

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

Contributors

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The Metropolitan Borough of Holborn.

ANNUAL REPORT

OF THE

Medical Officer of Health,

C. W. HUTT, M.A., M.D., D.P.H.,

For the Year 1926.



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1927

TOWN HALL,
197 HIGH HOLBO

MARCH, 1927.

LONDON BOROUGH OF HOLBORN.

CITY BOROUGH OF HOLBORN.

Yours obediently,

C. W. HUTT,

Medical Officer of Health

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PUBLIC HEALTH COMMITTEE.

1926-27.

Chairman—

Alderman Francis J. Pullen.

Vice-Chairman—

Councillor John H. Boraston, C.B.

Ex-Officio—

The Right Worshipful The Mayor,
Alderman Harold Warren Coleman, J.P.

Councillor Albert J. Clark.

„ Rev. Wilfred H. Davies, M.A.
„ Henry W. Ellis.
„ Harold Jewell.
„ Horace W. Langdon.
„ Miss Marjorie R. Lovelock.
„ Rev. Henry Ross.
„ Sir William R. Smith, D.L., J.P., M.D.
„ Mrs. Ethel M. Wilson.
„ Arthur Youngman.

1925-26.

Chairman—

Alderman Francis J. Pullen.

Vice-Chairman—

Councillor John H. Boraston, C.B.

Ex-Officio—

The Right Worshipful The Mayor,
Alderman Harold Warren Coleman, J.P.

Councillor Albert J. Clark.

„ Rev. Wilfred H. Davies, M.A.
„ Henry W. Ellis.
„ Harold J. Jewell.
„ Horace W. Langdon.
„ Miss Marjorie R. Lovelock.
„ Samuel W. Price.
„ Rev. Henry Ross.
„ Sir William R. Smith, D.L., J.P., M.D.
„ Mrs. Ethel M. Wilson.

HOUSING OF THE WORKING CLASSES COMMITTEE.

1926-27.

Chairman—

Councillor J. C. St. Laurence Stallwood.

Vice-Chairman—

Alderman James W. Coade.

Ex-Officio—

The Right Worshipful The Mayor,
Alderman Harold Warren Coleman, J.P.

Alderman Sir Robert W. Dibdin, J.P.
Councillor Rev. Wilfred H. Davies, M.A.

„ Miss Emily Dibdin.
„ Henry W. Ellis.
„ Ernest Hamlin.
„ Roland H. Haxell.
„ Alfred Humphreys.
„ Horace W. Langdon.
„ Raymond A. Miles.
„ George D. Pooley.

1925-26.

Chairman—

Councillor J. C. St. Laurence Stallwood.

Vice-Chairman—

Alderman James W. Coade

Ex-Officio—

The Right Worshipful The Mayor,
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„ Miss Emily Dibdin.
„ Henry W. Ellis.
„ Ernest Hamlin.
„ Alfred Humphreys.
„ Horace W. Langdon.
„ Raymond A. Miles.
„ Albert A. Mussett.
„ George D. Pooley.
„ Arthur Youngman.

MATERNITY AND CHILD WELFARE COMMITTEE.

1926-27.

Chairman—

Councillor The Rev. Henry Ross.

Vice-Chairman—

Councillor Miss Emily Dibdin.

Ex-Officio—

The Right Worshipful The Mayor,
 Alderman Harold Warren Coleman, J.P.
 Councillor Edmund Balding.
 „ Richard Davies.
 „ Percy Hill.
 „ Miss Marjorie R. Lovelock.
 „ Albert A. Mussett.
 „ Lady Smith, J.P.
 „ Mrs. Ethel M. Wilson.
 „ George Witherby.
 Mr. Thomas W. J. Coffin.
 The Mayoress (Mrs. H. Warren Coleman).
 Mrs. Wilfred H. Davies.
 Miss Norah H. March, B.Sc.
 „ M. Wilmshurst.

1925-26.

Chairman—

Councillor The Rev. Henry Ross.

Vice-Chairman—

Councillor Lady Smith, J.P.

Ex-Officio—

The Right Worshipful The Mayor,
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 Councillor Richard Davies.
 „ Miss Emily Dibdin.
 „ Percy Hill.
 „ Miss Marjorie R. Lovelock.
 „ Albert A. Mussett.
 „ Mrs. Ethel M. Wilson.
 „ George Witherby.
 Mr. Thomas W. J. Coffin.
 The Mayoress (Mrs. H. Warren Coleman).
 Mrs. Wilfred H. Davies.
 Miss Norah H. March, B.Sc.
 „ M. Wilmshurst.

STAFF.

The following was the Staff during 1926.

*Medical Officer of Health—*C. W. Hutt, M.A., M.D., D.P.H.*Medical Officers of Maternity Centres—*

10, John Street—(Temporary) Richenda Gillett, M.D.Brux., L.S.A.
 Short's Gardens—James Arthur Struthers, M.B., B.Ch., M.R.C.P., D.P.H.

Medical Officer of Tuberculosis Dispensary—

James Arthur Struthers, M.B., B.Ch., M.R.C.P., D.P.H.

*Medical Officer—Diphtheria Immunisation—*E. Goodwin Rawlinson, M.D., L.R.C.P., D.P.H.*Public Analyst—*James Kear Colwell, F.I.C.*Sanitary Inspectors—*Albert Bennett.

George F. Clark.

Samuel Larard, M.R.San.I.

*Sanitary Inspector and Health Visitor—*Ethel Jane Charlesworth, C.M.B.*Health Visitors—*Elizabeth Lister Shinnie, C.M.B. (to 31st May).

Muriel G. Stockwell (from 1st July).

*Tuberculosis Visitor—*M. Watson (from 18th January).*Chief Clerk and Committee Clerk—*Edwin Kent.*Assistant Clerks—*Frank Fitch.

Arthur Long.

Phyllis Bull.

Doris Brown (temporary).

DENTAL CLINIC—(10, John Street).*Dentist—*Cecil O. Gray, L.D.S. (British Dental Hospital).*Anæsthetist—*G. C. Nelson Younger, M.R.C.S., L.R.C.P.*Nurses—*The Metropolitan Nursing Association.*Mortuary Keeper and Superintendent of Cleansing Station—*Charles H. Day.*Superintendent of Women's Cleansing Station—*Adeline Day.*Caretaker of Maternity Centre—*Elizabeth Alderton.*Home Help—*Margaret Smith.

And Panel of Emergency Home Helps.

*Disinfectors—*Henry Emms.*Assistant Disinfectors—*E. E. Denny.

STATISTICAL SUMMARY, 1926.

Population—estimated to middle of year (as supplied by the Registrar-General) for birth and death rates	...	...	43,200
Population—Census, 1921	...	...	43,192
Births	...	...	535
Annual rate of births per 1,000 population	...	...	12·38
Deaths	...	...	522
Annual rate of deaths per 1,000 population	...	...	12·10
Zymotic death rate*	...	...	0·27
Tuberculosis death-rate per 100,000	...	...	81
Excess of registered births over deaths	...	...	13
Excess of registered deaths over births	...	...	—
Infantile mortality per 1,000 births	...	...	90
Area of Borough in acres	...	...	405·1
Rateable value 1st November	...	...	£1,617,098
Rate of 1d. in the £ estimated to yield	...	...	£6,434

* Excluding deaths from Epidemic diarrhoea.

Vital Statistics, 1926.

England and Wales, London and Holborn.

	Annual Rates per 1,000 living.		Deaths under 1 year to 1,000 Births.
	Births.	Deaths.	
England and Wales	17·8	11·6	70
London	17·1	11·6	64
Holborn	12·38	12·10	90

NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.

Population and Houses.

The following estimate of population as supplied by the Registrar-General has been adopted for the calculation of the death-rate and birth-rate of the Borough for the year 1926—43,200.

The density of the population, according to the Census, 1921, was 107 persons per acre contrasted with 60 persons per acre for the County of London.

The character of population shows wide and striking contrasts, including as it does the occupants of expensive residential flats, the migratory population in the large hotels, the student class in the Bloomsbury boarding houses, residents in large commercial, social and philanthropic hostels, working class population in model dwellings and tenement lodging houses (many of whom are very poor), and a relatively large proportion of very poor people in common lodging houses.

Although the number of hotels and boarding houses keeps increasing, the Borough is becoming less and less residential and more and more important as a business centre. The number of factories, workshops, workplaces and offices keeps increasing so that we are adding to our large and crowded day population of London's workers.

The population in the 999 L.C.C. tenements in the Borough was estimated at 3,490. The number of deaths was 36, a death-rate of 10·3 per 1,000, considerably below the average death-rate for the whole of the Borough (12·5).

On the other hand the number of deaths of residents of Common Lodging Houses in the Borough, which contain 920 beds, was 53, which, calculated on the number of beds, was a rate of 57·3 per 1,000.

Registered Births and Birth-Rate.

The total number of births registered as occurring in the Borough was 330 (175 males and 155 females). Of these, 314 were legitimate and 16 illegitimate.

Corrected Births and Birth-Rate.

I received from the Registrar-General information of the births in outlying institutions in London of 190 legitimate infants and 33 illegitimate infants whose mothers were residents of the Borough. Eighteen of the births occurring in the Borough, viz., 15 legitimate births and 3 illegitimate births, were infants of mothers who were non-residents of the Borough.

The following table gives the corrected number of births and the corrected birth-rates for the nineteen years 1908-1926:—

Year.	Total Births.		Legitimate Births.			Illegitimate Births.		
	No.	Rate per 1,000 of Population.	No.	Rate per 1,000 of population.	Proportion per 1,000 total Registered Births	No.	Rate per 1,000 of population.	Proportion per 1,000 total Registered Births.
1908	1,066	20·41	1,020	19·53	956·8	46	0·88	43·2
1909	986	19·26	935	18·27	948·2	51	0·99	51·8
1910	1,017	20·27	959	19·11	943·0	58	1·16	57·0
1911	920	18·73	865	17·61	940·2	55	1·12	59·8
1912	901	18·76	835	17·38	926·7	66	1·38	73·3
1913	798	16·99	743	15·82	931·1	55	1·17	68·9
1914	765	16·33	705	15·05	921·6	60	1·28	78·4
1915	670	14·44	616	13·28	919·4	54	1·16	80·6
1916	649	15·63	585	14·09	901·4	64	1·54	98·6
1917	571	14·50	496	12·60	868·7	75	1·90	131·3
1918	497	12·06	428	10·38	861·2	69	1·68	138·8
1919	539	13·56	477	12·00	885·0	62	1·56	115·0
1920	827	20·84	749	18·87	905·7	78	1·97	94·3
1921	648	14·88	593	13·62	915·1	55	1·26	84·9
1922	664	15·49	602	14·04	906·6	62	1·45	93·4
1923	595	13·71	547	12·61	919·3	48	1·10	80·7
1924	578	13·36	532	12·30	920·4	46	1·06	79·6
1925	527	12·16	490	11·31	929·8	37	0·85	70·2
1926	535	12·38	489	11·32	914·0	46	1·06	86·0

In London the corrected birth-rate in 1926 was 17·1 per 1,000 in comparison with 18·0 for 1925.

Mortality.

The total number of deaths registered as occurring in the Borough was 629, of which 357 were males and 272 females.

Of these deaths the following occurred in Public Institutions, etc., within the area of the Borough:—

Institution.	Residents.		Non-Residents.	
	St. Giles and Bloomsbury.	Holborn.	St. Giles and Bloomsbury.	Holborn.
French Hospital	1	1	36	—
Children's Hospital... ..	—	7	—	258
National Hospital	—	3	—	80
London Homœopathic Hospital ...	2	8	—	46
Italian Hospital	—	—	—	1
St. Paul's Hospital	—	—	6	—
Private	—	—	19	8
Total	3	19	61	393

There were 347 deaths of Civil "Residents" in various Workhouses, Infirmarys, Asylums, Hospitals, etc., outside the Borough, 53 of whom were removed from Common Lodging Houses in the Borough.

The deaths are further corrected by the Registrar-General by the inclusion of all deaths registered in the *calendar year* as distinct from the registration year of 52 weeks. This correction, together with deaths transferred from extra Metropolitan Institutions, accounts for the variation in the number of deaths given in the four quarterly reports of the Registrar-General and in his Annual Report. The final correction supplied by the Registrar-General for 1926 gives the total deaths for the Borough as 522.

Corrected Deaths and Death-Rates, 1926, compared with 1925.

Year.	Total Deaths at all ages registered in District.	Deaths in Public Institutions in District.	Deaths of non-residents of Borough registered in District.	Deaths of residents registered beyond the District.	Nett Deaths at all ages.	Death Rate for Borough.	Death Rate. Registration London.
1926	629	476	454	347	522	12.1	11.6
1925	725	533	513	330	542	12.5	11.7

For details of causes of and ages at death, see Table II., page 117.

Seasonal Mortality.

The mortality in the four quarters of the year as given in the Quarterly Reports of the Registrar-General is shown below:—

	Deaths.	Death-rate per 1,000.	London Rate.
First Quarter	151	14.0	13.5
Second „	139	12.9	11.1
Third „	103	9.5	8.8
Fourth „	114	10.6	12.4
	—	—	—
	507*	11.7*	11.4*
	—	—	—

Infantile Mortality.

The number of deaths of children under one year of age, and the number of deaths of children under one year of age per 1,000 corrected births, were the following:—

*In these figures as published in the Registrar-General's Quarterly Returns for 1926, the complete corrections for deaths are not included. These corrections increase the nett deaths in Holborn to 522 giving a corrected death-rate of 12.1 per 1,000, the corresponding rate in London being 11.6 per 1,000.

Year.	Deaths under 1 year of age.	Deaths under 1 year per 1000 corrected legitimate Births.	Deaths under 1 year per 1000 corrected illegitimate Births.	Deaths under 1 year per 1000 corrected Births.	London.
					Deaths under 1 year per 1000 Births.
1926 ...	48	80	196	90	64
1925 ...	33	57	135	63	67

Death-rate per 1,000 corrected births in 1926 and in ten preceding years during which details respecting births have been supplied.

	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	Av'ge. 1916-25	1926
Holborn Borough	97	107	141	96	66	79	72	79	81	63	88.1	90
London ...	89	103	107	85	75	80	74	60	69	67	80.9	64

See also Table, page 92.

The figures on which the rates given in the Registrar-General's Quarterly Reports are based are necessarily only partly corrected; the final correction including the transference of births in institutions to the residential area of the parents is made before the publication of the Registrar-General's Annual Report. The corrections considerably modify the Holborn rates as will be seen from the following figures:—

Year 1926.	Infantile Death-rate in Holborn per 1,000 Births	
	Registrar-General's Quarterly Report	Corrected
1st Quarter... ..	184	177
2nd „	80	38
3rd „	118	81
4th „	212	137

It will be seen from the analysis on page 92 of the ages at which these infantile deaths took place that no fewer than 22 occurred under the age of four weeks. Such deaths are not considered to be due to the environment of the baby, but to indefinite alterations to the health of the mother; they are recognised as being especially difficult to prevent.

Poor Law and Hospital Relief.

The Clerk to the Guardians of the Holborn Union has kindly supplied me with the following information relating to persons from the Holborn Division of

the Union who received Poor Law Relief during the year 1926 :—

Indoor Relief	...	...	...	...	1,156 persons
Outdoor Relief	...	...	...	...	482 cases
Outdoor Medical Relief	...	...	...	...	294 persons

Of the total number of 522 deaths, 370 died in hospitals and public institutions either within or without the Borough.

SANITARY CIRCUMSTANCES OF THE BOROUGH.

Scavenging.

The removal of house and trade refuse is carried out by contract. In the main thoroughfares, and in a number of other principal streets, there is a daily collection. In the remainder of the streets the collection is twice weekly.

The Council has made arrangements with the contractor for the substitution of motor vehicles in place of horse-drawn waggons for the removal of house and trade refuse. Two horse-drawn vehicles are retained for use in streets where large motor vehicles would be inconvenient and in streets congested with market traffic.

The collection of house refuse from the main streets is now completed by 9 a.m., the householders being required to put the bins on the kerb of the footway in front of their premises between the hours of 6 and 8 a.m.

This earlier daily collection has worked well.

In a very large majority of the houses in the Borough, the old large fixed ashpits have been replaced by movable sanitary ashbins.

The number of notices served for the absence of, or defective, ashbins was 57.

The Disposal of Holborn House Refuse.

When the refuse is removed from the Borough it is taken first to the contractor's dépôt where it is "forked" over for the extraction of paper, straw and other combustible matter which is at once destroyed by burning in destructors. In the course of the "forking" parts of the refuse are salvaged, *e.g.*, tin cans and other metal articles, bottles, glass, rags, bones, also bread and other food material for sale to pig breeders. The remaining refuse, including cinders directly from the household refuse, is loaded into barges and conveyed, at present, to dumps on brickfields at Sittingbourne, for use in brick-making. The "forking" at the contractor's yard is carried out immediately on the delivery of the refuse and there is regular daily barging so that undue accumulations of Holborn refuse or nuisances arising therefrom are avoided.

Occasional visits are paid to the contractor's dépôt to supervise the arrangements for dealing with the refuse from the Borough.

The refuse is conveyed by barge from the contractor's wharf at Vauxhall to fields outside Sittingbourne belonging to a large firm of brick-makers. The refuse is deposited on to the land for subsequent use in connection with the industry carried on there. The site of the brick-making fields is on the banks of the River Thames, a short distance from Sittingbourne, the nearest residences being about one mile away, at the village of Conyer.

The site occupied for the tipping and sorting of the refuse and the brick-making industry extends over about four acres. The refuse as brought from the barge, is stacked into large heaps and remains for about three years before it is used. At the end of the storage period the refuse is sifted through a sieve, $\frac{3}{4}$ " mesh. This sifting separates the fine ash; the "hard core" is picked out leaving the breeze. The fine ash and breeze are used in connection with the brick-making. A sufficient quantity for the effectual burning of the bricks is mixed with the clay and the remainder is used for fuel either in kilns or clamps. The "hard core" is used entirely for road making or the making up of the land of the brickfields which, owing to its marshy nature, shows frequent subsidence. At the time of inspection refuse was seen newly deposited and at varying periods of storage up to the maximum of three years. A heap deposited three years previously, or thereabout, was in course of sifting and sorting into three types, fine ash, breeze and "hard core." No objectionable smell or other nuisance was observed from either the newly deposited refuse or the storage heaps.

In reply to questions, the local manager and the foreman of the brickfields stated that rats were rarely found in the refuse: neither rats nor flies had given rise to nuisance: so far as they were aware no complaint had ever been received of any nuisance arising from the deposit or storage of the refuse or the making of bricks on the fields.

In reply to questions relative to the use of earth for covering layers of refuse, the London Manager of the brick-making company intimated that the cost of treating the refuse in this way would prohibit the use by the company of London refuse in the industry. He pointed out that the fields and surrounding lands by reason of their nature would not permit of excavation, so that it would be necessary to obtain the earth elsewhere and import it to the tips. This cost, added to that incurred for sifting and sorting refuse, would increase the expense so much that the use of coal for brick-making would become more economical than the use of London refuse.

The brick-making works were subsequently inspected. Two methods were in use; first, the kiln method for machine-made bricks, dried by hot air and passed through long tunnel kilns for burning; no nuisance from smell was observed from this work; the Manager intimated that this method had been in operation in the brick industry about 25 years only. In the second, the clamp method, hand-made bricks were dried in the open air and fired in clamps, breeze being used for fuel. It was stated that a fair-sized clamp would take about three months to burn; considerable smell is given off during burning, and it would seem that these fumes might become a source of nuisance if carried out near dwellings. As, however, the nearest houses are, as previously stated, nearly a mile away, there seems no reason to suppose that the burning of the clamps on these fields gives rise to nuisance.

The Council was invited to co-operate with the Ministry of Health and other Metropolitan Authorities in an investigation into the composition of house and trade refuse in the Metropolitan area. In connection with this, efforts were made to obtain reasonably reliable data as to the composition of such refuse.

Arrangements were made with the Contractor to obtain thoroughly representative classified samples of the refuse obtained from Winter, Spring, Summer and Autumn yields. The samples of house refuse were divided into three groups, namely:—

- (a) From houses with nett rateable value of £30 and under.
- (b) " " " " " " " £31 to £80.
- (c) " " " " " " " over £80.

The samples were obtained on the following dates:—

Winter yield, January 13th.

Spring yield, April 14th.

Summer yield, July 14th.

The arrangement for obtaining an Autumn yield on October 13th was cancelled owing to the abnormal conditions then existing as a result of the General Strike.

About five tons of refuse from each of the above-mentioned three classes was obtained at each collection. The samples of refuse were conveyed to the Contractor's depôt where, after careful weighing, analyses were proceeded with.

First, the whole of a sample was passed over a hand riddle having a mesh of $\frac{5}{16}$ th of an inch; the fine material passing this mesh was designated "fine dust." The rejected material was then passed over a second screen having a mesh of $\frac{3}{4}$ of an inch. From the material passing this mesh all foreign matter, such as glass, pottery, stone, wood, etc., was eliminated, and the product resulting from this second screening was designated "small cinder." A third riddle, $1\frac{1}{2}$ inch mesh, was then used followed by the elimination of the smaller foreign matter, the result being "large cinder." The foreign material already eliminated and the remainder of the sample were then hand sorted into the following divisions:—

Vegetable.

Putrescible.

Paper.

Metal.

Rag.

Glass.

Bones.

Combustible débris not classified.

Incombustible débris not classified.

At the conclusion of the division of the sample into these eleven parts each part was carefully weighed and the weights together with the percentage of the weight of the original sample were recorded.

From the data obtained by analyses of the three samples of house refuse a calculation was made on the basis of a sample of ten tons of refuse, made up in the proportions the three classes of property mentioned above bore to the total properties in the Borough. The results of these analyses are given in the following table:—

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	Winter Refuse, 13th January, 1926.		Spring Refuse, 14th April, 1926.		Summer Refuse, 14th July, 1926.		Average.	
	lbs.	%	lbs.	%	lbs.	%	lbs.	%
(A) Fine Dust Content (under $\frac{1}{8}$ in.) ...	7,325	32.702	6,978	31.152	3,056	13.642	5,787	25.832
(B) Small Cinder „ (between $\frac{1}{8}$ in. and $\frac{3}{8}$ in.) ...	4,187	18.694	4,382	19.563	2,383	10.640	3,651	16.299
(C) Large „ „ (over $\frac{3}{8}$ in.) ...	3,468	15.480	4,175	18.638	1,826	8.154	3,156	14.091
(D) Vegetable and Putrescible Content ...	16	.072	48	.214	356	1.589	140	.625
(E) Paper Content ...	5,585	24.934	5,267	23.513	12,504	55.822	7,786	34.756
(F) Metal „ (1) Metal Containers ...	567	2.531	483	2.156	520	2.320	523	2.336
„ (2) Other Metals ...	8	.036	10	.045	160	.715	59	.265
(G) Rag „ including bagging and all textiles	117	.522	203	.906	327	1.459	216	.962
(H) Glass „ (1) Bottles and Jars ...	234	1.040	321	1.433	304	1.357	286	1.277
„ (2) Broken Glass (Cullet) ...	231	1.031	62	.277	147	.656	147	.655
(I) Bones „ ...	60	.268	65	.290	182	.813	102	.457
(J) Combustible Debris not classified above: (wood, straw, leather, etc.) ...	29	.130	6	.027	8	.034	14	.064
(K) Incombustible Debris not classified above: (bricks, stone, pottery, etc.) ...	573	2.560	400	1.786	627	2.799	533	2.381
	22,400	100.000	22,400	100.000	22,400	100.000	22,400	100.000

Quantitative Analysis of Seasonal Trade Refuse.

	Winter Refuse, 13th January, 1926.		Spring Refuse, 14th April, 1926.		Summer Refuse, 14th July, 1926.		Average.	
	lbs.	%	lbs.	%	lbs.	%	lbs.	%
(A) Fine Dust Content (under $\frac{1}{16}$ in.)	728	30.952	26	1.009	41	1.722	265	11.228
(B) Small Cinder „ (between $\frac{1}{16}$ in. and $\frac{3}{8}$ in.)	252	10.714	17	.659	22	.924	97	4.099
(C) Large „ „ (over $\frac{3}{8}$ in.)	124	5.272	13	.504	19	.798	52	2.191
(D) Vegetable and Putrescible Content	62	2.636	1,820	70.597	1,929	81.051	1,270	51.428
(E) Paper Content	450	19.133	252	9.775	215	9.034	306	12.647
(F) Metal „ (1) Metal Containers	8	0.340	16	.621	108	4.538	44	1.833
„ (2) Other Metals	nil	—	nil	—	nil	—	nil	—
(G) Rag „ including bagging and all textiles	nil	—	nil	—	nil	—	nil	—
(H) Glass „ (1) Bottles and Jars	nil	—	nil	—	14	.588	5	.196
„ (2) Broken Glass (Cullet)...	nil	—	nil	—	nil	—	nil	—
(I) Bones „	nil	—	6	.233	nil	—	2	.078
(J) Combustible Debris not classified above: (wood, straw, leather, etc.)	442	18.793	414	16.059	nil	—	285	11.617
(K) Incombustible Debris not classified above: (bricks, stone, pottery, etc.)	286	12.160	14	.543	32	1.345	111	4.683

These samples of trade refuse were subjected to analyses similar to those applied to house refuse with the result shown in the following table:—

Removal of Manure.

The removal of manure from the various mews in the Borough was satisfactorily carried out during the year. Again no complaint was received.

Sanitary Inspection of the District, including Premises and Occupations which can be controlled by By-Laws and Regulations.

In addition to my inspections, the Sanitary Inspectors made 21,923 various inspections and visits as set out in the following table. Each inspection frequently covers a number of different sanitary matters.

Sanitary Inspectors' and Health Visitors' Work, Year 1926.

	Mr. Bennett	Mr. Clark	Mr. Larard	Miss Charles- worth	Miss Shinnie	Miss Stockwell	Total
Complaints received	39	58	66	...	...	...	163
Do. found to be justified ...	39	58	65	...	...	...	162
INSPECTION OF HOUSES—							
Dwelling-houses	57	160	80	1	...	...	298
Houses let in lodgings ...	322	296	216	37	...	...	871
Common lodging-houses ...	...	1	2	...	...	...	3
Drains tested by smoke ...	...	5	2	...	...	...	7
" " " water ... ..	...	...	...	...	...	...	...
" " " chemicals	1	...	...	...	...	...	1
Re underground rooms ... ..	...	...	...	...	...	...	...
" Rent (Restriction) Act ...	...	2	...	...	...	...	2
" New Buildings	1	1	...	...	...	...	2
Housing (Inspection of District)							
Regulations ... ..	...	...	...	...	...	...	...
FACTORIES—							
Bakehouses	5	24	6	...	...	...	35
Food preparation (other than							
above) ... ..	...	...	4	...	...	...	4
Other	23	114	141	...	...	...	278
WORKSHOPS AND WORKPLACES—							
Food premises:							
Dairies and Milkshops ...	28	76	53	...	...	...	157
Ice Cream, Manufacture ...	15	9	150	...	...	...	174
Do. Storage or Sale ...	8	3	...	...	...	...	11
Slaughter-houses ... ..	...	6	...	...	...	...	6
Hotels and Restaurants ...	63	45	90	...	...	...	198
Butchers	231	22	372	...	...	...	625
Bakehouses	3	18	10	...	...	...	31
Fried Fish shops	185	17	24	...	...	...	226
Market Streets	296	72	423	...	...	...	791
Other food shops	128	28	76	...	...	...	232
Other workshops	153	193	160	51	60	...	617
Other workplaces	76	88	57	...	...	...	221
Outworkers' Registers ..	23	26	53	...	...	...	102
Stable and Stable yards ...	46	81	...	...	...	...	127
Rag and Bone shops	114	8	...	...	...	...	122
Outworkers' rooms	32	53	54	2	...	...	†141
Sweetstuff stalls and shons	37	37	62	...	...	...	136
Inspections carried forward...	1,847	1,385	2,035	91	60	—	5,418

	Mr. Bennett	Mr. Clark	Mr. Larard	Miss Charles- worth	Miss Shinnie	Miss Stockwell	Total
Brought forward	1,847	1,385	2,035	91	60	—	5,418
MISCELLANEOUS—							
Black smoke	136	53	151	...	...	...	340
Dust, Special Inspections ...	100	132	36	...	...	...	268
Rats and Mice (Destruction) Act	79	90	121	...	...	...	290
Public Urinals and Lavatories...	...	1	...	12	...	...	13
Sale of Food and Drugs Act, sampling	178	213	235	...	...	...	626
Other Inspections	1	...	...	28	...	6	35
Periodical Inspections: Includes W.C. and yards, dust bins, especially houses let in lodgings, and other suitable buildings	1,713	2,299	2,901	...	...	...	6,913
Keeping of Animals	3	2	3	...	...	...	8
RE-INSPECTIONS—							
Houses	725	904	527	38	...	...	2,194
Factories ... ..	...	3	16	...	...	...	19
Workshops and Workplaces ...	58	93	107	9	...	...	267
Miscellaneous	2	...	...	72	71	221	366
Visits re Infectious Diseases ...	55	144	108	281	295	22	815
Do. on School Reports ... ..	...	...	1	...	...	...	1
Tuberculosis—First visits ...	2	1	...	...	...	...	3
Do. Re-visits	1	3	...	...	...	...	4
Scabies ... ..	...	...	1	35	8	2	46
Vermin ... ..	...	...	...	...	...	16	16
OTHER VISITS—							
Police Courts	3	2	3	...	...	...	8
Various	158	295	229	3	...	1	686
MATERNITY—							
Visits:							
††Children under 1 year ... ..	...	...	...	229	103	170	502
Do. 1 to 5 years... ..	...	...	...	10	2	5	17
Expectant Mothers ... ..	...	...	...	55	11	19	85
Re-visits ... ..	...	...	...	850	444	1,105	2,399
Do. Expectant Mothers ... ..	...	...	...	30	8	22	60
Other Maternity Visits ... ..	...	...	...	105	47	18	170
Attendances at Maternity Centres	...	...	...	183	60	111	354
Total	5,061	5,620	6,474	2,031	1,019	1,718	21,923

† All outworkers' rooms in houses let in lodgings (these comprise the larger majority), have been inspected but the visits have been counted under inspections of houses let in lodgings.

†† See page 83.

The total number of notices served for nuisances found in dwelling houses and factories, workshops and workplaces, and premises subject to various By-laws, including 577 notices requiring annual cleansing of houses let in lodgings, was 1,503, viz:—

Public Health (London) Act, 1891—

Intimation Notices	...	...	...	...	...	...	543
Statutory Notices	...	...	...	...	...	...	76

By-laws—

Houses let in Lodgings	...	...	...	...	...	...	818
Fish Curer	...	...	...	...	...	...	1
Removal of Refuse	1

London County Council (General Powers) Acts—

Verminous rooms	57
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Rats and Mice (Destruction) Act, 1908	7
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 1,503

The following table shows the work done to abate nuisances for which intimation notices were served:—

Water Supply—

	Houses.	Factories, Workshops and Workplaces
Provided	6	—
Cisterns cleansed, repaired, etc.	30	6

Waterclosets—

Cleansed	16	14
Water supplied, flushing cistern repaired, etc.	19	6
Repaired, new pans, etc.	124	16
Ventilation improved	—	11
„ to lobby provided or improved	—	6
Separate accommodation for sexes provided	—	7
Position or construction improved	—	16
Direct communication with workrooms remedied	—	5
Accommodation provided	1	2

Soil Pipes—

Repaired, renewed and ventilated	1	—
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Rainwater Pipes—

Repaired or renewed	12	4
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Drains—

Repaired	10	2
Unstopped, cleansed, etc.	25	8

Sinks, etc.

Waste pipes repaired, renewed, etc.	30	8
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Yards, Areas and Washhouses—

Cleansed	20	7
Paved and paving repaired	28	2

Houses and Workshops, etc.

Cleansed	58	51
Dilapidations repaired and made good	65	8
Ventilation improved	2	—

	Houses.	Factories, Workshops and Workplaces.
Dampness—		
Roofs repaired	90	5
Gutters repaired	17	2
Other works to prevent dampness	11	2
Ashbins—		
Provided, repaired, etc.	46	11
Urinals—		
Repaired, cleansed, etc.	—	2
Various—		
Underground Rooms vacated	2	—
Smoke—Emission of black smoke abated	—	6
Accumulations of Refuse—Removed	33	10
Overcrowding abated	2	5
Animals—Improper keeping discontinued	3	—
Other nuisances abated	12	24

The following table shows the nuisances for which the 76 Statutory Notices were issued under the Public Health (London) Act, 1891.

	Houses.	Factories, Workshops and Workplaces.
Section 2 (a) Dirty and dilapidated premises, etc. ...	32	6
„ (b) and Section 37, Ashbins	4	—
„ (c) Drains and W.C.'s	26	8
„ (d) Accumulation of rubbish	5	1
„ (e) (g) (i.) Overcrowding	1	1
„ (f) and Section 48. Water supply	2	—
„ 38 W.C.'s communicating with workrooms	—	1
„ „ W.C. Absence of separate accommo- dation for sexes	—	2
„ „ Insufficient accommodation	—	2
„ 96 Underground rooms	2	—

By-laws as to Houses let in Lodgings.

At the end of the year 577 houses were registered under these By-laws. Of these, 285 are in St. Giles and Bloomsbury and 292 in the Holborn District.

There were 871 inspections of these premises, excluding a very large number of periodical inspections and re-inspections. 241 notices were served for breaches of the By-laws, exclusive of 577 notices that were served for annual cleansing as required by the By-laws.

Rats and Mice (Destruction) Act, 1919.

During the year 247 premises were inspected under the above Act, the total inspections being 290. Seven notices for breaches of the Act were served. As a result, in one case the drains were reconstructed and in the others accumulations of refuse in vaults under the pavement were cleared out and rat runs sealed up.

The following summary shows the condition found on inspection, the action taken and the results obtained.

WARD.	Number of premises inspected.	Number rat infested.	Action for Rat Repression.							RESULT.
			Traps.	Poisons.	Rat catchers.		Dogs.	Cats.	Proofing.	
					Council.	Other.				
A.	13	1	1	—	—	1	—	—	1	Rats still caught ...
B.	20	—	—	—	—	—	—	—	—	
C.	27	3	1	2	—	1	—	—	1	Free ... 3
D.	22	1	—	—	—	—	—	—	1	Rats occasionally seen 1
E.	9	6	2	3	—	—	—	—	5	Free ... 4 Numbers reduced ... 2
F.	24	12	2	1	—	—	1	—	9	Free ... 11 Numbers reduced ... 1
G.	15	9	2	1	—	—	—	—	7	Free ... 7 Numbers reduced ... 1 Work in progress ... 1
H.	72	17	3	4	1	4	—	3	2	Free ... 9 Numbers reduced ... 2 Rats occasionally seen 6
I.	45*	34*	6	8	3	4	6	9	1	Free ... 6 Numbers reduced ... 17 Rats occasionally seen 10 Rats still seen ... 1
	247	83	17	19	4	10	7	12	27	Free ... 40 Numbers reduced ... 23 Rats only occasionally seen ... 17 Rats still seen ... 2 Work still in progress 1

* Includes 12 Premises dealt with as an infested island site.

Rat Week.

In accordance with the suggestion of the Ministry of Agriculture and Fisheries, "Rat Week" was observed during the first week in November. The importance of this annual attack on the rodent population has long been recognised; it forms a fitting opportunity to remind the public of their duties under the Rats and Mice (Destruction) Act and, by means of suitable propaganda, to urge the necessity for rat destruction. But it would be a mistake to regard "Rat Week" as an end in itself; to concentrate all effort into a single week would at best produce a sporadic response and court comparative failure. The Sanitary Inspector and the occupiers of premises that are, or may be, rat infested, can only be assured of success by systematic routine work all the time. An essential for the success of any rat week is co-operation. The need for concerted action against rats can hardly be over-emphasised. This applies particularly in an old built up area such as Holborn where individuals are handicapped in their efforts to destroy rats by the difficulty or impossibility of dealing with conditions beyond their immediate control; the solution of the problem often depends on simultaneous action by all occupiers and owners of premises in infested areas. The failure of one occupier in an infested block will effectually mitigate against the successful extermination of rats in the area concerned.

In the observation of "Rat Week" in the Borough we endeavoured to secure, during the six days, intensive action and complete co-operation by occupiers in rat infested blocks, and efforts were made to deal effectively with the various causes at the roots of infestations. As a corollary to this, the importance of continuous systematic routine work for the extermination of rats and the prevention of re-infestation was emphasised.

The general arrangements made by the Council for rat repression included:—

(1) Systematic baiting in the Council's sewers, the bait used being small cubes of bread soaked in liquid extract of red squills, which is found to be more effective than barium carbonate. The baits were laid in the sewers 46 times during the year, including four times during the first week in November. A quarter of a gallon of the poison, making 1,000 baits, is used each time. The men who work in the sewers report that the baits are taken although dead rats are very rarely seen.

(2) The services of the Council's workmen were available for rat proofing subject to the cost of such service and the material used being defrayed by the owners or occupiers of the premises where the work was carried out.

(3) Arrangements were continued with a firm of rat catchers for dealing with rat infested premises at the cost of the occupiers. This arrangement has proved useful and reports are from time to time received from the rat catchers employed respecting their inspections of the premises and the work ultimately carried out.

Inspection of Workshops, etc.

The routine inspection of factories, workshops and workplaces has been carried out during the year. 317 factories were inspected, 617 workshops and 2,935 workplaces.

It is found that changes frequently occur in the occupation of workshops. To obtain information of such changes and further details of industrial conditions in the Borough a large number of visits and inspections were made in addition to the routine inspections mentioned above. As the result of these visits 123 premises no longer used for the purpose for which they had been registered were removed from the register of workshops. In eleven cases, owing to the introduction of machinery, former "workshops" had become "factories" and the necessary transfer to the factory register was effected. Variations in the staff employed were also frequently reported. During the year 173 workshops were added to the register.

It was necessary to serve the following notices for the abatement of sanitary nuisances in factories, workshops and workplaces.

	Intimation Notices.	Statutory Notices.
Factories	38	6
Workshops	80	9
Workplaces	51	2
	<hr/> 169	<hr/> 17

Of the 694 workshops on the register at the end of the year
 373 employed men only,
 62 employed women only, and
 259 employed both men and women.

The number of employees is often very small and many of the workshops are in tenement houses (houses let in lodgings).

No fewer than 167 different industries are carried on in these workshops, among the principal being the following :—

	No. of Workshops Employing			
	Men only.	Women only.	Both Sexes.	Total.
Boot makers and repairers	23	—	1	24
Builders	12	—	—	12
Cabinet makers	7	—	—	7
Carpenters	11	—	—	11
Clock and watch makers	16	—	1	17
Dressmakers and ladies' tailors	—	23	17	40
Diamond mounters	9	—	4	13
Engravers	21	—	—	21
Glass blowers	6	—	3	9
Jewellers	43	1	14	58
Lamp shade makers	—	3	3	6
Leather goods makers	5	—	7	12
Metal workers	9	—	1	10
Picture framers	11	—	2	13
Tailors	31	4	92	127

Factories.

These visits also afforded an opportunity for extending and revising information relating to "factories" in the Borough. Steps are being taken for the gradual compilation of a register of such places, and at the end of the year 400 factories had

been entered on the register. Workshops are automatically converted, at a very small cost, into factories by the installation of a small electric motor; the health conditions then may no longer be inspected by the Borough Council's staff except as regards sanitary accommodation.

The 400 factories include 54 different industries. In 209 cases men only were employed, in 8 women only, and in 183 both sexes.

The more important industries carried on in these factories are :—

Bookbinding	-	-	-	15
Engineering	-	-	-	43
Jewellers' work	-	-	-	13
Metal work	-	-	-	13
Printing	-	-	-	73

Factories (No. 2) Bill, 1926.

This Bill was introduced in the House of Commons by the Home Secretary on the 2nd August, 1926, to consolidate, and amend, the law relating to factories and workshops. In connection therewith I submitted the following report to the Public Health Committee:—

In a memorandum issued by the Home Office it is stated that the Bill has been introduced in order that the different industries affected may have an opportunity during the autumn and winter of examining the proposals for the amendment of the Factory Acts which are being put forward by the Government.

Although on the same general lines as the Bill introduced by the preceding Government in 1924, the present Bill differs in many respects from the former and some of the objections of local authorities to the earlier Bill have been partially met.

Distinction between "Factory" and "Workshop" to be abolished.

The Bill abolishes the distinction which exists under the present law between factories and workshops, and employs only one term "Factory," and, except where otherwise expressly provided, the provisions of the Bill apply indifferently to factories of all descriptions.

Sanitary control—as now administered.

Under existing Acts the provisions relating to the sanitary conditions of *workshops*, cleanliness, overcrowding, ventilation and the drainage of floors, are enforced in the first instance by the local sanitary authority, and not by the Factory Inspectors. In the case of *factories*, the Factory Inspectors are responsible. The provisions as to sanitary conveniences in both factories and workshops are, in London and places where Section 22 of the Public Health Acts (Amendment) Act, 1890, is in force, also enforced by the sanitary authorities.

Sanitary Authority's control to be transferred to Factory Inspector.

Under the Bill all the corresponding provisions are enforceable by the Factory Inspectors, except in any factory in which mechanical power is not used and which forms part of a dwelling-house or shop, or is adjacent to a dwelling-house or shop in the same occupation. In these instances, which are few in number and of comparatively slight importance, the local sanitary authority would still be the administrative body.

Delegation of Duty to Local Authorities.

In the earlier Bill it was proposed that the Secretary of State might arrange for the enforcement of the provisions by the local authority in factories in which mechanical power was not used.

The Bill now before Parliament provides that where the Secretary of State is satisfied that the duty of enforcing the general health provisions of the measure, in all factories in which mechanical power is not used, will be satisfactorily performed by a local authority willing to undertake the duty he *shall* delegate the duty to such Council.

Moreover, where the Secretary of State is satisfied that in London, or places where Section 22 of the Public Health Acts (Amendment) Act, 1890, is in force, the duty of enforcing as respects *all* factories the provisions of the Act as to sanitary conveniences, would be satisfactorily performed by a Council willing to undertake the duty, he is to delegate the duty to such Council.

The effect of these provisions in those areas where local Councils are willing to do this work, and can satisfy the Secretary of State that they could satisfactorily perform the duties, would be to maintain the *status quo*, and to this extent some of the objections to the former Bill have been met. On the other hand, the undesirable principle of the removal from local authorities of the enforcement of sanitary provisions and their transfer to Factory Inspectors is retained in the Bill and the provisions as now drafted would not seem to make for uniformity in administration.

Workshops (factories) in dwelling houses. Dual inspection.

Many workshops, factories under the definition of the Bill, are situate in, or adjacent to tenement houses, although these workshops are not "in the same occupation" as the part of the house used for dwelling purposes. The enactment of a measure on the lines of the present Bill would result in inspection and supervision of part of such houses by the Factory Inspectors, and part by the local sanitary authority.

Supervision of Drainage work—apart from Factory Law.

Under the existing law all drainage work and the construction or reconstruction of all sanitary conveniences have to be carried out under the supervision and to the satisfaction of the local authority; the suggested transfer to the Factory Inspector of control respecting the sanitary condition of factories would not remove this responsibility but might complicate this important branch of the work of local authorities by unnecessary overlapping.

Food Factories.

It may also be mentioned that the work carried on in a large number of factories and workshops is connected with the preparation, manufacture, or packing of various foods. The supervision of such places so far as the food is concerned is a responsible duty of the local authority; it would seem desirable that the sanitary conditions under which the work is done should remain under the control of the authority responsible for securing the purity of the food.

The Bill admits this principle to the extent of providing that the Section respecting underground *bakehouses* is to be administered by the local authority, but on the other hand the section dealing with other underground workshops now extended to include places where food is prepared for human consumption, is to be administered by the Factory Inspector. This is much to be regretted.

Bill creates startling precedents.

It appears to be a matter of very considerable importance that the sanitary authority should be responsible for the sanitation of all places within its jurisdiction.

This is the first piece of legislation which has removed any premises from the sanitary control of a local authority. With the exception of buildings occupied by H.M. Government in all branches, the hygienic arrangements of every building in an area comes under the local Council.

When the Act establishing the Ministry of Health was passed it was contemplated that all future steps would be in the direction of unifying and concentrating the duties and powers concerning public health under the public health authority. In 1921 certain duties relating to health enacted under the Factory and Workshops Act, 1901, were transferred from the Home Office to the Ministry of Health; at this time an official circular stated that:—"it seems to the Minister that the enforcement of the provisions relating to *bakehouses* can better be undertaken locally than centrally, especially as the work is of the same character as that

at present performed by the sanitary staff of local authorities in relation to retail bakehouses under Section 102 of the Act of 1901." The proposals in the Factory Bill go directly against this movement.

No saving effected by new proposals.

It has been stated that the handing over of the duties hitherto carried out by Sanitary Inspectors to Factory Inspectors is designed to prevent duplication of inspection work which is stated to cause needless expense and trouble. It is difficult to conceive that such statements can be justified; the work is carried out by an existing sanitary staff; no new duties are imposed by the Factory Bill on the existing staff as far as is known; no new sanitary staff is wanted. We have worked out that only 13 per cent. of the inspections made by the Sanitary Inspectors in this Borough would be affected; there is no question of lessening the cost of sanitary inspections in this Borough. At present the only expense involved is the cost of very infrequent letters from the Factory Inspectors stating that they have found an infringement of a sanitary regulation and calling the attention of the Public Health Department to the matter.

Efficiency of service by Sanitary Inspectors.

No complaints generally have been raised as to the visits of Sanitary Inspectors who, from their long experience of the work, have been able to form practical judgments of the various requirements under the Acts so that the work can be carried on in the spirit rather than in the letter of the law. On the contrary, there is reason to believe that employers in the district as regards such matters as sanitation would prefer that the local authority supervised them rather than a Central Body.

I recommend:—

(A) "That the attention of the Minister of Health be directed to the proposals contained in the Factories (No. 2) Bill, 1926, relative to the sanitary control of workshops and factories and he be informed that in the opinion of the Council existing powers of control should continue to be a responsibility of sanitary authorities."

(B) "That a copy of the above resolution be forwarded to the Corporation of the City of London, the Metropolitan Borough Councils, the Metropolitan Boroughs Standing Joint Committee, the Municipal Corporations Association and the London Chamber of Commerce, and that they be asked if in agreement therewith to take similar action."

The Public Health Committee agreed with the foregoing recommendations and at its meeting on the 24th November, 1926, the Council adopted the following recommendation:—

"That the attention of the Minister of Health be directed to the proposals contained in the Factories (No. 2) Bill, 1926, relative to the sanitary control of workshops and factories and he be informed that, in the opinion of the Council, existing powers of control should continue to be a responsibility of sanitary authorities."

Copies of the foregoing resolution were forwarded to the Minister of Health, the Corporation of the City of London, the Metropolitan Borough Councils, the Metropolitan Boroughs Standing Joint Committee, the Municipal Corporations Association and the London Chamber of Commerce.

At the date of preparation of this report replies have been received from 17 Metropolitan Boroughs, 13 of whom adopted a similar resolution, three referred the matter to the Metropolitan Boroughs' Standing Joint Committee and one took no action because the Bill was not being proceeded with in the, then, current session of Parliament. It would appear that progress of the measure is likely to be further postponed, but it is essential that, in the meantime, opportunity should be taken by local authorities to express their view that there should be no curtailment of their powers and duties in connection with the sanitary supervision of factories, workshops and workplaces.

Smoke Abatement.

The smoke shafts in the Borough were frequently kept under observation and in 340 cases the inspections were recorded. Some of these observations were made in the early morning when smoke pollution is more prevalent. Generally the observations extended over periods of not less than one hour. Seven complaints were also received. As the result of the inspections six intimation notices were served.

Much of the black smoke nuisance arises from careless or inefficient stoking. Stoking is usually considered an unskilled employment, and the stoker commonly receives but little instructions how to carry out his work. With a view to encouraging careful and efficient stoking, poster cards giving practical instruction as to stoking, and suitable for hanging in boiler rooms, were obtained and a number of employers agreed to exhibit them.

During a part of the year, owing to the coal strike, nuisances were caused from black smoke due to the use of inferior coal, but every effort was made to ensure that as soon as possible the use of suitable coal was resumed.

Common Lodging Houses Acts, 1851 and 1853.

Twelve Common Lodging Houses are registered in the Borough for 920 lodgers, viz., 842 males and 78 females.

The Common Lodging House accommodation in Holborn is equal to 21 beds per 1,000 of the population. The death-rate amongst common lodging house residents is very high; in this Borough it was 57·6 per 1,000 in 1926.

FOOD.

Dairies, Cowsheds and Milkshops.

The number of registered dairies and milkshops in the Borough at the end of the year was 124. Eleven retail dairies and milkshops were newly registered, and sixteen removed from the register.

In addition to my inspections the Sanitary Inspectors made 157 inspections of these premises. It was not necessary for any notice to be served for sanitary defects or breaches of regulations.

Residue from Milk Clarifiers.

As it would seem probable that pigs have been infected with tuberculosis as a result of feeding with infected milk and slime from clarifiers, enquiry was made at the various establishments in the Borough where milk is cleansed by clarifiers to ascertain what is done with the residue after the milk has been passed through the cleansers. It was found in one case that this residue is at once destroyed by burning in a furnace used in connection with a pasteurising plant, in all other cases it is at once washed down the drains.

Bacteriological Examination of Milk.

Twenty-five samples of milk were examined for the presence of tubercle bacilli; five of these were also examined to ascertain the number of organisms per cubic centimetre and the smallest volume containing *B. coli*.

Examinations for tubercle bacilli were carried out by animal inoculation; three of the samples examined were found to contain tubercle bacilli.

The following table refers to the samples examined as mentioned above:—

Date sample taken.	Nature of Shop where purchased.	No. of Organisms per cc. grown at 37° C for 24 hours.	Minimal volume containing <i>Bacillus Coli</i> .
1926			
Aug. 3	Large milkshop... ..	5,600,000	0·0001 cc.
Aug. 11	Large milkshop... ..	25,000,000	0·00001 cc.
Oct. 26	Large milkshop... ..	125,000	0·001 cc.
Nov. 18	Small milkshop	3,900,000	0·00001 cc.
Dec. 10	Refreshment rooms	90,000	1 cc.

Dirt in Milk.

During the year 100 samples were examined in the Health Office for dirt; no dirt was found in any sample.

The problem of securing a clean milk supply in a Central London area is one of considerable difficulty. It is only partially met by the institution of the "designated" milk. Comparatively few retailers have much demand for this milk and the amount retailed by some licence holders is very small; the public is not disposed to pay the higher price charged for designated milk; indeed, many of the poorer inhabitants could not afford to do so.

The extra cost of producing Grade A Tuberculin Tested milk is creditably stated to be 2·86d. per gallon. The extra price obtained by the farmer is only 3d. a gallon. Thus for all his trouble the farmer only receives 0·14d. per gallon. Small though this profit be, once farmers are licensed for the production of designated milk they do not revert to the old methods of production.

The expense is chiefly involved in the collection of a herd of suitable cattle. Owing to the elimination of tuberculosis and the supervision by veterinary surgeons (a requirement for the granting of a licence for the production of designated milk) the general health of the cows is improved with the result that the quantity of milk is maintained at a high level and there are very few, if any, "wasters" and no loss when the milch cows are sold for meat. The consumer obtains milk from healthy cows which is free from tubercle bacilli, contains a minimum of other bacteria, is clean and will keep fresh for a reasonable period, an advantage of considerable importance to the town dweller who cannot get milk fresh from the cow.

The value of the Milk (Special Designations) Order is, to no small extent, in its educational effects. The existence of such arrangements shows milk producers that clean milk can be produced on farms and that medical opinion has been able to convince the representatives of the public of the importance of keeping milk as free as possible from bacteria and, above all, from tubercle bacilli.

In the year 1922 arrangements were instituted in Holborn for the systematic examination of samples of milk for the presence of dirt. The routine covers the ascertainment of the amount of dirt deposited by a certain volume of milk; it is found useful in that it is a handy measurement, the examination being readily

carried out in the absence of a bacteriological laboratory. In cases where dirt has been found in any considerable quantity further samples have been obtained and submitted to the Borough Analyst for examination.

In the five years 1922-26, 455 samples were examined for dirt in the Public Health Department. In 13 of these dirt was disclosed, ranging from a trace up to 17 parts per 100,000 by volume. During the same period 23 samples were submitted to the Borough Analyst, 21 being certified as containing dirt, the amount ranging from a trace up to 2.2 parts per 100,000. It will, therefore, be seen that in the five years of routine work seven per cent. of the samples examined gave evidence of the presence of dirt.

This examination for dirt cannot, of course, be compared for efficiency with bacteriological examination. In the same five years (1922-26), 103 samples were submitted for bacteriological examination for (1) tubercle bacilli, (2) organisms per c.c. at 37° C., and (3) minimal volume containing *B. coli*. Ten samples showed definite evidence of tuberculous infection, whilst amongst the organisms found in addition to tubercle bacilli and *B. coli* were *B. faecalis alkaligenes*, *B. enteritidis sporogenes* and streptococci.

The number of organisms found on bacterial counts, as will be seen from the following table, ranged from 9,760 to 25,000,000 per c.c.

Date of Examination.		Number of organisms per c.c. grown at 37° C for 24 hours.
Year.	Month.	
1922	November	9,760
1923	"	11,750
1922	"	12,600
"	"	14,940
1925	"	21,700
1923	"	28,000
"	"	32,000
1924	"	33,100
"	"	37,250
1925	"	44,000
"	"	51,090
1924	"	51,250
1925	"	52,400
1923	"	55,000
1924	"	57,650
1922	December	86,000
1926	"	90,000
1925	November	96,000
1926	October	125,000
1923	November	240,000
1922	December	279,000
1924	November	328,400
1922	December	352,000
1923	November	420,000
1924	"	423,000
1926	"	3,900,000
"	July	5,600,000
1925	November	11,250,000
1926	August	25,000,000

Having discovered a dirty or infected milk, all possible action is taken to improve the retail conditions, and to prevent contamination in the shop or on the round; but in most cases it is impracticable to supplement this with effective action to deal with the milk at the place of production, because the place of production cannot be ascertained, owing to the practice of collecting milk from many farms to large creameries and milk depôts where the milks are mixed and pasteurised before distribution to the retailers.

As mentioned above three samples in 1926 showed evidence of tuberculous infection.

In the first of these the vendor Company stated that the milk undoubtedly came from one of the Company's farms, but, as it was cooled and mixed at their refrigerating depôt in the country and again mixed and cooled before being put into cold store, it was *impossible to tell from which farm the actual sample came*. The facts connected with the purchase and examination of this sample were furnished to the Medical Officer of Health of the County where the vendor's farms are situated. Subsequently information was received from this County Medical Officer of Health that samples of milk from ten farms supplying the Holborn Dairy had been examined; four were found to contain acid fast bacilli indistinguishable microscopically from tubercle bacilli. In respect of the four farms from which the positive samples were obtained the veterinary surgeon reported that he examined all the cows and, with one exception, found them free from clinical symptoms of tuberculosis, including tuberculosis of the udder. The one cow referred to was reported on as follows:—"This cow is sound in udder, but may be tuberculous and should be removed. This cow has been isolated for some time."

In the second case the Holborn retailer obtained the milk from a large wholesale Company. In reply to enquiries this Company stated that it was *impossible to tell where the particular milk came from*, but thought it might have been taken "direct from the station without pasteurising" contrary to their regulations.

In the third case also the retailer obtained the milk from a large wholesale dealer, who, in turn, obtained supplies from provincial wholesale milk, cream and butter merchants. In this case it was possible to ascertain the creamery, but not the farm, from which the milk came. Milk was received at this creamery from 38 farms. In co-operation with the County Medical Officer of Health, the wholesalers arranged for all the herds on these farms to be examined by the County Veterinary Surgeon. As a result it appeared that at all farms but two the herds were found in good condition and free from infectious and contagious diseases. At one of the two exceptions, however, a cow was ordered to be turned out of the dairy, and at the other a cow was reported under the Tuberculosis Order.

It will thus be seen that, as in previous years, the action taken by the Council, leading to the discovery of infected milk, is largely stultified by the modern practice of mixing milk at large creameries, often rendering it impossible to trace a milk supply to the place of production. The remedy would seem to be in the direction of sufficient examination of milk as it enters the large creameries and

mixing depôts, and more stringent supervision at the sources of production. Examination of milk as it leaves these places would be required in order to control the carrying out of the routine.

The Milk (Special Designations) Order, 1923.

During the year 1926 licences available up to the 31st December, 1926, for the sale of designated milk in the Borough were issued as follows:—

Certified Milk	...	...	...	...	...	...	...	5
Grade A (Tuberculin Tested)	...	...	...	...	...	...	...	6
Grade A	...	...	...	...	...	...	...	2
Pasteurised	...	...	...	...	...	...	...	3

Up to the date of preparation of this report licences for the year 1927 have been issued as follows:—

Certified Milk	...	...	...	...	...	...	...	4
Grade A (Tuberculin Tested)	...	...	...	...	...	...	...	4
Grade A	...	...	...	...	...	...	...	2
Pasteurised	...	...	...	...	...	...	...	3

Public Health (Milk and Cream) Regulations, 1912 and 1917.

The Public Health (Milk and Cream) Regulations, 1912-1917, were enforced in the Borough throughout the year.

One hundred and seventy-nine samples of milk were examined; none was found to contain preservative; 6 samples of cream were examined, 1 of which was found to contain a trace of preservative, viz., boric acid.

Sixteen samples of preserved cream were examined and found to be in accordance with the Regulations, the statement on the labels as to the amount of preservative being in each case correct. In all the samples of preserved cream the fat exceeded 35 per cent. No contravention of the Regulations, other than that mentioned above, was discovered during the year.

Condensed Milk.

The Public Health (Condensed Milk) Regulations, 1923, came into operation on the 1st November, 1923.

During the year 1926, 17 samples of condensed milk, viz., seven full cream, and ten skimmed sweetened, were examined by the Borough Analyst under the Regulations.

All the samples complied with the requirements of the Regulations as to labelling.

All the samples were examined for standard of composition and all were found to be equal to or above the standard required,

The following table gives the percentages of the milk fat and milk solids found:—

	Milk fat per cent.	Milk solids (including fat) per cent.
Full cream unsweetened	9.00	32.8
" " " " " " " " " "	9.10	31.6
" " " " " " " " " "	9.10	33.0
Full cream sweetened	9.20	31.8
" " " " " " " " " "	9.20	32.2
" " " " " " " " " "	9.00	32.8
" " " " " " " " " "	9.20	32.8
Skimmed " " " " " " " " " "	1.0	28.6
" " " " " " " " " "	1.0	27.3
" " " " " " " " " "	0.6	27.4
" " " " " " " " " "	0.6	28.8
" " " " " " " " " "	0.5	33.1
" " " " " " " " " "	0.4	33.3
" " " " " " " " " "	0.4	26.2
" " " " " " " " " "	0.3	26.4
" " " " " " " " " "	0.2	27.0
" " " " " " " " " "	0.2	26.1

Public Health (Dried Milk) Regulations, 1923.

These Regulations came into operation on the 1st day of May, 1924, and are generally similar to the Regulations with regard to condensed milk.

Very few brands of dried milk are sold in the Borough. Eight samples, covering those generally used, were obtained during the year, and found to comply with the Regulations.

Margarine.

The registration of wholesale margarine dealers is required by Section 9 of the Margarine Act, 1887, as extended by Section 7 of the Sale of Food and Drugs Act, 1899. Under this Section every wholesale dealer in margarine is required to keep a register showing the quantity and destination of each consignment and the register is open to inspection by any officer of the Board of Agriculture.

The Local Authority has no power to refuse registration or to set up any standard of requirements before effecting such registration.

There are five registered dealers in the Borough.

Bakehouses.

At the end of the year 1926 there were 24 bakehouses in the Borough of which 19 were factory bakehouses. Although these are described as "factories" they are not large and only supply local needs; a number were formerly workshops and are now classified as "factories" owing to the installation of machinery. Five bakehouses, including four underground bakehouses, were removed from the register on account of disuse.

During the year, in addition to my inspections, there were 66 inspections of bakehouses.

Fried Fish Shops.

The fried fish shops in the Borough are regularly inspected to see that they are kept in conformity with the By-laws made by the London County Council. Two hundred and twenty-six inspections of such premises were made last year. At the same time a careful look-out is kept on the soundness of the fish and the wholesomeness of the materials used in frying.

Sale of Fish.

In addition to the fried fish shops referred to in the previous paragraph, fish is sold in the Borough at five fish shops and eight stalls. There are also two shops where shellfish is sold and one where stewed eels are sold. All these shops and stalls were regularly inspected during the past year.

In four of the five fish shops the fish was exposed for sale on stallboards extending beyond the front line of the shop, but in all these cases the fish was protected by sun blinds and side screens. In one case the shop, particularly the floor, was found in a dirty condition and the boxes containing the fish, prior to unpacking, were stored on the pavement in positions where it was possible for the fish to be fouled by passing dogs. The attention of the proprietor was called to the matter and steps were taken by him to improve the conditions; the shop is now swept every day and the floor washed at least once every week, the boxes with the fish are no longer put on to the pavement. In no other case was there any evidence of contamination of the fish by flies, dust, soot, etc.

Three of the eight stalls where fish is regularly sold are in the Central Markets and are almost in the nature of shops. At seven of the stalls both fresh and dried fish was sold and at one fresh fish only. On four of the stalls the fish was protected by tarpaulin or canvas covers or screens over the top and at the sides and back, but in four no such protection was provided. In three of the stalls in the Central Markets water supply is laid on to the slabs on which fish is exposed for sale.

Market Streets.

There were 791 inspections of market streets, each of which includes a number of stalls at which meat, fish, fruit and vegetables are sold. These streets are regularly inspected daily and on Saturday evenings and Sunday mornings.

The daily inspection of these market streets helps to secure the maintenance by the regular stallholders of good, sound food only, and, in addition, has the effect of keeping away from these markets casual and unsatisfactory hawkers, who generally avoid markets subject to regular and strict supervision.

In order to minimise as far as practicable any contamination of the food exposed for sale in market streets from dust arising during street cleansing, the Borough Surveyor has arranged for these streets to be sufficiently watered before the scavenging to prevent dust arising.

Ice Cream.

During the year there were 64 premises in the Borough where ice cream was manufactured, and in addition to my inspections 174 inspections of these premises were made, and five notices were served.

Ice cream is manufactured in the Italian colony as follows:—

Premises on which 20 gallons made daily	1
" " 10 " " "	3
" " 8 " " "	1
" " 4 " " "	8
" " 2 " " "	9

In addition ice cream was also manufactured on the following premises:—

	Mr. Bennett's District.	Mr. Clark's District.	Mr. Larard's District.
Restaurants ...	5	2	2
Confectioners ...	6	7	6
Other ...	2	9	3

During the summer of 1926 ten samples of ice cream were purchased and submitted to bacteriological examination.

The result of the bacteriological examination is shown in the following table:—

Sample and date purchased.	Where purchased.	Organisms per cc. growing on Agar at 37° C for 24 hours.	Streptococci present in 1 cc.	Minimum volume showing coliform organisms.*	Minimum volume showing B enteritidis sporogenes.
1 13/8/26	Street barrow	20,000 million	present ...	·0001 cc.	·0001 cc.
2 "	Street stall ...	700 "	present (long-chained)	·0001 cc.	not observed in 1 cc.
3 "	Street barrow	1,000 "	none observed	·000001 cc.	not observed in 1 cc.
4 "	Street barrow	5,000 "	present ...	·01 cc.	·00001 cc.
5 "	Street stall ...	1,500 "	none observed	1 cc.	not observed in 1 cc.
6 6/8/26	Dairy ...	600 "	present ...	·000001 cc.	·00001 cc.
7 "	General shop	400 "	present ...	1 cc.	·00001 cc.
8 "	Restaurant ...	800 "	present ...	·0001 cc.	·00001 cc.
9 "	Restaurant ...	600 "	present (long-chained)	·01 cc.	1 cc.
10 "	Confectioner	400 "	none observed	not observed in 1 cc.	·00001 cc.

* Types of coliform organisms present approximated to *B. coli* group, *B. lactis aerogenes* group, and *B. faecalis alkaligenes*.

The bacteriological examinations were carried out at the Royal Institute of Public Health. Samples were delivered at the laboratory of the Institute

immediately after purchase and arrangements were made for the examinations to be commenced forthwith.

The ice cream from which sample No. 1 in the above table was purchased was exposed for sale in small blocks on a barrow. The blocks of frozen material were entirely uncovered and unprotected from contamination by dust. It will be seen that the examination disclosed a very large number of organisms. The ice cream was made at premises situated in the Borough where the conditions of manufacture were satisfactory. As a result of representations made to the vendor the exposure for sale of the commodity unprotected from contamination was discontinued.

One of the ten samples examined, No. 3, was purchased because the cleanliness of the vendor-maker had been reported as unsatisfactory and the cleanliness of the premises, where the commodity was made, was also unsatisfactory. The making of ice cream in the room complained of has been discontinued until the premises have been rendered suitable for the purpose.

The samples Nos. 1 to 5 were purchased from vendors considered to be amongst the less satisfactory of those dealing with this commodity in the Borough, and the samples Nos. 6 to 10 were purchased from better class vendors. It will be seen that the former group gave evidence of more contamination than the latter.

In nine cases the ice cream was made at premises in the Borough all of which are kept under regular supervision. In one case, No. 8, the ice-cream was made at a large manufactory outside the Borough.

Following the examination of these samples of ice cream a circular letter with a series of suggestions for improving the condition of manufacture and storage and sale of this commodity was prepared and sent to all ice cream makers in the Borough.

It is hoped in this way to secure the co-operation of ice cream makers in efforts to prevent its contamination.

Where ice cream sold in the Borough is made at premises outside Holborn, it is our practice to ask for information as to the conditions of manufacture from the Medical Officer of Health of the area concerned. On the other hand, we receive a number of such enquiries from other districts respecting ice cream made in Holborn, principally in the "Italian Colony," and sold in other districts.

Ice cream is being consumed in increasing quantities in this country and its growing popularity, particularly during the summer months, adds urgency to the suggestion that this food should be subject to a standard and its manufacture controlled by regulations similar to those in some British Dominions and elsewhere.

In Queensland for example ice cream is to contain not less than ten per cent. milk fat and no thickening substance other than gelatine may be added.

In Western Australia ice cream is a foodstuff composed of milk and cream with sugar, with or without fresh eggs, flavoured with fruit or with the juice or pulp of fruit or nuts or harmless vegetable flavouring substances; the addition of more than one per cent. thickening substance is prohibited.

In New Zealand there is a bacteriological standard by which ice cream and ices are not to contain more than 50,000 micro-organisms to the cubic centimetre nor any harmful or pathogenic organisms.

In New South Wales ices have to be kept so as to be protected from contamination; also there is a bacteriological standard similar to that in New Zealand.

In Victoria ice cream is to contain not less than ten per cent. fat derived from eggs and milk.

Sale of Sweets.

In the early part of the year a complaint was received respecting the condition of sweets exposed for sale in the window of a retail sweet shop. On inspection it was found that sweets containing nuts, exposed in the window, were badly eaten by mice although there was no further evidence of mice in the remaining part of the shop. The shop was managed by an assistant about seventeen years of age, the proprietor being there only occasionally. It was reported that the window was dressed every two or three weeks. Requests were made to the occupier for the immediate clearing of the window for examination and mouse proofing, also for the removal of unnecessary boxes stored in the basement and ground floor, and for the keeping of a cat or the use of a mouse poison. As a result of the representations made to the occupier effective steps were taken by him to clear the premises of mice and at the date of the preparation of this report the premises were reported to be still clear.

Detailed inspections were made of other shops in the Borough where sweets are sold. In all 129 such premises were inspected, in 19 of these sweets only were sold, in 58 the trade was associated with the sale of refreshments, and in the remaining instances with some other trade. In only two cases were the sweets made on the premises.

In 113 shops the sweets were suitably covered at night and in only one out of the whole number was definite evidence of dust discovered on the sweets; no case was reported where the sweets were contaminated by flies.

The following table gives details of the inspections:—

SWEET SHOPS INSPECTED.

	Mr. Bennett	Mr. Clark	Mr. Larard	Total
Number of Shops inspected ...	35	37	57	129
Type of trade—				
Large ...	4	13	14	31
Medium ...	17	11	18	46
Small ...	14	13	25	52
Trade carried on—				
Sweets only ...	2	7	10	19
Newspapers ...	4	—	2	6
Tobacco ...	3	5	4	12
Grocery ...	3	5	8	16
General ...	4	6	6	16
Refreshments ...	19	14	25	58
Other ...	—	—	2	2
Sweets made on premises ...	0	1	1	2
Evidence of mice ...	0	2	0	2
Dust on sweets ...	0	0	1	1
Sweets covered at night ...	30	34	49	113
Windows dressed—				
Daily ...	9	7	11	27
Weekly ...	18	9	18	45
Fortnightly ...	5	12	24	41
Monthly ...	2	8	4	14
Longer intervals ...	—	1	1	2
No window display ...	1	—	—	1
Scoops used ...	3	12	33	48
Cleanliness of person and clothing of assistants				
Satisfactory ...	35	34	55	124
Fair only ...	—	3	1	4
Dirty ...	—	—	1	1
Provision for washing hands ...	35	37	56	128
Evidence of flies ..	0	0	0	0

In the one case where dust was reported steps were taken, at the request of the Inspector, for the better protection of the sweets and considerable improvement effected.

In both cases where there was evidence of mice the necessary steps were taken for the extermination of the vermin and on subsequent inspections, up to the date of the preparation of this report, the premises were found free from mice.

In one case a notice served for cleansing the premises was at once complied with and in another case cleansing was carried out without the necessity of a notice being served.

In addition to the above, nine stalls for the sale of sweets were inspected, all of these were found to have top covers, eight had side screens and two were also provided with back screens. No evidence of contamination by dust or flies was found on the sweets exposed for sale on any of the nine stalls. In five cases

the hands and clothing of the servers were reported as clean but in four cases as only fairly so. In all cases where the hands or clothing of servers were not satisfactory the proprietors of the shops or stalls concerned were interviewed and at subsequent inspections considerable improvements were observed in all cases.

Public Health (Meat) Regulations, 1924.

These Regulations came into operation on the 1st April 1925; they deal with slaughter-houses, meat marking, the handling of meat in wholesale markets, conditions of transport, the protection of meat in butchers' and other shops and on stalls from contamination by flies, mud and other contaminating substance.

The following summary shows the number of butchers' shops and meat stalls in the Borough, and the number of other shops where meat is sold:—

Butchers' shops	...	...	...	...	...	27
Butchers' stalls	...	...	...	...	...	3
Provision dealers	...	...	...	...	...	25
Provision dealers' stalls	...	...	...	...	...	3
Offal shops	...	...	...	...	...	3
Cooked meats	...	...	...	...	...	10
Wholesale (bacon; sausage)	...	...	...	...	...	3
						—
						74
						—

All the butchers' shops and meat stalls in the Borough are regularly inspected to ensure compliance with the regulations; during the year 625 such inspections were made.

It is regretted that in a few cases (seven) the undesirable practice continues of exposing meat for sale outside the shop on stallboards projecting beyond the building line. If all butchers selling from shops were required to discontinue the practice of exposing meat in front of their shops it is difficult to see that any hardship would be caused. It is noteworthy that during the hot weather, in the best shops, very little meat is displayed; it is in the cold storage plant, but no one contends that the sale of meat is thereby prejudiced. Any attempt to convert the benches into imitation stalls is not in accordance with hygienic ideals. The existence of stalls in market streets in the form allowed by the Regulations is countenanced because it is thought their existence enables meat to be sold at competitive prices and so tends to bring down the prices generally at which meat is sold to the public.

In all cases in the Borough, where meat is exposed for sale outside shops or on stalls, suitable screens are provided and used for the protection of meat, as far as practicable, from dust, mud and other contaminating substances.

The practice of handling meat by customers before purchase has generally ceased in the Borough. In the shops where "pieces" are sold, a notice is exhibited urging customers not to handle meat before purchase, and in most of these shops forks are provided to enable the pieces to be turned over by purchasers without direct handling. As a result of their observations and enquiries the Inspectors report that the forks so provided are generally used.

It is satisfactory to record that it has not been necessary in any case to serve notice for breach of the Regulations.

In the early part of the present year (1927), a conference on the Public Health (Meat) Regulations was held at the Royal Sanitary Institute. Attention was drawn to the lack of uniformity in carrying out the Regulations in different administrative areas, and consequent dissatisfaction in the meat trade. Reference was also made to the different experiences by local authorities in their efforts to obtain glass fronts to butchers' shops; there was, however, evidence that butchers who had studied the question, from the economical standpoint, kept their meat behind closed glass windows and so prevented the meat losing its bloom, thus necessitating sale at a cheaper rate. It was pointed out that in a large provincial town two firms, one with fifty and one with forty branches, had provided fixed glass windows to all their shops with no loss of trade when the practice of hanging up meat outside the shops was discontinued.

In connection with the difficulties arising from the sale of meat from street stalls, reference was made to the practice in some continental towns where all meat exposed for sale on meat stalls has to be kept behind glass.

Places where Food is prepared for Sale.

Under this head are included kitchens of hotels, restaurants and eating-houses of all sorts, slaughter-houses, tripe, offal and other meat shops, fried fish, eel and other fish shops, premises where ice cream is made, and other places where food is prepared for sale, excluding bakehouses.

The number of such places on the register at the end of the year was as follows:—

Hotels, Restaurants and Eating Houses	235
Slaughter-houses	1
Tripe, offal and other meat shops	33
Fried Fish shops	11
Fish shops	14
Ice Cream (Manufacture)	64
Poulterers	3

During the year 2,587 inspections of food premises and market streets were made and 27 notices served for sanitary defects found.

Sanitary Accommodation for Customers at Restaurants, etc.

The question arises from time to time of the necessity for the provision in restaurants of sanitary accommodation for customers of both sexes. Many of the larger and better equipped restaurants provide suitable accommodation, a much appreciated boon, particularly in Central London, where such restaurants are largely used by strangers to the Metropolis. There is something to be said in favour of such provision being required in all restaurants, or at least in all the larger establishments, although everyone recognises that in crowded areas where space is valuable it is not always easy to spare the superficial area. At times the nearness of public sanitary conveniences renders provision in a restaurant less imperative. Under various local Acts relating to provincial towns sanitary accommodation must be provided for customers.

Unsound Food.

The following unsound food was condemned during the year 1926 :—

Commodity.	Quantity.	Condition.	Result of Action taken.
FISH :—			
Plaice	6 stone ...	Decomposed	Surrendered
Cod	6 stone ...	Do.	Do.
Whelks	$\frac{1}{2}$ cwt. ...	Do.	Do.
FRUIT :—			
Apples	48 barrels (1 ton, 1 cwt.)	Rotten	Do.
Bananas	2 $\frac{1}{2}$ tons ...	Do.	Do.
Black Currants	9 $\frac{1}{2}$ cwt. ...	Do.	Do.
Lemons	76 cases ...	Do.	Do.
Oranges	5 tons ...	Do.	Do.
VEGETABLES :—			
Onions	2 $\frac{1}{2}$ tons ...	Do.	Do.
MEAT :—			
Bacon	35 lbs. ...	Decomposed	Do.

Sale of Food and Drugs Acts.

In December, 1926, the Public Health (Preservatives, etc., in Food) Amendment Regulations, 1926, were issued postponing the operation of the 1925 Regulations so far as certain foods are concerned and making certain minor alterations in those Regulations.

The dates on which the principal Regulations as now amended came, or will come, into operation are as follows :—

- (1) All foods except those specified below 1st January, 1927.
- (2) Bacon, ham, egg yolk and articles of food containing preservative necessarily introduced by the use in their preparation of preserved margarine 1st July, 1927.
- (3) Butter, cream and articles of food containing preservative necessarily introduced by the use in their preparation of preserved bacon, preserved ham, preserved egg yolk or preserved cream 1st January, 1928.
- (4) Articles of food containing preservative necessarily introduced by the use in their preparation of preserved butter 1st July, 1928.

In the year 1926, only four articles of food (other than butter, margarine and preserved cream) purchased in the Borough, were found to contain preservative, viz., cake 2, Swiss roll 1, sausages 1.

The following observations refer to samples purchased and analysed during the year :—

Apples.

Thirty-five samples of imported apples were examined for the presence of arsenic. In 12 of these no arsenic was found. In 22 the amount of arsenic was

less than $\frac{1}{100}$ grain per pound and, therefore, no proceedings were called for. In one case the amount of arsenic was certified by the Public Analyst to be 0.000167 per cent., equal to $\frac{1}{6000}$ of a grain of arsenic trioxide per pound. In this case legal proceedings were taken; the summons against the vendor was dismissed on payment of £5 costs.

The following table gives particulars of the 35 samples above referred to:—

Variety.	Amount of Arsenic (if any).
Newtown Oregon - - -	$\frac{1}{700}$ grain per pound
Newtown Oregon - - -	$\frac{1}{475}$ do.
Newtown Oregon - - -	$\frac{1}{800}$ do.
Newtown Oregon - - -	$\frac{1}{840}$ do.
Newtown Oregon - - -	$\frac{1}{475}$ do.
Newtown Oregon - - -	$\frac{1}{430}$ do.
Newtown Oregon - - -	$\frac{1}{285}$ do.
Newtown Oregon - - -	$\frac{1}{750}$ do.
Newtown Oregon - - -	$\frac{1}{357}$ do.
Newtown Oregon - - -	$\frac{1}{64}$ do.
Newtown Oregon - - -	— nil
Newtown Oregon - - -	— nil
Newtown Oregon - - -	$\frac{1}{110}$ grain per pound
Jonathan - - -	$\frac{1}{130}$ do.
Jonathan - - -	$\frac{1}{950}$ do.
Jonathan - - -	$\frac{1}{240}$ do.
Jonathan - - -	$\frac{1}{530}$ do.
Jonathan - - -	$\frac{1}{110}$ do.
Jonathan - - -	$\frac{1}{325}$ do.
Jonathan - - -	— nil
Sturmer Pippin - - -	$\frac{1}{1100}$ grain per pound
Sturmer Pippin - - -	$\frac{1}{210}$ do.
Sturmer Pippin - - -	— nil
Sturmer Pippin - - -	— nil
Cleopatra - - -	$\frac{1}{530}$ grain per pound
Cleopatra - - -	— nil
Cleopatra - - -	— nil
Dunn's Favorite - - -	$\frac{1}{145}$ grain per pound
Dunn's Favorite - - -	— nil
York Imperial - - -	$\frac{1}{900}$ grain per pound
South African - - -	— nil
Cox's Orange Pippin - - -	$\frac{1}{715}$ grain per pound
New York Pippin - - -	— nil
London Pippin - - -	— nil
King David - - -	$\frac{1}{1000}$ grain per pound

Cake.

Nine samples were examined; only two disclosed the presence of boric acid, the quantity being 4.34 and 9.52 grains per pound respectively. In the previous year, 1925, when a similar number of samples of cake were examined all the nine disclosed presence of boric acid. The result of the examination last year would seem to indicate that cakes are being made without the use of preserved liquid egg. Letters were sent to the vendors of the two samples in which preservative was found, drawing their attention to the matter and urging the desirability of the use of preservative being discontinued in the food.

Calomel Ointment.

Four samples of calomel ointment were examined, one of which was deficient in calomel to the extent of 40 per cent. Proceedings were instituted against the vendor, who was convicted and fined £14 and £2. 2s. 0d. costs. The same vendor was convicted for a similar offence in the year 1925.

Cheese.

Thirteen samples of cheese were examined. The samples were obtained at dairies, provision dealers, general shops and restaurants, and included Colonial and English cheese in the Cheddar, Cheshire, Stilton and soft cheese varieties. All the samples were reported to be genuine. Legislation has not yet been enacted in this country to standardise this article of food; this is the more to be regretted as cheese is an important item in the dietary of the poorer part of the community. It is very desirable that in all such foods a high nutritive value should be secured.

Jam.

Two samples of jam were found to be adulterated by the addition of 10 per cent. apple matter. In one case the addition was disclosed on the label attached to the container in which the jam was sold and no proceedings were taken. In the second case proceedings were instituted. The retailer pleaded a warranty defence on which the summons was dismissed. Subsequently, proceedings were instituted against the makers who gave the warranty. The defendants were convicted and fined £20 and £15. 15s. 0d. costs.

Milk.

One hundred and seventy-nine samples of milk were purchased and analysed, of which four only were certified as not genuine. In one of these the deficiency in fat was very slight, and no action was taken. In three cases action was taken with the following results:—

- (A) Abstracted fat 5 per cent.; withdrawn on payment of 20s. costs.
- (B) Abstracted fat 6.6 per cent.; dismissed on payment of three guineas costs.
- (C) Abstracted fat 32 per cent.; convicted; fined 40s. and 21s. costs.

Sausages.

One of five samples of sausages was found to contain boric acid, but the amount was too small to justify any proceedings pending the regulations as to preservatives coming into operation.

Swiss Roll.

One of the two samples of Swiss roll purchased was found to contain preservative, but having regard to the arrangements made by the Ministry of Health with the Bakers Allied Traders' Association, it was considered inadvisable to institute legal proceedings. Letters were, however, sent to the retailers and the makers of the roll drawing attention to the recognised objection to this preservative especially in the case of sponge cakes and expressing the hope that its use in articles of food made with sponge mixture would be discontinued.

Cockles.

In view of the important part played by shellfish in the spread of disease, notably enteric fever, it is thought useful from time to time to examine samples of this kind of food bacteriologically. During the past year a sample of cockles was purchased from a stall in a condition ready to be eaten, and detailed and thorough examinations of each of ten cockles were made; they were found to be clean.

The following report of the examinations may be of interest:—

The cockles were washed in running water, then in sterile tap water and finally in sterile distilled water.

Ten cockles were cut up with sterile scissors and made up to 100 cc. with sterile distilled water—10 cc.=1 cockle. Further dilutions were made up to 1/millionth part of a cockle and used as follows:—

1. *MacConkeys' Bile Salt Lactose Broth* for presumptive test of *B. Coli*. Readings after two days' incubation at 37° C.

10 cc. into double strength	...	...	...	...	Acid and gas present.
5 cc. „ „ „	...	...	...	...	Acid and gas present.
1 cc. „ single „	...	...	...	...	Nil.
1 cc. to 1/100000 cc. (1/millionth part of cockle)	...	...	...	...	Nil.

2. *Glucose Formate Broth for Streptococci*.—Readings microscopically after two days' incubation showed streptococci present in 1/100,000 part of a cockle, but absent in 1/1000000 part of a cockle.

3. *Litmus Milk for Presumptive B. Welchii*.—Parts of the original dilution and varying dilutions to 1/1000000 part of a cockle were heated to 80° C. for ten minutes and inoculated into the Litmus Milk and cultured anaerobically for three days.

No raft clotting was observed in 10 cc. (1 cockle) nor in any dilution up to .00001 cc. (1/millionth part of cockle).

4. Number of colonies present on plated agar incubated at 37° C. for two days= approximately 75,000 per cockle.

5. Number of colonies present on plated gelatine incubated at 20° C. for two days= approximately 6,400 (of which 10 per cent. liquefied the media) per cockle.

The above results must be read in the light of the fact that the cockles were unshelled, therefore, any liquor present in the shell was not examined. Also the presence of salt would inhibit in some degree the growth of organisms.

The presence of *B. Coli* in half a cockle and in no lesser part and the absence of *B. Welchii* in one cockle or part of a cockle points to a good standard of cleanliness.

(Sd.) E. GOODWIN RAWLINSON, M.D., D.P.H.

Winkles.

A sample of winkles was purchased from a fish shop in the Borough. Ten of the winkles were examined for bacteriological cleanliness and found to be satisfactory. The following is the report of the examination:—

Ten winkles were cut up with sterile scissors and made up to 100 cc. with sterile water. Both the body and liquor were used.

10 cc. of the fluid=1 winkle, and dilutions were made up to 1/millionth part of a winkle.

1. *MacConkeys' Bile Salt Lactose Broth* for presumptive test for *B. Coli*. Readings were taken after two days' incubation at 37° C.

10 cc.=1 winkle gave acid and gas (Positive).

5 cc.= $\frac{1}{2}$ " " " " " (Positive).

1 cc.=1/10 " " no reaction (Negative).

2. *Glucose Formate Broth for Streptococci*.—Microscopical examination after two days' incubation at 37° C. showed streptococci to be present in 1/1,000 part of a winkle.

3. *Litmus Milk for Presumptive B. Welchii*.—The fluid and dilutions of the fluid were heated to 80° C. for ten minutes, inoculated into Litmus Milk and cultured anaerobically for three days at 37° C.

No raft clotting was observed in any instance.

4. Number of colonies present on plated agar incubated at 37° C. for two days=1,780 per winkle.

5. Complete liquefaction occurred on plated gelatine incubated at 20° C. for two days.

Remarks.

The presence of Coliform organisms in only half a winkle and the absence of *B. Welchii* in one winkle points to a good standard of cleanliness.

E. GOODWIN RAWLINSON, M.D., D.P.H.

Milk.

The following table shows the fat content of the 179 samples of milk :—

Percentage of Fat.	Number of Samples.			
	Shops.	Restaurants.	Streets.	Total.
Less than 3.0	3	1	—	4
3.0	6	—	4	10
3.1	6	—	1	7
3.2	16	2	3	21
3.3	10	—	3	13
3.4	17	1	8	26
3.5	12	2	2	16
3.6	16	2	6	24
3.7	9	—	6	15
3.8	10	—	3	13
3.9	7	—	1	8
4.0	6	—	—	6
4.1	2	—	—	2
4.2	1	—	—	1
4.3	4	—	—	4
4.4	1	—	—	1
4.5	—	1	—	1
4.8	1	—	—	1
4.9	—	1	—	1
5.4	1	—	—	1
5.7	1	1	—	2
5.9	1	—	—	1
11.12	1	—	—	1
	131	11	37	179
Average	3.41	3.62	3.48	3.53

Twelve per cent. of the samples contained 4 per cent. or more fat. Milk with this fat content does not appear to be uncommon,

In 22 cases where the fat content subsequently proved to be four per cent. or over observations made at the time of purchasing the sample showed that in 16 instances the milk was stirred with a hand measure before serving. In one case only a plunger was used; in one case (street sample) the agent reported that the milk was not stirred at all prior to sale; in three cases the pans from which the milk was served could not be seen by the purchasers; and in the remaining case the counterpan was filled from a churn at the time of purchase of the sample and so was presumably well mixed. It is probable that even distribution of the milk fat is not secured by casual mixing with a hand measure; the use of efficient plungers would secure this end; on the other hand, where there is reason to believe milk is properly plunged an analysis has shown the presence of over 4 per cent. of fat.

Of the 22 samples referred to above ten were purchased at dairies or milk shops, eight at general shops, two from street vendors, and two at restaurants.

But to my knowledge analyses of the contents of individual churns show that the percentage of fat in very many is considerably above 3 per cent.; in some the fat contents of the milk were over 4 per cent.

The following table shows the average composition of milk samples purchased during each month of 1926.

	Number of Samples examined.	Total Solids. Per cent. average.	Solids Non-fat. Per cent. average.	Fat. Per cent. average.
January	19	12.53	8.93	3.6
February	20	12.49	8.89	3.6
March	22	12.49	8.99	3.5
April	21	12.44	9.04	3.4
May	16	12.43	9.03	3.4
June	12	12.18	8.98	3.2
July	9	12.49	8.99	3.5
August	10	12.71	9.01	3.7
September	9	12.68	8.98	3.7
October	9	12.51	8.81	3.7
November	15	12.84	9.04	3.8
December	17	12.31	8.81	3.5
Whole year	179	12.51	8.96	3.55
Legal Minimum		11.50	8.50	3.00

It will be seen that the seasonal variations are not very marked; the highest percentage of fat was in November and the lowest in June. From this, as well as the figures given above, it would seem that the legal minimum for fat in milk is too low. The regulations issued in 1923 respecting condensed milk and dried milk prescribe that the equivalent of fat must be calculated on a 3·6 per cent. basis, and it seems reasonable to suggest that the legal minimum for ordinary milk should be raised.

Articles Analysed.

FORMAL SAMPLES.

ARTICLE.	Purchased	Genuine.	Adulterated.	Proceedings taken.	Convictions.	Fines and Costs.
Almonds, ground ...	8	8	...	...	...	...
Apples ...	35	34	1	1	0	£5 0s. 0d. costs
Asparagus, preserved ...	3	3	...	...	...	...
Bacon ...	2	2	...	...	...	...
Beans, preserved ...	1	1	...	...	...	...
Borax ...	6	6	...	...	...	...
Boric ointment ...	3	3	...	...	...	...
Brandy ...	3	3	...	...	...	...
Butter ...	59	59	...	...	...	...
Cake ...	9	7	2	0	...	...
Calomel ointment ...	4	3	1	1	1	£14 0s. 0d. fine £2 2s. 0d. costs
Camphorated oil ...	7	7	...	...	...	...
Cheese ...	13	13	...	...	...	...
Chocolate ...	7	7	...	...	...	...
Cinnamon, ground ...	4	4	...	...	...	...
Cocoa ...	3	3	...	...	...	...
Coffee ...	4	4	...	...	...	...
Crab, preserved ...	1	1	...	...	...	...
Cream ...	6	6	...	...	...	...
Cream, preserved ...	16	16	...	...	...	...
Cream of tartar ...	1	1	...	...	...	...
Currants ...	3	3	...	...	...	...
Egg powder ...	1	1	...	...	...	...
Egg substitute ...	4	4	...	...	...	...
Epsom salts ...	3	3	...	...	...	...
Gall and opium ointment ...	3	3	...	...	...	...
Gin ...	3	3	...	...	...	...
Ginger, ground ...	1	1	...	...	...	...
Gregory powder ...	1	1	...	...	...	...
Herrings in tomato sauce ...	5	5	...	...	...	...
Ice cream ...	12	12	...	...	...	...
Jam ...	17	15	2	1	...	...
Jelly crystals ...	3	3	...	...	...	...
Lard ...	1	1	...	...	...	...
Loganberries ...	1	1	...	...	...	...
Lemonade powder ...	2	2	...	...	...	...
Liniment of iodine ...	5	5	...	...	...	...
Margarine ...	23	23	...	...	...	...
Marmalade ...	9	9	...	...	...	...
Milk ...	179	175	4	2	0	£4 4s. 0d. costs
Milk, condensed ...	17	17	...	...	...	...
Milk, dried ...	8	8	...	...	...	...
Milk, sterilised ...	1	1	...	...	...	...
Mincemeat ...	3	3	...	...	...	...
Olive oil ...	4	4	...	...	...	...
Paregoric ...	5	5	...	...	...	...
Pears, tinned ...	2	2	...	...	...	...
Peas, tinned ...	3	3	...	...	...	...
Pickled walnuts ...	1	1	...	...	...	...
Pickles ...	3	3	...	...	...	...
Pineapple, tinned ...	1	1	...	...	...	...
Pork and beans ...	1	1	...	...	...	...

ARTICLE.	Purchased.	Genuine.	Adulterated.	Proceedings taken.	Convictions.	Fines and Costs.
Prescriptions ...	7	7	...	...	...	...
Rice ...	3	3	...	...	...	...
Rum ...	3	3	...	...	...	...
Rum and coffee ...	1	1	...	...	...	...
Salmon, tinned ...	1	1	...	...	...	...
Sausages ...	5	4	1	0	...	...
Sponge cake ...	1	1	...	...	...	...
Sponge fingers ...	2	2	...	...	...	...
Suet, shredded ...	3	3	...	...	...	...
Sweets ...	2	2	...	...	...	...
Swiss roll ...	1	0	1	0	...	...
Treacle ...	2	2	...	...	...	...
Tomatoes, ketchup ...	2	2	...	...	...	...
do. patte ...	1	1	...	...	...	...
do. sauce ...	1	1	...	...	...	...
do. soup ...	2	2	...	...	...	...
Vinegar ...	13	12	1	0	...	...
Whiskey ...	3	3	...	...	...	...
Wine ...	1	1	...	...	...	...
Total ...	574	561	13	5	1	Fines, £140s.0d Costs, £11 6s 0d.

INFORMAL SAMPLES.

ARTICLE.	Purchased.	Genuine.	Adulterated.	Proceedings taken.	Fines and Convictions.
Castor oil ...	1	1	...	...	...
Cocoa ...	1	1	...	...	...
Coffee extract ...	1	1	...	...	...
Cream ...	3	3	...	...	...
Cream cheese ...	6	6	...	...	...
Honey ...	1	1	...	...	...
Jam ...	1	1	...	...	...
Jelly-table ...	1	1	...	...	...
Marmite ...	1	1	...	...	...
Rissole ...	1	1	...	...	...
Sardines, tinned ...	3	3	...	...	...
Sauce ...	1	1	...	...	...
Spice ...	1	1	...	...	...
Strawberries ...	1	1	...	...	...
Syrup of figs ...	1	1	...	...	...
Milk ...	1	1	...	...	...
Liquid egg ...	1	0	1	...	...
Total ...	26	25	1	—	—
Total all Samples ...	600	586	14	—	—

Food Poisoning.

A small outbreak of food poisoning occurred in the Borough during the year. Six male workers in a Holborn firm were so attacked on May 7th.

A small canteen had been in operation since March 1st; it was in a part of the building away from all chemicals and was operated by the staff of an eating

house in the neighbourhood; the food and utensils were locked up in a cupboard when not in use.

On the morning of the 7th May N.M. opened a 6-lb. tin of corned beef bought via a retail firm, from wholesalers in the City. The label stated, "Compressed Corned Beef. Inspected and passed by Department of Agriculture Establishment 1-A R A. Packed in Argentine Republic."

All those who purchased and ate the meat (six in number as in the following table) were taken ill; the meat was eaten at about 10.45 a.m.

They were all taken to hospital.

Age in years	Quantity of meat eaten	Time taken ill	Initial symptoms	Discharged from Hospital	Returned to work
R. J. M. 22	(Bread roll &) 1½ ozs.	1.45 p.m.	Abdominal pain, vomiting, forcible evacuation of bowels	8/5/26	10/5/26
A. J. 31	4 ozs.	2 p.m.	Abdominal pain and vomiting	9/5/26	"
R. P. E. 32	(Bread roll &) 1½ ozs.	"	" " "	"	"
R. B. 37	4 ozs.	"	" " "	"	"
H. F. 22	2 ozs.	"	" " "	"	"
H. C. 16	(Bread roll &) 1½ ozs.	"	" " "	8/5/26	"

All the patients had diarrhoea after admission to hospital, but they had all been given castor oil.

In all probability the corned beef was responsible. All of those who ate it were ill; some bought corned beef, others bought corned beef made into a sandwich with bread rolls, but some 60 of these rolls were sold in all and as no one who ate them without meat suffered they can be ruled out as a cause of the illness.

The bacteriological examination by Dr. Canti at St. Bartholomew's Hospital, of the meat from the bread roll sandwiches did not find any definite organism which could be held responsible. A mouse fed (on May 8th) with bread soaked in juice made from the meat pounded in a pestle suffered no ill effects.

Further bacteriological examinations of two meat rolls were made by a laboratory on the instance of the wholesalers, but with no definite result.

This, together with the rapid onset of symptoms, would seem to point to the illnesses being due to the ingestion of toxins. There is no evidence as to how the meat became affected. The tin opener and knife used to cut the meat were stated to be clean. The only person to handle the meat, N.M., although she had a "bad bilious attack" headache at 12 o'clock and vomiting at 3.40 p.m. on Friday, May 7th, and had been suffering from her "stomach" of late, had not had diarrhoea. She had not suffered from typhoid or paratyphoid fever or dysentery or diarrhoea; no one else in the family had recently been ill.

It would seem that the meat was infected with the organisms of food poisoning at the time of packing and that these were destroyed, leaving the toxins,

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

The relative importance of the commoner infectious diseases as regards numbers of deaths caused is shown by the following table:—

ENGLAND AND WALES. COMMON INFECTIOUS DISEASES.

Deaths at all Ages.

	1916.	1917.	1918.	1919.	1920.	1921.	1922.	1923.	1924.	1925.	Yearly average 1916-1925.
Pneumonia (all forms) ...	37,916	39,832	59,666	38,949	37,149	34,708	40,930	33,413	38,970	36,990	39,851
Pulmonary Tuberculosis ...	40,769	42,335	45,338	35,984	32,791	33,505	33,919	32,097	32,690	32,382	36,181
Measles ...	5,413	10,538	9,787	3,534	7,190	2,241	5,694	5,316	4,834	5,337	6,698
Whooping Cough ...	6,075	4,509	9,898	2,605	4,401	4,576	6,370	4,162	3,983	6,058	5,810
Diphtheria ...	5,366	4,477	4,803	4,888	5,648	4,772	4,075	2,722	2,501	2,774	4,654
Scarlet Fever ...	1,381	768	1,020	1,221	1,430	1,305	1,382	993	888	988	1,265
Enteric Fever ...	1,122	977	950	577	537	613	465	450	496	388	732

The total number of notifications relating to Holborn residents received during the year was 416 in comparison with 415 in the year 1925.

Attention has had again especially to be called to the non-notification of whooping cough, primary pneumonia and ophthalmia neonatorum. During last year a special reference card with complete list of notifiable diseases was sent to all doctors practising in the Borough.

In addition to the above there were received 189 notifications respecting patients not residing in Holborn, many being in-patients of hospitals in the Borough. All these were forwarded to the Medical Officers of Health of the districts concerned. The 189 notifications so received were as follows:—

Diphtheria	...	...	...	...	...	...	...	...	76
Scarlet Fever	...	...	...	...	...	...	...	...	46
Whooping Cough	...	...	...	...	...	...	...	...	2
Pneumonia	...	...	...	...	...	...	...	...	2
Measles	...	...	...	...	...	...	...	...	3
Cerebro-spinal Meningitis	...	...	...	...	...	...	...	...	1
Acute Poliomyelitis	...	...	...	...	...	...	...	...	5
Tuberculosis	...	...	...	...	...	...	...	...	54
									<hr/> 189 <hr/>

Smallpox.

No case of smallpox was notified in the Borough during the year; five cases of the disease were notified in London.

Information of 46 passengers or staff arriving on vessels on which smallpox had occurred during the voyage or which came from infected ports was received and, where practicable, the necessary visits for keeping such contacts under observation were made.

In 43 of the cases the addresses given in this Borough were at hotels or boarding houses.

In 13 cases the addresses or the names given could not be traced.

In 11 other cases although the travellers had visited the hotel mentioned, they had gone prior to the Inspector's visit, usually leaving no address; in two cases, however, new addresses were furnished and the information sent on.

In the remaining cases the travellers were seen and found to be in good health.

The following table kindly supplied by the Vaccination Officer of the Holborn Union on 2nd March, 1927, gives information respecting vaccination in the Borough of Holborn:—

	Total Number of Births	Vaccinated	Died before Vaccination	Cons. Objectors	Insus- ceptible	Postponed by Medical Certificate	Removed. No information as to Vaccination	Temporarily unaccounted for
HOLBORN SUB-DISTRICT :								
12 months ended 30th June, 1926	239	101	19	41	0	25	28	25
ST. GILES AND BLOOMSBURY SUB-DISTRICT :								
12 months ended 30th June, 1926	136	59	15	25	0	15	13	9
	375	160 43%	34	66	0	40	41	34

As in previous years a leaflet respecting the advantages of vaccination was sent to the parents of all infants born in, or belonging to, the Borough.

Diphtheria.

Notifications relating to 73 cases of diphtheria occurring in residents in the Borough were received. Of these, 70 were removed to hospital. Ten were found not to be suffering from diphtheria, and three cases, notified from a hospital staff, were notified as "carriers" only.

Of the 60 cases of diphtheria:—

1 was under 1 year.
 20 were 1 to 5 years.
 28 „ 5 „ 15 „
 8 „ 15 „ 25 „
 2 „ 25 „ 45 „
 1 was 45 „ 65 „

One of the 60 was a patient who had previously been notified in another Borough where the family lived before removal to Holborn.

Four deaths occurred.

Twenty-one "secondary" cases were notified. A "secondary" case is one occurring in the same household as the primary case.

Nine of the 21 "secondary" cases were nurses or staff at a hospital in the Borough; from the same hospital 45 in-patients were notified as suffering from diphtheria (27 clinical and 18 carriers), none of these were resident in the Borough.

Six "return" cases were notified, of these, two were subsequently found not to be suffering from diphtheria, the remaining four were notified, 12, 14, 13 and 17 days, respectively, after the return of the primary cases from hospital. The four "return" cases occurred in two homes; medical examination of the primary case in each of these homes disclosed evidence that the primary patients were still suffering from diphtheria. In each case they were re-notified and returned to hospital for further treatment.

In London 13,526 cases were notified giving rise to 538 deaths.

We endeavour to co-operate with the Medical Superintendents of the Metropolitan Asylums Board Fever Hospitals; information is now sent to them as to any bacteriological examinations before admission or after discharge of the patients, and also with regard to return cases of scarlet fever.

Diphtheria in Hospitals.

During the year notifications were received from a hospital in the Borough of 55 cases of diphtheria. Of the 55 cases, 34 were reported as clinical diphtheria (including ten nasal cases) and 21 as harbouring diphtheria bacilli. Forty-five of the cases were in-patients, all being non-residents of Holborn. The remaining ten were members of the hospital staff; of these seven were clinical diphtheria, viz., resident medical officer 1, nurses 5, maid 1, and three harboured diphtheria bacilli, viz., nurses 2, maid 1.

The number of cases of diphtheria occurring from year to year amongst the nursing staff of hospitals suggests the need for the immunisation of hospital nurses. It would seem to be obvious that fever hospital nurses should be protected against diphtheria and it is difficult to avoid the conclusion that all hospital nurses, nursing in children's wards, should be immunised. It must be within the experience of many that nurses in children's hospitals and subsequently the children themselves are often attacked.

The possible objection that a nurse would have to be immunised against diphtheria, scarlet fever and typhoid and paratyphoid fevers does not carry much weight. Many during the war were immunised against more diseases than these—those going East were protected against smallpox, typhoid and the paratyphoid fevers, cholera, dysentery and plague. Who can show that they suffered any harm by taking advantage of the progress of science?

The Schick test and immunisation against diphtheria is already being successfully applied to the nursing and domestic staffs in certain hospitals, including those of the Metropolitan Asylums Board.

Diphtheria Contacts.

BACTERIOLOGICAL EXAMINATION OF NOSE AND THROAT SWABS.

Total Contacts swabbed	...	...	...	...	...	64
Negative	...	...	...	...	...	50
Positive	...	...	...	...	...	14
						(22 per cent.)

				Contacts swabbed.	Positive Results.			Contacts positive.
					Nose and Throat.	Nose only.	Throat only.	
First Examination	...	...	...	64	2	8	4	14 (A)
Second	„	...	...	10	—	2	2	4
Third	„	...	...	4	1	1	—	2 (B)
Fourth	„	...	...	1	—	1	—	1 (C)

(A) Four of these developed diphtheria before the date for taking the second swab; they were notified by the doctor in attendance and removed to hospital.

(B) The swabs in one of these two cases were tested for virulence and gave a positive result. The patient was therefore notified as suffering from diphtheria and removed to hospital.

(C) The swab from this contact was tested for virulence and found positive. The patient was therefore notified and removed to hospital.

The parents or others in charge of children harbouring diphtheria bacilli were given written directions as to the precautions necessary.

The results of the examinations of child contacts were communicated to the School Medical Department of the London County Council so that children harbouring diphtheria bacilli could be kept from school providing there was no evidence that the organisms were avirulent. Three virulence tests were made in 1926. In two the results were positive and the patients were notified and removed to hospital.

Diphtheria antitoxin was supplied free of charge on application by medical practitioners. During the year it was supplied in seven cases.

The Schick Test and Immunisation against Diphtheria.

This work is carried on at the Council's Maternity and Child Welfare Centre, 10, John Street, on Wednesday afternoons.

Enquiries as to the effect of the testing and inoculation on the individual were made as a routine; we are able to record that any disturbance caused was negligible.

TABLE I.

HOLBORN MUNICIPAL INFANT WELFARE CENTRE, 1922, 1923, 1924, 1925, 1926.

AGES OF PERSONS SCHICK-TESTED WITH RESULT OF TEST.

Ages.	6 to 12 months	1 to 2 years	2 to 3 years	3 to 4 years	4 to 5 years	5 to 6 years	6 to 7 years	7 to 8 years	8 to 9 years	9 to 10 years	10 to 11 years	11 to 12 years	12 to 13 years	13 to 14 years	14 to 15 years	15 and above years	
Total for 5 years, 1922-26.	66	188	135	112	89	66	52	37	39	52	38	24	22	27	4	67	= 1018
RESULT OF SCHICK TEST.	Pos. Neg.	Pos. Neg.	Pos. Neg. Notread	Pos. Neg.	Pos. Neg. Notread	Pos. Neg. Notread	Pos. Neg.	Pos. Neg.	Pos. Neg.	Pos. Neg.	Pos. Neg.	Pos. Neg.	Pos. Neg.	Pos. Neg.	Pos. Neg.	Pos. Neg. Notread	
Total for 5 years.	60 6	177 8	138 3	96 7	55 15	22 43	16 21	26 12	11 36	15 16	23 26	19 11	19 13	8 10	19 12	2 24	752 Pos. 254 Neg. 12 Notread.

TABLE II.

AGES OF PERSONS IMMUNISED.

Age.	6 to 12 months	1 to 2 years	2 to 3 years	3 to 4 years	4 to 5 years	5 to 6 years	6 to 7 years	7 to 8 years	8 to 9 years	9 to 10 years	10 to 11 years	11 to 12 years	12 to 13 years	13 to 14 years	14 to 15 years	15 and above years	
Total for 5 years	49	140	106	75	49	34	37	21	17	19	13	9	8	5	2	8	= 591

TABLE III.
HOLBORN MUNICIPAL INFANT WELFARE CENTRE.

SCHICK TEST AND DIPHTHERIA IMMUNISATION.

Five years, 1922-23-24-25-26.

TOTAL TESTED.		RESULT OF TEST. A								IMMUNISATION OF POSITIVES.																													
		Negative. Positive. Not read.								B						C						D						E		F									
										Found NEGATIVE to Re Schick Test after						Found NEGATIVE to Re Schick Test after						Found POSITIVE to Re Schick Test after 3 ccm T.A.T.						TOTAL Re Schick Tested		Given 3 ccm T.A.T. Not Retested.	Failed to complete 3 inoculatns.	Inoculatns. not begun.	Inoculatns. still in progress.	Given 1 ccm not yet Re-tested.					
										1 ccm T.A.T.			2 ccm T.A.T.			3 ccm T.A.T.			4 ccm T.A.T.		5 ccm T.A.T.		6 ccm T.A.T.		8 ccm		Given further inoculation but not yet Retested.								No further inoculation given.				
										C	A		C	A		C	A		C	A		C	A		C	A									C	A		C	A
952	66	213	41	730	22	9	3	12	0	15	1	376	4	12	0	9	1	4	1	1	0	24	1	10	1	473	9	127	0	61	4	62	7	7	0	12	0		
1,018		254		752		12		13		17		388		12		10		5		1		25		11		482	††	118	†	65		69	§	7		11			

* These columns refer to 64 cases that were Schick positive on Retesting after 3 ccm T.A.T.

† 34 of these are dead or removed from the Borough.

§ 9 of these have removed from the Borough.

†† These retests include those made up to the end of May 18, 1927.

NOTE.—Columns B C D give details of the total No. 472 given in Column E.

Columns E F give details of the total No. 752 of positives given in Column A.

In view of the satisfactory results obtained by R. A. O'Brien in the Holborn (Poor-law) schools, arrangements were made in 1922 to render the measure available for the general child population of Holborn. The results obtained are summarised in Tables I., II., and III.

The results of the Schick testing were very much the same as those found in all other urban areas; we have, however, analysed them in connection with the immunity to diphtheria of various members of the families dealt with. The last column in Table IV. shows the number of exceptions (9.7 per cent.) to the expectation that positive reactions will be manifested only in the younger members.

TABLE IV.

No. of children in family.	No of families.	Of which the members are—			
		All Schick positive.	All Schick negative.	One or more elders negative, younger positive.	One or more elders positive, younger negative.
2	129	98	9	15	7
3	57	32	4	15	6
4	18	7	—	6	5
5	8	2	—	4	2
6	2	—	—	2	—
7	2	—	—	1	1
—	216	139	13	43	21

In one family of five children, twins (F.) of 2-3 years of age were both positive: of twins of 7-8 years, one (M.) was positive, the other (F.) was negative.

In one family of three children one twin (M.) was negative, the other (F.) was positive; the latter had already been in hospital with diphtheria.

In another family, twins, one male aged 2 years when tested and one female aged 5 years when tested were both Schick positive.

In another family, one male aged 2 years when tested and one female aged 5 years when tested were both Schick positive.

In one family of four, all Schick positive to the first test, two members were found to be Schick positive to the second test. The first of these (F. 4) was immunised some months previously to the second one (M. 1), and was further inoculated, being negative to the second test; the second child is not yet retested.

In another family of four (Fs.), all Schick positive to the first test, the eldest only was Schick positive to the retest; this child was still Schick positive after a second course of 3 c.cm.; she became Schick negative after a total of 8 c.cm. had been given.

Routine Procedure.

The routine of the procedure carried out is as follows. The child is Schick tested at the Council's Maternity and Child Welfare Centre, and if susceptible to diphtheria is brought up by the parent at weekly intervals for the next three weeks for immunisation, and then at the end of another three months (formerly we tried for the period six to eight weeks) for re-Schick testing, when, if it happens to be still positive, it receives further inoculation. A modification of the routine occurs if from the Schick test it is seen that the child is particularly susceptible to protein reactions; in this case the 3 c.cm. of toxoid antitoxin mixture are given in four or five doses at weekly intervals.

Some difficulty has been experienced in securing the necessary number of immunising injections owing to the children belonging to families who remove from the district; some of these however attend to finish the course. A few adolescents at times fail to complete the course by reason of being employed and it no longer being convenient for them to attend.

Although Park and Zingher recommend that Schick testing should only be applied to children over 5 years, it would seem inadvisable to dispense with the test as a routine at the present time in Holborn. It is a great satisfaction to nervous parents to think that there will be no inoculation unless susceptibility is proved.

Retesting is unpopular with parents, and the need for it does not help to increase their confidence in immunisation. Of 482 that have been retested 64 were found to be still Schick positive after three inoculations. The facts relating to these are given in Table V.

TABLE V.

Re-Schick tested after an interval of years or fraction of years.	Number retested after this interval.		No. found positive.	Age in years and sex of positives when first tested.	Negative to 2nd re-Schick test and total of T.A.T. given in all.
	M	F			
5/52	10	(6 4)	1	13, F.	Neg. ; 4 c.cm.
6/52	3	(1 2)	—	—	—
7/52	6	(4 2)	—	—	—
2/12	20	(10 10)	1	9, M.	Neg. ; 6 c.cm.
2 1/12	13	(4 9)	—	—	—
3/12	85	(40 45)	11	(a) 8, F. (b) Ad., F. (c) 3, M. (d) 9, M. (e) 6, M. (f) 11/12, M. (g) 5, M. (h) 2, M. (i) 5, F. (j) 7, F. (k) 6, F.	Neg. ; 4 c.cm. — — — Neg. ; 6 c.cm. Neg. ; 4 c.cm. — — — — —
3 1/12	18	(8 10)	2	(a) 4, F. (b) 1, F.	Neg. ; 5 c.cm. —
4/12	54	(25 29)	7	(a) 4, F. (b) 6, F. (c) 10/12, M. (d) 2, F. (e) 1, F. (f) 6, F. (g) 4, F.	*Neg. ; 4 c.cm. Neg. ; 8 c.cm. Neg. ; 4 c.cm. Neg. ; 5 c.cm. Neg. ; 5 c.cm. — —
4 1/12	4	(0 4)	2	(a) 5, F. (b) 2, F.	Neg. ; 6 c.cm. Neg. ; 4 c.cm.
5/12	27	(10 17)	—	(a) 2, F. (b) 2, M. (c) Ad., F.	Neg. ; 6 c.cm. Neg. ; 4 c.cm. —
6/12	37	(17 20)	8	(a) 1, M. (b) 2, M. (c) 3, M. (d) 4, F. (e) 2, M. (f) 6, M. (g) 3, M. (h) 3, M.	Neg. ; 5 c.cm. — — — — — Neg. ; 6 c.cm. —
7/12	18	(8 10)	1	9, F.	Neg. ; 6 c.cm.
8/12	11	(4 7)	2	(a) 11, F. (b) 1, F.	— —
9/12	9	(5 4)	2	(a) 1, M. (b) 8, M.	— —
10/12	11	(4 7)	1	4, F.	†Neg. ; 5 c.cm.
11/12	5	(3 2)	1	1, M.	—
1	7	(1 6)	1	9/12 F.	Neg. ; 4 c.cm.
1-2	84	(41 43)	15	(a) 1, F. (b) 2, M. (c) 2, M. (d) 2, M. (e) 2, F. (f) 6, M. (g) 7, F. (h) 8, F. (i) 9, M. (j) 9, F. (k) 11, F. (l) 12, M. (m) 12, F. (n) Ad., F.	Neg. ; 4 c.cm. Neg. ; 4 c.cm. — — Neg. ; 4 c.cm. Neg. ; 4 c.cm. Neg. ; 4 c.cm. — — — — — Neg. ; 5 c.cm.
2-3	60	(26 34)	6	(a) 1, F. (b) 5, F. (c) 12, F. (d) 2, F. (e) 4, M. (f) 2, F.	Neg. ; 4 c.cm. Neg. ; 4 c.cm. — — — —
Total ...	482	(217 265)	64	M. 26 F. 38	

* Another child in same family (F.), aged 4 years, was negative.

† Three children in this group were members of one family: 2 negatives (M.), aged 2 years, (F.), aged 6 years; 1 positive (F.), aged 4 years.

In addition, one child re-Schick tested 15 months after 1 c.cm. T.A.T., was found positive, and two children retested after 3 c.cm. were on the information given by the mother considered to be slightly positive. Fifty-three of those positive on re-Schicking have been further inoculated, and 28 of them further tested and found negative. Efforts are being made to continue the inoculation of the remainder; in addition, two others, found positive to the second re-Schick, after 4 c.cm. have been further inoculated, and are awaiting a retest. As seen in the footnote to Table V. one child (F., aged 4 years) was positive to the second re-Schick after 6 c.cm., but was negative after 8 c.cm.; this child was the eldest of four girls; the three younger ones were negative after the routine 3 c.cm.; two of these receiving their routine injections on the same day and from the same batch of toxoid antitoxin as the eldest.

Of the 482 persons retested, 217 were males and 265 were females. Among the positive were 26 males and 38 females. Neither age nor interval seems to have any influence on the phenomenon. It would seem conceivable that some batches of toxin antitoxin or toxoid antitoxin might prove to be less efficacious than others. An analysis of the results obtained in Holborn would seem to indicate clearly that this is so; also that the toxoid antitoxin used was as efficacious as the toxin antitoxin. The toxin antitoxin used were all 3 L + per c.c.m mixtures, the toxoid antitoxin contained toxoid diluted 1-10 with added antitoxin. (Table VI.)

That considerable importance attaches to the retesting is shown by the fact that our four cases of diphtheria among those treated occurred in children who were given the routine three injections, but had not been retested.

The first case was a boy (aged 4) who suffered from a severe attack of the disease, but recovered without any complications or sequelæ; his recovery was ascribed certainly by his mother to the inoculations of T.A.T. given after Schick testing.

A second case is said to have occurred in a boy (aged 8) also given the routine three injections. Two years later he was diagnosed (for the third time in his life) as suffering from diphtheria; no swab was taken. On admission to the M.A.B. Hospital he was first found to be swab negative, later swab positive, but was diagnosed as a case of diphtheria. The mother fortunately is still convinced that the boy did not suffer from diphtheria.

A third child (a girl, aged 3) had a mild attack, and made a good recovery; in the fourth case (a girl, aged 6) a severe attack occurred four weeks after the last of the routine three injections had been given. It will be seen from Table V. that the length of the period before immunity is acquired varies considerably.

TABLE VI.

Batches of Toxin Antitoxin and Toxoid Antitoxin Compared.

Designation of batch of toxin antitoxin mixture or toxoid antitoxin mixture.				No. of persons inoculated and retested.	No. of these persons found positive on retesting.
Toxin antitoxin mixture	B. 346	...	...	59	2
	B. 475	...	...	28	3
	B. 654	...	...	28	1
	B. 671	...	...	74	18
	B. 671A	...	...	2	1
	B. 672A	...	...	30	2
	B. 617	...	...	35	2
	B. 675	...	...	1	—
	B. 672	...	...	1	—
Toxoid antitoxin mixture	B. 1017	...	...	33	4
	B. 1090	...	...	16	1
	B. 1038	...	...	13	—
	B. 1018	...	...	43	10
	B. 1129	...	...	18	3
	B. 995	...	...	10	—
	B. 1148	...	...	8	2
	B. 1197	...	...	21	9
	B. 1198	...	...	14	3
	B. 1205	...	...	17	3
	B. 2060	...	...	1	—
	B. 2079	...	...	22	—
	B. 2081	...	...	8	—
Total				472	64

Reactions.

Our experience is that the reaction after the injection of the toxin antitoxin and toxoid antitoxin is in practically every case negligible. All we have to record is that in one child considerable swelling of the whole of the arm occurred, but the next day, when at the centre, she was running about and helping the other children eat their cakes; the swelling went down without any further result. Another, a boy of 10 years of age, his mother informed me, suffered with vomiting after each of his three inoculations and spent the next day in bed, but he and his mother stuck to it, and he was subsequently proved to have been satisfactorily immunised. In another child, a small, hard, slightly tender nodule developed above the external condyle, but the tenderness only remained for a few days.

The use of toxoid antitoxin does away with the risk of fatality incurred by using improperly made toxin antitoxin.

What of the Future?

Most of the attendances are the result of repeated efforts of persuasion and encouragement. Prejudice against inoculation is widespread; some of the most stubborn opponents of inoculation admit that if T.A.T. could be given in tabloid form

or in spoonfuls they would agree to it. They object, in fact, to the introduction of animal products by means of a hypodermic syringe into the human body, but continued propaganda is sure to produce its results.

The aim of everyone who takes up the work must be to get all the children living in the area immunised as soon after they reach the age of 6 months as possible. In Holborn we have not reached this stage yet; the history of vaccination against small pox suggests we never shall. But a local health authority is justified in considering that it has done all in its power to prevent loss of life and illness from diphtheria if it offers immunisation.

It might be expected that if the immunisation were carried out among the school population in a large town the parents would come to regard the procedure as more ordinary, and be prepared to allow the younger children to be immunised at infant welfare centres. Apparently it cannot be too often repeated that it is immunisation at a very early age that we want carried out; if it is delayed till school age half the deaths will have occurred. In London during five years 1921-25, of the total deaths from diphtheria, 57 per cent. occurred under five years of age. Certainly if the immunisation could be completed at one visit the energy spent in looking up those failing to attend could be used in getting new recruits, and the parents would be spared much trouble.

Scarlet Fever.

There were 84 notifications of scarlet fever. All the 84 were removed to hospital and subsequently four were returned from hospital "not scarlet fever."

In connection with five of the cases during the year, seven notifications of "secondary" cases were received. Two of these, ultimately removed to hospital, were found to be not suffering from scarlet fever. These secondary cases are exclusive of nine nurses at a hospital in the Borough who were notified as suffering from this disease, from the same hospital 30 in-patients were notified as so suffering. None was resident in Holborn.

Four "return" cases were notified, *i.e.*, cases occurring within 28 days of the return from hospital to the same house of a previous case of scarlet fever. Two of the "return" cases were found, on admission to hospital, not to be suffering from scarlet fever.

There was one death from this disease.

12,294 cases of scarlet fever were notified in London with 82 deaths.

Enteric Fever.

Five cases were notified during the year; none died. The facts relating to the cases are as follows:—

Nos. 1 and 2. These were a mother and son, two members of a party of four travellers, staying temporarily at a hotel in the Borough. The patients were under medical treatment for four weeks before the disease was diagnosed and notified. During that period, the doctor in attendance had three Widal tests made, the first and second giving negative results. The illness in the mother commenced before her arrival at the hotel. The patients were removed to a nursing home and subsequently to a hospital of the Metropolitan Asylums Board. There seemed to be no doubt that both patients contracted the disease at Beyrout where they stayed ten or twelve days before the onset of the illness.

Nos. 3 and 4. These patients also were travellers staying temporarily in a hotel. The onset of the illness synchronised with their arrival in the Borough. Both patients were American travellers who came to England from France where they had stayed in Paris, the disease having been contracted there.

No. 5. This patient was a housekeeper in a restaurant. On enquiry it was ascertained that she had visited Lourdes and Paris where she stayed for some days. The patient became ill shortly after her return from Paris and it would appear that the disease was contracted there.

302 cases of this disease were notified in London, with 28 deaths.

Typhus Fever.

No case of typhus fever was notified during the year, either in the Borough or in London.

Cerebro-spinal Fever.

Two cases of cerebro-spinal fever were notified. Both children were in-patients of voluntary hospitals. One patient died and one recovered.

93 cases were notified in London, with 54 deaths.

Dysentery.

No case of dysentery was notified.

13 cases were notified in London.

Malaria.

No case of malaria was notified.

52 cases were notified in London.

Encephalitis Lethargica.

One case of encephalitis lethargica was notified in the Borough during the year. This patient died in institution three days after admission, the death being certified as due to carcinoma of stomach.

224 cases were notified in London, with 87 deaths.

The following table gives information up to the end of 1926 respecting the 11 real cases of encephalitis lethargica notified in the Borough since the Public Health (Encephalitis Lethargica) Regulations came into force on the 1st January, 1919:—

Date of Notification.	Patient.	Age when notified.	Subsequent History.
6/2/20	P.P.	8 years	Died 28/2/20
7/2/20	W.W	47 years	Died 7/2/20
13/1/20	B.R.	32 years	Died 13/1/20
26/4/22	W.H.	14 years	Died 19/4/22
4/4/24	A.K.	28 years	Died 28/3/24
16/5/24	G.C.	36 years	Returned to Italy
20/6/24	R.V.M.	40 years	Complete recovery
9/7/24	F.H.	7 years	Complete recovery
26/9/24	B.V.	53 years	Died 21/9/24
4/5/25	C.S.	28 years	Right leg partially paralysed; right arm tremulous; extreme depression
29/5/26	H.P.	33 years	Died 30/5/26

The table excludes one case notified 15/11/24 who was subsequently found not to be suffering from this disease.

Acute Poliomyelitis.

No case of acute poliomyelitis or polioencephalitis was notified.

85 cases were notified in London, with 15 deaths.

From the coming into operation of the Poliomyelitis Order, 1912, to the end of 1926, a total of 14 cases of this disease were notified as occurring in the Borough.

The following table gives particulars of these cases with the condition at the end of 1926:—

Date of Notification.	Patient.	Age at date of Notification.	Where Treated.	Subsequent History.
17/7/13	F.D.	1 $\frac{1}{2}$ years	Hospital	Died from diphtheria
23/10/13	F.H.	2 $\frac{1}{2}$ "	"	Wears surgical boot and still O.P. at Hospital
26/1/16	A.C.	4 "	"	Died 26/1/16
27/1/16	T.B.	4 "	"	Now working—dragging of leg hardly noticeable
5/9/16	F.B.	2 months	"	Died
6/6/20	I.P.	3 $\frac{1}{2}$ years	"	Recovered—no crippling
23/7/20	E.W.	15 "	"	No use of lower limbs
17/9/20	E.H.	1 $\frac{1}{2}$ "	"	Recovered—no crippling
4/9/22	Y.R.	1 $\frac{1}{2}$ "	Home	" "
5/2/23	J.N.	3 $\frac{1}{2}$ "	Hospital	" "
2/5/23	M.H.	11 mths.	"	Again an in-patient at Orthopaedic Hospital
14/8/25	B.T.	26 years	"	Hotel guest; could not be traced
30/10/25	V.H.	5 "	"	Removed from Borough—lost sight of

The table excludes one case notified 4/12/18 who was subsequently found not to be suffering from this disease.

Pneumonia.

Thirty-nine cases of pneumonia were notified during the year. Ten of these were influenzal pneumonia. Thirty-nine deaths were recorded from all forms of pneumonia. Three of these were from influenzal pneumonia.

The 29 cases of primary pneumonia were notified at the following ages:—Under 1 year, 0; from 1 to 5 years, 9; from 5 to 15 years, 2; from 15 to 25 years, 2; from 25 to 45 years, 3; from 45 to 65 years, 7; and 65 years and upwards 6. Thirteen were treated at home; 7 were removed to voluntary hospitals; 8 to Poor Law Infirmaries; and one to a M.A.B. Hospital. One of the patients was nursed by the Metropolitan Nursing Association under the arrangements made by the Council,

Of the 29 cases of primary pneumonia, 17 resided in tenement lodging houses, 5 in separate private dwelling houses or model dwellings, 2 in boarding houses, 2 in hotels, and 3 in common lodging houses.

The cleanliness of the homes was reported to be satisfactory in 21 cases, but only fairly so in 7, and in one case as unsatisfactory. The economic conditions of the families concerned was found to be good in 6 cases, fair in 12, poor in 8, and very poor in 3; 12 cases were nursed in a separate room.

In the majority of cases the disease was not ascribed to any special cause, but the following was given in 14 instances:—

Following chronic bronchitis	...	...	...	...	...	5
Following cold	...	...	...	...	...	8
Following change of climate from South Africa to England						1

Influenza.

There were 8 deaths from influenza in comparison with 9 in 1925, 11 in 1924, 1 in 1923, and 21 in 1922.

Anthrax.

No case of anthrax was notified in the Borough during the year.

Eight cases were notified in London.

Chicken-pox.

During the year information of 98 cases was received from school teachers and others.

Mumps.

Information was received from school teachers of 15 cases of mumps.

Bacteriological Work.

The following table gives details of the examinations made during the year:—

Diphtheria		Pulmonary Tuberculosis	
Number Submitted	Result of Examination	Number Submitted	Result of Examination
306	Bacilli not found 264 Bacilli found 42	78	Bacilli not found 70 Bacilli found 8

Disinfections.

During the year 657 rooms and 3,413 articles of bedding, clothing, etc., were disinfected after various infectious diseases, inclusive of tuberculosis.

Thirty-two rooms and 265 articles of bedding, clothing, etc., were disinfected after tuberculosis.

Special attention is devoted to toys and more particularly to any toy put in the mouth. These latter are as a rule destroyed.

Cleansing of Persons Act.

During the year 165 persons (163 men and 2 women) infested with vermin had their bodies and 2,605 articles of clothing disinfested, free of charge, at our cleansing station (Goldsmith Street).

One hundred and thirty-four verminous rooms were disinfested.

In connection with the fumigation of verminous rooms, it is now our practice to repeat the fumigation at the end of a week, by which time it is expected that any eggs will have hatched out; a single fumigation of any badly infested room cannot be regarded as satisfactory. In 77 cases last year this course was adopted.

Verminous Conditions and Scabies.

In connection with our co-operation with the London County Council School Medical Service, information is received from the Medical Officer of Health of the London County Council respecting children attending schools in the Borough found to be verminous or suffering with scabies.

During the year information was received under the above arrangement respecting 95 children reported to be verminous. In three instances the same children were reported as verminous on three different occasions in the year, and in eight cases the children were reported a second time. All the cases were visited after receipt of each report, but it was not found necessary for any action to be taken in connection with the bedding or homes. In a number of cases a card of instructions for keeping the heads of children clean was left with the parent.

One child was reported as suffering from scabies; arrangements were made for the disinfection of bedding and room.

Shelter during Disinfection.

For some years past the arrangement has been in operation with the Council of the Metropolitan Borough of Finsbury for accommodation to be provided at their Reception House, Northampton Road, for residents of this Borough during the disinfection of their homes after infectious disease.

Tuberculosis.

Summary of Notifications and Deaths.

The following table gives the number of new cases of tuberculosis and deaths from the disease in the Borough during 1926 in the form required by the Ministry of Health:—

Age periods.	New Cases.				Deaths.			
	Pulmonary.		Non-pulmonary.		Pulmonary.		Non-pulmonary.	
	M	F	M	F	M	F	M	F
0	—	—	—	—	—	—	2	—
1	—	—	1	3	—	—	1	1
5	1	—	2	3	—	—	2	1
10	—	1	1	2	—	—	—	—
15	6	5	1	2	—	2	—	—
20	1	2	1	1	1	—	—	1
25	8	5	1	1	4	1	—	—
35	6	3	1	1	3	1	—	1
45	5	5	1	1	3	2	—	—
55	4	1	—	—	4	3	—	—
65	—	1	—	—	1	1	—	—
	31	23	9	14	16	10	5	4

The initiation of the Tuberculosis Care Committee as a local institution and the administrative change whereby all correspondence concerning tuberculous patients is sent to the Borough Medical Officer of Health have proved beneficial; the knowledge of the local Public Health Staff of the patients is increased in a natural and easy way and the interest in the work encouraged.

Total number of cases on the Register of Tuberculosis in the Borough on the 31st December, 1926	295
Number of these patients residing in common lodging houses (about)	20
The average number of cases notified annually during the past ten years	116
The number notified in the year 1926	92
Of the 92 cases notified in 1926, the number who attended the Dispensary	43
Total number of new cases examined at the Dispensary for the first time in 1926, including the above 43, and all contacts	127
Total attendances at the Dispensary in 1926	872

Supervision of home conditions; visits paid by—

Tuberculosis Officer ...	...	...	...	...	...	73
Dispensary Nurse ...	...	...	...	...	...	1,140
Sanitary Inspectors ...	...	...	...	...	...	7

The present arrangements for the Tuberculosis Dispensary are as follows:—

The Dispensary is at the University College Hospital, Gower Street, in the Borough of St. Pancras.

The Dispensary covers the whole of the Borough of Holborn.

The Tuberculosis Officer attends three sessions each week, namely, Monday and Wednesday afternoons and Thursday evenings.

The Dispensary Nurse assists at the Dispensary and visits cases in their homes.

Public Health (Tuberculosis) Regulations, 1912.

Summary of Notifications during the period from the 3rd January, 1926, to the 1st January, 1927, in the Metropolitan Borough of Holborn.

Age-periods.	Notifications on Form A.													Notifications on Form B.					Number of Notifications on Form C.	
	Number of Primary Notifications.												Total Notifications on Form A.	Number of Primary Notifications.				Total Notifications on Form B.	Poor Law Institutions.	Sanatoria.
	0 to 1.	1 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 and upwards.	Total Primary Notifications.		Under 5.	5 to 10.	10 to 15.	Total Primary Notifications.			
Pulmonary Males	1	...	6	1	8	6	5	4	...	31	43	...	...	...	...	...	27	35
„ Females	1	5	2	5	3	5	1	1	23	27	...	...	...	...	...	4	18
Non-pulmonary Males	...	1	2	1	1	1	1	1	1	...	...	9	11	...	...	...	...	...	1	3
„ Females	...	3	3	2	2	1	1	1	1	...	...	14	15	...	...	...	...	...	...	3

Supplemental Return.

New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the period from the 3rd January, 1926, to the 1st January, 1927, otherwise than by notification on Form A or Form B under the Public Health (Tuberculosis) Regulations, 1912.

[illegible]

Nine of the 15 were ascertained from the death returns and six were transfers from other areas.

Tuberculosis Notifications.

Excluding duplicates the total number of notifications received on Forms A or B during the year 1926 was 77; 15 other cases were brought to my knowledge, (making 92 new cases in the year). These were:—Private cases 18, hospital cases 52, Poor Law cases 7, from death returns 9, transfers from other districts 6.

Correction of Tuberculosis Register during the year 1926.

Number of cases on Register, 1st January, 1926	...	270
New cases registered, 1st January to 31st December, 1926	...	92
		<hr/> 362

Removed from the Register during the same period for following reasons:—

Removed from Borough	...	35
Recovered	...	1
Died	...	30
Not suffering from tuberculosis	...	1
		<hr/> 67

Number on Register 31st December, 1926	...	295
----------------------------------------	-----	-----

Of the 92 cases entered on the Register in 1926, 66 were pulmonary tuberculosis and 26 non-pulmonary tuberculosis. Forty-seven of the cases were removed for treatment to hospital, infirmary or sanatorium.

Sleeping Conditions.

In 82 of the 92 new cases of tuberculosis in 1926 it was possible to obtain information as to the sleeping conditions at the date of notification. Six of the remaining cases were residents in common lodging houses; in three cases incorrect addresses were given, or the patients no longer resided in the Borough.

The following is a summary of the information in the 82 cases above referred to:—

Patient slept in—

Separate bed room	...	23
Separate bed in living room	...	6
Separate bed in room shared with—		
1 person	...	10
2 persons	...	8
3 persons	...	3
4 persons	...	2
7 persons	...	1

Shared bed with—

No others in room.	1 adult (H. or W.)	...	...	11
	1 adult (not H. or W.)	...	...	6
	1 child	...	...	2

Shared bed with—

1 adult	...	Other persons in bedroom	1 child	...	...	4
1 adult	...		2 children	...	...	1
1 adult	...		2 adults	...	...	1
1 adult	...		2 adults, 2 children	...	...	1
2 adults	...		1 child	...	...	1
1 child	...		2 adults, 2 children	..	...	1
2 children	...		2 adults, 2 children	...	...	1

82

Classification of Homes.

The classification of homes as suggested by the London County Council has been reported on as far as practicable with the following results:—

"A."—Good environment, clean, well-kept, separate bedroom (or in the case of husband and wife, no other occupant of bedroom), good food and clothing	...	...	17
"B."—Fair. Separate bed, but not separate bedroom	...	...	55
"C."—Bad. Dirty environment, dirty ill-kept home, no separate bed, bad management as to food and clothing	...	...	10

82

The following summary gives the position at the end of 1926 of the 92 new cases respecting which information was received during the year:—

Dead	...	...	...	...	...	16
Cases removed to Hospital or Infirmary and still in-patients at the end of year	...	...	...	...	...	29
Out-patients at Hospitals	...	...	...	...	...	12
In-patients in Sanatoria at end of year	...	...	...	...	...	13
Not traced—Incorrect addresses	...	...	...	...	...	2
Removed from Borough	...	...	...	...	...	6
Dispensary Treatment	...	...	...	...	...	6
Home Treatment	...	...	...	...	...	3
Convalescent Home	...	...	...	...	...	1
Waiting admission to Institution	...	...	...	...	...	1
Away in country	...	...	...	...	...	2
Diagnosed not tuberculous	...	...	...	...	...	1

92

Forty-three of the 92 cases attended the Holborn Tuberculosis Dispensary.

The following indicates the reasons for non-attendance in the remaining cases:—

Removed to Hospitals, etc., for treatment without prior attendance at Dispensary	...	...	...	...	23
Out-patients at other Hospitals or Dispensaries	...	...	...	...	5
Dead before notification or died before attendance at Dispensary	...	...	...	...	13
Treatment at home by private doctor	...	...	...	...	1
Not traced	...	...	...	...	2
Removed from Borough	...	...	...	...	5
					—
					49
					—

Delayed Notification.

The Public Health (Tuberculosis) Regulations, 1912, require notification within 48 hours of the medical practitioner first becoming aware that the person is suffering from tuberculosis. It is still found that medical practitioners do not notify cases of this disease until tubercle bacilli have been found in the sputum and in a number of cases notifications are not received until the death of the patient or shortly before death takes place. In the past year two cases were notified only at death, five within one month of death, three within three months and one within six months of death. Both the cases notified at death died in hospital.

It is unfortunate that by a proviso in the Regulations of 1912, a medical practitioner is not required to notify a case of tuberculosis if he has reasonable grounds for believing that the case has already been notified. It would seem that any disadvantage accruing from duplication would be easily outweighed by the advantage of the additional encouragement to promote early notification which would ensue from the withdrawal of this proviso from the Regulations.

The Regulations also require notification of the admission and discharge of patients to poor law institutions and sanatoria.

Institutional Treatment.

During the year notifications were received of 91 admissions to institutions. These admissions represent 78 patients, some of whom are transferred from one institution to another, and others are discharged, or take their own discharge, and subsequently are re-admitted.

The 91 admissions were to the following institutions:—

Poor Law Institutions	...	...	...	...	31
Institutions of the Metropolitan Asylums Board	...	...	...	...	36
Other Institutions	...	...	...	...	24

Thirteen of these admissions were transfers from one institution to another or re-admissions.

Visitation of Homes, etc.

During 1926 the patients were visited by the Tuberculosis Nurse; the arrangements made whereby after March 31st, 1925, all such visits are paid by the Tuberculosis Nurse, continued.

Contacts.

All contacts are invited to attend for examination at the Tuberculosis Dispensary.

Sixty-six contacts, viz., 29 adults and 37 children under fifteen years of age, responded to this invitation and were examined for the first time during the year 1926. Of these, three adults and two children were found to be definitely suffering from tuberculosis; five adults were doubtfully so suffering. Fifty-six were definitely diagnosed as not suffering from the disease. The routine examination of contacts is desirable as a means of discovering not only cases of tuberculosis in early stages of infection, but also advanced and infective cases which may be disseminating infection although remaining undiscovered and untreated.

Arrangements were continued during the year for fuller co-operation with the school medical service so as to ensure that no contacts of school age will remain unexamined; if such examination cannot be carried out at the Dispensary the School Medical Officers are notified so that the examination may be carried out at the school. Information as to the results of such examinations, whether at the Dispensary or the schools, is interchanged as necessary.

Prevention of Spitting.

The necessity for the prevention of spitting, with a view to minimising the spread of tuberculosis, has been emphasised by the issue of warning cards on the subject. These have been exhibited in the various buildings in the control of the Council, also in common lodging houses, and in the workrooms of a number of large firms in the Borough. In addition specially designed opal plates have been placed on the Council buildings. They ask people not to spit and so prevent not only tuberculosis, but pneumonia and other diseases the germs of which are carried in the mouth and nose. It is very conceivable that such a disease as encephalitis lethargica is spread in this way in towns.

Deaths from Pulmonary Tuberculosis.

The number of deaths from pulmonary tuberculosis during the year was 26, a death rate of 0.60 per thousand in comparison with 1.04 for 1925.

The following table shows where the patients died in their own homes or institutions:—

Showing the number of Patients who died in their own homes and the number who died away from home in Hospitals or other Institutions.

	0-	1-	5-	10-	15-	20-	25-	35-	45-	55-	65-	All Ages,		
												Males.	Females.	Total.
Number of patients who died at home	1	...	...	...	1	1	2	...	2	3	...	6	4	10
Number of patients who died in hospitals, etc.	1	2	3	...	1	2	2	5	3	4	2	15	10	25
	2	2	3	—	2	3	4	5	5	7	2	21	14	35

The following is the Report of the Tuberculosis Officer, J. A. Struthers, M.B.

(Memo. 37/T.: Table I.)

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

[illegible]

1. Number of persons on Dispensary Register on January 1st	293	9. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary	9
2. Number of patients transferred from other areas and of "lost sight of" cases returned ...	5	10. Number of consultations with medical practitioners:--	
3. Number of patients transferred to other areas and cases "lost sight of"	75	(a) At Homes of Applicants	6
4. Died during the year	7	(b) Otherwise	9
5. Number of observation cases under A (b) and B (b) above in which period of observation exceeded 2 months	1	11. Number of other visits by Tuberculosis Officers to Homes	73
6. Number of attendances at the Dispensary (including contacts)	872	12. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes	1140
7. Number of attendances of non-pulmonary cases at Orthopaedic Out-stations for treatment or supervision	6	13. Number of	
8. Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for		(a) Specimens of sputum, &c., examined ...	176
(a) "Light" treatment	—	(b) X-ray examinations made	34
(b) Other special forms of treatment ...	73	in connection with Dispensary work	
		14. Number of Insured Persons on Dispensary Register on the 31st December	98
		15. Number of Insured Persons under Domiciliary Treatment on the 31st December	46
		16. Number of reports received during the year in respect of Insured Persons:—	
		(a) Form G.P. 17... ..	{ 21 + 81 letters 12
		(b) Form G.P. 36	

Work this year has proceeded on lines similar to those indicated in last year's report; and co-operation has been maintained with the Public Health Department, the local practitioners and University College Hospital, as also with the School Medical Service and the Maternity and Child Welfare Centre.

Special attention has been paid this year to the important question of dietary and cooking. It is frequently found that patients prejudice their chances of improvement, or fail to maintain progress already made, owing to unsuitable food and bad cooking; and when it is remembered that dyspepsia is a common accompaniment of tuberculosis in all forms and in all stages the importance of such matters as a factor in treatment becomes manifest. Small cookery books have been distributed by the Dispensary Nurse in suitable cases so as to help in the preparation of the dishes concerned.

The alteration of the form of Annual Return required by the Ministry of Health, and the provisions of Memorandum 37/T, have involved a revision of the Dispensary Register together with a review of the case papers and changes in the method of keeping records. These changes are proceeding.

In conclusion it is a pleasure to acknowledge the assistance which the work of the Dispensary continues to receive from the Tuberculosis Care Committee.

J. A. STRUTHERS.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

These Regulations which came into force in August, 1925, are intended to prevent persons suffering with pulmonary tuberculosis from entering or continuing any employment or occupation in connection with a dairy which would involve the milking of cows, treatment of milk or the handling of vessels used for containing milk.

During the past year the Council was asked to support representations to the Minister of Health that the Regulations should be amended so as to require that a person about to enter employment in connection with the milk trade should be required to produce to the local authority a recent certificate from a registered medical practitioner to the effect that the intending entrant into the employment was not suffering from tuberculosis. The Council expressed approval of the proposal to extend the Regulations so as to require a certificate of freedom from infection, but expressed the view that such certificate should be given by the Tuberculosis Officer, and should be produced, not to the local authority, but to the employer, and should be subject to annual renewal, and that it should be an offence for an employer to engage any such person without such medical certificate. A communication on these lines was forwarded to the Ministry of Health; in reply a communication was received drawing attention to the action taken by a Metropolitan Borough Council in circularising the milk purveyors in their area inviting them to arrange for the examination, by the Tuberculosis Officers, of all persons who applied to them for employment. The Minister expressed the view that this course had much to commend it and was one which might be adopted by other local authorities. Pursuant to this suggestion the Public Health Committee arranged with the Tuberculosis Officer for the examination of prospective

employees in the milk trade in the Borough and a circular letter was addressed to the registered milk-sellers drawing attention to the facilities thus afforded and expressing the hope that the milk traders would in future require the production of such certificate before giving employment to any new applicants for work in their business.

Although a great step forward has been made it may be pointed out that these Regulations apply only to employment in connection with a dairy and although this term includes farm, cowshed, milk store, milk shop or other place from which milk is supplied on or for sale, it does not include a shop or other place in which milk is sold for consumption on the premises only. No action, therefore, could be taken by a local authority to prevent the continued employment in, for example, a restaurant, of an employee suffering from tuberculosis, although the nature of the work carried on by such tuberculous person might entail the treatment of milk or the handling of vessels used for containing milk for human consumption. Information was received during the year respecting tuberculosis in the case of a cook employed in the preparation of meals for the staff at a large hotel. No action could be taken under the Regulations to require this employment to be discontinued. When the public is prepared to accept any extension of the Regulations they will probably be applied to all trades concerned with the preparation of food.

Tuberculosis Care Committee.

The Holborn Tuberculosis Care Committee constituted by the scheme prepared in the year 1922 took over the work of the Interim Care Committee on the 1st April, 1923. The Committee includes the following representation:—

Holborn Borough Council	...	...	Councillor Miss M. R. Lovelock. Medical Officer of Health (Dr. C. W. Hutt)
Tuberculosis Dispensary	...	...	Councillor Sir William Smith, D.L., J.P. Tuberculosis Officer (Dr. J. A. Struthers).
London County Council	...	...	Dr. F. C. Lewis. Miss H. Bell.
Guardians of the Holborn Union	...	...	Councillor Alfred Humphreys.
Charity Organisation Society	...	...	Miss E. F. Bolton.
Local Association of Children's School Care Committees.			Mrs. A. E. Dove.
Invalid Children's Aid Association	...	...	Miss E. Fildes.
Metropolitan District Nursing Association			Miss M. Wilmshurst.
Almoners of hospitals	...	...	Miss J. G. Salmon. Miss A. M. Smith.
Insurance Committee for the County of London.			Miss S. Double.
Northern London War Pensions Committee			Councillor Richard Davies (from Feb. 1926).
British Red Cross Emergency Help Fund			Mrs. Paige.
Other social workers (co-opted)	...	...	Mrs. E. C. Bedford. Miss H. M. Mathieson. Rev. Wilfred H. Davies, M.A.

The duties of the Committee were defined to include enquiries as to the economic position of the family of a patient suffering from tuberculosis as soon as the patient comes within the purview of the Tuberculosis Dispensary Scheme with a view to rendering such advice and assistance as the circumstances of the case dictate; assistance in the provision, where necessary, of clothing as required by the institution to which the patient is sent, and any arrangements for the family to be properly looked after during the absence of father or mother; the securing of auxiliaries for domiciliary treatment which cannot be provided without charitable assistance; recommendations to the London County Council as to the amount of payment, if any, to be made towards institutional treatment and the collection of agreed amounts; advising the Borough Council whether the patients recommended for extra nourishment are in a position to pay for the same and, if not, the extent to which assistance should be given; advising the Borough Council as to the contributions, if any, to be made by patients in respect to the provision of dentures under any arrangement made by the Council for dental treatment.

The Annual Report of the Committee is as follows:—

The Committee has met 11 times during the year.

Seventy-eight cases have been considered—48 new and 30 old cases.

Fifty-four cases—44 adults and 10 children—were referred by the London County Council for assessment. Of these, 30 were granted free treatment, and 20 were assessed to pay contributions, varying from 2s. 6d. to 20s. per week, towards the cost of their treatment and maintenance. Two patients made other arrangements for their treatment, one left the district without notice, and one refused treatment. Four cases were re-assessed, owing to changes in financial circumstances.

Contributions towards the cost of treatment and maintenance, amounting to £115. 7s. 6d., were collected on behalf of the London County Council in 29 cases—19 adults and 10 children. Twelve of these were still under treatment at the close of the year.

Ten Quarterly Progress Reports, on eight children, were received from the London County Council, and the information contained therein conveyed to the parents.

One case was transferred to the Care Committee of another Borough.

One child was sent away through the London County Council's Contact Scheme. Two others were recommended, but the parents made their own arrangements for sending the children away.

Four children were recommended to the Invalid Children's Aid Association for convalescence, and three of them were sent away. Two patients were sent away for convalescence through Stafford's Charity, one through the Charity Organisation Society, and one through the United Services Fund.

Five families were referred to the Charity Organisation Society, and received assistance. Four were referred to the United Services Fund, and three were assisted. Two were referred to the Red Cross Emergency Help Fund, one was assisted financially, and the other was helped with an Appeal to the Ministry of Pensions.

The Holborn Borough Council assisted with the provision of dentures to one patient, lent bedding to one family, and granted milk to the infant of one tuberculous mother.

Five cases were advised and helped in National Health Insurance matters.

Various efforts have been made to obtain work and improved housing accommodation—mostly unsuccessfully.

In October the Central Fund for the Industrial Welfare of Tuberculous Persons opened their first workshop for unskilled labour—the Spero Firewood Factory. At present there is accommodation for 12 men, and only ex-service men with a disability pension for tuberculosis

are eligible for employment in this workshop. Eighty men applied for admission. Four Holborn men were recommended for employment, and of these two were accepted.

In September, the following Resolution was unanimously passed by the Committee:—

The Holborn Tuberculosis Care Committee considers it urgent that an Open Air Day School should be provided for the delicate children of Central London, and requests the London County Council to try to obtain a site for a permanent Open Air School, either on the Foundling Hospital site, or on the "Bloomsbury Site."

The Resolution was forwarded to the Medical Officer, the Education Officer, and the Clerk to the London County Council. Copies were also sent to the Members of Parliament, the London County Council representatives, and the Town Clerks for the Boroughs of Finsbury, Holborn and St. Pancras; also to various associations and individuals interested in the welfare of children.

WILFRED H. DAVIES,
Chairman.

H. M. MATHIESON,
Hon. Secretary.

Home Nursing for Tuberculous Patients.

With the sanction of the Minister of Health arrangements were made for nursing of tuberculous patients by the Metropolitan Nursing Association. The nursing is limited to cases in which there is urgent need of skilled nursing.

The service will be most useful both for diagnostic purposes and for nursing patients whose removal to hospital is not practicable or where removal for some reason is necessarily delayed; it will not be allowed to stand in the way of admission to institution.*

During the year six such cases were nursed, a total of 146 visits being paid to these patients.

Dental Clinic for Tuberculous Persons.

Arrangements were continued for tuberculous persons referred from the Tuberculosis Dispensary to receive dental treatment as part of the Council's Tuberculosis Dispensary Scheme, at the Clinic of the British Dental Hospital, No. 10, John Street, W.C.

In the year 1926, eight new patients were treated.

Fillings were carried out in two cases and scaling and gum treatment was given in one. Extractions with general anæsthetic in six cases. One denture was provided.

The Clinic is held by the British Dental Hospital at the Council's Maternity Centre, 10, John Street, on Tuesday evenings. Before the tuberculous patients are admitted the Clinic is open for inhabitants and workers of the neighbourhood.

The Secretary of the Hospital has kindly supplied the following information of the work at the Clinic during the year 1926:—

Summary of Work carried out at Dental Clinic, 10, John Street, Holborn, on Tuesday Evenings, during 1926.

Number of sessions held	...	...	...	...	...	...	43
Number of patients' attendances	...	...	...	...	...	...	647
Number of fillings	...	...	...	...	...	...	47
Number of scalings	...	...	...	...	...	...	9
Number of extraction cases	{ Without anæsthetic						2
	{ With local anæsthetic						80
	{ With gas						56
	{ Number of teeth extracted						386
Number of dentures (including repairs)	...	...	...	...	...	...	51
Number of dressings	...	...	...	...	...	...	70
Number for advice	...	...	...	...	...	...	78
Number of denture visits	...	...	...	...	...	...	224
Number of new patients	...	...	...	...	...	...	120

Cancer.

During the year 1926, 63 deaths were recorded as due to cancer, equal to a rate of 1.46 per thousand. In the year 1906 the death rate from cancer in the Borough was 1.16; in 1915, 1.41; the decennial average rate was 1.13 for the 10 years 1906-1915, and 1.37 for the 10 years 1916-1925.

It will thus be seen that there is apparently an increase in the cancer death rate, and although some part of this increase, if not all, may reasonably be attributed to improved facilities for diagnosis, the figures, nevertheless, indicate the seriousness of and high mortality from malignant diseases.

No certain cure has yet been found and the best hope at present is in the direction of early diagnosis and surgical treatment.

During the year the distribution was continued of a special leaflet giving information as to the early signs and symptoms of cancer. Arrangements were also continued for this leaflet to be placed in "Please Take One" boxes in the Public Libraries, the Public Health Office, and the underground conveniences for both men and women. A large number of the leaflets were so distributed and it is hoped that in this way a large part of the day, as well as the resident, population was reached.

MATERNITY AND CHILD WELFARE.

Notification of Births.

During the year 330 births were registered as occurring in the Borough. During the same period 311 notifications of births occurring in the Borough were received. Of these 294 were from doctors and midwives, 17 from parents.

From the 294 notifications of birth forms from doctors or midwives, we are able to give the following information as to by whom the mothers were attended at the confinement, etc.:—

Private Doctors	...	...	...	...	...	84
Private Midwives	...	...	...	...	...	46
Out-patient Midwifery Departments of General Hospitals and Institutions:—						
Externs and others	...	...	...	...	...	18
Midwives.—Charing Cross Hospital	...	...	...	...	...	19
University College Hospital	...	...	...	...	...	41
Middlesex Hospital	...	...	...	...	...	24
Royal Free Hospital	...	...	...	...	...	12
Other Institutions	...	...	...	...	...	13
Training Institution for Midwives, Myddelton Square	...	...	...	...	...	37
						294

Eighteen notifications related to stillbirths, and one notified the birth of twins.

Number of Births.

The number of births transferred to the Borough from outlying institutions was	...	...	...	...	...	223
The number of births transferred from the Borough to other districts was	...	...	...	...	...	18
The number of net births belonging to the Borough was	...	...	...	...	...	535

There are no Maternity Hospitals or Public Lying-in Institutions in the Borough but maternity cases are admitted to certain nursing homes in the area.

Births in Crowded Homes.

An analysis has been made of the birth cards in 432 cases where visits were made in connection with the births, to ascertain where the mothers living in crowded houses were confined. The information obtained is given below:—

Living in	Confined at Home.		In Hospital.	
	No.	Percentage of Total Births.	No.	Percentage of Total Births
One roomed homes	86	16	64	12
Two " "	146	27	65	12
Three " "	35	7	22	4
Four " "	14	3	—	—

These figures show that many of the women are confined under very uncomfortable and unfavourable circumstances,

In 103 cases visits were not made for the following reasons:—

Infants died before visit due	...	...	...	19
Infants died before information of birth received	...	...	...	10
Above the standard for visitation	...	...	...	74

103

Home Visiting.

The visits paid to the homes by the Health Visitors during the year were as follows:—

	First Visits.	Revisits.	Total.
Expectant Mothers	85	145	230
Children under 1 year of age	502	1,707	2,209
Children 1 to 2 years of age...	6	501	507
Children over 2 years of age...	11	712	723
Enquiries <i>re</i> stillbirths	...	...	12
" <i>re</i> ophthalmia	...	...	12
" <i>re</i> neonatorum	...	...	169
Other visits	...	...	169

In addition 323 visits were made by Student Health Visitors.

Four hundred and twenty visits related to infants who came under further observation in their own homes or at Infant Welfare Centres, of these five died before reasonably old enough to attend an Infant Welfare Centre, and 35 removed from the Borough before the age of one month or did not return to the Borough after the birth of the child, leaving 380 infants as possible attendants at a Maternity and Child Welfare Centre; of this number 249 were recorded as attending a Centre, *i.e.*, 66 per cent.

The Centres attended were the following:—

192 attended the Council's M. & C. W. Centre at 10, John Street.

23 " " Short's Gardens.

7 attended the Centre at Onslow Street School, Saffron Hill.

1 " " Charing Cross Hospital.

6 " " Myddelton Square.

9 " " Middlesex Hospital.

3 " " University College Hospital.

5 " " Royal Free Hospital.

3 " " Other Centres.

249 attended an Infant Welfare Centre.

Thus more than one-half of those visited attended an Infant Welfare Centre, and of these well over four-fifths attended the Council's Centres.

Work at Centres.

HOLBORN CENTRE, 10, JOHN STREET.

The following is an analysis of the attendance at this Municipal Centre:

	Tuesday.			Wednesday.	Thursday.		Friday.
	Medical Consultation (alternate weeks) 2-5.30 p.m.	Ante-natal and Post-natal cases only (alternate weeks) 2-5.30 p.m.	Children and Mothers seen at Ante-natal Consultation	Medical Consultation 2-5.30 p.m.	Class 3-5.30 p.m.	Dentist. 2-4 p.m.	Medical Consultation 2-5.30 p.m.
No. of Sessions	26	26	26	52	51	49	52
Total attendances—							
Children	529	...	279	1408	19	191	1474
Mothers	113	109	59	189	435	416	243
Average weekly attendances—							
Children	20	...	11	27	...	4	28
Mothers	4	4	2	4	9	9	5

ST. GILES' CENTRE, SHORT'S GARDENS.

The most important development of the Maternity and Child Welfare work in the Borough during the past year was the opening of a Centre at Short's Gardens.

For some time prior to 1921 arrangements were in operation for a Maternity and Child Welfare Centre at the premises of the London Medical Mission in Short's Gardens. In consequence of the closing of the Mission and disposal of their premises it became necessary to close this Centre at the end of 1920. Subsequent to that date the Maternity and Child Welfare Committee frequently had under consideration the desirability of other arrangements being made for re-organising a Centre in that part of the Borough, but it was found impracticable to find suitable premises at a reasonable cost. In the year 1924, when the Incorporated Society for Improving the Condition of the Labouring Classes were about to erect dwellings on a site in Short's Gardens, a suggestion was made that accommodation suitable for a Maternity and Child Welfare Centre might be reserved in the new buildings. In response to this suggestion the Society constructed in the forecourt of their new dwellings a one-storey building suitably designed and fitted for the purposes of a Maternity and Child Welfare Centre. The London Medical Mission became the tenants of this building and agreed to sublet the same to the Council two half-days each week for Maternity and Child Welfare purposes.

The Minister of Health approved the proposed arrangement and the Branch Centre was opened on Monday, October 4th. As the opening synchronised with the beginning of Health and Baby Week, the opening of the Branch Centre was made the initial feature of the week, and special reference to the opening ceremony is made on page 102 of this Report in connection with Health and Baby Week.

The attendances at this Branch Centre during the three months ended 31st December, 1926, were as follows:—

	Monday Class 2—5.30 p.m.	Thursday Medical Consultation 2—5.30 p.m.
No. of Sessions	11	13
Total attendances—		
Children	4	122
Mothers	26	29
Average weekly attendances—		
Children ... ..	...	9
Mothers	2	2

The total number of attendances made by the Health Visitors at the Centres in 1926 was 355.

At the Holborn Centre, No. 10, John Street, 5,462 attendances were made by a number of mothers, including 58 expectant mothers, and 507 children, of whom 267 were under one year, 110 between one and two years old, and 130 aged 2-5 years on the date of their first attendance. In addition, 25 persons attended this Centre until the opening of the Short's Gardens Centre when they transferred their attendance to that Centre.

At the St. Giles' Centre, Short's Gardens, from the opening on the 4th October to the end of 1926, 181 attendances were made by 23 mothers and 60 children, of whom 29 were under one year, 12 from one to two years and 19 between two and five years.

The attention of mothers of bottle fed infants is drawn to the necessity of supplying vitamin C in the diet by the giving of fruit juice daily in suitable quantities; orange or tomato juice is advised as a rule.

For some years, both in the home and at the Centres, we have made use of simple leaflets dealing with the hygiene of infancy and maternity, and have hung the walls of the Centres with pictures and mottoes to give point to our teaching and to draw attention to the series of leaflets.

At one time leaflets were received with indifference, but in the past year the demand for these has grown remarkably and there are signs that they are much appreciated and have been of real service to those using them.

In addition to the health talk, assistance is given in the cutting out of garments; patterns of the most suitable woven garments are given away, also directions for making knitted garments and advice as to the choice of suitable materials.

The model garments used for demonstration were overhauled during the year, obsolete types being withdrawn and replaced by modern ones.

Three hundred and sixty-nine hanks of wool of a special quality obtained from Wales were sold at cost price to the value of £17. 3s. 6d.

The maternity bags have been used during the year by three mothers.

A summer outing was arranged to Bricket Wood for about 150 mothers, most of whom carried infants in arms, and between 30 and 40 other children below school age. The cost of the fares of some mothers was defrayed in part from money collected by private subscriptions.

Ante-natal Hygiene.

During the year, enquiries were made of mothers as to their attendance at an Ante-natal Centre immediately previous to the birth of the child visited. Of 420 mothers, about whom information was obtained, 199 (47 per cent.) were found to have attended Ante-natal Centres or received ante-natal care as under:—

Number of enquiries made	...	...	...	...	...	420
CENTRE ATTENDED—						
Holborn Centre, 10, John Street	...	...	...	...	...	25
Royal Free Hospital	...	...	...	...	...	31
Middlesex Hospital	...	...	...	...	...	25
Charing Cross Hospital	...	...	...	...	...	19
University College Hospital	...	...	...	...	...	23
Myddelton Square Institution	...	...	...	...	...	20
St. Bartholomew's Hospital	...	...	...	...	...	26
City of London Hospital	...	...	...	...	...	10
Queen Charlotte's Hospital	...	...	...	...	...	6
Other Centres	...	...	...	...	...	9
Ante-natal care from private doctor	...	...	...	...	...	5
						<hr/> 199 <hr/>

The following is a summary of the numbers of expectant mothers attending the ante-natal clinic, 10, John Street, found to have defects either due to or especially of concern in view of their pregnancy, during the year 1926:—

No. of Women attending Ante-natal Clinic	...	...	...	...	...	61
No. of Ante-natal cases	...	...	...	...	...	58
No. of attendances made by ante-natal cases	...	...	...	...	...	99
Attending after confinement	...	...	...	...	...	3
No. of attendances made by post-natal cases	...	...	...	...	...	6
Expectant Mothers for first time	...	...	...	...	...	13
Defects, especially connected with pregnancy—						
Venereal disease	...	...	...	...	...	1
Deformed pelvis	...	...	...	...	...	1
Threatened miscarriage	...	...	...	...	...	1
Excessive vomiting	...	...	...	...	...	4
Œdema	...	...	...	...	...	1
Varicose veins	...	...	...	...	...	12
Excessive vaginal discharge	...	...	...	...	...	3
Albuminuria (slight)	...	...	...	...	...	2
Pendulous abdomen	...	...	...	...	...	3
Retroverted gravid uterus	...	...	...	...	...	1
Other defects	...	...	...	...	...	1

Other defects—

Pulmonary tuberculosis	1
Heart disease	10
Anæmia	8
Respiratory diseases	1
Constipation	20
Dental caries	22
Sleeplessness	2
Dyspepsia	17
Pyorrhœa	8
Enlarged thyroid	1
Exophthalmic goitre	1
Other defects	2
No. referred to Maternity Hospitals	18
Normal	10
Abnormal	8
No. referred to Dental Clinic	21
No. of urine tests made	54
No. of Wassermann tests made	5
Ante-natal	2
Post-natal	3

The urine of one woman showed a cloud of albumin. Dietetic advice was afforded and arrangements made for her confinement to take place in a hospital. In one other case there was a faint trace only.

In connection with the 3 post-natal cases attending the Ante-natal Clinic, the defects noted were: heart disease 1; venereal disease 1; and dyspepsia 1.

Maternal and Infant Consultations.

The following summary refers to maternal and infant consultations at 10, John Street and the Short's Gardens Centres during the year 1926:—

Reasons for Attendance.	John Street.	Short's Gardens.
MOTHERS—		
Healthy	3	14
Difficulty with breast feeding ...	31	—
Generative organs	10	2
Dental caries	54	3
Heart disease	2	1
Debility	19	—
Anæmia	13	—
Venereal disease	2	—
Respiratory disease	7	1
Digestive disorders	11	—
Other disorders	38	2

CHILDREN—

Healthy	...	...	...	169	34
Congenital syphilis	...	...	...	3	—
Alimentary disorders	...	...	...	68	12
Rickets	...	...	...	37	2
Debility	...	...	...	10	—
Respiratory diseases	...	...	...	41	8
Hernia, umbilical	...	...	...	17	—
do. inguinal	...	...	...	1	1
Phimosis	...	...	...	23	1
Rash	...	...	...	7	2
Disease of eye	...	...	...	10	—
Disease of ear	...	...	...	7	—
Disease of nose and throat	...	...	...	23	1
Other diseases	...	...	...	91	—

In this table the more important ailment only has been recorded in each case.

Artificial Sunlight.

Eleven children were recommended to attend the artificial sunlight treatment centre in Tufton Street, Westminster, afterwards removed to Ranelagh Road, Pimlico.

One had two courses of treatment with an improvement in general health.

Three had a course of two to three months' treatment with definite improvement.

One had a course of three weeks with no improvement.

Four attended once, but found the treatment would be too costly and too far away for them to continue.

Two did not attend at all.

Mothers and children attending the Municipal Centres were referred to other departments for assistance during the year 1926 as follows:—

	Referred to.	Mothers.	Children.
Dental Clinic	...	57	18
Hospitals	...	13	35
Metropolitan Nursing Association	...	16	2
Assisted Milk	...	23	38
Convalescent Homes	...	2	14
Ante-natal Clinic	...	—	—
Private doctor	...	—	—
Tuberculosis Dispensary	...	1	—
Relieving Officer	...	—	1
Minor Ailments Clinic	...	28	101
Light Treatment	...	—	11
		140	220

The following summary gives particulars of mothers referred for breast massage in 1926:—

Number referred to Metropolitan Nursing Association ... 16

Results—

Lactation completely restored	7
Breast secretion re-established, but small bottle feeds required in addition to breast feeding	3
Massage quite unsuccessful	5
Child died (æt. 20 days)	1

Diarrhœa.

During the year the cases of diarrhœa occurring in children attending the Council's Centres were as follows:—

	10, John Street.	Short's Gardens.
1. Simple diarrhœa	28 cases	6 cases.
2. Ordinary summer diarrhœa	none	none.

Stillbirths.

During 1926 there were 18 stillbirths in the district. Difficult labour was responsible for 4 of these; of these 1 was due to contracted pelvis; in the remaining 3 enquiry did not elicit the determining factor.

Of the other 14, accidental hæmorrhage was the most likely cause of 1; prematurity 1; in 7 cases the parent was unable to give any information which could be used in assigning a probable cause; suffocation due to breech presentation 3; in the remaining 2 no information could be obtained.

Six of the 18 stillbirths occurred in the private practice of a doctor; 4 in the extern practice of an institution; 7 in an institution and 1 in the practice of a midwife.

Illegitimate Births.

The following table gives a summary of the information obtained as a result of enquiries respecting the circumstances of illegitimate babies in the year 1926:

Number of illegitimate births registered	46
Number respecting which enquiries were made for further information	42*
Lived with mothers who remained in parents' home ...	4
Lived with mothers who went out to work	1
Boarded out with foster mothers	4
Lived in Institution	4
Lived with both parents who lived together permanently	6
Died in early infancy	6
Stillborn	1
No information (gone away, etc.)	16

Dental Treatment.

A number of nursing and expectant mothers and young children were treated at the Council's Dental Clinic held at 10, John Street. The number of new patients during the year was 79, viz., 38 women and 41 children; the number of attendances 528 (women 378, children 150).

*Four were above standard for enquiry.

Assistance with Dentures, etc.

Extractions with local anæsthetic were made in 23 cases (21 women and 2 children), and with general anæsthetic in 72 cases, including 32 children. Scalings were carried out in 76 cases (all women). Small fillings were provided in 155 cases, including 59 children, and root fillings in 11 cases (mothers). Dentures were provided for 19 patients, 4 were required to pay the whole cost, 13 contributed towards the cost, and in the remaining 2 cases where the patients were very poor the dentures were provided free. In 2 cases dentures were remodelled; 1 was repaired and dressings were given in 29 cases. In the provision of dentures the cost is based on the charge approved for the time being for dentists on the Ministry of Pensions Panel.

Supply of Milk and Food for Expectant and Nursing Mothers and for Infants.

The supply of milk and food at less than cost price was continued during the year under the Maternity and Child Welfare Act, 1918, for:—

- (a) Nursing Mothers;
- (b) Expectant mothers in the last three months of pregnancy;
- (c) Children up to three years of age and, exceptionally, to children between three and five years of age.

Scale of Necessity.

The approved scale of necessity adopted by the Council on the 14th October, 1921, continued in force during the year 1926.

Applications received for milk free or at less than cost price are carefully investigated. Enquiries are made to verify statements of wages and other income; information is obtained from the Guardians of the Poor as to relief given for unemployment or other necessitous conditions. Other possible sources of assistance are investigated, and all practicable steps taken to prevent overlapping. The applications are considered by an Assistance Sub-Committee of the Maternity and Child Welfare Committee meeting fortnightly for the purpose. Where grants are made the cases are reviewed by the Sub-Committee at intervals not exceeding one month.

During the year 233 applicants received free or assisted milk under the Scheme. This number included 121 who were receiving such assistance at the end of the year 1925. Grants were made in 112 new cases. At the end of the year 1926, 120 cases were receiving assistance, viz., free milk 92, milk at half-price 19, prepared milk free 6, half-price 3.

The following table shows new cases assisted in 1926:

		Milk.		Prepared Milk.	
		Free.	Part Cost.	Free.	Part Cost.
Expectant Mothers	...	11	--	—	—
Nursing Mothers	...	33	1	—	—
Children	...	39	6	15	7

Home Help.

The Council's Home Help attended 25 cases during the year in comparison with 29 in the year 1925. In 10 of these the whole-time officer attended entirely and in 6 she attended during the earlier part of the lying-in period, being replaced later by one of the Home Helps from the emergency panel in order to take over new cases. In 9 cases emergency Home Helps only were employed. The latter were engaged when more than one case occurred at the same time and during the summer vacation leave.

All applications for the services of the Home Help are considered by the Assistance Sub-Committee of the Maternity and Child Welfare Committee.

In 5 cases of extreme necessity the services of the Home Help were granted free.

In all other cases the applicants were required to contribute towards the cost, contributions ranging from 20s. to 2s. 6d. per week.

The services of the Home Help have been much appreciated; it has been found that the Council's provision meets a much felt want in the Borough.

Convalescent Homes.

Two applications for convalescent home treatment for mothers and their babies were granted in comparison with 7 in the previous year. The smallness of the number was due to the difficulty in obtaining suitable accommodation for mothers and babies. In the 2 cases sent away small contributions towards the cost were required.

Thirteen applications were granted for convalescent home treatment for children. In 1 case the application was subsequently withdrawn. Twelve children were sent away in comparison with 15 in 1925. Six of these were sent to the Marjorie Lumley or the Arkley Convalescent Homes where the Council reserved a bed, and 6 were admitted to the Hopedene Convalescent Home at Barnet, by the kind co-operation of Sister Hope of the West London Mission, Kingsway. In 2 cases the children were sent away free, and in 10 contributions were required towards the cost. In addition to these, 2 other applications were referred to the Poor Law Authorities for admission to a convalescent home of the Metropolitan Asylums Board, and 1 was referred to the Church Army.

Visitors to Centre.

Being centrally situated in London, during last year, as in previous years, we have been able to welcome a considerable number of visitors, both from the country and abroad, at the Municipal Centre, No. 10, John Street.

Saffron Hill Maternity and Child Welfare Centre.

Consultations in connection with this Voluntary Centre are held at the St. Winifred Club, St. Peter's School, Onslow Street, Saffron Hill.

During the year ended 31st March, 1926, 413 infants and children under 5 attended the consultations, 121 of the total number coming from the Holborn Borough.

Extra food and nourishment was provided, also convalescent treatment at Homes; classes and lectures on health, care of the home, food economy and kindred subjects were held. The Chairman and Honorary Secretary is Miss Mary Canney, 75, Lamb's Conduit Street.

Deaths of Infants under One Year of Age, 1926.

The homes were visited in a large proportion of the infant deaths, and any requisite information obtained, and when required, suitable advice given.

The cause and age of death are given in the following Table:—

Cause of Death	Under 1 Week		1-2 Weeks		2-3 Weeks		3-4 Weeks		Total under 4 Weeks			4 Weeks and under 3 Months		3-6 Months		6-9 Months		9-12 Months		Total under 1 Year		
	M	F	M	F	M	F	M	F	M	F	Both sexes	M	F	M	F	M	F	M	F	M	F	Both sexes
Measles ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	2	3
Tuberculous Disease (non-pulmonary) ... ..	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	2	...	2	...
Pneumonia (all forms) ... ..	...	...	...	...	...	2	...	...	2	2	2	...	1	...	...	...	...	1	3	3	6	...
Diarrhoea ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	1	1	...
Enteritis ... ..	...	...	...	...	...	...	...	...	...	...	...	2	...	5	1	...	...	1	...	8	1	9
Syphilis ... ..	...	...	...	1	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	1	1	...
Congenital Malformations ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Premature Births	6	5	...	2	...	...	...	...	6	7	13	...	...	...	...	1	1	...	7	8	15	...
Atrophy, Debility, Marasmus ... ..	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	2	...	2	...
Other causes	2	2	1	...	...	1	...	...	3	3	6	1	...	1	...	...	...	1	4	5	9	...
Totals	8	7	1	3	0	3	0	0	9	13	22	8	0	7	2	0	3	3	3	27	21	48
Total both sexes	15		4		3		0		22			8		9		3		6		48		

Net births registered during the calendar year.				Net deaths registered during the calendar year.			
	Males	Females	Both sexes		Males	Females	Both sexes
Legitimate Infants	251	238	489	Legitimate Infants	25	14	39
Illegitimate Infants	25	21	46	Illegitimate Infants	2	7	9

Deaths of Children 1 to 5 Years, 1926.

Twenty-three children between the ages 1 to 5 years died from the following causes:—

Cause of Death.	Ages.								Total.		
	1-2		2-3		3-4		4-5		1-5		Both Sexes.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Measles	1	1	...	1	...	...	..	...	1	2	3
Whooping Cough ... ..	...	...	...	...	...	...	1	..	1	...	1
Diphtheria ... ..	...	1	2	...	...	...	...	...	2	1	3
Tuberculosis (non-pulmonary) ... ..	...	...	1	...	...	1	...	...	1	1	2
Meningococcal Meningitis	1	...	...	...	...	...	...	...	1	..	1
Pneumonia	4	2	...	...	1	...	...	...	5	2	7
Bronchitis ... ..	...	1	...	...	...	...	...	...	...	1	1
Diarrhoea	2	...	...	...	...	...	...	...	2	...	2
Other Causes	2	1	...	...	...	...	...	...	2	1	3
Totals	10	6	3	1	1	1	1	...	15	8	23
Totals—Both Sexes	16		4		2		1		23		

INFECTIOUS DISEASES AMONG MOTHERS AND CHILDREN.

Puerperal Fever.

Three cases of puerperal fever and one case of puerperal pyrexia were notified in 1926. Two patients died.

In the first case the disease followed the birth of the child in a women's hospital; the patient made a good recovery.

The second case, which terminated fatally, was a married woman who had had seven previous pregnancies. The confinement took place at home, the patient's husband only being present. A doctor and a "handy woman" were afterwards sent for. The patient was removed to a Poor Law Hospital, where she died four days after admission. The Medical Superintendent of the hospital to which the patient was removed expressed the view that the disease arose from septic absorption after miscarriage and retained placenta.

The third case, puerperal pyrexia, was notified in November and followed the birth of a first child. The confinement took place in a Lying-in Hospital; instruments were used, the patient made good recovery.

The fourth case, notified after correspondence, terminated fatally; death occurred in a women's hospital to which the patient, a visitor newly landed from Australia, had been removed from furnished apartments. The result of the inquest held on this patient was a verdict of death due to procured abortion.

Puerperal Fever and Puerperal Pyrexia Regulations, 1926.

These Regulations, which came into operation on the 1st October, 1926, prescribed new forms for the notification of puerperal fever and required the notification of cases of puerperal pyrexia, *in addition to* the present notification of puerperal fever, thus placing an obligation upon medical practitioners to notify all cases of pyrexia during the puerperium irrespective of the cause to which the fever may be attributed.

In a circular, dated the 9th August, 1926, issued from the Ministry of Health to Local Sanitary Authorities, it was pointed out that if this more complete notification was to have practical value it should be supplemented by the provision, when necessary, of facilities for assistance in diagnosis and for the treatment of patients who are not able to secure adequate treatment for themselves.

In conformity with the suggestions of the Ministry, the Council made arrangements for the following facilities to be available:—

(A) Consultations with an obstetric specialist in connection with diagnosis of suspected cases of puerperal fever or puerperal pyrexia.

(B) The nursing of cases of puerperal pyrexia.

(C) Bacteriological examinations in suspected cases of puerperal fever and puerperal pyrexia.

Appropriate contributions towards the cost of such services are to be asked for in cases where the patient or her relatives are in a position to contribute.

Notice was given to medical practitioners residing or practising in the Borough of the duties imposed on them by the Regulations. A supply of notification forms was also sent to them and information of the facilities provided for consultations, nursing and bacteriological examinations.

Ophthalmia Neonatorum.

During the year 12 cases of ophthalmia neonatorum were brought to our notice, 6 of which were notified in pursuance of the Public Health (Ophthalmia Neonatorum) Regulations, 1914; 2 of the notifications were from doctors in private practice and 4 from the Medical Officers of institutions. Three of these notifications were received as the result of correspondence, after the existence of the cases had been brought to our notice.

In 6 cases notifications in accordance with the Regulations were not received, of these, 3 were discovered by Health Visitors, 1 was ascertained from the death returns, and information respecting the other 2 came from the London County Council and the Metropolitan Asylums Board respectively.

Unless each case is notified to the local Medical Officer of Health, the public will be ignorant of the real extent of the disease; the whole of the cases cannot be followed up to ascertain the amount of permanent damage done to the eyesight.

SIX CASES NOTIFIED IN ACCORDANCE WITH THE PUBLIC HEALTH (OPHTHALMIA NEONATORUM) REGULATIONS, 1914.

Case Number.	Age when Notified.	Age at Onset.	By whom Notified.	Type of Disease on Health Visitor's first visit.	Where Treated.	Medical Attendance and Nursing.	Result.	Birth Notified by	REMARKS.
1	23 days ...	8 days	Doctor	Moderate	Home ...	Doctor and District Nurse	Cured	Doctor ...	
2	15 days ...	2 days	Doctor (Hospital)	Slight	Home and out-patient University College Hospital	Midwife and out-patient treatment University College Hospital	Cured	Extern Department Hospital	
5	22 days ...	7 days	Doctor (Hospital)	Not seen	Maternity Ward, St. Stephen's Hospital and St. Margaret's Hospital	In-patient, Hospital treatment	Cured	Not notified	Information of child's existence obtained from a Social Worker
8	6 days ...	Not ascertainable	Doctor	Not seen	St. Margaret's Hospital	Doctor and in-patient Hospital treatment	Not seen	Doctor ...	Did not return to this Borough. Address could not be ascertained
10	3½ months	8 days	Doctor (Hospital)	Slight	Maternity Ward, University College Hospital and Home	In-patient and later out-patient treatment University College Hospital	Cured	Intern Department University College Hospital	
12	20 days ... (about)	—	Doctor (Hospital)	Not seen	St. Margaret's Hospital	In-patient, Hospital treatment	Cured	Not notified in Holborn	Child found abandoned on a stairway in Holborn and taken to Poor Law Institution

In the following tables particulars are given as to each case:—

SIX CASES NOT NOTIFIED IN ACCORDANCE WITH THE PUBLIC HEALTH (OPHTHALMIA NEONATORUM) REGULATIONS, 1914.

Case Number.	Age when Information received.	Age at Onset.	Information.	Type of Disease on Health Visitor's first visit.	Where treated.	Medical Attendance and Nursing.	Result.	Birth notified by.	Remarks.
3	Died 14 days previously	Not ascertainable.	Death returns	Not seen	St. Margaret's Hospital	In-patient, Hospital treatment	Died, aged 11 days. Cause of death—congenital syphilis and gonorrhealophthalmia	Not notified in Holborn ...	Not known at address given
4	13 days ...	12 days	Health Visitor	Very slight... ..	Home and Central London Ophthalmic Hospital	Out-patient, Hospital treatment	Cured	Midwife	
6	12 days ...	1 day	Health Visitor	Slight	Home and Infant Welfare Centre	Midwife and Minor Ailments Clinic, Maternity and Child Welfare Centre, 10, John Street	Cured	Extern Department Hospital	
7	13 days ...	7 days	Metropolitan Asylums Board	Not seen	St. Margaret's Hospital	In-patient, Hospital treatment	Cured	Not born in London	
9	14 days ...	10 days	London County Council	Slight	Maternity Ward. Hospital and Home	In-patient, and later out-patient, Hospital treatment	Cured	Extern Department Hospital	
11	17 days ..	1 day	Health Visitor	Moderate	Hospital and Home	Maternity Ward, Hospital	Cured	Extern Department Hospital	

Ophthalmia neonatorum is one of the most important causes of blindness. Fortunately, however, as far as we have been able to ascertain, no case coming to our knowledge last year in the Borough suffered permanent injury in this way.

One child died in hospital when 11 days old. In one case reliable information could not be obtained because the mother of the infant did not return to this Borough, but in the remaining ten cases there was definite evidence that the patients were cured. This result was secured by the expenditure of much time and energy, and incidentally money, by all concerned; the occurrence of most, if not all, of the cases could have been prevented by a simple procedure. A year or so ago the Scottish Board of Health issued a circular to medical practitioners strongly recommending the installation of silver nitrate solution into the eyes of newly-born children, and intimating that they will in future require a report with particulars of treatment from Medical Officers of Health in all cases in which there occurs loss of vision. In this country the installation has been recommended with fortunate results by at least several Medical Officers of Health to those attending childbirths in their areas, but legislation in some form advocating or requiring its adoption generally is required so that the whole country may benefit.

Whooping Cough.

Visits were paid to 145 persons suffering from whooping cough. Of these, 96 were notified by doctors; in 18 others the information was derived from the schools; 17 from the Health Visitors; 5 from parents; 7 from M.A.B.; and 2 from an Infant Welfare Centre.

One died, between 1 year and 5 years.

Age.

Fifteen were children under 1 year, seventy-two were aged 1 to 5 years, and forty-eight 5 to 16 years.

Contacts.

(145 enquiries.)

Thirty-four had no contacts; 111 had contacts. The number of contacts was 301, of whom 123 were susceptible, 178 already having suffered from an attack.

No. of cases...	...	...	29	35	12	8	9	2	3	7
and										
No. of contacts	...	...	1	2	3	4	5	6	7	8
No. of cases...	...	...	44	14	3	1	2	2	0	2
and										
No. of susceptible contacts...			1	2	3	4	5	6	7	8

Spread of Infection in Family.

The 145 cases occurred in 112 families. In 80 families 1 case occurred; in 22 families 2 cases occurred, and in 7 families 3 cases occurred.

Removal.

Thirty-two children were removed to hospital, approximately 22·0 per cent. as opposed to 33 per cent. last year. Thirty-one were admitted to hospitals of the M.A.B., 1 to the Holborn and Finsbury Hospital.

Spread of Infection.

There is much difficulty in getting parents to realise that the child of pre-school age must be sheltered from the risk of infection as much as the child attending school. Parents realise that the school child is a potential focus of infection for many other children, and should be guarded from infection; they fail to realise that the pre-school child, although less likely to spread the disease, is less able to resist the dangers of an attack; many parents state candidly that they send children with whooping cough into the squares and streets during school hours, when "there are no other children about."

Measles.

The notification of measles was discontinued at the end of 1919, but during 1923, I received information of 436 cases of measles. Of these 203 were notified by school teachers, 36 by medical practitioners, information of 40 was given by the Metropolitan Asylums Board, of 91 by the Health Visitors, 30 by parents, and 36 by the L.C.C. District Officer.

Ages.

9 were under 1 year
192 were between 1 and 5 years.
216 were between 5 and 16 years.
19 were over 16.

Contacts.

One hundred and fifty-two had no contacts, the L.C.C. definition of a contact being used.

Two hundred and fifty-four had contacts. The number of contacts was 652, of whom 342 were susceptible, 310 having already suffered from an attack.

No. of cases ...	91	74	44	16	11	13	6	9
and								
No. of contacts ...	1	2	3	4	5	6	7	8 or more
No. of cases ...	101	44	20	5	4	1	1	5
and								
No. of susceptible contacts	1	2	3	4	5	6	7	8 or more

Spread in Family.

The 436 cases occurred in 336 families. In 259 families 1 case occurred, in 56 families 2 cases occurred, in 19 families 3 cases occurred, and in 2 families 4 cases occurred.

Removals.

In all about 14 per cent. of the patients were removed to institutions.

37 were removed to a M.A.B. Hospital.

10 „ „ „ the Holborn and Finsbury Hospital.

14 „ „ „ the London Fever Hospital.

Home Nursing.

Sixteen cases of measles were referred to the Metropolitan Nursing Association for home nursing under the Council's arrangements, 164 visits being paid.

German Measles.

During the year information was received relating to 20 cases; 1 was notified by a doctor and information of 9 cases was received from schools, 4 from the M.A.B., 1 from the Health Visitor, 2 from parents, 2 from a divisional surgeon of police, and 1 from an Infant Welfare Centre.

Ages.

1 was under 1 year.

6 were between 1 and 5 years.

10 were between 5 and 16 years.

3 were adults.

Contacts.

The number of contacts was 43, of whom 25 were susceptible, 18 having already suffered from an attack; 6 had no contacts.

No. of cases ...	0	8	3	2	0	0	0	0	0	1
and										
No. of contacts ...	1	2	3	4	5	6	7	8	9	10
No. of cases ...	6	3	1	0	0	0	0	0	0	1
and										
No. of susceptible contacts	1	2	3	4	5	6	7	8	9	10

Spread in Family.

The 20 cases occurred in 14 families. In 9 families 1 case occurred, in 4 families 2 cases occurred, in 1 family 3 cases.

Removals.

About 20 per cent. of the cases were removed to institutions—

3 to the London Fever Hospital.

2 to M.A.B. Hospitals.

Epidemic Diarrhæa.

This disease is notifiable in only a few districts in London, and is not notifiable in Holborn.

The number of deaths of young children under two years of age classified under the head, Diarrhœa and Enteritis, was 12, of whom 10 were under 1 year. The deaths were equal to a rate of 22.43 per 1,000 births in comparison with 11.8 for all London.

The methods used to deal with the disease have been detailed in a previous report; the most important perhaps is that during the third quarter of the year extra visits are paid to those homes in which epidemic diarrhœa is more likely to occur.

Nursing Arrangements.

Nursing arrangements have been made with the Metropolitan Nursing Association of 31, Bedford Place, W.C. 1, for the nursing, when required, of necessitous cases of measles, whooping cough, ophthalmia neonatorum, epidemic diarrhœa, pneumonia, encephalitis lethargica, tuberculosis, maternity (including complications after confinements), puerperal fever and puerperal pyrexia.

In cases of tuberculosis nursing is restricted to patients recommended for such services by the Tuberculosis Officer.

Nursing in necessitous maternity cases is subject to the prior approval of the Maternity and Child Welfare Assistance Sub-Committee. In these cases and those relating to puerperal fever and puerperal pyrexia, it is expected that the patients or their relatives will contribute towards the cost in accordance with their means.

The services of the nurses were used as follows in 1926:—

Deficient Lactation	...	...	20 Cases	225 Visits.
Measles	...	...	16 „	164 „
Ophthalmia Neonatorum	...	...	2 „	83 „
Pneumonia	...	...	1 Case	3 „
Influenza	...	...	3 Cases	26 „
Tuberculosis	...	...	6 „	146 „
Total			48 Cases	647 Visits.

WIDOWS', ORPHANS' AND OLD AGE CONTRIBUTORY PENSIONS ACT, 1925.

This Act, passed in 1925, imposed certain limited duties on Local Authorities respecting cases where, in the interests of a child, a pension payable under the Act should be administered other than through the mother. The Local Authority in London for this purpose was the London County Council, but authority was conferred on that Council to delegate the powers and duties to the Metropolitan Borough Councils, and shortly after the Act came into operation, the London County Council delegated the whole of the powers and duties conferred on it by Section 6 of the Act to the Borough Council.

The duty includes enquiry to ascertain the facts of any cases which may have to be dealt with, and ordinarily the widow or other person affected will be given an opportunity of presenting her case to the Local Authority before the particulars are submitted to the Minister of Health. No such case was referred to the Council during the year.

HEALTH AND BABY WEEK, 1926.

Health and Baby Week was observed in the Borough from the 3rd to the 9th October. The arrangements made included the following:—

Co-operation with Clergy.

1. A request was made to the Clergy of all denominations in the Borough to make special reference to the subject in the course of their Services on Health Sunday, October 3rd, and to co-operate by the distribution of literature to the members of their congregations. Replies were received promising co-operation from:—

The Revd. Henry Ross, St. Albans.

The Revd. Wilfred H. Davies, M.A., St. Giles-in-the-Fields.

The Revd. E. C. Bedford, St. Andrew's.

The Revd. W. S. Macgowan, Holy Trinity, Kingsway.

The Revd. S. E. Jarvis, St. Etheldreda.

The Revd. G. F. Haines, St. Peter's.

Sister H. Camillus, St. Cecilia.

The Revd. E. E. Baker, Wild Street (Baptist).

Distribution of Leaflets by Retail Tradesmen.

2. Requests were issued to retail traders to co-operate by the distribution of literature from their counters during Health Week and the exhibition of posters.

About 60 traders expressed their willingness to co-operate and in this way upwards of 20,000 leaflets were distributed. The leaflets used were:—

"Save your Children from Diphtheria" (a four-paged leaflet on diphtheria immunisation); "Deafness" (a leaflet produced by the Middlesex Hospital Press); "London's Health"; "Sleep" (a leaflet used by arrangement with the National Baby Week Council); "Care of Milk in the Home"; "Don't Spit" (a leaflet produced by the Health and Cleanliness Council); and "Our Daily Bread."

Exhibition of Posters.

3. Arrangements were made for the exhibition of posters in shops, on advertising stations and by means of sandwich men. Six men were employed for five days in the week parading the main thoroughfares in the Borough. Posters were also displayed on the Council's buildings and water carts, and, with the co-operation of Messrs. W. Clarkson & Son, Ltd., on the dust carts and lorries and street refuse carts. The posters used included:—

An illustrated poster on immunisation against diphtheria; one respecting the use of milk for children; a third dealing with the preservation of open spaces; and a fourth, specially displayed in the schools in the Borough, respecting cleanliness (this was produced by the Health and Cleanliness Council).

Opening of New Maternity and Child Welfare Centre.

4. Arrangements were made for the work at the new Maternity and Child Welfare Centre in Short's Gardens to commence on Monday, the 4th October. More than a hundred mothers attended at the opening when the Chairman of the Maternity and Child Welfare Committee (Councillor The Revd. Henry Ross) gave an informal address, and the Vice-Chairman (Councillor Lady Smith, J.P.), entertained the mothers to tea.

Town Planning Conference.

5. On Wednesday, the 6th October, a Conference was held in the Court Room at the Town Hall on Town Planning for London and Greater London. In the absence of the Mayor, Councillor Charles Fitzroy Doll, J.P., presided; the speakers included:—Sir H. E. Bruce Bruce-Porter, Mr. Harold Swann (Chairman of the Town Planning Committee of the London County Council), Dr. R. King Brown (Medical Officer of Health of Bermondsey), Dr. S. J. C. Holden (Medical Officer of Health, Bucks County), Alderman Culpin, L.C.C., Capt. R. L. Reiss (Garden Cities' Association), and Mr. E. J. Elford (Borough Surveyor, Wandsworth).

The Conference was attended by representatives of a number of Metropolitan and Greater London Local Authorities.

Meeting for Mothers.

6. On Thursday, the 7th October, a special meeting for mothers attending the Maternity Centre at No. 10, John Street was held. Lady Islington presided and addresses of an educational character were given by Dr. Hugh Thursfield, Physician, Great Ormond Street Hospital for Sick Children, Dr. Letitia Fairfield, C.B.E., Divisional Medical Officer, L.C.C. (a resident of the Borough), and Dr. J. Fenton, M.O.H., Kensington. A large number of mothers were present and were subsequently entertained to tea.

Co-operation with Schools.

7. Arrangements were made for the distribution through the schools of leaflets respecting the facilities offered by the Council for immunisation against diphtheria. The schools also co-operated, as in previous years, by arranging for health lessons to be given and for a series of health questions to be submitted to the children at the close of the week. The questions were prepared in the Public Health Department; the best three sets of answers in each school department were selected by the Head Teachers for examination in the Public Health Office, two prizes being awarded to each school, one for boys and one for girls. The Mayor and Mayoress kindly entertained to tea the prize-winners and the two next best examinees from each department.

8. Messrs. George Kent, Limited, again placed one of their windows at the disposal of the Committee for the exhibition of health pictures by means of an attractascope.

The following is a copy of the questions submitted to the children in the schools:—

Section A.

(All four questions to be answered).

(Put the number of each question before the answer).

1. Why must homes be kept clean? Mention the most important things to be done to keep the home and yard or garden clean.
2. Where and in what ways is it best to spend your free time out of school? Give reasons for your answer.
3. Describe your favourite game, say why you like it, and what good it does your mind and body.
4. At what time ought school children to go to bed when they are 6 years old, 10 years old, 13 years old?

In the morning, before going to school, you should get up in good time. Give the reasons why.

Section B.

(Any two of the following questions to be answered).

(Put the number of each question answered before the answer).

5. Say what you know about the way in which the Public Health is looked after in Holborn. Mention what is done to lessen the spread of measles and diphtheria.
6. Explain the value of fresh air and exercise, and state how we can get these when living in a crowded city.
7. Why is it wrong to eat between meals? Why should we eat plenty of raw fruits, salad and green vegetables? When should fruit and sweets be eaten?
8. Why is it important to have clean food? If you are sent to fetch (a) a pint of milk, (b) a loaf of bread, how should you carry them through the streets, and how should they be taken care of at home?
9. Why is alcohol harmful to children? What are the best things for them to drink?
10. Give the reasons why rooms must be ventilated. What is the best way to do it?
11. Why is it important to breathe through the nose? Mention the causes of mouth breathing, and state how you can prevent it.

MINOR AILMENTS CLINIC.

Arrangements were continued at the Municipal Child Welfare Centre, 10, John Street, for the treatment of minor ailments in children up to 5 years of age. The Clinic opened on the 12th April, 1925; it has been held every Tuesday and Friday afternoon to deal with such minor ailments as ringworm, impetigo, scabies, intertrigo, sores, cuts, grazes, burns, blepharitis, conjunctivitis, ear discharge, etc. The Clinic is under the supervision of the Medical Officer of the Maternity and Child Welfare Centre and a qualified nurse is in attendance.

Medical Inspection and Treatment of School Children.

The medical inspection and treatment of children attending Public Elementary Schools in Holborn is carried out by the London County Council.

The following treatment Centres are provided under the L.C.C. Schemes:—

- (1) Finsbury Centre, Spencer Street, Goswell Road.
- (2) Moorfields Ophthalmic Hospital, City Road.
- (3) Soho Centre, Gerrard Street.
- (4) Lancing Street Centre, Lancing Street, N.W. 1.
- (5) Cleansing Station (Scabies) Children's Baths, Central Street, E.C. 1.

Centres are also provided at the following Hospitals and Dispensaries:—

- (1) St. Bartholomew's Hospital.
- (2) Bloomsbury Dispensary.
- (3) Central London Ophthalmic Hospital.
- (4) Central London Throat and Ear Hospital.
- (5) Dental Hospital.
- (6) Homœopathic Hospital.
- (7) Hospital for Sick Children.
- (8) Italian Hospital.
- (9) Metropolitan Ear, Nose and Throat Hospital.
- (10) Middlesex Hospital.
- (11) Royal Free Hospital.
- (12) Tuberculosis Dispensary, University College Hospital.
- (13) University College Hospital.

We endeavoured to co-operate with the Education Authority by giving information respecting children suffering from infectious disease and child contacts attending public elementary schools.

MEDICAL EXAMINATION OF SCHOOL CHILDREN—ROUTINE INSPECTIONS—ELEMENTARY SCHOOLS IN HOLBORN, 1926.

Age, Group.				Number examined.	Clothing and Boots.			Nutrition.			Cleanliness of Head.			Cleanliness of Body.			Condition of Teeth.			Vision.		
					Good.	Fair.	Poor.	Good.	Average.	Below normal.	Clean.	Nits.	Pediculi.	Clean.	Dirty.	Pediculi.	All sound.	Less than four decayed.	Four or more decayed.	6/6 in both eyes.	6/9 in either eye.	6/12 or worse in either eye.
Entrants—																						
Boys	...	...	...	292	184	90	9	41	237	14	265	25	2	291	1	...	190	70	32	...	...	...
Girls	...	...	...	250	153	93	4	35	201	14	210	26	14	247	3	...	150	77	23	...	...	...
Age 8—																						
Boys	...	...	...	127	41	83	3	28	78	21	113	13	1	122	3	2	87	34	6	84	21	20
Girls	...	...	...	160	50	105	5	25	114	21	116	38	6	158	1	1	96	60	4	105	27	19
Age 12—																						
Boys	...	...	...	221	54	148	19	40	157	24	208	11	2	217	4	...	175	43	3	155	23	42
Girls	...	...	...	210	53	149	8	43	149	18	151	48	11	208	2	...	164	46	...	137	25	48
Age 14—																						
Boys	...	...	...	203	45	146	12	36	155	12	186	17	...	198	4	1	160	43	...	145	18	39
Girls	...	...	...	228	59	161	8	58	164	6	175	41	12	228	...	...	183	45	...	163	16	49
Total				1,691	639	984	68	306	1,255	130	1,424	219	48	1,669	18	4	1,205	418	68	788	130	217
Holborn %					57.8	58.2	4.0	18.1	74.2	7.7	84.2	13.0	2.3	98.7	1.1	0.2	71.3	24.7	4.0	9.4	11.5	19.1
London %					60.2	38.5	1.3	21.4	72.8	65.8	92.5	6.9	0.6	96.0	3.9	0.1	64.2	28.5	7.3	54.7	25.5	19.8

DEFECTS FOUND

At Medical Inspection, Holborn Elementary Schools, 1926.

Defect.	Boys.								Girls.							
	Entrants		Age 8		Age 12		Age 14		Entrants		Age 8		Age 12		Age 14	
Number Examined ...	292		127		221		203		250		160		210		228	
	Cases	+	Cases	+	Cases	+	Cases	+	Cases	+	Cases	+	Cases	+	Cases	+
Malnutrition ...	—	—	1	1	—	—	—	—	—	—	1	1	—	—	—	—
Skin Disease ...	2	1	3	2	—	—	—	—	2	2	—	—	—	—	1	1
Enlarged Tonsils ...	15	2	6	2	3	2	3	3	15	6	13	3	8	7	4	4
Adenoids ...	3	3	1	1	—	—	—	—	1	1	—	—	2	2	1	1
Tonsils and Adenoids .	17	16	3	3	5	5	2	2	11	10	4	4	7	7	1	1
Other Nose and Throat	—	—	—	—	1	1	—	—	3	1	1	1	—	—	—	—
Enlarged Glands ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
External Eye Disease...	8	5	3	3	3	2	—	—	5	4	2	1	4	1	6	4
Vision for treatment ...	—	—	—	12	—	35	—	22	—	—	—	12	—	38	—	29
Otorrhœa ...	6	4	1	1	2	2	1	1	3	1	1	1	2	2	1	1
Other Ear Disease ...	1	1	—	—	—	—	—	—	—	—	—	—	2	1	1	1
Hearing ...	1	1	—	—	—	—	2	2	1	1	—	—	2	2	—	—
Speech defects...	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—
Heart ...	2	—	1	—	1	—	2	—	2	—	3	—	10	1	7	—
Anæmia ...	8	4	2	1	2	—	1	—	2	—	1	—	2	1	—	—
Lung Disease (excl. TB.)	4	1	2	—	1	—	2	—	2	—	1	1	—	—	—	—
Nervous Disorders ...	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Phthisis ...	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Other Tblr. Disease ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Rickets...	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Spinal Deformities ...	—	—	—	—	2	1	4	2	1	1	4	1	3	1	1	—
Other Deformities ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Teeth (treatment cases)	—	75	—	31	—	31	—	34	—	73	—	52	—	40	—	35
Other Defects ...	—	—	—	—	2	2	2	2	—	—	1	1	1	1	—	—
Number of Children noted for treatment	105		45		65		58		87		71		85		75	

+ = Cases referred for treatment.

Deaths of Children 5-15 years, 1926.

	Ages.																				Total.	
	5		6		7		8		9		10		11		12		13		14		Both Sexes.	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
Diphtheria			1																		1	1
Scarlet Fever					1																1	1
Meningoccal Meningitis			1																		1	1
Violence			1			1		1													1	2
Tuberculous Disease (non-pulmonary)			1			1	1														2	1
Heart Disease																			1		1	1
Nephritis																		1		1		1
Total			4		1	2	1	1											1	1	7	4
Total both sexes			4		3	2													2		11	

SANITARY ADMINISTRATION.

Public Mortuary.

The Public Mortuary provided by the Council is situated in Goldsmith Street. During the year 40 bodies were deposited. There were 34 post mortem examinations made, and 33 inquests held. The inquests are held in the Court Room at the Town Hall. On 5 occasions bodies awaiting burial were removed to the mortuary on account of inadequate accommodation in the homes; 34 bodies were brought in by order of the Coroner, and 1 by the Police.

Inquests.

During the year 50 inquests were held on the bodies of Holborn parishioners. Many of these died outside the Borough and the inquests were held in the district where death took place, the deaths being subsequently transferred to Holborn. The causes of death certified as a result of such inquests were:—Natural causes, 22; Accidents, 10; Suicide, 11; Misadventure, 5; Drowning, 1; Homicide, 1.

Revenue Acts.

No application was received under these Acts.

Dirty Tenants.

From time to time complaints are received from owners respecting the difficulties experienced by them in keeping their property up to the standard required by local authorities owing to the dirty and destructive habits of tenants. It is repeatedly alleged that through carelessness or wilful damage by tenants repairs and cleansing become necessary with unreasonable frequency and that it is impossible to maintain even the minimum requirements of the local authorities without financial loss.

These statements have sometimes been found to be well-founded, particularly in the poorer class tenement lodging houses where no responsible keeper or landlord is resident.

In order to prevent or minimise difficulties of the owner we endeavour, as much as possible, to keep in view the considerable powers which the Council has of holding the tenant responsible for defects caused by his neglect or default.

During the year the Inspectors have reported a number of cases where dirty conditions of tenements were clearly the fault of the tenants. In these cases the necessary action has been taken to secure the abatement of the nuisance by the tenants.

The Removal of Aged, Infirm and Diseased Persons.

Difficulty from time to time arises in connection with aged, infirm or physically incapacitated persons living alone, usually in single rooms. Many of these have nobody to look after them and gradually become feebler, eventually being unable to look after themselves or their homes properly and yet they are most unwilling to enter a Poor Law Institution.

At present persuasion is used, but the condition persists for a considerable time. It is difficult to suggest any solution of the problem other than the granting to local authorities of powers to compel removal to suitable institutions. The principle of such compulsory power has been established by the Bradford Corporation Act, 1925. Under this Act a Court of Summary Jurisdiction may, on the application of the Medical Officer of Health, issue an order for the removal of any aged, infirm or physically incapacitated person where it is shown that, in the public interest or in the interest of the person concerned, such removal is necessary.

During the year the views of the Council were asked as to the desirability of similar provision being incorporated in the next London County Council (General Powers) Act, and the Council, on the recommendation of the Public Health Committee, adopted a resolution approving in principle that Metropolitan Boroughs and City Councils should be granted powers to obtain the removal of infirm and diseased persons in certain cases and also approving a request to the London County Council to insert such provision in their next General Powers Bill.

Rent and Mortgage Interest Restrictions Acts.

On the application of tenants two certificates were issued under the above Acts that houses complained of were not in all respects reasonably fit for human habitation or were otherwise not in a reasonable state of repair. Two applications were refused.

Nuisances Caused by Dogs.

With a view to the prevention of nuisances from the fouling of footways by dogs the Council made the following by-law:—

“ No person being in charge of a dog in any street or public place and
“ having the dog on a lead shall allow or permit such dog to deposit its
“ excrement upon the public footway.”

The by-law is to remain in force until the 1st June, 1928.

Choked Water Closets.

Nuisances frequently arise, particularly in tenement houses, due to the misuse of water closets resulting in repeated choking. It is found that tenants get into the habit of using one pail as a receptacle for refuse of all kinds, *e.g.*, bedroom slops and waste water, tea leaves, vegetable parings, etc., the contents being ultimately thrown down the water closet. This practice inevitably leads to the water closet being stopped up; on the other hand it would be objectionable if the whole contents of these pails, often largely of a liquid nature, were placed in the dust bins. The use of a “ scullery receptacle ” would enable this difficulty to be met. This receptacle consists of an ordinary sized domestic pail with a movable drainer. The use of this article in the place of an ordinary pail enables solid matter, such as potato parings, to be separated from the liquid matter. The latter can be readily disposed of by emptying down the water closet or suitable gulley, the former can be burnt or placed in the dust bin.

Use of Vita Glass.

Opportunity has been taken during the year to call attention to the desirability of the use of Vita glass. This glass lets actinic rays through, and its use in place of ordinary window glass is much to be desired where possible.

Vita glass can be obtained at about the same cost as plate glass.

Cab Shelter.

Complaints were received respecting bad smells in the neighbourhood of a cabmen's shelter in the Borough. On inspection it was found that the shelter was kept in a very clean condition and no nuisance appeared to arise therefrom. On enquiry, however, it was discovered that liquid refuse was emptied down a large, old type street gulley situated about thirty feet away from the shelter; the nuisance complained of apparently was caused by the occasional foul state of such gulley resulting from its use for this purpose.

In consultation with the Borough Surveyor arrangements were made, as a special concession, for a sink to be provided connected by a waste pipe to the drain of the street gulley. Subsequently the old gulley was replaced by one of modern type. In this way it is hoped that any further nuisance will be obviated.

Demolition of Old Buildings.

From time to time nuisances occur from dust arising from the demolition of old buildings.

During the year a communication was received from the Metropolitan Boroughs Standing Joint Committee respecting a request to the London County Council to make provision, by a General Powers Bill, for powers of control to be administered by and at the discretion of the Borough Councils for the prevention of such dust nuisances.

As long ago as the year 1915 the Holborn Council asked the Local Government Board for sanction to the making of a by-law to control the demolition of old buildings with a view to the prevention of nuisance from dust. The Board, however, was unable to assent to the proposal and suggested that proceedings should be taken for the abatement of any such nuisance under Section 2 of the Public Health (London) Act, 1891. Subsequently proceedings were so taken in the Police Court, the summons being dismissed on the ground that the nuisance did not arise within Section 2 of the before-mentioned Act. The Council, therefore, adopted a resolution in favour of the proposed provision, by a General Powers Bill, of powers of control for the prevention of this nuisance.

In the meantime a series of suggestions for the prevention of such nuisances has been prepared and a copy is being forwarded to contractors proposing to commence demolition in the Borough. It is hoped that contractors will respond to these suggestions and in this way the prevention of nuisance will be effected.

The following is a copy of the suggestions referred to:—

1. Provide and fix proper fans at first floor level and other floors if necessary.
2. Board up window openings from which sashes and glass have been removed.

3. Pull down internal partitions storey by storey before taking down external walls of the respective storeys.

4. Provide canvas or other suitable screens where necessary to prevent nuisance from dust.

5. Before and during the process of demolition and during subsequent removal all dust and material should be freely sprayed with a hose and rose jet.

6. So far as practicable any process connected with the demolition likely to cause nuisance from dust should not be carried out during ordinary business hours, particularly if the building to be demolished is in a main thoroughfare.

7. On completion of demolition all necessary steps should be taken effectually to seal off all drains so as to prevent any nuisance from rats.

Children's Country Holidays.

In connection with the arrangements made by the Children's Country Holiday Fund, and the Fresh Air Fund, for sending children away for country holidays, we receive and answer many enquiries during the summer months relative to the existence of infectious diseases in the houses from which the children are drawn. This routine co-operation between the local authority and the organisations concerned helps to ensure that children who have been directly exposed to infection shall not be sent away until danger of the development of disease in the contact child is past.

Effluvia from Trade Processes.

During the year two complaints of smell were received in connection with factories.

The first related to premises where crude rubber is worked up. When the material ordinarily used is being dealt with no smell arises, but some "wild" rubber, also called Lagos rubber, had been purchased and this gave rise to smell. The owner removed the Lagos rubber from premises.

The cause of the second complaint was traced to the use of sulphuretted hydrogen for analytical purposes by a firm of manufacturing chemists. The analytical work was transferred to the country.

Private Water Supplies.

At the latter part of the year a complaint was received respecting illness thought to be caused by the drinking of impure water stated to have a bitter taste and to change colour when it was boiled. The suspected water came from a private source obtained from a well 650 feet deep. On enquiry it was found that the water complained of had been heated in a new aluminium kettle. On boiling in this kettle the water changed colour, but no change took place when the water was heated in a different kettle. A sample of water from this well, after boiling in the aluminium kettle, was examined by the Borough Analyst (Mr. J. Kear Colwell, F.I.C.), who reported as follows:—

"I have examined the water and found it is an alkaline water having a total solid content of 78.0 parts per 100,000.

The alkalinity is due to the presence of sodium carbonate, the quantity of that body found being 26·5 parts per 100,000.

The sample contained 3·4 parts per 100,000 of oxide of aluminium (Al_2O_3) possibly due to the action of the alkaline water on the metal of which the kettle is made. It is doubtful if this quantity would have harmful effect on persons drinking the water."

With this opinion I agree; there is no record up to the present of any harmful effect due to the ingestion of the oxides of aluminium.

In connection with a large block of offices newly erected in the year 1926, the water supply was derived from a private well.

A certificate was furnished to the owners by the Analyst who examined the water on their behalf expressing the following opinion:—

" This is a soft water conforming to a high standard of purity. There is no evidence of any harmful contamination. The water is obtained from the green sand formation of the London geological basin."

No water softeners are used in connection with either of the above supplies of well water.

Other Propaganda Leaflets, etc.

Arrangements were continued with the co-operation of the Library Committee for the distribution of two bookmarks, one for adults and one for children. On the front information was given as to health and educational facilities afforded by the Council. On the back of the bookmark for adults information was contained respecting diphtheria antitoxin and the arrangements for the prevention of diphtheria by immunisation. The back of the children's bookmark contained hints to boys and girls on how to keep healthy.

A leaflet giving advice to women on constipation was also distributed by means of " Please Take One " boxes in the public conveniences for women.

HOUSING.

During the year 982 houses occupied by the working classes were inspected; this number consisted of 577 registered lodging houses and 405 non-registered houses occupied by working classes. The total number of buildings in the Borough occupied for dwelling purposes is given by the Census, 1921, as 3,473. The number of tenements occupied by working classes as returned to the London County Council is 8,571. This figure represents the total tenements in the Borough consisting of one, two, three or four rooms.

*Housing Scheme No. 1.**Betterton Street.*

The Housing of the Working Classes Committee have from time to time considered a number of schemes for the construction of houses for the working classes, but owing to the high cost of land in the Borough most of these have been found impracticable.

The Committee were of opinion that useful improvements might be effected by the acquisition of unsatisfactory, old and worn houses, and their reconstruction or demolition and rebuilding.

An opportunity occurred for a small scheme on these lines by the acquisition of three adjoining tenement houses in Betterton Street, together with the site of the fourth house which had already been demolished. The houses were not suitable for reconstruction as the existing walls were not in the required positions nor of the required thickness or condition. The Council decided to acquire the vacant site and the three houses for demolition and the construction of self-contained flats. The scheme entails the displacement of about fifty persons occupying the three houses but the fifteen self-contained flats to be provided will probably provide accommodation for seventy persons, so that, in addition to securing much improved housing accommodation, a larger number of residents will be provided for.

The plans of the new building were prepared in the Borough Surveyor's Department and the work is being carried out under the supervision of Mr. J. E. Parr, A.M.Inst.C.E., the Borough Surveyor. Describing the proposed building, Mr. Parr writes:—"It will be constructed of brickwork with fireproof floors and a tiled roof, and the basement will be used for storage purposes. The block will comprise 15 flats, three flats being on each of the five floors, giving accommodation for approximately 75 persons. With one exception, each flat will have a living-room, two bedrooms, a scullery, W.C., bathroom and a coal bin. Entrance from Betterton Street will be through a doorway leading to a court at the back of the block, and there will be one principal fireproof staircase. Access to the flats on the upper floors will be by means of this staircase and balconies running the whole length of the rear of the building on each floor. Each living room will be provided with a dresser and other fittings, and the general equipment of the flats will contain all the latest improvements."

The tender of the Canonbury Construction Company, Ltd., was accepted for the erection of the dwellings, and on the 27th October, 1926, the foundation stone of the new building was laid by the Mayor (Alderman H. Warren Coleman, J.P.).

At its meeting in September, 1926, the Council agreed to extend the scheme to the sites of two adjoining properties, Nos. 25 and 27, Betterton Street.

HOUSING CONDITIONS.

Statistics.

YEAR ENDED 31ST DECEMBER, 1926.

1.—GENERAL.

(1)	Estimated population	...	...	...	...	...	...	43,200
(2)	General death rate	...	...	...	...	...	...	12'10
(3)	Death-rate from tuberculosis (all forms)	...	...	...	...	...	...	0'81
(4)	Infantile mortality rate	...	...	...	...	...	...	90
*(5)	Number of buildings containing dwellings	...	...	...	(Census, 1921)	...	...	3,473
†(6)	Number of separate dwellings	...	...	...	(Census, 1921)	...	...	7,202
‡(6a)	Number of working-class tenements	...	...	...	(Census, 1921)	...	...	8,571
¶(7)	Number of new working-class houses erected	...	...	...	1 Block—(15 tenements erection commenced)	...	...

2.—UNFIT DWELLING-HOUSES.

I.—INSPECTION.

(1)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	982§
(2)	Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	...	...	...	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	...	...	...	527

II.—REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	...	?
--------------------------------------------------------------------------------------------------------------------------------	-----	---

*"Buildings."—A structure wholly detached or separated from another by a party wall, e.g., a block of flats is one building.

+ "Separate dwelling," i.e., having separate access to street or common landing or staircase, e.g., each flat in a block is a separate dwelling, but a private house not structurally divided is a single unit whether occupied by one or more families.

‡ "Working-class tenements," i.e., separate occupations of one, two, three or four rooms only.

§ Practically all these houses were tenement houses containing a number of tenements.

|| All the more insanitary houses are always annually inspected.

III.—ACTION UNDER STATUTORY POWERS.

A. Proceedings under Section 28 of the Housing, Town Planning, etc., Act, 1919:—

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	nil
(2) Number of dwelling-houses which were rendered fit—	
(a) by owners	nil
(b) by Local Authority in default of owners	nil
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	nil

B. Proceedings under Public Health Acts:—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	543
(2) Number of dwelling-houses in which defects were remedied:—	
(a) by owners	543
(b) by Local Authority in default of owners	nil

C. Proceedings under Sections 17 and 18 of the Housing, Town Planning, etc., Act, 1919:—

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

3.—UNHEALTHY AREAS.

Areas represented to the Local Authority with a view to Improvement Schemes under (a) Part I., or (b) Part II., of the Act of 1890:—

(1) Name of area	nil
(2) Acreage	nil
(3) Number of working-class houses in area	nil
(4) Number of working-class persons to be displaced	nil

4. Number of houses not complying with the building By-laws erected with consent of Local Authority under Section 25 of the Housing, Town Planning, etc. Act, 1919.

APPENDIX.

TABLE I.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1926 AND TEN PREVIOUS YEARS.

Year	Population estimated to Middle of each Year.	Births.			Total Deaths Registered in the District		Transferable Deaths		Net Deaths belonging to the District.			
		Un- corrected Number	Net		Number	Rate	of Non- residents registered in the District	of Resi- dents not registered in the District	Under 1 Year of Age		At all Ages	
			Number	Rate					Number	Rate per 1,000 Births	Number	Rate
1916	38,161	564	649	15.7	768	20.2	498	395	63	97	665	17.5
1917	35,303	474	571	14.5	865	24.5	567	390	62	107	688	19.5
1918	36,769	340	497	12.1	862	23.4	532	490	70	141	820	22.3
1919	38,156	397	539	13.6	920	24.1	618	322	52	96	624	16.4
1920	39,676	619	827	20.6	827	20.6	563	339	55	66	603	15.2
1921	43,520	483	648	14.8	859	19.7	622	319	51	79	556	12.8
1922	42,850	485	664	15.5	746	17.4	518	312	43	72	570	13.3
1923	43,376	423	593	13.7	718	16.6	491	300	47	79	526	12.1
1924	43,250	394	578	13.36	670	15.5	470	329	47	81	529	12.2
1925	43,315	364	527	12.16	725	16.7	513	330	33	63	542	12.5
1926	43,200	330	535	12.38	629	14.6	454	347	48	90	522	12.1

In the above table the population, birth rate and death rate are as estimated by the Registrar-General, founded upon his estimates of the civilian population.

TABLE II.

Causes of, and Ages at, Death, 1926.

CAUSES OF DEATH.				NET DEATHS AT THE SUBJOINED AGES OF "RESIDENTS," whether occurring within or without the District.										Total Deaths whether of "Resi- dents" or "Non- Residents" in Insti- tutions in the District.
				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 and upwards.	
All causes	Certified	...	...	522	48	16	7	11	15	62	154	113	96	
	Uncertified	...	...	...	...	...	...	...	...	...	...	...	...
1.	Enteric Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
2.	Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...
3.	Measles	...	...	6	3	2	1	...	...	...	...	...	...	...
4.	Scarlet Fever	...	...	1	...	...	...	1	...	...	...	...	...	...
5.	Whooping Cough	...	...	1	...	...	1	...	...	...	...	...	...	2
6.	Diphtheria and Croup	...	...	4	...	1	2	1	...	...	...	...	...	1
7.	Influenza	...	...	8	...	...	...	...	...	5	2	1	...	1
8.	Encephalitis Lethargica	...	...	...	...	...	...	...	...	...	...	...	...	...
9.	Meningo-coccal Meningitis	...	...	2	...	1	...	1	...	...	...	...	...	1
10.	Tuberculosis of Respiratory System	...	...	26	...	...	...	...	4	8	12	2	...	9
11.	Other Tuberculous Diseases	...	...	9	2	...	2	3	1	1	...	...	...	32
12.	Cancer, malignant disease	...	...	63	...	...	...	...	...	7	33	17	6	31
13.	Rheumatic Fever	...	...	...	...	...	...	...	...	...	...	...	...	3
14.	Diabetes	...	...	6	...	...	...	...	...	1	3	2	...	1
15.	Cerebral Hæmorrhage	...	...	25	...	...	...	...	...	2	11	9	3	4
16.	Heart Disease	...	...	58	...	...	...	1	1	3	23	17	13	10
17.	Arterio-sclerosis	...	...	43	...	...	...	...	...	...	3	17	23	6
18.	Bronchitis	...	...	67	...	1	...	...	...	1	16	20	29	9
19.	Pneumonia (all forms)	...	...	39	6	6	1	...	...	6	15	1	4	51
20.	Other Respiratory Diseases	...	...	2	...	...	...	...	...	1	1	...	1	8
21.	Ulcer of Stomach or Duodenum	...	...	5	...	...	...	...	...	1	2	2	...	1
22.	Diarrhoea, etc.	...	...	14	10	2	...	...	...	1	1	...	...	53
23.	Appendicitis and Typhlitis	...	...	3	...	...	...	...	1	2	...	...	...	3
24.	Cirrhosis of Liver	...	...	3	...	...	...	...	...	...	1	1	1	3
25.	Acute Chronic Nephritis	...	...	16	...	...	...	1	...	2	6	5	2	12
26.	Puerperal Sepsis	...	...	2	...	...	...	...	...	2	...	...	...	1
27.	Other accidents and diseases of Preg- nancy and Parturition	...	...	...	...	...	...	...	...	...	...	...	...	1
28.	Congenital Debility and Malformation, Premature Birth	...	...	17	17	...	...	...	...	...	...	...	...	56
29.	Suicide	...	...	12	...	...	...	...	2	4	5	1	...	1
30.	Other Deaths from Violence	...	...	15	1	...	...	3	3	2	2	3	1	8
31.	Other Defined Diseases	...	...	75	9	3	...	...	3	14	18	15	13	146
32.	Causes ill-defined or unknown	...	...	...	...	...	...	...	...	...	...	...	...	...
				522	48	16	7	11	15	62	154	113	96	454

TABLE III.

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1926.

Notifiable Disease.	Number of Cases Notified.								Total Cases Notified in each Locality (e.g. Parish or Ward) of the District.		Total Cases Removed to Hospitals.
	At all Ages.	At Ages—Years.							St. Giles and Bloomsbury.	Holborn.	
		Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 and upwards.			
Small-pox ... ..	...	..	...	...	...	...	..	...	...	...	...
Diphtheria (including Membranous Croup) ...	73	2	23	31	13	3	1	...	22	51	72
Erysipelas	14	1	...	1	2	4	4	2	8	6	8
Scarlet Fever	84	...	18	40	19	7	...	...	34	50	84
Enteric Fever	5	...	...	1	2	2	...	...	5	...	5
Puerperal Fever	3	...	...	...	...	3	...	...	2	1	3
do. Pyrexia	1	...	...	...	...	1	...	...	1	...	1
Cerebro-spinal Fever ...	2	...	1	1	...	...	...	...	1	1	2
Ophthalmia Neonatorum	6	6	...	...	...	...	...	...	4	2	3
Dysentery ... ..	...	...	...	...	...	...	...	...	...	...	...
Malaria ... ..	...	...	...	...	...	...	...	...	..	...	...
Pneumonia—Primary ...	29	...	9	2	2	3	7	6	14	15	16
do. Influenzal	10	...	...	...	1	7	1	1	4	6	4
Tuberculosis—Pulmonary	66	...	...	3	16	28	18	1	30	36	34
do. Non-Pulmonary	26	1	4	9	5	5	2	...	9	17	13
Whooping Cough	96	9	49	38	...	...	...	...	17	79	25
Acute Poliomyelitis ...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica	1	...	...	...	...	1	...	...	...	1	1
	416	19	104	126	60	64	33	10	151	265	271

TABLE IV.

INFECTIOUS DISEASES IN HOLBORN FOR THE LAST ELEVEN YEARS.

	NOTIFICATIONS						DEATHS					
	Decennial Average, 1916-1925			Year 1926			Decennial Average, 1916-1925			Year 1926		
	Number	Rate per 1,000	London Rate	Number	Rate per 1,000	London Rate	Number	Rate per 1,000	London Rate	Number	Rate per 1,000	London Rate
Small-pox	0.3	0.01	0.00	0	0.00	0.00	0	0.00	0.00	0	0.00	0.00
Diphtheria	100	2.46	2.57	73	1.69	2.95	5	0.11	0.17	4	0.09	0.12
Erysipelas	18	0.43	0.51	14	0.32	0.39	...	...	...	...	...	...
Scarlet Fever	91	2.19	3.17	84	1.94	2.68	1	0.03	0.04	1	0.02	0.02
Enteric Fever	4	0.09	0.08	5	0.12	0.07	0.5	0.01	0.01	0	0.00	0.01
Cerebro-spinal Fever	1.5	0.03	0.06	2	0.05	0.02	...	...	...	0	0.00	...
Acute Poliomyelitis	1	0.03	...	0	0.00	0.02	...	...	...	0	0.00	...
Whooping Cough†	63	2.49	...	96	2.25	...	5	0.12	0.17	1	0.02	0.05
Measles‡ ... ..	...	...	...	...	...	...	8	0.20	0.22	6	0.14	0.20
Tuberculosis—Pulmonary	101	2.57	...	66	1.53	1.62	59	1.50	1.23	26	0.60	...
Ditto Non-Pulmonary	15	0.38	...	26	0.60	0.47	8	0.19	0.19	9	0.21	...
Puerperal Fever*	1	2.76	3.28	3	5.60	4.24	1	2.47	...	2	3.74	...
Ditto Pyrexia ... ..	...	...	...	1	...	...	...	...	...	...	...	...
Ophthalmia Neonatorum*	9	14.38	9.08	6	11.21	8.97	...	...	...	...	...	...
Diarrhoea (under 2 years)*† ... ..	...	...	...	...	...	...	8	12.5	13.57	12	22.43	11.8

* Rates per 1,000 births.

† Notifiable in Holborn (not in London) since 1914.

‡ Not Notifiable.

() Average for 5 years.

TABLE V.
INFORMATION REQUIRED BY THE LONDON COUNTY COUNCIL.

PREMISES.	Number in Borough at end of 1926.	Number of Inspections.	Number of Prosecutions.
Cowsheds ... ..	...	...	...
Milkshops	124	157	...
Registered houses let in lodgings ...	577	871	4
Ice cream premises	64	185	...
Slaughter-houses	1	6	...
Offensive Trades ... ..	...	...	...
Restaurants and Eating Houses ...	235	198	...

HOUSING OF THE WORKING CLASSES—			
Number of houses inspected:—			
(a) On account of complaints or illness (Public Health Act)			} 982
(b) House to house (Housing Consolidated Regulations, 1925)			
Number of notices served:—			
(a) Under Public Health Act:—			
(i.) Intimation			543
(ii.) Statutory			76
(b) Under Housing Act			0
Number of houses repaired or nuisances remedied under Public Health Act			543
Number of houses repaired under Section 3 of Housing Act:—			
(a) By owners			0
(b) By local authority in default of owners			0
Number of houses closed on notice by owner that they could not be made fit			0
Number of houses for the working classes:—			
(a) Erected during year			0
(b) In course of erection			1 block (15 tenements)
Number of representations by Medical Officer or other person			0
Number of houses included in such representations			0
Number of Closing Orders made			0
Number of Closing Orders determined (i.e., houses made fit)			0
Number of Demolition Orders			0
Number of houses demolished:—			
(a) In pursuance of Orders			0
(b) Voluntarily			0*
Total number of houses in the borough			3473
Number of houses occupied by the working classes			(Census, 1921) 8571 tenements (Census, 1921)
UNDERGROUND ROOMS—			
Number illegally occupied, notices served			2
Number closed or illegal occupation discontinued			2
OVERCROWDING—			
Number of cases of overcrowding found; notices served			4
Number of prosecutions			1
Number remedied			4
SMOKE NUISANCES—			
Number of observations			340
Number of notices			6
Number of complaints			7
Number of summonses			0
CLEANSING AND DISINFECTION—			
Number of adults cleansed			164
Number of children cleansed			0
Number of premises disinfected:—			
(a) After infectious diseases			223
(b) For vermin			134
WATER SUPPLY TO TENEMENT HOUSES—			
Number of premises supplied			6
Number of prosecutions			0
SANITARY OFFICERS—			
Number of Sanitary Inspectors (whole-time)	Male ... 3	Female ... 0	
Number of Sanitary Inspectors (part-time)	Male ... 0	Female ... 1	
Number of Health Visitors	whole-time ... 1	part-time ... 1	

* Three houses demolished by Local Authority for rebuilding as working-class tenements.

TABLE VI.

Factories, Workshops, Laundries, Workplaces and Homework.

1.—INSPECTION.

Including Inspections made by Sanitary Inspectors.

PREMISES.	Number of			
	Inspections.	Written Notices.		Prosecutions.
		Intimations.	Statutory.	
Factories	317	38	6	...
Workshops	648	80	10	...
Workplaces	3,031	45	4	...
Total	3,996	163	20	...

2.—DEFECTS FOUND.

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
* NUISANCES UNDER THE PUBLIC HEALTH ACTS :				
Want of cleanliness	51	51	...	...
Want of ventilation ... ..	...	...	...	..
Overcrowding	5	5	...	...
Want of drainage of floors ... ..	...	...	...	...
Other nuisances	113	113	...	...
Sanitary accommodation {	insufficient	2	...	...
	unsuitable or defective	68	...	...
	not separate for sexes... ..	7	...	...
OFFENCES UNDER THE FACTORY AND WORKSHOP ACT :				
Illegal occupation of underground bakehouse (S. 101) ... ..	...	...	...	...
Breach of special sanitary requirements for bake-houses (SS. 97 to 100) ... ..	...	...	...	...
Other offences (excluding offences relating to out-work which are included in Part 3 of this Report) ... ..	...	...	...	...
Total	246	246	...	...

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

TABLE VI.—continued. 3.—HOME WORK.

NATURE OF WORK.	OUTWORKERS' LISTS, SECTION 107.								OUTWORK IN UNWHOLE-SOME PREMISES, SECTION 108.			OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110.			
	Lists received from Employers.						Notices served on occupiers as to keeping or sending lists.	Prosecutions.		In-stances.	Notices served.	Prose-cutions.	In-stances.	Orders made (S. 110).	Prose-cutions (Sections 109, 110).
	Sending twice in the year.			Sending once in the year.				Failing to keep or permit inspection of lists.	Failing to send lists.						
	Lists.	Outworkers.		Lists.	Outworkers.										
		Con-tractors.	Work-men.		Con-tractors.	Work-men.									
Wearing Apparel—															
(1) Making, &c. ...	108	316	259	1	...	3	110	...	...	...	...	...	...	...	...
(2) Cleaning and Washing ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Racquet and Tennis Balls ...	2	...	56	...	...	...	2	...	...	...	...	...	...	...	...
Coathangers ...	...	...	...	1	...	13	...	...	...	...	...	...	...	...	...
Paper Bags and Boxes ...	2	...	14	...	...	...	2	...	...	...	...	...	...	...	...
Total ...	112	316	329	2	...	16	114	...	...	...	...	...	...	...	...

TABLE VI.—*continued.*

4.—REGISTERED WORKSHOPS.

Workshops on the Register (S. 131) at the end of the year. (1)	Number. (2)
Bakehouses (including 16 factory bakehouses)	24
Other Workshops	694
Total number of workshops on Register	718

5.—OTHER MATTERS.

Class. (1)	Number. (2)
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshop Act (S. 133) ...	16
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (S. 5) ...	56
Other... ..	56
Underground Bakehouses (S. 101) :—	
Certificates granted during the year	—
In use at the end of the year	14

LEGAL PROCEEDINGS.

SALE OF FOOD AND DRUGS ACTS, 1875-1907.

Date.	Name.	Address.	Offence.	Result.
1926 Mar. 10	CURTIS & Co. ...	315, High Holborn	Selling Calomel Ointment 40 % deficient in mercurous chloride	Fined £14. Costs, £2 2s. 0d.
Mar. 29	RACHEL SCHEIB ..	2, Red Lion Passage	Selling milk 6.6% deficient in fat	Dismissed on payment of £3 3s. 0d. costs
May 18	THE FRIERN MANOR FARM DAIRY, LTD.	2, Portpool Lane ...	Selling milk 5.0% deficient in fat	Summons withdrawn on payment of 21s. costs
May 31 & June 9	GEORGE BRAMPTON ...	190, Drury Lane ...	Selling apples containing 1/64 grains of arsenic per pound	Summons dismissed on payment of £5 costs

PUBLIC HEALTH (LONDON) ACT, 1891.

Date.	Name.	Address.	Offence.	Result.
1925 Nov. 30 & Dec. 7 1926 Jan. 11	Mr. JAMES TROTT ...	5, New North Street	Overcrowding ...	Nuisance abated
1925 Dec. 30 1926 Jan. 22	Mrs. N. KELLY ...	38, Emerald Street	Breach of Lodging House By-laws (cleansing & absence of means of ventilation)	Work done. Summons withdrawn on payment of £3 3s. costs
do.	do. ...	36, Emerald Street	do. ...	do.
do.	do. ...	9, Chapel Street ...	do. ...	do.
do.	do. ...	11, Chapel Street ...	do. ...	do.
do.	do. ...	9, Chapel Street ...	Existing nuisance (accumulation of refuse)	do.
do.	do. ...	11, Chapel Street ...	Existing nuisance (premises dilapidated)	do.
do.	do. ...	36, Emerald Street	Existing nuisance (dampness and defective W.C.)	do.
do.	do. ...	38, Emerald Street	Existing nuisance (premises dilapidated, absence of proper ashbin)	do.