

Report on the sanitary condition of the Borough of Bermondsey for the year 1923.

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Metropolitan Borough of Bermondsey.

REPORT

ON THE

SANITARY CONDITION

OF THE

BOROUGH OF BERMONDSEY

For the Year

1923.

BY

R. KING BROWN, B.A., M.D., D.P.H.,

Medical Officer of Health.

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PUBLIC HEALTH DEPARTMENT.

Public Health Committee, 1923.

Chairman—Councillor STOKES.

Alderman Broughton.	Councillor Roll.
„ Bustin.	„ Rudland-Williams.
„ Wallsgrove.	„ Stephen.
Councillor Dennett.	„ Sullivan.
„ Hatcher	„ Vezey, J.P.
„ Humphreys.	„ Virgo.
„ Lynch.	„ Weightman.

Ex-officio :

MRS. A. SALTER, J.P. ... Mayor of Bermondsey.

Maternity and Child Welfare Committee, 1923.

Chairman—Alderman BROUGHTON.

Alderman Trott.	Councillor Stokes.
Councillor Clark.	„ Thorpe.
„ George.	
„ Kedward.	Co-opted Members :
„ Langley.	
„ Nix.	Mrs. Bustin.
„ Renwick.	Mrs. Dennett.
„ Rudland-Williams.	Mrs. Epps.
„ Stephen.	Mrs. Gledhill.

Ex-officio :

MRS. A. SALTER, J.P. ... Mayor of Bermondsey.

Staff :

Medical Officer of Health—R. KING BROWN, B.A., M.D.,
D.P.H.

Clinical Tuberculosis Officer and Deputy Medical Officer of
Health—Dr. D. M. Connan, M.B., D.P.H.

Assistant Medical Officer for Maternity and Child Welfare—
Dr. Mildred A. Thynne, M.B., D.P.H.

Municipal Dental Surgeon—Mr. Grantley Smith, H.D.D. Edin.,
L.D.S. Eng.

Sanitary Inspectors :

District.	District.
No. 1.—Mr. J. G. Francksen.	No. 5.—Mr. E. C. Freeman.
No. 2.—Mr. J. W. Wood.	No. 6.—Mr. E. J. Pitts.
No. 3.—Mr. A. H. Merryman.	No. 7.—Mr. W. Davis.
No. 4.—Mr. H. J. Toogood.	No. 8.—Mr. W. J. Luke.

Wharves and Food Inspectors :

Mr. G. A. Hoskins and Mr. G. L. Scott.

Health Visitors :

District.	District.
No. 1.—Miss Mercer.	No. 5.—Miss Bache.
No. 2.—Miss White.	No. 6.—Mrs. Cottier.
No. 3.—Miss Helden.	No. 7.—Miss Carlton.
No. 4.—Miss Child.	No. 8.—Miss Wadds.

Tuberculosis Nurses :

Miss Pike and Miss Stevens.

Dental Nurse—Miss Lambert.

Clerical Staff :

Mr. H. W. Bush, Chief Clerk.

Mr. A. I. Fair, Second Clerk.	Mr. C. F. Yaxley, General Clerk.
Mr. F. W. Smith, Third „	Mr. C. W. Whye, General „
Mr. E. F. Walsh, Fourth „	Miss Dutch, Clerk and Dispenser.
Mr. A. Manning, M. & C. W.	Mr. H. E. Butcher, Junior Clerk
Clerk.	Mr. W. C. Tapsfield, Jun. „

Municipal Lying-in Hostel—Matron: Miss A. E. Sewell.

Nurses—Miss Taylor, Miss Hughes, Miss Wells.

PUBLIC HEALTH DEPARTMENT,

TOWN HALL,

SPA ROAD, S.E.16.

Metropolitan Borough of Bermondsey.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH.

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

LADIES AND GENTLEMEN,—

I have the honour to submit my Twenty-third Annual Report on the sanitary condition of the Borough of Bermondsey during the year 1923. The death-rate was 12.1 compared with 16.7 in 1922, and 13.7 in 1921. This is the lowest death-rate yet recorded in Bermondsey.

The Infantile Mortality Rate was 76 compared with 102 the previous year, and is also the lowest infantile mortality on record in Bermondsey. This is very satisfactory, and shows that our efforts to improve the sanitary conditions of Bermondsey have not been wasted.

The sections of the report are, as usual, divided into:—

- I.—Vital Statistics.
- II.—Notification of Infectious Diseases.
- III.—Sanitary Administration.
- IV.—Factories and Workshops.

At the end of the Report will be found three Special Reports, one from Dr. D. M. Connan, the Deputy Medical Officer of Health, on Tuberculosis, one from Dr. Mildred A. Thynne, the

Assistant Medical Officer for Maternity and Child Welfare, on Maternity and Child Welfare work, and one from Mr. Grantley Smith, the Municipal Dental Surgeon, on the Dental Work of the Borough.

I wish once more to record that between the Chairmen and Members of the Public Health and Maternity and Child Welfare Committees and myself, there has been the usual cordial co-operation during the year under report.

Of the technical staff, including the Medical Officers, Sanitary Inspectors and Health Visitors, I cannot speak too highly for their loyalty and help, and of the non-technical staff I should like to mention specially Mr. H. W. Bush, the Chief Clerk, under whose guidance the rest of the clerical staff have done excellent work. I might say that the large part of any success which we have had in this Department, has been due to the general efficiency of the staff, without which it would have been impossible for any Medical Officer of Health to attain the good results which have resulted in the reduction of the general mortality and infantile mortality, which are the best indication of an efficient health administration.

If I might single out one person from these it is Dr. D. M. Connan, the Deputy Medical Officer of Health, who had charge of the Department many months last year during my illness, and who discharged his duties in a manner most satisfactory to the Committees, Council and myself.

I am, Ladies and Gentlemen,

Your obedient servant,

R. KING BROWN.

1.—VITAL STATISTICS.

Population.

The population of the Borough of Bermondsey, as enumerated in the Census of 1911 and 1921, and the estimate of the year under report are as follows:—

1911.	1921.	Estimated to June 30th, 1923.
125,903	119,452	121,700

The population of Bermondsey for 1923 has been estimated by the Registrar-General as 121,700, and this figure has been utilised in estimating the birth and death rates.

Births.

The total number of births registered in the Borough for the 52 weeks ended December 29th, 1923, was 2,912, consisting of 1,522 males and 1,390 females. This is 333 below the average for the last 10 years, and 255 below the figure for 1922.

The birth rate for 1923 was 23·9 per thousand persons living, which is 2·2 below that for 1922 and 2·4 below the average for the last 10 years.

The birth rate is unusually low for Bermondsey, but the same may be said of the death rate, and subtracting the latter from the former, leaves us with a net increase of population of 11·8.

The decrease in the birth rate is probably due to the Birth Control Propaganda, which began many years ago in the upper and middle classes, and has only begun to filter down to the working classes during the last few years. The question crops up every now and then whether we should undertake propaganda in "Birth Control." The answer that I have always given is that it is not part of the duty of the Sanitary Authority. The

furthest that Public Health Officials are entitled to go is to direct those who are anxious for information to the proper place whether they can obtain it.

There is no doubt from a scientific point of view that, if a woman has a number of births following too close upon one another, injury to the germ plasm takes place, as was explained in a recent lecture by Professor MacBride, and results in a deterioration of the offspring, occasionally amounting to actual deformity; and another curious fact is that defects due to injury to the germ plasm are likely to be transmitted to the next generation. Professor MacBride, therefore, insists that births in a family should be spaced out, so that sufficient interval for the complete recovery of the mother would be left between each birth, and this of course, could only be done by a certain amount of birth control.

Marriages.

The total number of marriages in the Borough in 1923 was 1056, being 48 above the number for 1922, and 164 below the average for the last 10 years.

The figures have been supplied by the Superintendent Registrar. This makes a marriage rate of 17.34 per 1,000 of the population, compared with a marriage rate last year of 16.64 of the population, 121,100.

Year.						No.	Rate.
1913	...	...	...	...	...	1,203	19.21
1914	...	...	...	...	...	1,236	19.90
1915	...	...	...	...	...	1,714	28.12
1916	...	...	...	...	...	1,215	19.65
1917	...	...	...	...	...	1,015	16.92
1918	...	...	...	...	...	1,106	18.21
1919	...	...	...	...	...	1,242	19.19
1920	...	...	...	...	...	1,383	21.40
1921	...	...	...	...	...	1,084	17.99
1922	...	...	...	...	...	1,008	16.64
Average for years 1913—1922						1,220	19.72
1923	...	...	...	...	...	1,056	17.34

Deaths.

In Tables III. and IV. of Appendix will be found tables dealing with deaths in the Borough.

The total number of deaths registered in the Borough for the year ended December 31st, 1923, was 1,192, which is 380 less than in 1922 and 496 below the average for the last ten years.

When this figure is corrected by exclusion of deaths of non-parishioners occurring in the district, and the inclusion of deaths of parishioners occurring outside the district, the number is raised to 1,480. This is 545 less than in 1922, and 559 less than the average for the last 10 years.

The death rate for the Borough in 1923 was 12.1 per thousand living inhabitants, being 4.6 below that recorded in 1922, and 5.1 below the average for the last 10 years.

In column 1, foot of Table I. of the Appendix will be found a list of places where deaths of non-parishioners occurred in the district. There were 42 such deaths in all, against 43 in 1922 and 51 in 1921.

9 such deaths occurred in the infirmary; 27 in the River Thames and the Surrey Commercial Docks, 1 in the street, 1 in a factory, 2 in private houses, 1 on a ship in the river, and 1 on a wharf.

288 persons belonging to this Borough died in outlying institutions, against 496 in 1922, and 394 in 1921. The names of the various places where the deaths occurred will be found in columns 2 and 3 at foot of Table I. of Appendix.

The low death rate is very satisfactory, as it is the lowest death rate which has ever been recorded in Bermondsey. It is mainly due to the very low infantile mortality, which has also reached the lowest point on record. This in its turn is low on account of the small number of deaths from summer diarrhoea. This used to be the great scourge of infant life, and there is very little doubt that this has been reduced largely by the

increased care on the part of mothers for their young offspring. Where a poor mother has got a large family, with very little interval between the births, it is quite impossible for her to give the individual attention which can be given to a small family, and that itself is sufficient to account for the reduction. Another fact which accounts for the low infantile mortality is the absence of any epidemic in measles or whooping cough.

Infantile Mortality.

The figure for this is 76 deaths under one year to every 1,000 births.

TABLE A.—*Infantile Mortality.*

Year.	Whole Borough.		London.	
	No. of Deaths.	Rate per 1,000 Births.	No. of Deaths.	Rate per 1,000 Births.
1913	505	131	11,869	105
1914	487	129	11,395	104
1915	537	154	11,369	104
1916	364	108	8,819	88
1917	335	125	8,273	103
1918	322	139	7,965	107
1919	262	99	7,039	85
1920	337	83	—	75
1921	306	95	—	80
1922	324	102	—	—
Average for years 1913—1922	377	116	—	—
1923	220	76	—	—

DEATHS FROM ZYMOTIC DISEASES.

There has been a decrease in the deaths from these diseases, the figures being 125 against 292 in the previous year, and 231 the average for the last 10 years. This gives a zymotic death-rate of 1.02.

Measles.

There were 13 deaths due to this disease, which is below the average for the last 10 years, and 88 below the number for 1922.

Whooping Cough.

12 deaths were due to this cause, against 65 in 1922.

Enteric Fever.

2 deaths were due to this cause. There was 1 death in 1922.

Tubercular Diseases.

The number of deaths from all forms of tubercular disease in 1923 was 175, against 206 in 1922.

Phthisis.

In Table B will be found particulars of deaths from phthisis since the year 1913. There were 144 deaths due to this cause, which is 25 less than the number recorded in the previous year.

TABLE B.—*Phthisis.*

Sub. District.	Bermond- sey.		Rother- hithe.		St. Olave.		Whole Borough.		London.	
Year.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.
1913 ...	125	1.53	64	1.86	12	1.42	201	1.61	5981	1.30
1914 ...	136	1.66	46	1.35	21	2.53	203	1.63	6281	1.39
1915 ...	156	1.76	57	1.77	20	2.42	233	1.97	6782	1.54
1916 ...	126	1.70	44	1.38	14	1.78	184	1.61	6288	1.45
1917 ...	123	1.75	61	2.02	14	1.88	198	1.83	6658	1.57
1918 ...	117	1.66	43	1.42	9	1.20	169	1.56	7048	1.78
1919 ...	104	1.28	58	1.66	12	1.39	174	1.40	5332	—
1920 ...	81	0.96	46	1.27	10	1.12	137	1.06	—	—
1921 ...	106	—	43	—	14	—	163	1.35	—	—
1922 ...	119	—	43	—	7	—	169	1.39	—	—
Averages for years										
1913										
1922	119	—	50	—	13	—	183	1.54	—	—
1923 ...	95	—	35	—	14	—	144	1.18	—	—

II.—NOTIFICATION OF INFECTIOUS DISEASE.

In Table V. of Appendix will be found particulars of infectious diseases notified during the year under report.

There has been a notable falling in these since last year. During the War Bermondsey was particularly free from infectious diseases of all sorts, but during the year 1920 we had a tremendous epidemic of Scarlet Fever. In November, 1921, the cases of diphtheria became more numerous than the cases of scarlet fever, and they have remained so ever since. A fall in both these diseases commenced in February, 1923, and has been maintained up to the time of writing. It is very difficult to explain either the prevalence of these diseases, or why the number of cases of diphtheria (586) should be greater than the number of cases of scarlet fever (323), but we know that all infectious diseases tend to occur in periodical epidemics of longer or shorter intervals, due partly to an accumulation of susceptible material, or from unknown causes, such as the increase in the virulence of the poison producing them. In other cases the explanation may be found in an increase or decrease of household pests, such as lice and fleas. Lice we know cause typhus fever, and Sir William Hamer of the London County Council, thinks that the flea may account for the prevalence of scarlet fever. If casual observations have any value, the frequent one which I have heard during the last year on the remarkable reduction in the number of fleas, suggests a possible factor in the reduction of the prevalence of scarlet fever.

The number of cases of infectious diseases notified, exclusive of notifications of tuberculosis, which numbered 461, was 959 compared with 2,077 in 1922 and 2,045 in 1921.

The attack rate per thousand inhabitants was 7.88 against 17.15 in 1922.

48 cases were returned from hospital as not suffering from the disease for which they were notified, but, if allowance is made for mild unreported cases, the recorded notifications would, if anything, understate the actual number of cases.

Diphtheria.

There were 586 cases of diphtheria notified in 1923 as against 1,110 cases in 1922.

The attack rate per thousand inhabitants was 4.81, against 9.16 in 1922. The case mortality was 5.6 per cent., against 8.1 per cent. in 1922, and 9.3 per cent. in 1921. 32 cases were returned as not suffering from this disease.

The case mortality here is low, and would be lower still were it possible to get the cases sent into hospital a little earlier, but unfortunately young children do not always complain of their throats until the disease is fairly advanced.

Small Pox.

There were no cases notified during 1923.

Scarlet Fever.

The notifications of scarlet fever in 1923 were 323, against 652 in 1922.

This is a decrease of 329. The distribution of the disease in the various Wards, as shown in Table V. of Appendix, was fairly uniform.

16 cases were returned from hospital as not suffering from scarlet fever.

There were three deaths, which gives the very low case mortality of .92 per cent., against 1.7 per cent. in 1922. The disease, as in recent years, was of a very mild type. The attack rate per thousand inhabitants was 2.65 against 5.37 in 1922.

The case mortality here is extremely low, for the type during the last few years has been very mild. It is one of the peculiarities of scarlet fever that while the prevalence may be very great the mortality may be very low or *vice versa*.

Enteric Fever.

2 cases of enteric fever were notified, being 1 for Bermondsey, and 1 for Rotherhithe. The total number of cases notified in the previous year was 4.

Puerperal Fever.

4 cases of puerperal fever were notified. Death resulted in 2 cases.

Ophthalmia Neonatorum.

There were 18 cases of this disease notified during the year.

Under this heading is included every kind of "sore eyes" occurring in the newly-born. They were all visited by the Health Visitors, who instructed the mother in each case to immediately seek medical advice.

Cases.			Vision Unimpaired.	Vision Impaired.	Total Blindness	Deaths.
Notified.	Treated.					
	At Home	In Hospital				
18	6	12	13	3	2	—

Unfortunately there have been 18 cases, but in only 5 cases was the vision impaired, and in two of these it amounted to total blindness. There is apparently no need for any impairment of vision whatever if people would only realise the seriousness of the complaint, and have the patient treated on the first symptoms, and keep her under treatment until complete recovery. A weak solution of Nitrate of Silver put into the eyes of every child at birth, is said to be the best prophylactic, and it is to be hoped that this will be adopted universally by the medical profession and the midwives.

Cerebrospinal Meningitis.

3 cases were notified in 1923.

Polio-Myelitis.

2 cases were notified in 1923.

Bacteriological Laboratory.

The total number of specimens examined in 1923 was 3,532 as compared with 3,977 in 1922, and 3,284 in 1921.

TABLE C.

Nature of Specimen.	Total Examinations.		Results of Examination.			
			Positive.		Negative	
	1922	1923	1922	1923	1922	1923
DIPHTHERIA (specimens taken by Medical Officer of Health)	1,698	1,141	78	42	1,620	1,099
Ditto (taken by general practitioners)	1 092	862	159	65	933	797
DIPHTHERIA (total specimens taken)	2,790	2 003	237	107	2,553	1,896
Phthisis	1,174	1 509	179	158	995	1,311
Various	13	20	7	—	6	20
	3,977	3,532	423	305	3,554	3,227

Contacts.

We still keep very busy in the laboratory as the above table shows. There was a fall of 500 in the number of school contacts examined, and out of a total of 1,141, 42 were positive. These children came up for re-examination in a week and were not allowed to return to school until the examination proved negative.

It has frequently been questioned by School Medical Officers and others, whether these contacts ever give rise to cases, and I am afraid that our experience in Bermondsey does not furnish any answer to this question. There is one thing, however, which

can be said and that is that, among the positive cases, we discovered a few who presented the symptoms of diphtheria, and were notified in the usual way. The majority, however, were simply "carriers," and although they had the bacilli in their throats, could not be said to be suffering from the disease.

During the year the bacilli in these "carriers" were examined as to virulence, and we discovered that about 50 per cent. were virulent, and the curious part of it is that we have been unable to trace any other cases to these virulent "carriers."

From all this the question arises as to whether it is worth the trouble examining all these children, and whether we would not get equally good results by simply excluding them from school for a fortnight. It is very difficult to say, and one is inclined to answer the question in a similar manner to the question as to whether disinfection is any use. We do not know how, in a great many of these infectious diseases, the organisms are transmitted from one patient to another, but we know that articles which have been in close contact with the patient can become infected, and pass on infection for a short time after contact with the patient, but we are in entire ignorance as to how long the clothes, etc., retain infection, and as regards these examinations and disinfection it seems better to continue both, until we are able to give a positive answer to the questions set forth above.

WHARVES AND FOOD INSPECTORS.

TABLE D.

PARTICULARS OF WORK, 1923.

Visits.	1			2	3	4	5	6	7	8	9	10	11	
	Food Factories.			Fish Curers.	Food Stores.	Food Wharves and Depots.	Markets.	Restaurants.	Destruction of Food.	Nuisances Found.	Intimations Served.	Various.	Number of Samples taken.	
	Jam.	Butter and Margarine.	Other.										Food and Drugs.	Unsound Food Regulations.
Mr. Scott	220	—	105	13	1104	1690	23	—	241	—	—	112	—	4
Mr. Hoskins	301	23	399	47	123	2269	25	15	305	26	6	108	5	6
Total Visits	521	23	504	60	1227	3959	48	15	546	26	6	220	5	10

Preservatives in Foodstuffs.

The Committee referred to me a very important communication on Food Preservatives by the Medical Officer of Health to the Metropolitan Borough of Paddington. The report is an extremely useful one, and among other things points out the very widespread use of preservatives in foodstuffs. In addition to dairy produce, he says that boric acid is found in sausages, potted meats, bacon and brawn; salicylic acid in jams and temperance drinks, sulphites in temperance drinks, and occasionally formalin in the same drinks. He adds also the following paragraph:—

“The proportions of added preservatives were found to range widely. In the case of sausages, potted meats and brawn, the amount of boron preservative (calculated as boric acid) ranged from 15 to 66 grains per lb., and in bacon from 8.6 to 46. Salicylic acid was found in jams in amounts varying from 1.7 to 8.5 grains per lb., in temperance drinks from 1.5 to 19 grains per pint. Sulphites in lime juice, ginger wine, etc., ranged from 0.1 to 4.5 grains (SO_2) per pint. The proportions of formalin found could not be stated with any accuracy.”

When the question of boric acid in cream was raised by the Borough of Kensington last autumn, I reported to the Committee the very unsatisfactory state of the question of preservatives generally in food, and I recommended at that time that a Committee be re-appointed to investigate the question, and bring the report of the Departmental Committee of Food Preservatives, issued in 1901, up to date, and that the Ministry of Health be asked to initiate legislation on the lines recommended by the Committee. In the present report the whole question has been raised afresh by Dr. Dudfield, and there is no question that it is time that the use of chemical preservatives, if necessary at all, should be under strict regulation. In cold storage and in suitable cool storage we have ample means of preserving food not only in transit but in all stages until it reaches the consumers' hands, and it seems to me that we might follow the example

of many countries which prohibit the use of preservatives altogether, or which have regulations strictly limiting their use. In this respect Great Britain seems to be behind most of the other States, the result being that we are the dumping ground for preserved foods of every description to the detriment of the national health. As pointed out by Dr. Dudfield, the Minister of Health has power under Section 1 of the Public Health (Regulations as to Food) Act, 1907, to make regulations prohibiting or limiting the use of preservatives, and I strongly support his recommendation that this report be forwarded to the Minister of Health, pressing him to exercise the powers conferred upon him by this Section.

Unsound Food.

The following were brought to the notice of the Department, found to be unfit for human food, and destroyed as trade refuse :

					Tons.	Cwts.	Qrs.	Lbs.
Meat—								
	Fresh	...	...	...	—	14	—	26
	Canned	...	...	...	2	12	3	6
Fish—								
	Fresh	...	...	...	1	15	3	21
	Canned	...	...	...	—	19	1	27
Fruit—								
	Fresh	...	...	...	25	8	1	15
	Canned	...	...	...	5	18	1	14
Dairy Produce—								
	Cheese	...	...	...	—	9	3	19
	Condensed Milk	...	...	...	—	3	1	15
	Eggs	...	...	...	—	15	—	—
	Lard	...	...	...	—	—	—	6
Various—								
	Various Canned Goods	...	...	...	1	17	1	—
					40	14	3	9

Milk Premises.

Milk and Dairies (Amendment) Act, 1922.

200 milksellers were registered under the above Act during 1923 and 10 names were removed from the Register, making a total of 190 milksellers on the Register at the end of the year under report.

Milk (Special Designations) Order, 1923.

Dealer's Licences granted during 1923 to:—

Mr. Watkin Davies, of 157, St. James' Road, S.E.16.

Mr. Jenkin Morgan Evans, of 37, Plough Road, S.E.16.
to sell "Certified" Milk.

Supplementary Licenses granted during 1923 to:—

Messrs. Higgs & Sons, Ltd., of 2-6, Canterbury Road, S.W.9, to sell in this Borough "Certified" Milk from their premises at:—

1/3, New Street, Kennington.

62, Borough High Street.

553, Old Kent Road.

22, Credon Road.

Slaughterhouses.

There are now no slaughterhouses in the Borough.

Ice Cream Premises.

There were 131 premises where ice cream is manufactured on the Register at the end of 1922. 20 were added and 25 removed during the year under report, making a total of 126; 109 inspections were made.

Street Markets.

The following report was made to the Public Health Committee on the 30th January, 1923, and adopted by the Council:—

"My attention has been drawn by one of the Inspectors who has been examining the street markets recently, to the difficulty stallholders have of getting rid of unsound food, especially fruit and vegetables, which accumulate as a result of sorting their purchases from Covent Garden. The rejected food is generally stacked in odd boxes which are sometimes placed underneath the stalls, and sometimes on the stalls close to the sound articles. He also noticed in many cases, that these boxes of waste materials did not seem to increase

much in size as the day went on, and it appeared quite possible that some of the unsound articles of fruit and vegetables could be "worked off" in small quantities on purchasers, especially those who do their marketing late at night. He therefore suggested, as an experiment, that the Committee should give instructions for a small handcart to visit the markets once or twice during the market days and collect the rejected fruit and vegetables, and that strict injunctions should be given to all stallholders to provide a suitable receptacle for putting waste material into, and that these should be kept as far as possible away from the articles which they are selling. It will require the engagement of a man on a couple of days in the week to take the handcart round, and if the experiment proves successful the work could be extended, or given up if the contrary proves to be the case. I, therefore, recommend that the Committee give instructions for this to be carried out for a period of six months, at the end of which time I will again report on the matter."

The work was found to be so successful that the Council has now decided to collect this unsound food permanently.

FOOD AND DRUGS.

In Table IX of Appendix will be found a list of the samples taken in 1923, and the action taken. 1,206 samples were taken, compared with 1,202 in 1922, and 1,201 in 1921. Of these 3.3 per cent. were found adulterated, compared with 2.9 per cent. in the previous year, and 5.6 per cent. in 1921.

GENERAL SANITARY WORK.

INSPECTIONS.

In Tables F and G (pages 29 and 32) will be found particulars of the general sanitary work by the District Inspectors during 1923.

The house-to-house inspections numbered 4,319. This is 365 above the total for the previous year.

5,221 intimation notices were served, compared with 5,412 in the previous year.

Smoke Nuisances.

35 observations were kept on chimneys and 4 notices served.

The following is a report submitted to the Committee on April 24th, 1923:—

“In a letter to this Council on the 8th March last the County Council informed us that the Public Control Committee have under consideration the question of atmospheric pollution and fog prevention, and in connection therewith, they had before them the report of the Departmental Committee on Smoke and Noxious Vapours Abatement, issued on the 6th December, 1921. They enclosed a Summary of Recommendations of this report, and drew special attention to No. 4. The following are the recommendations:—

(a) With regard to industrial smoke.

1. That the Minister of Health should be given clearly defined power to compel or act in place of any defaulting authority which refuses to perform its duty in administering the law with regard to smoke.

2. That the general legal obligation on all manufacturers, users and occupiers of any business premises or processes, engines or plant of any description whatever should be to use the best practicable means, having regard to all the circumstances of the case, for avoiding the pollution of the air by smoke, grit or any other noxious emissions; that the same law should also apply to all Government establishments and all rail and road locomotives and motor cars of whatever weight or type, and to steamers on rivers, estuaries and lakes.

It must be clearly understood that questions of cost must be taken into account in determining what is practicable.

3. That the Minister of Health should be empowered to fix standards from time to time, and in any case in

which the emission exceeds the standard so fixed, the onus of proof that the manufacturer is using the best practicable means should be on the manufacturer.

4. That the duty of enforcing the law with regard to pollution of the air by smoke should be transferred from the local sanitary authorities in whose jurisdiction it now rests to the county authorities, i.e., the Councils of counties and county boroughs; minor authorities should still have power to take proceedings if they so desire.

5. That the Minister of Health should be empowered to constitute joint committees consisting of two or more councils in cases where it appears to him that this course would lead to the better administration of the law with regard to smoke in any given area.

6. That the Minister of Health should assign to one or more competent officers the duty of advising and assisting local authorities and manufacturers with regard to difficult smoke problems; these officers should report annually on the steps which are being taken and the progress which has been made in the suppression of avoidable smoke.

7. That the law should enable much larger fines to be imposed than at present.

8. That legislation should be introduced at an early date with a view to consolidating in one measure the various existing statutory provisions with regard to the pollution of the air by smoke, and providing for their amendment where necessary to give effect to the above recommendations.

(b) With regard to domestic smoke.

9. That the Central Housing Authority should decline to sanction any housing scheme submitted by a local authority or public utility society unless specific provision is made in the plans for the adoption of smokeless methods

for supplying the required heat as suggested in our (i.e., the Departmental Committee's) interim report. The only exception to this rule should be when the Central Authority are fully satisfied that the adoption of such methods is impracticable.

10. That the Government should encourage the co-ordination and extension of research into domestic heating generally. This is a matter of great importance in view of the many outstanding problems which demand inquiry.

11. That local authorities should be empowered to make bye-laws requiring the provision of smokeless heating arrangements in new buildings other than private dwelling-houses, such, for example, as hotels, clubs, offices and the like.

(c) *General.*

12. That gas and electricity undertakers should be given every facility and encouragement to increase and cheapen the supply of gas and electricity, and that the practice at present followed by some municipal authorities of over-charging for gas and electricity in order to allocate the profits thus accruing to the relief of the rates should be discontinued.

(d) *With regard to noxious vapours.*

13. That the Alkali, etc., Works Regulation Act, 1906, should be amended so as to apply generally to all manufactures from which noxious vapours might come.

14. That a list of such noxious vapours should be included in the Act, and the Minister of Health should be empowered to add to this list from time to time other noxious vapours, after due inquiry.

15. That a general obligation should be placed on every manufacturer of using the best practicable means for preventing the escape of noxious or offensive vapours,

16. That the present system of registration should be continued, and the Minister of Health should be empowered to require the registration of classes of works not at present required to be registered.

17. That the Minister of Health should be empowered to fix standards from time to time after due public inquiry with regard to noxious vapours in cases where he finds it desirable; and these standards should have the same legal force as those which we recommend with regard to smoke."

The pollution of the atmosphere by smoke in the large towns of Great Britain may be counted as one of the most urgent problems in public health. As our population becomes increasingly urbanised the problem increases in importance. Respiratory diseases including pulmonary tuberculosis accounted for more deaths than any other group of diseases in 1914, i.e., 30 per cent. of the total deaths, and that these are greatly aggravated by the condition of the atmosphere is universally admitted. Here in London the death rate from these diseases mounts up during and immediately after a fog, so that there can be no question of a connection between the two. The problem is a very complicated one, especially as three-fourths of the smoke is caused by domestic chimneys, and more than three-fourths of the damage. The reasons for the latter statement is that in industrial smoke the combustion being done in high temperature furnaces is more complete, and there is an absence of tar and acid products, whereas in domestic smoke which is caused by the combustion of ordinary coal at a low temperature, there is a very large proportion of tar and acids, which are the chief causes of the damage, not only to buildings but to people's lungs. It is thus evident that the stopping of industrial smoke, though it will help matters considerably, does not by any means solve the problem of the pollution of the atmosphere, since it leaves domestic smoke untouched.

I do not think much good is going to be effected by the transference of the powers of the Sanitary Authorities for smoke abatement to the County Councils, since the reason of the failure of the Smoke Clauses in the Public Acts is not altogether due to unwillingness of Sanitary Authorities to enforce the law, but to the difficulties adherent in the present enactments. In order to abate smoke in the first place it must be "black," and that leaves too much room for interpretation. If the word "black" is omitted you must have some degree of smoke for which a manufacturer can be prosecuted, and this again leaves much room for individual opinion. I think, however, that there should be some alteration in the present law in the direction of defining the kind of smoke for which a manufacturer can be prosecuted, and also for increasing the penalties. I do not see any objection to County Councils having co-ordinate powers with us on the question of smoke abatement, for the more inspectors there are making smoke observations the more careful will manufacturers be not to allow smoke. As regards the more important question of domestic smoke, the problem is mainly an economic one. Until there is a cheap smokeless fuel, equal in efficiency and price to ordinary coal, placed on the market, there seems little chance of doing away completely with the domestic coal fire. Of late years there has been a great increase in the use of gas and electricity in London, and the improvement produced thereby is very noticeable in the diminution of the severe fogs which used to occur regularly about November some 25 years ago. There is no doubt that this points the way to reform in the matter of domestic smoke, and every endeavour should be made to encourage the use of gas and electricity for cooking and heating, and at the same time to discourage the use of raw coal for the same purpose. Experiments have shown that coal can be partly converted into coke by heating in retorts, utilising the by-products that are driven off and converting the residue into a coke briquet. This results in a smokeless fuel, but

whether it can be produced on a sufficiently large commercial scale to supersede coal is very difficult to say. English people are wedded to the ordinary open fire, and for continuous burning it is undoubtedly the cheapest form of heating, but taking into consideration the work involved and cleaning grates, removing ashes, etc., it is not at all equal to gas, where heat is required for short periods only.

Of all the other recommendations which are set out above the most important is No. 10 because until a plentiful supply of cheap smokeless fuel is discovered and put on the market in sufficient quantities to replace coal, I do not think there is the slightest chance of clearing the atmosphere completely.

HOUSE AND TRADE REFUSE.

The following table shows the amount of House and Trade Refuse disposed of during the year ended December, 1923:—

		Loads.	Tons.	Cwt.	Qrs.
House Refuse to Barge ...	...	12,890	21,749	11	3
„ „ various Shoots		388	640	4	0
Trade Refuse to Barge ...	...	1,599	1,455	4	2
„ „ various shoots		183	301	19	0
		—	—	—	—
Totals ...		15,060	24,146	19	1
		—	—	—	—

Offensive Trades.

The offensive trades on the Register are as follows:—

Tripe Boiler	...	...	1	Glue and size makers	...	4
Fellmongers	...	...	3	Fatmelters	...	4
Manure Manufacturer	...		1			

DISINFECTION.

The following table shows the number of articles passed through the steam disinfecter during the year under report:—

Beds	...	...	1,085	Pillows (cases)	...	1,473
Blankets	...	...	2,532	Quilts	...	1,249
Bolsters	...	...	720	Sheets	...	1,420
„ (cases)	...	...	218	Books	...	619
Carpets	...	...	2	Miscellaneous	...	3,661
Cushions	...	...	260	Verminous Clothing	...	358
Mattresses	...	...	409	„ Bedding	...	72
Overlays	...	...	645	Hair (bundles)	...	Nil
Pillows	...	...	2,140	„ (cases)	...	Nil

12,961 new tabs were used to replace those taken off mattresses, palliasses, and cushions before disinfection.

Number of rooms disinfected ... 1,993

Cleansing of Persons Act, 1897.

During the year under report 19 male and 16 female adults used the Verminous Baths and had their clothing disinfected. The total number of articles disinfected for this purpose was 358.

TABLE F.—Proceedings during 1923.

PREMISES.	NUMBER OF PLACES.				Number of Inspections, 1923	Number of Notices, 1923.	Number of Prosecutions, 1923.
	On Register at end of 1922.	Added in 1923.	Removed in 1923.	On Register at end of 1923.			
Milk Premises	312	...	...	...	586	...	...
Cowsheds	...	...	...	...	...	...	...
Slaughter-houses	1	...	...	...	...	...	...
Other offensive trade premises	13	...	...	13	37	...	...
Ice-cream premises	131	...	...	...	109	...	...
Registered houses let in lodgings	223	...	...	223	446	...	...

Overcrowding, 1923—

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

Underground rooms—

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

Insanitary houses—

Number closed under the Public Health London Act, 1891	...	...	...	...	...	—
Number closed under the Housing of the Working Classes Act	...	...	...	...	...	—
Number of premises cleansed under Section 20 of the L.C.C. (General Powers) Act, 1904	...	...	...	...	...	—
Number closed under the Housing, Town Planning, etc., Act, 1909	...	...	...	...	...	—

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

Number of persons accommodated	80
--------------------------------	-----	-----	-----	-----	-----	----

Revenue Acts—

Number of houses for which applications were received during the year	...	...	...	...	...	—
Number of tenements for which certificates were granted	...	...	...	...	...	—
Number of tenements for which certificates were deferred	...	...	...	...	...	—

Housing, Town Planning, etc., 1909, Sec. 35—

Number of houses for which applications were received during the year	...	...	...	...	...	—
Number of houses for which certificates were granted	...	...	...	...	...	—

Number of prosecutions under Bye-laws under Public Health Act, 1891—

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

Mortuary—

Total number of infectious bodies removed ...	5
Total number of bodies removed	83

TABLE G. *Work of District Inspectors, 1923.*

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	
Year 1923.	House-to-House.	Special Inspections.	Complaints.	Infectious Diseases.	Factories and Workshops Specially Inspected.	Offensive Trades.	Outworkers' Bi-Annual Inspection.	Underground Conveniences.	Drains Tested.	Other Calls and Visits.	Chimneys Watched.	Bakehouses.	Butchers.	Fishmongers, Friers and Curers.	Food Stores.	Fruiters and Greengrocers.	Ice Cream.	Markets.	Milksellers.	Restaurants and Eating Houses.	Slaughterhouses.	Destruction of Food.	Various.	TOTALS.		Number of Samples Taken.
																								Visits.	Ints.	
Mr. Francksen	556	136	190	86	42	—	36	188	28	1990	—	16	25	19	110	35	5	46	73	74	—	5	22	3682	565	150
„ Wood ...	567	120	238	104	41	3	16	6	28	2087	33	31	48	43	109	48	16	208	122	41	—	4	—	3913	712	150
„ Merryman	434	114	330	138	9	1	—	48	59	2015	—	9	16	3	66	13	10	33	55	15	6	—	7	3381	541	150
„ Toogood...	595	143	391	166	8	21	10	—	58	2162	—	24	62	66	27	15	11	36	53	27	—	4	—	3879	756	150
„ Freeman .	607	65	329	107	40	12	23	—	21	2016	—	37	48	32	104	65	29	194	63	44	—	8	1	3850	715	150
„ Pitts ...	477	120	385	136	21	—	—	168	36	1815	—	31	31	13	109	26	4	285	57	3	—	29	44	3790	650	150
„ Davis ...	548	64	203	165	44	—	12	139	39	1919	2	40	33	43	189	42	15	100	100	56	—	2	—	3755	663	150
„ Luke ...	535	101	300	143	58	—	117	72	147	1701	—	21	61	22	162	35	19	99	63	47	—	8	7	3718	619	150
Total Inspections by District Inspectors for year 1923 ...	4319	863	2366	1045	263	37	219	621	416	15705	35	209	324	241	876	279	109	1001	586	307	6	60	81	29968	5221	1200

MATERNITY AND CHILD WELFARE.

The following report has been submitted by the Assistant Medical Officer for Maternity and Child Welfare:—

I have the honour to submit the following report of the work of the Maternity and Child Welfare Department.

The visits paid by the Health Visitors are set forth in Table H.

The attendances at the Centres will be found in Table I.

New Sessions:—If these tables be compared with those for 1922 it will be seen that the work has considerably increased during the year. The Ante-natal Clinic at 98, Rotherhithe New Road, which was formerly held fortnightly has been held weekly for the past nine months. At this clinic 211 cases were examined during the year. Out of the 141 delivered; 122 were normal successful deliveries: 19 being referred to hospital for treatment.

There were no maternal deaths among the 211 ante-natal cases. Two infants died during the first fortnight after birth. Closer co-operation between the midwives and the ante-natal clinic has been evinced during the year, the midwives often finding time to accompany their patients.

At the request of the mothers a new sewing class was started at the Manor Chapel Centre in November.

Changes in Staff.—Miss Sumner and Miss Taylor resigned during the year, to take up work of a different nature. Their vacancies have been very efficiently filled by Miss White and Miss Mercer.

The Birth Rate for the year was 23.9. The Infantile Mortality per 1,000 births was 76. Of these deaths 19 per cent. were due to respiratory diseases, and 17 per cent. to diarrhoea and sickness.

During last year a beginning was made of feeding young children, who were not breast-fed, on dried milk instead of liquid cows milk, but this for various reasons could not be continued.

An enquiry has been made into the number of babies who are breast fed, and who continue to be so fed. The following figures give a general idea of the proportion of breast feeding to artificial feeding. Out of 2,471 babies of whom I have records, 2,362 were breast fed at 2 weeks; 35 were having feeds, and 74 were fed by bottle only. At 3 months of age 1,852 babies were still breast fed, and at 9 months 989 were at the breast.

The last 2 figures, viz., for 3 months and 9 months are incomplete because many of these mothers attend the Voluntary Centres, some have removed, and some of the babies included in the first figure have died.

Many mothers who would otherwise cease to breast feed their babies are encouraged and helped to do so by the Health Visitors, and at the Centres. Doubtful cases are given test feeds; the mother is thereby shown whether her baby is having sufficient, and is encouraged to persevere. The fact that a limited supply of breast milk complemented by cows milk is still new to some mothers, but is welcomed by them when explained.

Rickets.—An enquiry has recently been made into the number and distribution of cases of rickets throughout the Borough. The following table gives these figures in detail:—

District No. 1	...	32 (incomplete)	
„ „ 2	...	32 (incomplete)	
„ „ 3	...	31	Cases of children under 5 years of age showing deformities due to rickets.
„ „ 4	...	18	
„ „ 5	...	11	
„ „ 6	...	23	
„ „ 7	...	7	
„ „ 8	...	7	
Total	...	161	

The table is interesting in that it shows that the high rate of rickets is in the districts where there are tall tenement buildings, namely, Districts 1, 2 and 3, which include all the high dwellings round about Tooley Street. The lack, and often the complete absence of sunlight from these dwellings is a very strong contributory factor to the incidence of rickets. Whereas in Districts 7 and 8, which border the River, and where sunlight and fresh air are obtainable, the figure is very low.

We are much indebted to the Municipal Dental Surgeon for the amount of work which has been done for mothers and toddlers attending Centres. The educational work as regards the care of the teeth is uphill work, and much time and persuasion have to be used to induce mothers to face the terrors of the dental chair. Apart from this, economic conditions, in spite of the low rates charged, prevent many mothers from receiving treatment, but this does not apply to children under 5, whose treatment is free. During last year the total number of expectant and nursing mothers examined was 323, whereas only 268 were treated. Of toddlers 280 were examined and 158 treated.

Thanks are due to Dr. Connan, Clinical Tuberculosis Officer, for the reports on cases referred to him for expert opinion.

The Invalid Children's Aid Association and The Charity Organisation Society have again been instrumental in getting away children who could not be taken at Fairby Grange.

During last Summer four lectures were arranged for the Health Workers of the Borough. They were given by distinguished lecturers, and it was unfortunate that there was not a better attendance at them. With Councillor Mrs. A. Salter, J.P. (then Mayor) in the chair, Professor Kenwood, C.M.G., gave a very interesting talk on "Some aspects of Maternity and Child Welfare Work," and helped us realise the ideals of the work we have to do. Ideals which often are veiled in official routine. With Dr. R. King Brown in the chair, Dr. Jewsbury,

the Director of the Truby King Home, gave a helpful lecture on Breast feeding. He described the methods used at the home to re-establish lactation.

Professor Louise McIlroy, Director of the Obstetrical and Gynaecological Unit at the Royal Free Hospital, lectured on the preventive work possible in Midwifery, and the great importance of ante-natal clinics.

With Dr. Connan in the chair, Dr. Woolsey Stocks, Medical Officer of Health of West Bromwich, discussed the work of Health Visitors, and pointed out that in Boroughs where consideration was given to the special nature of the work by carefully shortening their hours so as to obtain the maximum efficiency, the sickness rate was lowered and the general standard considerably improved.

Voluntary Centres:—

The following reports have been sent to me by the Voluntary Centres:—

Salomon's Centre. Guy's Hospital.

Ante-natal. New cases 1,170; Total attendances, 3,599.

Post-natal. New cases, 148; Total attendances, 2,045.

There is a special clinic held on Tuesday mornings for difficult cases of breast feeding, the success of which in establishing delayed lactation has shown excellent results with Primiparae, premature babies and post-operative mothers.

Dental.—1 Session weekly. New Cases, 95; Total attendances, 169.

Convalescent Home.—16 mothers and babies have been sent for two weeks each to Hambleton, Surrey.

Fulford Street.—Dr. Johnson is in attendance at all the Sessions.

Ante-natal. 128 new cases.

Post-natal. 175 new babies. Total attendances under 1 year 2,185. Over 1 year 808.

Sewing Class. Average attendance per class 9.7.

Lectures. Three series of 12 lectures each given during the year on "How to keep well," "Adolescence," "Some Wonders of the Human Body."

A Municipal Health Visitor assisted Miss Berry at the Post-natal Sessions.

St. George's Hall.—Dr. Alice Hutchison is in attendance at all the Sessions. There is no ante-natal clinic, but 257 home visits were made by Miss Bowden to expectant mothers and advice given. 99 children under 1 year are attending the Centre regularly and 162 over one year. 132 new cases were visited. A weekly sewing class is held with an average attendance of 11. In addition to the routine work, Miss Bowden, the Superintendent, has given a series of talks to adolescent girls.

Great Central Hall.—Mothers on the register, 854. Attendances, 16,537. Home Visits, 1,781.

Two sessions weekly are held and on an average six new babies are brought to each session. There are also two medical officers in attendance at each Session, Dr. Grace Pailthorpe and Dr. Cook.

A Municipal Health Visitor assisted Miss Rear at each Centre, but the bulk of the work was carried out by voluntary workers who rendered willing service. In the present year, 1924, an enlargement of the programme of sessions has been arranged.

Princess Club.—As before, the sessions are attended by Dr. Constance Stoker, Dr. Harry, and Dr. Rose Turner.

			Total Attendances.	Average per session.
Ante-Natal Clinics	...	...	661	14
Weighing days	...	...	8146	46
Sewing Classes	...	...	1797	24
Lectures	...	...	190	19

The total number of babies attending the Club during the year was 748. New babies totalled 349. There were 1,552 visits paid.

(Signed) MILDRED A. THYNNE.

Assistant Medical Officer for Maternity and Child Welfare.

TABLE H.—*Health Visitors.*

The following Tables show the work done by the Health Visitors during the year 1923:—

	Births Notified.	First Visits.	Subsequent Visits		Ante-Natal.	Puerperal Fever.	Ophthalmia Neonatorum.	Various Calls and Visits.	Reports to M.O.H.
			Under 1 Year.	1 to 5 Years.					
No. 1 District ...	315	400	778	845	31	—	16	339	66
" 2 " ...	346	290	837	990	48	—	5	270	35
" 3 " ...	361	414	592	464	71	—	12	254	51
" 4 " ...	376	398	377	254	57	—	15	347	71
" 5 " ...	290	323	521	522	66	1	4	205	8
" 6 " ...	359	397	763	755	34	—	13	229	76
" 7 " ...	300	302	1207	492	14	2	7	405	18
" 8 " ...	352	343	805	922	20	—	3	359	7
Salomon's Centre ...	174	193	2952	3516	1421	—	—	1324	21
Princess Club ...	—	—	448	—	45	—	—	1014	2
Fulford Street ...	—	—	500	145	174	—	—	587	—
St. George's Hall ...	—	—	1476	1857	224	—	—	432	—
Central Hall ...	—	—	646	596	55	—	—	242	—
Totals ...	2873	3060	11966	11358	2260	3	75*	6007	355

* Includes re-visits.

TABLE I.

Attendances at Maternity and Child Welfare Centres for the 52 weeks ended December 29th, 1923.

Name of Centre.	Class for Mothers.			Sewing Class.		Ante-Natal Clinic.	
	No. of Sessions.	Nos. Attending Children.		No. of Sessions.	No. attending	No. of Sessions.	No. attending
		Under 1 year	1 to 5 years				
Town Hall	100	3360	1841	35	446	—	—
98, Rotherhithe New Road	102	3747	1414	43	275	38	554
Trinity Road	47	1033	613	—	—	—	—
Oxley Street	94	2186	1490	21	150	—	—
Roseberry Street	46	1903	918	8	50	—	—
Salomon's Centre	131	1419	530	—	—	192	3503
Princess Club	160	5138	2564	70	1629	43	620
Fulford Street	94	2576	931	39	366	14	95
St. George's Hall	48	1241	1036	46	535	—	—
Central Hall	94	9828	6709	—	—	—	—
Totals	916	32431	18046	262	3451	287	4772

MUNICIPAL LYING-IN HOSTEL.

 Report from January 1st to December 31st, 1923.

(1) Total Number of Cases Admitted	...	...	...	143
(2) Average Duration of Stay	...	...	...	14 days
(3) Number of Cases Delivered by Midwives	...	...	...	138
(4) Number of Cases Delivered by Doctors	...	...	...	5
(5) Number of Cases in which Medical Assistance was sought by Midwives	...	...	...	17
<hr/>				
(a) <i>Ante-Natal</i>	...	...	...	Nil
(b) during Labour	...	...	...	5
(c) after Labour	...	...	...	12
(d) for Infant	...	...	...	5
<hr/>				
(6) Number of Cases Puerperal Sepsis with Result of Treatment	...	...	...	Nil
(7) Number of Cases in which Temperature rose above 100.4 for 24 hours with Rise of Pulse Rate	...	...	...	Nil
(8) Number of Cases notified as Ophthalmia Neona- torum, with Result of Treatment	...	...	...	2
(9) Number of Cases Inflammation of the Eyes, however slight	...	...	...	4
(10) Number of Infants not entirely Breast-fed while in the Institution, with the reasons why they were not Breast-fed	...	...	...	10
Badly-formed nipples or milk delayed in primiparæ. Supplementary feeds given.				
(11) Number of Maternal Deaths with Causes	...	...	...	Nil
(12) Number of Fœtal Deaths, Stillborn or within 10 days of Birth, and their Causes, and the results of Post-Mortem Examination, if obtainable	...	...	...	5
Stillborn—1 Macerated fœtus; 2 Complicated breech; 1 Delayed labour.				
Deaths—1 Premature; Heart 1.				

The following report on the Municipal Lying-in Hostel was made to the Committee on the 13th November, 1923:—

“The Municipal Lying-in Hostel was established in 1919, and equipped and run for nearly twelve months at a cost of £2,000. This was only done owing to the generous action of the American Red Cross Society in giving us a donation of this amount, through the Secretary of the Federation for Maternity and Child Welfare. The costs for the subsequent years were as follows:—March 31st, 1921, £2,321; March 31st, 1922, £2,520; March 31st, 1923, £2,075; and the estimate for the present year is £1,840. The total net cost per patient per week for the year ended March, 1923, was £7 2s. 8d., and the receipts from patients were £1 14s. 4d. per week, showing a loss per patient of £5 7s. 7d. per week, or a total loss on every patient in the Home of £10 15s. 2d. per fortnight. The number of patients attended to in the first year was 155, and for the year ended March 31st, 1923, 138. The number of patients in the first nine months of 1922 were 102, and in the first nine months of this year 86. The bookings have gradually decreased from 75 in March, 1921, to 28 now. For the year ended March 31st, 1923, only 66 per cent. of the beds in the Hostel were occupied, and the question now comes whether the Borough is getting value for the money expended, for it is evident that the Hostel has been, and is being, run at a very serious loss. The original idea of the Hostel was to provide accommodation for women of the working classes who wished to be confined and had no proper accommodation in their own homes. At that time there was another difficulty, inasmuch as there were only five midwives practising in Bermondsey, as against ten now. Only a very small number of medical practitioners in the Borough were attending confinements at the date of the establishment of the Hostel, partly owing to the large amount of work many had to do on the Panel, and partly owing to many of the practitioners being somewhat advanced in years. Many of these conditions are changed nowadays, and many of the

older practitioners have been replaced by younger men, who are anxious to attend, and are taking on, a good many midwifery cases. In addition to these, since the foundation of the Hostel, the Bermondsey Guardians have established a very excellent Maternity Ward in the Bermondsey and Rotherhithe Hospital, at very low fees to the patients, and during the first nine months of 1923 they had 328 cases in the ward. A further factor has come in, inasmuch as Guy's Charity, which used to cover about a third of the Borough, now covers nearly the whole Borough, so that practically every woman living in Bermondsey who is going to be confined, and cannot afford the usual fees, can be attended free from Guy's Hospital. From a consideration of all these factors it is quite evident that the need for the Hostel has passed. From the first almost it was evident that unless we opened the doors free we were hardly likely to get hold of the class of patient who seemed most in need of help, and, as a matter of fact, this has been so. By far the large majority of patients belong to the artisan and clerical class, who apply to be received into the Hostel more as a matter of convenience than of necessity. I think, therefore, that the Committee might seriously take into consideration as to whether it is wise for us to continue the Hostel. It is a great expense for which we do not seem to get an adequate return, and it seems to me that the money we spend here could be laid out with much greater benefit in some other direction. As regards the use of the premises, we are in great need of proper accommodation for the Maternity and Child Welfare Centre, which is now carried on at the Shelter in the Dépôt. This Shelter was originally built at considerable expense to take contacts, who were unable to stay in their own homes during the process of disinfection, and also for the reception of contacts in the initial stages of dangerous epidemic diseases such as small-pox and typhus, and I can say that we have on several occasions stopped an epidemic, which threatened to spread, by the timely housing of contacts in this Shelter.

There are four tenements in the Shelter, and one of them is at present occupied by the Committee for the Unemployed, while the three others are used as a Maternity and Child Welfare Centre. The result of this is that if we are threatened by an epidemic, such as the case of small-pox which occurred last spring, we have great difficulty in accommodating the contacts, and it means suddenly displacing the present occupants of the Shelter, greatly to their inconvenience. I should be glad if we could have a Centre which could be devoted solely to Maternity and Child Welfare near the Town Hall, and I cannot imagine a more suitable building than the Hostel. No structural alteration will be necessary for this purpose, but figures will be submitted for the redecorations which will be required; but as no money will be required to be expended on this purpose for the present year, it will not make any alteration in our estimates up to March 31st, 1924.

The furniture at present there could be redistributed, as there are several articles in the Hostel which would be useful to Fairby Grange, and a few of them may be required in some of the other Centres. Apart altogether from the closing of the Hostel, the present position of the Town Hall Centre is most inconvenient, and is very difficult for the mothers to find, the approaches being through the Depôt. There is also a tannery adjacent, which creates a very unpleasant odour, and the road leading to it is frequently blocked up with carts, so that mothers have great difficulty in getting into the Shelter with their perambulators.

I recommend, therefore, that the Hostel be discontinued as from March 31st, 1924, as a Lying-in-Home, and that the building be used as a Maternity and Child Welfare Centre from that date onwards."

The recommendation contained in the last paragraph of this report was adopted by the Committee and the Council.

In April of this year, the Centre which was formerly held in the Shelter, Neckinger, was transferred to 110, Grange Road,

and the Dental Surgery, 98, Rotherhithe New Road, was also transferred to this Centre.

FAIRBY GRANGE CONVALESCENT HOME, HARTLEY, KENT.

The following was presented to the Maternity and Child Welfare Committee in September, 1923:—

Short Description of House and Estate.

“Fairby Grange is a charming old-world country house. The house, with three cottages and an estate of nearly 20 acres, was offered to the Council by Dr. Salter for the purpose of the establishment of a convalescent home for mothers and babies. The Council accepted the gift with gratitude and instructed the Medical Officer to prepare a scheme.

The house contains 25 rooms, including a lounge and three bathrooms.

Ground Floor.—The lounge gives access to two short corridors arranged at right angles. Two reception rooms, the billiard room and a cloakroom open on to one corridor. The other corridor leads to the dining-room and to the kitchen and sculleries.

First Floor.—The main staircase opens on to the lounge below; above, it leads to two corridors arranged at right angles as on the ground floor. One of these corridors gives access to the nursery, two bedrooms, the linen room and two bathrooms. The second corridor leads to two large bedrooms, two smaller bedrooms and a bathroom. At the end of each of these corridors a smaller staircase leads up to two bedrooms which have evidently been designed for the use of domestic servants.

In addition to the house, there is an estate of approximately 20 acres, upon which is situated three cottages. By arrangement with the Beautification Committee, the pleasure

grounds immediately surrounding the house will be for the use of patients; the remaining part of the grounds will be let on a rental to the Beautification Committee.

Method of adapting Fairby Grange for use as a Convalescent Home.

Ground Floor.—The dining-room will seat comfortably 21 persons, i.e., 15 adults and six toddlers, so that all the patients will be able to sit down to each meal at the same time when the home is full. A hatch has been constructed between the dining-room and kitchen thus facilitating the service of meals and avoiding the necessity of extra kitchen staff. The kitchen is large and well lit and ample for the purpose of the home. A recess from the kitchen has been fitted as a small sitting-room for the kitchen staff. Adjoining the kitchen is a scullery and a wash-house, together with a butler's pantry, which will be used as a storeroom. The wash-house is fitted with a copper and two special washing places, which will be utilised for the washing of baby clothes.

At the end of the second corridor on the ground floor is the billiard room. This is a large room and will be used as a day room for mothers and babies and toddlers. Next to the billiard room there is a smaller room, which will be shared by the matron and nurse as a sitting-room and office. Like the billiard room, this room has a separate door opening on to the garden. The last room in this corridor is a reception room eminently suitable as a quiet room for the mothers. This room has a door opening on to a verandah, so that it will be possible for mothers to rest in this room while their babies sleep in prams in the open air on the verandah outside.

First Floor.—The nursery on this floor will be used as a room in which the babies will be dried and clothed. This room is opposite the two bathrooms in which the babies will

be washed. After their bath the babies will be wrapped in towels and taken into the nursery. The first bedroom on this floor will accommodate three mothers and their babies and three toddlers. The second bedroom will take three mothers and babies and one toddler. On the same floor along the other corridor four mothers will sleep in the best bedroom. The small bedroom adjoining the bathroom is the matron's bedroom. Of the remaining two bedrooms on this floor, the larger one will accommodate three mothers and babies and two toddlers and the smaller room two mothers and babies. The bathroom on this corridor will be for the use of the staff. Above this corridor on the second floor the nurse will sleep in one room, the second room being kept empty as an isolation or emergency bedroom.

The cook and the two domestic servants will sleep on the second floor above the linen room and bathroom at the end of the other corridor.

Accommodation.

Accommodation will thus be provided for 15 mothers, 12 babies and 6 toddlers. This estimate of the accommodation is conservative and provisional.

The number of births in the Borough last year was 3,167. It is impossible to say what proportion of the mothers require convalescent treatment, but, in my opinion, at least 50 per cent. of them would benefit greatly by such treatment. The accommodation at Fairby Grange will allow for the treatment of approximately 350 to 400 mothers annually, so that, even if the convalescent home is full all the year round, the need will only partially be met. It cannot, of course, be assumed that all those who need treatment will be able to avail themselves of the opportunity offered at Fairby Grange. Probably those whose need is greatest will be the least able to go away, either on account of the expense or because of

the impossibility of leaving other young children at home. To meet this obstacle it has been decided to assess the charges to be made according to the circumstances of the family and to allow a mother to take one toddler in addition to her infant. The health visitors have been instructed to make the home known to all their mothers and to give every assistance to the applicants. The success of the scheme will be, to a large extent, dependent on their efforts.

Cost of Furnishing.

The estimated cost of furnishing and equipping Fairby Grange as a convalescent home was £1,000. At the time of reporting the home has been furnished and equipped at a cost of £740. There remain some items of furniture to purchase and minor alterations to carry out.

The furnishing of the home has been carried out with a view to the comfort and happiness of the patients, and while nothing has been done to lessen the amenities of what is a beautiful house, strict regard has been paid to economy.

Staff.

(1) *Matron*.—Miss Sewell, matron of the lying-in hostel, has been appointed temporarily as matron at her present salary of £140 per annum.

(2) *Nurse*.—Mrs. Barden has been appointed at a salary of £70 per annum.

(3) *Cook*.—Miss Boutcher, of the lying-in hostel, has been appointed cook temporarily at her present salary of £60 per annum.

(4) One *housemaid*, at £30 per annum, not appointed at time of writing.

(5) One *between-maid* at £26 per annum. Dorothy Francis, age 20, appointed on one month's trial.

(6) One *gardener* at £2 17s. per week, with a cottage on the estate.

Estimated Expenditure for the next Seven Months.

	£
Rates, Taxes, Insurances, Telephone, etc.	140
Water, Fuel and Lighting	104
Provisions and Necessaries	600
Laundry	100
Repairs and Maintenance	50
Furniture and Equipment (renewals) ...	Nil
Salaries and Wages	280
Medical Requisites	10
	<hr/>
	£1,284

Less Income—

	£
Patients' Fees	100
Rent from Cottages and Grounds ...	77
	<hr/>
	£177
	<hr/>
	£1,107

Method of Admission; Fees; Transport of Patients.

Provisional rules to govern the admission of patients, charges to be made, &c., have been drawn up as follows:—

(1) The Home is open for the reception of Mothers and Babies.

(2) Babies must be at least three weeks old and not more than 12 months old.

(3) In addition to the baby, the mother may, in exceptional circumstances, be accompanied by one other child, which must not be more than five years of age.

(4) A mother may be admitted unaccompanied provided she is the mother of a child under five years of age, or when convalescent treatment is necessary following miscarriage or a confinement where the infant has died.

(5) Expectant mothers in need of convalescent treatment will also be admitted, but admission will, in general, not be allowed after the sixth month of pregnancy. An expectant mother may be accompanied by one child under the age of five.

(6) Application for admission is to be made on a form which can be obtained from the Public Health Department, Town Hall, Spa Road, from any of the Maternity and Child Welfare Centres, or from any doctor or clergyman in the Borough.

(7) The form, when filled in, should be taken *by the applicant personally* to Dr. Mildred Thynne at 98, Rotherhithe New Road, on Friday, at 10 a.m.

(8) The length of stay in the Home shall be a period, not less than 14 days, recommended by the Medical Officer.

(9) A weekly charge will be made which will be assessed according to the financial circumstances of the family. The standard charge will be 10s. per week. In special cases admission may be free. Payments shall be made weekly to the Matron at Fairby Grange.

(10) Patients must pay their own railway fares to and from Fawkham, Kent. The return fare from Holborn Viaduct is 6s.

(11) Mothers must come provided with suitable clothing, and will require a pair of slippers, a change of under-clothing, a brush and comb and toothbrush.

(12) A complete outfit of baby clothing will be supplied by the Home for each infant, which shall be for the use of

that particular infant during its stay in the Home. Care will be taken to ensure that the clothing for each infant is kept separate.

(13) Where an additional child under five accompanies a mother and baby, the child must come provided with suitable clothing—a change of underclothing, a pair of slippers and a toothbrush.

(14) Mothers will be expected to make their own beds and take full charge of their own infants.

(15) All patients are required to agree to abide by the rules of the Home and to carry out the instructions of the Matron. The Borough Council does not hold itself liable in any way whatever for any accident or mishap which may occur to any patient while in the Home.

A supply of application forms has been sent to every Centre, and to every doctor, clergyman and Mission in the Borough, together with copies of the provisional rules and a covering letter. With regard to Section 9, the assessment will be made by the Medical Officer of Health, using the same scale as that laid down by the Council for the supply of milk. Patients entitled to free milk under the scale will pay 5s. per week. Patients entitled to milk at half-price will pay 7s. 6d. per week. Patients above these scales will pay 10s. or more per week according to circumstances. All cases where the assessment is below 5s. per week or above 10s. per week will be referred to the Maternity and Child Welfare Committee.

This scale is provisional and will be reported upon to the Maternity and Child Welfare Committee in the near future.

Section 10.—With regard to this section, those patients who have already been admitted to Fairby Grange were given careful verbal instructions, reinforced by a typewritten sheet containing full directions for the journey. The generous offer of a motor car has since been made by Mr. Norden, and, if the Committee

accepts this offer, the problem of the transport of the patients will be simplified.

Local rules for the orderly running of the Home—*e.g.*, fixing bed-time, meal-times, &c.—have been drawn up by the Matron.

Treatment while in the Home.

Patients will be expected to make their own beds and tidy their bedrooms, and to wash, dress and feed their own babies. Any other help which they give in the Home will be entirely voluntary and at the discretion of the Matron. A certain amount of prejudice exists against convalescent homes on account of the restrictions usually imposed, and at Fairby Grange as great a measure of freedom as is compatible with order and comfort will be allowed. At the same time, the Matron and her assistant will be expected to instruct mothers, individually and tactfully as opportunity occurs, in the general hygiene of pregnancy, of infant life—*e.g.*, feeding, exercise, sleep, &c.

It is hoped that a considerable proportion of ante-natal cases will be admitted, and there is no doubt that sympathetic and judicious instruction will be valuable in these cases.

Medical Supervision.

The Medical Officer of Health will exercise general supervision and visit the convalescent home as often as may be necessary. In case of emergency, arrangements have been made to call in a local practitioner. Patients will be expected to pay their own medical fees.

Date of Opening.

Up to the date of writing over 40 applications for admission have been received. In order that what remains of Summer weather should not be wasted, six mothers, five babies and two

toddlers were admitted on Saturday, 1st September. The number will gradually be increased until the full complement is reached. The date of the official opening has yet to be fixed."

At the date of writing the Home has been in full swing for nine months. I might add that it has been very greatly appreciated by the mothers of Bermondsey, and nothing but good has been spoken of it by those who have had the advantage of spending a short holiday there.

The farming land in connection with it has been let to the Beautification Committee, who have erected on it four propagating houses at a cost of £900. From these the flowers and cuttings necessary for the open spaces in Bermondsey are supplied. The Home is also supplied with fruit and vegetables from the gardens.

The grounds immediately attached to the house have been put in the charge of Mr. Rose, and are in excellent condition and very much appreciated by the mothers. When the Home was first started many mothers were allowed to take a toddler besides a baby, but this had to be stopped, as it was found that the mother could not reap any benefit from the holiday if she had to look after two children. The rule, therefore, of only allowing one child to be taken has been rigidly enforced to the advantage not only of the mother but of the management. The Home is being formally opened by the Rt. Hon. J. Wheatley, M.P. (Minister of Health) on the 26th July, 1924.

DENTAL TREATMENT.

The following report has been submitted by the Municipal Dental Officer which shows a steady advance in so short a period in this branch of the Council's work:—

I have the honour to submit the Third Annual Report of the work carried out at the Dental Treatment Centre during the year 1923.

I have to record that, in nearly every category of patient, the work has increased over that done in 1922 as under:—

Category of Patient.	Numbers Treated.	
	1922.	1923.
Children	201	223
Expectant and Nursing Mothers	314	268
Unmarried Girls (14—20 years)	64	145
Women	273	395
Men	193	358
Tuberculosis Cases	55	93

The reduction of the fees in favour of unmarried girls, from the Public Health scale to that of the Maternity and Child Welfare has more than justified itself.

A table of numbers of mothers and children referred by the various centres is of interest in comparison with Tables I and II.

Centre.	Numbers of	
	Mothers.	Children.
Rotherhithe New Road	45	9
Oxley Street	34	7
Roseberry Street	8	—
Trinity Road	5	9
Town Hall	17	5
St. George's Hall	1	2
Princess Club	24	33
Fulford Street	12	1
Central Hall	8	—
Total	154	66

During 1923 the Medical Mission referred 21 patients, and local medical practitioners 23 for treatment; and 25 cases were treated under Approved Societies' scale of fees.

The Wednesday evening session proved so successful that it was found necessary to devote another evening to cope with the work, so a Tuesday evening session was started on September 18th. During the year, 655 visits were made for treatment during these evening sessions.

The number of maternity and tuberculosis cases referred for assessment of fees was 75. The total amount being £249 18s., which figure was reduced to £109 2s. 3d.

It is considered important to direct attention to the very limited scope in the matter of time allowed for dental treatment under the Maternity and Child Welfare Act. This Act only benefits the mother during the periods of pregnancy and nursing, periods which are the least desirable for dental treatment. In view of the national necessity a healthy mouth is to the mother, the scope of this Act needs to be extended to include benefit to the potential mother, even if legislative measures are necessary.

During the year an examination was made into the bacteriology of pyorrhœa. Tubes of nutrient broth and blood agar were inoculated with the organism obtained from the root apices of teeth, freshly extracted under conditions to prevent contamination; and by swabs of the blood from the tooth sockets after extraction. Different strains of streptococci have been classified according to their behaviour on various media in the laboratory, but for the purpose of this investigation streptococci were classified according to the length of chain formation, especially as the *S. brevis* is considered by some authorities as non-pathogenic and a normal inhabitant. The short chain form usually present itself as an ovoid coccus, while the individual organism of the *S. longus* type may be round or bacillary in shape; and the colonies may hæmolyse blood-agar or cause the formation of methæmoglobin. It may be possible on these lines to make a clinical distinction, but the matter needs more experimental elucidation.

Of 27 cases of chronic general periodontitis examined:—

- 14 gave *S. longus* and *M. catarrhalis*,
- 1 gave *S. longus* in pure culture.
- 3 gave *S. longus*, *S. brevis* and *M. catarrhalis*,
- 3 gave *S. brevis* and *M. catarrhalis*,
- 1 gave *S. brevis* in pure culture.
- 2 gave *Staphylococcus albus* in pure culture.
- 2 gave *S. brevis*, *S. albus* and *M. catarrhalis*,
- 1 gave *S. albus* and *M. catarrhalis*.

Vaccines were made up for 6 cases, 4 streptococcal and 2 staphylococcal in which good results were obtained.

In conclusion, I desire to express my thanks to you for your continued help and kindness; to Dr. D. M. Connan and Dr. Mildred Thynne, to Messrs. H. W. Bush and A. Fair of your staff; to Messrs. Knott and Rogers of the Accountancy Department; to Miss W. Lambert, the dental nurse, and Messrs. G. W. Clark and W. B. Monger, dental mechanics.

GRANTLEY SMITH,
Municipal Dental Surgeon.

TABLE I.—*Inspection and Treatment of Children.*

Age Group.	Number Examined.	Per Cent Needing Treatment.	Per Cent Refusing Treatment.	Number Treated.	Number of Extractions.	Number of Administrations of Anaesthetics.		Fillings.	Number of Root Treatments, etc.	Number of Orthodontic Cases Treated.	Number of Visits for Treatment.
						Local.	General.				
2 Years and under ...	59	32	10	17	60	—	16	25	—	—	60
3 Years and under ...	101	65	10	59	247	7	47	52	—	—	148
4 Years and under ...	77	83	20	51	227	2	46	53	—	—	123
5 Years and under ...	43	72	6	28	135	5	26	14	—	—	49
Over 5 Years...	80	86	14	68	161	21	39	27	9	3	126
Total ...	360	—	—	223	830	35	174	171	9	3	506

TABLE II.—*Dental Treatment carried out during 1923.*

	Number of Patients Examined.	Number of Patients Treated.	Number of Extractions.	Number of Administrations of Anæsthetics.		Number of Fillings.	Number of Dressings.	Number of Root Treatments, etc.	Number of Scalings.	Number of Other Operations.	Number of Dentures Fitted.	Number of Repairs to Dentures.	Number of Crowns.	Number of Visits for Treatment.
				General.	Local.									
Maternity Cases	323	268	1,327	172	181	58	11	13	35	10	112	34	...	909
Women	481	395	1,878	157	299	69	9	7	37	9	141	67	...	1,203
Unmarried Girls (16—20) ...	162	145	287	55	80	72	13	4	7	8	9	...	3	278
Men	501	358	1,080	70	358	83	11	11	22	14	87	31	...	920
Tuberculosis Cases	103	93	533	52	75	53	5	3	14	9	34	9	...	314
Total including Children (Table I) ...	1,930	1,482	5,935	680	1,028	506	49	47	115	50	383	141	3	4,130

TUBERCULOSIS DISPENSARY.

Number of Primary Notifications	...	...	461
Number of Deaths (all forms)	...	...	175
Death Rate per annum	...	...	1.43
Number of cases admitted to Sanatorium			229
Total number of attendances	...	...	5,652
Total number of examinations (including new cases, re-examinations and contacts)	...	...	3,435
Total number of new patients	...	...	538
Number of nurses' home visits	...	...	4,162
Number of doctors' home visits	...	...	66
Number of contacts examined	...	...	443
Number of reports to public authorities	...	...	1,182
Number of letters to doctors	...	...	390
Number of sputum examinations	...	...	923
Number of X-ray examinations	...	...	81
No. of beds on loan	...	...	11

TUBERCULOSIS.

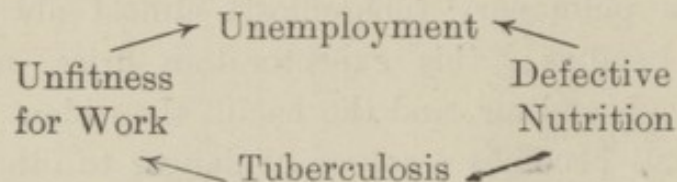
Age Periods.			New Cases.				Deaths.			
			Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
			M.	F.	M.	F.	M.	F.	M.	F.
0...	...	...	1	1	—	—	1	1	1	1
1...	...	...	1	—	13	4	1	1	4	2
5...	...	...	4	4	13	19	3	1	1	1
10...	...	...	3	4	7	8	2	5	1	1
15...	...	...	12	26	5	4	8	11	2	—
20...	...	...	21	22	1	4	7	11	1	1
25...	...	...	32	34	1	6	16	15	—	—
35...	...	...	36	21	4	1	13	14	1	1
45...	...	...	27	7	2	1	20	5	—	—
55...	...	...	14	9	4	1	10	5	2	1
65 and upwards...			8	1	—	—	7	2	—	—
			159	129	50	48	88	71	13	8

Two changes of some importance have taken place during the year. In January the Tuberculosis Officer was appointed Consultant for tuberculosis cases to the Bermondsey and Rotherhithe Hospital. This appointment has been of very great value to the work of the Dispensary. A considerable number of the patients who would probably not have otherwise entered the Hospital have been persuaded to do so, and timely rest and treatment have been of great help to the patient. Under the London County Council scheme, a patient awaiting sanatorium treatment may enter the local hospital and be removed from there to sanatorium when a vacancy occurs. The accommodation for patients at the Bermondsey and Rotherhithe Hospital has been improved recently by the erection of verandahs. This is a very satisfactory arrangement, since patients are very often reluctant to enter the hospital because they fear to lose their chance of sanatorium treatment. In January also the Care Committee was given a room at the Dispensary, it being thought that the work of the Committee might be more fully co-ordinated with that of the Dispensary by this means. Unfortunately, the arrangement has not worked very well, and the whole question of the relation between the Public Health Department and the Care Committee is under discussion at the time of writing. Tuberculosis is, of course, an infectious disease caused by the tubercle bacillus. There are two principal ways in which the bacillus is spread—(1) the expectoration of persons suffering from pulmonary tuberculosis, i.e., tuberculous sputum, and (2) tuberculous milk.

Tuberculous Sputum.—Attention should be drawn to the prevalence of spitting in the Borough. The expectoration of persons suffering from pulmonary tuberculosis almost always contains the tubercle bacillus; this expectoration dries owing to the action of the sun and air, and the bacilli then blow about in the dust which thus becomes a source of danger to others. It may be argued that the risk is small because most of the germs die during the process of desiccation, and because many people who spit are not suffering from tuberculosis. This, no doubt, is true,

but the habit is an objectionable one and has nothing to commend it. It is not tolerated in public vehicles and should not be allowed anywhere, either in public or private. All dispensary patients are carefully instructed as to the dangers of spitting, and supplied with sputum mugs for use at home and pocket flasks for carrying about with them. Antiseptic solution is also supplied for use with the flasks and mugs, and most of our patients readily see the use of these precautions and faithfully carry them out.

Tuberculous Milk.—This is derived from cows suffering from tuberculosis, and the milk from a cow with a tuberculosis udder is exceedingly dangerous. Tuberculous milk is responsible for a large amount of the tuberculosis of bones, joints and glands seen in children, i.e., the so-called "surgical tuberculosis." There were 86 cases of this kind notified in Bermondsey during the year. The remedy is in the hands of the public—a pure milk supply should be demanded. In this Borough two other factors operate on the prevalence of the disease: (1) bad housing conditions. This leads to the close contact between healthy persons and tuberculous persons, and sooner or later the healthy person becomes infected. It may be pointed out that, of a total number of 461 persons notified as suffering from tuberculosis during the year, only 20 persons are known to have a sleeping-room to themselves, i.e., 4.3 per cent. (2) Low family income. In almost all cases, unemployment has much to do with the low family income. The provision of extra nourishment for tuberculous persons has been of very great value. The amount of money available for this purpose is, however, very small and could with benefit be increased. Unemployment, in connection with tuberculosis, provides an instance of a vicious circle.



The circle has to be broken somewhere and the provision of more extra nourishment, a purer milk supply and better home conditions would go a long way towards breaking the circle.

TABLE I.—Vital Statistics of whole District during 1923 and previous Years.

Year.	Population estimated to Middle of each Year.	Births.		Total Deaths Registered in the District.				Total Deaths in Public Institutions in the District.	Deaths of Non-Residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District	Net Deaths at all Ages belonging to the District.	
		No.	Rate.*	Under 1 Year of age.		At all Ages					No.	Rate.*
				No.	Rate per 1,000 Births registered.	No.	Rate.*					
1	2	3	4	5	6	7	8	9	10	11	12	13
1913	124,739	3,842	30·8	505	131	1,730	13·9	529	21	534	2,243	17·9
1914	124,213	3,757	30·2	487	129	1,694	13·6	615	26	516	2,184	17·6
1915	123,665	3,482	29·6	537	154	2,053	17·5	654	38	542	2,514	21·4
1916	123,665	3,361	27·1	364	108	1,507	13·2	608	155	453	1,960	17·2
1917	119,983	2,613	21·7	329	125	1,807	18·8	840	186	411	2,032	18·8
1918	121,465	2,323	19·1	322	139	2,142	19·8	1,007	191	439	2,390	22·0
1919	124,239	2,637	20·4	212	80	1,600	12·8	709	165	313	1,748	14·1
1920	129,189	4,038	31·2	280	69	1,466	11·3	689	105	281	1,642	12·7
1921	120,500	3,231	26·8	261	80	1,313	10·8	657	51	394	1,656	13·7
1922	121,100	3,167	26·1	259	81	1,572	12·9	778	43	496	2,045	16·7
Averages for years 1912-1922	123,275	3,245	26·3	355	109	1,688	14·4	708	98	437	2,039	17·2
1923	121,700	2,912	23·9	220	76	1,192	9·7	330	42	288	1,480	12·1

APPENDIX.

OTHER INSTITUTIONS, ETC., ETC.

I. Institutions, etc., within the District receiving sick and infirm persons from outside the District.	II. Institutions outside the District receiving sick and infirm persons from the District.	III. Other Institutions, etc., the Deaths in which have been distributed among the several localities of the District.
<div>No. of Deaths</div> <div>Bermondsey and Rotherhithe Hospital ... 9</div> <div>Deaths in River Thames, Surrey Commercial Docks, Wharves, etc. ... 29</div> <div>Factory ... 1</div> <div>Private Houses ... 2</div> <div>Street ... 1</div> <div>Total ... 42</div>		<div>No. of Deaths</div> <div>Ambulance on way to Hospital ... 3</div> <div>All Saint's Hospital ... 1</div> <div>Banstead Mental Hospital ... 4</div> <div>Belgrave Hospital ... 1</div> <div>Birchfield House Infirmary, Sundridge ... 1</div> <div>Berks Mental Hospital ... 1</div> <div>Caterham Mental Hospital ... 3</div> <div>Cane Hill Mental Hospital ... 9</div> <div>City of London Institution, Bow ... 1</div> <div>Camberwell Institution, East Dulwich ... 2</div> <div>Charing Cross Hospital ... 3</div> <div>Colindale Hospital ... 4</div> <div>Camberwell Hospital (St. George's) ... 1</div> <div>Cancer Hospital ... 1</div> <div>Dartford Heath Mental Hospital ... 9</div> <div>Downs Hospital, Sutton ... 1</div> <div>Darenth Training Colony ... 1</div> <div>Evelina Hospital ... 7</div> <div>East London Hospital ... 3</div> <div>East Sussex County Asylum ... 1</div> <div>Guy's Hospital ... 68</div> <div>Grove Hospital ... 2</div> <div>Great Ormonde Street Hospital ... 1</div> <div>Grand Surrey Canal ... 1</div> <div>German Hospital ... 1</div> <div>General Hospital, Tunbridge Wells ... 1</div> <div>Greenwich and Deptford Hospital ... 1</div> <div>High Wood Hospital ... 1</div> <div>King's College Hospital ... 1</div> <div>Ladywell Institution ... 42</div> <div>Long Grove Mental Hospital ... 7</div> <div>Leavesden Mental Hospital ... 6</div> <div>London Hospital ... 4</div> <div>Lewisham Hospital ... 1</div> <div>Leicester City Mental Hospital ... 1</div> <div>Miller Hospital ... 1</div> <div>Mothercraft Training Society's Home ... 1</div> <div>Ministry of Pensions Hospital, Orpington ... 1</div> <div>Middlesex Hospital ... 1</div> <div>Newcomen Street Day Nursery ... 1</div> <div>National Hospital, Queen's Square ... 1</div> <div>Park Hospital ... 15</div> <div>Poplar Institution ... 1</div> <div>Private Houses ... 7</div> <div>Paddington Hospital for Women & Children ... 1</div> <div>Queen Mary's Home, Carshalton ... 3</div> <div>River Thames ... 6</div> <div>Royal Waterloo Hospital ... 3</div> <div>Royal Portsmouth Hospital ... 1</div> <div>South-Eastern Hospital ... 16</div> <div>Street ... 4</div> <div>St. Thomas's Hospital ... 1</div> <div>Southern Hospital ... 1</div> <div>St. Bartholomew's Hospital ... 2</div> <div>Stepney Infirmary ... 1</div> <div>Southwark Institution ... 4</div> <div>St. Marylebone Hospital ... 1</div> <div>Surrey Commercial Docks ... 1</div> <div>St. Joseph's Hospital ... 3</div> <div>South-Eastern Hospital for Children ... 1</div> <div>Seamen's Hospital, Greenwich ... 2</div> <div>St. George's Hospital ... 1</div> <div>St. Barnabas Home, Torquay ... 1</div> <div>Tooting Bec Mental Hospital ... 6</div> <div>Treadar Rocks, Breage ... 1</div> <div>University College Hospital ... 3</div> <div>Westminster Hospital ... 1</div> <div>Total ... 288</div>

TABLE IV.—*Causes of, and Ages at Deaths, during the Year, 1923.*

Causes of Death.						Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District.								
						All Ages.	Under 1.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and up- wards.
All Causes	{	Certified ...	...	...	...	1,480	220	71	53	62	86	175	365	448
	{	Uncertified	...	...	...	—	—	—	—	—	—	—	—	—
Enteric Fever	...	...	...	...	...	2	—	—	1	—	—	1	—	—
Small-pox	...	...	...	...	...	—	—	—	—	—	—	—	—	—
Measles	...	...	...	...	...	13	2	7	4	—	—	—	—	—
Scarlet Fever	...	...	...	...	...	3	—	—	1	1	1	—	—	—
Whooping Cough	...	...	...	...	...	12	5	6	1	—	—	—	—	—
Diphtheria and Croup	...	...	...	...	...	33	2	4	18	7	—	2	—	—
Influenza	...	...	...	...	...	11	—	—	—	—	—	3	5	3
Erysipelas	...	...	...	...	...	1	1	—	—	—	—	—	—	—
Phthisis (Pulmonary Tuberculosis)	...	...	...	...	...	155	2	2	—	11	37	58	40	5
Tuberculous Meningitis	...	...	...	...	...	9	—	4	2	3	—	—	—	—
Other Tuberculous Diseases	...	...	...	...	...	11	2	—	—	1	3	2	3	—
Cancer, Malignant Disease	...	...	...	...	...	148	—	—	—	2	2	17	73	54
Rheumatic Fever	...	...	...	...	...	7	—	—	—	4	2	1	—	—
Meningitis	...	...	...	...	...	10	2	1	3	1	1	2	—	—
Organic Heart Disease	...	...	...	...	...	176	—	—	—	6	5	22	60	83
Bronchitis	...	...	...	...	...	130	5	4	1	—	2	6	30	82
Pneumonia	...	...	...	...	...	152	36	25	11	5	5	13	31	26

TABLE IV.—*Causes of, and Ages at Deaths, during the Year, 1923.*—continued.

Causes of Death.	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District.								
	All Ages.	Under 1.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and up- wards.
Other Diseases of Respiratory Organs ...	19	2	4	—	—	1	2	9	1
Diarrhoea and Enteritis under 2 years ...	50	39	11	—	—	—	—	—	—
Appendicitis and Typhlitis	6	—	—	—	2	2	—	2	—
Cirrhosis of Liver	4	—	—	—	—	—	—	3	1
Alcoholism	1	—	—	—	—	—	—	1	—
Nephritis and Bright's Disease	34	—	—	1	1	3	2	11	16
Puerperal Fever	2	—	—	—	—	—	2	—	—
Other Accidents and Diseases of Pregnancy and Parturition	2	—	—	—	—	—	2	—	—
Congenital Debility and Malformation, includ- ing Premature Birth	96	95	1	—	—	—	—	—	—
Violent Deaths, excluding Suicide	49	8	1	2	4	7	8	9	10
Suicide	7	—	—	—	—	—	2	4	1
Other Defined Diseases	337	19	1	8	14	15	30	84	166
Diseases ill-defined or unknown	—	—	—	—	—	—	—	—	—
All Causes	1,480	220	71	53	62	86	175	365	448

TABLE V.—Cases of Infectious Diseases Notified during the Year 1923.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED								BERMONDSEY.							ROTHERHITHE.				ST. OLAVE.				Total Cases removed to Hospital.	
	At all Ages.	At Ages—Years							1	2	3	4	5	6	Total.	1	2	3	Total.	St. John.	St. Olave.	St. Thomas.	Total		
		Under 1 year.	1 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.																	
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Croup)	586	17	218	274	47	28	2	—	77	82	70	49	51	47	376	69	53	58	180	19	7	4	30	586	
Erysipelas	19	—	1	2	3	4	7	2	2	2	2	1	1	2	10	—	5	1	6	2	—	1	3	—	
Scarlet Fever	323	7	132	150	25	8	1	—	24	34	35	33	23	12	161	65	44	29	138	18	1	5	24	320	
Relapsing Fever... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cerebro-Spinal Meningitis	3	—	2	—	—	1	—	—	—	—	1	1	—	—	2	1	—	—	1	—	—	—	—	3	
Polio-Myelitis and Polio-encephalitis	2	—	1	1	—	—	—	—	1	—	—	—	—	1	2	—	—	—	—	—	—	—	—	1	
Ophthalmia Neonatorum	18	18	—	—	—	—	—	—	2	4	—	1	2	1	10	—	5	2	7	1	—	—	1	12	
Anthrax	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Enteric Fever	2	—	1	—	—	1	—	—	1	—	—	—	—	1	2	—	—	—	—	—	—	—	—	2	
Puerperal Fever	4	—	—	—	1	3	—	—	1	—	—	—	—	—	1	2	1	—	3	—	—	—	—	3	
Encephalitis Lethargica	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	1	
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Malaria	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	
Continued Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Pneumonia (Acute Primary and Acute Influenzal)	125	7	35	18	12	31	17	5	6	23	21	7	7	18	82	15	8	3	26	11	5	1	17	—	
Pulmonary Tuberculosis	250	1	—	15	78	113	39	4	16	37	29	24	26	23	155	24	35	11	70	18	3	4	25	—	
Other Forms of Tuberculosis	86	—	15	42	14	11	4	—	7	11	8	11	11	11	59	6	7	5	18	5	3	1	9	—	
TOTALS	1420	50	405	503	180	201	70	11	137	193	166	127	121	116	860	182	160	109	451	74	19	16	109	928	

TABLE VI.—*Factories, Workshops, Laundries, Workplaces and Homework.*
HOMEWORK.

Nature of Work.	OUTWORKERS' LISTS, SECTION 107.									OUTWORK IN UNWHOLE-SOME PREMISES, SECTION 108.			OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110.		
	Lists received from Employers.						Notices served on Occupier as to keeping or sending lists.	Prosecutions.		In-stances.	Notices served.	Prosecu-tions.	In-stances.	Order made (S. 110)	Prosecu-tions (Sections 109, 110).
	Sending twice in the year.			Sending once in the year.				Failing to keep or permit inspection of lists.	Failing to send lists.						
	Lists.	Outworkers.		Lists.	Outworkers.										
		Con-tractors.	Work-men.		Con-tractors.	Work-men.									
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)
Wearing Apparel—															
(1) Making, &c.	36	11	249	—	—	—	12	—	—	4	4	—	—	—	—
(2) Cleansing and Washing	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Household linen	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Lace, lace curtains and nets	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Curtains and furniture hangings	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Furniture and upholstery ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Electro-plate	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
File making	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Brass and brass articles ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Fur pulling	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cables and chains	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Rubber and waterproof sundries	—	—	4	—	—	—	—	—	—	—	—	—	—	—	—
Cart gear	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Locks, latches and keys ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Umbrellas, &c.	2	—	5	—	—	—	1	—	—	—	—	—	—	—	—
Artificial flowers	—	—	9	—	—	—	—	—	—	—	—	—	—	—	—
Nets, other than wire nets	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tents	4	—	2	—	—	—	1	—	—	—	—	—	—	—	—
Sacks	4	—	45	1	—	7	2	—	—	—	—	—	—	—	—
Racquets and tennis balls...	—	—	4	—	—	—	—	—	—	—	—	—	—	—	—
Paper, &c., boxes, paper bags	4	—	28	—	—	—	2	—	—	—	—	—	—	—	—
Brush making	—	—	7	—	—	—	—	—	—	—	—	—	—	—	—
Pea picking	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Feather sorting	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—
Carding, &c., of buttons &c.	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Surgical instruments	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Basket making	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chocolates and sweetmeats	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cosaques, Christmas crack-ers, Christmas stockings, &c.	—	—	5	—	—	—	—	—	—	—	—	—	—	—	—
Textile weaving	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Leather goods	2	—	11	1	—	4	—	—	—	—	—	—	—	—	—
Total	52	11	372	2	—	11	18	—	—	4	4	—	—	—	—

TABLE VII.—Deaths from Zymotic Diseases, 1923.

Year.	All Causes.		Principal Zymotic Diseases.		Small-pox.		Measles.		Scarlet Fever.		Diphtheria.		Whooping Cough.		Typhus Fever.		Enteric Fever.		Pyrexia (origin uncertain).		Diarrhoea.	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate.	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
1913	2243	17·9	320	2·56	—	—	88	·70	5	·04	16	·13	47	·33	—	—	2	·02	—	—	162	1·30
1914	2184	17·6	262	2·11	—	—	79	·64	9	·07	17	·14	14	·11	—	—	2	·02	—	—	141	1·14
1915	2514	21·4	367	3·13	—	—	110	·93	9	·07	20	·17	79	·67	—	—	3	·03	—	—	146	1·24
1916	1960	17·2	155	1·36	—	—	42	·36	5	·04	29	·25	16	·14	—	—	2	·01	—	—	61	·53
1917	2032	18·8	218	2·02	—	—	72	·66	1	·01	18	·16	32	·29	—	—	6	·05	—	—	89	·82
1918	2390	22·0	229	2·11	—	—	71	·66	3	·03	23	·21	84	·78	—	—	—	—	—	—	48	·44
1919	1748	14·1	113	·91	—	—	18	·14	5	·04	21	·17	4	·03	—	—	3	·02	—	—	62	·49
1920	1642	12·7	163	1·26	—	—	56	·44	7	·06	25	·19	41	·32	—	—	1	·01	—	—	33	·26
1921	1656	13·7	197	1·63	—	—	3	—	18	·15	69	·57	14	·11	—	—	3	·03	—	—	87	·72
1922	2025	16·7	292	2·41	—	—	101	·83	11	·09	90	·74	65	·53	—	—	1	—	—	—	24	·19
Average for years 1913—1922	2039	17·2	231	19·5	—	—	64	·53	7	·06	32	·27	39	·33	—	—	2	·02	—	—	85	·71
1923	1480	12·1	125	1·02	—	—	13	·10	3	·02	33	·27	12	·09	—	—	2	·01	—	—	62	·50

FOOD AND DRUGS.

Articles submitted for Analysis.	Total samples taken.	Number Genuine.	Number adulterated.	Percentage of articles adulterated.
Almonds, Ground	1	1	—	—
Arrowroot	4	4	—	—
Baking Powder	1	1	—	—
Beef Paste, Potted	1	1	—	—
Bismuthated Magnesia	1	1	—	—
Black Pudding	1	1	—	—
Blanc Mange Powder	1	1	—	—
Brompton Lozenges	1	1	—	—
Bun Powder	2	2	—	—
Butter	148	147	1	0.7
Cake	12	12	—	—
Castor Oil	2	2	—	—
Cheese	6	6	—	—
Cheese Cakes	1	1	—	—
Citrate of Magnesia	6	6	—	—
Cocoa	19	19	—	—
Cocoanut, Desiccated	4	4	—	—
„ Iced	1	1	—	—
Coffee	11	11	—	—
Coffee and Chicory	2	2	—	—
Cordial, Blackcurrant Flavour ..	1	1	—	—
„ Clove Flavour ..	1	1	—	—
„ Raspberry Flavour ..	1	1	—	—
„ Strawberry Flavour ..	1	1	—	—
Corn Flour	3	3	—	—
Cream	1	1	—	—
„ Preserved	1	1	—	—
Cream Roll	1	1	—	—
Crumpets	1	1	—	—
Curry Powder	1	1	—	—
Custard Powder	8	8	—	—
Dough Nuts	1	1	—	—
Dripping	75	70	5	6.6
Egg Powder	3	3	—	—
Fish Paste	14	14	—	—
Flour	1	1	—	—
„ Self-raising	5	5	—	—
Galanteal Veal	1	1	—	—
Ginger Beer	1	1	—	—
„ Wine	1	1	—	—
„ Wine Essence	1	1	—	—
Gravy Soup	3	3	—	—
Green Peas	5	5	—	—
Groats, Prepared	1	1	—	—
Ground Ginger	3	3	—	—
Hot Drink Essence	1	1	—	—
Ice Cream	8	8	—	—

FOOD AND DRUGS—continued.

Articles submitted for Analysis.	Total samples taken.	Number genuine.	Number adulterated.	Percentage of articles adulterated.
Jam, Blackcurrant	2	2	—	—
„ Mixed Fruit	1	1	—	—
„ Plum	1	1	—	—
„ Raspberry	8	8	—	—
„ Strawberry	3	3	—	—
Lard	27	27	—	—
Lemon Cake	2	2	—	—
„ Curd	1	1	—	—
Lemonade	5	5	—	—
„ Powder	10	10	—	—
Linseed, Crushed	1	1	—	—
Liquorice Powder	2	2	—	—
Lung Tonic	2	2	—	—
Maize Flour	2	2	—	—
Margarine	140	140	—	—
Marmalade	3	3	—	—
Medicines :—				
Mist. Bismuthi	1	—	1	100.0
„ Pot. Bromide	1	1	—	—
„ Quin. L.I.P.	3	2	1	33.3
„ Quin. Co. L.I.P.	1	—	1	100.0
„ Sod. Sal. L.I.P.	2	—	2	100.0
Prescriptions, various	5	3	2	40.0
Milk	346	339	7	2.0
„ Condensed, Full Cream	1	1	—	—
„ „ Skim	3	3	—	—
„ Separated	2	2	—	—
Mincemeat (loose)	1	1	—	—
Mustard	11	11	—	—
„ Compound	1	1	—	—
Oatmeal	3	3	—	—
Olive Oil	1	1	—	—
Pea Flour	7	7	—	—
Pepper	40	40	—	—
Picallili	2	2	—	—
Quinine and Iron Tonic	2	2	—	—
Rice	19	19	—	—
Sage	1	1	—	—
Sago	2	2	—	—
Salts, Epsom	3	3	—	—
„ Glauber	1	—	1	100.0
Sausages	4	4	—	—
Semolina	1	1	—	—
Sherbert Powder	2	2	—	—
Sponge Cake	25	22	3	12.0
Suet, Beef	2	2	—	—
„ „ Shredded	13	10	3	23.1
Tapioca	6	6	—	—
Vinegar	81	74	7	8.6
„ Malt	33	29	4	12.1
Whisky, Scotch	1	—	1	100.0
	1,206	1,167	39	3.3

TABLE X.—*Factories, Workshops, Laundries, Workplaces and Homework.*
Inspection.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (including Factory Laundries)	83	27	—
Workshops (including Workshop Laundries)	130	26	—
Workplaces (other than Outworkers' Premises)	102	19	—
Total	315	72	—

Defects found.

Particulars.	Number of Defects.			
	Found.	Remedied	Referred to H.M. Inspector	Number of Prosecutions.
Nuisances under the Public Health Acts :—				
Want of Cleanliness	20	20	—	—
„ Ventilation	3	3	—	—
Overcrowding	—	—	—	—
Want of Drainage of Floors ...	—	—	—	—
Other Nuisances	40	40	—	—
Sanitary Accommodation.				
Insufficient	1	1	—	—
Unsuitable or Defective ...	15	15	—	—
Not Separate for Sexes ...	2	2	—	—
Offences under the Factory and Workshop Act :—				
Illegal Occupation of Underground Bakehouse (s. 101)	—	—	—	—
Breach of Special Sanitary Requirements for Bakehouses (ss. 97 to 100) ...	1	1	—	—
Other Offences	—	—	—	—
Total	82	82	—	—

TABLE XI.—*No. of Bakehouses in the Borough.*

In Use.		Not in Use.	
Underground.	Above ground.	Above ground.	Underground.
19	43	5	5

23 of these are Factory Bakehouses.

OTHER MATTERS.

Class.	Number.
Matters notified to H.M. Inspectors of Factories—	
Failure to affix Abstract of the Factory and Workshop Act (s. 133)	—
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factories Act (s. 7)	23
Other	—
Underground Bakehouses (s. 101)—	
Certificates granted during 1923	—
In use at end of 1923	—
Workshop Bakehouses	336
Workshops on the Register (s. 131 at the end of 1923	64
Total Number of Workshops on Register	460

UNSOUND FOOD AND FOREIGN MEAT REGULATIONS.

THE FOLLOWING ARTICLES OF FOOD WERE DEALT WITH UNDER THE ABOVE REGULATIONS DURING THE PERIOD UNDER REPORT.

ARTICLES.	QUANTITY UNSOUND.							
	Disposed of for other purposes than Human Food.		Destroyed.		Removed for sorting under S.A.		Exported.	
	Quantity.	Weight.	Quantity.	Weight.	Quantity.	Weight.	Quantity.	Weight.
		tons cwt. qrs. lbs.		tons cwt. qrs. lbs.		tons cwt. qrs. lbs.		tons cwt. qrs. lbs.
Apples			253 cases & 1170 barrels	82 11 2 0				
Apples, canned	167 cases	2 13 2 14	174 cases	2 15 3 0				
Apricots			17 cases	6 2 0				
Apricot Pulp			228 cases & 6 tins	9 5 2 17				
Bacon			12 sides & various pieces	7 2 3				
Baked Beans			40 cases	15 1 6				
Bananas			6 crates & 4 cases	5 1 14				
Barley	11 bags	11 3 0	3363 tins	16 7 0 6				
Beef Cubes			148 half-sieves & 437 skips	4 19 1 6				
Black Currants			2 cases	1 3 0				
Black Currant Pulp								
Butter	15 boxes	7 2 0			5758 boxes	143 19 0 0		
Butter Beans	1204 bags	45 3 0 0						
Canned Goods, Various		3 2 0 0	3 loads, 24 cases & 37939 tins	91 5 3 26				
Cauliflower			14 casks	1 11 1 0				
Caviare			92 casks	8 4 1 14				
Cheese				3 6 3 20				
Condensed Milk	1201 cases 62 tins and 2 barrels	26 2 2 20	1434 tins, 6 cases & 1 cask	15 1 2				
Eggs			3350 tins, 389 cases, 442 half cases & 971 packages	380 15 0 27				

Evaporated Milk			2 tins	6 9 2 1				
Figs			14 bags & 540 boxes	6 9 3 6				
Flour	388 bags	24 14 1 25						
Fruit, fresh, various			302 packages	3 15 0 0				
Fruit, canned, various...			2 5 3 0					
Fruit, pulp, various			2985 tins	14 9 1 0				
Gherkins			2 casks	6 0 0 0				
Haddocks in tins			116 tins	1 0 14				
Hams			24 hams & 1 box of hams	5 2 0 0	7 boxes	2 2 0 0		
Horseradish			18 bags	2 3 2 0				
Intestines... ..			6 casks	1 10 0 0			1 cask	2 0
Jams			24 cases & 17 tins	17 2 26				
Jelly Crystals and Custard Powder								
Lemons... ..			160 cases	3 19 2 0	10 cases 21 cases & 142 half cases	4 2 2 0 4 1 0 0		
Lemons and Tomatoes								
Liquid Egg			31½ tins	7 12 2 0 11 0 0				
Mandarines								
Meat, canned, various...	378 cases and 5 tins	14 7 3 18	4 cases & 1866 tins	4 8 1 4	41 cases	11 2 0		
Meat, fresh, various		1 7 0 27						
Mutton		6 13 1 9		1 1 23				
Oats	75 219 268 qrs.	8 19 1 27						
Olive Oil					4 casks	1 12 0 0		
Onions								
Oranges			381 cases	13 14 3 0 16 6 3 12				
Ox Eye Glands			32 cases	18 1 4				
Ox Tongues			1 keg	1 2 19				
Peaches, canned			47 cases & 66 tins	1 17 0 1				
Peaches, pulp			29 cases & 6 tins	1 16 1 20				
Pears			31 barrels, 81 trays, 27 cases & 142 half-cases	6 17 2 0				
Pears, canned	139 cases and 9 tins	3 16 1 0	367 cases & 9 tins	9 16 3 0				
Pineapple... ..			8½ cases	2 1 12				
Pines			24 tins					

UN SOUND FOOD AND FOREIGN MEAT REGULATIONS—continued.

ARTICLES.	QUANTITY UNSOUND.							
	Disposed of for other purposes than Human Food.		Destroyed.		Removed for sorting under S.A.		Exported.	
	Quantity.	Weight.	Quantity.	Weight.	Quantity.	Weight.	Quantity.	Weight.
		tons cwts. qrs. lbs.		tons cwts. qrs. lbs.		tons cwts. qrs. lbs.		tons cwts. qrs. lbs.
Plums			120 baskets, 16 hampers, 3 boxes, 1 cask 208 packages	4 4 0 0				
Plums, pulp			38 cases & 2 tins	1 14 1 0				
Prunes			2 cases & 12 boxes	3 0 20				
Pumpkins			3 bags	3 0 0				
Quince, pulp			26 cases	13 0 0				
Raisins			1 box	2 0 0			305 cases	3 8 0 0
Raspberries			19 cases	3 16 0 0				
Raspberry, pulp			21 cases & 71 cases	5 16 3 4				
Red Currants			17 cases & 1 tin	17 0 0				
Rice, Pork and Chili			14 cases	6 0 2				
Sardines			51 cases	1 17 0 14				
Sausage, tinned... ..			16 cases & 26 tins,	3 2 5				
Shredded Wheat	70 cases	16 3 14						
Shrimp Paste			36 hampers	1 1 0 24				
Soup Mixtures			51 cases	1 1 0 12				
Spaghetti, Meat & Chili			205 cases	4 7 3 12				
Sugar Sweepings					127 bags & 2 sachels	6 9 2 23		
Tomatoes	2 bundles	1 2 0	15 bundles & 287 packages	18 17 3 0	92 packages	4 12 0 0		
Tomatoes, tinned	16 cases and 19 tins	10 8	12 cases	1 0 0				
Tomato Purée			78 cases & 7 tins	2 1 0 0				
Turkeys			66 turkeys	5 1 21				
Veal Loaf			48 cases	5 0 16				
Wheat		152 6 0 0						
Yeast			2 packages	3 0 0				