

Report of the Medical Officer of Health for the year 1937.

Contributors

Chelsea (London, England). Metropolitan Borough.
McCarthy, W. H. Leslie.

Publication/Creation

London : Vail, 1938.

Persistent URL

<https://wellcomecollection.org/works/cbwrnfbn>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution, Non-commercial license.

Non-commercial use includes private study, academic research, teaching, and other activities that are not primarily intended for, or directed towards, commercial advantage or private monetary compensation. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

C.I. AC4345

CHE 41

Metropolitan Borough of Chelsea



REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1937

W. H. LESLIE McCARTHY, D.S.O., M.C., M.D., M.R.C.P., D.P.H.
BARRISTER-AT-LAW.

Medical Officer of Health and Administrative Tuberculosis Officer.

Printed by Order of the Council.

LONDON :
VAIL & CO. LTD.
PRINTERS,
170, FARRINGTON ROAD, LONDON, E.C.1

Metropolitan Borough of Chelsea.

Annual Report
OF THE
Medical Officer of Health
FOR
CHELSEA

1937

BY
W. H. LESLIE McCARTHY,
D.S.O., M.C., M.A., M.D., M.R.C.P., D.P.H.,
Barrister-at-Law,
MEDICAL OFFICER OF HEALTH.

London:
VAIL AND CO. LTD., PRINTERS, 170, FARRINGTON ROAD, LONDON. E.C.I.
1938.

PREFACE.

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

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit my Annual Report on the health of the Metropolitan Borough of Chelsea for 1937.

The report is an "Ordinary" report as defined in the appropriate circular of the Ministry of Health.

The chief vital statistics relating to the year are as follows:—The resident population of the Borough is estimated by the Registrar-General at 56,510, a figure which is higher than that for last year.

The birth rate (10.8) is lower than that for last year (11.3). The marriage rate (15.2) is higher than that for last year (14.8). The death rate (14.1) is higher than that for London generally (12.3) and compares with 13.7 last year. It is, perhaps, not generally realised that over 10 per cent. of the Chelsea population is made up of persons over 65 years of age—a much higher proportion than that obtaining in any other Metropolitan Borough—and that over one-half of all deaths in Chelsea occur in persons over 65 years of age.

The infant mortality rate is 59 per 1,000 live births, as compared with 53 last year.

There has been no maternal death during the year.

The general improvement in the public health of the Borough continues to be maintained.

There was a marked decrease in the total incidence of notifiable infectious disease during the year. The total number of notifications, excluding duplicates, was 441, as compared with 648 last year.

A considerable decrease was recorded in the number of cases of measles.

At the end of the year there were 245 cases of pulmonary tuberculosis and 58 cases of non-pulmonary tuberculosis known to be living in the Borough—a total lower than that for last year.

Maternity and Child Welfare work has continued to grow in extent and usefulness. The attendances at the welfare centres were 7,583, and 6,626 visits to homes of patients were recorded. I continue to receive most valuable assistance from the Chelsea Health Society, and cannot speak too highly of the efficiency of the Society's work.

Section III. of the report deals with Sanitary Administration. The statistics indicate that constant attention is devoted to the improvement of housing accommodation in the Borough.

As in former years, much attention has been devoted to the supervision of food supplies.

Further progress was made in connection with the Survey of Working Class dwelling houses in the Borough, in accordance with the requirements of Part IV, section 57, of the Housing Act, 1936. The problem of abating overcrowding is receiving close consideration by a Special Committee of the Council.

I have again to express my appreciation of the work of the staff of the Public Health Department.

I should like to thank the members of the Public Health, Maternity, Child Welfare, and other Committees for the support and sympathetic consideration which they have extended to me, and for their keen attention to the problems which it has been my duty to lay before them.

Copies of this report have been transmitted to the Ministry of Health, the Home Office and the London County Council, in accordance with statutory requirements.

I am,

Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

W. H. L. McCARTHY,

Medical Officer of Health.

Public Health, Maternity and Child Welfare Committee.

At 31st December, 1937.

HIS WORSHIP THE MAYOR (Councillor G. F. WILKINS, LL.B., J.P.)

THE DEPUTY MAYOR (Alderman Lt.-Col. S. BOYLE, M.C., D.L.)

Alderman Miss C. FULFORD, J.P., L.C.C. (*Chairman*).

Councillor J. LILLY (*Vice-Chairman*).

Alderman LADY PHIPPS.

Alderman G. M. STEVENSON.

Councillors :

COL. D. G. ADAMS.

HON. EVELEEN CAMPBELL-GRAY.

L. R. ANDREWS.

D. M. J. DEAR.

G. A. BEATON.

I. T. HENDERSON.

J. M. BUCKLEY.

MRS. C. WILLIAMS.

Housing Committee.

HIS WORSHIP THE MAYOR (Councillor G. F. WILKINS, LL.B., J.P.)

THE DEPUTY MAYOR (Alderman Lt.-Col. S. BOYLE, M.C., D.L.)

Councillor H. G. EVANS (*Chairman*).

Alderman LADY PHIPPS (*Vice-Chairman*).

Alderman BASIL MARSDEN-SMEDLEY, L.C.C.

Councillors :

L. R. ANDREWS.

R. A. LYGON.

J. M. BUCKLEY.

G. A. THESIGER.

MRS. J. T. COCKBURN.

MRS. C. WILLIAMS.

CAPT. R. L. EDWARDS.

P. A. WILLIAMS.

MRS. M. S. M. ELLIOTT.

Milk and Welfare Sub-Committee.

HIS WORSHIP THE MAYOR (Councillor G. F. WILKINS, LL.B., J.P.)

THE DEPUTY MAYOR (Alderman Lt.-Col. S. BOYLE, M.C., D.L.)

Alderman LADY PHIPPS (*Chairman*).

Alderman Miss C. FULFORD J.P., L.C.C.

Councillor HON. EVELEEN CAMPBELL-GRAY.

Councillor J. LILLY.

Councillor MRS. C. WILLIAMS.

PUBLIC HEALTH OFFICERS OF THE AUTHORITY.

The names and qualifications of members of the staff of the Public Health Department, at 31st December, 1937, are tabulated below in the form required by the Ministry of Health.

(a.) Medical.

Year appointed.	Name.	Qualifications.	Appointment.
1924	McCarthy, W. H. L.	M.D., M.R.C.P., D.P.H.	Medical Officer of Health, Administrative Tuberculosis Officer and Executive Officer under the Council's Maternity and Child Welfare Scheme (Part time).
1917	Fenton, W. J. ...	M.D., F.R.C.P. ...	Tuberculosis Officer (Part time).
1926	Matthews, Kathleen F.	M.R.C.S., L.R.C.P., D.P.H.	Medical Officer, Maternity and Child Welfare (Part time).
1928	Nelson, Grace M. ...	M.R.C.S., L.R.C.P. ...	Medical Officer, Maternity and Child Welfare (Part time).
1921	Radford, Muriel A.	M.B., B.S., D.P.H. ...	Medical Officer, Maternity and Child Welfare (Part time).
1930	Salmond, Margaret	M.D., F.R.C.S., L.R.C.P.	Medical Officer, Maternity and Child Welfare (Part time).
1935	Hamilton, C. K. J.	M.B., F.R.C.P. ...	Hon. Medical Director, Mothercraft Home, and Medical Officer, Chelsea Day Nursery (Part time).
1935	Chiesman, W. E. ...	M.D., M.R.C.P. ...	Asst. Medical Officer Mothercraft Home and Chelsea Day Nursery (Part time).
1929	McCullagh, W. McK.	M.B., F.R.C.S. ...	Consultant for Puerperal Fever and Puerperal Pyrexia (Part time).
1930	Holland, E. T. ...	M.R.C.S., L.R.C.P. ...	Public Vaccinator, St. Luke's Hospital (Part time).
1930	Sandiland, D. S. ...	M.R.C.S., L.R.C.P. ...	Public Vaccinator, St. Stephen's Hospital (Part time).
1933	Thomas, E. F. ...	M.D., D.P.H. ...	Public Vaccinator, Chelsea District (Part time).

(b.) Other Staff.

Year Appointed.	Name.	Qualifications.	Appointment.
1936	McLachlan, T. ...	A.C.G.F.C., F.I.C. ...	Public Analyst (Part time).
1920	Crandell, W. ...	Cert. San. Insp. Exam. Board, Cert. Royal San. Inst., Cert. Meat and other Foods.	Senior Sanitary Inspector (Whole time).
1927	Castley, J. ...	Cert. San. Insp. Exam. Board, Cert. Meat and other Foods.	Sanitary Inspector (Whole time).
1926	Shelley, A. P. T. ...	Cert. San. Insp. Exam. Board.	Sanitary Inspector (Whole time).
1930	Hoyland, H. ...	Cert. Royal San. Inst. and San. Insp. Exam. Joint Board, Cert. Meat and other Foods.	Sanitary Inspector, with special reference to Duties under Housing Regulations, 1925 (Whole time).
1916	Brown, Miss M. ...	Cert. San. Insp. Exam. Board, Cert. Royal San. Inst., Health Visitors' Diploma, approved by Board of Education. Cert. C.M.B.	Sanitary Inspector and Health Visitor (Whole time).
1911	Hobart, Miss F. G.	Cert. San. Insp. Exam. Board, Diploma of Nat. Health Soc., Royal San. Inst. Health Visitors' Cert. C.M.B.	Health Visitor and Superintendent to Chelsea Health Society (Whole time).
1923	Shaw, Miss A. ...	Cert. Gen. Hosp. Training, C.M.B. and Cert. Mothercraft Training Soc., Health Visitors' Cert. approved by Ministry of Health.	Health Visitor, Chelsea Health Society (Whole time):
1926	Harcourt, Miss G. E.	S.R.N., Cert. Gen. Hosp. Training, C.M.B., and Cert. Mothercraft Training Society.	Health Visitor, Chelsea Health Society (Half time).
1937	Shute, Miss P. E. M.	S.R.N., Cert. Gen. Hosp. Training, S.C.M., Royal San. Inst. Health Visitors' Cert.	Health Visitor, Chelsea Health Society (Half time), Supt. of Play Mornings (Half time).
1936	Walker, Miss L. ...	S.R.N., Gen. Hosp. Cert. St. Thomas' Hosp., Cert. C.M.B. Cert. M.T.S.	Matron, Chelsea Day Nursery and Mothercraft Home (Whole time).
1928	Squire, Miss H. M. L.	Cert. Inst. of Hospital Almoners, Cert. Social Science (London School of Economics). Cert. San. Insp. Exam. Board. Diploma Nat. Health Society.	Secretary of Chelsea Tuberculosis Dispensary, Tuberculosis Visitor and Social Worker in connection with Tuberculosis (Whole time).
1937	Dolan, Miss A. P. ...	Cert. General Hospital Training and Tuberculosis, Cert. C.M.B.	Tuberculosis Nurse to Dispensary (Whole time).

Year Appointed.	Name.	Appointment.
1914	Hayden, A. B. J.	Chief Clerk and Vaccination Officer, Public Health Depart- ment (Whole time).
1920	Bosley, E.	Clerk, Public Health Department (Whole time).
1930	Bryant, J. C.	Clerk, Public Health Department (Whole time).
1922	Kennedy, Mrs. H. M.	Clerk (Maternity and Child Welfare) Public Health De- partment (Whole time).
1936	Pittman, Miss R.	General Secretary, The Violet Melchett Infant Welfare Centre (Whole time).
1935	Bennett, Miss H. M.	Assistant Secretary, The Violet Melchett Infant Welfare Centre, (Whole time)
1935	Gilliatt, Miss E. A.	Matron's Secretary, Mothercraft Home (Whole time).
1906	Leonard, C.	Mortuary Keeper and Messenger (Whole time).
1914	Hancock, E.	Chief Disinfectors (Whole time).
1929	Weston, R. J.	Disinfectors (Whole time).
1931	Bosley, E., Jr.	Disinfectors (Whole time).
1937	Brady, Mrs. R.	Shelter and Cleansing Attendant (Whole time).
1931	Evans, Mrs. F. B.	Home Help (Part time).
1936	Clark, Mrs. M.	Home Help (Part time).

Table of Contents.

	PAGE
Preface	2
Public Health, Maternity and Child Welfare Committee	4
Housing Committee	4
Milk and Welfare Sub-Committee	4
Public Health Officers of the Borough Council	5
(a) Medical	5
(b) Other Officers	6

I.—STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH.

General Statistics	11
Physical Features and General Character of the Area	12
Social Conditions, including Chief Occupations of Inhabitants	12
Vital Statistics	12
Births	13
Registered Number of	13
Notifications	15
Illegitimate	16
Stillbirths	16
Marriages	16
Deaths	16
Registered Number of	16
In Public Institutions	17
Causes (Table)	20
Children 1-5 years	21
Infants	22
Illegitimate	23
Maternal Mortality	23
Apparent Excessive Mortality in the Borough	24
Causes of Sickness in the Borough	24

II.—PROVISION OF HEALTH SERVICES IN THE BOROUGH.

Professional Nursing in the Home	25
(a) General	25
(b) Infectious Diseases	26
Midwives and Maternity Nurses	27
Home Help in Maternity Cases	27
National Health Insurance	28
Laboratory Facilities	28
Public Health Legislation in force in the Borough	29
Hospital Services available in the Borough	29
Maternity and Nursing Homes	31
Health Visitors	31
Ante-Natal Work	33
Compensation to Midwives	33
Supply of Milk to Mothers and Young Children	33
Institutional Provision for Unmarried Mothers, Illegitimate Infants and Homeless Children	34
Ambulance Facilities	35
Clinics and Treatment Centres	35
(a.) The Violet Melchett Infant Welfare Centre	35
(i.) Chelsea Health Society	36
(ii.) Chelsea Day Nursery	37
(iii.) Chelsea Mothercraft Home	37
(b.) Invalid Children's Aid Association	38
(c.) The Babies' Club	39
(d.) Charity Organisation Society	39
(e.) Chelsea Tuberculosis Dispensary	39
Convalescent Home Treatment for Nursing Mothers and Infants	39
Dental Treatment	40
Widows', Orphans' and Old Age Contributory Pensions Acts, 1925 and 1929	40
Child Life Protection	40
Blind Persons Act, 1920	41
Summary of Arrangements regarding Maternity and Child Welfare	41

III.—SANITARY CIRCUMSTANCES AND ADMINISTRATION.

	PAGE
Complaints	42
Closet Accommodation	42
Removal and Disposal of Refuse	42
Sanitary Inspection of the Borough	42
Magisterial Proceedings	45
Shops	45
Smoke Abatement	45
Fouling of Footways by Dogs	45
Rats and Mice (Destruction) Act	45
Pigeons, Nuisance caused by	45
Premises and Occupations Controlled by Byelaws or Regulations	47
Bed Bugs, Eradication of	47
Factories, Workshops and Workplaces	47
Public Mortuary	49
Rag Flock	49
Offensive Trades	49
Swimming Baths and Pools	49
Pharmacy and Poisons Act, 1933	49

IV.—HOUSING.

Housing Statistics	50
Housing Conditions in the Borough	52
(a.) General Observations	52
(b.) Sufficiency of Supply of Houses	52
(c.) Overcrowding	54
(d.) Fitness of Houses	55
(e.) Unhealthy Areas	56
(f.) Byelaws relating to Houses and Houses Let in Lodgings	56
(g.) Housing Inspections	56

V.—INSPECTION AND SUPERVISION OF FOOD.

Milk Supply	58
Milk (Special Designations) Order	58
Public Health (Meat) Regulations, 1924	59
Slaughter-houses	59
Bakehouses	59
Ice-cream Vendors	60
Fried Fish Vendors	60
Other Premises where Food is Prepared or Offered for Sale	60
Unsound Food	60
Food Poisoning	60
Food and Drugs (Adulteration) Act, 1928	60
The Public Health (Preservatives, etc., in Food) Regulations	61
Margarine	61
Chemical and Bacteriological Examination of Food	61
Nutrition, Dissemination of Knowledge as to	61
Shell Fish	61

VI.—INFECTIOUS AND OTHER DISEASES.

(a.) Infectious Diseases Generally	62
Diseases Notifiable in the Borough	62
Notifications	62
Diphtheria	64
Diphtheria Immunisation Clinic	64
Scarlet Fever	65
Measles	65
Enteric Fever	66
Pneumonia, Malaria and Dysentery	66
Puerperal Fever and Puerperal Pyrexia	67

	PAGE
Ophthalmia Neonatorum	67
Poliomyelitis and Polio-Encephalitis	68
Encephalitis Lethargica	68
Chicken Pox	68
Smallpox and Vaccination	68
Venereal Disease	69
Disinfection	69
Infectious Diseases Shelter	70
Disinfestation	70
(b.) Tuberculosis	71
Notifications and Mortality	71
Cases of Tuberculosis in the Borough	72
Public Health (Prevention of Tuberculosis) Regulations, 1925	73
Chelsea Tuberculosis Scheme	73
Dispensary and Institutional Facilities for Treatment	77
Co-operation with Hospitals and I.C.A.A.	77
Co-operation with School Medical Service	78
Co-operation with Medical Practitioners	78
Home Contacts	78
Artificial Pneumo-thorax Treatment	78
Home Nursing	78
Extra Nourishment	78
Non-Tuberculous Cases	78
Orthopædic Treatment	79
Dental Treatment	79
Bacteriological Examinations	79
Care and After-Care Work	79

APPENDIX.

Report of the Public Analyst	82
-------------------------------------	----

Annual Report

ON THE

Health of the Metropolitan Borough of Chelsea.

Year ending 31st December, 1937.

SECTION I.—STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH.

GENERAL STATISTICS.

TABLE No. 1.

Area	...	...	...	...	...	...	(acres) 660
Resident Population :—Registrar-General's estimate, 1937							56,510
Number of Inhabited Houses (end of 1937) according to							
Rate Books	...	...	...	...	...	...	13,016
Rateable value, October, 1937			...	...	...	...	£1,283,003
Sum represented by a penny rate, October, 1937						...	£4,995

POPULATION IN WARDS.

(CENSUS 1931.)

				Males.	Females.	Total.
Cheyne	...	...	...	3,349	5,436	8,785
Church	...	...	...	4,390	5,929	10,319
Hans Town	...	...		2,961	5,839	8,800
Royal Hospital	...	..		2,550	4,833	7,383
Stanley	...	...	...	10,696	13,048	23,744
				<u>23,946</u>	<u>35,085</u>	<u>59,031</u>

(NOTE.—All vital Statistics given in this Report are calculated on the Resident Population of the Borough as Estimated by the Registrar-General for 1937, viz., 56,510).

Physical Features and General Character of the Area.—The Metropolitan Borough of Chelsea, situated near the centre of the Metropolis, is bounded on the north by the Royal Borough of Kensington, on the west by the Borough of Fulham, on the east by the City of Westminster, and on the south by the River Thames. It is a small compact borough, less than two miles in length, by about three-quarters of a mile in width.

Over nearly the whole area the soil consists of gravel and sand, highly permeable to water. In a small portion of the western side of the Borough there is a thin loamy deposit of brick earth resting upon the gravel. There is a narrow strip of alluvial deposit extending along the Embankment from Battersea Bridge westwards.

The northern portion of the area is largely built over. The central zone comprises a number of pleasant squares occupied by people in affluent circumstances. The grounds of the Royal Hospital, with the River Thames and Battersea Park beyond, render the southern zone unusually open.

Social Conditions.—The density of population (number of persons per acre) as shown by the 1931 Census, is 89·4, the corresponding figure for London, as a whole, being 58·7. The density of population of each of the five Wards in the Borough is as follows:—Church Ward, 111·0; Stanley Ward, 123·7; Hans Town Ward, 78·6; Cheyne Ward, 76·4; Royal Hospital Ward, 49·9.

Analysis of the 1931 Census figures shows that there is a greater proportion of unoccupied and retired persons in Chelsea than in any other Metropolitan borough. There is, however, a considerable "working class" population. Thus, of a total of 19,600 adult males, about 16,750 are occupied. The chief occupations are transport work (2,704), personal service (2,224), metal work (1,036), and clerical work (1,260). Over one half of the 30,800 adult females are occupied. Of these, domestic servants account for 8,746, dressmakers number 1,243, shop assistants 1,090, and clerks 1,471.

There are no dangerous or offensive trades carried on in the Borough. There is no evidence that any of the occupations of the inhabitants exerts a deleterious influence on the public health.

VITAL STATISTICS.

In accordance with the requirements of the Ministry of Health, the following extracts from the Vital Statistics of the year are shown below:—

TABLE No. 2.

		Total	M.	F.	
Live Births:—					
Legitimate	...	553	279	274	} Birth rate per 1,000 of the estimated resi- dent population..10·8
Illegitimate	...	57	26	31	

	Total	M.	F.	
Still Births	13	10	3	{ Rate per 1,000 total (live and still) births ... 20.9 Death rate per 1,000 of the estimated resi- dent population 14.1
Deaths	796	389	407	
Deaths from Puerperal Causes :—				Deaths. Rate per 1,000 total (live and still) births.
Puerperal Sepsis ... ..	...	...	0	0
Other Puerperal Causes ... ..	...	...	0	0
Total ... ..	...	...	0	0

Death rate of Infants under one year of age :—

All infants, per 1,000 Live Births	59
Legitimate infants per 1,000 legitimate live births	54
Illegitimate infants per 1,000 illegitimate live births	105
Deaths from Cancer (all ages)	129
Deaths from Measles (all ages)	—
Deaths from Whooping Cough (all ages)	2
Deaths from Diarrhoea (under 2 years of age)	8

BIRTHS.

The total number of births of Chelsea residents during the year was 610, equivalent to a birth rate of 10.8 per 1,000 of population.

The birth-rate for England and Wales in 1937 was 14.9, while that for London as a whole was 13.3.

The following Tables are self-explanatory :—

TABLE No. 3.
REGISTERED BIRTHS.

	LEGITIMATE.		ILLEGITIMATE.		TOTAL.
	Male.	Female.	Male.	Female.	
Births Registered in the Borough	458	445	45	48	996
Births of Non-Parishioners	328	321	42	42	733
Births of Chelsea Mothers in Lying-in Hospitals and elsewhere outside of the Borough	130	124	3	6	263
	149	150	23	25	347
	279	274	26	31	610
	553		57		610
NETT CHELSEA BIRTHS	553		57		610

TABLE No. 4.

BIRTHS, BIRTH-RATES, BIRTHS IN WARDS AND INWARD TRANSFER BIRTHS.

YEAR.	BIRTHS.			Birth-Rate Per 1,000 of Population.	BIRTHS IN WARDS.					INWARD TRANSFER BIRTHS.			
	Leg.	Illeg.	Total.		Hans Town.	Royal Hos- pital.	Church.	Cheyne.	Stan- ley.	Hos- pitals.	Nursing Homes.	Private Ad- dresses.	Total.
1936	578	60	638	11·3	70	57	96	96	319	232	68	7	307
1937	553	57	610	10·8	66	61	84	92	307	260	73	14	347

TABLE No. 5.
BIRTHS IN HOSPITALS AND NURSING HOMES.

CHelsea BIRTHS IN HOSPITALS AND NURSING HOMES WITHIN THE BOROUGH.	CHelsea BIRTHS IN HOSPITALS AND NURSING HOMES OUTSIDE THE BOROUGH.
St. Luke's Hospital and Institu- tion —	St. Mary Abbots Hospital ... 152
St. Stephen's Hospital and Insti- tution 9	St. George's Hospital ... 30
Ormond Maternity Home ... 14	Queen Charlotte's Hospital ... 17
Wilbraham Nursing Home ... 5	Princess Beatrice Hospital ... 15
Chelsea Hospital for Women ... —	Hammersmith Hospital ... 8
Royal Avenue Nursing Home ... 1	Fulham Hospital ... 5
	Miscellaneous Hospitals ... 33
	Nursing Homes ... 73
TOTAL 29	TOTAL 333

From Table No. 4 it will be observed that the number of births of Chelsea Infants in Hospitals and elsewhere outside Chelsea accounted for 57 per cent. of the total births. In the preceding year the percentage was 48·0.

NOTIFICATION OF BIRTHS.

Under the Act, all live and stillbirths occurring after the 28th week of pregnancy must be reported within 36 hours to the Medical Officer of Health of the district in which the birth takes place. This information is extremely valuable, as it enables the Health Visitor to exercise supervision of the mother and child shortly after confinement.

During the year 997 births, including stillbirths, were notified as occurring in Chelsea. Of this number, in 736 instances the parents were resident in other Boroughs, and information of such births was transmitted to the Medical Officer of Health concerned. Information was received of 350 births amongst Chelsea mothers in Lying-in hospitals and elsewhere outside the Borough.

The total number of notified Chelsea births from all sources was 611.

The following table indicates the source of notification of the 997 births notified in the Borough :—

TABLE No. 6.

Notification received from	CHelsea RESIDENTS.			NON-RESIDENTS.		
	Live Births.	Still Births.	Total.	Live Births.	Still Births.	Total.
Medical Practitioners ...	106	1	107	56	1	57
Midwives	131	3	134	24	—	24
Poor Law Institutions ...	12	—	12	632	23	655
Parents	8	—	8	—	—	—
	257	4	261	712	24	736

Illegitimate Births.—The following table shows the number of illegitimate births and the percentage of the total births. In 1937, 93 such births were registered in Chelsea, and 48 inward transfers and 84 outward transfers were made by the Registrar-General. The nett figure for the Borough is, therefore, 57.

TABLE No. 7.

Year.	Number of illegitimate births.			Percentage of total births.
1936	60	9.40
1937	57	9.34

Stillbirths.—During the year 31 stillbirths were registered in Chelsea, and 8 inward transfers and 26 outward transfers were made by the Registrar-General. The corrected number of stillbirths is therefore 13, which represents a rate for the Borough of 0.23 per 1,000 of the population, as compared with 0.54 for London as a whole.

MARRIAGES.

There were 860 marriages registered in the Borough during the year (837 in 1936). The marriage rate (number of marriages per 1,000 of population) was 15.2. In the preceding year the marriage rate was 14.8.

DEATHS.

The total number of deaths of Chelsea residents during the year was 796, equivalent to a death rate of 14.1 per 1,000 of population.

The death rate for England and Wales for 1937 was 12.4, and for London 12.3.

Adjusted Death Rate.—If the populations of all areas were similarly constituted as regards the proportions of their sex and age group components, their crude death rates (deaths per 1,000 population) could be accepted as valid comparative measures of the mortalities experienced by the several populations.

In practice, however, populations are not thus similarly constituted, and the Registrar-General has accordingly calculated a factor (called the Areal Comparability Factor) for each district. This is, in effect, an adjustment of the age and sex composition of the district to that of England and Wales as a whole, so that all may be compared on the same basis. To obtain the adjusted death rate, the crude death rate is multiplied by the Comparative Factor which has the effect of making a corrected death rate comparable with the death rate of any other district which has been similarly adjusted. The Areal Comparative Factor for Chelsea is 0.85, and the death rate for 1937 when so adjusted is 12.0.

The following tables are self-explanatory :—

TABLE No. 8.
REGISTERED DEATHS.

	Total.
Deaths registered in the Borough	2,021
Non-parishioners	1,400
	621
Deaths of Chelsea residents in hospitals and elsewhere outside the Borough	175
Nett Chelsea deaths	796

DEATHS IN PUBLIC INSTITUTIONS AND ELSEWHERE.

In tabular form is shown below the number of deaths of Chelsea residents which took place in various Institutions during the year. Of the 621 Chelsea deaths registered in the Borough, 373 occurred in Institutions within the Borough.

TABLE No. 9.

CHELSEA DEATHS IN HOSPITALS AND INSTITUTIONS WITHIN THE BOROUGH.	CHELSEA DEATHS IN HOSPITALS AND ELSEWHERE OUTSIDE THE BOROUGH.
St. Luke's Hospital and Chelsea Institution 229	General Hospitals 51
Royal Hospital for Pensioners... 65	Mental Hospitals 21
Cancer Hospital 7	Infectious Disease Hospitals ... 4
Victoria Hospital for Children (Tite Street) 7	Tuberculosis Sanatoria, etc. ... 5
St. Stephen's Hospital (Westminster Infirmary) ... 56	Nursing Homes 26
Brompton Hospital 8	Poor Law Institutions 43
Chelsea Hospital for Women ... 1	Miscellaneous 25
Cheyne Hospital for Children ... —	
St. George's Home for Tuberculosis —	
<u>373</u>	<u>175</u>

Of the 1,400 deaths of non-residents registered in Chelsea 1,385 occurred in hospitals or Institutions within the Borough.

TABLE No. 10.
DEATHS, DEATH RATES, DEATHS IN WARDS AND SEASONAL MORTALITY.

Year.	Deaths.	Death- Rate per 1,000 of Popula- tion.	DEATHS IN WARDS.					SEASONAL MORTALITY RATE.			
			Hans Town.	Royal Hospital.	Church.	Cheyne.	Stanley.	First Quarter.	Second Quarter.	Third Quarter.	Fourth Quarter.
1936	776	13·7	75	110	138	130	323	17·2	13·1	10·7	13·9
1937	796	14·1	79	134	118	148	317	18·5	12·0	11·5	14·4

TABLE No. 11.

BIRTH-RATES, DEATH-RATES, ANALYSIS OF MORTALITY, } England and Wales,
 MATERNAL DEATH-RATES AND CASE-RATES FOR CERTAIN } London, 125 Great
 INFECTIOUS DISEASES IN THE YEAR 1937. } Towns and 148 Smaller
 Towns.

(Provisional figures based on Weekly and Quarterly Returns.)

	England and Wales.	125 County Boro's and Great Towns including London.	148 Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 Census).	London Administra- tive County.
Rates per 1,000 Population.				
BIRTHS :—				
Live	14.9	14.9	15.3	13.3
Still	0.60	0.67	0.64	0.54
DEATHS :—				
All Causes	12.4	12.5	11.9	12.3
Typhoid and Para- typhoid fevers ... }	0.00	0.01	0.00	0.00
Smallpox	—	—	—	—
Measles	0.02	0.03	0.02	0.01
Scarlet fever ...	0.01	0.01	0.01	0.01
Whooping Cough ...	0.04	0.04	0.03	0.06
Diphtheria	0.07	0.08	0.05	0.05
Influenza	0.45	0.39	0.42	0.38
Violence	0.54	0.45	0.42	0.51
NOTIFICATIONS :—				
Smallpox	0.00	—	0.00	—
Scarlet fever ...	2.33	2.56	2.42	2.09
Diphtheria	1.49	1.81	1.38	1.93
Enteric fever ...	0.05	0.06	0.04	0.05
Erysipelas	0.37	0.43	0.34	0.44
Pneumonia	1.36	1.58	1.20	1.18
Rates per 1,000 Live Births.				
Deaths under 1 year of age	58	62	55	60
Deaths from Diarrhoea and Enteritis under 2 years of age ...	5.8	7.9	3.2	12.0
MATERNAL MORTALITY :—				
Puerperal Sepsis ...	0.97	} Not avail able.		
Others	2.26			
Total	3.23			
Rates per 1,000 Total Births (<i>i.e.</i> , Live and Still).				
MATERNAL MORTALITY :—				
Puerperal Sepsis ...	0.94	} Not avail able.		
Others	2.17			
Total	3.11			
NOTIFICATIONS :—				
Puerperal fever ... }	13.93	17.59	11.52	{ 4.13 14.34
Puerperal pyrexia ... }				

TABLE No. 12.

DEATHS OF CHELSEA RESIDENTS REGISTERED DURING THE
YEAR 1937, CLASSIFIED BY AGE AND CAUSE.

(In accordance with Registrar-General's Return.)

CAUSES OF DEATH.	NETT DEATHS, WHETHER OCCURRING WITHIN OR WITHOUT THE BOROUGH.											
	All Ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 35 years.	35 and under 45 years.	45 and under 55 years.	55 and under 65 years.	65 and under 75 years.	75 years and upwards.
All Causes	796	36	7	3	5	10	19	29	81	137	212	257
1. Typhoid and Paratyphoid Fevers	—	—	—	—	—	—	—	—	—	—	—	—
2. Measles	—	—	—	—	—	—	—	—	—	—	—	—
3. Scarlet Fever	—	—	—	—	—	—	—	—	—	—	—	—
4. Whooping Cough	2	2	—	—	—	—	—	—	—	—	—	—
5. Diphtheria	2	—	1	1	—	—	—	—	—	—	—	—
6. Influenza	32	—	—	—	—	—	1	2	4	3	12	10
7. Encephalitis Lethargica ...	1	—	—	—	—	—	—	—	1	—	—	—
8. Cerebro-Spinal Fever ...	—	—	—	—	—	—	—	—	—	—	—	—
9. Tuberculosis of Respiratory System	38	—	1	—	1	5	8	5	8	8	2	—
10. Other Tuberculous Diseases	10	—	—	1	1	2	1	2	1	1	1	—
11. Syphilis	—	—	—	—	—	—	—	—	—	—	—	—
12. General Paralysis of the Insane, Tabes Dorsalis ...	4	—	—	—	—	—	—	—	2	2	—	—
13. Cancer, malignant disease ...	129	—	—	—	—	1	—	7	22	29	44	26
14. Diabetes	8	—	—	—	—	—	1	—	2	1	2	2
15. Cerebral Hæmorrhage, etc....	25	—	—	—	—	—	—	—	1	9	4	11
16. Heart Disease	244	—	—	—	—	1	1	2	10	40	73	117
17. Aneurysm	6	1	—	—	—	—	—	—	1	3	1	—
18. Other Circulatory Diseases...	32	—	—	—	—	—	—	—	2	4	14	12
19. Bronchitis	35	1	—	—	—	—	—	—	3	9	10	12
20. Pneumonia (all forms) ...	44	8	3	—	—	—	2	5	6	6	6	8
21. Other Respiratory Diseases	3	—	—	—	—	—	—	1	1	—	—	1
22. Peptic Ulcer	6	—	—	—	—	—	—	—	1	2	2	1
23. Diarrhœa, etc.	11	6	2	—	—	—	1	—	—	—	1	1
24. Appendicitis	2	—	—	1	—	—	—	1	—	—	—	—
25. Cirrhosis of Liver	1	—	—	—	—	—	—	—	—	—	1	—
26. Other Diseases of Liver, etc.	7	—	—	—	1	—	—	—	1	1	1	3
27. Other Digestive Diseases ...	12	2	—	—	—	—	—	—	2	3	3	2
28. Acute and Chronic Nephritis	15	—	—	—	—	—	1	1	1	2	5	5
29. Puerperal Sepsis	—	—	—	—	—	—	—	—	—	—	—	—
30. Other Puerperal Causes ...	—	—	—	—	—	—	—	—	—	—	—	—
31. Congenital Debility, Prema- ture Birth, Malformations, etc.	13	13	—	—	—	—	—	—	—	—	—	—
32. Senility	19	—	—	—	—	—	—	—	—	—	1	18
33. Suicide	7	—	—	—	—	—	1	1	2	1	2	—
34. Other Violence	30	—	—	—	1	1	1	2	4	3	8	10
35. Other Defined Diseases ...	52	2	—	—	1	—	1	—	6	10	17	15
36. Causes ill-defined or unknown	6	1	—	—	—	—	—	—	—	—	2	3
	796	36	7	3	5	10	19	29	81	137	212	257

CAUSES OF DEATH.

Table No. 12 shows that 244 deaths were due to Organic Heart Disease, 129 to Cancer, 35 to Bronchitis, 44 to Pneumonia, 38 to Pulmonary Tuberculosis, 32 to Circulatory Diseases, 25 to Cerebral Hæmorrhage, 32 to Influenza and 13 to Congenital Debility and Malformation.

Fifty-nine per cent. of all deaths occurred in persons over 65 years of age.

RESPIRATORY DISEASES.

Table No. 13 shows the number of deaths from respiratory diseases during the past two years. The annual death rate, the number of deaths under 5 years, and the percentage of deaths occurring in children under 5 years of age is also shown :—

TABLE No. 13.

Year.	Bronchitis.	Pneumonia.	Other Respiratory Diseases.	Total.	Death-rate.	No. of deaths under 5 years.	Percentage under 5 years.
1936	26	51	9	86	1.5	6	7.0
1937	35	44	3	82	1.4	12	14.6

DEATHS OF CHILDREN 1-5 YEARS OF AGE.

The number of deaths of children between 1-2 years of age was 7 and between 2-5 years, 3. In the previous year these figures were 7 and 1 respectively. The causes of death are given during the past two years.

TABLE No. 14.

CHILD MORTALITY (1-5 YEARS).

Year.	Infectious Fevers.	Tuberculosis.	Respiratory Diseases.	Diarrhœal Diseases.	All other causes.	Total Deaths.
1936	5	—	2	1	—	8
1937	2	2	3	2	1	10

INFANT MORTALITY.

There were 36 deaths of infants under one year of age in Chelsea during the year. The infant mortality rate (deaths under 1 year per 1,000 live births) was 59, as compared with 53 in the previous year.

In London as a whole the rate of infant mortality was 60 per 1,000 live births.

The causes of death in the various age groups are set out in Table No. 15 :—

TABLE No. 15.

	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks and under 3 months.	3-6 months.	6-9 months.	9-12 months.	Total deaths under 1 year.
Small-pox	—	—	—	—	—	—	—	—	—	—
Chicken-pox	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	—	—	—	—	—	—	—	—	—
Whooping Cough	—	—	—	—	—	1	1	—	—	2
Diphtheria	—	—	—	—	—	—	—	—	—	—
Influenza	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis	—	—	—	—	—	—	—	—	—	—
Abdominal Tuberculosis	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases	—	—	—	—	—	—	—	—	—	—
Meningitis	—	—	—	—	—	—	—	—	—	—
Convulsions	—	—	—	—	—	—	—	—	—	—
Laryngitis	—	—	—	—	—	—	—	—	—	—
Bronchitis	—	—	—	—	—	—	1	—	—	1
Pneumonia	—	—	—	—	—	2	5	—	1	8
Diarrhœa and Enteritis	—	—	—	—	—	1	3	2	—	6
Gastritis	—	—	—	—	—	—	—	—	1	1
Syphilis	—	—	—	—	—	—	—	—	—	—
Rickets	—	—	—	—	—	—	—	—	—	—
Suffocation	—	—	—	—	—	—	—	—	—	—
Injury at Birth	—	—	—	—	—	—	—	—	1	1
Atelectasis	1	—	—	—	1	—	—	—	—	1
Congenital Malformations	—	—	—	—	—	1	—	—	—	1
Premature Birth	8	1	—	—	9	2	—	—	—	11
Atrophy, Debility and Marasmus	—	—	—	—	—	1	—	—	—	1
Other causes	—	—	—	—	—	2	—	—	1	3
	9	1	—	—	10	10	10	2	4	36

Nett Births registered during the calendar year { Legitimate ... 553
 { Illegitimate ... 57

Nett Deaths (under 1) registered during the calendar year { Legitimate ... 30
 { Illegitimate ... 6

The following Table gives the Infant Mortality Rate in Chelsea under various headings, for the past two years :—

TABLE No. 16.

	1936.	1937.
Infectious Diseases	3·1	3·3
Diarrhoeal Diseases	20·4	9·9
Developmental Defects and Wasting	15·6	22·9
Other causes	14·1	22·9
Total Rate	53·2	59·0

TABLE No. 17.

INFANTILE MORTALITY RATES PER 1,000 BIRTHS IN WARDS.

	1936.	1937.
Hans Town	14	15
Royal Hospital	88	33
Church	83	107
Cheyne	21	43
Stanley	56	65
Chelsea Borough	53	59

Illegitimate Deaths.—The following Table No. 18 shows the number of deaths among illegitimate infants during the past two years.

TABLE No. 18.

	1936.	1937.
Total number of illegitimate deaths under 1 year	4	6
Illegitimate death rate	67	105

MATERNAL MORTALITY.

During the year no deaths were primarily classified as due directly to complications of pregnancy or childbirth.

In the case of every maternal death the circumstances are fully investigated by the Medical Officer of Health, the findings being reported to the Ministry of Health.

The following table shows the Maternal Mortality in Chelsea during the past two years :—

TABLE No. 19.

Year.	Death-rate per 1,000 Total (Live and Still) Births.		Total Death-rate.
	Puerperal Fever.	Other complications of Pregnancy and Childbirth.	
1936	—	3·0	3·0
1937	—	—	—

APPARENT EXCESSIVE MORTALITY IN THE BOROUGH.

The Census Returns have consistently shown that there is a considerably higher percentage of persons of advanced age living in Chelsea than in any other Metropolitan Borough. The 1931 Census Returns showed that in London generally 7·3 per cent. of the total population were included in the age-group 65 and upwards. In Chelsea, however, no less than 10·2 per cent. of the total population constituted the age-group 65 and upwards.

These facts must be borne in mind in any analysis of the Chelsea mortality rate, as they are naturally reflected in the death returns. In 1937, deaths of pensioners in the Royal Hospital, Chelsea, accounted for 73 deaths, inward transfers included (equivalent to 1·3 of the death rate). For many years past more than half the deaths in Chelsea have occurred in persons over 65 years of age.

CAUSES OF SICKNESS IN THE BOROUGH.

The Ministry of Health directs that any causes of sickness and invalidity which have been specially noteworthy in the area during the year should be specified.

There was no unusual or excessive mortality during the year, nor was the amount of sickness and invalidity, as far as could be ascertained, such as to call for any special comment in this report.

No special effects of any particular occupation, prejudicially affecting the health of workers therein, have been reported.

SECTION II.—PROVISION OF HEALTH SERVICES IN THE BOROUGH.

PUBLIC HEALTH OFFICERS OF THE BOROUGH COUNCIL.

The names and qualifications of members of the staff of the Public Health Department at 31st December, 1937, are tabulated on pages 5-7, in the form required by the Ministry of Health.

NURSING ARRANGEMENTS.

(a.) **General Nursing in the Home.**—This is carried out by the Chelsea, Pimlico and Belgravia District Nursing Association, located at 10, Sydney Street, Chelsea. The Borough Council makes an annual grant to the Association, in addition to a payment of 1s. 6d. per visit. For this remuneration the Association has undertaken the nursing of all cases of illness occurring in expectant and nursing mothers and also, on the requisition of the Medical Officer of Health, the nursing of all children in the Borough under five years of age suffering from any illness.

Patients are expected to make payment to the Association according to their means, but no patient, on account of inability to do so, is refused the services of a nurse. The only stipulations are that the patient must be under medical supervision, require nursing and be unable to pay the fees of a private nursing institution.

Two members of the Public Health Committee of the Borough Council are members of the Council of the Association.

The Borough Council made a financial grant of £50 to the Association for the year commencing 1st April, 1937. The total fees paid by the Council for nurses' visits during the year amounted to £143 1s. 0d.

(In October, 1937, the Borough Council reconsidered the existing arrangements in respect of Home Nursing in the Borough and approved that, as from the 1st January, 1938, a grant at the rate of £250 per annum be made to the Chelsea, Pimlico and Belgravia District Nursing Association for nursing services undertaken on behalf of the Council in place of the present annual grant of £50 plus payments for nurses' visits; the position to be reviewed in the event of the number of nurses' visits exceeding 3,000 in any year.)

Details of the work undertaken by the Association on behalf of the Borough Council are shown in Table No. 20 by the number of home visits for the past two years and by Table No. 21 the conditions which necessitated attendance during the year 1937:—

TABLE No. 20.

Year.					Visits.			Cases.
1936	...	...	...	...	2,878	...		182
1937	...	...	...	...	2,013	...		118

TABLE No. 21.
NURSED BY DISTRICT NURSES DURING 1937.

	Visits.	Cases.
Bronchitis	150	20
Burns	—	—
Chicken Pox	—	—
Circumcision	200	21
DIARRHŒA	3	1
Eye Trouble	262	10
Ear Trouble	177	11
EXPECTANT AND NURSING MOTHERS	84	8
Pneumonia (under 5)	71	4
Pneumonia (over 5)	309	14
Impetigo	58	5
Meningitis and Peritonitis	—	—
MEASLES (under 5)	36	3
MEASLES (over 5)	—	—
OPHTHALMIA NEONATORUM	69	2
Pemphigus Neonatorum	—	—
Pemphigus	—	—
POLIOMYELITIS	—	—
Post-Vaccination	223	35
PUERPERAL FEVER	—	—
PUERPERAL PYREXIA	—	—
Rickets	—	—
Septic sores	158	14
Tonsils and Adenoids	53	8
WHOOPING COUGH	26	3
Worms	32	6
Miscellaneous	102	16
	<hr/> 2,013 <hr/>	<hr/> 181 <hr/>

(b.) **Nursing of Infectious Disease Cases.**—In the case of all patients suffering from notifiable infectious disease, it is the practice of the Department to advocate admission to an appropriate hospital for isolation and treatment.

Under the Borough Council's Maternity and Child Welfare Scheme, arrangements have been made with the Chelsea District Nursing Association for the nursing of selected cases of infectious disease. In this category are included ophthalmia neonatorum, pneumonia, measles and German measles, whooping cough, epidemic diarrhœa, poliomyelitis, puerperal fever and puerperal pyrexia.

Arrangements are also in operation for the home nursing of cases of tuberculosis. This is carried out by the Tuberculosis Nurse to the Dispensary. Further details will be found on page 78.

MATERNITY NURSES AND MIDWIVES.

Provision has been made by the Borough Council whereby necessitous women may obtain the services of a Maternity Nurse or Midwife at a reduced rate, the balance of the fee being paid by the Council.

The fees charged vary from £2 to £2 2s. for Primipara cases, and £1 10s. for Multipara cases.

Arrangements on this basis were in operation during the year. (From 1st January, 1938, the provisions of the Midwives' Act, 1936, will come into operation). All cases must in the first instance be approved by the Milk and Welfare Sub-committee. The Sub-committee meets weekly to consider applications and assess cases according to the income of the family. Contributions by patients towards the cost of midwifery assistance are collected by the Maternity Nurse or Midwife who undertakes the case.

In the following Table No. 22 is shown, for the past two years, the number of applications for midwifery attendance, the number provided with such attendance, the amount of assessment on cases attended and the nett expenditure by the Council for this service :—

TABLE No. 22.

Year.	(1) No. of applications for services of		(2) Total number provided with a		Amount of Assessment on cases attended.		Nett Cost to Council.	
	Mater- nity Nurse.	Mid- wife.	Mater- nity Nurse.	Mid- wife.	Mater- nity Nurse.	Midwife.	Mater- nity Nurse.	Midwife.
1936	—	33	—	32	£ s. d. —	18 18 9	£ s. d. —	29 11 3
1937	—	25	—	24	—	13 14 0	—	22 6 0

NOTE.—(1) Includes applications refused and cases subsequently withdrawn.

(2) Includes cases assessed during previous year.

The London County Council is the Authority responsible for the supervision of midwives in the Borough. Through the courtesy of Sir Frederick Menzies, the County Medical Officer of Health, I have been able to ascertain that 8 midwives gave notice during the year of their intention to practise as midwives in Chelsea. Of these, two are engaged in private practice, the remainder being employed on the staffs of various hospitals, institutions and maternity homes within the Borough.

HOME HELP IN MATERNITY CASES.

Home Helps are employed by the Borough Council for service in the homes of necessitous women during confinement. A panel scheme is in operation under which selected women are placed upon a roster and their services utilised in rotation. This system is found to be very successful in its working. The following Table No. 23 shows, for the past two years, the number of applications received for Home Help service, the number of cases attended, the amount of assessment on cases attended and the nett expenditure by the Council for this service :—

TABLE No. 23.

Year.	No. of applications for services of Home Help, including extension over the usual period of 2 weeks.	Total number of cases attended by the Home Helps.	Amount of Assessment on cases attended.	Nett Cost to Council.
1936	4	3	£ s. d. 5 18 0	£ s. d. 6 2 0
1937	10	3	3 8 0	8 12 0

NATIONAL HEALTH INSURANCE.

The work of a Sanitary Authority has no direct relation to this service, but wherever co-operation is possible such assistance is freely rendered by the Public Health Department. It is mainly in cases of tuberculosis under treatment in hospitals and institutions, that arrangements are necessary in connection with payment of benefits under the Health Insurance Acts. These arrangements are made by the Tuberculosis Care Committee and the staff of the Tuberculosis Dispensary, in conjunction with the appropriate officials of the Health Insurance Service.

LABORATORY FACILITIES.

Analysis of Food and Drugs.—The detailed results of analyses made during the year will be found appended to this report.

Bacteriological Examinations.—Routine bacteriological examinations are carried out at the Lister Institute of Preventive Medicine. Special investigations for the Ante-natal Clinic are carried out at St. George's Hospital, S.W.1.

Arrangements have also been made with the Clinical Research Association for the bacteriological examination of samples of milk under the Milk (Special Designations) Order.

In cases of suspected bacterial food poisoning, samples of the supposed peccant food, samples of blood, etc., from sufferers, and post-mortem materials from fatal cases are transmitted to the laboratory of the Ministry of Health for examination and report.

The number of bacteriological, bacterioscopic and other examinations carried out during the year was 318. Of these, 288 were for the bacillus associated with Diphtheria, 25 for the bacillus associated with Tuberculosis and 4 investigation for Hæmolytic Streptococci. In addition, a specimen of the water at the Public Baths was submitted for examination. The total cost of these services to the Borough Council was £48 11s. 6d.

The total number of bacteriological examinations during the preceding year was 287.

Anti-toxin.—Diphtheria anti-toxin is available at the Town Hall daily during office hours. It may also be obtained at the premises of Messrs. Timmis and Richards, 432, King's Road, S.W., at any hour, day or night. It is supplied free of charge, both in prophylactic and in curative doses, to medical practitioners for use in connection with patients resident in Chelsea. The amount supplied during the year was 121,000 units. An anti-toxin syringe, needles and steriliser are also available on loan.

The total cost to the Council for anti-toxin supplied during the year was £7 12s. 3d.

PUBLIC HEALTH LEGISLATION IN FORCE IN THE BOROUGH.

The powers under which the Council work are those contained in the Public General Acts, the London County Council (General Powers) Acts, and the Bye-laws under the Public Health Acts.

In addition the Council on the 28th April, 1937, made the following bye-law for the good rule and government of Chelsea :—

NUISANCES BY DOGS.

(1) No person being in charge of a dog shall allow the dog to foul the footway of any street or public place by depositing its excrement thereon.

Provided that a person shall not be liable to be convicted of an offence against this bye-law, if he satisfies the Court that the fouling of the footway by the dog was not due to culpable neglect or default on his part.

(2) For the purposes of this bye-law the owner of the dog shall be deemed to be in charge thereof, unless the Court is satisfied that at the time when the dog fouled the footway it had been placed in or taken into the charge of some other person.

(3) Any person offending against this bye-law shall be liable on summary conviction to a fine not exceeding forty shillings.

(4) This bye-law shall cease to be in force on 1st June, 1939, unless a bye-law re-enacting its provisions has come into operation before that date.

(5) As from the date on which this bye-law comes into operation, the bye-law made by the Council on 2nd February, 1927, under Section 23 of the Municipal Corporations Act, 1882, as to nuisances by dogs upon the public footways shall be and is hereby repealed.

This bye-law has proved of considerable assistance in preventing serious nuisance.

HOSPITAL SERVICES.

The Borough is singularly well provided with facilities for hospital treatment, both general and special. In addition, several important general and special hospitals are situated in the immediate neighbourhood.

Over 80 per cent. of the inhabitants suffering from serious illness or disease seek and obtain in-patient hospital accommodation.

The following Hospitals and Institutions are located within the Borough. None of these are controlled or supported wholly or in part by the Borough Council.

- Brompton Hospital for Consumption.
- The Royal Cancer Hospital.
- Chelsea Hospital for Women.
- Cheyne Hospital for Children.
- Royal Hospital for Pensioners.
- St. George's Home for Tuberculosis.
- St. Luke's Hospital and Institution.
- St. Stephen's Hospital and Institution.
- Victoria Hospital for Children.

The following table No. 24 shows, in the form required by the Ministry of Health, particulars of the hospitals, public and voluntary, within and without the Borough, which are utilised by inhabitants of the Borough.

TABLE No. 24.

Name.	Situation.	Nature of Cases Treated.	Available Beds.	If used by persons resident outside the Borough.	Management.
Brompton Hospital for Consumption ...	Fulham Road, S.W.3	Pulmonary Tuberculosis ...	339	Yes	By Voluntary Committee
The Royal Cancer Hospital ...	Fulham Road, S.W.3	Malignant Disease ...	128	Yes	By Voluntary Committee
Chelsea Hospital for Women ...	Arthur Street, S.W.3	Obstetric and Gynæcological	104	Yes	By Voluntary Committee
Cheyne Hospital for Children ...	Cheyne Walk, S.W.3	Children's Diseases ...	71	Yes	By Voluntary Committee
Princess Beatrice Hospital ...	Richmond Road, S.W.5	General Medical, Surgical and Maternity	78	Yes	By Voluntary Committee
Royal National Orthopaedic Hospital ...	Great Portland Street, W.1	Deformities and Malformations	170	Yes	By Voluntary Committee
St. George's Hospital ...	Hyde Park Corner, S.W.1	General Medical, Surgical and Maternity	437	Yes	By Voluntary Committee
St. Luke's Hospital ...	Cale Street, S.W.3	Medical and Surgical	390	Yes	By Central Public Health Committee of L.C.C.
St. Mary Abbots Hospital ...	Marloes Road, W.8	Medical, Surgical and Maternity	555	Yes	By Central Public Health Committee of L.C.C.
St. Stephen's Hospital ...	Fulham Road, S.W.10	Medical, Surgical and Maternity	718	Yes	By Central Public Health Committee of L.C.C.
Victoria Hospital for Children ...	Tite Street, S.W.3	Children's Diseases ...	138	Yes	By Voluntary Committee
West London Hospital ...	Hammersmith Road, W.6	General Medical and Surgical	234	Yes	By Voluntary Committee
St. George's Home ...	Milman's Street, S.W.10	Tuberculosis ...	50	Yes	By Central Public Health Committee of L.C.C.

All the hospitals included in the foregoing table are fully equipped for operative surgery on modern lines. Each of them also provides special departments for X-ray investigation, dental, ophthalmic, massage and pathological work.

MATERNITY AND NURSING HOMES.

The Ormond Maternity Home, situated at 29, Blantyre Street, Chelsea, was formally closed during the year in view of the pending arrangements by the London County Council for the coming into force of the provisions of the Midwives Act, 1936.

The following table shows the work carried out during 1937 until the closing of the home in September :—

TABLE NO. 25.

Cases admitted and attended in the Home	...	...	...	42
Cases attended in the district	...	...	...	84

Arrangements were subsequently made with a private midwife for the care of all patients booked to the end of year.

HEALTH VISITORS.

Duties.—The duties allotted to the Health Visitors are as follows :—

1. To visit the homes of all newly-born children amongst the working classes within 21 days after birth, and subsequently as circumstances dictate.

2. To visit the homes and make investigations in regard to still-births and infant deaths.

3. To visit and give advice to parents in cases of ophthalmia, zymotic enteritis and other diseases causing deaths amongst infants.

4. To visit and report upon all cases of puerperal fever.

5. To investigate, when required, homes in which overcrowding is alleged to exist.

6. To investigate, when required, applications for the supply of milk free or below cost price.

7. To co-ordinate their efforts with those of the voluntary workers attached to the Maternity and Child Welfare organizations in the Borough.

8. To investigate cases under the Widows', Orphans' and Old Age Contributory Pensions Acts where the children are under school age.

Work of the Health Visitors.—The following tabular statement (Table No. 26) gives an outline of the work of the Health Visitors and of the Chelsea Health Society and School for Mothers during the past two years. The visits enumerated are those paid by the trained officer of the Borough Council (one part-time Health Visitor) and the trained officers of the Chelsea Health Society and School for Mothers (two whole-time and two part-time Health Visitors). It does not include work done by voluntary workers attached to the Society.

TABLE No. 26.

SUMMARY OF REPORTS OF HEALTH VISITORS.

	1936.	1937.
(1) WORK OF THE HEALTH VISITORS.		
First visits to Infants under one year of age	446	397
Return " " " " " " " " " "	1,534	1,586
First visits to Children between the ages of 1 and 5 years	294	258
Return visits to Children between the ages of 1 and 5 years	2,614	2,602
Ante-natal visits to Expectant Mothers :—		
Primi-para cases	109	114
Multi-para " " " " " " " "	186	168
Return visits " " " " " " " "	491	421
Visits to Enteritis cases amongst children	1	6
Return visits " " " " " " " "	—	—
Visits to Ophthalmia Neonatorum cases	6	4
Return visits " " " " " " " "	5	1
Visits to Whooping Cough cases (under 5 years of age)	60	82
Return visits " " " " " " " "	33	36
Visits to Measles cases (under 5 years of age)	283	43
Return visits " " " " " " " "	148	33
Visits to Measles cases (over 5 years of age)	219	25
Return visits " " " " " " " "	53	2
General additional visits " " " " " " " "	741	848
Total visits	7,223	6,626
Half-day attendances at Infant Welfare Centres	534	537
Half-day attendances at Play Centre	160	171
(2) INFANT WELFARE CENTRES.		
Total number of attendances :—		
(a) By children under one year of age	4,009	4,068
(b) By children between the ages of 1 and 5 years	2,450	2,782
(c) By Ante-Natal mothers	690	710
(d) By Post-Natal mothers	43	23
Total attendances	7,192	7,583

ANTE-NATAL WORK.

Close attention is devoted to the work of ante-natal consultations, as the figures in Table No. 26 demonstrate. Sound advice, based on the most recent scientific investigation, is provided by the Medical Officer of the Ante-natal Clinic. Every effort is being made to ensure that mothers will take full advantage of the excellent arrangements made by the Chelsea Health Society so that as far as possible all risk of disease and accident incidental to childbirth may be removed.

Compensation to Midwives.—If the Medical Officer at the Ante-natal Clinic finds it necessary to recommend hospital treatment for an expectant mother referred to him by a midwife, and the mother accepts such advice, the Council make a payment of 10/- to the midwife as compensation for loss of the case.

No case occurred during the year in which such compensation was necessary.

SUPPLY OF MILK TO MOTHERS AND YOUNG CHILDREN.

Provision is made under the Public Health (London) Act, 1936, whereby milk is provided in necessitous cases, free or at less than cost price.

The Milk and Welfare Sub-committee meets weekly at the Town Hall to consider applications.

Milk is supplied on the following basis :—

Number of persons in family.	Weekly income per head (after deduction of rent and insurance).	Assessment.
3-4	Up to 8/- 8/- 9/- 10/-	Free 1d. per pint 2d. per pint 3d. per pint
5-6	Up to 7/- 7/- 8/- 9/-	Free 1d. per pint 2d. per pint 3d. per pint
7-8	Up to 6/- 6/- 7/- 8/-	Free 1d. per pint 2d. per pint 3d. per pint
9-10	Up to 5/- 5/- 6/- 7/-	Free 1d. per pint 2d. per pint 3d. per pint

The following table shows for the past two years, the extent of this service :—

TABLE No. 27.

Year.	Milk Orders issued and taken up.					Approx. Cost.
	March quarter.	June quarter.	Sept. quarter.	Dec. quarter.	*Total.	
1936	553	501	388	389	1831	£ 420
1937	503	537	470	529	2039	607

* These totals do not include orders subsequently cancelled or withdrawn, which average 80 or more during each year.

It will be observed that in 1937 there was a large increase in the cost of milk. Cows milk was supplied to 84 per cent. of the applicants, dried milk being supplied to the remaining 16 per cent.

The total quantity of milk supplied during the year to expectant and nursing mothers and young children was as follows :—

Cows Milk, free of cost	...	...	4326 gallons
Cows Milk at reduced cost	...	...	899 „
			<hr/> 5225 „
Dried Milk, free of cost	...	...	962 lbs.
Dried Milk at reduced cost	...	...	208 „
			<hr/> Total 1170 „

The arrangements for the supply of milk in the Borough are working satisfactorily. Families in receipt of out-relief do not come under the Council's scheme for the supply of milk to necessitous mothers and children. These cases are dealt with entirely by the Public Assistance Committee, who grant the necessary extra milk on a certificate signed by a Doctor at the Welfare Centre. This scheme obviates the undesirable practice of an individual being granted a somewhat similar form of relief by two different authorities.

The supply of milk under the Borough Council Scheme has undoubtedly effected very marked improvement in the general health of both mothers and children.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN.

(a.) The Day Servants Hostel, 29-33, Danvers Street, Chelsea, provides accommodation for 15 unmarried mothers and their infants. Cases are not received until after birth of the child. Daily work is provided by the Hostel and the mothers reside with their babies at night.

(b.) The Fanny Hobson Hostel, 497, King's Road, Chelsea, provides accommodation for 20 women on discharge from prison or if found

homeless. Unmarried mothers, but not illegitimate infants, are received. An expectant mother is retained until the confinement approaches. Arrangements are then made for her admission to Hospital. If she is subsequently re-admitted to the Hostel, the infant is settled with a foster mother.

(c.) St. Theresa's Shelter, 43, Smith Street, Chelsea, is a Rescue Home which provides accommodation for nine girls. Cases are detained for some weeks until some suitable employment can be found. In the case of an expectant mother, arrangements are made for her transfer to an appropriate Home or Institution elsewhere in the Metropolis.

Homeless children in general are cared for by the Public Assistance Committee.

AMBULANCE FACILITIES.

(a.) **Infectious Cases.**—Under the Public Health (London) Act, persons in London suffering from certain notifiable diseases may be conveyed without payment to a hospital of the London County Council. The London County Council ambulances are also available, on payment, for the conveyance of persons suffering from infectious disease to places elsewhere in the metropolitan area.

(b.) **Non-infectious and Accident Cases.**—The efficient ambulance service of the London County Council is available for cases of accident, sudden illness and also for maternity cases. The ambulances of the London County Council may also be utilized, on payment, for the removal of non-infectious cases to hospitals or homes.

CLINICS AND TREATMENT CENTRES.

(A.) **The Violet Melchett Infant Welfare Centre, Flood Walk, S.W.3.**—*Chairman of Council:* Violet, Lady Melchett, *D.B.E.* *Hon. Treasurer:* Col. Sir Courtauld Thomson, *K.B.E., C.B.* *Hon. Secretary:* Miss M. Bowden-Smith.

This Centre, controlled by a Voluntary Council with headquarters in Flood Walk, adjoining the Town Hall, was completed in February, 1931, and formally opened by Her Majesty Queen Mary on 26th March, 1931.

The Violet Melchett Infant Welfare Centre maintains the Maternity and Child Welfare services in the Borough and embodies the activities of the Chelsea Health Society, the Chelsea Day Nursery and the Chelsea Mothercraft Home.

The magnificent building, with the land on which it stands and a considerable portion of its equipment, was a gift of the late Lord Melchett as a memorial to Lady Melchett's life-long work for Infant Welfare.

Three members of the Public Health Committee of the Borough Council and the Medical Officer of Health are members of the Executive Committee.

The Violet Melchett Infant Welfare Centre is supported by (1) voluntary contributions (2) an endowment of £500 per annum generously provided by Lady Melchett herself (3) financial grants from the Borough Council. A further source of income arises from the fees paid by pupils and parents.

The Medical and other staff, appointed by the Voluntary Committee, are as follows :—

(a) Chelsea Health Society. Four part-time Medical Officers, two whole-time and two half-time trained Health Visitors, together with clerical and domestic assistance.

(b) Chelsea Day Nursery and Mothercraft Home. Two Honorary Consultants, an Honorary Medical Director, an Assistant Medical Officer, Matron, three Sisters, four Staff Nurses, twenty-six resident Student Nurses and eight non-resident Students, of whom six are London County Council scholarship students. There is also a whole-time Secretary, and a Nursery school-teacher for the older children in the Day Nursery.

In addition, much valuable work is done by voluntary workers attached to the Society.

Under section 101 (6) of the Local Government Act, 1929, the Borough Council made an annual contribution of £3,535 to the Violet Melchett Infant Welfare Centre for services in respect of Maternity and Child Welfare work for the financial year 1937-1938.

Reference will now be made to the activities of the three organisations included in the Violet Melchett Infant Welfare Centre.

(1) Chelsea Health Society.—Flood Walk, S.W.3.

The accommodation provided includes a large central hall, with surrounding consulting-rooms and dressing rooms. There is also a perambulator store, an open-air court with a garden where children may play while awaiting medical inspection, and ample office accommodation.

During the year five infant clinics were held weekly—four at Flood Walk and one at 484, King's Road. At Flood Walk one ante-natal clinic was held weekly. In addition, Play Mornings are held daily from 9.0 to 12.0 under the supervision of a Health Visitor, for children referred by the Medical Staff for observation, as being reported difficult, or needing companionship, fresh air or space.

Details of the work carried out by the Society will be found on page 32 (Table No. 26).

(2) **Chelsea Day Nursery, Flood Street, S.W.3.**

The Chelsea Day Nursery provides accommodation for fifty children. In addition to two large nurseries with verandahs for toddlers and children also nursery for infants, there are bathrooms, a kitchen and an enclosed courtyard for the children to play in.

The Nursery is ably administered and is much appreciated in the Borough.

The attendances at the Nursery during the past two years were as follows :—

TABLE No. 28.

	1936.	1937.
Total number of attendances during the year	12,440	11,997
Average daily attendance (5 days a week)	48	45
Total number of individual children who attended ...	114	85

The health of the children has been satisfactory.

Dr. C. K. Hamilton is Medical Officer to the Nursery and makes a weekly inspection of the children.

(3) **Chelsea Mothercraft Home.—Manor Street, S.W.3.**

The Mothercraft Training Home provides accommodation for six nursing mothers, with their babies, for the treatment of lactation difficulties, and for three normal breast-fed infants whose mothers are employed as maids in the home. There is also accommodation for seven or more premature and other babies, requiring special care and dieting. In addition, there is an observation nursery to which four nursing mothers may come during the day, with their babies, for test feeds and instruction. The wards open on to a balcony and roof garden.

The Home is efficiently administered and the arrangements instituted for the treatment of lactation cases have proved eminently satisfactory.

The following Table No. 29 shows the work carried out in the Home during the past year :—

TABLE No. 29.

MOTHERCRAFT HOME.

	<i>Mothers.</i>	<i>Babies.</i>
Beds available	6	16
Admitted during year	65	114
Discharged during year	65	110
Average length of stay	27.7 days	61.9 days
Average length of stay of normal breast-fed infants	—	248 days
Daily average number of in-patients ...	4.3	15.6
Test-Feed attendances	221	221
Number of individual mothers who attended for Test Feeds (of whom 93 attended for 1 day only)	128	—
Number of mothers who brought their babies for advice <i>re</i> feeding	106	—

RESULTS OF TREATMENT OF BABIES DISCHARGED.

Recovered, including 4 babies admitted as normal	...	...	101
Improving	...	...	2
Died	...	...	—
No improvement	...	...	—
Removed against advice	...	...	3
Referred to Hospital for observation	...	...	1
Referred to Hospital for operation for Pyloric stenosis	...	...	2
Referred to Hospital with whooping cough	...	...	1

RESULTS OF TREATMENT OF BREAST FEEDING DIFFICULTIES.

Breast feeding fully re-established	...	...	...	...	...	33
Breast feeding regulated	...	...	...	...	...	6
Partly breast fed	...	...	...	...	...	17
Weaning for age	...	...	...	...	...	1
Weaned on account of mother's health	...	...	...	...	...	3
Mother discharged herself	...	...	...	...	...	1
Normal	...	...	...	...	...	4

(B) **Invalid Children's Aid Association.**—Chairman : F. J. Synge, Esq. Hon. Secretary : Mrs. Rathbone.

The Chelsea branch of the Invalid Children's Aid Association is located at 2, Glebe Place, King's Road, S.W.3. The Association provides, for children referred to it, treatment in Hospitals, Sanatoria and Nursing Homes, according to need; convalescence in the country or at the seaside; orthopædic appliances and surgical boots; massage, remedial exercises, surgical dressings and medical comforts; help in training for suitable work; additional clothing, etc.

Two members of the Public Health Committee of the Borough Council and the Medical Officer of Health are members of the local Committee of the Association.

The Borough Council made a financial grant of £100 to the Association for the year commencing 1st April, 1937.

During the year the branch had 224 children under school age referred to them for assistance.

These children were suffering from marasmus and malnutrition, congenital deformities, rickets, anæmia, debility and enlarged glands following acute illness such as bronchitis, pneumonia, measles, diphtheria and scarlet fever.

Fifty-eight children were sent out of London for convalescence, for periods varying from six weeks to six months. Seven children had sanatorium treatment arranged and two children were placed in Ortho-

pædic Homes for prolonged treatment. Children were given medical aids as ordered by a doctor, such as vitoleum cream, phosphates, malt and cod liver oil, etc., which their parents, owing to unemployment, were unable to provide.

Twenty-six children requiring surgical appliances, such as surgical boots, calliper splints, umbilical belts, etc., were provided with what was necessary. Several children were given warm clothing, boots, etc., and fares for children and escorts were paid whenever necessary.

Twenty-one children were treated at the I.C.A.A. Orthopædic Clinic and three children were placed under the L.C.C. contact scheme, as contact cases of tuberculous parents, in carefully chosen homes or with foster mothers.

All children were specially visited after convalescence and friendly supervision and advice was given. Perambulators and push-carts were loaned to enable children to be taken regularly to hospital.

(C.) **The Babies' Club.**—35, Danvers Street, S.W.3. *Chairman*: Mrs. William Piercy, O.B.E. *Secretary*: Miss M. Burnaby. *Medical Officers*: Dr. Langdon Lloyd, Dr. J. H. Gibbens, Dr. Grosvenor Millis and Dr. J. Chisholm.

This Infant Welfare Clinic is controlled by a voluntary Committee. It is intended for the use of subscribers only. Four Infant consultations are held weekly at the premises of the Club.

(D.) **Charity Organisation Society.**—*Chairman*: E. F. Dent, Esq., *Hon. Secretaries*: Miss Larken and Miss Fairtlough.

The Chelsea branch of the Charity Organisation Society is located at 2, Glebe Place, King's Road, S.W.3.

This Society arranges for convalescent treatment when necessary; for the supply of dentures and surgical appliances and for various forms of temporary assistance during disablement, etc.

In connection with the Society there is a Women's Holiday Fund and a large number of Chelsea women are thus enabled to obtain holidays in the country or at the seaside during the summer months.

(E.) **Chelsea Tuberculosis Dispensary.**—This Dispensary, located at Brompton Hospital, affords skilled diagnosis and efficient treatment for all cases of Tuberculosis within the Borough.

Details of the work done by the Dispensary will be found on page 74.

CONVALESCENT HOME TREATMENT FOR NURSING MOTHERS AND INFANTS.

The amount of convalescent home treatment provided for nursing mothers and infants during the past two years is shown in Table No. 30. During the year two of the cases were sent to Homes free of charge.

The remainder contributed according to their resources. The period of convalescence granted is two weeks.

TABLE No. 30.

Year.	No. of Applications.	Nursing Mothers and Infants sent away under Council Scheme.	Contributions by Mothers.	Nett Cost to Borough.
1936	29	19	£ s. d. 8 14 0	£ s. d. 32 14 6
1937	19	11	7 2 6	21 8 0

DENTAL TREATMENT.

Children under Five Years of Age.—For many years dental treatment for children under five years of age has been carried out at the London County Council School Clinic in Bramerton Street, Chelsea. This arrangement has proved very satisfactory in its working.

Expectant and Nursing Mothers.—In conjunction with the Chelsea Branch of the Charity Organisation Society and the Chelsea Health Society, the Borough Council has formulated a scheme whereby dental treatment is provided for expectant and nursing mothers.

During the year fifteen mothers received dental treatment (including nine cases for dentures), the Borough Council making a contribution of £34 18s. 0d. towards the cost.

The Borough Council also made a grant at the rate of £20 per annum to the Violet Melchett Infant Welfare Centre for the provision of preventive dental treatment for necessitous mothers for the financial year 1937-38.

WIDOWS', ORPHANS' AND OLD AGE CONTRIBUTORY PENSIONS ACTS, 1925 AND 1929.

The powers and duties under these Acts, in respect of deserted, abandoned or neglected children in the Borough, are undertaken by the Council, and a scheme for the administration of the Acts has been arranged. The Health Visitors investigate and exercise supervision over children under school age, while the Woman Sanitary Inspector carries out these duties in the case of older children, except where a Health Visitor is already in attendance on the family concerned. No case for enquiry under the Act occurred during the year.

CHILD LIFE PROTECTION.

The Borough Council is responsible for all duties under Part 13 of the Public Health (London) Act, 1936.

The following table shows the number of Foster Mothers and Children resident in the Borough during the year and the number of visits in connection with this work.

TABLE No. 31.
Child Life Protection Return.
(Year 1937).

	Foster Mothers.	Foster Children.
Number on register at beginning of year	14	15
Removed from register	8	12
Added to register	4	8
Remaining on register	10	11
Medical attendance arranged	—	4
Attended Maternity and Child Welfare Clinic	—	12
		<hr/>
Visits to foster mothers		50
Miscellaneous visits		26

BLIND PERSONS ACT, 1920.

At the request of the London County Council, the Borough Council has arranged for the home visiting of blind children under five years of age to be carried out by the Health Visitors. Reports are furnished to the County Council as occasion arises, when the home conditions are found to be unsuitable for blind children or where it is considered necessary that the child should be admitted into a suitable institution. No case came to the knowledge of the department during the year.

SUMMARY OF ARRANGEMENTS REGARDING MATERNITY AND CHILD WELFARE.

The Borough Council's scheme for Maternity and Child Welfare includes the following activities :—

- (a.) The issue of pamphlets giving advice on various matters concerning the welfare of mothers and infants.
- (b.) The co-ordination of the work of the voluntary Maternity and Child Welfare agencies in the Borough.
- (c.) The home visitation of expectant and nursing mothers and infants by a staff of Health Visitors who work (a.) from the Town Hall, and (b.) from the Centres of the Chelsea Health Society.
- (d.) The subsidisation of the Chelsea Health Society's Maternity and Child Welfare Centres and Clinics for mothers, infants and young children.
- (e.) The subsidisation of the local branch of the Invalid Children's Aid Association.
- (f.) The subsidisation of the voluntary Day Nursery in the Borough.
- (g.) The subsidisation of the Chelsea District Nursing Association for the home nursing of expectant and nursing mothers and young children.
- (h.) The provision of Home Helps.
- (i.) The provision of midwifery attendance, free or at reduced rates, for necessitous Chelsea women.
- (j.) The provision of Convalescent Home accommodation for nursing mothers and infants.
- (k.) The provision of dental treatment for expectant and nursing mothers.
- (l.) The supply of milk, free or at reduced rates, to necessitous nursing and expectant mothers, infants, and young children.
- (m.) The provision of sterile maternity outfits at cost price.
- (n.) The administration of the Widows', Orphans' and Old Age Contributory Pensions Acts, 1925 and 1929, in respect of deserted, abandoned or neglected children.

SECTION III.—SANITARY CIRCUMSTANCES AND ADMINISTRATION.

Complaints.—The number of complaints received during the year was 298, compared with 322 last year. The complaints are, in the majority of cases, from the occupiers of houses and deal with alleged nuisances. These complaints are investigated by the Sanitary Inspectors, who, when the circumstances justify, serve the necessary notices required for the abatement of the nuisances.

Closet Accommodation.—The water carriage system is general throughout the Borough.

Removal and Disposal of Refuse.—House refuse is removed by the Works Department of the Council. A bi-weekly collection is made. The refuse is conveyed to the Council's Wharf on the river Thames, whence it is barged away. Inoffensive trade refuse is removed by the Council on payment of a fee in accordance with the provisions of section 92 of the Public Health (London) Act, 1936. Fish offal and other offensive trade products, which could be removed on application as trade refuse, are invariably removed and sold by the persons to whom this class of refuse belongs.

Sanitary Inspection of the Borough.—Prepared by the Senior Sanitary Inspector and set out on the following pages is a summary of the work carried out by the Sanitary Inspectors.

During the year, the number of intimation notices served was 349. The number of statutory notices was 23. These compared with 402 and 56 in 1936.

SUMMARY OF WORK CARRIED OUT BY SANITARY INSPECTORS DURING
THE YEAR.

Inspections.

On complaint of nuisance	...	...	...	...	...	298
On notification of infectious disease (including non-notifiable diseases)						249
House to House	...	...	...	...	...	170
Re-inspection calls made	...	...	...	...	...	3,472

Inspection of :—

[illegible]

Total	5,857
-------	-----	-----	-----	-----	-------

Premises:

Walls and Ceilings cleansed :—	
(a) Premises throughout	—
(b) Premises partially	88
(c) Verminous rooms cleansed	35
(d) Total number of rooms cleansed	128
Wash-house walls and ceilings cleansed	3
Walls and ceilings of water closets cleansed and repaired	27
Wash-house roofs repaired	2
Dirty tenants' rooms cleansed	4
Yard and area walls cleansed	—
Defective roofs repaired	22
Defective gutters repaired	—
Defective rain water pipes repaired	4
Dampness abated	25
Miscellaneous repairs	33
Wash-house floors repaired	1
Yard surfaces repaired, paved, etc.	4
Ashpits demolished	—
New and proper dustbins provided	34
Workrooms provided with light and ventilation or light and ventilation improved	5

Drainage :

Reconstructed	5
Repaired	5
Cleansed	—
Inspection chambers and traps provided	6
Fresh air inlets provided or repaired	7
New soil pipes provided	3
New ventilation pipes provided	2
Soil and ventilation pipes repaired	—
Anti-syphonage pipes provided	—
Drains sealed off	—
Drains cleared (obstruction removed)	3
New covers provided to inspection chambers	7
Rainwater pipes disconnected and caused to discharge over properly trapped gullies	—
Sink wastes provided with traps	9
Sink waste pipes cleansed	2
New sink wastes provided	25
New sinks provided	10
New bath and lavatory basin wastes provided	45

Water Closets.

Improvements in sanitary conveniences (factories, workshops, etc.)...	1
New water closet pans provided	17
Water closet pans (foul) cleansed	1
Choked water closet pans unstopped and cleansed	1
Water waste preventers renewed	10
Water waste preventers repaired	1
Water closet roofs repaired	2
Ventilation and light provided or improved	—
W.C. floors repaired	—

Water supply.

Water supply to premises reinstated	3
Water supply provided to upper storeys of tenement houses	1
New drinking water cisterns provided	3
Drinking water cisterns cleansed	5
Drinking water cisterns provided with new covers or covers repaired	4

Smoke Nuisance.

Number of observations	6
Number of nuisances and complaints	3
Number of notices	—
Number of Summonses	—

Nuisances abated arising from :—

Keeping animals in an improper manner or place	...	...	...	...	...	...	...	—
Defective manure cages	...	...	...	...	...	...	...	—
Accumulation of manure or refuse	...	...	...	...	...	...	...	4
Overcrowding	...	...	...	...	...	...	...	15
Rat nuisance	...	...	...	...	...	...	...	129
Underground rooms	...	...	...	...	...	...	...	—

Food Condemned and Destroyed	...	...	...	...	...	...	...	1
38 lb. Parsnips.								
								14 lb. Apples.
								1½ lb. Cherries.

Disinfection.

Rooms disinfected after Zymotic diseases (Scarlet Fever, Diphtheria, etc.)	...	...	...	...	...	...	...	229
Rooms disinfected after Tuberculous disease	...	...	...	...	...	...	...	49
Rooms fumigated for verminous and filthy conditions	...	...	...	...	...	...	...	369
Miscellaneous disinfection	...	...	...	...	...	...	...	99
Certificates of disinfection given	...	...	...	...	...	...	...	11
School notices after disinfection	...	...	...	...	...	...	...	50
Notices sent to Public Library of Premises where infectious diseases have occurred	...	...	...	...	...	...	...	92

Proceedings taken.

Intimation Notices served	...	...	...	...	...	...	...	349
Statutory Notices under Public Health (London) Act, 1936	...	...	...	...	...	...	...	23
Statutory Notices under Section 9 of Housing Act, 1936	...	...	...	...	...	...	...	—
Statutory Notices under byelaws for provision of dustbins	...	...	...	...	...	...	...	2
Total number of samples purchased for analysis under the Food and Drugs (Adulteration) Act	...	...	...	...	...	...	...	313
Samples of cream taken	...	...	...	...	...	...	...	7
Samples of drugs taken	...	...	...	...	...	...	...	26
Samples (informal) purchased	...	...	...	...	...	...	...	87
Legal proceedings instituted in respect of defective sanitary conditions and nuisances	...	...	...	...	...	...	...	—
Legal proceedings under Milk and Dairies (Amendment) Act, 1922	...	...	...	...	...	...	...	—
Legal proceedings in respect of unsound food	...	...	...	...	...	...	...	—
Certificates issued in accordance with " Rent Restrictions Act "	...	...	...	...	...	...	...	—
Entries in Inhabitants' Complaint Book	...	...	...	...	...	...	...	298

Cleansing and Disinfection.

Number of adults cleansed	...	...	...	...	...	...	...	27
Number of children cleansed	...	...	...	...	...	...	...	515
Number of rooms or premises cleansed or disinfected	...	...	...	...	...	...	...	746
Number of persons treated for Scabies	...	...	...	...	...	...	...	27
Number of articles (bedding, etc.) disinfected	...	...	...	...	...	...	...	4,470
Number of articles (various) destroyed	...	...	...	...	...	...	...	943

Disinfection Station Shelter.

Persons accommodated :—

Adults	...	...	...	...	...	...	...	2
Children	...	...	...	...	...	...	...	1

Mortuary.

Number of bodies received	...	...	...	...	...	...	...	9
Number of infectious bodies received	...	...	...	...	...	...	...	—
Number of bodies removed to Public Mortuary on Sanitary grounds	...	...	...	...	...	...	...	—
Number of bodies detained in Mortuary Chapel	...	...	...	...	...	...	...	4

TABLE No. 32.
MAGISTERIAL PROCEEDINGS DURING THE YEAR.
NUISANCE BY DOGS.

Nature of Nuisance or Complaint.	Date of Hearing.	Result.
Failing to comply with Council's byelaw <i>re</i> fouling of footway by dogs in King's Road.	19.10.37	Fined £1 0 0. 10/6 costs.
Failing to comply with Council's byelaw <i>re</i> fouling of footway by dogs in King's Road.	16.11.37	Fined 10/-.
Failing to comply with Council's byelaw <i>re</i> fouling of footway by dogs in Royal Hospital Road.	21.12.37	Fined 10/-.

Shops.—No case requiring special action under the Shops Act, 1934, came to notice during the year.

Smoke Abatement.—It is part of the work of a Sanitary Inspector to observe any nuisance arising from smoke. There were 6 actual recorded instances of observations during the year but the chimneys in the Borough have in fact been subject to daily observation by the Inspectors. Three complaints of smoke nuisance were received during the year and cautionary letters were sent to the offenders.

Fouling of Footways by Dogs.—The Borough Council has obtained sanction for a byelaw to deal with this nuisance. This has already been found useful, the condition of footways having improved considerably since the measure came into operation. During the year three prosecutions were taken for infringement of the byelaw, and a conviction obtained in each case.

Rats and Mice (Destruction) Act, 1919.—A Sanitary Inspector is authorised under this Act to act as Rat Officer in his district. The Act places the responsibility for rat preventive measures upon the occupiers of premises. During the year the Council provided rat catching varnish to applicants for the destruction of rats and bait traps were prepared and issued. In conjunction with the Works Department, investigation was made of a number of old sewers likely to be infested with rats and a large number of baits were laid. During the year many persons were advised as to the best means of dealing with the rat nuisance so far as it affected their respective premises.

Nuisance caused by Pigeons.—The Public Health (London) Act, 1936, enables a Sanitary Authority to take necessary steps to reduce the number of pigeons within its area.

Much difficulty has been experienced in carrying out pigeon destruction, owing to the opposition of a large section of the public.

During the year 1937, 25 pigeons were captured and humanely destroyed.

TABLE No. 33.

	Number of Premises.				Number of inspections during 1937.	Number of notices served during 1937.	Number of prosecutions during 1937.
	On register at end of 1936.	Added in 1937.	Removed in 1937.	On register at end of 1937.			
1. PREMISES USED FOR BUSINESS							
PURPOSES :—							
Milk Premises	73	2	—	75	170	3	—
Cowsheds	—	—	—	—	—	—	—
Ice Cream Premises	35	—	—	44	50	—	—
Butter and Margarine	10	—	—	10	10	—	—
Manufacturers and Dealers :—							
Fried Fish Premises	14	—	—	14	24	2	—
Fish Curers	5	—	—	5	10	—	—
Bakehouses	26	—	—	26	35	1	—
Slaughterhouses	1	—	—	1	7	—	—
Food Stalls	32	—	—	32	under daily observation	—	—
Offensive Trade Premises ...	—	—	—	—	—	—	—
2. PREMISES USED FOR HUMAN							
HABITATION :—							
Houses let in lodgings ...	605	—	—	605	32	—	—
Common Lodging Houses ...	2	—	—	2	12	1	—
Canal Boats	—	—	—	—	—	—	—

Premises and Occupations Controlled by Byelaws and Regulations.—The preceding Table No. 33 summarises the number and character of premises and occupations in the borough which are controlled by byelaws and regulations. Underground rooms and underground sleeping rooms, although controlled, the former under the Public Health (London) Act, 1936, and the latter under the Housing Act, 1936, are not registered.

Further reference to these premises and occupations will be found in the Sections of this report dealing with "Inspection and Supervision of Food and Housing."

Eradication of bed bugs.—One hundred and twenty-three premises were found to be infested with bed bugs, 31 being owned by the Borough Council and 192 owned privately. In each case disinfection was carried out. The work of disinfection is carried out by the staff of the Borough Council.

The methods employed for freeing infested houses from bed bugs consist of fumigation with Sulphur dioxide and the employment of contact spraying with an insecticide. Where necessary, owners are called upon to remove or loosen wooden fittings and strip walls in order to assist fumigation.

The furniture of each tenant removing to a Council Flat is subjected to treatment in a specially constructed Cyanide Van before entry into the new Flat.

During the year the furniture of seventy-two tenants was treated in this way.

Cyanide fumigation is carried out by the Westminster City Council, under an agreement with the Borough Council.

Factories, Workshops and Workplaces.—The Medical Officer of Health is required under Section 132 of the Factory and Workshops Act, 1901, to include in his annual report details of the administration of this Act in his district. The total number of factories, workshops and workplaces on the register at the end of the year was 217. The number of inspections of these premises was 260, which compares with 289 in 1936. Sanitary defects were found in 25 instances. The following Table No. 34 is in the form requested by the Home Office in order to ensure uniformity in the presentation of returns:—

TABLE No. 34.

FACTORIES, WORKSHOPS, WORKPLACES, AND HOMEWORKERS' PREMISES.

I.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

(Including Inspections made by Sanitary Inspectors).

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Occupiers prosecuted. (4)
Factories (including Factory Laundries)	20	—	—
Workshops (including Workshop Laundries)	235	2	—
Workplaces (other than Outworkers' premises)	5	—	—
Total	260	2	—

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

Particulars. (1)	Number of Defects.			Number of offences in respect to which Prosecutions were instituted. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
Nuisances under the Public Health Acts :—*				
Want of cleanliness	11	11	—	—
Want of ventilation	2	2	—	—
Overcrowding	2	2	—	—
Want of drainage of floors ...	—	—	—	—
Other nuisances	6	6	—	—
Sanitary accommodation :—				
Insufficient	1	1	—	—
Unsuitable or defective	3	3	—	—
Not separate for sexes	—	—	—	—
Offences under the Factory and Workshop Acts :—				
Illegal occupation of underground bakehouse (s. 101) ...	—	—	—	—
Other offences	—	—	—	—
(Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921).				
Total	25	25	—	—

* Including those specified in Sections 2, 3, 7 and 8 of the Factory and Workshops Act, 1901, as remediable under the Public Health Acts.

3.—HOME WORK.

	Outworkers' Lists, Section 107.						Outwork in Unwholesome Premises, Section 108.			Outwork in Infected Premises, Secs. 109, 110.		
	Lists received from Employers.		Number of Addresses of outworkers received from other Councils.	Number of Addresses of outworkers forwarded to other Councils.	Prosecutions.	No. of Inspections of Outworkers Premises.	Instances.	Notices served.	Prosecutions.	Instances.	Orders made (Sec. 109).	Prosecutions. (Sec. 109, 110).
	Lists.	Chelsea Outworkers.										
1936	16	9	22	148	—	36	—	—	—	—	—	—
1937	13	7	20	122	—	30	—	—	—	—	—	—

Public Mortuary.—Under the Public Health (London) Act, 1936, section 234, every sanitary authority must provide and fit up a proper place for the reception of dead bodies before interment.

The Chelsea Mortuary is situated in Arthur Street.

Number of bodies received in Mortuary during 1937	...	...	9
1. To await Inquests :—			
(a.) Infectious	...	...	—
(b.) Non-infectious	...	...	7
2. Sanitary grounds	...	...	—
Number of Post Mortem examinations	...	...	3
Number of bodies detained in Mortuary Chapel	...	...	4

Rag Flock.—No premises for the manufacture of rag flock are maintained in the Borough and no samples of rag flock have been taken during the year.

Offensive Trades.—At the present time there are no offensive trades in the Borough.

Swimming Baths and Pools.—There is one Swimming Bath owned by the Borough Council, located in Manor Street, open to the public. No privately owned Swimming Baths are known to the Department.

A chlorination filter system is in operation.

Two samples of the Baths water were submitted for examination and the Bacterial content was found to be in all respects satisfactory.

Pharmacy and Poisons Act, 1933.—During the year, fifty-six applications were received from traders for entry in the Council's list of authorised sellers of poisons. In each case the application was approved, after investigation.

SECTION IV.—HOUSING.

In accordance with the instructions of the Ministry of Health, the following tabular statement has been prepared :—

TABLE No. 35.

HOUSING STATISTICS FOR THE YEAR.

1. INSPECTION OF DWELLING-HOUSES DURING THE YEAR :—	
(1) (a.) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	547
(b.) Number of inspections made for the purpose ...	3472
(2) (a.) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	170
(b.) Number of inspections made for the purpose ...	1360
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	—
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	170
2. REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES :—	
Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	217
3. ACTION UNDER STATUTORY POWERS DURING THE YEAR :—	
(a) Proceedings under sections 9, 10 and 16 of the Housing Act, 1936 :—	
(1) Number of dwelling houses in respect of which notices were served requiring repairs	—
(2) Number of dwelling houses which were rendered fit after service of formal notices :—	
(a.) By owners	—
(b.) By Local Authority in default of owners ...	—

(b) Proceedings under Public Health Acts :—		
(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	240	
(2) Number of dwelling houses in which defects were remedied after service of formal notices :—		
(a.) By owners	23	
(b.) By Local Authority in default of owners ...	—	
(c) Proceedings under sections 11 and 13 of the Housing Act, 1936 :—		
(1) Number of dwelling houses in respect of which Demolition Orders were made	—	
(2) Number of dwelling houses demolished in pursuance of Demolition Orders	—	
(d) Proceedings under section 12 of the Housing Act, 1936 :—		
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	—	
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	—	
4. HOUSING ACT, 1936.—PART IV.—OVERCROWDING.		
(a) (i) Number of dwellings overcrowded at end of year	535	
(ii) Number of families dwelling therein	571	
(iii) Number of persons dwelling therein	3140	
(b) Number of new cases of overcrowding reported during the year (due to increase of children's age) ...	24	
(c) (i) Number of cases of overcrowding relieved during the year	32	
(ii) Number of persons concerned in such cases ...	176	
(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding.	None	
(e) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report.		

Although overcrowding conditions in Chelsea have been much less prevalent than in many other metropolitan boroughs, definite alleviation has taken place since the Housing Act of 1935 became operative. Forty-seven cases of overcrowding in houses owned by the Local Authority have been abated.

Staff.—The staff engaged on housing work during the year consisted of four Sanitary Inspectors, each carrying out all the duties of a Sanitary Inspector in the district allocated to him. One of these was mainly engaged in duties connected with the Housing Regulations, 1925.

HOUSING CONDITIONS IN THE BOROUGH.

General Observations.—It is difficult to discuss the subject of housing in Chelsea without some understanding of the peculiar conditions which appertain to the district.

Probably in few London boroughs have there been so many alterations, consequent on demolitions and reconstructions, during the past 40 years, as in Chelsea. The process of reconstruction is still in progress, though largely suspended by the operation of the Rent Restrictions Acts. The developments which have taken place have arisen from the fact that a very considerable proportion of Chelsea is comprised within the areas of two large estates—the Cadogan Estate and the Sloane Stanley Estate. Many of the building leases on these estates were granted early in the 19th century and a large number have already expired. A certain proportion of demolition of small property has been due to the acquisition of land by large trading corporations.

Owing to the proximity of the eastern boundary of the Borough to Hyde Park and Belgravia, and to the attractiveness of the Embankment forming the southern boundary, residential values in these neighbourhoods have greatly appreciated in recent years, the price of land has been correspondingly increased, and the old type of small house, accommodating the small trader and the artisan or labourer, has been replaced by modern houses and mansions let in flats commanding high rents. The process of development has been largely in the hands of Estate Companies, who have purchased the reversionary interests of the ground landlords, and proceeded to carry out the demolitions and reconstructions, as soon as the property came into their possession. Until subsequent to the War, no restriction operated, nor did any liability attach to Estate Companies, conducting operations of this nature, to make any provision for rehousing the working classes displaced.

Despite the difficulties of the problem, in Chelsea a considerable amount of accommodation had been provided for the working classes during the years preceding the outbreak of War. This had been effected by municipal undertakings, by private enterprise and by the operation of benevolent agencies and trusts.

Sufficiency of Supply of Houses.—Municipal undertakings for the housing of the working classes carried out by the Borough Council prior to 1914 are shown in Table No. 36:—

TABLE No. 36.
PRE-WAR HOUSING.

PROPERTIES OWNED AND MANAGED BY THE CHELSEA BOROUGH COUNCIL.

Property.	No. of Flats	Population (approx.)	Rents.
Sir Thomas More Buildings, Beaufort Street	262	725	4/11 to 13/10 per week.
Pond House, Pond Place ...	32	125	10/8 to 14/9 per week.
Onslow Dwellings, Pond Place ...	108	312	6/6 to 8/7 per week.
Grove Buildings, Manor Street	120	220	4/2 to 7/8 per week.
	522	1,382	

Private enterprise, benevolent agencies and trusts had also made very important contributions to housing in Chelsea prior to 1914. These are shown in Table No. 37.

TABLE No. 37.

PROPERTIES ERECTED BY PRIVATE ENTERPRISE, BENEVOLENT AGENCIES, TRUSTS, ETC.

Property.	No. of Flats.	Population (approx.)	Rents.
Sutton Model Dwellings, Cale Street	660	2,037	3/5 to 10/10 per week.
Lewis Trust Dwellings, Ixworth Place	398	1,299	3/1 to 10/3 per week.
Marlborough Buildings, Walton Street	162	391	9/0 to 20/0 per week.
Guinness Buildings, Draycott Avenue	303	711	2/3 to 7/5 per week.
Peabody Buildings, Lawrence Street	68	163	3/8 to 8/4 per week.
Chelsea Park Dwellings, King's Road	54	114	3/5 to 12/6 per week.

It will be seen that in Chelsea at the outbreak of war there was available accommodation for about 7,000 persons of wage-earning class—an amount which, in proportion to population, was considerably higher than that obtaining in any other metropolitan borough.

Since the war, the economic situation and other factors, particularly the shortage of and greatly increased cost of building land in Chelsea have rendered an already difficult situation still more difficult. The Housing Committee of the Borough Council has been actively engaged in investigating possible sites in connection with further housing schemes and from time to time various schemes have been formulated by the Council and submitted to the Ministry of Health for approval. Of the schemes prepared and submitted to the Ministry, five have fortunately materialised, approval of the others not being obtained on the ground that the cost of the land was much higher than the price the Ministry could sanction for the purchase of land to be used for the erection of buildings to house the working classes. These buildings are now fully occupied. Details of each approved scheme are shown in table No. 38 (Page 57).

Reviewing the history of the past 40 years, it would appear that the housing policy of the Borough Council has been firstly to preserve, where possible, in areas threatened with demolition, such working class accommodation as was of reasonably good type; and secondly, to provide accommodation by means of new buildings in an accessible situation within the Borough for those persons of the working class who are average representatives of their class, and for whom the necessities of their trade or calling render residence within the Borough desirable or necessary.

It cannot be disputed that at the present time in Chelsea, as in other Metropolitan Boroughs, there is considerable dearth of accommodation both for the working classes, and for the classes in receipt of small salaries or earnings, and that, as elsewhere, this situation is primarily due to the restrictions imposed upon the building trades during the war and the economic disturbances which have succeeded it.

It will, however, be evident from the details already given that the existing shortage of housing accommodation in Chelsea is being most adequately dealt with and that the extremely difficult problems which confronted the Borough Council subsequent to the war are gradually being overcome.

Overcrowding.—During the period 1st November—4th December, 1935, a Survey of Working Class dwelling houses in the Borough was carried out in accordance with the requirements of Part 1, section 1, of the Housing Act, 1935. The total number of houses dealt with and recorded was 5,112. The total number of families comprised in the enumeration was 8,496, and judged by the standard laid down in the Housing Act, 1935, 749 of these families were found to be living in overcrowded conditions—a percentage of 8·78 for the Borough as a whole. The problem of abating overcrowding is receiving close consideration by a Special Committee of the Council. Many cases when approached as to the desirability of having their names submitted to the County Council, with a view to provision of housing on one of the Council's Estates, decline to consider the proposition, on the ground that the distance of the County Council's Estates from their work is too great. Others have become attached to the district and will not contemplate forsaking existing interests and associations. Owing to the extreme difficulty of finding alternative accommodation it has not been found practicable to deal with more than a proportion of the cases of overcrowding during the

year. Whenever possible, arrangements are made with the London County Council for the provision of a house for the overcrowded family. Forty-five such families obtained accommodation on the Council's Estates during the year. Further, when vacant tenements become available in the Borough Council's dwellings, preferential treatment is as far as possible given to cases of overcrowding. With a view to preventing a recurrence of overcrowding in premises which are being vacated because of their overcrowded condition, a cautionary letter is always sent to the landlord concerned, warning him that action will be taken against him in the event of a recurrence of overcrowded conditions in the premises.

During the period 7th January to 25th March, a further survey of working-class dwelling-houses in the Borough was carried out in accordance with the Housing Act, 1936.

The purpose of the survey was to ascertain the permitted number of persons entitled under the Act to occupy a working-class dwelling. This necessitated the measurement of each room in 5,112 houses.

Under Section 62 of the Housing Act, a Landlord or Occupier of a dwelling-house may apply to a Local Authority, and it is the duty of the Local Authority to inform the applicant, in writing, of the number of persons constituting the permitted number in relation to the house.

Ninety-four such applications were made during the year in respect to 2,938 houses and covering 3,953 lettings.

Fitness of Houses.—The general standard of housing in the Borough is satisfactory. There has been a very definite improvement in housing conditions during the past ten years. The vast majority of houses have an adequate internal water supply and adequate sanitary accommodation within their own curtilage. The constant vigilance of the Sanitary Inspectors has impressed upon both owners and tenants their determination that every dwelling house shall be maintained in a reasonable state of repair and that there shall be systematic observance of cleanliness.

While the great majority of these houses are structurally sound, a number of them are old, worn out and below the modern standards of sanitation and convenience. It is probable that only a minority of the tenants would be able to pay economic rents for alternative accommodation, having regard to the rents that require to be fixed for new dwellings, owing to the greatly increased cost of land and construction during recent years.

Another problem is caused by certain old people, usually women. Many of these live alone in a single room with no one to look after them. Frequently they rely almost entirely on the Old Age Pension for sustenance. Gradually growing feebler with the passage of time, they eventually become unable properly to care for themselves or their homes. Although every means of persuasion is tried, these cases usually decline to enter a Poor Law Institution and the condition often persists for a lengthened period. Fortunately, this problem has now been met by legislation. Under the Public Health (London) Act, 1936, it is possible to arrange for the removal of such cases to a suitable institution.

While in the majority of instances the defects found to exist in unfit houses are due to the lack of proper management and supervision by owners, from time to time complaints are made by the owners regarding the difficulties they experience in keeping their property in a reasonable state of repair because of the dirty and destructive habits of a number of their tenants. It is alleged that, through carelessness or wilful damage by tenants, repairs and cleansing have to be carried out with unreasonable frequency and that, as a consequence, it is impossible to maintain even the minimum requirements of the Local Authority without incurring financial loss.

Investigation has shown that these statements are often well-founded, especially in the poorer class tenement lodging houses where no responsible caretaker or landlord is resident. To lighten the difficulties of the owner in these cases, effort is made, as far as possible, to keep in view such powers as a Local Authority has of holding the tenant responsible for defects resulting from his neglect or default.

The total number of dwelling houses inspected for housing defects was 547, the number found not to be in all respects reasonably fit for human habitation being 240. The number rendered fit in consequence of informal action by the Sanitary Inspectors was 217, and the number in respect of which statutory notices were served requiring defects to be remedied was 23. No case came to the knowledge of the Department in the course of the year of an underground room being illegally used for sleeping purposes.

No application under the Increase of Rent and Mortgage Interest (Restrictions) Acts was made by an occupier of a dwelling house, that the house occupied by him was not in a reasonable state of repair.

Unhealthy Areas.—One representation was made under the Housing Act during the year. No complaints that areas were unhealthy have been received.

Byelaws relating to Houses and Houses Let in Lodgings.—Existing byelaws relating to houses are, on the whole, found to be fairly satisfactory in their working.

Housing Survey.—House-to-house inspection was carried out during the year, as provided by statute, 170 houses being inspected and recorded by the Inspectors.

TABLE No.
POST-WAR HOUSING.

Name of Undertaking.	Area of Site.	Total Cost.	Date of Completion.	Number of Flats.	Population.	Rents.	Remarks.
Hortensia House, Hortensia Road.	1 acre, 12 poles.	£49,000	1925	56	202 persons.	22/10 to 31/- per week.	Rents drawn up on an economic basis on instructions of Ministry of Health.
Guinness Trust Buildings, King's Road.	1 acre, 3 roods, 28½ poles.	£21,200 (cost of site).	1929	160	747 persons.	4/- to 13/- per week, exclusive of rates.	Site leased for a term of 99 years at a nominal rent by the Borough Council to the Guinness Trust.
Peabody Trust Buildings, Manor Street.	1 acre, 16 poles.	£19,000 (cost of site).	1931	112	510 persons.	5/- to 13/6 per week, exclusive of rates.	Site leased for a term of 99 years at a nominal rent by the Borough Council to the Peabody Trust.
World's End Passage Improvement Scheme.	2 acres, 17 poles.	£7,300 (approximate cost of site).	1935	64	327 persons.	5/- to 16/6 per week.	Site leased for a term of 99 years at a nominal rent by the Borough Council to the Chelsea Housing Improvement Society. The Estate is managed by a representative of The Women House Property Managers.
Chelsea Manor Buildings, Manor Street.	2 acres, 35 poles.	£61,862	—	94	214 persons	6/6 to 18/- per week.	Site purchased and buildings being erected by Borough Council.
				486	2,000		

SECTION V.—INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.—In accordance with statutory enactments, the Council keeps a register of persons carrying on the trade of dairymen or purveyors of milk and no person is permitted to carry on the trade in the Borough unless he is registered. The Council is empowered to remove the name from or refuse to enter upon the register the name of any person selling or proposing to sell milk on premises which are for any reason unsuitable for the purpose.

The Milk and Dairies (Amendment) Act, 1922, further empowers the Council to refuse to enter the name of any person in the Register, or to remove the name of any person from that Register, if it is shown to the Council's satisfaction that the public health is or is likely to be endangered by any act or default of such person in relation to the quality, storage or distribution of milk.

The premises at which registered purveyors of milk carry on their business have been subject to frequent inspection. During the year two applications were made for registration as purveyors of milk, which, after appropriate investigation, were approved by the Council. In Table No. 33 (page 46) is shown the alterations which took place in the Register of Milk Purveyors during the year.

During the year there were 170 inspections of dairies and milkshops made in the Borough. Notices were served requiring remedy of defects found on three of the premises visited. There are no cowsheds in the district.

Milk (Special Designations) Order.—During the year the Milk (Special Designations) Order, 1936, came into effect.

This Order reduced the number of Grades from five to three and the following Table, No. 39, shows the number of licences granted for the sale of milk under the special designations prescribed by the Order of 1936. There were 25 applications from 11 retailers under the Milk (Special Designations) Order for licences to sell special grades of milk. All these licences were granted. In each case the licence was granted for the purpose of authorising the dealer to sell specially designated milk from shops within the Borough. No application has been made for a licence giving authority to set up bottling or pasteurising establishments in the Borough.

TABLE No. 39.

LICENCES GRANTED UNDER MILK (SPECIAL DESIGNATIONS) ORDER.

Licences granted under Milk (Special Designations) Order.	1937.
To sell "Accredited" Milk	1
To sell "Tuberculin Tested" Milk	8
To sell "Pasteurised" Milk	14
Supplementary Licences	2
	25

Further reference to milk is made in the Public Analyst's Report for the year.

Public Health (Meat) Regulations, 1924.—Meat inspection is carried out by the Sanitary Inspectors. Arrangements have been made whereby adequate notice of the time of slaughter is obtained. During the year 5 sheep were inspected at the time of slaughter. No application for the marking of meat under the Regulations has been received.

Instructions under the Regulations have been formulated to deal with stalls, shops, stores and vehicles. These have been approved by the Council, and circulated amongst traders concerned. No meat stalls exist in the Borough at the present time.

INSPECTION OF MEAT. CARCASSES INSPECTED AND CONDEMNED.

	Cattle, excluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number killed (if known) ...	—	—	—	5	—
Number inspected ...	—	—	—	5	—
All diseases except Tuberculosis. Whole carcasses condemned ...	—	—	—	—	—
Carcasses of which some part or organ was condemned. ...	—	—	—	—	—
Percentage of the number in- spected affected with disease other than tuberculosis. ...	—	—	—	—	—
Tuberculosis only.					
Whole carcasses condemned ...	—	—	—	—	—
Carcasses of which some part or organ was condemned. ...	—	—	—	—	—
Percentage of the number in- spected affected with tuber- culosis ...	—	—	—	—	—

Slaughterhouses.—There is now only one private slaughterhouse in the Borough and 12 inspections of these premises were made during 1937. In compliance with the byelaws prescribing humane slaughtering, approved methods of slaughter are employed at these premises. There is no public abattoir in the Borough.

Table No. 33 (page 46) shows, in the form required by the Ministry of Health, the number of private slaughterhouses in use in the Borough on the dates indicated.

Bakehouses.—There are 26 bakehouses in the Borough, and 35 inspections of these premises were made during the year. One notice was served for the cleansing of walls and ceilings.

Ice Cream Vendors.—At the end of the year, 44 premises were shown in the Register as places where ice-cream is prepared or sold. There were 50 inspections of these premises as compared with 36 in the previous year. This trade is mainly regulated under the Public Health (London) Act, 1936. It is an offence to store ice-cream in a sleeping room or in any shed or room in which there is an inlet to a drain. Vendors of ice-cream must notify the occurrence of infectious disease among their employees or persons living on their premises. The Act also provides that every itinerant vendor shall exhibit on his barrow the name and address of the person from whom the ice-cream has been obtained.

Fried Fish Vendors.—At the end of the year there were 14 premises in which the frying of fish was carried on and 24 inspections of these premises were made. It is found that a reasonable standard of cleanliness is now being maintained, but it is necessary for the Inspectors to maintain a constant vigilance to impress upon the vendors the necessity for the systematic observance of cleanliness.

Inspection of Other Premises where Food is Prepared or Offered for Sale.—The Inspectors keep under frequent observation all other premises where food is prepared for or exposed for sale. Included in this category are restaurants and premises used by provision dealers, butchers, fishmongers and greengrocers for the purposes of their trades.

Table No. 33 (page 46) shows, for the past two years, the number of inspections of premises where food was prepared for or exposed for sale.

Unsound Food.—On one occasion during the year, unsound food was surrendered and destroyed.

Included in the unsound food surrendered and destroyed during the year was :—

38 lb. Parsnips.	1½ lb. Cherries.
	14 lb. Apples.

No carcasses were destroyed on account of Tuberculosis.

Food Poisoning.—No case of food poisoning occurred during the year.

Food and Drugs (Adulteration) Act, 1928.—Four hundred samples, including 92 samples of milk and 7 samples of cream, were taken and submitted for analysis during the year. These samples were investigated by the Public Analyst to the Borough, whose Report is set out in the appendix.

Each of the four male Sanitary Inspectors is appointed an Inspector under the Acts. Under their direction, the taking of samples is effected by individuals temporarily employed for the purpose, the services of persons outside the Borough being frequently utilised.

The samples procured are of two kinds—formal and informal. Formal samples are those taken strictly in conformity with the Act. Informal samples are those taken without these strict formalities and afford useful indication of the conditions without disclosing to the vendor that the object of purchase is analysis.

No legal proceedings are possible in respect of an informal sample, but, when adulteration is discovered, formal samples are obtained immediately and necessary action is taken on receipt of the analytical report regarding them.

During the year no sample of milk was found to be adulterated to such a degree as to justify legal proceedings. Certain other food samples were found to be inferior, but not to such an extent as to justify legal action. In each of these cases a warning letter was sent to the Vendor concerned.

The work carried out under the Food and Drugs (Adulteration) Act, during the year is summarized in the Public Analyst's Report in the appendix.

The Public Health (Preservatives, etc., in Food) Regulations.—All samples of milk and cream taken during the year were submitted to examination for preservatives. No evidence of the presence of preservatives was obtained sufficient to warrant legal proceedings.

Margarine.—No application for transfer of registration was received during the year from wholesale dealers in margarine.

Bacteriological Examinations.—Arrangements have also been made with the Clinical Research Association for the bacteriological examination of samples of milk under the Milk (Special Designations) Orders. Six samples were submitted for investigation during the year, each of which was found to be satisfactory in character.

DISSEMINATION OF KNOWLEDGE AS TO NUTRITION.

Advice as to the necessity for a high standard of purity and quality in relation to food is given by the staff of the Public Health Department. In addition, lectures and film demonstrations on Health topics, including Diet, are given from time to time at the premises of the Chelsea Health Society. Leaflets are also issued to expectant and nursing mothers which are of great assistance in focussing attention on this important subject.

The desire of the public to consume a natural product, or at least that they should be made aware if offered an artificial substitute, has found expression in the Artificial Cream Act, 1929.

Shell-fish (Molluscan).—There are no shell-fish beds or layings in the Borough. No markets for the sale of shell-fish by wholesale exist in the district.

SECTION VI.—INFECTIOUS DISEASES.

(a) Infectious Diseases Generally.

DISEASES COMPULSORILY NOTIFIABLE IN THE BOROUGH.

Acute Poliomyelitis.	Diphtheria.
Acute Polio-encephalitis.	Membranous Croup.
Acute Encephalitis Lethargica.	Dysentery.
Acute Primary Pneumonia.	Erysipelas.
Acute Influenzal Pneumonia.	Malaria.
Cerebro-spinal Fever.	Puerperal Fever and Puerperal Pyrexia.
Chicken Pox.	Relapsing Fever.
Plague.	Small-pox.
Anthrax.	Typhus Fever.
Glanders.	Tuberculosis.
Hydrophobia.	Scarlatina or Scarlet Fever.
Cholera.	Typhoid or Enteric Fever.
Continued Fever.	Food Poisoning.
Ophthalmia Neonatorum.	

NOTIFICATIONS DURING THE YEAR.

The total number of notifications, excluding duplicates, was 441. Of this figure, 72 were notifications of Pulmonary Tuberculosis and 12 of Non-pulmonary Tuberculosis. In addition, 68 cases of Measles (including German Measles), came to the knowledge of the Department, mainly through the School Authority.

As compared with the previous year, there was an increase of 7 in the number of notifications of Diphtheria. The number of notifications of Scarlet Fever (96) represents a decrease of 58, as compared with that for 1936. The number of notifications of Tuberculosis was 84, a decrease of 16, as compared with that for 1936.

Table No. 40 shows the total number of cases of infectious disease notified during the year, the distribution by age-groups, and the number of cases treated in hospitals :—

TABLE No. 40
CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR.

	Cases notified in Chelsea.														Cases notified in each Ward.					Removed to various Hospitals
	At all Ages.	Under 1 Year.	1—2 Years.	2—3 Years.	3—4 Years.	4—5 Years.	5—10 Years.	10—15 Years.	15—20 Years.	20—35 Years.	35—45 Years.	45—65 Years.	65 and Upwards.	Stanley.	Cheyne.	Church.	Hans Town.	Royal Hospital.		
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Chicken-pox	75	3	4	4	18	12	26	5	2	—	—	1	—	58	5	11	1	—	18	
Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Diphtheria	79	—	2	7	1	6	23	16	8	13	2	1	—	53	5	19	1	1	79	
Erysipelas	18	—	—	—	—	—	1	—	—	2	1	9	5	7	2	8	—	1	17	
Scarlet Fever	96	1	3	7	7	10	25	10	9	20	3	1	—	42	21	16	8	9	95	
Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Enteric Fever	3	—	—	—	—	—	—	—	—	3	—	—	—	2	—	—	1	—	1	
Puerperal Fever	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	1	
Puerperal pyrexia	7	—	—	—	—	—	—	—	—	6	1	—	—	3	1	2	—	1	6	
Cerebro-spinal Fever	1	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	1	
Ophthalmia Neonatorum	4	4	—	—	—	—	—	—	—	—	—	—	—	2	—	2	—	—	1	
Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Polio-encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Dysentery	5	—	1	—	—	—	1	—	—	3	—	—	—	3	—	1	1	—	4	
Acute Primary Pneumonia	52	5	2	2	1	1	3	1	2	10	3	17	5	27	3	14	5	3	52	
Acute Influenzal Pneumonia	16	—	—	—	—	—	—	—	—	4	4	6	2	5	6	3	1	1	16	
Total	357	13	12	20	27	29	79	32	21	62	14	36	12	203	43	77	18	16	291	
Tuberculosis :—																				
Pulmonary	72	—	—	—	1	—	—	3	10	23	10	23	2	33	10	19	8	2		
Non-Pulmonary	12	—	—	1	—	—	—	—	1	7	1	—	2	3	2	2	5	—		
Totals (Tuberculosis)	84	—	—	1	1	—	—	3	11	30	11	23	4	36	12	21	13	2		
Totals	441	13	12	21	28	29	79	35	32	92	25	59	16	239	55	98	31	18		

No cases of Small-pox, Cholera, Typhus Fever, Poliomyelitis, Encephalitis Lethargica, Polio-Encephalitis, Malaria, Continued Fever, Relapsing Fever, Plague, Anthrax, Glanders or Hydrophobia were notified during the year.

DIPHTHERIA.

Notifications.—During the year 79 cases of diphtheria were notified, as compared with 72 in the previous year. The incidence of the disease during the past two years is shown in Table No. 41.

Deaths.—Two deaths from the disease occurred during the year.

Return Cases.—One "return" case of the disease occurred during the year.

TABLE No. 41.

Year	Cases Notified.	Percentage of Removals.	Deaths	Case Mortality Rate.	Percentage of cases of School age (3-13 years)	Month of greatest prevalence.	Bacterioscopic Diagnosis, Lister Institute.				
							No. of Specimens submitted	Positive.	Percentage Positive.	Negative.	Percentage Negative.
1936	72	93	1	1.5	68	Jan.	247	23	9.0	224	91.0
1937	79	100	2	2.7	63	Oct.	288	20	7.0	268	93.0

It will be observed that there was an increase in the number of cases notified in 1937. The percentage of removals to the L.C.C. Hospitals was high, and the case mortality rate was higher than that for 1936.

Information was received from the L.C.C. that 6 of the cases sent to Hospital in the course of the year proved not to be suffering from diphtheria.

DIPHTHERIA IMMUNISATION CLINIC.

In April, 1934, the Borough Council approved an annual grant of £50 for immunisation against diphtheria and Schick testing to be carried out at the Violet Melchett Infant Welfare Centre for children under 5 years of age on the register of the Centre.

Early in 1935, the Borough Council arranged to extend these facilities to children of school age, the Borough Council contributing towards the cost of this service.

A weekly clinic has been held during the year.

In co-operation with the London County Council, leaflets have been prepared and distributed at the various schools in the Borough. Attendances of elementary school children for immunisation against diphtheria at the clinic are allowed to count as attendances at school.

The following table gives details of the work of the clinic during the past two years.

TABLE 41A.

Year	No. of new cases.	Preliminary Schick Tested.		Com-menced treat-ment without Schick Test.	Natur-ally Immune	Immunised.		Discon-tinued treat-ment and re-moved from register.	No. under treat-ment at end of year.
		Pre-School Age.	School Age.			Pre-School Age.	School Age.		
1936	221	3	49	135	20	115	55	7	80
1937	209	—	49	162	14	135	60	10	76

Diphtheria Anti-toxin.—Anti-toxin is supplied, in prophylactic and in curative doses, free of charge to any medical practitioner requiring it for Chelsea patients. An anti-toxin syringe, needles and steriliser are also available. Further details will be found on page 28.

SCARLET FEVER.

Notifications.—During the year, 96 cases of Scarlet Fever were notified, the figure for 1936 being 154. Information was received from the L.C.C. Hospitals that 4 of the cases proved not to be Scarlet Fever. No "return" case of the disease occurred during the year.

Deaths.—There were no deaths from Scarlet Fever during the year.

Table 42 shows the incidence of the disease during the past two years.

TABLE No. 42.

Year.	Cases Notified.	Percentage of Removals.	Deaths.	Case Mortality Rate.	Percentage of cases of School-age 3-13 years.	Month of greatest pre-valence.
1936	154	96	—	—	65	June
1937	96	99	—	—	55	Jan.

No application of the Dick test or of artificial immunization against Scarlet Fever has yet been made in the Borough.

MEASLES (Including German Measles).

Statistics.—This disease is not notifiable. Information as to cases occurring in the Borough is derived from the School Authorities, Hospitals and medical practitioners. In addition, many cases are discovered by

the Health Visitors in the course of their duties. Children suffering from the disease are visited by the Health Visitors at frequent intervals and advice is given as to the steps necessary to avoid complications.

On request by the School Medical Officer of Health of the London County Council, advice leaflets are supplied to the Head Teachers of schools in the area affected with an outbreak of Measles. These leaflets are distributed to the parents and guardians of the children attending such schools. Co-operation between the school nurses and the Borough Health Visitors has been arranged.

The number of cases coming to the knowledge of the Department during the year was 68, as compared with 502 in the preceding year. Of the total number (68) 43 were under five years of age.

Deaths.—There was no death from measles during the year.

Visiting and Nursing.—During the year, 103 visits and re-visits were made by the Health Visitors. Cases are also visited by the District Nurses whenever circumstances render this necessary. Thirty-six visits were made in 1937.

Removal to Hospital.—Cases of Measles are received in the Hospitals of the London County Council.

ENTERIC FEVER.

Notifications.—During the year three cases under the Enteric Fever Group were notified in Chelsea. One of these cases was treated in hospital.

The history of each case was thoroughly explored, but it was found impossible to trace an unvarying causative factor between the various cases.

No specimen of blood was examined during the year for the Widal reaction.

Deaths.—There was no death from this disease during the year.

PNEUMONIA, MALARIA AND DYSENTERY.

These diseases are compulsorily notifiable under the Public Health (Infectious Diseases) Regulations, 1927.

During the year the following numbers of cases were notified :—

Pneumonia	...	...	...	...	...	...	...	68
Malaria	...	...	...	...	...	...	...	None
Dysentery	...	...	...	...	...	...	...	5

Pneumonia.—All primary pneumonias, lobar or lobular, are notifiable. The only secondary pneumonia which is notifiable is influenzal pneumonia.

The notifications and deaths from pneumonia during the past two years were as follows :—

				Notifications.			Deaths. (All Forms)
1936	...	...	...	87	...	...	51
1937	...	...	...	68	...	...	44

Nursing Provision.—By arrangement with the Chelsea District Nursing Association, all cases of Pneumonia receive adequate nursing attention where the circumstances render this necessary. Three hundred and eighty visits were made during the year.

Malaria.—The Regulations provide that the Medical Officer of Health shall take all practical steps to ensure that persons suffering from Malaria are supplied with sufficient mosquito netting; receive adequate quinine treatment during the attack and subsequently; and receive appropriate advice as to precautions necessary to prevent the spread of the disease.

No case of Malaria was notified during the year.

Dysentery.—The five cases notified during the year were due to infection from the Sonne bacillus.

PUERPERAL FEVER AND PUERPERAL PYREXIA.

One case of Puerperal Fever and seven cases of Puerperal Pyrexia were notified during the year. Details of these cases are set out in the following table :—

TABLE No. 43.

	Total number of cases notified.	Treatment in Hospital.	District Nurses in attendance	Council's Obstetri- cian called in.	Deaths.
Puerperal Fever ...	1	1	0	0	0
Puerperal Pyrexia ...	7	6	0	0	0

The notifications of puerperal fever and puerperal pyrexia during the past two years were as follows:—

				Puerperal Fever.			Puerpera Pyrexia.
1936	...	...	...	2	...	...	6
1937	...	...	...	1	...	...	7

With the sanction of the Ministry of Health the Borough Council has made arrangements for the services of a skilled obstetric consultant in puerperal cases and in cases of difficult labour, when desired by the medical practitioner in attendance. One case of difficult labour required consultation during the year.

OPHTHALMIA NEONATORUM.

Under the Public Health (Ophthalmia Neonatorum) Regulations, 1926, the duty of notifying a case of Ophthalmia Neonatorum is placed solely upon the medical practitioner in attendance. This disease is defined as a purulent discharge from the eyes of an infant, commencing within twenty-one days from the date of its birth.

Four cases of ophthalmia neonatorum were notified during the year. As required by the Ministry of Health, particulars of the notified cases are set out in the following table :—

TABLE No. 44.

OPHTHALMIA NEONATORUM.

Cases.			Vision Un- impaired.	Vision Impaired.	Total Blindness.	Deaths.
No. Notified.	Treated.					
	At Home.	In Hospital.				
4	3	1	4	—	—	—

Seven cases of the disease were notified in the previous year.

Nursing—By arrangement with the Chelsea District Nursing Association, home nursing is provided for infants suffering from this disease. Sixty-nine visits were made during the year (two cases).

In addition to notified cases of Ophthalmia Neonatorum, four cases of inflammation of the eyes were reported by the Medical Officer of Health of the London County Council. These cases were visited by the Health Visitors and action taken where necessary.

POLIOMYELITIS AND POLIO-ENCEPHALITIS.

No case of Poliomyelitis or Polio-Encephalitis was notified during the year. There was one death (a male, aged 51 years) from Polio-Encephalitis.

ENCEPHALITIS LETHARGICA.

No case of Encephalitis Lethargica was notified during the year. Twelve visits to old cases of Encephalitis Lethargica were made by the Woman Sanitary Inspector.

Encephalitis Lethargica is undoubtedly infectious, but the infectivity is of very low nature. The sequelæ may be serious, as in most cases some permanent damage to the brain tissue occurs. The disease was made compulsorily notifiable from 1st January, 1919.

Deaths.—There was one death (a male, aged 52 years) from this disease during the year.

CHICKEN POX.

With the approval of the Ministry of Health, the Borough Council made the disease known as chicken pox notifiable in the Borough on, and from, the 12th August, 1929.

Seventy-five notifications were received during the year. Of these, 18 were treated in hospital.

SMALL POX.

No case of small pox was notified in Chelsea during the year. Appropriate action was taken as regards contacts of cases notified in other boroughs.

Vaccination.—No vaccinations have been performed by the Medical Officer of Health under the Public Health (Smallpox Prevention) Regulations, 1917.

I am indebted to Mr. A. B. J. Hayden, Vaccination Officer for Chelsea, for the following Table which gives particulars as regards vaccination in respect of children whose births were registered in the Borough for the year 1936. The figures for the year 1937 are not yet available.

TABLE No. 45.

VACCINATIONS.

	Number.	Percentage of births registered.
Births registered in 1936	1022	100
Successfully vaccinated	600	58.7
Insusceptible of vaccination	1	0.1
Had Small Pox	—	—
Statutory Declaration of conscientious objection ...	147	14.4
Died unvaccinated	47	4.6
Postponed by medical certificate	2	0.2
Removed to other districts	122	11.9
Removed to unknown addresses	98	9.6
Not accounted for in previous columns	5	0.5

The above table is based on total births occurring in Chelsea and is not confined to parishioners.

The total number of successful primary vaccination certificates (children under 14 years of age) received during the year 1937 was 772.

VENEREAL DISEASE.

The London County Council is the Authority responsible for the provision of facilities for the diagnosis and treatment of venereal disease and special clinics are held in various hospitals. The nearest hospital for Chelsea residents is St. George's Hospital.

ARRANGEMENTS FOR DISINFECTION AND DISINFESTATION AND THE EXTENT OF THEIR USE.

The Borough Council maintains a Disinfecting and Cleansing Station situated at 9a, Lots Road, Chelsea, adjoining the river.

Disinfection.—The disinfecting staff numbers three. A steam disinfecter is provided. An appropriate motor vehicle is utilised for the

conveyance of infected and disinfected articles to and from the Disinfecting Station.

Disinfection in connection with the notifiable infectious diseases is carried out free of charge. Applications for special disinfection, not associated with the notifiable infectious diseases, are considered, and, if the work of the Department permits it, are carried out at the expense of the applicant. Twenty-four such disinfections were carried out during the year, the total charges amounting to £17 18s. 6d.

On page 44 will be found a summary of the work done by the disinfecting staff during the year.

Infectious Disease Shelter.—Under the Public Health (London) Act, 1936, Section 195 (4), temporary house accommodation with necessary attendance is provided by the Borough Council free of charge at 9A, Lots Road, for families in which cases of dangerous infectious disease have occurred, and who have been compelled to leave their dwellings for purposes of enabling such dwellings to be disinfected.

One family was accommodated at the shelter during the year.

Disinfestation.—The female shelter attendant is also employed in connection with the work of the Cleansing Station.

In 1922, the London County Council entered into an arrangement with the Borough Council for the use of the Station on specified days during the school year for the purpose of cleansing the heads of verminous school children. Under the L.C.C. Scheme, the work of cleansing is supervised by the school nurses, who also make all arrangements for the attendances of the children. The children cleansed are those attending schools situated west of a line running down the centre of Sydney Street and Oakley Street. The Borough Council receives payment from the London County Council at the rate of 2s. per child attendance.

During the year, the Station was opened for the entire day on 85 occasions.

The following Table No. 46 shows the number of attendances in each quarter :—

TABLE No. 46.

Quarter.	No. of days on which the Station was opened.	Attendances.	
		Verminous.	Impetigo.
March	21	129	—
June	24	148	—
September ...	17	99	—
December ...	23	139	—
	85	515	—

The amount recoverable from the London County Council, as the School Authority, for the cleansing for the year is £51 10s.

Twenty-seven adults were cleansed at the Station during the year.

(b) TUBERCULOSIS.

This part of the report deals with the work of the Department under the Public Health (Tuberculosis) Regulations, 1930, and under the Dispensary scheme approved by the Ministry of Health and the London County Council. The latter contribute 25 per cent. of the nett expenditure of that scheme.

Staff.—The staff of the Dispensary is set out on pages 5-6.

Notifications.—The total number of notifications received was 103, but 19 of these related to cases which had been previously notified, so that the total number of new notifications was 84. In the previous year, the corresponding number was 100. The notifications received on forms I. and II., *i.e.*, notifications from institutions regarding admission and discharge, are not included in the foregoing figures. In Table No. 47 are shown, in the form required by the Ministry of Health, the detailed figures relating to new cases and mortality during the year. Included in this Table are 38 new cases which came to the knowledge of the Medical Officer of Health during the year, otherwise than by notification on Form A or Form B under the Public Health (Tuberculosis) Regulations.

TABLE No. 47.
TUBERCULOSIS.
New Cases and Mortality during 1937.

Age Periods.	New Cases.				Deaths.			
	Respiratory.		Non-respiratory.		Respiratory.		Non-respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1	—	—	—	—	—	—	—	—
1—5	2	—	2	—	1	—	1	—
5—10	—	—	—	2	—	—	—	—
10—15	3	—	—	1	1	—	—	1
15—20	5	6	4	—	—	—	—	—
20—25	7	14	2	4	1	4	1	1
25—35	5	9	2	2	3	5	—	1
35—45	8	5	2	3	1	4	1	1
45—55	10	4	—	—	6	2	—	1
55—65	9	4	—	—	5	3	—	1
65 and upwards ...	3	1	1	2	1	1	—	1
Totals ...	52	43	13	14	19	19	3	7

The death rate from all forms of Tuberculosis in Chelsea was 0·85 per 1,000. Of the total number of deaths (48) from all forms of Tuberculosis, fifteen died non-notified or prior to notification. The ratio of non-notified tuberculosis deaths to total tuberculosis deaths was therefore

as one is to 3. The corresponding ratio for 1936 was 1 : 5. Making allowance for difficult and doubtful cases in which a diagnosis cannot be established until after death, the notification of tuberculosis is carried out fairly efficiently in the Borough.

Cases of Tuberculosis in the Borough.—The Public Health (Tuberculosis) Regulations, 1930, provide that the Medical Officer of Health shall furnish to the County Medical Officer, as soon as practicable after the end of each quarter, a statement compiled from the register of notifications showing :—

(a.) The number of cases of Tuberculosis on the Register at the commencement of the Quarter ;

(b.) The number of cases notified under the Regulations for the first time during the Quarter ;

(c.) The number of cases removed from the Register during a preceding Quarter which have been restored to the Register during the Quarter, giving the name and address of each such case and the reasons for the restoration ;

(d.) The number of cases added to the Register during the Quarter which have been brought to notice otherwise than by notification under the Regulations ;

(e.) 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

(f.) The number of cases remaining on the Register at the end of the Quarter.

The returns made in accordance with these Regulations show that the numbers of cases of Tuberculosis in the Borough on 31st December last were as follows :—

TABLE No. 48.

	Males.	Females.	Total.
Pulmonary ...	132	113	245
Non-pulmonary ...	35	23	58
	<hr/> 167	<hr/> 136	<hr/> 303

(The register of Notifications contains particulars of all persons who have been notified to the Medical Officer of Health as suffering from Tuberculosis. It should be distinguished from the Dispensary Register referred to in Table 49 which contains the names of all persons attending at, or seen in connection with, the Dispensary for diagnosis and treatment).

Home Visiting.—The duties of Tuberculosis Visitor in the Borough are undertaken by the staff of Brompton Hospital. A grant of £50 per annum is paid by the Borough Council for this service. The Tuberculosis Visitor in the course of the year paid 114 visits to non-dispensary cases of Tuberculosis.

Visits made to Dispensary cases of Tuberculosis are recorded in Table No. 49.

Public Health (Prevention of Tuberculosis) Regulations, 1925.—

The Regulations provide, *inter alia*, that no person suffering from respiratory tuberculosis who is in an infectious condition, shall be engaged in any form of dairy work involving the milking of cows, the treatment of milk or the handling of milk containers. Investigations in connection with these Regulations have been made in the Borough but no case calling for action has thus far been discovered.

Chelsea Tuberculosis Scheme.—Table No. 49, subjoined, is prepared in accordance with the requirements of the Ministry of Health.

The Table includes :—

- (a.) Summary of cases dealt with at the Chelsea Tuberculosis Dispensary, Brompton Hospital, and
- (b.) Special Cases which were accepted for institutional treatment by the London County Council, but which were not dealt with by the Chelsea Tuberculosis Dispensary.

Prior to 1929 this Table comprised cases dealt with at the Chelsea Tuberculosis Dispensary only.

In addition, a further Table, No. 50 (page 75), has been compiled showing in summary form the condition of all patients whose case records were in possession of the Tuberculosis Dispensary at the end of 1937, arranged according to the years in which the patients first came under Public Medical Treatment of pulmonary and non-pulmonary tuberculosis. The special cases which were accepted for institutional treatment by the London County Council, but which were not dealt with by the Chelsea Tuberculosis Dispensary, are also included in this table.

TABLE No. 49.
TREATMENT OF TUBERCULOSIS, YEAR 1937.

Diagnosis.	Pulmonary.				Non-Pulmonary.				Total.				Grand Total.
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—New cases examined during the year (excluding contacts)— (a) Definitely tuberculous ... (b) Diagnosis not completed (c) Non-tuberculous ...	35	30	4	—	6	7	1	—	41	37	5	—	} 352
	—	—	—	—	—	—	—	—	1	6	—	—	
	—	—	—	—	—	—	—	—	81	101	30	50	
B.—Contacts examined during the year :— (a) Definitely tuberculous ... (b) Diagnosis not completed (c) Non-tuberculous ...	1	4	2	—	—	—	—	—	1	4	2	—	} 116
	—	—	—	—	—	—	—	—	—	1	—	—	
	—	—	—	—	—	—	—	—	20	41	19	28	
C.—Cases written off the Dispensary Register as :— (a) Recovered ... (b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	10	6	—	—	2	1	2	1	12	7	2	1	} 400
	—	—	—	—	—	—	—	—	104	147	49	78	
	—	—	—	—	—	—	—	—	—	—	—	—	
D.—Number of Cases on Dispensary Register on December 31st :— (a) Definitely tuberculous ... (b) Diagnosis not completed	121	97	7	4	19	18	7	7	140	115	14	11	} 287
	—	—	—	—	—	—	—	—	1	6	—	—	
1. Number of cases on Dispensary Register on January 1st ... 283													
2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years ... 36													
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" ... 61													
4. Cases written off during the year as Dead (all causes) ... 39													
5. Number of attendances at the Dispensary (including Contacts) ... 1,733													
6. Number of Insured Persons under Domiciliary Treatment on the 31st December ... 2													
7. Number of consultations with medical practitioners :— (a) Personal ... (b) Other ... 105													
8. Number of visits by Tuberculosis Officers to homes (including personal consultations) ... 32													
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes ... 2,982													
10. Number of :— (a) Specimens of sputum, etc., examined ... 314 (b) X-ray examinations made in connection with Dispensary work ... 573													
11. Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above ... 2													
12. Number of "T.B. plus" cases on Dispensary Register on December 31st ... 133													
B.—Number of Dispensaries for the treatment of Tuberculosis (excluding centres used only for special forms of treatment) :— Provided by the Council ... Provided by Voluntary Bodies ... One													

(Signed W. H. L. McCARTHY, Chief Tuberculosis Officer.)

TABLE No. 50.
PULMONARY TUBERCULOSIS.

Condition at the time of the last record made during the year to which the return relates.

(a) Return on Dispersary Register on 31st December.

(b) Not now on Dispersary Register and reasons for removal therefrom.

GRAND TOTALS

	Previous to 1927.										1927.			1928.			1929.			1930.			1931.			1932.			1933.			1934.			1935.			1936.			1937.																																																																																																																																																																																																																																																																																																																																																																																																																																																	
	Class T.B. minus.										Class T.B. plus			Class T.B. plus			Class T.B. plus			Class T.B. plus			Class T.B. plus			Class T.B. plus			Class T.B. plus			Class T.B. plus			Class T.B. plus			Class T.B. plus			Class T.B. plus																																																																																																																																																																																																																																																																																																																																																																																																																																																	
	Class 1.	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Class 1.	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Class 1.	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Class 1.	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Class 1.	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Class 1.	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Class 1.	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Class 1.	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Class 1.	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).																																																																																																																																																																																																																																																																																																																																																																																																																																													
Disease Arrested	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total																																																																																																																																																																																																																																																																																																																																																																																																																																													
	5	1	—	—	4	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																																																																																																																																																																																																																																																																																																																																																																																																																																												
Children	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																																																																																																																																																																																																																																																																																																																																																																																																																																												
Disease not Arrested	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total																																																																																																																																																																																																																																																																																																																																																																																																																																													
	1	1	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																																																																																																																																																																																																																																																																																																																																																																																																																																												
Children	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																																																																																																																																																																																																																																																																																																																																																																																																																																												
Condition not ascertained during the year	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total																																																																																																																																																																																																																																																																																																																																																																																																																																													
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																																																																																																																																																																																																																																																																																																																																																																																																																																												
Total on Dispersary Register at 31st December	6	7	7	1	15	1	—	—	—	1	1	—	—	—	3	—	—	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																																																																																																																																																																																																																																																																																																																																																																																																																																												
Discharged or Recovered	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total																																																																																																																																																																																																																																																																																																																																																																																																																																													
	19	9	7	—	16	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																																																																																																																																																																																																																																																																																																																																																																																																																																												
Children	11	—	—	—	11	7	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																																																																																																																																																																																																																																																																																																																																																																																																																																												
Lost sight of, or otherwise removed from Dispersary Register	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total																																																																																																																																																																																																																																																																																																																																																																																																																																													
	86	42	50	7	99	6	3	10	1	14	8	5	6	—	13	4	1	10	2	13	4	4	10	4	18	12	9	2	20	25	7	12	1	20	22	6	11	2	19	13	2	16	1	19	10	4	9	—	18	15	4	12	1	17	8	5	3	1	7																																																																																																																																																																																																																																																																																																																																																																																																																															
Children	27	30	97	41	168	3	1	9	3	13	—	—	—	—	13	4	1	10	2	13	4	4	10	4	18	12	9	2	20	25	7	12	1	20	22	6	11	2	19	13	2	16	1	19	10	4	9	—	18	15	4	12	1	17	8	5	3	1	7																																																																																																																																																																																																																																																																																																																																																																																																																															
Dead	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total	M.	P.	Ad.	Ch.	Total																																																																																																																																																																																																																																																																																																																																																																																																																																													
	19	12	43	35	90	5	—	7	4	11	2	—	5	12	—	2	—	5	8	—	2	—	5	8	—	2	—	5	12	7	3	1	2	1	4	1	1	6	5	12	—	—	—	—	—	—	—	—	—	—	—	—	—	—																																																																																																																																																																																																																																																																																																																																																																																																																																				
Children	4	—	5	—	5	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

TABLE No. 50 (continued).
NON-PULMONARY TUBERCULOSIS.

Condition at the time of the last record made during the year to which the return relates.			Previous to 1927.				1927.				1928.				1929.				1930.				1931.				1932.				1933.				1934.				1935.				1936.				1937.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
			Bones and Joints.	Abdominal.	Other Organs.	Periosteal Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Periosteal Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Periosteal Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Periosteal Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Periosteal Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Periosteal Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Periosteal Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Periosteal Glands.	Total.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
(a) Remains on Dispensary Register on 31st December.	Disease Arrested.	Adults	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1

(Signed) W. H. L. MCCARTHY,
Chief Tuberculosis Officer.

Chelsea Tuberculosis Dispensary.—This Dispensary, located at Brompton Hospital, provides highly efficient treatment for all cases resident in the Borough. By agreement with the Borough Council, adequate Medical, Nursing and other necessary services are provided.

The Tuberculosis Officer (Dr. W. J. Fenton) is one of the Honorary Physicians to the Hospital and his services are available when required by any medical practitioner in the Borough. Social work in connection with the Dispensary cases is carried out systematically and well by a trained Social Worker.

With the approval of the Ministry of Health, the Borough Council made a financial grant of £1,000 to Brompton Hospital for the year commencing 1st April, 1937. An additional sum of £160 for Nurses visits to homes of patients was also granted by the Council to the Hospital and approved by the Ministry of Health.

Table No. 51, summarises, for the past two years, the number of persons examined at the Dispensary for the first time, the percentage of these cases in which definite tuberculosis was found and the total attendances at the Dispensary.

TABLE No. 51.
WORK DONE AT THE DISPENSARY.

Year.	New cases examined during the year.	Definite Tuberculosis.	Total attendances at Dispensary.
1936	371	13 per cent.	1,856
1937	303	12 „	1,733

Institutional Treatment.—The London County Council, the authority mainly responsible for the institutional treatment of Tuberculosis in London, maintains St. George's Home, in Milman's Street, Chelsea, as a receiving hospital for cases of pulmonary tuberculosis (females).

Of the cases which terminated fatally during the year, 52 per cent. died in St. Luke's Hospital and 42 per cent. in other public institutions, that is to say 94 per cent. died away from their homes, the corresponding figure for 1936 being 78 per cent.

Co-operation with Hospitals and Invalid Children's Aid Association.—Existing arrangements with general and special hospitals in the neighbourhood continue to give satisfaction. Cases under treatment at St. Luke's Hospital are visited by the Tuberculosis Visitor. Arrangements are made with Brompton Hospital for the X-ray examination of difficult cases, and for the provision of artificial pneumothorax refills. Many patients, both adults and children, who attend the Dispensary for examination, either as contacts or on their own initiative, are found to be suffering from conditions, other than

Tuberculosis, which require treatment. These cases are advised as to obtaining such treatment, either from private practitioners or at general hospitals. Many children are found to be suffering from anæmia, malnutrition and similar diseases and are referred to the Chelsea branch of the Invalid Children's Aid Association with a view to provision of convalescent home treatment.

Co-operation with the School Medical Service.—The relationship with the School Medical Service continues to be satisfactory. The School Medical Authorities frequently afford valuable help in deciding what supervision is desirable in connection with children. Many children are referred direct to the School Clinic for the treatment of minor ailments and dental caries.

Co-operation with Medical Practitioners.—During the year the Tuberculosis Officer visited 32 cases (including personal consultations) at the homes of the patients, and 105 cases were referred to him at the Dispensary by medical practitioners in the Borough.

Insured persons under the care of local medical practitioners are visited by the Tuberculosis Visitor.

Home Contacts.—The number of home contacts of tuberculous patients examined at the Dispensary during the year was 116, a decrease of 17 compared with the previous year. Special arrangements are made for following up patients in cases where the diagnosis is doubtful. Such cases are again examined at intervals, and, when necessary, X-ray or other special investigation is made. The Social Worker at the Dispensary maintains regular observation in connection with these patients.

Artificial Pneumo-thorax Treatment.—On the recommendation of the Tuberculosis Officer, patients are supplied with refills in connection with artificial pneumo-thorax treatment. During the year eighteen patients received treatment. The total cost (£158 11s.), was borne by the Borough Council.

Home Nursing.—The Dispensary organization includes home nursing, which is much appreciated by such patients as are confined to bed. The Dispensary Nurse also visits the home for observation purposes. During the year, the number of visits paid by Nurses to the homes of patients was 2,982, a decrease of 347 over the number for the previous year. The Council lent a bedstead and bedding to one case during the year.

Extra Nourishment.—Thirty-four cases of Tuberculosis were certified by the Tuberculosis Officer during the year to require extra nourishment as part of their treatment. These cases were supplied with foods such as milk, eggs and butter. The total cost of extra nourishment (£39 14s. 6d.) was borne by the Borough Council.

Non-Tuberculous Cases.—All cases examined at the Dispensary in which special treatment is indicated, other than for Tuberculosis, are assisted in obtaining such treatment at an appropriate hospital. Others are sent to country or seaside convalescent homes through the agency of the Invalid Children's Aid Association or other organisation.

Orthopædic Treatment.—In appropriate cases surgical boots and appliances, splints, crutches, spinal carriages and wheeled chairs are supplied through the Invalid Children's Aid Association.

Dental Treatment.—With the approval of the Ministry of Health, arrangements have been made with the British Dental Hospital, 235, Hammersmith Road, W., for the provision of adequate dental treatment, including dentures, if necessary, for patients attending the Chelsea Tuberculosis Dispensary. In each case the certificate of the Tuberculosis Officer is required and dental treatment must be shown as necessary to render other treatment more completely efficacious.

During the year six patients thus received dental treatment.

Bacteriological Examinations.—During the year, 314 specimens of sputum were examined in connection with the work of the Dispensary. In addition, 25 specimens were sent by medical practitioners to the Lister Institute for examination.

Care Work.—The Chelsea Tuberculosis Care Committee, constituted on the basis advised by the Ministry of Health in 1922, took over in that year the work of the former Interim Care Committee which had been formed by the Borough Council in 1917. The Committee now includes the following representation and membership :—

Chelsea Borough Council	Alderman Lady Phipps.
London County Council ...	Dr. R. H. Simpson (Divisional Medical Officer).
	Miss Paddon (District Organiser of School Care Committees).
	Mrs. E. E. Potton (After-care Committee).
Chelsea Invalid Children's Aid Association ...	Miss B. M. S. Caudwell and Miss A. Woodroffe.
Public Assistance Committee ...	Mrs. E. Coote.
	Mrs. L. Fraser.
Chelsea Charity Organisation Society.	Miss Larken.
Chelsea District Nursing Association.	Miss Page.
Chelsea Health Society ...	Mrs. Melville Miller.
Brompton Hospital ...	Miss Marx.
Local Panel Committee ...	Dr. M. Cutner.
London Insurance Committee	Mr. W. E. Fish.
Local War Pensions Committee and United Services Fund.	Miss Forbes.
St. George's Hospital ...	Lady Almoner.
St. Luke's Hospital ...	Miss Ellis.
British Red Cross Society	Miss M. A. Battye.
Victoria Hospital ...	Miss White.

Metropolitan Borough of Chelsea.

Annual Report

OF THE

PUBLIC ANALYST

For the Year ended 31st December, 1937.

BY

THOMAS McLACHLAN, A.C.G.F.C., F.I.C.

March, 1938.

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

MR. MAYOR, LADIES AND GENTLEMEN,

During the year ended 31st December, 1937, four hundred samples were submitted to me for analysis by the Sampling Officers appointed under the Act. Of these 313 samples were taken as " FORMAL " and 87 were submitted as " INFORMAL " samples.

It has not been the custom for your Sampling Officers to discuss the nature of the samples submitted with the Public Analyst, and the wide range of substances chosen again reflects considerable credit on them.

In the Table are shown the names and numbers of samples examined, whether submitted formally or informally, and the number of each type reported as " ADULTERATED " or " INFERIOR." In view of the fact that the Food and Drugs (Adulteration) Act, 1928, only differs between Genuine and Adulterated samples, every endeavour has been made to avoid the use of the description " INFERIOR " in reporting on samples. At the same time it is suggested that there is no hard and fast barrier between Genuine and Adulterated samples and that it would be an advantage if some term, such as Inferior, were generally recognised and employed, particularly in those cases, where the Public Analyst recognises that some real doubt exists as to the necessary composition of foodstuffs. The letter (I) has been placed in the Table against those samples reported as Inferior. All samples not reported as Adulterated or Inferior were returned as Genuine.

Article.	Taken Form- ally.	Adult- erated.	Taken Inform- ally.	Adult- erated.	Total Samples Analysed	Total Samples Adult- erated.
Milk	90	2	2	0	92	2
Milk (Condensed) ...	0	0	1	0	1	0
Milk (Malted)	0	0	1	1 (I)	1	1
Almonds (Ground) ...	2	0	0	0	2	0
Baking Powder	2	0	0	0	2	0
Barley	1	0	1	0	2	0
Butter	19	0	0	0	19	0
Cake	0	0	4	0	4	0
Cheese	1	0	0	0	1	0
Cocoa	16	0	1	0	17	0
Coffee	2	0	0	0	2	0
Coffee and Chicory ...	11	0	0	0	11	0
Cornflour	5	0	2	0	7	0
Confectionery (Cream)	0	0	4	2	4	2
Cream	6	0	0	0	6	0
Cream (Tinned)	0	0	1	0	1	0
Fish (Tinned)	13	0	7	0	20	0
Fish (Potted)	2	0	1	0	3	0
Flavouring and Colouring	0	0	2	0	2	0
Flour	7	0	0	0	7	0
Flour (Self-raising) ...	4	0	0	0	4	0
Fruit (Canned)	6	1	3	0	9	1
Fruit (Dried)	11	0	1	1	12	1
Fruit Pie	0	0	1	0	1	0

TABLE—continued.

Article.	Taken Form- ally.	Adult- erated.	Taken Inform- ally.	Adult- erated.	Total Samples Analysed	Total Samples Adult- erated.
Jams and Preserves ...	6	0	0	0	6	0
Lard ...	17	0	0	0	17	0
Lard Substitute ...	0	0	1	0	1	0
Lemon Barley Powder ...	0	0	1	0	1	0
Lemon Squash ...	0	0	2	1	2	1
Macaroni ...	1	0	0	0	1	0
Margarine ...	18	0	0	0	18	0
Meats (Cooked) ...	6	0	6	0	12	0
Mustard Mixture ...	4	0	1	0	5	0
Olive Oil ...	0	0	1	0	1	0
Pepper ...	2	0	0	0	2	0
Pickles and Sauces ...	3	0	0	0	3	0
Pudding Mixture ...	0	0	2	0	2	0
Rice (Ground) ...	1	0	0	0	1	0
Rice ...	8	0	0	0	8	0
Rolled Oats ...	2	0	0	0	2	0
Salad Cream ...	1	0	0	0	1	0
Sausages ...	1	0	6	0	7	0
Semolina ...	3	0	0	0	3	0
Shredded Wheat ...	0	0	1	0	1	0
Soup ...	5	0	0	0	5	0
Suet ...	1	0	1	1	2	1
Sugar ...	3	0	0	0	3	0
Tapioca ...	6	0	0	0	6	0
Tea ...	17	0	1	0	18	0
Vegetables (Dried) ...	3	0	0	0	3	0
Vegetables (Tinned) ...	7	0	0	0	7	0
Whiskey ...	0	0	6	1(A) 1(I)	6	2
Aspirin Tablets ...	0	0	1	0	1	0
Bile Ovals ...	0	0	1	0	1	0
Boracic Acid Powder ...	0	0	1	0	1	0
Boric Ointment ...	0	0	1	0	1	0
Brompton Lozenges ...	0	0	1	0	1	0
Cascara Sagrada ...	0	0	1	0	1	0
Cold Cream ...	0	0	1	0	1	0
Eucalyptus Pastilles ...	0	0	1	0	1	0
Epsom Salts ...	0	0	5	0	5	0
Glauber Salts ...	0	0	5	0	5	0
Glycerine and Rosewater ...	0	0	1	0	1	0
Liquid Paraffin ...	0	0	1	0	1	0
Linseed, Liq. and Chlor. Tablets ...	0	0	1	0	1	0
Magnesia Tablets ...	0	0	1	0	1	0
Maclean's Tablets ...	0	0	1	0	1	0
Tincture of Iodine ...	0	0	1	0	1	0
Yeast Tablets ...	0	0	1	0	1	0
Zinc Ointment ...	0	0	1	1	1	1
Totals ...	313	3	87	9	400	12
Percentages of Total ...	78.25	.75	21.75	2.25	100	3.0

The actual percentages given by the data in the Table are as follows :—

Genuine Composition	...	97 per cent.
Adulterated	...	2.5 per cent.
Inferior	...	0.5 per cent.

MILK.

Of 92 samples of milk examined, 90 were reported as Genuine and 2 as Adulterated, in accordance with the Sale of Milk Regulations, 1901, and the Milk and Dairies Act, 1922. The application of the terms "Good," "Fair" and "Poor" are applied to milk in the Borough of Chelsea according to the following percentages of fat :—

Good Quality	...	Over 3.8 per cent. of fat.
Fair Quality	...	Between 3.35 and 3.8 per cent.
Poor Quality	...	Between 3.0 and 3.35 per cent.

Of the samples examined during the year 33 were reported as of "Good" quality, 45 as "Fair," and 12 as "Poor." One sample contained 3.53 per cent. of added water and another contained 3.7 per cent. of added water. In each case the addition of water was confirmed by the freezing point test. It is quite possible, but not probable, that a milk may contain less than 8.5 per cent. of solids other than fat, but it has been found that the freezing point remains constant in spite of such a variation in composition, if it is genuine milk. When water is added to a milk, the freezing point is higher than is the case with genuine milk, the increase depending on the amount of added water.

MALTED MILK.

There are at present a large number of foods on the market, which consist essentially of whole or modified milk powder with dried malt extract, with or without added flavouring materials. These may be known under fancy names or simply as malted milk. The sample examined was quite good in itself, but it had been packed carelessly and some of the product, which adhered to the screw of the neck of the bottle had absorbed water and become very mouldy. It was accordingly returned as Inferior.

GROUND ALMONDS.

Owing to the Spanish Civil War there was a considerable amount of substitution for genuine almonds last year, but whether this shortage has largely disappeared, or more probably because the adulteration was detected so readily, there appears to have been little attempt at adulteration this year.

BUTTER AND MARGARINE.

Whereas good butter and margarine seldom contain more than 14 per cent., and it is illegal to sell those containing more than 16 per cent. of water, it has been noticed that there has been a tendency for the water content to vary from 15.0 to 15.6 per cent. in the case of butter and from 14.0 to 15.0 per cent. in the case of margarine. This may be one of the methods of creating an impression that the price of foodstuffs is not rising unduly.

CAKE AND PUDDING MIXTURES.

In order to meet a modern demand, there is a growing tendency to sell cartons containing one or more packets of ingredients for particular types of cakes or pudding. Generally speaking these packets and their contents are quite satisfactory and contain the ingredients in the proportions specified. A sample of "Mixed Fruit" was stated to contain "currants, sultanas, raisins and peel in approximately equal quantities." Actually the percentages of the four ingredients were :—currants 47 per cent., sultanas 22 per cent., raisins 20 per cent., and peel 11 per cent. These proportions can hardly be described as approximately equal and the sample was accordingly returned as Adulterated.

CITRUS FRUIT POWDERS.

Reference was made in the Report last year to two samples of citrus fruit powders, which had been reported against on account of the fact that they contained tartaric acid and not citric acid, the acid natural to citrus fruits. One of these cases had not been completely dealt with when the Report had to be made out and it may be of interest to record that in the case of this sample the vendor supplied the name of the wrong manufacturer, who expressed great indignation that your analyst should suggest that tartaric acid was present in any of his products. When the matter was referred to the correct manufacturer, it was explained that the foreman in charge of manufacture had altered the formula without consulting either the scientific staff or the manager and an apology was given and a promise to remove the offending article. This case is interesting because of a similar case in another Borough, for which your analyst has the honour to hold the appointment, and in that instance the manufacturer brought the Director of the British Association of Research for the Cocoa, Chocolate, Sugar and Confectionery Trades to support his argument that it is legitimate to use tartaric acid in these powders. Cases of this type are particularly difficult, because with the present legal machinery the only method of deciding the point would be to bring a Test Case in the High Court, a proceeding, which no one wishes to take. If there were a Standing Committee at the Ministry of Health to advise the Minister with regard to a Statutory Order, the whole matter would be simplified considerably. The sample submitted during the year under review was prepared with citric acid.

COFFEE AND COFFEE AND CHICORY.

All the samples were found to be correctly described.

CREAM PASTRIES.

Four samples of Cream Pastries were submitted for examination. Of these one was described by a fancy name, implying that the filling was prepared with a creamy looking mixture, which did not contain milk fat, and one contained a filling, which was prepared with milk fat. These were both reported as genuine, but the other two samples were returned as Adulterated, as the creamy filling contained a fat, which had the

composition of margarine fat and not of milk fat. It is the considered opinion of most Public Analysts that the fat of the creamy portion of cream pastries should be prepared with milk fat, unless some name is employed, which will inform the purchaser to the contrary, and it is unfortunate that certain magistrates have given decisions, which make further action on the part of Local Authorities difficult.

LEMON SQUASH.

Two samples of Lemon Squash were submitted for examination owing to a complaint that sickness had been caused through drinking lemon squash at a refreshment bar. One of the samples consisted of the concentrated cordial and the other was diluted for consumption. The diluted cordial was badly fermented, but no deleterious bacteria were isolated. It was discovered that water from a tank in the roof was being employed for dilution and it was suggested to the vendor that only water direct from the main should be used for drinking purposes. Arising out of these examinations it was found that a definite anaerobic bacterium is usually present in these concentrated cordials and the matter was referred to the Ministry of Health's bacteriologist, but no further report has yet been received.

SHREDDED WHEAT.

A sample of shredded suet contained 25 per cent. of ground rice, which is excessive. Magistrates have frequently held that 15 per cent. of ground rice is sufficient to preserve the granular consistency of shredded suet. The sample was accordingly reported as Adulterated.

SOUP PREPARATIONS.

Five samples of soup powders or mixtures were submitted for examination. In the case of three of these samples the mixtures were made up in blocks by compressing them and then wrapped in light cardboard wrappers. The Sampling Officer had condemned them on account of the general condition of the wrappers, which were mouldy and soiled. Unfortunately no exception could be taken to the samples from either the chemical or bacteriological standpoint, as the large amount of salt present prevents the growth of micro-organisms in the actual preparation and, since the contents of the packets are composed of dried constituents it is difficult to state at what stage they become unfit for food, merely as the result of storage.

WHISKEY.

It would appear that several publicans in the Borough either dilute their own spirits for sale, or that they obtain them from rather doubtful sources. Where a wholesaler dilutes spirits, there is no reason why the strength should be lower than 35 degrees Under Proof, as he has every means of checking his figures. A retailer is in a more awkward position, as he is usually unable to control his temperatures or to know what is the amount of extract present in his spirits. It was found that several samples obtained from different houses and of low strength were emanating from a particular wholesaler.

DRUGS.

Twenty-six samples of drugs were examined and, except for the sample of Zinc Ointment, were all reported as genuine. The sample of zinc ointment was 4 per cent. deficient in zinc oxide, containing only 14.4 per cent. instead of 15 per cent. as demanded by the British Pharmacopoeia. This is not a serious deficiency from the medical aspect, but drugs should be of the required standard. Several samples of drugs were sold under fancy names or by names, which implied that a declaration of their drug content was being given, but which did not do so in reality. Your Analyst is of the opinion that the composition of all drugs should be declared to the purchaser, unless sold or dispensed to the order of a physician. It cannot be claimed that young girls in chain stores have any knowledge of the drugs, which they sell, or that they are in a position to give any advice to the purchasers. The responsibility, therefore, for knowing what they are buying must, or should, rest on the purchaser, who should have a claim against the manufacturer, if the goods are not of the nature demanded.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

THOMAS McLACHLAN, A.C.G.F.C., F.I.C.

Public Analyst.

454342

The first part of the report deals with the general situation of the country and the progress of the work. It is followed by a detailed account of the various projects and the results of the investigations. The report concludes with a summary of the findings and a list of references.

The second part of the report deals with the specific details of the work. It includes a description of the methods used, a list of the equipment and materials, and a detailed account of the results of the investigations.

The third part of the report deals with the conclusions of the work. It includes a summary of the findings, a list of the conclusions, and a list of the recommendations.

The fourth part of the report deals with the appendix. It includes a list of the figures, a list of the tables, and a list of the references.