## Annual report of the Medical Officer of Health of the Borough of Hammersmith for the year 1924.

#### **Contributors**

Hammersmith (London, England). Metropolitan Borough. Howell, J. B.

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# ANNUAL REPORT

OF THE

# Medical Officer of Health

OF THE

BOROUGH OF HAMMERSMITH

FOR THE

**YEAR 1924** 



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### ANNUAL REPORT

OF THE

# Medical Officer of Health

OF THE

### BOROUGH OF HAMMERSMITH

For the Year 1924.

# STAFF OF THE PUBLIC HEALTH DEPARTMENT AT THE END OF THE YEAR 1924.

MEDICAL	OFFICE	R OF H	EALTI	I AND	
ADMINISTRAT	IVE TU	BERCULO	SIS	OFFICER.	
					Year of Appointment
J. B. Howell, 1	M.R.C.S	., L.R.	C.P.,	D.P.H.	 1914
To	BERCULO	osis Of	FICER		
R. Govan, M.A	., M.D	., Ch.B	., D	.Р.Н.	 1918
	CLERICA	L STAFI	۶.		
*A. H. Wilmot	(Chief	Clerk)			 1902
†A. C. Groom					 1923
C. M. White					 1920
J. C. Turner		***			 1920
†Miss Cole					 1923
R, J. Daw	***				 1923

SANI	TARY IN	SPECTO	RS.		
40 433:					Year of Appointment
†S. Addison			***		1901
†W. Brown		***			1894
§*F. Q. Barry	• • • •				1919
†J. S. Cromack					1899
§*A. Hayes	***				1910
§†H. Neighbour			***	• • •	1901
§*P. W. Pottier					1919
§*W. Rigby					1919
Vacant					-
LADY S.			CTOR.		
‡*Miss M. M. Hawkin	ns	•••	***		1923
HEA	LTH V	ISITORS			
"  †*Miss R. A. Henry					1916
"  Miss D. G. Johnso	n				1922
∥□*Miss A. M. M. Wil	lcox				1916
Tuberculos	is Dis	PENSARY	Y STAF	F.	
Miss Digby (Nurse	Visitor	·)			1918
Vacant (Nurse Visi					_
¶Miss Rees (Dispense					1918
Disir	NECTIN	G STAF	F.		
G. F. Nichols					1898
G. Langley					1900
		THS ST			
Mrs. Manners					1924
1410. 1444				***	
Mor	TUARY	KEEPER			
R. W. Carter				***	1919
†Cert. Royal Sanit	tary In	stitute	(Inspe	ctor).	
*Cert. Sanitary Ins	spectors	Exami	ination	Board	l.
Board of Educati	on (He	alth Vi	sitor).		
Cert. Central Mid					
§Cert. Royal Sanite			Meat a	nd oth	er foods).
Trained Nurse.					
"Cert. Royal Sanit	ary In	stitute	(Healt)	h Visit	or).
¶Apothecaries' Hall			1		*
	1				

PUBLIC HEALTH DEPARTMENT,

TOWN HALL,

HAMMERSMITH, W.6.

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

Ladies and Gentlemen.—I beg to present to you my Annual Report for the year 1924. The report deals with the vital statistics, and with the work carried out under the direction of your Council during the year. The statistical tables prescribed by the Ministry of Health are included, as well as the several other tables that directly or indirectly relate to the Public Health of the Borough.

The vital statistics of the Borough for the year under review were of a satisfactory nature. The death-rate of 12.4 is 1.4 higher than the rate for the previous year, whilst the infantile mortality rate is 72 per 1,000 births.

The infantile rate has increased 8 per 1,000, as compared with the rate for 1923, which was the lowest recorded for the Borough. The rate was, however, 14 per 1,000 lower than the average for the past ten years.

This figure is fairly satisfactory and I can only repeat that our efforts should be maintained in an endeavour to permanently reduce the loss of infant life.

The efforts of your Council have been considerably augmented by those of the voluntary societies engaged in maternity and child welfare in the Borough.

With regard to infectious diseases the total number notified was below the average.

The sanitary condition of the Borough is not of a very satisfactory nature and it is to be regretted that a very considerable amount of overcrowding still exists. The Council's Housing Scheme is practically completed, but up to the present no improvement in housing conditions has resulted in the congested areas.

During the year, 3,349 Intimation Notices and 991 Statutory Notices were served. This fact in itself tends to show the condition of the Borough.

I am, Ladies and Gentlemen, Your obedient Servant,

J. B. HOWELL,

Medical Officer of Health.

#### STATISTICS FOR THE YEAR 1924.

GENERAL	STATISTICS	3.
Area		2,282.5 acres.
Population (1924)		134,200
Population Census (1901)		112,239
,, ,, (1911)		121,521
,, ,, (1921)		130,287
Natural increase, i.e., excess		
over deaths		731
Density of population		58.8 persons
		per acre
Marriages registered		1,097
Number of inhabited houses	(1921)	17,402
Number of families or separ	ate occu-	
piers (1921)		33,263
Rateable value (1924)		£940,366
Sum represented by a penny i	ate, 1924	£3,750
	TATISTICS.	the Later of the country of
		The state of the last of the l
Births (legitimate) , (illegitimate)	2,264	birth rate 17.9
Deaths (corrected)	1,668	death rate 12.4
Number of women dying in,		from sepsis 4
sequence of childbirth		from other causes 4
Deaths of infants under one		The state of the s
age per 1,000 births :-		
Legitimate, 68 Ille		148 Total, 72
Deaths from measles (all age	s)	35
Deaths from whooping cough	(all ages)	16
Deaths from diarrhoea (unde		

#### NATURAL & SOCIAL CONDITIONS OF THE DISTRICT.

Population.—According to the Census of 1901, the population of the Borough was then 112,239. By the Census of 1911 the population for the same area was 121,521, showing an increase during the 10 years of 9,282. The Census of 1921 shows the population of the Borough to be 130,287, being an increase in the 10 years of 8,766.

In this report the rates are calculated on the estimated population up to the middle of the year.

At the time of the last Census part of the Defence Force, which was mobilised as an emergency, was in camp on Wormwood Scrubbs.

The estimated population adopted by the Registrar-General is 134,200, but I believe this number to be below the actual population of the Borough. Since the census was taken, over thirteen hundred houses have been built by the London County Council and the Borough Council, in the

northern part of the Borough. It is probable, therefor, that the estimate of the Registrar-General is considerably below the actual population.

The corrected number of births registered was 2,399, whilst the corrected number of deaths of residents was 1,668, thus showing a natural increase of population by excess of births over deaths of 731.

The area of the Borough is 2,282.5 acres, there being 58.8 persons to the acre, showing an increase as compared with the previous year of 0.3 persons per acre.

Marriages.—The number of marriages registered during the year was 1,097, the marriage rate being 16.

Births.—During the year 2,199 births were registered in the Borough. Adding 302 births which occurred outside the Borough, transferred by the Registrar-General as belonging to Hammersmith, and deducting 102 births which occurred in the Borough, and transferred to other districts by the Registrar-General, the corrected number of births for the year was 2,399. On the estimated population, i.e., 134,200, the corrected number of births registered was equal to an annual rate of 17.9 births per 1,000 persons living.

The Birth-rate for the year is 2.3 per 1,000 less than the rate for the previous year which was 20.2.

The Birth-rate in London on the estimated population, i.e., 4,586,000, was equal to an annual rate of 18.7 births per 1,000 persons living.

#### Notification of Births Act, 1907.

Births registered		***	***	2,199
Corrected number of	births			2,399

NOTIFICATION RECEIVED FROM										
Midwives.	Doctors.	Lying in Hospitals.	Poor Law Institutions.	Parents.	M,O.H.'s.					
1,060	546	550	77	45	11					

Total notifications received, 2,289.

Deaths.—During the year 1,123 deaths (549 males, 574 females) were registered in the Borough, as compared with 981 in the previous year. Adding 692 deaths of residents of this Borough which occurred in general hospitals and other public institutions, and 26 deaths of residents transferred by

The following Chart shows the number of deaths from Diarrhea per 100,000 inhabitants, 1905-1924.

	1305	1906	1207	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1821	1922	1923	192
170							16.9													
							////													
/60							////													
							///													
150							<b>////</b>													
							7///													
140																				
40	-						///													-
							V///													
/30							///													
							<b>///</b>													
120		123																		
		7///					7///													
//0																				
,,,,	-	0///	-	-			44													-
		<b>////</b>					(//													
/00	+	///		-			44		_		_								_	_
		V///					<i>///</i>													
90	-	///	_	31			///													
		V///		V//																
80		<b>V</b> ///		V///																
		V///		////			7///													
70		V//		///			<b>///</b> /										1			
	66	1111		///			111													
	7777	<b>Y</b> ///							62											
60	VIII	<i>\</i> ///	-	///					62	59			-				~		_	-
	V///	<b>V</b> ///								<b>(</b> ///)					53		57			
50	VIII	<u> </u>		144						<u> </u>					777					
	V///	<b>\</b> ///		<b>///</b>						<b>\</b> ///	46									
40	VIII	<b>V</b> ///		////			///			1///		40	33				1//			
	1///	¥///		///	35					V///	11/1	11/1	777		7//		1//			
30	V///	<b>Y</b> ///	33	<b>\</b> ///	35	31		31		<b>Y</b> ///		<b>\</b> ///	11/1							
	1///	V///	1///	V///	///	////	11/2			V///		11/	////	27	11/	26	///		-	-
20	VIII	<b>Y</b> ///	V///	<b>V</b> ///	<b>\</b> ///	\///				<b>V</b> ///		V///	111	11/1		26			25	
20	1///	<b>\</b> ///	1///	///	44	4//	///	////			///	///	///	///	44		1/4		111	-
	1///	<b>V</b> ///	<b>\</b> ///	V///	<b>////</b>		///			(///	(///	<b>\</b> ///	(///	///						
10	1///	V///	V///	<b>V</b> ///	V///	8///	////			V///	V///	V///	V///	V///	///	///		13		

the Registrar-General as having occurred in various parts of England, and deducting 126 deaths of non-residents and 47 transferable deaths which occurred in the Borough, the corrected number of deaths of residents registered was 1,668.

On the estimated population, i.e., 134,200, the corrected number of deaths of residents was equal to an annual rate of 12.4 deaths per 1,000 persons living.

The death-rate in London on the estimated population, i.e., 4,586,000, was equal to an annual rate of 12.1 deaths per 1,000 persons living.

Deaths of Infants.—The corrected number of deaths of residents under one year of age registered during the year was 173, the same as in the previous year. The number of deaths of infants under one year of age was equal to 72 per 1,000 of the corrected births and to 104 per 1,000 of the corrected deaths.

The number of deaths of infants under one year of age, residents in London, was equal to 69 per 1,000 of the total registered births.

The mortality rate of infants under one year of age was, as compared with the total births registered, 3 per 1,000 greater in this Borough than in London.

Summer Diarrhæa.—The number of deaths from Diarrhæa was 15, being 16 less than in the previous year. Of these 13 were of children under one year of age.

Hospital Treatment—Zymotic Enteritis.—During the year (September) arrangements were made by the Metropolitan Asylums Board for the provision of a number of beds for the treatment of zymotic enteritis.

The provision is limited and cases are admitted on the recommendation of the Medical Officer of Health after consultation with the Medical Practitioner in attendance on the patient.

Two cases were admitted to Hospital.

Danger from Flies.—During the year, illustrated leaflets were distributed, pointing out the danger from flies and showing how disease was spread by their carrying filth and germs from ashpits, manure heaps and decaying animal and vegetable refuse to food, &c.

Deaths of Illegitimate Children.—The corrected number of deaths of illegitimate infants under one year of age was 20 or at the rate of 148 per 1,000 illegitimate births.

It is interesting to note the very great difference between the death-rate of legitimate and illegitimate infants. The former being 68 per 1,000 whilst the latter is 148 per 1,000, a difference of 80 per 1,000.

The following table on infantile mortality has been prepared in accordance with the direction of the Ministry of Health.

TABLE III.

Infantile Mortality during the year 1924. Nett Deaths from stated causes at various ages under 1 year of age.

			_		_		-	-	-	
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 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total Deaths under 1 Year.
CAUSES. Certified	51	12	7	4	74	26	28	24	21	173
Small-pox Chicken-pox Measles Scarlet Fever Whooping Cough Diphtheria and Croup Erysipelas Tuberculous Meningitis Abdominal Tuberculosis Other Tuberculous Diseases Meningitis (not Tuberculous) Convulsions Laryngitis Bronchitis Pneumonia Diarrhæa Enteritis Gastritis Syphilis Rickets Suffocation overlying Injury at Birth Atelectasis Congenital Malformations Premature Birth Atrophy, Debility & Marasmus Other causes						- 1 - 2 1 - 2 4 - 3 1 2 2 4 - 3 1 2 5 5 3	- 3 - - 1 1 1 - 1 - 3 5 - 6 - - 1 - 1 - 2 1 - 2 1 - 2 1 - 2 1 - 2 1 - 2 1 - 2 1 - 2 1 - 2 1 - 2 1 - 2 1 - 2 1 1 - 2 1 1 1 1		- 1 1 2 - 1 7 - 1 2	- 9 - 6 - 1 2 1 1 4 5 - 8 31 1 12 - 1 1 2 - 4 11 39 17 18
Totals	51	12	7	4	74	- 62	28	24	21	173

NETT BIRTHS IN THE YEAR: Legitimate, 2264; Illegitimate. 135.

NETT DEATHS IN THE YEAR OF; Legitimate Infants, 153; Illegitimate Infants, 20.

Deaths of Aged Persons.—The corrected number of deaths of residents at 65 years of age and upwards registered during the year was 625, against 576 in the previous year. These deaths were equal to 4.7 per 1,000 of the total persons living, and 375 per 1,000 of the total deaths of residents registered.

Of the 625 deaths of residents at 65 years of age and upwards it is interesting to note that of these, 122 died between the ages of 65 and 70, 297 between 70-80, 182 between 89-90, 23 between 90-100 and 1 at the age of 100.

Statistics.—The following table gives the statistics of the Borough during 1924 and the previous five years, in the form prescribed by the Ministry of Health:—

TABLE I.

Vital Statistics of Whole District during 1924 and Previous Years.

	estimated each year.		Births.			Total Deaths Registered in the District.		ferable ths.		Nett Deaths belonging to the District.		
Year.	on estim	ted.	Nett.				idents in the	s not n the		r 1 Year Age.	At all	Ages.
,	Population e	Uncorrected Number.	Num- ber.	Rate.	Num- ber.	Rate.	100 C	of Residents r registered in District,	Num- ber.	Rate per 1,000 Nett Births.	12 1983 1	Rate.
1_	2	3	4	5	6	7	8	9	10	11	12	13
1918	115833	1829	2014	15.5	1445	12.5	175	713	210	104	1983	17.1
1919	120981	2084	2296	16.8	1210	9.2	168	659	228	99	1701	13.0
1920	136200	3150	3312	24.3	1073	7.9	161	646	219	66	1558	11.4
1921	131500	2599	2779	21.1	1167	91	202	669	245	88	1634	12.7
1922	134400	2564	2758	20.5	1223	9.1	196	705	196	71	1733	12.9
1923	133600	2571	2701	20.2	981	7.3	125	649	173	64	1473	11.0
1924	134200	2199	2399	17.9	1123	84	173	718	173	72	1668	124

Deaths of Residents.—Belonging to the Borough, occurring in Public Institutions, &c., in districts outside, during the year 1924:—

#### FEVER HOSPITALS.

Western Hospital Grove Hospital Park Hospital			26 6 3	Eastern Hospital North-Western Hospital South-Eastern Hospital	 2 1 2
				Total	 40
	ME	NTA	LE	IOSPITALS.	
Tooting Bee Hospital Leavesden Hospital Hanwell Hospital Banstead Hospital Long Grove Hospital			13 3 11 5 3	Dartford Heath Hospital Cane Hill Hospital Horton Hospital Caterham Hospital	 2 1 1 1 1
Colindale Hospital			5	Total	 47

### GENERAL HOSPITALS.

St. George's Hospital  Middlesex Hospital  Cancer Hospital  Children's Hospital, Great  Ormond Street  London Hospital  Chiswick Hospital  Willesden Hospital  St. Mary's Hospital Paddington  St. Columba's Hospital  St. Luke's Hospital, Paddington  Queen Charlotte's Hospital  National Hospital for Disease of Heart  Queen Mary's Hospital, Carshalton  University College Hospital	16 5 5 6 1 3 3 9 3 2 5 2 3	Homœopathic Hospital Brompton Hospital St. Bartholomew's Hospital Hampstead General Hospital Victoria Hospital Maudsley Hospital, Denmark Hill Guy's Hospital Royal Chest Hospital King's College Hospital St. George's Hospital St. George's Hospital, Hanover Square Acton Hospital Mount Vernon Hospital St. John and St. Elizabeth Hospital Charing Cross Hospital Metropolitan Hospital Total	1 1 4 1 3 1 2 1 1 1 1 1 1 1 1 1 9 2
OTHER	INS	TITUTIONS.	
St. Marylebone Infirmary Fulham Infirmary Kensington Infirmary Chelsea Infirmary St. George's Home Goldie Leigh Homes St. Joseph's Hospice, Hackney Cavell Nursing Home	313 99 35 1 1 1 2	Gordon Hospital, Vauxhall Bridge Road West End Hospital, Gloucester Gate St. Mary's Nursing Home Central London Throat and Ear Hospital French Hospital Seamen's Hospital Darenth Training Colony	1 1 1 1 1 1
Infants' Hospital	1	Seamen's Hospital	1
Ministry of Pensions Hospital	2	Darenth Training Colony	1
Weir Hospital, Grove Road South London Hospital for Women	1	National Hospital, East Finchley St. George's Home, Millman	1
London Jewish Hospital	1	Street	1
Cam House	1	West Park Hospital	1
Clare Hall Hospital	1		
	TADT	Total	471
	- 1	ous.	
1, Hartington Road, Norwood 60, Kingwood Road, Fulham	1	L. M. & S. Railway, near Harrow Goods Yard	1
46, King's Road, Mortlake	1	49, Beaumont Street, St.	-
River Thames-Barnes, Mort-		Marylebone	1
	7	59, Speldhurst Road, Acton	1
lake, &c Holland Road, Kensington	1	On way to Middlesex Hospital	1
48, Constance Road, Camber-	7	249, Queen's Road, Wim-	7
well 7, Elliott Road, Chiswick	1	bledon 16, Pembridge Gardens	1
13, Norfolk Crescent, Pad-	-	41, Jeffries Road, Stockwell	1
dington	1	30, Porchester Square	1
1, Sherbrooke Road, Fulham	1	Baltic Yard, Surrey Commer-	
30, Dorset Square, Marylebone	1	cial Docks	1
1, Ladbroke Square	2	91, Finchley Road	1
On way to St. George's Hos-	4	On way to St. Mary's Hos-	7
pital 1, Northumberland Street	1	Mattock Lane, Ealing	1
140, Lancaster Road	1	King's Road, St. Pancras	1 1 1 1
Latchmere, Ham Common	1	71, Ladbroke Grove	1
385, High Road, Chiswick	1	47, Werter Road	1
7. King Edward Street, City	1	Motol.	40
		Total	42

### TABLE II.

# Causes of, and ages at, Death during the Year 1924. METROPOLITAN BOROUGH OF HAMMERSMITH.

		NE	ETH	DEAT	THS .	AT T	HE S	UBJ	OINE N OR	D AG	ES C	T TI	RESI	DEN	TS"		whether of or "Non- Institutions
CAUSES OF DEATH.	nges.	year.	under 2.	under 5.	under 15.	under 25.	under 45.	under 65.	upwards.			77	VARI	08.			S: Et
	All	Under 1	1 and m	2 and m	5 and u	15 and u	25 and u	45 and u	65 and u	1	2	3	4	5	6	7	Total Deat "Residents" Residents"
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	L. H
All Causes { Certified	1568 0	173 0	45 0	44 0	60	76 0	205	440	625	296 0	318	271	116	264 0	242	161	197 0
Enteric Fever Small-pox Measles Scarlet Fever Whooping Cough Diphtheria and Croup Influenza Erysipelas Phthisis (Pulmonary Tuberculosis) Disemminated Tuberculosis Tuberculosis Meningitis Other Tuberculosis Diseases Cancer, malignant disease Rheumatic Fever Meningitis Organic Heart Disease Bronchitis Pneumonia (all forms) Other Diseases of the Respiratory Organs Diarrhea and Enteritis	4 16 17 56 5 147 3 11 9 195 8 12 154 158 153	9	0 15 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 7 7 4 4 3 3 6 6 0 0 0 2 2 0 0 0 1 1 1 0 1 1 9 0 0 0 0 0 0 0 0 0 0	0 0 4 4 0 1 1 10 0 1 1 6 2 2 2 0 0 0 3 3 4 0 0 0 8 8 0 0 0	0 0 0 0 0 0 0 1 1 2 0 0 34 0 0 2 1 1 2 2 3 0 0 3 3 1 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 177 2 377 0 0 8 966 1 1 59 39 39 36	0 0 0 0 0 0 0 6 0 0 2 87 1 1 0 7 6 102 33	6 0 4 0 8 1 26 6	0 4 0 2		0 3 ( 1 0 3 1	0 8 1 5 2 10 1 23 0 0 3	0 5 0 2 6 8 1 24 0 3 0 20 3 3 3 3 3 23 28	0 6 2 1 2 6 1 16 1 2 3 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0 0 0 0 0 0 0 0 2 0 0 4 6 2 36 1 8 9 9
Appendicitis and Typhlitis Cirrhosis of Liver Alcoholism Nephritis and Bright's Disease Puerperal Fever Other Accidents and Diseases of Pregnancy and Parturition	9 10	0 0 0 0	0	0 0 0 0	080080	20002	3 1 0 6 2	3 6	20 0	0 2 0 10 0	1 3 0 12 2	3 2 0 6 1	1 0 1 5 0	0 0 10 1	3 2 0 7 0	2 0 0 5 0	9 5 0 12 0
Congenital Debility and Malform- ation, including Premature Birth Violent Deaths, excluding Suicide Suicide	67 44 18 442	67 1 0 26 0	0 1 0 1 0	0 8 0 4 0	0 5 0 9 0	0 4 2 14 0	0 9 7 49 0	0 12 7 89 0	0 9 2 250	6 8 3 95 0	17 8 3 79 0	12 7 2 75 0	3 3 3 43 0	13 5 4 68 0	9 9 2 46 0	7 4 1	5 18 1 62 0
Total	1668	173	45	44	60	76	205	440	625	296	318	271	116	264	242	161	197
SUB- ENTRIES included in above figures.  Cerebro-Spinal Meninglitis	3 2	1 0	0	0	0	2	0	0	0	0	3 0	0	0	0	0	0	3

The following table shows the Death Rates of the seven Wards of the Borough.

This rate is calculated on the estimated population of each Ward.

	Ward.		Estimated Population.	No. of Deaths.	Death Rate.
No. 1	River		 17,622	296	16.8
No. 2	Brook Green		 25,785	318	12.3
No. 3	The Grove	19.5	 22,920	271	11.8
No. 4	St. Stephens	***	9,219	116	12.6
	Starch Green		 22,746	264	11.6
	Wormholt		 23,799	242	10.2
	College Park ar		12,109	161	13.3

#### LONDON AND THE METROPOLITAN BOROUGHS.

LUNDUN AI	ND THE M	ETROP	ATTI TITLE	BURUU	GHS.
CITIES AND BOROUGHS.	Estimated population to the middle of 1924.	Births, Annual rate per 1,000 persons living.	Zymotic Deaths. Annual rate per 1,000 persons living.	Death- rate per 1,000 living.	Deaths o Infants under one year to 1,000 births.
LONDON West Districts.	4,576,505	18:7*	1	12.1*	69*
Paddington	146,400	17:1	0.9	13.1	78
Kensington	178,700	16.2	0.34	13.0	75
Hammersmith	TO 1 200	17-9	0.7	12.4	72
Fulham	100 100	18.2	0.5	11.1	72
Chelsea	01 =00	14.4	0.8	13.2	64
City of Westminster		11.6	0.4	12:1	59
North Districts.	140,000	11.0	0.1	12.1	.00
St. Marylebone	105,300	14.5	1.01	13.6	78
44	ne ann	13.5	0.09	11.7	55
PAL TO	011.000	18.8	1.0	13.0	74
Islington		19.8	0.66	12:3	66
Stoke Newington		16.6	0.7	11:3	58
Hackney	226,900	18.5	0.45	11.4	60
Central Districts.	40.000	.0.00		***	0.1
Holborn	43,250	13:36	0.57	12.2	. 81
Finsbury		21.5	1.27	14.1	75
City of London	13,300	7.1	.0.14	11.3	117
East Districts.					
Shoreditch		23.7	1.2	13.7	87
Bethnal Green		22.1	1.1	12.4	78
Stepney		21.4	0.78	12.2	74
Poplar	167,300	22.9	0.8	12.1	72
South Districts.			1000		
Southwark		22.5	1.5	14.2	71
Bermondsey	122,100	23.8	-	13.6	78
Lambeth	309,300	25.5	0.6	12.3	50
Battersea	171,000	18.4	0.7	11.7	62
Wandsworth	999 900	14.57	0.47	11.03	57
Camberwell	070.700	18.8	0.7	11.4	70
Deptford	777 000	20.6	0.7	12.0	76
Greenwich	100 170	20.09	0.69	11.47	73
Lewisham	104 000	16:3	0.3	10.4	47
Woolwich	139,980	18.5	0.5	11.0	65

<sup>\*</sup> These provisional figures are taken from a table furnished by the Registrar-General. Other figures supplied by Medical Officer of Health of borough concerned.

#### SANITARY CIRCUMSTANCES OF THE BOROUGH.

Closet Accommodation.—There are as far as is known no privies in the Borough, all houses being provided with proper water-closets on the water carriage system.

Scavenging.—The arrangements for the removal and disposal of house refuse include the use of both motor and horse-drawn vehicles. The motor vehicles have been installed, and are provided with proper covers. The horse-drawn vehicles are only covered when the van has been loaded.

The practice of "totting" has been abolished. A step, which I consider, in the right direction.

Throughout the Borough, there are quite a number of ashpits. This means of depositing house refuse is not only out of date, but in the majority of cases leads to nuisances arising. In all cases which come before the Public Health Department, the owners are advised to close the same, and provide proper metal receptacles in accordance with the L.C.C. Bye-laws.

Cesspools.—During the year one cesspool has been found. This has been filled up, and the drain connected to the sewer. I have no doubt that a few cesspools still exist, and they will be revealed in course of time, when they will be dealt with in a similar manner.

General Sanitary Administration.—The general sanitary condition of the Borough has been improved to some extent.

Whilst a large number of notices has been served during the year it is still very obvious that the overcrowded conditions have not been relieved to any great extent. These conditions are found in the course of inspection, but it is difficult to take action owing to the shortage of accommodation. The Housing schemes of the London County Council and Borough Council are nearing completion, but I am afraid the overcrowded conditions of the Borough still exist.

Notices.—The following table shows the number of visits paid by the Inspectors and the Preliminary Notices served and complied with during the year;—

	Number of Inspections.	Number of Notices Served.	Number of Notices com- plied with.
Infectious Diseases Complaints Bakehouses Customs and Inland Revenue Houses let in lodgings House to House Housing and Town Planning Act Factories and Workshops, &c Slaughterhouses Milk Vendors Ice Cream Vendors Smoke Food Miscellaneous	3,735 3,523 521 64 14 958 215 1,381 277 1,667 135 75 5,438 17,170	488 1,898 26 20 4 258 95 93 6 7 10 47 397	504 1,882 26 20 4 356 132 96 4 7 — 3 45 423
	35,173	3,349	3,502

During the year 991 Statutory Notices were served and 968 complied with.

In several instances it was necessary to take proceedings in order to enforce compliance with Notices served.

The following table shows the result of proceedings taken:—

#### SUMMONSES-YEAR 1924.

Situation of Premises	Nature of Offence	No. of Sum- monses	Result of Proceedings
2 Rayleigh Road	Failing to comply with Statutory Notices.	2	Withdrawn, Work done,
18 Rayleigh Road	ditto	1	Withdrawn. Work done, £1 costs.
4 Sterndale Road	ditto	5	(1) Work done. With- drawn. (2) Work done. With-
			drawn. (3) Work done. With- drawn.
			(4) Penalty £5 and order made, 21 days, (5) Penalty £5 and
7 Rigeley Road 83 Rayleigh Road	ditto ditto	1 2	order made. 21 days. Order. 21 days. Order. 28 days and £1 costs.

### Summonses—continued.

Situation of Premises	Nature of Offence	No. of Sum- monses	Result of Proceedings
30 Devonport Road	Failing to comply with Statu-	1	Fined 30s.
1 St - 1-1- D1	tory Notice.	2	Costs 10s. 6d.
Sterndale Road	ditto	1	Order, 21 days.
279 Uxbridge Road	ditto	1	Withdrawn. Work done
88 Willow Vale	ditto	3	Withdrawn, Work done
8 Letchford Gardens	ditto	2	Withdrawn. Work done
Letchford Gardens	ditto	1	Adjourned.
66 Station Road	ditto	î	Order. 21 days.
17 Lionel Mansions	a contract of	1	Fined 5s.
36 Southbrook Street	ditto	1	Withdrawn. Work done
56 Goldhawk Road	ditto	1	Order, 14 days.
19 Dorville Road	ditto	1	Order. 21 days.
207 Latimer Road	ditto	1	Order. 21 days an
32 Stronsa Road	ditto	1	fined £1.
122 St. Stephen's Av.	ditto	4	(1) Order. 21 days. (2) Order. 28 days. (3) Order. 28 days. (4) Withdrawn. Wor
	-		done.
91 Nasmuth Street	ditto	1	Withdrawn. Work done
38 Mardale Street	ditto	1	Costs 10s.
28 Railway Arch	ditto	1	Withdrawn.
2 Masbro Road	ditto	1	Withdrawn, Work done
20 Fielding Road	ditto	1	10s, 6d, costs. Withdrawn. Work d no 10s, 6d, costs.
10 Sinclair Gardens	ditto .	2	Withdrawn, Work done
56 Addison Gardens	ditto	1	Adjourned. Order 2
no Dellaca Anabas	ditto	,	Withdrawn. Work done
28 Railway Arches	ditto	1	Order. 21 days.
14 Thornfield Road 74 Queen Street	ditto	1	Withdrawn, Work done
74 Rayleigh Road	ditto	1	Order made. 14 days.
38 Manchester Road	ditto	1	Order made. 14 days.
21 Bassein Park Road	ditto	1	Withdrawn. Work don
27 Southerton Road	ditto	1	Order made. 14 days.
68 Blythe Road	ditto	1	Withdrawn, Work don
31 Iffley Road	ditto	1	Dismissed. £1 1s. cost
36 Manchester Road	ditto	2	(1) Order made, 14 day (2) Withdrawn. Wordone.
203 Latimer Road	ditto	4	(1) Order. 14 days. (2) Withdrawn. Wordone.
			(3) Withdrawn. Wordone. (4) Withdrawn. Wordone.
C. & T. Harris (Colne) Ltd., Wilts.	T.B. bath chap exposed for sale.		done. Dismissed.

#### SUMMONSES—continued.

Situation of Premises	Nature of Offence	No. of Sum- monses	Result of Proceedings
40 Davisville Road	Failing to comply with Statutory Notice.	1	Withdrawn. Work cone.
279 Uxbridge Road	ditto	2	(1) Withdrawn.
88 Rayleigh Road 8 Avenue Road Mr. Shore, 431 King's Road, Chelsea	ditto ditto Removal of offensive mat- ter during pro- hibited hours,	1 1 1 1	(2) Order made. 21 days. Order made. 14 days. Order made. 21 days. 20s. fine.
122 St. Stephens Av.	Failing to comply with Statutory Notice.	3	(1) Withdrawn. Work done. (2) Withdrawn. Work done. (3) Withdrawn. Work
14 Vanment Caulana	3144		done.
14 Kenmont Gardens 70 Rayleigh Road	ditto ditto	2	Withdrawn. Work done. (1) Withdrawn. Work done. (2) Order. 14 days.
36 Waldo Road	ditto	9	Withdrawn, Work done.
22 Waldo Road	ditto	1	Withdrawn, Work done
207 Latimer Road	ditto	î	Order. 14 days.
111 Queen Street	ditto	1	Order made, 14 days,
131 Queen Street	ditto	1	Order made. 14 days.
9 Rayleigh Road	ditto	3	Work done. Withdrawn

Factories and Workshops, etc.—During the year 93 notices were served in reference to insanitary conditions and defects found to exist during the inspection of the factories, workshops and workplaces in the Borough, and during the same period 96 notices were complied with.

During the previous year there were 114 notices served and 115 complied with.

The following is a list of the Factories and Workshops upon the Register:—

Restaurants, Hotels, &c		156
Bakehouses (13 not in use as Bakeries)		63
Bootmakers		48
Motor and Cycle Makers		20
Dressmakers and Milliners	***	83
Laundries Outworkers	***	88 256
Letterpress Printers and Bookbinders	***	21
Electrical and Mechanical Engineers		50
Smiths, Wheelwrights and Coachbuilders		22
Tailors		48
Builders, Carpenters and Joiners Miscellaneous	***	21 365
Miscellaneous	***	-000
Total		1.241

The whole of these premises have been under a systematic inspection by your Inspectors and numerous improvements

have been carried out under their supervision.

The following tables have been prepared in accordance with the form prescribed by the Home Office on the Administration of the Factory and Workshops Act, 1901, in connection with Factories, Workshops, Workplaces and Homework.

#### 1.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

		Number of	
Premises	Inspec- tions	Written Notices	Prosecu-
Factories (including Factory Laundries)	741	39	-
Workshops (including Workshops Laundries)	470	44	-
Workplaces	465	27	_
Total	1,676	110	_

## 2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars		Nun	ber of	Defects	er of	
Lationales		Found	Re- medied	Referred to H.M. Inspector	Number of Prosecutions	
Nuisances under the Public Health Acts-						
Want of Cleanliness		49	51		-	
Want of Ventilation		4	4	_		
Overcrowding		2	2	_	-	
Want of Drainage of Floors		1	1	_	-	
Other Nuisances		30	29	_	_	
Sanitary (insufficient		7	7	_	_	
Accommo- unsuitable or defective		45	48	_	-	
dation (not separate for sexes		1	.1	-	-	
Offences under the Factory and Workshop A  Illegal occupation of underground ba house (S. 101) Other offences (excluding offences relating to out-wowhich are included in Part 3 of treport)	ke- ork			=	11	
Total	***	141	145	_	-	

#### 3.—HOME WORK.

			0	utw	orkers'	List, S	Section 107				ork in			work i	
	I	ists rec	ceived i	rom	Emplo	yers	Notices	Prosecut	ions		es, Sec		Sec	s. 109,	110
Nature of Work	Twi	ce in th	ne year	Onc	e in th	ne year		in to	ng to Lists	See	served	ions	es	made 110)	ions
	00	Outw	orkers	10	Outw	orkers	as to keeping or	ng to por nit in tion tion	lling d Li	Instances		Prosecutions	Instances	ors m	eent
	Lists	Con- trac-	Work- men	Lists	PULTER!	Work- men	sending lists	Failing to keep or permit in- spection of Lists	Failli	Ins	Notices	Pros	Ins	Orders (Sec. 1	Prosecutions
1	2	tors 3	4	5	tors 6	7	8	9	10	11	12	13	14	15	16
Wearing apparel-									1						
(1) making, etc.	17	3	40	21	1	13		** "		12	12	1.1	1	1	
(2) cleaning and washing															
Furniture and upholstery															
TOTAL	17	3	40	21	1	13				12	12		1	1	

### 4.—REGISTERED WORKSHOPS.

Bakehouse	s						***	33
Dressmake				***		***		75
Laundries		***			***		**	32
Others			***		***	***	***	236

#### 5.—OTHER MATTERS.

Class	New New York		7.00	Number
Matters notified to H.M. Inspector Failure to affix Abstract of the Factor Act 1901 (S. 133)  Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act, 1901	Notifie Insp	ed by I bector ts (of ac in) sen	H.M.	2 13
(S. 5) Other Underground bakehouses (S.101)—				11
Certificates granted during year In use at the end of the year				33

Customs and Inland Revenue Acts.—Six applications were received under the Customs and Inland Revenue Acts for exemption or abatement of inhabited house duty.

One application was withdrawn, one refused and the remaining four were held over subject to certain works being carried out.

The Finance Act of 1924 repealed inhabited house duty in respect of any year subsequent to 1923-24.

As a result all applications for Certificates under the Customs and Inland Revenue Acts lapsed.

House to House.—As a result of the house to house visitation 958 inspections were made, 258 notices served, and 356 complied with.

It is important that this work should be systematically carried out.

Houses Let in Lodgings.—During the year no new houses were registered.

Rats and Mice (Destruction) Act, 1919.—During the year the Rats and Mice (Destruction) Act, 1919, continued in operation, the District Inspectors being responsible for its administration in their respective districts.

Section I places the responsibility of ridding the premises of the pest upon the occupier, but this is somewhat difficult when dealing with tenement houses containing in some cases three or more families.

During the year many complaints were received with regard to rat infestation of premises. In each case an inspection was made and advice and instructions given. A supply of poison was given where necessary and in most cases satisfactory result have been obtained.

Old buildings often provide ideal accommodation for rats; hollow partitions, space between floors and ceilings and under basement flooring being used for nesting. It is a difficult matter to rid such premises of rats.

Generally speaking some improvement has been made, but it appears to me that no great advance will result until systematic attack is made upon the rodents in their chief breeding grounds, the sewers. Throughout the Borough, and I have no doubt throughout the whole of London, there exist old brick sewers swarming with rats, from which they emerge at night and enter dwellings and other premises.

Smoke Abatement.—During the year observations were kept in reference to black smoke emitted from the various factories, laundries, bakehouses, &c., situate in and adjoining the Borough. Sixteen Intimation Notices were served. No summons was taken out.

Reports were submitted to the Public Health Committee in reference to the observations made as regards the following:—

Lyons & Co., Cadby Hall, Hammersmith Road.
Civic Pipe Co., Fulham Palace Road.
Notting Hill & Kensington Electric Light Co., Wood Lane.
Hammersmith Borough Council Electricity Works, Fulham Palace
Road.
Fuller's Ltd., Great Church Lane.
Public Baths, Lime Grove.
Central London Railway, Wood Lane.
Glen Laundry, Landor Road.

# PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYE-LAWS AND REGULATIONS.

The following premises and occupations have been kept under constant inspection throughout the year, and action taken where found to be necessary:—

Fried Fish Vendors. Milk Vendors. Ice Cream Vendors. Slaughterhouses.

Full particulars and remarks regarding these premises are to be found in another part of the report.

Ice Cream Vendors.—The London County Council, after considering the views of the various Borough Councils on the question of compulsory registration of ice cream vendors, decided that the powers already possessed by local sanitary authorities in London, were sufficient to protect the public from danger arising from the consumption of ice cream.

I am still of the opinion that powers should be obtained to secure the compulsory registration of ice cream vendors, and that the local sanitary authorities should be empowered to refuse such registration should the person or premises be unsuitable for the purpose.

During the year an inspection was made of all the ice cream vendors in the Borough. The premises, in the majority of cases, were found to be satisfactory, but in some cases it was necessary for action to be taken regarding their condition.

Many premises are not suitable for the handling of so easily contaminated a food as ice cream, and there is often a lack of personal cleanliness about the vendors.

In a few cases the premises are used for making the cream only, it being sold from barrows in the street, but generally speaking it is sold at the premises at which it is made.

The selling of this commodity from barrows is, in my opinion, very undesirable as the provision for the washing of the utensils used (glasses, wafer-frames, &c.) is very inadequate and unsatisfactory.

Schools.—The sanitary condition and water supply of the Schools is a matter which requires very little attention from the Public Health Department. The supervision of the schools is in the hands of the London County Council, but combined action has been taken when and where required, with a view to preventing the spread of infectious disease.

An arrangement exists whereby cases of Measles, Whooping Cough and Chicken Pox are notified by the Head Teacher to the Medical Officer of Health, at the same time as they send to the Divisional Superintendent.

These cases are followed up, and the premises are inspected with a view to any insanitary conditions being remedied. This form of co-ordination is carried out as far as possible under the present conditions. There is little or no contact between the School Medical Officers and the Medical Officers of Health of the Metropolitan Boroughs. The latter's knowledge of the health of the school children depends entirely upon the very little information he obtains from the School Medical Officers.

#### FOOD.

Milk Supply.—The milk supply for the Borough is the same as that for the whole of London. This supply is carried out for the most part by several wholesale distributors, most of whom have combined to form what is known as the United Dairies, Ltd. This combine supplies something like two-thirds of the whole of the milk for London.

During the year 438 samples of milk were taken and submitted to the Public Analyst for analysis, the results of which are shown in the report of the Public Analyst attached hereto. No samples were examined for the presence of Tubercle Bacilli. This work is carried out by the County Council and their investigations show that an average of 10 per cent. of the samples contain germs of Tuberculosis.

This source is probably the cause of most of the Tuberculosis in young children. Until such time as it is possible to exclude infected cattle from all herds all milk should be pasteurised or dried before distribution. Both these processes eliminate all infection and do not destroy the sential principles of milk.

During the year, it was found necessary to serve a notice upon a milk vendor, at whose premises a case of infectious disease had occurred, requiring the suspension of the sale of milk until the premises had been disinfected.

## PRESERVATIVES AND COLOURING MATTERS IN FOOD.

The Final Report of the Departmental Committee on the use of Preservatives and Colouring Matters in Food was issued during the year. The following is a

#### SUMMARY OF THE CONCLUSIONS AND RECOMMENDATIONS.

- 1. Preservatives should be prohibited in all articles of food and drink offered or exposed for sale whether manufactured in this country or imported, except that
  - (A) Sulphur dioxide only should be permitted
    - (i) in sausages in amounts not exceeding 3 grains per pound;
    - (ii) in jam in amounts not exceeding 0.3 grain per pound;
    - (iii) in dried fruit in amounts not exceeding 7 grains per pound;
    - (iv) in preserved (but not dried) whole fruit or fruit pulp in amounts not exceeding 5 grains per pound;
    - (v) in beer and cider whether in bottle or in cask in amounts not exceeding 5 grains per gallon;
    - (vi) in alcoholic wines, non-alcoholic wines and cordials, and fruit juices, sweetened and unsweetened, in amounts not exceeding 3 grains per pint.
  - (B) Benzoic acid should only be permitted
    - (i) in coffee extract in amounts not exceeding 3 grains per pound;
    - (ii) in non-alcoholic wines and cordials, and sweetened and unsweetened fruit juices (as an alternative to sulphur dioxide) in amounts not exceeding 5 grains per pint;
    - (iii) in sweetened mineral waters and in brewed ginger beer in amounts not exceeding 1 grain per pint.

The method of estimating the foregoing preservatives should be prescribed by the Minister of Health.

- 2. The sale of any preparation as a food preservative or for use in such circumstances that it may be introduced into food should be declared illegal unless such preparation
  - (a) bears a description clearly indicating its composition and strength;
  - (b) is free from impurities and in particular contains not more than 1/100th part of 1 grain of arsenic per pound or more than 1/7th part of 1 grain of lead per pound.

- 3. The use of preservatives so far as they are permitted should be upon the condition that the nature and quantity of the preservative present in the article of food should be declared in a manner prescribed by the Minister of Health. In cases in which the declaration of the preservative might be difficult to enforce or might result in undue harm to the industry without compensating advantage to the consumer, exception to this requirement might be made, but the exception should in no circumstances apply to sausages.
- 4. The employment of a copper salt to colour or preserve the colour of peas and other vegetables should be prohibited.
- 5. A schedule should be issued by the Minister of Health after such inquiry as is necessary of colouring matters the use of which may be considered non-injurious to health, such schedule to be subject to amendment or extension from time to time as occasion may require. Within a suitable period after the publication of this list the use of any other colouring matter should be prohibited unless and until it shall have been approved by the Minister.
- 6. Before the prohibition of preservatives or of colouring matters in food (including the use of copper salts for the so-called greening of vegetables) is enforced, a period of grace should be allowed sufficient to enable manufacturers and importers to adjust their methods and processes and to allow stocks to be cleared.
- 7. Improved methods in the storage and transport of food by rail, road and water, especially as regards the use of refrigeration and cool air storage, are urgently required.
- 8. It should be provided by law that any Regulations or Statute prohibiting or limiting the use of preservatives and colouring matters should bind the Courts in proceedings taken under the Sale of Food and Drugs Acts in respect of their use.
- 9. An amendment of the law is required to render more expeditious the prosecution of a person actually responsible for offences under these Acts, where a warranty defence is pleaded.
- 10. Further powers of control by registration, licensing or inspection should be given to Local Authorities in relation to all places concerned in the production, sale, storage and distribution of food.

#### CIRCULAR 553.

This Circular was issued in December, 1924, by the Ministry of Health and deals with the taking of samples under the Public Health (Dried Milk) Regulations, 1923.

An instance has been brought to the notice of the Department in which a part of a sample of dried milk taken under Article 5 of the Public Health (Dried Milk) Regulations, 1923, was placed in a paper envelope. The consequence was that by reason of the absorption of water from the atmosphere into the dried milk and of fat from the dried milk into the envelope the result of the analysis would not represent the actual composition of the article at the time of sale. It is desirable that samples of articles of this character should be placed in securely sealed bottles or other non-absorbent and air-tight containers, so that there may be no material change in the composition of the sample between the time of purchase and the time of analysis.

## CERTIFICATION OF CERTAIN FOOD PRODUCTS FOR EXPORT TO THE DOMINIONS.

In view of the requirements of the Food Laws in operation in the Dominions, the system of certification for food products which are derived from the flesh of cattle, sheep, swine or goats, or from game or poultry, and are prepared or packed in England and Wales for export to the Dominions, has been continued.

The Certifying Officer—usually the Medical Officer of Health—is required to keep himself informed, by personal inquiry and in other available ways, as to:—

- (1) The sanitary condition, structure and character of premises on which the food products are prepared, stored or packed, with special regard to the possibility of contamination of the food products at any stage.
- (2) The cleanliness and wholesomeness of the methods employed in preparing, storing or packing the food products.
- (3) The precautions taken to avoid the utilisation for food purposes of diseased, unsound or unwholesome material in any portion of the premises; and arrangements for the safe disposal of any material which, on account of disease, unsoundness, unwholesomeness, or for any other reason, is unfit for human food.

In the case of products derived from cattle, sheep, swine, or goats, the Certifying Officer must also satisfy himself that the animals from which the products are prepared have been subjected to an ante-mortem and post-mortem veterinary inspection and found free from disease and suitable for human food.

Where the products are prepared from animals slaughtered in the United Kingdom, the Certifying Officer before certifying as to Veterinary examination must be satisfied:—

- (a) That the animals were subjected to veterinary examination antemortem and post-mortem by an Officer of the Local Authority for which he himself acts; or
- (b) That the animals were slaughtered in a public abattoir under official veterinary inspection;

or he must be furnished by the applicant with a declaration signed by a qualified veterinary surgeon, appointed by the firm with the approval of the Certifying Officer, to the effect that an ante-mortem and post-mortem examination was made by him and that the animals so examined were found free from disease.

Where the products are prepared from material imported into the United Kingdom from overseas, the Certifying Officer must satisfy himself that the material was accompanied by a certificate as to ante-mortem and post-mortem veterinary inspection signed by an Official of the National Government of the country of origin, being a country whose certificates the Authorities are prepared to accept.

If the information obtained by the Certifying Officer is not, in his view, satisfactory, certification is to be withheld and the Certifying Officer must inform the Ministry forthwith.

The Certifying Officer will supply the Ministry of Health with such information as may be required in regard to the methods of inquiry, inspection and certification which have been adopted.

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

The following statement shows the action taken under the Public Health (Milk and Cream) Regulations, 1912 and 1917:—

1. MILK AND CREAM NOT SOLD AS PRESERVED CREAM.

	a. ples examined for f a preservative.	Number in which a preservative was reported to be present.
Milk	0	0
Cream	4	1

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

Sample No. 676.—Cream contained a preparation of boric acid equivalent to 0.26 per cent. of crystallised boric acid. Summons under Regulations. Fined £2 and 10s. 6d. costs.

2. CREAM SOLD AS PRESERVED CREAM.

(1) Correct statements made

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

(T)	Correct statements made	***	***	***		
(2)	Statements incorrect					0
(3)	Percentage of preservative	e found in	each s	ample :	-	
Sample					Statuto	entage ed on ory label.
898	0.29 per cent. or 20.3 grs	ains of Bor	ic Acid	per por	ınd	0.4
899	0.37 per cent. or 25.9 gra	ains of Bor	ic Acid	per po	ınd	0.4
900	0.34 per cent. or 23.8 gra	ins of Bor	c Acid	per por	ind	0.4
902	0.24 per cent. or 16.8 grs	ins of Bor	c Acid	per por	ınd	0.4
957	0.22 per cent. or 15.4 grs	ins of Bor	ic Acid	per por	ınd	0.4
958	0.26 per cent. or 18.2 gra	ins of Bori	c Acid	per por	ind	0.4
959	0.30 per cent. or 21.0 gra	ins of Bori	ic Acid	per pou	ınd	0.4
960	0.24 per cent. or 16.8 gra	ins of Bor	ic Acid	per pot	ınd	0.4
(6)	Determination made ved cream :—					old as
(1)	Above 35 per cent					8
	Below 35 per cent					0
1						

8

Total

- (d) Particulars of each case in which the Regulations have not been complied with and action taken ... Nil.
  - 3. THICKENING SUBSTANCES.

Any evidence of their addition to cream or preserved cream. Action taken where found ... ... Nil.

#### 4. OTHER OBSERVATIONS.

In all cases where a contravention of the Regulations has occurred, the Council has, in accordance with Article 6 of the Regulations, afforded the Vendor an opportunity of furnishing an explanation in writing. All samples of milk taken for analysis under the Sale of Food and Drugs Acts are examined for preservatives. During the year no sample was found to contain preservative.

#### MILK (MOTHERS AND CHILDREN) ORDER, 1919.

A brief report with regard to the action taken by this Council will be found in the Maternity Section, see page 78.

#### SALE OF FOOD AND DRUGS ACTS. YEAD ENDED 31st DECEMBER, 1924.

During the twelve months ended on that date 614 samples were submitted to me for examination. Of these, 600 were purchased under the provisions of the Sale of Food and Drugs Acts, 12 under the Public Health (Milk and Cream) Regulations, 1 sample of water and 1 of soda water.

In Table I are given the numbers of samples received under the Sale of Food and Drugs Acts during the several quarters of the year, together with the numbers classified as genuine, inferior, and adulterated.

Of the total number examined 508 were reported as genuine, 14 as adulterated, whilst 58 were of inferior quality.

TABLE I.

Samples received.			Genuine. Inferior. Adulterated.			
Quarter	ending	March 31st	115	21	14	150
"	"	June 30th	113	28	9	150
,,	"	Sept. 30th	136	4	10	150
"	,,	Dec. 31st	144	5	1	150
lane o		Totals	508	58	34	600

The percentage of adulteration was 5.7 as compared with 6.1 last year. The percentage of articles of inferior quality, where actual adulteration could not be certified, was 9.7 this year and 9.0 last year.

In Table II will be found a statement of the number and nature of the various articles examined during the year, together with particulars of the prosecutions which were instituted.

TABLE II.

		No. of			ation.	Sum-	Penalties	
Article.	samples exam'd.	Genuine.	Inferior.	Adult- erat ed	monses issued.	imposed		
Borax Boric Ointment		8 2	6 2	_	2+	1	£ s. d.	
Butter		46 2	46	=		=	=	
Camphorated Oil		5	5	-	-	_	_	
Cheese		10	10		48	_	_	
The state of the s		16 1	16 1	=	_	_	=	
		5	5	_	_	_	_	
		1	1	_	1*		_	
Meat and Fish Pastes Meat Pie	3	9 2	9	_	21	_		
Milk Condensed		438 10	362 10	58	18	10	15 6 (	
Olivo Oil		1 18	18	_	_	=	_	
Peas Sugar, Demerara		10 2	3 2	_	7	7	16 15 (	
Salmon		1 8	1 4	_	4*	_	_	
Tomato Sauce		1	î	-	_	-	-	
Totals		600	508	58	34	18	32 1	

<sup>\*</sup> No action taken.

Milk.—During the year 438 samples of milk were examined and of these 362 were reported as genuine, 58 as inferior, and 18 as adulterated. The following Table shows the nature and extent of the adulteration:—

<sup>†</sup> Informal. Other case warranty proved.

<sup>‡</sup> Informal samples.

<sup>§ 3</sup> informal samples. No action in other case.

TABLE III.

No.	Adulteration	Certified,	Penalties Imposed.
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Fat abstracted """" """" """" """" """" """" """" "	18 per cent. 9	Warranty proved. Summons dismissed £2 and 10s. 6d. costs. £1 and 10s. 6d. costs. Summons withdrawn. £1 1s. costs. Informal sample. Informal sample. 10s. 6d. costs. Proceedings pending. £2 and 10s. 6d. costs. £2 and £1 1s. costs. £2 and £1 1s. costs. Summons withdrawn. £1 1s. costs. Vendor warned. No action. No action. No action. Informal sample.

The percentage of adulteration in the case of milk is the same as last year, namely, 5.0.

Prosecutions were instituted in the case of most of the adulterated samples and the penalties inflicted amounted to £15 6s. 0d.

The following Table gives the average composition of the milk, calculated on the total number of the samples taken in the Borough during the four quarters of the year:—

TABLE IV.

	Samp	les received.	Fat.	Non-fatty- Solids.	Water.
Quarter	ending	March 31st	 3.60 %	8.85 %	87.55 %
,,	,,	June 30th	 3.60 %	8.84 %	87.56 %
- ,,	,,	September 30th	 3.62 %	8.80 %	87.58 %
,,	,,	December 31st	 3.86 %	8.89 %	87.25 %
Average	for the	year	 3.67 %	8.84 %	87.49 %

Condensed Milk.—Ten condensed milks were specially examined with a view to ascertaining whether or no they complied with the requirements specified in the New Regulations. They were all found to fulfil these requirements, both in respect of the amount of fat and non-fatty solids present and in regard to the composition of the milk yielded on dilution to the extent indicated on the labels of the tins.

Butter.—Forty-six samples of butter were analysed and all were found to be genuine. In no case was the limit for boron preservative exceeded.

Cocoa, Coffee and Coffee and Chicory.—Ten specimens of cocoa, sixteen of coffee and one of coffee and chicory were all passed as genuine. Arsenic was specially tested for in the cocoas, but with negative results.

Meat and Fish Preparations.—Of nine samples of meat and fish pastes, two of meat pie, one of salmon, and eight of sausages, examined during the year, only six were found to contain boron preservative. The amounts found ranged from 1.8 grains to 16.1 grains per pound.

Preserved Vegetables.—Seven out of a total of ten samples of peas were found to be adulterated with copper salts. The amounts found ranged from 0.6 grain to 2.5 grains per pound of peas, the results being expressed in terms of crystallised sulphate of copper.

Jam and Marmalade.—Two jams and one marmalade were returned as genuine. Tests for metallic contamination and for traces of arsenic gave negative results.

Lime Juice Cordial.—A sample of this article was found to contain 0.35 grain of salicylic acid per pint and was, therefore, reported as adulterated.

Drugs.—The total number of drugs analysed during the year was eighteen and of these, two were found not to comply with the requirements of the British Pharmacopæia. Both of these were samples of borax and they were found to contain 200 parts of arsenious oxide per million in one case and 65 parts per million in the other, the limit prescribed by the Pharmacopæia being 5 parts per million.

The following samples were also analysed and were found to be genuine:—

Cheese ... ... 1 sample. Sugar, Demerara 2 samples. Lemonade Powder 5 samples. Tomato Sauce ... 1 sample. Olive Oil ... 18 samples.

The Public Health (Milk and Cream) Regulations.—Four samples of cream and eight of preserved cream were examined under these Regulations during the year. Adulteration was reported in the case of a cream which contained 0.26 per cent. of boric acid. All of the preserved creams contained boric acid, but in no case was the limit of 0.4 per cent. exceeded.

The following Table shows action taken on adulterated samples (other than milk and cream), and other infringements of the Sale of Food and Drugs Acts:—

### TABLE V.

_				
No.		Offence,	Where heard and date.	Result.
559	Milk .	18°/ <sub>o</sub> fat abstracted	K.P.S. 4/3/24.	Summons dismissed.
595	Sausages	8.4 grs. Boric Acid	d Informal sampl	Warranty.
625	Milk	7°/ added water	K D S 1/1/04	W: 3 00 310 -1
626		. 7°/ added water	ditto	Fined £2 and 10s. 6d. costs.
650	Milk	. 3°/ fat abstracted	Informal cample	Fined £2 and £1 Is. costs.
652	Milk	. 1°/ added water	ditto	-
653	Milk	. 3°/ fat abstracted	ditto	
668	Milk	. 2°/ fat abstracted	K.P.S. 15/4/24	10s 6d costs
670	The state of the s	. 9°/ fat abstracted	ditto	Fined f2 and 10a Cd and
676		. 18.2 grs. Boric Acid	ditto	Fined £2 and 10s. 6d. costs. Fined £2 and £1 1s. costs.  10s. 6d. costs. Fined £2 and 10s. 6d. costs. Fined £2 and 10s. 6d. costs.
694		1.8 grs. Boric Acid	Informal sample	-
696	Milk	. 5°/ fat abstracted	K.P.S 6/5/21	Fined #1 and 10 cl
701	Peas	2.5 grs. Cop. Sulph. per pound	ditto	Fined £1 and 10s. 6d. costs. Fined £2 and 10s. 6d. costs.
702	Sausages	4.2 grs. Borie Acid	No action	
705	Milk	7°/ added water	K P S 6/5/91	Fined Co 1 or 1
728	Peas	1.2 grs. Cop. Sulph. per pound	K.P.S. 3/6/24	Fined £2 and £1 1s. costs Summons dismissed.
756	Peas	0.15 grs. Cop. Sulph.		
769	Peas	per pound 1.2 grs. Cop. Sulph. per pound	ditto	
772	Lime Juice Cordial	35 grs. Sal. Acid	No action	and the Associated and
774	Peas	2.2 grs. Cop. Sulph. per pound	K.P.S. 17/6/24	Fined £2 and 10s.6d. costs.
787	Sausages	9 grs. Boric Acid per pound	Informal	
788	Sausages	16.1 grs. Boric Acid per pound	Infor.nal	Southern and
854	Peas	1 o grs. Cop. Sulph. per pound	K.P.S. 29/7/24	Fined £5 and 18s. costs.
855	Peas	2 grs. Cop. Sulph.	K.P.S. 29/7/24	Fined £5 and 10s.6d. costs.
866	Milk	3º/ ad ted water	and 23/9/24	Wanning
868	Milk	2°/, added water 3°/, added water 2°/, added water 2°/, added water		Warning.
874	Milk	3º/ added water		No action. No action.
	Milk	2°/, added water		No action.
	Milk	2°/, added water		No action.
887	Milk	6°/, added water	W. L. Police Court	Sammons withdrawn.
890	Milk	5°/, fat abstracted	ditto	£1 Is. costs. Summons withdrawn.
918	Meat Pie	5-3 grs. Boric Acid per pound	-	£1 1s. costs. Informal sample,
1003	Borax	200 parts per million Arsenious Oxide	PARTY MAN	Informal sample.
1018	Borax	65 parts per million	-	Summons dismissed.
138	Milk	Arsenious Oxide 16°/, added water		Warranty. Proceedings pending.
	-			

All other adulterated samples were informal and upon these no action could be taken.

Meat.—With regard to meat inspection, this important commodity is kept under supervision by the Inspectors in charge of the districts.

The Slaughterhouses are visited as often as possible.

Licensed Slaughterhouses.—At the annual licensing of slaughterhouses in October, I received notices from seven Licensees of their intention to make application to the London County Council for the renewal of their Licences.

In all cases these premises were found to be, as far as your Council's requirements were concerned, in a satisfactory condition. No opposition was offered to the renewal of the licences.

At the Special Session at the London County Council the seven licences were granted.

I have repeatedly expressed the opinion that the time had arrived when Public Abattoirs should be established so as to make it possible for all the meat to be inspected before leaving the slaughterhouse.

The Public Health (Meat) Regulations, 1924, provide that notice of the day and time of slaughtering shall be given to the Local Authority.

This procedure will enable arrangements to be made so that an Inspector can be in attendance at the time of or immediately after slaughter.

The following is a list of the licensed slaughterhouses in the Borough:—

Premises.	Name of Licensee.	
185 Uxbridge Road 40 Goldhawk Road 138 Goldhawk Road 247 Goldhawk Road 55 Dalling Road 65 King Street 321 King Street	 John Mullet Allwright John Trayling George Langstone Moore Arthur William Godfrey Arthur Clapson John Garton Jenkins Stanley Brooks Midwinter	

# PUBLIC HEALTH (MEAT) REGULATIONS, 1924.

In July the Minister of Health forwarded a draft of the proposed Public Health (Meat) Regulations, upon which I submitted a report to the Public Health Committee.

This report contained my views on the various sections and concluded with a general statement on the Regulations which I herewith set out.

- "The adoption of the Regulations by the Ministry of Health will be a great step forward in regard to the cleanliness of food and the protection of the public. There is no doubt that the public would suffer more from the way in which meat is handled, were it not for the fact that it is cooked before consumption.
- "But there is much danger from foodstuffs other than meat which are eaten without the previous protection of cooking, such as salads, fruit, etc.
- "There are also other foods which are cooked in bulk and subsequently handled and exposed for sale in shops and on stalls in open streets, such as fried fish, cockles, whelks, winkles, etc.
- "It is as important that these other foodstuffs should be subject, to at least, as careful supervision in its handling and distribution, as meat."

The Regulations are based on the recommendations of the Departmental Committee on Meat Inspection and are designed to secure more adequate inspection of animals slaughtered in this country and improvements in the handling, transport and distribution of meat.

I append the Regulations as made by the Minister of Health.

# PUBLIC HEALTH, ENGLAND. MEAT.

THE PUBLIC HEALTH (MEAT) REGULATIONS, 1924, DATED DECEMBER 20, 1924, MADE BY THE MINISTER OF HEALTH UNDER THE PUBLIC HEALTH (REGULATIONS AS TO FOOD) ACT, 1907 (7 Edw. 7. c. 32).

The Minister of Health, in pursuance of his powers under the Public Health (Regulations as to Food) Act, 1907, and of all other powers enabling him in that behalf hereby makes the following Regulations:—

#### PART I.—GENERAL.

- 1. These Regulations may be cited as the Public Health (Meat) Regulations, 1924, and shall come into operation on the 1st day of April, 1925.
- 2.—(1) In these Regulations, unless the context otherwise requires—
  - "The Minister" means the Minister of Health;

- "Local Authority" means the Common Council of the City of London, the Council of a Metropolitan Borough, the Council of a Municipal Borough or other Urban District, the Council of a Rural District or the Council of the Isles of Scilly;
- "Medical Officer of Health" includes any person temporarily acting in that capacity;
- "Inspector" means the Medical Officer of Health or any other Officer of a Local Authority, having under the Acts relating to Public Health or any Local Act power to inspect and examine meat intended for the food of man;
- "Meat" means the flesh of cattle, swine, sheep, or goats, including bacon and ham and edible offal and fat, which is sold or intended for sale for human consumption, and "animal" means any animal from which meat is derived;
- "Slaughter-house" means such part of a slaughter-house, as defined in Section 4 of the Public Health Act, 1875, (a) as is used for the slaughtering of animals or the dressing or hanging of carcases for human consumption;
- "Stall" includes any stall barrow or vehicle from which meat is offered for sale in a street or other open space or in any market place;
- "Room" includes a shop cellar passage or other space forming the whole or part of a building other than a slaughter-house as above defined;
- "Vehicle" includes a railway or other van or waggon and a ship or barge but does not include any separate compartment thereof in which meat is not being conveyed.
- (2) The Interpretation Act, 1889, (a) applies to the interpretation of these Regulations as it applies to the interpretation of an Act of Parliament.
- 3. The Local Authority shall enforce and execute the provisions of these Regulations in their district:

Provided that a Port Sanitary Authority shall also be an authority for enforcing and executing the provisions of Part VI within their district.

4. The Medical Officer of Health, the Sanitary Inspector and any other officer of a Local Authority or Port Sanitary Authority duly authorised by the Authority in writing shall for the purpose of ascertaining whether these Regulations are being observed have power at all reasonable times to enter and inspect any slaughter-house, room or other place and any stall or vehicle to which these Regulations apply.

- 5. A person shall, if so required, give to any officer of a Local Authority acting in the execution of these Regulations, all reasonable assistance in his power, and shall, in relation to anything within his knowledge, furnish any such officer with all information he may reasonably require for the purposes of these Regulations.
- 6. No person who is for the time being suffering from an infectious disease to which the Infectious Disease (Notification) Act, 1889, applies shall take part in the slaughtering of animals intended for human consumption or the handling of meat.

### PART II .- SLAUGHTER-HOUSES AND SLAUGHTERING.

- 7.—(1) This part of these Regulations shall not apply so as to interfere with the operation or effect of the Diseases of Animals Acts, 1894 to 1922, or of any order, licence or act of the Minister of Agriculture and Fisheries, made, granted or done thereunder.
- (2) Articles 8, 9, 10 and 11 of these Regulations shall not apply where the slaughter takes place in a slaughter-house under the management of a Local Authority.
- 8. A person shall not slaughter an animal for sale for human consumption unless he has not less than three hours before the time of slaughtering delivered or caused to be delivered to the Local Authority notice of the day and time and of the place on and at which the slaughtering will take place:

#### Provided that-

- (1) Where it is the regular practice in any slaughterhouse to slaughter animals at fixed times on fixed days and written notice of this practice has been given to the Local Authority special notice under this Article shall not be required to be given in respect of any animal slaughtered in accordance with such practice;
- (2) Where by reason of accidental injury, illness, or exposure to infection, it is necessary that an animal should be slaughtered without delay, the provisions of this Article shall be deemed to be satisfied if notice of the slaughter is given to the Local Authority as soon as reasonably possible, whether before or after the slaughtering takes place.
- 9. Where on the slaughter of an animal for sale for human consumption it appears that any part of the carcase or internal organs is or may be diseased or unsound the person by or on whose behalf the animal was slaughtered shall forthwith give notice of the fact to the Local Authority.
- 10. Except as hereinafter provided, the person by or on whose behalf an animal is slaughtered for sale for human

consumption, shall not cause or permit the carcase of the animal, including the mesentery and internal organs other than the stomach, intestines and bladder, to be removed from the place of slaughter until such carcase with its organs has been inspected, or its removal has been authorised, by an Inspector of the Local Authority:

#### Provided that-

- (1) This Article shall not apply in the case of a sheep or in the case of any animal in respect of whose slaughter special notice is not required to be given by reason of proviso (1) to Article 8, unless some part of the carcase or organs appears to be diseased or unsound;
- (2) The removal may in any case take place at the expiration of three hours from the time of slaughter or six hours from the delivery of any notice relating thereto under Article 8 or 9 whichever time may be later, save that if such time falls between 7 p.m. on one day and 7 a.m on the next day, the removal shall not take place before 7 a.m.;
- (3) Where the animal was slaughtered by reason of accidental injury and the place of slaughter is unsuitable for the retention of the carcase, the carcase and organs may be removed to some convenient place, but the notice required to be given under Article 8 shall be given to the Local Authority in whose district that place is situated and Article 8 of this Article shall have effect as if that place were substituted for the place of slaughter.
- 11.—(1) The notices to be given to the Local Authority under Articles 8 and 9 of these Regulations shall be given to such officer and delivered at such address as the Local Authority may direct and in the absence of any such direction shall be given to the Medical Officer of Health and delivered at his office. The effect of any direction given under this paragraph shall be communicated to the occupier of every slaughter-house in the district and published in one or more local newspapers circulated within the district.
- (2) Any such notice, other than a notice of regular slaughtering, may be given orally; and any such notice may be served by letter addressed to the proper officer and delivered at, or prepaid and posted to, the proper address, and in the case of a notice sent by post shall for the purposes of these Regulations be deemed to have been delivered at the time at which it would have been delivered in the ordinary course of the postal service.
- 12.—(1) No gut-scraping, tripe-cleaning, manufacture or preparation of articles of food for man or for animals,

household washing or work of any nature, other than is involved in the slaughter and the dressing of carcases, shall be carried on in any slaughter-house.

- (2) No articles shall be stored in any slaughter-house except such implements, appliances, receptacles and other articles as are required for the slaughter of animals and processes directly connected therewith, including the dressing, hanging and storage of carcases, the cleansing of the slaughter-house and the removal of refuse.
- 13. No person shall blow or inflate with his breath, or in any other manner likely to cause infection or contamination, the carcase or any part of the carcase of any animal slaughtered for human consumption.
- 14. No person shall use a slaughter-house for the slaughter of any animal which previous to slaughter is not intended for human consumption.

### PART III .- MEAT MARKING.

- 15.—(1) Where a Local Authority show to the satisfaction of the Minister that they have made suitable arrangements (including the appointment or employment of competent Inspectors) for the inspection of animals at the time of slaughter, the Minister may, on the application of the Authority, and subject to such conditions, if any, as he may impose, authorise them to use for the purpose and in the manner specified in these Regulations a distinctive mark of a design approved by him and so devised as to indicate the identity of the Local Authority and of the Inspector using the mark.
- (2) An Inspector of a Local Authority whose mark has been approved by the Minister shall not affix or impress the same to or on any part of the carcase of an animal slaughtered for the food of man unless he has inspected the whole carcase with the organs in position and such part has appeared to him to be free from disease, sound, wholesome and fit for the food of man.
- (3) The Local Authority and their Inspectors shall comply with any directions given by the Minister as to the use of such mark, and they shall not cause the mark to be affixed to or impressed on any carcase except at the request or with the consent of the person having possession of the carcase at the time of inspection.
- (4) The Minister may at any time revoke his authorisation of the use of a mark or his approval of a mark adopted as aforesaid.
- 16. No Local Authority shall use or permit to be used a mark indicating that the carcase or any part of the carcase of an animal for human consumption has been inspected

unless they have been authorised and such mark has been approved by the Minister and such authorisation and approval have not been revoked.

- 17. No person other than an Inspector of a Local Authority authorised as aforesaid shall make use of a mark adopted and approved as aforesaid, and no person shall make use of any mark so resembling a mark adopted and approved as aforesaid as to be calculated to deceive.
- 18.—(1) The Local Authority may determine the charges (if any) to be made for the marking of carcases either according to the number of carcases marked or on such other basis as they may think fit, but the charge so determined shall not in any case exceed a sum calculated at the rate of one shilling for each carcase or part of a carcase marked.
- (2) Any such charge shall be recoverable summarily as a civil debt from the person requesting or consenting to the marking.

### PART IV .- STALLS.

- 19. A person selling meat or exposing or offering meat for sale from any stall—
  - (a) shall keep his name and address legibly painted or inscribed on such stall in some conspicuous position;
  - (b) shall cause such stall (if not placed in an enclosed and covered market place) to be suitably covered over and to be screened at the sides and back thereof in such a manner as to prevent mud, filth or other contaminating substance being splashed or blown from the ground upon any meat on the stall;
  - (c) shall cause every counter, slab, vessel or other article on or in which meat is placed for sale and all knives and other implements used in connection with the meat to be thoroughly cleansed after use and to be kept at all times in a cleanly condition;
  - (d) shall take all such steps as may be reasonably necessary to guard against the contamination of the meat by flies;
  - (e) shall not place or cause to be placed any meat on, or within eighteen inches of the ground or floor, unless the meat is placed in a closed cupboard or other adequately protected space not less than nine inches from the ground or floor;
  - (f) shall cause all trimmings, refuse and rubbish to be placed in properly covered receptacles kept for the purpose apart from any meat intended for sale.

# PART V .- SHOPS, STORES, ETC.

- 20.—(1) The occupier of any room in which any meat is sold or exposed for sale or deposited for the purpose of sale or of preparation for sale or with a view to future sale, and any person who knowingly lets any room or suffers any room to be occupied for such purpose shall cause the following provisions to be complied with:—
  - (a) No urinal, water-closet, earth-closet, privy, ashpit or other like sanitary convenience shall be within such room or shall communicate directly therewith, or shall be otherwise so placed that offensive odours therefrom can penetrate to such room;
  - (b) No cistern for supply water to such room shall be in direct communication with or directly discharge into any such sanitary convenince;
  - (c) No drain or pipe for carrying off fæcal or sewage matter shall have any inlet or opening within such room unless it is efficiently trapped;
  - (d) No such room shall be used as a sleeping place, and, so far as may be reasonably necessary to prevent risk of the infection or contamination of any such meat as aforesaid, no sleeping place shall communicate directly with such room;
  - (e) Except in the case of a room used as a cold store, adequate means of ventilation shall be provided.
- (2) The occupier of any such room shall not cause or suffer any refuse or filth whether solid or liquid to be deposited or to accumulate therein except so far as may be reasonably necessary for the proper carrying on of the trade or business.
- (3) Such occupier shall cause the walls and ceiling of such room to be whitewashed, cleansed or purified as often as may be necessary to keep them in a proper state.
- (4) Such occupier and every other person engaged in such room shall observe due cleanliness in regard to such room and all articles, apparatus and utensils therein.
  - (5) The occupier of any such room—
    - (a) shall take all such steps as may be reasonably necessary to guard against the contamination of the meat therein by flies and shall cause the meat to be so placed as to prevent mud, filth or other contaminating substance being splashed or blown thereon;
    - (b) shall not permit any gut-scraping, tripe-cleaning or household washing to be carried on therein;
    - (c) shall cause every counter, slab, vessel or other article on or in which meat is placed for sale and all knives and other implements used in connection with the

- meat to be thoroughly cleansed after use and to be kept at all times in a cleanly condition;
- (d) shall cause all trimmings, refuse and rubbish to be placed in properly covered receptacles kept for the purpose apart from any meat intended for sale.

## PART VI.—TRANSPORT AND HANDLING.

- 21.—(1) Every person who conveys or causes to be conveyed any meat in a vehicle—
  - (a) shall cause to be kept clean the inside and covering of the vehicle, the receptacles in which the meat is placed, and such parts of any slings or other implements or apparatus used for loading or unloading as come into contact with the meat or its covering; and
  - (b) if the vehicle is open at the top, back, or sides, or if any other commodity is being conveyed therein, shall cause the meat to be adequately protected by means of a clean cloth or other suitable material;
  - (c) shall not permit any live animal to be conveyed in the vehicle at the same time as meat.
- (2) A person engaged in the handling or transport of meat—
  - (a) shall not permit any part of the meat to come into contact with the ground; and
  - (b) shall take such other precautions as are reasonably necessary to prevent the exposure of the meat to contamination.
- (3) Every person who employs a person to carry meat in or about a market or other place in which meat is sold by wholesale or in or about any place wholly or mainly used for the storage of meat before it is distributed to retailers, shall cause such person while so occupied to wear, and every person while so occupied shall wear, a clean and washable head covering and overall.
- (4) This Article shall not apply to any meat which is packed in hampers or other strongly constructed and impervious cases or is adequately wrapped in jute or some other stout fabric.
  - Given under the Official Seal of the Minister of Health this Twentieth day of December, in the year One thousand nine hundred and twenty-four.

The Dairies, Milkshops, Ice Cream Vendors, Restaurants and Food Shops have been kept under systematic inspection by your Inspectors.

The following tables gives a summary of the work relating to milk premises, slaughterhouses and ice cream premises:—

	NU:	MBER O	F PREMI	SES.	Number	Number	Number
PREMISES.	On register at end of 1923	Added in 1924	Re- moved in 1924	On register at end of 1924	of inspec- ions 1924	Number of notices 1924	of prose- cutions 1924
Milk premises	84	2	-	86	1667	7	nil
Slaughter-houses	7	-	in <del>a</del> n	7	277	6	nil
Ice Cream premises	129	4	2	131	135		nil

Markets.—There are three markets in the Borough, situate in Bradmore Lane, Approach Road and Norland Road. These markets have been the subject of much inspection during the year, both by the District Inspector concerned and the Inspector carrying out the requirements of the Food and Drugs Acts.

Many of the stalls in the Railway Approach Market are constructed so as to form lock-ups when business for the day is finished and thereby provide a means of storage for all unsold food.

In other instances, Bradmore and Norland Markets, wheel-barrows form the structure, and these are wheeled to and from the markets, morning and evening, the food being stored under various conditions.

During the year a special inspection was made of the premises where the food was stored, and as a result it was found necessary, in eleven instances, to serve notices in regard to the insanitary conditions. Food was being stored in coach-houses, sheds, and in vans and barrows, under arches, whilst in other cases proper storage had been provided.

In my previous Annual Report I said:—"Whilst certain regulations exist regarding the sale and preparation for sale of food it is obvious that further powers are necessary for the control of the sale of food, perhaps more particularly in the case of markets. Such powers should be sufficient as to prevent the contamination of dust, flies, &c."

The Public Health (Meat) Regulations, 1924, set out in the previous pages of this report, provide that a person selling or exposing or offering meat for sale from any stall or shop shall take all such steps as may be reasonably necessary to guard against the contamination of the meat by flies and shall cause the meat to be so placed as to prevent mud, filth or other contaminating substance being splashed or blown thereon.

Fried-fish Shops.—The fried-fish shops are regularly and constantly inspected for the purpose of ensuring conformity

with the Bye-laws made by the London County Council. At the same time a careful look-out is kept on the condition of the fish.

Bakehouses.—The 50 bakehouses in use in the Borough have been regularly inspected during the year. Twenty-six notices were served relating to various defects, 26 being complied with.

It was not necessary to apply for any summonses against Bakers whose bakehouses were found not to be in conformity with the Act, as they readily complied with the requirements of the notices served.

The following is a list of bakehouses in the Borough:-

No. 1 DIS	orkici.	Unido tel dist
Address.		Name.
†* Cadby Hall, Hammersmith R	oad	J. Lyons & Co.
* 7 Shepherd's Bush Road		A. Janus
* 13 Shepherd's Bush Green	***	Not in use
* 60 Richmond Road	***	S. N. Lockwood
* 1 Masbro Road	***	W. A. Macklen
* 67 Ditto	***	G. Teague
* 87 Ditto	***	Not in use
* 6 Beaconsfield Terrace		Not in use
†* 98 Blythe Road	***	A. Schofield
* 47 Milson Road		W. Warwick
No. 2 DIS	TRICT.	
† 65 Bridge Road		Exors. of Mary Luff
2 Crisp Road		Mrs. C. R. Gottig
* 82 Great Church Lane		E. C. Dunn
† Great Church Lane		Fullers, Ltd.
†* 134 Shepherd's Bush Road		F. Olliver
†* 84 Ditto * 94 Ditto		F. R. Ries
* 94 Ditto		Not in use
* 75 Blythe Road		F. Olliver
* 31 Goldhawk Road		G. Burnett
† 213 Hammersmith Road		F. Hayes
88 Queen Street		Not in use
No. 3 DIS	TRICT.	
* 77 Brackenbury Road		A. Gardner
† 1 The Grove		Palmer's Stores, Ltd.
* 33 Glenthorne Road	***	E. Winstone
†* 1 Aldensley Road		H. A. Roberts, Ltd.
†* 85 The Grove		E. Homan
* 17 Kilmarsh Road		Not in use
70 Glenthorne Road	***	Ditto
24 Bradmore Park Road	**	T. Miller
28 King Street (rear of)		L. E. Jolly
* Underground	11	
1 Factory		

+ Factory

# No. 4 DISTRICT.

	Address.				Name.
	6 Black Lion La	ne			B. Samels
	3 Ditto				G. Banham
++ :	102 Dalling Road				P. Blum
*	192 Ditto				Not in use
+ 1	Eyot Gardens				J. R. Chibnail, Ltd.
+ :	258 King Street			***	Miller & Son
+ :	316 Ditto	***	***	***	B. Samels
+ :	348 Ditto	***	***	***	W. Langrebe
+*	1 Lamington Str	reet			H. A. Roberts, Ltd.
1	0 Upper Mall				Not in use
	St. Peters Road				E. Marlow
		No.	5 DIST	RICT.	
	28 Askew Road			***	G. Ingle
	74 Ditto			***	J. Auer
†*	167 Ditto	***	***		F. Keber
+	104 Ditto	***	***		D. Miller
	21 Ditto	***		***	Not in use
4	1 Gayford Road	***	***	•••	Ditto
			6 DIST	RICT.	
	4 Goldhawk Road	1	***	***	H. Smith
	106 Ditto	***	***	***	M. Lofcovitch
		***	***	**	C. Owens
	242 Ditto	***	***	***	S. T. Stoneman
+*	5 Uxbridge Road		***	***	B. Samels
	25 Ditto 55 Melina Road	***	***	***	A. B. Hemmings
	o Menna Road	•••		***	J. Tame
		No.	7 DIST	RICT.	
	26 Uxbridge Roa	d	***		E. Jackson
+* 5		***	***	***	H. Bamford
† 5	110 Ditto	•••			G. M. Carless
		No.	8 DIST	RICT.	
4* 5	31 Harrow Road				H. T. Rogers
	9 St. Ann's Road		***	***	E. Tomlin
+* :	6 North Pole Ros	ad	***		H. Allinson
†* : †* !					
†* : †* :	2 Norland Road		***	***	N. A. Carrington
†* : ; †* : ;					N. A. Carrington Not in use Ditto

<sup>\*</sup> Underground 7 Factory

#### UNSOUND FOOD.

During the year no seizure was made.

A bath chap was brought to the Town Hall which was found to be diseased (tubercular) and was submitted to the magistrate at the West London Police Court, who condemned same and gave an order for its destruction.

The summons issued was dismissed, the defendants having proved to the satisfaction of the Court that they had no knowledge of the same being diseased and that every precaution was taken at the works to guard against the distribution of diseased or unsound meat.

The following is a list of unsound food condemned during the year:—

Commod	ity.			Condition.	Result.
One box of Dabs (5 sto	ne)			Decomposed	Surrendered
One trunk Cat fish (11				ditto	ditto
Half case of Herrings				ditto	ditto
m				ditto	ditto
One box of Roe	***			ditto	ditto
39 boxes of Pears				ditto	ditto
6 stone small Skate wi	ngs			ditto	ditto
35 crates of Asparagus				ditto	ditto
1 case of Fish				ditto	ditto
1 box Haddock (6 ston	e)			ditto	ditto
l box Mackerel	,,			ditto	ditto
1 kit of Skate Cuttings				ditto	ditto
10 barrels of Potatoes	***		***	ditto	ditto
19 boats of cherries				Tainted with paraffin.	ditto
l box Mackerel				Decomposed	ditto
l small box Mackerel				ditto	ditto
l box of Hake				ditto	ditto
33 sacks of Potatoes				ditto	ditto
1 barrel of Crabs				ditto	ditto
stone of Skate				ditto	ditto
8 stone of Plaice				ditto	ditto
l trunk of Haddock	***		***	ditto	ditto
boxes of Haddock Fi	llets			ditto	ditto
53 lbs. of Rabbits				ditto	ditto
I box of Rabbits	***	***		ditto	ditto
1 crate of Turkeys (2 c	wt. 1 qr	. 3 11	b.)	ditto	ditto

# PREVALENCE AND CONTROL OVER INFECTIOUS DISEASES.

Infectious Diseases.—There were, omitting tuberculosis, 760 cases reported as due to notifiable infectious diseases in the Borough, against 935 in the previous year. The number of cases of Tuberculosis notified was 296 against 274 in the

previous year. There were also reported 1,969 cases of infectious diseases that were not notifiable, against 840 in the previous year; 1,361 of these were Measles, 297 Whooping Cough, and 311 Chicken Pox.

TABLE IV.

Cases of Infectious Disease notified during the year 1924.

		N	UMBER	OF C	ASES N	TOTIFI	ED		noti	otal ca fied in cality (	each-	ASES RE-
NOTIFIABLE DISEASE	-			AtA	ges_Y	Teurs			of th	he Dist	rict)	CAS
NOTIFIABLE DISEASE	At all Ages	Under 1	1 & under 5 Years	5 & under 15 Years	15 & under 25 Years	25 & under 45 Years	45 & under 65 Years	65 and upwards	North	Centre	South	TOTAL CASES RE-
Smallpox				1							**	.,
Cholera (C) Plague (P) Diphtheria (including			**	**		**					**	
Membranous Croup)	267	6	83	149	15	12	2		150	86	31	262
drysipelas	35	1	1	4	1	8	16	4	21	6	8	30
carlet Fever	243	3	71	136	18	15		- 44	127	75	41	235
Cyphus Fever				**					1 .:	**	*:	1 "
Interic Fever Relapsing Fever (R)	6		**	2	2			2	4	1	1	5
Continued Fever (C)			1.	100						4.0	**	
uerperal Fever	12				4	8			2	8	2	19
Perebro-Spinal Meningitis	7	2		2	3	++			3	4		7
Polio-myelitis	5		5	**	**				3	2		3
Encephalitis Lethargica	13	**	2	4	5	1	1		7	5	1 5	9 8
Ophthalmia Neonatorum	16	16	13	0.0	56	95	48	6	123	81	30	56
Pulmonary Tuberculosis	234	144	12	25	10	11	8		36	18	8	28
Other forms of Tuberculosis	62	4		100	1		0	**	00	10		4.0
	154	2	31	19	12	41	36	iii	83	46	25	5.5
folorio	1					1				1		
Oysentery	1	1				1				1		1
rench Fever					**					74		-
			-		-	-	-	-	-		-	-
TOTALS	1056	34	209	358	126	193	111	25	567	337	152	707

Deaths from the Seven Principal Zymotic Diseases.—The total number of deaths of residents registered from the seven principal zymotic diseases was 88, against 71 in the previous year. The deaths of residents last year from these diseases were equal to 53 per 1,000 of the total deaths of resident registered and were at the rate of 0.7 deaths per 1,000 persons living.

The following table shows the deaths of residents registered from the seven principal zymotic diseases which occurred in the ten years, 1915 to 1924.

Year,	Smallpox.	Measles.	Scarlet Fever.	Diphtheria and Membranous Croup.	Whooping Cough.	Enteric Fever.	Distribora and Cholera.	Total.
1915	0	47	14	14	27	2	55	159
1916	0	27	4	15	10	1	47	104
1917	0	39	1	11	12	6	45	114
1918	0	44	3	6	28	4	31	116
1919	0	9	2	19	10	1	69	110
1920	0	16	2 7	35	12	1	35	106
1921	0	0	16	24	10	3	73	126
1922	0	36	11	49	40	4	18	158
1923	0	6	2	20	10	2	31	71
1924	0	35	4	17	16	1	15	88
Average ast 10 yrs.	0	26	6	21	18	3	41	115

It will be seen from the preceding table that the total number of deaths from these zymotic diseases last year was 27 below the average number registered in the last ten years.

Smallpox.—No case of Smallpox was notified in the Borough during the year, against no case in the previous year.

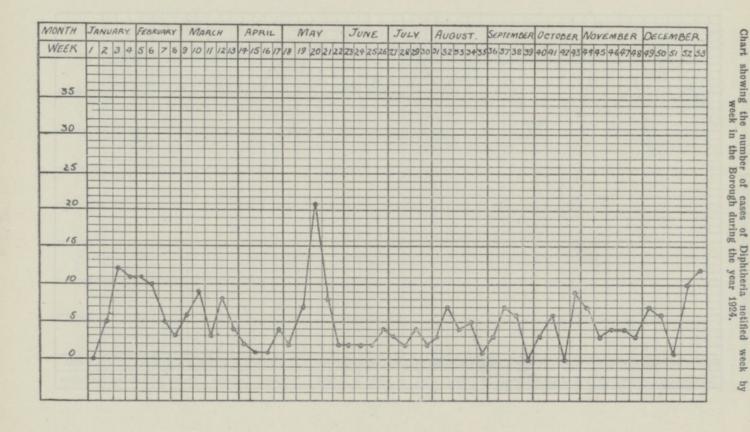
Cholera.—No case was reported as due to Cholera, against no case in the previous year.

Plague.—No case was reported as due to Plague, against no case in the previous year.

Diphtheria and Diphtheritic Membranous Croup.—Two hundred and sixty-seven cases were reported as due to Diphtheria or Diphtheritic Membranous Croup against 233 cases in the previous year. Two hundred and sixty-two cases were treated at the Isolation Hospitals and 5 at the homes of the patients. Seventeen deaths were registered. The mortality rate on the cases reported was 6.1 per cent. The cases were fairly evenly distributed throughout the Borough, and only in a few instances was it possible to determine accurately the source of infection.

Anti-toxin.—During the year a supply of Anti-toxin was kept in the Public Health Department for the use of Medical Practitioners attending patients residing in the Borough. All the Medical men in the Borough were again informed by circular letter that supplies of Anti-toxin could be obtained at the Town Hall. Although more use was made of this than in the past, it was only to a small extent. This is to be regretted, as I am convinced some of the mortality from this disease would be avoided if greater use were made of the free supply of Anti-toxin supplied by the Council.

No difficulty was experienced in removing cases to Hospital, the accommodation available being adequate for the number of cases.



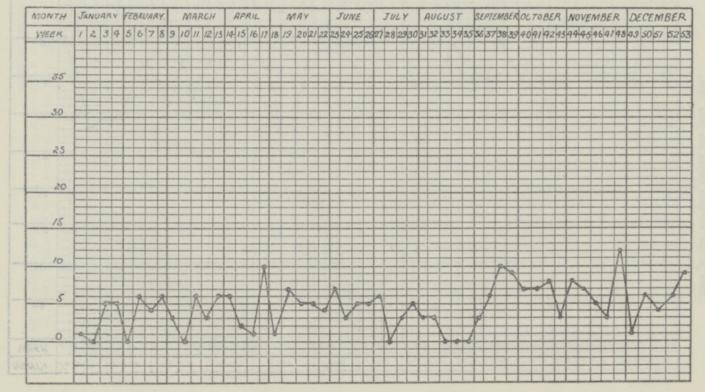


Chart showing the number of cases of Scarlet Fever notified week by week in the Borough during the year 1924.

Scarlet Fever.—Two hundred and forty-three cases were notified as due to Scarlet Fever, against 245 in the previous year. Two hundred and thirty-five cases were treated at the Isolation Hospitals, and 8 at the homes of the patients. Four deaths were registered. The mortality rate on the cases reported was 1.6 per cent.

Enteric Fever.—Six cases were reported as due to Enteric Fever, against 14 cases in the previous year. Four cases were treated at the Isolation Hospitals of the Metropolitan Asylums Board, one at St. Marylebone Infirmary, and one at the home of the patient. One death was registered. The mortality rate on the cases reported was 16.6 per cent.

Erysipelas.—Thirty-five cases were reported as due to Erysipelas, against 35 cases in the previous year. Eleven cases were treated at the homes of the patients, 10 at Fulham Infirmary, 11 at St. Marylebone Infirmary, one at the City of Westminster Infirmary, one at St. Bartholomew's Hospital and one at the University College Hospital. Five deaths were registered. The mortality rate on the cases reported was 14.3 per cent.

Typhus Fever.—No case was reported as due to Typhus Fever, against no case in the previous year.

Relapsing Fever.—No case was reported as due to Relapsing Fever, against no case in the previous year.

Continued Fever.—No case was reported as due to Continued Fever, against no case in the previous year.

Puerperal Fever.—Twelve cases were reported as due to Puerperal Fever, against 13 cases in the previous year. Three of the cases were treated at Kensington Infirmary, 3 at the Fulham Infirmary, 1 at St. Marylebone Hospital, and 1 at St. George's Hospital. Four deaths were registered. The mortality rate on the cases reported was 33.3 per cent.

Cerebro-Spinal Meningitis.—Seven cases of Cerebro-Spinal Meningitis were reported against 3 in the previous year. Four cases were removed to the Metropolitan Asylums Board Hospitals and 1 to St. Marylebone Hospital. Three deaths were registered. The mortality rate on the cases reported was 42.8 per cent.

Acute Polio-myelitis.—Five cases were reported as due to Polio-myelitis, against 4 cases in the previous year. Two cases were treated at the Hospital for Sick Children, 1 at the Metropolitan Asylums Board Hospital and 2 at home. No death was registered.

Encephalitis Lethargica.—Thirteen cases were reported as due to Encephalitis Lethargica, against 6 in the previous year. Two cases were treated at St. Marylebone Infirmary, 1 at St. George's Hospital, 2 at the West London Hospital,

2 at the Fulham Infirmary, 1 at the Hospital for Sick Children and 4 at home. Two deaths were registered.

Ophthalmia Neonatorum.—Sixteen cases were reported as due to Ophthalmia Neonatorum, against 28 in the previous year. Five cases were treated at the Metropolitan Asylums Board Hospital, 2 at Fulham Infirmary, 1 at St. Marylebone Infirmary and 8 at home. In the majority of cases treated at home arrangements were made for a nurse to attend the patient.

Anthrax.—No case of Anthrax was notified during the year, against no case in the previous year.

Hydrophobia.—No case was reported as due to Hydrophobia, as against no case in the previous year.

Rabies Order, 1919.—No case of Rabies in dogs occurred in the Borough.

The following Chart shows the number of Deaths from Measles per 100,000 inhabitants, 1905-1924.

YEAR	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924
	1																_			
90																				
30																				
70					70													-		
50	-																			
50						55														
10			99						40		40									
										33			39	79						
10				-			28.													
0	25							23				23						27		26
0	\//\/			12												12				
	V///														7				5	
0	VIII							V///					\///						11/1	

Glanders.—No case was reported as due to Glanders, as against no case in the previous year.

Measles and German Measles.—Thirteen hundred and sixtyone cases of Measles and German Measles were notified against 347 in the previous year.

Twelve hundred and seventy-four cases were treated at the homes of the patients, and 87 in the Hospitals of the Metropolitan Asylums Board. Thirty-four deaths were registered.

Whooping Cough.—Two hundred and ninety-seven cases of Whooping Cough were reported, against 236 in the previous year.

Sixteen deaths were registered. As this is not a notifiable disease, the mortality rate on the cases reported is of no value, as doubtless a very large number of cases occurred which were not known of in the Public Health Department.

I have received, as heretofore, information as to cases from the Head Teachers of the Schools of the London County Council.

The homes of the patients were visited by your Inspectors, and the parents advised as to the precautions that should be taken.

The following Chart shows the number of Deaths from Whooping-Cough per 100,000 inhabitants, 1905-1924.

	Loady	200 100	1,000	1000	inin.	2	1.017	1010	lined	101	0.7			1.00		1000	
	1905/5	06/30	8050	1909	19101.	7// 13//	24313	1914	1915	1916 V	317	918 19	19 1920	1921	1922	1923	1924
	1						1										
60																	
							1						-				
1														1			
50																	
	45		-														
	77777																
10	VIIA	-	-	_		-	-	-		-		-	-				
	VIIIA		1														
30	VIIIA		1	33			33								30		
,,,	1////	1	+	1///		+	14/	1			-	-	-		7777		-
	V///A	777	7	V///		25	· V///	1	23			24	1		(///		
20	VIIIA	V///	4	V///	711	1//	V///	1	7777		-	77/			(///		
	V///A	17 ///	1.	77//	VIII	///	VIII	16	7///		1	1//			7777		
	VIIIX	///X///	15	<i>}////</i>	Y///X	1/1/3	V///	7777	<i>\\\\\</i>		1			1	(///		
0	V///X/	[[[]]	XIII	<i>Y///</i>	Y///X/	[[8]]	78///	X///	1///		10	1/1	10				22
	VIIIN	//X//	X///	X///A	\///\\	///\	X///	X////	V///\}	17/1	1/1	1/12	7777	137	1///	7	///
	VIIIX	//X//	X///	V///	Y///X	//X///	X///	V///	Y///X	IIX	1/1	11/3/	AH	X///			
0	VIIIN	///X///	N///	1///	VIIIX	//X//	/V///	Y////	V///X	1//X	1/1/	MAN	1/1///	2///	11/1	////	

Chicken Pox.—Three hundred and eleven cases of Chicken Pox were reported, against 363 in the previous year.

In every case the premises were visited by one of your Inspectors and the parents advised as to the precautions necessary.

Pneumonia.—One hundred and fifty-four cases of Pneumonia, 45 Influenzal Pneumonia and 109 Primary Pneumonia, were notified during the year. The majority of the patients were treated at home.

Fifty-two cases were treated at various institutions.

All cases were made the subject of enquiry by your lady Sanitary Inspector or Health Visitors, and in many cases it was found necessary to arrange for a nurse to visit and attend to the wants of the patients. This was done by arrangement with the Hammersmith District Nursing Association.

One hundred and fifty-three deaths were registered.

From the above figures it may be assumed that a good many cases have occurred, of which no information has been received by your Public Health Department.

Malaria.—One case was reported, against no case in the previous year. The case was treated at home.

Dysentery.—One case of Dysentery was reported, against no case in the previous year. The case was treated at St. Bartholomew's Hospital.

Trench Fever.—No case of Trench Fever was reported, against no case in the previous year.

Influenza.—During the year 56 deaths from Influenza occurred, as compared with 18 in the previous year.

### ANTI-RABIC TREATMENT.

In October, 1924, the Minister of Health in view of the disappearance of the disease rabies in animals in England and Wales, no case having occurred since December, 1921, decided that special arrangements for anti-rabic treatment were no longer necessary.

He accordingly issued for the information of Authorities a revised memorandum on the procedure recommended to be followed in the event of persons being bitten by dogs suspected or ascertained to be rabid.

1. When persons are bitten by dogs in areas in which rabies in dogs is suspected, the wound should be treated as soon as possible with undiluted carbolic acid, undiluted Izal or similar disinfectant. The disinfectant should be

allowed to come into contact with all parts of the wound, and should then be washed out with water or dilute disinfectant. If no disinfectant of the kind is available, the wound should be thoroughly washed and irrigated with hot or cold water. Where it is possible to get the immediate services of a doctor the treatment should be placed in his hands.

- 2. If the diagnosis of rabies in the dog is confirmed, or notice is received from the Minister of Health that the case should be regarded as one of rabies for purposes of treatment, the person bitten should be urged to secure specific antirabic treatment as soon as possible, no matter what local treatment has been applied to the bite. Arrangements for anti-rabic treatment should be made through the Medical Officer of Health of the district in which the patient resides.
- 3. Persons bitten by stray dogs or by dogs exhibiting unusual behaviour should at once inform the police with a view of the necessary inquiries being made. By arrangement with the Ministry of Agriculture and Fisheries, the names of all persons known to officers of that Department or to the police to have been bitten by dogs suspected of being rabid will be communicated at once to the Medical Officer of Health of the district in which the bitten persons live.
- 4. As soon as information reaches the Medical Officer of Health that a person in his district has been bitten by a dog suspected of being rabid, the facts of the case should at once be reported to the Senior Medical Officer, Med. I, Ministry of Health, with the following particulars:—

(a) Name, age and address of the person bitten;

(b) Date when bitten;

(c) Severity of the bite and part of the body bitten; the report should state whether the bite penetrated through the skin and caused bleeding;

(d) Name and address of owner of the dog, or other information which will enable the dog to be identified;

(e) Whether rabies in the dog has been diagnosed locally.

5. On receipt of information from the Medical Officer of Health the Minister of Health will ascertain the opinion of the Veterinary Officers of the Ministry of Agriculture and Fisheries on the facts in their possession regarding the suspected dog, and will inform the Medical Officer of Health if the Veterinary Officers advise that the dog is to be regarded as rabid. Should it happen, for reasons which are unavoidable, that a definite diagnosis cannot be furnished without delay, the Ministry of Agriculture have undertaken to advise the Minister of Health whether the symptoms in the dog are sufficiently suspicious to justify anti-rabic treatment before the confirmatory diagnosis is available, and this information will similarly be forwarded to the Medical Officer of Health. The Medical Officer of Health should await

instructions from the Minister of Health before sending patients away for treatment.

6. The following is a brief summary of the principles which should guide a Medical Officer of Health in recommending specific anti-rabic treatment:—

(a) There should be evidence that the bite penetrated

through the skin and caused bleeding.

- (b) Treatment should be strongly urged on all persons who have been bitten by animals which are, in the view of the Ministry of Agriculture and Fisheries, affected with Rabies.
- (c) As regards persons bitten by animals captured and killed or kept under observation, in which there is no clinical or post-mortem evidence of Rabies, treatment should as a rule be deprecated as unnecessary.
- (d) As regards the treatment of persons bitten by untraced stray dogs or other animals, distinction should be made between—
  - (i) Cases occurring in areas scheduled by the Ministry of Agriculture and Fisheries where presumably there is greater risk of the dog being rabid: to cases in this category treatment should be recommended.
  - (ii) Those occurring outside such areas: here treatment might be suggested but not pressed.
- 7. When, after consideration of all the circumstances of the case, and after communicating with the Minister of Health as above advised, the Medical Officer of Health is satisfied that anti-rabic treatment is essential, he should advise the patient accordingly. Arrangements for anti-rabic treatment may be made with Professor Dudgeon, Department of Pathology, St. Thomas's Hospital, Westminster Bridge, London, S.E.1.

It should be understood that the hospital does not, except by special arrangement, provide intern accommodation for patients undergoing anti-rabic treatment.

- 8. The Medical Officer of Health should follow the same procedure in dealing with cases occurring in any H.M. Services of which he receives notification.
- 9. In any case where the Medical Officer of Health is satisfied that a person who needs anti-rabic treatment cannot pay for the treatment or stay in London at his own expense for the two or three weeks necessary for the completion of the course, he should at once represent the matter to the Council or to the Chairman of the Council in order that the funds required may be provided by the Council. The Minister of Health is prepared to sanction reasonable expenditure incurred by the Council for this purpose.
- 10. Attention may again be drawn to the importance of securing all possible expedition in the above procedure.

#### TABULAR STATEMENT—ZYMOTIC DISEASES.

The following table shows the number of cases that were reported as due to the undermentioned diseases during the years 1915 to 1924.

_																										
Year,	Smallpox.	Scarlet Fever,	Diphtheria or Diphtheritic Croup.	Typhus Fever.	Enteric Fever.	Simple Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera,	Erysipelas.	Plague	Chickenpox. a	Measles. b a	Whooping Cough, a	Cerebro-Spinal Fever.	Anthrax.	Glanders,	Hydrophobia.	Ophthalmia Neonatorum.	Acute Polio-Myelitis.	Encephalitis Lethargica.	Pneumonia, c	Malaria. c	Dysentery. c	Trench Fever. c	Total.
1915	0	405	163	0	19	0	0	5	0	90	0	369	619	227	18	0	0	0	23	8	0	0	0	0	0	1946
1916	0	209	209	0	6	0	0	8	0	47	0	291	1418	195	3	0	0	0	40	2	0	0	0	0	0	2428
1917	0	139	151	0	20	0	0	0	0	52	0	245	2153	199	10	0	0	0	44	5	0	0	0	0	0	3018
1918	0	177	146	0	15	0	0	8	0	38	0	492	1664	327	11	0	0	0	36	0	0	0	0	0	0	2914
1919	1	185	238	0	9	0	-0	6	0	74	0	188	786	150	6	1	0	0	36	8	3	141	95	3	0	1927
1920	0	726	380	0	8	0	0	20	0	57	0	168	763	225	4	1	0	0	53	6	4	165	20	9	1	2610
1921	0	1358	443	0	4	1	0	12	0	51	0	193	38	101	2	0	0	0	44	3	5	151	6	3	0	2415
1922	0	496	410	0	14	1	0	9	0	39	0	224	1284	357	4	0	0	0	35	0	1	154	4	0	0	3062
1923	-0	245	233	0	14	0	0	13	0	31	0	363	347	136	3	0	0	0	28	4	6	84	0	0	0	1507
1924	0	243	267	0	6	0	0	12	0	35	0	311	1361	297	7	0	0	0	16	5	13	154	1	1	0	2729
Average for 10 years.	0	418	267	0	12	0	0	9	0	51	0	284	1043	221	7	0	0	0	36	4	3	85	13	2	0	2455

a Not Notifiable.

b Notifiable during the years 1916—1919.

c Notifiable from 1st March, 1919.

Wrong Diagnosis.—Forty-three cases of Infectious disease were removed to the Hospitals of the Metropolitan Asylums Board and subsequently returned home in consequence of the patients being found not to be suffering from the disease stated on the certificates, or any other notifiable disease.

This number referred to 26 cases of Diphtheria, 13 cases of Scarlet Fever, 2 cases of Enteric Fever, and 2 cases of Cerebro Spinal Meningitis.

Cleansing of Verminous persons.—The Medicinal Baths in Scotts Road, Shepherds Bush, provide for the treatment of cases of Scabies, Impetigo and the cleansing of verminous persons, etc.

Negotiations were completed and arrangements made with the London County Council for the cleansing of school children to commence as and from the 1st April, 1924.

It was not possible for all Hammersmith school children to be sent to Scotts Road, a large number of them being treated at the Kensington Medicinal Baths and at the London County Council Station in Seddlescombe Road, Fulham. This was due to the fact that the London County Council had previously entered into an agreement with Kensington prior to the opening of the Hammersmith Baths.

This agreement comes to an end in March next when it is hoped to arrange for all Hammersmith children to be dealt with at your Council's station.

I append figures showing the numbers dealt with during the year.

School	Children-							
	Scabies		***	***	***	***	***	81
	Impetigo				***			45
	Verminous	Cases	***		***			1421
Adult	9-							
	Scabies		***					4
	Impetigo	***	***	***	***	***	***	4
	Verminous			***	***	***	***	28
	Other cond	itions		***			***	4

The County Council pay the sum of two shillings in respect of each child cleansed, except in cases of scabies or impetigo in which case the payment is at the rate of 1s. for each bath given.

The amounts received from the London County Council during the year was £142 2s. 0d. in respect of cleansings and £6 6s. 0d. in respect to scabies cases and impetigo.

Tuberculosis.—Two hundred and ninety-six cases of Tuberculosis were reported during the year; two hundred and thirty-four of which were Pulmonary and sixty-two being other forms of Tuberculosis, against two hundred and seventy-four cases in the previous year.

The following table shows the number of notifications received during the year:—

	-					No	otif	ica	tio	ns	on I	Form	"A"				1			ions or	n	Num Notifie on For	cation	ns
Age Periods.	I	N	um	be	ro	f I	rin	na	ry	No	tific	ation	8,	T	otal				nary	To	tal	Poor		
Pulmonary,		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 npwards	72	Prim, Not.	Not	ifica- is on n "A"	Under 5	to	100	Total Prim. Not.	tion	ifica- s on "B"	Law Institu- tions	Sar	
Pulmonary.  Males Pulmonary, Females Non-Pulmonary, Males Non-Pulmonary, Females	1	1 7	01 03	5	12	16	22	16	10	4		111 to 89 27 26 /	253	141 \ 139 30 34 /	344		. 01		3	4	9	24 13 1	117 (61 19 15/	2

In all cases notified the nurses visited and obtained all the necessary information. Any insanitary conditions found to exist were referred to the Sanitary Inspectors.

One hundred and forty-seven deaths from Pulmonary Tuberculosis were registered, against 127 in the previous year, representing a death-rate of 1.1 per 1,000, compared with 0.9 in 1923.

The notification of cases of Tuberculosis by medical practitioners is, unfortunately, not carried out as required by the Regulations, that is within 48 hours of the same coming to their knowledge.

There are undoubtedly many difficulties attending the notification of this disease, but the efforts of Local Authorities, and the money spent in combating this disease are to a large extent rendered nugatory.

I append figures for the years 1920, 1921, 1922, 1923 and 1924, showing the interval between notification and death of tuberculous persons.

1920. 1921. 1922. 1923. 1924. 1. Total number of deaths from Tuberculosis in the 157 162 145 170 Borough ... ... 173 2. The number of cases noti-11 17 11 fied at death 10 3. The number of cases notified within one month of 21 death (excluding above) ... 26 29 20 23 4. The number of cases notified within three months 28 29 20 18 20 of death (excluding above) 5. The number of cases notified within six months of 16 9 16 13 16 death (excluding above)...

I submit a report on the work carried out at the Tuberculosis Dispensary.

Tuberculosis Officer's Report for the Year 1924.

During the year sessions have been held regularly at the Dispensary for the examination and treatment of patients at the following times:—

Mondays, 10 a.m.

Tuesdays, 1.30 p.m.

Tuesdays, 6 p.m.

Thursdays, 6 p.m.

Saturdays, 10 a.m.

Women and Children. School Children. Men. Women. School Children.

Special appointments are held daily to suit the convenience of those who cannot attend at the stated hours and in cases where the consultation is likely to be a lengthy one.

The notification of fresh cases of Tuberculosis in the Borough during the year numbered 296, an increase of 22 as compared with 1923. At the end of 1924 there were 1,426 persons living in the Borough whose names were entered in the register as suffering with the disease. Some of these had been notified many years before and had been well and free from symptoms for years subsequent to notification.

It has been the practice to remove from the register the names of persons who were found to be showing no evidence of the disease, had been free from symptoms for a long period and who expressed a wish that that should be done. Such procedure had been carried out in a limited number of cases but until the end of 1924 there was no official sanction for it. At the end of the year the Ministry of Health signified that "denotification" was desirable under certain provisos which the Minister laid down. By this means the record of the prevalence of the disease in the Borough can be kept up to date.

It is anticipated that during the year 1925 the register will be considerably curtailed. Thereby a large amount of home visitation, where such is not required, will be obviated and it will be possible to concentrate the energies of the Dispensary Staff upon a closer supervision of persons who are actually suffering with active disease.

In addition many households in which the idea that a member is affected with tuberculosis is scouted will be glad to know that supervision is no longer necessary.

The record of the year's work of the Dispensary is as follows:—

#### NEW PATIENTS.

During the year 598 persons attended for examination for the first time. Of these 216 were under the age of fifteen and 382 were adults. Males and females attended in almost equal numbers, viz., 302 and 296.

Of the total, 215 were referred to the Dispensary by local Practitioners for the purpose of consultation, while 196 were "contacts" of persons suffering with Tuberculosis and 57 were discharged ex-Service men who attended for reports on the instruction of the Ministry of Pensions.

#### DIAGNOSIS.

Found to have	Pulmonary	Tuberculosi	8	 152
Found to have	other forms	of Tubercul	osis	 40
Showing no ev	idence of Tu	berculosis		 406

#### PATIENTS FROM PREVIOUS YEARS.

Six hundred and twenty-five persons who had attended the Dispensary in previous years presented themselves during 1924. Of these, 403 were adults, and included 119 ex-Service men, while 222 were children. Some of these made regular visits for the purpose of treatment. The majority, however, came for examination or for advice only, at varying intervals of time.

#### TOTAL ATTENDANCES AND EXAMINATIONS.

The total attendances of persons for the purpose of examination, observation or treatment, numbered 3,510, and physical examinations were carried out in 1,505 instances, i.e., in 43 per cent. of the total attendances. The number of insured persons under domiciliary treatment with Dispensary supervision on 31st December is estimated at 317.

#### SPUTUM EXAMINATIONS.

Five hundred and seventy-four specimens of sputum and other pathological products were examined bacteriologically. One hundred and five showed the presence of Tubercle Bacilli, while 469 proved negative.

#### INSTITUTIONAL TREATMENT.

The admission of patients into Institutions (Sanatoria, Tuberculosis Colonies, Hospitals and Homes), under the London County Council's Scheme, numbered 196.

Others have entered Infirmaries through the agency of the Guardians, and Convalescent Homes through that of the local Invalid Children's Aid Association,

#### CLINICAL REPORTS.

To	the London County Council, number	red	 542
To	the Ministry of Pensions		 135
To	the local War Pensions Committee		 149
To	General Practitioners and Hospitals		 334

#### HOME VISITATION.

The Tuberculosis Officer made 167 visits to homes of patients for the purpose of examination, and investigation of the hom conditions. In addition he met local practitioners in consultation at the homes of patients on 28 occasions.

The Nurses visit the tuberculous population on notification and thereafter as far as possible at intervals of six months or less, as may appear advisable. During the year 3,156 such visits were made. This figure shows a decrease of some 200 visits on the figures for 1923 and is to be explained by the occurrence of illness of a member of the Staff.

In addition to the ordinary health visits paid by them the Dispensary Nurses undertake duties in connection with the investigation of the social circumstances of the households in which the patients belong. The result of these enquiries are submitted to the Tuberculosis Care Committee and form the basis upon which the Committee makes its decision in the assessment of individual cases. During the year 184 Home-Enquiry Schedules were submitted to the Committee.

#### TUBERCULOSIS CARE COMMITTEE.

This Committee is formed of representatives of the following bodies: the Borough Council, the County Council, the Board of Guardians, the Red Cross Society, the United Services Fund, the Charity Organisation, the Invalid Children's Aid Association, the Labour Exchange, and the local Medical Practitioners, and meets on the first and third Wednesday in each month for the purpose of considering how patients and their households can best be helped and the amount of contribution, if any, which should be collected towards the cost of institutional treatment under the London County Council Tuberculosis Scheme.

The Committee met on 21 occasions during the year.

There were submitted by the staff 210 applications for residential treatment, an increase of 41 compared with 1923. The Committee decided in 131 of these cases that no payment should be required in respect of such treatment. In the remaining 69, assessments of varying amounts were made. In 52 instances, reconsideration of these assessments was rendered necessary at subsequent meetings, mainly by changes in the family circumstances.

Fifty-eight patients were referred for help to other agencies including the local branch of the British Red Cross Society, Charity Organisation Society, and the Invalid Children's Aid Association.

Collection of payments, on behalf of the London County Council, has been made by the Dispensary to the amount of £229 1s. 6d.

These monies are handed over to the Borough Accountant who transfers them to the County Council.

The staff consist of the Tuberculosis Officer, Dr. Govan, two Nurses, Dispenser and Clerk, and Secretary (part time) to the After Care Committee.

There are no residential institutions in the Borough with beds available for the treatment of Pulmonary Tuberculosis.

Close co-operation exists between the West London Hospital to which the Dispensary is affiliated.

Cases of non-tuberculous chest diseases and "surgical tuberculosis" are admitted if a bed is available for surgical procedure.

Admissions to Brompton and other special hospitals for diagnosis and treatment are arranged through the London County Council.

Children found to be suffering with tonsils and adenoids, bad dental conditions, and minor ailments are reported to the District Organiser of the London County Council, who arranges for the attendance of the children at the School Clinic for treatment.

Certain medical practitioners send reports to the Tuberculosis Officer on patients under domiciliary treatment at three monthly intervals.

The majority fail to do so, but in these cases no difficulty has been experienced in securing the attendance at the Dispensary of the patients themselves for examination purposes.

No special methods of diagnosis are in use. Doubtful cases, upon which a further opinion is required necessitating more elaborate investigation than the equipment of the Dispensary will permit, are referred to the West London Hospital or to the London County Council for admission to one of its institutions.

Arrangements exist for the provision of Finsen Light treatment, and artificial pneumothorax.

Tuberculin is not administered.

No opinion can be expressed on the relative value of the various forms of treatment.

The Council has made provision in the estimates for the expenditure for Dental treatment for tuberculous patients.

No definite arrangements for the provision of nursing exists, but advantage is taken of the services of the District Nurses' Association in cases where home nursing is required.

Patients requiring surgical apparatus are referred to one of the Voluntary Associations.

No provision has been found practicable for the finding of employment for T. B. patients.

Shelters are not provided by the Borough Council.

No special points as regards occupation have been noted.

The usual maximum incidence is found in the poorer and more populated parts of the Borough.

Housing difficulties still exist, and overcrowding obtains in many instances.

# PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1912 and 1921.

In December the Minister of Health issued new Regulations to be known as the Public Health (Tuberculosis) Regulations, 1924.

# I.—Notifications under the Regulations.

The Minister of Health referred to the Public Health (Tuberculosis) Regulations, 1912 and 1921, and stated that as a result of the examination of the annual summaries of notifications of tuberculosis received during the year 1923, which have been furnished to this Department by the Medical Officers of Health of Counties, County Boroughs, and Metropolitan Boroughs, he desired to direct the attention of Local Authorities to the following matters with a view to securing a greater measure of uniformity in the procedure of notification and a stricter compliance with the requirements of the Regulations in each district.

1. It appears that in some instances formal notification of tuberculosis under the Regulations has not been made until after the death of the patient has occurred. He pointed out that, in notifying a case of tuberculosis, the medical attendant is required to certify that the person is suffering from tuberculosis, and he is advised that a notification which is made after the notifying practitioner is aware of the death of the patient is not a notification duly made and transmitted under the Regulations, or one which entitles the practitioner to the payment of the prescribed fee. The Minister therefore does not consider that such a notification should be regarded as a formal notification under the Regulations, and for statistical

purposes the subject of such notification should be counted as a case of tuberculosis which has come to knowledge otherwise than by notification under the Regulations.

- 2. Some difficulty appears to have arisen in connection with the notification of cases in which tuberculosis is diagnosed by a Tuberculosis Officer, and there is evidence that, in some areas, cases referred to a Tuberculosis Officer by a general practitioner have escaped notification owing to each doctor leaving it to the other to notify. In the Minister's view the Tuberculosis Officer should immediately notify each case in which he diagnoses tuberculosis, unless he ascertains definitely that the practitioner has notified, or will notify, the case.
- 3. It is observed that occasionally new cases of tuber-culosis are notified to the Medical Officer of Health on Form C or Form D. In this connection attention is directed to Article VII. of the Regulations of 1912, and that, if a notification on either Form C or Form D is received by the Medical Officer of Health of a district in respect of a person whose usual place of residence is within the district, but whose case has not previously been notified to him, he should forward to the Medical Officer of the Institution from whom the notification was received a copy of Form A for primary notification of the case, at the same time informing him of the circumstances and asking that a notification on that Form may be furnished.
- 4. As a result of a comparison made between the totals of the notifications of tuberculosis, as furnished by District Medical Officers of Health to the Registrar-General during 1923 on the Weekly Returns of Infectious Diseases, and the total of the primary notifications as furnished to this Office in the Annual Returns of the Medical Officers of Health of Counties, County Boroughs and Metropolitan Boroughs, it has been found that in many areas the two sets of figures show a wide divergence. It should be understood by District Medical Officers of Health that, so far as tuberculosis is concerned, whilst the weekly return required to be furnished to the County Medical Officer of Health under Article XI (3) of the Regulations of 1912 should include a statement of every notification of tuberculosis received by the District Medical Officer of Health during the week, whether primary or duplicate, the figure to be entered in the Weekly Return to the Registrar-General should include only the Primary notifications of tuberculosis on Form A or Form B received during the week.
- 5. The Minister desired to take the opportunity of impressing upon Local Authorities the responsibility which attaches

to them for seeing that the requirements of the Regulations are fully observed in their districts, and stated that where (as in the case of a death certified as due to tuberculosis of a person who had not previously been notified under the Regulations) there is prima facie evidence of neglect to notify on the part of the medical attendant, immediate steps should be taken by the Local Authority to obtain an explanation from the medical attendant as to the circumstances under which formal notification under the Regulations was not made. If the explanation is not satisfactory, it should be borne in mind that the Local Authority have power to institute proceedings for the recovery of a penalty under Section 1 (3) of the Public Health Act, 1896, in cases of wilful neglect or refusal to carry out the Regulations; and it appears to the Minister that it may even be desirable to proceed to a prosecution in one or two cases of the kind where the circumstances warrant such action in order to secure the objects of the Regulations.

6. The attention of the Local Authority is drawn to the second paragraph on page 2 of Circular 196, issued on the 21st April, 1921, in which it was pointed out that it is open to a Local Authority to obtain from the Registrar of Births and Deaths, on payment of the prescribed fees, returns of the particulars registered concerning deaths from tuberculosis. Early information as to deaths from tuberculosis, which could be obtained by means of weekly returns from the Registrars, is not only requisite for the purpose of the revision of the Register of Notifications, which the District Medical Officer of Health is required to keep under Article XI (2) of the Regulations of 1912, but affords valuable information to the Medical Officer of Health in regard to cases which may not have been notified, e.g., for the purposes of taking any necessary steps for the disinfection of premises, and of inquiry into the reasons for the absence of a notification.

# II.—Keeping of Registers and Census of Cases.

1. It is the duty of the Medical Officer of Health under Article 4 of the Regulations of 1921 to remove from his Register of Notifications the entries relating to notifications in respect of persons who have, to his knowledge, died or have ceased permanently to reside within the district. In order, however, that the Register may contain as accurate a list as possible of the cases of tuberculosis in the district, it is desirable that there should also be removed from the Register those cases in which after notification (a) the diagnosis of tuberculosis is agreed not to be established, or (b) the patient in due course attains a condition in which he may be regarded as cured of the disease.

As regards (a), no case should be removed from the Register except with the assent of the practitioner by whom it was

notified, unless the practitioner is no longer available for consultation owing to his having died or left the district.

As regards (b), the Minister is advised that the removal of a case from the Register as "cured" is justified in pulmonary cases in which for a period of five years there have been no symptoms of tuberculosis and no signs of tuberculous disease, except such as are compatible with a completely healed lesion, and sputum, if present, has been free from tubercle bacilli; and in non-pulmonary cases in which three years have elapsed without any signs or symptoms of active disease.

In cases where the notified person has come under the supervision of the dispensary organisation of the County, County Borough, or Metropolitan Borough in which he resides, information should be available in the dispensary records as to cases of "cure," and also as to cases which, subject to the concurrence of the notifying practitioner, should be deleted from the Register as non-tuberculous. In county areas the Minister has no doubt that County Councils and Tuberculosis Joint Committees will be prepared to arrange for their Tuberculosis Officers to communicate such information to the District Medical Officers of Health, as well as any information to the District Medical Officers of Health, as well as any information which may be in the possession of the Tuberculosis Officers as to deaths or removals from the district of persons who have been under supervision (whether or not accompanied by domiciliary or other active treatment) under the tuberculosis scheme.

In the case of other notified persons, such inquiries as may be practicable should from time to time be made of the notifying practitioner with a view to keeping the Register up-todate.

2. Apart from cases formally notified under the Regulations of 1912, a District Medical Officer of Health may become aware of some new cases of tuberculosis in his district from other sources, e.g., from death returns of cases not notified, notices received from the Medical Officers of Health of other districts as to transfers to the district, etc. Although particulars of such cases do not, strictly, form part of the Register of Notifications, the Minister considers that to complete the record of existing cases of tuberculosis it is desirable that particulars of such cases should be entered in the Register in similar form to the particulars of notified cases, but specially distinguished as having come to the notice of the Medical Officer of Health otherwise than by notification under the Regulations. Particulars of such cases should also be included, similarly distinguished, in the weekly returns

furnished to the County Medical Officer of Health under Article XI (3) of the Regulations of 1912 and in the quarterly returns referred to in the succeeding paragraph of this Circular. If a notification under the Regulations is, however, subsequently received in respect of such a case, it should thereafter be classed as a notified case, unless the notification is one improperly furnished, e.g., a notification furnished after the notifying practitioner is aware of the death of the patient.

3. The Minister has decided to require that in the areas of administrative Counties the District Medical Officers of Health should furnish quarterly to the County Medical Officer of Health the particulars as to numbers of cases in their Registers which are set out in Article 2 of the enclosed Regulations made by the Minister in supplementation of the Regulations of 1912 and 1921. Considerable difficulty has in the past been experienced in obtaining reliable data for estimating the numbers of tuberculous persons in the country and its various divisions. Such information is of much value for administrative as well as statistical purposes, and the new Regulations have been made with a view to securing that the needful information is readily available. In regard to the particulars referred to in paragraph (c) of Article 2, these are included in order to afford the County Medical Officer an opportunity of communicating to the District Medical Officer of Health any supplementary information available to him as to cases requiring to be removed from the Register.

As regards the requirement in Article 2 that separate figures be given for pulmonary and non-pulmonary cases, it is desirable that all tuberculosis of the respiratory system should be placed in the former class; and accordingly tuberculous pleurisy, and tuberculosis of the larynx, nose, throat, bronchial glands and mediastinal glands, should be classed under the head of pulmonary tuberculosis.

The Regulations will come into effect on the 1st January, 1925, and the first return to the County Medical Officer of Health will be that for the quarter ending 31st March, 1925. It will be appreciated that it is of much importance that every District Medical Officer of Health should at once undertake a careful scrutiny of his Register and make any necessary deletions in order to ensure the accuracy of the Register when the first return is made. A similar examination of their Registers should also be carried out by the Medical Officers of Health of County Boroughs, in order that the Registers in all areas may be rendered as accurate as possible. It is proposed to ask the Medical Officer of Health of each County Borough to furnish the Minister at the end of each

year, commencing with the year 1925, with a return showing the number of notified cases of tuberculosis in the County Borough at the end of the year.

THE PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1924, DATED DECEMBER 18, 1924, MADE BY THE MINISTER OF HEALTH.

69,551.

Whereas by the Public Health (Tuberculosis) Regulations, 1912, (a) (hereinafter referred to as "the Regulations of 1912"), the Public Health (Notification of Infectious Disease) Regulations, 1918, (b) and the Public Health (Tuberculosis) Regulations, 1921, (c) Regulations were prescribed with a view to the treatment of persons affected with Tuberculosis, and for preventing the spread of the disease, and for the notification of the prescribed particulars of cases of the disease to the prescribed Medical Officer of Health;

And whereas it is expedient that the said Regulations should be amended in manner following:

Now, therefore, the Minister of Health, in the exercise of the powers conferred upon him by the several Statues in that behalf, hereby makes the following Regulations; that is to say:—

- 1. These Regulations may be cited as "The Public Health (Tuberculosis) Regulations, 1924", and shall come into operation on the 1st day of January, 1925, and shall be read as one with the Regulations of 1912 and the Public Health (Tuberculosis) Regulations, 1921.
- 2. Every Medical Officer of Health shall furnish the Medical Officer of Health of the Administrative County within which his District is situate, as soon as practicable after the end of each quarter, with a Statement, compiled from the Register of Notifications required to be kept by him by Article XI of the Regulations of 1912, and showing—
  - (a) The number of cases of tuberculosis on his register at the commencement of the quarter;
  - (b) The number of cases notified to him under the Regulations of 1912 for the first time during the quarter;
  - (c) The number of cases removed from the register during the quarter (giving the name and address of each such case, and the reason for such removal); and

(d) The number of cases remaining on the register at the end of the quarter.

Separate figures shall be given in each case for males and females, and for pulmonary and non-pulmonary cases.

3. In these Regulations, the expression "quarter" means each period of three months ending on the 31st day of March, the 30th day of June, the 30th day of September, or the 31st day of December, as the case may be.

Given under the Official Seal of the Minister of Health this Eighteenth day of December, in the year One thousand nine hundred and twenty-four.

### CANCER.

During the year the Ministry of Health issued three circulars known as Cancer II, Cancer III and Cancer IV, for the guidance of Local Authorities supplementing the information contained in the circular known as Cancer I and issued in August, 1923.

Cancer II relates to the effects of radium and X rays upon normal and cancerous tissues.

Cancer III relates to Cancer of the breast and the results of surgical operation in connection therewith.

Cancer IV is a review on the main lines which experimental Cancer research has followed in recent years and of the broad conclusions, negative as well as positive, which seem to be deducible up to now from the several branches of this work.

I do not consider it advisable to set out the whole of the circulars.

Cancer is not an incurable disease providing it is attended to in its earlier stages. Doctors are very often, in fact, in most cases, terribly handicapped by the reluctance of patients to seek early advice. Often the consultation of a doctor is delayed until the disease is too far advanced for treatment.

It is therefore imperative that a doctor be consulted, should any deviation from the normal health occur.

Cancer caused 222 deaths. Carcinoma was the form of Cancer to which 198 deaths were attributed; sarcoma and epithelioma were assigned cause of 9 deaths; 15 deaths were certified as due to cancer or malignant disease without further definition.

The parts of the body which were affected in each case are shown in the following table:—

## DEATHS FROM CANCER, 1924.

Parts affected.	S	Total.	
	Male.	Female.	1000
Buccal Cavity	12		12
Liver and Pancreas	16	10	26
Alimentary Canal	40	42	82
Female Genital Organs		25	25
Breast		23	23
Bone	4	1	5
Organs	33	16	49
Totals	105	117	222

# EXHUMATION AND RE-INTERMENT OF BODIES. St. Mary's Catholic Cemetery, Harrow Road.

During the year licences were granted by the Secretary of State for the exhumation and removal of the bodies of 10 persons from the catacombs or graves in St. Mary's Cemetery.

Three of the bodies were re-interred in St. Mary's Cemetery, Harrow Road, four were removed for re-interment in the Private Burial Grounds, Twyford Abbey, Middlesex, one to Genoa, British West Indies, one to the Irish Free State and one to Italy.

The following conditions were attached to the licences:-

- (1) That the removal be effected with due care and attention to decency early in the morning.
- (2) That freshly made ground lime be freely sprinkled over the coffin, the soil, or any matter that may be offensive.

In those cases where the remains were removed to other countries, it was required that they be placed in a lead lined shell which shall be hermetically sealed.

Whilst in other cases the remains were contained in well pitched shells and entirely surrounded by four inches of newly made vegetable charcoal in powder.

The work of removal and re-interment was carried out in accordance with the conditions and under the supervision of the Sanitary Inspector on my behalf.

### MATERNITY AND CHILD WELFARE.

The figures tabulated below, indicate in some measure the extent of the ground to be covered on the one hand, and on the other the success of the work accomplished in the interests of Maternity and Child Welfare :-

Number of Births registered during the year	2,199
Corrected Number of Births	2,399
These figures represent a Birth-rate per 1,000 of the popu-	
lation of the Borough of	17.9
Corrected Number of Deaths of Infants under one year, of	
whom 51 died under one week	173
Legitimate Infants—153, or 68 per 1,000 Births.	
Illegitimate Infants—20, or 148 per 1,000 Births.	
Infant Mortality Rate per 1,000 Births	72

The work undertaken under this heading in the Borough during the year 1924 falls into three categories:-

- 1. Activities directly initiated by the Borough Council:

  - (a) Provision of three Health Visitors, as in former years.
    (b) Provision of a Maternity Home.
    (c) Supply of Free Milk to necessitous Mothers and Young
  - (d) Treatment and Nursing of Children under School Age.
- 2. Activities of Voluntary Agencies in receipt of grantsin-aid from the Borough Council:
  - (a) Infant Welfare Centres.
  - (b) Day Nurseries.
- 3. Activities of independent Voluntary Agencies:
  - (a) Rescue Homes.
  - (b) Convalescent Treatment for Invalid Children.

Health Visitors.—Three Health Visitors were engaged, as in former years, in visits of enquiry to Births, Infant Deaths, cases of Ophthalmia Neonatorum, Puerperal Fever, and other diseases of mothers and young children; they have also taken an active part in the work of the Voluntary Infant Welfare Centres.

The visits paid are enumerated in detail below:-

First visits						2,078
Re-visits (under 1 year)	***					2,121
Re-visits (1 to 5 years)			***	***		1,225
Out and removals	***					2,027
Special visits		***	***	***	***	347
Ophthalmia	***	***	***	***	***	27
Puerperal Fever			***		***	12
Ante-natal, first visits	***	***	***		***	359
Ante-natal, re-visits	***	***	***	***	***	27
Visits to Stillbirths	***	+++	***		***	50
Visits to Infant Deaths			***	***	***	147
Cerebro Spinal Meningitis	***	***	***		***	2
Encephalitis Lethargica	***	***		***	***	12
Poliomyelitis		***	***			7
			ŋ	otal		8,441

Number of Consultations at Infant Welfare Centres,	
attended by Health Visitors	432
Number of Committee Meetings of Voluntary Associations	
attended	50
Number of Insanitary Conditions reported by Health Visitors and dealt with by Sanitary Inspectors	65

The feeding of the 2,078 infants visited was found to be as follows:—

Breast-feeding	 	***	***	1,836
Artificial feeding	 ***	***	***	170
Mixed feeding	 			72

Every effort is made by the Health Visitors to encourage mothers to breast-feed their infants, and also to induce them to attend the Consultations at the Infant Welfare Centres, so that both mother and child may be kept under observation during the most critical months of the child's life.

The following table gives the number of births and deaths of infants and the rate per 1,000 births during the past 19 years, the year of the appointment of the first Health Visitor:—

Year.	Births.	Deaths of Infants.	Deaths of Infants per 1000 births
1906	3112	430	138
1907	3029	362	117
1908	3204	383	120
1909	2995	360	120
1910	2906	329	99
1911	2929	434	146
1912	2880	259	90
1913	2951	314	103
1914	2935	276	94
1915	2708	277	102
1916	2605	222	85
1917	2278	251	110
1918	2014	210	104
1919	2296	228	99
1920	3312	219	66
1921	2779	245	88
1922	2758	196	71
1923	2701	173	64
1924	2399	173	72

It will be observed that the infant death-rate has increased from 64 to 72 per 1,000.

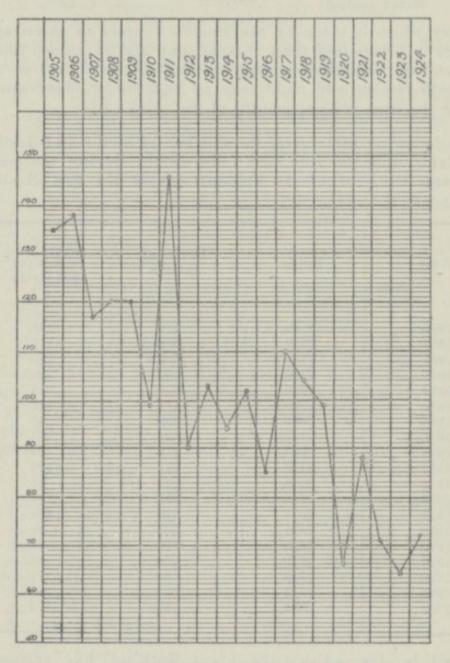
The activities of those who have been engaged in Infant Welfare Work continues to be carried on with enthusiasm by both voluntary and municipal workers.

Hammersmith is fourteenth on the list of the twenty-eight Boroughs, and the mortality rate is 3 per 1,000 higher than the average for the whole of London.

The infant mortality rates of the London Boroughs varies from 47 in Lewisham to 87 in Shoreditch.

The mortality figure for Hammersmith should at least be not higher than that for the whole of London.

The following Chart shows the Infantile Mortality rate for the years 1905-1924.



### MATERNAL MORTALITY.

During the year the Ministry of Health issued Circular No. 517, on Maternal Mortality, in which reference was made to the Report of Dr. Janet Campbell, Senior Medical Officer of the Ministry for Maternity and Child Welfare, on "Maternal Mortality associated with Childbearing," and

calling attention to the high mortality rate of maternal deaths.

The maternal mortality rate for the country as a whole is equivalent to about 4 maternal deaths for every 1,000 live births, and this figure has been fairly constant for more than 20 years. Although there has been some reduction in the deaths from puerperal septic infection since the passing of the Midwives Act, 1902, the deaths from other causes and accidents of childbirth have remained sufficiently numerous to prevent any lowering of the average total death rate.

The maternal deaths directly due to childbearing, though greatly to be deplored, represent only one aspect of the sacrifice of life and health which mothers may be called upon to make. The numbers, some 3,000 per annum, are relatively small compared with the total deaths at all ages and from all causes, but these numbers do not adequately portray the magnitude of the issue. In the first place these women are for the most part young and healthy and their loss involves exceptional domestic distress. Secondly, these deaths are indicative of an immense burden of suffering and ill-health among those women who are fortunate enough not to succumb to causes which prove fatal to others. Such deaths are necessarily associated with a large number of infant deaths before, during or shortly after birth, some at least of which might be prevented.

Since 1900, while the maternal mortality rate has remained almost stationary the infant mortality rate has fallen with astonishing rapidity from 154 to 69 (provisional figure for 1923) per 1,000 births. But the fall has occurred almost entirely subsequent to the first few weeks of life, while the still-birth rate and the death rate during the first month have been scarcely affected at all. This neo-natal death rate, which is intimately bound up with maternal death and injury, can be substantially reduced only by measures which are also likely to secure the most efficient practice of midwifery in the widest sense.

The reduction of this maternal and infant death rate is no insoluble problem. The number of deaths remains high mainly because, until recent years, little direct attention has been paid to this question and because even now no sufficiently systematic and vigorous measures are taken to prevent and treat puerperal disease. There must always be certain risks connected with childbearing, but under favourable conditions they should be relatively negligible. The mother should return to normal health and strength after her lyingin with a healthy baby which she is able to nurse herself. Unfortunately at the present time many women are left with some more or less disabling physical injury which causes ill-health and may lead to difficulty in, or be deterrent to.

subsequent confinements. The knowledge that such suffering frequently follows childbirth is bound to add materially to the natural anxiety with which most women regard an approaching confinement. It should be the aim of those responsible for maternity and child welfare services to relieve the prospective mother of unnecessary anxiety and to reduce the risk incurred.

Various suggestions for the prevention and remedy of the present high rate of maternal mortality are set out in the Report mentioned above, many of which are already in operation, though often only in partial degree. Special reference may be made to the following matters:—

Ante-natal supervision.—The most important desideratum of a maternity scheme is to secure the adequate professional care of the expectant mother, but this cannot be done unless (a) medical practitioners and midwives are willing to undertake this duty as an essential part of the treatment of every midwifery case which they are engaged to attend, and (b) every mother is willing to accept and follow the guidance of her professional attendant. Ante-natal supervision is required primarily to detect and provide timely treatment for abnormal conditions, but it has an almost equally important function, namely, the education of the expectant mother in the care of her own health and in the proper management of her baby when it is born.

Ante-natal supervision may be given partly through the doctor or midwife engaged by the patient but also by means of Maternity Centres established by the Local Authority. The number of such centres has gradually increased and there are now in this country some 560 ante-natal centres organised either independently or in connection with an infant welfare centre or maternity hospital. But there is a need for many more such centres if every expectant mother is to have opportunities for advice. The functions of a Maternity Centre provided by a Local Authority under the Maternity and Child Welfare Act, 1918, are limited. It is not set up to provide advice and treatment for all diseases of women. The staff of such a Centre are concerned only with the expectant mother and the mother who has been confined recently and requires post-natal advice. They should offer advice as to the hygiene of pregnancy and as to the remedy of the various minor ailments which may arise during this period; they should ascertain the condition and probable course of the pregnancy and whenever necessary refer necessitous patients for specialist advice and treatment. As regard other gynæcological ailments not directly associated with the pregnancy. the woman should be advised where to go, whom to consult, and how best she may obtain such special treatment as may be needed.

Maternity Beds.—All Local Authorities should make arrangements for the institutional treatment of complicated midwifery cases and for women whose homes are unfit for a confinement to take place therein. Provision for the isolation of infective cases is also necessary. Maternity homes may be established by the larger Authorities, such as the County and County Borough Councils, but the smaller Local Authorities are seldom justified in establishing separate homes and they should either combine with other Authorities to provide a joint institution or arrange to send patients to an institution elsewhere. Consulting obstetricians may be required in connection with maternity homes or to assist the general practitioner or the midwife.

Domestic midwifery and maternity nursing.—Steps should be taken by the Local Supervising Authorities under the Midwives Acts to promote a high standard of practice by midwives and to assist midwives to maintain their efficiency by attendance at post-certificate courses of instruction or otherwise. Maternity nursing by trained midwives should be encouraged whether a doctor is engaged or not, and the employment of unqualified "maternity nurses" should be controlled as far as practicable. It may be desirable to employ specially skilled nurses for the home nursing of complicated cases.

Investigations.—It is desirable that there should be an investigation in every area by a competent and experienced Medical Officer of all maternal deaths, and of all cases of puerperal fever and all still-births and neo-natal deaths, with a view to ascertaining and preventing the causes likely to lead to maternal or infant mortality.

Educational measures.—The Local Authority should take such means as may be practicable to create an informed and enlightened public opinion in regard to this question of maternal mortality, as no arrangements for prevention or treatment can be fully effective unless the intelligent support of those most directly concerned can be obtained.

The Minister suggested that the Medical Officer of Health should be instructed to report upon the steps necessary to provide an efficient maternity service in the area of the Authority, and intimated that he would be prepared to consider any proposals of the Local Authority for this purpose which may be submitted for his approval under the Maternity and Child Welfare Act, 1918.

In accordance with your instructions I submitted a report showing that with the exception of the supervision of Midwives and Maternity Homes (this work coming under the jurisdiction of the London County Council) the Scheme for Hammersmith included all the activities mentioned in the memorandum, but I suggested that it would be highly desirable to extend the work that was being carried out.

As a result the Committee requested me to submit a further report on the question of the appointment of additional Health Visitors.

This Report was submitted to the Committee in November, and contained a recommendation for increasing the number of Health Visitors.

In this connection I laid particular stress on the importance of ante-natal visiting which, at the present time it is not possible to carry out efficiently.

An examination of the records will show that over 50 per cent. of infant deaths occur in the first month of life, and of that number approximately 60 per cent. died in the first week

It is, therefore, apparent that the two questions of maternal mortality and infantile mortality must be dealt with as one problem.

Notification of pregnancy so that steps may be taken to advise expectant mothers, would very materially reduce both the maternal and infantile mortality of the first month and this would be reflected by an improvement in the later months.

The Committee, in view of the possibility of some drastic changes in the medical services in the country following the decision of the Royal Commission on National Health Insurance now sitting and its effect on maternity and child welfare, did not consider the time opportune to make any recommendation for the appointment of additional staff for Maternity and Child Welfare purposes.

Milk (Mothers and Children) Order, 1918-1919.—Under these orders the Council has continued to supply milk to necessitous cases, each case being investigated, especially as to the financial position, before a supply is granted.

The number of applications for free milk has averaged 19 per week during the year. The total expenditure during the year was approximately £275. The distribution of milk has entailed no increase of the administrative staff or additional expense to the Council.

The distribution of this free milk has been an inestimable boon, and has, without doubt, contributed very largely to the improved condition of the children generally.

By this means the Public Health Department and the Maternity and Infant Welfare Centres are able to keep in close contact with these cases, and at the same time mothers have been able to obtain a proper supply of milk for their children which they could not have done otherwise.

The arrangements whereby the Infant Welfare Centres are supplied with dried milk for distribution has been continued. The mothers attend the Centre and obtain their supplies on presenting an order issued from the Public Health Department, thus encouraging the mothers to attend the Centres where they can obtain advice both with regard to themselves and their children.

Maternity Home.—I append figures for the year of this report regarding the work of the Maternity Home.

The ante-natal clinic was held weekly by the Medical Supervisors: Dr. Butler and Dr. Fry.

## " PARKSIDE " MATERNITY HOME.

## PERIOD ENDING 31ST DECEMBER, 1924.

-		
(1)	Total Number of Cases admitted.	332.
(2)	Average duration of stay.	14 <sup>8</sup> days.
(3)	No. of Cases delivered by  (a) Midwives.  (b) Doctors.	318. 14.
(4)	No. of Cases in which Medical Assistance was sought by the Mid- wife with reasons for requiring assistance.	
	(a) Ante-natal.	All cases examined by Doctor. 6. Inductions following examination. 1 advanced Phthisis. 3 Albuminuria of pregnancy. 2 small flat pelvis.
	(b) During labour.	14. 2 shoulder presentations. 4 Occipito-posterior unreduced. 7 Secondary uterine enertia. 1 advanced heart disease. Doctor's own case.
	(c) After labour.	3. Collapse after 3rd stage. 1 P.P. Hæmorrhage. 1 Placenta weighed 33 lbs. 1 Eclamptic fits.
	(d) For infant.	2. 1 Fracture of Humerus.  1 Teratoma arising from sacrum.  Both sent to West London  Hospital.

<sup>(5)</sup> No. of Cases notified as Puerperal sepsis with result of treatment in each case.

- (6) No. of Cases in which temperature rose above 100.4 for 24 hours with rise of pulse rate.
- 2 due to inflammation of breasts. Home visited daily by physician.
- (7) No. of Cases notified as Ophthalmia Neonatorum with the result of treatment in each case.

NIL.

(8) No. of Cases of "Inflammation of the Eyes" however slight. NIL.

- (9) No. of Infants not entirely breastfed while in the Institutions with reasons why they were not brea tfed.
- 20. 4 Bottle Fed.
  - 2 Mother Phthisical.
    - 1 Mother Kidney disease and Mammary Abscess.
  - 1 Mother Mammary abscess.
  - Supplementary feeds, insufficient breast milk. (4 twins).
- (10) No of Maternal Deaths, with causes.
- 1. Severe A.P.H.
- (11) No. of Feetal deaths (stillborn or within 10 days of birth) and their causes and the result of the postmortem examination if possible.
- 12. 1 patient suffering from Phthisis Premature.
  - 1 patient suffering from Pleurisy Premature.
  - 1 patient suffering from Heart disease, premature.
  - 1 patient suffering from Albuminuria, premature.
  - 1 Hydraminos.
  - 1 Hydrocephalus and Spina Bifida.
  - 4 Premature 8 mths., 6 mths., 7½ mths., 6 mths.
  - 2 F.T. 1 macerated—both vertex presentation. Post-mortem not held.

VOLUNTARY WORK AIDED BY BOROUGH COUNCIL.

Infant Welfare Centres.—There are four Voluntary Societies for the promotion of Infant Welfare in the Borough, and in spite of difficulties these continued their good work during the year.

The Hammersmith Infant Welfare Centre, with its four branch Centres, had its full complement of activities, including Ante-natal Clinics, Infant Consultations and Weighings, and Mothers' Classes of Instruction.

The Women's League of Service, at its one Centre in the Borough, also held Ante-natal and Infant Consultations, and supplied dinners to expectant and nursing mothers at reduced rates.

A weekly Dental Clinic is held at this Centre.

The Latymer Road Mission Welfare Centre held two sessions weekly: infant consultations and weighings and mothers' classes. This Welfare Centre is on the borders of the Borough and serves both Kensington and Hammersmith.

The College Park Clinic was a branch of the Hammersmith Infant Welfare Centre, but is now carried on under the auspices of Presbyterian Church, Ponsard Road. Infant consultations are held weekly. This Centre also serves Willesden.

Day Nurseries.—Two Day Nurseries in the Borough—Princess Christian, the Latymer Road Mission Creche—were in great demand where mothers were compelled to work for the support of the family. These nurseries received grants-in-aid from the Council.

### INDEPENDENT VOLUNTARY AGENCIES.

Rescue Homes.—There were three Homes open in the Borough throughout the year for the reception of Unmarried Mothers and their Children; the total accommodation available for such cases was 37 beds, the confinements taking place at various institutions in the London area.

Convalescent Treatment of Invalid Children.—This work was carried on by the Invalid Children's Aid Association; the majority of children assisted are of school age, and a considerable number were sent to Convalescent Homes by the good offices of the Association during the year.

Treatment and Nursing of Children under School Age.—
The Council accepted financial responsibility for treatment at the School Clinic of children under five years of age. During the year the cases dealt with were as follows:—

Operations for To	nsils	and	Adenoids	 6
Minor Ailments				 18
Dental Treatment		***		 1
			Total	 25

In addition arrangements were made, as before, with the Hammersmith District Nursing Association for the services of a nurse when required, to ensure adequate attention in cases of Ophthalmia Neonatorum, Pneumonia and Measles.

## INFECTIOUS DISEASES OF MOTHERS AND CHILDREN UNDER FIVE YEARS OF AGE.

Statistics showing the incidence of all infectious diseases during the year are included in the general report, but in so

far as they relate particularly to diseases of parturient women and children under five years of age, are tabulated below:—

Disease.	No. of Cases Notified.	Previous Year.	No. of Cases Visited.	No. of Cases Nursed.	No. of Cases Re- moved Hospital.
Puerperal Fever Ophthalmia	12	13	12	-	12
Neonatorum Epidemic	16	28	16	6	8
Diarrhoea* Measles & German	15	31		-	-
Measles (under 5)† Whooping Cough	511	101	511	6	65
(under 5)† Poliomyelitis	173	47	173	-	22
(under 5)	5	3	5	-	3

<sup>\*</sup> Summer Diarrhæa.—As this is not a notifiable disease the figures available are those of deaths which were registered as having been due to this cause.

Ophthalmia Neonatorum.—The number of cases reported was 16, against 28 in the previous year. The analysis of the final reports received is as follows:—

	Cases.					Deaths.
enters	Treated.	Vision unim-	Vision Im-	Total Blind-		
Notified. At Home. Hos	In Hospital.	paired.	paired.	ness.		
16	8	8	14	2	-	-

All notified cases of diseases of parturient women and children under five years of age are visited immediately, and arrangements made for the attendance of a nurse where required.

Bacteriology.—The Bacteriological work is carried out by Dr. Elworthy at the West London Hospital, and I append figures with regard thereto.

Sputa from cases of suspected Tuberculosis is examined in the majority of cases by the Tuberculosis Officer, but in a few instances Dr. Elworthy carries out the examination.

<sup>†</sup> Not notifiable diseases.

The following bacteriological examinations were made on behalf of the Council:—

Material from cases of suspected Diphtheria— True Diphtheria bacillus isolated	71	
Negative results Blood from cases of suspected Fever—	465	536
Widal or Typhoid reaction obtained	1 5	
Sputa from cases of suspected Tuberculosis—	_	6
Tubercle bacillus found Tubercle bacillus not found	135 557	
Total examinations		1 234

Disinfection.—The following table shows the amount of disinfection carried out by your Council during the year; all bedding and articles of clothing, &c., being removed to the Council's Disinfecting Station, for the purpose of disinfection.

					Total		10,410
Sundries	***	***		***	***	***	336
Rooms				***		***	984
Articles	of	clothing	***				2,340
Rugs		***					783
Sheets							904
Blankets		***					1,778
Bolsters	***	***	***		***	***	436
Pillows		***	***				1,706
Mattress	es						690
Beds				***			453

## SANITARY ADMINISTRATION.

Staff.—There are nine male Sanitary Inspectors and one lady Sanitary Inspector.

Eight of the male Inspectors are employed as District Inspectors, being responsible for all matters excepting the taking of samples under the Sale of Food and Drugs Acts and the inspection of Ice Cream Vendors, for which the Special Inspector is responsible. The Special Inspector also inspects the Markets.

The Lady Inspector inspects Factories, &c., where females are employed, makes enquiries into cases of measles, whooping cough, chicken pox, cerebro-spinal meningitis, encephalitis lethargica, &c.

Increase of Rent and Mortgage Interest Restrictions Act, 1920-1923.—During the year forty-one applications were received for certificates under the above Act. In thirty-four cases the certificates were granted, five applications were refused, and two held over on request of applicant.

Nine certificates were granted to owners who had carried out the work specified satisfactorily, one being refused.

Rag Flock Act, 1911.—THE RAG FLOCK REGULATIONS, 1912.—No action was taken under these regulations during the year under review.

Public Mortuary.—During the year 348 bodies were removed to the Mortuary in Fulham Palace Road. There were 250 brought to the Mortuary by order of the Coroner, and 98 were received for accommodation and convenience of burial.

### HOUSING.

Housing and Town Planning.—During the year the housing conditions have not materially improved. The Housing Schemes of the County Council and Borough Council are in progress but no further action has been taken with regard to the Southern Housing Scheme.

Eighty-two Certificates were granted during the year, under Section 48 (2) of the Public Health (London) Act, 1891, with regard to newly erected houses having a proper and sufficient water supply; 42 on the housing estate of the Borough Council, and 40 in other parts of the Borough.

I regret it is necessary for me to refer to the great amount of overcrowding which exists throughout the Borough.

Since the War, 1,388 houses have been erected in the Borough, by the London County Council, the Hammersmith Borough Council and by private enterprise, for which Certificates have been granted (details as under).

### NEWLY ERECTED HOUSES.

Certificates granted with regard to water supply under Section 48 (Sub-sec. 2) of the Public Health (London) Act, 1891.

Year.	L.0	C. Este	ate. $H$ .	B.C. Este	ite. Pr	ivate Hor	1868.
1920		188		18		Nil	
1921		169		166		Nil	
1922		384		354		Nil	
1923		Nil		5		22	
1924	***	Nil		42	***	40	
	Totals	741		585	***	62	

The premises have provided accommodation for approximately 6,940 persons, but despite this fact overcrowding is very much in evidence.

At the moment of writing I am informed that there are 1,800 applications for houses still to be dealt with.

Cases of overcrowding are continually being brought to my notice, many of which are referred to the Housing Committee for consideration.

I append some of the cases met with during the year.

Man and wife and 9 children living in two rooms and scullery.

Man and wife and 4 children living in one room.

Man and wife and 7 children living in two basement rooms.

Five adults and five children living in two rooms.

Man and wife and 6 children living in two rooms.

Man and wife and 7 children living in two rooms.

Five adults and five children living in three rooms. (One adult suffering from tuberculosis.)

Four adults and seven children living in three rooms.

(One adult suffering from tuberculosis.)

Man and wife and 6 children living in one room.

Man and wife and 5 children living in one room.

As I have already said in previous reports, overcrowding is probably the greatest factor in the propagation of all infectious diseases.

If the Housing conditions were ideal it is probable that all our infectious diseases would be very materially lessened and chronic infections such as Tuberculosis disappear.

I find that the London County Council spend approximately £136,000 a year in dealing with Tuberculosis and the Metropolitan Asylums Board about £1,200,000 in the treatment of infectious diseases.

Better housing is the first step towards a healthier nation and a reduction of the expenditure of such vast sums of money in the prevention and treatment of disease.

## STATISTICS.—Year ended 31st December, 1924.

#### I .- GENERAL

3	Estimated population	 	 134,200
(2)	General death-rate	 	 12.4
(3)	Death-rate from tuberculosis	 100	 1.3
(4)	Infantile mortality	 16.07	79

(5) Number of dwelling-houses of all classes (esti-	
mated)	18,56
(estimated)	12,000
(estimated) (7) Number of new working-class houses erected	85
2.—Unfit Dwelling-houses. 1.—Inspection.	
(1) Total number of dwelling-houses inspected for Housing defects (under Public Health or Housing Acts)	C 405
inspected and recorded under the Hous- ing (Inspection of District) Regulations,	6,487
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habi-	199
(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 habita-	1
II.—Remedy of defects without service of formal not	1,996
Number of defective dwelling-houses rendered	nces.
fit in consequence of informal action by the Local Authority or their officers	Nil
III.—Action under Statutory Powers.	
(A) Proceedings under Section 28 of the Housing, Town Planning, &c., Act, 1919—	
(1) Number of dwelling-houses in respect of which notices were served requiring	
repairs (2) Number of dwelling-houses which were rendered fit—	Nil
(a) By owners (b) By Local Authority in default	Nil
(3) Number of dwelling-houses in respect of	Nil
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	2,730

(2) Number of dwelling-houses in which defects remedied—*	
(a) By owners (b) By Local Authority in default of owners	2,894
(C) Proceedings under Section 17 and 18 of the Housing, Town Planning, &c., Act, 1909—	
<ul><li>(1) Number of representations made with a view to the making of Closing Orders</li><li>(2) Number of dwelling-houses in respect of</li></ul>	1
which Closing Orders were made (3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered	1
fit (4) Number of dwelling-houses in respect of	Nil
which demolition orders were made (5) Number of dwelling-houses demolished in	Nil
pursuance of Demolition Orders	Nil

### METEOROLOGY.

The average mean temperature registered in London during the year was 50.6 degrees Fahrenheit. The highest air temperature registered being 89 degrees, in July. The lowest air temperature was 21 degrees in February. The total amount of rainfall was 30.6 inches.

