

Report on the vital statistics and sanitary work for the year 1901.

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Metropolitan Borough of Paddington.

REPORT
ON
THE VITAL STATISTICS
AND
SANITARY WORK
For the Year
1901.

BY
REGINALD DUDFIELD, M.A., M.B., D.P.H.,
Medical Officer of Health.

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TO HIS WORSHIP THE MAYOR, THE ALDERMEN, AND THE COUNCILLORS OF
THE BOROUGH OF PADDINGTON.

MR. MAYOR AND GENTLEMEN,

I have the honour to submit to you my Annual Report for the year 1901, being the first dealing with the health and work of the Borough and the eighth I have presented since my appointment as Medical Officer of Health of the Parish of Paddington.

The preparation of the present report has involved an unusual amount of labour, in part on account of the addition of a portion of Chelsea Detached to the Borough and in part on account of the publication of the Census Report. With a view to making the comparison with previous years complete, the deaths and notifications recorded in (what is now) Queen's Park Ward during the ten years 1891-1900 have been extracted. Further, all rates for those years have been re-calculated on revised estimates of population based on the results of the last Census. Owing to changes in the clerical staff I have been unable to receive any assistance in this work.

It is satisfactory to be able to record that the general death-rate was lower last year than it has been for the past eleven years. The sickness returns were somewhat higher than those of 1900, owing to occurrence of small-pox and an outbreak of diphtheria in North-West Paddington. The returns were, however, below the decennial averages except those for the two diseases mentioned. Having regard to the general prevalence of small-pox in the Metropolis the small number of cases recorded (22) was satisfactory. The outbreak of diphtheria was spread chiefly through the schools, the greater proportion of the cases being among school children. It is very doubtful whether the examination of the drainage of the Queen's Park Estate had any effect on the prevalence of the disease.

With the fall in the birth-rate the question of infantile mortality becomes increasingly a matter of national import. Too much attention can scarcely be given to the question, and as a first step information should be obtained as to the mortality prevailing in the different Wards. This can only be obtained by having returns of the births in each Ward. Hitherto the returns have been (and are) limited to the Registration Sub-Districts, areas too large for the study of the subject.

At the present juncture the future work of your Public Health Department will be of prime interest to you. Before proceeding to deal with this matter I wish here to express my appreciation of the prompt action taken to supply the deficiencies in the staff of the Department to which I alluded in my last report. Relatively large as the increase has been, there is ample work for all members.

During the current year the work imposed by the Factory and Workshops Act, 1901, will absorb much time. The certification of underground bakehouses which must be complete prior to January 1st, 1904, will require each bakehouse to be visited and reported on. Supervision will then be requisite of necessary alterations whilst in progress. The conditions under which much of the bread supply of the Metropolis is prepared are at present not only unsatisfactory for the proper preparation of a most important foodstuff, but eminently prejudicial to the health of those engaged in such work.

The supervision of houses let in lodgings, as part of the great question of the housing of the people, will receive close attention. The census figures which I have briefly summarized in the first part of my Report show that an improvement has of late years taken place in the housing of the

residents of the Borough. The appointment of a "Housing Committee" justifies a belief that additional accommodation will be provided to meet the needs created by the efforts of the Department to reduce such overcrowding as still exists and to promote greater comfort in the homes of the poorer classes.

More attention will be given to the slaughter-houses, eating-houses, refreshment rooms, &c. An index (card system) is in compilation which will form a record of the occurrences of sickness and deaths and of other particulars in each house in the Borough.

The Department took possession of the temporary offices at Howley Lodge in May last. The accommodation has enabled me to organize the work of the Department more systematically, and will lead, I hope, to increased efficiency.

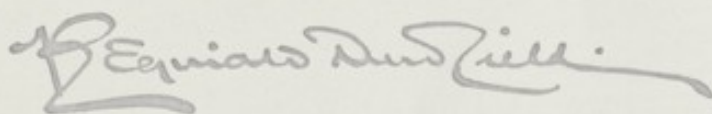
The Department sustained a severe loss in the death of Sir George D. Harris, J.P., &c., who had been for so many years the Chairman of the Sanitary (Public Health) Committee. He devoted himself untiringly to the discharge of his duties as Chairman, and personally my associations with him were particularly cordial and friendly.

My thanks are due to the present Chairman and Members of the Public Health Committee for their kindness and consideration, and to my *confrères* in the profession for their cordial support and assistance. The senior members of the Staff have done their work to my satisfaction during the past year, and some of them have had an exceptional amount of work to perform.

I have the honour to be,

Mr. Mayor and Gentlemen,

Your most obedient Servant,



M.A., M.B., D.P.H.,

Medical Officer of Health.

PUBLIC HEALTH DEPARTMENT,

PADDINGTON,

July, 1902.

THE BOROUGH.

The Metropolitan Borough of Paddington as constituted by the London Government Act, 1899, contains the old Parish of Paddington, with the following additions and deductions:—

Transferred to Paddington—

- (a) From Chelsea—so much of Kensal Town Registration Sub-District as lies North of the Towing Path of the Grand Junction Canal to the West of Wedlake Street, thence North of centre of Kensal Road, area 114 acres, population 17,181 persons.
- (b) From St. George's, Hanover Square—the burial ground abutting on the Bayswater Road and the houses adjacent thereto, area 5.6 acres, population 18 persons.
- (c) From Kensington—certain houses lying North and South of Westbourne Grove, along St. Luke's Road, Chepstow Place, &c., area 9.6 acres, population 918 persons.

Transferred from Paddington—

(a) To Kensington

- (i.) An area to the South of Kensal Road, bounded by that road and the G.W. Railway, area 4.5 acres, population 1,048 persons.
- (ii.) The houses on the west side of Ossington Street and so much of the old Parish as lay South of Bayswater Road and West of the Broad Walk, area 21.75 acres, population 421 persons.

The changes on the Western Border of the Parish were made for the purpose of rectifying the boundary line, so that the present line is now down the centres of roadways, not through houses, gardens, &c., as in the past.

The old Parish was co-terminous with the Poor Law Parish, the Parliamentary Borough and the Petty Sessional Division of Paddington. The Borough is co-terminous with the Poor Law Parish of Paddington, but includes part of the Parliamentary Division of Chelsea and of the Petty Sessional Division of Kensington, in addition to the Parliamentary Borough and Petty Sessional Division of Paddington.

The Parish was for Registration purposes divided into two Sub-Districts, St. Mary and St. John, the dividing line being the middle of Praed Street to Irongate Wharf Road, thence along the middle of the Grand Junction Canal to Bishop's Road Bridge, and thence along the middle of Bishop's Road and Westbourne Grove to the Western Boundary. The Borough contains three Registration Sub-Districts, viz., the two already mentioned, and North-West Paddington, which is that part of Chelsea Detached which has been transferred to the Borough. At the Census of 1891 the Parish was divided into four Wards, which at the middle of 1900, or just before the constitution of the Borough, had been increased to six, viz.:—

Harrow Road.	Church.
Maida Vale.	Lancaster Gate.
Westbourne.	Hyde Park.

The Borough is divided into eight Wards, viz.:—

Queen's Park.	Church.
Harrow Road.	Lancaster Gate West.
Maida Vale.	Lancaster Gate East.
Westbourne.	Hyde Park.

The present sub-divisions of the Borough cannot be regarded as finally settled, and before the next Census be taken (1911) it is likely that changes will be effected in the Parliamentary Division, in the Registration Sub-Districts, and in the Wards. It is unfortunate that the necessary adjustments could not be made at the time of the formation of the Borough, as the continuity of statistical records, much impaired by changes already made, will suffer still more in the future.

POPULATION.

The occurrence of the Decennial Census so soon after the formation of the Borough was a happy coincidence, as the changes in the boundaries had entirely dislocated all estimates of the population.

The population of the Borough on Sunday, March 31st, 1901, was found to comprise 143,976 persons. By adjusting the Census schedules of 1891, the population of the Borough (as at present constituted) in that year has been fixed at 135,955 persons, showing a growth amounting to 8,021 persons, or 5.9 per cent. of the population in 1891. In the Metropolis the rate of growth during the decennium 1891-1901 has been at the rate of 7.2 per cent.

For the purposes of comparison the vital statistics of the City of Westminster, of the Boroughs of Kensington, Marylebone, and Hampstead, and of the Urban District of Willesden will be used. These districts are immediately adjacent to this Borough, and the prevalence of disease therein and in Paddington cannot fail to be more or less interdependent. The changes in the populations of the districts mentioned during the past ten years have been as set out below:—

TABLE 1.

District.	POPULATION.		Increase (+) Decrease (—)	
	1891.	1901.	Per cent.	
City of Westminster	201,969	183,011	—	9.4
Royal Borough of Kensington..	170,071	176,628	+	3.8
Borough of Marylebone	144,083	133,301	—	7.4
„ Hampstead	68,126	81,942	+	20.2
Urban District of Willesden ..	61,265	114,815	+	87.4

Crude rates, in other words, rates calculated on the populations at all ages, without allowing for varying proportions of the two sexes and for the differences in the ages of the living, are of very little value for purposes of comparison. To set out the complete comparison of sex and age constitutions of the populations of the districts selected would be beyond the scope of this report. It will serve for present purposes to tabulate the proportions of females to males, and of those under ten years of age in each sex. The infantile rates will be calculated in each case on the number of births registered in each district.

TABLE 2.

	All ages.		Males to Females.		Under 10 years of age.		
	Males.	Females.			Males.	Females.	Persons.
	Percentage of total population.		(Males=100.)		Per cent. of total enumerated in each case.		
PADDINGTON..	42.8	57.2	133	..	19.42	14.73	16.74
Metropolis ..	47.2	52.8	111	..	21.85	19.63	20.68
Westminster ..	46.4	53.6	115	..	14.30	12.43	13.30
Kensington ..	39.1	60.9	155	..	19.66	12.81	15.49
Marylebone ..	43.4	56.6	130	..	17.68	13.83	15.50
Hampstead ..	38.7	61.3	158	..	19.22	12.73	15.24
Willesden ..	Data not yet available.						

From the foregoing figures it appears that while the ratio of females to males was as 111 is to 100 in the whole Metropolis, the ratio for Paddington was 133 to 100, being, however, exceeded by those for Kensington and Hampstead (155 and 158 respectively). A more extended examination of the figures for the Borough indicates that the excess of females prevails at all ages above one year, but is trifling up to the age of 15, when it rises from an excess of 7 per cent. for the age-group 10-15 years to 40 per cent. for the group 15-25 years. In the two remaining groups it is higher still, viz., 43 per cent. for the group 25-65 years and 87 per cent. for the group "over 65." Two factors are probably effective at the ages about 15 years, viz., an excess of female servants at ages ranging from 15 to 25 years and the survival of females at the higher ages. There is also probably some migration of young adult males to places where work is to be more readily obtained while others are absorbed into the Navy and Army.

In speaking of the ages of those enumerated it must suffice for the present to direct attention to the proportions at ages under 10 years. Of every 1,000 males enumerated 194 were under 10, and of every 1,000 females 147. In the Metropolis the corresponding figures were 218 and 196

respectively. The incidence of most of the infectious disease is markedly greater at these ages than at the higher, while, with the exception of the age-group under one year (which is included in the group 0-10 years), the mortality is, comparatively speaking, lighter. It is therefore to be anticipated that, other factors being equal, the sickness and mortality rates for the Borough should be lower than the corresponding rates for the Metropolis. On the other hand, the rates for the other districts mentioned may be expected to be even lower than those for the Borough.

DENSITY OF POPULATION.

The area of the Borough is 1,356 acres, including just on 20 acres of water (canals), making the nett area 1,336 acres. In the whole Borough the density of the population at the Census was at the rate of 107.7 persons per acre, compared with 95.1 per acre in 1891 in the old Parish. As compared with the Metropolis or any of the adjacent districts, the density of population in the Borough is high. Thus in the Metropolis the average is 61.3 persons per acre, and in Willesden 26.1. (See Table 3.)

TABLE 3.
DENSITY OF POPULATION.
(Calculated upon areas of districts as now constituted.)

				Nett Area.	Persons per acre.	
				Acres.	1891.	1901.
Metropolis	...	...	...	73,984	57.1	61.3
Kensington	...	...	...	2,287	74.3	77.2
Westminster	...	...	...	2,433	83.0	75.1
St. Marylebone	...	...	...	1,447	99.5	92.1
Hampstead	...	...	...	2,253	30.2	36.3
Willesden	...	...	...	4,384	13.9	26.1
PADDINGTON	..	...	...	1,336	101.7	107.7

In 1891 the density of population in St. Mary's Sub-District was at the rate of 105.8 persons per acre, and that in St. John's, 76.0. At the last Census the corresponding rates were 114.9 and 77.8 respectively, while that in the new Sub-District, North-West Paddington, was 154.7. In Table 4 will be found further details, in which the densities for the Wards have been included, as this question possesses greater interest when examined for small areas.

TABLE 4.
BOROUGH OF PADDINGTON.
DENSITY OF POPULATION.

Registration Sub-Districts.				Persons		Wards.—1901			
(As now constituted.)				per acre.					
				Area.*	1891.	1901.	Area.†		Persons per acre.
St. Mary	...	...	...	793	105.6	114.9	Queen's Park	...	150.7
St. John	...	...	...	432	78.2	77.8	Harrow Road	...	182.2
North-West Paddington	...	...	...	111	165.5	154.7	Maida Vale	...	68.5
							Westbourne	...	104.7
							Church	...	131.3
							Lancaster Gate (West)	120	70.4
							Lancaster Gate (East)	139	57.0
							Hyde Park	...	106.2

During 1900 certain information was collated with respect to three well-defined areas, particulars of which are here given :—

	Area.	Persons per acre.
North Wharf Area	15.8	194
Hall Park Area	9.2	425
Clarendon Street Area	15.3	480

* Area of inland waterways deducted in each case.

† No deduction for waterways.

The question of density cannot be considered without taking account of the open spaces included in the area. Neglecting the very considerable area of squares and gardens unoccupied by buildings, and the expanse of the Park and Kensington Gardens (67·5 acres of the latter are included in the Borough), the following are the approximate chief "lungs" of the Borough, all but the last being dedicated in perpetuity to the people:—

Burial Ground, Bayswater Road, containing 5·4 acres.	
Paddington Green	6·75 "
St. Mary's Churchyard... ..	25·5 "
Paddington Recreation Ground	70·9 "
Great Western Railway	

If these areas and that of the waterways be deducted, the population of the Borough may be said to be aggregated on an area equal to 1,160 acres, representing a density of 124·1 persons per acre.

HOUSE ACCOMMODATION.

In 1831 there were 13,221 inhabited houses in the Parish, each occupied on an average by 8·3 persons. At the last Census 17,684 inhabited houses were enumerated in the Borough, the average number of occupants being 8·3 per house.

During the last decennium a considerable change has been taking place in the housing of residents in the Metropolis. Areas formerly covered by small houses with gardens, some of considerable size, have been cleared, and the sites taken for blocks of flats with no more yard or garden space than is necessary to satisfy the requirements of the Building Act. For the purposes of the Census each block of flats has been counted as a single house, no matter how many tenements or flats it contains. It follows that the ratio of persons per house has not now the significance it had in 1891 or 1881. Moreover, the Registrar-General states that some confusion occurred when the Census of 1891 was taken, independent flats being enumerated by some of the officials as "houses," so that the comparison of the results obtained in 1891 and 1901 require to be received with some reserve. Having these points to consider, it has been thought inadvisable to do more than submit the following Table with but one comment; that is, to draw attention to the fact that the Census rule, in districts where flats are numerous, has the effect of (fictitiously) increasing the average number of residents per house, using that term in its ordinary sense.

TABLE 5.
PERSONS PER "HOUSE."
Calculated from returns adjusted for changes of boundaries.

		1891.	1901.
Metropolis		7·7	7·9
Kensington		7·5	7·9
Westminster		8·6	9·9
St. Marylebone		9·2	9·8
Hampstead		7·1	7·2
Willesden		7·5	7·1
PADDINGTON		7·9	8·1
Registration	St. Mary	8·9	9·3
Sub-Districts.	St. John	6·6	6·7
	North-West Paddington ...	6·8	6·3
	Queen's Park	6·8	6·3
	Harrow Road	?	10·0
	Maida Vale	?	8·6
	Westbourne	?	8·1
Wards	Church	?	10·2
	Lancaster Gate (West) ...	?	6·9
	Lancaster Gate (East) ...	?	6·7
	Hyde Park	?	6·4

OCCUPANCY OF HOMES.

Whilst the statistics of "inhabited houses" are not so accurate as could be wished, those of "homes" or tenements* appear to be otherwise. Each occupier of a separate home was required to state the number of rooms rented by him if his home contained less than five rooms. There may have been some doubt as to what should be included under the term "room," and possibly rooms utterly unsuited for habitation have been occasionally included. With this exception, the figures appear to be such as can be dealt with at some length with advantage.

In 1891 the 13,221 inhabited houses enumerated in the Parish contained 27,201 homes, of which 17,208 contained less than five rooms. In other words, 63·2 per cent. of the homes at that date contained from one to four rooms only. At the last Census the percentage of homes with less than five rooms was 64·8. It cannot be definitely stated, but it is probable that this increase (1·6 per cent.) is due to the addition of Queen's Park Ward.†

In 1891 there resided in the 17,208 homes of less than five rooms 58,098 persons, equal to 50·7 per cent. of the total population. In 1901 the percentage was 49·1, a reduction of 1·6 per cent.

The chief returns for each class of home were as follow :—

Homes of	{ 1891	No. of homes, 4,785	No. of inhabitants, 9,676=	8·2 per cent. total population.
one room	{ 1901	" 5,035	" 9,233=	6·4 " "
Homes of	{ 1891	" 5,537	" 19,589=	16·6 " "
two rooms	{ 1901	" 6,668	" 22,596=	15·6 " "
Homes of	{ 1891	" 4,858	" 19,009=	16·1 " "
three rooms	{ 1901	" 6,548	" 24,933=	17·3 " "
Homes of	{ 1891	" 2,028	" 9,824=	8·3 " "
four rooms	{ 1901	" 3,564	" 16,470=	11·3 " "

There were therefore slight, but so far satisfactory, reductions in the proportions of the inhabitants residing in homes of one and two rooms, and increases in those of the inhabitants residing in homes of three and four rooms. How these results have been obtained cannot be stated until details have been procured as to the Sub-Districts and Wards.

Moreover, not only have there been these changes in the proportions residing in each class of home, but there have been reductions in the average numbers residing in each home. This will be evident from a perusal of the following statement :—

Homes of	{ 1891.	Average No. of inhabitants per home	2·02	per room	2·02
one room	{ 1901.	" "	1·83	" "	1·83
Homes of	{ 1891.	" "	3·53	" "	1·76
two rooms	{ 1901.	" "	3·38	" "	1·69
Homes of	{ 1891.	" "	3·91	" "	1·30
three rooms	{ 1901.	" "	3·80	" "	1·26
Homes of	{ 1891.	" "	4·84	" "	1·21
four rooms	{ 1901.	" "	4·62	" "	1·15

In Table 6 will be found the percentages (in 1891 and 1901) occupying the various tenements and the average number of occupants per home in each of the districts selected for comparison, except Willesden, the data for which are not yet published.

* The term "home" will be used in lieu of "tenement" employed by the Census Office.

† The returns for the sub-divisions of the Borough have not yet been obtained. It may, however, be pointed out that the 2,706 inhabited houses (averaging probably 5 rooms per house) in Queen's Park Ward contained 4,037 homes, an average of 1·5 homes in 10 houses.

TABLE 6.

Homes containing		Percentage total population residing therein.						Average number of occupants per home of each class.					
		Metropolis.	Kensington.	Westminster.	Marylebone.	Hampstead.	PADDINGTON	Metropolis.	Kensington.	Westminster.	Marylebone.	Hampstead.	PADDINGTON
One room	{ 1891 ..	9.1	8.2	..	17.6	2.7	8.2	2.2	2.1	..	2.2	1.7	2.0
	{ 1901 ..	6.7	6.4	7.6	12.3	2.2	6.4	2.0	1.9	1.8	1.9	1.6	1.8
Two rooms	{ 1891 ..	16.4	15.6	..	23.5	9.7	16.6	3.6	3.7	..	3.7	3.6	3.5
	{ 1901 ..	15.4	15.7	16.5	22.1	8.8	15.6	3.4	3.5	3.1	3.5	3.1	3.4
Three rooms	{ 1891 ..	13.4	10.8	..	11.9	9.8	16.1	4.3	4.4	..	4.3	4.2	3.9
	{ 1901 ..	16.5	11.4	13.5	13.3	10.7	17.3	4.1	4.2	3.9	4.2	3.7	3.8
Four rooms	{ 1891 ..	14.0	7.7	..	6.6	6.2	8.3	5.1	5.0	..	4.8	4.9	4.8
	{ 1901 ..	15.2	8.0	7.9	7.8	7.8	11.3	4.9	4.9	4.5	4.7	4.5	4.6
More than four rooms	{ 1891 ..	..	..	..	..	..	50.7	6.0	6.0	..	6.4	6.2	5.9
	{ 1901 ..	..	..	..	..	..	49.1	6.0	5.9	6.8	6.8	5.8	5.9

Figures for Westminster, 1891, not known; for Willesden, 1901, not yet published.

OVERCROWDING.

Tenements or Homes.—In his Report dealing with the Census of 1891 the Registrar-General adopted an average of two persons per room as the limit permissible for occupation without overcrowding. The standard takes no cognisance of ages of occupants or sizes of rooms, data which the Registrar-General could not obtain. The standard mentioned is that now used for all discussions as to theoretical overcrowding.

It may be of interest to give some idea of the actual relationship between overcrowding as measured by the Registrar-General's standard of two persons per room, and that determined by actual measurements in combination with an allowance for age. In the latter case the allowances of cubic space prescribed by the Borough Bye-laws for Houses let in Lodgings have been adopted, viz.:—

400 cubic feet for each adult, or person aged 10 years and upwards.
200 " child, " under 10 years.

In the autumn of 1901 an inquiry was made in a definite area of the Borough as to population and "housing." It was found that the area contained

7,283 persons (including 2,334 under 10 years of age) residing in 459 houses, containing 1,903 homes.

The actual distribution in the homes was as follows:—

1,556 persons in homes of one room.
3,931 " two rooms.
1,102 " three "
395 " four "
54 " five or more rooms.

According to the Registrar-General's standard, the overcrowding was equal to 56 per cent. of the persons living in homes of less than five rooms, whereas on the standard prescribed by the Bye-laws the percentage was approximately 17 (16.8). In other words, with a population containing 32 per cent. of children under 10 years of age, living in houses of average dimensions, the legal overcrowding was about 28 per cent. of the theoretical.

Measured by the standard of the Registrar-General, it appears that 3,496 homes (out of a total of 27,201 homes of all classes) were overcrowded in 1891, as compared with 3,404 (out of a total of

33,661) in 1901. The percentages of homes overcrowded were 12·8 and 10·1 respectively. The standard can only be applied to homes containing not more than four rooms. In 1891 these numbered 17,208, of which 20·3 per cent. were overcrowded, while in 1901 these homes had risen to a total of 21,815, of which 15·6 per cent. were overcrowded. These results again indicate a slight, but so far satisfactory, improvement in the conditions of housing.

Dealing with each class of home, it appears that reductions took place in each group, as will be seen from the following statement:—

Homes of one room.			Percentage overcrowded		
	Counted.	Overcrowded.	Of homes of this class.	Of all homes.	
1891	4,785	1,239	25·8	4·5	
1901	5,035	1,035	20·5	3·0	
Homes of two rooms.			Percentage overcrowded		
	Counted.	Overcrowded.	Of homes of this class.	Of all homes.	
1891	5,537	1,582	28·5	5·7	
1901	6,668	1,585	23·7	4·7	
Homes of three rooms.			Percentage overcrowded		
	Counted.	Overcrowded.	Of homes of this class.	Of all homes.	
1891	4,858	531	10·9	1·9	
1901	6,548	607	9·2	1·8	
Homes of four rooms.			Percentage overcrowded		
	Counted.	Overcrowded.	Of homes of this class.	Of all homes.	
1891	2,028	144	7·1	0·5	
1901	3,564	177	4·9	0·5	

In the appended Table a comparison is instituted between the percentages of each group noted in the selected districts. The ratios for Hampstead suggest that the homes have not been counted on the same rule as the two enumerations.

TABLE 7.
OVERCROWDING—TENEMENTS.
Percentage of each class overcrowded.

No. of rooms in home.	Census of.	Metropolis.	Kensington.	Westminster.	Marylebone.	Hampstead.	PADDINGTON.
1	1891	32·8	29·6	..	31·7	28·3	25·8
	1901	27·2	25·0	21·1	24·6	16·1	20·5
2	1891	28·9	31·7	..	31·6	30·0	28·5
	1901	25·4	28·3	19·1	28·4	18·1	23·7
3	1891	16·0	17·6	..	17·0	15·5	10·9
	1901	13·2	16·6	11·6	15·2	8·7	9·2
4	1891	8·1	8·6	..	8·4	7·1	7·1
	1901	6·9	7·0	8·3	7·8	4·2	4·9
All homes of less than 5 rooms.	1891	23·3	25·2	..	27·7	21·9	20·3
	1901	18·7	20·9	16·2	22·5	12·1	15·6

Persons.—At the Census of 1891, 19,820 persons were living in overcrowded homes, as compared with 19,531 in 1901; in other words, 16·7 per cent. of the total inhabitants were so housed in 1891, against 13·5 per cent. in 1901, a reduction of 3·2 per cent. If the figures be considered in relation to the numbers living in homes of less than five rooms, it is found that the percentage overcrowded in 1891 was 41·5, and in 1901 27·6, a reduction of 13·9 per cent.

In homes of one room.

4,636 persons were overcrowded in 1891, equal to 47·9 per cent. of the persons living in such homes.

3,694 do. do. 1901, do. 40·0 do. do.

In homes of two rooms.

9,597 persons were overcrowded in 1891, do. 48·9 do. do.

9,406 do. do. 1901, do. 41·6 do. do.

In homes of three rooms.

4,192 persons were overcrowded in 1891, do. 22·0 do. do.

4,695 do. do. 1901, do. 18·8 do. do.

In homes of four rooms.

1,395 persons were overcrowded in 1891, do. 14·1 do. do.

1,736 do. do. 1901, do. 10·5 do. do.

The corresponding returns for the selected districts are set out in Table 8.

TABLE 8.

OVERCROWDING—PERSONS.

Percentage of residents in each class of home overcrowded.

No. of rooms in home.	Census of.	Metropolis.	Kensington.	Westminster.	Marylebone.	Hampstead.	PADDINGTON.
1	1891	55·3	52·4	..	54·7	61·2	47·9
	1901	48·4	45·3	41·3	45·2	33·7	40·0
2	1891	48·0	52·0	..	52·6	50·2	48·9
	1901	42·3	47·2	35·3	46·9	33·9	41·6
3	1891	29·0	31·8	..	31·1	29·1	22·0
	1901	24·9	29·6	22·7	28·6	18·1	18·8
4	1891	15·5	16·7	..	17·1	13·8	14·1
	1901	13·5	13·7	11·5	16·0	9·1	10·5
All homes of less than 5 rooms.	1891	35·6	40·5	..	44·7	36·1	41·5
	1901	29·6	35·5	28·5	37·9	21·6	27·6

With the exception of Hampstead, the statistics of which would appear to have been framed on different rules in 1891 to those adopted in 1901, the ratios of the Borough are the lowest of the series, the proportion of overcrowded in *homes of two rooms* in 1891 being the only exception.

ESTIMATED POPULATION.

For the purposes of annual statistics an annual estimate has to be made. Unfortunately, the data already obtained are insufficient to calculate the estimates on the rule adopted in previous

reports. It has, therefore, been deemed advisable on this occasion to simply state that the population of the Borough at the middle of 1901 has been estimated at 144,188 persons.

TABLE IX.

Estimates of Population of Borough.

<i>Registration Sub-Districts.</i>				<i>Persons.</i>			
St. Mary	...	...	...	93,424	{ Males ...	...	41,536
					{ Females	...	51,888
St. John	...	...	...	33,612	{ Males ...	...	11,586
					{ Females	...	22,026
North-West Paddington	...	...	...	17,152	{ Males ...	...	8,597
					{ Females	...	8,555
<i>Wards.</i>							
Queen's Park...	...	...	...	17,152			
Harrow Road	...	...	...	27,745			
Maida Vale	...	...	...	18,763			
Westbourne	...	...	...	23,819			
Church	...	...	...	26,335			
Lancaster Gate (West)	...	...	...	8,473			
Lancaster Gate (East)	...	...	...	7,952			
Hyde Park	...	...	...	13,949			

On a future occasion it will be possible to include the numbers estimated living in each age-sex-group in each of the above Districts and in the Wards.

The estimate of the population of the old Parish at the middle of 1900, based on the data obtained at the Census of 1891 and the enumeration of 1896, amounted to 130,596 persons. Re-calculating the estimate for that year on the data afforded by the last Census, the estimate becomes 126,004 persons, showing a total error of 4,592 persons, equal to 3·6 per cent. Using the estimate then available, the birth-rate for 1900 was calculated to be 22·13 per 1,000 persons, whereas on the re-calculated rate, it was found to be 22·93 or 0·80 higher, not a very great divergence.

BIRTHS.

During the year 3,359 births were registered in the Borough, equivalent to an annual rate of 23·29 per 1,000 of the population estimated living at the middle of the year. Of the 3,359 children born, 1,748 were boys and 1,611 girls, the corresponding rates being 13·12 and 11·17 respectively. In St. Mary's Registration Sub-District 2,536 births were registered, equal to a rate of 27·14, 1,315 of the infants being boys and 1,221 girls. In St. John, the total births were 389 (the birth-rate being 11·57), 204 of boys and 185 of girls. In North-West Paddington the corresponding figures were 434 total births (rate 25·30), 229 of boys and 205 of girls. (See Table 10.)

Comparison with previous years is almost valueless as applied to the whole area. In Table 11 the rates for the years 1891-1900 are given for the old Parish and its two Registration Sub-Districts. The latter are strictly comparable. In St. Mary the birth-rate last year (27·14) was 1·32 per 1,000 below the decennial mean (28·46) and in St. John the reduction amounted to 1·55 per 1,000. The mean rate for the whole area was 24·24 for the ten years, or 0·95 above the rate for last year (23·29). The disparity in the declines indicated is undoubtedly due to the influence of North-West Paddington, where the rate last year was the highest in the Borough.

TABLE 10.
Births and Birth-rates.

				Registration Sub-Districts.											
				Paddington.			St. Mary.			St. John.			North-West Paddington.		
Males.	Females.	Both Sexes.	Males.	Females.	Both Sexes.	Males.	Females.	Both Sexes.	Males.	Females.	Both Sexes.				
1st Quarter	464	422	886	356	329	685	47	53	100	61	40	101			
2nd "	407	411	818	285	299	584	60	48	108	62	64	126			
3rd "	464	386	850	352	292	644	51	43	94	61	51	112			
4th "	413	392	805	322	301	623	46	41	87	45	50	95			
Year	1,748	1,611	3,359	1,315	1,221	2,536	204	185	389	229	205	434			
Birth-rates, *1901 ..	12.12	11.17	23.29	14.07	13.07	27.14	6.07	5.50	11.57	13.35	11.95	25.30			
Mean rates, 1896-1900	12.01	11.29	23.30	13.92	13.22	27.15	6.62	5.82	12.44	?	?	?			
Birth-rates (Old Parish)	1900 ..	11.18	10.95	22.13	12.89	12.59	25.48	6.17	6.14	12.31	?	?	?		
	1899 ..	11.77	10.98	22.76	13.84	12.84	26.68	5.86	5.65	11.52	?	?	?		
	1898 ..	11.85	11.37	23.22	13.72	13.41	27.14	6.55	5.62	12.17	?	?	?		
	1897 ..	11.97	11.86	23.84	13.96	13.90	27.86	6.45	6.21	12.66	?	?	?		
	1896 ..	13.30	11.27	24.57	15.21	13.38	28.60	8.09	5.49	13.58	?	?	?		

TABLE 11.
Births and Birth-rates, 1891-1901.

Year.	Registration Sub-Districts.								Birth-rates.†	
	Paddington.		St. Mary.		St. John.		North-West.		England and Wales.	London.
	Regd.	Rates. †	Regd.	Rates. †	Regd.	Rates. †	Regd.	Rates.		
1891	2,952	25.0	2,420	28.7	532	15.8	Information not available.		31.4	31.9
1892	2,934	24.7	2,456	28.8	478	14.2			30.5	31.0
1893	3,011	25.1	2,567	29.7	444	13.2			30.8	30.9
1894	2,834	23.5	2,423	27.9	411	12.2			29.6	30.3
1895	2,979	24.5	2,526	28.7	453	13.5			30.4	30.6
1896	3,068	25.0	2,613	29.4	455	13.6			29.7	30.2
1897	3,010	24.4	2,586	28.7	424	12.7			29.7	30.1
1898	2,965	23.8	2,558	28.1	407	12.2			29.4	29.5
1899	2,940	23.6	2,555	27.9	385	11.5			29.3	29.4
1900	2,890	22.8	2,479	26.7	411	12.3			28.9	28.9
Averages 1891-1900 } ...	2,958	24.24	2,518	28.46	440	13.12			30.0	30.3
1901	3,359	23.29	2,536	27.14	389	11.57	434	25.30	28.5	29.0

* Rates per 1,000 persons of all ages.

† Rates for 1891-1900 re-calculated on basis of new Census.

‡ Rates not re-calculated.

A comparison of the rates for 1896-1900 given in Table 10 with the corresponding rates in Table 11 will indicate the error introduced in over-estimating the population during the latter half of the intercensal period. As an example attention may be called to the rates for 1900. On the estimated population calculated for that year (130,596) the birth-rates for the Parish and the two Sub-Districts were stated to have been 22·13 (22·1), 25·48 (25·5), and 12·31 (12·3) respectively, whilst the rates obtained by revising the estimate of the population, which has been found to be 126,477, the rates become 22·8, 26·7, and 12·3 respectively.

Of the 3,359 children whose births were registered during the year, 3,226 were legitimate and 133 illegitimate. The complete returns are appended.

TABLE 12.
ILLEGITIMATE BIRTHS.
1901.

	Paddington.	St. Mary.	St. John.	North-West Paddington.
Males	71	66	1	4
Females	62	56	1	5
Total	133	122	2	9
Per cent. of all births ..	3·9	4·8	0·5	2·0

The illegitimate birth-rate was 0·92 per 1,000, or 0·14 below the mean; and the legitimate 22·4, or 0·7 below the mean. The ratio of illegitimate births to legitimate was last year 4·12 in 100, as compared with a mean of 4·59 in 100 for the decennium 1891-1900. (*See also* Table 13.)

TABLE 13.
Illegitimate Births and Birth-rates.

Year.	Births Registered.			Birth-rates per 1,000 of Population.*			Illegitimate Births per 100 Legitimate.
	Legitimate.	Illegitimate.	Total.	Legitimate.	Illegitimate.	Total.	
1891 ...	2,807	145	2,952	23·7	1·22	25·0	4·91
1892 ...	2,792	142	2,934	23·5	1·19	24·7	4·77
1893 ...	2,885	126	3,011	24·0	1·05	25·1	4·18
1894 ...	2,686	148	2,834	22·2	1·22	23·5	5·22
1895 ...	2,854	125	2,979	23·4	1·02	24·5	4·19
1896 ...	2,949	119	3,068	24·0	0·97	25·0	4·03
1897 ...	2,903	107	3,010	23·5	0·87	24·4	3·68
1898 ...	2,844	121	2,965	22·8	0·97	23·8	4·25
1899 ...	2,811	129	2,940	22·5	1·03	23·6	4·58
1900 ...	2,752	138	2,890	21·7	1·09	22·7	5·01
Averages 1891-1900 }	2,828	130	2,958	23·1	1·06	24·2	4·59
1901 ...	3,226	133	3,359	22·4	0·92	23·3	4·12

* Re-calculated.

NOTE.—The figures for 1891-1900 refer to the Old Parish, those for 1901 to the New Borough.

These rates, again, are not strictly comparable, as last year's rate includes the returns for Queen's Park Ward, where the birth-rate was relatively higher than the average rate for the old Parish and the proportion of illegitimate children lower.

Hitherto no information has been furnished as to the home addresses of the children born. Consequently it is impossible to give any indications of the birth-rates for the several Wards. It is desirable that such information should be available, more especially if any efforts are to be made to reduce the prevailing infantile mortality.

VACCINATION.

The vaccination returns have been continued down to the end of 1900, the last year for which a complete return is available. There was a slight increase in the proportion of children vaccinated, the proportion escaping vaccination falling from 14.6 in 1899 to 13.4 in 1900. The proportion remaining unvaccinated at the end of the first half of 1900 was equivalent to 16.6 per cent. of the children born during the half year. In the first half of 1901 the proportion was, as regards St. Mary and St. John Sub-Districts, 10.1 per cent.—a satisfactory diminution. The complete returns for the three Registration Sub-Districts are given in Table 14. The total number of primary

TABLE 14.

Vaccination Returns, 1881-1900.

(Compiled each year from information supplied by the Vaccination Officer.)

Year.	Births.	Successfully vaccinated.	Insusceptible of vaccination.	Had Small-pox.	Died unvaccinated.	Vaccination postponed.	Remaining (not traced, &c., &c.)*	Children not accounted for (including postponed cases) % of births.	
1881	...	2,845	2,415	8	...	203	7	212	7.7
1882	...	2,897	2,411	8	...	212	17	249	9.2
1883	...	2,873	2,381	7	...	231	16	238	8.8
1884	...	2,955	2,460	13	...	239	43	200	8.2
1885	...	3,019	2,489	12	...	252	38	228	8.8
1886	...	2,923	2,409	7	...	213	26	268	10.1
1887	...	2,915	2,440	11	...	220	40	204	8.4
1888	...	2,855	2,293	22	...	216	38	286	11.3
1889	...	2,870	2,275	7	...	223	68	297	12.7
1890	...	2,845	2,255	7	...	254	29	300	11.6
1891	...	2,968	2,172	16	...	254	32	494	17.7
1892	...	2,957	2,374	7	...	202	16	358	12.6
1893	...	3,015	2,421	27	...	265	10	292	10.0
1894	...	2,853	2,369	24	...	203	21	236	8.2
1895	...	2,986	2,378	24	...	302	21	261	8.8
1896	...	3,042	2,443	28	...	286	11	274	9.0
1897	...	3,039	2,461	10	...	262	31	275	10.0
1898	...	2,966	2,223	16	...	290	34	403	14.7
1899	...	2,933	2,167	17	...	319	47	383	14.6
1900	...	2,903	2,196	8	...	309	39	351	13.4
January to June, 1901									
St. Mary	1,263	929	2	...	111	74	147	17.4	
St. John	209	169	...	...	10	4	26	14.3	
North-West Paddington	126	97	...	...	13	3	13	12.6	

* Gone away, false addresses, "unaccounted for."

vaccinations performed in the Borough during 1900 was 2,300, and in 1901 3,029; but that total does not include a number of children who, born during the last four or five months of 1901, will come into the supplementary return for the year, which will be issued after the middle of this year. The provisional return for 1901, as given in the Vaccination Officer's Report for 1901, is as follows, which also gives the corresponding figures for 1900:—

	1900.	1901.
Certificates of successful vaccination (primary)	2,300	3,029
Vaccination postponed	942	756
Certificates of "conscientious objection"	35	39
Removals	204	163
False addresses given when registering births	121	90

The Public Vaccinator for Old Paddington (St. Mary and St. John Registered Sub-Districts), in his Report for the year, states that he performed 1,688 primary vaccinations, 412 of the persons so vaccinated being over one year of age. He also performed 2,595 re-vaccinations, as compared with 36 in 1900. The Public Vaccinator for North-West Paddington performed 257 vaccinations and re-vaccinations during the nine months, April to December.

SICKNESS.

The cases of infectious disease recorded in the Borough during 1901 numbered 1,111, being 376 in excess of the returns for 1900 (735), obtained by adding the notifications for the new area to those for the old Parish. If the figures for 1901 be adjusted to the old area, the total would be 940 compared with a total of 648 in 1900, showing an increase of 292, or 45 per cent. (approximately). The notifications in the Metropolis totalled 40,444 in 1901, compared with 35,335 in 1900, an increase of 15 per cent. (approximately).

As appears from Table 15, there were increases in all diseases, except continued fever,* the greatest increases being noted in the cases of diphtheria (increase 167 cases), scarlet fever (increase 165 cases), and enteric fever (increase 26 cases). In the Metropolis the greatest increase was that in the number of cases of scarlet fever (4,602 cases), that of small-pox (1,617 cases) coming next, while there was a notable diminution, amounting to 1,112 cases, in the recorded cases of enteric fever.

The notifications recorded in the adjacent districts during the year are given in Table 16, from which it appears that with the exception of Willesden, where the rate was 9·37 per 1,000, the total notification rate (7·70) for the Borough was the highest of the six, that of Marylebone (7·54) being, however, but little less. The changes which have been effected in some of the areas render comparisons with former years almost valueless, unless a considerable amount of time and labour be devoted to adjusting the various returns to the new boundaries.

A comparison of the returns from the three Registration Sub-Districts forming the Borough during 1901 with the averages for the preceding decennium has been thought preferable to one limited to the whole area. This has been done in Table 17.

St. Mary's Sub-District.—The notifications of small-pox (increase 7 cases) and of enteric fever (increase 17 cases), during 1901 were the exceptions to the general decrease from the averages. The decrease of 20 cases in the notifications of diphtheria was, under the circumstances, specially satisfactory.

St. John's Sub-District.—The cases of small-pox (increase 2) and of diphtheria (increase 4) were the exceptions to the general decline.

North-West Paddington.—The notifications of diphtheria were 58 in excess of the average, those of enteric fever 2 in excess, but of all other diseases below the respective averages.

Metropolis.—There was an increased prevalence of small-pox (1,092 increase), of diphtheria

*The notifications of typhus fever in 1900 may be ignored, as an error of diagnosis was made in each instance.

TABLE 15.
Notifications, 1900 and 1901.

Disease.				Paddington.*			London.		
				1901.	1900.	Increase (+) Decrease(-)	1901.	1900.	Increase (+) Decrease(-)
Small-pox				22	5	+ 17	1,706	89	+ 1,617
Cholera .. ..				..	..	..	3	5	- 2
Diphtheria				338	171	+ 167	11,976	11,799	+ 177
Membranous Croup ..				5	5	+ 0	189	210	- 21
Erysipelas				141	139	+ 2	4,626	4,781	- 155
Fevers.	{	Scarlet	503	338	+ 165	18,421	13,819	+ 4,602	
		Typhus .. ..	..	2	- 2	21	7	+ 14	
		Enteric	92	66	+ 26	3,202	4,314	- 1,112	
		Relapsing .. ..	..	..	..	..	..	..
		Continued .. ..	..	3	- 3	49	73	- 24	
		Puerperal	10	6	+ 4	251	238	+ 13	
Totals				1,111	735	+ 376	40,444	35,335	+ 5,109

* For present area in both cases.

TABLE 16.
Notifications, 1901.

	Population, 1901.	Small-pox.	Cholera.	Diphtheria.	Membr. Croup.	Erysipelas.	Fevers.						Totals.
							Scarlet.	Typhus.	Enteric.	Relapsing.	Continued.	Puerperal.	
PADDINGTON ..	144,188	22	..	338	5	141	503	..	92	..	..	10	1,111
		<i>0.15</i>	..	<i>2.34</i>	<i>0.03</i>	<i>0.98</i>	<i>3.49</i>	..	<i>0.64</i>	..	..	<i>0.07</i>	<i>7.70</i>
Kensington ..	176,787	15	..	250	9	165	477	2	99	..	8	10	1,035
		<i>0.08</i>	..	<i>1.42</i>	<i>0.05</i>	<i>0.93</i>	<i>2.70</i>	<i>0.01</i>	<i>0.56</i>	..	<i>0.04</i>	<i>0.06</i>	<i>5.85</i>
Westminster ..	182,502	101	..	253	2	117	482	..	106	..	2	6	1,069
		<i>0.55</i>	..	<i>1.38</i>	<i>0.01</i>	<i>0.64</i>	<i>2.69</i>	..	<i>0.58</i>	..	<i>0.01</i>	<i>0.03</i>	<i>5.85</i>
Marylebone ..	133,060	79	..	257	1	184	397	..	82	..	..	4	1,004
		<i>0.59</i>	..	<i>1.93</i>	<i>0.01</i>	<i>1.38</i>	<i>2.98</i>	..	<i>0.62</i>	..	..	<i>0.03</i>	<i>7.54</i>
Hampstead ..	82,287	7	..	151	2	50	219	..	51	..	1	4	485
		<i>0.08</i>	..	<i>1.84</i>	<i>0.02</i>	<i>0.61</i>	<i>2.66</i>	..	<i>0.62</i>	..	<i>0.01</i>	<i>0.05</i>	<i>5.89</i>
Willesden ..	116,632	8	..	395	5	80	548	..	56	..	..	1	1,093
		<i>0.07</i>	..	<i>3.39</i>	<i>0.04</i>	<i>0.68</i>	<i>4.70</i>	..	<i>0.48</i>	..	..	<i>0.01</i>	<i>9.37</i>

Notification Rates per 1,000 persons indicated in italic figures.

TABLE 17.
Notifications, 1901.

Disease.		Registration Sub-Districts.						London.		Sickness Rates, 1901.	
		St. Mary.		St. John.		N.-W. Paddington.					
		1901.	Dep. from Average. *	1901.	Dep. from Average. *	1901.	Dep. from Average. *	1901.	Dep. from Average. *	Pad- dington.	London.
Small-pox	18	+7	4	+2	..	-1	1,706	+1,092	0.15	0.38	
Cholera .. ..	..	..	..	-0	..	..	3	-28	..	0.00	
Diphtheria.. ..	192	-20	40	+4	106	+58	11,976	+635	2.34	2.64	
Membranous Croup	4	-2	..	-0	1	+0	189	-262	0.03	0.04	
Erysipelas	111	-11	15	-6	15	-4	4,626	-1,598	0.98	1.02	
Fevers. <div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Scarlet	394	+1	71	-9	38	-47	18,421	-3,123	3.49	4.05
	Typhus .. ..	..	-0	..	-0	..	..	21	+6	..	0.00
	Enteric	70	+17	12	-2	10	+2	3,202	-320	0.64	0.70
	Relapsing .. ..	..	-0	..	..	..	..	..	-6	..	..
	Continued .. ..	..	-2	..	-0	..	..	49	-67	..	0.01
	Puerperal	9	+1	..	-0	1	+0	251	-35	0.07	0.05
Totals	798	-9	142	-11	171	+8	40,444	-3,706	7.70	8.86	

* Decennial average in each case corrected for change in population and adjusted to nearest whole number.

TABLE 18.
Notifications, 1901.

Ages.	Small-pox.		Diphtheria.		Membranous Croup.		Erysipelas.		Fevers.					
									Scarlet.		Enteric.		Puerperal.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	F.	
0-1 .. ..	..	..	2	2	..	2	1	3	6	3	..	1	..	
1- .. ..	..	1	9	6	..	..	1	1	2	7	..	..	..
2- .. ..	..	..	15	11	2	1	..	1	18	14	1	..	..
3-	1	1	9	24	..	..	2	1	26	26	..	1	..	
4- .. ..	..	..	20	23	..	..	..	1	17	24	..	..	..
5-	1	1	83	80	..	..	3	7	108	143	6	1	..	
13- .. ..	..	..	3	4	..	..	2	2	15	11	7	2	..	
15-	2	4	8	17	..	..	6	12	24	34	16	21	1	
25-	8	3	7	14	..	..	33	50	11	14	22	13	9	
65 and over ..	..	..	..	1	..	..	6	9	..	..	..	1	..	
Totals	12	10	156	182	2	3	54	87	227	276	52	40	10	

(635 increase), and of typhus fever (6 increase). The other diseases were below their averages, notably scarlet fever (3,123 cases fewer), and erysipelas (1,598 cases fewer).

The sickness-rates for the various diseases during 1901 are given in the same table (Table 17) for the Borough and the Metropolis. With the exception of puerperal fever (Paddington rate 0·07, Metropolis, 0·05), the local rates were under those for the Metropolis. The total rate for the Borough (7·70 per 1,000) was 1·16 below the Metropolitan rate (8·86).

Table 18 shows the sex-age incidence of the diseases, and the number of cases of each disease from each ward will be found in Table 19 (page 31). The highest ward rate was that of Harrow Road Ward (9·39), those of Queen's Park (9·36), and of Church Ward (9·11) being very near thereto. The lowest rate was that of Lancaster Gate West Ward (3·54). The rates for the individual diseases will be dealt with later on.

SMALL-POX.

		Paddington.	London.
Cases notified, 1901	.. .. .	22	1,706
Annual average number, 1891-1900	.. .. .	14	614
Case rate, 1901*	.. .. .	0·15	0·38

The 22 cases recorded were 17 in excess of the number recorded in 1900, and 8 in excess of the decennial average. The cases reported from the Registration Sub-Districts were:—

Registration Sub-District.	1901.	Averages. 1891-95.	1896-00.	1891-1900.
St. Mary	18	22	1	11
St. John	4	3	1	2
North-West Paddington	—	2	—	1

The actual numbers of cases in each of the years 1891-1901 will be found in Table III. in the Appendix (page 66).

In the Metropolis 1,706 cases were recorded last year, being 1,617 more than the number recorded in 1900 (89), and 1,146 in excess of the decennial average (614). In the first quinquennium, 1891-95, the average was 1,208, and in the second, 1896-1900, 104. The number of cases recorded last year (1,706) has only been exceeded once, viz., in 1893, when 2,813 cases were recorded. The smallest number of cases recorded in any year has been 29, recorded in 1899.

The sickness-rates for this disease based on the notifications, as received, were 0·15 and 0·38 per 1,000 persons for the Borough and Metropolis respectively.

In the adjacent districts, the recorded cases exceeded the number reported in the Borough, in Westminster (101), and Marylebone (79), the corresponding sickness-rates being 0·55 and 0·59 respectively. (See Table 16.)

The time has not yet arrived to write the history of the outbreak which threatens to be the largest since the memorable epidemic of 1871-72. On this occasion it must suffice to record brief particulars of the cases reported, and the action taken to limit the spread of the disease.

Having regard to the comparative rarity of small-pox during the past years, it is to be expected that many practitioners would have difficulty in recognizing the disease, some of whom had (and probably still have) not seen a case. The text-book descriptions are of little use in the diagnosis of the more important varieties—namely, those modified by vaccination.

Of the 22 reported cases, 7 were erroneously diagnosed, most of the latter being cases of chicken-pox—a disease which was widely prevalent during the latter half of the year. To mistake chicken-pox for small-pox is a triviality, the reverse an accident which has led to very serious consequences. Included in the 7 cases is one which is worth a brief note:—

On 17th December, a man, aged 40, was found in the Casual Wards with a scanty eruption on the face. There was an indefinite history of slight illness for some three days prior to the

* All rates, except when otherwise stated, are per 1,000 persons estimated living at the middle of 1901.

appearance of the eruption. The characters of the eruption were those of small-pox. The man was removed to the South Wharf Shelters (Metropolitan Asylums Board), and there detained three days, at the end of which period he was returned to the Workhouse. Unfortunately he was not sent back to the Casual Wards, but allowed to leave the ambulance at the Workhouse gate. He at once disappeared, and was not seen again.

In the 15 genuine cases the illness commenced:—

In June, July, August, September, and October, 1 case each.

In November, 6 cases.

In December, 4 cases.

One patient, a man aged 25, had never been vaccinated (see *Case No. 4 below*); and another, a girl aged 15, was not vaccinated until she had sickened with her illness. (*Case No. 11.*)

The histories of the cases, as obtained from inquiries made by the Staff of Department, are here briefly recorded.

Case No. 1—A. I., f., 24 years. Onset 10th July; rash out 13th July; to hospital 14th July. Patient vaccinated in infancy only; one good mark.

The origin of this case was not traced. Patient was a housekeeper in a private family.

E. K., f., 38 years, domestic servant. Removed to hospital 12th July.

E. C., m., age and occupation unknown. Removed to hospital 9th July.

These two cases were removed from St. Marylebone. E. K. had been in service for five days prior to 29th June in the same household as A. I., and E. C. a frequent visitor there. The latter had been to the house whilst ill.

Case No. 2—K. T., f., 40, independent. Onset, &c., not known; treated at home. Patient had been vaccinated three times, the last occasion being about 1879.

This patient arrived in Paddington from Texas, *via* New York, on 27th June, on which day she had "chills." The case was reported as one of enteric fever on 2nd July, but on a later day the diagnosis was revised, in part on account of a negative reaction with the Widal test and in part on account of the peculiar development of the "spots" which had been observed on 2nd July. These, according to the statement of the physician in attendance, "matured" and then disappeared. A consultant was called in, who excluded enteric fever, and, from the history given, inclined to a diagnosis of "varioid" (modified small-pox).

Inquiries were made in Liverpool as to other cases among the passengers arriving by the same steamer, but no case had been heard of. Inquiries were also addressed to New York, and it was ascertained that small-pox was prevalent when the patient was staying there.

Case No. 3—H. H., f., 25 years. Onset 23rd August; rash out 27th; to hospital 1st September. Vaccinated, but no information as to date or amount thereof.

Patient was a domestic servant, whose employers were out of town on holiday. She had been going about London and elsewhere, and her movements could not be satisfactorily accounted for. There were reasons for suspecting that this case was connected with that of—

T. R., m., age unknown, a carpenter, residing in Hampstead. Rash 8th August; to hospital 14th August,

but it was not possible to prove the suspicion.

Case No. 4—T. C., m., 25. Onset 7th September; rash (prodromal) 11th September; to hospital 11th September. Patient a brass-finisher; never vaccinated.

Patient's mother and sister residing in St. Pancras, were removed to hospital ill with small-pox on 26th August; both died, the sister being buried on 6th and the mother on 9th September. Patient saw his mother at home 22nd August, also at "Ships" 30th August, vaccination being refused by him on the latter occasion. Patient was at his mother's home almost daily up to the time he was taken ill. Patient's wife and child, aged 4 months, were both unvaccinated, when he was removed, but were vaccinated on that day and escaped infection.

Case No. 5.—R. B., m., 18. Date of onset uncertain; rash out 19th October; to hospital 21st October; last vaccinated 12 or 13 years ago.

Patient, a Brazilian, with no occupation, arrived at Southampton from South America on 5th October, coming to London the same day. He stayed at the C—— Hotel up to the 8th, when he moved into Paddington. He was much about London, sight-seeing, &c. A communication was addressed to the Medical Officer of Health, of Southampton, and it was ascertained that there had been a case of small-pox on the steamship by which patient arrived. The ship case was in the person of a girl, aged 3 years, who had a confluent attack which proved fatal at the Southampton Hospital on 11th October. The case was said to have been strictly isolated when on board the steamship, no one apparently knowing the nature of the child's illness except the Ship's Surgeon, Purser, and Stewardess.

Case No. 6.—R. L., m., 37. Onset 12th November; rash out 15th November; to hospital 17th November. Patient a coach-painter working in Marylebone; vaccinated in infancy only.

Nothing has been ascertained as to the origin of this case.

Case No. 7.—M. F., m., 28. Onset 13th November; rash out 16th November; to hospital 18th November. Patient, a drapers' salesman; last re-vaccinated in 1887. Attack very modified.

Case No. 8.—A. B., m., 27. Onset 12th or 13th November; rash out 16th November; to hospital 18th November. Patient, a shopwalker; vaccinated in infancy only. Attack modified.

Case No. 9.—E. R., m. 34. Onset 17th November; Rash out 20th November; to hospital 20th November. Patient a salesman; vaccinated in infancy only.

An assistant, F. K., employed at same place as the above, was ill with indefinite symptoms and some sort of eruption from about October 29th to November 1st. Another assistant, J. W., was in the sick-room with him on November 1st. A. B. (*Case 8 above*) occupied the second bed in the room where F. K. usually slept. The men also, it is believed, frequented the same club-room. F. K. visited his brother, residing at Battersea, on November 1st or 2nd. On the 15th the brother was taken ill, but his disease (small-pox) was not diagnosed until his wife sickened with hæmorrhagic small-pox on the 30th. Her case terminated fatally. Between the 15th and 30th the brother was visited by a large number of friends and relations, but nothing is known of any cases arising among the visitors. J. W. was for some few days in the sick-room after November 1st, and returned to work on the 11th of the month. On the 16th he was found in a faint in the lavatory, and a fellow-worker took him home with him for a week-end to set him up. On November 21st he was removed to hospital from Kensington as a case of small-pox.

There is good reason to believe that Cases 7, 8, and 9 were due to F. K., and also that the case of E. B., a female assistant who was removed from her home in Marylebone, was also due to the same origin. E. B. sickened on November 16th, and her case terminated fatally.

Case No. 10.—G. G., f., 27. Date of onset uncertain, probably 17th November; rash out 21st November; to hospital 21st November. Patient a lady of no occupation; vaccination history not known.

Patient came from West Norwood on 17th November, feeling ill. She was infected from some untraced source outside the Borough.

Case No. 11.—L. L., f., 15. Onset 24th November; rash out 26th November; to hospital 27th November. Patient a dressmaker's "trotter"; unvaccinated until 25th November.

This patient was the daughter of R. L. (*Case No. 6*). When inquiries were made on the occurrence of R. L.'s case no information was given of the daughter, and she was in consequence not vaccinated. She continued at work until she sickened.

Case No. 12.—A. B. S., m., 39. Date of onset uncertain, probably 13th November; rash out late on 16th November; to hospital 17th November. Patient a cabinet maker, working in Westminster; vaccinated in infancy only.

Nothing is known of the origin of this case.

Case No. 13.—G. L., m., 16. Onset probably 23rd December; rash out 26th December; to hospital 27th December. Patient a barman; vaccinated in infancy only. Symptoms severe.

Case No. 14.—J. H., f., 21. Onset probably 23rd December; rash out 26th December; to hospital 27th December. Housemaid; vaccinated in infancy only. Symptoms slight.

These two cases were from the same establishment. The origin of the infection has not been traced. The whole household, with the exception of three persons (two being the patients), had been revaccinated in the preceding October or November. The patients were from the same district of Norfolk, and associated with each other a good deal. Their movements when out could not be accounted for.

Case No. 15.—W. H. M., m., 45. Onset 24th December; rash out 27th December; to hospital 28th December. Patient an omnibus conductor; vaccination history not known.

Patient felt too ill to work on 24th December, but did one journey on 25th. The origin of the case has not been traced, but his occupation involved his exposure to chance infection. This case terminated fatally in January of this year.

Up to the close of the year the efforts of the Department have been very successful in preventing the occurrence of secondary cases—that is, in limiting the incidence of the disease to the first case in each household. There was really only one secondary case, viz., that of L. L. (*Case No. 11*), as the group comprising Cases Nos. 7, 8, and 9 was due to an unrecognized primary case which never came under the cognizance of the Department.

In addition to the cases actually recorded in the Borough, information was received of five cases, having associations more or less close with the residents of the Borough.

(a) Case reported from Wendover, Bucks, on 11th February.

Patient a lady, E. M., left Paris 22nd January; stayed in Paddington 23rd to 28th; then to Wendover.

(b) Case reported from Wandsworth, on 29th June.

Mrs. B., a lady of independent means, came to this Borough at the beginning of May. Shortly after her arrival she went to stay with friends at Streatham, and while there her host (Mr. W., just home from Paris) died, the certified cause of death being "acute nephritis," but the disease was almost certainly hæmorrhagic small-pox. Mrs. B. came back to Paddington on 15th June, and, feeling ill, left for Coventry on the 21st. She was transferred to the small-pox hospital of that City on the 25th of the same month.

(c) Case reported from Kensington, 13th September.

At the end of August and beginning of September 4 cases occurred in a family named C—, residing in North Kensington. Inquiry led to the discovery that one member of the family, a lad, C. C., had been ailing during the second week of August. Although laid up for a day or two he did not see any medical man. He was at that time employed at an eating house off Regent Street. The boy's face and body being always more or less "spotty" from acne, no particular attention was paid to the "spots" which came out when he was ill. He subsequently took a place at an eating house in this Borough, but did not give rise to any cases here.

(d) Case reported through Asylums Board, 12th November.

F. G., m., 11 years, was removed to South-Western Fever Hospital from Paddington on 25th October, and transferred to the "Ships" on 11th November, ill with small-pox. There had been a

patient in the same ward removed from some other district (unknown) who developed small-pox after admission. F. G. was infected by this patient.

(e) Case reported from Acton, 19th November.

C. G., f. 28; a nurse, was in service in Paddington for three weeks prior to 13th November. She went to Acton 14th November, the rash came out on the 15th, and she was removed to hospital on 17th. Inquiries made in Paddington failed to trace the origin of the case, and no other case is known to have been connected with it.

The action taken by the Department to check the spread of the disease included prompt removal to hospital of each case, followed by equally prompt disinfection, notification of each case to the Guardians, as required by the Local Government Board, combined with advice and persuasion to secure the vaccination or re-vaccination of all those who had been in contact with the case, and observation of all such "contacts" during the fortnight following the removal of the case to hospital. Of the 22 cases notified, only 4 were not removed to hospital, 3 of the cases being allowed to remain at home as they were recognized by the Medical Officer of Health to be chicken-pox and not small-pox. The fourth case, the first of the cases recorded above, was not removed, as the diagnosis of small-pox was not made until she had passed through all the stages of the disease, the attack being an exceedingly trifling one. For disinfection the formaldehyde spray has been used, in preference to fumigation with sulphur. The latter method has long been under suspicion, although actual failure of efficiency has never been proved. The spray method has the advantages of applying the disinfectant, formic aldehyde, in a liquid form, regarded by all observers as the most efficient method of application, and of requiring a very brief time for its application. A room disinfected during the day can be used the same night. In addition, all articles which were believed to have been exposed to infection were removed and treated with current steam, and afterwards cleansed. The duty of providing for vaccination rests with the Guardians, and a record of the steps taken will doubtless be included in the Annual Report of the Board for the year. The Officers of the Department used their best endeavours to persuade all those known to have been exposed to infection to take immediate steps to renew the protection afforded by efficient vaccination. In September the following circular letter was sent out to the Teachers of all the (Voluntary) Elementary Schools in the Borough, and to all the private schools known to the Department:—

SMALL-POX.

Having regard to the continued prevalence of Small-pox in the Metropolis, I have been instructed by the Public Health Committee of this Borough to write to you and to urge you to take steps to have the Staff of your School adequately protected by vaccination. All who have not been re-vaccinated within the last five (5) years should be done now. The parents of children known to you to be unvaccinated should be urged to have their children vaccinated without delay. The origin of any communications respecting such children, if addressed to me, will be treated as confidential, but the names and addresses will be communicated to the proper officials to enable steps to be taken to secure vaccination being done.

Small-pox in the vaccinated is very often so trivial a complaint *to the patient* that no notice is taken of the attack. Such a mild attack is, however, able to give rise to the disease in its most virulent form in an unprotected person. Backache, headache, sickness, some fever and "spots" may be taken as symptoms of importance just now. Those suffering from such symptoms should be sent home and be excluded from school until he or she has been seen by a medical practitioner. All such exclusions should be at once reported to the Medical Officer of Health of the district in which the excluded person resides, as well as to me. Modified small-pox does not, however, occur in young children. This form of the disease is to be looked for among the vaccinated children in the senior departments and among the Staff. Simple or unmodified small-pox, *i.e.*, in persons not protected by vaccination, is almost invariably so severe in its onset as to preclude any attempt on the part of those affected to attend school or other occupation.

If I can advise you on any matter arising out of this letter, I shall be pleased to see you here any day between 10 and 11.30 a.m., or at other times by appointment.

In response to the letter the names and addresses of a very large number of children were communicated to the Medical Officer of Health, and by him forwarded to the Vaccination Officer. Many of the teachers also underwent re-vaccination, but no returns are available to show the number done.

In September, the London School Board adopted the following resolution:—

“That facilities be given to the Public Vaccination Officers of the Metropolis, on the application of the proper Local Authority, to enter the Schools of the Board in infected areas, for the purpose of examining the arms of the children, with a view to advising the parents to allow their children to be vaccinated, provided that the School Board issue a circular to the parents of the children asking if they have any objection to this examination, and, in case of such objection in any particular case, that such examination shall not take place; and that the Local Government Board and the Public Vaccination Officers be informed accordingly.”

If the Board had simply resolved to furnish facilities for the inspection of children, and left the Local Authorities to make the necessary arrangements, much good would probably have resulted. The issue, however, of the circular mentioned in the resolution, of which circular the following is a copy of the material part, had the result of withdrawing from inspection just those children that it would be desirable to get hold of, viz., the unvaccinated. Moreover, if the Board had left arrangements in the hands of the Local Authorities, the examination or inspection would probably have been made by the medical officers of health with the assistance of other medical men, and to that very little, if any, objection would have been raised. As the resolution was framed, the Vaccination Officer—a layman—was the only person the teachers were authorized to allow to examine the children. The plan adopted with the Voluntary Schools is to be greatly preferred to that of the School Board.

SCHOOL BOARD FOR LONDON.

SCHOOL MANAGEMENT COMMITTEE.

24th September, 1901.

The London School Board have decided, on the request of the Local Sanitary Authority, to allow the Vaccination Officer to visit the School which your child is attending. He will examine the arms of those children whose parents do not object, in order to see whether they have been vaccinated, and, if necessary, to advise the parents. If you object to your child being examined, please sign the accompanying statement, and send it at once to the Head Teacher.

G. H. CROAD,
Clerk of the Board.

I object to my child (or children) being examined by the Vaccination Officer.

Signature of Parent or Guardian _____

_____, September, 1901.

With regard to those who have been in contact with cases, not only did the officers of the Department keep them under observation until there was no danger of further cases, but the medical officers of health of other districts were advised of any who, known to reside or work in or outside the Borough, had been in contact with cases within. Acting on the initiative of the Medical Officer of this Borough, the Metropolitan Branch of the Incorporated Society of Medical Officers of Health asked the Medical Officer of Health of the County to undertake the work of transmitting information of each case to all the medical officers of health within the Metropolis. A system is now in force by which particulars of each case are sent to the Medical Officer of Health of the County and by him distributed daily to each of the Metropolitan officers. The Asylums Board also send out each week a return containing brief, often too brief, notes of each case admitted to the Board's Hospitals.

DIPHTHERIA

(INCLUDING MEMBRANOUS GROUP).

	Paddington.	London.
Cases reported, 1901	343	12,165
Average annual number, 1891-1900	303	11,792
Case-rate, 1901	2.37	2.68

The cases recorded in the Borough rose from 176 in 1900 to 343 last year, an increase of 96 per cent., and in the Metropolis from 12,009 in 1900 to 12,165 last year, an increase of 1 per cent. only. In comparison with the decennial averages, last year's cases represent an excess of 14 per cent. in the Borough and 3 per cent. in the Metropolis. The case-rate for the Borough was nevertheless 0.31 less than that for the Metropolis.

Of the six districts included in Table 16, Willesden is the only one in which last year's returns (400 cases, equal to a case-rate of 3.43) were in excess of those of the Borough. Marylebone with 258 cases comes next to the Borough. The coincidence of high prevalences of diphtheria in Willesden and Paddington has been alluded to in former reports.

A reference to Table 17 will show that the greater part of last year's increase was due to a special prevalence in the North-West Paddington Sub-District, when the cases were 58 in excess of the decennial average, an increase of 118 per cent.; while the number of cases recorded in St. Mary's Registration Sub-District (196) were 22 below the average, a fall of 11 per cent. The returns for each of the last ten years from the three Sub-Districts will be found in Table III. in the Appendix (p. 66). The quinquennial and decennial averages are set out below:—

DIPHTHERIA.

	St. Mary.	St. John.	North-West Paddington.
Cases recorded, 1901	196	40	107
Annual averages, 1891-1895	234	38	32
1896-1900	208	34	66
1891-1900	218	36	49
Case-rate, 1901	2.09	1.19	6.23

The sex-age incidence as regards numbers of cases will be seen from an examination of Table 18, while the cases from each Ward are given in Table 19. The returns have not previously been tabulated for the Wards. Information as to the numbers living at the various ages has not yet been obtained and consequently the sex-age rates cannot be determined.

Of the 343 cases reported, 23 were apparently due to infection contracted beyond the Borough, three of the patients being at the time in hospitals in different parts of the Metropolis. In 14 instances the diagnosis of diphtheria was found to be erroneous. Three cases followed the return of previous patients from the isolation hospitals to their homes.

In previous Reports attention has been specially called to certain streets in the northern parts of the Borough from which an unduly large proportion of cases has been reported. The figures for last year are set out below in comparison with those of the three preceding years:—

	1898.		1899.		1900.		1901.	
	Cases.	Houses.	Cases.	Houses.	Cases.	Houses.	Cases.	Houses.
Ashmore Road ..	11	10	11	10	4	4	8	5
Bravington Road ..	22	15	13	12	10	8	13	10
Chippenham Road ..	6	5	3	3	1	1	2	2
Fernhead Road ..	8	5	4	4	1	1	9	8
Kilburn Park Road ..	16	14	13	12	3	2	2	1
Portnall Road ..	9	9	18	14	8	4	10	9
Saltram Crescent ..	5	4	8	8	6	6	6	5
Shirland Road ..	11	10	10	8	4	3	10	5
Walterton Road ..	4	3	5	3	2	2	9	5
	92	75	85	74	39	31	69	50

These streets contain approximately 1,700 houses.

Other streets in which more than 3 cases occurred during the year were :—

In St. Mary's Sub-District.

Adpar Street ..	6 cases in 5 houses.	Croxley Road ...	4 cases in 3 houses.
Amberley Road ..	7 " 6 "	Fermoy Road ...	4 " 2 "
Barnsdale Road ..	5 " 4 "	Warwick Road ...	4 " 3 "
Clarendon Street ..	8 " 7 "		

In St. John's Sub-District.

Bathurst Mews ..	5 cases in 3 houses.	Lancaster Mews ...	4 cases in 2 houses.
Craven Terrace ..	5 " 1 house.		

In the whole Borough the 343 cases were reported from 284 houses, viz., 238 cases from a like number of houses; 70 cases from 35 houses; 30 from 10 houses; and five from one house. The frequency of these multiple cases in each Ward is indicated below :—

Wards.				Houses having			
				1 case.	2 cases.	3 cases.	5 cases.
I.	Queen's Park	..	..	81	8	4	—
II.	Harrow Road	..	..	57	14	3	—
III.	Maida Vale	..	..	17	5	—	—
IV.	Westbourne	..	..	24	4	1	—
V.	Church	..	..	34	3	—	—
VI.	Lancaster Gate, West	..	..	5	—	—	—
VII.	Lancaster Gate, East	..	..	11	1	1	1
VIII.	Hyde Park	..	..	9	—	1	—

The intervals which elapsed between the first and subsequent cases reported from the same house varied from nothing (cases reported together) up to 12 months. The chief facts are summarized below :—

Households with two cases during the year—

Intervals.		WARDS.							
		I.	II.	III.	IV.	V.	VI.	VII.	VIII.
Days.	0	—	—	—	<i>I*</i>	—	—	—	—
	1	1	—	—	1	1	—	—	—
	2	—	—	1	—	—	—	—	—
	3	—	3 (<i>I</i>)	—	—	—	—	—	—
	4	1	2	—	—	—	—	—	—
	5	1	—	—	—	—	—	—	—
Weeks.	6	—	2 (<i>I</i>)	—	—	—	—	—	—
	1	2	4 (<i>I</i>)	1	—	—	—	1	—
	2	—	2	1	—	—	—	—	—
Months.	3	—	—	—	1	—	—	—	—
	1	—	1	1	—	1	—	—	—
	2	1	—	—	<i>I</i>	—	—	—	—
	3	—	—	—	—	1	—	—	—
	4	—	—	1	—	—	—	—	—
	7	1	—	—	—	—	—	—	—
	12	<i>I</i>	—	—	—	—	—	—	—

In five households the primary cases were kept at home for treatment. These cases are indicated in italics. The incubation period of diphtheria is not definitely known. Moreover, there is the difficulty arising from the fact that the bacillus may be present in the throats of members of an infected family who, themselves in apparently good health, may convey the disease to others. As a working hypothesis, it may be presumed that secondary cases occurring not later than a fortnight after the last contact with the first cases are due to direct personal infection. The intervals given above represent the time which elapsed between the reputed dates of onset in each

* There is good reason to believe that neither of the cases reported from this household was diphtheria.

case—not that between last contact and onset of secondary case. On the hypothesis stated, 26 out of the 35 cases would be attributable to personal contact.

As regards the other cases, it can only be said that the two cases which occurred in Ward I. (Queen's Park) at an interval of 12 months were, in all probability, quite independent of each other; that the two at seven months' interval (same Ward) occurred in two families, and were also probably independent of each other; that the same may be said of the two cases at three months' interval in Ward III. (Maida Vale), the first case having been home from hospital for a month before the second patient sickened; that the two cases at three months' interval in Ward V. (Church) were in two families, and also probably distinct infections; and that the two cases in Ward IV. (Westbourne), with two months' interval, although in the same family, appeared from the histories obtained to be due to distinct importations from outside London.

Households with three cases during the year—

		Intervals Between	
		1st and 2nd Cases.	2nd and 3rd Cases.
Ward I. (Queen's Park)	(a)	1 day.	2 days.
	(b)	2 days.	3 months.
	(c)	6 "	2 days.
	(d)	11 "	5 "
Ward II. (Harrow Road)	(a)	4 "	3 "
	(b)	4 "	3½ months.
	(c)	9 "	5 days.
Ward IV. (Westbourne)		4 "	4 "
Ward VII. (Lancaster Gate, East)		0 "	10 "
Ward VIII. (Hyde Park)		2½ months.	5 "

In one case only was the primary patient kept at home, Case (d) in Ward I., the patient dying on the day the case was reported.

Three cases were not explainable by direct personal infection:—

Ward I., Case (b).—The third case occurred in a second family, the patient attending an infected school up to the day of the onset of the disease.

Ward II., Case (b).—The same explanation holds good here, except that there was less chance of infection at the school.

Ward VIII.—The second and third cases followed the return home of the first case, and were probably due to that fact.

Household with five cases during the year—

In this case the intervals could not be ascertained. The patients, with one exception, were very slightly ill, and the disease was only recognized by bacteriological test. Four of the five patients were attending school until stopped for the test. None of the patients went to hospital.

DIPHTHERIA IN QUEEN'S PARK WARD.—During the first half-year the Ward was practically free from this disease, only seven cases being reported, distributed, according to onset, as follows:—

Cases.				Cases.			
January	...	...	1	April	...	...	0
February	...	...	2	May	...	...	3
March	...	...	0	June	...	...	1

In the third quarter 31 cases were recorded, and in the fourth, 69:—

Cases.				Cases.			
July	...	...	3	October	...	...	33
August	...	...	6	November	...	...	17
September	...	...	22	December	...	...	19

The distribution *quâ* time may be looked at in another way. The schools closed for the summer vacation in the last week of July and re-opened for the autumn session at the end of August (Monday, 26th). During the two terms preceding the summer vacation 10 cases were recorded, four of the patients being children attending schools in the Ward. During the vacation five cases were reported from the following streets:—

Oliphant Street	} 1 case each.	Kilburn Lane	...	2 cases.
Fourth Avenue				
Third Avenue				

The first three cases reported during the vacation (on August 1st, 2nd, and 4th) were children who had attended school up to the end of the term.

During the autumn session, *i.e.*, up to December 23rd, 91 cases were reported, 67 of the patients being school attenders, all but three being at schools in the Ward. Prior to the third week of September there were no secondary cases reported, *i.e.*, each case was from a different household. After September 22nd 16 secondary cases were reported, eight being persons not attending school at all, one a scholar at school in Kensington, and seven scholars attending schools in the Ward.

Street Distribution.—This has been set out in the tabular statement on the next page. It will be found that the earliest cases were reported from the North-Western and Western parts of the Ward, and that the Eastern and South-Eastern parts were but slightly affected.

School Incidence.—Up to the commencement of the summer vacation, five cases occurred amongst school attenders—two at Droop Street School, and one each at Beethoven Street, Wilberforce, and Granville Road (R. C.) Schools. The last day of school term was 26th July. Three scholars were attacked during the early days of the vacation, *viz.*, two attenders at the Kilburn Lane School (on August 1st and 4th respectively), and one at Beethoven School (on August 2nd.). The other two cases reported during the vacation (onsets August 23rd and 26th) occurred in households sending children to these two schools.

Between the re-opening of the schools and the end of August only one case was reported, a child attending Droop Street School. The 22 cases reported in *September* included—

5 non-attenders and 17 attenders.

Of those attending school (all primary cases),

6 attended Beethoven Street School.
10 „ Kilburn Lane „
1 „ Droop Street „

Among the five non-attenders there was one secondary case (the primary being an attender at the Kilburn Lane School). From the other four households the children attended—

Extra-Paddington Schools in 2 cases;
Kilburn Lane, and
Harrow Road (Moberley) Schools } 1 case each

The 33 cases reported in *October* included—

6 non-attenders and 27 attenders.

Of those attending school (excluding two secondary cases)—

6 attended Kilburn Lane School.
8 „ Droop Street „
10 „ Beethoven Street „
1 „ Harrow Road (Moberley) School.

The two secondary cases attended St. Andrews, North Kensington and Kilburn Lane Schools (one each).

The six non-attenders included three secondary cases (two connected with Beethoven Street and one with Kilburn Lane School). In the other three cases, one was in a household sending children to the Kilburn Lane School, while there were no school attenders from the other two.

The 17 cases reported in *November* included—

8 non-attenders and 9 attenders.

The attenders were distributed—

3 to Droop Street School.
2 „ Beethoven Street „
4 „ Kilburn Lane „

STREET INCIDENCE.

Odd Nos.	Even Nos.	Odd Nos.	Even Nos.	Odd Nos.	Even Nos.	Odd Nos.	Even Nos.
1st Avenue.		6th Avenue.		Ilbert Street.		Marne Street.— <i>Contd.</i>	
	29 x. 14 xi.	29 viii. 26 ix. 22 vi.	7 v. 25 ix. 28 x. 31 x. 18 xii.	21 vii. 20 ix. 22 ix. 12 xii. 28 ix.	26 ix. 10 x. 15 x.	{ 29 ix. 7 x. 3 x. 4 x. 5 x. 24 xi.	
3rd Avenue.		Droop Street.		Kilburn Lane.		Nutbourne Street.	
{ 27 xii. 00 18 xii. 01 26 vii. 12 xi. 17 xi.	12 ix. 10 x. 10 xii. 13 x. 21 xi. 2 xii. 7 xii. 5 xii. 6 xii. 8 xii. 16 xii. 23 xii.	13 ix. 7 xii.	13 ix. 28 ix.		2 viii. 4 viii. 10 xii.	26 ix. 12 x. 22 x. 6 xii.	28 vi.
4th Avenue.		Enbrook Street.		Kilravock Street.		Oliphant Street.	
		2 x.		12 x.	6 vii. 15 xii.	1 viii. 29 ix. 1 x. 1 xi. 22 xi.	21 ix. 4 x.
5th Avenue.		Farrant Street.		Lancefield Street.		Peach Street.	
		10 x.		2 v. 22 xi.	3 x.	30 xi.	
		Harrow Road.		Lothrop Street.		St. John's Buildings, Kilburn Lane.	
		30 ix.	1 ii. 29 ix. 3 x. 19 xi. 25 xi. 27 xi. 6 xii.	4 x.	18 x. 10 xi.	29 xi. 20 xii.	
		Herries Street.		Marne Street.			
		10 x. 19 xi.	12 v. 20 xii.	22 ii. 14 ix. 24 ix.	12 x. 20 x.		

EXPLANATION.—The date of onset of each reported case is given. The cases in each street have been arranged in order of date, irrespective of position of house.

27 xii. 00. }
18 xii. 01. } —This is to be read as follows:—

“There was a case in this house on 27th December, 1900, reported in 1901, and a second case on 18th December, 1901.”

Throughout dates in italics indicate secondary attacks in the household.

SUMMARY.

First Avenue	...	...	2 cases in 2 houses.	Kilburn Lane	...	...	3 cases in 3 houses.
Third „	...	...	17 „ 11 „	Kilravock Street	...	...	3 „ 3 „
Fourth „	...	...	4 „ 4 „	Lancefield Street	...	...	3 „ 3 „
Fifth „	...	...	12 „ 12 „	Lothrop Street	...	...	3 „ 3 „
Sixth „	...	...	8 „ 8 „	Marne Street	...	...	11 „ 9 „
Droop Street	...	...	4 „ 4 „	Nutbourne Street	...	...	5 „ 5 „
Enbrook Street	...	...	1 „ 1 „	Oliphant Street	...	...	7 „ 6 „
Farrant Street	...	...	1 „ 1 „	Peach Street	...	...	1 „ 1 „
Harrow Road	...	...	8 „ 5 „	St. John's Buildings	...	...	2 „ 1 „
Herries Street	...	...	4 „ 3 „				
Ilbert Street	...	...	8 „ 5 „				
							<u>107</u> <u>90</u>

The non-attenders included two secondary cases (the primary attending Droop Street School) and six primary. Of the latter—

2 households had no children attending school.

2 „ „ children going to Beethoven Street School.

1 each „ „ „ Kilburn Lane and Droop Street Schools.

Of the 19 cases reported in *December*—

5 were non-attenders and 14 attenders.

Among the attenders were four secondary cases. Of the 10 primary—

4 went to Beethoven Street School.

4 „ Kilburn Lane „

1 each to { Harrow Road (Moberley) School.
Wilberforce School.

The four secondary cases were distributed—

3 to Kilburn Lane School.

1 „ Beethoven Street „

Among the five non-attenders were three secondary cases (primary cases attending Beethoven Street, Kilburn Lane, and Wilberforce Schools). Of the other two cases, one was in a family with no school children, and the other had children attending Kilburn Lane School.

Summarizing the preceding paragraphs, the appended table is obtained :—

	Beethoven Street.	Droop Street.	Kilburn Lane.	Other Schools.
ATTENDERS—				
Primary cases ...	22	12	24	3
Secondary „ ...	1	—	4	1
NON-ATTENDERS—				
Primary cases ...	2	1	4	3
Secondary „ ...	3	2	3	1
5 cases in households not sending children to school.				

DIPHTHERIA IN ST. JOHN'S SUB-DISTRICT.—There was a slight excess of the disease in this Sub-District during the year, the 40 cases reported being four in excess of the decennial average. Very nearly half the cases were connected with one school—St. James'—but several of them were secondary cases.

On April 27th two cases (W. C. and S. P.) were reported from Lancaster Mews, both children being scholars of this school; on April 29th a third case (A. P.) was reported from the Mews; and on the 30th a fourth (H. S.) from Westbourne Crescent. Inquiry made at the last house elicited the fact that there was a child (A. T.) residing in Craven Terrace who had been away from school for some time for a throat ailment, and had associated with H. S. The medical attendant of A. T. was seen, and at the suggestion of the Medical Officer of Health a swab was taken from the patient's throat. The result was that the case of A. T. was proved to be diphtheria, and the bacillus was also found in the throats of four other children of the family, two of whom had been in regular attendance at the school. The child A. T. had been to school whilst her throat was bad, and there is little room for doubt that the infection was derived from that case, which persisted in the school up to the summer holidays. In addition to the 14 children who were reported ill with the disease, one other case, not seen by a medical man at the time, occurred, which was diagnosed by the occurrence of paralysis. Although cases continued to occur at intervals from the middle of April up to the middle of June, they were not sufficiently numerous to warrant the school being closed.

Removals to Hospital.—Of the 343 cases reported in the Borough, 270 were treated in hospital, equal to 78·7 per cent. From St. Mary's Sub-District 155 cases were removed, equal to 79 per cent. of the notified cases; from St. John's, 26 cases (or 65 per cent.), and from North-West Paddington 89 (or 83·1 per cent.). From the two first Sub-Districts, representing Old Paddington, the removals to hospital during the past year (181 cases) represented 76·6 per cent. of the notifications, the proportions for the three preceding years 1900, 1899, and 1898 having been 71·4, 82·7, and 64·3 per cent. respectively. There was at the beginning of the fourth quarter some difficulty in securing accommodation for cases as reported.

SCARLET FEVER.

		Paddington.	London.
Cases reported in 1901	...	503	18,421
Average annual number, 1891-1900	...	558	21,544
Case-rate, 1901	...	3.49	4.05

The notified cases rose from 338 in 1900 to 503 in 1901, equal to an increase of 49 per cent. (nearly), compared with an increase of 33 per cent. in the Metropolis, where 18,421 cases were recorded last year as compared with 13,819 in 1900. Last year's returns were below the decennial average to the extent of 10 per cent. in the Borough and 15 per cent. in the Metropolis. The prevalence of this disease, measured by the notification-rate, was higher in Paddington (rate 3.49) than in the adjacent districts, except Willesden, where the rate was 4.70. The lowest rate was that of Hampstead, 2.66. The rate for the Borough (3.49) was 0.56 below that for the Metropolis (4.05). (See Table 16.)

In the Registration Sub-Districts the cases recorded were one above the decennial average in St. Mary and below the average in St. John and North-West Paddington. In comparison with the averages for the five years 1891-96, the cases recorded last year in each Sub-District showed a satisfactory diminution, while in comparison with the averages for 1896-1900, the record for St. Mary's Sub-District alone was above the average.

SCARLET FEVER.

Annual average number of cases reported in each five years.

	1891-95.	1896-1900.	1901.
Paddington	580	449	503
St. Mary	400	300	394
St. John	89	71	71
N.-W. Paddington	91	78	38

The number of cases at the various sex-ages will be found in Table 18. The number of cases reported from each Ward will be found in Table 19, maxima being recorded in Harrow Road and Church Wards.

The incidence of the disease was heavier in the under-mentioned streets than in other parts of the Borough :—

Adpar Street	... 19 cases in 5 houses.	Cirencester Street	... 9 cases in 7 houses.
Campbell Street	... 5 " 4 "	Clarendon Street	... 13 " 10 "
Amberley Road	... 15 " 12 "	Dartington Terrace	... 3 " 3 "
Alfred Road	... 3 " 3 "	Hasboro' Street	... 3 " 2 "
Brindley Street	... 4 " 4 "	Woodchester Street	... 11 " 8 "
Hampden Street	... 10 " 9 "	Ashmore Road	... 18 " 13 "
Waverley Road	... 4 " 4 "	Bravington Road	... 16 " 11 "
		Fernhead Road	... 7 " 7 "
		Portnall Road	... 12 " 9 "
		Saltram Crescent	... 9 " 4 "
		Shirland Road	... 22 " 18 "

With respect to Adpar Street, the conditions *quâ* housing differ materially from those in the other streets. In that street each "house" is really a block of tenement dwellings, and each contains some 8 to 12 homes.

As a result of the inquiries made, the following special circumstances were recorded :—

Imported cases	...	37
Contracted in hospitals	...	4
Return cases	...	16
Erroneous diagnosis	...	17

The cases (taking all reported) were notified from 399 different addresses, or houses, the frequency of multiple cases being—

52 houses	had	2 cases each.
13 "	"	3 "
1 house	"	4 "
4 houses	"	5 "
1 house	"	8 "

The proportion of multiple cases from each Ward is indicated below:—

			Cases per House.					
Wards.			1	2	3	4	5	8
I.	Queen's Park	...	32	3	—	—	—	—
II.	Harrow Road	...	72	14	4	1	—	—
III.	Maida Vale	...	50	7	1	—	1	—
IV.	Westbourne	...	65	10	1	—	1	—
V.	Church	...	62	14	5	—	1	1
VI.	Lancaster Gate, W.		12	—	1	—	—	—
VII.	Lancaster Gate, E.		10	1	1	—	—	—
VIII.	Hyde Park	...	25	3	—	—	1	—

The intervals which elapsed between the onsets of illness in the primary and subsequent cases in the same households are indicated below:—

Houses with two cases each—

In 18 cases the interval was under 7 days.

„ 16 " " over 7 days but less than 28 days; and

„ 18 " " " 2 months.

In 7 instances the two cases were reported on the same day.

„ 7 " secondary cases were return cases.

„ 10 " " occurred in separate families.

„ 6 " primary case was treated at home.

The intervals recorded in each of the 52 cases can be seen from the appended tabulation:—

Intervals.		Wards.							
		I.	II.	III.	IV.	V.	VI.	VII.	VIII.
Days.	0	—	2	—	—	—	—	—	—
	1	—	—	—	—	1	—	—	1
	2	1	—	2	—	1	—	—	—
	3	—	1	—	2	—	—	—	—
	4	1	2	—	—	—	—	—	1
	5	—	1	—	—	—	—	—	—
Weeks.	6	—	—	—	1	1	—	—	—
	1	1	1	2	3	3	—	—	—
	2	—	1	—	—	2	—	—	—
Months.	3	—	1	—	—	2	—	—	—
	1	—	—	—	—	—	—	—	—
	2	—	—	1	1	2	—	—	—
	3	—	2	—	1	—	—	1	1
	4	—	1	—	—	—	—	—	—
	5	—	2	1	—	—	—	—	—
	6	—	—	—	1	1	—	—	—
	7	—	—	1	—	—	—	—	—
	8	—	—	—	—	—	—	—	—
	9	—	—	—	1	1	—	—	—

The experience of the Department is that secondary cases attributable to personal infection from the primary may occur at any date up to the fourteenth day after the removal of the first case to hospital. Having regard to the delay which so frequently occurs in diagnosis and removal, it is

reasonable to attribute all the cases in the above statement (based on intervals between dates of attacks) up to and including the third week as due to personal infection from the primary cases.

Of the 18 cases which occurred at intervals of two months and upwards,

6 were apparently return cases ;

4 of the secondary cases occurred in different families } and were most probably due to quite
2 " " " the same family } distinct sources of infection.

Houses with three cases during the year.

Of the 13 instances tabulated above, three have to be excluded on account of erroneous diagnosis, viz., one each in Wards II., III., and V. The intervals of the remaining 10 instances were as below :—

		Intervals between	
		1st and 2nd Cases.	2nd and 3rd Cases.
Ward II.	{	(a) 15 days.	1 day.
		(b) 19 "	0
		(c) 5 "	6 weeks.
Ward IV.		1 day.	7 days.
Ward V.	{	(a) 7 months.	5 weeks.
		(b) 3 "	0
		(c) 2 "	1 month.
		(d) 1 "	1 "
Ward VI.		0	3 weeks.
Ward VII.		2 days.	6 days.

Ward II., (a) and (b).—The three cases were reported on the same day.

" (c) The third case occurred five days after the two previous cases arrived home from hospital.

Ward IV. The second patient sickened on the day the first was removed to hospital, and the third, four days after the removal of the second.

Ward V. (a) The second case appears to be quite independent of the first ; the third occurred 10 days after the second came home from hospital.

" (b) The second and third cases were reported together, were children of a different family, and the cases were probably quite independent of the first.

" (c) The origin of the second case was not cleared up ; the third case occurred 11 days after the first came back from hospital.

" (d) The cause of the repeated cases was not cleared up.

Ward VI. The two first cases were reported on the same day, and one of the patients was treated at home.

Ward VII. All the patients were treated at home.

House with four cases during the year—one instance in Ward II.

The second case occurred three days after the first was removed ;

Third and fourth 14 days after the removal of the second.

Houses with more than four cases during the year—five instances.

(a) Five cases :—Ward IV. (an institution).

The two first cases were reported together ;

The third case occurred three days after the removal of the two cases ;

The fourth case, 24 days after the removal of the third ; and

The fifth, on the day the fourth was removed.

(The drainage at this institution was subsequently examined and found very defective. It has since been completely reconstructed).

(b) Five cases :—Ward V.

Case 1—Ailed, June 5th ; to Hospital, June 7th—Family N.
 „ 2 „ Sept. 6th „ Sept. 9th „ B.
 „ 3 „ „ 11th „ „ 13th „ N.
 „ 4 „ „ 23rd „ „ 24th „ J.
 „ 5 „ Nov. 16th „ Nov. 18th „ H.

(c) Five cases :—Ward VIII.

Four cases were reported and removed to hospital on the same day ;
 The fifth sickened two days later.

(d) Eight cases :—Ward V.

Case 1—Ailed, April 4th ; to hospital, April 24th—Family W.
 „ 2 „ „ 5th „ „ 8th „
 „ 3 „ „ 17th „ „ 20th „ Al.
 „ 4 „ „ 21st „ „ 22nd „ H.
 „ 5 „ „ 21st „ „ 21st „ Al.
 „ 6 „ „ 21st „ „ 22nd „
 „ 7 „ „ 23rd „ „ 23rd „ Ai.
 „ 8 „ May 7th „ May 8th „ Al.

(These instances will be referred to later on.)

TABLE 19.
 Notifications, 1901.

Disease.					Cases from each Ward.							
					I. Queen's Park.	II. Harrow Road.	III. Maida Vale.	IV. West- bourne	V. Church.	VI. Lan- caster Gate (West).	VII. Lan- caster Gate (East).	VIII. Hyde Park.
Small-pox	..	..	..	..	..	3	5	3	7	3	..	1
Cholera	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria	..	..	..	..	106	96	26	34	38	5	21	12
Membranous Croup	..	..	..	..	1	..	1	1	2	..	..	..
Erysipelas	..	..	..	..	15	31	15	20	48	2	1	9
Fevers.	Scarlet	..	..	..	38	116	72	93	118	15	15	36
	Typhus	..	..	..	..	..	..	..	..	..	..	..
	Enteric	..	..	..	10	13	20	13	26	5	..	5
	Relapsing	..	..	..	..	..	..	..	..	..	..	..
	Continued	..	..	..	..	..	..	..	..	..	..	..
	Puerperal	..	..	..	1	1	1	6	1	..	..	..
Totals	..	..	..	..	171	260	140	170	240	30	37	63
Rates	..	..	..	..	9.36	9.37	7.46	7.13	9.11	3.54	4.65	4.51

SCARLET FEVER IN HALL PARK.—There was an excessive prevalence of the disease in this district, 30 cases being reported during the year. The cases were distributed, as regards time, as under:—

March .. 1 case.	May .. 4 cases.	September .. 6 cases.	November .. 2 cases.
April .. 9 cases.	June .. 3 „	October .. 2 „	December .. 3 „

The first case, a boy aged six, sickened on March 27th, and was removed to hospital on April 1st. That day the second case, a boy aged 12, sickened, but was not reported and removed until the 4th, on which day a girl (M. W.), aged three, sickened. The first and third cases occurred in Adpar Street, the second in Campbell Street. The third case was not diagnosed until April 24th, and in the meantime eight other cases were reported either in the same house or very near thereto, which were apparently due to this unrecognized case. Cases continued to occur up to the middle of June at intervals, which suggested direct personal infection from preceding cases—the children in the area being much given to playing together in the streets. On June 25th a girl sickened, but her case was not reported until July 16th. She did not appear to act as a centre for other cases, or, at all events, no further cases were reported until September 7th, when eight more cases were reported at very short intervals up to November 18th. In December three cases occurred, also at very short intervals.

Of the cases reported, 12 were males and 18 females; the age division being—

	0—3	3—5	5—13
Males	1	1	10
Females	—	9	8

and one female, aged 31, who sickened after her confinement. Twelve (12) of the children attended Campbell Street Board School, but the School did not appear to act as a “centre” until the autumn, only three cases occurring there (from this Area) prior to the summer holidays, viz., in April two and in July one. In September there were three cases, in November two, and in December three.

Some of the cases in the later months were suspected to be “return” cases, but in the absence of official information as to the discharge of patients this could not be proved. Personal contact in the homes and streets seemed to be the chief factors in the spread of the disease.

SCARLET FEVER IN CLARENDON STREET Area.—In the streets included in this “island” 40 cases were reported, viz. :—

January, 1 case.	April, 3 cases.	July, 3 cases.	October, 1 case.
February, 2 cases.	May, 3 „	August, 3 „	November, 3 cases.
March, 1 „	June, 7 „	September, 11 „	December, 2 „

The sex-age distribution was somewhat different, as will be seen from the appended statement:—

	0—1	1—3	3—5	5—13	aged 13	19	33
Males	1	3	—	9	2	1	1
Females	1	4	5	12	1	—	—

To tabulate all the cases with their respective notes would occupy too much space. It must suffice to say that there was not the same evidence of direct personal infection here as in Hall Park, nor could the schools be held to act as “centres.”

Removals to Hospital.—Of the 503 reported cases 439 (including 4 cases contracted in hospitals) were treated away from home—representing 87·2 per cent. From St. Mary's Sub-District 344 cases, representing 87·3 per cent. of the notified cases, were removed, from St. John's 51 (or 70·4 per cent.), and from North-West Paddington 35 (or 92·3 per cent.). From the two first the removals were equal to 84·9 per cent. of the notifications, as compared with 84·6 in 1900, 71·6 in 1899, and 80·1 in 1898.

ENTERIC (TYPHOID) FEVER.*

			Paddington.	London.
Cases reported, 1901	...	...	92	3,251
Average annual number, 1891-1900	...	...	77	3,638
Case-rate, 1901	...	...	0.64	0.71

The increased prevalence in Paddington amounted to 23 cases, viz., from 69 in 1900 to 92 last year, while in the Metropolis there was a decrease of 1,136 cases, from 4,387 cases in 1900 to 3,251 in 1901. The increase in the Borough was equal to 33 per cent., and the decrease in the Metropolis to 26 per cent. The case-rate (0.64) was lower in Paddington than in the Metropolis (0.71). The local rate was higher than in any of the adjacent districts. (See Table 16.)

In comparison with the decennial averages, the returns for last year were 60 per cent. higher, and in the Metropolis 11 per cent. lower. The averages for the quinquennia are given below :—

ENTERIC FEVER.

	St. Mary.	St. John.	North-West Paddington.	London.
1891-95	54	17	7	3,748
1896-1900	58	13	10	3,968
1891-1900	55	14	8	3,638
1901...	70	12	10	3,251

Half the cases recorded last year were reported from Maida Vale (20 cases) and Church (26) Wards.

From the inquiries made, 29 cases can be excluded from present consideration, viz. :—

Imported from beyond the Borough	...	...	21 cases.
Contracted nursing Enteric Fever cases	...	...	2 "
Errors of Diagnosis	...	...	6 "

According to the reputed dates of onset, the 63 cases not thus accounted for were distributed thus :—

December, 1900	...	2	March	...	5	June and July	...	6 each	October	...	3
January, 1901	...	6	April	...	3	August	...	8	November	...	3
February	...	7	May	...	5	September	...	4	December	...	5

Among these cases were :—

- 12 persons who habitually had meals beyond the Borough.
- 4 persons who admitted having *oysters*.
- 5 persons who admitted having *mussels* and (or) *cockles* during the period of incubation, and
- 5 persons who had had ice-creams.

Little importance is attached to the last information.

One case was reported during the year from a canal boat.

In two houses 2 cases occurred, and in one 3, and 2 cases occurred among the nursing staff of St. Mary's Hospital. In the first group are included one instance where members of two families were affected at some three months' interval, and one of two members of one family, mother and daughter, the cases being reported on the same day. In the house where 3 cases occurred, the

* Including cases notified as continued fever.

first case was that of R. A., a female, aged 23, a laundry hand, who sickened on the 28th May, the second being L. D. (female, aged 32), who sickened on 21st July, and the third, C. D. (her son), aged 2, who sickened on 15th August. The third case was probably due to direct infection from the second.

In Cirencester Street cases occurred in three houses adjacent to each other, viz. :—

House a	...	m., 14,	sickened 3rd August, to hospital 6th August.
" b	...	f., 23,	" 25th December, '00, " 17th January.
		m., 5,	" (?) " 13th April.
" c	...	m., 17,	" 11th March, " 16th March.

In Kilburn Park Road cases occurred similar in two adjacent houses, viz. :—

House x	...	m., 19,	sickened 6th February, to hospital 26th February.
" y	...	m., 57,	" 23rd August, treated at home.

Removals to Hospital.—Fifty-eight of the 92 cases (63 per cent.) were treated in hospital; of the cases in St. Mary's Sub-District, 65·7 per cent. were removed; from St. John's, 75·0 per cent.; and from North-West Paddington, 30·0 per cent. From the two first the removals to hospital were equal to 67·0 per cent. of the notified cases, compared with 76·1 per cent. in 1900, 77·5 per cent. in 1899, and 60·0 per cent. in 1898.

PUERPERAL FEVER.

				Paddington.		London.
Cases reported in 1901...	...	...	...	10	...	251
Average annual number, 1891-1900	...	...	...	9	...	286
Case-rate, 1901	...	...	...	0·07	...	0·05

This disease, if the notifications really represent one disease, which is doubtful, does not decrease to the extent desired. The recorded cases were 1 in excess of the average for the 10 years 1891-1900, and the case-rate, based on the total estimated population, was higher in the Borough than in the Metropolis. It was also the highest of the rates included in Table 18.

A better criterion is the proportion which the cases bear to the registered births, but this comparison cannot be made completely as the births in North-West Paddington prior to 1901 are not known.

		St. Mary.		St. John.		North-West Paddington.	
		Average		Average		Average	
		1891-1900.	1901.	1891-1900.	1901.	1891-1900.	1901.
Births	...	2,518	2,536	440	389	?	434
Cases notified	...	8	9	0	—	1	1
Per cent. of Births		0·31	0·35	0·09	—	?	0·34

SCHOOL ATTENDANCE.

In Table 20 the cases reported in connection with the schools during the year have been tabulated, distinguishing the numbers of scholars who were ill from those of patients from whose households children attended school. It has been found impracticable to prevent overlapping of the returns, so that entries occasionally appear both under "Scholars" and "Others," relating to a single case. The same error has, however, prevailed in all the preceding reports, and affects the "others" column only.

TABLE 20.

	Name of School.	Resident Attenders.				Non-resident Attenders.	
		Scarlet Fever.		Diphtheria.		Scarlet Fever.	Diphtheria.
		Scholars.	Others.	Scholars.	Others.		
Board Schools.	Amberley Road	34	59	12	22	..	..
	Beethoven Street	7	11	34	43	4	5
	Campbell Street	13	20	7	12	..	..
	Droop Street	8	14	15	22	..	..
	Essendine Road	7	17	2	18	..	1
	Harrow Road	32	42	16	34	..	..
	Kilburn Lane	5	8	28	35	9	7
	TOTALS	106	171	114	186	13	13
Other Schools.	All Saints .. .. .	..	..	..	..	..	..
	Bayswater Jewish .. .. .	..	..	..	..	..	..
	Cirencester Street R.C.	2	15	..	5	..	..
	Holy Trinity	8	11	1	2	..	..
	Queen's Park College	2	..	..	1	..	..
	St. Augustine	4	12	2	9	17	14
	St. James .. .. .	..	2	16	20	..	..
	St. John, Kilburn Lane	3	2	..	1	6	2
	" Titchborne Street	3	6	2	1	..	..
	" Training .. .. .	..	..	..	..	..	..
	St. Luke, Kilburn	7	10	3	4	8	8
	" Westbourne Park .. .. .	..	..	..	..	..	..
	St. Mary	12	26	2	8	..	1
	" of the Angels	2	5	1	1	..	..
	" Magdalene	13	29	4	16	..	..
	St. Matthew	5	3	2	2	..	..
	St. Michael	8	11	3	3	..	..
	St. Paul	8	19	3	8	..	..
	St. Peter	9	20	10	15	..	1
	St. Saviour	10	22	1	6	..	..
	St. Stephen	14	18	..	7	2	1
	Saltram Crescent High School	2	12	11	8	3	3
	Westbourne	5	2	..	7	..	2
	Wilberforce .. .. .	..	7	2	5	10	4
	Woodfield	1	3	1	1	..	..
	Wordsworth College .. .. .	..	..	..	2	1	3
	TOTALS	118	235	64	132	47	39

Owing to the inclusion of Queen's Park Ward in the Borough, the returns as regards totals, for last year are not comparable with those for the preceding years. The appended comparison of certain of the schools where there were the greatest changes in numbers will be of interest :—

Scholars reported ill with	Scarlet Fever.		Diphtheria.	
	1900.	1901.	1900.	1901.
Amberley Road Board	11	34	3	12
Campbell Street "	3	13	1	5
Harrow Road "	18	32	5	16
St. James	2	—	1	16
St. Mary	6	12	2	2
St. Mary Magdalene	9	13	3	4
St. Peter	7	9	—	10
Saltram Crescent High	4	2	5	11

In the cases of schools on the boundary the non-resident attenders, representing cases in the adjacent districts in households whence children attend the Borough Schools, are naturally more numerous than in schools in the more central parts of the Borough. This observation applies to St. Augustine, St. Luke, Kilburn, and Wilberforce Schools in particular.

Where children residing in infected houses in the Borough attend schools in outlying districts, the Medical Officer of Health has in each case been duly advised. Similar information has been received from outlying districts. During the year 116 cases were thus reported to the Department, viz., 114 from Willesden and 2 from Kensington.

The subject of school attendance has also been examined in another way, by grouping the cases according to the schools attended by the patients, or, if the patient did not attend school, by the school attended by the children of the family. Each case is thus allocated to one school only, and does not appear in the resulting tabulation more than once. This has, however, been done only for diphtheria cases at a few schools.

<i>Diphtheria.</i>							
				Scholars reported.		Non-scholars.	
Amberley Road Board	...	...	...	12	...	...	3
Beethoven Street	...	...	...	36	...	...	9
Campbell Street	...	...	...	6	...	...	5
Droop Street	...	...	...	16	...	...	6
Harrow Road	...	...	...	16	...	...	8
St. James	...	...	...	16	...	...	4
St. Luke, Fernhead Road	...	...	...	3	...	...	1
St. Peter	...	...	...	9	...	...	1
High School, Saltram Crescent	...	...	...	12	...	...	3

BACTERIOLOGICAL DIAGNOSIS.

The specimens received from the medical practitioners during the year increased from 68 in 1900 to 129 last year, 92 being from cases which were suspected to be diphtheria, and 37 enteric fever. The results are tabulated below:—

		<i>Diphtheria.</i>		<i>Enteric Fever.</i>	
Suspicion confirmed	...	47	...	22	...
„ negatived	...	45	...	15	...

In addition, one rat which had been found dead in the sewers was examined for the plague bacillus, and an unrecorded number of cats have also been examined post mortem for the *B. diphtherie*.

Hitherto no arrangements have been made for the examination of sputum in cases of suspected tubercular disease of the lung. Having regard to the highly infective character of tuberculous sputum, and to the excellent results which attend certain lines of treatment, *if adopted early in the disease*, it would be desirable to undertake the work. Tuberculosis of the lungs can often be verified by bacteriological examination before the emaciation, which is so unfavourable an association of the disease, sets in—in fact, at a time when what is known as sanatorium treatment is to be expected to do most good.

DEATHS.

The deaths registered within the Borough during the 52 weeks numbered 2,163 in all, equal to a death-rate of 15·00 per 1,000 persons, being nearly 3 (2·91 exactly) below the decennial mean rate. (*See Table I., Appendix.*) No comparison can be made between the actual number recorded and the decennial average number, as the uncorrected returns for North-West Paddington are not available.

Of the deceased persons, 1,071 were males and 1,092 females. There were 484 deaths at ages under one year, equal to an infantile mortality of 144 per 1,000 births in the whole Borough, as compared with a decennial average of 156 for the Old Parish. The chief causes of death were:—

Measles...	...	9	Phthisis	...	139
Scarlet Fever	...	2	Other Tubercular Diseases	...	82
Whooping Cough	...	52	Cancer	...	147
Diphtheria	...	30	Bronchitis	...	192
Enteric Fever	...	8	Pneumonia	...	186
Epidemic Influenza	...	38	Accidents and Violence	...	100
Diarrhoea	...	94	Suicides	...	21
Epidemic Enteritis	...	50			
Puerperal Fever	...	5			
Other Septic Diseases	...	26			

TABLE 21.
DEATHS AT ALL AGES. 1901.

Quarters.	Paddington.			Registration Sub-Districts.						N.W. Paddington.		
				St. Mary.			St. John.					
	Males.	Females.	Persons.	Males	Females.	Persons	Males.	Females.	Persons.	Males.	Females.	Persons.
1	282	349	631	191	241	432	51	74	125	40	34	74
2	240	205	445	163	149	312	42	34	76	35	22	57
3	227	242	469	167	172	339	36	35	71	24	35	59
4	247	265	512	181	188	369	32	44	76	34	33	67
Year	996	1,061	2,057	702	750	1,452	161	187	348	133	124	257
Rates *	16.13	12.86	14.26	16.90	14.45	15.54	13.89	8.48	10.35	15.47	14.49	14.98

* Ratio calculated per 1,000 individuals of each sex.

TABLE 22.
DEATHS AT ALL AGES. 1901.

Quarters.	Wards.															
	Queen's Park.		Harrow Road.		Maida Vale.		Westbourne.		Church.		Lancaster Gate.				Hyde Park.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1	40	34	59	58	37	51	34	71	69	69	11	23	10	8	22	35
2	35	22	43	36	27	31	44	41	57	42	8	8	8	8	18	17
3	24	35	48	46	20	33	42	33	61	64	4	10	8	7	20	14
4	34	33	64	47	25	31	33	56	65	57	3	10	4	8	19	23
Year	133	124	214	187	109	146	153	201	252	232	26	51	30	31	79	89
Estimated population	17,152		27,745		18,763		23,819		26,335		8,473		7,952		13,949	
Death-rates *	14.98		14.45		13.59		14.86		18.37		9.08		7.67		12.04	

* Per 1,000 persons residing in each Ward.

TABLE 23.
1901.

Wards.	Ages at Death.											
	0—1.		1—5.		5—15.		15—25.		25—65.		65 and over.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Queen's Park	35	27	20	15	7	5	3	4	38	40	30	36
Harrow Road	67	38	31	14	5	4	4	8	71	68	36	55
Maida Vale	22	27	8	10	3	6	1	3	44	46	30	54
Westbourne	38	37	14	7	2	9	8	11	64	71	28	66
Church	63	69	36	23	4	10	6	7	101	78	42	45
Lancaster Gate (West) ..	5	4	1	3	1	3	1	—	11	17	7	24
Do. do. (East) ..	—	4	3	1	—	—	—	—	19	9	8	17
Hyde Park	11	8	8	1	—	1	—	5	33	33	27	41
The Borough	241	214	121	71	22	38	23	38	381	362	208	338

TABLE 24.
DEATH-RATES, 1901.*

	All Causes.	Small-pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	Fever.	Diarrhoea.	Phthisis.	Infant Mortality.
PADDINGTON ..	14.27	—	0.06	0.07	0.45	0.36	0.10	0.80	1.09	136
London	17.08	0.05	0.42	0.12	0.29	0.35	0.10	0.85	1.65	147
Kensington ..	15.11	0.00	0.42	0.08	0.27	0.35	0.06	0.66	1.36	163
Westminster ..	15.89	0.08	0.32	0.06	0.11	0.26	0.10	0.38	1.88	134
Marylebone ..	16.57	0.05	0.06	0.13	0.24	0.30	0.06	0.78	1.12	106
Hampstead ..	10.64	0.02	0.01	0.04	0.24	0.29	0.08	0.31	0.92	104
Willesden ..	11.95	—	0.07	0.09	0.48	0.52	0.06	0.92	?	126

* Compiled from Registrar-General Quarterly Reports.

TABLE 25.
DEATHS FROM SELECTED CAUSES.

(Death at all Ages persons).	Paddington.				St. Mary.				St. John.				North-West Paddington.			
	Averages.*				Averages.*				Averages.*				Averages.*			
	1901.	1891 to 1895.	1896 to 1900.	1891 to 1900.	1901.	1891 to 1895.	1896 to 1900.	1891 to 1900.	1901.	1891 to 1895.	1896 to 1900.	1891 to 1900.	1901.	1891 to 1895.	1896 to 1900.	1891 to 1900.
Ex	—	1	0	1	—	1	0	1	—	0	—	0	—	—	—	—
... ..	9	48	61	53	9	40	48	43	—	3	4	3	—	5	9	7
Fever	11	22	16	18	9	14	11	12	1	3	2	2	1	5	3	4
ing Cough ...	51	58	52	55	36	42	40	40	7	5	3	4	8	11	9	11
ia	46	71	68	63	27	54	52	52	3	9	5	7	16	8	11	9
... ..	15	18	15	17	11	12	10	11	3	5	2	3	1	1	3	3
a	135	85	116	99	110	66	88	76	8	8	10	9	17	11	18	14
al Fever	5	6	5	5	5	4	4	4	—	1	—	0	—	1	1	1
of Parturition ...	4	13	10	11	2	8	6	7	1	2	1	1	1	3	3	3
ptic Diseases ...	18	15	15	15	15	10	11	10	2	3	3	3	1	2	1	2
a	39	87	68	76	22	61	43	51	10	21	18	19	7	5	7	6
sm	16	9	12	11	12	7	9	8	3	2	2	2	1	0	1	1
s of Liver	21	17	24	21	14	12	16	14	4	5	6	6	3	0	2	1
at Disease	148	125	143	133	94	81	97	88	34	34	31	32	20	10	15	13
... ..	151	187	176	180	117	139	128	132	16	27	24	25	18	21	24	23
tubercular Diseases	72	98	81	89	44	74	62	67	15	13	8	11	13	11	11	11
y	58	109	98	102	30	74	65	69	16	26	21	23	12	9	12	10
is... ..	199	328	283	294	152	235	201	215	32	61	32	48	15	32	50	31
nia	167	180	133	155	119	125	96	109	25	36	20	28	23	19	17	18
... ..	13	17	12	15	8	12	8	10	5	4	2	3	—	1	2	2

* Averages corrected for changes in population, and adjusted to nearest whole numbers.

"0"—an average less than unity.

"—"—no death recorded.

TABLE 25A.
Mortality Rates Selected from Causes.

Causes of Death.	Paddington.				St. Mary.				St. John.				North-West Paddington.			
	Mean Rates.				Mean Rates.				Mean Rates.				Mean Rates.			
	1901.	1891 to 1895.	1896 to 1900.	1891 to 1900.	1901.	1891 to 1895.	1896 to 1900.	1891 to 1900.	1901.	1891 to 1895.	1896 to 1900.	1891 to 1900.	1901.	1891 to 1895.	1896 to 1900.	1891 to 1900.
Small-pox ...	—	0·00	0·00	0·00	—	0·01	0·00	0·00	—	0·00	—	0·00	—	—	—	—
Measles ...	0·06	0·32	0·41	0·36	0·09	0·42	0·50	0·46	—	0·09	0·11	0·10	—	0·29	0·51	0·40
Scarlet Fever ...	0·07	0·15	0·10	0·12	0·09	0·15	0·11	0·13	0·02	0·10	0·05	0·07	0·05	0·27	0·15	0·21
Whooping Cough ...	0·35	0·41	0·36	0·38	0·38	0·44	0·43	0·43	0·20	0·14	0·08	0·11	0·46	0·76	0·53	0·64
Diphtheria ...	0·31	0·44	0·43	0·43	0·28	0·57	0·55	0·56	0·08	0·25	0·15	0·20	0·93	0·45	0·62	0·53
Fever " ...	0·10	0·12	0·10	0·11	0·11	0·12	0·10	0·11	0·08	0·15	0·05	0·10	0·05	0·06	0·18	0·12
Diarrhoea ...	0·93	0·57	0·79	0·68	1·17	0·68	0·94	0·81	0·23	0·22	0·29	0·26	0·99	0·66	1·02	0·84
Interperal Fever ...	0·03	0·03	0·03	0·03	0·05	0·04	0·03	0·04	—	0·02	—	0·01	—	0·05	0·06	0·05
Accidents and Diseases of Parturition ...	0·02	0·09	0·07	0·08	0·02	0·08	0·10	0·09	0·02	0·06	0·03	0·04	0·05	0·16	0·16	0·16
Other Septic Diseases ...	0·12	0·10	0·10	0·10	0·16	0·10	0·12	0·11	0·05	0·08	0·08	0·08	0·05	0·11	0·07	0·09
Epidemic Influenza ...	0·27	0·60	0·48	0·54	0·23	0·64	0·46	0·55	0·29	0·62	0·53	0·57	0·40	0·31	0·39	0·35
Alcoholism ...	0·11	0·06	0·08	0·07	0·12	0·07	0·09	0·08	0·08	0·04	0·07	0·06	0·05	0·01	0·06	0·03
Cirrhosis of Liver ...	0·14	0·12	0·16	0·14	0·14	0·12	0·16	0·14	0·11	0·16	0·19	0·17	0·17	0·02	0·10	0·06
Malignant Disease ...	1·02	0·87	0·99	0·93	1·00	0·86	1·05	0·95	1·01	0·99	0·91	0·95	1·16	0·59	0·86	0·73
Leishmaniasis ...	1·04	1·30	1·21	1·26	1·25	1·49	1·39	1·44	0·47	0·87	0·70	0·78	1·04	1·25	1·41	1·33
Other Tubercular Diseases ...	0·49	0·65	0·55	0·60	0·47	0·78	0·66	0·72	0·44	0·38	0·25	0·32	0·75	0·64	0·62	0·63
Epilepsy ...	0·40	0·74	0·68	0·71	0·32	0·79	0·69	0·74	0·47	0·76	0·64	0·70	0·69	0·51	0·71	0·61
Otitis ...	1·37	2·27	1·82	2·04	2·62	2·52	2·16	2·34	1·95	1·88	0·97	1·42	0·87	1·88	1·78	1·83
Pneumonia ...	1·15	1·25	0·92	1·08	1·27	1·33	1·02	1·17	0·74	1·08	0·59	0·83	1·34	1·08	1·01	1·04
Suicide ...	0·09	0·11	0·09	0·10	0·08	0·12	0·08	0·10	0·14	0·10	0·06	0·08	—	0·08	0·14	0·11

All rates per 1,000 persons at all ages.
 " 0·00 "—a rate less than 0·01 per 1,000.
 " — "—no death recorded.

TABLE 26.
Death-rates from "All Causes" and Selected Diseases.

				Death-rates* from								Infantile Mortality (0·1 year) per 1,000 births registered.
				All Causes.	Small-pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	"Fever."	Diarrhoea.	
England and Wales	1901 ...	...	...	16·9	0·01	0·27	0·13	0·27	0·30	0·16	0·91	151
	1891-1900 ...	...	...	18·2	0·01	0·41	0·15	0·26	0·37	0·17	0·70	154
33 Great Towns	1901 ...	...	...	18·6	0·02	0·43	0·17	0·30	0·36	0·17	1·23	168
	1891-00 ...	...	...	18·6	0·02	0·43	0·17	0·30	0·36	0·17	1·23	168
67 Large Towns	1901 ...	...	...	17·1	0·00	0·25	0·14	0·28	0·30	0·18	1·09	163
	1896-1900 ...	...	...	17·7	0·03	0·45	0·13	0·27	0·35	0·20	0·97	169
Rest of England and Wales	1901 ...	...	...	15·7	0·01	0·17	0·10	0·24	0·25	0·14	0·65	137
	1896-1900 ...	...	...	16·7	0·00	0·31	0·11	0·21	0·27	0·16	0·58	139
London	1901 ...	...	...	17·6	0·05	0·43	0·13	0·30	0·35	0·12	0·87	147
	1891-1900 ...	...	...	19·5	0·01	0·58	0·19	0·50	0·50	0·15	0·78	160

" 0·00 "—a rate less than 0·01 per 1,000.
 " — "—no death recorded.

* Rates calculated per 1,000 estimated living in each year. All rates have been obtained from the published returns of the Registrar-General.

In 211 cases deaths were registered after inquest held.

The 2,163 deaths recorded in the Borough included 324 of non-residents, of whom 301 died in public institutions. (*See Table VII., Appendix.*) In institutions beyond the Borough 218 deaths were registered. The "corrected," but more properly "nett," total of deaths is obtained by deducting the 324 deaths of non-residents and adding the 218 deaths of residents recorded in outlying institutions, &c. The total thus obtained is 2,057—and all future references to deaths will be limited to that number, unless otherwise expressly stated.

The 2,057 deaths of residents were equal to a rate of 14·26 per 1,000, a rate which compares very favourably with any of the rates recorded in the old Parish since 1891. The only year with a rate of less than 15·0 per 1,000 was 1897, when it was 14·64 or 0·38 higher than last year. In comparison with the mean rate for the old Parish, last year's rate was 1·24 per 1,000 under the average. (*See Table I., Appendix.*) Of resident males, 996 deaths were recorded, equal to a rate of 16·13 per 1,000 males, and of females, 1,061, equal to a rate of 12·86 per 1,000 females.

Among the residents in St. Mary's Sub-District there were 1,452 deaths, equal to a rate of 15·54, 702 of deaths being of males (rate, 16·90), and 750 of females (rate, 14·45). In St. John the rate for both sexes was 10·35; that for males 13·89, and that for females 8·48. In North-West Paddington the rates for persons, males and females, were 14·98, 15·47, and 14·49. The sex-age compositions of the various populations not being known, it is useless to speculate on the value of these rates. (*See Table 21.*)

In the Wards the death-rates per 1,000 persons ranged from a minimum of 7·67 in Lancaster Gate East to a maximum of 18·37 in Church Ward. (*See Table 22.*)

The mortality rate in the Borough was higher than those for Hampstead (10·64) and Willesden (11·95), but below the others, the highest being that of Marylebone (16·57). (*See Table 24.*)

In the Metropolis last year's rate was 17·6, being 1·9 below the decennial mean rate (19·5) and 3·0 above the rate for the Borough. In England and Wales the rate for the year was 16·9, or 1·3 below the decennial mean (18·2). (*See Table 26.*)

AGES AT DEATH.

In the absence of information as to numbers living at the various ages in the Wards and Sub-Districts of the Borough this part of the subject cannot be dealt with in the usual form. The appended table of ages at death, in six age groups, in the Wards will, however, be of interest (Table 23). The question of infantile mortality will be dealt with later on.

CAUSES OF DEATH.

In a general reference to this subject attention is directed in the undermentioned tables:—

Table IV., Appendix—Causes of death in whole Borough, distinguishing age and sex. Page 67.

Table V., Appendix—Causes of death at all ages in each Ward. Page 68.

Tables 25 & 25A, showing the deaths and death-rates at all ages from certain causes during 1901, and the mean rates for the two quinquennia and decennium between 1891 and 1900. Pages 38 and 39.

Tables 24 & 26, Various rates in the Metropolis, adjacent districts, &c. Pages 38 and 39.

SMALL-POX.

No death has been recorded in the Borough from this cause since 1896, that death occurring eighteen months after the patient's attack. One of the 22 cases reported during the past year terminated fatally in the early weeks of the current year.

It is premature to discuss the fatality of the present outbreak, but the two following interim tables are not without value as showing the influence which vaccination has upon the fatality of the disease.

Table giving particulars of 1,017 cases of small-pox treated in the hospitals of the Metropolitan Asylums Board to recovery or death during the year 1901, their condition in relation to vaccination and the mortality per cent. :—

Ages.	Vaccinated.			Doubtful.			Unvaccinated.			Total Cases and Deaths.			Ages.
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.	
Under 1 ..	..	..	..	..	..	..	17	15	88.24	17	15	88.24	Under 1
1—5 ..	1	..	..	2	2	100.00	44	24	54.55	47	26	55.32	1—5
5—10 ..	11	..	..	4	4	100.00	34	13	38.24	49	17	34.69	5—10
10—15 ..	42	1	2.38	3	1	33.33	41	14	34.15	86	16	18.60	10—15
15—20 ..	107	2	1.87	3	..	..	25	13	52.00	135	15	11.11	15—20
Total under 20 ..	161	3	1.86	12	7	58.33	161	79	49.07	334	89	26.65	
20—25 ..	132	13	9.85	8	3	37.50	9	4	44.44	149	20	13.42	20—25
25—30 ..	141	15	10.64	5	4	80.00	10	5	50.00	156	24	15.38	25—30
30—35 ..	96	17	17.71	8	4	50.00	3	3	100.00	107	24	22.43	30—35
35—40 ..	76	22	28.95	5	3	60.00	3	2	66.67	84	27	32.14	35—40
40—50 ..	102	27	26.47	14	12	85.71	6	5	83.33	122	44	36.07	40—50
50—60 ..	42	8	19.05	5	3	60.00	1	..	..	48	11	22.92	50—60
60—70 ..	10	3	30.00	3	2	66.67	1	..	..	14	5	35.71	60—70
70—80 ..	..	..	..	3	3	100.00	..	..	..	3	3	100.00	70—80
Total between 20 and 80 ..	599	105	17.53	51	34	66.67	33	19	57.58	683	158	23.13	
Grand total ..	760	108	14.21	63	41	65.08	194	98	50.52	1,017	247	24.29	

ANALYSIS OF DEATHS FROM SMALL-POX.

From commencement of epidemic to January 11th, 1902.

(From the Registrar-General's Weekly Return for 27th January, 1902.)

	Ages at Death.								
	All Ages.	0—	1—	5—	10—	15—	20—	40—	60 and upwards
Vaccinated in infancy only ..	130	..	..	..	1	3	76	45	5
Revaccinated { more than 10 years ago ..	3	..	..	..	..	..	1	1	1
{ less ditto ..	..	..	..	..	..	..	..	..	..
Vaccinated only after infection	14	7	2	..	..	1	4	..	..
Unvaccinated	116	10	35	14	16	15	19	6	1
No evidence of vaccination ..	9	..	..	..	1	..	5	3	..
Stated to have been vaccinated; scars, if any, obscured	28	..	..	3	1	..	12	1	2
Totals ..	300	17	37	17	19	19	117	65	9

MEASLES.

Last year was expected to be a non-epidemic year, but the disease became prevalent in the autumn. The deaths recorded in the year numbered 9, being 48 below both the decennial average and the total recorded in 1900. All the deaths occurred in St. Mary's Registration Sub-District. The deaths were registered in the following weeks—a statement which indicates the special prevalence during the last quarter of the year—

In the 4th week	..	1 death.	In the 50th week	..	3 deaths.
„ 48th „	..	1 „	„ 51st and 52nd weeks	2 „	each.

In the Report for 1900 (p. 44) a table was given contrasting the mortality from this disease in epidemic and non-epidemic years—the comparison being extended back to 1870. The summarized results were as follows:—

OLD PARISH.		Non-epidemic years.		Epidemic years.	
		(7 years.)		(3 years.)	
1870-79 {	Annual average number of deaths	..	28	..	70
	Mean death-rate	..	1.05	..	2.96
		(6 years)		(4 years)	
1880-89 {	Annual average number of deaths	..	29	..	66
	Mean death-rate	..	1.02	..	2.29
		(5 years)		(5 years)	
1890-99 {	Annual average number of deaths	..	12	..	83
	Mean death-rate	..	0.38	..	2.59

During the past year the corresponding returns for Queen's Park Ward have been taken out for the years 1891-1900. Adding these to the returns for Old Paddington, the following comparison is obtained—

BOROUGH.		Non-epidemic years.		Epidemic years.	
		(5 years.)		(5 years.)	
1891-1900 {	Annual average number of deaths	...	14	...	91
	Mean death-rate	...	0.10	...	0.64

Last year's rate for the whole Borough was 0.06, or 0.04 below the mean for the preceding five non-epidemic years, and 0.31 below the decennial mean rate (Table 25A). In St. Mary's Sub-District the rate was 0.09 last year, or 0.37 below the decennial mean and 0.09 below the mean rate (0.13) for the preceding five non-epidemic years. As the epidemic was still in progress at the end of the year, it appears desirable to defer further consideration of the subject until the Report for the current year is in hand.

In comparison with the adjacent districts, the rate for the Borough was lower than those for Kensington (0.42), Westminster (0.32) and Willesden (0.37). The Borough rate was below any of those included in Table 26.

SCARLET FEVER.

	1901.	1900.	1899.	1898.	1897.
Number of cases recorded	503	338	425	359	636
Number of deaths	11	5	8	11	25
Fatality *	2.2	1.5	1.9	3.1	3.9
Mortality †	0.07	0.03	0.05	0.07	0.17

The 11 deaths recorded were 7 below the decennial average (18) and half the average for the five years 1891-95. Nine of the 11 deaths were recorded among residents of St. Mary's Sub-District (See Table 25). The fatality, as measured by the number of deaths compared with the

* Per cent. of cases reported during the year.

† Per 1,000 persons estimated living in each year.

recorded cases, showed an increase from 1·5 per cent. in 1900 to 2·2 per cent. in 1901, but was below the ratios for 1898 (3·1) and 1897 (3·9). Similarly there was an increase in the mortality from 0·03 to 0·07, the rate, however, comparing well with any of the mean rates given in Table 25A.

Of the adjacent districts, Westminster (rate 0·06) and Hampstead (0·06) had rates which were lower than that recorded in the Borough, those of the other districts being all higher. (*See* Table 24.) The rate for the Borough was lower than any of those for 1901 included in Table 26.

The relative fatalities which have prevailed among cases treated at home, and those removed to hospital, are indicated below. The columns for the years previous to 1901 relate to the Old Parish.

Fatality among—	1895.	1896.	1897.	1898.	1899.	1900.	1901.
Hospital Cases	4·7	2·4	4·4	2·5	0·9	0·8	2·1
Home Cases	0·7	3·8	2·7	3·5	5·0	6·5	2·7
All Cases	3·3	2·7	4·0	2·6	1·8	1·6	2·2
Percentage of Notified Cases Removed	65·3	78·7	77·3	80·1	71·6	84·6	85·4

It should be noted that one death recorded during the year was that of an infant (f. aged 2 months) who was taken to hospital with her mother, although the child had not the fever when taken away. The child went to hospital at the request of the parents. In another case, the patient's death was certified as "childbirth 6 days, scarlet fever 5 days." The woman (aged 25) was too ill to be removed to hospital.

DIPHtheria.

	1901.	1900.	1899.	1898.	1897.
Number of cases recorded ...	343	176	296	372	383
Number of deaths	46	31	39	82	76
Fatality	13·4	17·6	13·1	22·0	19·8
Mortality	0·31	0·21	0·27	0·57	0·53

The increased prevalence already alluded to was accompanied by an increased mortality (from 0·21 to 0·31 per 1,000 of *all ages*), but not by an increased fatality. The latter, which was at the rate of 13·4 per cent. of notified cases was, with the exception of those for 1899 (13·1), the lowest of the five years 1897-1901. (*See above.*) The recorded deaths (46) were 22 below the decennial average (68). In St. Mary the recorded deaths were only one above the half of the decennial average (52), while in St. John they were less than half the average (7), but in North-West Paddington they were nearly double the average—16 deaths recorded compared with an average of 9. (*See* Table 25.) In St. Mary the fatality was equal to 13·6 per cent. of the notified cases; in St. John, to 7·5; and in North-West Paddington, 14·9. The death-rate (0·31) was 0·12 below the decennial mean rate in the Borough (0·43), half the mean rate in St. Mary, considerably less than half in St. John, and 0·40 above the mean rate (0·53) in North-West Paddington. (*See* Table 25A.)

In comparison with the rates prevailing in the adjacent districts, the rate for the Borough was exceeded only by that for Willesden (0·48), the comparison with some of the rates (*e.g.*, Westminster, 0·11) being very striking. (*See* Table 24.) The local rate was considerably higher than any of the rates mentioned in Table 26.

Diphtheria is so specially fatal in children that it would be better to give the sex-age mortalities, but until fuller information as to the results of the Census has been obtained this cannot be done. The

appended Table shows, however, the numbers recorded at various ages in more detail than does Table IV. in the Appendix.

DEATHS FROM DIPHTHERIA.

1901.	Registration Sub-Districts.					
	St. Mary.		St. John.		North-West Paddington.	
Ages at Death. Years.	M.	F.	M.	F.	M.	F.
0—1	—	2	—	—	—	—
1—5	12	3	2	1	5	5
5—10	2	5	—	—	1	2
10—15	1	1	—	—	—	1
15 and upwards.	—	1	—	—	1	1

The fatalities prevailing among cases treated in hospital and at home are indicated in the appended statement, the returns up to 1900 relating to Old Paddington:—

Fatality among—	1895.	1896.	1897.	1898.	1899.	1900.	1901.
Hospital Cases	16·6	27·6	17·9	21·0	13·6	24·6	10·3
Home Cases	25·2	27·2	24·1	31·5	17·1	10·3	24·6
Total Cases	20·6	27·6	20·1	24·8	14·2	17·5	13·4
Percentage of Notified Cases Removed to Hospital ...	53·0	50·0	63·9	64·3	82·7	71·4	78·7

FEVER.*

	1901.	1900.	1899.	1898.	1897.
Number of cases reported	92	69	112	88	55
Number of deaths	15	14	14	20	11
Fatality	16·3	20·3	12·5	22·7	20·0
Mortality	0·10	0·09	0·09	0·14	0·07

The 15 deaths were two below the annual average for the decennium, the reduction having occurred in North-West Paddington. The numbers for the quinquennia and the decennium indicate the slight fluctuations which take place in the actual number of deaths which have occurred in each of the past ten years. As regards the mortality, the only change worthy of note is the reduction recorded in North-West Paddington from a decennial mean rate of 0·12 to a rate of 0·05 last year. (See Tables 25 and 25A.)

The "fever" rates in the adjacent districts (See Table 24) were, with the exception of Marylebone (rate of 0·60) and Westminster (0·10), below that for the Borough. The local rate was below any of the rates recorded in London, or in the sub-divisions of the country. (See Table 26.)

* In the local returns this term is synonymous with "enteric (typhoid) fever," in other districts it includes "typhus" and "simple continued" fevers, diseases which are practically extinct in the Borough.

The fatalities among hospital and home cases during the past seven years are indicated below—the figures for the years prior to 1901 being for the Old Parish:—

Fatality among—	1895.	1896.	1897.	1898.	1899.	1900.	1901.
Hospital Cases	19.2	16.6	—	7.2	7.1	13.1	17.6
Home Cases	22.7	38.4	31.0	61.9	17.1	35.7	14.7
All Cases	21.4	25.8	15.5	22.6	10.2	18.6	16.3
Percentage of Notified Cases Removed	37.1	58.0	51.1	60.0	77.5	76.1	63.0

PUERPERAL FEVER.

	1901.	1900.	1899.	1898.	1897.
Number of cases reported	10	6	8	6	7
Number of deaths... ..	5	7	6	5	2
Fatality	50.0	116.6	75.0	100	28.5
Mortality	0.03	0.04	0.04	0.03	0.01

The figures given above indicate pretty clearly that the notification of this disease, or these diseases, is not of the same character as is that of the other diseases. In 1900 either all the cases were not reported or the certification of the causes of death was based on a different plan.

The mortality-rate calculated per 1,000 persons estimated living is an unsatisfactory standard. At present rates either per 1,000 females at childbearing ages cannot be given. A more certain indication of the maternal loss of life in childbirth is furnished by adding the deaths from "accidents of childbirth" to those from "puerperal fever." The following were the total numbers of such deaths and of births registered in each Registration Sub-District during 1901:—

1901.	St. Mary.	St. John.	North-West Paddington.
Puerperal Fever	5	—	—
Accidents and Diseases of Childbirth	2	1	1
Total	7	1	1
Births registered	2,536	389	434
Mortality, per cent. of births	0.27	0.25	0.23

WHOOPIING COUGH.

	1901.	1900.	1899.	1898.	1897.
Deaths recorded	51	38	53	50	55
Mortality	0.35	0.26	0.37	0.35	0.39

The deaths from this disease were 4 below the average for the decennium, the three Sub-Districts sharing in the slight diminution. The figures given above show that the annual variation is but slight, the disease being prevalent to an almost equal extent each year. The disease is only limited to young children, in its fatal form at least, and the mortality-rate should be calculated on the numbers living at ages under 5 years.

The variations in the mortality in the adjacent districts is but slight, if Willesden be excluded, ranging from 0.26 in Westminster to 0.35 in Kensington (Table 24). In Willesden the mortality was 0.52.

The mortality in "Rest of England and Wales" (Rural England) (0.25) was the only one below the local rate (Table 26).

Attention has been called in earlier reports to the differences in the mortalities from the notifiable and the non-notifiable diseases. The rates in 1901 were as below :—

Notified Diseases.				Not notified.			
Small-pox	...	...	—	Measles	...	...	0.06
Scarlet Fever	...	...	0.07	Whooping Cough	...	...	0.35
Diphtheria	...	...	0.31				
"Fever"	...	...	0.10				
			0.48				0.41

Owing to measles being non-epidemic the total rates for the two groups are more nearly equal than in 1900, when they were :—

Notified diseases, 0.33.

Not notified, 0.62.

TUBERCULAR DISEASES.

	1901.	1900.	1899.	1898.	1897.
Phthisis—					
Deaths recorded	151	166	169	194	155
Mortality ...	1.04	1.15	1.18	1.37	1.10
Other forms—					
Deaths recorded	72	79	67	89	80
Mortality ...	0.49	0.55	0.46	0.62	0.56

The tubercular mortality (1.53) was 0.33 below the mean rate (1.86). The phthisis rate (1.04) was the lowest recorded during eleven years, while that from "other forms" was lower last year than in any year except 1889, when it was 0.46. In St. Mary the tubercular mortality was 1.72, compared with a mean rate of 2.16; in St. John the rate was 0.91 and the mean 1.10; and in North-West Paddington the rate was 1.79 and the mean 2.02. The complete figures will be found in Tables 25 and 25A.

In the Report for 1900 (p. 55) attention was drawn to the favourable position which the Old Parish enjoyed in comparison with other Metropolitan districts. A similar comparison cannot be made at present, but in comparison with the adjacent districts, the rate for Hampstead last year (0.92) was the only one below that for Paddington. The highest rate was that for Westminster (1.88).

The foregoing rates are all calculated per 1,000 persons of all ages living. The appended tabulation shows that such rates are of but little value on account of the differences in incidence of mortality at the various ages and on the two sexes—factors which are by no means constant in the different Boroughs. (See Table 27.)

The number of deaths in each of the Wards from Tuberculosis (3 forms) will be found in Table V., in the Appendix (p. 68). The total deaths recorded in each Ward and the death-rate are given below :—

1901.	Deaths.	Rates.	1901.	Deaths.	Rates.
Queen's Park	31	1.80	Church	67	2.54
Harrow Road	36	1.29	Lancaster Gate (West) ..	6	0.70
Maida Vale	28	1.49	Do. (East)	3	0.37
Westbourne	38	1.59	Hyde Park	14	1.00

In the absence of information as to sex-age composition of the populations, and of the "housing" conditions prevailing in the Wards, it is useless to comment on the rates recorded.

TABLE 27.
DEATHS FROM TUBERCULAR DISEASES,
1901.

Ages.	Phthisis.						Other Tubercular Diseases.					
	St. Mary.		St. John.		North-West Paddington.		St. Mary.		St. John.		North-West Paddington.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0—1	..	..	..	..	..	..	7	6	2	3	2	2
1—5	2	..	..	..	..	..	7	5	..	3	2	1
5—10	..	2	..	..	..	..	1	4	1	1	1	..
10—15	..	2	..	..	..	..	1	2	..	1	..	..
15—20	2	3	..	1	..	1	..	2	..	1	..	..
20—25	4	4	1	1	2	2	..	2	..	..	..	1
25—35	12	16	3	1	1	4	2	1	..	1	..	..
35—45	20	8	1	1	1	1	..	2	..	..	1	1
45—55	16	9	2	..	3	..	..	..	2	..	..	..
55—65	5	3	4	1	1	..	..	..	..	..	..	1
65 and over.	3	6	..	..	2	..	..	2	..	..	..	1
TOTALS ..	64	53	11	5	10	8	18	26	5	10	6	7

MALIGNANT DISEASES : CANCER.

The deaths from the various forms of malignant new growths decreased from 152 in 1900 to 148 last year. The recorded deaths were, however, 15 in excess of the average for the decennium, 23 in excess of the average for the five years 1891-95, and 5 in excess of that for the five years 1896-1900. Increases were recorded in each of the Sub-Districts, but in St. Mary last year's deaths (94) were 3 less than the annual average for the second quinquennium (97). (See Table 25.)

The deaths from "cancer" have not in previous reports been tabulated for the Wards. The figures and rates for 1901 are as below:—

1901.	Deaths.	Rates.	1901.	Deaths.	Rates.
Queen's Park ..	20	1.16	Church	23	0.80
Harrow Road ..	29	1.04	Lancaster Gate (East) ..	10	1.18
Maida Vale ..	18	0.95	Do. (West) ..	7	0.88
Westbourne ..	24	1.00	Hyde Park ..	17	1.21

TABLE 28.
DEATHS FROM "CANCER."
1901.

Ages at Death.	Registration Sub-District.						Paddington.
	St. Mary.		St. John.		North-West Paddington.		
	Males.	Females.	Males.	Females.	Males.	Females.	Persons.
Under 5 years.	..	..	..	..	..	..	..
5-25 "	2	1	..	..	..	..	3
25-35 "	..	3	..	1	..	1	5
35-45 "	3	7	..	3	1	4	18
45-55 "	12	12	5	4	1	3	37
55-65 "	9	19	6	3	1	5	43
65-75 "	7	7	1	6	2	1	24
75-85 "	1	9	2	3	..	1	16
85-95 "	..	..	..	2	..	..	2
95- "	..	..	..	..	..	..	..
ALL AGES.	34	58	14	22	5	15	148

TABLE 29.
DEATHS FROM "CANCER."
1901.
Classified according to situation.

	St. Mary.				St. John.				North-West Paddington.			
	C.		O.		C.		O.		C.		O.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Nervous System ..	..	..	..	..	..	..	..	..	..	..	..	..
2. Organs of Special Sense ..	..	..	..	1	..	..	..	..	..	..	..	..
3. Respiratory System ..	2	..	1	..	..	..	..	..	..	..	..	..
4. Circulatory System ..	..	..	..	..	..	..	..	..	..	..	..	..
5. Digestive System—												
(a) Mouth ..	4	..	1	..	1	..	..	..	..	1	..	1
(b) Throat ..	4	1	..	..	1	..	..	..	..	1	..	..
(c) Intestines—												
i. Stomach ..	3	5	..	..	3	3	..	..	..	1	..	..
ii. Bowel ..	3	7	..	..	2	2	..	..	..	1	..	..
iii. Rectum ..	3	4	..	..	1	..	..	..	3	..	..	..
(d) Organs—												
i. Liver ..	5	3	1	..	3	2	..	..	1	1	..	..
ii. Pancreas ..	..	..	..	..	..	..	..	..	..	..	..	..
(e) Peritoneum ..	..	..	..	..	..	..	..	..	..	..	..	..
(f) Omentum ..	..	..	..	..	..	..	..	..	..	..	..	..
6. Lymphatic System ..	1	1	1	1	1	1	..	..	..	..	..	..
7. Urinary System ..	1	..	1	..	..	..	..	..	1	..	..	..
8. Generative System—												
(a) Ovary ..	..	..	..	1	..	..	..	..	..	..	..	..
(b) Uterus ..	..	19	..	1	..	4	..	2	..	5	..	..
(c) External Organs ..	..	1	..	..	1	..	..	1	..	..	..	..
(d) Breast ..	..	7	..	..	..	3	..	3	..	2	..	1
9. Osseous System—												
(a) Head ..	1	..	..	..	1	..	..	..	..	..	..	..
(b) Thorax ..	..	..	..	..	..	..	..	..	..	..	..	..
(c) Abdomen ..	..	..	..	..	..	..	1	..	..	..	..	..
(d) Extremities ..	..	..	..	1	..	..	..	..	..	..	..	..
10. Cutaneous System ..	1	..	..	1	..	..	..	..	..	..	..	2
11. Insufficiently described ..	1	3	..	1	..	..	..	..	..	..	..	..
TOTALS ..	29	51	5	7	14	15	..	7	5	11	..	4

"C." includes cancer, carcinoma, and malignant disease.

"O." includes sarcoma, scirrhus, epithelioma, &c.

"M."—Males.

"F."—Females.

It is noteworthy that in Church Ward, where the tubercular mortality was highest last year, the "cancer" mortality was lowest. In Lancaster Gate (West) Ward the "cancer" mortality was only 0·88 and the tubercular 0·37, the lowest of the series.

In Table 28 the incidence of mortality *quâ* sex and age is given, and in Table 29 the deaths have been tabulated according to the nature of the "malignant" growth and the part affected.

The corresponding returns for previous years *for the Borough* are not yet ready, but will be taken out during the current year.

No returns are available as to prevalence in the adjacent districts or elsewhere.

INFANTILE MORTALITY.

During the year 484 deaths were registered at ages under 1 year, equal to a mortality of 144 per 1,000 births registered. After correcting for deaths of non-residents and for deaths of residents registered outside the Borough, a nett total of 455 deaths is obtained, equal to a rate of 135 per 1,000 births registered.* Information has not yet been obtained of the number of births recorded in North-West Paddington during 1891-1900, so that no comparison can be made for the Borough with the numbers of previous years.

The deaths recorded in each quarter of the year will be found in Table 30, and more detail as to numbers dying during the year at various ages under 1 year in Table 31.

In St. Mary's Registration Sub-District the mortality last year was at the rate of 138 per 1,000 births, compared with a mean rate of 156; in St. John the rate last year was 102, and the mean rate 132; and in North-West Paddington last year's rate was 142.

In the adjacent districts the mortality ranged from 104 per 1,000 births in Hampstead to 163 in Kensington. (See Table 24.) The rate of 106 in Marylebone is in all probability due to the presence of Queen Charlotte's Hospital swelling the number of births registered, while the infants die in other districts. In the Metropolis the rate last year was 147, compared with a decennial mean of 160. (See Table 26.)

The number of deaths due to each of certain selected causes of death will be found in Table 32. In the absence of any comparative returns little can be said. Attention may, however, be called to the total number of deaths due to "Diseases of Development" and to "Infantile Diarrhœa" in all its forms.

DISEASES OF DEVELOPMENT.				INFANTILE DIARRHŒA.			
		M.	F.			M.	F.
Premature Birth .. ..	..	30	29	Diarrhœa .. ..	..	58	61
Congenital Malformations ..	..	11	14	Gastro-Enteritis .. ..	..	3	2
Injury at Birth .. ..	..	2	2			61	63
Dentition .. ..	..	6	5				
Atrophy and Debility .. ..	..	24	23				
		73	73				

* It should be noted that it is impossible to correct the births as is done in the case of the deaths. Unknown numbers of non-resident women are delivered at the Infirmary, and of resident at the Queen Charlotte and other lying-in hospitals.

TABLE 30.
Deaths under One Year
1901.

	Quarters.								Year.	
	1		2		3		4			
Wards.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Queen's Park	8	8	10	5	14	9	3	5	35	27
Harrow Road	14	11	11	8	22	12	20	7	67	38
Maida Vale	6	8	8	3	5	13	3	3	22	27
Westbourne	9	13	3	7	16	11	10	6	38	37
Church	16	10	15	8	16	30	16	21	63	69
Lancaster Gate, West	3	2	2	..	..	1	..	1	5	4
Lancaster Gate, East .. ..	..	..	..	1	..	3	..	..	..	4
Hyde Park	3	1	2	1	3	2	3	4	11	8
Registration Sub-Districts.										
St. Mary	42	40	37	26	59	65	48	37	186	168
St. John	9	5	4	2	3	7	4	5	20	19
North-West Paddington.. ..	8	8	10	5	14	9	3	5	35	27
Borough	59	53	51	33	76	81	55	47	241	214
Births registered	464	422	407	411	464	386	413	392	1,748	1,611
Mortality (per 1,000 births) ..	127	125	125	80	163	209	133	119	137	132

TABLE 31.
Infantile Mortality. Ages at Death.
1901.

Age at Death.	Registration Sub-Districts.					
	St. Mary.		St. John.		North-West Paddington.	
	M.	F.	M.	F.	M.	F.
Under 1 week	36	23	5	3	6	5
1—4 weeks	26	27	2	4	5	4
1—3 months	47	33	3	3	9	5
3—6 "	39	43	4	2	8	5
6—9 "	19	24	6	3	4	3
9—12 "	19	18	..	4	3	5
Total under 1 year	186	168	20	19	35	27
1—5 years	85	53	16	6	20	12

TABLE 32.
Deaths under One Year.
1901.

Causes of Death.	Registration Sub-Districts.					
	St. Mary.		St. John.		North-West Paddington	
	M.	F.	M.	F.	M.	F.
Small-pox.. ..	..	..	..	..	..	..
Measles	1	..	..	..	..	..
Scarlet Fever .. ..	..	1	..	1	..	..
Whooping Cough	10	6	2	1	4	..
Diphtheria .. ..	..	2	..	..	..	..
Enteric Fever .. ..	..	..	..	..	..	..
Diarrhœa.. ..	47	52	3	3	8	6
Influenza .. ..	..	..	..	..	..	..
Syphilis	6	1	..	..	..	..
Tubercular Disease	7	6	2	3	2	2
Premature Birth.. ..	19	20	3	2	8	7
Congenital Malformations	8	9	1	3	2	2
Injury at Birth	1	1	..	1	1	..
Dentition	3	2	2	1	1	2
Rickets .. ..	..	..	..	..	..	..
Atrophy and Debility	21	20	1	1	2	2
Gastro-Enteritis	3	1	..	1	..	..
Convulsions	9	7	1	1	1	..
Respiratory Dis.	26	17	1	1	2	4
Accident and Violence	9	4	..	..	..	..
All other causes	16	19	4	..	4	2
All causes.. ..	186	168	20	19	35	27
Births Registered	1,315	1,221	204	185	229	205
Infantile Mortality *	141	138	98	102	152	121

* Per 1,000 births of each sex.

TABLE 33.
Deaths of Illegitimate Children, 1901.

Ages.						St. Mary.		St. John.		N.-W. Paddington.	
						M.	F.	M.	F.	M.	F.
0—1	..	..	..	..	..	18	25	..	3	4	5
1—5	..	..	..	..	..	2	..	1	..	1	1
5 and over	..	..	..	..	..	1	2	..	..	..	..
Totals ..						21	27	1	3	5	6

TABLE 34.
Illegitimate Children—Causes of Death.

1901.						0—1.		1—5.		5 and over.	
						M.	F.	M.	F.	M.	F.
Whooping Cough	..	..	..	..	..	1	..	..	..	..	..
Diarrhœa	..	..	..	..	..	4	5	..	1	..	..
Epidemic Enteritis	..	..	..	..	..	4	3	..	..	..	..
Syphilis	..	..	..	..	..	2	..	1	..	..	..
Erysipelas	..	..	..	..	..	..	1	..	..	..	..
Other Septic Diseases	..	..	..	..	..	..	1	..	..	..	..
Tubercular Diseases	..	..	..	..	..	1	3	..	..	..	2
Premature Birth	..	..	..	..	..	1	8	..	..	..	..
Developmental Diseases	..	..	..	..	..	4	7	..	..	..	..
Nervous Diseases	..	..	..	..	..	2	..	..	..	..	..
Respiratory Diseases	..	..	..	..	..	1	4	2	..	..	..
Acute Nephritis	..	..	..	..	..	..	..	1	..	..	..
Accidents	..	..	..	..	..	1	1	..	..	1	..
Murder	..	..	..	..	..	1	..	..	..	..	..
Totals ..						22	33	4	1	1	2

Occupations of Mothers.

Domestic Servants	..	..	..	..	47	Commercial Employment	..	..	..	8
“ Servant ”	..	..	..	..	9	Dressmaker	..	..	..	3
Cook	..	..	..	..	16	Barmaid	..	..	..	2
General Servant	..	..	..	..	6	Laundress	..	..	..	2
Chambermaid	..	..	..	..	1	Ironer	..	..	..	1
Housemaid	..	..	..	..	7					
Parlourmaid	..	..	..	..	4	Foundlings, parents not known	..	..	..	2
Nurse	..	..	..	..	2					
Kitchenmaid	..	..	..	..	1	Occupation not known	}	..	..	6
Ladysmaid	..	..	..	..	1	Not occupied				

These two groups of diseases were accountable for 270 out of 455 deaths, and by far the greater proportion of such deaths were preventible. Ten deaths were due to suffocation whilst in bed with the parent(s).

Illegitimate Mortality.—Sixty-three deaths of illegitimate children were recorded, of whom 55 were under one year of age. The infantile mortality was at the rate of 413 per 1,000 illegitimate children born, compared with a rate of 124 among legitimate children. Inquests were held with reference to 6 deaths of illegitimates. Information as to causes of deaths and occupations of the mothers will be found in Tables 33 and 34.

INQUEST CASES.

In the Borough 211 deaths were registered after inquest, 59 of the deceased persons being non-residents. Outside the Borough 15 inquests were held with reference to deaths of residents. The nett total of deaths registered on the Coroner's certificate was 167, equal to 8.1 per cent. of all deaths. (*See Table 35, next page.*)

Suicide.—The deaths from suicide in the Borough (13) were 2 below the average, but were above the average by the same amount in St. John's Registration Sub-District. There was no death from this cause in North-West Paddington.

DEATHS IN PUBLIC INSTITUTIONS.

In Table VI., Appendix (page 69), will be found the numbers of deaths recorded from local and outlying institutions. In the Borough 658 deaths were recorded in institutions, 301 of the deceased persons being non-residents. In outlying institutions, &c., 218 deaths were recorded (17 taking place in the streets, private houses, &c.). In all 458 deaths of residents, equal to 22.2 per cent. of all deaths, were returned from public institutions. Table VII., Appendix, gives the figures for the past 10 years for the Local Institutions.

ADMINISTRATIVE WORK.

The usual statistical summary of inspections made and works completed will be found in Table VIII. in the Appendix (page 70.)

PREVENTION OF INFECTIOUS DISEASE.—The routine adopted after notification of cases has been described in former reports. The visits made by the Staff in connection with such cases totalled 1,855 last year compared with 1,544 in 1900, in addition to which the Medical Officer of Health visited many of the cases, but no statistical record has been made of such visits. "Letters of Advice," covering extracts from the Public Health (London) Act, 1891, and the Factory and Workshops Acts, were sent out to 156 homes, or 73 more than in 1900. The Department disinfected 1,227 rooms during the year, as compared with 1,002 in 1900 (measles epidemic) and 767 in 1899. In 13 cases the disinfection was done privately.

NOTIFICATION.—A somewhat peculiar defect in the notification provisions of the Public Health Act has come to knowledge during the year. A certain practitioner not on the Medical Register failed to report two cases of infectious illness which he had under treatment. When proceedings were initiated they were found to be useless, on the ground that while the Act provides for notification by the householder and certification by the medical practitioner (the words used in Section 55 of the Public Health (London) Act, 1891, are "Every medical practitioner"), the reference in the Act is to a "medical practitioner" registered under Section 34 of the Medical Act, 1858. Although proceedings might lie against a householder who failed to notify an infectious case in his household under the care of an unregistered practitioner, it is doubtful whether guilty knowledge could be established against the householder.

TABLE 35.
Inquests on Residents—1901.

Finding of Jury.	Registration Sub-Districts.					
	St. Mary.		St. John.		North-West Paddington.	
	M.	F.	M.	F.	M.	F.
Natural Causes.. ..	83	30	13	4	3	2
By Misadventure	1	1	..	1	..	1
By Accident	31	11	5	..	5	2
Suicide	4	5	4	..	..	..
Manslaughter .. ..	..	..	..	..	..	..
Murder	1	..	..	..	..	..
Neglect at Birth .. ..	..	1	..	..	..	..
Self Neglect	2	..	..	..	..	..
Weather Agencies	4	..	..	..	1	..
"Open"	2	..	..	..	..	..
Totals	78	48	22	5	9	5

NOTES OF CASES.

Deaths by Misadventure—4.

1 epileptic, drowned in bath. | 2 poison taken for drink.
1 choked by food.

Deaths by Accident—54.

Vehicular traffic ... 6	Clothes catching fire	} 8	Falls, various... .. 17
Railway traffic ... 5	Scalds		Overlaid in bed ... 10
Building operations 3	Drowning	2	Suffocated 1
	Explosion of steam pipe	} 1 each.	
	Wounded by skewer		

Weather Agencies—5.

All heat apoplexy.

"Open"—2.

M., 50, found drowned in Regent's Canal.
M., newly born, found dead in street, cause of death "congestion of brain."

Suicides—13. Males, 8; Females, 5.

	M.	F.		M.	F.
Poison	3	3	Cut-throat	1	—
Hanging	1	—	Jump from window, &c. 1	—	—
Shooting	2	1	Crushing	—	1

HOSPITAL ACCOMMODATION.—There was some slight delay in securing accommodation during the early weeks of the fourth quarter, owing to the sudden demand for beds for small-pox. This demand involved the clearing of hospitals near Dartford which had in the earlier part of the year been in use for convalescents from the fever hospitals. The trouble only lasted for two or three weeks, and was not acute at any time.

According to the latest information the accommodation provided and projected by the Asylums Board is as follows:—

For fevers—

Including diphtheria, and scarlet, enteric, typhus and relapsing fevers,
5,274 beds provided in 11 hospitals, and
800 beds projected in 1 hospital.

Two of the 12 hospitals, viz.: the “Northern,” at Winchmore Hill, and the “Southern” (not yet built) are for convalescents. The total number of beds at these hospitals is 1,452.

For small-pox—

2,400 beds provided at the “Ships” and on shore (3 hospitals).
1,740 beds projected at 2 land hospitals.

A certain number of beds are lost to general purposes on account of the need of providing isolation of special or doubtful cases. The Board are also, at present, keeping beds available for plague cases.

The ordinary “standard” provision for the isolation of infectious cases is 1 bed to every 1,000 inhabitants. Estimating the present population of the Metropolis at $4\frac{1}{2}$ millions, the number of beds required would be 4,500 for the treatment of all classes of infectious disease which are usually removed to hospital. The Board’s hospitals (including those projected but not yet in operation) contain 10,214 beds, or about double the “standard” proportion. It has also to be borne in mind that the London Fever Hospital provides beds for scarlet fever cases, and that all or nearly all the general hospitals receive patients suffering with diphtheria or enteric fever. There ought, therefore, to be in the hospitals built and building sufficient accommodation for the needs of the Metropolis.

SCHOOLS.—In consequence of the prevalence of diphtheria, an Order was issued on October 18th, under Article 88 of the Education Code requiring the closure of the infant department of Beethoven Street (Board) School for three weeks. The effect of such Order may be gathered from the appended statement.

DIPHThERIA.

Cases reported during week ending				St. Mary.	St. John.	North-West Paddington.
September	21st	..	..	3	1	6
“	28th	..	..	3	1	6
October	5th	..	..	15	..	12
“	12th	..	..	7	..	9
“	19th	..	..	6	1	10
“	26th	..	..	4	1	6
November	2nd	..	..	12	1	3
“	9th	..	..	3	3	3
“	16th	..	..	6	2	2

By far the greater proportion of children attending the School resided in the Sub-District North-West Paddington, but many came from St. Mary’s.

Although there was an undue prevalence of diphtheria among the children attending St. James, School, it was not found necessary to close the school.

FAMILY SHELTER.—During the year 24 families, comprising 99 persons, 42 adults and 57 children, were accommodated here. In 1900 15 families were received, and in 1899, 21. Only one

family stayed for more than one night. The introduction of the spray method of disinfection has rendered the shelter less necessary than it was when all disinfection was done with sulphur fumes.

DISINFECTION.—Messrs. Armfield & Sons are still doing the disinfection and cleansing of bedding and other articles. There were a few complaints during the autumn of articles not returned. The reason assigned was great pressure of work, and satisfactory settlement was made in each case.

The expenditure under this head was £991 for last year, as compared with—

£856 in 1900.	£1,203 in 1898.
£947 in 1899.	£1,109 in 1897.

The actual weight of goods removed was a little over 42 tons, compared with 38½ tons in 1900. In 1898 44 tons were dealt with.

A case of small-pox occurred among Messrs. Armfield's employes in November, but it has not been demonstrated that the infection was due to his handling infected goods. The need of protecting the workers by vaccination was strongly pressed on the Firm when small-pox threatened to prevail. The question of the Council undertaking this work has yet to be settled. To disinfect and cleanse goods as now done would be found more expensive if done by the Council than by a contractor. It might prove advantageous for the Council themselves to disinfect and to contract for the subsequent cleansing.

DISINFECTION OF ROOMS.—The use of sulphur has been gradually given up during the year, and spraying with formaldehyde solution substituted. Apart from the increased efficiency of the latter process, it has the advantages of being, on the whole, cheaper, and of not keeping the occupants out of their houses. The expenditure for disinfectants of all kinds amounted to £58, or £18 less than in 1900.

HOUSES LET IN LODGINGS.—The enforcement of the Bye-laws under Section 94 was almost entirely in abeyance during the year. No houses were added to the register, but those houses already registered were inspected, and the annual whitewashing enforced as far as was possible.

On May 13th of last year the case of *Weatheritt v. Cantlay* was decided in the King's Bench. The question at issue was whether a block of artisans' dwellings came within the purview of Section 94 of the Public Health (London) Act, 1891, as a house let in lodgings or occupied by members of more than one family. The Court held that a building which was divided into separate tenements and let as artisans' dwellings was not a "house" within the meaning of the Section (*see* 65 J. P., 629). In other words, where a house is divided up into tenements, each with its own front door, such house cannot be registered as a house let in lodgings. If lodgers be taken in by the occupiers of the tenements then each tenement can be registered.

REMOVAL OF OFFENSIVE REFUSE.—The Bye-law to amend that framed by the London County Council under Section 16 (2) of the Public Health (London) Act, 1891, in 1893, came into operation in October last. The chief result of the amendment is to require peat-moss manure to be carried through the streets in "a suitable carriage or vessel properly constructed, and furnished with a sufficient covering so as to prevent the escape of any matter or liquid therefrom, and so as to prevent any nuisance arising therefrom."

Proceedings were necessary during the summer for transporting offensive refuse through the streets during the proscribed hours. Particulars of the cases taken into Court will be found under "Legal Proceedings" (page 72).

DUST WHARVES.—Since the closure of Wharf No. 20, North Wharf Road, there have been no complaints of nuisance from any of the Wharves. The case against the occupier of Wharf No. 20, not completed at the date of last Report, was completed during the year, and fines and costs amounting to £10 2s. were imposed.

The old Paddington Act has been repealed since the last Report was written, and accumulations on the Wharves can now only be dealt with under the Bye-laws of the London County Council made under the provisions of Section 16 (2) of the Public Health (London) Act, 1891.

HOUSING OF THE WORKING CLASSES ACT.—No measures were taken during the year against any property. Two reports were prepared for the "Housing" Committee. The first an interim report contained statistics of the approximate housing conditions, sickness and mortality rates in three special districts of the Borough, viz :—

North Wharf Road Area.
Hall Park Area.
Clarendon Street Area.

During the vacation a second and more complete report dealing with the last-named Area was prepared, for which purpose a house-to-house visitation was carried out, involving inquiries at every tenement in the Area.

CUTTING OFF OF WATER SUPPLY.*—Notices were received of discontinuance of supply to 110 houses, 77 being supplied by the Grand Junction Water Works Co., and 33 by the West Middlesex Water Works Co. In 1900 140 cases were reported. The alleged reasons for discontinuing the supply were :—

	Grand Junction.	West Middlesex.
Houses uninhabited	49	23
Repairs to fittings	20	4
Unpaid rates	3	3
Houses coming down	—	3
Supply not required	4	—
House not identified	1	—

There has been a decrease in the number of discontinuances of supply since the Department began to systematically inquire into the subject in November, 1899, as will be seen from the appended statement :—

Numbers of Notices received from	1898.	1899.	1900.	1901.
Grand Junction Co.	100	86	100	77
West Middlesex Co.	110	43	40	33

The numbers will fluctuate from year to year, according to the frequency of accidents, frost, or demolition of houses. Nevertheless, the reduction in the number of notices received cannot be regarded other than satisfactory.

The intervals which elapsed between the discontinuance of supply and its restoration are given below :—

Supply restored	Grand Junction.	West Middlesex.
Same day as cut off	13†	1
Next day	—	2
After 2 days	4	—
" 3 "	2	1
" 4 "	—	—
" 5 "	2	—
" 6 "	—	1
" 7 or more days	2	1

A house without a proper supply of water is, by Section 48 of the Public Health (London) Act, 1891, unfit for habitation, and by Sub-Section 7 of Section 5 of that Act must, on complaint to a Magistrate, be closed. Every effort is made by the Department to secure early re-establishment of the supply, but in one case it was necessary to have the house closed.

INHABITED HOUSE DUTY.—No applications were received for certificates of exemption under the Customs and Inland Revenue Acts, 1890 and 1891.

* A resumé of legislation dealing with Water Supply will be found in the Annual Report for 1900, p. 83.

† In five cases the supply was restored before the notice was received by the Department.

HOUSE DRAINAGE.—During the year 572 drains were reported by the Inspectors as having been re-constructed, tested with water, and found sound, while 101 old drains similarly successfully stood test. Most of the latter had been re-constructed under the supervision of the Department, which now has records of re-constructed drains dating from the close of 1889.

COMBINED DRAINAGE.—Reports and plans were submitted to the Public Health Committee dealing with systems at—

Nos. 1-7 (odd), Westbourne Park Crescent.	}	Alexander Mews.
Nos. 8-24 (even), Westbourne Terrace North.		Nos. 38-50 (even) Westbourne Gardens.
Nos. 1-9 (odd), Westbury Terrace.	}	Nos. 17-21 (odd), Clifton Road.
Nos. 2-16 (even), Westbury Road.		Nos. 1-6, Chichester Mews.
Nos. 196-210 (even), Harrow Road.	}	Nos. 2-24 (even), Blomfield Street.
Nos. 55-67 (odd), Artesian Road.		Nos. 2-6 (even), Artesian Road.
Nos. 5A and 7, Clifton Villas.		

The re-construction of the various systems, except that of Nos. 55-67, Artesian Road, carried out by the owners as two new combined drains, was referred to the Works Committee.

Orders were made by the Council under Section 74 of the Metropolitan Management Act, 1855, for new combined drains at—

No. 13, Blomfield Road, and Studio in rear.	Nos. 1a, 2a, and 3a, Newlan Row, Oxford Mews.
Nos. 130 and 132, Herries Street.	Nos. 203 and 205, Harrow Road.
Nos. 34 and 36, Warrington Crescent.	

A Special Report dealing with a portion of the system of combined drains on the Queen's Park Estate was presented to the Council during the autumn of the year.

BYE-LAWS *re* DRAINAGE.—The Bye-laws made by the London County Council under Section 202 of the Metropolitan Management Act, 1855, draft of which was submitted to the Vestry as early as January, 1897, were sanctioned by the Local Government Board on May 26th of last year, and came into force in the following June. The Bye-laws under the "Metropolis Management Acts Amendment (Bye-laws) Act, 1899" have not yet received the sanction of the Local Government Board.

APPEAL TO THE LONDON COUNTY COUNCIL.—For the first time in seven years an appeal was lodged last year with the County Council under Sections 211 and 212 of the Metropolis Management Act, 1855, against an order made by the Sanitary Authority of the Borough respecting drainage works. The appeal was taken against a notice requiring the soil-pipe at No. 68, Westbourne Terrace to be re-constructed in accordance with the Bye-law No. 4 made pursuant to Section 39 (1) of the Public Health (London) Act, 1891. The builder who had the work in hand fixed a new soil-pipe inside the house with several unnecessary bends. The Bye-law (since repealed) prescribed that "whenever practicable" the soil-pipe should be outside the house. It was quite practicable to so fix it, and the decision rested on the question of the local authority being in a position to waive a bye-law when no provision for such discretionary power has been included in the bye-law. The Borough Council was represented by the Medical Officer of Health who referred the Appeal Committee to the decision given in *Yabbiacom v. King*, decided in the Queen's Bench Division on January 13th, 1889 (63 J. P. 149). The Solicitor to the County Council advised that there was no discretionary power to waive the provision of the bye-law, and the Committee decided in favour of the Borough Council. The soil-pipe was subsequently altered in accordance with the requirements of the bye-law.

COMMON LODGING HOUSES.—There are 9 houses registered for this purpose within the Borough. The registration and inspection of such houses rests with the London County Council, but occasional visits are paid by the Inspectors of the Public Health Department. Frequent calls to inquire as to sickness (especially small-pox) were made during last winter. Up to the end of 1901 no case of small-pox was reported among the inhabitants of these houses.

It seems desirable that the London County Council should retain the registration of common lodging houses and be empowered to make any regulations necessary for their proper management. On the other hand, the detail work of inspection and supervision in general ought to be left to the Borough Council's officials.

MORTUARIES.—The Council has two mortuaries—one on Paddington Green, behind the Coroner's Court, and the other in Kensal Road. The former is in course of enlargement and reconstruction. When complete the accommodation provided will comprise a coroner's mortuary (view room, post-mortem room, microscope room, lavatories, and exhibition case), an infectious mortuary and mortuary chapel, each being a separate building.

The mortuary at Kensal Road is of modern construction, and comprises shell room and post-mortem room. The place is but little used, but it cannot be abandoned so long as Queen's Park Ward is in a separate coroner's district. Inquests relating to deaths in the Ward are held in the large room at the Wedlake Street Office. It might be worth considering whether an arrangement could not be made with the Council of Kensington for a joint user of this mortuary. The only mortuary at present erected in Kensington is that in rear of the Vestry Hall, opposite to the High Street Station. An additional mortuary for North Kensington would save much time and labour for the residents therein.

PETROLEUM LAMPS.—By direction of the Public Health Committee a report was drawn up by the Medical Officer of Health dealing with accidents arising from the use of petroleum lamps and presented to the Council on 5th March, 1901. The report contained recommendations drafted for the guidance of the public, which have since been included in the sheet which is annually issued to residents of the Borough.

WORKSHOP SUPERVISION.—Rather more work was accomplished during the year in workshops and workplaces, as may be seen from the appended statement.

TABLE 36.
SPECIAL INSPECTIONS.

1901.	Workrooms Inspected.	Workrooms Measured.	Slaughter- houses Inspected.	Dairies, Cowhouses, and Milkshops Inspected.	Bakehouses Inspected.	Eating-houses Inspected.	Totals.
1st Quarter	71	28	4	102	18	6	229
2nd „	20	13	2	76	—	—	111
3rd „	15	11	2	—	21	3	52
4th „	350	106	—	8	12	34	510
Totals	456	158	8	186	51	43	902

No separate record has been kept of notices served in connection with this work in the past, nor have the results of such inspections, as to dirty conditions or other matters, been distinguished from other cases reported on. Better records will be kept in connection with the work of the Special Inspectors.

From the Home Office 25 complaints, chiefly of overcrowding and dirty conditions, were received and duly attended to.

In the spring of last year the Factory and Workshops Acts Amendment Bill, 1901, and the

Factory and Workshops Acts Consolidation Bill, 1901, were introduced into the House of Commons. The two Bills formed the subject of a special report by the Medical Officer of Health, presented to the Council on July 2nd. As was anticipated, the Bills were consolidated, and the resulting Bill, the Factory and Workshops Bill, 1901, became law on August 17th last. The Act was the subject of a special report presented to the Council on December 17th last, which report was subsequently adopted by the Metropolitan Branch of the Incorporated Society of Medical Officers of Health as an Official Memorandum of the duties of Metropolitan Officials. The work and responsibility of the Department have been greatly increased by that Act, and special recommendations as to increase of the Staff of the Department were in consequence submitted by the Public Health Committee to the Council on December 18th last, and adopted.

SMOKE NUISANCE.—Complaints were received during the summer of black smoke from the shafts attached to (a) Usher's Brewery, Queen's Road, and (b) the Generating Station, Amberley Road (Metropolitan Electric Supply Corporation, Ltd.) After observations had been taken, the matter was reported to the Public Health Committee and proceedings were instituted. The results of these are recorded in the Summary of Legal Proceedings (page 72).

CANAL BOATS ACTS.—The customary Report of the Examiner of Canal Boats was presented to the Council on February 18th last. Two cases of infectious illness (one each of enteric fever and diphtheria) were reported on boats within the Borough, and four deaths were registered in the Borough of persons living on boats, including 2 from diphtheria.

FOOD SUPERVISION.—On 2nd October last, in the course of an inspection of a restaurant in Porchester Road, a parcel of meat and fish was found in a putrid condition. The food was evidently in store for preparation and sale in the restaurant. The inspector seized it and it was condemned by the Magistrate at the Marylebone Police Court. Summonses were subsequently issued against the proprietor of the restaurant, F. Verani, and a fine obtained. Verani subsequently gave up the restaurant. (See "Summary of Legal Proceedings," page 72.)

The above was the only occasion on which unsound food was discovered and dealt with during the year.

It may not be out of place here to refer very briefly to the question of tuberculosis and meat supply. Up to July, 1901, when Prof. Koch gave his address at the Congress on Tuberculosis, it was universally agreed that tuberculosis in man and in animals was one and the same disease, although there was not the same unanimity of opinion as to the risks incurred by the consumption of the flesh of tuberculous animals or as to amount of tubercular lesion which justified total condemnation.

Prof. Koch expressed the views, which he said were supported by his experiments, that bovine tuberculosis was not identical with human; that human tuberculosis could not be communicated to animals; and that the chances of any transference from cattle to man either through meat or milk were so insignificant as to render it inadvisable to take any steps to obviate such risks. It is needless to say that such views, diametrically opposed to generally accepted beliefs, were and have not been received with acquiescence. At the meeting which Prof. Koch addressed, the speakers following him, all recognized authorities on the subject, did not hesitate to express their doubts, if not actual dissent. Prof. McFadyean, Principal of the Royal Veterinary College, who gave an address to the Congress two or three days after Prof. Koch, largely re-wrote his address to combat the views put forward by the latter. The doubts as to the correctness of Prof. Koch's pronouncement were so grave and general that the Congress adopted a resolution expressing the opinion that "medical officers of health should continue to use all the powers at their disposal and relax no effort to prevent the spread of tuberculosis by milk and meat." The Local Government Board also issued in September last a Special Circular pointing out the duties of medical officers of health in this direction and practically endorsing the resolution of the Congress.

In view of the great importance of Prof. Koch's dictum, the Government in the autumn appointed another Royal Commission (the third on the tuberculosis question) to inquire and report:—

- (1) Whether tuberculosis in animals and man is one and the same disease;
- (2) Whether animals and man can be reciprocally infected with it;
- (3) Under what conditions, if at all, the transmission of the disease from animals to man takes place, and what are the circumstances, favourable or unfavourable, to such transmission.

The Commission cannot be expected to report for some time to come. In the meantime the only logical course is to act on the rules which have hitherto prevailed—to accept the two forms of the disease as identical and reciprocally transmissible, and to spare no effort to prevent such transmission.

INFECTIOUS DISEASE AND MILK.—In June of last year the London County Council issued a circular letter embodying reports of their Public Health Committee of 9th May and 11th June, dealing with certain difficulties which the Committee had experienced in dealing with an outbreak of scarlet fever due to an infected milk supply in North-East London. The Committee recommended the Council to initiate legislation to increase the powers of local authorities to check epidemics due to milk in several important details, and to obtain for themselves power to stop the sale of milk in London as a whole. The same report also dealt with the question of milk from cows affected with tubercular disease of the udder. The Committee recommended the Council to seek large powers to prevent the sale of such milk, and to prevent tubercular cows being kept in dairy sheds. The Committee's recommendations were adopted, and the provisions required are included in the London County Council's (General Powers) Bill, 1902, Part VIII.

ICE-CREAM.—On 17th July, 1901, the London County Council issued a circular letter covering copy report of their Public Health Committee (dated 4th July) on the question of the manufacture and storage of ice-cream—or more correctly, “hokey-pokey.” The Committee recommended that powers should be obtained to regulate the manner of making and storing ice-creams, and to secure prompt report of the occurrence of infectious disease. The Committee's proposals were adopted, and the necessary clauses included in Part IX. of the General Powers Bill already mentioned.

SALE OF FOOD AND DRUGS ACTS.—A summary of the articles submitted to the Public Analyst during 1901 will be found in Table IX, Appendix. The results of the legal proceedings instituted with respect to the adulterated samples are set out on page 73, together with notes of previous convictions on record against the defendants, and other notes (page 74).

The average amount of fine and costs per conviction fell last year to £2 16s. and 15s. respectively, making £3 1s. in all, as compared with £4 6s. 3d. in 1900, and £3 19s. in 1899. These results point to the necessity of having a minimum limit for fines for second and subsequent offences. By the Act of 1899, increased maxima were enacted for such offences, but nothing was done to prevent trifling fines being imposed. Adulteration is so profitable that an occasional fine has but little deterrent effect. For some reason the cases are but rarely reported in the daily press.

On August 5th last, the Board of Agriculture, in exercise of their powers conferred by Section 4 of the Sale of Food and Drugs Act, 1899, made the following regulations fixing a standard for milk:—

MILK.

1. Where a sample of milk (not being milk sold as skimmed, or separated, or condensed, milk) contains less than 3 per cent. of milk-fat, it shall be presumed for the purposes of the Sale of Food and Drugs Acts, 1875 to 1899, until the contrary is proved, that the milk is not genuine, by reason of the abstraction therefrom of milk-fat, or the addition thereto of water.

2. Where a sample of milk (not being milk sold as skimmed, or separated, or condensed, milk) contains less than 8.5 per cent. of milk-solids other than milk-fat, it shall be presumed for the purposes of the Sale of Food and Drugs Acts, 1875 to 1899, until the contrary is proved, that the milk is not genuine, by reason of the abstraction therefrom of milk-solids other than milk-fat, or the addition thereto of water.

SKIMMED OR SEPARATED MILK.

3. Where a sample of skimmed or separated milk (not being condensed milk) contains less than 9 per cent. of milk-solids, it shall be presumed for the purposes of the Sale of Food and Drugs Acts, 1875 to 1899, until the contrary is proved, that the milk is not genuine, by reason of the abstraction therefrom of milk-solids other than milk-fat, or the addition thereto of water.

The standard came into operation on September 1st last.

A newly introduced process for the sophistication of butter has received more attention during the past year than any other matter connected with food adulteration. It has been discovered that the amount of water retained by butter can be greatly increased by re-churning the butter with whole milk. Butter when well made contains not more than 16 per cent. of water, and many samples much less—*e.g.*, the “hard” colonial butters. It is with these that the sophistication is carried out.

The vendors buy “hard” butters containing (say) 10 or 12 per cent. of water, re-churn with whole milk, thereby increasing the amount of water to anything up to 25 per cent., put the “butter” up in an attractive form and resell at an advanced price. In spite of the expense for milk, re-churning, &c., the “butter” can still be sold at a price below that of genuine butter of fair quality, and considerable profits obtained.

The first proceedings against the vendors of this “butter” were taken by the Council of this Borough. The case was dismissed because it was impossible to bring forward proof that any water had been added to the butter, while it was admitted that water was not only natural to butter, but might be present in excess owing to careless preparation. Shortly after this decision, similar cases cropped up in different parts of the country, and ultimately the re-churning process was disclosed. The “butter” is now sold with a wrapper bearing the following:—“This is choicest butter, “blended with pure English full cream milk, whereby the percentage of water is increased to about “twenty per cent.,” and under the present law it has been decided that no conviction can be obtained under Section 6 of the Sale of Food and Drugs Act, 1875.

FOOD PRESERVATIVES.—The Committee appointed by the Local Government Board on 10th July, 1899, to consider the question of the use of preservatives and colouring matters in foods, reported at the beginning of 1901.

The reference to the Committee was that they were “to inquire into the use of preservatives and colouring matters in the preservation and colouring of food and to report:—

“(1) Whether the use of such materials, or any of them, for the preservation and colouring of food, in certain quantities, is injurious to health, and if so, in what proportion does their use become injurious.

“(2) To what extent, and in what amounts, are they so used at the present time.”

The Committee report that the following preservatives were said to be in use in addition to those which have been used from time immemorial (*e.g.*, salt, vinegar, &c.) :—

Boric acid and borates.	Sulphurous acids and sulphites.
Fluorides.	Salicylic acid.
Benzoic acid and benzoates.	Formalin or formaldehyde.

Evidence of the use of various colouring matters was put in, among them being :—

Sulphate of copper (preserved peas).
 Annatto (milk, butter).
 Coal tar dyes (*e.g.*, Congo-red in sausages, &c.).

The recommendations of the Committee were :—

(a) That the use of formaldehyde or formalin, or preparations thereof, in food or drinks be absolutely prohibited, and that salicylic acid be not used in a greater proportion than 1 grain per pint in liquid food and 1 grain per pound in solid food. Its presence in all cases to be declared.

(b) That the use of any preservative or colouring matter whatever in milk offered for sale in the United Kingdom be constituted an offence under the Sale of Food and Drugs Acts.

(c) That the only preservative which it shall be lawful to use in cream be boric acid or mixtures of boric acid and borax, and in amount not exceeding 0·25 per cent., expressed as boric acid. The amount on such preservative to be notified by a label upon the vessel.

(d) That the only preservative permitted to be used in butter and margarine be boric acid or mixtures of boric acid and borax, to be used in proportions not exceeding 0·5 per cent., expressed as boric acid.

(e) That in all cases of dietetic preparations intended for the use of invalids or infants chemical preservatives of all kinds be prohibited.

(f) That the use of copper salts in the so-called greening of preserved foods be prohibited.

(g) That means be provided either by the establishment of a separate Court of Reference or by the imposition of more direct obligation on the Local Government Board to exercise supervision over the use of preservatives and colouring matters in foods, and to prepare schedules of such as may be considered inimical to the public health.

The President of the Local Government Board, in replying to latest question as to his intentions to give effect to the Committee's recommendations, got no further than to state that he was considering the Report of the Committee.

APPENDIX.

TABLE I.

Gross Returns of Births and Deaths.

Year	Population estimated to middle of each Year. †	Births.		Deaths under 1 Year of Age.		Deaths at all Ages. Total.		Deaths in Public Institu- tions.	Deaths of Non- residents registered in District.	Deaths of Residents registered beyond District.	Deaths at all Ages. (Nett Returns.)	
		Number.	Rate.*	Number.	Rate per 1,000 Births registered.	Number.	Rate.*				Number.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1891 ...	118,066	2,952	25.00	437	148	2,331	19.74	695	359	105	2,077	17.58
1892 ...	118,962	2,934	24.66	435	147	2,294	19.28	610	305	120	2,109	17.72
1893 ...	119,866	3,011	25.11	459	152	2,327	19.41	606	369	172	2,130	17.76
1894 ...	120,782	2,834	23.46	392	138	1,918	15.87	615	293	193	1,818	15.05
1895 ...	121,704	2,979	24.47	497	166	2,249	18.47	554	306	156	2,099	17.24
1896 ...	122,644	3,068	25.01	499	162	2,098	17.10	672	316	160	1,942	15.83
1897 ...	123,583	3,010	24.35	477	158	1,941	15.70	519	294	163	1,810	14.64
1898 ...	124,537	2,965	23.80	504	170	2,186	17.55	600	330	174	2,030	16.30
1899 ...	124,902	2,940	23.69	466	158	2,205	17.76	606	298	155	2,062	16.61
1900 ...	126,477	2,890	22.85	461	159	2,307	18.24	708	401	155	2,061	16.29
Averages for Years 1891-1900	122,271	2,958	24.24	463	156	2,186	17.91	618	327	155	2,014	16.50
† 1901 ...	144,188	3,359	23.29	484	144	2,163	15.00	652	324	218	2,057	14.26

* Rates calculated per 1,000 persons living at all ages. (All prior to 1901, re-calculated.)

† Populations re-estimated on Census Returns 1901.

‡ Returns for 1901 for New Borough: Other years for Old Parish.

TABLE II.
 Nett Returns of Births and Deaths.

Names of Localities.	PARISH* (BOROUGH) 1.—PADDINGTON.				2.—REGISTRATION SUB-DISTRICT ST. MARY.				3.—REGISTRATION SUB-DISTRICT ST. JOHN.				4.—REGISTRATION SUB-DISTRICT NORTH-WEST PADDINGTON.			
	†Population estimated to middle of each Year.	Births registered.	Deaths at all Ages.	Deaths under 1 Year.	†Population estimated to middle of each Year.	Births registered.	Deaths at all Ages.	Deaths under 1 Year.	†Population estimated to middle of each Year.	Births registered.	Deaths at all Ages.	Deaths under 1 Year.	†Population estimated to middle of each Year.	Births registered.	Deaths at all Ages.	Deaths under 1 Year.
Year.	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.
1891 ...	118,066	2,952	2,077	430	84,382	2,420	1,582	356	33,684	532	495	74	18,340	Not known.	299	82
1892 ...	118,962	2,934	2,109	418	85,286	2,456	1,632	348	33,676	478	477	70	18,218		303	97
1893 ...	119,866	3,011	2,130	450	86,199	2,567	1,685	407	33,667	444	445	43	18,096		269	89
1894 ...	120,782	2,834	1,818	384	87,122	2,423	1,449	344	33,660	411	369	40	17,975		238	68
1895 ...	121,704	2,979	2,099	490	88,054	2,526	1,671	426	33,650	453	428	64	17,855		280	98
1896 ...	122,644	3,068	1,942	477	88,996	2,613	1,583	415	33,648	455	359	62	17,736		316	92
1897 ...	123,583	3,010	1,810	448	89,950	2,586	1,455	403	33,633	424	355	45	17,617		288	88
1898 ...	124,537	2,965	2,030	476	90,912	2,558	1,663	419	33,625	407	367	57	17,500		308	91
1899 ...	124,902	2,940	2,062	443	91,286	2,555	1,709	407	33,616	385	353	36	17,383		308	88
1900 ...	126,477	2,890	2,061	477	92,869	2,479	1,675	425	33,608	411	386	52	17,267		275	68
Averages of Years 1891 to 1900.	122,271	2,958	2,014	449	88,625	2,518	1,611	395	33,646	440	403	54	17,803		288	86
1901 ...	144,188	3,359	2,057	455	93,424	2,536	1,452	353	33,612	389	348	40	17,152	434	257	62

Deaths of "non-residents" dying in the Parish have been excluded, and deaths of "residents" recorded in other parts of the Metropolis, included.
 No corrections applied to births.

* Up to 1900—Returns are for Old Parish. Those of 1901 for New Borough.

† Re-estimated (by adjustment) on basis of Census of 1901.

TABLE III.
Notification Returns 1891-1901.

REGISTRATION SUB-DISTRICTS ..				1891	1892	1893	1894	1895	1896	1897	1898	1899	1900	1901
ST. MARY—POPULATION ..				84,021	84,816	85,820	86,734	87,658	88,591	89,534	90,488	91,451	92,425	93,424
Fevers	Small-pox .. ..	..	..	2	3	62	23	9	4	1	..	..	1	18
	Cholera .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Diphtheria .. ..	..	..	154	132	229	330	198	187	266	224	179	128	192
	Memb. Croup .. ..	..	..	2	2	8	10	11	8	9	4	2	3	4
	Erysipelas .. ..	..	..	126	94	206	94	92	97	110	112	125	104	111
	Scarlet .. ..	..	..	217	408	628	238	345	664	431	253	313	254	394
	Typhus .. ..	..	..	..	..	1	..	..	..	..	..	..	2	..
	Enteric .. ..	..	..	54	31	53	50	53	43	34	61	80	51	70
	Relapsing .. ..	..	..	..	..	..	..	1	..	..	..	..	..	..
	Continued .. ..	..	..	2	1	5	2	..	1	..	2	1	3	..
	Puerperal .. ..	..	..	4	7	15	3	8	11	7	5	7	6	9
TOTALS				561	678	1,207	750	717	1,015	858	661	707	552	798
ST. JOHN—POPULATION ..				33,780	33,763	33,746	33,729	33,712	33,695	33,678	33,660	33,643	33,623	33,612
Fevers	Small-pox .. ..	..	..	..	..	9	5	1	..	..	..	..	4	4
	Cholera .. ..	..	..	..	..	..	..	1	..	1	..	..	..	..
	Diphtheria .. ..	..	..	24	38	55	42	28	47	46	30	22	23	40
	Memb. Croup .. ..	..	..	..	1	2	..	..	..	1	..	..	..	..
	Erysipelas .. ..	..	..	9	21	36	27	12	20	26	18	21	16	15
	Scarlet .. ..	..	..	46	131	148	51	71	126	60	50	69	48	71
	Typhus .. ..	..	..	..	..	..	..	..	..	..	..	1	..	..
	Enteric .. ..	..	..	13	18	12	20	17	18	11	13	17	5	12
	Relapsing .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Continued .. ..	..	..	1	..	1	1	..	..	..	..	..	..	..
	Puerperal .. ..	..	..	..	..	3	1	..	..	..	..	..	..	..
TOTALS				93	209	266	147	130	211	145	111	130	96	142
NORTH-WEST PADDINGTON } —POPULATION }				18,340	18,218	18,096	17,975	17,855	17,736	17,617	17,500	17,383	17,267	17,152
Fevers	Small-pox .. ..	..	..	..	..	7	3	1	..	..	..	..	..	..
	Cholera .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Diphtheria .. ..	..	..	33	28	35	40	29	47	58	113	92	20	106
	Memb. Croup .. ..	..	..	1	4	..	1	..	..	3	1	1	2	1
	Erysipelas .. ..	..	..	21	20	27	16	14	25	17	17	23	19	15
	Scarlet .. ..	..	..	68	114	110	73	116	119	145	56	43	36	38
	Typhus .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Enteric .. ..	..	..	5	5	8	9	9	3	10	12	14	10	10
	Relapsing .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Continued .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Puerperal .. ..	..	..	..	..	..	5	2	2	..	1	1	..	1
TOTALS				128	171	187	147	171	196	233	200	174	87	171

TABLE IV.
CAUSES OF DEATH AT VARIOUS AGES IN EACH SEX.
PADDINGTON.
1901.

Corrected for Non-Residents dying within the Borough, and (as far as possible) for Residents dying without the Borough.

Causes of Death.	Under 1.		1—5.		5—15.		15—25.		25—65.		65 and Upw'rs.		All Ages.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	F.
Small-pox .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles	1	..	7	1	..	..	..	..	..	..	..	..	8	1	9
Scarlet Fever .. .. .	..	2	3	4	..	..	1	..	..	1	..	..	4	7	11
Typhus Fever .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Epidemic Influenza .. .. .	..	..	..	..	..	1	1	3	8	7	6	13	15	24	39
Whooping-cough	16	7	16	11	..	1	..	..	..	..	..	..	32	19	51
Diphtheria, Membranous Croup..	..	2	19	9	4	9	1	..	..	1	..	1	24	22	46
Croup .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever .. .. .	..	..	..	1	1	1	3	1	5	3	..	..	9	6	15
Asiatic Cholera .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diarrhoea, Dysentery	37	40	2	4	..	..	..	..	1	2	1	3	41	49	90
Epidemic or Zymotic Enteritis ..	21	21	2	..	..	..	..	..	..	..	1	1	23	22	45
Enteritis	3	2	..	..	..	..	..	..	..	2	..	..	3	4	7
Other Continued Fevers .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas .. .. .	..	3	..	..	..	..	..	1	2	2	1	2	3	8	11
Puerperal Fever .. .. .	..	..	..	..	..	..	2	..	3	..	..	..	..	5	5
Other Septic Diseases:—	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Infective Endocarditis .. .. .	..	..	..	..	..	..	..	..	1	..	..	..	1	..	1
Cellulitis .. .. .	..	..	..	..	..	..	..	..	2	..	..	..	2	..	2
Pyæmia .. .. .	..	1	..	1	..	..	..	1	..	..	..	..	..	3	3
Ulcerative Stomatitis .. .. .	..	1	..	..	..	..	..	..	..	..	..	..	..	1	1
Intermittent Fever and Malarial Cachexia	..	..	..	..	..	..	..	..	1	..	..	..	1	..	1
Tuberculosis of Meninges	5	4	6	7	1	5	..	2	..	..	..	..	12	18	30
Tuberculosis of Lungs .. .. .	..	..	2	..	..	4	9	12	69	44	5	6	85	66	151
Other Forms of Tuberculosis	6	7	3	2	3	3	..	4	5	6	..	3	17	25	42
Alcoholism .. .. .	..	..	..	..	..	..	..	..	7	7	2	..	9	7	16
Cancer .. .. .	..	..	..	..	1	..	1	1	38	65	13	29	53	95	148
Premature Birth	30	29	..	..	..	..	..	..	..	..	..	..	30	29	59
Developmental Diseases	44	44	8	1	..	1	..	..	..	..	..	..	52	46	98
Old Age .. .. .	..	..	..	..	..	..	..	..	..	1	27	59	27	60	87
Meningitis	3	2	3	2	2	1	1	2	1	..	..	..	10	7	17
Inflammation and Softening of Brain	..	..	..	..	..	..	..	..	..	..	7	8	7	8	15
Organic Diseases of Heart .. .. .	..	..	..	..	2	..	..	..	13	20	5	12	20	32	52
Acute Bronchitis	13	14	8	7	..	1	..	..	7	8	8	14	36	44	80
Chronic Bronchitis .. .. .	..	..	..	..	..	..	..	1	19	22	31	46	50	69	119
Lobar (Croupous) Pneumonia .. .. .	..	1	..	..	..	..	..	..	8	2	2	2	10	5	15
Lobular (Broncho-) Pneumonia	16	7	15	6	1	1	..	..	5	5	4	9	41	28	69
Diseases of Stomach	1	3	..	1	..	1	..	2	4	5	1	3	6	15	21
Obstruction of Intestines	1	2	..	..	..	1	..	..	2	3	1	2	4	8	12
Cirrhosis of Liver .. .. .	..	..	..	..	..	..	..	..	6	10	2	3	8	13	21
Nephritis and Bright's Disease .. .. .	..	..	1	..	..	..	..	..	16	8	15	14	32	22	54
Tumours and Other Affections of Female Genital Organs	..	..	..	..	..	..	..	1	..	7	..	1	..	9	9
Accidents and Diseases of Parturition ..	..	..	..	..	..	..	..	1	..	3	..	..	..	4	4
Deaths by Accident or Negligence	9	4	9	3	2	..	..	..	25	7	6	3	51	17	68
Deaths by Suicide .. .. .	..	..	..	..	..	..	..	..	8	5	..	..	8	5	13
Deaths from Ill-defined Causes	3	..	..	..	..	..	..	..	1	1	1	1	5	2	7
Syphilis	6	1	1	..	..	..	..	..	2	..	..	..	9	1	10
Rheumatic Fever .. .. .	..	..	..	..	..	1	..	..	2	4	..	..	2	5	7
Convulsions	11	8	..	2	..	..	..	..	..	..	2	1	13	11	24
Apoplexy .. .. .	..	..	..	..	..	..	..	..	4	11	6	8	10	19	29
" Heart Disease " .. .. .	..	..	..	..	1	1	2	..	23	27	12	24	38	52	90
Cerebral Hæmorrhage .. .. .	..	..	..	..	..	..	..	..	6	6	6	11	12	17	29
Pneumonia	8	3	12	6	1	2	1	1	16	13	20	10	48	35	83
All Other Causes	7	6	4	3	3	4	3	3	74	51	34	49	125	116	241
ALL CAUSES	241	214	121	71	22	38	23	38	381	362	208	338	996	1061	2057

TABLE V.

DEATHS AT ALL AGES, DISTRIBUTED ACCORDING TO WARDS AND SEXES.

1901.

Corrected for Non-Residents dying within the Borough, and (as far as possible) for Residents without the Borough.

Causes of Death.	Queen's Park.		Harrow Road.		Maida Vale.		West-bourne.		Church.		Lancaster Gate (West).		Lancaster Gate (East).		Hyde Park.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Small-pox .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles .. .. .	..	..	4	..	..	..	2	..	2	1	..	..	..	..	..	..
Scarlet Fever	1	..	3	1	..	1	..	2	..	2	..	..	..	..	..	1
Typhus Fever .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Epidemic Influenza	1	6	2	2	2	1	4	5	1	6	..	2	2	..	3	2
Whooping-cough	6	2	7	8	2	2	6	3	6	3	2	..	2	..	1	1
Diphtheria, Membranous Croup	7	9	9	3	2	2	2	1	3	6	..	1	..	..	1	..
Croup .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever	1	..	1	1	2	1	4	..	..	2	1	1	..	..	..	1
Asiatic Cholera .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diarrhoea, Dysentery	4	6	8	9	4	4	10	7	11	19	1	..	..	..	3	4
Epidemic or Zymotic Enteritis	4	3	6	2	1	7	3	3	9	7	..	..	..	..	..	..
Enteritis .. .. .	..	..	..	..	1	1	..	1	2	..	..	..	..	1	..	1
Other Continued Fevers .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas .. .. .	..	1	1	2	..	..	..	1	2	3	..	..	..	..	..	1
Puerperal Fever .. .. .	..	..	..	2	..	..	..	3	..	..	..	..	..	..	..	..
Other Septic Diseases .. .. .	..	..	..	..	..	..	2	2	1	2	..	..	..	..	..	..
Intermittent Fever and Malarial Cachexia .. .. .	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..
Tuberculosis of Meninges	1	3	3	4	1	1	3	4	4	3	..	..	..	2	..	1
Tuberculosis of Lungs	10	8	14	9	12	9	11	16	31	20	1	2	1	..	5	2
Other Forms of Tuberculosis	5	4	3	3	2	3	2	2	1	8	1	2	..	..	3	3
Alcoholism	1	..	1	2	3	..	1	4	1	..	..	..	1	..	1	1
Cancer	5	15	9	20	6	12	7	17	13	10	2	8	7	..	4	13
Premature Birth	8	7	10	3	2	3	3	7	4	8	..	..	..	..	3	1
Developmental Diseases	9	7	11	8	6	4	7	8	15	14	1	2	..	1	3	2
Old Age	5	6	5	11	3	10	4	11	3	9	3	1	..	2	4	10
Meningitis	2	1	..	2	2	1	2	2	4	..	..	..	..	..	..	1
Inflammation and Softening of Brain	1	..	1	1	1	2	3	2	..	3	..	..	..	..	1	..
Organic Diseases of Heart	3	5	5	4	1	4	3	7	7	6	..	2	1	..	..	4
Acute Bronchitis	1	5	9	10	3	9	5	6	13	8	..	2	1	2	4	2
Chronic Bronchitis	6	3	5	17	5	13	11	15	18	9	2	4	..	3	3	5
Lobar (Croupous) Pneumonia	4	..	..	1	..	1	2	2	2	1	..	..	1	..	1	..
Lobular (Broncho-) Pneumonia	5	1	15	3	3	4	6	6	10	7	..	3	..	2	2	2
Diseases of Stomach .. .. .	..	2	2	3	..	2	2	3	1	4	..	..	..	..	1	1
Obstruction of Intestines .. .. .	..	1	..	..	1	1	..	3	2	2	..	1	..	..	1	..
Cirrhosis of Liver	1	2	..	2	4	1	1	1	1	4	..	1	..	1	1	1
Nephritis and Bright's Disease	5	1	6	4	4	..	4	6	8	4	1	2	1	2	3	3
Tumours and other Affections of Female Genital Organs .. .. .	..	..	..	2	..	..	..	2	..	2	..	..	..	1	..	2
Accidents and Diseases of Parturition .. .. .	..	1	..	2	..	..	..	..	..	..	..	..	..	..	..	1
Deaths by Accident or Negligence	6	3	12	2	3	4	9	1	18	6	1	..	..	1	2	..
Deaths by Suicide .. .. .	..	..	2	1	..	..	1	1	2	2	1	..	1	1	1	..
Deaths from Ill-defined Causes .. .. .	..	..	1	1	1	1	..	..	2	..	..	..	..	..	1	..
Syphilis	1	..	4	..	2	..	2	..	..	1	..	..	..	..	..	..
Rheumatic Fever .. .. .	..	..	..	1	1	..	..	..	2	..	1	..	1	..	..	..
Convulsions	1	..	2	2	5	4	..	2	3	3	1	..	1	..	..	..
Apoplexy	3	1	4	2	..	..	1	4	1	2	..	1	1	3	..	6
"Heart Disease"	1	5	7	14	3	7	11	7	10	12	..	2	2	..	4	5
Cerebral Haemorrhage	4	4	1	1	2	4	3	2	2	2	..	..	..	1	..	3
Pneumonia	10	3	13	5	3	7	2	7	16	5	2	4	1	2	1	2
All Other Causes	11	9	28	17	16	20	14	23	22	25	6	9	7	6	21	7
ALL CAUSES	133	124	214	187	109	146	153	201	252	232	26	51	30	31	79	89
POPULATIONS, 1901	17,152	27,745	18,763	23,819	26,335	8,473	7,952	13,949								

TABLE VI.
Causes of Deaths in Institutions, 1901.

Causes of Death.	Local Institutions.				Deaths of Residents recorded beyond the Borough.					
	Workhouse and Infirmary.	St. Mary's Hospital.	Children's Hospital.	Other Institutions.	Hospitals of Metropolitan Asylums Bld.	Special and General Hospitals.	Lunatic Asylums.	Poor Law Institutions.	Elsewhere.	
Small-pox .. .. .	..	..	..	..	..	..	..	..	..
Measles	1	..	..	..	..	..	..	..	..
Scarlet Fever .. .. .	..	..	..	..	9	..	..	..	..
Influenza .. .. .	..	..	..	..	..	..	..	..	..
Whooping Cough .. .. .	..	..	1	..	..	..	..	..	..
Diphtheria .. .. .	..	7	5	..	23	..	..	..	..
Enteric Fever .. .. .	..	3	..	..	7	1	..	..	..
Diarrhoea	1	7	5	..	..	..	2	1	1
Epidemic Enteritis	2	1	9	..	..	..	..	1	..
Erysipelas	4	1	..	..	..	..	..	..	..
Puerperal Fever	1	1	..	..	..	1	..	..	..
Other Septic Diseases	1	6	2	1	..	1	..	..	..
Tuberculosis of Lungs	35	13	2	..	..	11	8	2	..
Other Forms of Tuberculosis	7	17	19	..	..	4	1	3	..
Alcoholism	1	..	..	..	..	..	..	..	1
Cancer	23	28	..	..	..	20	1	2	2
Premature Birth	3	1	1	1	..	4	..	..	..
Developmental Diseases	3	6	9	..	..	1	..	2	..
Old Age	17	..	..	..	..	1	..	3	..
Bronchitis	25	4	1	..	..	3	3	2	..
Pneumonia	7	9	3	1	..	1	..	..	1
Cirrhosis of Liver	1	8	..	..	..	..	..	1	..
Accidents of Childbirth .. .. .	..	1	..	..	..	1	..	..	..
Accidents	7	44	6	..	..	4	..	2	1
Suicides	1	3	..	..	..	1	..	..	2
All Other Causes	98	157	29	8	2	27	25	18	9	
All Causes	238	317	92	11	41	81	42	37	17	
Non-residents	9	225	57	10	..	..	..	..	..

TABLE VII.
Return of Deaths in Local Public Institutions.

Year.	Paddington Workhouse and Infirmary.	St. Mary's Hospital.	Children's Hospital, Paddington Green.	Lock Hospital.
1901	238	317	92	5
1900	255	386	63	4
1899	255	280*	69	2
1898	194	324	80	2
1897	192	262*	63	2
1896	188	334	48	1
1895	204	332	17**	3
1894	165	247	†	3
1893	204	299	†	7
1892	236	355	12	5
1891	257	371	62	..
Averages for 1891-1900	215	339	52 (8 years)	3

* Hospital closed some weeks for repairs, &c.

** Hospital recommenced work in 3rd quarter of the year.

† Closed during re-construction.

TABLE VIII

REPORT OF THE WORKS OF THE SANITARY DEPARTMENT COMPLETED DURING THE YEAR 1901.

Quarters.	No. of Complaints received.	Inspections of Dwelling Houses.				Sanitary Works completed in Dwelling Houses.																To Regulate Keeping of Animals.		Trade Supervision.					Foods				
		"House-to-House."	On Complaint or after Illness.	Cellar Dwellings.	Re-inspection of all kinds.	Drainage, &c.				Water Supply.				Dust Receptacles.		Miscellaneous.				Accumulations Removed.	Improperly-kept Removed.	Slaughterhouses.	Cowhouses, Dairies, Milk Shops.			Bakchouses.	Eating Houses.	Offensive Trades, Wharves.	Smoke Observations.	Seizures of Unsound Food.			
						Entire Reconstruction.	Drains Relaid, Trapped, or Ventilated.	Waste Pipes Disconnected.	Rain-water Pipes Disconnected.	W.C., New, Provided, Repaired, &c.	Soil Pipes Ventilated.	Services Separated.	Supplies Reinstated.	Cisterns, New, Provided.	Cisterns Cleansed, Repaired, &c.	Cistern Overflows Disconnected.	New, Provided.	Repaired, &c.	Drains Cleared, Flushed, &c.				Houses or Rooms Cleansed, White-washed, &c.	Cases of Overcrowding Abated.	Cellar Dwellings Closed.						Yards and Areas Paved and Drained.	Manure Receptacles Reconstructed, &c.	Cowhouses, Dairies, Milk Shops.	Bakchouses.	Eating Houses.
No. 1 ...	145	31	705	—	4,507	93	51	22	36	89	22	1	11	8	6	11	8	5	19	39	6	—	5	7	12	—	3	1	18	6	293	1	Not Tabulated.
No. 2 ...	136	116	786	—	4,667	91	41	8	13	86	20	5	2	3	6	6	8	9	13	17	8	—	12	4	61	—	2	122	21	—	286	38	
No. 3 ...	202	69	723	—	4,755	86	36	12	12	59	20	10	3	5	10	11	7	5	19	49	10	23	13	1	72	—	2	—	21	2	252	31	
No. 4 ...	137	8	698	8	4,612	96	38	19	17	77	9	7	7	—	7	—	8	5	12	21	4	15	7	—	23	—	—	1	3	10	273	30	
Year	620	224	2,912	8	18,541	366	166	61	78	311	71	23	23	16	29	28	31	24	63	126	28	38	37	12	168	—	7	124	63	18	1,104	100	

TABLE IX.

SUMMARY OF ARTICLES SUBMITTED TO THE PUBLIC ANALYST DURING YEAR 1901.

	Total.	Found Adulterated.	Percentage Adulterated.
Milk	263	21	8
Butter	121	27	22 $\frac{1}{3}$
Coffee	27	2	7 $\frac{4}{10}$
Mustard... ..	8	0	...
Cheese	8	0	...
Beer	7	1*	...
Mercury Ointment	6	0	...
Jam	6	0	...
Sweets	4	0	...
Pepper	4	0	...
Lard	3	0	...
Medicated Soap	2	0	...
Sago	2	0	...
Ginger	2	0	...
Glycerine	1	0	...
Margarine	1	0	...
Tapioca	1	0	...
Total ...	466	51	10 $\frac{8}{10}$

Average.

Fines imposed ... £111 5 0 ... £2 3 7

Costs allowed ... 29 0 6 ... 0 11 4

STOKES,

Public Analyst

* Contained a little sulphate of zinc.

SUMMARY OF LEGAL PROCEEDINGS DURING 1901

Under Public Health (London) Act, 1891.

Summonses for Non-compliance with Notices under Section 4.			Fine.			Costs.		
			£	s.	d.	£	s.	d.
83, Cirencester Street	..	(a) No water supply ; Closing Order made	—	—	—	—	—	—
		(b) Wilfully disobeying Closing Order. (Defendant was committed for one month, there being no goods to distrain upon)	2	0	0	1	3	0
Yard in rear of 395, Edgware Road		Nuisance abated ; summons adjourned <i>sine die</i>	—	—	—	3	3	0
34, 36, and 38, Clarendon Street	..	Order made (case not complete)	—	—	—	—	—	—
90A, Church Street	..	Closing Order made	—	—	—	1	3	0

Summonses for Offences under Bye-laws, &c.			Fine.			Costs.		
			£	s.	d.	£	s.	d.
40, Porchester Road..	..	Failure to give notice before commencing alterations to soil-pipe, &c.	0	5	0	0	5	0
14, Craven Hill	..	Do. do. do.	0	5	0	0	5	0
Philips & Son, 10, Baker Street	..	Failure to give notice of work	0	5	0	0	2	0
27, Sutherland Place	..	Failure to provide dust-bin ; bin provided subsequent to the issue of the summons ; ordered to pay costs	—	—	—	0	2	0
9, Barnsdale Yard	..	Constructing W.C. contrary to provisions of Bye-law 1, under Section 39 (1), Public Health (London) Act, and failure to give notice before commencing the work ; summonses dismissed	—	—	—	—	—	—
3, Kensington Gardens Terrace		Constructing new W.C. in direct communication with bedroom ; solid partition constructed after issue of summons	—	—	—	1	3	0
E. W. Bowes, 45, Kensal Road		Obstructing Inspector Miners when entering No. 178, Kensal Road ; summons dismissed	—	—	—	—	—	—
Usher's Brewery, Queen's Road		Smoke nuisance ; Abatement Order made	—	—	—	5	5	0
Metropolitan Electric Supply Corporation		Smoke nuisance ; summons adjourned by consent <i>sine die</i>	—	—	—	6	6	0
20, North-Wharf	..	Non-compliance with Magistrate's Order ..	9	0	0	1	2	0
Francis Verani, 2, Porchester Road		Unsound meat on premises	2	0	0	1	3	0
W. Hornett, Senr., 92, Harrow Road, Leytonstone		Removing offensive refuse during prohibited hours	1	0	0	0	2	0
Do. do.		do. do.	2	0	0	0	2	0
Wickens, Pease & Co. Bermondsey Wall		do. do.	0	5	0	0	2	0
Do.		do. do.	0	10	0	0	2	0
		do. do.	0	5	0	0	2	0
		do. do.	0	5	0	0	2	0
		do. do.	1	0	0	0	2	0

Under Sale of Food and Drugs Act, 1875-1899.

						Fines.			Costs.		
						£	s.	d.	£	s.	d.
Milk	...	...	16 %	added water	...	2	0	0	0	12	6
"	...	...	7 %	"	...	2	0	0	1	3	0
Butter	...	...	85 %	foreign fat	...	5	0	0	1	3	0
"	...	...	86 %	"	...	5	0	0	1	3	0
Milk	...	...	11 %	added water	...	3	0	0	1	3	0
"	...	...	6 %	"	...	2	0	0	0	12	6
"	...	...	6 %	"	...	2	0	0	0	12	6
"	...	...	7 %	"	...	2	0	0	0	12	6
Butter	...	...	8 %	of water beyond standard limit of	...	Dismissed.			No costs.		
"	...	...	7 %	16 % of water natural to butter	...						
Milk ⁽¹⁾	12 %	added water	...	3	0	0	1	3	0
" ⁽²⁾	12 %	"	...	2	0	0	1	3	0
Butter	...	...	7 %	of water beyond standard limit of	...	Dismissed.			No costs.		
	...	...	16 %	of water natural to butter	...						
Coffee	...	...	20 %	chicory	...	1	0	0	0	12	6
Butter	...	...	5 %	of water beyond standard limit of	...	Withdrawn.			No costs.		
	...	...	16 %	of water natural to butter	...						
"	...	...	80 %	foreign fat	...	1	0	0	0	12	6
Milk	...	...	11 %	added water	...	2	0	0	1	3	0
"	...	...	22 %	"	...	0	5	0	0	12	6
"	...	...	33 %	"	...	...Summons not served as required by Act.					
Coffee	...	...	15 %	chicory	...	0	10	0	0	12	6
Milk	...	...	23 %	fat abstracted	...	2	0	0	0	12	6
"	...	...	9 %	"	...	2	0	0	0	12	6
"	...	...	23 %	"	...	Warranty proved. Summons withdrawn.					
"	...	...	33 % ⁽³⁾	"	...						
"	...	...	12 %	"	...						
"	...	...	20 %	"	...						
Butter	...	...	80 %	foreign fat	...	3	0	0	0	12	6
"	...	...	85 %	"	...	3	0	0	1	5	0
"	...	...	80 %	"	...	3	0	0	0	12	6
"	...	...	55 %	"	...	0	10	0	0	12	6
"	...	...	77 %	"	...	1	0	0	0	12	6
"	...	...	80 %	"	...	5	0	0	0	12	6
"	...	...	82 %	"	...	3	0	0	0	12	6
"	...	...	82 %	"	...	3	0	0	0	12	6
" ⁽⁴⁾	80 %	"	...	Dismissed.			No costs.		
" ⁽⁵⁾	74 %	"	...						
"	...	...	80 %	"	...	5	0	0	0	12	6
"	...	...	65 %	"	...	2	0	0	0	12	6
" ⁽⁶⁾	65 %	"	...	5	0	0	0	12	6
" ⁽⁷⁾	80 %	"	...	10	0	0	0	12	6
" ⁽⁸⁾	90 %	"	...				0	12	6
"	...	...	79 %	"	...				0	12	6
" ⁽⁹⁾	80 %	"	...				0	12	6
" ⁽¹⁰⁾	80 %	"	...				0	12	6
Milk	...	...	17 %	fat abstracted	...						
"	...	...	15 %	added water	...						
" ⁽¹¹⁾	25 %	"	...						
Butter	...	...	82 %	foreign	...						
"	...	...	80 %	"	...						

NOTES.

- (1) Defendant fined £2 with 2s. costs on May 24th, 1894, for selling milk containing 17% of added water.
- " " £3 " 12s. 6d. costs on Feb. 16th, 1899 " " " 17% " "
- (2) " " £1 " 12s. 6d. " April 29th, 1897 " " " 7% " "
- " " £1 " 12s. 6d. " " " " " 10% " "
- " " £5 " 23s. " Oct. 26th, 1900 " " " 11% " "
- (3) The giver of the warranty was in Court when the two first summonses were called in answer to summonses respecting the third and fourth samples. He being convicted, the other summonses were withdrawn.
- (4) Dismissed on a technical point. The copy certificate attached to the summons did not bear the Analyst's name.
- (5) Defendant fined £3 with 23s. costs on Feb. 15th, 1901, for selling milk containing 11% added water.
- (6) " " £5 " 23s. " Feb. 1st, 1901, for selling butter " 85% foreign fat.
- (7) " " £5 " 23s. " Feb. 1st, 1901 " " " 86% " "
- (8) Defendant's wife appeared at Court; defendant disappeared; fine not recovered.
- (9) Defendant summoned in December, 1899, for selling "butter" containing 80% foreign fat. Ordered to pay costs (12s. 6d.) only.
- (10) Defendant fined £2 with 12s. 6d. costs on March 23rd, 1900, for selling milk deprived of 23% of its fat.
- (11) Giver of warranty pleaded guilty on summons for false warranty, and was fined £5 with 12s. 6d. costs.

		1901.	1900.	1899.	1898.
Average per Conviction	{ Fine ..	£2 16 0	£3 4 0	£3 4 9	£1 13 9
	{ Costs ..	0 15 0	1 2 3	0 14 3	0 13 11

Metropolitan Board of Health

ANNUAL REPORT OF THE COUNCIL

1872

APPENDIX

REPORT

OF THE

MEDICAL OFFICER

FOR THE YEAR

1872