vaccinated.

- [No. 33.—Case of S— C—, age 44, a charwoman, lately employed at Netherwood Road, and residing at Latimer Road. She was first taken ill on February 14th. A rash appeared on February 16th. The case was diagnosed by the patient's private medical attendant on February 17th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for many months. There had been no previous case of illness at the premises. At the house in Netherwood Road, where she had been working on February 1st, 10th, and 13th, there was a patient ill with what was then supposed to be chicken-pox, but which subsequently proved to be variola, and was no doubt the cause of the patient S— C— contracting the disease. She had been vaccinated when a child, but never re-vaccinated.

- No. 34.—Case of P— F—, age 19, of no occupation, residing at Yeldham Road. He was first taken ill on February 14th. A rash appeared on February 16th. The case was diagnosed on February 17th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. There had been no previous case of illness lately at the house. No information as to the source of infection was obtainable. He had been walking about London trying to obtain some work for the last five or six weeks. He had never been vaccinated.

- No. 35.—Case of M— A— C—, age 59, a private lady, residing at Netherwood Road. In consequence of information received in reference to the case of small-pox at Latimer Road, I visited Netherwood Road and saw Mrs. M. A. C— on February 18th. I was informed that she was first taken ill on January 21st. A rash appeared on January 23rd. The disease was diagnosed by the attendant medical practitioner as chicken-pox, and had up to the time of my visit never been notified. I found that the patient had extensive stains upon her skin, indicative of her having recently recovered from a somewhat severe attack of discrete variola. As I had practically no doubt that Mrs. S— C—, of Latimer Road, had contracted the disease through charring at Netherwood Road I wrote to the attendant medical practitioner, and requested him to notify the case to me. He did so on

February 19th. She had resided at the house for many years. I was informed that the son of the patient had been ill previous to his mother, and that it was supposed he had suffered from chicken-pox. I was unable to obtain any further evidence to justify me in forming an opinion as to the nature of his illness, nor could I obtain any other evidence to justify me in forming an opinion how Mrs. M—A—C— had contracted the complaint. It will be seen later in this report that two cases of small-pox occurred at Hunt Street, and that the evidence obtained was in favour of their having contracted the disease through this case. The patient Mrs. M—A—C— had been vaccinated in infancy, but never re-vaccinated.

No. 36.—Case of J—B—, age 44, a road sweeper employed by your Council, and residing at Southbrook Street. He was first taken ill on February 14th. A rash appeared on February 18th. The case was diagnosed by one of the district Medical Officers on February 19th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. There had been no other case of illness lately at the house, and I was unable to obtain any evidence as to the source of infection. He had been vaccinated in infancy, but never re-vaccinated.

No. 37.—Case of M—C—, age 16, a laundrymaid, employed at a laundry, and residing at Elric Street. She was first taken ill on February 21st. A rash appeared on February 24th. The case was notified by the patient's private medical attendant on February 25th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for some months. There had been no previous case of illness lately at the house, and I was unable to obtain any evidence as to the source of infection. She had been vaccinated when a child, but never re-vaccinated.

No. 38.—Case of F—E—, age 19, a laundrymaid, employed at a laundry at Stanley Gardens, Acton, and residing at Milson Road. She was first taken ill on February 23rd. A rash appeared on February 26th. The case was diagnosed by the patient's private medical attendant on the same day, and at once removed by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for many months. There had been no previous case of illness lately at the house, and I was unable to obtain any evidence as to the source of infection. She had been vaccinated when a child, but never re-vaccinated.

No. 39.—Case of C—L—, age 45, a charwoman, employed at various places, and residing at Hunt Street, Latimer Road. She was first taken ill on February 24th. A rash appeared on February 26th. The case was diagnosed by the District Medical Officer on February 27th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for many months. There had been no other case of illness lately at the house, but one of Mr. C—L—'s daughters had been employed for some weeks at Netherwood Road, where the case of Mrs. M—A—C—had been treated at home, supposed, until I discovered the case, to be suffering from chicken-pox. There can be, practically speaking, no doubt that C—L—contracted the disease through her daughter, who worked at Netherwood Road. She had been vaccinated when a child, but never re-vaccinated.

No. 40.—Case of E—J—, age 60, employed in house duties at home, and residing at Carthew Road. She was first taken ill on February 22nd. A rash appeared on February 27th. The case was diagnosed by the patient's private medical attendant on February 28th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for many months. The son of this patient, J—J—, was removed from the same house on February 14th. He had been ill from February 10th. There can therefore be, practically speaking, no doubt that she contracted the disease from her son previous to his removal. She had been vaccinated in infancy, but never re-vaccinated.

No. 41.—Case of A—L—, age 12, of no occupation, residing at Hunt Street, Latimer Road. She was first taken ill on February 24th. A rash appeared on February 27th. The case was notified to me as chicken-pox the same night. On the following day I visited and examined the patient, and found she was suffering from variola, and I had her removed at once by the Metropolitan Asylums Board to Rotherhithe. By reference to Case 39 it will be seen that the mother of the patient was removed from the house on February 27th, and that another daughter of that patient was employed at Netherwood Road, where the case of Mrs. M—A—C— was treated at home. She had been vaccinated when a child, but never re-vaccinated.

No. 42.—Case of C—F—, age 19, a ticket sorter, employed at the Edgware Road Station, Metropolitan Railway, and residing at Hetley Road. He was first taken ill on February

24th. A rash appeared on February 26th. The case was diagnosed as variola on February 28th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for many months. No case of illness had lately occurred at the house, and I was unable to obtain any evidence as to how he had contracted the disease. The patient had never been vaccinated.

No. 43.—Case of H— E—, age 32, residing at Mardale Street, a coachman, employed at Ladbroke Grove. He was first taken ill on February 27th. A rash appeared on March 3rd. The case was diagnosed the same day by the patient's private medical attendant, and removed at once by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. There had been no case of illness lately at the house, and I was unable to obtain any evidence as to how he had contracted the disease. He had been vaccinated in infancy, but never re-vaccinated.

No. 44.—Case of F— F—, age 21, a labourer, employed at St. Pancras and various other places, and residing at Queen's Road. He was first taken ill on February 27th. A rash appeared on March 1st. The case was diagnosed on March 5th by the patient's private medical attendant, and he was removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. There had been no case of illness lately at the house, but he had been employed by his father for the last two weeks to assist him in stripping walls, &c., after disinfection by the Local Authority of St. Pancras, his father being employed by St. Pancras Council's contractor. No information as to vaccination was obtained.

No. 45.—Case of A— B—, age 32, engaged in household duties and residing in Mersey Street. She was first taken ill on March 7th. The rash appeared on March 9th. The case was diagnosed by the patient's private medical attendant on March 11th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for many months. There had been no previous case of illness lately at the house, but Mr. B—, who was not residing with his wife, was said to have called at the house with money on March 1st, and he was subsequently removed to hospital suffering from small-pox. Mrs. B—, however, stated that her husband had not slept at the house lately. I was unable to obtain the address where

the man B— resided. He was moved through the Public Health Department of Kensington. No information as to vaccination was obtained.

No. 46.—Case of A— H—, age 42, no occupation, a prisoner residing at H.M. Prison, Wormwood Scrubs. She was first taken ill on March 10th. A rash appeared on March 11th, and the case was diagnosed as variola, and was at once removed by the Metropolitan Asylums Board to Rotherhithe. No history as to the source of infection could be obtained. She was convicted at the North London Police Court on March 22nd, and sentenced to 14 days' imprisonment with hard labour. She evidently contracted the disease before her conviction. No evidence as to vaccination was obtained.

No. 47.—Case of F— C—, age 63, a labourer, employed in Wood Lane, Latimer Road, and St. Helen's Road, and residing at Mersey Street. He was first taken ill on March 8th. A rash appeared on March 12th. The case was diagnosed by the patient's private medical attendant on the same day, and removed immediately by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for many months. Another case of small-pox, that of A— B—, was removed from the same house on March 10th. By reference to my report on case No. 45, it will be seen that there were reasons for supposing that Mr. B— may have conveyed infection to the house, although he is said not to have resided there. The patient was vaccinated in infancy, but never re-vaccinated.

No. 48.—Case of A— E— A—, age 18, a laundrymaid, employed at Stoneleigh Street, and residing at Latimer Road. It was first known that she was ill on March 10th. A rash appeared on the same day. The case was diagnosed as variola late at night on March 12th by the patient's private medical attendant, and removed at one a.m. on March 13th by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for some months. The mother of the patient had been ill and died on March 2nd, the cause of death being certified as "Influenza Exhaustion." It appears that she had some rash upon her before she died. The subsequent history of the cases that occurred at this house and the fact, as will be shown, that one of the undertakers who assisted at this woman's funeral, was, within the period

of incubation, attacked with variola, point strongly to the conclusion that she died from that complaint. She had been vaccinated when a child, but never re-vaccinated.

No. 49.—Case of J— F— N—, age 42, a cycle maker, employed and residing at Goldhawk Road. He was first taken ill on March 7th. A rash appeared on March 10th. The case was diagnosed as variola by the patient's private medical attendant on March 13th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some years. There had been no previous case of illness lately at the house, and I was unable to obtain any evidence as to how he had contracted the disease. He had been vaccinated in infancy, but never re-vaccinated.

No. 50.—Case of L— C— K—, age 28, married, no occupation, residing at Latimer Road. She was first taken ill on March 10th. A rash appeared on March 12th. The case was diagnosed by the patient's private medical attendant on March 13th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for some months. Case No. 48 A— E— A— was removed from this house on March 13th. There can be no reasonable doubt that the patient contracted the disease also from Mrs. A—, who died from supposed "Influenza" on March 2nd. She had been vaccinated in infancy, but never re-vaccinated.

No. 51.—Case of H— A—, age 19, a labourer, employed at a newspaper office, and residing in Latimer Road. He was first taken ill on March 11th. A rash appeared on March 13th. The patient was removed to your Council's Shelter on March 13th. The case was diagnosed as variola by myself on March 14th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. This patient is the son of Mrs. A—, who died from supposed "Influenza" on March 2nd. There can be little doubt that she died from variola, and that he contracted the disease from her. The patient H— A— had never been vaccinated.

No. 52.—Case of W— T—, age 31, a printer's reader, employed in Wellington Street, Strand, and residing at Hebron Road. He was first taken ill on March 8th. A rash appeared on March 12th. The case was diagnosed as chicken-pox on March 15th by the patient's private medical attendant, and was notified to me as such on the same day. I at

once visited the patient, and finding that he was suffering from variola, I had him at once removed by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some years. There had been no previous case of illness lately at the house, and I was unable to obtain any evidence as to the source of infection. He had been vaccinated in infancy, but never re-vaccinated.

No. 53.—Case of T— D—, age 4, son of a labourer, residing at Latimer Road. It was first known that he was ill on March 15th, when it was found that he had a rash upon him. The case was diagnosed as variola by the patient's private medical attendant on the same day, and removed forthwith by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for three weeks. There can be little doubt that he contracted the disease from Mrs. A—, who died on March 2nd.

No. 54.—Case of R— H— B—, age 38, an undertaker, employed and residing in Norland Road. He was first taken ill on March 13th. A rash appeared on March 15th. The case was diagnosed by the patient's private medical attendant as chicken-pox, and notified to me as such on the same day. I at once visited the patient, and found that he was suffering from variola, and I had him at once removed by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for many months. No case of illness had lately occurred at the house. The patient had assisted at the funeral of Mrs. A—, at Latimer Road, and visited her after her death on March 2nd. It is therefore more than probable that he contracted the disease on that day. He had been vaccinated when a child, but never re-vaccinated.

No. 55.—Case of E— O—, age 22, a carpenter, lately employed at the new small-pox hospital, Darenth, and residing at Adelaide Road. He was first taken ill on March 17th. A rash appeared on March 19th, and the case was diagnosed by the patient's private medical attendant on the same day, and removed forthwith to Rotherhithe. He had resided at the house for some years, but for three or four weeks lately he had been sleeping during the week except on Saturday nights, at Dartford. No information could be obtained that there had been any illness lately at his lodgings at Dartford or at Adelaide Road, but it is an interesting fact that many cases of small-pox have occurred amongst the workmen employed on the new small-pox

hospital at Darent. The distance from Gore Farm Hospital and the hospital ships is so considerable that it is difficult to assume that these cases have been air borne from these sources. A more likely cause is the fact that the ambulances containing transfer small-pox patients have to pass in near proximity to the new small-pox hospital where these men were employed. He had been vaccinated in infancy, but never re-vaccinated.

No. 56.—Case of R—C—, age 10, a scholar, residing at the Grove. He was first taken ill on March 23rd. A rash appeared on March 24th. The case was diagnosed as variola by the patient's private medical attendant on March 29th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some years. There had been no previous case of illness lately at the house, and I was unable to obtain any evidence as to the source of infection. The patient had never been vaccinated. It is interesting to note that there was a five days' interval between the appearance of the rash and the case being diagnosed. It is in accordance with my experience that under such circumstances the disease is very likely to be caught by other persons in the same house, whereas when cases are removed within the first day or two of the appearance of the rash, almost invariably no second case occurs. In this instance two other cases, it will be seen, were removed from the house on April 8th.

No. 57.—Case of T—H—, age 44, a labourer, employed by a builder at Marylebone. He was first taken ill on March 26th. A rash appeared on March 29th. The case was diagnosed by the patient's private medical attendant on March 29th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. No previous case of illness had lately occurred at the house, and I was unable to obtain any evidence as to the source of infection. The patient had been vaccinated in infancy, but never re-vaccinated.

No. 58.—Case of S—E—, age 41, a married woman, no occupation, residing in the Grove. She was first taken ill on April 8th, when it was noticed by the Public Vaccinator who called to examine her arm, which he had vaccinated, that she had a rash. The case was diagnosed by him as variola on the same day, and she was at once removed by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for some years. The son of this

patient (Case No. 56) was attacked with small-pox on March 23rd, and removed from the house on March 29th. There can be no doubt that S— C— contracted the disease from her son. Had he been removed earlier, in all probability she would not have contracted the disease. She had been vaccinated when a child, but never re-vaccinated.

No. 59.—Case of B— C—, age 12, a scholar, residing in The Grove. She was first taken ill on April 8th, when it was noticed by the Public Vaccinator who called to examine her arm, which he had vaccinated, that she had a rash. The case was diagnosed by him as variola on the same day, and at once removed by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for some years. The brother of this patient (Case No. 56) was attacked with small-pox on March 23rd, and removed from the house on March 29th. There can be no doubt that she contracted the disease from her brother. She had been vaccinated when an infant, but never re-vaccinated.

No. 60.—Case of H— H—, age 11, a scholar residing in Wharf Road. She was first taken ill on April 6th. A rash appeared on April 9th. The case was diagnosed as variola by the patient's private medical attendant on the same day, and removed at once by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for 12 months. There had been no previous case of illness lately at the house, and I was unable to obtain any evidence as to how she had contracted the disease. She had been vaccinated in infancy, but not since.

No. 61.—Case of T— C—, age 23, a clerk, residing in the Grove. He was first taken ill on April 21st, when he noticed he had a rash. He was visited by his private medical attendant, who diagnosed the disease as variola, and he was removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some months. The patient is a relative of the three patients removed from the house on March 29th and April 8th. In the first case, which occurred at the house, the patient had had a rash for five days previous to his removal. As the patient T— C— developed a rash on April 21st, he was probably first taken ill on April 19th. This is exactly 12 days from the time that the last two cases were removed. These patients had, no doubt, been ill for two or three days before their cases were notified, and consequently there can be little doubt he contracted the disease from them.

He had been vaccinated when a child, but never re-vaccinated. After the occurrence of the first case on March 29th, an offer was made by the Public Vaccinator to vaccinate him, but he declined.

No. 62.—Case of M— R—, age 43, a charwoman, residing in Netherwood Road, and employed at various places. She was first taken ill on April 19th. A rash appeared on April 22nd. The case was diagnosed as variola the same day by the patient's private medical attendant, and removed forthwith by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for three months. There had been no previous case of illness lately at the house, but there was a case treated at home at No. — Netherwood Road (case of M— A— C—), which was not discovered until February 18th. No direct evidence was obtained as to how she contracted the disease. She had been vaccinated when a child, but never re-vaccinated.

No. 63.—Case of F— F—, age 15 years, a milliner, residing in Goldhawk Road, and employed at —, New Basinghall Street. She was first taken ill on April 19th. A rash appeared on April 20th. The case was diagnosed by the patient's private medical attendant on April 23rd, and removed the same night by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for four years. There had been no previous case of illness lately at the house, and no evidence could be obtained as to how she had contracted the disease. She had been vaccinated when a child, but not since.

No. 64.—Case of J— M— S—, age 20, a tailor, employed at his father's in Anley Road, and residing at the same address. He was first taken ill on April 25th. A rash appeared on April 28th. The case was diagnosed as variola by the patient's private medical attendant on May 1st, and removed at midnight of the same date by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for seven years. There had been no previous case of illness lately at the house, and no evidence was obtainable as to how he had contracted the disease. He had been vaccinated in infancy, but never re-vaccinated.

No. 65.—Case of C— W— N—, age 16, a groom, residing in York Road, and employed at King Street, Hammersmith. He was first taken ill on April 28th. A rash appeared on May 3rd. The case was diagnosed as variola by the patient's private medical attendant on May 4th, and

removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some years. There had been no case of illness lately at the house, and no evidence as to how he had contracted the disease was obtainable. He had been vaccinated in infancy, but never re-vaccinated.

No. 66.—Case of K—M—, age 28, no occupation, married, residing in Stowe Road. She was first taken ill on May 4th. A rash appeared on May 6th. The case was notified to me as variola (?) on May 7th. I visited the patient, and diagnosed the disease as variola on the same day, and the patient was removed by the Metropolitan Asylums Board on May 8th to Rotherhithe. The patient at first demurred to go to an Asylums Board Hospital, but after persuasion consented on the 8th to be removed. She had resided at the house for seven weeks. There had been no previous case of illness lately at the house. It appears that about twelve days before the patient was taken ill she visited No. —, Tavistock Road, Kensington, where her brother-in-law had lately died from variola, and it was said that she took down a pair of curtains from the room in which the patient had died, but that previous to her visit, the room was said to have been disinfected by the Kensington Borough Council. Upon receipt of the information, I telephoned to the Medical Officer of Health for Kensington, and suggested to him to take into consideration as to whether he would have the room again disinfected. She had been vaccinated when a child, but never re-vaccinated;

No. 67.—Case of W—B—, age 24, a draughtsman and designer, employed at — Hatton Street, Whitefriars, and residing in Westwick Gardens. He was first taken ill on May 3rd. A rash appeared on May 8th. The case was diagnosed as variola by the patient's private medical attendant on May 9th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some years. There had been no previous case of illness lately at the house, and no information was obtainable as to how he had contracted the disease. No information as to vaccination was obtained.

No. 68.—Case of A—H—, age 18, a laundrymaid, employed at a laundry, and residing in Carthew Road. She was first taken ill on May 7th. A rash appeared on May 10th. The case was diagnosed by the patient's private medical attendant as variola on May 11th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe.

She had resided at the house nine years. There had been no previous case of illness lately at the house, and no evidence as to how she contracted the disease was obtainable. It is remarkable the large proportion of persons who are attacked by small-pox who are engaged in laundries. The heads of such establishments ought to be specially requested to have their employés re-vaccinated. She had never been vaccinated.

No. 69.—Case of E—S—, age 30, a painter's labourer, unemployed during the last five weeks, and residing at J—C—, Bradmore Lane. He was first taken ill on May 14th. A rash appeared on May 15th. On May 19th he applied at the West London Hospital for advice. The case was diagnosed as small-pox at the hospital, and he was detained there until removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had been residing at J—C— for three weeks. He slept in bed No. 200 on May 18th. He had resided at Junction Terrace, Acton, previous to coming to reside at J—C—. No case of small-pox has been known of as occurring at J—C— since December 3rd, 1901. No information as to how he had contracted the disease was obtainable, and he was unable to state as to whether he had ever been vaccinated.

No. 70.—Case of E—H—S—, age 24, a plumber, employed at Earl's Court Road, and residing in Lime Grove. He was first taken ill on May 17th. A rash appeared on May 20th. The case was diagnosed as variola on May 22nd by the patient's private medical attendant, and I received a notification certificate on May 23rd. The patient was removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for three years. There had been no previous case of illness lately at the house, and no information was obtained as to how he had contracted the disease. He had been vaccinated when a child, but not since.

No. 71.—Case of C—B—, age 23, no occupation, residing in Carthew Road. She was first taken ill on May 20th. A rash appeared on May 22nd. The case was diagnosed as variola by the patient's private medical attendant on May 24th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for three years. By reference to my report, case No. 68, it will be seen that a case of small-pox, A—H—, was removed from the house on May 11th. As the patient

C— B— was first taken ill on May 20th, she probably contracted the disease on May 7th, the day when the patient H— was first taken ill with the disease. The patient C— B— had been vaccinated in infancy, but never re-vaccinated until May 14th, *i.e.*, seven days after she had presumably contracted the disease.

No. 72.—Case of C— B—, senior, age 70, no occupation, residing in Carthew Road. She was first taken ill on May 23rd. A rash appeared on May 25th. The case was diagnosed as variola on the same day, and removed the following day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for one year. By reference to my report, Case No. 68, it will be seen that a case of variola was removed on May 11th. As the patient C— B—, senior, was first taken ill on May 23rd, she probably contracted the disease on May 10th, *i.e.*, the day the patient A— H— was removed from the house. She had been vaccinated in childhood, but not since.

No. 73.—Case of C— R—, age 23, a tailor, employed at George Street, Hanover Square, and residing in Sterne Street. He was first taken ill on June 2nd. A rash appeared on June 5th. The case was diagnosed as variola on June 6th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for 18 months. There had been no case of illness lately at the house, but at George Street, Hanover Square, where he was employed, a case was removed about three weeks before. He had been vaccinated when a child, but not since.

No. 74.—Case of G— B—, age 36, a painter, employed at various places, but lately employed in Seething Lane, and residing in Porten Road, but he removed to this address from Blythe Road on May 21st. He was first taken ill on June 3rd. A rash appeared on June 5th. The case was diagnosed as variola on June 7th by the patient's private medical attendant, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for 13 days before he was first taken ill. He had previously resided since September last at Blythe Road. There had been no previous case of illness lately, either at the house in Porten Road, or at the house in Blythe Road, and I was unable to obtain any evidence as to how he had contracted the disease. He had been vaccinated when an infant, but not since.

- No. 75.—Case of W— C—, age 36, a labourer, employed on buildings in Francis Street, Westminster, and residing in Queen Street. He was first taken ill on June 19th. He was sent ill to the Fulham Infirmary on June 20th. A rash appeared on June 22nd. The case was diagnosed as variola on the same day, and removed forthwith by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house since February last. On June 9th, a child, age seven years, was taken ill with what was then supposed to be chicken-pox, and the case was notified to me as such. As will be seen later in this report the case has now been notified as variola by the same private medical attendant. There can be, practically speaking, no doubt that the patient W— C— contracted the disease from his son William, who was supposed to be suffering from chicken-pox. He had been vaccinated when a child, but not since.
- No. 76.—Case of E— C—, age 27, wife of a labourer, no occupation, residing in Queen Street. She was first taken ill on June 21st, a rash appeared on June 23rd, and the case was diagnosed as variola by the patient's private medical attendant, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house since February last. By reference to case No. 77, it will be seen that the son of this patient, William C—, was at the same time certified as suffering from variola, and that he had been ill in the house supposed to be suffering from chicken-pox since June 9th. There can, therefore, be, practically speaking, no doubt that she contracted the disease from her son.
- No. 77.—Case of W— C—, age seven years, son of a labourer, and residing in Queen Street. He was first taken ill about June 8th. The case was notified as chicken-pox by the patient's private medical attendant on June 9th, and was diagnosed as variola by the same medical practitioner on June 23rd, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house since February. There had been no previous case of illness at the house, and no information was obtained as to how he had contracted the disease. He had been vaccinated when an infant, but not since.
- No. 78.—Case of A— S—, age 21, a laundryman, employed at his mother's laundry in Wharf Road, and residing at the same address. He was first taken ill on June 19th. A rash appeared on June 22nd. The case was diagnosed as

chicken-pox, and notified to me as such on June 24th. I visited the patient on the same day, and again on June 25th. On the latter day I diagnosed the disease as variola, and had the patient forthwith removed by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for five months. No case of illness had lately occurred at the house, and no evidence was obtained as to how he had contracted the disease. He had been vaccinated when a child, but not since.

No. 79.—Case of C—S—, age 17, a laundryman, employed at his mother's laundry in Wharf Road, and residing at the same address. He was first taken ill on June 19th. A rash appeared on June 20th. The case was diagnosed as chicken-pox, and notified to me as such on June 24th. I visited the patient on the same day, and again on June 25th, and on the latter day I diagnosed the disease as variola, and had the patient forthwith removed by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for five months. No case of illness had lately occurred at the house, and no evidence was obtained as to how he had contracted the disease. He had been vaccinated when a child, but not since. As both this patient and his brother (case No. 78) were employed in laundry work, they, most probably, contracted the disease from infected clothes brought to the premises to be washed. The large proportion of cases of small-pox that occur among persons employed at laundries calls for special legislation on the subject. It should be a penal offence to employ anyone at a laundry who has not been vaccinated within a period of seven years. Persons who are specially exposed to special danger ought to be protected by special means. A large number of lives could have been saved in the present outbreak of the disease in London if such an enactment had existed. My reports have given many instances of the disease having occurred among persons employed in laundries.

No. 80.—Case of W—L—, age 26, a chemist's assistant, employed at Clerkenwell Road, and residing in Minford Gardens. He was first taken ill on June 23rd. A rash appeared on June 25th. The case was diagnosed as variola by the patient's private medical attendant on June 27th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house since June 4th. He had previously resided at No. 5, Portland Road, Notting Hill. There had been no previous case of illness

lately at either of the houses, and no evidence was obtained as to how he had contracted the disease. He had been vaccinated when a child, but not since.

No. 81.—Case of T— G— J—, age 45, occupation not known, residing at R— H—. On July 4th, while residing at R— H—, this patient was found to be ill, and he was removed the same day to the Fulham Infirmary. Upon his arrival there it was found that he was suffering from variola, and he was removed forthwith by the Metropolitan Asylums Board to Rotherhithe. No evidence could be obtained as to when he was first taken ill at R— H—, or when the rash first appeared. He had resided at R— H— for three weeks. No case of small-pox has been reported as occurring at R— H— since January 21st. He occupied Cubicle No. 353 at R— H—.

No. 82.—Case of W— R—, age 20, a carman, employed by the Great Western Railway Company at Bishop's Road, and residing in Latimer Road. He was first taken ill on July 5th. A rash appeared on July 7th. The case was diagnosed by the patient's private medical attendant on the same day, and removed forthwith by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for eight years. No previous case of illness had lately occurred at the house except two cases of measles among children. No evidence could be obtained as to the source of infection. He had been vaccinated when a child, but never re-vaccinated.

No. 83.—Case of A— L— J—, age 26, a laundrywoman, lately employed at Wharf Road, and residing in Wharf Road. It appears that she was first taken ill on July 8th. A rash appeared on July 9th. The case was visited by the patient's private medical attendant on the same day, and diagnosed as chicken-pox on July 13th, and notified as such. The notification certificate, dated July 13th, was sent on by mistake to the Medical Officer of Health for Kensington, and forwarded on to me on July 17th. I visited the patient at once, and diagnosed the disease as variola, and had her forthwith removed by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for four years. There had been no previous case of illness lately at the house, but two cases of small-pox were removed from the house at which she worked in Wharf Road on June 25th:

By reference to my report on cases No. 78 and 79, it will be seen that those patients had been ill since June 19th, and that the cases were also notified to me as chicken-pox. As the patient A— H— J— was working at the house at the time, it is probable that she contracted the disease from them.

With regard to the paragraph in my report in reference to case No. 79, it is important to note the fact that between July 16th, 1901, and June 19th, 1902, 91 cases of small-pox were notified to me as occurring in private dwelling houses in this borough. Of this number, 22 of the patients were either employed at laundries, or there was evidence that they had contracted the disease from persons who were employed at laundries, and who were suffering from the disease. That is to say, as many as 24·1 per cent. of the total number of cases which occurred at private dwelling houses, presumably contracted the disease from laundries. There can, therefore, be no reasonable doubt that, if the keepers of laundries had been required by law to see that all of their employés were recently vaccinated, one fourth of the total number of cases of small-pox which occurred in private dwelling houses might have been prevented.

I have excluded from these statistics 38 cases which during the same time occurred at R— H— and J— C—, two large lodging houses in the borough, but I am also strongly of opinion that, upon the occurrence of a case of small-pox at such buildings, the public health authority should have power to immediately require that the whole of the inmates should be at once protected by re-vaccination.

No. 84.—Case of G— J—, age 28, a labourer, lately employed at a builder's in Bramley Road, and residing in Wharf Road: It appears that he was first taken ill on July 23rd. A rash appeared on July 25th. The case was diagnosed as variola by the patient's private medical attendant on July 26th, and removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for four years. By reference to my report on case No. 83, it will be seen that the case of A— I— J—, the wife of this

patient, was removed from the house on July 17th, and that she had been ill with the disease since July 8th. The case was subsequently diagnosed as chicken-pox, and notified to me as such on July 17th, the certificate, which was dated 13th July, having been sent in error to Kensington, and subsequently forwarded on to me by the Medical Officer of Health for Kensington. The patient, Mrs. A—L—J—, was therefore ill in the house for nine days suffering from the disease before I obtained any information of the case. It will be seen further on in this report that not only did the husband of the patient contract the disease, but that another and fatal case, that of L—B—, occurred at the house. Both the case of G—J— and L—B— would most probably not have occurred had the first case been diagnosed and removed in the early stage of the disease. It is interesting to compare the serious results that occurred in this outbreak owing to the delay with what is the almost invariable result, where a case is early diagnosed and removed direct. The patient had been vaccinated in infancy, but not since.

No. 85.—Case of H—C—, age 25, a house painter out of employment, and residing in Blythe Road. On July 19th, the patient had a blow on the eye from a cricket ball. On July 24th he was admitted as an in-patient to the West London Hospital. He was then suffering from acute inflammation of the eye. On July 27th a rash appeared, when the case was diagnosed as variola; and he was removed the same day by the Metropolitan Asylums Board to Rotherhithe. He had resided at the house for some years. There had been no previous case of illness lately at the house, and I was unable to obtain any information as to how he had contracted the disease. He had been vaccinated when a child, but not since.

No. 86.—Case of L—B—, age 30, of no occupation, residing in Wharf Road. It appears that she was first taken ill on July 24th. A rash appeared on July 28th. The case was diagnosed as variola by the patient's private medical attendant, and she died on the same day before he had notified the case. She had resided at the house for about four years. By reference to the case of A—L—J—, it will be seen that there is strong reason for believing that this patient contracted the disease from the patient A—L—J—, who was ill in the same house suffering from the disease from July 8th to July 17th. She had been vaccinated when a child, but not since.

No. 87.—Case of E— C—, age 19, of no occupation, residing in Blythe Road. She was first taken ill on August 6th. A rash appeared on August 8th. The case was diagnosed the same day as variola by the patient's private medical attendant, and she was removed forthwith by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for some years. There had been no previous case of illness lately at the house, except the brother of the patient, H— C—, who she was in contact with on July 24th, just previous to his leaving the house before his admission to the West London Hospital. As she was in contact with him just 13 days before she was taken ill, and as he had probably then developed the disease, it is probable that she contracted the complaint from him. She had been vaccinated in infancy, and re-vaccinated on July 28th, but I was unable to obtain any information as to whether her arm took.

No. 88.—Case of M— C—, age 43, a cleaner, employed at a dye works, Latimer Road, and residing in Latimer Road. She was first taken ill on August 8th. A rash appeared on August 12th. The case was diagnosed as variola by the patient's private medical attendant on the same day, and removed forthwith by the Metropolitan Asylums Board to Rotherhithe. She had resided at the house for several years. There had been no previous case of illness lately at the house, and I was unable to obtain any information as to how she had contracted the disease. She had been vaccinated when a child, but not since.

On October 20th, a Mr. Friend called at my office, and stated that he had been advised to consult me, as there were four men outside the West London Hospital who had just come from Havre, and that they had travelled via Calais and Dover to Charing Cross, and had come down in a cab to Hammersmith. He also informed me that he had been told that they had been in contact with a man, who was suffering from small-pox, at Havre. I at once decided to take the four men into your Council's shelter at No. 34, Brook Green Road, so as to carefully examine them. Upon doing so, I found that two of them were suffering from variola in the vesicular stage, and two had premonitory symptoms of the disease. I had two of them at once removed to Rotherhithe, and I

decided to keep the other two at the shelter. The following day I diagnosed that a third man was suffering from variola, and I had him at once removed to Rotherhithe and the next day I diagnosed that the fourth man was suffering from the same complaint, and I had him also removed to Rotherhithe. I tried, through the police authorities, to trace the cab in which the men had travelled to Hammersmith, but without success.

No. 89.—Case of H— B—, age 23, a jockey, a native of America, but with no fixed abode. It appears that he was first taken ill on Friday, October 17th, when at Havre. He had headache, pain in the back, shivering, vomiting, and giddiness. He did not consult a doctor, but travelled to Calais, and from thence to London. He had not noticed a rash before October 20th, the day when I saw him. He had been vaccinated when a child, and also on October 11th. This would be about the sixth day after he had contracted the disease.

No. 90.—Case of W— M—, age 21, a jockey, a native of America, but no fixed abode. It appears that he was first taken ill on Saturday, 18th October, when at Calais. He had headache, backache, shivering, and giddiness. He did not consult a doctor, but travelled to Dover, and from thence to London. He did not notice that he had a rash until October 20th, the day when I saw him. He had been vaccinated when a child, and re-vaccinated on October 11th. This would be about six days after he had contracted the disease.

No. 91.—Case of J— H—, age 25, a jockey, a native of America, but with no fixed abode. It appears that he was first taken ill on October 19th, when at Calais. He vomited, had shivering, and headache. He did not consult a doctor, but travelled to Dover, and thence to London. A rash appeared on October 21st, when I diagnosed the disease as variola. He had been vaccinated when a child, and re-vaccinated on October 11th. This would be about four days after he had contracted the disease.

No. 92.—Case of H— H—, age 42, a jockey, a native of America, but with no fixed abode. It appears that he was first taken ill on October 19th, when at Calais. He had shivering, pain in the back, and headache. He did not consult a doctor, but travelled to Dover, and from thence to London. A rash appeared on October 21st. On October 22nd I

diagnosed the disease as variola. He had been vaccinated when a child, and re-vaccinated on October 11th, which would be about four days after he had contracted the disease.

CHICKEN POX.

Six hundred and fifty-nine cases of chicken-pox were reported against 28 cases in the previous year. Six hundred and forty-three of these were notified on and after February 7th, the disease having been made notifiable by order of the London County Council from that date. The 659 cases reported last year were treated at the homes of the patients with the exception of two, one of which was treated at the Middlesex Hospital and one at the Fulham Infirmary. All adult cases of chicken-pox notified were at once visited and examined by myself. By reference to my report on small-pox cases, it will be seen that many cases of small-pox were discovered owing to the compulsory notification of chicken-pox. One death was registered.

MEASLES.

Two hundred and ninety-three cases were reported as due to measles, against 193 cases in the previous year, 75 cases were not reported until after death, and in 218 cases the patients were suffering from the disease at the time when the information was received. 75 deaths were registered. As this is not a notifiable disease it is of no use my giving the mortality rate on the cases reported as, no doubt, only a very small proportion of the cases which occurred were known of by me.

NOTIFICATION OF MEASLES.

No further action was taken during the year in reference to the question of the notification of measles, but I am still strongly of opinion that such action is highly desirable, I am glad at length to be able to

report that at the time of my writing this report the London County Council has under consideration the question of bringing measles under certain of the provisions of the Public Health (London) Act, 1891.

SCARLET FEVER.

Three hundred and forty-nine cases were reported as due to scarlet fever, against 343 in the previous year. Two hundred and seventy-two cases reported last year were isolated at Isolation Hospitals, and 77 cases were treated at the homes of the patients. The mortality rate on the cases reported was only 2·0 per cent.

DIPHTHERIA AND DIPHTHERITIC MEMBRANOUS CROUP.

One hundred and seventy-two cases were reported as due to diphtheria or diphtheritic membranous croup, against 227 cases in the previous year. One hundred and eighteen cases reported last year were treated at the Isolation Hospitals, and 53 at the homes of the patients. Twenty-three deaths were registered. The mortality rate on the cases reported in the Borough was 13·5 per cent.

WHOOPING COUGH.

Seventy-eight cases were reported as due to whooping cough, against 207 cases in the previous year. All of the cases reported last year were treated at home. Twenty-five were not reported until after death. Twenty-five deaths were registered. As this is not a notifiable disease it is of no use my giving the mortality rate on the cases reported, as doubtless a very large number of cases occurred which were not known of in your Public Health Department.

ENTERIC FEVER.

Forty-nine cases were reported as due to enteric fever, against 77 in the previous year. Twenty of the cases

reported last year were treated at the Isolation Hospitals of the Metropolitan Asylums Board. Eleven deaths were registered. The mortality rate on the cases reported was 22·4 per cent.

TYPHUS FEVER.

No case was reported as due to typhus fever, against no case in the previous year.

SIMPLE CONTINUED FEVER.

No case was reported as due to simple continued fever, against 2 cases in the previous year.

RELAPSING FEVER.

No case was reported as due to relapsing fever, against no case in the previous year.

PUERPERAL FEVER.

Seven cases were reported as due to puerperal fever, against 3 cases in the previous year. Six of the cases reported last year were treated at the homes of the patients. One case was treated at the Fulham Infirmary. Two deaths were registered. The mortality on the cases reported was 28·6 per cent.

CHOLERA.

No case was reported as due to cholera, against no case in the previous year.

ERYSIPELAS.

One hundred and ten cases were reported last year as due to erysipelas, against 115 cases in the previous year. Six deaths were registered. The mortality rate on the cases reported was 5·15 per cent.

PLAGUE.

No case was reported on due to plague, against no case in the previous year.

TABLE V.

The following table shows the number of cases that were reported as due to the undermentioned 14 zymotic diseases during the years 1893 to 1902.

YEAR.	Small-pox.	Scarlet Fever.	Diphtheria or Diphtheritic Croup.	Typhus Fever.	Enteric Fever.	Simple Continued Fever.	Relapsing Fever.	Puerperal Fever.	English Cholera.	Erysipelas.	Plague.	Chicken-pox.*	Measles.*	Whooping Cough.*	TOTAL.
1893	21	673	282	0	68	4	0	19	1	184	0	0	6	51	1309
1894	7	332	189	0	52	4	0	8	0	92	0	1	86	55	826
1895	7	382	202	0	57	5	0	3	0	89	0	2	30	42	819
1896	1	528	217	1	53	4	0	8	0	121	0	5	74	61	1073
1897	0	399	158	0	46	3	0	8	1	93	0	0	11	29	748
1898	0	458	163	0	59	5	0	4	0	91	0	10	357	47	1194
1899	0	442	186	0	113	0	0	12	0	109	0	18	42	54	976
1900	2	355	252	0	103	4	0	6	0	111	0	21	487	13	1354
1901	46	343	227	0	77	2	0	3	0	115	0	28	193	207	1241
1902	92	349	172	0	49	0	0	7	0	110	0	659	293	78	1509

* Not a notifiable disease, except last year in the case of Chicken-pox.

TABLE VI.

The following table has been prepared by me under an instruction of the Local Government Board.

TABLE VI.

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1902.

Borough of Hammersmith.

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.						North.	Centre.	South.	West London Hospital.	Nazareth House.	North.	Centre.	South.	West London Hospital.	Nazareth House.
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.										
Small-pox	92	0	2	6	29	53	2	39	41	12	0	0	37	39	12	0	0
Cholera	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Diphtheria	171	4	43	89	16	19	0	83	61	23	4	0	61	39	18	0	0
Membranous croup	1	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0
Erysipelas	110	3	4	7	10	79	7	62	33	13	1	1	0	0	0	0	0
Scarlet fever	349	3	117	187	24	18	0	126	152	71	0	0	108	110	54	0	0
Typhus fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Enteric fever	49	0	2	10	14	23	0	22	23	4	0	0	9	10	1	0	0
Relapsing fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Continued fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Puerperal fever	7	0	0	0	3	4	0	1	4	2	0	0	0	0	0	0	0
Plague	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
*Chicken-pox	643	53	274	282	21	13	0	255	239	148	1	0	0	0	0	0	0
†Phthisis	127	0	0	0	9	107	11	35	47	44	1	0	0	0	0	0	0
§																	
Totals	1549	63	443	581	126	316	20	624	600	317	7	1	215	198	85	0	0

NOTES.—The localities adopted for this table should be the same as those in Tables II. and IV.

State in space below the name of the isolation hospital, if any, to which residents in the district, suffering from infectious disease, are usually sent. Mark (H) the locality in which it is situated, or if not within the district, state where it is situated, and in what district. Mark (W) the locality in which a workhouse is situated.

* Made Notifiable on February 7th.

† These age columns for notifications should be filled up in all cases where the Medical Officer of Health, by inquiry or otherwise, has obtained the necessary information.

‡ Voluntary Notifiable since April 7th, 1902.

§ This space may be used for record of other disease the notification (compulsory or voluntary) of which is in force in the district.

Isolation Hospital.—Western District Hospital at Fulham, and occasionally other hospitals under the Metropolitan Asylums Board. The Hospitals at Darenth, and exceptionally the London Fever Hospital.

INFLUENZA.

Thirty-two deaths were registered as due to influenza, against 14 deaths in the previous year. No official action was taken in reference to this complaint, as no application was made for the disinfection of premises.

PHTHISIS.

Your Council decided to ask Medical Practitioners to voluntarily notify cases of phthisis in the Borough on and after April 7th. Altogether, since that date, 127 cases were notified. These were only a small proportion of the cases that occurred, as 167 deaths were registered, against 164 deaths in the previous year. In all cases notified or in which death occurred the premises were at once inspected, and after death in all cases occurring in dwelling houses an offer was made to disinfect the premises at the expense of your Council. In every case a printed instruction as to the course that should be adopted for the prevention of consumption was left at the premises. In several instances advantage was taken of the offer of your Council to disinfect the premises.

COUNCIL'S DUST SHOOT AT THE WHARF
CHANCELLORS.

During last year no complaint was made of a nuisance from the depositing of the refuse at your Council's wharf.

NUISANCE AT THE ROAD CAR COMPANY'S STABLES
AND PREMISES AT HAMMERSMITH ROAD.

During last year these premises were under the supervision of the Sanitary Inspector of the district. He did not present any special report on the subject, and no complaint was made by a member of the public.

I have observed myself, however, that at times a most offensive odour was emitted from the windows of the stable.

LICENSED SLAUGHTER HOUSES.

The whole of the 12 licensed slaughter houses in the Borough were under regular fortnightly inspection by the Inspector for offensive trades. At the annual inspection of slaughter houses in October, 1902, I had received notices that 12 licenses were to be applied for. Eight of them were found to be, as far as your Council's requirements were concerned, in a satisfactory condition. With reference to the remaining four—at No. 35, Queen Street, the paving of the yard abutting upon the slaughter-house was defective; at 65, King Street, part of the paving outside the dung pit was defective; at 158, King Street, the walls of the pound were dirty; and at 247, Goldhawk Road, the paving outside the slaughter-house, and the paving of the passage leading to the same were defective. Your Council required the applicants to remedy these defects, and gave notice of the same to the London County Council. The licensees complied with your requirements and at the Special Sessions, at the London County Council, held in October, the 12 licenses were granted without opposition by your Council.

NORTH DISTRICT.

Wards Nos. 4, 5 and 6.

ADDRESS.	NAME OF LICENSEE.
61, Silchester Road	William R. Shattock
185, Uxbridge Road	William Matthew East
49, Goldhawk Road	Benjamin Holton
138, " " "	Frederick Kerven
Sheep House Farm, Old Oak Lane (pig slaughtering only)	Edward Wiggins

CENTRE DISTRICT.

Wards 2 and 3.

ADDRESS.	NAME OF LICENSEE.
158, King Street	Thomas Holton
247, Goldhawk Road	William Spicer
41, Dalling Road	Frederick Wright

SOUTH DISTRICT.

Ward No. 1.

ADDRESS.	NAME OF LICENSEE.
35, Queen Street	J. Payne
49, King Street	Benjamin Holton
65, " "	George Meacock
321, " "	Thomas Jasper Wheeler

LICENSED COW-HOUSE.

No application was received last year for the only licensed cow-house that existed in the Borough.

BAKEHOUSES.

The whole of the 64 bakehouses in the Borough were under regular half-yearly inspection by the Factory Inspector. In 77 instances it was reported that the premises were not in a proper sanitary condition. Notices were at once served upon the bakers calling upon them to comply with the regulation of your Council. In each case the notice was complied with.

It was not decided to apply for any summonses against bakers whose bakehouses were found not to be in conformity with the Act, as they readily complied with the requirements of your Council when called upon by notice to do so.

The following is a list of the bakehouses in the Borough :—

NORTH DISTRICT.

Wards Nos. 4, 5 and 6.

ADDRESS.	NAME.
356, Uxbridge Road	J. Plant
*125, Uxbridge Road	R. Oliver
121, Askew Road	J. Roberts
*242, Goldhawk Road	W. Culf
*32, Norland Road	P. Franks
*142, Goldhawk Road	E. Holman
*74, Goldhawk Road	N. Hutter
*122, Askew Road	F. Faubel
*75, Uxbridge Road	J. J. Sauer
*216, Uxbridge Road	F. C. Stiles
*74, Askew Road	J. Wackerbath
374, Uxbridge Road	Not in use
*1, Kenmont Terrace, Harrow Road	H. T. Rogers
*2, Hunt Street	Wm. Burt
*4, St. Helen's Terrace	Lutz Brothers
*55, Melina Road	W. Mugford
*167, Askew Road	Peter Schlegel
*126, Uxbridge Road	H. Seeler
41, Gayford Road	Not in use
*39, St. Ann's Road	E. Tomlin
*106, Goldhawk Road	A. J. Wills

CENTRE DISTRICT.

Wards Nos. 2 and 3.

ADDRESS.	NAME.
*54, Richmond Road	J. Alderton
*13, Shepherd's Bush Green	J. Breton
*87, Masboro' Road	W. Ayres
348, King Street	R. Bedser
*75, Blythe Road	J. Saunders
*31, Goldhawk Road	J. Anderson
*11, Lamington Street	Milsom & Witt
258, King Street	P. Erbach
*94, Shepherd's Bush Road	H. Elkins
*82, Glenthorne Road	Not in use
*85, The Grove	H. Bowles

CENTRE DISTRICT (*continued*).

Wards Nos. 2 and 3.

ADDRESS.	NAME.
*102, Dalling Road	W. H. Howard
*84, Shepherd's Bush Road	E. McNicol
70, Glenthorne Road	M. Durand
24, Bradmore Park Road	G. Klein
*77, Brackenbury Road	W. Jennings
*134, Shepherd's Bush Road	C. Jacobs
*6, Beaconsfield Terrace Road	A. Voituret
*1, Masboro' Road	F. J. Roos
*98, Blythe Road	P. Puhl
*17, Kilmarsh Road	E. Freeman
*7, Shepherd's Bush Road	A. Royston
*192, Dalling Road	W. J. Cull
*1, Aldensley Road	W. Tyler
*67, Masboro' Road	J. Pendry
*47, Milson Road	G. Hall
*33, Glenthorne Road	E. Winstone
† Late Kensington Stores, Ltd.	J. Lyons & Co.
† Lyons & Co., Hammer-smith Road	J. Lyons & Co.
†1, The Grove	Palmer's Stores, Ltd.
316, King Street	J. A. West
20, Shepherd's Bush Green	C. Klempner

SOUTH DISTRICT.

Ward No. 1.

ADDRESS.	NAME.
65, Bridge Road	W. Bass
88, Queen Street	H. Young
† Eyot Gardens	J. R. Chibnall, Limited
2 and 4, Queen's Road	Mrs. Gottig
93, Black Lion Lane	A. Gurney
*182, Great Church Lane	G. Acres
16, Black Lion Lane	A. Mulford
*213, Hammersmith Road	O. Shornsheim
163, King Street	Not in use
† Great Church Lane	Fullers, Limited
7, St. Peter's Road	Mrs. Howlett

* Underground Bakehouses.

† Factory Bakehouses.

Under section 26 of the Public Health (London) Act) 1891, the duties under sections 34, 35, and 81 of the Factory and Workshops' Act, 1878, and sections 15 and 16 of the Factory and Workshops' Act Amendment Act, 1883, which related to the cleanliness, ventilation, and other sanitary conditions of bakehouses which are workshops, were transferred for enforcement by the sanitary authority of the district in which the bakehouse is situated.

The Factory and Workshops' Act, 1901, repealed the Factory and Workshops' Acts, 1878 and 1883, but re-enacted the same sections with certain additional provisions to be enforced by the sanitary authorities.

Under section 101 of the 1901 Act :—

(1) An underground bakehouse shall not be used as a bakehouse, unless it was so used at the passing of this Act.

(2) Subject to the foregoing provision, after the first of January, one thousand nine hundred and four, an underground bakehouse shall not be used unless certified by the District Council to be suitable for the purpose:

(3) For the purpose of this section an underground bakehouse shall mean a bakehouse, any baking room of which is so situate that the surface of the floor is more than three feet below the surface of the footway of the adjoining street or ground adjoining or nearest to the room. The expression bakehouse means any room used for baking or for any process incidental thereto.

(4) An underground bakehouse shall not be certified as suitable unless the District Council is satisfied that it is suitable as regards construction, light, ventilation, and in all other respects:

(5) This section shall have effect as if it were included among the provisions relating to bakehouses which are referred to in section twenty-six of the Public Health (London) Act, 1891

(6) If any place is used in contravention of this section it shall be deemed to be a workshop not kept in conformity with this Act.

(7) In the event of a refusal of a certificate by the District Council, the occupier of the bakehouse may within twenty-one days from the refusal by complaint apply to a Court of Summary Jurisdiction, and if it appears to the satisfaction of the Court that the bakehouse is suitable for use as regards construction,

light, ventilation, and in all other respects, the Court shall thereupon grant a certificate of suitability of the bakehouse, which shall have effect as if granted by the District Council.

(8) Where any place has been let as a bakehouse and the certificate required by this section cannot be obtained unless structural alterations are made, and the occupier alleges that the whole or part of the expense of the alterations ought to be borne by the owner, he may by complaint apply to the Court of Summary Jurisdiction, and that Court may make such order concerning the expenses or their apportionment as appears to the Court to be just and equitable under the circumstances of the case, regard being had to the terms of any contract between the parties, or in the alternative the Court may at the request of the occupier determine the lease.

It will be the duty of your Council to enquire as to the condition of all of the underground bakehouses in the borough, and to grant certificates of fitness in all cases in which you are satisfied that the bakehouses are suitable for the purpose.

SEIZURE OF UNWHOLESOME FOOD.

During last year no seizure was made of food which was unsound, unwholesome and unfit for the food of man.

HOUSES LET IN LODGINGS.

During last year the Public Health Committee gave directions for the registration of 329 "houses let in lodgings or occupied by the members of more than one family," making a total with those previously ordered to be registered of 1,359 premises. Upon the registration a copy of the Bye-laws of your Council under which such houses are registered, was forwarded to the landlord (within the meaning of the Bye-laws), for his guidance. Your Council having now appointed a special Inspector to supervise this work, this important branch of the administration is now on the road to have the consideration it deserves. There can be no doubt, however, that as the number of premises upon the register increases, it will be found that one Inspector will not be able to efficiently supervise the work.

SANITARY NOTICES AND ADMINISTRATION.

During last year 3,982 notices were reported as having been served by your Sanitary Inspectors, having for their object the removal or prevention of nuisances or insanitary conditions, against 3,286 in the previous year, and during last year 2,916 notices were reported as having been complied with against 2,373 in the previous year. The House-to-House Inspection has been continued during the year. This Inspector reports that during the year he has inspected 3,418 houses and other premises in the Borough, against 3,224 houses in the previous year. The defects in premises discovered, as the result of his inspection, were as usual dealt with by the four District Sanitary Inspectors.

Your Factory Inspector has during the year served 247 notices under the Factory and Workshop Act, and during the same period 245 notices have been complied with. During the previous year there were 236 notices served and 235 complied with.

The following is a list of the Factories and Workshops upon the Register :—

Restaurants, Hotels, &c.	64
Bakehouses	64
Bootmakers	50
Motor and Cycle Makers and Engineers	25
Dressmakers and Milliners	207
Laundries	321
Letterpress Printers and Bookbinders	26
Electrical and Mechanical Engineers	43
Smiths, Wheelwrights, and Coachbuilders	34
Tailors	42
Bottle Washing Works	12
Dry Cleaning, Dyeing, and Carpet Beating Works	16
Firewood Cutters	12
Builders and Joiners (Machine)	30
Outworkers	176
Miscellaneous	73
 Total	 1,195

It is obvious that without a special inspector for the duties, it would not be practicable to at all efficiently carry out the duties imposed upon your Council under the Factory and Workshops Act, 1901.

ICE CREAM DEALERS.

Under the London County Council General powers' Act, 1902, Part VIII., the London County Council made the following Bye-laws for the regulation, manufacture, and sale of ice cream or other similar commodities.

These Bye-laws came into operation on November 1st, 1902, and are as follows :

Any person being a manufacturer of or merchant or dealer in ice creams or other similar commodity who within the County—

(a) Causes or permits ice creams or any similar commodity to be manufactured sold or stored in any cellar shed or room in which there is any inlet or opening to a drain or which is used as a living room or sleeping room ;

(b) In the manufacture sale or storage of any such commodity does any act or thing likely to expose such commodity to infection or contamination or omits to take any proper precaution for the due protection of such commodity from infection or contamination ; or

(c) Omits on the outbreak of any infectious disease amongst the persons employed in his business or living or working in on or about the premises in or on any part of which any such commodity as aforesaid is manufactured sold or stored to give notice thereof forthwith to the Medical Officer of the Sanitary District in which such business is carried on or such premises are situate ;

shall be liable for every such offence on conviction in a Court of Summary Jurisdiction to a penalty not exceeding Forty Shillings.

Every itinerant vendor of any such commodity as aforesaid shall if not himself the manufacturer thereof exhibit in a legible manner on a conspicuous part of his barrow a notice stating the name and address of the person from whom he obtains such commodity and if such vendor is himself the manufacturer of such commodity he shall in the same manner exhibit his own name and address. Every such itinerant vendor who shall fail to

comply with the provisions of this Section shall be liable for each offence on conviction as aforesaid to a penalty not exceeding Forty Shillings.

Proceedings for the recovery of the penalties shall be instituted by the Sanitary Authority for the District in which the offence was committed or of the District to the Medical Officer of which such notification as aforesaid ought to have been made or in which such itinerant vendor as aforesaid shall offer any such commodity as aforesaid for sale as the case may be.

In accordance with my advice your Council decided to instruct Sanitary Inspector S. Huggons Brown to act as inspector for the purpose of these Bye-laws in addition to the other duties as Smoke Inspector. He has since been registering such premises. At the present time there are 20 premises upon the register. In 6 cases notices have been served, all of which have been complied with.

SANITARY ADMINISTRATION IN THE BOROUGH OF HAMMERSMITH.

Your Council having received a report dated June 27th, 1902, by Dr. Young, Assistant Medical Officer of Health of the London County Council, on the Sanitary administration of the Borough of Hammersmith, your Public Health Committee instructed me to report on the advice therein contained. On December the 1st, I presented the following report.

Dec. 1st, 1902.

GENTLEMEN,

In accordance with the instruction which I received at the last meeting of your Committee that I should carefully consider and present to you a report on the Report by Dr. Young, dated June 27th, 1902,

I beg to point out to you that the whole cause of the inquiry and report was the fact that the late Vestry and your Council had for a very considerable period delayed in adopting the advice contained in several of my reports in reference to the adequacy of the Sanitary Staff. Had your Council earlier adopted the course which you have since unanimously followed, I assume that the London County Council would not have deemed it to be necessary to instruct their officer to report upon the matter.

There are only two questions upon which I feel it my duty specially to deal with. I., the difference between the advice contained in the report of Dr. Young and that contained in the non-adopted report of the Public Health Committee, dated 20th November, 1901; and, II., the difference between the advice contained in the report by Dr. Young and the present system which has been adopted by your Council.

I beg to point out to you, that as regards No. I., there is absolutely no instance of complete similarity between the non-adopted report of the Public Health Committee of November 20th, 1901, and that of Dr. Young.

The report of the Public Health Committee avowedly had for its object the adoption of a plan whereby it would be unnecessary to add any additional officer to the staff, whereas the report of Dr. Young advises the appointment of three new officers, in addition to those who then existed.

In the non-adopted report of the Public Health Committee it was advised that the Borough should be divided into six districts, and that the whole of the sanitary duties, including the inspection of factories, workshops, laundries, and bakehouses, and every month the inspection of 50 houses let in lodgings, and of 50 house-to-house inspections, should be carried out by the District Inspectors, and that the time of the seventh Inspector should be devoted to cases of smoke nuisance, and to carrying out the whole of the duties transferred from the London County Council.

Dr. Young's report differs from these recommendations, not only as regards the addition of three officers to the staff, but he advises :—

(a) That the smoke inspection should be allotted to the District Inspectors.

(b) That the factory duties should not be allotted to the District Inspectors.

(c) That the District Inspectors should not perform the duties appertaining to houses let in lodgings, and

(d) That the District Inspectors should perform the duties transferred from the London County Council.

No. II. The difference between the advice contained in the report of Dr. Young and that adopted by your Council is :—

(a) He advises the appointment of two Inspectors for Houses let in Lodgings, instead of as at present one.

(b) He advises the appointment of a Female Factory Inspector, in addition to the Factory Inspector at present employed.

(c) He advises the abolition of the office of the House-to-House Inspector, and that he should act as an additional District Inspector.

(d) He advises the abolition of the office of the Smoke and Transferred Duties and Slaughter-houses Inspector, and that he should act as an additional District Inspector.

(e) He advises the abolition of the office of the Dust and Food and Drugs Inspector; that a new officer be appointed in his place to superintend the removal of dust, etc., that the present Inspector shall act as one of the Houses let in Lodgings Inspector, and that the duties under the Sale of Food and Drugs Acts shall be transferred to the proposed six District Inspectors.

As regards (a) I am not prepared at present to advise you to appoint another Houses let in Lodgings Inspector, though I think it probable that the time will come when, from the number of premises registered, one Inspector may not be able to efficiently carry out the work.

As regards (b) I do not at present feel myself justified in advising you to appoint a female Factory Inspector. You have only recently appointed a separate Factory Inspector for the duty, and I have not evidence sufficient before me to justify me in advising you to at present appoint an additional officer.

As regards (c) I most strongly advise you not to abolish this office, as an experience of 25 years' public health administration has convinced me that it is the only plan by which it is practically possible that a district can be efficiently and systematically inspected. It is only since there has been a special officer for the purpose that, practically speaking, any house to house inspection has been carried out in the Borough.

As regards (d) I cannot advise the abolition of the office of Smoke Inspector, and I am clearly of opinion that the District Inspectors, with their numerous other duties, could not efficiently carry out this work. You are well aware of the success that has followed the present system in vogue. Nor can I advise that the transferred duties and slaughter houses be allotted to the District Inspectors, as I am of opinion that the Smoke Inspector has time to efficiently and systematically perform them, and that the District Inspectors could not be relied upon to be able, without neglecting their other duties, to systematically carry out the work.

As regards (e) I am not prepared to advise you to abolish the office of Dust Inspector, or to transfer the duties under the Sale of Food and Drugs Acts to the District Inspectors, and I am of opinion that they are not at all likely to be so efficiently performed as hertofore by such alteration.

Your obedient Servant,

N. C. COLLIER,

Medical Officer of Health.

Your Council decided to adopt the whole of the advice contained in the foregoing report, and to inform the London County Council of your decision. It may be observed from this report how the division of the duties of the Sanitary Inspectors steadily increases the amount of work carried on in each succeeding year.

SUMMONSES ORDERED.

During last year, your Council and the Public Health Committee gave authority for 55 summonses to be taken out against persons for having failed to comply with the requirements of notices which had been served. In most cases before summonses were issued a letter was written to the person in default, informing him that the Public Health Committee had ordered the summons, and asking him if he was willing to give an undertaking in writing that he would forthwith comply with the notice which had been served. In many instances the undertaking was at once given, and it was not found to be necessary to apply for a summons. It has been the object of the department, as heretofore, to take out as few summonses as possible, but at the same time in no instance to allow anyone to defy the authority of your Council.

During last year 30 summonses were taken out through the Public Health Department. The following is a list of the premises in reference to which summonses were issued, with a statement as to the nature of the complaint and the result of the proceedings:—

SUMMONSES.

Situation of Premises.	Nature of Offence.	Result of Proceedings.
Central London Railway Co., 9 Summonses	Nuisance from black smoke	Fined £5 in each case and £10 10s. costs
No. 1, Theresa Terrace	Failure to comply with notice to abate a nuisance	Fined £5 and order made to abate the nuisance
No. 3, Theresa Terrace	ditto	Fined £5 and order made to abate the nuisance
Hope House grounds, Askew Road	Failure to comply with a notice	This summons was withdrawn upon the Solicitor for the defendants paying £1 1s. costs
No. 51, Melrose gardens	Failure to comply with a notice to amend drain	Fined £2. Notice of appeal given
London & North-Western Co.'s Laundry, Willesden Junction, 3 Summonses	Nuisance from black smoke	Fined £5 in each case with 6s. costs
Glen Laundry, Starch Green, 7 Summonses	Nuisance from black smoke	Fined £2 in each case and 14s. costs
London Co-operative Laundry, Blythe Rd., 5 Summonses	Nuisance from black smoke	Fined £10 on first summons and £3 in each of the other 4 summonses with 10s. costs
376, Uxbridge Road	Failure to comply with a notice to abate a nuisance	Order made for the work to be done in 14 days
376, Uxbridge Road	Failure to provide a receptacle for the house refuse	Fined £1

The total fines amounted to £107. The costs ordered amounted to £13 1s.

PUBLIC MORTUARY.

During last year your Council removed to the mortuary at Fulham Palace Road 3 bodies of persons who had died of infectious disease. There were also 210 bodies brought to the mortuary by order of the Coroner or the Police; 25 of these were taken from the West London Hospital.

PUBLIC NUISANCES.

During last year I had occasion to bring before your Public Health Committee complaints in reference to alleged Public Nuisances at the following premises :—

- I: Nuisance from a storm of dust, small cinder and dirt in the neighbourhood of 68, Wood Lane.
- II: Nuisance from Acton Sewage Works.
- III: Nuisance from foul drain near to Cottage at the north-west corner of Old Oak Lane.
- IV: Nuisance from Mr. Hopkins' piggery, Old Oak Lane.
- V: Nuisance from congregation of gipsies on land near Kenmont Gardens.
- VI: Nuisance from manure at Stable at Bloemfontein Road;

Each of the complaints had the usual careful consideration of your Public Health Committee.

METEOROLOGY.

The average mean temperature registered in London during last year was $49^{\circ}2$ Fahrenheit. The highest temperature registered was $86^{\circ}1$ in July. The lowest temperature was $14^{\circ}3$ in February. Rain fell on 159 days. The total amount of rainfall was 19.34 inches.

I am, Gentlemen,

Your obedient Servant,

N. C. COLLIER, L.R.C.P., L.S.A.,
Medical Officer of Health.

I. [illegible] from a [illegible] of [illegible] small [illegible] and [illegible] [illegible] [illegible] of [illegible] [illegible] [illegible]

II. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

III. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

IV. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

V. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

VI. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

VII. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

VIII. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

IX. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

X. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

XI. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

XII. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

XIII. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

XIV. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

XV. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

XVI. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

XVII. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

XVIII. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

XIX. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

XX. [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

