#### [Report of the Medical Officer of Health for Camberwell,

#### **Contributors**

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London

Metropolitan Borough of Camberwell

## REPORT

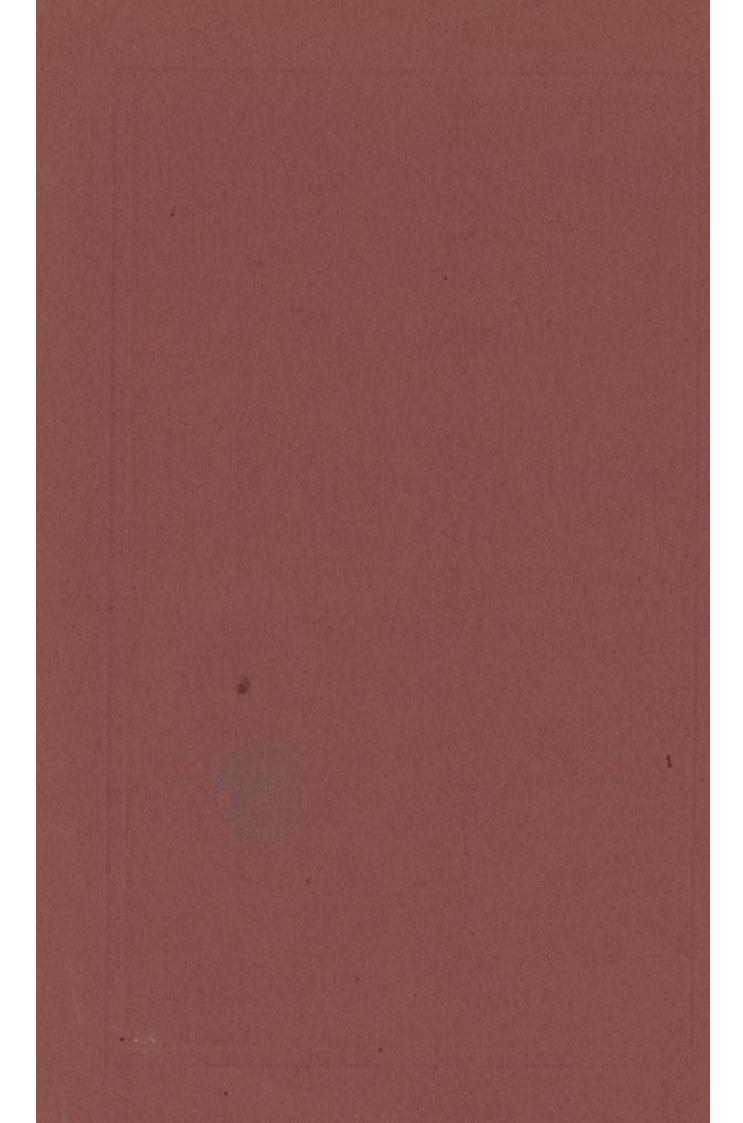
OF THE

# MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1923

HOWELL W. BARNES, B.A., M.B., B.Ch., D.P.H.

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### Report of the Medical Officer of health.

Public Health Department, 35, Brunswick Square, S.E.5. June 30th, 1924.

To the Mayor, Aldermen and Councillors of the Metropolitan Borough of Camberwell.

Ladies and Gentlemen,—I have the honour to submit to you the annual report on the health and sanitary condition of the Borough for the year 1923.

It is compiled in accordance with the Ministry of Health's directions conveyed in their circular No. 451, issued

December 15th, 1923.

The health of the Borough continues to be satisfactory. There is a 2.4 decrease in the death rate, which is 11.0 as

compared with 13:4 in 1922.

During the first 9 months of the year the number of deaths was remarkably low, and the increased number of deaths during the last quarter is accounted for by the number of deaths from respiratory diseases which cold and fog always bring.

The infantile death rate showed a marked decrease of 22 points, 56 as compared with 78 in 1922. This is the lowest

rate ever recorded in the Borough.

Although economy has been the watchword during the year, this economy has not been allowed to interfere with efficiency and progression relating to health services. It is generally agreed that economy in Public Health administration would be a false economy and might lead to a loss in human health and life.

The outstanding event during the year was the provision of a Municipal maternity ward in the St. Giles' Hospital,

Brunswick Square.

I should like to take this opportunity of expressing my thanks to the Chairmen and Members of the Public Health, Maternity and Child Welfare and Housing Committees for the assistance they have afforded me,

I desire also to place on record my appreciation of the work of the staff of the department, who have at all times, under difficult circumstances, accorded to me their loyal and

unselfish co-operation.

I am, Ladies and Gentlemen, Your obedient Servant,

> H. W. BARNES, Medical Officer of Health.

Staff of the Public Health Department at the end of 1923.

\*\*\*

Officer, Maternity and Child Welfare. Hon.Consulting Medical Officer of Health

\*Tuberculosis Medical Officer ...

\*Assistant Tuberculosis Medical Officer \*Medical Staff at Municipal Infant Wel-

fare Centres.

\*Medical Officer of Health and Medical H. W. Barnes, B.A., M.B., B.Ch., D.P.H.

Francis J. Stevens, D.M. W. Brand, B.A., M.B., C.M. Eleanor A. Gorrie, M.B.

The Medical Officer of Health (Dr. Barnes), (Mrs.) Margaret Dunstan, M.B., B.Ch., D.P.H., and J. H. Clatworthy, M.D.

E. A. Pinchin, B.Sc., F.I.C., F.R.M.S., certified bacteriologist.

\*Inspector under the Food and Drugs George T. Dewey. § Acts.

\*Sanitary Inspectors—Male.

Dist.

Public Analyst

1. Maurice Malins. §§† William T. Worsfold. §§

3. Richard F. Nash. §§† 4. George W. Scudamore. §

5. Henry C. Green. §§† 6. Donald Glenday. §§

Dist.

William R. Farmer. § 7.

William Eagle. 8.

9. George G. Morley. § 10. William E. Groom. §

11. Edwin R. Collins. §

\*Women Sanitary Inspectors.

Miss F. O'Riordan. §§†

Miss M. Butcher. §§

\* Health Visitors.

Miss A. M. Stoddart, ‡ Miss A. Duffield ‡ and Miss K. Jerrard. ‡§§ Clerks.

H. K. Wright. F. T. Harman. F. H. Wetherall.

\*C. T. Wilson (Temporary). L. A. Westacott (Temporary).

A. Beeson (Temporary).

H. N. Jones. §§† H. J. Hurst. A. J. Hardiman.

A. J. Baker (Temporary).

\*Miss M. L. Thompson (Temporary), part-time Milk Inquiries and part-time at Infant Welfare Centres.

Tuberculosis Dispensary.

Miss H. Chambers ‡‡ and Miss M. Thistleton. ‡‡‡ \*Tuberculosis Nurses.

Miss J. M. Fry and H. W. Leonard. \*Clerks. Miss P. La Croix (part-time). \*Dispenser.

Disinfecting and Cleansing Station.

Foreman Disinfector.

Assistants.

A. Franklin.

J. Knappett, E. Corby, A. Peppler (motor driver), F. Hickey, J. Smith, J. Conner.

Women Assistants.

For Cleansing of Children, etc.

Mrs. A. Cork (temporary). Mrs. S. Herd (3 days per week)

(temporary)

Mortuary Keeper. A. E. A. Dennison.

\* Officers to whose salary contribution is made under the Public Health Acts, or by

Exchequer grants.

† Meat and other Foods Certificate.

† Royal Sanitary Institute Certificate.

§ Certificate Sanitary Inspectors' Examination Board.

† Central Midwives Board Certificate and Health Visitor's Diploma.

† General Training Certificate and Central Midwives Board Certificate.

† General Training Certificate and Certificate Special Course in Tuberculosis.



#### SECTION 1.

#### General Statistics.

Area (acres)					 	4,480
Population (Census 1					 	267,198
Do. (estimate					 	272,300
Number of inhabited			1921)		 	41,419
Do. do.					 	41,780
Number of families of	or separa	te occur	piers, 1	921	 	66,104
Rateable value					 	£1,406,254
Sum represented by	a penny	rate, al	out		 	£5,700

Population.—The Registrar-General has estimated the population of the Borough at the middle of 1923 to be 272,300, and it is upon this figure that the death and birth rates are calculated.

The estimated population of the different wards is as

follows:-

	· P	OPUI	ATION.			
Ward.	Census 1921.		Estimated	1922.	Estimated	1923.
1	 15,442		15,621		15,736	
2	 14,420		14,587		14,695	
3	 14,201		14,366		14,472	
4	 16,562		16,754		16,878	
5	 16,096		16,286		16,406	
6	 13,243	***	13,396	***	13,495	
7	 16,230		16,418		16,540	
8	 15,548		15,728		15,844	
9	 16,238		16,426		16,548	
10	 8,975		9,079		9,146	
11	 11,438		11,571		11,654	
12	 14,025		14,188		14,293	
13	 10,662		10,786		10,866	
14	 10,712		10,836		10,916	
15	 12,126		12,267		12,361	
16	 14,566	***	14,735		14,844	
17	 14,642		14,812		14,922	
18	 16,029		16,215		16,335	
19	 12,137		12,278		12,369	
20	 3,906		3,951		3,980	
	267,198		270,300		272,300	
					-	

#### SECTION 2.

#### Extracts from Vital Statistics of the year.

			Total.	M.		F.			
Births	{ Legitimate   Illegitimate		5,522	2,81		2,712	Bi	rth Rate,	20.7
DILCIIS	Illegitimate		135	7	2	63 5			
Deaths			3,000	***			Dea	ath Rate,	11.0
	Number of women d	lying in,	or in e	onseque	nce of	, Childbi	rth	:	
	From Sepsis							9	
	From other c	auses						11	
	Deaths of infants un	der one	year of	age per	1,000	births		56.7	
	Legitimate, 3					Total		321	
	Deaths from Measles	s, all age	s					35	
	Deaths from Whoop	ing Cou	gh, all	ages				30	
	Deaths from Diarrh				e			49	

Births.—The total number of births registered in the Borough was 5,052. The corrected number of births arrived at by adding 690 births which occurred outside the Borough of persons belonging to the Borough, and deducting 85 births which occurred in the Borough of persons not belonging to the Borough, amounted to 5,657—2,775 females and 2,882 males.

The birth rate for 1923 was 20.7 births per thousand population. The following table gives the births and birth

rates since 1919:-

Year.	Population.	Births.	Birth Rates.
1919	285,220	5,183	18-2
1920	284,712	7,505	26.0
1921	269,600	6,301	23.3
1922	270,300	5,802	21.4
1923	272,300	5,657	20.7

The effect of the declining birth rate, which is viewed with great concern in some quarters, is counterbalanced by the preservation of infant life. In these days of unemployment and overcrowding a decrease in the birth rate could be viewed with equanimity if it were spread equally throughout the Borough. There is reason to believe that this is not the case, as the fall is most marked in the most virile part of the population.

Illegitimate Births.—The number of Camberwell births reported as illegitimate was 135, equal to a rate of 23.8 per 1,000 registered births.

Notification of Births Act.—During the year 5,054 births were notified as follows:—

Notified by Midwive		 	 	2,829
Notified by Medical	tioners	 	 	1,330
Notified by Parents	 	 	 	895

Still-Births.—Of the 5,054 births notified, 144 are returned as born dead. There is no doubt that a large number of still-births could be prevented, if only pregnant women would realise the value of ante-natal supervision, in order that any complications in the management of the labour might be foreseen, and the risks avoided or minimised.

Effective supervision of pregnant women, especially primagravidæ, has resulted in the saving of many mothers and children from the danger of obstructed labour, and other

risks occurring during the actual birth.

The difficulty is to educate the public as to the advantages of ante-natal care. This education can only be given with profit to women who place themselves under professional care from the early days of pregnancy, and who

continue to be supervised up to the time of the birth of the child.

We know that if expectant mothers were healthy, and if their offspring were kept healthy until they had a good start in life, the amount of invalidism would be very materially diminished. We also know that the death of a newly born child is a loss, because of the loss of working capacity of the mother immediately before and after birth. Further, if a child suffers from an ailment which does not kill, but which causes crippling or chronic invalidism, the loss to the country is even greater, for the parents or the community have to assume the heavy financial responsibility of supporting an unproductive member of society.

Deaths.—The number of deaths registered during the year as having taken place in the Borough was 3,227. The corrected number of deaths, found by deducting 765 deaths of non-residents who died in the Borough, and adding 538 deaths of inhabitants of Camberwell who died elsewhere, is 3,000.

The corrected death rate for 1923 is 11.0, as compared with 13.4 for 1922. The sub-joined tables show the total deaths registered, redistributed, and the death rate for each sub-district and for the whole Borough since 1921:—

DEATHS REGISTERED IN THE SUB-DISTRICTS OF CAMBERWELL.

Year.	Borough,		East Dulwich.	North-West Camber- well.	Peckham,	North Camber- well.	Unat-
1921	3,245	160	493	819	940	801	32
1922	3,635	183	515	989	1,028	893	27
1923	3,000	189	419	799	881	696	16

#### DEATHS REDISTRIBUTED IN SUB-DISTRICTS.

Year.	Borough.	Dulwich.	East Dulwich.	North-West Camberwell.		North Camberwell,
1921	3,245	162	498	827	949	809
1922	3,635	184	519	996	1,036	900
1923	3,000	190	421	803	886	700

Year.	Borough.	Dulwich.	East Dulwich.	North-West Camberwell.		North Camberwell.
1921	12·0	10·07	11.08	12·3	12·3	12·02
1922	13·4	11·4	11.3	14·8	13·3	14·3
1923	11·0	11·6	9.1	11·7	11·3	11·0

TABLE No. 1 .- CAUSES OF, AND AGES

Enteric Fever Small Pox Measles Scarlet Fever Whooping Cough					2010					
Small Pox Measles Scarlet Fever	***									
Small Pox Measles Scarlet Fever	***							314 74	E LIE STEEL	1000
Measles Scarlet Fever								3	-	-
Scarlet Fever								-	-	-
			***					35	3	. 15
Whooping Cough								7	-	4
								30	10	10
Diphtheria and Cr	oup					***		72	4	12
Influenza						***		25	3	-
Erysipelas								2	-	-
Phthisis (Pulmona)		erculo	sis)					252	-	1
Tuberculous Menin								22	6	3
Other Tuberculous	Diseas	ses						31	2	1
Cancer	***	***			***	***	***	333	-	-
Rheumatic Fever					***	****		16		-
Meningitis								22	6	1
Organic Heart Dis	ease		***		***	***	***	301		1
Bronchitis			***					276	10	4
Pneumonia (All fo							***	244	46	12
Other Diseases of		atory	Organs					31	2	1
Diarrhoea and En								49	41	8
Appendicitis, Typl	ilitis							9	-	-
Cirrhosis of Liver								20		-
Alcoholism								1	-	-
Nephritis, Bright's	Diseas	se						72	-	-
Puerperal Fever								9	-	-
Other Accidents an								11	-	-
Congenital Debility	y and	Malfo	rmation	, inc	luding	Prema	ture			
Birth							***	146	145	-
Violent Deaths								76	2	3
Suicides								27	_	-
Other Defined Disc								867	39	4
Diseases ill-defined		known	1		***	***		9	2	-
Encephalitis Letha	rgica				•••			2	-	-
			Tota	al				3,000	321	80

AT, DEATHS DURING THE YEAR 1923.

2 to 3.	3 to 4.	4 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 35.	35 to 45.	45 to 65.	65 and up.	Total Deaths whether residents or non-residents in Institutions in the Borough.
	- 6 1 1 1 4 - 1 1 - 3		- 3 1 1 5 3 2 4 3 - - - - - - - - - - - - -			2 - 1 - 1 - - - - - - - - - - - - -		1 — — — — — — — — — — — — — — — — — — —		15 11 1 3 1 88 11 14 107 5 9 78 74 84 7 18 5 1 11 3 9
40	34	31	58	41	74	211	198	763	1,149	935

The following comparative death rates are of interest: -

DEATH RATES, 1923. England and Wales 11.6 London ... 11.2 ... Camberwell ... 11.0 105 Great Towns 11.6 157 Smaller Towns 10.6

Seasonal Mortality.—The mortality in the four quarters of the year was:-

		Deaths.	 	De	ath Rates.
First Quarter	 	 781	 		2.8
Second Quarter	 	 796	 		2.9
Third Quarter	 	 631	 	***	2.4
Fourth Quarter	 	 792	 		2.9

Causes of Death .- It will be seen from Table 1 that cancer has been the cause of the largest number of deaths.

Cancer and Malignant Disease.—The deaths ascribed to cancer or malignant disease each year since 1919 are shown in the following table:

Year.	Males.	Females.	Total.	Percentage of total deaths.
1919	153	183	336	0.9
1920	132	186	318	0.9
1921	175	168	343	1.0
1922	148	178	326	0.9
1923	136	197	333	1.1

During the year the following pamphlet was issued in connection with this disease:-

This disease is increasing in this country.

In 1921 in England and Wales 1.21 deaths of every 1,000 of the population was due to cancer.

Quack remedies at the present moment play a prominent part in the treatment of this condition, and the object of this leaflet is to instruct the public as to the signs of its beginning in sites of the body commonly affected, and the importance of an immediate examination by a medical man, for the purpose of recognition in the most favourable stage for a cure. A few hints as to the causation of the disease are also added for guidance.

Cancer frequently follows on chronic and prolonged irritation of certain parts

Cancer of the Lip is caused by irritation from a pipe stem, particularly a clay pipe, carried from day to day on the same place. This irritation gives rise to a sore.

Cancer of the Mouth is often due to the result of irritation from a broken tooth, or badly fitting dentures, and any ulcer or swelling in the mouth should be viewed with suspicion.

Cancer of the Breast usually shows itself as a lump in the breast, and it is

frequently caused by wearing clothes which irritate the nipples and breast.

Cancer of the Bowels sometimes results from chronic constipation, and any bleeding or mucus passed with the stools should at once be brought to the notice of a doctor.

Cancer of the Womb. As this disease often occurs at the change of life, any abnormal signs should not be treated with indifference, but medical advice sought.

Cancer of the Skin. A tumour involving the skin, or an ulceration lasting some time, suggests this disease.

Remember that cancer in its early stages is almost invariably unaccompanied

Immediate Recognition is most important. Don't wait for pain.

(Signed) H. W. BARNES, Medical Officer of Health.

Respiratory Diseases.—276 deaths were due to bronchitis, 244 to pneumonia (all forms), and 31 to other respiratory diseases, as compared with 417 bronchitis, 434 pneumonia (all forms), and 26 other respiratory diseases during 1922.

Violent deaths (excluding Suicide).-76 deaths are classified under this heading.

Suicide.—27 persons committed suicide, as compared with 19 in 1922.

#### INFANTILE MORTALITY.

The number of deaths under one year for the year 1923 was 321.

It is very satisfactory to note that the infantile mortality

rate was 56 per 1,000 births.

This low mortality was largely due to the small number of deaths from the respiratory diseases. The number of deaths, however, from congenital malformation, premature birth, atrophy and other allied conditions still remains at a high level.

The number of deaths amongst illegitimate infants

was 13.

#### COMPARATIVE TABLE INFANTILE MORTALITY.

				Inf	antile	Morta	lity Rate.		
Year.			Can	nberwe	11.		England	and	Wales.
1919				82				89	
1920	***		***	71				80	
1921		***		74				83	
1922			***	78	***		***	77	
1923	***			56	***			69	

It is customary to consider the value of Infant Welfare work from the standpoint of the infantile mortality rate, and, although I do not agree that this work has been the one and only cause responsible for diminishing the infantile mortality rate, I do submit that it has played an important part.

It is worthy of notice that there is a striking coincidence in the increase in the number of Health Visitors and the

decrease in the infantile mortality rate.

But, apart from the infantile mortality rate, the value of the Infant Welfare Centre and the Health Visitor lies

in the prevention of disease and the deformities arising from diseases.

Those who work at Infant Welfare Centres have seen wasting children improve visibly week by week; have seen incipient cases of diarrhea and pneumonia caught in the early stages and readily cured, instead of slowly but surely

developing into the serious cases.

A further example may be quoted, that of rickets, which with organised supervision yields to treatment. We are consequently faced with the alternatives of the prevention of children coming into the world, or when they are born they must be placed on such a basis that they are not a dead weight on the community as a whole.

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TABLE No. 2.—INFANTILE MORTALITY DURING THE YEAR 1923.
DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER ONE YEAR OF AGE.

Cause	of Dea	th.			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 under 1 year.	
Small-pox					_	_	-	-		_		_	_	_	
Chicken-pox					-	_		-	-		-	_	_		
Measles	***	***			-	-	-	-		_	_	1	2	3	
Scarlet Fever					-	_	-				_	_		_	
Whooping Cough					_	_	_	-		1	2	2	5	10	
Diphtheria and C	roup				_	-	_		_	1	ī	_	2	4	
Erysipelas					_			_				_	_	_	
Tuberculous Men	ingitis				_	_		_	200	_	1	_	5	6	
Abdominal Tuber	culosis				_		_				_			_	
Other Tuberculou	is Dise	ases				_	_	_	-	_		1	1	2	
Meningitis					1	_	_	_	1	1	1	2	î	6	
Convulsions					5	1		300	6	2	_	ī	î	10	10
Laryngitis						_	_	_	_	_			_		1
Bronchitis						_	2	1	3	1	1	2	3	10	
Pneumonia					1	1	_	2	4	11	6	11	14	46	
Diarrhoea						_	_	ĩ	1	2	2	1		6	
Enteritis					_	1	1	_	2	3	12	12	6	35	
Gastritis						_			_	_	1	-	_	1	
Syphilis					_	_					_				
Rickets								_		_					
Suffocation				***	1	_	1		2			-	-	2	
Injury at Birth				***	2			-	2	-	-	-	-	2	
Atelectasis					_								-		
Congenital Malfor		,			23	3	-	-	26		2	-	-	34	
Premature Birth	ZIIW VIOI		***	***	50		-	_		5			1		
Atrophy, Debility		•••			14	5 2	4	5	64	6 7	2	-	_	72	
Other Causes		***	***	•••	10	2	6	1	18		5	2	2	34	
O THOI CHUICO		***	***	***	10	2	0	3	21	2	6	-5	4	38	
TOTALS					107	15	15	13	150	42	42	40	47	321	
									201						

TABLE No. 3.—DEATH AND INFANTILE

	Population.	Birth Rate.	Death Rate.	Infantile Mortality Rate.	Scarlet Fever.
Whole Borough	272,300	20.7	11	57	7
Ward.	3 5 400	23.5	12.5	64-8	_
No. 1	15,736 14,695	23.0	12.2	59-1	_
3	14,472	23.3	10.9	48.7	-
4	16,878	24.7	11.2	76-7	1
5	16,406	23.7	12.4	84.6	1
6	13,495	21.3	8-1	69-4	_
7	16,540	25.7	11.0	77-4	-
7 8	15,844	23.1	12.8	65-6	1
9	16,548	21.0	11.4	49-0	1
10	9,146	21.9	12.4	84.5	-
11	11,654	17.5	9.6	49.0	1
12	14,293	20.2	10.9	41.5	
13	10,866	13-6	9.4	54-0	
14	10,916	18-4	11.4	34.8	-
15	12,361	16-4	11.0	44.3	
16	14,844	17.6	10-1	42.0	-
17	14,922	26.5	7.1	25.2	1
18	16,335	14.9	8.9	45.0	-
19	12,369	11-7	11.2	34-4	-
20	3,980	10.8	13.3	69-7	1
Unknown Locality		-		-	

#### MORTALITY RATES OF PRINCIPAL DISEASES.

De	aths from		All forms	All forms		Bron
Diphtheria.	Measles.	Whooping Cough.	Tuberculosis.	Pneumonia.	Cancer.	chitis
72	35	30	305	246	333	276
5	7	_	20	24	17	19
5	8	2	28	15	17	25
1	5	3	17	12	12	18
5 7	_	3	12	12	17	21
7	1	4	22	24	22	23
4	1	1	17	13	12	6
9	4	6	32	21	15	16
6 3	-	3 2	14	16	24	25
3	1	2	29	15	16	15
5	1	1	6	10	16	13
_	4	1	14	6	17	7
3	2	3	8	11	21	12
3 5	-	-	9	5	12	2 7
5	-	1	22	15	14	
4	1	-	6	8	17	12
3 3	-	-	17	10	23	16
3	-		6	9	13	12
-	-	_	13	9	18	10
1	-		5	7	16	12
-	-	-	4	4	10	3
-	-	-	4	1	3	2

#### SECTION 3.

## NOTIFIABLE INFECTIOUS DISEASES.

Small-pox.

One case of this disease was notified in the person of a young woman aged 23. The history of the case is as follows:—

The patient was employed at a hotel in the Borough of Westminster, and was first taken ill on Sunday, September 2nd, with a cold and a headache. On Monday, September 3rd, she had a temperature, and stated that the headache was worse, and complained of pains in the back.

She was unfit for work, and was sent to her home in

East Dulwich.

The rash appeared on Wednesday morning, September 5th. I was called in consultation by the private practitioner in charge of the case, and diagnosed it as small-pox, which was confirmed by the London County Council Consultant.

The patient gave a history that she attended a visitor at the hotel during the period August 13th to 19th, and, according to her statement, the visitor was ill and had "spots."

This visitor did not receive any medical attention during

her stay at the hotel.

The Medical Officer of Health for Westminster was advised as to the necessity of tracing this woman, and the

probability of other cases arising.

The usual procedure of advising vaccination of all contacts, keeping them under daily observation, and the disinfection of the clothing of persons in contact with the patient was carried out.

I am pleased to state that no further cases developed

in Camberwell.

Diagnosis.—In view of the difficulty in diagnosing small-pox, and the few opportunities general medical practitioners have of seeing this disease, I am of the opinion that facilities should be available for medical men and students seeking an intimate acquaintance with small-pox.

Although many books have been written on the subject as an aid to the successful diagnosis of small-pox, it must be conceded that bedside study of the disease in an isolation

hospital would be of greater assistance.

So far as London is concerned, this could only take place at the London County Council Small-pox Hospital.

I have no doubt that there would be administrative

difficulties to overcome, but these should not weigh against a suggestion of this kind if it were productive of an increased knowledge of the disease in its various phases.

#### Vaccination.

The value of vaccination and re-vaccination cannot be too strongly urged as a protective agency, and public indifference to the need is causing much concern to those responsible for staving off outbreaks of small-pox.

The number of cases in England has increased since the cessation of the war, with the exception of one year,

as will be seen from the following figures:-

Year.			No. of	Small-	pox Cases Notified	1.
1918	 				63	
1919	 	***			311	
1920	 		***		280	
1921	 		'		336	
1922	 				973	

In 1923 over 2,000 cases of smallpox were notified, and I have no hesitation in saying that the present situation is

grave.

The danger of a serious epidemic of this disease occurring in England is always possible, due to the absence of systematic vaccination, and until the people of this country realise the value of it there will always remain a large section of the community susceptible. It is only by the vigilance of the medical profession that an epidemic on a large scale has not occurred.

In London the services of Dr. McConnell Wanklyn, L.C.C. Consultant, and the Medical Officer of Health of each Borough are available to assist the private medical

practitioner where a doubt exists as to diagnosis.

I am certain there is not so great an objection to vaccination as the number of exemption certificates obtained each year would make it appear. There is still a settled conviction in the minds of some that arm to arm vaccination is still in progress, and that certain diseases are transmitted from one individual to another by vaccination. These stories have been handed down and enlarged, with the result that the present generation, who have not taken the trouble to enquire into the method at present in use, develop conscientious objections.

To-day lymph is obtained from specially selected calves, and before it is distributed for use the animal from which it was derived is slaughtered and the body subjected to

careful examination.

No lymph is used if there is the slightest cause for doubt as to its purity.

Further, vaccination is carried out nowadays with

aseptic precautions.

In all cases of primary vaccination the vaccinator should aim at procuring four good-sized vesicles, in order to obtain the maximum result, and the total area of vesiculation should not be less than half a square inch.

#### Diphtheria.

During the year this disease was very prevalent in Camberwell, the notifications numbering 875. Of these 860

were removed to isolation hospitals.

Although the number of cases notified is high, yet the death rate from diphtheria has remained more or less stationary, there being 72 deaths.

DEATHS FROM DIPHTHERIA IN THE BOROUGH FROM THE YEAR 1919.

Year.	ear. No. of Notifications.				3.	No. of Dea		
1919			483				35	
1920			937				62	
1921			875				64	
1922			821				63	
1923			875				72	

It is possible to reduce the death rate from diphtheria by the early administration of anti-toxin and the incidence of the disease by the practice of inoculating toxin and anti-toxin.

Progress in the direction of active immunisation, how-

ever, is slow.

Health propaganda and the education of the public in the value of such prophylaxis should, in time, bear fruit, and result in the eager acceptance of this agency for the protection of children against diphtheria, with its accompanying mortality. The extreme prevalence of this disease

is probably due to a large extent to "carrier cases."

It is known that virulent diphtheria bacilli may be present in large numbers in the throat and nose of an individual without there being any clinical symptoms of the disease present. It can be understood that cases of this type are a distinct menace to the health of the community as a whole, and it requires no further comment to demonstrate the importance of the adoption of means which would prevent the spread of this disease, particularly in a Borough like Camberwell, with its densely populated areas.

Until something is done on these lines it is doubtful whether any appreciable decrease in the number of cases of

diphtheria can be looked for.

#### Scarlet Fever.

During the year 1923, 521 cases were notified; of these 479 were admitted to the Isolation Hospitals, and the number of return cases was 19.

The number of deaths from scarlet fever during the

year was 7.

In the following table is set out the corresponding figures for 1919 to 1923:—

Yea	r.	Number of Notifications.	Number of Deaths.	Death Rate per 1,000 Population.	Case Mortality per cent.	Percentage of cases removed to Hospital.
1919		700	12	0.04	1.7	Hold Division
1920		1,308	13	0.04	0.9	81.1
1921		1,959	19	0.07	0.9	89.4
1922		1,083	22	0.08	2.0	82.2
1923		520	7	0.02	1.3	92.1

The table on pages 18 and 19 shows the house distribution of cases of scarlet fever in Wards.

#### Typhoid Fever.

10 cases were notified during 1923, as compared with 11 in 1922. 9 of these were removed to hospital. 3 of the 10 cases notified died.

All the cases in question occurred in separate houses, and enquiries proved that two of the cases were infected outside the Borough. Of the remainder two gave a history of eating shell fish, and three others of eating watercress.

#### Puerperal Fever.

During the year 16 notifications of this disease were received; 11 of these were removed to Institutions. The deaths numbered 9.

Every case was investigated, with a view of discovering the source of infection, and the necessary disinfection carried out.

The notifications received, and deaths from this cause, for the years 1919 to 1923 are as follows:—

		1	Deaths.			
1919			17	 		9
1920 1921			20	 		8
1921		***	14 10	 ***		9
1923			16	 	***	9

TABLE No. 4.-

1-70	Ward 1	Ward 2	Ward 3	Ward 4	Ward 5	Ward 6	Ward 7	Ward 8	Ward 9
Number of Houses in which—									
I case occcurred	25	15	9	19	24	25	24	21	25
2 cases do	-	4	2	2	4	2	1	2	3
3 cases do	1	_	1	2	2	2	1	_	_
4 cases do	-	1	-	_	_	_	1		
5 cases do	-	-	-	_	_	_	_		
Total Houses	26	20	12	23	30	29	27	23	28
Number of Cases noti- fied from Local Insti- tutions  Number of Cases which were notified as suf- fering from Scarlet Fever after removal to Hospital for another Infectious Disease				-		-			

#### SCARLET FEVER.

Ward 10	Ward 11	Ward 12	Ward 13	Ward 14	Ward 15	Ward 16	Ward 17	Ward 18	Ward 19	Ward 20	Total Cases.
7	28	16	17	10	11	19	27	15	10	2	349
1	4	2	1	-	4	5	3	1	-	_	82
_	_	-	1	-	2	3	-	-	-	-	45
_	-	-	-	1	-	-	-	-	-	-	12
-	_	-	_	1	1	-	-		-	-	10
8	32	18	19	12	18	26	30	16	10	2	
	H. W.					Tribility of the same of the s					
_		1010	_	-	-	_	-	-	-	-	6
	1000		130	Total Land		200					more and
		PER	2780	100		1					
	2005	-	1000		1199						H. T.
_		_	-	-	-	-	-	-	-	-	17

TOTAL NOTIFICATIONS ... ... ... 521

Puerperal Fever-Contd.

The mortality rate of this disease remains high. The necessity for the early removal of cases to Institutions cannot be too strongly advocated. In the majority of homes there are not facilities for the successful treatment of this disease, and I am certain that, where a doubt exists with regard to the diagnosis, it would be better to remove the patient to an Institution, in order that she may be placed in the most favourable circumstances for treatment.

The number of deaths due to, or associated with, childbirth is extremely disquieting, as will be seen from the

following table:-

Maternal Mortality.

Year.		Total No.	From Sepsis.	Other Causes.		per 1,000 ths.	Total Child-	
1001		Deaths.	ізерыя.	Causes.	Sepsis.	Other Causes.	Birth.	
1919		21	9	12	1.73	2.31	4.04	
1920 1921	•••	14 16	8 9	6 7	1.06 1.42	0·79 1·11	1.85 2.53	
1922		15	7	8	1.29	1.47	2.76	
1923		20	9	11	1.59	1.94	3.53	

When one considers the above figures, no other conclusion can be drawn than that there has been no improvement in the death rate of women in childbirth. In fact, last year's figures

show an increase over the three preceding years.

In my opinion, improvement can only be obtained by the proper care of the expectant mother. Further, apart from the deaths from this cause, it must not be forgotten that a large number of women who survive a pregnancy suffer some permanent injury or impaired health, which, in all probability, could have been prevented by treatment during the period of pregnancy.

#### Pneumonia.

32 cases of acute influenzal and 52 of acute primary pneumonia were notified during the year. Nursing services were provided in all cases where assistance was sought.

Cerebro-spinal Meningitis.—No cases of this disease were notified.

Acute Polio-Myelitis and Encephalitis.—Four cases were reported during the year. Each case was followed up, to ensure that treatment was carried out to prevent the development of permanent deformities.

Malaria.—There were 20 cases of this disease notified, and the whole of them were infected in the Army during the war.

Dysentery.—Only one case of this disease was notified, the patient developing the disease in Mesopotamia during the war.

Encephalitis Lethargica.—Three cases were notified during 1923. Two were removed to Institutions. All three cases died. One death was certified as cerebral abscess.

Ophthalmia neonatorum.—Thirty-three notifications of cases of ophthalmia neonatorum were received during 1923.

0	17 -7		neon	- 4	
Uppn	tnutte	nnc	neon	ato	$rnn_{-}$
an govern			100010	Sec. or a	

	Cases '	Freated	X7:-:	¥7: -	m . 1
Notified.	At Home.	In Hospital.	Vision Unimpaired.	Vision Impaired.	Total Blindness.
33	24	9	32*	Nil	Nil

<sup>\*</sup>One case moved out of Borough, address unknown.

No cases of cholera, plague, typhus, trench fever, anthrax, relapsing fever, glanders, rabies, or continued fever were reported in 1923.

#### TUBERCULOSIS.

During the year 1923, 657 new cases of tuberculosis were notified, 505 representing pulmonary tuberculosis and 152 other forms of the disease.

The deaths of non-notified cases of tuberculosis numbered 73, and the total tuberculosis deaths 305; the proportion of non-notified tuberculosis deaths to the total deaths from this

disease being approximately one in four.

Hospitals and other Institutions are the principal offenders in the matter of failure to notify cases. Reasons for the failure may be found in the fact that a large percentage of cases arrive in a moribund condition, and sometimes the actual nature of the disease is only discovered after death.

No instances of wilful neglect or refusal to notify have been discovered.

It cannot be said that any one occupation has caused an excessive incidence of, or mortality from, tuberculosis in the Borough.

A full report by the Tuberculosis Medical Officer, Dr. W. Brand, will be found on pp. 27-38.

TABLE SHOWING OCCUPA	ATION OF	MEN	WHO DIED FROM TUBERCULOSIS	SIN	1923
Parmon		3			1020.
	•••	0	G.P.O. sorter	***	1
Bicycle repairer Boot maker		1	Helmet maker	***	1
Dooki		1	Hotel waiter		2
Dankat make	***	1	Hairdresser		2
Dla alamitt		1	Hawker		
Builder and decorator		1	Jeweller's traveller		1
Dai-Llanes		2	T 41 1	***	1
Brass finisher		1			1
Bus conductor	***	9	Labourer, leather-dresser's		1
Billposter's assistant		ĩ	Manager, wadding manuf turer		1
Clerk, Civil Service		1	3.5		1
do. Inland Revenue		1	3.6 ' 1 3' '		1
do. Met. Water Board		î	Musical director Mechanic, monotype		1
do. Law Courts		1	Machine minder, printer's		i
do. Gas Company	•••	1	No occupation	•••	3
do. printer's		î	Newspaper, job hand		1
do. Commercial		8	Publisher's manager		1
Carman, Municipal		1	Porter, Public Record Office		1
Carman and contractor		î	do. Lodging house, L.C.		1
Comb maker		î	Packer, general stores		1
Compositor		î	Packing case maker		î
Commercial traveller		3	Pattern maker, engineer's		î
Coachman		ĭ	Deinterla societant		2
Carmen	***	2	Polisher, gold and silver		ĩ
Coach painter		ī	Plumber, journeyman		1
Chemist's assistant		î	Postman		î
Civil Servant		î	Porter, railway		2
Decorators		3	Packer		ī
Driver, electric car		1	Plasterer		î
Dispatcher, cinema films		1	Restaurant proprietor		î
Driver, motor cab		2	Secretary, company		î
Dock labourer		1	Storekeeper, clocks and wate		î
Electric railway porter		1	do. superintendent		ī
do. switchboard atte		1	Stone mason		î
Electrician		1	Sheet metal worker		î
Engineer's turner		1	Seaman, R.N		1
do. storekeeper		1	Stoker		1
French polisher		2	Shunter, railway		1
Fish hawker		1	Scientific instrument maker		1
Fuse maker, Royal Arser		1	Stonemason		1
Firewood merchant		1	Timber merchant		1
General Labourer		13	Timekeeper, printer's		1
Gauger, licensed victuall	er's	1	Van boy		1
Gas meter tester		1	Warehouseman		4
do. repairer		1	Watchmaker's assistant		1
Gas fitter		3	Window cleaner		1
Glazier		1			-
Ginger beer brewer	***	1	TOTAL		139
Gardener		1			
Greengrocer's assistant		1			

Table Showing Occupations of Women who Died from Tuberculosis in 1923.

Book-keeper		1	Needlewoman			1
Barmaid		1	No occupation		***	20
Children's nurse	***	1	Patent medicine labe	ller		1
Confectioner's assistant	***	1	Pin driller			1
Cigarette machine minder		1	School teacher			1
Chocolate packer		1	Saleswoman			1
Draper's clerk		2	Shorthand typist			5
Domestic servant		1	Shop assistant, news			1
Factory hand, soap		1	Shop assistant			1
do. biscuit		1	Silk weaver	***		1
Fancy feather worker		1	Toilet requisite packet	er		1
Gas meter repairer		1	Theatre attendant			1
Housewife		36	Widow			22
Hairdresser's assistant	***	1				
Laundry woman	***	1	TOTAL			113
Lady's maid		1				
Machinist		2				

#### NON-NOTIFIABLE DISEASES.

Measles and German Measles.—These diseases are not notifiable in Camberwell.

The principal means of obtaining information with regard to them is through the medium of the school absences returns and the health visitors. The number of cases that came to our notice during the year was considerably less than in 1922.

The number of deaths recorded was 35, as compared with 84 in 1922.

Every case that comes to the knowledge of the department is visited, and the parents advised of the necessity of seeking the assistance of a doctor. Strict isolation as far as possible is insisted on, and where necessary the services of a district nurse are provided.

Whooping Cough.—The number of deaths from this disease was 30, as compared with 80 in the previous year.

It is satisfactory to record a decrease in the number of deaths from this cause, but, as will be observed from the following table, the mortality rate is still very high among children under 5 years of age.

TABLE OF DEATHS.

1923.	Under 1 year.	1 to 2 years.	2 to 3 years.	3 to 4 years.	4 to 5 years.
30	12	8	5	1	4

As to how far the incidence rate of this disease is capable of reduction is a matter of speculation.

TABLE No. 5.-

									121	DLE	140.	_
				_	-				Age	Dist	tribut	ion,
				Notified	Hospits	aths.	Unde	r 1.	1 to	2.	2 to	3.
1	Diseas	ie.		Total Cases Notified.	Admitted to Hospital.	Total Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.
Cholera, Plague Diphtheria and C Scarlet Fever Enteric Fever Puerperal Fever Acute Influenzal Acute Primary Erysipelas Cerebro-spinal M Poliomyelitis Malaria Dysentery	Pening	 	iia	1	1	1		3		13 4		9
Pulmonary	1	M. F.		 298 207 505	297 183 490	115	-	=	1	=	=	1
Non-Pulmonary	{	M. F.		 87 65	51 33	24 24	5	5 4	3 1	2 2	1 4	1
	1	Total		 152	84	48	5	9	4	4	5	1

#### NOTIFIABLE DISEASES, 1923.

	deser	ons a	na L	eath	š.												
3 to	0 4.	4 t	0 5.	5 to	10.	10 t	0 15.	15 t	io 20.	20 t	o 35.	35 t	o 45.	45 t	o 65.		and p.
Notifications.	Deaths.	Notifications.	Deaths.	Notideations.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.
13 44 - 1 7 1 1 - 12 - - -	14 1	61 29 		286 215 1 		147 94 2 - 2 1 1 - 8 - -				1		-  -  -  -  3   3   1   2   7   7   1   18   -  -  -  -  -  -  -  -  -  -  -  -  -  -		-   4   2   2   -   12   1   14   -   3   -   -   -   -   -   -   -   -	1 1		1
1	-	_	_	8 6	2	5 10	3	22 33	8 21	125 87	40 49	67 33	41 13	64 34	39 22	6 2	12
2	-	-	-	14	2	15	5	55	29	212	89	100	54	98	61	8	16
3 2	1	5	2	15 11	2 3	16 19	1 4	14 5	2	14 13	5 2	7 5	3	3 2	5 3	1	-
5	2	8	2	26	5	35	5	19	2	27	7	12	3	5	8	1	

#### NOTIFIABLE DISEASES, 1923.

Notif	icatio	ns a	nd D	eaths				1									
3 to	0 4.	4 to	0 5.	5 to	10.	10 t	0 15.	15 t	o 20.	20 to	35.	35 to	o 45.	45 t	o 65.		and p.
Notifications.	Deaths.	Notifications.	Deaths.	Notideations.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths,	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.
- 13 44 - 1 7 1 - 1 - 1 - - - - - - - - - - - -	14 1	61 29 - 3 - - 17 - - - -				—   147   94   2   —   1   —   8   —   —   —   —   —   —   —   —		- 43 24 3 4 2 1 7 - - - - - -		1 54 35 2 10 6 1 12 — 12 — 1 1 —		-  13  3  1  2  7  1  18  -  -  -  -  -  -  -		-   4   2   -   12   1   14   -   3   -   -   -   -   -   -   -   -	- - 1 - - - - - - -	- - - 1 - 2 2 14 - - - - - - -	
1	_	_	_	8 6	2	5 10	2 3	22 33	8 21	125 87	40 49	67 33	41 13	64 34	39 22	6 2	12 4
2	-	-	-	14	2	15	5	55	29	212	89	100	54	98	61	8	16
3 2	1	5 3		15 11	2 3	16 19	1 4	14 5	2	14 13	5 2	7 5	3	3 2	5 3	1	_
5	2	8	2	26	5	35	5	19	2	27	7	12	3	5	8	1	_

Whooping Cough—Continued.

Home nursing is valuable, provided that contacts of the patient are supervised for the detection of the disease at any early stage, and institutional treatment is essential for those whose home conditions are unfavourable for proper treatment and care.

Limited accommodation is available in the Metropolitan Asylums Board Institutions for the reception of those cases unable to obtain adequate care at home, but I understand the demand on their hospitals for the reception of scarlet fever and diphtheria cases does not permit of more cases being accommodated.

Venereal Diseases.—The treatment of venereal disease in Camberwell is in the hands of the London County Council. The nearest Hospital for Camberwell residents requiring treatment is King's College Hospital, Denmark Hill. Although there was no local Propaganda Committee functioning in Camberwell during 1923, the National Council for Combating Venereal Diseases carried on propaganda work in Camberwell by giving a certain number of lectures during the year, these lectures being illustrated by suitable films.

Foot-and-Mouth Disease.—There have been rare instances in which this disease has been communicated to man through the secretions from the mouth of the infected animal to cowkeepers and other persons in close contact with the animal. Under the present system, by which infected animals are immediately slaughtered, there is little probability of an extension of the disease to man. Further, this policy of slaughtering, under efficient supervision, all animals found to be suffering from the disease or to have been in contact with diseased animals dispenses with the question of milk or meat from infected animals reaching the public.

Every step is being taken by the Authorities to prevent the sale for human consumption of milk from animals so infected, the sale of which, or consumption for human food, is prevented by Article 15 of the Dairies, Cowsheds, and

Milkshops Order of 1885.

## REPORT OF THE TUBERCULOSIS MEDICAL OFFICER FOR THE YEAR 1923.

The Notification of Tuberculosis in Camberwell.

In a perfect system the number of Primary Notifications of Tuberculosis in any year should represent the total number of new cases of the disease in that year and should thus be an index of increase or diminution of incidence. In reality the number of primary notifications represents the cases of tuberculosis that are discovered and after discovery notified. Many new cases are not discovered, and many although discovered are not notified. On the other hand, cases are sometimes notified in which a reasonable difference of opinion as to the diagnosis may exist. In judging of the progress of anti-tuberculosis efforts by a study of the number of new notifications errors may creep into our calculations unless we remember these factors. It may, moreover, happen that an increase in the notification rate in an area is not an indication of an actual increase of tuberculosis, but rather of an improvement in the working of the local scheme. The number of primary notifications of tuberculosis in all its forms in 1923 was 657. The number of primary notifications of pulmonary tuberculosis was 505, and the number of primary notifications of non-pulmonary tuberculosis was 152.

On Table I is given the number of primary notifications

of tuberculosis for 1921, 1922, 1923.

TABLE I. (CAMBERWELL).

Primary Notifications of Tuberculosis.

Year.	All Forms.	Pulmonary Tuberculosis.	Other Forms.
1921	750	595	155
1922	653	506	147
1923	657	505	152

On Table II is given the primary notification rate (per 1,000 population of Camberwell) for the years 1921, 1922, and 1923.

TABLE II. (CAMBERWELL).

Notification Rate (per 1,000 population).

Year.	Population.	All Forms.	Pulmonary Tuberculosis.	Other Forms,
1921	267,198*	2·80	2·22	0·58
1922	270,300 <i>a</i>	2·41	1·87	0·54
1923	272,300 <i>a</i>	2·40	1·85	0·55

<sup>\*</sup> Census 1921.

a Estimated.

#### PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1912.

Summary of Notifications during the Period January 1st, 1923, to December 29th, 1923, in the Metropolitan Borough of Camberwell.

				Notifi	cation	s on F	orm A						Ne	otifica	tions	on Forn	п В.			3
7			Nun	ber of	Prim	ary N	otificat	ions.				Total					Total	Poor		
0-1	1–5	5–10	10-15	15-20	20-25	25-35	35-45	45–55	55-65	65 and upwards.	Total Primary Notifications.	Notifi-		5–10	10-15	Total Primary Notifications.	Notifi- cations	Law Insti- tu-	Sana- toria.	28
-	1	8	5	22	42	83	67	42	22	6	298	386	-	-	-	-	1	109	243	
-	2	6	10	33	37	50	33	17	17	2	207	276	-	-	-	-	-	107	107	
		15 11	16 19	14 5	7 6	7	7 5	2	3	1	87 65	100 70	-	-	_	-	2	2	42 35	
	_ _ _ 5	- 1 - 2 5 12	- 1 8 - 2 6 5 12 15	Nun  0-1 1-5 5-10 10-15  - 1 8 5  - 2 6 10  5 12 15 16	Number of  0-1 1-5 5-10 10-15 15-20  - 1 8 5 22  - 2 6 10 33 5 12 15 16 14	Number of Prim  0-1 1-5 5-10 10-15 15-20 20-25  1 8 5 22 42  2 6 10 33 37  5 12 15 16 14 7	Number of Primary No.  0-1 1-5 5-10 10-15 15-20 20-25 25-35  - 1 8 5 22 42 83  - 2 6 10 33 37 50  5 12 15 16 14 7 7	Number of Primary Notificat  0-1 1-5 5-10 10-15 15-20 20-25 25-35 35-45  - 1 8 5 22 42 83 67  - 2 6 10 33 37 50 33  5 12 15 16 14 7 7 7	-     1     8     5     22     42     83     67     42       -     2     6     10     33     37     50     33     17       5     12     15     16     14     7     7     7     -	Number of Primary Notifications.    0-1   1-5   5-10   10-15   15-20   20-25   25-35   35-45   45-55   55-65	Number of Primary Notifications.    0-1   1-5   5-10   10-15   15-20   20-25   25-35   35-45   45-55   55-65   12   3   3   37   50   33   17   17   2   5   12   15   16   14   7   7   7   7   - 3   1	Number of Primary Notifications.    0-1   1-5   5-10   10-15   15-20   20-25   25-35   35-45   45-55   55-65   29   25   25   25   25   25   25   2	Number of Primary Notifications.    O-1   1-5   5-10   10-15   15-20   20-25   25-35   35-45   45-55   55-65   12   15   16   14   7   7   7   7   3   1   87   100	Number of Primary Notifications.    Number of Primary Notifications.   Number of Primary Notifications   Num	Number of Primary Notifications.    O-1   1-5   5-10   10-15   15-20   20-25   25-35   35-45   45-55   55-65	Number of Primary Notifications.    Number of Primary Notifications	Number of Primary Notifications.    O-1   1-5   5-10   10-15   15-20   20-25   25-35   35-45   45-55   55-65	Number of Primary Notifications.    Number of Primary Notifications.   Total Notifications   N	Notifications on Form A.    Notifications on Form A.   Notifications on Form B.   Notifications on Form B.   On F	Number of Primary Notifications.    Number of Primary Notifications   Number of Primary Notifications   Notifi

Table showing the notified cases of tuberculosis during 1923 allocated to the wards of the Borough.

Wards.		Pulmonary	7.	No	n-Pulmona	ry.	Grand.	
TT CLL CLOS	Males.	Females.	Total.	Males.	Females.	Total.	Total.	
1	21	10	31	6	5	11	42	
2	15	15	30	6	4	10	40	
3	21	9	30	5	5	10	40	
4	14	10	24	6	1	7	31	
5	18	12	30	8	5	13	43	
6	16	15	31	8	2	10	41	
7	30	27	57	9	5	14	71	
8	23	15	38	5	5	10	48	
9	27	11	38	3	5	8	46	
10	4	5	9	4	3	7	16	
11	8	9	17	2	2	4	21	
12	17	8	25	3	4	7	32	
13	10	4	14	1	5	6	20	
14	19	8	27	3	3	6	33	
15	14	15	29	2	3 2 2	4	33	
16	10	6	16	4	2	6	22	
17	11	9	20	5	2	7	27	
18	14	9	23	4 .	4	8	31	
19	6	8	14	3	1	4	18	
20	_	2	2	-			2	

In the accompanying Table the non-notified cases ascertained through the certificates of death have been added to the primary notifications, thus making the total of new cases found in 1923.

		New	v Cases.		Deaths.							
Age Periods.	Pulm	onary.	Non-Pu	ulmonary.	Pulm	onary.	Non-Pulmonary					
	M.	F.	M.	F.	M.	F.	M.	F.				
0	_	_	8	. 4	_	_	5	4				
1	1	3	14	13	-	1	4	5				
5	8	6	18	15	-	2	2	3				
10	7	10	16	20	2	3	1	4				
15	22	35	16	5	8	21	2	-				
20	43	40	9	6	14	20	3	-				
25	86	53	8	7	26	29	2	2				
35	69	35	8	6 5	41	13	-	3				
45	45	18	1	5	23	13	1	2				
55	27	20	6	-	16	9	4	1				
65 & up	12	4	1	-	12	4	-	-				
Totals	320	224	105	81	142	115	24	24				

Deaths from Tuberculosis (Camberwell) in 1923.

The number of deaths from tuberculosis in 1923 was 305. Of these 257 were from pulmonary tuberculosis and

48 from other forms of the disease. 73 cases were not notified as suffering from tuberculosis during life.

Non-notified fatal cases.	1923.
All forms of Tuberculosis. Proportion of non-notified fatal cases in 1923 to total number of deaths.	24 per cent.
Pulmonary Tuberculosis. Proportion of non-notified fatal cases in 1923 to total pulmonary deaths.	16 per cent.
Non-pulmonary Tuberculosis. Proportion of non-notified fatal cases in 1923 to total non-pulmonary deaths.	64 per cent.
Proportion of non-notified cases who died in Institutions to total of non-notified fatal cases.	74 per cent.
Proportion of non-notified cases who died at home to total of non-notified fatal cases.	26 per cent.

Of 26 deaths from tuberculous meningitis 19 (73 per cent.) were not notified before death. Of these 16 (84 per cent.) died in hospitals and 3 (16 per cent.) at home.

Death rate from tuberculosis (Camberwell, 1923) per 1,000 population (estimated):—

Pulmonary 0.94 Other Forms 0.18 1.12

Contrast this with the figures of a decade ago.

Death rate from tuberculosis (Camberwell, 1914) per
1,000 population (estimated):—

 $\begin{array}{ll} \text{Pulmonary} & 1.44 \\ \text{Other Forms} & 0.34 \\ \end{array} \} 1.78$ 

Put in another way—without taking into consideration the increase of population:—

	1914.	1923.
Deaths from all Forms of Tuberculosis	468	 305
Deaths from Pulmonary Tuberculosis	378	 257
Deaths from Non-pulmonary Tuberculosis	90	 48

The deaths among Camberwell clerks, working in different parts of London, from tuberculosis, in 1923, was at the high rate of 2 per 1,000 clerks living in this Borough. Caution is needed, however, in interpreting these or any figures that view tuberculosis mortality among clerks from an occupational standpoint. It is well known that many parents look upon the clerical profession as a sheltered one, and urge or put the more delicate members of their family into it on that account. In that way many latent cases of tuberculosis may enter. Dr. Brownlee reported to the Medical Research Committee as follows:—

". . . after the age of 35 the mortalities from phthisis among the persons included in the class of commercial clerks and in the class of carmen, carrier, etc., are practically identical, and also identical with

the mortality of males in general. Before this age there is a considerable excess of phthisis among commercial clerks, and a corresponding defect of phthisis among carmen, etc. It is hardly likely that these variations are to any extent occupational. It is much more probable that the occupations have been originally selected for reasons of physical fitness or the reverse."

Nevertheless, it cannot be urged too strongly that offices in which clerks work should conform to the standards of health. Nor, while pushing that point, should we forget that, while clerks spend 44 hours of the week in their office environment, they have to spend over 100 hours of the week in the environment of the tram, train, and bus, and finally of their home.

Table showing the number of deaths from tuberculosis in 1921, 1922, and 1923 allocated to the different Wards of the Borough, and giving the number and density of population:—

Number	Population of	Density of		Dea	aths.	
of Wards.	Wards. Census 1921.	Population 1921.*	1921.	1922.	1923.	Total of 1921, 1923 and 1923.
1	15,442	124	22	31	18	71
2 3	14,420	170	17	24	27	68
3	14,201	108	21	27	19	67
5	16,562	159	35	22	13	70
5	16,096	163	21	25	22	68
6	13,243	107	15	20	18	53
7	16,230	99	25	29	28	82
6 7 8 9	15,548	125	22	26	16	64
	16,238	113	24	13	29	66
10	8,975	81	18	7	7	32
11	11,438	83	21	11	16	48
12	14,025	120	17	19	7	43
13	10,662	20	19	11	11	41
14	10,712	83	12	8	19	39
15	12,126	49	13	12	7	32
16	14,566	88	21	16	17	54
17	14,642	64	10	12	6	28
18	16,029	36	12	15	13	40
19	12,137	22	5	. 8	5	18
20	3,906	6	1	3	4	8

5 Homeless cases are not included in above table.
\* Density of Population Per Acre.

The object of the accompanying Tables is to show, in relation to certain sex-age groups in Camberwell approximately calculated on the basis of the Census of 1921, the number of primary notifications of and deaths from pulmonary and other forms of tuberculosis during 1923.

#### PULMONARY TUBERCULOSIS.

		Males.		Females.				Totals.	
Age Period.	Persons.	Cases Notified.	Deaths.	Persons.	Cases Notified.	Deaths.	Persons.	Cases Notified.	Deaths.
0-5	12,248	1	_	11,952	2	1	24,200	3	1
5-15	26,419	13	2	25,962	16	5	52,381	29	7
15-25	21,325	64	22	25,378	70	41	46,703	134	63
25-35	18,357	83	26	22,734	50	29	41,091	133	55
35-45	17,217	67	41	20,175	33	13	37,392	100	54
45-55	14,302	42	23	15,712	17	13	30,014	59	36
55-65	9,267	22	16	10,322	17	9	19,589	39	25
65—up	6,413	6	12	9,415	2	4	15,828	8	16

#### OTHER FORMS OF TUBERCULOSIS.

		Males. Females.				Totals.			
Age Feriod.	Persons.	Cases Notified.	Deaths.	Persons.	Cases Notified.	Deaths.	Persons.	Cases Notified.	Deaths
0-5	12,248	17	9	11,952	10	9	24,200	27	18
5-15	26,419	31	3	25,962	30	7	52,381	61	10
15-25	21,325	21	5	25,378	11		46,703	32	5
25-35	18,357	7	2	22,734	7	2	41,091	14	4
35-45	17,217	7	-	20,175	5	3	37,392	12	3
4555	14,302	_	1	15,712	2	2	30,014	2	3
55-65	9,267	3	4	10,322	_	1	19,589	3	5
65—up	6,413	1		9,415	nn 1	1	15,828	1	_

The Work of the Tuberculosis Dispensary. The aims of the Tuberculosis Dispensary were outlined in the 1922 Report. One point should be emphasised again. Close co-operation with the local medical practitioners is the most important element in our organisation. During 1923 medical men sent 698 new patients for diagnosis or consultation, as compared with 607 in 1922 and 662 in 1921. Further, they sent for renewed consultation about 700 patients who had attended in previous years. The function of the Dispensary as a centre of diagnosis may be noticed further. The total number of new patients in 1923 was 1,904, as compared with 1,817 in 1922. In addition, 86 patients were under observation on 1st January, 1923, pending diagnosis. Of a total of 1,990 examined for diagnosis 409 were found to have active tuberculosis, 1,498 were discharged as not tuberculous, 39 ceased attendance before completion of diagnosis, and 44 remained under observation on 31st December pending diagnosis.

## Summary of the Work of the Tuberculosis Dispensary in 1923.

Number of new patients examined					1,904
Number of old patients examined				***	1,638
Number of new nationts sent by med	lical men	for co	onsulta	tion	698
Number of old natients sent by medica	al men fo	r const	ultatioi	n abo	out 700
Total attendances of patients at the I	Dispensar	У		***	10,710
Number of new contacts examined					831
Number of patients referred to hospit	al for col	nsultat	ion	with	197
Number of specimens of sputum exam	minea in	conne	ection	WILL	1.925
the work of the Dispensary	roulosis (	Officer	***		2 200
Number of Home visits paid by Tube	reurosis (	Jincer	3		5,914
Number of Home visits paid by Nurse	00	***			OJOLL

#### The Care Work of the Dispensary.

The aim is constructive work—i.e., an attempt to preserve or to improve the social and economic position of every family affected by tuberculosis. Items of assistance, such as food, money, sanatorium treatment, etc., cannot attain to even a moderate measure of success as long as the family standard of living remains below that compatible with health, or if a standard, normal at the onset of tuberculosis, is allowed to pass step by step to lower levels. Housing, employment, and education enter largely into this matter. Until housing and employment are brought nearer a normal level we cannot expect to carry out a large constructive policy in Care work, although we may accomplish much in lesser ways. Under employment reference is made not so much to the employment of the consumptive as to the employment of any members of his family who may be out

#### ANALYSIS OF PATIENTS DEALT WITH BY THE DISPENSARY FOR DIAGNOSIS IN 1923.

		Under obser-	The second			Found to be		Under obser- vation at the	Ceased attendance	
Number of				Total.		ng from culosis	Not suffering from	Diamanana	before completion of	
		pending diagnosis.	the year.		Pulmonary.	Non- Pulmonary.	Tuber- culosis.	diagnosis.	diagnosis.	
(-) All (in	Adults {M. F.	32 37	472 527	504 564	184 114	23 19	266 393	19 18	12 20	
(a) All persons (including "Con-	Children (M.	10	467	477	10	24	433	7	3	E H
tacts.")	under 15 (F.	7	438	445	17	18	406	-	4	
	TOTAL	86	1,904	1,990	325	84	1,498	44	39	
	Adulta (M.	7	74	81	8	4	62	3	4	
(b) "Contacts" (in-	Adults \{F.	8	211	219	7	1	206	4	1	
cluded in (a)).	Children M.	8 5 7	268	273	1	4	264	3	1	
	under 15 (F.	7	278	285	4	4	277	-	-	
c) Insured persons	(M.	32	374	406	143	17	220	16	10	
(included in (a)).	TF.	24	185	209	47	5	136	13	8	

34

of work. Every effort should be made to assist in finding work in such cases. The employment of the consumptive is a special matter in the majority of cases. Many patients are, on the completion of treatment, employable in a normal or almost normal sense. In the case of others, probably in the case of the majority of consumptives, the primary conception of work must be specialised. It must be of such a nature and of such an amount that its natural mental and physical tonic qualities are not exceeded to the extent of making it a poison to the tuberculous constitution. It may be considered a fine thing that his job should make a consumptive self-supporting. In the majority of cases such an aim will defeat its purpose. Much help can be given to the consumptive or to members of his family in lesser matters. The aim is to make the whole period of treatment as smooth as possible for all immediately concerned and to lessen as far as possible the risks of relapse in the testing period which follows the "completion of treatment." As this period may run into years, the value of constructive action is apparent.

An entertainment was given at Dulwich Baths on 11th December, 1923, under the patronage of the Worshipful the Mayor of Camberwell (Councillor H. F. A. Edmonds, J.P.). The proceeds were given to a voluntary fund for assisting in the dental treatment of patients in Camberwell who are suffering from tuberculosis. The entertainment was organised by Mrs. E. R. Morrogh, Hon. Secretary of the London County Council Interim Tuberculosis Care Committee, and, thanks to her indefatigable efforts and to the distinguished artists who gave their services, a clear profit of £65 was

made.

#### Institutional (Residential) Treatment of Camberwell Patients in 1923.

A. Through the London County Council.

#### 1. Adult Males :-

Number of applicants who had not received previous resider treatment		249
treatment		30
Total number of applicants		279
Total number who received residential treatment	***	223
Number who received residential treatment for the first time Number who did not receive residential treatment:—		193
Not recommended	33	
Failed to enter	15	
Awaiting residential treatment at 31st December, 1923	8	

Classification of Adu	lt Me	ale P	atien	ts wi	no rec	cerveo	L
Residential Tree	atmen	it for	· the	first	time.		
Pulmonary cases in which t	ubercle	e bacil	li had i	not be	en foun	d in	
the snutum					***	***	21
Cases of pulmonary tubero	eulosis	in wh	ich tul	bercle	bacilli	had	100
been found in the sputum		***				***	136
Early pulmonary tuber	culosis		***		•••	15	
Moderately advanced p	ulmona	ary tut	perculos	SIS	***	83	
More advanced pulmon	ary tul	berculo	SIS	***	***	38	21
Surgical tuberculosis			***		***		7
Diagnosis of tuberculosis			***	***			8
Not classified							
Total			1000				193
2. Adult Females.							
Number of applicants who	had no	t rece	ived pr	evious	resider	ntial	
treatment					***	***	109
Number of applicants wh	o had	receiv	red pre	evious	resider	ntial	
treatment				***	***		3
Total number of applicants							112
Total number who received	resider	itial tr	eatmen	t			83
Number who received reside	ential t	reatme	ent for	the firs	st time		80
Number who did not receive	e reside	ential t	reatme	nt:-		10	
Not recommended						18	
Failed to enter					1000	6 5	
Awaiting residential treat	tment	at 31st	Decer	nber,	1923	9	
Classification of Adult	Fon	nale	Patie	nts 1	cho re	eceive	ed
Classification of Aunti	Len	t for	+100	finet	time		
Residential Tree	itmen	it joi	· ine	jerse	conce.		
Pulmonary cases in which to	abercle	bacill	i had	not be	en foun	id in	10
the enutum					***	***	12
Cases of pulmonary tubero	eulosis	in wh	ich tu	bercle	bacilli	naa	52
been found in the sputum				***			92
Early pulmonary tuber	culosis					39	
Moderately advanced p	ulmona	ary tut	erculos	318		9	
More advanced pulmon	ary tu	bercuio	0818				7
Surgical tuberculosis							2
Diagnosis of tuberculosis							7
Not classified							
Total							80
3. Children.							-
Number who received reside	ential t	reatme	ent				52
					100		
Classification of R	eside	ntial	Trea	itmei	it Cas	ses.	
Early pulmonary tuberculos						9	
Moderately advanced pulmo	narv t	ubercu	losis			4	
Advanced pulmonary tuber	culosis		***			3	
Tuberculosis of knee joint						8	
Tuberculosis of glands						7	
Tuberculosis of bone					***	6	
Tuberculosis of hip joint					***	5	
Tuberculosis of spine						3	
Tuberculosis of peritoneum						2	
Tuberculosis of wrist joint						1	
Tuberculosis of elbow joint					***	1	
Tuberculosis of kidney	***	***	• • •		***	1	
Tuberculosis of ankle joint			***			1	
Tuberculosis of iris						1	

The average duration of treatment given by the London County Council in 1923 to 306 adults was 14 weeks. The average duration of residential treatment given to 52 children by the London County Council in 1923 was 18.65 weeks. This refers only to treatment given in 1923 to patients who commenced treatment in that year, and, as many of these patients continued treatment during varying periods of 1924, the ultimate averages are to be reckoned as considerably higher.

# Institutional (Residential) Treatment of Camberwell Patients in 1923.

### B. Through the Guardians.

249 cases of tuberculosis received treatment in the wards of St. Giles' Hospital during 1923. Of these 129 were males and 120 females. Residential treatment was arranged for children out of London as required.

### C. Through Private Arrangements.

A considerable number of patients did not ask the above-named Public Bodies to assist them in arranging for residential treatment.

# The Residential Treatment of Advanced Cases of Tuberculosis in Camberwell in 1923.

During the year 173 Camberwell patients died of tuberculosis in Institutions and 132 died at home. 114 died in St. Giles' Hospital and 59 in other Institutions.

### The Camberwell Day Sanatorium, 6, Grove Hill Road.

This is an After-Care scheme primarily intended for children who have completed residential treatment in Institutions out of London. All cases are non-infectious. A strong effort is made to find suitable jobs for the children on the completion of their school life.

Number on roll on December 31st, 19	923				26
Number admitted during 1923		***	***	***	9
Number discharged during 1923					9
Reasons for Di	scharg	ie.			
Number fit for elementary school					1
Number fit for work					6
Number transferred to hospital or say	natori	um			
Number removed from district					
Number discharged for other reasons					9

Gain or	r Loss of Weight	of Childre	en wh	o have	been in	the Sch	iool mo	re than
	ber of children w	ho show	ed a g	ain in				25
Aver	age gain in kilos. ber of children	who lost	weig	ht or	whose	weight	was	3
sta	ationary							-
Array	ago loss in kilos			12.0		200		-

#### WILLIAM BRAND.

#### SECTION 4.

There were no specific causes of sickness or invalidity calling for special mention during the year 1923.

#### SECTION 5.

### MATERNITY AND CHILD WELFARE.

Infant Welfare Centres.

It is fair to state that the growth in the number of Infant Welfare Centres emerged from a genuine public desire for enlightenment in the care and management of infants.

Indeed, their establishment may be regarded as a concrete expression of an attempt to improve the physical

standard of the children of this country.

Nevertheless, there still remains a considerable section of the public who view the Infant Welfare Centre as another example for encouraging those who are alleged to seek to be

relieved of full parental responsibility.

On the contrary, the function of the Infant Welfare Centre is to advise mothers what to do, and how to do it. The ante-natal clinic, doctor's clinic, and mothercraft class are definite agencies for instruction in matters relating to the health of the mother and her infant. The well-being of the child depends upon her own efforts in carrying out this advice.

It must be recognised that the promotion of all official schemes is usually the result of pressure in a greater or lesser degree on the part of those who desire an improvement in existing conditions, and their establishment directs public

attention to the need for the services.

Therefore, so long as the community as a whole are indifferent to the advantages of taking an intelligent interest in their welfare, so long will they be deprived of the benefits

of progressive measures.

This is particularly true with regard to preventive medicine. Much could be accomplished in the realm of public health by an intensive propaganda campaign in the form of simple lectures and demonstrations in the causation of diseases. It is, however, exceedingly difficult to get the people out of the habit of evincing an interest in such questions at any other time than when laid aside with sickness, and consequently progress in the reduction of the incidence rates of disease is slow.

The infant welfare work in Camberwell is divided between 6 Voluntary and 3 Municipal Centres, and each is

doing remarkably good work.

The question of the staff, situation of the premises, and

areas will sooner or later have to be considered.

I have long held the view that in some cases the existing premises are far from ideal for the purpose for which they are used, and a re-distribution of areas would enable all the children needing health visiting to be kept under constant supervision until they reach school age.

The table which appears on page 40 records the work of the Municipal and subsidised Infant Welfare Centres, and it is gratifying to note that the attendances and visits show

an improvement in the figures for the previous year.

The increase in the attendances at the ante-natal clinics is deserving of special mention, and encourages the hope that as time goes on the educational work of the Centres will reach many to whom pre-natal advice would be of inestimable benefit.

### Infant Welfare Centres Conference.

With a view of co-ordinating, correlating, and consolidating the Maternity and Child Welfare Services in the Borough, the Maternity and Child Welfare Committee appointed a Special Sub-Committee to consider and report

on the whole of the services.

The first meeting of the Committee was held in September, and it was decided that, in order to assist them in their consideration of the matter, a Conference be convened of representatives from each of the Voluntary Infant Welfare Centres in the Borough, the Ministry of Health, the Borough Council, and the Medical Officers at the Municipal Centres. The Conference in question, which was well attended, was held at the Town Hall on October 25th, and the following Resolution was adopted:—

"That a Joint Advisory Committee be appointed consisting of four members of the Maternity and Child Welfare Committee of the Council and the various Chairmen of the Voluntary Infant Welfare Centres in receipt of grants from the Council, such Committee to meet once a quarter and to report to the Maternity and Child Welfare Committee."

### MUNICIPAL AND SUBSIDISED INFANT WELFARE CENTRES. RETURN OF WORK, 1923.

	Cor	ens.			Childre	n—At	ttendan	ces at	Cons	ultatio	ons.			hercr					Ana	alysis	of V	isits.	1		
	Mothers.	hers.	Fin Atte	nd-	Subseq Atte	nd-	lces.	ations.	lent's	ations gs.	ly.		36		nud č.	pec	tant hers.	Atte	ldren nding ntre.	f Birth.	l other	ıtary	rs & Chil-		Dental
Infant Welfare Centre.	Expectant Mot	Post-Natal Mother	Under 1 year.	Over 1 year.	Under 1 year.	Over 1 year.	Total Attendances.	Doctor's Consultations	Superintender	Doctor's Consultational and Weighings.	Weighing only.	Total.	Sewing Class.	Health Talk.	Sewing Class and Health Talk.	First Visits.	Subsequent Visits.	First Visits.	Subsequent Visits.	After Notification of Before attending C	Miscellaneous and Visits not defit	ts by Vol	Visits to Mothers dren not attendi Centre.	Total Visits.	Attendances—I Clinic.
Camberwell Municipal, 140,	36	-	180	88	1296	601	2165	419	-	1585	161	2165	-	_	479	158	31	106	546	468	282	-	239	1830	_
Camberwell Road. Dulwich Municipal, 114, Lord-	-	_	280	68	2033	718	3099	266	-	2379	454	3099	_	_	217	81	54	86	544	588	150	-	66	1569	- 4
ship Lane Peckham Municipal, St. Jude's Hall, Meeting House Lane.	-	-	210	51	1142	265	1668	72	-	1185	411	1668	-	-	343	101	108	122	558	900	58	-	203	2050	-
Bird-in-Bush Voluntary, 601, Old Kent Road															No.								760	4222	-
Cambridge House, 6, Addington Square.	21	169	239	44	1474	998	2755	1964	408	-	383	2755	715	571	-	115	211	182	1545	305	-	724	1501	4583	-
Cobourg, Kempshead Hall, Kempshead Road.	47	-	202	12	1826	202	2242	*	-	-	-	2242	-	-	663	70	500	214	1534	307	-	-	522	3147	229
Nunhead, 31, Nunhead Grove St. Luke's, 2, Commercial Road United Girls' School, 17, Peck-		124	177	32	1899	1567		1312	-	-	2363	4755 3675 6166	337	519	-	132		61	1573	589	-		2744 1135 —	5829 3891 9388	-
ham Road Totals	520	925	2352	466	20927	8995	32740	11914	600	5149	12835	32740	2233	2079	2534	1140	1754	1759	16626	4972	490	2598	7170	36509	229

<sup>\*</sup> Information not available,

<sup>‡</sup> Not subsidised by the Council.

### Homes for Unmarried Mothers.

Southwark Diocesan Association for Preventive and Rescue Work, 24, De Crespigny Park, Camberwell.

The Home is for unmarried mothers before and after the birth of the first child. They can remain as long as is considered necessary to give them a good start in life again. Their general health is thoroughly attended to, and if necessary clothing is provided. During the year 29 mothers and 22 babies were received into the Home. A great deal of visiting and after care is also carried on. All unmarried mothers in the Borough Institutions are visited after they leave. In this and other ways 51 cases have been dealt with in addition to those in the Home.

National British Women's Temperance Association "House of Help," 201, Camberwell Grove, S.E.

The number of cases dealt with during the year in this Hostel was 30 mothers and 30 babies, and the average length of stay was 23 weeks. The health of both mothers and babies was excellent; only one baby failed to benefit, and was sent to the Infants' Hospital, Vincent Square.

### Maternity Ward.

Further negotiations proceeded during the year for the provision of a Municipal Maternity Ward, and it is gratifying to record that the Council were successful in their efforts to meet the need for the accommodation of patients whose domestic conditions are unfavourable for confinement in their own homes, and also for patients showing some abnormality

either during pregnancy or at the time of labour.

The accommodation consists of a Ward containing six beds and a labour room equipped with all modern appliances at the St. Giles' Hospital, Brunswick Square, Camberwell. I am satisfied that the establishment of this Ward will be welcomed, not only by the residents in the Borough, but also by the medical practitioners, who will appreciate the facilities offered for sending patients to the Ward, thus avoiding the necessity of carrying out obstetric operations under circumstances which, in many instances, can only be described as appalling.

### Nursing.

The Council have continued to provide nursing assistance for the treatment of maternity cases and infectious disease cases arising out of maternity, and for illness in children under 5 years of age, and also for patients suffering from pneumonia, malaria, dysentery, and other diseases specified in the Public Health (Pneumonia, Malaria, Dysentery, etc.)

Regulations, 1919.

Such nursing is carried out by the Ranyard Nursing Association, Camberwell District Nursing Association, The Rotherhithe District Nursing Association, and the East Dulwich and Dulwich Village District Nursing Association.

The two former Associations are paid 1s. a visit by the Council, and the following records the number of cases, visits,

and cost of such cases during the year:-

The Camberwell District and Ranyard Nursing Associations.

(	Quarter	ended		No. of Cases.	No. of Visits.	Cost.
darch June September December			 	82 69 80 103	954 897 864 1,158	£ s. d. 47 14 0 44 17 0 43 4 0 57 18 0
	Tota	ıl	 	334	3,873	193 3 0

#### Milk.

Grants of milk in accordance with the following conditions provided by the Ministry of Health Circular No. 185 were continued to be made to

(a) Nursing mothers,

(b) Expectant mothers in the last three months of pregnancy, and

(c) Children up to 3 years of age, and exceptionally to children between 3 and 5 years of age.

The quantity of milk to be supplied at less than cost price must not ordinarily exceed one pint per day per person, but in the case of infants between 3 months and 18 months in exceptional cases 1½ pints a day may be supplied.

The approximate gross cost of the grants during the year amounted to £4,400, representing the distribution of upwards of 900 lbs. of dried milk and 336,000 pints of milk.

Every individual application was carefully examined by the Milk Applications Committee, and in cases where a doubt existed regarding the applicant's statement of his earnings enquiries were made before a grant was authorised. In four instances only was it necessary to request the attendance of the applicant before the Committee to offer an explanation of the conflicting information relating to circumstances.

#### Convalescent Treatment.

The practice of sending approved cases for convalescent treatment was continued, and during the period under review 18 children received treatment for one month, 2 for six weeks, 1 for a term of five weeks, and one mother and her infant for a period of one month.

### Peckham, Nunhead and District Day Nursery.

A marked increase in the number of attendances of children at the above Institution during the year was recorded, there being 4,195 attendances, as compared with 2,657 for the year 1922.

The nursery was open on 246 days, and the average daily attendance was 17. From October 26th to November 23rd the Institution was closed, owing to an outbreak of measles.

#### Midwives' Fees.

In three instances authority was given for the payment of the midwife's account for services rendered to indigent mothers in confinement.

#### Midwives.

For the year under review there were 44 practising midwives in the Borough.

## Hospitals Provided or Subsidised by the Local Authority.

#### Maternity.

A private ward containing six beds at the St. Giles' Hospital, Brunswick. Square, Camberwell, subsidised by the Borough Council.

### Hospitals available for the District.

King's College, Denmark Hill, S.E. 5. Camberwell Board of Guardians Institutions.

### Institutional Provision for Unmarried Mothers, etc.

Southwark Diocesan Association for Preventive and Rescue Work Home, 24, De Crespigny Park, Camberwell, S.E. 5, subsidised by the Camberwell-Borough Council.

National British Women's Temperance Association "House of Help," 201, Camberwell Grove, S.E. 5, subsidised by the Camberwell Borough Council.

#### Ambulance Facilities.

(a) For infectious cases. The Metropolitan Asylums Board.

(b) For non-infectious and accident cases. London County Council for accident cases.

#### 44

#### CLINICS AND TREATMENT CENTRES.

Situation.	Nature of Accommodation.	By whom provided.	Sessions.
	Maternity and Child Welfare Cen	tres.	
Bird-in-Bush, 601, Old Kent Road	Shop and dwelling house	Voluntary	Mondays & Thursdays; antenatal, 2nd & 4th Fridays.
Cambridge House, 6, Addington Square	Private rooms	do	Tuesdays & Thursdays.
Cobourg, Kempshead Hall, Kempshead Road.	Waiting room; consultation and dental work room; disrobing room.	do	Help and advice daily (excep Saturday); ante-natal, 1s Monday; dental clinic 1s and 3rd Friday.
Nunhead, 31, Nunhead Grove	Waiting room; weighing room; consultation room.	do	Thursdays & Fridays.
St. Luke's, 2, Commercial Road	3 rooms	do	Wednesdays & Fridays; antenatal, 1st & 3rd Monday.
United Girls', 17, Peckham Road	Waiting room; weighing room;	do	Tuesdays & Fridays.
Camberwell Municipal, 140, Camberwell Road.	do. do.	Rented by Camber- well Boro' Council.	Mondays & Fridays; antennatal, 2nd & 4th Thursday
Dulwich Municipal, 114, Lordship Lane St. Jude's Church Hall, Meeting House Lane, Peckham, S.E.	do. do. do.	do. do. do. do,	Wednesdays & Thursdays. Every Tuesday.
Disinfecting Station, Peckham Park Road	Accommodation for cleansing of verminous children; one receiving room; one bath room and a discharge room.	Camberwell Borough Council.	Daily except Saturday.
Tuberculosis Dispensary, 19, Brunswick Square.	Waiting room; investigation room; two dressing rooms; two Medical Officer's rooms, and a dispensary.	do. do.	Daily.
Peckham, Nunhead and District:  Day Nursery, 109, Gibbon Road  Venereal Diseases—Nil	Private rooms	Voluntary	Daily except Saturday.

#### SECTION 6.

#### BACTERIOLOGY.

The bacteriological examinations required by the Borough of Camberwell were continued to be carried out by King's College Hospital, and the following is a summary of this work for the year 1923:—

Swabs for exam	inatio	n for I	Diphthe	ria.				
Positive								216
Negative						***	•••	1,079
Examination o	f Sput	a for I	.B.					
Positive								333
Negative								2,367
Widal Reaction	18.							
Positive							***	8
Negative			***					5
Examinations	for Go	nococci						
Positive								_
Negative								9
Examinations	of Mi	scellan	eous 1	Laterial	, e.g.,	Ice Cr	eam,	
Tinned M								10

#### SECTION 7.

### SANITARY ADMINISTRATION.

Sanitary Inspection of District.

Visits to complaints numbered 3,870 in the year, compared with 3,843 in 1922, whilst house inspections following

complaints increased to 2,652.

The number of house-to-house inspections was 2,066, compared with 2,129 in the previous year. Tenement inspections increased from 466 in 1922 to 519 in 1923. Inspections after infectious disease dropped to 1,509, owing to the smaller number of notifications received during the year. Inspections of houses-let-in-lodgings increased to 169. The new by-laws for this type of house, which were made by the London County Council in 1922, had not received the approval of the Ministry of Health at the time of writing.

The total number of inspections for all purposes made by the Sanitary Inspectors in 1923 was 79,174. Detailed statistics of the Inspectors' work will be found in the tables

on pages 56-59.

The following is a summary of the summonses heard at Lambeth Police Court in connection with the work of the inspectors:—

office of the control	No. of Summonses.	No. of Magistrates' Orders.	Fines.	Costs.
For defects For disobedience of	56	16	£3 15 0	£37 14 6
Magistrates' Orders	5	-	8 0 0	2 8 0
	61	16	£11 15 0	£40 2 6

In a large number of cases the work required was done and the costs paid before the date of hearing. Two summonses, in respect of 64/66 Acorn Street were adjourned sine die, the London County Council having obtained an Order on account of the dangerous condition of the structures. These houses have since been demolished.

Drainage and Sewerage.—The water carriage system is universal in the Borough, with the exception of a few earth closets in connection with sports grounds, and cesspools in use at premises in outlying parts of the Borough, where the nearest sewer is at too great a distance for connection to be insisted upon.

With regard to reconstruction of drains, 102 plans were submitted for the total reconstruction of private drains, and 146 for the partial reconstruction thereof. When the plans have been approved by the Public Health Committee, this work of reconstruction, as well as new drainage work on private premises, is supervised by the Sanitary Inspectors.

During the year the Borough Engineer reconstructed sewers in Dorton Street and Lansdowne Place and also the

sewer running from Ann's Avenue to Malt Street.

An amendment of the Drainage By-laws, permitting the use of iron soil-pipes inside buildings, was drafted by the London County Council, but did not receive the approval of the Ministry of Health till after the close of the year.

Scavenging.—A weekly collection of house refuse is made generally in the Borough, but in certain congested areas, as also from numerous blocks of tenements, boarding-houses, etc., the refuse is collected more frequently.

It cannot be too strongly emphasised that the frequent collection of refuse from crowded areas is essential from the

public health point of view.

The removal of house and trade refuse is carried out by the Borough Engineer's Department.

Offensive Trades.—In my report for 1922 the number of offensive trade premises was given as eight, one occupied by a soap-boiler, and the other seven by dressers of fur skins.

Fur Skin Dressers.—The question whether the trade carried on at the premises occupied by the skin dressers in Camberwell came within the definition given in the By-laws for regulating the conduct of the business of a dresser of fur skins was put to the London County Council, and that body caused a careful investigation to be made throughout London, with the result that in March, 1923, a communication was received stating that inspections had been made by the County Council's officers, and it had been decided that only four of the businesses reported by this Department were subject to the By-laws. This will explain the reduction in the number of offensive trade premises to five, comprising four dressers of fur skins and one soap-boiler. To these premises the Inspectors made 30 visits during the year.

Rag and Bone Dealers.—By-laws were made by the London County Council in June, 1923, and confirmed by the Ministry of Health in September last, for regulating the conduct of the business of a rag and bone dealer, and with respect to the premises, apparatus, etc., used for such business.

These By-laws were made under Section 9 of the London County Council (General Powers) Act, 1908.

All these premises are being inspected and a register

prepared.

In the case of premises existing and in use at the date of the confirmation of the By-laws, the sections dealing with the construction of the premises do not come into force

until September, 1924.

These sections require the premises to be so constructed as to prevent the harbouring of vermin and to be capable of being readily cleansed, in addition to certain requirements regarding light and ventilation. Other provisions require the removal of offensive articles within 24 hours, and prescribe the nature of receptacles for bones, etc., and also provide for the removal thereof at stated intervals.

Factories and Workshops.—Particulars of the factories and workshops on the register, of inspections, and other matters will be found on pages 55 and 60.

#### FOOD PREMISES.

Cowhouses.—As in 1922, I have to report that there is in Camberwell only one licensed cowhouse, practically the whole of the milk supply coming from outside the Borough. Five inspections were made, and the premises were found to be well kept.

Milkshops and Dairies.—At the close of the year there were 415 milkshops and dairies on the register. 1,220 visits were made by the Sanitary Inspectors. 12 notices were

served, and complied with.

The premises occupied by persons applying for registration were inspected and the drains tested. No registration was granted until the defects, if any, had been remedied. Included in the number of milkshops and dairies are 20 premises in respect of which licences, under the Milk (Special Designations) Order, were issued for the sale of "Certified" milk and one place which was licensed for the sale of "Grade A Tuberculin Tested" milk.

Slaughterhouses.—The number of private slaughterhouses in the Borough remains five. These premises were visited frequently, and as often as possible when killing was taking place, and altogether 142 visits were made by the inspectors. There is no public abattoir in the Borough. In March, 1923, the London County Council made a By-law under Section 19, Sub-section 4, of the Public Health (London) Act, 1891, requiring the use of a mechanically-operated killer in slaughterhouses. This By-law duly received the approval of the Ministry.

The London County Council also made By-laws for regulating the business of a slaughterer of poultry. These by-laws were confirmed by the Ministry, but it does not appear that there are in the Borough any persons who could

be properly described as slaughterers of poultry.

Butchers' and Provision Dealers' Shops.—It is pleasing to be able to record that there is a slight but increasing tendency for the fronts of these shops to be closed by windows. It appears to be dawning upon the people engaged in these trades that protection, from dust and flies, of meat, bacon, etc., is beneficial to their pockets, by reason of the improved keeping qualities and appearance of their stock. The benefits to the consumer hardly need emphasis.

Restaurants, Eating-Houses, and Fried Fish Shops.—At the end of 1923 there were 147 of these places on the register, to which the Inspectors paid 210 visits. Special attention is paid to the kitchens and other places where food is prepared. 18 notices were served, and complied with.

Bakehouses.—At the close of the year there were 137 bakehouses in use, 50 of which are underground bakehouses. The Sanitary Inspectors made 515 visits, and 21 notices were served, and duly executed.

Ice-Cream Vendors' Premises.—The number on the register was 323. 458 visits were made by the Sanitary Inspectors. 7 notices were served, and the complaints were remedied. The number of visits recorded includes inspections of stalls.

#### FOOD.

Milk.—The Milk (Special Designations) Order, 1923, was issued by the Minister of Health in May, 1923. This Order revoked the previous Order (1922), embodied certain amendments considered desirable, in the opinion of the Minister, in the light of experience gained of the working of the original Order, and came into force on the 1st July, 1923. The general scheme of grading was not altered, but changes were made in the conditions under which licences might be granted for the sale of "Grade A" and "Pasteurised" milk. With regard to "Grade A" milk, conditions were not greatly altered, the alterations affecting the conditions of production only. The standard laid down in the 1923 Order for Grade A Milk-Pasteurised, was that originally set for "Pasteurised" milk in the Order of 1922, it being stated that such milk "shall be produced and treated under such conditions that, on a sample being taken before delivery to the consumer, the milk shall be found to contain (a) in the case of a sample taken at any time before 1st January, 1924, not more than 50,000 bacteria per cubic centimetre and no coliform bacillus in one-hundredth of a c.c., and (b) in the case of a sample taken at any time after 1923 not more than 30,000 bacteria per c.c., and no coliform bacillus in one-tenth of a c.c."

In the case of "Pasteurised" milk other than "Grade A" the standard was considerably relaxed by the 1923 Order, it being laid down that up to December 31st, 1923, a sample must not contain more than 200,000 bacteria per c.c., and, after that date, not more than 100,000 bacteria per c.c. (The previous Order permitted only 50,000 and 30,000 per c.c. respectively.) The test for coliform bacillus

was also removed.

The general effect of the Milk (Special Designations) Order is to ensure that certain special varieties of milk which are sold at high prices are of a good standard of purity.

Milk being such an important article of diet for infants and invalids, it is of the greatest importance that all milk should be of the highest quality and purity obtainable.

A bacteriologically clean milk supply, apart from its benefit to the consumer, would also be advantageous to the

vendor by reason of its improved keeping qualities.

The milk question received considerable attention at the meeting of the Royal Sanitary Institute at Hull in July, 1923, and again at a meeting of the Institute in December last, and it is sincerely to be hoped that the interest that has been aroused in the matter will continue until a really

pure milk supply is ensured for the public.

The legal powers of the local authority for dealing with the unsatisfactory conditions under which milk is sometimes kept in retail shops (more particularly "general" shops) were not really adequate, but the powers given to the local authority under the Milk and Dairies (Amendment) Act, 1922, in the matter of refusing or cancelling registration where conditions are not satisfactory, represent a distinct advance.

These additional powers must be used with discretion but firmness, and should be the means of securing improved

conditions.

It would undoubtedly be a great improvement if all milk could be supplied by the dairymen in bottles—both that delivered directly to the consumer and that supplied to the small shops. This would largely overcome the possibilities of contamination, both in the shop and in the home of the consumer. A difficulty arises, more particularly in the case of the "general" shop, and especially in cases where these shops supply employees in factories—these mostly buy in very small quantities. Nevertheless, if the bottle were the smallest quantity purchasable, these people would probably soon arrange to share a bottle between them.

In connection with the retail sale of milk, a report was presented to the Public Health Committee in November last.

This report dealt more particularly with the sale of milk

in "general" shops in the Borough.

Certain conditions to be observed by the shopkeepers were suggested:

 The milk container to be kept covered (to exclude flies and dust) when not serving.

2. The milk container and its cover, and the measures, to be scalded daily before use.

- 3. The floor and fittings of the shop to be kept clean and free from dust at all times.
- 4. If jams, syrups, and/or pickles are sold from open jars, a closely fitting cover must be kept in position when not serving.
- 5. No paraffin, or similar oil, vegetables, fish, raw meat or offal to be sold from the premises.

The Council passed a resolution that persons registered as Purveyors of Milk, and those applying for registration, be informed that the foregoing conditions must be observed, and that, in the event of non-compliance, steps be taken to cancel the registration, or, in the case of a new application, that the same be refused unless the conditions are agreed to.

Bread.—In February, 1923, the attention of the Public Health Committee was drawn to the practice of selling bread entirely unprotected from dirt and other impurities.

The Committee recommended that the Metropolitan Borough Councils be asked to support representations in favour of legislation being promoted to deal with this

In October, 1923, the Metropolitan Boroughs' Standing Joint Committee, after giving the matter careful consideration, addressed a communication to the Minister of Health, asking that legislation be promoted when opportunity arose. Another practice which, though not so common as formerly, is extremely objectionable, is that of taking back unused stale bread and exchanging it for new.

This custom should be entirely prohibited, and the

representation included a note on this matter.

Ice-Cream.—6 samples of ice-cream were submitted for bacteriological examination during the summer of 1923. The reports in the case of 2 of the samples were far from satisfactory. The necessary steps were taken to improve the conditions under which the ice-cream was prepared and stored, and further samples will be taken during the coming season.

Preservatives in Foodstuffs.—The widespread use of preservatives in foodstuffs was considered by the Council, and it was decided to support a resolution of the Paddington Borough Council urging the Ministry of Health to prescribe, pursuant to the powers vested in the Ministry by Section 1 of the Public Health (Regulations as to Food) Act, 1907, the limits of the amount of chemical preservatives sanctioned, and to regulate the conditions of sale of foodstuffs containing preservatives. Representations to this effect were made to the Ministry of Health.

Inflation (of Meat and Fish).—It having been suggested to the London County Council that that body should promote legislation prohibiting this practice, the Metropolitan Borough Councils were circularised by the County Council on the matter, and your Council expressed the opinion that such legislation should be promoted.

Unsound Food.—The systematic inspection of street markets, and shops, on Saturday nights was maintained during the year.

The total number of inspections was 1,301, including the

Saturday night visits.

I should like to see greater activity in this matter of food inspection, but the routine duties of the Inspectors render any great extension in this direction impossible.

One seizure of meat from a retail shop was made by Inspector Nash in July. The matter was duly reported to the Public Health Committee, and an explanation was submitted by the owner, who was cautioned by the Committee.

### Disinfection and Disinfestation.

The total number of articles disinfected at the Council's Disinfecting Station at Peckham Park Road Depot was 40,222, whilst the number of articles destroyed was 1,151,

the latter mostly mattresses.

966 mattresses and cushions were re-tabled. Visits to infected houses numbered 3,976, and 1,977 rooms were disinfected. The duties of the disinfecting staff under the control of Mr. A. Franklin include the destruction of unsound food.

3,248 verminous children and 58 adults were cleansed, and 961 children and 19 adults were treated for scabies at the Cleansing Station during 1923. 135 verminous premises were sprayed.

#### SECTION 8.

(See page 2-Staff.)

### SECTION 9.

### HOUSING.

During 1923 the remaining 12 houses under the Camberwell Housing Scheme, which were in course of erection at the time of the last Annual Report, were completed.

Private enterprise was responsible for the construction of two flats on the North Side of the Borough and 94 new

houses on the South Side of the Borough.

These new houses were built for sale, and were of a type that could not be described as working-class houses.

It will thus be seen that my remarks on the subject of overcrowding in last year's report still hold good. Indeed, the fact that births in Camberwell in 1923 exceeded deaths by 2,657 obviously makes the present position more difficult than before.

I can only repeat that, in my opinion, the present unsatisfactory state of affairs cannot be substantially ameliorated until the overcrowding of London is dealt with as a whole.

Notices were served in 27 cases of overcrowding, 15 of which were abated by a re-arrangement of the sleeping quarters. No legal proceedings were taken, for obvious reasons.

Unhealthy Areas.—The five areas represented in 1922—viz.: Woodland Cottages, Tiger Yard, Joiners' Arms Yard, Mayhew's Buildings, and Levant Street (Island Site)—were the subject of a Local Enquiry by the Ministry of Health in the early part of the year, with the result that all the areas were condemned as unfit for habitation.

The form of the Order confirming the Council's Improve-

ment Scheme is still under discussion.

Housing Act of 1923, from this Department's point of view, is Section 10, which gives the owner the right of appeal to the Minister of Health against any notice under Section 28 of the 1919 Act, or against any demand for the recovery of expenses from him under that section, or an order made by the Local Authority regarding such expenses. It is provided that no appeal against a demand for expenses or an order of the Local Authority shall lie if and so far as the appeal raises any question that might have been raised on an appeal against the notice.

Only three notices were served under Section 28 of the Housing Act of 1919, and these were duly complied with

by the owners of the property concerned.

Rent and Mortgage Interest Restrictions Act, 1923.— This Act prolonged the operation of, and amended, the Act of 1920.

Certificates that certain premises were not in all respects in a reasonable state of repair were issued in 19 cases.

# STATISTICS.—HOUSING CONDITIONS.

Number of New Houses Erected during the Year 1923.	
'a) Total	108
Unfit Dwelling Houses.	
I. Inspection.	
(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	6,963
(2) Number of dwelling-houses inspected and recorded under the Housing (Inspection of District) Regulations	A TOTAL
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	_*
(4) Number of dwelling-houses (exclusive of those referred to under	
the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	5,399
II. Remedy of defects without service of formal notices.	
Number of dwelling houses rendered fit in consequence of informal	
action by the local authority or its officers	3,274
III. Action under Statutory Powers.	
(a) Proceedings under Section 28, Housing, Town Planning, etc.,	
Act, 1919:—	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	3
(2) Number of dwelling-houses which were rendered fit—	LEUNIT
(a) By owners	_3
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declaration by owners of	
intention to close	70
III. (b) Proceedings under Public Health Act:-	
(1) Number of notices served requiring defects to be remedied (dwelling-houses):—	Isoqqua
Intimations	5,399 1,898
Notices—houses let in Lodgings	224
(2) Number of dwelling-houses in which defects were remedied—	
(a) By owners all except (b) By Local Authority in default of owners	6
(b) By Local Authority in default of owners	0
III. (c) Proceedings under Sections 17 and 18 of the Housing, Town Planning, etc., Act, 1909	. Nil
* Two houses were closed following action by the District Surve	yor
of the London County Council, and have since been demolished. 's structures were in a dangerous condition.	Lhe

### INSPECTION OF FACTORIES AND WORKSHOPS.

## INSPECTIONS MADE BY THE SANITARY INSPECTORS DURING 1923.

Premises.	Nu	D	
remises.	Inspections.	Written notices.	Prosecutions
Factories (including laundries) Workshops (including laundries)	677 1,624 }	106	1
	2,301	106	1
Bakehouses.			
Number in use.	Inspections.	Written notices.	Prosecutions.
137	515	24	

#### DEFECTS FOUND.

	N	umber of Defe	ects.	1
Particulars.	Found.	Remedied.	Referred H.M. Inspector.	Prosecu tions.
Nuisances under the Public Health Acts: Want of cleanliness Want of ventilation Overcrowding Want of floor drainage Other nuisances Sanitary accommodation— Insufficient Unsuitable or defective Not separate for sexes Offences under Factory & Workshop Act:—	39 2 3 1 48 3 42 3	28 2 3 1 32 2 32 1	1 - - 1	- - - 1
Illegal occupation of underground bakehouse (sec. 101) Breach of special sanitary requirements for bakehouses	_	_	-	-
(ss. 97-100) Other offences	23	23	_	=
	164	124	2	1

#### OUTWORKERS.

In accordance with Section 107, lists of outworkers were received from 74 persons carrying on business in Camberwell, in addition to those forwarded by

INSPECTIONS, ETC., 1923.												
			Inspi	ECTORS,								
E. R. Collins.	G. G. Morley.	W. R. Farmer.	M. Malins.	H. C. Green.	R. F. Nash.	W. T. Worsfold.	D. Glenday.	Miss F. O'Riordan.	Miss M. Butcher.	Totals.		
288 246 133 — 1,454 2 19 43 43 43 43 43 43 43 43 60 63 68 86 47 4 — 9 — 7,425	353 2377 170 658 — 115 111 89 112 65 — 39 296 3,375 516 6117 49 54 14 4 — 1	5288 3777 566 ————————————————————————————————	299 183 232 100 169 54 16 29 105 25 33 3 137 58 1 84 162 3,335 782 210 24 1 6,209	4233 2555 191 ————————————————————————————————	2500 1115 125 272	429 2255 427 98 — 127 9 — 32 2 — 104 277 454 454 140 70 7 132 6 6 — 6,017 — 6,017 —	4688 357 137	111	303 80 — 23 — 1182 — 371 — 128 — 4 1,915 194 3,265	3,870 2,652 2,066 519 169 48 3,080 56 142 515 5 1,220 210 458 176 1,624 467 392 2,309 42,090 8,344 1,509 1,317 391 1,220 24 153 (71)* 314 2,662 470 470 470 470 470 470 470 470 470 470		
1 394 134 2 10	469 153 — 4	371 154 — 2 —	3 690 283 — 9 224	3 484 225 — 7 —	535 91 — 3 —	1 616 146 — 18	594 175 1 16			1 17 5,563 1,898 3 78 224		

<sup>\*</sup> This figure is included in the number of House Inspections following complaints in Column 2, and represents complaints received from the Tuberculosis Officers.

#### SUMMARY OF SANITARY

DESCRIPTION OF WORK.												
Cleanse and repair walls and	coiling	Na.						220				
	···				***	***	***	103				
Repair roof, guttering, etc. Provide damp-proof course, o								100				
Abate overcrowding								2				
Abate smoke nuisance								-				
Repair stoves, coppers, etc.								20				
Repair windows, sashlines, et								23				
Repair flooring, stairs, etc.								22				
Light and ventilate staircase.	etc.							10				
Provide dustbin								45				
Remove accumulation								18				
Pave, level and drain yard								78				
Provide or repair manure pit												
Provide sufficient water supp								(				
Provide receptacle or render		ble						-				
Repair cover or cleanse recep	tacles,	etc.						2				
Clear premises of rats, etc.		***				***		4				
Provide, cleanse, repair or re	move o	closets,	pans,	etc.				28				
Provide water supply to close	et, repa	air flusi	hing ap	paratu	18	***	***	18				
Ventilate and remove outside	soil p	ipes, cl	leanse,	repair	and	trap d	rains	65				
Cleanse, repair or trap sinks,						***		1				
Animals to be kept clean or a	emove	d	***		***	***	***	(				
Public conveniences, cleanse,	supply	y with	water,	etc.			***	-				
Private conveniences, cleanse	, supp	ly with	water,	etc.		***	***	(				
Miscellaneous	***	***						16				

#### ORDERS FOR THE YEAR 1923.

#### Outworkers-Continued.

other Boroughs from persons in business therein. 2,662 visits were made by the Women Sanitary Inspectors to the homes of outworkers.

### FACTORIES, WORKSHOPS, AND WORKPLACES ON THE REGISTER AT THE END OF 1923.

Wearing apparel					 	218
Engineering and alli	ed tra	des			 	175
77 (1 1					 	147
Bakehouses					 	137
Building trades					 	97
Preparation of foods	tuffs				 	87
Sawmills, joinery wo		te.			 	63
Printing and lithogra					 	41
Laundries					 	39
Farriers and smiths					 	23
Chemical works, ma	nufact	uring	chemis	ts	 	11
Brush trades					 	10
Toy makers					 	8
Varnish and colour v	works				 	6
Offensive trades					 	5
Glass blowing					 	3
Celluloid works					 	1
Gas works					 	1
Miscellaneous					 	482
					-	
						1,553
					_	

#### OTHER MATTERS.

Matters notified to H.M. Inspector of Factories— Failure to affix Abstract of the Factory and Work Action taken in matters referred by H.M. Inspector the Public Health Act, but not under the	tor as	remed		7
Act— Notified by H.M. Inspector			···	 17
Reports of action taken sent to H.M. Inspector				 9
Other matters reported to H.M. Inspector				 2
Underground Bakehouses :—				
Certificates granted during the year				 Nil
In use at the end of the year				 50

### ADMINISTRATION OF THE FOOD AND DRUGS ACTS.

The Report of the Food and Drugs Inspector for the year 1923 is appended. It will be noticed in this Report that a greater amount of informal sampling was carried out in 1923 than in any other year. The results were highly satisfactory, as out of 92 samples of butter taken only six were found to be adulterated, four of which were taken from one shop and the remaining two from other shops.

Additional work was thrown on the Food and Drugs Inspector by the Council appointing him to carry out the duties under the Public Health (Condensed Milk) Regulations.

> Public Health Department, 35, Brunswick Square. April 2nd, 1924.

To Dr. Barnes, Medical Officer of Health, Camberwell.

SIR,—I beg to report herewith on the work carried out under (1) the Sale of Food and Drugs Acts; (2) the Margarine Acts; (3) the Public Health (Milk and Cream) Regulations; (4) the Sale of Food Orders; and (5) the Public Health (Condensed Milk) Regulations.

The formal or official samples obtained under the Sale of Food and Drugs Acts and Margarine Acts total 1,076.

These are set out in detail under Table "A," which, also shows, against the adulterated articles, the percentage of adulteration and action taken.

The extent and nature of the adulteration and the result of the proceedings, or other action taken, are set out in Tables "C" and "D."

Fifteen official samples of cream taken under the Public Health (Milk and Cream) Regulations are dealt with under Table "E."

Three official samples were taken under the Public Health (Condensed Milk) Regulations, 1923, making a total of 1,094 official samples.

Table "F" shows the number of summonses and the amount of the fines and costs.

Yours obediently,

GEORGE T. DEWEY, Food and Drugs Inspector.

TABLE "A." OFFICIAL SAMPLES,

Article.	Number taken.	Genuine.	Not Genuine.	Percentage not Genuine.	Summonses.	Cautions.	Remarks
lilk Butter 'inegar	77 48	672 76 46	10* 1 2	1·46 1·39 4·16	6* 1 1	$\frac{4}{1}$	Including one milk, proceed- ings in respect of which were taken under the Milk and
Mustard Malt Vinegar Golden Syrup	24 16	33 22 13	2 3	8·33 18·75		2 1	Dairies Amendment Act, owing to the presence of colouring matter.
Arrowroot Arrawroot	14 14	15 14 14	Ξ	Ξ	Ξ		
rescription	12 11	14 10 11 8	- 2 - 1	16-66	1 -	$\frac{1}{1}$	
ponge Cakes epper eparated Milk	8 7	8 6 7	1	14-39	1	- 4	Articles sold in an unstamped
argarine offee	7 6	7 6 5	=	=	=		wrapper.
ustard Powder ornflour Black Current Jam	5 5	5 5 4	=	=	=	=	
Baking Powder Olive Oil emonade Powder	3 3	4 3 3		=	= 1	=	
Thite Pepper ripping lum Jam	3 2	3 2 2	=	=	=	=	

Raspberry Jam	2	2 2	-	-	1 -	-	1	
Lemon Curd	2 2	2		_	_			
Sherbet	2 2	2	-	_	_	-		
Mincemeat	2	2	-		-	- 1		
Brawn	2	2	-		_			
Cornbeef	2	2	100		_			
Blancmange Powder	1	1			_			
Honey	1	î				_		
Curry Powder	i	1				_		
Ground Ginger	i	i	100					
Strawberry Jam	î	î				_		
Cane Syrup	î	î		100		_		
Raisin Wine	î		1*	100-		1*	*Preserved with 3-1 grains of	
Orange Marmalade	î	1		100			salicylic acid to the pint.	
Madeira Cake	1	î				_	sandyno acid so she pine.	
Sponge Fingers	î	î						
Camphorated Oil	i	1						
Treacle	î	1		The state of the s				
Citrate of Magnesia	î	î						
Ginger Beer Powder	î	1						
Plum Jam, with added		1						-
Emit Inico	1	1	1			_	- 3	3
Lomon Chasse	1	1						
Lemon Dhombata	1	1						
Pinganula Phoenhata	1	1	_					
Lima Iniaa Candial	1	1	1*	100-		1*	*Description of	
Ground Almonda	1	-		100-	100		*Preserved with 3.5 grains of	
Tinned Dags	1	1	-		_		salicylic acid to the pint.	
Duiod Mills	1	1						
Lamon Sanash	1	1	10	100	-	1.0	#D	
	1	-	1*	100-	100	1*	*Preserved with 5.7 grains of	
Lemon Squash Powder	1	1	_		-	-	salicylic acid to the pint,	
TOTAL	1,076	1,051	25	2-32	12	17		
202111 111	2,010	1,001	20	202	120	11		

In addition to the above, fifteen samples of Cream were taken under the Public Health (Milk and Cream) Regulations (see Table) and three samples of Condensed Milk were taken under the Public Health (Condensed Milk) Regulations, 1923, making a total of 1,094 official samples.

#### MILK.

Six hundred and eighty-two formal samples of milk and seven samples of separated milk were taken for analysis, making a total of 689. Eleven samples were reported against, giving a percentage of 1.59.

Table "B" shows the percentage of milk adulteration for the past six years.

TABLE "B."

Year	 	1918.	1919.	1920.	1921.	1922.	1923.
Percentage	 	11.7	6.9	2.8	1.95	1.95	1.59

Table "C" gives the particulars of the adulterated samples of milk and the result of legal proceedings or other action taken.

TABLE "C."

Sample No.	Deficiency of Fat. per cent.	Added Water. per cent.	Result of Proceedings.
No. 895	5	_	Dismissed under the Probation Act,
		F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Costs payable to Council £2 2s.
No. 916	18	-	Fined £25 and £5 5s. Costs (previous
No. 921	_	_	convictions).  This sample was a genuine milk, but coloured with annatto. A summons
		15111	was issued under the Milk and Dairies Amendment Act. Same was dis- missed under the Probation Act, the defendant paying £2 2s. Costs.
No. 930	6	-	Fined £25 and £5 5s. Costs (previous convictions).
No. 978	31		Fined £2 2s. No Costs.
No. 14	11	-	Dismissed under the Probation Act. Costs payable to Council £1 1s.
No. 144	6	_	Caution, Public Health Committee.
No. 319	8	_	Do.
No. 322	<u> </u>	4	Do.
No. 365	6	-	Do.
No. 666 (Separated milk).		7	Dismissed under the Probation Act. Costs payable to Council £1 1s.

It will be noted that eight of the above samples were deficient in fat, and only two contained added water.

Sample No. 930 .- With regard to this sample, the defendant requested that the third portion should be sent to the Government Laboratory. The analysis

bore out that of the Public Analyst.

APPEAL TO COW SAMPLE.—No "Appeal to Cow" samples have been taken,

the necessity never having arisen.

Milk and Dairies (Amendment) Act, 1922 .- One summons was issued under this Act, in connection with the sale of a sample of milk containing colouring matter. (Sample 921, Table "C.")

TABLE "D"

Particulars of Adulterated Samples (other than Milk), including Samples taken under the Margarine Act, and result of Proceedings, or other action, taken.

Number of Sample.	Article.	Result of Analysis.	Result of Summons or other action taken.
786	Margarine	100 per cent. margarine. Article sold in an unstamped wrapper.	Caution, Public Health Committee
809	Malt Vinegar	Vinegar other than Malt	do.
1012	Golden Syrup	80 per cent. of Glucose Syrup	do.
1067	Raisin Wine	Preserved with 3-1 grains of Salicylic Acid to the pint	do.
54	Sponge Cake	0-22 per cent. of Boric Acid	do.
81	Prescription	4.7 per cent. deficiency in Ammonium Carbonate	Dismissed under the Probation Act. Costs payable to Council, £2 2s.
129	Prescription	40 per cent. deficiency in Ammonium Carbonate	Caution. Public Health Committee
140	Lemon Squash	5.7 grains of Salicylic Acid per pint	do.
150	Butter	60 per cent. of Margarine	Fine £5. Costs £4 4s.
372	Vinegar	7 per cent. deficient in Acetic Acid	Caution. Public Health Committee.
468	Lime Juice Cordial	3.5 grains of Salicylic Acid per pint	do.
546	Margarine	100 per cent, of Margarine. Article sold in an unstamped wrapper.	do.
577	Malt Vinegar	100 per cent. of Vinegar other than Malt	do.
625	Margarine	100 per cent. of Margarine. Article sold in an unstamped wrapper.	do.
633	Vinegar	38 per cent. deficient in Acetic Acid	Dismissed under Probation Act. Costs payable to Council, £1 1s.
665	Margarine	100 per cent. of Margarine. Article sold in an un- stamped wrapper.	Caution. Public Health Committee.
707	Golden Syrup	85 per cent. of Glucose Syrup	Dismissed under the Probation Act. Costs payable to Council, £2 2s.
715	Golden Syrup	85 per cent. of Glucose Syrup	Dismissed. Costs payable to Council, £1 1s.

The sample of butter No. 150 referred to in Table "D" was the outcome of informal buying.

Four informal samples previously purchased of this vendor were reported

as containing 50, 50, 65 and 50 per cent. respectively of foreign fat.

Six samples of butter and three samples of margarine were analysed to ascertain whether they exceeded the amount of moisture permitted. In no case was there found to be an excess.

#### INFORMAL SAMPLING.

The informal samples purchased and submitted to the Public Analyst were as follows:—

UWB							
Butter					92	***	6 adulterated
Milk					58		All genuine
Blancmange P	owders				2		Genuine
Peach Jam					1		Genuine
Glycerine and	Black	Currant	Pastill	es	1		Genuine
Sherbet					1		Genuine
Coffee					1		Genuine

The six butters reported against were adulterated to the extent of 50, 50,

65, 50, 95 and 35 per cent. respectively of foreign fat.

Samples subsequently purchased at the shops supplying the two latter failed to disclose any further adulteration, and, as previously stated, the vendor of the other four samples was convicted in respect of the official sample that was afterwards taken.

#### MARGARINE.

Eighty-seven informal samples of margarine were purchased. Of this number 74 complied with the requirements as to stamping the wrappers, etc., 9 were sold in wrappers indistinctly stamped, and 4 were sold in wrappers uot bearing the word margarine.

Most of the informal buying was done during the evenings.

#### SALE OF FOOD ORDER, 1921.

In connection with that part of the above Order dealing with the labelling of imported meat at butchers' shops, it was found necessary to caution eleven tradesmen who had omitted to exhibit the required labels.

With respect to the marking of imported eggs, cautions were given to fiftyseven traders, on whose premises imported eggs were found exposed for sale,

not marked in accordance with the requirements of this Order.

Proceedings were instituted against one tradesman who had been previously

cautioned, and resulted in a fine of £2 and £2 2s. costs.

There seems to be a tendency on the part of salesmen to defeat the object of the Section of this Order dealing with imported eggs, inasmuch as during the last year many labels were found with the words "new laid" or "fresh" in large letters and the "imported" or words dealing with the country of origin in minute letters and not entirely discernible.

#### PUBLIC HEALTH (CONDENSED MILK) REGULATIONS, 1923.

The above Regulations came into operation on November 1st last.

On this date a standard for full cream condensed milk and machine skimmed condensed milk came into force.

Regulations were also framed concerning the wording of the labels on the

From the above date to December 31st, 1923, two hundred and ninety-seven shops were visited and the labels of the various brands of milk examined.

At thirty-one shops tins of condensed milk were found bearing the old form

of labels.

In accordance with the instructions of the Public Health Committee, the tradesmen were in each case advised as to the requirements of the Regulations, and cautioned.

The stock in every instance was withdrawn from sale.

Two tins of condensed machine skimmed milk sweetened, and one tin of condensed full cream milk sweetened, were submitted to the Public Analyst to ascertain whether the equivalent amount as stated on the labels was correct.

The statements on the tins of machine skimmed milk were found to be in order, but the full cream milk (Sample No. 761) was reported to be  $\frac{3}{15}$  of a pint short of the equivalent amount (viz.,  $1\frac{3}{4}$  pints); that the contents should have made according to the wording of the label on the tin.

As this brand of condensed milk was an imported one, the facts were communicated to the Ministry of Health, in accordance with the requirements of the

Regulations.

#### PUBLIC HEALTH (MILK AND CREAM) REGULATIONS, 1912-1917.

Fifteen (15) samples of cream were purchased and submitted to the Public Analyst during the year ended December 31st, 1923, and the details are set out in the following table, in the form prescribed by the Ministry of Health.

All samples of milk formally and informally taken are analysed for

preservatives.

TABLE "E."

(1) MILK AND CREAM NOT SOLD AS PRESERVED CREAM.

-			
Article.	Number of Samples examined for the presence of a Preservative. (A.)	was reported to be present and	ken.
Milk	689 Formal. 58 Informal. 747	Nil	
Cream	8	do. 432 0.38 do. Summons, F	ls. costs blic mmittee do. lined
		do. 460 0.35 do. 20s. and £3: Caution, Pul Health Cor	olie

The Vendor of Sample No. 201 had been previously cautioned. The Vendor of Sample No. 432 failed to comply with the Public Health Committee's request for a written or verbal explanation as to the presence of a preservative in the sample, and a summons was therefore ordered to be 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	 		6
(2) Statements incorrect	 	•••	1
Total	 		7

(3) Perce		f Preservat ch sample.	Percentage stated on Statutory label.			
Sample 1	No. 124	Borie Acid	0.31	per cent.	Not exceeding 0.4 per cent.	
do.	188		0.54		do. Borie Aci	
do.	233	do.	0.09	do.	do.	
do.	265	do.	0.39	do.	do.	
do.	274	do.	0.20	do.	do.	
do.	379	do.	0.35	do.	do.	
do.	394	do.	0.37	do.	do.	

It will be noted that Sample No. 188 exceeded the Statutory amount. The vendor attended before the Public Health Committee and gave an explanation as to this, and also as to his contravention of the requirements respecting the declaratory labels (see Table "D"), and was duly cautioned.

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

7	 	 	(1) Above 35 per cent
-	 	 	(2) Below 35 per cent
7	 	 	Total

- (c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article V (1) and the proviso in Article V (2) of the Regulations, have not been observed ... 5.
- (d) Particulars of each case in which the Regulations have not been complied with, and action taken:—

		Action taken.
Sample No. 188.	The receptacle (a 2-quart jug), containing the bulk, had the declaration stamped upon it, in indelible ink, of a smaller type than that required by the Regulations, and the purchaser's receptacle had placed over it a paper bag with the declaratory notice stamped thereon, also in indelible ink.	Caution, Public Health Committee.
Sample No. 201	Cream vessel, containing the bulk, unlabelled.	Proceedings taken (see Table (1).
Sample No. 297.	do.	Caution, Public Health Committee.
Sample No. 432.	do.	do.
Sample No. 460.	do.	do.

(3) Thickening Substances.—Thickeners were absent in all the samples.

TABLE "F."
Summary of Legal Proceedings for the year ending December 31st, 1923.

	No. of Summonses.	F	ines		C	osts	s.
Summonses under the Sale of Food and Drugs Acts Summons under the Milk and Dairies (Amendment) Act Summonses under the Public Health (Milk and	11	£ 57		d. 0	20	s. 4	£ (
Cream) Regulations Summonses under the Sale of Food Order, 1921	2 1	2 2	0	0	4 2	4 2	0-
	-15	61	2	0	33.	12	0

Total Cost and Fines, £94 14s.

# INDEX.

										PA	GE
Ambulance Fa	acilitie	s									43
Ante-natal										4	1-5
Bacteriology											45
Bakehouses						***			***		49
Births-											
Birth Rate											4
Illegitimate	man at the	S	***				***				4
Number of	many at the same of the same o	100 April 100 April 100	ed				***				4
Number of	Births	Regist	ered							***	4
Still-Births										***	4
Bread											51
Butchers' and	Provi	ision D	ealers'	Shops							48
Cancer			***							8	, 9
Cerebro-Spina	d Meni	ingitis								***	20
Clinics and Tr	reatme	nt Cent	tres								44
Convalescent	Treati	nent	***			***				***	43
Cowhouses					***		***				48
Day Nursery	: Pecl	kham, 1	Vunhea	d and	Distric	t		***			43
Day Sanatori	um:	Lubercu	ılosis								37
Deaths-											- 0
Death Rate	)								***	*** *	5-8
Number of	Death	s Regis	tered	***	***					1	5
Table, Caus											6-7
Table, Mor	tality !	Rates o	of Princ	eipal D	iseases					12.	-13
							***			***	16
Disinfection a				***	***		***		***	***	52
Drainage and			***			***	***				46
Dysentery	***									***	21
Encephalitis !							***				21
Factories and	Work	shops						***		47,	
Factories and	Work	shops,	Inspect	tion of,	Table	8			***		55
Factories: V	Vorksh	ops and	i Work	places	on Reg	gister					60
Food—	-		20								=0
Inflation (I							***	***		40	52
Milk (Speci				ier		***	***	***	***	49	
								***		50-51,	
Preservativ	res in .	Foodstu	iffs				***		***		51 52
Unsound						***	***	***		***	61
Food and Dr	ugs Ac	ts—Ad	ministi	ration	of m. 1.		***	***	***	***	65
Adulterate					c), Tab	le			***	66,	
Condensed					***						66
Informal S	-	-			***			***	***	***	64
Milk				010 10	17		***	***		67	
Milk and C	ream .	Regulat	tions, 1	912-18	117		***	***	***	62,	
Official San	nples,	Table		***	***				***		.66
Sale of Foo							•••			***	69
Summary					***		***	***			26
Foot and Mo					***		***	***		***	47
Fur Skin Dre				***			***	***		***	43
										52	
Housing-							***	***		56,	
Summary					***	***		***			54
Housing Stat				***	***				***		5]
Ice Cream—	Vand	ma' Dec	minon		***				***	-	49
Ice Cream	vende	ns rre	mises	***	***	***	***				-

### INDEX—Continued.

									PA	GE
Infantile Mortality									9	
Infantile Mortality,	Rate							***		9
Infantile Mortality,										11
Infantile Mortality,									12	-13
Infant Welfare Cent										-39
Infant Welfare Cent	res, Tal	ble of \	Vork		***					40
Informal Sampling										66
Malaria										21
Margarine										66
Maternal Mortality										20
Maternity and Child	Welfar	re							38	-44
Maternity Ward										41
Measles and German	Measle	28								23
Midwives .:.		***								43
Milk: Circular No.	185									42
Milk—See also unde	r Food									
Milk Shops and Dai	ries					***		***		48
Non-Notifiable Disea	ases									23
Notifiable Infectious	Diseas	es								14
Notifiable Infectious	Diseas	es, Tal	ole of						24	-25
Nursing		***	***						41	-42
Offensive Trades									***	47
Ophthalmia Neonate	orum									21
Outworkers									55,	60
Pneumonia										20
Polio-myelitis and E	Incepha	litis		***	***					20
Population										3
Puerperal Fever									17,	20
Rag and Bone Deale	ers									47
Rent and Mortgage	Interest	t Restr	ictions	Act, 19	923					53
Restaurants, Eating	House	s and ]	Fried F	ish Sho	ps					48
Sanitary Administra	tion								45.	-52
Sanitary Administra									56-	-57
Sanitary Administra	tion, St	ummar	y of Sa	nitary	Orders	Table			58-	.59
Scarlet Fever										17
Scarlet Fever Table,	Ward	Distrib	ution o	f Cases					18-	-19
Scavenging										46
Slaughterhouses										48
Small-pox	***								14-	-15
Staff										2
Statistics, General	***	***			***					3
Tuberculosis—							***			21
Deaths, Occupation		ole							22-	23
Dispensary, Work										33
Report of Tubercu	ılosis M	edical	Officer						27-	38
Table, Analysis of			***	***						34
Table, Notification	ns of Tu	ibercul	osis							28
Typhoid Fever		***								17
Unhealthy Areas						,				53
Unmarried Mothers,	Homes	for		***						41
Vaccination			***						15.	-16
Venereal Diseases						***	***			26
Whooping Cough								***	23.	-26