

**[Report of the Medical Officer of Health for St. Pancras, Metropolitan Borough].**

**Contributors**

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Metropolitan Borough of St. Pancras.

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# REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1920.

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T. SHADICK HIGGINS, M.D., B.S., B.Sc., Lond., D.P.H. Cantab.







# Metropolitan Borough of St. Pancras.

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## REPORT

OF THE

## MEDICAL OFFICER OF HEALTH

FOR THE YEAR

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T. SHADICK HIGGINS, M.D., B.S., B.Sc., Lond., D.P.H. Cantab.

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# St. Pancras Borough Council.

## PUBLIC HEALTH COMMITTEE.

*November, 1919 to October, 1920.*

### CHAIRMAN.

Alderman MAJOR GEORGE FREDERICK COSBURN, J.P.

### DEPUTY-CHAIRMAN.

Councillor MISS EDITH MAURICE VANCE (Ward 3).

### EX-OFFICIO.

THE RIGHT WORSHIPFUL THE MAYOR.  
(Councillor WILLIAM CARTER, J.P.).

### ALDERMEN.

BROWN, HENRY JOSEPH, J.P.  
TAPPING, DAN.  
WILLIAMS, LT.-COL. CHARLES.

### COUNCILLORS.

Ward.

2 BARRETT, EDWARD.  
5 BLOUNT, GEORGE.  
8 CHAMBERLAYNE, S.  
8 CROSBY, MISS ADA, M.B.E.  
8 DAVIS, ABRAHAM.  
1 EBURY, MRS. SUSAN JANE.  
5 GREGG, DR. EDWARD ANDREW.  
5 KENT, MISS BEATRICE.  
3 KOUGH, MISS KATHLEEN BEULAH.  
6 LEVY, MARK JOSHUA.  
4 LLOYD-TAYLOR, WILLIAM, J.P., L.C.C.  
7 MAY, JOSEPH, J.P.  
4 MUNDELLA, ANTHONY JOHN.  
1 NEWMAN, ISRAEL ARTHUR.  
6 REED, WILLIAM RUSSELL.  
3 SHEPHERD, JOSEPH GEORGE.  
7 SWIFT, MANSELL JAMES.  
2 WHITE, GEORGE WILLIAM.  
1 WOODLEY, WILLIAM GEORGE.

*November, 1920 to October, 1921.*

### CHAIRMAN.

Alderman MAJOR GEORGE FREDERICK COSBURN, J.P.

### DEPUTY-CHAIRMAN.

Councillor MISS EDITH MAURICE VANCE (Ward 3).

### EX-OFFICIO.

THE RIGHT WORSHIPFUL THE MAYOR.  
(Alderman HENRY JOSEPH BROWN, J.P.).

### ALDERMEN.

COMBES, FRANK LAWRENCE.  
KENDRICK, CHARLES.  
WILLIAMS, LT.-COL. CHARLES.

### COUNCILLORS.

Ward.

2 BARRETT, EDWARD.  
5 BLOUNT, GEORGE.  
8 BRIDGMAN, WALTER GEORGE.  
8 CROSBY, MISS ADA, M.B.E.  
8 DAVIS, ABRAHAM.  
1 EBURY, MRS. SUSAN JANE.  
1 FLIGHT, HENRY.  
5 GREGG, DR. EDWARD ANDREW.  
5 KENT, MISS BEATRICE.  
3 KOUGH, MISS KATHLEEN BEULAH.  
6 LEVY, MARK JOSHUA.  
4 LLOYD-TAYLOR, WILLIAM, J.P., L.C.C.  
4 MUNDELLA, ANTHONY JOHN.  
1 NEWMAN, ISRAEL ARTHUR.  
5 PATERSON, MRS. LOUISA SOPHIA.  
3 SHEPHERD, JOSEPH GEORGE.  
7 SWIFT, MANSELL JAMES.  
2 WHITE, GEORGE WILLIAM.  
1 WOODLEY, WILLIAM GEORGE.

## STAFF OF THE PUBLIC HEALTH DEPARTMENT

AT END OF 1920.

**MEDICAL OFFICER OF HEALTH AND ADMINISTRATIVE TUBERCULOSIS OFFICER.**

T. SHADICK HIGGINS, M.D., B.S., B.Sc., LOND., D.P.H.

**TUBERCULOSIS OFFICER.**

G. T. CALTHROP, M.A., M.B., B.Ch., CANTAB., D.P.H.

**ASSISTANT MEDICAL OFFICER.**

GLADYS M. MIALI SMITH, M.B., B.S., B.Sc., LOND., D.P.H.

**PUBLIC ANALYST.**

J. KEAR COLWELL, F.I.C.

**SANITARY INSPECTORS AND HEALTH VISITORS.***Inspectors of Food and Food Places.*

W. G. AUGER.

H. R. CHILD.

*Inspector of Workshops and Factories.*

B. H. THOMPSON.

*District Inspectors.*

G. RACKHAM.

G. W. ADKINS.

J. I. LONNON.

R. C. AKERS.

W. L. BROWN.

M. JAFFA.

E. M. DILLON.

S. W. CAPEL.

A. H. WALKER.

H. K. NIXON.

R. E. JAMES.

*Women Sanitary Inspectors.*

MISS M. E. BIBBY, B.A. LOND.

MISS V. BLAXLAND.\*

MISS C. SMITH.\*

MISS D. M. PARNEILL.

MISS H. PAYNE.

MISS G. ANTHONY.

*Health Visitors.*

MRS. A. HUNTER.

MISS F. A. ANDERSON.

MISS J. CAMMAN.

MISS G. B. STEGGLES.†

**CLERICAL STAFF.***Chief Clerk*.. A. POWEL COKE, *Barrister-at-Law.**First Clerk*

.. A. G. CAPEL.

*Second Clerk*

.. A. CARPENTER.

*Clerk*

.. G. N. COVE.

"

.. F. G. CRICK.‡

"

.. T. H. HAGUE.

"

.. MRS. F. E. HENDERSON.

*Junior Clerk*

.. (Vacant).

*Boy Clerk*

.. S. BARKER.

*Temporary Clerk*

.. C. BATTER.

"

.. L. HIGGINS.

"

.. E. WINCHESTER.

"

.. E. ROGERS.

"

.. Miss G. WOOD.

\* Miss Smith and Miss Blaxland are appointed as Sanitary Inspectors and Health Visitors.

† Temporary.

‡ Away ill.

## BOROUGH COUNCIL STAFF AT THE MATERNITY AND CHILD WELFARE CENTRES.

Medical Officers.			No. of Consultations per week.
DR. B. MARION COCKERELL	..	..	3 (and 3 per month)
DR. A. GERTRUDE GROGAN	..	..	2
DR. J. FINCH HAINES	..	..	1
DR. JANIE LORIMER HAWTHORNE	..	..	2
DR. ETHEL F. IREDELL	..	..	1
DR. LYDIA A. LENEY	..	..	3
DR. JESSIE S. MUIR	..	..	3
DR. BALFOUR NEILL	..	..	2
DR. J. SHERWOOD NEW	..	..	1
DR. MARGARET R. PATERSON	..	..	1
DR. MARY J. PIRRET	..	..	3
DR. FRANCIS L. PROVIS	..	..	3 (and 1 per month)
DR. MURIEL RADFORD	..	..	1
DR. ALFRED R. ROCHE	..	..	1

*Dental Clinic.*

MRS. W. A. MURCH, L.D.S., <i>Dentist</i>	..	2
DR. JAS. MAUGHAN, <i>Anæsthetist.</i>		

*Superintendents of Centres.*

MISS K. L. ALLFREY.	MISS M. H. LANDEL JONES.
MISS M. ANDREWS.	MISS E. L. SAVORY.
MISS E. BOYD-JOHNSTON.	MISS M. SMYTH.
MISS G. R. BRISTOW.	MISS M. TEMPLETON.
MRS. E. CROCKART.	

*Assistant Visitors at Centres.*

MISS L. AUGER.	MISS A. KENNEDY.
MISS M. L. BLAIR.	MRS. E. LURIE.
MISS F. BRAYSHAW.	MISS M. MANGER.
MRS. E. E. BRUCK.	MISS E. L. MAY.
MRS. S. C. CHAPMAN.	MISS F. T. PEACOCK.

## DISINFECTING AND CLEANSING STAFF.

Foreman of Disinfecting Station	..	..	H. CATCH.
Stoker and General Assistant	..	..	T. BARTHOLOMEW.
Assistant Disinfector	..	..	J. STANLEY.
"	..	..	A. J. DIBBEN.
Matron of Personal Cleansing Station	..	..	MRS. E. MACE.
Assistant at	..	..	MRS. L. COOK.

## RESIDENT CARETAKERS, &amp;c.

Mortuaries and Coroner's Court	..	..	J. ROOT.
Goldington Buildings	..	..	J. H. AMBROSE.
Flaxman Terrace	..	..	J. EVANS.
Prospect Terrace (and Baths)	..	..	A. N. REID.
Male Attendant	..	..	W. SMITH.
Female Attendant	..	..	MRS. C. REID.

## PUBLIC HEALTH DEPARTMENT,

TOWN HALL,

PANCRAS ROAD, N.W. 1.

*September, 1921.*

TO THE MAYOR, ALDERMEN, AND COUNCILLORS OF THE  
METROPOLITAN BOROUGH OF ST. PANCRAS.

LADIES AND GENTLEMEN,

I have the honour to present to you the Sixty-Fifth Annual Report on the vital statistics and sanitary condition of the Sanitary District of St. Pancras, including particulars of the year's work of the Public Health Department. It is the eighth annual report which it has been my duty to submit.

The year 1920 was remarkable, both for the increase in the number of births and for the decline in the various death-rates which are usually recorded as an index of health conditions.

For many years there has been a gradual diminution in the birth-rate, and this fall was accentuated during the period of mobilization for the war, until during 1919 the rate had fallen to its lowest level. With demobilization a remarkable recovery took place, beginning about the middle of 1919, and in 1920 the births occurred in St. Pancras at about double the rate prevailing in the first six months of 1919. The birth-rate for 1920 (25.4 per 1,000 population) was the highest recorded for the Borough since 1904.

In regard to deaths the record of 1919 was surpassed, the death-rate for 1920 (12.4 per 1,000 population), being 14 per cent. less than the average of the five peace years preceding the war (1909-1913). The rate of infantile mortality in St. Pancras was also much lower in 1920 than in any previous year. There were 73 deaths of infants under one year of age per 1,000 births. This represents a reduction of 26 per cent. on the five war years (1914-1918), and 28 per cent. on the five years preceding the war (1909-1913). A similar reduction has taken place in the mortality from tuberculosis, there having been in 1920, 31 per cent. less deaths than in the average of the five war years, and 23 per cent. less than in the average of the preceding five peace years. The death statistics indicate that the health of the St. Pancras population was better than in any former year. This is no doubt associated with the improvement in the general social conditions, and it is to be feared that if a period of trade depression and unemployment occurs it will have a bad effect on health, which will be reflected in the death rates. It is most important that the Council's efforts to improve the general health conditions of the Borough should not be relaxed. So far as infantile mortality and deaths from tuberculosis are concerned, there is no doubt that, although the death-rates have fallen to an unprecedented degree, there is still room for great improvement.

The changes in the birth and death-rates are vividly illustrated by the fact that in St. Pancras in 1918 there was an excess of deaths over births amounting to 596, while in 1919 and 1920 there was an increase of population through excess of births over deaths, amounting to 894 and 3,039 respectively.

With reference to infectious diseases, there has fortunately been no recrudescence of the great outbreak of influenza of 1918 and 1919. Scarlet fever and diphtheria were both more prevalent in 1920 than in the years immediately preceding, and there was a considerable amount of illness and mortality from measles and whooping cough. The deaths from diarrhoea and enteritis, which have been so fatal amongst young children in hot summers in the past, were fewer than ever before recorded.

The work of the Public Health Department during the year is recorded in detail in the report. Considerable development took place in the Borough scheme for Maternity and Child Welfare. This was necessitated largely by the circumstance that babies were being born at almost double the rate of the preceding years, and that the child population to be served was correspondingly increased. It is satisfactory to record that a very high percentage of the children born were taken to the infant welfare centres (probably approaching 70 per cent), and, as mentioned above, that the rate of infantile mortality was very greatly reduced.

In compiling this annual report, I have followed closely the suggestions made by the Ministry of Health, but have varied somewhat the order of the Sections.

In conclusion, I once more have the pleasure of expressing my appreciation of the manner in which I have been assisted throughout the year by the staff of the Public Health Department. I have also to thank your Public Health Committee for the support which they have invariably given me, and the Council for the personal consideration which they have shown me.

I am, Ladies and Gentlemen,

Your obedient Servant,

*J. Shadick Wiggins*

*Medical Officer of Health.*

# Metropolitan Borough of St. Pancras.

## REPORT

OF THE

## MEDICAL OFFICER OF HEALTH

*For the Year 1920.*

For the purpose of this Report, the year 1920 is taken to be the 53 weeks ended 1st January, 1921. The annual rates are corrected so as to make them comparable with those for other (fifty-two weeks) years.

### Section I.—VITAL STATISTICS.\*

#### POPULATION.

The total population of St. Pancras for 1920, as estimated by the Registrar-General, was 228,980, the civilian population being estimated at 228,178. The latter (civilian) population has been used in estimating death-rates, and the former (total) in estimating marriage and birth-rates.

The population is largely industrial and includes a considerable element of the poor. It was found in the 1911 census that the 22,246 "inhabited houses" were occupied by 52,994 "families or separate occupiers"; that there were 11,452 one-room tenements, 15,568 two-room tenements, and 10,421 three-room tenements; and that a population of 51,214, or 25.5 per cent. of the total population in "private families" were living in 8,875 tenements with more than two occupants per room.

#### MARRIAGES.

The number of marriages celebrated in 1920 was 2,407 (including marriages of soldiers and sailors). This is equal to a rate of 10.5 per 1,000 total population.

#### BIRTHS.

The net number of births for St. Pancras registered in 1920 was 5,934, making an annual birth-rate of 25.4 per 1,000 total population.

The number of births registered as having taken place in the Borough was 6,191, and the net figure is obtained by deducting 257, which, according to information supplied by the Registrar-General, is the excess of births to non-parishioners occurring within the Borough over births to parishioners occurring outside the Borough.

The corresponding figures for previous years and for the different wards and registration sub-districts in the Borough will be found in Tables 1 and 4 on pages 84 and 90.

As will be seen by reference to table 1 the birth-rate for 1920 was much greater than in any recent year. Indeed the number of births and the rate were greater than in any

\* In the Annual Report for 1919 particulars were included in regard to certain matters connected with the natural and social condition of the Borough, which are omitted from the present Report.

previous year since 1904. The increase is to be regarded as much as a result of the war as the great decrease in births which took place previously, and there are already indications of a decline. The variations in the birth-rate will be seen from the following table which gives the quarterly figures for 8½ years:—

Year.	No. of Births.				Total for Year (Uncorrected).	Total for Year (Corrected).
	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.		
1913 ..	1335	1268	1266	1298	5167	5517
1914 ..	1222	1234	1271	1218	4945	5225
1915 ..	1259	1129	1036	1034	4458	4754
1916 ..	1048	1140	1050	1072	4310	4530
1917 ..	1046	974	797	818	3635	3796
1918 .	842	840	848	809	3339	3318
1919 ..	775	747	977	1305	3804	3824
1920 ..	1806	1581	1453	1351	6191	5934
1921 ..	1325	1308	—	—	—	—

1266 births occurred in Public Institutions in St. Pancras, equal to 20·4 per cent. of the total births which took place in the Borough.

Table 5, on page 91, shows the birth-rate for 1920 of England and Wales, the County of London, the several Metropolitan Boroughs, and certain of the large towns with populations exceeding 125,000.

#### ILLEGITIMACY.

Of the 5,934 net St. Pancras births, 332, or 5·6 per cent., were returned as illegitimate. The corresponding figures for 1919, 1918, 1917, 1916, 1915, 1914 and 1913, were 8·4, 9·5, 7·2, 7·0 5·4, 4·4, and 4·7 per cent. respectively.

Of the 6,191 births in St. Pancras (uncorrected) 393 or 6·3 per cent. were returned as illegitimate.

#### NOTIFICATION OF BIRTHS.

5958 notifications of births were received during 1920, including 177 still-births and 5781 live births, or 93 per cent. of the births registered as having taken place in the Borough. Details in regard to the notifications will be found on page 22.

#### DEATHS.

Deaths of civilians only are included in the following figures.

The net number of St. Pancras (civil) deaths registered during the year was 2,895, making an annual death rate of 12·4 per thousand civil population.

The number of (civil) deaths registered during the year as having taken place in the Borough was 3,007. Of these, 713 were of persons whose residence was not in St. Pancras (non-parishioners), 630 dying in St. Pancras institutions, and 83 in other parts of the

Borough. There were also reported by the Registrar-General 564 deaths of St. Pancras parishioners who died in institutions in other parts of the County of London and institutions connected therewith, and 37 who died in other parts of England and Wales. The net figure on which the death-rate is based is corrected for these outward and inward transfers.

In Table 1, on page 84, will be found the corresponding figures for the past ten years. It will be seen that the death-rate in 1920 was considerably lower than in any previous year, the "record" made in 1919 being again surpassed. This progressive lessening of mortality is no doubt closely associated with the gradual improvement in the social conditions of the poor and of the working classes in general, and is an encouragement to continue the public health policy which has been pursued in recent years by the local and central authorities.

The leading causes of death are set out in the following Table for the ten years 1910-1919 and for 1920:—

Diseases.	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	Average for 10 years.	1920
Enteric Fever .. ..	4	7	2	6	4	8	5	6	5	2	5	1
Small-pox .. ..	—	—	—	—	—	—	—	—	—	1	—	—
Chicken-pox .. ..	—	1	1	1	—	1	1	—	—	—	—	—
Measles .. ..	143	113	94	36	53	63	42	118	75	15	75	65
Scarlet Fever .. ..	17	10	5	6	19	22	8	4	7	5	10	11
Whooping Cough .. ..	92	48	47	36	49	52	39	27	80	7	48	60
Diphtheria and Croup ..	21	37	27	19	30	24	23	25	31	21	26	33
Influenza .. ..	20	15	14	42	15	35	35	21	700	260	116	46
Erysipelas .. ..	7	10	7	10	9	11	3	3	11	9	8	12
Tuberculosis—Pulmonary ..	297	230	318	325	365	398	340	353	403	268	330	249
Ditto Other forms..	76	83	83	67	67	102	83	91	82	73	81	63
Cancer, Malignant Disease ..	266	274	247	285	251	258	267	281	269	245	264	299
Rheumatic Fever .. ..	8	6	5	6	10	11	7	7	8	7	8	6
Cerebral Hæmorrhage, Em- bolism, and Apoplexy ..	131	147	227	116	141	169	119	116	131	91	139	98
Heart Disease .. ..	282	283	217	276	319	422	359	393	378	360	329	423
Bronchitis, Pneumonia, and Pleurisy .. ..	630	560	525	691	566	664	535	514	618	489	579	445
Diarrhoea and Enteritis ..	75	248	45	148	142	114	72	97	56	68	107	54
Nephritis and Bright's Disease	97	86	110	101	112	132	103	104	98	61	100	95
Puerperal Fever .. ..	—	4	7	2	7	5	4	5	2	9	5	8
Congenital Debility and Mal- formations, including Pre- mature Birth .. ..	128	130	207	191	164	187	176	144	132	162	163	201
Injuries .. ..	148	156	161	148	150	150	112	125	119	108	138	92

This analysis shows a considerable decline in the last two years in deaths from tuberculosis, "bronchitis, pneumonia, and pleurisy," and cerebral apoplexy, but the returns for heart disease, cancer, and congenital causes of death are less favourable. In regard to the essentially fluctuating causes of death, measles and whooping cough were productive of considerable mortality, while deaths from diarrhoea were few in comparison with other years. The phenomenal mortality from influenza which occurred in 1918 and 1919 had practically disappeared in 1920.

The deaths for the year are fully classified for causes, age, and sex in Table 2, on page 85.

The deaths and death-rates for the different wards and registration sub-districts will be found in Table 4 on page 90, and in Table 5 on page 91 are set out the death rates for 1920 of England and Wales, the County of London, the several Metropolitan Boroughs, and certain of the large towns with populations exceeding 125,000.

1,662 deaths occurred in Public Institutions in the Borough in 1920. Taking from these the number which were of non-parishioners (630) and adding the number of deaths of St. Pancras parishioners in Public Institutions without the Borough (601)—both from the Registrar-General's figures—the number of St. Pancras deaths which took place in Public Institutions is shown to be 1,663, or 57 per cent. of the total deaths.

#### INFANTILE MORTALITY.

435 deaths of St. Pancras infants under one year of age took place during the year. This is equal to a rate of 73 per thousand births.

In Table 1 on page 84 the corresponding rates for the last ten years are set out, and from this it will be seen that the infantile mortality rate for 1920 was very much lower than that for any previous year. The reduction was equivalent to 17 per cent. on 1919, 26 per cent. on the five war years (1914-1918), and 28 per cent. on the five years preceding the war (1909-1913). It is highly satisfactory to be able to record that the Borough scheme for maternity and child welfare, to the development and administration of which so much attention has been given in recent years, has been associated with such a saving of child life.

In Table 4 on page 90 the figures will be found for the different wards and registration sub-districts, and in Table 5 on page 91 the infantile mortality rates in England and Wales, the County of London, the several Metropolitan Boroughs, and certain of the large towns with populations exceeding 125,000.

In the Tables on the next two pages are shown :—

- (1) The causes of death of children under 12 months of age (1920) classified according to age at death.
- (2) The causes of death of children under 12 months of age in 1920 and in the ten previous years. In this Table the number of births in each year is also stated for reference.

1920. NETT DEATHS FROM STATED CAUSES AT VARIOUS AGES  
UNDER 1 YEAR OF AGE.

CAUSE OF DEATH.					Under 1 week.	1—2 weeks.	2—3 weeks.	3—4 weeks.	Total under 4 weeks.	4 weeks & under 3 months.	3 months & under 6 months.	6 months & under 9 months.	9 months & under 12 months.	Total Deaths under 1 year.
All causes	Certified ...	...	...	...	107	31	19	14	171	80	82	57	45	435
	Uncertified ...	...	...	...	—	—	—	—	—	—	—	—	—	—
Small-pox	...	...	...	...	—	—	—	—	—	—	—	—	—	—
Chicken-pox	...	...	...	...	—	—	—	—	—	—	—	—	—	—
Measles	...	...	...	...	—	—	—	—	—	—	2	10	9	21
Scarlet Fever	...	...	...	...	—	—	—	—	—	—	—	—	—	—
Whooping-Cough	...	...	...	...	—	—	—	—	—	2	5	6	5	18
Diphtheria and Croup	...	...	...	...	—	—	—	—	—	—	1	1	—	2
Erysipelas	...	...	...	...	—	—	—	—	—	—	—	—	—	—
Influenza	...	...	...	...	—	—	—	—	—	—	1	1	—	2
Tuberculous Meningitis	...	...	...	...	—	—	—	—	—	—	2	3	1	6
Abdominal Tuberculosis	...	...	...	...	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases	...	...	...	...	—	—	—	—	—	—	1	1	—	2
Meningitis (not Tuberculous)	...	...	...	...	—	—	—	—	—	1	3	2	1	7
Convulsions	...	...	...	...	2	4	—	—	6	—	1	—	—	7
Laryngitis	...	...	...	...	—	—	—	—	—	—	—	—	—	—
Bronchitis	...	...	...	...	1	1	4	2	8	24	22	14	19	87
Pneumonia (all forms)	...	...	...	...	—	—	—	1	1	3	1	3	1	9
Diarrhœa	...	...	...	...	—	—	1	—	1	3	6	—	1	11
Enteritis	...	...	...	...	—	2	2	1	5	9	7	2	3	26
Gastritis	...	...	...	...	—	—	1	—	1	—	1	—	—	2
Syphilis	...	...	...	...	1	1	2	—	4	3	3	4	1	15
Rickets	...	...	...	...	—	—	—	—	—	—	—	1	—	1
Suffocation (overlying)	...	...	...	...	—	—	—	—	—	1	—	1	—	2
Injury at birth	...	...	...	...	5	—	—	—	5	—	—	—	—	5
Atelectasis	...	...	...	...	10	—	—	—	10	—	—	—	—	10
Congenital Malformations	...	...	...	...	12	6	2	4	24	4	4	1	—	33
Premature birth	...	...	...	...	70	12	3	4	89	14	1	—	1	105
Atrophy, Debility and Marasmus	...	...	...	...	4	5	3	1	13	10	11	5	1	40
Other causes (including Influenza)	...	...	...	...	2	—	1	1	4	6	11	3	2	26
Totals					107	31	19	14	171	80	82	57	45	435

Nett Births in the year	{ legitimate ... 5602	Nett Deaths in the year of	{ legitimate infants 372
	{ illegitimate ... 332		{ illegitimate infants 63

NETT DEATHS FROM STATED CAUSES UNDER 1 YEAR OF AGE FOR 10 YEARS,  
1910—1919, AND 1920.

CAUSE OF DEATH.	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	Average for 10 years.	1920
All causes { Certified ... { Uncertified ...	580 —	623 —	472 —	512 —	481 —	497 —	385 —	402 —	340 —	336 —	463 —	435 —
Small-pox ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Chicken-pox ... ..	—	—	1	1	—	1	—	—	—	—	—	—
Measles ... ..	42	17	13	10	8	17	14	30	16	4	17	21
Scarlet Fever ... ..	—	—	—	1	—	—	—	—	—	1	—	—
Whooping-Cough... ..	40	16	21	12	23	24	15	14	27	2	19	18
Diphtheria and Croup ... ..	2	3	1	1	4	—	2	1	1	—	1	2
Erysipelas ... ..	1	1	—	3	2	2	—	1	1	—	1	—
Influenza ... ..	—	1	—	—	1	—	1	—	18	11	3	2
Tuberculous Meningitis ... ..	6	8	11	5	3	8	5	4	8	4	6	6
Abdominal Tuberculosis ... ..	—	1	3	—	2	1	1	2	1	1	1	—
Other Tuberculous Diseases ... ..	7	2	2	8	3	6	5	7	3	2	5	2
Meningitis (not Tuberculous) ... ..	8	12	8	8	4	8	7	10	3	6	7	7
Convulsions ... ..	14	6	21	16	11	5	9	5	3	6	10	7
Laryngitis ... ..	—	—	1	—	—	1	—	1	—	—	—	—
Bronchitis ... ..	29	90	57	105	76	84	57	63	46	47	65	87
Pneumonia (all forms) ... ..	77	15	13	9	16	12	10	13	15	9	19	9
Diarrhoea ... ..	38	70	8	22	24	15	6	8	6	10	21	11
Enteritis ... ..	14	98	24	73	82	64	35	52	31	37	51	26
Gastritis ... ..	8	2	7	2	—	3	2	4	1	3	3	2
Syphilis ... ..	12	8	9	14	15	9	14	16	13	11	12	15
Rickets ... ..	4	2	4	—	1	1	4	2	—	—	2	1
Suffocation (overlaying)... ..	17	18	22	14	18	8	9	13	6	1	13	2
Injury at Birth ... ..	2	4	6	4	3	19	4	3	2	6	4	5
Atelectasis ... ..	9	6	9	3	5	6	9	9	8	7	7	10
Congenital Malformations ... ..	13	21	21	24	23	25	34	19	17	31	23	33
Premature Birth ... ..	100	93	97	93	84	92	75	61	50	68	81	105
Atrophy, Debility and Marasmus ... ..	89	80	63	53	38	47	43	44	46	45	55	40
Other causes (including Influenza) ... ..	48	50	50	31	36	48	25	20	36	35	38	26
Totals ... ..	580	623	472	512	481	497	385	402	340	336	463	435
NETT BIRTHS ... ..	5385	5555	5367	5517	5225	4754	4530	3796	3318	3824	4727	5934

The number of deaths of illegitimate children under one year of age was 63, equal to a death rate of 190 per thousand illegitimate births.

## Section II.—MATERNITY AND CHILD WELFARE.

The statistics for the year in regard to births and deaths of infants will be found on pages 9, 10, 12, 13 and 14 of this Report. The number of children born in 1920 reached a total of 5934 in the year, which was an increase of 55 per cent on the number born in the previous year. This was the chief cause of the increase in the attendances at the Maternity and Child Welfare Centres which necessitated some expansion of the staff at the centres. To those responsible for the Borough Child Welfare Scheme it is a matter for great satisfaction that the rate of infantile mortality fell in 1920 to a point (73 per 1000 births) far below that of any previous year.

The borough scheme for Maternity and Child Welfare includes the following activities:—

- (a) The dispatch by post of cards of advice to the individual mothers immediately after the receipt of the notification of birth required by law.
- (b) The home visitation 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 Centres.
- (c) The provision and maintenance of 13 Maternity and Child Welfare Centres. These centres are partly maintained on a voluntary basis, but the whole of the professional staff (medical officers and health visitors) are paid and controlled by the Council, who also pay the rent, rates and taxes of the centre premises.
- (d) The provision of a clinic for ailing mothers and young children, the expenses being borne partly municipally and partly from voluntary funds.
- (e) The provision of a municipal dental clinic for mothers and young children.
- (f) The subsidization of a Home for ailing young children.
- (g) The supply of milk free or at reduced price for necessitous mothers (nursing or expectant) and young children; and the subsidization of a voluntary fund for the provision of cheap dinners for such persons.
- (h) The subsidization of a voluntary fund for the provision of Home Helps.
- (i) The subsidization of the four voluntary Day Nurseries in the borough.
- (j) The subsidization of voluntary agencies providing intern and extern midwifery for St. Pancras women free or at reduced fees.
- (k) The payment for the home nursing of sick infants in certain cases. The work done in 1920 in connection with the scheme will now be referred to in detail:—

**ADVICE CARDS.**—Cards of advice have been posted to the mothers of all infants whose births have been notified. These give particulars in regard to the Infant Welfare Centres, as well as advice in regard to the nurture of the child. Cards of advice to expectant mothers have also been distributed through University College Hospital, Middlesex Hospital and the Maternity Nursing Association to those expectants who have arranged for their confinements through the institutions.

**HOME VISITING.**—This has been done by the health visitors at the Town Hall and by the Council's staff of health visitors (superintendents and assistants) at the Centres who visit the mothers attending the Centres and also such notified births as are referred to them by the Medical Officer of Health.

The Town Hall infant visitors include two full-time health visitors and two who are health visitors as to half their time, as well as one other health visitor who devotes her time primarily to the visiting of cases of measles. These ladies made during the year 3290 visits to 1607 infants (apart from 4930 visits to cases of measles and visits for certain other special purposes). They also made 338 visits to 160 expectant mothers, from lists of expectants supplied by University College and Middlesex Hospitals. The work of these visitors is detailed in Table 9 on page 96.

The Council's visitors at the Infant Welfare Centres included at the end of the year 19 full-time workers and one part-time worker, who divide their time between the necessary work in the centres, and home visiting. In addition there was one voluntary (trained) worker at the Argyle Square group of centres, and two visitors (part-time so far as St. Pancras is concerned) working from the centre at University College Hospital whose salaries are paid by the hospital and not by the Council. In 1920 these centre visitors made 41,208 visits to 6,895 children and 4667 visits to 1998 expectant mothers.

The visits made by the health visiting staff at the Town Hall and the centres therefore numbered in all 44,498 visits to 8,502 children, and 5,005 visits to 2,158 expectant mothers. The figures for individual cases visited are, however, overstated, owing to a number of instances in which the same case will have been counted at more than one centre, particularly where cases have been passed on to other centres by University College Hospital and by the Town Hall visitors. The figures are detailed on page 17. In the previous year (1919) the total visits were 28,122 to children and 4,392 to expectant mothers, and in 1918 19,937 and 2,011.

#### MATERNITY AND CHILD WELFARE CENTRES.

The nature of the work carried out at the Centres has been described in detail in previous Annual Reports. Each centre (or group of centres) is managed by a voluntary committee, who find the funds for the maintenance of the centre other than those referred to on page 15 as provided by the Council. The Council has two representatives on each committee, and the Medical Officer of Health and members of his staff are also on nearly all of them. Each committee also sends a representative to the Council's Maternity and Child Welfare Sub-Committee. The University College Hospital Centre is not, however, subsidized by the Council.

During the year two centres (North St. Pancras and Camden Town) have been provided with full-time premises, so that there are now four centres with houses of their own.

In the table on the next page the work of the centres in 1920 is statistically detailed. It will be seen that at the end of the year 31 infant consultations were held per week, and 35 ante-natal consultations per month. During 1920 the children who have attended the consultations for the first time have numbered 4375 under one year and 237 older than one year. The children under one amount to 73 per cent. of the births registered for the year. The number is probably somewhat overstated owing to a limited number moving from one centre to another. The children made a total of 47,625 attendances (compared with 26,252 in 1919). 1,254 expectant mothers also attended, making in all 3,577 attendances (compared with 3,343 in 1919).

CENTRE.	ATTENDANCES AT CONSULTATIONS.								VISITS BY TRAINED VISITORS.				Infant Consultations.		Expectant Mothers Consultations.		Number of Trained Visitors.	
	Expectant Mothers.		Children.						Expectant Mothers.		Children.							
	New cases.	Total attendances.	New cases.			Total attendances.			First visits.	Total visits.	First visits.	Total visits.	Per week.	Total.	Per month.	Total.	Whole Time.	Part Time (qua St. Pancras).
			Under 1 year.	Over 1 year.	Total.	Under 1 year.	Over 1 year.	Total.										
Town Hall Health Visitors ..	—	—	—	—	—	—	—	—	160	338	1607	3290	—	—	—	—	—	—
St. Pancras School for Mothers:—																		
Ampthill Square ..	264	546 <sup>1</sup>	499	30	529	—	—	7621 <sup>1</sup>	768	1448	1688	7557	5 <sup>2</sup>	208	4	49	4 <sup>3</sup>	—
Chalton Street ..	115	601	307	52	359	4447	1081	5528	335	671	409	6341	3 <sup>3</sup>	128	2 <sup>4</sup>	4 <sup>4</sup>	2 <sup>5</sup>	—
North St. Pancras School for Mothers:—																		
<sup>6</sup> Rhyl Street and Queen's Crescent ..	141	329	602	39	641	5628	1114	6742	44	400	541	4839	4 <sup>7</sup>	177	4 <sup>8</sup>	42	3 <sup>10</sup>	—
Grafton Road ..	—	—	238	12	250	2177	322	2429	—	—	603	2125	2 <sup>9</sup>	54	—	—	1 <sup>10</sup>	—
South Highgate Mothers' and Infants' Welfare Centre ..	6	38	113	5	118	1894	272	2166	7	62	216	1794	1 <sup>11</sup>	51 <sup>11</sup>	—	—	1 <sup>12</sup>	—
Mary Ward Settlement School for Mothers ..	15	43	288	35	323	2010	687	2697	106	217	403	1668	3 <sup>13</sup>	105	—	—	1 <sup>14</sup>	—
<sup>15</sup> Camden Town Mothers' and Infants' Welfare Centre, Greenland Street and Camden road ..	65	180	448	42	490	5173	1280	6453	85	304	677	2696	4 <sup>16</sup>	116	4 <sup>17</sup>	36	3 <sup>18</sup>	—
Argyle Square Group of Centres:—																		
Argyle Square ..	46	158	152	—	152	1971	270	2241	183	655	734	6531 <sup>19</sup>	1 <sup>14</sup> 1 <sup>15</sup> 1	61	2	23	3 <sup>20</sup>	—
Osney Crescent ..	81	233	205	16	221	2509	576	3085						68	2	24		
Falkland Road ..	—	—	96	—	96	1090	—	1090						37	—	—		
<sup>21</sup> Maternity Nursing Association, Oakley Square ..	164	180	340	—	340	—	—	3376	317	451	1036	2230	2 <sup>22</sup>	67	1	12	1	—
University College Hospital ..	—	—	937	—	937	—	—	3146 <sup>23</sup>	—	—	453 <sup>23</sup>	4956 <sup>23</sup>	2	105	—	—	—	2 <sup>24</sup>
Royal Free Hospital:—																		
Gray's Inn Road ..	175	717	81	6	87	692	48	740	153	459	135	471	1	52	8	100	—	1
Marlborough Maternity Section ..	182	552	69	—	69	241	—	241	—	—	—	—	1	52	8	104	—	—
Totals ..	1254	3577	4375	237	4612	—	—	47625	2158	5005	8502	44498	31 <sup>25</sup>	1281	35	394	19	3

(a) 3 until June. (1) In addition to 2651 attendances of "ailing mothers." (2) 3 at beginning of 1920. (3) 1 at beginning of 1920. (4) None before November. (5) Assisted by voluntary trained visitors. (6) The Centre was moved from Rhyl Street to Queen's Crescent in September. (7) 2 before October. (8) 2 before September. (9) 1 before November. (10) Before September there were only 3 visitors for both these Centres. (11) Since April 2 doctors have attended each consultation. (12) Part time before August. (13) 2 before November. (14) Part time before March. (15) The Centre was moved from Greenland Street to Camden Road in August. (16) 2 until May and 3 until November. (17) 2 before June. (18) Before November there were only 1 full time visitor and 1 part time. (19) Including 1245 visits by an unpaid trained worker. (20) 2 before May. (21) Year ended 31st March, 1921. (22) 1 before November. (23) Approx. (24) Not paid by Borough Council.

In the following statement certain additional details of the individual centres are set out:—

ST. PANCRAS SCHOOL FOR MOTHERS.—This institution has two centres:—

- (a) 1, *Amphill Square, N.W. 1*. This is a detached house used solely for the purpose, the rent, rates and taxes being paid by the Council. In addition to the usual consultations the centre maintains (out of voluntary funds):—

A dental clinic (dental surgeon, Mr. Geo. Thomson, L.D.S.) at which the total attendances of mothers in 1920 were 301, and of young children 72.

An observation day-nursery for children who need special care, at which there were 2207 daily attendances in 1920.

A massage clinic, during the last 4 months of the year only, during which time 164 attendances of children were made.

Cheap dinners for mothers and children: 2347 dinners for mothers and 2483 for toddlers were provided in 1920.

During the year the weekly infant consultations were increased from 3 to 5, one being conducted by the Council's Assistant Medical Officer.

- (b) 6, *Chalton Street, N.W. 1*. These are mission premises in part-time use, and the rent is re-paid by the Council. In 1920 the weekly infant consultations were increased from 1 to 3, and a fortnightly ante-natal consultation was started, the latter and one infant consultation being taken by the Council's Assistant Medical Officer.

Dr. Matilda Hunt resigned in June on going abroad, Dr. M. J. Pirret was appointed in January. The number of consultations was also increased during the year by the Council's Assistant Medical Officer taking consultations at Amphill Square and at Chalton Street. In June the health visiting staff at Amphill Square was increased by the appointment of Mrs. S. C. Chapman as assistant and at Chalton Street by converting the appointment of the Superintendent, Miss E. L. Savory, to full-time, and the appointment of Miss M. Manger as assistant.

NORTH ST. PANCRAS SCHOOL FOR MOTHERS.—This institution has two centres:—

- (a) 129, *Queen's Crescent, N.W. 5*. The centre was moved to this address in September from the part-time mission building premises at 39, Rhyll Street. The new centre is a private house used solely for the purpose, and the Council pay the rates and taxes and an annual sum in lieu of rent. At the same time the weekly infant consultations were increased from 2 to 4, Dr. J. Finch Haines and Dr. Muriel Radford being appointed for the new work.

- (b) *Grafton Road Centre*.—This is held in rooms provided by the Council at the Public Baths, Prince of Wales Road, N.W. 5. In November the weekly infant consultations were increased from 1 to 2, Dr. A. R. Roche being appointed for the purpose. At the end of 1920 the management of this centre was taken over from the North St. Pancras School for Mothers by a special voluntary committee.

The health visiting staff of the centres was strengthened by the appointment, in September, of Miss Eva Boyd Johnston as superintendent of the Grafton Road Centre, leaving the three other health visitors for the work of the Queen's Crescent Centre only. In June Mrs. E. E. Bruce was appointed in place of Miss L. Benedict, resigned.

**SOUTH HIGHGATE MOTHERS' AND INFANTS' WELFARE CENTRE, CHESTER ROAD, N. 19.**—Is held in rooms provided by the Council at the Public Library, Chester Road. In May the work was increased by the Council's Assistant Medical Officer taking a second infant consultation at the same time as Dr. Neill's infant consultation, and in June the appointment of the superintendent Miss K. L. Allfrey was converted to full-time. The premises being available only on one afternoon a week are not convenient for the work of the centre, and better accommodation is badly needed.

**MARY WARD (FORMERLY PASSMORE EDWARDS) SETTLEMENT SCHOOL FOR MOTHERS, TAVISTOCK PLACE, W.C. 1.**—Is held in the Settlement Premises, no rent being paid. Holborn cases are also dealt with, but the St. Pancras cases are in the majority. In March the appointment of the superintendent, Miss M. Templeton, was converted to full-time, and in November a third weekly infant consultation was undertaken by Dr. Leney.

**CAMDEN TOWN MOTHERS' AND INFANTS' WELFARE CENTRE, 62, CAMDEN ROAD, N.W. 1.** The centre was moved to this address in August from the part-time premises at St. Michael's Mission Building, Greenland Street. The new centre is a full-time suite of rooms in the house occupied by the Central St. Pancras District Nursing Association, and the inclusive rent is paid by the Council. An additional weekly infant consultation was undertaken in May by the Council's Assistant Medical Officer, who also took over the ante-natal consultations, and a fourth weekly infant consultation was started in November, Dr. M. R. Paterson being appointed for the purpose. The health-visiting staff was increased to 3 in November by the appointments of Miss L. Auger and Miss M. L. Blair as assistants.

**THE ARGYLE SQUARE GROUP OF CENTRES.**—This consists of three centres:—

*40, Argyle Square, W.C. 1.*—The greater part of this house is used exclusively for the purposes of the centre, and the Council repay a proportionate part of the rent, rates, and taxes.

*Oseney Crescent Centre.*—This is held in part-time premises at the Crescent Club, Busby Place, Oseney Crescent, N.W. 5, the rent being paid by the Council. It was opened in January.

*Wesleyan Schoolroom, Falkland Road, N.W. 5.* These premises are used part-time, the rent being paid by the Council.

At these centres Dr. Cockerell holds two weekly consultations for babies, three monthly consultations for older children (2 for children between 1 and 2, and one for children between 2 and 5), and four ante-natal consultations per month. In addition Dr. Margaret Alden holds a weekly infant consultation, but is not paid by the Council. On account of the opening of the additional centre the staff of paid visitors was increased to 3 by the appointment of Miss F. T. Peacock in May. Miss P. Campbell was appointed in February in place of Miss Donnell, resigned, and Miss A. Kennedy in April, in place of Miss Campbell, resigned.

**MATERNITY NURSING ASSOCIATION, OAKLEY SQUARE, N.W. 1**—This Institution holds ante-natal and infant consultations in connection with its maternity work. They take place at the St. Pancras Dispensary, 39, Oakley Square, the Council paying the rental for the use of the rooms. In November a second weekly infant consultation was undertaken by Dr. Provis. The Superintendent, Miss M. Andrews, resigned in November, but continued in office to the end of the year.

**UNIVERSITY COLLEGE HOSPITAL, GOWER STREET, W.C. 1.**—The consultations here are restricted mainly to infants who are actually ailing. Mothers attended in their confine-

ment by the hospital are referred to the various infant welfare centres in the district, and the Medical Officer of Health is supplied with lists of these cases. The hospital consultation deals with sick children referred from the various centres, and the Medical Officer of Health is supplied with lists of these. The Council does not pay any of the expenses of the hospital centre.

ROYAL FREE HOSPITAL, GRAY'S INN ROAD, W.C. 1.—This hospital maintains ante-natal and infant consultations here, and at the Marlborough Maternity Section, 21, Endsleigh Street. The St. Pancras cases are in a minority, and the Council contributes towards the salary of the paid visitor.

DENTAL CLINIC.—The Borough Council dental clinic for mothers and children was continued during 1920 at the British Dentists' Hospital, 31, Camden Road, N.W. 1. The services were confined to mothers and children attending and referred from the various maternity and child welfare centres in the Borough. The clinics were held twice a week, and the work done was as follows:—

Number of Clinics	..	..	..	..	85
„ with nitrous oxide anaesthesia	..	..	..	..	20
„ of new cases (mothers)	..	..	..	362	} 518
„ „ (children)	..	..	..	156	
Total number of attendances	..	..	..	..	1575
Number of attendances for extractions under nitrous oxide	..	..	..	..	214
„ „ „ local anaesthesia	..	..	..	..	153
„ „ when fillings were done	..	..	..	..	202
„ „ „ scalings	..	..	..	..	119
„ „ for impressions, fitting dentures, &c.	..	..	..	..	526
„ „ „ examinations, etc.	..	..	..	..	391

No charge was made for extractions, fillings and scalings, but the patients were required to pay towards the expense of dentures. For these the dentist is paid separately at the rate of £2 for one denture and £4 for two dentures, and the patients' contributions amount to about one half.

In 1920, 92 patients were fitted with dentures. The total cost of these was £317, of which £184 3s. was paid by the patients themselves, £58 11s. by the Borough Council, £9 7s. by the voluntary fund kindly raised by Mr. A. Escott for that purpose, and £64 19s. from other sources, particularly the Metropolitan Hospital Sunday Fund.

Mothers and children are also dealt with at the dental clinic (voluntary) at the St. Pancras Dispensary, and the centres at University College and Royal Free Hospitals are able to refer cases to their own dental departments.

CLINIC FOR SICK MOTHERS AND CHILDREN UNDER SCHOOL AGE.—A weekly clinic (Dr. F. L. Provis) is held at the St. Pancras Dispensary, 39, Oakley Square, N.W. 1, to which patients are referred from the infant welfare centres, the health visitors, and other sources. During 1920, 478 new cases under five years of age were treated at the dispensary, the total number of attendances of sick children being 1459 (at Dr. Provis' clinic the corresponding figures were 265 and 806). 228 ailing mothers (42 expectant and 186 nursing) were also treated at the clinic, who made 561 attendances. The medical officer is paid by the Council, and there is a half-time visiting nurse, half of whose salary is repaid to the dispensary by the Mayoress' Nursing Fund.

**SUPPLY OF FOOD TO MOTHERS, AND CHILDREN UNDER SCHOOL AGE.**—Reference is made on page 69 to the supply of milk for mothers and children.

In January, 1920, the Council made a grant of £50 to the Kentish Town Dining Room for Mothers, then housed at Lyndhurst Hall, Warden Road. Here nursing mothers and young children were supplied with cheap dinners. The work was interrupted in the latter part of the year, but was started again by a new committee early in 1921.

Meals for mothers and children are also supplied by the St. Pancras School for Mothers (see page 18), and for ailing mothers and children, amongst other sick persons, by the Invalid Kitchen, Crowndale Road.

**HOME FOR AILING CHILDREN UNDER SCHOOL AGE.**—A grant of £500 per annum is made by the Council in aid of the Mayoress of St. Pancras Home for Sick Poor Children, 1, St. Alban's Road, N.W. 5, which has accommodation for 18 ailing children.

In 1920, 108 children were admitted and discharged, the home being empty at the beginning and end of the year. They are classified for age as follows:—

0 to 1	..	..	16	3 to 4	..	..	17
1 to 2	..	..	23	4 to 5	..	..	14
2 to 3	..	..	27	5 and over	..	..	11

The conditions for which the children were admitted were as follows:—

Debility	..	..	..	..	25
Rickets	..	..	..	..	17
Other nutritional disorders, tardy development, &c.	..	..	..	..	19
Convalescence after					
Measles	..	..	..	14	
Pneumonia and Bronchitis	..	..	..	15	
Whooping Cough	..	..	..	5	
Other conditions	..	..	..	13	
				—	47

The Home was open on 309 days during the year, and the average length of stay of the patients 40·88 days. A good deal of trouble was experienced owing to children being admitted in the incubation stage of infectious disease, and the Home was closed in March on account of whooping cough, in April because of measles, and in October for scarlet fever.

**DAY NURSERIES.**—In pursuance of resolutions passed in December, 1919, as amended later, the Council assists the four approved day nurseries in the Borough by the payment of one quarter of the net expenditure as approved by the Ministry of Health (after the deduction of the payments made by the mothers). The effect of this is that the expense is shared as to one half by the Ministry, one quarter by the Council, and one quarter by voluntary funds. The four institutions are the Whitfield Day Nursery, 53, Whitfield Street, W. 1; the St. Pancras Day Nursery, 26, Cartwright Gardens, W.C. 1; the Kentish Town Day Nursery, Gospel Oak Grove, N.W. 5; and the Margaret Day Nursery, 44, Amptill Square, N.W. 1.

The attendances at the day nurseries in the year ended 31st March, 1921, were as follows:—

Whitfield Day Nursery	..	..	..	6563
*St. Pancras	..	..	..	7362
Kentish Town	..	..	..	8078
Margaret	..	..	..	2752

\* From 1st April, 1920, to 11th June, 1921.

**HOME HELPS.**—The St. Pancras Home Helps Committee provides domestic assistance for families when the mother is laid aside through sickness or child-birth. In 1920 the Council made the Committee a subsidy at the rate of £150 per annum in respect of maternity cases.

58 cases were assisted in 1920, as follows:—

Maternity	..	..	..	..	38
Influenza	..	..	..	..	1
Consumption	..	..	..	..	1
Care of children during absence of mothers	..	..	..	..	2
Old age infirmity	..	..	..	..	5
Other sickness	..	..	..	..	11

Three home helps were employed during most of the year.

**HOME NURSING.**—The work of the four local district nursing associations in this connection (*see page 75*) includes the nursing of mothers and children. The home nursing of cases of measles, whooping cough, and ophthalmia neonatorum by the nursing associations for the Mayoress' Nursing Fund is referred to on pages 26 and 27.

The Maternity Nursing Association undertakes "monthly nursing" as well as supplying midwives.

#### MIDWIFERY WORK.

The notifications of births in St. Pancras are classified below (in wards and registration sub-districts) according to the manner in which the mothers were attended in their confinements:—

BIRTHS.	W.		S.		E.		N.		TOTAL
	4	5	7	8	3	6	1	2	
Attended in their own homes by—									
Private Doctors ... ..	214	121	35	64	251	27	359	158	1229
Private Midwives ... ..	225	27	17	62	152	7	320	371	1181
Doctors from the Elizabeth Garrett Anderson Hospital ... ..	33	16	3	32	61	15	17	47	224
Medical Students from—									
University College Hospital	133	326	3	13	221	463	6	30	1195
„ Royal Free Hospital ... ..	1	—	2	64	3	—	—	—	70
„ St. Bartholomew's Hospital	—	—	—	3	—	—	—	—	3
Midwives from—									
Middlesex Hospital ... ..	—	39	61	3	—	2	—	—	105
„ University College Hospital	7	16	32	162	8	22	—	3	250
„ Maternity Nursing Association, Myddleton Square ... ..	—	1	—	74	—	—	—	—	75
„ Maternity Nursing Association, Oakley Square Branch	44	84	14	4	116	57	24	17	360
Attended in Institutions—									
University College Hospital ... ..	—	—	200	—	—	—	—	—	200
Royal Free Hospital ... ..	—	—	—	213	—	—	—	—	213
Royal Free Hospital (Marlborough Maternity Section) ... ..	—	—	573	—	—	—	—	—	573
Elizabeth Garrett Anderson Hospital ... ..	—	—	—	—	—	59	—	—	59
Lying-in Ward of St. Pancras House	—	—	—	—	—	220	1	—	221

Certain of the notified births set out in the above table as having taken place in St. Pancras institutions were of infants of mothers who were not St. Pancras residents. On the other hand, a number of St. Pancras mothers were confined in institutions outside of the borough. In the following paragraph the figures for 1919 are given for St. Pancras women only :—

"*Extern*" *Midwifery*.

*Elizabeth Garrett Anderson Hospital (doctors) ..	..	..	..	224
University College Hospital (medical students)	..	..	..	1195
" " " (midwives)	..	..	..	250
Middlesex Hospital (midwives) ..	..	..	..	105
Royal Free Hospital (medical students)	..	..	..	70
St. Bartholomew's Hospital (medical students) ..	..	..	..	3
*Maternity Nursing Association, Oakley Square and Myddleton Square (midwives) .. .. .	..	..	..	435
				2282

(or 38 per cent. of the total number of births).

All the above-mentioned cases were treated gratuitously except those marked with an asterisk, in which reduced fees were charged.

"Intern" Midwifery.

*In St. Pancras :—*

University College Hospital .. .. .	115
Royal Free Hospital .. .. .	32
Royal Free Hospital (Marlborough Maternity Section) .. .. .	162
Elizabeth Garrett Anderson Hospital .. .. .	18
St. Pancras House .. .. .	164

*Out of St Pancras :—*

Middlesex Hospital	..	..	.	..	..	..	136
Queen Charlotte's Lying-in Hospital	..		..	..	..	..	159
City of London Maternity Hospital	..		..	..	..	..	46
Other hospitals	..	..	..	..	..	..	65
							<hr/>
							897
							<hr/>

(or 15 per cent. of the total number of births).

It will be seen from these tables that a very substantial amount of midwifery is available for St. Pancras women from various voluntary agencies. The facilities for home midwifery in much of the tenement house property are so bad, however, that an increased amount of accommodation in the way of maternity homes or hospitals is desirable. In the northern part of the borough the extern service from hospitals, &c., which is found in the south does not exist.

The Council subsidizes the provision of midwifery for St. Pancras residents the grants in previous years having been at the rate of 5s. per extern case and 10s. per intern case. In



8 of the patients were primiparæ (*i.e.*, women who had not previously borne children), and 9 multiparæ.

In 3 cases "instruments" had been used at the confinement, and in one case the patient had undergone an operation in hospital two days after supposed miscarriage.

In no case was there any obvious source of infection in the house.

In the following table the cases are classified according to the manner in which the patients were attended in their confinements:—

Confinement attended by	No. of cases of Puerperal Fever.	Total number of births notified.	No. of cases per 1000 births.
Doctors .. .. .	7	1453	4·8
Midwives from Institutions .. .. .	1	790	1·3
Private Midwives .. .. .	1	1181	0·8
Medical Students .. .. .	3	1268	2·4
In Hospital .. .. .	2	—	—

In 3 cases the mother had no skilled attention at the time of miscarriage, and doctors were called in some hours later.

### OPHTHALMIA NEONATORUM.

69 infants were notified during 1920 to be suffering from ophthalmia neonatorum. Two of these cases were afterwards cancelled because the inflammation had started when the infants were over three weeks of age, and also one hospital case where the mother's home was out of the borough. The corrected number of cases was therefore 66, or 11·1 per 1,000 births.

55 of these were notified by medical practitioners, 6 by midwives, and 5 by both.

8 of the cases were regarded as grave, 27 as moderate, and 31 as slight.

3 of the cases have since died. 5 were illegitimate.

The cases are classified below according to the manner in which the mothers were attended at their confinement.

Confinement attended by	No. of cases of Ophthalmia Neonatorum.	Total number of births notified.	No. of cases per 1000 births.
Doctors .. .. .	16	1453	11·0
Midwives from Institutions .. .. .	16	790	20·3
Private Midwives .. .. .	14	1181	11·9
Medical Students .. .. .	5	1268	3·9
In Hospitals and Institutions .. .. .	15	—	—

Every case was visited on the day of the receipt of notification. 23 cases were removed to hospital, and 42 were treated at home, with the help of a visiting nurse in 27 cases. One case died in the institution where born within ten days of birth.

The results of treatment were as follows:—

Complete recovery .. .. .	59
Blind (but died when 10 months old) .. .. .	1
Sight damaged .. .. .	1
Died before recovery .. .. .	2
Removed and lost trace of .. .. .	3

The same facilities, as in the case of measles (see below), are available for the home nursing of cases of Ophthalmia Neonatorum, through the Mayoress' Nursing Fund. In 1920 the visiting nurses made 570 visits to 35 cases in this connection.

### MEASLES AND GERMAN MEASLES.

These diseases were made compulsorily notifiable throughout the country by an Order of the Local Government Board as from January 1st, 1916, the Order being known as the Public Health (Measles and German Measles) Regulations, 1915. Under these regulations all cases were notifiable by parents and guardians, but only the first case occurring in an outbreak in a household or institution was notifiable by medical practitioners, an interval of two months since the last case constituting a new outbreak. Full use was made of the regulations in St. Pancras, practically every case of measles being promptly visited and investigated by a health visitor upon notification, and a leaflet of instructions left with the parent. In all cases where it appeared necessary on the health visitor's report the Medical Officer of Health was able to send a visiting nurse daily, and also to supply medical necessities, such as milk or coals in cases of necessity. These facilities were available through the Mayoress' Nursing Fund for Sick Children. Where removal to hospital was essential, this could often be arranged through the Metropolitan Asylums Board or the Guardians.

Towards the end of 1919 the Ministry of Health announced that the Regulations would be revoked as from the 31st December, 1919, and at the same time stated that if any local authority desired that the diseases should continue to be notifiable in their district the Ministry would make a local Order to that effect, provided it was satisfied that the authority had a complete scheme for dealing with the cases notified. The St. Pancras Borough Council were satisfied as to the value of notification, and on their request the Ministry made an Order providing for the compulsory notification of measles and german measles in St. Pancras on the same lines as those laid down in the 1915 Regulations. This arrangement was made definite by the Metropolitan Boroughs of Lambeth and St. Pancras (Measles and German Measles) Regulations, 1920.

In June, 1920, the Council, on the consideration of a communication in that sense received from the Metropolitan Borough of Chelsea, informed the Ministry of Health that they were of opinion that measles should be made a compulsorily notifiable disease throughout London.

With a view to indicating the value of compulsory notification, the cases of measles (463) reported in St. Pancras from June to December (inclusive), 1920, were analysed accordingly as the information was derived from compulsory notification, or by the system of reporting cases from the public elementary schools. The results were as follows:—

	Primary Cases.	Secondary Cases.	All Cases.
Reported by compulsory notification only .. ..	163	106	269
Reported both by compulsory notification and by the schools	76	13	89
Reported by the schools only .. .. .	90	15	105

The "primary" cases were those which were the first cases in the houses in which they occurred, and the "secondary" cases were the subsequent cases in those houses. Only cases of measles are included, not german measles. The figures indicate that one-half of all the cases reported were heard of through compulsory notification *only*. It was also found that many of the school reports of cases were too much delayed to be of real service.

Subject to correction for diagnosis in certain instances, 3,093 cases of measles, and 195 of german measles were notified or otherwise discovered in 1920. This represents an incidence rate of 13·3 per 1,000 civil population for measles and 0·84 for german measles.

65 deaths from measles were registered during the year, equal to a death-rate of 0·28 per 1,000 civil population, and a case mortality of 2·1 per cent. amongst notified cases. There were no deaths from german measles.

The cases were notified or reported as follows :—

			Measles.	German measles.
Notified by medical practitioners	..	..	2151	167
„ parents and guardians	..	..	529	10
Discovered otherwise	..	..	413	18
			<hr/> 3093	<hr/> 195

Further statistical facts in regard to the disease will be found on pages 11, 13, 14, 28, 29 and 30.

Through the Mayoress' Nursing Fund all cases where it was considered necessary have been attended by a visiting nurse once or twice a day. In the year 325 cases of measles were nursed, 1907 nursing visits being made. In 220 families the patients were supplied with milk, etc., from the Fund.

The cases notified, the number of deaths, and the percentage case mortality for the 5 years during which the disease has been notifiable, were as follows :—

		Cases notified.	Deaths.	Percentage case mortality.
1916	..	1885	42	2·2
1917	..	3681	118	3·2
1918	..	2144	75	3·5
1919	..	1034	15	1·5
1920	..	3093	65	2·1

### WHOOPIING COUGH.

The number of St. Pancras deaths from whooping cough in the past ten years are as follows :—

1911	..	..	48	1916	..	..	39
1912	..	..	47	1917	..	..	27
1913	..	..	36	1918	..	..	80
1914	..	..	49	1919	..	..	7
1915	..	..	52	1920	..	..	60

17 cases of whooping cough were nursed in 1920 through the Mayoress' Nursing Fund, 122 nursing visits being made.

### ANTERIOR POLIOMYELITIS.

See page 43.

### Section III.—PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

The number of cases of the compulsorily notifiable infectious diseases that have been notified during 1920 is shown in the table below, where they are also classified according to ages. The figures have not been corrected for subsequent revision of diagnosis.

DISEASES.	AT ALL AGES.	AT AGES—YEARS.						
		Under 1.	1 and under 5.	5 and under 10.	10 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.
1. Variola or Small-pox .. .. .	—	—	—	—	—	—	—	—
2. Scarlatina or Scarlet Fever .. ..	863	12	159	425	178	63	26	—
3. Diphtheria and Membranous Croup ..	747	8	140	331	142	75	50	1
4. Typhus Fever .. .. .	—	—	—	—	—	—	—	—
5. Enteric or Typhoid Fever .. .. .	18	—	—	4	—	6	8	—
6. Fever, Simple or Continued .. .. .	—	—	—	—	—	—	—	—
7. Relapsing Fever .. .. .	1	—	—	—	—	—	—	1
8. Puerperal Fever .. .. .	18	—	—	—	—	3	15	—
9. Erysipelas .. .. .	126	1	4	3	6	13	84	15
10. Cholera .. .. .	—	—	—	—	—	—	—	—
11. Plague .. .. .	—	—	—	—	—	—	—	—
12. Anthrax .. .. .	—	—	—	—	—	—	—	—
13. Glanders .. .. .	—	—	—	—	—	—	—	—
14. Hydrophobia .. .. .	—	—	—	—	—	—	—	—
15. Cerebrospinal Meningitis .. .. .	6	2	1	1	1	—	1	—
16. Anterior Poliomyelitis and Polioencephalitis	2	—	1	1	—	—	—	—
17. Ophthalmia Neonatorum .. .. .	69	69	—	—	—	—	—	—
18. Encephalitis Lethargica .. .. .	11	—	—	1	1	2	7	—
19. Acute Primary Pneumonia .. .. .	142	16	26	20	9	22	45	4
20. Acute Influenzal Pneumonia .. .. .	108	1	5	1	1	27	70	3
21. Malaria .. .. .	58	—	—	—	—	7	51	—
22. Dysentery .. .. .	4	—	—	—	—	—	4	—
23. Trench Fever .. .. .	—	—	—	—	—	—	—	—
24. Measles .. .. .	3093	177	1445	1292	95	50	34	—
25. German Measles .. .. .	195	7	56	91	23	12	6	—
26.*Tuberculosis:—								
Pulmonary .. .. .	684	1	10	35	36	111	459	32
Other Forms .. .. .	132	5	15	36	22	20	28	6

\* Including all Primary Notifications made under the Public Health (Tuberculosis) Regulations, 1912, on Forms "A," "B," "C" or "D."

WEEKLY NUMBER OF CERTIFIED DEATHS FROM THE DANGEROUS INFECTIOUS DISEASES DURING THE YEAR 1920.



## WEEKLY NUMBER OF INFECTIOUS CASES CERTIFIED TO THE MEDICAL OFFICER OF HEALTH DURING THE YEAR 1925

TABLE I									
Summary of the results of the experiments on the effect of the concentration of the solution on the rate of the reaction									
Concentration of the solution (M)	Rate of the reaction (M/min)	Concentration of the solution (M)	Rate of the reaction (M/min)	Concentration of the solution (M)	Rate of the reaction (M/min)	Concentration of the solution (M)	Rate of the reaction (M/min)	Concentration of the solution (M)	Rate of the reaction (M/min)
0.01	0.001	0.02	0.002	0.03	0.003	0.04	0.004	0.05	0.005
0.06	0.006	0.07	0.007	0.08	0.008	0.09	0.009	0.10	0.010
0.11	0.011	0.12	0.012	0.13	0.013	0.14	0.014	0.15	0.015
0.16	0.016	0.17	0.017	0.18	0.018	0.19	0.019	0.20	0.020
0.21	0.021	0.22	0.022	0.23	0.023	0.24	0.024	0.25	0.025
0.26	0.026	0.27	0.027	0.28	0.028	0.29	0.029	0.30	0.030
0.31	0.031	0.32	0.032	0.33	0.033	0.34	0.034	0.35	0.035
0.36	0.036	0.37	0.037	0.38	0.038	0.39	0.039	0.40	0.040
0.41	0.041	0.42	0.042	0.43	0.043	0.44	0.044	0.45	0.045
0.46	0.046	0.47	0.047	0.48	0.048	0.49	0.049	0.50	0.050
0.51	0.051	0.52	0.052	0.53	0.053	0.54	0.054	0.55	0.055
0.56	0.056	0.57	0.057	0.58	0.058	0.59	0.059	0.60	0.060
0.61	0.061	0.62	0.062	0.63	0.063	0.64	0.064	0.65	0.065
0.66	0.066	0.67	0.067	0.68	0.068	0.69	0.069	0.70	0.070
0.71	0.071	0.72	0.072	0.73	0.073	0.74	0.074	0.75	0.075
0.76	0.076	0.77	0.077	0.78	0.078	0.79	0.079	0.80	0.080
0.81	0.081	0.82	0.082	0.83	0.083	0.84	0.084	0.85	0.085
0.86	0.086	0.87	0.087	0.88	0.088	0.89	0.089	0.90	0.090
0.91	0.091	0.92	0.092	0.93	0.093	0.94	0.094	0.95	0.095
0.96	0.096	0.97	0.097	0.98	0.098	0.99	0.099	1.00	0.100

In the accompanying tables (inset) are shown the number of notifications of the notifiable infectious diseases received in each week of the year, and also the corresponding weekly number of deaths from these and certain other diseases.

In the following table the number of notifications are set forth for the past 10 years:—

Diseases.	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920
Small-pox .. .. .	—	—	—	—	—	—	—	—	10	—
Scarlet Fever .. .. .	445	598	568	1207	1009	448	246	332	558	863
Diphtheria and Membranous Croup	419	550	440	458	446	424	451	399	348	747
Typhus Fever .. .. .	—	—	—	—	—	—	—	—	—	—
Enteric or Typhoid Fever ..	66	29	41	44	36	38	24	17	7	18
Fever, simple or continued ..	—	—	1	1	—	1	—	—	—	—
Relapsing Fever .. .. .	—	—	—	—	—	—	—	—	—	1
Puerperal Fever .. .. .	16	20	11	18	14	18	9	5	13	18
Erysipelas .. .. .	201	190	210	223	202	120	126	121	134	126
Cholera .. .. .	—	—	—	—	—	—	—	—	—	—
Plague .. .. .	—	—	—	—	—	—	—	—	—	—
Hydrophobia .. .. .	—	—	—	—	—	—	—	—	—	—
Anthrax .. .. .	—	—	—	—	—	1	—	1	—	—
Glanders .. .. .	—	—	—	—	—	—	—	—	—	—
Cerebrospinal Meningitis ..	7	3	5	2	40	23	25	13	10	6
Anterior Poliomyelitis and Polioencephalitis	2	3	9	3	8	9	1	1	4	2
Ophthalmia Neonatorum .. ..	26	18	23	34	31	38	31	40	39	69
Chicken-pox .. .. .	198	..	..	..	247	..	..	401	..	..
Measles .. .. .	..	..	..	..	..	1855	3681	2144	1034	3093
German Measles .. .. .	..	..	..	..	..	381	609	311	268	195
Encephalitis Lethargica .. ..	..	..	..	..	..	..	..	..	3	11
Acute Influenzal Pneumonia ..	..	..	..	..	..	..	..	..	213	108
Acute Primary Pneumonia .. ..	..	..	..	..	..	..	..	..	86	142
Malaria .. .. .	..	..	..	..	..	..	..	..	98	58
Dysentery .. .. .	..	..	..	..	..	..	..	..	6	4
Trench Fever .. .. .	..	..	..	..	..	..	..	..	1	—
Tuberculosis— Pulmonary .. .. .	1464	1735	928	893	933	735	825	1034	799	684
Other Forms .. .. .			230	121	150	138	169	203	206	132

The notifications of, and deaths from, the notifiable infectious diseases, are classified in the following table according to their Wards and Registration Sub-Districts:—

INFECTIOUS DISEASES.	NOTIFICATIONS.										DEATHS.									
	West. Ward		South. Ward		East. Ward		North. Ward		No Address.	Whole Borough.	West. Ward		South. Ward		East. Ward		North. Ward		No Address.	Whole Borough.
	4	5	7	8	3	6	1	2			4	5	7	8	3	6	1	2		
1. Variola or Small-pox .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Scarletina or Scarlet Fever .. ..	106	132	48	123	138	50	110	156	..	863	1	..	1	4	2	1	2	..	..	11
3. Diphtheria and Membranous Croup	41	85	22	91	104	64	135	205	..	747	2	2	..	6	5	2	6	10	..	33
4. Typhus Fever .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5. Enteric or Typhoid Fever .. ..	3	1	..	3	7	..	4	..	..	18	..	..	..	..	1	..	..	..	..	1
6. Fever, Simple and Continued ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
7. Relapsing Fever .. .. .	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
8. Puerperal Fever .. .. .	1	1	3	4	2	2	3	2	..	18	2	..	..	2	1	1	2	..	..	8
9. Erysipelas .. .. .	10	15	5	14	20	20	19	23	..	126	2	2	..	1	1	1	3	2	..	12
10. Cholera .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
11. Plague .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
12. Anthrax .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
13. Glanders .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
14. Hydrophobia .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
15. Cerebrospinal Meningitis .. ..	3	..	..	1	1	..	1	..	..	6	..	..	..	..	1	..	1	..	..	2
16. Anterior Poliomyelitis and Polioencephalitis	..	..	1	..	..	..	1	..	..	2	..	..	..	..	..	..	1	..	..	1
17. Ophthalmia Neonatorum .. ..	8	10	15	4	8	10	6	8	..	69	..	..	1	..	..	..	..	..	..	1
18. Encephalitis Lethargica .. ..	1	2	2	..	2	1	1	2	..	11	..	..	..	..	..	..	..	..	..	..
19. Acute Primary Pneumonia .. ..	18	21	1	26	17	14	26	19	..	142	..	..	..	..	..	..	..	..	..	..
20. Acute Influenzal Pneumonia .. ..	9	18	2	9	32	9	24	5	..	108	..	..	..	..	..	..	..	..	..	..
21. Malaria .. .. .	10	7	2	2	22	4	10	1	..	58	..	..	1	..	..	..	..	..	1	2
22. Dysentery .. .. .	..	..	..	..	1	..	2	1	..	4	..	..	..	2	..	..	3	..	2	7
23. Trench Fever .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
24. Measles .. .. .	442	304	129	400	505	297	591	425	..	3092	6	5	5	11	7	15	10	6	..	65
25. German Measles .. .. .	21	48	9	11	22	11	40	33	..	195	..	..	..	..	..	..	..	..	..	..
26. †Tuberculosis:—																				
Pulmonary .. .. .	69	83	62	97	89	87	105	74	18	684	42	35	19	34	32	28	31	24	4	249
Other Forms .. .. .	9	12	14	11	22	24	20	15	5	132	8	8	2	9	6	8	14	7	1	63

† Including all primary notifications made under the Public Health (Tuberculosis) Regulations, 1912, on Forms A, B, C, or D.

## DISINFECTING AND CLEANSING STATION.

## DISINFECTION.

The work done during the year by the disinfecting staff is shown in the following table:—

Disease.	No. of Cases.	No. of Houses.	No. of Rooms Contents Disinfected or Destroyed.	No. of Rooms Sprayed and Fumigated.
Small-pox ... ..	—	—	—	—
Scarlet Fever ... ..	764	748	880	875
Diphtheria ... ..	630	627	700	711
Enteric Fever ... ..	17	17	17	9
Erysipelas ... ..	73	73	72	38
Puerperal Fever ... ..	17	17	17	12
Cerebrospinal Meningitis	3	3	4	4
Consumption ... ..	75	75	78	79
Measles ... ..	48	48	59	53
Cancer ... ..	33	33	32	26
Vermin and Scabies ... ..	67	67	65	15
Other Diseases ... ..	160	160	176	110
Totals ... ..	1887	1868	2100	1932

Below is shown the number of articles destroyed or disinfected during the year on account of infectious disease and verminousness:—

	INFECTIOUS DISEASE		VERMINOUSNESS.	
	DESTROYED.	DISINFECTED.	DESTROYED.	DISINFECTED.
Beds, mattresses and palliasses .. ..	28	2134	1	62
Bolsters and pillows .. ..	13	3960	3	73
Sheets, blankets and counterpanes .. ..	1	5923	—	698
Rugs, mats, cushions, carpets, covers, and curtains .. ..	7	958	—	31
Wearing apparel .. ..	7	2873	3	28
Books .. ..	42	77	—	—
Sundries .. ..	5	578	—	9
TOTAL .. ..	103	16503	7	901

These figures include 478 blankets, 15 mattresses, 9 bolsters and sheets, 26 pillows, and 11 articles of wearing apparel and sundries which were disinfected on account of verminousness for voluntary bodies (such as the Y.M.C.A.) who provide accommodation for soldiers.

The tables above are exclusive of the disinfection of the clothing of persons attending the cleansing station for vermin or scabies.

The following table shows the number of persons cleansed and disinfected after having been in contact with infectious disease :—

			MALES.	FEMALES.	CHILDREN UNDER 10.
Scarlet Fever	..	..	1	5	—
Puerperal Fever	..	..	—	12	—
Diphtheria	..	..	1	—	—
Venereal	..	..	—	1	—

#### CLEANSING STATION.

The amount of work done here during the year is indicated in the following table. The figures represent the number of attendances. At each attendance the person receives a bath, and his or her clothes are stoved.

		Men.	Women.	Children under 15.	Total.
St. Pancras Cases	{ Vermin ..	521	16	3638	*4175
	{ Scabies ..	111	72	2183	2366
Cases from outside	{ Vermin ..	109	2	1014	1125
St. Pancras	{ Scabies ..	1	—	569	570
	Vermin ..	630	18	4652	5300
	Scabies ..	112	72	2752	2936
	Total ..	742	90	7404	8236

\* Includes 251 males and 5 females who had no home address.

The school children included in the above table have in the main been brought to the cleansing station from the Public Elementary Schools by officials of the London County Council as the Education Authority under the powers conferred upon them by their General Powers Act, 1904, Sec. 36, and the Children Act, 1908, Sec. 122. A sum of one shilling per bath is paid by the County Council to the Borough Council, according to an agreement between the two Authorities, and 7381 baths were paid for on this scale during the year.

110 verminous persons from common lodging houses outside the borough were paid for by the London County Council at the rate of 1s. per attendance.

#### TUBERCULOSIS.

The number of notifications of civilian cases of tuberculosis received during 1920 are set out in the following table, in the form required by the Ministry of Health :—

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1912.

Summary of Notifications during the period from 29th December, 1919, to the 1st January, 1921 (inclusive).

AGE PERIODS.	Number of Notifications on Form A.												Number of Notifications on Form B.				Number of Notifications on Form C.		Number of Notifications on Form D.			
	Primary Notifications.											Total Notifications (i.e., including cases previously notified by other Doctors).	Primary Notifications.			Total Notifications (i.e., including cases previously notified by other Doctors).	Poor Law Institutions.	Sanatoria.	Poor Law Institutions.	Sanatoria.		
	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards.		Total.	Under 5	5 to 10						10 to 15	Total.
Pulmonary—Males ..	—	5	10	10	11	30	59	78	46	29	17	295	350	—	2	2	4	6	161	122	103	100
„ Females ..	1	3	10	17	14	28	48	25	20	13	8	187	224	—	3	2	5	6	73	53	38	47
Non-pulmonary—Males	4	7	12	8	5	3	8	2	2	—	2	53	56	—	1	—	1	1	10	4	8	5
„ Females ..	1	7	14	3	4	6	4	—	—	2	3	44	46	—	3	3	6	6	4	10	9	9
TOTALS .. ..	6	22	46	38	34	67	119	105	68	44	30	579	676	—	9	7	16	19	248	189	158	161

AGE PERIODS.	Number of Primary Notifications on Form C. included in above.												Number of Primary Notifications on Form D. included in above.									
	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards.	Total.	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65
Pulmonary—Males ..	—	2	6	1	5	10	19	33	31	16	7	130	—	—	1	—	—	1	3	1	2	—
„ Females ..	—	—	3	2	3	8	15	14	3	—	—	48	—	—	—	2	1	1	2	—	—	—
Non-pulmonary—Males	—	—	3	3	—	—	—	3	1	2	1	13	—	—	—	1	—	—	1	—	—	—
„ Females	—	1	2	1	2	—	2	—	—	—	—	8	—	—	1	3	—	—	—	1	—	—
TOTALS .. ..	—	3	14	7	10	18	36	50	35	18	8	199	—	—	2	6	1	2	6	1	3	—

The number of primary notifications (civilian) received during the year on Forms A. B. C. and D. was 816 (684 pulmonary, 132 non-pulmonary) equal to a notification rate of 3.51 (2.94 pulmonary, 0.57 non-pulmonary) per 1,000 (civil) population. They are analysed for age and sex in the next table:—

PRIMARY NOTIFICATIONS DURING 1920.

Ages.	Pulmonary Tuberculosis.			Other Tuberculosis.			Total all Forms.
	Males.	Females.	Total.	Males.	Females.	Total.	
0—1 ..	—	1	1	4	1	5	6
1—5 ..	7	3	10	7	8	15	25
5—10 ..	19	16	35	16	20	36	71
10—15 ..	13	23	36	12	10	22	58
15—25 ..	56	55	111	8	12	20	131
25—35 ..	79	64	143	8	6	14	157
35—45 ..	114	41	155	6	—	6	161
45—55 ..	78	23	101	3	—	3	104
55—65 ..	47	13	60	2	3	5	65
65 upwards ..	24	8	32	3	3	6	38
Totals ..	437	247	684	69	63	132	816

The deaths from tuberculosis during the year numbered 312, of which 249 were from phthisis and 63 from other forms of tuberculosis. They are analysed for age and sex in the following table:—

DEATHS FROM TUBERCULOSIS DURING THE YEAR 1920.

Ages.	Phthisis.			Other Tuberculosis.			Total.
	Males.	Females.	Total.	Males.	Females.	Total.	
0—1 ..	—	—	—	5	3	8	8
1—2 ..	1	1	2	—	3	3	5
2—5 ..	—	1	1	5	3	8	9
5—10 ..	1	2	3	4	4	8	11
10—15 ..	—	2	2	3	4	7	9
15—25 ..	21	21	42	3	9	12	54
25—35 ..	23	21	44	5	2	7	51
35—45 ..	39	17	56	3	—	3	59
45—55 ..	37	13	50	1	—	1	51
55—65 ..	21	8	29	1	—	1	30
65—75 ..	14	3	17	1	1	2	19
75—85 ..	2	1	3	1	2	3	6
85 & upwards	—	—	—	—	—	—	—
Totals at all Ages ..	159	90	249	32	31	63	312

The figures are equal to a death-rate of 1.34 (1.07 pulmonary, 0.27 non-pulmonary) per 1,000 (civil) population. The present sex constitution of the population is too uncertain to give precise rates for males and females, but it is evident that the incidence and mortality rates are greater amongst males than females.

In regard to age incidence, 77 per cent. of the deaths and 75 per cent. of the notifications were of persons aged from 15 to 55 years, so far as concerns pulmonary tuberculosis, while in regard to other forms of tuberculosis, 54 per cent. of the deaths and 59 per cent. of the new cases notified were of children aged 15 years or under.

The deaths in 1920 are classified in the following table according to the part of the body affected as well as for age and sex :—

	0-1	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	75-85	85 up.	Total Males.	0-1	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	75-85	85 up.	Total Females.	Total Persons.
Pulmonary Tuberculosis	—	1	1	20	23	38	34	20	12	2	—	151	—	2	4	18	20	17	13	7	2	1	—	84	235
Phthisis (not defined as tuberculous) ...	—	—	—	1	—	1	3	1	2	—	—	8	—	—	—	3	1	—	—	1	1	—	—	6	6
Total Pulmonary Tuberculosis ...	—	1	1	21	23	39	37	21	14	2	—	159	—	2	4	21	21	17	13	8	3	1	—	90	249
Acute Phthisis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Miliary Tuberculosis ...	1	—	—	—	2	—	—	—	—	—	—	3	—	—	—	1	—	—	—	—	—	—	—	1	4
Tuberculous Meningitis	3	5	6	2	—	2	1	—	—	—	—	19	3	5	7	4	—	—	—	—	—	—	—	19	38
Tabes Mesenterica	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Peritoneal and Intestinal Tubercle ...	—	—	1	1	2	—	—	—	—	—	—	4	—	1	1	4	—	—	—	—	—	1	—	7	11
Tuberculosis of Spinal Column ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis of Joints ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	1
Lupus ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scrofula ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis of other Organs ...	1	—	—	—	1	1	—	1	1	1	—	6	—	—	—	1	—	—	—	—	1	—	—	2	8
Disseminated Tuberculosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	1
Total Non-Pulmonary Tuberculosis	5	5	7	3	5	3	1	1	1	1	—	32	3	6	8	9	2	—	—	—	1	2	—	31	63
Total all forms of Tuberculosis ...	5	6	8	24	28	42	38	22	15	3	—	191	3	8	12	30	23	17	13	8	4	3	—	121	312

In the next table the new cases notified during 1920 are similarly classified.

LOCATION OF DISEASE.	AGES.						TOTAL.
	0—5		5—15		15 and upwards.		
	Males.	Females.	Males.	Females.	Males.	Females.	
Pulmonary Tuberculosis	7	4	32	39	398	204	684
Bones and Joints ..	—	1	7	3	8	2	21
Meninges ..	5	6	4	7	3	4	29
Glands ..	2	—	9	10	6	6	33
Abdominal ..	1	—	2	5	—	1	9
Genito-Urinary ..	—	—	—	—	—	—	—
General ..	1	—	—	—	—	—	1
Other Organs ..	2	2	6	5	13	11	39
<i>Total Non-pulmonary Tuberculosis</i> ..	11	9	28	30	30	24	132
Total all forms of Tuberculosis ..	18	13	60	69	428	228	816

The following table shows the number of new notifications and deaths from Tuberculosis, together with the corresponding rates for the past ten years:—

Year.	Estimated Population.	Primary Notifications.			Deaths.			Notification Rate.			Death Rate.		
		Phthisis.	Other forms.	All forms.	Phthisis.	Other forms.	All forms.	Phthisis.	Other forms.	All forms.	Phthisis.	Other forms.	All forms.
1911 ..	237129	1464		1464	330	83	413	6.17			1.39	.35	1.74
1912 ..	220353	1735		1735	326	75	401	7.87			1.48	.32	1.82
1913 ..	218387	928	230	1158	325	67	392	4.17	1.03	5.20	1.49	.30	1.79
1914 ..	218387	893	121	1014	365	67	432	4.09	.55	4.64	1.67	.30	1.97
1915 ..	218387	933	150	1083	398	102	500	4.27	.69	4.96	1.82	.47	2.29
1916 ..	218387	735	138	873	340	83	423	3.36	.63	3.99	1.55	.38	1.93
1917 ..	218387	825	169	994	353	91	444	3.78	.77	4.55	1.62	.42	2.03
1918 ..	218387	1034	203	1237	403	82	485	4.74	.93	5.67	1.85	.37	2.22
1919 ..	218387	799	206	1005	268	73	341	3.66	.94	4.60	1.23	.33	1.56
1920 ..	218387	684	132	816	249	63	312	3.07	.59	3.67	1.12	.28	1.40

During the past decade there had appeared to be a noticeable check in that decline in mortality from tuberculosis which had been proceeding for half a century, and during the war years there had even been a small increase in the annual figures. These manifestations, taken in conjunction with the active work which had been done during the past ten years in the direct campaign against the disease (compulsory notification, home visitation, work of the tuberculosis dispensaries, sanatorium treatment, etc.), were somewhat disappointing; and it is reassuring to observe that during 1919 and 1920 the decline in mortality has been renewed. So much so is this the case that the number of deaths from all forms of tuberculosis in 1920 (312) was 31 per cent. less than the corresponding average annual figure for the five war years (1914-1918).

#### THE ST. PANCRAS TUBERCULOSIS SCHEME.

Emphasis has been laid in previous annual reports on the division of responsibility for anti-tuberculosis work between different authorities.

- (1) The Borough Council was originally the only local authority concerned, is still responsible by reason of the fact that all cases of tuberculosis are compulsorily notifiable to its Medical Officer of Health, and that it provides the tuberculosis dispensaries and appoints and pays the tuberculosis officers and tuberculosis visitors.
- (2) The London County Council arranges for the institutional treatment of tuberculous persons (chiefly through other bodies), and, to a great extent, controls the policy to be followed in connection with the admission of cases to sanatoria and other institutions and their after-care. The effect of this is that the work of the tuberculosis officers is very largely controlled by the County Council, though, at the same time, he is the Borough Council's officer and administratively an integral part of the Borough Medical Officer of Health's Department.
- (3) Other authorities are also closely concerned. The London Insurance Committee continued in 1920 to be responsible for the institutional treatment of insured persons, but this responsibility has since been transferred to the London County Council. The Board of Guardians fulfil a very important function in the provision of beds, chiefly for advanced cases, in the Poor Law hospitals. The Metropolitan Asylums Board also plays an important part in the matter by the provision and maintenance of sanatoria and hospitals.

As the result of this splitting of responsibility, the Borough Council and its Medical Officer of Health are not the controlling agents in the development and administration of the anti-tuberculosis work, and have, to a great extent, to shape their actions in order to conform with the policy of the other authorities.

*Visiting Work.*—The home visiting of notified and other cases of tuberculosis, and contacts, has been carried out by certain of the women inspectors working from the Town Hall, and by the nurses at the tuberculosis dispensaries. The papers in connection with all notified cases are filed at the Town Hall, and clinical and other records of those cases which pass through the hands of the tuberculosis officers are kept at the dispensaries. At the Town Hall Miss Bibby undertakes co-ordinating and advisory work in connection with tuberculosis, and Miss Blaxland and Miss Parnell are responsible for tuberculosis home visiting, to which they give part of their time. There is one nurse at the St. Pancras Dispensary (and its branch) who devotes to home visiting such of her time as is available for that purpose, and one nurse (part-time so far as St. Pancras is concerned) at the University College Hospital Dispensary.

The visiting (and certain other) work carried out in the Borough in connection with tuberculosis during 1920 was as follows:—

Home visits\* by—

Tuberculosis officers .. .. .	163
Women inspectors—	
(a) First visits to notified cases .. .. .	572
(b) Subsequent visits .. .. .	2062
Tuberculosis dispensary nurses .. .. .	980
	3777
Attendance of women inspectors at dispensaries .. .. .	201
Other visits of women inspectors for various purposes .. .. .	57
No. of cases in which disinfection was carried out .. .. .	75

TUBERCULOSIS DISPENSARIES.

The staff at the St. Pancras Dispensary (39, Oakley Square, and branch at 132, Malden Road), which serves the part of the Borough lying north of Euston Road (population in 1911, 173,132) consists of the Borough Council's tuberculosis officer, one tuberculosis nurse, and one (woman) clerical and general assistant, all full time officers. The last-mentioned officer was appointed in 1920. The tuberculosis dispensary at University College Hospital serves the whole of the Borough of Holborn (population in 1911, 49,357), in addition to the part of St. Pancras lying north of Euston Road (population in 1911, 45,255), as do also its staff, which consists of a part-time tuberculosis officer and a full-time tuberculosis nurse.

The work done at the dispensaries in 1920 is shown in the following table:—

	Tuberculosis Dispensary at University College Hospital.			Tuberculosis Dispensary at St. Pancras Dispensary 39, Oakley Square.			Branch Tuberculosis Dispensary of St. Pancras Dispensary at 132, Malden Road.		
	Insured persons.	Uninsured persons.	Total.	Insured persons.	Uninsured persons.	Total.	Insured persons.	Uninsured persons.	Total.
No. of <i>new</i> cases .. .. .	94	80	174	240	208	448	13	81	94
No. found to be suffering from pulmonary tuberculosis .. .. .	70	19	89	130	37	167	8	9	17
Ditto non-pulmonary do. .. .. .	4	5	9	7	25	32	—	7	7
Ditto non-tuberculous .. .. .	14	47	61	69	109	178	5	37	42
No. in whom diagnosis was found to be doubtful .. .. .	6	9	15	34	37	71	—	28	28
Total attendances .. .. .	765	517	1282	1518	1802	3320	45	681	726
No. of above attendances at which physical examinations and records were made ..	299	221	520	788	940	1728	42	324	366
Home visits by Tuberculosis Officer ..	4	1	5	114	44	158	Included in Oakley Square		
Ditto by Dispensary Nurse .. .. .	486	375	861	62	47	109	—	10	10
No. of persons referred to the hospital to which this Dispensary is affiliated ..	14	8	22	78	72	150	2	16	18
No. of consultations with Medical Practitioners .. .. .	—	—	—	—	7	7	—	—	—
No. of written reports to:—									
(a) Public Authorities .. .. .	260	79	339	1040	403	1443	5	84	89
(b) Practitioners .. .. .	13	5	18	220	90	310	3	19	22
No. of Specimens of sputum examined ..	51	15	66	532	266	798	Included in Oakley Square		

\* Exclusive of visits made by members of the Interim Tuberculosis Care Committee.

152

82

— 234

128  
69

62  
190

190

o sanatoria, 189

Institutions, 248

...the ...

been no cases in

re were 19 cases

There were 15 cases

Of these 52

r. Of these 53  
superintendents of

superintendents of

Percentage of Cases removed to Hospital.
95
97
94
91
96
96
97
96
96
96

---

It will be seen from the table that there has been a wave of increasing prevalence of the disease since 1917, when it reached the lowest point on record. The case mortality fortunately remains low.

Of the notified cases of scarlet fever, 831 (or 96·3 per cent.) were removed to hospital, as follows :—

To Metropolitan Asylums Board hospitals	..	..	823
To other hospitals	..	..	8
			<hr/> 831 <hr/>

*(Other statistical facts will be found on pages 28 to 30).*

**Return Cases.**—(Definition :—A case of scarlet fever occurring within 28 days of the return from hospital to the same house of a previous case of scarlet fever). There were 19 such cases in 1920, occurring in 19 houses. In each of two instances two previous cases had returned within the 28 days, and it was not possible to determine which were the infecting agents. The (?) infecting cases are therefore taken as numbering 21. In every instance the return case was in the same family as the (?) infecting case or cases. In 8 instances the (?) infecting case had rhinitis and nasal discharge since return (accompanied by sore-throat in one case, ear discharge in one, glandular enlargements in two, and desquamation on the feet in one), in one other instance ear discharge, and in three other instances desquamation on the feet. There were no obvious signs of infectiousness in the other 10 cases, though chronic enlargements of the tonsils, often with some glandular swelling, was found in a considerable proportion of the cases. The intervals between the return of the (?) infecting case and the onset of the illness of the return case were respectively 2, 3, 3, 3, 3, 3, 4, 5, 5, 5, 6, 8, 8, 8, 15, 16, 17, 21, 21, 24 and 26 days.

There was in addition one return case occurring 41 days after the return in the same family of a previous case, which suffered from rhinitis and nasal discharge, and another occurring 45 days after the return in another family in the same house of a previous patient, who was found to have a catarrhal "cold" giving a negative nasal swab.

There were three instances in which cases of scarlet fever developed within 28 days of the return from hospital to the same house of a previous case of diphtheria. In each of the 3 cases the scarlet fever and corresponding previous case of diphtheria were in the same family. In one instance the returned diphtheria case had sores on the face, and in the other two no signs of infectiousness. In one of the three instances the case of scarlet fever was followed by a second case taking its onset a day later than the first. In addition to these three there was one other instance in which a case of scarlet fever occurred 31 days after the return in the same family of a previous case of diphtheria, which showed no signs of infectiousness.

## DIPHTHERIA.

747 (civil) patients were notified in 1920 as suffering from diphtheria or membranous croup. Of these, 66 were afterwards found not to be suffering from the disease by Medical Superintendents of the Metropolitan Asylums Board, and one by other medical practitioners.

The corrected number of diphtheria cases (civil) notified was therefore 680, equal to an incidence rate of 2·92 per 1,000 civil population.

The number of deaths from diphtheria certified during the year was 33, equal to a death-rate of 0·14 per 1,000 civil population and a case mortality of 4·8 per cent. of cases notified.

In the following Table are set out the corresponding figures for the past 10 years :—

Year.	No. of Notifications.	Notification rate per 1,000 population.	No. of Deaths.	Death rate per 1,000 population.	Case mortality per cent.	Percentage of cases removed to hospital.
1911 ...	419	1·8	37	0·15	8·8	94
1912 ...	550	2·5	26	0·11	4·7	98
1913 ...	*391	*1·8	19	0·08	*4·9	97
1914 ...	426	1·9	30	0·14	7·0	87
1915 ...	311	1·7	24	0·11	6·3	95
1916 ...	383	1·9	23	0·12	6·0	95
1917 ...	381	2·0	25	0·13	5·5	99
1918 ...	340	1·9	31	0·17	9·1	93
1919 ...	283	1·3	21	0·09	7·4	97
1920 ...	680	2·9	33	0·14	4·8	97

\* From 1913 onwards the figures have been corrected for errors in diagnosis.

The prevalence of diphtheria was greater in 1920 than in recent years. The case mortality however, was comparatively low.

Of the notified cases of diphtheria, 723 (or 96·8 per cent.) were removed to hospital, as follows :—

To Metropolitan Asylums Board Hospitals	..	..	720
To other hospitals	..	..	3

*Other statistical facts will be found on pages 28 to 30.*

*Return Cases.*—(Definition :—A case of diphtheria occurring within 28 days of the return from hospital to the same house of a previous case of diphtheria.) There was 9 such cases in 1920, occurring in 9 houses. In 7 instances the cases were in the same family, and in 2 instances in different families in the same house. The condition of the (?) infecting cases was as follows :—(1) suffering from measles; (2) nasal discharge, giving negative swab, but positive swab from throat; (3) sore throat; (4) sores on the face; (5) nasal discharge (negative swabs from nose and throat); (6) no signs of infectiousness; (7) no signs of infectiousness, but positive swab from nose and negative from throat; (8) nasal discharge (negative swabs from nose and throat); (9) nasal discharge (negative swab from nose). In a number of cases there was chronic enlargement of the tonsils. The intervals between the return of the (?) infecting case and the onset of the illness of the return case were respectively 1, 3, 5, 11, 12, 13, 15, 19, and 24 days. In addition there was one case of diphtheria occurring 33 days after the return in the same family of a previous case of diphtheria, which showed no signs of infectiousness and gave a negative swab from the throat.

In three instances, cases of diphtheria occurred a few days after the return from hospital to the same family of a previous case of *scarlet fever*, the intervals being 7, 9 and 14

days respectively. The condition of the scarlet fever convalescent in each case was as follows:— (1) Rhinitis and glandular enlargement (negative swabs from nose and throat, but later a positive swab obtained from the nose). (2) No signs of infectiousness, but positive swab from throat. (3) No signs of infectiousness, and negative swabs from nose and throat. In one of the instances (1 above), the case of diphtheria was followed by a series of cases of nasal and throat diphtheria.

### TYPHOID OR ENTERIC FEVER.

18 cases were notified during 1920 as suffering from this disease. Of these, 4 were afterwards found not to be suffering from the disease, the number of actual cases being 14. Only 1 of the cases was fatal. 2 of the cases were paratyphoid B.

*Other statistical facts will be found on pages 28 to 30.*

The 18 cases were treated as follows:—

		Cases notified.	Not typhoid.	Diagnosis not contradicted.
In hospitals of the M.A.B.	..	9	3	6
In other hospitals	..	8	1	7
In their own homes	..	1	—	1

The cases were all in different houses. In one case the patient arrived from Cork (Ireland), in the early stage of the disease. One case was a nurse who had been nursing a fatal case of typhoid fever until a fortnight before the onset of her own illness. One case (para-typhoid B), was one of a series of cases which occurred at the Bedford College for Women, where the patient was a student. In the other 11 cases the source of illness was not traced.

The number of cases of typhoid fever, corrected for errors of diagnosis, which have been notified since 1913, and the number of these cases which have died, are shown in the following table:—

Year.	Cases notified.	Fatal cases.	Case Mortality per cent.
1913 ..	26	6	23
1914 ..	27	4	15
1915 ..	16	8	31
1916 ..	29	5	17
1917 ..	17	5	29
1918 ..	11	5	45
1919 ..	7	2	29
1920 ..	14	1	7

## ACUTE ANTERIOR POLIOENCEPHALITIS AND POLIOMYELITIS.

Two cases were notified in 1920, one as polioencephalitis, and one as poliomyelitis. The latter case was fatal. The particulars were as follows:—

W. C. H., male, aged 8. Ward 1 (D). Onset, January 17. Pain in back, vomiting; afterwards persistent temperature, pains in head, head retraction, increasing paralysis (from January 20) of legs, afterwards involving the arms, tenderness of limbs, Kernig's sign, knee jerks abolished. Died January 23, probably from respiratory paralysis. No P.M. C.s. fluid under pressure, clear, colourless, sterile, deposit almost nil. Albumen very faint trace, Fehling's reduction trace. The death was certified as due to poliomyelitis.

W. C., male, aged 2. Ward 7 (U). Onset October 11. Notified October 21. Malaise, drowsiness, vomiting, fever, constipation first three days, pain at back of head and neck, knee jerks absent, Kernig's sign, Babinski's sign doubtful, paralysis of right lower limb and right external rectus. Admitted to Middlesex Hospital, October 16. On January 21, 1921, eye muscles and left leg normal; right leg—still paralysis of thigh and leg muscles, but marked progress still continuing.

## EPIDEMIC CEREBROSPINAL MENINGITIS.

6 patients were notified in 1920 as suffering from cerebrospinal meningitis, of which one was afterwards found to have been wrongly diagnosed. The actual number of cases reported was therefore 5. 3 of the 5 cases were fatal (1 of the 3 deaths occurred in 1921).

Particulars in regard to the cases are set out in the following table:—

Date of Notification.	Date of Onset.	Date of Death.	Age.	Sex.	Ward and District.	Bacteriological Examination, etc.
February 9 ...	February 2	<sup>1</sup> Recovered	58	F	IV. O.	C.s. fluid "positive for c.s. fever."
" 25 ...	" 21	February 27	10	F	III. H.	"Gram-positive" cocci found in c.s. fluid (not pneumococci).*
April 23 ...	March 12	April 24 ...	3 mths.	F	I. C.	Meningococcus isolated from c.s. fluid. Diagnosis confirmed P.M.
September 20	August 27 ...	<sup>2</sup> Recovered	2 9 mths.	M	IV. P.	"Gram-Negative" intracellular diplococci found in c.s. fluid.
December 30	December 13	Jan. 3 (1921)	3 mths.	F	IV. P.	C.s. fluid (turbid) showing "gram-positive" diplococci resembling pneumococci. P.M.—Purulent meningitis showing the same organisms.*

\* Diagnosis of cerebrospinal meningitis nevertheless maintained on clinical grounds.

1. On 22nd January, 1921, patient still suffered from weakness, debility, and giddiness. No paralysis, deafness, or mental impairment.
2. Complete recovery.

No connection between the cases and no source of infection was found. The cases were treated in the Highgate Hospital, Paddington Green Children's Hospital, the Great Ormond Street Children's Hospital, and the North-Western (M.A.B.) Hospital (two cases).

From 1913 the number of cases of cerebrospinal meningitis notified or otherwise reported (corrected for errors of diagnosis, etc.), and the number of these cases which died, were as follows:—

			Cases notified.	Fatal cases.	Case mortality per cent.
1913	..	..	3	2	67
1914	..	..	3	2	67
1915	..	..	38	21	55
1916	..	..	20	12	60
1917	..	..	21	16	76
1918	..	..	9	8	89
1919	..	..	8	7	87
1920	..	..	5	3	60

### ENCEPHALITIS LETHARGICA.

In the 53 weeks ended January 1st, 1921, 11 patients were notified as suffering from encephalitis lethargica, of which 4 were afterwards found not to be suffering from that disease. One other case was reported without being formally notified. The number of actual cases reported was therefore 8.

\* Two of the cases were fatal, making a case mortality of 25 per cent.

The particulars of the cases were as follows:—

W. H. C. Male. Aged 56. Ward 8 (N). Office caretaker. Not notified. Ill from about November 13, 1919, with frontal headaches, drowsiness (but restless), and lack of interest; diplopia apparently dating from a month earlier; marked constipation; in bed from about November 28 with lethargic condition (but could be roused), and stiffness of lower limbs. Admitted to Royal Free Hospital on December 13. Very marked lethargy (but answered questions), no other paralysis (but difficulty in keeping eyes open for long), or mental impairment, fundus oculi normal, obstinate constipation, temperature for first two days only. Progressive weakness, difficulty in breathing, died December 23. Wassermann of blood and c.s.f. negative, c.s.f. lymphocytes and albumen slightly + : white cells 25,800. P.M.—brain—surface extremely congested; localised patches of slight meningitis, with exudation showing cells but no organisms; pin-point hæmorrhages about sylvian fissures, spinal cord congested, but less so.

E. J. S. Male. Aged 54. Ward 3 (G). Schoolmaster. Notified December 30, 1919. Onset December 14, 1919, with giddiness, vomiting, fever, and diplopia (no headache or constipation then). In bed from December 20, with evening temperature, some degree of constipation, marked lethargy (could be roused), no mental impairment, ptosis, diplopia and fine nystagmus, tremor of hands, a certain heaviness of speech, and no other paralysis. Not removed to hospital. Recovered, but vision not good and eyes have a staring appearance. (February 25, 1920.)

F. H. Male. Aged 16. Ward 3 (I). Engineer. Notified May 5th, 1920. Onset a few days before April 17. Fell from bicycle. Sleeplessness and drowsiness, headaches, constipation, no pain, diplopia, "eyes crossed" on April 19. Admitted to Middlesex Hospital on April 21. In hospital—evening temperature, lethargy, no other mental impairment, knee jerks absent on left side, no paralysis, resented interference at first. Recovery followed by relapse. Report on February 8, 1921—Movements slow and laboured, face dull and expressionless. Ocular movements full, but reverse nystagmoid jerks on lateral deviation, slight rigidity and weakness of right arm with slight tremor, but not on movement, slight rigidity of right leg, walks stiffly, reflexes normal.

F. R. M. Male. Aged 36. Ward 2 (F). No occupation. Notified June 6, 1920. Onset about May 18. Pains in shoulders and arms—later generalised—lasted three weeks, loss of appetite, restless at night, shouted in sleep, diplopia, slight squint, drowsy from 7th June. Admitted to Highgate Hospital on 8th June. Only symptoms T 99, marked constipation, extreme drowsiness. Condition on January 21, 1921—No ocular or other paralysis, or tremors; inclined to be lethargic, slow mental processes and unreliable memory, general debility, headaches, insomnia and constipation persistent, unable to work.

H. T. Male. Aged 14. Ward 6 (J). Cabinet making. Notified July 8, 1920. Onset about May 29. Lethargy, constipation, weakness of left arm and legs, pain in left leg, no

\* These two deaths are counted to 1919 and 1921 (see details of cases).

squint or diplopia, later tendency to dribble. Admitted to University College Hospital on July 5th—Extreme lethargy, lateral nystagmus (no ptosis or squint), slight left facial paralysis, paresis of left leg, tremor left hand, mental condition dull, speech slow. Condition on 24th January, 1921—General weakness, gets tired easily, slowness of speech and movements, marked weakness of back and left arm and leg, left knee jerks weaker than right, paralysis of left superior oblique, marked lateral nystagmus.

E. A. Male. Aged 39. Ward 4 (P). Unemployed. Notified August 20, 1920. Onset before July 28. Headache, drowsiness, constipation, "queer in the head." Admitted to St. Pancras Hospital on August 11. On admission—No fever, marked lethargy (could not be roused), slight nystagmus, but no ptosis or squint, no paralysis, but general weakness, very slow cerebration, memory very bad, speaks slowly and with jaws nearly closed. Condition on January 29, 1921—Still in St. Pancras Hospital, just able to sit up, cerebration slow, rather irritable, right pupil smaller than left, marked constipation, some athetosis.

E. O. Female. Aged 36. Ward 5 (Q). Notified December 10, 1920. Onset August 28. Constipation, stiff neck, very sleepy and tired. On November 16 all her teeth were extracted, but no improvement, prominence of eyes noticed. Admitted to St. Mary's Hospital on November 19. Condition in hospital—No fever, very marked lethargy, eyes slight and passing divergence, temporary loss of accommodation-reflex of pupil and temporary ptosis, bilateral facial paralysis, tongue kept protruded, general wasting of arm and leg muscles, temporary foot drop on left side, mental condition quite clear, patient "fussy," voice monotonous and articulation imperfect, heart dilated, pulse rapid. Condition on February 3rd, 1921—Still in hospital, getting up, much improved, facial paralysis diminishing, cannot walk owing to arthritis of the hip joints, with scoliosis.

L. C. Female. Aged 20. Ward 7 (T). Notified December 27, 1920. Onset December 11. Giddiness, gradual onset of drowsiness, diplopia, constipation, twitching of face from December 18. Admitted to University College Hospital on December 21. Condition in hospital—Maximum temperature 103 deg., extreme lethargy, no ptosis or nystagmus, (?) slight squint, (?) some slight bilateral lower facial weakness, no paralysis, but general weakness, mental condition obscured by lethargy, no delirium, slight tremor, incontinence. Pyrexia of typhoid type continued, and patient died on January 4, 1921. P.M.—Diagnosis confirmed. Microscopic examination of brain showed diffuse perivascular round-cell infiltration of small lymphocytes. The lesions most marked in the pons, especially the seventh nerve nucleus.

## MALARIA.

58 cases of malaria were notified in 1920, and 2 deaths were recorded. In all cases the infection had been contracted abroad. All the cases were visited and such assistance was given as was necessary.

## DYSENTERY.

4 cases of dysentery were notified in 1920, the diagnosis in one case being afterwards altered. They were all contracted abroad. Seven deaths from dysentery were registered during the year.

## PNEUMONIA.

During the year there were 142 cases of Acute Primary Pneumonia notified, and 108 of Acute Influenzal Pneumonia. There is reason to believe that the notification of these diseases is far from complete. This is partly due to uncertainty of definition.

During 1920 there were registered 112 deaths ascribed to broncho-pneumonia, 46 to lobar pneumonia, and 39 to pneumonia (type not stated).

Every case notified has been promptly visited by a lady sanitary inspector and such assistance given as the case seemed to require. The District Nursing Associations are paid by

the Council for the nursing of case of pneumonia and influenza at the rate of 1s. per visit. In 1920, 54 cases of influenza and pneumonia were dealt with at the Council's expense, 533 nursing visits being paid.

The following is an analysis of the cases notified and visited :—

Age and Sex.	Acute Primary Pneumonia.	Influenzal Pneumonia.
Males	96	67
Females	46	41
—	—	—
0—1	18	1
1—5	27	3
5—15	26	5
15—25	21	26
25—55	43	64
55 and over	7	9

Of the 142 cases of acute primary pneumonia, 60 were treated in their own homes and 82 in hospitals. Of the hospital cases, 35 were treated in the St. Pancras Poor Law Hospitals and 47 in voluntary hospitals. The 82 cases were already in hospital when visited after notification, with the exception of 3 which were sent to hospital after being visited. In regard to the 60 cases which were treated at home, 25 were under the care of visiting nurses (in 17 of the cases the nurse was sent in as a result of the sanitary inspector's visit).

With regard to the 108 cases of acute influenzal pneumonia, 57 were nursed at home and 51 in hospitals. Of the hospital cases, 37 were treated in the St. Pancras Poor Law Hospitals and 14 in voluntary hospitals. The 51 cases were already in hospital when visited, with the exception of 9 who were sent to hospital after being visited. In regard to the 57 cases which were treated at home, 20 were under the care of visiting nurses (in 12 of these cases the nurse was sent in as a result of the sanitary inspector's visit).

Most of the hospital cases were notified by the hospital authorities.

That the accommodation for home nursing was inadequate for many of the cases which were not removed to hospital is shown by the fact that only 20 out of the 60 acute primary pneumonia cases and 21 out of the 57 acute influenzal pneumonia cases were nursed in a sick room devoted to their exclusive use. In the other cases the patient was nursed in a room used as a family living room or as a bed room for other members of the family. In many of the homes where the family succeeded in providing the patient with a separate sick room this was only done at the expense of grave overcrowding of the rest of the family. Our experience in this respect shows that there is a necessity for a greater provision of hospital beds for cases of non-infectious acute illness.

After-care visits were made to 12 of the cases under two years of age (11 acute primary, 1 acute influenzal).

#### OTHER NOTIFIABLE INFECTIOUS DISEASES.

Puerperal fever, ophthalmia neonatorum, and measles (as well as whooping cough) are dealt with on pages 24 to 27.

No cases of typhus, cholera, plague or human anthrax, glanders or hydrophobia, were reported in St. Pancras in 1920.

A number of persons who had proceeded to St. Pancras after having been in contact with small-pox and other dangerous diseases (mostly on shipboard) were reported and kept under observation, with negative results in all cases.

#### ANTHRAX IN SHAVING BRUSHES.

In the latter part of 1919 certain cases of anthrax (not in St. Pancras) occurred, which were believed to be due to the use of shaving brushes imported from Japan. Anthrax germs were found in the brushes, which were believed to be made from horse-hair infected with anthrax discharges. The brushes were made in imitation of badger-hair brushes. Enquiry was made at various shops in the borough, and brushes from the suspicious source, to the number of  $33\frac{1}{2}$  doz., were found at 16 shops. The owners of the brushes were induced to give up the brushes for destruction.

By Order in Council, dated 9th February, 1920, the importation of Japanese shaving brushes into this country was forbidden.

In February, 1921, in consequence of a letter from the Ministry on the subject, a circular letter was sent to all chemists, barbers, and other retailers who might be selling shaving brushes in St. Pancras, indicating the action which they should take with a view to the prevention of danger from infected Japanese brushes.

#### TRACHOMA.

In November, 1920, the Ophthalmic Registrar at University College Hospital informed the Medical Officer of Health of certain cases of Trachoma in a Gower Street lodging house. On enquiries being made it was found that in the house there were four cases (aged 24, 15, 7 and 5) in a party of Syrians, and 4 cases (all adults) in a party of Mesopotamian Armenians. The two parties were *en route* from the East to Canada and the United States, respectively. They had been admitted into this country, and were precluded from embarking for America on account of the immigration laws of Canada and the United States in regard to trachoma. Ultimately some of the cases were able to get through, while the remainder proceeded to another London address. The appropriate medical officer of health was duly informed. The Ministry of Health were advised of the facts and their attention called to the undesirability of cases of trachoma being allowed to enter this country under such circumstances.

#### INFLUENZA.

The force of the pandemic of 1918 and 1919 had spent itself in the latter year so far as St. Pancras was concerned. In 1920, 46 deaths were certified as due to Influenza.

In the table on the next page the deaths from influenza, and from heart diseases, bronchitis, pneumonia and pulmonary tuberculosis (causes of death which were found to vary in fatality with influenza) are set out for each week in 1918, 1919, and 1920.

#### DIARRHŒA AND ENTERITIS.

54 deaths from diarrhœa and enteritis were registered during 1920, equal to a death-rate of 0.23 per 1,000 population.

Of these, 44 were in children under five years of age, and 37 in babies under one.

DEATHS FROM INFLUENZA, HEART DISEASE, BRONCHITIS, PNEUMONIA, AND PULMONARY  
TUBERCULOSIS reported in each week in 1918, 1919, and 1920.

Week No. 1918	Influenza.	Diseases of Heart.	Bronchitis.	Pneumonia.	Pulmonary Tuberculosis.	Week No. 1919	Influenza.	Diseases of Heart.	Bronchitis.	Pneumonia.	Pulmonary Tuberculosis.	Week No. 1920	Influenza.	Diseases of Heart.	Bronchitis.	Pneumonia.	Pulmonary Tuberculosis.
1	—	13	8	9	5	1	1	9	4	2	7	1	—	7	6	—	7
2	—	14	8	5	12	2	3	9	3	—	11	2	—	8	8	4	7
3	—	12	6	13	10	3	2	3	6	2	5	3	2	3	6	4	3
4	—	12	—	8	7	4	1	12	6	7	5	4	4	7	5	5	4
5	1	10	2	3	6	5	4	12	10	8	4	5	—	8	2	9	3
6	1	10	7	3	5	6	6	7	11	6	7	6	2	10	9	9	5
7	—	6	4	4	4	7	22	11	25	12	11	7	1	8	12	5	5
8	—	5	4	4	10	8	40	13	31	26	6	8	2	8	8	11	5
9	—	11	3	4	7	9	51	7	27	18	10	9	1	11	6	11	2
10	—	8	6	11	6	10	30	10	12	5	6	10	—	12	7	5	4
11	—	7	6	9	4	11	33	13	14	9	3	11	3	8	10	11	7
12	—	6	10	6	6	12	12	10	12	6	5	12	1	8	7	5	10
13	—	5	5	3	9	13	7	14	7	2	6	13	2	10	9	6	10
14	—	5	5	4	9	14	4	5	6	1	3	14	4	8	4	3	5
15	—	4	5	14	8	15	7	10	5	2	5	15	6	8	5	7	5
16	—	11	4	8	7	16	4	13	5	1	5	16	5	5	6	11	4
17	1	11	3	4	6	17	3	2	3	3	8	17	2	11	6	6	10
18	—	8	1	5	5	18	5	7	4	5	5	18	—	7	4	7	3
19	—	5	3	4	5	19	2	4	5	2	6	19	3	11	6	3	6
20	—	11	1	3	9	20	1	6	2	3	6	20	—	10	6	4	6
21	—	9	4	2	10	21	1	4	2	—	5	21	1	6	2	—	5
22	—	3	2	2	6	22	1	5	2	1	5	22	—	3	6	—	4
23	—	5	1	5	10	23	—	11	—	2	7	23	2	5	1	—	6
24	—	3	2	3	7	24	—	4	2	1	4	24	—	4	—	1	3
25	—	6	4	4	11	25	1	5	2	1	1	25	—	4	1	2	1
26	2	7	2	7	5	26	—	6	—	—	5	26	—	7	2	4	6
27	8	8	3	2	13	27	—	1	—	2	9	27	—	5	2	2	1
28	21	5	1	11	9	28	—	7	3	1	3	28	—	5	1	2	2
29	8	7	2	9	4	29	—	4	5	—	5	29	1	2	2	1	7
30	6	7	2	5	9	30	2	—	3	—	4	30	—	6	1	1	4
31	1	6	2	2	2	31	—	3	3	—	3	31	—	5	1	—	3
32	1	4	2	3	10	32	—	6	—	1	1	32	—	8	1	2	3
33	2	7	—	1	1	33	1	3	2	3	6	33	—	3	3	—	4
34	—	2	—	2	6	34	1	8	2	4	5	34	1	11	2	3	5
35	3	4	1	1	2	35	—	4	1	2	7	35	—	5	—	—	4
36	3	4	1	5	3	36	—	3	—	3	2	36	—	11	2	1	3
37	3	5	1	—	5	37	—	4	2	—	3	37	—	9	1	3	3
38	—	7	1	3	9	38	—	4	1	1	3	38	—	5	2	3	3
39	2	3	1	5	8	39	1	3	—	—	6	39	—	3	2	3	1
40	3	7	5	6	3	40	1	5	4	1	3	40	—	6	3	—	3
41	10	3	5	10	2	41	1	9	7	2	4	41	—	7	2	1	9
42	31	13	6	15	12	42	2	6	7	2	4	42	—	12	1	2	4
43	99	12	15	28	12	43	3	11	7	4	9	43	—	6	2	1	3
44	144	17	12	19	12	44	1	3	7	6	5	44	—	10	3	1	4
45	111	10	10	20	13	45	—	10	8	3	2	45	—	10	7	3	6
46	71	7	15	15	19	46	2	8	6	3	2	46	—	13	6	—	4
47	49	10	10	10	13	47	—	10	4	1	3	47	1	11	5	2	5
48	46	9	7	17	12	48	—	7	7	3	2	48	—	13	6	4	7
49	34	5	13	11	4	49	1	5	4	3	10	49	—	6	8	3	6
50	16	7	6	3	10	50	1	10	6	3	6	50	—	13	9	3	2
51	9	8	6	6	7	51	—	10	4	1	6	51	1	10	5	6	9
52	10	3	4	5	14	52	2	4	2	5	4	52	1	18	6	9	5
												53	—	14	9	9	3

## SYPHILIS.

In the following table are given the age and sex distribution of deaths certified during 1920 as due to (a) declared syphilis, (b) locomotor ataxy and general paralysis of the insane, which are believed by most experts to be late manifestations of the disease, and (c) aortic aneurysm, which many authorities now consider to be at any rate frequently caused by it:—

	0-1	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	75-85	85 up.	Total Males.	0-1	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	75-85	85 up.	Total Females.	Total Persons.
Syphilis .. ..	9	1	—	—	—	1	2	—	—	—	—	13	6	—	—	—	1	—	—	1	—	—	—	8	21
Locomotor ataxy .. ..	—	—	—	—	—	2	2	—	1	—	—	5	—	—	—	—	—	—	—	—	—	—	—	—	5
General paralysis of the insane .. ..	—	—	—	—	2	5	3	—	—	—	—	10	—	—	—	—	—	—	—	—	—	—	—	—	10
Aortic aneurysm .. ..	—	—	—	—	—	1	1	4	2	—	—	8	—	—	—	—	2	—	—	2	1	—	—	5	13

## CANCER.

299 deaths were registered during 1920 as due to cancer, under the various names of cancer, carcinoma, epithelioma, scirrhus, sarcoma, &c.

This is equal to a death-rate of 1·28 per 1,000 population, and 1·29 per 1,000 civil population.

The sex distribution of the deaths and death-rates is shown in the following table:—

Sex.	No. of Deaths.	Death-rates per 1,000 males or females living (based on 1911 Census).
Males ..	150	1·38
Females ..	149	1·31
Both Sexes ..	299	1·34

The deaths registered as due to cancer are set out in the following table for the past 13 years:—

SEX,	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	Average for 12 years.	1920
Males ..	—	—	—	—	—	127	127	120	125	135	125	114	—	150
Females ..	—	—	—	—	—	158	140	138	142	146	144	131	—	149
Both Sexes	288	232	266	274	247	285	267	258	267	231	269	245	265	299

## Section IV.—SANITARY CIRCUMSTANCES OF THE DISTRICT.

### SANITARY INSPECTION OF THE BOROUGH.

*Inspections.*—Altogether 73,154 inspections, including 3,759 inspections in connection with Ministry of Food Orders, were made in 1920 by the staff of Inspectors and Visitors. These consisted of 40,317 initial inspections (including the 3,759 Food Control inspections), and 32,837 re-inspections.

Of these inspections, 42,742 were made by the District Sanitary Inspectors, 7,366 by the Sanitary Inspectors for Food and Food places, 2,604 by the Sanitary Inspector for Factories and Workshops, and 20,442 by the Women Sanitary Inspectors and Health Visitors.

The inspections made by each individual Inspector and Visitor are shown in table 10, on page 97.

The work of the various classes of Inspectors and Visitors is set out in tables 7, 8 and 9, on pages 93 to 96.

The inspections dealt with above are exclusive of the visits made by the Council's staff at the Maternity and Child Welfare Centres (see page 17), and by the staff of the Tuberculosis Dispensaries (see page 38); nor do they include the work of the disinfecting staff (see page 31).

*Notices served and result of service.*—3,719 intimation notices (comprising 8,422 items) were served by the Sanitary Inspectors during 1920. These were made up as follows—

	District Inspectors.	Factory & Workshop Inspector.	Food Inspectors.	Women Inspectors.	Total.
In respect of Nuisances ..	5139	61	1	—	5201
In respect of the Tenement House By-laws ..	1297	—	—	—	1297
In respect of Breaches of Statutes in Factories, Work- shops and Workplaces ..	5	458	—	—	463
In respect of other Breaches of Statutes and By-laws ..	1448	7	6	—	1461
	<hr/> 7889	<hr/> 526	<hr/> 7	<hr/> —	<hr/> 8422

These intimations are classified in tables 11, 12, 13 and 14, on pages 98 and 99.

1,862 Statutory notices (comprising 3,027 items) were served during 1920 and the early part of 1921, following non-compliance with these intimation notices. These are also classified in tables 11, 12, 13 and 14, on pages 98 and 99.

The following prosecutions were undertaken during the year in respect of general sanitary work :—

## SUMMONSES.

*Under the Public Health (London) Act, 1891 (except in respect of Food).*

Situation of Property.	Offence.	Date of Hearing of Summons.	Result of Proceedings.
133, Drummond Street ...	Occupied house without a proper and sufficient supply of water	Jan. 6th ...	Abatement Order made, costs £1 5s. 0d.
125, " ...	Failing to comply with Nuisance Order ...	" 8th ...	Fined £2, costs £1 1s.
127, " ...	Do. do. ...	" 8th ...	Do.
1, Evangelist Road ...	Rooms damp and roof defective ...	" 30th ...	Abatement Order, costs £1 3s.
22, Castle Road ...	Walls and ceilings dirty, guttering and rain-water pipe defective	" 30th ...	Do. costs £1 3s.
38, Highgate Road ...	Walls and ceiling dirty; roof defective ...	" 30th ...	Do. costs £1 3s.
3, Haverstock Place ...	Walls and ceiling dirty; roof, rain-water pipe and dustbin defective	" 30th ...	Do. costs £1 3s.
5, Stucley Place ...	Room dirty and rain-water pipe defective ...	March 6th ...	Abatement Order, costs £1 5s.
6, " ...	Roof of w.c. defective, guttering defective, and offensive accumulation in yard	" 6th ...	Fined £1, costs £1.
5, Willingham Terrace ...	Walls and ceilings dirty and dilapidated, and walls damp; guttering defective and absence of proper dust receptacle	" 6th ...	Order to abate nuisance within 28 days.
9A, Medburn Street ...	Walls and ceilings dirty; ceiling and dustbin defective	April 30th ...	Adjourned <i>sine die</i> .
" ...	Water closet with an insufficient flush of water	" 30th ...	Fined 10s.
32, Queen's Crescent ...	Drain defective, unventilated soil pipe, and w.c. without a seat	May 13th ...	Abatement Order, costs £1 5s.
66, Falkland Road ...	Fixing new w.c. basin and trap without notice	May 13th ...	Fined 20s.
56, William Street ...	Ceilings dirty, roof defective; insufficient flush of water	June 11th ...	Summons withdrawn, costs £2 2s.
225, Hampstead Road ...	Walls and ceilings dirty; washhouse roof defective	" 11th ...	Abatement Order, costs £2 2s.
9A, Medburn Street ...	Walls and ceilings dirty; ceiling and dustbin defective	" 11th ...	Abatement Order, costs £1 3s.
3, Howland Street ...	Walls and ceilings dirty; w.c. basin defective, and w.c. apartment foul	" 25th ...	Summons withdrawn, costs £2 2s.
8, Sidmouth Mews ...	Drain defective ...	July 9th ...	Abatement Order, costs £2 2s.
29, Argyle Square ...	Drain stopped and defective ...	" 22nd ...	Do. do. £1 1s.
30, " ...	Do. do. ...	" 22nd ...	Do. do. £1 1s.
41, Stibbington Street ...	Yard paving defective ...	Aug. 6th ...	Fined £5.
41, " ...	Roof defective ...	" 6th ...	Abatement Order, costs £1 5s.
39, " ...	Do. ...	" 6th ...	Do. do. £1 5s.
69, Osnaburgh Street ...	Walls, ceilings and w.c. apartment dirty; roof defective and an offensive accumulation in yard	" 13th ...	Do. do. £2 2s.
4, St. Silas Street ...	Walls and ceilings dirty, w.c. basin foul, and manhole cover defective	Sept. 20th ...	Order to abate nuisance within 8 weeks
4, " ...	Yard paving defective ...	" 20th ...	Summons withdrawn.
74, Falkland Road ...	Room damp ...	" 24th ...	Summons withdrawn, costs £2 2s.
9, Litcham Street ...	Dustbin defective ...	" 24th ...	Do. £1 3s.
18, " ...	Do. ...	" 24th ...	Do. £1 3s.
1, Hawley Mews ...	Drain and roof defective ...	Oct. 22nd ...	Abatement Order, costs £3 3s.
Torriano Cottages—Yard at rear	Van used as a human habitation ...	" 22nd ...	Summons withdrawn.
5, Willingham Terrace ...	Dirty, damp, and dilapidated rooms, and defective guttering	" 22nd ...	Do.
33, Oseney Crescent ...	Walls damp and rain-water pipe defective ...	" 22nd ...	Summons withdrawn, costs £1 3s.
21, Little Randolph Street	Water closet in such a position as to be a nuisance	" 22nd ...	Do. do. £2 2s.
72, Gaisford Street ...	Dustbin defective ...	Nov. 5th ...	Do. do. £2 2s.
35, Harrison Street ...	Do. ...	" 22nd ...	Summons withdrawn, costs £5 5s.
15, " ...	Roof defective ...	" 22nd ...	
3, " ...	Do. ...	" 22nd ...	
59, " ...	Drain ventilating pipe defective ...	" 22nd ...	
33A, " ...	Absence of proper metal dustbin ...	" 22nd ...	Abatement Order, costs £1 7s.
54, Willes Road ...	Walls and ceilings dirty and drain defective	Dec. 7th ...	
69, Osnaburgh Street ...	Failing to comply with Nuisance Order ...	" 17th ...	
1, Hawley Mews ...	Do. do. ...	" 17th ...	Fined £5, costs £1.

*Metropolis Management Act, 1855.*

Situation of Property.	Offence.	Date of Hearing of Summonses.	Result of Proceedings.
337, Kentish Town Road	Constructing soil and vent pipe with improper joints	Oct. 22nd ...	Summons withdrawn, costs 23s.

## PREMISES AND OCCUPATIONS CONTROLLED BY BY-LAWS AND REGULATIONS.

*Offensive Trades.*—There are two licensed premises for such trades in St. Pancras, viz., a tripe-dresser's in Kentish Town Road, and a tallow-melter's in Tudor Place. 39 visits were made to these premises in 1920.

### REGISTERED TENEMENT HOUSES.

At the end of 1920 there were 2365 such houses on the Register. Statistics as to the inspection of these and other houses will be found in tables, Nos. 7 and 12, on pages 93 and 98.

### SMOKE-PREVENTION.

During the year 477 observations of smoke shafts were made. There were no prosecutions.

### CONSTRUCTIONAL DRAIN WORK.

The sanitary inspectors have the duty of supervising all work upon drains, including construction, reconstruction and repairs. During the year the following work has been done under this heading :—

				First inspections.	Consequent re-inspections.
Drainage work done under notice .. .. .	..	..	..	194	2903
Voluntary drainage work .. .. .	..	..	..	1660	2365
Drains of new buildings .. .. .	..	..	..	207	553
				<u>2061</u>	<u>5821</u>

The tests which have been applied to drains during 1920 are shown in the following table :—

		After In- fectious Disease.	Upon Com- plaint.	Upon systematic Inspection	Old Buildings.		New Buildings at com- pletion of work.	Total.
					At com- mence- ment of work.	At com- pletion of work.		
By Grenade.	1. Defects found ...	36	50	6	—	4	—	96
	2. No result ...	271	109	94	—	11	1	486
	3. Total ...	307	159	100	—	15	1	582
By Smoke.	1. Defects localised ...	—	1	—	—	—	—	1
	2. No result ...	—	—	—	—	1	1	2
	3. Total ...	—	1	—	—	1	1	3
By Water.	1. Not found water-tight	—	—	—	—	31	—	31
	2. Found water-tight ...	—	—	—	—	336	47	383
	3. Total ...	—	—	—	—	367	47	414
Total ...		36	51	6	—	35	—	128
		271	109	94	—	348	49	871
		307	160	100	—	383	49	999

*Drainage Register.*—The following is an analysis of the Drainage Register during 1920 :—

Plans deposited—Old Buildings under Notice	..	..	..	82
"    "    Old Buildings, Voluntary	..	..	..	112
"    "    New Buildings and Additions	..	..	..	29
				<hr/>
				223
Applications without Plans	..	..	..	124
				<hr/>
Total number of Applications and Plans	..	..	..	347
				<hr/>

#### WATER SERVICE.

The following notices have been received during the year from the Metropolitan Water Board as to houses from which water has been cut off :—

1.—Demolition	..	..	..	..	..	—
2.—Empty	..	..	..	..	..	2
3.—Leakage	..	..	..	..	..	1
4.—Non-payment of Rates	..	..	..	..	..	1
5.—No statement (withdrawals)	..	..	..	..	..	—
6.—By request	..	..	..	..	..	1
7.—Broken Supply Pipe	..	..	..	..	..	6
						<hr/>
						11
						<hr/>

#### CANAL BOATS ACTS.

During the year Inspector Auger examined 3 canal boats, which were occupied by 6 adults and 3 children. Two of the boats were registered for 3 adults each, and in the other case the registration certificate was not on board. No other contravention of the Acts were found.

A weekly inspection of the canal and wharves has been made and the absence of a greater number of boats inspected is attributed by the Inspector to the great reduction in the local trade in building materials.

#### INHABITED HOUSE DUTY.

Applications for certificates under Section 11 of the Inland Revenue Act, 1903, were received during 1920 in respect of 2 houses comprising 15 tenements. These were granted.

#### THE RAG FLOCK ACT, 1911.

No samples were taken under this Act during 1920.

#### PUBLIC MORTUARIES AND CORONER'S COURT.

Number of bodies deposited in the General Mortuary in 1920	..	..	280
"    "    Infectious	..	..	2
			<hr/>
Total	..	..	282
			<hr/>

#### INQUESTS HELD DURING 1920—

In the Coroner's Court—General Cases from St. Pancras	..	..	314
"    "    Poor Law Cases	..	..	43
"    "    General Cases from other Boroughs	..	..	25
			<hr/>
Total	..	..	382
			<hr/>

## FACTORY AND WORKSHOP ACTS.

The following five tables are those asked for by the Home Secretary :—

## 1.—INSPECTIONS MADE BY MALE AND FEMALE SANITARY INSPECTORS.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories (including factory laundries and bakehouses) .. ..	849	203	—
Workshops (including workshop laundries and bakehouses) .. ..	1387	228	—
Workplaces (other than Outworkers' premises included in Part 3 of this Report) .. ..	188	32	—
Total .. ..	2424	463	—

## 2.—DEFECTS FOUND.

Particulars. (1)	Number of Defects.			Number of Prosecutions. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspectors. (4)	
<i>Nuisances under the Public Health Acts* :—</i>				
Want of cleanliness .. ..	108	108	} Nil.	
Want of ventilation .. ..	—	—		
Overcrowding .. ..	1	1		
Want of drainage of floors .. ..	2	2		
Other nuisances .. ..	133	133		
Sanitary accommodation { Insufficient .. ..	12	12		
{ Unsuitable or defective .. ..	50	46		
{ Not separate for sexes .. ..	17	17		
<i>Offences under the Factory and Workshop Act :—</i>				
Illegal occupation of underground bakehouses (s. 101) .. ..	1	1		
Breach of special sanitary requirements for bakehouses (ss. 97 to 100) .. ..	107	107		
Other offences (Excluding offences relating to outwork which are included in Part 3 of this Report)	32	32		
Total .. ..	463	459	—	—

\* Including those specified in sections 2, 3, 7 & 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

## 3.—HOME WORK.

The only matter to report under this heading is the receipt of the following lists of outworkers for employers sending twice in the year:—19 in respect of the making, etc., of wearing apparel, comprising the names of 21 outworkers (contractors) and 99 outworkers (workmen), and 1 in respect of brushmaking, containing the name of 1 outworker (contractor).

## 4.—REGISTERED WORKSHOPS.

Workshops on the Register (Sec. 131) at the end of the year.	Numbers.
(1)	(2)
Bakehouses .. .. .	136
Restaurant kitchens .. .. .	420
Laundries .. .. .	32
Domestic workshops .. .. .	—
Other workshops where women are employed .. .. .	408
Other workshops .. .. .	767
Total number of workshops on Register .. .. .	1763

## 5.—OTHER MATTERS.

Class (1)	Number (2)
<i>Matters notified to H.M. Inspectors of Factories:—</i>	
Failure to affix Abstract of the Factory and Workshop Act (s. 133) .. .. .	—
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5) .. .. .	51
	51
In regard to workshops where protected persons have been found to be employed (Public Health (London) Act, 1891, section 27) .. .. .	14
<i>Underground bakehouses (s. 101):—</i>	
Certificates granted during the year .. .. .	—
In use at the end of the year .. .. .	88

The number of factories, workshops and workplaces added to and removed from the register during 1920 was as follows:—

			Added to register.	Removed from register.	On Register at end of 1920.
Bakehouses—					
Workshop .. ..	..	..	3	1	136
Factory .. ..	..	..	1	0	39
Laundries—					
Workshop .. ..	..	..	0	3	32
Factory .. ..	..	..	1	2	12
Restaurant kitchens		..	2	4	420
Other workshops where women are employed		..	49	8	408
Other workshops ..	..	..	37	72	767
Other factories ..	..	..	31	12	687

The number of inspections that were made during 1920 were as follows:—

	Factory and Workshop Inspector.		Woman Sanitary Inspector.		Total.	
	Inspec- tions.	Re-in- spections.	Inspec- tions.	Re-in- spections.	Inspec- tions.	Re-in- spections.
Bakehouses..	378	256	—	—	378	256
Restaurant kitchens ..	48	64	28	1	76	65
Laundries ..	17	8	—	—	17	8
Domestic workshops	—	—	—	—	—	—
Other work- shops ..	344	554	—	—	344	554
Other work- places ..	24	23	—	—	24	23
Other factories	232	447	—	—	232	447
Total ..	1043	1352	28	1	1071	1353

Bakehouses and restaurant kitchens are also referred to in Section V. (page 72).

## SCHOOLS.

The medical inspection and treatment of children in Elementary Schools in St. Pancras is carried out by the London County Council independently of the Borough Council. The County Medical Officer has kindly furnished me with particulars of medical inspections of school children in St. Pancras during 1920. They are classified in the following Tables:—

## MEDICAL INSPECTION OF CHILDREN IN ELEMENTARY SCHOOLS IN ST. PANCRAS, 1920.

		Entrants.		Age 8.		Age 12.		Age 14.	
		Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Number examined	...	1737	1510	1446	1301	1595	1564	433	385
Number requiring treatment	...	654	587	622	528	513	544	115	127
<i>Defects—</i>									
Skin	...	F 52	28	25	17	20	18	6	4
	...	X 38	17	18	13	13	11	2	3
Teeth	...	X 335	317	278	238	139	170	37	44
Tonsils	...	F 198	198	120	159	126	142	11	27
	...	X 29	31	25	27	27	38	2	2
Adenoids	...	F 188	149	55	50	48	34	6	7
	...	X 53	46	31	18	22	19	5	4
Tonsils and Adenoids	...	F 172	158	59	53	27	23	4	3
	...	X 72	68	21	20	22	16	1	2
Other Nose or Throat defects	...	F 82	47	55	36	20	15	1	3
	...	X 45	20	23	9	6	7	—	2
Glands of Neck	...	F 318	276	186	169	147	103	27	22
	...	X 11	6	1	5	5	3	—	—
Eye disease	...	F 73	57	39	35	26	37	6	3
	...	X 63	44	28	17	14	17	3	3
Vision	...	X Not tested		222	193	217	257	50	62
Ear disease	...	F 42	44	30	41	29	19	16	10
	...	X 30	22	18	19	13	11	10	2
Hearing	...	F 22	28	20	11	30	17	8	2
	...	X 9	4	7	4	14	7	5	—
Speech	...	F 31	20	20	16	14	3	—	—
	...	X 1	—	1	—	1	—	—	—
Heart	...	F 27	20	25	23	36	36	11	9
	...	X 4	1	3	2	3	8	—	—
Anæmia	...	F 41	45	68	45	47	47	16	16
	...	X 25	29	49	31	38	34	12	9
Lungs	...	F 104	86	36	29	30	19	4	1
	...	X 29	23	7	8	7	6	1	—
Nervous disease	...	F 22	18	17	18	21	15	3	2
	...	X 5	3	3	3	8	—	1	1
Phthisis	...	F 1	—	—	—	1	6	1	1
	...	X —	—	—	—	—	2	1	—
Other Tubercular	...	F 1	2	—	3	3	3	—	2
	...	X 1	1	—	1	1	2	—	—
Rickets	...	F 41	18	19	10	11	8	5	—
	...	X 10	2	4	—	1	—	—	—
Deformities	...	F 11	15	26	13	35	50	27	24
	...	X 3	2	7	3	6	12	4	5
Infectious disease	...	F 3	2	3	—	2	—	—	—
	...	X 2	2	3	—	1	—	—	—
Malnutrition	...	F 19	27	34	26	22	20	6	5
	...	X 18	26	33	25	22	19	6	5
Other defects	...	F 59	51	27	38	26	49	11	10
	...	X 35	33	15	24	14	31	5	3

F signifies a defect found.

X signifies a defect noted for treatment.

	Clothing.			Nutrition.				Cleanliness of Head.			Cleanliness of Body.			Condition of Teeth.			Vision.		
	*1	2	3	1	2	3	4	1	2	3	1	2	3	1	2	3	1	2	3
Entrants. Boys	989	732	16	585	1299	53	—	1657	78	2	1653	79	5	692	742	303	—	—	—
Percentage...	56.9	42.1	1.0	22.2	74.8	3.0	—	95.4	4.5	0.1	95.2	4.5	0.3	39.8	42.7	17.5	—	—	—
" Girls	916	589	5	338	1120	52	—	1346	152	12	1440	68	2	633	582	295	—	—	—
Percentage...	60.6	39.0	0.4	22.4	74.2	3.4	—	89.1	10.1	0.8	95.4	4.5	0.1	41.9	38.6	19.5	—	—	—
Age 8. Boys	680	745	21	199	1162	85	—	1389	57	—	1349	96	1	502	749	195	635	493	303
Percentage ..	47.0	51.5	1.5	13.8	80.4	5.8	—	96.1	3.9	—	93.3	6.6	0.1	34.7	51.8	13.5	44.4	34.5	21.1
" Girls	688	603	10	205	1018	78	—	1083	209	9	1236	64	1	474	648	179	509	477	291
Percentage ...	52.8	46.4	0.8	15.8	78.2	6.0	—	83.2	16.1	0.7	95.0	4.9	0.1	36.5	49.7	13.8	39.9	37.4	22.7
Age 12. Boys	802	765	28	316	1223	62	—	1531	63	1	1404	181	10	581	934	80	841	441	308
Percentage ...	50.3	48.0	1.7	19.4	76.7	3.9	—	95.9	4.0	0.1	88.0	11.4	0.6	36.4	58.6	5.0	52.9	27.8	19.3
" Girls	827	728	9	402	1113	49	—	1310	240	14	1460	103	1	685	802	77	797	414	348
Percentage ...	52.9	46.5	0.6	25.7	71.3	3.1	—	83.8	15.3	0.9	93.4	6.5	0.1	43.8	51.3	4.9	51.1	26.6	22.3
Age 14. Boys	298	130	5	103	320	10	—	428	4	1	413	18	2	162	250	21	278	78	77
Percentage ...	68.8	30.0	1.2	23.8	73.9	2.3	—	98.9	0.9	0.2	95.4	4.1	0.5	37.4	57.7	4.9	64.2	18.0	17.8
" Girls	237	147	1	141	235	9	—	336	47	2	374	9	2	173	202	10	204	95	86
Percentage ...	61.5	38.2	0.3	36.6	61.1	2.3	—	87.3	12.2	0.5	97.2	2.3	0.5	44.9	52.5	2.6	53.0	24.7	22.3

\* Classification of children examined.

*Clothing* ... 1, good; 2, fair; 3, bad.

*Nutrition* ... 1, excellent; 2, normal; 3, below normal; 4, bad.

*Cleanliness—Head* ... 1, clean; 2, nits only; 3, pediculi.

*" Body* ... 1, clean; 2, dirty; 3, pediculi.

*Teeth* ... 1, sound; 2, less than 4 decayed; 3, 4 or more decayed.

*Vision* ... 1, 6-6 in both eyes; 2, 6-9 in either eye; 3, 6-12 or worse in either eye.

(Vision tested with Snellan test type at a fixed distance of 6 metres).

### INFECTIOUS DISEASES IN SCHOOLS.

In the investigation of cases of scarlet fever, diphtheria, etc., and of measles, the school teachers are promptly advised in regard to cases and contacts, so that the London County Council rules in regard to the exclusion from school of these can be brought into operation.

It has not been necessary during the year to close any school on account of infectious disease, but in a number of instances the "unprotected" children in certain schoolrooms were temporarily excluded on account of measles.

### ST. PANCRAS SCHOOL CLINICS.

The following account of the work of the two London County Council treatment Centres for school children has been kindly furnished by Dr. A. R. Roche, the Secretary-Superintendent:—

At the request of the Medical Officer of Health I wrote a short explanatory account of these Centres for incorporation in his report on the health of the Borough in 1919.

During the L.C.C. school year, which ended on March 31, 1921, the work has been carried on at both Centres on the same lines.

The number of cases treated have been as follows:—

	Dental Cases.	Aural Cases.	Eye Cases.	Minor Ailments.
Prince of Wales Road Centre	2160	863	989	1329
Lancing Street Centre	1502	420	Nil	1246

Many of these cases attended on several occasions; for instance, at Prince of Wales Road there were over 33,000 attendances in the minor ailment department, and at Lancing Street over 31,000.

In addition to this, many hundreds of home visits were paid by the nurses of the Central St. Pancras District Nursing Association.

A very important feature of the work at both Centres is the operative treatment of enlarged tonsils and adenoids, and other throat, nose, and ear conditions. The operations are performed under a general anæsthetic, and after a suitable interval the child is sent home, and subsequently visited for a few days by a nurse, and, if necessary, by the doctor in charge of the case. If any complication occurs, subsequent to the operation, the child is detained at the Centre for the night. From time to time an anxious case necessarily occurs, but fortunately since their inception no fatal case has occurred at either Centre. This year a new development has occurred at the Prince of Wales Road Centre, the Council having entered into an agreement for the treatment of 5,000 cases of children with verminous heads. To enable the Centre to do this work a central water heating system has been installed, special shampoo basins and a head drying apparatus fixed. This has cost a considerable sum of money, towards which the Council made a grant of £100. Needless to say, the grant did not nearly cover the cost entailed. Two women are fully engaged in carrying on this work, under the supervision of a nurse, which consists in thoroughly shampooing the children's heads with a special vermicidal soap, thoroughly combing out the dead nits with special combs, and then thoroughly drying the head. After this the child's head is minutely inspected, the standard aimed at being the absence of a single nit.

In view of the prevalence of this distressing condition in so many children attending the Council's schools, the evil effects on their general health, and the many complications it so often leads to, this work appears to be very valuable, and we hope will be more and more appreciated, and lead to a higher standard of cleanliness in the children's homes.

I wish again to express my appreciation of the good work of the doctors at these Centres, local medical practitioners, and also of the County Council nurses who are in charge of the work, and to whom the good results are so largely due.

A. R. ROCHE,  
*Secretary and Superintendent.*

The number of home visits made by the nurses in connection with the school clinics during the year 1920 was 530 from the Prince of Wales Road Centre, and 442 from the Lancing Street Centre. These were made by the Central St. Pancras District Nursing Association.

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## Section V.—FOOD.

### (a) MILK SUPPLY.

Almost the whole of the milk supply of St. Pancras is derived from dairy farms in the provinces and is brought into London by train. A great deal of milk also comes into the great railway stations in the Borough for distribution in other parts of London.

In February, March, and April, 1920, 50 samples of milk were taken in the Borough and submitted for bacteriological examination to Dr. F. H. Teale, of University College Hospital. The samples were taken by the Food Inspectors, Messrs Auger and Child, and fall

into four groups, viz.:—those taken (1) from farmers' deliveries at railway stations; (2) at dairies where pasteurisation is carried out; (3) as produced in cowsheds in the Borough; and (4) when exposed for sale in milk shops (both "dairy shops" and general shops) or on street rounds. In certain cases the milk was sampled at successive stages, *e.g.*, at the railway station, in the wholesaler's premises, and in the hands of the retailer.

*Dr. Teale's Report.*

Report on the examination of 50 specimens of milk carried out for the St. Pancras Borough Council at the request of Dr. Higgins, Medical Officer of Health.

The specimens were collected in sterile bottles and transported to the laboratory in an ice chest. The specimens were examined directly after arrival.

The examinations were conducted in the ordinary way for the presence of *B. Coli*, etc.

For the counting of the number of colonies plates were made with 1/100, 1/1000, 1/10,000 and 1/100,000 ccm. of the milks.

In some cases the numbers with the smallest dilution were too large to count and so have been entered up as innumerable.

The cases where tubercle bacilli were found were further investigated to see whether these bacteria were of bovine or human origin. This was a lengthy process and greatly added to the time taken in the examination, necessitating a period of nearly six months.

TABLE I.

*Examinations of Farmers' Milks sampled on delivery at railway stations in St. Pancras.*

Date of Sampling, 1920.	No. of Specimen.	<i>B. Coli</i> per ccm.	Spore-bearing Anaerobes present.	Colonies growing at 37 deg. C per ccm.	Colonies growing at 22 deg. C per ccm.	Streptococci per ccm.
Feb. 24th	1	1,000,000	Absent in 50 ccm.	8,000	5,000	540
"	2	1,000	Do.	1,200	1,000	420
"	3	100,000	Present in 50 ccm.	130,000	Innumerable	15,000
"	4	1,000,000	Present in 10 ccm.	1,030,000	Do.	140,000
"	5	1,000	Absent in 50 ccm.	16,000	Do.	1,800
"	6	10,000	Do.	16,000	10,000	22,000
Mar. 2nd	9	100,000	Present in 5 ccm.	118,000	Innumerable	Innumerable
"	10	10,000	Do.	12,000	Do.	1,800
Mar. 2nd	11	100	Absent in 50 ccm.	6,100	10,200	1,700
"	12	1,000,000	Present in 10 ccm.	1,480,000	331,000	510,000
"	13	1,000	Present in 25 ccm.	5,000	46,300	4,800

TABLE I.—*continued.*

Date of Sampling, 1920.	No. of Specimen.	B. Coli per ccm.	Spore-bearing Anaerobes present.	Colonies growing at 37 deg. C per ccm.	Colonies growing at 22 deg. C per ccm.	Streptococci per ccm.
Mar. 9th	17	1,000,000	Present in 10 ccm.	1,140,000	Innumerable	1,280,000
"	18	100	Absent in 50 ccm.	Nil.	Do.	Nil.
"	19	100	Do.	300	300	300
Mar. 16th	25	100	Present in 10 ccm.	1,000	62,000	—
"	26	10,000,000	Do.	Innumerable	Innumerable	Innumerable
"	27	10	Present in 1 ccm.	Nil.	4,000	Nil.
"	28	10,000	Do.	18,000	102,000	1,000

Tubercle bacilli of bovine origin were found in specimen 9 and specimen 26, and *B. paratyphosus* B. in specimen 28.

TABLE II.

*Effect of Pasteurisation carried out on Milks traced from Railway Depots to the Dairy.*

Date of Sampling, 1920.	No. of Specimen.	B. Coli per ccm.	Spore-bearing Anaerobes present.	Colonies growing at 37 deg. C per ccm.	Colonies growing at 22 deg. C per ccm.	Streptococci per ccm.
Feb. 24th	2	100	Absent in 50 ccm.	1,200	1,000	420
"	3	100,000	Present in 50 ccm.	130,000	Innumerable	15,000
"	4	1,000,000	Present in 10 ccm.	1,030,000	Do.	140,000
"	5	1,000	Absent in 50 ccm.	16,000	Do.	18,000
"	8	only in 10 ccm.	Present in 50 ccm.	Nil.	Nil.	Nil.
Mar. 2nd	11	100	Absent in 50 ccm.	6,100	10,200	1,700
"	12	1,000,000	Present in 10 ccm.	1,480,000	331,000	510,000
"	14	100,000	Present in 25 ccm.	316,000	Innumerable	250
Mar. 9th	17	1,000,000	Present in 10 ccm.	1,140,000	1,140,000	1,280,000
"	18	100	Absent in 50 ccm.	Nil.	Innumerable	Nil.
"	23	10	Do.	Nil.	Do.	Nil.

TABLE III.

*Examination of Pasteurised Milk.*

Date of Sampling 1920.	No. of Specimen.	B. Coli per ccm.	Spore-bearing Anaerobes present.	Colonies growing at 37 deg. C. per ccm.	Colonies growing at 22 deg. C. per ccm.	Streptococci per ccm.
Feb. 24th	7	Present 10	Present 50 ccm.	Nil	Nil	Nil
"	8	Do.	Do.	Do.	Do.	Nil
Mar. 2nd	14	100,000	Present 25 ccm.	316,000	Innumerable	250
" 9th	23	10	Absent 50 ccm.	Nil	Do.	Nil
" 16th	32	100	Do.	2,000	700,000	2,000

No tubercle bacilli found in any specimen.

TABLE IV.

*Local Cow Shed Milk.*

Date of Sampling 1920.	No. of Specimen.	B. Coli per ccm.	Spore-bearing Anaerobes present.	Colonies growing at 37 deg. C. per ccm.	Colonies growing at 22 deg. C. per ccm.	Streptococci per ccm.
Mar. 23rd	38	10	Present 10 ccm.	3,000	180,000	Nil
"	39	100	Do.	11,000	50,000	Do.
"	40	10	Do.	140,000	60,000	Do.

None of these specimens contained tubercle bacilli.

The heavy growth of bacteria at 22 deg. C. and 37 deg. C. were due to large numbers of *B. proteus*.

Specimens 38 and 39 were from the milk of individual cows taken from the pail in the cowshed. Specimen 40 was taken in the adjoining retail shop from the mixture of the same milk of these two and other cows in the cowshed.

TABLE V.

*Milks traced from Wholesale Dairy to Retailers.*

Date of Sampling, 1920.	No. of Specimen.	B. Coli per ccm.	Spore-bearing Anaerobes present.	Colonies growing at 37 deg. C. per ccm.	Colonies growing at 22 deg. C. per ccm.	Streptococci per ccm.
Mar. 2nd	14	100,000	Present 25 ccm.	316,000	Innumerable	250
"	15	10,000,000	Present 10 ccm.	Innumerable	Do.	Innumerable
"	13	1,000	Present 25 ccm.	5,000	Do.	3,000
"	16	1,000,000	Present 5 ccm.	Innumerable	Do.	Innumerable
April 13th	42	1,000,000	Present 1 ccm.	Do.	Do.	Do.
"	43	1,000,000	Do.	Do.	Do.	Do.
"	44	1,000,000	Do.	Do.	Do.	Do.

Specimen 15 was from a retail shop, and specimen 14 was from the wholesale dairy which supplied the shop.

Specimen 16 was from a retail dairy shop, and specimen 13 from milk consigned to the shopkeeper by a farmer, and sampled at a railway station.

Specimen 42 was from a dairy shop doing a wholesale and retail trade; 43 from a hand-can on a street round of the same firm; and 44 from another retail shop supplied by the aforementioned firm.

Specimen 14 is the mixture of specimens 11 and 12 Pasteurised (*vide* tables VI. and II.)

TABLE VI.

A specimen of milk traced from its arrival at the railway depot (specimens 11 and 12) to the wholesale dairy where it was pasteurised (specimen 14), to when it was sold in a retail general shop (specimen 15).

Date of Sampling, 1920.	No. of Specimen.	B. Coli per ccm.	Spore-bearing Anaerobes present.	Colonies growing at 37 deg. C. per ccm.	Colonies growing at 22 deg. C. per ccm.	Streptococci per ccm.
March 2nd	11	100	Absent in 50 ccm.	6,100	10,200	1,700
"	12	1,000,000	Present in 10 ccm.	1,480,000	331,000	510,000
"	14	100,000	Present in 25 ccm.	316,000	Innumerable	250
"	15	10,000,000	Present in 10 ccm.	Innumerable	Do.	Do.

N.B. — Specimens 11 and 12 were of farmers' milks. Specimen 14 was of pasteurised milk made from farmers' milks of earlier delivery. Specimen 15 was of the same milk as specimen 14, but kept in a retail general shop instead of the wholesale dairy.

TABLE VII.

*Examinations of specimens of retail milk.*

Date of Sampling, 1920.	No. of Specimen.	B. Coli per ccm.	Spore-bearing Anaerobes present.	Colonies growing at 37 deg. C. per ccm.	Colonies growing at 22 deg. C. per ccm.	Streptococci per ccm.
Mar. 2nd	15	10,000,000	Present in 10 ccm.	Innumerable	Innumerable	Innumerable
"	16	1,000,000	Present in 5 ccm.	3,000,000	Do.	Do.
Mar. 9th	20	1,000	Absent in 50 ccm.	10,000	Do.	5,000
"	21	1,000,000	Present in 5 ccm.	Innumerable	Do.	Innumerable
"	22	1,000	Absent in 50 ccm.	28,000	Do.	16,000
"	24	10,000	Do.	26,000	Do.	8,000
Mar. 16th	29	1,000,000	Present in 5 ccm.	Innumerable	Do.	Innumerable
"	30	10,000,000	Do.	Do.	Do.	Do.
"	31	10,000	Absent in 50 ccm.	21,000	14,000	6,000
Mar. 23rd	33	1,000,000	Present in 10 ccm.	1,260,000	520,000	100,000
"	34	1,000,000	Do.	2,030,000	Innumerable	800,000
"	35	1,000,000	Do.	3,040,000	4,800,000	2,000,000
"	36	1,000,000	Do.	2,100,000	Innumerable	500,000
"	37	100,000	Present in 25 ccm.	270,000	240,000	80,000
April 13th	41	1,000,000	Present in 1 ccm.	5,000,000	Innumerable	2,400,000
"	42	1,000,000	Do.	Innumerable	Do.	Innumerable
"	43	1,000,000	Do.	Do.	Do.	Do.
"	44	1,000,000	Present in 10 ccm.	Do.	Do.	Do.
"	45	10,000	Do.	50,000	Do.	10,000
"	46	1,000,000	Absent in 50 ccm.	2,400,000	Do.	1,000,000
"	47	1,000,000	Present in 10 ccm.	3,200,000	Do.	800,000
"	48	1,000,000	Present in 25 ccm.	1,800,000	Do.	20,000
April 20th	49	10,000	Present in 10 ccm.	52,000	3,000,000	14,000
"	50	100,000	Do.	112,000	Innumerable	10,000

Tubercle bacilli of bovine origin were found in specimen 21.

Specimens 16, 21, 22, 29, 31, and 42 were taken from retail dairy shops, though several of them might well be described as general shops.

Specimens 15, 24, 30, 34, 37, 41, 44, 46, 47, 48, 49 and 50 were obtained from general shops.

Specimens 20, 33, 35, 36, 43 and 45 were taken from sellers in the street.

Conclusions that can be drawn from the examination of the specimens of milk as they arrive from the farmer at the railway depôts:—

- (1) Bovine tubercle bacilli were found in two specimens out of 18, making a percentage of 11.
- (2) Human tubercle bacilli were not found, showing that none had gained access to the milk during the process of handling it.
- (3) The only other pathogenic organism found was in one specimen where the *B. paratyphosus* B. was found. This was typical in all its reactions. Diphtheria and other important organisms were not found in any sample.
- (4) Taking the amount of the spores of anaerobic organisms in the excreta of cows as 1-10 millions per gram, and remembering that these do not multiply in the milk under ordinary conditions and so can be taken as a non-multiplying factor, it must follow that the contamination of milk by the excreta of the cow is very slight as seen in these samples. Even in the worst specimens where the reaction for these organisms was given in quantities of 1 ccm. of the milk and not in 0.1 ccm., it follows that the amount of contamination must be with about 1/100,000 to 1/1,000,000 of a gramme of the excreta per ccm.

Taking this as a standard it follows that the number of *B. Coli* which originally got into the milk in this way would have been 100-1000 per ccm. of the milk, taking the dung to have 100 million *B. Coli* per gramme, but in many of the milks the contamination must have been much less, because anaerobic spores could only be demonstrated when much larger quantities of milk were examined.

Taking this as a guide it follows that the *B. Coli* have multiplied greatly from the time of the original contamination to the time when the milk arrived at the railway depot.

It thus follows that the milk was transported at too high a temperature, viz., a temperature which allowed these organisms to multiply at a great rate.

- (5) Finally, the great number of saprophytic organisms found in the milks show that enough care has not been taken in the preliminary cleansing and scalding of the containers.

*Conclusions from the examination of the Pasteurised specimens examined.*

There are three examples seen in Table II.

Specimen 8 was a sample of pasteurised milk resulting from the pasteurisation of a mixture of farmers' milks sampled under the specimen numbers 2, 3, 4 and 5, and other farmers' milks not sampled. It was taken immediately after pasteurisation. It is a fairly good result. The contaminating organisms were practically all destroyed, and care was taken with the utensils in the dairy.

Specimen 14 was a sample of pasteurised milk resulting from the pasteurisation of a mixture of various farmers' milks. Specimens 11 and 12 were farmers' milks supplied to the same dairy later in the same day. Here the process was not by any means as effectual as it should be, and in addition the dairy utensils could not have been properly cleaned or the milk was exposed in some way after sterilisation, whereby the milk became grossly contaminated with saprophytic organisms.

Specimen 23 was a sample of pasteurised milk resulting from the pasteurisation of a mixture of the two farmers' milks sampled under the specimen numbers 17 and 18, with no other milks. Here the process was like the previous one, and there was the same defect allowing gross contamination with saprophytic organisms.

Table III shows two further samples (7 and 32).

Sample 7 is the same as sample 8, except that sample 8 was taken from the receiver of the pasteurising plant, and 7 from the churn into which the milk was immediately afterwards received. Sample 32 was taken immediately after pasteurisation. It shows the same defect *re* the presence of gross contamination with saprophytic organisms, and the sterilisation was not perfect.

Specimens 8, 14, 23, 32 were all from different dairies.

The defect in the process whereby gross contamination with saprophytic organisms has occurred is dangerous not only from the changes that can be set up in milk by their presence, but it means that there is a defect which may on occasion allow more dangerous organisms to gain access to the milk.

*Cowshed milk obtained locally.*

The milk from these sources showed very little contamination *re* intestinal organisms but the utensils were either very improperly cleansed or the milk was subjected to some exposure whereby it had become grossly contaminated with saprophytic organisms.

*Changes occurring in milk that can be traced from wholesale dairies to the retailers.*

Table V gives the figures.

Here it will be seen that there is a great multiplication of both fecal and saprophytic organisms.

Table VI follows two specimens of milk from the railway depôt through the process of pasteurisation to the time of being retailed.

Here the pasteurisation was very inefficient, then subsequently there was a great multiplication of all types of bacteria.

*Milk obtained from the retailers.*

No appreciable difference can be detected in the bacteriological purity of specimens obtained from dairy shops, general shops or from street vendors.

The specimens on the whole show an increase in bacterial contamination when compared with the series of specimens as they arrive at the depôts.

There is also a great increase in the heaviness of the saprophytic contamination.

Tubercle bacilli of bovine origin were found in only one specimen of the 24, making 4 per cent.

No other pathogenic bacteria were found.

Among the anaerobic organism found were *B. Welchii*, *Vibrio septique*, *B. sporogenes*.

From the examination of the specimens as a whole:—

- (1) Bovine tubercle bacilli were found in three specimens out of 50, making 6 per cent.
- (2) Pathogenic bacteria besides the above were seen in only one case and the organism isolated was *B. paratyphosus* B.
- (3) Excremental organisms were present in large numbers in the majority of the specimens.
- (4) Saprophytic organisms were also present in large amount.

The points which therefore can be emphasised are:—

- (1) That the milk is not transported from the farmer to the depôts at a sufficiently low temperature so that the small number of excremental organisms originally present multiply greatly.
- (2) That there is a want of care in the cleanliness of the receptacles into which the milk is put, or the milk is left exposed to sources from which it gets infected with saprophytic organisms.
- (3) That there is a great multiplication of bacteria during the passage of the milk from the wholesaler to the retailer and public.
- (4) That the pasteurisation is not always as efficiently carried out as it should be, and that there is a want of care in the cleanliness of the subsequent handling of the milk.

For the supply of good milk as free as possible from bacterial contamination:—

- (1) In addition to care *re* tubercle, health of the cows, scrupulous cleanliness of the person who performs the operation of milking and the cleanliness of the vessels,
- (2) the milk should either immediately be placed in a refrigerator or should be as quickly pasteurised as possible either at the farm or in some "creaming" in the district where all farmers could take their milk for this purpose. Here the same great care should be exercised *re* cleanliness of the whole procedure.
- (3) The milk then can be conveyed to London in sealed receptacles in cooled vans and sent to the dairies.
- (4) In the dairies it should not be exposed, should be kept at a low temperature and the best way would be to bottle it into sterile bottles for conveyance to the consumer.
- (5) All places where pasteurisation is carried out should be thoroughly and constantly inspected to ensure proper cleanliness.

(Signed) F. H. TEALE.

Dr. Teale's detailed results may be considered in the light of the fact that the Government's bacteriological standard for "Grade A (Certified) Milk" is that on examination at any time before delivery to the consumer it must not contain *Bacillus coli* in one tenth cubic centimetre (*i.e.* not more than 10 per cubic centimetre), or more than 30,000 bacteria per cubic centimetre. The Government standard for *Bacillus coli* may also be applied to *Streptococci* and spore-bearing anaerobes.

*Farmers milk as delivered at the railway stations.* The 18 samples (see table I) are almost without exception very bad as judged by the above mentioned standard. It will be seen that Dr. Teale does not consider the original excremental pollution to have been serious and that the bad condition of the milk was due to its transportation at too high a temperature, and the absence of proper care as to the cleanliness of the containers, etc. The remedies for these conditions would be found in proper cooling of the milk and in improved methods of handling and transporting it.

The presence of living bovine tubercle bacilli in 2 out of the 18 samples illustrates the present unsatisfactory state of affairs in regard to bovine tuberculosis and milk.

*Samples of milk taken at milkshops and on milk rounds.* As might be expected the result of the examination of these 24 samples (table VII) are definitely worse than in the case of the farmers' milk newly arrived in town. They indicate a further stage in the ill-effects of bad methods of transportation and storage, lack of cleanliness and the keeping of the milk at too high a temperature. The comparison in table V shows a similar progressive deterioration in the milk as it passes from hand to hand.

\* *Samples from a local cowshed.* These were distinctly better in some respects than the imported milk, but there is here also evidence of considerable unnecessary bacterial contamination.

*Examination of pasteurised milk.* It appears from Dr. Teale's report that at three of the four pasteurising plants brought under examination the process is not satisfactorily carried out. Pasteurisation is, of course, not compulsory at present, but it is most undesirable that it should be done ineffectively.

*Conclusions.* There is no doubt that the present system whereby the milk is passed (generally uncooled) from vessel to vessel, and handled under unsuitable conditions, is thoroughly bad. It is most desirable that the Milk and Dairies (Consolidation) Act, 1915, at present in suspense, which gives the Ministry of Health power to deal with the problem in a stringent manner, should be brought into active operation without delay.

#### DAIRIES, COWSHEDS AND MILKSHOPS.

*Cowsheds.*—At the end of 1920 there were two licensed cowsheds in the Borough. They are registered for 43 cows, but were occupied by 13.

*Milkshops and Dairies.*—39 applications for registration under the Dairies, Cowsheds and Milkshops Orders, in respect of milkshops were considered during 1920, of which 38 were acceded to and one refused. Two applications in respect of itinerant vendors were also considered and acceded to.

The figures in regard to the registration of milkshops are set out below :—

No. of purveyors of milk at retail milkshops on register at end of 1919 ..	213
<i>Deduct</i> No. of purveyors removed from register during 1920 ..	40
<i>Add</i> No. of purveyors added to register by resolution of Council during 1920 .. .. .	38
No. of purveyors of milk at retail milkshops on register at end of 1920 ..	211

At the end of 1920 there were on the register in addition to these 211 retail milkshops and 4 cowsheds (which are attached to retail milkshops included in the 211), one person in respect of premises where only a wholesale milk trade is done, and 5 itinerant vendors without retail milkshops.

#### PUBLIC HEALTH (MILK AND CREAM) REGULATIONS, 1912 & 1917.

The following is a report of the work done under the regulations during the year ended 1st January, 1921 :—

383 samples of milk and none of cream were taken and analysed, and in no case were preservatives reported to be found.

No other contravention of the regulations was discovered.

## MILK (MOTHERS AND CHILDREN) ORDER, 1919.

During 1920 the Council continued to make grants of milk either free or at half-price for the use of expectant or nursing mothers or children under five years of age. At the beginning of the year all applications were dealt with by the Medical Officer of Health, who required the filling up of a schedule of particulars in each case. He was guided by the following scale of income approved by the Council in January, families in receipt of an income greater than that indicated in the scale being as a rule ineligible for grants of milk:—

					£	s.	d.	
One parent	..	..	..	..	1	15	0	per week.
Two parents	..	..	..	..	2	0	0	"
"	and one child	..	..	..	2	15	0	"
"	" two children	..	..	..	3	10	0	"
"	" three "	..	..	..	4	5	0	"

and 10s. a week extra for each additional child.

In most cases milk was granted free at the rate of one pint for one child under 5 or an expectant mother, and  $1\frac{1}{2}$  pints for two such persons in a family, and in some cases 2 pints for 3 in a family.

The cost of the scheme increased greatly month by month, and in May it was decided that the milk should be granted as a rule at half-price, and free only in special cases of great necessity.

Further consideration was given to the matter in June, and a Special Sub-Committee was set up to meet weekly and consider and decide upon all applications for milk under the Council's scheme. The Sub-Committee met for the first time on July 30th, 1920. It was also decided that the grant of milk should be restricted to expectant mothers in the last three months of pregnancy, and children under three years of age. Further arrangements were also made for the making of enquiries where the accuracy of the information given on the application form was doubted. Moreover, a new scale of income was set up. It was, however, to be used as a guide only, the amount and price of milk to be granted being left to the discretion of the Sub-Committee. The new scale was as follows:—

					£	s.	d.	
One parent	..	..	..	..	1	15	0	per week.
Two parents	..	..	..	..	2	0	0	"
Two parents and one child	..	..	..	..	2	10	0	"
"	" two children	..	..	..	3	0	0	"
"	" three "	..	..	..	3	10	0	"
"	" four "	..	..	..	3	15	0	"
"	" five "	..	..	..	4	0	0	"

Larger families to be given special consideration.

All the above-mentioned rates were made subject to the right of the Sub-Committee to vary them in cases in which they considered it advisable.

One of the Health Visitors, Miss Camman, was designated to make the necessary enquiries into applications for milk, and Mr. L. Higgins, temporary clerk, to give his whole time to the clerical work connected with the milk scheme. It has been found necessary for part of the time of another clerk to be devoted to the same work. In 1921 Mr. F. G. Crick, clerk in the department, who, on account of his health, needed out-door employment, was appointed to make the necessary enquiries into the circumstances of applicants for milk, in place of the health visiting staff.

In February, 1921, proceedings were instituted against a father who had made false statements as to his income in an application for milk, and a fine of £5 and 5 guineas costs were inflicted. With a view to deterring applicants from making such false statements, particulars in regard to the case were placarded at the centres and attached to the application forms in use.

In May, 1921, the Council had under consideration a circular from the Ministry of Health on the subject of the supply of milk for mothers and children. It was found that the scheme in operation in St. Pancras agreed closely with the requirements of the Ministry, except that the rate of income was on a different basis from that suggested by the Ministry. Accordingly the following scale was adopted by the Council, and afterwards approved by the Ministry.

No. in family.	Scale for distribution of milk at half-price,	Scale for distribution of free milk.
1	18s. per head after deduction of rent...	15s. per head after deduction of rent.
2	14s. 6d. " " ...	10s. " "
3	11s. 6d. " " ...	8s. " "
4	10s. 6d. " " ...	7s. " "
5	9s. 6d. " " ...	6s. 6d. " "
6	9s. " " ...	6s. " "

The working of the milk scheme is as follows:—Ordinarily, application must be made at one of the Borough Infant Welfare Centres, though, in exceptional cases, application can be made direct to the Medical Officer of Health at the Town Hall. The application form setting out details as to the needs and circumstances of the family has to be filled up by the parents and signed by both father and mother. The signature of the medical officer at the centre is required to the effect that the grant of milk is necessary on medical grounds, and the superintendent of the centre has also to sign the form indicating that she has examined it to see that it is properly filled up, and that, from her knowledge of the home, she has no reason to doubt the correctness of the statements. The forms are then sent by the superintendent to the Medical Officer of Health, who examines them (personally or by deputy); orders such further enquiries to be made as seem called for, and makes a preliminary recommendation as to the amount of milk to be granted. They then come before the Milk Sub-Committee at their weekly meeting, who order such further enquiries as they deem necessary and prescribe finally the grant of milk to be made. The grant is in the form of an order on the applicant's usual milk-seller, the applicant paying half-price or *nil* according to the decision. The milk-sellers' accounts are rendered monthly, and the customer's signature is required by the Council to vouch for the correct delivery of milk. Where dried milk is specially ordered by the medical officer it is usually supplied on the Council's order by the Infant Welfare Centres in their capacity of purveyors of that commodity. The Sub-Committee's orders are issued for one month only, at the end of which time a further application is required and considered.

The extent of the scheme is indicated in the following figures :—

	Pints of Milk granted free.	Pints of Milk granted half-price.	Cost to Council.
1920.			£ s. d.
January .. ..	8,743	441	224 2 0
February .. ..	14,028	1,882	343 0 9
March .. ..	26,698	2,247	637 11 9
April .. ..	32,999	2,401	712 9 7
May .. ..	29,400	14,664	616 19 3
June .. ..	18,906	31,041	573 15 4
July .. ..	19,948	30,611	587 11 0
August .. ..	15,165	23,630	448 0 0
September .. ..	11,203	15,264	326 17 11
October .. ..	11,511	16,910	415 19 2
November .. ..	13,274	15,996	447 11 5
December .. ..	13,660	15,880	495 0 0
Total for 1920 ..	215,535	170,967	5,828 18 2
1921.			£ s. d.
January .. ..	13,726	14,845	484 12 10
February .. ..	14,008	13,127	471 8 6½
March .. ..	17,021	14,442	547 8 2½
April .. ..	15,969	12,724	465 4 7
May .. ..	14,119	8,563	306 3 4
June .. ..	12,219	4,517	239 12 4

At the end of 1919 there were 160 families in receipt of milk through the Council's scheme. 1908 new families were added to the list of recipients during 1920, and at the end of 1920 there were 729 families in receipt of milk. As will be seen from the table above, there were supplied in 1920, 215,535 pints of milk free and 170,967 pints at half-price, at a cost to the Council of £5,828 18s. 2d., half of which sum is repayable by the Ministry of Health. This figure does not include the cost of administration.

#### (b) OTHER FOODS.

The Food Inspectors have kept under regular inspection food exposed or deposited for sale in slaughter-houses, shops (especially butchers', cooked meat, and fishmongers' shops), stalls, and market places.

On one occasion during the year a seizure of unsound food was made by one of the Food Inspectors. It consisted of 3 uncooked hams in a decomposed condition. No legal action was taken. On 99 occasions during the year unsound food has been voluntarily surrendered by the owners to the Food Inspectors and destroyed as trade refuse.

Details in regard to the work of the Food Inspectors are shown in table No. 8, on pages 94 and 95.

#### SLAUGHTER-HOUSES.

At the end of 1920 there were 9 licensed slaughter-houses (private) in the Borough. They do not conform to a high state of excellence. These are kept under periodical inspection by the Food Inspectors, who made 144 inspections in this connection in 1920.

## FRIED FISH AND FISH CURING PREMISES.

In 1920 there were 71 fried fish vendors' premises in the Borough, at 2 of which fish curing was also carried on. There were 16 fish curers' premises, including these two. 198 visits to the premises were made during the year by the Food Inspectors.

## ICE-CREAM PREMISES.

208 visits were paid to these premises by the Food Inspectors during 1920.

## BAKEHOUSES AND RESTAURANT KITCHENS

At the end of 1920 there were 175 bakehouses on the register, including 39 factory bakehouses. 49 of these bakehouses were not in use. 127 of the 175 were underground bakehouses, of which 25 were factory bakehouses, and 39 not in use.

At the end of the year 420 restaurant kitchens were on the register.

Bakehouses and restaurant kitchens are visited by the Factory and Workshop Inspector, and further particulars in regard to the work will be found on pages 54-56.

## (c)—SALE OF FOOD AND DRUGS ACTS.

753 samples have been taken under these Acts, and 723 of these proved to be genuine and 30, or 40 per cent., adulterated. The details are given in the following table:—

Articles of food of which samples have been taken.	Total number of samples.	Genuine.	Adulterated.
Arrowroot .. ..	8	8	—
Baking Powder .. ..	6	6	—
Butter .. ..	61	61	—
Cheese .. ..	16	16	—
Cocoa .. ..	19	19	—
Coffee .. ..	15	15	—
Custard Powder .. ..	9	9	—
Dripping .. ..	27	27	—
Egg Powder .. ..	6	6	—
Flour (Self-Raising) .. ..	40	40	—
Ground Ginger .. ..	2	2	—
Jam .. ..	1	1	—
Lard .. ..	28	28	—
Margarine .. ..	4	4	—
Milk .. ..	383	363	20
Milk (Condensed) .. ..	1	—	1
Mustard .. ..	26	25	1
Oatmeal .. ..	4	4	—
Olive Oil .. ..	1	1	—
Pepper .. ..	16	16	—
Salad Oil .. ..	7	7	—
Tea .. ..	1	1	—
Toffee .. ..	2	2	—
Vinegar .. ..	30	26	4
Vinegar (Malt) .. ..	20	16	4
Total .. ..	753	723	30

The 753 include 1 informal sample of butter, 1 of lard, 2 of milk, 1 of condensed milk, and 1 of tea.

Prosecutions were undertaken in respect of 17 of the 30 samples which were reported as being adulterated. These are set out in the following table:—

*Summonses—Under the Sale of Food and Drugs Acts.*

No. of Sample.	Article.	Result of Analysis.	Date of Hearing of Summons.	Result of Proceedings.	
				Penalty.	Costs.
			1920.	£ s. d.	£ s. d.
C. 8	Milk ..	Added water, 13·8 per cent. .. ..	27th Feb. ..	15 0 0	—
C. 17	" ..	Deficient in milk fat, 16 per cent. ...	30th April ..	5 0 0	0 15 0
C. 22	Malt Vinegar	Vinegar, other than malt vinegar, 100 per cent. ..	9th " ..	—	0 12 6
C. 32	" ..	" ..	9th " ..	—	0 12 6
A. 43	Mustard ..	Added starch, 7 per cent. .. ..	23rd " ..	Dismissed.	Proceedings not taken within 28 days from purchase.
C. 112	Milk ..	Deficient in milk fat, 4 per cent. .. ..	14th May ..	—	2 2 0
C. 113	" ..	" 23·6 " .. ..	14th " ..	—	4 4 0
A. 97	" ..	Added water, 10 per cent. .. ..	28th " ..	Summons dismissed	Warrant y proved
A. 129	" ..	" 6·9 " .. ..	18th June ..	—	2 2 0
C. 130	" ..	Deficient in milk fat, 13 per cent. .. ..	8th July ..	4 0 0	2 2 0
C. 140	" ..	Added water, 6·1 per cent. .. ..	8th " ..	7 0 0	3 3 0
A. 194	" ..	Deficient in milk fat, 16·6 per cent. .. ..	18th Aug. ..	Dismissed	under the Probation of Offenders Act.
A. 222	" ..	" 25·0 " .. ..	24th Sept...	7 0 0	0 10 6
A. 262	" ..	Added water, 5·2 per cent. .. ..	12th Nov. ..	0 10 0	0 10 6
A. 291	" ..	" 6·8 " .. ..	10th Dec. ..	0 10 0	2 2 0
A. 335	Vinegar ..	Deficient in acetic acid, 13 per cent. .. ..	10th Jan. ..	0 10 0	2 2 0
A. 371	Milk ..	Added water, 5·5 per cent. .. ..	2nd Feb. ..	5 0 0	2 2 0

*Wholesale dealers in Margarine.*—Certificates of registration as Wholesale Dealers in Margarine under the provisions of the Sale of Food and Drugs Acts were issued during the year in respect of two premises in the Borough.

## ADMINISTRATION OF THE FOOD CONTROLLER'S ORDERS.

The work of inspection and purchase of samples for the enforcement of these Orders, which had been carried out in previous years by the male Sanitary Inspectors, under the supervision of the Medical Officer of Health as Enforcement Officer of the St. Pancras Local Food Control Committee, was terminated at the end of June, 1920. Up to this time the male Inspectors made 3759 visits in 1920 in this connection.

## Section VI.—Sanitary Administration.

### THE STAFF.

The names of the staff of the Public Health Department at the end of 1920 will be found on pages 5 and 6.

The visiting work of the staff will be found tabulated in Tables Nos. 7-10 on pages 93-97, and on page 17.

G. T. Calthrop, Esq., M.A., M.B. Cantab, D.P.H., who was appointed as Tuberculosis Officer on 26th November, 1919, took up his duties on January 1st, 1920.

Miss Gladys Miall-Smith, B.Sc., M.B., B.S. Lond., D.P.H., was appointed as Assistant Medical Officer for Maternity and Child Welfare on March 3rd, and took up her duties on 12th April.

Mr. J. Landen, Sanitary Inspector, was superannuated on 28th July. Mr. Landen entered the Council's service in 1899, and his retirement was necessitated by ear trouble, the result of smallpox, which he contracted some years ago in the faithful performance of his duty.

Mr. H. G. West, Sanitary Inspector for factories and workshops, who had also been in the Council's service since 1899, resigned in February to go abroad. Mr. B. H. Thompson, one of the district sanitary inspectors, was appointed in his place to the post in connection with factories and workshops. Mr. J. B. Molloy, temporary sanitary inspector, also resigned in February on being appointed as sanitary inspector in Shoreditch, and Mr. S. W. Capel and Mr. H. K. Nixon were appointed as sanitary inspectors on March 31st. Miss G. Anthony was appointed as Sanitary Inspector in March, and Miss G. B. Steggles as a temporary Health Visitor on January 5th.

Mr. J. W. Knight, Clerk, was transferred to another department in February, and Mr. T. H. Hague, temporary Clerk, was appointed as Clerk in his place in March. Mrs. F. E. Henderson was transferred to the department as Clerk in March. In February Miss A. West, temporary Clerk, resigned, and Miss G. Wood was appointed as temporary Clerk in her place. Mr. E. Winchester and Mr. E. Rogers were appointed as temporary Clerks in March and May respectively.

The changes in the Council's staff at the Maternity and Child Welfare Centres are set out on pages 18-20.

#### OFFICE ACCOMMODATION.

In a report of the Medical Officer of Health, dated April 15th, 1920, attention was called to the unsuitability and insufficiency of the accommodation at present at the disposal of the department, and on 21st April the Public Health Committee resolved that the Parliamentary and General Purposes Committee be asked to consider this matter. Upon Dr. Miall-Smith being appointed it was found necessary, owing to lack of accommodation, to rent an office for her use in the premises of the St. Pancras Dispensary, 3<sup>d</sup>, Oakley Square, N.W. 1. If suitable premises were obtained for the department outside the Town Hall the congestion in certain other departments would thereby be considerably relieved.

#### CHEMICAL AND BACTERIOLOGICAL WORK.

The Borough Council has an arrangement with the Lister Institute of Preventive Medicine, Chelsea Gardens, S.W. 1, for the bacteriological examination at the expense of the Council of material from St. Pancras cases sent to them through medical practitioners in regard to diphtheria, tuberculosis, and typhoid fever. The work done in 1920 was as follows:—

	Total.	Positive.	Negative.
Examination of swabs for <i>B. diphtheriæ</i> .. ..	612	153	459
„ sputum for <i>B. tuberculosis</i> .. ..	288	58	230
„ blood for Widal reaction (typhoid, etc.)	13	3	10

Examinations of sputum have also been made at the tuberculosis dispensaries (*see page 38*).

Facilities for the examination of cerebrospinal fluid in suspected cases of cerebrospinal fever, etc., are available to the Medical Officer of Health through the London County Council laboratory, and for the examination of the blood in suspected malaria through the Ministry of Health.

The chemical work of the Public Analyst (Mr. J. Kear Colwell, F.I.C.) in connection with the Sale of Food and Drugs Acts is referred to on page 72.

## Section VII.—Other Services.

Cordial co-operation exists between the work of the Council and the voluntary agencies performing work of public health and social importance. These agencies include the various hospitals and dispensaries, the local District Nursing Associations, the Maternity Nursing Association, the Invalid Children's Aid Association, the Charity Organisation Society, the National Society for the Prevention of Cruelty to Children, the Invalid Kitchens, the Mary Ward Settlement, Lyndhurst Hall, the Kentish Town Dining Room for Mothers, etc. Voluntary agencies subsidized by the Council are referred to particularly in Section II. of this Report (Maternity and Child Welfare).

### HOME NURSING.

As regards district nursing, the Borough comprises the whole of the district of the Central St. Pancras District Nursing Association, and large portions of the districts of the Metropolitan Nursing Association, the Hampstead District Nursing Association, and the North London Nursing Association. The associations are paid by the Council or the Mayor's Nursing Fund at the rate of 1s. per visit for the nursing of cases of measles, whooping cough, ophthalmia neonatorum, infantile diarrhoea, influenza and pneumonia, but the bulk of their work is supported by voluntary funds. The home nursing is of very great public health importance, and the need for its extension and support from public funds is very great. The home nursing work done during 1920 in St. Pancras is indicated by the following figures:—

	No. of cases nursed.	No. of home visits paid.
Central St. Pancras District Nursing Association ..	842	8656
Metropolitan Nursing Association (St. Pancras cases) ..	384	7628
Hampstead District                   "                   "                   " ..	274	2403
North London Nursing           "                   "                   " ..	211	3769

## Section VIII.—HOUSING.

In the following section are set out particulars in regard to housing asked for in the Ministry of Health's Memorandum (9 Med.) and tabulated as required therein:—

### I.—GENERAL HOUSING CONDITIONS IN THE DISTRICT.

- (1) *General Housing Conditions.*—The outstanding feature of the housing conditions in the district is the circumstance that, except for a limited number of blocks of self-contained flats, almost the only accommodation available for the working classes is the tenement house. Emphasis has been laid in many reports in the past on the evils of this system of housing, and in last year's Annual Report the matter was gone into at some length.

(2) (a) *Housing shortage.* There is a chronic condition of housing shortage in St. Pancras associated with the occupation by more than one family, and the consequent overcrowding of most of the houses in the Borough. This condition has been aggravated since the war and at the end of 1920 there were practically no tenements to let, though there was a considerable demand for houses. Some indication of the demand is indicated by the fact that there were 823 names on the waiting lists of applicants for the houses which the Council were building.

(b) *Measures taken or contemplated to relieve this shortage.*—No private building of dwelling houses was in progress during the year. In regard to the Council's building programme see page 78.

## II.—OVERCROWDING.

(1), (2) and (3) *Extent, causes, and measures taken or contemplated.*—Details in regard to these points were given in last year's Annual Report.

(4) In 32 instances in 1920 intimation notices were served in regard to the overcrowding in dwelling houses. Most of these were complied with, but in no cases were proceedings taken. It was found to be very difficult and even impossible in some cases to secure compliance with such notices by reason of the inability of the tenants to find additional or alternative accommodation. In view of this many cases of overcrowding were observed by the Sanitary Inspectors without any action being taken beyond a verbal recommendation to seek more rooms. A similar difficulty was found in dealing with the illegal occupation of underground rooms for sleeping purposes.

## III.—FITNESS OF HOUSES.

(1) (a) and (b) The general standard of housing in the Borough is indicated under the headings I and II above, and in greater detail in last year's Annual Report. The structural defects are mainly those resulting from the letting of houses to more than one family, without the necessary sanitary and other provisions having been made. Amongst these are the occupation of unwholesome underground rooms, which has greatly increased since the war. A large number of houses also are in a condition of disrepair, and need a great deal of money to be spent on them to remedy dilapidations, apart from structural alterations.

(c) *How far defects are due to the lack of proper management and supervision by owners.* It is very difficult to apportion the responsibility for the bad conditions existing in so many tenement houses. It would seem that the prime responsibility rested with the persons who originally allowed the houses to be occupied by more than one family without proper structural accommodation being provided; that, however, occurred many years ago in most districts, though the process is still proceeding in certain parts of the Borough. The houses having been sublet in this way, a very great deal of damage has been done in many cases by reason of the carelessness or active destructiveness of the tenants or sub-tenants, and it is difficult to blame the owners for this. At the same time a comparison of the houses occupied by "good" and "bad" owners (from this point of view) shows clearly that by good management and supervision the houses can be to a great extent protected from deterioration through the habits of the tenants. It must be admitted, however, that a great part of this management consists in letting the houses only to "good" tenants and excluding "bad" tenants, and this must simply force the "bad" tenants into other people's houses. The dilapidated state of the houses of many owners is due to their refusal to spend the money necessary to remedy the defects which are legitimately due to the age and overcrowding of the property. It would undoubtedly make for improvement if all tenement houses were managed and supervised by

or on behalf of their owners in the manner that is now practised by certain "good" owners. An instance of such management is to be found in the Marylebone Farm Estate, the leases on which are now rapidly reverting to the Crown. This ought, nevertheless, to be combined with extensive rebuilding as soon as it is possible.

There is no doubt, also, that much house property, which is in a bad condition, would have been preserved from such deterioration if the ground landlords had taken care that their lessees conformed to the obligations placed upon them by their covenants.

(2) Details as to action taken as regards unfit houses under (a) the Public Health (London) Act, etc., will be found on pages 50 and 51; and (b) the Housing Acts, on this page.

(3) *Difficulties in remedying unfitness, and special measures taken or suggested.*—The institution of a complete house-to-house inspection has been postponed until the London County Council By-Laws in regard to tenement houses have been brought into operation. With regard to house management, the experiment on the Crown Estate, where the houses are being put under the management of a staff of women house-managers as the leases fall in, will be watched with great interest. The management is on the lines associated with the name of Miss Octavia Hill.

(4) *Water supply, closet accommodation, and refuse disposal.*—These matters were dealt with in last year's Annual Report.

#### IV.—UNHEALTHY AREAS.

Particulars in regard to this matter were given in last year's Annual Report. In regard to developments since 1919 reference may be made to pages 80 to 82.

#### V.—TENEMENT HOUSE BY-LAWS.

It is most desirable that the London County Council by-laws in this respect should be brought into operation without delay. It is difficult to fix standards for tenement houses until this has been done.

#### VI.—GENERAL AND MISCELLANEOUS.

(See "*Work of the Special (Housing) Committee*," page 78).

#### VII.—STATISTICS FOR THE 12 MONTHS ENDED 1ST JANUARY, 1921.

(1) Number of dwelling-houses in respect of which complaints were made that they were unfit for human habitation .. ..	Nil.
(2) <i>Action under Sec. 17 of the Housing Act of 1909:—</i>	
(a) Number of dwelling-houses inspected under and for the purpose of the section—	
First routine inspection .. .. .	47
Subsequent .. .. .	1098
	— 1145
(b) Number of dwelling-houses which were considered to be unfit for human habitation—	
As regards the whole house .. .. .	Nil.
,, underground rooms (2 rooms) .. .. .	1
	—

(c) Number of dwelling-houses the defects in which were remedied without the making of closing orders ..	1145
(3) <i>Action under Sec. 28 of the Housing Act, 1919</i> ..	Nil.
(4) (a) Number of representations made to the local authority with a view to the making of closing orders—	
As regards the whole house ..	Nil.
„ underground rooms ..	Nil.
(b) Number of Closing Orders made—	
As regards the whole house ..	Nil.
„ underground rooms ..	Nil.
(c) Number of dwelling-houses in regard to which closing orders were determined ..	Nil.
(5) (a) Number of demolition orders made ..	Nil.
(b) „ houses demolished in pursuance of demolition orders ..	Nil.
(6) Number of dwelling-houses demolished voluntarily ..	Nil.
(7) <i>Obstructive Buildings.</i> Representations, demolitions, etc. ..	Nil.
(8) No staff is engaged exclusively on housing work. The 11 district inspectors carry out all inspections of houses, and the subsequent clerical work is performed by the general clerical staff. A large amount of negotiation and other work in connection with housing has devolved upon Mr. A. Powel Coke, Chief Clerk in the Public Health Department and Clerk of the Special (Housing) Committee, and the following section in regard to the work of that Committee has been compiled by him.	

### WORK OF THE SPECIAL (HOUSING) COMMITTEE.

The following is a summary of the principal matters which were considered by the Special (Housing) Committee during the past year. In regard to some of the questions which will be referred to, the summary has been brought beyond the end of 1920 :—

On the 16th November, 1920, Councillor W. Carter and Councillor A. Davis were appointed Chairman and Deputy- Chairman respectively.

#### CHESTER HOUSE.

*Allocation of Flats.*—With the view to facilitating the allocation of the twelve flats at Chester House and the principles which should be applied in the selection of the tenants, a small Sub-Committee was appointed to deal with the matter. The Sub-Committee had before them the numerous applications which had been received and came to the conclusion that the question of overcrowding should be the first guiding principle in the allocation of these flats, and that the applicants be allotted accommodation not larger than was deemed sufficient to meet the reasonable needs of the families taking into consideration the sex and ages of the children and the bedroom accommodation required. The applications were carefully analysed, and the Sub-Committee visited numerous families in the Borough, who were living under conditions of serious overcrowding in one room, as a result of which the selection of tenants was made.

*Rating of new Flats.*—The Committee considered the question of the rating of Chester House, and made representations to the Rating Committee to adopt some kind of uniformity of rating of the new flats in relation to accommodation as compared with that provided in

pre-war flats, and pressing for the maximum reduction in order to arrive at the gross assessments. The Rating Committee accepted this principle.

*Opening of Flats*—The flats were formally declared opened on June 18th, 1921, and the tenants moved in in the early part of July.

#### BROOKFIELD ESTATE.

*Tenders*.—The Committee received and considered seven tenders for the erection of 19 blocks of maisonettes, 2 cottages, and 10 blocks of flats on this Estate comprising accommodation for 190 families. The lowest tender received was that of Mr. Albert Monk, of Lower Edmonton, in the sum of £229,619 for the buildings and £12,928 for the roads and sewers. The London Housing Board authorised the Council to accept the tender subject to the following conditions:—(a) to the Contract being based on the Ministry of Health's Form D. 88A; (b) to the Council satisfying themselves of the Contractor's financial ability to carry out his obligations; (c) to every effort being made to effect savings during the progress of the work by modifications; (d) to good rents being obtained; and (e) to the modifications already submitted to the Council being adopted in view of the high contract price.

*Foundations*.—Owing to the nature of the ground and especially in view of the fact that there was a slight settlement in Chester House, which has since been remedied, the Housing Board agreed to the use of cement concrete in the trenches with a layer of heavy hoop iron in the brick footings in lieu of blue lias concrete, in order to minimise any possible risk of settlement.

*Progress of Work*.—The contractor took possession of the site towards the end of 1920, and good progress is still maintained. It is anticipated that several flats and maisonettes will soon be ready for occupation.

*Proposed School Treatment Centre*.—The Committee considered an application from Mr. R. Kohnstamm to convey to him a site on the Brookfield Estate on which to erect a suitable building where treatment of school children may be carried on under the management of a Committee more or less on the lines of the Centres already established in St. Pancras. It was agreed, with the sanction of the Ministry of Health, to let on building lease to Mr. Kohnstamm for a term of 99 years at the ground rent of £35 per annum, a piece of land on the Estate surplus to the housing requirements. The draft lease is now under consideration.

#### PRINCE OF WALES ROAD.

*Progress of Work*.—The work is progressing steadily, but still slowly, owing to the shortage of labour, the real outstanding trouble being the difficulty of obtaining the necessary number of men particularly bricklayers and plasterers, but more especially the latter. This deficiency has been made good to some extent, but additional plasterers are still needed.

It is anticipated that the block of 64 flats will be ready for occupation early in the new year.

*Provision of Coppers*.—The question of providing coppers in connection with this scheme was discussed in the early stages when it was thought that no special provision need be made in view of the close proximity of the Public Baths and Washhouses. As the Public Washhouses are fully occupied, and as it is clearly desirable that each tenant should have facilities for washing, the Committee instructed the Architects to make the necessary provision. The extra cost was estimated between £350 to £400, but the contingency sum provided in the contract, unless otherwise allocated, should be sufficient to meet the extra expenditure.

*Perambulator Sheds.*—A letter was received from the Ministry of Health stating that they have had under reconsideration the position, the amount of work, and the cost that would be entailed in the erection of the pram sheds as shown on the drawings. With a view to reducing the cost of the scheme, the Ministry requested the Committee to consider the omission of the sheds as they considered that the sheds could be provided in another position and in a more economical method, if they were still considered essential. In the opinion of the Committee it was considered essential that provision should be made for the sheds in a block of flats of this size, an opinion which was based upon the experience already obtained from other blocks of buildings erected by the Council. The Ministry were informed of this decision and the question has since been discussed on the site with one of their representatives.

#### SOMERS TOWN IMPROVEMENT SCHEME, No. 1, 1921.

On the 17th December, 1919 the Committee were authorised by the Council to prepare reconstruction schemes under Part II of the Housing of the Working Classes Act, 1890, in regard to fifteen areas in Somers Town. The details of these areas were enumerated in the report of the Medical Officer of Health, who advised that the areas were insanitary and could not be satisfactorily dealt with otherwise than by schemes of reconstruction. This was a considered opinion following upon a detailed inspection of all the streets and houses in the district in question.

A copy of the Committee's report was sent to the London Housing Board on the 20th December, 1919. Meanwhile, the Council's Architect (Mr. A. J. Thomas, L.R.I.B.A.), was instructed to prepare the necessary plans of these areas and of the proposed buildings, and to supply such other information as would enable schemes to be compiled in accordance with the provisions of the Act. This was done and a comprehensive report submitted to the Ministry.

On the 12th April, 1920, the Medical Officer of Health and the Chief Clerk had an interview with the Ministry's representatives on the subject, when it was arranged for one of their Inspectors to visit the areas in order that the Ministry might be in a better position to advise the Council before steps were taken to prepare the petitions under Part II. It was clearly desirable to obtain an indication of the views of the Ministry before putting into motion the complicated machinery involved in the preparation of reconstruction schemes.

The areas were inspected by a representative of the Ministry on the 21st April. Letters of enquiry were addressed to the Ministry on the 28th April and 19th May, and on the 5th July the following reply was received:—

735/202

Ministry of Health,  
Whitehall, S.W. 1.  
July, 1920.

Sir,

*Somers Town.*

With reference to your letter of the 19th May, I am directed by the Minister of Health to state that he has had under consideration a report made by Mr. Stewart with reference to a number of small areas, in regard to which the Metropolitan Borough Council of St. Pancras have authorised the preparation of improvement schemes under Part II of the Housing of the Working Classes Act, 1890. There appears to be a *prima facie* case for dealing with these areas or some of them in the manner proposed, but there are certain points in regard to which the Ministry desire further information. They would be glad if representatives of the Council would call at this office and confer with the officials of the Ministry on the subject.

I am to request that notice may be given as to the date on which the Council's representatives propose to come.

I am, Sir,  
Your obedient Servant,  
(Signed) C. B. K. ELLIS,  
For Assistant Secretary.

A. P. Coke, Esq.

Following upon the receipt of this communication, Councillor A. Davis (then Chairman), the Medical Officer of Health, and the Chief Clerk conferred with the Ministry's officials on the 14th July, when the whole subject was again reviewed.

In the meantime the Council had received an offer for the sale of the freehold of several blocks of property in Somers Town. The District Valuer was consulted, who advised that the price asked for the land exceeded the market value.

Proposals for dealing with the first section of the Somers Town scheme were submitted to the Committee by the Architect on the 16th November. This was followed by a further conference with the Ministry's officials on the 3rd December, Councillors W. Carter (Chairman), A. Davis (Deputy Chairman), the Architect and the Chief Clerk representing the Council.

The plans for dealing with the first section were placed before the Ministry's representatives, and were the subject of considerable discussion. The area includes property bounded on the north by Crawley Mews, on the south by Aldenham Street, on the east by Clarendon Street, and on the west by Seymour Street.

The Ministry's representatives promised to give the matter their careful consideration, and to advise the Council before the District Valuer was asked to report upon the value of the interests involved in the proposals.

It was explained at the interview that, although there are other areas contemplated in Somers Town which wholly or mainly consist of insanitary property, it was not considered practicable under present conditions to deal with them owing to the difficulty of demolition and de-housing, whereas the advantage of the first scheme was that it was possible to erect new blocks of dwellings on the vacant land fronting Aldenham Street and the south end of Wolcot Street without any displacement. Indeed, it was this fact which prompted the submission of the first scheme. It was hoped also that the accommodation provided in the first scheme would afterwards make it possible to prepare schemes for the neighbouring areas.

A further letter was addressed to the Ministry on the 24th December, asking whether the Committee could proceed to prepare the scheme and so commence a much needed improvement in the unhealthy conditions which exist in Somers Town.

No reply was received to this communication, but the area was once more visited by the Ministry's Inspector on the 27th January, 1921, followed again by a discussion at the Ministry on the 25th February, with Councillors Carter and Davis and the Chief Clerk, when our representatives were urged to defer the matter owing to prevailing financial considerations.

The result of these prolonged negotiations was reported to the Council on the 23rd March, when the Housing Committee were authorised to prepare a scheme for the improvement of the first area under Section 39 (1) (b) of the Housing of the Working Classes Act, 1890.

The displacement of 558 persons of the working classes is involved, and it is proposed to provide re-housing accommodation on the cleared area, as follows:—84 flats of three rooms, and 56 flats of four rooms, with scullery, bath room and w.c., in addition for each flat—a total of 476 rooms. Based on an average of 2 persons per room, accommodation will thus be provided for 952 persons. The Architect's estimate of the cost of erecting three blocks of 10 flats, four blocks of 20 flats, and one block of 30 flats is £116,800, in addition to which he provides the sum of £11,850 for pulling down existing buildings, foundations, paving work, iron railings, etc., making a total estimated cost of £128,650.

On the 27th July, the Council resolved as follows :—

- (a) That the scheme under Section 39 (1) (b) of the Housing of the Working Classes Act, 1890, as amended by subsequent Acts, now submitted for the improvement of the area (more particularly specified as the Somers Town Improvement Scheme, No. 1, 1921), including the vacant land on the north side of Aldenham Street, lying between Seymour Street and Clarendon Street; 1-28 (consecutive inclusive), Wolcot Street; 36-39 (consecutive inclusive), Johnson Street; gardens at the rear of 39, 40, 63 and 64, Clarendon Street; the vacant land on the west side of Wolcot Street, lying between Aldenham Street, and including No. 44, Wolcot Street; 45-54 (consecutive inclusive), Wolcot Street; 35, 34, Johnson Street, and the strip of land approached between Nos. 34 and 33, Johnson Street, extending to the party fence wall in the rear between 166 and 168, Seymour Street; parts of gardens at the rear of 140, 142 and 166, Seymour Street; 21-31 (consecutive inclusive), Johnson Street; 188, 190 and 192, Seymour Street, and the garden at the rear of 194, Seymour Street; the whole of the premises and land in Crawley Mews; 54, 56, 58 and 60, Werrington Street; 35, 36 and 37, Clarendon Street, together with the plans, particulars, and estimates relating to the said scheme, be and the same are hereby made and adopted.
- (b) That the Special Housing Committee be authorised to take all necessary steps for obtaining sanction thereto, and that the Seal of the Council be affixed to the Scheme and plans, and the petition to the Ministry of Health for an Order confirming the Scheme.

The Petition was lodged with the Ministry on the 29th August, 1921.

#### GENERAL MATTERS.

*Prospect Terrace.*—The Committee had under consideration the report of the Special (Prospect Terrace) Committee with reference to the decision of the Council on the 25th May, 1921, to purchase the land belonging to the Governors of the Foundling Hospital adjoining Prospect Terrace, and referring the matter to the Housing Committee with an instruction to take steps to obtain the necessary consent of the Ministry of Health to agreements being entered into for the acquisition of the land for housing purposes. A sketch plan was prepared by the Borough Surveyor showing how the site could be developed, and providing for the erection of 26 flats at an estimated cost of between £25,000 to £28,000. In the special circumstances which have arisen in connection with the roadway of Prospect Terrace, and to avoid costly and expensive litigation, the Ministry were requested on the 18th July, 1921, to sanction the purchase of the site under Part III. of the Act of 1890 as part of the Council's Assisted Housing Scheme.

*London Guild of Builders.*—A deputation was received from the St Pancras Area Committee of the London Guild of Builders for utilizing the services of the Guild in work to be done in the Borough. The principal object of the interview was to give the Guild the same opportunity of tendering for any future housing schemes as was given to private builders, in support of which it was stated that the Guild were carrying out housing contracts with the approval of the Ministry in other London boroughs. The Committee decided that in all future housing schemes an opportunity should be given to the Guild to submit tenders.

*Demolition of Houses.*—The Committee addressed a communication to the London County Council asking them to give instructions that in all cases of application for sanction to the demolition of premises under Section 6 of the Housing (Additional Powers) Act, 1919, the Metropolitan Borough Council concerned should be consulted before any decision upon the application was taken. The County Council adopted this suggestion, with the result that it has been possible to communicate the observations of the Committee upon the applications made under Section 6, which deals with prohibition on demolition or change of user of dwelling houses. The Government have been urged to promote legislation for the extension of these provisions of the Act of 1919, which otherwise will expire on the 23rd December, 1921.

APPENDIX.			
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TABLE No. 1.

## VITAL STATISTICS OF WHOLE DISTRICT OF ST. PANCRAS DURING 1920 AND PREVIOUS YEARS.

YEAR.	Population estimated to middle of each Year.	Civil Population.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT.			
			Un-corrected Number.	Nett.						Under 1 Year of Age.		At all Ages.	
				Number.	Rate.	Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Number.	Rate per 1,000 Nett Births.	Number.	Rate.
1910	237178	—	5385	—	22·7	3415	14·4	710	562	580	107	3267	13·8
1911	237129	—	5135	5555	23·4	3418	14·4	673	611	623	112	3356	14·1
1912	220353	—	5008	5367	24·4	3147	14·3	595	605	472	88	3157	14·3
1913	218387	—	5167	5517	24·7	3409	15·6	728	662	512	93	3343	15·0
1914	218387	—	4945	5225	23·9	3386	15·5	721	677	481	92	3342	15·3
1915	218387	200322	4458	4754	21·8*	3523	17·6†	672	692	497	105	3543	17·7†
1916	214135	196813	4310	4530	21·2*	2991	15·2†	565	619	385	85	3045	15·5†
1917	208006	186600	3635	3796	18·2*	3099	16·6†	608	718	402	106	3142	16·8†
1918	196883	175716	3339	3318	16·8*	3789	21·5†	626	751	340	102	3914	22·3†
1919	228585	219434	3804	3824	16·7*	3104	14·1†	670	496	336	88	2930	13·4†
1920	228980	228178	6191	5934	25·4*	3007	12·9†	713	601	435	73	2895	12·4†

Area of district in acres (land and inland water), 2694·4; total population at all ages, 218,387; number of inhabited houses, 22,246; average number of persons per house, 9·82; at Census, 1911 (cf. Census, Vol. V.).

\* Based on total population.

† Based on Civil population.

TABLE No. 2. DEATHS REGISTERED FROM ALL CAUSES FOR THE YEAR 1920.

NOTE.—The Deaths of Non-Residents occurring in Public Institutions situated in the Borough are excluded, and the Deaths of Residents occurring in Public Institutions situated beyond the limits of the Borough are included.

[illegible]

## DEATHS REGISTERED FROM ALL CAUSES FOR THE YEAR, 1920—continued.

Cause of Death.	AGES.																	Totals.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
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F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.

Cause of Death.	AGES.																	Totals.
	0 to 1	1 to 2	2 to 5	Total under 5	5 to 10	10 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 and upwards				
	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	
4. Diseases of the Respiratory System—con.																		
94. Pulmonary Congestion, Pulmonary Apoplexy	1		1	1 1			1	1	1		2	2	1	2	4	1	9	8 17
95. Gangrene of the Lung									1		1						2	2
96. Asthma	1			1					1	3	2	6	2	1	1		12	5 17
97. Pulmonary Emphysema														1			1	1
98. (a) Fibroid Disease of the Lung									1				1	1			2	1 3
(b) Other Diseases of the Respiratory System									1	1			1				2	1 3
5. Diseases of the Digestive System.																		
99. (a) Diseases of the Teeth and Gums	1			1							1						2	2
(b) Other Diseases of the Mouth and Annexa																		
100. Diseases of Pharynx, Tonsillitis	1			1							1						2	2
101. Diseases of Oesophagus											1						1	1
102. Perforating Ulcer of Stomach									1	1	1	6	2	3	1	2	10	7 17
103. (a) Inflammation of Stomach	1	1		1 1							1			1	2		1	3 4 7
(b) Other Diseases of Stomach									1		1			1			2	1 3
104 & 105. (a) Infective Enteritis			1	1									1					2 2
(b) Diarrhoea (not returned as infective)	6	5		1	7	5										2	9	5 14
(c) Enteritis (not returned as infective)	11	4	1	1	13	4	1				1			1	1	1	16	6 22
(d) Gastro-Enteritis (not returned as infective)	4	7	1	2	5	9							1			1	5	11 16
(e) Dyspepsia (under 2 years of age)																		
(f) Colic																		
(g) Ulceration of Intestines	1			1				1									4	1 2
(h) Duodenal Ulcer											1	3		1				
106. Ancylostomiasis																		
107. Other Intestinal Parasites						2	1	1	1	1		1	1	1			6	2 8
108. Appendicitis																	6	5 11
109. (a) Hernia	1	1		1 1					2		3	1	1		1	1	5	5 10
(b) Intestinal Obstruction	2			2					1			1		1	2	2	1	1 2
110. Other Diseases of the Intestines																		
111. Acute Yellow Atrophy of Liver																		
112. Hydatid of Liver																		
113. (a) Cirrhosis of the Liver (not returned as alcoholic)						1					2	1	3	2	1	1	8	4 12
(b) Cirrhosis of the Liver (returned as alcoholic)											1	1					1	1 2
(c) Diseases formerly classed to "Other Diseases of Liver and Gall Bladder"												1					1	1
114. Biliary Calculi												1			1		2	2
115. Other Diseases of the Liver												1		1			1	1 2
116. Diseases of the Spleen																		
117. Peritonitis (cause unstated)					1		1	1	1			1					5	5
118. Other Diseases of the Digestive System										1		1					1	1 2
6. Non-Venereal Diseases of the Genito-Urinary System and Annexa—																		
119. Acute Nephritis					1							1	3				4	1 5
120. Bright's Disease						1	1	1	1	1	4	5	16	3	15	11	53	37 90
121. Chyluria																		
122. Other Diseases of the Kidney and Annexa												1		1		2	2	4
123. Calculi of the Urinary Passages																		
124. Diseases of the Bladder							1				1	1		1	1	4	13	3 16
125. Diseases of the Urethra, Urinary Abscess, &c.								1									1	1
126. Diseases of the Prostate													1	4		4	10	10
127. Non-Venereal Diseases of Male Genital Organs																		
128. Uterine Hæmorrhage (Non-puerperal)																		
129. Uterine Tumour (Non-cancerous)																		
130. Other Diseases of the Uterus																		
131. Ovarian cyst, Tumour (Non-Cancerous)														1			1	1
132. Other Diseases of the Female Genital Organs																	1	1
133. Non-puerperal Diseases of the Breast (Non-cancerous)											1							

Cause of Death.	AGES.																		Totals.
	0 to 1	1 to 2	2 to 5	Total under 5	5 to 10	10 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 and upwards					
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.			
7. The Puerperal State.																			
134. Accidents of Pregnancy ... ..										2							2		
135. Puerperal Hæmorrhage ... ..									1								2		
136. Other Accidents of Childbirth ... ..									1								2		
137. Puerperal Fever ... ..								1	1	3							5		
138. „ Albuminuria and Convulsions ... ..								1	5	2							8		
139. „ Phlegmasia Alba Dolens, Embolism and sudden death ... ..								3	1								4		
140. „ Insanity ... ..									1								1		
141. „ Diseases of the Breast ... ..																			
8. Diseases of the Skin and of the Cellular Tissue.																			
142. (a) Senile Gangrene ... ..												1	2	1	1	2	3		
142. (b) Gangrene (other types) ... ..																	4		
143. Carbuncle, Boil ... ..									1								1		
144. Phlegmon, Acute Abscess ... ..	2	1			2	1							1	1			3		
145. Diseases of the Integumentary System ... ..	1				1												1		
9. Diseases of the Bones and of the Organs of Locomotion.																			
146. Diseases of the Bones ... ..												1					1		
147. Diseases of the Joints ... ..	1				1				1								1		
148. Amputations ... ..																	1		
149. Other Diseases of Locomotor System ... ..																			
10. Malformations.																			
150. Congenital Malformations ... ..	16	17	3		16	20											16		
11. Diseases of Early Infancy.																			
151. (a) Premature Birth ... ..	55	50			55	50											55		
151. (b) Infantile Debility, Icterus, and Sclerema ... ..																	50		
152. Other Diseases peculiar to early Infancy ... ..	23	17			23	17											23		
153. Lack of Care ... ..	13	6			13	6											13		
12. Old Age.																			
154. (a) Senile Dementia ... ..																			
154. (b) Senile Decay ... ..												1	1	1	1		2		
13. Affections Produced by External Causes.																			
155 to 163. Suicides ... ..								1	1	1	3	2	6		1	1	14		
164. Poisoning by Food ... ..																	5		
165. Other Acute Poisonings ... ..																			
166. Conflagration ... ..			1	1			1												
167. Burns (Conflagration excepted) ... ..			1	1	1	1				1					1		3		
168. Absorption of Deleterious Gases (Conflagration excepted) ... ..																	1		
169. Accidental Drowning ... ..	2				2				1				1				2		
170 to 176. Injuries ... ..			1	1		3	1	3	2	4		5		1		2	7		
177. Starvation ... ..												4	1	6		4	1		
178. Excessive Cold ... ..												2					2		
179. Effects of Heat ... ..												4	5	6	2	1	18		
180. Lightning ... ..																			
181. Electricity (Lightning excepted) ... ..																	1		
182 to 184. Homicide ... ..																			
185. Fractures (cause not specified) ... ..											1						1		
186. Other Violence ... ..																			
14. Ill-defined Causes.																			
187. Dropsy ... ..			1	1							1	1					2		
188. (a) Syncope (aged 1 year and under 70) ... ..																			
188. (b) Sudden death (not otherwise defined) ... ..																			
189. (a) Heart Failure (aged 1 year and under 70) ... ..																			
189. (b) Atrophy, Debility, Marasmus (aged 1 year and under 70) ... ..													1		1		2		
189. (c) Teething ... ..			1	1	1	2	1										2		
189. (d) Pyrexia ... ..																	1		
189. (e) Other ill-defined Deaths ... ..																			
189. (f) Cause not specified ... ..																			

TABLE No. 3.

*Summary of Ages.*

	0 to 1	1 to 2	2 to 5	Total under 5 years.	5 to 10	10 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 and upwards	Totals.
General Diseases .....	70	62	65	197	36	15	69	74	106	138	156	113	38	2	944
Diseases of the Nervous System and of the Organs of Special Sense .....	16	4	2	22	4	3	4	9	29	25	34	40	31	4	205
Diseases of the Circulatory System.....	1	1	1	3	8	8	9	14	33	59	103	160	118	29	544
Diseases of the Respiratory System .....	98	22	14	134	5	1	6	15	28	46	77	83	75	23	498
Diseases of the Digestive System.....	45	6	2	53	2	3	2	5	9	23	24	15	12	2	150
Non-Venereal Diseases of the Genito-Urinary System and Annexa .....	—	—	—	—	1	2	2	3	11	22	34	31	21	1	128
The Puerperal State .....	—	—	—	—	—	—	5	9	8	—	—	—	—	—	22
Diseases of the Skin and of the Cellular Tissue.....	4	—	—	4	—	—	1	—	—	—	1	4	4	—	14
Diseases of the Bones and of the Organs of Locomotion...	1	—	—	1	—	—	1	—	—	—	1	—	—	—	3
Malformations .....	33	3	—	36	—	—	—	—	—	—	—	—	—	—	36
Diseases of Early Infancy.....	165	—	—	165	—	—	—	—	—	—	—	—	—	—	165
Old Age .....	—	—	—	—	—	—	—	—	—	—	—	21	41	22	94
Affections produced by External Causes .....	2	—	5	7	9	7	5	9	13	14	13	11	3	1	92
Ill-defined Causes .....	—	1	2	3	—	—	—	—	—	—	1	1	—	—	5
Totals .....	435	99	91	625	65	39	104	138	237	327	444	479	343	84	2895

TABLE NO. 4.

TOTAL BIRTHS, TOTAL DEATHS, AND INFANTILE DEATHS, *with corresponding rates, for each Ward and Registration Sub-District.*

In this Table the estimated population, total or civil, is distributed amongst the Wards and Sub-districts in the same proportion as at the 1911 Census; the transferred births are allocated to the Wards and Sub-districts in proportion to their respective populations, but some of the births which took place in St. Pancras institutions are not redistributed, but are allocated to the districts in which the institutions are situated; and deaths of residents which took place outside of the Borough and deaths in public institutions are classified in the respective Sub-districts and Wards of their previous residence.

Registration Sub-Districts.	Wards.	Net Births.	Birth-rate per 1,000 total population.	Net Deaths.	Death-rate per 1,000 civil population.	Deaths under 1 year of age.	Infantile Death-rate per 1,000 Births.
West ..	4	695	24·6	369	13·1	62	89
	5	721	21·2	407	12·0	69	95
	—	1416	22·7	776	12·5	131	92
South ..	7	673	34·7	180	9·3	27	40
	8	747	25·8	362	12·5	46	62
	—	1420	29·4	542	11·2	73	51
East ..	3	911	24·5	477	12·9	66	72
	6	727	29·9	293	12·1	57	78
	—	1638	26·7	770	12·6	123	75
North ..	1	795	20·9	451	11·9	54	68
	2	665	28·5	310	13·3	50	75
	—	1460	23·8	761	12·5	104	71
No Address ..	—	—	—	46	—	4	—
Whole Borough	—	5934	25·4	2895	12·4	435	73

TABLE No. 5.—Showing the Birth rates, Death rates, and Infantile Mortality rates of England and Wales and certain of the large Towns, and of London and the Metropolitan Boroughs for 1920. (52 weeks ended 1st January, 1921.)

	Population (Civilian) as Estimated by the Registrar- General in the middle of 1920.	Birth Rate.	Death Rate.	Infantile Mor- tality.		Population (Civilian) as Estimated by the Registrar- General in the middle of 1920.	Birth Rate.	Death Rate. (Crude).	Infantile Mor- tality.
<b>England and Wales</b> ..	<b>37,609,600</b>	<b>25·4</b>	<b>12·4</b>	<b>80</b>	<b>County of London</b> ..	<b>4,531,971</b>	<b>26·5</b>	<b>12·4</b>	<b>75</b>
Birmingham ..	895,915	28·0	12·6	83	WEST.				
Liverpool ..	803,452	31·2	15·7	111	Paddington ..	149,673	22·8	11·1	78
Manchester ..	770,597	25·5	13·0	94	Kensington ..	164,177	24·3	13·0	81
Sheffield ..	492,570	26·6	13·2	104	Hammersmith ..	136,200	24·5	11·2	65
Leeds ..	449,212	25·6	14·3	105	Fulham ..	158,621	27·2	11·3	74
Bristol ..	375,641	25·7	11·7	69	Chelsea ..	62,987	22·2	11·9	52
West Ham ..	299,440	33·0	12·7	72	City of Westminster ..	132,615	16·2	11·6	71
Bradford ..	293,979	20·7	13·1	92	NORTH.				
Hull ..	290,808	29·2	13·2	98	St. Marylebone ..	101,856	21·6	12·5	65
Newcastle-on-Tyne ..	286,061	29·4	13·8	96	Hampstead ..	91,519	17·1	9·0	48
Nottingham ..	267,836	25·9	12·9	95	St. Pancras ..	228,178	25·4	12·3	72
Portsmouth ..	233,805	25·9	11·1	60	Islington ..	335,907	28·2	13·3	71
Stoke-on-Trent ..	248,852	31·1	12·7	98	Stoke Newington ..	52,984	23·1	12·8	80
Salford ..	235,239	26·8	12·7	97	Hackney ..	225,372	26·6	12·6	81
Leicester ..	245,465	24·0	11·5	87	CENTRAL.				
Cardiff ..	212,582	24·7	10·7	82	Holborn ..	39,676	20·8	14·9	64
Bolton ..	184,533	22·7	13·6	98	Finsbury ..	78,291	31·9	14·5	76
Croydon ..	191,580	23·0	10·8	62	City of London ..	14,447	12·6	13·3	71
Willesden ..	167,328	25·2	9·8	65	FAST.				
Rhondda ..	184,999	27·3	11·7	104	Shoreditch ..	102,044	36·6	15·4	91
Sunderland ..	155,211	35·0	15·8	103	Bethnal Green ..	114,471	33·7	14·7	95
Oldham ..	143,154	23·3	14·7	106	Stepney ..	241,770	31·2	14·4	87
Tottenham ..	146,970	25·5	9·7	64	Poplar ..	159,766	34·2	14·6	82
West Ham ..	299,440	33·0	12·7	72	SOUTH.				
Birkenhead ..	153,951	27·8	12·5	101	Southwark ..	187,142	31·8	14·4	86
Blackburn ..	131,012	21·5	13·4	110	Bermondsey ..	129,189	31·8	13·0	84
Brighton ..	137,685	22·7	12·0	65	Lambeth ..	293,572	27·8	13·0	67
Walthamstow ..	132,771	23·9	9·6	62	Battersea ..	165,664	28·1	12·3	82
Leyton ..	128,832	22·8	9·9	69	Wandsworth ..	346,990	20·8	10·0	62
Derby ..	128,868	25·8	10·5	72	Camberwell ..	284,712	26·5	11·5	70
					Deptford ..	115,636	28·3	12·0	79
					Greenwich ..	102,408	25·9	11·9	72
					Lewisham ..	174,438	23·1	10·8	65
					Woolwich ..	141,666	24·7	10·4	60

TABLE No. 6.

## METEOROLOGICAL TABLE FOR SAINT PANCRAS, 1920.

(Extracted from the Monthly Returns of the Meteorological Office.)

DEDUCED FROM OBSERVATIONS AT CAMDEN SQUARE, N.W., UNDER THE SUPERINTENDENCE OF H. ROBERT MILL, D.SC., LL.D.

	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
Baro- meter. {												
*Mean Pressure at 32° F. at Station Level	29·815	30·105	29·833	29·617	29·952	29·94	29·833	30·00	29·947	29·89	30·003	29·905
Air Temperature. {												
Mean of {												
Maximum A. ... ..	47·8	50·2	55·9	56·5	68·2	72·7	70·2	69·0	67·4	61·5	50·2	45·2
Minimum B. ... ..	36·1	36·5	38·7	42·8	47·8	52·2	53·2	50·4	50·5	44·9	36·9	36·8
Mean of A. and B. ... ..	42·0	43·3	47·3	49·7	58·0	62·5	61·7	59·7	58·9	53·2	43·6	41·0
Difference from Average † ... ..	+3·2	+3·3	+4·4	+1·3	+2·9	+1·5	-2·6	-3·5	+0·3	+2·5	-0·7	+0·5
Humidity—Morning ... ..	86%	86%	83%	88%	85%	68%	72%	73%	82%	90%	89%	90%
Earth Temperature at 4 ft. depth ... ..	44·3	44·0	44·0	47·0	51·0	55·7	58·1	61·2	57·2	55·4	49·6	45·7
Bright Sunshine. {												
Total Observed (Daily mean) ... ..Hours	1·48	2·14	4·26	2·90	7·42	7·23	4·77	5·10	3·57	4·32	2·13	0·90
Per cent. of total possible ... ..	18	22	36	21	48	44	30	35	28	40	24	12
Difference from Average † ... ..Hours	—	—	—	—	—	—	—	—	—	—	—	—
Rain and other forms of Precipita- tion. {												
Number of Days... ..	21	11	18	21	13	9	16	7	14	13	9	23
Total Fall ... ..Inches	2·5	0·58	1·42	3·07	0·69	1·59	4·06	1·75	3·27	1·09	1·12	2·36
Difference from Average † ... ..	+0·75	-1·06	-0·43	+1·54	-1·06	-0·43	+1·65	-0·47	+1·46	-1·54	-1·26	-0·04

\* The Readings for Pressure (Bar. 103 ft. above M.S.L.) given are those taken at Enfield; the hours of observation are 9 a.m. to 3 p.m., local time. The Readings for Humidity and Bright Sunshine are also those taken at Enfield; no readings being recorded at Camden Square during 1920.

† The averages used are obtained from observations extending over 35 years for Rainfall, Temperature, and Sunshine.

TABLE No. 7.

*Inspections and Re-inspections made by District Inspectors, by the Factory and Workshop (Male) Inspector and by Women Inspectors in connection with certain infectious diseases during the year 1920.*

DUTIES AND PREMISES.	MALE INSPECTORS.		TEMPORARY WOMEN INSPECTORS.		TOTAL.	
	Inspec- tions.	Re-inspec- tions.	Inspec- tions.	Re-inspec- tions.	Inspec- tions.	Re-inspec- tions.
<b>DISTRICT INSPECTORS.</b>						
INFECTIOUS DISEASES—Inquiry, removal, disinfection, etc. ..	47	39	3103	—	3150	39
Subsequent sanitary inspection, etc. ..	1172	2409	593	—	1765	2409
COMPLAINTS .. .. .	3613	11042	—	—	3613	11042
DRAINAGE—Under notice. Plans, supervision, etc. ..	194	2903	—	—	194	2903
Voluntary .. .. .	1660	2365	—	—	1660	2365
New Buildings .. .. .	207	553	—	—	207	553
Drain Tests .. .. .	6	—	—	—	6	—
YARDS OF MEWS AND STABLES .. .. .	5038	31	—	—	5038	31
HOUSING, TOWN PLANNING, ETC., ACT, 1909: 17 (1).—						
First Inspections .. .. .	47	284	—	—	47	284
Subsequent routine Inspections .. .. .	1098	4163	—	—	1098	4163
Inspections of registered tenement houses other than above	244	1445	—	—	244	1445
Other house-to house Inspections .. .. .	117	176	—	—	117	176
Visits to closed underground rooms .. .. .	225	—	—	—	225	—
SMOKE SHAFTS OBSERVED .. .. .	459	18	—	—	459	18
REGULATED TRADES. Offensive Trades .. .. .	12	—	—	—	12	—
Rag and Bone dealers .. .. .	33	—	—	—	33	—
Other effluvia businesses .. .. .	8	—	—	—	8	—
INSPECTIONS OF MARKET STREETS .. .. .	—	—	—	—	—	—
OTHER DUTIES .. .. .	400	23	1	—	401	23
FOOD CONTROL .. .. .	2711	—	—	—	2711	—
TOTALS .. .. .	17291	25451	3697	—	20988	25451
<b>FACTORY &amp; WORKSHOP (MALE) INSPECTOR.</b>						
FACTORIES .. .. .	232	447	—	—	232	447
LAUNDRIES—Factories .. .. .	8	8	—	—	8	8
Workshops .. .. .	9	—	—	—	9	—
BAKEHOUSES—Factories .. .. .	79	75	—	—	79	75
Workshops .. .. .	299	181	—	—	299	181
RESTAURANT KITCHENS .. .. .	48	64	—	—	48	64
OTHER WORKSHOPS .. .. .	344	554	—	—	344	554
OTHER WORKPLACES .. .. .	24	23	—	—	24	23
OTHER DUTIES .. .. .	46	5	—	—	46	5
FOOD CONTROL .. .. .	158	—	—	—	158	—
TOTALS .. .. .	1247	1357	—	—	1247	1357

*Inspections and Re-Inspections and other work of the Food Inspectors during 1920.*

DUTIES AND PREMISES.								Visits and In- spections.			Re-Inspections after Intimation Notices.		
								Mr. Auger.	Mr. Child.	TOTALS.	Mr. Auger.	Mr. Child.	TOTALS.
Milkshops .. .. .	..	..	..	..	..	..	..	192	412	604	—	—	—
Dairies .. .. .	..	..	..	..	..	..	..	224	16	240	—	—	—
Cowsheds .. .. .	..	..	..	..	..	..	..	4	9	13	—	—	—
Other Premises of Milk Purveyors .. .. .	..	..	..	..	..	..	..	1	8	9	—	—	—
Margarine Factories .. .. .	..	..	..	..	..	..	..	—	—	—	—	—	—
Butter Factories .. .. .	..	..	..	..	..	..	..	—	—	—	—	—	—
Ice Cream Premises .. .. .	..	..	..	..	..	..	..	72	136	208	—	—	—
Slaughter Houses .. .. .	..	..	..	..	..	..	..	29	115	144	—	—	—
Premises where Prepared Meats are made (sausages, pies, tripe, cooked meat, &c.) .. .. .	..	..	..	..	..	..	..	21	121	142	1	—	1
Butchers' Shops .. .. .	..	..	..	..	..	..	..	29	79	108	1	—	1
Fishmongers' Shops .. .. .	..	..	..	..	..	..	..	16	18	34	—	—	—
Fried Fish Shops and Fish Curer's premises .. .. .	..	..	..	..	..	..	..	46	151	197	1	—	1
Marketing Places .. .. .	..	..	..	..	..	..	..	2037	1567	3604	—	—	—
Other Premises where Food or Drugs are sold .. .. .	..	..	..	..	..	..	..	28	2	30	—	—	—
Other Visits .. .. .	..	..	..	..	..	..	..	104	180	284	—	—	—
TOTAL .. .. .								2803	2814	5617	3	—	3
SAMPLES, &c., TAKEN.								Formal Samples			Informal Samples		
No. of Milk samples .. .. .	..	..	..	..	..	..	..	183	198	381	2	—	2
„ Cream samples .. .. .	..	..	..	..	..	..	..	—	—	—	—	—	—
„ Butter and Margarine samples .. .. .	..	..	..	..	..	..	..	27	37	64	1	—	1
„ Other samples (specified below)—	..	..	..	..	..	..	..	—	—	—	—	—	—
Lard .. .. .	..	..	..	..	..	..	..	4	23	27	—	1	1
Dripping .. .. .	..	..	..	..	..	..	..	12	15	27	—	—	—
Oatmeal .. .. .	..	..	..	..	..	..	..	3	1	4	—	—	—
Custard powder .. .. .	..	..	..	..	..	..	..	5	4	9	—	—	—
Baking Powder .. .. .	..	..	..	..	..	..	..	4	2	6	—	—	—
Egg Powder .. .. .	..	..	..	..	..	..	..	6	—	6	—	—	—
Arrowroot .. .. .	..	..	..	..	..	..	..	7	1	8	—	—	—
Ground Ginger .. .. .	..	..	..	..	..	..	..	2	—	2	—	—	—
Condensed Milk .. .. .	..	..	..	..	..	..	..	—	—	—	—	1	1
Pepper .. .. .	..	..	..	..	..	..	..	11	5	16	—	—	—
Mustard .. .. .	..	..	..	..	..	..	..	14	12	26	—	—	—
Tea .. .. .	..	..	..	..	..	..	..	—	—	—	—	1	1
Cocoa .. .. .	..	..	..	..	..	..	..	6	13	19	—	—	—
Coffee .. .. .	..	..	..	..	..	..	..	5	10	15	—	—	—
Vinegar .. .. .	..	..	..	..	..	..	..	26	26	52	—	—	—
Jam .. .. .	..	..	..	..	..	..	..	1	—	1	—	—	—
Salad oil .. .. .	..	..	..	..	..	..	..	7	—	7	—	—	—
Olive oil .. .. .	..	..	..	..	..	..	..	1	—	1	—	—	—
Toffee .. .. .	..	..	..	..	..	..	..	12	8	20	—	—	—
Cheese .. .. .	..	..	..	..	..	..	..	14	2	16	—	—	—
Flour .. .. .	..	..	..	..	..	..	..	25	15	40	—	—	—
TOTAL .. .. .								375	372	747	3	3	6

TABLE NO. 8—con.

*Inspections and Re-inspections and other work of the Food Inspectors during 1920.*

DUTIES AND PREMISES.	Visits and In- spections.			Re-Inspections after Intimation Notices		
	Mr. Auger.	Mr. Child.	TOTALS.	Mr. Auger.	Mr. Child.	TOTALS.
FOOD CONTROL (No. of Samples, Inspections, &c.) ..	438	452	890	—	—	—
UNSOUND FOOD.						
No. of surrenders and seizures :—	SURRENDERED			SEIZED		
Meat, &c. .. .. .	14	3	17	—	—	—
Fish .. .. .	12	8	20	—	—	—
Shellfish .. .. .	3	1	4	—	—	—
Other Foods (specified below) :—						
Fruit .. .. .	2	7	9	—	—	—
Eggs .. .. .	3	3	6	—	—	—
Milk (tins of) .. .. .	1	5	6	—	—	—
Vegetables .. .. .	2	1	3	—	—	—
Corned Beef .. .. .	2	4	6	—	—	—
Rabbits .. .. .	—	5	5	—	—	—
Turkey .. .. .	—	1	1	—	—	—
Hams .. .. .	—	—	—	—	1	1
Butter .. .. .	3	4	7	—	—	—
Cheese .. .. .	3	5	8	—	—	—
Milk .. .. .	—	3	3	—	—	—
Sugar .. .. .	—	1	1	—	—	—
Fruit (Tinned) .. .. .	3	—	3	—	—	—
TOTAL .. .. .	48	51	99	—	1	1
Inspections of Registered Canal Boats .. .. .	3	—	3	—	—	—

TABLE No. 9.

*Visits, etc., made by Women Inspectors during 1920.*

	First Visits.										Subsequent Visits.										Call made but admission not obtained.													
	Miss Bibby.	Miss Smith.	*Miss Payne.	*Miss Anthony.	Mrs. Hunter.	Miss Anderson.	Miss Blaxland.	Miss Camman.	Miss Parnell.	†Miss Stegges.	Total.	Miss Bibby.	Miss Smith.	*Miss Payne.	*Miss Anthony.	Mrs. Hunter.	Miss Anderson.	Miss Blaxland.	Miss Camman.	Miss Parnell.	†Miss Stegges.	Total.	Miss Bibby.	Miss Smith.	*Miss Payne.	*Miss Anthony.	Mrs. Hunter.	Miss Anderson.	Miss Blaxland.	Miss Camman.	Miss Parnell.	†Miss Stegges.	Total.	GRAND TOTAL.
Infants ... ..	—	288	—	—	500	807	8	1	3	—	1607	—	236	—	—	231	255	37	—	—	—	759	—	245	—	—	159	518	2	—	—	—	924	3290
Expectant Mothers ...	—	63	—	—	58	35	—	2	—	2	160	—	36	—	1	43	21	2	—	—	3	106	—	59	—	—	2	10	1	—	—	—	72	338
Ophthalmia Neonatorum	—	67	—	—	—	—	—	10	—	—	77	—	105	—	—	—	—	1	8	—	—	114	—	29	—	—	—	—	—	2	—	—	31	222
Puerperal Fever ... ..	—	19	—	—	—	—	—	2	—	—	21	—	6	—	—	—	—	—	1	—	—	7	—	4	—	—	—	—	—	—	—	—	4	32
Tuberculosis ... ..	1	—	—	—	—	—	254	—	317	—	572	1	—	—	—	—	—	813	—	655	—	1469	—	—	—	—	—	243	—	350	—	593	2634	
Measles and German Measles ... ..	13	79	16	26	207	370	338	1080	374	1150	3653	—	19	8	5	30	38	32	83	20	644	879	—	9	2	—	1	15	26	53	15	277	398	4930
Whooping Cough ... ..	—	1	—	8	2	7	1	10	—	1	30	—	—	—	—	2	6	1	1	—	1	11	—	—	—	—	—	1	—	—	—	—	1	42
Scabies ... ..	—	—	21	57	—	—	—	—	1	11	90	—	8	—	—	—	—	—	—	—	8	—	—	—	6	—	—	—	—	2	—	—	8	106
Other Cases of Illness ...	4	28	2	1	92	80	37	147	221	29	641	—	5	2	—	20	20	97	18	39	10	211	—	2	—	—	19	14	7	15	1	58	910	
Vermineous Persons ...	—	—	118	38	—	—	—	—	—	—	57	—	—	8	—	—	—	—	—	—	8	—	—	2	—	—	—	—	—	—	—	2	67	
To Hospitals and other Voluntary Institutions	243	489	—	—	232	132	366	10	212	4	1688	—	—	—	—	—	—	—	5	—	—	5	—	—	—	—	—	7	1	—	—	—	8	1701
Domestic Workshops ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Home Workplaces ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Laundries—Factory ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
„ —Workshop ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Restaurant Kitchens ...	—	—	—	—	28	—	—	—	—	—	28	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	
Other Factories ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	29	
„ Workshops ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
„ Workplaces ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Enquiries re milk grants	—	—	8	2	177	71	19	933	38	225	1473	—	—	2	—	8	32	9	40	—	12	103	—	—	—	—	—	—	—	—	—	—	—	
Attendances at Committees, &c. ...	89	17	—	—	—	—	—	—	—	—	106	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	17	11	57	2	64	151	1727	
Other Visits and Inspections ...	44	36	—	—	324	8	3	77	23	8	523	—	—	—	—	2	2	22	2	—	2	30	—	5	—	—	—	2	1	1	—	49	58	611
TOTALS ... ..	394	1088	65	132	1620	1510	1026	2273	1188	1430	10728	1	407	28	6	337	374	1014	158	714	672	3711	—	353	10	—	162	589	299	122	382	391	2308	16745

\* Exclusive of those shown in Table 7.

† Temporary.

TABLE No. 10.

*Total Number of Inspections and Re-inspections made by individual Inspectors and Visitors during the year 1920.*

Inspector.	Inspection.	Re-inspections.	Call made but admission not obtained.	" Food Control."		Total.
				Inspection.	Re-inspections.	
1. Mr. Rackham ... ..	852	2606	—	355	—	3813
2. „ Lonnon ... ..	1338	2149	—	52	—	3539
3. „ Brown ... ..	993	2447	—	353	—	3793
4. „ Dillon ... ..	701	2086	—	261	—	3048
5. „ Walker ... ..	1034	2803	—	289	—	4126
6. „ James ... ..	1122	3180	—	297	—	4599
7. „ Adkins ... ..	954	2594	—	284	—	3832
8. „ Akers ... ..	2133	1272	—	305	—	3710
9. „ Jaffa ... ..	3012	1449	—	285	—	4746
10. „ Capel ... ..	917	1622	—	—	—	2539
11. „ Nixon ... ..	961	1851	—	—	—	2812
12. „ Molloy ... ..	69	356	—	—	—	425
13. „ West (Factories & Workshops)	76	213	—	98	—	387
14. „ Thompson* ... ..	1507	2180	—	290	—	3977
15. „ Auger } (Food and	3229	6	—	438	—	3673
16. „ Child } Food premises)	3237	4	—	452	—	3693
17. Miss Bibby ... ..	394	1	—	—	—	395
18. „ Smith ... ..	1088	407	353	—	—	1848
19. „ Payne ... ..	2029	28	10	—	—	2067
20. „ MacKenzie ... ..	100	—	—	—	—	100
21. „ Anthony ... ..	1557	6	—	—	—	1563
22. Mrs. Hunter ... ..	1620	337	162	—	—	2119
23. Miss Anderson ... ..	1510	374	589	—	—	2473
24. „ Blaxland ... ..	1026	1014	299	—	—	2339
25. „ Camman ... ..	2273	158	122	—	—	2553
26. „ Parnell ... ..	1188	714	382	—	—	2284
27. „ Steggles (Temporary)	1638	672	391	—	—	2701
Totals ... ..	36558	30529	2308	3759	—	73154

\* The figures for Mr. Thompson include district work as well as work in connection with factories and workshops.

TABLE No. 11.

INTIMATIONS as to Nuisances and Breaches of Statutes and By-laws served by the Sanitary Inspectors during 1920, and the resulting STATUTORY NOTICES in 1920 and the early part of 1921.

Schedule of Nuisances.				Intima- tions.	Statutory Notices.
1	Part of the house in a dirty condition ...	...	...	1048	451
2	" " damp "	...	...	291	134
3	Roof defective ...	...	...	848	348
4	Guttering defective ...	...	...	144	64
5	Water fittings defective ...	...	...	300	104
6	Water-closet apartment with absence of external ventilation ...	...	...	41	10
7	" " so foul as to be a nuisance or dangerous to health ...	...	...	30	11
8	Water-closet basin foul ...	...	...	87	33
9	" " defective ...	...	...	106	29
10	" " choked ...	...	...	115	17
11	Urinal in a foul condition ...	...	...	2	1
12	Privy in a foul condition ...	...	...	—	—
13	Soil pipe defective ...	...	...	25	12
14	" unventilated ...	...	...	15	8
15	" improperly ventilated ...	...	...	3	2
16	Absence of waste pipe to sink, lavatory or bath ...	...	...	4	—
17	Waste pipe of sink, lavatory, or bath connected with drain ...	...	...	10	3
18	" " " " defective ..	...	...	120	52
19	" " " " foul ...	...	...	20	4
20	Inlet of drain improperly trapped ...	...	...	10	5
21	Drain defective ...	...	...	151	63
22	" stopped ...	...	...	164	20
23	" ventilating pipe defective ...	...	...	85	29
24	Rain-water pipe in direct communication with drain ...	...	...	19	9
25	" " defective ...	...	...	197	82
26	Unpaved condition of roadway ...	...	...	2	—
27	Undrained " " ...	...	...	1	—
28	Area or part unpaved ...	...	...	2	—
29	" undrained ...	...	...	—	—
30	Yard or space unpaved ...	...	...	5	3
31	" " undrained ...	...	...	1	1
32	Defective condition of washhouse paving ...	...	...	97	43
33	Dust-bin defective ...	...	...	451	174
34	" in an improper position ...	...	...	7	—
35	Accumulation of stagnant water which is a nuisance dangerous to health ...	...	...	20	3
36	Accumulation or deposit which is a nuisance dangerous to health ...	...	...	132	29
37	Animals kept in such a manner as to be a nuisance dangerous to health ...	...	...	46	16
38	Part of the house so overcrowded as to be dangerous to health ...	...	...	32	16
39	Space below floor in basement or ground floor insufficiently ventilated ...	...	...	16	6
40	Issuing of black smoke in such a quantity as to be a nuisance ...	...	...	2	—
41	Discharging smoke in such a manner as to cause part of a building to be a nuisance dangerous to health ...	...	...	3	—
42	Tent, van, shed, or similar structure used as a human habitation which is in such a state as to be injurious or dangerous to the health of the inmates ...	...	...	3	2
43	Other nuisances ...	...	...	546	197
Total ...				5201	1975

TABLE No. 12.

Registered Tenement Houses—Breaches of By-Laws.							Intima- tions.	Statutory Notices.
1	Overcrowding	...	...	...	...	...	14	—
2	Inadequate water supply	...	...	...	...	...	2	—
3	Contaminated water supply	...	...	...	...	...	1	—
4	Foul closet, basin or trap	...	...	...	...	...	16	1
5	Want of means of ventilation	...	...	...	...	...	4	4
6	Want of annual cleansing	...	...	...	...	...	—	—
7	Want of cleansing of the part or parts of premises used in common	...	...	...	...	...	560	193
8	“ “ “ “ in sole use	...	...	...	...	...	654	210
9	Want of cleansing of the room or part of the dwelling	...	...	...	...	...	13	—
10	Animals improperly kept	...	...	...	...	...	2	—
11	Other breaches	...	...	...	...	...	21	3
Total							1297	411

TABLE No. 13.

Factories, Workshops and Work Places—Breaches of Statutes.						Intimations.	Statutory Notices.
1	Want of cleanliness	...	...	...	...	108	14
2	Want of ventilation	...	...	...	...	—	—
3	Want of air space, overcrowding	...	...	...	...	1	—
4	Sanitary accommodation, absent or insufficient	...	...	...	...	12	6
5	„ „ unsuitable or defective	...	...	...	...	50	15
6	„ „ not separate for sexes	...	...	...	...	17	3
7	Want of drainage of floors	...	...	...	...	2	—
8	Other nuisances	...	...	...	...	133	22
9	Illegal occupation of underground bakehouse	...	...	...	...	1	—
10	Breach of special sanitary requirements for bakehouses	...	...	...	...	107	1
11	Failure as regards list of outworkers	...	...	...	...	—	—
12	Giving out work to be done in premises which are unwholesome	...	...	...	...	—	—
13	„ „ „ infected	...	...	...	...	—	—
14	Allowing wearing apparel to be made in premises infected by scarlet fever or small-pox	...	...	...	...	—	—
15	Other contraventions	...	...	...	...	32	4
Total						463	65

TABLE No. 14.

Branches of other Statutes and Statutory By-laws.	Intimations.	Statutory Notices.
1 An occupied house without a proper and sufficient supply of water	13	1
2 Water supply used for domestic purposes connected with cistern which is used for flushing the water-closet	1	—
3 Water-closet not supplied with a sufficient quantity of water for securing its effective action	221	68
4 Tank, cistern, or other receptacle for storing of water used or likely to be used by man for drinking purposes—dirty condition of	37	7
5 Tank, cistern, or other receptacle for storing water used or likely to be used by man for drinking purposes—absence of a proper cover to	27	10
6 Tank, cistern, or other receptacle for storing water used or likely to be used by man for drinking purposes placed in an improper position	3	1
7 Animals so kept as to be likely to pollute the water supply	1	—
8 Offensive matters not deposited in manure receptacle	4	—
9 Manure not removed at proper intervals	1	—
10 Manure—absence of proper receptacle for	1	—
11 Manure receptacle not properly constructed	—	—
12 Sufficient drain to stables or cowshed—absence of a	2	1
13 Receptacle for house refuse—absence of a proper	412	143
14 Receptacle for house refuse—absence of a proper cover for	11	2
15 Yard or open space unpaved	1	—
16 „ paving defective	189	94
17 Insufficient water-closet accommodation to “lodging house”	30	20
18 A furnace improperly constructed or negligently used	—	—
19 Effluvia arising from premises used for trade, business, or manufacture which is a nuisance dangerous to the inhabitants of the district	2	—
20 Offensive matters suffered to run out of trade premises into an uncovered place	—	—
21 Dairies and cowsheds—breach of By-laws as to	—	—
22 Slaughterhouses—breach of By-laws as to	—	—
23 Steam whistle—use of a, without authority	—	—
24 Parts of houses infested with vermin requiring stripping, purifying, and cleansing	398	186
25 Articles in an unwholesome condition requiring to be purified or destroyed	12	4
26 Underground room illegally occupied as a dwelling	18	8
27 Other breaches	77	31
Total	1461	576

1871-1872

List of the names of the persons who have been admitted to the office of the Secretary of the Board of Education, since the last meeting of the Board, and the date of their admission.		
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1871-1872

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