

Annual report for 1910 of the Medical Officer of Health.

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Metropolitan Borough of Chelsea.

ANNUAL REPORT

For 1910,

OF THE

Medical Officer of Health,

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TOWN HALL, KING'S ROAD, CHELSEA.

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1911.

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ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For 1910.

Section I.—STATISTICAL.

POPULATION OF CHELSEA.

The census population for the Borough of Chelsea for the year 1901 was 73,842.

The estimated population of the Borough for ¹⁹¹⁰1909 is 75,457; the population of each sub-district being as follows:—

North Chelsea	...	...	43,444
South Chelsea	...	...	32,013

There is considerable reason, however, for believing that the population of the Borough is now over-estimated on account of the closing of houses and demolitions in Church and Cheyne Wards and the increasing proportion of empty houses in the Borough as a whole. As the accuracy of the birth and death-rates depends on the correctness of the estimation of population, the current rates must be regarded as liable to correction when the census figures for 1911 are known.

BIRTHS AND BIRTH-RATE FOR 1910.

TABLE I.

	Number of Births.		
	Male.	Female.	Total.
North Chelsea	337	351	688
South Chelsea	325	285	610
Chelsea	662	636	1,298

The above Table relates to births registered in the District. Excluding 12 births of non-parishioners, and including 90 births taking place amongst Chelsea mothers in Lying-in Hospitals and Homes outside the Borough, the total number of births for the year is 1,376.

The birth-rate for 1910 is **18·3 per 1,000**. The average birth-rate of the Borough for the years 1901-9 is 20·7 per 1,000. The average birth-rate of the Home District of Chelsea Parish for the 5 years 1896-1900 was 24·1 per 1,000. The birth-rate of the past year is the lowest yet recorded.

During the year 1910, 57 births of parishioners were registered as having occurred in the Chelsea Workhouse, equivalent to 4·1 per cent. of the total number of births in the Borough, the same percentage as in 1909.

DEATHS AND DEATH-RATE FOR 1910.

The total number of deaths registered in the Borough was 1,427. Of this number 632 were deaths within the Borough of non-parishioners—chiefly occurring in Hospitals, and in the St. George's Infirmary; and 157 deaths of parishioners occurred outside the Borough in various public institutions. There were, therefore, 952 deaths of parishioners of Chelsea. These 952 deaths are equivalent to a death-rate for the year of **12·7 per 1,000**, as against 14·5 in 1909.

Table II. gives the death-rates of the Home District of Chelsea Parish, of Chelsea Borough, and of London during the past 20 years.

TABLE II.

Year.	Chelsea.*	London.
	Death-rate.	Death-rate.
1891	22·1	21·4
1892	21·9	20·7
1893	21·6	21·4
1894	17·6	17·8
1895	20·8	19·9
1896	19·0	18·6
1897	17·9	18·2
1898	18·1	18·7
1899	20·0	19·8
1900	18·1	18·7
1901	16·6	17·7
1902	18·0	17·7
1903	15·3	15·7
1904	16·5	16·6
1905	14·9	15·6
1906	15·7	15·7
1907	15·0	15·2
1908	14·5	14·4
1909	14·5	14·0
1910	12·7	12·9

*1891-1900, Chelsea Home District.

Zymotic Death-rate.—The death-rate in Chelsea from the seven principal zymotic diseases was 0·92 per 1,000 in 1910, the corresponding rate for London being 1·32. In 1909 the zymotic death-rate in Chelsea was 1·2 per 1,000.

TABLE III.—For the year 1910.

	Zymotic death-rate.	Diarrhoea death-rate.	Phthisis death-rate.	Other tubercular diseases death-rate.	Respiratory diseases death-rate.	Cancer death-rate.	Influenza death-rate.	Deaths under 1 year to 1000 births.	Percentage of deaths under 5 to total deaths.	Deaths in Public Institutions per cent. of total.
Chelsea	0·92	0·41	1·18	0·33	2·19	1·13	0·17	102	21·4	48·3
London	1·32	0·47	1·16	0·41	2·62	1·05	0·15	102	29·9	41·9

Small-Pox.—There was no small-pox in Chelsea in 1910.

Measles.—This disease caused 19 deaths in 1910, as compared with 24 in 1909, and 12 in 1908. Seven deaths were registered in North Chelsea, and 12 in South Chelsea. Five of the deaths were of infants under one year of age, and 14 of children between one and five years. Ten of the deaths occurred in the first quarter of the year, eight in the third quarter, and one in the last quarter.

Scarlet Fever.—There were no deaths from scarlet fever in Chelsea in 1910, although 119 cases of this disease were notified in the course of the year.

Diphtheria.—This disease caused five deaths in 1910, as compared with 14 in 1909. One case resided in North Chelsea, and four in South Chelsea. Three of the deaths occurred in hospitals, and two at the patients' own homes.

TABLE IV.—Cases of, and Deaths from Diphtheria and Membranous Croup in Chelsea,* 1890-1910.

CASES.																				
1890	1891	1892	1893	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910
172	162	163	200	207	273	429	242	153	136	150	106	131	99	61	52	161	158	138	97	81

DEATHS.																				
1890	1891	1892	1893	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910
32	20	32	43	41	52	96	45	22	13	14	9	13	4	5	5	16	8	13	14	5

* 1890-1900, Chelsea Home District.

Whooping Cough.—This disease caused 12 deaths in 1910, as compared with 13 in 1909. The deaths were equally divided between North and South Chelsea.

Enteric Fever.—Two deaths were due to enteric fever in 1910, the same number as in 1909. One death occurred in each division of the Borough. Both were hospital cases.

TABLE V.—*Zymotic Disease Mortality in Chelsea in 1910.*

	Actual number of deaths in Chelsea.	Chelsea's proportion of total London deaths according to its population.	Average number of deaths annually in Chelsea, 1900-1909.
Measles	19	31	28
Scarlet Fever	0	3	6
Diphtheria	5	7	10
Whooping Cough	12	21	20
Enteric Fever	2	3	4
Diarrhœa	28	35	55

Diarrhœa.—The deaths in Chelsea in 1910 from diarrhœal diseases (diarrhœa 13, enteritis 15) were 28 in number, as compared with 30 in 1909. Nineteen of the deaths were of infants under one year of age, seven were between one and five years of age, and two were adults. Thirteen of the deaths were of North Chelsea residents, and 15 of South Chelsea. The summer prevalence of the disease was very late in commencing, no deaths being registered until the fourth week of August. The prevalence was very slight, only 11 deaths occurring in the whole of the third quarter of the year.

TABLE VI.—*Mortality from Diarrhœal Diseases.*

Year.	Chelsea.	London.
	Death-rate per million.	Death-rate per million.
1896	1037	1112
1897	1340	1446
1898	1258	1556
1899	1282	1663
1900	1187	1251
1901	788	1184
1902	692	737
1903	541	837
1904	864	1267
1905	620	948
1906	1115	1275
1907	509	544
1908	656	796
1909	400	552
1910	371	467

The diarrhœa death-rate in Chelsea in 1910 is the lowest yet recorded. The same remark is probably true of the London diarrhœa death-rate in 1910. How far these very favourable results are due to cold and wet summers, and how far they are attributable to the efforts—municipal and philanthropic—now being made with a view to the conservation of infant life, it is impossible as yet to determine.

Influenza.—The number of deaths attributed to influenza in 1910 was 13, as against 25 in 1909. Five deaths occurred in North Chelsea, and eight in South Chelsea. Seven of the fatal cases were of persons

aged 65 years and upwards. In London generally the disease was considerably less prevalent in 1910 than in 1909, 723 deaths being registered as due to this cause in 1910, as compared with 1,213 in 1909. Of the fatal cases in London in 1910, 375 occurred in the first quarter of the year, 110 in the second, 57 in the third, and 181 in the fourth quarter. The month of greatest prevalence was February.

Respiratory Diseases.—The death-rate from these diseases in Chelsea in 1910 was 2·19 per 1,000, as compared with 3·15 per 1,000 in 1909. The London death-rate from respiratory diseases (including pneumonia) in 1910 was 2·62 per 1,000.

Tubercular Diseases.—The death-rate from phthisis and other tubercular diseases in Chelsea in 1910 was 1·52 per 1,000, as against 1·89 per 1,000 in 1909. The death-rate in London from these diseases in 1910 was 1·57 per 1,000. Of the 89 deaths from phthisis in Chelsea in 1910, 39, or 43·8 per cent., occurred in the Chelsea Workhouse Infirmary, and 10, or 11·2 per cent., occurred in other public institutions, making a total of 55 per cent. of the total of 89 cases dying in public institutions away from their own homes. The average for the ten years, 1900-1909, is 44 per cent. in the Chelsea Infirmary, and 15 per cent. in other public institutions, making a total of 59 per cent. of the total deaths.

TABLE VII.

Average Death-rates per million in quinquennial periods (1891-1910) from Phthisis and other Tubercular Diseases amongst Males and Females, at 8 Age-Periods.

MALES.

	0-5	5-15	15-25	25-35	35-45	45-55	55-65	Over 65	All ages
1891-5	5555	891	1819	3718	5347	5231	4621	1873	3369
1896-1900	5108	1096	1482	3032	6830	7035	3243	2809	3527
1901-5	4023	308	1112	2527	4853	4630	4783	2247	2699
1906-1910	2182	543	814	1895	3258	4309	3581	2731	2097

FEMALES.

	0-5	5-15	15-25	25-35	35-45	45-55	55-65	Over 65	All ages
1891-5	4532	1223	1128	1857	2917	2489	1501	699	1946
1896-1900	4467	863	1080	1300	2265	2584	2073	1165	1751
1901-5	3575	719	528	1579	2094	2680	1144	1243	1536
1906-1910	2288	360	500	832	1258	1396	1728	1295	1020

A similar table for the 19 years, 1891-1909, appeared in the Annual Report for 1909, and was the subject of comment. Now that the fourth quinquennium has been completed, it will be seen that the decline in mortality from tubercular diseases in both sexes and at all ages up to 45 years in males and up to 55 years in females, has been a marked feature of the past five years. The death-rate of females from tubercular diseases is now rather less than half that of males, the differences in death-rates being specially marked in all the age-periods after the age of 25.

Cancer.—Malignant cancerous disease caused 85 deaths in Chelsea in 1910, the average of the past 19 years being 74 deaths annually. Forty-nine of the deaths were of North Chelsea residents, and 36 of South Chelsea.

Alcoholism.—Fifteen deaths were registered in 1910 as being due to intemperance or cirrhosis of the liver, as against 16 in 1909. These annual figures merely represent the deaths which are palpably and unmistakably the results of alcoholic excess, and take no account of the far larger numbers which are indirectly due to excessive drinking.

Deaths in Lunatic Asylums.—Thirty-seven deaths of Chelsea parishioners occurred in 1910 in lunatic asylums. The average of the preceding 19 years is 34 deaths annually in lunatic asylums.

Deaths in Public Institutions.—In 1910, 48·3 per cent. of the total deaths of parishioners of Chelsea occurred in public institutions, as compared with 50·9 per cent. in 1909. In London generally, 41·9 per cent. of the total deaths occurred in public institutions in 1910. The deaths in the Chelsea Infirmary in 1910 formed 22·7 per cent. of the total deaths of Borough residents, the same figure as in 1909.

Deaths of Common Lodging House Inmates.—Sixteen deaths of common lodging house inmates occurred in Chelsea in 1910, all taking place in the Chelsea Infirmary. All were males. Three of the deaths (19 per cent. of the total) were due to pulmonary tuberculosis. The only common lodging houses now open in Chelsea are 24, Smith-street (50 beds for males), 25-27, Smith-street (112 beds for males), and 23 and 24, Lawrence-street (76 beds for males). Total, 238 beds.

DEATH-RATE OF SPECIAL CLASSES OF THE POPULATION.

The following Table gives the birth-rate, the general death-rate, the zymotic disease death-rate, the tubercular disease death-rate, and the deaths under 1 year to 1,000 births, during the year 1910, for the Borough, for the inhabitants of the Borough Council's Dwellings, for the inhabitants of other Industrial Dwellings in Chelsea, and for the inhabitants of ten of the streets occupied by the poorer classes in the Borough. The industrial dwellings are the Marlborough Buildings, Guinness Buildings, Peabody Buildings, and Chelsea Park Dwellings, with a total population of about 1882; and the streets are Dartrey-road, Francis-street, Gilray-square, Ives-street, Oakham-street, Pond-terrace, Riley-street, Slaidburn-street, Stayton-street, World's End-passage, and the courts adjacent, with a total population of about 4,000. The Borough Council's Dwellings are Sir Thomas More Buildings, Pond House, Onslow Dwellings, and Grove Buildings, with a total population of 1,546.

TABLE VIII.—For the year 1910.

	Birth-rate.	Death-rate.	Zymotic Death-rate.	Tubercular Diseases Death-rate.	Deaths under one year to 1,000 births.
Chelsea	18·3	12·7	0·92	1·52	102
Borough Council Dwellings ...	31·1	5·2	0	0	42
Industrial Dwellings	28·7	14·9	1·06	1·06	111
10 Poor-class Streets	35·0	25·5	3·0	3·2	150

The above Table shows what relatively very low rates of mortality can be made to prevail in Block Dwellings so well constructed and so ably administered as those belonging to the Chelsea Borough Council. Only one death occurred in Onslow Dwellings, although the average of the previous ten years is seven deaths annually.

INFANTILE MORTALITY.

During the year 1910 there was a still further reduction on the low rate of infantile mortality (deaths of infants under one year to 1,000 births) prevailing in 1909. In 1909 the rate was 107, and it fell in 1910 to 102.

TABLE IX.

Year.	Chelsea.		London.	
	Deaths under one to 1,000 births.	Deaths 1-5 years.	Deaths under one to 1,000 births.	Deaths 1-5 years.
1901	139	101	150	9,514
1902	145	151	141	9,893
1903	144	94	131	8,514
1904	155	102	145	8,915
1905	116	65	131	8,209
1906	140	122	133	8,639
1907	122	101	118	8,435
1908	108	64	115	7,207
1909	107	85	107	7,555
1910	102	63	102	6,807

The year 1910, like the year 1909, was on the whole favourable to a low rate of infantile mortality, there being no great prevalence of measles, whooping cough, diarrhoea, or other complaints which tend to raise the infantile death-rate.

The rates of infantile mortality prevailing amongst different sections of the working classes vary enormously according to habits and modes of life (see Table VIII.). In well-housed communities, where the population is practically one selected for steadiness, thrift, and sobriety, over 95 per cent. of the infants born may survive the first year of life; whereas in the streets inhabited by the more improvident and less steady grades of working people only 85 per cent. survive the first year of life.

TABLE X.

	1910.	
	Birth-rate.	Infantile Mortality Rate.
Hans Town Ward	14.0	80
Royal Hospital ,,	11.8	56
Church ,,	18.3	108
Cheyne ,,	16.4	100
Stanley ,,	25.0	117
Chelsea Borough	18.3	102

The above Table shows the birth-rates and infantile mortality rates in the five wards of the Borough. The births occurring in the Chelsea Workhouse and in outlying institutions have been distributed amongst the various wards. Stanley Ward had the highest birth-rate and the highest rate of infantile mortality.

From Table XVI. (Local Government Board Table V.) it will be seen that out of a total of 141 deaths of infants under one year of age in 1910, 54, or 38·3 per cent., occurred in the first four weeks of life, as compared with 37·3 in 1909, and 33·8 in 1908. Thirty-four deaths occurred in the first week of life, equal to 24·1 per cent. of the total, the corresponding figure for 1909 being 23·3. The majority of these deaths in the first month of life are due to premature birth, congenital defects, and inability to take nourishment. For deaths under the month the rate of mortality in 1910 is 39 per 1,000 births, as against 40 in 1909, which is also the average rate for the five years, 1905-9.

Between the ages of 1 month and 12 months, 87 deaths, or 61·7 per cent. of the total, were registered in 1910, as compared with 62·7 per cent. in 1909; 19 of these deaths being due to diarrhœal diseases, as compared with 17 in 1909. There were, besides, 5 deaths each from measles and whooping cough, 5 from congenital syphilis, 19 from bronchitis, and 7 from pneumonia, amongst infants under the year.

Illegitimate Births.—The following Table shows, for each of the years 1905—1910, the number of illegitimate births belonging to the Borough, the number known to be alive at the end of each year, the number known to be dead, and the number unaccounted for.

TABLE XI.—*Borough of Chelsea.*

Year.	Illegitimate Births.					
	Number.	Per cent. of total births.	Alive at end of year.	Dead at end of year.	Unaccounted for.	Deaths under 1 to 1,000 births.
1905	88	5·5	19	10	59	114
1906	73	4·8	21	7	45	96
1907	76	5·2	28	9	39	118
1908	96	6·2	37	11	48	115
1909	74	5·3	44	13	17	176
1910	80	5·8	63	8	9	100

The infantile mortality rates in the above table are evidently minimum rates, owing to the considerable numbers each year unaccounted for by change of residence, or other cause. Assuming that the illegitimate babies unaccounted for died at the same rate as those accounted for, then the average infantile mortality rate of the illegitimate children born in the 6 years, 1905—1910, is 213 per 1,000, as compared with 116 per 1,000 for all infants, legitimate and illegitimate. About 50 per cent. of the illegitimate births each year take place in the Chelsea Workhouse.

TABLE XII.—(I.)
FOR WHOLE DISTRICT.

YEAR.	Popula- tion esti- mated to Middle of each year.	BIRTHS.		DEATHS UNDER ONE YEAR OF AGE.		DEATHS AT ALL AGES. TOTAL.		DEATHS IN PUBLIC INSTI- TUTIONS IN Dis- TRICT. 9	Deaths of non- resid- ents re- gistered in Dis- trict. 10	Deaths of Res- idents regis- tered beyond District 11	DEATHS AT ALL AGES. NETT.	
		No.	Rate.*	No.	Rate per 1000 Births regist'd 6	No.	Rate.*				No.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1901	73,856	1626	22.1	226	139	1601	21.8	855	546	165	1220	16.6
1902	74,018	1685	22.4	244	145	1896	25.2	1086	716	175	1355	18.0
1903	74,169	1516	20.5	218	144	1579	21.4	964	615	167	1131	15.3
1904	74,329	1547	20.9	240	155	1682	22.7	978	612	152	1222	16.5
1905	74,496	1585	21.3	184	116	1606	21.6	1012	663	163	1106	14.9
1906	74,672	1506	20.2	211	140	1704	22.9	1089	699	163	1168	15.7
1907	74,857	1493	20.0	182	122	1688	22.6	1099	712	142	1118	15.0
1908	75,049	1540	20.2	166	108	1653	21.7	1061	705	156	1104	14.5
1909	75,249	1400	18.7	150	107	1625	21.7	1091	740	202	1087	14.5
Aver- ages for years 1901-1909.	74,522	1544	20.7	202	131	1670	22.4	1026	668	165	1168	15.7
1910	75,457	1376	18.3	141	102	1427	19.0	935	632	157	952	12.7

* Rates calculated per 1000 of estimated population.

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

By the term "Non-residents" is meant persons brought into the district on account of sickness or infirmity, and dying in public institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in public institutions elsewhere.

The "Public institutions" to be taken into account for the purposes of these Tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, workhouses and lunatic asylums.

Area of District in acres (ex-
clusive of area covered
by water) 660

At Census of 1901.

Total population at all ages .. 73,842
Number of inhabited houses .. 9,063
Average number of persons per
house 8.1

TABLE XIII.—(II.)

NAMES OF LOCALITIES.	CHELSEA BOROUGH.				NORTH CHELSEA.				SOUTH CHELSEA.			
	Population estimated to middle of each year. (a.)	Births registered. (b.)	Deaths at all Ages. (c.)	Deaths under 1 Year. (d.)	Population estimated to middle of each year. (a.)	Births registered. (b.)	Deaths at all Ages. (c.)	Deaths under 1 Year. (d.)	Population estimated to middle of each year. (a.)	Births registered. (b.)	Deaths at all Ages. (c.)	Deaths under 1 Year. (d.)
1901	73,856	1626	1220	226	42,515	914	629	107	31,341	712	591	119
1902	74,018	1685	1355	244	42,615	915	736	139	31,403	770	619	105
1903	74,169	1516	1131	218	42,702	846	588	113	31,467	670	543	105
1904	74,329	1547	1222	240	42,794	817	679	144	31,535	730	543	96
1905	74,496	1585	1106	184	42,890	831	577	78	31,606	754	529	106
1906	74,672	1506	1168	211	42,992	772	591	107	31,680	734	577	104
1907	74,857	1493	1118	182	43,099	766	566	92	31,758	727	552	90
1908	75,049	1540	1104	166	43,209	803	566	97	31,840	737	538	69
1909	75,249	1400	1087	150	43,324	734	556	73	31,925	666	531	77
Averages for years 1901-1909	74,522	1544	1168	202	42,904	822	610	106	31,617	722	558	97
1910	75,457	1376	952	141	43,444	727	480	67	32,013	649	472	74

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

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

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

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

TABLE XIV.—(III.)

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE
YEAR 1910.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.							TOTAL CASES NOTIFIED IN EACH LOCALITY.		NO. OF CASES REMOVED TO HOSPITAL FROM EACH LOCALITY			
	At all Ages.	At Ages†—Years.						North Chelsea.	South Chelsea.	North Chelsea.	South Chelsea.	Chelsea.	
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.						
Small-pox
Cholera
Diphtheria (including Membranous Croup)	81	2	22	47	3	7	..	27	54	22	49	71	
Erysipelas	20	2	1	1	..	11	5	12	8	2	..	2	
Scarlet Fever	119	1	34	57	13	14	..	64	55	64	50	114	
Typhus Fever .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever	16	..	1	4	4	7	..	6	10	5	7	12	
Relapsing Fever .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Continued Fever .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Fever	2	..	..	..	..	2	..	..	2	..	2	2
Plague .. ..	..	..	..	..	..	..	..	..	..	..	..	..
TOTALS	238	5	58	109	20	41	5	109	129	93	108	201	

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

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

TABLE XV.—(iv.)
CAUSES OF, AND AGES AT, DEATH DURING THE YEAR 1910.

CAUSES OF DEATH.	DEATHS IN OR BELONGING TO WHOLE DISTRICT AT SUBJOINED AGES.						DEATHS IN OR BELONGING TO LOCALITIES (AT ALL AGES).		TOTAL DEATHS 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.	Chelsea North.		Chelsea South.
Small-pox .....	...	...	...	...	...	...	...	...	...	...
Measles	19	5	14	...	...	...	...	7	12	4
Scarlet Fever .....	...	...	...	...	...	...	...	...	...	...
Whooping-cough	12	5	7	...	...	...	...	6	6	3
Diphtheria and Membranous Croup	5	...	3	1	...	1	...	1	4	...
Croup .....	...	...	...	...	...	...	...	...	...	...
Fever { Typhus .....	...	...	...	...	...	...	...	...	...	...
{ Enteric	2	...	...	1	...	1	...	1	1	2
{ Other continued .....	..	...	...	...	...	...	...	...	...	...
Epidemic Influenza	13	...	...	...	1	5	7	5	8	...
Cholera .....	...	...	...	...	...	...	...	...	...	...
Plague .....	...	...	...	...	...	..	...	...	...	...
Diarrhœa (<i>See Notes on next page</i>)	13	10	3	...	...	...	...	6	7	18
Enteritis (<i>See Notes on next page</i>)	15	9	4	...	1	...	1	7	8	11
Gastritis (<i>See Notes on next page</i>)	3	1	...	...	...	1	1	1	2	1
Puerperal Fever (<i>See Notes on next page</i>) .....	...	...	...	...	...	...	...	...	...	...
Erysipelas	3	2	...	...	...	...	1	2	1	1
Other Septic Diseases	10	...	...	1	..	7	2	6	4	11
Phthisis (Pulmonary Tuberculosis)	89	...	...	...	5	73	11	51	38	130
Other Tubercular Diseases	20	5	6	3	3	3	...	8	12	45
Cancer, Malignant Diseases (<i>See Notes on next page</i>)	85	...	...	...	...	57	28	49	36	167
Bronchitis	125	19	13	2	2	25	64	54	71	114
Pneumonia	38	7	4	1	3	13	10	18	20	27
Pleurisy	2	...	...	...	...	2	...	...	2	2
Other Diseases of Respiratory Organs .....	...	...	...	...	...	...	...	...	...	...
Alcoholism—Cirrhosis of Liver	15	...	...	...	...	13	2	11	4	9
Venereal Diseases	5	5	...	...	...	...	...	2	3	4
Premature Birth	22	22	...	...	...	...	...	11	11	2
Diseases and Accidents of Parturition	2	...	...	...	...	2	...	...	2	1
Heart Diseases	109	...	...	6	5	49	49	51	58	74
Accidents	34	2	5	6	1	13	7	15	19	16
Suicides	10	...	...	...	...	8	2	3	7	4
Meningitis .....	...	...	...	...	...	...	...	...	...	...
Rheumatic Fever	4	...	...	1	...	2	1	3	1	2
Diabetes	5	...	...	1	1	3	...	3	2	4
All other causes	292	49	4	1	6	86	146	159	133	283
All causes	952	141	63	...	28	364	332	480	472	935

- NOTES.—(a) In this Table all deaths of "Residents" occurring in public institutions, whether within or without the district, are to be included with the other deaths in the columns for the several age groups (columns 2-8). They are, also, in columns 9-15, to be included among the deaths in their respective "Localities" according to the previous addresses of the deceased as given by the Registrars. Deaths of "Non-residents" occurring in public institutions in the district are in like manner to be excluded from columns 2-8 and 9-15 of this Table.
- (b) See notes on Table I. as to meaning of "Residents" and "Non-residents," and as to the "Public Institutions" to be taken into account for the purposes of these Tables. The "Localities" should be the same as those in Tables II. and III.
- (c) All deaths occurring in public institutions situated within the district, whether of "Residents" or of "Non-residents," are, in addition to being dealt with as in note (a), to be entered in the last column of this Table. The total number in this column should equal the figures for the year in column 9, Table I.
- (d) The total deaths in the several "Localities" in columns 9-15 of this Table should equal those for the year in the same localities in Table II., sub-columns *c*. The total deaths at all ages in column 2 of this Table should equal the gross total of columns 9-15, and the figures for the year in column 12 of Table I.
- (e) Under the heading of "Diarrhoea" are to be included deaths registered as due to Epidemic diarrhoea, Epidemic enteritis, Infective enteritis, Zymotic enteritis, Summer diarrhoea, Dysentery and Dysenteric diarrhoea, Choleraic diarrhoea, Cholera (other than Asiatic or epidemic), and Cholera Nostras.
Deaths from diarrhoea secondary to some other well-defined disease should be included under the latter.
Deaths from Enteritis, Muco-enteritis, Gastro-enteritis, and Gastritis (see under the heading Diarrhoeal diseases in Table V.) in Tables IV. and V. should be placed immediately below, but separately from, those enumerated under the heading Diarrhoea as defined by enumeration above. This is particularly important for deaths under one year of age, as many of the deaths in infancy returned as due to Enteritis are really caused by Epidemic Diarrhoea. In the course of years, by the adoption of this recommendation, it will be practicable to ascertain the probable amount of transfer between these different headings.
- (f) Under the headings of "Cancer" and "Puerperal fever" should be included all registered deaths from causes comprised within these general terms. Thus: Under "Cancer" should be included deaths from Cancer, Carcinoma, Malignant disease, Scirrhous, Epithelioma, Sarcoma, Villous tumour, and Papilloma of bladder, Rodent ulcer. Under "Puerperal Fever" are to be included deaths from Pyæmia, Septicæmia, Sepsæmia, Pelvic peritonitis, Peri- and Endo-metritis occurring in the Puerperium.
- (g) Under "Congenital Defects" in Table V., are to be included deaths from Atelectasis, Icterus neonatorum, Navel Hæmorrhage, Malformations and Congenital hydrocephalus.
- (h) Under "Tuberculous Meningitis" are to be included deaths from Acute hydrocephalus.
- (i) Under "Other Tuberculous Diseases" are to be included deaths from Tuberculosis, Tuberculosis of bones, joints and other organs, Lupus and Scrofulus.
- (j) All deaths certified by registered Medical Practitioners and all Inquest cases are to be classed as "Certified"; all other deaths are to be regarded as "Uncertified."

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

TABLE XVI.—(v.)
INFANTILE MORTALITY DURING THE YEAR 1910.

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 ONE YEAR.
Common Infectious Diseases—																	
Small-pox .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Chicken-pox .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles .....	..	..	..	..	..	..	..	..	..	..	..	..	1	1	3	..	5
Scarlet Fever .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria: Croup .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Whooping Cough .....	..	..	..	..	..	..	..	..	..	..	..	1	..	2	1	1	5
Diarrhoeal Diseases—																	
Diarrhoea, all forms .....	..	..	..	1	1	..	1	2	1	3	..	1	..	..	..	1	10
Enteritis, Muco- and } Gastro-enteritis .....	..	..	..	..	..	..	1	..	3	1	2	..	..	1	..	..	8
Gastritis, Gastro-Intestinal } Catarrh .....	..	..	..	..	..	1	..	..	..	..	..	..	1	..	..	..	2
Wasting Diseases—																	
Premature Birth	17	4	2	..	23	..	..	..	..	..	..	..	..	..	..	..	23
Congenital Defects	5	..	..	..	5	1	1	1	1	..	..	..	1	..	..	..	10
Injury at Birth .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Want of Breast-milk, } Starvation	4	1	2	..	7	..	..	1	..	1	..	..	..	..	..	..	9
Atrophy, Debility, } Marasmus	1	2	..	..	3	2	2	4	..	..	..	1	..	..	..	..	12
Tuberculous Diseases—																	
Tuberculous Meningitis .....	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1
Tuberculous Peritonitis: } Tabes Mesenterica .....	..	..	..	..	..	1	..	..	..	..	..	..	..	1	..	..	2
Other Tuberculous Diseases .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas .....	..	..	..	1	1	1	..	..	..	..	..	..	..	..	..	..	2
Syphilis .....	..	..	2	..	2	..	..	2	..	1	..	..	..	..	..	..	5
Ricketts .....	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1
Meningitis (<i>not Tuberculous</i>)	1	..	..	..	1	..	..	..	1	..	..	1	1	..	..	..	4
Convulsions .....	..	2	..	..	2	2	..	..	..	1	..	..	..	..	1	1	7
Bronchitis	1	1	..	1	3	3	..	..	..	2	5	2	1	..	..	3	19
Laryngitis .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pneumonia	1	..	..	1	2	..	1	..	..	..	2	..	1	..	..	..	7
Suffocation, overlaying .....	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
Other Causes	4	..	..	..	4	..	..	..	..	2	1	..	1	..	..	..	8
All Causes	34	10	6	4	54	11	7	10	6	13	10	6	8	5	5	6	141

Births in the year, legitimate .. 1,296
 " " illegitimate .. 80
 Deaths from all Causes at all Ages 952
 Population, estimated to middle
 of 1910 75,457

Deaths in the year of legitimate
 Infants .. 133
 Deaths in the year of illegitimate
 Infants .. 8

Section II.

INFECTIOUS DISEASES.

Small-Pox.—There were no cases of small-pox in Chelsea in 1910. In London, during the year 1910, 7 cases of the disease were notified, as compared with 23 in 1909, 4 in 1908, 9 in 1907, 31 in 1906, 74 in 1905, and 492 in 1904.

Scarlet Fever.—In 1910, 119 cases of scarlet fever were notified in Chelsea, equivalent to a case-rate of 15·8 per 10,000 of the population, as against 40·7 in 1909. The number of cases notified in the first quarter of the year was 31, in the second quarter 38, in the third quarter 23, and in the fourth quarter 27. The largest number of cases occurring in any one month was 21 in April, and the lowest 5 in June. There was no special school incidence in respect of scarlet fever. In North Chelsea 64 cases were notified during the year, and in South Chelsea 55 cases. The percentage of cases of school age (3 to 13 years) of the total number in the Borough was 66·4, as compared with 68 in 1909. The average duration of the stay in hospital of 109 cases, of which the records are to hand, was 66·8 days, as against 59·5 in 1909.

Fourteen cases admitted to the M.A.B. hospitals were subsequently certified by the Medical Superintendents of those institutions not to be suffering from scarlet fever or any other notifiable disease. The average duration of the stay in hospital of 10 of these cases was 22·8 days, as against 21 days in 1909. Six cases on discharge from M.A.B. hospitals were stated to be still suffering from otorrhœa or rhinorrhœa, as against 5 in 1909. So far as is known, none of these cases were the means of spreading infection after return to their homes. During the year there were 3 instances of possible "return" cases of scarlet fever, the intervals elapsing between the return home from hospital of the infecting case and the onset of the disease in the secondary case being respectively, one case 8 days, 2 cases 6 days.

Diphtheria.—In 1910, 81 cases of diphtheria (including 3 of membranous croup) were notified in Chelsea, equivalent to a case-rate of 10·7 per 10,000 of population, as compared with 12·9 in 1909. In the first quarter of the year 10 cases were notified, in the second quarter 13, in the third quarter 22, and in the fourth quarter 36. The percentage of cases of school ages (3 to 13 years) of the total number in the Borough was 72·8, as against 68 in 1909. In North Chelsea 27 cases were notified, and in South Chelsea 54. The months of most prevalence were October and November—16 cases in each month. In December the number fell to 4.

The average duration of stay in hospital of 55 cases, of which the records are to hand, was 60 days, as against 55 in 1909. Four cases admitted during the year to the M.A.B. hospitals were subsequently certified by the Medical Superintendents of those institutions not to be suffering from diphtheria or any other notifiable disease, the corresponding

number in 1909 being 6. The average duration of the stay in hospital of these 4 cases was 27 days, as against 17 in 1909. One case of diphtheria on discharge from hospital was stated to be still suffering from rhinorrhœa, but free from diphtheria bacilli.

During the year medical practitioners sent 122 throat swabbings to the Lister Institute for bacterioscopic diagnosis, and 9 were sent from this department by myself, the cost being defrayed by the Borough Council. Seventy-two of the swabs (55 per cent. of the total) were sent by the medical staff of the Victoria Hospital in respect of Chelsea children. Of the total of 131 swabbings, 37, or 29·6 per cent., afforded positive evidence of the presence of the specific diphtheria bacillus, and 88, or 70·4 per cent., gave negative evidence. Ten of the "negative" swabbings showed the presence of Hoffman's pseudo-diphtheria bacillus.

Bacterioscopic examination is coming more largely into use for the diagnosis and prevention of diphtheria. In 1905, the first year that arrangements were made with the Lister Institute for free bacterioscopic examinations, 12 swabbings were sent, in 1906 60, in 1907 90, in 1908 60, in 1909 93, and in 1910 131. It is especially in dealing with school outbreaks of diphtheria that bacterioscopic examinations of throat swabbings find their most useful application (see *infra*).

The Diphtheria Antitoxin (London) Order of the Local Government Board, 1910.—This order was issued in August last, and sanctions the provision by a London Borough Council in pursuance of Section 77 of the Public Health (London) Act, 1891, of a temporary supply of diphtheria antitoxin, and of medical assistance in connection therewith, for the poorer inhabitants of their Borough.

This order was considered by the Public Health Committee, but no action was taken upon it, as there is no demand amongst medical practitioners in the Borough for antitoxin for their poorer patients, the cases of diphtheria being at once removed to hospital as soon as a diagnosis is made. As regards the use of antitoxin for prophylactic purposes, this appears to be unnecessary in the ordinary sporadic cases occurring in households, and is only exceptionally advisable under special circumstances in schools and institutions. The dangers of *anaphylaxis* have to be taken into account when antitoxin is used for prophylactic purposes, symptoms of cyanosis, dyspnoea, and collapse occasionally supervening when a second dose of antitoxin is given to an individual who had received a first dose more than 10 days before; so that, until the dangers of this condition are more fully ascertained, it would appear to be undesirable to inject antitoxin for prophylactic purposes, unless for very special reasons.

School Outbreaks of Diphtheria.—Special school incidence of diphtheria was shown in respect of the Infants' Department of the Christchurch School, and the Girls' Department of Holy Trinity School.

Christchurch School.—Seven cases of diphtheria were notified amongst children attending the Infants' Department of this school between the 28th September and the 5th November. On the 30th September, children found to be suffering from sore throat or nasal discharge were excluded from school; and on the 14th October, the throats of some of the children attending school were "swabbed" for bacteriological examination. One "carrier" case was found in the

person of a boy aged 6 years. This boy remained at home until the 24th October, when swabs of both throat and nose proving "positive," he was notified and removed to hospital. The throat of a brother of this "carrier" was examined with negative results, but the Hoffman pseudo-diphtheria bacillus was present. This brother continued to attend the Boys' School until the "carrier" was notified. Although this "carrier" did not infect his brother, he was the means of infecting a little boy, aged 4 years, who lived on the opposite side of the street, and with whom he played when out-of-doors. The little boy of 4 years did not attend any school.

In connection with this outbreak there was also another "carrier" case, who was the means of infecting a child living in the same house, although her own family escaped. This "carrier" was a girl of 5 years, who was excluded from school on the 14th October on account of symptoms of "cold," no bacteriological examination at that time being made. On the 1st November, a little boy of 2 years living in the same house as that occupied by the "carrier," with whom he was in the habit of playing, was notified as suffering from diphtheria. A swab of the nose of the "carrier" case was then taken, and, on proving positive, the "carrier" was notified and removed to hospital. A swab taken at the time of the brother of the "carrier" proved negative.

In October, 1909, six cases of diphtheria had occurred in the Infants' Department of the Christchurch School, and the attention of the Managers of the school was then called to the defective ventilation of the class-rooms. In one class-room, of the entire wall-window area only one quarter could be opened, whereas the proportion should be at least one-half, the result being that in warm weather the school was very stuffy from insufficient supply of air, whilst at all times of the year it was difficult to flush the room with fresh air, as should be done when the children are out of school. My report, with specific recommendations for the improvement of the ventilation, appears to have been forwarded in October or November, 1909, to the Education Department of the London County Council, but no further action was taken. On the recurrence of diphtheria in the school in October, 1910, I again called the attention of the Managers to the defective conditions still existing, and I am pleased to record that the matter was promptly taken in hand and new ventilators inserted as suggested, so that at the present time the proper ventilation of the class-rooms can be maintained.

Holy Trinity School.—Four cases of diphtheria were notified amongst girls attending the Girls' Department between the 14th and 21st October. The usual steps were taken to exclude children presenting suspicious symptoms, with the result that there was no extension of the disease. The utility of the London County Council's regulation requiring that children who have been excluded from school on account of sore throat, or have been absent from school for similar illness, should not be allowed to return to school, when diphtheria has shown its presence in the school, until a negative result has been obtained by bacteriological examination, is exemplified in the following instance:—A little girl of 10 years ceased attending school on the 27th October, owing to a sore throat. She was attended by a doctor, and on the 11th November had apparently recovered sufficiently to return to school; but a bacteriological examination then made showed that the diphtheria bacillus was present in

the throat secretions. There can be little doubt that this was a mild case of diphtheria. It is interesting to note that although this girl was kept at home, she did not infect her brother, who was attending the Boys' Department of the same school, nor did he act as a "carrier," as no cases occurred in the Boys' Department.

Enteric Fever.—The number of cases of enteric fever notified in Chelsea in 1910 was 16, as against 12 in 1909, the case-rate being 2.1 per 10,000 of the population. Twelve cases were notified in the first quarter of the year, one in the second, two in the third, and one in the fourth quarter. In North Chelsea 6 cases were notified, and in South Chelsea 10 cases. Two cases ended fatally. The average duration of the stay in hospital of 6 cases, of which the records are to hand, was 70 days, the corresponding figure for 1909 being 85 days.

Of the 16 cases, in 4 the infection was in all probability contracted outside the Borough of Chelsea. There would appear, therefore, to have been 12 cases in 1910, which can be regarded as having contracted the disease in Chelsea, as against 8 in 1909, 12 in 1908, and 16 in 1907. One blood specimen was sent during the year to the Lister Institute for the Widal reaction, the result being positive. In only one case was any history obtained of oysters having been the probable source of infection.

Three members of one family living in Foundry-place successively suffered from enteric fever. The first case was that of a boy of 11 years, who was taken ill on the 23rd January; but the illness was not diagnosed as enteric fever until the 8th February, when a Widal blood reaction had been obtained. His mother, who attended on the lad until he was removed to hospital, was taken ill on the 12th February, and removed to hospital on the 23rd; whilst later in the month a sister of 9 years was taken ill, and removed to hospital on the 3rd March. These occurrences illustrate the great tendency there is for enteric fever to spread in the homes of the working classes, if, as often happens, an early diagnosis of the disease is not made.

Amongst the cases of enteric fever in the early part of the year were three boys, two of 11 years and one of 10 years, all living at different addresses, attending different schools, and unknown to each other. The first case was notified on the 16th January, the second on the 8th February, and the third on the 9th February, but the dates of onset appear to have been, respectively, the 7th, 23rd, and 28th January. There was some suspicion at the time of these boys having become infected by eating food of some sort obtained from street barrows, but it was not possible to obtain any definite clue.

During the year specimens of fæces and urine have been sent to Dr. Ledingham, of the Lister Institute, in respect of 5 patients who had been treated for enteric fever in the M.A.B. hospitals. The specimens were sent at six monthly intervals, commencing one month after discharge from hospital, and in every case the result of bacteriological examination showed the absence of the *Bacillus Typhosus*. The cases were as follows :—

TABLE XVII.

No.	Sex.	Age.	Stay in Hospital.	Result of Examinations.
1	Male	11 years	54 days	Negative
2	Male	11 years	68 days	Negative
3	Female	46 years	106 days	Negative
4	Female	9 years	99 days	Negative
5	Male	20 years	55 days	Negative

Cases Nos. 2, 3, and 4 were a mother and her two children.

In respect of the other cases of enteric fever notified during the year, no specimens were taken for one or other of the following reasons:— (1) On discharge from M.A.B. hospital the patient did not return to Chelsea; (2) Case ended fatally in hospital; (3) Case not treated in M.A.B. hospital.

Removals to Hospitals.—Table XVIII. exhibits the removals of patients suffering from scarlet fever, diphtheria, and enteric fever, to the M.A.B. and other hospitals, in each of the 21 years, 1890—1910, expressed as percentages of the total number of cases of each disease notified.

TABLE XVIII.—Cases removed to Hospital per cent. of Total.

	Scarlet Fever.	Diphtheria.	Enteric Fever.
1890	38	20	29
1891	40	15	22
1892	48	27	32
1893	50	41	38
1894	71	58	63
1895	55	62	51
1896	61	56	56
1897	76	67	54
1898	74	74	54
1899	77	76	69
1900	81	80	71
1901	78	63	72
1902	90	83	67
1903	91	88	62
1904	86	80	77
1905	92	87	94
1906	90	88	65
1907	91	91	81
1908	95	91	71
1909	94	89	87
1910	96	88	75

Case Mortality.—The following Table shows the case mortality, or percentage of deaths to notifications of scarlet fever, diphtheria (including membranous croup), and enteric fever, in Chelsea and in London, in each of the 21 years, 1890—1910:—

TABLE XIX.—*Case Mortality in Chelsea, and in London, 1890-1910.*

	Scarlet Fever.		Diphtheria and Membranous Croup.		Enteric Fever.	
	Chelsea.	London.	Chelsea.	London.	Chelsea.	London.
1890	7.0	5.7	17.6	24.1	17.4	23.0
1891	3.6	5.1	15.4	22.5	17.4	15.6
1892	5.3	4.3	22.9	23.9	13.6	17.2
1893	5.3	4.3	23.4	24.5	22.1	18.4
1894	5.1	5.2	21.7	23.6	14.7	18.1
1895	4.0	4.2	18.7	20.4	18.4	17.0
1896	4.9	3.7	22.9	19.3	14.7	17.7
1897	3.5	3.4	17.9	17.1	26.4	18.8
1898	4.2	3.4	15.1	14.8	25.0	19.3
1899	2.8	2.2	10.6	14.2	28.1	18.0
1900	3.0	2.6	9.9	12.8	24.4	17.5
1901	2.6	3.2	8.5	11.1	12.8	16.8
1902	4.0	3.1	10.0	11.0	16.6	16.3
1903	1.0	2.9	4.0	9.7	31.0	16.6
1904	5.6	2.7	8.2	10.1	15.4	15.6
1905	4.0	2.8	9.6	8.5	18.8	15.7
1906	3.3	2.6	10.0	8.8	0.0	16.9
1907	0.9	2.5	5.1	9.1	14.3	14.5
1908	4.0	2.5	9.4	9.2	29.4	18.1
1909	2.3	2.2	14.4	9.1	16.7	14.2
1910	0		6.2		12.5	

Cerebro-spinal Fever.—No cases of this disease were notified in Chelsea in 1910. In London, during the year 1910, 115 cases were notified, as against 110 in 1909. Ten deaths were registered as due to this disease during the year, the case-mortality being 8.7 per cent., as compared with 13.6 per cent. in 1909.

Puerperal Fever.—Two cases of this disease were notified in Chelsea in 1910, the same number as in 1909. No deaths were registered as due to this disease.

Measles.—By orders of the Medical Officer (Education, L.C.C.), all the unprotected children under the age of 5 years in certain class-rooms of certain schools were excluded from school, owing to the prevalence of measles, for certain periods stated below:—

TABLE XX.

School.	Department.	Class Room.	Period of Exclusion.
Park Walk ...	Infants		18th—19th May
" " ...	"		30th May—10th June
Marlboro'-road ...	"	A & D	7th—25th Nov.
" " ...	"	I	7th—11th Nov.
" " ...	"	I	1st—9th Dec.
Cook's Ground ...	"	E	7th—11th Nov.
Holy Trinity ...	"		5th—23rd Dec.

NOTIFICATIONS OF PHTHISIS

During the year 1910, 4 cases of phthisis were voluntarily notified by private medical practitioners, 16 cases were notified from the Brompton Hospital for Consumption, 1 from St. George's Hospital, and 7 cases of tuberculosis in children by the London County Council (Medical Officer for Education).

The following Table shows the number of notifications received under the Public Health (Tuberculosis) Regulations, 1908 :—

Form A.—First notifications by M.O., C.W.I.	...	...	96
„ Re-notifications „ „	...	...	75
„ Notifications by M.O.'s, outside Infirmaries	...	...	12
Form B.—First notifications by District M.O.'s	...	...	39
„ Re-notifications „ „	...	...	5
Form C.—Notifications by Master, C.W.	...	..	75
„ Notifications by Masters, outside Workhouses	...	...	12
			314
			314

There has been a very considerable falling-off in numbers of notifications under the Poor Law Regulations in 1910, as compared with 1909, when the first notifications by the M.O., C.W.I., amounted to 226, and the notifications by District M.O.'s amounted to 73.

The total number of new cases notified in 1910 was 118, comprising 78 males and 40 females. Of the new Poor Law patients in 1910, 9 only were notified once, the majority of the remainder being notified twice. A few were notified more than twice. In 13 cases the patients changed their addresses during the year, and in 3 cases the address was changed twice.

The total number of cases visited for the first time during the year was 96; 70 revisits and 60 miscellaneous visits were made—the total of visits in respect of phthisis cases during the year being 236. No visits are paid in respect of the men who go in and out of the Chelsea Infirmary from the Common Lodging Houses and Casual Wards. The number of Common Lodging House cases was 18. So far as known, no cases of notified phthisis were admitted to Sanatoria or Convalescent Homes during the year, but hospital letters were given to 5 cases, and pocket spittoons to 17. Disinfectants and soap were given, where required; and the leaflet of advice is given in all cases.

The 7 cases reported by the Medical Officer for Education, L.C.C., were children attending school suspected to be suffering from tubercle of the lung. In the course of visiting these cases, 5 others were discovered. All these cases were referred to the Chelsea Branch of the Invalid Children's Aid Association, who sent them away for Sanatorium or Convalescent Home treatment. Two of the children are now reported to be quite cured, and the others are so much improved as to be able to

return to school. The adult patients are more difficult to deal with on these lines, as in most cases the disease is too far advanced to be arrested; but even in these cases an effort is made to keep in touch with the patients, and to see that the advice given is being carried out as far as circumstances permit.

THE ANTI-TUBERCULOSIS CAMPAIGN.

It is evident that if any great advance is to be made in the reduction of tuberculosis in London it will be necessary to introduce a system by which patients will be induced to present themselves for treatment in the initial stages of the disease, and which will readily lend itself to the detection of "contacts" in the homes of the people. Such a system is that of the Anti-Tuberculosis Dispensary, which has for so many years been established in Edinburgh with the most gratifying results, and which has now been inaugurated in Paddington and in St. Marylebone. It also seems probable that with advancing knowledge of its proper administration and its necessary limitations, the tuberculin treatment of tuberculosis will do much to arrest the disease in suitable cases; and, as this method of treatment can be carried on while the patient is living at home, and indeed in most cases doing his usual work, it would appear to be especially adapted to the needs of the working classes. This system has been carried on for nearly a year at the Tuberculin Dispensary, 263, Kennington Road, S.E., under the personal charge and direction of Dr. Camac Wilkinson, and appears to have proved of immense benefit to many of the patients treated.

Where treatment, and especially successful treatment of tuberculosis is offered to the working classes free of cost, experience shows that the disinclination to seek medical advice on the part of the working people, now so commonly encountered, is no longer a hindrance. By means of visits to the homes of the patients who present themselves for treatment, undiscovered cases, many of which are in an early stage, may be found; and thus prompt measures may be taken to arrest the malady in the actually affected, and to prevent its spread to the healthy, which no other system of dealing with tuberculosis affords in anything like the same degree.

The Anti-Tuberculosis and Tuberculin Dispensaries already established in London are maintained by charitable contributions, but having regard to the benefit to the public health that may be expected to ensue from their operations, it is a question whether this is not a work which should be undertaken by municipal effort and paid for out of the municipal funds. It seems certain that if anti-tuberculosis dispensaries are to be founded and maintained by voluntary effort alone, they will be established only in the wealthier parts of London, and that those districts which are the poorest and have the highest prevalence of tuberculosis in their midst, will, from want of funds, be unable to avail themselves of the latest developments in science and administration that are possessed by their richer neighbours.

The opinion is now gaining ground that the anti-tuberculosis dispensary system is better adapted to the social needs and economic necessities of the working classes than the provision of open-air sanatoria on a large scale. The cost of the latter is prohibitive on any extensive scale as a means of combatting tuberculosis; and the depriva-

tion of wages when in residence in a sanatorium is the greatest obstacle to their usefulness to the bulk of the working classes. There is no doubt that the system which provides for the detection of early cases, which enables a man to continue his work during his treatment, because his case has not progressed too far, and which supervises his home arrangements during his treatment, is the one best adapted at least expense to discover the sources and origins of tuberculosis in the daily lives of the people. For this reason such a system presents the most favourable prospects for establishing such an amount of control over the disease in its various manifestations, as may in future lead to its practical disappearance as a cause of illness, suffering, and death.

As regards the powers of Metropolitan Borough Councils to establish and maintain anti-tuberculosis dispensaries, the Local Government Board in a letter to the Town Clerk of Bermondsey, dated 15th December, 1910, states that "the Board are advised that the provisions of Section 75 of the Public Health (London) Act, 1891, would empower a sanitary authority (Borough Council) to provide an out-patient hospital or dispensary at which any inhabitant of the district suffering from tuberculosis would be received for medical treatment and advice." Section 75 of the Act also enables two or more sanitary authorities to combine in providing such an out-patient hospital or dispensary.

Section III.

HOUSING OF THE WORKING CLASSES.

SIR THOMAS MORE BUILDINGS.

For the year ended 31st March, 1910, the deficit on the year's working was £214 as compared with £270 12s. for the previous year. The empties and bad debts amounted to £18 3s., or 0·38 per cent. of the gross rental (less Superintendent and Porter's Rooms), as against 0·26 per cent. in the previous year. The general charges amounted to £1,649 6s., or 35·2 per cent. of the gross rental (less rooms of staff), the same percentage as in the previous year. The general charges for the year included a sum of £55 granted as a gratuity to Porter Marlow on leaving the Council's service for illness, and a sum of £22 for the erection of circular garden seats in one of the courtyards.

The buildings have been fully occupied during the year. During the year 1910 fifty-four tenants voluntarily terminated their tenancies, as against thirty-nine in 1909, and four were given notice to quit. During the year all the external wood and ironwork of the buildings was repainted by Messrs. B. E. Nightingale for the sum of £184; and forty-six tenements, which had not been cleansed during the preceding three years, were distempered at a cost of £77 7s. 3d.

In April, 1910, it was found necessary to terminate the appointment of Mr. A. J. Cottrell, the Superintendent, on account of continued ill-health, and Mr. H. Sedgwick was appointed on the 11th May to the vacant post.

Vital Statistics.—During 1910, twenty-five births (14 boys and 11 girls) were registered as occurring in the Buildings, which is equivalent to a birth-rate of 30·4 per 1,000, the birth-rate of the Borough being 18·3. Six deaths of residents in the Buildings occurred during the year, equivalent to a death-rate of 7·3 per 1,000, the death-rate of the Borough being 12·7.

Deaths at Sir Thomas More Buildings in 1910.

Age.	Sex.	Occupation.	Disease.
39 years	F.	W. of Stableman ...	Parturition; Pleurisy; Acute Nephritis.
5 "	M.	S. of L.C.C. Messenger	Accidental, run over by motor 'bus.
38 "	M.	Furniture Salesman ...	Urethral Stricture; Urethrotomy.
13 days	F.	D. of Clerk ...	Inanition.
9 years	M.	S. of Baker ...	Compound Fracture of Thigh, Accidental.
6 days	M.	S. of Fitter ...	Pneumonia (inquest).

Four cases of scarlet fever and three cases of diphtheria were notified in the Buildings during the year.

POND HOUSE.

For the year ended 31st March, 1910, the deficit on the year's working was £37 10s. 7d., as compared with £57 16s. 0d., for the previous year. The empties amounted to £1 19s. 6d., or 0·27 per cent. of the gross rental (less porter's rooms), the same percentage as in the previous year. The general charges amounted to £205 9s. 2d., or 27·5 per cent. of the gross rental (less porter's rooms), as against 28·5 per cent. in the previous year.

During the year Pond House was fully occupied. Five tenants voluntarily terminated their tenancies, and one was given notice to quit. Two births (one boy and one girl) were registered during the year. There was no death. One case of diphtheria was notified during the year, but no other infectious notifiable disease.

During the year external painting and other repairs were carried out by Messrs. Nightingale, at a cost of £62, and 20 tenements were distempered at a cost of £40 10s. 0d.

ONSLow DWELLINGS.

For the year ended 31st March, 1910, the surplus on the year's working was £97 6s. 7d., as compared with £47 for the previous year. The empties amounted to £2 18s. 6d., or 0·2 per cent. of the gross rental, as compared with 0·14 per cent. in the previous year. The general charges amounted to £505 15s. 0d., or 34·2 per cent. of the gross rental as compared with 36 per cent. in the previous year.

The Dwellings have been fully occupied during the year; nine tenants only voluntarily terminated their tenancies. External painting and other necessary repairs were carried out during the year by Messrs. Nightingale, at a cost of £136.

Vital Statistics.—During the year, 8 births (7 boys and 1 girl) were registered in the Dwellings, equivalent to a birth-rate of 23 per 1,000. Only one death was registered during the year:—Female, 62 years; wife of Museum labourer; Cause of death—Heart disease: bronchitis. No cases of notifiable infectious disease occurred in the Dwellings in 1910.

GROVE BUILDINGS.

These Buildings were completed in the spring of 1910, and were opened for occupation at the end of March. Owing to the damp condition of the rooms of the two highest floors, some time was allowed to elapse before the tenements on these two floors were let; and the Buildings were not fully occupied until June. The tenements were all taken up by residents in Chelsea of the class for whom the Buildings were designed. The average earning capacity of the occupants of the one-room tenements was about 14s. per week, and of the occupants of the two-room tenements about £1 1s. 6d. per week. The total number of people accommodated is 268, of whom 210 are over and 58 under 10 years of age. Twenty-one tenants have voluntarily terminated their tenancies since the Buildings were opened, and four have been given notice to quit. The total capital expenditure on the Buildings has been £15,542, and the cost of building per room would appear to be about £75, as compared with £89 per room for Sir Thomas More Buildings, and £93 10s. per room for Pond House.

During the nine months of occupation, 13 births (6 boys and 7 girls) were registered, equivalent to a birth-rate for the year of 66 per 1,000, and one death occurred, that of an Army pensioner, aged 73 years, from old age. One case of scarlet fever and one case of diphtheria were notified in the Buildings during the year.

The following Table shows the population of the Council's Dwellings, including the staff and their families :—

	Over 10 Years.	Under 10 Years.	Total.
Sir Thomas More Buildings ...	609 (74 %)	214 (26 %)	823
Pond House ...	82 (77 %)	24 (23 %)	106
Onslow Dwellings ...	282 (81 %)	67 (19 %)	349
Grove Buildings ...	210 (78 %)	58 (22 %)	268
	<u>1,183 (77 %)</u>	<u>363 (23 %)</u>	<u>1,546</u>

HOUSING AND TOWN PLANNING ACT, 1909, AND HOUSING OF THE WORKING CLASSES ACT, 1890.

During the year 1910 proceedings were taken under the above Acts for the closing of 10 houses in Ives-street and 4 houses in Little Blenheim-street.

On the 10th March, 1910, the following report was presented to the Public Health Committee :—

Housing and Town Planning Act, 1909.
Housing of the Working Classes Act, 1890.

Ives-street, Chelsea.

Nos. 2, 4, 6, 8, 10, 12, 14, 16, 18, 20.

I made an inspection of these 10 houses on the 8th and 9th March, 1910. Each house contains two rooms—one upstairs and one on the ground floor, in four of the houses the staircases leading directly from the lower to the upper room (No. 2, 4, 6, 8). The rooms are very small and low—the dimensions being approximately as follows :—

Ground floor room—11 ft. 6 in. by 9 ft. 9 in. by 7 ft. 6 in. high = 841 c. ft.

First floor room — 11 ft. 6 in. by 9 ft. 9 in. by 7 ft. high = 785 c. ft.

A door opens from the ground floor room into a small back yard in which is situate the W.C., and in some cases a small wash-house. All these 10 houses are dilapidated and thoroughly worn out, the woodwork and plastering being in a rotten and decayed condition, and broken away in many places. The floors of the ground floor rooms are below the level of the adjoining street, and the joists rest directly on the ground. The walls are very decayed and in some cases bulging, and there is evidence of damp in the walls of the rooms above the match-boarding. The upstairs rooms have only one window, and no through light or ventilation, but in some of the houses there is a small window at the top of the staircase. Many of the roofs are defective and difficult to keep in repair, with the result that wet continually finds an entrance into the upper room. Most of the houses are infested with vermin, and owing to the general decay it would be impossible to keep the houses free from vermin. The houses are now occupied, but for the most part the tenants have only been in occupation a short time, having moved in from other streets in the neighbourhood where demolitions are in progress. With the exception of Nos. 10, 14, 16 and 20, the houses are in a very dirty and neglected condition, as well as being in an extreme state of dilapidation.

I am of opinion that Nos. 2, 4, 6, 8, 10, 12, 14, 16, 18 and 20, Ives-street, are dwelling-houses in a state so dangerous or injurious to health as to be unfit for human habitation, and I recommend that the necessary orders be made under section 17 of the Housing, Town Planning, etc., Act, 1909, and the Housing of the Working Classes Act, 1890, prohibiting the use of the dwelling-houses for habitation until, in the judgment of the local authority, the dwelling-houses are rendered fit for that purpose.

LOUIS C. PARKES, M.D., D.P.H.,

Medical Officer of Health.

10th March, 1910.

On the 16th March, the Borough Council made closing orders, prohibiting the use of the houses for human habitation, until in the judgment of the Council the houses were rendered fit for that purpose. On the 20th April, the closing orders were duly served on the owners of the houses; but the owners had already taken steps to terminate the tenancies, and the houses were promptly emptied.

On the 3rd November, the closing orders having remained operative for a period of three months, the Public Health Committee took into consideration the question of the demolition of the houses; but as, at that time, the owners were proceeding to demolish the houses, the matter was adjourned. The demolitions were completed by the middle of November.

On the 20th October, the following report was presented to the Public Health Committee:—

Housing and Town Planning Act, etc., Act, 1909.

Nos. 1, 2, 6 and 7, Little Blenheim-street.

On the 5th October, 1910, I made an inspection of these premises under the provisions of the Housing and Town Planning Act, 1909, and the Regulations of the Local Government Board, and have to report as follows:—

The houses are two-roomed, one room on the ground floor and one room on the first floor, without back yards, and without through light or ventilation, except for a very small window about 12 inches square in the back wall of the staircase or of the upper room. The houses are worn-out and dilapidated, with very defective woodwork and plastering, and are generally in a dirty and insanitary condition, the floors of the ground floor rooms being level with or below the surface of the adjoining courtyard, and resting directly on the ground. The rooms vary in height from 6 ft. 6 in. to 7 ft., or a little over. The w.c.'s and water-taps are in the front courtyard.

Nos. 3, 4, 5 and 8, Little Blenheim-street, have been closed by the owner, and I believe there is no intention to re-let them.

In my opinion, Nos. 1, 2, 6 and 7, Little Blenheim-street, are in a state so dangerous or injurious to health as to be unfit for human habitation, and I have to recommend that orders be made under Section 17, sub-section 2, of the Housing and Town Planning Act, 1909, prohibiting the use of the dwelling-houses for human habitation.

LOUIS C. PARKES, M.D., D.P.H.,

11th October, 1910.

Medical Officer of Health.

On the 26th October, 1910, the Borough Council made closing orders prohibiting the use of the houses for human habitation, until, in the judgment of the Council, the houses are rendered fit for that purpose.

The closing orders were served upon the owners, and the houses were emptied of the tenants by the middle of November.

Consequent upon the receipt of the Regulations of the Local Government Board under Section 17 (1) of the Housing and Town Planning Act, 1909 (2nd Sept., 1910), a list of 22 streets and courts in the Borough containing dwelling-houses, the early inspection of which is, in the opinion of the Medical Officer of Health, desirable, with a view to ascertain whether any dwelling-house therein is in a state so dangerous or injurious to health as to be unfit for human habitation, was presented to the Borough Council on the 28th September. Of the dwelling-houses comprised in the 22 streets and courts, the majority are old property, the houses being the oldest and most worn-out of any in the Borough.

During the fourth quarter of the year, 16 of these streets and courts were made the subject of inspection, the total number of dwelling-houses comprised therein being 175. As a result of these inspections, sanitary defects of one or another kind were found to exist in 92 of the houses, and notices requiring the remedying of the defects found were served upon the owners. Four of the houses (Little Blenheim-street) were closed under the provisions of the Act (see *ante*).

Forty-one of the houses were inspected by myself, with the Chief Sanitary Inspector, these houses being in the World's End area, where there are a number of courts and passages adjacent to World's End-passage. The houses are old and decayed, and some of them are defective in respect of light and ventilation; but being small, they are for the most part inhabited by the class of tenants who like to occupy a cottage by themselves, and, on the whole, the houses were found to be kept fairly clean and tidy. Although old and showing signs of age and decay, this class of property is in some respects superior to the more modern tenement houses, which are occupied by numerous families, as the possession of a house to themselves seems generally conducive to a desire on the part of the tenants to make the best of the houses they live in; and the gross neglect and sloth of many of the tenement house occupiers is not much in evidence in this class of property.

HOUSES DEMOLISHED OR VACATED FOR DEMOLITION
DURING THE YEAR 1910.

	HOUSES.
Buck's-place	1
Church-street	2
Draycott-avenue	1
Eatley-buildings	6
Harriet-mews	1
King's-road	19
Keppel-street	20
Little Blenheim-street	7
Little Cadogan-place	1
Norman-street	1
Pavilion-road	1
Riley-street	2
Sloane-street	2
The Vale	2
Wellington-street	10
	—
	76
	—

Taking the number of persons per house as six, 456 persons have been displaced during 1910 as the result of actual or intended demolitions.

Section IV.

THE SANITARY CONDITION OF THE BOROUGH.

The tabular statements prepared by the Sanitary Inspectors show that 1,320 separate premises were reported on by them during 1910, 247 of this number being with reference to cases of notifiable infectious disease, and 553 in the course of house-to-house inspections made in certain of the poorer streets of the Borough.

It has been necessary to take legal proceedings for breach of the Public Health (London) Act, in respect of one house only.

Drainage.—During the year 19 transferences were made to the Surveyor's Department, in accordance with the Council's resolution of the 15th April, 1908, of premises where re-drainage works were required. During the year, systems of combined drainage, for which the Borough Council was responsible, were carried out in respect of four premises at a cost of £28 9s. 3d., and in respect of two premises at a cost of £18. From 1896 to 1910 inclusive, the sum of £611 10s. 0d. has been expended from the rates on the combined drainage of private property, equivalent to an average annual outlay of £40 15s. 0d.

Inspection of Restaurant Kitchens, 1910.

Number of restaurant and hotel kitchens	...	...	64
„ inspections made	...	...	70
„ premises found satisfactory	...	...	43
„ premises with sanitary defects	...	...	21
„ notices served	...	...	21

Bakehouses.

Number of bakehouses	...	...	33
„ inspections	...	...	74
„ notices served	...	...	14

Disinfection.—During the past year, 307 premises have been disinfected after cases of infectious or other disease, 83 of these being rooms which had been in occupation by persons suffering from phthisis ending fatally. In addition, 217 rooms were disinfected for the presence of bugs and other vermin, and were subsequently stripped and cleansed by the owners of the property.

At the disinfecting station 1,964 separate articles of bedding or clothing were disinfected, and 1,136 beds, mattresses, &c., were destroyed in the incinerator. The animals destroyed in the incinerator amounted to 1,724, practically the whole of these being dead cats received from Our Dumb Friends' League in Bywater-street.

There has been during the past year almost a complete absence of any demand by the Education Authority for the cleansing of the persons or disinfection of the clothing of elementary school children, nor have any similar requests been received from inmates of common lodging houses in the Borough.

Smoke Nuisance.—The working of the Generating Station, Lots-road, for the supply of electric current to the Underground Electric Railways of London, has continued to be satisfactory during the year, so far as the emission of smoke is concerned, very few complaints having been received.

Basement Workrooms.—During the year 11 new basement workrooms have come into occupation, and 17 were closed, there being at the end of the year 52 basement workrooms in the Borough, with accommodation for about 400 workers.

The sanitary conditions of these basement workrooms are by no means satisfactory in respect of lighting, warming, ventilation, and in some cases aerial disconnection from water closets. As stated in my Annual Reports for 1904-1909, I am of opinion that regulations should be made by the Secretary of State for the Home Department, prohibiting the use of underground rooms for workshops unless they complied with certain conditions. If such regulations were in force, architects in designing new buildings for use as shops on the ground floor and residential flats or sets of chambers on the upper floors, would cause the underground rooms to conform with the regulations, so that the shops and basements might be let at the full rental value.

I would suggest that the regulations to be framed should require (1) a certain proportion of glazed fanlight area (above the street level), according to the floor surface of the basement room, a certain proportion of this fanlight area to be made to open for ventilation; (2) that no room should be used as a workroom, which has not some means of through ventilation, either by a window, or through a door and adjoining room with window, to the back area or courtyard; (3) that the w.c. should not be in a vault under the street ventilating directly into the workroom, or into an area which is only top-lighted, without means of ventilation, and which either is part of the workroom or has a window from the workroom opening into it; (4) that the w.c. should not open directly or be ventilated into an underground workroom; (5) that there should be an open fireplace and flue in every basement workroom; or, if a gas stove is to be used, a proper flue should be provided to carry off the products of combustion.

It probably would not be possible to make existing underground workshops comply at once with the regulations to be framed; but it might be feasible to apply the regulations to existing workshops after a certain period, in the same manner as the Factory and Workshops Act Sections were made to apply to underground bakehouses after a certain period, which allowed owners and occupiers to make the necessary alterations after due notice.

The Sale of Food and Drugs Acts.

During the year 1910, 400 samples were taken for analysis; of these 400 samples 138 were milk, 135 being returned by the Public Analyst as genuine samples, one as of inferior quality, and two as adulterated. Of the 135 genuine samples, three were samples of "separated" milk, which were sold as such.

One of the adulterated samples was stated to contain 7.5 per cent. of added water. No proceedings were taken, as the vendor purchased the milk under a warranty. The other adulterated sample contained 13.1 per cent. of added water. No proceedings were taken in this case, as the Public Analyst's certificate was not authenticated in accordance with statute.

The adulterated milks formed 1·5 per cent. of the total number of milks analysed, as compared with 5·6 per cent. in 1909.

Of butter, 154 samples were taken, 151 being returned as genuine, and 3 (2 per cent.) as adulterated. No proceedings were taken in two cases, owing to the very slight extent of adulteration—3·6 per cent. and 0·44 per cent. of excess of water. The third adulterated sample contained 100 per cent. of margarine, but no proceedings were taken, as the Analyst's certificate was not duly authenticated.

Of margarine, 9 samples were taken, all being genuine; of cheese, 18 samples, all genuine; of lard, 18 samples, all genuine; of mustard, 9 samples, all genuine; of pepper, 9 samples, all genuine; and of brandy, 9 samples, all genuine. Of 27 samples of coffee, 26 were genuine and 1 adulterated. The latter contained 50 per cent. of chicory, but was labelled as a mixture so as to comply with the Act. Of 9 samples of whisky, 8 were genuine and 1 adulterated, the sample being 10·35 per cent. under proof below the limit, but a notice of dilution was displayed at the place of sale in accordance with the Act.

Water Supply.

From the reports of Dr. Houston, Director of Water Examinations, Metropolitan Water Board, it appears that for the year ending 30th November, 1910, on an average the number of samples of Chelsea filtered water yielding negative results as regards typical *Bacillus Coli* (the common intestinal micro-organism), was 92 per cent., when 100 c.c. of water are taken as the basis of bacterioscopic examination, the corresponding figure for the previous year being 93. The worst months of the year were August (20 per cent. of the samples gave a positive result as regards *B. Coli*), and February (15 per cent. gave positive results); and the best months were March and April, when all the samples examined proved negative to the *B. Coli* test.

The results, as regards the Chelsea water, are quite equal to those given by any of the other filtered waters of the Thames, but are suggestive of the excretal pollutions the Thames is liable to as a source of supply of drinking water. In a water which is perfectly unpolluted by sewage or excremental bacteria, typical *Bacillus Coli* should be invariably absent from every 100 c.c. of water examined.

REPORTS PRESENTED TO THE BOROUGH COUNCIL.

- 2nd March. General Shops Selling Milk in Small Quantities.
- 16th March. Nos. 2—20, Ives-street.
- 13th July. Water Supply in Tenement Houses.
- 28th Sept. The Supply of Diphtheria Antitoxin.
- „ „ Housing and Town Planning Act, 1909 : List of Streets.
- 26th October. Nos. 1, 2, 6 and 7, Little Blenheim-street.

SUMMARY OF WORK DONE DURING 1910,

BY THE LADY SANITARY INSPECTOR.

The work done during 1910 has comprised the following:—

- (1) Inspection of workshops and laundries at which women are employed.
- (2) Inspection of outworkers' premises.
- (3) Visiting cases of phthisis.
- (4) Visiting cases of measles and other non-notifiable infectious cases notified by the school authorities.
- (5) Visiting special cases reported from hospitals, and other agencies, &c.
- (6) Visiting to give instruction *re* management of infants.

Workshops and Laundries.—During the year 89 new workshops were registered, and 72 were removed from the register, the total number at the end of the year being 396. There were 24 laundries on the register at the end of the year, 4 being factory and 3 domestic laundries. Thirty-eight inspections were made in connection with laundries. During the year 91 workrooms were measured, for which workroom cards were given. The total number of inspections made in connection with workrooms was 773. In only 6 instances had notices to be served for cleansing workrooms.

(Classification of Workshops (Women Employees).)

Dressmaking and Millinery	...	...	...	371
Outfitting	...	...	...	37
Embroidery	...	...	...	14
Various	...	...	...	34
Laundries—				
Factory	...	...	...	4
Workshop	...	...	...	17
Domestic	...	...	...	3
				480
				480

Outworkers.—The two half-yearly returns are as follows:—

Number of Lists received	...	...	84
Total number of Outworkers	...	...	776
Number living in Chelsea	...	...	93
Number forwarded to other Boroughs	...	...	571
Received from other Boroughs	...	...	139

The number of inspections made of outworkers' premises was 117.

The names and addresses of outworkers living in other districts, but working for Chelsea firms, were forwarded to their respective Boroughs or District Councils, as stated in the first column of the Table below. The number of notifications received from other Boroughs of Chelsea residents working for outside firms are given in the second column.

<i>Notifications sent to—</i>				<i>Notifications received from—</i>			
Battersea	...	...	68	Kensington	...	...	95
City of London	...	...	34	Other Boroughs	...	...	45
Fulham	...	...	75	District Council	...	...	1
Hackney	...	...	10				
Hammersmith	...	...	16				
Islington	...	...	19				
Kensington	...	...	27				
Lambeth	...	...	21				
Marylebone	...	...	65				
Paddington...	...	...	18				
St. Pancras...	...	...	18				
Shoreditch	...	...	14				
Stepney	...	...	10				
Wandsworth	...	...	24				
Westminster	...	...	87				
Other Metropolitan Boroughs			31				
District Councils	...	...	34				
			<hr/>				<hr/>
Total	...	...	571				141
			<hr/>				<hr/>

School Cases.—There is a slight increase in the number of non-notifiable infectious diseases reported by the schools, the total for 1910 being 857, as compared with 809 in 1909. There is still a great variation in the number of children notified by the different schools, as is shown by the following table. As in 1909, no cases were reported from St. Luke's Parochial Schools or St. Mary's Catholic Schools during 1910.

In most cases the homes are visited, and advice is given to the parent, when there is no medical practitioner in attendance. Information is also given to the various schools, if there are contacts continuing to attend school, who have not suffered from the disease notified.

SCHOOL NOTIFICATIONS.

<i>Cases notified from—</i>				<i>Cases of Disease notified—</i>			
Ashburnham	...	...	125	Chicken-pox	...	...	270
Christ Church	...	...	80	Eczema	...	...	5
Cook's Ground	...	...	105	Impetigo	...	...	2
Holy Trinity	...	...	56	Itch	...	...	4
Hortensia-road	...	...	13	Measles	..	...	278
Marlborough-road	...	...	197	Mumps	...	...	46
Oratory	...	...	23	Ophthalmia	...	...	24
Park-walk	...	...	204	Ringworm...	...	...	66
St. Joseph's	..	...	1	Sore Throats	...	...	10
Servite	...	...	21	Whooping Cough	...	...	152
Schools outside	...	...	22				
			<hr/>				<hr/>
			857				857
			<hr/>				<hr/>

The total number of visits in connection with school notifications was 354, namely:—Measles 138, chicken-pox 70, whooping cough 77, ophthalmia 30, verminous heads 20, ringworm 9, mumps 8, and impetigo 2.

Visits of Instruction re Management of Infants.—During the year 1910, the homes of 715 recently-born infants were visited by the Lady Sanitary Inspector. In 340 cases, re-visits were made. Altogether in connection with this work 2,095 visits were paid with a view to giving simple instructions to the mothers in infant care and management. Dinner tickets for nursing mothers were given in suitable cases, and a very large number of babies were taken regularly to Dr. Tribe's Infants' Consultations, held one afternoon a week at 85, Sydney-street, which is also used for Mrs. Gordon's dinners to nursing mothers. Altogether the total attendances of the babies at the consultations was 775. The mothers attend fortnightly at the consultations, if the babies maintain a good condition of health, and weekly if the baby is not thriving as well as could be desired.

During the year, 35 mothers were referred for medical treatment on account of bad health, and about 100 babies were sent to hospitals or to private doctors for various reasons. Ten mothers and their infants were sent away into the country or to the seaside for the benefit of their health.

During the summer months, 68 cases of infantile diarrhoea were brought to the notice of the Lady Sanitary Inspector, and 365 visits were paid in connection with these cases. In all these cases advice was given as to the proper manner of following the directions given by the medical attendant; and this advice was found to be of special service in the preparation of albumen water from fresh eggs, which is now so largely used in these cases as a substitute for milk. So far as could be ascertained, the conditions which tend to promote summer diarrhoea in infants were found to be as follows:—*In the case of hand-fed babies*: Milk kept in unwholesome surroundings; dirty babies' bottles; dirty utensils used in preparation of milk and infants' "comforters." *In the case of breast-fed babies*: Carelessness of mothers in not cleansing their nipples or the babies' mouths before suckling; sore nipples; and bad state of health of mother. In both breast-fed and bottle-fed babies, diarrhoea seemed sometimes to be associated with neglect of cleanliness of the home, and the presence of flies in large numbers in the dwelling. Of the 68 infants visited for summer diarrhoea, it is satisfactory to record that only one case ended fatally. This case was admitted to the Chelsea Infirmary as a severe case, and died five weeks after admission.

The large amount of work done in visits to mothers and infants would have been impossible but for the assistance of a lady helper, Miss Dorothy Guest, who assisted the Lady Sanitary Inspector from 21st July to 7th November. Being a thoroughly trained and highly certificated woman, her work was of special value when dealing with the diarrhoea cases. Except for three weeks during August, when she acted as *locum tenens* to the Lady Sanitary Inspector, her services were voluntarily given without any payment for them. The honorarium for the August work was provided from a charitable source.

The Notification of Births Act, 1907.—This Act came into force in Chelsea on the 30th November, 1909. The notifications received during the year have been as follows:—

Notification of Births, 1910.

	Number.
Living children	1,031
Still-born children	25
Notified by Medical Practitioners	274
" St. George's Hospital	174
" Midwives	443
" Chelsea Workhouse	71
" Parents	94
	<hr/>
Total number of Births registered ...	1,298
	<hr/> <hr/>

From the above Table it will appear that the notifications under the 1907 Act fell short of the registrations in 1910 by the number of 242.

ADMINISTRATION OF THE FACTORY AND WORKSHOP ACT, 1901,
IN CONNECTION WITH
FACTORIES, WORKSHOPS, LAUNDRIES, WORKPLACES,
AND HOMEWORK.

1.—INSPECTION.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR INSPECTORS
OF NUISANCES.

PREMISES.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (including Factory Laundries.)	3	—	—
Workshops (including Workshop Laundries.)	953	38	—
Workplaces (other than Outworkers' premises included in Part 3 of this Report.)	—	—	—
Total	956	38	—

2.—DEFECTS FOUND.

PARTICULARS.	Defects.			Number of Prosecutions.	
	Found.	Remedied.	Referred to H.M. Inspector.		
<i>Nuisances under the Public Health Acts:*</i>					
Want of cleanliness	11	11	—	—	
Want of ventilation	—	—	—	—	
Overcrowding	11	11	—	—	
Want of drainage of floors	—	—	—	—	
Other nuisances	11	11	—	—	
Sanitary accommodation	{	insufficient	—	—	—
		unsuitable or defective	—	—	—
		not separate for sexes	3	3	—
<i>Offences under the Factory and Workshop Act:—</i>					
Illegal occupation of underground bakehouse (s. 101)	—	—	—	—	
Breach of special sanitary require- ments for bakehouses (ss. 97 to 100)	14	14	—	—	
Other offences (Excluding offences relating to outwork which are included in Part 3 of this Report.)	—	—	—	—	
Total	50	50	—	—	

*Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act as remediable under the Public Health Acts.

3.—HOME WORK.

NATURE OF WORK.*	'OUTWORKERS' LISTS, SECTION 107.											Number of Inspections of Outworkers' premises.	OUTWORK IN UNWHOLESOME PREMISES, SECTION 108.			OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110.			
	Lists received from Employers.						Numbers of Addresses of Outworkers received from other Councils.	Numbers of Addresses of Outworkers forwarded to other Councils.	Notices served on Occupiers as to sending lists.	Prosecutions.			Number of Inspections of Outworkers' premises.	In-stances.	Notices served.	Prose-cutions.	In-stances.	Orders made (Sec. 110).	Prose-cutions (Secs. 109, 110)
	Twice in the Year.			Once in the Year.						Failing to keep or permit inspection of lists.	Failing to send lists.								
	Lists.†	Con-tractors	Work-men.	Lists.	Con-tractors	Work-men.	(8)	(9)	(10)				(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	
Wearing Apparel—																			
(1) making, &c.	79	195	516	5	2	3	139	571	57	—	—	138	—	—	—	—	—	—	
(2) cleaning and washing	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Lace, lace curtains and nets	—	7	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Artificial flowers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Nets, other than wire nets	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Tents	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Sacks	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Furniture and Upholstery	—	9	10	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Fur pulling	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Feather sorting	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Umbrellas, &c.	—	12	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Carding, &c., of buttons, &c.	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Paper Bags and Boxes	—	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Basket making	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Brush making	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Racquet and Tennis Balls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Stuffed Toys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
File making	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Electro-plate	—	4	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cables and Chains	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Anchors and Grapnels	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cart Gear	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Locks, Latches and Keys	—	—	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Pea picking	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
TOTAL	79	232	544	5	2	3	139	571	57	—	—	138	—	—	—	—	—	—	

* If an occupier gives out work of more than one of the classes specified in column 1, and subdivides his list in such a way as to show the number of workers in each class of work, the list should be included among those in column 2 (or 5 as the case may be) against the principal class *only*, but the outworkers should be assigned in columns 3 and 4 (or 6 and 7) into their respective classes. A footnote should be added to show that this has been done.

† The figures required in columns 2, 3 and 4 are the *total* number of lists received from those employers who comply strictly with the statutory duty of sending *two* lists each year, and of the entries of names of outworkers in those lists. The entries in column 2 must necessarily be *even* numbers, as there will be two lists for each employer—in some previous returns odd numbers have been inserted. The figures in columns 3 and 4 will be (approximately) double of the number of individual outworkers whose names are given, since in the February and August lists of the same employer the same outworker's name will often be repeated.

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year.				Number. (2)
Important classes of workshops, such as workshop bake- houses, may be enu- merated here.	Bakehouses	....	....	33
	Laundries	....	....	24
	Dressmaking and Millinery	....	....	371
	Outfitting (Women's)	....	....	37
	Various (Women)	....	....	48
	Various (Men)	....	....	162
	Workplaces	....	....	—
Total number of Workshops on Register				675

5.—OTHER MATTERS.

CLASS.	Number. (2)
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshop Act (s. 133)	8
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5)	16
Notified by H.M. Inspector	....
Reports (of action taken) sent to H.M. Inspector	....
Other	3
Underground Bakehouses (s. 101) :—	
Certificates granted during the year	—
In use at the end of the year	28

NOTE.—The Factory and Workshop Act, 1901 (s. 132), requires the Medical Officer of Health in his Report to the District Council to report specifically on the administration of that Act in workshops and workplaces, and to send a copy of his Annual Report, or so much of it as deals with this subject, to the Secretary of State (Home Office). If the Annual Report is presented otherwise than in print, it is unnecessary to include in the copy sent to the Home Office the portions which do not relate to factories, workshops, laundries, workplaces or homework. The duties of Local Authorities and the Medical Officer of Health under the Act of 1901 are detailed in the Home Office Memorandum of December, 1904. A further Memorandum, on the Home Work Provisions of the Factory Act, was issued to all District Councils and Medical Officers of Health in October, 1906.

PROCEEDINGS DURING 1910.

PREMISES.	NUMBER OF PLACES.				Number of inspections, 1910.	Number of Notices, 1910.	Number of prosecutions, 1910.
	On register at end of 1909.	Added in 1910.	Removed in 1910.	On register at end of 1910.			
Milk premises ...	113	17	15	115	137	20	—
Cowsheds ...	1	—	—	1	13	—	—
Slaughter-houses	6	—	—	6	78	—	—
Other offensive trade premises	—	—	—	—	—	—	—
Ice cream premises ...	33	4	4	33	29	1	—
Registered houses let in lodgings	589	—	6	583	147	(a)* 8 (b)* 124	(a)* (b)*
Bakehouses ...	34	—	1	33	74	14	—
Restaurant Kitchens	60	6	2	64	70	21	—

* (a) For overcrowding.

* (b) For other conditions.

Total number of Intimation Notices served for all purposes ... 681

Overcrowding, 1910—

Number of dwelling rooms overcrowded ...	11
Number remedied ...	11
Number of prosecutions ...	—

Underground rooms—

Illegal occupation dealt with during the year ...	1
Number of rooms closed ...	1

Insanitary houses—

Number closed under the Public Health (London) Act, 1891	1
Number closed under the Housing of the Working Classes Act	14
Number of verminous rooms cleansed ...	217

Shelters provided under sec. 60 (4) of the Public Health (London) Act, 1891—

Number of persons accommodated during the year ...	43
--	----

Revenue Acts—

Number of Houses for which applications were received during the year ...	6
Number of tenements comprised therein ...	41
Number of tenements for which certificates were (a) granted ...	24
“ “ “ “ “ (b) refused ...	17
“ “ “ “ “ (c) deferred ...	—
Common Lodging-houses—certificates granted ...	3

Mortuaries—

Total number of bodies removed ...	129
Total number of infectious bodies removed ...	—

SUMMARY OF NUISANCES AND OTHER MATTERS
REPORTED ON AND WORK DONE DURING THE
YEAR, 1910.

HOUSES AND PREMISES :—

House-to-house inspections	...	...	...	...	553
*Reported on respecting nuisances complained of	...	...	...	...	520
Reported on with reference to infectious cases	...	...	...	...	247
Cleansed, whitewashed, and repaired	...	...	...	...	259
Defective roofs repaired	...	...	...	...	86
Disinfected after communicable diseases	...	...	...	...	224
*Disinfected for Tubercular and other diseases	...	...	...	...	83
Rooms disinfected for verminous conditions	...	...	...	...	217
Cases of overcrowding abated	..	...	...	...	11
Dust-bins, new, provided	...	...	...	...	103
Ashpits demolished	...	...	...	...	11
Underground rooms occupied contrary to Act	...	...	...	...	1
Inspections of restaurant kitchens	...	...	...	...	70

DRAINAGE :—

Drains opened, cleansed, and made sound	...	...	...	...	} 77
„ trapped with stoneware gullies	...	...	...	...
Water-closets cleansed and repaired	...	...	...	...	102
Water-closets, new pans and traps provided	...	...	...	...	70
Spout drains cleansed, repaired, or renewed	...	...	...	...	61
Sink, bath, and lavatory waste pipes provided and repaired	...	...	...	...	88
Drains and soil pipes ventilated or repaired	...	...	...	...	102
Soil pipes, new, provided	...	...	...	...	33
Additional w.c. accommodation provided	...	...	...	...	15

WATER SUPPLY :—

For domestic purposes, provided where cut off by Water Board	...	...	...	...	11
For water-closets, or check cisterns provided and repaired	...	...	...	...	114
Main cisterns cleaned or repaired	...	...	...	...	35
„ new covers provided	...	...	...	...	33
„ new, provided	...	...	...	...	1
Water certificates, issued in respect of newly erected dwelling-houses	—	—	—	—	—

NUISANCES ABATED ARISING FROM :—

Keeping of animals	...	...	...	...	10
Accumulations of manure and other filth	...	...	...	...	41
Yards, areas, and wash-houses paved or drained	...	...	...	...	77
Smoke	...	...	...	...	1

*This does not include re-visits to premises to ascertain works in progress, or premises visited where no nuisances are found to exist, which, if added, would at least be treble the number of visits made.

MISCELLANEOUS :—

Dead bodies removed to public mortuary for sanitary reasons ...	8
Goods disinfected after infectious cases at station	1964
Goods destroyed after infectious cases	8
Mattresses, beds, &c., received from Surveyor's Department and destroyed by the Incinerator	1136
Number of samples taken for analysis (Food and Drugs Act)	400
*Unsound Food. Number of boxes of fruit, fish, rabbits, &c., condemned and destroyed	141
Library books destroyed at Librarian's request	21
Animals destroyed in Incinerator	1724

PROCEEDINGS TAKEN :—

Statutory notices issued	132
Intimations issued for sanitary works, &c., including infectious disease cases	681
Legal proceedings in respect of defective sanitary arrangements, nuisances, &c.	1
Legal proceedings in respect of food adulteration	

CORRESPONDENCE :—

†Number of letters written in connection with sanitary matters ...	684
Daily returns of infectious cases sent to Metropolitan Asylums Board	137
Notification of infectious cases sent to School Authorities ...	237
Entries in Inspectors' Report Books	490
Entries in Inhabitants' Complaint Book... ..	30
Certificates of disinfection given	409
Certificates of infectious diseases for removal cases	118
Notices sent to Public Library of premises where infectious disease has occurred	115

The cow-houses and slaughter-houses were inspected by the Medical Officer of Health prior to licences being renewed in October last, and a list of the retail bakehouses under inspection in Chelsea forms a separate Appendix.

There are 115 Dairies and Milkshops, and 33 Ice Cream vendors in the Borough. These have been registered and periodically inspected by the Sanitary Inspectors.

All places where fish and potatoes are cooked have been periodically inspected.

Sanitary Inspectors :

ALEXANDER GRANT (Chief).
G. R. METZLER.
J. H. BERRY.
F. TETTENBORN (Lady).

*This does not include unsound food condemned in the streets and destroyed, for which no condemn note was given.

†The department is now connected with the telephone, and consequently the work in connection with the Infectious Diseases is done more expeditiously, and considerable time is also saved by its use in other matters.

MAGISTERIAL PROCEEDINGS UNDER THE PUBLIC HEALTH (LONDON) ACT, 1891.

Situation of Premises.	Nature of Nuisance or Complaint.	Petty Sessions.	Date of Hearing.	Result.
25, Jubilee-place	Failing to remove an accumulation of filth, and repair and cleanse the interior of the premises	Kensington	18th Oct.	Closing Order made.

BAKEHOUSES IN USE ON JANUARY 1st, 1910.

Street.	Occupier.	Above Ground.	Below Ground.
74, Arthur-street	Vacated	...	Vacated, Dec., '06.
93, Beaufort-street	A. Coventry	...	Below.
55, Burnaby-street	Schmitt	...	"
1, Cadogan-street	S. Spells	...	"
2, Cale-street	H. Judkins	Above.	...
77, Cheyne-walk	D. Mayo	...	Below.
20, Church-street	E. Bauer	...	"
60, College-street	Samuel Mills Vines	..	"
17, Coulson-street	Frank Andrea	...	"
3, Dartrey-terrace	G. M. Weiss	...	"
67, Flood-street	J. Venner	...	"
95, " "	C. Gass	...	"
153, Fulham-road	C. M. Nash	...	"
*187, " "	E. Pinnock	...	"
323, " "	W. H. Summers	...	"
53, Godfrey-street	H. Becker	...	"
145, King's-road	J. Humphry & Son	Above.	...
†88, " "	G. Nash	...	Below.
134, " "	Buckea	...	"
351, " "	Hart	...	"
399, " "	H. Kohler	...	"
488, " "	Matthiae	...	"
502, " "	W. Schafer	...	"
517, " "	W. James	...	"
48, Lots-road	M. & C. West	...	"
83, Lower Sloane-street	Burrows	Above.	...
62, Draycott-avenue	Emil Schuster	...	Below.
100, " "	C. Reitze	...	"
110, " "	William Herwig	Above.	...
7, Pavilion-road	Mason	"	...
3, Pont-street	Hue & Co.	...	Below.
29, Riley-street	F. W. Fox	...	"
150, Sloane-street	Reuben Jeffries	...	"
25, Walton-street	Burrows	...	"

* Not used, bakes at 11, Motcomb-street.

† Now used as kitchen only.

SLAUGHTER-HOUSES.

Street.	Occupier.
Crooked Usage	Cridlan, P. and J. W.
169, Fulham-road	Philp, J.
341, „	Vaughan, T.
52, King's-road	} Cobb, G. A.
54, „	
413, „	Goulding, F.
82, Draycott-avenue	Iggulden, F.

COW-HOUSES.

Church-street	Walker, E. J.
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