

[Report of the Medical Officer of Health for Stoke Newington, The Metropolitan Borough].

Contributors

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THE
Metropolitan Borough of Stoke Newington.

REPORT

OF THE
Medical Officer of Health and
Public Analyst,
FOR THE
YEAR 1904.

BY
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REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1904.

*To the Mayor, Aldermen, and Councillors of the Borough of
Stoke Newington.*

GENTLEMEN,

Everywhere the general death-rate for 1904 exceeded that for the preceding year, when the exceptionally cool and wet summer and the mild winter were responsible for the lowest death-rate ever recorded for the country generally, and the general death-rate for the Borough, which was 13·1 (as against 12·3 for 1903) is precisely the figure at which it stood for the years 1901 and 1902. There are only two Metropolitan Boroughs with lower rates, and the rate for London generally was 16·1.

I am glad to be able to record a decrease in the rate of mortality amongst infants. In my last Report I drew attention to the fact that this rate was then the one unsatisfactory feature in the vital statistics of the Borough, and that, whereas it had hitherto been one of the three lowest in the Metropolis, during 1903 it had so increased that there were seven other Boroughs with lower figures. The figure for that year was 120·3, but for last year it was only 115·6.

It was to be expected that the infectious sickness attack-rate of the Borough, which was remarkably low during 1903, would show an increase during the ensuing year, but it is disappointing to find that from the position of lowest in the Metropolis it increased during 1904 to a figure which was above that of fourteen other Metropolitan Boroughs. The notifications of infectious disease (excluding chicken-pox) during 1904 showed an increase of over thirty per cent. above those for 1903, and the consequent death-rates from diphtheria,

enteric fever and phthisis were exceptionally high for Stoke Newington. The death-rate from consumption in Stoke Newington during 1904 was the highest yet recorded for the Borough, and it even slightly exceeded that for London generally. This is a discouraging fact, seeing that since the Borough was constituted we may justly claim to have done more with the aim of reducing the prevalence of this disease than has been done in any other Metropolitan Borough. I have dealt with this subject and also that of infantile mortality, at some length in the body of the Report.

Again I have to record my satisfaction at the way in which the work of the department has been carried on by the different members of the staff. In my opinion the appended Report of the Chief Sanitary Inspector constitutes a very satisfactory record of work.

I am, Gentlemen,

Your obedient Servant,

February, 1905.

HENRY KENWOOD.

POPULATION.

According to the Census of 1901 the population of the Borough was then 51,247. At the previous Census of 1891 the population for the same area was 47,988, so that the population had increased during the 10 years to the extent of 3,259. In this Report the rates are based on the estimated population for *the middle* of the year 1904, and the figure, calculated logarithmically from the increase between 1891 and 1901, amounts to 52,353. I believe this to be a slight over-estimation of the population, having regard to the fact that the number of occupied houses in the Borough in March, 1904, amounted to only 7,456, and the number of occupants to each house averaged only 6·6 at the last Census. It is, however, upon the above figure, obtained by the official method, that the various rates dealt with in this Report are calculated, since, when allowance is made for the number of residents in the large block of Industrial Dwellings in Victoria Road, occupied since the last Census enumeration, the estimate must be a very close one.

The population for each of the Sub-districts is as follows :

The Northern Division of the Borough (lying North of the line of Church Street) has a population of about 18,250, and in the Southern Division the population is about 34,103.

The natural increase of population by excess of births over deaths during the year amounted to 457, as against 450 in the preceding year.

Number of people to the acre.—The area of the Borough amounts to 863 acres, and this, divided among the residents, represents 60·6 people to the acre.

Births—Birth-rate.—During the year 1904 there were 1,142 births registered in the Borough, viz.—583 males and 559 females. The

birth-rate per 1,000 per annum was therefore 21·8, as against 20·9 for the preceding year.

Year.	Birth-rate.	Rate for London generally.	Rate for England and Wales.
1901 ...	21·6	29·0	28·5
1902 ...	21·8	28·5	28·6
1903 ...	20·9	28·5	28·4
1904 ...	21·8	28·0	27·9

The part which the low birth-rate plays in favouring the low general death-rate of the Borough is duly accounted for in arriving at the *corrected death-rate*.

MORTALITY.

General Mortality.—There were 546 deaths of residents registered in the Borough, and 139 of residents who died in Public Institutions outside of the Borough, making a total of 685 deaths. Of these deaths 356 were of females and 329 were of males.

Year.	General Death-rate.	Rate for London generally.	Rate for England and Wales.
1901 ...	13·1	17·6	16·0
1902 ...	13·1	17·2	16·3
1903 ...	12·3	15·2	15·4
1904 ...	13·1	16·1	16·2

The recorded general death-rate is therefore 13·1. This ordinary death-rate, however, cannot be taken as a true index of the healthiness of the Borough nor can it be justly compared with the rates of other

Sanitary areas, unless some allowance is made for the relative proportions of males and females at different ages in the districts compared.

Death-rates vary very much in different districts according to the natures of the populations of these districts ; for instance, in a district containing a large number of very young or very old people, the rate would be considerably higher than in a district containing a larger proportion of people of middle age.

There is, therefore, calculated by the Registrar-General from the Government Census returns, a corrective factor for each district in the County of London, according to the sex and age distribution of the population of that district ; the multiplication of the recorded death-rate of the district by this factor gives the death-rate which would obtain in that district if the sex and age distribution of the population of the district were in the same proportions as it is in the country as a whole—thus eliminating the accidental differences due to sex and age and affording a fair means of comparison, and a truer test of the healthiness of the district. The death-rate so ascertained is known as *the corrected death-rate*.

The so-called “factor for correction” for the Borough of Stoke Newington is 1·04443, and the *death-rate corrected for age and sex distribution* is $(13·1 \times 1·04443)$ 13·7 per 1,000 per annum.

In arriving at this corrected death-rate, the deaths of non-residents, who have died in Public Institutions within the Borough have, of course, been excluded.

The rate is a very satisfactory one, even for Stoke Newington. The death-rate for the whole of London was 16·1.

District Mortality.—The deaths among residents of the Northern Division of the Borough numbered 196 and furnished a recorded death-rate of 10·7 per 1,000 per annum.

The deaths among the residents of the Southern Division of the Borough numbered 489, and furnished a recorded rate of 14·3 per 1,000 per annum.

DISTRICT MORTALITY.

	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Totals.	Rate per 1,000 per annum.
Northern Division	48	54	44	50	196	10·7
Southern Division	129	101	136	123	489	14·3
TOTALS	177	155	180	173	685	13·1

Infantile Mortality.—There were 132 deaths registered of infants under one year of age, as against 1,142 births; the proportion which the deaths under 1 year of age bear to 1,000 births is, therefore, 115·6, as against 120·3 in the preceding year.

The deaths under 1 year of age form 19·2 per cent. of the total deaths of all ages, whereas those for the preceding year formed 20·4 per cent.

Year.	Rate of Infantile Mortality.	Rate for London generally.	Rate for England and Wales.
1901 ...	117·9	149	151
1902 ...	114·7	139	133
1903 ...	120·3	130	132
1904 ...	115·6	144	146

The Causes of Infantile Mortality in 1904.

	First Quarter.	Second Quarter.	Third Quarter.	Fourth Quarter.	Totals.
Wasting, Develop- mental Diseases, and Debility ...	6	5	5	6	22
Premature Birth and insufficient vitality	4	6	11	6	27
Diarrhoea	...	...	19	...	19
Diseases of Lungs	6	1	3	5	15
Whooping Cough	3	4	1	...	8
Convulsions ...	3	3	2	2	10
Gastric Catarrh and Enteritis ...	...	...	1	4	5
Measles	...	...	1	...	1
Diphtheria ...	...	...	...	1	1
Erysipelas... ..	...	...	1	...	1
Tuberculosis (other than Pulmonary)	2	2	1	2	7
Septic Infection ...	1	1	1	...	3
Congenital Heart Disease	1	1	...	...	2
Enteric Colitis ...	...	...	2	1	3
Meningitis ...	2	...	...	...	2
Congenital Syphilis	...	1	...	...	1
Accidental suffoca- tion in bed ...	2	1	...	2	5
Totals ...	30	25	48	29	132

DEATHS UNDER ONE YEAR OF AGE IN THE DIFFERENT
WARDS OF THE BOROUGH DURING THE YEARS
1903 and 1904.

Name of Ward.	1903.	1904.
Lordship Ward	4	6
Clissold Ward... ..	7	8
Church Ward	30	24
Manor Ward	10	9
South Hornsey Ward	65	66
Palatine Ward	20	21
Totals	136	134

If we refer to the Returns of Infantile Mortality for the Borough during the past few years we invariably find that the loss of life is far the greatest in the first three months of life, and that the conditions which are most responsible for death are, Premature Birth, Wasting Diseases, Diarrhœa and Lung Diseases. For the next three months of life Diarrhœa exacts the heaviest mortality, but Lung Diseases continue to cause a considerable proportion of the deaths. Between the ages of six and twelve months the high mortality is more especially maintained by Measles, Whooping-cough, Diarrhœa and Lung Diseases.

During the year a special enquiry was made as to the sanitary circumstances, etc., of those poorer homes in which an infant under one year of age had died during the preceding year, with the view of ascertaining, if possible, what conditions existed which were unfavourable to any further children which may be born on those premises. It was found that in over one-third of the poorer homes the mothers were engaged in some work which took them from their homes during the greater part of the day, and, on enquiry, it was ascertained that among fourteen deaths of infants from Zymotic

Diarrhoea in such homes only one of those infants had been breast-fed, the others receiving artificial food, often in the form of condensed milk. The number of houses visited was sixty-two and in fifty-two of these the parents occupied only three rooms or less. What impressed one most was the circumstance that ignorant artificial feeding and the bad provision for the storage of food were mainly responsible for the mortality, and that perhaps the bad air (unavoidable in the limited accommodation possessed by the parents) was a contributing factor. The only means of storing food adopted in forty-five out of the sixty-two dwellings investigated was either a cupboard or a safe in a living room, and in seven cases the food was simply placed upon the shelves of a living room.

Zymotic Diarrhoea and the allied conditions which carry off infants in great numbers are very largely dirt diseases, and there is no doubt that the storage of food in crowded living rooms, which under the circumstances of their occupation cannot possibly be kept very clean, leads to a considerable contamination of the milk and other food given to the infants, and is in no small measure responsible for the higher mortality amongst the infants living under these conditions.

Increased efforts will be made in the Borough in the future to secure improved arrangements for storing the food in these tenemented dwellings.

The circumstance that at present one child out of every five born succumbs before one year of life is complete is a painful one to reflect upon, and the necessity to reduce this waste of life is becoming greater year by year in this country in face of our falling birth-rate. It has been pointed out that if the death-rate amongst calves were only half of that which prevails amongst infants, the British farmer would before very long have to entirely give up the business of rearing cattle.

The unnatural concurrence of a stationary infantile mortality with a falling birth rate is one which seriously threatens the national vitality, and it indicates the growing tendency towards the repudiation of the duties of life, and of their subordination to pleasure and self-enjoyment.

The Medical Officer of Health for Glasgow, in his Report for the year 1903, makes special reference to the infantile mortality in that city, and he draws attention to the fact that one-third of these deaths occurred during the first four weeks immediately following birth, at an age therefore which suggests the operation of ante-natal causes tending to unfit the child for independent existence. One-half of the total deaths occurred during the first three months of life, and tables and figures are given to show that the death rate during the early months of infant life depends largely on immaturity (including Premature Birth), Congenital Malformation, Faulty Development, Atrophy and Debility. I need hardly say that the above causes of death, which account for fully 30 per cent. of the deaths of infants, are not to be prevented by the improved sanitation of the home. The weak health of the parent before marriage is responsible in no small measure for this mortality, and this weak health is the result of too early marriage and the occupation of the mother in work (generally performed under insanitary conditions in order to enable her to supplement her husband's scanty earnings), which is often carried on until pregnancy is far advanced and within a day or two after confinement. When the baby comes she is too weak or too much occupied with work to suckle it, and often too selfish. The majority of these mothers have no knowledge of how to feed the child artificially, and their ignorance and neglect is mainly responsible for our high preventable infantile mortality. It is not only in the actual number of deaths that one sees the evil of this state of things reflected. One has to think of the far greater number of infants who escape death, but grow up with constitutions permanently damaged.

Wherever Vital Statistics have been collected, they have served to illustrate the same truth, that children fed naturally from the breast have a prospect in life far in excess of those who are fed artificially. The circumstance was very noteworthy during the Siege of Paris and the Lancashire Cotton Famine, that although there was an increase in the adult mortality, it was accompanied by a diminution in infantile mortality owing to the circumstance that mothers were obliged to suckle their infants.

The deeper we dip into the real cause of this mortality the more abundant becomes the evidence that the cause which exceeds all others in potency is improper feeding. Wherever the investigations are carried out in these islands, whether it be at Finsbury, Brighton, Croydon or Liverpool, it is found that where infants are fed artificially there the infantile mortality is highest. Moreover, in a series of observations made of children of the labouring classes of New York, the large percentage of the poorly-developed was found to be attributable not to insufficiency of food, but to the wrong kind of food. The early nutrition of the child is of the greatest importance to the State, and the education of mothers in all that conduces to the production of healthy children is the most essential part of any system of education.

The ignorance of household management and of the principles of Hygiene among the poor is responsible, in no small measure, for their high preventable mortality, their inferior physique, their intemperance and their poverty. How possible it is to better the conditions of modern life, and thus to improve the health, happiness, and physical powers of the people, and thereby their mental vigour and industrial efficiency, is generally recognised; and to this end a suitable hygienic education, moral and material, of the future parents seems essential. Not only have 15,000 medical men and the Commission on Physical Degeneration recommended that such teaching should be made compulsory, but the English Board of Education and the Scotch Education Department have accepted that recommendation. School Hygiene therefore is not a mere fad of a few individuals, it lies at the basis of all education and is an important part of the superstructure as well. Therefore it is important that from the earliest years of school life children should be taught by example as well as precept the elements of healthy living. The knowledge that may be procured subsequently to that age is often gained at the price of a needlessly costly personal experience. The object then of School Hygiene is to secure for the physical life its maximum possibility of sound health and to develop the mental life side by side with this. The need of bodily health as the foundation of sound mental work is recognised at the present day, and we must not rest content until in the homes as

well as in the school there is sound knowledge of what may be done to give the proper environment for healthy life and work.

The writer of a series of excellent letters which appeared in the "Times" in the Autumn of last year, while appearing to attach little importance to such remedies as Crèches and municipal supplies of sterilised milk, wrote as follows:—"Far better (he says) is the plan adopted by some towns of appointing lady inspectors, who may be reinforced indefinitely by voluntary assistants, to pay nursing visits. The mothers are said to welcome the attention and the help, and most of them are found tractable, not only in regard to the details of feeding and nursing—ignorance and neglect of which are the immediate cause of death—but also in regard to the whole maternal duty. The sense of responsibility is awakened in them, no doubt, by the sympathetic interest taken in their affairs by the visitor. The remedy (he concludes), is not complete, but it is real, and, so far as it goes, it touches the root of the matter, and it illustrates once more the value of personal service, which is still the great force in human affairs." I fully agree with the writer of that letter.

The persistently high rate of infantile mortality and the knowledge that it is due in a material degree to the use of milk contaminated by dirt, is leading to the establishment of milk depôts, at which Sterilized, Pasteurized and Humanized milk is supplied at a small cost for the use of children whose parents are willing to submit to certain conditions as to its use. The experiences of St. Helens, Battersea, Liverpool and elsewhere, are certainly encouraging. The milk trade is of course very averse to such institutions, which are alluded to as instances of municipal trading, but it is clear that the trade has the remedy in its own hands, for as soon as it is able to produce genuine milk in an unpolluted condition, free from preservative drugs and artificial colouring matter, almost the whole of the necessity for municipal interference will be removed. It is certain that if the educated section of the public were familiar with the conditions under which most of the milk is drawn in rural districts, they would not be long before they strengthened the hands of those who do know, and

who have persistently demanded reforms for many years in the interests of health and decency. Already there are signs of a sanitary awakening in this particular, and the trade is showing a disposition to avail itself of practical suggestions for improvement.

There are then two directions in which, at the present time, we can move most effectively in order to reduce the infantile mortality. One of these is by requiring all the older school girls to be educated in the elements of healthy infant-rearing and in the means for securing healthy conditions generally about the house, including cooking ; and the other by educating the present mothers, through the agency of women sanitary inspectors or women Health Visitors who are able to influence the mothers, in the direction of the proper feeding and care of their children. In other words we must endeavour to cope against the ignorance and indolence which are responsible for so much wastage of child life.

It would be the duty of such a woman Health Visitor to perform the following services :—She would be required to visit from house to house in such streets or localities as I should indicate from time to time. She would undertake a certain amount of missionary work among the occupants of these houses by directing attention to the evils of bad odours, dirt, want of fresh air, improper storage of food, etc. She would also give information to mothers on the feeding and clothing of children, and she would note the general sanitary state of the house. I should supply her with information of the births registered by those living in the poorer districts and who would, therefore, be judged as likely to benefit by her advice.

For the purposes of preventive measures, it is necessary to pay due regard to the social circumstances which act and re-act upon the physical well-being of the population. Chief amongst these is, of course poverty, and since so much of poverty is caused by alcoholism, the forces of alcoholism and poverty cannot be profitably discussed apart. Could the wastage in food and drink be prevented amongst the poor, their poverty would be far less. The need for education in the matter

of procuring the greatest food values for a given expenditure of money and of the proper preparation and cooking of food, is a forcible argument in favour of the teaching of cooking along with other branches of domestic economy as part of the scheme of our compulsory education. The shortage of food and the ignorant selection of food among the poor is not only responsible for much ill-health and indirect mortality, but it presents in itself a serious handicap to education. An underfed child is not in a proper condition to benefit from the teaching given him, and unless he is adequately fed he will frequently go to join the ranks of the physically unfit.

The expenditure on drink in the United Kingdom is about £180,000,000 a year, and it is calculated that the working classes spend about one-seventh of their income upon alcohol. Social problems are complex, and causes and results act and re-act. Poverty, alcoholism and degradation tend to create and perpetuate the conditions which cause them. There can be no doubt that poverty, and the unhealthy conditions of housing which it entails, tends to promote drinking, but there can be no reasonable doubt that a very large proportion of this poverty is due to drink. In the opinion of those who have specially studied this question, drinking is far more often the cause of poverty than poverty is the cause of drinking. Much of the inability to secure satisfactory food and comfortable homes results from the circumstance that the money necessary to provide them is spent on drink, and as a consequence, apart from the drink itself, the associated conditions beget disease and deteriorate physical vigour. Any effective legislation which reduces alcoholism will reduce, in even a greater proportion, every social public health problem of the day.

Senile Mortality.—Of the 685 deaths 192 were of persons over 65 years of age. The proportion of deaths occurring among those of over 65 years of age to the total deaths is, therefore, about 28 per cent. There were 130 deaths of persons over 70 years of age, and 44 of persons over 80, 5 of whom reached 90 years of age—the oldest being 92. These figures denote an exceptionally high proportion of senile mortality.

SENILE MORTALITY DURING 1904.

65 to 70	70 to 80	80 to 90	90 and over.	Total.
62	86	39	5	192

The respective ages of those over 90 were 90, 91, 91, 92, 92.

The Causes of Death.—These are fully set forth in Table A, in which it will be noted that the deaths are also apportioned to different age periods. Table A1 is supplementary to Table A, and sets forth the causes of death during each of the four quarters of the year.

Table A2 shows the deaths in each Division of the Borough, and the causes of death.

TABLE A.
CAUSES OF, AND AGES AT, DEATH DURING YEAR 1904.

CAUSES OF DEATH.																											
DEATHS IN OR BELONG- ING TO WHOLE DISTRICT AT SUBJOINED AGES.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria & Mem- branous Croup.	Enteric Fever.	Epidemic Influenza.	Diarrhœa.	Enteritis.	Puerperal Fever.	Erysipelas.	Other Septic Diseases.	Phthisis (Pulmonary Tuberculosis).	Other Tubercular Diseases.	Cancer, Malignant Disease.	Bronchitis.	Pneumonia.	Other Diseases of Respiratory Organs.	Alcoholism. Cir- rhosis of Liver.	Veneral Diseases.	Premature Birth.	Heart Diseases.	Accidents.	Suicides.	Diseases of the Nervous System.	Old Age.	All other Causes.	All Causes.
All Ages	7	3	13	10	6	7	26	1	3	7	23	89	20	51	55	35	11	10	1	27	73	9	8	61	37	92	685
Under 1 year	1	...	8	1	3	...	19	1	...	1	3	2	7	...	8	5	2	...	1	27	2	3	...	1	...	37	132
1 and under 5	5	1	5	6	...	...	6	...	...	...	3	3	10	...	2	3	1	...	...	...	...	3	...	2	...	6	56
5 and under 15...	1	2	...	2	...	...	...	...	...	...	4	2	...	...	...	2	2	...	...	...	2	1	...	1	...	3	22
15 and under 25	...	...	...	...	1	...	...	...	2	...	1	12	2	1	...	...	1	...	...	...	3	...	1	...	...	4	28
25 and under 65	...	...	...	1	2	3	...	...	1	5	9	68	1	26	16	14	3	9	...	...	34	1	6	28	...	28	255
65 and upwards	...	...	...	...	...	4	1	...	...	1	3	2	...	24	29	11	2	1	...	...	32	1	1	29	37	14	192
DEATHS IN OR BELONG- ING TO LOCALITIES (AT ALL AGES.)																											
North Division ...	2	...	4	3	2	4	2	...	1	2	9	24	5	17	17	8	1	2	...	2	21	1	2	22	11	34	196
South Division ...	5	3	9	7	4	3	24	1	2	5	14	65	15	34	38	27	10	8	1	25	52	8	6	39	26	58	489
TOTAL DEATHS IN PUBLIC INSTITUTIONS IN THE DISTRICT.	...	...	...	...	...	...	...	...	...	...	1	2	...	3	7	...	3	...	...	1	...	...	...	13	...	3	33

TABLE A 1.

Showing the Causes of Death among Residents in Stoke Newington during each of the four quarters of the year 1904.

CAUSES OF DEATH.	Belonging to District.					Institutions in District.				
	Quarters.				TOTAL.	Quarters.				TOTAL.
	1	2	3	4		1	2	3	4	
1904.										
Measles	...	3	2	2	7	...	...	...	...	...
Scarlet Fever	2	...	...	1	3	...	...	...	...	...
Whooping-cough	4	6	3	...	13	...	...	...	...	...
Diphtheria and Membranous Croup	4	2	2	2	10	...	...	...	...	...
Enteric Fever	...	1	2	3	6	...	...	...	...	...
Epidemic Influenza	2	2	...	3	7	...	...	...	...	...
Diarrhœa	...	...	25	1	26	...	...	...	...	...
Enteritis	...	...	1	...	1	...	...	...	...	...
Puerperal Fever	...	...	3	...	3	...	...	...	...	...
Erysipelas	2	...	3	2	7	...	...	...	...	...
Other Septic Diseases	5	10	6	2	23	1	...	...	...	1
Phthisis	26	20	26	17	89	...	...	2	..	2
Other Tubercular Diseases...	5	7	4	4	20	...	...	...	...	...
Cancer	12	11	14	14	51	2	...	1	...	3
Bronchitis	18	5	4	28	55	...	2	...	5	7
Pneumonia	17	6	4	8	35	1	1	1	...	3
Other Respiratory Diseases	4	...	7	...	11	...	...	...	...	...
Alcoholism and Cirrhosis ...	2	3	4	1	10	...	...	...	...	...
Venereal Diseases	...	1	...	...	1	...	...	...	...	...
Diseases of the Nervous System	16	22	12	11	61	5	2	2	4	13
Premature Birth	4	6	11	6	27	...	...	...	...	...
Heart Disease	22	24	13	14	73	...	1	...	...	1
Accidents	4	2	2	1	9	...	...	...	...	...
Suicides	1	...	3	4	8	...	...	...	...	...
Old Age	7	7	8	15	37	...	...	1	...	1
All Other Causes	20	17	21	34	92	2	..	...	...	2
TOTALS	177	155	180	173	685	11	6	7	9	33

TABLE A 2.

Showing the distribution of the deaths in the Northern and Southern Divisions of the Borough.

DEATHS, 1904.	NORTH.					SOUTH.				
	Quarters.				TOTAL	Quarters.				TOTAL
	1	2	3	4		1	2	3	4	
Measles	...	2	...	...	2	...	1	2	2	5
Scarlet Fever...	...	...	...	...	...	2	...	...	1	3
Whooping-cough	...	2	1	1	4	4	4	1	...	9
Diphtheria and Membranous Croup.	...	1	1	1	3	4	1	1	1	7
Enteric Fever...	...	...	...	2	2	...	1	2	1	4
Epidemic Influenza	2	...	...	2	4	...	2	...	1	3
Diarrhæa	...	...	2	...	2	...	...	23	1	24
Enteritis	...	...	...	...	...	...	...	1	...	1
Puerperal Fever	...	...	1	...	1	...	...	2	...	2
Erysipelas	1	...	...	1	2	1	...	3	1	5
Other Septic Diseases	3	4	1	1	9	2	6	5	1	14
Phthisis	4	9	8	3	24	22	11	18	14	65
Other Tubercular Diseases...	1	3	1	...	5	4	4	3	4	15
Cancer	4	3	5	5	17	9	9	9	7	34
Bronchitis	5	2	...	10	17	13	3	4	18	38
Pneumonia	4	2	...	2	8	13	4	5	5	27
Other Respiratory Diseases	1	...	...	...	1	3	...	6	1	10
Alcoholism and Cirrhosis ...	1	1	...	...	2	1	2	4	1	8
Venereal Diseases	...	...	...	...	...	...	1	..	...	1
Diseases of the Nervous System.	8	9	4	1	22	8	13	8	10	39
Premature Birth	...	...	1	1	2	4	6	10	5	25
Heart Disease...	6	7	6	2	21	16	17	7	12	52
Accidents	...	...	1	...	1	4	2	1	1	8
Suicides	...	...	1	1	2	1	...	2	3	6
Old Age	1	2	3	5	11	6	5	6	9	26
All other Causes	6	10	7	11	34	12	8	14	24	58
TOTALS... ..	47	57	43	49	196	129	100	137	123	489

Comparing these tables with the corresponding tables of the preceding year the following facts are noteworthy:—A considerable decrease in the deaths from Measles and Whooping Cough, and an increase in the deaths from Diarrhœa, Heart Disease, Phthisis and Suicide.

It will be noted (Table A 2) that the mortality of the Southern Division exceeds that of the Northern (after due allowance is made for the different figure of the population in each Division) mainly in respect of the deaths from Diarrhœa, Measles, Whooping Cough, Diphtheria, Phthisis, Diseases of the Respiratory Systems, Alcoholism, and Premature Birth; and when these deaths are grouped according to the ages at which death occurred, it is found that by far the largest number are allotted to the first five years of life. The mortality from Influenza, on the other hand, was disproportionately high in the Northern Division.

DEATHS IN PUBLIC INSTITUTIONS WITHIN THE BOROUGH, 1904.

St. Anne's House, Manor Road.	Northumberland House, Green Lane.	Invalid Asylum, 187, High Street.	Nursing Home, 8, Alexandra Road.	Total.
22	6	1	4	33

Zymotic Mortality.—Included in the Zymotic mortality are the deaths from the seven principal Zymotic diseases, viz., Small-pox, Measles, Scarlet Fever, Diphtheria, Whooping Cough, "Fever" (including Enteric Fever, Typhus Fever, and Simple Continued Fever), and Diarrhœa. In Table A 3 the deaths from Zymotic Diseases (including Influenza) are given in respect of each disease.

The Zymotic Death-rate for the Borough was 1·24 per 1,000 per annum, as against 1·23 in the preceding year.

Year.	Zymotic Death-rate.	Rate for London generally.	Rate for England and Wales.
1901 ...	1·26	2·25	2·05
1902 ...	1·16	2·21	1·64
1903 ...	1·23	1·76	1·46
1904 ...	1·24	2·14	1·94

TABLE A 3.

Deaths from Zymotic Diseases (including Influenza) in the Year 1904.

—	Scarlet Fever.	Diphtheria.	Small-pox.	Enteric Fever.	Puerperal Fever.	Measles.	Whooping Cough.	Diarrhoea and Dysentery.	Influenza.	Erysipelas.	TOTAL.	Rate to every 1,000 persons.
First Quarter	2	4	...	...	...	...	4	...	2	2	14	1·1
Second „	...	2	...	1	...	3	6	...	2	...	14	1·1
Third „	...	2	...	2	3	2	3	25	...	3	40	3·0
Fourth „	1	2	...	3	...	2	...	1	3	2	14	1·1
	3	10	...	6	3	7	13	26	7	7	82	1·5
1903.....	...	7	...	5	2	21	19	13	8	...	75	1·4

TABLE A 4.

Analysis of the Vital Statistics of the Metropolitan Boroughs and of the City of London, after Distribution of Deaths occurring in Public Institutions, for the Year 1904.

CITIES AND BOROUGHES,	Estimated Population in the middle of 1904.	Annual Rate per 1,000 Living.			Deaths of Children under one year of age to 1,000 Births.
		Deaths.	Principal Infectious Diseases.	Notifiable Diseases Attack-rate.	
LONDON	4,648,950	16·1	2·14	6·1	144
<i>West Districts.</i>					
Paddington	146,975	13·8	1·56	4·7	136
Kensington	179,236	14·3	1·45	3·7	150
Hammersmith	117,412	15·7	2·53	5·7	152
Fulham	152,482	15·4	2·49	5·1	153
Chelsea	74,329	16·5	1·49	3·2	156
City of Westminster	177,321	13·5	0·87	3·7	125
<i>North Districts.</i>					
St. Marylebone	130,337	16·2	1·51	5·1	94
Hampstead	86,663	10·2	0·66	3·7	113
St. Pancras	235,936	17·4	2·01	6·8	150
Islington	341,044	15·4	1·75	5·7	129
Stoke Newington	52,353	13·1	1·24	5·6	115
Hackney	226,266	14·9	2·13	8·5	142
<i>Central Districts.</i>					
Holborn	57,161	18·5	1·80	4·8	109
Finsbury	98,958	21·3	2·57	6·6	140
City of London	23,482	16·7	0·60	4·7	104
<i>East Districts.</i>					
Shoreditch	117,033	20·4	3·20	6·7	188
Bethnal Green	130,207	19·3	2·95	11·6	157
Stepney	303,791	19·4	2·84	9·4	155
Poplar	169,905	18·6	3·35	9·3	154
<i>South Districts.</i>					
Southwark	207,937	20·1	3·13	5·4	174
Bermondsey	129,397	20·0	3·52	7·2	172
Lambeth	310,359	15·8	2·10	4·5	138
Battersea	175,465	14·5	2·02	4·9	147
Wandsworth	257,448	13·4	1·73	6·0	122
Camberwell	268,384	14·9	1·90	6·2	144
Deptford	113,509	16·1	2·46	7·1	145
Greenwich	101,651	14·4	2·26	5·0	142
Lewisham	140,401	12·0	1·41	4·2	123
Woolwich	123,416	14·3	2·40	6·1	135

TABLE A 5.

The chief vital statistics of the Borough of Stoke Newington since its formation.

Year.	Population estimated to middle of year.	Birth-rate.	Rate of Infantile Mortality.	General Death-rate.	Zymotic Death-rate.	Infectious Sickness rate.
1901	51,328	21·6	117·9	13·1	1·26	7·9
1902	51,669	21·8	114·7	13·1	1·16	7·7
1903	52,600	20·9	120·3	12·3	1·23	3·7
1904	52,353	21·8	115·6	13·1	1·24	5·6

I.	II.	III.
Institutions within the District receiving sick and infirm persons from outside the District.	Institutions outside the District receiving sick and infirm persons from the District.	Other Institutions, the deaths in which have been distributed among the several localities in the District.
St. Anne's House, Manor Road. Northumberland House, Green Lanes. Invalid Asylum 187, High Street. Nursing Home, 8, Alexandra Road.	Hackney Infirmary. Islington Infirmary. St. Bartholomew's Hospital. North-Eastern Hospital for Children. German Hospital. Hospital for Women. Great Northern Hospital. Guy's Hospital. Hostel of God. National Hospital. Metropolitan „ Heart „ London „ Children's Hospital (Gt. Ormond Street). Royal Chest Hospital. St. Thomas's „	N.E. Fever Hospital. Eastern „ Northern Fever Hospital. London „ Brompton Hospital. Royal Free „ Leavesden Asylum. Colney Hatch Asylum. Claybury „ Horton „ Cane Hill „ Hoxton House „ Banstead „ Dartford Heath „

There is no Union Workhouse within the District.

THE MORTUARY.

During the year 58 bodies were deposited in the Public Mortuary ; 29 of these were females and 29 were males. Post-mortem examinations were performed upon 37 of these cases, and inquests were held upon 47.

SICK NURSING.

The importance of good nursing in the treatment of disease can scarcely be exaggerated, and the educational value of a visit of a nurse to the houses of the poor is very great.

The services of a sick nurse can be obtained by application at the Council Offices.

INQUESTS.

The following inquests upon deaths of parishioners were held during the year 1904 :—

	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Totals.
Accidental Suffocation (not overlying)...	2	1	...	2	5
Phthisis	1	...	1	1	3
Alcoholism	1	1	...	...	2
Bronchitis	1	...	...	1	2
Convulsions	...	1	...	...	1
Heart Disease	3	2	2	5	12
Gastro Enteritis (poisoning)	1	...	...	...	1
Apoplexy	1	2	1	1	5
Tubercular Meningitis	1	...	...	...	1
Broncho-Pneumonia... ..	1	1	...	...	2
Chronic Kidney Disease	...	1	...	1	2
Accidents	2	1	2	1	6
Gastric Ulcer... ..	...	3	1	...	4
Asphyxia (Throat Abscess)	1	...	...	...	1
Suicide (fall from window)... ..	...	...	1	...	1
„ (self-strangulation)	...	...	1	...	1
„ (poisoning)	...	...	...	2	2
„ (cut-throat)... ..	...	...	...	1	1
„ (bullet wound)	1	...	1	...	2
„ (drowning)	...	...	...	1	1
Senile Decay	...	...	1	...	1
Coma, Cerebral Hæmorrhage	...	...	1	1	2
Pneumonia	...	...	1	...	1
Erysipelas	...	...	...	1	1
Septicæmia	...	...	...	1	1
Debility	...	...	...	1	1
Premature Birth	...	...	...	1	1
	16	13	13	21	63

INFECTIOUS DISEASES AND THE MEASURES TAKEN TO PREVENT THEIR SPREAD.

It will be seen from Table B that 451 *Notification Certificates of Infectious Illness* were received from medical practitioners, as against 248 during the preceding year. These figures include notifications received from the temporary notification of Chicken-pox and the voluntary notification of Consumption.

These 451 cases represent infection in 364 different houses. In 340* instances the disinfection was performed by the Sanitary Authority, and in the other cases by the householders, to the satisfaction of their medical attendant. A visit was paid to every house, and it was ascertained that cases of infectious illness occurred in 13 houses where there were "grave" sanitary defects, and in 31 in which the sanitary defects were "slight."

In forming these conclusions I have considered whether any sanitary defect was of a nature which is generally held by health officers to predispose to, or directly bring about, the particular disease in question.

Thus, apart from the measures that have been taken to prevent the spread of infectious illness, the notification of such illness was the means during the year of bringing about a sanitary inspection of 364 premises.

Table B1 shows the number of cases, and of deaths, from the Infectious Diseases notified during each year since the constitution of the Borough; and Table B2 the cases of Infectious Diseases notified during each month of the year 1904.

The Infectious Sickness Rate of the Borough, excluding the notifications from Chicken-pox and Consumption, was 5·6 to each 1,000 of the population, as against 3·7 for the preceding year. The rate in the Northern Division was 3·2, while that in the Southern Division was 6·9.

Year.	Infectious Sickness Rate.	Rate for London generally.
1901	7·9	8 9
1902	7·7	9·9
1903	3·7	6·0
1904	5·6	6·1

* This figure includes the disinfection after deaths from Consumption and Cancer.

TABLE B.
CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1904.

CASES NOTIFIED IN WHOLE DISTRICT.					NOTIFIABLE DISEASE.												Totals.		
					Small-pox.	Cholera.	Diphtheria.	Membranous Croup.	Erysipelas.	Scarlet Fever.	Typhus Fever.	Enteric Fever.	Relapsing Fever.	Continued Fever.	Puerperal Fever.	Plague.		Chicken Pox.	Phthisis (Voluntary).
At all Ages	...	...	...	...	8	...	60	2	53	153	...	14	...	...	3	...	130	28	451
Under 1	...	...	...	...	2	...	2	...	2	2	...	...	...	...	...	...	11	...	19
1 to 5	...	...	...	...	1	...	27	1	2	44	...	...	...	...	...	...	74	...	149
5 to 15	...	...	...	...	2	...	24	1	1	88	...	5	...	...	...	...	38	2	161
15 to 25	...	...	...	...	...	...	3	...	8	10	...	5	...	...	1	...	5	6	38
25 to 65	...	...	...	...	3	...	4	...	34	9	...	4	...	...	2	...	2	20	78
65 and upwards	...	...	...	...	...	...	...	...	6	...	...	...	...	...	...	...	...	...	6
TOTAL CASES NOTIFIED IN EACH LOCALITY.																			
Northern Division	...	...	...	...	3	...	14	...	9	27	...	5	...	...	...	...	19	7	84
Southern Division	...	...	...	...	5	...	46	2	44	126	...	9	...	...	3	...	111	21	367
NO. OF CASES REMOVED TO HOSPITAL FROM EACH LOCALITY.																			
Northern Division	...	...	...	...	3	...	6	...	1	15	...	1	...	...	...	...	...	1	27
Southern Division	...	...	...	...	5	...	30	1	6	109	...	7	...	...	1	...	1	2	168

TABLE B 1.

Table showing the number of Cases and Deaths from the Infectious Diseases notified from among residents since the constitution of the Borough.

	Small-pox.		Scarlet Fever.		Diphtheria.		Continued Fever.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
1901	26	3	174	4	137	14	—	—
1902	41	8	192	5	91	5	—	—
1903	1	—	88	—	37	7	1	—
1904	8	—	153	3	60	10	—	—

	Erysipelas.		Puerperal Fever.		Enteric Fever.		Membranous Croup.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
1901	20	—	4	2	26	4	4	1
1902	50	3	1	—	22	4	2	—
1903	30	—	2	2	34	5	2	—
1904	53	7	3	3	14	6	2	—

TABLE B 2.

Cases of Infectious Diseases notified during each month of the year 1904.

			Small-pox.	Scarlet Fever.	Diphtheria.	Membranous Croup.	Enteric Fever.	Puerperal Fever.	Continued Fever.	Erysipelas.	Chicken-pox.	Phthisis.	TOTALS.
January	...	...	...	8	2	...	...	...	...	3	...	1	14
February	...	...	...	7	6	...	...	...	...	3	...	1	17
March	...	...	...	7	1	...	...	...	...	3	...	3	14
April	...	...	...	4	8	3	...	...	...	1	52	9	77
May	...	...	...	1	15	5	...	4	...	5	26	3	59
June	...	...	...	3	4	...	...	...	...	4	23	4	38
July	...	...	...	...	8	3	...	1	1	...	3	6	23
August	...	...	...	16	6	...	4	2	...	7	11	3	49
September	...	...	...	22	14	...	1	...	...	5	4	1	47
October	..	...	...	25	9	2	3	..	...	7	4	...	50
November	...	...	...	21	7	...	1	..	..	7	4	1	41
December	...	...	...	12	4	...	...	...	...	5	...	1	22
TOTALS	...	...	8	153	60	2	14	3	...	53	130	28	451

The Infectious Sickness Rate for London generally was 6·1. Of the 29 Sanitary Areas situated within the Metropolis, the lowest rates were those of Chelsea (3·2), and Kensington, Westminster, and Hampstead (3·7), and the highest were Bethnal Green (11·6), Stepney (9·4), and Poplar (9·3).

195 of the cases notified were removed from their homes to Isolation Hospitals.

SCARLET FEVER.

The 153 cases of Scarlet Fever occurred in 115 houses, in 9 of which there were grave insanitary conditions; in 15 the sanitary conditions were slight, and in the remaining houses there was an absence of such conditions.

Year.	Rate for Stoke Newington.	Rate for London generally.	Rate for England and Wales.
1901 ...	0·08	0·13	0·13
1902 ...	0·09	0·12	0·15
1903 ...	0·00	0·08	0·12
1904 ...	0·03	0·08	0·11

School attendance was ascribed as the origin of the infection in 14 cases; and in 1 case there were strong reasons for believing that the infection was communicated by a patient recently dismissed from a fever hospital. The infection was imported into the Borough in 5 instances, and in 8 instances the infection was directly contracted from a preceding case.

ERYSIPELAS.

The 53 cases of this disease represented infection in 51 different premises. In 2 of these, grave insanitary conditions existed, and in 8 the insanitary conditions were of a slight nature. In two cases there was a previous local injury.

ENTERIC OR TYPHOID FEVER.

The 14 cases notified during the year all occurred in 14 different houses. In none of these houses did grave insanitary conditions exist,

and in 2 the insanitary conditions were but slight ; while in the remaining 12 there were no insanitary conditions. Two of the cases doubtless contracted the disease outside of London during the summer and autumn holidays. In one case the evidence pointed to the infection having been derived from the eating of water-cress. The origin of the infection remained quite obscure in the majority of cases ; and in many instances, as I pointed out in a previous Report, the patient had been ailing for several weeks before he took to his bed and the disease was diagnosed.

Year.	Rate for Stoke Newington.	Rate for London generally.	Rate for England and Wales.
1901 ...	0·08	0·12	0·15
1902 ...	0·08	0·12	0·13
1903 ...	0·09	0·08	0·10
1904 ...	0·11	0·06	0·09

DIPHTHERIA.

The 60 cases of Diphtheria occurred in 54 houses, three of which were more or less insanitary. The sanitary defects were grave in one and slight in two other instances.

Year.	Rate for Stoke Newington.	Rate for London generally.	Rate for England and Wales.
1901 ...	0·27	0·30	0·27
1902 ...	0·09	0·25	0·23
1903 ...	0·13	0·16	0·18
1904 ...	0·19	0·16	0·17

School attendance is either alleged by the parents or surmised by myself, on good grounds, to be the cause of 2 attacks during the year.

One case of the infection was imported into the Borough. In several cases it was very clear that a preceding tonsillitis of several weeks duration predisposed to an attack of Diphtheria. In 11 cases there was a history of previous throat trouble frequently recurring. In 2 cases the attack was preceded by "sore-throat" in other members of the family.

In many of the cases I was unable to trace the origin of the disease in any satisfactory manner ; that is to say, after carefully ascertaining all the facts, the origin of the infection could only be conjectured, and it was impossible to do more.

Each year adds to the testimony of the efficacy of Antitoxin in this disease, and many applications have been made at the office for tubes, which I store for the convenience of local practitioners.

In this disease the spread of the infection (and by consequence the mortality) are largely due to the unfortunate circumstance that the early diagnosis of the disease *from clinical symptoms* is frequently difficult and impossible, and bacteriology alone can solve the difficulty in many cases. The *diagnosis outfits* provided by the Council to the medical practitioners in Stoke Newington continue to be much appreciated. Every practitioner has been kept supplied during the year with such an outfit, and has thus had at his disposal the means of procuring a bacteriological diagnosis of Diphtheria, Enteric Fever and Consumption.

The following is a list of the applications received, together with the results of an examination performed at the Lister Institute of Preventive Medicine London.

Date of Application.	Suspected Disease.	Result of Examination.
1904.		
January 27th ...	Diphtheria.	Not Diphtheria.
" 27th ...	Tuberculosis.	Not Tuberculosis.
" 28th ...	Phthisis.	Not Phthisis.
February 16th ...	Diphtheria.	Not Diphtheria.
March 9th ...	Diphtheria.	Not Diphtheria.
" 17th ...	Phthisis.	Phthisis.
" 30th ...	Phthisis.	Not Phthisis.
April 25th ...	Diphtheria.	Diphtheria.
" 29th ...	Phthisis.	Not Phthisis.
May 21st ...	Typhoid.	Typhoid.
June 3rd ...	Phthisis.	Phthisis.
" 13th ...	Diphtheria.	Not Diphtheria.
" 28th ...	Phthisis.	Not Phthisis.
July 7th ...	Diphtheria.	Diphtheria.
" 23rd ...	Diphtheria.	Not Diphtheria.
" 26th ...	Enteric Fever.	Enteric Fever.
" 30th ...	Phthisis.	Not Phthisis.
August 2nd ...	Enteric Fever.	Enteric Fever.
" 15th ...	Enteric Fever.	Enteric Fever.
" 17th ...	Phthisis.	Phthisis.
" 22nd ...	Phthisis.	Phthisis.
September 2nd ...	Phthisis.	Phthisis.
" 15th ...	Phthisis.	Not Phthisis.
" 21st ...	Diphtheria.	Not Diphtheria.
" 24th ...	Diphtheria.	Diphtheria.
October 6th ...	Phthisis.	Phthisis.
" 7th ...	Diphtheria.	Not Diphtheria.
" 8th ...	Phthisis.	Not Phthisis.
" 13th ...	Phthisis.	Not Phthisis.
" 20th ...	Phthisis.	Phthisis.
" 28th ...	Diphtheria.	Diphtheria.
November 6th ...	Diphtheria.	Not Diphtheria.
" 9th ...	Phthisis.	Not Phthisis.
" 14th ...	Phthisis.	Not Phthisis.
" 16th ...	Diphtheria.	Not Diphtheria.
" 26th ...	Phthisis.	Not Phthisis.
" 28th ...	Phthisis.	Phthisis.
December 5th ...	Diphtheria.	Diphtheria.
" 5th ...	Phthisis.	Not Phthisis.
" 7th ...	Diphtheria.	Not Diphtheria.
" 8th ...	Phthisis.	Not Phthisis.
" 12th ...	Phthisis.	Phthisis.
" 13th ...	Diphtheria.	Not Phthisis.
" 19th ...	Enteric Fever.	Not Enteric Fever.

SMALL-POX.

Fortunately, the eight cases of Small-pox notified in the Borough during last year were none of them fatal, and in no case did the infection spread beyond the houses originally infected. The disease, however, occasioned considerable hardship and suffering to the patients and those dependent upon them, and the circumstance that Small-pox was slightly prevalent throughout London during the year necessitated the maintenance of a great deal of isolation hospital provision at a very heavy expense to the Metropolis.

The Loans sanctioned by the Local Government Board to local authorities within the last ten years for the purchase of land or for the erection of buildings for the isolation of Small-pox amounted to £371,191. Contrast this expenditure with that which is found necessary in well-vaccinated Germany. In that country there are, strictly speaking, *no Small-pox hospitals at all*. Everyone is vaccinated in infancy and again at about 12 years of age, and the male part of the population (other than cripples and defectives) are again re-vaccinated on joining the army. In Berlin, with a population of nearly 2,000,000, twelve beds are provided for possible Small-pox patients, in connection with a general Hospital.

MEASLES AND WHOOPING COUGH.

MEASLES.

Year.	Rate for Stoke Newington.	Rate for London generally.	Rate for England and Wales.
1901 ...	0·17	0·43	0·28
1902 ...	0·08	0·51	0·38
1903 ...	0·39	0·44	0·27
1904 ...	0·13	0·49	0·36

The death-rate from Measles in Stoke-Newington was only one third of that for the preceding year, despite the fact that in London generally the death-rate from this disease during 1904 exceeded that

for the year 1903. There was a sharp outburst of the disease, however, during the months of June and July in the Southern part of the Borough, and it was found necessary to close the Infants' Department of the Oldfield Road School for two weeks from the end of June.

Our difficulty in reducing the prevalence and fatality of Measles is evidenced by the fact that the death-rate from that disease has undergone very little reduction during the last ten or twenty years. With the reduction in parental ignorance, which our improved system of education must effect, we may hope for some reduction in this mortality, but probably the best step which could be taken in order to bring about that desirable result is in the direction of excluding all children from school until they reach the age of at least five years. A very large amount of Measles is contracted through the accumulation of the most susceptible infants in the crowded class-rooms of our schools, and the effect of the exclusion referred to would be to postpone the age of exposure and attack and therefore to reduce mortality. Measles is most fatal at about three or four years of age, and every year during which one can postpone the attack is very much in favour of the child. The loss to education would be practically *nil*. A child under five is certainly too young to benefit from almost any conceivable scheme of education. The large amount of money spent on the so-called "education" of babies under five in elementary schools could be put to a far better purpose by applying it to the needs of higher education and the periodical medical inspection of the scholars.

WHOOPING COUGH.

Year.	Rate for Stoke Newington.	Rate for London generally.	Rate for England and Wales.
1901 ...	0·04	0·35	0·31
1902 ...	0·27	0·41	0·29
1903 ...	0·36	0·35	0·27
1904 ...	0·25	0·32	0·34

ZYMOTIC DIARRHŒA.

Year.	Rate for Stoke Newington.	Rate for London generally.	Rate for England and Wales.
1901 ...	0·31	0·87	0·92
1902 ...	0·39	0·54	0·38
1903 ...	0·25	0·63	0·50
1904 ...	0·49	1·03	0·86

PHTHISIS (CONSUMPTION).

The incapacity to work on account of Phthisis costs London over £4,000,000 a year, according to the computation of a great authority. This enormous loss alone well warrants a considerable outlay in an effort to reduce the prevalence of this disease.

Year.	Rate for Stoke Newington.	Rate for London generally.
1901	1·30	—
1902	1·24	1·62
1903	1·30	1·50
1904	1·70	1·63

During the year an increasing number of Sanitary Authorities have obtained the consent of the Local Government Board to the Voluntary Notification of Consumption, and some progress has been made in the provision of Sanatoriums. Some of these have been or are being erected on economical lines, whilst others are costing the ridiculously high amount of from £700 to £1,000 per bed.

In my Annual Report for the year 1903 I drew attention to the circumstances that it was comparatively rare for consumptives of the poorer classes to recover from the disease, and that the value of the

Voluntary Notification of the disease, from the standpoint of the patient, was seriously discounted by the fact that it is rare to receive such a notification before the patient is almost beyond hope. My subsequent experience, under the Voluntary Notification of the disease, fully bears out this contention. Last December I tabulated the facts of those patients who had been notified during the year ending September, 1904. The return is a very gruesome one. There had been during that period fifty-three cases notified; of these at the time of the enquiry forty-three were dead, six were much worse than at the time of notification, two had removed and left no address, and only two were known to have made any improvement. Under these circumstances it can scarcely be said that, *from the patients' standpoint*, much good results from the voluntary notification of the disease; but the facts constitute a powerful argument in favour of *Compulsory* Notification so that those in the early stages of the disease may benefit from our work. I think, however, that under the present system those who occupy the same dwelling as the sufferers are in a great measure protected against the exposure to infection; and a certain amount of prevention of the spread of the disease is in my opinion ample justification for our work.

The cases which are notified under the Voluntary system are not notified at a sufficiently early stage to make them really suitable patients for admission to a Sanatorium, and certainly not more than ten per cent. of the cases which have ever been notified in Stoke Newington would be admitted to existing Sanatoriums as favourable for such treatment. Of those ten per cent., in my experience, few are able or willing to leave home or to enter such an institution with the necessary long absence from their families. Their stay would only be a short one, and on their return to their conditions of increasing poverty, their insanitary home conditions, and their occupation (which has often played a part in favouring the disease from which they suffer), they would soon relapse into their former condition and go from bad to worse.

In the majority of cases notified in the Borough I have been able to make suggestions for improving the existing arrangements and

reducing the risk to others, but it has often happened that a patient in the last stages of the disease has had to occupy a room shared by several. In these cases no suggestion which I was able to make could do away with the enormous risks the other occupants were daily called upon to face.

“What is therefore urgently required is that some provision should exist in each sanitary district in London and elsewhere for the isolation of those who are a source of great danger to others.”

“The crowded home is at present the only place available for the very large majority of the poorer consumptives, who, from the circumstances of their poverty and surroundings, constitute themselves *the chief centres for the spread of the disease.*”

“An economic error is committed by any community which erects institutions for the treatment of what are, generally speaking, the less dangerous cases, while doing nothing for the isolation of the more dangerous ones which may be responsible for the infection of many fresh units.

“In short, institutions are wanted which are not provided primarily for the benefit of the patient, but for the isolation of the patient for the benefit of others, and which may therefore fairly be supported out of public funds. There are no such institutions in London, and until they are provided we lack one of the most essential provisions for coping with the disease.

“It is a provision strictly comparable to our present fever hospitals, which are constructed primarily to check the spread of disease, and therefore the same authority should provide isolation homes for consumptives.” (Annual report for 1903.)

About the middle of the year the Royal Commission appointed to consider the relation of Bovine to Human Tuberculosis, and which was appointed in consequence of Professor Koch's expression of opinion in 1901, issued an interim report, in which the following opinion was expressed:—“That tubercle of human origin can give rise in the

bovine animal to tubercle identical with ordinary bovine tuberculosis seems to us to show quite clearly that it would be most unwise to frame or modify legislative measures in accordance with the view that human and bovine tubercle bacilli are specifically different from each other, and that the disease caused by the one is a wholly different thing from the disease caused by the other." Moreover, the effects illustrated by the German Commission do not warrant Professor Koch's contention that it is not necessary to take any steps against the risks of infection through milk.

VERMINOUS PERSONS.

On several occasions the clothing of verminous persons and the premises they occupied were disinfected during the year, and in two instances a request that we should do this work came from the School Authorities, the teacher having noticed that the heads and bodies of certain pupils were in a very verminous condition. Excellent arrangements exist at the Disinfecting Station for the Hackney Borough Council for dealing with these verminous persons, by which while they are having a hot bath their clothes are being disinfected; but no resident in Stoke Newington has yet sought to take advantage of this provision. It is hardly necessary to state that in dealing with these persons if any benefit is to be derived from the disinfection of the clothes and person the premises themselves must always be dealt with at the same time.

NOTES UPON SANITARY WORK PERFORMED DURING THE YEAR.

It will be seen from the accompanying Report of the Chief Sanitary Inspector that a large amount of sanitary work has been performed during the year: 3,489 premises were inspected for conditions injurious or dangerous to health, and insanitary conditions varying in their nature from slight to very grave were discovered in a large number of instances; 1,047 Intimation Notices, followed in 31 cases by Statutory Notices, were complied with. Of this number only 255

inspections were made as the result of complaints by householders and others, and this circumstance will serve to accentuate the importance of prosecuting a fairly constant system of house-to-house inspection in at least the poorer parts of the borough. It is difficult to over-estimate the value such a measure has in preventing the origin and spread of preventable sickness, for 50 per cent. of such inspections resulted in intimation notices. In the case of 48 of the complaints received no nuisance existed at the time of inspection.

As during previous years, a considerable portion of the time of the Sanitary Inspectors has been taken up by house-to-house inspection, and it is no exaggeration to state that the Borough of Stoke Newington has received more attention in this respect than any other Metropolitan Borough—there being now very few houses in the borough which have not been inspected at least once during the past few years. Having regard to the expense and inconvenience which the work entails upon owners and occupiers, it is satisfactory to be able to record the fact that very little friction has resulted. For many years £10,000 must have been annually expended in the borough by owners and occupiers of property as the result of our house-to-house inspection, and it is only right that the Sanitary Inspector should closely supervise this work, so that owners may know that it is properly done, and so that the Sanitary Authority may not be under the necessity of putting them to further expense in the near future.

It is found that in Stoke Newington, whenever an intimation is served as the result of house-to-house inspection, the Inspector pays on an average five visits in order to see that the work required is properly carried out.

The *slaughter-houses, bake-houses, cowsheds and dairies* situated in the borough were all duly inspected throughout the year.

HOUSES LET IN LODGINGS.

In the Borough of Stoke Newington, more especially in the Southern Division, there is a considerable number of houses let in lodgings under circumstances and conditions which render it desirable,

in the interest of personal and public health, that they should be registered and inspected at frequent intervals.

By the end of the year 1904, 219 premises were on the Register, 39 new premises having been added during the year.

In the Court of Appeal, in February, 1904, two cases were heard, in which the question was considered of the validity of the bye-law requiring the landlord of houses let in lodgings to annually cleanse the house. The Court decided that the bye-law was unreasonable on the ground that it did not provide for a notice for the required cleansing to be given to the landlord. Hence the bye-laws of London Sanitary Authorities have had to be amended in this particular, and the Council's amended bye-laws are at the time of writing awaiting confirmation by the Local Government Board.

FACTORIES AND WORKSHOPS.

At the end of the year 1904 there were on the Register 194 workshops and work-places, 33 premises having been added during the year to the 161 places which were on the Register in 1903.

As the result of the inspection of the workrooms and workplaces in the Borough, it was found that for the most part they were in a satisfactory condition, and that the requirements of the Factory and Workshops Act of 1901, were duly observed. There were only 6 cases of overcrowding which had to be dealt with, but 38 instances in which it was necessary to require cleansing. There was only one occasion to require an increase in the water-closet accommodation. In 2 cases the Abstract of the Factory Act was not affixed in the workrooms, and the Home Office was notified accordingly. There are altogether 117 domestic workrooms in the Borough in which wearing materials of various kinds are being dealt with.

During the year there were no cases of notifiable infectious disease occurring on premises in which there were workshops, but on several

occasions the out-workers in connection with several workshops had to be stopped from carrying on their work at home. A complete list of all outworkers (206 in number), has been kept in the office ; these lists have often been obtained on calling at the workshops, for some employers still fail to realise their duty to send in their list of outworkers twice a year, viz., in February and August, as the Act directs.

The kitchens of the restaurants and public dining-rooms in the Borough have been thoroughly inspected throughout the year, with good results.

THE HOUSING QUESTION.

In England all the large towns are essentially modern and two-thirds of our population live in towns of over 10,000, and town life will soon prevail for three-fourths of our people. In most of the big towns a considerable proportion of the population is living upon unduly congested areas. Apart from the great cities, where the mischief is acute and most detrimental to the moral, mental and physical health of the people, even in the small towns the same congestion is to be found and the same want of houses suited to the needs and the means of the working classes. This fact is made evident by the circumstance that by now a very large number of Sanitary Authorities have adopted Part 39 of the Act of 1890 which enables them to build. At the housing debate in the House of Commons in April, 1903, it was well stated by the member for Shoreditch that the character of the new century will be determined by the kind of houses out of which the children come. The difficulties in the way of Sanitary Authorities providing suitable accommodation do not become less year by year, for what is necessary is cheaper land and cheaper building. The Act of 1903 has materially reduced the dimensions of one great difficulty, by allowing 80 years instead of 60 as the maximum period of repayment of loans for building purposes.

I have in previous Reports drawn attention to the circumstance that many houses in the Borough which were originally constructed for one family are at present occupied by several families. In a great many

instances no alterations whatever have been made in the sanitary arrangements of the dwelling, and the same provision designed originally to meet the wants of one family has now to meet the wants of two or three. It is not surprising that under these circumstances the sanitary arrangements not unfrequently become overtaxed, and the requirements of cleanliness and decency are not easily complied with. In my opinion when such houses become tenemented they should be brought under bye-laws requiring an improvement in the original provision of sanitary appliances, so that a common sink and a common water-closet should not continue to represent the only provision for two or three families. The requirement of the bye-law made by the London County Council under the Public Health (London) Act of 1891, that water-closet accommodation must be provided in the proportion of one water-closet to every twelve persons, is by no means an easy one to enforce in all cases. Conditions of tenancy vary so frequently in these houses, that it is often difficult and unreasonable to enforce the bye-law. What is really required is a bye-law requiring that in all cases where more than two families are housed under one roof there should be more than one water-closet, and there should be provided a separate sink and a separate draw-off tap for drinking-water for each family so housed.

METEOROLOGY IN AND AROUND LONDON DURING THE YEAR 1904.

January.—The weather during the opening month of the year proved of an unsettled and unseasonable character, even the anti-cyclone system which prevailed during the third week not producing the type of wintry conditions usually associated with such systems at this season. Pressure was below the average, the winds being mainly from points between South and West; temperature was above the normal in nearly all localities; rainfall varied considerably both in frequency and in amount, and the duration of bright sunshine was deficient practically all over the country.

February.—Almost throughout the entire month the weather conditions over the United Kingdom were of a very unsettled character, extremely so during the first three weeks, owing to a practically

unbroken succession of deep cyclonic disturbances. The closing week was of a more mixed type, pressure becoming higher than it had been for some weeks previously. Disastrous floods were experienced, mainly over the Southern half of England, down to the middle of the month, as the result of a very wet spell which set in towards the end of January, rain falling every day for nearly three weeks. There was a predominance of cold, but the frosts, though sometimes sharp, were local in character, and did not last through the day. Generally, for the month, pressure was decidedly below the average everywhere; the winds were varied in direction, with Southerly to Westerly predominating in most districts; temperature and bright sunshine were in defect at nearly all stations, and rainfall was in excess except at some Northern stations.

March.—The weather during this month was of a much more settled character—decidedly quieter and drier—than had been experienced in the first two months of the year. High pressure systems were more persistent in our neighbourhood, and the centres of none of the few principal disturbances passed over any part of our Islands. The winds consequently were varied in direction. Gales were infrequent and of no great strength, and although rain, hail, sleet or snow fell with moderate frequency, there was an entire absence of very heavy falls. Pressure was above the average; the winds variable in Easterly and Westerly quarters; temperature was deficient nearly everywhere; there was a moderate excess of rain over some parts, but a deficiency over Britain; and the duration of bright sunshine was below the average.

April.—Atmospheric conditions of a varied character were experienced during the month of April, ranging from very unsettled, wet, and sometimes wild and stormy in the extreme West and North, to comparatively fine, bright and dry in the South and East. Thunderstorms occurred in various parts of the South and East of England on the 12th and 13th. An almost uniform mildness prevailed, there being no well-defined period of cold, the night

frosts being local and unimportant. On the other hand, there was nothing exceptional in the warmth of the days. For the month, as a whole, pressure was above the normal over the more Southern parts of the Kingdom, and considerably below it in the far North; the winds were mainly in the South-West and North-West quarters, gales being frequent in the Northern districts; temperature was nearly everywhere in excess, and both rainfall and bright sunshine were rather variable.

May.—The weather during this month was exceedingly variable in character. For the normally brightest part of the year it was unusually dull, only the third week being marked by much sunshine. A singular feature associated with the prevalent dullness was an intensely dark gloom, of brief duration, which visited the Metropolis about 10 o'clock in the forenoon of the 27th, and was accompanied by barometric oscillations of a somewhat unusual character. Rain was of frequent occurrence, but, as a rule, the individual amounts were not large. As often happens at this season the country experienced a touch of winter cold round the 8th, on which date very low maximum temperatures were recorded. For the month, as a whole, pressure was below the average; the winds were rather variable in direction, and of no great strength; temperature was in excess over Eastern England, mostly in defect elsewhere; rainfall generally was above the normal; and bright sunshine was decidedly less than usual in nearly all localities.

June.—The weather experienced throughout the United Kingdom during the month of June was a decided improvement on the very unsettled, rainy conditions which had prevailed for an unusually long and continuous period. There was consequently a predominance of very fine, bright and dry weather, many localities being rainless for periods of a week or more at a time. During the less settled parts of the month the rain was mostly in light showers, heavy and continuous falls being the exception. Thunderstorms occurred on a few occasions, but they were of a sporadic character, and of no great violence. For such a fine month there was a

singular absence of anything like hot weather, shade temperatures of 75° and upwards being rare, and there was only one instance of 80° in the whole month. Between the 14th and 16th, fresh or strong South-Westerly gales were felt at several stations in the North and West. For the month, as a whole, pressure was somewhat above the average, the winds were very variable in direction, temperature and rainfall were generally below the normal, and the duration of bright sunshine was, as a rule, greater than usual.

July.—The drier and more settled atmospheric conditions which formed the characteristic feature of the month of June were maintained with comparatively little variation throughout July. The contrast between them and the corresponding months of last year, which were abnormally wet, was very striking. There was a great prevalence of fine and bright weather, and the sun's rays were very powerful, the solar radiation thermometer frequently exceeding 140° , and on some days passing above 150° . Hot days were therefore numerous, with shade temperature above 80° , and in some instances over 90° . In many localities there were from 10 to 15 consecutive days without any rain. Taking the month as a whole pressure was above the normal, except at a few west coast stations; the winds were mainly from between South and West; temperature and bright sunshine were in excess in most localities, and rainfall was rather unequally distributed both as regards frequency and amount.

August.—The weather of August was of a very variable nature. At the commencement and end of the month the conditions were fine and warm (the highest temperatures of all being registered on the 3rd or 4th), but at other times the weather was distinctly cool, with frequent rain, and occasional thunderstorms in most districts. Pressure was slightly above the normal, but temperature was in most instances below the average; the winds were chiefly from between South and West; rainfall differed greatly in amount in various parts of the kingdom, but was generally in excess of the mean; bright sunshine also showed an excess in most districts.

September.—The month was nearly equally divided between two different types of weather. During the first half the conditions were generally of an unsettled character, under the influence of various disturbances, so that rain was frequent and sometimes heavy. High pressure systems were in the ascendant throughout nearly the whole of the second half, the weather was much quieter, finer and drier, the days usually being very sunny, but in the closing week many parts of England were affected by dense fogs. There were no instances of exceptionally high or low temperatures. A remarkable feature was the almost entire absence of thunderstorms, including thunder or lightning alone, the very few instances recorded being local and unimportant. Taking the whole month, pressure was above the normal nearly everywhere; the winds were mainly Easterly, Southerly and Westerly; temperature was above the normal in Scotland, below it elsewhere; rainfall was deficient over the greater part of the Kingdom; and there was an excess of bright sunshine.

October.—Unusually quiet atmospheric conditions prevailed over the British Isles during the month of October, a fact intimately associated with the very frequent visits of systems of high barometric pressure, which were more numerous than for a long time past. They were, as a rule, accompanied by much cloud and dulness, and the air consequently was rather soft and humid, although winds from between North-East and South-East were pretty frequent. Mist and fog were of more frequent occurrence than for some years past. Hail fell occasionally in places, but there was no distinctly cold weather, and night frosts were rare and unimportant. For the whole month pressure was everywhere above the normal; the winds were mainly Southerly to Westerly; temperature was generally in excess; rainfall was nearly everywhere deficient, largely so in many localities; and bright sunshine was variable in amount in various districts.

November.—The month of November was marked by exceedingly variable atmospheric conditions throughout our Islands. Very

quiet, mild, and dry weather prevailed during the earlier days. Then followed an unsettled wet week, heavy falls of rain being reported almost daily, and from the 7th to 9th gales and very strong winds from the Westward and North-Westward were experienced practically all over the country, with temperature, however, maintaining a high level in most districts. Earth tremors were experienced at Isleworth on the 9th, and at Oundle on the 11th, on which date an earthquake shock is said to have occurred at Newbury. For the whole month pressure was everywhere in excess of the normal; temperature was nearly everywhere lower than usual; rainfall (including melted snow) was less than the normal at nearly all stations; and bright sunshine was very variable in amount.

December.—With the break up of the severe frost at the close of November the weather over the whole of the United Kingdom became exceedingly unsettled. In many localities rain fell every day, and in some places hail, sleet, or snow, was reported at times. High winds and gales were of frequent occurrence, the gales of the 5th and 12th being felt very generally. This period was succeeded by an exceptionally quiet spell, the barometer rising and the conditions becoming anticyclonic, the winds being very light and the weather all but rainless. The change to calm weather was attended by one of the worst fogs of recent years, lasting into the early part of the last week, and interfering greatly with the Christmas traffic both by land and sea. There were occasional frosts locally, but as a rule mildness prevailed. For the whole month pressure was a little below the normal nearly everywhere; temperature showed an excess in most places; the winds were mainly from between South and West; rainfall was deficient over the greater part of the country; and bright sunshine was somewhat irregular in its distribution.

Meteorological Observations taken during the Year 1904, at Camden Square
(by H. S. Wallis, Esq.).

The observations have been reduced to mean values by Glaisher's Barometrical and Diurnal Range Tables, and the Hygrometrical results from the Sixth Edition of his Hygrometrical Tables.

Month.	Temperature of Air.				Mean Tem- p'rature of Air	Rain.		Rela- tive Humid- ity. Satura- tion. 100.
	Highest	Lowest.	Mean.			No. of Days it fell.	Amnt. Collectd.	
			Of all Highest	Of all Lowest				
	°	°	°	°	°		ins.	
January	55·3	25·1	44·1	34·8	39·5	22	2·33	94
February	54·3	27·9	44·6	34·8	39·7	19	2·58	87
March	61·0	27·9	47·9	34·5	41·2	15	1·72	87
April	67·9	35·8	59·0	42·4	50·7	10	1·02	77
May	76·6	34·1	63·4	46·7	55·1	16	1·96	79
June	76·7	43·1	70·1	49·9	59·8	6	0·84	74
July	88·9	49·7	77·7	56·4	67·1	10	2·42	76
August	91·0	44·3	73·6	52·7	63·2	10	1·59	79
September	74·9	39·1	65·7	48·2	57·0	11	1·17	87
October	67·1	32·7	57·7	44·7	51·2	11	1·56	91
November	58·8	24·1	47·8	36·7	42·3	11	1·70	92
December	56·3	27·6	45·2	36·6	40·9	19	1·79	92

PUBLIC HEALTH LEGISLATION IN 1904.

The year 1904 was signally uneventful in so far as Public Health Legislation was concerned. With the exception of the Expiring Laws Continuation Act, 1904, which extends the operations of the Vaccination Act of 1898 until December 31st, 1905, there was no Public Health measure of importance which affects the Borough.

Another year has passed, and we are still without any legal enactment dealing with the use of preservatives and colouring agents in food. The recommendations of the Departmental Committee which issued its Report in 1901 were so moderate and generally approved of, that it was hoped that legislation on the subject would very soon follow. The importance of this is very considerable, and it is difficult to see what reason there can be for this country not falling into line with most other countries including our own Colonies, by framing such legislation.

The hopes entertained by the medical profession that during last year the Government would introduce a new Vaccination Bill have not been realised. Meanwhile it is satisfactory to record the circumstance that some other countries are profiting by the experience of Germany. Even the Sultan of Turkey has given his assent to a law, which came into force in April of last year, requiring compulsory vaccination and re-vaccination.

The London County Council (General Powers) Act, 1904, became law on the 15th August. The provisions of special interest are as follows :—

Section 19 enables the Sanitary Authority, at their own expense, to cleanse, purify or destroy any articles in any house, or part thereof, if in such a filthy or unwholesome condition as to affect or endanger health ; or if such purification is requisite to prevent risk of, or to check the spread of, infectious disease. The Sanitary Authority will have to compensate the owner if unnecessary damage is done, and to reasonably compensate him for any articles destroyed.

Section 20 enables the Sanitary Authority to require the cleansing of houses infested with vermin upon notice in writing to the owner or occupier of a house (or part thereof), requiring him within a specified period to cleanse such house or any portion thereof ; and, if so required, to remove the wall-paper, and to take such other steps for the purpose of destroying and removing vermin as the case may require. The person on whom the notice is served becomes liable, on summary conviction, to a fine not exceeding ten shillings for every day during which

he makes default in complying with the requirements of the notice ; and the Sanitary Authority may, after the expiration of the period specified in the notice, do any work required by the notice, and recover all reasonable costs and expenses incurred in so doing from the persons making default.

Section 21 enacts that section 59 of the Public Health (London) Act, 1891, "shall for the purposes" of the above-mentioned Sections 19 and 20, "extend and be applicable to the provision of means" for giving effect to these "as if the said section were re-enacted herein and in terms made applicable thereto."

Section 22 enables the Sanitary Authority to require the removal or alteration of sanitary conveniences (urinals, etc.) accessible from any street, if so placed or constructed as to be a nuisance or offensive to public decency. The owner on whom the notice is served becomes liable, on summary conviction, for failure to comply therewith within a reasonable time, to a fine not exceeding five pounds, and to a further fine not exceeding twenty shillings a day for continued default after such conviction.

Section 23 enables the Sanitary Authority to enforce the removal of a fixed ashpit where a moveable ashpit, "conforming with the requirements of any Bye-law or Order made under any statutory power or authority in that behalf," shall have been provided. There is a fine, on summary conviction, for default in complying with the notice within the prescribed period, of not exceeding twenty shillings, and a further penalty not exceeding ten shillings a day, for continued default after such conviction. The Sanitary Authority may, if they think fit, bear any reasonable cost and expenses, or part thereof, incurred in executing work under this Section.

Section 24 gives the Sanitary Authority power of entry if they have reasonable cause to suppose any house, or part thereof, contains filthy, dangerous, or unwholesome articles, requiring to be purified (Section 19), or is "infested with vermin" (Section 20). It also gives power of entry to any house, premises, etc., for the purpose of

examining whether there is any contravention of the provisions of this part of the Act, or any non-compliance with the requirements of any notice given thereunder.

Section 48 enacts that any pecuniary penalty inflicted in consequence of proceedings taken by a Sanitary Authority against any person in respect of any offence under "Part VIII. (Ice-creams)" of the County Council's (General Powers) Act, 1902, shall be payable and paid to such Sanitary Authority.

Part V. of the Act, dealing with "Tuberculosis of the Udder in Cows," enables the County Council's veterinary surgeon to cause any cow suspected by him to be suffering from that disease, to be removed from any dairy farm or cowshed situate in the county, and, after valuation (with a view to settling the amount of compensation payable to the owner) to be slaughtered.

During the year an important Conference was convened by the London County Council in order to deal with the administration of the Public Health (London) Act, 1891, and the Conference was largely attended. It seems desirable, therefore, to place on record the following important Resolutions which were passed at that Conference:—

I.—Sanatoria for persons suffering from Consumption should be provided by one Authority, and that, the Metropolitan Asylums Board.

II.—Having regard to the declining Birth-rate and the large Infantile Mortality Rate in the Metropolis, the Conference held that it was desirable that the Borough Councils should be empowered, at their discretion, to establish Crèches for the reception of young children during the hours their mothers are employed in work away from home, and to make reasonable charges for the accommodation so provided and for the food of the children.

III.—A Resolution in similar terms was adopted in favour of Borough Councils providing in their respective districts depôts for

the preparation and sale of sterilised and humanised milk for the food of infants. These would be particularly useful in connection with the work of Crèches in some of our poorer boroughs.

IV.—The Conference requested the County Council to insert a clause in their General Powers Bill for the Session of 1905 enabling them to make bye-laws for the Regulation of the structure of premises where food is prepared for sale and also a clause to enable them to make bye-laws for regulating the conduct of the business carried on thereat.

V.—The Conference urged the desirability of powers to enable Borough Councils to refuse the registration of premises unfitted for the sale of milk.

VI.—The Conference also resolved that the Local Government Board and the Board of Agriculture should be asked to take steps to fix the limit as to the amount of boracic acid or other preservative which may be mixed with food other than milk.

VII.—The Conference declared against any rental limit of exemption in the case of Houses Let-in-Lodgings, and

VIII.—They expressed the opinion that the business of a Marine Store dealer and that of a Fried Fish-shop keeper should be added to the list of offensive trades specified in Section 19.

IX.—The Conference also resolved that the time had come when private Slaughter-houses should cease to exist in London, and that all meat that is killed should be inspected.

Among other matters Resolutions were passed—

X.—In favour of a separate water supply for the tenements on each floor of tenement houses, and

XI.—The inspection of sleeping accommodation in shops where the assistants are boarded in.

During the year the City of London has initiated a reform in the sanitary circumstances of barbers' shops, and there are signs that this lead will be followed generally throughout the Metropolis. There is no doubt, whatever, that a certain amount of communicable disease is spread by the combs, brushes, sponges, etc., used by barbers. With the exception of Syphilis which has (though rarely) been communicated in barbers' shops, the diseases contracted, though very unpleasant, are not such as affect the health or life of individuals. They include Ringworm and some other allied conditions, "Barbers'-itch," and a condition which is responsible for bald patches and which is also due to a parasite. Many countries have adopted regulations for controlling hairdressers and barbers, and amongst them are Japan, some parts of the German Empire, Sweden, the City of New York, and even Uruguay and San Salvador. The simple precautions in the interest of the customer are not difficult to practise ; they include the washing of the hands before attending to a fresh customer, a fresh towel for every new customer, the head (in shaving) to rest on a clean piece of paper or a fresh towel, the dipping of razors, etc., into boiling water after each occasion of use, the replacing of powder-puffs by cotton-wool, etc. (which is to be burnt after use), the requirement that no one suffering from any infectious disease of the scalp or face should be served in a public hairdresser's shop. The use of sponges is prohibited, and the floors must be swept or mopped every day, and the rooms generally kept in a sanitary condition. The Borough Council has expressed its willingness to co-operate with the Incorporated Guild of Hairdressers in an effort to obtain the observance of these precautions in the barbers' shops within the Borough.

FOOD AND DRUGS.

Under the Sale of Food and Drugs Acts, 156 samples of food and drugs were taken and analysed. The results are shown in Table C. Seven of the samples were not satisfactory, and, therefore, the percentage of non-genuine samples amounted to about 4·5 per cent., a figure which is less than half of that of the preceding year, when it

was 9·9 per cent. The figure for the whole country was 7·9 per cent. during the year 1903.

9·8 per cent. of the milk samples were unsatisfactory, as against 9·1 per cent. during the preceding year. 19 per cent. of the samples of milk taken on Sundays were adulterated. There were three convictions obtained for selling margarine contrary to the provisions of the Act.

According to the thirty-third Annual Report of the Local Government Board, the total number of samples analysed under the Sale of Food and Drugs Act during the official year 1903, shows an increase of 5,756 samples over the figures of the previous year. In spite of this further activity on the part of the authorities the return showed a smaller percentage of adulterated samples than in the previous year. In London, one sample was analysed for every 233 persons, being at the rate of 4·3 per 1,000 of the population: and in the provinces, one for every 478 of the population, or 2·1 per 1,000. It will be seen from the Table on page 59 that the proportion of samples reported against was 7·9 per cent. of those examined, a rate of adulteration which is less than one-half of that which prevailed in the five years 1877-81.

In 1902 8·7 per cent. of the total samples analysed proved to be adulterated, while in 1903 the percentage adulterated was 7·9. There was, however, an increase in the amount of adulterated samples of cocoa, and but a slight diminution in the samples of adulterated milk (10·4 per cent.). London is at the head of the list again as regards the extent of adulteration of milk, the result showing 13·5 per cent. of samples condemned as against 10·7 per cent. in provincial towns and 8·5 per cent. in the country. There is little doubt that the adulteration of milk does not take place to any large extent in the country, and the inference is that the water is generally added in London. It is satisfactory to know that the fines imposed show an increase in individual cases, though still, in many instances, the amounts inflicted are not calculated to check adulteration as effectually as larger sums would do.

The rate of butter adulteration in England and Wales, which was 10·3 per cent. in 1901 and 6·5 in 1902, fell to 5·5 in 1903. In 1887, the year in which the Margarine Act was passed, the rate of butter adulteration was 17·5 per cent. In London and the next twenty largest towns taken together, the rate of adulteration in 1903 was 7·3 per cent., and in the rest of the country 3·6 per cent.

In the past four years 9·7 per cent. of the samples of sugar analysed have been condemned.

The percentage of adulterated samples of drugs showed a trifling increase over that recorded in the previous year. Seidlitz powders continue to be adulterated to the extent of one-fifth of the samples procured for analysis. The percentage of spirits reported against in 1903 was 11·8, which, it is interesting to remark, is the lowest on record since the passing of the Act of 1875. The adulteration refers only to the addition of water. It is pointed out in the Report that in the case of a large number of watered samples obtained from licensed houses, prosecutions cannot effectively be instituted on account of the common practice of exhibiting notices in the bars of such houses, stating that all spirits sold in the establishment are diluted. Similar notices are now being exhibited stating that the brandy sold cannot be guaranteed as consisting entirely of grape spirit. This method of evading the provisions of the Act should be overcome in some way, and a publican should be summarily dealt with who refuses to supply a standard article.

It is obvious that steady consistent work is being done under the operation of the Sale of Food and Drugs Act, and that the public analysts are carrying out their share of the work as efficiently as the provisions of the Act enable them to do.

Table showing the results of Analyses of Samples taken under the Sale of Food and Drugs Acts, during the year 1903 in England and Wales :—

	Percentage Adulterated.	
	1903.	1902.
Milk	10·4	11·6
Butter	5·5	6·5
Cheese	1·4	1·9
Margarine	3·5	7·7
Lard	0·8	1·6
Bread	—	0·4
Flour	0·6	1·4
Tea	—	—
Coffee... ..	6·4	7·3
Cocoa... ..	15·3	13·3
Sugar... ..	8·1	8·2
Mustard	4·8	5·1
Confectionery and Jam	4·1	2·8
Pepper	2·9	1·8
Wine	17·8	26·6
Beer	2·3	3·5
Spirits	11·8	12·3
Drugs... ..	9·6	9·5
Other Articles	6·0	7·2
All Articles... ..	7·9	8·7

As a rule the penalties inflicted for breaches of the provisions of the Sale of Food and Drugs Acts are far too low to exercise any deterrent effect upon the practice of adulteration, which is usually a remunerative one. The refusal of Magistrates to convict unless there is sufficient adulteration to reduce the quality of milk much below the standard is responsible for the escape of many offenders. It seems desirable to inflict heavy penalties for repeated offences of this nature in order that the regular and systematic defrauder should be sufficiently penalised, whereas the vendor of an accidental sample of poor milk should be allowed to escape with a caution.

The large majority of the samples purchased in Stoke Newington during the year were taken by deputy, viz., someone else was employed to purchase the samples for the Inspector. It should be stated, however, that in the great majority of these instances the deputy was the same individual, namely, Mr. Screach, who is the officer engaged by the Council to carry out the disinfection in the Borough.

I hope during the ensuing year to have a larger number of samples taken by individuals who are not in the employ of the Council.

The practice of taking the samples without formalities in order to obtain information as to what persons are contravening the Acts with the view to further sampling and prosecutions, is sometimes an effective means of detecting fraud, and during the year samples were purchased with this end in view. After the purchaser had become familiar to the tradesmen a few samples were then taken under the provisions laid down by the Acts, but these samples proved to be satisfactory in each instance.

A pure milk supply is at the present day one of the greatest sanitary needs of the Metropolis, and if we can also teach the masses the great importance of keeping the milk clean after it arrives in

their homes, many hundreds of infant lives will be spared in London alone. The existing Regulations in force in the Metropolis under the Dairies, Cowsheds and Milkshops Order of 1885 were designed 20 years ago to deal with a very different state of matters from that which now exists. The framers of the Regulations had in view a city supplied with milk by a large number of dairymen, each of whom kept a few cows which were housed either within the Metropolitan area or in the immediate neighbourhood. Very few cows are now kept within this area, and the milk supply is now in the hands of a relatively small number of companies and individuals who obtain over 80 per cent. of the milk they supply from rural districts, often far distant from the Metropolis, where the farmers are under practically no sort of sanitary supervision or control.

Each Sanitary Authority in the Metropolis should be in possession of the information as to where the milk consumed in the Borough comes from, and should also have the power of requiring that conditions similar to those laid down in the Regulations are observed, and in addition that the cows are kept clean and the hands of the milkers washed prior to milking. They should also require that better arrangements are made for the proper conveyance of the milk from the farmers to the distributors. Arrangements ought also to be made for a frequent and thorough Veterinary Inspection of the cows.

It is an anomaly that although the cowsheds and cows of the Metropolis are kept up to a very fair standard the milk supply of London should be so bad. The explanation of course is that any milk, however filthy the conditions of its collection at the farm, finds a ready market in London; whereas in the locality where it is produced the dairy farmer might find it impossible to dispose of it; certainly to those who know all the local facts of its collection.

TABLE C.

ANALYSES PERFORMED UNDER THE SALE OF FOOD AND
DRUGS ACTS DURING THE YEAR.

No.	Sample Analysed.	Opinion Formed.	Action Taken.
*1	Milk	Genuine	Nil.
*2	Milk	23% of added water	Defendant fined £10 and 12s. 6d. costs, or one month.
*3	Milk	Genuine	Nil.
*4	Milk	" " " "	"
5	Magnesia	" " " "	"
6	Seidlitz Powders ...	" " " "	"
7	Coffee	" " " "	"
8	Coffee	" " " "	"
9	Butter	" " " "	"
10	Gin	" " " "	"
11	Coffee	" " " "	"
12	Demarara Sugar ...	" " " "	"
13	Demarara Sugar ...	" " " "	"
14	Butter	" " " "	"
15	Gin	" " " "	"
16	Irish Whisky	" " " "	"
17	Gin	" " " "	"
18	Gin	" " " "	"
19	Gin	" " " "	"
20	Stout	" " " "	"
21	Porter	" " " "	"
22	Ale	" " " "	"
*23	Milk	" " " "	"
*24	Milk	12% of added water	Defendant fined £2 and 12s. 6d. costs.
*25	Milk	Genuine	Nil.
*26	Milk	" " " "	"
*27	Milk	4½% of added water	Defendant fined £2 and 12s. 6d. costs.
*28	Milk	2½% of added water	Vendor cautioned.
29	Mixed Sweets ...	Genuine	Nil.
30	Butter	" " " "	"
31	Butter & Margarine	" " " "	"
32	Butter	" " " "	"
33	Oatmeal	" " " "	"
34	Wheat Flour	" " " "	"
35	Coffee	" " " "	"
36	Butter	" " " "	"
37	Coffee	" " " "	"
38	Milk	" " " "	"
39	Margarine	1% of water beyond legal limit.	"
40	Milk	Genuine	"
41	Coffee	" " " "	"

* Sunday Samples.

TABLE C—Continued.

No.	Sample Analysed.	Opinion Formed.	Action Taken.
42	Milk	Genuine	Nil.
43	Camphorated Oil...	"	"
44	Seidlitz Powders ...	"	"
45	Coffee	"	"
46	Milk	"	"
47	Milk	"	"
48	Milk	"	"
49	Gin	"	"
50	Butter	"	"
51	Butter	"	"
52	Margarine (Un- labelled).	"	Defendant fined 2s. 6d. and 12s. 6d. costs.
53	Gin	"	Nil.
*54	Milk	"	"
*55	Milk	"	"
*56	Milk	"	"
*57	Milk	"	"
*58	Milk	"	"
59	Butter	"	"
60	Milk	"	"
61	Oatmeal	"	"
62	Milk	"	"
63	Butter	"	"
64	Mixed Sweets ...	"	"
65	Milk	"	"
66	Vinegar	"	"
67	Butter	"	"
68	Butter	"	"
69	Coffee	"	"
70	Brandy	"	"
71	Brandy	"	"
72	Coffee	"	"
73	Milk	"	"
74	Milk	"	"
75	Milk	3% deficiency in fat	Vendor cautioned.
76	Margarine (Un- labelled).	—	Defendant fined 7s. and 12s. 6d. costs.
77	Milk	Genuine	Nil.
78	Milk	"	"
79	Milk	"	"
80	Butter	"	"
81	Coffee	"	"
82	Butter	"	"
83	Scotch Whiskey ...	"	"
*84	Milk	"	"
*85	Milk	"	"
*86	Milk	"	"

* Sunday Samples.

TABLE C—Continued.

No.	Sample Analysed.	Opinion Formed.	Action Taken.
*87	Milk	Genuine	Nil.
*88	Milk	"	"
*89	Milk	"	"
90	Ice Cream	"	"
91	Flour	"	"
92	Oatmeal	"	"
93	Scotch Whiskey ...	"	"
94	Ice Cream	"	"
95	Coffee	"	"
96	Mercurial Ointment	"	"
97	Magnesia	"	"
98	Milk	"	"
99	Milk	"	"
100	Milk	2% added water ...	Vendor cautioned.
101	Milk	Genuine	Nil.
102	Coffee	"	"
103	Butter	"	"
104	Butter	"	"
105	Milk	"	"
106	Prescription	"	"
107	Milk	"	"
108	Milk	"	"
109	Pepper (White) ...	"	"
110	Coffee	"	"
111	Cheese	"	"
112	Flour	"	"
113	Mixed Sweets	"	"
114	Cheese	"	"
115	Flour	"	"
116	Butter	"	"
117	Mixed Sweets	"	"
118	Coffee	"	"
119	Butter	"	"
120	Demarara Sugar ...	"	"
121	Butter	"	"
122	Milk	"	"
123	Milk	"	"
124	Milk	"	"
125	Milk	"	"
126	Milk	"	"
127	Milk	"	"
128	Milk	"	"
129	Milk	"	"
130	Milk	"	"
131	Milk	"	"
132	Mustard	"	"
133	Beef Dripping	"	"
134	Cocoa	"	"
135	Milk (Separated) ...	"	"

* Sunday Samples.

TABLE C—*Continued.*

No.	Sample Analysed.	Opinion Formed.	Action Taken.
136	Gin	Genuine	Nil.
137	Butter	"	"
138	Butter	"	"
139	Margarine (Un- labelled)...	—	Defendant fined 10s. and 12s. 6d. costs.
140	Preserved Peas (Tinned)...	Genuine	Nil.
141	Butter	"	"
142	Jam (Black Currant)	"	"
143	Baking Powder ...	"	"
144	Camphorated Oil...	"	"
145	Boracic Acid ...	"	"
146	Milk	"	"
147	Milk	"	"
148	Milk	"	"
149	Milk	"	"
150	Flour	"	"
151	Milk	"	"
152	Milk	6% deficiency in fat	Defendant fined £2 and 12s. 6d. costs.
153	Gin	Genuine	Nil.
154	Lard	"	"
155	Milk	"	"
156	Demarara Sugar ...	"	"

METROPOLITAN BOROUGH OF STOKE NEWINGTON.

REPORT OF CHIEF SANITARY INSPECTOR FOR THE YEAR 1904.

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

GENTLEMEN,

I beg to present to you my Annual Report for the year ending 31st December, 1904:—

HOUSES AND PREMISES INSPECTED.

By house-to-house inspection	...	...	...	...	...	879
Upon complaint, under Sec. 107 (3), Public Health Act, 1891	...	...	...	...	...	255
After notification of infectious disease	...	...	...	...	...	451
After Notices from builders, under Bye-law 14 (London County Council)	...	...	...	...	...	164
Stables and mews	...	...	...	...	...	341
Slaughter houses	...	...	...	...	...	16
Milkshops, dairies and cowsheds	...	...	...	...	...	35
Bakehouses	...	...	...	...	...	28
Factories and workshops	...	...	...	...	...	384
Other premises inspected	...	...	...	...	...	936
						3,489
Re-inspections made to see that the work required under intimation and statutory notices is properly carried out						4,232
Total inspections						7,721

INTIMATION NOTICES SERVED.

(Sec. 3, Public Health Act, 1891.)

After house-to-house inspection	...	...	...	...	...	439
After inspection on account of complaint...	...	...	...	...	...	170
After infectious illness	...	...	...	...	...	80
With reference to stables and mews	...	...	...	...	...	31
" " milkshops, dairies and cowsheds	...	...	...	...	...	2
" " bakehouses	...	...	...	...	...	Nil.
" " factories and workshops	...	...	...	...	...	83
After sundry other inspections	...	...	...	...	...	242
						1,047

STATUTORY NOTICES SERVED.

Thirty-one statutory notices were authorised by your Committee to be served under Sec. 4, Public Health Act, 1891.

NUISANCES ABATED AND SANITARY DEFECTS
REMEDIED.

Dirty premises, cleansed and whitewashed	...	...	...	...	113
Dampness in dwellings corrected	...	...	...	...	70
Dilapidated ceilings, stairs, &c., repaired	...	...	...	...	28
Bell-traps and small dip-traps removed and replaced by syphon gulleys	...	...	...	...	52
Foul traps and pans of w.c.'s cleansed or new ones substituted	}				129
Public-house urinals cleansed					
Flushing cisterns to w.c.'s provided or repaired, and w.c.'s with insufficient water supply made satisfactory	...	...	...	...	118
Defective w.c. basins and traps removed and replaced by approved patterns	...	...	...	...	193
Stopped or choked w.c. traps cleared	...	...	...	...	25
External ventilation to w.c.'s improved	...	...	...	...	19
W.c.'s removed to more sanitary positions	...	...	...	...	9
Carried forward					756

	Brought forward	...	756
Separate Flushing cisterns fixed to w.c.'s which were previously flushed directly from dietary cistern...	...	...	3
Additional w.c.'s provided in case of insufficient w.c. accommodation...	...	...	1
Defective soil-pipes replaced	...	...	83
Unventilated soil-pipes ventilated	...	...	} 257
Soil-pipes improperly ventilated, improved.	...	...	
Dirty yards cleansed	...	...	4
Yards paved or re-paved with impervious material	...	...	53
Gulley and other traps inside houses or other premises removed to outside	...	...	62
Sink waste-pipes directly connected to drain, made to discharge in open-air over proper syphon gulleys	...	...	20
Long lengths of sink, bath, and lavatory waste-pipes trapped, and made to discharge in open-air over gulleys, hopper-heads, &c.	...	...	232
Defective waste-pipes repaired	...	...	38
Foul water-cisterns cleansed	...	...	} 67
Water-cisterns without close-fitting covers provided with proper coverings	...	...	
Defects in water-cisterns remedied	...	...	15
Defective dust-bins repaired, or new portable dust-bins provided			156
Defective drainage re-constructed in accordance with the bye-laws of London County Council	...	...	384
Choked or stopped drains cleared and repaired	...	...	223
Rain water pipes disconnected from drains	...	...	} 104
Rain water pipes disconnected from soil-pipes	...	...	
Proper water supply provided to houses	...	...	8
Defective roofs of houses repaired	...	...	38
Defective guttering and rain water pipes of houses repaired or renewed	...	...	31
Defective paving to floors of wash-houses repaired or renewed	...	...	14
Dirty walls of work-rooms cleansed	...	...	20
Carried forward			2,569

	Brought forward	... 2,569
Proper manure receptacles provided (London County Council bye-laws)		12
Cases of over-crowding abated		8
Insufficiently ventilated space under wooden floors, remedied by insertion in outer walls of proper air bricks		27
Total number of nuisances abated		<u>2,616</u>

In addition to the above a number of nuisances have been abated as the result of personal advice to the occupiers of premises.

SLAUGHTER HOUSES.

The eight Slaughter-houses in the Borough have been frequently inspected, and are in a satisfactory condition.

COMMON LODGING HOUSES.

The one common Lodging-house in the Borough is under the control of the London County Council, and is maintained in accordance with the bye-laws.

BAKEHOUSES.

There are 28 Bakehouses in the Borough, 20 of these being constructed underground. They have been twice inspected during the year, and found to be kept in a satisfactory condition.

DAIRIES, COWSHEDS, AND MILKSHOPS

There are 51 Milkshops and 2 Cowsheds in the Borough, all of which have been inspected. Two intimation notices were served during the year on occupiers to cleanse premises.

COMPLAINTS.

Sec. 107 (3) Public Health Act, 1891.

255 complaints were received during the year.

In 48 cases, on inspection of the premises to which the complaint related, no nuisance was found to exist.

54 complaints were referred, after inspection, to the Surveyor's Department.

165 intimation notices were served on the owners and occupiers of premises complained of.

STABLES AND MEWS.

Considerable attention was given to the inspection of Stables and Mews, especially during the summer months. 341 visits were paid in connection with these premises and in very few cases were accumulations of manure found. Copies of the Regulations of the Council have been kept posted up at all the Mews in the Borough.

HOUSES LET IN LODGINGS.

39 premises were added to the Register during the year, making a total of 219 premises now on the Register.

SALE OF FOODS & DRUGS ACTS, 1875-1901.

156 samples of Food and Drugs have been submitted to the Public Analyst during the year. A table will be found on page 78 showing the result of proceedings taken in respect of adulterated samples.

BUTCHERS, GREENGROCERS, FISHMONGERS, &c., SHOPS.

These have been frequently inspected with a view to seizure of any unsound food exposed for sale or intended for sale as food of man. In

several instances it was found necessary to advise the shopkeepers to destroy small quantities of Meat, Fruit and Fish.

In October, your Committee decided on a monthly inspection of these premises. The inspections are often made on Saturday nights. Following is a list of the articles seized or surrendered and destroyed during the year :—

				cwt.	qrs.	lbs.
Pork	...	..	...	4	2	9
Beef	...	...	...	1	1	4
Mutton	...	...	...			26
Fish	...	...	...		2	4
Fruit	...	...	...			12
Total				6	2	27

A record is kept of all premises on which food is seized or destroyed.

HOUSE-TO-HOUSE INSPECTION.

Inspections have been made in the following streets during the year :—

Allerton Road	Pellerin Road
Brownswood Road	Philp Street
Cowper Road	Queen's Road
Finsbury Park Road	Rochester Court
Harcombe Road	St. Andrew's Mews
Howard Road	Sandbrook Road
Lordship Park Mews	Shakespeare Road
Matthias Road	Spenser Road
Mason's Court	Thomas Place
Mason's Place	Watson Street
Milton Road	Wilberforce Road
Oldfield Road	Woodland Road.

The houses and premises inspected during the year in these streets numbered 879.

SMOKE ABATEMENT.

A Register is kept of all factory chimneys in the Borough which have been seen to emit black smoke, or regarding which a nuisance has been complained of.

These are watched from time to time, and a record made of the result of observations. On three occasions during the year it has been necessary to caution.

ICE CREAM MANUFACTURERS AND VENDORS.

Copies of the London County Council Regulations in English and Italian have been circulated in the Borough, and the premises inspected. A Register is kept of all premises and persons to which the Regulations apply.

There are 35 manufacturers of ice-creams in the Borough.

RESTAURANTS AND EATING HOUSES.

There are 23 of these premises in the Borough. The inspections have usually been made at the time when food is being prepared. It was not found necessary to serve any notices in respect of these premises during last year.

REMOVAL OF HOUSE REFUSE.

A reference to the Report of the Borough Surveyor will show the number of loads removed during the year, with the cost of removal, etc. The Dust Knockers report daily to the Sanitary Inspectors, giving a list of houses where refuse was not removed on the previous day, with cause of such non-removal.

FACTORIES AND WORKSHOPS.

The Register of Factories and Workshops has been maintained. There are at present 194 Factories and Workshops in the Borough, all of which were inspected during the year. In addition to these there are 117 Workrooms which are used as domestic workshops, or by out-workers.

Of the outworkers working for firms whose places of business are in Stoke Newington—

	86	reside in Stoke Newington.
	57	„ „ Hackney.
	23	„ „ Islington.
	17	„ „ Tottenham.
	8	„ „ Stepney.
	5	„ „ Shoreditch.
	4	„ „ Bethnal Green.
	3	„ „ Edmonton.
	1	„ „ Poplar.
	1	„ „ Hornsey.
	1	„ „ Wood Green.
Total	<u>206</u>	

Notifications were received from Medical Officers of Health of persons residing in Stoke Newington who work for firms in other Districts as follows :—

	94	from Finsbury.
	45	„ Hackney.
	29	„ Islington.
	10	„ Shoreditch.
	10	„ City of London.
	2	„ Kensington.
	2	„ Stepney.
	2	„ Hornsey.
	1	„ Bermondsey.
	1	„ Bethnal Green.
	1	„ Southwark.
	1	„ Paddington.
	1	„ St. Marylebone.
	1	„ Wandsworth.
Total	<u>200</u>	

There is a total of 607 houses and premises (exclusive of bake-houses) in the Borough which come under the operation of the Factory and Workshops Acts

NOTIFICATION OF INFECTIOUS DISEASE.

Four hundred and fifty-one cases were notified during the year, and in most instances an inspection of the premises was made.

All the houses where the cases of infectious illness occurred have been disinfected ; 340* by the Department, and the remainder under the supervision of the Medical Practitioner attending the case. The bedding, clothing, etc., were removed, steamed, disinfected, and returned in 287 instances.

It was found necessary to strip and cleanse 64 rooms after removal or recovery of patients.

One hundred and sixty books which had been borrowed from the public library were collected from infected houses, and either disinfected, and returned to the Public Library or destroyed.

* This includes disinfections on request of householders, after cancer, phthisis, etc.

PROSECUTIONS UNDER THE PUBLIC HEALTH ACT, 1891,
AND BYE-LAWS OF THE LONDON COUNTY COUNCIL.

No. in Report Book.	Situation of Premises	Nature of Offence.	Result of Proceedings.
3391	382, Green Lanes	Improperly re- pairing drain.	Fined 10s. and 2s. costs.
3970	360, Green Lanes	Executing work without pre- viously giving notice to sani- tary authority.	Fined 10s. and 2s. costs.
3970	360, Green Lanes	Improperly exe- cuting above work (2 sum- monses.)	Fined 20s. and 2s. costs, and 10s. and 2s. costs.
4268 to 4272	1, 3, 5, 7, 9 and 11, Oldfield Road	Defective drains (6 summonses.)	Order made to abate nuisance within 14 days. 2s. costs in each case.
4562	2, Allen Road	No water supply to house.	Closing order made. 2s. costs.
4338	3, The Pavement, Broughton Road	Executing work without pre- viously giving notice to sani- tary authority.	Ordered to pay 2s. costs.
4562	2, Allen Road ...	Executing work without pre- viously giving notice to sani- tary authority.	Fined 20s. and 2s. costs, or 7 days in default.
4562	2, Allen Road ...	For knowingly and wilfully acting contrary to a closing order.	Fined £10 and 2s, costs, or 2 months' imprison- ment.
4350a	—	Selling ice cream from barrow without exhi- biting name on same.	Fined 5s. and 2s. costs.
4364	177, High Street ...	Depositing un- sound meat for sale.	S u m m o n s dismissed. £3 3s. costs.

DRAINAGE APPLICATIONS.

Seventy plans were submitted referring to the drainage of 107 premises, and all of these were eventually approved of.

Copies of the bye-laws of the London County Council relating to the deposit of plans for drainage work are issued with all plan forms.

TABLE OF PROSECUTIONS UNDER THE SALE OF FOOD AND DRUGS AND MARGARINE ACTS.

No. of Sample.	Article Purchased.	Result of analysis.	Result of proceedings.
30	Milk	23 per cent. of added water.	Defendant fined £10 and 12s. 6d. costs, or one month.
52	Milk	12 per cent. of added water.	Defendant fined £2 and 12s. 6d. costs.
55	Milk	4½ per cent. of added water.	Defendant fined £2 and 12s. 6d. costs.
80	Margarine (unlabelled)	Margarine	Defendant fined 2s. 6d. and 12s. 6d. costs.
104	Margarine (unlabelled)	Margarine	Defendant fined 5s. and 12s. 6d. costs, and 2s. for label.
167	Margarine (unlabelled)	Margarine	Defendant fined 10s. and 12s. 6d. costs.
180	Milk	6 per cent. deficiency in fat.	Defendant fined £2 and 12s. 6d. costs.

By direction of the Council, several vendors of poor samples of food taken under above Acts have been cautioned.

I am, Gentlemen,

Your obedient Servant,

D. W. MATTHEWS.

A LIST OF THE STREETS SITUATED IN THE BOROUGH OF STOKE NEWINGTON.

A DEN Grove
Aden Terrace
Adolphus Road
Allen Road
Allerton Road
Albion Road
" Grove
Alexandra Road
Amhurst Park
Arthur Road
Ayrson Road
Aldham Place

BARN Street
Barrett's Grove
Bethune Road (1 to 145)
" " (2 to 106)
Blackstock Road
Bouverie Road
Boleyn Road
Brighton Road
Brodia Road
Broughton Road
Brownswood Park
" Road
Burma Road

CASTLE Street
Carysfort Road
Chalmers Terrace
Chapel Place
Chesholm Road
Church Path
" Road
" Street
Clonbrock Road
Clissold Road
Cowper Road
Cressington Road

DEFOE Road
Digby Road
Dumont Road
Dynevor Road
EADE Road
Edward's Lane

FAIRHOLT Road
Falcon Court
Finsbury Park Road
Fleetwood Street

GAINSBORO Road
Gloucester Road
Goldsmith Square
Gordon Road
Grange Court Road
Grazebrook Road
Grayling Road
Green Lanes
" " (from 2 to 378)
" " (" 45 " 107)
Grove Lodge Yard

HAMILTON Place
Harcombe Road
Hawksley Road
Hayling Road
Heathland Road
Henry Road
Hermitage Road
High Street
Hornsey Place
Howard Road

KERSLEY Road
Kings Road
Knebworth Road
Kynaston Road
" Avenue

LANCELL Street
Laver's Road

Lavell Street
Leonard Place
Lidfield Road
Lillian Street
Listria Park
Londesborough Road
Lordship Road
 " Grove
 " Park
 " Terrace

MANOR Road
Martaban Road

Marton Road
Mason's Court
 " Place
Matthias Road
Millard Road
Milton Road
Mountgrove Road

NEVILL Road
Newington Green

OLDFIELD Road
Osterley Road

PAGET Road
Painsthorpe Road

Palatine Road
Paradise Row
Park Crescent
 " Lane
 " " Terrace
 " Street
Pellerin Road
Philp Street
Portland Road
Prince George Road
Princess Road
Princess May Road

QUEEN Elizabeth Walk
Queens Road

REEDHOLM Road
Rochester Court
Riversdale Road

SANDBROOK Road
Salcombe Road
Seven Sisters Road
Shakespeare Road
Shellgrove Road
Shipway Terrace
Somerfield Road
Spenser Road
Springdale Road
St. Kilda's Road
St. Andrew's Road
 " Mews
 " Pavement, S. Side
St. John's Place
Stamford Hill
Stoke Newington Road
Statham Grove
Summerhouse Road

THOMAS Place
Truman's Road

VICTORIA Grove
Victoria Grove West
Victoria Road

WALFORD Road
Warwick Road

Watson Street
White Hart Yard
Wiesbaden Road
Wilberforce Road
Winston Road
Wordsworth Road
Woodland Road
Woodlea Road
Woodberry Down
Woodberry Grove