

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

**Contributors**

St. Pancras (London, England). Metropolitan Borough.  
Sowden, G.

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Metropolitan Borough of Saint Pancras.



Annual Report of M.O.H.

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E YEAR

1925.

G. SOWDEN, M.D., D.P.H., M.R.C.S., L.R.C.P.,

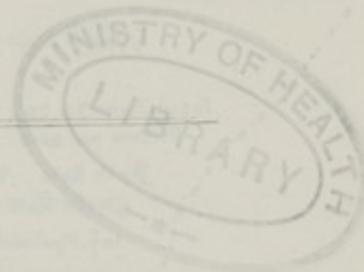
Barrister-at-Law,

Fellow of the Royal Institute of Public Health.





Metropolitan Borough of Saint Pancras.



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# REPORT

OF THE

## MEDICAL OFFICER OF HEALTH

FOR THE YEAR

### 1925.

---

G. SOWDEN, M.D., D.P.H., M.R.C.S., L.R.C.P.,

Barrister-at-Law,

Fellow of the Royal Institute of Public Health.



# BOROUGH OF ST PANCRAS

POPULATION — 216,300  
 PERSONS PER ACRE — 80.  
 BIRTH RATE — 17.9  
 DEATH RATE — 12.7  
 INFANTILE MORTALITY RATE — 72.

## WARD NO 1

Population 36,262  
 Persons per acre 37  
 Birth Rate 16.5  
 Death Rate 12.0  
 Inf. Mortality Rate 64

## WARD NO 2

Population 22,287  
 Persons per acre 128  
 Birth Rate 19.9  
 Death Rate 11.6  
 Inf. Mortality Rate 65

## WARD NO 4.

Population 26,412  
 Persons per acre 97  
 Birth Rate 18.2  
 Death Rate 12.9  
 Inf. Mortality Rate 54

## WARD NO 3

Population 36,389  
 Persons per acre 81  
 Birth Rate 18.4  
 Death Rate 12.4  
 Inf. Mortality Rate 60

## WARD NO 5

Population 30,627  
 Persons per acre 90  
 Birth Rate 19.2  
 Death Rate 14.1  
 Inf. Mortality Rate 93

## WARD NO. 6

Population 21,050  
 Persons per acre 117  
 Birth Rate 22.2  
 Death Rate 13.9  
 Inf. Mortality Rate 94

## WARD NO. 8.

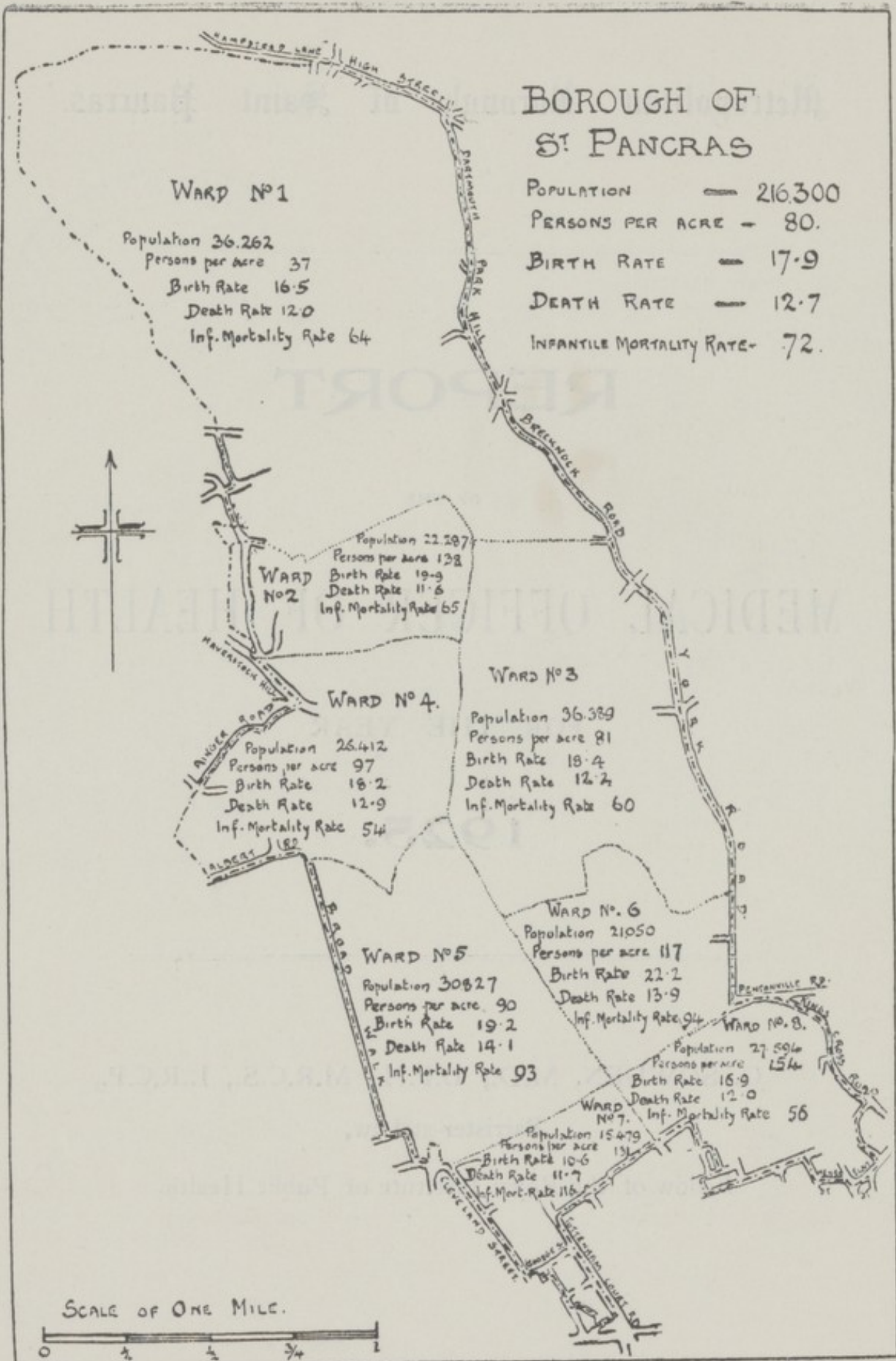
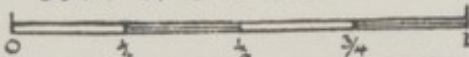
Population 27,596  
 Persons per acre 154  
 Birth Rate 16.9  
 Death Rate 12.0  
 Inf. Mortality Rate 56

## WARD NO 7.

Population 15,479  
 Persons per acre 131  
 Birth Rate 10.6  
 Death Rate 11.7  
 Inf. Mort. Rate 116



SCALE OF ONE MILE.



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# Metropolitan Borough of Saint Pancras.

## PUBLIC HEALTH COMMITTEE.

*November, 1924, to October, 1925.*

### CHAIRMAN.

Councillor MANSELL JAMES SWIFT (Ward 7).

### DEPUTY-CHAIRMAN.

Councillor ALFRED SOLOMON, J.P. (Ward 1).

### EX-OFFICIO.

THE RIGHT WORSHIPFUL THE MAYOR  
(Councillor FREDERICK BROWN GURNEY, F.A.I., J.P.).

### ALDERMEN.

COSBURN, Major GEORGE FREDERICK, J.P., M.A.B.  
DAVIES, DAVID, J.P., L.C.C.  
JOHNSON, JOB, J.P.  
ROLLES, HARRY.

### COUNCILLORS.

Ward	COUNCILLORS.
3	ALLAN, MRS. ISABELLA MENZIES.
4	ALLISTON, MRS. EVELYN.
2	BLAND, MRS. VIOLET.
2	BROWN, PERCIVAL GEORGE EDWARD.
8	CAMPION, JOHN SISSONS.
8	CROSBY, MISS ADA, M.B.E.
8	EVANS, EVAN.
6	FRENCH, ALEXANDER GEORGE.
5	GREGG, DR. EDWARD ANDREW.
1	KEMPTON, THOMAS.
5	KENT, MISS BEATRICE.
4	LLOYD-TAYLOR, WILLIAM, J.P.
3	MORRELL, REV. ROGER CONYERS, M.A.
3	NICHOLLS, HENRY.
6	PERRY, JAMES.
5	SAUNDERS, EDWARD JOHN.
8	TOWERS, GEORGE ANDREW.
5	WILLIAMS, LT.-COL. CHARLES.

*November, 1925, to October, 1926.*

### CHAIRMAN.

Alderman MANSELL JAMES SWIFT.

### DEPUTY-CHAIRMAN.

Alderman ALFRED SOLOMON, J.P.

### EX-OFFICIO.

THE RIGHT WORSHIPFUL THE MAYOR  
(Alderman DR. EDWARD ANDREW GREGG, J.P.).

### ALDERMEN.

DAVIES, DAVID, J.P., L.C.C.  
ROLLES, HARRY.

### COUNCILLORS.

Ward	COUNCILLORS.
3	ALLAN, MRS. ISABELLA MENZIES.
4	ALLISTON, MRS. EVELYN.
6	BAMBRIDGE, MRS. MARY WINIFRED.
1	BATEMAN, WILLIAM EDWARD.
2	BLAND, MRS. VIOLET.
8	CAMPION, JOHN SISSONS.
8	CROSBY, MISS ADA, M.B.E.
8	EVANS, EVAN.
3	HEWSON, FREDERICK.
7	JENKINS, EDWIN.
4	JOHNSON, JOB, J.P.
5	KEMP, FREDERICK WILLIAM ISAAC.
6	MARTIN, ARTHUR HENRY.
3	MORRELL, REV. ROGER CONYERS, M.A.
5	PATERSON, MRS. LOUISA SOPHIA.
2	SALMON-BRUNSDON, MRS. ELIZABETH.
5	SAUNDERS, EDWARD JOHN.
1	SPRY, WILLIAM PALMER.
5	WILLIAMS, LT.-COL. CHARLES.
7	WOOD, WILLIAM CHARLES.

STAFF OF THE PUBLIC HEALTH DEPARTMENT  
AT END OF 1925.

MEDICAL OFFICER OF HEALTH AND ADMINISTRATIVE TUBERCULOSIS OFFICER.  
G. SOWDEN, M.D., D.P.H., M.R.C.S., L.R.C.P.

TUBERCULOSIS OFFICERS.

†N. M. DONNELLY, M.B., B.Ch., B.A.O., D.P.H.  
A. VINEY, M.R.C.S., L.R.C.P., 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.

§H. G. WEST (Temporary).

*Senior Woman Sanitary Inspector.*

‡Miss M. E. BIBBY, B.A. (LOND.).

*Women Sanitary Inspectors and Health Visitors.*

‡¶Miss C. SMITH.

‡¶Miss V. K. BLAXLAND.

‡§¶Miss F. A. ANDERSON.

‡¶+\*\*Miss J. A. J. CAMMAN.

‡§Mrs. A. HUNTER.

‡¶Miss A. HOLLAND.

CLERICAL STAFF.

Chief Clerk	..	A. D. CORRICK.
First Clerk	..	A. G. CAPEL.
Second Clerk	..	A. CARPENTER.
Clerk	..	G. N. COVE ( <i>attached to the Estates Dept.</i> ).
"	..	J. D. HOLIDAY.
"	..	T. H. HAGUE.
"	..	Miss A. ANDREWS.
Junior Clerk	..	W. C. MANSFIELD.
"	..	H. G. AVRIL.
"	..	F. A. J. GOODCHILD.

‡ Resigned September, 1925.

\* Cert. Municipal and County Engineers.

‡ Cert. San. Insp. Examination Board.

§ San. Insp. Cert. Royal San. Inst.

¶ Cert. Meat and other Foods.

¶ Health Visitor's Certificate.

+ C.M.B.

\*\* Certificate, Queen Charlotte's Hospital.



**BOROUGH COUNCIL STAFF AT THE CENTRES AND CLINICS.**

Medical Officers,	No. of Consultations per month
DR. MARGARET E. ALDEN .. ..	1
DR. CHAS. H. A. ALDERTON .. ..	4
DR. H. SEARLE BAKER .. ..	4
DR. B. MARION COCKERELL .. ..	15
DR. P. RUTH ELLIOTT .. ..	1
DR. A. GERTRUDE GROGAN .. ..	8
DR. J. FINCH HAINES .. ..	12
DR. JANIE LORIMER HAWTHORNE .. ..	6
DR. ETHEL F. IREDELL .. ..	4
DR. KATHLEEN F. LANDER .. ..	2
DR. LYDIA A. LENEY .. ..	12
DR. JESSIE S. MUIR .. ..	9
DR. J. BALFOUR NEILL .. ..	8
DR. MARTIN OLDERSHAW .. ..	1
DR. MARGARET R. PATERSON .. ..	4
DR. MARY J. PIRRET .. ..	13
DR. FRANCIS L. PROVIS .. ..	13

*Dental Clinic.*

MRS. W. A. MURCH, L.D.S., <i>Dentist</i> .. ..	10
DR. JAS. MAUGHAN, <i>Anæsthetist</i> . .. ..	2

*Sunlight Clinic.*

DR. WILLIAM BEAUMONT .. ..	12
----------------------------	----

*Dentists at Tuberculosis Dispensary.*

MR. SOUTHCOMB MAY, L.D.S.	MR. A. J. MAURICE, L.D.S.
(The above are part-time officers.)	

*Superintendents of Maternity and Child Welfare Centres.*

¶MISS K. L. ALLFREY.	‡§MISS M. H. LANDEL JONES.
‡§MISS M. L. BLAIR.	§MISS M. MANGER.
*‡MISS G. R. BRISTOW.	‡§MISS E. M. ROBINSON.
‡§MRS. S. C. CHAPMAN.	¶MISS M. SMYTH.
‡§MRS. E. CROCKART.	§MISS M. TEMPLETON.

*Assistant Visitors at Maternity and Child Welfare Centres.*

§¶MISS E. B. BAGNALL.	*‡MISS M. E. JACOBS.
§MRS. E. E. BRUCE.	§MRS. E. LURIE.
*‡MISS M. A. CLARKE.	*‡§MRS. J. LYNN.
‡§MISS B. M. HARRIS.	‡§MRS. M. A. SMITH.
‡MISS A. M. U. HARROP.	*§MISS V. B. WOODRUFF.

*Tuberculosis Dispensaries.*

<i>Nurse Visitor</i> , *§MISS S. A. LONG.	<i>Clerical and General Assistant</i> , MISS MARGARET DEED.
---	--

**DISINFECTING AND CLEANSING STAFF.**

Foreman of Disinfecting Station .. ..	H. CATCH.
Stoker and General Assistant .. ..	T. BARTHOLOMEW.
Assistant Disinfecter .. ..	J. STANLEY.
.. ..	A. J. DIBBEN.
Matron of Personal Cleansing Station .. ..	MRS. E. MACE.
Assistant at .. ..	MRS. A. STYLES.
.. ..	MRS. L. BLABY.
Resident Caretaker, Mortuaries and Coroner's Court .. ..	J. ROOT.
(The above are full-time officers.)	

\* Cert. San. Insp. Examination Board.

† San. Insp. Cert. Royal San. Inst.

‡ Health Visitor's Certificate.

§ C.M.B.

¶ Midwifery Certificate, Queen Charlotte's Hospital.



PUBLIC HEALTH DEPARTMENT,  
TOWN HALL,  
PANCRAS ROAD, N.W. 1.

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 70th Annual Report on the vital statistics and sanitary condition of the Borough, including also particulars of the work carried out during the year by the staff of the Department.

This is the third annual report which it has been my duty to submit to the Members of the Council.

A summary of the principal statistics for the year 1925 will be found on page 11, and it will be noted that, as compared with previous years, the health of the Borough has been satisfactorily maintained.

The general death-rate (12.7 per 1000 of population), and the rate of Infantile Mortality (72 per 1000 Births), were both lower than the corresponding rates of the previous year.

The Birth-rate was also lower, being only 17.9 per 1000 of population.

The Ministry of Health has intimated that the reports of Medical Officers of Health for the year 1925 should be what are termed "Survey Reports" and should deal comprehensively with:—

- (a) "The measure of progress made during the preceding 5 years in the improvement of the Public Health."

This progress has been indicated in the Report by giving, in connection with most of the principal tables, the average rates for the previous 5 years for comparison with the corresponding rate of 1925.

- (b) "The extent and character of the changes made during the period in the Public Health services."

These changes will be found summarized on page 96.

- (c) "Any further action of importance in the organization or development of Public Health services contemplated by the Local Authority or considered advisable by the Medical Officer of Health."



In connection with the foregoing paragraph, I should like briefly to refer to the subjects of Child Welfare, Infant Mortality and Housing, although further details concerning these subjects will be found in the body of this report.

St. Pancras has always been a pioneer in work relating to Child Welfare. This work was initiated and carried on for many years with much energy and enthusiasm by voluntary workers who equipped welfare centres in many parts of the Borough. When the Maternity and Child Welfare Act was passed in 1918 these centres and the whole of the staff were taken over by the Borough Council, which, since that date, has maintained them at an annual estimated cost of nearly £13,000 (a part of this is repaid by the Ministry of Health). When these centres were originally started, from 10 to 15 years ago, the number of births in the Borough, each year, was from 5000 to 6000, equal to a birth-rate of 23 to 24 per 1000 of population. During recent years there has been a steady decrease, and last year the number of births was only 3880, equal to a birth-rate of 17·9 per 1000 of population. Despite this large decrease in the number of births, the same staff and organization for dealing with the work of Child Welfare is still maintained. It is therefore obvious that this particular branch of Public Health work is receiving the very fullest attention. Although St. Pancras is spending so lavishly on Child Welfare work, probably more lavishly than any other Metropolitan Borough, it is disconcerting to find that the rate of infantile mortality does not compare favourably with that of London as a whole, or with the majority of the Metropolitan Boroughs. Last year 18 of the Metropolitan Boroughs had a lower infantile mortality rate and only 9 a higher rate than St. Pancras. During the past five years (1921-1925) the average Infantile Mortality rate for St. Pancras was 72 per 1000 births, the corresponding rate for London as a whole being 71. In the five preceding years (1916-1920) the average rate for St. Pancras was 91 and for London as a whole 92 per 1000 births.

As the work of the Centres has been so fully maintained, it would appear that some adverse factor is present which nullifies the teaching which is given and prevents the improvement we have a right to expect. Is this adverse factor due to overcrowding, the result of inadequate housing accommodation? Support is given to this suggestion by the table on page 16 relating to an inquiry into the deaths of children under 5 years of age during the two years 1924-1925. It is there seen that the death rate of children living under overcrowded conditions, from diseases likely to be accentuated by such conditions, was almost double that of children who were not living under conditions of overcrowding.

It would therefore appear that the time has arrived when it is desirable (owing to altered conditions) to revise certain items of Public Health activity in order to obtain a more suitable proportion in expenditure, and also in the hope of securing better results. The expenditure on Child Welfare work has been disproportionately great in comparison with the expenditure on other branches of Public Health work. To some extent this is doubtless due to the popularity of the subject—the appeal of the child meets with an instant and ready response; but it appears to be open to criticism to spend, for example, on Tuberculosis only one-fifth of the amount spent on Child Welfare, when, as a cause of death, Tuberculosis is so important.

I venture to suggest that it is possible to reduce the direct expenditure on the Maternity and Child Welfare departments without any loss of efficiency, and this view is endorsed by the recent communication received from the Ministry of Health, which was forwarded after a visit of inspection and investigation of this work by one of the Medical Officers of the Ministry.

In Public Health, as in any other subject, the aim should be to secure the best possible results for the money expended, and I would suggest that any money saved as a result of decreased expenditure on the activities mentioned should be devoted to the provision of housing accommodation. This would probably do more to promote the public health, to diminish the

general death-rate, the rate of infantile mortality and the incidence of Tuberculosis than a similar expenditure in any other direction. Taking a wide view, it would not really mean any diminution in expenditure on the work of child welfare, for money spent on Housing is just as potent a factor in the promotion of maternal and child welfare as direct expenditure on that subject. The housing problem in the Borough, for many reasons, is admittedly one of great difficulty, but the table on page 17 shows that, despite the difficulties, during the four years ended March, 1926, St. Pancras made some progress in the provision of new houses; but owing to increase of population, this provision has done little or nothing to relieve existing overcrowding. The Borough Council's scheme in the Wolcot Street area should, at an early date, be of some value, and at a later date, the larger scheme of the London County Council in the Ossulston Street area will be of immense value, but much more will be necessary before the requirements of the Borough are adequately provided for.

In conclusion, I wish to state that the routine duties of the department have been actively carried out during the year, and the work of the staff, to whom I am much indebted, has maintained a high standard of efficiency.

I am, Ladies and Gentlemen,

Your obedient Servant,

*G. Sowerden.*

*Medical Officer of Health.*

*May, 1926.*



## SUMMARY OF REPORT FOR 1925.

Area of Borough, 2,694 acres.

Area of various open spaces, 501 acres.

SOIL AND SITUATION.—Practically the whole of the Borough is situated on London clay. There are a few superficial deposits of gravel in the south, and lower Bagshot sands in the extreme north.

The Borough is about four miles long, extending from near Oxford Street in the south to Highgate in the north, and averages about a mile in width.

Population (1921 Census), 211,366. Population (1925) Civilian, 215,900. Total, 216,300.

Number of persons per acre, 80. Number of inhabited houses (1921 Census), 24,660.

*Births.*

Males, 1,989 ; females, 1,891. Total, 3,880.

Legitimate births, 3,637 ; illegitimate births, 243.

Birth-rate, 17·9 per 1,000 of population.

Excess of births over deaths, 1,135.

*Deaths.*

Males, 1,452 ; females, 1,293. Total, 2,745.

Death-rate, 12·7 per 1,000 of population.

*Infantile Mortality Rate.*

Legitimate, 69 ; illegitimate, 119. Total, 72 per 1,000 births.

*Maternal Mortality.* (Deaths of women from causes associated with child-birth.)

From Sepsis, 4 ; from other causes, 7. Total, 11.

Maternal death-rate, 2·8 per 1,000 births.

*Tuberculosis.*

(Pulmonary). Deaths 180 ; death-rate 0·8 per 1,000 of population.

(All forms). Deaths, 231 ; death-rate, 1·1 per 1,000 of population.

*Notifiable Diseases.*

4,502 notifications of cases of infectious diseases (including Measles and German Measles) were received during the year, this number being no less than 2,715 below that of the previous year.

Rateable value, £1,835,804. Sum produced by a penny rate, £7,602.

Total rainfall, 24·91 inches.

## COMPARATIVE STATISTICS.

	Rate per 1,000 of Population.		Rate per 1,000 Births.
	Birth-rate.	Death-rate.	Infant Mortality.
St. Pancras ..	17·9	12·7	72
England and Wales ..	18·3	12·2	75
105 Great Towns ..	18·8	12·2	79
County of London ..	18·0	11·7	67

## Metropolitan Borough of Saint Pancras.

# REPORT

OF THE

## MEDICAL OFFICER OF HEALTH

*For the Year 1925.*

*For the purpose of this Report, the year consists of the 52 weeks ended 2nd January, 1926.*

### Section 1.—VITAL STATISTICS AND ECONOMIC AND GENERAL CONDITIONS.

#### POPULATION AND GENERAL STATISTICS.

The population of the Borough at the Census of 1921 was 211,366. The *total* population of St. Pancras for the year 1925, as estimated by the Registrar-General, was 216,300, the *civilian* population being estimated at 215,900. The latter estimate (civilian population) has been used in calculating the death-rates in this report, and the former (total population) in calculating the marriage and birth-rates.

The civilian population of the Borough shows an estimated increase during the year of 1,600. The natural increase, that is, the excess of births over deaths, was 1,135, the remainder, 465, represents the estimated increase due to new residents coming into the Borough.

#### MARRIAGES.

The number of marriages celebrated during the year was 1,901. This is equal to a rate of 8·8 per 1,000 of total population.

The average yearly number of marriages during the preceding five years was 2,039, equal to a rate of 9·4 per 1,000 of total population.

#### BIRTHS.

The number of births registered during the year belonging to St. Pancras was 3,880, equal to an annual birth-rate of 17·9 per 1,000 of population. With two exceptions, and these were the two years at the termination of the war, this is the lowest birth-rate hitherto recorded in the Borough. The average yearly number of births during the preceding five years was 4,743, equal to a rate of 21·7 per 1,000 of total population. The total number of births actually registered as having taken place in the Borough during the past year was 4,111. This figure has to be corrected by deducting the births of non-residents, which occurred chiefly in various public institutions in the Borough, these numbered 846, and adding the births belonging to St. Pancras which occurred outside the Borough, these numbered 615. The corrected figure is therefore as stated above, 3,880.

The corresponding figures for previous years will be seen in Table 1, on page 104.

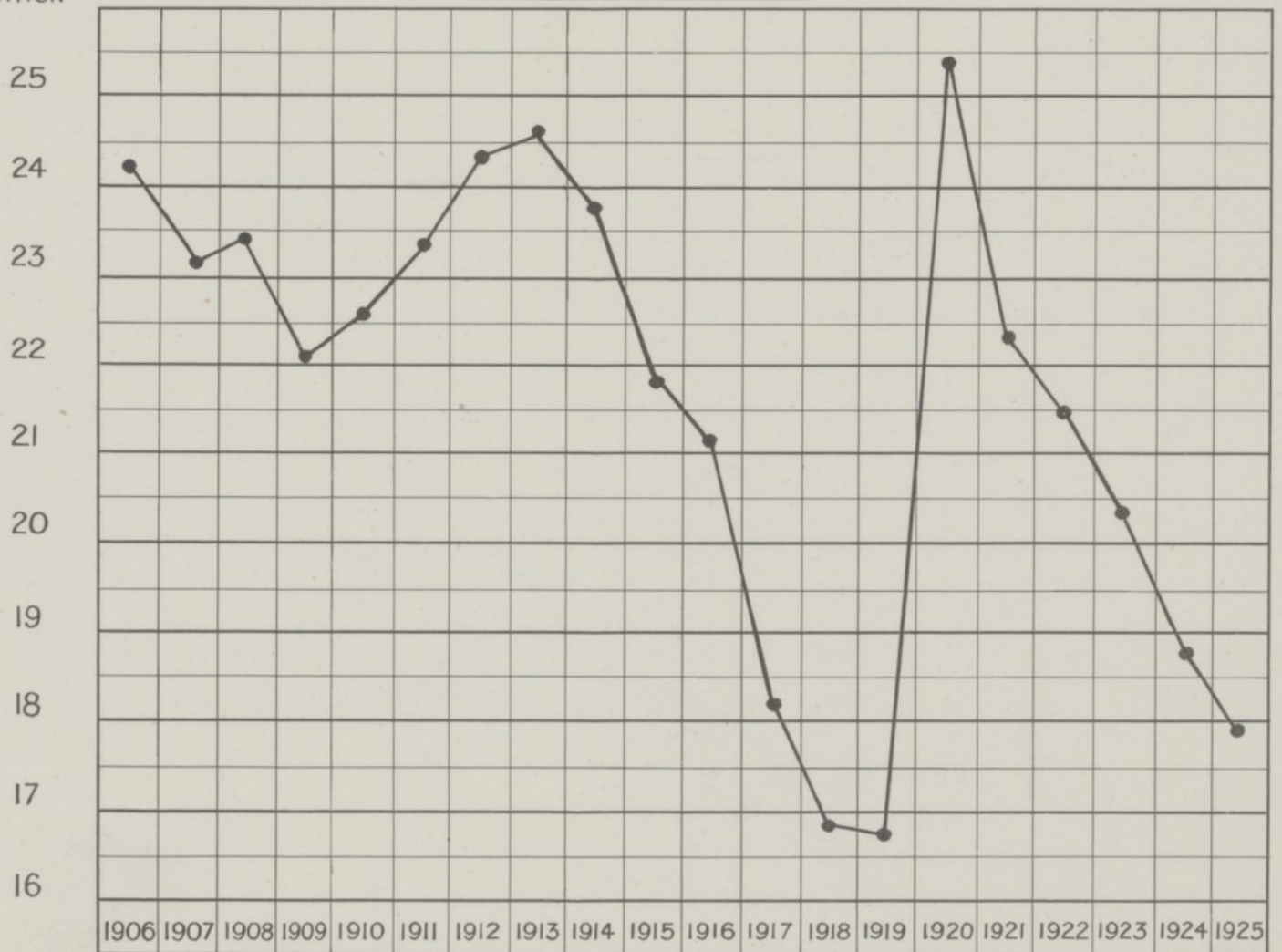
The chart opposite this page shows, in graphic form, the variations which have occurred in the birth-rate during the last twenty years.

The following table gives the number of births and the birth-rate in each ward of the Borough for the past year. For comparison the figures for the previous year are also given:—



CHART SHEWING BIRTH RATE FOR THE BOROUGH DURING THE  
PAST 20 YEARS.

RATE PER  
1000  
POPULATION







## WARD BIRTHS AND BIRTH RATES.

Ward.	Number of Births.		Birth Rate.	
	1924.	1925.	1924.	1925.
1	613	597	16·7	16·5
2	490	444	21·7	19·9
3	679	671	18·5	18·4
4	510	480	19·1	18·2
5	657	591	21·1	19·2
6	497	467	23·3	22·2
7	196	164	12·5	10·6
8	470	466	16·8	16·9
<b>Borough</b>	<b>4112</b>	<b>3880</b>	<b>18·8</b>	<b>17·9</b>

It will be noted that the fall in the birth-rate is general throughout the Borough, with the exception of Ward 8, which shows a very slight increase.

1,175 births took place in Public Institutions equal to 28·6 per cent. of the total births which took place in the Borough.

Table 5, on page 111, shows for 1925 the birth-rate of England and Wales, the County of London, the Metropolitan Boroughs, and certain of the large towns having populations exceeding 125,000.

## ILLEGITIMACY.

Of the 3,880 net St. Pancras births, 243 were returned as illegitimate. This represents 6·3 per cent. of the total births registered during the year.

The illegitimate birth-rate was very high during the years of the war, and, although lower now, it has never fallen to the pre-war level. During the last five years this rate has shown a slight and steady increase. The figures for the previous ten years are given in the following table:—

Year.	Rate.	Year.	Rate.
1915	5·4 per cent.	1920	5·6 per cent.
1916	7·0 "	1921	5·5 "
1917	7·2 "	1922	5·6 "
1918	9·5 "	1923	5·7 "
1919	8·4 "	1924	5·9 "

## NOTIFICATION OF BIRTHS.

4,074 notifications of births were received during the year: this includes 133 still-births and 3,941 live births, representing 96 per cent. of the births registered as having taken place in the Borough. The Notification of Births Act (1907) states "information with regard to the event shall be given to the Medical Officer of Health within 36 hours of the occurrence of the birth of a child, alive or dead, which has issued forth from its mother after the twenty-eighth week of pregnancy." This notification is in addition to, and not in substitution for, registration of birth, which must be carried out at a Registry Office within forty-two days of the birth.



## DEATHS.

The net number of St. Pancras deaths registered during the year was 2,745; this equals an annual death-rate of 12·7 per 1,000 of population.

The average yearly death-rate of the Borough during the previous five years was 13·0 per 1,000 of population.

The actual number of deaths registered as having occurred in the Borough during the year 1925 was 2,864. This figure has to be corrected by the exclusion of 680 deaths, which occurred in the Borough, of persons who were not St. Pancras residents, and by the inclusion of 561 deaths of residents which occurred and were registered outside the Borough.

The corrected figure of 2,745 is used in calculating the death-rates in this report.

In Table 1, on page 104, will be found details of the corresponding figures for previous years, and the chart on the opposite page shews in graphic form, the variation in the death-rate during the last 20 years.

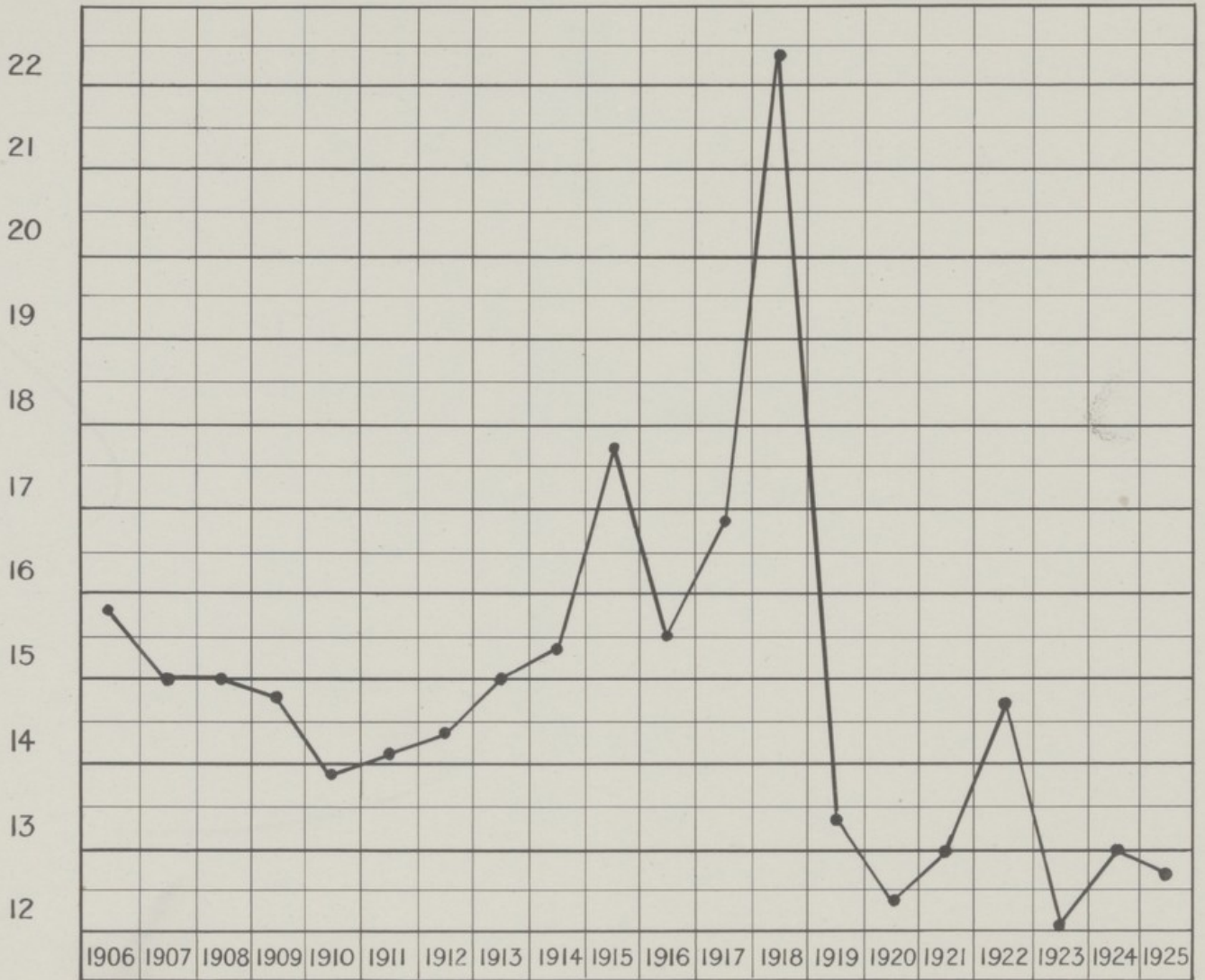
## CAUSES OF DEATH.

The principal causes of death during the year are stated in the following table, and, for comparison, the figures and averages for the previous 10 years are also given:—

Diseases.	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	Average for 10 years.	1925
Heart Disease .. ..	439	375	404	389	370	442	435	461	394	398	411	381
Cancer .. ..	258	267	281	269	245	299	290	302	319	298	283	324
Bronchitis .. ..	322	290	250	228	301	236	276	308	223	304	274	274
Tuberculosis—all forms ..	500	423	444	485	341	312	304	315	272	271	367	231
Pneumonia .. ..	331	232	254	376	179	197	173	265	201	200	241	204
Cerebral Hæmorrhage, Em- bolism, and Apoplexy ..	169	119	116	131	91	98	126	120	112	118	120	123
Injuries .. ..	150	112	125	119	108	92	88	127	113	114	115	118
Premature Birth, Debility and Congenital Defects ..	187	176	144	132	162	201	149	134	134	118	154	105
Nephritis and Bright's Disease	132	103	104	98	61	95	60	67	79	75	87	75
Whooping Cough .. ..	52	39	27	80	7	60	38	29	28	46	41	71
Diarrhoea and Enteritis ..	114	72	97	56	68	54	98	47	61	63	73	55
Influenza .. ..	35	35	21	700	260	46	57	142	24	80	140	41
Diphtheria and Croup ..	24	23	25	31	21	33	51	44	20	22	29	34
Rheumatic Fever .. ..	11	7	7	8	7	6	16	15	8	5	9	18
Pleurisy .. ..	11	13	10	14	9	12	7	10	8	8	10	16
Erysipelas .. ..	11	3	3	11	9	12	3	12	4	4	7	12
Puerperal Fever .. ..	5	4	5	2	9	8	4	4	9	4	5	4
Enteric Fever .. ..	8	5	6	5	2	1	3	1	3	2	4	3
Measles .. ..	63	42	118	75	15	65	23	107	5	74	59	3
Scarlet Fever .. ..	22	8	4	7	5	11	7	20	3	12	10	—

RATE PER  
1000  
POPULATION

### CHART SHEWING DEATH RATE FOR THE BOROUGH DURING THE PAST 20 YEARS.



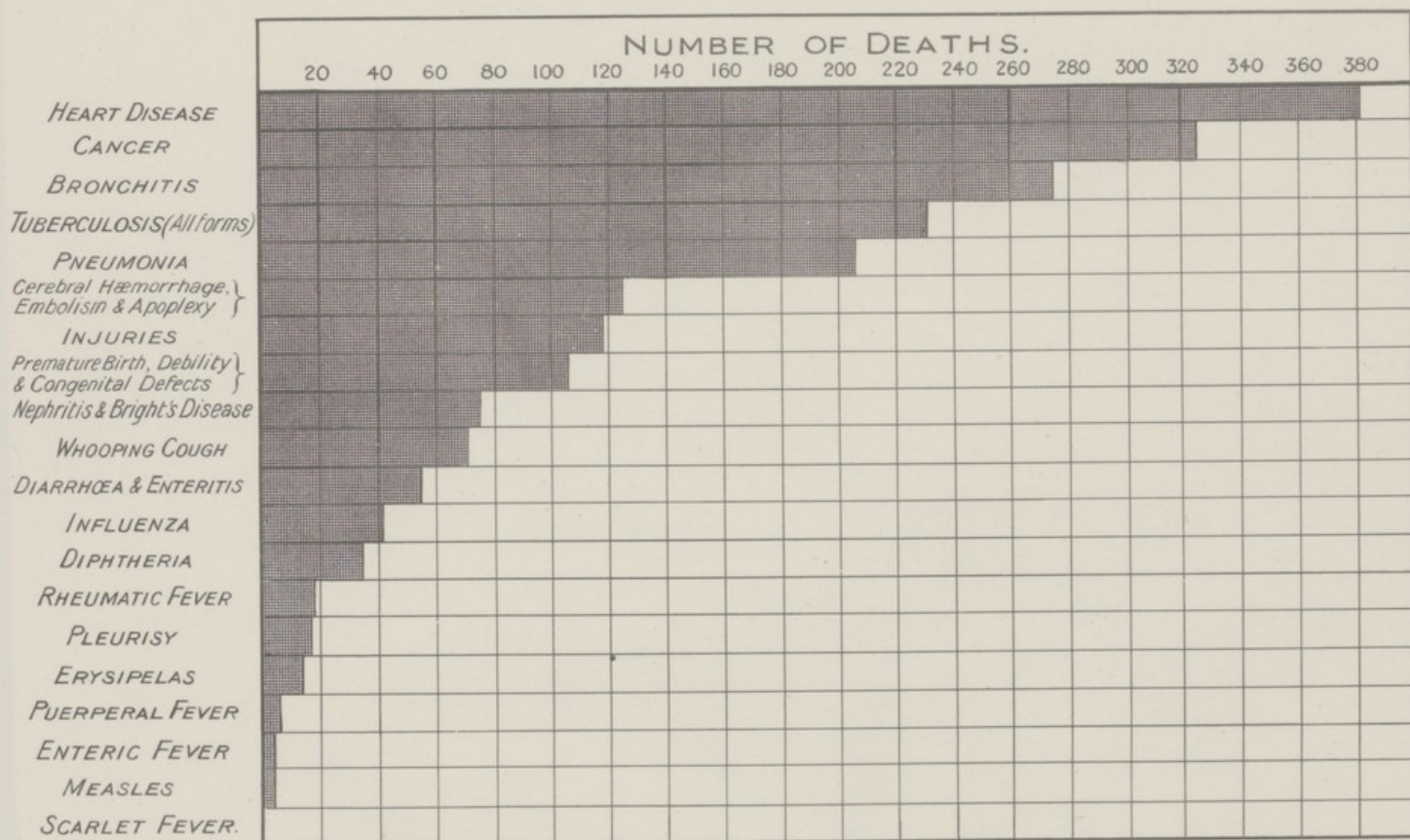








## DIAGRAM SHEWING RELATIVE IMPORTANCE OF VARIOUS DISEASES AS CAUSES OF DEATH DURING 1925.



TOTAL DEATHS IN THE BOROUGH FROM ALL CAUSES { MALES 1452 } 2745  
 { FEMALES 1293 }

It will be noted that diseases of the heart still head the list of causes of death, although the numbers show a decrease as compared with the previous year, and are below the average rate of the previous 10 years.

Deaths from Cancer again show an increase, and this disease now occupies the second place on the list. The numbers show an increase as compared with those of the previous year, and are considerably above the average rate of the previous 10 years. Deaths from Bronchitis were about the average, whilst those due to Tuberculosis show a welcome and considerable decrease.

With reference to deaths from infectious diseases, for the first time in the records of the Borough, not a single death occurred from Scarlet Fever, although 651 cases of this disease were notified.

Deaths from Measles numbered only 3, but those due to Whooping Cough and Diphtheria showed an increase. The diagram on the opposite page shows in graphic form the relative importance of various diseases as causes of death in the Borough during 1925.

The deaths which occurred during the year are fully classified for causes, age and sex in Table 2 on page 105.

For purpose of comparison, the death-rates for England and Wales, the County of London, the Metropolitan Boroughs, and certain of the large towns are given in Table 5 on page 111.

It will be noted that 21 Metropolitan Boroughs had a lower and 5 a higher general death-rate than St. Pancras. One was the same.

Of the total 2,745 St. Pancras deaths which occurred during the year, not less than 1,621 took place in public institutions, either within or outside the Borough; this equals a proportion of 59 per cent. of the total deaths.

#### WARD DEATHS AND DEATH-RATES.

The number of deaths and the death-rates per 1,000 of population for each of the Wards during the past year were as follows, the figures for the preceding year being also given for comparison:—

Ward.	Number of Deaths.		Death-rate per 1000 of population.	
	1924	1925	1924	1925
1	462	435	12·6	12·0
2	296	258	13·2	11·6
3	478	443	13·0	12·2
4	336	341	12·6	12·9
5	444	434	14·3	14·1
6	271	292	12·7	13·9
7	193	181	12·3	11·7
8	335	333	12·0	12·0
No address	33	28	—	—
Borough	2848	2745	13·0	12·7



## INFANTILE MORTALITY.

280 deaths of infants under 1 year of age occurred in the Borough during the year. This is equal to a rate of 72 per thousand births, and represents a decrease of 2 per 1000 as compared with the previous year. With one exception, this is the lowest number of Infant Deaths and lowest rate of Infantile Mortality hitherto recorded in any year.

In Table 1, on page 104, the corresponding rates for previous years are given, and in Table 4, on page 110, the figures for each ward will be found.

Attention is directed to Table 5, on page 111, which gives the infant mortality rates for England and Wales, the County of London, the Metropolitan Boroughs, and certain of the large towns. It will be noticed that 18 of the London Boroughs had a lower rate of Infant Mortality and only 9 a higher rate than St. Pancras.

The chief causes of Infant deaths during the year were Prematurity, etc., which was responsible for no less than 103 deaths out of a total of 280 from all causes; Bronchitis and Pneumonia, from which diseases 57 infants died; Diarrhœa and Enteritis, which caused 45 deaths under 1 year of age; and Measles and Whooping Cough, from which 30 infants died.

Deaths of infants from Prematurity and Congenital defects probably have little connection with their environment, as the majority of such deaths occur within the first few weeks of life. The other principal causes of death affecting infants and young children, namely Diarrhœa and Enteritis, Bronchitis, Pneumonia, Measles and Whooping Cough are, no doubt, to a considerable extent, accentuated by bad environment. At my request Dr. Back made an investigation with reference to infant mortality and overcrowding, and as to the percentage of children under 5 years of age dying from the diseases above mentioned and the conditions under which they were living. The result is as follows:—

Figures based on the Census report of 1921, show that in St. Pancras in that year, 20·6 per cent. of the population were living under conditions of overcrowding, the definition of overcrowding used being that of the Registrar General, namely, more than two persons per room. This proportion (20·6 per cent.) is high and was exceeded in only 6 other Metropolitan Boroughs. It is shown in Table A that all these Boroughs have also higher average infant mortality rates for the 5 years 1920-1924.

TABLE A.

Boroughs,	Percentage of Population living under overcrowded conditions.	Average Infant Mortality Rates for 5 years, 1920-1924,
Finsbury .. ..	33·3	77
Shoreditch .. ..	31·1	95
Stepney .. ..	27·6	79
Bethnal Green ..	27·0	86
Bermondsey .. ..	22·6	87
Southwark .. ..	22·5	79
St. Pancras .. ..	20·6	72

It is obvious that many factors are responsible for high infant mortality rates. The above figures show that overcrowding is one of some importance. Since 1921 more houses have been provided, but at the same time populations have increased. The extent to which this has occurred in the above-mentioned Boroughs is shown below in Table B.

TABLE B.

Boroughs.	Increase of Population, 1921-1924.	Number of houses completed between Jan. 1, 1922, and March 1, 1926.		
		State aided.	Unassisted.	Total.
Finsbury .. ..	1185	—	5	5
Shoreditch .. ..	2252	115	5	120
Stepney .. ..	4683	39	11	50
Bethnal Green .. ..	1962	166	4	170
Bermondsey .. ..	2648	43	2	45
Southwark .. ..	3310	—	9	9
St. Pancras .. ..	3234	254	168	422

The above table shows that more houses have been built in St. Pancras than in the six other boroughs put together, which is a matter for congratulation. There is, however, abundant evidence that overcrowding in St. Pancras is still a serious problem. Many of the houses built in the Borough have, in fact, done more to attract new residents than to relieve overcrowding.

With the object of demonstrating what effect overcrowding still has on the health of children in the Borough, an analysis has been made of the deaths of children under 5 years of age, showing the relation of these deaths to housing conditions.

During the two years 1924 and 1925 there were 949 deaths of children under 5 years of age in the Borough. It was possible in 434 cases to obtain particulars of the housing conditions, and it was found that 279, or 64.3 per cent., had occurred under conditions of overcrowding, as defined above.

If this percentage figure is compared with the figure showing the percentage of the population living under overcrowded conditions in the census year 1921 (20.6 per cent.), the conclusion must be drawn that a large proportion of these deaths would not have occurred if adequate housing accommodation could have been provided. This conclusion is borne out by the figures given in Table C, which shows the causes of death and percentages in children living under normal and under overcrowded conditions. Deaths from Gastro-Intestinal and Respiratory diseases may to some extent be regarded as preventable by adequate and sanitary housing conditions. Deaths from Developmental and other causes are not so much influenced by this factor.



TABLE C.

Diseases.	Deaths of children under 5 years of age, 1924-1925					
	Total.	Housing conditions investigated.	Overcrowded.		Not overcrowded.	
			Number.	Per cent.	Number.	Per cent.
Gastro-intestinal ..	107	62	41	66	21	34
Respiratory (including Measles) .. ..	392	191	132	69	59	31
Developmental (and all other causes) .. ..	450	181	106	58	75	42
Totals ..	949	434	279	64·3	155	35·7

It will be seen that the proportion of deaths due to preventable diseases is much lower in the group of children who were not living under overcrowded conditions; in fact, these diseases are largely responsible for the difference in the number of deaths occurring under bad and good housing conditions.

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

1. The causes of death of all children under 12 months of age during 1925, classified according to age at death.
2. The causes of death of children under 12 months of age during the ten previous years. In this Table the number of births in each year is also given for reference.
3. The principal causes of death of children under 5 years of age, at various age periods, during 1925 and the five preceding years.

1925. 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 and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total Deaths under 1 year.
Small-pox ... ..	—	—	—	—	—	—	—	—	—	—
Chicken-pox ... ..	—	—	—	—	—	—	—	—	—	—
Measles ... ..	—	—	—	—	—	1	*1	—	—	2
Scarlet Fever ... ..	—	—	—	—	—	—	—	—	—	—
Whooping-Cough ... ..	—	—	—	1	1	9	8	7	4	29
Diphtheria and Croup ... ..	—	—	—	—	—	—	—	—	1	1
Erysipelas ... ..	—	1	—	—	1	1	—	—	—	2
Influenza ... ..	—	—	—	—	—	1	—	—	1	2
Tuberculous Meningitis ... ..	—	—	—	—	—	—	—	—	2	2
Abdominal Tuberculosis ... ..	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases ..	—	—	—	—	—	—	—	—	1	1
Meningitis (not Tuberculous)... ..	—	—	—	—	—	1	2	1	—	4
Convulsions ... ..	—	—	—	1	1	—	1	1	1	4
Laryngitis ... ..	—	—	—	—	—	—	—	—	—	—
Bronchitis .. ...	1	—	—	—	1	5	8	1	4	19
Broncho-pneumonia ... ..	1	—	3	—	4	7	12	2	9	34
Lobar-pneumonia ... ..	—	1	—	—	1	—	1	1	1	4
Pneumonia (type not stated)... ..	—	—	—	—	—	—	—	—	—	—
Diarrhoea ... ..	—	—	—	—	—	5	3	1	—	9
Enteritis ... ..	—	1	1	—	2	5	12	12	5	36
Gastritis ... ..	—	—	—	—	—	—	2	—	—	2
Syphilis ... ..	—	—	—	2	2	2	—	1	—	5
Rickets ... ..	—	—	—	—	—	—	—	—	—	—
Suffocation (overlying) ... ..	—	—	1	—	1	2	1	—	—	4
Injury at Birth .. ...	6	1	—	—	7	—	—	—	—	7
Atelectasis ... ..	2	—	—	—	2	—	—	—	—	2
Congenital Malformations ... ..	8	4	—	—	12	5	2	1	—	20
Premature Birth ... ..	42	7	3	1	53	4	—	—	—	57
Atrophy, Debility and Marasmus ..	2	—	—	3	5	4	6	2	—	17
Other causes ... ..	—	—	1	1	2	2	3	6	4	17
Totals ... ..	62	15	9	9	95	54	62	36	33	280

Nett Births in the year { legitimate ... 3637  
 { illegitimate ... 243  
 Net Deaths in the year of { legitimate infants 251  
 { illegitimate infants 29  
 \* German Measles.



## DEATHS FROM STATED CAUSES UNDER 1 YEAR OF AGE FOR 1925 AND 10 PRECEDING YEARS.

CAUSE OF DEATH.	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	Average for 10 years.	1925
Small-pox ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Chicken-pox ... ..	1	—	—	—	—	—	—	—	—	—	—	—
Measles ... ..	17	14	30	16	4	21	7	15	1	15	14	2
Scarlet Fever ... ..	—	—	—	—	1	—	—	3	—	—	—	—
Whooping Cough... ..	24	15	14	27	2	18	18	11	8	13	15	29
Diphtheria and Croup ... ..	—	2	1	1	—	2	2	—	—	—	1	1
Erysipelas ... ..	2	—	1	1	—	—	—	1	1	2	1	2
Influenza ... ..	—	1	—	18	11	2	2	7	—	6	5	2
Tuberculous Meningitis ... ..	8	5	4	8	4	6	4	3	4	3	5	2
Abdominal Tuberculosis ... ..	1	1	2	1	1	—	1	1	1	—	1	—
Other Tuberculous Diseases ... ..	6	5	7	3	2	2	3	7	2	—	4	1
Meningitis (not Tuberculous) ... ..	8	7	10	3	6	7	3	2	3	5	5	4
Convulsions ... ..	5	9	5	3	6	7	8	8	5	4	6	4
Laryngitis ... ..	1	—	1	—	—	—	—	—	1	—	—	—
Bronchitis ... ..	27	17	16	17	23	27	13	21	12	12	18	19
Broncho-pneumonia ... ..	57	40	47	29	24	60	39	54	34	51	43	34
Lobar-pneumonia ... ..	3	4	4	6	1	5	1	3	1	3	3	4
Pneumonia (type not stated) ... ..	9	6	9	9	8	4	3	6	1	3	6	—
Diarrhoea ... ..	15	6	8	6	10	11	11	4	6	6	8	9
Enteritis ... ..	64	35	52	31	37	26	63	27	37	46	42	36
Gastritis ... ..	3	2	4	1	3	2	2	—	1	—	2	2
Syphilis ... ..	9	14	16	13	11	15	14	8	5	2	11	5
Rickets ... ..	1	4	2	—	—	1	1	1	—	—	1	—
Suffocation (overlying) ... ..	8	9	13	6	1	2	2	5	1	1	5	4
Injury at Birth ... ..	10	4	3	2	6	5	3	3	6	4	5	7
Atelectasis ... ..	6	9	9	8	7	10	8	4	9	7	8	2
Congenital Malformations ... ..	25	34	19	17	31	33	25	31	27	23	26	20
Premature Birth ... ..	92	75	61	50	68	105	75	61	70	59	72	57
Atrophy, Debility and Marasmus ... ..	47	43	44	46	45	40	34	28	21	24	37	17
Other causes ... ..	48	24	20	18	24	24	18	23	15	14	23	17
<b>Totals ... ..</b>	<b>497</b>	<b>385</b>	<b>402</b>	<b>340</b>	<b>336</b>	<b>435</b>	<b>360</b>	<b>337</b>	<b>272</b>	<b>303</b>	<b>367</b>	<b>280</b>
<b>NETT BIRTHS ... ..</b>	<b>4754</b>	<b>4590</b>	<b>3796</b>	<b>3318</b>	<b>3824</b>	<b>5934</b>	<b>4764</b>	<b>4559</b>	<b>4348</b>	<b>4112</b>	<b>4394</b>	<b>3880</b>

TABLE SHOWING DEATHS OF CHILDREN UNDER 5 YEARS OF AGE, AT VARIOUS AGE PERIODS,  
AND THE PRINCIPAL CAUSES OF DEATH.

YEAR.	TOTAL NUMBER OF BIRTHS.	Number of Deaths from ALL CAUSES of children :—				Number of Deaths from DIARRHOEA and ENTERITIS.			Number of Deaths from MEASLES and WHOOPING COUGH.			Number of Deaths from BRONCHITIS and PNEUMONIA.			Number of Deaths from INJURY AT BIRTH, DEBILITY, PREMATURE BIRTH, AND CONGENITAL DEFECTS.		
		Under 1 year.	1 to 2 years.	2 to 5 years.	Total under 5.	Under 1 year.	1 to 2 years.	2 to 5 years.	Under 1 year.	1 to 2 years.	2 to 5 years.	Under 1 year.	1 to 2 years.	2 to 5 years.	Under 1 week.	Total under 4 weeks.	Total under 1 year.
1920	5934	435	99	91	625	37	5	2	39	50	30	96	21	9	101	141	193
1921	4764	360	81	54	495	74	8	1	25	24	11	56	19	12	75	105	145
1922	4559	337	153	128	618	31	5	1	26	60	36	84	47	33	63	87	127
1923	4348	272	67	69	408	43	9	—	9	17	6	48	25	18	85	107	133
1924	4112	303	102	110	515	52	5	1	28	46	38	69	31	11	48	76	117
1925	3880	280	73	81	434	45	3	1	30	19	20	57	29	14	60	79	103



## ECONOMIC CONDITIONS.

The amount of out-relief granted during the past 9 years is indicated in the following table (kindly supplied by Mr. Bernard Chapman, Clerk to the St. Pancras Guardians), which gives for half-yearly periods, the amount spent on out-door relief, and the number chargeable in this respect in the middle week of each half-year:—

Half-Year ending				Amount spent in the half-year.	Numbers chargeable in the middle week of the half-year.	
				£		
Michaelmas, 1917	...	...	...	3079	871	
Lady day, 1918...	...	...	...	3382		852
Michaelmas, 1918	...	...	...	3461	771	
Lady day, 1919...	...	...	...	3814		754
Michaelmas, 1919	...	...	...	4557	823	
Lady day, 1920...	...	...	...	6146		899
Michaelmas, 1920	...	...	...	8161	1079	
Lady day, 1921...	...	...	...	13081		1660
Michaelmas, 1921	...	...	...	21400	3529	
Lady day, 1922...	...	...	...	40081		6429
Michaelmas, 1922	...	...	...	34591	6325	
Lady day, 1923...	...	...	...	34193		6425
Michaelmas, 1923	...	...	...	28312	5489	
Lady day, 1924...	...	...	...	31690		5290
Michaelmas, 1924	...	...	...	26607	4723	
Lady day, 1925...	...	...	...	26766		4319
Michaelmas, 1925	...	...	...	31290	4267	
Lady day, 1926	...	...	...	36061		5427

For purposes of comparison, the number of inmates of the House are given below, the figures being also supplied by Mr. Chapman.

Date.	Numbers chargeable in St. Pancras House.		
July 1st, 1917	..	..	1074
January 1st, 1918	..	..	1058
July 1st, 1918	..	..	1027
January 1st, 1919	..	..	913
July 1st, 1919	..	..	877
January 1st, 1920	..	..	902
July 1st, 1920	..	..	908
January 1st, 1921	..	..	982
July 1st, 1921	..	..	974
January 1st, 1922	..	..	1069
July 1st, 1922	..	..	1099
January 1st, 1923	..	..	1122
July 1st, 1923	..	..	1045
January 1st, 1924	..	..	1173
July 1st, 1924	..	..	1029
January 1st, 1925	..	..	1146
July 1st, 1925	..	..	1110
January 1st, 1926	..	..	1130

## HOSPITAL ACCOMMODATION.

With the exception of the two hospitals of the St. Pancras Guardians, the use of the hospitals in St. Pancras is by no means confined to the residents in the Borough. They are rather London than St. Pancras institutions, especially on the in-patient side, and many of them receive patients even from beyond the metropolis. On the other hand, hospitals outside of the Borough are largely used by St. Pancras residents. The following table has been constructed from figures kindly supplied by the secretaries of the various institutions, to show the work done by the hospitals in St. Pancras, without reference to the home addresses of the patients.

Hospitals.	Number of Beds.	Number of in-patients admitted, 1925.	Number of new out-patients treated in 1925.
ST. PANCRAS POOR LAW HOSPITALS.			
St. Pancras Hospital, King's Road ... ..	404	2539	—
Highgate Hospital, Dartmouth Park Hill ... ..	554	2427	—
METROPOLITAN ASYLUMS BOARD HOSPITAL.			
St. Margaret's Hospital, Leighton Road (for ophthalmia neonatorum) ... ..	51	302	—
VOLUNTARY HOSPITALS.			
University College Hospital, Gower Street ... ..	345	5175	73853
Royal Free Hospital, Gray's Inn Road ... ..	240	4504	14512
London Temperance Hospital, Hampstead Road ... ..	120	1047	13198
Elizabeth Garrett Anderson Hospital, Euston Road ... ..	75	1513	11179
West End Hospital for Nervous Diseases, Regent's Park ... ..	80	526	4587
Hospital for Tropical Diseases, Endsleigh Gardens ... ..	58	622	—
Central London Throat, Nose and Ear Hospital, Gray's Inn Road ... ..	43	1022	10877
Central London Ophthalmic Hospital, Judd Street ... ..	40	644	14320
Metropolitan Ear, Nose and Throat Hospital, Fitzroy Square ... ..	22	608	3581
St. Saviour's Hospital, Osnaburgh Street ... ..	21	—	†
North-West London, Bayham Street ... ..	128	1655	16267
St. Pancras Dispensary, Oakley Square ... ..	—	—	2587 §
London Skin Hospital, Fitzroy Square ... ..	—	—	— ¶
Western Skin Hospital, Hampstead Road ... ..	—	—	1740
British Dentists' Hospital, Camden Road ... ..	—	—	540

† Hospital temporarily closed.

§ Not including the work of the Tuberculosis Dispensary (*see* page 61), but including the clinic for mothers and young children (*see* page 38).

¶ Information not to hand.

## HEALTH WEEK.

This was observed during the week commencing October 4th, and the following report with reference to the arrangements which were made was presented to the Council, through the Public Health Committee.



14th October, 1925.

To the Chairman and Members of the  
Public Health Committee.  
Ladies and Gentlemen,

*Health Week—October 4th to 10th.*

During the week above mentioned leaflets on a variety of health subjects was distributed to nearly every house in the Borough. This procedure ensured far more publicity, and reached a far greater number of people than had been secured in previous years by means of lectures, etc., in the Town Hall. Altogether over 100,000 leaflets were distributed. With the object of stimulating interest in the leaflets in the homes and to ensure their perusal, His Worship the Mayor generously offered a number of prizes to children attending the elementary schools in the Borough for the best essay on any one of the leaflets. The head teachers of the boys' and girls' departments cordially supported this suggestion and supervised the writing of the essays. They also agreed to select and forward to me the three best essays from each school. From these the prize winners were chosen. The work of preparation and distribution of the leaflets was very great. The whole of the clerical staff of the department worked very hard in getting the leaflets ready and arranging them in bundles for each street. A number of voluntary workers also rendered assistance. The scheme could not, however, have been carried out but for the assistance of Councillor Rev. Conyers Morrell, M.A., who very kindly organised a staff of 100 boys from his Church Lads' Brigade, and these, under his supervision, undertook the task of delivering the leaflets. Assistance was also given by the 2nd St. Pancras Troop of Boy Scouts under Mr. H. Van Winsen, and Mr. Gerrard, of the St. Pancras Cadets. Two meetings were also held during Health Week. One, for senior school children, took place at the St. Pancras House of Fellowship, His Worship the Mayor, presiding, and Councillor Dr. Gregg and Councillor Mrs. Alliston and others spoke. This was a very successful meeting, between 500 and 600 persons being present. The other meeting for both parents and school children was arranged by Mr. Suffling, Headmaster of the Brecknock School, and at this an address was given by Dr. Vawdrey, School Medical Officer.

I am, etc.,

G. SOWDEN,

*Medical Officer of Health.*

In addition to the above your Medical Officer of Health prepared a booklet on the various public health activities of the Borough Council, together with other local information likely to be useful to members of the profession, and this was printed and circulated to all medical practitioners in the Borough.

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NATIONAL RAT WEEK.

RATS AND MICE (DESTRUCTION) ACT, 1919.

The Ministry of Agriculture and Fisheries issued a notice suggesting that the above should be observed during the week commencing November 2nd, 1925. This suggestion was accepted and the measures enumerated below were adopted:—

- (a) A circular was forwarded to the occupiers of all premises particularly likely to be infested—such as railway sheds and sidings, goods yards, wharves, slaughter-houses, corn chandlers, etc. Attention was also called to the necessity of abolishing refuse and rubbish heaps of all kinds.
- (b) The chemists and hardware dealers in the Borough were asked to stock, exhibit, or advertise suitable raticides, traps, etc., during the week.

- (c) The Borough Engineer kindly co-operated as regards premises and sewers, etc., under the control of the Council.  
Two hundred-weights of rat bait were laid in 270 places in the sewers.
- (d) A leaflet on the subject was prepared by the Medical Officer of Health for general distribution, but copies were specially circulated where action was considered to be most necessary and valuable.

### Section II.—MATERNITY AND CHILD WELFARE.

The statistics for the year in regard to births and deaths of infants will be found on pages 12, 13 and 16 to 21 of this report.

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 visiting of expectant and nursing mothers and babies by the Council's staff of health visitors, who work (a) from the Town Hall and (b) from the Centres.
- (c) The provision and maintenance of 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 by municipal and partly by voluntary funds.
- (e) The provision of a municipal dental clinic for mothers and young children.
- (f) The subsidisation 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 subsidisation of a voluntary fund for the provision of dinners for nursing and expectant mothers.
- (h) The subsidisation of a voluntary fund for the provision of Home Helps.
- (i) The subsidisation of the three voluntary Day Nurseries in the Borough.
- (j) The subsidisation of voluntary agencies providing, either free or at a reduced rate, in hospital or at home, midwifery attendance for necessitous St. Pancras women.
- (k) The payment for the home nursing of sick infants in certain cases.
- (l) A Centre for Artificial Sunlight treatment.
- (m) The visiting and supervision of necessitous children under 5 years of age upon discharge from the Borough Poor Law Hospitals.

The work done in 1925 in connection with the scheme will now be referred to in detail :—

ADVICE CARDS.—Besides the posting of cards of advice to the mothers of all infants whose births have been notified, cards of advice to expectant mothers have been distributed through University College Hospital, Middlesex Hospital, the Maternity Nursing Association, and other agencies.



**HOME VISITING.**— This has been done by the health visitors at the Town Hall and by the Council's staff of health visitors 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 health visitors, six in number, give approximately half of their time to this work. These ladies in 1925 made 1200 visits to 131 infants (apart from visits made to cases of measles and for other special purposes). They also made 254 visits to 113 expectant mothers.

The last mentioned activity ("m" in the above list) was initiated during the year, and was rendered possible by the co-operation of the Medical Superintendents, who agreed to supply a weekly list of children discharged from their respective institutions.

The work is proving valuable, as advice and assistance during convalescence are not only frequently necessary, but in many cases help to prevent a relapse or recurrence of the illness for which the child was originally admitted to hospital.

The Council's visitors at the Infant Welfare Centres, 20 in number, are full-time workers, who divide their time between the necessary work at the Centres and visiting the homes of the mothers and children. In addition there was one full-time trained worker, not paid by the Council, at the Caversham Road Centre, and one part-time trained voluntary (unpaid) worker at the Chalton Street and Grafton Road Centres. There were also two trained visitors at the University College Hospital Centre, who worked in neighbouring boroughs as well as in St. Pancras, and whose salaries were paid by the hospital authorities, and not by the Council.

During 1925 the Council's staff at the various Centres made 42,427 visits to 3,476 children, and 4,388 to 1711 expectant mothers; the trained workers not paid by the Council made 11,920 visits to 935 children, and 337 visits to 183 expectant mothers.

The visiting work is set out in detail on the next page, and is summarised in the following statement:—

	No. of Expectant Mothers Visited.	Total Visits to Expectant Mothers.	No. of Children Visited.	Total Visits to Children.
Town Hall Health Visitors ... ..	113	254	131	1200
Centre Staff, paid by Council... ..	1711	4388	3476	42427
Trained Centre staff, not paid by Council	183	337	935	11920
Total of all trained workers ... ..	2007	4979	4542	55547
Corresponding totals for 5 previous years—				
1924 ... ..	1921	4621	4571	53884
1923 ... ..	2084	4953	5401	52759
1922 ... ..	2342	4770	6194	50347
1921 ... ..	2547	5730	7200	53547
1920 ... ..	2158	5005	8502	44498

CENTRE.	ATTENDANCES AT CONSULTATIONS.								VISITS BY TRAINED VISITORS.								CONSULTATIONS.				Number of Trained Visitors	
	Expectant Mothers.		Children.						Expectant Mothers.				Children.				Infants.		Expectant Mothers.			
	New cases.	Total attendances.	New cases.			Total attendances.			First visits.		Total visits.		First visits.		Total visits.		Per month.	Total.	Per month.	Total.	Whole time.	Part time.
			Under 1 year.	Over 1 year.	Total.	Under 1 year.	Over 1 year.	Total.	Visitors paid by Borough Council.	Trained workers not paid by Borough Council.	Visitors paid by Borough Council.	Trained workers not paid by Borough Council.	Visitors paid by Borough Council.	Trained workers not paid by Borough Council.	Visitors paid by Borough Council.	Trained workers not paid by Borough Council.						
Town Hall, Health Visitors	—	—	—	—	—	—	—	—	113	—	254	—	131	—	1200	—	—	—	—	—	—	—
St. Pancras School for Mothers— Amphill Square ...	191	701	301	54	355	3143	3185	6328	352	—	1039	—	578	—	12785	—	19 (1)	246	4	48	4	—
Chalton Street ...	58	259	173	18	196	2383	2044	4427	261	—	572	60	323	—	4300	1643	12	145	1	13	2	1 (2)
North St. Pancras School for Mothers, Queen's Crescent	97	234	347	35	332	4532	3099	7631	75	—	378	—	530	—	4894	— (3)	18	217	2	23	3	—
South Highgate Centre	—	—	81	24	105	1365	1041	2406	17	—	29	—	122	—	990	—	8	98	—	—	—	—
Grafton Road Centre ...	57	189	223	34	257	2753	1988	4741	129	—	456	—	348	17	5290	1172	13	157	1	11	2	1 (2)
Mary Ward Settlement School for Mothers	16	65	135	31	166	1947	1568	3515	91	—	158	—	251	—	1653	—	12	145	—	—	1	—
Camden Town Centre, Camden Road	86	199	320	38	358	3692	1881	5573	358	—	755	—	680	—	5602	—	16	187	2	23	3	—
Argyle Square Centre...	47	94	126	21	147	1390	480	1870	62	—	364	—	189	—	2620	—	5	61	1	12	1	—
Caversham Road Centre	83	485	271	7	278	3842	1379	5221	83	4	244	15	176	153	2397	2507 (4)	12	142	4	48	2 (5)	—
(6) Maternity Nursing Association, Oakley Square	140	155	173	5	178	2082	1514	3596	—	179	—	262	129	110	1282	794	8	96	1	12	1	—
University College Hos- pital	1111	3276	—	—	614	—	—	3355	—	—	—	—	—	655	—	5801	8	102	4	49	—	— (7)
Royal Free Hospital, Gray's Inn Road ...	290	1079	85	54	139	487	320	807	250	—	393	—	150	—	614	—	8	103	16	207	—	2
Totals ...	2176	6736	—	—	3175	—	—	49470	1824	183	4642	337	3607	985	43627	11920	139	692	36	451	20	—

(1) January to May, 23 consultations per month. (2) Voluntary trained worker. (3) 319 visits were made by unqualified students. (4) In addition to 96 visits by untrained voluntary workers. (5) In addition to 1 full-time trained voluntary worker. (6) Year ended 31st March, 1926. (7) Paid by hospital, and not by Council.



### MATERNITY AND CHILD WELFARE CENTRES.

These are 12 in number. Each Centre is managed by a Committee, the members of which not only give valuable help at the various consultations, but also provide additional funds for the maintenance of many other useful activities associated with the work of each Centre. The Council has representatives on each committee, and each committee sends one representative to the Council's Maternity and Child Welfare Sub-Committee. The Centres at University College Hospital and the Royal Free Hospital are not subsidised by the Council.

The table on page 27 gives statistics concerning the work of all the Centres during 1925. It will be seen that 1,699 infant consultations and 451 ante-natal consultations were held during the year. The children who attended for the first time numbered 3,175.

The total attendances of all children was 49,470, as compared with 51,292 in 1924, and 55,265 in 1923.

The total attendances of expectant mothers numbered 6,736, as compared with 8,653 and 6,389 in the two preceding years.

Details concerning the work, together with some of the special activities of the individual Centres, are given in the following paragraphs:—

#### ST. PANCRAS SCHOOL FOR MOTHERS, 1, AMPHILL SQUARE.

In addition to the consultations provided by the Council, the Medical Officers have held voluntary consultations for children from two to five years of age.

#### *Classes for Mothers.*

At infant care classes there were 622 attendances; ante-natal care, 344 attendances; and at needlework, etc., classes, 774 attendances.

#### *Dinners for Mothers and Children.*

These are supplied at a very small charge for necessitous cases. 2,953 dinners were supplied to nursing and expectant mothers, and 2,921 to young children.

#### *Observation Day Nursery.*

This is for children needing special care. There were 1,746 attendances during the year, of which 708 were made by infants under one year of age, and 1,038 by children over one year.

#### *Massage Clinic.*

91 consultations were held, at which 792 attendances were recorded. There were 60 new cases.

#### *Dental Clinic.*

This also is provided out of funds from voluntary sources. The Dental Surgeon is Mr. George Thomson, L.D.S. During the year 35 consultations were held, at which 525 attendances were made. Details of the work done are given in the following table:—

	Mothers.	Children.
Extractions with anæsthetics .. .. .	36	23
„ without anæsthetics .. .. .	2	17
Fillings .. .. .	63	135
Scalings .. .. .	27	—
Impressions and fitting dentures, etc. .. .. .	68	—
Examinations .. .. .	30	124
	—	—
Totals .. .. .	226	299

Interviews with parents by the Superintendent, other than at clinics or classes, numbered 5,957.

Early in the year the attention of the Committee of this Centre was directed to the reduction which had taken place in the average attendance at the infant consultations. The matter was considered by them, and a letter was forwarded to the Council, stating that they have considered the low average attendances at the infant consultations at the Ampthill Square Centre, and expressed the opinion that the number of babies dealt with by that Centre does not justify five weekly infant consultations. They advise that Dr. Jessie Muir's weekly Wednesday morning infant consultation should be closed, and that she should be paid for the one "toddlers" consultation a month, which she has hitherto held voluntarily. The Committee state that they appreciate the help which the Borough Council have given them with the extra consultation during the years of high birth-rate following the war, and they are glad to be able to reduce their expenditure now.

On April 22nd, 1925, the Council decided that the proposal to discontinue the weekly Wednesday morning infant consultation at the Ampthill Square Centre be approved, and that the Council do take over the financial responsibility of the one "toddlers" consultation per month held by Dr. Jessie Muir at that Centre.

#### ARGYLE SQUARE CENTRE.

This Centre makes little progress as regards numbers, and the amount of work is quite inadequate to fully occupy a full-time worker.

The total number of new cases (children) during the year was 147, the corresponding figure for the previous year being 140. The total number of visits paid to children was 2,620. Only one consultation per week for infants is held.

#### MARY WARD SETTLEMENT SCHOOL FOR MOTHERS.

This also is a small Centre, and the duties are insufficient to fully occupy a full-time worker. The total number of new cases (children) was 166, and the total number of visits paid to children was 1,653. It will be noted that at the Argyle Centre, with a smaller number of cases, nearly 1,000 more visits were paid. The Mary Ward Centre has been a joint one with the Borough of Holborn, and as this Authority had notified its intention to withdraw as from December 31st to a new Centre within its own Borough, the St. Pancras Borough Council decided to transfer on the same date, their portion of the work and staff to the Argyle Square premises. These were suitably situated, though expensive to maintain owing to the small number of consultations. The amalgamation will help to reduce the cost.

Further details as to this amalgamation will be found on page 31. At the request of the Mary Ward Committee the Council agreed to defer the transfer and amalgamation until March 31, 1926.

#### CAMDEN ROAD CENTRE.

The number of new cases at the ante-natal consultations shows an increase, and the number of new cases (children) was exactly the same as in the previous year.

90 massage clinics were held during the year, the attendances at which numbered 840.

A needlework class is held on alternate weeks.

#### CAVERSHAM ROAD CENTRE.

The total number of new cases during the year was 361, the corresponding figure for the previous year being 401. The decrease affected both expectant mothers and children.



A number of consultations were held, the cost of which was defrayed out of funds from voluntary sources. The cost of a full-time trained worker was similarly met.

47 classes were held during the year on various subjects, the average attendance being 11.

A number of mothers and children were sent away on holiday or to convalescent homes, the St. Pancras Women's Holiday Fund assisting in this work.

Trained voluntary workers paid 15 visits to expectant mothers and 2,507 to children.

#### CHALTON STREET CENTRE.

In addition to the usual consultations, massage clinics were held, the attendances at which numbered 394.

Attendances at sewing, etc., classes were 537, and at 25 of the sewing classes Health talks were also given.

Interviews with parents by the Superintendent, other than at classes or clinics, numbered 3,278.

Voluntary trained workers made 60 visits to expectant mothers and 1,643 visits to children.

#### GRAFTON ROAD CENTRE.

A voluntary consultation for children from 2 to 5 years of age is held monthly.

15 Mothers and 25 children were sent on holiday with the help of funds from the St. Pancras Women's Holiday Association.

1,197 Free Dinners were given to nursing or expectant mothers, with the assistance of members of the Voluntary Committee.

A large number of suitable woollen garments were supplied at cost price to necessitous mothers.

17 visits were paid to expectant mothers, 1,172 to children, by a Voluntary Trained worker.

#### NORTH ST. PANCRAS SCHOOL FOR MOTHERS, QUEEN'S CRESCENT.

The number of new cases (expectant mothers) shows a decrease as compared with the previous year, but this is the case at the majority of the centres, and is to be expected owing to the lower birth-rate in the Borough. In addition to the consultations, provided by the Borough Council, two voluntary consultations for children from 2 to 5 years of age were held each month.

Health talks were given, the attendance numbering 275.

#### OAKLEY SQUARE CENTRE.

The number of new cases shows an increase as compared with the previous year.

16 mothers and 23 children were sent for a fortnight's holiday, the greater part of the cost being raised voluntarily.

#### SOUTH HIGHGATE CENTRE.

The total number of new cases was 105, as compared with 80 for the previous year. The number of attendances was also greater.

Needlework classes were held on alternate Tuesday afternoons, the attendances at which numbered 96.

The Artificial Light Clinic, which was started in February, 1925, is held at this centre, and although assistance at the consultations is given by health visitors from other centres, the work of the Superintendent, Miss Bristow, has been enormously increased by the initiation of this special work. I wish to place on record the admirable spirit with which Miss Bristow has undertaken this additional duty, and the excellent manner in which she has performed it.

The report on the work of the Artificial Light Centre will be found on page 34.

#### PROPOSED RE-ORGANISATION OF MATERNITY AND CHILD WELFARE WORK.

It having been reported to the Maternity and Child Welfare Committee that, owing to the diminished birth-rate in the Borough, and also in view of the contemplated demolition of the Chalton Street Centre, and the unsuitable situation of certain other centres, it appeared to be desirable to consider if some centralisation of this work would not conduce both to efficiency and economy. The Committee requested your Medical Officer of Health to report upon the matter, and the following report was submitted:—

To the Chairman and Members of the Maternity  
and Child Welfare (Advisory) Sub-Committee.

Ladies and Gentlemen,

In accordance with the resolution of the Committee, I beg to report on the question of amalgamating certain of the Maternity and Child Welfare Centres. At the present time there are ten Centres in the Borough. The number of staff at each Centre varies from one to four, and the number of consultations varies from six to twenty-four per month. Despite these variations in number of staff, number of consultations and amount of responsibility, all superintendents are of equal rank and receive equal remuneration.

The smaller Centres, especially those staffed by one worker, are proportionately more expensive to maintain, and are also more difficult to work. As regards expense, such items as rent, rates, taxes, salaries, etc., are fixed charges, irrespective of the number of consultations which are held. Where the staff consists of one worker only, any sudden illness or absence causes considerable difficulty, and temporary staff has to be obtained. Such an occurrence is easily dealt with at large Centres which have a more numerous staff.

In suggesting any combination of Centres, it is necessary to bear in mind the convenience of the mothers and the distance they would have to travel. Centres should be adequately equipped and large enough to work easily, and yet not too far apart to cause inconvenience to those attending. The map produced shows the position of the existing Centres. At the present time I would not suggest any change as regards the Centres at South Highgate, Queen's Crescent, Caversham Road and Amphyll Square, and as regards the Mary Ward and Argyle Square Centres, these have recently been merged by resolution of the Council. This leaves for consideration the Centres at Grafton Road, Camden Road, Oakley Square and Chalton Street. The premises at Chalton Street are situated in an area which is to be cleared in consequence of the London County Council Housing Scheme, and new premises therefore will have to be secured. The present position of this Centre is not good; a better situation would be in a position farther north; this would bring it close to the Oakley Square Centre. I am therefore of opinion that these two Centres (Chalton Street and Oakley Square) can well be merged when a favourable opportunity occurs.

With reference to the Grafton Road Centre, the premises are inadequate, and as regards situation too near the Caversham Road Centre. The accommodation at Grafton Road comprises one large room and a very small one for the Doctor. The one large room has to serve the purpose of waiting room, weighing room, dressing room, etc. This is very inadequate, especially as regards ante-natal work. A much better situation for this Centre would be farther south. This would bring it fairly close to the Camden Road Centre. I am therefore of opinion that, at a favourable opportunity, the Grafton Road and Camden Road Centres should be merged into one building on a site about midway between these two Centres.



Amalgamations on the above lines would effect economy in rent, working expenses and staff. At the same time more adequate and convenient buildings might be obtained. It is difficult to estimate the economy in rent and working expenses until suitable buildings are secured.

As regards staff, the Ministry of Health suggest one Health Visitor for every 400 births. The number of births in the Borough is about 4,000 per annum, and the rate is decreasing. According to the scale mentioned, a staff of 10 Health Visitors is necessary. At the present time the total Centre staff number 20—of these 10 are Superintendents and 10 are Assistants—this large staff to some extent being required owing to the number of small Centres.

It is probable that some further economy would result from the proposed grouping, as the attendances at the consultations would be more uniform, and probably one or two consultations might be dispensed with.

The table attached gives for each Centre details as to Staff, number of attendances, number of visits, total cost, etc. A study of this table shows the wide variations which at present exist.

It is not suggested that any change is possible at the moment; but, if after consideration the Committee is of opinion that the policy indicated is desirable, and this policy is approved by the Council, the proposed changes might be adopted as and when opportunity arises.

I have, etc.,

G. SOWDEN,  
*Medical Officer of Health.*

#### MATERNITY AND CHILD WELFARE CENTRES.

*Return of work done during 52 weeks ended 28th November, 1925, and Statement of Annual Cost on present basis.*

CENTRE.	Staff.	New Cases sent to Centre.	Total Visits.	Consultations.			Annual Cost.	Average Cost per Consultation.	Average Cost per Attendance.
				No. Held.	Total Attendances.	Average Attendance.			
Amphill Square	4	1015	13890	266	6497	24	£ 1392	£ s. d. 5 9 7	s. d. 4 3
Chalton Street ...	2	645	4949	156	4812	31	778	4 19 9	3 3
Queen's Crescent	3	591	5237	216	7343	34	1123	5 4 0	3 1
Grafton Road ...	2	562	7495	155	4812	31	689	4 8 11	2 10
South Highgate	1	201	1321	96	2423	25	530	5 10 5	4 4
Mary Ward ...	1	347	2212	143	4599	32	412	2 17 7	1 10
Camden Town ...	3	1102	7728	214	5734	27	1013	4 14 8	3 6
Argyle Square ...	1	258	3185	72	1785	25	481	6 13 7	5 5
Caversham Road	2	430	2469	128	3843	30	746	5 16 7	3 11
Oakley Square ...	1	120	1815	107	3957	37	471	4 8 0	2 5
	20	5271	50301	1553	45805	29	7635	4 19 1	3 4

*Attendances at Voluntary Consultations and visits by Voluntary Workers are excluded.*

An additional reason for the amalgamation of certain of the centres and for a centralisation of this work is afforded by the great variation in method which exists at present. To some extent this is probably due to the origin of the centres; these were started by voluntary workers who, doubtless, had their own views as to the manner in which the work should be carried out. The Superintendents of each centre also vary somewhat in their procedure, but to a certain extent work on the lines initiated by the voluntary committees who still manage each centre. The following table gives the number of new cases at each centre, the number of attendances, and the number of visits paid by the staff during the past five years:—

### MATERNITY AND CHILD WELFARE SCHEME.

*Number of New Cases, Attendances and Visits at each Centre during five years (1921-1925).*

#### ATTENDANCES AT CONSULTATIONS.

EXPECTANT MOTHERS.				CHILDREN.			
Centre.	New cases.	Attendances.		Centre.	New cases.	Attendances.	
		Total.	Average No. per case.			Total.	Average No. per case.
Caversham Road	283	1317	4.7	South Highgate ..	432	10001	23.2
Chalton Street ..	309	1224	4.0	Chalton Street ..	1059	24252	22.9
Grafton Road ..	193	768	4.0	Amphill Square ..	1769	36457	20.6
Amphill Square ..	978	3105	3.2	Mary Ward ..	725	14335	19.8
Mary Ward ..	145	449	3.1	Queen's Crescent ..	2114	40912	19.4
Argyle Square ..	69	191	2.8	Caversham Road ..	914	16858	18.4
Camden Town ..	510	1330	2.6	Oakley Square ..	1179	21590	18.3
Queen's Crescent ..	644	1571	2.4	Grafton Road ..	1445	22673	15.7
South Highgate ..	41	100	2.4	Camden Town ..	2003	30255	15.1
Oakley Square ..	727	830	1.1	Argyle Square ..	422	5445	12.9

VISITS (Including visits by *Voluntary* trained workers).

EXPECTANT MOTHERS.				CHILDREN.			
Centre.	New cases.	Visits.		Centre.	New cases.	Visits.	
		Total.	Average No. per case.			Total.	Average No. per case.
Argyle Square ..	69	786	11.4	Chalton Street ..	1059	36747	34.7
Chalton Street ..	309	3469	11.2	Amphill Square ..	1769	53451	30.2
South Highgate ..	41	358	8.7	South Highgate ..	432	7743	17.9
Grafton Road ..	193	1463	7.6	Caversham Road ..	914	15269	16.7
Amphill Square ..	978	5880	6.0	Grafton Road ..	1445	23292	16.1
Mary Ward ..	145	870	6.0	Mary Ward ..	725	11187	15.4
Camden Town ..	510	2892	5.7	Argyle Square ..	422	6157	14.6
Caversham Road ..	283	1103	3.9	Queen's Crescent ..	2114	23445	11.1
Queen's Crescent ..	644	1630	2.5	Oakley Square ..	1179	11866	10.1
Oakley Square ..	727	1518	2.1	Camden Town ..	2003	19247	9.6



The figures in the above tables in respect of Argyle Square and Caversham Road Centres are for *three* years only (1923-1925).

With reference to expectant mothers, it will be seen that the attendances varied from 1·1 to 4·7 per case, the visits paid to these mothers varied from 2·1 to 11·4 per case.

As regards children, the number of attendances per child varied from 12·9 to 23·2, and the visits to the homes range from 9·6 to 34·7 per child.

Too strict a uniformity may not be advisable, but variations so great would appear to be undesirable and steps are to be taken to remedy this.

#### ARTIFICIAL LIGHT TREATMENT.

A centre for providing this treatment was opened on February 24th, 1925, a lamp, giving the necessary rays, having been presented to the Council by the Committee of the "Save the Children" Fund. In June, an anonymous donor presented two lamps of improved type, and this generous gift has made it possible to treat a larger number of children, and there is no longer the delay in dealing with cases which unavoidably existed when one lamp only was available.

This was the first Municipal Light Centre to be opened in the Metropolis, and it has been visited and inspected by representatives of many other authorities who contemplated opening similar centres. In July, at the request of the Executive Committee of the National Baby Week Council, permission was given for a large number of members and delegates of the School of Maternity and Child Welfare to visit the centre.

The following report which has been presented to the Council gives particulars concerning the centre and the work carried out from the date of opening up to December 31st, 1925:—

To the Chairman and Members of the  
Maternity and Child Welfare Sub-Committee.

Ladies and Gentlemen,

I beg to submit the following report on the work carried out at the Artificial Light Clinic at South Highgate, from its commencement on February 24th to December 31st, 1925.

The Clinic was opened in order to provide this special treatment for children of the Borough who were suffering from Rickets, Tuberculous Glands, Incipient Tuberculosis, Delayed Development, Debility or other affections for which this form of treatment is indicated. The children are selected from those who are attending the various Welfare Centres. Medical Practitioners can also recommend suitable cases. As the work forms part of the Child Welfare Scheme, it is necessarily limited to children under 5 years of age.

*Staff.*—Dr. William Beaumont, M.R.C.S., L.R.C.P., is in charge of the treatment. Prior to his appointment, he had experience in this work when acting as Clinical Assistant in the Light Department of the London Hospital.

The nursing staff consists of the Superintendent of the Centre, Miss G. R. Bristow, who is assisted during the consultations by two Health Visitors from other Centres.

*Lamps.*—There are now three in use. One is a "Westminster" single open carbon arc, working at 28 amps. across the single arc, and was presented by the Committee of the "Save the Children" Fund; it has been in use since the opening of the Clinic.

The other two are "Alpine Sun" quadruple open carbon arc lamps, working at 16 amps. across each arc, and were presented by an anonymous donor in June, 1925.

The current is direct, and the voltage 220.

*Treatment.*—Consultations of two hours' duration are held on Tuesday, Thursday and Saturday from 11 to 1.

From the opening of the Clinic until December 31st, 1925, 118 consultations have been held, 119 patients have been treated, and the attendances have numbered 2,559. Up to the beginning of July, with only one lamp in use, the average attendance at each session was 15. Since then, with three lamps, the average attendance has been 27. All patients, of whatever clinical type, receive as a routine three exposures a week. Those exposed to the Alpine Sun Lamps begin with 5 or 10 minutes, and this is increased to 20 minutes at each exposure. The time of exposure to the Westminster Lamp gradually increases from 20 to 60 minutes.

The total number of exposures given to a patient has varied from 15 to 70 according to the disease, the reaction and the degree of improvement obtained.

The number of patients treated, grouped according to their diseases, is shown in the following table:—

Disease.	Number Treated.	Remarks.
RICKETS ... ..	48	Indicated by bone manifestations. Late eruption of teeth. Delayed closure of Anterior Fontanelle. Alimentary manifestations.
TUBERCULOSIS— Incipient ... ..	6	Patients losing weight, with occasional febrile attacks, general malaise, hectic pink and white complexion and rapid pulse were regarded as having Incipient Tuberculosis.
Glandular ... ..	3	
BRONCHIAL AFFECTIONS ...	20	These patients had repeated colds and attacks of bronchitis, but did not have large tonsils and adenoids or other obvious causes of this condition.
NERVOUS INSTABILITY ...	8	Sleepless, peevish children, but without signs of rickets, tuberculosis or mental deficiency.
DELAYED DEVELOPMENT ...	11	Children with delayed teething, walking or talking and with slow mentality, but without other signs of rickets.
DEBILITY ... ..	23	Children whose nutrition is below normal, but who do not fall into any other group.
Total ... ..	119	

The following table gives particulars as to cases and attendances, and indicates the Centres from which the children were sent:—



## ARTIFICIAL LIGHT CLINIC.

Centres from which cases were referred.	Number of Cases.	Number of Attendances.
Argyle Square ... ..	11	140
Camden Road ... ..	4	175
Caversham Road ... ..	51	1039
Grafton Road ... ..	12	212
Mary Ward ... ..	7	181
Queen's Crescent ... ..	2	39
South Highgate ... ..	22	690
Non-Centre cases... ..	10	83
Totals ... ..	119	2559

The total number of consultations held was 118.

*Clinical observations and results.*

*Temperature.*—This is taken in the groin before and after each treatment. The temperature of the skin after exposure is never found to be above normal, provided a few minutes elapse before it is taken. Sub-normal pre-exposure temperatures tend to become normal during a course of treatment.

*Pulse.*—The pulse records have little clinical significance owing to the fact that most of the patients are babies whose pulses vary considerably for reasons unconnected with the treatment.

*Blood pressure, X-ray, and photographic records* have not been made.

*Weights.*—These are recorded for each patient once a week. It has been found that over-fat, flabby children lose weight until normal, and then maintain a normal increase. Children who are under weight gain steadily after three or four exposures.

*Mental condition.*—One of the most striking and often the first effect of the treatment is to make a dull child bright and alert.

*Local lesions.*—The only local lesions treated have been tubercular glands. These have been observed to disappear after six exposures.

*Skin reactions.*—Patients have been grouped according to colour and texture of hair colour of skin. It has been found that children apparently in the same group react quite differently, so that it is necessary to give separate attention to each case in order to regulate dosage.

*Cost.*

The total cost from the opening in February up to December 31st, 1925, has been as follows:—

	£	s.	d.
Fitting up of Centre ... ..	100	13	3
Electric Current ... ..	13	16	6
Cleaning ... ..	8	16	0
Postage and stationery ... ..	1	13	9½
Thermometers ... ..	1	5	0
Miscellaneous ... ..	5	19	8
Consultation fees (Dr. Beaumont) ... ..	78	15	0
Total ... ..	£210	19	2½

Omitting the cost of fitting up the Centre, the average cost per child has been 18s. 6d. (eighteen shillings and sixpence) and the average cost per attendance 10d. (tenpence).

Dr. Beaumont gave his services free of charge for the first six months, but a fee of 1½ guineas per consultation has been paid since September 1st, 1925.

The average cost, therefore, during the first six months was less than it will be in future. Assuming the doctor's fee had been paid throughout the entire period, the average cost per child would have been £1 16s. 6d. (one pound, sixteen shillings and sixpence), and the average cost per attendance 1s. 8d. (one shilling and eightpence).

No part of the salary of the Superintendent has so far been allocated to this particular work, the duties being performed as part of the work of the Welfare Centre.

The average cost of current per hour with all three lamps working is about one shilling.

With better organisation it has recently been found possible to treat from 35 to 40 children at each consultation. If this average can be maintained, the cost per attendance and per child should show a reduction in future.

The clinical details in this report have been based on notes supplied by Dr. Beaumont, who states that his general impression of the ten months' work is good, the results have been gratifying, and in some cases exceptionally so, both for rapidity of action and permanence. He considers the work of the Artificial Light Clinic will have real and lasting value, and has immense possibilities.

I am, etc.,

G. SOWDEN,

*Medical Officer of Health.*

#### THE BOROUGH COUNCIL'S DENTAL CLINIC, 40, ARYGLE SQUARE.

At this clinic dental treatment is provided for mothers and children who attend the various Maternity and Child Welfare Centres in the Borough. Consultations had been held twice weekly (on Monday and Wednesday), but owing to the steady increase in the number of patients this amount of time proved to be insufficient, and since March 30th, 1925, an additional consultation has been held on alternate Fridays.

No charge is made for extractions, fillings or scaling; but the patients are expected to contribute what they can reasonably afford towards the cost of dentures.

The work done during the year is summarised in the following table, the figures for the two previous years (1923-1924) also being given for comparison:—

Work carried out at the Dental Clinic.		1923.	1924.	1925.
Number of new cases	{ Mothers .. .. .	234	221	233
	{ Children .. .. .	143	145	213
Total .. .. .		377	366	446
Number of Attendances	For extractions under nitrous oxide (gas)	287	306	369
	"                    "          local anæsthesia..	150	118	100
	" fillings and dressings .. .. .	296	300	301
	" scaling .. .. .	62	67	47
	" impressions and fitting dentures ..	506	490	571
	" examination and advice .. .. .	458	477	634
Total attendances .. .. .		1759	1758	2022
Total number of clinics held .. .. .		96	96	111
Number of clinics with nitrous oxide anæsthesia ..		23	24	24



The following table shows the number and cost of the dentures supplied during the year:—

Number of Patients supplied with dentures	..	..	97
Total cost	..	..	£334
Proportion paid by mothers	..	..	72·9 per cent.
Proportion paid by Borough Council	..	..	9·1 „
Proportion paid by various Societies	..	..	18·0 „

24 mothers paid the entire cost of two dentures each.

22 mothers paid the entire cost of one denture each.

The Societies who made contributions towards the cost of dentures were the Metropolitan Hospital Sunday Fund, £35 10s.; the Metropolitan Hospital Saturday Fund, £12 10s., and various other societies (chiefly through the Charity Organisation Society), £7 10s.

The general supervision of the work as regards attendances, collection of contributions, etc., continues to be efficiently carried out by Miss C. Smith, one of the Council's Women Inspectors.

Dental treatment is also provided at the voluntary clinic, which is held at the St. Pancras School for Mothers, *see page 28*.

The Centres held in connection with the University College and Royal Free Hospitals are also able to refer cases needing dental treatment to the Dental Departments of their own Hospitals.

**CLINIC FOR SICK MOTHERS, AND CHILDREN UNDER SCHOOL AGE.**—A weekly clinic is held by Dr. F. L. Provis at the St. Pancras Dispensary, 39, Oakley Square. To this patients are referred from the Town Hall, from the welfare centres, by the health visitors, etc.

During 1925 new cases under five years of age numbered 211, ailing mothers 30, and expectant mothers (new cases) 58. The total attendances at this clinic were 483 of children under five, 137 of ailing mothers, and 116 of expectant mothers. The corresponding figures for the Dispensary as a whole (including Dr. Provis' clinic, but not the tuberculosis department) were:—children under five: new cases, 667; attendances, 2759; ailing mothers and expectant mothers: new cases 95; attendances 269.

The Dispensary Resident Medical Officer also made 483 home visits to sick children under five.

The Medical Officer of the above-mentioned Special Clinic is paid by the Borough Council. He is assisted by a Nurse (half-time), who is paid from voluntary funds. During the year the Nurse made 737 visits to the homes of children under five. The other work of the Dispensary amongst women and young children is supported by funds from voluntary sources, and is also subsidised by the Ministry of Health.

**SUPPLY OF FOOD TO MOTHERS, AND CHILDREN UNDER SCHOOL AGE.**—The Council continued during 1925 to make grants of milk, either free or at half-price, for the use of expectant and nursing mothers and children under school age. As a rule the grants were restricted to the last three months of pregnancy, and to children under three years of age.

The extent of the distribution of milk in 1925 is shown in the following figures:—

	Pints of Milk Granted Free.	Pints of Milk Granted Half-price.	Cost to Council.
1925.			£ s. d.
January... ..	7762	856	122 7 1
February... ..	7455	868	115 1 1½
March... ..	7580	1128	118 15 4
April... ..	6588	1102	89 4 9
May... ..	6121	788	81 8 9
June... ..	5283	706	70 8 6
July... ..	5226	720	69 16 6
August... ..	4754	710	63 17 3
September... ..	4736	774	64 0 9
October... ..	6040	904	94 13 6
November... ..	6438	883	100 12 2½
December... ..	7536	939	117 3 10
Total... ..	75519	10378	1107 9 7

At the end of 1924 there were 191 families in receipt of milk through the Council's scheme. 314 new families were added to the list of recipients during 1925, and at the end of 1925 there were 178 families in receipt of milk, etc.

The scale in use was based on weekly income, as follows:—

Number in Family.	After deduction of rent.	
	FREE.	HALF COST.
	£ s. d.	£ s. d.
1	0 13 0	0 15 0
2	1 0 0	1 5 0
3	1 4 0	1 10 0
4	1 8 0	1 14 0
5	1 12 6	2 0 0
6	1 16 0	2 5 0

Families in receipt of less income than that indicated in the table would be entitled to receive milk. The working of the scheme has been fully indicated in previous annual reports.

If there was any doubt as to the circumstances of a family, the case was investigated by Mr. H. G. West, who acted as Milk Inquiry Officer until October 24th, 1925, on which date he was appointed Temporary Sanitary Inspector. Since the date mentioned, cases have been investigated by the Women Sanitary Inspectors and Health Visitors.

**DINNERS FOR NECESSITOUS EXPECTANT OR NURSING MOTHERS.**—This work is organised by a voluntary committee, to the funds of which the Borough Council make an annual contribution of £50. The dinners are provided at a restaurant in Prince of Wales Crescent, Kentish Town, a special room being provided for this purpose. The mothers are recommended by the staff of the various Welfare Centres. In September a letter was received from the Chairman of the Committee in charge of this work, stating that, as the number of nursing and



expectant mothers applying for and receiving relief during the past year has decreased, they have arranged to transfer the work to the Committees of the Welfare Centres at Queen's Crescent and Grafton Road. The Committee had sufficient funds to carry on the work for some months, and they did not feel justified in applying to the Borough Council for a grant last summer. They hope that the grants (which the Council have contributed since 1921) will be held in abeyance, and renewed in case the need for further financial assistance should arise later.

**THE MAYORESS OF ST. PANCRAS HOME FOR SICK POOR CHILDREN.**—This is situated at "Avalon," 1, St. Alban's Road, and accommodates 18 children. The Borough Council makes an annual grant of £500.

The cases admitted are children under 5 years of age who are either convalescent after illness, or who are weakly, badly nourished, and need good food, fresh air and special care. At the beginning of the year 11 children were in residence. During the year 117 were admitted, and 14 were in residence at the end of the year. 114 were discharged during the year, after an average stay in the Home of 26½ days; of this number, 41 were in good health, 63 were much improved; 13 showed no marked improvement; but owing to infectious disease, several of these were discharged earlier than would otherwise have been the case. The chief conditions for which the children were admitted, included—General debility, anæmia, convalescence after measles, whooping cough, bronchitis, etc.

This home, like most small Institutions, is rather expensive to maintain, the average cost per child, per week during the past year being £2 5s. 10d. In fairness it must, however, be stated that on several occasions the number of children in the home was very small, owing to outbreaks of infectious disease, and this tends to make the cost per child unduly high.

Some difficulty has been experienced in finding sufficient suitable cases to occupy all the accommodation which is available: the fact that it is situated in the Borough also causing many mothers to hold the opinion that residence there does not constitute a "change of air." The question may probably arise as to what better use could be made of the home. That is a point of some difficulty, but if the necessary number of children cannot be regularly maintained some other use should be considered.

**DAY NURSERIES.**—The Council assists the three 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 total expenses are shared, as to one-half by the Ministry of Health, one quarter by the Council, and one quarter by voluntary funds. The three institutions are the Whitefield Day Nursery, 53, Whitfield Street, W. 1; the Kentish Town Day Nursery, Gospel Oak Grove, N.W. 5; and the Margaret Day Nursery, 44, Amptill Square, N.W. 1.

Particulars in regard to the day nurseries for the year ended 31st March, 1926, are as follows:—

—	Grant paid by Borough Council.	No. of Days Open.	Attendances.	Average per Day.
Whitefield Day Nursery	£ s. d. 140 10 7	218	6,117	28.1
Kentish Tn. Day Nursery	144 3 6	238	7,584	31.9
Margaret Day Nursery	120 14 6	251	4,643	18.5



**HOME HELPS.**—The St. Pancras Home Helps Committee provides domestic assistance for families when the mother is incapacitated through sickness or child-birth. The Borough Council makes an annual grant to the Committee of £150 for use in respect of maternity cases only.

During the past year 77 cases were dealt with, 36 being sickness and 41 maternity cases.

Three permanent helps were employed for 809 days.

Three temporary helps were employed for 208 days, and four emergency helps for 46 days. A total of 1,063 days of service.

The requests for the services of these women came from Nursing Associations and Midwives, Infant Welfare Centres, Medical Practitioners, the Town Hall Health Visitors, etc.

#### WIDOWS', ORPHANS' AND OLD AGE CONTRIBUTORY PENSIONS ACT, 1925.

The duties of the Local Authority in connection with the above Act are chiefly those specified in Section 6 (2).

The Local Authority for the County of London is the County Council; but under Section 41 (2) of the Act it is provided that the County Council may make arrangements with any Sanitary Authority whose area is wholly or partly within the County for the execution and performance of any of the powers and duties of the County Council under the Act.

The question was before the Council in July last, when it was pointed out that the organisation necessary already exists in the form of Maternity and Child Welfare Committees of the Borough Councils, and that the work is closely connected with the ordinary work now performed by those Committees.

It was decided that the London County Council be informed that the Borough Council are prepared to administer Section 6 (2) of the above-mentioned Act, which will come into force in January, 1926.

#### 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 were paid by the Council a fee of 1s. 6d. 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 1925 in St. Pancras is indicated by the following figures:—

	No. of cases nursed.	No. of home visits paid.
Central St. Pancras District Nursing Association ..	47	500
Metropolitan Nursing Association (St. Pancras cases) ..	52	903
Hampstead District Nursing Association (St. Pancras cases) ..	24	315
North London Nursing Association (St. Pancras cases)	12	134



## MIDWIFERY.

All the infants born in St. Pancras during 1925 are classified below for each Ward according to the manner in which the mothers were attended in their confinements:—

BIRTHS.	1	2	3	4	5	6	7	8	TOTAL.
A. Attended in their own homes by—									
Private Doctors ... ..	213	69	123	108	68	23	17	60	681
Private Midwives ... ..	197	188	112	144	23	20	8	28	720
Doctors from the Elizabeth Garrett Anderson Hospital ... ..	26	38	34	23	8	12	4	13	158
Medical Students from—									
University College Hospital	5	19	147	86	233	283	—	13	786
Royal Free Hospital ... ..	—	—	2	—	1	—	—	20	23
St. Bartholomew's Hospital	—	—	—	—	—	—	—	5	5
Midwives from—									
Middlesex Hospital ... ..	—	—	2	1	16	6	40	7	72
University College Hospital	—	—	2	1	4	6	23	100	136
Maternity Nursing Association, Myddleton Square ... ..	—	—	1	—	—	—	—	48	49
Maternity Nursing Association, Oakley Square Branch	16	16	53	38	60	22	3	3	211
B. Attended in Institutions—									
University College Hospital ... ..	—	—	—	—	—	—	189	—	189
Royal Free Hospital ... ..	—	—	—	—	—	—	—	758	758
Elizabeth Garrett Anderson Hos- pital ... ..	—	—	—	—	—	51	—	—	51
Lying-in Ward of St. Pancras House	—	—	—	—	—	235	—	—	235
Totals ... ..	457	330	476	401	413	658	284	1055	4074

Some of the births in the preceding Table recorded as having taken place in St. Pancras institutions were of infants the mothers of whom were not St. Pancras residents. On the other hand, a number of St. Pancras mothers gave birth to children in institutions situated outside the Borough.

In the following Tables the figures are given for 1925 relating to all St. Pancras women who were attended in their confinements, either at home or as in-patients, by the staff of various institutions situated either within or outside the Borough.

*Midwifery.**Attended at Home.*

Elizabeth Garrett Anderson Hospital (doctors) .. .. .	Cases.
University College Hospital (medical students) .. .. .	158
University College Hospital (midwives) .. .. .	786
Middlesex Hospital (midwives) .. .. .	136
Royal Free Hospital (medical students) .. .. .	72
St. Bartholomew's Hospital (medical students) .. .. .	23
Maternity Nursing Association, Oakley Square and Myddleton Square (midwives)	5
	260
	<hr/>
	1440

(or 37 per cent. of the total number of births).

*Admitted as In-patients.*

	Cases.
University College Hospital .. .. .	103
Royal Free Hospital .. .. .	135
Elizabeth Garrett Anderson Hospital .. .. .	13
St. Pancras House .. .. .	150
Middlesex Hospital .. .. .	142
Queen Charlotte's Maternity Hospital .. .. .	174
City of London Maternity Hospital .. .. .	55
Queen Mary's Hospital, Hampstead .. .. .	19
Other hospitals .. .. .	49
	840

(or 22 per cent. of the total number of births).

It will be seen from the above tables that there are a large number of institutions available for midwifery for St. Pancras women, and that considerable use is made of them. The majority of these institutions are situated in the south of the Borough, and in this area a very large proportion of the cases accept this treatment as out-patients. In the north of the Borough the out-patient hospital service is not so available, the result being that the majority of the cases are attended by medical practitioners or midwives. The following table illustrates this:—

*Cases attended at Home.*

Attended by	North (Wards 1—4).	South (Wards 5—8).
Medical Practitioners ..	513	168
Midwives (Private) ..	641	79
Institutions.. .. .	510	930

The Council subsidises the provision of midwifery for necessitous St. Pancras residents by paying a grant to institutions which attend these cases, either free or at a reduced charge. The grants are at the rate of 5s. for each approved case attended at the patient's own home, and £1 for each approved case admitted into the institution concerned.

Lists of the cases to be attended are supplied by the various institutions. Each case is investigated by the staff of the Maternity and Child Welfare Centre in whose area the patient resides. Attendance at the ante-natal clinic can thus in suitable cases be advised, and after the confinement the mother is urged to bring the baby to the Infant Consultations.

The following table gives particulars of the amounts paid to the various institutions for attending necessitous St. Pancras cases during 1925:—



## GRANTS FOR MIDWIFERY ATTENDANCE (NECESSITOUS CASES).

	£	s.	d.
Royal Free Hospital .. .. .	29	0	0
Elizabeth Garrett Anderson Hospital .. .. .	42	15	0
Maternity Nursing Association .. .. .	28	0	0
Queen Charlotte's Maternity Hospital .. .. .	65	0	0
City of London Maternity Hospital .. .. .	29	0	0
Middlesex Hospital .. .. .	81	15	0
	<hr/>		
	£275	10	0

The corresponding grants for the three previous years were £412 5s. 0d., £705 and £713 5s. 0d.

The considerable reduction for 1924 and 1925 is due to the investigation now made, which excludes cases not necessitous, or which are not residents of the Borough.

## GOVERNMENT GRANTS.

Government Grants were made during the year ended March 31st, 1926, in respect of Maternity and Child Welfare, as follows:—

	£	s.	d.
St. Pancras Borough Council .. .. .	6115	11	4
St. Pancras School for Mothers (Amphill Square) .. .. .	595	9	4
"                    "                    (Chalton Street) .. .. .	138	2	11
North St. Pancras School for Mothers .. .. .	98	16	1
Grafton Road Mothers' and Infants' Welfare Centre .. .. .	26	17	5
* Mary Ward Settlement School for Mothers .. .. .	34	0	8
Camden Town Mothers' and Infants' Welfare Centre .. .. .	100	7	6
Argyle Square Mothers' and Infants' Welfare Centre .. .. .	10	2	6
Caversham Road Mothers' and Infants' Welfare Centre .. .. .	290	16	6
South Highgate Mothers' and Infants' Welfare Centre .. .. .	53	8	5
Maternity Nursing Association (for Maternity and Child Welfare Centre) .. .. .	83	3	6
* Maternity Nursing Association (for extern Midwifery and Maternity Nursing) .. .. .	407	19	3
* University College Hospital (for Maternity and Child Welfare) .. .. .	877	19	5
"                    "                    (for Midwifery and Nursing) .. .. .	191	0	0
* Royal Free Hospital (for extern Midwifery and Maternity Nursing) .. .. .	83	0	0
*     "                    "                    (for Maternity and Child Welfare Centre) .. .. .	239	13	5
*     "                    "                    (in respect of the Marlborough Maternity Section) .. .. .	1021	8	8
St. Pancras Dispensary (Infant Clinic) .. .. .	276	1	4
Mayoress of St. Pancras Home for Sick Children .. .. .	575	0	0
Whitefield Day Nursery .. .. .	281	1	3
Kentish Town Day Nursery .. .. .	288	7	0
Margaret Club and Day Nursery .. .. .	241	8	11

\* Including expenditure on work amongst residents outside St. Pancras.

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

The number of cases of the compulsorily notifiable infectious diseases that have been notified during the year is shown in the following table, where they are also classified according to ages. The figures have not been corrected for any subsequent revision of the 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. Scarletina or Scarlet Fever .. ..	651	8	196	257	109	54	27	—	
3. Diphtheria and Membranous Croup ..	704	11	241	226	111	54	61	—	
4. Typhus Fever .. .. .	—	—	—	—	—	—	—	—	
5. Enteric or Typhoid Fever .. .. .	16	—	2	—	—	5	8	1	
6. Fever, Simple or Continued .. .. .	—	—	—	—	—	—	—	—	
7. Relapsing Fever .. .. .	—	—	—	—	—	—	—	—	
8. Puerperal Fever .. .. .	23	—	—	—	—	4	19	—	
9. Erysipelas .. .. .	117	3	7	6	2	10	76	13	
10. Cholera .. .. .	—	—	—	—	—	—	—	—	
11. Plague .. .. .	—	—	—	—	—	—	—	—	
12. Anthrax .. .. .	1	—	—	—	—	—	1	—	
13. Glanders .. .. .	—	—	—	—	—	—	—	—	
14. Hydrophobia .. .. .	—	—	—	—	—	—	—	—	
15. Cerebrospinal Meningitis .. .. .	7	2	4	1	—	—	—	—	
16. Anterior Poliomyelitis and Polioencephalitis	6	—	2	—	2	2	—	—	
17. Ophthalmia Neonatorum .. .. .	37	37	—	—	—	—	—	—	
18. Encephalitis Lethargica .. .. .	24	—	1	—	1	10	11	1	
19. Acute Primary Pneumonia .. .. .	231	15	53	23	9	18	98	15	
20. Acute Influenzal Pneumonia .. .. .	76	3	8	3	3	8	42	9	
21. Malaria .. .. .	6	—	—	—	—	2	4	—	
22. Dysentery .. .. .	1	—	—	—	—	1	—	—	
23. Trench Fever .. .. .	—	—	—	—	—	—	—	—	
24. Measles .. .. .	1233	61	454	570	73	48	27	—	
25. German Measles .. .. .	877	40	228	410	109	56	34	—	
26.* Tuberculosis	Pulmonary .. .. .	389	—	7	9	7	76	279	11
		Other Forms .. .. .	103	5	18	13	13	24	24
Totals .. .. .	4502	185	1221	1518	439	372	711	56	

\* Including all Primary Notifications made under the Public Health (Tuberculosis) Regulations, 1912, on Forms "A," "B," "C" or "D," and also cases first coming under notice by means of special Death Reports.



The following table gives the number of *notifications* of the notifiable infectious diseases received in each month of the year:—

MONTHLY NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED DURING 1925.

	1ST QUARTER.			2ND QUARTER.			3RD QUARTER.			4TH QUARTER.			Total.
	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	
Scarlet Fever ..	51	74	73	49	36	41	28	25	60	81	65	67	651
Diphtheria and Membranous Croup	57	62	78	40	62	52	57	31	73	91	55	46	704
Enteric Fever ..	—	—	1	1	1	1	4	4	1	—	—	3	16
Puerperal Fever ..	4	2	3	—	2	—	2	3	4	2	1	—	23
Erysipelas .. ..	14	7	10	13	9	10	11	8	9	7	6	13	117
Anthrax .. ..	—	—	—	—	—	—	—	—	1	—	—	—	1
Cerebrospinal Meningitis ..	—	1	—	—	1	—	1	1	1	—	1	1	7
Poliomyelitis ..	—	—	2	—	—	—	—	—	1	2	1	—	6
Ophthalmia Neonatorum ..	4	2	10	1	2	2	4	3	1	3	3	2	37
Encephalitis Lethargica ..	2	1	—	4	2	4	1	2	3	2	2	1	24
Acute Primary Pneumonia ..	17	20	25	18	18	20	9	6	13	13	30	42	231
Acute Influenzal Pneumonia ..	10	29	14	6	—	—	1	3	4	4	4	1	76
Malaria .. ..	2	—	—	—	1	—	1	—	—	—	1	1	6
Dysentery .. ..	—	—	—	—	—	—	—	—	1	—	—	—	1
Measles .. ..	42	79	207	170	106	65	87	45	32	71	57	272	1233
German Measles ..	52	55	196	229	157	84	37	24	13	13	4	13	877
Tuberculosis (Pulmonary) ..	34	29	45	23	28	43	31	23	47	33	21	32	389
Tuberculosis (Other Forms)	5	12	18	5	10	11	8	7	8	9	7	3	103
Totals ..	294	373	682	559	435	333	282	185	272	332	258	497	4502

The total number of cases of the compulsorily notifiable infectious diseases, namely, 4502, compares favourably with the corresponding figure for the previous year, when 7217 cases were notified, and with the average yearly number for the past 5 years, which is 5678. The decrease was principally due to the reduction in the number of cases of measles. Cases of scarlet fever and pneumonia were also less, the former showing a reduction of 108 and the latter of 117 cases as compared with the previous year.

There was no epidemic prevalence of either scarlet fever or diphtheria, the cases being fairly uniformly distributed throughout the year. Measles was somewhat prevalent during March, April and May, after which there was a fall which lasted until December. German measles was unusually prevalent, the total number of cases being 877. This is the highest number hitherto recorded in any year since the disease was made notifiable. One death occurred from this disease.

MONTHLY NUMBER OF CERTIFIED DEATHS FROM THE DANGEROUS INFECTIOUS DISEASES  
DURING 1925.

	1ST QUARTER.			2ND QUARTER.			3RD QUARTER.			4TH QUARTER.			Total.
	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	
Scarlet Fever ..	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria and Membranous Croup	4	6	3	4	1	2	—	2	2	—	5	5	34
Enteric Fever ..	—	—	1	—	—	1	—	—	1	—	—	—	3
Puerperal Fever ..	1	—	—	—	—	—	—	—	1	1	1	—	4
Erysipelas .. ..	1	1	1	1	2	1	2	1	—	—	1	1	12
Cerebrospinal Meningitis	—	—	—	1	2	—	—	—	—	—	—	1	4
Dysentery .. ..	—	—	—	—	—	—	—	—	1	—	—	—	1
Encephalitis Lethargica	1	—	—	1	—	3	—	—	1	1	1	2	10
Poliomyelitis ..	—	—	—	—	—	—	—	—	—	1	—	—	1
Measles .. ..	—	—	—	—	—	—	1	—	—	—	—	2	3
Tuberculosis (Pulmonary)	10	24	18	14	15	17	5	18	11	14	15	19	180
Tuberculosis (Other Forms)	4	4	12	2	4	3	3	4	5	5	2	3	51
Totals—Notifiable Infectious Diseases	21	35	35	23	24	27	11	25	22	22	25	33	303
Whooping Cough ..	12	15	9	7	11	7	2	3	2	1	1	1	71
Diarrhoea and Enteritis	4	4	6	2	3	3	8	7	6	4	6	4	57

The total number of deaths from all the notifiable infectious diseases was 303. This compares very favourably with the previous year, when 409 deaths occurred. Not a single death was registered as being due to scarlet fever, although 651 cases of this disease were notified. Deaths from diphtheria and whooping cough showed an increase; those from tuberculosis and measles a considerable decrease as compared with the previous year.



In the following table the number of notifications are set forth for the past 10 years! --

Diseases.	1916	1917	19 8	1919	1920	1921	1922	1923	1924	1925
Variola or Small-pox .. ..	—	—	—	10	—	—	1	—	1	—
Scarlatina or Scarlet Fever ..	448	246	332	558	863	1713	1156	487	759	651
Diphtheria and Membranous Croup	424	451	399	348	747	723	725	512	623	704
Typhus Fever .. ..	—	—	—	—	—	—	—	—	—	—
Enteric or Typhoid Fever .. ..	38	24	17	7	18	28	14	20	12	16
Fever, Simple or Continued ..	1	—	—	—	—	—	—	—	—	—
Relapsing Fever .. ..	—	—	—	—	1	—	—	—	—	—
Puerperal Fever .. ..	18	9	5	13	18	11	11	20	16	23
Erysipelas .. ..	120	126	121	134	126	87	118	92	108	117
Cholera .. ..	—	—	—	—	—	—	—	—	—	—
Plague .. ..	—	—	—	—	—	—	—	—	—	—
Anthrax .. ..	1	—	1	—	—	—	—	—	—	1
Glanders .. ..	—	—	—	—	—	—	—	—	—	—
Hydrophobia .. ..	—	—	—	—	—	—	—	—	—	—
Cerebrospinal Meningitis ..	23	25	13	10	6	4	7	2	3	7
Anterior Poliomyelitis and Polio- encephalitis	9	1	1	4	2	4	1	6	5	6
Ophthalmia Neonatorum .. ..	38	31	40	39	69	101	59	51	52	37
Encephalitis Lethargica .. ..	..	..	..	3	11	8	5	5	45	24
Acute Primary Pneumonia .. ..	..	..	..	86	142	242	384	286	293	231
Acute Influenzal Pneumonia ..	..	..	..	213	108	99	189	40	131	76
Malaria .. ..	..	..	..	98	58	18	13	13	1	6
Dysentery .. ..	..	..	..	6	4	1	3	3	—	1
Trench Fever .. ..	..	..	..	1	—	—	—	—	—	—
Measles .. ..	1855	3681	2144	1034	3093	1149	3728	327	4332	1233
German Measles .. ..	381	609	311	268	195	81	253	134	270	877
Chicken-pox .. ..	..	..	401	..	..	..	..	..	..	—
Tuberculosis { Pulmonary ..	735	825	1034	799	684	546	534	440	447	389
Tuberculosis { Other Forms ..	138	169	203	206	132	153	148	137	119	103
Totals .. ..	4229	6197	5022	3837	6277	4968	7349	2581	7217	4502

The notifications of, and deaths from, the notifiable infectious diseases are classified in the following table according to the Wards in which they occurred:—

INFECTIOUS DISEASES.	NOTIFICATIONS.									DEATHS.									
	WARD.								Whole Borough.	WARD.								Whole Borough.	
	1	2	3	4	5	6	7	8		1	2	3	4	5	6	7	8		
1. Variola or Small-pox .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2. Scarletina or Scarlet Fever .. ..	116	101	100	81	85	49	40	79	651	—	—	—	—	—	—	—	—	—	—
3. Diphtheria and Membranous Croup	118	77	156	110	99	67	19	58	704	4	4	9	3	6	3	2	3	—	34
4. Typhus Fever .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Enteric or Typhoid Fever .. .. .	3	1	1	2	2	3	3	1	16	—	—	—	—	—	—	1	2	—	3
6. Fever, Simple and Continued .. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7. Relapsing Fever .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. Puerperal Fever .. .. .	4	3	4	5	2	4	1	—	23	—	1	—	2	—	1	—	—	—	4
9. Erysipelas .. .. .	21	15	20	10	16	18	3	14	117	2	3	3	—	3	—	1	—	—	12
10. Cholera .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11. Plague .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. Anthrax .. .. .	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—
13. Glanders .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
14. Hydrophobia .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
15. Cerebrospinal Meningitis .. .. .	2	2	1	2	—	—	—	—	7	2	—	—	1	—	—	—	1	—	4
16. Anterior Poliomyelitis .. .. .	1	—	1	—	—	1	2	1	6	—	—	—	—	—	—	—	1	—	1
17. Ophthalmia Neonatorum .. .. .	2	7	3	1	6	8	5	5	37	—	—	—	—	—	—	—	—	—	—
18. Encephalitis Lethargica .. .. .	8	1	5	2	2	3	—	3	24	3	2	—	1	2	1	—	1	—	10
19. Acute Primary Pneumonia .. .. .	26	17	45	29	31	31	8	44	231	—	—	—	—	—	—	—	—	—	—
20. Acute Influenzal Pneumonia .. .. .	13	15	14	9	13	4	1	7	76	—	—	—	—	—	—	—	—	—	—
21. Malaria .. .. .	1	—	1	—	1	2	—	1	6	—	—	—	—	—	—	—	—	—	—
22. Dysentery .. .. .	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	1	1
23. Trench Fever .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
24. Measles .. .. .	240	74	253	122	177	141	24	202	1233	—	—	—	1	1	—	—	1	—	3
25. German Measles .. .. .	130	96	124	116	142	113	19	137	877	—	—	—	—	—	1	—	—	—	1
26. *Tuberculosis, Pulmonary .. .. .	42	33	62	44	63	38	28	71	389†	19	16	30	19	32	17	11	32	—	180‡
"    Other Forms .. .. .	17	15	15	15	17	9	6	8	103‡	8	2	10	11	8	6	3	3	—	51

\* Including all primary notifications made under the Public Health (Tuberculosis) Regulations, 1912, on Forms A, B, C, or D, and also cases first coming under notice by means of Special Death Reports or Transfers.

† Including 8, the home addresses of which were not known.

‡ " 1, " " " " 4, " " " "



## SMALL-POX.

No case of this disease was notified in the Borough during the year.

A number of contacts were kept under observation for various periods. These were usually persons who had arrived from abroad, and Small-pox had occurred on the ship during the voyage. Such contacts are kept under observation during the incubation period, and are also urged to be vaccinated, unless this has recently been done.

## VACCINATION.

The following table is drawn up from returns, kindly supplied by the Clerk to the Guardians, in respect of children whose births were registered in the Parish of St. Pancras from January 1st to December 31st, 1924 :—

## VACCINATIONS.

1st January to 31st December, 1924.

	Number.					Percentage of Births registered.				
	North.	East.	West.	South.	Whole Borough	North.	East.	West.	South.	Whole Borough
Births registered ... ..	883	1112	932	1471	4398	100·0	100·0	100·0	100·0	100·0
Dead, unvaccinated ... ..	40	62	53	52	207	4·5	5·6	5·7	3·5	4·7
Successfully vaccinated ... ..	443	565	495	751	2254	50·2	50·8	53·1	51·1	51·3
Had smallpox ... ..	—	—	—	—	—	—	—	—	—	—
Insusceptible of vaccination ... ..	—	2	2	6	10	—	0·2	0·2	0·4	0·2
Received certificate of conscientious objection	360	316	281	357	1314	40·8	28·4	30·2	24·3	29·9
Postponed by medical certificate	3	19	23	20	65	0·3	1·7	2·5	1·4	1·5
Moved to known address in other districts	11	84	14	166	275	1·2	7·6	1·5	11·3	6·3
Lost sight of by removal ... ..	21	54	48	109	232	2·4	4·9	5·1	7·4	5·3
Unvaccinated and not accounted for in previous columns	5	10	16	10	41	0·6	0·9	1·7	0·7	0·9

The corresponding figures for the past ten years are as follows :—

Year.	Births.	Successfully Vaccinated.	Per cent.	Conscientious Objections, and Children otherwise escaping Vaccination.	Per cent.
1915	4536	1587	35·0	1205	26·6
1916	4322	1594	36·9	1179	27·3
1917	3664	1581	43·1	1014	27·7
1918	3338	1281	38·4	932	27·9
1919	3874	1733	44·7	1155	29·8
1920	6086	2693	44·3	2118	34·8
1921	5102	2085	40·9	1934	37·9
1922	4881	2260	46·3	1775	36·4
1923	4682	2491	53·2	1444	30·8
1924	4398	2254	51·3	1355	30·8

## SCARLET FEVER.

651 cases were notified during the year; but of this number 100 were subsequently reported by the hospital authorities not to be suffering from this disease. The actual number of cases was therefore 551, equal to an attack rate of 2·6 per 1,000 of population. During the preceding 5 years the average yearly number of cases was 928, the figures, therefore, for the past year show that the disease was very much less prevalent.

Of the 100 cases which were incorrectly diagnosed, 53 were notified by Medical Officers of hospitals and other institutions, and 47 by general practitioners.

I have also to report the fact that this is the first year in the records of the Borough in which not a single death occurred from this disease. During recent years Scarlet Fever has undoubtedly been of a milder type, but even so, the fact that 551 cases were treated without a single fatality is highly creditable to the hospital authorities.

The following table gives particulars as to the prevalence and fatality of this disease during the past 10 years, the figures being corrected for errors in diagnosis:—

Year.	No. of Cases.	Case rate per 1,000 of population.	No. of Deaths.	Death rate per 1,000 of population.	Case Mortality per cent.	Percentage of Cases removed to Hospital.
1916	404	2·0	8	0·04	2·0	96
1917	224	1·2	4	0·02	1·8	97
1918	289	1·6	7	0·04	2·4	96
1919	516	2·3	5	0·02	1·0	96
1920	808	3·5	11	0·05	1·4	96
1921	1649	7·7	7	0·03	0·4	96
1922	1102	5·2	20	0·02	1·8	99
1923	425	2·0	3	0·01	0·7	99
1924	658	3·0	12	0·05	1·8	98
1925	551	2·6	0	0·00	0·0	98

Of the 651 cases notified, 639, or 98·2 per cent., were removed to hospital.

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

17 such cases occurred during the year. Four cases were in one house and one in each of thirteen other houses.

Special inquiries are made into these cases, with the object of discovering any possible source of infection.

## DIPHTHERIA.

This disease was rather more prevalent than during the previous year and the case mortality was also higher. 704 cases were notified; but of this number 141 (equal to 20·3 per



cent.) were subsequently reported by the hospital authorities not to be suffering from this disease. The actual number of cases was, therefore, 563, equal to an attack rate of 2·6 per 1,000 of population.

During the preceding 5 years the average yearly number of cases was 570; the figures, therefore, for the past year practically correspond with this average. Of the 141 cases which were incorrectly diagnosed, 69 were notified by Medical Officers of hospitals or other institutions, and 72 by general practitioners.

The number of deaths certified during the year as being due to Diphtheria was 34, equal to a death-rate of 0·16 per 1000 of population, and a case mortality of 6·0 per cent. of actual cases.

The following table gives particulars as to the prevalence and fatality of this disease during the past 10 years, corrected for errors in diagnosis:—

Year.	No. of Cases.	Case rate per 1,000 of population.	No. of Deaths.	Death rate per 1,000 of population	Case mortality per cent.	Percentage of cases removed to hospital.
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
1921 ...	657	3·1	51	0·24	7·8	98
1922 ...	612	2·9	44	0·21	7·2	98
1923 ...	399	1·9	20	0·09	5·0	98
1924 ...	505	2·3	22	0·10	4·4	99
1925 ...	563	2·6	34	0·16	6·0	98

Of the 704 cases notified, 692 (98·3 per cent.) were removed to hospital. 685 were admitted to Metropolitan Asylums Board Hospitals, and 7 cases to other hospitals.

*Return Cases.*—This term is applied to cases of Diphtheria occurring in the same house within 28 days of the return from hospital of a previous case.

12 cases of this description occurred during the year. Two cases were in one house and one in each of ten other houses.

#### TYPHOID OR ENTERIC FEVER.

Sixteen cases were notified during the year; but, on further investigation, 5 of these were found to have been incorrectly diagnosed. The actual number of cases was, therefore, 11.

During the preceding 5 years, the average yearly number of cases was 14·4; the figures, therefore, for the past year are below the average.

Based on bacteriological examination, 6 cases were reported to be suffering from Typhoid and 5 from Paratyphoid fever. Three of the cases proved fatal. With reference to the source of infection, in one case oysters had been eaten, another had been staying at the sea-side, and another touring the Continent, during the incubation period. Two of the cases were hospital nurses, and another had been an in-patient of a hospital for several months prior to the onset of the illness. In the remaining cases no probable source of infection could be discovered.

The following table gives particulars as to the prevalence and fatality of this disease during the past 10 years, corrected for errors in diagnosis:—

Year.	Number of Cases.	Number of Deaths.	Case Mortality per cent.
1916 ..	29	5	17
1917 ..	17	5	29
1918 ..	11	5	45
1919 ..	7	2	29
1920 ..	14	1	7
1921 ..	26	2	8
1922 ..	9	1	11
1923 ..	14	1	7
1924 ..	9	2	22
1925 ..	11	3	27

#### TUBERCULOSIS.

The number of cases of tuberculosis notified during the year is given 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 4th January, 1925, to the 2nd January, 1926 (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 ..	—	1	5	2	11	21	52	50	40	23	2	207	267	—	—	—	—	—	77	159	35	131
	Females	—	2	4	5	16	26	29	29	21	10	5	147	198	—	—	—	—	—	43	109	13	71
Non-pulmonary	Males ..	2	6	6	3	6	5	2	6	2	1	3	42	50	—	1	2	3	4	2	15	2	11
	Females	2	6	2	6	6	5	3	4	3	1	1	39	50	—	2	—	2	2	3	12	—	19
TOTALS .. ..	4	15	17	16	39	57	86	89	66	35	11	435	565	—	3	2	5	6	125	295	50	232	

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	65 and upwards.	Total.	
Pulmonary	Males ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Females	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Non-pulmonary	Males ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Females	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS .. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

Age Periods.	Cases not Notified—Information obtained from Special Death Reports and by Transfer from other districts.											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	65 and upwards.		
Pulmonary	(Males ...)	—	3	—	—	—	2	6	5	3	3	2	24
	(Females ...)	—	1	—	—	—	—	1	5	2	—	2	11
Non-Pulmonary	(Males ...)	1	5	1	1	1	—	—	—	—	—	1	10
	(Females ...)	—	1	1	1	—	1	1	—	—	1	1	7
Totals ...	...	1	10	2	2	1	3	8	10	5	4	6	52

It will be seen that the total number of primary notifications was 440. In addition to this, there were 52 other cases which were not notified, but which first came under notice either by means of special death reports (36), or as transfers from other districts (16).

The total number of new cases during the year was therefore 492, equal to a notification rate of 2·28 per 1000 of population. During the preceding 5 years the average yearly number of cases was 688, equal to an average notification rate of 3·09 per 1000 of population. Of the total 492 new cases which came to knowledge during the year, 389 were suffering from pulmonary tuberculosis, and 103 were non-pulmonary in character, equal to notification rates of 1·8 and 0·48 respectively per 1000 of population.

One of the most satisfactory features of the public health of the Borough during recent years has been the steady fall year by year in the number of notifications of cases of this disease.

In the following table all the cases occurring during the year are classified for age and sex :—

TOTAL NOTIFICATIONS DURING 1925.

Ages.	Pulmonary Tuberculosis.			Other forms of Tuberculosis.			Total, all Forms.
	Males.	Females.	Total.	Males.	Females.	Total.	
0—1 ..	—	—	—	3	2	5	5
1—5 ..	4	3	7	11	7	18	25
5—10 ..	5	4	9	8	5	13	22
10—15 ..	2	5	7	6	7	13	20
15—20 ..	11	16	27	7	6	13	40
20—25 ..	23	26	49	5	6	11	60
25—35 ..	58	30	88	2	4	6	94
35—45 ..	55	34	89	6	4	10	99
45—55 ..	43	23	66	2	3	5	71
55—65 ..	26	10	36	1	2	3	39
65 & upwards	4	7	11	4	2	6	17
Totals ..	231	158	389	55	48	103	492



## DEATHS FROM TUBERCULOSIS.

The deaths from all forms of tuberculosis during the year numbered 231, equal to a death-rate of 1·07 per 1000 of (civil) population.

Of this number of total deaths, 180 were due to pulmonary, and 51 from other forms of tuberculosis, equal to death-rates of 0·83 and 0·24 respectively per 1000 of population.

During the preceding 5 years, the average yearly number of deaths from Tuberculosis of all forms was 295, equal to an average death-rate of 1·36 per 1000 of population.

In the following table the deaths which occurred during the past year are classified as regards age and sex :—

## DEATHS FROM TUBERCULOSIS DURING THE YEAR 1925.

Ages.	Pulmonary Tuberculosis.			Other forms of Tuberculosis.			Total.
	Males.	Females.	Total.	Males.	Females.	Total.	
0-1 ..	—	—	—	1	2	3	3
1-2 ..	1	—	1	1	1	2	3
2-5 ..	—	—	—	5	3	8	8
5-10 ..	—	—	—	1	1	2	2
10-15 ..	—	2	2	3	—	3	5
15-20 ..	3	11	14	1	2	3	17
20-25 ..	9	7	16	2	3	5	21
25-35 ..	15	12	27	2	3	5	32
35-45 ..	28	17	45	5	2	7	52
45-55 ..	23	18	41	5	1	6	47
55-65 ..	19	4	23	1	2	3	26
65 & upwards	7	4	11	2	2	4	15
Totals ..	105	75	180	29	22	51	231

The following table gives particulars as to the prevalence and fatality of this disease during the past 10 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.
1916 ..	218387	735	138	873	340	83	423	3.36	0.63	3.99	1.55	0.38	1.93
1917 ..	218387	825	169	994	353	91	444	3.78	0.77	4.55	1.62	0.42	2.03
1918 ..	218387	1034	203	1237	493	82	485	4.74	0.93	5.67	1.85	0.37	2.22
1919 ..	218387	799	206	1005	268	73	341	3.66	0.94	4.60	1.23	0.33	1.56
1920 ..	218387	684	132	816	249	63	312	3.07	0.59	3.67	1.12	0.28	1.40
1921 ..	212900	546	153	699	250	54	304	2.56	0.72	3.28	1.17	0.25	1.43
1922 ..	212500	534	148	682	257	58	315	2.51	0.70	3.21	1.21	0.27	1.48
1923 ..	214400	440	137	577	211	61	272	2.05	0.64	2.69	0.98	0.28	1.27
1924 ..	214300	447	119	566	227	44	271	2.05	0.54	2.59	1.04	0.20	1.24
1925 ..	215900	389	103	492	180	51	231	1.80	0.48	2.28	0.83	0.24	1.07

In the following table the notification and death-rates are classified according to sex. The figures are based on the sex population as determined at the last Census (1921):—

	Notification rates per 1,000 Males or Females Living.			Death rates per 1,000 Males or Females Living.		
	Pulmonary.	Non-pulmonary.	Total.	Pulmonary.	Non-pulmonary.	Total.
Males ... ..	2.27	0.54	2.81	1.03	0.28	1.32
Females ... ..	1.38	0.42	1.80	0.66	0.19	0.85
Both Sexes ... ..	1.80	0.48	2.28	0.83	0.24	1.07

The table below shows the number of notifications and the number of deaths, together with the corresponding rates per 1,000 of population for each Ward of the Borough:—

TUBERCULOSIS (ALL FORMS).

Ward.	Notifications.		Deaths.	
	Number.	Rate per 1000 of Population.	Number.	Rate per 1000 of Population.
1	59	1.6	27	0.7
2	48	2.2	18	0.8
3	77	2.1	40	1.1
4	59	2.2	30	1.1
5	80	2.6	40	1.3
6	47	2.2	23	1.1
7	34	2.2	14	0.9
8	79	2.9	35	1.3
No address	9	—	4	—
Totals	492	2.3	231	1.1



## TUBERCULOSIS DISPENSARY SERVICE. DENTAL TREATMENT.

As the existing arrangements for the dental treatment of Dispensary patients suffering from tuberculosis had proved to be unsatisfactory, it was suggested that arrangements should be made for this work to be carried out by the dentists at the St. Pancras Dispensary—Messrs. Southcomb May, L.D.S. (Eng.), and A. J. Maurice, L.D.S. (Edin.).

Details of the proposed scheme were submitted to the Central Authorities, and in July notifications were received from the Minister of Health and the London County Council approving the arrangements proposed by the Borough Council for the dental treatment of cases of tuberculosis for the period ending 31st March, 1926, subject to the total cost not exceeding £100, and on the understanding that the arrangements will be reviewed by the Borough Council before the expiration of this period.

During the period the above arrangements have been in force dentures have been provided for 11 patients; in seven instances these were provided free of charge, in four cases the patients made contributions of from 10s. to £2.

## TREATMENT OF TUBERCULOSIS. X-RAY EXAMINATIONS AND REPORTS.

In July, 1924, the Borough Council accepted, subject to the sanction of the Minister of Health, the offer of the Middlesex Hospital to conduct X-ray examinations for a fee of 7s. 6d. per examination, which would include the supply of a print when desired. The Minister of Health and the London County Council were not prepared to approve of this arrangement, and desired the continuation of arrangements with the University College Hospital. That Hospital was prepared to resume the examinations for the Council, and, with regard to the question of payment, pointed out that the Ministry of Health had sanctioned the following fees:—(a) cases on which only a report is required, 7s. 6d.; (b) cases on which a report and a plate is required, 15s. The Council, therefore, recommended that arrangements be made with the University College Hospital to resume the X-ray examination of tuberculous patients referred to the Hospital by the Council's Tuberculosis Officer, on payment of the fees sanctioned by the Ministry of Health. The approval of the Ministry of Health and the London County Council were received and reported to the Borough Council in July, 1925.

## PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS.

Regulations are already in operation prescribing the treatment of persons affected with tuberculosis, for preventing the spread of the disease, and for the notification of particulars of cases of the disease to the Medical Officer of Health. The new regulations provide, as from the 1st January, 1925, that the Medical Officer of Health is to furnish to the County Medical Officer of Health quarterly statements to be compiled from the existing Register of Notifications.

Circular 549 has also been issued by the Minister of Health, urging the necessity for securing a greater measure of uniformity in the procedure of notification of tuberculosis, and a stricter compliance with the requirements of the regulations in each district.

## PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

These regulations, which came into force on 31st July, 1925, provide that "no person who is aware that he is suffering from tuberculosis of the respiratory tract shall enter upon any employment or occupation in connection with a dairy which would involve the milking of cows, the treatment of milk, or the handling of vessels used for containing milk." The Council may require any such person to discontinue his employment or occupation in that capacity.

## THE BOARDING-OUT OF CHILDREN FROM TUBERCULOUS HOMES.

On April 1st, 1925, a scheme was designed by the London County Council for (a) the boarding-out of children living in heavily infected and overcrowded homes, and also (b) for the



boarding-out of children who were being discharged from Sanatorium treatment, and whose homes were unsuitable or inimical to maintenance of health. Under this scheme :—

Recommendations for children to be sent away are sent by the Medical Officer of Health, accompanied by reports as to the condition of the infected person and as to the home circumstances.

Children accepted as suitable are sent away for a period of three to four months, the scheme being worked in co-operation with the Invalid Children's Aid Association.

The parents of children sent away are assessed as regards contributions by the Invalid Children's Aid Association.

In July, 1925, the scheme was extended to include "weakly" children living under conditions likely to subject them to infection, and also children, in suitable instances, whose parents were under treatment for tuberculosis. The duration of boarding-out was also extended, the children being kept away as long as the conditions in the home were unfavourable.

The scheme has proved very useful—it would doubtless be more extensively used in the absence of any assessment.

During the year 36 children have been boarded-out.

#### TREATMENT OF TUBERCULOSIS—CESSATION OF SUPERVISION.

During the year consideration was given to the fact that while much attention had, for a long period, been given to discovering and treating cases of Tuberculosis, no systematic provision had been made for a cessation of activities in respect of cases which could reasonably be regarded as cured.

There was also the additional factor, that the wastage of cases by death and untraced removal is less than the concurrent increase, so that if cases that can reasonably be regarded as cured continue to be supervised and reported upon, the dispensaries and Public Health Departments become overloaded.

The following proposals for the cessation of supervision were made after consultation between the County Council and the Ministry of Health :—

1. All cases wrongly diagnosed as tuberculous, and also cases in which the diagnosis after observation is not confirmed, are to be removed from the register.
2. (a) *Pulmonary cases* should be regarded as "arrested" when, for a period of 2 years, there have been no symptoms of tuberculosis and no signs of active disease, and as "cured" when this condition has been maintained for 5 years, that is for 3 years after the stage of "arrest" has been reached.
- (b) *Non-pulmonary cases* may be regarded as "arrested" as soon as there is reason to believe that the disease is unlikely to recur, and as "cured" when 3 years have elapsed without any signs or symptoms of active disease.

Cases reaching the stage of "cure" as above defined are to be discharged from dispensary supervision, and their names removed from the dispensary register.

The above procedure came into force on January 1st, 1925, and during the year 790 names have been removed from the register.



TUBERCULOSIS DISPENSARIES—HOME VISITS AND INQUIRIES.

In consequence of a report made by your Medical Officer of Health in 1924, the Council passed the following resolutions :—

- (a) That the necessary arrangements be made for the dispensary treatment of persons suffering from Tuberculosis to be carried out for the whole of the area of St. Pancras at the Dispensary, 39, Oakley Square, N.W. 1.
- (b) That the agreement with University College Hospital for the dispensary treatment of cases of Tuberculosis occurring in Wards 7 and 8 be not renewed after 31st March, 1925.
- (c) That notice be given for the determination of the agreement as to the occupation by the Council of a part of premises, 132, Malden Road, used as a branch dispensary.

During the year effect was given to the above resolution of the Council, the sanctions of the Ministry of Health and the London County Council having been duly received.

Home visits and inquiries, both as regards notified cases and contacts, were carried out by the Women Inspectors of the Town Hall staff, and by the two nurses attached to the dispensaries at Oakley Square and University College Hospital up to March 31st, 1925.

Since that date all visits and inquiries have been made by the Town Hall staff as the Nurse at the Oakley Square Dispensary is fully occupied owing to the additional consultations now held there.

The visiting work carried out by the above staff during the year in connection with Tuberculosis was as follows :—

Visits by Tuberculosis Officer	.. ..	189
,, Women Inspectors	.. ..	6,868
,, Dispensary Nurses (to March 31st only)	.. ..	325
Attendance of Women Inspectors at dispensaries	.. ..	535
Number of cases in which disinfection was carried out		150

The table on the opposite page gives a summary of the work carried out at the Tuberculosis Dispensaries during the year :—

TUBERCULOSIS DISPENSARIES.

	Tuberculosis Dispensary at St. Pancras Dispensary, 39, Oakley Square.					Branch Tuberculosis Dispensary at 132, Malden Road.					Tuberculosis Dispensary at University College Hospital.										
	Adults.		Under 15		Total.	Contacts included in Total.	Insured Persons included in Total.	Adults.		Under 15		Total.	Contacts included in Total.	Insured Persons included in Total.	Adults.		Under 15		Total.	Contacts included in Total.	Insured Persons included in Total.
	M.	F.	M.	F.				M.	F.	M.	F.				M.	F.	M.	F.			
Under observation January 1st pending diagnosis ...	20	36	29	8	93	19	39	7	6	9	8	30	16	6	—	—	—	—	—	—	
Examined for first time during the year ...	187	204	163	146	700	224	248	2	12	21	11	46	28	7	17	10	5	2	34	8	20
<b>Total</b> ...	<b>207</b>	<b>240</b>	<b>192</b>	<b>154</b>	<b>793</b>	<b>243</b>	<b>287</b>	<b>9</b>	<b>18</b>	<b>30</b>	<b>19</b>	<b>76</b>	<b>44</b>	<b>12</b>	<b>17</b>	<b>10</b>	<b>5</b>	<b>2</b>	<b>34</b>	<b>8</b>	<b>20</b>
Found to be suffering from:—																					
Tuberculosis { Pulmonary ...	121	80	1	1	203	5	144	1	4	—	1	6	1	2	12	1	—	—	13	—	—
Non-pulmonary ...	3	14	38	33	88	3	14	—	—	—	—	—	—	—	—	1	—	—	1	—	—
Not suffering from Tuberculosis ...	44	83	134	107	368	180	65	2	5	20	12	39	24	3	2	6	5	2	15	8	11
Under observation on December 31st pending diagnosis ...	28	39	5	1	73	31	27	4	6	7	6	23	13	3	3	2	—	—	5	—	4
Ceased attendance before completion of diagnosis ...	11	24	14	12	61	24	37	2	3	3	—	8	6	4	—	—	—	—	—	—	5

	39, Oakley Square.	132, Malden Road.	University College Hospital.		39, Oakley Square.	132, Malden Road.	University College Hospital.
Patients under supervision (excluding persons under observation or domiciliary treatment) on 31st December ...	489	67	210	Reports received from Insurance Practitioners re insured patients under domiciliary treatment during the year ...	55	2	8
Total number of attendances during the year—				Persons referred to affiliated hospital ...	—	—	7
Insured ...	1860	77	88	Consultations with medical practitioners at the homes of patients—			
Uninsured ...	2150	168	102	Insured ...	7	—	—
Persons placed under observation for the purpose of diagnosis during the year ...	339	21	1	Uninsured ...	3	—	—
Cases in which the period of observation exceeded two months ...	68*	15	—	Other visits paid by Tuberculosis Officers to the homes of patients ...	167	7	5
Insured persons under domiciliary treatment on December 31st ...	131	6	145	Visits by Dispensary Nurses or Health Visitors to the homes of patients for dispensary purposes ...	3406	126	115
				Specimens of sputum examined for dispensary purposes ...	951	59	39

\* 60 due to non-attendance.

Figures for Malden Road and University College Hospital Dispensaries are for 3 months ended 31st March only.



The following report on the clinical work carried out at the Dispensaries during the year has been furnished by the Tuberculosis Officer, Dr. Viney : —

*Tuberculosis Dispensary Report for 1925.*

In March, 1925, it was decided to concentrate all the St. Pancras cases of Tuberculosis at the Dispensary at 39, Oakley Square, and, in consequence, those who had previously attended University College Hospital and Malden Road were transferred to Oakley Square, and the Malden Road Dispensary was closed.

This has been found greatly to have facilitated the work in all ways, and has not proved inconvenient to the patients attending.

Nine Clinics are held weekly. Two mornings—on Mondays and Fridays. Five afternoons—on Mondays, Tuesdays, Wednesdays, Thursdays and Fridays. Two evenings—on Tuesdays and Thursdays. The average attendance per Clinic being 14.

New cases are obtained by various means :—

1. Sent up by local Practitioners.
2. Attend on their own account.
3. Transferred from Hospitals or Dispensaries as being St. Pancras residents.
4. Requested to attend as Contacts by the Tuberculosis Officer or Health Visitors.

These cases are kept under close observation until a diagnosis can be made, when, if proved to be tuberculous, they are recommended Institutional Treatment under the London County Council Scheme, and if non-tuberculous, are either discharged or kept under future supervision. When necessary cases are sent to the University College Hospital for X-ray examination and report.

Sputums are tested at the Dispensary, it being the practice to obtain 3 negative sputums before requiring X-ray in lung cases, the third sputum specimen being tested by some special means as the Antiformin method or the Doppelmethode.

Attempts are made to establish the diagnosis within a month of first seeing the patient, but in cases where it is obvious that ground is not being lost by so doing, this period is extended.

In suspicious cases, admission can be obtained to Brompton Hospital for diagnosis purposes if desired, and use is made of this assistance in a few instances.

The Dispensary being primarily for diagnosis and general supervision purposes, patients are encouraged to go to their private or panel doctor for any treatment required when they are at home; but to attend the Dispensary at regular intervals for examination. In the cases, however, where a patient has no panel doctor, and is not in a position to afford medical fees, treatment is given at the Dispensary, provided they are well enough to attend regularly; but if unable to do so, they are encouraged to seek assistance from the District (Poor Law) Medical Officer, or to enter the Highgate Hospital.

All established cases of Pulmonary Tuberculosis are sent to the Dental Surgeon at 39, Oakley Square to have such dental treatment done as is necessary, previous to their admission to Sanatorium, the arrangements being the Borough Council pays 5s. per patient for scaling, 5s. per tooth for stoppings, 5s. per patient for extractions, with 5s. extra if an anæsthetic is required, and £2 or £4 for single or double dentures. The patients who require artificial teeth are assessed by the Tuberculosis Care Committee and make contributions



according to their means. When extractions are required, the usual practice is to avoid too extensive extractions at each sitting, and to spread the work done over as long a period as possible, aiming at getting the mouth clear of diseased teeth before admission to Sanatorium, the dentures being fitted and supplied on their return.

*Special treatment.*—Artificial Sunlight and Finsen Light Treatment can be obtained at the London Hospital. Artificial Pneumothorax cases are sent to Brompton Hospital. Cases with Tuberculosis of the Larynx are referred to the Specialist who attends at 39, Oakley Square every Saturday morning.

*Work outside the Dispensary.*—All cases on notification are visited by the Health Visitor, and at least once by the Tuberculosis Officer. These visits are invaluable in assisting to control the spread of the disease, and in getting to know the needs of each patient. Where possible, patients are encouraged to occupy separate rooms, or at least separate beds, and bedding and beds are loaned for this purpose by the Borough Council to necessitous cases. Extra milk and eggs are supplied by the Borough Council on the recommendation of the Tuberculosis Officer, and Invalid Dinners can be supplied to those who are at a convenient distance to the Invalid Kitchen, 206, Seymour Street.

Outside assistance can be obtained for many necessitous patients from the various Charitable Associations.

Contact cases are encouraged to attend at the Dispensary for examination, and if the original patient has a positive sputum, they are examined periodically. School children contacts are seen at the Dispensary, and a report sent to the School Medical Officer classifying them :—

- (1) An unsatisfactory child whether contact or not.
- (2) An apparently healthy contact.
- (3) A contact that has not been examined.

Children who are contacts of cases who have positive sputums can be boarded out under the London County Council Scheme. This means of prevention of the spread of the disease has been found most helpful, and could be usefully extended to embrace delicate children of parents with Pulmonary Tuberculosis whose sputums are negative. Delicate children can be recommended for Open-air Schools. These schools are found most helpful, and could be increased in number and size.

Patients who return from Sanatorium fit for light work are referred to the Local Labour Exchanges for special consideration in accordance with the scheme for Employment of Tuberculous Persons instituted in June, 1925.

#### SANATORIUM AND HOSPITAL TREATMENT.

All cases recommended for institutional treatment are dealt with by the London County Council, which is the authority for the purpose for the Metropolis.

The accommodation for advanced cases, to which attention was directed a year ago, still remains inadequate. Such cases are usually the most dangerous from the point of view of infection, and the position cannot be regarded as satisfactory until institutional accommodation is available for every such patient who is willing to accept it.

The following table gives the number of cases of pulmonary tuberculosis notified



during each of the past four years, and the number and percentage for whom no institutional accommodation was available :—

Year.	Total number of cases notified.	No accommodation available for :	
		Number.	Percentage.
1922 ..	534	18	3 per cent.
1923 ..	440	24	5 „
1924 ..	447	46	10 „
1925 ..	389	47	12 „

#### TUBERCULOSIS CARE COMMITTEE.

The functions of this Committee were indicated in a circular issued by the Ministry of Health to be as follows :—“The primary duty of the Committee should be to consider the economic position of the family of every patient suffering from tuberculosis as soon as he comes within the purview of the dispensary scheme, and to render such advice and assistance as the circumstances of the case dictate, with a view to enabling the family to adjust their circumstances to the new conditions, to maintain their economic independence, and to derive the fullest possible advantage from the medical treatment prescribed. Certain kinds of assistance may be needed in particular cases, viz., additional food, change of air, clothing, better home conditions, more suitable occupation; the provision of financial or other assistance, when necessary, for the family of a patient who is under treatment in a residential institution, or temporarily for a patient and his family on his return home from such an institution. Where the necessity for financial assistance arises, it can be better provided through the agency of existing charitable or public organisations than from a fund administered by the Care Committee, and in such cases it should be the function of the Care Committee to bring the family into touch with the appropriate organisation. A subsidiary but important function is to undertake, on behalf of the London County Council, the assessment of charges made in respect of residential treatment afforded to children and to adults whose income exceeds a certain figure. It is important, however, to secure that the activities of Care Committees are not absorbed by the routine work falling under this head, to the detriment of the main functions which are mentioned above.”

The following particulars concerning the work of the Committee and cases dealt with during the year have been supplied by the Hon. Secretary, Miss Bibby :—

#### THE ST. PANCRAS TUBERCULOSIS CARE COMMITTEE.

##### *Report of the Hon. Secretary for the year 1925.*

This Committee has accomplished little beyond the routine work of assessment and of reference to the allied charities during the year 1925.

The meetings of the full Committee have been few, but the Sub-Committee has met regularly every week except during August. We are especially indebted to Mr. Neal, of the Red Cross, Mrs. Philipson, of the Invalid Children's Aid Association, Miss Hill, of the Charity Organisation Society, Miss Bell, of the School Care Committee, and Mrs. Gair, of the Infant Welfare Centres, for regular attendance at the Sub-Committee, as well as for much assistance in other directions.

As in previous years, the work has been hampered by lack of adequate clerical assistance and by lack of money. Mrs. Gair has very kindly given help every week, but even with this valuable assistance the clerical work has not been fully dealt with. Patients, both at home and in Sanatoria, respond amazingly to carefully written letters, which are a valuable adjunct to personal visiting.

The need for an emergency fund still exists (in the opinion of the Hon. Secretary), and it is to be regretted that the Ministry of Health and the London County Council discourage the holding of funds by Tuberculosis Care Committees. It should be added that some members of the Tuberculosis Care Committee would not concur with this opinion.



The Committee have again had before them many cases in which the need for employment for ex-patients was urgent. Nothing of note is being done in this connection in the London area, except by the Central Fund for the Industrial Welfare of Tuberculous Persons. There are several St. Pancras men in the workshop organised by this Fund, and further work of this kind for the unskilled and for women patients is urgently needed. The St. Pancras Committee considers that, not only workshops, but work centres are required to meet the varying needs of patients.

There is great need for a home for women patients who return from Sanatoria sufficiently restored for the moment to resume their old occupations, but still in need of more care than their crowded homes can provide. The provision of medical care in their own homes for those patients who are not eligible for Poor Law assistance, and are too poor to pay medical fees is still among our difficulties. It is understood that further provision for advanced cases is now available; but it is not yet possible to say that every advanced case willing to go into an institution, permanently or temporarily, can be granted a vacancy.

The care of the children of families in which there is a patient suffering from tuberculosis is engaging the attention of the Committee in a special degree. The boarding-out scheme of the London County Council was warmly welcomed and utilised as far as possible. Further care might be expended upon these children in their own homes with advantage.

Clothing for patients going into institutions, and also for those returning to active life, is greatly needed. A needle-work guild, or a clothing fund for the provision of both new and old clothing, would help very considerably.

To Mrs. Philipson, of the Invalid Children's Aid Association, acknowledgment of most valuable help must again be made. Mrs. Philipson's help in every part of the Committee's work is indispensable, and, once more, she has not only helped in the decision as to assessments, but has done the whole of the Committee's work as to the collection of the sums due.

To Mr. Neal, Mr. Leyland, and the Red Cross generally, we are grateful for the personal kindness with which their help is given.

There is much urgent work remaining for the Committee, and it is greatly to be desired that its activities should be developed.

From January 1st, 1925, to 31st December, 1925, the total number of cases considered was 495, and the number assessed 260.

Of the 260 cases assessed, 116 were assessed nil; 54 were assessed at from one shilling to ten shillings.

Suitable cases were referred to the under-mentioned agencies:—

- The Charity Organisation Society,
- The Guardians,
- The Invalid Children's Aid Association,
- The British Red Cross,
- The Labour Exchange, etc.

Ten children were referred to open-air schools.

Thirty-six children were sent away by the Invalid Children's Aid Association, under the London County Council scheme, the total number of cases referred to the Invalid Children's Aid Association being 49.



## PUERPERAL FEVER.

Twenty-three cases were notified during the year, but on further investigation two of these were found to have been incorrectly diagnosed. Another case (fatal) which had not been notified came to knowledge by means of the death returns. The actual number of cases was therefore 22. This equals an incidence rate of 5·7 per 1,000 births, and a case mortality of 18·2 per cent.

Of the 21 notified cases, 4 were primiparæ (women who had not previously had a child), and 17 were multiparæ (women who had previously had one or more children); 5 cases followed the birth of either dead or premature children, and 16 occurred after the birth of live children. In 4 instances some operative procedure or instruments were required at the birth.

The following table gives particulars of the cases which have occurred during the past 5 years, and also states by whom the confinements were attended:—

Year.	Number of Cases.	Number of Deaths.	Case Mortality per cent.	Number of cases occurring in Confinements attended by:—			
				Doctors.	Midwives.	Students.	In Hospital.
1921	*11	4	36·0	4	4	—	2
1922	11	3	27·0	5	3	2	1
1923	20	9	45·0	10	8	2	—
1924	†15	3	20·0	4	6	3	—
1925	‡22	4	18·2	11	4	6	—
Totals ..	79	23	29·1	34	25	13	3

\* 1 unattended at birth.

† 1 do. and 1 not notified.

‡ 1 not notified.

Additional institutional accommodation for the treatment of cases of this disease was provided during the past year. The following copy of a letter, which was sent to all medical practitioners in the Borough, gives particulars concerning this additional accommodation:—

Town Hall,

Pancras Road, N.W. 1.

Dear Sir or Madam,

*Puerperal Fever.*

I am directed by the Minister of Health to state that he has had under consideration the hospital accommodation available in London for cases of Puerperal Fever, and he is satisfied as a result of inquiries that further special facilities both for nursing and medical treatment are required, with a view to reducing the mortality from this disease.

Arrangements have accordingly been made by the Metropolitan Asylums Board whereby in future cases of Puerperal Fever will be concentrated, as far as practicable, in three of their institutions, namely, the North-Western Hospital, Hampstead, the Eastern Hospital, Homerton, and the South-Western Hospital, Stockwell. Special wards will be set aside for these cases, and special medical and nursing staffs provided. The Metropolitan Asylums Board, have also, with the Minister's approval, appointed an obstetric consultant at these three institutions.

Application for admission should be made to the Medical Officer of Health at the Town Hall, but, if urgent, the Metropolitan Asylums Board will admit the patient on the request of the medical practitioner in attendance.

Yours faithfully,  
G. SOWDEN,  
*Medical Officer of Health.*

### OPHTHALMIA NEONATORUM.

Thirty-seven cases were notified or otherwise came to knowledge during the year. This equals an incidence rate of 9·5 per 1,000 births. Of the 37 cases, 18 were regarded as slight, 14 of moderate severity, and 5 were severe. Thirteen cases were admitted to the special hospital provided for the treatment of cases of this disease—St. Margaret's, Leighton Road, N.W.; 24 cases were treated at home, the help of a visiting nurse being provided in 21 of these cases. In 4 cases the children were illegitimate. Recovery was complete in all the 37 cases.

The following table gives particulars of the cases which have occurred during the past 5 years, and also states who was in attendance at the birth:—

Year.	Number of Cases.	Rate per 1,000 births.	Number of cases occurring in Births attended by:—				
			Doctors.	Institution Midwives.	Private Midwives.	Students.	Hospital In-patient.
1921	101	21·2	15	25	15	26	20
1922	59	12·9	5	15	14	13	12
1923	51	11·7	8	3	15	9	16
1924	52	12·6	7	4	11	16	14
1925	37	9·5	6	7	4	13	7
Total ..	300	13·6	41	54	59	77	69

### CEREBRO-SPINAL MENINGITIS

(CEREBRO-SPINAL FEVER).

Seven cases were notified, but two of these were subsequently found to have been incorrectly diagnosed. Two other cases, notified to be suffering from Encephalitis Lethargica (sleepy sickness) were discovered at the post-mortem examinations to have died from Cerebro-Spinal Meningitis. There were therefore 7 actual cases of this disease during the year, and 4 of these proved fatal.

The following table gives the number of actual cases, and the case mortality during each of the past 10 years:—

Year.	Cases.	Deaths.	Death Rate per cent.	Year.	Cases.	Deaths.	Death Rate per cent.
1916	20	12	60	1921	4	3	75
1917	21	16	76	1922	6	6	100
1918	9	8	89	1923	2	2	100
1919	8	7	87	1924	1	1	100
1920	5	3	60	1925	7	4	57



## ACUTE POLIOMYELITIS AND POLIOENCEPHALITIS.

Six cases of poliomyelitis were notified during the year. It was subsequently found that two of the cases had been incorrectly diagnosed, and were not suffering from this disease. One patient died.

These affections are important, owing to the fact that long-continued treatment is necessary in order to limit, as far as possible, permanent crippling and physical deformity. During the year 1924 the Ministry of Health had under consideration the lack of facilities for dealing adequately with the after-effects of these and other "crippling" diseases, and desired information as to the prevalence of these conditions.

From the information obtained, it appeared to be necessary to make more adequate arrangements for the residential treatment of such cases, and the London County Council has now arranged for suitable cases to be admitted to Queen Mary's Hospital, Carshalton.

The following copy of a letter, which was sent to all medical practitioners in the Borough, gives particulars concerning this additional accommodation :—

PUBLIC HEALTH DEPARTMENT,  
TOWN HALL,  
PANCRAS ROAD, N.W. 1.

## POLIOMYELITIS.

Dear Sir or Madam,

The London County Council has recently considered the question of dealing effectively in residential institutions with the later and more chronic stages of this disease, with a view to limiting, as far as possible, permanent crippling and physical deformity. Arrangements have now been made for the treatment of cases either entering upon the second stage of the disease (deemed for this purpose to commence 3 months after onset) or being discharged from a general hospital after undergoing correctional operation. Recommendations for the treatment of these cases must be made on special forms which may be obtained on application. Assessments will be made for each case on the same principles as obtain in respect of tuberculous children. The work of assessment and the collection of the contributions will be undertaken by the Invalid Children's Aid Association. The in-patient treatment is being provided at Queen Mary's Hospital, Carshalton.

Yours faithfully,

G. SOWDEN,  
*Medical Officer of Health.*

## ENCEPHALITIS LETHARGICA.

This is commonly termed "Sleepy Sickness;" it should be noted, however, that it is a totally different disease to the tropical malady known as "Sleeping Sickness." The popular term is an unfortunate one, as it tends to confuse the two diseases. Twenty-four cases were notified during the year. Owing to an error in the date, one fatal case should have been included in the notifications for the previous year; the death was included. On further investigation eight cases were found to have been incorrectly diagnosed. Three other cases were discovered which had not been notified. The actual number of cases was therefore 18.

Ten deaths were registered during the year as being due to this disease. Five of these relate to cases either not notified or notified in previous years. One was a visitor from abroad who died in hospital. The death cannot be transferred, although he was not a resident and the case had not been notified here.

This disease has been increasingly prevalent during recent years, and its importance is due to the fact that it is not only associated with a high death rate, but that many who recover suffer from physical weakness or mental or moral degeneration, and these after-effects may develop long after apparent recovery.

The following table gives particulars concerning the cases notified or otherwise coming to knowledge during the past 5 years, the number of deaths and death rate, and the present condition of those who recovered :—

ENCEPHALITIS LETHARGICA, 1921-1925.

Cases notified or otherwise discovered.	Number of deaths.	Death rate per cent.	Condition of Survivors.			Not traced.
			Complete recovery.	Slightly affected.	Seriously affected.	
77	29	37.6	16	11	17	4

PNEUMONIA.

During the year, 231 cases of acute primary pneumonia, and 76 cases of acute influenzal pneumonia, were notified.

All cases are visited, and, if desired by the Medical Attendant, a nurse is supplied to necessitous cases, the cost being defrayed by the Borough Council.

During the year, a nurse was provided in 62 instances, 997 nursing visits being paid.

Of the total 307 cases notified, 159 were admitted to various institutions and 148 were treated in their own homes.

Pneumonia is also a frequent complication of other diseases, but when originating in this way it is not notifiable. The total number of deaths therefore registered each year as being due to Pneumonia include other forms of this disease in addition to the notifiable types.

The following table gives particulars as to the prevalence of the notifiable forms of the disease, and the total deaths and death rates from all forms during the past 5 years :—

Year.	Notifications.		Total deaths all forms.	Death rate per 1000 of Population.
	Acute Primary.	Acute Influenzal.		
1921	242	99	173	0.81
1922	384	189	265	1.25
1923	286	46	201	0.94
1924	293	131	200	0.92
1925	231	76	204	0.94

In the early part of the year it was noticed that, in connection with several cases of pneumonia which had been notified, the patients were all men employed at the same factory. On visiting the premises I ascertained that work had only recently started, and that an experimental plant had been laid down to recover tin from scrap metal by a new process. In the course of the work both chlorine gas and phosgene were generated, and although at certain stages the workmen used gas masks, on several occasions accidental and unexpected escapes of these gases had occurred.



The matter was reported to the Chief Inspector of Factories at the Home Office and also to the Inspector under the Alkali Acts (Ministry of Health). These departments sent both medical and technical inspectors, and certain improvements were carried out. Numerous complaints had by now been received from occupiers of adjoining premises, as, owing to negligence on the part of workmen, on several occasions fumes had escaped violently and caused a decided nuisance in the neighbourhood. It was therefore suggested it was undesirable that such work should be carried on in a crowded district, and that an isolated site out of London was essential for such a process. This suggestion was finally accepted, and before the end of the year the premises were vacated and the plant removed.

### MEASLES AND GERMAN MEASLES.

These diseases are compulsorily notifiable in St. Pancras under Special Regulations sanctioned in 1920. All cases are notifiable by parents or guardians, but only the first case occurring in a house during an outbreak is notifiable by the medical attendant. An interval of two months since the previous case constitutes a fresh outbreak. From 1916 to 1919 inclusive these diseases were notifiable throughout the whole of England and Wales; but at the end of the year 1919 notification was abandoned by order of the Ministry of Health. In a few districts, St. Pancras being one, notification was retained by means of a special local regulation.

During recent times measles has tended to be prevalent in alternate years. In 1924 no less than 4,332 cases were notified, with 74 deaths. A diminished prevalence was therefore expected in 1925, and this anticipation proved correct, for only 1,233 cases were notified; the disease was also of a mild type, and only three deaths occurred.

For necessitous cases, where considered necessary, a nurse was provided. During the year 42 cases were nursed, 325 nursing visits being paid.

German measles was unusually prevalent, especially during March, April and May; 582 cases were notified in these three months out of a total of 877 cases during the whole year. One death occurred.

The cases were notified or reported as follows:—

			Measles.	German Measles.
Notified by medical practitioners	..	..	1022	781
"    parents or guardians	..	..	107	53
Otherwise discovered	..	..	104	43
			<u>1233</u>	<u>877</u>

The number of cases notified, the deaths, and the case mortality per cent. for the ten years during which measles has been notifiable, will be found in the following table:—

Year.	Cases Notified.		Deaths.		Case Mortality per cent.	
	Measles.	G.M.	Measles.	G.M.	Measles.	G.M.
1916	1885	381	42	—	2·2	—
1917	3681	609	118	1	3·2	0·2
1918	2144	311	75	—	3·5	—
1919	1034	268	15	—	1·5	—
1920	3093	195	65	—	2·1	—
1921	1149	81	23	—	2·0	—
1922	3728	253	107	—	2·9	—
1923	327	134	5	—	1·5	—
1924	4332	270	74	—	1·7	—
1925	1233	877	3	1	0·2	0·1

## OTHER NOTIFIABLE DISEASES.

*Malaria*.—Six cases were notified. In all cases the disease had been contracted abroad, but they were notified owing to a recurrence of the illness. Another case was notified, but this was one of "induced" malaria, in which the disease was deliberately given as a method of treatment for general paralysis. The effect in this case was beneficial, and the patient has been discharged from the institution and sent home.

*Dysentery*.—The notifiable forms of this disease are Amœbic and Bacillary Dysentery, and the infection in these cases has usually been contracted abroad. One case of the bacillary type occurred during the year and proved fatal—the patient was an Italian subject engaged in a restaurant.

*Anthrax*.—One case was notified. The disease is not common, no previous case having been reported since 1918. It usually occurs in persons who handle imported hair or hides. The case in question occurred in a man engaged in tanning goat skins, which had been imported from India and various parts of Africa. At the tannery in question great care is taken, and the employees have adequate medical supervision. This is well shown by the fact that only four cases have occurred during a period of 12 years, and during this period about eight million skins have been handled. The man made a good recovery and returned to the same work.

No cases of typhus, cholera, plague, glanders, or hydrophobia were notified.

## WHOOPIING COUGH.

This disease was very prevalent, especially during the months of January and February. The mortality was also great, the number of deaths recorded, 71, being, with one exception, the highest number during any of the past 10 years. 29 of the deaths were of children under 1 year of age. It is a curious fact that whooping cough is the one disease which is more fatal to girls than to boys. Since 1915 the total number of deaths from this cause is 477, and of this number 207 were boys and 270 girls.

The following table gives the number of deaths from Whooping Cough during each of the past ten years:—

Year.	Deaths.	Year.	Deaths.
1916 .. ..	39	1921 .. ..	38
1917 .. ..	27	1922 .. ..	29
1918 .. ..	80	1923 .. ..	28
1919 .. ..	7	1924 .. ..	46
1920 .. ..	60	1925 .. ..	71

## DIARRHŒA AND ENTERITIS.

Fifty-five deaths were recorded during the year from the above causes. Of this number 45 were of children under 1 year of age.

Deaths from these causes are most numerous in summer and early autumn, especially if the weather is hot and dry, and flies are very numerous. The principal victims are artificially fed babies, the infection being due to contamination of milk and other food by flies. Breast fed babies suffer very little from these affections.

The following table gives particulars concerning the deaths from the above causes, and the total infant mortality rate from all causes during the past 10 years:—



## DIARRHŒA AND ENTERITIS.

Year.	Number of Births Registered.	Number of Deaths from Diarrhœa and Enteritis.				Infantile Mortality— from all Causes— per 1000 Births.
		At all Ages.	Under 5.	Under 1.	Death-rate under 1 per 1000 Births.	
1916 ... ..	4530	72	56	41	9	85
1917 ... ..	3796	97	80	61	16	106
1918 ... ..	3318	56	47	37	11	102
1919 ... ..	3824	68	55	47	12	88
1920 ... ..	5934	54	44	37	6	73
1921 ... ..	4764	98	83	74	16	76
1922 ... ..	4559	47	37	31	7	74
1923 ... ..	4348	61	52	43	10	63
1924 ... ..	4112	63	58	52	13	74
1925 ... ..	3880	55	49	45	12	72

During the past 3 years the infantile death-rate in the Borough from this cause has been unduly high.

As stated above, the disease most frequently attacks artificially fed infants: those who are entirely breast fed seldom suffer from this affection. In the early part of the summer the attention of the medical practitioners who conduct the consultations at the Welfare Centres was drawn to this matter, and they were requested to co-operate and for a time concentrate on this work.

## INFLUENZA.

Since the serious epidemic of 1918, there have been several small recurrences, but none so extensive in distribution or so severe in character. During the past year the disease was not very prevalent, and the number of deaths recorded, 41, was about half the figure of the previous year.

The following table gives the number of deaths from Influenza during each of the past eight years:—

Year.	Deaths.	Year.	Deaths.
1918 .. ..	700	1922 .. ..	142
1919 .. ..	260	1923 .. ..	24
1920 .. ..	46	1924 .. ..	80
1921 .. ..	57	1925 .. ..	41

## SYPHILIS.

In the following table are given the age and sex distribution of all deaths certified during the year as due to (a) syphilis, (b) locomotor ataxy and general paralysis of the insane, which are late manifestations of the disease, and (c) aortic aneurysm, which is frequently caused by it:—

	MALES.					FEMALES.					Total Persons.
	Under 5 years.	5—15 years.	15 to 65 years.	65 and over.	Total Males.	Under 5 years.	5—15 years.	15 to 65 years.	65 and over.	Total Females.	
Syphilis ..	4	—	1	—	5	1	—	3	1	5	10
Locomotor Ataxy	—	—	3	—	3	—	—	—	—	—	3
General Paralysis of the insane..	—	—	8	—	8	—	—	3	—	3	11
Aortic Aneurysm	—	—	12	1	13	—	—	2	1	3	16
Totals ..	4	—	24	1	29	1	—	8	2	11	40

The following table gives the total number of deaths (male and female) from the syphilitic group of diseases during the past 5 years :—

Year.	Number of deaths from—								Total.
	Syphilis.		Locomotor Ataxy.		General Paralysis of the Insane.		Aortic Aneurysm.		
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	
1921 ..	10	8	5	—	8	2	8	—	41
1922 ..	3	9	6	—	18	5	5	2	48
1923 ..	7	1	6	—	10	2	12	3	41
1924 ..	11	4	2	1	20	2	5	1	46
1925 ..	5	5	3	—	8	3	13	3	40
Totals ..	36	27	22	1	64	14	43	9	216

### CANCER.

As a cause of death this disease is steadily increasing. It usually manifests itself during late adult life, and it has been stated that, as the average age at death has increased, and is now higher than it was, more people are living at an age at which Cancer usually develops.

During the past year 324 deaths were recorded as being due to this cause ; this is equal to a death-rate of 1·5 per 1000 of population.

This is the highest number of deaths from this disease hitherto recorded in the Borough during any year.

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 estimated population.
Males ..	167	1·64
Females ..	157	1·38
Total ..	324	1·50



The number of deaths and the death-rate from Cancer during the past 10 years are given in the following table:—

Sex.	1916.	1917.	1918.	1919.	1920.	1921.	1922.	1923.	1924.	1925.	Average of past 10 years.
Males ..	125	135	125	114	150	140	157	159	133	167	140
Females	142	146	144	131	149	150	145	160	165	157	149
Total ..	267	281	269	245	299	290	302	319	298	324	289
Rate per 1000 of population	1·22	1·29	1·23	1·12	1·28	1·36	1·42	1·49	1·36	1·50	1·33

#### Section IV.—OTHER SERVICES.

#### 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.
Anthrax ... ..	1	1	1	1
Scarlet Fever ... ..	638	622	655	655
Diphtheria ... ..	691	682	718	718
Enteric Fever ... ..	17	16	16	2
Erysipelas ... ..	72	72	72	1
Puerperal Fever ... ..	18	18	18	3
Encephalitis Lethargica	9	9	9	7
Cerebrospinal Meningitis	6	6	6	6
Poliomyelitis ... ..	1	1	1	—
Tuberculosis ... ..	150	150	148	128
Measles ... ..	11	11	8	8
Vermin and Scabies ...	71	71	84	78
Other Diseases (not notifiable) ... ..	248	248	250	48
Totals ... ..	1933	1907	1986	1655

On the following page is shown the number of articles disinfected or destroyed during the year on account of infectious disease or verminous condition:—

	Infectious Disease.		Verminous.	
	Destroyed.	Disinfected.	Destroyed.	Disinfected.
Beds, mattresses and palliasses	102	1970	20	35
Bolsters and pillows ... ..	50	4001	7	57
Sheets, blankets and counter-panes	26	5543	—	81
Rugs, mats, cushions, carpets, covers and curtains	29	864	8	7
Wearing apparel ... ..	9	2429	—	9
Books ... ..	—	157	—	—
Sundries ... ..	32	409	3	2
Totals ... ..	248	15373	38	191

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

#### CLEANSING STATION.

The amount of work carried out during the year is shown in the following table. The figures represent the number of attendances. At each attendance the person receives a bath, and the clothing is disinfected:—

		Men.	Women.	Children under 15.	Total.
St. Pancras Cases	{ Vermin ..	1028	26	4135	*5189
	{ Scabies ..	10	5	769	784
Other Cases ..	{ Vermin ..	59	2	827	888
	{ Scabies ..	—	—	147	147
Totals ..		1097	33	5878	7008

\* Includes 565 males and 8 females who had no home address.

The staff of the Disinfecting and Cleansing Station consists of a Foreman, a Stoker and General Assistant, and 2 Assistant Disinfectors; a Matron of the Cleansing Station and 2 Women Assistants.

#### THE MORTUARY.

Considerable and very necessary improvements have been carried out during the year. The old post-mortem room was small; there was no facility for hot water, and the lighting and ventilation were inadequate. The fittings were also of a very old type, insanitary and defective. It was decided to convert the large viewing room into a post-mortem room, and use the smaller adjoining room, which previously had been reserved for infectious cases, as a viewing room. The old and unsatisfactory post-mortem room could then be utilised, when necessary, for infectious cases for which purpose it was adequate.

Two new tables of modern type were provided in the post-mortem room, together with hand-basins, sinks and a supply of hot water. The lighting and ventilation were also improved. The building and equipment is now thoroughly satisfactory.



## INQUESTS AND POST-MORTEMS.

Number of inquests held during the year :—				
Males	..	..	..	196
Females	..	..	..	107
				303
Number of bodies received :—				
Males	..	..	..	117
Females	..	..	..	84
				201
Number of Post-mortems held :—				
Males	..	..	..	89
Females	..	..	..	54
				143

## INQUESTS.

In the following table will be found the causes of death, as certified by the Coroner ; they are also further classified into age-periods :—

Causes.	Under 1 year.	1—5 years.	5—15 years.	15—25 years.	25—65 years.	65 and over.	Totals.
<i>Natural—</i>							
Heart Disease ...	2	—	1	1	35	19	58
Pneumonia ...	8	2	—	—	3	3	16
Cerebral Hæmorrhage ...	2	—	—	—	7	4	13
Tuberculosis ...	—	—	—	—	6	1	7
Other causes ...	7	4	4	—	21	7	43
<i>Accidents—</i>							
Street Vehicles ...	—	4	12	5	18	13	52
Burns and Scalds ...	—	3	1	—	2	3	9
Railway ...	—	—	—	—	5	1	6
Fall ...	—	2	1	2	9	7	21
Other causes*	11	2	2	2	8	6	31
<i>Suicides†</i> ...	—	—	—	1	24	5	30
<i>Murder</i> ...	—	—	—	1	1	1	3
<i>Manslaughter</i> ...	—	—	—	1	—	—	1
<i>Open Verdict‡</i> ...	1	—	—	4	7	1	13
Totals ...	31	17	21	17	146	71	303

\* Includes 1 case of coal gas poisoning.

† .. 7 cases .. ..

‡ .. 3 .. ..

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

## SANITARY INSPECTION OF THE BOROUGH.

*Inspections.*—Altogether 66,541 inspections were made in 1925 by the staff of Inspectors and Visitors. These consisted of 32,477 initial inspections and 34,064 re-inspections.

Of these inspections, 36,702 were made by the District Sanitary Inspectors, 7,494 by the Sanitary Inspectors of Food and Food places, 3,567 by the Sanitary Inspector of Factories and Workshops, and 18,778 by the Women Sanitary Inspectors and Health Visitors.

The inspections made by each individual Inspector and Visitor are shown in Tables 10 and 11, on pages 117 and 118.

The work of the various classes of Inspectors and Visitors is set out in Tables 7, 8 and 9, on pages 113, 114 and 116.

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 27*), and by the staff of the Tuberculosis Dispensaries (*see page 61*); nor do they include the work of the disinfecting staff (*see page 74*).

*Notices served and result of service.*—3,762 intimation notices (comprising 7,876 items) were served by the Sanitary Inspectors during 1925. These were made up as follows:—

	District Inspectors.	Factory and Workshop Inspector.	Food Inspectors.	Women Inspectors.	Total.
In respect of Nuisances ... ..	5498	1	2	—	5501
In respect of the Tenement House By-laws	398	—	—	—	398
In respect of Breaches of Statutes in Factories, Workshops and Work-places	—	610	—	—	610
In respect of other Breaches of Statutes and By-laws	1359	—	8	—	1367
Totals ... ..	7255	611	10	—	7876

These intimations are classified in Tables 12, 13, 14 and 15, on pages 119 and 120.

1,282 Statutory notices (comprising 2,084 items) were served during 1925 and the early part of 1926, following non-compliance with these intimation notices. These are also classified in Tables 12, 13, 14 and 15, on pages 119 and 120.

The following table summarises the work of the Inspectors during each of the past 5 years:—

	1921	1922	1923	1924	1925†
Total Inspections	40526	40772	40437	38871	36702
<i>*District Inspectors.</i>					
Intimation Notices served (items)	8928	7798	6595	7941	7255
Total Inspections	6423	6909	7115	7369	7494
<i>Food Inspectors.</i>					
Intimation Notices served (items)	14	13	4	7	10
Total Inspections	3430	3225	3144	3606	3567
<i>Factory Inspectors.</i>					
Intimation Notices served (items)	622	512	434	471	611
<i>Women Inspectors.</i> —Total Inspections	19289	19911	15468	18731	18778

\* One additional district Inspector since October 21st, 1925.

† 2 Inspectors absent on account of illness for 35 weeks.



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.
114, Torriano Avenue ...	Roof defective ... ..	Jan. 28th...	Costs £1 1s.—Order 28 days.
17, St. George's Square...	Rooms dirty; water-closet basin and apartment foul; rainwater pipe and sink defective	.. 28th...	Order 28 days
17, ..	Water-closet and accessories not maintained in a proper condition of repair	.. 28th...	Fined 10s., costs £1 1s.
1, Wolcot Street ...	Ceilings damp; washhouse and water-closet roofs defective	.. 29th...	Fined 1s., costs £2 2s.
1, ..	Failing to provide portable metal dust bin ...	.. 29th...	{ Summonses withdrawn.
1, ..	Defective yard paving ... ..	.. 29th...	{ Notices complied with.
2, ..	Ceiling damp; roof and guttering defective; ceiling defective	Feb. 25th...	Fined 1s., costs £2 2s.
2, ..	Walls and ceilings dirty ... ..	.. 25th...	{ Summonses withdrawn.
2, ..	Failing to pave yard ... ..	.. 25th...	{ Notices complied with.
3, ..	Roof, guttering and ceiling defective ... ..	.. 25th...	Do.
11, ..	Walls and ceilings dirty and defective; rainwater pipe defective; ground outside water-closet in a foul condition	.. 25th...	Fined 1s., costs £1 1s.
11, ..	Failing to provide portable metal dust bin ...	.. 25th...	Summons withdrawn—notice complied with.
11, ..	Failing to repair yard paving ... ..	.. 25th...	Fined 1s., costs £1 1s.
12, ..	Ceilings damp, defective and dangerous; roof and guttering defective; ground outside water-closet foul	.. 25th...	Do.
12, ..	Failing to provide proper portable metal dust bin	.. 25th...	Withdrawn—notice complied with.
12, ..	Failing to repair yard paving ... ..	.. 25th...	Do.
154, Seymour Street ...	Rainwater pipe defective...	.. 25th...	Fined 1s., costs £1 1s.
24, Barclay Street ...	Drain ventilating pipe defective ... ..	.. 25th...	Costs £1 1s.—Order 14 days.
10B, Gospel Oak Grove ...	Walls and ceilings dirty and roof defective ...	Mar. 11th...	Costs £2 2s.—Order 14 days.
35, Queen's Crescent ...	Roofs and skylight defective ... ..	.. 11th...	Costs £2 2s.—Order 21 days.
21, Carlton Road... ..	Walls and ceilings dirty; roof of lobby and dust bin defective	.. 18th...	Costs £2 2s.—Order 14 days.
55, Fitzroy Road... ..	Failing to comply with nuisance order ...	Feb. 11th...	Fined 1s., costs £3 3s.
13, Drummond Street ...	Defective drain ... ..	April 27th...	Costs £1 3s.—Order 28 days.
23, 24, 46, 47 & 48, Barclay Street	Failing to comply with nuisance orders ...	.. 27th...	Adjourned <i>sine die</i> for enquiry as to Bankruptcy proceedings.
17, St. George's Square...	Do. ... ..	.. 30th...	Fined £1 14s., costs £1 1s.
15, Falkland Place ...	Failing to provide sufficient water-closet accommodation	.. 15th...	Costs £6 6s. Ejectment order obtained by owner.
52, Lutot Street ... ..	Defective back addition roof ... ..	Oct. 16th...	Fined 1s., costs £2 2s.
66, Chalton Street ...	Drain ventilating pipe, fresh air inlet and foul air outlet defective; interceptor without a stopper	Nov. 9th...	Costs £2 2s.—Order 28 days.
83, Leverton Street ...	Absence of proper and sufficient supply of water	.. 26th...	Costs £2 2s.—notice complied with.

*Under the London County Council (General Powers) Act, 1922.*

Situation of Property.	Offence.	Date of Hearing of Summons.	Result of Proceedings.
1, Wolcot Street ... ..	Room verminous ... ..	Jan. 29th ...	Summons withdrawn—notice complied with.
2, ..	Do. ... ..	Feb. 25th ..	Do.
3, ..	Do. ... ..	.. 25th ...	Do.
24, Barclay Street ...	Do. ... ..	.. 25th ...	Do.

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

*Offensive Trades.*—There is only one licensed place for such trades in St. Pancras, viz., a tallow-melter's in Tudor Place. Forty-six visits were made to these premises in 1925.

### REGISTERED TENEMENT HOUSES.

At the end of 1925 there were 2,365 such houses on the Register. Statistics as to the inspection of these and other houses will be found in Tables Nos. 7 and 13, on pages 113 and 119.

### UNDERGROUND ROOMS.

During the period of stringency in housing accommodation which has followed the war, a large number of underground rooms, the use of which for sleeping purposes had in former years been effectually forbidden under the Public Health (London) Act, 1891, and the Housing, Town Planning, &c., Act, 1909, have again become occupied as sleeping places. Except in a very few cases, it has not been found possible to secure the discontinuance of their use for this purpose. The reason for this is that the occupants have no place to go to in the event of their being ejected from the rooms in question.

There has been a similar difficulty in dealing with cases of overcrowding, the families concerned being often unable to obtain more accommodation.

### SMOKE PREVENTION.

During the year 280 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 .. .. .	499	4946
Voluntary drainage work .. .. .	846	3082
Drains of new buildings .. .. .	112	2286
	1457	10314
	1457	10314

*Drainage Register.*—The following is an analysis of the Drainage Register during 1925 :—

Plans deposited—Old Buildings under Notice .. .. .		180
"    "    Old Buildings, Voluntary .. .. .		184
"    "    New Buildings and Additions .. .. .		41
		405
Applications without Plans .. .. .		257
Total number of Applications and Plans .. .. .		662



## 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.—Empty and waste . . . . .	..	..	..	..	2
2.—Non-payment of Rates . . . . .	..	..	..	..	5
3.—Broken supply pipe . . . . .	..	..	..	..	1

56 Certificates were issued by the Medical Officer of Health, under Section 48, Sub-section 2, of the Public Health (London) Act, 1891, in respect of new houses, certifying that they have a proper and sufficient supply of water for sanitary and domestic purposes.

## CANAL BOATS ACTS.

The Canal Boats (Amendment) Regulations, 1925, came into force during the year. The responsibility of maintaining a canal boat in a habitable condition is now placed upon the owner, instead of the master.

During the year Inspector Auger examined 3 canal boats, which were registered for the occupation of 6 adults and 7 children, and were actually occupied by 5 adults and 1 child.

A weekly inspection of the canal and wharves has also been made.

## THE RAG FLOCK ACT, 1911.

No samples of rag flock were taken during the year.

## RAG AND BONE DEALERS.

New by-laws made by the London County Council for regulating the business of the above were sanctioned by the Ministry of Health in September, 1923, but certain portions were not to take effect for a period of 12 months. These portions became operative late in 1924, and special visits were made then and early in the past year to all persons engaged in this business, drawing their attention to the new regulations. A list of the names and addresses of all rag and bone dealers was given in the Report for 1924.

## RENT AND MORTGAGE INTEREST RESTRICTIONS ACT, 1923.

During the year 139 applications were received from tenants for certificates under this Act, and in 134 cases certificates were granted specifying the works required to be executed to put the dwelling houses into a good and tenantable state of repair.

In accordance with Section 5 of the Act, 22 applications were made by landlords for the "release" of certificates previously granted to their tenants, the necessary work to the premises having been carried out.

The nature of the work specified on the certificates embraced such items as repairing, cleansing, and decorating the walls and ceilings, and, in addition, many items not ordinarily dealt with by the sanitary inspectors, *e.g.*, repair of chimney flues, stoves, mantel boards, staircase rails and balusters, door furniture, window fasteners, floor boards, cupboard doors, etc.

In the majority of cases where an examination of premises by an inspector for the purpose of issuing a certificate under the Act was made, opportunity was also taken of serving, where applicable, Intimation Notices on the owners for the abatement of nuisances or for remedying breaches under the Public Health (London) Act, the London County Council (General Powers) Acts, By-laws, etc.

## 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) .. .. .	1155	265	—
Workshops (including workshop laundries and bakehouses) .. .. .	1874	280	—
Workplaces (other than Outworkers' premises included in Part 3 of this Report) .. .. .	505	65	—
Total .. .. .	3534	610	—

## 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 .. .. .	168	168	Nil.	Nil.
Want of ventilation .. .. .	3	3		
Overcrowding .. .. .	2	2		
Want of drainage of floors .. .. .	—	—		
Other nuisances .. .. .	118	118		
Sanitary accommodation—				
Insufficient .. .. .	13	13		
Unsuitable or defective .. .. .	89	89		
Not separate for sexes .. .. .	28	28		
<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) .. .. .	99	99		
Other offences (excluding offences relating to outwork, which are included in Part 3 of this Report)	89	89		
Total .. .. .	610	610	—	—

\* 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:—16 in respect of the making, etc., of wearing apparel, comprising the names of 63 outworkers (contractors) and 75 outworkers (workmen), and 1 in respect of upholstering, containing the names of 3 outworkers (workmen).

## 4.—REGISTERED WORKSHOPS.

Workshops on the Register (Sec. 131) at the end of the year.	Number.
(1)	(2)
Bakehouses .. .. .	102
Restaurant kitchens .. .. .	376
Laundries .. .. .	23
Domestic workshops .. .. .	—
Other workshops where women are employed .. .. .	482
Other workshops .. .. .	831
Total number of workshops on Register .. .. .	1814

## 5.—OTHER MATTERS.

Class	Number.
(1)	(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)—	
Notified by H.M. Inspector .. .. .	33
Reports (of action taken) sent to H.M. Inspector .. .. .	33
In regard to workshops where protected persons have been found to be employed (Public Health (London) Act, 1891, section 27) .. .. .	14
Underground bakehouses (s. 101):—	
Certificates granted during the year .. .. .	—
In use at the end of the year .. .. .	86

The number of factories, workshops and workplaces added to and removed from the register during 1925 was as follows :—

	Added to Register.	Removed from Register.	On Register at end of 1925.
Bakehouses—			
Workshop .. .. .	—	12	102
Factory .. .. .	11	—	57
Laundries—			
Workshop .. .. .	—	6	23
Factory .. .. .	—	2	10
Restaurant kitchens .. .. .	4	20	376
Other workshops where women are employed. . . . .	46	17	482
Other workshops .. .. .	37	22	831
Other factories .. .. .	51	14	774

The number of inspections that were made during 1925 were as follows:--

	Factory and Workshop Inspector.		Woman Sanitary Inspector.		Total.	
	Inspections.	Re-inspections.	Inspections.	Re-inspections.	Inspections.	Re-inspections.
Bakehouses. . . . .	309	224	—	—	309	224
Restaurant kitchens .. . . .	95	185	—	—	95	185
Laundries .. . . .	18	23	—	—	18	23
Domestic workshops .. . . .	—	—	315	105	315	105
Other workshops .. . . .	398	1176	—	—	398	1176
Other workplaces .. . . .	83	142	462	83	545	225
Other factories .. . . .	234	647	—	—	234	647
<b>Total .. . . .</b>	<b>1137</b>	<b>2397</b>	<b>777</b>	<b>188</b>	<b>1914</b>	<b>2585</b>

Bakehouses and restaurant kitchens are also referred to in Section V. (page 93).



## 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 1925. They are classified in the following Tables:—

## MEDICAL ROUTINE EXAMINATION OF ELEMENTARY SCHOOL CHILDREN IN ST. PANCRAS, 1925.

DEFECT.	Boys.				Girls.			
	Entrants.	Age 8.	Age 12.	Age 14.	Entrants.	Age 8.	Age 12.	Age 14.
Number examined	1965	1070	1591	1055	2036	1071	1556	1051
	Cases. *	Cases. *	Cases. *	Cases. *	Cases. *	Cases. *	Cases. *	Cases. *
Malnutrition ...	9 7	18 18	8 6	4 4	11 9	24 23	10 8	2 2
Skin disease ...	28 20	9 7	16 11	7 7	31 24	9 8	13 10	17 11
Defective teeth ...	— 523	— 227	— 239	— 190	— 562	1 229	— 207	— 204
Enlarged tonsils	171 51	69 20	49 12	28 9	190 53	68 20	51 17	48 17
Adenoids ...	132 71	41 27	15 10	6 3	137 72	35 21	8 4	1 —
Tonsils & adenoids	146 88	28 22	12 8	— —	149 99	40 28	12 12	— —
Other nose and throat	27 15	9 7	17 11	14 11	20 12	8 5	13 10	9 6
Enlarged glands	85 8	47 5	18 —	5 1	76 5	48 4	9 1	5 2
Eye disease ...	52 39	18 12	10 4	5 4	57 44	11 8	14 12	12 9
Defective vision...	— —	— 114	— 182	— 98	— —	— 121	— 165	— 101
Otorrhœa ...	33 25	9 6	12 11	10 9	46 34	19 12	20 15	5 4
Other ear disease	8 3	2 1	8 7	3 2	7 4	3 3	2 2	1 1
Defective hearing	18 11	14 8	19 12	17 12	12 5	13 6	13 8	9 4
Speech defects ...	11 1	1 —	1 —	3 —	4 1	— —	2 2	— —
Heart defects ...	36 5	28 2	26 5	16 2	34 4	23 4	44 14	22 3
Anæmia ...	58 19	28 17	45 21	9 4	60 28	25 14	51 32	28 12
Lung defects ...	101 46	29 11	16 1	10 3	104 40	32 17	8 4	4 —
Nervous system ..	3 1	6 2	1 —	4 2	8 1	6 4	6 4	10 5
Phthisis ...	5 1	10 2	6 1	2 1	3 —	4 1	5 1	1 1
Other T. B. disease	— —	— —	2 1	— —	— —	— —	— —	1 —
Rickets ...	18 7	8 5	4 —	— —	8 3	5 3	1 1	— —
Spinal deformities	6 4	9 7	9 7	4 3	2 2	9 6	28 16	17 15
Other deformities	8 3	5 —	11 5	9 1	6 3	4 2	11 1	9 2
Other defects ...	63 29	34 17	37 21	9 5	65 36	32 16	37 21	33 13
Number of children noted for treatment	788	428	499	313	848	445	473	358

NOTE.—Defects, however slight, are included under "Cases." Those severe enough to require treatment are shown under \*.

MEDICAL ROUTINE EXAMINATION OF ELEMENTARY SCHOOL CHILDREN IN ST. PANCRAS IN 1925.

Age Group.	Number examined.	Clothing and Boots.			Nutrition.				Cleanliness of Head.			Cleanliness of Body.			Teeth.			Vision.		
		Good.	Fair.	Poor.	Good.	Average.	Below normal.	Bad.	Clean.	Nits.	Pediculi.	Clean.	Dirty.	Pediculi.	All sound.	Less than four decayed.	Four or more decayed.	6/6 in both eyes.	6/9 in either or both eyes.	6/12 or worse in either eye.
Entrants—																				
Boys ..	1965	1514	444	7	355	1576	34	—	1893	69	3	1927	38	—	976	685	304	—	—	—
Girls...	2036	1508	527	1	380	1610	46	—	1843	175	18	2001	34	1	992	703	341	—	—	—
Age 8—																				
Boys...	1070	809	258	3	147	884	39	—	1044	24	2	1057	13	—	587	351	132	510	331	208
Girls...	1071	767	301	3	139	893	38	1	929	128	14	1035	35	1	526	434	111	537	321	199
Age 12—																				
Boys ..	1591	1200	384	7	194	1369	28	—	1549	42	—	1562	28	1	1025	505	61	972	329	286
Girls...	1556	1214	339	3	252	1270	34	—	1402	142	12	1518	36	2	1036	487	33	905	342	307
Age 14—																				
Boys...	1055	777	277	1	210	822	23	—	1019	31	5	1028	26	1	661	358	36	794	178	168
Girls...	1051	776	272	3	275	760	16	—	948	92	11	1036	15	—	640	379	32	700	148	201
Total	11395	8565	2802	28	1952	9184	258	1	10627	703	65	11164	225	6	6443	3902	1050	4328	1649	1369
% St. Pancras		75.1	24.6	0.3	17.1	80.6	2.3	—	93.2	6.2	0.6	98.0	2.0	—	56.5	34.3	9.2	58.9	22.5	18.6
% London		60.1	38.6	1.3	21.1	72.9	6.0	—	91.0	8.3	0.7	95.3	4.6	0.1	61.8	30.2	8.0	53.9	26.3	19.8



*Feeding of School Children.*

The County Medical Officer has also kindly furnished the following particulars in regard to the feeding of school children in St. Pancras during the year ended 31st March, 1926 :—

	Weekly average Number of children fed.	Number of meals provided.			Cod Liver Oil and Malt.
		Dinners.	Breakfasts.	Milk.	
<i>Ordinary Schools.</i>					
* <i>(a)</i> Necessitous ...	269	16118	—	36967	1147
† <i>(b)</i> Non-necessitous ...	625	9383	—	109038	4494
<i>Special Schools.</i>					
* <i>(a)</i> Necessitous ...	72	12631	—	2235	334
† <i>(b)</i> Non-necessitous ...	337	57912	—	17151	5
Totals ...	1303	96044	—	165391	5980

\* Free, or paying part of the full authorised charge.

† Paying the full authorised charge.

The schools were closed for normal holidays during the following periods :—

*Easter*—9th to 20th April, 1925.

*Whitsuntide*—1st June, 1925.

*Summer*—23rd July to 24th August, 1925, inclusive.

*Autumn*—26th and 27th October, 1925.

*Christmas*—24th December, 1925, to 11th January, 1926, inclusive.

## Section VI.—FOOD.

### (a) MILK SUPPLY.

#### COWSHEDS, DAIRIES, AND MILKSHOPS.

*Cowsheds.*—There are only two licensed cowsheds in the Borough; these can accommodate 30 cows, but were occupied during the year by only 16. This small number of cows only contribute a negligible fraction of the milk required in the Borough, practically the whole supply being brought in from farms in the country, either by rail or motor transport.

*Dairies and Milkshops.*—Thirty applications for registration under the Dairies, Cowsheds and Milkshops Orders were received during the year. Of this number, 19 were granted and 11 refused.

Six applications in respect of itinerant vendors were also received: of these, 3 were granted and 3 refused.

The following list gives particulars as to the purveyors of milk on the register at the end of 1925 :—

Number of purveyors of milk from retail milkshops on the register at the end of 1924 .. .. .	211
<i>Deduct</i> number removed from the register during the year 1925 ..	-17
<i>Add</i> number of purveyors registered by resolution of the Council during 1925 .. .. .	+19
Total number of purveyors of milk from retail milkshops on register at the end of 1925 .. .. .	<u>213</u>

In addition to the above, there were also on the register at the end of 1925 one person in respect of premises where a wholesale milk trade only is done, and 12 itinerant vendors without retail milkshops. The two cowsheds above mentioned also have retail milkshops attached to them, and these are included in the total of 213.

#### DAIRIES, COWSHEDS AND MILKSHOPS ORDER, 1885.

Legal proceedings were taken in the following cases against vendors carrying on the trade of purveyors of milk without being registered:—

Date of Hearing.	Address where offence committed.	Offence.	Result of Proceedings.
1925. 17th Dec.	6, Mornington Street, N.W.1	Carrying on the trade or business of a purveyor of milk without being registered	Dismissed with £1 1s. costs against Council.
Do.	8, Mornington Street, N.W.1	Do. do.	Withdrawn. —

With reference to the registration of purveyors of milk, it has always been the policy of the St. Pancras Borough Council to require registration, whether the milk was sold in sealed bottles or otherwise. In some boroughs this practice has not been followed, and sterilised milk in sealed (paper seal) stoppered bottles is allowed to be sold in any shop without registration. In addition to this, certain wholesale distributors of sterilised bottled milk have informed the proprietors of general shops that this milk can be sold by them without it being necessary to register as purveyors of milk. Several prosecutions have taken place with reference to this in various parts of the country, and Magistrates have differed in their decisions. On December 17th, 1925, proceedings were taken by the St. Pancras Borough Council against the proprietor of a general shop for selling sterilised milk in bottles without being registered. The case was dismissed with costs against the Council. The report of the Public Health Committee on this case is given below, as it clearly states the present position, and also states the views of the Council as to the amendment of the law they consider necessary:—

#### BOTTLED MILK.—PROSECUTION OF UNREGISTERED VENDOR.

We have considered the report from the Council's Solicitors as to a summons they conducted against a general shopkeeper for carrying on the business of a purveyor of milk without being registered, when the Magistrate dismissed the summons with one guinea costs against the Council. The milk sold was described as sterilised milk, and the *Magistrate held that the defendant was a purveyor of milk, but that, having regard to the*



*special treatment to which the milk had been submitted, it was not milk as contemplated by the Dairies, Cowsheds and Milkshops Order, 1885.* Having regard to the decision in this case, a summons against another person for a similar offence was withdrawn.

In two similar prosecutions by the Council, taken some time ago, the Magistrate held that milk sold in sealed bottles came within the terms of the Order, and a similar decision was given in a Manchester case. In a case considered at Paddington the Magistrate held that the seller of bottled milk need not be registered as a purveyor of milk, and in a Wolverhampton case a decision was given in 1919, by a Stipendiary, that sterilised milk was a milk preparation, and did not come within a Milk Prices Order.

The Council's policy has been to require the occupiers of general shops to be registered as purveyors of milk, whether sold in bottles or otherwise. If the shop is clean and the occupier undertakes not to keep, store or sell paraffin or other oil, loose pickles and vinegar, coal, coke, or any articles which are likely to cause dust, or by their odour to pollute milk, he is registered, but otherwise registration is refused. There is always the possibility of a shop-keeper opening the bottles and selling the milk in small quantities, with the attendant risk of contamination. We understand that many local authorities do not require registration when bottled milk is the only kind of milk sold.

Under the Milk and Dairies Act, 1915 (which came into force in September, 1925), the expression "milk" includes cream, skimmed milk and separated milk. We are of opinion that an amendment of this definition, so as to include all liquid milk sold in bottles, whether sterilised or otherwise, would be advisable.

We recommend—

That a full statement of the Council's position in regard to the registration of purveyors of bottled milk be forwarded to the Minister of Health, and that he be asked to issue a regulation, or if necessary obtain an amendment of the law, to require that purveyors of liquid milk sold in bottles, whether it be sterilised or treated in any other manner, must be registered.

In the case mentioned above, the Magistrate's decision that, because the milk had been sterilised, that is, heated to or above boiling point, it was no longer milk as contemplated by the Order, and therefore the vendor need not be registered, gives rise to a remarkable situation. Vendors of Pasteurised milk, that is, milk heated to a temperature of 145-150 degrees, must not only be registered, but must pay a special fee for permission to sell such milk. According to the Magistrates's decision recorded above, a vendor has only to heat the milk to a higher temperature, for instance, boiling point, and then it is no longer milk as contemplated by the Order, and registration is not necessary.

#### MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

The special designations under which milk may be sold comprise the following:—  
"Certified," "Grade A (tuberculin tested)," "Grade A," and "Pasteurised."

The Order states the conditions which must be complied with before a licence can be granted in connection with the production, distribution and sale of such milk. Any such licence is valid for not more than one year and expires on December 31st in each year.

The following licences for the Sale of Graded Milk were granted in respect of 1925 :—

Date of Licence.	Name and Address of Licensee.	Grades of milk in respect of which Licence is granted.	St. Pancras Address at which graded milk will be sold.
Dec. 19th, 1924	Welfords & Premier Dairies, Ltd., 233, Seven Sisters Road, N. 4	" Certified "	Supplementary licence to sell in St. Pancras.
Do.	Belgravia Dairy Co., Ltd., 4-6, Exhibition Road, S.W. 7	Do.	Do.
Do.	Do.	" Pasteurised "	Do.
Do.	J. R. Mills & Sons, 23, Francis Street, W.C. 1	" Grade A "	23, Francis Street.
Do.	Manor Farm Dairy Co., Ltd., 39, High Road, East Finchley, N. 2	" Certified "	Supplementary licence to sell in St. Pancras.
Do.	Do.	" Pasteurised "	26, High Street, Highgate.
Do.	Do.	Do.	Swain's Lane.
Do.	Marshall's Dairies, Ltd., 19, Tudor Place, W. 1	" Grade A Tuberculin tested "	19, Tudor Place.
Do.	Vicarage Farm Dairy Co., Ltd., 277 & 279, Kentish Town Road, N.W. 5	" Grade A "	277/9, Kentish Town Road.
Do.	Do.	" Certified "	Do.
Do.	Do.	" Pasteurised "	Do.
Do.	Express Dairy Co., Ltd., 26-30, Tavistock Place, W.C. 1	" Certified "	12, South Grove.
Do.	Do.	" Grade A Tuberculin tested "	Do.
Do.	Do.	" Certified "	26, Tavistock Place.
Do.	Do.	" Grade A Tuberculin tested "	Do.
Do.	Lord Rayleigh's Dairies, Ltd., 16, Caroline Street, W.C. 1	" Certified "	Supplementary licence to sell in St. Pancras.
Do.	Do.	" Grade A Tuberculin tested "	Do.
Do.	Welford & Sons, Ltd., Elgin Avenue, W. 9	" Certified "	63, Park Street.
Do.	Do.	" Pasteurised "	Do.
Do.	Do.	" Certified "	69, Albany Street.
Do.	Do.	" Pasteurised "	Do.
Do.	Do.	" Grade A "	35, Southampton Street.
Jan. 23rd, 1925	J. Evans, 35, Southampton Street	" Grade A "	35, Southampton Street.
Do.	J. Richards, Ltd., 41, Englands Lane, N.W. 3	" Pasteurised "	126, Regent's Park Road.
Feb. 19th, 1925	John Davies, 78, Judd Street, W.C. 1	" Grade A "	78, Judd Street.
Do.	Evan Jones, 137, King's Cross Road, W.C. 1	" Certified "	137, King's Cross Road.
Do.	T. Jones, 23, Haverstock Road	Do.	23, Haverstock Road.

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

REPORT FOR YEAR ENDED 31ST DECEMBER, 1925.

1. Milk, and Cream not sold as Preserved Cream.

—	(a) Number of samples examined for the presence of a preservative.	(b) Number in which a preservative was reported to be present.
Milk ... ..	370	1
Cream ... ..	9	3

Nature of preservative in each case in column (b), and action taken under Regulations in regard to it:—

C. 2. Milk. At least 15.3 per cent. of added water and 1.76 per cent. of sodium carbonate.

INFORMAL SAMPLE.



- C. 186. Cream. 0·165 per cent. of boron trioxide, equal to 0·292 per cent. of boric acid,  
Proceedings taken under the Sale of Food and Drugs Acts for selling to the prejudice of the purchaser. Fined 20s. ; costs, 42s.
- A. 189. Cream. 0·145 per cent. of boron trioxide, equal to 0·257 per cent. of boric acid.
- A. 190. Cream. 0·111 per cent. of boron trioxide, equal to 0·196 per cent. of boric acid.
- In the last two cases an explanation was asked of and furnished (by letter) by the vendors, and a warning letter addressed to the vendors by order of the Public Health Committee. No legal proceedings were instituted.
2. *Cream sold as Preserved Cream.*
- (a) Instances in which samples have been submitted for analysis to ascertain if the statements on the labels as to Preservatives were correct :—
- |                             |     |     |     |     |           |
|-----------------------------|-----|-----|-----|-----|-----------|
| (i) Correct statements made | ... | ... | ... | ... | 21        |
| (ii) Statements incorrect   | ... | ... | ... | ... | —         |
| Total                       | ... | ... | ... | ... | <u>21</u> |
- (iii) Percentage of preservative found in each sample: Boric acid, 0·296, 0·211, 0·179, 0·221, 0·223, 0·248, 0·322, 0·285, 0·270, 0·273, 0·094, 0·198, 0·119, 0·082, 0·159, 0·068, 0·186, 0·287, 0·198, 0·142, and trace only. Percentage stated on statutory label: 0·4.
- (b) Determinations made of milk fat in cream sold as preserved cream :—
- |                         |     |     |     |     |           |
|-------------------------|-----|-----|-----|-----|-----------|
| (i) Above 35 per cent.  | ... | ... | ... | ... | 21        |
| (ii) Below 35 per cent. | ... | ... | ... | ... | —         |
| Total                   | ... | ... | ... | ... | <u>21</u> |
- (c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article V (1) and the proviso in Article V (2) of the Regulations have not been observed: None.
- (d) Particulars of each case in which the Regulations have not been complied with, and action taken: None.
3. *Thickening Substances.*—Any evidence of their addition to cream or to preserved cream. Action taken where found: None.

#### MILK AND DAIRIES (CONSOLIDATION) ACT, 1915.

The above-mentioned Act, the operation of which had been deferred owing to the War, came into force on the 1st September, 1925. The Act repeals and re-enacts a number of provisions contained in the Contagious Diseases (Animals) Acts and the Sale of Food and Drugs Acts with regard to Milk and Dairies. It also reproduces a number of amendments and new provisions which were contained in the Milk and Dairies Act, 1914, the operation of which was deferred.

#### PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

These important regulations came into force on 31st July, 1925. They constitute a definite legislative step towards the prevention of tuberculous infection being spread by milk. They provide that "no person who is aware that he is suffering from tuberculosis of the respiratory tract shall enter upon any employment or occupation in connection with a dairy which would involve the milking of cows, the treatment of milk, or the handling of vessels used for containing milk." The Council may require any such person to discontinue his employment or occupation in that capacity.

## PUBLIC HEALTH (MEAT) REGULATIONS, 1924.

The above Regulations, which came into force on April 1st, 1925, are based on the recommendations of the Departmental Committee on Meat Inspection. They are designed to secure more adequate inspection of animals slaughtered in this country, and improvements in the handling, transport and distribution of meat. The Borough Council have to enforce and execute these Regulations and, by resolution, have authorised the Medical Officer of Health and the Food Inspectors to act for the Council.

With regard to slaughter-houses, the Regulations require that due notice shall be given to the Local Authority concerning the time when slaughtering is to take place, that notice must be given when any carcase appears to be diseased or unsound, and forbids certain processes to be carried on in any slaughter-house.

With regard to shops, stores, stalls, etc., the Regulations specify certain precautions which are to be taken with the object of preventing contamination, and for securing cleanliness of premises, implements, etc.

A person suffering from infectious disease is also prohibited from slaughtering animals or handling meat.

A copy of the Regulations was delivered by the Food Inspectors to every person in the Borough who deals in "meat." This is defined in the Regulations as meaning the flesh of cattle, sheep or goats (including bacon, ham, edible offal and fat) sold or intended for sale for human consumption.

A number of prosecutions have been undertaken in connection with breaches of the above Regulations. Particulars concerning these will be found on page 95.

In actual practice the above Regulations have been disappointing, and their value has been diminished owing to their ambiguity.

The Union of London Retail Meat Traders stated that, as there existed an impression that there can be read into the Regulations a direction for the compulsory introduction of glass windows to all butchers' shops, a letter was forwarded to the Minister of Health asking for a ruling on this point.

In his reply, the Minister stated that he had no jurisdiction to give an authoritative interpretation of the Meat Regulations, that they would be administered by Local Authorities, and in any case of dispute as to their meaning it would be for the Courts to decide. Such a position is thoroughly unsatisfactory to the public, to the traders and to the officers of Local Authorities. It should not be necessary to have to undertake prosecutions in order to define the meaning of a Regulation. Every Act, by-law, regulation or order should be made as definite and as clear as possible, so that the interpretation cannot be influenced by the bias of the party affected, or the ideal of the official concerned.

## BYE-LAWS—SLAUGHTER HOUSES—HUMANE KILLING.

The by-laws made in 1923 requiring the use of mechanically-operated instruments in connection with the slaughter of animals, permitted, under certain conditions, the Jewish method of slaughter.

During the past year the question arose as to whether similar permission should be allowed in respect of slaughter of animals for the food of Moslems. This appeared to be desirable, and an amending by-law was made by the London County Council in March; this was approved by the Minister of Health and came into operation on the 31st July, 1925.



## MEAT INSPECTION—TUBERCULOSIS ORDER, 1925. No. 2.

This order, made by the Minister of Agriculture and Fisheries, under authority contained in the Diseases of Animal Acts, 1894-1925, relates to the slaughter of animals affected with certain specified forms of Tuberculosis. It provides that notice of intention to slaughter shall be given to the Sanitary Authority in cases where it is intended that the carcase or any part thereof should be disposed of for human consumption, and that no part of the carcase shall be removed from the premises for that purpose except with the permission, in writing, of the Medical Officer of Health or other competent officer. The order came into force on 1st September, 1925.

## (b) OTHER FOODS.

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

During the year the unsound food, set out below, was voluntarily surrendered by the owners to the Food Inspectors, and destroyed as trade refuse. On one occasion a seizure of unsound food was made.

## UN SOUND FOOD CONDEMNED AND DESTROYED.

Apricots, 67 crates	Margarine, 1 box
Beef, 34 lbs.	Oranges, 18 boxes and 35 cases
Cabbages, 1½ trucks	Pears, 96 barrels
Cherries, 5 baskets	Plaice, 1 box
Dabs, 1 trunk	Plums, 98 baskets
Dogfish, 1 basket	Rabbits, 27
Elongatas, 1 box	Raspberries, 2 tubs
Fillets, 10 boxes	Roe, 3 boxes
Fowls, 20	Sprouts, 6½ bags
Green Peas, 110 bags	Strawberries, 137 tubs
Haddocks, 6 stone	Tomatoes, 68 boxes
Liver (Ox), 5	White Pollock, 1 box
Lung (Ox), 1	

## SEIZED.

Bacon, 162 lbs.

With reference to the seizure mentioned above, this occurred in the course of a housing inspection by the Medical Officer of Health, accompanied by Mr. James, Sanitary Inspector.

21 pieces of Bacon, weighing 112 lbs., were found on the premises, 32, Chalton Street, and 8 pieces, weighing 50 lbs., belonging to the same owner, were found on a stall in Chalton Street.

The whole of this meat was unsound and unfit for food. Proceedings were instituted and a penalty of £10, or in default 31 days' imprisonment, was inflicted. The Magistrate stated that the penalty in this case was small, as the defendant was in humble circumstances.

Details in regard to the work of the Food Inspectors are shown in Table No. 8, on pages 114 and 115.

## SLAUGHTER-HOUSES.

At the end of 1925 there were 5 licensed slaughter-houses (private) in the Borough. Structurally they do not conform to a high standard of excellence. These are kept under

periodical inspection by the Food Inspectors, who made 149 inspections in this connection in 1925.

FRIED FISH AND FISH CURING PREMISES.

In 1925, there were 81 fried fish vendors' premises in the Borough, at 4 of which fish curing was also carried on. There were 19 fish curers' premises, including these 4. 391 visits were made by the Food Inspectors to the premises during the year.

ICE-CREAM PREMISES.

In 1925, 328 ice-cream premises were known to the department ; 394 visits were paid to them by the Food Inspectors during the year.

BAKEHOUSES AND RESTAURANT KITCHENS.

At the end of 1925 there were 159 bakehouses on the register, including 57 factory bakehouses. Thirty-nine of these bakehouses were not in use. 117 of the 159 were underground bakehouses, of which 50 were factory bakehouses, and 31 not in use.

At the end of the year 376 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 81 to 83.

PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD) REGULATIONS, 1925.

The Minister of Health has forwarded a copy of these Regulations, which are based on the recommendations of the recent Departmental Committee on the use of preservatives and colouring matter in food.

As the Regulations do not come into force until January 1st, 1927, they have doubtless been issued to enable the various traders concerned to dispose of existing stocks which contain preservatives, and also to give time in which to introduce improved methods in order to render the use of preservatives unnecessary.

REGULATIONS		REGULATIONS	
No.	Description	No.	Description
1	...	1	...
2	...	2	...
3	...	3	...
4	...	4	...
5	...	5	...
6	...	6	...
7	...	7	...
8	...	8	...
9	...	9	...
10	...	10	...
11	...	11	...
12	...	12	...
13	...	13	...
14	...	14	...
15	...	15	...
16	...	16	...
17	...	17	...
18	...	18	...
19	...	19	...
20	...	20	...
21	...	21	...
22	...	22	...
23	...	23	...
24	...	24	...
25	...	25	...
26	...	26	...
27	...	27	...
28	...	28	...
29	...	29	...
30	...	30	...
31	...	31	...
32	...	32	...
33	...	33	...
34	...	34	...
35	...	35	...
36	...	36	...
37	...	37	...
38	...	38	...
39	...	39	...
40	...	40	...
41	...	41	...
42	...	42	...
43	...	43	...
44	...	44	...
45	...	45	...
46	...	46	...
47	...	47	...
48	...	48	...
49	...	49	...
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51	...	51	...
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57	...	57	...
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67	...	67	...
68	...	68	...
69	...	69	...
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72	...	72	...
73	...	73	...
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85	...	85	...
86	...	86	...
87	...	87	...
88	...	88	...
89	...	89	...
90	...	90	...
91	...	91	...
92	...	92	...
93	...	93	...
94	...	94	...
95	...	95	...
96	...	96	...
97	...	97	...
98	...	98	...
99	...	99	...
100	...	100	...



## (c)—SALE OF FOOD AND DRUGS ACTS.

750 samples have been taken under these Acts, and 724 of these proved to be genuine and 26, or 3·5 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 .. .. .	4	4	—
Brawn .. .. .	1	1	—
Butter .. .. .	114	114	—
Celery.. .. .	1	1	—
Cocoa .. .. .	16	16	—
Coffee .. .. .	18	18	—
Cream .. .. .	9	6	3
Do. (Preserved) .. .. .	21	21	—
Dripping .. .. .	1	1	—
Flour (Self-Raising) .. .. .	40	40	—
Lard .. .. .	20	20	—
Margarine .. .. .	35	35	—
Milk .. .. .	370	352	18
Mustard .. .. .	15	14	1
Olive Oil .. .. .	6	6	—
Oysters .. .. .	1	1	—
Pepper .. .. .	14	14	—
Pork Pie .. .. .	1	1	—
Prescriptions .. .. .	12	12	—
Rice .. .. .	10	10	—
Salad Oil .. .. .	2	2	—
Sausages .. .. .	23	20	3
Sugar .. .. .	6	6	—
Vinegar .. .. .	8	7	1
Vinegar (Malt) .. .. .	2	2	—
<b>Total .. .. .</b>	<b>750</b>	<b>724</b>	<b>26</b>

NOTE.—The 750 include four informal samples of milk, one of celery and one of oysters.

Prosecutions were undertaken as regards 12 of the above 26 samples which were reported as being adulterated. The results of the proceedings are stated in the following table:—

## SUMMONSES.

## (a) 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.
A. 20	Milk ..	Deficient in milk fat, 13·3 per cent. .. ..	Mar. 10th ..	£ s. d. Dismissed.	£ s. d. Warranty proved.
C. 146	" ..	" " " " 10·3 " " .. ..	July 9th ..	2 0 0	2 2 0
A. 157	Sausages ..	Boron trioxide, 0·148 per cent. .. ..	" 23rd ..	Dismissed.	2 2 0
A. 158	" ..	" " " " 0·938 " " .. ..	" " " " ..	1 0 0	2 2 0
C. 199	Milk ..	Added water, 13·0 per cent. .. ..	Sept. 3rd ..	5 0 0	3 3 0
C. 200	" ..	" " " " 13·5 " " .. ..	" " " " ..	5 0 0	3 3 0
C. 186	Cream ..	Boric acid, 0·292 per cent. .. ..	" " " " ..	1 0 0	2 2 0
A. 225	Milk ..	Deficient in milk fat, 5·0 per cent. .. ..	Oct. 1st ..	2 0 0	1 12 6
C. 276	Vinegar ..	Deficient in acetic acid, 35 per cent. .. ..	Nov. 3rd ..	0 2 6	0 10 6
A. 349	Milk ..	Added water, 5·9 per cent. .. ..	Jan. 21st ..	} Dismissed.	5 5 0
A. 350	" ..	Deficient in milk fat, 18 per cent. .. ..	" " " " ..		
A. 348	" ..	" " " " 3 " " .. ..	" " " " ..		

The prosecution in connection with the sample of Sausages, No. A 158, is of importance, owing to the enormous amount of preservative present. According to the Analyst's certificate, no less than 116 grains of Boric Acid was found per pound of sausage.

Although there is no definite standard, about 17 grains of this preservative per pound of sausage, etc., has hitherto been considered permissible. The amount present in the case in question, 116 grains per pound, is an alarming and distinctly undesirable quantity. The Public Health (Preservatives, etc., in Food) Regulations, which come into force in January, 1927, prohibit the use of Boric Acid entirely.

SUMMONSES—*continued.*

(b) *Under the Margarine Act, 1887.*

Address.	Offence.	Date of Hearing of Summons.	Result of Proceedings.
10, Wellington Street ...	Exposing for sale by retail Margarine without being labelled	Jan. 29th ...	Fined £2.
10, " ...	Selling by retail Margarine in plain wrapper	" 29th ...	Do.
6, Mornington Street ...	Do. do.	Apl. 2nd ...	Fined £3, costs £1 1s.
6, " ...	Exposing for sale by retail Margarine without being labelled	" 2nd ...	Withdrawn.

(c) *Under the Meat Regulations, 1924.*

Address.	Offence.	Date of Hearing of Summons.	Result of Proceedings.
Queen's Crescent... ...	Exposing meat from a stall which was not suitably covered over and screened	May 28th ...	Fined £1, costs £1 1s.
Do. ...	Do. do.	" 28th ...	Do.
Do. ...	Do. do.	July 9th ...	Fined £3, costs £3 3s.
Do. ...	Do. do.	" 9th ...	Fined £3, costs £2 2s.
Do. ...	Do. do.	" 9th ...	Do.
Do. ...	Do. do.	" 9th ...	Do.
Do. ...	Do. do.	" 9th ...	Do.
Chalton Street ...	Do. do.	Dec. 30th ...	Fined 10s., costs 10s. 6d.
Do. ...	Do. do.	" 30th ...	Do.
Do. ...	Do. do.	" 30th ...	Do.
Do. ...	Do. do.	" 30th ...	Do.

Section VII.—SANITARY ADMINISTRATION.

THE STAFF.

The names of the staff of the Public Health Department at the end of 1925 will be found on pages 6 and 7.

The following changes occurred during the year :—

Dr. N. M. Donnelly, Tuberculosis Officer, resigned September, 1925.

Dr. A. Viney, appointed Assistant Medical Officer for Maternity and Child Welfare, and Assistant Tuberculosis Officer in February, 1925.

In September, 1925, Dr. Viney was appointed Tuberculosis Officer, owing to the resignation of Dr. Donnelly.

Dr. G. A. Back, appointed Assistant Medical Officer for Maternity and Child Welfare, and Assistant Tuberculosis Officer. To commence duty in January, 1926.



Mr. A. Powell Coke, Chief Clerk of the Public Health Department, and Clerk of the Estates Department, terminated his duties in these positions in August, 1925, owing to being appointed Deputy Town Clerk.

Mr. Coke had been associated with the work of the Public Health Department since 1904, and his intimate knowledge of the work, together with his outstanding ability, caused the loss of his services to be keenly felt by the department.

Mr. A. D. Corrick appointed Chief Clerk.

Mr. S. W. Barker, Junior Clerk, resigned.

Mr. H. G. Avril appointed Junior Clerk.

Mr. F. A. J. Goodchild appointed Junior Clerk.

Mr. L. Higgins and Mr. J. B. Richards, Temporary Clerks, appointments terminated.

#### STAFF AT MATERNITY AND CHILD WELFARE CENTRES.

Dr. Martin Oldershaw appointed Medical Officer for Ante-Natal Clinics at Argyle Square Centre.

Dr. Kathleen F. Lander appointed Medical Officer for Ante-Natal Clinics at Camden Town Centre.

Dr. P. Ruth Elliott appointed Medical Officer for Ante-Natal Clinics at Grafton Road Centre.

Dr. A. R. Roche resigned his consultations at Grafton Road Centre.

Dr. H. S. Baker appointed Medical Officer at Grafton Road Centre.

Dr. W. Beaumont appointed Medical Officer at Sunlight Clinic at South Highgate Centre.

Miss M. E. Jacobs appointed Health Visitor in place of Miss J. M. Anderson, resigned.

Miss M. F. Brooks and Miss A. E. Thurman held temporary appointments as Health Visitors.

#### SUMMARY OF THE PRINCIPAL CHANGES IN THE PUBLIC HEALTH SERVICES DURING THE PAST 5 YEARS.

##### 1921.

Measles and German Measles made compulsorily notifiable diseases by means of special regulations.

Additional Consultations provided at the Amptill Square and Queen's Crescent Centres. Massage Clinics also provided at these Centres and at the Chalton Street and Camden Road Centres.

The Day Nursery at Cartwright Gardens closed.

##### 1922.

An additional Health Visitor and a third weekly Consultation provided at the Grafton Road Centre.

A new Welfare Centre opened at Caversham Road to take the place of the Centres at Falkland Road and Oseney Crescent, which were closed.

Additional powers provided with reference to the disinfection of verminous articles.

##### 1923.

Resignation of the Medical Officer of Health, Dr. T. S. Higgins, and appointment of the present Medical Officer of Health, Dr. G. Sowden.

New Dental Clinic in connection with the Maternity and Child Welfare Scheme provided in the premises of the Argyle Square Centre.

The Tuberculosis Care Committee formed in accordance with the recommendations contained in the circular of the Ministry of Health.

Arrangement with the Lister Institute for bacteriological examinations terminated and Professor A. G. R. Foulerton appointed to do the work.

1924.

Re-organisation of the districts and duties of the Sanitary Inspectors and Health Visitors.  
 Re-arrangement of Ante-Natal Consultations and Midwifery grants.  
 Berkeley Road Welfare Centre closed and work transferred to Camden Road.  
 Appointment of Dr. S. Churchill as Assistant Medical Officer terminated.  
 Council decided that the dispensary treatment of tuberculous persons, for the whole of the Borough, should be carried out at the Dispensary in Oakley Square.  
 Provision of beds and/or bedding for necessitous persons suffering from Tuberculosis.  
 Arrangement with Professor A. G. R. Foulerton for bacteriological examinations terminated. Professor F. H. Teale appointed in his stead.

1925.

Clinic for Artificial Light treatment opened at the South Highgate Centre.  
 Malden Road Branch Tuberculosis Dispensary closed.  
 Agreement respecting Joint Tuberculosis Dispensary at University College Hospital terminated.  
 Improved arrangements for dental treatment of Tuberculous patients.  
 Improvements to Mortuary and new equipment provided for Post Mortem room.  
 Mr. West appointed an additional Sanitary Inspector (Temporary).

#### CHEMICAL AND BACTERIOLOGICAL WORK.

The Borough Council has an arrangement with the Bacteriologist of University College Hospital for the examination, at the expense of the Council, of material sent by medical practitioners in connection with suspected cases of diphtheria, typhoid fever and tuberculosis. The following specimens were examined during the year:—

Nature of Specimen.	Positive.	Negative.	Total.
Swabs for Diphtheriæ Bacilli ... ..	257	1030	1287
Blood, <i>re</i> Typhoid Fever ... ..	3	3	6
Sputum for Tubercle Bacilli ... ..	59	409	468

Examinations of sputum in connection with cases attending the tuberculosis dispensaries is carried out by the staff at the dispensaries.

Facilities for the examination of cerebro-spinal fluid in suspected cases of cerebro-spinal fever, encephalitis lethargica, &c., are available to the Medical Officer of Health through the London County Council, and for the examination of 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 given on page 94.

#### Section VIII.—HOUSING.

During the year ended December 31st, 1925, 62 houses and 88 flats were erected in the Borough, on the Holly Lodge Estate in Ward 1.

One flat over business premises was also erected in Ward 6.

In connection with overcrowding, the London County Council gives special consideration, with regard to vacancies in any of the dwellings under their control, to cases recommended by your Medical Officer of Health. Such cases are selected from the worst cases of over-



crowding which are discovered. During the year 18 families comprising 97 persons who were living in 24 rooms have been found accommodation in County Council dwellings.

In connection with all these cases, the owner of the premises where the overcrowding had occurred is communicated with—drawing his attention to the fact that the overcrowding had been abated, and requesting his co-operation in preventing any recurrence of this condition.

The shortage of houses still constitutes the most serious public health problem in St. Pancras. During the year the efforts of the Council's staff have been concentrated in keeping existing houses in as satisfactory a condition as possible. In this connection a number of inspections have been made and notices served under the new Housing Act, 1925, which came into force on 1st July, 1925.

It is a matter for regret that progress in the provision of working-class houses is so slow. Overcrowding is very prevalent, and this not only facilitates the spread of infectious disease and constitutes a menace to health, but it is also deleterious for other obvious reasons not associated with public health. It is significant that the illegitimate birth rate is gradually rising, a slight but steady increase having occurred during each of the past 5 years.

### HOUSING ACT, 1925.

#### HOUSING CONSOLIDATED REGULATIONS, 1925.

The above Act, which came into force on July 1st, 1925, consolidates previous enactments relating to the Housing of the Working Classes. Provision is made for securing the repair, maintenance and sanitary condition of houses, including power of Local Authorities to do any necessary work if the owner defaults, and the cost of such work can be made a charge on the premises.

Power is provided by Section 6 to make by-laws for tenement houses, the Authority for this purpose in London being the London County Council. By-laws under this Section have been made and will come into force on 5th March, 1926.

*The Housing Consolidated Regulations, 1925*, made by the Minister of Health in pursuance of powers conferred on him by the Housing Act, 1925, came into force on 1st September, 1925. These require the Local Authority to determine the procedure to be adopted to give effect to the requirements of Section 8 of the Act in regard to the inspection of their district. In this connection Mr. H. G. West, a fully-qualified sanitary inspector, who was previously in the service of the Council in this capacity, was appointed temporarily. Mr. West had been employed as milk inquiry officer, but this duty is now being performed by the women sanitary inspectors. By appointing an additional district sanitary inspector (making the number 12 instead of 11), the Borough is now divided into slightly smaller areas, and each inspector in his own area is carrying out the inspections required by the Act.

Records of the inspections have to be kept, and the Medical Officer of Health must include in his Annual Report information and particulars in regard to the houses inspected.

The following table gives the Housing statistics for the year ended 31st December, 1925 :—

Number of new houses erected during the year :—

(a) Total (including number given separately under (b))	62 houses and 89 flats
(b) With State assistance under the Housing Acts :—	
(i) By the Local Authority	.. .. . Nil.
(ii) By other bodies or persons	.. .. . Nil.

1. *Unfit dwelling-houses.*

Inspection—(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) .. .. .	2525
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925 .. .. .	438
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .. .. .	Nil.
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation .. .. .	1570

2. *Remedy of defects without Service of formal Notices.*

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers .. .. .	Nil.
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3. *Action under Statutory Powers.*

## A.—Proceedings under Section 3 of the Housing Act, 1925.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs .. .. .	52
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners .. .. .	52
(b) By Local Authority in default of owners.. .. .	Nil.
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close .. .. .	Nil.

## B.—Proceedings under Public Health Acts.

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied .. .. .	3331
(2) Number of dwelling-houses in which defects were remedied after service of formal notice :—	
(a) By owners .. .. .	3313
(b) By Local Authority in default of owners.. .. .	Nil.

## C.—Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925 :—

(1) Number of representations made with a view to the making of Closing Orders .. .. .	Nil.
(2) Number of dwelling-houses in respect of which Closing Orders were made .. .. .	Nil.
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit .. .. .	Nil.
(4) Number of dwelling-houses in respect of which Demolition Orders were made .. .. .	Nil.
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders .. .. .	Nil.



## HOUSING SCHEMES,

## WOLCOT STREET AREA.

The proposals of the Borough Council for improving the unhealthy conditions in this area were initiated in 1919, when a scheme was prepared under Part II. of the Housing of the Working Classes Act, 1890.

During the past seven years endless negotiations, interviews and discussions have taken place with the Ministry of Health and the London County Council. In April, 1925, an alternative lay-out to that originally proposed was made by the Ministry, and an agreement was at last reached and the scheme was finally approved, subject to certain conditions and modifications, by an Order dated May 2nd, 1925.

It is stated that nothing in the Order shall be deemed to constitute an approval of the scheme by the Minister for the purpose of the Local Authorities (Assisted Housing Schemes) Regulations, 1919, or of any Regulations amending or extending those Regulations.

The entire cost will, therefore, have to be defrayed by the Borough.

## SOMERS TOWN HOUSING SCHEME—OSSULSTON STREET AREA.

On January 1, 1925, this area was inspected by your Medical Officer of Health, together with certain officers of the London County Council. On January 14th the following representation was made under Part I. of the Housing of the Working Classes Acts, 1890 (now Part II. of the Housing Act, 1925), to the London County Council, who are the responsible authority for dealing with schemes under this part of the Act :—

Sir,

I beg to represent, pursuant to the provisions of the Housing Acts, 1890—1923, that within the area in Somers Town, in the Metropolitan Borough of St. Pancras, bounded by Hampden Street on the North, Ossulston Street on the East, Chalton Street on the West, and Euston Road on the South, which area is shown outlined in red on the plan annexed hereto—houses, courts or alleys are unfit for human habitation, and/or the narrowness, closeness and bad arrangement; or the bad condition of the streets and houses, or groups of houses within such area; or the want of light, air, ventilation; or proper convenience or any other Sanitary defect; or one or more of such causes are dangerous or injurious to the health of the inhabitants, either of the buildings in the said area, or of the neighbouring buildings, and that the most satisfactory method of dealing with the evils connected with such houses, courts or alleys, and the sanitary defects in such area is an improvement scheme for the re-arrangement and reconstruction of the streets and houses within such area, or of some of such streets or houses.

I am, etc.,

G. SOWDEN,

*Medical Officer of Health for the Metropolitan  
Borough of St Pancras.*

To the Clerk to the London  
County Council.

In February, 1925, the London County Council decided to make a scheme under Part I. of the Housing of the Working Classes Act, 1890. The scheme was duly submitted to the Minister of Health for confirmation, and a local inquiry was held by Mr. H. A. Chapman on 11th and 12th August, 1925.

The confirmation of the scheme by the Minister, with certain modifications, was made whilst this report was being written, by an order dated 27th April, 1926.



This scheme is one of considerable magnitude, and the site is a valuable and important one, being situated close to three great railway termini. The area comprises about eight acres, and the execution of the scheme will involve the displacement of about 2,700 persons. It is proposed that accommodation for re-housing no fewer than that number shall be provided within the area.

#### CONVERSION OF VACANT HOUSES.

This is probably, at present, the most readily available, and the least expensive method of providing improved housing accommodation in the Borough. Although less expensive than the erection of new houses, it is still a costly process owing to high values and the cost of labour. The question was considered by the Estates (Housing Scheme) Sub-Committee, and at their request a report was submitted on this matter, as follows:—

*To the Chairman and Members of the Estates (Housing Scheme) Sub-Committee.*

“In pursuance of the resolution of the Sub-Committee, I beg to report on the question of conversion of suitable vacant houses into working class dwellings.

The only vacant houses in the Borough suitable for the purpose are a number in Drummond Crescent, a larger number on an island site between Euston Road and Argyle Square, and a few on the north side of Johnson Street. If any of these could be secured and adapted, then other property, although occupied, might be obtained, as accommodation for displaced tenants would then be available.

The greatest need at present in St. Pancras is for dwellings comprising one living room and three bedrooms. These are required for persons with small incomes and large families. The ordinary landlord cannot supply this need, as such persons cannot pay an economic rent. It is, therefore, for this particular class that State Aided Dwellings are necessary. If these could be provided, sub-letting should be expressly forbidden, otherwise overcrowding would occur. Persons without children or with only a small family can more easily find accommodation than those above-mentioned, as they can pay an economic rent, and landlords very naturally prefer and provide for tenants without many children.

A large proportion of the houses in St. Pancras contain only two rooms on each floor. In order to secure the accommodation above described, it is necessary to take two adjoining houses, provide the necessary doorways in the party walls and thus secure a four roomed flat on each floor. The cost of this work would average about £100 per floor. The St. Pancras House Improvement Society are proceeding somewhat on these lines. In April, 1925, I informed this Society that several adjoining houses in Somers Town could be purchased, including two empty houses. These two are now being adapted as described above, and when finished the families in the other houses can be accommodated in order to adapt the remainder. In reply to a further enquiry from this Society, I recently suggested to them the Drummond Crescent houses above mentioned, and I believe some, if not all, of these may have been purchased. If still available these are very suitable for the purpose mentioned in your Resolution.

As building is now so expensive, it is probable that alterations to existing houses on the lines indicated would be more economical, and would help more speedily to remedy the existing shortage and consequent overcrowding.”

I am, etc.,

G. SOWDEN,

*Medical Officer of Health.*



The Report was considered by the Sub-Committee and the following opinion was reported to the parent Committee :—

It is important for the Committee to realise that there is no Government financial assistance available for the conversion of empty houses, and if any scheme of this sort was contemplated, the loss sustained would fall entirely on the rates. For this reason, and in view of the fact that the St. Pancras House Improvement Society, who have raised funds for the purpose, are carrying out the conversion of derelict houses into flats for the accommodation of the working classes, we are not prepared to recommend that any action should be taken at the present time.

#### WORK OF THE ESTATES COMMITTEE.

The following summary of the principal matters dealt with by the Estates Committee during the past year has been prepared by Mr. A. D. Corrick, Clerk to the Committee, who succeeded Mr. A. Powell Coke in that position in October, in 1925, upon Mr. Coke's promotion to the office of Deputy Town Clerk.

The Estates Committee, whose Chairman is Councillor W. C. Wood, control nearly five hundred dwellings in different parts of the Borough. A great deal of the time of the Committee is taken up with questions concerning the administration of these properties, which are situate at (a) The Brookfield Estate, Highgate; (b) Una House, Prince of Wales Road; (c) Goldington Buildings, Great College Street; (d) Flaxman Terrace, Euston Road; and (e) Prospect Terrace, Gray's Inn Road. In practice it is found that very few vacancies occur in the Council's dwellings, and for these there is a long waiting list of admittedly hard cases of bad housing accommodation.

Material assistance has been given by the London County Council in relieving cases of overcrowding in St. Pancras. They have accommodated many families in their various estates in other parts of London, especially in the new estates at Becontree in Essex, and Downham, near Catford. Headway is being made with the development of the County Council's new Watling Estate at Hendon, which will further relieve the housing situation.

#### SOMERS TOWN HOUSING.

*Wolcot Street Area.*—The new housing scheme initiated by the Borough Council for the improvement of the unhealthy conditions existing in this area is making progress. Terms for the purchase of the interests in the land have been settled, and tenders for the erection of seventy working-class flats are now before the Council. The Minister of Health would not make any grant towards the annual loss on the scheme, and in order that this greatly needed improvement should be no longer delayed, the Council decided to proceed and to bear the whole loss, estimated at £2,000 per annum.

#### STAFF.

The administrative work in connection with the Estates Committee (Chairman: Councillor W. C. Wood, Deputy-Chairman: Councillor R. J. Smerdon) is carried out by Mr. A. D. Corrick, the Clerk to the Committee, who is assisted by Mr. G. N. Cove and the Housing Superintendent, Mr. L. Barnard. The resident caretakers at the several blocks of buildings are as follow:—Prospect Terrace, Mr. H. A. Reid; Brookfield Estate, Mr. H. J. Ambrose; Flaxman Terrace, Mr. C. Hanson; Una House, Mr. J. F. Clegg; Goldington Buildings, Mr. G. S. Tunbridge.

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APPENDIX.

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TABLE No. 1.

## VITAL STATISTICS OF WHOLE DISTRICT OF ST. PANCRAS DURING 1925 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		Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
				Number	Rate.					Number.	Rate per 1,000 Nett Births.	Number.	Rate.
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†
1921	212900	—	5099	4764	22·4	2836	13·3	651	593	360	76	2778	13·0
1922	212500	—	4865	4559	21·5	3219	15·1	715	603	337	74	3107	14·6
1923	214400	—	4654	4348	20·3	2735	12·8	634	484	272	63	2585	12·1
1924	214600	214300	4447	4112	18·8*	2937	13·4†	640	551	303	74	2848	13·0†
1925	216300	215900	4111	3880	17·9*	2864	13·3†	680	561	280	72	2745	12·7†

Area of district in acres (land and inland water), 2694·4; total population at all ages, 211,366; number of inhabited houses, 24,660; average number of persons per house, 8·57; at Census, 1921.

\* Based on total population.

† Based on civil population.





DEATHS REGISTERED FROM ALL CAUSES FOR THE YEAR 1925—continued.

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.	PER SONS											
<b>1. General Diseases—con.</b>																													
50. Diabetes ... ..									2	1	1	1	2	1	3	5	1	1	9	9	18								
51. Exophthalmic Goitre ... ..											3	3	2				1		1	8	9								
52. Addison's Disease ... ..								1											1	1	2								
53. Leucocythæmia Lymphadenoma ... ..					1										1		1		1	2	3								
54. Anæmia, Chlorosis ... ..						1													1	2	3								
55. (a) Diabetes insipidus ... ..									1	2	1	1		1	1				3	5	8								
(b) Purpura ... ..																			1	1	2								
(c) Hæmophilia ... ..																			1	1	2								
(d) Other General Diseases ... ..											1								1	1	2								
56. Alcoholism (acute or chronic) ... ..																			1	1	2								
57. (a) Occupational Lead Poisoning ... ..																			1	1	2								
(b) Non-occupational Lead Poisoning ... ..																			1	1	2								
58. Other Chronic Occupational Poisonings ... ..																			1	1	2								
59. Other Chronic Poisonings ... ..																			1	1	2								
<b>2. Diseases of the Nervous System and of the Organs of Special Sense.</b>																													
60. (a) Encephalitis Lethargica ... ..									1	1	1	2	1	1					7	3	10								
(b) Encephalitis, other forms ... ..			1	1					1	1	1				2				2	4	6								
61. (a) Cerebrospinal Fever ... ..		1		1	1	1				1									2	2	4								
(b) Posterior Basal Meningitis ... ..										2									2	2	4								
(c) Meningitis, other forms ... ..	2	2	3	1	6	2	1		1	1	1								8	5	13								
62. Locomotor Ataxy ... ..																			3	5	8								
63. (a) Anterior Poliomyelitis... ..									1										1	1	2								
(b) Other Diseases of the Spinal Cord ... ..									1	1	1	1	5	1	2	2	2	3	1	1	12	10	22						
64. Cerebral Hæmorrhage, Apoplexy ... ..									1			2	2	1	7	8	14	16	3	15	44	49	93						
65. Softening of Brain ... ..												1	1				1	1	1	1	2	4	6						
66. Paralysis without specified cause ... ..													1	1	1	2		2	1	1	3	6	9						
67. General Paralysis of the Insane ... ..													1	1	2	2	5				4	3	7						
68. Other forms of Mental Alienation ... ..										1		1	1								4	4	8						
69. Epilepsy ... ..									1	1			2		1	2	1	3		2	4	9	13						
70. Convulsions (Non-puerperal; 5 years and over) ... ..																					4	9	13						
71. Infantile Convulsions (under 5 years) ... ..	1			1	4	1															4	1	5						
72. Chorea ... ..																					1	1	2						
73. Hysteria, Neuralgia, Neuritis ... ..										1										1	1	1	2						
74. Other Diseases of the Nervous System ... ..							1			2	1	1		1	1	1	3	1			7	6	13						
75. Diseases of the Eyes and Annexa ... ..																					2	2	4						
76. (a) Mastoid Disease ... ..	1				1				1	1											2	2	4						
(b) Other Diseases of the Ears ... ..															1						1	1	2						
<b>3. Diseases of the Circulatory System.</b>																													
77. Pericarditis ... ..																					5	2	7						
78. Acute Myocarditis and Endocarditis ... ..	1		1	1	1	1			1				1	2			1	1	1		7	11	18						
79. (a) Valvular Disease ... ..							1		1	3	3	2	1	3	6	8	7	13	14	21	12	9	17	60	61	121			
(b) Fatty Degeneration of the Heart ... ..																								13	14	27			
(c) Other Organic Disease of the Heart ... ..									1	1	1	2	2	4	10	13	5	26	17	29	37	22	33	2	10	99	116	215	
80. Angina Pectoris ... ..																										3	1	4	
81. (a) Aneurysm ... ..														1	5	1	7									13	3	16	
(b) Arterial Sclerosis ... ..															3	4	1	7	8	15	3	13	15	1	1	43	28	71	
(c) Other Diseases of Arteries ... ..											1															3	3	6	
82. (a) Cerebral Embolism and Thrombosis ... ..																										12	18	30	
(b) Other Embolism and Thrombosis ... ..																										2	1	3	
83. Diseases of the Veins (Varices, Hæmorrhoids, Phlebitis, etc.)... ..																										3	3	6	
84. (a) Status Lymphaticus ... ..																										1	1	2	
(b) Other Diseases of the Lymphatic System... ..																										1	1	2	
85. Hæmorrhage; other Diseases of the Circulatory System... ..										1																3	3	6	
<b>4. Diseases of the Respiratory System.</b>																													
86. Diseases of the Nasal Fossæ ... ..																										3	3	6	
87. Diseases of the Larynx ... ..																										1	4	5	
88. Diseases of the Thyroid Body ... ..	2			1	3																					3	3	6	
89 & 90. Bronchitis ... ..	1	1			1	1																				1	4	5	
91. Broncho-Pneumonia ... ..	13	6	4	2	1	18	8	1			1	1	1	1	3	2	19	5	22	21	38	42	27	41	8	15	138	136	274
92. (a) Lobar Pneumonia ... ..	22	12	8	4	4	53	31	1				2	1	1	3	9	3	3	5	4	3	6	4			1	60	51	111
(b) Pneumonia (type not stated) ... ..	2	2	1		3	6	2					1	5	3	6	7	10	7	6	2	3	1	1	1	1	1	38	26	64
93. Pleurisy ... ..																											1	16	17
																											10	6	16







DEATHS REGISTERED FROM ALL CAUSES FOR THE YEAR 1925—continued.

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.			
<b>7. The Puerperal State.</b>																	
134. Accidents of Pregnancy ... ..																	
135. Puerperal Haemorrhage ... ..									3	1	1						5 5
136. Other Accidents of Childbirth ... ..																	1 1
137. Puerperal Fever ... ..											1						4 4
138. " Albuminuria and Convulsions ... ..								2	1	1							4 4
139. " Phlegmasia Alba Dolens, Embolism, and sudden death ... ..									1								1 1
140. " Insanity ... ..																	
141. " Diseases of the Breast ... ..																	
<b>8. Diseases of the Skin and of the Cellular Tissue.</b>																	
142. (a) Senile Gangrene ... ..												1				1	2 2
142. (b) Gangrene (other types) ... ..																	
143. Carbuncle, Boil ... ..		1			1						1					4	3 7
144. Phlegmon, Acute Abscess ... ..				1	1								1	1	1		1 3 4
145. Diseases of the Integumentary System ... ..	1				1						1			1			2 1 3
<b>9. Diseases of the Bones and of the Organs of Locomotion.</b>																	
146. Diseases of the Bones ... ..								1	1		1		1	1			5 1 6
147. Diseases of the Joints ... ..																	
148. Amputations ... ..																	
149. Other Diseases of Locomotor System ... ..																	
<b>10. Malformations.</b>																	
150. Congenital Malformations ... ..	12	8		1	13	8											13 8 21
<b>11. Diseases of Early Infancy.</b>																	
151. (a) Premature Birth ... ..	37	20			37	20											37 20 57
151. (b) Infantile Debility, Icterus, and Sclerema ... ..	8	8			8	8											8 8 16
152. Other Diseases peculiar to early Infancy ... ..	6	5			6	5											6 5 11
153. Lack of Care ... ..																	
<b>12. Old Age.</b>																	
154. (a) Senile Dementia ... ..													1	1	1	2	2 4
154. (b) Senile Decay ... ..													2	2	20	17	22 27 9 16 53 62 115
<b>13. Affections Produced by External Causes.</b>																	
155 to 163. Suicides ... ..																	
164. Poisoning by Food ... ..								1	3	6	3	2	4	1	2		19 3 22
165. Other Acute Poisonings ... ..										1	1						3 3
166. Conflagration ... ..										1	1				1		3 1 1
167. Burns (Conflagration excepted) ... ..		1	2		2	1						1	1	1			3 3 6
168. Absorption of Deleterious Gases (Conflagration excepted) ... ..	4	1	1		5	1			1		1	1		1			9 2 11
169. Accidental Drowning ... ..																	1 1
170 to 176. Injuries ... ..			1	2	1	2	2	5	4	5	1	2	4	2	1	6	2 10 4 6 4 2 4 1 2 45 24 69
177. Starvation ... ..																	
178. Excessive Cold ... ..																	
179. Effects of Heat ... ..																	
180. Lightning ... ..																	
181. Electricity (Lightning excepted) ... ..																	
182 to 184. Homicide ... ..										1	1						
185. Fractures (cause not specified) ... ..																	3 3
186. Other Violence ... ..																	
<b>14. Ill-defined Causes.</b>																	
187. Dropsy ... ..					1	1											2 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) ... ..														1			1 1
189. (b) Atrophy, Debility, Marasmus (aged 1 year and under 70) ... ..																	
189. (c) Teething ... ..																	
189. (d) Pyrexia ... ..																	
189. (e) Other ill-defined Deaths ... ..																	
189. (f) Cause not specified ... ..											1						1 1

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 .....	44	27	47	118	20	8	51	47	87	121	137	156	60	7	812
Diseases of the Nervous System and of the Organs of Special Sense .....	9	4	3	16	4	6	12	13	20	34	51	40	25	1	222
Diseases of the Circulatory System.....	1	2	1	4	1	4	10	18	30	58	109	142	125	18	519
Diseases of the Respiratory System .....	62	30	17	109	4	1	6	9	24	68	85	112	96	28	542
Diseases of the Digestive System.....	50	5	5	60	1	1	4	5	20	22	23	17	11	2	166
Non-Venereal Diseases of the Genito-Urinary System and Annexa .....	2	1	2	5	—	—	3	5	14	18	19	25	15	3	107
The Puerperal State .....	—	—	—	—	—	—	2	5	2	2	—	—	—	—	11
Diseases of the Skin and of the Cellular Tissue.....	2	—	1	3	—	—	—	—	1	1	1	7	3	—	16
Diseases of the Bones and of the Organs of Locomotion...	—	—	—	—	—	1	1	1	—	—	1	1	1	—	6
Malformations .....	20	—	1	21	—	—	—	—	—	—	—	—	—	—	21
Diseases of Early Infancy.....	84	—	—	84	—	—	—	—	—	—	—	—	—	—	84
Old Age .....	—	—	—	—	—	—	—	—	—	—	4	38	51	26	119
Affections produced by External Causes .....	6	4	4	14	6	4	9	10	11	15	21	16	9	3	118
Ill-defined Causes .....	—	—	—	—	—	—	—	—	1	—	—	1	—	—	2
Totals .....	280	78	81	434	36	25	98	113	210	339	451	555	396	88	2745



TABLE NO. 4.

TOTAL BIRTHS, TOTAL DEATHS, INFANTILE DEATHS, AND DEATHS FROM TUBERCULOSIS, *with corresponding rates for each Ward.*

*Population.*—The estimated population for the year is distributed amongst the Wards and Sub-Districts in the same proportion as at the 1921 Census.

*Births.*—Outward transfers are excluded, and then births in St. Pancras institutions are classified according to home address, and inward transfers distributed amongst the Wards and Sub-Districts in proportion to their respective populations.

*Deaths.*—Outward transfers are excluded, and then deaths in public institutions and inward transfers are classified according to home address.

Wards.	Births.		Deaths.		Deaths under 1 year.		Deaths, Tuberculosis (all forms).	
	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.
1	597	16·5	435	12·0	38	64	27	0·7
2	444	19·9	258	11·6	29	65	18	0·8
3	671	18·4	443	12·2	40	60	40	1·1
4	480	18·2	341	12·9	26	54	30	1·1
5	591	19·2	434	14·1	55	93	40	1·3
6	467	22·2	292	13·9	44	94	23	1·1
7	164	10·6	181	11·7	19	116	14	0·9
8	466	16·9	333	12·0	26	56	35	1·3
No Address	—	—	28	—	3	—	4	—
Total ..	3880	17·9	2745	12·7	280	72	231	1·1

the large Towns, and of London and the Metropolitan Boroughs for 1925. (52 weeks ended 2nd January, 1926.)

	Estimated Population, Mid. 1924.	Birth Rate.	Death Rate.	Infantile Mor- tality.		Estimated Population, Mid. 1924.	Birth Rate.	Death Rate (Crude).	Infantile Mor- tality.
<b>England and Wales</b> ...	<b>38,890,000</b>	<b>18.3</b>	<b>12.2</b>	<b>75</b>	<b>County of London</b> ...	<b>4,576,505</b>	<b>18.0</b>	<b>11.7</b>	<b>67</b>
Birmingham ...	946,980	19.2	11.5	75	<i>West.</i>				
Liverpool ...	851,800	22.9	13.7	98	Paddington ...	146,400	16.0	11.8	73
Manchester ...	755,000	19.4	14.1	92	Kensington ...	178,550	15.9	12.9	80
Sheffield ...	525,000	18.0	11.5	83	Hammersmith ...	134,200	17.5	11.9	65
Leeds ...	471,600	18.1	12.5	87	Fulham ...	163,100	17.2	10.6	75
Bristol ...	386,200	17.9	13.2	76	Chelsea ...	64,580	14.5	13.8	66
West Ham ...	317,400	24.7	10.6	58	City of Westminster ...	139,900	10.7	12.1	69
Hull ...	296,800	20.3	13.0	100	<i>North.</i>				
Bradford ...	290,200	16.7	13.7	95	St. Marylebone ...	105,300	14.2	11.7	60
Newcastle-on-Tyne ...	285,900	24.5	13.3	79	Hampstead ...	87,600	12.2	10.1	55
Stoke-on-Trent ...	278,000	23.1	13.5	105	<b>St. Pancras</b> ...	<b>214,300</b>	<b>18.1</b>	<b>12.6</b>	<b>71</b>
Nottingham ...	270,300	19.1	13.4	94	Islington ...	337,400	19.4	12.2	63
Salford ...	243,700	18.6	13.3	103	Stoke Newington ...	52,920	15.5	11.6	63
Leicester ...	241,800	17.9	12.7	86	Hackney ...	226,900	18.0	11.4	64
Portsmouth ...	232,000	19.4	12.1	61	<i>Central.</i>				
Cardiff ...	226,200	21.4	12.5	88	Holborn ...	43,250	12.2	12.3	65
Croydon ...	196,000	17.9	10.9	52	Finsbury ...	77,180	22.6	13.6	59
Plymouth ...	192,900	19.0	12.3	64	City of London ...	13,330	7.5	11.1	60
Bolton ...	181,100	16.1	13.3	86	<i>East.</i>				
Willesden ...	169,100	15.1	9.8	67	Shoreditch ...	106,500	24.7	13.3	88
Rhondda ...	167,900	21.7	11.6	96	Bethnal Green ..	119,200	22.1	12.0	80
Southampton ..	167,300	19.4	11.6	58	Stepney ...	253,740	21.0	12.1	75
Sunderland ...	165,100	25.2	15.2	116	Poplar ...	167,300	22.9	11.6	75
Swansea ...	162,700	20.5	11.2	68	<i>South.</i>				
Birkenhead ...	154,100	20.7	11.5	90	Southwark ...	187,714	21.4	13.1	77
Tottenham ...	153,100	14.9	10.2	62	Bermondsey ...	122,100	22.7	12.6	75
Oldham ...	147,300	15.3	14.6	100	Lambeth ...	309,300	17.9	12.2	62
East Ham ...	146,900	14.6	9.9	61	Battersea ...	171,000	18.6	10.4	58
Brighton ...	137,500	16.8	12.8	54	Wandsworth ...	338,200	14.4	10.4	53
Middlesbrough ...	136,300	25.7	14.4	98	Camberwell ...	273,700	17.8	11.0	64
Derby ...	133,700	18.7	11.7	74	Deptford ...	115,200	18.9	11.9	62
Leyton ...	133,500	12.5	9.9	66	Greenwich ...	102,470	18.8	11.2	69
Walthamstow ...	131,100	16.4	9.9	57	Lewisham ..	184,900	15.7	10.2	56
Coventry ...	129,100	17.5	10.8	75	Woolwich ...	139,980	17.9	10.7	54
Gateshead ...	128,700	22.3	13.7	116					
Blackburn ...	127,600	15.3	13.6	92					
South Shields ...	126,600	23.6	13.5	113					
Stockport ...	126,600	16.4	13.5	91					

† Estimated population to middle of 1925.



TABLE No. 6.—METEOROLOGICAL TABLE FOR SAINT PANCRAS, 1925.

(Deduced from observations at Camden Square, N.W. 1.)

	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
Barometer—												
Mean Pressure at 32° F. at station level (Bar. 112 ft. above M.S.L.)	30.257	29.684	30.175	29.866	29.807	30.136	29.926	29.982	29.992	29.944	29.944	29.781
Air temperature—												
Mean of—												
Maximum A ... ..	46.5	47.2	47.8	55.5	64.8	72.7	74.2	69.7	62.3	59.7	45.6	42.5
Minimum B ... ..	37.8	37.9	36.1	40.6	48.1	52.0	56.6	55.0	47.5	46.1	36.8	34.5
Mean of A and B ... ..	42.1	42.5	41.9	48.1	56.5	62.3	65.4	62.3	54.9	52.9	41.2	38.5
Difference from Average ... ..	+3.3	+2.5	-1.0	-0.3	+1.4	+1.3	+1.1	-0.9	-3.7	+2.2	-3.1	-2.0
Humidity—Morning ... ..	91	87	83	75	73	68	75	80	82	90	88	91
Earth Temperature at 4 ft. depth ... ..	45.4	44.5	43.3	44.7	48.8	55.3	58.6	59.2	57.1	54.1	50.2	44.0
Bright Sunshine—												
Total Observed (daily mean) ... .. Hrs.	1.04	1.78	2.47	3.26	6.43	8.85	5.79	4.09	3.29	2.63	2.04	0.86
Per cent of total possible ... ..	12	18	21	24	41	54	36	28	26	25	23	11
Difference from average ... .. Hrs.	—	—	—	—	—	—	—	—	—	—	—	—
Rain and other forms of precipitation—												
Number of Days ... ..	11	16	13	15	19	2	15	15	20	15	14	17
Total Fall ... .. Ins.	2.01	2.86	0.68	1.63	1.66	0.11	3.58	2.71	2.25	3.09	1.54	2.79
Difference from average ... ..	+0.16	+1.22	-1.18	+0.08	-0.12	-1.89	+1.18	+0.51	+0.43	+0.47	-0.83	+0.39

Hour of observation, 9 a.m. (Greenwich time). The readings for Bright Sunshine are those taken at Regents Park—no readings being recorded at Camden Square.

TABLE No. 7.

Inspections and Re-inspections made by District Inspectors and by the Factory and Workshop Inspector during the year 1925.

DUTIES AND PREMISES.	RACKHAM.		LONNON.		BROWN.*		DILLON.		WALKER.		JAMES.		ADKINS.†		AKERS.		JAFFA.		CAPEL.		NIXON.		WEST.‡		THOMPSON.		TOTALS.		
	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	Inspection.	Re-inspection.	
DISTRICT INSPECTORS.																													
<i>Inspection of Dwelling Houses—</i>																													
After Infectious Disease .. .. .	67	—	126	208	151	254	195	33	85	25	190	512	61	66	158	283	71	95	126	366	135	231	16	42	—	—	1381	2118	
Upon Complaint (whole house inspected) .. .. .	—	—	38	223	51	331	117	111	43	15	85	137	38	264	51	91	16	32	105	651	116	337	11	—	—	—	706	2194	
Registered tenement houses (as such) .. .. .	15	205	—	—	—	—	—	—	35	76	—	—	—	—	—	—	—	59	46	—	62	337	—	—	—	170	588		
Other inscribed dwellings (as such) .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	261	—	—	—	—	—	—	
Housing Act, 1909: 17 (1) .. .. .	—	—	—	—	—	—	—	—	72	468	59	113	—	—	18	6	—	—	2	1	—	3	—	—	—	—	133	585	
Housing Act, 1925 .. .. .	—	—	—	—	—	—	9	8	11	12	—	—	—	—	—	—	—	—	13	22	—	—	19	25	—	—	70	73	
Other house to house inspections .. .. .	—	—	—	—	—	—	—	—	—	20	—	—	2	—	—	—	—	—	55	170	3	25	—	—	—	—	60	215	
Complaints (not involving the complete inspection of a dwelling house) .. .. .	109	570	452	561	277	532	215	632	199	1109	299	746	77	165	364	580	266	333	85	185	304	560	79	200	—	—	2826	6233	
Drainage—																													
Under notice. Plans, supervision, &c. .. .. .	7	178	47	248	52	451	241	1350	4	237	47	605	8	95	312	10	73	35	597	38	561	9	137	1	2	499	4846		
Voluntary. Do. do. .. .. .	17	235	124	444	41	107	14	50	17	154	35	118	17	376	384	1	132	33	167	13	179	14	86	5	18	846	3082		
New Buildings. Do. do. .. .. .	1	1427	39	180	—	—	8	340	2	219	8	19	—	3	30	—	—	18	97	—	—	—	—	—	—	112	2286		
Yards of Mews and Stables .. .. .	290	—	494	—	339	4	243	1	584	—	57	—	110	—	594	—	860	—	485	6	440	13	37	—	—	4533	24		
Smoke Shafts observed .. .. .	—	—	—	—	4	2	7	1	46	2	5	—	19	2	5	—	—	—	44	—	14	—	—	—	—	273	7		
Regulated Trades—																													
Offensive trades .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	46	—	
Rag and bone dealers .. .. .	—	—	10	—	3	2	1	—	—	—	—	—	3	—	5	—	—	—	4	—	—	—	—	—	—	—	38	3	
Other effluvia businesses .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Inspection of Market Streets .. .. .	—	—	48	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	48	—	
Visits to closed underground rooms .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Infectious Diseases. Inquiry, removal, disinfection, &c. .. .. .	113	—	222	9	225	24	196	14	219	21	169	13	83	11	244	1	120	—	193	—	145	25	30	8	—	—	1959	126	
Bakehouses—																													
Workshop .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	173	107	173	107
Factory .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	136	117	136	117
Restaurant kitchens .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	95	185	95	185
Laundries—																													
Workshop .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	15	5	
Factory .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	18	
Other Factories .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	234	647	234	617
Other Workshops .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	398	1176	398	1176
Other Workplaces .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	83	142	83	142
Other Duties .. .. .	11	—	123	—	27	—	7	—	1	—	86	1	63	—	34	—	22	34	93	—	71	51	24	—	—	—	58	87	
Totals .. .. .	631	2615	1723	1873	1200	1797	1253	2540	1418	2358	1044	2265	481	982	1898	1277	1737	1670	1292	2263	1345	2240	230	560	1749	2418	15405	24864	

\* Absent ill 9 weeks.

† Absent ill 20 weeks.

‡ Part year only.









TABLE NO. 8.—*Inspections and Re-inspections and other work of the Food Inspectors during 1925.*

DUTIES AND PREMISES.	Visits and Inspections.			Re-inspections after Intimation Notices.		
	Mr. Auger.	Mr. Child.	TOTALS.	Mr. Auger.	Mr. Child.	TOTALS.
Milkshops .. .. .	234	392	626	—	—	—
Dairies .. .. .	172	17	189	—	—	—
Cowsheds .. .. .	15	24	39	—	—	—
Other Premises of Milk Purveyors .. .. .	3	14	17	—	—	—
Margarine Factories .. .. .	1	—	1	—	—	—
Butter Factories .. .. .	2	—	2	—	—	—
Ice Cream Premises .. .. .	148	245	393	1	—	1
Slaughter Houses .. .. .	65	84	149	—	—	—
Premises where Prepared Meats are made (sausages, pies, tripe, cooked meat, &c.) .. .. .	70	309	379	—	—	—
Butchers' Shops .. .. .	47	179	226	1	—	1
Fried Fish Shops and Fish Curer's premises .. .. .	145	243	388	3	—	3
Marketing Places .. .. .	2001	1714	3715	—	—	—
Other Premises where Food or Drugs are sold .. .. .	96	6	102	—	—	—
Other Visits .. .. .	143	335	478	—	—	—
<b>TOTAL .. .. .</b>	<b>3142</b>	<b>3562</b>	<b>6704</b>	<b>5</b>	<b>—</b>	<b>5</b>
<b>SAMPLES, &amp;c., TAKEN.</b>	<b>Formal Samples</b>		<b>Informal Samples</b>			
No. of Milk samples .. .. .	178	188	366	—	4	4
„ Cream samples .. .. .	10	20	30	—	—	—
„ Butter and Margarine samples .. .. .	59	90	149	—	—	—
„ Other samples (specified below)—						
Arrowroot .. .. .	1	3	4	—	—	—
Brawn .. .. .	1	—	1	—	—	—
Celery .. .. .	—	—	—	—	1	1
Cocoa .. .. .	12	4	16	—	—	—
Coffee .. .. .	14	4	18	—	—	—
Dripping .. .. .	—	1	1	—	—	—
Flour .. .. .	25	15	40	—	—	—
Lard .. .. .	9	11	20	—	—	—
Mustard .. .. .	9	6	15	—	—	—
Olive Oil .. .. .	6	—	6	—	—	—
Oysters .. .. .	—	—	—	1	—	1
Pepper .. .. .	11	3	14	—	—	—
Pork Pie .. .. .	—	1	1	—	—	—
Prescriptions .. .. .	12	—	12	—	—	—
Rice .. .. .	5	5	10	—	—	—
Salad Oil .. .. .	2	—	2	—	—	—
Sausages .. .. .	14	9	23	—	—	—
Sugar .. .. .	6	—	6	—	—	—
Vinegar .. .. .	—	10	10	—	—	—
<b>TOTAL .. .. .</b>	<b>374</b>	<b>370</b>	<b>744</b>	<b>1</b>	<b>5</b>	<b>6</b>

TABLE No. 8 (con.).—*Inspections and Re-inspections and other work of the Food Inspectors during 1925.*

UNSOOUND FOOD.							Mr. Auger.	Mr. Child.	TOTALS.	Mr. Auger.	Mr. Child.	TOTALS.						
No. of surrenders and seizures :—							SURR	ENDE	RED.	SEIZFD.								
Meat, &c.	..	..	..	..	..	..	5	3	8	—	—	—						
Fish	..	..	..	..	..	..	2	4	6	—	—	—						
Shellfish	..	..	..	..	..	..	—	—	—	—	—	—						
Other Foods (specified below) :—																		
Margarine	..	..	..	..	..	..	—	1	1	—	—	—						
Fruit	..	..	..	..	..	..	7	6	13	—	—	—						
Vegetables	..	..	..	..	..	..	—	2	2	—	—	—						
TOTAL							..	..	..	..	..	..	14	16	30	—	—	—
Inspections of Registered Canal Boats							..	..	..	..	..	..	5	—	5	—	—	—



TABLE No. 9.

Visits, etc., made by Women Inspectors during 1925.

	First Visits.										Subsequent Visits.										Call made, but admission not obtained.										Grand Total.
	Miss Bibby.	Miss Smith.	Miss Anderson.	Mrs. Hunter.	Miss Blaxland.	Miss Camman.	Miss Holland.	Total.	Miss Bibby.	Miss Smith.	Miss Anderson.	Mrs. Hunter.	Miss Blaxland.	Miss Camman.	Miss Holland.	Total.	Miss Bibby.	Miss Smith.	Miss Anderson.	Mrs. Hunter.	Miss Blaxland.	Miss Camman.	Miss Holland.	Total.							
Infants ... ..	—	—	—	—	—	—	—	131	39	237	509	18	—	—	—	803	—	—	—	—	—	—	—	266	1200						
Expectant Mothers ... ..	—	—	—	—	—	—	—	113	7	2	34	8	—	—	—	51	—	—	—	—	—	—	—	90	254						
Ophthalmia Neonatorum ... ..	—	—	—	—	—	—	—	49	11	13	12	30	23	—	—	114	—	—	—	—	—	—	—	26	189						
Puerperal Fever ... ..	—	—	—	—	—	—	—	29	4	5	6	2	4	—	—	24	—	—	—	—	—	—	—	11	64						
Tuberculosis—Discharged Soldiers & Sailors	—	—	—	—	—	—	—	79	52	90	45	372	170	117	836	—	—	—	—	—	—	—	—	66	981						
Do. Others	1	71	34	91	110	66	88	461	578	241	459	1134	1157	921	4190	—	—	—	—	—	—	—	—	102	936						
Measles and German Measles ... ..	—	—	—	—	—	—	—	2535	29	37	11	33	92	21	223	—	—	—	—	—	—	—	—	26	187						
Whooping Cough ... ..	—	—	—	—	—	—	—	490	28	27	16	2	28	4	105	—	—	—	—	—	—	—	—	5	54						
Scabies ... ..	—	—	—	—	—	—	—	68	1	—	7	2	—	—	17	—	—	—	—	—	—	—	—	2	11						
Other Cases of Illness ... ..	—	—	—	—	—	—	—	1858	60	227	44	28	23	1	383	—	—	—	—	—	—	—	—	3	180						
Verminous Persons ... ..	—	—	—	—	—	—	—	87	1	2	10	1	1	3	18	—	—	—	—	—	—	—	—	1	16						
To Hospitals and other Voluntary Institutions	100	606	122	99	283	194	172	1576	—	—	—	—	3	—	3	—	—	—	—	—	—	—	—	5	1584						
Domestic Workshops ... ..	—	—	—	—	—	—	—	315	—	—	1	2	12	—	15	—	—	—	—	—	—	—	—	—	90						
Home Workplaces ... ..	—	—	—	—	—	—	—	462	5	—	—	—	3	—	8	—	—	—	—	—	—	—	—	22							
Laundries—Factory	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—						
—Workshop	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—						
Restaurant Kitchens ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—						
Other Factories ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—						
Workshops ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—						
Workplaces ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—						
Milk Enquiries ... ..	—	—	—	—	—	—	—	95	1	4	—	1	1	2	9	—	—	—	—	—	—	—	—	—	11						
Attendances at Clinics ... ..	—	—	—	—	—	—	—	321	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	321						
Attendances at Committees, &c. ... ..	165	91	—	—	—	—	—	264	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	264						
Other Visits and Inspections ... ..	3	24	2	92	98	68	369	656	1	2	3	37	1	—	44	—	—	—	—	—	—	—	—	22							
TOTALS ... ..	269	1601	1055	1489	1272	1669	2254	9589	817	877	1157	1675	1520	1097	7143	—	504	287	498	426	238	163	2046	18778							

TABLE No. 10.—*Total Number of Inspections and Re-inspections made by individual Inspectors and Visitors during the year 1925.*

Inspector.	Inspections.	Re-inspections.	Call made, but admission not obtained.	Total.
1. Mr. Rackham ... ..	631	2615	—	3246
2. „ Lonnon ... ..	1723	1873	—	3596
3. „ Brown * ... ..	1200	1797	—	2997
4. „ Dillon ... ..	1253	2540	—	3793
5. „ Walker ... ..	1418	2358	—	3776
6. „ James ... ..	1044	2265	—	3309
7. „ Adkins † ... ..	481	982	—	1463
8. „ Akers ... ..	1893	1277	—	3170
9. „ Jaffa ... ..	1737	1670	—	3407
10. „ Capel ... ..	1292	2263	—	3555
11. „ Nixon ... ..	1345	2246	—	3591
12. „ West (Temporary) ‡ ... ..	239	560	—	799
13. „ Thompson (Factories and Workshops)	1149	2418	—	3567
14. „ Auger } (Food and	3535	6	—	3541
15. „ Child } Food premises) (	3948	5	—	3953
16. Miss Bibby ... ..	269	—	—	269
17. „ Smith ... ..	1601	817	504	2922
18. „ Anderson    ... ..	1055	877	287	2219
19. Mrs. Hunter ... ..	1489	1157	428	3074
20. Miss Blaxland ... ..	1272	1675	426	3373
21. „ Camman ... ..	1669	1520	238	3427
22. „ Holland ... ..	2234	1097	163	3494
Totals ... ..	32477	32018	2046	66541

\* Absent ill, 9 weeks.

† Absent ill, 26 weeks.

‡ Part year only.

|| Absent ill 7 weeks.



TABLE 11.

The following table gives the number of inspections made by individual Inspectors during each of the past 5 years:—

## TOTAL INSPECTIONS.

INSPECTOR.	1921	1922	1923	1924	1925
Mr. Rackham .. .. .	3157	3369	2985	2886	3246
„ Lonnon .. .. .	3241	3085	3179	3103	3596
„ Brown .. .. .	3563	3545	3554	3581	2997 <sup>1</sup>
„ Dillon .. .. .	3262	3024	3614	3348	3793
„ Walker .. .. .	4112	3898	3743	3823	3776
„ James .. .. .	3781	4131	3833	3532	3309
„ Adkins .. .. .	3386	3656	3665	3735	1463 <sup>2</sup>
„ Akers .. .. .	3500	3490	3700	3711	3170
„ Jaffa .. .. .	4300	3765	3532	3503	3407
„ Capel .. .. .	3642	3780	3871	3781	3555
„ Nixon .. .. .	4479	4866	4539	4487	3591
„ West (Temporary) .. .. .	—	—	—	—	799 <sup>3</sup>
Mr. Thompson (Factories and Workshops)	3533	3388	3366	3687	3567
„ Auger (Food Inspector) .. .. .	3270	3239	3430	3593	3541
„ Child ( „ „ ) .. .. .	3147	3670	3685	3776	3953
Miss Bibby <sup>4</sup> .. .. .	506	474	486	409	269
„ Smith .. .. .	1799	1943	1812	2247	2922
„ Anderson .. .. .	1900	1866	1509	1579 <sup>5</sup>	2219 <sup>6</sup>
Mrs. Hunter .. .. .	1680	1718	1541	2626	3074
Miss Blaxland .. .. .	2421	2982	2745	3303	3373
„ Camman .. .. .	2002	2610	2303	3399	3427
„ Holland .. .. .	1386 <sup>3</sup>	2846	2373	3428	3494

1. Absent ill 9 weeks.

2. Absent ill 26 weeks.

3. Part of year only.

4. And office duties.

5. Absent ill 11 weeks.

6. „ 7 „











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