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Contributors

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Camberwell

Report of the Medical Officer of Health.

*To The Worshipful the Mayor, Aldermen and Councillors
of the Borough of Camberwell.*

GENTLEMEN,

At the middle of 1914, the latest date at which an estimate can be made with any hope of accuracy, the population of London was reckoned to be 4,516,612. An estimate now is more than usually doubtful on account of the war, which has led to so great a moving hither and thither of the people of London, in common with that of the whole country. One has only to use one's eyes in the streets to see the change in numbers and age distribution of the population, a change that must of necessity be reflected in its vital statistics. These in years removed from the close neighbourhood of the taking of the census have always suffered from an element of unreliability, and now will have to be viewed with an even more critical eye.

The births actually registered in London were 103,646, compared with 111,265 in 1913. But this number must be corrected by the inclusion of the births of children of ordinary London residents who were not born within its boundaries, and by the exclusion of those who were the children of temporary inhabitants of the County. When this has been carried out the number used in the calculation of the rate is 101,649, a decrease from 1914 of 8,018.

There were 72,421 registrations of deaths, but these have again to be corrected in a similar manner to the births; that is by the inclusion of persons who, although having a permanent home in London, died outside its boundaries, while those who were only temporary residents at the time of their deaths will have to be excluded. The number of registrations remaining after this has been done was 72,399 for the 52 weeks of 1915, compared with 64,994 for the same number of weeks of 1914.

The difficulty of getting at even a fairly correct population is accentuated when one comes to a lesser district such as Camberwell, for the elements of error which are likely to balance themselves in the larger number exert a disproportionate influence when they are applied to the smaller. Right from the beginning of the war Camberwell has not failed in giving up its men of a fighting age to the Navy and Army, and one has only to look about in the main streets to note the absence, unfortunately in some cases permanent, of men of military age. That this will exercise a disturbing influence both on the number and age distribution of the Borough must be obvious to all.

The changes in the trade and employment conditions have been the same in this Borough as elsewhere—new industries have sprung

up, others have languished, while the great inrush of women to the labour world has not been without its influence. The birth and death rates are, therefore, not reliable, and the conclusions which are drawn from them as an evidence of the sanitary condition of the whole Borough must be only accepted with discrimination, while the smaller figures in the sub-districts are still more likely to favour inaccurate conclusions.

To make matters still harder this year, it is impossible to use the method of estimating the population by considering the number of assessments, which in the past has often served well as a check to other conclusions. These assessments include premises beside houses, such as hoardings, and these have shown a certain decrease. The estimated civilian population of the Borough as given by the Registrar-General is therefore taken as a guide, and its sub-districts are assumed to have varied in a proportionate degree.

POPULATION OF CAMBERWELL AND SUB-DISTRICTS.

	Borough.	Dulwich.	South Camber- well.	North Camber- well.	South Peck- ham.	North Peck- ham.	St. George's.
As enumerated at census 1901 ...	259,339	10,247	90,465		93,038		65,589
As enumerated at census 1911 ...	261,328	14,974	45,036	64,379	43,221	47,753	45,965
As estimated to middle of 1912	263,636	15,174	45,647	65,813	43,248	47,779	45,973
As estimated to middle of 1913	264,167	15,456	45,772	65,794	43,303	47,886	45,956
As estimated to middle of 1914	264,121	15,713	46,054	65,292	43,262	47,867	45,933
As estimated to middle of 1915	254,385	15,246	44,376	62,657	41,673	46,267	44,166

A census now would give very useful information, but many of those who carry it out are engaged in the far more important duty of fighting for their country.

When one comes to the number of births one is on surer

BIRTHS IN CAMBERWELL AND ITS SUB-DISTRICTS.

Year.	Borough.	Dulwich.	South Camber- well.	North Camber- well.	South Peck- ham.	North Peck- ham.	St. George's.	Un- attached.
1914	6,580	205	929	1,609	1,003	1,363	1,385	86
1915	6,134	178	865	1,583	945	1,284	1,214	65
Difference.	- 446	- 27	- 64	- 26	- 58	- 79	-171	-21



ground, for account is only taken of those actually registered as belonging to Camberwell, without taking any account of the population among which they occur.

There is a decrease of 446 in the total compared with 1914, which was itself less than 1913 by 91. The lessening is in all the districts, but especially in St. George's, which exceptionally showed an increase last year.

BIRTH-RATES OF CAMBERWELL AND ITS SUB-DISTRICTS.

Year.	Borough.	Dulwich.	South Camber- well.	North Camber- well.	South Peck- ham.	North Peck- ham.	St. George's
1914	24·9	13·2	20·4	24·9	23·4	28·8	30·5
1915	24·1	11·8	19·6	25·5	22·9	28·0	27·7

Owing to the difficulty of arriving even at an approximate population, the birth-rate both for the Borough and for its sub-districts rests on no sound estimate, and the figures must only be regarded as suggestive. They, however, do give some idea of the reduction going on, a reduction which, considering the great increase in the number of marriages, is probably due to art and not to nature. It shows itself alike in the poor districts and in the well-to-do, North Camberwell alone making a resistance to this downward trend of numbers. That this retrogression will continue does not seem likely, and it is to be hoped that next year's report will show an increase. If one could be certain that there is an improvement in the viability of infants now born, the question would lose some of its seriousness, for quality is of much more importance than quantity. But this, although possible, is not yet capable of demonstration; therefore, by diminishing the number of births, the nation does run a serious risk of being swamped by those who are increasing at a more rapid rate.

There were in all 4,251 entries of deaths forwarded to the Council by the district registrars, but it is obvious that some of these do not properly belong to Camberwell. Besides the Lunatic Asylums, which receive patients from all parts of the country, there is the Southwark Infirmary, which, at all events for part of the year, was occupied by persons who were ill when they were removed from Southwark, to which should be assigned any deaths occurring among the inmates. Our own people who die in hospitals, &c., outside the Borough have to be included for the same reason that the Southwark deaths have to be excluded.

There are also a few included in this category who died in some one of the public institutions in the Borough, but who had no previous known address, and, in accordance with the rule of the

Registrar-General, are ascribed to the place where they died. There is, therefore, a certain slight unfairness to certain parts of the Borough where such exist, but the number is hardly sufficient to make any appreciable difference. There are also those whose exact previous address in Camberwell it was not possible to ascertain. These are assigned to the Registration Districts in proportion to the registered deaths in the latter. As they, in great measure, consist of deaths of persons who have been transferred from our Poor Law institutions, they with greater propriety might be ascribed to the parts of North Camberwell, North Peckham, and St. George's, but it appears better to continue the practice of past years.

REDISTRIBUTION OF DEATHS AMONG THE SUB-DISTRICTS OF
CAMBERWELL.

District.	Deaths returned classified according to sub-districts.	Deaths of persons removed from unknown addresses in the Borough redistributed.	Estimates of total deaths due to sub- districts.
Dulwich	175	2	177
Camberwell, South ...	569	6	575
Camberwell, North ...	952	10	962
Peckham, South ...	661	7	668
Peckham, North ...	812	9	821
St. George's	726	8	734
Total	3,895	42	3,937

One now arrives at a total from which the death-rate in Camberwell can be calculated, and some comparison can be drawn between it and other London districts. It will be seen that there is a rise of 1·8, and it is necessary to go further back than 1906 to arrive at an equal rate. The deaths themselves reflect the increase, for there were over 300 more than in 1914. As explained above, this rate must not be taken as resting on a sure foundation, however useful it may be as an approximate guide. It will, however, be seen that supposing there had been no war in progress, and the normal rate of increase of population had prevailed, the death-rate would certainly have been higher than in 1914.

DEATH RATES IN CAMBERWELL AND ITS SUB-DISTRICTS FOR THE
PAST 10 YEARS.

Year.	Borough.	Dulwich.	South Camber- well.	North Camber- well.	South Peck- ham.	North Peck- ham.	St. George's.
1906	14·8	9·5	11·7	15·5	12·7	16·5	15·6
1907	14·0	9·0	12·2	14·9	12·6	16·1	16·1
1908	13·1	8·4	11·1	14·2	12·1	15·6	13·4
1909	13·7	9·8	10·5	14·3	12·9	16·6	15·0
1910	12·2	9·0	9·5	12·8	11·0	14·4	14·5
1911	14·2	10·1	11·4	15·1	14·3	15·7	15·2
1912	12·8	12·0	9·8	13·4	12·5	14·6	13·8
1913	13·9	10·5	10·7	13·8	13·6	16·7	15·5
1914	13·6	9·1	10·9	14·6	14·2	15·8	13·9
1915	15·4	11·6	12·9	15·3	16·0	17·7	16·6

A reference to the following table will, however, at once dispose of any idea that the increase is confined to Camberwell, for we are the fourth on the list of South London Boroughs, the same position that we occupied last year, and it will be seen that we are seventh instead of eighth, as in 1914, on the London Sanitary Authorities' list. The conditions which make for an element of unreliability in the calculation obtain alike in all the Boroughs, so their association for purposes of comparison is not unjustifiable.

In view of the unreliability of the population, a comparison of the rates of the smaller numbers in the sub-districts will not lead to any profitable conclusion. It is, however, legitimate to state that all the divisions show an increase of a considerable number, the least increase being in North Camberwell.

The death-rate for the whole County was 16·8, compared with 14·4 for 1914.

The infantile mortality rate rose from 99 per 1,000 births to 103. This proportion, based as it is on the actual number of births and deaths, is of value for comparison with other districts, but considered apart from this is only of value if it be combined with some examination of its components. The deaths of those children under a month old have shown a decrease of 29, which is fairly evenly distributed among the four weeks. The decrease continues until the age period 6-9 months, when there is a very decided increase, to be followed by a still greater one in the 9-12 months period.

Upon considering the individual diseases as causes of death one

Boroughs.	Death-rate from all causes per 1,000 living (corrected).	Deaths under 1 year to 1,000 births.
County of London	16·8	112
Hampstead	12·3	78
Lewisham	12·9	80
Wandsworth	13·4	94
Woolwich	14·2	94
Hackney	15·0	109
City of London	15·1	120
Camberwell	15·5	103
Stoke Newington	15·6	103
Fulham	15·6	115
City of Westminster... ..	15·9	92
Greenwich	16·3	101
Hammersmith	16·4	102
Battersea	16·6	112
St. Marylebone	16·9	99
Lambeth	16·9	105
Kensington	17·1	118
Stepney	17·4	115
Paddington	17·5	115
Bethnal Green	17·6	122
Islington	17·7	108
St. Pancras	17·8	104
Deptford	17·9	132
Chelsea	18·5	96
Holborn	18·5	101
Poplar	19·7	132
Shoreditch	20·1	145
Southwark	20·9	132
Bermondsey	21·4	149
Finsbury	21·6	128

(This table is taken from the Report of the Medical Officer to the London County Council.)

is at once confronted by a considerable increase in measles, which is only partly compensated for by a decrease in whooping-cough. The ordinary liability to bronchitis and pneumonia which probably exists in every child is heightened by the complaint, and when one realises how largely the recovery is due to special care, which cannot always be given at home, it is evident that this is a disease which is likely to exact a heavy toll. Even those who recover under the best conditions of treatment often fall a victim later on to tuberculous diseases. These caused two more deaths than in 1914, one of them being due to the meningeal form of the disease.

So far as Camberwell is concerned, the necessity for official health visitors seems to be not proven. Not for one moment should we belittle the efforts made by the various voluntary agencies in the Borough, but it is in the fact that these are taken up for the love of the thing that will endow their work with any value. With the class of people who are most in need of instruction there may be lip-agreement with the official, but only from one whom they regard

as their disinterested friend are they likely to accept and follow advice. For such a one who takes an interest in them during sickness, or in various other ways, they will put themselves out, but with a paid official, even with all diplomas and certificates, and under the official shield of the local authority, they are likely to have superficial agreement, but nothing else. Hence it appears likely that a nurse with her practical advice and experience of sickness would be more likely to be listened to, and her advice far more likely to be followed, than a health visitor well up in all the modern ideas of sanitation, but who will perhaps be lacking in the human side in which the nurse from her life is more likely to possess.

The mortality of children under one year has received even greater attention than usual. In view of the loss of so many men in the war, ante-natal care, maternity centres, and many other schemes have all had their advocates. It might seem that, were they to effect all the reduction that their advocates claim for them, there would be a certain decline in the number of deaths among infants. But if this reduction is to be accompanied by the still greater one in the number of births, which now seems to be year by year in greater evidence, the swamping of this nation by others that are more fertile can only be a question of time. It is obvious that there has been a greatly increased number of marriages, but these have not been accompanied by more births, but by fewer. It is possible, but exceedingly unlikely, that the potential fertility of the race is declining, so, even if there were no other probable reason, this could hardly be accepted as one. The superficial financial advantage of a small family, and chances of an easy life, free from care and responsibility, attracts many with whom it does not take long to decide the question between limitation of fertility with its associated relief and the carrying out of the duty to the State that is embodied in rearing future citizens, even though the freedom so sought from trouble is by no means always realised.

The fall in the birth-rate is a far more important and an infinitely more difficult problem to deal with than to take steps which, although loudly and continually acclaimed, are by no means certain to bring down the infantile mortality rate, and certainly to hold these up as being of sovereign importance only tends to cloud the more important issue. As the limitation of families probably depends as much on a desire to avoid expense as a wish to have a "good time," a practical method would seem to be the minimising of the advantages and increasing the disadvantages in the same sense. Hence the money spent in efforts to diminish infantile mortality might be better employed in allowing some financial benefit for the rearing of healthy children, a benefit which might increase according to the years the child lives, and the extra taxation of childless persons, which although it might be a hardship in individual instances, would bring some contribution towards this expense, in addition to the discount it would put on the small family.

The campaign in favour of health visitors goes on with un-

diminished vigour, but in spite of the weighty opinions expressed in its favour the practical results do not appear to me to bear them out.

DEATHS UNDER ONE YEAR FROM ALL CAUSES PER 1,000 BIRTHS.

Borough.	1906.	1907.	1908.	1909.	1910.	1911.	1912.	1913.	1914.	1915.	Year in which Health Visitor was appointed.
Camberwell ...	130	115	104	100	94	109	83	106	99	103	
Bermondsey ...	153	123	144	138	126	156	111	132	125	148	1909
Bethnal Green	155	138	132	129	123	151	96	118	137	122	1906
Hammersmith	138	117	120	120	99	146	90	103	94	101	1905
Hampstead ...	77	69	69	75	60	78	62	73	80	78	1909
Kensington ...	132	128	119	113	106	132	91	112	94	117	1906
Lambeth ...	131	120	104	109	94	123	86	102	104	105	1907
Woolwich ...	109	112	94	82	85	97	73	79	85	93	1906

The above table is a continuation of those in previous years. In spite of being held up even by members of its own household as an awful example of boroughs that have not appointed health visitors, and to whom the Local Government Board are asked to apply their powers to compel such appointment, Camberwell seems to have done just as well, if not better, than many other boroughs; compared with last year our relative position has improved in the list of London boroughs.

The Schools for Mothers have strong claims to be reckoned among the chief means in attempting to bring about a diminution in the mortality. They are voluntary—which means that they have the advantage of being run by those who take up the work for the love of it, and who will take a personal interest in all those who come within its ken. They also escape the drawback of paying visits to all, without discriminating between those who need such help and those who do not, limiting them instead to those who are sufficiently concerned in the matter to come of their own initiation to learn things which will practically benefit themselves and their children; and even in the apparently hopeless class the voluntary worker has a better chance of success, small though it is, than a paid official.

The Board of Education will provide up to 50 per cent. of the cost of these schools, but this is not enough for the poorer districts, where funds are low, but where willing workers exist, and there are mothers ready enough to pay a small sum to attend, thereby gaining a feeling of responsibility as well as receiving profitable advice.

There was an increase in the ordinary form of meningitis of five more deaths than last year. The deaths from convulsions were just half, some of the decrease perhaps being due to the inclusion of fatal cases among the other diseases of which they are often only a symptom. When we come to the deaths of respiratory

origin we are face to face with a real and serious increase of nearly 50 in bronchitis and pneumonia, most of which occurred towards the end of the first year of life. They are both in great measure dependent on the weather, and although their burden falls most on the poor they take heavy toll from all classes. The weather, like that of 1914, was only slightly favourable to diarrhoeal diseases, so that there is little comparison of use to be drawn between the two years. Syphilis was assigned as a cause in eight instances, instead of the twelve of the previous year, but it is probable that the influence of this disease may be rightly sought in some of the other causes. There were the same number of deaths from overlaying, a cause which may truly and accurately be described as preventable, in contradistinction to some other diseases to which this adjective is so loosely applied. This number, which exceeds 1 per cent., is a sinister compliment to the intelligence of mothers, and it is to be noted that it exerts its influence in other boroughs in spite of the health visitor.

Premature birth has been a cause which during the past year has received much attention, as being one which offers on the part of Public Health authorities a fertile field for administrative action. It is claimed that many of the deaths might have been prevented and future trouble for the mother obviated had she been under medical care during her pregnancy.

Whether any appreciable decrease is to be hoped for from this cause if a system of ante-natal clinics were instituted is doubtful. Those mothers who now go to their own doctors or midwives might attend, but that it would reach the large careless class which prefers to let things take their chance is doubtful, unless a complete system of notification were set up and enforced by rigorous measures directed against those who did not comply. This section also claims those deaths from wasting diseases which are also among those especially fixed on as calling for the efforts of the health visitor; and it also embraces the fatal results of congenital defects which even the most purblind crank can hardly consider as likely to undergo any reduction as the result of municipal interference.

The deaths from premature birth were 9 less, and in those from wasting, &c., there is a drop of 25. Had this Council yielded to the pressure brought to bear on them, it is difficult to think that this reduction would not have been hailed both as a convincing proof of the necessity for the appointment of health visitors and its gratifying result.

Of the 6,069 births that were registered, we received the information called for by the Notification of Births Act in 5,368 instances; of these 1,586 were from doctors, 3,049 from midwives and nurses, 492 from parents, 27 from other persons, and 195 from other boroughs, while the authorities of King's College Hospital forwarded us 19 notices of births attended by their Maternity Department.

The deaths from the notifiable infectious diseases show an increase except in the cases of diphtheria, scarlet fever, and erysipelas.

The increase in enteric fever was remarkable for its small extent. Considering how, in times past, enteric fever has been the constant accompaniment of war, and seeing how little time it takes to travel even from distant parts, the absence of any serious prevalence bears witness to the efficiency of the means of obviating infection which are taken in the treatment of our soldiers, and to the care which is taken lest they should be a source of danger to the civilians at home. In all there were six deaths from this disease, one being under the age of 25, and occurring at widely separated places and intervals of time. The notifications also exceeded those of last year by one. They were received from all the districts of the Borough, North Camberwell being responsible for nearly half the number of cases.

In my report for last year I mentioned a certain family in North Peckham in which there occurred a series of cases. This culminated in the early days of 1915 in the death of the father of the family from this disease. The mother, in 1914, had suffered from an attack of what was then supposed to be influenza. There seemed a chance that this really might have been a case of unrecognised enteric, and very careful investigations were made to see whether she had acted as a so-called "carrier," *i.e.*, a person apparently quite well but who is capable of infecting others. All enquiries, however, turned out to be negative. Two cases occurred in institutions in the Borough, the first at the Infirmary, and the second at one of the Lunatic Asylums.

Some of the patients had been eating watercress, and others shellfish, but there was no series of cases which would warrant a statement that either of these causes had anything to do with the attack. In two instances patients were returned from the Asylums Board Hospitals as not being considered to be suffering from enteric fever.

The diphtheria notifications showed a decrease of 55, most marked in the South Peckham District. The deaths, as usual, were chiefly between the ages of 2 and 15, in this way following the age-period of the larger number of notifications, with which they were also in general accord in respect of a diminished prevalence.

The distribution of the disease was such as to exclude the likelihood of any one school being the centre of an outbreak, for the notifications were pretty fairly distributed all over the Borough. The method of ordinarily relying on the bacteriological condition of the throat as an index of the freedom or otherwise from infection has been exemplified in the number of children who have attended the Town Hall for the purpose of a swab being taken from their throats for bacteriological examination.

The deaths from measles were 84 in number, and were all of persons under the age of 25, the heaviest incidence being between 1 and 5 years. The increase over last year amounted to 21. The Order requiring the notification of this disease not having come into force until January 1st, 1916, any remarks on its effect will properly take their place in the report for that year.

Up to that date no disinfection was carried out, and we only

visited cases which had been reported from schools. Often the information was so belated that the time for any action had passed away, and we could do nothing beyond passing on the information of the illness to any other schools attended by children of the house. Sometimes it was possible to advise the calling in of a medical man, but the frequent event was to discover that the existence of the measles reported to the school existed only in the informant's imagination.

While measles showed an increase, whooping-cough, on the contrary, marked a decline of 10 from the previous year. As usual, the greater mortality showed itself in those under 5 years old, infants under one year old being especially affected.

There were 13 deaths from cerebro-spinal meningitis. Two of these were in children under the age of one year, and two between the ages of 15 and 25, while 7 took place between the ages of 5 and 15.

The notifications were 29 in number, and of these three were military cases.

There was a complete absence of infection of the other members of the patients' households, although several cases occurred under circumstances well favourable for the spread of infection. A similar state of things existed with regard to their connection with soldiers. No nearer relation could be established than what might be expected under the ordinary chances of association between the two classes.

Nasal catarrh had been existing in a few of the households, but the prevailing reply was to the effect that the health had been good.

The deaths from the two main forms of inflammatory lung disease showed a considerable increase, amounting to nearly 200. The increase seems to have shown a special predilection, as is usually the case, for persons at the two extremes of life.

The deaths from cancer showed an increase of 8, all of which occurred at the later age-periods, the somewhat disquieting rise in the age-group 25-45 not being apparent in the present year.

The deaths from enteritis and diarrhoea were a little heavier than last year, but the fatal cases in the very young were almost identical in number.

The deaths from pulmonary tuberculosis were 355, one more than in 1914. An increase showed itself in the age period 15-25, and a slight decrease in that of 25-45, where in 1914 there was an increase, while there is a very decided fall in the 46-65 period. Taking London as a whole, the deaths from phthisis have risen from 6,281 to 6,782. The rise, therefore, in Camberwell, which was a somewhat disquieting feature in last year's report, has not been maintained, but, on the contrary, the return that we make is as favourable a one as last year.

Of the deaths that took place in infirmaries or hospitals, where particulars could be obtained, it would appear that 22 had been inmates for less than one week; 41 for less than a month; 42 for less than three months; the stay of the remainder having exceeded that time.

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1912.

PARTICULARS OF NOTIFICATIONS RECEIVED FROM JANUARY 4TH, 1915, TO JANUARY 1ST, 1916.

District No.	Ward.	Sanitary Inspector.	Number of Persons Notified.	Number of Notifications received.	AGE DISTRIBUTION.							Inspections and Re-visits made by Sanitary Inspectors.	Patients left Address, since Notification, for other Address in Borough.	Patients who have left Borough since Notification.
					Under 1 year.	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.	65 and upwards.			
1	Ward 1 (part of) ...	M. Malins ...	90	154	3	8	12	13	37	15	2	603	6	5
2	{ Ward 1 (part of) & Ward 2 ... }	H. Jones ...	126	211	4	8	40	16	46	12	...	...	23	11
3	Wards 3 and 14 ...	G. Dewey ...	113	188	...	7	32	20	34	18	2	588	14	6
4	„ 4 and 8 ...	H. Green ...	226	342	11	16	75	36	63	23	2	1,073	34	16
5	„ 5 and 6 ...	R. Nash ...	113	205	...	7	33	16	30	24	3	568	7	27
6	„ 7 and 9 ...	G. Scudamore ...	159	296	8	15	56	30	26	23	1	736	8	17
7	„ 10 and 11 ...	W. Eagle ...	75	123	1	8	20	8	25	10	3	419	2	4
8	„ 12 and 13 ...	J. Pointon ...	83	131	...	4	21	14	36	7	1	144	2	10
9	„ 15 and 16 ...	W. Farmer ...	66	105	...	5	17	13	25	6	...	347	2	2
10	„ 17 and 18 ...	G. Morley ...	61	101	...	1	9	10	31	5	5	258	2	5
11	„ 19 and 20 ...	E. Collins ...	21	39	...	3	3	3	9	3	...	139	...	1
Total ...			1,133	1,895	27	82	318	179	362	146	19	4,875	100	104

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS 1912.

*Summary of Notifications during the period from January 4th, 1915, to
January 1st, 1916.*

Age Periods.	Number of Notifications on Form A.													Total Notifications, <i>i. e.</i> , including cases previously notified by other Doctors.
	Primary Notifications.													
	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards.	Total.		
Pulmonary— Males ...	3	12	32	34	22	29	85	65	42	27	9	360	488	
Females ...	—	8	25	31	34	42	80	78	43	17	5	363	469	
Non-Pulmonary— Males ...	11	34	55	38	9	2	5	4	2	1	—	161	192	
Females ...	13	25	36	27	13	5	4	1	1	—	—	125	140	

Age Periods.	Number of Notifications on Form B.						Number of Notifications on Form C.	
	Primary Notifications.					Total Notifications, i. e., including cases previously notified by other Doctors.	Poor Law Institutions.	Sanatoria.
	Under 5	5 to 10	10 to 15	Over 15	Total.			
Pulmonary— Males ...	—	2	1	—	3	7	95	114
Females ...	—	1	4	—	5	9	34	67
Non-Pulmonary— Males ...	—	4	6	—	10	13	1	5
Females ...	—	2	8	1	11	16	2	9

There were also some deaths that actually occurred in sanatoria, without reckoning those who had presumably received treatment in a sanatorium but who died at home. There were twelve of these in some one or other of these institutions, and in five of them, judging from their length of stay, it would appear that the admission was too belated to produce even a temporary improvement.

The deaths, however, that did take place in the Infirmary,

&c., do not accurately represent the amount of institutional treatment, for several seem to have left the Infirmary for the sake of dying at home.

TUBERCULOSIS, 1915.

Inspector.	Overcrowding.		Ordinary.		Total.
	Intima- tions.	Notices.	Intima- tions.	Notices.	
H. C. Green	29	6	35
G. G. Morley	5	3	8
H. N. Jones
R. F. Nash	11	1	12
M. Malins	49	19	68
W. Eagle	11	5	16
G. W. Scudamore	1	...	11	2	14
G. T. Dewey	26	7	33
W. R. Farmer
J. S. Pointon	1	...	1
E. R. Collins
	1	...	143	43	187

So far as the detailed tuberculosis work is concerned, it has gone on as before; and even in spite of the reduction in staff, there is an increase in the number of visits and re-visits that have been paid to those notified. These re-visits have not been so successful in discovering early and non-notified cases as one might have hoped, for only in a few instances were the inspectors called upon to advise the seeking of medical aid for the remaining members of the family. It is possible, however, that for this the existence of the Tuberculosis Dispensary is in part accountable, for all over the Borough people are learning of its existence through recommendations of past and present patients, and a growing inclination to take early notice of chest symptoms has possibly been stimulated by the visits of the Tuberculosis Officer to the patients' homes. The Dispensary has been engaged in carrying on the work of examination of the other members of the family of those who have gone to them to be treated, and that this has resulted in other cases of presumed tuberculosis may be held as proved by the large number of secondary cases reported by that institution. Not only do we get such cases from the Dispensary, but also from some of the hospitals, especially those who are in the habit of sending their representatives to the homes of phthisical people who have attended for treatment.

The negotiations with the Dispensary still drag on, with the result of the useless duplication of work, for much that we do under the Orders of the Local Government Board is also carried out by the Dispensary.

So long as the powers that be are convinced that a Dispensary

must form an integral part of the campaign against tuberculosis, and have powers to enforce their opinions on Local Authorities, it does not seem a wise policy.

The subject has been so often debated that it seems useless to carry the discussion any further, and one can only repeat the view so often expressed : if it be enjoined that a Dispensary be provided, the cheapest and most effective plan is to come to some terms with an institution which is in going order and which has outside means of subsistence in addition to the local rates.

The notifications of the other forms of tuberculosis increased from 239 to 286 on Form A, and from 5 to 21 on Form B, but these must not be interpreted in the way of presuming an increased prevalence, but rather that with the greatly increased attention devoted to possible early cases, and the many agencies for securing treatment, more cases are brought to the notice of the doctor. The increase is most shown in the age periods 1-15.

The number of primary notifications of tuberculosis in all its forms on Forms A and B rose from 832 in 1914 to 1,038 in 1915 ; of these, 731 were of the pulmonary form, an increase of 34 on the previous year. That all who are suffering from the disease are notified is not the case, for we have even been asked to arrange for the removal of a case when no notification had been sent in, and further, deaths have been registered as from this disease in the case of persons who have never been notified. Their number, however, in all probability is not a large one, for the fatal cases are comparatively few, and it is likely in the future to be confined to those where there is real ignorance of the nature of the disease on the part of the patient. The fear of official inspection will gradually wear away as it becomes increasingly realised both by doctors and patients that a request not to visit the home of a consumptive is practically always respected. It would only be ignored after careful consideration and a communication with the doctor concerned.

The difficulty continues of finding persons at home when a call is made, and the still greater objection that is so often observed to questions being asked. In fact, it does seem as if people as a whole resented the constant inquiries that are made about one thing or another, and it often needs considerable tact and patience to draw out the facts one is in search of. And even when they are so elicited one can never feel sure that entirely truthful answers have been given.

The number of those who are or who have been receiving treatment at a sanatorium is a steadily increasing one, although a long period sometimes elapses between the sending in of the application and the admission of the patient. One case, however, was considered as unsuitable on account of the applicant having been a heavy drinker ; a somewhat curious decision, as one would have thought this to be pre-eminently a case where the regular discipline of the sanatorium might be followed by an improvement in the physical and moral state. Besides, it seems somewhat hard that

facilities for curing a bodily disease should be barred to any who is of intemperate habits.

A matter of some interest is the difference between the notifications of 1914 and 1915 in the way of sex incidence. Out of 723 primary notifications on Form A there were 360 males, while in 1914 out of 693 there were 409 males, and it is in the age periods 20-25, 25-35, and 35-45 that the difference is most marked. The non-pulmonary forms do not show so clear an alteration in this sex incidence.

During the year extra duties were thrown on the department through the necessity for inspecting the billets of soldiers in Camberwell, particularly those who belonged to the R.F.A., Camberwell Brigade. As a rule, the sanitary conditions were very good, but in a few instances overcrowding existed. The visiting occasionally to Gordon's Brewery, which was used as the headquarters, also necessitated a considerable amount of work, although much had been done by the Borough Engineer in providing modern sanitary appliances.

In June, 1915, the Committee advised that a circular be issued with regard to infantile diarrhoea, and in this circular was incorporated some information as to the prevention of flies. It is to be feared, however, that to the class who are most in need of instruction in such matters a circular does not appeal; and whether it does any more good than to afford a little interesting information to a few well-meaning people seems doubtful.

Early in the year a letter was received from the Hackney Borough Council asking for this Council's support in order to initiate legislation to prohibit the sale of wearing apparel from rag-shops and for preventing the sale of filthy and verminous second-hand clothing. To prohibit the sale of second-hand clothing from rag-shops seems to be too drastic a measure; and unless there is overwhelming proof of its being a factor of importance, and even if legislation in this direction were instituted as Hackney desires, practical difficulties, to say nothing of the hardship in enforcing it, would be likely to render it useless. It is difficult to fix on second-clothing as being the cause of the re-infection of verminous children. There is no doubt but that in some instances there are such articles purchased by the parents; but it is also certain that the great majority of cases of secondary infection occur among people who are not only poor but dirty and careless, and who are likely to buy clothing of this description either on account of its giving less trouble or its being cheaper.

To compare re-infections in this class with those who purchase second-hand clothes, and are attacked by scarlet fever or diphtheria, does not seem to be altogether fair; for, although it is possible that the children of both classes may attend the same elementary schools, the habits and conditions of the first are far more diverse than those of the second.

The Inspectors have further reported to me that in their enquiries regarding the purchase of this clothing, there has been

some reluctance among the second mentioned in giving information ; but in the case of verminous persons they have been only too glad to pass the blame on to any cause that may be suggested to them. I therefore advised that no support be given to the recommendation.

The arrangements for the loading of household refuse and manure at the East Dulwich Station go on as before, and no further progress has been made with any steps to do away with the "nuisance" which was denounced in such exaggerated and imaginative terms more than three years ago. Had the condition of things been what was described, and that by a responsible official, as the cause of many deaths in the Infirmary, it would appear that there has been serious neglect of duty on the part of those authorities who can restrain this Borough Council from doing anything which is prejudicial to the public health, for no legal proceedings have been taken by them to put a stop to the so-called nuisance. Near the end of 1915 the Infirmary was offered to, and accepted by, the military authorities as a war hospital. Considering the allegations to which the Guardians have been a party, while at the same time giving them the fullest credit for the highest motives, it is difficult to understand their mentality in offering a hospital with such a supposed "death-trap" in close proximity ; and if the nuisance were a real one, it would be equally hard to approve the judgment of the military authorities in accepting it. The whole proceedings may be well regarded as bearing testimony to the extravagant and groundless charges which have been made of the nuisance arising from the dust. The yard has been visited almost daily by the inspector, and occasionally by me, but I have never yet seen any nuisance caused by the transhipping of the dust.

FACTORY AND WORKSHOPS ACT.

In accordance with the provisions of the above Act, I submit a report showing the work that has been carried out during the year 1915.

With the continuance of the war, and the resulting dislocation of trade and labour, one would not have been surprised to see a great change in the amount and character of the work carried out under these Acts. But this has not occurred, and the figures and lists show no remarkable difference from those of last year. There were 530 inspections of factories against 344, and 2,197 of workshops compared with 1,918 last year. In fact, the figures are now returning to those of 1912. The tendency towards the gradual elimination of the small man, and his replacement by the larger concerns, seems to go on, for there were 70 fewer in the number of workshop inspections. The general improvement in sanitary condition mentioned last year does not seem to have maintained itself ; in fact, ground has been lost, for there are 11 more nuisances set out in table 2 than were present in 1914. Even though the inspection was more frequent, the defects have increased in greater proportion. On examination of the table it will appear that the increase is almost always

due to difficulties in regard to the provision of closet accommodation, and not to other nuisances which might indicate defects in the general sanitary condition. Many factories are doing extra work, and what was sufficient for the number of hands employed in ordinary times is no longer enough for the extra assistance. In some cases it was possible to make temporary arrangements with neighbouring houses, so as to avoid the building of extra closets, which would be only required while the supernumerary hands were employed.

1.—INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (including Factory Laundries)...	530	21	—
Workshops (including Workshop Laundries)	2,197	82	—
Workplaces (other than Outworkers' Premises, included in Part 3 of this Report)	874	43	—
Total	3,601	146	—

2.—DEFECTS FOUND.

Particulars.	Number of Defects			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts:—*</i>				
Want of Cleanliness... ..	40	40	—	—
Want of Ventilation	—	—	—	—
Overcrowding	2	2	—	—
Want of Drainage of Floors	1	1	—	—
Other Nuisances	70	70	—	—
Sanitary Accommodation—				
Insufficient	5	5	—	—
Unsuitable or Defective	85	85	—	—
Not separate for Sexes... ..	2	2	—	—
<i>Offences under the Factory and Workshop Acts:—</i>				
Illegal Occupation of Underground Bakehouses (s. 101)	—	—	—	—
Breach of Special Sanitary Requirements for Bakehouses (ss. 97 to 100)	—	—	—	—
Other Offences (excluding Offences relating to Outwork which are included in Part 3 of this Report)... ..	—	—	—	—
Total	205	205	—	—

* Including those specified in Sections 2, 3, 7, and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

3.—HOME WORK.

NATURE OF WORK.	OUTWORKERS' LISTS, SECTION 107.										OUTWORK IN UNWHOLESOME PREMISES, SECTION 108.			OUTWORK IN INFECTED PREMISES SECTIONS 109, 110.		
	Lists received from Employers.						Notices served on Occupiers as to keeping or sending lists.	Prosecutions.		Instances.	Notices served.	Prosecutions.	Instances.	Orders made. (Sec. 110.)	Prosecutions. (Secs. 109, 110.)	
	Twice in the year.			Once in the year.				Failing to keep or permit inspection of lists.	Failing to send lists.							
	Lists.	Outworkers.		Lists.	Outworkers.											
		Con-tractors	Work-men.		Con-tractors	Work-men.										
Wearing Apparel—																
(1) Making, &c. ...	94	46	1,399	30	3	141	—	—	—	39	14	—	—	—	—	
(2) Cleaning and washing ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Household linen ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Lace, lace curtains and nets ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Curtains and furniture hangings ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Furniture and upholstery ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Electro-plate ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
File making ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Brass and brass articles ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Fur pulling ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cables and chains ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Anchors and grapnels ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cart gear ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Locks, latches and keys ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Umbrellas, &c. ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Artificial flowers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Nets, other than wire nets ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Tents ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Sacks ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Racquet and tennis balls ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Paper, &c., boxes, paper bags ...	8	—	66	—	—	—	—	—	—	—	—	—	—	—	—	
Brush making ...	—	—	—	1	—	25	—	—	—	—	—	—	—	—	—	
Pea picking ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Feather sorting ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Carding, &c., of buttons, &c. ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Stuffed toys ...	2	—	34	—	—	—	—	—	—	—	—	—	—	—	—	
Basket making ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Chocolates and sweetmeats ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cosaques, Christmas crackers, Christmas stockings, &c. ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Textile weaving ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total ...	104	46	1,499	31	3	166	—	—	—	39	14	—	—	—	—	

The second schedule indicates the nature of defects found, and in the main explains itself. The item of "other nuisances," which includes such matters as defective roofs, dirty condition of walls and ceilings, increased from 65 in 1914 to 70 last year.

Home work was found in 35 instances to be carried on in unwholesome premises. These bad conditions were not usually of a serious nature, as they referred chiefly to badly kept or untidy premises, and in only 14 instances was it necessary to send a formal notice to amend.

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year.										Number.
Laundries	...	...	...	...	...	...	...	...	...	46
Clothing (wholesale and private)	...	...	...	...	...	...	...	...	...	275
Preparation of food	...	...	...	...	...	...	...	...	...	173
Building trades...	...	...	...	...	...	...	...	...	...	68
Bakehouses	...	...	...	...	...	...	...	...	...	101
Miscellaneous	...	...	...	...	...	...	...	...	...	944
Total number of workshops on Register										1,607

5.—OTHER MATTERS.

Class.										Number.
Matters notified to H.M. Inspector of Factories:—										
Failure to affix Abstract of the Factory and Workshop Acts (s. 133, 1901)										11
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Acts (s. 5, 1901)										17
Other ...										16
Underground Bakehouses (s. 101):—										8
In use at the end of the year										65

The cases of default of sending in lists of outworkers at the proper time were duly reported to the Public Health Committee half yearly, but an official letter always had the effect of bringing in the list, and thus avoiding any necessity for prosecution.

No instances of home work being carried on at infected premises were reported during the year. Every morning the list of notifications is compared with the list of outworkers to see if any addresses appear on both. There is, therefore, little chance of infectious disease occurring in an outworker's home without our becoming acquainted with it.

The number of factories and workshops shows an increase over last year, but in all probability this is a temporary condition which will come to an end with the war, a time which will bring changes to almost all conditions of employment.

In spite of the war and the diminished staff, the sanitary supervision of the Borough has been well maintained, but only the more essential requisites have been attended to; and even with

these, owing to the scarcity of labour, our demands have not infrequently had to be modified to meet the exigencies of particular cases, and many defects, which in time of peace would be speedily remedied, have had to be overlooked in view of the greater claim to attention of more serious matters.

The number of complaints, and the inspections to which they lead, present no great difference to previous years, and it is only when one comes to the house-to-house inspections that one realises the vast change that has taken place. This was brought into being by the thought that anything which could be done to subordinate everything to the two essentials—the provision of men and money for the war, the only thing that counts now—should be done, and however essential the sanitary condition of the Borough may be, it must be absolutely subordinated to the greater aim of achieving a victory over our enemies. No cost, even the health of the civilians, can be regarded as in any way too great to be incurred.

For the same reason the house-to-house inspections showed a reduction of nearly 50 per cent. This was brought about, first, on account of shortage of staff, and, secondly, on account of the illness of Inspector Pointon, which necessitated the transference of his district to be worked by other inspectors in conjunction with their own.

No action was taken under the Housing and Town Planning Act, any serious defects having been remedied by procedure under the Public Health Acts.

The systematic inspection of premises which may be considered as in constant need of supervision has gone on with practically no difference from previous years. It was felt that this policy was a necessary one in order to see that establishments so potential for evil, as milkshops, &c., should suffer no chance of slipping back into ill-kept or even worse conditions.

Special attention was paid to the premises occupied by those who are preparing articles of food for the troops. As contracts were entered into, we received an intimation of them from the authorities, and systematic visits were paid.

The maintenance of such inspections has meant an increase of work for a depleted staff, but this has been met with a cheerful alacrity on the part of your inspectors. Indeed, the way in which, without any self-glorification, they have unassumingly carried out their duties can only be mentioned with earnest commendation. And in spite of their official duties they have not hesitated to offer themselves as Special Constables, &c., duties which have practically swallowed not merely their spare time, but also that which might well be devoted to rest.

The whole of the eligible staff of the Public Health Department applied for enlistment before the end of the year, and of these Inspector Nash was absolutely rejected, while a certain number of others were provisionally accepted. These were Inspectors Malins and Green, and Messrs. Worsfold and Hurst, of the clerical staff.

Inspector Pointon, who had been ailing for many months, died on September 20th, 1915, having been engaged in his duties that day. His long and useful service to the Council extended to nearly thirty years, and he may truly be described as having died in harness. Apart from his official duties, his great aim seemed to lie in advancing the claims to charity of those who were deserving, but who, failing him, would have had little chance to bring themselves forward.

In conclusion, I have to express my sincerest thanks to the whole of my staff who, by extra work out of ordinary office hours, have done their utmost to combat the difficulties and extra duties which the war has imposed on us. The record of work and the sanitary condition of the Borough will, I hope, prove that their efforts have not been in vain.

I am, Mr. Mayor, Aldermen and Councillors,

Your obedient Servant,

FRANCIS STEVENS.

APPENDIX.

REPORT OF ADMINISTRATION IN CONNECTION WITH THE PUBLIC HEALTH
(MILK AND CREAM) REGULATIONS, 1912, FOR THE YEAR ENDED
DECEMBER 31ST, 1915.

1. Milk and cream not sold as preserved cream :—

—			(a) Number of Samples examined for the presence of a preservative.	(b) Number in which a preserva- tive was reported to be present.
Milk	...	...	535	—
Cream	...	...	10	8

Nature of preservative in each case in column (b) and action taken under the Regulations in regard to it.

In each case the preservative was boric acid in quantities varying from 0.40 to 0.035 per cent. In seven cases cautions were addressed to the vendors by the Public Health Committee, and in one a summons was issued.

2. Cream sold as preserved cream.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct.

(1) Correct statements made	...	...	...	...	3
(2) Statements incorrect	...	...	...	...	—
Total	...	...	...	...	<u>3</u>

(b) Determinations made of milk fat in cream sold as preserved cream.

(1) Above 35 per cent.	...	...	...	...	3
(2) Below 35 per cent.	...	...	...	...	—
Total	...	...	...	...	<u>3</u>

(c), (d) There was one instance in which the requirements as to labelling, &c., were not complied with; and in this case a caution was sent to the vendor.

3. No evidence was found of any addition of thickening substances to cream or to preserved cream.

4. In addition to the above samples, which were taken formally, 40 were taken informally; of these 30 conformed to the regulations, and 10 did not so conform.

TABLE I.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1915 AND PREVIOUS YEARS.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT.			
		Un- corrected Number.	Nett.		Number.	Rate.	of Non- residents regis- tered in the District.	of Resi- dents not regis- tered in the District.	Under 1 Year of Age.		At all Ages.	
			Number.	Rate.					Number.	Rate per 1,000 Nett Births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1910	279,566	6,511	6,657	23·8	3,871	13·8	891	455	654	98·2	3,435	12·2
1911	261,328	6,342	6,399	24·4	4,053	15·6	847	516	735	114·8	3,722	14·2
1912	263,636	6,281	6,422	24·3	3,874	14·6	823	342	551	85·8	3,393	12·8
1913	264,167	6,589	6,689	25·3	4,211	15·9	903	376	738	110·3	3,684	13·9
1914	264,121	6,494	6,580	24·9	3,981	15·0	966	603	665	101·0	3,618	13·6
1915	254,385	6,069	6,134	24·1	4,251	16·7	906	592	635	103·5	3,937	15·4

TABLE II.—CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1915.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.								TOTAL CASES NOTIFIED IN EACH LOCALITY (<i>e.g.</i> , Parish or Ward) of the District.						TOTAL CASES REMOVED TO HOSPITAL.
	At all Ages.	At Ages—Years.							Dulwich.	South Camberwell.	North Camberwell.	South Peckham.	North Peckham.	St. George's.	
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.	65 and up- wards.							
Small-pox ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera, Plague ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria (including Membranous Croup)...	406	7	122	215	44	11	7	...	32	50	123	45	85	71	353
Erysipelas	210	4	2	18	22	53	78	33	3	26	49	27	39	66	54
Scarlet Fever	848	3	238	522	59	25	1	...	71	152	164	158	163	140	756
Typhus Fever ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric Fever	28	...	2	5	7	11	3	...	2	2	13	3	6	2	21
Relapsing Fever (R), Con- tinued Fever (c) ...	(c) 1	...	...	...	...	(c) 1	...	...	...	(c) 1	...	...	...	...	...
Puerperal Fever	16	...	...	...	4	12	...	...	...	...	6	2	5	3	12
Cerebro-spinal Meningitis	29	5	4	10	5	4	1	...	3	4	5	6	9	2	17
Poliomyelitis	1	...	...	1	...	...	...	...	...	...	1	...	...	...	1
Ophthalmia Neonatorum	34	34	...	...	...	...	...	...	...	3	12	2	11	6	3
Pulmonary Tuberculosis	816	3	20	138	147	347	142	19	16	80	260	118	174	168	...
Other forms of Tubercu- losis	317	24	62	180	32	15	4	...	5	17	99	40	93	63	...
Chicken-pox	210	19	76	106	7	1	1	...	14	27	52	31	35	51	...
Totals	2,916	99	526	1,195	327	480	237	52	146	362	784	432	620	572	1,217

TABLE III.—CAUSES OF, AND AGES AT, DEATH DURING YEAR 1915.

CAUSES OF DEATH.		NETT DEATHS AT SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT.									Total Deaths whether of "Residents" or "non-Residents" in Institutions in the District.
		All Ages.	Under 1 year.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.	
1		2	3	4	5	6	7	8	9	10	11
All causes	Certified	3,936	635	205	195	172	159	481	849	1,240	984
	Uncertified	1	...	...	...	...	...	...	1	...	...
1.	Enteric Fever...	6	...	...	...	1	2	2	1	...	1
2.	Small-pox ... ..	...	...	...	...	...	...	...	...	...	...
3.	Measles	84	14	34	27	8	1	...	...	...	1
4.	Scarlet Fever	8	...	...	6	1	...	1	...	...	...
5.	Whooping Cough	36	15	13	7	1	...	...	...	...	5
6.	Diphtheria and Croup	30	1	3	15	11	...	...	...	...	1
7.	Influenza	46	...	1	1	...	4	7	9	24	4
8.	Erysipelas	1	...	...	...	...	...	...	1	...	1
9.	Phthisis (Pulmonary Tuberculosis)...	354	...	1	7	17	71	158	79	21	141
10.	Tuberculous Meningitis	50	7	8	14	13	7	...	1	...	10
11.	Other Tuberculous Diseases	67	15	5	9	19	5	9	5	...	14
12.	Cancer, Malignant Disease	284	...	1	3	1	4	27	132	116	76
13.	Rheumatic Fever	6	...	...	1	2	1	2	...	...	...
14.	Meningitis	43	9	6	7	14	3	1	3	3	12
15.	Organic Heart Disease	439	6	...	...	13	14	59	135	212	135
16.	Bronchitis	400	43	14	9	4	3	23	83	221	97
17.	Pneumonia (all forms)	450	113	74	55	28	9	38	68	65	73
18.	Other Diseases of Respiratory Organs	22	...	...	1	1	...	2	9	9	7
19.	Diarrhoea and Enteritis	161	117	24	7	3	...	2	3	5	21
20.	Appendicitis and Typhlitis... ..	13	...	...	...	1	4	5	3	...	5
21.	Cirrhosis of Liver	22	...	...	...	...	...	5	9	8	8
21A.	Alcoholism	13	...	...	...	...	...	5	8	...	5
22.	Nephritis and Bright's Disease	156	1	1	...	2	3	20	71	58	81
23.	Puerperal Fever	5	...	...	...	...	1	4	...	...	5
24.	Other Accidents and Diseases of Pregnancy and Parturition	12	3	...	...	...	...	9	...	...	2
25.	Congenital Debility and Malformation, including Premature Birth	216	216	...	...	...	...	...	...	...	3
26.	Violent Deaths, excluding Suicide...	125	12	3	12	8	6	21	31	32	30
27.	Suicide	14	...	...	...	...	1	4	6	3	4
28.	Other Defined Diseases	874	63	20	14	24	20	77	193	463	242
29.	Diseases ill-defined or unknown ... ..	...	...	...	...	...	...	...	...	...	...
		3,937	635	205	195	172	159	481	850	1,240	984
SUB-ENTRIES included in above figures.	14. Cerebro-spinal Meningitis	13	2	...	1	7	2	...	1	...	3
	28. Poliomyelitis ... ..	...	...	...	...	...	...	...	...	...	...
	Other Septic Diseases	54	7	2	3	10	9	11	5	7	18
	Pleurisy	4	...	...	...	...	...	...	1	3	1
	Mental Diseases	27	...	...	...	...	...	10	12	5	3
	Old Age	228	...	...	...	...	...	...	2	226	47

TABLE IV.—INFANTILE MORTALITY DURING THE YEAR 1915.
NETT DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER ONE YEAR OF AGE.

CAUSES OF DEATH.					Under 1 week.	1 to 2 weeks.	2 to 3 weeks.	3 to 4 weeks.	Total under 1 month.	1 to 3 months.	3 to 6 months.	6 to 9 months.	9 to 12 months.	Total Deaths under 1 year.
All causes	Certified	...	...	...	112	28	33	25	198	137	114	102	84	635
	Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	...	...	1	2	11	14
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	3	7	3	2	15
Diphtheria and Croup	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	1	1	3	2	7
Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	5	2	3	3	13
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...	2	2
Meningitis (not Tuberculous)	...	...	...	...	...	...	...	...	...	...	2	4	3	9
Convulsions	...	...	...	...	2	2	2	...	6	4	2	4	...	16
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	1	3	2	2	8	9	8	9	9	43
Pneumonia (all forms)	...	...	...	...	1	1	...	3	5	21	24	35	28	113
Diarrhoea	...	...	...	...	...	...	1	...	1	3	8	9	...	21
Enteritis	...	...	...	...	...	...	1	3	4	12	39	22	19	96
Gastritis	...	...	...	...	1	1	...	...	2	...	...	...	...	2
Syphilis	...	...	...	...	...	...	1	1	2	6	...	...	...	8
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Suffocation, Overlying	...	...	...	...	2	1	...	1	4	3	1	...	...	8
Injury at Birth	...	...	...	...	5	...	1	...	6	...	...	...	...	6
Atelectasis	...	...	...	...	6	...	1	...	7	3	...	...	...	10
Congenital Malformations	...	...	...	...	11	3	3	...	17	12	3	...	...	32
Premature Birth	...	...	...	...	65	8	8	7	88	12	...	...	...	100
Atrophy, Debility, and Marasmus	...	...	...	...	11	7	10	6	34	31	14	3	2	84
Other Causes	...	...	...	...	7	2	3	2	14	12	2	5	2	35
					112	28	33	25	198	137	114	102	84	635

TABLE V.—FACTORY AND WORKSHOP ACT.

1915.	No. of Visits.	Want of Cleanliness.	Overcrowding and Defective Ventilation.	Defective Roof, &c., and Dampness.	Sanitary Accommodation.			Defective Yards and Paving.	Defective Dust-bins.	Other Defects.	Notices.		Summonses.
					In-sufficient.	Not Separate.	Dirty or Defective.				Intimation.	Statutory.	
Complaints	8	—	1	—	—	—	—	—	—	—	—	—	—
Workshops (new)	68	2	—	7	—	—	5	1	—	1	15	2	—
Do. (old)	442		—	—	—	—	—	—	—	—	—	—	—
Laundries (new)	1	—	—	1	—	—	—	—	—	—	1	—	—
Do. (old)	38		—	—	—	—	6	—	—	—	6	—	—
Factories (new)	12	—	—	—	—	—	—	—	—	—	—	—	—
Do. (old)	135		—	—	—	—	—	—	—	—	—	—	—
Outworkers (new)	620	28	—	10	—	—	—	—	1	—	14	6	—
Do. (old)	756		—	—	—	—	—	—	—	—	—	—	—
Eating Houses	88	—	—	2	—	—	3	—	3	—	8	—	—
Schools	40	—	—	—	—	—	1	—	—	—	1	—	—
At Work in Hand	191	—	—	—	—	—	—	—	—	—	—	—	—
Visits, &c., Verminous Cases ...	52	21	—	—	—	—	—	—	—	—	6	—	—
Cleansing Station	57	1	—	—	—	—	—	—	—	—	1	—	—
Miscellaneous	1,150	—	—	—	—	—	—	—	—	—	—	—	—
Total	3,658	52	1	20	—	—	15	1	4	1	52	8	—

G. D. BEVAN.

TABLE VI.—RETURN OF WORK CARRIED OUT AT THE DISINFECTING STATION DURING THE YEAR 1915.

Articles Disinfected.					January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Beds	...	...	...	...	111	114	110	84	100	109	93	73	125	113	132	85	1,249
Blankets	...	...	...	...	228	292	1,214	143	299	183	760	205	146	772	307	194	4,843
Bolsters	...	...	...	...	90	80	75	74	70	86	85	55	83	77	88	72	935
Books—Public Library	...	...	...	...	25	15	12	7	11	24	8	9	10	13	17	13	164
Do. Day School Library	...	...	...	...	65	149	344	42	15	60	122	—	27	650	21	42	1,537
Do. Sunday School Library	...	...	...	...	9	6	—	3	7	2	—	—	—	—	6	—	33
Cushions	...	...	...	...	68	59	29	37	37	33	52	19	43	14	30	24	445
Curtains, Pairs	...	...	...	...	9	7	5	7	5	18	13	11	14	7	2	12	110
Carpets	...	...	...	...	58	36	18	22	20	26	21	14	24	20	13	25	297
Mattresses	...	...	...	...	88	81	66	51	63	63	64	39	53	48	55	49	720
Palliassees	...	...	...	...	4	8	11	3	2	4	4	7	2	3	2	2	52
Pillows	...	...	...	...	263	241	235	165	207	223	238	154	216	203	196	194	2,535
Quilts	...	...	...	...	140	120	120	92	83	119	100	74	133	118	122	108	1,329
Sheets	...	...	...	...	137	138	151	87	95	132	143	71	133	141	120	111	1,459
Wearing Apparel	...	...	...	...	1,810	2,701	8,293	1,338	3,831	1,725	4,442	442	2,253	2,511	2,510	1,532	33,388
Miscellaneous	...	...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—
Total	...	...	...	...	3,105	4,047	10,783	2,155	4,845	2,807	6,145	1,173	3,262	4,690	3,621	2,463	49,096
Mattresses Retabbed	...	...	...	...	88	81	66	51	63	63	64	39	53	48	55	49	720
Palliassees do.	...	...	...	...	4	8	11	3	2	4	4	7	2	3	2	2	52
Cushions do.	...	...	...	...	68	59	20	37	37	33	52	19	43	14	32	24	438
Total	...	...	...	...	160	148	97	91	102	100	120	65	98	65	89	75	1,210

TABLE VI.—RETURN OF WORK CARRIED OUT AT THE DISINFECTING STATION DURING THE YEAR 1915.

Articles Disinfected.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Verminous Cases—													
Persons Cleansed	214	322	317	144	192	215	187	28	313	289	340	192	2,753
Rooms Disinfected	8	8	20	31	16	1	14	11	7	7	4	3	130
Bedding do.	7	17	15	17	16	1	3	4	5	—	3	—	88
Total	229	347	352	192	224	217	204	43	325	296	347	195	2,971
Articles Destroyed—													
Palliassees and Mattresses	111	131	163	166	159	221	223	199	225	229	207	201	2,235
Miscellaneous	—	—	—	—	—	—	—	—	—	—	—	—	—
Total	111	131	163	166	159	221	223	199	225	229	207	201	2,235
Houses Visited	301	289	339	212	267	276	308	177	296	280	282	227	3,251
Rooms Disinfected	185	168	177	124	159	163	166	105	158	141	141	125	1,812
Total	486	457	516	336	426	439	474	282	454	421	423	352	5,066

TABLE VII.—UN SOUND FOOD, &c., DESTROYED AT DEPOT.

Fish.	Meat.	Fruit.	Miscellaneous.	Tinned Foods.
cwt. qrs. lbs.				
Crabs — 2 —	Nil.	Tomatoes ... lbs. 13	Dogs. 6	Nil.
Skate 1 3 9				
2 1 9	Nil.	13	6	Nil.

TABLE VIII.—SUMMARY OF SANITARY WORK FOR THE 52 WEEKS ENDING JANUARY 1ST, 1916.

DESCRIPTION OF WORK.	Pointon.	Eagle.	Scudamore.	Collins.	Morley.	Farmer.	Dewey.	Malins.	Green.	Jones.	Nash.	TOTALS.
Cleanse and limewash	93	139	140	19	89	137	162	536	445	—	132	1,892
Repair guttering, &c.	51	151	101	41	84	77	196	318	168	—	59	1,246
Ventilate under floors, &c.	14	55	62	14	66	55	41	35	23	—	9	374
Abate overcrowding	5	21	8	—	—	1	4	16	7	—	4	66
Abate smoke nuisance	1	10	5	—	—	8	11	62	10	—	3	110
Light and ventilate staircase	—	20	4	1	10	1	4	—	29	—	5	74
Provide, repair, or remove dustbin	18	54	29	30	27	32	66	127	52	—	42	477
Remove refuse or manure	18	27	9	6	8	14	10	48	16	—	4	160
Pave, level, or drain yard, &c.	31	61	41	36	23	57	44	104	81	—	31	509
Provide manure pit	—	—	2	4	—	—	3	16	3	—	4	32
Provide sufficient water supply	1	—	15	12	2	—	2	1	1	—	5	39
Provide or reconstruct receptacle (render accessible)... ..	3	—	—	12	1	5	—	—	—	—	—	21
Repair, cover, or cleanse receptacles	3	9	1	22	5	5	15	9	7	—	4	80
Provide, repair, or remove closets, pans, &c.	27	16	71	76	27	47	40	46	29	—	17	396
Proper water supply to closet and apparatus	7	65	34	85	26	25	53	102	41	—	19	457
Ventilate and remove to outside soil pipes, cleanse, repair, and trap drains or sinks	28	68	58	57	32	33	52	185	32	—	35	580
Disconnect rainwater pipes, sinks, and other wastes	1	4	6	55	4	26	—	5	8	—	3	112
Empty and cleanse cesspools, or drain into sewer	—	—	—	3	—	—	—	—	3	—	2	8
Totally reconstruct drains	1	14	5	14	4	—	7	5	11	—	7	68
Partially reconstruct drains	—	4	—	29	9	—	19	10	9	—	—	80
Animals to be kept clean or removed	—	4	1	5	2	4	5	3	1	—	3	28
Public conveniences—cleanse, supply with water, &c.	—	—	—	—	—	—	—	—	—	—	—	—
Private conveniences—cleanse, supply with water, &c.	—	2	5	—	2	—	—	17	8	—	1	35
Abate nuisance from offensive trades	—	—	1	—	—	—	—	—	—	—	—	1
Abate nuisance from road gullies	—	—	1	—	—	—	—	2	—	—	—	3
Miscellaneous	1	59	1	32	19	1	37	144	52	—	24	370

RETURN OF WORK PERFORMED IN THE SANITARY DEPARTMENT DURING THE 52 WEEKS ENDING JANUARY 1ST, 1916.

DESCRIPTION OF WORK.	INSPECTORS.												TOTALS.
	Pointon.	Eagle.	Scudamore.	Collins.	Morley.	Farmer.	Dewey.	Malins.	Green.	Jones.	Nash.	Miss Bevan.	
Visits to complaints	62	179	208	94	67	219	131	53	39	—	95	8	1,154
House inspections following on complaints	52	5	233	65	8	214	13	39	168	—	195	—	992
House-to-house inspections	112	254	237	40	61	76	218	208	179	—	13	—	1,398
Tenement inspections	—	—	—	—	86	5	29	47	—	—	—	—	167
Houses let in lodgings inspections	—	—	3	—	—	—	—	411	30	—	—	—	444
New buildings completed	—	—	—	18	15	6	1	—	—	—	—	—	40
Visits to new buildings	71	86	36	1,091	435	499	194	9	—	—	11	—	2,432
No. of inspections <i>re</i> overcrowding	71	2	11	—	—	2	1	29	—	—	—	—	116
Do. do. of slaughterhouses	—	9	10	44	—	—	10	—	10	—	2	—	85
Do. do. bakehouses	34	17	56	39	63	138	39	16	52	—	16	—	470
Do. do. cowhouses	—	55	7	54	—	7	5	—	3	—	4	—	135
Do. do. milk shops and dairies*	110	116	231	42	95	134	143	141	214	—	130	—	1,356
Do. do. eating houses	60	19	30	2	13	23	32	24	27	—	25	88	343
Do. do. ice cream shops	32	51	6	30	46	44	50	31	46	—	24	—	360
Do. do. railway stations	10	3	11	79	205	—	3	—	—	—	—	—	311
Do. do. workshops	104	98	307	29	45	156	105	121	145	—	105	512	1,727
Do. do. factories	1	—	1	11	—	39	133	61	47	—	56	181	530
Do. do. urinals, public	—	45	4	2	26	40	62	118	9	—	9	1	316
Do. do. do. private	88	225	336	137	356	723	373	285	446	—	212	—	3,181
Do. do. schools, public	21	23	37	24	20	65	41	56	25	—	34	—	346
Do. do. do. private	12	15	3	26	67	28	5	7	90	—	3	44	300
Re-inspections	1,554	3,764	3,001	2,508	3,765	3,842	2,072	3,291	3,075	—	3,787	193	30,852
Miscellaneous	81	128	243	68	480	33	508	371	357	—	219	1,202	3,690
Infectious cases visited and houses inspected ..	66	134	188	123	143	110	120	123	173	—	206	—	1,386
Do. do. or inquiries	91	153	154	120	131	165	104	112	101	—	18	—	1,149
Tuberculosis cases visited and houses inspected...	8	13	78	112	28	18	53	39	105	—	35	—	489
Do. do. or inquiries	136	406	658	27	230	329	535	564	968	—	533	—	4,386
Visits to verminous premises	23	—	290	9	6	3	16	65	103	—	128	48	691
Intimations	197	407	343	205	232	257	434	543	469	—	216	46	3,399
Statutory notices	25	145	90	28	169	66	62	121	181	—	23	14	864
Notices, houses let in lodgings	2	—	—	—	—	—	12	478	—	—	1	—	493
Summonses under P.H. Act	—	—	2	—	4	6	7	12	4	—	4	—	39
Infectious disease contacts... ..	2	4	—	—	—	—	—	—	—	—	—	—	6
Seizures of unwholesome food	—	—	—	1	—	—	—	—	—	—	—	—	1
Outworkers	—	—	—	—	—	—	—	—	—	—	—	1,314	1,314
Drainage plans, total reconstructions	3	5	17	7	9	13	9	10	25	—	44	—	142
Do. partial do.	1	12	17	9	11	15	11	9	18	—	13	—	116
Soldiers' billets	2	6	—	5	6	66	4	—	—	—	—	—	89

PROCEEDINGS DURING 1915
(as asked for by the London County Council).

PREMISES.	NUMBER OF PLACES.				Number of Inspections, 1915.	Number of Notices, 1915.	Number of Prosecutions, 1915.
	On Register at end of 1914.	Added in 1915.	Removed in 1915.	On Register at end of 1915.			
Milk Premises ...	622	9	17	614	1,356	11	—
Cowsheds ...	10	—	1	9	135	3	—
Slaughterhouses ...	10	—	1	9	85	—	—
Other Offensive Trade Premises ...	2	—	—	2	9	—	—
Ice Cream Premises ...	267	6	5	268	360	6	—
Registered Houses Let in Lodgings ..	292	—	—	292	444	{ (a) 10 (b) 538	{ (a) 1 (b) —

(a) For overcrowding.

(b) For other conditions.

Total Number of Intimation Notices served for all purposes ... 3,399

Overcrowding, 1915 :—

Number of dwelling rooms overcrowded	...	...	66
Number remedied	...	...	66
Number of prosecutions	...	...	Nil

Underground Rooms :—

Illegal occupation dealt with during year	...	...	Nil
Number of rooms closed	...	...	Nil

Insanitary Houses :—

Number closed under the Public Health (London) Act, 1891	...	Nil
Number closed under the Housing of the Working Classes Act...	...	Nil
Number of Verminous Premises cleansed under Section 20 of the L.C.C. (General Powers) Act, 1904	...	124

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

Number of persons accommodated during the year...	...	Nil
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Revenue Acts :—

Number of houses for which applications were received during year	17
Number of tenements comprised therein	...	...	53
Number of tenements for which certificates were—			
(a) Granted	...	...	9
(b) Refused	...	...	10
(c) Deferred	...	...	34

Number of Prosecutions under By-laws under Public Health Act, 1891:—

(a) For prevention of nuisance arising from snow, ice, salt, filth, &c. ...	Nil
(b) For prevention of nuisance arising from offensive matter running out of any manufactory, &c. ...	Nil
(c) For the prevention of keeping of animals in such a manner as to be injurious to health ...	Nil
(d) As to paving of yards, &c., of dwelling houses ...	11
(e) In connection with the removal of offensive matter, &c. ...	5
(f) As to cesspools and privies, removal and disposal of refuse, &c. ...	Nil
(g) For securing the cleanliness of tanks, cisterns, &c. ...	1
(h) With respect to water closets, earth closets, &c. ...	5
(i) With respect to sufficiency of water supply to water closets ...	5
(j) With respect to drainage, &c. (Metropolis Management Act, Section 202) ...	9
(k) With respect to deposit of plans as to drainage, &c. (Metropolis Management Acts Amendment (By-laws) Act, 1899)	Nil

Mortuaries:—

Total number of bodies removed ...	332
Total number of infectious bodies removed ...	1

