[Report of the Medical Officer of Health for Westminster, City of].

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City of Westminster.



REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1933

'ANDREW J. SHINNIE, M.D., D.P.H. (LOND.), Medical Officer of Health and Administrative Tuberculosis Officer

Printed by Order of the Council

LONDON:

HARRISON AND SONS, LTD.
PRINTERS IN ORDINARY TO HIS MAJESTY,
ST. MARTIN'S LANE, W.C.2.

City of Westminster.



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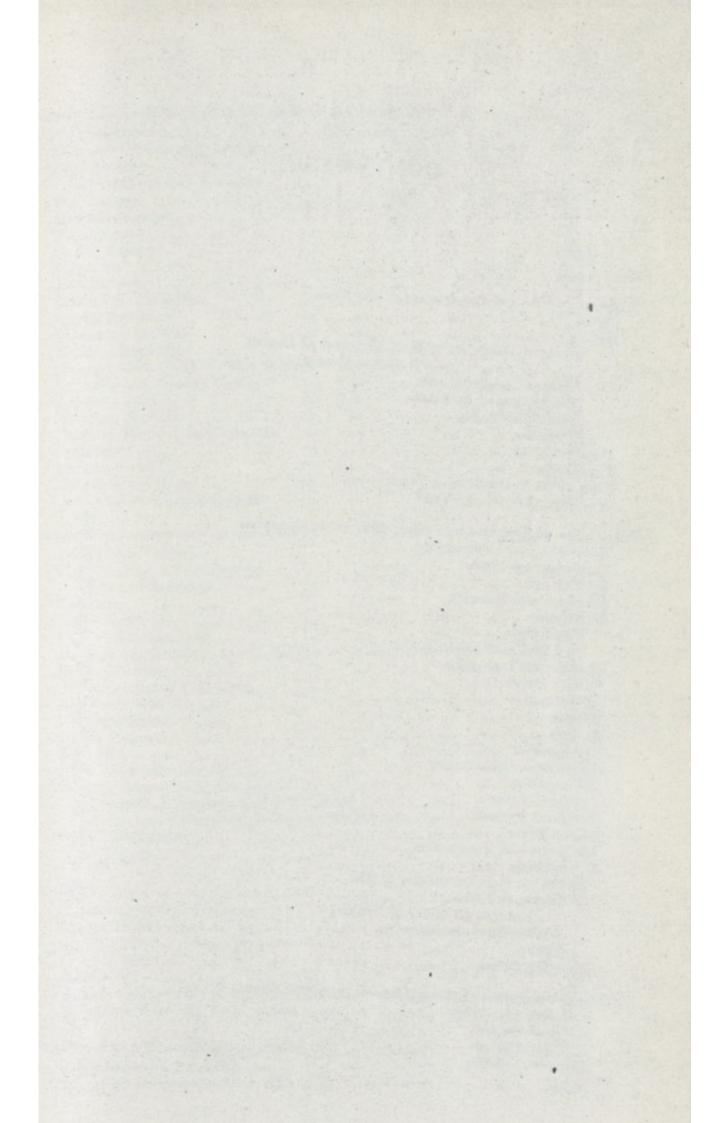
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1933

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Public Health and Maternity and Child Welfare Committee.

Mayor: Councillor F. G. Rudler, J.P.

Deputy Mayor: Councillor The Rev. E. St. G. Schomberg, M.A.

Note.—The Mayor and Deputy Mayor are Members ex officio of all Committees and Sub-Committees, with the exception of the Assessment Committee and Barlow's Gift Special Committee.

Chairman:

Councillor F. R. Ridley, J.P.

Vice-Chairman:

Councillor G. F. Jerdein.

Members:

Councillor Capt. J. F. C. Bennett.

* Councillor T. C. Claxton.

Alderman Capt. J. C. Dalton, D.L., J.P., L.C.C.

Councillor G. H. Heilbuth.

- * ,, Mrs. Alderson Horne.
 - " E. H. Keeling.
- * ,, Lieut.-Colonel W. Merrick.
- * .. Mrs. F. M. Odone.
- * ,, The Rev. Jocelyn Perkins, M.A., D.C.L., F.S.A.
- * .. A. Sargeant.
 - ,, A. E. Townsend.
- † " H. S. E. Vanderpant.
 - ,, The Hon. Mrs. Douglas Vickers, J.P.

MATERNITY AND CHILD WELFARE SUB-COMMITTEE.

Members of the Council:

Councillor Mrs. Alderson Horne. Councillor A. G. Townsend.

, Mrs. F. M. Odone.

, H. S. E. Vanderpant.

,, A. Sargeant.

,, The Hon. Mrs. Douglas Vickers, J.P.

Co-opted Members:

Dalton, Mrs. J. C.

Haldane, Miss E. S. (City of Westminster Health Society).

Spelman, Mrs. M. (Westminster Labour Party).

Wyatt, Mrs. A. E. (Women's Co-operative Guild, Westminster Branch).

[†] Chairman of Expenditure Sub-Committee.

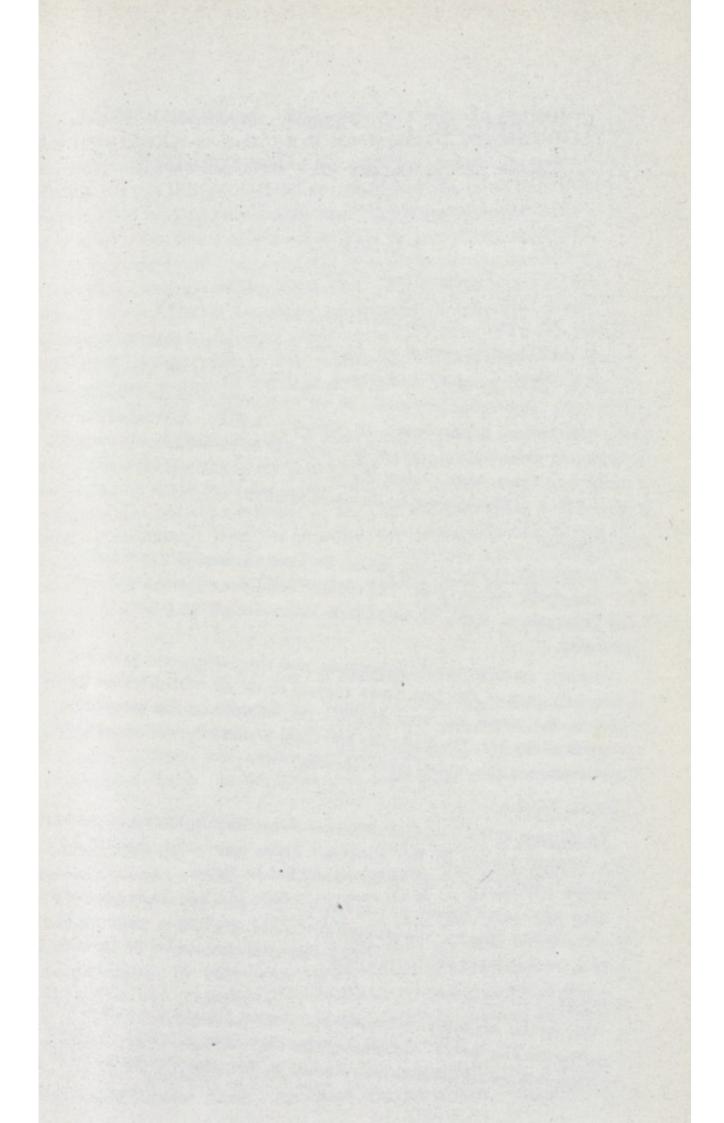
^{*} Members of

Coroner's Court and Mortuary Sub-Committee:

Councillor Capt. J. F. C. Bennett. Councillor F. R. Ridley.
,, Mrs. Alderson Horne.
,, H. S. E. Vanderpant.

" Mrs. F. M. Odone.

Committee Clerk: F. J. Burbridge.



Annual Report on the Health and Sanitary Condition of the City of Westminster.

1933.

MR. MAYOR, MY LORDS, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for the year 1933.

It is an ordinary report as required by the Minister of Health in Circular 1346. Only in the five yearly, or survey reports, does the Minister require the fullest information. In ordinary reports, developments, alterations or extensions of services are expected to be commented upon in detail, but other items, unless the subject of special reports by the Medical Officer of Health may be discussed briefly.

Vital Statistics.

The birth rate again makes a record, the lowest known in Westminster, 8.7. The death rate is 12.4. The reduced incidence of, and death rate from Tuberculosis, forms an important indication of the health of the community.

Although unemployment, fortunately now decreasing, was prevalent in the early part of the year, there appears to be no evidence that the health of the people has been seriously prejudiced. In this connection the observations from the Maternity and Child Welfare Centres on page 70 (a new feature in this report) are interesting.

Infectious Disease.

An increase in the incidence of Scarlet Fever and Diphtheria is noted. This occurred mainly in the autumn. There were some grounds for assuming a higher infectivity in the case of Scarlet Fever.

Only one case of Smallpox, and that of the minor type, was reported. The number of primary vaccinations performed in children continues to show a creditable percentage in relation to total births, over 60 per cent.

Housing.

This subject has taken even a more prominent place in the work of the department. The policy adopted by the City Council which, in some measure, anticipated the Minister's Circular on slum clearance programmes

receives somewhat full comment. At the time of writing a detailed housing survey of the City is in progress, which, it is hoped, will be completed by June, 1935. An augmented staff of five additional temporary sanitary inspectors and five temporary clerks are engaged on the work, and up to date over 1,000 working class houses have been inspected in great detail, and recorded. By this means accurate data as to sanitary conditions, overcrowding and illegal occupation will be available relating to working class dwellings throughout the entire City. Many of these houses are ordinarily the subject of inspection on account of infectious disease notifications, nuisances and other conditions as they arise. But with the normal staff it is not possible to make routine house to house inspection on a scale adequate to provide information on which to assess the housing needs of the City as a whole.

The question of the occupation of underground rooms is dealt with at some length, and the council's policy in regard to them is discussed. From an examination of the facts and figures submitted in this report, it will be deduced that housing conditions in the City are undergoing uninterrupted improvement. With the proposed new estate adjoining Ebury Bridge estate, the Council in the near future will have 1,676 dwellings under its own management. Two rather striking aerial photographs of the two most recently built housing estates are included in the housing section.

Plans of Sanitary Work in New and Old Buildings.

The number 926 submitted is the highest since the Department undertook the supervision of drainage work in 1912. This is surely an indication of a revival in trade, and implies increasing employment in the building and associated trades. In the boom year, 1920, plans amounted to 602.

Maternity and Child Welfare.

Infant mortality is two points higher, mainly because of the reduced number of births on which the calculation is made. The actual number of infant deaths is lower. In 1903 there were 3,185 births and 370 infant deaths; a rate of 116 per 1,000 births. In 1933 there were only 1,099 births, and 75 infant deaths, giving a rate of 68 per 1,000 births. Prematurity remains the predominant cause of death in infants under 1 year. This and the high proportion of stillbirths are cirumstances which cannot be viewed with satisfaction. So far there is no available evidence suggestive of belated and ill-considered attempts at birth control.

Maternal mortality.—There were five cases, as last year, including one from Puerperal Fever; three were married women. Attention is

drawn to the proposed scheme for providing expert medical assistance both to medical practitioners and to midwives when attending difficult or abnormal cases of midwifery.

Duties transferred from the London County Council.

On 1st April, under the Transfer of Powers Order, 1933, the supervision of common lodging houses and the administration of the law governing the care of foster children with the guardianship of children ad litem became duties of the Public Health Department.

Atmospheric Pollution.

Attention is drawn to a chart showing the results of sulphur gas estimation devised by two members of the staff.

Coroner's Court and Mortuary.

A description of the alterations and changes which have transformed these premises and brought them up-to-date is given. Two photographs are shown. This public health service may now be considered one of the best organised of its kind in the country.

Foods and Drugs.

The quality of milk has shown a falling off for the first time in many years. This was mainly due to the very dry season. The percentage of adulterated samples, however, remains low, only 1.2. Mr. Richards, the Senior Public Analyst, resigned his post at the end of the year owing to failing health. Mr. F. W. Edwards, F.I.C., his chief assistant, had been acting temporarily for him in the autumn, and was appointed to succeed him. Mr. Richards had been public analyst for 40 years, first to the St. Martin's Vestry and afterwards to the City Council. Expressions of sincere regret at the cause of his retirement are recorded in Minutes of the Council; likewise appreciation of his eminent services as an analyst, of his work on government committees and in other spheres in connection with the quality of food and legislation relating to food and drugs.

Dr. H. W. Doll, Public Vaccinator for the district of Belgrave and Knightsbridge, resigned on retiring from practice in December, and Dr. Albert Cope, Public Vaccinator for St. Margaret and St. John, and lecturer on vaccination at Westminster and St. Thomas' Hospitals, was appointed in his stead.

Among changes at the Coroner's Court premises was the appointment of Mr. H. R. Ford, late Chief Petty Officer, R.N., as Superintendent. It was considered that the discharge of the responsibilities at these premises was consistent with a staff appointment. The post of Superintendent was accordingly created. The part-time services of a trained nurse were also engaged for rendering the last offices in the case of females.

During the year 60 reports, both routine and special, were submitted by me to Committees of the Council. The correspondence of the Department included 11,043 incoming communications and 10,997 outgoing.

In conclusion, I would express my sincere thanks to the Public Health Committee, its past Chairman, Councillor Mrs. F. M. Odone, and to the present Chairman, Councillor F. R. Ridley, Esq., J.P., for much personal kindness, helpfulness and invariable consideration. The staff deserve commendation and appreciation for their work in the various branches of the Department.

I have the honour to be,
Your obedient Servant,
ANDREW J. SHINNIE.

July, 1934.

SUMMARY OF PARTICULARS REQUIRED BY THE MINISTRY OF HEALTH.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (acres)-2,502.7.

Population (Census 1931)—129,579. (Corrected figure).

Population, June, 1933 (Registrar General's Estimate)-126,300.

Number of Inhabited Houses (1931)-22,536.

Rateable value-£11,140,000 (March, 1934).

Sum represented by a penny rate-£42,380.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

		Total.	Males.	Females.
Live Births—			22	2 0000000
Legitimate	 	 970	467	503
Illegitimate	 	 129	58	71

Birth-rate per 1,000 of the estimated resident population-8.7.

Stillbirths-38. Rate per 1,000 total births-34.

Deaths—1,573. Death-rate per 1,000 of the estimated resident population—12.4.

Deaths fro	om puerperal ca	uses :-					
					Rat	e per	1,000
				Deaths.	to	tal bi	rths.
Puerr	peral sepsis			2		1.8	3
Other	puerperal caus	ses		3		2.7	7
Total				5		4.5	5
Death-rate	e of infants und	ler one	year of	f age :-			
	fants per 1,000		*	_			68
Legiti	imate infants pe	er 1,000	0 legitin	mate live b	irths		55-6
Illegit	imate infants p	per 1,00	00 illegi	itimate live	e births		162.7
Deaths fro	om measles (all	ages).					2
,,	whooping co	ough (a	ll ages)				6
"	diarrhœa (u	nder 2	years o	of age)			11
						-	

Other particulars asked for are given in the body of the Report.

The following are the Public Health Officers of the City Council. Under the Local Government Act, 1929, the Ministry no longer contribute 50 per cent. of salaries of officers engaged in tuberculosis and maternity and child welfare. This discontinued contribution is included in the calculation of the General Exchequer Grant payable to the Council under the Act. The L.C.C., however, still contribute a percentage grant to tuberculosis services. Those whose services are part time are signified thus:*

STAFF OF THE PUBLIC HEALTH DEPARTMENT.

Medical Officer of Health and Administrative Tuberculosis Officer:

Andrew J. Shinnie M.D., D.P.H., &c.

Assistant Medical Officers:

IAN S. THOMSON ... M.A., M.D., D.P.H.

(Tuberculosis Officer and Asst.

Medical Officer of Health.)

*ETHEL M. VERNON ... M.D., B.S. (Maternity and Child Welfare.)

*A. D. C. Bell M.A., M.B., B.Ch., M.R.C.P. (Maternity and Child Welfare.)

Obstetric Consultant:

*Aubrey Goodwin ... O.B.E., M.D., F.R.C.S.

Westminster Hospital Laboratories.

*R. J. V. Pulvertaft, M.B., B.Ch. Bacteriologist to the Hospital. (Cantab.), M.R.C.P., &c.

Public Vaccinators:

Mayfair District ... *Kenneth R. Hay, M.B., O.B.E., 47, Hill St., Berkeley Square, W.1.

*Releave and Knightsbridge District *Henry W. Doll, M.R.C.S., L.R.C.P., 42,

Belgrave and Knightsbridge District ... *Henry W. Doll, M.R.C.S., L.R.C.P., 42, Montpelier Square, S.W.7.

Westminster (St. Margaret and St. *Albert E. Cope, M.D., 66, Belgrave Road, John) District. S.W.1.

Westminster (St. Anne and St. James)
District
Strand District *Henry A. M. Whitby, M.R.C.S., L.R.C.P.,
5, Great Marlborough Street, W.1.

Vaccination Officer:

James H. Lowe.

Dental Clinic:

*T. STEWART TAIT L.D.S., R.C.S., Edin.

*F. J. GORDON (Anæsthetist) ... M.R.C.S., L.R.C.P.

Public Analysts:

P. A. Ellis Richards (resigned 31/12/33) F.I.C.

*T. McLachlan ... A.C.G.F.C., F.I.C.

*F. W. Edwards (appointed 1/1/34) F.I.C.

Senior Sanitary Inspector:

JOHN SANDERSON R.S.I., San. Sc. Cert., Gold Medalist, Carpenters' Company.

Sanitary Inspectors:

M. CANTON ... S.I.E.B., Meat Cert., R.S.I.
W. J. Davies (Sampling Officer) ... S.I.E.B., Meat and Food Cert.
C. J. Dee ... S.I.E.B., R.S.I., Meat and Food Cert.

W. L. FRENCH ... S.I.E.B., R.S.I., Meat and Food Cert.

F. J. HAIGH S.I.E.B.

H. R. HARDY R.S.I., M.I. San. Eng.

T. H. JACKSON ... S.I.E.B.

C. RATCLIFF S.I.E.B., Meat and Food Cert.

F. E. SIDDLE S.I.E.B., Meat Cert., R.S.I.

W. G. J. Sutton (Sampling Officer) ... S.I.E.B., Meat and Food Cert.

H. E. White S.I.E.B., R.S.I., Meat and Food Cert., Dipl. Inst. of Hygiene.

MISS C. HUGHESDON S.I.E.B., R.S.I., Health Visitor's Certificate, Certified Midwife, Dipl. Nat. Health Soc.

Health Visitors:

MISS A. SANDERS Health Visitor's Certificate.

MISS J. G. ALEXANDER... ... Health Visitor's Certificate, Certified Midwife, State Registered Nurse.

Miss D. H. M. Walding ... Board of Education Health Visitor's Diploma, S.I.E.B., National Health Society's Diploma, Nursing.

MISS HOWELL EVANS National Health Society's Diploma, Nursing, S.I.E.B.

MISS M. M. Scorr Health Visitor's Certificate, Certified Midwife, Board of Education Health Visitor's Diploma, S.I.E.B.

Miss H. Blick Health Visitor's Certificate, Certified Midwife, Board of Education Health Visitor's Diploma.

Miss P. L. Luff ... Certified Midwife, Board of Education Health Visitor's Diploma, S.I.E.B.

MISS E. M. CRAIGIE Certified Midwife, Health Visitor's Certificate, State Registered Nurse, Mothercraft Training Certificate, Ophthalmic Nursing Certificate.

*Mrs. R. Coleman (Instructor in Mothercraft at Centres) Royal Red Cross Certificate, 1st Cl., and Gold Medal.

Clerical Staff:

ARTHUR WISE (Chief Clerk).

A. J. MANHOOD.

S. G. BENNETT, S.I.E.B., Meat and Food

F. W. LAKE.

F. E. NORWOOD.

W. JENKINS.

Miss M. MacFarlane (Tuberculosis Dispensary).

Coroner's Court and Mortuary.

Superintendent.

A. R. FORD (Late Chief Petty Officer, R.N. Sick Berth Staff).

R. Watling Mortuary Keeper.

A. W. Nicholls Assistant Mortuary Keeper.

*Miss S. Gardiner Nurse Attendant. State Registered Nurse.

Disinfecting Staff.

S. C. West, Foreman Disinfector.

W. Slattery, Engineer (retired 25.3.33).

J. ATKINS, Disinfector.

P. W. Attwater, Disinfector.

N. HEATHCOTE, Disinfector and Rat Officer.

A. B. HOLLAND, Disinfector.

J. R. DOYLE, Motor Driver.

A. T. STEWARD, Assistant to Inspectors.

W. H. SMITH, Messenger.

Female Caretakers, Attendants, etc.

Disinfecting Station-Mrs. FAULKNER.

Maternity and Child Welfare Centre-

Ebury Bridge-Mrs. Whittlesea,

15, Bessborough Street; -Mrs. Nicholls.

Marshall Street—Mrs. RATCLIFFE.

Tuberculosis Dispensary—Mrs. Crowley.

Coroner's Court-Miss Mates, Miss Hamilton.

In addition to the above, the following are the staff of the City of Westminster Health Society, a voluntary Maternity and Child Welfare organisation working in close operation with the City Council.

Medical Officers:

*The Hon. Mrs. N. OLIVIER RICHARDS M.D., M.R.C.P., Maternity and Child

*Winifred M. Gray ... Welfare.

M.D. (Lond.), M.B., B.S. (Ante-natal Clinic).

Health Visitors:

Miss Callaghan (Supt., Centre) ... Health Visitor's Certificate, Cert. Domestic Economy, &c.

MISS PINCHEN Health Visitor's Certificate, Dipl. National Health Society.

MISS REED Health Visitor's Certificate and Certificated Midwife.

Miss Cross Certificated Midwife.

(With assistants, paid and voluntary, holding Health Visitor's Certificates and nursing experience.)

MRS. STEFFENS (Mothercraft Classes).

METEOROLOGICAL.

The following note is extracted from a letter to The Times on January 1st, 1934, by Mr. F. Yates, of the Rothamsted Experimental Station, Harpenden, Herts. Mr. Yates, commenting on the weather of 1933, called it a year of optimism, a natural concomitant of the national mood. It was a year of favourable and kindly weather, bountiful in sunshine but too grudging in rainfall. Wheat crops were phenomenally good and livestock flourished except where water supplies had become too scarce. Only in March did rainfall exceed the average and in September did it reach average. Only twice in the records of the station has the annual rainfall been less, namely, in 1864 and 1921. August and December were the two driest months. The last quarter of the year, with 3.49 inches, the driest since 1879, foretold an unhappy augury for water supplies in 1934. As regards sunshine, March was outstanding, 68.9 per cent. above average, while the whole year had 15.1 per cent. more than normal; no less than 50 days had more than 10 hours of sunshine. The temperature throughout the year was above average, although January and December were colder than usual. The mean temperature, 32.9° F. in December, provided a fortnight's skating-not a very common feature at this time of year.

BIRTHS.

The births registered in Westminster during 1933 numbered 1,610, but of these the homes of 962 were in other districts, 15 were either registered under the Legitimacy Act or were re-registrations, and have therefore to be deducted from the total. There were, however, 466 children belonging to Westminster parents born in institutions outside the City, and these must be added. This gives a net total of 1,099, which is 53 less than the similar figure for 1932. The Birth Rate of 8.7 is the lowest ever recorded in the City of Westminster, where a pronounced decline has been proceeding ever since 1921.

Women whose homes are outside the City continue, in increasing numbers, to avail themselves of the facilities for confinement which the large general hospitals in the City offer. The number in 1919—mostly women whose home address was within easy reach of the hospital, although in some neighbouring borough—was only 98. This figure has risen to 962 in 1933, and includes not only women from the various metropolitan boroughs but also from the counties around London. The natural inference is that women dislike having their babies in their own homes.

(9489)

The comparative net totals of the registered births for the last three years are :-

			1931. Legitimate.	1932. Legitimate.	1933. Legitimate.
Males			515	535	467
Females			548	485	503
		1	llegitimate.	Illegitimate.	Illegitimate.
Males	****	****	70	70	58
Females	****	****	78	62	71
			1,211 .	1,152	1,099

TABLE I.

		Births Re	gistered.		Births Notifie					
	In West- minster.	Belong elsewhere.	Born out of West-minster.	Net.	Total.	Alive.	Still- born.			
1913	1,992	35	276	2,233	1,462	1,424	.38			
1914	1,860	15	312	2,157	1,386	1,347	39			
915	1,721	71	329	1,979	1,292	1,250	42			
916	1,643	175	342	1,810	1,330	1,288	42			
1917	1,325	159	378	1,544	1,020	985	35			
918	1,138	146	458	1,459	911	888	23			
919	1,210	98	480	1,592	1,004	977	27			
920	1,731	89	618	2,260	1,327	1,289	38			
921	1,418	78	579	1,919	1,049	1,032	17			
922	1,347	81	629	1,895	1,046	1,020	26			
923	1,361	194	585	1,752	1,045	1,016	29			
924	1,447	344	521	1,624	1,250	1,214	36			
925	1,519	481	497	1,535	1,435	1,385	50			
926	1,535	500	571	1,606	1,402	1,355	47			
1927	1,375	552 (20)	576	1,399	1,205	1,169	36			
1928	1,471	643 (23)	542	1,370	1,404	1,362	42			
1929	1,577	758 (7)	538	1,357	1,532	1,474	58			
1930	1,689	859 (16)	538	1,368	1,653	1,597	56			
1931	1,640	942 (21)	513	1,211	1,589	1,536	53			
1932	1,608	954 (12)	498	1,152	1,594	1,538	56			
1933	1,610	977 (15)	466	1,099	1,615	1,559	56			

The numbers in brackets are registrations under the Legitimacy Act, and cannot be classified as births.

The above table brings to light a disquieting feature regarding stillbirths which should merit investigation. In 1922 the rate per 1,000 total registered births was 19.3, whereas in 1933 the figure had risen to 34.7 per 1,000.

The legitimate and illegitimate births are distributed as follows:-

		TADLI	2 11					
		Legitin	nate.					
Males Females	 	725 729		443 405		185 179		467 503
		1,454	_	848	+	364	=	970

TARLE II

Males
$$75 - 67 + 50 = 58$$

Females $81 - 62 + 52 = 71$
 $156 - 129 + 102 = 129$

The legitimate births show a decrease of 50 and the illegitimate a decrease of 3 on the figures of 1932.

As shown in Table I, 1,615 notifications of births were received by the Department for 1933 as compared with 1,594 in 1932. Of the total of notifications, 580 were sent by midwives, of whom 30 were practising in the City during 1933.

The following Table shows the number of male and female children born since 1917, and those who did not survive the first year of life, with the number of the surviving children at the end of the first year of life:—

TABLE III.

		Numbe	r Born.	Number of		Number re	maining at f year.
	1	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
1917		756	- 788	94	64	662	724
1918	 	789	670	84	64	705	606
1919	 	786	814	74	63	712	751
1920	 	1,117	1,149	104	63	1,013	1,086
1921	 	991	928	91	63	900	865
1922	 	945	957	68	36	877	921
1923	 	914	844	44	38	870	806
1924	 	847	780	58	38	789	742
1925	 	783	752	57	49	726	703
1926	 	797	809	48	48	749	761
1927	 	712	687	52	44	660	643
1928	 	722	648	47	33	675	615
1929	 	688	669	57	48	631	621
1930	 	696	672	48	33	648	639
1931	 	585	626	50	41	535	585
1932	 	605	547	41	35	564	512
1933	 	525	574	49	26	476	548

For each 1	1,000	girls	born,	there	were	in-
------------	-------	-------	-------	-------	------	-----

,	1916	 965	boys.	1925	****	1,041 boys.
	1917		boys.	1926		985 boys.
	1918		boys.	1927	****	1,036 boys.
	1919		boys.	1928	****	1,114 boys.
	1920		boys.	1929	****	1,028 boys.
	1921	1,067	boys.	1930	****	1,035 boys.
	1922		boys.	1931	****	934 boys.
	1923	1.082	boys.	1932	****	1,106 boys.
	1924		boys.	1933	****	914 boys.

DEATHS.

The following tables are supplied by the Registrar General at the request of the Ministry of Health:—

Causes of Death at different Periods of Life in the Metropolitan Borough of Westminster, 1933.

		oj	West!	mins	ter,	1955	•				-		_
CAUSES OF DEATH.	Sex.	All Ages.	0—	1-	2—	5—	15-	25—	35-	45	55-	65-	75-
ALL CAUSES	M. F.	879 698	49 26	4 6	7 9	8 4	23 16	39 25	50 43	123 79	208 117	196 147	172 226
1. Typhoid and para- typhoid fevers	M. F.	_1	=	=	=	_	_	1	=	-	-	=	=
2. Measles	M. F.	3	=	1	1	1	=	=	=	-	=	=	=
3. Scarlet fever	M. F.	2 2	=	=	1	1	=	=	=	2	=	=	=
4. Whooping-cough	M. F.	3 3	2	1 2	1	=	=	=	=	=	=	-	=
5. Diphtheria	М. F.		=	=	=	1	=	=	=	=	=	=	=
6. Influenza	M. F.	40 29	2 1	=	=	=-	1	3	2 2	8 4	10 6	8 3	7
7. Encephalitis lethargica	M. F.	_1	=	=	=	1	=	=	=	=	=	=	=
8. Cerebro-spinal fever	M. F.	3	1	=	=	1	1	=	=	=	=	=	=
9. Tuberculosis of respiratory system	М. F.	69 22	=	=	=	1	7 4	16 7	12 7	14	11	6 2	_2
10. Other tuberculous diseases	M. F.	5 6	=	=	=	1	2	1	- 2	1	1	=	=
11. Syphilis	M. F.	10 2	2 2	=	=	=	=	=	=	4	3	=	_1
2. General paralysis of the insane,	М.	5	-	-	-	-	-	-	1	2	2	-	-
tabes dorsalis	F.	2	-	-			-	-	1	-	1	-	-
3. Cancer, malignant disease	M. F.	117 108	=	=	=	=	2	2 3	1 8	18 20	40 30	34 25	20 21
4. Diabetes	М. F.	10 8	=	=	=	=	=	=	1	3	5 2	1	1 4
5. Cerebral hæmorrhage, etc.	M. F.	33 40	=	=	-	=	=	- 2	1	4 3	12 8	8 8	8 19
6. Heart disease	M. F.	197 183	=	=	=	=	1 3	1	1 5	17 14	46 23	64 49	68 88
7. Aneurysm	M. F.	5 4	=	=	=	=	=	=	2	1 1	1	1	-1

Causes of Death.	Sex.	All Ages.	0-	1—	2—	5—	15—	25—	35—	45—	55-	65-	75-
18. Other circulatory diseases	M. F.	43 31	-	11	=	=	=	1	-	1 2	10 4	13 8	18
19. Bronchitis	M. F.	25 39	=	1	1	=	=	=	=	2	3 4	12 9	7 25
20. Pneumonia (all forms)	M. F.	54 45	7 5	1 1	3	=	=	1	4 5	9 7	15 10	6	9
21. Other respiratory diseases	M. F.	6 3	Ξ	E	=	=	=	=	2	1 3	1	-1	3
22. Peptic ulcer	M. F.	18 10	=	=	=	=	=	1	4	3	5 4	5 4	-
23. Diarrhœa, etc	M. F.	9 7	8 3	- 1	-	=	=	=	-1	=	=	1	-1
24. Appendicitis	M. F.	3 4	=	=	-1	=	=	-1	1	-1	1	1	
25. Cirrhosis of liver	M. F.	4 4	=	=	=	=	=	=	=	1 2	2 2	1	-
26. Other diseases of liver, etc.	м. F.	2 7	-	-		=	=	=	1	-	1	- 2	1
27. Other digestive diseases	M. F.	14 18	1	=	- 2	=	1 1	2	2	5 3	1 4	2 6	-1
28. Acute and chronic nephritis	M. F.	26 13	-	=	=	=	1	1	1	6	6 3	8 4	4
29. Puerperal sepsis	F.	1	-	-	-	-	-	1	-	-	-	-	
30. Other puerperal causes	F.	- 3	-	-	-	-	1	1	1	-	-	-	
31. Congenital debi- lity, premature	М.	16	16	-	-	-	-	-	-	-	-		-
birth, malforma- tions, etc.	F.	12	11	1	-	-	-	-	-	-	-	-	-
32. Senility	M. F.	3 5	=	=	-	=	=	=	=	=	=	1	5
33. Suicide	M. F.	32 4	E	=	=	=	2	4	5	5 2	11	3 -	2
34. Other violence	M. F.	51 29	5 2		2 1	2	4 5	5 2	4	10	8 4	5 5	6
35. Other defined diseases	M. F.	69 47	5	1	1	1	2	3 2		8 9	14 6	16 13	13
36. Causes ill-defined, or unknown	M. F.	=	=	=	=	=	=	=	=	=	-	1	11

Still-births - 56 still-born children were notified during the year. Under the Births and Deaths Registration Act, 1926, which came into force on 1st July, 1927, all still-births must be registered.

		l-births istered.	Inward Transfers.	Outward Transfers,	Allocated to Westminster.
Total Legitimate a Illegitimate	$\operatorname{and} \left\{ egin{array}{l} \operatorname{Males} & \dots \\ \operatorname{Females} \end{array} \right.$	 40 24	8 9	25 18	23 15
Illegitimate	{Males Females	 2 5	2 2	2 4	2 3

A statement showing the number of cases of certain infectious diseases in the above-named area during the 52 weeks ended 31st December, 1933:—

Westminster, City of, Met. B.	Number of Cases of Infectious Diseases	Smallpox.	Scarlet fever.	Diphtheria.	Enterie fever.	Puerperal pyrexia.	Puerperal fever.	Erysipelas.
	Notified (Civilians).	-	358	150	9	11	4	54

(The case rates of these diseases for England and Wales per 1,000 living are respectively as follows:—Smallpox, 0.02; scarlet fever, 3.21; diphtheria, 1.18; enteric fever, 0.04; puerperal pyrexia, 0.14; puerperal fever, 0.05; and erysipelas, 0.45.) The corresponding rates for Westminster are: .007; 2.8; 1.1; 0.04; 0.15; 0.05 and 0.41.

The preceding death table and the figures in respect of registered still-births are those supplied by the Registrar General and inserted at the request of the Ministry of Health. Neither the statistics relating to deaths, nor those relating to infectious disease, correspond closely to the figures compiled by the Medical Officer of Health. In the former case a different system of tabulation is employed, while in the latter allowance is made for cases cancelled because of revised diagnosis. 35 cases of Diphtheria and Scarlet Fever were discharged from hospital owing to incorrect diagnosis during 1933.

MALES.

TABLE IV.—Causes of, and Ages at, Death during the year 1933.

		Corre			HS IN		CITY	AT					DE	ATHS	IN T	VARI	os (A	T ALL	AG	ES).				
CAUSES OF DEATH.	All ages.	Under 1.	I and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.	Conduit.	Grosvenor.	Hamlet of Knightsbridge.	Knightsbridge St. George.	Victoria.	St. Margaret.	St. John.	St. Anne.	Great Marlborough.	Pall Mall.	Regent.	Charing Cross.	Covent Garden.	Strand.	I I I I I I I I I I I I I I I I I I I
mallpox leasles carlet fever millenza Whooping-cough liphtheria, Memb. croup lerebro-spinal meningitis coliomyelitis materic fever liarrhoa, enteritis lirysipelas Wher septic diseases yphilis, &c. liabetes theumatic fever cuberculosis of lungs other forms of tuberculosis Malignant growths Longenital debility, mal- formation, and premature birth Old age Meningitis and convulsions	-2 2 37 3 -1 7 3 14 9 9 1 70 6 113	- - 2 2 - - - 7 - 1 2 - - - - - - - - - - - - - -	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1	111111111111111111111111111111111111111	1 7 2 3	5 - - 1 1 4 - - 27 22 2	17 	13 13 1 1 6 1 2 8 52	1	- 1 3 4 5 111 2 1	1 1 3	- - 1 2 - - - - - - - - - - - - - - - -					1 1 1 1 2	- - - - - - - - - - - - - - - - - - -		1 - 1 - 5	- 1 1 - 1 1 - 1 2 8 3 - 1		- - 1 - - - 1 1 - - - - - - - - - - - -

					1	MAL	ES-	-TAI	ELE 1	V (cont	inuce	7).											
		CORR			THE IN		CITY	are.					D	FATH	s IN	WAT	DS (AT AL	L Ac	es)				
CAUSES OF DEATH.	All ages.	Under 1.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.	Conduit.	Grosvenor.	Hamlet of Knightsbridge.	Knightsbridge St. George.	Vietoria.	St. Margaret.	St. John.	St. Anne.	Great Marlborough.	Pall Mall.	Regent.	Charing Cross.	Covent Garden.	Strand.	Homeless.
Loc. ataxia and general paralysis Other diseases of nervous system Valvular diseases of heart Other circulatory diseases. Broncho-pneumonia Peumonia, other forms Other respiratory diseases Alcoholism Cirrhosis of liver appendicitis and typhlitis Other digestive diseases. Bright's diseases, &c Cystitis, &c Peaths by accident or negligence Peaths by suicide and murder Other defined diseases Diseases, ill defined or unknown	4 16 7 219 64 49 14 11 5 4 6 6 38 20 49 36 9	1 6 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 2 2	2 - 1	1 1 1 2 2 -	1 1 -5 1 2 3 1 3 - 3 - 8 9 1	3 9 4 777 15 18 7 5 2 2 2 2 9 9 15 3 19 18 3	2 3 3 3 3 46 20 4 5 - 2 1 11 19 17 9 7 2		1 26 1 3 2 2 2 1 2 2 2 3 4 4 2 6 3 1	-	3 1 18 7 7 7	2 3 2 4 4 1 15 1 15 2 3 3 1 1 0 6 6 1 1 11	- 116 2 1 1 - 2 2 1 1 - 1 - - - - - -	3 2 2 57 24 13 3 4 2 2 1 5 16 10 11 4 4 4	1 1 4 2 3 3 1 1 1 1 1 2 1 1	- - - - - - 1 - - - - - - -	1 2 7 7 - 1 1 - 1 - 1	1 5 2 3 2 2 - 1 1 1 3	1	- 1 8 3 1 3 1 1 1 1 3 4	- - 9 5 1 - 1 - 3 - - 1	9 4 1
All causes	878	49	4	7	8	22	89	331	368	5	86	19	67	212	39	235	28	15	20	31	20	41	32	28

FEMALES.

Table IV.--Causes of, and Ages at, Death during the year 1933.

		Corri			THS IN		Сіту	AT					D	EATHS	S IN	WAR	DS (A	T ALL	Ag	ES).				
Causes of Death.	All ages.	Under 1.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.	Conduit.	Grosvenor.	Hamlet of Knightsbridge.	Knightsbridge St. George.	Victoria.	St. Margaret.	St. John.	St. Anne.	Great Marlborough.	Pall Mall.	Regent.	Charing Cross.	Covent Garden.	Strand.	Homeless.
Smallpox deasles Scarlet fever influenza Whoopinz-cough Diphtheria, Memb. croup Cerebro-spinal meningitis Coliomyelitis Enteric fever Diarrhoa, enteritis Erysipelas Puerperal fever Other septic diseases Syphilis, &c Diabetes Rheumatio fever Tuberculosis of lungs Other forms of tuberculosis Malignant growths Congenital debliity, malformation, and premature birth Old age Meningitis and convulsions		1 1 2 1 10 10 11	1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 3 - 1 1 2 1 14 1 12	2 9 9	15 		- 4 1 1 - 1 11	1 1 2	4 	13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						1 1 3	1 3	111111111111111111111111111111111111111	1	

33

		CORRI			THS IN		CITY	AT					Di	EATHS	IN '	WARI	DS (A	T ALL	Ao	Es).				
	All ages.	Under 1.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.	Conduit.	Grosvenor.	Hamlet of Knightsbridge.	Knightsbridge St. George.	Victoria.	St. Margaret.	St. John.	St. Anne.	Great Marlborough.	Pall Mall.	Regent.	Charing Cross.	Covent Garden.	Strand.	Homeless.
alvular diseases of heart ther circulatory diseases ronchitis roncho-pneumonia ther respiratory diseases leoholism rrhosis of liver ppendicitis and typhlitis ther digestive diseases right's disease, &c recidents and diseases of parturition eaths by accident or	2 11 8 06 84 35 25 2 5 4 25 19 5 4	- 1 1 5 5 2			1 1111111111111111111111111111111111111	- - 3 - - - - - - - - - - - - - - - - -	1 	1 4 4 46 12 10 10 	- 6 4 148 70 19 8 2 - 7 13 4 - 10 2 3	1 -	- 2 - 8 4 4 3 6 - 2 - 2 4 1 - 4 1 -	- 1 9 1 - 2 - 1 1 - 1 1 - 1 - 1 - 1 - 1 - 1 -	1	1 5 2 57 31 9 6 — 1 — 10 8 2 2 12 3 5 5	- - 1 17 3 2 - 1 - 1 - 1 - 1	2 2 49 27 111 2 2 — 4 4 4 5 — 1 5 — — — — — — — — — — — — — — — —		1 1 6 6 1		- - - - - - - - - - - - - -		- 18 2 3 1 2 1 - 1		- 1 1 - 1 1 - 1 1 - 1

1,670 deaths were registered in the City during 1933. After deducting 934 deaths of non-citizens in public institutions, etc., in the City, and adding those of 837 citizens who died in other districts, the corrected total is 1,573, as compared with 1,557 in 1932, and is equivalent to an annual rate of 12.4 per 1,000 persons compared with 12.3 last year.

The London death-rate for 1933 was 12.2 and for England and Wales, 12.3.

The number of deaths and the death-rates per 1,000 for the past fifteen years are shown below:—

TABLE V. (From 1919 to 1933.)

	Y	ear.		Number of Deaths.	Westminster Rate.	London Rate
1919	 		 	1,819	14.2	13.4
1920	 		 	1,600	10.9	12.4
1921	 		 	1,623	11.5	12.4
1922	 ****		 	1,796	12.9	13.4
1923	 		 	1,493	10.6	11.2
1924	 		 	1,695	11.8	12.1
1925	 		 	1,728	12.3	11.7
1926	 		 	1,608	11.6	11.6
927	 		 	1,682	12.3	11.9
928	 		 ****	1 407	11.5	11.6
1929	 		 	1,875	14.8	13.8
1930	 		 	1,478	*12.2	11.4
931	 		 ****	1,609	13.9	12.4
1932				1,557	12.3	12.3
1933	 		 	1,573	12.4	12.2

^{*} Corrected rate.

The deaths of males were 878, females 695.

TABLE VI.

This table shows the total deaths distributed among age periods:—

19	33.	Under 1 year	1 to 2 years	2 to 5 years	5 to 15 years	15 to 25 years	25 to 45 years	45 to 65 years	65 and over	Total.
	М.	49	4	7	8	22	89	331	368 374	878
	F.	26	6	9	4	16	68	192	914	000
1922		104	26	32	41	62	211	584	736	1,796
1923	****	83	16	13	19	46	171	463	682	1,493
1924		0.0	32	39	41	46	184	557	700	1,695
1925		106	28	22	25	65	198	496	788	1,728
1926		0.0	28	20	24	50	185	509	696	1,608
1927		0.6	13	20	24	42	179	533	775	1,682
1928		80	14	10	31	51	164	466	681	1,497
1929		105	28	18	20	43	167	620	874	1,875
1930		81	13	13	21	42	171	474	663	1,478
1931		01	18	11	17	59	166	481	766	1,609
1932		76	14	12	16	53	181	447	758	1,557
1933		75	10	16	12	38	157	523	742	1,573

The causes of death are set out in Table IV. There was an increase among males of deaths from the following causes:—Influenza, septic diseases, syphilis, circulatory diseases, Bright's disease and diseases of the nervous system.

Among females the causes showing an increase were cancer and diseases of the circulatory, respiratory and digestive systems.

The distribution of deaths in the various wards of the City are shown in the following table, and may be compared with the similar figures during the four preceding years:—

TABLE VII.

		1929).		1930).		193	1.	-	1932			1933	3.
-	M.	F.	Total.	М.	F.	Total.	М.	F.	Total.	M.	F.	Total	М.	F.	Total
nduit	4	3	7	8	3	11	7	9	16	3	4	7	5	1	6
osvenor	88	63	151	70	61	131	64	58	122	55	63	118	86	55	141
mlet	18	30	48	20	26	46	19	24	43	17	20	37	19	22	41
St. George	66	80	146	62	56	118	60	67	127	67	70	137	67	65	132
	249	292	541	222	212	434	234	259	493	214	244	458	212	230	442
Margaret		44	95	30	34	64	28	49	77	38	50	88	39	39	78
John	298	207	505	186	179	365	219	187	406	226	179	405	235	167	402
Anne	4.00	28	70	38	18	56	38	25	63	32	21	53	28	31	59
. Marlborough	14	15	29	8	8	16	11	11	22	12	9	21	15	10	25
Il Mall	35	6	41	20	7	27	23	6	29	23	10	33	20	3	23
gent	26	24	50	24	24	48	23	28	51	30	19	49	31	20	51
aring Cross	0.4	7	31	12	11	23	22	6	28	11	3	14	20	11	31
vent Garden	0.00	41	80	26	28	54	42	24	66	36	26	62	41	33	74
rand	36	5	41	39	3	42	28	2	30	36	-	36	32	3	35
omeless	22	18	40	28	15	43	25	11	36	24	15	39	28	5	33

Infantile Mortality.—The corrected death-rate of infants for West-minster was 68 per 1,000 births. The mortality among legitimate infants was 55.6 per 1,000; that of illegitimate 162.7. The infant mortality rate for London was 59.

The number of infants dying under 1 year was 75, a decrease of 1 on the figure of last year. The chief contributory causes of death were broncho-pneumonia, prematurity, gastro-enteritis and syphilis. Table VIII shows the deaths as they occurred during the four quarters of the last four years :-

TABLE VIII.

				Total 1928.	Total 1931.	Total 1932.	Total 1933.
st Q	uarter			21	29	21	26
2nd 3rd 4th	,,	****	****	19	22	17	23
3rd	"	****		21	16	22	- 11
ith	**	****		19	24	16	15
				80	91	76	75

Table IX shows the births and deaths of infants, legitimate and illegitimate, since 1906 onwards, with the corresponding infantile mortality rates for Westminster and for London:—

TABLE IX.

			Legitima	ite.		Illegitima	ite.	Total	Tota
Yea	r.	Births.	Deaths.	Death-rate per 1,000 Births.	Births.	Deaths.	Death-rate per 1,000 Births.	Rate, West- minster.	Rate Lon- don.
1906		2,744	285	103	187	38	203	110	131
1907		2,764	269	97	163	34	208	103	116
1908		2,739	266	97	174	27	155	100	113
1909		2,548	232	91	203	26	128	93	108
1910		2,399	189	78	193	25	129	82	103
1911	****	2,195	210	95	166	33	198	103	129
1912	****	2,194	168	76	155	27	174	83	91
1913		2,057	184	89	176	29	164	95	105
1914		1,995	147	73	162	24	148	79	104
1915		1,798	141	78	181	41	225	92	112
1916		1,632	110	68	178	41	230	83.4	89
1917	****	1,348	112	83	196	48	239	103.6	.104
1918	****	1,234	112	86.6	225	36	155	100	108
1919		1,383	99	71.5	217	41	188	87.5	85
1920	****	2,047	123	60	219	41	200	73.6	76
1921	****	1,729	117	67.7	190	37	194	80.2	80
1922		1,703	84	49.3	199	20	100	54.6	74
1923	****	1,582	68	42.9	176	15	85.7	47-2	60
1924	****	1,489	82	55.0	138	14	101-4	59.0	69
1925	****	1,418	88	62.0	117	18	153.8	69.0	67
1926	****	1,449	76	52.4	157	20	127.3	59-7	64
1927	****	1,255	81	64.5	144	15	104-1	68.6	59
1928	***	1,220	65	53.2	150	15	100-0	58.39	67
1929		1,190	83	67.7	167	22	131 · 7	77.37	70
1930	****	1,202	52	43.2	166	29	174.6	59.21	59
1931	***	1,063	174	69.6	148	17	114-8	75-1	65
1932	****	1,020	50	49.0	132	26	196-9	65.9	66
1933	****	970	54	55-6	129	21	162 · 7	68	59

Table X shows the causes of death of children who died under one year of age. Figures under the same grouped causes are given from 1926

onwards, showing the proportion per 1,000 births applicable under each heading:—

TABLE X.

			and the state of t					
-	1926.	1927.	1928.	1929.	1930.	1931.	1932.	1933.
Diphtheria	_	1.4	1.1.4	0.73	- 1	1	- 1	-
Influenza	0.62	0.71	-	0.73	-	-	_	2.7
Measles	2.49	-	-	0.73	3.6	-	0.86	-
Whooping Cough	0.62	1.4	2.1	8.1	0.73	0.82	0.86	1.8
Septie diseases	0.62	0.71	- 1			_	0.86	0.9
Bronchitis and pneu-		1	- 523	169 (34)		24419		
monia	9.9	6.4	13.8	14.7	14.6	22.3	12.1	10.9
Stomach and bowel							200	
complaints	8.0	12.1	10.9	7.3	5.8	13.2	8.6	9.0
Syphilis	-	2.8	0.72	0.73	2.1	1.6	1.7	3.6
Congenital malforma-								
tions	4.34	7.8	5.1	4.4	4.3	6.6	-	1.8
Prematurity	19.3	20.0	9.4	19.8	18.2	22.3	19.9	16.3
Neglect and injury at								
birth	3.72	4.2	4.3	1.4	1.4	2.4	7.8	5.4
Debility from birth						000000		- 500
and atrophy, rick-				45.50				
ets, atelectasis	3.72	4.2	3.6	2.2	2.7	3.3	5.2	8.1
Tuberculosis	1.86	2.1	2.1	2.2	1.4		0.86	_
furder				-	1.4	_	0.86	-
ecidents			-	-	_	1.6	0.86	0.9
lancer	-			-	-	0.82		-
erebro-spinal Men-				1				
ingitis	_	-	-	_	_	0.82	0.86	0.9
Erysipelas		-	-	-	-	_	0.86	0.9
other causes	4.34	4.2	2.1	13.2	1.4	1.6	3 .4	1.8
	59.7	68-6	58-39	77.37	59.21	75.1	65.9	68-2

Table XI shows nett deaths from various causes at several age periods during the first year of life in the City of Westminster:—

TABLE XI.—INFANT MORTALITY, 1933.

CAUSES OF DEATH.	Under 1 Week	1-2 Wccks.	2-3 Wecks.	3-4 Wceke.	Total under 4 Weeks.	4 Weeks and urder 3 Months.	3 Months and under 6 Months.	6 Months and under 9 Months.	9 Months and under 12 months.	Total Deaths under 1 Year.
Circulatory!	1			-	1	1	1 -	-		1
Whooping Cough	-	-	-	-	-	-		2	-	2
Septic Diseases	_	-	-	1	1	-	-	-	-	1
Meningitis	_	-	-		-	1	-		-	1
Bronchitis and Pneu- monia (all forms)	1	_	_	_	_	2	7	2	1	12
Premature birth	17	_	_	_	17	2 1	_	_	_	18
Other causes		_		_	_	_	1	1	-	2
Syphilis	1	_			1	2	1	_	-	4
Neglect at birth	6	_	-	_	6	_	_	_	-	6
Debility	3	1	1	1	6	2	2	1	-	11
Cerebro-spinal Menin-									FIRST	
gitis	-	-	-		-	-	-	1	-	1
stomach and bowel	-	-	-		-	3	3	4	-	10
Nervous diseases	-	-	-		-	-	-	-	1	1
Accidents		-	-	-	-		-	1	-	1
Erysipelas	-	-	-		-	-	-	-	1	1
influenza	-	-	-	-		-	1	1	1	3
	28	-1	1	2	32	11	15	13	4	75

TABLE XII.

			Males.	Females.	Total.
Legitimate	****	****	467	503	970
Illegitimate			58	71	129
			525	574	1,099
				-	-
Nett Deaths in the	year of :	-			
			Males.	Females.	Total.
Legitimate infa	ants	****	36	18	54
Illegitimate int	fants		13	8	21
			49	26	75

The causes of death of the Illegitimate were:—Neglect at birth 6, prematurity 4, pneumonia 2, syphilis 3, digestive disease 2, circulatory 1, and debility 3.

TABLE XIII.

Infant Mortality, 1933.—Nett Deaths from stated causes at various ages under One Year of Age in Pimlico Area (Victoria, Knightsbridge St. George and Hamlet Wards).

CAUSES OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 4 Weeks,	4 Weeks and under 3 Mo 1 hs.	3 Months and under 6 Months.	6 Months and under 9 Months.	9 Months and under 12 Months.	Total Deaths under One Year.
Whooping Cough	_	_	_	_	_	-		1		1
Syphilis	-	-		-		1 -	1		_	1
Bronchitis and Pneu-				1994	1					
monia (all forms)	-	-	-	-	-	1	4		1	6
Gastro-enteritis	-		-	-	-	3	-	2	-	5
Neglect at birth	1	-	-	-	1	-	-	-		1
Premature birth	10	-	-	-	10	-	-	-	-	10
Malnutrition, marasmus and debility from										
birth	3	-	-	-	3	2	1	1	_	7
Iufluenza	-	-	-	-	-	-	_	1	1	2
Accident			-	-	-	-	-	1	-	1
Meningitis	-	-	-	-	-	1	-	-	-	1
Totals	14	_	_	_	14	7	6	6	2	35

TABLE XIV.

Nett Deaths in the above area during the year :-

				Males.	Females.	Total.
Legitimate	****	****		18	8	26
Illegitimate	****	****	****	6	3	9

TABLE XV.

Infant Mortality, 1933.—Nett Deaths from stated causes at various ages under One Year of Age in St. John and St. Margaret Wards.

CAUSES OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 4 Weeks.	4 Weeks and under 3 Months.	3 Months and under 6 Months.	6 Months and under 9 Months.	9 Months and under 12 Months.	Total Deaths
Whooping Cough	_	_	_	_		_	_	1	-	1
Bronchitis and Pneu-	100		139	101		1		7	135	
monia (all forms)	-	-	-	-		1	2	2	-	5
Stomach complaints		-	-	_	-		3	2	-	5
Premature birth	1	1		-	2	1	_		-	3
Debility	1	-	1		2	-	-	-		2
Septic Diseases	-	-	-	1	1	-	-		-	1
Other causes		-	-	-		-	1	1	1	3
Cerebro-Spinal Menin-						13.5			366	
gitis	-	-	-	-		-		1	-	1
Erysipelas	-	-	-	-	-	-	-	-	1.	1
Totals	2	1	1	1	5	2	6	7	2	22

TABLE XVI.

Nett deaths in the above area during the year :-

		Males.	Females.	Total.
Legitimate infants		 10	11	21
Illegitimate infants	****	 1	-	1

TABLE XVII.

INFANT MORTALITY, 1933. Nett Deaths from stated causes at various ages under One Year of Age in the North District (Grosvenor, Conduit, St. Anne, Pall Mall, Regent, Gt. Marlborough, Strand, Charing Cross and Covent Garden Wards).

CAUSES OF	DEAT	н.	Under 1 Week.	1-2 Weeks,	2-3 Weeks.	3-4 Weeks.	Total under 4 Weeks.	4 Weeks and under 3 Months.	3 Months and under 6 Months.	6 Months and under 9 Months.	9 Months and under 12 Months.	Total Deaths under 1 Year
Pneumonia						_		1 -	1	_	_	1
Premature 1	oirth		5	-	_		. 5	-	_	-		5
Influenza			-		_	_	_	-	1	_		1
Debility			1	-	-	-	1	-	1			2
Syphilis			-	-	-		-	1	-	-	-	1
Totals			6	_	_	_	6	1	3		_	10

TABLE XVIII.

Nett deaths in the above area during the year :--

-			Males.	Females.	Total.
Legitimate infants	****	****	7	23	7
Illegitimate infants	****	****	2	1	3

TABLE XIX.

Deaths of infants with no known address, or found in streets, parks, &c. :-

CAUSES OF D	EATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks,	Total under 4 Weeks.	4 Weeks and under 3 Months.	3 Months and under 6 Months.	6 Months and under 9 Months.	9 Months and under 12 Months.	Total Deaths under 1 Year.
Neglect at birth		5	_	_	_	5	_	_			5
Syphilis		1	-	-	-	1	1	-		-	2
Circulatory		1	-	-	-	1	-	-	-	-	1
	Total	7	-	_	-	7	1	_	_	-	8

TABLE XX.

Deaths of children unk	nown:	_				
				Males.	Females.	Total.
Legitimate	****	****		-	-	-
Illegitimate	****	****	****	5	3	8

TABLE XXA.

The following table shows the allocation of the nett births and infant deaths among the various Wards in the City, together with the infantile mortality rate for the Ward.

		1933.			Deaths,				-Infan per 1,000	
rosvenor	Population, 1931 Census.	Total Births, 1	Legitimate.	Illegitimate.	Total Infant D 1933,	Legitimate.	Illegitimate.	Legitimate.	Illegitimate.	Total.
C	2,872 4,047 3,331 5,405 6,655 3,210 2,052 36,955 11,445 6,461	5 59 9 23 12 39 41 10 4 460 83 18 35 298 3	4 53 6 21 10 34 37 9 4 400 74 17 31 270	1 6 3 2 5 4 1 60 9 1 4 28 3	-2 -2 -1 3 1 1 33 1 1 -1 -2 2 8	$ \begin{array}{c c} -\frac{2}{1} \\ -\frac{1}{2} \\ -\frac{1}{2} \\ -\frac{1}{24} \\ -\frac{1}{21} \\ -\frac{1}{21} \end{array} $	1 - 1 9 - 1 8	37·7 47·6 	500·0 250·0 150·0 - 35·7	25·6 73·1 100·0 250·0
Total	129,579	1,099	970	129	75	54	21	55-6	162.7	68

The following table is inserted by courtesy of the Medical Officer of Health, Poplar, by whom the figures were compiled.

STATISTICS FOR 1933.

City or Boro	ugh.		Population. (RG's. estimate)	Birth- rate.	Death- rate.	Infant Mortality Rate.
West Districts-			1			1
Paddington			141,900	13.41	13.36	85
Kensington	****		181,100	12.0	12.9	72
Hammersmith			131,400	13.9	12.9	65
Fulham			148,200	13.07	13.00	65
Chelsea		****	58,850	10.6	13.6	78
City of Westmins			126,300	8.7	12.4	68
North Districts-		-	120,000		12.1	00
St. Marylebone			94,080	9.71	12.2	56
Hampstead	****		90,380	9.6	11.0	38
St. Pancras			190,900	13.6	13.7	58
Islington			319,100	14.35	12-40	63
Stoke Newington		****	51,120	12.6	12.3	46
Hackney	****		214,300	14.0	11.5	-50.6
Central Districts-	-		211,000	14.0	11.0	00.0
Holborn	****		36,050	9.49	13.48	70
Finsbury			66,640	15.1	12.8	50
City of London			9,830	7.7	10.9	65
East Districts-			0,000		10.9	00
Shoreditch			93,550	16.0	13.0	74
Bethnal Green			104,200	14.3	12.5	66
Stepney			219,100	15.1	12.9	65-3
Poplar			149,300	15.4	12.4	54
South Districts-		****	110,000	10.1	12.4	0.1
Southwark			164,700	14.2	13.9	63
Bermondsey		****	107,300	14-0	12.5	61
Lambeth			289,000	13.6	13.1	63
Battersea		****	154,000	14.7	12.49	49.49
Wandsworth		****	350,200	10.93	11.49	50
Camberwell			243,700	13.32	12.33	49
Deptford		****	102,800	14.8	12.33	54
Greenwich		****	97,830	13.7	11.9	
Tomishous	****	****	221,100	12.2	10.2	66
Woolwich	****	****	146,200	12.6	11.18	39
	*****	****	140,200	12.0	11.19	62

Common Lodging House Deaths.

Reference has been made in former reports to the shifting population which inhabits the six common lodging houses which are licensed in the City. Some of the residents are permanent in so far that they have been resident in the Poor Law institutions for perhaps thirty or forty years although their original residence and perhaps even temporary at that was in a common lodging house in the City. Deaths among the latter class of people tend to increase the death-rates of the wards in which those lodging houses are situated; 90 deaths of persons giving addresses in common lodging houses occurred in 1933. They were mostly in institutions:—

TABLE XXI.	Deaths	. Ward.
Bruce House (L.C.C.) (licensed for 716 men)	22	Strand
33, Great Peter Street (licensed for 80 men)	-	
7, St. Ann's Street (Salvation Army) (licensed for		
565 men)	30	
16, Strutton Ground (licensed for 201 men)	28	St. John.
40, Great Peter Street (Church Army) (license	d for	
57 women and 2 children)	6	
Church Army Home, Greencoat Place (174 women	n) 4)	
	90	

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

The following table shows the number of cases of infectious disease which came to the notice of the department during the period 1929-1933.

Details respecting the notifications of infectious disease received are set out on the adjoining page.

TABLE XXII.

	1929	1930	1931	1932	1033
Smallpox	2	3	2	3	1
Dinbthowin	170	256	140	80	142
Franipolae	54	37	46	50	53
Coorlet force	227	265	196	211	354
Enteric fever	7	18	7	7	7
Continued forer	1	_	-	-	-
Ducaporal forer	10	6	4	7	4
Duemoral nymovia	12	16	15	8	11
Carobra aninal maningitia	2	-	8	6	11
Encephalitis lethargica		3	1	2	1
Deliamyrelitie	1	3	-	1	2
Onlithalmia magnatarum	11	16	7	13	7
Manalan	381	551	74	810	255
Corman massles	179	15	23	18	45
Pneumonia	51	25	49	51	66
Malaria	—	-	1	1	-
Dysentery	7	-	1	2	1
Chielenner	229	173	204	201	167
16	73	166	80	92	130
Whooping-cough	246	14	83	138	132
Membranous croup		-	1	-	

Smallpox.—One case only occurred during 1933,

Vaccination.—The Vaccination Officer states that the following number of persons were vaccinated by the Public Vaccinators during the year:—

These figures do not include vaccinations and re-vaccinations done by private practitioners. No vaccination was done by the Medical Officer of Health under the Public Health (Smallpox Protection) Regulations, 1917. The report of the Vaccination Officer is given below in the form of tables prescribed by the Ministry of Health in the Vaccination Order.

25

VACCINATION RETURN FOR THE YEAR ENDED 31ST DECEMBER, 1932.

returned in the cets " as regis- fanuary to 31st	31st Jan "Vac	Number of nuary, 193 ccination R	these I 4, in Co egister	Births duly entered by blumns I, II, IV and " (Birth List Sheets)	y V of the , viz.:	on 31st unenter	er of these Birt January, 1934, red in the "Va ster" on account by Report B	remained accination unt (as	the remaining 4, neither duly Vaccination 3, 4, 5, 6 and 7 or temporarily the "Report and 10 of this	Certificates of ry Vaccination or 14 received ar year 1933.	y Declarations bjection actual- te Vaccination ve of the dates ddren to which yg the calendar
"Birth List Sh tered from 1st J December, 1932.	Col. I. Successfully Vaccinated.	Insus- ceptible of Vaccina- tion.	Had Smallpox.	Col. IV. Number in respect of whom Statu- tory Declara- tions of Con- scientious Ob- jection have been received.	Col. V. Dead, Unvaccinated.	Postponement by Medical Certificate.	tricts the Vac- cination Officer of which has been duly ap- prised.	Removal to Places unknown, or which cannot be reached; and Cases not hav- ing been found.	Number of these Bi on 31st Jan., 193 entered in the Register" (cols., 3 of this Return) n accounted for in Book" (cols. 8, 9 Return).	Successful Prima of children unde during the calendaring	Number of Statutor of Conscientious O by received by the Officer, irrespection of birth of the chit they relate, during year 1933.
2	3	4	5	6	7	8	9	10	11	12	13
,604	1,006	13	-	294	53	6	129	103	-	1,213	306

SUMMARY OF MONTHLY RETURNS FOR THE YEAR ENDED 31ST DECEMBER, 1933.

No. of Cases in	No. of	No. of Certificates of	No. of Statutory Declarations	No. of	No. of	Cases.	No. of Postel or la
Birth Lists received.	Certificates of Vaccination received.	Postponement owing to health of Child.	under Section 1 of the Vaccina- tion Act, 1907.	Certificates of Insusceptibility.	Parents Removed out of District.	Otherwise not found.	No. of Entries in List sent to Public Vaccinators.
1,624	1,213	70	306	12	80	80	241

STATEMENT OF VACCINATIONS CARRIED OUT BY THE PUBLIC VACCINATORS DURING THE YEAR ENDED 31ST DECEMBER, 1933.

Namt of Public Vaccinator and District.	No. of Successful Primary Vaccinations.	No. of Successful Re-vaccinations.
Dr. K. R. Hay (Mayfair) Dr. H. W. Doll (Belgrave and	15	1
Dr. A. E. Cope (Westminster.	216	6
Dr. H. M. Whitby (St. James	197	28
and St. Anne)	45	1
Dr. H. M. Whitby (Strand)	31	3
	504	39

The percentage of infants vaccinated in relation to births is 62—a most satisfactory result when it is realised that the percentage figure for the whole country is 39.

TABLE XXIII. City of Westminster.—Cases of Infectious Disease Notified during the Year 1933.

							CASES	Noti	FIED.					to								DEA	THS.					
							At Ag	es—Y	cars.					removed tal.	Home.				At Ages—Years.									
NOTIFIABLE DISEASES.	Under 1.	1-2.	2-3.	3-4.	4-5.	5-10.	10-15.	15-20.	20-35.	35-45.	45-65.	65 and over.	Cases rer Hospital	3 at	Under 1.	1-2.	2-3.	3-4.	4-5.	5-10,	10-15.	15-20.	20-35.	35-45.	45-65.	65 and		
Erysipelas	133 53 342 6 - 4 10 2 1 7 66 - 1	- 1 2 2 4 7 3		5 14 	9 21		58 118 — — — — — — — — — — — — — —	- 16 63 - - - - 1 1	- 7 - 24 3 2 2 	1 20 13 56 3 — 4 2 — — — — — — — — — — — — — — — — —			12 8	1 133 41 330 6 - 4 10 2 1 3 54 - 1	12 12 12 	- 1 5 4 - 1 2 - 39 - -				- - - - - - - - - - - - - - - - - - -		1 1			1 - 1 - 1 1	2 8	1 2	15
Totals	637	19	7	22	31	42	179	81	38	127	29	42	20	597	40	53	3	_	-	1	_	2	-	1	3	10	20	1

Correction has been made for errors in notification or revision of diagnosis in 35 cases. Diph. 17, Scarlet Fever 16. Enteric 2: Scarlet fever, 14.
Diphtheria, 9. C. Spinal Fever 1.
Enteric 1.

NOTIFIABLE DISEA	SES.		Conduit.	Grosvenor.	Knightsbridge St. George,	Victoria,	St. Margaret.	St. John.	Hamlet of Knightsbridge.	Pall Mall.	Regent.	Great Mariborough.	Charing Cross.	Covent Garden,	Strand.	St. Anne.	Homeless and non residents,
Cholera (C). Plague (R) Diphtheria			1	3 6 24 	112 4 34 34 34 5 1 1 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				- - 1 1 1 1 - - - - - - - - - - - - - -	1 1	111 3 8 8	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	- 2 2 7 1 1 1	8	1 6 2 10	1 - 1 - 1 - 1 - 23

Scarlet Fever.—354 cases of this disease occurred in 1933, an increase of 143 on the figures of 1932. There were 4 deaths. The case rate of this disease per 1,000 of the population was 2·8 for the City, and for England and Wales 3·21. The death-rate for London was 0·02 per 1,000, for England and Wales 0·02, and for Westminster 0·03. Of the total cases in Westminster 93·2 per cent. were removed to hospital. The wards showing an increase were St. John, Victoria and Knightsbridge. Four cases of scarlet fever contracted diphtheria whilst in hospital.

There was, as in other districts, a considerably higher incidence of this disease, and some evidence to show an increase in virulence. It is possible that the end of the cycle of scarlet fever as a mild infection is approaching. In the nineties of last century it was regarded as a serious disease.

Diphtheria.——142 cases of this disease occurred, showing an increase of 62 on the figures of 1932. The largest number of cases occurred between the ages of 5–15 and 20–35. The case rate of this disease for Westminster was 1·1 per 1,000 living, and for England and Wales 1·18. There was 1 death. The death-rate for England and Wales was 0·06, for London 0·08, and for Westminster. 0·007. Six cases of diphtheria contracted scarlet fever whilst in hospital.

No cases occurred among children who had been immunised. The total immunisations carried out since 1926, when it was begun, now amounts to 1380.

Report on Schick Testing and Immunisation Treatment against Diphtheria in Westminster, 1933.

This treatment was continued throughout the year at the Council's Maternity and Child Welfare Centre, and at the Westminster Health Society's Centre. One clinic is held at each Centre weekly.

121 new cases were dealt with during the year, as compared with 140 in the previous year. During the long period of good health and exceptionally fine weather which marked the summer of 1933, attendances were very sparse. At the end of the year, when epidemic disease became more prevalent, there was a marked increase of applicants for treatment, but too late to bring the year's attendances up to the average.

New cases attended the	differ	cent Ce	ntres	as foll	ows:-	
Ebury Bridge						53
Bessborough Street						35
Marshall Street .:						20
Westminster Health S	ociety					13

As indicated in previous reports, preliminary testing is now only carried out on older children or on those who are definitely known to have been exposed to diphtheria infection.

The following table indicates treatment given and the result of tests performed. Positive reactors received preventive treatment.

			Treated	
	Positive.	Negative.	without test.	Total.
Under 5 years	 1	1	92	94
5 to 10 years	 4	2	15	21 .
10 to 15 years	 2	4	0	6
	7	7	107	121

Those not tested in the 5-10 years' group were mostly aged about 5 or 6 years.

The treatment was carried out without difficulty and with satisfactory results. There was a high standard of attendance. As in previous years over 10 per cent. of those who presented themselves for treatment had not been vaccinated against smallpox.

75 cases received re-tests. Of these 59 gave a negative reaction six months or longer after treatment. 12 were negative after a previous positive result followed by an additional course of two treatment injections. 4 gave a slight positive reaction at the first re-test and received additional treatment.

One must continue to emphasise the importance of obtaining a negative result after treatment has had its effect, before one presumes that adequate protection against the effects of any ordinary diphtheria infection has been afforded.

Antitoxin, for use in cases of diphtheria, is provided free of charge for medical practitioners attending patients residing in the City. The supply is available on application at the City Hall and at the Coroner's Court in Horseferry Road. It is apparent from the small amount used (12 bulbs, each containing 8,000 units) that practitioners prefer to send their patients at once into the fever hospitals, where antitoxin is administered on admission to all cases of clinical diphtheria.

Enteric Fever.—There were 7 cases of typhoid and paratyphoid which came to the knowledge of the department during 1933. Of these 3 were notified as paratyphoid and 4 as typhoid. Four cases came from abroad, and no history was obtainable in 3 cases.

There was one death. The death rate of this disease for England and Wales was 0.01. The case rate for England and Wales was 0.04 and for Westminster 0.04.

Measles.—The following table shows the number of cases notified by head teachers of schools, hospitals and private practitioners during the last five years:—

1929.	1930.	1931.	1932.	1933.
381	551	74	810	255

The death rate for England and Wales per 1,000 population was 0.05, for London 0.02, and for Westminster 0.01. 95 cases were removed to hospital, 54 being between the ages of 1 and 5. 2 deaths occurred. One child suffering from measles contracted diphtheria in hospital, 1 contracted diphtheria and scarlet fever, and 4 cases contracted scarlet fever.

TABLE XXV.

Influenza.—The deaths certified from this cause during the last five years are as follows:—

	1929.	1930.	1931.	1932.	1933.
Males	51	3	13	21	37
Females	48	3	24	37	29
	-	-	_	-	-
	99	6	37	58	66

The death rate in 1933 for Westminster was 0.52 per 1,000; for London 0.51, and for England and Wales 0.57. Last year the corresponding rates were 0.46 for Westminster, 0.27 for London, and 0.32 for England and Wales.

Influenza by itself is not notifiable under existing regulations but only when complicated by pneumonia. Therefore no reasonable deductions can be made by comparing the notification rate of influenzal pneumonia with the death rate from influenza. The higher age groups 55 to 75 as might be expected were most affected.

Diarrhœa and Enteritis.—The total deaths were 11—7 males and 4 females—10 being under 1 year old. The infant death rate from this cause in Westminster was 9.0. In 1911 and 1921, also years of exceptionally warm summers, the rates were 20.7 and 15.0 respectively.

TABLE XXVI.

DEATHS FROM DIARRHŒA AND ENTERITIS.

	-	-	-	Under 1 year.	Other ages.	Total.
1929			 	7	1	8
930	****		 	7	1	8
930 931			 	16	6	22
932		****		8	3	11
933		****	 	. 10	1	11
				48	12	60
400						

Whooping Cough.—132 cases were notified during the year, with 6 deaths. 38 cases were moved to hospital, 32 being between the ages of 1 and 5. The death rate for Westminster was 0.04, for London 0.08, and for England and Wales 0.05.

The deaths from whooping cough during the last five years are thus set out:—

TABLE XXVII.

				Under 1 year.	At other ages.	Total.		
929						11	8	19
930 931			S	****	****	1	1	2
931	****	****	****	****	****	1	3	4
932		****	****		****	1	1	2
933	*****	****	****	****		2	4	6
						16	17	33

Cerebro-spinal Fever.—11 cases of this disease occurred with 2 deaths, one being under 1 year of age.

Poliomyelitis.—2 cases occurred.

Encephalitis Lethargica.-1 case was notified.

Chicken Pox.—167 cases occurred, 32 being moved to hospital.

Mumps.—130 cases were recorded, 33 cases being moved to hospital.

Puerperal Fever.—4 cases were notified and 1 death occurred. All cases were removed to hospital.

The following table shows the number of births for the last five years, together with the number of cases of puerperal fever and deaths:—

	Year.			No. of births.	No. of cases.	Deaths.	Death rate per 1000 births
41 00		101111	1		1	and Table	1
1929	****	****	****	1,357	10	3	2.2
1930	****	****		1,368	6	4	2.9
1931	****	****	****	1,211	4	4	3.3
1932	****	****		1,152	7	1	0.86
1933	****		****	1,099	4	1	0.91

Puerperal Pyrexia.—11 cases occurred, all being removed to hospitals.

Ophthalmia Neonatorum.—7 cases occurred in 1933, 3 were admitted to hospital and 4 treated either at home or as out-patients of hospitals. In addition to these notified cases, 5 cases of slight inflammation of the eyes came to the knowledge of the Department. Facilities are afforded for the treatment of this disease by the London County Council at St. Margaret's Hospital, Kentish Town, N.W. Mothers are also admitted, and, if necessary, receive treatment.

THE PUBLIC HEALTH (OPHTHALMIA NEONATORUM) REGULATIONS, 1926.

These regulations have been in force since October, 1926, and under them midwives are no longer obliged to notify, but they are obliged to call qualified medical assistance to all cases of inflammation of the eyes. If the medical practitioner considers the case one of ophthalmia neonatorum, he must notify to the Medical Officer of Health.

The following details in tabular form are required by the Ministry of Health of the cases notified in 1933:—

	Cases.					
Total.	Trea	ted.	Vision un- impaired.	Vision impaired.	Total blindness.	Deaths
Total.	At home.	In hospital.				
7	4	3	7	-	-	_

BACTERIOLOGICAL LABORATORY.

The examination of specimens for bacteriological investigation is carried out at the laboratory of Westminster Hospital. The facilities provided by the Council apply only to patients who are residents in the City. A charge, however, is made for work done on behalf of individuals whose place of occupation is in Westminster, but who may be attended by Westminster practitioners. The materials for swabbing, etc., are supplied by the Council.

The following is the summary of bacteriological work performed:

Swabbings from throats in suspected diphtheria .. 527

Sputa for investigation of T.B. 318

Expenditure on first was £84 17s. 6d., and for the second £42 3s. 7d., including cost of outfits, postage and telegrams.

TUBERCULOSIS.

In 1933, 205 new cases of pulmonary tuberculosis came to the knowledge of the Department, including 13 cases who had moved into the City, 1 by posthumous notification, and 24 non-notified deaths.

Non-pulmonary forms of tuberculosis gave 41 cases—5 of these being non-notified deaths, and 1 transfer.

Table I.
Tuberculosis, 1933.

					Ne	w Cases.		Deaths.						
	Age-Periods.			Pulmonary.		Non-pu	lmonary.	Pulme	onary.	Non-pu	Non-pulmonary.			
				М.	F.	M.	F.	M.	F.	M.	F.			
Und	ler 1			_	_	_	-	-	_	_	1			
1					-	1	4	_	-	1	-			
5	****			1	2	5	2	-	-	-	-			
10			****	2	3	1	5	1	1		1			
15		****		11	6	3	4	1	1	2				
20				12	11	- 3	1	6	3	-	-			
25				37	32	2	2	16	7	1	-			
35			****	21	13	2	2	11	7	1	1			
45				21	3	1	1	14	-	1				
55				16	1	1	1	13	1		1			
65 a	and up	wards		9	4	-	-	8	2	-	-			
	Tot	als		130	75	19	22	70	22	6	3			

In this table all *primary* notifications are included, and also other new cases of tuberculosis coming to the knowledge of the Medical Officer of Health during the year.

The total cases for 1933 show a decrease of 64 on those of 1932. Out of the total cases primarily notified in 1933, 34 died, and the following table shows the period between notification and death of these cases:—

	Weeks.		Months.										
1-2	2—3	3-4	1-2	2—3	3-4	4-5	5—6	6-7	7—8	8-9	9—10	10-11	11-1
13	2	3	6	2	3	1	1	1	_	-	-	1	
					Т	ABLI	II.						
			1929		1930			1931		1932		1933	
Numbe	New cases notified Number included in above who died during the year				247 41 (16·5%)		209 23 (11·0%)		201 36 (17·9%)		242 35 (14·4%) (16	202 34 (-8%)
	otal Tuberculous Deaths Death Rates per 100,000				24		107		121 104 · 6		106		101

Table III.

Tuberculosis.—Notifications received during the period from 1st January, 1933, to 31st December, 1933.

						Number	of notificati	ons on For	m A.				
	Primary notifications.												Total notifications,
Age periods.	0 to 1.	1 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 and up.	Total new cases.	on Form A, including case
Pulmonary— Males	 _	_	1	2	11	10	32	15	18	12	5	106	110
Non-pulmonary— Males			5	3	5	10	26	8	3	1	3	61	66
Females	 -	4	1	5	4	1	1	î	î	î	-	19	20
Total	 _	4	9	11	22	24	61	25	23	15	8	202	213

Table IV.

Tokerculosis.—New cases coming to the knowledge of the Medical Officer of Health otherwise than by Notification under the Regulations.

A	33. criods.		0 to 1.	1 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	S5 to 45.	45 to 55.	55 to 65.	65 and up.	Total.
Females Non-pulmonary Males Females	 	 			1 1	1 1 1		2 1	5 6	6 5 1	3 -	4 -	4 1	24 14
	Total	 	_	1	1		2	3	1 12	1 13	- 3	_	5	3

Tuberculosis.—Table showing distribution in Wards of notified and unnotified cases, and numbers of such persons who have been treated in Institutions.

1933		All Ages.	Conduit.	Grosvenor.	Knights- bridge St. George.	Victoria.	St. Margaret.	St. John.	Hamlet of Knights- bridge.	Pall Mall.	Regent.	Great Marl- borough.	Charing Cross.	Covent Garden.	Strand.	St. Anne.	Homeless.	Received Insti- tutional Treat- ment during 1933.
Pulmonary— Males Females Non-pulmonary—	 	130 75	=	5 5	11 14	38 23	7 5	36 11	1 2	5	3 3	1	-	4 3	10	6 7	3	82 37
Males Females	 	19 22	=	=	2 3	8 10	=	7 6	=	=		=	- 1	2	=	-	=	8 9
	-	246	-	10	30	79	12	60	- 3	5	7	2	2	9	10	14	3	136

TABLE VI.

TUBERCULOSIS NOTIFICATIONS.

The figures for a series of years are shown below:—

		I	ulmonar	y.					
		neral ulation.		C.L.H. and no Address.		Non-Pulmonary.			Total of all forms
	Males.	Females.	Males.	Females.		Males.	Females.	Total.	
1914	186	105	94	4	390	34	38	72	462
1915	155	95	59	8	317	46	26	72	389
1916	183	135	64	9	391	42	39	81	472
1917	209	164	51	7	431	42	34	76	507
1918	293	225	40	4	562	50	55	105	667
1919	197	122	30	4	353	35	23	58	411
1920	143	133	29	4	309	29	29	58	367
1921	118	114	37	2	271	19	22	41	312
1922	119	110	42	2	273	24	30	54	327
1923	111	114	42	1	268	24	. 32	56	-324
1924	140	122	33	1	296	27	24	51	347
1925	108	92	27	1	228	23	31	54	282
1926	117	90	29	4	240	18	30	48	288
1927	103	67	24	1	195	21	29	50	245
1928	97	61	27	2	187	22	27	49	236
1929	106	105	42	6	259	14	28	42	301
1930	104	69	16	1	190	24	33	57	247
1931	108	86	17	1	212	20	23	43	255
1932	136	84	28	-	248	26	36	62	310
1933	106	75	24	-	205	19	22	41	246

A return required by the Ministry is appended, also a table showing the distribution of the cases in the various wards of the City.

Non-notified Deaths.—There were 29 deaths from Tuberculosis during 1933 of persons who had not been notified in Westminster. The majority of these had been notified elsewhere, some were sudden deaths of visitors to this country, of inmates of asylums, etc., and the cause of death in some cases was only discovered on post-mortem examination. These 29 non-notified deaths gave a percentage of 28.7 of the total deaths from Tuberculosis for the year.

The total number of cases of Tuberculosis on the Register at the end of 1933 was 1,313 as compared with 1,302 at the end of the year 1932.

THE PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1924.

The number of unnotified deaths during the year was 29; the corresponding percentage proportions are 32.0 per cent. (1932) and 28.7

per cent. (1933). Enquiries were made, but in no instance did there appear to be neglect to notify a case on the part of a medical practitioner. 20 deaths occurred in institutions and 9 at home.

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

The object of these regulations is to prevent anyone who is aware that he is suffering from an infectious form of tuberculosis from engaging in certain departments of the milk trade. There was no occasion for exercising the powers conferred by these regulations during 1933.

TABLE VII.

	Pulm	ionary.	Non-Pulmona		
	Males.	Females.	Males.	Females.	
Number of cases on Register at beginning of year 1933 Notified for the first time during year	646 111	333 69	137 16	186 20	
Removed from the Register on account	757	402	153	206	
Removed from the Register on account of death or removal from Westminster) 105	63	16	21	
	652	339	137	185	

Of the 205 cases removed from the Register during the year 1933, 77 were on account of death, 126 persons suffering from Tuberculosis moved from the City, and notification was withdrawn in 2 cases.

Deaths from Tuberculosis.—The total number of deaths from Tuberculosis for 1933 (all forms) was 101—Males 76, Females 25. This gives a death-rate for this disease of 0.79 per 1,000. The following table shows the number of deaths from Tuberculosis for the last 5 years, together with the death-rate.

Year.	Deaths.	Rate per 1,000.
1929 .	124	•98
1930	107	•85
1931	121	1.04
1932	106	•83
1933	101	•79

The following table shows Deaths per 100,000 of civilian population since 1919.

Westminster—Deaths from Tuberculosis per 100,000 Civilian population.

,	Years.		Pulm	onary.	Non-pu	lmonary.	То	tai.
	1 cars,		Deaths.	Rates.	Deaths.	Rates.	Deaths.	Rates.
1920 a	nnual		139	97	18	12	157	109
1921	**	****	120	84.9	15	10.6	135	95.5
1922	,,	****	144	103 - 3	21	15	165	118.3
1923	23	****	103	73-3	16	11.3	119	84.7
924	**	****	124	86.7	14	9.9	138	96.5
925	**	****	115	82.3	14	10.0	129	92.4
926	"		119	85.9	14	10.1	133	96.0
927	**	****	100	73.2	14	10.2	114	83.5
928	**	****	90	69.3	18	13.8	108	83.2
929	**	****	113	81.8	11	8.7	124	98.8
930	**		98	77.9	9	7.1	107	
931	**	***	105	90.8	16	13.8	121	85.0
932	11	****	90	71.2	16	12.6	106	104.6
933	22	****	92	72.8	9	7.1	101	83·8 79·9

The following report and tables of statistics required by the Ministry of Health are submitted by Dr. Ian S. Thomson, Tuberculosis Officer and Assistant Medical Officer of Health.

CITY OF WESTMINSTER TUBERCULOSIS DISPENSARY. Annual Report, 1933.

The work of the Dispensary has been continued throughout the year, without any marked change in the routine.

Four hundred and twelve new cases were seen by the Tuberculosis Officer during the year, as compared with 484 in 1932, and 400 in 1931. These annual figures vary with the notification rate in Westminster and with the incidence of influenza and bronchitis colds. Epidemics of such diseases increase the numbers of cases sent to the Dispensary for observation and diagnosis. The proportion of the available tubercular cases which attend the Dispensary each year remains very constant.

One hundred and ninety seven of the new cases seen by the Tuberculosis Officer were considered to be tubercular, although not all at an active stage of the disease. There were also 47 cases recommended for institutional treatment by general hospitals. Necessary action with regard to these cases was taken by the Dispensary staff and the Tuberculosis Care Committee, and many of them will attend the Dispensary when their institutional treatment is completed.

The sources from which new cases were referred to the Dispensary during the last three years are shown in the following table:—

			1931.	1932.	1933.
Practitioners			152	164	140
Health Visitors			134	. 196	162
St. Stephen's Hospital			- 76	82	72
Ministry of Pensions			5	3	0
School Medical Officer			18	16	18
Hospitals			7	5	10
Referred by Friends,	Chari	table			
Organisations, etc.			8	18	10
			400	484	412

It may be noted that patients come from these different sources in a fairly constant proportion, with the exception of new cases from the Ministry of Pensions. These have naturally become fewer in recent years, and in 1933 there were none. There are still many old pensions cases attending the Dispensary.

During the year the Tuberculosis Officer was appointed Honorary Consultant to the Tuberculosis wards at St. Stephen's Hospital. This places on an official basis an arrangement made ten years ago, while the Hospital was maintained by the Westminster Guardians, and continued informally since the hospital was taken over by the London County Council. The value of the collaboration between the medical officers of the hospital and the Tuberculosis Officer has been stressed in previous reports.

The following table gives certain details of the work of the Dispensary . during 1933 and in the four previous years :—

	1929.	1930.	1931.	1932.	1933.
New Patients attending	461	341	400	484	412
Old Patients attending	430	507	427	477	430
New Contacts examined	111	55	85	105	126
Individual attendances	891	848	827	961	842
Total attendances	2,312	2,210	2,314	2,321	2,165
Written Reports to Public Authorities and Practitioners	1,333	1,250	1,187	1,228	1,090
Consultations with Practitioners	97	82	72	73	82
Home Visits	143	106	157	132	117
Visits by Health Visitors to Dispensary				-0-	
Cases	3,257	2,967	3,469	3,373	3,404
Sputum Examinations	154	225	192	225	164
X-ray Examinations	12	29	42	61	60

There has been in increase in the number of X-Ray examinations in the last few years. Increasing stress is being placed on X-Ray examination by Tuberculosis workers in this country and elsewhere, and it seems probable that the X-Ray examination of all doubtful cases, and even of contacts, will become a matter of necessary routine. The figure given refers only to X-Ray examinations made at the expense of the City Council. The Tuberculosis Officer also sees X-Ray films of patients in St. Stephen's Hospital and receives radiological reports on Sanatorium patients.

Patients have been recommended for institutional treatment from the Dispensary as follows:—

			Hospitals.	Sanatoria.
Insured	Males	 	 15	51
Insured			 10	25
Uninsu			 1	2
Uninsu			 4	9
Boys		 	 3	7
Girls		 	 5	4

This table does not include patients recommended for direct admission to St. Stephen's Hospital for varying periods of treatment. Many of these become sanatorium cases later.

Convalescent treatment was arranged for a number of Ex-Service men through the United Services Fund, and for many children through the Invalid Children's Aid Association, the Public Assistance Committee, the School authorities, St. Henry Fund and other agencies. The Charity Organisation Society and the Friends of the Poor were very helpful with several cases.

The association with Westminster Hospital has continued and many cases were referred there during the year for surgical opinions, for orthopædic treatment, or for such treatment as the removal of tonsils and adenoids.

School children requiring dental treatment were referred to the school dentist. Sixteen patients were referred to the council's dental clinic, and 75 extractions and 2 fillings were performed. Dentures are provided if necessary. Eight patients received artificial pneumothorax treatment at the expense of the council and had, in all, 76 refills. One case of lupus received special light treatment at a cost of £16 11s.

The work of the Tuberculosis Care Committee continued on the lines indicated in previous reports. The Committee considers the economic

position of each patient admitted to or discharged from an institution and makes suitable recommendations with regard to financial or other aid required by the patient or his dependents. An assessment is made with regard to the patient's ability to contribute towards the cost of his treatment. Arrangements are made to obtain help from voluntary sources or by a grant from the Council when dentures are required and the patient is unable to make full payment. Recommendations for the grant of extra nourishment to tubercular patients are made, when this is considered necessary as part of their medical treatment. Extra nourishment was granted to 21 patients for varying periods at a total cost of £36 12s. 3d.

The work of the handicraft class run for dispensary patients by a voluntary committee was continued with excellent results. The Council again allotted a portion of the income of Barlow's Gift to the class. The remainder of the necessary income is made up from the proceeds of the sale of work, and by a number of generous donations. Miss Willatts and Miss McFarlane continued their excellent work as teacher and secretary respectively.

TUBERCULOSIS SCHEME OF THE WESTMINSTER CITY COUNCIL.

(A) RETURN SHOWING THE WORK OF THE DISPENSARY DURING THE YEAR 1933.

		PULMO	NARY.		1	Non-Pui	MONAR	у.		To	TAL.		
Diagnosts.	Ad	ults.	Child	ren.	Ad	ults.	Chile	dren.	Ad	ults.	Chil	dren.	GRAND TOTAL.
	М.	F.	м.	F.	М.	F.	М.	F.	М.	F.	М.	F.	
A.—New Cases examined during the year (excluding contacts):— (a) Definitely tuberculous *(b) Diagnosis not completed (c) Non-tuberculous	112	68	3 _	6 _	8 	13	12	13	120 1 20	81 1 45	15 18	19 13	235 2 96
BContacts examined during the year:— (a) Definitely tuberculous *(b) Diagnosis not completed (c) Non-tuberculous	=	1 -	4 -	1 _		=	2 	<u>-</u>	- 9	$\frac{1}{29}$	$\frac{6}{41}$	2 38	9
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)	-	1 -	-			-	2	-	43	1 102	2 75	65	285
D.—Number of Cases on Dispensary Register on December 31st:— (a) Definitely tuberculous (b) Diagnosis not completed	234	199	26	24	33	40	52	49	267 1	239	78	73	657 2

^{*} i.e., remaining undiagnosed on 31st December.

TUBERCULOSIS SCHEME OF THE WESTMINSTER CITY COUNCIL-continued.

(A) RETURN SHOWING THE WORK OF THE DISPENSARY DURING THE YEAR 1933—continued.

1. Number of cases on Dispensary Register on January 1st 2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years 3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" 4. Cases written off during the year as Dead (all causes) 5. Number of attendances at the Dispensary (including Contacts)	12 125 59	8. Number of visits by Tuberculosis Officers to homes (including personal consultations)
6. Number of Insured Persons under Domiciliary Treatment on the 31st December 7. Number of consultations with medical practitioners—	100	11. Number of "Recovered" cases restored to Dispensary Register, and included in A (a) and A (b) above Nil 12. Number of "T.B. plus" cases on Dispensary Register on December 31st

(B) Number of Dispensaries for the Treatment of Tuberculosis (excluding centres used only for special forms of treatment).

Provided by the Council One

Provided by Voluntary Bodies -

15

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

It is suggested in Circular 1345 of the Ministry of Health that where detailed information regarding the Health Services of the Area was given in the report for 1930, it will be sufficient for the purposes of this report to indicate any alteration or development which has taken place during 1933. Accordingly, as these services have been somewhat fully dealt with in recent years, the report for 1930 being a full or survey report, they are again on this occasion discussed briefly.

Nursing in the Home.—The nursing of general illness in the home is undertaken by the three District Nursing Associations which operate in the City. The service is free for those without means; from others, contributions are invited according to circumstances. The City Council, as Maternity and Child Welfare Authority, pays these associations for nursing services in connection with puerperal fever and pyrexia and other illnesses arising before, during, or after confinement; also for ailments in children up to 5 years of age, including measles and whooping cough. The nursing of primary pneumonia and influenzal pneumonia is also provided for by the Council through the agency of the associations. These services are most efficiently and satisfactorily carried out. Under the existing arrangements, 1s. 6d. is paid to the association for each nursing visit; 2,434 visits were paid in 1933 at a cost of £182 11s. 0d.

Midwives.—Thirty were practising in the area in 1933. This number includes the qualified midwives of the outdoor departments of Westminster and Middlesex Hospitals, the staff of the Ormond Home, Chelsea, and other institutions. Confinements at home attended by midwives numbered 580.

Midwifery Services.—A complete midwifery service, indoor and outdoor, is provided by Westminster Hospital under agreement with the City Council for women attending the welfare centres. This scheme includes ante-natal clinics, both in-patient and out-patient services, and the assistance of consultants and bacteriologists. In connection with the practice of midwives apart from this hospital scheme certain difficulties have arisen to which full reference is made in the succeeding paragraphs.

Medical Assistance to Practising Midwives.—In October, Sir Frederick Menzies, County Medical Officer drew attention to difficulties experienced by midwives in obtaining the assistance of medical practitioners in difficult or abnormal cases. The London County Council as the authority for administering the Midwives Acts, supervises the practice of midwives,

but has no power to provide medical or nursing midwifery services for the district. Cases where midwives had spent many hours in endeavouring to obtain the assistance of medical practitioners, thereby causing considerable distress and perhaps undue suffering to women in confinement, seemed to call for some action by the City Council, the authority empowered to provide midwifery and medical services under the Maternity and Child Welfare Acts.

While the Rules of the Midwives Board provide for the calling of medical practitioners to assist midwives, payment for such services being made by the London County Council, it has been happening with increasing frequency that the practitioners in the neighbourhood are not available to render assistance. The demands of private or panel practice or disinclination to practise midwifery may account for the difficulties experienced by the midwives. The Medical Officer of Health was accordingly directed to communicate with the British Medical Association for any suggestions which that body might offer for the solution of the problem. Failing any result from these consultations it seemed appropriate to approach the authorities of Westminster Hospital, who already provide both indoor and outdoor midwifery services for cases from the Maternity and Child Welfare Centres.

A further matter could be discussed with the Hospital—namely the provision of expert medical assistance in medical practitioners' cases. There are no doubt cases of difficulty in a doctor's midwifery practice where a consultant's opinion and help might be of the utmost value but where there are no means to pay for a consultant. The doctor attending must either endeavour to obtain the patient's admission to Hospital or decide to await developments. There is sometimes delay in sending patients to Hospital and the risk of serious consequences may be greatly increased. The provision of expert assistance for necessitous women in confinements in their own homes, whether the case be under the care of a midwife or medical practitioner, would appear to be an important contribution to the efforts to reduce maternal mortality. It is hoped that the scheme which is now being negotiated with Westminster Hospital will ensure that in Westminster no woman in childbed need suffer for the lack of skilled medical assistance.

Laboratory Facilities.—Arrangements with Westminster Hospital for the bacteriological examination of material from suspected cases of tuberculosis, diphtheria, etc., continue. From 1st April, 1933, a special arrangement has been made for the examination of milk for tubercle bacilli while as occasion arises other special examinations of water, milk

or other food are made. It is further proposed to examine samples of graded milk for the presence of the organism of undulant fever. The Clinical Research Association carry out the bacteriological examinations of graded milk under the Special Designations Order. The chemical analysis of food and drugs is performed by the Council's two public analysts, one of whom also undertakes the investigation of atmospheric pollution. On several occasions it was found that delay was caused in the examination of swabs during the week-end. By special arrangement with the Hospital all swabs submitted on Sunday are examined and the result reported immediately to the practitioner concerned.

Legislation in Force.—No additions have been made to existing local legislation during the year.

Hospitals.—This subject has been fully discussed in recent reports, details of the various hospitals in the City and the purposes for which beds were allocated being furnished. As regards municipal hospitals, these are under the control of the London County Council. One such hospital is situated in the City, the Sheffield Street Hospital for pregnant women suffering from venereal disease (52 beds). St. Stephen's Hospital (750 beds), formerly reserved for Westminster inhabitants, now receives patients from a much wider area. As regards tuberculosis and infectious diseases generally, Westminster patients, like those from other metropolitan districts, are treated in one or other of the many hospitals of the London County Council, some of which are in the County, while others are in the neighbouring counties.

As regards the voluntary hospitals, the two outstanding events of the year were the opening of the further extension of the Infants' Hospital, Vincent Square—a new Out-patients' department and 50 additional cots (10 of which are private) with new administrative quarters; the other, acquisition of land for the new Westminster Hospital with a proposed provision for 400 beds.

Maternity and Nursing Homes.—There are no such homes under the control of the City Council.

There are no changes to report in the institutional provision for unmarried mothers, illegitimate infants and homeless children.

Ambulance Facilities.—The various services were fully detailed in the report for 1930 and, so far as is known, no changes or extensions have been effected. Clinics and Treatment Centres.—There have been no additions to the number of centres. These institutions are situated as follows:—

 Tuberculosis Dispensary and Maternity and Child Welfare Centre, Ebury Bridge, Buckingham Palace Road, S.W.1.

2. Maternity and Child Welfare Centre, Marshall Street, Golden

Square, W.1.

- 3. Maternity and Child Welfare Centre, 15, Bessborough Street, S.W.
- 4. Westminster Health Society, 121, Marsham Street, S.W.1.

Maternal Mortality.—Arrangements for the investigation of maternal deaths and cases of puerperal fever and puerperal pyrexia were set up by the City Council in 1927 and remain in force. These provisions were fully reported upon in the reports for 1929 and 1930. Neither the obstetric consultant nor the pathologist was called upon to act during the year. The reason for this is that women suffering from puerperal conditions do not remain at home for treatment, but are immediately admitted to hospital on notification. There were five maternal deaths. A summary of results of inquiry are given below:—

M. F. (29).—Married. Died in Hospital. Hæmorrhage from ectopic pregnancy.

D. B. (32). Died in Hospital pyæmia following abortion.

E. L. H. (42).—Married. Confined in Hospital of a stillborn child. Died at home. Embolus from pelvic veins after childbirth. P.M.

E. I. (22).—Single. 24 weeks pregnant. Died in Hospital. Eclampsia. If delivered would probably have resulted in an anæsthetic death.

M. D. (31).—Married. Died in Hospital from puerperal sepsis.

Maternity Beds.—The agreement with the Westminster Hospital for the provision of maternity beds continues to work very satisfactorily. As mentioned on a previous occasion the scheme has provided a long-felt want and is a notable contribution to the solution of the problem of maternal mortality. The cases admitted are those recommended from the Council's three Maternity and Child Welfare Centres and that of the Westminster Health Society. The grounds on which hospital accommodation is sought are those laid down in Circular M. & C.W. 4, detailed in a previous report. The total number of women admitted and confined in the hospital was 54. Of these, 23 were from the centre at Ebury Bridge, 15 from Bessborough Street, 6 from Marshall Street, and 10 from Marsham Street (Westminster Health Society). In the proposed

new Westminster Hospital there will be 30 maternity beds. The accommodation at present, 12 beds, has proved definitely inadequate.

Health Visiting.—The importance of visiting children between the ages of one and five years was emphasised by the Minister of Health in circular 1054, issued in 1929. The figures given below in Table I show the increasing attention which is being paid to this age group of children. The records of these children relating both to home conditions and their health history are now passed on to the education authority when the children enter school.

The following table shows the number of visits paid in connection with the four centres:—

TABLE I.

_	Ebury Bridge.	Bess- borough Street.	Marshall Street.	Marsham Street.	Total.
Pre-natal—	901	009	150	177	811
First visits	261	223		497	1,681
Other visits	558	404	222	497	1,001
Children under 1 year of age—		1		200	
First visits	306	336	276	233	1,151
Other visits	1,631	1,520	1,095	983	5,229
Children over 1 and under 5 years—					
Visita	2,541	2,810	2,433	1,873	9,657
Death enquiries, still-births,					
for a	- 43	31	19	16	109
Infectious diseases	200	106	40	79	425

Infant Life Protection.—The City Council under the Transfer of Powers (London) Order, 1933, took over on the 1st April, 1933, from the London County Council, the administration of Part I of the Children and Young Persons Act, 1932, and at the same time appointed all the Health Visitors for the time being in the service of the Council to be Infant Life Protection Visitors under the Act.

The number of registered foster-parents transferred to Westminster for supervision was 11. Since the 1st April, 1933, sixteen applications have been received and accepted for registration. Only in one instance has a foster mother the care of more than one child; approved because of the special qualifications of the foster mother and the highly satisfactory conditions in her home. She has at present two foster children.

Two of the registered foster parents removed from Westminster during the year, one to Kensington and the other to Edmonton. The registrations were accordingly transferred, The register now contains the names of 25 foster mothers.

During the year visits to foster children were carried out as follows :-

TABLE II.

				200		District.	
					South- West.	Southern.	Northern.
isit by Infant Life Protection	\\isi	tors to	:			10000	
isit ov illiant Life Fronceilo							The second secon
Foster Children under 5-				1000	3	66	24
Foster Children under 5- First visits		****			37	66	24 15
Foster Children under 5-							24 15 3 2

Barlow's Gift.—The Morne from this trust, amounting to £33, was by resolution of the Barlow's Gift Committee divided between Maternity and Child Welfare, the Tuberculosis Handicrafts Committee and the Westminster Nursing Committee. The money has been most usefully expended in providing such necessaries as cannot be bought by money raised from the rates, committee and materials for handicrafts. The Wombers are duly presented for the purposes of audit.

Ante-natal Work .- The supervision of expectant mothers is recognised to be of increasing importance, and for this purpose it is extremely desirable that they should avail themselves of the expert advice obtainable the hospitals. The following table shows the at the centres and at number of cases which were dealt with through the various centres and how they became know to the health visitors. The co-operation of fare centres continues, and there is interchange the hospitals with the on between those bodies which should result in of much useful informati greatly improved conditions for confinements. The number of births was 1,099 and the number of expectant mothers dealt with by the centres, This proportion, amounting to over 73 per cent., is a satisfactory indication of the manner in which the Council's Maternity and Child Welfare service is meeting the needs of the community.

TABLE III .-- Ante-natal Cases.

	City	Council's (Centres.	Westminster Health Society.	
Name of Hospital.	Ebury Bridge.	No. 15, Bessborough Street.	Marshall Street.	Marsham Street.	Totals.
General Lying-in St. George's Westminster St. Thomas's Charing Cross Middlesex Elizabeth Garrett Anderson St. Stephen's Queen Charlotte's Princess Beatrice Royal Free King's College Found by Health Visitors By Private Doctors and Mid	5 35 23 2 11 	10 20 37 6 6 6 - 34 - 1 1 1 1 68	3 2 3 1 17 20 1 18 - - - 28	16 7 25 1 2 — 20 — 1 — 69	34 64 88 10 36 20 2 106 — 5 1 1 2 233
wives Reported to Centre voluntarily	79	59	16	49	203
Totals	261	244	110	199	805

Ante-natal Visiting.—To the 805 expectant mothers who became known to the centres, primary visits were paid by health visitors. Subsequent visits were also paid to these cases to the number of 1,681.

The attendances by those mothers at the clinics are detailed below:—

TABLE IV.—Ante-natal Clinics.

Centre.	Sessions.	First Attendance.	Subsequent Attendances.	Total.	No. of Individuals,
Ebury Bridge Bessborough Street WestminsterHealth Society.	51 47 51	112 115 89	162 176 379	274 291 468	168 165 89

Ante-natal clinics are also held at Charing Cross, St. George's, West-minster and Middlesex Hospitals for mothers who have made arrangements for their confinements with these hospitals.

Mothercraft.—Classes in mothercraft are held at the various centres, and health talks have been given each week throughout the year in connection with those classes.

TABLE V.-Mothercraft Classes.

1933.	Ebury Bridge.	Bessboro' Street.	Marshall Street.	Marsham Street.	Total.
Number of classes	48	50	45	88	231
Total attendances	1,442	956	389	2,574	5,352
Average attendances	30	19-1	8.4	29.2	23 - 1
Number of expectant mothers	66	103	34	93	296
Number of attendances by expectant mothers	260	363	125	374	1,122
Number of other mothers	184	125	49	68	426
Number of attendances by other mothers	1,182	593	255	2,198	4,228
Attendances of children in nurseries during classes	1,053	857	310	3,312	5,532

Materials are purchased in quantity, and sold to the mothers at cost price. The number of garments made at Ebury Bridge was 981; at Bessborough Street, 780; at Marshall Street, 270; and at Marsham Street, 1,310. In addition to those, many renovations were carried out.

Midwifery Services.—The work performed by the midwives provided by the Westminster Hospital under the City Council's scheme which came into operation on the 1st January, 1931, is summarised below, and comparative figures since 1929 are given. The area in which the midwives' services are performed is the City of Westminster, excluding for the time being those parts of the Parishes of St. Margaret and St. John in which midwifery services are already provided by the City of Westminster Health Society.

TABLE VI.

		1929.	1930,	1931.	1932.	1933.
Number of cases attended—	19th	- Busie	1			
As midwife		 72	62	62	88	77
As emergency		 	_	-	-	_
With hospital students		 -	-	-	_	
With private doctor		 -	-	-	-	-
Total		 72	62	62	88	77
Number of—	•					
Pre-natal visits		 579	576	240	209	93
Lying-in visits		 1,003	909	794	1,141	1,016
Subsequent visits Visits to infants under 1		 437	420	62	-	32
year, other than lying-in visits		 361	292	_	_	-
Total number of visits		2,380	2,197	1,096	1,350	1,141

TABLE VII.

Attendances by midwife at ante-natal and other clinics:—

	1929	1930	1931	1932	1933
	43	36	51.	52	50 - 49
15, Bessborough Street	97	93	49	52	49
Total	140	129	100	104 .	99

The Westminster Health Society provide midwifery services in St. Margaret and St. John Wards, the western boundary being Vauxhall Bridge Road. The following table gives figures relating to the work performed in this area during the year:—

TABLE VIII.

3.7 3						
Nimi	her of	cases	att	one	or	
TA HESSEL	Der Or	Cases	27.17.1	испи	resu	_

		St. Margaret and St. John Wards.
As midwife		 43
With hospital stud	lents	 6
With private doct	ors	 3
		52
Midwifery visits		 917
Nursing visits		 41
		958

There is an increasing tendency for women from other districts to come into Westminster institutions for their confinements. The hospital beds available are as follows:—Charing Cross, 15; St. George's, 11; Westminster, 12; *St. Stephen's, 28. 962 women from other districts were confined in Westminster and 410 women belonging to the City were delivered in the hospitals mentioned.

The number of children born to Westminster parents in institutions outside the City numbered 466.

^{*}This is an L.C.C. hospital situated in Chelsea. Prior to the abolition of the Guardians only Westminster cases were admitted, but now cases from other districts are received.

The following table shows the number of confinements in the hospitals mentioned:—

TABLE IX.

Charing Cross Hospital: 395, of which 50 were Westminster cases.

St. George's Hospital: 279, of which 38 were Westminster cases.

Westminster Hospital: 328, of which 131 were Westminster cases.

Sheffield St. Hospital: 163, place of residence unknown.

St. Stephen's Hospital: 191, all were Westminster cases.

Infant Clinics.—These are held at the following centres at the times mentioned:—

Council's Centres-

Ebury Bridge-2 p.m. Wednesday. 2 p.m. Friday.

15, Bessborough Street—2 p.m. Thursday and 2 p.m. Tuesday (combined with ante-natal clinic).

Marshall Street—2 p.m. Wednesday.

Westminster Health Society-

Marsham Street—2 p.m. Tuesday. 2 p.m. Friday. Toddlers' Clinic—3rd Tuesday each month at 10 a.m.

Clinics are also held at the Infants Hospital, Vincent Square and Charing Cross Hospital.

It will be noted from the following table of attendances that the work at the centres continues satisfactorily, as shown by the average attendance per session. The comparative totals since 1928 are also shown on page 56.

Table X.

Attendances at Infant Consultations, 1933.

			First At	First Attendances.		Attendances.	Total.		
Centre		of Session	under 1 year.	Over 1 year.	Under l year.	Over 1 year.	Under 1 year.	Over 1 year.	Total.
Chury Bridge 5, Bessborough Street Iarshall Street Iarsham Street		102 101 52 99	223 241 90 205	119 49 20 57	3,190 3,075 1,468 1,833	1.593 2.141 920 1,628	3,413 3,316 1,558 2,038	1,712 2,190 940 1,685	5,125 5,506 2,498 3,723
1933 1932 1931 1930 1929		354 364 363 357 353 350	759 803 756 782 789 717	245 276 265 231 202 210	9,566 9,353 8,597 8,911 7,664 7,410	6 282 6,653 5,917 6,020 5,496 5,213	10,325 10,156 9,353 9,693 8,453 8,127	6,527 6,929 6,182 6,251 5,698 5,423	16,852 17,085 15,535 15,944 14,151 13,550
The average attended	Ebury Br Bessborou Marshall S	idge gh Street		1933. 1932. 1933. 1932. 1932. 47·1 194. 43·9 195. 43·9 195. 43·9 195. 43·9 195. 43·9 195. 43·9 195. 43·9	37·7 43 56·3 49 43·4 40	30. 1929. 3·5 36·5 9·5 48·8 9·9 33·1 3·1 38·1	1928. 39-9 44-9 27-1 36-9		
The number of indiv		n medically insp		1 Ma	rshall Street		260		

Infant clinics in connection with the maternity departments of Westminster, St. George's, Middlesex, and the General Lying-in Hospitals are held weekly in those institutions, but they do not come within the maternity and child welfare scheme of the Council. Since the Discontinued Grants (Apportionment) (London) Order, 1930, made by the Minister of Health, the infant welfare clinics at Charing Cross and the Infants' Hospital, Vincent Square, receive annual grants from the City Council, and are accordingly included in the maternity and child Welfare services of the Council.

Nursing.—Under the Maternity and Child Welfare Scheme of the Council arrangements are in force with the three District Nursing Associations, the Pimlico, Belgravia and Chelsea; the Westminster; and the Metropolitan Associations, for the nursing of children under five years of age suffering from various ailments, and for certain conditions in adults. A flat rate of 1s. 6d. is paid for each visit made by the Association concerned. The following table shows the nature of certain conditions for which nursing visits were paid:—

		,	TABLE	XI.		
					Patients.	Visits.
Ophthalmia neona	toru	m and	conjun	ctivitis	 6	140
Puerperal pyrexis					 32	350
Influenza					 3	37
Pneumonia					 13	238
Bronchitis					 2	16
Measles					 5	45
Whooping cough					 1	15
Other complaints					 142	1,583
T	otal				 204	2,424

Ophthalmia neonatorum has been notifiable since 1911. The percentage of mild (non-purulent) and notified (purulent) cases in relation to births from the year 1924 is as follows:—

		TAE	BLE XII.	
			Cases.	Rate per 100 births for both classes of cases.
1924			23	2.4
1924	 ***	 	21	2.0
1926	 	 ١	16 .	1.6
1927	 	 	14	1.9
1928	 	 	7	1.2
1929	 	 	11	1-9
1930	 	 	16	2.2
1931	 	 	20	1.6
1932	 	 	27	2.3
1933	 	 	12	1.1

With regard to the incidence of venereal disease the following table shows the death-rates of infants per 1,000 births, certified to have died from syphilis:—

1901-	=				per .				
		***		2.8	1328				0.72
1906-	10			3.2	1929				
1911-	15			0.4		•••	***	***	0.73
				2.4	1930		***		2.1
1916-		***	***	4.95	1931				1.6
1921-	25			1.7	1932				
1926						***	***	***	1.7
	***	***	***	0.62	1933				3.6
1927				2.8					0.0

Ophthalmia neonatorum.—Seven cases were notified during the year, 3 of those being treated in hospital. There were also 5 instances of watery discharge from the eyes which were brought to the notice of the health visitors. All cases of ophthalmia neonatorum are visited as soon as possible after notification in order to see that adequate treatment is being provided. Treatment by the district nurses was carried out in 6 cases, 140 visits being paid.

It is satisfactory to note that the incidence of ophthalmia neonatorum has decreased, and investigations show that the infections are much milder in character. At the end of the year, it is reported that no case of impaired vision had resulted among the cases notified throughout the year.

Dental Treatment.—The Council provides for the treatment of cases both under the Maternity and Child Welfare and Tuberculosis Schemes. Figures relating to the latter will be found in the Tuberculosis Section of the Report. Expectant and nursing mothers, and children under five years of age, are eligible for treatment.

Mr. Stewart Tait, Dental Surgeon, submits the following report:-

Dental Clinic-1933.

I beg to forward my report on the work carried out at the Dental Clinic for the past year.

The figures as compared with last year show a drop, but on the other hand fewer sessions have been held and if this is borne in mind I think that the figures compare favourably with those of last year. Another point is that many of the cases fail to keep their appointments after they have been examined. This is most noticeable amongst cases for extractions, and also many, after the extractions have been completed, fail to attend for fillings and general prophylactic treatment.

I would like to suggest that some system might be put into operation whereby all patients sent to the Dental Clinic from the Welfare Centres should be kept in touch with, by the latter, until all the dental treatment necessary is completed.

There has been a marked increase in the numbers of children under school age that have been brought to the Clinic, and the interest shown by the parents in the care of their children's teeth is most gratifying.

I regret that it has not been possible to come to an arrangement over the installation of an electric engine at the Clinic, which apart from enabling the work to be done more speedily, ensures less pain to the patients, and gives them more confidence in agreeing to preventive treatment.

New Cases			 	 209
Subsequent attendan				
Teeth extracted			 	 957
Teeth filled				
Other dental operation				
Anæsthetics administ	ered :-	_		
local	:.		 	 5
general				218
Dentures supplied				
Number of sessions			 	 95

T. Stewart Tait, L.D.S., Dental Surgeon.

TABLE XIII.

Comparative statement of work of Dental Clinic (M. & C.W. section) since 1927:—

			1927.	1928.	1929.	1930.	1931.	1932.	1933.
Number of Sessions			90	88	89	78	95	99	95
New patients			204	172	153	257	257	241	205
Subsequent attendan	ces		802	807	793	1,129	1,414	1,286	1.059
Teeth extractions			1,198	930	1,172	1.305	1,107	1,089	957
Teeth filled			248	208	148	201	222	207	183
Other dental operation	ons		777	638	663	1,225	1.174	720	522
Anæsthetics adminis	tered-	-							
Local		****	17	28	33	23	25	12	5
General			263	182	194	253	255	242	218
Dentures supplied			6	14	18	22	15	13	12

Patients contributed £11 19s. 6d. in small sums according to their means.

Convalescence.—The Council has again provided in the estimates for assistance in obtaining convalescent treatment. 12 Westminster patients at the Infants' Hospital, Vincent Square, were sent to a convalescent home for periods varying from 2 weeks to 3 months. After

inquiry a grant was made in each case to make up the deficiency after the parents had contributed. Seven necessitous mothers who had been suffering from very poor health after their confinement were sent, with their babies, to various convalescent homes to recuperate for a period of two to three weeks. The total amount expended in the year amounted to £56 14s. 3d.

Day Nursery at 147, Warwick Street.—This is the only institution of its kind in the City, and is situated near Ebury Bridge. With its extremely limited accommodation (for 40 children) it cannot even hope to fulfil the needs of its immediate neighbourhood. Having this in mind the Committee, of which the Hon. Mrs. Vickers is the Chairman, Lady Gluckstein, Chairman of the House Sub-Committee, and Mrs. J. F. C. Bennett, Hon. Secretary, are making strenuous efforts to accumulate sufficient funds for the purpose of acquiring new and larger premises.

The administration of the nursery is excellently conducted, and its finances are well managed and in a sound condition. With the continued help of generous supporters it should be possible to accomplish the work of extension within the next few years.

Total attendances at the nursery were 11,504, and the individual children attending throughout the year numbered 80. Dr. Kathleen S. Campbell, the Hon. Medical Officer, reports very favourably on the health of the children and remarks on the absence of infectious disease. The nursery is open on five and a half days in the week, the charge to parents being 5s. for each child per week with reductions appropriate to exceptional circumstances.

Homes for Unmarried Mothers, etc.—The Council made a grant of £100 to the Home of St. John the Baptist at Tulse Hill. This home was formerly in the City, and cases from Westminster are eligible for admission. During 1933 three Westminster women received care and shelter over an average period of eight months. The two other homes in the City which exist for a similar purpose were mentioned in previous reports.

Supply of Milk.—Fresh or dried milk is supplied to certain cases recommended by the medical officer of the maternity and child welfare centre. Before the grants are made a standard of income laid down by the Ministry must be proved. In some instances the weekly income does not justify an award of free milk, but those cases may come within the scale for milk at half price. The applications are considered by a meeting of the ladies of the Maternity and Child Welfare Sub-Committee,

which takes place once a month at each centre. Grants are made for a period of one month and are reconsidered for continuation at each meeting. Preparations of dried milk are sold at cost price in connection with the centres, 4,284 pounds being disposed of during the year. The amount expended by the Council for fresh milk as extra nourishment for mothers and infants amounted to £416 16s. 6d. Cases in receipt of Public Assistance are not eligible for the council's extra nourishment scheme, but a scheme of co-operation with the Public Assistance Committee is being worked out whereby mothers and infants in receipt of public assistance may be referred to the centres for special recommendations for extra nourishment on medical grounds. This extra nourishment will be additional to any relief in kind and would then be provided by the Public Assistance Committee.

Insulin Treatment.—One patient is still under treatment and the cost to the Council for the year was £13.

Disinfection.—Disinfection of rooms from which patients suffering from notifiable infectious disease have been removed is carried out by means of the formaldehyde spray. For other non-notifiable infectious conditions disinfection is carried out on request, and a charge is made according to the circumstances of the case.

Bedding and wearing apparel are removed to the Disinfecting Station, and are there submitted to steam disinfection. Books are treated with formalin.

The cleansing of persons and disinfection of clothing, etc., in a verminous state are carried out by the Disinfecting Staff. Visits were paid to 113 houses, and 6,786 articles of clothing, bedding, etc., were removed for disinfection. Individuals, numbering 290 men, 31 women, and 2 children (under school age), were given medicated baths at the Disinfecting Station, making 372 attendances.

Notices from the London County Council in regard to school children affected with vermin numbered 49. The Disinfecting Foreman and the Sanitary Inspectors paid 275 visits of investigation to their homes. By agreement with the London County Council, arrangements are in force for the treatment at the Westminster Disinfecting Station of school children from the boroughs of Battersea, Chelsea, Holborn, Kensington, Lambeth, St. Pancras, St. Marylebone, Fulham, and Stoke Newington.

Among Westminster school children 388 cases of head lice, 4 cases of body lice, and 28 of scabies were treated. In all these cases, the clothing was disinfected, together with the bedding from their homes, amounting

in all to 865 articles. Children from the above-mentioned boroughs treated for similar conditions were as follows: 126 for head lice, and 14 for scabies. The number of attendances of these children for baths at the station was 987.

The following table shows the total number of individuals treated at the station for verminous conditions:

TABLE XIV.

1933.	Head lice.	Body lice.	Scabies.	Total.
Children (including those under school age).	514	4	44	562
Adults	_	278	43	321
	514	282	87	883

TABLE XV.

General disinfection of premises, articles, etc. :-

			1929.	1930.	1931.	1932.	1933.
Rooms		****	946	992	613	781	747
Articles disinfected	****	****	20,291	23,853	22,004	22,314	21,598
Articles washed			4,994	5,304	3,576	3,690	3,500
Articles destroyed	****	****	337	190	424	1,020	2,218
Books disinfected *	****	****	96	179	62	276	723
Vehicles	****	****	18	8	7	5	4
Offices and business pre	mises	****	8	39	15	11	6

* Library books, 46; private books, 67. School books, 610.

Motor Disinfecting Van.—The motor van during 1932 completed 4,302 miles, carrying 3,249 cwts. of goods. The petrol consumed was 412 gallons, equal to 10.4 miles per gallon.

CORONER'S COURT AND MORTUARY.

The Sub-Committee, with the Deputy Mayor, Captain J. F. C. Bennett as Chairman, and Councillor H. S. E. Vanderpant, Vice-Chairman, set up in November of 1932, proceeded at once to review the existing establishment and its organisation and submitted a series of reports with recommendations to the parent committee throughout the year. The sub-committee held nine meetings, some of which took place at Horseferry Road. The parent committee approved all the recommendations of its sub-committee and as a result structural alterations costing £483 in 1933 were effected.

In the interests of economy it was considered advisable to spread the expenditure of alterations, etc., over two or three years and the programme of work, which will include a good deal of maintenance and repairs, e.g., outside painting and partly reflooring the Court, will not be completed until 1935.

The committee may be congratulated on creating a transformation of this important public health service. In the past the condition and management of public mortuary services in most districts have not received a great deal of attention. The subject is not an attractive one and receives no publicity unless there be some feature to criticise. But the public are becoming more sensitive in the matter of the disposal of the dead. This may partly be due to influences connected with the care bestowed by the Imperial War Graves Commission on the resting places of those who fell in the war or from the large number (20 to 30 per day) of normally healthy people who meet their death on the road and whose loss brings sudden grief to so many families. The bodies of all who suffer accidental death must be taken to public mortuaries for the purposes of identification and inquest. There is thus unfortunately a growing acquaintance with public mortuaries by many who never dreamed they would visit such places.

The lady members of the committee had for some years expressed dissatisfaction with the arrangements at Horseferry Road, and certain of their number, in particular, the late Mrs. Lionel Harris, had presented articles such as brass ornaments to beautify a setting hitherto ineffably dreary. On considering the situation the committee was greatly assisted by hearing the views of the Coroner, Dr. Ingleby Oddie, Sir Bernard Spilsbury and other pathologists who attend frequently at the premises. Attention was directed to certain requirements and they may be briefly enumerated. The need for (1) exclusive accommodation for a jury and for Coroner's officer; (2) waiting rooms for witnesses and police; (3) a room where pathologists, counsel and other professional witnesses could consult in private; (4) a laboratory for carrying out special tests, microscopy, etc.; (5) adequate accommodation for making post-mortem examinations; (6) modern methods for depositing and retaining bodies pending inquest or burial—a need acutely felt in summer; (7) proper arrangements whereby relatives or others may view the dead for identification; (8) an appropriate resting place of the nature of a chapelle ardente for the dead while awaiting burial.

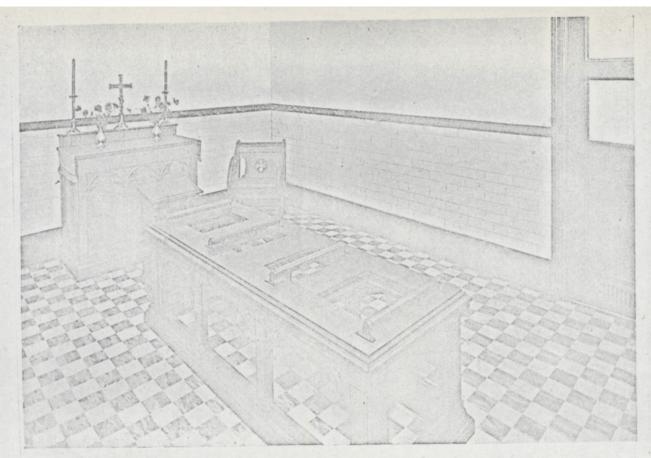
These needs were met by converting the resident quarters of the mortuary keeper on the ground floor into five rooms, two for witnesses, one as room for Coroner's officer, one for police and another for professional witnesses. A private entrance for the Coroner was provided with direct access to his room. A laboratory for pathologists was fitted up with sinks, benches and other equipment of a modern laboratory.

An additional large room adjoining the post-mortem room was fitted up likewise for post-mortem purposes, mechanical ventilation being installed. Modern cold chambers of the Kelvinator make were installed to hold 9 bodies, and these have subsequently been increased to 15. There is nothing now to offend the sensibilities of the most sensitive person who may visit these premises, and the viewing arrangements are so devised that one who views a body need see no other. Finally a beautiful chapel has been designed and provided with catafalque and other furniture appropriate to its objects. An oak wall plaque presented by Councillor Vanderpant indicates that the modernization and reequipment of the whole premises took place during the mayoralty of the Rev. E. St. George Schomberg. The Council has expressed warm appreciation and thanks to Mr. Vanderpant for his invaluable assistance and advice in replanning the whole premises and bringing it up to date and in particular for the ideas which resulted in a chapel of so beautiful a design.

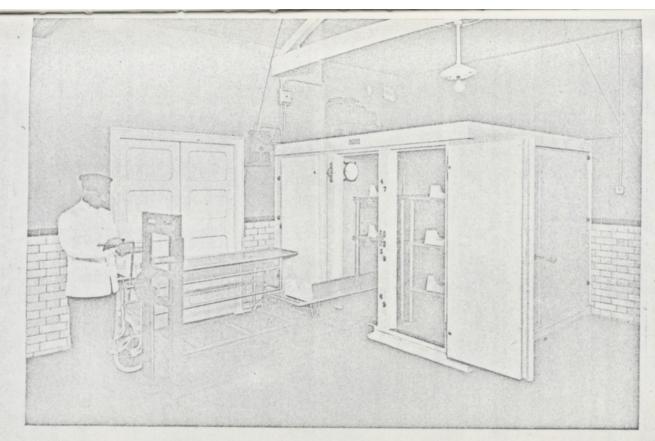
In reviewing the duties of the staff the committee considered it most important that in this type of work there should be reasonable off-duty time. The arrangements whereby there was a mortuary keeper and one assistant entailed abnormally long periods of duty. Accordingly the post of superintendent of the coroner's court was established as a staff appointment and applications were invited from senior non-commissioned officers in the medical branches of the Services. A late chief petty officer of the Royal Navy was appointed in July, 1933. For the present he resides in a flat over the court rooms, while his first assistant lives in a flat in the neighbouring block of the council's new dwellings and the second also in rooms provided by the council. The mortuary services must necessarily be available at any hour of the night or day throughout the year. Although the resident population of the City has greatly decreased, yet there is no corresponding decrease in the number of accidental or unnatural deaths which take place within the City boundaries. The staff now increased to three ensures that there will always be at least one person on duty while allowing adequate leave for the others. The committee also considered it desirable that the last offices in the case of females should be performed by a woman, preferably a trained nurse, and this proposal has been carried out. A trained nurse attends for this purpose.

A descriptive article by B. S. Townroe, Esq., B.A., etc., dealing with the Court and Mortuary as now constituted appeared in the *Municipal Journal* for 5th January, 1934, and by kind permission two photographs taken for that article are here reproduced.





View of newly designed Resting Place for the Dead.



This large room contains two cold chamber installations for the reception of 15 bedies. The larger shown here has capacity for 9 and is so arranged that while in 6 cells the temperature is 36° F. in the remaining three it may be brought down to 32° F. or lower. The apparatus for moving bodies single-handed is also shown.

Among the administrative changes which have taken place under the new arrangements may be mentioned the attendance of the super-intendent at each meeting of the Public Health Committee. He submits his report for the period following the previous committee, and the figures immediately below apply to the months of 1933 following his appointment:—

Drowning	6	Sudden death	15
Street accidents	30	Natural causes	48
Other	20	Misadventure	14
Suicide	35	Other causes	14

In view of the reorganization it was considered necessary to redraft the Mortuary Regulations. These, having been approved by the Committee in December, will be placed before the Council in 1934.

The number of bodies removed to the Council's mortuary under order of the Coroner, or to await burial, was 324.

Inquests were held at the Coroner's Court, Horseferry Road, in 310 cases, and there were 15 adjourned inquests. Post-mortem examinations were made in 185 instances. Fourteen bodies were received in the mortuary chapel to await burial.

The number of bodies taken to the mortuary for purposes of inquest, and to await burial, during the last 30 years is set out as follows:—

TABLE XVI

Yea	r	Total.	For Inquest.	To await Burial.	Year		Total.	For Inquest.	To awai Burial.
1904		381	322	59	1919		308	269	39
1905		368	307	61	1920		289	269	20
1906		314	283	61	1921		273	238	35
1907		358	281	77	1922	****	269	247	22
1908	-	364	298	66	1923		336	318	17
1909		291	258	33	1924	****	340	328	12
1910		333	281	52	1925		334	317	17
1911		383	334	49	1926		343	323	20
1912		324	284	40	1927		357	341	16
1913		328	286	42	1928		348	341	7
1914	****	323	295	28	1929		291	288	3
1915		376	349	27	1930		289	282	7
1916		281	252	29	1931		331	328	3
1917	4111	278	265	13	1932		319	312	7
1918	****	285	242	43	1933		324	310	14

It may be of interest to note that of the 324 bodies brought to the mortuary, 19 were cases of drowning, 39 of street accidents, 40 of other accidents, 65 of suicide, 142 of sudden death, natural causes and misadventure, and 19 other causes,

Matters of Public Health Interest which have arisen during the year.

I.—Tuberculosis: Assessment of Contribution by Patients towards the cost of Residential Treatment.

The London County Council announced that the matter of assessment had been transferred from the Public Health Committee to the Public Assistance Committee and requested that the City Council's Tuberculosis Care Committee should undertake the collection and assessment of contributions of those who previous to the operation of the Local Government Act, 1929, were tuberculous Poor Law patients.

The City Council having consulted its Tuberculosis Care Committee agreed to assess the new type of cases, but was unable to undertake collection of contributions, which decision was in conformity with the practice of the Care Committee which had been in operation for some eighteen years.

H.-Local Government Act, 1929, Contributions to Voluntary Associations.

The scheme of the Minister of Health fixing the City Council's annual grants to the following associations in the amounts stated was received. The grant period is from 1st April, 1933, to 31st March, 1937.

City of Westminster Health Society	 	 	£1,103
Charing Cross Hospital Centre	 	 	272
Infants' Hospital, Vincent Square	 	 	218
City of Westminster Day Nursery	 	 ***	600

The payments are to be made subject to conditions specified by the Minister being fulfilled.

III.—Tuberculosis—The London County Council—Improved Co-operation between the Public Assistance Authority and the Local Authority as regards extra nourishment for Tuberculous Patients receiving Out-Relief.

The County Council announced that the District Medical Officer would consult the Tuberculosis Officer as to extra nourishment to such cases over and above the ordinary scales of diet for out-relief cases. He would also refer out-relief cases whom he found to be tuberculous to the Tuberculosis Dispensary and would consult the Tuberculosis Officer as to recommendations for in-patient treatment for such cases.

IV .- Incinerator at block of private flats.

A further period for the operation of this incinerator has been granted by the London County Council after consulting the City Council. The principle in this case is that of a combined shoot-incinerator. It works with high efficiency which almost entirely results from careful and intelligent management. All the household refuse from a considerable number of flats is burned to a fine ash. So scanty is the residuum that the dustman calls only once a month.

V.—Infant Life Protection—Adoption of Children Act, 1926, Guardianship ad litem.

The Home Secretary had stated that Maternity and Child Welfare Authorities

The Home Secretary had stated that Maternity and Child Welfare Authorities were qualified to act as guardians ad litem as well as Education Authorities. The City Council accordingly informed the Courts in the area of this decision. In one case the Westminster County Court appointed the City Council guardian ad litem and the Medical Officer of Health attended the Court to give evidence before an adoption order was made,

VI .- Mutual Registration of Assistance.

This has for its objects the linking up of various forms of assistance, whether official or voluntary, co-operation between bodies administering assistance and interchange of information so that overlapping may be avoided and particular types of cases assisted by the most suitable body. The scheme, which had lapsed for some years, was revived at the request of the London County Council, who desired that its Public Assistance Committee might have advantage of being made aware of the efforts of charitable and other voluntary associations in dealing with cases coming within the purview of the Committee. The City Council decided that the activities of its Welfare Centres and Tuberculosis Care Committee which related to the distribution of grants for extra nourishment, etc., should be affiliated to the mutual registration of assistance set up by the Westminster Committee of the Charity Organization Society.

VII.—Prevention of Deafness.

The Minister of Health drew attention in Circular 1337A to the need for early and continuous treatment of infants suffering from ear defects with a view to preventing deafness and deaf mutism. The Medical Officer of Health was directed specially to inform the Medical Officers of the Council's Centres of the views of the Minister and to take action accordingly.

VIII.—Homeless Persons—Washing Facilities and Shelters.

The London County Council drew attention to a representation from Societies working on behalf of the Homeless that in the free shelters provided by certain philanthropic bodies there were no washing facilities and the men who lodged there were in consequence handicapped when appearing before prospective employers. The matter was discussed by the Public Health Committee and also by the Baths Committee. The former put forward the suggestion that it might be possible for the Works Committee to provide a number of free vouchers for washing facilities at the public lavatories near such shelters for use before 8 a.m. This suggestion was forwarded to the Works Committee.

IX .- Conversion of Homes into One Room Flatlets.

A Borough Council through the Metropolitan Boroughs, Standing Joint Committee expressed a need for obtaining further sanitary control over such conversions. It was feared that danger to health might arise through occupants, in the main single women, cooking food on a gas ring, washing up dishes at a lavatory basin and in some cases having a fixed bath in the room although it might be screened. The City Council was of opinion that existing legislation was sufficient to safeguard sanitary conditions in such one room flatlet conversion schemes as had come under its notice. Moreover, it did not appear that the dangers to health which were feared from the conditions described were likely to be realised.

X.—Maternity and Child Welfare—Grants to necessitous Mothers—Extra Nourishment for certain cases in receipt of Public Assistance.

The London County Council introduce the subject of co-operation between the Public Assistance Committee and the Maternity and Child Welfare Authority as regards the extra nourishment to expectant and nursing mothers in receipt of public assistance. It is desired that all such women if not already attending an ante-

(9489)

natal clinic or welfare centre shall be sent there. The medical officer of the centre would then be in a position to recommend to the relieving officer the extra diet, over and above ordinary scales, which he considered necessary in any given case. Payment for extra diet for these cases would be made by the Public Assistance Committee.

The City Council, while agreeing with this scheme of co-operation in principle, raised certain points of detailed administration which seemed to require simplification or elucidation. Discussion with the officers of the London County Council is proceeding and it is confidently hoped that these points will have been settled and the scheme brought into operation at an early date.

XI.—Tuberculosis—Payment for Sanocrysin Treatment.

The authorities of Brompton Hospital desire that this form of treatment, which is highly expensive, should, in the case of patients ordinarily resident in a metropolitan borough, be paid for by that Borough Council. The City Council while prepared to consider payment for individual cases was of opinion that such payment should be made only on the express recommendation of its Tuberculosis Officer.

Some Observations from the Work of the Maternity and Child Welfare Centres.

The Health Visitors in charge of the Council's Centres have been requested by the Medical Officer of Health to comment on certain aspects of social and health conditions in their respective areas, and after consulting the medical officers of the centres report as follows:—

Ebury Bridge Centre.—No deterioration noted in health of mothers and infants during 1933 in spite of unemployment which, however, is decreasing. There is a tendency for the numbers of mothers coming to live in Victoria district from Wales and Ireland to increase. These do not possess so good a physique as the Westminster-born women.

An observation made some years ago is confirmed; that mothers who previous to marriage were in good domestic service show to advantage as regards bodily fitness.

Foster Mothers.—The number of women possessing the desirable qualifications for the care of foster children is regrettably small, and the demand for foster mothers, as might be expected, is for the care of illegitimate children. Close contact is maintained with the National Society for the Prevention of Cruelty to Children and much useful information has been exchanged.

Student Health Visitors.—Sixteen from the National Health Society were trained at the Centre, all of whom were trained nurses. At the

suggestion of the Ministry the course of training has been revised, the minimum attendance being fixed at 26 days of 130 hours, of which 48 hours are devoted to home visiting.

The grants of milk to nursing mothers has in many cases enabled them to nurse their infants for the normal period.

The closest co-operation exists with the district nurses, but in less degree with the school nurses who do not find much occasion to visit the Centre.

In relation to 351 births in the district, 123 expectant mothers attended the Centre. 94 women took advantage of the Council's midwifery services:—55 in-patients and 39 out-patients of Westminster Hospital.

Infants under 1 year attending the Centre numbered 223 in relation to 351 births, in addition to 52 infants who moved in from other districts.

Marshall Street Centre.—There is very little poverty or unemployment in the northern area, only 29 families (mothers and/or infants) receiving milk grants compared with 310 recipients in the whole city. A state of fairly good nutrition seems to prevail. On inquiry as to butter consumption, as compared with margarine, it was found that very few in this area purchased margarine.

Foster Mothers.—Only three are registered and they attend the centre regularly. Quite a number of addresses of foster children are received, but in most cases they are found to be former addresses of the parents.

Student Health Visitors.—Five from the Battersea Polytechnic, Bedford College and College of Nursing received training. The methods of instruction at this centre are described, it being emphasised that for the first month students must pay home visits always with the health visitors

Co-operation with district nurses is not extensive. Only on three occasions were their services required for centre cases. With the school nurses, however, head masters and head mistresses there is much helpful interchange of information by personal visits.

Ante-natal Clinic.—None at this centre, but 25 expectant mothers attended the mothercraft class.

There were 5 in-patients and 2 out-patients of Westminster Hospital in connection with the City Council's midwifery services.

Births in the area numbered 195. After deducting infant deaths, still births, moved away before visiting, and above standard births the number remaining is 151. Of these, 80 infants attended the Centre.

F 2

Bessborough Street Centre and that of the Westminster Health Society at Marsham Street report generally in somewhat similar terms. In some cases high rent for rooms in tenement houses is a cause of hardship. In the case of the former the births in the district were 307, while 167 expectant mothers and 241 children under one year of age attended the Centre during the year. In relation to the 307 births, 6 took place in Westminster Hospital, while 39 infants were born at home, the confinements being attended by the Westminster Hospital midwife under the Council's agreement. As regards the Westminster Health Society's district, of 265 births 36 took place in Westminster Hospital under agreement and 6 at home attended in co-operation with the out-patient department of the hospital. Infants under one year attending the Centre during the year numbered 161; the total births in the district were 265.

SANITARY CIRCUMSTANCES OF THE AREA.

Water.—With the exception of those premises (previously reported) which are supplied with water from deep wells, the whole of Westminster takes its supply from the Metropolitan Water Board.

A deep well has been sunk during the year in connection with the rebuilding of 3, St. James Square.

Public Swimming Pools, Laundries, &c.—There are three establishments, situated at Buckingham Palace Road, Great Smith Street, and Marshall Street.

The numbers using the swimming pools and private baths in 1933 were:—

Great Smith Street: 150,791 men; 66,254 women. Buckingham Palace Road: 129,306 men; 85,078 women. Marshall Street: 173,100 men; 126,865 women.

The numbers relating to users of the public laundries were:—Great Smith Street, 30,796; Buckingham Palace Road, 28,589; Marshall Street, 11,355.

Frequent bacteriological examinations of the water in the first- and second-class swimming pools at the Council's three establishments have been made throughout the year. The results were reported to the Baths Committee at their monthly meetings and have shown that the water in each swimming pool has been maintained at a highly satisfactory standard of purity by means of the filtration and purification plants,

Drainage and Sewerage.—During the year 926 plans of drainage and other sanitary works relating to existing and new buildings were examined and approved. This is the largest number of plans dealt with since the supervision of all drainage works was referred to the Medical Officer of Health in 1912. The previous highest number was 891 in 1930.

In addition to the works in respect of which plans were submitted, many small alterations such as the diversion of pipes, replacement of fittings, &c., which did not necessitate the deposit of plans were also dealt with.

New Sanitary Construction.—Of the 926 plans relating to drainage and other sanitary works, 96 represented sanitary provisions in entirely new buildings. The corresponding figures since 1929 are as follows:—

	1929.	1930.	1931.	1932.	1933.
Plans Plans of work in new build-	877	891	748	757	926
ings included in above	91	96	71	68	96

Combined drainage orders were made in 19 cases.

Infringements of the by-laws were reported by the Sanitary Inspectors in 21 instances in respect of failure to give notice of intention to construct or to deposit plans. There were no prosecutions in respect of these offences, but 11 builders were cautioned. In the remaining cases the explanations offered were accepted and no further action was taken. One builder was prosecuted for carrying out sanitary works in an unsatisfactory manner, and was fined £2 and £3 3s. costs.

Closet Accommodation.—The water carriage system is in existence throughout the City.

Public Sanitary Conveniences.—These are under the control of the City Engineer. There are now 41 public conveniences in the City, 22 for men and 19 for women.

The accommodation available for the public was increased during the year by the construction of a new convenience in Millbank by Lambeth Bridge. Accommodation for both men and women was provided. On the 1st April the control of the conveniences on the Victoria Embankment by Westminster Bridge and Charing Cross Underground Station was transferred from the London County Council to the City Council under the Transfer of Powers Order made by the Minister of Health under the Local Government Act, 1929.

In addition to the 41 conveniences above mentioned, there are 32 public urinals for men. One urinal in Millbank was abolished when the new convenience at Lambeth Bridge was completed.

Public Cleansing.—This is carried out by a separate department of the City Council under the City Cleansing Superintendent. There is a daily collection of refuse throughout the City and the figures for the Council year ended 31st March, 1934, are as follows:—

Uouse of H . 1			Tons.
House refuse collected		 	 87,062
Trade refuse collected		 	 1,646
Total barged a	way	 	 88,708

Modernization of Transport.—During the early part of the year three new motor refuse collecting vehicles were purchased and thirteen of the present fleet of the open-body type were converted to totally enclosed bodies.

In November a motor sweeper and collector of the latest type was purchased, which combined the operations of sweeping and collecting or picking up the refuse from the streets and conveying it to the disposal depot.

In December the City Cleansing Superintendent put forward a comprehensive scheme for the complete modernization of the Council's transport, extending over a period of four years at an approximate cost of £45,000. This scheme provided for the entire replacement of the horse transport and obsolete motor transport and was anticipated to effect not only a considerable saving in cost but greater efficiency in working.

Refuse Collection by "Container System."—The scheme also provided for the inauguration of a "Container System" of refuse collection for large hotels and blocks of flats, &c. This system provides for the hiring from the Council of metal refuse containers of either 1\frac{1}{4} or 2\frac{3}{4} cubic yards capacity, which are collected at arranged intervals and replaced by clean empty containers. This system is not only advantageous to the hirers from an hygienic point of view but saves considerable time to the Council by dispensing with the necessary labour required for the collecting, emptying and returning of large numbers of bins.

The Council agreed to the report in principle and gave authority to proceed with the purchase of small quantities of the various units in order that an extended trial could be made. Refuse Disposal—Essex County Council Act.—Early in the year, the Essex County Council promoted a Bill in Parliament containing a clause dealing with the subject of the disposal of refuse by local authorities and others, except those within the county itself. Its object was the prohibition of the dumping of refuse anywhere in the county, except with the consent of the local authority concerned and that of the County Council. There was to be no right of appeal against an adverse decision on the part of those authorities.

The clause, if passed, might have been operated so as to prevent the further dumping of refuse even in places already in use for that purpose. Such a situation would have presented a serious problem to those authorities in the metropolitan area and elsewhere whose refuse was being disposed of in the county. In the case of Westminster, the major portion of its refuse had been deposited in Essex for many years past.

The City Council had in 1932 entered into new contracts with two firms having dumps in Essex and had required them to comply with certain precautions suggested by the Ministry of Health for observance at refuse tips and dealing with the covering or refuse, &c. As a consequence conditions at both dumps had improved.

The authorities affected decided to offer strenuous opposition to the proposals. Some of them, including Westminster, presented a joint petition to Parliament, while others petitioned separately.

It was urged that the disposal of refuse under proper methods of control such as those in use in Bradford could be carried on without detriment to neighbouring inhabitants or property. In that city, refuse was being disposed of within the district, in some instances in close proximity to dwelling houses, in such a manner that no nuisance of any kind was in evidence. It was pointed out that most of the refuse disposed of in Essex was deposited on marsh lands along the river bank at considerable distances from the nearest habitations. These lands in their existing state were useless for any remunerative purpose, but by filling in and levelling with refuse properly covered, they could in time be used for agricultural and industrial purposes.

The preparation of evidence for the opposition involved many visits being paid to refuse dumps, refuse destructors and pulverization plants in Essex and elsewhere by the Medical Officer of Health and other officers of the council covering a period of some four months.

The Essex County Council eventually entered into negotiations with the petitioning authorities and after considerable discussion between he parties and the Ministry of Health a final basis of agreement was reached and the clause as amended was approved by Parliament. It provides that refuse may continue to be deposited in areas already used for that purpose and in other riverside areas subject to certain regulations concerning the question of the maximum height above surrounding ground at which refuse may be placed, the length of time during which newly deposited refuse may be left uncovered, the depth and type of covering materials to be used according to the nature of the refuse, &c. In the case of other parts of the county, the County Council is empowered to prescribe from time to time areas in which refuse may be deposited in accordance with the regulations.

In order to ensure that the City Council's contractors were carrying out their obligations an official of the Highways Department was detailed to supervise operations at the dumps in Essex as a whole time duty.

SANITARY INSPECTION OF THE AREA.

The following table shows in detail matters relating to the general sanitary condition of the City. The work of the district sanitary inspectors is performed under several main headings: inspection of nuisances and other insanitary conditions, whether on complaint or otherwise; supervision of all new sanitary fittings and drainage in old and new buildings, which includes reporting on plans of proposed sanitary construction in respect of requirements laid down in the by-laws under the Metropolis Management Acts and the Public Health (London) Act, 1891, duties connected with housing and infectious disease, and others relating to the sanitary condition of the City.

TABLE I.

Inspection of premises:-	
Dwelling-houses-	Water-Closets-
Primary Inspections—	Directly approached from
(a) On complaint 1,159 (b) Infectious disease 723	rooms 43 Accommodation insufficient 38
(c) Housing Regulations,	Water Supply—
1925 1,128	Insufficient or unsatisfactory 49
(d) Special Housing Survey 322	Cisterns dirty and uncovered 152
(e) Housing applications 262	Absence of—in upper floors of
(f) Other reasons 3,496*	tenement houses 12 Dustbins—
Total 7,090	Absonso of
Total 7,090	T 755 1 .
Re-inspections 9,370	Defeation :
	Animals kept so as to be a
Other Premises—	nuisance 51
Primary inspections—	Other nuisances 599
(a) On complaint 403	Dangerous structures noted 31
(b) Other reasons 3,878	Overcrowding 34
m	Underground rooms illegally
Total 4,281	occupied 90
Re-inspections 5,431	Sanitary works supervised:-
Sanitary Works—	Drains (including soil, waste, rain-
Total Inspections-	water pipes, etc.)—
(a) Under notice 1,445	Constructed 4,410
(b) Voluntary works 10,317	Altered, repaired, etc 1,675
	Intercepting traps fixed 164
Nuisances, etc.:—	Petrol interceptors provided 28 Tested by smoke 440
	1 1 7 700
Defective or dirty conditions	,, chemical 533 ,, water 1,946
of internal structure 1,206	,, air 682
Verminous conditions 366	Water-closets-
Damp conditions 358 Inadequate under-floor venti-	Constructed 2,013
letion	Repaired and reconditioned 425
Defective drainage, water-	Urinals—
closets, etc 343	Constructed 222
,, roofs 235	Repaired and reconditioned 64
,, paving of areas, etc. 122	Water Fittings fixed—
Water-closets-	Baths 1,617 Bidets 119
Insufficiently ventilated or	Bidets 119
lighted 94	Lavatory basins 1,862 Sinks, etc 1,790
* This figure includes \$1 visits of anon	Sinks, etc 1,790

^{*} This figure includes 81 visits of enquiry in respect of smallpox contacts.

Restriction of Rent Acts.—No applications were received for certificates under these Acts.

On the 18th July a new Act, to which reference is made elsewhere in this report, came into force dealing further with the subject of control and decontrol of dwelling-houses. It provided, inter alia, that dwelling-houses in the Metropolitan Police District and City of London of a rate-able value exceeding £45 on an appointed day (6th April, 1931) were to be immediately decontrolled, those of a rateable value between £20 and £45 were to remain controlled so long as the sitting tenant remained in possession. In the case of those not exceeding £20 in rateable value, if occupied by a controlled tenant at the time of the passing of the Act

control was to be continued for five years; if occupied by a decontrolled tenant or if unoccupied, they were to remain decontrolled, subject to registration being effected with the local authority not later than 18th October. There was a proviso in the case of the last mentioned class of house, that registration after that date could be effected on application to the County Courts, which were empowered to grant certificates authorising registration on being satisfied that non-registration was due to some reasonable cause. The County Courts were also empowered to order the registration to be cancelled in any case where it was proved that the property was not in fact entitled to be treated as decontrolled.

The number of registrations effected by the 18th October was 7,532. Late registrations on certificates of the County Court to date (June, 1934) number 128. Certificates of registration or non-registration, which local authorities were required to grant on payment of a fee of 1s., have been issued in 191 cases, 181 being in respect of registered houses and 10 non-registered. There have been no cancellations of registration by the County Court.

Nuisances.-Intimation notices were served in 1,223 instances, the number of premises concerned being 1,142. Statutory notices authorised by the sanitary authority numbered 50 and related to 48 premises. Police court proceedings as detailed below were taken in 7 instances in order to enforce compliance with the requirements of statutory notices: -

Details of Nuisance, etc.

Result of Proceedings.

Summons withdrawn at magistrate's

suggestion, the defendant having

(1) Business premises without water supply ... Abatement order, 4s. costs.

(2) Defective and dirty conditions in a tene- Abatement order, 3s. costs. ment house

(3) Failure to comply with abatement order Fine £3, and 21s. costs. in (2)

disposed of the premises.

(4) Defective W.C. in above-mentioned tenement house

Abatement order.

(5) Business premises without water supply (6) Dirty and defective conditions in a tene-

Abatement order, 21s. costs.

ment house (7) Dwelling-house without a water supply ... Abatement order, 6s. costs.

The following are the comparative figures since 1929:-

		1929.	1930.	1931.	1932.	1933.
Intimation Notices Statutory Notices Legal Proceedings	****	 1,158 59 7	1,239 72 5	- 1,244 62 5	1,378 57 4	1,223 50 7

Water Supply.—The Metropolitan Water Board sent 34 notices of withdrawal of water supply to premises. In each case the reason for the action of the Board was failure to pay the water rate.

There were 3 prosecutions in respect of failure to restore water supply following the service of statutory notices. An abatement order was made in each case.

Water Supply in Tenement Houses.—Power to effect this provision is given under Section 48 of the Public Health (London) Act, 1891, and under Section 78 of the London County Council (General Powers) Act, 1907. The number of cases in which this action was taken since 1929 is as follows:—

1929.	1930.	1931.	1932.	1933.
5	21	19	9	12

By-laws as to Removal of Offensive Refuse.—One case was reported and the person concerned was prosecuted and fined 40s. and 21s. costs.

Lighting of staircases in tenement buildings.—The L.C.C. (General Powers) Act, 1927 (Sec. 61), provides that the staircases of every tenement building shall, wherever practicable, be provided with adequate means of natural and artificial lighting, and those constructed after the commencement of the Act with windows to the external air at each storey.

At 22 houses lighting of staircases was installed or improved as the result of representation to the owners.

FACTORIES, WORKSHOPS AND WORKPLACES.

Occupations and Workshops.—In the following tables are shown in detail the number and variety of work premises on the register at the end of 1933, the number of inspections made, and the results of such inspections:—

TABLE II.

Work Premises.									Total Number.
l'ailors, outfi Dressmakers, costumiers	linger	rs, em ie mal	broider kers, el	rers, lac	o make	are blo	men men	l-one	1,405
aveing, cor	set mak	ers, ft	Irriers.	ete.				2000	1,336
Leather work	ers, boo	t and	shoe m	nakers,	harness	s maker	rs, etc.		68
arpentry, u	onoister	V. Carv	ers, gi	lders, e	te				92
urgical and	dental i	nstru							8
obacco man									7
ig makers	and han	work	ers						48
inting, boo	Kbindin	g, lith	ograph	ers, env	relope 1	making	, station	ners,	
renet stam	oing, etc							200	64
wellers, sil	versmit	ns an	d bur	nishers	, diam	ond c	utters	and	
ponsuers, e	ngraver	s, etc.							79
tal worker	S								45
pins, stam	p sorte	rs, po	steard	ancy w	ork, sh	maker	aments, s, artif	hat	
flower mak	ers, etc.								49
orists									21
undries									17
kehouses									61
otographer	8								45
rel case ma	ikers								7
nema film	workpla	ces							22
								2000	

The use of 124 workshops was discontinued, and 379 additions were made to the register during the year.

TABLE III .- Inspection.

	Number of				
Premises.	Inspections.	Written Notices.	Occupiers prosecuted. (4)		
Factories (including factory laundries)	347	8	_		
Workshops (including workshop laundries)	3,370	241	1		
Workplaces (other than Outworkers' premises)	2,284	135	1		
Total	6,001	384	2		

Table IV.—Defects found.

	X	umber of Defee	ts.	Number of offences in
Particulars.	Found.	Remedied.	Referred to H.M. Inspector.	respect to which Prose cutions were instituted,
(1)	(2)	(3)	(4)	(5)
Nuisances under the Public Health Acts:—				
Want of cleanliness	275	275		
Want of ventilation	26	26		
Overcrowding	21	21		
Want of drainage of floors	5	5		
Other nuisances	184	182		2
Sanitary accommodation—		Child Child	HOLD STATE	4
Insufficient	27	27	-	
Unsuitable or defective	134	134	_	
Not separate for sexes	18	18		
Offences under the Factory and Work- shop 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 Work-		R BOWNE		
shops Transfer of Powers) Order, 1921.)				
Total	690	688	_	2

Table V.—Other Matters.

Class,	Number.
Visits to Outworkers' premises other than workshops	137
Failure to affix Abstract of the Factory and Workshop Act Absence of means of warming	181
Matters referred by H.M. Inspectors Workrooms measured	61
Visits of Enquiry re	181
Employment of Women	90
Underground bakehouses in use at the end of the year	43

A copy of a table relating to outworkers required by the Home Office under the Factory and Workshop Act, 1901, and giving information under the headings of Sections 107, 108, 109 and 110 is appended.

82

18

18

Outwork in un-Outwork in in-Outworkers' Lists, Section 107. wholesome premises, Section 108. fected premises, Sections 109 & 110. to Prosecu-Lists received from employers. Prosecutions (Sections 109, 110). 3.8 Addresses of Outworkers. Notices served on occupiers keeping or sending of lists. Sending twice in the year. Sending once in the year. keep or permit of lists. Orders made (Section 110). Trade. Received from other Councils. Failing to send lists. Outworkers. Outworkers. Sent to other Councils. Notices served. Prosecutions. Contractors. Failing to inspection of Instances. Instances. Work-Work-Lists. Lists. men. men.

526

7 17

4

554

4,753

40

91

4,955

118

118

Wearing apparel
Linens, etc.
Furriers
Umbrellas, toys, artificial flowers, etc.

Total

1,003

1,014

3 6

2

1,679

29 31

51

1,790

7,418

52 23

75

7,568

21

21

18

18

103

103

TABLE VI.

Outworkers.—The total number of lists received during the year amounted to 1,035.

Notices in respect of failure to send lists were sent to 118 firms. No legal proceedings were necessary in respect of this offence.

The lists contained 9,479 names and addresses, of which 4,955 were in other districts, 4,312 being within the Metropolitan area and 523 in the London Suburban Districts.

The number of individual outworkers in the City at the close of the year was 1,615, of whom 1,513 were registered as occupying workshops. The number of premises in which outwork was being carried on was 744.

Smoke Abatement.—The following table shows the extent to which smoke has been a cause of complaint to the sanitary authority during the past five years, and also a summary of the measures taken in mitigation:—

TABLE VII.

-	1929.	1930.	1931.	1932.	1933.
Complaints received	52	31	49	35	63
Observations taken Notices issued—	854	755	854	629	749
Preliminary	12	16	10	11	10
Statutory	_	2	2	2	1
Legal Proceedings	_	2		2	-

There were no prosecutions in respect of smoke nuisances during 1933.

Greater London Joint Smoke Abatement Committee.—This Committee held at least one meeting during the year. Your Medical Officer of Health is a representative of the Metropolitan Boroughs' Standing Joint Committee on this Committee.

The instructional cards for stokers prepared by this Committee, and referred to in last year's Report, were distributed by the Smoke Inspectors to firms who experienced difficulty in preventing smoke nuisance whether from oil or solid fuel plants.

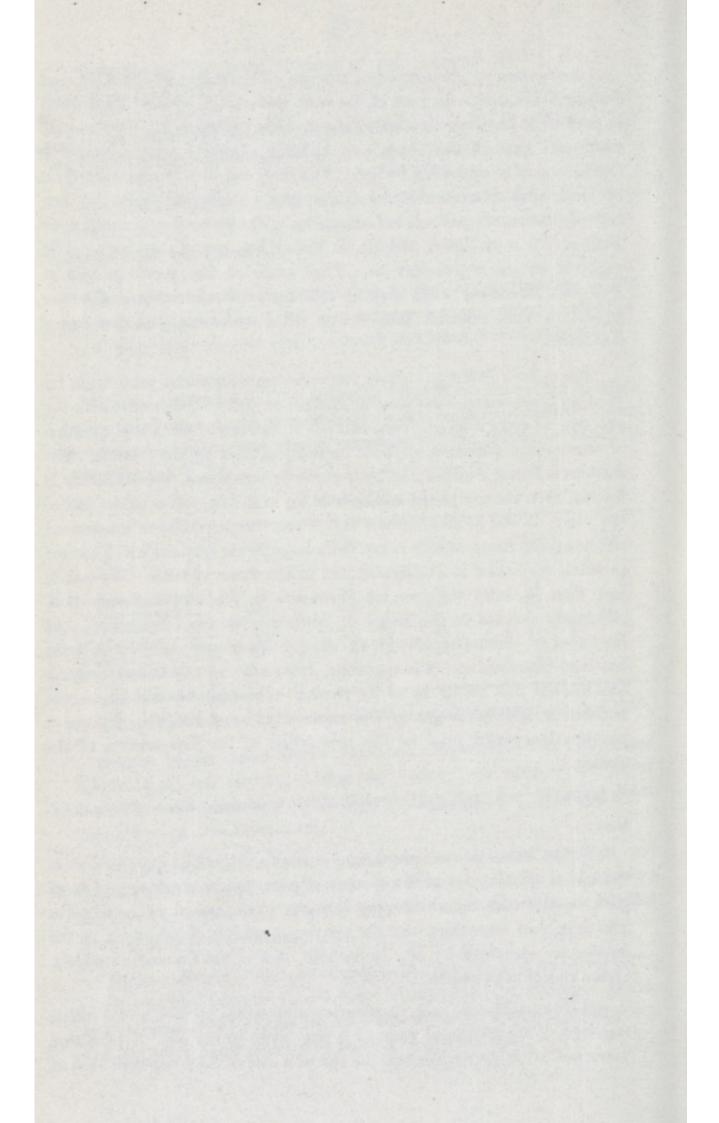
National Smoke Abatement Society.—The City Council takes an active interest in the work of this Society. Councillor Mrs. Alderson Horne, as a member of the Public Health Committee, has attended its meetings and has made many interesting reports on proceedings.

Investigation of Atmospheric Pollution.—Department of Scientific and Industrial Research.—In view of the work undertaken by the City Council in relation to the investigation of atmospheric pollution, the Department mentioned invited the Council to appoint members to the Standing Conference of co-operating bodies. This body consists of representatives of local authorities, industrial undertakings, scientific societies, &c., actively interested in such investigations. The Council appointed your Medical Officer of Health and Mr. J. McLachlan, one of the City's public analysts, as its representatives. They attended the meetings held in May and November when matters relating to administration of smoke legislation and research into causes of atmospheric pollution were discussed.

Atmospheric Pollution.—Ever since the representations were made by the City Council and other local authorities in 1929 in connection with the proposal to erect a large Power Station in Battersea, the whole question of atmospheric pollution has been carefully studied by the Council. The Battersea Power Station has been partially completed, but so far as is known, even the completed section was not in full operation at the end of the year. It will be remembered that it was the possibility of deleterious effects arising from sulphur fumes from large power stations which caused so much discussion in Parliament and in the Press in 1929. The public had then in mind the case of Farnworth v. Manchester Corporation. ultimately decided in the House of Lords against the Corporation. At Battersea an elaborate plant for the elimination of grit and noxious gases has been installed, and is in operation, but so far no authoritative report has reached the public as to its results. The City Council began the estimation of sulphur gas in December, 1931, and has records over a considerable period prior to the completion of the first section of the station.

Methods of Investigation.—There are three main lines of investigation:—

- (1) The estimation of soluble and insoluble impurities deposited from the air, or washed out of the air into deposit gauges consisting of large glass bottles with their collecting funnels, which are of measured area. The deposited impurities and the varying quantity of rainwater in the bottles are examined by Mr. McLachlan, one of the Council's analysts, at the end of each month.
- (2) The qualitative and quantitative comparison by means of a colour standard of the effects of suspended impurities in the air. A measured volume of air is drawn through the rim of a disc of filter paper rotated at



To feet page 34

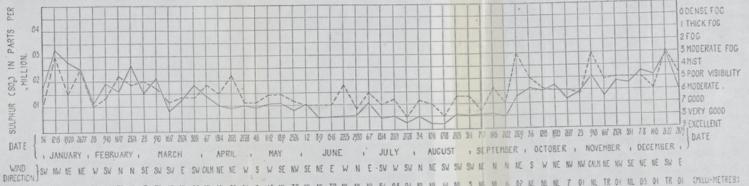
SULPHUR GAS IN THE ATMOSPHERE.

Variations throughout the year of SO2 measured by weight, with corresponding readings of rainfall, wind and visibility.

Weight of SO_2

Visibility

Rainfall-TR. = under 0.1 mm. (average is 1.2 mm.).





and the state of the relation of the difference of the state of the st

egular intervals during the 24 hours. The air drawn through leaves a deposit on the white paper. The degree of intensity of the mark, corresponding to the amount of suspended impurities, is then compared with a scale of standard tints. This instrument, which was designed by Dr. J. S. Owens, and known as the "automatic air filter," has been so devised that the scale of tints correspond to pounds of suspended impurities per million cubic yards of air.

(3) Estimation of sulphur gas as SO2. The method of investigation was described in the reports for 1931–32. It need only be said that this is the first occasion on which sulphur gas readings have been exhibited in graphic form. Last year the results were given in statistical tables. The scheme of the chart opposite is the work of Messrs. Sutton and Davies, the Council's Inspectors, who have given a great deal of time to the Council's investigations into atmospheric pollution. This particular chart has received the commendation of Dr. Owens, Superintendent of Observations on behalf of the Department of Scientific and Industrial Research, and may possibly be adopted at other stations where sulphur gas is measured.

The chart indicates the amount of sulphur gas correlated with visibility, wind-direction and rainfall during 1933, and the amount of sulphurous mpurities (calculated as sulphur dioxide) in parts per million in the atmosphere compared with the "visibility." The code used for "visibility" readings is that issued by the Meteorological Office, and is as follows:—

0.	Dense fog			Objects not	visible at	55	yar	ds.
1.	Thick fog			,,	,,	220		
	Fog			,,	,,		,,	
3.	Moderate fog			,,	,,	1,100	,,	
4.	Mist or haze			,,	,,,	11 m		
5.	Poor visibility			,,	,,	21		
6.	Moderate visibility	y		,,	,,	61	,,	
7.	Good visibility			,,		121	,,	
8.	Very good visibilit	y		,,		31	"	
9.	Excellent visibility	y	٠	Beyond 31 n				

The general wind direction and rainfall during the period of observation are shown. It is interesting to note that the amount of pollution follows the general "line" of the visibility. The periods of observations are those of 24 hours in each week, and are generally made between 10 a.m. Thursday and 10 a.m. Friday.

Deposit gauges.—The following table shows the results of the monthly analyses of the amount of impurities, soluble and insoluble, collected in the deposit gauges at Mount Street Gardens, Mayfair, and at the Coroner's Court, Horseferry Road, together with the result of analyses of deposits from a similar gauge in Finsbury Park for comparison.

TABLE VIII.

Figures in Englis						sh Tons per Square Mile.				
1933.			Hor	seferry Ro	ad.	1	Finsbury Park.			
			Total Solids.	Sulphur.	Daily Average.	Total Solids.	Sulphur.	Daily Average.	Total Solids.	
January February March April May June July August September October November December			$23 \cdot 04$ $41 \cdot 72$ $32 \cdot 27$ $20 \cdot 68$ $27 \cdot 03$ $22 \cdot 21$ $23 \cdot 13$ $15 \cdot 74$ $25 \cdot 51$ $25 \cdot 74$ $22 \cdot 38$ $24 \cdot 63$	3·30 2·81 2·73 1·44 1·98 2·02 1·66 1·43 1·93 2·83 2·09 2·60	0·74 1·49 1·04 0·69 0·87 0·74 0·75 0·51 0·84 0·83 0·75 0·79	$21 \cdot 41$ $25 \cdot 87$ $41 \cdot 07$ $14 \cdot 37$ $26 \cdot 00$ $23 \cdot 11$ $24 \cdot 30$ $14 \cdot 92$ $16 \cdot 96$ $24 \cdot 41$ $17 \cdot 29$ $19 \cdot 46$	2·64 2·83 2·76 1·24 1·83 1·53 1·80 0·96 1·82 2·29 1·58 1·81	0·69 0·93 1·35 0·48 0·84 0·77 0·78 0·47 0·57 0·78 0·58 0·63	16·37 16·97 26·72 10·86 25·09 23·66 17·42 25·58 14·25 18·33 12·24	

^{*} No results available.

SPECIAL CLASSES OF PREMISES AND OCCUPATIONS SUBJECT TO CONTROL BY THE LOCAL AUTHORITY.

(1) Common Lodging Houses.—By the Transfer of Powers (London Order, 1933, made under Section 64 of the Local Government Act, 1929 the duties of licensing, inspection and regulation of common lodging houses were transferred from the London County Council to the metropolitan city and borough councils as from the 1st April, 1933.

There are 6 such houses in the City of Westminster, 4 for men and 2 for women and children, viz. :—

, , , , , , , , , , , , , , , , , , , ,		Licensed to receive:-				
		Men.	Women.	Children.		
16, Strutton Ground		 201				
Bruce House, Kemble St	treet	 716	-			
33, Great Peter Street		 80	_			
7, St. Ann's Street		 565	_	100 100		
40, Great Peter Street		 _	57	2		
28-30, Greencoat Place		 _	174			

The City Council at its meeting on the 22nd June, 1933, renewed all the licences for one year, operating from 1st July, 1933, to 30th June, 1934.

The duties of inspection involve visits both by day and by night and are carried out by a male sanitary inspector for men's houses and the female sanitary inspector for women's and children's houses. During the nine months 136 inspections were made, and generally conditions were found to be satisfactory.

- (2) Seamen's Lodging Houses.—There are none in the City.
- (3) Slaughter Houses .- There are none in the City.
- (4) Offensive Trades .- There are none in the City.
- (5) Cowsheds.—There are none in the City.
- (6) Houses Let in Tenements.—The Sanitary Inspectors paid 8,315 visits of inspection to houses of this class. Legal proceedings were taken in respect of nuisances, &c., at two houses, one of which was the subject of three prosecutions. Details of these cases are in page 78.
 - (7) Underground Sleeping Places.
 - (8) Butchers' Shops and Stalls.
 - (9) Dairies and Milkshops.
 - (10) Ice-cream Premises.
 - (11) Preserved Meat, etc., Premises.
 - (12) Bakehouses.
 - (13) Workshops and Workplaces.
- (14) Rag-and-Bone Dealers.—There are 13 premises in the City in which this business is carried on. No matters requiring attention by the Department have arisen during the year.
 - (15) Fried-fish Shops and Fish Curers.
 - (16) Street Traders.

Particulars relating to premises and occupations included in the foregoing list, other than Nos. (1) (6) and (14), may be found under the appropriate headings elsewhere in this report.

Rag Flock Acts, 1911 and 1928.—There is one factory in the City which comes within the provisions of these Acts. Although rag flock is not manufactured there, it is used in making up material for mattresses. Two samples taken were reported satisfactory. One contained 3 parts of chlorine per 100,000 parts of rag flock and the other 15 parts of chlorine per 100,000 parts of rag flock.

The maximum amount allowed by the Rag Flock Act is 30 parts per 100,000.

(9489)

Schools.—In addition to the large number of academic institutions in Westminster there are 29 elementary and 5 secondary schools either wholly or partly under the control and management of the London County Council.

There is every reason to believe that with the continuously falling birth rate, now a pronounced feature in Westminster, less school accommodation will be required for Westminster children. If economic conditions improve, further attention will no doubt be given to some of the older schools by the responsible authorities. The City Council is not an education authority, although some of its members are also school managers. Some of the older schools are somewhat out of date, gloomy perhaps both within and without, and do not provide ideal surroundings for the cultivation of knowledge.

As regards infectious disease in schools, there is close contact between the officers of the Sanitary Authority and those of the Education Authority. The former bring at once to the notice of the latter anything in the nature of even a minor outbreak at a school which the School Medical Officers can investigate at the earliest opportunity.

The Council's Sanitary Inspectors are required to visit schools to inform head teachers personally after inspecting homes from which school children, suffering from notifiable infectious disease, have been removed to hospital, and also to acquaint the teachers as to home contacts attending the same school. This is in addition to the written intimation from the Medical Officer of Health to the head teacher as required by law.

OTHER SANITARY CONDITIONS REQUIRING NOTICE.

Fouling of Footways by Dogs—By-law.—Eleven cases of infringement of the by-law were reported to the Council by the Commissioner of Police. Summonses were issued against all of the offenders. Convictions were obtained in seven cases, two were dismissed on payment of 5s. costs, and in two others the summonses were not served, the defendants having left the addresses given.

The penalties inflicted varied from 2s. 6d. to 20s. and totalled £3 10s. 6d.

Rat Repression.—During the year 171 complaints were received and investigated, and 317 premises were inspected by the Sanitary Inspectors. The Council's rat officer visited 75 premises for the purpose of investigation and to advise owners and occupiers as to the steps to be taken to rid premises of rats and to instruct them in measures of rat proofing. He paid altogether 312 visits to these premises.

Most of those complaints resulted in repeated visits being paid to the houses affected. Inspections were made of sewers and of the house drains discharging to the sewers, as rat infestation in Westminster, particularly as regards dwelling houses, generally arises through faulty or decayed sewer connections. As a result of these examinations 60 drainage connections to the sewers were relaid and any other drainage defects found were made good.

The staff of the Works Department have, in addition to laying baits in the sewers throughout the year, treated four sections of sewers with anti-rat gas and also the drainage systems of houses and other premises.

During "Rat Week" in November efforts in connection with rat destruction were intensified; circulars on rat destruction were distributed and 14,060 baits were laid in the sewers and at the council's refuse depots and other places likely to attract rats.

Nuisance from Pigeons.—Section 52 (1) of the London County Council (General Powers) Act, 1927. The administration of this section is a duty of the City Council and details of the arrangements made were given in the Report of 1928.

A member of the disinfecting staff whose duties are mostly concerned with rat disinfestation also devotes some time to reducing the number of pigeons on complaint. During the year he visited some 46 premises and caught 269 pigeons. Messrs. Daltons also operated in Trafalgar Square and Parliament Square and reduced the number of pigeons by 500.

Noise from the Use of Rock Drills in Street Works.

The Council on the 20th July, 1933, referred the question of noise caused by the use of rock drills in street works to the Works and Public Health, &c., Committees for consideration and report.

The Medical Officer of Health reported upon the subject to the Committees concerned and as the matter is of public interest his report is fully set out:—

THE USE OF ROCK DRILLS IN STREET WORKS AND THE EFFECT OF THEIR NOISE ON THE HEALTH OF THE PEOPLE.

1. This matter is part of a reference from the Council at its meeting on 20th July last. The whole reference was made to the Works Committee which was instructed to consult with the Public Health Committee as to the aspect outlined at the head of this report. It is now understood that the Works Committee wish to be favoured with the views of the Public Health Committee.

- 2. It is unfortunately true that increasing noise seems to be a natural accompaniment of changing conditions particularly in cities and towns, but even in rural areas murmurs of complaint are being heard because of the motor traffic which rends the silence of the night. During the past few months The Times newspaper has given liberal opportunity for expression of opinion on the homful effects of noise on health and from many authoritative quarters has come an appeal to mitigate or to prevent this menace. Thus has arisen a definite movement of public opinion now organised in a society called the Anti-Noise League, which numbers among its members many distinguished men and women including leading physicians and surgeons.
- 3. So far as can be gathered the activities of this League are directed against such noises as arise from motor vehicles, the handling of milk churns, church bells and others more or less of a chronic character. Very little attention has been given to the much more acute and violent noise from rock drills which is necessarily periodic, but constant during the operation of these implements.
- 4. With regard to interference with health one should first examine the question as it affects work and rest. The interference is so obvious that it needs but little elaboration. Mental concentration, discussion and the normal transaction of business is almost impossible within 20 yards of these drills and of course the evil is magnified according to the number being operated. It has been alleged that loss of business has been experienced in shops and similar premises adjacent. In a neighbourhood of mixed business and residential buildings the factions struggle for privilege. The non-residents would prefer the drilling to proceed only at night while the residents indignantly retort that their sleep has the prior claim for respect. There can be little doubt that the over stimulation of the auditory sense organs leads to nervous exhaustion and impaired efficiency.
- 5. Interference with rest and sleep is of a more serious nature as an average healthy individual cannot work to the best advantage unless he obtains sufficient rest and sleep. If road drilling is carried on late at night or early in the morning near dwellings the residents are bound to suffer. Those who are fortunate enough to be masters of their own time arrange to go on holiday or otherwise temporarily leave the district until road operations are over. For those who must remain at home this period is trying in the extreme. Usually road drilling does not last longer than a week or two, but in special circumstances it may persist for months. During the recent summer in a certain street in Westminster, drilling continued every day except on Sundays and with two or three days of peace occasionally intervening from early in July until well into September; a series of small areas of the roadway were being explored. For those who are confined to their houses by illness, conditions are of course definitely serious. It requires but little imagination to appreciate that the recovery of a case of acute or serious illness might be jeopardised by the deprivation of rest and sleep and the exhaustion caused by constant vibratory noise.
- 6. During September the Medical Officer of Health took steps to investigate conditions at Westminster Hospital while street excavation was in progress. The Secretary of the Hospital hastened to assure the Medical Officer that the City Council had been most considerate of the interests of the Hospital and in consequence the latter did not wish to make any complaints. It was explained that it would be

helpful if an unbiassed statement on the effects of the noise then in progress could be obtained. The following is an extract from the report kindly supplied by the Resident Medical Officer dated 13th September, 1933:—

"At least half of the Hospital was practically sleepless for nights at a time. The chief sufferers were naturally those about to be operated upon and those whose operations had just been performed. At least two cases awaiting thyroidectomy suffered acutely, whilst the many cases of head injuries in the Casualty Ward were to be profoundly pitied. In fact, hospital treatment, medical and surgical, has been seriously interfered with. On one occasion a private patient insisted upon leaving the Hospital owing to the disturbance.

Apart from the patients, I found the resident medical officers suffered considerably. As far as my own duties were concerned, my whole days and nights for about three weeks were never free from the noise of hammering, and I was constantly up at night trying to make things bearable.

Please do not think I am making unnecessary complaints, but six automatic drills working in a line for hours at a time, filling the Surgery, the Wards, and the Resident Medical Officer's Rooms with dust, has rendered life extremely unpleasant."

It will be noted that in addition to noise, dust is alluded to as a cause of nuisance.

- 7. The Medical Officer has consulted the Department of Scientific and Industrial Research and the London School of Tropical Medicine and Hygiene as to the results of any investigations of the effects of rock drills on health. The former body is not concerned with health but expressed willingness to take up the question of research into the maintenance of roads and methods of repairs, &c.
- 8. The London School of Tropical Medicine and Hygiene has been keenly interested on the health aspect for some considerable time. Dr. Crowden, a member of the staff, has been working on the subject and has different types of these drills fitted up in his Laboratory with the stone and concrete medium in which they operate. His conclusions so far are briefly as follows:—
 - (1) Among riveters and boilermakers incurable deafness develops in the course of time. A large proportion of the men are affected and it is due to the concussions of sound and sudden changes of air pressure incidental to riveting in an enclosed space, e.g., between decks in a shipyard. Road drillers on the other hand work in the open and apparently are not subject to deafness.
 - (2) Riveters and boilermakers suffer from the effects of vibration on their hands; a chronic numbness is caused due to interference with the circulation. These effects were largely dependent on cold; coldness of the atmosphere and of the handles of the apparatus. In the case of road workers the air conducted to the drills is conveyed in comparatively short pipes and is, therefore, not cooled in long transit. The handles are not cold and these road workers do not suffer from the disturbance of circulation mentioned above.

Dr. Crowden has not yet investigated the medical records of hospitals to see whether there are any grounds for assuming that complaints of nervous or other diseases are based on the occupation under discussion.

- 9. It is most important to observe that the workers themselves do not receive the main impact of the noise as the sound and percussion waves intensify as they impinge on any high stone buildings surrounding.
- . 10. In his enquiries he found that the men greatly preferred the mechanical drills to the hand pick and hammer. In one instance a body of men threatened to strike because they were asked to go back to the methods of using human energy. Several firms reported that with manual excavation their casualty rate increased noticeably; chipped hands, fragments lodging in the eyes and other injuries were not uncommon. That was the main reason for the men's preference for the mechanical drills.
- 11. The use of silencers diminishes the intensity of vibration but also lessens the efficiency of the instrument. Therefore, in order to complete certain work within a given time it would require additional partially silenced drills for every single unsilenced one. More men would be required and the net result would prove of no advantage because those extra drills would cause quite as much noise as a single unsilenced drill.
- 12. Dr. Crowden has studied the methods of ear stopping used among gun crews in the Navy, and in shipyards and other industries, and showed various types with which he had experimented. One of the most efficient and certainly the cheapest is shown to the Committee. They ought to be distributed among those who are about to be subjected to the noise of road drilling in their close vicinity.
- 13. In December, 1929, the Medical Officer of Health reported on the prevention of noise in connection with a presentment from the Metropolitan Standing Joint Committee. Although the matter under present consideration is limited to "rock drills," yet it may be interesting to recall that no fewer than seven different sources of noise were enumerated on that occasion as being causes of complaint to the Public Health Department. He commented on the fact that the By-laws made by the City Council from time to time to control different types of noise nuisance had been of great public benefit; and the London County Council had also made By-laws for other sources of noise which had also been effective.
- 14. Since those days other and no less obnoxious noises have arisen and some local authorities, notably Edinburgh, have sought powers to prohibit certain noises. There is no doubt that sooner or later public opinion will demand some measure of relief from this growing nuisance.

Summary.

The noise caused by the use of rock drills :-

- (1) Interferes with the work, occupations, or other activities of those in close proximity to the scene of their operations.
- (2) Is definitely harmful to the sick and may even jeopardise the lives of those suffering from acute or dangerous illness.
- (3) Disturbs the rest and sleep of those living nearby and is in consequence prejudicial to, and in some cases, injurious to health.
- (4) Under existing conditions, and so far as can be ascertained at present, is not prejudicial to the health of those operating these instruments.
- (5) Usually lasts in any given locality but for a limited period say one or two weeks and this is an important point in mitigation.

- (6) Is preferred by the workers to hand driven methods of operation.
- (7) Is somewhat diminished by fitting silencers, but to make up for the resulting loss of efficiency more drills must be employed.
- (8) Can be lessened in intensity for the sufferers if they use ear stops. These could be distributed among patients and other susceptible individuals.
- (9) Is only one among the many which are causing much concern. A public movement has been organised to combat this menace to health and quietude.

The Committee might see fit to express an opinion that although the noise caused by the use of rock drills in street works may arise in any given locality for a period of only a few days and may not recur for several years, yet there is evidence that health may be injuriously affected thereby and requests the Works Committee to consider what steps should be taken to effect its diminution.

The Council received the report of the Committees on the 14th December and resolved that representations be made to the appropriate Government Departments with a view to special research being undertaken for the reduction of noise caused by the use of rock drills in street works.

LONDON COUNTY COUNCIL (GENERAL POWERS) ACT, 1928, SEC. 28— REMOVAL OF INFIRM AND DISEASED PERSON TO SUITABLE INSTI-TUTION.

Two cases of this kind, both women, of 67 and 83 years of age, respectively, were reported to the Public Health Committee during the year. In the first case the Medical Officer of Health was authorised to take all the necessary steps under the Act for the removal of the woman to a suitable hospital or other institution.

She suffered from rheumatoid arthritis, lived quite alone, was absolutely helpless, unable to move, and for many months had not been to bed but remained day and night in a chair. Her bodily condition and her rooms became very insanitary and were a serious nuisance to the other occupiers of the house. She resented any medical or nursing care.

Such persons are most difficult to deal with and it is the experience of this Department that when suggestions are made for their removal to an institution so that proper care and attention may be given them they refuse obstinately. Only the service of formal notices make them see reason. This patient declined to listen to any suggestion of removal, and it was only after service of formal notice under the Act that she consented to be removed. She died subsequently in St. Stephen's Hospital.

The second case was brought to the notice of the Council by the London County Council. The woman referred to is blind and in receipt of domiciliary assistance from the London County Council. She was alleged to be partially paralysed and bedridden and, although in need of institutional care, efforts to persuade her to enter an institution had been quite unsuccessful.

She proved not to be bedridden and on each occasion when visited was found to be about her rooms preparing food, &c. Attention is given her by a church visitor and though blind and 83 years of age she occasionally goes out for a walk. Her room was cleansed and redecorated, and as her case did not appear to come within the Act it was decided in the meantime to take no action beyond paying regular visits for frequent observations.

Housing.

General Observations.—The Minister of Health's Circular No. 1331 to Housing authorities in April, 1933, reawakened activity in housing matters which had been slowed down since the autumn of 1931. Emergency conditions of the economic depression and the restriction of national resources had necessarily retarded progress in housing.

On receipt of the Minister's announcement it was at once decided to reconsider the survey of the housing needs of the inhabitants of the City which had been submitted in 1931. In that year the Minister required Medical Officers to report on housing in detail and for that purpose a survey of the whole city was undertaken by the several district sanitary inspectors, each inspecting and reporting for his own area. So far as a general review of housing conditions could be made in the five or six months available, much valuable information was obtained confirming and amplifying the information laid before the appropriate committees in 1930. On that occasion a large scale map of the whole city was prepared, types of properties and their condition of fitness being indicated by different tints, while overcrowding, and underground room occupation were also shown.

The Minister's request for a programme of slum clearance and rehousing indicated a need for up-to-date information, and the Housing Committee decided that a survey on much more detailed lines should be undertaken forthwith. Accordingly one of the district sanitary inspectors (Mr. White) was transferred from his ordinary duties to that of housing survey work solely. His work during the first four or five months was unfortunately much interrupted. The new Rent Restrictions Act, 1933,

had come into force requiring a register of decontrolled dwelling houses to be kept by the local authority, together with the issue of certificates as to registration or non-registration of decontrolled tenancies. These duties were assigned to the Public Health department. Additional clerical assistance was engaged for the purpose, but much of the work, especially relating to the sanitary conditions of the houses coming within the purview of this Act necessarily fell to a sanitary inspector. The register was closed on 18th October, and up to that date the inspector allocated to housing had given much of his time to the supervision of the work entailed by the Act. Later his housing work was further interrupted by the need for a special investigation in connection with an outbreak of infectious disease of unusual origin. As by the end of the year he had surveyed only 108 houses it was proposed to increase the staff by an additional temporary sanitary inspector and to rearrange the duties of other inspectors so that there would be three inspectors wholly engaged on survey work while additional clerical staff would be employed for the purpose of recording the information obtained.

The work of a housing survey is liable to be delayed by various circumstances. Tenants are not always at home and this entails written appointments and returning to houses already surveyed to inspect perhaps a single room previously found closed. There is also repair of sanitary defects observed in the course of survey for which notices have been served. These require re-inspections and not infrequently interviews with owners, builders and others interested. The question of the occupation of underground rooms needs careful investigation and appropriate action to ensure that, while having due regard to available rehousing facilities, offences relating to underground occupation shall not be permitted to continue. These matters tend to interfere with the progress of a survey and in the near future other sanitary inspectors will be detailed to follow up the various items which result from a survey and require attention.

The value of a housing survey is materially enhanced by its being completed within a reasonably short period. Otherwise, while as regards one district information as to conditions may be up to date, in another, having been surveyed several years previously, the circumstances of occupation may have so altered that they have no relation to those obtaining at the completion of the survey. It is therefore of very great importance that any report of the housing of the area should reflect conditions existing throughout the entire area during a given period, say a year.

The detailed survey now proceeding has emphasised several features to which attention has been drawn from time to time in previous reports. There is the fact, proved beyond all doubt, that the types of occupants and their methods play a predominant part in creating housing conditions, good or bad. Even in clearance areas where the general structure of houses is collectively senescent and beyond profitable repair, one finds interiors reminding one of those works of de Hoogh and his Dutch contemporaries, cleanliness and brightness abounding; while in the same row one may enter to find dirt, drabness, and muddle. There is a distinct tendency on the part of voluntary housing enthusiasts to report cases of the latter type as "bad housing" and to plead for such to be rehoused. They are not cases of bad housing conditions but of bad housing habits. The amateur housing visitor may be unable to estimate real defects but is naturally influenced by general impressions supported with much hearsay. The personal touch of good housing management goes a long way to prevent, and often does cure, these evils.

The importance of Housing Management.

Housing by-laws set up good housing principles, but no amount of meticulous reinspection short of a constant sanitary patrol will ever ensure those principles being observed from day to day. Some tenant may omit to open his bedroom window during the prescribed period and thus render himself liable to prosecution, but it would require very patient observation to catch the offender in delicto flagrante. The problem of bad housing has largely arisen from lack of proper management. Management implies not only care and repair of the structure but also supervision of the occupants to prevent misuse of the house and its fittings. When one considers the number of ancient buildings in this country of all types which have withstood the stress of hundreds of years by wise reconditioning and prompt repairs, is it too much to assume that the average house if properly cared for need not degenerate to such an extent that it can be made fit for habitation only at an excessive cost. Even now in the same street can be found properties of similar type and age, one group, under intelligent management, showing no sign of structural decay or dilapidation, while the others hardly managed at all except for rent collection, are constantly the subject of repair notices and come under the category of "slum houses." But can good management supply those amenities which are lacking in old tenement houses; the absence of separate sanitary conveniences, cooking and washing facilities and food storage? These needs nowadays form the grounds on which many families appeal for better housing. In some instances these

amenities can be supplied, and with the gradual emergence of decontrol there is evidence that some of them are being installed even in old tenement houses. As regards overcrowding, under a good system rooms are not let to families unless conditions are consistent with legal space and proper separation of sexes. Here and there perhaps instances occur of children reaching adult age in too restricted dwellings, but by good management these are dealt with by transfer as vacancies arise. Similar measures are applicable to underground rooms. Where good management prevails the legal requirements are known and observed. It may be truthfully said that where such schemes of sound co-ordinated property management are in force the dwellings cause little anxiety to those who administer the laws of housing.

Departmental Committee on Housing.

This Committee, appointed on the 6th March, 1933, under the Chairmanship of the Right Hon. the Lord Moyne, D.S.O., issued its report in July of the same year.

The terms of reference of the Committee were to consider and report :-

- (a) What, if any, further steps are necessary or desirable to secure the maintenance of a proper standard of fitness for human habitation in working class houses which are neither situate in an area suitable for clearance under Part I of the Housing Act, 1930, nor suitable for demolition under Section 19 of that Act; and
- (b) What, if any, further steps are necessary or desirable to promote the supply of houses for the working classes, without public charge, through the agency of public utility societies or other bodies subject to similar limitations operating in particular areas or otherwise.

Evidence was taken from a number of important bodies, including the Metropolitan Boroughs' Standing Joint Committee and private individuals; the Committee also visited properties in various London Boroughs.

The report is of a comprehensive nature and extends over some 70 pages, finishing with a summary of the recommendations of the Committee.

In this brief reference it is not possible to deal in detail with the evidence and recommendations, but the following may be taken to represent a summary of the general scheme of the proposals:—

(1) Local Authorities should be given compulsory powers and encouraged to acquire, for reconditioning, working class

houses which are not in all respects fit for human habitation but can be made fit, and to which a probable life of at least 80 years can be given.

(2) Where an approved Public Utility Society exists or can readily be formed, the houses should normally be acquired on behalf of the Society who will repair, improve and manage them.

(3) In the absence of such a society, the Local Authority should be empowered to lease the houses to House Management Commissioners, to be appointed by and be responsible to the Local Authority.

(4) Where neither of the alternatives referred to in (2) and (3) above is practicable, the Local Authority should be empowered to

hold, repair and manage the houses itself.

(5) Management should be based upon the Octavia Hill system.

(6) In suitable cases the Local Authority or Public Utility Society should be authorised to demolish the acquired houses with a view to obtaining a rehousing site.

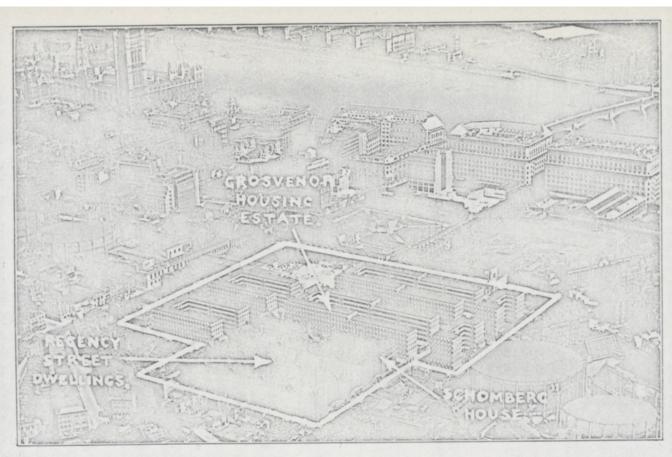
(7) Local authorities to have power to acquire fit properties for the purpose of securing a convenient area for management or to

facilitate ultimate redevelopment.

It is understood that the Minister contemplates introducing a Bill in the next session after discussion with Housing Authorities to embody such of the recommendations of the Report as may prove generally acceptable.

Housing Schemes of the City Council.

Grosvenor Housing Scheme.—By the end of 1933 a further block had been completed and was ready for occupation, so that 520 dwellings of the original 604 contemplated are now in use. There remains only Block C, consisting of 84 flats, to be completed in 1934. It will be remembered that the housing accommodation in this scheme was based on the number of households on the Millbank estate on the night of 6th January, 1928. The passage of time, bringing removals from the district and other changes in the constitution of families, has considerably reduced the number of tenants who were entitled through the Millbank Act, 1929, to be rehoused in the new estate. There has consequently been set free a number of flats, some completed and others to be built, which will be available for rehousing purposes, thus providing additional accommodation. Tenants in the older dwellings will have an opportunity of being transferred to the new, thus creating vacancies for the inhabitants of declared clearance areas and other cases of bad housing.



Aerial photograph of the Grosvenor Housing Estate, including the site for Block "C" (616 flats); Regency Street Dwellings (343 flats); and Schomberg House (77 flats).



Aerial photograph of the Ebury Bridge Housing Estate (220 flats); the site of the proposed Extension to the Estate (296 flats); and Walden House (40 flats).

Ebury Bridge District—Proposed additional accommodation.—Towards the end of the year a scheme for the erection of 296 flats was under discussion. The site adjoins the Ebury Bridge Housing Estate and lies to the south of it. The area of land, some 3·3 acres in extent, belongs partly to the Council, while the remainder extends over Ross Street and a few adjoining properties. The existing cottages in Ross Street are regarded as unfit for habitation and would have become the subject of a clearance scheme some three years ago had circumstances been favourable. A clearance order was made on 20th July, 1933, and during 1934 the entire area will be cleared of houses. The erection of the new flats will then proceed rapidly.

Slum Clearance and New Housing.—Some critics have found grounds for regret that housing subsidies are now confined to slum clearance, but surely the kernel of the housing problem is the riddance of slum houses. It is in the slum houses that one finds by far the greatest proportion of overcrowded cases. In order to qualify for the Government subsidy new accommodation must be available or provided and must be sufficient to house families in a capacity of 12 persons per room and at rents which the slum dwellers can pay. Is this not the equivalent of additional housing for overcrowded slum dwellers?

The Objects of New Housing in Westminster.—These are to provide for the dwellers of scheduled clearance areas and for those families living in over-crowded or otherwise illegal conditions who require to live near to their work in Westminster. It must be assumed that they are unable by reason of lack of resources to obtain suitable accommodation otherwise than in dwellings owned by the municipality, the rent of which is insufficient to meet annual charges, the resulting deficit being met out of public funds. It is fantastic to imagine that housing can and should be provided for all who work in Westminster. That would envisage housing a population of perhaps half a million people and would require the replacement by working class dwellings of the business places where the people themselves work. This surely is reductio ad absurdum.

Clearance Areas.—In June of this year four areas comprising a total of 68 houses were reported by the Medical Officer of Health to the City Council as areas which should be cleared at the earliest opportunity. They are:—

- (1) Tylers Court.
- (2) Ross Street.
- (3) Douglas Place.
- (4) Trinity Mews.

A clearance order was made by the Council in respect of the Ross Street area on the 20th July, and the others will be dealt with when the necessary alternative housing accommodation is available for the occupants.

1, Richards Cottages, Demolition Order.—Upon representation by the Medical Officer of Health that this small dwelling house was in such a state as to be unfit for human habitation, and not capable at a reasonable expense of being rendered so fit, the Council on the 9th November ordered its demolition.

This house was situated in a yard at the rear of houses in Douglas Place and Rampayne Street and was included in the Douglas Place area, one of four areas referred to above, reported to the Council in June as areas which should be cleared.

Underground Rooms—Rehousing.—The number of underground rooms found in illegal occupation was 90. Families rehoused from illegally occupied basements during the year were as follows:—

By the City Council							17
By the L.C.C							8
By other Housing	other Housing Authorities		r found	acco	mmod	ation	
themselves							22

The existing law relating to underground rooms is based on the broad principle that unless these rooms conform to certain standards they should not form the only dwelling of a family. The Public Health Act of 1891 established the principle that they should not be separately occupied, that is to say, those rooms, although not conforming to certain sanitary requirements, could still be used for any or all dwelling purposes so long as the occupant had another room in the house which did conform and was in the same letting.

The Housing and Town Planning Act, 1909, went further and required underground rooms habitually used as sleeping rooms to conform to standards, certain of which were laid down in regulations to be made by the local authority. Thus, no matter whether the occupants had rooms on other floors of the house or not, the habitual use for sleeping purposes of any underground rooms which did not fulfil the requirements in force constituted an offence. The fundamental principle was not that it was particularly dangerous to sleep in an underground room but that there should be restriction of user of illegal underground rooms. When accommodation is both expensive and scarce a room that is slept in too often is a room that is also dwelt in. In large private dwelling houses single basement rooms sometimes form the sole dwelling and sleeping quarters of servants,

The Housing Act of 1930 went still further and gave power to close part of a building in separate occupation for all purposes of habitation. This included underground rooms and extends the provisions of the Public Health Act. By this section an underground room or any room in fact which was irremediably damp, defective or otherwise insanitary can be closed if separately occupied. It does not matter whether the room complies with either of the former statutes on structural points or not. The drawback is that such a room if closed is closed for all dwelling purposes. It cannot be used for kitchen or scullery purposes or for washhouse, drying room, &c. In such circumstances the unavoidable result would be for the room to become a harbourage for dirt, rubbish, vermin, perhaps even rats; dampness and mustiness would develop thus becoming a source of nuisance to the whole house. Experience of basement rooms closed many years ago has confirmed this opinion.

The occupation of underground rooms continues to provoke discussion, and particular reference is sometimes made to the return of occupied underground rooms which appeared in the late Dr. F. J. Allan's report for 1923. Once again does it appear necessary to quote the late Medical Officer of Health (Dr. Allan) on this subject:—

1923. "Occupied Basements.—The County Council asked to be supplied with information as to the number of houses in Westminster in which basements were made use of for dwelling purposes, whether let separately or as part of the rest of a house. The reply sent to the four questions asked is appended:—

(a) Number of basements used for dwelling purposes	6,914
(b) Number of basement dwellings with ceilings at or below the street level	2,620
(c) Number of basement dwellings in which the width of area in street does not exceed 3 ft	625
(d) Number of basement dwellings in which the width of area	
in street does not exceed 4 ft	636

Nearly half of the number under (a) are in the Victoria Ward and a third are in Mayfair and Knightsbridge districts."

In his final report (1924) he felt that his statement had been misinterpreted. He says:

"Statements have appeared in the press during the last year making allegations as to the existence of slum areas and slum conditions in Westminster. It is a great help to a local authority to have the inhabitants take an intelligent interest in sanitary matters, but the object is defeated when exaggerated statements are made. Some such statements appear to be due to a misunderstanding of the facts upon which the statements are made. For instance, a quotation is given from my last Annual Report that in 6,914 houses the base-(9489)

ments were used for dwelling purposes and on this the suggestion is made that these basements are the only rooms occupied and that their occupation is contrary to law.

In a number of instances the basements constitute the dwelling, and their use as such is legal as they comply with the requirements had down by Acts of Parliament and By-laws made thereunder. The other half are basements which are used in conjunction with the rest of the house, most of them being mansions in Mayfair, Belgravia and Knightsbridge. As I have already stated the number of basements found to be illegally used last year was seven."

The law relating to underground rooms has probably given the experts who drafted it as much thought as any part of housing legislation. The limitations of existing measures have already been alluded to, but it may seem surprising that while in theory these measures do not seem to go far enough it is actually found in practice that in some cases underground rooms which do not comply with the law as regards window space in relation to floor space and level of floor in relation to pavement, make better dwellings from every point of view than many underground rooms which fulfil all requirements.

Despite such exceptional conditions it should be commonly accepted as a general principle that rooms, the ceiling of which is less than 3 feet above the pavement level cannot, unless the area or yard adjoining gives at least 6 feet of unobstructed space, measured at right angles from the window, be suitable as the sole dwelling of a family. Even then there must be a provision for sufficiently large window space, and other sanitary requirements relating to prevention of dampness, access to natural light and air in the passages, &c. The time may come when on considerations such as these, the prohibition of acparate occupation and the use for sleeping purposes, not only of an habitual character, will be based. It would be of great advantage to local authorities in London who administer the law relating to underground rooms if restrictive provisions somewhat on the lines of those just outlined were embodied in the London Building Act. Owners and their architects and builders would then be aware in advance of any restriction of user.

Policy re Underground Rooms.—For the past three years the policy approved by the Council has been steadily pursued. It was felt that in view of the increasing opportunities for rehousing provided both by the L.C.C. and the City Council the time had come when a more strict application of the law should be enforced. It had been the custom for many years to warn owners against reletting in illegal occupation, but in some cases warnings had become disregarded, the invariable reason given for such lapses being the scarcity of working class accommodation. The present system described in last year's report of obtaining undertakings

from owners and others interested in the premises has been continued with satisfactory results. So far only in those cases where underground rooms have become vacant and where an undertaking not to relet for sleeping purposes has been accepted but not observed does the necessity for a closing order arise. Closing orders entail a daily penalty for non-observance. As the undertakings given were all adhered to no closing orders were made during the year in review.

The Council itself is constantly relieving illegal underground dwellers by rehousing them in its own flats and it would be intolerable if such underground rooms were again to become illegally occupied and to cause further applications for rehousing.

During the year written undertakings in respect of 149 premises were given under the Housing Act, 1930, sec. 20, by owners and also in many cases by tenants subletting, that rooms in basements which were contrary to the Act would not be relet or used as sleeping places.

Fourteen notices were served re illegal occupation. The number of underground dwellings found to be illegally occupied under the Public Health (London) Act, 1891, sec. 96, during 1933, was 31, while underground sleeping rooms occupied contrary to the City Council's regulations numbered 59, a total of 90.

Twenty-eight underground rooms discovered during the year to be occupied contrary to the Public Health (London) Act, 1891, sec. 96, or to the Council's regulations, have ceased to be occupied illegally. In addition, illegal occupation in 19 cases recorded last year has also disappeared.

Housing Problems in Westminster.—The dwellings which present unsatisfactory features are of three main types—(a) The cottage properties, rarely overcrowded but generally suffering from age, decay and dampness. (b) Tenement houses sublet to families either in single rooms or more showing overcrowding sometimes, basement occupation nearly always, but not necessarily illegal; the main troubles in the tenement houses are dampness and darkness of basements, the lack of convenient cooking, washing and sanitary arrangements upstairs. (c) The combined tenement dwelling with shop or work place; in these the dwelling part is often more dilapidated than the wholly tenement house and they can only be dealt with by nuisance law. They are not solely working class houses and the by-laws for tenement houses are not applicable. Frequently in the occupation of non-British citizens, their number, owing to the encroachment of purely business premises, is fortunately decreasing, particularly in the Northern districts of the city.

н 2

(9489)

The small, aged, and decaying cottage properties are anachronisms in the City of Westminster where land is so scarce and so valuable. They are occupying sites on which where one family is housed now, four or five could be accommodated if the site were released and developed to full advantage. The main factor in stifling development is the operation of protection given to controlled tenants. In many instances business premises or residential flats could also be erected on these sites, thus raising rateable value; some measure of compensation for the annual loss which the local authority must bear when it provides flats for the working classes.

The large tenement houses, most of them structurally sound, require improvement in internal arrangements. Their lack of amenities and their basements require some comprehensive measure whether by means of public utility societies in co-operation with the local authority or by the owners themselves with the advice of the local authority. Decontrol implies the addition of amenities required, in the tenement house bylaws, but suspended during the period of control. Decontrol and added amenities will, almost certainly result in higher rents. It is most unlikely that these tenement houses in Westminster once decontrolled and improved will remain working class houses. Already in Victoria Ward at the present time some houses, formerly controlled working class tenements, are now, in parts, becoming decontrolled flats with sinks, cooking facilities and separate w.cs. The rents are considerably higher than those of working class dwellings.

Re-housing Operations.—During the year 186 families were rehoused by the City Council and 82 by the London County Council, making a total of 268 families.

The estates on which they were accommodated were as follows:—

City Council's Estates.

			Families.
Ebury Bridge		 	 22
Grosvenor Housing Sc	heme	 	 89
Regency Street		 	 72
Schomberg House		 	 -
Admiral House		 	
Walden House		 	 1.
Marshall Street		 	 _
St. James' Dwellings		 	 2
			-
Total		 	 186

London County Council Estates.

				Families.
St. Helier, Morden			 	12
Becontree, Essex			 	13
Wormholt, Hammersm	ith		 	. 12
Downham, Lewisham			 	2
Bellingham, Catford			 	3
Watling, Edgware			 	3
Millbank, L.C.C			 	14
Streatham Hill			 	1
Stockwell			 	5
Bourne Estate, Clerker	nwell		 	3
Clapham Park			 	4
Glebe Estate, Cambery	well		 	. 2
Battersea Bridge			 	1
Castelnau, Barnes			 	2
China Walk, Lambeth			 	1
Drury Lane			 	2
Norbury			 	1
Oliver Goldsmith Esta	te, P	eckham	 	1
Total			 	82
				The second secon

Pulford Street Site (Tachbrook Estate).—Building operations in connection with this Scheme, details of which were given in last year's report, were started early in the year. By December, two blocks of 15 flats each had been completed and two others containing 40 and 15 flats respectively were well advanced. The two completed blocks were occupied early in the New Year, by tenants of the Trust's houses in Pulford Street, which were to be demolished.

Flats in Causton Street.—A second block containing 16 self-contained flats of two and three rooms was erected during the year by the Ecclesiastical Commissioners, on a site at the corner of Regency Street. The flats are similar to those described in last year's report and form a small new estate of 32 dwellings.

Overcrowding.—During the year 12 new cases of illegal overcrowding were discovered, and 22 cases which were overcrowded in the social sense. By means of the housing schemes of the City Council and of the London County Council and other bodies some 112 cases of overcrowding were relieved. This figure includes cases recorded in preceding years.

HOUSING STATISTICS.

1. Inspection of Dwelling Houses during the Year.	
(1)—(a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing	C
Acts)	7,090
(b) Number of inspections made for the purpose	16,460
(2)—(a) Number of dwelling-houses (included under sub- head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	1,128
(b) Number of inspections made for the purpose	4,953
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	21
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habita-	
tion	761
2. Remedy of defects during the year without Service of formal Notices. Number of defective dwelling-houses rendered fit in conse-	
quence of informal action by the Local Authority or their Officers	234
3. Action under Statutory Powers during the year.	
A.—Proceedings under Sections 17, 18 and 23 of the Housing Act, 1930.	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	0
(2) Number of dwelling-houses which were rendered fit after service of formal notices:—	
(a) By owners	0
B.—Proceedings under Public Health Acts.	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be	
remedied	928

(2) Number of dwelling-houses in which defects were remedied after service of formal notices:— (a) By owners	925*
C.—Proceedings under Sections 19 and 21 of the Housing Act, 1930.	
(1) Number of dwelling-houses in respect of which Demolition Orders were made	1
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	1
(3) Number of dwelling houses voluntarily de- molished	15
D.—Proceedings under Section 20 of the Housing Act, 1930.	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	0
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	0
(3) Number of separate tenements or underground rooms in respect of which undertakings were accepted	149

INSPECTION AND SUPERVISION OF FOOD.

The food industry takes an unusually prominent place among the commercial activities of the City of Westminster and situated within its boundaries are places which are known practically all over the world, such as "Covent Garden," "Soho," and "The West End," each in its way possessing some reminiscent flavour of food. The traders in Covent Garden Market handle over 1,000,000 tons of food annually and many individual restaurants serve as many as 30,000 or more meals daily. It is possible to purchase in Westminster foods and fruits from almost every corner of the earth—birds nests from China, whale steaks from Canada or Japan, mangoes from India as well as produce from many other lands

^{*} Three dwelling-houses were the subject of legal proceedings for non-compliance with the requirements of Statutory Notices.

beyond the seven seas, at one time regarded as rarities but now accepted as every day necessaries.

There were purchased for analysis during the year 1,815 samples of different foods and 3,494 visits were paid to premises where food is sold, stored or otherwise handled for the purpose of observation as to condition, cleanliness, state of premises and methods of working.

New legislation relating to foods and drugs passed into law during the year included the Slaughter of Animals Act, Public Health (Cleansing of Shellfish) Act, 1932, and the Pharmacy and Poisons Act.

The main provisions of the Slaughter of Animals Act, 1933, are that every animal slaughtered in a slaughter-house or knacker's yard shall be instantaneously slaughtered or instantaneously rendered insensible to pain until death intervenes. Special reservations are made to conform with religious susceptibilities. All slaughtermen must be licensed.

There are, however, no slaughter-houses in Westminster.

PHARMACY AND POISONS ACT, 1933.

It is only Part II of this Act which concerns local authorities, on whom is imposed the duty of keeping a register of persons other than registered pharmacists, who are entitled to sell poisons included in Part II of the Poisons List. The local authority would have power to inspect and to take samples for analysis. While the Bill was before Parliament it was pointed out that the Metropolitan Borough Councils, as Food and Drugs Authorities, were already carrying out similar duties in connection with various statutes relating to food administration. An amendment constituting the Metropolitan Borough Councils local authorities for Part II of the Bill was accepted.

Part II of the Act will come into force when the Poisons Lists have been compiled by the specially constituted Poisons Board to be set up under the Act. It was contemplated that its administration would be referred to the Public Health Committee and that the Medical Officer of Health and the Council's Food Inspectors would be appointed the appropriate officers to carry out the provisions.

LONDON COUNTY COUNCIL (GENERAL POWERS) ACT, 1932.
Part II of this Act requires the registration of:—

- (1) Premises used or proposed to be used for the sale, manufacture for sale or storage of ice cream or similar commodity.
- (2) Premises in which the manufacture of sausages, potted, pressed, pickled or preserved meat, fish or other food intended for sale takes place or is intended to take place.

There are 162 such premises on the register, and the number of inspections made will be found under the heading of meat vendors and ice cream premises.

During the year 60 applications for registration were received; of these 14 were deferred pending the installation of adequate apparatus for cleansing and sterilization purposes and other sanitary improvements. All the applicants were duly registered by the end of the year.

AGRICULTURAL PRODUCE (GRADING AND MARKING) ACT, 1928.

This Act inaugurated the National Mark Scheme.

Regulations are made by the Minister of Agriculture and Fisheries prescribing from time to time grades for "Home" produce. Up to the present 24 regulations have been made. If the quality of the produce is consistent with these grades the National Mark may be affixed to the package.

Orders have been made covering a wide range of articles including vegetables, fruits, salads, meat, eggs, cider, malt and honey.

The administration of these orders by the City Council consists in seeing that food vendors observe the requirements of labelling and that the National Mark is not applied to foods that are not of the prescribed standard.

MERCHANDISE MARKS ACT, 1926.

The main provision of this Act is that goods, for which orders have been made by the Privy Council, imported into this country, must on exposure for sale bear an indication of the country of origin. The Food Inspectors carry out the purposes of these Acts in the course of their routine food inspections, and during the year made 503 observations as to marking, &c. One or two complaints were received that imported tomatoes were not marked with the country of origin, &c. The containers were in fact properly marked, but the Act requires the contents also to be labelled. This omission was duly rectified.

ARTIFICIAL CREAM ACT, 1929.

There are no premises in the City subject to the provisions of this Act, but a considerable amount is made in restaurants for consumption on the premises; the Act does not apply in such cases.

MILK AND DAIRIES (CONSOLIDATION) ACT, 1915.

Tubercle in Milk.—The City Council resolved to have 10 samples taken during the financial year. Accordingly 4 samples of milk were taken from 1st April to 31st December for examination as to the presence

of tubercle bacilli. The milk was taken from roundsmen and shops in the ordinary course of delivery from purveyor to customer. Tubercle bacilli were not found in any of these samples.

MILK AND DAIRIES AMENDMENT ACT, 1922.

Under the Milk (Special Designations) Order, 1923, made under this Act the Council issued licences for the sale of:—

Certified milk			 	 9
Grade A (Tuberculi	n tested)	milk	 	 14
Grade A milk			 	 9
Pasteurized milk			 	 26

Samples for bacteriological examination are taken by the Council's inspectors by arrangement with the Ministry of Health, and the reports are sent to the Council as well as to the Ministry. 13 samples of Certified milk were requested to be examined bacteriologically by the Ministry of Health, two of these had a bacterial count higher than that allowed by the Milk (Special Designations) Order. One sample contained 96,000 bacteria per c.c. and the other 850,000 instead of the permitted maximum of 30,000. Suitable action in regard to the producer was taken by the Ministry. The local authority has no power to deal with any infringements by a producer of certified milk.

The remaining samples were found to comply with the bacteriological standards of the order.

Pasteurization of milk is not undertaken at any premises in the City.

MILK AND DAIRIES ORDER, 1926.

Registration of Dairymen and Dairy Premises.—An increasing number of shopkeepers are taking up the sale of milk in sealed containers, either waxed papier maché cartons, or bottles. Premises where milk is not sold otherwise than in sealed receptacles as received need not be registered with the Local Authority, although the purveyor must be registered.

The following table shows the number of persons and premises registered with the Council for the sale of milk during the year.

		Premises.	Persons.
Registered to 31st December, 1932		177	193
Registered during year		2	25
Removed from register (ceased or transf	ferred		
business)		3	9
Registered to 31st December, 1933		176	209

The inspectors paid 399 visits to milk shops and dairies during the year. Three notices were served in respect of minor defects, which were duly rectified.

An itinerant vendor was summoned for selling milk in Westminster, not having been registered in accordance with the above Order. The summons was dismissed under the Probation of Offenders Act, and defendant ordered to pay £1 1s. costs.

A milk roundsman was summoned for filling bottles with milk and sealing them in the street instead of on registered premises as required by the Order. He was fined 40s.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Analysis of Milk Samples.—The percentage of adulterated samples since 1920 is given in Table I below.

The legal minimum standards for milk fat and non-fatty solids as laid down in the Sale of Milk Regulations, 1901, are 3 per cent. and 8.5 per cent. respectively.

Grades of quality for milk have been set up by the analysts according to the percentage of milk fat. They are:—

Good quality: Over 3.8 per cent. of fat.

Fair quality: Between 3.3 per cent. and 3.8 per cent. Poor quality: Between 3 per cent. and 3.3 per cent.

Adulterated: Below 3 per cent. fat or 8.5 per cent. non-fatty solids.

The results of the samples taken in each of the two districts of the City during 1933 are given in the following table:—

TABLE I

		Good	Quality.	Fair	Quality.	Poor	Quality.	Adulterated.		
District.	Total.	No.	Per cent.	No.	Percent.	No.	Per cent.	No.	Per cent	
North South	457 450	84 137	18·4 30·4	322 274	70·4 60·8	47 32	10·3 7·2	4 7	0.9	
1933	907	221	24.4	596	65.6	79	8.8	11	1.2	
1932	921	452	49.1	426	46.2	35	3.8	8	0.8	
1931 1930	910 910	582 396	63.9	285 431	31.3	39 62	6.8	21	2.3	
1929 1928	867 904	323 410	37·2 45·3	422 373	48·6 41·2	79 101	9.1	53	6.1	
1927	914	511	54.1	345	36.5	71	7.5	17	1.8	
1926 1925	910 970	502 489	55·1 50·4	298 368	32·7 37·9	100	10.9	10	1.0	
1924 1923	994	507 458	51·0 45·9	363 368	36.5	105	10.5	19 22	1.9	
1922	998	493	49.4	338	33.8	138	13.8	29	2.9	
1921	977 987	449 321	45·9 32·5	362 400	37.0	131 236	13.4	35 30	3.5	

It will be noticed that the number of samples of milk reported by the analysts to be of good quality during the year is much below that of the previous 13 years. This is undoubtedly due to the phenomenally dry season. The great scarcity of grass in the summer and autumn presumably led to cows being poorly fed except in the few cases where the farmers made up the grass deficiency by cattle cake and other foods which in a normal season are not required till winter. This low fat content of milk has been fairly general throughout the country.

It is not the first time in these reports that the superiority in the quality of the milk in the Southern district has been noted.

Of the total 907 samples of milk taken during the year, 32 were obtained on Sundays. These latter all proved genuine on analysis.

Adulterated Samples of Milk .-

Action taken.

275 N. 6.0 per cent. fat abstracted.

Warranty proved. Summons dismissed.

289 N. 5.7 per cent. fat abstracted. This was a sample taken in course of delivery to a milk seller from whom Sample No. 275 N. had been purchased and who had given notice under Section 21 and the second schedule of the Food and Drugs (Adulteration) Act, 1928. The wholesalers were summoned and pleaded a warranty. They were not able to rely upon the warranty as they had not given the requisite notice for a sample to be taken at the place of delivery of the milk to them.

Having regard to the firm's previous good record the magistrate dismissed the summons under the Probation of Offenders Act, on payment of £12 costs.

35 N. 0.47 per cent. of added water.

No action taken.

59 N. 8.5 per cent, of added water.

Milk seller fined 10s.

62 S. 6 parts of formaldehyde per million parts of milk.

This was an informal sample obtained from a school. Formalin had been used as a disinfectant spray in the school. Subsequent samples proved to be free from contamination.

119 S. 4.0 per cent. fat abstracted.

Vendor cautioned.

325 S. 2.0 per cent. fat abstracted.

Vendor cautioned.

415 S. 13.0 per cent. fat abstracted.

The vendors requested that samples be taken at their farm from a corresponding milking. Three samples were taken direct from the cows at the time of milking by the inspector of the district in which the farm was situated, and they proved on analysis to be:—

417 S. Genuine.

418 S. Apparently contained 2.5 per cent, added water.

419 S. Apparently had 17.0 per cent. of the original fat abstracted.

In view of these results the summons was withdrawn and the matter reported to the Ministry of Agriculture.

370 S. 36.0 per cent. fat abstracted.

This was an informal sample obtained from a school. Subsequent samples proved to be genuine, and the deficiency was no doubt due to lack of mixing.

Schools in the City.—In response to a special request from the County and School Medical Officer samples of milk about to be delivered to the one County Council hospital in the City (Sheffield Street), and the 18 schools have been submitted for chemical analysis. The work is carried out in the ordinary course of milk sampling, informal samples being taken. Should an informal sample prove deficient, formal sampling would then follow with a view to legal proceedings.

113 samples of milk were taken, and on analysis were graded as follows:—

Good. Fair. Poor. Adulterated. 18 74 19 2

The nature and extent of adulteration and action taken are given in the preceding table.

Condensed Milk Regulations, 1923 and 1927.

Forty-three samples were taken and found to be genuine and properly labelled.

DRIED MILK REGULATIONS, 1923 AND 1927.

Two samples were taken and found to be genuine and properly labelled.

Public Health (Preservatives in Food) Regulations, 1925, and Public Health (Preservatives in Food) Amendment Regulations, 1926 and 1927.

Only the following articles may contain preservative which must be either sulphur dioxide or benzoic acid as specified in the regulations:—sausage and sausage meat, fruit and fruit pulp not dried, dried fruit, unfermented grape juice and non-alcoholic wines, cordials and fruit

juices, jam, candied peel, sugar, corn, syrup, gelatine, beer, cider, alcoholic wines, sweetened mineral waters, brewed ginger beer, coffee extract, pickles and sauces made from fruit or vegetables.

A sample of ginger wine was taken and on analysis found to contain 70 parts of sulphur di-oxide per million and 300 parts of benzoic acid per million. The Public Health (Preservatives in Food) Regulations allow either sulphur dioxide (350 parts per million) or benzoic acid (600 parts per million) to be used as a preservative in ginger wine, but not both. It would appear that the ginger, prior to importation into this country, had been either treated with sulphurous acid or dusted with calcium sulphate.

The manufacturers were communicated with and stated in reply that they used benzoic acid as a preservative. The facts were reported to the Ministry of Health to draw attention to what appeared to be an anomaly in the provisions of the Regulations.

TABLE II.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Samples purchased under the Food and Drugs (Adulteration) Act, showing results of Analysis and subsequent Proceedings for year 1933.

Number.	Article of Food.	Number of sam- ples purchased.	Genuine,	Adulterated.	Prosecutions.	Convictions.	Withdrawn or dismissed,	Fines.	Costs.
	D.V.	1				1.	NOW	£ s. d.	£ s. d.
1	Baking Powder		1	-	-	-	-	- 0. 0.	2 o. a.
2	Butter		144	1		-	-		
3	Caviare		10		-	1-		12.	
4	Cereals		9			-			
5	Cheese		9			-	-		
6	Cocoa	8	8	-	-	-	-		
7	Coffee, Chicory, &c.	9	9		-	-		-	
8	Condensed Milk		43		-	-	_		THE PERSON
9	Confectionery	2	2	-	-	-	-		
10	Cordials		46	-	-	-	-	_	
II	Cream	72	72	-	-	-		100 2230	
12	Culinary Colours	4	4	-	-	-			
13	Culinary Flavours	1	1		-	-	1		
14	Dried Milk		2	-	-	-			
15	Drugs	31	29	2	1	I		1 0 0	2 2 0
16	Fish	I	1	-	-	-	-	-	
17	Fish Paste	22	21	I	-	_	_	_	No.
18	Fish (Tinned)	8	8		_	-			
19	Flour		7	-	-	_	-		
20	Fruit (Pres.)	55	55	-	_	-	-	_	
21	Ice Cream	16	16	-	_	_		Tor	
22	Jams and Preserves	44	44		-	-	_		
23	Margarine	47	47	-	_	_		100	
24	Meat Extract	2	2	-	_	_	_		
25	Meat Paste		29	1		-			
26	Meat Pies	26	- 26		_	_			
27	Milk	907	896	H	4	1	3	0 10 0	12 0 0
28	Mint Sauce	3	2	1	1	1	1	-	
29	Olive and Salad Oils	34	34	_	-	-	-	_	
30	Pickles and Sauces	2	2	_	_	-	_		
31	Sausages	49	49	-	-	_	_		
32	Spices	6	6	-	_	-	-		The state of the s
33	Spirits	70	68	2	1	1	_	5 0 0	
34	Tea	17	17	-	_	_	_	_	
35	Vegetables (Pres.)	37	37	-	_	_	_		
36	Vinegar	15	15	_	_	_		William In San	
37	Wine	25	25	-	-	-	-	_	_
		1,815	1,796	19	7	3	4	6 10 0	14 2 0

The Council had given authority for 1,800 samples of food to be purchased during the year; authority was also given for an additional 25 samples of foods other than milk to be taken if necessary.

Butter.—145 samples were taken. One of these contained 16·1 per cent. of water, the maximum amount of water allowed in butter being 16 per cent.; No action taken.

Drugs.—31 samples of various drugs were taken during the year. Two samples of ammoniated tineture of quinine were found to be deficient in ammonia. One of these was purchased informally. A formal sample was obtained and the vendor was fined £1 and ordered to pay £2 2s. costs.

Fish Paste.—22 samples were taken. One sample was found to contain 0.16 per cent. of boric acid. As this was an informal sample and no further sample of the same brand being available, no action was taken.

Meat Paste.—30 samples were taken. One was found to contain 50 parts of sulphur dioxide per million parts of meat paste. The vendor of this sample was cautioned.

Mint Sauce.—3 samples were taken. The analyst reported on one sample that 50 per cent. of the leaves were leaves other than mint. The defendants admitted the possibility of there being a small quantity of foreign leaves. The third portion was submitted to the Government chemist who reported it to be genuine mint sauce. The summons was therefore withdrawn. The obvious comment is that in dealing with a substance of this sort where the liquid must be shaken before decanting, it is impossible to ensure a uniform suspension of leaves in each of three portions of the sample.

Spirits.—70 samples were purchased consisting of whisky, gin, rum and brandy. Two samples of whisky proved to be below the legal standard of 35° U.P. The vendor of one, which was 36·3° U.P. was cautioned; in the other case which proved to be 39·4° U.P. proceedings were instituted and the vendor fined £5.

REGULATION OF STREET TRADING.

The London County Council (General Powers) Act, 1927, provides for the regulation of street trading by the issue of licences which must be renewed annually. Special observation is kept by the Food Inspectors on all stalls where food is exposed for sale and also the premises where it is stored.

The number of stallholders licensed by the Council is about 350; and about 200 of these handle foodstuffs. The number is continually changing. As a result of constant supervision only minor infringements of the byelaws occurred. These were promptly rectified when pointed out by the Inspectors. Otherwise conditions were satisfactory.

MEAT REGULATIONS, 1924.

There are no slaughterhouses in the City and the duties imposed are confined to the supervision of meat shops, stalls and stores. A register is kept of all meat vendors and the number registered at the end of 1933 was 142. The Inspectors paid 225 visits to these premises, including stalls, 15 notices were served and the defects were remedied in each case.

OTHER FOOD PREMISES.

The total number of inspections to food premises was 3,494. These include visits to milk shops and butchers' shops which have already been detailed. Other premises where food is prepared for sale, deposited for sale or sold, include bakers' shops, greengrocery and fruit shops, ice-cream shops, fish shops, fried fish shops, eating places, tea shops and restaurants. As a result of these inspections 202 notices requiring sanitary defects to be remedied were issued.

Restaurants.—A register of all restaurants is kept and 1,298 have already been indexed. During the year 2,018, visits were paid. Kitchens, pantries, messroom arrangements for staff, systems for washing up, and general sanitary arrangements were specially observed. Defects requiring notices were found in 154 instances, and in each case the work was satisfactorily carried out.

Bakehouses.—At the end of 1933 there were 61 bakehouses in the City, of which 43 were underground. 192 visits of inspection were made, and in all instances the cleansing which is required to be done twice a year was carried out.

Fried Fish Shops.—There are 23 fried fish shops in the City to which the Food Inspectors paid 27 visits. It was necessary to send two notices for cleansing, the work being carried out immediately.

Ice Cream Premises.—66 premises were on the register on 31st December, 1933, as required by the London County Council (General Powers) Act, 1932. The Inspectors paid 137 visits to these premises during 1933. Conditions were satisfactory.

Inspection of Food.—Food exposed for sale has received regular inspection by the food inspectors, who have carried out this work daily (9489)

including Sundays. The following table shows the nature and amount of food voluntarily surrendered or submitted for destruction:—

		T	ons.	cwts.	qrs.	lbs.			Т	ons.	cwts.	qrs.	lbs.
Apples			23	2	-	16	Ham		****	_	2	_	_
Bananas	****		-	13	2	_	Horseradish			3	12	2	-
Beans		****	1	18	-	-	Lamb			-	_	1	22
Beef		****	-	1	-	18	Lemons .	****		8	8	3	-
Blackberries		****	-	. 1	2	_	Lettuce			2	1	_	10
Brussels Spr	outs		-	1	1	6	Mangosteens	S	****	_	.8	3	14
Cabbage	****		2	12	-	-	Melons		****	12	3	-	-
Cape Goosel	erries		-	1	2	-	Onions		****	2	3	2	-
Carrots			3	1	1	-	Oranges	****		-	9	3	
Cauliflower	*****	****	1	2	2	-	Peaches		****	3	10	3	-
Cherries	****		-	12	1	-	Pears	****	****	31	-	2	24
Chestnuts	****	****	6	8		-	Pineapples			-	19	1	-
Chickens	****		-		1	- 8	Potatoes	****	****	. 3	17	2	-
Crabs		****	-	-	-	14	Prawns			-	2	3	7
Custard App	oles		-	10	2	-	Radish			-	-	3	
Endive		****	-	3	2	-	Sapodillas	****	****	2	16	2	
Figs	****	****	-	7		17	Spinach	****		-	4		14
Fish	****	****		-	1	14	Sweet Potat	toes		1	1	-	-
Garlie	****	****	1	8	-	_	Tomatoes			5	8	3	16
Grapes	****		-	1	. 2	12	Turkeys	****		_	1	_	22
Grape Fruit	****		-	.10	2	_	Veal			_	-	2	24
Greengages	****	****	-		3	-	Walnuts		****	1	2	-	
+													

Certification of Food for Export.—A certificate enabling the export of certain articles of food was granted in one instance—to Spain.

SCARLET FEVER-POSSIBLE FOOD BORNE INFECTION.

On 14th November, 1933, information was received by the same post from two different sources concerning four persons who were stated to be suffering from scarlet fever after attending banquets at a restaurant in this City.

Two distinct banquets were concerned—both had been held on 27th October, some 18 days previous to the date of the first intimation received by this Department. Three of the four patients had dined at one banquet.

Although the patients were not resident in the City of Westminster investigation was carried out immediately and it was ascertained that three banquets were held on the same evening—no one attending the third banquet being taken ill. 112 guests were present at the largest banquet, two definitely contracted scarlet fever and 28 suffered from septic throats and other symptoms.

At the second banquet there were 22 guests, 3 of whom soon afterwards contracted scarlet fever and 12 septic throats. No illness of any kind was contracted among the 18 guests taking part in the third banquet.

It was subsequently ascertained that a diner in the public restaurant also contracted scarlet fever after having partaken of dinner on the same night in company with three other persons who were unaffected.

In the course of the enquiries it was discovered that certain items in the menu appeared to be common to the banquets and the dinner in the restaurant. These were eliminated one by one until suspicion finally rested upon ice cream.

Owing to the time that had elapsed between the actual infection and the date of making it known to this Department it was impossible to obtain any of the consignment of ice cream which had fallen under suspicion.

Medical examination of all the staff that had handled the commodity in question was arranged by the firm, and the City bacteriologist, Dr. Pulvertaft, took swabs of all staff directly concerned with the banquets, including lift and cloak room attendants and persons concerned with the preparation of ice cream. Several showed positive results (hæmolytic streptococci) but subsequent swabs proved negative. In connection with this one member of the staff in the ice cream house was excluded from work until a negative swab was obtained.

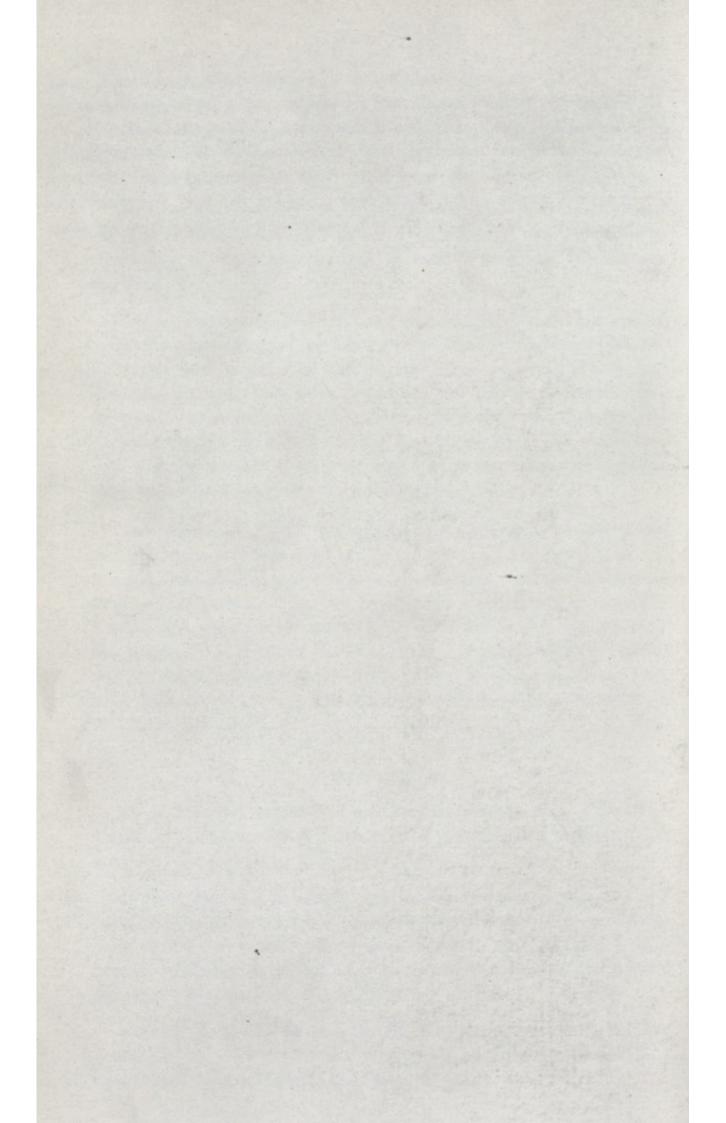
The Ministry of Health was notified of the illness by certain of the sufferers, none of whom lived in Westminster, and Dr. Letham, of the Ministry, was detailed to conduct an investigation. All the information that had been obtained by this Department was put at Dr. Letham's disposal and some further enquiries were pursued in collaboration with the Ministry. It appeared that there was a possibility that the cream used for the decoration of the ice cream on that particular night may have been the agency conveying infection, but no direct evidence was obtained to substantiate this.

FOOD POISONING.

(1) Notification was received in December from the Medical Officer of Health of Hammersmith of a case of food poisoning in a resident in his area.

It arose following a banquet held at a restaurant in this City and other persons attending the same function were stated to have suffered from similar symptoms. The diners numbered 194, but only 8 or 9 persons seemed to have been in any way affected, the symptoms being intestinal pains, vomiting and diarrhœa.

Investigations were at once carried out, menus examined, &c., but nothing in the evidence obtained pointed to any particular circumstance or article of food as likely to have been the cause. (2) An outbreak of suspected food poisoning occurred at a small restaurant. All the members of the staff were affected to a greater or less degree with severe abdominal pains. Two of them, who resided on the premises, were somewhat seriously ill, and confined to bed for a number of days. Blood tests were taken from these two patients, but with negative results as far as the food poisoning group of organisms were concerned. No evidence of any inorganic irritant having been the cause was discovered.











R2/70

