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

Contributors

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Metropolitan Borough of Stoke Newington

Report

OF THE

Medical Officer of Health and Public Analyst,

FOR THE

YEAR 1924.

BY

HENRY KENWOOD, C.M.G., M.B., F.R.S.E., D.P.H., F.C.S.

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Medical Officer of Health and Public Analyst.

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REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1924.

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

LADIES AND GENTLEMEN,

This short Report for the year 1924 contains little more than the particulars suggested by the Minister of Health in Circular 269 of December 28th, 1921. The Annual Report for 1925 will be a more extensive "Survey Report."

The Vital Statistics of the Borough for the year 1924 were less satisfactory than those for the preceding year; for both the general death-rate and the rate of infantile mortality were somewhat higher. The higher rates were largely due to the less favourable weather conditions, which during the colder period of 1924 were responsible for an exceptional number of deaths from Pneumonia among the young and old. Nevertheless, of the 28 Metropolitan Boroughs there were only 5 with general death-rates slightly lower than that of Stoke Newington, and only 3 (Lewisham, Hampstead and Wandsworth) with lower rates of infantile mortality.

The Infectious Sickness Rate for 1924 was also higher than that for the preceding year. This was mainly due to a greater prevalence of Diphtheria. The increased prevalence of this disease was common to the whole of the Metropolitan area.

By the death of Dr. J. S. New the services of a very capable and devoted worker were lost to the Borough. It would be difficult to exaggerate the value of his eleven years official connection with the Borough in the successful development of our Maternity and Child Welfare work.

The only important measure bearing upon Public Health which was made in 1922 was the approval of a much-needed improved provision for the cleansing of verminous children; but so far the necessary work has not been commenced.

Valuable services were rendered by those Medical Officers associated with me in the work of Tuberculosis and Maternity and Child Welfare, as well as by the other Public Health officials of the Borough Council.

I am, Ladies and Gentlemen,
Your obedient Servant,
HENRY KENWOOD.

April, 1925.

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THE BOROUGH OF STOKE NEWINGTON.

The Borough of Stoke Newington is mainly a residential area, a considerable proportion of the population being employed elsewhere. The residences comprise those of the well-to-do and the tenements of the low-wage earner. There is no special industry carried on in the Borough, the factories and workshops are for the most part small, and the work engaged upon is of various kinds. A notable feature of the Southern portion of the Borough has been the considerable amount of "tenementation" within recent years of houses which were originally built for, and occupied by, one family.

GENERAL STATISTICS.

AREA (Acres)-863.

POPULATION (Middle of 1924)-52,920.

NUMBER OF INHABITED HOUSES (1924)-8,616.

Number of Families or Separate Occupiers (1924)-8,988.

RATEABLE VALUE—£347,820.

SUM REPRESENTED BY A PENNY RATE-£1,449.

THE STAFF OF THE PUBLIC HEALTH DEPARTMENT.

MEDICAL OFFICER OF HEALTH (Part-time)—Dr. H. R. Kenwood.

SANITARY INSPECTORS—D. W. Matthews (Chief).

A. P. Piggott. R. F. Rogers.

CLERKS-R. F. Rogers and S. G. Armstrong.

DISINFECTOR, &c.-F. C. Screach. Assistant-W. Brown.

MATERNITY AND CHILD WELFARE-

CLINIC'S MEDICAL OFFICERS—Dr. S. B. Jackson Smith and Dr. M. Muncey.

HEALTH VISITORS—Miss H. Reeve (Superintendent).

Nurse F. Stamford.

Miss Sandeman.

TUBERCULOSIS-

DISPENSARY MEDICAL OFFICER—Dr. L. U. Young. TUBERCULOSIS NURSE—Nurse Ager.

Measles, Whooping Cough, Etc.

Borough Nurse (Ranyard Nurse) and Nurse Ager.

POPULATION.

The population at the last census (1921) was 52,167.

The following estimate of population for the middle of 1924 has been adopted by the Register-General for the calculation of the death-rate and birth-rate of the Borough for the year 1924:—52,920.

This estimate of population is based on the adjusted 1921 census figures, after allowance for the varying rate of natural increase as evidenced by the births and deaths and of migration as indicated from other sources of information such as the changes in the numbers on the Electoral Register and the migration returns obtained by the Board of Trade.

BIRTHS.

During the year 1924 there were 876 births, viz.:—472 males and 404 females. The birth-rate per 1,000 per annum was therefore 16.6, as against 18.2 for the preceding year.

Year.	Birth-rate.	Rate for London generally.	Rate for England and Wales.
1918	14.0	16 · 1	17 - 7
1919	16.8	18.3	18.5
1920	23 · 1	26.5	25.4
1921	20.4	22.8	22 · 4
1922	17.8	21.0	20.6
1923	18.2	20.2	19.7
1924	16.6	18.7	18.8

The illegitimate births numbered 21; 12 males and 9 females.

During the year the births notified under the Notification of Births Act have been compared with the births registered locally by the Registrar of Births, and the respective figures are 632 and 746.

These figures are not satisfactory, and the local Medical Practitioners and Midwives have been acquainted of the fact.

MORTALITY.

General Mortality.—There were 328 deaths of residents regis tered in the Borough, and 269 of residents who died in Public Institutions outside of the Borough, making a total of 597 deaths.

Of these 324 were of females, and 273 were of males.

Year.	General Death-rate.	Rate for London generally.	Rate for England and Wales.
1918	16.0	18.9	17.6
1919	12.2	13.4	13.8
1920	12.4	12.4	12 · 4
1921	11.5	12.4	12.1
1922	12.9	13.4	12.9
1923	10.2	11.2	11.6
1924	11.3	12.1	12.2

The recorded general death-rate is therefore 11.3, as against 10.2 for the preceding year.

The liberal relief which is being granted throughout a period of great industrial depression is an important factor—more especially by maintaining the food supply of those who are out of work—in securing the favourable state of the public health.

THE CAUSES OF DEATH.—These are fully set forth in Table I., in which it will be noted that the deaths are also apportioned to different age-periods.

Comparing this table with the corresponding table of the preceding year, the following facts are noteworthy: The increase in the deaths from Heart Disease, Pneumonia and Suicides; and a decrease from those from Cancer.

CANCER.

The deaths from Cancer in 1924, although fewer than in 1923, are considerably more numerous than those from Tuberculosis, the proportion being as 76 is to 45.

The death-rates from Cancer in England and Wales during recent years have been as follows:

ENGLAND AND WALES.

	Rate	per thousand				
Year.	of population.					
1913	 	1.064				
1914	 	1.069				
1915	 	1.121				
1916	 	1.166				
1917	 	1.210				
1918	 	1.218				
1919	 	1.145				
1920	 	1.161				
1921	 	1.215				
1922	 	1.229				

Cancer nowadays contributes one to every 12 deaths registered. It is now as fatal as that other great scourge, Pulmonary Tuberculosis or Phthisis. Cancer is most prevalent among those of 40 years of age and upwards. An excess of cancer in the female sex is accounted for by the prevalence of cancer of the female breasts and generative organs.

The increase in cancer mortality is world wide; and better diagnosis, improved statistics and the increase in the mean duration of life will explain much of this increase. To those patients who hopefully ask for information as to progress, the doctor can nowadays certainly point out something more definite than the tentative theories of the past.

Cancer, is a disease which can often be prevented, if the predisposing factors are recognised and removed; and if dealt with in time, it can often be cured.

The problem is to get the case into the hands of a competent medical adviser while it is still in the early and curable stage, or, even more fortunately, while the patient exhibits merely those conditions which are now widely recognised as the danger signals of Cancer.

TABLE I.

CAUSES OF AND AGES AT DEATH DURING THE YEAR 1924.

CAUSES OF AND AG	LO L	TT T	TELL	II L	CILI	NG	* * * * * * * * * * * * * * * * * * * *	1. 1.0		1024.
	Nett	Death her oc	s at the	e sub	joined nin or	ages o	of "Re	sident Borou	s''	whether of or "Non- in Institu- Borough.
Causes of Death.	All Ages.	Under 1 year,	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and up- wards.	Total Deaths wh "Residents" or Residents" in I tions in the Bor
Cerebro-spinal Meningitis Encephalitis Lethargica Enteric Fever Acute Polio-myelitis Measles Scarlet Fever Whooping Cough	1 - 4 1 3 5	_ _ _ _ _ 2	1 - - 3 1 1	_ _ _ 1 _ _ 4						
Diphtheria and Croup Influenza Erysipelas Phthisis (Pulmonary	15 —	_	2	<u>i</u>	1 - 2	- 7	1 - 12	3 -	7 - 2	=
Tuberculosis) Other Tuberculous Diseases Cancer (Malignant	11	_	1	5	2	-	1	2	_	_
Disease) Rheumatic Fever Meningitis Organic Heart Disease Bronchitis Pneumonia (all forms)	76 .1 2 70 40 62	- 1 - 1 16	_ _ _ _ 6		1 - 1 -	$\frac{1}{1} - \frac{1}{2}$	5 - 7 1 3	33 — 23 7 13	36 38 30 22	$\frac{3}{1}$ $\frac{6}{2}$ $\frac{2}{2}$
Other Diseases of Respiratory Organs Diarrhœa and Enteritis Appendicitis and Typh-	1 4		=	1	=	_	1	_	1	=
litis Cirrhosis of Liver Alcoholism	1 2 —	- 11	-		=	_		1 1 —		=
Nephritis and Bright's Disease Puerperal Fever Other Accidents and Dis-	20	_	=	=	=	_	5	4	11 —	1
eases of Pregnancy and Parturition Congenital Debility and	2	-	-	-	-	-	2	-	-	-
Malformation (including Premature Birth) Violent Deaths (exclud-	23	23	-	-	-	-	-	-	-	-
ing Suicide) Suicide Other Defined Diseases . Diseases ill-defined or	17 10 184	$\frac{1}{4}$	$\frac{1}{3}$	3	<u>-</u>	$\frac{1}{3}$	2 3 13	3 7 32	7 122	$\frac{3}{22}$
unknown	8	1	-	-	1		-	3	3	
TOTALS	597	51	20	18	13	16	56	143	280	40

INFANTILE MORTALITY.

There were 51 deaths registered of infants under one year of age, as against 876 births; the proportion which the deaths under one year of age bear to 1,000 births, is therefore 58, as against 46 in the preceding year.

Year.	Rate of Infantile Mortality.	Rate for London generally.	Rate for England and Wales.
1918	87	107	97
1919	62	85	89
1920	80	75	80
1921	53	79	83
1922	67	74	77
1923	46	61	69
1924	58	69	75

A comparison of the causes of Infantile Mortality in 1924 with those of the preceding year shows a decrease during last year in the deaths from Premature Births; whereas there was an increase in the deaths from Pneumonia and Congenital Malformations.

The causes contributing to a high rate of mortality have been discussed in previous reports, and it will suffice to call attention to the fact that of 58 children who died under the age of one year, 24 deaths were ascribed to Prematurity, Wasting, and Congenital Defects, and 17 to Bronchitis and Pneumonia, a total of 41 deaths resulting from these two groups.

TABLE II.—INFANT MORTALITY.

NETT DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER ONE YEAR OF AGE, 1924.

		-			-		-		-	-
CAUSE OF DEATH.	Under 1 week.	1 to 2 weeks.	2 to 3 weeks.	3 to 4 weeks.	Total under 4 weeks.	4 weeks and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months	Total deaths under 1 year.
Influenza Cerebro-spinal Meningitis Chicken-pox Measles Scarlet Fever Whooping Cough Diphtheria and Croup Erysipelas Tuberculous Meningitis Other Tuberculous Diseases Meningitis (not Tuberculous) Convulsions Laryngitis Bronchitis Pneumonia (all forms) Diarrhœa Enteritis Syphilis Syphilis Rickets Suffocation, overlying Injury at Birth Atelectasis Congenital Malformation Premature Birth Atrophy, Debility and Marasmus Other Causes										- - - - - - - - - - - - - - - - - - -
Totals	13	6	4	1	24	8	8	4	7	51

It will be noted that during 1924 the deaths during the first month of life amounted to 47 per cent. of the total infant mortality during the first year of life, in Stoke Newington.

These excellent public health results have been obtained at a very low cost to the community; for, when the Government grant is credited against our local expenses, the net cost of the whole of the work to the ratepayers of Stoke Newington is less than the sum represented by a penny rate.

The maternal mortality rate for the country as a whole is equivalent to about four maternal deaths to every thousand births, and this figure has been fairly constant for more than twenty years, the slight reduction in deaths from Puerperal Fever having been rather more than compensated for by the many deaths from other causes in connection with childbirth. It must be borne in mind that these deaths indicate an immense burden of suffering and ill-health among women who survive, and they are necessarily associated with a large number of infant deaths before, during, or shortly after birth, a number of which could be prevented.

On the other hand, during the past 20 years the infant mortality rate has fallen some 50 per cent., but this fall has occurred almost entirely subsequent to the first few weeks of life, the still-birth rate and the death rate during the first month remaining much as they were 20 years ago.

The above two facts are, of course, intimately related from the standpoint of their causes and prevention; and it is the aim of those responsible for maternity and child welfare services to devise fuller measures for preventing this sacrifice of life and health. More ante-natal care and supervision, embracing the provision of more Maternity Hospitals and Homes, and special educational measures, can alone provide the remedy.

I should like to see some provision made in connection with our Maternity and Child Welfare Work, for securing some suitable dental treatment; for it is much needed. Sir George Newman, the Principal Medical Officer of the Ministry of Health, has recently made the following reference to the subject: "Dental decay is the cause of much ill-health, impairment and invalidity in childhood and in after life, and nearly all of it is preventable. School medical and dental inspection has revealed the fact that more than half the school children at eight years of age are suffering from caries, and many of them from oral sepsis. In adolescents and adults, this evil continues, producing many terminal conditions—gastro-intestinal trouble, toxæmia, joint affections, neurasthenia—which incapacitate workers to a serious degree."

At the higher ages it is noteworthy that the deaths of persons of over 65 years of age amounted to approximately 47% of the total deaths at all ages.

THE MORTUARY.

During the year, 44 bodies were deposited in the Public Mortuary. Post-mortem examinations were performed upon 27 of these.

INQUESTS.

44 Inquests were held upon Deaths of Parishioners during the year 1924.

PREVALENCE OF COMMUNICABLE DISEASES.

It will be seen from Table IV. that 298 Notification Certificates of Infectious Illness were received from medical practitioners. This represents an increase as compared with the preceding year, when the figure was 252.

The Infectious Sickness Rate of the Borough, excluding the notifications from Tuberculosis, Cerebro-Spinal Meningitis, Acute Polio-Myelitis, Encephalitis and Ophthalmia, so as to make the rate comparable with that of former years, was 4.0 to each 1,000 of the population, as against 3.1 for the preceding year.

Year.	Infectious Sickness Rate.
1918	3.8
1919	5.4
1920	8.0
1921	12 · 1
1922	5.1
1923	3.1
1924	4.0

TABLE III.

Annual Death Rates per 1,000 of Population from Infectious Diseases, 1924.

	Enteric	Small	Measles	Scarlet Fever	Whooping	Diphtheria	Influenza
Stoke Newington	0.00	0.00	0.08	0.02	0.06	0.09	0.28
London	0.01	0.00	0.29	0.03	0 · 11	0.12	0.36
England and Wales	0.01	0.00	0.12	0.02	0.10	0.06	0.49

TABLE IV.

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1924.

			Numb	er of C	ases No	tified.			Total Notified Locality	in each	Total Cases
NOTIFIABLE DISEASE,	At all	At Ages—Years.				Parish o	Parish or Ward) of the District.				
	Ages.	Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 and up- wards	1 North Division	South Division	Hospital.
mall Pox		=	=			-			_ _ _ 23	_ _ _ 78	_ _ _ 93
Diphtheria, including Membranous Croup Crysipelas Scarlet Fever	86	$\frac{3}{1}$	33 26	54 50	6 - 8	5 5 1	5 -		1 1 12 —	9 74	81 81
Relapsing Fever	1	=		=	=	$\frac{1}{-\frac{1}{1}}$	=	=	1 -	<u>-</u> - <u>1</u>	1 - -
ruerperal Fever	1 -	<u>-</u>			=		=	=	- 1	1 4	1 - 5
ulmonary Tuberculosis ther forms of Tuberculosis easles	59 12		- 3 -	3 3 —	21 5 —	23 1 —	9 -	3	14 1 —	45 11 —	9 -
nfluenza	12	1 -	5 -		1 -	=	4	1 -	1 -	11	3 -
Oysentery	10	10	68	113	5	37	20	4	54	10	8 222

BACTERIOLOGICAL DIAGNOSES.

The "diagnosis outfits" supplied by the Council to the medical practitioners in Stoke Newington are of great service.

The following is a statement of the applications received during 1924, together with the results of the examinations performed at the Lister Institute of Preventive Medicine, London.

	Rest	ilts.	
Disease.	Positive.	Negative.	Totai.
Phthisis	16	79	95
Diphtheria	37	178	215
Enteric		1	1
Total	53	258	311

Many applications have been made at the office for tubes of Diphtheria "antitoxin," which I store for the convenience of local practitioners.

A limited amount of "antitoxin" is supplied free of cost to those who are judged to be unable to pay for it. The expenditure on this account is limited to £10 per annum, except in years of epidemic prevalence of Diphtheria.

SCARLET FEVER.

This infectious disease was far less prevalent than in the preceding year, the cases notified furnishing a rate of 1.6 per 1,000 of the population, as against a rate of 2.16 for England and Wales generally. The cases were of a mild type, and no deaths resulted.

DIPHTHERIA.

The notified cases of Diphtheria during 1924, were exceptionally high, and were considerably higher than those of the preceding year. They furnished a case-rate of 1.9 per 1,000 of the population, as against a case-rate of 1.07 for England and Wales generally. The deaths from this disease numbered 5.

ENTERIC FEVER.

The prevalence of this disease is on the decline in England and Wales generally. The case-rate for Stoke Newington for 1924 was only 0.02 per 1,000 of the population, and that for England and Wales was 0.11.

PUERPERAL FEVER.

This disease furnished a very low case-rate for Stoke Newington for 1924, of 0.02 per 1,000, as compared with 0.06 for England and Wales. Each notified case was promptly and thoroughly investigated and all possible measures were taken (with satisfactory results) to prevent any extension of the disease. There was no death from the disease.

SMALL-POX.

The possibility of the introduction of this disease to Stoke Newington occasioned considerable anxiety throughout 1924, in view of the number of centres of infection which established themselves throughout England and Wales. Several false alarms had to be investigated and many contacts kept under observation. I personally undertook the re-vaccination of the Public Health Staff in 1923; and other arrangements were made to enable all necessary measures (including advice to the public with reference to vaccination and re-vaccination) to be promptly taken, whenever the disease made its appearance. Fortunately, no case occurred in Stoke Newington; whereas the case-rate for England and Wales was 0·10 per 1,000 of the population.

The following are the notification figures of this disease for England and Wales for the past 14 years:

Vann			Cases.	Year.			Cases.
Year. 1911			289	1918			63
1912	Digital States	Value	121	1919			311
1913			113	1920			280
1914			65	1921			336
1915			93	1922			973
1916			159	1923			2,504
1917		Hou	10 107	1924	913.	***	3,784
			847	Pinte Lin			8,251

The striking increase of prevalence since 1921 is shown in the table, as likewise the fact that in the second seven years the cases are nearly ten times as numerous as in the first.

In 1924 the disease prevailed chiefly in the Midlands and the North of England. Wales and the Southern Counties were practically free from it, although many possibly infected persons from infected areas or from shipboard had to be kept under close observation.

The type of Small-pox during the past few years has been mild as compared with earlier times, but this has not been invariably so. In London, in 1922, for example, 20 deaths occurred in an outbreak of 65 cases, and in the 10 cases at Willesden, in 1924, there were 3 deaths. What the future has in store it is quite impossible to prophesy. The old, more virulent form of Small-pox may return at any time, and the country must be prepared to meet a situation which it is not possible to estimate for.

DIARRHŒA AND ENTERITIS.

There were only 2 deaths from this disease among children under 2 years of age. The death-rate is best expressed as the proportion which the deaths under two years of age from these diseases form to a thousand births. The rate is only 2·3, which compares favourably with the rate for London generally (8·4).

INFLUENZA.

The deaths directly ascribed to this disease numbered 15. Nurse Ager paid visits to several cases reported to various officials of the Council.

MEASLES.

Measles and Whooping Cough were in evidence during the year, and Nurse Ager paid 134 visits to infected homes.

During the year there were no occasions on which there was delay in securing the removal to hospital of notified cases of Scarlet Fever and Diphtheria.

The arrangements made in 1919 for providing the services of a visiting nurse in connection with cases of Measles, Whooping Cough, Summer Diarrhœa and Ophthalmia, occurring amongst infants and young children, proved very useful during the year. It is, however, certain that during a severe epidemic of Measles or Whooping Cough the arrangement with a nurse who is already undertaking other nursing duties will not suffice, and the Ranyard Nurses Mission have undertaken on these occasions, if and when so ordered by the Borough Council, to provide temporarily an additional nurse at the low cost of two guineas per week.

THE SHELTER.

The Shelter is a provision which enables those who are in occupation of one or two rooms only to obtain temporary accommodation while those rooms are being disinfected after the occurrence of infectious disease in one or more members of the family; it also serves for the temporary isolation of an occasional individual who has come in contact with dangerous infectious disease and who is very likely to spread infection if he develops the disease.

The Shelter provision in Stoke Newington had been for many years of a very unsatisfactory nature, and, having regard to the grave risks from Small-pox during 1923 the Council recognised that better arrangements had become urgently necessary. Accordingly two small shelter flats were provided in a sufficiently isolated position, and these now constitute quite a model provision of its kind for a small population.

It is regrettable that there is a very general public prejudice against entering such shelters, except in the circumstance of a grave epidemic. There are many cases each year in which it would be our duty to advise action to compel the use of the Shelter if we possessed the necessary legal powers.

THE DISINFECTING AND CLEANSING STATION.

During the year ending December 31, 1924, the following disinfecting and cleansing work was performed at the station:—

Total number of textile articles disinfected ... 14,307

Total number of books from Public Library disinfected 59

Total number of verminous persons cleansed ... 938

All the verminous persons cleansed were children of school age.

In addition to the disinfection of rooms on account of the notified infectious diseases, 75 were fumigated on account of vermin, 31 on account of Consumption, 20 on account of Cancer, and a few on account of Measles and Whooping Cough, etc.

During the year the Borough Council continued its agreement with the Education Department of the London County Council to bathe and cleanse verminous school children, and 938 of such children were cleansed.

PHTHISIS (CONSUMPTION) AND OTHER FORMS OF TUBERCULOSIS.

The death-rate from Consumption (Pulmonary Tuberculosis) in the Borough for 1924 was 0.64 per 1,000, as against 0.88 for London generally.

Fifty-nine cases of Phthisis were notified under the Public Health (Tuberculosis) Regulations, 1912.

Forty-six of the notified cases were insured under the Insurance Act.

Nurse A. Ager, who is appointed to give part-time services in connection with the Tuberculosis work within the Borough, has, acting under the instruction of the Medical Officer of the Tuberculosis Dispensary and myself, dealt with 58 fresh cases during the year, and has made in all 916 visits. Nurse Ager has also attended 18 meetings of the After-Care Committee.

The Tuberculosis After-Care Committee appointed by the Borough Councils of Hackney and Stoke Newington rendered valuable services during the year. The address of the Secretary is 26, Pembury Road, Clapton, E.5.

Medical practitioners in Stoke Newington may be said to be notifying the disease better than in many districts-for whereas the number of notifications of Tuberculosis often does not much exceed that of the deaths registered from the disease, in Stoke Newington they are generally about double. It is, however, probable that the actual number of sufferers in any year approximates to three times the number of deaths.

The principal reasons for delayed notification and for non-notification of Pulmonary Tuberculosis are probably the failure on the part of patients to consult a doctor until late in the disease and the doubt and difficulty which often surrounds the diagnosis. The fear of the consequences of notification, embracing the setting in motion of the machinery of official visitation and the possible publicity, with consequent dislocation of business and domestic life, are considerations which deter from notification, and members of the medical profession, sympathising with the sufferers, sometimes postpone the notification when appealed to.

The object of all anti-Tuberculosis measures must be to increase the resistance of mankind to infection and to reduce the amount and frequency of infection to which mankind is exposed. The amount and frequency of infection are greatest in consumptive families with whom, owing to poverty and its associated circumstances, the resistance to infection is often at its lowest.

The supreme importance of protecting young children against infection is generally recognised, and of the circumstances responsible for reducing resistance under-nourishment is the chief.

As Professor Leon Bernard has recently said, the home infection of this disease is specially dangerous, as it is often long-standing and continuous and abundant; and he strongly advocates better measures for early detection of Tuberculosis and prompt removal from the source of infection. I have long felt that this is an urgent need, and that our Tuberculosis schemes are very imperfect without it. There is only one alternative measure to the removal of young children who are at risk in their home, and that is a preventive vaccination, but we are by no means certain yet as to whether we have a useful and safe means of applying this means of protection.

NOTIFICATIONS AND DEATHS FROM TUBERCULOSIS IN 1924.

				New C	ases.†	Ser Vi		Deaths.				
Age-Periods.		Pulmonary.		No Pulmo	on- onary.				lon- lonary.			
			М.	F.	M.	F.	M.	F.	M.	F.		
0				LOU			Mark I					
1			Meder	Q 445E	Sizoloti	2	VIII	11 20	3	3		
5			-	No.	TO THE REAL PROPERTY.	1	and the last	1	-	2		
10			-	3	2	-	1	1	-	-		
15			5	3	1	1	1	2	111-10	111111		
20			4	7	1	1	1	3	-	-		
25	***		4	5		_	1	4	-	-		
35			6	9	1	0 40	6	1	10-70	1		
15			-	3	-	Latte 6	4	4	1			
55			3	-	_	-	2	1	1	-		
65 and upwards		ds	4 - 1	3	1012-19	nia_sin	1	1		118_		
Т	otals		22	33	5	5	17	17	5	6		

THE WORK OF THE TUBERCULOSIS DISPENSARY IN 1924 IN REFERENCE TO STOKE NEWINGTON.

The following facts show the work done in connection with the Dispensary, so far as Stoke Newington is concerned, during the year 1924.

The number of attendances of Stoke Newington patients were 1,430 during 1924, as compared with 1,407 during 1923. The total number of Stoke Newington contact cases examined at the Dispensary was 77, as against 100 during 1923.

Dr. L. U. YOUNG (the Tuberculosis Medical Officer) reports:

On January 1st a circular formulating a new procedure for the Tuberculosis Scheme in London was issued by the London County Council.

Section 1 of the Memorandum deals with procedure at the Tuberculosis Dispensary, and mainly relates to the keeping of records and data for periodic reports; classification of home conditions; procedure with regard to school children, and examination of persons after discharge from a residential institution.

A most important change in procedure is contained in Item 10, Section 1, viz.: "All communications from the Council respecting the Tuberculosis Dispensary will be addressed to the Borough Medical officer, except (i) as provided in Section 26 of the 'Scheme for the Treatment of Tuberculosis in London (Revised 1922),' and (ii) on matters of urgency."

This practically ensures still closer co-ordination between the Public Health Departments of the Boroughs and the Tuberculosis Dispensary.

"Memo. 286, National Health Insurance, Tuberculosis," by which additional responsibilities and clerical duties are placed on the Tuberculosis Officer, was also brought into force at the same time.

The Borough Health Visitors have attended the Dispensary regularly throughout the year, and much detailed work has been accomplished at the interviews.

A limited number of patients have been supplied through the Borough Councils with extra diet, in the form of milk and eggs and have derived benefit accordingly.

During the year the Tuberculosis Officer paid 189 home Visits and investigated the home conditions, many of which were found to be most unsatisfactory.

There has been no apparent improvement in the housing conditions in the Dispensary area, and this lack of proper accommodation forms a great stumbling-block to the working of the Tuberculosis Scheme.

It is pleasing to note that the number of new cases sent by general practitioners has increased. There has been a tendency on the part of many local practitioners to interest themselves more in the Dispensary service.

The Sessions for School Children have now been in existence, for two years, and the attendances have been well maintained.

The average attendances per Session of new cases was 2.8, and of old cases 10.7.

The children attending Stormont House School have responded well to the Open-Air Treatment. Six children attending from this Dispensary left during the year, and are all in situations and doing well.

The services of the Invalid Children's Aid Association have been frequently obtained to get delicate children, and also those definitely tuberculous, sent to Convalescent Homes, and marked improvement in their condition has always been observed on their discharge.

In previous reports the plea for a local Home for advanced and urgent cases has been brought forward, and the necessity for such an institution still exists.

Several cases were referred to the various departments of the Hospital for treatment and diagnosis, and I beg to express my thanks to the members of the Medical and Surgical Staff for their kind assistance.

I have also to thank the Medical Officers of Health, Doctors Kenwood and Dart, for much valuable aid in administrative matters.

Matron and the Secretary, Mr. Rutherford, have both contributed to the smooth working of the Dispensary, and Miss Fellowes, Secretary-Dispenser, has carried out her work conscientiously and well; while the Nurses have also performed their duties in a satisfactory manner.

I am, Ladies and Gentlemen,
Your obedient Servant,
L. UNWIN YOUNG,
Medical Tuberculosis Officer.

BOROUGH OF STOKE NEWINGTON TUBERCULOSIS DISPENSARY. YEAR 1924.

	b.d.	ed ns. le.	red 18.	red ns.		Cont	tacts.	ast	
	Insured Persons. Male.	Insured Persons. Female.	Uninsured Persons. Male.	Uninsured Persons. Male. Uninsured Persons.	Male.		Female.		TOTAL.
H _P	Pe	THE	Ur	Un Pe	I.	U.	I.	U.	
T			150000	A SECTION ASSESSMENT	1000		1374		70. 70.11
New Patients At- tending	23	21	30	20	3	17	13	44	171
Attendances of Old Patients	377	251	199	313	10	28	17	64	1,259 (new) (old)
Home Visits and Consultations	26	13	9	16		1	2	1	5 + 63 = 68
Sputa Examined	87	41	27	40	2	1	1	8	207
Original ,, Contact ,, Original ,, Contact ,, Original ,,	" Do	oubtfu		y Tube	er cur			AL	7 0 - 7 5 2 - 7
Contact "	,,			HOYG	KIA!	TYG BIA		7	- 115
			T		new	cas	es		176
	Sourc	ES OF	New (CASES	IN 1	924.			
				KNEY.	N	ST		ON.	Totals
Contacts				01	•••		77		278
M.O.H				60			29		89

	HACKNEY. NEWINGTON.					
War Pensions Committee		2		4		6
Metropolitan Hospital		10		2		12
Other Hospitals		11		2		13
General Practitioners		93		56		149
London County Council		2		2		4
Other Sources		5		2		7

VENEREAL DISEASES.

Conditions with regard to Venereal diseases in this country continue to show a steady improvement.

The total number of new cases in England and Wales presenting themselves for treatment at the Treatment Centres provided amounted in 1920 to 105,185, while by 1923 they had fallen to 73,613.

The only unsatisfactory factor in the situation is the grave discrepancy between the number of women and of men coming up for medical treatment, more particularly for Gonorrhæa. This circumstance indicates a considerable amount of untreated disease among women; for in those countries where a comprehensive "follow-up" system is in operation there is not nearly so wide a discrepancy between the numbers of men and women under treatment. It is probable that many women suffering from Gonorrhæa are unaware of their condition, and are not receiving treatment on that account.

MATERNITY AND CHILD-WELFARE WORK.

Dr. Jackson Smith makes the following observations:

"The babies have made good progress, and the interest shown by the mothers is extremely satisfactory.

"The voluntary services of so many progressive and intelligent ladies are invaluable, and praise is due to them for the regularity of their attendance. Indefatigable zeal and enthusiasm are shown by the Superintendent and other Health Visitors.

"Emphasis must be laid on the fact that the primary object of an Infant Welfare Centre is prevention rather than cure. Many

mothers do not realise this, and only consult the doctor when artificial foods and various drugs have already been tried upon an ailing baby. The digestive disturbance resulting from this amateur experimentation may take weeks or months to cure. Under no circumstances should a young baby be weaned or given medicine without a doctor's advice.

"Systematic Talks on Mothercraft are urgently needed. I have only been able to give occasional addresses, owing to the large number of babies not previously seen by the Doctor. An infant 'new' to the Doctor takes about four times as long to see as one previously thoroughly examined. I propose to increase the number of these collective talks as opportunity occurs.

"Very few babies have been seen suffering from malnutrition, but a large number suffer from over-feeding and too frequent feeding. Education in food values is needed. Some mothers say they cannot afford porridge. In reality they cannot afford to omit such a nourishing, cheap food as oatmeal. Others have not the haziest idea how to scramble an egg or make a junket (curds and whey.) Both of these are excellent digestible foods for young children. Insufficient hard food for the teeth is given, and too much 'sop.'

"If all older girls were taught in a practical manner the importance of thorough cleanliness, digestible cookery, diet from the economic standpoint, and sensible clothing, many ailments would be avoided and lives saved.

"Very few infants suffer from their parents' inability to provide suitable clothing. Hundreds suffer from the faulty distribution of the clothing provided. Many young children are exposed to the risk of Bronchitis and Pneumonia (two of the principal causes of infantile mortality), Diarrhæa, Rheumatism, and Heart Disease, for life because their parents follow foolish and dangerous fashions (e.g., bare thighs and openwork socks in winter).

"Among 'toddlers' many cases of insufficient gain in weight are due to too little sleep. The same cause is responsible for some mothers' inability to feed their babies."

Miss Reeves, the Superintendent Health Visitor, reports as follows:

"With a reduced birth-rate, I have to report considerable increase in the work as a whole.

"The number of primary visits paid were 138 greater than in 1923, while the secondary visits show an increase of 448.

"These home visits are of the greatest importance, are greatly valued, and result in many children being brought up on proper lines from an early age.

"In most cases the primary visit takes place on the eleventh day after the birth; in others it is deferred until the infant is about two weeks old.

"The two Child Welfare Centres show a small increase in the number of attendances of infants and children; and this with a reduced number on the Registers, which is probably accounted for by the smaller number of births.

"Considering the bad weather experienced, the attendances have been very satisfactory—it being remembered that mothers are advised not to take delicate infants out when winds are keen. On such days it is found that many mothers come, without their infants, to report progress and to receive advice, etc. These attendances are registered among the attendances of mothers, and represent a good deal of work of a fruitful nature.

"During the spring the Centres suffered a severe loss by the death of Dr. J. Sherwood New, their Medical Officer. During something like eleven years Dr. New gave the mothers the benefit of his advice for their children, and much of the success of the work was due to his enthusiasm and interest.

"Milton Road Centre is very much in need of increased space, and, when crowded, suffers much from the heat from the Washhouses beneath. It is greatly hoped that the Council will enlarge the Weighing Room and provide a Stockroom before very long.

"The Milk Order has been of great benefit to our poorer infants and children, and is a boon especially during the present time of

much unemployment. The number of applications made was 66, of which 58 were granted by the Milk Order Sub-Committee. The amount spent was £76.

"Dispensary Letters to the number of 277 were given to necessitous mothers for themselves or their young children. Treatment is thus provided for those who cannot afford doctors' fees. Many attend at the Dispensary as out-patients; but cases of illness are visited in their homes by the Medical Officer, Dr. Adderley. This is a most valuable part of the Maternity and Child Welfare work.

"Of the 51 infant deaths, 12 only had attended the Centres. Of these three had made one attendance only, when advice was given to the effect that constant medical attention was needed, with the result that two were put under their private doctors, and the third attended first the Dispensary and later a hospital.

"Of the remaining nine, two suffered from Congenital defect or disease, three died of Broncho-Pneumonia, one of Pertussis, one of Gastro-Enteritis, and one was a premature infant, who would probably have died earlier but for help and advice rendered."

The following Table indicates the scope of the Maternity and Child Welfare work performed during the year:

	1920	1921	1922	1923	1924
Infants born	1,223	1,073	937	960	
Home Visits paid Primary	1,156	1,143	1,073	1,088	1,126
Secondary	1,932	2,424	3,042	3,558	4,006
No. Children on Register of Welfares	853	1,059	1,032	990	955
Attendances of Children at Con- sultations	6,727	9,198	7,640	8,833	8,911
Attendances of Mothers for Advice, etc	5,176	6,344	6,429	7,008	6,338

ANTE-NATAL WORK.

Dr. Muncey reports:

"The work of the Ante-Natal Clinic has increased during the past year.

Number	of	new cases	 T	0000	84
Number	of	attendances	 		242

"Seventy-one cases have been removed from current list:

Nine cases were not pregnant;

Four cases miscarried;

One moved from Borough;

"Of the remaining 57, 56 mothers had living babies and one mother a stillbirth.

- "Confinements were normal, except in four cases, where difficulty was anticipated and arrangements made accordingly in three. The fourth case attended once only, and had the stillborn baby.
 - "No case of Sepsis or Ophthalmia Neonatorum occurred.
- "One woman referred to hospital for treatment had a living baby after three stillbirths; and another woman, pregnant for the fifth time, at last gave birth to a living baby.
- "A number of expectant mothers are suffering from serious dental defects, which cannot be dealt with conveniently. Also, a number of mothers wish there were facilities for post-natal care for themselves."

SANITARY ADMINISTRATION.

It is noteworthy, as indicating the increase in the Office work, that during 1924 personal interviews numbered approximately 2,800, and telephone calls exceeded 1,000.

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; 2,310 premises were inspected for conditions injurious or dangerous to health, and insanitary conditions varying in their nature from slight to grave were discovered to the number of 1,486; 635 Intimation Notices, followed in 65 cases by Statutory Notices, were complied with. 3,200 re-inspections were made, making a total for the year of 5,510 inspections.

The difficulties in securing a reasonably prompt abatement of the nuisances intimated to the owners or occupiers of houses, even when these have been followed by Final Notices, have led to great delays, for which we receive many complaints.

FOOD INSPECTION.

The slaughter-houses (3), bake-houses (27), and dairies (68), situated in the Borough, were all inspected during the year.

During the year many systematic efforts were made to detect the sale of diseased meat within the Borough, and I am glad to say that, with few exceptions, our inspections have not called for any seizures. Two tons and twelve hundredweight of unsound food was voluntarily surrendered during the year. Premises where food is prepared and stored have been kept under supervision.

The Dairies have been systematically inspected during the year.

The milk supply of Stoke Newington is good on the whole and is improving year by year. Some of it is excellent; and residents can obtain from local dairymen special "Graded" milk, such as "Certified Milk" and "Pasteurised Milk," in bottles.

No cows are now kept in the Borough.

During the year the Public Health Meat Regulations, 1924, were issued. These are designed to secure more adequate inspection of animals slaughtered in this country and improvements in the handling, transport and distribution of meat. The more noteworthy provisions of the Regulations are the requirement of Notices of Slaughtering and of evidence of disease to be given to the appropriate officer of the Local Authority. When an animal is slaughtered for sale for human consumption notice must be given to the Local Authority and the carcase must be retained for a few hours to give the Inspector an opportunity of inspecting it. This is a very important provision for preventing traffic in diseased meat, inasmuch as inspection can only be satisfactorily carried out at the time of slaughter, when all the organs are available for examination. The Minister of Health is empowered to authorise the Local Authority to adopt a distinctive mark for placing on sound carcases which

have been duly inspected. This marking of carcases would have the effect of removing the onus of responsibility for disease from the butcher to the Inspector; the butcher's responsibility will apparently be limited to maintaining the carcase in a condition fit for human consumption.

The Regulations also contain provisions for the protection of meat against contamination by dirt, either in the handling, storing, transport, or sale of the meat. The exposure or offering of meat for sale from any stall is only permitted on conditions that the stall is suitably covered over and screened at the sides and back, that everything reasonable is done to guard against the contamination by flies, that no meat may be placed within 18 inches of the ground, that cleanliness is maintained with reference to counters, slabs, knives, trimmings, and refuse material. Even more stringent conditions are imposed with reference to the exposure for sale or the preparation for sale of meat in shops and rooms in occupation.

To admit of the necessary arrangements being made by Local Authorities and the trade, it is provided that the Regulations shall not come into operation until April 1st, 1925.

Doubtless, the proper enforcement of these Regulations will go a long way towards securing a much overdue improvement in the general conditions under which meat is dealt with before it reaches the public; and there is ample scope for similar Regulations dealing with the sale of other articles of food.

KITCHENS OF RESTAURANTS, KITCHENS AND EATING HOUSES.

There are 15 of these premises in the Borough. The results of the inspections, both of the food and the kitchens, have been satisfactory.

HOUSING.

No material industrial development of Stoke Newington is likely, and the demand for houses will continue to come from those who are industrially employed elsewhere. But there is an urgent need of more dwellings in Stoke Newington in order to reduce the excessive occupation of many existing ones.

During the year 1924 most of the least satisfactory dwellings within the Borough were inspected. These with other dwellings, gave a total of 1559 dwellings inspected.

STATEMENT ON HOUSING CONDITIONS.

STATISTICS.

Year ended 31st December, 1924.

Number of new working-class houses erected under Municipal Housing Scheme 0 2.—UNFIT DWELLING-HOUSES. I .-- INSPECTION. (1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ... (2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910 ... 0 (3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit 6 for human habitation (4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation ... DEFECTS WITHOUT SERVICE OF FORMAL II.—REMEDY OF

NOTICES.

763

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local

Authority or their officers

	III.—ACTION UNDER STATUTORY POWERS.
0	A.—Proceedings under section 28 of the Housing, Town Planning, etc., Act, 1919
	B.—Proceedings under Public Health Acts.
615	(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied
	(2) Number of dwelling-houses in which defects were remedied:—
615	(a) by owners
0	(b) by Local Authority in default of owners
0	(3) Number of Dwelling houses closed
0	C.—Proceedings under sections 17 and 18 of the Housing, Town Planning, etc., Act, 1909
	3.—UNHEALTHY AREAS.
0	Areas represented to the Local Authority, with a view to Improvement Schemes under (a), Part I., or (b), Part II., of the Act of 1890
0	1.—Number of houses not complying with the building bye-laws erected with consent of Local Authority under section 25 of the Housing, Town Planning, etc., Act, 1919
	2.—Staff engaged on housing work!— Two Sanitary Inspectors, One Clerk and part-time Sanitary Inspector.

INCREASE OF RENT AND MORTGAGE INTEREST (RESTRICTIONS) ACT, 1920 & 1923. SECTION 2 (2).

This sub-section provides that "at any time or times not being less than three months after the date of any increased rent permitted by the Act, the tenant is entitled to apply to the County Court for an order suspending the increases if he considers that the premises are not in all respects reasonably fit for human habitation, or otherwise not in a reasonable state of repair. He will be required

to satisfy the County Court by a report of the Sanitary Authority, of otherwise that his application is well founded, and for this purpose is entitled to apply to the Sanitary Authority for a certificate."

Thirty-six applications were made to your Authority during the year, and in every instance a certificate was granted.

SCAVENGING.

The streets and yards are well scavenged.

While the regular removal of household refuse is performed in a satisfactory manner, the same cannot be said with regard to the mode of conveyance of the refuse through the streets. I am informed that all the carts are provided with tarpaulins and that the men are frequently cautioned against any failure to keep the refuse covered as much as possible during the filling of the cart, and completely so after the cart is filled and is on its way to the destructor or rail; yet as one moves about the Borough it is the exception rather than the rule to see a dust-cart reasonably well covered during the operation of filling it, and very often it is not covered at all when full.

Our old overfilled and uncovered dust-carts of Stoke Newington are a nuisance and a bad object-lesson.

RATS AND MICE (DESTRUCTION), ACT, 1919.

In April, 1920, at the request of the Board of Agriculture and Fisheries your two Sanitary Inspectors, Mr. D. W. Matthews and Mr. A. P. Piggott, were appointed Officers under the above Act. During 1924, 54 premises were freed from rats.

FACTORIES, WORKSHOPS, AND WORK-PLACES.

The usual inspections of these premises were made during the year, and they are maintained in a fairly satisfactory condition.

There are at present 69 out-workers who work for places of business situated within the Borough, and 442 out-workers dwelling in Stoke Newington working for businesses outside of the Borough.

FOOD AND DRUGS TABLE V.

ANALYSES PERFORMED UNDER THE SALE OF FOOD AND DRUGS ACTS DURING THE YEAR 1924.

Article submitted for Analysis. (176)	No. of Genuine Samples	No. of Adul- terated Samples	Remarks as to Adulteration.
Baking Powder Beef Sausage Beef Sausage Meat Bitter Beer Butter Capers Castor Oil	4 4 1 2 19 1 2		TALLES AND
Cocoa Coffee Cream (Preserved) Fish Paste Flour Ginger Wine Goiden Syrup	7 2 2 9 3	1 {	Contained 36½% of chicory. Subsequently ascertained that it was sold in a tin labelled "Chicory & Coffee."
Lard Liquorice Powder Margarine Milk	1 2 15 69	_ _ 4	 (1) Contained 33% less than the legal limit for fat in milk. Defendant fined £3. (2) Slight deficiency in non-fatty solids. Vendor cautioned. (3) Slight deficiency in non-fatty solids. Vendor cautioned.
Milk (Pasteurised) Olive Oil Pepper Pineapple (Tinned) Pork Sausage Pork Sausage Meat	1 2 1 - 3 1		(4) Slight deficiency in non-fatty solids. Vendor cautioned. Tin present 2½ grs. per pound.
Medical Prescription Salmon and Shrimp Paste Scotch Whisky	3 5		 (1) 41% underproof. Declaration of dilution. (2) Contained 3.8% of added water. Summons dismissed upon pay-
Sponge Cake Sweets Sweet Spirit of Nitre Vinegar (Malt)	2 1 1 2		ment of £5 5s. costs by vendor.

Only seven of the samples purchased in the Borough in 1924 were adulterated; and, therefore, the percentage of non-genuine samples amounted to 4 per cent., which is slightly above the figure for the preceding year.

5.7 per cent. of the 70 Milk samples were unsatisfactory in quality or sold contrary to the law, as against 6.6 per cent. during the preceding year.

In London as a whole, the percentage of Milk samples reported against was above that in Stoke Newington.

It should be added that many of the other samples purchased were below the average quality of Milk although they were a trifle above the low legal limits which have been fixed.

All the samples of Milk, Butter and Margarine were tested for antiseptics, with the result that no sample of Milk, 15 of Butter, and 15 of the samples of Margarine were found to contain boric acid. In no case was the amount sufficient to warrant a prosecution; but in one instance the vendor was cautioned. Antiseptics were also found in 3 samples of ginger wine, 7 of sausage meat, 4 of fish paste, and 1 of tinned pineapple.

Two informal samples were taken during the year.

THE PUBLIC HEALTH (MILK AND CREAM) REGULATIONS.

During the year 1924 two samples of Preserved Cream were taken under these Regulations. The samples were sold strictly under the conditions of the Regulations, and on analysis it was found that Boric Acid was present in both cases, but not in excess of the amount permissible.

The 70 samples of Milk taken during 1924 were all tested for chemical preservatives, and the result was negative in every case.

REPORT OF CHIEF SANITARY INSPECTOR FOR THE YEAR 1924.

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

LADIES AND GENTLEMEN,-

I beg to present my Annual Report for the year ending 31st December, 1924 :—

HOUSES AND PREMISES INSPECTED.

After Notification of Infectious Diseases	. 298
By house-to-house inspection	222
Upon complaint, under Sec. 107 (3), Public Health (London	
Act, 1891	609
After Notices from Builders, under Bye-law 14 (London	are note
County Council)	195
Stables and mews	100
Slaughter houses	55
Milkshops, dairies and cowsheds	55
Bakehouses	17
Factories and workshops	133
Other premises inspected	626
Re-inspections made to examine and test work, etc	3,200
the about the name of the same	
Total Inspections	5,510
offer materice the vendor was considered the parties with	
took them suggested to A tonic teams to establish to it into	TO.
NUISANCES ABATED AND SANITARY DEFEC	15
REMEDIED.	
Dirty premises, cleansed and whitewashed	238
Dampness in dwellings remedied	135
Dilanidated coilings stoirs at remained	906
D.C. C. L. C.L.	1
F-14	9
	1
Public-house urinals cleansed (after intimation)	
Flushing cisterns to w.c.'s provided or repaired, and w.c.'s	27
with insufficient water supply made satisfactory	
Defective w.c. basins and traps removed and replaced by	65
approved patterns	
Stopped or choked w.c. traps cleared	10
External ventilation to w.c.'s improved	4
W.C.'s removed to more sanitary positions	3
Separate flushing cisterns fixed to w.c.'s which were pre-	
viously flushed directly from dietary cisterns	
	1
	694

Brought forward	694
Additional w.c.'s provided in case of insufficient w.c. accom-	13/36
modation	18
Defective soil-pipes reconstructed	33
Unventilated soil-pipes ventilated and	28
Soil-pipes improperly ventilated, improved	
Dirty yards cleansed	2
Yards paved or re-paved with impervious material	20
Yards drained	100
Gully and other traps inside houses removed	-
Sink waste-pipes directly connected to drain, made to dis-	
charge in open-air over proper syphon gullies	1
Long lengths of sink, bath, and lavatory waste-pipes trapped,	
and made to discharge in open-air over gullies	76
Defective waste-pipes repaired	THE PARTY
Foul water-cisterns cleansed	3
Water-cisterns without close-fitting covers provided with	
proper coverings	1
Defects in water-cisterns remedied	3
Cisterns removed to more sanitary position	1
New portable dust-bins provided	121
Defective drainage reconstructed in accordance with bye-laws	
of County Council	172
Choked or stopped drains cleared and repaired	134
Drains ventilated or defective ventilating pipes renewed	1
Rain water pipes disconnected from drains or soil-pipes and	
made to discharge over gully-traps	1
Proper water-supply provided to houses or tenements	5
	165
Defective roofs repaired Defective guttering and rain water pipes repaired or renewed	113
Defective paving to floors of wash-houses repaired or renewed	5
Defective paving to noors of wash-houses repaired of renewed	7
Dirty walls of work-rooms cleansed	2
Ventilation under floors improved	
Proper manure receptacles provided (London County Council	3
bye-laws)	4
Cases of over-crowding abated	-
Carried forward	1,613

Brought	forwa	rd		 1,613
Accumulation of refuse, etc., removed				 19
Areas re-paved and drained				 -
Underground dwellings improved				 -
Nuisances from animals abated		W. NEW		 3
Smoke nuisance abated			***	 2
Miscellaneous nuisances abated				 1
The state of the s	otal	ii aqati teedb	witte engage	 1,638

The above list refers only to work carried out on Intimation and Statutory Notices. In addition, a large number of improvements have been made on advice to owners and occupiers.

INTIMATION NOTICES SERVED.

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

House to	house i	nspection		Division .	entire - ve	 	159
After ins	pection	on account o	f comp	laint		 	356
After inf	ectious i	llness		***		 	37
With ref	erence t	o stables and	mews	Suidos	1	 	2
,,	,,	milkshops,	dairies	and cov	wsheds		11 11
,,	,,	bakehouses				 	-
,,	"	factories ar	nd work	kshops		 	18
,,	,,	slaughter h	ouses			 	111
After su	ndry oth	ner inspection	ns	ew.lp.er	oull, or	 7.10	63
							635

STATUTORY NOTICES.

Sixty-five statutory notices were served by direction of your Committee under Sec. 4, Public Health (London) Act, 1891.

DRAINAGE PLANS AND APPLICATIONS.

Twenty-three plans and applications were considered and approved by your Committee for alterations to and reconstruction of drains.

I am, Ladies and Gentlemen,

Your obedient Servant,

D. W. MATTHEWS,

Chief Sanitary Inspector.

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

(For the Guidance of Medical Practitioners, Midwives, Etc.)

A DEN Grove
Aden Terrace
Adolphus Road
Albion Grove
,, Road
Aldham Place

Allen Road
Allerton Road
Alexandra Road
Alexandra Villas

Amhurst Park (90-100 even Nos. and 93)

Arthur Road Ayrsome Road

BARN Street Barrett's Grove

Beaulieu Villas Belgrade Road

Bethune Road (1 to 145)

Blackstock Road (5 to 175) Boleyn Road (94 to 192) Bouverie Road

Brighton Road Brodia Road Broughton Road Brownswood Road Burma Road

CARYSFORT Road Chalmers Terrace

Chapel Place Chesholm Road Church Street

Clissold Road
Clonbrock Road
Coronation Avenue
Cowper Road
Cressington Road

Crossway (late Castle St.) (2 to 50) N. Side Cumberland Terrace

DEFOE Road
Digby Road
Dumont Road
Dynevor Road

EADE Road (2 to 66) and 1 to 27 odd Nos. Edward's Lane

FAIRHOLT Road Finsbury Park Road

Fleetwood Street

GAINSBORO Road Glebe Place Gloucester Road Goldsmith Square Gordon Road Grange Court Road Grayling Road Grazebrook Road

Green Lanes

,, ,, (from 2 to 388) ,, ,, (,, 81 ,, 147) ,, ,, (,, 205 ,, 327)

HAMILTON Place Harcombe Road

Hawksley Road
Hayling Road
Heathland Road
Henry Road
Hermitage Road, 1 to 25a, 2 to 14
Hewling Street
High Street (17 to 217)
Hornsey Place
Howard Road

IMPERIAL Avenue

KERSLEY Road King's Road Knebworth Road Kynaston Avenue " Road ANCELL Street Lavell Street Laver's Road Leconfield Road (1-23a) Leonard Place Lidfield Road Lilian Street Listria Park Londesborough Road Lordship Grove Park Road Terrace Lordship Park Mews 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 (33-42) Newington Hall Villas Newton Villas OLDFIELD Road Osterley Road PAGET Road Painsthorpe Road Palatine Road Paradise Row Park Crescent ,, Lane ,, Terrace Street Pellerin Road Petherton Road (106 to 138)

Portland Road

Prince George Road Princess Road " May Road OUEEN Elizabeth's Walk Queen's Road REEDHOLM Villas Reservoir Cottages Riversdale Road (92-104) Rochester Place ST. ANDREW'S Road Mews ,, Pavement, S. Side (11 to 20) St. Kilda's Road Sandbrock Road Salcombe Road Seven Sisters Road: (273-333, 286-296, 430-486) Shakespeare Road Shelgrove Road Shipway Terrace Somerfield Road Spenser Road Springdale Road Selsea Place Stamford Hill (1-39) Statham Grove Stoke Newington Road (1-155) Summerhouse Road TOWN HALL Approach Truman's Road VICTORIA Grove Victoria Grove West Victoria Road WALFORD Road Warwickshire Road Watson Street White Hart Court Wilberforce Road Winston Road Woodberry Down Grove Woodland Road Woodlea Road Wordsworth Road

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