

Report for the year 1926 of the Medical Officer of Health.

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THE
Metropolitan Borough of Hampstead.

REPORT

for the year 1926

OF THE
Medical Officer of Health.

FRANK E. SCRASE,
F.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. (Lond.).

Public Health Department,
Town Hall, Haverstock Hill,
Hampstead, N.W. 3.

Together with the Reports of the Tuberculosis Medical Officer
and the Public Analyst.

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His Worship the Mayor (Mr. Councillor H. MARNHAM, J.P.) *ex-officio* member of Committees.

PUBLIC HEALTH COMMITTEE.

Chairman: Mr. Councillor W. S. GEORGE, M.D., B.S., M.R.C.S., L.R.C.P.

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„ Councillor J. A. A. Atkin, M.P.S.	Mr. Councillor T. H. Nunn, M.A.
„ „ S. A. Boyd, M.S., M.B., F.R.C.S.	Councillor Miss Richards (from June)
„ „ G. Buckle	„ Mrs. Russell, J.P.
„ „ R. H. H. Cust, M.A., J.P.	Mr. Councillor H. W. Snow
„ „ C. J. R. MacFadden, O.B.E., M.D., C.M.	„ „ J. M. Symmons, M.A.

Sub-Committees:—Drainage Plans and Tuberculosis.

MATERNITY AND CHILD WELFARE COMMITTEE.

Members of the Council.

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Councillor Mrs. Arnholz	Mr. Councillor C. J. R. MacFadden, O.B.E., M.D., C.M.
Mr. Councillor R. H. H. Cust, M.A., J.P.	Councillor Mrs. Monro, J.P. (deceased in April)
Councillor Mrs. Fisher, L.R.A.M., A.R.C.M.	Mr. Councillor T. H. Nunn, M.A.
„ Miss Glover	Councillor Miss Richards (from June)
„ „ Lodge, M.A.	„ Mrs. Russell, J.P.

Persons not Members of the Council.

(Appointed in pursuance of Section 2 (2) of the Maternity and Child Welfare Act, 1918.)

Dr. Mary B. Donie. Mrs. E. S. Grundy. Mrs. E. M. Staines, Lady H. K. Thompson, Miss C. E. Dugdale (from June).

Sub-Committees:—(a) Applications for Assistances, and (b) Child and Maternal Mortality.

HOUSING COMMITTEE.

Chairman: Mr. Councillor B. S. TOWNROE.

Mr. Alderman W. J. Spriggs	Mr. Councillor W. Easun
Councillor Mrs. Arnholz	Councillor Mrs. Fisher, L.R.A.M., A.R.C.M.
Mr. Councillor W. T. Boness	Councillor Miss Glover
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„ „ G. Buckle	Mr. Councillor C. J. R. MacFadden, O.B.E., M.D., C.M.
„ „ R. J. Cleaver	„ „ H. S. Salter
„ „ R. H. H. Cust, M.A., J.P.	„ „ J. M. Symmons, M.A.
„ „ H. S. Davie	

PUBLIC HEALTH DEPARTMENT,

TOWN HALL,

HAVERSTOCK HILL,

HAMPSTEAD, N.W. 3.

15th March, 1927.

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

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present to you my Annual Report for the year 1926.

It is brief when compared with its predecessor for 1925. This is in accordance with the Ministry of Health's instructions, dated 20th December, 1926, wherein was indicated the minimum information which should be given.

A summary of the statistics for 1926 will be found on page 6, and if these are compared with preceding years it will be seen that the health of the Borough is maintained at a high standard and varies but little in the main items; the birth rate and death rate are practically the same as in 1925.

The infantile death rate shows a rise from 55 to 60 per 1,000 births registered. This, although low, is our highest for five years. The actual number of children who died under one year of age was 55, and at least one-half of these died from causes which may be described as pre-natal. They are included under headings 24—27 in the Infantile Mortality Table on page 13.

On this point I would call attention to the work of the Maternity and Child Welfare Committee on page 80, and the result of their investigations into infant deaths. I feel sure this is the right line along which to attack Infant Mortality still further.

I would like to take the opportunity of expressing my thanks to the Council, especially to the Chairmen and Members of the Public Health, Housing, and Maternity and Child Welfare Committees, for the support and sympathetic consideration they have afforded me.

I desire also to place on record my appreciation of the work of the Staff of the Department, who have at all times accorded me their loyal and unselfish co-operation.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

FRANK E. SCRASE,

Medical Officer of Health.

Section 1.

Natural and Social Conditions of the Borough.

Area of Borough ..	2265 acres (including 12 acres covered by water).
Population at Census, 1921	86,153
Population estimated to middle of 1926	87,530
Number of inhabited houses, Census 1921	12,557
Number of families or separate occupiers, ditto	21,520
Rateable Value, 6th April, 1926	£1,318,196
Sum represented by a penny rate	£4,898 18s. 0d.

Social conditions, including the chief occupations of the inhabitants, and the influence of any particular occupation on public health.

Hampstead is mainly a residential district, and is less densely populated than the Administrative County as a whole, the number of persons per acre being 38 and 60 respectively at the Census of 1921. The density, however, varies very much throughout the Borough, being very sparse in some places and very crowded in others. In the two poorer districts, which flank Hampstead east and west, the density is high. Thus the Kilburn Ward had 84 to the acre at the last Census, and in a certain portion of this Ward known as the Netherwood Street Area, comprising Netherwood, Kelson and Linstead Streets and Palmerston Road, the density at a Census taken in 1919 was found to be no less than 238 persons to the acre.

Owing to its residential character there are no occupations peculiar to the Borough. The greatest number of persons engaged in one occupation are those classified as domestic servants; these numbered 11,264 at the last Census.

The percentage of private families living in 1 room at the last Census was 9·4, in 2 rooms 13·2, in 3 rooms 19·5, in 4 rooms 13·7, in 5 rooms 8·5, in 6-7 rooms 12·0, in 8-9 rooms 8·5, and in 10 rooms and over 15·2.

The age-status of the population of Hampstead is high; the figures as ascertained at the Census of 1921 were as follow:—

	Under 16.	16-69.	70 and over.	Total.
Males	8,175	23,910	1,168	33,253
Females	8,696	41,932	2,272	52,900
	<hr/> 16,871	<hr/> 65,842	<hr/> 3,440	<hr/> 86,153

Summary of Vital Statistics for 1926.

Marriages	..	..	..	..	678
Marriage-Rate	..	..	..	..	15.5
Births	..	{	M. 519 F. 482 Totals. 1,001 Illegitimate 45 31 76 }		1,077
Birth-Rate	..	..	..	..	12.3
Deaths	..	928	..	Death-Rate	.. 10.6
Maternal Deaths—No. of women dying in, or in consequence of, child-birth	{	(1) From Sepsis	At home. —	In hospital. 2	3
	{	(2) Other Causes	—	1	
Deaths of Infants under 1 year of age:—					
Legitimate	..	48	Illegitimate	.. 17	Total 65
Infantile Mortality Rate per 1,000 births:—					
Legitimate	..	48	Illegitimate	.. 223	{ Legitimate and Illegitimate } 60
Deaths from Measles (all ages)	..	..	..	..	9
„ Whooping Cough (all ages)	..	..	..	..	—
„ Diarrhœa (under 2 years of age)	..	..	..	..	6
Deaths from Tuberculosis of—					
The Respiratory System	..	51	Death-Rate	..	0.58
Deaths from All Forms of—					
Tuberculosis	..	.. 56	Death-Rate	..	0.64

VITAL STATISTICS.

Population.

In accordance with the prevailing custom, I have adopted the Registrar-General's estimate of the population for the purposes of this Report, and this was calculated to have been 87,530 at the middle of the year 1926.

It will be seen that this estimate of the population, as now calculated by the Registrar-General, is lower than that for the year 1925. This is accounted for by the fact that the basis of estimation is modified by the Registrar-General from time to time, and the difference between population estimates at different points of time is, therefore, due partly to the population movements themselves and partly to changes in the method of estimating them.

The population is estimated upon the figures obtained at the last Census, which was postponed from 24th April to 19th June. On th

night of the Census, 4,429 rooms were recorded as being vacant, and in addition to the population represented by this figure, it must be remembered that many citizens were away from home; but as other members of the family remained at home their rooms were not counted as being vacant. This is due to the fact that the Census was taken at a time when many citizens were out of town for the week-end, or away on holidays. When it is also remembered that in November, 1919, upwards of 96,000 people in the Borough were put upon rations, it is obvious that the Census population was considerably lower than the actual population.

Unfortunately, however, a more accurate estimate of the population will not be available until the Census of 1931; but I have no doubt that it will reveal the fact that my original estimate of 1921 of 100,000 is substantially correct.

The sex percentages at the Census of 1921 were 38·6 males and 61·4 females.

I have prepared the following estimates, based upon the Census figures, of the population of each Ward.

Ward.	Estimated Population.
No. 1 (Town)	13,020
No. 2 (Belsize)	14,080
No. 3 (Adelaide)	10,510
No. 4 (Central)	9,620
No. 5 (West End)	13,720
No. 6 (Kilburn)	15,820
No. 7 (Priory)	10,760
The Borough	87,530

Marriages.

According to the return kindly furnished to me by the Superintendent Registrar of Hampstead, it appears that 678 marriages were registered in the Borough during 1926, as compared with 661 in the preceding year.

The marriage rate was 15·5 per 1,000 of the population, as compared with the rate of 15·0 in 1925.

Births.

In the following Table the births for 1926 have been analysed according to sex, etc. :—

BIRTHS.	MALES.			FEMALES.			TOTALS.		
	Legiti- mate.	Illegiti- mate.	Total.	Legiti- mate.	Illegiti- mate.	Total.	Legiti- mate.	Illegiti- mate.	Total.
Registered in the Borough	628	33	661	576	25	601	1204	58	1262
Add number occurring outside the Borough whose mothers were Hampstead residents	92	22	114	74	19	93	166	41	207
	720	55	775	650	44	694	1370	99	1469
Deduct number who could not be deemed to belong to Hampstead	201	10	211	168	13	181	369	23	392
Net number belonging to Hampstead, 1926	519	45	564	482	31	513	1001	76	1077
Net Births, 1925 ..	527	39	566	463	44	507	990	83	1073

The 1077 net births were distributed among the various Wards as follows :—No. 1 (Town) 141, No. 2 (Belsize) 144, No. 3 (Adelaide) 106, No. 4 (Central) 96, No. 5 (West End) 178, No. 6 (Kilburn) 206, and No. 7 (Priory) 146.

The following are the birth-rates per 1,000 of the population for each of the Wards, the Borough, London, and England and Wales :—

No. 1 (Town) Ward	..	..	10·8
No. 2 (Belsize) ..	..	..	10·2
No. 3 (Adelaide) ..	..	..	10·1
No. 4 (Central) ..	..	..	9·9
No. 5 (West End) ..	..	..	12·9
No. 6 (Kilburn) ..	..	..	16·8
No. 7 (Priory) ..	..	..	13·6
The Borough ..	..	..	12·3
London ..	..	..	17·1
England and Wales	..	..	17·8

The Natural Increase in population, *i.e.*, the excess of births over deaths, was 149.

Legitimate and Illegitimate Births and Birth Rate.

Of the total 1,077 net births belonging to Hampstead, 1,001 were those of legitimate and 76 of illegitimate children, the latter being at the rate of 70 per 1,000 births. 41 of the Hampstead illegitimate infants were born outside the Borough, chiefly in Lying-in Institutions.

Notification of Births Act, 1907.

All births occurring in the Borough must be notified to the Medical Officer of Health within 36 hours. This is in addition to registration with the Registrar of Births.

In the majority of those cases where the notification was not made until after 36 hours had elapsed, I drew the attention of the responsible person to the omission.

The following statement shows the source of information, etc., of the births notified during the year. As live births have to be notified much sooner than they are registered, the number notified differs from the number registered. The registration of still births has not yet been made compulsory.

	Notified within 36 hours.		Notified after 36 hours.		Total Notified.	
	Live Births.	Still Births.	Live Births.	Still Births.	Live Births.	Still Births.
Notified by midwives . .	508	11	—	—	508	11
„ parents . .	117	1	51	—	168	1
„ doctors . .	402	20	—	—	402	20
„ nurses and others	163	4	6	—	169	4
	1190	36	57	—	1247	36

Deaths.

The “recorded” death-rate is the rate obtained by calculating the number of “net” deaths per 1000 of the population. From the total deaths of civilians registered is deducted the number who were non-resident persons, and, after subtracting these, the number of deaths of civilian Hampstead residents who died outside the Borough is added. The total net deaths during 1926 was 928 or 10·6 per 1000 of the population, as compared with 923 in the preceding year. These deaths were distributed among the various Wards as follows:—No. 1 (Town) 134, No. 2 (Belsize) 138, No. 3 (Adelaide) 107, No. 4 (Central) 108, No. 5 (West End) 153, No. 6 (Kilburn) 186, and No. 7 (Priory) 102.

The following are the death-rates per 1000 of the population for each of the Wards, the Borough, London, and England and Wales:—

No. 1 (Town) Ward	..	..	10.3
No. 2 (Belsize) „	..	..	9.8
No. 3 (Adelaide) „	..	..	10.2
No. 4 (Central) „	..	..	11.2
No. 5 (West End) „	..	..	11.1
No. 6 (Kilburn) „	..	..	11.7
No. 7 (Priory) „	..	..	9.5
The Borough ..	..	..	10.6
London ..	..	..	11.6
England and Wales	..	..	11.6

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING THE YEAR
1926.— Arranged in the form of the short List of Causes adopted by
the Registrar-General in consultation with the Ministry of Health.

CAUSES OF DEATH.	Sex.	Net deaths at the subjoined ages of "Residents," whether occurring within or without the Borough.									
		All ages.	Under 1 year.	1 and under 2 years.	2 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 under 75 years.	75 years and upwards.
1	2	3	4	5	6	7	8	9	10	11	12
1. Enteric Fever	M	...	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	...	...	1	...	...	...
2. Small-pox	M	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
3. Measles	M	7	2	4	1	...	...	...	...	...	...
	F	2	...	1	1	...	...	...	...	...	...
4. Scarlet Fever	M	...	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	1	...	...	...	...	...
5. Whoopin Cough	M	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
6. Diphtheria	M	2	...	...	1	1	...	...	...	...	...
	F	7	...	...	1	5	...	...	1	...	...
7. Influenza	M	10	...	...	1	...	...	2	2	1	4
	F	12	...	...	...	...	2	3	3	1	3
8. Encephalitis Lethargica	M	...	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	...	...	...	1	...	...
9. Meningococcal Meningitis	M	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
10. Tuberculosis of respiratory system	M	27	...	...	...	...	3	13	11	...	...
	F	24	...	...	...	...	5	12	5	2	...
11. Other Tuberculous Diseases	M	4	...	1	...	...	...	...	2	1	...
	F	1	...	...	...	...	1	...	...	...	...
12. Cancer, malignant disease	M	45	...	...	...	...	...	2	17	17	9
	F	90	...	...	1	...	...	11	32	25	31
13. Rheumatic Fever	M	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
14. Diabetes	M	9	...	...	...	1	...	...	1	3	4
	F	12	...	...	...	...	...	1	8	...	3
15. Cerebral hæmorrhage, &c.	M	18	...	...	...	...	...	...	5	5	7
	F	39	...	...	...	...	...	1	13	9	16
16. Heart Disease	M	70	...	...	...	...	2	3	21	23	21
	F	74	...	...	...	...	1	2	23	16	32
17. Arterio-sclerosis	M	32	...	...	...	...	...	...	12	12	8
	F	29	...	...	...	...	...	2	5	9	13
18. Bronchitis... ..	M	10	1	...	...	...	...	1	4	1	3
	F	27	...	...	...	...	...	2	5	20	...
19. Pneumonia (all forms) ...	M	29	4	1	...	1	...	2	10	6	5
	F	34	1	1	...	1	...	3	7	7	14
20. Other Respiratory Diseases	M	6	...	...	...	...	...	2	3	1	...
	F	11	1	...	...	1	...	...	3	4	2
21. Ulcer of Stomach or Duodenum	M	4	...	...	...	...	...	1	3	...	...
	F	7	...	...	...	...	...	2	1	3	1
22. Diarrhoea, &c.	M	5	4	...	...	...	...	...	...	1	...
	F	6	2	...	1	...	...	2	1	...	...
23. Appendicitis and Typhlitis	M	1	...	...	...	...	...	...	1	...	...
	F	...	...	...	...	...	...	...	...	...	...
24. Cirrhosis of Liver	M	5	...	...	...	...	...	2	3	...	...
	F	...	...	...	...	...	...	...	...	...	...
25. Acute and Chronic Nephritis	M	13	...	...	...	...	...	...	6	6	1
	F	15	...	...	...	...	1	...	8	5	1
26. Puerperal Sepsis	M	...	...	...	...	...	...	...	...	...	...
	F	2	...	...	...	...	1	1	...	...	...
27. Other accidents & diseases of pregnancy, and parturition	M	...	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	...	...	1	...	...	...
28. Congenital Debility and malformation, premature birth	M	16	16	...	...	...	...	...	...	...	...
	F	12	12	...	...	...	...	...	...	...	...
29. Suicide	M	7	...	...	...	...	...	3	4	...	...
	F	3	...	...	...	...	1	...	1	...	...
30. Other Deaths from Violence	M	14	...	...	...	2	1	3	5	3	...
	F	17	3	...	...	...	2	5	2	2	3
31. Other Defined Diseases	M	67	9	...	...	1	1	10	18	17	11
	F	99	10	2	1	2	4	9	25	12	34
32. Causes ill-defined or unknown	M	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
All causes {	M	401	36	6	3	6	7	44	129	97	73
	F	527	29	4	5	10	18	56	141	101	163
TOTALS		928	65	10	8	16	25	100	270	198	236

All "Transferable Deaths" of residents, *i.e.*, of persons resident in the Borough who died outside it, have been included. Transferable deaths of non-residents, *i.e.*, of persons resident elsewhere in England and Wales, who died in the Borough have in like manner been excluded.

CAUSES OF DEATH.

The incidence of the chief causes of mortality in Hampstead shows very plainly in a tabular list of the six principal death-causing diseases in 1926 :—

Heart disease	..	..	..	144
Cancer ..	..	..	..	135
Respiratory disease	..	..	..	117
Arterio-sclerosis	..	..	..	61
Cerebral hæmorrhage, &c.	..	..	..	57
Tuberculosis	..	..	..	56

The following diseases and causes of death call for special mention :—

Maternal Deaths.

Number of women dying in, or in consequence of, child-birth :—

(1) From Sepsis	{ at home —	} 3
	{ in hospital 2	
(2) Other Causes	{ at home —	}
	{ in hospital 1	

Infantile Mortality.

The following table shows the deaths and death-rates of legitimate and illegitimate infants in 1926 :—

LEGITIMATE INFANTS.

No. of births	..	..	..	1001
„ deaths	..	..	..	48
Death rate per 1000 legitimate births	..		..	48

ILLEGITIMATE INFANTS.

No. of births	..	..	..	76
„ deaths	..	..	..	17
Death rate per 1000 illegitimate births	..		..	223

TOTAL.

No. of births	..	..	..	1077
„ deaths	..	..	..	65
Death rate per 1000 births	..		..	60

In the following tables the 65 infantile deaths during 1926 have been classified according to diseases in age-periods and in Wards:--

CAUSES OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 4 Weeks.	4 Weeks and under 3 Months.	3 and under 6 Months.	6 and under 9 Months.	9 and under 12 Months.	Total Deaths under 1 Year.
1. Small-pox ...	...	...	...	...	...	...	...	...	...	...
2. Chicken-pox ...	...	...	...	...	...	...	...	...	...	...
3. Measles ...	...	...	...	...	...	...	...	1	1	2
4. Scarlet Fever ...	...	...	...	...	...	...	...	...	...	...
5. Whooping Cough ...	...	...	...	...	...	...	...	...	...	...
6. Diphtheria and Croup ...	...	...	...	...	...	...	...	...	...	...
7. Erysipelas ...	...	...	...	...	...	...	...	...	...	...
8. Tuberculous Meningitis ...	...	...	...	...	...	...	...	...	...	...
9. Abdominal Tuberculosis ...	...	...	...	...	...	...	...	...	...	...
10. Other Tuberculous Diseases ...	...	...	...	...	...	...	...	...	...	...
11. Meningitis (not Tuberculous) ...	...	...	...	...	...	...	...	...	...	...
12. Convulsions ...	...	1	...	...	1	1	1	...	...	3
13. Laryngitis ...	...	...	...	...	...	...	...	...	...	...
14. Bronchitis ...	...	...	...	...	...	...	1	...	...	1
15. Pneumonia (all forms)	1	...	1	...	2	...	2	1	...	5
16. { Diarrhoea and } 17. { Enteritis ... }	1	...	1	...	2	...	1	3	...	6
18. Gastritis ...	...	...	...	...	...	...	...	...	...	...
19. Syphilis ...	...	1	...	...	1	3	...	...	...	4
20. Rickets ...	...	...	...	...	...	...	...	...	...	...
21. Suffocation, overlying	...	...	...	...	...	...	...	...	...	...
22. Injury at Birth ...	...	...	...	...	...	...	...	...	...	...
23. Atelectasis ...	1	...	...	...	1	...	...	...	...	1
24. { Congenital Mal- formations ... }	...	...	...	...	...	1	1	...	...	2
25. { Premature Birth	16	1	3	...	20	1	...	...	...	21
26. { Atrophy, Debility and Marasmus }	1	...	...	1	2	1	1	1	...	5
27. Other causes ...	7	...	...	...	7	3	2	2	1	15
TOTALS ...	27	3	5	1	36	10	9	8	2	65

CAUSES OF DEATH.	No. 1 (Town).	No. 2 (Belize).	No. 3 (Adelaide).	No. 4 (Central).	No. 5 (West End).	No. 6 (Kilburn).	No. 7 (Priory).	Total.
1. Small-pox
2. Chicken-pox
3. Measles	2	...	2
4. Scarlet Fever
5. Whooping Cough
6. Diphtheria and Croup
7. Erysipelas
8. { Tuberculous Meningitis
9. { Abdominal Tuberculosis
10. { Other Tuberculous Diseases
11. Meningitis (not Tuberculous)
12. Convulsions	1	...	1	...	...	1	...	3
13. Laryngitis...
14. Bronchitis	1	...	1
15. Pneumonia (all forms)	1	...	...	1	2	1	5
16. { Diarrhoea	2	...	1	1	2	...	6
17. { Enteritis (incl acute gastro) }
18. Gastritis	1	...	...	...	3	...	4
19. Syphilis
20. Rickets
21. Suffocation, overlying
22. Injury at Birth	1	...	...	...	...	...	1
23. Atelectasis	1	...	...	1
24. { Congenital Malformations	1	...	1	2
25. { Premature Birth	4	...	2	2	4	6	3	21
26. { Atrophy, Debility and Marasmus	1	...	...	...	2	...	3	5
27. Other causes	4	4	1	...	2	3	...	14
TOTAL DEATHS	9	9	4	3	12	20	8	65

Want of Breast Milk has been included under No. 26, Atrophy and Debility.

Net Births in the year	{ legitimate { M. 519 F. 482 illegitimate { M. 45 F. 31	Net Deaths in the year of	{ legitimate infants { M. 28 F. 20 illegitimate infants { M. 8 F. 9
------------------------	--	---------------------------	--

Deaths of Young Children.

During 1926, 83 deaths occurred of children under five years of age; this is equivalent to a rate of 14.1 per 1,000 children born in that and the four preceding years.

1921	..	88	65	126	20.7
1922	..	72	56	106	16.9
1923	..	54	44	71	10.8
1924	..	66	56	95	14.3
1925	..	59	55	76	12.4
1926	..	65	60	83	14.1

Tuberculosis.

The deaths from Tuberculosis were as follows :—

Tuberculosis of Respiratory System	..	51
Other Tuberculous Diseases	..	5

Detailed information regarding Tuberculosis will be found in Section 6.

Measles.

During 1926, 9 deaths occurred from this complaint. A reference to these cases, to the operation of the Borough of Hampstead (Measles) Regulations, 1920, under which all cases are compulsorily notifiable, and to the Order of the London County Council, which came into force on 1st April, 1903, extending to Measles certain sections of the Public Health (London) Act, 1891, will be found in Section 7.

Whooping Cough.

No death was reported as being due to Whooping Cough. This disease is referred to in Section 7.

Principal Epidemic Diseases.

All of these, with the exception of whooping cough, are notifiable diseases, and information concerning them is set out in Section 6 of this Report.

Cancer.

During the year, the number of deaths from Cancer was as follows :—

45 Males.	90 Females.	135 Total.
-----------	-------------	------------

In considering the greater number of deaths occurring among females, it should be remembered that at the last Census the population of the Borough was found to consist of 52,900 females and 33,253 males.

The deaths from Cancer according to age-periods were as follows :—

Under 25	..	..	1
25 and under 45	..	..	13
45 and under 65	..	..	49
65 and upwards	..	..	72

The next tables give the anatomical distribution of the deaths from Cancer in each sex :—

MALES.

Situation.	1921.	1922.	1923.	1924.	1925.	1926.
Tongue	4	1	—	—	3	2
Oesophagus ..	8	3	4	4	8	2
Stomach	2	7	14	7	9	7
Liver and Gall Bladder	3	4	4	2	3	2
Intestines	7	7	3	8	9	6
Rectum	3	5	10	5	2	4
Other organs ..	28	23	26	35	22	22
Totals ..	55	50	61	61	56	45

FEMALES.

Situation.	1921.	1922.	1923.	1924.	1925.	1926.
Tongue	—	—	—	—	—	—
Oesophagus ..	1	—	3	—	2	—
Stomach	3	6	6	6	9	9
Liver and Gall Bladder	4	4	7	10	7	4
Intestines	6	9	7	13	11	13
Rectum	9	7	20	3	5	5
Uterus	14	12	12	13	11	8
Breast	16	24	18	14	16	25
Other organs ..	26	23	24	31	25	26
Totals ..	79	85	97	90	86	90

The Borough Council carry out the destruction of Bedding, Clothing, etc., and the disinfection of rooms in Cancer cases whenever requested; and distribute a leaflet which contains advice and information on the subject of this disease.

Deaths from Violence (excluding Suicide).

31 deaths were classified under this heading, as compared with 28 in 1925.

The causes of death were as follows:—12 to being injured in street accidents, 5 to falls, 1 to drowning, 6 to burns (clothing catching fire, &c.), 1 to asphyxia, 2 to poisoning, 1 to scalds, and 3 to other injuries.

Suicide.

10 persons committed suicide, as compared with 15 in 1925.

The causes of death were as follows:—Gas poisoning, 2; poisoning, 3; cut throat, 1; gunshot wound, 1; drowning, 1; hanging, 1; under train, 1.

Section 2.

General Provision of Health Services in the Borough.

HOSPITALS PROVIDED OR SUBSIDISED BY THE BOROUGH COUNCIL OR BY THE LONDON COUNTY COUNCIL.

Fever and Smallpox. Hospitals for patients suffering from these diseases are provided by the Metropolitan Asylums Board.

Tuberculosis. The Borough possesses (a) two endowed beds at the Mount Vernon Hospital at Northwood; and (b) two beds at the Hampstead General Hospital, Haverstock Hill, Hampstead, which latter would be available for surgical tuberculosis. Letters of admission are granted at the discretion of His Worship the Mayor. Residential Institutional Treatment for tuberculous patients is provided by the London County Council.

Maternity.

Queen Charlotte's Hospital. The Borough Council contributes towards the cost of beds in Queen Charlotte's Hospital, which are available for Hampstead residents.

St. Mary's Convalescent Home, Birchington-on-Sea. The Council has a lien on one of the beds in this Home.

New End Hospital, Hampstead. The Council rents a small ward from the Guardians for the confinement of Hampstead patients on a paying basis.

Children.

Northcourt Hospital, Hampstead. The Council has entered into an agreement with this hospital whereby sick and ailing children and children needing minor operations are admitted.

Institutional Provision for Unmarried Mothers, illegitimate infants and homeless children.

There is a home at 88, Alexandra Road, Hampstead, controlled by a voluntary committee, for unmarried mothers and their infants.

A Foster Home exists at 99, Haverstock Hill, Hampstead, for the children of unmarried mothers.

Further details of most of these Institutions, etc., will be found in Section 7 (Maternity and Child Welfare).

Ambulance facilities.

(a) For infectious cases. { Provided by the Metropolitan Asylums Board.

(b) For non-infectious and accident cases { The Ambulances of the Board are available for non-infectious cases.
The Ambulances of the London County Council and those of the St. John's Ambulance Association are available for accident cases.

THE FOLLOWING CLINICS AND TREATMENT CENTRES EXIST.

Maternity and Child Welfare Centres (Consultation and Treatment).

Pre-Maternity Clinic for Expectant Mothers.

Established and controlled by the Borough Council. The clinics are held as follows:—

Day.	Place.	Hours.
Monday	73, Dynham Road, Kilburn	2.30 p.m.
Thursday	„ „	10 a.m.
„	27, Pond Street, Hampstead	2.30 p.m.

Infant Welfare Centres.

Established and controlled by the Hampstead Council of Social Welfare.

Held at 5 premises in various parts of the Borough.

Day Nurseries.

Established and controlled privately.

Held at 27 & 29, Pond Street and 36, Hemstal Road.

Tuberculosis.

Tuberculosis Dispensary established and controlled by the Borough Council. Sessions held at the Dispensary, 73, Dynham Road, Kilburn, on Tuesdays, 2 p.m.; Wednesdays, 5 p.m.; Fridays, 4.30 and 8 p.m.

Dental Clinics. (a) For Expectant or Nursing Mothers and Children under five years of age.

One established and controlled by the Borough Council: held at 27, Pond Street, Hampstead, on Wednesday mornings at 10 a.m.

One established and controlled by the Hampstead Council of Social Welfare: held at the Health Institute, 107, Kingsgate Road, Kilburn, on Tuesday afternoons at 2.30 p.m.

(b) For Tuberculosis Dispensary patients.

The Borough Council has arranged for such of these patients as need dental treatment to attend at the British Dental Hospital, 31, Camden Road, N.W., on Wednesday mornings at 9.30.

Venereal Disease.

Treatment Clinics are arranged by the London County Council; no clinic is situated in the Borough. Particulars of these clinics may be obtained from the Public Health Department at the Town Hall.

PUBLIC HEALTH OFFICERS OF THE BOROUGH COUNCIL, 1926

** Medical Officers :*

Frank E. Scrase, F.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. (Lond.),
Medical Officer of Health and Administrative Medical Officer, Tuberculosis and
Maternity and Child Welfare.

A. J. Scott Pinchin, M.D. (Lond.), M.R.C.P. (Lond.),
Tuberculosis Medical Officer and Assistant Medical Officer of Health for Tuberculosis
Work.

Miss Mary Kidd, M.B. (Lond.),
Medical Officer in Charge, Pre-Maternity Clinics.

** Consulting Obstetricians. (Available from May, 1926.)*

Miss Margaret Basden, M.D., F.R.C.S., 114, Harley Street, and 26, Thurlow Road,
Hampstead.

Arthur O. Gray, M.D., F.R.C.S., 18, Harley Street.

C. S. Lane-Roberts, M.D., M.R.C.S., 64, Harley Street, and 20, Upper Park Road, Hampstead.

S. C. Luker, M.D., F.R.C.S., 15, Portland Place. (Resigned February 1927.)

L. C. Rivett, M.C. (Cantab.), F.R.C.S., 118, Harley Street, and 3, Hanover Terrace, Regent's
Park.

** Sanitary Inspectors :*

W. G. Kershaw, Senior Inspector.

F. H. Hudson (Sale of Food and Drugs Acts; Orders and Acts *re* Milk
and other Food; Factory and Workshop Act) }
Mrs. T. Fisher, M.A. (Infectious Diseases, and Factory and Workshop } Special Inspectors.
Act)

A. Peverett (Wards 1 and 2); W. F. Horniblow (Wards 3 and 7); }
J. Grimsley (Wards 4 and 5); A. C. Townsend (Ward 6) } District Inspectors.

Assistants to Inspectors :

A. Edwards, E. Stratton, R. Martin, W. Day.

Keeper of Public Mortuary :

R. Martin (temporary), 3A Flat, 6, Back Lane, Flask Walk, N.W. 3.

Disinfecting and Cleansing Stations :

T. Rider, R. Bell, W. Bell, Disinfectors.
Mrs. Blanden, Cleansing Station Attendant.

Dentist :

Dental Clinics in connection with the Tuberculosis Dispensary and Maternity and Child
Welfare are staffed by The British Dental Hospital, 31, Camden Road, N.W. 1.

** Public Analyst :*

Henry E. Cox, M.Sc., Ph.D. (Lond.), F.I.C.

** Health Visitors and Nurse :*

Mrs. K. Roche
Mrs. I. G. Steward, C.M.B. } District Health Visitors.
Miss A. Kennedy
Nurse M. Lowen, Tuberculosis Visitor and Dispensary Nurse.

Clerks :

Frank S. Hill, Chief Clerk,
W. Sell, R. H. Box, *Miss E. Blakeman, *Miss E. Selwood, R. E. Forrest, G. E. Waller.

All the Officers give their whole time to their duties, with the exception of the Tuberculosis
Medical Officer, the Medical Officer in charge of the Pre-Maternity Clinics, the
Public Analyst, and the Cleansing Station Attendant.

All the Sanitary Inspectors, Health Visitors and Nurse possess the necessary
qualifications and certificates.

* Contribution to salary or fees of these officers is made under Public Health Acts or by
Exchequer grants.

The following changes in the personnel of the staff took place during 1926 :—

Reginald Geary retired on 31st January after 33 years.

G. E. Waller was appointed as Junior Clerk in January.

ADDRESSES OF OTHER PUBLIC OFFICERS, MORE OR LESS CONNECTED WITH PUBLIC HEALTH WORK, 1926.

District Poor Law Medical Officers :

Dr. E. A. Seymour, 12, Thurlow Road, N.W. 3.
Dr. W. Butement, 127, West End Lane, N.W. 6.

Public Vaccinators :

Dr. E. T. A. Smith, 2, Alexandra Road, N.W. 8 (since resigned).
Dr. W. Butement, 127, West End Lane, N.W. 6.

Vaccination Officer :

F. A. Dare, 2, New End, N.W. 3.

Registrar of Births and Deaths :

A. E. Griffiths, 55, Heath Street, N.W. 3. and Health Institute,
107, Kingsgate Road, Kilburn, N.W. 6.

Registrar of Marriages :

E. Best, Town Hall, Haverstock Hill, N.W. 3.

Relieving Officers :

F. A. Dare, 2, New End, N.W. 3.
J. A. Eldridge, 46, Iverson Road, N.W. 6.

Certifying Surgeon (Factory and Workshop Acts) :

Dr. C. W. Cooke, 72, Dartmouth Road, Cricklewood, N.W. 2.

Coroner :

Sir Walter Schroöder, 34, Heath Street, N.W. 3.

Coroner's Officer :

Police Constable R. Smale, Hampstead Police Station, Rosslyn Hill.

District Surveyor :

J. E. Mundell, 305, Finchley Road, N.W. 3.

Superintendent Registrar :

R. Bridger, Town Hall, Haverstock Hill, N.W. 3.

H.M. District Inspector of Factories for North London :

Miss A. D. E. Dunch, 99, Queen's Gate, S.W. 7.

PROFESSIONAL NURSING IN THE HOME.

(a) *General.* The Hampstead District Nursing Association, 25, Heathhurst Road, and the Kilburn and West Hampstead District Nursing Association, 20, Dennington Park Road. Both Associations provide skilled nurses for the sick poor. The Borough Council subsidises the work of the Associations.

(b) *For Infectious Diseases.* By arrangements made between the two Nursing Associations and the Borough Council, whereby the Council contribute towards the expenses of the Associations, nurses are available for cases of Measles, Whooping Cough, Epidemic Diarrhœa, Ophthalmia Neonatorum, Acute Primary or Acute Influenzal Pneumonia, Influenza, Malaria, Dysentery or Trench Fever. During 1926, 217 cases were nursed under this arrangement by the Kilburn and West Hampstead District Nursing Association, and 49 by the Hampstead District Nursing Association.

(c) *For Maternity Cases.* By agreements between the two Nursing Associations and the Borough Council, skilled maternity nursing can be obtained for cases in the Borough. Both Associations have fully trained nurses appointed to attend maternity cases, and any woman can have a fully trained nurse attend her together with her own doctor. A fee is charged the patient, which is in accordance with her means, and may be nothing in very poor cases. The Council make a grant of £100 to the Kilburn and West Hampstead District Nursing Association towards the expenses of their Maternity Nurses, and in respect of the other Association pay a sum of £2 2s. 0d. per maternity case nursed, irrespective of the number of cases involved. During 1926, 82 cases were nursed by the former Association and 27 by the latter.

MIDWIVES.

I am informed by the London County Council that the total number of midwives practising in Hampstead is 23.

Arrangements have been made by the Borough Council with both Nursing Associations for the provision of properly skilled and registered midwives. The Borough Council makes a grant of £100 to the Kilburn and West Hampstead Association, and in respect of the other Association pay a sum of £2 2s. 0d. per midwifery case nursed.

The fees charged the patient have been carefully considered in reference to the midwives' fees prevailing in the district, and have been

graduated so as not to undercut the practising midwives. During 1926, 97 cases were attended by the Midwives of the Kilburn and West Hampstead District Nursing Association, and 16 by the Hampstead District Nursing Association.

CHEMICAL WORK.

The Public Analyst's Laboratories are situate at 11, Billiter Square, E.C. 3. The Report of the Public Analyst will be found in the Appendix, and a survey of the analytical work carried out during the year will be found in Section 3.

LEGISLATION IN FORCE.

List of Local Acts, Special Local Orders, General Adoptive Acts, and Bye-laws, relating to the Public Health, in force in the Borough.

Bye-Laws under Sections 16 (1), 16 (2), 39 (1), 39 (2) and 50 Public Health (London) Act, 1891.

Regulations under Section 17 (7) Housing (Town Planning), &c., Act, 1909 (Underground Rooms).

In addition to the foregoing by-laws made by the Borough Council or the late Vestry, which relate *inter alia* to various Sanitary matters; there are in force among others in the Borough Bye-laws made by the London County Council under Section 202 of the Metropolis Management Act, 1855, relating to drainage work, etc.; and under the Public Health (London) Act, 1891, and Section 6 of the Housing Act, 1925, relating to houses divided into separate tenements, etc.

Section 3.

Sanitary Circumstances of the Borough.

SANITARY INSPECTION OF THE BOROUGH.

The following statement contains particulars required to be submitted under Article 19 (15) of the Sanitary Officers Order, 1926, and affords some indication of the work performed by the Sanitary inspectors:—

Total number of Inspections during the year, 5,654. Re-inspections, 10,057.

These inspections were occasioned by various causes, *e.g.*, 702 complaints received and investigated; special inspections; examinations after occurrence of infectious disease; sanitary works, voluntary or otherwise, in progress (683 deposits of plans and particulars for re-drainage and other sanitary work were received during 1926).

Total number of Notices served during the year:—

(1) Informal (*i.e.*, intimations), 836; (2) Statutory, 640.

The improvement resulting from the service of these Notices may be gauged in some measure by the following list; but much of the work of the staff does not readily admit of tabulation.

General Conditions—

Houses or parts of houses cleansed (excluding verminous rooms)	..	..	..	..	457
Dampness in houses or parts of houses abated	..				210
Dilapidated	„	„	„	repaired	.. 403

Overcrowding—

Rooms found overcrowded	..	..	..	2
Overcrowding abated (rooms) after service of notice	..			2
„ „ without service of notice	..			—

Underground Rooms—

Found illegally occupied	..	..	..	34
Closed, or illegal occupation discontinued	..			10
Made to conform	..	..	..	24

Below Floors—

Spaces below floors in the basement or ground floors ventilated	48
---	----

Roofs—

Roofs repaired	192
----------------	----	----	----	----	-----

Gutterings—

Gutterings repaired or renewed	221
--------------------------------	----	----	----	-----

Rainwater Pipes—

Rainwater pipes repaired or renewed	394
„ „ disconnected from drains	..	..	134
„ „ „ „ soil-pipes	..	..	31

Waste Pipes—

Waste pipes of sinks trapped	252
" " repaired or renewed	249
" " unstopped	4
" of lavatories trapped	165
" " repaired or renewed	203
" " unstopped	3
" of baths disconnected from drains	1
" " trapped	123
" " repaired or renewed	154
" " unstopped	5

Water Supply, &c.—

Water supply re-instated	11
Additional water supply provided to tenement houses ..	26
No. of tenement houses dealt with	18
Domestic supplies disconnected from cisterns for flushing w.c's.	1
Additional sinks provided to tenement houses ..	28
No. of tenement houses dealt with	19
Sinks provided (in addition to above)	263
Lavatory basins provided	352
Baths provided	223

Water Cisterns—

Water cisterns repaired or renewed	12
" removed from improper positions	11
" cleansed	41
" fitted with close fitting covers	36

Water Closets—

Water closet accommodation provided	2
Additional water closet accommodation provided ..	81
Separate and sufficient provided for each sex	1
Water closets removed from improper positions ..	17
" provided with proper and sufficient external ventilation	110
Improperly constructed water closet apparatus removed and new provided	19
Water closet apparatus repaired or renewed	479
" " unstopped	1
" " cleansed	11
" " provided with proper water supply ..	89
" flushing cisterns repaired or renewed	217

Drains—

Drains repaired or renewed	486
„ cleansed	..	..	..	57
„ unstopped	..	..	..	29
„ ventilated	..	..	..	59

Manholes—

Manholes repaired or renewed	355
------------------------------	----	----	----	-----

Ventilating Pipes—

Carried to a sufficient height above windows ..	..	4
Ventilating pipes of drains repaired or renewed ..	..	77
Fresh air inlets repaired or renewed ..	..	98

Soil Pipes—

Soil pipes repaired or renewed	195
„ ventilated	..	..	24

Gullies and Surface Drains—

Gully traps removed from improper positions	..	40
Inlets or surface drains trapped	..	13

Paving and drainage of Washhouses, Areas, Yards, &c.—

Washhouse or scullery paving repaired or renewed	..	27
Areas cleansed	..	4
Area paving repaired or renewed	..	89
Areas drained	..	63
Yards or other open spaces paved	..	95
Paving of yards or other open spaces repaired or renewed	..	199
Yards or other open spaces drained	..	55
Buildings in which horses, &c., are kept; floors paved or repaired	..	5

Refuse and Receptacles—

Dust bins provided	..	339
Fixed ashpits removed	..	10
Accumulations or deposits of refuse removed	..	706
Manure receptacles provided	..	1
Nuisance from the improper deposit of trade refuse abated	..	3

Animals—

Nuisances from the improper keeping of animals abated (pigeons, fowls, ducks and rabbits)	..	4
--	----	---

Smoke Nuisances—

Number of nuisances and complaints	..	..	1
„ of observations	..	..	1
„ of notices	..	..	—
„ of summonses	..	..	—

Personal Cleansing—

Number of cleansings of adults	..	..	3
„ of cleansings of children	..	..	1087

Cleansing—

Number of verminous rooms cleansed	..	..	72
„ houses concerned	..	..	48

Disinfection—

Number of houses or parts of houses and contents disinfected			2284
„ of verminous rooms disinfected	..	..	70
„ „ articles of clothing disinfected	..	..	*179
„ „ beds disinfected	..	..	50
„ of persons accommodated at Shelter	..	..	—

Public Mortuary—

Number of bodies admitted	68
---------------------------	----	----	----

Increase of Rent and Mortgage Interest (Restrictions) Acts—

Number of certificates applied for	..	..	36
„ „ issued	..	..	31

* In addition to this number, the clothing of persons dealt with at the Cleansing Station was also disinfected.

Businesses of Rag and Bone Dealers.

Under the terms of Sec. 114, Public Health (London) Act, 1891, and Sec. 9, London County Council (General Powers) Act, 1908, the County Council made bye-laws with respect to these businesses.

There is only 1 premises in the Borough where the business of a dealer in Rags and Bones is carried on. These premises are kept under supervision by the Inspector of Workshops and Workplaces.

Underground Rooms.

The required standard to which such rooms must conform, if separately occupied, is prescribed in the Public Health (London) Act,

1891, and if used habitually for sleeping purposes, in the Regulations made by the Borough Council under the Housing Act, 1909.

During the year 10 underground rooms were closed or the illegal occupation was discontinued, and in 24 cases the rooms were made to conform to the required standard.

Factory and Workshop Acts.

Section 132 of the Act of 1901 requires every Medical Officer of Health in his Annual Report specially to report on the administration of the Act, and tabulated statements were framed by the Home Secretary with a view to such reports being made upon uniform lines.

The supervision of these premises in London is largely controlled by the Factory and Workshop Acts; and the Public Health (London) Act, 1891. For the purpose of their duties with respect to workshops and workplaces, the Borough Council are given, by section 125 of the Factory and Workshop Act, 1901, the same powers of entry, inspection, taking legal proceedings, or otherwise, as are possessed by His Majesty's Factory Inspectors. Under section 131 of the Act of 1901, it is the duty of the Borough Council to keep a Register of all Workshops situate within their district.

Inspection of Factories, Workshops, and Workplaces, including Inspections made by Sanitary Inspectors.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories (Including Factory Laundries)	112	6	—
Workshops (Including Workshop Laundries)	592	18	—
Workplaces (Other than Outworkers' premises)	875	46	—
Totals	1579	70	—

Defects found in Factories, Workshops, and Workplaces.

Particulars. (1)	Number of Defects.			Number of offences in respect to which Prosecutions were instituted. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
<i>Nuisances under the Public Health (London) Act, 1891* :—</i>				
Want of cleanliness	28	28	—	—
Want of ventilation	5	5	—	—
Overcrowding	3	3	1	—
Want of drainage of floors	—	—	—	—
Other nuisances	48	48	—	—
Sanitary accommodation {	insufficient	5	5	—
	unsuitable or defective	11	11	—
	not separate for sexes	4	4	—
<i>Offences under the Factory and Workshop Act, 1901:—</i>				
Illegal occupation of underground bakehouse (s. 101)	—	—	—	—
Other offences	—	—	—	—
(Excluding offences relating to outwork, and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops, Transfer of Powers) Order, 1921.				
Totals	104	104	1	—

* Including those specified in Sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health (London) Act, 1891.

Home Work (Outworkers).

Certain classes of work done at the homes of workers are controlled by the Factory and Workshop Act, 1901. The object of this supervision is to prevent work being done in insanitary dwellings, or in premises where there is dangerous infectious disease. Every occupier of a factory, workshop, or place from which home work is given out, and contractors employed by them, are required to keep lists showing the names and addresses of their home workers. The occupiers are required to send to the local authority on or before 1st February and 1st August in each year copies of such lists. Upon receipt of these lists, the names and addresses of those workers who reside in other districts are forwarded to the Medical Officers of Health concerned, and those home workers resident in the Borough are kept under supervision.

		Outworkers' Lists, Section 107.					
		Lists received from Employers.					
*NATURE OF WORK.		Sending Twice in the year.†			Sending Once in the year.		
		Outworkers		Lists	Outworkers		Lists
		Con- tractors.	Work- men.		Con- tractors.	Work- men.	
1	2	3	4	5	6	7	
(1) Wearing Apparel—							
a) making, &c.	30	23	41	14	7	29	
(b) cleaning and washing	12	20	8	5	7	3	
(2) Making-up, ornamenting, finishing and re- pairing of table linen, bed linen, or other household linen (including in the term linen articles of cotton or cotton and linen mixtures), and any process incidental thereto	4	14	7	—	—	—	
(3) Making, ornamenting, mending, and finishing of lace and of lace curtains and nets ...	—	1	3	—	—	—	
(4) Making of curtains and furniture hangings, and any process incidental thereto ...	4	2	9	1	—	—	
(5) Cabinet and furniture making and upholstery work	—	1	5	—	—	2	
(6) Making of Electro-plate	—	—	3	—	—	1	
(7) Making of files	—	—	—	—	—	—	
(8) Manufacture of brass and of any articles or parts of articles of brass (including in the term brass any alloy or compound of copper with zinc or tin)	—	1	1	—	—	—	
(9) Fur-pulling	—	1	—	—	—	—	
(10) Making of iron and steel cables and chains ...	—	—	—	—	—	—	
(11) Making of iron and steel anchors and grapnels	—	—	—	—	—	—	
(12) Making of cart gear, including swivels, rings, loops, gear-buckles, mullin bits, hooks, and attachments of all kinds	—	—	—	—	—	—	
(13) Making of locks, latches, and keys	—	1	—	—	—	—	
(14) Making or repairing of umbrellas, sunshades, parasols, or parts thereof	—	7	1	—	—	—	
(15) Making of artificial flowers	—	—	—	—	—	—	
(16) Making of nets other than wire nets	—	—	—	—	—	—	
(17) Making of tents	—	—	—	—	—	—	
(18) Making or repairing of sacks	—	—	—	—	—	—	
(19) Covering of racquet or tennis balls	—	—	—	—	—	—	
(20) Making of paper bags	—	2	—	—	—	—	
(21) Making of boxes or other receptacles or parts thereof made wholly or partially of paper, cardboard, chip, or similar material ...	—	2	1	—	—	—	
(22) Making of brushes	—	—	—	—	—	—	
(23) Pea picking	—	—	—	—	—	—	
(24) Feather sorting	—	1	—	—	—	—	
(25) Carding, boxing, or packeting of buttons, hooks and eyes, pins, and hair pins ...	—	1	—	—	—	—	
(26) Making of stuffed toys	—	—	—	—	—	—	
(27) Making of baskets	—	—	—	—	—	—	
(28) Manufacture of chocolate or sweetmeats ...	—	—	—	—	—	—	
(29) The making or filling of cosaques, Christmas crackers, Christmas stockings, or similar articles or parts thereof	1	—	1	—	—	—	
(30) The weaving of any textile fabric	—	—	1	—	—	—	
Total	51	77	81	20	14	35	

Notices served on occupiers as to keeping or sending lists of Outworkers, Nil; Prosecutions in relation to Outworkers' Lists, Nil.

Outwork in unwholesome premises, Sec. 108, Nil; Outwork in infected premises, Secs. 109-110, Nil.

* In the case of those occupiers who gave out work of more than one of the classes specified in column 1, and subdivided their lists in such a way as to show the number of workers in each class of work, the list has been included among those in column 2 (or 5 as the case may be) against the principal class *only*; but the outworkers have been assigned in columns 3 and 4 (or 6 and 7) into their respective classes.

† The figures in columns 2, 3 and 4 are the *total* number of the lists received from those employers who comply strictly with the statutory duty of sending *two* lists each year, and of the entries of names of Outworkers in those lists. 51 lists were received twice in the year. The names of Outworkers that were repeated in the duplicated Returns have *not* been counted twice.

There are 86 outworkers in Hampstead : of these—

3 are factories
34 are workshops (18 being domestic workshops)
2 are workplaces
47 are single workers
—
86
—

Factories.

The following is a list of the different classes of Factories in Hampstead:—

Bakers ..	..	19	Launderers..	..	2
Bootmakers	..	18	Motor and other engineers	..	28
Butchers ..	..	5	Opticians ..	..	1
Carpetbeaters	..	2	Printers ..	..	9
Coffee-roasters	..	5	Other trades	..	24
Dairymen ..	..	4			
					117

Workshops.

At the end of 1926 there were 389 workshops on the Register, including 80 domestic workshops. Excluding these latter, there were 541 males and 517 females employed in the workshops. During the year, 592 inspections were made and 18 notices served.

Trade or Business.	Workshops other than Domestic Workshops.				Domestic Work-shops.	Total number of Work-shops.
	Number of Work-shops.	Number of Work-rooms.	Number of Employees.			
			Males.	Females.		
Bakers	13	13	15	29	—	13
Blindmakers	2	3	5	4	—	2
Bootmakers	37	38	70	2	23	60
Builders and carpenters ...	22	28	53	—	1	23
Carriage builders	2	6	10	—	—	2
Confectioners	2	8	2	53	—	2
Corset makers	2	3	—	7	2	4
Dressmakers	39	47	—	184	11	50
Harness and trunk makers	5	7	19	1	—	5
Ironmongers	8	8	26	—	—	8
Milliners	17	18	—	49	4	21
Monumental masons	2	3	17	—	—	2
Motor makers and repairers...	11	15	32	—	—	11
Outfitters	4	17	3	41	—	4
Pianoforte makers	2	2	13	—	—	2
Picture frame makers	11	12	19	—	1	12
Photographers... ..	8	14	4	18	—	8
Smiths and metal workers ...	4	4	12	—	—	4
Tailors	48	55	66	39	22	65
Upholsterers & cabinet makers	21	30	66	9	7	28
Watchmakers and jewellers ...	13	13	20	—	—	13
Wigmakers	12	13	4	26	2	14
Miscellaneous	29	38	85	64	7	36
Totals	309	395	541	517	80	389

No. of Workrooms measured, 24.

Rats and Mice (Destruction) Act, 1919.

During the year 36 complaints have been received, investigated and dealt with. In every case where the complaint has been well founded, old drains have been sought for, and poisons laid down; while once a year more general tactics are adopted by way of laying poisons in certain places, particularly the sewers.

New Public Health Station.

The provision of such a Station as this is still one of the most pressing needs of the Borough.

The site in the yard of the Electric Lighting Station, Lithos Road, and plans for a building to comprise the whole health facilities of the Borough have been approved. The project has been delayed on account of a difficulty in connection with the site.

Railway Companies and Sanitary Control.

During the year the question of the control of sanitary works on railway companies' property was again raised. Both the Hampstead Junction and Metropolitan Railways were found to have recently carried out considerable drainage work at Stations in the Borough without giving notice and without depositing plans and particulars, and the work was found to have been done in such a manner as to contravene the by-laws. During the litigation in 1924 with the London, Midland and Scottish Railway with regard to sanitary works at the stations on that line it was made clear that any exemption from the by-laws applied only to the main lines. The question, however, assumed a new importance on account of the Metropolitan Railway deciding to construct a new line within the boundaries of the Borough of Hampstead. The matter was reported to the Public Health Committee, who recommended that proceedings be taken against the London, Midland and Scottish (Hampstead Junction) and the Metropolitan Railway Companies for failure to comply with the by-laws. The matter was referred to the General Purposes Committee, and upon their recommendation the Council on 25th November decided to take proceedings against the London, Midland and Scottish Railway Company in respect of drainage work carried out at Hampstead Heath Station.

Subsequently the London, Midland and Scottish Railway made a deposit of the necessary plans and also undertook to comply with the by-laws; no proceedings, therefore, were taken against the Company.

Proceedings, which will be heard in 1927, were then instituted

against the Metropolitan Railway Company in respect of the work carried out by that Company at their Swiss Cottage Station in contravention of the London County Council by-laws.

Legal Proceedings.

Legal proceedings were taken on certain occasions in 1926 by the Council, in connection with the work of the Public Health Department, under the various Acts of Parliament and By-laws and Regulations made thereunder which are administered by them. The fines and costs imposed were as follows :—

Statute or By-law.	Fines.			Costs.		
	£	s.	d.	£	s.	d.
Public Health (London) Act, 1891, and By-laws made thereunder ..	9	0	0	15	0	0
Metropolis Management Acts, and By-laws made thereunder ..	16	0	0	15	19	0
Sale of Food and Drugs Acts, etc. ..	19	0	0	19	10	0
Total	44	0	0	50	9	0

Public Mortuary, New End.

During the year, the bodies of 68 persons were brought to the mortuary—38 by order of the Coroner, 21 by the Police, and 8 at the request of friends, and 1 at the request of the Guardians. In 59 instances inquests were held, and in 53 instances a postmortem examination was made prior to the inquest. The following table indicates the causes of death of the persons whose bodies were received into the Mortuary.

Cause of Death or Verdict.			Number of Bodies received.
Deaths from natural causes	..	..	36
Accidental deaths	..	..	6
Misadventure ..	..	..	4
Neglect at Birth ..	..	..	5
Manslaughter ..	..	..	1
Murder ..	..	..	1
Open verdict ..	..	..	1
Suicide—Fall under train ..	..	..	1
Gun shot wound ..	..	..	1
Gas poisoning ..	..	..	4
Poisoning by Lysol ..	..	..	1
Cut throat ..	..	..	1
Drowning ..	..	..	2
Total ..			64

In addition to the above, the bodies of 4 still-born infants were brought to the Mortuary by the Police.

Section 4.

Housing.

The housing problem has undergone little material alteration during the year under review. There is still a scarcity of housing accommodation, and the Housing Committee has not been able to bring to maturity any plans for further amelioration.

Sherriff Road Flats.

The proposal to erect 16 flats upon a site in Sherriff Road, which was first submitted to the Council on 29th January, 1925, was fully reported upon by the Housing Committee to the Council at its meeting on 28th October, 1926, when the Committee stated that, after giving the matter their very careful and earnest consideration, they had arrived at the conclusion, unanimously, that the present time was inopportune for the scheme to be carried out, and recommended that the scheme should be deferred for the present. To this the Council agreed.

The problem of housing in Hampstead is no longer a question that involves the consideration of the construction of extensive additional accommodation; practically no unbuilt-on spaces remain other than those which are public open spaces or railway land; neither does the housing question affect exclusively the labouring classes. People of quite good economic conditions find it quite difficult to obtain suitable accommodation.

During the year I have compiled long lists of the people who are living in such an overcrowded state as to merit special consideration when applying for accommodation on the London County Council's Watling Estate. Of this scheme, which comprises in all 4,000 houses, it is hoped that 1,000 will be completed this year, and the County Council are allotting a certain number to each Borough in proportion to their needs. Included in the lists of families sent to the County Council for special consideration are the following :—

Families living in <i>one</i> room.		No. of cases.	
2-3 persons in the family	28
4	14
5	12
6 or more	8

Among this latter group the largest number living in one room was eight.

I quote these figures as an indication of housing conditions, with which the Department is striving to deal.

It is not at all easy, however, to get the most overcrowded persons in the Borough removed to the Watling Estate. Thus, the County Council's regulations governing the letting of accommodation stipulate that

"Applicants shall be allotted cottages and tenements not
"larger than are deemed to be sufficient to meet the reasonable needs
"of the families, taking into consideration the sex and age of the
"children and the bedroom accommodation required.

"Sub-letting or the accommodation of lodgers is not permitted,
"and in cases where properties are let at the ordinary weekly rentals,
"the carrying on of any business is not allowed. In cases where
"it is desired to carry on practices such as midwife, &c., a special
"charge is made in addition to the rent."

The approximate rents to be charged for the London County Council houses are as follows:—

				s.	d.	
2 room flats	..	..	..	10	3	per week
3 " "	..	..	..	11	6	"
4 " "	..	..	..	12	6	"
3 " cottage	..	..	..	12	0	"
4 " " (non-parlour)	..	..	..	12	6	"
4 " " (parlour type)	..	..	..	14	6	"
5 " "	..	..	..	14	9	"

Rates will be payable in addition to these amounts, and I estimate that they probably will amount to about one-third of the rent.

The difficulty, therefore, at once arises that our most crowded families must have 4 or 5-roomed cottages or flats, and when one goes into their economic conditions it seems impossible for them to pay an economic rent which the County Council hope to obtain. Up to the present we have not been able to get any family transferred to this Estate, though I have great hopes we shall do so during the current year.

With regard to clearing unhealthy sites, the Committee has not been able to see its way to take any action in this respect. Personally, I am still of opinion that something might be done towards removing some

of the small blocks of insanitary areas if the method I proposed to the Committee was carried out. I believe it is possible without great loss, perhaps without any loss at all, to take such small blocks as Golden Square and Silver Street and deal with them by gradual processes of improvement.

My proposal would be, shortly, this:—That if such a block as Golden Square and Silver Street were acquired, the Council should then spread its action over a number of years. As soon as one house became vacant it should be pulled down, every house so demolished making the others less insanitary, until by process of time sufficient of the houses have been demolished to leave the others with such surroundings and improved spaces as to make them worthy of renovation. This process might take a number of years, but it appears to me to be the only way by which the Borough Council can attack these areas, unless they are prepared to build some accommodation elsewhere into which the tenants could be removed as time and circumstances permitted, the insanitary property being demolished or reconstructed as it became vacant.

The two most recent enactments which bear on this question are the Housing Act, 1925, and the Tenement House By-laws, which were made by the London County Council, and came into force on 5th March, 1926. Both of these are important pieces of legislation.

The 1925 Act is practically a consolidating Act, and the first two sections of Part 3 are of especial interest to the Borough of Hampstead. Thus, Section 57 states:—

(1) A local authority may provide housing accommodation for the working classes:—

- (a) By the erection of dwelling-houses on any land acquired or appropriated by them;
- (b) by the conversion of any buildings into dwelling-houses for the working-classes;
- (c) by acquiring houses suitable for the purpose;
- (d) by altering, enlarging, repairing, or improving any houses or buildings on land acquired as a site for the erection of dwelling-houses for the working-classes, or any other houses an estate or interest wherein has been acquired by the local authority.

(2) The local authority may alter, enlarge, repair or improve any house so erected, converted or acquired, and may fit out, furnish and supply any such house with all requisite furniture, fittings and conveniences.

Section 58 provides as follows:—

(1) A local authority shall have power under this Part of this Act:—

- (a) To acquire any land, including any houses or other buildings thereon, as a site for the erection of dwelling-houses for the working-classes;

(b) to acquire any estate or interest in any houses which may be made suitable as dwelling houses for the working-classes, together with any lands occupied with such houses;

(c) to acquire land for the purpose of:—

(i) The lease or sale of the land, under the powers conferred by this Act, with a view to the erection thereon of dwelling-houses for the working-classes by persons other than the local authority.

(ii) The lease or sale under the powers conferred by this Act of any part of the land acquired with a view to the use thereof for purposes which, in the opinion of the local authority, are necessary or desirable for or incidental to the development of the land as a building estate, including the provision, maintenance, and improvement of houses and gardens, factories, workshops, places of worship, places of recreation, and other works or buildings for or for the convenience of persons belonging to the working-classes and other persons.

These Sections seem to be very comprehensive and wide in the powers they give.

It is interesting to note here the history and difficulty of the Housing question as illustrated by the Acts of Parliament relating to housing. These are many, and are in addition to the Public Health (London) Act, 1891, or kindred Sanitary measures. I append a list as follows:—

The Labouring Classes Lodging Houses or Dwelling Houses Acts, 1851, 1866 and 1867.

The Artisans' and Labourers' Dwellings Acts, 1868, 1875, 1879, and 1882.

The Public Works Loans Acts, 1879, 1881, 1914 and 1922.

The Housing Acts, 1885, 1890, 1893, 1894, 1900, 1903, 1909, 1919, 1921, 1923, 1924 and 1925.

The Small Dwellings Acquisition Acts, 1899—1923.

In addition there are large numbers of Orders and Regulations bearing on the subject.

The question of how far the State should intervene in the matter of housing is one upon which very widely divergent views are held, and about which those who are well qualified to advise hold entirely opposite opinions. What is clear, however, is the fact that means have yet to be devised for preventing the manufacture of slums, and to make it not only undesirable, but unprofitable, to own insanitary property.

The other important piece of legislation is the Tenement House By-laws, which were approved on 5th March, 1926. They were made by the London County Council on 17th November, 1925, under the Public Health (London) Act, 1891, and Section 6 of the Housing Act,

1925, with respect to houses intended or used for occupation by the working classes and let in lodgings or occupied by members of more than one family.

Several Borough Councils, including that of Hampstead, had urged the adoption of the definition which was put forward at a Conference between the London County Council and the Metropolitan Boroughs in July, 1925, and which in effect defined lodging-houses as being such as the Borough Council resolved should be registered as lodging-houses. The County Council, however, were unable to adopt this decision, and the Minister of Health confirmed the County Council's By-laws without such a clause being inserted.

When confirming the By-laws, however, the Minister of Health approved them *except in so far as they apply to any lodging-house in which the tenant resides, and not more than one family is lodged*. The Minister stated that he thought this exception would go some way to meet the objections to the by-laws which had been raised : but that this exception was not necessarily final, and did not preclude the London County Council from requesting him at some future date to agree to the By-laws being more widely applied if experience showed this to be necessary or justifiable. The definition of "lodging house" in the By-laws excludes from their operation a house in which *not more than two persons in addition to the tenant and his family also reside*, but the exception of the Minister has widened this exclusion to cover a house in which not more than one family *in addition to the tenant and his family is lodged*, and makes the By-laws more limited in their application than most of the By-laws on the subject hitherto in operation in many Boroughs. The Public Health Committee of the County Council were of the opinion that this exemption may remove from the scope of the By-laws houses to which it is desirable that they should apply.

The Public Health Committee of the Borough Council considered the question of putting the new By-laws into operation ; and on 20th April resolved to recommend the Council to appoint an inspector to carry out the inspectorial work involved, and for this purpose to engage an officer to fill the vacancy which existed in the Staff of Inspectors occasioned by the retirement of Mr. Geary earlier in the year. With this recommendation the Council agreed, and Mr. J. F. Armstrong has been appointed to perform the duties imposed upon the Council by the new By-laws.

Small Dwellings Acquisition Act, 1899—1923.

During the year the Council agreed in one instance to advance the sum of £450 to a householder to enable him to purchase his house under the provisions of these Acts.

Housing Statistics for the year 1926.

The following information is required by the Ministry of Health to be set out in this Report :—

Number of new houses erected during the year 1926 :—

- (a) Total (including numbers give separately under (b)) 153
(separate flats in mansions counted as houses).
- (b) With State assistance under the Housing Acts.
 - (i) By the Borough Council Nil.
 - (ii) By other bodies or persons Nil.

1.—UNFIT DWELLING-HOUSES.

Inspection.

- | | | |
|--|---------|-----|
| (1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) | .. .. . | 660 |
| (2) Number of dwelling-houses which were inspected and recorded under the Housing Consolidated Regulations, 1925 | .. .. . | Nil |
| (3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation | .. .. . | Nil |
| (4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation | .. .. . | 548 |

2.—Remedy of Defects without Service of formal Notices.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Borough Council or their Officers	Nil
---	---------	-----

3.—Action under Statutory Powers.

A. *Proceedings under Section 3 of the Housing Act, 1925.*

- | | |
|--|--|
| (1) Number of dwelling-houses in respect of which notices were served requiring repairs | } No Statutory Notices served;
unofficial Notices only. |
| (2) Number of dwelling-houses which were rendered fit after service of formal notices— | |
| (a) by owners | |
| (b) by Borough Council in default of owners | |
| (3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close | |

B. *Proceedings under Public Health Acts.*

- | | |
|--|-----|
| (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied | 775 |
| (2) Number of dwelling-houses in which defects were remedied after service of formal notices— | |
| (a) by owners | 775 |
| (b) by Borough Council in default of owners | — |

C. *Proceedings under Sections 11, 14, and 15 of the Housing Act, 1925.*

- | | |
|--|---|
| (1) Number of representations made with a view to the making of Closing Orders | — |
| (2) Number of dwelling-houses in respect of which Closing Orders were made | — |
| * (3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit | — |
| (4) Number of dwelling-houses in respect of which Demolition Orders were made | — |
| (5) Number of dwelling-houses demolished in pursuance of Demolition Orders | — |
| (6) Number of Demolition Orders determined | — |

Section 5.

Inspection and Supervision of Food.

Milk Supply.

There has been no Cowhouse in the Borough for many years; all the milk is now brought into the district from outside the County.

The Food Inspector supervises all the dairies and milkshops in the Borough, and a reference to the sampling of the milk supply will be found in that part of the report dealing with the Sale of Food and Drugs Acts.

Milk and Dairies (Amendment) Act, 1922.

This Act imposes upon Local Authorities the obligation of compiling two registers of milk dealers, one wholesale and one retail, and empowered them to refuse to register a retail purveyor of milk, or to remove a person from the register.

The number of premises in respect of which persons are registered as purveyors of milk is 63, comprising 43 dairies, 5 restaurants and coffee shops, and 15 general shops.

During the year 174 inspections were made and 4 notices were served.

Number of licences granted for the sale of milk under special designation, classified as in the Fourth Schedule to the Milk (Special Designations) Order, 1923; types of apparatus licensed for the pasteurisation of milk.

Purpose of Licence.	Number of Licences granted.
<i>Sale of "Certified" Milk.</i>	
License in respect of the establishment at which the milk is produced	—
Licence in respect of the shop or other premises (not being such establishment as aforesaid) at or from which the milk is sold	15
Supplementary Licence to sell milk from premises which are outside the area of the licensing authority	2
<i>Sale of "Grade A (Tuberculin tested)" or "Grade A" Milk.</i>	
Licence in respect of the establishment at which the milk is produced	—
Licence in respect of the establishment (whether the establishment at which the milk is produced or not) at which the milk is bottled	—

Purpose of Licence.	Number of Licences granted.
Licence in respect of the shop or other premises (not being the establishment at which the milk is produced or bottled) at or from which the milk is sold ..	13
Supplementary Licence to sell milk from premises which are outside the area of the licensing authority ..	1
<i>Sale of "Pasteurised Milk."</i>	
Licence in respect of the establishment in which the process of pasteurising is carried on, and of any shop or other premises in the area of the same licensing authority from which the milk is sold	1
Licence in respect of any other shop or other premises at or from which the milk is sold	21
Supplementary Licence to sell milk from premises which are outside the area of the licensing authority ..	1
No licences for graded milk or registrations of retailers were refused or revoked during the year.	

Milk and Dairies Order, 1926.

On 12th July, 1926, the Minister of Health issued the Milk and Dairies Order, 1926, made under section 1 of the Milk and Dairies (Consolidation) Act, 1915.

The Order revokes the Dairies, Cowsheds and Milkshops Orders of 1885, 1886 and 1899, so far as they relate to England and Wales, and all Regulations made thereunder by Local Authorities. The main provisions of those Orders and Regulations are replaced in the present Order by provisions similar in general purpose, but modified in accordance with the development of modern hygienic knowledge so far as to lay greater stress on cleanliness in all operations connected with the production and handling of milk (including the care of the cow) than upon the structure of buildings.

The most important of the new provisions of the Order are those relating to the health and inspection of cattle; to the handling, conveyance and distribution of milk; and to the sanitary condition of milk premises and health of persons employed therein.

Public Health (Imported Milk) Regulations, 1926.

On 12th July the Minister of Health issued the Public Health (Imported Milk) Regulations, 1926, made under the Public Health

(Regulations as to Food) Act, 1907, and section 8 (1) of the Milk and Dairies (Amendment) Act, 1922.

The Regulations require the registration by Port and Riparian Sanitary Authorities of persons receiving imported milk, and give power to the registering Authorities similar to that conferred by section 2 of the Milk and Dairies (Amendment) Act, 1922, in regard to retailers, to refuse registration or to remove a person from the register if the requirements of the Regulations in regard to the condition of the milk are not complied with. These requirements, viz., freedom from tubercle bacilli and a limitation of the bacterial content, are, as the Minister is advised, such as can suitably be applied to milk which has been submitted to a pasteurising or other heating process which is a commercial necessity for imported milk.

Although the Regulations will not be operated by the Borough Council, they have an important bearing on the food supply of the country.

Public Health (Meat) Regulations, 1924.

These Regulations aim at the more adequate inspection of slaughtering; the improvement in the handling, transport and distribution of meat; and the protection from contamination of meat offered for sale at stalls and in shops, stores, etc.

Their provisions have been enforced during the year by the Council's Food Inspector, Mr. F. H. Hudson, who exercises supervision over all premises in the Borough where foods are manufactured, prepared, stored or exposed for sale. During 1926 some further shops which formerly had open fronts have had fixed glass fronts installed.

Slaughterhouses.

There is no public abattoir in the Borough.

There is now only one licensed slaughter-house in the Borough, viz.:—No. 17, High Street.

		In 1923.	In January, 1926.	In December, 1926.
Registered	..	—	—	—
Licensed	..	4	2	1
		—	—	—
Total	..	4	2	1
		—	—	—

Objection was raised during the year by the Borough Council to a licence being issued in respect of an existing slaughter-house at 60, High Street, on the ground that no slaughtering had taken place there for a period of nine months or upwards. (Sec. 19 (8) Public Health (London) Act, 1891.)

From the evidence submitted, the Licensing Committee of the County Council were satisfied that slaughtering on the premises had been discontinued for the period stated, and, in these circumstances, decided that the County Council had no power to renew the licence.

Humane Slaughtering.

The by-law made by the London County Council in this connection provides that no animal shall be slaughtered until it has been effectually stunned with a mechanically operated instrument.

Meat.

The inspection of meat in the Borough has been systematically carried out during 1926 by the Food Inspector, who also attends at the licensed slaughter house at any time when slaughtering takes place. On the whole, the meat supply is good, and very little is ever seized or voluntarily surrendered. Condemned meat or other food is disposed of at the Council's Dépôt.

Unsound Food and Food Inspection.

The following is a list of food seized or voluntarily surrendered during the year :—

Haddock Roe, 2 trunks (approx. 1 stone each).

Corned Beef, 3 tins (approx. 6 lbs. each).

Potatoes, 3 sacks.

Prawns, 1 tin.

Fish (Chats), 6 stone.

Sanitary condition of Bakehouses and other premises where foods are manufactured, prepared, stored, or exposed for sale.

These premises have been kept under supervision during 1926 : their general sanitary condition is good. They are required to be thoroughly cleansed and limewashed, or, if painted, to be thoroughly washed twice a year.

The following table summarises the work done in this connection during 1926 :—

	No. of Premises on Register.	No. of Inspections.	No. of Notices.	No. of Prosecutions.
Bakehouses :—				
Factories—				
Underground ..	16	} 54	5	—
Aboveground ..	10			
Workshops—				
Underground ..	3	} 28	1	—
Aboveground ..	10			
Milkshops	63	174	4	—
Ice-cream Premises ..	69	88	5	—
Restaurant Kitchens ..	61	104	6	—
Slaughterhouses ..	1	50	—	—
Cow Sheds	Nil.	—	—	—
Fried Fish Shops ..	8	38	1	—
Offensive Trades ..	Nil.	—	—	—
Other Food Premises..	523	840	16	—

Of the number of bakehouses mentioned above, it will be noted that 26 are factory bakehouses and 13 are workshop bakehouses.

One bakehouse was demolished during the year.

The following bakehouses are out of use :—

FACTORIES { 110, Cricklewood Broadway (aboveground).
 { 307, Finchley Road (aboveground).

WORKSHOPS { 251, West End Lane (aboveground).
 { 289, Finchley Road (underground).

Butter Factories—No premises in the Borough are registered as Butter Factories.

Wholesale Dealers in Margarine—Various wholesale dealers are on the register in respect of 9 premises.

Businesses of Fried Fish Vendors.

There are 8 Fried Fish Shops in the Borough. These premises are kept under supervision by the Food Inspector, and their condition is controlled under By-laws made by the London County Council.

Analytical Work.

The report of the Public Analyst will be found in the Appendix.

Arsenic in Apples.

The question of arsenic in apples aroused widespread interest during 1925, when various tradesmen were prosecuted in this connection. During 1926 further samples were obtained, which, upon analysis, made it clear that apples containing arsenic were still being sold in the Borough.

The samples analysed in October, 1926, revealed the presence of arsenic to an extent varying from a trace to one-fiftieth of a grain per pound. The Royal Commission on Arsenical Poisoning, in their report issued in 1903, stated that it would be entirely proper that penalties should be imposed upon any vendor of food if the substance is shown by an adequate test to contain one one-hundredth grain of arsenic or more in the pound.

Upon receiving the Analyst's report the facts were notified to a representative of the International Apple Shippers' Association, with an intimation that the matter would be brought before the Public Health Committee with a view to legal proceedings being considered. Subsequently I had an interview with representatives of the United States Department of Agriculture and the International Shippers' Association, who gave confident statements that efficient means were being taken in the United States of America to prevent the export of apples containing an undue amount of arsenic, and promised to enquire into the matter of the occurrence of arsenic in the sample above mentioned. Immediately after the interview these representatives called upon the retailer of the apples ("Jonathans,") who found the box in which they were contained; the wholesaler and the salesman at Covent Garden were traced, and from the enquiries made it appeared that these apples must have been shipped some time before October 4th (when the inspection in America was started), and that the importers had promised not to sell any more "Jonathan" apples of the brand in question. Shortly afterwards apples were again extensively sampled in the Borough, but in no case was arsenic found in such quantities as to call for any action to be taken, whilst in many cases the apples were entirely free.

Sale of Food and Drugs Acts, 1875—1907.

505 samples were taken for analysis during the year. The number certified to be adulterated was 22, or 4·3 per cent. of the total number, as against 5·9 in 1925.

463 samples (20 of which were adulterated) were purchased from Hampstead tradesmen, and 42 (2 of which were adulterated) from tradesmen coming from other districts.

The following table shows the articles of which samples were taken during the year :—

Article.				Number taken.	Adulterated, etc.
Almonds, Ground	..	..	..	3	—
Apples	..	..	..	24	5
Baking Powder	..	..	..	3	—
Butter	..	..	..	65	4
Cheese	..	..	..	22	2
Cocoa	..	..	..	20	—
Coffee	..	..	..	11	—
Cream	..	..	..	42	1
Custard, Egg	..	..	..	2	2
Custard Powder	..	..	..	1	—
Dripping	..	..	..	5	—
Drugs	..	..	..	6	—
Fish and Meat Paste	..	..	..	8	—
Flour	..	..	..	3	—
Ginger, Ground	..	..	..	1	—
Honey	..	..	..	1	—
Ice Cream	..	..	..	4	—
Jam	..	..	..	1	—
Lard	..	..	..	21	—
Lemon Squash	..	..	..	2	—
Lime Juice	..	..	..	1	—
Malted Food	..	..	..	1	—
Margarine	..	..	..	17	3
Milk	..	..	..	194	4
Milk, Condensed	..	..	..	4	—
Mince Meat	..	..	..	3	—
Mustard	..	..	..	7	—
Pepper	..	..	..	7	—
Rice	..	..	..	1	—
Sauce	..	..	..	1	—
Sausage	..	..	..	1	—
Soda, Bicarbonate	..	..	..	1	—
Spice	..	..	..	1	—
Sugar	..	..	..	1	—
Sweets	..	..	..	1	—
Tapioca	..	..	..	1	—
Tea	..	..	..	3	—
Vinegar	..	..	..	15	1
Totals				505	22

The following table shows the articles adulterated, &c., nature of adulteration, and the results of proceedings taken :—

No. of Sample.	Article.	Analyst's Report.	Result of proceedings.
10	Margarine	Excessive proportion of boric acid, viz., 0·58 per cent.	No action.
12	Egg Custard	Not exceeding 4 per cent. of dried egg	Summons withdrawn.
35	Apples ..	Arsenic 1/32nd grain per lb.	Fine £10, costs £3 3s.
37	Egg Custard	Not exceeding 4 per cent. of dried egg	Summons dismissed.
42	Cream Cheese	Prepared from whole milk	No action.
46	"	" "	No action.
53	Milk ..	3 per cent. added water	Fine £5, costs £2 2s.
159	Butter ..	16·4 per cent. water (a small excess)	No action.
181	Milk ..	1·8 per cent. added water	No action.
256	Cream ..	Boric acid 0·36 per cent.	Cautioned.
273	Butter ..	15 per cent. foreign fat	Third portion sent to Government Analyst. No further action.
295	Milk ..	19·3 per cent. deficient in milk fat	No fine, costs £5 5s.
315	Butter ..	25 per cent. excess water	Fine £2, costs 12s. 6d.
353	Malt Vinegar	7·5 per cent. deficient in acetic acid	No action.
365	Butter ..	16·5 per cent. water (a small excess)	No action.
371	Apples ..	Arsenic 1/80th grain per lb.	No action. Informal sample.
378	" ..	Arsenic 1/75th grain per lb.	No action. Informal sample.
379	" ..	Arsenic 1/90th grain per lb.	No action. Informal sample.
390	Margarine	4·3 per cent. excess water	No action.
414	Milk ..	4·2 per cent. added water	Fine £2, costs £3 3s.
421	Apples ..	Arsenic 1/50th grain per lb.	No action.
424	Margarine	1·5 per cent. water in excess of legal limit	No action.

Milk and Cream Regulations, 1912 and 1917.

These Regulations aim at securing that cream containing preservative shall be distinguished from cream to which no preservative has been added. It is no longer permitted to add preservative to milk, and after 1st January, 1928, when these Regulations are superseded by the Public Health (Preservatives, &c., in Food) Regulations of 1925 and 1926, preservatives will not be permitted to be added to cream.

The Ministry of Health require the Medical Officer of Health to report on the administration of the above-mentioned Regulations and, for convenience, the report has been drawn up under the following headings:—

Report for the Year ended 31st December, 1926.

1.—Milk ; and Cream *not* sold as preserved Cream.

	(a)—Number of samples examined for the presence of a preservative.	(b)—Number in which preservative was reported to be present, and percentage of preservative found in each sample.
Milk	194	Nil
Cream	37	1 (0·36 per cent. boric acid)

Nature of preservative in each case in column (b) and action taken under the Regulations in regard to it. 0·36 per cent. boric acid. Vendor cautioned by order of Borough Council.

2.—Cream sold as Preserved Cream.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct, 5.

1. Correct statements made, 4.

2. Statements incorrect, 1 (found to be free from preservatives).

3. Percentage of preservative found in each sample— 0·21, 0·24, 0·31, 0·39 per cent., by weight.	Percentage stated on Statutory label— not more than 0·4 per cent., by weight.
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(b) Determinations made of milk fat in cream sold as preserved cream:—1. Above 35 per cent., 5.

2. Below 35 per cent., nil.

(c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article V (1) and the proviso in Article V (2) of the Regulations have not been observed:—nil.

(d) Particulars of each case in which the regulations have not been complied with, and action taken:—nil.

3.—Thickening substances.

(a) Any evidence of their addition to cream or to preserved cream, nil.

(b) Action taken where found, nil.

4.—Other observations (if any). One of the 5 samples referred to under paragraph 2 was purchased as Preserved Cream and was found on analysis to be free from any preservative whatsoever.

**Public Health (Condensed Milk) Regulations, 1923, and the
Public Health (Dried Milk) Regulations, 1923.**

During the year 4 samples of condensed milk were submitted to the Public Analyst. All were found to comply with the labels on the tins.

**Public Health (Preservatives, &c., in Food) Regulations, 1925,
and Public Health (Preservatives, &c., in Food) Amendment
Regulations, 1926.**

From January 1st, 1927, the only articles which may contain preservatives are :—Sausages and sausage meat, fruit and fruit pulp not dried, dried fruit, unfermented grape-juice and non-alcoholic wines, cordials and fruit juices, jam, candied peel, sugar, corn syrup, gelatine, beer, cider, alcoholic wines, sweetened mineral waters, brewed ginger beer, coffee extract, pickles and sauces made from fruit or vegetables.

The following articles may contain preservatives until a specified date :—Bacon, ham and egg yolk (up to July 1st, 1927); butter and cream (up to January 1st, 1928). In addition to this, margarine containing preservatives may be used for making up food articles until July 1st, 1927; bacon, ham and egg yolk and cream containing preservatives may be used for making up articles of food until January 1st, 1928; and butter containing a preservative may be used for making articles of food until July 1st, 1928.

These Regulations have been framed with a view to controlling the growing practice of adding preservatives to an ever-increasing number of articles of food.

With a view to enforcing the regulations in the Borough, the Public Health Committee authorised an additional 100 samples of articles of food to be taken per annum for analysis.

Section 6.

Prevalence of, and Control over, Infectious Diseases.

Infectious Diseases Generally.

Diphtheria.

The total number of cases notified in 1926 was 162, as compared with 136 in 1925.

At only one place was there anything that could be considered an out-break. This was in a large Residential School in the Borough where there were 85 scholars, 17 resident staff and a non-resident staff upwards of 5 in number.

On the 27th May, 1926, a case of Diphtheria was removed to hospital; the usual precautionary measures were taken by the Department in the way of disinfection, etc.

On June 22nd 2 other cases were removed, 1 of which died on 7th August; and on June 27th a further case occurred.

The Medical Officer of the School, in consultation with the Public Health Department, agreed, in view of the approaching school holidays, that it was desirable for bacteriological examinations to be made of all the children and staff before they were permitted to leave.

This was done, and 15 cases gave a positive result. They were, by arrangement, notified and removed to hospital.

On the 30th July, after a negative result of each remaining person in the institution had been obtained, the scholars and staff dispersed.

The school premises were again thoroughly disinfected, and the Medical Officers of Health of the districts to which the scholars proceeded were notified in every case.

Of the company of scholars and staff so dispersed, I am informed that 2 children subsequently developed diphtheria and were certified, and that another case developed very suspicious symptoms.

I am consulting with the medical staff of this institution on the question of the inmates of this school being immunised with anti-toxin.

Diphtheria Anti-toxin.

During 1926, 240,000 units were supplied from the Public Health Department. Anti-toxin is also obtainable at any hour of the day or night from the Town Hall, and also from the North-Western Fever Hospital, Lawn Road.

Encephalitis Lethargica.

Two cases were notified during the year. One was removed to hospital, but terminated fatally; the other was an old case which had not been diagnosed in the initial stage, and was now notified as post encephalitic Parkinsonism. This latter case improved, the tremor is not so marked, and the patient is able to take more nourishment.

One case which was originally notified in 1924, and had apparently made a complete recovery after removal to hospital for treatment, relapsed in November of 1926 and was again removed to hospital, but so far is not recovering.

Cerebro-Spinal Meningitis.

One case of this disease was notified in 1926 in the person of an inmate of a Mental Hospital. The notification was made to me as the patient's former home address was in Hampstead.

Polio-Myelitis.

One patient was notified in 1926, and was nursed at home. The case terminated fatally.

Enteric Fever.

Eleven cases were notified in 1926.

Three patients were nursed at home, and eight were removed to hospital. One of the latter terminated fatally.

In those instances where there was a possibility of the infection having taken place outside the Borough, *e.g.*, while the patient was on holiday, the local Medical Officer of Health was informed of the circumstances.

Four of the enteric fever patients were on the domestic staff of a large household. It seems clear from the investigations undertaken that one case—an ambulatory one—was not diagnosed, and that the other three contracted the disease from this carrier. All were removed to hospital, but one died.

Bacteriological Work.

Bacteriological examinations are carried out by the Lister Institute of Preventive Medicine, except examinations of material for detection of tubercle bacilli, which are performed by the bacteriologist of the Hampstead General Hospital. This latter also makes any necessary X-ray examinations.

The following is a summary of the bacteriological work carried out during the year 1926 :—

	Positive.	Negative.	Total.
Diphtheria	104	781	885
Enteric Fever ..	—	3	3
Specimens of Sputum ..	48	253	301
X-ray Examinations made	—	—	49

Public Health (Small-pox Prevention) Regulations, 1917.

No primary vaccinations or revaccinations were performed by the Medical Officer of Health under these Regulations during the year, the need not having arisen.

Non-notifiable Acute Infectious Diseases.

Important among these is *Whooping Cough*, and our principal source of information is the notifications received from school teachers, which are passed to the Health Visitors for visiting. Fortunately, during 1926 no death occurred from this disease. In the special leaflet which is distributed generally by the Health Visitors, a page is devoted to this disease, containing advice, etc., and urging the importance of securing medical aid for these cases.

Measles is compulsorily notifiable in the Borough under the Borough of Hampstead (Measles) Regulations, 1920. A reference to this disease will be found in Sections 1 and 7 of this Report.

Influenza. This disease did not assume serious epidemic proportions during the year ; 22 deaths were attributed to it.

Cancer.

A reference to the action of the Borough Council in connection with this disease will be found in Section 1 of this Report under the sub-heading of Vital Statistics.

Cleansing and Disinfection of Verminous Persons and their Belongings.

The Cleansing Station is situate in a small cottage devoted entirely to this purpose in the Electricity Yard, Lithos Road. The

cottage is away from all public thoroughfares; but a small railway footpath runs past the door. It consists of three rooms, two downstairs and one upstairs, with a lavatory on each floor, and was originally built as an Isolation Station.

Three cleansings of adults and 1,087 cleansings of children were carried out by the Council's Attendant at the Cleansing Station during the year, and, whilst this was in progress, their clothing were thoroughly disinfected by being passed through the disinfecting apparatus.

During the year, as a result of the action of the Sanitary Inspectors, 72 verminous rooms in 48 houses were cleansed and freed from vermin.

In addition, the Council's disinfectors disinfected 70 verminous rooms, 179 articles of clothing and 50 beds.

Hitherto Sanitary Authorities in London have been empowered by Statute to insist only upon the cleansing or destruction of filthy, &c., or verminous articles, and the cleaning of houses infested with vermin. By the London County Council (General Powers) Act, 1922, Sections 59 and 105 of the Public Health (London) Act, 1891, were extended to, and applied to, the provision of means for removing, cleansing and destroying articles, and cleansing houses under the Act of 1922, and to the borrowing of money for the provision of such means.

Public opinion has, however, not been sufficiently strong in favour of the compulsory cleansing of verminous adults as to justify legislation, but it would appear that the advisability of this course of action being more understood as the general public realise the close association of dirt and disease. The great increase in public transport facilities in recent years, in which there are no "class" distinctions, together with the gradual abolition of such distinctions in railways, has probably had an indirect influence on public opinion, which would now appear to be moving in the direction of *compulsory* cleansing.

As an example of this, in December last the Borough Council considered a report from the Public Health Committee in which they stated that they had considered a letter from the Clerk of the London County Council with regard to the cleansing of verminous persons, stating that in 1921 the County Council considered the question of obtaining power to compel the cleansing of verminous adults, when it was stated that a general power to compel such cleansing appeared to

involve such interference with the liberty of the subject as to be unlikely to receive legislative sanction; that such power had since been given, under certain conditions, in the Public Health Act, 1925, which however, did not apply to London; that the question was being considered by the County Council as to whether it was desirable that powers similar to those granted to local sanitary authorities *outside* London should be obtained for London, but before coming to a decision in the matter it desired to ascertain the views of Metropolitan Borough Councils,—and enquiring if the Borough Council desired to offer any observations on the suggestion. Upon the recommendation of the Public Health Committee the Council decided that the London County Council be informed that this Council is in agreement with the suggestion that power should be obtained to compel the cleansing of verminous adults.

At the same meeting another report from the Committee was received to the effect that they had considered a letter from the Hon. Secretary of the Society of Medical Officers of Health (Metropolitan Branch), with regard to the removal of persons (*e.g.*, decrepit, lonely old people unable to keep themselves clean, and often living alone in one room) from insanitary premises, to the effect that the Bradford Corporation were putting a Clause through in a private Bill in Parliament giving them power to obtain the removal of persons actually living under insanitary conditions, and stating that the Society were of the opinion that such power would be very useful in London.

The Council agreed to support this suggestion, and resolved to inform the London County Council and the Metropolitan Boroughs' Standing Joint Committee accordingly.

Disinfection.

The Disinfecting Station is situated in the yard of the Electric Lighting Station, Lithos Road.

It is equipped with a Washington-Lyons apparatus, with a staff of 3 men. The collection of infected or infested material is carried out by two Electric Vans.

During 1926, 2,284 disinfections of houses, or parts of houses, or their contents, were carried out, while, in addition, all infected articles of clothing, etc., were suitably dealt with.

Notifiable Diseases (other than Tuberculosis) during the Year 1926.

The following is a list, alphabetically arranged, of the diseases which were compulsorily notifiable in Hampstead during 1926:—

Anthrax	Ophthalmia Neonatorum
Cerebro-Spinal Meningitis, acute	Plague
Cholera	Pneumonia, acute influenzal or acute primary
Continued Fever	Polio-Encephalitis, acute
Diphtheria	Polio-Myelitis, acute
Dysentery	Puerperal Fever and Pyrexia
Encephalitis Lethargica, acute	Relapsing Fever
Enteric Fever	Scarlatina
Erysipelas	Scarlet Fever
Glanders	Small-pox
Hydrophobia	Trench Fever
Malaria	Tuberculosis, all forms
Measles	Typhoid Fever
Membranous Croup	Typhus Fever

No cases of the following notifiable diseases were reported during the year:—

Anthrax	Membranous Croup
Cholera	Plague
Continued Fever	Polio-Encephalitis, acute
Dysentery	Relapsing Fever
Glanders	Small-pox
Hydrophobia	Trench Fever
Malaria	Typhus Fever.

NOTIFIABLE DISEASES DURING THE YEAR 1926.

NOTIFIABLE DISEASES.	* Total cases notified in age-periods.												Total Cases Notified in each Ward.							Cases admitted to Hospital.	Total deaths in age-periods.																	
	At all Ages.	At Ages—Years.											Ward No. 1 (Town).	Ward No. 2 (Belsize).	Ward No. 3 (Adelaide).	Ward No. 4 (Central).	Ward No. 5 (West End).	Ward No. 6 (Kilburn).	Ward No. 7 (Priory).		At all Ages.	At Ages—Years.																
		Under 1.	1 and under 2.	2 and under 3.	3 and under 4.	4 and under 5.	5 and under 10.	10 and under 15.	15 and under 20.	20 and under 35.	35 and under 45.	45 and under 65.										65 and over.	Under 1.	1 and under 2.	2 and under 3.	3 and under 4.	4 and under 5.	5 and under 10.	10 and under 15.	15 and under 20.	20 and under 35.	35 and under 45.	45 and under 65.	65 and over.				
Cerebro-spinal Meningitis, acute	1	..	..	..	..	1	..	..	..	..	..	..	..	11	39	26	10	22	46	8	157	9	..	..	1	..	1	4	2	..	..	..	..	..	1	..	..
Diphtheria	162	3	3	9	9	12	54	38	11	21	1	1	1	..	1	1	1	1
Encephalitis Lethargica, acute	2	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	1	..	1	1	1	..	..	..	..	..	..	..	..	..	..	..	1	..	..
Enteric Fever (including Paratyphoid)	11	..	..	..	..	..	1	1	3	3	2	1	..	1	2	5	1	..	1	1	8	1	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..
Erysipelas	21	..	..	..	..	..	..	..	3	4	2	10	2	..	8	1	2	3	3	4	9	1	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..
+Measles	1617	49	118	105	149	179	801	109	37	56	12	2	..	272	271	181	95	227	392	179	69	9	2	5	2	1
Ophthalmia Neonatorum	5	5	1	..	2	1	..	1	..	4
Pneumonia acute-influenzal or acute primary	59	3	1	4	3	..	3	..	2	10	4	17	12	9	14	6	3	3	16	8	8	12	2	1	..	..	1	..	..	..	..	..	..	..	4	4	4
Polio Myelitis, acute	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..
Puerperal Fever	4	..	..	..	..	..	..	..	..	3	1	..	..	..	..	3	..	..	..	1	3	2	..	..	..	..	..	..	..	..	..	2	1	..	..	..	..
Scarlet Fever	107	..	1	7	8	3	45	19	9	10	4	1	..	19	25	6	9	17	24	7	91	1	1
Puerperal Pyrexia	7	7	2	4	1	4
	1997	60	123	125	169	194	905	167	65	115	27	33	14	313	359	230	122	275	488	210	355	37	4	6	3	..	1	7	2	..	2	2	6	5	5	5		

* Cancelled cases have not been included.

† Compulsorily notifiable in Hampstead under the Borough of Hampstead (Measles) Regulations, 1920.

Small-pox.

During the year no case of this disease has occurred in the Borough. There was, however, an outbreak of Small-pox in Willesden and Marylebone, both of which districts adjoin Hampstead. The infection was introduced from Paris, and the first case was diagnosed as chicken-pox,—the second case being infected from the first. Altogether four cases occurred in this connection, two of which died. There were very many contacts in Hampstead from these cases, and it was considered advisable that special precautions should be taken. Thus all medical practitioners were warned; all contacts were traced, as far as possible, and advised to be vaccinated (many of whom were so vaccinated); they were also kept under strict supervision, and their personal doctors warned that their patients were contacts; a supply of lymph was also obtained. During the whole of the period when it was possible for a case to have broken out in Hampstead, the Public Health Department was in every respect ready to deal with any outbreak which might have occurred, members of the department being on duty during evenings and the week end.

Vaccination.

Of the total births dealt with in 1926 by the Vaccination Officer, amounting to 1261, 671 were successfully vaccinated. In 8 cases the children were insusceptible of vaccination. In regard to 199, certificates of Conscientious Objection were obtained; 44 died before vaccination was performed; 11 cases of vaccination were postponed, and 328 remained to be dealt with.

I am indebted to the Vaccination Officer for these statistics.

Venereal Diseases.

Under the Public Health (Venereal Diseases) Regulations, 1916, the County Council is the Authority for London (excluding the City).

The scheme of the County Council has for its objects:—

- (i) The provision of facilities for diagnosis and treatment in voluntary hospitals and other institutions.
- (ii) The provision for doctors of laboratory facilities for aid in diagnosis and treatment; the supply to them of salvarsan or its substitutes; the provision of instruction for practitioners and students; and the co-ordination of the work of hospitals, public health services and practitioners.
- (iii) The publication and dissemination of information, and the giving of instruction on matters relating to venereal diseases and their treatment (publicity and propaganda work).

There is a Local Propaganda Committee associated with a Voluntary Body in the Borough.

Notices issued by the County Council, which indicate the Treatment Centres, are exhibited in suitable places in the Borough, especially in Public Conveniences; and information is also given at the Public Health Department, *under the strictest secrecy*, to persons of either sex who apply personally or by letter to the Medical Officer of Health. No record is kept of the reason for disinfection of bedding, clothes, &c., carried out in this connection, or of persons who ask for information, and all letters of inquiry are destroyed after having been answered in unofficial envelopes.

Tuberculosis.

Cases notified in 1926 :—

69 Pulmonary.

16 Non-pulmonary.

Number of cases in the Borough, 602.

The table that follows show the number and distribution of cases during the year :—

Tuberculosis Regulations, 1924.	Pulmonary.		Non-Pulmonary.	
	Males.	Females.	Males.	Females.
Number of cases on the Register at the commencement of the year 1926	279	271	91	86
Number of cases notified under the Regulations for the first time during the year ..	30	39	6	10
Number of cases brought under notice otherwise than by notification during the year	9	8	3	4
	318	318	100	100
*Number of cases removed from the Register during the year	105	82	28	19
Number of cases remaining on the Register at the end of the year	213	236	72	81

*These consist of 99 cases de-notified, and 135 dead or removed from the Borough.

Prior to the passing of the Tuberculosis Regulations, and the establishment of the Tuberculosis Dispensary, in fact, as far back as 1902, there had been a voluntary system for the control of Consumption in Hampstead, by which cases were notified and contacts examined.

Staff engaged on Tuberculosis Work.—The Borough Council staff specially engaged on work directly connected with Tuberculosis and the Dispensary consists of the following:—

1.—Administrative Tuberculosis Medical Officer: the Medical Officer of Health.

2.—Tuberculosis Medical Officer, a part-time Officer who acts as an Assistant to the Medical Officer of Health for tuberculosis work. This Officer is also Senior Hon. Physician at the Hampstead General Hospital and Physician at the Victoria Park Hospital. Suitable cases from the Borough admitted to these hospitals are thus kept under his observation.

3.—Tuberculosis Nurse, who attends at the Dispensary at all times when the Tuberculosis Medical Officer is present, and who visits cases.

4.—Clerk, who attends at the Dispensary for the purpose of compiling returns, keeping records, general clerical work, etc.

Cases are first notified to the Medical Officer of Health; they are then visited by the Tuberculosis Dispensary Nurse and informed of the Dispensary facilities and they are urged to attend, if suitable cases. Medical practitioners are invited to bring or send their cases to the Tuberculosis Medical Officer for consultation and advice, and the other members of the family are examined as "contacts." The figures relating to these are on page 107. "Contacts" are kept under supervision until it is definitely decided if they are tuberculous or not. Any cases where it is thought advisable for X-ray examination to take place are sent to the Hampstead General Hospital, where an arrangement exists for cases sent by the Borough Council to be X-rayed and reported upon. This facility was utilised in 49 instances during the year.

There are two extremely well-managed branches of Queen Victoria's Jubilee Nurses in the Borough. These can be relied on where nursing is needed for cases remaining at home.

Arrangements have been made with the Pathological Department of the Hampstead General Hospital whereby any medical practitioner

may send specimens of sputum for examination and report. This was utilised during 1926 on 141 occasions by local practitioners (exclusive of the Tuberculosis Medical Officer).

By arrangement with University College Hospital one case was given special Light treatment during 1926.

Dental treatment is available for tuberculous patients. It is given by an arrangement with the British Dental Hospital whereby patients attending the Dispensary and in need of dental aid may obtain treatment at that Hospital, 31, Camden Road, N.W., on Wednesdays at 9.30 a.m.

The following is a summary of the dental work in this connection during 1926 :—

Patients' Attendances	..	..	..	24
Number of Fillings	..	..	..	5
Number of Scalings	..	..	..	1
Extraction cases	Number of teeth extracted			.. 14
	With Gas			.. 2
	With Local Anæsthetic..			.. —
	Without Anæsthetic —
Number of Dentures (including repairs)	..	..	..	3
Number of Dressings and Root treatment	..	..	..	5
Number for Advice	..	..	..	4
Number of Denture visits	..	..	..	12
Number of New Patients	..	..	..	4

The tables that follow have been drawn out for the purpose of showing the after-history of the patients notified in the Borough during the years 1921 and 1922. Separate tables are given relating to patients who attended at the Municipal Tuberculosis Dispensary and those who did not so attend.

ANALYSIS OF DISPENSARY CASES OF PULMONARY TUBERCULOSIS NOTIFIED IN 1921.

	CLASSIFICATION.					Cases cancelled.	TOTAL.
	A 1 Early case, 1 lobe affected. Negative sputum.	A 2 Early case, 2 lobes affected. Negative sputum.	B 1 Moderately advanced case, 1 lobe affected. Positive sputum.	B 2 Moderately advanced case, 2 lobes affected. Positive sputum.	B 3 Advanced case.		
Cases attending at the Tuberculosis Dispensary for the first time in 1921 ...	15	3	3	15	14	2	52
Number known to be alive in December, 1926, and— ...	9	1	1	3	1	—	15
Percentage of original number	(60%)	(33%)	(33%)	(20%)	(7%)	—	(29%)
Number known to be dead in December, 1926, and— ...	1	1	1	8	9	—	20
Percentage of original number	(7%)	(33%)	(33%)	(53%)	(64%)	—	(38%)
*Number removed from the Borough (present condition unknown) and— ...	5	1	1	4	4	2	17
Percentage of original number	(33%)	(33%)	(33%)	(27%)	(29%)	—	(33%)

*Of the removed cases—7 of the 17 were located. 3 of these are known to be dead and 4 alive.

ANALYSIS OF DISPENSARY CASES OF PULMONARY TUBERCULOSIS NOTIFIED IN 1922.

	CLASSIFICATION.					Cases cancelled.	TOTAL.
	A 1 Early case, 1 lobe affected. Negative sputum.	A 2 Early case, 2 lobes affected. Negative sputum.	B 1 Moderately advanced case, 1 lobe affected. Positive sputum.	B 2 Moderately advanced case, 2 lobes affected. Positive sputum.	B 3 Advanced case.		
Cases attending at the Tuberculosis Dispensary for the first time in 1922 ...	8	2	6	22	13	—	51
Number known to be alive in December, 1926, and— ...	2	—	2	4	—	—	9
Percentage of original number	(25%)	—	(33%)	(18%)	—	—	(18%)
Number known to be dead in December, 1926, and— ...	—	—	—	9	10	—	19
Percentage of original number	—	—	—	(41%)	(77%)	—	(37%)
*Number removed from the Borough (present condition unknown), and— ...	6	2	4	9	3	—	23
Percentage of original number	(75%)	(100%)	(66%)	(41%)	(23%)	—	(45%)

*Of the removed cases—9 of the 23 were located. 5 of these are known to be dead and 4 alive.

ANALYSIS OF NEW CASES OF PULMONARY TUBERCULOSIS OCCURRING
IN 1921, WHO DID NOT ATTEND AT THE TUBERCULOSIS DISPENSARY.

Total number of Pulmonary cases who did not attend the Dispensary	.. .. .	51*
Number known to be alive December, 1926	..	5=10%
Number known to be dead December, 1926	..	25=50%
Number removed from the Borough (present condition unknown)	.. .. .	21=40%

ANALYSIS OF NEW CASES OF PULMONARY TUBERCULOSIS OCCURRING IN
1922 WHO DID NOT ATTEND AT THE TUBERCULOSIS DISPENSARY.

Total number of Pulmonary cases who did not attend the Dispensary	. . . . .	50†
Number known to be alive in December, 1926	..	12=24%
Number known to be dead in December, 1926	..	16=32%
Number removed from the Borough (present condition unknown	.. . . .	22=44%

These figures show, as far as it is possible to trace these people, that at the end of five years 60 % are dead.

The prognosis of pulmonary tuberculosis is obviously a bad one, and the question of further means of combating the disease must be diligently sought. Careful selection of cases for treatment in sanatoria is also very necessary, the "early" cases seem to be the only ones where a chance occurs of arresting this disease. On the subject of prognosis it is worth while drawing attention to our experience as regards tuberculosis in children under the age of 15 years. Several eminent clinicians and observers have stated that the majority of children have tuberculosis in some form or other in the early years of life, so that it is a fact worth noting that the prognosis of tuberculosis in early years is as favourable as it is adverse in middle life. The following figures will exemplify what I mean :—

During the past five years there have been 457 cases of pulmonary tuberculosis notified in Hampstead; only 8 of these were children under the age of 15 years, and 6 of these are alive. As regards non-pulmonary tuberculosis, 132 cases have been notified in the past five

* 50% of the whole of the pulmonary cases notified.

† 0% of the whole of the pulmonary cases notified.

years, of which 52 were children under 15 years of age; the parts affected were as follows :—

Bones.	Glands.	Spine.	Pleura.	Elbow.	Hip.	Leg.	Peritoneum.	Skin.	Meninges.
3	21	5	2	2	3	1	3	1	11

Of these 52 children the only ones who have died were the 11 cases of tuberculous meningitis: all the rest of the children are alive and doing well, and 4 cases have even been de-notified; so the position is that, with the exception of tuberculous meningitis, no death of a person under the age of 15 years has been registered as due to Non-pulmonary Tuberculosis for a period of 5 years, and only 2 deaths from Pulmonary Tuberculosis have occurred. Obviously the prognosis of Tuberculosis in childhood and early years is very good.

I am still of opinion that these children, combating Tuberculosis or having a tendency thereto, would be greatly helped in their efforts by a well-appointed open-air school, and, with the population crowded as I have never known it crowded before, the desirability of such an open-air school is greater than ever.

Notification and Deaths.

During the year 1926, 85 new cases of Tuberculosis were notified, 69 being cases of Pulmonary Tuberculosis, and 16 other forms of the disease.

The following statistical table, prescribed by the Ministry of Health, gives an analysis of the newly notified cases and deaths during 1926 :—

Tuberculosis, 1926.

	Total New Cases in age-periods notified for the first time in 1926.													Total New Cases Notified in each Ward.							Cases admitted to Hospital.	Total Deaths in age-periods of Old and New Cases.												
	At all Ages.	At Ages—Years.												Ward No. 1 (Town).	Ward No. 2 (Belaise).	Ward No. 3 (Adelaide).	Ward No. 4 (Central).	Ward No. 5 (West End).	Ward No. 6 (Kilburn).	Ward No. 7 (Priory).		At all Ages.	At Ages—Years.											
		Under 1. 1 and under 5.	5 and under 10.	10 and under 15.	15 and under 20.	20 and under 25.	25 and under 35.	35 and under 45.	45 and under 55.	55 and under 65.	65 and upwards.	Under 1. 1 and under 5.	5 and under 10.										10 and under 15.	15 and under 20.	20 and under 25.	25 and under 35.	35 and under 45.	45 and under 55.	55 and under 65.	65 and upwards.				
Pulmonary	M.	30	—	—	1	2	3	11	4	4	5	—	7	6	4	1	3	4	5	20	27	—	—	—	—	1	2	4	8	8	4	—		
	F.	39	—	—	—	3	7	15	8	4	2	—	1	11	5	2	8	9	3	31	24	—	—	—	—	1	4	6	6	3	2	2		
Non-Pulmonary	M.	6	3	—	1	—	2	—	—	—	—	—	—	1	—	—	1	3	1	4	4	—	1	—	—	—	—	—	1	—	1	1		
	F.	10	2	1	—	3	2	2	—	—	—	—	3	—	—	1	3	2	1	9	1	—	—	—	—	1	—	—	—	—	—	—		
Totals		85	5	1	2	8	14	28	12	8	7	—	11	18	9	4	15	18	10	64	56	—	1	—	—	2	7	10	15	11	7	3		

Of the new cases notified in 1926 :—

PULMONARY CASES.

8	were notified by Hospitals (Out-patients).
10	do. do. (In-patients).
40	do. private doctors.
9	do. Tuberculosis Medical Officer.
2	notified by Mental Institutions.

69

Since notification :—

24	are still attending the Dispensary (35 actually attended, but 5 have died and 6 removed)
7	are attending private doctors and are of a non-Dispensary type.
4	are receiving treatment from panel doctors.
8	are in-patients of Hospitals.
2	are in Mental Institutions.
13	have died.
11	have removed.

69

NON-PULMONARY CASES.

11	were notified by Hospitals (In-patients).
2	do. do. (Out-patients).
2	do. private doctors.
1	do. School Medical Officer.

16

Since notification :—

6	have attended the Tuberculosis Dispensary.
3	have died.
2	are attending Hospitals (Out-patient).
5	are In-patients of Hospitals.

16

Nearly half the number of notified cases actually attended the Dispensary, while others were dealt with by the Tuberculosis Medical Officer elsewhere.

The deaths of non-notified cases of Tuberculosis numbered 9, and the total tuberculosis deaths 56 ; the ratio of non-notified tuberculosis deaths to total tuberculosis deaths being 1 in 6.

Closely akin to non-notified fatal cases is the question of those patients who are not notified until they reach a very advanced stage of the disease. This unfortunate aspect of what must in some cases be "late" notification is indicated by the following table :—

	1922.	1923.	1924.	1925.	1926.
Total deaths, all forms of Tuberculosis ..	71	58	70	60	56
No. dying unnotified ..	16	6	8	12	9
No. notified within one month of death ..	9	5	9	14	7
No. notified within three months of death ..	7	6	7	6	4
No. notified within six months of death ..	1	4	4	3	5
Percentage of cases dying within three months of notification (including also those dying unnotified)	45%	29%	34%	53%	35%

(An average for the past five years of 40%.)

I regard this as an unnecessarily high percentage, and would urge upon the medical practitioners freely to use the Tuberculosis Dispensary for the purposes of diagnosis in obscure cases.

If there is in any case a strong objection on the part of the patient to be notified, I should be very grateful if the medical men would communicate with me. I am aware that sometimes patients consider their position to have been prejudiced by notification ; but every effort is made to prevent such taking place, and a hint from the notifying practitioner will greatly help our efforts.

The number of cases notified in recent years is as follows :—

Year.	Persons newly notified.		Total.
	Pulmonary Tuberculosis (Voluntarily notifiable 1902; Compulsorily notifiable 1912).	Non-Pulmonary Tuberculosis (Compulsorily notifiable from 1st February, 1913).	
1921	103	55	158
1922	101	34	135
1923	88	36	124
1924	100	25	125
1925	99	14	113
1926	69	16	85

At the present time 55 discharged soldiers in receipt of a pension for tuberculosis are resident in Hampstead. The number of cases of tuberculosis known to the Department at the end of 1926 totals 602—449 pulmonary and 153 non-pulmonary.

Occupations.

The following is an analysis of the occupations of the new cases notified as tuberculous during 1926 :—

Occupation.	Pulmonary Cases.	Non-Pulmonary Cases.	Occupation.	Pulmonary Cases.	Non-Pulmonary Cases.
Actress ...	1	—	Merchants ...	1	1
Civil Servants ...	3	—	Motor Engineers ...	4	—
Chauffeurs ...	2	—	No occupation ...	3	3
Clerks ...	7	—	Needlewoman ...	1	—
Church Army Cadet ...	1	—	Printer ...	—	1
Cabinet maker ...	1	—	School ...	2	5
Caretaker ...	1	—	Shop Assistants ...	1	2
Dispenser ...	1	—	Solicitor ...	1	—
Domestics ...	9	2	Signalman ...	1	—
Errand Boy ...	1	—	Students ...	2	—
Fruiterer ...	1	—	Tailor ...	1	—
Factory hand ...	1	—	Travellers ...	3	—
Hairdresser ...	1	—			
Housewives ...	17	2		69	16
Journalist ...	1	—			
Land Girl ...	1	—			

Of the 69 cases of Pulmonary Tuberculosis newly notified in 1926 :—

27 were treated at Sanatoria.

9 „ Poor Law Institutions.

12 „ Hospitals.

Of the 16 cases of Non-pulmonary Tuberculosis newly notified in 1926 :—

1 was treated at Poor Law Institution.

12 were treated at Hospitals.

The following cases, notified prior to 1926, were also removed :—

	Pulmonary.		Non-Pulmonary.	
	Insured.	Non-Insured.	Insured.	Non-Insured.
To Sanatoria	12	9	—	—
To Hospitals	4	1	1	—
To Poor Law Institutions ..	2	—	—	—

Deaths from Tuberculosis.

The number of deaths from Tuberculosis in 1926 was 56. Of these, 51 were due to Pulmonary Tuberculosis and 5 to other forms of Tuberculosis.

The deaths from Pulmonary Tuberculosis and from all forms of Tuberculosis during 1926 were distributed among the Wards as follows :—

Ward.	Area (Acres).	Deaths from Pulmonary Tuberculosis.	Deaths from other Forms of Tuberculosis.	Total deaths from All Forms of Tuberculosis.
No. 1 (Town)	686	5	2	7
„ 2 (Belsize)	271	10	1	11
„ 3 (Adelaide)	325	1	—	1
„ 4 (Central)	312	5	—	5
„ 5 (West End)	247	12	1	13
„ 6 (Kilburn)	195	17	1	18
„ 7 (Priory)	229	1	—	1
The Borough	2,265	51	5	56

Deaths from Pulmonary Tuberculosis in Age Groups.

The following table shows the age distribution of persons dying from Pulmonary Tuberculosis in the last five years :—

Year.	Age Period.					All Ages.
	0—5	5—15	15—25	25—65	65—	
1922	—	1	10	37	2	50
1923	—	—	6	45	—	51
1924	—	1	9	46	2	58
1925	—	—	6	43	3	52
1926	—	—	8	41	2	51

Deaths from Non-Pulmonary Tuberculosis in recent years are as follows :—

Year.	No.	Year.	No.
1913..	.. 12	1920..	.. 14
1914..	.. 14	1921..	.. 8
1915..	.. 23	1922..	.. 19
1916..	.. 25	1923..	.. 7
1917..	.. 16	1924..	.. 12
1918..	.. 14	1925..	.. 8
1919..	.. 16	1926..	.. 5

Deaths from Non-Pulmonary Tuberculosis in Age Groups.

The age distribution of persons dying from Non-Pulmonary Tuberculosis in 1926 is as follows :—

1—2 years, 1 ; 15—25 years, 1 ; 25—45 years, 1 ; 45—65 years, 1 ; 65—75 years, 1.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

These Regulations provide that no person suffering from tuberculosis of the respiratory tract shall enter upon any employment or occupation in connection with a dairy which would involve the milking of cows, the treatment of milk, or the handling of vessels used for containing milk; and if a local authority, on the report of their Medical Officer of Health, is satisfied that a person residing in their district who is engaged in any such occupation is so suffering and is in an infectious state, they may require such person to discontinue his occupation.

No case arose during the year in which action was taken under the Regulations.

Separate Beds and Shelter for Tuberculous Patients.

The Borough Council will supply a shelter to any suitable case where there is accommodation for the erection of such. A shelter was supplied to one case in 1926.

In pursuance of the authority contained in the Public Health (Prevention and Treatment of Disease) Act, 1913, the Borough Council also supply on loan single beds and bedding in order to effect the separation of infectious cases of tuberculosis. The usual practice is to arrange for the double bed previously used to be sold, and a single bed to be provided in lieu thereof. Thus, by the Council loaning separate beds, two single beds are provided instead of one double bed. The Council have purchased and loan out six beds and sets of bedding.

Tuberculosis Care Committee.

The following form the Committee :—

- 6 members of the Borough Council,
- 5 members of the Hampstead Council of Social Welfare,
- 2 members representing the London County Council,
- 2 members representing the Board of Guardians,
- 1 member representing the London Insurance Committee,
- 2 members representing the Invalid Children's Aid Association,

1 member representing the Local War Pensions Committee,
 1 member representing the United Services Fund,
 The Medical Officer of Health,
 The Tuberculosis Medical Officer,
 The Tuberculosis Health Visitor.

The Care Committee is required to furnish to the Borough Council quarterly reports (or more often if required), including statistics and statements of cases helped, &c., and as to attendances of such of its members as are Councillors.

All particulars as regards care and after-care, arrangements for finding employment for patients, and provision of extra nourishment for patients living at home are referred to this Committee. They are also responsible for assessing cases that go into sanatorium.

This Committee dealt with 183 cases during 1926.

Section 7.

Maternity and Child Welfare.

**General arrangements made for attending to the Health of
 expectant and nursing mothers and children under
 five years of age.**

HEALTH VISITORS AND VISITING.

The Council employs three Health Visitors; the Borough being divided between them. These Officers attend at the Infant Welfare Centres, which are organised and controlled by the Hampstead Council of Social Welfare; and endeavour to see that the advice there given is carried out in the home. They also attend at the Borough Council's Pre-Maternity Clinics and Dental Clinic.

The following table gives a record of the work of the Health Visitors in 1926 :—

Number of first visits to expectant mothers	..	..	152
„ re-visits „ „	..	..	119
„ infants under one year visited for the first time			784
„ re-visits to infants under one year	..		1708
„ visits to children over one year	..	..	2329
„ visits <i>re</i> deaths of infants under two years of age	..	..	76
„ „ still-births	..	..	33
„ „ maternal deaths	..	..	1
„ „ infectious disease	..	..	994
„ „ verminous conditions	..	..	7
„ attendances at Borough Council's Pre-Maternity Clinics			149
„ „ „ „ Dental Clinic			51
„ „ Council of Social Welfare Infant Welfare Centres	..	..	290
„ complaints investigated	..	..	8
„ applicants for assistance visited	..	..	215
„ unclassified visits	..	..	62
Total	..	..	6978

In Hampstead, all notifications of births are carefully scrutinised, and those thought suitable for visiting are given to the Health Visitors, who call at the homes at some time between a fortnight and a month after the birth has occurred. Approximately one-half of the total births are thus passed to the Health Visitors, the other half being considered outside the scope of our facilities for sundry reasons, chiefly economic.

As a result of many years' experience it has been found that of the births thus visited, only about one-half, or 25 per cent. of the total number are suitable for "following up."

Those in this final percentage are entered on lists for the Health Visitors, who call again at least twice before the expiration of the first four months, thus making three visits within the first four months to each baby suitable for visiting. Another visit is paid as soon as the child is 6 months old, and another at, or just after, 12 months. From thence onwards, the question of "following up" is left largely to the discretion of the Health Visitors.

Careful consideration has been given to the border-line cases, those cases where it is not easy to decide whether or not a visit is desirable. These consist chiefly of the type of those formerly found upon a first visit not to require any help from the Public Health Authority. It was felt that these visits represented a loss of valuable energy and time, and during the year an experiment was tried by instituting the practice of sending a letter to these cases, thus effecting a saving in the time of the Health Visitors, which can be more profitably utilised in other directions.

The letter is in the following terms:—

“ Dear Madam,

The birth of your baby has been notified to me.

If at any time you should need help or advice and will let me know, one of the Council's Health Visitors shall visit you and offer you any assistance that the Health Department is able to give.

You are cordially invited to take your baby to a Weighing Centre later on, and the day and time is shown on the enclosed card.

Some of the common troubles that beset childhood are dealt with in the enclosed ‘Health Hints’ leaflet. If you keep it by you it may be useful for reference.

Yours faithfully,

FRANK E. SCRASE,

Medical Officer of Health.”

The booklet entitled “How to rear a Baby,” is also sent with the letter.

The total number of Hampstead births was 1,077, and they took place as follows:—

Queen Mary's Maternity Home	..	42 or 4 per cent.
Nursing Homes .. ..	..	134 „ 12 „
Hospitals .. ..	..	253 „ 23 „
Usual place of residence ..	..	620 „ 58 „
Other addresses .. ..	..	28 „ 3 „

Considerable attention has been paid during the year to the housing conditions of the families in which a birth has occurred at home, and the table that follows is compiled from the Health Visitors' records. It is an analysis of 407 instances where the births occurred at home which were visited, and where the information was obtainable when the Health Visitor called.

No. of persons in family.	No. of families occupying the following number of rooms.						
	1 room.	2 rooms.	3 rooms.	4 rooms.	5 rooms.	6 rooms.	7 rooms.
2	1	—	—	—	—	—	—
3	20	45	52	11	2	—	—
4	11	47	35	10	3	1	—
5	7	23	20	8	4	1	—
6	3	20	16	8	4	—	1
7	—	3	10	4	2	2	—
8	—	9	7	—	—	1	—
9	—	3	3	—	1	1	—
10	—	—	5	—	—	—	—
11	—	—	2	—	—	—	—
12	—	—	1	—	—	—	—
or over							
Totals	42	150	151	41	16	6	1

The newly-born baby has *not* been included in the above.

Of these 407 births:—

10·3 per cent. occurred in 1-roomed tenements.

36·9 „ „ 2 „

37·1 „ „ 3 „

The table is designed to show some of the housing conditions in homes where babies are born. It demonstrates that of 407 babies, 42 were born in one-roomed tenements and 150 in two-roomed tenements. The number of people in one or two-roomed tenements is deplorably high; thus in three one-roomed tenements where six persons were already living, a baby was born; in seven cases a birth occurred in the one-roomed home where five people were already living; in 11 instances of one-roomed tenements, the newly born baby became the fifth occupant of the room. With regard to two-roomed homes, in three instances nine persons were already inhabiting the rooms prior to the birth of the baby; in nine cases the baby's advent raised the number of occupants to nine. For the purposes of the table, kitchens have been included, but not sculleries, bathrooms, &c.

MIDWIVES AND NURSES.

The Supervising Authority for Midwives is the London County Council.

The Borough Council has made arrangements with both the Nursing Associations, whereby the services of Midwives, Maternity Nurses and Nurses are available. Full details of these facilities are set out in Section 2 of this Report.

ATTENDANCE UPON PARTURIENT WOMEN.

By the Midwives and Maternity Homes Act, 1926, an amendment was made of the Midwives Act, 1902, and another step forward has been made with regard to the position of attendance at confinements. Thus section 1 states as follows :—

“If any person, being either a male person, or a woman not certified under this Act, attends a woman in child birth—otherwise than under the direction and personal supervision of a duly qualified medical practitioner, that person shall, unless he or she satisfies the Court that the attention was given in a case of sudden or urgent necessity, be liable on summary conviction to a fine not exceeding ten pounds :

Provided that the provisions of this sub-section shall not apply in the case of a person who, while undergoing training with a view to becoming a duly qualified medical practitioner or a certified midwife, attends a woman in child-birth as part of a course of practical instruction in midwifery recognised by the General Medical Council or by the Central Midwives Board.”

This amendment to the Midwives Act is for the purpose of securing that uncertified women (save in cases of sudden or urgent necessity) shall not be allowed to attend women in child-birth otherwise than under the direction and personal supervision of a qualified medical practitioner. Hitherto it has only been forbidden for an uncertified woman so to attend women in child-birth “habitually and for gain.”

CONSULTATION AND TREATMENT CENTRES.

The Council has established Pre-Maternity Clinics, which are in charge of a part-time lady doctor. The details of these Clinics are set out in Section 2.

Dental Clinics for expectant and nursing mothers, and children under five years of age, exist in the eastern and western districts of the Borough—one established by the Borough Council and one by the Hampstead Council of Social Welfare. A reference to these Clinics

will be found in Section 2. The following is a summary of the work carried out at the Council's Clinic during 1926 :—

Number of Sessions held	..	..	..	49
Patients' Attendances	..	..	..	280
Number of Fillings	..	..	..	27
Number of Scalings	..	..	..	22
Extraction cases	Total Number of teeth extracted			315
	Gas Administrations			55
	Local Administrations			23
	Without Anæsthetic			1
Number of Dentures (including repairs)	..	..	..	21
Number of Dressings and Root treatment	..	..	..	16
Number for Advice	..	..	..	32
Number of Denture visits	..	..	..	70
Number of New Patients	..	..	..	91

MATERNITY HOMES AND HOSPITALS AND OTHER INSTITUTIONS FOR THE
RECEPTION OF EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN
AS IN-PATIENTS.

Registration of Maternity Homes.—Section 5 of the Midwives and Maternity Homes Act, 1926, deals with the important question of the registration of maternity homes, and prescribes heavy penalties against any person who, on or after the appointed day, carries on a maternity home within the meaning of the Act without being registered. The expression "maternity home" is defined as meaning "any premises used or intended to be used for the reception of pregnant women or of women immediately after child-birth, but shall not include any hospital or other premises maintained or controlled by a Government Department or Local Authority, or by any other body of persons constituted by special Act of Parliament or incorporated by Royal Charter." A local supervising authority may exempt from the necessity of registration, &c.—

- (a) Any hospital or other premises for the conduct of which a duly qualified medical practitioner resident therein is responsible; or
- (b) Any hospital or institution not carried on for profit and not used mainly as a maternity home.

The local supervising authority may refuse to register an applicant if they are satisfied—

- (a) That the applicant or any person employed by the applicant at the home is not a fit person, whether by reason of age or otherwise, to carry on or to be employed at a maternity home; or

- (b) That for reasons connected with situation, construction, accommodation, staffing or equipment, the home or any premises used in connection therewith are not fit to be used for a maternity home, or that the home or the premises are used or to be used for purposes which are in any way improper or undesirable in the case of a maternity home.

In London, the London County Council is constituted the Local Supervising Authority, and this appears to me to be a matter for regret, because, while the whole service arising out of the Notification of Births Act and the Maternity and Child Welfare Act is entirely in the hands of Borough Councils, those Councils have no part in this and such other ancillary work as the inspection of boarded-out children, and lying-in homes, or the supervision of midwives—all of which is in the hands of the County Council.

Maternity Homes and Hospitals.—The Borough Council subscribes £1 for every Hampstead mother confined in Queen Charlotte's Hospital; and receives a hospital letter for every £6 so subscribed. This arrangement has been in operation since 1919. During 1926, 101 women from the Borough were thus accommodated, in pursuance of this agreement.

New End Hospital.—The Borough Council have made an arrangement with the Guardians whereby a Ward is reserved for Council patients. The Ward contains five beds, which are available for married women only. During the year the number of patients who occupied these beds was 43. The general run of the patients up to now has been of a lower social scale than was at first anticipated. Of the 43 cases admitted, 32 paid £1 11s. 6d., 10 paid £2 2s. 0d., and 1 paid £3 3s. 0d.

In the original scheme at the beginning of 1925, it was estimated that 78 was the approximate number of patients per annum who would use these beds and each contribute £2 2s. 0d. per week. The actual number during last year was 43, and their average payment was £1 19s. 6d. per week.

The patients, who are admitted without the intervention of the Relieving Officer, receive treatment from the Medical Superintendent of the Hospital, and contribute to the cost of their treatment according

to the assessment of the Sub-Committee of the Maternity and Child Welfare Committee. The Council makes a payment of £2 15s. 0d. per week for each bed occupied, or a proportionate amount for a shorter period.

The following scale of charges for a maternity bed in New End Hospital under this Scheme was approved by the Council.

Amount of NET income of husband and wife (arrived at after deducting rent, insurances and 10/6 for each child under 14 years of age).							Charge per week to the patients.			
Under £2 weekly—to be fixed by Committee.										
	£	s.	d.	£	s.	d.		£	s.	d.
Between 2	0	0	and 2	10	0	..	..	1	11	6
„	2	10	0	„	3	0	0	2	2	0
„	3	0	0	„	3	10	0	2	12	6
„	3	10	0	„	4	0	0	3	3	0

It was agreed that in those cases where the charge is fixed by the Committee, the minimum amount should be £1 11s. 6d. per week, except in very special cases.

The above charges are based on the assumption that applicants will receive one Maternity Benefit. The charges are increased by 10s. 6d. per week if both husband and wife are eligible for Maternity Benefit, and decreased by 10s. 6d. per week if neither husband nor wife are eligible for Maternity Benefit.

The scheme was limited to families whose net income, calculated in accordance with the above scale, did not exceed £4 per week.

Queen Mary's Maternity Home, Heath Street.—This home, situated near the summit of the Heath, is available for the wives of ex-service men. The Council does not make a grant to the home. During the year, 41 Hampstead mothers were confined there.

Care of Children whose Mothers are in Maternity Hospitals.—The question of the care of children under five years of age whose mothers have been admitted into hospital for their confinements was considered by the Maternity and Child Welfare Committee during the year, and upon their recommendation the Council entered into an arrangement with the Beauchamp Lodge Emergency Home for Children, 2, Warwick Crescent, Paddington, for the boarding-out of such children at a charge of 12s. 6d. per week per child. The parents are assessed to pay a portion of the cost according to their means.

This facility has been used on one occasion only during 1926.

*Other Institutions.**St. Mary's Convalescent Home, Birchington-on-Sea.*

The Borough Council retains one bed in this Home in return for an annual subscription of £40. The customary charge is 5s. per week for mother only, and 10s. per week for mother and baby. During the year 10 mothers with their babies and one mother alone stayed at the Home.

Foster Home.

During 1926 this Institution secured a commodious house, No. 99, Haverstock Hill, and the removal took place in January, 1927. The Home is controlled by a voluntary committee, and has accommodation for 24 infants of unmarried mothers. The Home is a great improvement on the old one in Stanley Gardens. The Council makes a grant in aid to the Home.

The Cross Roads Club, 88, Alexandra Road.

This Club undertakes to receive unmarried expectant mothers prior to their confinements, and also arranges for their immediate future. The Club is managed by a voluntary committee. The Council does not make a grant towards its expenses.

The Hampstead Ruri-decanal Rescue Association is shortly re-establishing its Home in the Borough.

Northcourt Hospital, College Crescent.

The Borough Council has an agreement with this hospital whereby sick and ailing children, and children needing minor operations such as circumcision, removal of tonsils and adenoids, etc., are admitted. The Council guarantees the hospital 17s. 6d. per case per week, and assesses the parents according to their means. Under these conditions 33 cases were admitted during the year.

Publicity of Facilities.

The Maternity and Child Welfare Committee agreed to co-operate with the Public Libraries Committee in the distribution of a book-mark at the Borough Council Libraries. To advertise the various health facilities existing for the help of citizens, the Public Health Department used one side of the book-mark, as follows:—

“BOROUGH OF HAMPSTEAD.

The following health facilities exist for the help of citizens of the Borough:—

Pre-Maternity Clinics.

Dental Clinics for Expectant and Nursing Mothers, and
Children under five years of age.

Maternity Beds.

Infant Welfare Centres.

Children's Hospitals and Homes.

Invalid Children's Homes and Country Cottages.

Mothers' Convalescent Home.

Home for Unmarried Mothers.

Foster Home for Children of Unmarried Mothers.

Crèches and Day Nurseries.

Union Jack Club Nursery School.

Jubilee Nurses (including Certified Midwives and Maternity
Nurses).

Disinfection after illnesses; including the destruction of bed-
ding, clothes, &c.

Information concerning any of the above, or copies of leaflets
on the following subjects:—

Advice to Expectant Mothers,

How to Rear a Baby,

Health Hints and Information concerning the Common
Infectious Diseases of Young Children,

Tuberculosis,

Cancer,

may be obtained from Dr. Frank E. Scrase, Medical Officer of
Health, Public Health Department, Town Hall, Haverstock Hill,
N.W.3."

Maternal Mortality and Investigations into Maternal Deaths, Still-births and Infant Deaths.

It is the duty of the Health Visitors to inquire into and report to
me upon all maternal deaths, still-births, deaths of children under *two*
years of age, and cases of puerperal sepsis.

A Special Sub-Committee, consisting of Dr. C. J. R. MacFadden
(Chairman), Dr. Sidney Boyd, Dr. Mary B. Douie, Dr. W. S. George,
and Mr. T. Hancock Nunn, has been appointed to go into the details
of each case so reported upon.

The Health Visitors are present at the meetings of this sub-com-
mittee, so that they are able to answer any questions with regard to the
cases and other matters under discussion.

Work of the Special Sub-Committee.

During 1926 the Committee has considered severally and in detail the following :—

75 Deaths of infants under 2 years of age.

39 Still-births.

3 Maternal deaths.

3 Cases of Puerperal Fever.

7 Cases of Puerperal Pyrexia.

The 75 deaths of infants under 2 years of age in 1926 were certified to be due to the following causes :—

	Cause of Death.				No. of Deaths.
Prematurity	17
Measles..	7
Marasmus	7
Gastro Enteritis	4
Hæmorrhage from untied umbilical cord	4
Broncho Pneumonia	4
Acute Lobar Pneumonia	3
Congenital Syphilis	3
Cardiac failure	2
Debility from birth..	2
Infantile Convulsions	2
Bronchitis	2
Difficult birth	1
Asphyxia, strangled by tape around neck and accelerated by hæmorrhage from untied umbilical cord	1
Inherent deficient vitality	1
Congenital weakness and Diarrhœa, following upon chronic constipation	1
Ophthalmia Neonatorum	1
Congestion of Lung	1
Congenital Pyloric Stenosis	1
Mongolism	1
Gastric hæmorrhage	1
Exhaustion and wasting, accelerated by lowered vitality from septic umbilicus	1
Asphyxia, when under bed clothes in cot, and with an enlarged thymus gland	1
Carried forward					68

Cause of Death.			No. of Deaths.
Brought forward			68
Tubercular Meningitis	..	..	1
Pyelitis	..	..	1
Oedema of lungs	..	..	1
Congenital Atelectasis	..	..	1
Suppurating nævus of neck	..	..	1
Partial asphyxia and cardiac failure	..	..	1
Congenital heart disease	..	..	1
Total			75

Of this number, 55 were legitimate infants and 20 were illegitimate.

The Sub-Committee came to the following conclusions :—

That in 58 cases no further steps could have been taken.

That in 6 instances the cases were not within the scope of the Borough Council's facilities.

That in 1 case the child was not sufficiently under supervision.

That in 1 case had the Borough Council's facilities been utilised, the death might have been avoided.

And the Sub-Committee also gave the following instructions :—

In 3 cases that the certifying doctors be reminded of the Borough Council's facilities.

In 1 case the certifying doctor be communicated with respecting the cause of death.

In 1 case that the Rescue Society be communicated with.

In 1 case that inquiries be made at the Crèche where the child attended.

In 1 case that the mother be advised to attend at a venereal diseases clinic.

In 2 cases that the mothers be urged to attend the Borough Council's Pre-Maternity Centres in future pregnancies.

In 9 of the 75 deaths the family lived in a 1-roomed tenement, and in 3 of these instances the infant died at home.

Still-Births.

The probable causes of the 39 still-births which were investigated by the Special Sub-Committee were obtained from the medical practitioners or midwives in attendance. A special letter was sent asking for this information in the case of each still-birth which was known to

have occurred, and I am again pleased to place upon record the great help so willingly given in answering my letters.

From the information so obtained the still-births were attributed to the following reasons :—

Difficult labour	..	..	..	10
Prolonged labour	..	..	..	2
Breech presentation	..	..	..	3
Mal-presentation	..	..	..	5
Inattention during labour	..	..	..	1
Dead infant or macerated foetus	..	..	..	11
Complications of cord (prolapse, around neck, around wrist)	..	..	..	3
Premature detachment of placenta	..	..	..	2
Albuminuria hydramnios	..	..	..	1
Monster	..	..	..	1

All the reports so submitted to me have been placed before the Special Sub-Committee.

It will be seen that of these cases of still-birth no less than 20 shown in the first four items of the above list were due to the difficulties of actual labour itself, and were cases in which the services of the consulting obstetricians might have been advantageously utilised.

Maternal Deaths.

Three maternal deaths occurred in the Borough during the year. These maternal deaths were due to the following causes :—

Married woman, aged 24 years. Confined in hospital, and died there on 24th May, 1926, from "Septicæmia and Cerebral Embolism." Notified as case of Puerperal Fever on 30th April, 1926. Child was born in hospital on 26th April, 1926, but lived only for a few hours.

Single woman, aged 32 years. Confined in London Lock Hospital and died there on 2nd August, 1926, from "Puerperal Septicæmia, following induction for contracted pelvis, 17 days. P.M." Notified as case of Puerperal Fever on 21st July, 1926.

Married woman, aged 31 years. Died in hospital on 18th October, 1926, from "Heart failure and prolonged labour. Exhaustion. P.M." Baby still-born on 17th October, 1926.

None of these cases had previously attended the Borough Council's Pre-Maternity Clinics.

Of the 3 maternal deaths during 1926, two were attributed to Puerperal Sepsis, an improvement on former years. Although only 3 deaths may be regarded as a fairly low figure, it would have been much more satisfactory to have been able to have reported that no death was due to this cause.

The problem of the persistency of the mortality rate in connection with pregnancy and child-birth in this country has been the subject of much discussion and consideration in recent years.

The principal lines of preventive action which seem to be worthy of following up are, the placing of specialists at the disposal of the general practitioners, the provision of hospital beds where necessary, the improvement of the midwifery service, and the development of the ante-natal clinic, with the object of seeing that abnormalities are ascertained and adequately provided for.

In Hampstead, endeavours have been made along all these lines. Specialists of high standing are available for general practitioners; hospital accommodation is provided where the specialist and the practitioner may follow-up their patients; the midwives and the midwifery service in the Borough is effectively controlled, and is improving as time goes by; while at the present time nearly one-quarter of the expectant mothers attend the ante-natal clinics.

With regard to the 3 deaths that occurred in 1926, in one case the mother had not resided in the Borough for many months, having passed from one institution to another, but as her last home address was in Hampstead, the death was allocated to Hampstead in accordance with the rules of the Registrar-General. In the other two cases the patients were removed to hospital, and died there.

Consulting Obstetricians.—The scheme which the Council inaugurated, whereby the services of obstetricians of definite consulting status were made available in cases of difficulty or abnormality, has been in operation since May, 1926.

The terms of the scheme are as follows :—

- (a) That the patient be a Hampstead citizen.
- (b) That the medical practitioner immediately inform the Medical Officer of Health that he has called in the services of one of the Consulting Obstetricians, giving the name and address of the patient, date of the call, the reason, and the result.

- (c) That the Borough Council be responsible to the Consulting Obstetrician for a fee of £5 5s. 0d. per case.

The scheme is intended to apply to those people who cannot afford the consultant's ordinary fee, and is not to be confused with the London County Council's scheme, whereby a midwife can summon a general practitioner to her aid.

The Borough Council reserved to itself the right to ask the patient to contribute a portion, or the whole, of the fee, if in the subsequent investigation it was found that the patient was capable of so doing.

The following is a list, approved by the Council, of contributions to be paid by patients. This is varied according to the net income of the applicants : —

Amount of net income of husband and wife, which is arrived at after deducting rent, insurance and 10/6 for each child.										Charge to Applicant in respect of services of Consulting Obstetricians.		
Under £2 weekly										No charge.		
	£	s.	d.		£	s.	d.			£	s.	d.
Between	2	0	0	and	2	10	0	..	..	1	1	0
„	2	10	0	„	3	0	0	..	..	2	2	0
„	3	0	0	„	3	10	0	..	..	3	3	0
„	3	10	0	„	4	0	0	..	..	4	4	0
„	4	0	0	„	over			..	..	5	5	0

During the period May to December consultants were called in to three cases for diagnosis, and to two cases for difficult labour. In each case the patient recovered without mishap.

Pre-Maternity Clinics.

The Pre-Maternity Clinics have always been entirely municipal undertakings, staffed by a lady Doctor, who is a part-time officer, and Health Visitors.

During the year the total number of new cases seen was 308, the clinics being open on 152 occasions.

Hampstead Clinic.

Held at 27, Pond Street on Thursdays, at 2.30 p.m.

Number of occasions on which Clinic open	..	..	52
Number of new cases seen	..	..	105
Total number of attendances during the year	..	..	484

Kilburn Clinic.

Held at 73, Dynham Road on Mondays, at 2.30 p.m., and on Thursdays, at 10 a.m.

Mondays.

Number of occasions on which Clinic was open	..	48
Number of new cases seen	..	119
Total number of attendances during the year	..	471

Thursdays.

Number of occasions on which Clinic was open	..	52
Number of new cases seen	..	84
Total number of attendances during the year	..	411

Midwifery Service.

The Borough Council gives financial aid to the two Nursing Associations for their provision of maternity nurses and midwives.

During the year the Nursing Associations' Maternity Nurses and their Midwives have attended the following cases:—

Cases attended by:—

Maternity Nurses	..	..	..	109
Midwives	..	..	..	113

Methods of dealing with Unmarried Mothers and Illegitimate Children, and with Children permanently or temporarily deprived of a home with their own parents.

The Borough Council has made no direct arrangements for dealing with these matters. They make a grant to the Foster Home, 99, Haverstock Hill.

The Cross Roads Club, at 88, Alexandra Road, receives expectant mothers prior to their admission to maternity beds, and gives them a helping hand afterwards.

Further details with regard to these homes are given earlier in this Section.

Arrangements for the supply of Food and Milk.

Food is supplied to expectant and nursing mothers during the last three months of pregnancy, and milk is supplied to them, and to children up to three years of age.

The number of expectant and nursing mothers to whom food and milk has been supplied has varied during the year from 17 to 42 at any one time.

The number of families in which children have been given milk has similarly varied from 35 to 47.

The total amount thus spent on Food in 1926 was £111 16s. 8d., and on Milk £366 16s. 4d.

The milk and food is granted, either free or at half cost, where the incomes fall below the undermentioned standard which was adopted by the Council on 23rd July, 1925:—

SCALE OF INCOME (after deduction of rent).

Number of persons in family.	FREE MILK.			ASSISTED (half-price) MILK.		
	Scale per head.		Scale per family.	Scale per head.		Scale per family.
	s.	d.	£ s. d.	s.	d.	£ s. d.
1	13	0	0 13 0	15	0	0 15 0
2	10	6	1 1 0	12	6	1 5 0
3	8	6	1 5 6	10	0	1 10 0
4	7	6	1 10 0	8	6	1 14 0
5	7	0	1 15 0	8	0	2 0 0
6	6	6	1 19 0	7	6	2 5 0
7	6	6	2 5 6	7	6	2 12 6
8	6	6	2 12 0	7	6	3 0 0
9	6	6	2 18 6	7	6	3 7 6
10	6	6	3 5 0	7	6	3 15 0
11	6	6	3 11 6	7	6	4 2 6
12	6	6	3 18 0	7	6	4 10 0

The assistance given is one pint of milk daily, 2 lbs. quaker oats and $\frac{1}{2}$ lb. cocoa weekly to expectant or nursing mothers, and one pint of milk daily to children up to three years of age.

Widows', Orphans', &c., Act, 1925.

The Widows', Orphans', and Old Age Contributory Pensions Act, 1925, section 6 (2), provides that, in certain circumstances (*e.g.*, desertion or abandonment of a child) and in respect of an orphan's pension, the Minister of Health may direct that the allowance or pension shall be paid to the Local Authority for the benefit of the child. In London the County Council is the Local Authority, but, upon their inquiring whether the Council was prepared to carry out in Hampstead the whole of the powers and duties of the County Council under Section 6, the Borough Council agreed to do so.

During 1926 no cases were referred to the Borough Council.

"Light" Treatment.

The negotiations with the Hampstead General and North-West London Hospital for providing artificial sunlight treatment for Hampstead children were concluded during the year. On 11th June the Minister of Health informed the Council that he would be prepared to approve the proposal for artificial sunlight treatment of children under 5 years of age, provided it be confined to cases of children attending Infant Welfare Centres in the Borough or recommended for treatment either by the Medical Officer of Health or the Medical Officer of the Centre concerned. The fees to be paid to the Hospital were subsequently agreed upon as follows :—

3s. 6d.	per visit if one child attends.
2s. 0d.	per child per visit if two children attend.
1s. 6d.	„ „ three „
1s. 0d.	„ „ four or more children attend.

It was estimated that an average of 12 visits would be necessary for each patient, and that the number of patients to be dealt with would be approximately 25 per annum.

The first child to be treated under this scheme attended on 14th December, 1926, and up to the end of the year 2 patients had made a total of 4 attendances for treatment.

Puerperal Fever and Puerperal Pyrexia.

The Minister of Health, on 31st July, issued the Notification of Puerperal Fever and Puerperal Pyrexia Regulations, 1926, which came into operation on the 1st October.

Certifying practitioners are required to notify cases on prescribed forms, and to indicate, *inter alia*, (a) whether they desire to have a second opinion on a case ; (b) to state if it is desired to have a bacteriological examination of lochia or blood, etc. ; or (c) if facilities are available for all necessary treatment.

It will be noted that the new Regulations extend notification to Puerperal Pyrexia, which means "any febrile condition (other than a condition which is required to be notified as puerperal fever) occurring in a woman within 21 days after child-birth or miscarriage in which a temperature of 100·4 deg. Fahrenheit (38 deg. Centigrade) or more has been sustained during a period of 24 hours or has recurred during that period."

In the circular letter issued by the Ministry it is pointed out that,

in order to have practical value, the more complete notification should be supplemented by the provision, where necessary, of facilities for assistance in diagnosis, and for the treatment of patients who are not able to secure adequate treatment for themselves. In Hampstead these facilities were already in operation.

Puerperal Fever.

4 cases were notified, 2 of which proved fatal.

The details of the cases are as follows:—

Married woman, aged 24 years. Confined and died in Hospital.

Child lived only a few hours.

Single woman, aged 32 years. Confined and died in London Lock Hospital.

Married woman, aged 28 years. Removed to M.A.B. Hospital.

Recovered. Child survived.

Married woman, aged 37 years. Nursed by District Nurse.

Recovered. Twins, one still-born and one survived.

Puerperal Pyrexia.

7 cases were notified during 1926. In 6 instances the child survived, but in 1 case, where twins were born, the infants did not live beyond a few hours.

Ophthalmia Neonatorum.

Total cases notified by medical practitioners	..	5
„ „ midwives	..	—
Number treated at home	..	1
„ in hospital	..	3
„ at hospital as an out-patient	..	1
Vision unimpaired	..	4
„ impaired	..	—
Total Blindness	..	—
Number of Deaths	..	1

Of the 5 cases that occurred 3 were first children and 2 were third children. Both eyes were affected in all 5 cases.

In 4 instances the babies were born in maternity hospitals, and 2 of the notifications were received direct from the hospitals. The 2 other cases were not notified from the maternity hospitals, but from other hospitals to which they were subsequently removed.

Only one case occurred in a baby born at home.

Of the 4 cases occurring in obstetric hospitals 2 were removed to St. Margaret's Hospital, Leighton Road, Kentish Town.

Of the 5 cases occurring, 4 recovered without any injury whatever, but the fifth case born in a maternity hospital died at St. Margaret's Hospital, death being certified as due to Bronchitis and Ophthalmia Neonatorum.

On 9th August the Minister of Health issued the new Ophthalmia Neonatorum Regulations, which operated from 1st October, 1926. Under these Regulations the duty of notifying is placed solely upon the medical practitioner in attendance upon the case. By the provisions of the earlier Regulations of 1914 an obligation also rested upon the certified midwife to notify any case in which she had reasonable grounds for supposing that a child was suffering from Ophthalmia Neonatorum, but it had been represented to the Ministry that the system of dual notification had in some instances resulted in complete failure to notify, and that the midwives being also obliged to call in medical help for any inflammation of, or discharge from, the eyes, however slight, and to send notice to the Local Supervising Authority, had tended to confuse them as to their duty under the Regulations.

In Hampstead, by agreement between the Council and the two local Nursing Associations, the services of the nurses are available for any such cases as need their help.

Measles.

During the year 1,617 cases were notified, this being the largest number recorded since notification became compulsory. Fortunately the disease was not of a severe type, and this fact, together with the aids now available in the way of removal to hospital, provision of skilled nursing, etc., accounts for the relatively small number of deaths. Only 9 deaths occurred, and the following is the information in relation to these fatal cases :—

Cases removed to hospital—

Age.	Whether suffering from pneumonia when removed.	If pneumonia developed subsequent to removal.
1 year	No.	Yes.
1 year 2 months	Yes.	—
1 year 8 months	Yes.	—
2 years	No.	Yes.

Cases nursed at home—

Age.	Remarks.
1 year 2 months	Second case in family. Mother refused to call in a doctor or nurse at commencement of illness. Child developed pneumonia.
2 years . .	Doctor in attendance. Nursed by mother. Child developed pneumonia.
7½ months . .	Doctor in attendance. District Nurse sent in. Child developed pneumonia.
1 year 9 months	Doctor in attendance. District Nurse sent in. Child developed pneumonia.

Case occurring in hospital—

Child aged 11 months. Developed pneumonia.

It should be noted that all were certified as dying from pneumonia.

The control of Measles, with a view to a reduction in the number of deaths, and the occurrence of sequelæ, has been the subject of consideration for many years, and various methods of dealing with the disease have, from time to time, been tried.

At the time of the passing of the Public Health (London) Act, 1891, the question as to the desirability of adding Measles to the list of infectious diseases notifiable, was much to the fore. Some of the London Sanitary Authorities then resolved that Measles should be so included, but the Local Government Board at that time withheld their consent. The experiment of notification had been in operation in Edinburgh for a period of 10 years, and the experience of the Medical Officer of Health of that City was not favourable to notification "as a means of checking the disease." (Health Report, Hampstead, 1891.)

At periods, Hampstead has had its epidemics of Measles; thus, in 1896, the Medical Officer of Health in commenting on the outbreak that year, remarked on the fact that the disease was "too often regarded with indifference by parents, and suffered to run its course unheeded, as one of the inevitable diseases of child life," and he then pointed out that he had long made the observation that Measles "is only fatal to the children of the working and labouring classes," a fact which he thought pointed "to a want, either of care or means, in the treatment of this disease."

The Public Health Committee of the late Vestry of Hampstead

considered, more than once, the desirability of adding Measles to the list of infectious diseases, but it was felt that, having regard to the general susceptibility to Measles, the young ages at which the children are attacked, and the highly infectious pre-eruptive stage, when it is difficult to distinguish the complaint from an ordinary catarrh, it did not appear that the advantages to be gained were adequate, or that public opinion was ripe for the measure. At that time the Hospitals of the Metropolitan Asylums Board were not available for cases of Measles, and it was felt that with notification must go hospital isolation.

The severity of the outbreak at the end of 1897 and the beginning of 1898 was marked; I find from the records that no less than 24 children died in the first quarter of the latter year, and various schools were closed from the February until the 5th March, after which period Hampstead was not much troubled with the disease, which disappeared in the month of April. The London County Council at that time sought to learn the views of the London Sanitary Authorities, as to adding Measles to the list of dangerous infectious diseases, in order that, if necessary, parents who sent their children to school when suffering from Measles, might be proceeded against, and with this proposal the Vestry agreed.

In 1903 the London County Council obtained the approval of the Local Government Board to include Measles amongst the dangerous infectious diseases, in so far as Sections 60-65, 68-70, 72-74 of the Public Health (London) Act, 1891, apply. These Sections, while they did not make the disease compulsorily notifiable, extended to it provisions relating to isolation and disinfection.

School closure was resorted to in 1905 by the Education Department of the London County Council, and disinfection of the School premises was carried out by the Borough Council.

The closing of the big elementary schools with the object of preventing the spread of infectious disease has not, however, been practised in later years. Among the disadvantages of closure are the failure to obtain information as to the occurrence of fresh cases, and also the impossibility of inspecting children with a view to ascertaining if there be suspicious or hitherto unrecognised cases. Again, even when schools are closed, there yet remain perhaps more important factors in the spread of infection, *e.g.*, association in play at home or elsewhere, and in places of amusement, cinemas, &c.

For many years all cases coming to the knowledge of the Public Health Department have been visited; it being felt that a good deal could be done to lessen the fatality of an outbreak by educating the public to a proper appreciation of the seriousness of the disease, so that the patients may receive due care and attention.

In 1910, it was found, however, that in 165 of the 642 cases visited, no doctor was in attendance—a striking evidence of the failure of many of the public to appreciate that Measles is a serious disease.

Up to 1911, the only hospitals available for Measles cases were the workhouse infirmaries, but in the February of that year the Metropolitan Asylums Board began to provide hospital facilities. At first, admission was only given to Poor Law patients, but later the Metropolitan Asylums Board, on the suggestion of the Local Government Board, agreed to receive cases of Measles other than Poor Law cases, on the recommendation of the Medical Officer of Health of the district concerned. This was a valuable and important step forward, for while hospital treatment for Measles on any practicable scale cannot be expected to exercise much effect in checking the spread of the disease, it may do much to lessen the mortality by saving the lives of those patients for whose recovery skilled nursing, plenty of good food and healthy surroundings are necessary, and who are unable to obtain these necessities in their own homes.

In 1915 another advance was made by the Local Government Board in issuing the Public Health (Measles and German Measles) Regulations, 1915, under which cases of these diseases were made notifiable and authority was given for the provision of medical (including nursing) assistance for the poorer inhabitants.

In 1916 the Borough Council made arrangements with both local nursing associations for the supply of nurses to cases of Measles, and these arrangements have continued to date. Good nursing is all-important in cases of this disease, in view of the complications of bronchitis and pneumonia, diarrhoea and convulsions. Measles is especially fatal in rickety children. The mortality from Measles is not, however, a complete index of the mischief wrought by it. To the complications mentioned already as frequently fatal must be added many ailments, such as chronic bronchitis, collapse of lung, dilatation of bronchi and pleurisy, which cause prolonged disablement where they do not produce death. Measles is also a frequent

cause of retarded growth and development and of ill-defined ill-health; it often lights up latent tuberculosis; and deafness and defects of eyesight are in many instances attributed to it.

The most serious difficulty in the control of Measles consists in the fact that the disease is infectious before the definite signs appear by which its nature can be recognised with certainty. This greatly reduces the possibility of preventing its spread from the first case to other susceptible members of a household. The attendance at school of children in this stage of illness is a frequent cause of school epidemics. It is not anticipated that this spread in the family and at school can be more than diminished for some years to come; but, with early notification of recognised cases, steps have been initiated both to prevent the spread of the disease and to secure improved care of patients, including skilled nursing where necessary.

The compulsory notification of Measles and German Measles, which was brought into operation by the Local Government Board on January 1st, 1916, was rescinded at the end of 1919 by the Public Health (Measles and German Measles) Regulations, 1915, Rescission Order, 1919.

The Public Health Committee of the Borough Council, in May, 1920, considered the desirability of re-instating the compulsory notification of Measles (excluding German Measles), and, in making formal application to the Ministry for an order, expressed the opinion that it would be to the great advantage of the community if such compulsory notification were general in all districts. The Ministry granted the Order making Measles notifiable in Hampstead, and the Regulations came into force on 1st August. These Regulations provide that a medical practitioner shall not be required to notify a case of Measles:—

- (a) If he has reasonable grounds for supposing that the case has already been notified under the Regulations, or
- (b) If a case of the disease which he is attending has to his knowledge occurred in the same household or institution and been notified within the period of two months immediately preceding the date on which he first becomes aware of the disease in the case he is attending.

On the subject of nursing facilities for cases of Measles, I took the

opportunity of reminding the medical practitioners that, under the terms of an arrangement entered into with the Borough Council, both Nursing Associations would render assistance, and that the services of a fully-trained nurse could be obtained, free of charge, upon application to the Hampstead District Nursing Association, 25, Heathurst Road, N.W.3, or the Kilburn and West Hampstead District Nursing Association, 20, Dennington Park Road, N.W.6.

Whooping Cough.

This disease is not compulsorily notifiable in Hampstead; our principal source of information of the occurrence of cases is the Head Teachers of Schools. No death was due to Whooping Cough in 1926.

Epidemic Diarrhœa.

Eleven deaths at all ages occurred in 1926 from Diarrhœa and Enteritis. Of these six took place among children under two years of age.

Polio-Myelitis.

No case occurred in a child during the year. The one case that was notified was that of a male, aged 26 years, and terminated fatally.

Section 8.

Vital Statistics of the Borough.

The Borough.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	1,516	904	133	88	73
1903	1,453	837	126	87	66
1904	1,445	892	161	111	73
1905	1,421	823	133	94	73
1906	1,437	850	111	77	57
1907	1,359	817	98	73	61
1908	1,400	803	97	69	74
1909	1,328	839	99	74	53
1910	1,340	829	81	60	58
1911	1,276	847	105	82	56
1912	1,281	861	79	62	64
1913	1,325	951	91	69	49
1914	1,273	913	91	71	57
1915	1,327	994	101	76	48
1916	1,164	862	73	63	55
1917	1,123	922	90	80	69
1918	895	1,027	69	77	75
1919	1,156	1,036	96	83	56
1920	1,566	860	75	48	41
1921	1,342	973	88	65	63
1922	1,290	970	72	56	50
1923	1,238	947	54	44	51
1924	1,186	1,029	66	56	58
1925	1,073	923	59	55	52
1926	1,077	928	65	60	51

No. 1 (Town) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	192	163	20	104	17
1903	194	127	14	72	11
1904	195	125	20	102	13
1905	194	127	24	124	9
1906	205	131	21	102	5
1907	185	152	15	81	13
1908	225	108	11	49	7
1909	196	140	15	76	6
1910	199	118	15	75	6
1911	207	133	19	92	7
1912	183	135	12	65	5
1913	201	161	11	55	11
1914	152	130	14	92	5
1915	157	147	17	108	5
1916	132	140	7	53	13
1917	143	143	12	84	14
1918	115	157	13	118	11
1919	149	170	13	87	10
1920	208	142	7	34	4
1921	178	147	17	95	11
1922	161	130	11	68	13
1923	164	139	6	36	10
1924	149	138	4	27	7
1925	139	139	13	93	7
1926	141	134	9	64	5

No. 2 (Belsize) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	239	135	18	75	15
1903	211	121	13	62	13
1904	217	141	23	106	12
1905	209	131	13	62	10
1906	187	127	8	43	13
1907	205	114	13	63	10
1908	205	126	8	39	16
1909	204	130	16	78	8
1910	207	119	9	43	8
1911	189	135	17	90	10
1912	188	127	8	42	7
1913	214	126	16	75	5
1914	195	141	9	46	11
1915	317	144	12	38	6
1916	189	127	7	37	6
1917	185	132	13	70	11
1918	149	155	7	47	9
1919	196	159	20	102	9
1920	213	132	9	42	7
1921	197	143	12	61	7
1922	202	151	10	49	7
1923	156	147	6	38	10
1924	145	164	9	62	10
1925	145	137	5	34	10
1926	144	138	9	62	10

No. 3 (Adelaide) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	103	95	3	29	7
1903	95	101	9	95	1
1904	100	99	13	130	8
1905	96	92	4	42	4
1906	97	92	10	103	5
1907	75	86	8	107	2
1908	93	78	6	65	4
1909	83	88	4	48	3
1910	96	78	2	21	5
1911	82	99	6	73	3
1912	117	77	6	51	9
1913	97	99	9	93	4
1914	88	99	5	57	2
1915	77	104	5	65	2
1916	104	95	12	115	5
1917	114	109	7	61	6
1918	97	119	6	62	11
1919	97	130	10	104	6
1920	161	109	6	37	3
1921	133	119	10	75	8
1922	149	121	6	40	5
1923	141	128	6	42	6
1924	149	121	10	67	7
1925	117	112	4	34	4
1926	106	107	4	38	1

No. 4 (Central) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	110	71	11	100	5
1903	99	60	8	81	4
1904	90	62	11	122	1
1905	113	60	5	44	6
1906	95	83	3	32	2
1907	108	68	9	83	5
1908	104	82	6	58	7
1909	116	63	3	26	3
1910	105	82	8	76	3
1911	92	75	8	87	3
1912	97	76	4	41	6
1913	91	84	6	66	—
1914	84	76	4	48	6
1915	91	92	4	42	6
1916	93	97	4	43	3
1917	69	76	2	29	—
1918	69	99	5	72	7
1919	101	117	5	49	4
1920	131	91	7	53	2
1921	112	102	8	71	3
1922	85	113	9	106	3
1923	90	98	3	33	5
1924	91	133	4	44	8
1925	82	111	8	97	3
1926	96	108	3	31	5

No. 5 (West End) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	275	107	20	72	6
1903	243	111	21	86	12
1904	283	120	22	78	8
1905	250	131	23	92	11
1906	259	115	14	54	8
1907	250	114	16	64	9
1908	254	121	26	102	9
1909	239	118	13	54	6
1910	216	121	17	79	11
1911	216	102	15	69	10
1912	226	126	13	57	12
1913	240	145	11	46	7
1914	256	140	18	70	14
1915	218	151	13	60	11
1916	211	117	10	47	5
1917	221	137	13	59	13
1918	124	162	10	81	12
1919	175	139	12	68	12
1920	268	119	16	60	6
1921	211	146	12	57	9
1922	223	138	6	27	8
1923	215	149	6	28	8
1924	179	126	8	45	7
1925	171	148	7	41	12
1926	178	153	12	67	12

No. 6 (Kilburn) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	435	219	45	103	16
1903	417	184	39	93	18
1904	408	206	54	132	22
1905	426	171	50	117	26
1906	444	197	41	92	15
1907	391	179	28	71	16
1908	393	186	30	76	21
1909	341	182	37	108	17
1910	379	192	24	63	16
1911	347	179	31	89	16
1912	353	188	26	74	14
1913	354	213	25	71	18
1914	385	212	25	65	13
1915	329	230	40	121	11
1916	309	180	28	91	20
1917	280	208	37	132	17
1918	241	225	21	87	18
1919	296	201	24	81	11
1920	408	172	19	48	14
1921	364	204	21	58	11
1922	303	202	16	53	11
1923	333	180	16	48	7
1924	316	203	23	73	15
1925	275	170	12	44	13
1926	266	186	20	75	17

No. 7 (Priory) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	162	110	16	99	7
1903	194	116	21	108	5
1904	152	121	13	85	9
1905	133	103	14	105	7
1906	150	93	9	60	8
1907	127	94	7	55	6
1908	126	93	10	79	7
1909	149	111	11	74	8
1910	138	111	6	43	8
1911	143	115	9	63	5
1912	117	115	7	60	10
1913	128	117	12	94	3
1914	113	110	16	142	5
1915	138	126	10	72	7
1916	126	106	5	40	3
1917	111	117	6	54	8
1918	100	110	7	70	7
1919	142	120	12	84	5
1920	177	95	11	62	5
1921	147	112	8	54	14
1922	167	115	14	84	3
1923	139	106	11	79	5
1924	157	141	8	51	4
1925	144	106	10	69	3
1926	146	102	8	55	1

APPENDIX.

REPORTS

OF THE

Tuberculosis Medical Officer

AND THE

Public Analyst.

APPENDIX I.

REPORT

For the year 1926

OF THE

**Tuberculosis Medical Officer and Assistant
Medical Officer of Health for Tuberculosis Work.**

A. J. SCOTT-PINCHIN,
M.D. (Lond.), M.R.C.P. (Lond.).

Municipal Tuberculosis Dispensary,
73, Dynham Road, N.W.6.
9th March, 1927.

73, DYNHAM ROAD,

KILBURN, N.W. 6.

9th March, 1927.

TO THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE METROPOLITAN BOROUGH OF HAMPSTEAD.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to submit a report on the working of the Borough Tuberculosis Dispensary for the year 1926.

443 patients attended the Dispensary during the year, and the total number of attendances was 1154, at which 721 systematic physical examinations were made. The attendances were 205 less than last year.

New applicants attending numbered 262, and these have been classified as shown Section in A and B of the following report:—

Tuberculosis Scheme of the Hampstead Metropolitan Borough Council.

Return showing the work of the Dispensary during the year 1926.

Diagnosis.	Pulmonary.				Non-Pulmonary.				Total.			
	Adults.		Children.		Adults.		Children.		Adults.		Children.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
A.—New Cases examined during the year (excluding contacts):—												
(a) Definitely tuberculous	20	32	—	—	1	2	2	1	21	34	2	1
(b) Doubtfully tuberculous... ..	—	—	—	—	—	—	—	—	1	3	2	2
(c) Non-tuberculous	—	—	—	—	—	—	—	—	11	32	23	18
B.—Contacts examined during the year:—												
(a) Definitely tuberculous	1	7	—	—	—	1	1	2	1	8	1	2
(b) Doubtfully tuberculous... ..	—	—	—	—	—	—	—	—	1	3	3	—
(c) Non-tuberculous	—	—	—	—	—	—	—	—	22	26	25	20
C.—Cases written off the Dispensary Register as:—												
(a) Cured	7	14	—	—	7	4	4	—	14	18	4	—
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error)	—	—	—	—	—	—	—	—	33	61	48	39
D.—Number of Persons on Dispensary Register on December 31st:—												
(a) Diagnosis completed	70	100	1	3	3	10	24	14	73	110	25	17
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	—	8	7	8
Number of persons on Dispensary Register on January 1st	210											
Number of patients transferred from other areas and of "lost sight of" cases returned... ..	77											
Number of patients transferred to other areas and cases "lost sight of"	61											
Died during the year	23											
Number of observation cases under A (b) and B (b) above in which period of observation exceeded 2 months	26											
Number of attendances at the Dispensary (including Contacts)	1154											
Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for "Light" treatment	12											
Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary	4											
Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes	1308											
Number of consultations with medical practitioners:—												
(a) At Homes of Applicants												
(b) Otherwise												
Number of:—												
(a) Specimens of sputum, &c., examined												
(b) X-ray examinations made in connection with Dispensary work												
Number of Insured Persons on Dispensary Register on the 31st December												
Number of Insured Persons under Domiciliary Treatment on the 31st December												
Number of reports received during the year in respect of Insured Persons:—												
(a) Form G.P. 17												
(b) Form G.P. 36												

Potential contacts accruing during the year number 94, of whom 64, or 68 per cent. have been examined. The percentage last year was 66, and this figure remains fairly stable.

There have been 20 consultations with doctors in regard to patients.

47 letters have been sent to 33 doctors concerning cases referred for an opinion.

I have made visits to the homes of patients in relation to 20 cases and 24 visits to New End Hospital.

Of the cases under treatment:—

52 were referred to London County Council for Sanatoria. Of these 2 were refused, 2 withdrew and the rest received benefit.

5 were admitted to New End Hospital.

1 to St. Columba's Hospital.

4 were admitted to Victoria Park Hospital.

2 do. Hampstead beds at Northwood.

10 do. Hampstead General Hospital.

5 were referred to the Out-patient Department of the Hampstead General Hospital, Hampstead.

Of the cases accepted by the London County Council the average waiting period for admission was 14 days.

There has been a decrease in the death-rate. These total 56, as against 60 last year. The deaths amongst ex-service men amount to 4, as against 6 last year and 14 the previous year.

The number of notifications again shows a decrease, the total being 69 pulmonary and 16 non-pulmonary.

2 cases were notified from Mental Asylums.

33 cases were notified from hospital and sanatoria, many of which did not return to Hampstead on discharge. Some have attended on discharge, some are still in Hampstead, whilst others continue to attend their hospital of origin.

15 of the cases notified died during the year.

11 cases occurred in domestic servants.

During the year 49 X-ray examinations have been made, and the results attain the same high standard for which I expressed my appreciation last year.

The Northwood beds have been fully occupied during the year.

I have visited the New End Hospital frequently during the year, and have to thank Dr. Reade for his courtesy and help in respect of the tuberculous patients in that Institution.

There is little to add to the remarks made in preceding reports of the last few years. The notifications of cases of tuberculosis have been the lowest since compulsory notification became law, and, coupled with this, is the important fact that fewer deaths have occurred amongst those who have been notified during the year.

There seems to be no doubt that the incidence of tuberculosis is becoming progressively less, even allowing for more accurate diagnosis, and a tendency not to label a patient as tuberculous without adequate evidence.

Of very great importance is the fact that, although the case incidence is less, the case mortality remains the same; in other words, our prophylactic measures have been successful and our curative measures a failure.

Until some cure for the disease is found our efforts can most effectively be used in prophylaxis, and again I lay stress on the necessity for homes for advanced and dying cases in the neighbourhood

Of 23 Dispensary cases who died last year :—

- 11 died at home,
- 7 at the Infirmary,
- 2 at Sanatoriums (not under the L.C.C.),
- 3 in L.C.C. beds at Sanatoria.

The greater number of the 18 cases in the first two groups should have been in a local home.

The examination of contact cases during the year has been very satisfactory. There is always difficulty in getting adult contacts to submit to examination, and the percentage—60 to 68—is, I think, the best attainable for “all contacts;” but taking only the child contacts 93 per cent. of the contacts of cases notified during the year have been examined.

During the past two years 179 pulmonary cases have been denotified. These are mostly cases which have been on the Dispensary Books or Tuberculosis Register for many years. I believe that none of those denotified has ever had a positive sputum. Many were notified at the time when a diagnostic injection of tuberculin was

regarded as conclusive evidence. There is no doubt that many cases were notified in the past who never had tuberculosis.

Of 53 cases notified in Hampstead in the year 1921, and who attended the Dispensary :—

20 are dead,

17 have removed,

16 remain alive. Only seven of these had a positive sputum, and of these five are definitely worse.

Of the cases notified in 1926 :—

3 non-pulmonary cases were decided to be non-tuberculous (two at Sanatorium and one at the Dispensary).

1 pulmonary case was non-tuberculous, and one was probably non-tuberculous.

Three cases were sent for diagnostic observation under the L.C.C. Two were regarded as negative and one positive.

In the following tabular statement some idea may be gained of the work done in connection with the Dispensary since its inception :—

Year.	No. of New Applicants.	No. of New Applicants treated.	No. of Contacts examined.	Total Attendances of all kinds.
1913 1st Feb to 31st Dec.	455	191	204	2808
1914	455	118	195	1913
1915	308	146	158	899
1916	230	165	100	1519
1917	383	183	113	1682
1918	371	105	124	1821
1919	296	85	57	1543
1920	384	221	112	2625
1921	479	127	192	2327
1922	445	113	223	1738
1923	422	120	199	1534
1924	365	111	151	1601
1925	299	81	128	1359
1926	262	93	112	1154

I have to thank the Dispensary Staff for their efficient and keen work, and Dr. Scrase for his helpful consideration.

A. J. SCOTT-PINCHIN,

M.D. (LOND.), M.R.C.P. (LOND.).

APPENDIX II.

REPORT

For the year 1926

OF THE

Public Analyst.

H. E. COX, M.Sc., Ph.D. (Lond.), F.I.C.,
11, Billiter Square, E.C.3.

HEHNER & COX.

THE LABORATORY,

11, BILLITER SQUARE,

LONDON, E.C. 3.

18th January, 1927.

TO THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE METROPOLITAN BOROUGH OF HAMPSTEAD.

Mr. Mayor, Ladies and Gentlemen,

I beg to give a short summary of the work carried out by me as your Public Analyst during the year 1926. In this period I have analysed 505 samples of food and drugs, of which the principle articles were :—

Milk	..	..	..	194
Butter	..	..	..	65
Cream	..	..	..	42
Cheese	..	..	..	22
Apples	..	..	..	24
Margarine	..	..	..	17

Of these 22 (that is 4.0 per cent. of the samples) were adulterated or for various reasons failed to conform to the requirements of the Law, namely :—

Milk	..	..	..	4
Butter	..	..	..	4
Margarine	..	..	..	3
Cream Cheese	..	..	..	2
Egg Custard	..	..	..	2
Apples	..	..	..	5
Cream	..	..	..	1
Malt Vinegar	..	..	..	1

The standard of quality of the milks supplied in the Borough is distinctly good. It is richest in December and poorest in the June quarter, which is in accordance with the natural seasonal variations of the cows.

The state of affairs in regard to cheese is not altogether satisfactory : not infrequently soft cheeses, prepared from milk, are sold as cream cheese. Their only claim to the word "cream" being based on a creamy consistency. Actually a cream cheese should have not less than 70 per cent. of fat, reckoned on the "dry" basis. Similarly cheese

prepared from skimmed or partially skimmed milk is sold as cheese, or, sometimes, as a particular variety of cheese, which should be made from whole milk. Cheese from whole milk contains about 50 per cent. of fat, reckoned on the "dry" matter. In this connection it may be remarked that a standard is highly desirable for cream; a product containing 60 per cent. of fat is fairly common, and yet one containing only 10 per cent. would have to be passed in the existing state of the Law. Ice-cream, though relatively unimportant, presents similar anomalies. Of four samples examined this year, two were merely frozen custard powder with practically no fat, and two, which were sweetened cream, contained respectively 9 and 20 per cent.

Apples have been somewhat prominent during the year, and it is satisfactory to note that, as the result of action taken in this Borough, apples seriously contaminated with arsenic have almost disappeared from the market, adequate steps being now taken at the ports to prevent their entry. There is no diminution in the supply of apples apparent affording another instance of the fact that pure food is obtainable when it is insisted on.

The prosecutions which were instituted in the matter of the egg custard, which contained only 4 per cent. of egg, were unfortunately not successful; but it is satisfactory to be able to remark that it has come to my knowledge that since those proceedings the amount of egg in the product in question has been increased.

In conclusion, it may be noted that the proportion of adulterated samples in the Borough is quite small, and compares favourably with other districts.

I have the honour to remain,

Your obedient servant,

(Signed) H. E. COX,

Public Analyst.

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