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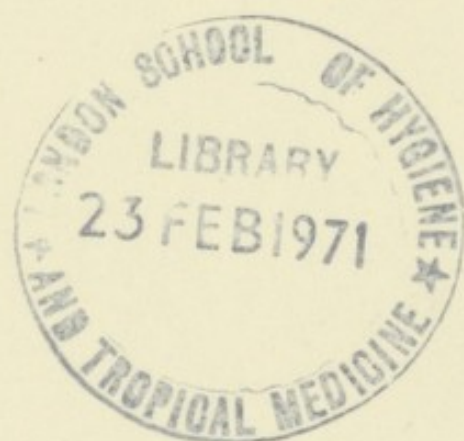
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The Metropolitan Borough of Stoke Newington.

REPORT

ON THE

PUBLIC
HEALTH

OF THE

METROPOLITAN BOROUGH
OF STOKE NEWINGTON

FOR THE

YEAR 1936

BY

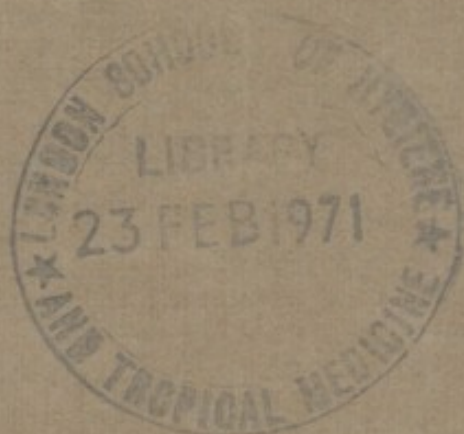
F. D. ROSS-KEYT, M.B., Ch.B., D.P.H.

Medical Officer of Health.

LONDON

WILKINSON BROS., LTD., 37-43, GREEN LANES, N.16.

74057



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Medical Officer of Health.

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REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1936.

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

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit the Annual Report for the year 1936 on the state of the public health of the Borough of Stoke Newington.

The report is arranged in accordance with the requirements of the Ministry of Health, and the subjects dealt with concern the vital statistics, housing and sanitary conditions of the borough; inspection and supervision of food; maternity and child welfare; the Tuberculosis Dispensary; and the general work carried out by the Staff of the Public Health Department.

The estimate of population for 1936 was 50,350, as compared with the Registrar-General's mid-year 1935 estimate (50,210).

The chief statistics relating to the year under review are as follows:—

The birth rate (13·8) was slightly lower than that for 1935 (13·9).

The adjusted death rate was 10·9 as compared with 12·5 for London generally, and 10·6 for the year 1935.

The infantile mortality rate was 45 as compared with 51 in 1935, and is the lowest infantile mortality rate that has yet been recorded in the borough.

The total number of notifiable diseases attributed to the Borough was 284 as compared with 228 for the year 1935. There was an increase in the number of cases of scarlet fever, a decrease in the number of cases of pneumonia, while the number of cases of tuberculosis and diphtheria remained much the same as in the previous year.

These figures indicate generally that the standard of health of the borough has continued to be satisfactory during the year.

The survey of overcrowding was completed in January, 1936, and revealed that 462 families (3·8 per cent.) were living in overcrowded conditions. By the end of the year this figure was reduced to 356 by reason of families moving from the district or securing more adequate accommodation in the borough.

In connection with the problem of overcrowding, construction of the new Council Flats on the Lordship Terrace Site for the purpose of rehousing 96 overcrowded families was commenced in February and will be completed in April, 1937.

During the year the Housing Committee had under consideration various schemes for the further relief of overcrowding. The most important proposal adopted was the scheme for the redevelopment of the Hewling Street area with a view to the erection of 100 flats for rehousing overcrowded families.

The work at the Maternity and Child Welfare Centres has again shown an increase as indicated by the figure for attendances which reached the highest yet recorded of 17,823, as compared with 16,675 for the previous year.

The most important new feature as regards the health services was the adoption of a scheme for the disposal of refuse by agreement with the Islington Borough Council by which the refuse from Stoke Newington will be removed to the Ashburton Grove Depot in Islington and conveyed by rail to the appropriate shoots in Hertfordshire.

This scheme will be put into operation early in 1937, and will result in the closing down of the Council's destructor with consequent improvement in the amenities of the district in which the destructor is situated.

I have again to express my appreciation of the kind consideration and support accorded me by the Chairmen and Members of the Public Health and Maternity and Child Welfare Committees, and to thank the staff of the Public Health Department for their assistance and co-operation throughout the year.

I have the honour to be,

Your obedient Servant,

F. D. ROSS-KEYT,

Medical Officer of Health.

I. STATISTICS AND SOCIAL CONDITIONS.

SUMMARY OF VITAL STATISTICS.

AREA (Acres)—863.

POPULATION AT CENSUS, 1921—52,167.

„ „ „ 1931—51,215.

REGISTRAR-GENERAL'S ESTIMATE FOR MID 1936—50,350.

NUMBER OF INHABITED HOUSES, 1936—8,721.

RATEABLE VALUE, 1936—£420,575.

SUM REPRESENTED BY A PENNY RATE—£1,696 19s. 4d.

MARRIAGES—423, being a rate of 16·8 per 1,000 persons.

LIVE BIRTHS	Total.	M.	F.
Legitimate	678	344	334
Illegitimate	16	10	6
Birth Rate per 1,000 of the estimated resident population :			
			13·8

STILLBIRTHS	26	14	12
Rate per 1,000 total (live and still) births			
			36·1

DEATHS	575	284	291
Death Rate per 1,000 of the estimated resident population			
	11·4 x (A.C.F.)	0·96 =	10·9

DEATHS FROM PUERPERAL CAUSES (Headings 29 and 30 of the Registrar-General's Short List) :

	Deaths.	Rate per 1,000 total (live and still) births.
No. 29 Puerperal sepsis	0	0
No. 30 Other puerperal causes	4	5·5
Total... ..	4	5·5

DEATH RATE OF INFANTS UNDER ONE YEAR OF AGE :

All Infants per 1,000 live births	44·6
Legitimate Infants per 1,000 legitimate live births	41
Illegitimate Infants per 1,000 illegitimate live births	187·5

DEATHS FROM CANCER (all ages)	79
„ MEASLES (all ages)	2
„ WHOOPING COUGH (all ages)	2
„ DIARRHŒA (under 2 years of age)	3

POPULATION.

The 1921 census figure for the population of the borough was 52,167, that for the census of 1931 was 51,215.

The Registrar-General's estimate of population for the middle of 1935 is 50,350.

In my opinion the population for 1936 has been under estimated, as I believe that any loss of population due to migration from the borough has been balanced by new residents coming from other areas to take their places, and I would estimate the population figure as being little changed from that of the 1931 Census. As an alternative estimate cannot be based on reliable factors the Registrar-General's figure for estimated population has been used in this report in calculating the birth and death rates.

BIRTHS.

The total number of births registered in the borough was 279 and of these 66 were transferred to other districts, as the permanent addresses of the parents were outside this borough. Similarly 481 births occurring outside the borough, in maternity hospitals, etc., were transferred to Stoke Newington, making a total of 694 belonging to this borough. Of these 354 were males and 340 were females. This figure gives a birth rate of 13·8 per 1,000 of the estimated population, as compared with 13·9 for the year 1935.

The following table shows the birth rates in Stoke Newington, London, and England and Wales, for the last ten years :—

Year.			Birth Rate.	Rate for London generally.	Rate for England and Wales.
1927	...	...	14·0	16·1	16·7
1928	...	...	15·3	15·9	16·7
1929	...	...	16·1	15·7	16·3
1930	...	...	14·6	15·7	16·3
1931	...	...	15·2	15·0	15·8
1932	...	...	15·0	14·2	15·3
1933	...	...	12·6	13·2	14·4
1934	...	...	13·7	13·2	14·8
1935	...	...	13·9	13·3	14·7
1936	...	...	13·8	13·6	14·8

ILLEGITIMATE BIRTHS numbered 16 (10 males and 6 females), being 2·3% of the total number of births.

BIRTHS IN INSTITUTIONS.—Local, 12 ; outlying, 493 ; total, 505.

NOTIFICATION OF BIRTHS ACT, 1907.—This Act requires all live births and every still birth occurring after the twenty-eighth week of pregnancy to be notified within thirty-six hours to the Medical Officer of Health of the district in which they occur.

During the year, of the 261 living and still births notified, 213 were notified by medical practitioners and parents ; and 48 by midwives.

A cautionary letter was sent to the person in default whenever it was discovered by means of the Registrar-General's returns that the birth of a child had not been notified in accordance with the provisions of the above-mentioned Act.

STILL BIRTHS.—During the year 1936, 26 still births were registered making a rate per 1,000 population of 0·52 as compared with 0·53 in London and 0·61 in England and Wales.

MARRIAGES

The Superintendent Registrar has kindly furnished me with the particulars. There were 423 marriages in the borough during 1936. The marriage rate was thus equal to 8·4 per 1,000 of the population, or a rate of 16·8 persons married per 1,000 of the population, as compared with 16·4 for the year 1935.

DEATHS

The number of deaths of Stoke Newington residents registered during the year 1936 was 575 as compared with 557 in 1935, making the crude death rate of 11·4 per 1,000 population.

The Registrar General has supplied a factor in order to make the crude death rate comparable from a mortality point of view with the crude death rate of the country as a whole or with the mortality of any other local area the crude death rate of which should be similarly modified with its own factor for the purpose.

This figure for correcting the death rate has been provided as it is found that the age and sex constitution of the borough differs slightly from the general population of the country. On applying this Area Comparability Factor (0·96), the adjusted death rate of the borough is 10·9 per 1,000 population.

The principal causes of death in their order of severity were: Heart Disease, 174; Cancer, 79; Tuberculosis (all forms) 38; and Pneumonia (all forms), 30.

The average yearly death rate of the borough during the previous five years was 11·4 per 1,000 population, so that the death rate for 1936 is seen to be below this average.

Comparing this table with the corresponding table of the preceding year, the following facts are noteworthy: There has been an increase in the number of deaths from Heart Disease, while the deaths from Pneumonia, Tuberculosis and Cancer have decreased.

The following table shows the death rates for England and Wales, London and Stoke Newington for the last five years:—

Year.	Stoke Newington		Rate for London generally.	Rate for England and Wales.
	Crude Death Rate	Corrected Death Rate		
1932 ...	12·9	12·4	12·3	12·0
1933 ...	12·3	11·8	12·2	12·3
1934 ...	11·6	11·1	11·9	11·8
1935 ...	11·1	10·6	11·4	11·7
1936 ...	11·4	10·9	12·5	12·1

TABLE—I.

CAUSES OF DEATH.	Net Deaths at the subjoined ages of "Residents" whether occurring within or without the Borough.												
	Sex.	All Ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 35 years.	35 and under 45 years.	45 and under 55 years.	55 and under 65 years.	65 and under 75 years.	75 years and upwards.
ALL CAUSES	M.	284	19	3	2	1	10	11	16	24	49	79	70
	F.	291	12	—	5	4	8	10	14	18	31	71	118
1. Typhoid and Paratyphoid Fevers	M.	—	—	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—	—	—
2. Measles	M.	1	—	—	1	—	—	—	—	—	—	—	—
	F.	1	—	—	—	1	—	—	—	—	—	—	—
3. Scarlet Fever	M.	—	—	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—	—	—
4. Whooping Cough	M.	—	—	—	—	—	—	—	—	—	—	—	—
	F.	2	1	—	—	—	—	—	—	—	—	—	—
5. Diphtheria	M.	2	—	1	—	—	—	—	—	—	—	—	—
	F.	1	—	—	1	—	—	—	—	—	—	—	—
6. Influenza	M.	2	—	—	—	—	—	—	—	—	2	—	—
	F.	6	—	—	—	—	—	—	—	—	1	1	4
7. Encephalitis Lethargica	M.	—	—	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—	—	—
8. Cerebro-spinal Fever ...	M.	—	—	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—	—	—
9. Tuberculosis of Respira- tory System	M.	23	—	—	—	—	3	5	6	3	4	2	—
	F.	12	—	—	—	—	3	1	1	4	3	—	—
10. Other Tuberculous Diseases	M.	3	—	—	—	—	1	2	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—	—	—
11. Syphilis	M.	—	—	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—	—	—
12. General Paralysis of the Insane, Tabes Dorsalis	M.	2	—	—	—	—	—	—	—	1	—	1	—
	F.	—	—	—	—	—	—	—	—	—	—	—	—
13. Cancer, Malignant Disease	M.	32	—	—	—	—	1	1	1	2	8	12	7
	F.	47	—	—	—	—	—	—	5	7	7	15	13
14. Diabetes	M.	5	—	—	—	—	—	—	—	—	1	3	1
	F.	4	—	—	—	—	—	—	—	—	—	1	3
15. Cerebral Hæmorrhage, etc.	M.	5	—	—	—	—	—	—	1	—	1	—	3
	F.	10	—	—	—	—	—	—	—	—	2	2	6
16. Heart Disease	M.	85	—	—	—	—	2	1	2	8	20	27	25
	F.	89	—	—	—	2	1	3	2	1	10	21	49
17. Aneurysm	M.	3	—	—	—	—	—	—	—	—	2	—	1
	F.	—	—	—	—	—	—	—	—	—	—	—	—
18. Other Circulatory Diseases	M.	25	—	—	—	—	—	—	—	1	—	14	10
	F.	24	—	—	—	—	—	—	—	—	3	5	16
19. Bronchitis	M.	10	1	—	—	—	—	—	—	2	1	1	5
	F.	9	1	—	—	—	—	—	—	1	1	2	4
20. Pneumonia (all forms) ...	M.	17	3	1	—	—	—	—	—	2	4	5	2
	F.	13	1	—	1	—	—	—	—	1	—	7	3
21. Other Respiratory Diseases	M.	1	—	—	—	—	—	—	—	1	—	—	—
	F.	2	—	—	—	—	—	—	—	—	—	1	1
22. Peptic Ulcer	M.	3	—	—	—	—	—	—	—	—	1	2	—
	F.	3	—	—	—	—	—	—	1	1	—	1	—
23. Diarrhœa, etc.	M.	3	2	—	—	—	—	—	—	—	—	—	1
	F.	1	1	—	—	—	—	—	—	—	—	—	—
24. Appendicitis	M.	2	1	—	—	—	—	—	1	—	—	—	—
	F.	2	—	—	—	—	1	—	—	—	—	1	—
25. Cirrhosis of Liver	M.	1	—	—	—	—	—	—	—	—	—	1	—
	F.	—	—	—	—	—	—	—	—	—	—	—	—
26. Other Diseases of Liver, etc.	M.	—	—	—	—	—	—	—	—	—	—	—	—
	F.	5	—	—	—	—	—	—	1	1	—	1	2
27. Other Digestive Diseases	M.	6	1	—	—	—	—	—	2	—	—	2	1
	F.	6	—	—	—	—	1	1	—	—	2	2	—
28. Acute and Chronic Nephritis	M.	8	—	—	—	—	—	—	—	1	1	3	3
	F.	8	—	—	—	—	—	1	—	1	1	4	1
29. Puerperal Sepsis	F.	—	—	—	—	—	—	—	—	—	—	—	—
30. Other Puerperal Causes...	F.	4	—	—	—	—	—	3	1	—	—	—	—
31. Congenital Debility, Pre- mature Birth, Malform- ation, etc.	M.	9	9	—	—	—	—	—	—	—	—	—	—
	F.	7	6	—	1	—	—	—	—	—	—	—	—
32. Senility	M.	3	—	—	—	—	—	—	—	—	—	—	3
	F.	2	—	—	—	—	—	—	—	—	—	1	1
33. Suicide	M.	3	—	—	—	—	—	2	1	—	—	—	—
	F.	1	—	—	—	—	—	—	—	—	—	—	1
34. Other Violence	M.	5	—	—	—	—	2	—	—	2	—	—	1
	F.	8	—	—	—	—	—	—	1	—	—	2	5
35. Other Defined Diseases...	M.	25	2	1	—	1	1	—	2	1	4	6	7
	F.	24	2	—	1	1	2	1	2	1	1	4	9
36. Causes Ill-defined, or Un- known	M.	—	—	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—	—	—

INFANTILE MORTALITY

There were 31 deaths of infants under one year of age, as against 694 births; the proportion which the deaths under one year bear to 1,000 births is therefore 44·6 as compared with 51·4 for the previous year, and is the lowest infantile mortality rate yet recorded in the borough.

			<i>M.</i>	<i>F.</i>
Deaths under 1 year :	{ Legitimate	... ..	17	11
	{ Illegitimate	... ..	2	1

The chief cause of mortality among infants in 1936, as appearing in Table II, was, as usual, prematurity with 8 deaths as compared with 8 deaths for the previous year.

The next largest cause of death was pneumonia with 6 deaths as compared with 9 for the previous year.

Two deaths were attributed to infectious disease (Whooping Cough).

It will be noted that during 1936 the deaths during the first four weeks of life amounted to 13, a percentage of 42 of the total infantile mortality during the first year of life, also that 11 of these infant deaths occurred during the first week of life.

The reason for the high rate of mortality during the first month of life is that the children who receive injuries at birth and those suffering from developmental and wasting diseases die soon after birth.

During the past 30 years the Infant Mortality rate has fallen some 50%, but this fall has occurred mainly subsequent to the first few weeks of life, the death rate during the first four weeks remaining much the same.

When every mother, and especially a first mother, attends an ante-natal clinic, or is otherwise kept under medical supervision during her pregnancy, then there should result a diminution in the number of deaths of babies at this early age.

INFANT MORTALITY RATES, 1896-1936.

Year.	Stoke Newington Infantile Mortality.	Rate for London generally.	Rate for England and Wales.
1896-1900 ...	—	162	156
1901-1905 ...	119	139	138
1906-1910 ...	91	114	117
1911-1915 ...	87	110	109
1916-1920 ...	75	92	91
1921 ...	53	79	83
1922 ...	67	74	77
1923 ...	46	61	69
1924 ...	58	69	75
1925 ...	61	67	75
1926 ...	48	64	70
1927 ...	66	59	69
1928 ...	61	67	65
1929 ...	47	70	74
1930 ...	55	59	60
1931 ...	54	65	66
1932 ...	53	66	65
1933 ...	46	59	64
1934 ...	61	67	59
1935 ...	51	58	57
1936 ...	45	66	59

THE NEO-NATAL DEATHS.—Of infants under 4 weeks of age—
are shown as follows for the past ten years :—

	<i>Births.</i>	<i>Neo-Natal Deaths.</i>	<i>Deaths under 1 Year</i>
1927 ...	730	22	49
1928 ...	776	27	47
1929 ...	807	21	38
1930 ...	732	25	40
1931 ...	779	20	42
1932 ...	776	18	41
1933 ...	646	13	30
1934 ...	693	24	42
1935 ...	700	20	36
1936 ...	694	13	31

TABLE II.—INFANT MORTALITY, 1936.

Net deaths from stated causes at various ages under one year of age.

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	—	—	—	—	—	—	1	1	—	2
Diphtheria and Croup ...	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis ...	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases	—	—	—	—	—	—	—	—	—	—
Meningitis (not Tuberculous)	—	—	—	—	—	—	—	—	—	—
Convulsions	—	—	—	—	—	—	—	—	—	—
Laryngitis	—	—	—	—	—	—	—	—	—	—
Bronchitis	—	—	—	—	—	1	1	—	—	2
Pneumonia (all forms) ...	—	—	—	—	—	1	3	1	1	6
Enteritis	—	—	—	—	—	1	—	2	—	3
Gastritis	—	—	—	—	—	—	—	—	—	—
Syphilis	—	—	—	—	—	—	—	—	—	—
Rickets	—	—	—	—	—	—	—	—	—	—
Suffocation overlying ...	—	—	—	—	—	—	—	—	—	—
Injury at Birth	—	—	—	—	—	—	—	—	—	—
Atelectasis	1	—	—	—	1	—	—	—	—	1
Congenital Malformation	2	—	—	—	2	1	—	—	—	3
Premature Birth	6	—	1	—	7	—	1	—	—	8
Atrophy, Debility and Marasmus	1	—	—	—	1	—	—	—	—	1
Other Causes	1	1	—	—	2	1	—	1	1	5
Totals	11	1	1	—	13	5	6	5	2	31

MATERNAL MORTALITY.—During the year 1936, 4 deaths occurred which were attributed to complications of pregnancy or childbirth. There were no maternal deaths during the year 1935. The maternal mortality rate per 1,000 total births was therefore 5·5 for 1936, as compared with nil the previous year.

The certified causes of these maternal deaths were as follows :—

1. Syncope,
Haemorrhage,
Natural Miscarriage.
2. Toxaemia of Pregnancy.
3. Post Partum Haemorrhage,
Retention of Morbidly adherent placenta,
Mitral Regurgitation.
4. Toxaemia of Pregnancy,
Broncho-Pneumonia.

None of these mothers had been under supervision at the Council's Ante-Natal Clinic and on enquiry it was revealed that cases 1 and 2 above had received no ante-natal attention. With regard to cases 3 and 4, these appear to have had some degree of medical supervision during pregnancy but the confinements presented difficulties owing to grave concurrent complications such as heart disease in one instance, and broncho-pneumonia in the other.

With a view to bringing the facilities offered by the Council's Health Services to a wider field of residents, 10,000 booklets were distributed in which, in the appropriate portion devoted to the care of the Mother and Child, emphasis is given to the importance of regular medical supervision of all expectant mothers.

In this connection it is gratifying to note that the work of the Ante-Natal Clinic has again increased during the year. 257 new cases have to be recorded with a total number of attendances of 1,423 as compared with 228 new cases and 888 total attendances for the year 1935.

II. GENERAL PROVISION OF HEALTH SERVICES.

HOSPITAL ACCOMMODATION.

FEVER.—The isolation hospitals of the London County Council receive cases of Scarlet Fever, Diphtheria and Membranous Croup, Enteric, Typhus and Continued Fevers, Relapsing Fever, Anterior Poliomyelitis, Encephalitis Lethargica, Cerebro-Spinal Fever, Puerperal Fever, Puerperal Pyrexia, Malaria, Dysentery, Ophthalmia Neonatorum, and cases of Measles and Whooping Cough.

SMALLPOX.—The Special Isolation Hospitals of the London County Council.

TUBERCULOSIS.—The London County Council accept cases for admission to their hospitals and sanatoria on the recommendation of the Tuberculosis Officer.

MATERNITY.—The number of births in hospitals to Stoke Newington residents given below, shows the popularity of these institutions :—

Salvation Army Mothers' Hospital	...	66
City of London Maternity Hospital	...	82
Mildmay Maternity Nursing Home	...	50
Royal Free Hospital	... ..	46
Home Hospital for Women	... ..	9
Hackney Hospital (L.C.C.)	... ..	110
Jewish Maternity Hospital	... ..	32
Royal Northern Hospital	... ..	14
University College Hospital	... ..	19
18 Other Hospitals	... ..	61
7 Nursing Homes	... ..	16
Total	... ..	505

Thus 70 per cent. of the total births took place in institutions as compared with 63 per cent. the previous year.

There are two Institutions situated within the borough :—

(i) STOKES NEWINGTON HOME HOSPITAL FOR WOMEN.—This Institution was established in 1825, "for the benefit of respectable women who have broken down in health, to whom the rest and medical treatment combined with good food and nursing prove to be a great boon."

This Hospital now provides for the reception of Convalescent patients as well as for surgical, medical and maternity cases, and there are 31 beds. During the year the whole of the maternity floor was modernised and brought up to date.

During the year 1936 it is estimated that of the total of 120 patients admitted 36 were residents of Stoke Newington.

Of the 120 cases admitted 58 were medical, 5 surgical, and 57 maternity.

(ii) THE STOKE NEWINGTON DISPENSARY.—Situating in the High Street, carries out a great deal of good work among the poor members of the community.

The Medical Officer sees cases daily between 11 a.m. and 1 p.m. Those eligible for treatment receive a subscriber's letter which entitles to two month's treatment. The Medical Officer also pays home visits when such are necessary.

The Maternity and Child Welfare Committee make an Annual Donation of £34 2s. 6d. to the Dispensary funds, and for this receive 260 letters, which are distributed by the Health Visitors, to suitable cases of mothers, and children under five, under the general supervision of the Medical Officer of Health.

SUMMARY OF MEDICAL WORK.

Patients under treatment 31st December, 1935	...	292
Patients admitted during 1936	...	5,543
Daily attendances	...	14,799
Visits paid	...	1,384
Patients cured or relieved	...	6,060
Casual Patients	...	521
Deaths	...	5
Patients under treatment 31st December, 1936	...	291

There is no institutional provision for unmarried mothers, illegitimate infants or homeless children in the borough.

AMBULANCE FACILITIES.—(a) For infectious cases ambulances are provided by the London County Council free. (Telephone: Waterloo 3311).

(b) For non-infectious cases the London County Council have special ambulances on payment: minimum Fee, twelve shillings and sixpence.

For *Accident* cases the London County Council provide ambulances (Telephone: Waterloo 3311).

CLINICS AND TREATMENT CENTRES

1. MATERNITY AND CHILD WELFARE CENTRES.—There are two Centres in the borough owned and staffed by the Council.

(a) Barton House, 233, Albion Road. Two large rooms warmed by guarded coal fires. Four smaller rooms warmed by guarded gas fires and electric radiators.

Three sessions for weighings and nurses' advice weekly; Mondays, Thursdays and Fridays, at 2 p.m.

Two sessions for doctors' consultations conducted by the Medical Officer of Health: Mondays and Fridays at 2 p.m.

Pre-Natal Clinic. Two sessions weekly conducted by Dr. MABEL MUNCEY: Tuesdays and Wednesdays at 2 p.m.

Dental Clinic. Two sessions weekly, conducted by Mr. GORDON SMITH, L.D.S., and later by Mr. P. R. ASPLETT, L.D.S.: Wednesdays at 10 a.m. and 2 p.m.

Diphtheria Prevention Clinic. One session weekly, conducted by the Medical Officer of Health: Mondays at 10 a.m.

Instruction Class for Mothers: Tuesdays at 3 p.m.

- (c) 44, Milton Road. One room warmed by guarded coal fire and hot water radiator.

One room used for doctor's consultations, warmed by guarded coal fire.

Two sessions for weighings and nurses' advice weekly : Mondays and Fridays at 2 p.m.

One session for doctor's consultations, conducted by the Medical Officer of Health : Thursdays at 2 p.m.

Instruction Class for Mothers : Tuesdays at 3 p.m.

From 9—10 each morning both centres are open and the Health Visitors are in attendance to give advice to mothers.

2. DAY NURSERIES.—Nil.

3. SCHOOL CLINICS.—The children attending the Stoke Newington elementary schools may attend the clinics maintained by the London County Council at 67, Church Street, Stoke Newington ; Popham Road, Islington ; and Clapton Square, Hackney.

Stoke Newington School Treatment Centre.—Since the opening of the Treatment Centre, at 67, Church Street, in February, 1931, in place of that held in premises adjacent to the Town Hall, the Management Committee has agreed to the continuance of the scheme, extending the facilities for the treatment of minor ailments to children under school age, at a capitation fee of 2s. per case, payable by the Borough Council.

Sessions are held at the Treatment Centre as follows :—

<i>Dental</i> : ...	... Mondays,	} 9.30 a.m.
	Tuesdays,	
	Wednesdays,	
	Fridays,	
<i>Gas Session</i> :	... Tuesdays,	2 p.m. (alternate).
<i>Vision</i> : ...	... Thursdays,	2 p.m.
<i>Minor Ailments</i> :	Daily from 9 a.m.—5 p.m. Saturdays 9—12. Doctor visits Wednesdays, at 2 p.m.	

During the year 31 children under the age of five years were referred to the Minor Ailments Centre for treatment. Of these, 18 were treated for Ear Disease and 13 for Diseases of the Skin. The total number of attendances for treatment was 172.

4. ORTHOPAEDIC CLINICS.—Nil.

5. ARTIFICIAL LIGHT CLINICS.—Nil in the borough.

Cases requiring this form of treatment are referred to :—

(i) *The Artificial Sunlight Clinic at the Mildmay Memorial Hospital, Newington Green, Islington.*

Sessions are held for children and adults on Mondays, Wednesdays and Fridays, from 1.30—3.30 p.m. and for adults only on Tuesdays and Thursdays from 1.30—8 p.m.

The Clinic is equipped with Carbon Arc and Mercury Vapour Lamps for local and general irradiation.

Charges for treatment are arranged in accordance with the circumstances of the patient. During the year 37 children were referred to the clinic for treatment, and there were 496 attendances.

(ii) *The British Red Cross Clinic, 92, Dalston Lane, Hackney.*—In April the Council made a grant of £30 towards the funds of the British Red Cross Clinic in respect of the treatment by Ultra Violet Rays of children under the age of five years referred from the Council's Welfare Centres. The Clinic is equipped with two Mercury Vapour Lamps and is open for treatments from 9 a.m. to 9 p.m. on weekdays. During the year 93 children were treated at this Clinic, the number of attendances made was 1,772, and the total number of treatments given 2,806.

The majority of the children treated at these Clinics by means of Ultra Violet Rays Therapy have shown an appreciable improvement especially those suffering from debility and malnutrition.

6. TUBERCULOSIS DISPENSARY.—The borough shares with Hackney the premises lying adjacent to the Metropolitan Hospital in Kingsland Road, paying one-third of the expenses. These include waiting room, dressing rooms, doctor's room, laboratory, office and dispensary.

The Clinical Tuberculosis Officer holds the following sessions for the purpose of examining cases and contacts referred to him by medical practitioners or by the Medical Officer of Health :

Tuesday, Wednesday, Thursday, Friday,	}	10.30 a.m.	Tuesday,	}	6 p.m.
			Thursday,		

School Children, Tuesday, 5 p.m.

7. TREATMENT CENTRES FOR VENEREAL DISEASES.—Arrangements for treatment are made by the London County Council, and the nearest centres are at the Metropolitan Hospital and the Royal Northern Hospital.

PUBLIC HEALTH OFFICERS OF STOKE NEWINGTON.

<i>Medical Officer of Health</i>	}	F. D. ROSS-KEYT, M.B., CH.B., D.P.H.
<i>Administrative Tuberculosis Officer</i>		
<i>Maternity and Child Welfare</i>		
<i>Medical Officer.</i>		

*†*Public Analyst* : A. J. C. LICKORISH, F.I.C.

**Clinical Tuberculosis Medical Officer* : F. W. HAMILTON, M.D., M.R.C.P., D.P.H.

**Medical Officer, Pre-natal Clinic* : MISS MABEL MUNCEY, M.B., B.S. (Lond.).

**Anaesthetist, M. & C. W. Dental Clinic and Public Assistance Medical Officer* : J. E. RICHARDS, M.B., M.R.C.S.

**Dental Officer, M. & C. W. Dental Clinic* : S. GORDON SMITH, L.D.S., R.C.S. (deceased). P. R. ASPLETT, L.D.S.

**Consulting Obstetricians* :

LADY FLORENCE ELIZABETH BARRETT, M.S., M.D., B.Sc.,
31, Devonshire Place, Wimpole Street, W. 1. (Welbeck 4384).

MISS MARGARET BASDEN, M.D., F.R.C.S., 114, Harley Street, W. 1. (Welbeck 2157).

ARTHUR O. GRAY, M.D., F.R.C.S., 18, Harley Street, W. 1. (Langham 3612).

FRANCIS L. PROVIS, M.R.C.P., F.R.C.S., 33, Queen Anne Street, Cavendish Square, W. (Langham 2185).

RICHARD ALAN BREWS, M.R.C.P., F.R.C.S., 20, Queen Anne Street, W. 1. (Langham 2572).

Public Vaccinator : A. E. McCahon, M.B., B.Ch., B.A.O.

Sanitary Inspectors :

A. P. PIGGOTT (Senior Inspector) Cert. S.I.E.B., Cert. Meat and Other Foods (R.S.I.).

W. H. G. SAUNDERS, Cert. R.S.I., and S.I.E. (Joint Board).

C. CUNNINGHAM, Cert. R.S.I. and S.I.E. (Joint Board), Cert. Meat and Other Foods R.S.A. (Scot.).

C. V. FRISBY, Cert. R.S.I. and S.I.E. (Joint Board), Cert. Meat and Other Foods (R.S.I.).

Health Visitors :

Miss M. M. Jones, Health Visitors Cert. C.M.B.

Miss W. A. PHEBEY, Health Visitors Cert. C.M.B.

Miss B. C. HUNT, C.M.B.

**Tuberculosis Nurse and Health Visitor* : Miss E. RANGLES, Health Visitors Cert. C.M.B.

†*Chief Clerk and Vaccination Officer* : F. HICKS.

†*Assistant Clerk* : R. W. TURNER.

†*Housing Clerk* : W. T. W. BUSH.

†*Junior Clerk* : B. M. LLOYD.

†*Disinfecter and Assistant* : J. W. HOWELL.

**Part-time appointments.*

†Expenditure on appointments so marked is borne entirely by the rates ; a grant from the Ministry of Health is received in respect of all others.

CHANGES IN STAFF.—Mr. W. T. W. Bush was appointed Junior Clerk in the Housing Section of the Public Health Department and commenced duties on 16th March, 1936. Mr. R. P. May, Assistant Clerk in the Public Health Department, resigned his post as from 13th September, 1936, on being appointed Sanitary Inspector's Assistant under the Poplar Metropolitan Borough Council. Mr. R. W. Turner, Junior Clerk in the Public Health Department, was promoted to the post of Assistant Clerk to fill the vacancy created by the resignation of Mr. May. Mr. B. M. Lloyd was appointed Junior Clerk in the Public Health Department and commenced duties on 28th September, 1936.

Miss H. Reeve, who had held the position of Health Visitor in this Council's service for a continuous period of 17 years, retired on superannuation as from 31st May, 1936. Miss B. C. Hunt, who had been acting as temporary Health Visitor in the borough since 2nd May, 1936, was appointed to a permanent post to fill the vacancy caused by the retirement of Miss Reeve. Miss E. Thurgood resigned her post as Health Visitor as from 30th August, 1936, on appointment to a similar position on the staff of the Hackney Metropolitan Borough Council. Miss W. A. Phebey (Ilford Borough Council) was appointed Health Visitor to replace Miss Thurgood, and commenced duties on 31st August.

It is with deep regret that I have to record the death of Mr. Gordon Smith, who had for over ten years so ably conducted the Council's dental clinic at Barton House. Mr. P. R. Asplett was subsequently appointed to fill the vacancy of surgeon dentist to the Council's Clinic through the British Dental Hospital.

PROFESSIONAL NURSING IN THE HOME

(a) GENERAL.—Arrangements are made with the Ranyard Mission by which the services of two full-time district nurses are utilised in the borough for general nursing and for the nursing of children under five years of age. The Council has made an annual grant of £50 to the Association since 1919, when only one district nurse was employed and the work has now increased to such an extent that three full-time nurses are now necessary. In view of the additional nursing assistance provided the Council increased the contribution to the Ranyard Nursing Association from £50 to £100 per annum, as from the 1st April, 1936.

By means of subscriptions, donations and other local means, a further £258 was added to this amount during the year.

The Ranyard District Nurses are :—

Miss BRADLEY, 22, Lordship Park.

Miss NEWMAN, 23, Dumont Road.

RELIEF NURSE, 23, Dumont Road.

Necessitous cases receive free attention, but in other cases a fee, in aid of the Mission funds, is charged according to means.

The Nurses' work for 1936 includes :—

Number of visits paid, 14,259 ; of these, 5,346 were in the South Hornsey Ward.

Cases treated 532, of these 210 were in the South Hornsey Ward.

Children visited :—

		<i>Under 5.</i>		<i>Of School Age.</i>
After Tonsillectomy	...	23	...	30
Threadworms	... ..	7	...	6
Pneumonia	... ..	1	...	2
Other cases	... ..	56	...	24
		—		—
		87		62
		—		—

(b) FOR INFECTIOUS DISEASES.—No provision has been made for the home nursing of such cases. During prevalence of such diseases as Measles and Whooping Cough the Council's Health Visitors give advice and assistance and the services of an additional Health Visitor may be called upon if required.

At times, when the available accommodation in the hospitals for cases of either Measles or Scarlet Fever is insufficient to permit of the reception of all cases of those diseases, it is necessary for application to be made to the Medical Officer of Health, who selects those cases which in his opinion should be admitted to hospital.

MIDWIVES

The Borough Council does not employ any practising midwives. During the year the Borough Council paid a fee of £1 10s. 0d. to a midwife in respect of a necessitous maternity case.

There are three midwives resident in the Borough who attend cases in Stoke Newington.

MATERNITY AND NURSING HOMES

No. of Registered Maternity Homes in the borough : 1.

No. of Registered Nursing Homes (other than Maternity) in the borough : 1.

OBSTETRIC CONSULTANTS

The terms of the Borough Council's Scheme for the provision of the services of obstetric consultants in any midwifery case which presents difficulty or abnormality are as follows :—

- (a) That the patient be a Stoke Newington resident.
- (b) That the medical practitioner immediately informs the Medical Officer of Health, when he has called in the services of a consulting obstetrician, giving the name of the consultant, the name and address of the patient, the date of the case, the reason, and the result.
- (c) That the Borough Council be responsible to the consulting obstetrician for a fee of £5 5s. per case, inclusive, covering any necessary subsequent visit.

The Scheme is intended to apply to those people who cannot afford the consultant's ordinary fee.

The Borough Council may reserve to itself the right to ask a patient to contribute a portion, or the whole of the fee if in subsequent investigation it is found that the patient is capable of so doing. The assessment of each case to be decided by the Maternity and Child Welfare Committee.

The names and addresses of the consultants are given on page 23.

One consultation, under the scheme, took place during the year at a cost of £5 5s. 0d.

INVESTIGATION OF CASES OF PUERPERAL FEVER.—Each case of Puerperal Fever and Puerperal Pyrexia notified is inquired into and an endeavour made to ascertain the cause of the condition, the progress and the result.

REMOVAL OF INFIRM PERSONS IN CERTAIN CASES

By Section 28, of the London County Council (General Powers) Act, 1928, power is given to remove infirm and diseased persons, living under insanitary conditions, to institutions where they can receive adequate care and medical attention.

Frequently such persons are amenable, by persuasion, to enter a local hospital, but sometimes it is necessary to make application to a Magistrate for a Detention Order, which provides authority for such person to be maintained in an institution for a period of three months.

It is necessary to apply to the Magistrate for an extension to the original order at three monthly intervals.

No new cases under this section of the Act had to be dealt with during the year, but extension orders were applied for and granted in the case of one aged and infirm person who had been removed to the Hackney Institution in July, 1933.

HEALTH EDUCATION

500 copies each month of the journal *Better Health* were distributed free in the borough. This journal is issued by the Central Council for Health Education, and there can be no doubt as to its great educational value in all matters relating to health and hygiene.

Copies are distributed to mothers attending the welfare Centres, Head Teachers of the elementary schools of the borough, Councillors, and members of the public who intimate a wish to be supplied

with regular copies. Copies are also distributed by means of the Public Library, Town Clerk's, Public Health and Rates Offices.

PUBLIC HEALTH SERVICES.—Early in the year 10,000 copies of a booklet entitled “Public Health Services” were issued on the instructions of the Public Health Committee and were distributed free throughout the borough in order that the services available might be brought to the notice of residents, and in the hope that those requiring them would make full use of the facilities offered.

III.—SANITARY CIRCUMSTANCES OF STOKE NEWINGTON.

HOUSE REFUSE

The household refuse in the borough is collected in horse-drawn vehicles and with the exception of 631 tons taken to the Islington Depot, is burnt at the Council's Refuse Destructor situated at the rear of the Town Hall.

Destructor.—The Refuse Destructor consists of two units of furnaces, each consisting of three fires, designed by Messrs. Heenan & Froud, Ltd. Steam is raised and supplies given to an auxiliary electrical plant; for the Milton Road Washhouses and Slipper Baths; for the steam disinfecter, towel laundry and cleansing centre for school children; and for the heating of the Town Hall and its auxiliary offices in adjacent buildings.

The disposal of refuse at the destructor is being carried out in a satisfactory manner and everything is done to cause as little nuisance as possible.

Salvage.—Tins, iron and loose destructor scrap are removed from the refuse before burning and sold. Bottles are also sorted and sold.

The tonnage total of refuse burnt at the destructor during the year ending December 31st was 10,440, as compared with 10,223 in 1935.

The collection and disposal of house refuse continues in a satisfactory manner.

PROPOSED SCHEME FOR DISPOSAL OF REFUSE

In July, 1934, the Cleansing Sub-Committee of the Metropolitan Boroughs Standing Joint Committee issued an Interim Report on Disposal of Refuse and the following observations with regard to the disposal of refuse in Stoke Newington are contained in this Report :—

“ The Refuse Destructor with its cramped site in a congested residential area is considered to be unsatisfactory from the sanitary point of view. In the opinion of the group the actual cost involved in the provision of steam and salvaging of paper, tins, etc., should be closely examined to ascertain whether any real ultimate advantage is in fact derived therefrom.”

The principal recommendation of the Sub-Committee with regard to the disposal of refuse in Stoke Newington was in the following terms :—

“ That consideration be given to the closing down of the refuse destructor and the disposal of refuse by another method.”

Following this report and the recommendation, the Public Health Committee have been investigating the problem of alternative means of disposal of refuse in the borough, and in 1936 an agreement was entered into between this Council and the Islington Borough Council, to the effect that all refuse from Stoke Newington would be conveyed to the Ashburton Grove Depot in Stoke Newington's vans, and tipped into the conveyors at that Depot. The Islington Borough Council would be responsible for the deposit of the refuse into the railway trucks and the prevention of any annoyance at the depot. The loaded railway trucks would be properly trimmed and covered over before being despatched to the Islington Borough Council's shoots, which are situated in Hertfordshire.

It was anticipated that the new scheme for the disposal of refuse would be put into operation early in 1937.

The adoption of this scheme, resulting in the closing down of the refuse destructor, will effect a considerable improvement in the amenities of the Milton Road and Church Walk areas and will terminate the numerous complaints from residents in these localities with regard to alleged nuisances caused by the destructor.

SANITARY INSPECTION

The following statement contains particulars required to be submitted under Article 19 of the Sanitary Officers' Order, 1926, and gives an indication of the work carried out by the Sanitary Inspectors during the year.

Three district sanitary inspectors and one housing inspector are employed by the Council in full-time service.

(a) NUMBER AND NATURE OF INSPECTIONS AND RE-INSPECTIONS MADE DURING 1936 :—

House-to House Inspections	...	...	...	...	150
After Notification of Infectious Diseases	...	...	...	...	235
Upon complaint, under Section 107 (3), Public Health (London) Act, 1891	...	...	...	...	543
After Notices from Builders, under Bye-Law 14 (London County Council)	...	...	...	...	376
Food Premises	...	...	...	...	803
Slaughter Houses	...	...	...	...	15
Milkshops, Dairies and Cowsheds	...	...	...	...	221
Smoke Observations	...	...	...	...	19
Factories and Workshops	...	...	...	...	298
Other Premises Inspected	...	...	...	...	705
Outworker's Premises	...	...	...	...	127
Shops Act Inspections	...	...	...	...	96
Premises inspected on applications under Rent Restriction Acts	...	...	...	...	8
Re-inspections made to examine and test work	...	...	...	...	6,530
Total Inspections	...	...	...	...	10,126

(b) INFORMAL NOTICES SERVED NUMBER AND NATURE (UNDER SEC. 3, PUBLIC HEALTH (LONDON) ACT, 1891) :—

House-to-House Inspection	...	...	...	...	76
After inspection on account of complaint	...	...	...	...	361
After infectious illness	...	...	...	...	62
With reference to factories and workshops (including bakehouses)	...	...	...	...	32
Food Premises	...	...	...	...	2
Notices served under Shops Act	...	...	...	...	2
After sundry other inspections	...	...	...	...	253
					788

(c) STATUTORY NOTICES SERVED (UNDER SEC. 4, P.H. (LONDON) ACT, 1891).—Numbered 51 as follows :—

Dwelling Houses	...	...	...	...	...	...	47
Tenement Houses	...	...	...	...	...	...	1
Stables	...	...	...	...	...	...	1
Land	...	...	...	...	...	...	1
Factory Premises	...	...	...	...	...	...	1
							51

(d) RESULT OF THE SERVICE OF NOTICES; NUISANCES ABATED AND SANITARY DEFECTS REMEDIED.

Premises cleansed	...	...	...	...	...	...	218
Dampness in dwellings remedied	...	...	...	...	...	...	283
Dilapidated walls, ceilings, etc., repaired	...	...	...	...	...	...	174
Foul traps and pans of w.c.'s cleansed	...	...	...	...	...	...	10
Flushing cisterns to w.c.'s provided or repaired, and w.c.'s with insufficient water supply made satisfactory	...	...	...	...	...	...	28
Defective w.c. pans and traps removed and replaced by modern apparatus	...	...	...	...	...	...	52
Stopped or choked w.c. traps cleared	...	...	...	...	...	...	15
External ventilation to w.c.'s improved	...	...	...	...	...	...	7
Improperly constructed w.c.'s made to comply with Bye- laws	...	...	...	...	...	...	2
Additional w.c.'s provided in case of insufficient w.c. accom- modation	...	...	...	...	...	...	8
Defective soil-pipes repaired or reconstructed	...	...	...	...	...	...	3
Defective ventilating pipes reconstructed or repaired	...	...	...	...	...	...	12
Unventilated soil-pipes ventilated and	}	...	...	...	...	...	1
Soil-pipes improperly ventilated improved		...	...	...	...	...	
Carried forward	...	...	...	...	...	...	813

Brought forward	...	...	...	...	...	813
Dirty yards cleansed	...	...	...	...	...	1
Yards paved or re-paved with impervious material	...	...	...	...	...	49
Long lengths of sink, bath, and lavatory waste-pipes trapped, and made to discharge in open-air over gullies	...	...	...	...	...	77
Defective stone sinks replaced by glazed sinks	...	...	...	...	...	77
Defective waste-pipes repaired...	...	...	...	...	...	67
Foul drinking water cisterns cleansed...	...	...	...	...	...	6
Drinking water cisterns without close-fitting covers provided with proper coverings	...	...	...	...	...	6
Defects in water cisterns remedied	...	...	...	...	...	10
New portable dust-bins provided	...	...	...	...	...	116
Defective drainage repaired or reconstructed in accordance with the bye-laws of the London County Council	...	...	...	...	...	63
Choked or stopped drains cleared and repaired	...	...	...	...	...	41
Foul drains cleansed	...	...	...	...	...	2
Proper water supply provided to tenements	...	...	...	...	...	9
Defective roofs repaired	...	...	...	...	...	140
Defective guttering and rain water pipes repaired or renewed	...	...	...	...	...	101
Defective paving to floors of wash-houses repaired or renewed	...	...	...	...	...	3
Ventilation under floors improved	...	...	...	...	...	18
Accumulations of refuse, etc., removed	...	...	...	...	...	27
Drains exposed to trace rats	...	...	...	...	...	16
Miscellaneous nuisances abated	...	...	...	...	...	17
Nuisances abated from the improper keeping of animals	...	...	...	...	...	2
Total	...	...	...	...	...	<u>1,661</u>

OTHER SANITARY CONDITIONS REQUIRING NOTICE

New flats erected and drained	...	...	...	...	185
Existing drains tested and found sound	...	...	...	...	63
New heavy L.C.C. soil and vent pipes fixed	...	...	...	...	18
New W.C. pans and traps fixed	...	...	...	...	94
Extensions to existing buildings, carried out	...	...	...	...	2
New factory premises erected and drained	...	...	...	...	2
Drains reconstructed (owner's own applications)	...	...	...	...	7
Drains partially reconstructed (owner's own applications)	...	...	...	...	32
Drains repaired	...	...	...	...	17
Drains exposed to trace course or condition	...	...	...	...	15
Additional water closets built and drained	...	...	...	...	75
New Town Hall Buildings	...	...	...	...	1
Old disused sewer connections sealed off at sewer	...	...	...	...	4
New baths, lavatories, sinks and wastes provided and fixed	...	...	...	...	379
Alterations to baths, sinks, lavatory basins, etc.	...	...	...	...	94
Notices served under Section 40, Public Health (London) Act, 1891	...	...	...	...	22
Sundry alterations to sanitary fittings	...	...	...	...	27
Drains exposed to clear stoppages...	...	...	...	...	19
Choked drains unstopped	...	...	...	...	29
Houses demolished and drains sealed off	...	...	...	...	4
Business premises erected and drained	...	...	...	...	2
Drainage plans submitted to the Public Health Committee and passed	...	...	...	...	48
Premises fumigated—Vermin disinfection	...	...	...	...	87
Notices received from Builders	...	...	...	...	376
New manholes formed on existing drains...	...	...	...	...	5
Existing W.C.'s disconnected and sealed off	...	...	...	...	1
Means of access to drains improved	...	...	...	...	21
Additional ventilating pipes provided	...	...	...	...	11
New houses erected and drained	...	...	...	...	3
Additional urinals provided	...	...	...	...	10
New cinema erected	...	...	...	...	1
Miscellaneous buildings erected and drained	...	...	...	...	12
Total	...	...	...	...	1,666

SUMMARY OF LEGAL PROCEEDINGS DURING 1936

28 cases of Breaches of the L.C.C. Drainage Bye-Laws were reported to the Committee. Proceedings were instituted in the following cases :—

Address.	Complaint.	Magistrate's Decision.	Fine.	Costs.
197, Albion Rd....	Failure to give notice. Work contrary to Bye-laws	Fined ...	£ s. d. 1 0 0	£ s. d. 1 1 0
5, Park Street	Failure to give notice	Fined ...	1 0 0	0 10 6
52, Defoe Road	Failure to give notice. Work contrary to Bye-laws	Dismissed ...	—	0 4 0
16, Grayling Rd.	Failure to give notice	Fined ...	0 7 6	—
Garage rear 87, Stoke Newington Road	Failure to give notice. Work contrary to Bye-laws	Fined ...	2 0 0	2 0 0
133, Albion Road	Failure to give notice. Work contrary to Bye-laws	Dismissed ...	—	1 0 0
40, Park Lane ...	Failure to give notice	Fined ...	1 0 0	0 2 0
39, Belgrade Rd.	Failure to give notice. Work contrary to Bye-laws	Dismissed ...	—	1 0 0

FACTORIES AND WORKSHOPS

The statement of inspections made and action taken required by the Home Office is appended.

OUTWORKERS.—Lists of Outworkers are prepared in February and August from names submitted by the employers. At the latter date there were 229 persons registered as doing outwork in their homes in Stoke Newington, of which number only 32 worked for firms in Stoke Newington. These latter firms also employed 145 other persons living and working in other boroughs.

1.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES, INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS

Premises. (1)	Inspections. (2)	Number of Written Notices. (3)	Occupiers Prosecuted (4)
Factories (including Factory Laundries)	53	12	—
Workshops (including Workshop Laundries)	137	17	—
Workplaces (other than Outworkers' premises)	108	3	—
Total 	298	32	—

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES

Particulars (1)	Number of Defects			
	Found (2)	Remedied (3)	Referred to H.M. Inspector (4)	No. of Offences in respect of which prosecu- tions were insti- tuted. (5)
<i>Nuisances under the Public Health Acts :—</i>				
Want of cleanliness ...	11	11	—	—
Want of ventilation ...	—	—	—	—
Overcrowding ...	—	—	—	—
Want of drainage of floors	—	—	—	—
Other nuisances ...	14	14	—	—
Sanitary accommodation				
Insufficient ...	6	6	—	—
Unsuitable or defective	9	9	—	—
Not separate for sexes ...	1	1	—	—
No artificial light in women's W.C. ...	6	6	—	—
<i>Offences under the Factory and Workshops Acts :—</i>				
Illegal occupation of under ground bakehouse (S.101)	—	—	—	—
Other offences ... (Excluding offences re- lating to outwork and offences under the Sec- tions mentioned in the Schedule to the Minis- try of Health (Factories and Workshops Transfer of Powers) Order, 1921)	1	1	—	—
Total ...	48	48	—	—

SMOKE ABATEMENT

There are few factory chimneys in the Borough, but such as exist are kept under observation by the inspectors in order that any breaches of the provisions of the Act may be dealt with.

15 complaints received during the year of nuisance from smoke were investigated and abated after visits by Inspectors.

1 notice was served under the Public Health (Smoke Abatement) Act, 1926.

SCHOOLS

The Elementary Schools of the Borough are under the supervision of the London County Council, but when necessity arises the Public Health Department gives assistance with a view to the prevention of spread of infectious disease.

The home conditions of all notified cases of infectious diseases are investigated by the Inspectors, with a view to the remedy of any sanitary defects and for the purpose of gleaning information which may lead to the discovery of the source of infection.

Names of all school children found to be living in homes of notified infectious cases are transmitted to the Head Teachers for information, in order that these children may be kept excluded for the requisite periods.

MORTUARY ACCOMMODATION

Under Section 88 of the Public Health (London) Act, 1891, every Sanitary Authority is required to provide and maintain mortuary accommodation for the reception of bodies found dead or upon which an inquest is to be held.

The present mortuary building, situated in St. Mary's Churchyard, was erected about 1881, and until approximately ten years ago was used for depositing bodies pending burial and for the holding of post-mortem examinations. In 1925 the Coroner in office at that time altered the procedure and the bodies of persons dying in Stoke Newington were removed to the Hackney Mortuary, and since that date the Stoke Newington Mortuary has been infrequently used, but it was considered advisable to maintain the building in case it should be required in some exceptional circumstance. The premises, however, are out of date and unsuitable for modern requirements, and in view of its proximity to the new Municipal Buildings it seemed

advisable that it should be definitely discontinued as use for a mortuary with a view to its demolition in due course. In order to permit of this action being taken the Council has entered into an agreement with the Hackney Borough Council for the use of the Hackney Mortuary for a period of three years at a cost of £120 per annum.

HACKNEY MORTUARY

	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Bodies deposited pending burial	40	33	73
" " " post-mortem examination }	40	28	68
	—	—	—
	80	61	141
	—	—	—
Inquest on Parishioners (held at Hackney Coroner's Court)	20	11	31

FOULING OF PUBLIC FOOTWAYS BY DOGS

The following Bye-law was made by the Council on the 16th May, 1933, and came into operation in July of that year :—

No person being in charge of a dog in any street or public place and having the dog on a lead shall allow or permit such dog to deposit its excrement upon the public footway.

Any person offending against this bye-law shall be liable to a penalty not exceeding 40 shillings.

During 1936, no infringement of this bye-law was reported.

THE SHOPS ACT, 1934

This Act, which came into operation on the 30th December, 1934, contains provisions (1) for regulating the employment of young persons under the age of 18 employed about the business of a shop or in retail trade elsewhere, and in particular for limiting the normal hours of employment of such young persons to 48 hours a week (52 hours a week before 27th December, 1936), and (2) for securing improved arrangements for the health and comfort of all shop workers, adult and young persons alike.

The provisions of the Act relating to the employment of young persons, the lighting of shops, the provision of washing facilities and of facilities for meals are administered by the London County Council.

The Metropolitan Borough Councils are the authorities responsible for administering the provisions relating to ventilation and temperature of shops and sanitary arrangements.

In every shop, unless it is specifically exempted, there must be provided and maintained suitable and sufficient sanitary conveniences. A certificate of exemption may be granted if the authority are satisfied that, by reason of restricted accommodation or other suitable circumstances affecting the shop, such certificate should be in force and that suitable and sufficient sanitary arrangements are otherwise conveniently available.

The District Sanitary Inspectors have been authorised to act as the responsible officers for carrying out the purposes of the Act.

During the year 96 Shops Act inspections were made and two notices were served and complied with.

RATS AND MICE (DESTRUCTION) ACT, 1919

The Sanitary Inspectors are the rat officers appointed by the Council under the Act, and complaints as to infestation with rats brought to their notice are investigated, and advice and assistance given where necessary.

The number of complaints of rat and mice infestation received during the year was 67, as compared with 52 the previous year. On 16 occasions drains were exposed to trace rats. In addition, poison baits were laid down, and 16 Notices served. It is found in this borough that the best local measure of rat control is the replacement of old and defective drainage systems by those of modern type. This work of replacement is continually in progress, and the necessary supervision forms an important part of the duties of the Inspectors.

Defective airbricks are a very frequent cause of rat infestation of individual houses by stray rats, especially in the breeding season. Householders should pay particular attention to the condition of all air-gratings.

During the year under review several large sites have been cleared for rebuilding purposes and stray rats have been a source of some concern. All possible steps have been taken to reduce the nuisance to a minimum.

A supply of the Ministry of Agriculture's Leaflets is kept in the Public Health Department for distribution to those seeking advice as to measures to be taken to destroy rats.

RAG FLOCK ACTS, 1911 and 1928

There are no premises in the Borough on which rag flock is manufactured, used or sold.

PHARMACY AND POISONS ACT, 1933

The law relating to the retail sale of Poisonous Substances by Traders who are not registered pharmacists has been altered by the Pharmacy and Poisons Act, 1933, and the Poisons Rules, 1935.

The Poisons List has been prepared by the Poisons Board and confirmed by the Home Secretary. It prescribes two Lists of Poisons, called respectively Part I of the Poisons List, and Part II of the Poisons List. The Part I list is a list of poisons which can only be sold by retail to the general public by registered pharmacists. The Part II list is a list of poisons which may be sold retail to the general public, not only by registered pharmacists, but also (subject to certain conditions) by ordinary traders whose names are entered on a list of persons entitled to sell such poisons, kept by the Local Authority.

The following is an abbreviated list of Poisons and Poisonous Substances which may be sold by retail to the general public, or persons in certain occupations, by Traders whose names are entered in the Local Authority's list :—

Ammonia.

Arsenical substances (in the form *only* of sheep dips, sheep washes, insecticides, and other agricultural and horticultural preparations).

Barium carbonate (in the form *only* of preparations for the destruction of rats and mice).

Barium silicofluoride.

Formaldehyde.

Hydrochloric acid (spirits of salt).

Hydrofluoric acid and certain other fluorides.

Mercuric substances (in the form *only* of insecticides or other agricultural or horticultural preparations).

Nicotine and nicotine salts.

Nitric acid.

Nitrobenzene (in the form *only* of agricultural and horticultural insecticides and substances for treatment of bee disease).

Phenols, as defined.

Phenylene and toluene diamines, and their salts (hair dyes).

Potassium hydroxide (caustic potash).

Potassium quadroxalate (salts of lemon).

Sodium hydroxide (caustic soda).

Sulphuric acid.

Any trader, not being a registered pharmacist, who sells or is desirous of selling any of the above Poisons and Poisonous Substances, must have his name entered on the list kept by the Local Authority of persons entitled to sell Poisons included in Part II of the Poisons List, on premises used for or in connection with his retail business situate within the area of the Local Authority.

The Local Authority may refuse to enter in the list, or may remove from the list, the name of any person who fails to pay the prescribed fees, or who in the opinion of the authority is not fit to be on the list, for any sufficient reason, relating either to him personally, or to his premises (or, in the case of a company, etc., relating personally to members of the board, or managers or other officers of the company, etc.). Provision is made for appeal by an aggrieved person against the decision of the authority.

The entry of a person's name on the Local Authority's list does *not* entitle that person to retail poisons in Part I of the Poisons List, which may only be retailed by registered pharmacists.

It is not lawful for any poison to be exposed for sale in, or to be offered for sale by means of, an automatic machine.

Leaflets containing detailed particulars of the regulations as to the methods of storage which must be observed, the special precautions which must be taken for certain articles, the mode of sale, the nature and labelling of containers, and restrictions as to the sale of particular poisonous substances were distributed to 44 traders whose names had been entered in the list as approved sellers of Part II Poisons.

The list of persons compiled by the Council had legal effect as from the 1st May, 1936. The necessary supervision of sellers of poisons under Part II of the Poisons List is carried out by the Council's District Sanitary Inspectors.

SWIMMING BATHS

(a) PUBLIC.—The Borough Council's Swimming Bath at Clissold Road is provided with a modern efficient filtration and aeration plant which maintains the water in a pure and attractive condition. Samples of the water are taken from time to time and submitted for chemical and bacteriological examination and the reports of these analyses have been satisfactory. The bathing boxes are fitted in the corridors exterior to the bathing hall with the object of preventing bathers carrying in dust, etc., which might eventually be conveyed to the water. By these means all practicable steps have been taken to ensure that those making use of the bath are protected from the danger of disease transmission.

(b) PRIVATE.—There are no privately owned Swimming Baths or pools open to the public, in this Borough.

BUG DISINFESTATION

No instance of bug infestation has been reported in connection with the Council Flats and there has been no occasion during the year to remove tenants to new flats belonging to the Council.

With regard to the transfer of overcrowded families from their old dwellings to the new Council Flats in Lordship Terrace, it is proposed to have all furniture of incoming tenants fumigated with hydrogen cyanide gas, by contract with a firm specialising in the technique of this work. The bedding, however, in such cases will be treated by steam disinfection at the Council's Disinfecting Station.

By these means the introduction of vermin into the new flats will be prevented.

In connection with ridding infested premises of bugs, the usual practice is to have the rooms stripped of all paper and woodwork and sprayed with a powerful insecticide solution followed by fumigation by means of sulphur candles. Further spraying and fumigation may be necessary a few days later.

Where application for assistance is made by the owner or occupier, the disinfestation is carried out by the Council's Disinfector and a fee of 2/6 per room is charged.

CLEANSING STATION.—The Borough Council's agreement with the London County Council to supply the necessary accommodation and equipment for the bathing and cleansing of verminous school children was continued during the year. Under the London County Council scheme the work of cleansing is supervised by a school nurse, who devotes every morning and two afternoons a week to this work.

Statement of the activities of the year is as follows :—

Cases of Impetigo	...	...	...	...	...	454
Cases of Nitty and Verminous heads and bodies	...					1,553
Cases of Scabies	...	...	...	...	...	202

IV. HOUSING.

CLEARANCE AREAS

There are at present no areas in this Borough containing houses which are in such a state of disrepair as to justify demolition.

OVERCROWDING

The results of the Overcrowding Survey carried out in Stoke Newington in 1935/1936 were fully reported in the Annual Report for 1935, but the main findings may be recapitulated as follows :—

Families living in overcrowded conditions	...	...	462
Families which will be overcrowded before December, 1937, by reason of children attaining the ages of one or ten years during that period	...	...	42

At the end of 1936 these figures were reduced to 356 cases of actual overcrowding and 27 cases of possible overcrowding due to age increases.

With the exception of three families rehoused on the Lordship Terrace Housing Estate these reductions occurred for the following reasons :—

- (a) Families obtaining additional accommodation privately.
- (b) Families moving to unknown addresses.
- (c) Families moving outside the Borough.

NECESSITY FOR FURTHER ACCOMMODATION

There are 356 families residing in this Borough who are living in overcrowded conditions. The following table shows the accommodation required to rehouse these families, the flats which will be

available for letting by this Borough Council in the near future and the total number of flats which will still be required :—

<i>Size of Dwelling</i>	<i>No. of Flats Required</i>	<i>Borough Council Flats</i>	
		<i>Ready for Occupation April, 1937</i>	<i>No. of Flats still Required</i>
1 room ...	7	—	7
2 rooms ...	26	9	17
3 „ ...	101	31	70
4 „ ...	123	49	74
5 „ ...	39	10	29
6 „ ...	49	2	47
7 „ ...	8	—	8
8 „ ...	1	—	1
9 „ ...	1	—	1
10 „ ...	1	—	1
	—	—	—
	356	101	255
	—	—	—

During the Overcrowding Survey of 1935/1936 it was found that 480 families, though not definitely overcrowded, were using the accommodation at their disposal to its fullest capacity. It will be apparent, therefore, that any increases in such families will add to the responsibility of the Borough Council in providing the necessary suitable alternative accommodation.

LORDSHIP TERRACE HOUSING SCHEME

In 1935 the Borough Council approved a scheme for the erection of flats on the Lordship Terrace Site.

These flats are intended for the rehousing of families living in overcrowded conditions in connection with the abatement of overcrowding in the Borough.

The scheme has been designed to link up with the present Lordship Road Scheme so as to effect a unified lay out.

The scheme consists of 96 Flats in the following proportions :—

1 Bedroom Flats ...	...	...	13
2 „ „ ...	...	...	24
3 „ „ ...	...	...	47
4 „ „ ...	...	...	10
5 „ „ ...	...	...	2
			—
			96 or 348 rooms.
			—

The standard of accommodation generally will be similar to the Lordship Road Scheme, but with the addition of lavatory basins in the bathrooms and the provision of sun balconies to those flats facing Clissold Park and Lordship Terrace. Work on the site was actually commenced in February, 1936, and the Housing Scheme will be completed and the flats ready for occupation in April, 1937.

PROPOSED REDEVELOPMENT OF THE HEWLING STREET AREA.

In dealing with the problem of providing further housing accommodation for overcrowded families the Borough Council in July approved in principle to the development of a site, including the Hewling Street clearance area and adjoining properties, for housing purposes by the erection of approximately 100 flats thereon.

In pursuance of the provisions of Part III of the Housing Act, 1925, a Compulsory Purchase Order was made for the acquisition of the required site and submitted to the Minister of Health for confirmation.

The properties included in this Order were as follows :—

Howard Road, Nos. 18, 20, 20a, 22, 24, 26, 34, 36, 38, 40, and
Derwent Gospel Hall.

Watson Street, No. 45.

Matthias Road, Nos. 66, 70, 72, 74, 76, 78, 80, 82, 84, 86, 88,
88a, and Methodist Chapel.

Hornsey Place, Nos. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10.

Area. Approximately .99 acre.

Total No. of Premises. 35 (25 dwelling-houses).
(8 dwelling-houses and shops).
(2 chapels).

No. of Adults Resident in Area. 144

No. of Children Resident in Area. 31

ACQUISITION OF INDIVIDUAL HOUSES.

By reason of the powers conferred by the Housing Act, 1925, as amended by the Act of 1935, to acquire individual houses and to alter, enlarge, repair or improve any such houses for the purpose of providing housing accommodation for the working classes, the Borough Council agreed in principle to the acquisition of individual houses for the purpose of rehousing over-

crowded families, being of the opinion that this would appear to be an eminently suitable method of providing accommodation for large families.

In September the Council made Compulsory Purchase Orders for the acquisition of four houses in Grayling Road which was submitted to the Minister of Health for confirmation, and in October similar action was taken in respect of four houses in Belgrade Road.

HOUSING ACT, 1935—ABATEMENT AND PREVENTION OF OVERCROWDING.

In May the Council decided to make application to the Minister of Health for the fixing of the 1st January, 1937, as the "appointed day" under sections 3, 4, 8 and 68 of the Housing Act, 1935, in relation to this Borough. This application was duly granted and the Minister of Health by an Order dated the 26th June, 1936, fixed the 1st January, 1937, as the "appointed day" under the sections above mentioned, and the 1st July, 1936, as the "appointed day" under section 6.

Overcrowding thus constituted an offence in this Borough after the 1st January, 1937, and under section 6 (2) of the Act it is the duty of the Council, upon the application of the landlord or of the occupier of a dwelling-house, to inform the applicant, in writing, of the number of persons constituting the permitted number in relation to that house.

To do this measurements had to be available in respect of a total of 5,889 houses in the Borough prior to the 1st January, 1937. Of these houses 1,252 were dealt with during the initial survey of overcrowding and 4,637 houses had still to be measured. In order to carry out these duties authority was given for a staff of five temporary Survey Assistants to be engaged, and the necessary work was completed by 24th December.

The following summary of Housing Statistics is included in this report on the instructions of the Ministry of Health :—

HOUSING STATISTICS

FOR THE YEAR 1936

1.—INSPECTION OF DWELLING-HOUSES DURING THE YEAR :—

- | | | | |
|---------|---|--------|-------|
| (1) (a) | Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) | ... .. | 1,768 |
| (b) | Number of Inspections made for the purpose | ... | 5,602 |

(2)	(a)	Number of dwelling-houses (included under Sub-head (1) above), which were inspected and recorded under the Housing Consolidated Regulations, 1925	150
	(b)	Number of Inspections made for the purpose	859
(3)		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	0
(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	752

2.—REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	704
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3.—ACTION UNDER STATUTORY POWERS DURING THE YEAR :—

A. PROCEEDINGS UNDER SECTIONS 17, 18 AND 23 OF THE HOUSING ACT, 1930 :—

(1)	Number of dwelling-houses in respect of which notices were served requiring repairs...	0
(2)	Number of dwelling-houses which were rendered fit after service of formal notices :—	
	(a) By owners	0
	(b) By Local Authority in default of owners	0

B. PROCEEDINGS UNDER PUBLIC HEALTH ACTS :—

(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	48
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices :—	
	(a) By owners	48
	(b) By Local Authority in default of owners	0

C. PROCEEDINGS UNDER SECTIONS 19 AND 21 OF THE HOUSING ACT, 1930 :—

(1)	Number of dwelling-houses in respect of which Demolition Orders were made	0
(2)	Number of dwelling-houses demolished in pursuance of Demolition Orders	1

D. PROCEEDINGS UNDER SECTION 20 OF THE HOUSING ACT, 1930 :—

(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	0
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	0

4. HOUSING ACT, 1935—OVERCROWDING :—

(a)	(i)	Number of dwellings overcrowded at the end of the year	316
	(ii)	Number of families dwelling therein	356
	(iii)	Number of persons dwelling therein	2,006
(b)		Number of new cases of overcrowding reported during the year	14
(c)	(i)	Number of cases of overcrowding relieved during the year	120
	(ii)	Number of persons concerned in such cases	692
(d)		Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	0
(e)		Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report	Nil

LONDON COUNTY COUNCIL HOUSING ESTATES.—The following is a statement of the transfer of families in this Borough to accommodation on the London County Council Housing Estates :—

Number of Applicants accepted by the L.C.C. for Becontree Estate	18
---	----

Number of Applicants accepted by the L.C.C. for White Hart Lane Estate	4
Number of Applicants accepted by the L.C.C. for St. Helier, Morden, Estate	7
Number of Applicants accepted by the L.C.C. for Boundary Street Estate	4
Number of Applicants accepted by the L.C.C. for Watling Estate	2
	—
Total number of families transferred ...	35
	—

On notice from the County Council that a family living in overcrowded conditions has moved to a house on their estates, measures are taken to prevent the vacated premises again becoming overcrowded. In no instance has any re-overcrowding of vacated premises taken place.

INCREASE OF RENT AND MORTGAGE INTEREST RESTRICTION ACTS

Under the provisions of these Acts increases of rent are permitted to be made by landlords, and tenants who consider that their houses are not in all respects reasonably fit for human habitation may apply to the Local Authority for a certificate to this effect, which will enable them to suspend payment of the increase of rent until the necessary work to put the premises into a good state of repair has been completed.

During the year 6 applications were made to the Council for Rent Restrictions Act Certificates and 2 for Rescinding Certificates and in every instance the appropriate certificates were granted.

HOUSE-TO-HOUSE INSPECTION. — Special house-to-house inspection of certain streets in the Borough was carried out during the year.

A total of 150 houses were inspected and 76 notices were served and complied with. The total number of re-inspections made was 709.

V. INSPECTION AND SUPERVISION OF FOOD

(a) MILK SUPPLY

REGISTRATION.—In accordance with Statutory requirements, a Register is kept of persons carrying on the trade of dairymen or purveyors of milk and no person is permitted to carry on this trade in the Borough unless he is registered.

By Section 2 of the Milk and Dairies (Amendment) Act, 1922, the Council is empowered to refuse to enter the name of any person in the Register, or to remove the name of any person from the Register, if it is shown to the satisfaction of the Council that the public health is, or is likely to be, endangered by any act or default of such person in relation to the quality, storage or distribution of milk.

MILK PREMISES AND PURVEYORS OF MILK :—

Number of premises where milk is sold bottled and loose	25
Number of purveyors registered (resident in the Borough) selling intact bottles	77
Number of purveyors (wholesale and retail) operating in the Borough from premises registered elsewhere	62
Total	164

The Sanitary Inspectors made 221 visits to dairy premises during the year, and any sanitary defects found were satisfactorily remedied.

MILK (SPECIAL DESIGNATIONS) ORDER, 1936.—This new Order, which came into operation on the 1st June, 1936, revokes the Milk (Special Designations) Orders of 1923 and 1934, and prescribes the following special designations for milk, viz. :—

TUBERCULIN TESTED.—The conditions for this grade are substantially the same as those at present prescribed for Grade "A" (Tuberculin Tested) milk. It is milk from cows which have passed a veterinary examination and a tuberculin test, and it may be bottled on the farm or elsewhere. If raw, the milk must, until the 31st December, 1936, be so produced that a sample taken at any time

before delivery to the customer shall not contain more than 200,000 bacteria per millilitre ; after that date it must satisfy a prescribed methylene blue reduction test for cleanliness. At all dates it must contain no coliform bacillus in one hundredth of a millilitre. If pasteurised, it must be described as " Tuberculin Tested Milk (Pasteurised) " and must not contain more than 30,000 bacteria per millilitre. If it is bottled on the farm, the word " Certified " may be added to its description.

ACCREDITED.—The conditions for this grade are similar to those prescribed in the Order of 1923, for Grade " A " milk. It is raw milk from cows which have passed a veterinary examination ; it may be bottled on the farm or elsewhere. It must satisfy the same bacteriological tests as are prescribed for raw Tuberculin Tested milk.

PASTEURISED.—This designation is applicable both where " Accredited " milk and where ungraded milk is pasteurised in accordance with the requirements of the Order. The conditions are substantially the same as in the Order of 1923, except that further conditions are imposed with regard to thermometers and temperature records.

The existing designations " Certified," " Grade ' A ' (Tuberculin Tested) " and " Grade ' A ' " are abolished, and the use of any such designation by a person not holding a licence is prohibited. Provision was, however, made by Article II (2) of the Order, whereby compliance with the conditions in the Orders of 1923 and 1934, as to the wording to be placed on caps, bottles and other vessels containing milk would, until the 31st December, 1936, be regarded as satisfying the corresponding provisions in the new Order.

Licences in force which were granted before the 1st June, 1936, under the Orders of 1923 and 1934, continued in operation ; a licence to sell milk as " Certified " or " Grade ' A ' (Tuberculin Tested)" being deemed to be a licence to use the designation " Tuberculin Tested," and a licence to sell milk as " Grade ' A ' " being deemed a licence to use the designation " Accredited."

It is worthy of note that " Tuberculin Tested Milk (Pasteurised) " is not a special designation in respect of which a separate licence can be granted. A dealer selling milk under this description must possess the appropriate licences in respect of both the designations " Tuberculin Tested " and " Pasteurised."

Under the Order, the Council may grant licences to distributors, such licences to be valid only for a period ending on the 31st December in each year.

Licences and Supplementary Licences were granted in 1936 as follows :—

Certified.

Express Dairy Co., Ltd.	...	...	2 (Supplemental) Licences.
Stapleton & Sons, Ltd.	...	...	1 do.
United Dairies (London), Ltd.	...	3	do.

Grade 'A' (Tuberculin Tested).

Dansies, A. E.	...	...	...	1 Licence.
McLeod, N. C.	...	...	...	1 do.
Shaw, A. M.	...	...	...	1 do.
Stephens Bros.	...	...	...	1 do.
Express Dairy Co., Ltd.	...	...	2 (Supplemental) Licences.	
Huckett's Dairy	...	...	1	do.
London Co-operative Society, Ltd.	...	...	1	do.
Protheroe, T.	...	...	1	do.
Stapleton & Sons, Ltd.	...	...	1	do.
United Dairies (London), Ltd.	...	3		do.

Grade 'A' (Pasteurised.)

United Dairies (London), Ltd.	...	3 (Supplemental) Licences.
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Pasteuriser.

Akam, J., & Sons, Ltd.	...	...	1 Licence.
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Pasteurised.

Collier, A. J.	...	...	...	1 Licence.
Morris, J. R.	...	...	...	1 do.
Platt, H. J.	...	...	...	1 do.
Stephens Bros.	...	...	...	1 do.
United Dairies (London), Ltd.	...	3		do.
Walters, Lily	...	...	...	1 do.

Express Dairy Co., Ltd.	...	...	3 (Supplemental) Licences.
Huckett's Dairy	...	...	1 do.
Lewis, D., & Son	...	...	1 do.
London Co-operative Society, Ltd.		1	do.
Nestlé & Anglo-Swiss Condensed Milk Co., Ltd.	...	...	1 do.
Richards, R.	...	...	1 do.
Shinebaum, J.	...	...	1 do.
Stapleton & Sons, Ltd.	...	...	1 do.
United Dairies (London), Ltd.	...	3	do.

During the year 12 samples of "Certified" milk were taken and submitted for bacteriological examination. All these samples were found to comply with the standards prescribed in the Milk (Special Designations) Order.

(b) MEAT AND OTHER FOODS

SLAUGHTERHOUSES.—There are three private registered premises in the Borough. Applications for renewal of licences were granted by the Borough Council in October.

Slaughtering takes place at these premises very infrequently, as practically all meat sold in the Borough is brought from Smithfield.

SLAUGHTER OF ANIMALS ACT, 1933.—Licences to slaughter animals in this Borough, valid for a period of 12 months, were granted to three slaughtermen.

THE PUBLIC HEALTH (MEAT) REGULATIONS, 1924.—Under these regulations, which came into operation on the 1st April, 1925, before slaughtering takes place, notice must first be given to the Council of intention to do so. On receipt of such information an inspector attends during the slaughtering and inspects carcasses.

The regulations also prescribe for the protection of meat from contamination by dust and flies.

There are 33 butchers' shops in the Borough and these premises and the commodities sold are kept under regular observation by the Sanitary Inspectors.

REGISTRATION OF FOOD PREMISES.

Under Section 5 of London County Council (General Powers) Act, 1932, any premises used for the sale or manufacture or storage of ice cream or for the preparation of sausages, potted or preserved meat or fish intended for sale must be registered by the owner or occupier with the Metropolitan Borough Council. This power confers upon the Borough Council the right to refuse registration or to cancel registration where premises are unsuitable for the purpose for which they are registered.

During the year 71 food premises were registered and kept under observation.

BAKEHOUSES.—There are 26 bakehouses in the Borough, and 19 of these are underground. These premises were all regularly inspected by the Sanitary Staff.

ICE CREAM PREMISES.—There are 73 premises in the Borough where the manufacture or sale of this commodity is carried on. These premises were inspected on 97 occasions.

FISH SHOPS.—There are 12 fishmongers, and 12 premises are occupied and used for the cooking of fish and chipped potatoes. These premises were frequently visited and the cooking was found to be carried on satisfactorily and without nuisance.

FOOD POISONING.—Eight cases of illness suspected to be caused by food poisoning were notified during the year. Investigations revealed that tinned salmon appeared to have caused the indisposition in one case. In 3 cases belonging to the same family the evidence available pointed to fish as being the source of infection. In 4 other cases (members of one family) fish was also suspected of being the cause of illness. In each instance the symptoms were mild and quickly disappeared with simple treatment.

It was not possible to obtain specimens of the suspected foods for bacteriological examination.

FOOD AND DRUGS (ADULTERATION) ACT, 1928

180 samples were purchased under the provisions of the Acts and submitted to the Public Analyst for analysis, of which 176 were certified to be genuine and 4 adulterated, the adulteration, thus being equivalent to 2.2% of the samples taken.

Of the total number of samples purchased 72 were milk, of which 3 were certified to be adulterated.

ANALYSES PERFORMED DURING THE YEAR 1936

Articles submitted for Analysis	Formal Samples.		Informal Samples.	
	No. Taken	No. Adultd	No. Taken	No. Adultd.
Amm. Tincture of Quinine ...	—	—	1	—
Aspirin Tablets ...	—	—	3	—
Beer ...	1	—	—	—
Bi-carbonate of Soda ...	—	—	2	—
Biscuits ...	1	—	—	—
Blackcurrant Preserve ...	—	—	1	—
Borax and Honey ...	—	—	1	—
Boric Ointment ...	—	—	1	—
Butter ...	16	—	—	—
Cake, Slab ...	1	—	—	—
Camphorated Oil ...	—	—	2	—
Cheese ...	4	—	—	—
Chocolates ...	2	—	—	—
Christmas Pudding ...	—	—	1	—
Cocoa ...	1	—	1	—
Coconut, Desiccated ...	1	—	—	—
Coffee ...	2	—	1	—
Cream ...	1	—	—	—
„ Tinned ...	—	—	2	—
Dripping ...	3	—	—	—
Flour ...	4	—	—	—
Fruit, Tinned ...	—	—	1	—
Fruits, Dried ...	—	—	1	—
Jam, Strawberry ...	—	—	1	—
„ Blackcurrant ...	—	—	1	—
Lard ...	1	—	—	—
Liquid Paraffin ...	1	—	1	—
Margarine ...	9	—	—	—
Milk ...	72	3	—	—
Mincemeat ...	1	—	1	—
Olive Oil ...	—	—	5	—
Paste, Salmon & Shrimp ...	—	—	1	—
„ Bloater ...	—	—	1	—
Salmon, Red ...	—	—	1	—
„ Pink ...	—	—	2	—
Sal Volatile, Spirit of ...	—	—	1	—
Sardines ...	—	—	3	—
Sausages ...	3	—	—	—
„ Pork ...	2	—	—	—
Seidlitz Powder ...	—	—	1	—
Sponge Cakes ...	1	—	—	—
Steak and Kidney Pie ...	1	—	—	—
Sugar, Granulated ...	2	—	—	—
„ Yellow Crystals ...	1	—	—	—
Sulphur Ointment ...	—	—	1	—
Sweets ...	—	—	1	—
Syrup of Figs ...	—	—	1	—
Tea ...	2	—	—	—
Tincture of Iodine ...	—	—	2	—
Vaseline ...	—	—	1	—
Vinegar ...	2	1	1	—
Whisky ...	1	—	—	—
Totals ...	136	4	44	—

Details are given below with regard to the adulterated samples and the action taken by the Council in respect thereof :—

Sample No.	Description	Nature and Extent of Adulteration	Action Taken
24	Milk	4% Extraneous water	See subsequent sample No. 27
27	Milk	2% Extraneous water	Fined £1 and £2 2s. 0d. costs
136	Milk	2·3% Extraneous water	Warning letter to vendor
142	Vinegar	19% Deficient in acetic acid	Subsequent formal sample found genuine

THE PUBLIC HEALTH (CONDENSED MILK) REGULATIONS, 1923-1927, AND PUBLIC HEALTH (DRIED MILK) REGULATIONS, 1923-1927.—No samples of condensed or dried milk were taken during the year.

Only the well-known brands of dried milk were found to be on sale, and in all cases the declaratory notices complied with the Regulations.

THE PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD) REGULATIONS.—One contravention of the regulations had to be reported during the year. This applied to a sample of sausages which contained a permitted amount of preservative, but had no declaratory notice attached. Proceedings were taken against the vendor and he was fined 10s. 6d. and £2 2s. costs.

ARTIFICIAL CREAM ACT, 1929.—No application for registration of premises used for the manufacture or sale of artificial cream has been made, nor has any contravention of the Act been discovered.

AGRICULTURAL PRODUCE (GRADING AND MARKING) ACT, 1928

Under the above Act various regulations have been made by the Minister of Agriculture and Fisheries in regard to the use of grade designations applied by means of a national mark. This National Mark Scheme is entirely voluntary and its adoption implies the maintenance of a definite standard of quality as provided for in the regulations.

The administration of these orders entails the supervision of food with a view to ensuring that the necessary requirements as to labelling are complied with and that the National Mark is not applied to foods that are below the standards prescribed.

During the year regulations were in force applicable to :—

Apples	Dressed Poultry
Asparagus	Eggs
Beef	Glasshouse-grown Tomatoes
Black Currants	and Cucumbers
Bottled Fruits	Gooseberries, dessert
Bottled Vegetables	Green Peas
Broccoli	Honey
Brussels Sprouts	Jam
Bunched Carrots	Loganberries
Cabbage Lettuce	Malt Extract and Malt Flour
Canned Fruits, peas and beans	Pears
Canned Vegetables	Plums
Cauliflower	Potatoes
Celery	Raspberries
Cherries	Red Currants
Cheshire Cheese	Strawberries
Cider	Wheat Flour

MERCHANDISE MARKS ACT, 1926

The main provision conferred by this Act is that goods imported into this country for which Orders in Council have been made must on exposure for sale bear an indication of the country of origin.

During the year Orders were in force relating to :—

Apples, Fresh	Meat (Chilled beef, frozen mutton, frozen lamb, frozen
Bacon and Ham	pork, boneless beef, boneless
Butter	veal, salted beef, salted pork
Currants, Sultanas and Raisins	and edible offals)
Eggs, in shell and dried	Oat Products
Honey	Poultry, Imported dead
Malt Products	Rose trees
	Salmon and Sea Trout
	Tomatoes, Raw

The Sanitary Inspectors have been authorised to act as the responsible officers for carrying out the purposes of these Acts, during the course of their customary food inspections.

DISSEMINATION OF KNOWLEDGE ON THE SUBJECT OF NUTRITION.

—The health talks given by the Health Visitors at the Welfare Centres include frequent references to the important subject of diet, and leaflets are issued which afford advice on the diet of mother and child.

VI. PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

INFECTIOUS DISEASES GENERALLY

DISEASES COMPULSORILY NOTIFIABLE IN THE BOROUGH

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

Table IV shows the total number of cases of infectious diseases (excluding Tuberculosis) notified during the year, the distribution by age-groups and the number of cases admitted to hospitals.

NOTIFICATIONS.—The total number of cases of infectious diseases, excluding Tuberculosis, notified during the year was 284, as compared with 228 for the year 1935.

TABLE IV. NOTIFIABLE DISEASES (other than Tuberculosis) DURING THE YEAR 1936

NOTIFIABLE DISEASE	At all Ages	Age Groups													Admitted to Hospital
		Under 1	1— 2	2— 3	3— 4	4— 5	5— 10	10— 15	15— 20	20— 35	35— 45	45— 65	65 & Over		
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Scarlet Fever	132	—	—	6	6	19	43	31	9	16	2	—	—	124	
Diphtheria	76	—	4	4	7	9	32	7	4	9	—	—	—	76	
Enteric Fever	2	—	—	—	—	—	—	1	—	1	—	—	—	2	
Puerperal Fever	5	—	—	—	—	—	—	—	—	2	2	1	—	4	
Puerperal Pyrexia	8	—	—	—	—	—	—	—	—	7	1	—	—	7	
Pneumonia, Acute Primary	19	—	—	—	—	1	3	—	2	2	4	4	3	14	
Pneumonia, Acute Influenzal	9	—	—	—	—	—	—	—	1	1	3	3	1	2	
Ophthalmia Neonatorum	5	5	—	—	—	—	—	—	—	—	—	—	—	5	
Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Erysipelas	19	—	—	—	—	—	—	2	2	4	3	6	2	15	
Food Poisoning	8	—	—	—	—	—	—	—	2	6	—	—	—	—	
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Dysentery	1	1	—	—	—	—	—	—	—	—	—	—	—	1	
Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Continued and Relapsing Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Meningococcal Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
TOTAL	284	6	4	10	13	29	78	41	20	48	15	14	6	250	

SMALLPOX.—No case of smallpox was reported in London during 1936.

The Public Health (Smallpox Prevention) Regulations, 1917.—These regulations empower Medical Officers of Health to perform vaccination or revaccination of any persons who are willing to be vaccinated and who have been in immediate contact with individuals suffering from Smallpox. During the year there arose no occasion to perform any vaccinations under the regulations.

Vaccination.—The duties under the Vaccination Acts and the Vaccination Order, 1930, were transferred to the Borough Council on the 1st April, 1930, and were undertaken by the Public Health Department.

The Return for 1935 shows that 306 births were registered in the Borough, of which 114, or 37·3%, were vaccinated, and 132, or 43·1%, were exempted from vaccination by reason of Statutory Declarations of objection to vaccination.

At the close of 1936, 46 cases were outstanding; 21 of these had removed to other districts, the Vaccination Officers of which had been duly apprised; and 9 removed to places unknown, leaving 16 cases, or 5·2%, unaccounted for.

SCARLET FEVER.—During the year 132 cases of this disease were notified as compared with 85 the previous year. The disease continued to be of a mild type generally, and there were no fatal cases.

The 8 cases nursed at home were kept under supervision in order to ensure that the necessary precautions for the prevention of the spread of the disease were being maintained.

Return Cases.—This definition is applied to cases of Scarlet Fever which occur in a house within 28 days of the discharge from hospital of a previous case.

VACCINATION RETURNS.

RETURN FOR 1935.

Registration Sub-Districts comprised in the Vaccination Officer's District.	Number of Births returned in the " Birth List Sheets " as regis- tered from 1st January to 31st December 1935.	Number of these Births duly entered by 31st January, 1937, in Columns I., II., IV. and V. of the " Vaccination Register " (Birth List Sheets), viz.—					Number of these Births which on 31st January, 1937, remained unentered in the " Vaccination Register " on account (as shown by Report Book) of			Number of these Births remaining on 31st January, 1937, neither duly entered in the " Vaccination Register " (columns 3, 4, 5, 6 and 7 of this Return) nor tempo- rarily accounted for in the "Report Book" (columns 8, 9 and 10 of this Return). (11)	* Number of Certificates of Successful Primary Vaccina- tion of children under 14 years received during the calendar year 1936.	Number of Statutory Declarations of Con- scientious Objection actually received by the Vaccination Officer irres- pective of the dates of birth of the children to which they relate during the calendar year 1936.
		Col. I. Success- fully Vac- cinated.	Column II.		Col. IV. Number in respect of whom Certifi- cates of Con- scientious Objection have been received	Col. V. Died, Unvac- cinated.	Post- ponement by Medical Certifi- cate.	Removal to Districts the Vaccina- tion Officers of which have been duly apprised.	Removal to Places unknown or which cannot be reached and Cases not hav- ing been found.			
			Insus- ceptible of Vac- cination.	Had Small- pox.								
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
Stoke Newington	306	114	1	—	132	13	—	21	9	16	369	126

*Copies of 255 Certificates were sent to other Vaccination Officers.

Five return cases occurred during the year and the discharged patients were examined but showed no signs of being infectious.

The Dick test and active immunisation have not yet been employed in the Borough.

DIPHTHERIA.—During the year 76 cases of Diphtheria were notified with 3 deaths as compared with 71 notifications and 1 death the previous year.

DIPHTHERIA IMMUNISATION.—This work is carried out by the Medical Officer of Health once a week at the Barton House Child Welfare Centre. In every instance the consent of the parent or guardian is obtained in writing before the treatment is commenced.

During the year 99 children completed the course of immunising injections and 59 children were re-Schick tested at intervals of three to four months after the protective inoculations. Of these, 54 were found to be definitely negative and 5 to be still slightly positive. These positive reactors were given a further injection to ensure adequate protection.

The number of children protected is comparatively small but dissemination of information on the subject of diphtheria protection was continued by means of leaflets drawing parents' attention to the danger of the disease and to the facilities for immunisation available at the Council's Welfare Centres.

Diphtheria Anti-toxin.—A supply of Anti-toxin is kept in the Public Health Department for sale to local medical practitioners in urgent cases.

During the year 1 tube of 8,000 units was sold to a medical practitioner.

ENTERIC FEVER.—2 cases of Typhoid Fever were notified, and confirmed bacteriologically. The history of each case was investigated, but it was found impossible to trace the sources of infection.

PUERPERAL FEVER.—5 cases were notified as compared with 6 notifications the previous year. Four cases received hospital treatment and one was nursed at home.

PUERPERAL PYREXIA.—8 cases were notified as compared with 14 the previous year. 7 cases received hospital treatment.

PNEUMONIA AND INFLUENZAL PNEUMONIA.—Acute Primary Pneumonia and Influenzal Pneumonia are notifiable diseases under the Public Health (Infectious Diseases) London Regulations, 1927.

During 1936 19 notifications were received of Acute Primary Pneumonia (22 the previous year), and 9 notifications of Influenzal Pneumonia as compared with 4 the previous year.

There were 30 deaths from Pneumonia (all forms) during 1936 as compared with 44 in 1935.

OPHTHALMIA NEONATORUM.—Five cases of this disease were notified during the year; these were mild cases and responded readily to treatment, with no resulting impairment of vision.

The particulars of the cases notified, as required by the Ministry of Health, are set out in the following Table :—

Notified	Cases Treated		Vision unimpaired	Vision impaired	Total Blindness	Deaths
	At Home	In Hospital				
5 ...	—	5	5	—	—	—

ENCEPHALITIS LETHARGICA.—No notification of this disease was received during the year.

POLIOMYELITIS.—No notification of this disease was received during the year.

ERYSIPELAS.—19 cases of this disease were notified during the year as compared with 17 in 1935.

MENINGOCOCCAL MENINGITIS.—No case was notified during the year.

MEASLES.—Epidemics of Measles occur every two years in London, and as the last epidemic took place in 1934, the increase in prevalence of this disease which had been expected occurred during the first six months of the year.

The scheme for the control of Measles, by arrangement with the London County Council, was continued during the epidemic period. The scheme of control depends for its success in the close co-operation between the school organisation and the local public health staff in securing the earliest possible information of cases, educating the parents to realise that Measles is a dangerous disease by means of advice leaflets, and by prompt removal to hospital of those children suffering from complications and those living in overcrowded and insanitary conditions.

Measles is not at present notifiable in this Borough, and information as to cases depends on reports from the schools, parents, health visitors and sanitary inspectors.

The Health Visitors follow up Measles cases in order to ascertain if adequate medical and nursing provision is made and to arrange for nursing assistance or removal to hospital, in accordance with the scheme providing additional beds for cases of Measles in isolation hospitals.

The number of cases of Measles reported to the Public Health Department during the year was 403, of whom 111 were removed to hospitals for treatment. There were two deaths from this disease as compared with no deaths for the year 1935 and 4 deaths during the epidemic of the year 1934.

WHOOPING COUGH.—This disease is not notifiable in the Borough and information as to its prevalence comes to the knowledge of the Department through the same sources as Measles. Visiting of cases is carried out by the Health Visitors. During the year 75 cases of the disease were noted and 20 cases were removed from their homes for hospital treatment. There were two deaths from this disease in 1936.

BACTERIOLOGICAL EXAMINATIONS.—Specimens taken by medical practitioners are forwarded to the laboratories of the Royal Institute of Public Health and Camberwell Research Laboratories.

The following table shows the number and the result of the specimens submitted during the year :—

	Positive	Negative	Total
Phthisis	9	74	83
Haemolytic Streptococci ...	1	4	5
Diphtheria	36	311	347
Paratyphoid	—	5	5
Total	46	394	440

ISOLATION.—The Public Health (London) Act, 1891, Section 60, Sub-Section 4, imposes on the Sanitary Authority the duty of making provision for the temporary housing of persons who are compelled to leave their dwellings for the purpose of enabling such dwellings to be disinfected by the Sanitary Authority. The accommodation provided consists of two small dwellings of two rooms each situated near the Town Hall furnished and fitted for occupation at short notice. There was no occasion to use the shelter during the year.

Disinfection of Premises.—The following number of rooms have been disinfected :—

After notifiable Diseases	227
After Pulmonary Tuberculosis	17
After Measles and Chicken Pox	43
After deaths from Cancer, etc.	38
After Vermin	87
After Scabies	51
	—
	463
	—

Disinfection of Articles removed from premises after infectious diseases has been carried out in the Washington-Lyon Type Steam Disinfector.

A total of 12,393 textile articles was dealt with at the disinfecting station.

Two hundred and fifty-one books from the Public Library were fumigated with formalin vapour. Bedding destroyed at request of owners—11.

TUBERCULOSIS

There were notified 60 cases of pulmonary, and 7 cases of non-pulmonary Tuberculosis, with 38 deaths as set forth by ages in the accompanying table. In 1935 there were notified 54 pulmonary cases and 10 non-pulmonary cases.

During 1936 there was thus a death rate of 0·70 from Pulmonary Tuberculosis and 0·75 for all forms of Tuberculosis per 1,000 of population living, as compared with 0·68 and 0·78 respectively for the year 1935.

TUBERCULOSIS : NEW CASES AND DEATHS DURING 1936

Age Periods			New Cases				Deaths			
			Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
			M.	F.	M.	F.	M.	F.	M.	F.
0-1	...	...	—	—	—	—	—	—	—	—
1-5	...	...	—	—	—	—	—	—	—	—
5-15	...	...	2	1	3	—	—	—	—	—
15-25	...	...	5	13	1	—	3	3	1	—
25-35	...	...	4	7	2	1	5	1	2	—
35-45	...	...	6	3	—	—	6	1	—	—
45-55	...	...	9	3	—	—	3	4	—	—
55-65	...	...	5	—	—	—	4	3	—	—
65 and upwards	...	...	2	—	—	—	2	—	—	—
Totals	...	...	33	27	6	1	23	12	3	—

TOTAL NUMBER OF TUBERCULOUS PERSONS LIVING IN THE BOROUGH.—A live register continually changing from additional notifications, transfers into and out of the district and deaths is maintained by the Medical Officer of Health. The known tuberculous population decreased from 304 to 280 during the year.

	Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female
No. of cases on Register at beginning of 1936 ...	133	100	37	34
No. of cases on Register at end of 1936	125	96	32	27

Out of the total number of 38 deaths from Tuberculosis, 7 (or 18·4%) were of cases which were unnotified previous to death, as compared with 17·9% of unnotified cases the previous year.

If from the death returns it is noted that there has been failure to notify, an enquiry is sent to the practitioner as to the reason for non-notification.

In the majority of cases the practitioner was under the impression that the case had been previously notified.

During the year there was no evidence of any wilful neglect of the regulations on the part of the certifying practitioners.

TUBERCULOSIS DISPENSARY

The following report on the work of the Dispensary, so far as it concerns Stoke Newington patients, has been furnished by Dr. F. W. Hamilton, the Clinical Tuberculosis Officer :—

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

LADIES AND GENTLEMEN,

I beg to present the annual report for the year 1936, together with statistical tables which will be found on pages 77-79. There are certain points arising out of these tables to which I would like to draw attention.

(1) Firstly it will be noticed that in Stoke Newington the total number of cases presenting themselves for examination for the first time and found to be suffering from tuberculosis was 66, but of these 23, or approximately one-third, were persons who had contracted the disease elsewhere but had moved into this area—the so-called “Transfer cases.” Doubtless this high proportion is due to a large extent to the additional housing accommodation provided in Hackney and Stoke Newington, but it has a direct bearing on the work of the Dispensary. It is found as a matter of experience that those who have been under treatment elsewhere are more hard to supervise than those who have come under our observation from the start, and this necessitates more strenuous efforts on the part of the Tuberculosis Visitors and Tuberculosis Officer if we are to maintain efficient touch with them. In this connection it is interesting to notice that in the part of Hackney for which we are responsible, in 1920 there were 236 Primary Notifications, and only 114 in 1936. Were it not for the influx from outside, the number of cases in the area would have shown a greater decrease than it has done, even though it must be admitted that several newcomers have taken up their residence in private houses, and that their movements are not dependent on official housing schemes.

(2) While in all the other sections the figures have remained substantially the same, the number of contacts examined in Stoke Newington has decreased from 132 in 1935, to 81 in 1936. This is due to several reasons, partly to the fact that owing to the dwindling size of families there are fewer contacts needing examination; but also throughout the year it has been difficult in this Borough to keep in touch with the homes of tuberculous persons. In 1936, through illness and other causes, there were at different times four nurses responsible for tuberculosis visiting, while there were several periods when owing to the claims of other Public Health activities a nurse was only available in cases of urgency. This resulted in a serious lack of continuity of supervision, and while I realise that

under the prevailing conditions it has been inevitable, I am of opinion that unless it can be remedied in the future, the success of the work is bound to be affected. It is essential that one person should be in charge of the visiting of the homes, and that she should always be available except during her holiday or when she herself is ill, so that she can thoroughly familiarise herself with the needs and circumstances of the people on the register and arrange her work accordingly, and also carry out these follow-up visits which are necessary if the Dispensary is to continue to be the real centre for anti-tuberculosis efforts in the Borough.

(3) The number of new cases sent up for investigation by general practitioners is again high—89, and there is no doubt that the department has the good will of the local doctors.

(4) The number of sputum tests made was considerably above the average, namely, 319. These tests are all made in the Dispensary and they take up a considerable amount of time, but as an adjunct to clinical and X-ray findings they are of great value, and well repay the labour involved.

(5) The number of letters, reports, etc., sent out totalled 972. The brunt of this falls on the Secretary-dispenser, Miss E. M. Russell, but it constitutes only a small proportion of her work, much the greater part consisting of the keeping of records and the preparation of the complicated statistics required by the Ministry of Health. I have to thank her for the efficient and cheerful way in which she has carried out her duties, which are always arduous and not infrequently difficult and irritating.

The treatment of tuberculous persons may be divided roughly into domiciliary and residential. Those who are not in institutions for the most part receive their treatment from their panel doctors if they come under the National Health Insurance Act, or from private practitioners if they are able to afford the necessary fees. The remainder are seen at the Dispensary and provided with medicine, but all are under the supervision of the Tuberculosis Officer and are examined at regular intervals if they agree to attend, as the great majority do.

Residential treatment still has for its basis rest, fresh air and good food, but there are other ancillary methods which can only be used in special institutions adequately equipped and having a fully trained staff. These methods comprise mainly Artificial Pneumothorax and more definitely surgical procedures such as

phrenic evulsion, thoracoplasty, and others, the discussion of which would be too technical for inclusion in a report of this nature. The London County Council have surgical units for chest cases in certain of their general hospitals, and at all their large sanatoria consultants in this branch are available. Artificial pneumothorax is taking an increasingly prominent place, and I therefore wish to make some reference to it. It is a comparatively simple operation, carried out by the physician rather than the surgeon, and consists in the introduction of air into the pleural space, i.e., that space lying between the inner aspect of the chest wall and the outer surface of the lungs. By this means the diseased lung is collapsed and allowed to rest, the whole of the respiratory process devolving on the opposite and healthy lung. Once the lung has been collapsed it is necessary to give refills of air that vary with the special needs of each case, and in the spacing of which considerable experience and judgment are required on the part of the operator. As the collapse has generally to be maintained on an average for a period of about three years, it is obvious that this must be done for the most part in an out-patient department, since few people remain in an institution for longer than a year. The financial responsibility for continuance of Pneumothorax treatment falls on the Borough Councils and not on the L.C.C. once the patient has left hospital or sanatorium, and special clinics are maintained at the chest hospitals such as Victoria Park and Brompton, to which payment is made for this service. It may be said as a general rule that the success of Artificial Pneumothorax depends on the selection of the right case, those with comparatively localised trouble in one lung, which has not responded to the usual regime, affording examples of the maximum benefit to be derived from it. At the present time it can hardly be said to be justifiable to use it in every early case, while unfortunately in the majority of persons seen for the first time, the disease has progressed too far for it to be applied with reasonable hope of success, though there are necessarily intermediate cases in which it is felt right to give it a trial though the outlook is less promising. The mere fact that we have at our disposal a method of treatment with which we can intervene for the patient's benefit at any time when his disease is not too far advanced to render it useless, only emphasises the need for early diagnosis in order that more and more patients may be brought within the Tuberculosis Scheme while still in a curable condition. On the other hand, it must be realised that Artificial Pneumothorax is by no means universally applicable, and there will be numerous cases in the future, as there have been in the past, who will recover without it.

Tuberculosis of organs other than the lungs, e.g., bones and joints, glands, etc., is treated in London County Council Surgical Institutions. This type of disease tends to affect children more than adults, and the results obtained on the whole are very satisfactory. It is always desirable that such patients, when they leave hospital, should continue to be seen at intervals by the surgeons who have been responsible for them as in-patients, and After-care Clinics are now held at County Hall with this object. The reports made at these examinations are transmitted to the Tuberculosis Officer, who thus has the benefit of a surgical opinion in each case. This arrangement is, in my opinion, helpful for all concerned, and its special merits are that it ensures collaboration between Medical Superintendent and Tuberculosis Officer, increases the frequency and continuity of observation ; and brings to light at the earliest possible moment any evidence of relapse which might call for a further period in sanatorium.

I have again to report on the very favourable results achieved among children attending the L.C.C. Open-air School at Stormont House, Clapton. This school receives patients who are suffering from tuberculosis in a non-infectious stage, and Dr. H. Tyllford Howell, of the Victoria Park Hospital Dispensary, visits it every week. Not only are the present needs of the scholars adequately met, but special efforts are made to secure for them suitable work when they leave school, and the Headmaster has arranged successful reunions of old pupils, which have shown that almost without exception health is maintained, while prospects in life are by no means affected.

The after-care of persons who have left sanatorium and the endeavour to ease as far as possible the burden that falls on a family in which there is a tuberculous member, are within the particular province of the Tuberculosis Care Committee. On the whole this Committee, since it has no funds directly at its disposal, must perforce act in a co-ordinating capacity, and this it does by bringing the necessities of the patients to the notice of organisations which are able to render financial and other aid. The scope of the Public Assistance Scheme has been enlarged considerably, but we are still greatly dependent on the help received from the Invalid Children's Aid Association, the Charity Organisation, the British Red Cross Society, and the British Legion, to which every acknowledgment is due.

The Committee have been able to raise sufficient funds to maintain the Handicrafts Class in a flourishing condition, largely

owing to the energy of the Secretary, Miss K. H. Russell, who has organised sales of work of goods made, and has neglected no opportunity of making the activities of the class known locally, and thus of securing money without which it would have been impossible to carry on.

The close connection with the Metropolitan Hospital is a very valuable one for the Dispensary. Not only does it enable the Tuberculosis Officer to secure in-patient treatment for patients seriously ill with diseases other than tuberculosis, but it also provides him with the opportunity of obtaining an expert opinion from the consultants on the hospital staff in other cases that require special investigation. I must again emphasise the importance of X-Rays in this connection. Their use is now firmly established in diagnosis, and with the introduction of newer therapeutic measures such as Artificial Pneumothorax, X-Ray control is essential in order to assess progress, and to determine any modifications of treatment that may become necessary from time to time. Under these circumstances, the cases referred to Dr. Loughborough have increased during the year, and will probably increase still further.

In March, 1936, Mr. Frank Jennings took over the position of Secretary and House Governor to the Hospital, and has placed his services at our disposal in those matters which mutually concern the Dispensary and the Hospital, and I have to thank him for the cordial assistance which he has given. I have also to thank the Matron of the Hospital for her supervision of the nursing arrangements, which have again proved admirable.

The Dispensary is greatly indebted to the Chief Administrative Officers, Dr. G. H. Dart, Medical Officer of Health for Hackney, and Dr. F. D. Ross-Keyt, Medical Officer of Health for Stoke Newington, for the interest which they have continued to show in the Department.

In conclusion, I wish to express my gratitude to the Tuberculosis Dispensary Committee and to the representatives of the Boroughs of Hackney and Stoke Newington for their assistance and support during the year.

I am, Ladies and Gentlemen,

Your obedient servant,

F. W. HAMILTON,
Clinical Tuberculosis Officer.

TUBERCULOSIS DISPENSARY

STATISTICAL TABLES

1. New cases : Males, 124 ; Females, 123 ; Total, 247.

2. Sources through which cases came to the Dispensary :—

		<i>Total No.</i>	<i>No. found to be tuberculous</i>
Medical Officer of Health ...	...	43	10
Local practitioners ...	...	89	24
Transferred from other areas ...	...	23	23
City of London Hospital ...	...	1	1
Metropolitan Hospital ...	...	2	2
Contacts of notified cases ...	...	81	2
Other sources ...	...	8	4
		247	66

3. Diagnosis made in regard to new cases (excluding contacts).

		<i>Adults.</i>		<i>Children.</i>	
		<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>
Pulmonary tuberculosis ...	...	30	26	1	—
Non-pulmonary ...	...	3	2	1	1
Non-tuberculous ...	...	34	40	10	14
Doubtful ...	...	2	2	—	—
		69	70	12	15

4. Examination of home contacts :—

Pulmonary tuberculosis ...	...	...	...	2
Non-pulmonary ...	...	...	...	—
Non-tuberculous ...	...	...	...	79
Doubtful ...	...	...	...	—
				81

5. Bacteriological examinations :—

Tubercle bacilli present ...	...	...	...	65
„ „ absent ...	...	...	...	254
				319

6. Attendances, etc., at Dispensary :—

Total number of attendances	...	...	...	1,089
Systematic examinations at above	...	...	...	862
Number of letters written	...	...	...	972
Number of visits to patients at their homes	...	...	...	108
Number of patients sent to sanatoria, etc.	...	...	...	39

Number of attendances at :—

X-Ray department	...	...	...	74
Dental	..	...	...	3
Other	..	...	...	11

TUBERCULOSIS VISITING.—With reference to the remarks made by the Clinical Tuberculosis Officer in his Annual Report on the subject of tuberculosis visiting in Stoke Newington, the following report and recommendation having reference to the duties of the Tuberculosis Health Visitor was submitted for the consideration of the Public Health Committee :—

TUBERCULOSIS HEALTH VISITOR.—One of the Council's Health Visitors devotes half-time to visiting in the houses of tuberculous patients. The duties include the giving of advice, preparing reports on the home circumstances and general co-operation in the matter of attendances of patients and their contacts at the Tuberculosis Dispensary.

This officer has other duties in connection with Maternity and Child Welfare work which include the home visiting and supervision of foster-children in the capacity of child protection visitor (480 visits in 1936), the visiting of measles and whooping cough cases (156 visits in 1936), attendance at a welfare centre two afternoons each week to assist in the general work, and attendance at the diphtheria immunisation centre on one morning each week.

She has also to act as relief health visitor during the absence of any of the health visitors through illness or attendance at conferences, etc.

It has become evident that the various duties in connection with child welfare which have to be imposed on the Tuberculosis Health Visitor owing to pressure of work have disturbed the

continuity of progress as regards tuberculosis visiting and have resulted in fewer visits being paid in 1936 as compared with the previous year.

Tuberculosis Health Visiting.				1936	1935
Initial home visits	...	...	...	79	114
Following-up visits	...	...	...	949	1,297
Attendances at the Dispensary	...			40	40
				1,068	1,451

In my opinion the time has now approached when this very necessary public health activity should be given its due importance by extending the half-time appointment to a full time one.

In support of my opinion I have to submit the following observations of the Clinical Tuberculosis Officer (Dr. F. W. Hamilton) on this matter.

"The following points are worthy of notice in connection with the time allowed to the Tuberculosis Nurse for health visiting :—

"To secure the attendance of tuberculosis contacts persistent and repeated efforts are necessary on the part of the nurse. These efforts cannot be made unless she is allowed to proceed with her work without interruption and is not liable to be removed at any moment to do temporary work in another department.

"Stoke Newington is a particularly difficult Borough to work in as regards tuberculosis visiting for the following reasons :—

(a) Its relatively wide area compared with the population.

(b) The fact that the population varies greatly in prosperity, some persons being very poor and others too well off to wish for assistance under the Tuberculosis Scheme (at any rate at the commencement of their illness). Both such classes are throughout London found to be in the 'difficult' category.

(c) The fact that a considerable number of tuberculous persons from other areas are continually moving into this Borough. It is a matter of experience that such people, having as they think

shaken off the attentions of the Public Health Authorities by moving, are more difficult to persuade to submit to supervision, regular examination, etc., when they come into a new district. In Stoke Newington the services of a half-time health visitor have up to the present been considered sufficient to deal with the requirements of the Borough, whereas in Bethnal Green (population 99,910) and Shoreditch (population 88,400) two full-time tuberculosis health visitors are employed and in Fulham (population 143,600) there are three such officers.

“ In view of these facts and the increasing difficulty of the work in Stoke Newington, I submit that the tuberculosis health visitor does not have sufficient time for her duties. I may add that I have no complaint whatever to make against her as she is well liked by the patients and does all that is possible under the adverse circumstances.”

Recommendation.

In view of the statements concerning tuberculosis visiting made by the Clinical Tuberculosis Officer and myself we have to advise that the Public Health Committee make a recommendation to the Council that in view of the necessity for an increased number of home visits the present half-time appointment be made a full-time position in respect of tuberculosis duties only.

EXTRA NOURISHMENT.—The allowances of extra nourishment for necessitous cases cost £115 15s. 1d. during the year.

THE PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.—No action was necessary during the year under these Regulations, which provide that :—

No person who is aware that he is suffering from Tuberculosis of the respiratory tract should enter upon any employment or occupation in connection with a dairy which would involve the milking of cows, the treatment of milk or the handling of vessels used for containing milk, and if a Local Authority are satisfied that a person residing in their district who is engaged in any such occupation is suffering from respiratory Tuberculosis and is in an infectious state, they may require such person to discontinue his employment.

COMPULSORY REMOVAL OF TUBERCULOUS CASES TO HOSPITAL.—PUBLIC HEALTH ACT, 1925 (Sec. 62).—No action required in 1936.

VII. MATERNITY AND CHILD WELFARE.

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

(a) The visiting of expectant and nursing mothers and babies by the Council's staff of Health Visitors, who work (a) from the Town Hall and (b) from the Welfare Centres.

(b) The provision and maintenance of 2 Maternity and Child Welfare Centres.

(c) The provision of a dental clinic for mothers and young children.

(d) The supply of milk free or at a reduced price, for necessitous mothers (nursing or expectant) and young children.

(e) The provision of convalescent home treatment for mothers and young children by mutual arrangement with various charity organisations.

(f) The provision of consultations with obstetric specialists in connection with any abnormality of pregnancy or child birth.

(g) The provision of a clinic for diphtheria immunisation.

(h) Provision of Home Helps in maternity cases.

(i) An arrangement with the Stoke Newington School Treatment Centre Committee for the treatment of minor ailments in young children.

(j) Instruction to expectant and nursing mothers.

(k) Supervision of foster-mothers and the children in their charge.

HOME VISITING.—The following statement gives an outline of the very important work carried out by the Health Visitors during the year :—

VISITS PAID BY THE THREE HEALTH VISITORS :—

To expectant mothers :—

(1) First Visits : 310	(2) Total Visits	...	..	683
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To infants under 1 :—

(1) First Visits : 772	(2) Total Visits	...	...	2,412
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To children 1-5 :—

(1) First Visits : 221	(2) Total Visits	...	...	3,981
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Thus a total of 7,076 visits has to be recorded for the year 1936 as compared with 6,607 visits the previous year, and is the highest figure yet attained in any year. This figure is a most satisfactory one and when considered in conjunction with the total figure for attendances at the centres which follows it will be seen that an all round increase in the work is being effected. These gratifying results are mainly due to the energy and efficiency of the staff of Health Visitors.

ATTENDANCES AT THE INFANT WELFARE SESSIONS.—During the year there has been a satisfactory increase in the number and regularity of attendances. The total of 17,823 attendances of children under five compares very favourably with that of the previous year (16,675), and is the highest figure of attendances that has yet been recorded in any one year.

As required by the Notification of Births Act, 1907, the Medical Officer of Health must be notified of Births within 36 hours after the birth has taken place. The information thus supplied is very valuable, as visits can be paid to infants soon after birth, if necessary. Usually visits are made after the tenth day, when the midwife has ceased to be in attendance.

The Health Visitor, when calling, gives advice with regard to the welfare of the mother, the infant and other young children of the family, and every encouragement is given the mother to make use of the facilities provided at the Welfare Centres and to become a regular attender.

Much useful work is being done at the Centres, and in this connection due recognition must be given to the voluntary workers for the very keen interest shown in all matters concerning the welfare of the mother and child. Their valuable assistance is much appreciated and their popularity with mothers and children is a factor of some importance in the general administration of the Centres.

Supervision of the toddler is not neglected, and children between the ages of 1 and 5 years are medically examined at intervals of approximately 12 months in order that any defects or abnormalities may be detected and appropriate treatment arranged for.

In this way it is hoped to secure that the young child will have a reasonable chance of being fit when he is admitted to the elementary school.

Children suffering from defective vision, eye diseases, skin affections, wasting or any other condition calling for treatment are referred to a private doctor, or, if unable to pay, are sent to an appropriate clinic. Facilities for the treatment of minor ailments in children under school age are provided at the Stoke Newington School Treatment Centre, 67, Church Street. This provision fulfils a want as in necessitous cases where fees for continuous private treatment cannot be paid.

The chief aims of the Centres are the supervision of the health of women and children throughout the whole period beginning with pregnancy and continuing up to the time the child reaches 5 years and passes from the sphere of the Welfare Centre to the School Medical Service.

CO-OPERATION WITH THE N.S.P.C.C.—The practice of liaison with the local N.S.P.C.C. Inspector (Mr. A. E. Rivers) has afforded very satisfactory results.

In a number of instances in which, by reason of the activities of the Health Visitors, it has been revealed that there exists some degree of neglect of children on the part of parents, the Inspector has been notified and, as a result of his supervision and co-operation, it has been possible to secure an improvement in the home conditions and better care for the children.

When, in the course of his duties, the Inspector finds a family living in insanitary conditions, he reports the circumstances to the Public Health Department in order that appropriate action may be taken to remedy the conditions so far as possible.

INFANT LIFE PROTECTION

One Health Visitor carries out part-time duties in connection with Infant Life Protection in the Borough. She is responsible for the supervision of all foster mothers and children in their care, and for the regular inspection of all premises in which foster children are housed.

During the year 19 foster mothers and 39 children were subject to systematic inspection by the Infant Life Protection Visitor, who paid 480 visits of inspection during the year ended 31st December, 1936.

It was not necessary to take proceedings for any infringement of the Act during the year.

PRE-NATAL OFFICER'S REPORT

DR. MABEL MUNCEY reports as follows :—

The work of the clinic during 1936 has increased considerably, the number of new cases having risen to 257 and the total number of attendances to 1,423. Of these the post-natal attendances numbered 278.

The number of cases removed from the current list was 141 :—
18 on account of removal from the Borough.

8 found on examination to be non-pregnant. The remainder, 115 mothers gave birth to 113 living children, two stillbirths only occurring, one following Caesarian section for severe hæmorrhage due to central placenta prævia, and the other in a case where severe toxæmia rendered it necessary for the mother to stay in hospital for one month before induction of labour at seven months.

In another case where the mother came to the clinic for the first time in labour, she was drafted to hospital immediately and the baby only lived for a few minutes after birth by Caesarian section.

Confinements were normal in 109 cases. There were 2 Caesarian deliveries, noted above, and 4 were delivered by forceps.

Severe toxæmia occurred in 6 pregnancies, but results were satisfactory to mothers and children after treatment. One mother had acute pyelitis and was sent to hospital. No maternal death occurred and no case of sepsis was notified. One patient had operation for acute appendicitis with interruption of pregnancy.

One case of ophthalmia neonatorum occurred in a baby whose mother was referred to the clinic only for free milk, from hospital where she was under treatment. This baby died in the 5th week owing to prematurity.

93 mothers attended after confinement. 45 were found to be in good health, the remaining 48 being found to require treatment for the following conditions :—

8 retroversion.

10 prolapse.

4 various septic conditions needing prolonged treatment.

1 unhealed tear.

2 severe hæmorrhoids.

- 1 mastitis.
- 2 persistent hyperpiesis.
- 1 glycosuria.
- 1 chronic pyelitis.
- 4 sub-involution.
- 8 severe constipation.
- 1 heart disease.
- 1 severe anaemia.
- 1 enteroptosis.
- 1 goitre needing operation.
- 2 marked debility.

BIRTH CONTROL.—In April, 1931, the Council gave authority for advice on contraceptive methods to be given at the Maternity and Child Welfare Centres, subject to the following conditions, which are specified in paragraph 2 of the Ministry of Health Memorandum 153/M.C.W., being observed :—

- (i) That birth control advice is given only to married women in attendance at Maternity and Child Welfare Centres, and who, in the opinion of the Medical Officer of the Centre, require this advice on the ground that further pregnancy would be detrimental to health ; and
- (ii) That this advice is given at a separate session and under conditions such as will not disturb the normal and primary work of the Centres.

A special session is held when required for the purpose of instruction of selected cases in contraceptive methods, and the premises and equipment of one of the Council's Clinics is used.

The ante-natal officer is responsible for issuing advice strictly in accordance with the terms of the Memorandum. There were no suitable cases for advice in contraceptive methods during 1936.

DENTAL CLINIC.—At this Clinic dental treatment is provided for mothers (nursing or expectant) and children up to the age of five who attend the Maternity and Child Welfare Centres in the Borough. In certain cases mothers not nursing, but with children under one year of age, receive treatment.

Arrangements are made with the British Dental Hospital to equip and maintain a Dental Surgery on the Council's premises, "Barton House," and to provide, direct and supervise a dentist at an inclusive charge of £200 yearly.

Two sessions weekly are now held, on Wednesday mornings and afternoons. Appropriate cases are referred to the dentist by the Child Welfare Medical Officer, the physician attending the Pre-natal Clinic, and occasionally the Health Visitors.

The treatment given and charges are as follows :—

No charge is made for advice.

Scaling and other simple treatment, 1s. per attendance.

Extractions with local anæsthetic, 1s. per extraction.

Gas extractions, 2s. 6d.

Dentures, complete set, £4 ; partial sets *pro rata*.

The work done during the year is summarised as follows :—

No. of New Cases : Mothers, 175. Children, 131. Total ...	306
No. of Attendances : Mothers, 747. Children, 311. Total...	1,058
No. of Sessions	106
No. of Sessions when Anæsthetics given	24
No. of Gas Anæsthetics given	130

The costs for the financial year, 1936, are as follows :—

	£	s.	d.
Fee to British Dental Hospital	200	0	0
Anæsthetist's Fee	16	6	6
Cost of Dentures	36	0	0
	£252	6	6
Receipts for Treatment and Dentures	68	17	0
Total amount paid by Borough Council ...	£183	9	6

INSTRUCTION CLASSES for mothers conducted by the Health Visitors, held weekly, are popular and a most useful means of educating mothers in the principles of mothercraft.

SUPPLY OF MILK FOR NECESSITOUS CASES.—During the financial year the Milk Applications Committee authorised the distribution of wet and dry milk to necessitous cases at a cost to the Council of £1,203 5s. 7d. A necessitous case is assessed by the Committee as one in which the total weekly receipts of the family from all sources amount to less than 10 shillings per head. In the case of a husband and wife with one child the amount paid in rent is deducted from the total weekly income in calculating the weekly receipt per head.

The distribution of milk is arranged in accordance with the requirements of the Ministry of Health in this matter, and milk under the Scheme may be issued free or under cost price to :—

1. Nursing mothers.
2. Expectant mothers in the last three months of pregnancy.
3. Children up to 3 years of age, and, in exceptional cases, to children between the ages of 3 and 5.

The quantity of milk supplied at less than cost price must not ordinarily exceed one pint per day per person, but, in the case of infants between 3 months and 18 months, in exceptional cases, one and half pints a day may be issued.

CONVALESCENT HOME TREATMENT.—During the year grants in aid of Convalescent Home Treatment amounting to £3 18s. 2d. were made by the Council in respect of one mother and three children.

PROVISION OF MATERNITY BEDS IN HOSPITALS.—The Council adopted the following scheme by which maternity patients may be admitted to the Mothers' Hospital, Clapton.

That the Council pay the sum of one guinea in respect of each necessitous case admitted from the Borough.

A necessitous case is defined as one who, by reason of poverty or other causes, is unable to pay for the treatment received, an amount equal to one-half the average cost per patient of the maintenance and administration charges. Last year the cost per in-patient was £9 9s. 8½d.

During the year the Council paid the sum of £5 5s. respecting 5 cases admitted to the Hospital under the above arrangement.

STERILE MATERNITY OUTFITS.—A supply of these outfits which contain sterile dressings, etc., is kept at the Welfare Centres for sale at cost price (5s. 10d. or free issue to necessitous cases).

COMPENSATION FEE TO MIDWIFE.—During the year the Maternity and Child Welfare Committee authorised the payment of a fee of 30s. to a local midwife in compensation for the loss of a midwifery case who was referred to a hospital for special treatment and supervision by the Council's Ante-Natal Officer.

HOME HELPS.—A Home Help is a person competent to do domestic work who goes into a home to do house work and cooking and to take care of the children, when the mother is laid aside by a confinement.

It must be understood that a Home Help does not perform the duties of a District Nurse or Midwife ; and that her duties are limited to domestic work and have nothing to do with the birth of the child.

A scheme for providing Home Helps was inaugurated in 1931.

The payment to be made was fixed at five shillings for an eight-hour day, exclusive of food, and the Home Helps on the panel are under the supervision of the Medical Officer and the Health Visitors. During the year eight women of approved character were retained on the panel, and their services were called upon on seven occasions at a cost to the Council of £19.

AWARD OF MERIT CERTIFICATES.—The Maternity and Child Welfare Committee authorised the award of Merit Certificates to those mothers who had shown skill in mothercraft during the year, and in July the Mayoress (Mrs. A. C. Cann) visited the Barton House Welfare Centre and presented the certificates to the successful mothers. Unfortunately, it was not possible, as in former years, to hold the usual garden parties owing to the fact that expenditure by the Borough Council in respect of such functions was no longer permitted.

PROPOSED EXTENSION OF THE FACILITIES OFFERED AT THE MATERNITY AND CHILD WELFARE CENTRES

At the December meeting of the Council it was reported that the Maternity and Child Welfare Committee had had under consideration the observations of the Medical Officer of Health contained in a report which emphasised the necessity for additional accommodation and medical staff in order to cope efficiently with the growing demand upon the maternity and child welfare organisation of the Council.

The report included references to the following important matters :—

I. OVERCROWDING AT THE MILTON ROAD CENTRE.

The accommodation at present provided at the Milton Road Centre, which is situated above the washhouses, has now become totally inadequate for the requirements of the mothers in the Southern district. This statement is confirmed by the fact that the number of attendances of children at the Milton Road Centre was 5,900 for the year 1935, as compared with 2,965 for the year 1930. An increase of 100 per cent. in a period of 5 years.

At a well attended afternoon session there have been 70 to 80 mothers and children, and, in the presence of overcrowding of this degree, it follows that the general work of the Centre has been seriously handicapped owing to lack of space. Moreover, the congestion of infants and toddlers in a comparatively small room, many of whom are suffering from such easily propagated conditions as coughs and colds, is contrary to the very principles on which the Centre has been established, i.e., the maintenance of health and the prevention of disease.

In addition to the restricted space, there are two very serious disadvantages in the operation of the present Centre.

1. At present no accommodation is available for the storing of perambulators while mothers are in attendance at the Centre ; consequently these have to be left on the pavement, obstructing the footway, with the risk of theft, or damage by lack of weather protection.

2. The situation of the Centre, on the first floor, necessitates the mothers climbing a flight of stone stairs, carrying their babies ; thus there is always the danger of an accident, though, fortunately, up to the present no such occurrence has taken place. There can be no doubt, however, that a Welfare Centre should be situated on ground floor premises.

Alternative Accommodation.

A Sub-Committee of the General Purposes Committee has under consideration at the moment the question of the site of the present Town Hall, and a number of schemes have been submitted regarding the disposal of the Town Hall and its ancillary buildings.

One of the schemes contained the suggestion that part of the ground floor of the Town Hall premises should be used for the purposes of a Welfare Centre. The necessary adaptation to secure this object could be attained at an estimated expenditure of approximately £500. The yard at the rear of the Town Hall would provide a site for the erection of perambulator shelters suitable for the requirements of the mothers.

As an alternative suggestion to the above consideration might be given to the advisability of building a new Welfare Centre in the Southern part of the Borough, similar in type, for example, to that recently completed by the Ealing Town Council at Perivale.

The Perivale Health Centre has been built as a subsidiary Centre, and consists of three rooms—a waiting room 20 ft. by 16 ft., a weighing room 16 ft. by 12 ft. and a Medical Officer's consulting room 14 ft. by 12 ft.—with lavatory accommodation for staff and for mothers and children and with storage room. The building is heated by electric fires and hot water is provided by electric water heaters. The cost of this building was £1,380, with an additional £135 for furnishing.

II. MEDICAL STAFF AND SUPERVISION.

The general work in connection with the Council's Maternity and Child Welfare scheme has increased from year to year since 1927, as indicated by the following figures of attendances at the Welfare Centres :—

Year.						Attendances of infants and children under 5 years.
1927	...	...	...	...	...	7,979
1928	...	...	...	...	...	9,580
1929	...	...	...	...	...	10,550
1930	...	...	...	...	...	10,542
1931	...	...	...	...	...	12,453
1932	...	...	...	...	...	14,414
1933	...	...	...	...	...	15,137
1934	...	...	...	...	...	16,358
1935	...	...	...	...	...	16,675

The Council at present employs 4 Health Visitors, one of whom gives half-time to Tuberculosis visiting in the Borough.

The full-time Health Visitors divide their time between the Clinics at the Centres and visiting the homes of mothers and children.

Their duties are as follows :—

1. To visit the homes of all newly-born children amongst the working classes after the 10th day of birth and subsequently as required.
2. To visit the homes and make investigations in regard to still-births and infant deaths.
3. To visit and give the necessary advice to parents in cases of ophthalmia neonatorum, zymotic enteritis, whooping cough, measles and other diseases causing deaths amongst infants.
4. To visit and make reports on all cases of puerperal fever and puerperal pyrexia.
5. To investigate all applications for the supply of milk free or below cost price.
6. To supervise foster mothers and foster children.

There has been no addition to the Health Visiting Staff since 1927, with the exception of the appointment in October, 1933, of a whole-time Health Visitor to give half-time to Tuberculosis and half-time to Maternity and Child Welfare. In effect, though the work at the Welfare Centres has more than doubled within a period of 8 years, the only addition to staff has been one half-time Health Visitor.

For the purposes of health visiting and attendance of mothers and children at the Centres, the Borough is mapped into three Divisions—North, Central and South.

The North and Central Division mothers attend the Barton House Centre for children's weighings, purchases of Virol and other infant foods and Health Visitor's advice on Monday, Thursday and Friday afternoons in each week.

The Southern Division mothers attend the Milton Road Centre on the same afternoons as above each week.

Two Ante-Natal Clinics are held weekly on Tuesday and Wednesday afternoons at Barton House.

Two Dental Clinics are held weekly on Wednesdays (morning and afternoon sessions) at Barton House.

The doctor's afternoon consultations at the Welfare Centres are taken as follows :—

Barton House	...	Central Division	...	Monday
Barton House	...	Northern Division	...	Friday
Milton Road	...	Southern Division	...	Thursday

The present facilities regarding welfare supervision have approached the "saturation point," so far as the existing staff can be expected to deal with ever increasing duties and responsibilities, and the growth of the clinical work in connection with the Maternity and Child Welfare scheme has assumed such proportions as to necessitate the services of a full-time Medical Officer, to allow for further expansion of the scheme, to obviate unnecessary overcrowding and prolonged waiting of mothers at the Centres, and to afford encouragement to new mothers to utilise the facilities offered.

In this connection, attention is drawn to the fact that Stoke Newington is the only borough in the Metropolis which has no Assistant Medical Officer to carry out the clinical duties at the Welfare Centres.

It is suggested, therefore, that the first step to be taken to cope with the increased work is the appointment of a full-time Assistant Medical Officer to be responsible for the duties in connection with the Council's Welfare scheme. Such Medical Officer would be able to take over the Ante-natal work in place of the present part-time Ante-natal Officer, whose fees for two sessions per week amount to £165 7s. 6d. per annum. In addition, this Officer would deputise for the Medical Officer of Health during his annual holiday, thus saving an annual fee of £52 10s.

An Assistant Medical Officer (Maternity and Child Welfare) is generally responsible for the following duties :—

1. Attendance at children's consultations.

In this Borough the number of doctor's consultations should be increased to two sessions for each of the three divisions. That is, 6 doctor's sessions per week, instead of the three sessions operated at present.

2. Attendance at Ante-natal Clinics.

These Clinics, at present held twice weekly, may require to be increased by the addition of another session later, in view of the fact that domiciliary midwifery will become more popular by reason of the powers granted by the Midwives Act, 1936.

3. To pay visits to houses of mothers where the home conditions are reported as unsatisfactory by the Health Visitors.

4. To supervise generally the work of the Health Visitors.

5. To deputise for the Medical Officer of Health during his annual holiday or at such other times as may be considered necessary.

6. To attend the Diphtheria Immunisation Clinic.

At present there is one session per week, but it may be necessary to increase this to two sessions should diphtheria prevention become more popular, as it is likely to be in the future.

Salary.

The scale of salary recognised for an Assistant Medical Officer is a minimum of £500 per annum, with annual increments of £25 to a maximum of £700 per annum.

The following items would be deducted :

	£	s.	d.
Fees paid to part-time Ante-natal Officer ...	165	7	6
Fees paid to Deputy Medical Officer <i>re</i> vacation duty	52	10	0
	£217 17 6		

The initial expenditure in respect of a full-time Medical Officer for Maternity and Child Welfare would, therefore, amount to £282 2s. 6d.

III. HOME VISITING.

In the Ministry of Health Circular 1550, it is suggested that in all areas there should be systematic periodical health visiting of children under the age of five in the interests of their health, that it should be the duty of the Health Visitor to see these children at regular intervals, to make inquiries as to their state of health and to be on the look-out for any signs of symptoms which suggest a departure from normal health.

In all cases where there is ground for suspecting disease or defect, the mother should be advised to consult the family doctor, or to take the child to the appropriate clinic for medical examination without any delay.

The Circular also states that the success of any efforts to secure adequate supervision of the health of young children will depend, to a large extent, on the efficiency of the Health Visiting Staff, and that in many areas it may be necessary to increase that staff.

For the information of the Council the following table is submitted showing the home visits paid by the Health Visiting Staff during the period 1927 to 1935 :

Year.	Expectant Mothers	Infants Under One Year	Children 1-5	Total Visits
1927 ...	69 ...	4,242 ...	1,022 ...	5,333
1928 ...	297 ...	3,724 ...	2,079 ...	6,100
1929 ...	318 ...	3,749 ...	1,735 ...	5,802
1930 ...	356 ...	3,491 ...	1,910 ...	5,757
1931 ...	379 ...	3,272 ...	1,888 ...	5,539
1932 ...	359 ...	3,111 ...	2,005 ...	5,475
1933 ...	402 ...	2,850 ...	2,370 ...	5,622
1934 ...	347 ...	2,747 ...	3,300 ...	6,394
1935 ...	466 ...	2,791 ...	3,350 ...	6,607

An analysis of these records shows that :

1. The number of visits to expectant mothers has increased very considerably during this period.
2. The number of visits to infants under one year has decreased. This may be partly accounted for by the reduction in the number of births.
3. The number of visits to children 1 to 5 shows an annual increase for the years 1932 to 1935, the latter figure being more than three times the total for the year 1927.
4. The number of total visits shows a general increase between the years 1932 and 1935.

Comparing the table of home visits with that given for the attendances, it will be noted that the definite progressive annual

increase in numbers observed in the latter table is not recorded similarly as regards the number of home visits over the same period of years, though there has been an increase of 1,274 visits between the years 1927 and 1935.

This indicates generally, that, owing to the large proportion of time spent in attendance at the clinics, the visitors are unable to increase substantially the number of visits paid to the homes. This points to an insufficiency of staff to deal with this important branch of the welfare activities, and the Committee has considered the advisability of increasing the present staff by the appointment of an additional Health Visitor in accordance with the recommendation contained in the Ministry of Health Circular 1550.

The present scale of salary for Health Visitors in this Council's service is £200 per annum, with annual increments of £10 to a maximum of £300 per annum.

Following the consideration of the Report the Council passed the following Resolutions :

1. That the Council do instruct the Maternity and Child Welfare Committee to prepare a detailed scheme and estimate of expenditure for the more adequate accommodation for maternity and child welfare purposes in the southern part of the Borough.
2. That the Council do agree to the appointment of a whole-time lady Assistant Medical Officer under the direction and control of the Medical Officer of Health.
3. That consideration of the appointment of an additional Health Visitor to permit of increased home visits to mothers and children (especially those between the ages of 1 and 5 years) in the Borough, be adjourned.

APPENDIX I.

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

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

ADEN Grove
Aden Terrace
Adolphus Road
Albion Grove
Albion Parade, Albion Road
Albion Road
Aldham Place, High Street
Alexandra Buildings, Black-
stock Road
Alexandra Road
Alexandra Villas, Seven Sisters
Road
Allen Road
Allerton Road
Amhurst Park (90-100 even and
93)
Arthur Road
Ayrsome Road

BARN Street
Barrett's Grove
Beaulieu Villas, Seven Sisters
Belgrade Road [Road
Bethune Road (1 to 153 odd,
2 to 106 even)
Blackstock Road (5-175 odd)
Boleyn Road (94 to 192 even)
Bouverie Road
Brighton Road
Brodia Road
Broughton Road
Brownswood Road
Burma Mews
Burma Road

CARYSFORT Road
Chalmer's Terrace,
Victoria Road
Chapel Place, High Street
Chesholm Road
Church Street
Church Walk
Clarence Terrace, Church Street
Clissold Court
Clissold House, Lordship Road
Clissold Park Mansions (1, 2 & 3)
Clissold Park Villas,
Church Street
Clissold Road
Clonbrock Road
Connaught Mansions,
Albion Road
Coronation Avenue,
Victoria Road
Cowper Road
Cressington Road
Crossway (2 to 50 even)

DEFOE Road
Digby Road
Dumont Road
Dunsmure Rd. (91 to 109 odd)
Dynevor Road

EADE Road (2 to 66 even,
1 to 43 odd)
Eagle Mansions, Salcombe Road
Edward's Lane

FAIRHOLT Road
Finsbury Park Road
Fleetwood Street

GAINSBORO' Road
Glebe Place, Church St.
Gloucester Road
Goldsmith Square
Gordon Road
Grangecourt Road
Grayling Road
Grazebrook Road
Green Lanes
(2 to 162, & 182 to 388 even,
81 to 147 & 205 to 327 odd)

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

IMPERIAL Avenue,
Victoria Road

KERSLEY Road
King's Road
Knebworth Road
Kynaston Avenue
Kynaston Road
Kingsway, Albion Road

LANCELL Street
Laura Terrace,
Brownswood Road
Lavell Street
Laver's Road
Leconfield Rd. (1 to 23a odd)
Leonard's Place
Lidfield Road
Lilian Street
Listria Park
Londesborough Road
Lordship Grove
Lordship House, Lordship
Road
Lordship Park
Lordship Park Mews,
Allerton Road
Lordship Road
Lordship Terrace

MANOR Parade, Manor Rd.
Manor Road
Martaban Road
Marton Road
Mason's Court, High Street
Mason's Place, High Street
Matthias Road (2-122 even)
Millard Road
Milton Road
Mountgrove Road (2 to 98 even)

NEVILL Road
Newington Green (33-
42 cons. nos.)
Newington Hall Villas,
Church Street

OLDFIELD Road
Ormond House, Lordship
Road

Osterley Road

PAGET Road
Painsthorpe Road
Palatine Road
Park Crescent, Church Street
Park Lane
Park Street
Park View Mansions, Green Lanes
Pellerin Road
Petherton Road (106 to 138 even)
Portland Road
Prince George Road
Princess May Road
Princess Road

QUEEN Elizabeth's Walk
Queen's Road

REEDHOLM Villas
Riversdale Rd. (92-104
even).
Rochester Place, High Street

ST. ANDREW'S Mews
St. Andrew's Road
St. Kilda's Road
Salcombe Road
Sandbrook Road
Selsea Place, Crossway

Seven Sisters Road
(273-339 odd), (286-328, 430-
486 even)

Shakspeare Road
Shelford Place, Church St.
Shellgrove Road
Shipway Terrace
Somerfield Road
Spenser Road
Springdale Road
Stamford Hill (1-39 odd)
Statham Grove
Stoke Newington Rd.(1-175 odd)
Summerhouse Road

TOWN Hall Approach
Truman's Road

VICTORIA Grove
Victoria Grove West
Victoria Road

WALFORD Road
Warwickshire Road
Watson Street
West Reservoir Cottages,
Lordship Road.
White Hart Court, High Street.
Wilberforce Road
Winston Road
Woodberry Down
Woodberry Grove
Woodland Road
Woodlea Road
Wordsworth Road
Wordsworth Terrace