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

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THE

Metropolitan Borough of Stoke Newington.

REPORT

OF THE

Medical Officer of Health and Public Analyst,

FOR THE

YEAR 1907.

BY

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1908.

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REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1907.

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

GENTLEMEN,

The vital statistics of the Borough for the year 1907 are of the usual satisfactory nature. The general death-rate of 11.2 is the lowest recorded since the formation of the Borough. With the exception of that for the Borough of Hampstead, it is the lowest in the Metropolis; and it compares very favourably with the rate of 14.6 for the Metropolis as a whole.

During the year 1907, the rate of infantile mortality (the number of deaths under one year of age to every thousand births) amounted to only 97.9. It is the lowest since the formation of the Borough, but five other Metropolitan Boroughs have a lower rate, namely: St. Mary'ebone 68, Hampstead 72, Holborn 89, Lewisham 90, and the City of London 97. At the present day, the effort to stem the wastage of infant lives constitutes the most urgent need of the community. To this end many sanitary authorities have obtained the services of women workers, who are mostly salaried officials. In Stoke Newington, five ladies give their services voluntarily to the Borough; and, under my direction, and with the capable assistance of Miss Gardner, they have visited and advised many mothers who stood in need of their assistance. Valuable as these services have proved, there is an urgent need in the Borough for the appointment of one of those paid female officials who are now doing such good work under several of the sanitary authorities of the Metropolis. The Notification of Births Act (1907) has increased the urgency of this provision. A further reference to this work is made on pp. 15 to 17 of this report.

The Infectious Sickness-Rate (7·5) for the year 1907 is the highest recorded since 1902, a fact due to the exceptional prevalence of Scarlet Fever and Diphtheria in the Metropolis during a large part of the year. The Death-Rate in Stoke Newington from the chief communicable diseases is, however, the lowest yet recorded.

The low death-rate from Consumption is a noteworthy feature of the past year, as of the year 1906. Another year's experience of the Voluntary Notification of the disease serves to further impress the inadequacy of that measure, and the desirability of obtaining compulsory notification.

Again I am able to record my satisfaction with the manner in which the work of the Department has been carried on by the members of the staff, and also with the good record of work, which is testified to in the appended Report of the Chief Sanitary Inspector.

I am, Gentlemen,

Your obedient Servant,

HENRY KENWOOD.

February 26th, 1908.

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 1907, and the figure, calculated logarithmically from the increase between 1891 and 1901, amounts to 53,395. 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 April, 1907, amounted to only 7,886, 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, in some parts of the Borough the average number of occupants per house has increased during the past few years; and when in addition to this circumstance allowance is made for the number of residents in the large block of Industrial Dwellings in Victoria Road, occupied since the last Census enumertion, the estimate should be a very close one.

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

The Northern Division of the Borough (lying North of the middle line of Church Street) has a population of about 18,620; and in the Southern Division the population is about 34,775.

The natural increase of population by excess of births over deaths during the year amounted to 443, as against 472 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 61.9 people to the acre.

Births—Birth-rate.—During the year 1907 there were 1,042 births registered in the Borough, viz.—544 males and 498 females.

The birth-rate per 1,000 per annum was therefore 19.5 as against 20.4 for the preceding year. The birth-rate for the Northern Division of the Borough was about 12.0, while that for the Southern Division was 24.9.

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
1905 ..	20·2	27·1	27·2
1906 ..	20·4	26·6	27·0
1907 ..	19·5	25·8	26·3

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 452 deaths of residents registered in the Borough, and 147 of residents who died in Public Institutions outside of the Borough, making a total of 599 deaths. Of these 297 were of females and 302 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
1905 ..	12·6	15·1	15·2
1906 ..	11·5	15·7	15·4
1907 ..	11·2	14·6	15·0

The recorded general death-rate is therefore 11.2. 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 nature 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* 11.2 × 1.04443, 11.7 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 14·6.

During the year two of the monthly death-rates were the lowest ever recorded in the Borough. For four weeks in July the death-rate was only 7.8, and for a similar period in September it only reached 6.4. We have to go back for the next lowest monthly rate to July, 1901, when the rate was 8.1.

District Mortality.—The deaths among residents of the Northern Division of the Borough numbered 179 and furnished a recorded death-rate of 9.6 per 1,000 per annum.

The deaths among the residents of the Southern Division of the Borough numbered 420, and furnished a recorded death-rate of 12.1 per 1,000 per annum.

TABLE A.

CAUSES OF, AND AGES AT, DEATH DURING YEAR 1907.

Deaths in or belonging to Whole District at subjoined Ages.	Causes of Death.																								
	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria & Membranous 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, Cirrhosis of Liver.	Venereal Diseases	Premature Birth.	Heart Diseases.	Accidents.	Suicides.	Diseases of the Nervous System.	Old Age.	All other Causes.	All Causes.
All Ages	7	7	19	6	3	11	3	10	1	1	..	47	19	63	48	37	7	5	2	25	72	17	6	57	35	91	599
Under 1 year	2	..	14	..	..	..	2	5	..	..	..	1	4	..	4	7	..	..	2	25	..	..	..	3	..	33	102
1 and under 5	4	2	5	5	..	1	..	..	..	..	..	..	5	..	4	8	..	..	..	..	1	1	..	2	..	2	40
5 and under 15	1	4	..	1	2	..	..	..	..	..	..	1	6	1	..	..	..	..	..	..	5	1	..	1	..	..	23
15 and under 25	..	1	..	..	..	..	..	..	..	..	..	6	3	..	..	1	..	..	..	..	2	1	2	2	..	..	18
25 and under 65	..	..	..	..	1	4	1	3	1	..	..	36	1	38	10	10	1	4	..	..	30	7	4	21	1	37	210
65 and upwards	..	..	..	..	..	6	..	2	..	1	..	3	..	24	30	11	6	1	..	..	34	7	..	28	34	19	206
Deaths in or belonging to Localities at all Ages.																											
North Division	..	1	2	2	1	7	..	3	..	1	..	9	4	23	13	8	3	3	..	6	22	10	1	21	10	29	179
South Division	7	6	17	4	2	4	3	7	1	..	..	38	15	40	35	29	4	2	2	19	50	7	5	36	25	62	420
Total Deaths in Public Institutions in the District	..	..	..	..	..	5	..	..	..	..	..	1	..	2	8	2	1	1	..	..	7	2	1	9	4	6	49

DISTRICT MORTALITY.

	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Totals.	Rate per 1,000 per annum.
Northern Division	54	42	38	45	179	9·6
Southern Division	119	123	70	108	420	12·1
TOTALS - -	173	165	108	153	599	11·2

INFANTILE MORTALITY.

There were 102 deaths registered of infants under one year of age, as against 1,042 births; the proportion which the deaths under 1 year of age bear to 1,000 births is, therefore, 97.9, as against 108 in the preceding year.

The deaths under 1 year of age form 17.0 per cent. of the total deaths of all ages, whereas those for the preceding year formed 19.5 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
1905 ..	124·7	129	128
1906 .	108	130	133
1907 ..	97·9	115	118

TABLE A1.

METROPOLITAN BOROUGH OF STOKE NEWINGTON.—INFANTILE MORTALITY DURING THE YEAR 1907.

Deaths from stated Causes in Weeks and Months under One Year of Age.

	CAUSE OF DEATH.																			
	Common Infectious Diseases.		Diarrhœal Diseases.			Wasting Diseases.					Tuberculous Diseases.									
	Diphtheria : Croup	Whooping Cough	Diarrhœa, all forms	Enteritis (*not Tuberculous*)	Gastritis, Gastro-intestinal Catarrh	Premature Birth	Congenital Defects	Injury at Birth	Want of Breast-milk	Atrophy, Debility, Marasmus	Tuberculous Meningitis	Other Tuberculous Diseases	Meningitis (*not Tuberculous*).	Convulsions	Bronchitis (including Broncho-Pneumonia)	Laryngitis	Suffocation	Other causes	Measles	Venereal Diseases	Totals
Under 1 Week	..	..	..	..	..	23	2	2	..	..	..	..	..	..	1	..	..	1	..	..	29
1–2 Weeks	..	..	..	..	..	..	1	1	..	1	..	..	..	..	1	..	..	1	..	1	6
2–3 Weeks	..	..	..	..	..	1	..	..	..	2	..	..	..	2	..	..	..	1	..	..	6
3–4 Weeks	..	1	..	..	..	1	..	..	..	..	..	..	..	..	2	..	..	..	..	..	4
Total under 1 Month	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	45
1—2 Months	..	1	..	1	..	..	..	..	..	4	..	..	..	1	1	..	..	..	..	1	9
2—3 Months	..	1	1	..	..	..	..	..	1	3	..	..	..	..	1	..	..	1	..	..	8
3—4 Months	..	1	..	1	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	4
4—5 Months	..	1	..	2	..	..	..	..	..	2	..	2	..	1	1	..	..	..	..	..	9
5—6 Months	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2
6—7 Months	..	1	..	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	3
7—8 Months	..	2	..	..	..	..	..	..	..	..	..	..	..	2	2	..	..	..	..	..	6
8—9 Months	..	1	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	3
9–10 Months	..	..	..	..	..	..	..	..	..	1	1	1	..	1	2	..	..	1	..	..	7
10–11 Months	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2
11–12 Months	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	4
Total Deaths under 1 Year	..	14	2	4	1	25	3	3	1	14	1	4	..	7	14	..	..	5	2	2	102

DEATHS UNDER ONE YEAR OF AGE IN THE DIFFERENT WARDS OF THE BOROUGH DURING THE YEARS 1903, 1904, 1905, 1906 and 1907.

Name of Ward.	1903.	1904.	1905.	1906.	1907.
Lordship Ward ..	4	6	9	8	1
Clissold Ward ..	7	8	12	6	11
Church Ward ..	30	24	24	18	23
Manor Ward ..	10	9	8	3	8
South Hornsey Ward	65	66	66	56	36
Palatine Ward ..	20	21	14	26	23
Totals ..	136	134	133	117	102

As pointed out in my last report, there are, of course, numerous circumstances contributing to the deplorable infantile mortality in our large cities, but improper feeding and contaminated milk are the most important factors in the problem.

Probably the present-day mother, in towns, is no better informed upon infant needs than her forbears of 50 years ago; for although her level of general education is undoubtedly higher, she has fewer opportunities of making herself practically acquainted with the infant's needs. Labour is making an increased demand upon the female worker, and, in increasing numbers, almost as soon as she leaves school, does she become engaged in some form of labour away from home; so that she very frequently marries without any knowledge or experience relating to infants or home management. There can be no reasonable doubt, therefore, that specially trained Health Visitors are needed in the community, and that these, by a patient sympathy and tact, are able to provide just that sort of knowledge which must lead to a great reduction in the wastage of infant lives. In all parts of the country where such work has been undertaken,

not only has the worker been well received, but the Sanitary Authority is satisfied of the very real good achieved. This work, however, demands a large amount of time, and occasionally a dogged perseverance in the face of discouragement. It can, therefore, only be performed with a maximum of efficiency by those who, with the knowledge and time at their disposal, are able to attack the matter in a business-like way; and although in the Borough of Stoke Newington I am satisfied that considerable good has resulted from the assistance of the Voluntary Public Health Workers, there is no doubt that the time has come for the employment of a paid official in this capacity. The cost of such an official is trifling compared with the lives she may prove instrumental in saving, and the good achieved from the improved physical condition of many who would otherwise only survive as weaklings, owing to bad feeding and neglect. Such women sanitary inspectors or health workers are now employed in 12 of the Metropolitan Boroughs.

THE LADY PUBLIC HEALTH WORKERS.

There were enquiries and visits made during the year relating to 152 separate births. About 70 per cent. of these infants were being breast-fed. Many of the mothers were found to be in great need of advice, and the advice given was generally welcomed and appreciated. The Borough of Stoke Newington stands under a great obligation to these voluntary health workers, who are now five in number. An effort has been made during the year to add to this number, but without success. The following are the conditions which it has hitherto been found possible to impose upon the voluntary workers:

Each Public Health Worker is expected to devote two half-days a week to the work.

She is informed by Miss Gardner (75, Sandringham Road, Dalston) as to the various visits which are required; as the Medical Officer of Health forwards particulars of all visits required to Miss Gardner.

The Medical Officer of Health is at the service of any Public Hea'th Worker for any further advice or instruction she may desire. He is to be seen at the Town Hall from half-past 10 to half-past 12; and his room at the Town Hall is, during the afternoon, at the convenience of any Public Health Worker who may wish to use it for writing purposes.

The Public Heath Workers are asked to meet on the first Monday of each month at the Town Hall at 4 p.m. in order that reports may be considered, and any matters affecting the work may be discussed.

The various kinds of visits which the Public Health Worker is asked to make may be classified under the following heads:

1. Visits to houses in which a baby has recently been born, and where it is judged the people stand in need of advice. In this connection, the visitor will see whether the baby is fed and clothed properly. (Wherever it is practicable, breast feeding will be strongly advised.) She will note the arrangements for preparing and storing the food, the condition of the house as to cleanliness, ventilation, etc.; and a systematic visitation of such homes will be maintained until the child is a year old. A handbill of advice as to the feeding and care of infants will be left, and instances of overcrowding, stopped drains, structural defects, etc., will be reported to the Medical Officer of Health.

2. Visits to houses in which an infant has recently died, in order to discover if the cause of death was preventible; and, if so, to advise and instruct the mother.

3. Visits to houses occupied by persons suffering from Consumption. Here the Visitor will endeavour to obtain the open window, the frequent cleaning of the room, the collection and disinfection of the sputum, and the carrying out of further precautions calculated to prevent the disease from spreading to other members of the household. A handbill of advice will be left, and occasional visits paid to see that the precautions are being carried out.

4. Visits to homes in which cases of Zymotic Diarrhoea or other sickness (not of an infectious nature) amongst infants and young children come to the knowledge of the Medical Officer of Health. In these cases, suitable handbills of advice will be left, and directions given as to the precautions which should be observed in the management of the patients, and the protection of others.

During the year the number of visits paid by these voluntary workers, in respect of births, infant deaths, and sufferers from consumption, amounted to 363.

TABLE A2.

Showing the Distribution of the Deaths in the Northern and Southern Divisions of the Borough during each of the quarters of the year 1907.

Diseases.	North.					South.				
	Quarters.				Total.	Quarters.				Total.
	1	2	3	4		1	2	3	4	
Measles	..	..	..	..	..	1	1	3	2	7
Scarlet Fever	..	..	..	1	1	1	3	1	1	6
Whooping-cough	1	1	..	..	2	5	8	3	1	17
Diphtheria and Membranous Croup.	..	1	..	1	2	1	..	1	2	4
Enteric Fever	..	..	..	1	1	..	1	..	1	2
Epidemic Influenza	5	..	1	1	7	1	1	..	2	4
Diarrhœa	..	..	..	..	..	..	..	1	2	3
Enteritis	..	..	..	3	3	2	3	1	1	7
Puerperal Fever	..	..	..	..	..	..	1	..	..	1
Erysipelas	1	..	..	..	1	..	..	..	..	..
Other Septic Diseases ..	..	..	..	..	..	..	..	..	..	..
Phthisis	1	4	4	..	9	9	16	3	10	38
Other Tubercular Diseases ..	2	..	1	1	4	3	1	6	5	15
Cancer	7	4	5	7	23	12	14	7	7	40
Bronchitis	5	2	1	5	13	16	6	1	12	35
Pneumonia	2	4	..	2	8	13	10	1	5	29
Other Respiratory Diseases ..	1	..	2	.	3	2	1	..	1	4
Alcoholism and Cirrhosis ..	..	1	1	1	3	1	..	..	1	2
Venereal Diseases	..	..	..	..	..	..	..	..	2	2
Diseases of the Nervous System.	5	4	5	7	21	9	10	6	11	36
Premature Birth	1	..	1	4	6	3	6	3	7	19
Heart Disease	5	7	4	6	22	17	13	11	9	50
Accidents	6	1	2	1	10	..	3	1	3	7
Suicides	1	..	..	..	1	2	2	1	..	5
Old Age	2	4	4	..	10	5	8	3	9	25
All other Causes	9	9	7	4	29	16	15	17	14	62
Totals	54	42	38	45	179	119	123	70	108	420

Senile Mortality.—Of the 599 deaths 206 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, 34.4 per cent. There were 98 deaths of persons over 70 years of age, and 51 of persons over 80, 6 of whom reached 90 years of age—the oldest being 99. These figures denote an exceptionally high proportion of senile mortality.

SENILE MORTALITY DURING 1907.

65 to 70	70 to 80	80 to 90	90 and over.	Total.
53	98	51	4	206

The respective ages of those over 90 were 91, 92, 91, 99.

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 A2 is supplementary to Table A, and sets forth the deaths in each Division of the Borough during each of the four quarters of the year.

Comparing these tables with the corresponding tables of the preceding year the following facts are noteworthy;—A considerable decrease in the deaths from Diarrhœa, and a marked increase in the deaths from Scarlet Fever and Cancer.

It will be noted (Table A2) 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 Phthisis, Diseases of the Respiratory System, Infectious Diseases generally, and Premature Birth. The mortality from Accidents, Influenza and Diseases of the Nervous System, on the other hand, was disproportionately high in the Northern Division.

Whereas the average loss of life in the Metropolis from Malignant Diseases during 1851–60, was equal to 42 in each thousand of the population for all ages and both sexes, in the year 1906 the proportion had risen to 98 in the same number living.

DEATHS IN PUBLIC INSTITUTIONS WITHIN THE BOROUGH, 1907.

St. Anne's House, Ma or Road.	Northumberland House, Green Lanes.	Invalid Asylum, 187, High Street.	Nursing Home, 8, Alexandra Road.	Nursing Home, 21, Stamford Hill.	Total.
33	6	5	4	1	49

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 A3 the deaths from each of the Zymotic Diseases (including Erysipelas, Puerperal Fever and Influenza) are given.

The Zymotic Death-rate for the Borough was 1.03 per 1,000 per annum, as against 1.09 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
1905	1·27	1·70	1·52
1906	1·09	1·94	1·73
1907	1·03	1·42	1·26

TABLE A3.

Deaths from Zymotic Diseases (including Influenza) in the Year, 1907.

	Scarlet Fever.	Diphtheria.	Small Pox.	Enteric Fever.	Puerperal Fever.	Measles.	Whooping Cough.	Diarrhœa and Dysentery.	Influenza.	Erysipelas.	Total.	Rate to every 1,000 persons.
First Quarter ..	1	1	..	..	..	1	6	..	6	1	16	..
Second ,, ..	3	1	..	1	1	1	9	..	1	..	17	..
Third ,, ..	1	1	..	..	..	3	3	1	1	..	10	..
Fourth ,, ..	2	3	..	2	..	2	1	2	3	..	15	..
	7	6	..	3	1	7	19	3	11	1	58	1·1
1906.....	1	4	..	..	1	10	17	26	9	3	71	1·3

TABLE A4.

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 1907.

Cities and Boroughs.	Estimated Population in the middle of 1907.	Annual Rate per 1,000 Living.				Deaths of Children under one year of age to 1,000 Births.
		Births.	Deaths.	Principal Infectious Diseases.	Notifiable Diseases Attack-rate.	
LONDON	**4,758,218**	**25·8**	**14·6**	**1·42**	**8·6**	**115**
West Districts.						
Paddington	149,909	20·6	13·5	1·13	6·1	116
Kensington	181,842	18·1	13·7	1·04	5·3	134
Hammersmith	122,337	24·6	14·3	1·16	7·6	120
Fulham	166,749	27·1	13·2	1·73	8·9	125
Chelsea	74,857	19 2	15·0	1·44	6·0	129
City of Westminster ..	172,219	15·9	13·0	0 72	4·2	111
North Districts.						
St. Marylebone	127,718	31·0	15·0	0·97	5·8	68
Hampstead	91,137	14·6	9·0	0·51	5 6	72
St. Pancras	236,753	23·2	15·0	1·17	6·1	115
Islington	347,017	24·1	14·7	1·25	6·0	120
Stoke Newington ..	**53,395**	**19·5**	**11·2**	**1·03**	**7·5**	**97·9**
Hackney	232,993	24·9	13·6	1·37	12·0	110
Central Districts.						
Holborn	55,134	28·5	17·4	1·28	5·1	89
Finsbury	96,732	34·9	18·7	1·83	8·3	111
City of London	20,310	13·2	16·8	0 85	7·5	97
East Districts.						
Shoreditch	115,662	31·5	20·5	3·01	11·1	157
Bethnal Green	130,831	31·4	17·5	1·96	14·5	140
Stepney	308,923	34·1	15·9	1·97	14·6	116
Poplar	171,086	30·4	16·9	2·11	11·4	126
South Districts.						
Southwark	209,781	28·8	18·0	1·90	9·9	142
Bermondsey	128,263	31·3	18·3	1·71	12·0	124
Lambeth	318,638	27·2	14·6	1·28	6·7	109
Battersea	181,736	24·8	13·3	1·34	8·7	117
Wandsworth	281,419	25·1	12·3	1·16	8·1	101
Camberwell	277,059	23·9	13·9	1·43	8·5	117
Deptford	116,510	28·2	14·1	1·47	11·1	108
Greenwich	107,222	24·2	12·7	1·44	9·7	100
Lewisham	152,532	23·8	11·5	0·85	6·8	90
Woolwich	129,336	25·7	12·5	1·38	11·3	112

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
1905	52,690	20·2	124·7	12·6	1·27	5·6
1906	53,045	20·4	108·0	11·5	1·09	5·0
1907	53,395	19·5	97·9	11·2	1·03	7·5

I. Institutions within the District receiving sick and infirm persons from outside the District.	II. Institutions outside the District receiving sick and infirm persons from the District.	III. Other Institutions, the deaths in which have been distributed among the several localities in the District.
St. Anne's House, Manor Road.	London Hospital.	N.E. Fever Hospital.
Northumberland House, Green Lanes.	Invalid Home, Highbury	Colney Hatch Asylum.
Invalid Asylum, 187, High Street.	Hackney Infirmary.	Claybury ,,
Nursing Home, 8, Alexandra Road.	Mildmay Cottage Hospital.	Horton ,,
Nursing Home, 21, Stamford Hill.	University College Hospital.	Dartford Heath ,,
	German Hospital.	Bethnal House ,,
	Children's ,, (Gt. Ormond Street).	Banstead ,,
	Gt. Northern Hospital.	Darenth ,,
	North Eastern Hospital for Children.	Long Grove ,,
	St. Bartholomew's Hospital.	Belmont ,,
	Metropolitan Hospital.	Peckham House ,,
	Royal Free Hospital.	
	Guy's Hospital.	
	8, Southwold Road, Clapton.	
	St. Luke's House.	
	Holborn Infirmary.	
	Central London Throat and Ear Hospital.	
	Tottenham Hospital.	
	Wandsworth Infirmary.	
	Brooke House.	
	City Infirmary (Poplar).	
	St. Joseph's House, Kensington.	
	Middlesex Hospital.	
	Infants' Hospital (Vincent Square).	
	King's College Hospital.	
	Private Nursing Home 46, Amhurst Park.	

There is no Union Workhouse within the District.

THE MORTUARY.

During the year 35 bodies were deposited in the Public Mortuary; 14 of these were females and 21 were males. Post-mortem examinations were performed upon 24 of these cases, and inquests were held upon 30.

INQUESTS.

The following inquests upon deaths of parishioners were held during the year 1907 :—

	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Totals.
Pneumonia	2	..	..	..	2
Heart Disease	2	1	3	1	7
Cerebral Apoplexy	..	1	1	2	4
Convulsions	..	..	1	..	1
Premature Birth and Inanition	..	..	1	1	2
Peritonitis	..	..	1	1	2
Epilepsy	..	..	..	1	1
Influenza	..	..	..	1	1
Pulmonary Tuberculosis	..	..	..	1	1
Bronchitis	1	..	..	3	4
Cirrhosis of Liver	..	..	..	1	1
Accidents (Fall from horse)	1	..	..	..	1
,, (Injury to Finger)	1	..	..	1	2
,, (Broken Thigh)	1	..	..	..	1
,, (Scalds)	1	..	..	..	1
,, (Shock due to fall)	1	4	..	1	6
,, (Run over)	..	1	..	..	1
,, (Burns)	..	1	..	..	1
,, (Chloroform)	..	..	1	..	1
,, (Crushed in a Lift)	..	..	1	..	1
,, (Cerebral Hæmorrhage due to fall)	..	..	..	1	1
Suicides (Hanging)	2	..	..	..	2
,, (Coal Gas Poisoning)	1	..	..	..	1
,, (Stabbing)	..	1	..	..	1
,, (Drowning)	..	1	1	..	2
	13	10	10	15	48

INFECTIOUS DISEASES AND THE MEASURES TAKEN TO PREVENT THEIR SPREAD.

It will be seen from Table B that 436 *Notification Certificates of Infectious Illness* were received from medical practitioners, as against 267 during the preceding year. These figures include notifications received from the voluntary notification of Consumption.

These 436 cases represent infection in 335 different houses. In 375 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 where the sanitary defects were "slight."

In arriving at 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 335 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 1907.

The Infectious Sickness Rate of the Borough, excluding the notifications from Consumption, was 7·5 to each 1,000 of the population, as against 5.0 for the preceding year. The rate in the Northern Division was 5.1 while that in the Southern Division was 9.8.

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
1905	5·6	7·0
1906	5·0	7 5
1907	7·5	8·6

TABLE B.

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1907.

Cases notified in Whole District.	Small Pox.	Cholera.	Diphtheria.	Membranous Croup.	Erysipelas.	Scarlet Fever.	Typhus Fever.	Enteric Fever.	Relapsing Fever.	Continued Fever.	Puerperal Fever.	Cerebro-Spinal Fever.	Chicken Pox.	Phthisis (Voluntary).	Totals.
At all Ages	..	..	109	5	29	238	..	14	..	..	2	1	..	38	436
Under 1	..	..	2	..	..	2	..	..	..	..	..	..	..	..	4
1 to 5	..	..	49	3	2	53	..	..	..	..	..	..	..	..	107
5 to 15	..	..	52	2	3	148	..	4	..	..	..	..	..	..	209
15 to 25	..	..	3	..	1	28	..	2	..	..	..	1	..	9	44
25 to 65	..	..	3	..	19	7	..	8	..	..	2	..	..	29	68
65 and upwards	..	..	..	..	4	..	..	..	..	..	..	..	..	..	4
Total Cases notified in each Locality.															
Northern Division	..	..	24	1	9	48	..	5	..	..	..	1	..	7	95
Southern Division	..	..	85	4	20	190	..	9	..	.	2	..	..	31	341
No. of Cases Removed to Hospital from each Locality.															
Northern Division	..	..	18	..	..	35	..	1	..	..	..	1	..	2	57
Southern Division	..	..	70	2	3	171	..	8	..	..	1	..	..	2	257

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	—	—
1905	1	—	178	3	75	4	—	—
1906	—	—	137	1	45	4	—	—
1907	—	—	238	7	109	6	—	—

	Erysipelas.		Puerperal Fever.		Enteric Fever.		Membranous Croup.		Cerebro-Spinal Fever.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
1901 ..	29	—	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	—	—	—
1905 ..	28	1	1	—	10	—	4	1	—	—
1906 ..	48	3	1	1	10	—	1	—	—	—
1907 ..	29	1	2	1	14	3	5	—	1	1

TABLE B2.

Cases of Infectious Diseases notified during each month of the year 1907.

	Small-pox.	Scarlet Fever.	Diphtheria.	Membranous Croup.	Enteric Fever.	Puerperal Fever.	Continued Fever.	Erysipelas.	Cerebro-Spinal Fever.	Phthisis.	Totals.
January	..	12	5	..	..	..	..	6	..	4	27
February	..	3	9	..	1	..	..	1	..	3	17
March	..	15	5	2	..	..	..	5	..	4	31
April	..	20	4	2	1	..	..	2	..	3	32
May	..	28	3	..	3	..	..	1	..	1	36
June	..	13	1	..	..	1	.	..	..	6	21
July	..	18	4	.	2	..	..	1	1	5	31
August	..	17	5	..	2	..	..	2	..	2	28
September	..	24	16	..	..	..	..	1	..	1	42
October	..	30	35	..	2	1	..	2	..	5	75
November	..	30	11	..	2	..	..	6	..	2	51
December	..	28	11	1	1	..	..	2	..	2	45
Totals	..	238	109	5	14	2	..	29	1	38	436

The Infectious Sickness Rate for London generally was 8·6. Of the 29 Sanitary Areas situated within the Metropolis, the lowest rates were those of the City of Westminster (4·2), Holborn (5·1), Paddington (5·3), Hampstead (5·6), and the highest rates were those of Stepney (14·6), and Bethnal Green (14·5).

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

SCARLET FEVER.

The 238 cases of Scarlet Fever occurred in 198 houses, in 5 of which there were grave insanitary conditions; in 18 the insanitary conditions were slight, and in the remaining houses there was an absence of such conditions.

Year.	Death-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	0·06	0·08	0·11
1905	0·06	0·12	0·11
1906	0·02	0·11	0·10
1907	0·13	0·14	

School attendance was ascribed as the origin of the infection in 28 cases; and in four cases there were strong reasons for believing that the infection was communicated by a patient recently dismissed from a fever hospital. These "return cases" have received a great deal of consideration by the Metropolitan Asylums Board, and their origin, cause and possibilities of prevention, have been very thoroughly investigated. It appears that despite all precautions some three to four per cent. of Scarlet Fever convalescents upon their return home from hospital are capable of conveying infection to others. The infection was imported into the Borough in at least four instances.

There has been a very marked prevalence of Scarlet Fever in London and several other parts of the country during the year, and Stoke Newington has suffered in common with other parts of the Metropolis.

ERYSIPELAS.

The 29 cases of this disease represent infection in 29 different premises. In 1 of these, insanitary conditions of a slight nature existed, and in one case the sanitary defects were grave. In 5 cases there was a previous local injury, and in 2 a history of previous attacks.

ENTERIC OR TYPHOID FEVER.

The 14 cases notified during the year all occurred in different houses. In two of these houses grave insanitary conditions existed, and in one slight insanitary conditions existed; while in the remaining 11 there were no insanitary conditions. Three of the cases doubtless contracted the disease outside of London during the summer and autumn holidays. 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.	Death-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
1905	0·00	0·05	0·09
1906	0·00	0·05	0·09
1907	0·06	0·04	

DIPHTHERIA.

The 109 cases of Diphtheria occurred in 86 houses, 12 of which were more or less insanitary. The sanitary defects were grave in five and slight in seven other instances.

Year.	Death-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
1905	0·09	0·12	0·16
1906	0 08	0·14	0·17
1907	0·11	0·16	

School attendance is either alleged by the parents or surmised by myself, on good grounds, to be the cause of at least 17 attacks during the year.

One case of infection was imported into the Borough, and at least 8 appear to have caught the infection from previous cases. In several cases it was very clear that a preceding tonsilitis of several weeks' duration predisposed to an attack of Diphtheria. In 9 cases there was a history of previous throat trouble, frequently recurring.

Many applications have been made at the office for tubes of antitoxin, 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 or 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 during 1907, together with the results of the **examinations performed at the Lister Institute of Preventive Medicine, London :—**

Disease	Results.		Total.
	Positive.	Negative.	
Phthisis	35	18	53
Diphtheria	59	79	138
Enteric	6	10	16
Total	100	107	207

During the year Diphtheria has been exceptionally prevalent in the Borough, and serious outbreaks have occurred amongst the scholars attending the St. Mary's School, Barn Street, and the Oldfield Road Board School. In connection with these school cases, the Educational Authority has taken a very proper action in excluding previous sufferers from the disease from re-attendance at school until the absence of the germ has been demonstrated by bacteriological examination of material taken from the child's throat. In cases where the parents are too poor to be able to pay for a medical attendant, they have been informed that the Medical Officer of Health will arrange for this examination, and, as a result, I have been called upon to deal with several such children.

In this connection the London County Council, in July, adopted the following report and resolution submitted by their Education Committee :

"Our attention has been drawn to the difficulties which have arisen in districts where diphtheria has been prevalent, consequent upon children who have been excluded from school being certified as free from disease by medical practitioners. With a view, therefore, to dealing more thoroughly with the disease, the various medical officers of health were asked to adopt the temporary arrangements being carried out in Greenwich in the event of there being an outbreak of diphtheria in their respective districts. These arrangements involve that any children excluded from school on account of diphtheria or sore throat during the prevalence of the disease should not be readmitted without a certificate from the medical officer of health that they were free from infection.

As a result of a conference of medical officers of health held on April 27th, 1906, the undermentioned resolutions were passed:

"'That in the opinion of this branch (Incorporated Society of Medical Officers) it is not possible, in the absence of a bacteriological examination, to decide that a child is free from the infection of diphtheria. In the event of the prevalence of diphtheria in any district, any child excluded for sore throat should not be readmitted to school without a medical certificate of freedom from infection, based on a bacteriological examination.'

"We are of opinion that it would greatly strengthen the hands of the various medical officers, and do much to reduce the present risks of infection, if authority were given for the refusal, during the presence of diphtheria in any district, of the readmission of children excluded from school as suffering from diphtheria or sore throat until they have obtained a medical certificate of freedom from infection, based on a bacteriological examination. We are informed that such certificate can be given either by general practitioners or by the medical officer of health, and would be free from the dangerous errors of medical certificates given merely on the inspection of the children. We recommend:

"'That the Education Committee be authorised to refuse, during the presence of diphtheria in any district, readmission to school of children excluded on account of diphtheria or sore throat until such children shall have obtained a medical certificate of freedom from infection, based on a bacteriological examination.'"

In this disease school children are capable of carrying the germ upon their throats, although they are not suffering from the disease. Such children are known as "carrier" cases; and it is certain that the infection may be dislodged from their throats in speaking or singing, and susceptible children may take in the infection and suffer from the disease. During the year I have had several children notified to me who were acting as "carriers," but who showed no clinical symptoms whatever of the disease. In my opinion, such children cannot fairly be described as "suffering" from the disease; and such notifications, while not in any way affecting the death-rate from the disease, must destroy in a measure the value and significance of infectious-sickness rates. Yet there are good reasons why such children should be notified, for they are potentially infectious, and the effect of notification under the Act enables the Sanitary Authority to demand precautions which, if no penalty were enforceable against neglect, would certainly not be carried out with reference to children who are in normal health.

MEASLES AND WHOOPING COUGH.

Measles.

Year.	Death-Rate for Stoke Newington.	Rate for London generally.	Rate for England and Wales.
1901 ...	0·17	0·13	0·18
1902 ...	0·08	0·51	0·38
1903 ...	0·39	0·44	0·27
1904 ...	0·13	0·19	0·36
1905 ..	0·21	0·37	0·32
1906 ...	0·19	0·40	0·27
1907 ...	0·13	0·38	

To test the value of the immediate closing of classes on the appearance of Measles, the Borough of Woolwich was divided into two nearly equal districts during the years 1903-1906, in one of which the infant classes in schools were closed immediately a case of Measles was notified, and in the other only the ordinary measure of excluding children coming from infected homes was adopted. Comparing the prevalence of the disease in each of these districts, the Medical Officer of Health forms the conclusion that, although closure of classes appears to have had the effect of greatly limiting the increase of Measles, the benefit was much less than might have been hoped for.

Whooping Cough.

Year.	Death-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
1905	0·17	0·32	0·25
1906	0·32	0·26	0 23
1907	0·36	0·37	

ZYMOTIC DIARRHŒA.

Year.	Death-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
1905	0·74	0·72	0·59
1906	0·50	0·95	0 87
1907	0·24	0·32	

PUERPERAL FEVER.

Under Puerperal Fever are included the deaths from Pyæmia and Septicæmia occurring in the lying-in women. The origin of both of these cases was very obscure, and it was quite impossible to suggest the source of infection when I personally investigated them.

PHTHISIS (CONSUMPTION),

The 38 cases voluntarily notified during 1907 occurred in 36 different homes.

Year.	Death-Rate for Stoke Newington	Rate for London generally.
1901	1·30	1·58
1902	1·24	1·62
1903	1·30	1·50
1904	1·70	1·63
1905	1·31	1·46
1906	0·90	1·44
1907	0·88	1·39

It will be seen that the results of the Voluntary Notification of Consumption during the past year have been no more satisfactory than those recorded in previous years. I have no doubt that compulsory notification is essential to success in the administrative control of Phthisis—the disease which is the cause of more suffering and death than the whole of those other diseases the notification of which is compulsory.

Judging from the deaths from Consumption, which numbered 47, there must have been some 200 sufferers from the disease in the Borough during the year, and of those only 38 were notified under the voluntary system.

In connection with the compulsory notification of Consumption, a very good compromise between those who oppose it and those who favour it has been suggested, name'y, that such notification should be compulsory at first only with regard to cases coming under the Poor Law Medical Officers or attending Public Institutions. In this way we should learn the number and distribution of those cases of Consumption which were most dangerous to the community, and thus extend the application of the necessary precautionary measures.

In the year 1906, the mortality caused by Pulmonary Tuberculosis in the Metropolis was equal to a rate of 1.44 per thousand persons living. It was, therefore, higher than the average rate for England and Wales by 0.29 per thousand. It will be seen that the rate for the Borough of Stoke Newington compared very favourably with that figure. From the Report for that year of the Medical Officer of Health of the Administrative County of London, one learns that, after making due allowance for age differences among the living, the mortality from Pulmonary Tuberculosis varies from a rate of 1.1 per thousand in the least overcrowded sanitary areas to precisely double that figure where the overcrowding exists to 27 per cent. The views of Professor Karl Pearson will, I believe, gain general acceptance amongst medical officers of health:

"A theory of infection," he writes, "does not account for the facts. I am inclined to think that the risks run, especially under urban conditions, are, for tuberculosis as for a number of other infectious diseases, so great that the constitution or diathesis means almost everything for the individual whose life cannot be spent in self-protection. I feel fairly certain that for the artizan class the

inheritance factor is far more important than the infectious factor, because in a very large proportion of cases it does not lie in the power of the individual to maintain, in the stress of urban life, a wholly safe environment."

As regards the value of Sanatoria in our crusade against Consumption, I have in a previous report expressed the view that prophecies have been rather extravagant, and when the statistical facts embodied in the annual reports of these institutions are carefully analysed, the record is generally a somewhat disappointing one. Such provision is quite a subsidiary plank in the Anti-Tuberculosis platform. Certainly, in connection with these institutions, there must be After-care Associations, which will keep in touch with those who have been discharged and, where possible, obtain some form of suitable occupation for those who are dependent upon their labour. There is everything to be said in favour of a far more extended provision of sanatoria for children is this country, where all the tuberculous affections may be dealt with. There is no doubt that exaggerated statements have been made with reference to the prevalence of Pulmonary Tuberculosis among children at the school age. This was well exemplified by the work undertaken in 1906 under the Education Authority of the County, when it was found that only 1.3 per cent. of 1,670 school children examined were suffering from Pulmonary Tuberculosis. Still children suffer to a considerable extent from tuberculosis in its other forms, and the medical inspection of school children will, especially in the case of the youngest children, do a good work in weeding out those who may not only prove a source of danger to others, but are capable of benefiting considerably by treatment and improved conditions.

The reduction in the death-rate from Pulmonary Tuberculosis, or Consumption, in the Administrative County of London is well shown in the following table, reproduced from the annual report of the Medical Officer of the County Council:

REDUCTION OF PHTHISIS IN LONDON.

Period.	Death-rate per 1,000 Persons Living.	Period.	Death-rate per 1,000 Persons Living.
1851–60	2·86	1902	1·60
1861–70	2·84	1903	1·55
1871–80	2·51	1904	1·62
1881–90	2·09	1905	1·42
1891–1900	1·84	1906	1·44
1901	1·66		

A Conference of representatives of the City and Metropolitan Borough Councils convened by the Paddington Borough Council, "on the question of taking measures to limit the spread of Pulmonary Tuberculosis (Consumption)," was held at the Town Hall, Paddington, on the 6th June, 1907. Twenty-six City and Borough Councils, out of 29, were represented by 61 delegates. The Mayor of Paddington presided.

The resolutions passed were (in substance) as follows:—

"That it is desirable that the notification of Pulmonary Tuberculosis (Consumption) should be compulsory.

"That application be made to the Local Government Board for an order to be made:

(i.) To include Pulmonary Tuberculosis (Consumption) among the diseases to be notified under Section 55 of the Public Health (London) Act, 1891; and

(ii.) To extend the provisions of the following Sections of the above Act to Pulmonary Tuberculosis (Consumption):

Section 60—Cleansing and disinfecting of premises, etc.

„ 61—Disinfection of bedding, etc.

„ 62—Infectious rubbish thrown into ash-pits, etc., to be disinfected.

„ 63—Penalty on letting houses in which infected persons have been lodging.

„ 64—Penalty on persons letting houses making false statements as to infectious disease.

„ 65—Penalty on ceasing to occupy house without disinfection, or notice to owner, or making false answer.

"That it is desirable, in order to limit the spread of Tuberculosis, that provision should be made for public inspection and control, at its several sources, of the milk supply of England; and to ask the Local Government Board to take steps to secure the efficient administration of the Dairies, Cowsheds, and Milkshops Order, 1885, and Orders amending the same."

"That application be made to the Local Government Board for an Order to be made to extend the provisions of Section 69 of the Public Health (London) Act to Pulmonary Tuberculosis, in so far as it relates to the milking of cows and to the sale and distribution of milk."

"That the provision conferred by Section 7 (1) of the Factory and Workshop Act, 1901, namely, that in every room in any factory or workshop sufficient means of ventilation shall be provided, and sufficient ventilation maintained, be rigidly enforced, and a similar provision extended to all places where people are assembled together for any lengthened period, with a view to restricting the spread of pulmonary tuberculosis."

"That a Sanatorium is needed for the open-air treatment of poor persons suffering from Pulmonary Consumption, in the early stages of the disease, and should be provided by a Central Authority acting for the Metropolis as a whole."

"That the Managers of the Metropolitan Asylums Board, by reason of their practical experience in the management of hospitals for infectious disease, being eminently qualified for the position of such authority, the Local Government Board be requested to confer on, or, if necessary, to obtain for, the said Managers power to act in that capacity."

"That the Managers of the Metropolitan Asylums Board should also be empowered to use, for sanatorium purposes, the 'Southern Hospital,' recently erected by them at Carshalton, in the County of Surrey."

"That the Government be urged to provide a sum of money annually for the erection and maintenance of suitable Sanatoria for the treatment of early cases of consumption."

Of the cases voluntarily notified in Stoke Newington during the year, in 17 (or about 45 per cent.) there was no family history of the disease. In 17 (or about 45 per cent.) one of the parents was consumptive; and in 4 cases, although parents and grandparents provided no history of infection, aunts or uncles had suffered.

CEREBRO-SPINAL FEVER.

The case of Epidemic Cerebro-Spinal-Meningitis was that of an infant three months of age, whose parents had recently left Hackney to take up their residence in Stoke Newington. Although careful enquiry was made, it was impossible to trace the existence of any antecedent case of this disease, the infection of which could have reached the patient in connection either with the home at Hackney

or that in Stoke Newington. The child was promptly removed to hospital, where it died. Although there has been nothing approaching an epidemic of this disease in London, the disease is still compulsorily notifiable in the Metropolis.

CLEANSING OF PERSONS ACT, 1897.

At the close of 1906, the Public Health Committee decided, in response to a letter from the Education Officer of the London County Council, to undertake to treat children with verminous bodies and clothing as verminous persons have hitherto been treated under the Act. Such children are excluded from school, and often lose the advantages of education for several weeks as a consequence, when it is difficult or impossible for the mother to free the child from vermin. The facilities for such cleansing are not what they might be in Stoke Newington. We have to avail ourselves of the Hackney Borough Installation, which is a long distance from us; and one welcomes the prospect that in the future we may have a very central disinfecting station in connection with the Destructor which has been erected near the Town Hall, and that then suitable arrangements may be made for the cleansing of verminous children and adults. During 1907 we disinfected a considerable number of premises and their contents which were infected with fleas; but, although I gave several persons permission to do so, no one went to Hackney to be cleansed.

DISINFECTION.

From the standpoint of the municipal practice of disinfection it may be stated without fear of contradiction that the past few years have witnessed a levelling-up tendency. The various methods of procedure adopted have been characterised by a slowly diminishing range of variety and a more scientific appreciation. If less disinfectant is used on some cases than was formerly the case, the loss

in quantity has been compensated for by a gain in quality, and the restriction of the use of the agent to the attainment of an object which is attainable. Thus, the employment of a large amount of comparatively worthless disinfectants and the unscientific use of otherwise serviceable agents is growing less and less, and it appears probable that the near future will witness a further advance.

The hygienic needs of the school premises and of the school-child demand that the disinfection of school premises, which has been far too neglected in the past, shall receive more attention in the future; for if we are to reduce school infection to a minimum, surely a little more regard must be given to this important branch of work. Hitherto, the disinfection of school class-rooms has been almost restricted to occasions of the epidemic prevalence of disease when it has largely affected the scholars of a particular school, whereas it should be undertaken at frequent short intervals all the year round. This is not the occasion on which to dilate upon the special needs of school premises, but the circumstance of crowding children together for many hours daily (these children being at the most susceptible age periods for many diseases) the difficulties of early diagnosis and the frequency of mild and "carrier" cases, sufficiently account for the large amount of school infection, and they combine to make an excellent case for more disinfection and cleansing. The suggestion that the premises should be disinfected at the close of each school week appears to advocate rather an extreme view, but it is warranted by our knowledge of the potential risks.

At a school, the class-room floors of which had not been scrubbed for five weeks, I was able to obtain permission to have a small area of flooring (about 30 square feet) thoroughly scrubbed with hot water, and the dirty water wrung out of the cloth was collected in a winchester quart bottle. The liquid, which was very dark and dirty, but not otherwise offensive, was employed for the purpose of diluting

a well-known proprietary disinfectant, and thus serve to introduce organic matter into the test of its germicidal value. The experiment appealed to me as possessing a real practical value. The result was that the carbolic acid co-efficient of the disinfectant in question was reduced 40 per cent. below the advertised figure, which is based upon a naked germ test.

The disinfection of school books is also much neglected. Yet they may be considerable factors in the transmission of infection, for all we know to the contrary. This is an item upon which more work is necessary; but the experiments hitherto performed indicate that, except when books are markedly soiled, they do not offer favourable conditions for the retention of germ life. By steeping the most soiled parts of library books for twenty-four hours in a physiological solution of salt, and rubbing the binding with the same, the centrifugalized washings were capable of communicating tubercle to 35 per cent. of 43 guinea-pigs, whereas negative results were obtained from the cleaner books (Mitelesen and Knopf, in Berlin). The usual cupboard compartment, in which books are so disposed on shelves of perforated zinc gauze, that the pages (more especially the dirty ones) open out, or in which the books are suspended upon wires from the top of the chamber, fumigated with formic aldehyde for two or three hours, appears to be satisfactory; but if the book is an old and markedly soiled one, I believe that we should always recommend its destruction. Probably this method is as satisfactory in practice as that recommended by Kister and Trautmann, in which the books are placed in a steam disinfecting oven, fitted with a vacuum apparatus; formalin is placed in a vaporiser at a point in the oven most distant from the vacuum apparatus, and as the pressure inside the oven is reduced, formic aldehyde and steam are liberated at about 80 deg. C.; this is continuously sucked through the apparatus for thirty minutes, the books being disposed in the track of the vapours.

Spray disinfection in the hands of a careful and conscientious official is doubtless satisfactory. Given a sufficiently fine spray, it injures nothing, and there is a saving of several hours (often a most important matter) in the time during which the room is not available for occupation; but it is held by many that there is much in favour of the method which is less dependent upon the care and conscientiousness of the official for its efficiency; and which, by requiring the room to be sealed up *for several hours*, involves a bombardment of the exposed germs on surfaces by the molecules of gas generated into the atmosphere. The circumstance, moreover, that the disinfecting agent is capable of passing through any fissures or spaces in and behind woodwork, to follow the infectious dust beyond, is a further advantage that has always appealed strongly to me. As to the relative efficiency of the two methods in practice, I have, during the years 1906 and 1907 endeavoured to obtain some information. During the whole of the year 1906, fumigation by formic aldehyde (alformant lamp, 25 tablets per 100 sq. feet of floor) was carried out in Stoke Newington, and during the year 1907 the infected apartments were sprayed with a 1 per cent. acid solution of corrosive sublimate. From the information carefully collected in reference to each home disinfected, I have drawn up the following Table, regarding which no one appreciates more than I do the limitations to its value from many standpoints; but nothing more can be made of the facts as collected in the Register, and the most I claim for it is that it does not furnish evidence in favour of the superiority of the spray method of disinfection.

Enteric fever has been omitted from the Table, because in respect of this disease no subsequent infection occurred, during either year, of any member of the primarily infected home.

With reference to the scarlet fever cases, it was found that there was an average of 3.8 living rooms to each infected family, and there was an average of 5.2 members to each such family. With reference to diphtheria, these averages were 4.5 and 5.6 respectively.

As regards scarlet fever, after excluding those who had previously suffered, and those whose illness led to the disinfection,

COMPARATIVE TABULAR STATEMENT OF FACTS ASCERTAINED DURING 1906 (FUMIGATION) AND 1907 (SPRAYING).

		Scarlet Fever.		Diphtheria.	
		1906.	1907.	1906.	1907.
Number of Homes Disinfected		125	249	41	108
Number of Persons in Infected Homes ..		579	1036	212	542
Number at risk		393 (about 68%)	720 (about 70%)	156 (about 73%)	415 (about 76%)
Number at special risk (under 14 years) ..		150 (about 25·9%)	265 (about 25·6%)	65 (about 31%)	216 (about 39·8%)
Subsequent cases in same homes during each year.	Total	11	24	1	15
	After 7 days ..	5	15	0	7
	From 7-60 days ..	5	9	0	6

it will be seen that during 1906 and 1907, 1,113 persons were at risk, and that of these 415 were under fourteen, and therefore at special risk; whereas, in diphtheria, 571 were at risk and 281 at special risk.

Therefore, the number at risk includes all those members of infected homes who had not suffered from the disease at the time of inquiry, and the number at special risk is a similar statement confined to those under 14 years of age; and I should add that whereas the enquiry-forms relating to the subsequent cases suggest in a few cases a school-origin of infection, and in others the infection is ascribed to the return of a case from a fever hospital, I have made no deductions for what are only, after all, surmises, which, moreover, form a similar proportion to the total in both years. It is impossible in practice to eliminate all the possible outside causes of infection, and to say in any case that the subsequent infection of a member of a family, of whom one had previously suffered from infection, is due to the failure of the disinfection practiced. Nor can the non-occurrence of subsequent infection be taken as an absolutely final test of the efficiency of disinfection; we have to recognise that the consequences of inefficiency will depend upon the nature of the infection, the probability of its retention, the nature of the subsequent exposure by different individuals, and upon the degree of their *then* susceptibility, and it must be borne in mind that often the most susceptible material at the time is exhausted in the home by the primary outbreak of infection. Under the ordinary conditions of home life, at least among the poorer classes, it is barely conceivable that, when infection occurs, any member of the family escapes exposure to either the original source of the infection or to the infection given off by the infected member prior to removal to hospital; but owing to subtle circumstances that determine immunity the majority escape.

But there can be no reasonable doubt that if A uses a spray method and B a fumigation method, if A's method is superior in its

disinfecting results to B, then A should be capable of demonstrating the fact by a reduced number of subsequent cases among the numerous infected households of a large community.

If there is no evidence of this in a careful investigation spreading over two years in a population of about 55,000, then I am not disposed to believe that in practice there can be a material difference in the results. I conclude, therefore, that there is from the standpoint of efficiency little to choose between either method if it is duly recognised that both represent but one step of several which are necessary for the complete disinfection of the room and its contents; and that the most important of these steps are the washing down with soap and a disinfecting solution of all those surfaces on which dust (and with it the germs) can settle, and the removal of all articles into which germs can penetrate, for steam disinfection.

PUBLIC HEALTH LEGISLATION IN 1907.

The year 1907 was fruitful in Public Health legislation. The principal new Acts that have a bearing on the work of the Sanitary Authority are: The Public Health (Regulations as to Food) Act, 1907; the Notification of Births Act, 1907; the Education (Administrative Provisions) Act, 1907; the Factory and Workshop Act, 1907 (dealing with laundries); the Public Health Acts Amendment Act of 1907; and the Butter and Margarine Act of 1907. A brief digest of these Acts may be given.

THE PUBLIC HEALTH (REGULATIONS AS TO FOOD) ACT, 1907.

This Act is a short but possibly very comprehensive and elastic measure. It confers, *inter alia*, power to make regulations for preventing danger to the public health from the importation,

preparation, storage, and distribution of articles of food and drink intended for sale for human consumption; and it would appear not improbable that under such regulations control may be exercised in a variety of ways over such articles of diet as meat, milk, shell-fish, and the like.

THE NOTIFICATION OF BIRTHS ACT, 1907.

The Act requires that the Council, as Local Authority, shall bring the provisions of the Act to the attention of all medical practitioners and midwives practising in their area.

These provisions may be briefly summarised as follows:—

Primarily, the "duty" of notifying a birth to the Medical Officer of Health devolves upon the father of the child, if he be resident in the house at the time of its occurrence; secondarily, upon "any person in attendance upon the mother at the time of, or within six hours after, the birth." The notice must be "given by posting a prepaid letter or postcard. . . within thirty-six hours after the birth," or by delivery of a "written notice of the birth (in either case) at the office of the Medical Officer within the same time." The local authority are required to "supply without charge addressed and stamped postcards, containing the form of notice, to any medical practitioner or midwife, residing or practising in their area, who applies for the same." The notification is "in addition to, and not in substitution for, the requirements" of the Act "relating to the registration of births," and it applies to any child born "after the expiration of the twenty-eighth week of pregnancy, *whether alive or dead.*" Liability to a penalty not exceeding twenty shillings is incurred by any person who fails to give notice of a birth.

There has, up to the present, been an absence of the necessary organisation whereby the effects of parental ignorance and neglect might be mitigated. Before the sanitary authority has had knowledge of the births of infants within its district, death has already gathered at least one-third of its tax upon the first year of existence.

Important, however, as this Act should prove in the immediate future, it must rank second as a potential measure with the results which should be achieved under the EDUCATION (ADMINISTRATIVE PROVISIONS) ACT, 1907.

The national conscience is now awakened to the fact that all is not well with the children—that there is abroad an appalling amount of physical unfitness, which seriously interferes with the educational needs of the scholar and the future usefulness of the citizen. There is no doubt that much of this can be prevented if the conditions of infant rearing can be improved; and at last an Act dealing with the medical inspection of school children has been placed upon the Statute Book. This country is greatly behind most other civilised countries in providing this latter need, and it cannot fail to be productive of the same good fruits which have been reaped from it for many years in other parts of the world.

By means of this provision there will be forthwith instituted in all our public elementary schools a medical inspection of each scholar shortly after he or she commences the period of school attendance. In this way the weak spot in every child will be discovered, and, if practicable, remedied. The parents are to be invited to be present at the first examination. This should tend to promote the parents' interest in the welfare of the child. Whatever difference of opinion may obtain as to the precise means and method by which the actual inspection of school children should be carried out (and it was clear at the International Congress on School Hygiene that marked differences did obtain), no reasonable person can question the overwhelming importance of the measure.

THE BUTTER AND MARGARINE ACT 1907.

By this Act, which came into force on January 1, a statutory maximum limit of 16 per cent. of water is imposed in the case of all butters, with the exception of "milk-blended butter," which is to be allowed to have as much as 24 per cent. so long as it is sold by a name which is approved by the Board of Agriculture and one which is not "suggestive of butter or anything connected with the dairy interest." The names under which margarine is sold are to be subject to the same restrictions. The principal advantage of the Act is the substitution of a system of control at the port of importation (through the Customs authorities and the Government laboratory) and in this country at the place of manufacture, for the present methods which are based almost wholly on analysis of purchased samples. Places where butter is blended "by way of trade" will now have to be registered, and no foreign fats are to be kept on such premises. Wholesale "blending" of butter and margarine making are not to be carried out on the same premises, although exceptions may be made for existing factories. Another considerable advantage of the Act is that it empowers the Local Government Board to schedule and to regulate the use of preservatives in butter, milk-blended butter and margarine, and it may be hoped that this will speedily be done. A circular has been issued by the Board of Agriculture as to the action which Local Authorities are recommended to take under the new Act. Apparently the principal duty required of them is to see that butter-blending, milk-blending, and margarine-making premises are all duly registered and to report to the Board of Agriculture cases where in course of ordinary sampling it is found that the permitted limits of moisture have been exceeded. It may be gathered from the circular that routine inspection of the registered factories will be made by officers of the Board of Agriculture. The circular points out, however, that under Section 2 of the new Act local authorities have power to authorise any officer who is authorised to procure samples under the Sale of Food and Drugs Acts to enter any registered butter factory for the purpose of inspection of processes and of taking samples.

THE VACCINATION ACT 1907.

The Vaccination Act of 1907 has so amended the Act of 1898 as to substitute a statutory "declaration of conscientious belief" for the provision as to satisfying two justices of such belief which formerly obtained, and the modification in question came into operation at the beginning of 1908.

THE FACTORY AND WORKSHOPS ACT, 1907.

This Act amends the Factory and Workshops Act of 1901 with respect to laundries, and it extends that Act to certain institutions. Some further conditions as to the hours of employment of women and young persons in laundries are included. The provisions of the principal Act are made to apply to institutions carried on for charitable or reformatory purposes, and not being premises subjected to inspection by Government officials. If, however, any institution can satisfy the Secretary of State that the only persons working therein are inmates of and supported by the institution or persons engaged in the supervision of the work or management of machinery, and that such laundry work is carried on in good faith with the purpose of the support, education, training or reformation of persons engaged in it, the Secretary of State may, by Order, direct that the principal Act shall apply to the institution subject to certain modifications.

The Secretary of State may arrange that premises which are subject to inspection under any Government Department, and which are not factories or workshops (because the work carried on therein is not with the object of trade or gain) shall, as respects matters dealt with by the principal Act, be inspected by a Factory Inspector, and that the latter shall have the usual rights of entry.

Meteorological Observations taken during the Year 1907, *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 Temp'rature of Air.	Rain.		Relative Humidity. Saturation. 100.
			Mean.					
	Highest	Lowest.	Of all Highest	Of all Lowest.		No. of Days it fell.	Amnt. Collctd.	
	°	°	°	°	°		ins.	
January	51	22	43·1	34·1	38·6	8	0·91	88
February	52	23	43·0	32·7	37·9	13	1·17	88
March	69	24	54·5	35·2	44·9	13	0·97	80
April	73	31	56·2	40·0	48·1	18	3·22	82
May	82	36	63·5	45·6	54·6	18	1·74	74
June	78	44	67·0	50·4	58·7	19	2·03	78
July	81	42	70·0	51·3	60·7	15	1·26	77
August	78	44	70·6	52·4	61·5	13	1·94	77
September	80	38	70·0	49·7	59·9	8	0·62	85
October	68	37	59·0	45·0	52·0	22	2·52	90
November	60	30	51·1	40·3	45·7	13	2·16	93
December	57	30	46·0	37·6	41·8	16	3·79	91

NOTES UPON SANITARY WORK PERFORMED DURING THE YEAR 1907.

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: 3,961 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; 963 Intimation Notices, followed in 53 cases by Statutory Notices, were complied with. Of this number, only 170 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 preventible sickness. In the case of 53 of the complaints received, no nuisance existed at the time of inspection.

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

The *slaughter-houses*, *bake-houses*, *cowsheds* and *dairies*, the *common lodging house* and the *registered houses let in lodgings*, situated in the borough were all duly inspected throughout the year.

FOOD INSPECTION.

In Stoke Newington a vigilant eye is kept upon the food supplied in the Borough. Upon one evening a week, and generally on a Saturday, one inspector is told off exclusively to inspect the food-stuffs exposed for sale at the various shops and stalls. Of course, some inspection is carried out more or less every day, but it has been thought desirable to supplement the day by an evening inspection. There is a small amount of unwholesome food seized in Stoke Newington, including, of course, tinned articles; but the quantity is very small, even when regard is had to the size of the Borough. On the other hand, a not inconsiderable amount of unwholesome food has been surrendered for destruction during the year. It is to be

hoped that in the near future all obviously unsound food will be thus surrendered, and that no occasion will arise for a seizure of such material to be followed by a prosecution of the vendor—for it cannot be to the interest of anyone to sell unsound food, and the risks are considerable.

In some 40 per cent. of sausages examined one finds antiseptics (sometimes in large quantities), and I have occasionally found two different chemical antiseptics in one and the same sausage. The two chemical antiseptics employed are solutions of sulphurous acid (sometimes in the form of sulphite) and boric acid.

If it is necessary to use preservatives at all in the manufacture of sausages, the drugging of the food should be performed under proper advice and restrictions. Sausage makers are at present advised, and, indeed, pressed to use preservative powders and solutions on the market by agents whose commercial interest it is to foster the sale of these articles, and they are often used without any discrimination by butchers who are not notified as to the minimum quantities that will suffice. Hence one finds that where 5 to 10 grains to the pound of boric acid would be sufficient to preserve fresh sausage meat, even in the summer months, as much as 60 grains are sometimes added.

During the year the following communication was circulated among the sausage makers in the Borough :—

Dear Sir,—I am instructed by the Public Health Committee to inform you that several convictions have been obtained for the sale of sausages containing harmful amounts of chemical preservatives, and that recently a vendor was fined at the Old Street Police Court for the sale of sausage containing boric acid to the extent of 48 grains to the pound. I am also instructed by the Public Health Committee to take occasional samples of the sausages sold in the

Borough, and, in the event of finding chemical preservatives, in quantity likely to injure health, to report to them with the view to a prosecution.

The object of this notice is to point out to those who are unaware that the employment of chemical preservatives may lead to injury to health, that if preservative powders are used at all, their use must be kept within strict limitations.

I am, etc.,

The result of this letter has been a considerable falling-off in the use in Stoke Newington of these preservatives.

There are at present 26 sausage makers in the Borough, and the meat used by them has been found to be wholesome on every occasion of inspection during 1907.

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 1907, 243 premises were on the Register, and during the year all registered premises were duly inspected.

FACTORIES AND WORKSHOPS.

At the end of the year 1907 there were on the Register 245 worshops and work-places.

TABLES REQUIRED BY THE HOME OFFICE.

FACTORIES, WORKSHOPS, LAUNDRIES, WORK-PLACES AND HOME WORK.

1.—INSPECTION.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR INSPECTORS OF NUISANCES.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
1	2	3	4
Factories (including Factory Laundries) ..	16	..	..
Workshops (including Workshop Laundries) ..	167	64	..
Workplaces .. .. (Other than Outworkers' premises included in Part 3 of this Report).	10	..	..
Total	193	64	Nil

2.—DEFECTS FOUND.

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
1	2	3	4	5
Nuisances under the Public Health Acts:—				
Want of Cleanliness	36	36	..	..
Want of Ventilation	..	..	..	..
Overcrowding	..	..	..	..
Want of drainage of floors	1	1	..	..
Other nuisances	30	30	..	..
†Sanitary accommodation — insufficient	2	2	..	..
†Sanitary accommodation — unsuitable or defective	25	25	..	..
†Sanitary accommodation — not separate for sexes	..	..	..	..
Offences under the Factory and Workshop Act:—				
Illegal occupation of underground bakehouse (s. 101)	..	..	..	..
Breach of special sanitary requirements for bakehouses (ss. 97 to 100)	..	..	..	..
Other offences .. .. (Excluding offences relating to outwork which are included in Part 3 of this Report)	..	7	..	..
Tota	94	94	Nil	Nil

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

3.—HOME WORK.

NATURE OF WORK.	OUTWORKERS' LISTS, SECTION 107.										Inspections of Outworkers' premises.	OUTWORK IN UNWHOLESOME PREMISES, SECTION 108.			OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110.		
	Lists received from Employers.						Addresses of Outworkers		Prosecutions.								
	Twice in the year.			Once in the year.													
	Lists.†	Outworkers.†		Lists.	Outworkers.†		Received from other Councils.	Forwarded to other Councils.	Failing to keep or permit inspection of Lists.	Failing to send lists.		Instances.	Notices served.	Prosecutions.	Instances.	Order made (S 110).	Prosecutions (Sections 109, 110).
		Contractors	Workmen.		Contractors	Workmen.											
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)
Wearing Apparel—																	
(1) making, &c.	28		264	4		25	541	112			204				3		
(2) cleaning and washing ...																	
Lace, lace curtains and nets ...																	
Artificial Flowers																	
Nets, other than Wire Nets ...																	
Tents																	
Sacks																	
Furniture and Upholstery ...	2		12														
Fur pulling																	
Feather sorting																	
Umbrellas, &c.																	
Carding, &c., of Buttons, &c. ...																	
Paper Bags and Boxes																	
Basket making																	
Brush making																	
Racquet and Tennis Balls ...																	
Stuffed Toys																	
File making																	
Electro Plate																	
Cables and Chains...																	
Anchors and Grapnels																	
Cart Gear																	
Locks, Latches and Keys ...																	
Pea Picking...																	
TOTAL	30		276	4		25	541	112			204				3		

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year. (1)	Number (2.)
Bakehouses	28
Laundries	24
Restaurant Kitchens	24
Miscellaneous...	153
Total number of workshops on Register	229

5.—OTHER MATTERS.

Class. (1)		Number. (2)
Matters notified to H.M. Inspector of Factories:— Failure to affix Abstract of the Factory and Workshop Act (s. 133)...		4
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5)	Notified by H.M. Inspector	4
	Reports (of action taken) sent to H.M. Inspector ...	4
Other		—
Underground Bakehouses (s. 101):— Certificates granted during the year		—
In use at the end of the year		18

As the result of the inspection of the workrooms and work-places 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 was no case of overcrowding to be dealt with, but there were 36 instances in which it was necessary to require cleansing. There were two occasions to require an increase in the water-closet accommodation, and 25 in which the accommodation was unsuitable or defective. In four cases the Abstract of the Factory Act was not affixed in the workrooms, and the Home Office was notified accordingly. There are altogether 204 domestic workrooms in the borough in which wearing material of various kinds are being dealt with.

During the year no case of notifiable infectious disease occurred on premises in which there was a workshop, but on several occasions the out-workers in connection with certain factories and workshops had to be stopped from carrying on their work. A complete list of all out-workers has been kept in the office; the information has often been obtained on calling at the workshops, for some employers still fail to realise their duty to send in a list of out-workers twice a year, viz., in February and August, as the Act directs. Most of the premises occupied by outworkers were inspected during the year.

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

FOOD AND DRUGS.

Under the Sale of Food and Drug Acts, 156 samples of food and drugs were taken and analysed. The results are shown in Table C.

TABLE C.

ANALYSES PERFORMED UNDER THE SALE OF FOOD AND DRUGS ACTS DURING THE YEAR 1907.

No.	Sample Analysed.	Opinion Formed.	Action Taken.
1	Milk	Genuine	Nil.
2	Milk	9% less than the legal limit for fat.	Defendant fined £1 10s. and 12s. 6d. costs.
3	Milk	Genuine	Nil.
4	Butter .. .	,, ...	,,
5	Milk	,, ...	,,
6	Butter	,, ...	,,
7	Milk	,, ...	,,
8	Milk	,, ...	,,
9	Milk	,, ...	,,
10	Milk	,, ...	,,
11	Coffee	,, ...	,,
12	Vinegar	,, ...	,,
13	Coffee	,, ...	,,
14	Demerara Sugar ..	,, ...	,,
15	Demerara Sugar ..	,, ...	,,
16	Condensed Milk ..	,, ...	,,
17	Gin	,, ...	,,
18	Gin	,, ...	,,
19	Butter	,, ...	,,
20	Milk	,, ...	,,
21	Milk	,, ...	,,
22	Butter	,, ...	,,
23	Milk	,, ...	,,
24	Milk	,, ...	,,
25	Milk	3% of added water ..	,,
26	Milk	Genuine	,,
27	Milk	,, ...	,,
28	Milk	,, ...	,,
29	Flour	,, ...	,,
30	Lime Water.. ..	,, ...	,,
31	Liquorice Powder ..	,, ...	,,
32	Flour	,, .. .	,,
*33	Milk	,, ...	,,
*34	Milk	Trace of Boric Acid	,,
*35	Milk	Genuine	,,
*36	Milk	14% less than the legal limit for fat.	Defendant fined £2 and 14s. 6d. costs.
*37	Milk	Genuine	Nil.
*38	Milk	,, ...	,,
*39	Milk	,, ...	,,
*40	Milk	,, ...	,,
41	Butter	,, ...	,,
42	Butter	,, ...	,,
43	Condensed Milk ..	,, ...	,,
44	Condensed Milk ..	,, ...	,,

*Sunday Samples.

TABLE C.—*continued.*

No.	Sample Analysed.	Opinion Formed.	Action Taken.
*45	Milk	Genuine	Nil.
*46	Milk	,, ...	,,
*47	Milk	,, ...	,,
*48	Milk	,, ...	,,
*49	Milk	,, ...	,,
*50	Milk	,, ...	,,
*51	Milk	,, ...	,,
*52	Milk	,, ...	,,
*53	Milk	,, ...	,,
54	Preservative Powder	,, ...	,,
55	Coffee	,, ...	,,
56	Flour	,, ...	,,
57	Cocoa	,, ...	,,
58	Flour	,, ...	,,
59	Coffee	,, ...	,,
60	Sweets	,, ...	,,
61	Sausage	Boric Acid—18 grains to the pound.	Vendor cautioned.
62	Sausage	Genuine	Nil.
63	Milk	,, ...	,,
64	Milk	5% deficiency in fat..	Vendor cautioned.
65	Milk	Genuine	Nil.
66	Milk	,, ...	,,
67	Milk	,, .. .	,,
68	Milk	,, ...	,,
69	Milk	,, ...	,,
70	Butter	,, ...	,,
71	Milk	,, ...	,,
72	Margarine .. .	,, ...	,,
73	Milk	,, ...	,,
74	Butter .. .	,, ...	,,
75	Brandy	,, ...	,,
76	Pepper	,, ...	,,
77	Scotch Whisky ..	,, ...	,,
78	Pepper	,, ...	,,
79	Coffee	,, ...	,,
80	Gin	,, ...	,,
81	Coffee	,, ...	,,
82	Prescription.. ..	,, ...	,,
83	Milk	Trace of Boric Acid	,,
84	Milk	Genuine	,,
85	Milk	,, ...	,,
86	Milk	,, ...	,,
87	Milk	,, ...	,,
88	Milk	,, ...	,,
89	Milk	,, ...	,,
90	Milk	,, ...	,,
91	Claret	,, ...	,,
92	Demerara Sugar ..	Coloured Crystals ..	Vendor cautioned
93	Butter	Genuine	Nil.
94	Butter	,, ...	,,
95	Claret	,, ...	,,

*Sunday Samples.

TABLE C.—*continued.*

No.	Sample Analysed.	Opinion Formed.	Action Taken.
96	Butter	Genuine	Nil.
97	Coffee	,, ...	,,
98	Coffee	,, ...	,,
99	Demerara Sugar ..	Coloured Crystals ..	Vendor cautioned.
100	Mixed Sweets ..	Genuine	Nil.
101	Cream of Tartar ..	,, ...	,,
102	Margarine	,, ...	,,
103	Milk	,, ...	,,
104	Milk	,, ...	,,
105	Milk	,, ...	,,
106	Milk	,, ...	,,
107	Milk	Trace of Boric Acid	,,
108	Milk	Genuine	,,
109	Apricot Pulp ..	,, ...	,,
110	Apricot Pulp ..	,, ...	,,
111	Apricot Pulp ..	,, ...	,,
112	Apricot Pulp ..	,, ...	,,
113	Black Currant Syrup	,, ...	,,
114	Milk	,, ...	,,
115	Cheese	,, ...	,,
116	Butter	,, ...	,,
117	Cheese	,, ...	,,
118	Milk	,, ...	,,
119	Butter	,, ...	,,
120	Milk	,, ...	,,
121	Milk	,, ...	,,
122	Butter	,, ...	,,
123	Milk	Slight deficiency in solids non-fat (8·4%)	,,
124	Milk	Genuine	,,
125	Scotch Whisky ..	,, ...	,,
126	Gin	,, ...	,,
127	Cocoa..	,, ...	,,
128	Coffee	,, ...	,,
129	Scotch Whisky ..	,, ...	,,
130	White Pepper ..	,, ...	,,
131	Liquorice Powder ..	,, ...	,,
*132	Milk	60% deficiency in fat	Defendant fined £5 and 12s. 6d. costs.
*133	Butter .. .	Genuine	Nil.
*134	Milk	,, ...	,,
*135	Milk	,, ...	,,
*136	Milk	,, ...	,,
*137	Milk	,, ...	,,
*138	Milk	,, ...	,,
139	Beef Sausage ..	Trace of Boric Acid	,,
140	Beef Sausage ..	,, ...	,,
141	Pork Sausage ..	,, ...	,,
142	Beef Sausage ..	2¾ grains to the pound of Boric Acid.	,,

*Sunday Samples.

TABLE C.—*continued.*

No.	Sample Analysed.	Opinion Formed.	Action Taken.
143	Beef Sausage ..	Genuine	Nil.
144	Pork Sausage .	,, ...	,,
145	Milk	,, ...	,,
146	Beef Sausage ..	,, ...	,,
147	Pork Sausage ..	5 grains to the pound of Boric Acid.	,,
148	Beef Sausage ..	0·28% of Boric Acid =19½ grains per lb.	Vendor cautioned.
149	Beef Sausage ..	Genuine	Nil.
150	Beef Sausage ..	,, ...	,,
151	Butter	,, ...	,,
152	Milk	,, ...	,,
153	Butter	,, ...	,,
154	Milk	,, ...	,,
155	Milk	,, ...	,,
156	Butter	89% of foreign fat and is therefore margarine.	Defendant fined £3 and 12s. 6d. costs.

11 of the samples were not satisfactory, and, therefore, the percentage of non-genuine samples amounted to about 7 per cent., a figure which is below that of the preceding year, when it was 8.3 per cent. The figure for the whole country was 8.2 per cent. during the year 1905.

8.4 per cent. of the milk samples were unsatisfactory, as against 15.5 per cent. during the preceding year; but in some cases the deficiency below the legal limits was very slight. 34 per cent. of the samples of milk were taken on Sundays, and of these 8.3 per cent. were adulterated.

In accordance with the suggestion of the Local Government Board, contained in their circular of the 11th July, 1906, all the vendors of milk in the Borough were notified that the Public Health Committee of the Metropolitan Borough of Stoke Newington would

recommend the Council to take action, under the Sale of Food and Drugs Acts, in all cases where preservatives are found in the milk sold in the Borough.

Most of the samples purchased under the Sale of Food and Drugs Act have been obtained through the employment of a deputy, for the sanitary inspectors are well known to tradesmen and others. During the year we have on two occasions obtained the services of individuals who have acted as more or less constant customers at two shops which were under suspicion, and after they had been dealing at these shops for several weeks, we obtained their services as agents; but the samples procured did not prove on analysis to be adulterated. In a few instances we have purchased samples without going through the formalities prescribed by the Acts; the object being to submit these to analysis, and, if they proved unsatisfactory, to subsequently take samples under the prescribed formalities, so that proceedings might be instituted against the vendor.

REPORT OF CHIEF SANITARY INSPECTOR FOR THE YEAR 1907.

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

GENTLEMEN,

I beg to present my Annual Report for the year ending 31st December, 1907 :—

HOUSES AND PREMISES INSPECTED.

By house-to-house inspection	708
Upon complaint, under Sec. 107 (3), Public Health Act, 1891...	170
After notification of infectious disease	452
After Notices from builders, under Bye-law 14 (London County Council)	173
Stables and mews	435
Slaughter houses	39
Milkshops, dairies and cowsheds	54
Bakehouses	53
Factories and workshops	381
Other premises inspected	1,496
	3,961
Re-inspections made to examine and test work	6,698
Total inspections ...	10,659

INTIMATION NOTICES SERVED.

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

After house-to-house inspection	360
After inspection on account of complaint	136
After infectious illness	128
With reference to stables and mews	26
,, ,, milkshops, dairies and cowsheds	6
,, ,, bakehouses	9
,, ,, factories and workshops	64
,, ,, slaughter houses	Nil
After sundry other inspections	234
	963

STATUTORY NOTICES SERVED.

Fifty-three 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	185
Dampness in dwellings remedied	55
Dilapidated ceilings, stairs, &c., repaired	31
Bell-traps and small dip-traps removed and replaced by stone-ware gulleys	17
Foul traps and pans of w.c.'s cleansed or new ones substituted Public-house urinals cleansed	49
Flushing cisterns to w.c.'s provided or repaired, and w.c.'s with insufficient water supply made satisfactory	81
Defective w.c. basins and traps removed and replaced by approved patterns	152
Stopped or choked w.c. traps cleared	12
External ventilation to w.c.'s improved	3
W.c.'s removed to more sanitary positions	5
Carried forward...	590

Brought forward...	590
Separate Flushing cisterns fixed to w.c.'s which were previously flushed directly from dietary cistern...	1
Additional w.c.'s provided in case of insufficient w.c. accommodation	15
Defective soil-pipes reconstructed	57
Soil-pipes improperly ventilated, improved Unventilated soil-pipes ventilated ... }	145
Dirty yards cleansed	20
Yards paved or re-paved with impervious material	137
Gulley and other traps inside houses removed	18
Sink waste-pipes directly connected to drain, made to discharge in open-air over proper syphon gulleys	1
Long lengths of sink, bath, and lavatory waste-pipes trapped, and made to discharge in open-air over gulleys	94
Defective waste-pipes repaired	54
Foul water-cisterns cleansed ... ... Water-cisterns without close-fitting covers provided with proper coverings ... ... }	51
Defects in water-cisterns remedied	10
Defective dust-bins pulled down and new portable dust-bins provided	137
Defective drainage re-constructed in accordance with the bye-laws of London County Council	365
Choked or stopped drains cleared and repaired	132
Drains ventilated or defective ventilating pipes renewed ...	23
Rain water pipes disconnected from drains or soil-pipes and made to discharge over gulley-traps	23
Proper water supply provided to houses	10
Defective roofs repaired	59
Defective guttering and rain water pipes repaired or renewed ...	87
Defective paving to floors of wash-houses repaired or renewed...	31
Dirty walls of work-rooms cleansed	24
Proper manure receptacles provided (London County Council bye-laws)	9
Cases of over-crowding abated	4
Accumulations of refuse, &c., removed	34
Carried forward...	2,131

Brought forward...	2,131
Areas re-paved and drained...	4
Insufficiently ventilated space under wooden floors, remedied by insertion in outer walls of proper air bricks	8
Underground dwellings improved	1
Nuisances from animals abated	4
Smoke nuisance abated	1
Total number of nuisances abated ..	2,149

It is difficult to tabulate the whole of the sanitary improvements carried out by owners in complying with notices, as in many cases extra work is done on advice. Only the work specified in the notices is taken into consideration in the above list.

HOUSE-TO-HOUSE INSPECTION.

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

Aldham Place.
Adolphus Road.
Alexandra Road.
Barn Street.
Barrett's Grove (Tenements).
Broughton Road.
Blackstock Road.
Chapel Place.
Clonbrock Road.
Cowper Road.
Fleetwood Street.
Gloucester Road.
Grove Lodge Yard.
Johns Place.
Listria Park.
Mason's Court.
Martaban Road.
Nevill Road (Tenements).
Philp Street.
Rochester Court.
Shakespeare Road.
Spenser Road.
Thomas Place.
Victoria Grove (West).
Watson Street.
White Hart Court.

The houses and premises inspected during the year in these streets numbered 708.

SLAUGHTER HOUSES.

Thirty-nine visits have been paid to the seven Slaughter-houses in the Borough, and in every instance the premises were found to be in a satisfactory condition.

COMMON LODGING HOUSE.

The one common Lodging-house in the Borough is under the control of the London County Council, and is conducted in accordance with the bye-laws. Frequent visits have been paid by the Borough officials.

BAKEHOUSES.

Fifty-three visits have been paid to the twenty-eight Bakehouses in the Borough. One of the underground bakehouses has been discontinued; there are now 19 underground bakehouses. Nine intimation notices were served for limewhiting and cleansing.

DAIRIES, COWSHEDS, AND MILKSHOPS.

There are 53 Milkshops and 1 Cowshed on the Register, all of which have been inspected. It was only necessary during the year to serve six intimation notices on occupiers to cleanse premises. One Cowshed has been temporarily closed, this will again be added to the Register if occupied.

COMPLAINTS.

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

170 complaints were received during the year, relating to 187 premises.

In 32 cases, on inspection of the premises to which the complaint related, no nuisance which could be dealt with under the Public Health Acts was found.

6 complaints were referred, after inspection, to the Surveyor's Department and one to the Police authorities.

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

STABLES AND MEWS.

435 inspections were made of the Stables and Mews in the Borough, special attention being given to those where the employees live over the stables.

In very few cases were accumulations found. Living rooms in connection with stables generally were found to be kept in a sanitary condition.

Copies of the Council's Regulations have been given to all occupiers of Stables and Mews.

HOUSES LET IN LODGINGS.

There were 243 premises on the Register at the end of the year.

SALE OF FOODS & DRUGS ACTS, 1875-1901.

156 samples of Food and Drugs were submitted to the Public Analyst during the year. A table will be found on pages 62 to 65 showing the result of proceedings taken in respect of adulterated samples.

BUTCHERS', GREENGROCERS', AND FISHMONGERS' SHOPS, STALLS, &c.

The following is a list of articles of food seized or surrendered during the year:—

Tinned Food.	Number of Tins.	Tons.	cwts.	qrs.	lbs.
Condensed Milk	626 ..		4	2	9
Salmon	7 ..				7
Sardines	76 ..				25
Beef	66 ..		6	1	26
Mutton	1 ..				11
Brawn	9 ..			3	15
Apricot Pulp	66 ..		6	1	26
Cherries (Preserved) ..	6 ..			2	10
Pine-Apple	6 ..				24
Figs	2 ..				22
Black Currants	1 ..				11
Mulberries	1 ..				11
Rabbit	1 ..				4
Other Articles.					
Fish			1	1	19
Sausages					1½
Strawberries					1½
Gooseberries					5
Dutch Cheese				3	14
Bacon			1	0	13
		Ton	1	3	2	3

Kippers, 60 pairs. Eggs, 1,300. Sheeps' lungs, 4 sets.

The greater portion of the above was surrendered from time to time in small quantities by two wholesale firms. Wholesale dealers in perishable articles of food are frequently having goods returned from their customers, and it is only by constant inspection at all times that the Sanitary Authority can prevent such food being put on the market again, perhaps in another form. The fear of being detected in the possession of articles of doubtful and unwholesome character leads to their being surrendered within a short time of arrival at the warehouse or shop.

The Inspectors make a practice of inspecting the food exposed for sale by itinerant vendors on stalls and barrows whenever they meet with them. In this way some hundreds of fruiterers' and fishmongers' wares are inspected during the year. In no case was it found necessary to complain of the food inspected.

A great improvement is noticeable in the way in which food is stored and retailed in the Borough since the regular inspections were started, and tradesmen frequently seek advice of the inspectors, which is always readily given.

SMOKE ABATEMENT.

On one occasion during the year it was found necessary to caution the owner of a factory the chimney of which was seen to emit black smoke. Structural alterations were at once made, and though frequent observations have since been made, the nuisance has not recurred.

ICE CREAM MANUFACTURERS AND VENDORS.

There are 36 premises in the Borough where ice-cream is manufactured. A Register is kept of all such premises, and the occupiers supplied with copies of the London County Council Regulations. In no instance was it found necessary to complain as to the conditions under which the manufacture was carried on.

RESTAURANTS AND EATING HOUSES.

There are 24 of these premises in the Borough. The results of the inspection of the food in course of preparation and of the premises have been satisfactory.

FACTORIES AND WORKSHOPS.

The Register of Factories and Workshops has been maintained. There are at present 245 Factories, Workshops and Workplaces in the Borough, all of which were inspected during the year. The larger portion of the homes and workrooms of outworkers have also been inspected.

Of the outworkers notified from firms whose places of business are in Stoke Newington—

164	reside in	Stoke Newington.
37	,,	,, Hackney.
37	,,	,, Islington.
17	,,	,, Tottenham.
10	,,	,, Stepney.
5	,,	,, Edmonton.
2	,,	,, Shoreditch.
3	,,	,, Wood Green.
1	,,	,, Leyton.
Total 276		

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

Battersea	2
Bethnal Green ..	9
Chelsea	1
Colchester	1
City of London ..	176
Finsbury	116
Hackney	62
Hornsey	3
Islington	110
Kensington	1
Paddington	2
Shoreditch	33
Southwark	2
St. Marylebone ..	11
Stepney	4
Tottenham	4
Westminster	4
Total	541

Outworkers' addresses received in error from other Boroughs, etc., and forwarded to their proper destination :—

45	forwarded to	Hackney.
2	,,	,, Islington.
3	,,	,, Tottenham.
Total 50		

NOTIFICATION OF INFECTIOUS DISEASE.

Four hundred and thirty-six cases were notified during the year and in most instances an inspection of the infected premises was made.

All the houses where the cases of infectious illness occurred have been disinfected ; 375 by the Department, and the remainder under the supervision of the Medical Practitioner attending the case. The bedding, clothing, &c., were removed, steam disinfected, and returned in 363 instances. 314 patients were removed to Hospital.

It was found necessary to strip and cleanse 32 rooms after removal or recovery of patients.

Three hundred books which had been borrowed from the Public Library were collected from infected houses, disinfected, and returned to the Public Library.

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

No. in Report Book.	Situation of Premises.	Nature of Offence.	Result of Proceedings.
6957	26, Listria Park ..	Defective drains and sanitary arrangements.	Order made with costs. Further summons for failing to submit plans — Fined 2s. 6d. and 2s. costs.
7010	24, Listria Park ..	Defective drains, etc.	Do.
7374	16, Alexandra Road	Defective drains and soil pipe	Nuisance abated previous to issue of Summons.
7302	30, Listria Park ..	Do.	Do.
7303	32, Listria Park ..	Do.	Do.
7616	154, Green Lanes ..	Defective drains.	Summons adjourned *sine die*; work subsequently carried out.
7742	11, Digby Road ..	Defective drains and sanitary arrangements.	Nuisance abated previous to issue of Summons.

DRAINAGE APPLICATIONS.

Ninety-two plans were submitted, referring to the drainage of 140 premises; all of these were eventually approved.

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.
2	Milk	9 per cent. less than the legal limit for fat.	Defendant fined £1 10s. and 12s. 6d. costs.
36	Milk	14 per cent. less than the legal limit for fat.	Defendant fined £2 and 14s. 6d. costs.
132	Milk	60 per cent. deficiency in fat.	Defendant fined £5 and 12s. 6d. costs.
156	Butter	89 per cent. of foreign fat and therefore Margarine.	Defendant fined £3 and 12s. 6d costs.

By your direction, several vendors of poor samples of food taken under the 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.

ADEN Grove
Aden Terrace
Adolphus Road
Allen Road
Allerton Road
Albion Road
,, Grove
Alexandra Road
Amhurst Park (90-100 even Nos and 93)
Arthur Road
Ayrsome Road
Aldham Place

BARN Street
Barrett's Grove
Bethune Road (1 to 145)
,, ,, (2 to 106)
Blackstock Road (5 to 175)
Bouverie Road
Boleyn Road (94 to 192)
Brighton Road
Brodia Road
Broughton Road
Brownswood Park
,, Road
Burma Road

CASTLE Street (1 to 30)
Carysfort Road
Chalmers Terrace
Chapel Place
Chesholm Road
Church Path
,, Road
,, Street
Clonbrock Road
Clissold Road
Coronation Avenue
Cowper Road
Cressington Road

DEFOE Road
Digby Road
Dumont Road
Dynevor Road

EADE Road (2 to 66) and 1 to 27 odd Nos.
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 388)
,, ,, (,, 45 ,, 107)
Grove Lodge Yard

HAMILTON Place
Harcombe Road
Hawksley Road
Hayling Road
Heathland Road
Henry Road
Hermitage Road
High Street (17-217)
Hornsey Place
Howard Road

IMPERIAL Avenue

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 (2-122)
Millard Road
Milton Road
Mountgrove Road (2-98)

NEVILL Road
Newington Green

OLDFIELD Road
Osterley Road

PAGET Road
Painsthorpe Road
Palatine Road
Paradise Row
Park Crescent
,, Lane
,, ,, Terrace
,, Street
Pellerin Road
Petherton Road (106-138)
Philp Street
Portland Road
Prince George Road
Princess Road
,, May Road

QUEEN Elizabeth's Walk
Queens Road

REEDHOLM Road
Rochester Court
Riversdale Road (92-104)

SANDBROOK Road
Salccmbe Road
Seven Sisters Road
Shakespeare Road
Shelgrove 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 (1-39)
Stoke Newington Road (1-135)
Statham Grove
Summerhouse Road

THOMAS Place
Truman's Road

VICTORIA Grove
Victoria Grove West
Victoria Road

WALFORD Road
Warwickshire Road
Watson Street
White Hart Court
Wiesbaden Road
Wilberforce Road
Winston Road
Wordsworth Road
Woodland Road
Woodlea Road
Woodberry Down
,, Grove