

Annual report on the public health of Finsbury for the year 1910.

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THE
METROPOLITAN BOROUGH OF FINSBURY.

ANNUAL REPORT

ON THE
PUBLIC HEALTH OF FINSBURY
for the Year 1910.

BY

A. E. THOMAS, M.A., M.D., D.P.H.,

Medical Officer of Health.

LONDON :

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1911.



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Public Health Committee, 1890-1911

REPORT OF THE

COMMISSIONER

OF THE PUBLIC HEALTH

OF THE CITY OF BOSTON

FOR THE YEAR 1911



**To the Mayor, Aldermen and Councillors of the
Metropolitan Borough of Finsbury.**

His Worship the Mayor:
Alderman E. H. TRIPP, J.P.

Gentlemen,

I have the honour to submit to you the Annual Report on the Public Health and sanitary condition of the Borough of Finsbury for the year 1910. For the sake of uniformity, the method of arrangement adopted in previous reports has, in the main, been adhered to.

During the year I have received effective assistance and continued support from the Chairman and members of the Public Health Committee of the Council, and I take this opportunity of tendering my grateful thanks to them. I wish also to thank the staff and officials of the Health Department for the excellent work done and help given, and the staffs of the other Departments for their kindly assistance and co-operation.

I am, Gentlemen,

Your obedient Servant,

A. E. THOMAS,

Medical Officer of Health.

Public Health Department,

Town Hall, Rosebery Avenue, E.C.

14th March, 1911.

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VITAL STATISTICS.

SUMMARY.—The prominent facts of the Annual Report for 1910 are briefly recorded below :—

Registrar-General's Estimated Popu-

lation	...	...	...	...	94,578.
Birth Rate	...	...	...	...	29.9 per 1,000 inhabitants.
Death Rate	...	...	...	...	17.29 per 1,000 inhabitants.
Infantile Mortality	...	...	...	...	121 per 1,000 births.
Death Rate from Phthisis	...	...	...	...	1.75 per 1,000 inhabitants.
Death Rate from all forms of Tuber-					
culosis	...	...	...	...	2.08 per 1,000 inhabitants.
Death Rate from the seven Chief					
Zymotic Diseases	...	...	...	...	1.94 per 1,000 inhabitants.

Noticeable features derived from this return are :—

- The birth-rate is the same as it was in 1909.
- The number of births is still diminishing.
- The declining death rate—the lowest since the Borough was incorporated.
- The substantial reduction in the death-rate from Phthisis.
- The lessened number of deaths due to Measles, Scarlet Fever, and Hooping Cough.
- The slight increase in the number of deaths due to Diphtheria and Typhoid Fever.
- The lessened prevalence of Scarlet Fever and Diphtheria.
- The increased prevalence of Enteric Fever.
- The diminished Infantile Mortality—the lowest since the Borough was formed in 1901.

POPULATION.—The population of the Borough at the middle of 1910 was estimated by the Registrar-General to be 94,578, distributed as follows :—

Clerkenwell	.....	59,382
St. Luke	.....	33,665
St. Sepulchre	.....	1,531

		94,578

This estimate does not take into account the Finsbury residents detained in the following outlying institutions: The Holborn Union Workhouse, Shepherdess Walk (1,119); the Workhouse Infirmary, Archway Road (264); the Holborn Union Workhouse, Mitcham (616); and the Holborn Schools, Mitcham (346), giving a total of 2,345. Adding these to 94,578, the Registrar-General's estimate, gives a corrected population of 96,923 for the whole Borough.

It has been found difficult to get the figures for previous years of the residents detained in these outlying institutions.

It must be obvious, however, that these figures should certainly be taken into account when dealing with birth- and death-rates.

To take an example, a Finsbury patient who dies in Mitcham is, in respect of his death, accredited to Finsbury. Such a patient, if he recovers and is discharged, in most cases returns to his home in Finsbury. It is therefore quite fallacious to ignore him in the assessment of the population and to include him in estimating the death-rate.

The Registrar-General's estimate of the population of Finsbury does not include these Finsbury residents in outlying districts—this estimate is only concerned with those Finsbury residents actually found living within the municipal boundaries. The others are allocated to the districts in which the institutions are situated.

The Registrar-General's estimate is founded on the population ascertained at the two preceding censuses, and these numbers only record those people living on the census dates inside the confines of the borough.

The exclusion of these people has, however, other consequences—it makes the population appear lower than it should be, and as a result makes the crude death-rate appear to be higher than it really is. The death-rate for 1910, based on the Registrar-General's figures is 17.29, but calculated on the corrected population, 96,923, is 16.9 per 1,000 inhabitants.

In previous years the rates were calculated on the Registrar-General's figures; for the sake of uniformity and comparison, this method has been continued in the present report.

The population for 1910 is less by 711 than the population for the preceding year.

During 1910, in connection with a petition to the London County Council, it was found necessary to ascertain the population of enumeration districts 11 and 12 in Clerkenwell—the numbers so obtained were 400 less than those of the census of 1901. So that it would appear that the decrease of the number of Finsbury residents is borne out in the actual facts, and is not a mere theoretical deduction.

The reasons for the decrease in population have been given in previous annual reports.

BIRTHS.—During 1910 there were registered 2,833 births of Finsbury residents, equal to a birth-rate of 29.9 per 1,000 living. This rate is the same as it was in 1909, and is only 2.1 per 1,000 less than it was ten years ago. It is higher than it was in 1905 and 1907. The birth-rate for Finsbury has not fallen to the same extent that it has diminished in the country generally.

The corrected rates for the Borough are given below :—

CORRECTED BIRTHS AND BIRTH RATES.

Year.	Population.	Corrected Births.	Corrected Birth Rate.
1901	101,463	3,254	32.08
1902	100,487	3,191	31.7
1903	100,487	3,162	31.4
1904	98,958	3,095	31.3
1905	98,207	2,886	29.4
1906	97,466	3,012	30.9
1907	96,732	2,884	29.8
1908	96,007	2,916	30.3
1909	95,289	2,857	29.9
1910	94,578	2,833	29.9

The corrected rates for the several sub-registration districts in 1910 were as follows :—

	Population.	Births.	Birth-rate.
Clerkenwell ...	59,382 ...	1,792 ...	30.2
St. Luke ...	33,665 ...	999 ...	29.7
St. Sepulchre ...	1,531 ...	42 ...	27.4
<hr/>			
The Borough ...	94,578 ...	2,833 ...	29.9

The corresponding birth-rates for the rest of the country for 1910 are attached :—

England and Wales	24.8
London	23.7
Finsbury	29.9
77 Great Towns	25.0
136 Small Towns	23.7
Rural Districts	25.0

It will be seen that the birth-rate for Finsbury is greater than the rate for the whole of England and Wales, greater than the birth-rate for London, and greater than the rates in the 77 great towns, the 136 smaller towns, and the essentially rural districts.

The birth-rate is greatest in Clerkenwell, least in St. Sepulchre.

Seventy-nine of the births of Finsbury children occurred in the City Road Workhouse, 38 were notified as having taken place in other metropolitan boroughs. At the City of London Lying-in Hospital there were 807 births during the year; of these 117 belonged to Finsbury, and the rest to other London boroughs.

For comparative purposes the birth-rates of the Metropolitan Boroughs are annexed :—

BIRTH RATES, 1910.

Borough.	Rate.	Borough.	Rate.
Battersea	23'7	Lambeth	25'6
Bermondsey	31'2	Lewisham	20'75
Bethnal Green	32'1	City of London	15'3
Camberwell	23'3	Paddington	19'84
Chelsea	18'3	Poplar	29'69
Deptford	24'7	St. Marylebone	20'1
FINSBURY	29'9	St. Pancras	22'7
Fulham	27'2	Shoreditch	31'6
Greenwich	21'41	Southwark	26'6
Hackney	22'1	Stepney	28'9
Hammersmith	22'8	Stoke Newington	17'5
Hampstead	14'0	Wandsworth	20'26
Holborn	19'1	Westminster	15'0
Islington	23'21	Woolwich	22'1
Kensington	17'5		

The figures for Bethnal Green, Camberwell, and Hackney have been obtained from the Registrar-General's return, the rest from the medical officers of the various boroughs.

NOTIFICATION OF BIRTHS ACT, 1907.

This Act came into force on the 9th March, 1908, having been adopted by the Borough Council on 19th December, 1907.

All births, including still-births, must be notified to the Medical Officer of Health within 36 hours by the father or by any person who at the time of the birth or within 6 hours thereafter was in attendance on the mother. For the purpose of notification, stamped addressed envelopes are supplied free of charge to all Doctors and Midwives resident or practising in the Borough.

By the Act, local Registrars are allowed to inspect the notifications received, and to compare them with their own list. By this means it is possible to trace those parents who have not sent information to the Public Health Office. To these a printed form is sent drawing attention to the omission and asking that the notice shall be sent. This has always been effective.

The number of notices of omission sent out to parents have been in 1908, 277; in 1909, 181; in 1910, 196 letters.

The explanation tendered is often ignorance of the existence of the Act, the exigencies of daily employment "working early and late," or a confusion with the terms of the Births and Deaths Registration Act 1874, which enacts that all births must be registered within 42 days.

Occasionally the notice is sent written in a large round school-boy hand—probably dictated to her son by the mother or by a neighbour.

The following is an example :—

" To the Gentlman of the Gardians,

I am taking my pen in hand hoping you are in the best of health as it leaves mother at preseant and for me to say that she as had a baby girl according to the rules of the baord of health this is all at preseant with best rispects from

PERCE.

it is a girl and she as got to have the name of rose after mother but father he don't hold with it. Excue pencil no more at preseant."

In these homely letters it is not uncommon to find the name, the date, and the address omitted.

The number of notifications received in 1910 was 3,566—consisting of 1,848 males and 1,718 females. There were 42 sets of twins, no triplets, but one case in which four children were born at a birth—these four all died within a few days. There were 89 still-births.

The percentage notified by parents was 18.0, by medical men 3.0, by midwives 13.0, and by others—chiefly students and professional assistants from St. Bartholomew's Hospital, the Royal Free Hospital, and the many medical charities in the district—was 66 per cent.

The mothers included in this last percentage—66 per cent.—are practically all attended in their confinements gratuitously. This means that approximately 2,400 Finsbury mothers, or 2 out of every 3, are looked after in child-birth and lying-in for no fee whatever, chiefly by the students of the various hospitals. This gratuitous treatment has other consequences—poor mothers who lived in Tottenham and other outlying districts have been known to break up their home and move bag and baggage into Finsbury so as to be attended in childbirth without payment by the students.

HEALTH VISITATION—INFANT BIRTHS.

In May, 1909, the Finsbury Borough Council appointed two Lady Health Visitors, who, in conjunction with the Lady Sanitary Inspector, were directed

1. To systematically visit the infant births in the poorer streets.
2. To instruct the mothers, and especially young mothers with first children, in the feeding and proper care of their babies.
3. To carefully watch over the child's health and progress, and to take the requisite steps by advice or reference to medical or philanthropic agencies to safeguard the child's prospects.
4. To improve the home conditions of the mothers—domestically by help, advice, and suggestion—hygienically by referring defects of structure or environment to the Public Health Department.

The scheme thus outlined has been continued and developed in 1910. The Borough has been divided into two, and a separate district assigned to each lady Health Visitor.

In last year's report a list was given showing the infant deaths in each street in the Borough over a period of 5 years. From this list the following one has been compiled containing those streets in which the stress of infant mortality has been greatest.

DISTRICT No. 1.

Affleck Street.	Northampton Road.
Albert Street.	Penton Street.
Clerkenwell Close.	Pentonville Road.
Collier Street.	Risinghill Street.
Cumming Street.	Rodney Street.
Easton Street.	Rosebery Avenue.
Farringdon Road.	Rosoman Street.
Farringdon Road Buildings.	St. Helena Street.
Hermes Street.	St. John Street (west side, Nos. 1-445).
King's Cross Road.	Southampton Street.
Margaret Place.	Victoria Dwellings (Clerken- well Road).
Margaret Street.	Warren Street.
Myddelton Street.	White Lion Street.
Noble Street.	Wynford Road.
Northampton Buildings.	

DISTRICT No. 2.

Baldwin Street.	Henry Street (Old Street).
Bastwick Street.	Ironmonger Row.
Central Street.	Ironmonger Street.
City Road.	Lever Street.
Cyrus Street.	Little Sutton Street.
Dingley Road.	Mitche'l Street.
Dufferin Street.	Northampton Street.
Galway Street.	Peerless Street.
Gee Street.	President Street.
George Yard.	Radnor Street.
Goswell Road.	Rahere Street.
Guinness' Buildings (Lever St.).	St. Bartholomew's Buildings.
Hatfield Street.	St. John Street (east side, Nos. 2-428).

In these streets every birth that occurs is visited; in other streets, only those births are dealt with that may reasonably be expected to need special attention—such as first births, the advent of twins, or births in homes where the parents are known to incline to carelessness or negligence. Other households are visited on request or on complaint as to ill-treatment, neglect, or exposure.

The visits are planned to interfere as little as possible with the mother's domestic duties. To this end they are made short—an average time for a first visit would be 15 minutes, for a revisit 10 minutes or less.

On these occasions the baby is undressed and inspected and its general condition is noted, the character and sufficiency of its clothing, its disposal during the day time and at night time, the method of feeding, the preparation and storage of the milk, the type and cleanliness of the bottle used, the cleanliness of the feeding utensils, and the condition of the comforter, if any. All these are ascertained and made the subject of useful and practical lessons.

The child's body is examined, its condition, whether fat or wasting, the state of the eyes, the mouth, navel, and buttocks is investigated, the presence or absence of dirt, or of vermin bites is observed, and the mother advised in kindly manner how best to adopt preventive and curative measures.

She is shown how to wash, dress, and to clothe the child.

The observation "My baby used to flop about like a bit of wet gristle. It was all ways and no ways till the lady came and learnt me how to hold it proper," shows how much this work is needed and appreciated.

She is advised as to the care of her own health and as to the diet suitable for her while nursing, and if she has "lost her milk" how best to "bring it back."

Breast-feeding is always encouraged.

A small book on the management of children is left with her and its chief provisions explained. The instruction is designed to be crisp, pithy, and practical.

An invitation is given to attend the infant consultation and to have her baby weighed regularly.

During the year 1,160 first visits and 2,807 re-visits were paid to Finsbury homes where births occurred.

A summary of the results achieved and of other matters of interest is given in the paragraphs which follow :—

Method of Feeding.—It is found that up to the age of three months nearly 90 per cent. of the infants are entirely or partially breast-fed. The Finsbury mothers who cease to breast-feed their babies do so, not because they are unwilling to continue, but because they cannot continue.

Owing to the small wages of the family, or to the casual or insecure nature of the father's employment, the mother herself has to resume work, sometimes as a homeworker making cardboard boxes, or artificial flowers, in order to obtain nourishment for herself and family. Occasionally the mother is found to be the sole support of husband and children.

When the mother goes to work the child is left in charge of a neighbour or of someone else, and no longer obtains the attention it should have.

In one case the mother returned to work when the child was 14 days old—but she used to come home at meal times to breast-feed the baby. When she was unable to come the child was given condensed milk by the grandmother.

It is often stated that babies who are breast-fed do not become rickety. This is not the case in Finsbury. Mothers are frequently found with infants entirely breast-fed and yet rickety. These are the mothers who are underfed, who are overworked, who are worn out with child bearing, worn out with rearing

a family, supporting the children and a sick or idle husband. In this Borough the commonest faults in the care and upbringing of infants are in order of frequency—unsuitable clothing, unsuitable food, and irregular feeding.

As examples of faulty feeding, the following may be cited :—

A baby 6 months old fed with “a piece of everything we have ourselves.”

A baby 3 months old fed by its mother on porridge because she “had very little milk, and the father was out of work.”

A baby 2 months fed on potatoes and broth.

A baby 1 month fed by its mother on oatmeal.

A baby 6 weeks old fed on an unsuitable patent food. The father had seen it advertised as being used by a royal household, and “what was good enough for royalty was good enough for his young ones.”

A baby 7 weeks fed once a day only on bread and milk by its grandmother.

A baby 3 weeks old fed on biscuits.

Many, far too many, of the children were found to be chiefly fed on boiled bread. This is an exceedingly common article of diet for Finsbury babies. Mothers insist on giving it in spite of instructions to the contrary. Boiled bread is hardly the material upon which to rear a strong and sturdy Imperial race.

The long-tubed bottle—long since condemned—is now less used than formerly; it is chiefly found when the children are left in care of their grandmothers, who will have no other.

The Public Health Department supplies for a penny a tubeless feeding-bottle; where the parents are very poor the bottle is given gratis.

In one household two such bottles were given to the mother, but on each visit she was found to be using a long-tubed bottle, which was very foul and dirty. She explained that her husband insisted on her discarding the improved bottles and using the other.

In one case the baby itself resisted all efforts to make it take to the tubeless bottle, and wasted until the long-tubed bottle was restored to it.

Clothing.—In the poorer homes the babies are nearly always found to be improperly and insufficiently clothed in flannelette. The mothers appear to be glad to be taught and welcome the flannel vests which are sold to them by the lady Health Visitors at cost price, and given gratis to those too poor to pay.

In many of the schools in the district the school children have, through the courtesy and kindness of the head-teachers, been allowed to knit vests for the babies. The wool for these is provided by the Health Department. In special cases where the parents were very poor, layettes, consisting of 2 blankets, 2 night gowns, 2 petticoats, 6 diapers, 2 flannel binders, and 2 vests, were procured for each infant. The cost of these was defrayed from a private source.

Cases illustrating the conditions found are appended :—

1. The mother, aged 22, had been deserted by her husband shortly after marriage, and had never been supported by him. The baby was born healthy, and at the first visit was found scantily clothed in flannelette, with the neck and shoulders much exposed and suffering from bronchitis.

2. A baby, extremely dirty and filthy, so much so that the dirt seemed to be continuous with, and almost part of the skin, was discovered in bed with nothing on.

3. A baby was found on the bare floor, under the table clad only in a vest.

4. A case of twins. One was asleep clad in wet, dirty and insufficient clothes, the other was crying and hungry. The room was dark and cold—there was very little coke fire. The mother was shown how best to clothe and wash them.

Cleanliness.—To show the mothers how to safely and properly wash their infants is one of the most acceptable duties of the health visitors, and it is a service that is much appreciated by the mothers, and especially by those mothers with their first children. Mothers who have had many know, of course, from experience; but the young mother with her first child is almost helpless. This is one of the lessons in which they seem to take the greatest interest; it is one of the weighing centre lectures which is most valued and best attended.

The difficulties encountered are exemplified in the following paragraphs :—

1. A mother, feeble minded, with twins and afraid to wash them. Every utensil in the house, so far as could be ascertained, was extremely dirty. The beds were not made, the windows not opened at 12.30 midday. The bedclothes and other clothes were filthy.

2. A baby, 3 months old, being bathed by a child of 14 years, who had accompanied her mother to the weighing centre and learnt how to do it there. The mother was out at work, the father was unemployed.

3. A mother, 23 years, ignorant and indolent, getting out of bed at 11 a.m. The room was extremely dirty, the baby was very dirty and unwashed. She had had two children, of whom the first died. She said she would be glad to learn how to rear her children and to keep them clean.

Many of the babies were verminous—one, 6 months old, had its hair caked and infested with lice. In these cases the bedding is all turned out and disinfected, the ticking is boiled and cleansed, and the room fumigated.

Where there is reason to apprehend that the infant is neglected the matter is referred to the National Society for the Prevention of Cruelty to Children.

Illness of Infants.-- In many homes the babies were found at the first visit to be suffering from illness or deformity. Some had measles, pneumonia, erysipelas, diarrhœa, thrush; others had ophthalmia, rupture, hare lip, a whitlow, sore buttocks, or the itch.

One baby was discovered with its thumb black and discoloured, and containing a piece of broken hat-pin.

One mother was bathing the sore eyes of her baby with milk from a very dirty jug, and was discarding the lotion given her for the purpose at the hospital.

One very thin child, 6 months old, had during its short existence been under treatment at four hospitals, one dispensary, under two private doctors, and in one home for babies. When first visited, the mother, impatient with the slow progress of the infant, was now contemplating still a further change.

Many of the babies were wasting, with muscles soft and flabby.

In every case the appropriate treatment was devised and mother shown by actual practice how best to carry it out.

Clothes, pneumonia vests, lime water, feeding bottles, and "Finsbury" cream were provided for the children.

Mothers were shown how to adjust and replace the truss over a rupture. Children who were acutely ill or wasting were sent into babies' homes, nursing institutions, and children's hospitals for treatment.

Where the parents were able to pay for medical treatment they were always urged to consult their own doctor.

The Parents.—In some of the poorer districts the mother is occasionally the chief, or, indeed, the sole support of the family.

In these circumstances her lot is an undeniably hard one, and it is not to be wondered at if the baby suffers in health, wastes, and eventually succumbs.

However, even when weighted with this grievous and double load the mothers struggle bravely on, suckling their children during the short intervals when they return home at meal times.

Some mothers were ill, with ulcerated legs, abscess of the breast, heart disease, asthma, bronchitis, anæmia, or paralysis; two mothers were epileptic, one was of unsound mind, others had sore or dirty nipples. Some mothers had insufficient food. Many were inexperienced and were very grateful for the help of the lady Health Visitors—a few were extremely careful in carrying out all instructions.

Advice was given as to the best food for the mother, so that she might continue breast-feeding and defer weaning. The mothers who were dirty and untidy were encouraged and shown how to do better. Generally speaking, it was found that mothers who had before marriage been domestic servants were more careful and of more cleanly taste and discrimination than the others.

ILLUSTRATIVE CASES.

1. Mother an epileptic, left with young baby and a child 6 years old. The husband had gone to America, and was said to have made no provision for the mother.
2. Mother had had four children and lost three. She now expresses herself as eager to learn and willing to take advice.
3. Mother with a child a few months old has to return to her work at making artificial flowers as her husband is unemployed.
4. Mother with a baby has to return to work as a rag-sorter, as the father is out of work.

5. Father and mother in prison. The supervision of the baby divided between the grandmother and a kindly neighbour.
6. Father paralysed, the mother of the baby and the rest of the family making artificial flowers.
7. Father 18 years of age, and a cripple. The mother the sole support of the family, and breast-feeding her infant.
8. Mother suckling her child and making carpenters' aprons for a few shilings a week. Father out of work.
9. Mother at work all day, had to leave husband two months before the baby was born for ill-treatment.
10. Mother with a breast abscess, which had been incised three times at a general hospital. Her account of it was: "There were four leaders broken, and it was as big as a sheep's heart."

At very few houses was any resentment shown at the ladies' visits. One father, a policeman, objected "on principle" to health visitors calling.

One mother, "stone deaf," had had 10 children, all living, and very much objected to being questioned. It was felt that the success she had achieved with her children fully entitled her to freedom from supervision, and she was not visited again.

In this connection it may be observed that the greater attention is bestowed on young mothers, mothers with first children, mothers with twins, mothers with illegitimate children, mothers deserted or ill-treated, and mothers in poor and domestically squalid surroundings.

Home Circumstances and Social Conditions.—During the winter months many of the homes disclosed conditions of poverty and distress. These were referred to various agencies and philanthropic institutions. The homes were cleansed and brightened up, and strenuous efforts made to encourage the parents to keep them in this condition. The policy of the Public

Health Department has been to inculcate a spirit of robust independence—to tell the parents what to do and how to do it, and in case of failure to offer tactful help and unobtrusive co-operation.

One fact has issued clear and distinct from the enquiry—the home conditions may be such as to indicate great poverty—yet the babies, nevertheless, may be quite fat and clean.

ILLUSTRATIVE CASES.

1. Parents very young, father 19, mother 18 years. Father a casual labourer. Mother, a cardboard-box maker, working and suckling her child 6 weeks old.
2. Father blind, and is led out in the morning by the mother to a fixed "pitch" during the day-time, where he sells matches. In the evening the mother takes him out with a piano organ to play outside public-houses. The mother employed as a charwoman. The child, a few weeks old, was found at home lying with wet and fouled clothing, and looked after by a neighbour.
3. Family consisting of father, mother, and 3 children, aged 3 years, 1 year 9 months, and 3 months. The first two children were delicate and very rickety. The baby was healthy. The father was in regular work, earning 21s. weekly, and gave his wife £1. The mother volunteered the following weekly budget of her expenditure: Rent 6s. 3d., towards purchase of mangle 1s., insurance 6d., fuel and light 2s. 1d., leaving 10s. 2d. for food and clothing. She used to live at Tottenham, but found it too expensive. She returned to St. Luke's, and was thereby enabled to be attended gratuitously in her confinement by the students of St. Bartholomew's.
4. Fourth child few months old, very puny, breast fed, just recovering from thrush, unwashed at 3 p.m. The father, 29 years, in regular work, gives his wife 14s. weekly. The mother does not know where the father works or what he earns.

5. Mother, 18 years, weak, ill, and anæmic. Father, 18 years, a carman, earning 14s. per week. The baby, now three weeks old, born in the Lying-in Hospital, fat and thriving. Family lived in one room, which was extremely clean.
6. Baby, 11 months old, weighing only 11 lb. 9 oz., ill-fed, ill-clad, ricketty, and puny. The father died when the child was 8 months old, in a lunatic asylum. The mother was unable to get work, and was now living on the insurance money.
7. Baby, few months old, wasting. The father was in the infirmary with consumption of the lungs. The mother was unable to find work, and contemplating going as a domestic servant. She had had one other child, who had died from a "confirmation of measles."
8. Mother, a laundress, works out. The father a horse-keeper. The baby was breast fed for 3 months, and after that time fed by a neighbour on cows' milk and water. The mother had had 5 children, of whom 4 had died all under the age of one year.
9. Baby, 3 months old, strong, fat, and healthy. Parents Italian. Father a costermonger selling from a green-grocer's barrow. The family occupy one room. The room, bedding, and feeding utensils extremely clean.

WEIGHING CENTRES.

These are held in the afternoon at 2.30 p.m. at the following times and places:—

Wednesday : The Branch Library, Penton Street.

Thursday : The Mothers' Guild, 65, St. John Street.

Thursday : St. Luke's Institute, Radnor Street.

Friday : The Committee Room, The Town Hall.

The babies are weighed at these centres and the weights entered on cards, which the mothers keep and take home with them.

The average attendance has been 21 mothers, the total number of attendances 3,175. The average gain in weight of the babies under observation has been about 5 oz. per week—some have exceeded this, others have been much less.

If the child is not thriving, as evidenced by its loss of weight, or insufficient gain, the mother's diet and the child's feeding are inquired into very carefully, and appropriate advice given.

Model clothes, suitable for the children of poor parents, and which defer to some of their minor prejudices, are shown on each occasion and their advantages pointed out. These include:—

Long Clothes.—One gown, long cloth; 1 gown, long flannel; 3 napkins; 1 vest, with long sleeves, best wool; 1 flannel binder 4 inches wide.

Short Clothes.—One dress, nun's veiling; 1 pinafore, long-cloth; 1 flannel petticoat; 1 flannel bodice; 1 flannel drawers; 1 vest, with long sleeves, best wool.

The mothers are shown how to make these garments.

At each meeting questions are asked and answered, and short lectures given on suitable subjects. A list of some of the lectures is appended.

1. How to bath and wash the baby.
2. How to dress the baby.
3. The advantages of breast feeding.
4. Artificial feeding.
5. The method and time of weaning.
6. Thrush, its prevention and treatment.
7. The care of the eyes in babies.
8. Baby's toilet and the care of its skin.
9. The last six months of pregnancy—the care of the mother's health.
10. Premature birth—its prevention.

11. The lying-in period and the preparation for it.
12. The care of the breasts while suckling.
13. Minor ailments of pregnancy.
14. Diarrhœa in babies—its causes, prevention, and treatment.
15. Rickets and its prevention.
16. Measles and its complications.

Demonstrations have been given as follows :—

1. How to bath a baby.
2. How to dress a baby.
3. How to prepare baby's food.
4. Feeding bottles—the advantages and disadvantages of certain types.
5. How to make baby's clothes.
6. A cheap form of cot for baby.
7. How to make barley water.
8. How to make a poultice.
9. Simple bandaging.
10. Pneumonia jackets—how to make and use them.
11. The treatment of thrush in infants.
12. The treatment of sore, cracked, and depressed teats.

At each meeting tea and buns are provided at cost price to those who can pay—gratis to those who are too poor. It is found that the mothers cease attending for one of two reasons—either because they have to return to work, and are therefore unable to afford the time, or because the babies do so well that they think there is no further need for supervision. In these latter cases the mothers come again when the babies begin to waste. One mother stopped coming because she had no boots to enable her to go out of doors.

Illustrative cases are appended :—

1. **A Normal Case.**—The child weighed 8 lbs. at birth, and at 2 months, when it came to the weighing centre, 12 lbs. 10 oz. It attended regularly and increased its weight continuously, so that at 10 months it weighed 22 lb. 2 oz. and had 12 teeth.

The average gain of weight was about 5 oz. weekly.

2. **Ignorance of Parents.**—Child one month old and overfed. The mother had plenty of milk, but the father insisted on giving the infant rolled oats twice daily, causing diarrhoea. It was brought to the weighing centre and the oats were stopped, so that the child gained 14 oz. in weight in the following week.

3. **Unsuitable Food.**—A baby two months old gained only 4 oz. in 5 weeks. The child was artificially fed. The mother was advised as to her own diet, and induced to breast feed the child. It gained 8 oz. in the next week.

4. **Unsuitable Food and Unsuitable Clothing.**—A wasting baby, 2 weeks old, weighing 5 lb. 15 oz., clad in thin and scanty flannelette dress, living in a very stuffy small room. Mother unable to suckle. The feeding bottle was filthy. The child was having condensed milk. It was given cows' milk and water, and "Finsbury" cream. The feeding bottle was cleansed. Suitable clothing was provided. The baby was sent into the fresh air daily, and gained 32 oz. in the next 4 weeks.

5. **Breast Milk Deficient in Fat.**—A baby weighing 7 lb. 8 oz. at birth weighed 8 lb. 10 oz. at 10 weeks. The mother's milk was plentiful, but "thin." "Finsbury" cream was given to the child in addition to the breast feeds, with the result that it gained 11 oz. in the first week. It was kept on this treatment and subsequently gained 7 oz. per week up to 7 months, when it weighed 17 lb.

6. **Cows' Milk—Unsuitable.**—A baby weighing 7 lb. 8 oz. at birth weighed 8 lb. 6 oz. at 3 months, when it first attended the weighing centre. The mother was unable to breast-feed. The child was taking cows' milk and not gaining weight. The

mother was advised how to feed and clothe the baby, and followed out the instructions very carefully. The baby was given diluted condensed milk and "Finsbury" cream, and gained weight continuously from its first visit. The average gain was 6 oz. per week. It was under supervision for 9 months, and at 12 months of age was healthy, fat, possessed 6 teeth, and had firm muscles.

The question has been asked, it is often asked, whether the system of health visitation has justified its adoption, whether it is successful and meets a reasonable and legitimate demand.

The answer to this is that these visits to the homes of poor mothers are very necessary, are much appreciated, and are productive of much good.

The cases outlined in the foregoing pages, the conditions found, and the results achieved show what large scope there is for help, for practical common-sense instruction, and opportunity for the saving of infant life.

MIDWIVES ACT, 1902.

In London the supervising authority, for the purposes of administering the Act, is the London County Council. By its terms every midwife must before practising give notice of her intention to do so to the London County Council, and must give a similar notice in January of each year during which she continues to practise. In 1910, 21 midwives resident in Finsbury gave notice of their intention to practise. Of these 14 were associated with the three following institutions, either as resident midwives or as pupil midwives:—

The City of London Lying-in Hospital, City Road.

The Royal Maternity Charity, 31, Finsbury Square.

The Maternity Nursing Association, 63, Myddelton Square.

The City of London Lying-in Hospital was founded in 1750, the Royal Maternity Charity in 1757.

In addition to the above, the students of St. Bartholomew's Hospital attend mothers in St. Luke's and Clerkenwell under the supervision of qualified resident medical officers.

PUERPERAL FEVER.

Puerperal fever is compulsorily notifiable by Section 55 of the Public Health (London) Act, 1891. In 1910 there were registered in Finsbury 3,566 births—and in 7 cases these were followed by notifications of puerperal fever. So that it may be asserted that, on the whole, the work of attending women in their confinements is carried out extremely well in the Borough. The number of notifications in previous years have been as follows :—

1901, 5; 1902, 6; 1903, 8; 1904, 5; 1905, 6; 1906, 7; 1907, 3;
1908, 4; and in 1909, 6 cases.

The seven cases in the present year were attended by students of St. Bartholomew's, and the Royal Free Hospital (4), and by medical men 3 cases.

The predisposing and associated causes were as follows :—

Prolonged and difficult labour	3
Deformity of pelvis	1
Disease of uterus	1
Retained afterbirth	1
Douche given by mother of patient	1

In Finsbury every case is investigated by the lady Sanitary Inspector—the premises are visited, the sanitary defects ascertained, and made the subject of subsequent notice for amendment, and the rooms are disinfected.

Out of the seven notified cases no less than six afterwards died. The number of deaths from 1901 onwards has been : 4, 5, 4, 5, 0, 5, 1, 3, 2, 6, so that this year the number is higher than it has been before.

It is difficult to know how many of these deaths are preventable, and how in actual practice to prevent them. The mothers are, in the intervals between the visits of the doctor or midwife, cared for by the good offices of a kind neighbour or friend, whose ideas of surgical cleanliness may be very primitive, and whose

actions, though done for the best, are often risky and indiscreet. Sometimes the mothers themselves are at fault. To cite an example: A family, consisting of the father, mother, and five children, lived in a two-roomed tenement. Two of the children were taken ill with measles and removed to an institution; one child died. The coffin containing the body was brought home by a private undertaker and deposited in the mother's bedroom. Four days later the mother was confined. The coffin was in the same room with the mother, and was partially covered by a shawl and some clothes. When the risky nature of this proceeding was pointed out to the friends and relatives they said: "They thought the doctor did not notice the coffin as he did not make any remarks about it."

This case illustrates one of the difficulties in administering the Public Health Acts. When hygiene comes into conflict with natural love or affection, often, too often, hygiene has to yield place to the sentimental consideration.

As a general rule dead bodies retained in one- or two-roomed tenements, or in crowded tenements, are taken, with the consent of the relatives, by the Public Health Department, to the public mortuary, there to await burial—in certain instances such a removal can be compulsorily enforced.

The difficulty associated with this removal would be much lessened in poor and densely populated areas by the provision of a chapel of rest, distinct from the mortuary, to which bodies might be removed until the time of the funeral.

The poor are reluctant to see the bodies of their children and relatives taken to the public mortuary.

DEATHS AND DEATH RATES.

The number of Finsbury residents who died in 1910 was 1,636, equivalent to a crude death-rate for the whole Borough of 17.3 per 1,000 inhabitants living. The death-rates for previous years are given in the attached table. It will be seen that the death-rate for the present year is the lowest since

the Borough was incorporated. The death-rate for the whole of London was 12.7, as compared with 14.03, 14.0, and 14.6 in 1909, 1908, and 1907 respectively.

CRUDE DEATH RATES.

	The Borough.	North Clerkenwell.	South Clerkenwell.	St. Luke.	St. Sepulchre.
1901	21.4	20.0	20.3	23.7	18.8
1902	22.7	22.3	20.7	24.3	20.1
1903	19.8	19.2	18.3	21.7	19.0
1904	21.1	21.7	18.9	22.0	23.0
1905	18.9	18.5	17.3	20.2	25.2
1906	20.7	22.7	18.6	20.3	24.7
1907	18.3	17.5	16.4	20.3	24.9
1908	18.4	18.3		18.9	10.3
1909	19.0	18.5		19.9	20.7
1910	17.3	17.2		17.5	15.7

In comparing one borough or district with another, it is important to take into account the number of young people and old people in both, and the number of males and females.

For infants and old people have a higher death-rate than young adults, and females at all ages have lower death-rates than males, save for the interval 10 years to 20 years, when the female rate is slightly higher.

Before comparison, therefore, can be legitimately made between the death-rates of different towns it is necessary that these inequalities due to differences in sex and age distribution should be levelled. For this purpose the Registrar-General has calculated a factor for each town which, when multiplied into the crude death-rate gives the death-rate corrected for age and sex distribution, and this is available for comparison with the rates in other districts.

The factor for correction in Finsbury is 1.0355. This multiplied into 17.3, the crude death-rate, gives a corrected death-rate of 17.9 per 1,000.

There is, however, still another correction to be made in the case of Finsbury due to the number of residents detained in institutions outside the Borough. It has been explained in the section devoted to population that when these are taken into account the crude death-rate is 16.9 per 1,000.

This multiplied by the factor 1.0335 gives a fully corrected death-rate of 17.5 per 1,000. The partially corrected death-rate has been retained in the table given above because the fully corrected death-rate for previous years are not now available.

The corrected Finsbury death-rates in preceding years since 1904 were 22.0, 19.5, 21.4, 18.9, 19.0, 19.7, and 17.9 per 1,000 respectively.

The corrected death-rate for Finsbury, calculated by the Registrar-General, is 18.2 per 1,000, but there are many reasons why this figure is incorrect. Adopting for Finsbury the fully corrected death-rate of 17.5 per 1,000 given above, then for the present year—having regard to Table 22 of the Registrar-General—Finsbury and Shoreditch have an equal death-rate, and are placed below Bermondsey alone, which has a corrected death-rate of 18.1 per 1,000.

The comparison of Finsbury with the rest of the country may be seen below :—

Corrected Death Rate for 1910.

England and Wales	13.4
London	12.7
Finsbury	17.9
77 Great Towns	14.3
136 Smaller Towns	12.9
Rural Districts	12.8

The Finsbury deaths were apportioned as follows : Clerkenwell, 1,023; St. Luke's, 589; St. Sepulchre, 24 deaths.

The deaths from the following causes are less this year than last: Measles, Scarlet Fever, Hooping Cough, Influenza, Diarrhœa, Phthisis, and Tuberculous diseases, Cancer, Bronchitis and Pneumonia, Alcoholism, Heart Disease, and Marasmus—whereas in the case of Diphtheria, Typhoid Fever, Puerperal Fever, Premature Birth, and Old Age the number of deaths is increased.

The deaths of residents in public institutions were: In general hospitals, 252 (270); in special hospitals, 42 (61); in fever hospitals, 23 (20); in poor-law institutions, 533 (576); in asylums, 24 (38); in various hostels, homes of rest, and homes for babies, 18 (20); the figures in brackets are the corresponding numbers for the previous year.

It will be observed that 533, that is 32 per cent., or nearly one-third of the total number occurred in poor-law institutions.

The following table gives the numbers of deaths of Finsbury residents that have occurred in public institutions since 1901.

Deaths in Public Institutions.

Year.	Total Deaths.	Deaths in Public Institutions of Finsbury Residents.	Percentage.
1901	2,161	876	40·5
1902	2,283	908	39·8
1903	1,993	870	43·6
1904	2,084	965	46·3
1905	1,855	886	47·8
1906	2,020	1,020	50·5
1907	1,774	911	51·3
1908	1,767	891	50·4
1909	1,814	988	54·4
1910	1,636	889	54·3

The belief that the inhabitants of the district are now generally poorer than they were years ago is confirmed by the fact that the percentage of deaths which occur in public institutions is slowly, and with slight remissions, continuously increasing. The percentage of the total deaths—32 per cent. of the whole which occurred in the workhouse or workhouse infirmary—is a fair criterion of the poverty which exists among many inhabitants of the district.

Deaths from Exposure and Destitution.—There were five deaths in the district which were accelerated by destitution and exposure. Four were males—three labourers, aged respectively 77, 40, 36, and a clerk aged 38 years. There was one woman, aged 69, a dress and mantle maker. The men all died in poor-law institutions, the woman died at home.

One man was a non-resident and died of phthisis, the rest were residents and died of pneumonia, bronchitis, or diarrhœa.

Three of the men were homeless, the others had fixed domiciles.

INQUESTS.

During the past year 236 inquests were held in the Borough. The causes of death were as follows :—

Adults and Children over 5 years— 146 deaths.		2. Other causes (94).	
1. Accidental causes (52) comprising		Bright's Disease .. ..	..
Accidental falls	30	Heart Disease	24
Accidental burns and scalds ..	7	Alcoholism	12
Run over by van or engine ..	5	Pneumonia and Bronchitis ..	11
Accidental injuries causing		Suicide	7
blood poisoning	4	Phthisis	6
Run over by motor car ..	2	Rupture of Aneurysm	2
Run over by tram	1		
Run over by hansom cab ..	1		
Accidental drowning	1		
Accidental strangulation ..	1		

And the following, one each: Appendicitis, Cancer, Diarrhœa, Disease of the Bladder, Gastric Ulcer, Heart Failure from an overloaded stomach pressing on a weak heart, Rupture of Throat Abscess, and Ulcer of Intestine.

Children under 5 years of age—90 deaths.				2. Other causes (55).			
1. Accidental and violent causes (35)				Pneumonia and Bronchitis ..			
Overlain in bed by parents ..	17			Premature Birth ..	11		
Accidental burns and scalds ..	8			Convulsions ..	6		
Accidental falls	6			Diarrhœa	2		
Accidental suffocation in cot ..	2			Blood Poisoning ..	2		
Run over by tram	1			Heart Disease	2		
Murder	1			Inanition and Marasmus ..	2		
				Intussusception of bowel ..	2		
				Phthisis	2		

And the rest one each: Failure of Lungs to expand at birth, Venereal Disease, Acute Inflammation of the Kidneys, Gastric Ulcer, Diphtheria, Acute Fever, Enlarged Thymus, Meningitis, Cerebral Hæmorrhage, and Tuberculous Meningitis accelerated by diarrhœa set up by eating a meat faggot.

INFANTILE MORTALITY.

The infantile mortality of any district for any stated year means the number of deaths of children under one year per 1,000 births. The corrected number of births of Finsbury children for 1910 is 2,833. In the same year 342 children died under one year of age and belonging to the Borough. The infantile mortality is obtained by multiplying the number of deaths under one year (342) by 1,000 and dividing the result by the number of births (2,833) for that year.

The infantile mortality of the Borough for 1910 is 121; expressed in popular manner this means that out of every 1,000 children born during the year 121 died before reaching their first birthday.

The corresponding figures for previous years are annexed :—

Infantile Mortality, 1901-1910.

Year.	Corrected Births.	Corrected Deaths.	Infantile Mortality.
1901	3,254	533	163
1902	3,191	558	174
1903	3,162	503	159
1904	3,095	522	168
1905	2,886	429	148
1906	3,012	474	157
1907	2,884	368	127
1908	2,916	400	137
1909	2,857	366	128
1910	2,833	342	121

The infantile mortality for 1910 is, it will be observed, lower than it has ever been since the Borough was incorporated. While this gratifying reduction gives reason for much congratulation, it may be well not to found any very robust hope on the improvement now manifested being maintained or being exceeded during the coming year. For the widespread epidemic of measles prevailing at the end of 1910 and the early months of 1911, make it very probable that the infantile mortality may be increased next year. Apart from this, however, there are other reasons why the infantile mortality in Finsbury may remain a little high—

1. The large number of residents who are in poor circumstances—carmen or general labourers earning 18s. or 20s. a week.
2. The number of people who come into the district to be confined and attended gratuitously by the students of the various hospitals. They take a tenement for a few weeks or months, and then move elsewhere, to be

replaced by others equally indigent and equally poor. It is obvious that the standard of poverty which induces a mother or a family to move from Tottenham into St. Luke's so that she may have gratuitous treatment is a standard of poverty, which does not augur well for the child's welfare or its sustenance after birth. This exemplifies one of the drawbacks of charitable effort—gratuitous treatment like monetary assistance not only relieves but also attracts and focuses in the district the needy and the penurious.

3. The frequent removals of these families whose mothers are most in need of instruction and whose babies are chiefly in want of supervision render its continuance a matter of great difficulty or impossibility.
4. The profound ignorance of many of the mothers about feeding and rearing their children.
5. The early and improvident marriages.
6. The number of mothers who have to resume work when the baby is a month or two old in order to help to support the rest of the family.

The following table compares Finsbury with London and England and Wales generally :—

	Infantile Mortality for 1910.
England and Wales	106
Whole of London	103
Finsbury	121
77 Great Towns	115
136 Smaller Towns	104
Essentially Rural Districts	96

The infantile mortality of Finsbury is about 18 per cent. greater than the figure for the whole of London, and about 5 per cent. more than the infantile mortality prevailing in the 77 great towns.

The birth-rate and infantile mortality for the metropolitan boroughs for 1910 are displayed hereunder :—

Borough.	Birth Rate.	Infant Mortality.
Battersea	23'7	96'6
Bermondsey	31'2	127
Bethnal Green	32'1	123
Camberwell	23'3	94
Chelsea	18'3	102
Deptford	24'7	123
Finsbury	29'9	121
Fulham	27'2	107
Greenwich	21'41	108
Hackney	22'1	98
Hammersmith	22'8	104
Hampstead	14'0	60'4
Holborn	19'1	100
Islington	23'21	95
Kensington	17'5	108
Lambeth	25'6	82'5
Lewisham	20'75	79'4
City of London	15'3	53'4
Paddington	19'84	101
Poplar	29'69	119
St. Marylebone	20'1	98'9
St. Pancras	22'7	108
Shoreditch	31'6	147
Southwark	26'6	120
Stepney	28'9	113
Stoke Newington	17'5	66'1
Wandsworth	20'26	78
Westminster	15'0	82
Woolwich	22'1	84

The figures for Bethnal Green, Camberwell, and Hackney have been obtained from the Registrar-General's returns, the others from the various medical officers.

The measures adopted in the Borough in recent years bearing more directly on infantile mortality are here succinctly summarised :—

1903.—No Milk Depot. No Lady Sanitary Inspectors.
Infant Mortality, 159.

1904.—Milk Depot established, November 23. One Lady Sanitary Inspector.
Infant Mortality, 168.

1905.—Milk Depot. Two Lady Sanitary Inspectors.
Infant Mortality, 148.

1906.—Milk Depot. Two Lady Sanitary Inspectors.
Infant Mortality, 157.

1907.—Milk Depot. Two Lady Sanitary Inspectors.
Infant Mortality, 127

1908.—Milk Depot. Two Lady Sanitary Inspectors.
Infant Mortality, 137.

1909.—Milk Depot closed, March 3. One Lady Sanitary Inspector (one Lady Sanitary Inspector resigned February, 1909). Two Lady Health Visitors appointed April, 1909.
Infant Mortality, 128.

1910.—No Milk Depot. One Lady Sanitary Inspector. Two Lady Health Visitors.
Infant Mortality, 121.

The deaths of infants allocated to the various diseases are given in the following table, which contains the records for the last four years :—

Infant Deaths.

	1910.	1909.	1908.	1907.
Measles	14	23	10	12
Diphtheria	4	1	—	2
Scarlet Fever	—	—	—	1
Whooping Cough	12	21	7	16
Gastritis	—	2	—	
Diarrhoea	35	46	59	42
Enteritis	7	16	21	
Premature Birth	83	60	62	61
Congenital Defects	7	7	14	13
Atrophy, Marasmus	33	50	42	55
Tuberculous Meningitis ..	4	7	9	3
Other Tuberculous Diseases	5	5	10	7
Erysipelas	1	1	—	2
Syphilis	9	9	7	3
Convulsions	7	3	18	14
Bronchitis	15	21	21	36
Pneumonia	63	47	50	49
Suffocation in bed	18	21	29	20
Other Causes	25	26	41	32
Totals	342	366	400	368

This year there is a diminished number of deaths due to measles, whooping cough, diarrhoea, wasting diseases, and suffocation in bed; an increased number due to diphtheria and premature birth.

Ages at death.—Out of 342 deaths, 73 children died in the first week of life, a number more than that of the deaths in any two other months after the first.

Of these deaths 60, that is four-fifths of the whole number, were due to premature birth. Now for these cases, while it is easy to point out a remedy, it is difficult to know how to apply it. Towards the end of the year, however, negotiations are in progress by which the lady Health Visitor will be allowed to interview in the hospital poor people who apply at St. Bartholomew's for midwifery tickets. Those who have in previous confinements had premature births will be visited, advised, and kept under supervision with a view to preventing a like occurrence again.

The number of children who died in the first month was 121—more than the number of those who died in any four succeeding months. It follows that the first month of life is the most critical for babies—if they can be helped successfully over the first four weeks they have a reasonable prospect of ultimate survival.

Measles caused 14 deaths in infants 6 to 12 months old. It is almost impossible to get the average housewife, and especially the mothers in poor localities, to treat measles as a serious disease. As long as the rash lasts the babies are left unwashed for fear of "driving the rash in"; as soon as the rash has disappeared the mothers consider all danger at an end, and take the infants out in inclement weather to develop pneumonia, and later to die.

In 9 of the 14 cases measles was followed by pneumonia, causing death; these deaths should almost certainly have been prevented by the exercise of a little common sense. Eight of the deaths belong to Clerkenwell, 6 to St. Luke's. Two of the deaths occurred in the workhouse infirmary, 2 in various "model buildings."

Hooping Cough.—There were 12 deaths due to this disease, as compared with 21 in the previous year. Many of these deaths are doubtless directly attributable to the exposure attendant upon ignorance and carelessness. In 9 cases the actual cause of death was pneumonia, which is not an uncommon complication of the

disease, in the other 3 cases death is believed to have been caused by the stress of the disease alone. Seven of the children died at home, 2 in the Poor Law Infirmary, and the rest in general hospitals.

Pneumonia and Bronchitis caused 78 deaths, as compared with 68 in 1909, and 71 in 1908. Nearly all these deaths are preventable, if parents would only refrain from exposing their children to wet and inclement weather, to great and sudden changes of temperature, and if they would clothe the babies warmly and sufficiently in wool or flannel, instead of in cotton or flannelette.

Some of these deaths are due to pneumonia following measles or hooping cough, in which the information of the primary disease has been withheld or forgotten.

Eighteen of the cases died in hospital, 4 in poor-law institutions, and the rest, 56 in number, at home.

Fifty-six belonged to Clerkenwell, 22 to St. Luke's. The inference is that deaths among the infants due to exposure is much commoner in Clerkenwell than in St. Luke's. The parents were nearly all in poor circumstances, 27 were labourers or carmen. Six of the children were illegitimate.

Diarrhoeal Diseases amongst infants caused 42 deaths in 1910, as against 64, 80, and 42 deaths in the three previous years. These diseases are chiefly prevalent during the summer months, and mostly affect those children that are artificially fed, though breast-fed children do not wholly escape. With a view to their prevention, mothers are exhorted not to wean their children during the warm weather, and to observe the utmost care in the preparation of the child's food, to discard the dummy teat, and to attend very carefully to their own personal cleanliness. There is reason to believe that this group of diseases in children is in some degree infectious and associated with the presence in milk, in feeding utensils, on the dummy teat, in the feeding bottle, or on the mother's breast in the case of suckling infants, of dirt contaminated with the specific germs. These diseases attack the fat and healthy babies and those that are thin and delicate—first children and later children, breast-fed children, and children artificially fed.

It is believed that attacks are commoner amongst children fed from the bottle with the long tube—the type which is nearly always foul and cannot be properly cleaned. The part played by flies in contaminating the infant's food has only in recent years been recognised.

It is the work of the Health Visitors to urge upon the mothers the importance of breast-feeding from clean breasts and clean teats.

If for any reason the baby cannot be suckled, an improved tubeless bottle and teat are supplied by the Public Health Department at the cost price of one penny each to those mothers who cannot afford to buy them elsewhere.

Leaflets on the prevention of diarrhoea are distributed in the district during the summer and autumn months.

Every death is investigated and the tenement inspected. Notices are served for the amendment of the defects discovered.

Diarrhoea not only attacks infants, but may also attack older children and adults. In 1910 there were 27 Finsbury residents over one year who died of this disease. This number included 6 who were over 65 years.

Twenty-four of the children belonged to Clerkenwell, 16 to St. Luke's. Four of the infants were illegitimate.

Premature Birth.—There were 83 deaths due to this cause—43 in Clerkenwell, 39 in St. Luke's, and 1 in St. Sepulchre. Eighteen of the infants were twins, 4 were quadruplets born in Lever Street.

Three children were illegitimate.

Eighteen of the deaths occurred in hospitals and infirmaries, the rest at home. Of the rest most of the deaths occurred on Wednesday and Thursday, and in the poorest districts, least on Sunday.

A quarter of the whole number were in the households of labourers and carmen.

It is quite possible than in many of these cases drugs had been taken to produce the desired result; but, on the other hand, there is no doubt that others were due to, or associated with, excessive muscular strain, venereal disease, alcoholism, working in lead, accidental falls and injuries, the presence of twins, disease of the womb, and deformities of the spine, hip, and contiguous parts.

Many of these causes are curable and preventable. It will be part of the duty of the Health Visitors when the antenatal measures are organised to instruct expectant mothers how to prevent them.

Marasmus and Inanition.—There were 33 deaths due to this cause, as compared with 50, 42, and 55 in the three previous years. Five died in the first month of life, 14 in the next two months, so that 57 per cent. died in the first three months of life. Some of these deaths are probably due to weakness of original stock, to the incapacity of the body organs to perform the work of assimilation attendant upon growth and development. Some are possibly cases of premature birth—others are associated with faults in feeding—a few may be due to venereal disease in one or both parents. Twenty-two, that is two-thirds of the whole number, occurred in Clerkenwell, 10 in St. Luke's, one case in St. Sepulchre.

Three of the infants were illegitimate.

Nearly all the deaths occurred in the very poorest parts of the Borough—eight were in various “model buildings.”

They are only in part preventable.

Tuberculosis.—There were 9 deaths due to the presence of the tubercle germ—five to consumption of the lungs, whereas the other 4 were cases of tuberculous meningitis. The total numbers for the three preceding years were 12, 19, and 10 respectively. This year all the cases occurred in Clerkenwell.

Convulsions caused 7 deaths, 3 of which occurred in the first month, and all the rest up to the fourth month of life.

At this time it is known that the child's nervous system is as yet imperfectly developed and ready to respond explosively to slight sources of irritation.

This is a very unsatisfactory cause of death to be entered on a death certificate. It means that the actual cause cannot or has not been determined.

Convulsions are not a disease; they constitute a sign or symptom like pain, tenderness, or blushing. Convulsions in a child correspond in an adult to what is popularly known as a shivering fit.

It would, therefore, be just as appropriate to say that an adult had died from "shivering" as it is to say that a child has died of "convulsions."

Convulsions in a child may often occur at the beginning of measles or of any other infectious disease, at the onset of pneumonia or during an attack of diarrhoea. They may be due to an injury to the head at birth causing hæmorrhage, they may be caused by tuberculous meningitis, and many other diseases.

They may be and often are associated with rickets and teething, but are not as a rule due to these conditions alone.

It is more than probable that some of the deaths ascribed to convulsions actually are due to suffocation in bed with the parents.

Suffocation in bed with Parents.—Eighteen deaths were due to this source. The figures for previous years were 21, 29, and 20 deaths.

There is no doubt whatever that these deaths are preventable and should be prevented. The remedy is obvious—every infant should have its own cot, and should not sleep in the same bed with its parents or other persons. A cot can easily be fashioned from an orange box or fruit crate. It is usual to find that the baby died while the mother was asleep, with the child on her arm, in the position of suckling, with the lips pressed closely against the breast. Occasionally, no doubt,

these deaths are due to definite overlying. The deaths all occurred in the poorest districts. Eleven took place in Clerkenwell, 2 each in Margaret Street and Noble Street; 9 in St. Luke's, 2 in Gee Street. Three of the children were illegitimate.

Inflammation of the Navel.—Three deaths were ascribed to this condition—the infants were under a fortnight old.

Just as in some parts of the country the friends and neighbours of a sick person like to be asked and expect to be ordered to prepare a poultice whatever the malady, so in the poorer parts of London, when a child is born the mother-in-law, the grandmother or kind neighbour in attendance often looks upon the care of the navel as her own special perquisite. So that when the student in charge of the case calls in the usual way the baby is already washed and dressed, and it would be some little trouble to undress it preparatory to examination. The consequence is that the infant's condition, and especially the state of the cord and navel, may not be correctly ascertained.

Now the offices of the friend or neighbour are well meant—she takes a piece of reputedly clean rag, burns a hole in the centre, draws the cord through, and wraps the rag around it to await events. The intention is good, the service is a kind one, but the effects may be disastrous—her surgery and her ideas of surgical cleanliness are primitive and dangerous.

Preventable Deaths.—Among the preventable causes are the deaths due to Measles, Hooping Cough, Diarrhœa, Pneumonia, Bronchitis, Suffocation in bed with parents, Venereal Disease, and, in part only, Premature Birth and Marasmus.

Assuming that the preventable causes could be really prevented, and that of the partly preventable 20 per cent. could be averted, this means that in this year 195 babies died who should have survived. What then are the reasons that stand in the way of this consummation? The answer is ignorance—chiefly parental ignorance, and in some measure thoughtlessness, carelessness, and the stress of poverty.

Infant Deaths in previous years.—The number of infant deaths and the infant mortality rates for the period 1901-1910, arranged according to districts, are given in the annexed table:—

Infant Deaths and Infant Mortality Rates.†

	The Borough.		North Clerkenwell.		South Clerkenwell.		St. Luke.		St. Sepulchre.	
Year	No. of Infant Deaths	Infant Mortality	No. of Infant Deaths	Infant Mortality	No. of Infant Deaths	Infant Mortality	No. of Infant Deaths	Infant Mortality	No. of Infant Deaths	Infant Mortality
1901	*533	163·8	158	149·2	124	139·6	172	137·0	6	162·1
1902	588	174·9	183	173·3	152	172·7	217	178·4	6	157·9
1903	503	159·1	163	153·8	125	142·2	210	176·5	5	151·5
1904	522	168·6	191	177·2	123	147·8	206	178·7	2	60·6
1905	429	148·6	146	148·2	98	121·7	178	165·5	7	333·4
1906	474	157·3	183	172·5	116	135·9	166	157·0	9	219·5
1907	368	127·0	119	116·5	105	135·1	136	128·3	8	307·7
1908	400	137·0	Clerkenwell				163	150·1	1	34·5
			Infant Deaths.		Infant Mortality.					
			236		131·0					
1909	366	128·0	219		135·0		131	130·0	6	300·0
1910	342	121·0	219		122·0		120	120·0	3	71·0

*The return for 1901 includes 73 infant deaths taking place outside the Borough but belonging to Finsbury, and which cannot now be distributed in districts. Throughout the table, births taking place in the City of London Lying-In Hospital, but not belonging to Finsbury have been excluded and the births taking place in City Road Workhouse and other places belonging to Finsbury have been included.

† Contains the Corrected Rates calculated by the Medical Officer.

From these results it may be deduced that in recent years the Borough of Finsbury has made sure, but unmistakable, progress in reducing the number of deaths amongst infants.

Distribution of Infant Deaths.—In 1910 the largest number of infant deaths occurred in Northampton Buildings (11), Donegal Street (10), Lever Street (9), Southampton Street (9), Guinness' Buildings (8), St. Bartholomew's Buildings (8), Easton Street (7), Margaret Street (7), Baldwin Street (6), Bastwick Street (6), George Yard (6), Albert Street (5), Galway Street (5), Gee Street (5), Gloucester Street (5), Myddelton Square (5), Noble Street (5), Beckford Square (4), Chadworth Buildings (4), Meredith Street (4), Risinghill Street (4), St. John Street (4), Victoria Dwellings (4) and Vineyard Walk 4 deaths.

The following streets are those in which 15 or more infant deaths have occurred in 6 recent years :—

Lists of Streets in which 15 or more Infant Deaths have occurred in 1904-7 and 1909-10.

Affleck Street	19	Little Sutton Street ...	23
Albert Street	21	Margaret Place	32
Baldwin Street	24	Margaret Street	29
Bastwick Street	36	Mitchell Street	23
Central Street	37	Myddelton Street	15
City Road	19	Noble Street	21
Clerkenwell Close	15	Northampton Buildings	60
Collier Street	17	Northampton Road ...	24
Cumming Street	23	Northampton Street ...	25
Cyrus Street	15	Peerless Street	19
Dingley Road	15	Penton Street	20
Dufferin Street	15	Pentonville Road	31
Easton Street	25	President Street	15
Farringdon Road	15	Radnor Street	31
Farringdon Road Build- ings	12	Rahere Street	21
Galway Street	29	Risinghill Street	50
Gee Street	34	Rodney Street	19
George Yard	15	Rosebery Avenue	18
Goswell Road	29	Rosoman Street	24
Guinness' Buildings (Lever Street)	55	St. Bartholomew's Build- ings	43
Hatfield Street	17	St. Helena Street	25
Henry Street (Old Street)	16	St. John Street	34
Hermes Street	16	Southampton Street ...	43
Ironmonger Row	32	Victoria Dwellings (Clerkenwell Road)	22
Ironmonger Street	22	Warren Street	30
King's Cross Road ...	18	White Lion Street ...	31
Lever Street	40	Wynford Road	15

The lady Health Visitors are ordered to visit every birth that occurs in the list of streets just given.

SENILE DEATHS.

Deaths amongst the aged in 1910.—In 1910 there were 394 deaths of Finsbury residents aged 65 years and over, comprising 189 males and 205 females.

Of all these, 216, that is 54 per cent., died in the workhouse and workhouse infirmary, and included 111 males and 105 females.

The rest, 178 in number, 78 males and 100 females, died at home.

Deaths of the aged in Poor Law Institutions.

1. A little more than half of all the old people in Finsbury died in poor-law institutions.
2. The number of males very slightly exceeded the number of females.
3. The average at death was for males 75 years, for females 79 years.
4. Nine males were 80 years or over at death, one was 91 years. Fourteen females were 80 years or over, 4 were over 90, the oldest was 99 years.

Deaths of the aged at home.

1. A little less than half of all the old people in Finsbury died at home, and a very few in general hospitals.
2. The number of females was 28 per cent. greater than the number of males.
3. The average age at death was for males 73 years, for females 72 years.
4. Eight males were 80 years and over at death, none were 90 years.
5. Thirteen females were 80 years and more, three were over 90, the oldest was 94 years.

It would appear then that both men and women live to a more advanced age inside poor-law institutions than in their own homes.

In poor-law institutions the females live to a greater age than the males, while for those who die in their own homes the reverse holds good.

Amongst the aged who died in the workhouse the numbers of men and women are nearly equal; whereas amongst those who die at home the women are in a decided majority.

The chief causes of death were: Bronchitis and Pneumonia (133), Bright's Disease (60), Old Age (41), and Cancer (30).

Fourteen of the deaths were ascribed to Phthisis, 3 to Alcoholism, and 18 to accidents.

Those who were aged 90 years and more at death comprised one male, 91 years, and seven females ranging from 90 to 99 years.

All belonged to Clerkenwell—three died at home, the other five in the workhouse or workhouse infirmary. The occupations of these 8 were in 5 cases unknown; in the other three, school-mistress, widow of a gold beater, and widow of a ribbon weaver respectively.

The causes of death were in 7 cases old age, in the other heart disease.

CANCER.

In 1910 death was accredited to Cancer in 79 persons, of whom 46 were males and 33 females.

The death rate was 0.83 per 1,000.

The deaths in previous years from 1901 onward were 72, 72, 92, 79, 65, 84, 86, 87 and 88 respectively.

The following tables show the deaths distributed according to sex and age.

Cancer Deaths, 1910.

Ages.	Under 10 years.	10 and under 20.	20 and under 30.	30 and under 40.	40 and under 50.	50 and under 60.	60 and under 70.	70 and upwards.	Total.
Males	1	1	2	1	5	12	14	10	46
Females	—	—	—	3	6	9	10	5	33
Totals, 1910 ..	1	1	2	4	11	21	24	15	79

Cancer Deaths, 1901-1910.

Years, 1901-10.	Under 10 years.	10 and under 20.	20 and under 30.	30 and under 40.	40 and under 50.	50 and under 60.	60 and under 70.	70 and upwards.	Totals.
Males	6	8	10	17	44	104	127	78	394
Females	1	3	5	28	80	109	104	80	410
Totals	7	11	15	45	124	213	231	158	804

Most of the deaths occur between 50 and 70 years—between 40 and 50 the females exceed the males, between 50 and 60 the sexes are very nearly equal—after 60 the males are the more numerous.

During the last 50 years there has apparently been an increase in the mortality due to Cancer.

This presumed increase is associated to some extent with better means of diagnosis, and more careful death certification. In this connection it is interesting to observe that the apparent increase has been more in the case of males than in females. Now Cancer in males is oftener internal, inaccessible and more difficult of recognition than the Cancer of females which is frequently external and accessible. This consideration bears out the supposition that part of the apparent increase is due to more careful and accurate diagnosis. At the same time it is more than probable that the increase of Cancer is in some measure a real one and connected with the fact that now, owing to better circumstances, better housing and better sanitation, people live longer and their lives encroach more upon the Cancer period of life extending from 45 years upwards.

The parts affected are set out below :—

Cancer and Malignant Disease of various parts of the body.	1910.	1901-9.	Total.
Face, Tongue and Jaw ..	13	62	75
Throat, Neck and Gullet ..	5	72	77
Stomach	15	92	107
Intestines	13	141	154
Liver	2	90	92
Pancreas	2	16	18
Breast	9	58	67
Womb	8	108	116
Various	12	86	98
TOTALS	79	725	804

The sites of the disease differ in the two sexes—in man they are chiefly those parts concerned with feeding and assimilation of food, the mouth, tongue, liver and intestines, in women the parts concerned with child bearing and reproduction, the womb and the breast.

ALCOHOLISM.

Alcoholism and Cirrhosis of the Liver caused 40 deaths in 1910. Cirrhosis of the Liver is the euphemism under which, in deference to the susceptibilities of relatives and friends, alcoholism is masked on death certificates. It is quite uncommon to find alcohol entered as a cause of death, except in the case of those who are friendless, homeless, unknown, destitute, or who die in the workhouse or workhouse infirmary.

The deaths from both these are appended :—

Years.				Alcoholism and Delirium Tremens.	Cirrhosis of Liver.	Total.
1901	..	..	..	11	22	33
1902	..	..	..	27	21	48
1903	..	..	..	22	29	51
1904	..	..	..	19	25	44
1905	..	..	..	8	22	30
1906	..	..	..	21	31	52
1907	..	..	..	20	26	46
1908	..	..	..	10	21	31
1909	..	..	..	12	34	46
1910	..	..	..	14	26	40
Totals 1901-10 ..				164	257	421

In addition to the numbers given above there will be other deaths due to Alcoholism, but in which it has been omitted as the primary cause from the certificate and the secondary cause or terminal disease alone inserted. Thus many of the deaths of young adults from pneumonia, many of the cases of Bright's disease of the kidneys, some of the deaths due to "influenza," and possibly some of the cases of overlying are attributable directly or indirectly to Alcohol.

There were also in the present year, 3 deaths in which chronic alcoholism was associated with phthisis.

The connection between alcoholism and consumption of the lungs has long been recognised. In some persons, excessive indulgence in alcohol so weakens the resistance of the body that the tubercle germ is able to establish itself and grow rapidly. These cases of combined phthisis and alcoholism frequently

assume the character of what is popularly known as "galloping consumption"—in which the progress of the disease is swift and the wasting well marked.

The ages of death are shown in the table:—

Age.	10-20	20-30	30-40	40-50	50-60	60-70	70-80	Total.
No. of Males ..	0	1	2	9	5	5	0	22
No. of Females ..	0	0	3	9	5	0	1	18

The youngest was a man age 28, the oldest a woman aged 71 years.

Only three of the whole number of cases were connected with the trade.

Thirteen of the cases died in the Workhouse and Workhouse Infirmary.

Of the males there were 5 porters, 4 labourers, 3 printers, and 2 clerks, other occupations claimed one each.

The mortality from Alcoholism and Cirrhosis of the Liver in England and Wales had been gradually increasing for many years and especially in the period 1896 to 1900. It reached its highest point in 1900 and has been steadily declining ever since.

CONSUMPTION OF THE LUNGS.

Notification.—Voluntary notification of phthisis was adopted in Finsbury in 1900. Poor Law patients with Phthisis are now compulsorily notifiable under the Public Health (Tuberculosis) Regulations, 1908, of the Local Government Board, which came into force on the 1st January, 1909.

The notifications and deaths of Finsbury cases of Phthisis since 1901 are appended :—

Phthisis Notifications and Deaths, 1901—1910.

			Total No. of Notifications.	No. of Cases notified per 10,000 of inhabitants.	Total No. of Deaths	Death Rate per 1,000.
1901	..	..	70	6·9	216	2·12
1902	..	..	121	12·0	240	2·38
1903	..	..	219	21·8	223	2·21
1904	..	..	210	21·2	251	2·53
1905	..	..	178	18·1	215	2·18
1906	..	..	217	22·2	232	2·38
1907	..	..	217	22·4	243	2·51
1908	..	..	220	22·9	221	2·30
1909	..	..	359	37·4	228	2·39
1910	..	..	319	33·7	166	1·75

These numbers refer to separate cases—separate individuals. The actual number of notifications received in 1910 was 1083, but of these many, sometimes 5 or 6, referred to the same patient. The number of separate persons notified was 319, 189 males and 130 females. Of the whole number 188, or 58·9 per cent. were poor law patients notified by poor law medical men. For these 188 persons there were received 649 notifications on admission and readmission to the poor law infirmary, and 253 certificates on discharge—a total of 902 notifications.

A single example of the movements of a typical poor law case will render this matter clearer.

1910. Case of Phthisis, T.T.	Date.	Address.
Left the Infirmary	15th February ..	8, Noble Street.
Entered the Workhouse ..	16th February ..	—
Left the Infirmary	18th February ..	8, Margaret Street.
Entered the Infirmary ..	25th March ..	24, Noble Street.
Left the Infirmary	4th April	8, Margaret Street.
Entered the Workhouse ..	6th April	—
Left the Infirmary	12th June	8, Margaret Street.
Entered the Workhouse ..	15th June	8, Noble Street.
Transferred to Infirmary ..	15th June	—
Left Infirmary	2nd July	8, Margaret Street.
Entered the Workhouse ..	25th July	24, Noble Street.
Transferred to Infirmary ..	27th July	—
Left Infirmary	5th August	8, Margaret Street.
Entered the Workhouse ..	9th August	24, Noble Street.
Transferred to Infirmary ..	11th August	—
Left Infirmary	22nd October ..	8, Margaret Street.
Entered the Workhouse ..	5th November ..	24, Noble Street.
Transferred to Infirmary ..	5th November ..	—

For each one of the above occasions a separate notification fee was paid.

Of the whole number of cases notified, less than a third were born in Finsbury, an equal number in other London Boroughs and the rest elsewhere. Two were born in Italy. One in every seven of the patients was bed-ridden and had been ill some considerable time. One had been ill 20 years, one 25 years, and these people had doubtless been presumably infectious during most if not the whole of this period.

This illustrates the difficulty of dealing satisfactorily with phthisis on legislative bases; the appeal for its prevention and limitation must in the end be mainly a personal one.

This late notification is of very little value from a public health standpoint.

It is very difficult to say how many of these cases owe the disease to their connection with the Borough; in other words how many of these patients are really "Finsbury cases," and this difficulty is much increased by the strenuous efforts of the poor law patients to establish a Finsbury "settlement" and thereby obtain admission to the Infirmary for Finsbury residents situate at Archway Road.

For just as the Marylebone Workhouse appears to be the favourite workhouse, so the Finsbury Infirmary, known as the Holborn Union Infirmary, Archway Road, is the popular Infirmary for those who come under the purview of the poor law north of the Thames.

The Poor Law Infirmary at Highgate has for many years past had an excellent reputation amongst the poor of North London for its humane and considerate treatment of consumption. The poor avail themselves of every device, every subterfuge, to be admitted here. Thus, to take an example—a male phthisis patient was admitted to the Archway Road Infirmary and gave an address at a Finsbury common lodging-house. Enquiry at the lodging-house failed to identify the man. A letter was sent to the Medical Superintendent, asking him to verify the address and to amplify the patient's statement. The consumptive still adhered to it that he had lived for some time at the common lodging-house. Further enquiry at the lodging-house elicited no information of the patient—he was quite unknown there. A second letter was sent to the Medical Superintendent. The patient now admitted that he had lived for years in Hampstead and had stayed for one night only at the Finsbury common lodging-house, so that he might "get into the Archway Road Infirmary as he did not wish to go to any other Infirmary."

In another example a man from Blackpool stayed a few days at a Finsbury address and was admitted to the Archway Road Infirmary. In many instances there is evidence that these

phthisical patients are directed and instructed how to get admission to the Infirmary by lodging-house touts.

Finsbury therefore, in some measure, tends to become a dumping ground for consumptives who have no claim upon the Borough save that of a common humanity, and for this there are the following additional possible reasons :—

1. Some have come into Finsbury because their health is already failing and they desire to be near the hospitals where they get gratuitous treatment. When they eventually become unfit for work, their residence in Finsbury will ensure them admittance into the Infirmary.
2. There is a considerable market for unskilled labour in the Borough—for carmen and general labourers.
3. There are many charitable and philanthropic associations and institutions in Finsbury—these not only relieve but also attract the poor and needy.

Early Signs.—A little more than half of the whole number of cases sought medical advice in the first instance for their chests. The urgent signs and symptoms for which these phthisical patients sought relief were as follows :—

Cough, 85; Pain in the Chest, 45; Blood spitting, 23; Bronchitis and Pneumonia, 21; General Weakness, 16; Wasting, 15; "Bad Chest," 9; Swollen neck glands, 9; Pleurisy, 5; Difficulty in Breathing, 3; Cold, 3; Asthma, 3; Influenza, 2; and other causes, one each.

In 8 cases the disease was first discovered by the School Medical Officers at the official inspection of school children in school.

Very few of the patients were aware that they had the disease even when it was of longstanding duration.

The significance of this is obvious. It is occasionally difficult to get a confirmed consumptive to take the proper measures to prevent infecting others—but if the patient is ignorant of his affliction, naturally no precautions whatever are taken.

Deaths.—In 1910, the number of Finsbury persons who died of phthisis or consumption of the lungs was 166 ; in addition to these 31 died of other forms of tuberculosis.

The deaths for previous years are given in the subjoined table :—

Phthisis Deaths and Death Rates, 1901—1910.

Year.	Finsbury Deaths from Phthisis.	Finsbury Deaths from other forms of Tuberculosis.	Phthisis Death Rates per 1,000 population.	
			Finsbury.	England and Wales.
1901	216	30	2·12	1·260
1902	240	23	2·38	1·230
1903	223	39	2·21	1·200
1904	251	67	2·53	1·230
1905	215	52	2·18	1·140
1906	232	48	2·38	1·150
1907	243	42	2·51	1·140
1908	221	39	2·30	1·115
1909	228	31	2·39	1·081
1910	166	31	1·75	—

It will be observed that in Finsbury the deaths this year and the death rate from phthisis are both much less than they have been since the Borough was formed. As to the causes which have produced this very marked diminution it is too early to speculate, but there can be little doubt that it is only in small part if at all directly attributable to administrative action or the adoption of preventive measures. It would appear that some of the cases that used to come to Finsbury have now gone elsewhere—but even this is not the full explanation. The question will be dealt with in a later report.

Of the whole number of deaths in Finsbury in 1910, ten per cent. were due to phthisis—and as in 1909, twelve per cent, due to all forms of tuberculosis.

Threequarters of the deaths due to phthisis took place between 25 and 65 years—the “working life” period of men—when their usefulness should be greatest, when their earnings are most needed for the support of their families.

Sixty-three died in the Holborn Infirmary, Archway Road, of which 49 were males, 14 females. It is generally found that the death-rates amongst males exceeds the rate amongst females—thus, for England and Wales in 1909 the death-rates from phthisis were—for males, 1·270, and for females, ·903 per thousand.

At the end of 1910, there were 99 Finsbury patients still under treatment for phthisis in the Infirmary.

The deaths from phthisis in institutions for previous years are appended :—

Phthisis Deaths in Institutions, 1901—1910.

Year.	Total Number of Phthisis Deaths.	Phthisis Deaths in Holborn Union Infirmary.	In other Institutions.	Total in Institutions.	Percentage of Deaths in Institutions.
1901 ..	216	82	39	121	56·0
1902 ..	240	88	20	108	45·0
1903 ..	223	97	20	117	52·5
1904 ..	251	113	27	140	55·7
1905 ..	215	97	31	128	59·3
1906 ..	232	85	58	143	61·6
1907 ..	243	108	51	159	65·4
1908 ..	221	81	50	131	59·3
1909 ..	218	87	59	146	67·0
1910 ..	166	63	25	88	53·0

It is a great advantage to have cases of phthisis removed to an institution, especially, in the later stages when the expectoration may be very profuse. This measure removes a possible source of infection to others. Unfortunately, however, it is difficult to secure the removal of these poor law cases until they are helpless or sometimes almost moribund. Under these circumstances the removal, although still advisable, is not nearly as salutary as if it were done earlier.

Phthisis Death Rates—London Boroughs, 1910.

Borough.	Phthisis Death Rate per 1,000.	Borough.	Phthisis Death Rate per 1,000.
Battersea	1·03	Lambeth	1·2
Bermondsey	1·73	Lewisham	0·55
Bethnal Green ..	1·43	City of London ..	1·05
Camberwell	1·08	Paddington	0·83
Chelsea	1·18	Poplar	1·50
Deptford	1·26	St. Marylebone ..	1·05
Finsbury	1·75	St. Pancras	1·25
Fulham	1·08	Shoreditch	1·5
Greenwich	1·96	Southwark	1·84
Hackney	1·08	Stepney	1·29
Hammersmith ..	1·04	Stoke Newington ..	0·92
Hampstead	0·60	Wandsworth	0·76
Holborn	1·84	Westminster	1·08
Islington	1·10	Woolwich	1·04
Kensington	0·76		

Phthisis Death Rates, 1910 .. { England and Wales .. 1·081
 Whole of London .. 1·14

These rates have been obtained from the Medical Officers of the Boroughs concerned, with the exception of the rates for Bethnal Green, Camberwell, Hackney and Hammersmith, which are derived from the Registrar General's returns.

Finsbury is seen to be third highest, being exceeded by Holborn and Southwark.

**Street List of Phthisis Deaths and Notifications
1904—1910.**

These records have been investigated and the deaths and notifications allocated amongst the various streets as follows:—

For statistical purposes large blocks of tenement buildings have been detached from the streets in which they lie, and are enumerated separately.

Street.	Notifi- cations.	Deaths.	Street.	Notifi- cations.	Deaths.
Affleck Street ..	8	11	Clerkenwell Close ..	—	3
Albemarle Street ..	—	2	Clerkenwell Green ..	46	13
Albert Street ..	4	6	Clerkenwell Road ..	8	4
Albion Place ..	—	1	Cloudesley Road ..	1	2
Aldersgate Street ..	—	1	Cobden Buildings ..	—	1
Allen Street ..	3	2	Coburg Street ..	2	3
Amwell Street ..	2	6	Coldbath Buildings ..	6	8
Ann Street ..	2	—	Coldbath Square ..	9	11
Ann's Place ..	1	1	Coleman's Buildings..	1	1
Arlington Street ..	7	5	Collier Street ..	1	4
Attneave Street ..	5	3	Compton Buildings ..	12	15
Aylesbury Street ..	9	9	Compton Passage ..	1	1
Baker Street ..	5	2	Compton Street ..	8	8
Bakers Row ..	5	5	Corporation Buildings	14	8
Baldwin Street ..	29	19	Corporation Row ..	10	9
Baltic Street ..	2	2	Costers Dwellings ..	3	5
Banner Street ..	16	2	Cottage Lane ..	2	—
Barnsbury Road ..	1	1	Cowcross Street ..	2	3
Baron Street ..	11	8	Cowper Street ..	1	1
Bartholomew Square..	12	6	Crawford Passage ..	4	3
Bastwick Street ..	42	34	Cumberland Terrace ..	—	1
Bath Buildings ..	4	2	Cumming Street ..	20	15
Bath Street ..	3	3	Cynthia Street ..	6	5
Beckford Square ..	2	5	Cyrus Street ..	22	10
Benjamin Street ..	3	1	Dingley Road ..	8	4
Berkley Court ..	2	—	Domingo Street ..	—	2
Berkley Street ..	10	4	Donegal Street ..	16	10
Berry Street ..	3	—	Douglas Place ..	3	—
Bowling Green Lane ..	4	—	Dundee Buildings ..	3	—
Brewers Buildings ..	3	—	Eagle Court ..	2	1
Brewer Street ..	12	9	Eagle Dwellings ..	3	2
Brewer Street North ..	1	1	East Place ..	3	—
Brunswick Close ..	11	7	Easton Street ..	14	8
Bunhill Row ..	2	1	Easton Place ..	7	4
Busaco Street ..	15	14	Edmunds Place ..	1	—
Buxton Houses ..	1	3	Elizabeth Place ..	1	—
Buxton Street ..	4	3	Errol Street ..	2	—
Castle Street ..	1	2	Europia Place ..	5	4
Cavendish Buildings ..	8	4	Exmouth Street ..	5	1
Central Street ..	16	16	Farringdon Rd. Bldgs.	8	14
Chadwell Street ..	—	4	Featherstone Street ..	2	—
Chapel Place ..	—	1	Field Place ..	2	—
Chapel Row ..	2	5	Finsbury Square ..	—	1
Chapel Street ..	5	8	Fletchers Row ..	3	3
Charles Street ..	1	—	Francis Court ..	6	5
Charlotte Place ..	3	1	Frederick Row ..	1	3
Charter Buildings ..	3	3	Frye's Buildings ..	1	—
Chadworth Buildings	4	2	Galway Street ..	16	14
Charterhouse Square..	2	2	Gastigny Place ..	3	5
Charterhouse Street ..	1	—	Gee Street ..	27	19
Charterhouse, The ..	—	1	George Street ..	3	3
Chiswell Street ..	—	2	George Yard ..	3	5
Church Row ..	3	4	George's Row ..	1	1
City Road ..	8	10	Glasshouse Yard ..	2	3
Claremont Mews ..	—	1	Gloucester Street ..	1	7
Claremont Square ..	3	6	Godson Street ..	3	7

Street.	Notifi- cations.	Deaths.	Street.	Notifi- cations.	Deaths.
Goswell Place ..	1	—	Northampton Row ..	3	3
Goswell Road ..	13	15	Northampton Square..	2	6
Goswell Terrace ..	2	8	Northampton Street ..	21	16
Granville Square ..	2	6	Norway Street ..	2	1
Granville Street ..	1	—	Old Street ..	75	25
Great Bath Street ..	6	9	Owens Row ..	2	4
Great Percy Street ..	7	12	Parrs Place ..	—	1
Great Sutton Street ..	4	3	Paton Street ..	1	2
Guest Street ..	—	1	Paul Street ..	—	1
Guinness Buildings ..	18	17	Peabody Buildings—		
Hall Street ..	6	5	Dufferin Street ..	11	13
Hallett's Place ..	7	6	Errol Street ..	6	7
Hardwick Street ..	2	2	Farringdon Road ..	6	8
Hat and Mitre Court..	1	2	Guest Street ..	7	4
Hatfield Street ..	13	8	Roscoe Street ..	16	14
Haywards Place ..	4	1	Peartree Street ..	4	1
Helmet Row ..	8	8	Peerless Buildings ..	3	7
Hermes Street ..	9	6	Peerless Street ..	13	14
Little Northampton St.	12	9	Penny Bank Buildings	1	1
Little Saffron Hill ..	1	—	Penton Place ..	7	3
Little Sutton Street ..	17	9	Penton Residences ..	—	1
Lizard Street ..	5	10	Penton Street ..	7	7
Lloyd Square ..	1	2	Pentonville Road ..	35	23
Lloyd Street ..	—	2	Percival Street ..	5	9
Lloyds Row ..	7	5	Percy Circus ..	1	1
Locks Gardens ..	3	1	Peters Lane ..	1	—
Lorenzo Street ..	2	—	Pickard Street ..	1	—
Ludlow Street ..	4	4	Pine Street ..	6	7
Macclesfield Place ..	2	1	Playhouse Yard ..	1	2
Macclesfield Street ..	8	3	Pollard Houses ..	1	2
Macclesfield Terrace ..	2	—	Powell Street ..	3	3
Malta Street ..	2	1	President Street ..	4	5
Mantel Street ..	1	—	Prospect Row ..	1	2
Margaret Street ..	36	22	Pump Court ..	5	1
Market Buildings ..	5	4	Radnor Street ..	17	13
Masons Place ..	2	—	Radsworth Street ..	2	2
Medcalf Place ..	1	0	Rahere Street ..	11	13
Memel Street ..	6	4	Rawstorne Street ..	6	4
Meredith Street ..	7	4	Red Lion Market ..	—	1
Merlins Place ..	5	1	Red Lion Street ..	14	12
Mitchell Street ..	13	12	Richard Street ..	4	3
Mitre Court ..	1	—	Richmond Street ..	5	4
Moreland Street ..	6	5	Risinghill Street ..	27	24
Muriel Street ..	1	2	River Street ..	2	—
Murton Street ..	4	6	Rodney Place ..	1	—
Myddelton Square ..	5	1	Rodney Residences ..	—	2
Myddelton Street ..	10	6	Rodney Street ..	12	16
Nelson Street ..	8	4	Roscoe Street ..	1	2
Newcastle Row ..	—	1	Rosebery Avenue ..	5	10
New Charles Street ..	2	2	Rosoman Street ..	20	6
New Street ..	5	2	Royley Street ..	1	1
Noble Street ..	25	9	Rydon Crescent ..	1	—
Normans Buildings ..	9	11	Sadlers Buildings ..	—	1
Norman Street ..	1	—	St. Bartholomew's Bdgs	24	25
Northampton Buildings	26	26	St. Clement's Buildings	5	3
Northampton Road ..	16	9	St. Helena Street ..	39	28

Street.	Notifi- cations.	Deaths.	Street.	Notifi- cations.	Deaths.
St. James Street ..	3	4	Valetta Street ..	1	—
St. James Walk ..	2	2	Vernon Square ..	1	2
St. John's Lane ..	11	4	Victoria Dwellings ..	23	13
St. John's Square ..	3	1	Vineyard Gardens ..	6	2
St. John's Street ..	21	23	Vineyard Walk ..	5	7
Sans Walk ..	—	1	Wardens Court ..	3	2
Seabrook Place ..	2	—	Warner Street ..	1	2
Sekforde Street ..	4	4	Warren Mews ..	1	1
Seward Street ..	5	3	Warren Street ..	19	7
Seymour Place ..	2	—	Waterloo Street ..	9	7
Shrewsbury Court ..	1	—	Wellington Place ..	2	—
Sidney Grove ..	4	—	Wenlake Buildings ..	6	4
Sidney Place ..	2	2	West Place ..	10	2
Sidney Street ..	8	6	Weston Street ..	2	2
Skinner Street ..	7	2	Wharf Road ..	—	1
Smithfield Buildings ..	3	2	Wharton Street ..	3	3
Smith Street ..	7	3	Whiskin Street ..	8	9
Southampton Street ..	11	15	White Conduit Street ..	5	2
South Place ..	1	1	Whitecross Street ..	12	8
Spa Cottages ..	3	1	White Horse Alley ..	9	8
Spencer Street ..	4	8	White Lion Buildings ..	3	2
Stewarts Place ..	—	2	White Lion Street ..	34	25
Suffolk Street ..	2	—	Wilmington Place ..	9	6
Thomas Place ..	6	7	Wilmington Square ..	9	7
Thomas Street ..	8	3	Wilmington Street ..	1	2
Tilney Court ..	3	—	Winchester Cottages ..	1	—
Turnmill Street ..	1	—	Winchester Street ..	6	6
Tysoe Street ..	3	2	Withers Place ..	2	2
Union Place ..	4	3	Woodbridge Street ..	9	6
Union Square ..	1	—	Wynford Road ..	6	12
Upper Ashby Street ..	3	—	Wynyatt Street ..	8	11
Upper Charles Street ..	1	—	Yardley Street ..	2	2
Upper Smith Street ..	—	1			
Upper Vernon Street ..	1	—			
Upper Yardley Street ..	2	2	Unplaced ..	—	50

The Totals are, Notifications 1775 ; Deaths 1477.

Preventive and other measures.

The preventive measures adopted were fully described in the report for 1909.

Briefly they have reference to the following:—

1. Visitation and advice to the patient and the rest of the family.
2. Enquiry for missed or suspected cases.
3. Suspected cases are put in the way of obtaining treatment.

4. Leaflets of instruction are left at the house.
5. Reference to appropriate agencies of cases of unemployment or destitution.
6. Advanced cases are advised to go to the Infirmary.
7. Sanitary survey of premises with correction of defects.
8. Measures in connection with the Inspection of meat and milk.
9. General Sanitary measures.
10. Free bacteriological examination of sputum at the Public Health Department. In 1910, the number of specimens examined was 33, of which 10 were positive.
11. Disinfection after notification and death.
12. Treatment at the Infirmary, Archway Road.
13. Re-visits.

In addition to the above, the Metropolitan Asylums Board have allocated beds at the Children's Infirmary, Carshalton, for the treatment of phthisis in poor law children, and have reserved Millfield, Rustington, for early cases of phthisis in such children.

Forms of admission are supplied to the various Metropolitan Boards of Guardians—admission can be obtained only on the written order of the Clerk to the Guardians. These beds, of course, are for the whole of London,

Measures in other London Boroughs.—Enquiry was made from the other Metropolitan Boroughs as to the steps taken to deal with cases of phthisis.

The following is a summary of the replies :—

Sanatorium Treatment.—Four Boroughs retained beds in sanatoria—three at the Maitland Sanatorium, Peppard Common, near Reading, and one at the Fairlight Sanatorium, Hastings.

The charges ranged from £1 per bed per week to £1 10s. 0d. per week. Payment was stated in each case to be made out of the rates. The families of the patients during their absence were said

to be maintained by friends, by private arrangement, by the parish, by clubs, by sick pay, or by the Charity Organization Society. In one Borough no arrangements had been made for the maintenance of the families. In two Boroughs alone had any plans been devised for supervising the patients after their discharge. In one Borough this devolved upon the Local Health Society, in the other upon the Public Health Staff.

No Borough had an "After Care" Society.

Sanatorium treatment has its uses and its limits. Its educational value is immense—but the critical time arises when the patient returns home to a squalid, stuffy tenement, and tries to observe the lessons he has just learnt, out of work, and possibly with no immediate prospect of work. It would be much better to teach him, while retaining his work, how to order his life so as to do the best for himself and the best for those dependent upon him. This is the essence of the dispensary treatment.

Dispensary Treatment.—Six Boroughs had established or were on the point of establishing phthisis dispensaries. The object of these is threefold, by continuous supervision and visitation:—

1. To treat the patient and to instruct him, while keeping his employment, how best to live an open air life, or a modified form of it, and to help him to that end.
2. To teach the patient, having regard to the actual home circumstances, how best to avoid infecting the rest of his family.
3. To search for missed and unrecognised cases in the patient's family, and to help and treat them also.

Two of the boroughs were lending out wooden shelters by which the patients were able to get open air treatment by living in these structures either on the roofs of their houses or in their back gardens.

Perhaps in the near future, it may become possible for Finsbury in conjunction with one or more of the neighbouring boroughs to institute a phthisis dispensary.

The project is assuredly conceived on the right lines and is worthy the careful and serious consideration of the Council,

GLANDERS.

This disease is notifiable in London to the Medical Officer of Health in pursuance of an order by the London County Council under Sections 55 and 56 of the Public Health (London) Act.

Inspectors under the diseases of Animals Act 1894, must notify the local authority by the provisions of Article 4 of the Glanders and Farcy Order 1907.

No case of glanders in man was notified during the year.

Notice was, however, received of an outbreak of glanders amongst horses in a mews in the Borough.

ANTHRAX.

This disease is compulsorily notifiable to the Chief Inspector of Factories at the Home Office, London, in pursuance of Section 73 of the Factory and Workshop Act 1901.

By the Anthrax Order of 1899, Inspectors under the Diseases of Animals Act 1894 are required to notify outbreaks of Anthrax to the Medical Officer of Health. Anthrax is notifiable in London under an order of the London County Council under section 55 and 56 of the Public Health (London) Act. In 1910, notice was received of one case of anthrax in a horse, and of one case in a man employed by a horse-hair manufacturer in the borough. The patient had been handling English and South American hair only, and had not, for some considerable time manipulated Russian and Chinese hair which are notoriously prone to carry the disease.

The factory was visited and the conditions of employment reported to be safe and well observed. All suspected hair was on arrival being taken direct to a special room where it was sorted over down draught exhaust ventilation tables. From here it was conveyed in a closed truck to the disinfecting chamber where it was soaked for an hour or more in a heated disinfectant solution.

The methods adopted had been approved by the Home Office.

The man was treated with Sclavo's serum and recovered.

CHOLERA.

In 1910, cases of Cholera were still occurring in Russia, and persons travelling from infected ports into England were required to give their correct names and destinations to the Port Medical Officer of the Port of Entry into England, who then forwarded these to the Medical Officer of Health of the district concerned, so that these contacts might be kept under supervision.

In this way the names and Finsbury addresses of 12 persons who had been in contact with cases of Cholera were received by the Council's Medical Officer from the Port Medical Officers of London and Folkestone.

These contacts were then visited at intervals while they remained in Finsbury.

In three cases the supervision could not be effected. One of the contacts did not arrive at the address he gave, the other two were unknown at the addresses furnished nor did they come there.

It is obvious that if this measure is to be usefully administered, if by its means Cholera is to be detected in England at the earliest possible minute, there must be good faith on both sides. The correct address must be given and the contact must proceed there in due course.

At present this is not always done and it would certainly appear that further powers are desirable to deal effectively with this abuse of hospitality and precautionary sanitary procedure.

CEREBRO SPINAL MENINGITIS.

Four cases were notified with 2 deaths.

The patients were all young children. One of the tenements was reported to be verminous—the rest clean.

No source of infection was found.

In one case the diagnosis was confirmed by a post-mortem examination.

ERYSIPELAS.

Notifications to the number of 164 were received, distributed as follows:—

		Under 1 year	1-10	10-	20-	30-	40-	50-	60-	Total all ages.
Males ..	..	1	9	8	1	8	11	10	11	59
Females ..	..	3	3	12	8	16	19	27	17	105
Totals ..	..	4	12	20	9	24	30	37	28	164

Disinfection is done after Erysipelas only on request and not as a routine measure.

There were three deaths due to the disease, one in a child under 1 year, the other two in adults.

SMALL-POX.

No case of Small-pox was notified in Finsbury in 1910. The names and addresses were received of two persons who had recently been in contact with the disease. These were kept under observation for 16 days and were well at the end of this period of supervision.

MEASLES.

This disease is not compulsorily notifiable. Notice of cases is generally received by the Public Health Department from the Education Department of the London County Council, from Schools inside and outside the Borough, from School Visitors, from Medical Men, from other Borough Councils, from Registrars of Births and Deaths, from Relieving Officers, Sanitary Inspectors, Superintendents of Dwellings and from Parents and Guardians.

In this way, notices of 898 cases were received in 1910, as compared with 430 in the year before.

Although measles is not a notifiable disease, the London County Council have made Sections 60—65, 68—70, 72—74, of the Public

Health (London) Act 1891, applicable to it. These are the clauses which refer to the cleansing and disinfection of premises and materials, and to contact with, or exposure of infected persons and things.

The age incidence and the ages at death from 1903 to 1910 are shown in the tables given:—

Age Incidence of Cases of Measles, 1903-1910.

Under 1 year of age in months.				1-	2-	3-	4-	5-10	10-15	Total 1903-1910
0-3	3-6	6-9	9-12							
2	33	94	137	560	561	711	1,021	1,858	55	5,032

The actual numbers notified year by year were 577, 802, 561, 1,036, 478, 245, 436, and 898, from 1903 up to the present year.

Ages at Death in Cases of Measles, 1903-1910.

Under 1 year of age in months.				1-	2-	3-	4-	5-10	10-15	Total 1903-1910
0-3	3-6	6-9	9-12							
1	12	37	64	236	78	54	15	15	3	515

The deaths year by year were 69, 60, 31, 115, 43, 38, 86 and 73 from 1903 until 1910. The largest number of cases and deaths were in 1906, when the disease was very prevalent.

Measles is very fatal to young children—in the above table 236 deaths occurred between 1 and 2 years of age—three times the number in any subsequent age period, and more than twice the number that died under one year. Most of the deaths occur in June and December. The older children are able to withstand the disease better than the younger, so that the longer the attack is deferred, the less likely the child is to die.

Children over 5 years resist measles very much better than children under 5 years—indeed 90 per cent. of the deaths amongst children occur under 5 years of age.

In populous centres, infection takes place from child to child in school and in the street, but the school is in all probability the most potent factor in this connection.

In rural and sparsely populated districts infection is almost entirely in school.

The facts adduced above are powerful reasons for excluding from attendance at day school and Sunday school all children under 5 years.

Many, if not most of the deaths which occur are preventable. The reasons why these deaths occur are given below.

1. **Ignorance of Parents.**—Many mothers, especially in poorer districts, treat measles, quite wrongly, as a trifling disease. It is quite uncommon to find a doctor in attendance—the cases are treated by the mothers. The sick children are frequently left unwashed “for fear of driving the rash inwardly.” When a household has been attacked it is quite common to find that the other children who have not had it, and the children of neighbouring families may be brought into the sick room, so that these too may acquire the disease and have done with it once for all.

2. **Home circumstances.** The cases should be isolated as early as possible. Unfortunately this is not always feasible in Finsbury. Many families live and sleep in one room or in two rooms at most. Often too the mother may have to go out to work to support the family and leave the child in the care of a young girl of 16 or 17 years, or to be looked after by a neighbour in the intervals of her domestic duties. Or even worse, the mother may lock up her tenement, take the key with her, and let the child, with rash well out, run the streets until the mother's return from work in the evening.

3. Improper Exposure.—Mothers, too poor to pay for medical treatment at home, have been known repeatedly to take the child who is ill, backwards and forwards to a doctor or to a hospital, risking the infection of others, and the development of pneumonia in the child. When these cases are discovered they are given tickets for home medical treatment by one of the charitable medical institutions in the Borough.

4. Premature Resumption of ordinary daily routine.—Many parents regard the disappearance of the rash as an indication that the disease has vanished, that all danger is over. When this has happened the child is allowed to go out of doors in all weathers, insufficiently and improperly clothed; he then contracts pneumonia and is in danger of dying.

It is recommended that the child, however well he may feel, should remain in bed for one week after the rash has completely gone, and should be kept indoors for still another week, after getting up.

5. Improper nursing.—Some of the children have been found to be improperly and insufficiently fed, to be in bed clad only in a flannelette vest, with shoulders and chest exposed, covered over by a thin counterpane with or without a blanket. Many of the children are dirty, unwashed, and looked after by others just a few years older. The feeding is often injudicious—allured by newspaper advertisements the parents buy cod liver oil or its emulsions and neglect to provide milk which is much more suitable.

6. Treatment.—The home treatment generally consists of saffron and brandy; sometimes this is varied and saffron and senna, saffron and syrup of buckthorn, or saffron and onions are used. The onions were stated to be “very good for bringing the rash out and strengthening the eyes after being weakened by the measles.

Illustrative cases are appended :—

1. Exposure of set purpose.—A family consisting of the father, mother, and 7 children ranging from 19 months to 14 years,

occupied two rooms. One of the children was ill with measles—it was now the fifth day of the disease. All the other children were placed in the same room with the sick child. “If they are to have it, they will have it.” The children attend four different schools.

2. Intentional Exposure.—A child 18 months old was brought by the mother into a house where the children had measles in order to “catch the disease and have done with it.”

3. Improper Nursing.—A child 3 years old with measles and pneumonia, was found at home left in the sole charge of a girl barely sixteen. The mother had gone out and it was not known when she would return.

4. Difficult home circumstances, Neglect.—Family consisting of a man, wife and five children, occupied two rooms. The father was out with a piano organ. The mother had gone out to work and had left 1½d. with her daughter, 10 years old, to buy food for the children until her return, and a farthing’s worth of milk for the baby. The five children were at home alone in one room and being cared for by the eldest, 10 years old. A child 4 years old was very ill with measles and being nursed by her sister of 10 years, who also looked after the baby, 5 months old. The room and stairs were dirty, the bedding dirty and verminous. The only cooking utensil was a saucepan; there was no kettle. The case was referred to the National Society for the Prevention of Cruelty to Children.

5. Forced Convalescence.—In one case the mother asserted that she had been told by an old lady of 80 years “who surely ought to know” that “three days was sufficient for any case of measles.” This mother had been in the habit of getting the children with measles up from bed on the third day and sending them into the streets.

Public Health Action.—The cases are visited by the Lady Sanitary Inspector. Suitable advice as to nursing and feeding is given to the parents and a leaflet of instruction left with them.

Dispensary tickets are given to those children needing treatment. Cases of insufficient food and poverty are referred to philanthropic or charitable institutions or to the poor law. Arrangements are made for the disinfection of the rooms after the termination of the case. The number of cases visited was 247, the number of visits 363. The rooms were disinfected in 154 tenements.

Distribution.—In 1909 and 1910—deaths from measles occurred chiefly in the following streets :—

Albert Street, Bastwick Street, Coldbath Square and Buildings, Cumming Street, Cyrus Street, Donegal Street, Easton Street, George Yard, Guinness Buildings, Lever Street, Margaret Street, Masons Place, Risinghill Street, St. Helena Street.

What more might be done.—In this connection, the following might be thought worthy of further consideration :—

1. The rigid enforcement of the adopted clauses of the Public Health (London) Act, 1891. This would have high educational value and would doubtless prevent much needless exposure of patients to rough weather conditions and their contact with other children.
2. The distribution of leaflets of instructions by registrars of births, by midwives, by district nurses and district visitors, and by those immediately engaged in the administration of the Notification of Births Act.
3. The better co-ordination of effort between the poor-law authorities and the health authorities, and the various nursing associations.
4. The treatment in hospital of cases for whom suitable nursing is not obtainable or inexpedient at home. The Metropolitan Asylums Board have allocated a certain number of beds for the treatment of poor law cases, and there is every prospect that before long other patients also may have this advantage offered to them.
5. The adoption of poor law or municipal district nursing.

6. The compulsory teaching of hygiene in schools. This might be supplemented by the establishment of an annual "Health Day"—comparable to "Empire Day"—when useful health lessons might be enjoined on the scholars.
7. The abolition of medals and prizes for school attendance and the exclusion from school of children under 5 years.
8. The organisation of a better system of notification for measles.

HOOPING COUGH.

This is not a notifiable disease. Information of cases is generally received from schools and from the other bodies and persons who send notice of measles.

In this way the addresses of 208 cases were obtained.

The deaths numbered 36, all except one under 5 years.

Disinfection is not done as a routine after recovery.

The deaths occurred chiefly in Hatfield Street, Lever Street Northampton Buildings, Peerless Street, Penton Street, and Penton Place, Southampton Street and St. Bartholomew's Buildings.

MEASLES AND HOOPING COUGH.

Compared with other diseases.

In 1910, Measles caused 73 deaths, hooping cough 36 deaths.

These two diseases are most fatal to children under 5 years. The following table compares the deaths in children under 5 years from measles and hooping cough with the deaths from certain other diseases.

Deaths in Children under 5 years—1901-1910.

Year.	Measles.	Hooping Cough.	Small Pox.	Scarlet Fever.	Diphtheria.	Enteric Fever.
1901 ..	45	37	—	11	24	—
1902 ..	79	70	11	11	28	—
1903 ..	67	47	—	6	6	—
1904 ..	57	26	2	11	13	—
1905 ..	30	31	—	14	9	—
1906 ..	111	53	—	8	22	—
1907 ..	43	43	—	11	15	—
1908 ..	36	20	—	9	12	—
1909 ..	86	51	—	9	13	1
1910 ..	71	35	—	2	18	—
Totals ..	625	413	13	92	160	1

From this table it appears that the deaths in 10 years due to scarlet fever, diphtheria, enteric fever and small pox all taken together numbered 265, to hooping cough 413, to measles 625.

It becomes clear then that in children under 5 years measles kills more than twice the number of children whose deaths are caused by small pox, scarlet fever, diphtheria and typhoid all included.

Hooping cough is responsible for less deaths than measles and causes a little more than one and a half times the number of deaths accredited to the four remaining diseases.

These figures show the frightful ravage that is annually caused amongst young children by measles and hooping cough—deaths due to ignorance, carelessness, thoughtlessness and occasionally possibly indifference. They demonstrate once more that both measles and hooping cough are very dangerous and often fatal disorders.

ENTERIC FEVER.

The number of cases notified during the year was 28, with 4 deaths. All were removed to hospital.

The numbers in previous years are given in the accompanying table:—

Enteric Fever, 1901-1910.

Year.	No. of Cases Notified.	No. of Deaths.	Case Mortality. No. of Deaths per 100 cases notified.	No. of Cases per 10,000 of Population.	No. of Deaths per 10,000 of Population.
1901 ..	65	11	16·9	6·4	1·1
1902 ..	77	9	11·7	7·6	0·9
1903 ..	47	11	23·4	4·7	1·1
1904 ..	40	8	20·0	4·0	0·8
1905 ..	42	9	21·4	4·3	0·9
1906 ..	44	14	31·8	4·4	1·4
1907 ..	22	2	21·0	2·2	0·2
1908 ..	41	12	29·2	4·3	1·2
1909 ..	15	3	20·0	1·5	0·3
1910 ..	28	4	14·3	2·9	0·4

This year there has been a slight increase in the number of cases notified and in the number of deaths due to typhoid fever.

The deaths occurred in two males aged 38, and 47, and in two females, aged 24 and 32 years.

Source—In two instances, the infection was from recent cases in the same family. Four cases occurred in a hospital in the Borough and were probably due to infection carried by nurses or attendants. In five patients, suspicion was directed to oysters, mussels, winkles, and whelks; two cases were probably due to eating contaminated watercress. One patient had contracted the disease at a seaside health resort while away on a holiday.

A group of cases occurred in some model buildings and were very difficult to explain satisfactorily. It is thought that the early

cases were due to some visitors who stayed with friends in their tenement. One case was looked after by a nurse who also was in care of a crèche. The nurse caught enteric and one of her young charges in the crèche became infected. One of the cases in this group was for six weeks not notified. She had nose bleeding, headache, pains in the limbs and later diarrhoea but is stated to have gone about her work as usual for some weeks.

One other case was that of a woman who had probably been infected by her husband who had typhoid fever in 1905—for it is now well recognised that a patient who has had typhoid fever may remain infectious for many years after the attack. These "carrier" cases, people who have had typhoid 10, 20 or 30 years previously, and who are now apparently in excellent health, may still pass countless millions of typhoid germs daily in their stools or urine, as result of the attack years ago.

At the present day there is every reason to believe that many of these cases of enteric fever for which no source is found are due to undiscovered "carriers."

It has been suggested that the fried fish which many of the poor people eat in large amount may be partly responsible for occasional outbreaks of typhoid in London.

It is difficult to see how the typhoid germ, even if present in the fish could withstand the temperature to which it is subjected during frying, and no satisfactory experimental evidence on this head is at present forthcoming.

In order to carry the matter still a stage further it would be expedient to show that the impugned fish, plaice, were derived from a sewage contaminated nursery ground, or that the fish, or some of the fish from this area did actually contain typhoid germs. And even if these suggestions were well founded it would still be wise to demonstrate experimentally, with proper precautions, that the typhoid germs found in the fish were able to resist successfully the temperature of frying in the vats of the suspected shops, or in vats similarly constructed and subjected to the same conditions of firing and stoking.

If, on the other hand, it is alleged or suspected that the fish is contaminated by a carrier case—the fault lies with the carrier and not with the fish handled by him. Against the fish and carrier theory is the circumstance that an outbreak depending on this cause would in all probability be a continuous one and associated with fish shops in which the “carrier” served and the cases that occurred would follow in his steps from shop to shop. In the present instance such a series of events has not been found on enquiry—no carriers have been identified.

One of the cases notified was a hawker who occasionally sold watercress, and fruit in the streets. It is possible that this man or any other hawker with typhoid may have infected others—and the more readily inasmuch as watercress is only washed perfunctorily before eating, and fruit may not be washed at all, so that if contaminated the pollution would remain: unlike fish, watercress is not boiled so that the typhoid germs, if present, would have a reasonable chance of survival.

Diagnosis. Specimens of blood in suspected cases of Typhoid Fever are examined free of charge at the Public Health Department. In 1910, eleven specimens of blood were received—one gave a positive re-action, the rest were negative.

SCARLET FEVER.

The number of notifications 126, and the number of deaths 4, are both less than they have been in any previous year since the Borough was formed.

With the exception of 15 cases, all the rest, 111 in number, were in children between one and 15 years.

The deaths were 3·17 per cent. of the total number of cases, or one in every 31 children affected, died.

Two cases were treated at home—suitable measures being taken to ensure the isolation of the patient; the rest, 124, were treated in hospital.

The particulars with regard to previous years are annexed :—

Scarlet Fever, 1901-1910.

Year.	Actual No. of cases.	No. of Deaths.	Case Mortality. No. of Deaths per 100 cases notified.	No. of cases per 10 000 of Population.	No. of Deaths per 10,000 of Population.
1901 ..	495	19	3·8	48·1	1·8
1902 ..	381	15	3·9	37·9	1·3
1903 ..	283	12	4·2	28·1	1·2
1904 ..	323	17	5·2	32·6	1·7
1905 ..	456	21	4·6	46·4	2·1
1906 ..	422	13	6·1	43·5	2·6
1907 ..	471	16	3·4	48·6	1·7
1908 ..	387	12	3·1	40·3	1·2
1909 ..	231	9	3·89	24·2	·9
1910 ..	126	4	3·17	13·3	·4

Probable Source. In 14 instances the infection was derived from previous cases in the same family, in another 22 there was reason to believe that the disease had been contracted by visiting cases in houses in the vicinity. In 4 persons the disease was probably contracted from schoolfellows while in school or on the way home; two other patients had been infected while sitting or standing by scarlet fever patients awaiting examination in the out-patient departments of large hospitals.

Two patients were probably infected by visiting places of entertainment just previously to their illness.

Five developed the disease while in hospital. These cross infections in hospitals, as for example, when a patient is admitted for diphtheria and later on while convalescent and still an in-patient contracts scarlet fever, are a serious blemish upon the administration of fever hospitals.

All the houses where cases occurred were visited and inspected.

Nuisances that called for remedy were made the subject of notice, and the bedding and clothing were disinfected.

Return Cases.—There were five return cases in 1910. These are the cases which occur in a household when a scarlet fever patient returns home from hospital, or, if home treated, when after convalescence the ban of isolation is removed and he resumes the position in the family he held before he was taken ill.

The original case which returns from hospital is called the "infecting case," the secondary cases which contract the disease from the patient recently discharged are the "return cases." It is found that the infecting cases nearly always have a discharge from the nose, which is generally colourless and may be profuse, or may be so slight as only to be evident on pressing the sides of the nostrils together. The patients may otherwise appear to be perfectly well. This discharge is now, in most instances, considered to be the infecting agent during convalescence from scarlet fever. It may persist for six or seven months or even longer, and during the whole of this time the patient is presumably infectious. It is sometimes very difficult to cure and especially in children with adenoids. In fever hospitals it is usual to detain the scarlet fever patient until the discharge has quite ceased. In some hospitals the further precaution is taken of sending the patients out for exercise in cold and inclement weather to see whether the discharge can be re-established. If under these conditions the discharge recurs then the patient is kept in hospital still longer.

Cases discharged for Home.—In Finsbury every case discharged from the fever hospital is visited soon after return home and carefully examined. The possibility of further infection is explained to the mother, suitable measures suggested, and a leaflet of instruction left with her.

There was one interesting instance which showed the value of this procedure.

A child X was notified as suffering from diphtheria in October, 1909, and removed to a fever hospital the same day. He was discharged cured in January, 1910.

In accordance with the usual practice X was visited at home, and found to have a discharge from the nose. A specimen of this discharge was examined bacteriologically for diphtheria and a negative result obtained. It was considered, therefore, that the child might mix with others. A few days later another child Y in the same house, but of a different family, was notified to have scarlet fever, and was removed to hospital.

For this case of scarlet fever no possible source could be ascertained.

Under the circumstances, as X had a nasal discharge, it was thought just possible that X might have had scarlet fever in hospital and had infected the second child. A letter was, therefore, sent to the medical superintendent of the hospital asking whether the child X, the diphtheria patient, had contracted scarlet fever in hospital. The reply was in the affirmative.

The patient X was now again examined, and still found to have a nasal discharge. The mother was given fresh instructions, and no further case of infection was traced to X.

It is very possible that if the Medical Superintendent had remembered to notify to the Medical Officer of Health the scarlet fever contracted by X in hospital that the case of Y would not have occurred.

The cases examined after their return home from hospital had the following complications: Discharge from nose 16, sore throat 1, discharging ears 2, enlarged neck glands 19, conjunctivitis 2, shortness of breath 2, anæmia 1, general weakness 10.

DIPHTHERIA.

The number of cases notified was 150, of which 24 were subsequently sent home as not suffering from the disease, leaving 126 true cases.

There were 19 deaths, so that 15.1 per cent. of all the cases died of the disease.

The number of cases is less than it was last year, 58 were between 1 and 5 years, 41 were between 5 and 15 years, compared with 62 and 61 in 1909.

The number of deaths this year shows a slight increase, 4 were under 1 year, 14 were between 1 and 5 years.

The cases treated in the fever hospitals of the Metropolitan Asylums Board were 106 with 7 deaths, that is 6.6 per cent.

The cases treated in the general hospitals were 19, with 12 deaths, or 63 per cent. of the whole number.

The percentage of deaths, therefore, of Finsbury cases of diphtheria in 1910 in general hospitals was nearly 10 times as great as the percentage of deaths when the cases were treated in the fever hospitals of the Metropolitan Asylums Board.

Seventeen of the cases were treated in one general hospital with 10 deaths—or 58 per cent. of the whole number.

These figures raise another question.

What is the cause of the difference in results?

Why is diphtheria more fatal when treated in general hospitals than it is when treated in the hospitals of the Metropolitan Asylums Board?

There are probab'ly many reasons for this.

1. Some of the cases taken to general hospitals are cases requiring urgent tracheotomy, and in these the percentage of deaths is high.

2. Nearly all the cases of diphtheria at the present day are taken to fever hospitals, so that the staff of a general hospital are now deprived of those opportunities of gaining experience of the disease which they had in former days.

The number of cases that will thus fall to any one physician or assistant physician in a year is very small—possibly 4 or 5 at most—a quite insufficient number to enable him to have extended or much profitable experience.

3. **Serum treatment.**—The earlier this is undertaken the better the prospect of recovery. The requisite amount to be injected requires much judgment and prolonged acquaintance with the subject. Even in comparatively recent years, in some

fever hospitals, the doses used then are now often admitted to have been too small—the results and effects of the administration of varying doses of antitoxin serum are only to be gauged by careful observation in a large number of cases.

In a general hospital a case of diphtheria may, at first, be for nearly 24 hours under the care of a house surgeon or house physician who may have had little or no personal experience of the serum treatment, and who may not know the amount of serum best fitting for the condition of the patient.

There is ground for the belief that in general hospitals the amount of serum given is too small—so that much valuable time is lost.

It would be better if general hospitals would give up receiving diphtheria cases for treatment. This action would be of advantage to the patient, and by releasing a number of beds would benefit the institutions.

Urgent cases requiring tracheotomy should be dealt with as they occurred, and removed to fever hospitals at the earliest opportunity.

The cases in previous years are given here :—

Diphtheria since 1901.

Year.	No. of Cases.	No. of Deaths.	Case Mortality. No of Deaths per 100 cases notified.	No. of Cases per 10,000 of Population.	No. of Deaths per 10,000 of Population.
1901 ..	289	36	12·5	28·4	3·5
1902 ..	216	37	17·1	21·1	3·6
1903 ..	119	12	10·1	11·8	1·2
1904 ..	123	14	11·4	12·4	1·4
1905 ..	126	11	8·7	12·8	1·1
1906 ..	151	25	16·5	15·5	2·5
1907 ..	127	15	11·8	12·7	1·5
1908 ..	130	16	12·3	13·5	1·6
1909 ..	152	13	8·5	15·9	1·6
1910 ..	126	19	15·1	13·3	2·1

All the cases are investigated, the source, if possible, ascertained, the premises are inspected and notices served for sanitary defects.

The following conditions were discovered in the houses where 126 cases occurred.

Dirty rooms (25), damp rooms (1), verminous room (1), yard dirty (5), staircase and passage dirty (3), area dirty (1), w.c. foul and dirty (9), w.c. leaking (1), w.c. choked (3), w.c. insufficient flush (2), drains defective (6), soil pipe broken (1), foul water cistern (3), cistern cover broken (1), dustbin broken (1), washhouse undrained (1), yard and washhouse paving broken (4), washhouse dirty (7), water-waste preventer defective (4), loose manhole cover (2), leaky roof (2), broken guttering (1), rain-water pipe defective (1), insufficient w.c. accommodation (1), no water supply to upper storeys (2), overcrowding (1).

Source.—In 16 cases the disease had been contracted from previous cases in the same house or near by, in 9 other cases from members of the same family already affected with the disease. In two persons the source was a previous case with which they came into contact at an entertainment. In three instances there was reason to believe that diphtheria was caught from another patient while visiting a general hospital. In 6 cases the disease was contracted after the patients had been admitted as in-patients at a hospital.

School infection was responsible in 4 instances.

It is sometimes very difficult to convince parents, head teachers of schools and their assistants that a patient may have diphtheria and yet appear to be quite well and complain of little or no discomfort. Thus, a boy, 11 years of age, complained of sore throat and visited a general hospital on a Monday. On the Tuesday he again visited the hospital and a swab was taken from his tonsils; he was asked to return to hospital on the next day. On the Wednesday he felt better and returned to school. He went to school on the next two days—Thursday and Friday. On the Friday the hospital authorities found that the culture from the boy's throat showed the presence of diphtheria bacilli, and notified the case as one of diphtheria by telephone. The boy's home was

visited; there was no one in—his mother was out at work and was not expected to return until 8.30 p.m. The neighbours stated that the boy was in school, but did not know which school. The various schools in the neighbourhood were searched, and after an hour and a half the boy was found in his class in school with many other scholars. He was brought to the Public Health Department and examined at once. He was found to have severe diphtheria of the nose and throat and was removed to hospital as soon as possible.

Notice of one case was received from the Commissioner of Police. A child was taken to a medical man, and its condition was diagnosed provisionally as a mild case of croup and whooping cough. The case was conveyed to hospital in a motor cab and died there the same day of diphtheria. The driver was suspicious and reported the matter to the police. The cab was afterwards disinfected.

Cases discharged cured from hospital.—Within a few days after their arrival home from the fever hospitals, all these patients are examined very carefully and a record kept of their condition. A leaflet is given to the parents, its terms explained, and precautionary measures are advised. If the child has a discharge from the nose, or if for any other reason the infection is believed to persist, the mother is advised to take the child to her own doctor, or if poor to bring it to the public health department. The conditions found amongst these convalescent patients after their return home are shown below.

Neck Glands enlarged	11	Difficulty of swallow-	
Nasal Discharge ...	3	ing	2
Nasal Voice (Paralysis		Severe and *persistent	
of Palate)	3	vomiting	1
Sore nostrils	1	Weakness of limbs,	
Sore angles of the		probably slight para-	
mouth	1	lysis following diph-	
Ear Discharge	2	theria	14
Conjunctivitis	8	Shortness of breath ...	3
Anæmia	4	Rashes, possibly due	
Squint	1	to the serum	2

It is quite possible that some of the cases in the above list were discharged from hospital rather a little too soon.

Five cases were examined by the Medical Officer of Health and swabs taken from the throat—in one of these the diphtheria bacillus was still present. In the Metropolitan Asylums Board it is the practice not to discharge patients for home unless two swabs taken at an interval of one week give no evidence of the presence of diphtheria.

Throat swabs are examined bacteriologically free of charge for medical men by the Public Health Department; 69 were submitted in 1910, and in 22 specimens the diphtheria bacillus was found present.

DIPHTHERIA ANTITOXIN (LONDON) ORDER, 1910.

This was considered by the Finsbury Borough Council in September, 1910. It was then decided that the Medical Officer of Health should keep a sufficient supply of Diphtheria Antitoxin Serum for the use of Local Medical Practitioners, to be obtained by them on request at the Public Health Office and that payments be made to medical men for injecting patients with the serum in accordance with the following scale:—2/6 for each case so treated during the day time, 9 a.m. to 9 p.m., and 5s. for each case so treated at night time, 9 p.m. to 9 a.m.

This order only applies to **poor** patients resident in Finsbury.

When the serum is asked for at the Public Health Office the name, age and address of the Finsbury patient are given and the amount of serum injected and the site of the injection are noted on the usual notification certificate, for the information of the hospital authorities.

Five medical men have availed themselves of these facilities. The gratuitous distribution of diphtheria antitoxin serum was adopted in Finsbury many years ago, but until the issue of the present order, no fees were paid for its administration.

INFECTIOUS DISEASE DEATHS AND NOTIFICATIONS.

General Considerations.—The diseases now notifiable under Section 55 of the Public Health (London) Act, 1891, are Smallpox, Cholera, Diphtheria or Membranous Croup, Erysipelas, Scarlet Fever, Typhus, Typhoid, Relapsing, Continued and Puerperal Fevers.

Cerebro Spinal Fever, Glanders, Anthrax and Hydrophobia in man are likewise notifiable in London, under an order of the London County Council, under Sections 55 and 56 of the Public Health (London) Act.

Sections 60-65, 68-70, 72-74 of the same Act, referring to the cleansing and disinfection of premises and materials, and to contact with, or exposure of infected persons and things have been made applicable to Measles.

Cases of Anthrax, or poisoning by mercury, arsenic, lead and phosphorus, must be notified to the Chief Inspector of Factories, Whitehall.

Phthisis is voluntarily notifiable in Finsbury in the case of private patients, and compulsorily notifiable in the case of poor law patients.

Compulsory notifications of poor law patients with Phthisis is provided for under the Public Health (Tuberculosis) Regulations, 1908, of the Local Government Board, which came into force on the 1st January, 1909.

Outbreaks of Glanders and Anthrax are notifiable to the Health Authority by the Inspectors appointed under the Diseases of Animals Act, 1894, in pursuance of the provisions of the Anthrax Order, 1899, and of the Glanders and Farcy Order, 1907, of the Board of Agriculture.

Notifications.—The number of notifications of infectious disease received in 1910 was 455, which is the smallest number yet recorded since the Borough was formed.

These notifications were apportioned thus:—Smallpox none (none), Scarlet Fever 126 (231), Diphtheria 126 (152), Cerebro-Spinal Fever 4 (3), Typhoid Fever 28 (15), Erysipelas 164 (127), and Puerperal Fever 7 (6) cases.

The figures in brackets refer to the year 1909.

The chief diminutions are in the notifications of Scarlet Fever and Diphtheria, the increases in Typhoid Fever and Erysipelas.

The numbers for previous years are appended:—

Notifications of Infectious Disease, 1901-1910.

Year.	Number of Notifications Received	Notifications per 1,000 of the population.	Percentage of Cases removed to Hospital.
1901	1,101	10·8	85·5
1902	1,026	10·1	82·4
1903	566	5·5	78·8
1904	609	6·1	72·5
1905	745	7·5	81·8
1906	764	7·8	76·9
1907	735	7·6	83·4
1908	654	6·5	83·6
1909	534	5·6	74·7
1910	455	4·8	63·5

In the above table " Notifications " of Chicken-Pox are excluded (203 in 1907)

The amount paid in fees this year for notifications was £43 14s. 6d., which is the lowest yet recorded since 1901. The highest was in 1902, when the amount was £175 16s.—this was at the time of the Smallpox epidemic.

Diagnosis.—In 60 cases out of a total number of 340, the patients after admission to a fever hospital were returned home as not suffering at the time of admission from any notifiable infectious disease.

Most of these mistakes—over 60 per cent. of them—were made not by private doctors, but at the large general hospitals.

The errors were chiefly in connection with Scarlet Fever—out of 161 cases removed 35 were returned as not having the disease.

The diagnosis of Typhoid Fever was sustained in hospital in every instance except one.

Twenty-four cases of Diphtheria were returned home as incorrect.

Deaths.—The number of deaths certified as due to infectious diseases, named in the accompanying table, in 1910 was 192. The corresponding death-rate was 2.1 per 1,000 inhabitants.

The number of deaths is the lowest since 1901 with the exception of one year.

The deaths from each disease are here set out.

Deaths from Infectious Disease, 1901-1910.

	Small-Pox.	Scarlet Fever.	Diphtheria and Membranous Croup.	Enteric Fever.	Puerperal Fever.	Measles.	Whooping Cough.	Diarrhœa.	TOTAL.
1901	8	19	36	11	4	49	37	95	259
1902	32	15	37	9	6	83	68	84	334
1903	—	12	12	11	4	69	52	100	260
1904	3	17	14	8	5	60	26	145	278
1905	—	21	11	9	—	31	32	111	215
1906	—	13	25	14	5	115	55	144	371
1907	—	16	15	2	1	43	44	66	187
1908	—	12	16	12	3	38	22	126	229
1909	—	9	13	3	2	86	51	68	232
1910	—	4	19	4	6	73	36	50	192

This table discloses a diminution in the number of deaths from scarlet fever, measles, whooping cough and diarrhœa, but an increased number of deaths from diphtheria and puerperal fever.

ZYMOTIC DEATH RATE.

The seven principal zymotic or epidemic diseases are Smallpox, Measles, Scarlet Fever, Diphtheria, Hooping Cough, Fever (Typhoid and Typhus) and Diarrhœa.

These caused 186 deaths in 1910—equal to a Zymotic death-rate of 1.96 per 1,000.

The corresponding rates for the country generally were :—

England and Wales	0.99
London	1.14
Finsbury	1.96
77 Great Towns	1.23
136 Smaller Towns	0.88
Rural Districts	0.74

This rate is a popular factor for comparing the health standards of various communities, but it is subject to many fallacies and pitfalls.

While it refers to the chief epidemic diseases, it does not necessarily measure their prevalence, but only in a modified degree their virulence.

DISINFECTION.

In Finsbury there are two disinfecting stations—one at 49, Northampton Road, Clerkenwell, and the other at Warwick Place, Whitecross Street, St. Luke. At each station there is a mortuary and a coroner's court.

The mortuary keepers, who reside on the premises, are also chief or foreman disinfectors.

The stations are under the control of the Public Health Department, and are visited frequently each week by the Chief Sanitary Inspector, who exercises general supervision over the work done.

At 49, Northampton Road provision is made for the housing and accommodation of families during the disinfection of their premises after infectious disease, and for the reception of small-pox contacts during the incubation period.

The persons brought to this shelter are cared for by the disinfectors and his wife, who live in the house.

It was used in 1910 by one family from Finsbury (5 persons) and 6 families from Holborn (21 persons). The Holborn Metropolitan Borough is allowed to use this shelter by a resolution of the Finsbury Borough Council passed at their meeting on the 19th July, 1910.

The Borough has two steam disinfectors—a Washington-Lyons high-pressure steam apparatus and a Thresh Current steam machine.

For the disinfection of rooms, formic aldehyde gas, liberated by an Alformant lamp burning 30 tablets per 1,000 cubic feet, is used, or sulphur fumigation, or a spray of chloride of lime dissolved in water and having a strength of 1.2 per cent., whichever is considered appropriate.

During the year 691 separate rooms were disinfected, of which 154 were for measles, 83 after notification of phthisis and 39 after death from phthisis.

In addition, bedding and mattresses were steam disinfected for the following institutions :

The City of London Lying-in Hospital, the Claremont Hall Crèche, St. Barnabas' House, St. Luke's Hospital, St. Mark's Hospital, and St. Mary's Mission Hall.

Altogether 6,027 articles were disinfected in connection with cases of infectious disease and phthisis—these were chiefly mattresses, pillows, bolsters, sheets, blankets, quilts, cushions, curtains, carpets, tablecloths, and clothes.

Besides these, 1,891 articles of wearing apparel were disinfected for a city firm at a price agreed upon, prior to exportation to South Africa.

PROTECTION OF FOOD SUPPLY.

GENERAL CONSIDERATIONS.

Each district inspector is responsible in his own district for the inspection of foods, of restaurants, of restaurant kitchens, of fried-fish shops, of ice-cream shops, and generally of all places used for the preparation of food for human consumption.

These inspections are designed to secure sound food products of good quality and their clean storage, clean conditions of manufacture, of cooking, and of presentation, the provision of clean utensils, satisfactory facilities for cleansing material and utensils, the satisfactory storage of waste material and by-products and their periodic removal, proper sanitary accommodation for the workers, the prevention of nuisances, and the prevention of adulteration.

The street markets are kept under close supervision, and are continuously and specially inspected throughout the year on every Saturday evening and Sunday morning. The latter duty is done by every inspector in turn.

Each inspector takes samples under the Sale of Food and Drugs Acts in his district. These purchases are nearly always made by deputy.

MEAT AND FOOD INSPECTION.

The Borough Council have appointed Mr. Billing as a special meat inspector to inspect systematically butchers' shops, food-stuffs, shops for food preparation, and cold stores throughout the whole district.

In addition he pays special attention to the meat deliveries in the wholesale market in Charterhouse Street, St. John's Street, and Cow Cross Street, all adjacent to Smithfield Market.

Each district inspector holds a certificate of competency in meat inspection.

The attached table is a summary of the diseased and unsound meat and offal confiscated during the year ending 31st December, 1910.

The reindeer tongues referred to, came from Lapland—salted and dried. An attempt was made to create a market for them, but was unsuccessful.

The wallabies were introduced with a like purpose. A few dinners were given in which wallaby was the chief dish in an endeavour to foster a demand. The scheme was only fairly successful; wallaby is said to be a toothsome dish, but an acquired taste.

The turkeys, 1431 in number, were of Italian origin, which became offensive and unsound in transit at Christmas time when the weather, moist and warm, favoured decomposition.

All the unsound meat is removed under agreement by Messrs. C. & H. Webb, Bone and Tallow Melters, 155, Bow Road, London, E. Messrs. Webb have their factory in Bow Common Lane, and pay the Borough Council one penny per stone of eight pounds for all the meat removed.

Diseased and Unsound Meat Confiscated in 1910.

DISEASED.

Sides of Beef	26	Sheeps' Livers	22,831
Quarters of Beef	39	" Lungs.. ..	1,500
Pieces of Beef	2,902	" Plucks	136
Carcases of Mutton	596	Beef Livers	1,397
" Pork	1	" Lungs	950
" Veal	6	" Heads	42
" Rabbits	5	" Tongues	44
" Stirks	9	" Hearts	1
Pieces of Veal	4	Pigs' Plucks	26
Total Weight		Tons. Cwts. Qrs. Lbs.	
		83 6 2 5	

DECOMPOSED.

Quarters of Beef	14	Sheeps' Heads.. ..	710
Pieces of Beef.. ..	346	" Plucks	479
Barrels of Beef	2	" Livers.. ..	1,278
Case of Beef	1	" Hearts	56
Carcases of Mutton	89	" Lungs.. ..	78
Pieces of Mutton	147	" Kidneys	246
Carcases of Lamb	93	Calves' Livers.. ..	76
" Veal	6	" Plucks	58
Pieces of Veal	11	Pigs' Plucks	169
" Pork	16	" Livers	108
Sides of Bacon	8	" Maws	120
Pieces of Bacon	133	Barrel of Pork Trimmings	1
Beef Livers	409	" Pigs' Heads	9
" Lungs	2,181	" Pigs' Plucks	6
" Hearts	31	" " Kidneys	17
" Heads	93	" " Chitterlings.. ..	10
" Tongues	945	Reindeer Tongues	1,020
" Tails	181	Boxes of Wet Fish	11
" Spleens	685	" Dry Fish	10
" Tripes	83	Bags of Mussels	2
Cases of Beef Kidneys	13	Pairs of Kippers	26
" Tails	3	Bloaters	8
" Tongues	2	Haddocks	6
" Livers	4	Pheasants	60
Cases of Veal	13	Partridges	106
" Tripe.. ..	83	Ptarmigan	3
" Pigs' Tongues	2	Plover	10
" Sheeps' Fry.. ..	4	Guinea Fowl	10
" " Plucks	293	Ducks	32
" Pork Pieces.. ..	1	Hamper of Mixed Poultry	1
" Rabbits	116	Baskets of Tomatoes	23
Wallabies	660	Barrels of Apples	6
Rabbits.. ..	229	Baskets of Strawberries	26
Turkeys	1,531	" Plums	6
Cases of Eggs	16	" Raspberries	16

Total Weight (Decomposed)	Tons.	Cwts.	Qrs.	Lbs.
Total Weight (Diseased) ..	56	7	1	5
	83	6	2	5
Grand Total Weight ..	139	13	3	10

Dutch Calves.—Five of these, bearing the Dutch official label of satisfactory condition, was seized in Finsbury in 1910 as unfit for human consumption.

They presented the signs of emaciation: the flesh was dropsical and in three cases the lungs had been removed.

One calf weighed about two-thirds of its normal weight; its carcase was quite devoid of fat, was flabby and wet, and there were signs of inflammation of the abdominal peritoneum and the peritoneal covering of the liver.

The facts were reported to Dr. Van Ryn, the Netherlands Agricultural Commissioner, who very courteously enquired into the matter. At the instance of the Dutch Government, the medical officers of the City and Port of London, of Finsbury and of the larger ports and cities, went over to Holland to see for themselves the careful methods and systematic manner in which animals for export are slaughtered, and inspected in Holland prior to killing and after killing. Since this time, all the Dutch meat received in Finsbury has been of fair quality, sound and perfectly wholesome.

Danish Cattle *via* Antwerp and Harwich.—Eight sides of beef, very markedly Tuberculous, were seized in Finsbury in 1910. They all bore the official label of the Belgian administration as having been satisfactorily examined at Antwerp. They were said to be a part of a much larger consignment of old Danish cattle which, while still alive, had been tested with tuberculin in German ports and had been refused admission to Germany. They, therefore, were consigned *via* Antwerp and Harwich to various English districts. A percentage examination—10 per cent.—was made at Harwich, and some of the tuberculous carcases found and seized. The rest escaped detection and came into the Central Meat Market, Finsbury, and other districts where they were dealt with.

It is obvious that the system of a percentage examination in this connection is a source of great weakness in meat inspection at the port of entry. Still, if all the carcases at the port of entry were examined, the traffic at the port would meantime have to be discontinued.

In the present instance, the animals, having been rejected in Germany, should thereupon have been earmarked, and it should not have been possible thereafter to put them upon the market. However, these same tuberculous animals, thrown out by the German authorities, were examined, passed and officially labelled at Antwerp, got past the English port of entry, and some at all events were seized in various English districts.

It is not meant that there was any neglect at the English ports. The staff and facilities are both inadequate for dealing effectively with all the meat that arrives. The ten per cent. examination is a concession to the exigencies of commerce; any other method is under present conditions impracticable.

Australian Beef.—Between September and the end of the year, 2,828 hindquarters and 3,160 forequarters of Queensland Beef were delivered in Finsbury and examined here for worm nests. These worm nests ranged in size from a marble to a walnut and were situated in the brisket, in the flank, and near the stifle or knee joint. A few were found in the cod fat.

The number of quarters affected varied in the different consignments—in some 80 per cent. were worm stricken.

These worm nests occasionally were placed superficially, but oftener were deep down in the fat between the muscles—sometimes at a depth of $1\frac{1}{2}$ inch to 2 inches from the surface.

This fact led to many of these worm nests at first escaping detection, so that there is little doubt many of them in the early period passed into circulation and were presumably eaten.

Many quarters thus examined and passed in other districts were found in Finsbury still to have worm nests, sometimes in abundance in the deeper layers of the meat.

Many of the affected flanks and briskets had ulcers, surrounded by eczematous areas—corresponding to the usual lick spots or rub spots of the animal. These were probably the sites of the referred irritation due to the presence of the worm, and may also possibly have been the places through which the parasite entered the affected cattle.

As a result of many investigations in Finsbury and after negotiation with the owners, it was eventually decided that none of the quarters should pass into circulation unless the flanks and briskets had been first removed. These removed parts were retained by the owners and sold for soap boiling. Near the stifle joint the parasites were usually superficial and were cut out—the hind quarters were then passed as fit for food.

The examination of this frozen meat took up a considerable amount of the meat inspector's time. A request was made that the Borough should, for the purposes of examination, be construed as part of the Port Sanitary Authority, and it was suggested that an order of the Local Government Board so constituting it should be applied for.

This was considered by the Public Health Committee.

It was felt, however, that as this work was cast by statute upon the Port Sanitary Authority, and as in actual practice it was found to interfere with the effective inspection of meat in the rest of the Borough, that no order should be applied for.

At the end of the year it was arranged that the flanks and briskets should be cut off in Australia and retained there.

These worm nests in appearance might well be mistaken for tuberculous glands, and there is reason to believe that they were so mistaken. They differ, of course, not only in microscopic appearance, but also in that they occur in places where these glands are absent. Still, this resemblance might well induce dealers in diseased meat to believe that if worm nests could be cut out and the rest of the meat passed into circulation that the same highly dangerous course might be adopted with meat containing "kernels" or tuberculous glands.

It is a great pity that this worm-stricken Australian meat was ever placed upon the market here. There is little doubt that the reputation of Australian products has suffered somewhat in consequence.

UNSOUND FOOD PROSECUTIONS—1910.

Date of Trial.	Name and Address.	Article.	Where seized and Name of Inspector.	Penalty and Costs Inflicted.
1910. February 17th.	Arthur Cart, 40, Turner Road, Leicester.	Four sides of stirk veal weighing 526 lbs. This veal was diseased with generalized tuberculosis. The pleura and peritoneum had been partly stripped from each side, and fat had been smeared over the stripped parts, thus concealing, to a large extent, the evidence of stripping. There were many tubercles on the marginal portions of the pleura and peritoneum. The whole of the glands were enlarged, and some were also tuberculous. There was a large abscess, about the size of a cocoanut on one forequarter.	Nos. 101 & 103, Charterhouse Street. London, E.C. Inspector Billing.	The first hearing of this case was on November 16th, 1909. It was adjourned from time to time for the convenience of the defendant and his counsel (George Elliot, K.C.) The prosecution had considerable trouble in bringing this case home to the defendant. The meat was consigned to London in the name of T. Jennings, but no such person could be found. The defendant sought to prove that T. Jennings was really a man named Chas. Morris, who it was alleged could not be found. Defendant was ultimately convicted, and fined £100 and £25 costs.
June 7th.	George Parkinson, 88, City Road, London, E.C.	Twenty-six pairs of kippers, eight bloaters, six haddocks, and twelve beef-steaks. The whole of the kippers, bloaters and haddocks, were soft, slimy, dull in colour, and smelled offensively. The steaks were dark in color, and slimy on one side, and the whole of them smelled offensively.	No. 88, City Road, London, E.C. Inspector Billing.	Fined £5 and £4 4s. od. costs.
September 20th.	Joseph Mansfield, 34, Hockerill Street, Bishops Stortford, Herts.	Two top pieces and rumps of beef, weighing 133 lbs. This beef was affected with generalized tuberculosis. It was very emaciated. The small portions of the flanks had been bared of peritonium. The iliac and supra-mammary glands were tuberculous. It was ascertained (and admitted by defendant) that the other portions of this carcase had been boned out, and sent to a wholesale sausage manufacturer in the East End of London. It was also found that the meat was received and converted into sausages, and presumably passed into circulation for human food.	No. 111, Charterhouse Street, London, E.C. Inspector Billing	Fined £15 and £5 5s. od. costs, or two months' imprisonment, Defendant went to prison in default of paying the fine.

The following table gives the statistics for previous years :—

**MEAT PROSECUTIONS AND MEAT CONFISCATED
1901-1910.**

Year.	No. of Cases of Meat Prosecution.	No. of Convictions.	Cases Dismissed.	Weight of Meat Confiscated (in tons).
1901	24	24	—	30
1902	16	16	—	75
1903	19	18	1	101
1904	15	15	—	76
1905	9	9	—	84
1906	5	3	—	121
1907	2	2	—	100
1908	3	3	—	101
1909	3	3	—	107
1910	3	3	—	140

Certification of Meat Food Products.—The Medical Officer of Health, with the consent of the Council, was designated the certifying officer by the Local Government Board, for certification of these products for export to the Argentine Confederation to the United States of America and to the Phillipine Islands.

A certain number of Certificates were granted in 1910 to Messrs. Bovril, Ltd., 152 to 166, Old Street, Finsbury, and to Messrs. Lipton, City Road, E.C.

Faggots.—A complaint was received of illness, said to be due to eating faggots. The shop was inspected as soon as possible afterwards. The faggots were made of sound material, but were imperfectly cooked, so that the central parts were almost raw. The proprietor was advised and cautioned as to further sales.

Fish.—After eating some sardines 3 or 4 members of a family were taken violently ill with vomiting and diarrhœa. On enquiry, it transpired that after opening, the tins were kept for two days

close to the kitchen range and exposed to its heat. The scales of the fish by this means became quite hard and the oil a little rancid. The fish were consumed with the scales still attached. The contents of the tin were carefully examined. The shop where the sardines were bought was visited and another tin of the same brand bought from the same consignment. This was eaten by the Medical Officer and the Meat Inspector and found to be sound and good. The illness in the case under review was probably due to the consumption of the slightly rancid oil and the tough fish scales.

MISCELLANEOUS FOOD PREMISES AND STREET MARKETS.

Street Markets.—These are three in number and situated in Chapel Street, Pentonville; Exmouth Street, Clerkenwell; and Whitecross Street, St. Luke's.

The barrows, shops and food stalls in these streets are regularly inspected on weekdays by the inspectors in whose districts they lie, and on Saturday nights and Sunday mornings by each inspector in turn throughout the whole year.

Cold Air Stores.—There are four Cold Air stores in Finsbury, whose addresses and proprietors are given below :—

Port of London Authority, 19-33, St. John's Square, E.C.
Premier Meat Company, 10-14, St. John's Square, E.C.
Messrs. Eastmans, Ltd., 91, Charterhouse Street, E.C.
Mr. John Palmer, 111 & 113, Charterhouse Street, E.C.

The first two deal exclusively with frozen meat, the third and fourth with frozen and chilled or refrigerated meats.

The meats are usually beef, mutton and lamb, but occasionally veal, pork, rabbits, poultry, edible offals, and other food stuffs are received for storage.

These stores are inspected almost daily.

Faggot Shops.—There are 12 of these in the Borough, 6 in Clerkenwell and 6 in St. Luke's.

In the manufacture of faggots the materials used are the lungs, livers, spleens, various meat oddments, seasoning and bread. The liquor used is made by boiling bones in water in a copper. This bone boiling is strictly an offensive business—but in these shops is so casual and insignificant as hardly to call for special action. These shops are subject to periodic inspection.

Bacon Curing Establishments.—These are 11 in number, of which 2 are in St. Luke's, the rest in St. Sepulchre. On one occasion, in 1910, one of these was found in a very dirty condition—the walls being grimy and filthy. The attention of the owner was called to the matter and the premises cleaned up.

Fish Smoking Shops.—There are many of these in Finsbury. The appliances usually consist of wooden erections somewhat like cupboards, in which the fish are suspended and exposed to the influence of smoke derived from the slow combustion of oak dust or mahogany dust. This smoke issues into the open air at the top and is extremely acrid and offensive. Sometimes the business is conducted in premises enclosed and surrounded by other houses and causes much nuisance. In one instance this was remedied by increasing the height of the chimney and diverting the smoke which had hitherto passed almost solely over and into adjoining premises, in another direction.

Further powers are needed to deal effectively with this matter.

SLAUGHTER HOUSES.

All slaughter houses in London are licensed for one year only by the London County Council at their annual meeting held on the last Monday in October.

A fee of five shillings is paid annually in respect of each license. Notices of objection have to be lodged at least seven days before the meeting.

In Finsbury there are 3 slaughter houses; the owners' names and addresses are as follows :—

Mr. A. E. Spink, 20, Amwell Street.
Mr. Thos. Webb, 191, Goswell Road,
Mr. J. A. Mobbs, 14, Penton Street,

The Goswell Road slaughter house is licensed for the slaughter of small animals only.

There are no knackers' yards in the Borough.

The slaughter houses were inspected in 1910, on 63 occasions. No defects were ascertained and consequently no notices were served.

MILK SUPPLY.

There are in Finsbury only three sets of premises licensed for cowkeeping.

The owners' names and the addresses of the premises are given below :—

No.	Name of Occupier.	Situation of Premises.	Actual No. of Cows.	Licensed for.
	Mrs. Rachel Hughes ..	39a, Baldwin Street ..	15	17
2	Messrs. John James & Son	40, Rawstorne Street ..	15	15
3	Mr. John James	230, St. John Street ..	28	30

All cowsheds in London are licensed annually for one year only by the London County Council at a special session held in October of each year.

The premises were inspected by the district inspectors on 17 occasions. They are also periodically inspected by the London County Council staff and their veterinary inspector. No notices were served in 1910.

DAIRIES AND MILKSHOPS.

The number of persons registered during the year as purveyors of milk was 52, of which 11 were new registrations. During the same period 43 names were removed from the register for various

reasons. The total number left on the register was 263. Of these 223 are milkshops, as distinguished from dairies, and sell milk at a farthing'sworth or a halfpennyworth at a time, in this way disposing of 3 or 4 quarts per day.

These milkshops, which are usually also small general or grocery shops, were inspected on 224 occasions and 47 notices served for various sanitary defects.

The conditions under which milk is sold in these small shops, stuffy, overcrowded, dusty and slatternly, is not fully satisfactory.

The stock may often include articles like dripping, meat, fish, pickles, vinegar, vegetables, oil, paraffin, matches, candles, boot blacking, coal, coke, soap, firewood or bathbrick, which may be so placed as to possibly contaminate the milk.

The proprietor is sometimes unclean in person, the utensils dilapidated and difficult to keep clean, and the milk is stored under improper conditions.

This state of affairs is discovered at revisits after registration. Did they occur at the first visit, registration would be refused.

The shops sell milk for two reasons : on the one hand because it is usual for buyers of general grocery to wish to purchase it with their tea, coffee, sugar or bread, and on the other hand because the proprietors of these small shops are harassed by small importunate middlemen to help them to dispose of their surplus milk.

The statutory and other powers which deal with milk shops are derived from The Dairies, Cowsheds and Milkshops Order, Section 6, and the London County Council (General Powers) Act, 1908, Sections 5 and 8.

In practice in Finsbury it is usual before registration to insist that the premises shall be suitable, that the conditions of trading shall be such as to render the milk not liable to contamination,

that no paraffin shall be sold or stored in the shop itself, that the milk shall be kept in closed vessels or the milk pans kept continually covered, and that no bedroom shall communicate directly with the milkshop. With regard to the paraffin, in the case of those milkshops which were already on the register when the London County Council (General Powers) Act, 1908, came into force, the sale of paraffin in the milkshops has never been inhibited. It would be better to have one regulation for all milk shops and prohibit absolutely the sale of paraffin in all where it was sold over the shop counter or stored in the milkshop.

Milk Samples and Analyses.—The total number of milk samples taken was 352, of which 38, or 10·8 per cent. were found to be adulterated on the standard adopted by the Board of Agriculture—that is not less than 8·5 per cent. of non-fatty solids and not less than 3 per cent. of fat. The percentage of adulterated samples has increased slightly in recent years and is in all probability associated with the increased prevalence of toning the milk adopted by large distributing companies or quasi-trusts. This toning is conducted by adding skimmed milk, condensed milk and water, or water to the milk until its constituents approximate to the standards quoted above. This “toning” process is also known as “standardising” the milk, and is one of the drawbacks attaching to the fixing of a definite standard for milk constituents.

All the milk dealers in the Borough are sampled from time to time—no exception is made.

Special samples, 100 in number, are taken in the evening, or on Sundays at irregular and unusual hours.

The attached table gives the statistics for the past 12 years.

MILK SAMPLES, 1910.

	No. of Samples Analysed.	No. of Samples Adulterated.	Percentage of Adulterated Samples.	Added Water.					Percentage of Watered Milks in Samples Analysed.	Removal of Fat.					Percentage of Milks with fat removed on Samples Analysed.
				Under 5%	5% or over.	10% or over.	15% or over.	20% or over.		Under 5%	5% or over.	10% or over.	15% or over.	20% or over.	
1899	205	55	26.8	9	16	9	4	6	21.5	—	2	2	6	1	5.3
1900	228	36	15.8	5	12	6	4	2	12.8	—	—	4	1	2	3.0
1901	251	56	22.3	17	13	2	3	2	14.7	2	7	4	3	3	7.6
1902	269	53	19.7	15	15	3	2	3	14.2	2	6	3	2	2	5.5
1903	348	58	16.7	19	20	6	1	1	13.5	3	5	3	—	—	3.2
1904	346	48*	13.9	14	4	2	1	1	6.0	2	8	6	2	2	5.5
1905	349	38*	10.9	16	1	1	—	1	5.4	7	8	1	1	1	5.1
1906	377	51*	13.5	10	11	1	2	—	6.3	9	8	1	—	1	5.0
1907	329	38*	11.5	7	4	4	—	—	4.5	5	9	4	—	2	6.0
1908	365	32	8.7	11	2	1	1	1	3.6	7	5	2	1	1	4.3
1909	365	33	9.0	6	2	2	—	—	2.7	7	8	1	2	3	5.7
1910	362	38	10.8	5	3	4	1	—	3.7	2	16	5	1	1	7.1

*These figures include samples of milk which were adulterated with preservatives.

During the year 21 prosecutions were instituted in connection with the adulteration of milk. The details are displayed on a subsequent page. The subjoined table gives the statistics since 1901.

MILK PROSECUTIONS, 1901-1910.

Year.	No. of Convictions.	Fines amounting to.	Costs amounting to.
1901	32	£44 17 6	£17 12 6
1902	23	£33 5 9	£33 7 0
1903	26	£68 0 0	£22 8 0
1904	20	£40 0 0	£16 4 0
1905	5	£4 0 0	£2 13 0
1906	15	£29 10 0	£10 15 0
1907	14	£42 1 0	£22 13 0
1908	12	£22 10 0	£8 5 0
1909	9	£21 15 1	£5 12 6
1910	10	£32 0 0	£8 15 0
Totals for the 10 years ..	166	£337 19 4	£148 5 0

Total for Fines and Costs = £486 4s. 4d.

The following table, taken from the Annual Report of the Local Government Board for 1909-1910, compares the milk vigilance of Finsbury with that of the other Metropolitan Boroughs.

**MILK ANALYSIS IN THE METROPOLITAN BOROUGHES.
1909.**

Metropolitan Boroughs.	No. of Milks Examined.	No. found to be Adulterated.	Percentage of Adulteration.
Shoreditch	298	49	16·5
St. Pancras	401	55	13·7
Stepney	898	118	13·1
Deptford	219	27	12·3
Westminster(City)	1013	116	11·4
Holborn	221	23	10·4
Greenwich	182	18	9·9
Poplar	171	17	9·9
Hackney	502	48	9·5
Stoke Newington	74	7	9·5
Battersea	677	64	9·4
Finsbury	370	33	8·9
Lambeth	741	64	8·6
Paddington	313	27	8·6
Kensington	266	22	8·3
Hammersmith	238	19	7·9
Fulham	432	34	7·8
Bethnal Green	429	33	7·7
Wandsworth	545	40	7·5
Bermondsey	779	54	6·9
Islington	613	42	6·8
Camberwell	476	31	6·5
Chelsea	176	10	5·7
St. Marylebone	417	23	5·5
Southwark	967	52	5·4
Lewisham	244	13	5·3
London (City)	532	25	4·7
Woolwich	357	13	3·3
Hampstead	340	10	2·9
<i>Whole of London</i>	12,891	1,087	8·4

It will be noticed that with regard to the percentage of adulteration estimated on the whole number of milk samples in each borough, Finsbury is twelfth on the list.

Warranty Defence.—In London, this is chiefly used in connection with milk cases. In 1910, the warranty was put in as

a defence on five occasions. But only in one instance were the circumstances such as to justify the presumption that a prosecution would be successful.

A retailer may produce a warranty from a small middleman, who himself produces a warranty from another small wholesale dealer and so on until the chain of warranties becomes involved and intricate. And this is specially the case if the milk is derived from a large distributing agency having warranties from each one of its collectors.

If the milk is derived from a farm and, on each occasion of transfer, passes unmixed through the hands of each intermediary then in such a case a prosecution may be successfully launched against the "false warrantor." This assumes that the farmer keeps accurate systematic dated records of milking, and of the daily movements of the churns, and is able and willing to give the department the fullest information.

ICE CREAM SHOPS.

These are all registered and periodically inspected. Six were added to the register and six removed in 1910, leaving 76 on the register. They were inspected on 76 occasions and 17 notices for sanitary and other defects served. There were no prosecutions.

The conditions of manufacture often leave much to be desired.

Restaurants.—There are 246 restaurants in the borough—these are inspected regularly. The number of notices served was 125, the number of inspections 246. These premises are not included in the sum total of workplaces given on another page.

Wholesale Dealers in Butter and Margarine.—Two wholesale butter merchants transferred their trades to new dealers,

who were registered. At the end of 1910 there were seven wholesale dealers in butter registered. The names of three wholesale dealers in margarine were placed on the register which now contains 23.

Ninety-two samples of butter were taken during the year and 6 found to be adulterated : 17 samples of margarine were obtained, all genuine.

Sale of Food and Drugs Acts.—In Finsbury, 500 food samples are taken for analysis each year, and 100 extra samples of milk at irregular and unusual times.

A rota is arranged at the beginning of the year—but in addition each inspector may take samples at his own discretion. All shops are visited—none are omitted. In 1910, the samples taken were 600, of which 59 or 9.83 were adulterated. There were 31 prosecutions and £87 11s. 0d. was recovered in fines and costs.

The tables given below show the number and nature of the samples collected, and the number adulterated in each case.

Substance.	Samples taken.	Adulterated.	Substance.	Samples taken.	Adulterated.
Milk	352	38	Jam	6	6
Butter	92	6	Cream	1	0
Margarine	17	0	Ground Ginger ..	9	0
Cheese	3	0	Ground Rice ..	1	0
Mustard	15	0	Salad Oil	1	0
Pepper	19	1	Camphorated Oil ..	1	0
Malt Vinegar ..	1	1	Ale	6	0
Cocoa	20	0	Porter	6	0
Chocolate Powder ..	1	0	Stout	6	0
Coffee	19	1	Rum	1	1
Coffee Mixture ..	2	0			
Tapioca	1	0	Total	600	59
Lard	20	5			

The statistics for previous years are subjoined :—

Year.	Total Examined.	Genuine.	Adulterated.	Percentage of adulterated samples.	Percentage of adulterated samples for the whole of London.
1901	501	413	88	17.56	11.4
1902	556	475	81	14.56	11.9
1903	610	524	86	14.10	10.8
1904	610	537	73	11.96	10.2
1905	620	547	73	11.77	10.2
1906	602	527	75	12.42	12.1
1907	603	551	52	8.62	10.0
1908	601	547	54	8.94	9.9
1909	600	553	47	7.83	7.8
1910	600	541	59	9.83	—

HOUSING.

Housing Acts.—The proprietor of some of the houses in Bastwick Street wrote a letter in June, 1910, to the President of the Local Government Board suggesting that Bastwick Street and its houses might well be considered to be suitable premises for action under the Housing and Town Planning Acts.

A copy of the letter was sent to the Borough Council asking for the observations of the Council thereon. Every house in Bastwick Street, therefore, was very carefully inspected and a report on the conditions found presented to the Public Health Committee, who subsequently interviewed the owner.

At the end of 1910 negotiations are still proceeding. A full account will be given in next year's annual report.

Registered Houses Let in Lodgings, and Tenement Houses.—Houses occupied by two or more families are placed on the register if from their environment, from the nature and age of the property and the number of sanitary notices attaching to it, the character of the occupiers, the difficulty of fixing the responsibility for defects disclosed at frequent inspections, or for any other reason they are considered to be such as to call for special regulation and supervision. The advantages of registration are as follows :—

It ensures a thorough cleansing of the whole house at least once a year. Registration enables the local authority to stipulate for proper accommodation for the separation of the sexes. The clauses relating to overcrowding place this question on a fixed basis, define it accurately and render it an easy matter to take proceedings for its abatement. Registration, therefore, simplifies procedure and avoids technical and legal difficulties in cases of prosecution for overcrowding under the public health acts.

Registration is said to save many routine inspections during the year, but to attract a poorer class of tenant. It may, however, be contended, that it is the presence of the poorer class tenant in the first instance that rendered registration necessary. The cleanliness and sanitary condition of these registered and tenement houses depends to a large degree upon the superintendent of the "buildings" or the agent. A young, active superintendent who visits each tenement frequently reduces the work of inspection by the public health to a minimum.

During 1910, no fresh houses were placed on the register; fourteen were removed, leaving 1,209 still on the books. For purposes of cleansing, 957 intimation notices and 352 statutory notices were served; for overcrowding, 130 notices. The number of visits paid was 10,074.

There was no prosecution in the case of a registered house.

There was one prosecution for failing to supply sufficient and suitable water supply to the upper storeys of a tenement house. The defendant was fined £5 and costs.

Common Lodging Houses.—The common lodging houses in the Borough are given in the following table:—

Address.	Registered Owner.	Registered Number of Occupants.	Average Attendance.
Pentonville Road, 19-23	Mrs. Shuttleworth ..	93	55
White Lion Street, 57 ..	Mr. Shuttleworth ..	98	70
Clerkenwell Green, 35 ..	Mr. J. H. Claytor ..	73	34
St. John's Lane, 34 ..	Mrs. Holland	48	25
Old Street, 97	Mr. W. H. Hatch ..	80	62
Banner Street, 6 ..	Mr. C. Fitzwm. Campbell	140	105
	Totals	532	351

They are administered by the London County Council. With the approval of the Public Health Committee, written objection was made to the renewal of two of the above licences, on the ground that some of the rooms were very dark, badly ventilated, or of low height.

In one house the supply of towels was considered to be insufficient, and the footbath placed in a very difficult and inconvenient situation.

In two of the above lodging houses the supply of kitchen utensils was quite inadequate; thus in one, where the average attendance is over 60, at the official inspection all the cups and plates which were produced or could be found after searching were 4 cups or mugs and 12 plates.

A complaint was received in respect of another establishment that there was often a free fight on Sunday morning for the possession of the cups, saucers, plates and teapots. The London County Council bye-laws do not contain clauses dealing with the provision of cooking and eating utensils. Their acquisition is certainly desirable.

Systematic House to House Inspection.—In Finsbury this work is done upon standardised methods.

The inspectors take the houses street by street, and record in each case upon sheets devised for the purpose, the date of inspection, the address of the premises, the name and address of the owner or agent, the number of families occupying, the total number of rooms, the rooms occupied, empty, and overcrowded, the sanitary defects for notice and amendment, and the action taken.

These sheets containing this information are laid upon the table at each meeting of the Public Health Committee and bound at the end of the year.

In many offices too much time is spent by the staff in locating and amending defects of drainage, in standing by the trench and watching the actual operation of repairing and reconstructing drains.

In districts with well-considered building and drainage bye-laws, this drainage work should by now have become so regulated and standardised that it might well be relegated to second place.

The urgent and insistent sources of discomfort and ill-health are centred no less in the home, no less in the living and sleeping rooms than in defects of the drainage system.

It is considered that the systematic inspection of 10 houses per week is a desirable number for each inspector. This would enable 2,000 houses to be done every year. Adopting this estimate all the houses in the Borough will be inspected in the course of six years.

Systematic house to house inspection makes some demand upon the resource and initiative of the staff, and is a sound gauge of the sanitary alertness of the officers, and of the energetic administrative activity of the department.

The readiness with which tenement houses are presented for registration is also another excellent criterion of the same kind.

In 1910, 1,355 houses were inspected as a result of systematic visitation. The numbers for preceding years were: 1901, 1,746; 1902, 1,501; 1903, 1,447; 1904, 1,548; 1905, 2,250; 1906, 1,341; 1907, 806; 1908, 534; 1909, 798.

SYSTEMATIC HOUSE TO HOUSE INSPECTION, 1910.

Street or Buildings.	No. of houses inspected.	No. of houses in which defects were found.	Percentage of houses with defects to houses inspected.	Families occupying.	Number of rooms.			
					Total.	Occupied.	Empty.	Overcrowded.
Albert Street	9	3	33·3	35	69	69	—	1
Albion Place	14	11	78·5	37	95	85	10	1
Ann Street	7	—	0·0	21	40	34	6	1
Aylesbury Street	3	1	33·3	11	20	20	—	—
Baldwin Street	3	3	100·0	11	18	18	—	2
Baltic Street	3	3	100·0	11	18	16	2	—
Banner Street	13	9	69·2	24	67	63	4	—
Bastwick Street	50	25	50·0	174	342	306	36	—
Beckford Square	14	12	82·7	44	56	46	10	2
Benjamin Street	2	—	0·0	7	11	9	2	—
Berkley Court	13	9	69·2	39	79	68	11	1
Central Street	13	7	53·8	33	73	73	—	—
City Mansions, Exmouth Street	6	6	100·0	5	24	20	4	—
Clerkenwell Close	3	3	100·0	7	25	15	10	—
Coldbath Square	2	1	50·0	14	18	17	1	1
Coleman's Buildings	5	3	60·0	5	10	10	—	—
Dingley Road	20	15	75·0	61	127	108	19	2
Domingo Street	2	1	50·0	4	13	10	3	—
Donegal Street	52	38	73·2	165	345	313	32	14
Douglas Place	9	2	22·2	32	54	54	—	—
Eagle Dwellings	4	2	50·0	4	9	9	—	—
Easton Place	10	—	00·0	22	29	28	1	1
Europa Place	7	2	28·6	22	51	51	—	—
Farringdon Road	1	1	100·0	5	14	10	4	—
Featherstone Street	4	2	50·0	16	43	37	6	—
Fletcher's Row	14	7	50·0	32	67	67	—	—
Francis Court	8	7	87·5	27	41	40	1	1
Galway Street	14	14	100·0	51	93	93	—	—
Gee Street	50	24	48·0	186	343	336	7	—
Godson Street	13	7	53·8	47	110	98	12	3
Goswell Road	36	25	72·2	72	226	214	12	—
Goswell Terrace	28	19	67·8	79	195	185	10	—
Great Bath Street	27	17	62·9	94	185	176	9	1
Hat and Mitre Court	13	6	46·1	13	29	29	—	—
Hatfield Street	19	19	100·0	86	114	111	3	6
Hayward's Place	12	10	83·3	16	46	44	2	—
Henry Street Buildings	24	7	29·1	25	72	70	2	1
Hermes Street	4	1	25·0	10	30	19	11	1
James Gardens	15	14	93·3	61	97	79	18	12
Lamb's Buildings	2	2	100·0	4	13	9	4	—
Leicester Place	2	2	100·0	16	22	21	1	—
Lever Street	52	35	67·3	110	248	246	2	—
Little Northampton Street	27	8	29·6	38	108	105	3	1
Little Sutton Street	5	4	80·0	17	30	30	—	—
Little Sutton Street Buildings	37	19	51·3	37	68	68	—	4
Lower Charles Street	13	6	46·1	40	91	89	2	—
Ludlow Street	13	12	92·3	20	35	35	—	—
Mallow Street	4	3	75·0	7	22	22	—	2
Malta Street	19	11	57·8	55	131	128	3	—
Memel Street	6	6	100·0	19	36	31	5	—
Carried forward	726	444	—	1,971	4,102	3,834	268	58

Street or Buildings.	No. of houses inspected.	No. of houses in which defects were found.	Percentage of houses with defects to houses inspected.	Families occupying.	Number of rooms.			
					Total.	Occupied.	Empty.	Over-crowded.
Brought forward ..	726	444	—	1,971	4,102	3,834	268	58
Moreland Street	19	17	90.0	37	105	103	2	—
Murton Street	14	4	28.6	27	78	69	9	—
Newcastle Row	1	1	100.0	4	7	7	—	—
Noble Street	36	33	90.5	123	214	193	21	1
Norman's Buildings ..	23	11	48.0	82	148	148	—	—
Northampton Road ..	56	17	36.1	195	406	379	27	2
Norway Street	4	2	50.0	11	25	20	5	2
Old Street	1	1	100.0	1	6	6	—	—
Peabody Buildings ..	54	18	33.3	54	113	113	—	2
Peerless Street	14	14	100.0	46	83	79	4	3
Penton Street	1	—	0.0	3	7	5	2	—
Pentonville Road ..	26	23	88.4	84	215	184	31	4
Playhouse Yard	6	2	33.3	12	28	22	6	—
Rahere Street	27	21	78.0	84	179	173	6	—
Risinghill Street ..	46	35	76.0	226	453	399	54	15
Rodney Street	11	7	63.6	42	128	92	36	—
Royley Street	5	5	100.0	9	20	20	—	—
St. Helena Street ..	65	43	66.1	172	335	301	34	3
St. James Street ..	15	13	86.6	72	113	109	4	—
St. James's Walk ..	5	5	100.0	20	41	36	5	—
St. Thomas's Place ..	8	8	100.0	25	48	33	15	3
Scotswood Street ..	4	2	50.0	6	19	19	—	—
Shrewsbury Court ..	2	1	50.0	4	12	10	2	1
Southampton Street ..	1	1	100.0	5	7	6	1	—
Tilney Court	4	4	100.0	13	16	14	2	3
Union Place, Clerkenwell Close	5	4	80.0	5	13	13	—	—
Union Place, Glasshouse Yard	13	10	76.9	33	39	38	1	—
Vernon Square	1	—	0.0	2	6	6	—	—
Warren Street	11	6	54.5	46	84	82	2	4
Wellington Place ..	3	3	100.0	3	16	16	—	—
West Place	7	2	28.5	19	32	27	5	—
White Conduit Street ..	5	5	100.0	13	34	29	5	—
White Horse Alley ..	11	7	63.6	26	58	56	2	2
White Lion Street ..	11	3	27.2	33	77	71	6	—
Whitecross Street ..	43	22	51.1	65	229	213	16	3
William Street	12	4	33.3	26	61	54	7	—
Wilmington Place ..	14	5	35.7	42	77	67	10	3
Winchester Cottages ..	6	3	50.0	21	34	33	1	—
Winchester Street ..	32	20	62.5	75	159	156	3	1
Young's Buildings ..	7	6	81.7	10	22	22	—	3
	1,355	831	61.3	3,747	7,849	7,257	592	113

Crowding and Overcrowding.—As a result of systematic house to house inspection 113 cases of overcrowding were detected — or 1.5 per cent. of all the rooms visited, or 8.3 per cent. of all the houses. In the area thus covered, 3,747 families occupied 7,257 rooms, or 1.93 rooms per family. Of the total rooms inspected 7.5 per cent. were empty—this shows that the crowding is not due to lack of accommodation. There was one room empty for every 12 rooms occupied.

The largest number of cases of overcrowding were in the following streets.

Overcrowding and House to House Inspection, 1910.

Street.	No. of Overcrowding cases found.	Room average per family in whole street	No. of empty rooms.
Risinghill Street ..	15	1.76	54
Donegal Street	14	1.89	32
James Gardens	12	1.29	18
Hatfield Street	6	1.29	3

The following streets and places are selected as showing where the number of rooms per family was lowest.

Room percentage per family in 1910.

Street.	No. of families.	No. of Rooms.	Percentage.
Beckford Square ..	44	46	1.04
Leicester Place.. ..	16	21	1.31
Southampton Street ..	5	6	1.2
Tilney Court	13	14	1.08
Union Place, Glass-house Yard	33	38	1.15

Beckford Square has now been closed.

The number of empty houses in the borough at the end of the year was 8.5 per cent. of the whole number.

In addition to the 113 cases of overcrowding discovered by house to house inspection, 17 others were reported to the department on information or complaint.

It is extremely difficult to know how to deal effectively and satisfactorily with the matter.

The practice in Finsbury has been to allow the tenants most ample time to get rooms elsewhere. The cases are visited from time to time and pressure is exerted to securing the abatement of the overcrowding.

Where overcrowding is associated with cases of phthisis or infectious disease, abatement is required forthwith.

CUSTOMS AND INLAND REVENUE ACTS.

By the provisions of the Customs and Inland Revenue Act, 1890, Section 26, and of the Revenue Act, 1903, Section 11, it is possible for the owner of houses of a certain class to obtain exemption from Inhabited House Duty provided the Medical Officer of Health is prepared to certify that the properties in question are so constructed as to afford suitable accommodation for each of the families or persons dwelling therein and that due provision is made for their sanitary requirements.

By the Housing and Town Planning Act, 1909, Section 35, this concession is extended to lodging houses for the working classes, and common lodging houses, provided the charge does not exceed sixpence a night for each person.

In 1910—applications for certificates were received in respect of 34 houses. Certificates were granted for 6 houses only.

The list of premises for which certificates have been so issued in past years is appended,

List of premises in respect of which Certificates have been granted under the Customs and Revenue Act, 1890.

Premises.	To whom granted.	Date of Certificate.
Gibson House, 322, Pentonville Road	J. P. Pfeiger, 5, Plimsoll Road, N.	13th November, 1902
114, King's Cross Road	J. P. Pfeiger, 5, Plimsoll Road, N.	13th November, 1902
Wenlake Buildings (41-85), Helmet Row	London County Council	1st March, 1905
65 and 67, St. John Street	Thos. Townsend, 259, Essex Road N.	18th May, 1905
York House, 140 and 142, King's Cross Rd.	J. P. Pfeiger, 5, Plimsoll Road, N.	23rd August, 1905
1-40, Wenlake Buildings, Helmet Row	London County Council	12th April, 1905
50, 52, 54, and 56, Penton Street	D. Cooksey, 52, Amwell Street	29th January, 1906
9, Vineyard Gardens	E. Pointer, Deering Road, Reigate	9th February, 1906
1 to 28, Buxton Houses, Brewer Street	A. T. Bevan, 40, Chancery Lane, W.C.	14th March, 1906
3, Brewer Street North	Thos. Townsend, 259, Essex Road, N.	2nd May, 1906
Bartholomew Buildings, Seward Street	J. and E. Brown, Essex Wharf, Durward Street, E.	15th August, 1906
Charter Buildings, Berry Street	A. Grover, 11, Cecil Court, W.C.	16th August, 1906
Salisbury Buildings, Clerkenwell Close	G. Pearce and Son, 22, Hyde Road, N.	22nd August, 1906
Dundee Buildings, St. John's Lane	S. Barker, 195, Lower Clapton Road, N.E.	29th August, 1906
Victoria Dwellings, Clerkenwell Road	The Soho, Clerkenwell and General Dwellings Co., Ltd., 48, Lincoln's Inn Fields, W.C.	5th September, 1906
22a, 22b, 22c, Risinghill Street	L. G. Macintosh, Withingham, Sussex	12th September, 1906
36, 38, 40, 42, 44, Risinghill Street	G. T. King, 49, Lome Road, Stroud Green, N.	19th September, 1906
3, 4, 5, Lorenzo Street	J. R. Howarth, 21, Penton Place, N.	4th October, 1906
2 and 4, Little Sutton Street	Mr. Kennedy, 25, Bedford Row, W.C.	31st August, 1906
Glasshouse Chambers	W. H. Treverton, 17, Tokenhouse Yard, E.C.	17th July, 1906

Premises.	To whom granted.	Date of Certificate.
1, Murton Street	Capt. Woreham, 8, Allfarthing Lane, Wandsworth, S.W.	18th July, 1906
24 to 27, Brewer Street	Thos. Townsend, 259, Essex Road, N.	23rd July, 1906
2 to 5, Brewer Street	Thos. Townsend, 259, Essex Road, N.	20th July, 1906
65 to 67, St. John Street	Thos. Townsend, 259, Essex Road, N.	25th July, 1906
Mallory Buildings, St. John Street	London County Council	25th July, 1906
York House, 140 and 142, King's Cross Rd.	J. P. Pfeiger, 56, Derwent Road, Palmer's Green, N.	31st October, 1906
Gibson House, 233, Pentonville Rd.	J. P. Pfeiger, 56, Derwent Road, Palmer's Green, N.	12th December, 1906
Gordon House, 237, Pentonville Rd.	J. P. Pfeiger, 56, Derwent Road, Palmer's Green, N.	12th December, 1906
Rodney Residences, Rodney Street	G. H. Bailey, 27, Bedford Row, W.C.	22nd December, 1906
Albany House, 144, King's Cross Road	J. P. Pfeiger, 56, Derwent Road, Palmer's Green, N.	4th February, 1907
24, 26, 28 and 30, Mitchell Street	Mr. Leage, 10, City Road, E.C.	18th March, 1907
Chadworth Buildings, Lever Street (134 tenements and 2 cottages)	London County Council	23rd April, 1907
302, St. John Street	G. Chamberlain, 14, Hall Street, E.C.	17th June, 1908
Henry Street Build- ings, Donegal Street	Mrs. Ley, 6, Longridge Road, Earl's Court, S.W.	1908
1—6, City Mansions, Exmouth Street	Messrs. Stanley, Parkes and Brown, 816, High Road, Tottenham, N.	6th March, 1910

VERMINOUS HOUSES.

When school children are found to be verminous in school by the London County Council medical officers in the course of their official inspections, the names and addresses of such children are sent to the Public Health Department.

Their homes are then visited by the sanitary inspectors and notices for cleansing are served on the occupiers where the premises are dirty or verminous. The parents are offered steam disinfection for the verminous bedding and clothing, and sulphur fumigation for the rooms.

The number of verminous children notified in 1910 was 259, the number of homes found clean was 117, the rest were dirty or verminous. In 35 cases the tenements were disinfected by the Borough Council.

The Housing and Town Planning Act, 1909, Section 14, enacts that in any contract made for letting for habitation a house or part of a house at a rent not exceeding forty pounds in London there shall be implied a condition that the house is at the commencement of the holding in all respects reasonably fit for human habitation. Vermin-infested houses would appear to be covered by this clause, which is an exceedingly useful one. And in this connection it is interesting to note that as far back as 1843, in *Smith v. Marrable* (Vol. 12, Meeson and Wellsby's Reports, 1843) the Court held that the presence of vermin in a furnished house may reasonably be construed as evidence that the house is unfit for human habitation.

UNDERGROUND ROOMS AND STABLE DWELLINGS.

In 25 instances underground rooms were found to be separately occupied in contravention of the provisions of the Public Health (London) Act, 1891, Section 96.

Notices were served and the illegal occupations were discontinued.

The stable dwellings remaining in the Borough are given in the following list. They are all frequently inspected.

Premises.	No. of Occupancies.	No. of Persons.		Total.
		Adults.	Children.	
Claremont Mews.. ..	9	22	11	33
Holford Yard	2	3	—	3
Holford Mews	3	8	7	15
Jay's Buildings	8	35	37	72
Garnault Mews	1	2	—	2
Baker's Row	1	6	3	9
14, Clerkenwell Close	1	3	—	3
93A, Charterhouse Street ..	2	2	2	4
1, New Court, Peter's Lane ..	1	2	—	2
82, Bath Street	1	3	—	3
119, Lever Street	1	5	1	6
Davis Yard	1	2	1	3

Complaints are occasionally received of the nuisance caused by the cartage of manure from the stables in connection with these dwellings. This is referred to elsewhere.

GENERAL SANITARY ADMINISTRATION. FACTORIES AND WORKSHOPS.

The number of workshops and workplaces on the Register at the end of the year was 1970. The factories were 895, and included 7 tenement factories in which one or more rooms are let out to tenants who pursue their different trades, availing themselves of the gas or steam power present in the building. These seven tenement factories accommodate 38 different employers, each of whom is separately and individually subject to the provisions of the Factory and Workshop Act, 1901.

The number of workshops is given in detail for each trade; in the case of factories the number of trades alone is indicated.

The figures for workshops in 1904, and for factory trades in 1908 are included for purposes of comparison.

The register of factories, though not a statutory requirement was completed in 1908, and has proved extremely useful.

Workshops and Workplaces in 1904, and 1910.

Description of Workshop or Manufacture.	1904.	1910.	1910. Increase.	1910. Decrease.
Clocks and watches	115	115	...	...
Jewellery	87	98	11	...
Cabinet making and polishing ...	84	77	...	7
Tailoring and clothing	71	68	...	3
Engraving, embossing and chasing	63	60	...	3
Stabling	35	55	20	...
Leather and leather goods ...	53	65	12	...
Building trades	55	48	...	7
Hats and caps	23	43	20	...
Provisions, bacon, grocery, food preparation	8	43	35	...
Gold and silver smiths	34	41	7	...
Millinery	18	41	23	...
Underclothing, shirts, skirts, blouses, aprons	44	41	...	3
Furriers and Skin Dressers ...	34	39	5	...
Fancy goods and toys	21	38	17	...
Boots and shoes	30	33	3	...
Picture frames, mouldings and mounts	20	33	13	...
Drugs, perfumery and sundries ...	18	32	14	...
Glass ware and glass work ...	33	30	...	3
Mantles and costumes	27	29	2	...
Forwarding goods	6	28	22	...
Box making	39	27	...	12
Ties and neck-wear	36	27	...	9
Cycles and motor	5	25	20	...
Engineers and machinists ...	16	25	9	...
Jewel and instrument cases ...	18	24	6	...
Iron and metal work	15	23	8	...
Stationery and sundries	19	23	4	...
Feather work	14	22	8	...
Laundries	24	22	...	2
Artificial flowers	20	20	...	...

Description of Workshop or Manufacture.	1904.	1910.	1910. Increase.	1910. Decrease.
Ink, paint, gum, oil, colours and dye	9	20	11	...
Stick making and mounting ...	37	20	...	17
Farriers and smiths	15	19	4	...
Gilding and plating	36	19	...	17
Packing cases	10	19	9	...
Firewood	6	18	12	...
Book and card edge gilding ...	13	17	4	...
Ironmongery and hardware ...	15	16	1	...
Paper and cardboard	14	16	2	...
Instrument makers and goods ...	16	22	6	...
Barometers and thermometers ...	8	15	7	...
Coach builders and wheelwrights	19	15	...	4
Shop fitting and show cases ...	10	15	5	...
Rag and paper waste	10	14	4	...
Basket and wicker work	6	13	7	...
Timber	7	13	6	...
Brushes	12	12	...	...
Upholstery	12	12	...	...
Wirework	13	12	...	1
Woollen, linen and cotton goods...	6	12	6	...
Christmas and post cards, art publishing	4	11	7	...
Embroidery, lace, fancy needle-work	11	11	...	...
Books, book materials	5	10	5	...
Copper work... ..	8	10	2	...
Electrical goods	6	10	4	...
Optical goods	12	10	...	2
Phonographs and automatic machines	4	10	6	...
Photographic goods	2	10	8	...
Rubber and waterproof goods ...	3	10	7	...
Brass work	20	9	...	11
Harness and saddlery	7	9	2	...
Lamps, lanterns and stoves ...	4	9	5	...
Sign making and ticket writing ...	8	9	1	...
Wines, spirits and cordials ...	7	9	2	...
Children's clothing... ..	13	8	...	5
Dressmaking	17	8	...	9
Pianos, organs and musical instruments	9	8	...	1
Tin plate work	4	8	4	...
Trucks and barrows	1	8	7	...
Umbrellas	16	8	...	8
Cushions, shades and screens ...	4	7	3	...
Gold blocking	6	7	1	...
Marble and stone work	7	7	...	...

Description of Workshop or Manufacture.	1904.	1910.	1910. Increase.	1910. Decrease.
Stamp and die cutting and sinking	6	7	1	...
Wood carving	6	7	1	...
Wood, ivory and bone turning ...	14	7	...	7
Agricultural and horticultural goods	3	6	3	...
Athletic and sports goods...	6	6	...	...
Pipe making and mounting ...	7	6	...	1
Tailors' and drapers' dummies ...	6	6	...	...
Confectionery	4	5	1	...
Cork goods	1	5	4	...
Hair goods	2	5	3	...
Bedding and bedsteads	5	4	...	1
Enamelling and japanning ...	9	4	...	5
Knife cleaning goods	1	4	3	...
Linen collars and cuffs	7	4	...	3
Lithography and stereotyping ...	3	4	1	...
Locksmiths	2	4	2	...
Scales and balances	3	4	1	...
Buttons ... ..	...	3	3	...
China and earthenware	3	3	...	...
Glaziers' diamonds...	...	3	3	...
Gloves	3	3	...	...
Pattern making	3	3	...	...
Plaster casts...	6	3	...	3
Pleating ... ..	...	3	3	...
Saws	2	3	1	...
Saw piercing	4	2	...	2
Other	102	36	...	66
Totals ...	1745	1970	437	212

The other workshops include the following businesses :—

Pens and pencils, ladders, towel supply, window cleaning, sponges, washing gloves, sale rooms, typewriters, taxidermy, beer engines, rope and twine, jetwork, mail carts, plating goods, bottle washing, drysaltery, printer's joinery, pattern cards, gold beating, carpets, trouser presses, bamboo, glove hands, powder puffs, culinary goods, mica goods, machine ruling, rule making, sequin and beadwork.

The comparison of 1904 with 1910 shows that there has been an increase of 225 workshops and workplaces in the last six years.

Employment in Factories in 1908 and 1910.

Description of Trade.	1908.	1910.	1910 Increase.	1910 Decrease.
Printing and stationery	154	143	...	11
Engineering and machinery ...	91	81	...	10
Shirts, skirts, blouses, ties, under- clothing, costumes	41	61	20	...
Jewellery, gold and silver workers	40	54	14	...
Gilding and plating	43	50	7	...
Bookbinding	35	42	7	...
Stick making and mounting ...	28	26	...	2
Box and paper bag making ...	28	23	...	5
Glass work	23	22	...	1
Foundries	19	19	...	...
Provisions, grocery, bacon, sausages, food preparation ...	17	19	2	...
Ivory, wood and bone turners ...	18	17	...	1
Cabinet making	17	15	...	2
Cycles and motors	13	14	1	...
Leather goods	9	13	4	...
Brass and copper work	17	12	...	5
Iron and metal work	3	12	9	...
Shop fitting... ..	10	12	2	...
Clock, jewel and instrument cases	5	11	6	...
Ink, paint, gum, soap and varnish	6	11	5	...
Joinery and saw-mills	9	11	2	...
Scientific and surgical instru- ments	14	11	...	3
Engraving and die sinking ...	7	10	3	...
Pipe making and mounting ...	6	10	4	...
Clocks and watches	9	9	...	...
Picture frames and mouldings ...	6	9	3	...
Tools... ..	...	9	9	...
Van and wheelwrights	9	9	...	...
Art, publishing and Christmas cards ... ..	...	8	8	...
Cigars, cigarettes and tobacco ...	9	8	...	1
Drugs and dry salting	7	8	1	...
Optical goods ... ..	...	8	8	...
Paper and cardboard	4	8	4	...
Brushes	4	7	3	...
Book and card edge gilding and blocking ... ..	...	7	7	...
Beer and spirits	5	6	1	...
Mantle making	6	6	...	...
Pianos and musical instrument making	7	6	...	1
Rubber goods	4	6	2	...
Wire work	7	6	...	1
Boots and shoes	3	5	2	...
Clothworking	5	5	...	...
Confectionery and cocoa... ..	5	5	...	...
Cutlery ... ..	...	5	5	...
Laundries	5	5	...	...
Packing cases	4	5	1	...
Silk goods and weaving	5	5	...	...
Surgical goods ... ..	...	5	5	...
Waste paper and rags ... ..	...	5	5	...
Other	115	69	...	46
Totals	872	933	150	89

The other trades include:—Buttons and studs, forage, mineral waters, wood carving and fretwork, artificial flowers, bedding and horsehair, cornice poles, glaziers' diamonds, lamps and lanterns, metal spinning, patterns and models, pencils and pens, printers' materials, sports goods, fibre, phonographs, photo-engraving, mono-service vessels, locks, firewood, tar felting scales and balances, fur and skin dressing, carpets, wharf, rouge, cork, marble, fancy goods, canvas and hats.

It appears from the above returns that the number of trades on the factory register has increased by 61 during the last two years.

At the end of 1909, there were on the register 2,039 workshops including workplaces, and 842 factories.

During the present year 311 workshops and 41 factories were closed or removed, and 242 workshops and 94 factories re-opened or newly established, leaving on the register at the end of 1910: workshops 1,970, and factories 895, including 7 tenement factories.

The numbers of workshops on the register for previous years were: in 1900, 1,266; 1901, 1,356; 1902, 1,374; 1903, 1,651; 1904, 1,745; 1905, 1,859; 1906, 1,813; 1907, 1,923; 1908, 2,059; and in 1909, 2,039

Summary of Inspections in 1910.

	Inspections.	Revisits.
Factories and Factory Laundries	403	653
Workshops and Workshop Laundries	801	1110
Workplaces	221	192
	1425	1955

Summary of Defaults and Defects in Factories, Workshops and Workplaces for which Notices were served during 1910.

	Work-shops.	Factories.	Work-places.	Totals.
Dirty workshops and workplaces	162	1	2	165
Damp and dilapidated premises	83	29	5	117
Dirty passages and staircases ...	16	..	2	18
Overcrowded workshops	7	...	...	7
Insufficient ventilation	11	...	...	11
Fumes from gas stoves and acid	3	...	...	3
Drainage of floors	1	...	...	1
Water supply inadequate	1	2	...	3
Sanitary conveniences, cleansing	75	115	6	196
Sanitary conveniences, defects ...	105	164	16	285
No sanitary convenience ... ..	...	1	1	2
Insufficient sanitary convenience accomodation	10	5	...	15
Improper use of sanitary conveniences by both sexes ...	3	6	...	9
Defective soil pipes	1	4	...	5
Yards cleansed, paved, or paving repaired	16	3	3	22
Defective sinks and gullies	17	28	8	53
Water cisterns dirty and defective	16	24	3	43
Accumulations of refuse	12	6	2	20
Dustbins, defective or absent ...	39	17	2	58
Drainage defective	4	10	3	17
Rain-water pipes choked or broken	7	2	2	11
Stables in need of limewashing	...	...	14	14
Stable paving or drainage defective	1	...	3	4
Keeping pigs ... ..	...	...	2	2
Nuisance from dead rats ... ..	...	1	...	1
Nuisance from stagnant water ...	1	1	...	2
Manure receptacles	1	...	1	2
Totals	592	419	75	1,086

In connection with these defects, 477 intimation and 60 statutory notices were served to secure their remedy and abatement.

**Notices received from the Home Office Factory
Inspectors.**

Notice of occupation of workshops (Sec. 117, sub-sec. 3)	112
Complaint notices (Section 5)	...	...	...	...	48

referring to the following details :—

Limewashing needed 21, Sanitary conveniences 28, Insufficient ventilation 2, Dilapidations 1, Water supply 1, Overcrowding 1.

Notices sent to the Home Office Inspectors ... 91

relating to the following matters :—

In Factories—

Abstract of Act not affixed 6, Limewashing needed 11, Insufficient ventilation 2, Offensive gas fumes 3, Illegal employment 2, Lack of means for heating 2, Overcrowding 1, Defective dust extraction 1, Insufficient drainage of floor 2, Truck Act infringements 7, Inefficient Fire exit 1.

and in Workshops—

Abstract of Act not affixed 46, Occupation of domestic workshop 7, Lack of means for heating 1, Truck Act infringements 4, Improper fire exit 1.

COMPLAINTS.

Seventy-five complaints were received and examined. Of these, 54 were verified and dealt with; 21 were not established on investigation. Thirty-one of the letters were anonymous.

One special complaint alleged that the only drinking water supplied to girls in a workshop was the luke-warm water derived from the condenser of a steam engine. It was stated that the girls all had to drink from a common enamelled jug. There used

to be a water tap for cold water in the workroom, but this had been abolished. A notice was served upon the owner and employer to provide a proper water supply. This was effected soon after.

INFECTIOUS DISEASE.

Notice was received of 7 cases of infectious disease in the homes of outworkers and workmen. All were enquired into and suitable preventive measures enjoined on the occupiers and workers.

The following matters are presented in the form required by the Home Office :—

1. Inspection of Factories, Workshops and Workplaces

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions
Factories (Including Factory Laundries.)	1,056	143	—
Workshops (Including Workshop Laundries)	1,911	361	—
Workplaces (Other than Outworkers' premises included in Part 3 of this Report)	413	33	1
Total	3,380	537	1

2. Defects found in Factories, Workshops and Workplaces.

	Number of Defects.			Number of Prosecutions.
	Found	Remedied	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts.—</i>				
Want of cleanliness	208	197	11	..
Want of ventilation	14	11	3	..
Overcrowding	8	7	1	..
Want of drainage of floors	3	1	2	..
Other nuisances	559	559	..	1
Sanitary accommodation {	Insufficient.	17	17	..
	Unsuitable			..
	or defective.	285	285	..
	Not separate for sexes.	9	9	..
<i>Offences under the Factory and Workshop Act—</i>				
Illegal occupation of underground bakehouse (S. 101)	..	..	..	..
Breach of special sanitary requirements for bakehouses (SS. 97 to 100)	..	..	..	..
Other offences (excluding offences relating to outwork which are included in Part 3 of this Report)	80	..	80	..
Total	1,183	1,086	97	1

HOME

NATURE OF WORK.	OUTWORKERS LISTS, SECTION 107							
	Lists received from Employers.						Addresses of Outworkers.	
	Sending twice in the year.			Sending once in the year.			Received from other Councils.	Forwarded to other Councils.
	Lists	Outworkers		Lists	Outworkers			
		Con-tractors	Work-men.		Con-tractors	Work-men.		
	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Wearing Apparel—								
(1) making, &c. . . .	176	366	3671	31	41	309	712	4153
(2) cleaning and washing . . .	..	..	..	..	..	..	..	..
Lace, lace curtains and nets . .	6	..	129	2	..	7	65	101
Artificial flowers	2	..	15	..	..	..	..	12
Nets, other than wire nets . . .	..	..	..	..	..	..	..	..
Tents . . . . .	..	..	..	..	..	..	..	..
Sacks . . . . .	..	..	..	..	..	..	..	..
Furniture and upholstery . . .	..	..	..	..	..	..	..	..
Fur pelling . . . . .	..	..	..	..	..	..	..	..
Feather sorting . . . . .	..	..	..	..	..	..	..	..
Umbrellas, &c.	4	..	19	..	..	..	54	15
Carding, &c., of buttons, &c. . .	..	..	..	..	..	..	..	..
Paper bags and boxes	38	..	795	2	..	21	78	581
Basket making . . . . .	..	..	..	..	..	..	1	..
Brush making	16	..	127	1	..	6	12	108
Racquet and tennis balls . . .	..	..	..	..	..	..	..	..
Stuffed toys . . . . .	..	..	..	1	..	13	..	12
File making . . . . .	..	..	..	..	..	..	..	..
Electro-plate	8	6	18	..	..	..	14	7
Cables and chains . . . . .	..	..	..	..	..	..	..	..
Anchor and grapnels . . . . .	..	..	..	..	..	..	..	..
Cart gear . . . . .	..	..	..	..	..	..	..	..
Locks, latches and keys . . . .	..	..	..	..	..	..	..	..
Pea picking . . . . .	..	..	..	..	..	..	..	..
TOTAL	250	372	4774	37	41	356	936	4989

WORK.

			OUTWORK IN UNWHOLE-SOME PREMISES, SECTION 108.			OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110.			
Notice served on Occupiers as to keeping or sending Lists.	Prosecutions.		Inspection of Out-workers' premises.	Instances.	Notices served.	Prosecutions.	Instances.	Notices served.	Prosecutions.
	Failing to keep or permit inspection of Lists.	Failing to send Lists.							
(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
"Reminder" postcards are sent to all occupiers in January and July of each year.	Nil.	Nil.	281				3		
			..				2		
				
			58				..		
				
				
			1				..		
				
			28				..		
			8	1	1	Nil.	..	Nil.	Nil.
			201				..		
			1				..		
			22				..		
				
				
			4				..		
..	..	..	604	1	1	..	5	..	..

OTHER MATTERS.	
Class. (1)	Number (2)
Matters notified to H. M. Inspector of Factories:—	
Failure to affix Abstract of the Factory and Workshop Act (s. 133)	52
Action taken in matters referred by H. M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshops Act (s. 5)	
Notified by H. M. Inspector	48
Reports (of action taken) sent to H. M. Inspector ..	48
Other	45
UNDERGROUND BAKEHOUSES (s. 101):—	
Certificates granted during the year	—
In use at the end of the year	36

PROSECUTIONS.

Date.	Name and Address of Defendant.	Offence.	Result.
Jan. 26th	Governors of Northampton Institute	Permitting black smoke to issue from the boiler chimney shaft at Northampton Institute	Fined £3 and 2s. costs
Aug. 2nd	Pettit, Robert Benjamin, 400, Caledonian Road	Keeping swine at a mews in 7, River Street, in such a manner as to be a nuisance (A mews in which cabwashers are in attendance, is a workplace)	Fined £2 and 2s. costs

Outworkers and Homeworkers—The names and addresses of 475 homeworkers—31 males and 444 females—were obtained from employers in 1910. Many of these addresses, a little over one third of the whole, were incorrect. Some of the addresses were correct but the names inaccurate. This was accounted for in the following way—sometimes a homeworker had married but

still retained her maiden name on her employer's books, at another time the homeworker had sold her business and the newcomer had adhered to the name first on the register "for fear of losing the connection." One outworker was alleged wilfully to give a wrong address—so that for some years past it has not been found possible to inspect her premises.

Three of the homeworkers were under 20 years, 12 over 70 years, and one over 80.

The trades pursued were as follows:—Cardboard box and paper bag making 149, tailoring 45, artificial flower making 42, blouse, apron, skirt and mantle making 40, ties, braces, belts 38, ladies and children's outfitting 34, millinery 26, umbrellas 22, brush making 17, shirts and collars 10, embroidery 9, furlining 8, boot making and repairing 5, burnishing 4, and other trades 26, making 475 in all.

Of the whole number 114 lived, worked and slept in one room only, 182 had 2 rooms.

Sixty-nine pursued their work and nursed their children too.

Altogether 106 notices were served for various sanitary defects—there were 15 cases of overcrowding, 4 notices for dirty verminous bedding—the rest were chiefly for dirty rooms and dilapidations.

Twelve of the outworkers were in receipt of poor relief, 7 had old age pensions, 87 depended upon their work for daily needs, and had no other source of income. In 61 cases the husbands were out of work and the wives supported the whole family.

Nearly 80 per cent. were reported to be in good health, 2 had phthisis; the rest were ailing.

Two notices were served upon employers to the effect that the homeworkers were at work in unwholesome premises and asking that the issue of homework should be discontinued.

BAKEHOUSES.

At the end of 1910, the total number of bakehouses in the borough was 60—of which 24 are above ground and 36 below ground. Many, if not all of these bakehouses are contiguous to shops where the bread baked is sold.

All the bakehouses are periodically inspected; in 1910 the number of visits paid was 146.

Notices for cleansing and dilapidations were issued in 26 instances—these were all complied with.

Two complaints were received :—

1. It was alleged that a baker was in the habit of sleeping in the bakehouse. The baker himself denied the allegation; his wife, however, admitted it to be true. Surprise visits were paid to the premises, but the baker was never actually found to sleep in the bakehouse.
2. A bakehouse was reported to be in a dirty and insanitary condition. The premises were visited and it was found that a fowl run had been placed on the flat surface over the oven of the bakehouse, and accommodated 11 fowls.

The walls and ceiling of the bakehouse were very filthy.

Notices were served on the occupier, and the nuisances were abated.

Sale and Exchange of Bread—A special enquiry on this subject was instituted in the borough at the request of the Local Government Board, and the following information ascertained :—

There are in Finsbury 280 shops where bread is sold : these include shops attached to bakehouses and to bakers' premises.

Of these, the proprietors of 41 shops admitted that they exchanged bread, but it is very likely that this number is too low—in all probability one half of the whole number or even more exchange bread especially for regular customers. The bread must be in good condition on return, or exchange is refused : in one shop it was stated that on one occasion when a loaf was returned, it was found that a mouse had eaten holes into it.

It is stated, as a result of inquiry, that as a rule general shops do not return stale bread to the bakers or wholesale houses supplying them—five per cent. of the shops admit they do return but here again it is very likely that the number is much larger, probably nearer 20 per cent.

The reason given for requesting exchange by householders who purchase are : The staleness of the bread, the wrong shape (e.g. a tin loaf served when a cottage was desired) or it sometimes happens that a buyer reaches home to find that he already has sufficient bread in the cupboard. In general shops the bread is in many cases kept in the window and on shelves apart from other materials, but in the shops in poor districts it is quite common to find bread near to packets of candles, bottles of pickles, or close to packages of washing soda, matches, or soap.

The shop proprietors state that they do not as a general rule allow their customers to handle bread for the purpose of seeing whether it is fresh or crusty—but in the poorer districts there is no doubt that the practice extensively prevails, especially where the loaves are placed within reach of the prospective customers. This is the case in many small general shops where the space is limited : in shops attached to bakehouses the bread is rarely handled and sampled as a preliminary to purchase ; in these it is out of the customer's reach.

During the last 12 months three cases of phthisis and 2 cases of scarlet fever have occurred in the families of shopkeepers who sell bread—but there is no positive evidence available to show that infection has actually been caused by the prevalence of disease in the 280 shops in this borough, as far back as the experience of the present staff extends.

There is no positive evidence too, to show that bread has been returned to a shop from a phthisical home or by a person suffering from phthisis, yet in view of the prevalence of phthisis in the borough it is quite likely that such contamination may have occurred.

All the bread shops in Finsbury, indeed all the shops where food is sold and prepared for sale, are subject to periodic inspection; they are all visited and critically examined.

There are in Finsbury no special regulations which deal with the storage of bread or food in general shops. It may be pointed out, however, that the Public Health (Regulations as to Food) Act, 1907, the Public Health Act, 1896, and the contained enactments include the power of making regulations for the prevention of danger arising to public health from the storage and distribution of articles of food or drink (other than drugs or water) intended for sale for human consumption.

The regulations included in the London County Council (General Powers) Act, 1908, section 8, referring to premises used for the sale, or deposit for sale, or preparation for sale of food of man, are enforced in this Borough.

At the present time the regulation or even repression of the practice of loaf exchange is a matter for the bakers themselves, and could be effected by a common agreement or understanding provided this were rigidly adhered to.

On the question of phthisis and infectious or contagious disease, it is very deplorable that anyone so suffering should handle bread, or any other food, or be in any way concerned in the sale, preparation, or manufacture of any food product. Further measures are needed in this connection.

It would appear desirable that all bakehouses, all breadshops, including those attached to bakehouses, those on the same premises as bakehouses, should be subject to an annual license with the power of removal.

This would enable a local authority to deal more effectively with matters such as the clean storage of flour, of the salt which is oftentimes placed on the floor, with the prevalence of smoking

and the attendant spitting in bakehouses, and the provision of nail brushes and washing accommodation for operatives and the provision of clean water for washing fruit and utensils.

Canal Boats Acts, 1877-1884.—That part of the Regent's canal which is within this Borough has a superficial area of about $5\frac{3}{4}$ acres, the larger portion being a *cul-de-sac* called the City Road Basin, with wharves, warehouses, factories, and a few residences around it. The small portion of the actual Canal forms a link in the communication between the River Thames and the Canals of the Midlands. The only wharf at which boats are loaded with offensive cargoes is 26, Wharf Road, belonging to the Finsbury Borough Council. The offensive cargoes consist chiefly of house refuse and wet and dry street sweepings.

Canal Boats.—During the year the total number of boats inspected was 112.

Of these, only 6 were boats carrying offensive cargoes.

During the latter half of the year the removal of house and street refuse was done entirely by barges which are not registered under the Canal Boats Acts.

The Acts and Regulations were contravened in 6 instances, and for this 2 complaint notes were sent to the owners requiring abatement within a specified time.

The details of the contraventions are as follows :—

Cabin top decking leaking	2
Cabin overcrowded	1
Cabin stove pipe dilapidated	1
Boat being worked without Registration Certificate	1
Boat not painted in accordance with the requirements of the Acts	1

The foregoing contraventions were all rectified within the specified time, and it has therefore not been found necessary to take any legal proceedings.

The following table gives statistics relating to the inspection of boats for the past 5 years :—

Year.	Boats inspected.	Persons found on Boats.			Totals.	Registered for.
		Men.	Women.	Children.		
1906	101	217	28	29	274	327
1907	103	181	40	43	264	322
1908	101	267	18	36	321	353
1909	105	261	28	47	336	370
1910	112	299	29	36	364	413

Of the 112 boats inspected, 87 were occupied by men only, 6 by men and women, and 19 by men, women and children.

No case of infectious disease has been notified or discovered in the Canal Boats, therefore isolation of the patient and detention of the boat for cleansing and disinfection have not been necessary.

The inspection of canal boats is part of the duty of the Sanitary Inspector whose district includes that portion of the Borough in which the Canal is situated. This year the duties were carried out by Inspector Draper (January to April, 1910) and Inspector Davis. There is no separate remuneration for the work.

ELEMENTARY SCHOOLS.

There are in Finsbury 19 Public Elementary Schools—14 provided and 5 non-provided. They afford accommodation for nearly 18,000 children. The average daily attendance in 1910 was 14,410.

The school premises are visited from time to time by the Medical Officer and the Sanitary Inspectors.

The greater part of the work, however, in connection with these schools lies with the Medical Department of the London County Council Education Committee.

Infectious Disease in Schools.—During the year 255 children were excluded from school owing to the presence of notifiable infectious disease in their homes.

In addition, 2,945 children were kept at home in connection with outbreaks of measles, hooping cough, chicken pox and other infectious or contagious disorders in their households.

The names and addresses of the children concerned were sent to the Public Health Department by the school teachers.

The figures for the year have been as follows :—

SCHOOLS.	Average Attendance in 1910.	NOTIFIED BY MEDICAL MEN.			INFORMATION FROM SCHOOLS.				Total.
		Scarlet Fever.	Diphtheria.	Enteric Fever.	Measles.	Hooping Cough.	Chicken Pox.	Other Diseases	
Albion Place	579	2	2	—	3	9	8	15	39
Amwell Street	569	5	—	—	68	9	3	47	132
Ann Street	878	9	11	—	63	20	14	40	157
Baltic Street	577	7	8	—	55	—	9	56	135
Bath Street	1,272	8	18	—	19	3	10	46	104
Bowling Green Lane..	689	8	4	—	7	6	2	17	44
Central Street.. ..	726	17	9	1	81	11	5	34	158
Chequer Street	736	4	4	—	57	4	29	17	115
Compton Street	1,082	11	6	—	66	6	12	43	144
Hugh Myddelton	1,441	26	20	1	173	36	34	111	401
Moreland Street	1,017	8	1	—	68	10	5	28	126
Risinghill Street	1,238	9	3	—	111	36	8	19	186
Winchester Street ..	1,225	8	9	—	86	40	33	34	220
White Lion Street ..	849	12	12	—	69	17	9	29	148
St. John Street	145	1	3	—	5	—	—	—	9
St. Luke's	691	1	3	—	43	1	—	9	57
St. Mark's	132	—	—	—	4	—	4	4	12
St. Joseph's	374	3	—	—	4	—	2	5	14
St. Peter & Paul	190	—	1	—	1	—	1	2	5
Totals	14,410	139	114	2	983	208	188	566	2 200

The question is often asked why are there more notices of disease from one school than another? Apart from the differences in the number of scholars in attendance, there are other reasons. The forwarding of these notices by school teachers is voluntary. Some teachers are more acute in matters of observation and diagnosis than others and may take more care and have

more concern in this matter. The information in the first instance is derived from the scholars themselves—neighbours or class fellows of the sick child. The standard of intelligence varies at different schools—where infants predominate the information may not be reliable, or forthcoming. Some schools draw their scholars from quite a small area, others, like the Hugh Myddelton School, draw from the whole borough and more readily net centres of infection.

Some schools like the Hugh Myddelton have special departments—for example, departments for defective and deaf children. More care is taken of these special children—the parents themselves come to explain the reason of absence, or the nurse who calls for the children at their homes is told by the mother, or some other adult is easily accessible and supplies the information. In these special schools then the intelligence is often reliable and precise. Some schools again may send notices of cases at once, which are later found to be inaccurate—other schools give information of a reliable kind only after the school visitor has called and reported. It will be seen then, that the large number of notices from any one school does not necessarily mean an epidemic at this school, but also depends upon the acuteness and concern of the teachers—the accessibility and reliability of the information, and the distribution over the borough of the area from which scholars are drawn.

BLACK SMOKE.

During the year, 81 special smoke observations were made by the Inspectors.

Notices of 12 infringements were received from the London County Council; two complaints were made by private persons.

In 24 cases the black smoke was emitted for three minutes or longer, and, in respect of these, the action taken is given in the table appended. Summary proceedings for the abatement are taken under Section 24 of the Public Health (London) Act, 1891. Where the black smoke lasted less than three minutes, no action was taken.

No.	Premises.	Date.	Duration in minutes of Black Smoke.	Action taken
1	Northampton Institute, St. John Street	1910 Jan. 6	8	Fined £3 and 2s. costs. Cautioned.
2	Do. do.	Jan. 7	6	
3	Do. do.	Jan. 7	3	
4	Do. do.	Feb. 8	8½	
5	S. Haskins, Middle Row and Memel Street	Mar. 21	4	Notice served.
6	Roper & Son, 21, Gloucester Street	May 26	5	Notices served.]
7	McNamara & Co., Paradise Street	June 10	5	Notice served.
8	Cannon Brewery, St. John Street	June 14	3	Cautioned.
9	Hermes Hill Laundry, Rising-hill Street	June 23	3	Cautioned.
10	H.M. Post Office, Mount Pleasant	June 24	5	Letter sent to Postmaster- General.
11	Do. do.	June 29	7	
12	Do. do.	June 29	3	
13	Do. do.	July 1	7	
14	Roper & Son, 21, Gloucester Street	July 18	7	Fined £2 and 2s costs.
15	Do. do.	July 19	7½	
16	Armfield's Hotel, South Place ..	Aug. 31	5	Notice served.
17	Hermes Hill Laundry, Rising-hill Street	Sept. 16	3	Cautioned.
18	Armfield's Hotel, South Place ..	Oct. 1	5	Notice served.
19	Clean Towel Supply Co., 19, Cumming Street	Oct. 4	3	Cautioned.
20	Brust, 52, Amwell Street	Oct. 8	3	Cautioned.
21	Fourdrinier, Hunt & Co., 2, Dufferin Street	Oct. 6	3	Notice served.
22	T. De la Rue & Co., Bunhill Row	Nov. 8	4	Notice served.
23	Chater Lea Manufacturing Co., 116-8-20, Golden Lane ..	Nov. 26	4	Notice served.
24	R. Murray & Co., 67 & 69, Turn-mill street	Dec. 12	4	Notice served.

CLEANSING OF PERSONS ACT, 1907.

In 1909, an arrangement was entered into with the Holborn Board of Guardians to provide for the cleansing of Finsbury cases under this Act at a cost of six shillings per person.

This cleansing is effected and the clothes of applicants are freed from vermin at the Casual Wards in Little Gray's Inn Lane, Holborn.

During the year applications were received from 15 persons for which orders were duly issued. All except two availed themselves of the facilities offered.

While the wards at Little Gray's Inn Lane were closed for a month in June and July, the cleansing was effected at the St. Pancras Cleansing Station, Pancras Road, N. W., for the same fixed charge.

THE MORTUARIES.

There are two mortuaries in the borough, one at Warwick Place, St. Luke's, and one at 47, Northampton Road, Clerkenwell.

At each place there is a disinfecting station, and a Coroner's Court.

The returns for 1910 are as follows :—

	Northampton Road Mortuary.	Warwick Place Mortuary.	Total.
Inquest cases	55	36	91
Infectious Diseases	6	4	10
Bodies deposited by Borough Orders ..	7	1	8
Bodies brought for convenience of relatives	45	55	100
	113	96	209

At the Warwick Place Mortuary 23 post mortem examinations were made; at Northampton Road 52 examinations.

During the year, the post mortem room, and mortuaries were thoroughly renovated and the walls were tiled. New sets of post mortem instruments were obtained, and the equipment generally brought up-to-date, at a cost of a little over £300.

The Coroner's Courts, the waiting room and lavatories were repaired, cleansed, painted or distempered, and where necessary redrained.

THE SHELTER.

By Section 60, sub-section 4, of the Public Health (London) Act, 1891, a sanitary authority shall provide, free of charge, temporary shelter or house accommodation with any necessary attendants for the members of any family in which any dangerous infectious disease has appeared, who have been compelled to leave their dwellings for the purpose of enabling such dwellings to be disinfected by the sanitary authority.

The Council's shelter is situated at 47, Northampton Road, Clerkenwell, in connection with the disinfecting station.

In 1910, seven families, 26 persons in all, availed themselves of its accommodation in accordance with the terms of the Act given above.

London County Council (General Powers) Act, 1910.—The Public Health Clauses are contained in Sections 18 and 19, and relate to smoke nuisances. They empower the London County Council to enforce the smoke provisions of the Public Health (London) Act, 1891, and authorise the Council to expend not more than £500 per annum in connection with experiments for the abatement of smoke nuisance.

Offensive Trades.—In Finsbury there is only one registered offensive trade — Mr. Joseph L. Henson, Tripe Dresser, 137, Whitecross Street. This was inspected on 14 occasions in 1910. It was not found necessary to serve any notice for sanitary defects.

Manure Removal.—This is not a scheduled offensive trade or business. The removal of horse manure is effected almost entirely by contractors, who carry it though the streets in open vans, often banked up three or four feet or even more above the sideboards of the vehicle. This manure may frequently be seen to be loosened during its progress through the streets and to fall in the roadway. On windy days, owing to the absence of any

cover, it may be blown on to the footpaths. It is absurd that while house refuse is removed in covered vans, manure may be permitted to be taken away in open vehicles, quite uncovered, to be blown and cast in the streets of the borough. The removal should be effected in covered vans. The bye-law at present in force is quite insufficient to deal with the matter and should be amended.

Haddock Smoking and Fish Curing.—This has been referred to elsewhere. Fresh powers are desirable here also.

STAFF OF THE PUBLIC HEALTH DEPARTMENT.

The staff consists of :—

A Chief Sanitary Inspector, five District Sanitary Inspectors, a special Meat Inspector, a special Factory and Workshop Inspector, one Lady Sanitary Inspector, two Lady Health Visitors (appointed in 1909), one chief clerk and two clerks.

In addition there are two disinfectors, one van driver, who may assist with disinfection, and two keepers of the Mortuaries and Coroner's Courts. One of the mortuary keepers assists in disinfecting rooms; the other works the steam disinfecter, and his wife attends to those who are temporarily housed in the Council's shelter.

The Borough is divided into 5 districts and one of these allotted to each district inspector. The districts are changed from time to time. Each district inspector carries out all the ordinary duties of a sanitary inspector, including the taking of samples under the Sale of Food and Drugs Act. The inspection of Canal Boats is undertaken by the inspector in whose district the Canal lies.

All devote the whole of their time to the work of the department.

The Chief Sanitary Inspector exercises a general supervision over the work of the staff.

The following table summarises the work done during 1910 by the Sanitary Inspectors :—

WORK OF SANITARY INSPECTORS, 1910.

	Inspector Davis.	Inspector Longden.	Inspector Norman.	Inspector Matson.	Inspector Draper.	Inspector Jackson.	TOTALS.
Houses damp dirty or dilapidated remedied	213	185	107	121	27	183	836
Doors, windows, floors, walls, ceilings; sash cords repaired ..	88	59	63	62	8	71	351
Overcrowding cases abated in other than Registered Houses	12	3	39	25	1	6	86
Illegal occupation of underground rooms	1	4	7	2	—	11	25
Water closet defects remedied ..	176	230	224	136	44	225	1035
Water closets erected	120	29	46	72	56	27	350
Urinal defects remedied	8	9	14	—	—	1	32
Urinals erected	20	2	—	5	—	—	27
Soil pipe and ventilating shafts defects remedied	1	6	5	23	2	7	44
Soil pipe and ventilating shafts erected	20	5	27	9	12	3	76
Yard defects remedied	110	103	119	88	19	142	581
Waste pipe defects remedied ..	8	38	25	17	6	13	107
Waste pipes erected	18	4	34	10	11	6	83
Water cistern defects remedied ..	24	14	24	26	7	27	122
Rubbish, manure accumulations removed	30	18	12	18	—	21	99
Dung or Dust receptacles repaired or renewed	22	65	89	26	8	69	279
Drains relaid or amended	34	19	42	40	12	60	209
Drains cleared	40	94	150	44	9	110	447
Rain water pipes repaired or renewed	22	13	31	3	5	26	100
Water supply to houses re-instated	4	3	5	3	—	3	19
Roofs and Gutters repaired ..	46	49	101	54	5	75	330
Area defects remedied	6	19	19	14	—	32	90
Washhouse defects remedied ..	34	55	101	49	9	104	352
Animal Nuisances abated	8	2	3	—	2	8	23
Floor space unventilated	1	—	10	4	1	—	16
Stables cleansed or repaired ..	12	—	5	1	—	—	18
Smoke observations	19	10	11	13	3	23	79
Water Supply laid on to upper storeys of house	—	30	57	10	—	21	118
Miscellaneous Nuisances abated ..	36	34	7	12	—	40	129
Food Premises—							
Bakehouses cleansed or repaired ..	6	7	4	6	1	2	26
Restaurants cleansed or repaired ..	47	27	14	25	1	11	125
Milkshops cleansed or repaired ..	8	12	13	2	—	12	47
Public Houses cleansed or repaired	23	29	18	30	—	19	119
Ice Cream Manufactories cleansed or repaired	8	7	2	7	—	1	25
Butchers' shops cleansed or repaired	3	1	—	—	—	—	4
Fish Purveyors' Shops cleansed or repaired	—	—	4	—	—	—	4
Registered Houses—Overcrowding cases abated	39	17	50	11	—	13	130
Registered Houses—cleansed ..	76	175	214	223	17	250	955
Registered Houses—Intimation (Cleansing) Notices served ..	76	175	216	181	59	250	957
Registered Houses—Statutory (Cleansing) Notices served ..	4	36	68	170	—	74	352
First visits (complaints, casual visits)	935	1275	1169	1222	337	1208	6146
Revisits	3348	3669	3831	2938	1133	3633	18552
Intimation Notices served	459	556	719	400	84	601	2819
Statutory Notices served	47	53	96	89	13	87	385
Infectious disease investigations ..	103	207	181	187	31	290	999
House inspections	133	198	175	182	18	296	1002
House to house inspections	219	242	275	307	42	270	1355
Canal Boats inspected	87	—	—	—	25	—	112

Work of the Lady Sanitary Inspector and Health Visitors.

Work of the Lady Sanitary Inspector and Health Visitors.					Mrs. Greenwood.	Miss Tubbs.	Miss Goodlass.
First Visits.	Births	...	...	...	144	644	372
	Infant Deaths	...	...	...	86	129	107
	Measles	...	...	...	247	—	—
	Outworkers (Home-workers)	...	...	...	676	—	—
	Factories	...	...	...	3	—	—
	Workshops	...	...	...	41	—	—
	Sundries	...	...	...	194	197	196
Re-visits.	Births	...	...	...	262	1689	856
	Infant Deaths	...	...	...	72	163	26
	Measles	...	...	...	116	—	—
	Outworkers (Home-workers)	...	...	...	460	—	—
	Factories	...	...	...	2	—	—
	Workshops	...	...	...	8	—	—
					2311	2822	1557
Number of Notices served					137		
Dirty rooms stripped and cleansed					42		
Dirty floors and bedding cleansed					24		
Sanitary conveniences cleansed					26		
Sanitary conveniences, defects remedied					38		
Workshops dirty and overcrowded					5		
Overcrowding cases abated					9		
Yard walls cleansed and paving repaired					18		
Rooms illegally occupied					3		
Defective dustbins replaced					11		
Wash-houses cleansed					16		
Miscellaneous nuisances abated					33		
Nuisances referred to District Inspector					42		
Reports to Home Office—							
No abstract fixed					6		
Fumes from gas engine in factory					1		
Infringement of Truck Act					11		
Domestic Workshops					5		
Defective flooring of wash-house in factory					1		
					24		

Infant Consultations and Weighing Centres.

Penton Street—

Number of weighing days	...	...	52
Number of attendances	...	...	1,066
Average number per day	...	...	20

Town Hall—

Number of weighing days	...	...	48
Number of attendances	...	...	1,050
Average attendance per day	...	...	21

Radnor Street—

Number of weighing days	...	...	52
Number of attendances	...	...	1,059
Average attendance per day	...	...	20
Total number of attendances	3,175.		
Average number per day	20.9.		

In addition, Mrs. Greenwood has attended the Mothers' Guild, 65, St. John Street, on 34 occasions when babies have been weighed and advice to mothers and demonstrations given.

AMBULANCE SERVICE.

There are five ambulance stations in the Borough, situate as follows :—

1. Police Station Ambulance, King's Cross Road.
2. Police Ambulance, junction of City Road and Goswell Road.
3. Police Ambulance, Finsbury Square.
4. Holborn Guardians' Offices, 53, Clerkenwell Road.
5. St. John's Ambulance Brigade, St. John's Gate.

The first three consist of litters only, and are in charge of the Metropolitan Police. These are for public service, not for private use.

There is a one-horse ambulance at the Guardians' Offices; the St. John's Ambulance Brigade possesses 6 horse-drawn vehicles besides a number of litters.

These 7 last mentioned ambulances are for either public or private use, in the latter case at a fixed scale of charges, to be obtained on application.

Three of the horse ambulances belonging to the St. John's Ambulance Brigade are used publicly on the occasion of important State and municipal ceremonies.

All the ambulances are available for use at any time and hour.

LEGAL PROCEEDINGS UNDER THE PUBLIC HEALTH (LONDON) ACT 1891.

Date. 1910.	Name and address of Defendant.	Offence.	Result.
Jan. 26th	Northampton Institute	Allowing black smoke to issue from boiler chimney shaft	Fined £3 and 2s. costs.
Aug. 2nd	R. J. Pettitt, 400, Caledonian Road, N.	Keeping swine at a mews in 7, River Street, in such a manner as to be a nuisance	Fined £2 and 2s. costs.
Sept. 9th	Samuel Roper, 21, Gloucester Street, E.C.	Allowing black smoke to issue from boiler chimney shaft	Fined £2 and 2s. costs.
Nov. 1st	Pisa Barnett, 58, Moorgate Street, E.C.	Failing to unstop a choked water closet at 18. Sidney Street	Fined £2 and £1 1s costs.

SALE OF FOOD AND DRUGS ACTS.

Date.	Name and Address of Defendant.	Offence.	Result.
1910.			
Jan. 14th	John James, 232, St. John Street, E.C.	For selling milk adulterated with 3·6 per cent. of added water and with 33 per cent. of its cream abstracted	Fined £10 and 12s. 6d. costs
„ 14th	Frank Wyatt, 49, Corporation Row, E.C.	For selling milk from which 27·6 per cent. of its cream had been abstracted	Ordered to pay 12s. 6d. costs
Feb. 15th	Albert and William Hall, 307, Liverpool Road, N.	For selling milk containing 12·4 per cent. of added water	Fined £3
Mar. 30th	Mary Wright, 9, Risinghill Street, N.	For selling milk from which 14·0 per cent. of its cream had been abstracted	Ordered to pay 12s. 6d. costs
„ 31st	Mrs. E. Davies, 154, Goswell Road, E.C.	For selling milk containing 16·7 per cent. of added water	Fined £1 and 12s. 6d. costs.
Apr. 22nd	Emily Davies, 2, Gt. Bath Street, E.C.	For selling milk from which 11·0 per cent. of its cream had been abstracted	Withdrawn (Milk supplied by following Defendants)
„ 22nd	E. and Z. Williams, 73, Mount Pleasant, E.C.	For selling milk from which 8·3 per cent. of its cream had been abstracted	Fined £6 and £1 5s. costs
„ 22nd	Nellie Brown, 70, White Lion Street, N.	For selling milk from which 10·6 per cent. of its cream had been abstracted	Fined £1 10s. and 12s. 6d. costs
„ 27th	Arthur Jas. Hall, 166, Whitecross Street, E.C.	For selling milk from which 17·3 per cent. of its cream had been abstracted	Ordered to pay 12s. 6d. costs.
„ 27th	Abraham Williams, 79, Central Street, E.C.	For selling milk from which 7·6 per cent. of its cream had been abstracted	Dismissed. Defendant proved a warranty
„ 27th	Abraham Williams, 79, Central Street, E.C.	For selling milk from which 9·6 per cent. of its cream had been abstracted	Withdrawn. Defendant proved a Warranty.
May 18th	Ann Davies, 318, St. John Street, E.C.	For selling butter adulterated with 85 per cent. of foreign fat	Ordered to pay 12s. 6d. costs
„ 18th	William Jones, 13, Percival Street, E.C.	For selling butter adulterated with 82 per cent. of foreign fat	Dismissed. 2s. costs.
„ 18th	William Jones, 13, Percival Street, E.C.	For selling margarine in an unstamped wrapper	Fined £1 and 12s. 6d. costs

Date.	Name and Address of Defendant.	Offence.	Result.
May 27th	Bert Osborne, 66, Compton Street, E.C.	For selling milk from which 7.6 per cent. of its cream had been abstracted	Ordered to pay 12s. 6d. costs
June 6th	John James, 230, St. John Street, E.C.	For selling milk adulterated with 12.2 per cent. of added water.	Dismissed. Warranty proved
July 12th	Alice Ross, 177, Central Street, E.C.	For selling milk adulterated with 9.6 per cent. of added water.	Fined £2
Aug. 2nd	John Davies, 25, Little Britain, E.C.	For supplying False Warranty to John James, in respect of Milk supplied	Fined £20 and £5 5s. costs.
„ 2nd	Evans, John, 32, Rosoman Street, E.C.	For selling milk from which 9.0 per cent. of its cream had been abstracted	Ordered to pay 12s. 6d. costs
„ 2nd	H. D. Pugh, 124, Whitecross Street, E.C.	For selling milk from which 11 per cent. of its cream had been abstracted	Dismissed. Defendant proved a Warranty
„ 30th	Alice Hole, 34, Goswell Road, E.C.	For selling butter adulterated with 84 per cent. of foreign fat	Fined £4
Sept. 23rd	John Sainsbury, 48, Chapel Street, N.	For selling lard adulterated with 100 per cent. of foreign fat	Fined £10 and £1 11s. 6d. costs
Oct. 21st	David Williams, 69, Gt. Percy Street, N.	For selling milk adulterated with 6.8 per cent. of added water	Fined £4 and 12s. 6d. costs.
„ 21st	Alfred Davies, 14, Chapel Street, N.	For selling lard adulterated with 100 per cent. of foreign fat.	Fined £3 and 12s. 6d. costs.
„ 25th	Mrs. L. Mocock, 154, Goswell Road, E.C.	For selling milk adulterated with 31.2 per cent. of added water	Fined £2 and 12s. 6d. costs.
Nov. 25th	Home & Colonial Stores, Ltd., 2 & 4, Paul Street, E.C.	For selling raspberry jam adulterated with 3.15 grains of salicylic acid per lb.	Withdrawn Defendant produced Warranty.
„ 25th	Home & Colonial Stores, Ltd., 2 & 4, Paul Street, E.C.	For selling raspberry jam adulterated with 3.99 grains of salicylic acid per lb.	Withdrawn Defendant produced Warranty
Dec. 13th	Herbert D. Thomas, 33, Wilson Street, E.C.	For selling milk from which 13.3 per cent. of its cream had been abstracted	Dismissed. Warranty proved
„ 13th	Mrs. Alice Barnett, 164, Whitecross Street, E.C.	For selling lard adulterated with 83 per cent. of foreign fat	Dismissed. (Magistrate held sufficient disclosure given).

Date.	Name and Address of Defendant.	Offence.	Result.
Dec. 30th	Nellie Brown, 70, White Lion Street, N.	For selling milk from which 10·3 per cent. of its cream had been abstracted	Fined £2 and 12s. 6d. costs
„ 30th	Sarah Porcher, 10, White Lion Street, N.	For selling milk adulterated with 10·4 per cent. of added water and from which 3·3 per cent. of its cream had been abstracted	Fined 10s. and 12s. 6d. costs

**LONDON COUNTY COUNCIL (GENERAL POWERS)
ACT, 1907.**

Date.	Name and Address of Defendant.	Offence.	Result.
1910. Dec. 30th	P. Palumbo, 37, Fish Street Hill, E.C.	Failing to supply sufficient and suitable water supply to upper storeys at No. 19, Wilmington Square, E.C.	Fined £5 and 2s. costs.

LONDON COUNTY COUNCIL GENERAL TOWN
ACT 1901

**LOCAL GOVERNMENT BOARD
AND OTHER TABLES.**

TABLE I.
VITAL STATISTICS OF WHOLE DISTRICT DURING 1910 AND PREVIOUS YEARS.
METROPOLITAN BOROUGH OF FINSBURY.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.				TOTAL DEATHS IN PUBLIC INSTITUTIONS IN THE DISTRICT	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents Registered in Public Institutions beyond the District.	NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT.	
		Number.	Rate.*	Under 1 Year of Age.		At all Ages.					Number.	Rate.*
				Number.	Rate per 1,000 Births registered.	Number.	Rate.*					
1	2	3	4	5	6	7	8	9	10	11	12	13
1901	101,463	3,792	37.3	461	121.6	1,318	13.0	33	29	880	2,169	21.4
1902	100,487	3,624	36.0	558	153.9	1,411	14.0	40	35	907	2,283	22.7
1903	100,487	3,664	36.4	503	137.3	1,169	11.6	43	46	870	1,993	19.8
1904	98,958	3,603	36.4	522	144.9	1,174	11.9	59	55	965	2,084	21.1
1905	98,207	3,398	34.6	429	126.2	1,014	10.3	38	45	886	1,855	18.9
1906	97,466	3,464	35.5	474	136.8	1,032	10.6	37	32	1,020	2,020	20.7
1907	96,732	3,361	34.7	368	109.4	912	9.4	54	49	911	1,774	18.3
1908	96,007	3,474	36.2	400	115.1	931	9.7	64	55	891	1,767	18.4
1909	95,289	3,427	35.9	372	108.5	882	9.2	56	56	988	1,814	19.0
Averages for years 1900-1909.	98,344	3,534	35.8	454	128.1	1,094	11.0	47	45	924	1,973	20.0
1910	94,578	3,566	37.6	253	70.9	819	8.7	77	69	886	1,636	17.29

* Rates in Columns 4 and 8 should be calculated per 1,000 of the estimated gross population. In districts in which large public institutions seriously affect the statistics, the rates in Column 13 may be calculated on a nett population, obtained by deducting from the estimated gross population the average number of inmates not belonging to the district in such institutions.

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

By the term "Non-residents" is meant persons brought into the district on account of sickness or infirmity, and dying in public institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in public institutions elsewhere.

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

Area of District in acres
(exclusive of area
covered by water). } 589

Total population at all ages 101,463
Number of inhabited houses, 9,820
Average number of persons per house, 10.9.

} At Census of 1901.

TABLE II.
VITAL STATISTICS OF SEPARATE LOCALITIES IN 1910 AND PREVIOUS YEARS.

NAMES OF LOCALITIES		1.—THE BOROUGH.				2.—CLERKENWELL.				3.—ST. LUKE.				4.—ST. SEPULCHRE.			
YEAR.		Population esti- mated to middle of each year.	Births regis- tered.	Deaths at all ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births regis- tered.	Deaths at all ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births regis- tered.	Deaths at all ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births regis- tered.	Deaths at all ages.	Deaths under 1 year.
		<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>e</i>	<i>f</i>	<i>g</i>	<i>h</i>
1901	.. ..	101,463	3,792	2 161	461	63,704	1,947	1,282	282	33,116	1,808	848	173	1,643	37	31	6
1902	.. ..	100,487	3,624	2,283	558	63,091	1,937	1,376	335	35,769	1,649	873	217	1,627	38	34	6
1903	.. ..	100,487	3,664	1,993	503	63,091	1,939	1,186	288	35,769	1,692	776	210	1,627	33	31	5
1904	.. ..	98,958	3,603	2,084	522	62,131	1,910	1,272	314	35,225	1,660	775	206	1,602	33	37	2
1905	.. ..	98,207	3,398	1,885	429	61,660	1,790	1,110	244	34,957	1,587	705	178	1,590	21	40	7
1906	.. ..	97,466	3,464	2,020	474	62,195	1,860	1,277	299	34,693	1,565	704	166	1,578	39	39	9
1907	.. ..	96,732	3,361	1,774	368	60,735	1,756	1,035	224	34,431	1,581	700	156	1,566	24	39	8
1908	.. ..	96,007	3,474	1,767	400	60,280	1,766	1,104	236	34,173	1,679	647	163	1,554	29	16	1
1909	.. ..	95,289	3,427	1,814	366	59,829	1,699	1,116	229	33,918	1,708	664	131	1,542	20	34	6
Averages of Years 1901 to 1909.		98,344	3,534	1,864	454	61,857	1,845	1,195	272	33,116	1,658	714	198	1 592	30	34	5
1910	.. ..	94,578	3,566	1,636	342	59,383	1,781	1 023	219	33,665	1,745	589	120	1,531	40	24	3

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

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

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

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

TABLE III.

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1910.

Notifiable Diseases.	Cases notified in whole district.							Total cases notified in each locality.			No. of cases removed to Hospital from each locality.			
	At all Ages.	At Ages†—Years.						1	2	3	1	2	3	4
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.	Clerkenwell.	St. Luke.	St. Sepulchre.	Clerkenwell.	St. Luke.	St. Sepulchre.	Total cases removed to Hospital.
Small Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Mem- branous croup)	126	8	58	41	14	5	—	86	40	—	85	40	—	125
Erysipelas	164	4	3	22	14	111	10	111	52	1	—	—	—	—
Scarlet Fever	126	1	46	65	11	3	—	78	48	—	74	50	—	124
Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever	28	—	—	6	9	13	—	14	14	—	14	14	—	28
Relapsing Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Continued Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever	7	—	—	—	—	7	—	4	3	—	2	3	—	5
Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro Spinal Meningitis .	4	2	1	1	—	—	—	2	2	—	2	2	—	4
Totals	455	15	108	135	48	139	10	295	159	1	177	109	—	286

TABLE IV.

CAUSES OF, AND AGES AT, DEATH DURING YEAR 1910.

Causes of Death.	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District.							Deaths at all ages of "Residents" belonging to Localities, whether occurring in or beyond the District.			Total Deaths, whether of "Resi- dents" or "Non-Residents" in Public Institutions in the District.
	All ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards	Clerkenwell.	St. Luke.	St. Sepulchre.	
Small-pox	—	—	—	—	—	—	—	—	—	—	—
Measles	73	14	57	2	—	—	—	39	33	1	—
Scarlet fever	4	—	2	2	—	—	—	1	3	—	—
Hooping-cough	36	12	23	1	—	—	—	23	13	—	—
Diphtheria (including Mem- branous croup)	19	4	14	1	—	—	—	13	6	—	—
Croup	—	—	—	—	—	—	—	—	—	—	—
Fever { Typhus	—	—	—	—	—	—	—	—	—	—	—
{ Enteric	4	—	—	—	1	3	—	2	2	—	—
{ Other continued	—	—	—	—	—	—	—	—	—	—	—
Epidemic influenza	17	1	—	—	1	5	10	11	6	—	—
Cholera	—	—	—	—	—	—	—	—	—	—	—
Plague	—	—	—	—	—	—	—	—	—	—	—
Diarrhœa	50	35	10	—	—	—	5	27	23	—	—
Enteritis	19	7	8	1	—	2	1	11	8	—	—
Gastritis	6	—	1	—	—	2	3	1	4	1	1
Puerperal fever	6	—	—	—	2	4	—	2	4	—	1
Erysipelas	3	1	1	—	—	1	—	2	1	—	—
Phthisis (Pulmonary Tuber- culosis)	166	3	8	4	15	122	14	114	49	3	1
Other tuberculous diseases ..	31	6	13	7	3	1	1	21	10	—	—
Cancer, malignant disease ..	79	—	1	—	1	47	30	50	27	2	16
Bronchitis	186	15	17	1	—	56	97	110	73	3	2
Pneumonia	201	63	48	6	1	47	36	130	71	—	—
Pleurisy	3	—	—	—	—	1	2	2	1	—	—
Other diseases of Respiratory organs	6	—	—	1	—	4	1	4	2	—	—
Alcoholism	40	—	—	—	—	37	3	26	14	—	—
Cirrhosis of liver	15	9	—	—	—	6	—	11	4	—	—
Venereal diseases	83	83	—	—	—	—	—	44	38	1	28
Premature birth	5	—	—	—	3	2	—	3	2	—	2
Diseases and accidents of parturition	152	5	1	8	11	84	43	98	51	3	2
Heart diseases	87	23	9	11	—	24	20	49	35	3	1
Accidents	9	1	—	—	1	7	—	6	3	—	—
Suicides and murder	35	33	2	—	—	—	—	26	8	1	—
Marasmus and Inanition ..	7	7	—	—	—	—	—	4	3	—	2
Convulsions	123	—	1	3	1	58	60	78	42	3	3
Bright's Disease and Cere- bral Hæmorrhage	41	—	—	—	—	—	41	25	16	—	3
Old Age	130	20	15	7	9	52	27	90	37	3	15
All other causes	1636	342	231	55	49	565	394	1023	589	24	77

TABLE V.

INFANTILE MORTALITY DURING THE YEAR, 1910.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under 1 year.
i. Common Infectious Diseases—																	
Small-pox .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Chicken-pox .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles .. ..	..	..	..	..	..	..	..	..	..	..	1	4	2	3	2	2	14
Scarlet Fever .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria (including Membranous Croup)	..	..	..	..	..	..	..	..	..	..	1	..	2	..	..	1	4
Hooping Cough .. ..	..	..	..	..	..	..	..	1	..	1	1	2	2	1	2	2	12
ii. Diarrhoeal Diseases—																	
Diarrhoea, all forms ..	1	..	1	1	3	4	..	3	3	3	5	4	2	2	5	1	35
Enteritis, Muco-enteritis, Gastro-enteritis .. ..	..	..	..	..	..	1	1	1	..	1	..	..	2	..	1	..	7
Gastritis, Gastro-intestinal Catarrh .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
iii. Wasting Diseases—																	
Premature Birth	60	9	5	6	80	2	1	..	..	..	..	..	..	..	..	..	83
Congenital Defects	3	1	..	..	4	..	1	..	2	..	..	..	..	..	..	..	7
Injury at Birth	2	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	2
Want of Breast-milk (Starvation) .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Atrophy, Debility, Marasmus	2	2	1	..	5	7	7	5	..	..	6	1	1	..	1	..	33
iv. Tuberculous Diseases—																	
Tuberculous Meningitis .. ..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	1	1	4
Tuberculous Peritonitis, Tabes Mesenterica .. ..	..	..	1	..	1	..	..	1	..	..	..	..	..	..	..	..	2
Other Tuberculous Diseases .. ..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	1	3
v. Other Causes—																	
Erysipelas .. ..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1
Syphilis .. ..	..	1	1	1	3	2	1	1	2	..	..	..	..	..	..	..	9
Rickets .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Meningitis (not Tuberculous) .. ..	..	..	..	..	..	..	..	1	..	..	2	..	..	..	..	..	3
Convulsions	2	..	1	..	3	1	1	1	1	..	..	..	..	..	..	..	7
Bronchitis .. ..	..	..	..	1	1	1	2	2	2	3	..	..	..	1	2	1	15
Laryngitis .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pneumonia .. ..	..	4	2	3	9	8	5	6	5	6	5	3	6	2	2	6	63
Suffocation, overlying	1	1	1	1	4	5	5	2	1	1	..	..	..	..	..	..	18
Other Causes	2	3	1	..	6	..	2	1	1	1	1	3	3	1	1	..	20
All Causes (Certified) ..	73	21	14	13	121	31	26	25	17	16	23	20	21	10	18	14	342

Population, estimated to middle of 1910, 94,578.

Deaths from all Causes at all Ages, 1,636.

Births in the year: { Legitimate, 2755.
Illegitimate, 78.Deaths in the year of { Legitimate infants, 317.
Illegitimate infants, 25.

