

[Report of the Medical Officer of Health for Hampstead, Metropolitan Borough of].

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Hammersmith (London, England). Metropolitan Borough.

Publication/Creation

[1928]

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THE

Metropolitan Borough of Hampstead.

REPORT

for the year 1927

OF THE

Medical Officer of Health.

FRANK E. SCRASE,
F.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. (Lond.).

Public Health Department,
Town Hall, Haverstock Hill,
Hampstead, N.W. 3.

Together with the Reports of the Tuberculosis Medical Officer, the
Medical Officer-in-Charge of the Pre-Maternity Clinics, and the Public
Analyst.

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His Worship the Mayor (Mr. Councillor E. COLLINGWOOD ANDREWS, M.A., M.D., J.P.)
ex-officio member of Committees.

PUBLIC HEALTH COMMITTEE.

Chairman: Mr. Councillor S. A. BOYD, M.S., M.B., F.R.C.S.

Mr. Alderman C.W. Cunningham, M.R.C.S., D.P.H. Mr. Councillor C. J. R. MacFadden, O.B.E.,
 M.D., C.M.

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„ „ G. Buckle	Councillor Miss Richards
„ „ R. H. H. Cust, M.A., J.P.	„ Mrs. Russell, J.P.
„ „ W. S. George, M.D., B.S., M.R.C.S., L.R.C.P.	Mr. Councillor H. W. Snow
Mr. Councillor J. M. Symmons, M.A.	

Sub-Committees:—Drainage Plans and Tuberculosis.

MATERNITY AND CHILD WELFARE COMMITTEE.

Members of the Council.

Chairman: Rev. H. J. MARSHALL, M.A.

Councillor Mrs. Arnholz	Councillor Miss Lodge, M.A., F.R.HIST.S.
Mr. Councillor S. A. Boyd, M.S., M.B., F.R.C.S.	Mr. Councillor T. H. Nunn, M.A.
„ R. H. H. Cust, M.A., J.P.	Councillor Miss Richards
Councillor Mrs. Fisher, L.R.A.M., A.R.C.M.	„ Mrs. Russell, J.P.
„ Miss Glover	

Persons not Members of the Council.

(Appointed in pursuance of Section 2 (2) of the Maternity and Child Welfare Act. 1918.)

Dr. Mary B. Douie. Miss C. E. Dugdale. Mrs. E. S. Grundy. Mrs. E. M. Staines.
 Lady H. K. Thompson.

Sub-Committees:—(a) Applications for Assistance, and (b) Child and Maternal Mortality.

HOUSING COMMITTEE.

Chairman: Mr. Councillor B. S. TOWNROE, M.A.

Mr. Alderman W. J. Spriggs	Councillor Mrs. Fisher, L.R.A.M., A.R.C.M.
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„ „ R. H. H. Cust, M.A., J.P.	Mr. Councillor H. S. Salter
„ „ H. S. Davie	„ „ J. M. Symmons, M.A.
„ „ W. Easun	

PUBLIC HEALTH DEPARTMENT,
TOWN HALL,
HAVERSTOCK HILL,
HAMPSTEAD, N.W. 3.
13th March, 1928.

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

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present to you my Annual Report for the year 1927.

It is compiled as an "Ordinary Report" in accordance with the instructions of the Ministry of Health, wherein were indicated the information that should be given.

A summary of the statistics for 1927 will be found on page 6, and if these are compared with preceding years it will be seen that the health of the Borough is maintained at a high standard. It will be noted, however, that the birth rate has fallen, while both the marriage rate and death rate have risen, the death rate being 1·6 per 1,000 above the rate for last year. As I have stated on previous occasions, I do not think these figures represent the actual position; I feel sure the next Census, 1931, will reveal the fact that the population of the Borough is much higher than the Registrar-General's estimate of 86,160, which is the basis on which these rates are calculated. It will be seen that the Registrar-General estimates that the population has shrunk by 1,370 since last year. I have formed the opinion that the estimate is very much below the actual population now residing in the Borough.

It is satisfactory to see that the infantile death rate has fallen, being only 51 per thousand births, and, although more illegitimate children were born, it is gratifying to note that our reduction of infantile mortality is almost entirely due to the decline in the death rate among illegitimate infants, which has dropped to a rate of 88 per thousand as against 223 per thousand last year.

The death rates from Measles and Tuberculosis also show a welcome decline.

I would like to take the opportunity of expressing my thanks to the Council, especially to the Chairmen and Members of the Public Health, Housing, and Maternity and Child Welfare Committees, for the support and sympathetic consideration they have afforded me.

I desire also to place on record my appreciation of the work of the Staff of the Department, who have at all times accorded me their loyal and unselfish co-operation.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

FRANK E. SCRASE,

Medical Officer of Health.

Section I.

Natural and Social Conditions of the Borough.

Area of Borough	..	2265 acres (including 12 acres covered by water).
Population at Census, 1921	..	86,153
Population estimated to middle of 1927	..	86,160
Number of inhabited houses, Census 1921	..	12,557
Number of families or separate occupiers, ditto	..	21,520
Rateable Value, 1st April, 1927	..	£1,333,794
Sum represented by a penny rate	..	£5,388 9s. 4d.

Social conditions, including the chief occupations of the inhabitants, and the influence of any particular occupation on public health.

Hampstead is mainly a residential district, and is less densely populated than the Administrative County as a whole, the number of persons per acre being 38 and 60 respectively at the Census of 1921. The density, however, varies very much throughout the Borough, being very sparse in some places, but rising in others to as high as 238 per acre.

Owing to its residential character, there are no occupations peculiar to the Borough. The greatest number of persons engaged in one occupation are those classified as domestic servants; these numbered 11,264 at the last Census.

Summary of Vital Statistics for 1927.

Marriages	..	..	..	..	760
Marriage Rate	..	..	..	..	17.6
Births	..	M.	F.	Totals.		
{	Legitimate	479	458	937	1,028	
	Illegitimate	47	44	91		
Birth Rate	..	..	..	..	11.9
Deaths	..	1,055	..	Death Rate	.. 12.2	
Maternal Deaths—No. of women dying in, or in consequence of, child-birth	{	(1) From Sepsis	At home.	In hospital.	5	
	{	(2) Other Causes	1	2		
Deaths of Infants under 1 year of age:—						
Legitimate	..	45	Illegitimate	..	8	
				Total	53	
Infantile Mortality Rate per 1,000 births:—						
Legitimate	..	48	Illegitimate	..	88	
				{	Legitimate and Illegitimate	51

Deaths from Measles (all ages)	2
„ Whooping Cough (all ages)	4
„ Diarrhœa (under 2 years of age)	7
Deaths from Tuberculosis of	
The Respiratory System .. 38 Death-Rate ..	0·44
Deaths from All Forms of	
Tuberculosis 45 Death-Rate ..	0·52

VITAL STATISTICS.

Population.

In accordance with the prevailing custom, I have adopted the Registrar-General's estimate of the population for the purposes of this Report, and this was calculated to have been 86,160 at the middle of the year 1927.

I have prepared the following estimates, based upon the Census figures, of the population of each Ward.

Ward.	Estimated Population.
No. 1 (Town)	12,790
No. 2 (Belsize)	13,790
No. 3 (Adelaide)	10,400
No. 4 (Central)	9,500
No. 5 (West End)	13,490
No. 6 (Kilburn)	15,590
No. 7 (Priory)	10,600
The Borough	86,160

Marriages.

According to the return kindly furnished to me by the Superintendent Registrar of Hampstead, it appears that 760 marriages were registered in the Borough during 1927, as compared with 678 in the preceding year.

The marriage rate was 17·6 per 1,000 of the population, as compared with the rate of 15·5 in 1926.

Births.

In the following Table the births for 1927 have been analysed according to sex, etc. :—

BIRTHS.	MALES.			FEMALES.			TOTALS.		
	Legiti- mate.	Illegiti- mate.	Total.	Legiti- mate.	Illegiti- mate.	Total.	Legiti- mate.	Illegiti- mate.	Total.
Registered in the Borough	608	40	648	582	46	628	1190	86	1276
Add number occurring outside the Borough whose mothers were Hampstead residents	93	22	115	95	14	109	188	36	224
	701	62	763	677	60	737	1378	122	1500
Deduct number who could not be deemed to belong to Hamp- stead	222	15	237	219	16	235	441	31	472
Net number belonging to Hampstead, 1927	479	47	526	458	44	502	937	91	1028
Net Births, 1926 ..	519	45	564	482	31	513	1001	76	1077

The 1028 net births were distributed among the various Wards as follows :—No. 1 (Town) 109, No. 2 (Belsize) 137, No. 3 (Adelaide) 104, No. 4 (Central) 89, No. 5 (West End) 181, No. 6 (Kilburn) 243, and No. 7 (Priory) 165.

The following are the birth rates per 1,000 of the population for each of the Wards, the Borough, London, and England and Wales :—

No. 1 (Town) Ward	..	..	8.5
No. 2 (Belsize) „	..	..	9.9
No. 3 (Adelaide) „	..	..	10.0
No. 4 (Central) „	..	..	9.4
No. 5 (West End) „	..	..	13.4
No. 6 (Kilburn) „	..	..	15.6
No. 7 (Priory) „	..	..	15.6
The Borough ..	..	..	11.9
London ..	..	..	16.1
England and Wales	..	..	16.7

There was no Natural Increase in population, *i.e.*, excess of births over deaths. The excess of deaths over births amounted to 27.

Legitimate and Illegitimate Births and Birth Rate.

Of the total 1,028 net births belonging to Hampstead, 937 were those of legitimate and 91 of illegitimate children, the latter being at the rate of 89 per 1,000 births. 36 of the Hampstead illegitimate infants were born outside the Borough, chiefly in Lying-in Institutions.

Notification of Births Act, 1907.

All births occurring in the Borough, whether the mother is a Hampstead resident or not, must be notified to the Medical Officer of Health within 36 hours. This is in addition to registration with the Registrar of Births.

The following statement shows the source of information, etc., of the births notified during the year. As live births have to be notified much sooner than they are registered, the number notified differs from the number registered.

	Notified within 36 hours.		Notified after 36 hours.		Total Notified.	
	Live Births.	Still Births.	Live Births.	Still Births.	Live Births.	Still Births.
Notified by midwives ..	582	9	—	—	582	9
„ parents ..	93	—	63	—	156	—
„ doctors ..	374	10	—	—	374	10
„ nurses and others	212	5	—	—	212	5
	1261	24	63	—	1324	24

Still Births.

By the Births and Deaths Registration Act, 1926, which came into operation on 1st June, 1927, it is required that all still-born children (defined in the Act as any child born after the 28th week of pregnancy) shall be duly registered with the Registrar of Births in addition to being notified to the Medical Officer of Health, and it is further provided that it shall not be lawful for the bodies of such infants to be buried before a certificate is issued by the Registrar, or, if there has been an inquest, an order of the Coroner. From 1st July to the end of the year, 11 still births were registered with the Registrar of Births.

In pursuance of the requirements of the Notification of Births Act, 1907, 24 still births were notified to me during the year. Of these, in 8 cases, the mother's home address was not in Hampstead; while 11 still births of Hampstead mothers took place outside the district. The net still births belonging to Hampstead was, therefore, 27.

Section 7 of the Act requires that when a still birth is registered, the relative giving information must either (1) deliver to the Registrar a written certificate that the child was not born alive, signed by a registered medical practitioner or certified midwife, who was in attendance at the birth or who has examined the body of the child; or (2) make a prescribed declaration to the effect that no practitioner or midwife was present or has examined the body, or that his or her certificate cannot be obtained, and that the child was not born alive. When any case as indicated in (2) arises, *i.e.*, where no doctor or midwife was in attendance at birth, or where his or her certificate cannot be obtained, the Registrar should communicate with the Medical Officer of Health for inquiry to be made in order that he may be in a position to inform the Registrar whether he is satisfied that the child was really still-born, or whether there are any suspicious circumstances attaching to the case.

In order to remove any misapprehension that might exist in the matter, the Ministry of Health, in a circular issued on 15th August, 1927, drew attention to the provisions of the Cremation Act, 1902, and the Cremation Regulations, 1920, the former of which provides that no cremation of human remains shall take place except in an approved Crematorium, and the latter defines the expression "human remains" as including the remains of a still-born child; and it was thus made clear that such remains cannot lawfully be disposed of by burning in a hospital furnace or incinerator.

Deaths.

The "recorded" death rate is the rate obtained by calculating the number of "net" deaths per 1000 of the population. From the total deaths registered is deducted the number who were non-resident persons, and, after subtracting these, the number of deaths of civilian Hampstead residents who died outside the Borough is added. The total net deaths during 1927 was 1,055, or 12·2 per 1000 of the population, as compared with 928 in the preceding year. These deaths were distributed among the various Wards as follows:—No. 1 (Town) 139, No. 2 (Belsize) 168, No. 3 (Adelaide) 139, No. 4 (Central) 122, No. 5 (West End) 164, No. 6 (Kilburn) 188, and No. 7 (Priory) 135.

The following are the death-rates per 1000 of the population for each of the Wards, the Borough, London, and England and Wales: —

No. 1 (Town) Ward	..	..	10·9
No. 2 (Belsize) „	..	..	12·2
No. 3 (Adelaide) „	..	..	13·4
No. 4 (Central) „	..	..	12·8
No. 5 (West End) „	..	..	12·1
No. 6 (Kilburn) „	..	..	12·0
No. 7 (Priory) „	..	..	12·7
The Borough ..	..	..	12·2
London ..	..	..	11·9
England and Wales	..	..	12·3

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING THE YEAR
1927.—Arranged in the form of the short List of Causes adopted by
the Registrar-General in consultation with the Ministry of Health.

CAUSES OF DEATH	Sex.	Net deaths at the subjoined ages of "Residents," whether occurring within or without the Borough.									
		All ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and under 75 years.	75 years and upwards.
1	2	3	4	5	6	7	8	9	10	11	12
1. Enteric Fever	M	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
2. Small-pox	M	...	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	...	...	1	...	...	...
3. Measles	M	1	1	...	...	...	...	...	...	...	...
	F	1	...	1	...	...	...	...	...	...	...
4. Scarlet Fever	M	1	...	...	...	1	...	...	...	...	...
	F	...	1	...	...	...	...	...	...	...	...
5. Whooping Cough	M	2	1	...	1	...	...	...	...	...	...
	F	2	1	...	1	...	...	...	...	...	...
6. Diphtheria	M	1	...	...	...	...	...	...	...	1	...
	F	1	...	...	...	1	...	...	...	...	...
7. Influenza	M	16	...	...	...	1	1	...	9	2	3
	F	34	...	...	...	1	1	3	9	10	10
8. Encephalitis Lethargica	M	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
9. Meningococcal Meningitis	M	1	...	...	...	...	...	1	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
10. Tuberculosis of respiratory system	M	19	...	...	...	1	1	6	11	...	...
	F	19	...	...	...	...	6	9	2	1	1
11. Other Tuberculous Diseases	M	2	...	...	1	...	...	1	...	...	...
	F	5	...	1	...	1	...	1	2	...	...
12. Cancer, malignant disease	M	67	...	...	...	...	1	5	31	20	10
	F	93	...	...	...	...	...	10	45	23	15
13. Rheumatic Fever	M	...	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	1	...	...	...	...	...
14. Diabetes	M	5	...	...	...	...	...	...	1	3	1
	F	5	...	...	...	...	...	...	3	2	...
15. Cerebral hæmorrhage, &c.	M	17	...	...	...	...	...	...	8	6	3
	F	38	...	...	...	...	...	...	9	11	18
16. Heart Disease	M	63	...	...	...	...	...	3	21	22	17
	F	94	...	...	...	1	1	5	19	27	41
17. Arterio-sclerosis	M	36	...	...	...	...	...	...	10	17	9
	F	38	...	...	...	...	...	...	9	10	19
18. Bronchitis... ..	M	26	1	1	...	...	...	1	5	7	11
	F	25	...	...	...	...	...	...	5	3	17
19. Pneumonia (all forms) ...	M	28	1	4	1	...	1	2	8	5	6
	F	32	2	2	1	...	...	3	10	6	8
20. Other Respiratory Diseases	M	8	...	...	...	...	1	...	1	2	4
	F	8	...	...	...	...	...	1	2	...	5
21. Ulcer of Stomach or Duodenum	M	11	...	...	...	...	...	1	4	6	...
	F	2	...	...	...	...	...	...	2	...	...
22. Diarrhœa, &c.	M	6	4	1	...	...	...	...	1	...	...
	F	4	2	...	...	...	1	...	1	...	...
23. Appendicitis and Typhlitis	M	3	...	...	...	...	...	1	2	...	...
	F	14	...	...	...	1	1	3	8	...	1
24. Cirrhosis of Liver	M	6	...	...	...	...	...	...	5	...	1
	F	2	...	...	...	...	...	...	...	1	1
25. Acute and Chronic Nephritis	M	17	...	...	...	...	2	1	7	4	3
	F	24	...	...	...	1	...	...	7	9	7
26. Puerperal Sepsis... ..	M	...	...	...	...	...	...	...	...	...	...
	F	2	...	...	...	...	1	1	...	...	...
27. Other accidents & diseases of pregnancy, and parturition	M	...	...	...	...	...	...	...	...	...	...
	F	3	...	...	...	...	...	3	...	...	...
28. Congenital Debility and malformation, premature birth	M	19	19	...	...	...	...	...	...	...	...
	F	15	14	...	...	1	...	...	...	...	...
29. Suicide	M	12	...	...	...	...	...	3	7	1	1
	F	9	...	...	...	...	...	4	4	...	1
30. Other Deaths from Violence	M	14	...	...	1	2	2	3	...	2	4
	F	18	1	...	...	...	1	1	3	8	4
31. Other Defined Diseases	M	85	5	...	1	5	...	10	31	17	16
	F	99	1	2	...	2	5	10	30	17	32
32. Causes ill-defined or unknown	M	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
All causes {	M	466	32	6	5	10	9	38	122	115	89
	F	589	21	6	2	10	17	55	170	128	180
TOTALS		1055	53	12	7	20	26	93	332	243	269

All "Transferable Deaths" of residents, *i.e.*, of persons resident in the Borough who died outside it, have been included. Transferable deaths of non-residents, *i.e.*, of persons resident elsewhere in England and Wales who died in the Borough, have in like manner been excluded.

CAUSES OF DEATH.

The question of more accurate information being obtained as to the cause of death has come under discussion from time to time. There is no doubt that in some cases, in order to spare the feelings of relatives, medical attendants in the past have stated on death certificates the terminal result which caused the death instead of assigning it to the primary and original cause. In this way, for instance, the statistics of syphilis and alcoholism have been unreliable. Under the terms of the Births and Deaths Registration Act, 1926, however, death certificates must be sent by the medical practitioner direct to the Registrar, instead of being given to a relation: thus the desire of the practitioner not to harrow the feelings of relatives of deceased persons by handing to them the medical certificate stating the cause of death, will in future be overcome, and it is to be hoped that more reliable information will be obtained.

The incidence of the chief causes of mortality in Hampstead shows very plainly in a tabular list of the seven principal death-causing diseases in 1927:—

Cancer ..	..	..	..	160
Heart disease	..	..	..	157
Respiratory disease	..	..	..	127
Arterio-sclerosis	..	..	..	74
Cerebral hæmorrhage, &c.	..	..	..	55
Influenza	..	..	..	50
Tuberculosis	..	..	..	45

The following diseases and causes of death call for special mention:—

Maternal Deaths.

Number of women dying in, or in consequence of, child-birth:—

(1) From Sepsis	{ at home —	} 5
	{ in hospital 2	
(2) Other Causes	{ at home 1	} 5
	{ in hospital 2	

These cases are dealt with in detail in Section 7 of this Report.

Infantile Mortality.

The following table shows the deaths and death rates of legitimate and illegitimate infants in 1927:—

LEGITIMATE INFANTS.

No. of births	..	..	..	937
„ deaths	..	..	..	45
Death rate per 1000 legitimate births	..	..	..	48

ILLEGITIMATE INFANTS.

No. of births	..	..	..	91
„ deaths	..	..	..	8
Death rate per 1000 illegitimate births	..	..	..	88

TOTAL.

No. of births	..	..	..	1028
„ deaths	..	..	..	53
Death rate per 1000 births	..	..	..	51

In the following tables the 53 infantile deaths during 1927 have been classified according to diseases in age-periods and in Wards:--

CAUSES 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 and under 6 Months.	6 and under 9 Months.	9 and under 12 Months.	Total Deaths under 1 Year.
1. Small-pox ...	...	...	...	...	...	..	..	...	...	...
2. Chicken-pox ...	...	...	...	...	...	..	..	...	...	...
3. Measles ...	...	...	...	...	...	1	...	...	...	1
4. Scarlet Fever ...	...	...	...	...	...	...	...	...	...	...
5. Whooping Cough ...	...	...	...	...	...	...	1	...	1	2
6. Diphtheria and Croup ...	...	...	...	...	...	...	...	...	...	...
7. Erysipelas ...	...	...	...	...	...	...	...	...	...	...
8. Tuberculous Meningitis ...	...	...	...	...	...	...	...	...	...	...
9. Abdominal Tuberculosis ...	...	...	...	...	...	...	...	...	...	...
10. Other Tuberculous Diseases ...	...	...	...	...	...	...	...	...	...	...
11. Meningitis (not Tuberculous) ...	...	...	...	...	...	...	1	...	...	1
12. Convulsions ...	...	...	...	...	...	1	...	...	...	1
13. Laryngitis ...	...	...	...	...	...	...	...	...	...	...
14. Bronchitis ...	...	...	...	...	...	...	...	1	...	1
15. Pneumonia (all forms) ...	...	...	...	2	2	...	...	...	1	3
16. { Diarrhoea and } ...	...	2	...	...	2	1	1	1	1	6
17. { Enteritis ... } ...	...	...	...	...	...	...	...	...	...	...
18. Gastritis ...	...	...	...	...	...	...	...	...	...	...
19. Syphilis ...	...	...	...	...	...	...	...	...	...	...
20. Rickets ...	...	...	...	...	...	...	...	...	...	...
21. Suffocation, overlying ...	...	...	...	...	...	...	...	...	...	...
22. Injury at Birth ...	...	...	...	...	...	...	...	...	...	...
23. Atelectasis ...	...	...	...	...	...	...	...	...	...	...
24. { Congenital Malformations ...	3	1	1	1	6	2	...	2	3	13
25. { Premature Birth ...	8	1	2	...	11	1	...	...	...	12
26. { Atrophy, Debility and Marasmus ...	3	1	...	...	4	1	2	1	...	8
27. Other causes ...	5	...	...	...	5	...	...	...	...	5
TOTALS ...	19	5	3	3	30	7	5	5	6	53
Females ...	8	3	1	—	12	2	3	2	2	21
Males ...	11	2	2	3	18	5	2	3	4	32

CAUSES OF DEATH.		No. 1 (Town).	No. 2 (Belsize).	No. 3 (Adelaide).	No. 4 (Central).	No. 5 (West End).	No. 6 (Kilburn).	No. 7 (Priory).	Total.
1.	Small-pox ... ..	...	...	...	...	...	...	...	...
2.	{ Chicken-pox ... ..	...	...	...	...	...	...	...	...
3.	Measles ... ..	...	...	...	...	...	...	1	1
4.	Scarlet Fever ... ..	...	...	...	...	...	...	...	...
5.	{ Whooping Cough ... ..	...	...	...	...	...	1	1	2
6.	Diphtheria and Croup ... ..	...	...	...	...	...	...	...	...
7.	Erysipelas ... ..	...	...	...	...	...	...	...	...
8.	{ Tuberculous Meningitis ... ..	...	...	...	...	...	...	...	...
9.	{ Abdominal Tuberculosis ... ..	...	...	...	...	...	...	...	...
10.	{ Other Tuberculous Diseases ... ..	...	...	...	...	...	...	...	...
11.	Meningitis (not Tuberculous) ... ..	...	...	...	...	...	1	...	1
12.	Convulsions ... ..	...	...	...	...	1	...	...	1
13.	Laryngitis ... ..	...	...	...	...	...	...	...	...
14.	Bronchitis ... ..	...	1	...	...	...	...	...	1
15.	Pneumonia (all forms) ... ..	...	...	...	...	1	2	...	3
16.	{ Diarrhoea ... ..	...	...	...	...	...	...	...	...
17.	{ Enteritis (incl. acutegastro) }	1	1	...	1	...	3	...	6
18.	Gastritis ... ..	...	...	...	...	...	...	...	...
19.	Syphilis ... ..	...	...	...	...	...	...	...	...
20.	Rickets ... ..	...	...	...	...	...	...	...	...
21.	Suffocation, overlying ... ..	...	...	...	...	...	...	...	...
22.	Injury at Birth ... ..	...	...	...	...	...	...	...	...
23.	Atelectasis ... ..	...	...	...	...	...	...	...	...
24.	{ Congenital Malformations	3	2	1	...	2	5	...	13
25.	{ Premature Birth	2	...	...	...	3	5	2	12
26.	{ Atrophy, Debility and Marasmus	1	...	1	1	...	4	1	8
27.	Other causes	2	...	...	...	2	...	1	5
TOTAL DEATHS		9	4	2	2	9	21	6	53

Want of Breast Milk has been included under No. 26, Atrophy and Debility.

Net Births in the year	{	legitimate	{ M. 479	Net Deaths in the year of	{	legitimate infants	{ M. 27
			{ F. 458				{ F. 18
	{	illegitimate	{ M. 47		{	illegitimate infants	{ M. 5
			{ F. 44				{ F. 3

Deaths of Young Children.

During 1927, 72 deaths occurred of children under five years of age; this is equivalent to a rate of 12·8 per 1,000 children born in that and the four preceding years.

Year.	Deaths of Infants under 1 year of age.		Deaths of Children under 5 years of age.	
	No.	Rate per 1000 births.	No.	Rate per 1000 Children born in the year and in preceding four years.
1923	54	44	71	10·8
1924	66	56	95	14·3
1925	59	55	76	12·4
1926	65	60	83	14·1
1927	53	51	72	12·8

Tuberculosis.

The deaths from Tuberculosis were as follows :—

Tuberculosis of Respiratory System	..	38
Other Tuberculous Diseases	..	7

Detailed information regarding Tuberculosis will be found in Section 6.

Measles.

During 1927, 2 deaths occurred from this complaint. A reference to these cases, to the operation of the Borough of Hampstead (Measles) Regulations, 1920, under which all cases are compulsorily notifiable, and to the Order of the London County Council, which came into force on 1st April, 1903, extending to Measles certain sections of the Public Health (London) Act, 1891, will be found in Section 7.

Whooping Cough.

Four deaths were reported as being due to Whooping Cough. This disease is referred to in Section 7.

Principal Epidemic Diseases.

All of these, with the exception of whooping cough, are notifiable diseases, and information concerning them is set out in Section 6 of this Report.

Cancer.

During the year, the number of deaths from Cancer was as follows :—

67 Males.	93 Females.	160 Total.
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In considering the greater number of deaths occurring among females, it should be remembered that at the last Census the population of the Borough was found to consist of 52,900 females and 33,253 males.

The deaths from Cancer according to age-periods were as follows :—

			M.	F.
15 and under 25	..	..	1	—
25 and under 45	..	..	5	10
45 and under 65	..	..	31	45
65 and under 75	..	..	20	23
75 and upwards	..	..	10	15

The next tables give the anatomical distribution of the deaths from Cancer in each sex :—

MALES.

Situation.	1922.	1923.	1924.	1925.	1926.	1927.
Tongue	1	—	—	3	2	3
Oesophagus ..	3	4	4	8	2	3
Stomach	7	14	7	9	7	5
Liver and Gall Bladder	4	4	2	3	2	5
Intestines	7	3	8	9	6	2
Rectum	5	10	5	2	4	12
Other organs ..	23	26	35	22	22	37
Totals ..	50	61	61	56	45	67

FEMALES.

Situation.	1922.	1923.	1924.	1925.	1926.	1927.
Tongue	—	—	—	—	—	—
Oesophagus ..	—	3	—	2	—	1
Stomach	6	6	6	9	9	10
Liver and Gall Bladder	4	7	10	7	4	3
Intestines	9	7	13	11	13	1
Rectum	7	20	3	5	5	13
Uterus	12	12	13	11	8	7
Breast	24	18	14	16	25	19
Other organs ..	23	24	31	25	26	39
Totals ..	85	97	90	86	90	93

The Borough Council carry out the destruction of Bedding, Clothing, etc., and the disinfection of rooms in Cancer cases whenever requested; and distribute a leaflet which contains advice and information on the subject of this disease.

Deaths from Violence (excluding Suicide).

32 deaths were classified under this heading, as compared with 31 in 1926.

The causes of death were as follows:—15 to being injured in street accidents, 11 to falls, 3 to burns (clothing catching fire, &c.), 2 to asphyxia, and 1 to a train accident.

Suicide.

21 persons committed suicide, as compared with 10 in 1926.

The causes of death were as follows:—Gas poisoning, 8; poisoning, 4; cut throat, 2; gunshot wound, 1; bullet wound, 2; fall from window, 1; drowning, 1; suffocation, 1; geyser fumes, 1.

Deaths in Homes, Hospitals, etc.

Of the 1,055 deaths of Hampstead citizens which occurred during the year, no less than 212 died in institutions or nursing homes outside the Borough, while 246 died in similar places in Hampstead. It will thus be seen that 43 per cent. of the deaths of residents occurred away from home.

Section 2.**General Provision of Health Services in the Borough.**

HOSPITALS PROVIDED OR SUBSIDISED BY THE BOROUGH COUNCIL OR BY THE LONDON COUNTY COUNCIL.

Fever and Smallpox. Hospitals for patients suffering from these diseases are provided by the Metropolitan Asylums Board.

Tuberculosis. The Borough possesses (a) two endowed beds at the Mount Vernon Hospital at Northwood; and (b) two beds at the Hampstead General Hospital, Haverstock Hill, Hampstead, which latter would be available for surgical tuberculosis. Letters of admission are granted at the discretion of His Worship the Mayor. Residential Institutional Treatment for tuberculous patients is provided by the London County Council.

Maternity.

Queen Charlotte's Hospital. The Borough Council contributes towards the cost of beds in Queen Charlotte's Hospital, which are available for Hampstead residents.

St. Mary's Convalescent Home, Birchington-on-Sea. The Council has a lien on one of the beds in this Home.

New End Hospital, Hampstead. The Council rents a small ward from the Guardians for the confinement of Hampstead patients on a paying basis.

Children.

Northcourt Hospital, Hampstead. The Council has entered into an agreement with this hospital whereby sick and ailing children and children needing minor operations are admitted.

Institutional Provision for Unmarried Mothers, illegitimate infants and homeless children.

The Cross Roads Club at 88, Alexandra Road, Hampstead, controlled by a voluntary committee, exists for unmarried mothers and their infants.

The Hampstead and Hendon Rescue Association has established a home at 43, Rosslyn Hill.

A Foster Home exists at 99, Haverstock Hill, Hampstead, for the children of unmarried mothers.

Further details of most of these Institutions, etc., will be found in Section 7 (Maternity and Child Welfare).

Ambulance facilities.

(a) For infectious cases. { Provided by the Metropolitan Asylums Board.

(b) For non-infectious and accident cases { The Ambulances of the Board are available for non-infectious cases.
The Ambulances of the London County Council and those of the St. John Ambulance Association are available for accident cases.

THE FOLLOWING CLINICS AND TREATMENT CENTRES EXIST.*Maternity and Child Welfare Centres (Consultation and Treatment).**Pre-Maternity Clinic for Expectant Mothers.*

Established and controlled by the Borough Council. The clinics are held as follows :—

Day.	Place.	Hours.
Monday	73, Dynham Road, Kilburn	2.30 p.m.
Thursday	" "	10 a.m.
"	{ 27, Pond Street, Hampstead	2.30 p.m.
	{ Clinic closed 22nd December for re-building of premises.	

Infant Welfare Centres.

Established and controlled by the Hampstead Council of Social Welfare.

Held at 5 premises in various parts of the Borough.

Day Nurseries.

Established and controlled privately.

Held at 27 & 29, Pond Street and 36, Hemstal Road.

The Committee of the Creche at Pond Street presented a Memorial to the Council on 30th June, 1927, referring to the defective state of these premises (in part of which are held the Borough Council's Pre-maternity and Dental Clinics) and to a scheme for the reconstruction of those premises—and asked for the Council's financial assistance towards the annual maintenance of the Creche and towards the rebuilding fund. The Maternity and Child Welfare Committee, to whom the Memorial was referred, gave careful consideration to the matter and being of the opinion that the Creche was doing most necessary work which should receive the support of the Council, recommended that, subject to the sanction of the Ministry of Health, a grant of £100 be made to the Creche for the financial year 1928-29, on the condition that if and when such grant is made, a representative of the Committee should be nominated to serve on the Management Committee of the Creche. To this recommendation the Council agreed on 21st July. The premises were closed in December in view of the rebuilding; the Council's Dental Clinic held its last session there on December 21st and the Pre-maternity Clinic closed on the following day. Subsequently, temporary premises were secured for these Clinics at No. 33, South End Road, while the Creche removed pending the rebuilding to No. 1, Stanley Gardens.

Tuberculosis.

Tuberculosis Dispensary established and controlled by the Borough Council. Sessions held at the Dispensary, 73, Dynham Road, Kilburn, on Tuesdays, 2 p.m.; Wednesdays, 5 p.m.; Fridays, 4.30 and 8 p.m.

Dental Clinics. (a) For Expectant or Nursing Mothers and Children under five years of age.

One established and controlled by the Borough Council: held at 27, Pond Street, Hampstead, on Wednesday mornings at 10 a.m. (Clinic closed 21st December pending rebuilding of premises.)

One established and controlled by the Hampstead Council of Social Welfare: held at the Health Institute, 107, Kingsgate Road, Kilburn, on Tuesday afternoons at 2.30 p.m.

(b) For Tuberculosis Dispensary patients.

The Borough Council has arranged for such of these patients as need dental treatment to attend at the British Dental Hospital, 31, Camden Road, N.W., on Wednesday mornings at 9.30.

Venereal Disease.

Treatment Clinics are arranged by the London County Council; no clinic is situated in the Borough. Particulars of these clinics may be obtained from the Public Health Department at the Town Hall.

PUBLIC HEALTH OFFICERS OF THE BOROUGH COUNCIL, 1927.

** Medical Officers :*

- Frank E. Scrase, F.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. (Lond.),
Medical Officer of Health and Administrative Medical Officer, Tuberculosis and
Maternity and Child Welfare.
- A. J. Scott Pinchin, M.D. (Lond.), M.R.C.P. (Lond.),
Tuberculosis Medical Officer and Assistant Medical Officer of Health for Tuberculosis
Work.
- Miss Mary Kidd, M.B. (Lond.),
Medical Officer in Charge of the Pre-Maternity Clinics.

** Consulting Obstetricians.*

- Miss Margaret Basden, M.D., F.R.C.S., 114, Harley Street, and 26, Thurlow Road,
Hampstead.
- Arthur O. Gray, M.D., F.R.C.S., 18, Harley Street.
- C. S. Lane-Roberts, M.D., M.R.C.S., 64, Harley Street, and 20, Upper Park Road, Hampstead.
- L. C. Rivett, M.C. (Cantab.), F.R.C.S., 118, Harley Street, and 3, Hanover Terrace, Regent's
Park.

Public Analyst :

Henry E. Cox, M.S.C., P.H.D. (Lond.), F.I.C.

** Sanitary Inspectors :*

- W. G. Kershaw, M.B.E., Senior Inspector.
- F. H. Hudson (Sale of Food and Drugs Acts; Orders and Acts re Milk
and other Food; Factory and Workshop Act) } Special Inspectors.
- Mrs. T. Fisher, M.A. (Infectious Diseases, and Factory and Workshop
Act) }
- J. F. Armstrong (Tenement Houses)
- A. Peverett (Wards 1 and 2); W. F. Horniblow (Wards 3 and 7); } District Inspectors.
- J. Grimsley (Wards 4 and 5); A. C. Townsend (Ward 6) }

Assistants to Inspectors :

A. Edwards, E. Stratton, R. Martin, W. Day.

Keeper of Public Mortuary :

R. Martin (temporary), 3a Flat, 6, Back Lane, Flask Walk, N.W. 3.

Disinfecting and Cleansing Stations :

T. Rider, R. Bell, W. Bell, Disinfectors.
Mrs. Blanden, Cleansing Station Attendant.

** Health Visitors and Nurse :*

- Mrs. K. Roche
Mrs. I. G. Steward, C.M.B. } District Health Visitors.
Miss A. Kennedy
Nurse M. Lowen, Tuberculosis Visitor and Dispensary Nurse.

Dentist:

Dental Clinics in connection with the Tuberculosis Dispensary and Maternity and Child Welfare are staffed by The British Dental Hospital, 31, Camden Road, N.W. 1.

Clerks:

Frank S. Hill, Chief Clerk,
†W. Sell, R. H. Box (Cert. Soc. of Apoths. (Disp.)), *Miss E. Blakeman, *Miss E. Selwood,
A. Slade, J. Danielli.

All the Officers give their whole time to their duties, with the exception of the Tuberculosis Medical Officer, the Medical Officer in charge of the Pre-Maternity Clinics, the Public Analyst, and the Cleansing Station Attendant.

All the Sanitary Inspectors, Health Visitors and Nurse possess the necessary qualifications and certificates.

* Contribution to salary or fees of these officers is made under Public Health Acts or by Exchequer grants.

† Acts as Investigation Officer *re* Applications for Assistance, Maternity and Child Welfare Act.

The following changes in the personnel of the staff took place during 1927:—

J. F. Armstrong was appointed as Sanitary Inspector in January.

G. Longley was appointed as Junior Clerk in January and resigned in July, when A. Slade was appointed in his stead.

J. Danielli was appointed as Junior Clerk on the resignation of G. E. Waller in August.

ADDRESSES OF OTHER PUBLIC OFFICERS, MORE OR LESS CONNECTED WITH PUBLIC HEALTH WORK, 1927.

District Poor Law Medical Officers:

Dr. E. A. Seymour, 12, Thurlow Road, N.W. 3.

Dr. W. Butement, 127, West End Lane, N.W. 6.

Public Vaccinators:

Wards 1 (Town) and 2 (Belsize)—

Dr. E. A. Seymour, 12, Thurlow Road, N.W. 3.

9 to 10 a.m., and 8 to 9 p.m.

Wards 3 (Adelaide), 4 (Central) and 7 (Priory)—

Dr. A. H. Hallen, 2, Alexandra Road, N.W. 8.

9 to 10 a.m., and 7 to 8.30 p.m.

Wards 5 (West End) and 6 (Kilburn)—

Dr. W. Butement, 127, West End Lane, N.W. 6.

9 to 10 a.m., and 7 to 8 p.m.

Vaccination Officer:

F. A. Dare, 2, New End, N.W. 3.

Registrar of Births and Deaths:

A. E. Griffiths, 55, Heath Street, N.W. 3, and Health Institute,
107, Kingsgate Road, Kilburn, N.W. 6.

Registrar of Marriages:

E. Best, Town Hall, Haverstock Hill, N.W. 3.

Relieving Officers:

F. A. Dare, 2, New End, N.W. 3.

J. A. Eldridge, 46, Iverson Road, N.W. 6.

Certifying Surgeon (Factory and Workshop Acts):

Dr. C. W. Cooke, 72, Dartmouth Road, Cricklewood, N.W. 2.

H.M. Coroner:

Sir Walter Schröder, 34, Heath Street, N.W. 3.

Coroner's Officer:

Police Constable R. Smale, Hampstead Police Station, Rosslyn Hill.

District Surveyor:

J. E. Mundell, 305, Finchley Road, N.W. 3.

Superintendent Registrar:

R. Bridger, Town Hall, Haverstock Hill, N.W. 3.

H.M. Inspector of Factories for North London District:

Miss A. D. E. Dunch, 99, Queen's Gate, S.W. 7.

PROFESSIONAL NURSING IN THE HOME.

(a) *General.* The Hampstead District Nursing Association, 25, Heath Hurst Road, and the Kilburn and West Hampstead District Nursing Association, 20, Dennington Park Road. Both Associations provide skilled nurses for the sick poor. The Borough Council subsidises the work of the Associations.

(b) *For Infectious Diseases.* By arrangements made between the two Nursing Associations and the Borough Council, whereby the Council contribute towards the expenses of the Associations, nurses are available for cases of Measles, Whooping Cough, Epidemic Diarrhoea, Ophthalmia Neonatorum, Acute Primary or Acute Influenzal Pneumonia, Influenza, Malaria, Dysentery or Trench Fever. During 1927, 40 cases were nursed under this arrangement by the Kilburn and West Hampstead District Nursing Association, and 13 by the Hampstead District Nursing Association.

(c) *For Maternity Cases.* By agreements between the two Nursing Associations and the Borough Council, skilled maternity nursing can be obtained for cases in the Borough. Both Associations have fully trained nurses appointed to attend maternity cases, and any woman can have a fully trained nurse attend her together with her own doctor. A fee is charged the patient, which is in accordance with her means, and may be nothing in very poor cases. The Council make a grant of £100 to the Kilburn and West Hampstead District Nursing Association towards the expenses of their Maternity Nurses, and in respect of the other Association pay a sum of £2 2s. 0d. per maternity case nursed, irrespective of the number of cases involved. During 1927, 59 cases were nursed by the former Association and 16 by the latter.

MIDWIVES.

I am informed by the London County Council that the total number of midwives practising in Hampstead is 32. Of this number, 21 are on the staff of nursing homes and hospitals.

Arrangements have been made by the Borough Council with both Nursing Associations for the provision of properly skilled and registered midwives. The Borough Council makes a grant of £100 to the Kilburn and West Hampstead Association, and in respect of the other Association pay a sum of £2 2s. 0d. per midwifery case nursed.

The fees charged the patient have been carefully considered in reference to the midwives' fees prevailing in the district, and have been graduated so as not to undercut the practising midwives. During 1927, 106 cases were attended by the Midwives of the Kilburn and West Hampstead District Nursing Association, and 14 by the Hampstead District Nursing Association.

CHEMICAL WORK.

The Public Analyst's Laboratories are situate at 11, Billiter Square, E.C. 3. The Report of the Public Analyst will be found in the Appendix, and a survey of the analytical work carried out during the year will be found in Section 3.

LEGISLATION IN FORCE.

List of Local Acts, Special Local Orders, General Adoptive Acts, and Bye-laws, relating to the Public Health, in force in the Borough.

Bye-laws under Sections 16 (1), 16 (2), 39 (1), 39 (2) and 50 Public Health (London) Act, 1891.

Regulations (Underground Rooms) under Section 17 (7) Housing (Town Planning), &c., Act, 1909.

In addition to the foregoing by-laws made by the Borough Council or the late Vestry, which relate *inter alia* to various Sanitary matters; there are in force among others in the Borough Bye-laws made by the London County Council under Section 202 of the Metropolis Management Act, 1855, relating to drainage work, etc.; and under the Public Health (London) Act, 1891, and Section 6 of the Housing Act, 1925, relating to houses divided into separate tenements, etc.

Section 3.

Sanitary Circumstances of the Borough.

SANITARY INSPECTION OF THE BOROUGH.

The following statement contains particulars required to be submitted under Article 19 (15) of the Sanitary Officers Order, 1926, and affords some indication of the work performed by the Sanitary inspectors:—

Total number of dwelling-houses inspected for housing defects,
743.

Total number found not in all respects reasonably fit for human
habitation, 554.

Total number of Inspections during the year, 5,247. Re-inspections.
11,817.

These inspections were occasioned by various causes, *e.g.*, 679 complaints received and investigated; special inspections; examinations after occurrence of infectious disease; sanitary works, voluntary or otherwise, in progress (693 deposits of plans and particulars for re-drainage and other sanitary work were received during 1927).

Total number of Notices served during the year:—

(1) Informal (*i.e.*, intimations), 940; (2) Statutory, 494.

The improvement resulting from the service of these Notices may be gauged in some measure by the following list; but much of the work of the staff does not readily admit of tabulation.

General Conditions—

Houses or parts of houses cleansed (excluding verminous rooms)	.. .. .	583
Dampness in houses or parts of houses abated	..	200
Dilapidated " " " repaired	..	474

Overcrowding—

Rooms found overcrowded	.. .. .	40
Overcrowding abated (rooms) after service of notice	..	3
" " without service of notice	..	—

Underground Rooms—

Found illegally occupied	.. .. .	35
Closed, or illegal occupation discontinued	.. .. .	23
Made to conform	.. .. .	12

Below Floors—

Spaces below floors in the basement or ground floors ventilated		60
---	--	----

Roofs—

Roofs repaired	257
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Gutterings—

Gutterings repaired or renewed	244
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Rainwater Pipes—

Rainwater pipes repaired or renewed	365
" " disconnected from drains	28
" " " " soil-pipes	.. .. .	2

Waste Pipes—

Waste pipes of sinks disconnected from drains	..	1
" " trapped .. ..	..	199
" " repaired or renewed ..	..	207
" " unstopped .. ..	..	13
" of lavatories disconnected from drains	..	2
" " trapped .. ..	..	136
" " repaired or renewed ..	..	142
" " unstopped .. ..	..	6
" of baths disconnected from drains	..	1
" " trapped .. ..	..	114
" " repaired or renewed ..	..	123
" " unstopped .. ..	..	2

Water Supply, &c.—

Water supply re-instated	13
Additional water supply provided to tenements	..	36
No. of tenement houses concerned ..	..	26
Additional sinks provided to tenements ..	..	45
No. of tenement houses concerned ..	..	33
Sinks provided (in addition to above) ..	..	293
Lavatory basins provided .. ..	..	364
Baths provided .. ..	..	229

Water Cisterns—

Water cisterns repaired or renewed	14
" removed from improper positions	..	9
" cleansed .. ..	..	43
" fitted with close fitting covers ..	..	28

Water Closets—

Water closet accommodation provided	14
Additional water closet accommodation provided	..	130
Separate and sufficient provided for each sex ..	..	3
Water closets removed from improper positions	..	17
" provided with proper and sufficient external ventilation .. ..	..	79
Improperly constructed water closet apparatus removed and new provided .. ..	..	20
Water closet apparatus repaired or renewed ..	..	362
" " unstopped .. ..	..	8
" " cleansed .. ..	..	13
" " provided with proper water supply	..	78
" flushing cisterns repaired or renewed ..	..	223

Drains—

Drains repaired or renewed	532
„ cleansed	80
„ unstopped	38
„ ventilated	66

Manholes—

Manholes repaired or renewed	430
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Ventilating Pipes—

Carried to a sufficient height above windows	3
Ventilating pipes of drains repaired or renewed	95
Fresh air inlets repaired or renewed	..	..	..	115

Soil Pipes—

Soil pipes repaired or renewed	196
„ ventilated	..	..	..	14

Gullies and Surface Drains—

Gully traps removed from improper positions	..	..	..	41
„ „ cleansed	..	..	..	3
Inlets or surface drains trapped	..	..	..	12

Paving and drainage of Washhouses, Areas, Yards, &c.—

Washhouse or scullery paving repaired or renewed	..	..	..	36
Areas cleansed	..	..	..	8
Area paving repaired or renewed	..	..	..	86
Areas drained	..	..	..	43
Yards or other open spaces paved	..	..	..	123
Paving of yards or other open spaces repaired or renewed	..	..	..	233
Yards or other open spaces drained	..	..	..	86
Buildings in which horses, &c., are kept; floors paved or repaired	..	..	..	25

Refuse and Receptacles—

Dust bins provided	..	..	..	498
„ „ cleansed	..	..	..	2
Fixed ashpits removed	..	..	..	5
Accumulations or deposits of refuse removed	..	..	..	700
Nuisance from the improper deposit of trade refuse abated	..	..	..	1

Animals—

Nuisances from the improper keeping of animals abated (fowls)	5
---	----	----	----	---

Smoke Nuisances—

Number of nuisances and complaints	..	..	—
„ of observations	..	..	1
„ of notices	..	..	—
„ of summonses	..	..	—

Personal Cleansing—

Number of cleansings of adults	..	..	4
„ of cleansings of children	..	..	1063

Cleansing—

Number of verminous rooms cleansed	..	..	36
„ of houses concerned	..	..	26

Disinfection—

Number of houses or parts of houses and contents disinfected	2327
„ of verminous rooms disinfected	.. .. 19
„ „ articles of clothing disinfected	.. .. *8
„ „ beds disinfected	.. .. 6
„ of persons accommodated at Shelter —

Public Mortuary—

Number of bodies admitted 73
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Increase of Rent and Mortgage Interest (Restrictions) Acts—

Number of certificates applied for 24
„ „ issued	.. .. 17
„ „ refused	.. .. 7

* In addition to this number, the clothing of persons dealt with at the Cleansing Station was also disinfected.

Houses Let in Lodgings.

Reference to action taken with regard to these premises will be found in Section 4.

Businesses of Rag and Bone Dealers.

Under the terms of Sec. 114, Public Health (London) Act, 1891, and Sec. 9, London County Council (General Powers) Act, 1908, the County Council made bye-laws with respect to these businesses.

There is only 1 premises in the Borough where the business of a dealer in Rags, etc., is carried on. These premises are kept under supervision by the Inspector of Workshops and Workplaces.

Underground Rooms.

The required standard to which such rooms must conform, if separately occupied, is prescribed in the Public Health (London) Act, 1891, Section 96; and if used habitually for sleeping purposes, in the Regulations made by the Borough Council under the Housing Act, 1909.

During the year 23 underground rooms were closed or the illegal occupation was discontinued, and in 12 cases the rooms were made to conform to the required standard.

Factory and Workshop Acts.

Section 132 of the Act of 1901 requires every Medical Officer of Health in his Annual Report specially to report on the administration of the Act, and tabulated statements were framed by the Home Secretary with a view to such reports being made upon uniform lines.

The supervision of these premises in London is largely controlled by the Factory and Workshop Acts; and the Public Health (London) Act, 1891. For the purpose of their duties with respect to workshops and workplaces, the Borough Council are given, by section 125 of the Factory and Workshop Act, 1901, the same powers of entry, inspection, taking legal proceedings, or otherwise, as are possessed by His Majesty's Factory Inspectors. Under Section 131 of the Act of 1901, it is the duty of the Borough Council to keep a Register of all Workshops situate within their district.

Inspection of Factories, Workshops, and Workplaces, including Inspections made by Sanitary Inspectors.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories (Including Factory Laundries)	131	5	—
Workshops (Including Workshop Laundries)	529	7	—
Workplaces (Other than Outworkers' premises)	877	26	—
Totals	1537	38	—

Defects found in Factories, Workshops, and Workplaces.

Particulars. (1)	Number of Defects.			Number of offences in respect to which Prosecutions were instituted. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
<i>Nuisances under the Public Health (London) Act, 1891* :—</i>				
Want of cleanliness	37	37	—	—
Want of ventilation	4	4	—	—
Overcrowding	2	2	—	—
Want of drainage of floors	—	—	—	—
Other nuisances	47	47	—	—
Sanitary accommodation {	insufficient	—	—	—
	unsuitable or defective	15	15	—
	not separate for sexes	4	4	—
<i>Offences under the Factory and Workshop Act, 1901:—</i>				
Illegal occupation of underground bakehouse (s. 101)	—	—	—	—
Other offences	—	—	—	—
(Excluding offences relating to outwork, and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops, Transfer of Powers) Order, 1921.				
Totals	109	109	—	—

* Including those specified in Sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health (London) Act, 1891.

Home Work (Outworkers).

Certain classes of work done at the homes of workers are controlled by the Factory and Workshop Act, 1901. The object of this supervision is to prevent work being done in insanitary dwellings, or in premises where there is dangerous infectious disease. Every occupier of a factory, workshop, or place from which home work is given out, and contractors employed by them, are required to keep lists of their home workers. The occupiers are required to send to the local authority on or before 1st February and 1st August in each year copies of such lists. Upon receipt of these lists, the names and addresses of those workers who reside in other districts are forwarded to the Medical Officers of Health concerned, and those home workers resident in the Borough are kept under supervision.

		Outworkers' Lists, Section 107.					
		Lists received from Employers.					
*NATURE OF WORK.		Sending Twice in the year.†			Sending Once in the year.		
		Outworkers		Outworkers		Outworkers	
		Lists	Con- tractors.	Work- men.	Lists	Con- tractors.	Work- men.
1		2	3	4	5	6	7
(1) Wearing Apparel—							
a) making, &c.	30	40	61	5	2	7	
(b) cleaning and washing	11	15	5	5	6	8	
(2) Making-up, ornamenting, finishing and re- pairing of table linen, bed linen, or other household linen (including in the term linen articles of cotton or cotton and linen mixtures), and any process incidental thereto	2	11	5	—	—	—	
(3) Making, ornamenting, mending, and finishing of lace and of lace curtains and nets	—	—	—	—	—	—	
(4) Making of curtains and furniture hangings, and any process incidental thereto	4	4	10	—	—	—	
(5) Cabinet and furniture making and upholstery work	2	4	3	—	—	—	
(6) Making of Electro-plate	—	—	—	—	—	—	
(7) Making of files	—	—	—	—	—	—	
(8) Manufacture of brass and of any articles or parts of articles of brass (including in the term brass any alloy or compound of copper with zinc or tin)	—	—	—	—	—	—	
(9) Fur-pulling	—	—	—	—	—	—	
(10) Making of iron and steel cables and chains	—	—	—	—	—	—	
(11) Making of iron and steel anchors and grapnels	—	—	—	—	—	—	
(12) Making of cart gear, including swivels, rings, loops, gear-buckles, mullin bits, hooks, and attachments of all kinds	—	—	—	—	—	—	
(13) Making of locks, latches, and keys	—	—	—	—	—	—	
(14) Making or repairing of umbrellas, sunshades, parasols, or parts thereof	1	3	—	1	—	1	
(15) Making of artificial flowers	—	—	—	—	—	—	
(16) Making of nets other than wire nets	—	—	—	—	—	—	
(17) Making of tents	—	—	—	—	—	—	
(18) Making or repairing of sacks	—	—	—	—	—	—	
(19) Covering of racquet or tennis balls	—	—	—	—	—	—	
(20) Making of paper bags	1	—	4	—	—	—	
(21) Making of boxes or other receptacles or parts thereof made wholly or partially of paper, cardboard, chip, or similar material	—	—	—	—	—	—	
(22) Making of brushes	—	—	—	—	—	—	
(23) Pea picking	—	—	—	—	—	—	
(24) Feather sorting	—	—	—	—	—	—	
(25) Carding boxing, or packeting of buttons, hooks and eyes, pins, and hair pins... ..	—	—	—	—	—	—	
(26) Making of stuffed toys	—	—	—	—	—	—	
(27) Making of baskets	—	—	—	—	—	—	
(28) Manufacture of chocolate or sweetmeats	—	—	—	—	—	—	
(29) The making or filling of cosques, Christmas crackers, Christmas stockings, or similar articles or parts thereof	—	—	—	—	—	—	
(30) The weaving of any textile fabric	—	—	—	—	—	—	
Total	51	77	88	11	8	16	

Notices served on occupiers as to keeping or sending lists of Outworkers, Nil; Prosecutions in relation to Outworkers' Lists, Nil.

Outwork in unwholesome premises, Sec. 108, Nil; Outwork in infected premises, Secs. 109-110, Nil.

* In the case of those occupiers who gave out work of more than one of the classes specified in column 1, and subdivided their lists in such a way as to show the number of workers in each class of work, the list has been included among those in column 2 (or 5 as the case may be) against the principal class only; but the outworkers have been assigned in columns 3 and 4 (or 6 and 7) into their respective classes.

† The figures in columns 2, 3 and 4 are the total number of the lists received from those employers who comply strictly with the statutory duty of sending two lists each year, and of the entries of names of Outworkers in those lists. 51 lists were received twice in the year. The names of Outworkers that were repeated in the duplicated Returns have not been counted twice.

There are 96 outworkers' premises in Hampstead : of these—

2 are factories
 30 are workshops (8 being domestic workshops)
 7 are workplaces
 57 are single workers

—
 96
 —

Factories.

The following is a list of the different classes of Factories in Hampstead :—

Bakers ..	..	28	Launderers ..	..	2
Bootmakers ..	..	17	Motor and other engineers	..	27
Butchers ..	..	5	Opticians ..	..	1
Carpet beaters ..	..	2	Printers ..	..	8
Coffee roasters ..	..	5	Other trades ..	..	26
Dairymen ..	..	4			
					125

Workshops.

At the end of 1927 there were 377 workshops on the Register, including 62 domestic workshops. Excluding these latter, there were 523 males and 503 females employed in the workshops. During the year, 529 inspections were made and 7 notices served.

Trade or Business.	Workshops other than Domestic Workshops.				Domestic Work-shops.	Total number of Work-shops.
	Number of Work-shops,	Number of Work-rooms.	Number of Employees.			
			Males.	Females.		
Bakers	11	12	10	18	—	11
Blindmakers	2	3	3	2	—	2
Bootmakers	36	37	68	1	16	52
Builders and carpenters	26	32	59	—	1	27
Carriage builders	2	6	8	—	—	2
Confectioners	2	7	1	37	—	2
Corset makers	2	3	—	7	2	4
Dressmakers	43	52	—	178	8	51
Ironmongers	8	8	26	—	—	8
Milliners	18	20	—	51	3	21
Monumental masons	2	3	17	—	—	2
Motor makers and repairers...	12	14	33	—	—	12
Outfitters	4	16	3	43	—	4
Pianoforte makers	2	2	13	—	—	2
Picture frame makers	11	12	18	—	1	12
Photographers... ..	6	11	3	15	—	6
Smiths and metal workers	7	7	17	—	—	7
Tailors	43	53	63	46	13	56
Trunk makers	4	5	15	—	—	4
Upholsterers & cabinet makers	24	31	57	19	9	33
Watchmakers and jewellers ...	13	13	20	—	—	13
Wigmakers	12	12	8	22	2	14
Miscellaneous	25	32	81	64	7	32
Totals	315	391	523	503	62	377

No. of Workrooms measured, 13.

Rats and Mice (Destruction) Act, 1919.

During the year 35 complaints have been received, investigated and dealt with. In every case where the complaint has been well founded, old drains have been sought for, and poisons laid down; while once a year more general tactics are adopted by way of laying poisons in certain places, particularly the sewers.

Railway Companies and Sanitary Control.

During the year the question of the control of sanitary works on railway companies' property was again the subject of litigation. The Metropolitan Railway was found to have carried out drainage work at Swiss Cottage Station without giving notice and without depositing plans and particulars, and the work was found to have been done in such a manner as to contravene the by-laws of the London County Council.

On 22nd June, 1927, the Marylebone Police Court Magistrate gave a considered decision.

The general question involved was whether the Borough Council could enforce against the railway company the whole of the jurisdiction and control in sanitary matters conferred upon them by the Metropolis Management Acts; or whether the company was exempt from such control by reason of its private Act, the Metropolitan and St. John's Wood Railway Act, 1864, under which the railway was constructed.

On behalf of the Borough Council it was contended that a protecting clause in the company's private Act made it clear that—

Nothing in this Act shall extend to prejudice, diminish, alter, or take away any of the rights, powers, or authorities vested, or to be vested, in the said board or vestries, or any of them or their successors, but all such rights, etc., shall be as valid and effectual as if this Act had not been passed.

The Magistrate said that he was satisfied that there was an inconsistency between the powers of the Hampstead Borough Council under the Metropolis Management Acts and those of the Metropolitan Railway Company under their private Act. The powers of the company must therefore prevail; and, that being so, there was no liability on the company to deposit plans, etc., of the alteration to their own drains at Swiss Cottage, or otherwise to comply with the London County Council by-laws.

As to the protecting clause referred to, the Magistrate said that its meaning was obviously confined to the substituted works over which

the section guarded the rights of existing sanitary authorities. He dismissed the summons, with forty guineas costs against the Borough Council.

The question of the control of the water supply to railway companies' property in the Borough has been under consideration for some few years. From time to time the Public Analyst has reported unfavourably upon the water supplied to certain of the properties belonging to the London, Midland and Scottish Railway Company, who supplied the water from their own reservoir at Watford. Thus, on 3rd January, 1925, a communication was sent to the Company calling their attention to the matter, and giving details of the report of Public Analyst on the analysis of water taken from their premises at the end of 1924. Another sample of water was unfavourably reported upon in March and again in October of 1925. On the latter occasion when informing the Company of the unsatisfactory condition of affairs, I notified them that the matter would be reported to the Ministry of Health, and this was done. In November of 1925 another sample was unfavourably reported upon by the Public Analyst, and in that month the Chemist of the Company interviewed me on the subject.

Notwithstanding the ample opportunity that had been afforded to the Railway Company to deal with the matter, another sample of water was reported upon in March, 1927, as giving unsatisfactory results. The analysis afforded evidence of pollution with vegetable and animal matter, and the presence of organisms of the B. Coli group in 10 c.c.; the figures and appearance of the water suggested that there had been a considerable influx of surface or storm water, and that this had not been purified by storage and filtration. The Public Analyst reported definitely that, in his opinion, the water was not in a fit state for human consumption. In view of the ample opportunity that had been given for the Railway Company to take the necessary steps to deal with the matter, an Intimation Notice under the Public Health (London) Act, 1891, was thereupon served in respect of one of the premises concerned; the Ministry of Health having suggested that the question of action under that Act should be considered, and this not having been complied with a Statutory Notice was served in May.

I continued to press the Railway Company to provide a proper water supply to their premises in Hampstead, and various communications passed between them and myself.

In September, 1927, another analysis of water taken from the Company's supply was made, and again an unsatisfactory report was received. The whole facts were thereupon reported to the Public Health Committee, who informed the Council :—

- (i) That they had considered the report of the Public Analyst upon a sample of water taken from the London, Midland and Scottish Railway Company's premises, which stated that the appearance of the water showed much suspended matter, was cloudy, and of a greenish-yellow colour; that the microscopical examination of the sediment showed it consist of animal and vegetable debris, together with a very large number of diatoms; that the water was obviously highly charged with organic matter, showing that it had undergone no proper filtration, or had since been contaminated with surface water; that there was also the presence of *B. Coli* in so small a volume as 10 c.c., indicating an unsatisfactory condition and slight sewage contamination, and that, having regard to these facts, he was of opinion that the water was not in a suitable condition for human consumption.
- (ii) That the Medical Officer of Health had reported that the London, Midland and Scottish Railway Company (who had practically the powers of a Water Company) supplied water from their own reservoir at Watford to certain premises in the Borough; but that he had no knowledge of the extent of the whole area supplied by the Company; that for some years past his attention had been directed to the fact that this water was unsatisfactory, and in addition to the present Analyst's report he had received previous reports that the water was dirty and cloudy from myriads of fungus spores and thread worms; that the attention of the Railway Company had been drawn to the condition of the water on several occasions.
- (iii) That they were of opinion that a very serious state of affairs existed with regard to the dangerous condition of the water supplied by the London, Midland and Scottish Railway Company to their premises, and therefore,—in view of the facts contained in the previous paragraphs, recommended that the Member of Parliament for the Borough be requested to raise the question in the House of Commons as to the state of the water supplied by the London, Midland and Scottish Railway Company to their premises in the Borough.

This he did on 11th November, 1927, and on behalf of the Minister of Health it was stated that he had no recent information on the matter, but was communicating with the Borough Council.

It was subsequently ascertained in March, 1928, that an order had been issued to lay on a supply of water from the mains of the Metropolitan Water Board to the remaining premises of the Railway Company in the Borough, and this has now been done.

Combined Drainage.

In many of the metropolitan boroughs, considerable sums of the ratepayers' money are expended every year in the repair of combined drains, which by a legal technicality have become "sewers" for which the ratepayers are responsible. In Hampstead, however, nearly every claim is successfully resisted, and only in rare cases, owing to the absence of proper plans, is the Council obliged to assume responsibility for the drains and repair them as "sewers."

There are two kinds of combined drain, the "combined drain" which in law is a "drain," and the "combined drain" which is a "sewer." The former is repairable by the private owner; the latter by the public authority.

In the opinion of builders, owners, and local authorities, combined drains were originally constructed as drains, and were mutually regarded as such until the retrospective case of *Travis v. Uttley* (1893), the effect of which has been to convert thousands of drains, which had been privately owned and privately maintained, into sewers vested in the local authorities, and maintainable at the expense of the ratepayers.

At different times various provincial and extra-metropolitan authorities have been successful in obtaining powers to defend their position in this matter, and to secure an amendment of the law which would relieve the ratepayers of the heavy burden which the present admittedly defective state of the law imposes upon them. In 1908, a Bill for London was introduced into the House of Commons having for its object the amendment of the law relating to combined drainage. This measure was the outcome of various Conferences of the London Boroughs, but although it was backed by influential members of Parliament, it was blocked by a few London members and never reached a second reading.

The London County Council has introduced Bills at various times, but these made no progress in face of the opposition encountered. In

1923 the London County Council decided to seek powers to extend to the whole of the County the provisions relating to combined drains similar to those contained in Section 21 of the Woolwich Borough Council Act, 1905, but the clause which was inserted in the County Council's General Powers Bill of 1924 was opposed by the Property Owners' Protection Association, Limited, and was ultimately struck out by the Local Legislation Committee of the House of Commons.

In 1926 the Hackney Borough Council secured the passing of an Act dealing with the subject; and at its meeting on the 19th July, 1927, the County Council resolved that legislation be promoted in the session of Parliament, 1928, applying, with any necessary modifications, to the administrative county of London, the provisions of sub-sections 2 and 3 of section 53 of the Hackney Borough Council Act, 1926, dealing with combined drains. These sub-sections are as follows:—

2. For the purposes of the Acts mentioned in sub-section (1) of this section [*i.e.*, the Metropolis Management Act, 1855, the Metropolis Management (Amendment) Act, 1862, and any Act amending or extending those Acts], a drain within the borough for draining any group or block of houses by a combined operation shall not become or be deemed to have become a sewer or cease or be deemed to have ceased to be a drain within the meaning of the definition contained in section 250 of the Metropolis Management Act, 1855, by reason of the fact that the drainage of premises not included in the order relating to such combined operation has been connected with such drain either before or after the passing of this Act, and any such additional drainage shall be deemed to have been included in such order: Provided that nothing in this sub-section shall empower the Council to authorise the connection of or themselves to connect any sewer to any such drain.

3. Nothing in this section shall enable the Council to recover the expense of any drainage or other works incurred prior to the passing of this Act by the Council or their predecessors from the owner of any premises in connection with which the said works shall have been carried out.

It is to be hoped that, in fairness to the ratepayers, if for no other reason, this limited effort to obtain some measure of equity will prove successful.

Dog Nuisance.

In 1925 an attempt was made to mitigate the nuisance from the fouling of public footways by dogs. Notices were issued inviting the co-operation of the public, and for a time an improvement was noticeable. Subsequently, it was thought desirable to obtain sanction for a

By-law dealing with the nuisance; and on June 30th, 1927, the Council passed the following Resolution:—

That in virtue of section 23 of the Municipal Corporations Act, 1882, as applied by section 16 of the Local Government Act, 1888, and section 5 (2) of the London Government Act, 1899, the Council do make the following by-law:—

“METROPOLITAN BOROUGH OF HAMPSTEAD.

NUISANCE BY DOGS.

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

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

This by-law shall cease to be in force after the 30th day of June, 1929, unless a by-law confirming and continuing its provisions has been duly made and come into force before that date.

This by-law was made in pursuance of section 23 of the Municipal Corporations Act, 1882, section 16 of the Local Government Act, 1888, and section 5 of the London Government Act, 1899.

In witness whereof the Council of the Metropolitan Borough of Hampstead has caused its common seal to be hereunto affixed this 30th day of June, 1927.”

The sanction of the Home Secretary to the by-law having been obtained, it came into force in the Borough on 14th September, 1927.

Copies of the by-law, together with the advisory notice issued by the Public Health Department, were displayed throughout the Borough. The notice referred to is in the following terms:—

DOG NUISANCE.

The fouling of the public footways by Dogs is very offensive to the general public.

Dog Owners are asked to co-operate in keeping the pavement clean by training their dogs to use the gutter or roadway.

All dogs are trained not to foul their Owners' living rooms. They can easily be trained not to foul the footways.

FRANK E. SCRASE,
F.R.C.S. (Eng.), L.R.C.P. (Lond.),
D.P.H. (Lond.),
Medical Officer of Health.

Public Health Department,
Town Hall, Haverstock Hill,
Hampstead, N.W. 3.

Later in the year a small leaflet, on which was printed both the by-law and the advisory notice, was sent out with the Borough Council's Electric Lighting Accounts, and in this way considerable publicity was given to the matter.

Proposed New Public Health Station.

It is a matter for regret that this pressing need has not yet been supplied. In 1924 the Public Health Committee decided that it was desirable for the Disinfecting and Cleansing Stations and Public Mortuary to be permanently established in a central position in the Borough, together with the addition of a Coroner's Court; and on 27th November of that year it was agreed by the Council, on the recommendation of a Special Committee which had been appointed to consider and report on the best way to utilise the vacant land at the Electricity Yard,

"That a portion of land on the north-east side of the electricity yard, in area about 1,200 square yards, and shown in brown colour on the plan submitted, be allocated to the requirements of the Public Health Department, viz.:—Coroner's Court, Mortuary, Disinfecting Station and Cleansing Station."

I assure the Council that the matter of the Public Health Station is one of urgency: it is a necessity if we are to maintain the health of the Borough at the high position to which it has been raised. No one item of our structural equipment is satisfactory. It is very undesirable from many points of view that the Public Mortuary should be a lock-up Mortuary: our present building, although it is sound, is primitive, and its post-mortem arrangements are not up to the standard of modern requirements or those of other Metropolitan Boroughs. The temporary nature of our disinfecting shed; the absence of any facility for washing infected and fouled articles which have to be returned to citizens in the

same soiled state as that in which they were removed; the absence of any facility for destroying highly infected articles—leaving our Officers with no provision whatever but the unsatisfactory method of burning them in the open yard; also the fact that the cleansing station is a considerable distance away from the disinfecting shed thus necessitating the carrying backwards and forwards of items of clothing from the many hundreds of cleansings during the year; all indicate the necessity for the re-organisation and concentration of these facilities without further delay.

As regards the Coroner's Court, we have never had one in Hampstead and the Coroner has frequently complained to me and direct to the Borough Council of the unsatisfactory arrangement he has to make with the Hampstead Dispensary when holding inquests in the Borough. This item of a Coroner's Court is largely a matter for the London County Council, they are responsible for finding one and the cost thereof. When I approached their officials in 1924 they informed me that in their opinion the County Council would willingly co-operate and bear their share of such a scheme; their officials were in agreement as to the need, the position, and the plans then prepared.

I have seen the arrangements in many London Boroughs, and without exception Hampstead seems the worst equipped of any and in respect to some we are scarcely comparable.

Flooding in Kilburn,

On the occasion of a severe rainstorm on 11th July, flooding again occurred in Kilburn, especially in Netherwood Street and Iverson Road. In the worst instances the depth of water in the lower rooms and passages was twenty-seven inches, and in several homes damage was done to furniture, clothing, bedding, etc. An appeal for funds to aid the people affected was organised by the Vicar of St. James's Church.

The main sewers were quite unable to drain away the great amount of water suddenly discharged into them, and the Main Drainage Committee of the London County Council stated in their report on the subject that no system of drainage is financially practicable which could be able to dispose of the rain so as to prevent entirely any floodings.

The new North-Western storm relief sewer, which was practically complete when the severe rainstorm above referred to occurred, would have been ready for use two weeks later, and it is to be hoped that when this is functioning, some improvement will be experienced when the storms occur in future. This relief sewer was estimated to cost £527,000, involving the construction of about $5\frac{1}{4}$ miles of sewers, and has taken about $2\frac{1}{2}$ years to construct. It is hoped that it will relieve the flooding

of which this Council and the Willesden Urban District Council have complained in the past, and improve conditions in other districts draining into the Ranelagh sewer, and, what is of great importance, cut off part of the storm water from the low level areas.

Legal Proceedings.

Legal proceedings were taken on certain occasions in 1927 by the Council, in connection with the work of the Public Health Department, under the various Acts of Parliament and By-laws and Regulations made thereunder which are administered by them. The fines and costs imposed were as follows:—

Statute or By-law.	Fines.			Costs.		
	£	s.	d.	£	s.	d.
Public Health (London) Act, 1891, and By-laws made thereunder ..	4	1	0	11	11	0
Metropolis Management Acts, and By-laws made thereunder ..	31	12	0	32	11	0
Sale of Food and Drugs Acts, etc. ..	14	8	0	12	11	6
Total	50	1	0	56	13	6

Public Mortuary, New End.

During the year, the bodies of 73 persons were brought to the mortuary—51 by order of the Coroner, 16 by the Police, 5 at the request of friends, and 1 by the order of the Medical Officer of Health. In 48 instances inquests were held, and in 57 instances a postmortem examination was made prior to the inquest. The following table indicates the causes of death of the persons whose bodies were received into the Mortuary.

Cause of Death or Verdict.	Number of Bodies received.		
Deaths from natural causes	38
Accidental deaths	6
Alcoholic poisoning	1
Misadventure	5
Neglect at Birth	2
Open verdict	1
Suicide—Fall under train	2
Gun shot wound	1
Revolver shot	4
Gas poisoning	5
Poisoning	5
Cut throat	2
Drowning	1
Total	73

Section 4.

Housing.

The problem of Housing still presents its difficulties; there continues to be a scarcity of housing accommodation for room-dwellers at rentals which they can pay. During the year effect was given to the new Tenement House By-laws by the appointment of a Sanitary Inspector whose duties were to carry out the obligations implied by their approval, and Inspector J. F. Armstrong took up his duties on March 7th. A system has been evolved by which, after the necessary particulars have been supplied by the Tenant, the Inspector visits the premises, verifies the details, measures up the rooms, etc.; and a Register is being compiled of all the houses affected by the new tenement house by-laws. By the end of the year 1927 the following premises had been inspected and placed upon the Register:—

Ariel Road	..	..	1
Back Lane	..	..	1, 3 and 5
Belsize Road	..	..	151
Bolton Road	..	..	13 and 33
Fleet Road	..	..	31-63, odd numbers
			56
Iverson Road	..	..	49 and 65
Kelson Street	..	..	32
Loveridge Road	..	..	17, 30, 51, 47, 86 and 88
Lowfield Road	..	..	1-53, odd numbers
			2-40, even ,,
Netherwood Street	..		29-47, odd ,,
			73, 79 and 89
			46
New End Square	..	..	9
Palmerston Road	..	..	1-41, consecutive ,,
			81 and 82
Stanley Gardens	..	..	33
Upper Park Road	..	..	62-76, even ,,
			47-69, odd ,,

I estimate there are somewhere between one and two thousand houses which should be registered under these by-laws, and it will be noted that progress under our system is slow and may require in the future some assistance if the work is to be expedited. I have hesitated hitherto to recommend any increase in the staff for two reasons, first, to

ascertain what the additional work under the by-laws entails—how far one inspector could go as regards registering the houses and subsequently following up his demands and seeing that the requisite cleansing, repairs, etc., are carried out—and, secondly, because so many important items of the tenement house by-laws are suspended during the operation of the Rent Restriction Acts, the repeal of which would make a very great difference to the work of the new by-laws. The following points concerning the by-laws are worthy of special note. A lodging house is defined as “a house or part of a house intended or used for occupation by the working classes and let in lodgings or occupied by members of more than one family, but shall not include a house in which the tenant resides on the premises and in which not more than two persons in addition to the tenant and his family also reside at any one time.”

This definition therefore excludes from the operation of the by-laws a house in which not more than two persons in addition to the tenant and his family reside, but, when confirming the by-laws, the Minister of Health approved them, except in so far as they apply to any lodging house in which the tenant resides *and not more than one family is lodged*. The action of the Minister has thus widened the original exclusion and a house is now exempt in which not more than one family in addition to the tenant and his family is lodged. A house containing two families may, therefore, be exempt from the by-laws, provided one of the two families is that of the “Tenant,” who is defined in the by-laws as “the person (whatever may be the nature or extent of his interest in the premises) by whom or on whose behalf a lodging-house is let in lodgings or for occupation by members of more than one family, or who, for the time being, receives or is entitled to receive the profits arising from the said letting,” but should the tenant not be resident at the premises in question, then such a house would come within the scope of the by-laws.

The work of inspecting the 160 premises already referred to, necessitated the paying of 1,309 visits by the inspector and the serving of 108 notices relating to various breaches of the by-laws.

London County Council Housing Estate at Watling.

During the year the erection of a Housing Estate by the London County Council, known as the Watling Estate, had a direct effect upon Hampstead, inasmuch as the County Council offered a certain number of houses to our most crowded families. We were allocated a certain number under a quota. For this there was no agreement, and no financial

liability on the part of the Borough Council was involved. Under this arrangement with the County Council the following figures apply:—

No. of families recommended specially by me as urgently in need of accommodation	85
No. accepted by the County Council to the end of 1927, totalling 183 persons from 54 rooms	32

Immediately these people were given accommodation the landlords and responsible persons at the houses they had left were approached and warned against overcrowding in future.

The rents, etc., of the accommodation at Watling were fixed as follows:—

Accommodation. No. of rooms.	Nett Rents.	Local Charges.
Flats.		
2	10/- to 10/3	3/3 to 3/6
3	10/6 to 11/6	3/6 to 4/1
4	11/6 to 12/6	4/3 to 4/8
4 Parlour type	13/-	4/11
Cottages.		
3	11/9 to 13/6	4/1 to 4/5
4 Non-parlour type	12/3 to 15/-	4/1 to 4/8
4 Parlour type	13/3 to 16/6	5/- to 5/10
5	14/6 to 17/3	5/- to 6/2

Local charges include water charge as well as local rates, and must be taken as approximate, the Hendon Urban District Council not having adopted a fixed scale of assessments based on nett rents.

There are no fixed charges for wiring for electric light. Tenants have the alternative of paying through slot meters the full charge per unit for current, or of paying a weekly sum and a reduced rate per unit. The weekly payment in this respect is based on the number of electric points, and ranges from 5d. to 8d. per tenement during the Summer months, while during the period from September 1st to April 1st the charge is increased by 8d. per week.

It will be observed that the proportion the local rates bear to the nett rents is approximately one-third.

Sherriff Road Flats and London County Council Housing Estates.

The proposal to erect 16 flats upon a site in Sherriff Road was considered by the Council at its meeting on 28th October, 1926, when it was decided that it was inopportune for the scheme to be carried out at that time.

On 24th March, 1927, a Memorial was submitted to the Council on behalf of residents of the Kilburn Ward, urging the necessity of providing housing accommodation to relieve the conditions prevailing in that area. Letters were also received from various Guilds and Associations with regard to the Sherriff Road housing site, these all received due attention, and the utilisation of this site was reconsidered.

The Housing Committee of the Borough Council approached the Chairman of the County Council Housing Committee, who received a Deputation from the Borough Council to discuss the matter of the Sherriff Road Flats. Subsequently, a letter was received from him stating that the proposed scheme was considered by the County Council to be too costly, and suggesting the abandonment of the scheme, and, as an alternative, an arrangement for the allocation of 100 houses on the Wormholt Estate adjoining the White City, or the Watling Estate at Hendon, the Borough Council to pay to the County Council for each house so allocated such fixed annual sum, not exceeding £7, as may be determined by the County Council when the houses are completed, for a period of not less than 20 years nor more than 40 years. After reviewing the whole of the circumstances very carefully and earnestly, the Housing Committee formed the opinion that the proposed Sherriff Road Housing Scheme should be abandoned, and this course was agreed to by the Council at its meeting on 30th June, 1927.

The Borough Council at its meeting on the 21st July 1927, received a report from the Housing Committee, stating that, with regard to the proposed allocation to the Borough Council of 100 houses, the Housing Committee of the London County Council would be prepared to recommend that Council to enter into an agreement under Section 14 of the Housing (Financial Provisions) Act, 1924, for allocating to the Borough Council for its special needs 100 houses at the Wormholt Estate, Hammersmith (adjoining the White City grounds and in course of development), the agreement to be subject to the condition that each of the houses shall qualify, with the approval of the Minister of Health, for State grant under the Act of 1924. It was also reported, that:—

(a) The decision with regard to the suitability, or otherwise, of persons nominated by the Borough Council for tenancies of houses under the agreement would rest with the County Council: (b) The agreement with the Borough Council would be for the allocation of houses at Wormholt Estate, but, no doubt, it would be possible, under departmental arrangements outside the agreement, for a proportion (say about 1 in every 4) of the tenants to be accommodated at Watling Estate, and (c) the County Council would remain entirely responsible for repairs, etc., to the houses.

The Borough Council decided to make application to the London County Council, under Section 14 of the Housing (Financial Provisions) Act, 1924, for the allocation of houses up to 100 in number, and the County Council decided that, as far as possible, the 100 houses would be apportioned as follows:—

3-room cottages ..	30	4-room (parlour) cottages ..	30
4 „ „ ..	20	5 „ cottages..	20

The rents, etc., of the accommodation at Wormholt have been fixed as follows:—

Accommodation.	Nett Rents.	Wiring Charges.	Local Rates.
3 room cottages ..	11/9 to 12/6	5d.	4/-
4 „ „ (parlour) ..	14/3 to 15/3	5d.	5/6
4 „ „ (non-par.)	13/- to 13/9	6d.	4/6
5 „ „ ..	15/3 to 16/-	6d.	6/-
3 „ flats ..	10/6	5d.	3/6
4 „ „ ..	11/-	6d.	4/-

It will be observed that the proportion the local rates bear to the nett rents is approximately one-third.

The first Hampstead family transferred to Wormholt under this scheme removed on 13th February, 1928.

Small Dwellings Acquisition Act, 1899—1923.

During the year the Council agreed in four instances to advance sums of money to householders to enable them to purchase their houses under the provisions of these Acts; the amounts loaned being as follows, £750, £700, and in two instances £600.

Housing Statistics for the year 1927.

The following information is required by the Ministry of Health to be set out in this Report:—

Number of new houses erected during the year 1927:—

(a) Total (including numbers give separately under (b)) 93
(separate flats in mansions counted as houses).

(b) With State assistance under the Housing Acts.

(i) By the Borough Council 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)

(2) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	Nil
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	3
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	554

2.—Remedy of Defects without Service of formal Notices.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Borough Council or their Officers	Nil
---	-----

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 | No Statutory Notices served;
unofficial Notices only. |
| (2) Number of dwelling-houses which were rendered fit after service of formal notices— | |
| (a) by owners | |
| (b) by Borough Council in default of owners | |
| (3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close | |
| | |

B. *Proceedings under Public Health Acts.*

- | | |
|--|-----|
| (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied | 867 |
| (2) Number of dwelling-houses in which defects were remedied after service of formal notices— | |
| (a) by owners | 867 |
| (b) by Borough Council in default of owners | — |

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..	4
(2) Number of dwelling-houses in respect of which Closing Orders were made ..	4
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	—
(4) Number of dwelling-houses in respect of which Demolition Orders were made ..	—
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders ..	—
(6) Number of Demolition Orders determined ..	—

Statement showing steps taken in 1927, in connection with premises "represented in 1927 or previous years" by the Medical Officer of Health under the Housing Acts.

Premises.	Representation.		Closing Order. Date of Council.	Demolition Order. Date of Council.	Remarks.
	Date of Committee.	Whether (a) unfit for habitation, (b) an obstructive building.			
94, Boundary Road ...	9-5-27	(a)	26-5-27	—	Appeal lodged against Council's Order. Inquiry held by Inspector of Ministry of Health, 26th Sept., 1927. Appeal allowed by Minister of Health, 31st Oct., 1927, with costs (£3 6s. 10d.) of Ministry to be paid by Council.
145, Haverstock Hill	22-6-27	(a)	30-6-27	—	
147, "	22-6-27	(a)	30-6-27	—	
39, Fleet Road (back basement room)	28-11-27	(a)	15-12-27	—	

Unhealthy Areas.

During the year a complaint was made in pursuance of Section 36 (2) of the Housing Act, 1925, by four local government electors, with reference to the condition of certain properties in (i) Silver Street and

Golden Square, (ii) Stamford Place, and (iii) Golden Yard. The premises concerned were as follows:—

1, 2, and 3, Money's Cottages, Silver Street.

1, 2, 3, 4, and 5, Silver Street.

4, 5, 6, 7, and 8, Golden Square.

1, 2, 3, 4, 5, and 6, Stamford Place.

2, 3, 4, 5, 6, 7, and 8, Golden Yard.

These, and other areas in the Town Ward, have been under consideration by the Council for upwards of twenty years and various suggestions have been made for dealing with them, but up to the present no acceptable solution has been found and the matter was in abeyance. Careful consideration was given to the complaint of the four local government electors, and the Housing Committee at their meeting in December, 1927, decided to take no action at present with regard to the properties in Stamford Place and Golden Yard, but as regards the properties affected in Silver Street and Golden Square, recommended that the Ministry of Health be asked to send a representative to inspect these properties and to advise the Council as to the possibility of dealing with them under a reconstruction scheme.

Section 5.

Inspection and Supervision of Food.

Milk Supply.

Milk and Dairies Order, 1926.

There has been no Cowhouse in the Borough for many years; all the milk is brought into the district from outside the County.

The Food Inspector supervises the dairies and milkshops. A reference to the sampling of the milk supply will be found in that part of the report dealing with the Sale of Food and Drugs Acts.

Registration of Dairymen and Dairy Premises.

Section 6 of the Milk and Dairies Order, 1926, made by the Ministry of Health in pursuance of Section 1 of the Milk and Dairies (Consolidation) Act, 1915, requires the Borough Council to keep Registers of dairymen and dairy premises; while Section 2 (1) of the Milk and Dairies (Amendment) Act, 1922, gives the Council power to refuse registration of, or remove from the register, retailers of milk; and requires that two registers of milk dealers be kept, one of wholesalers and one retailers.

The sale of milk which renders *dairy premises* subject to registration does not necessarily constitute the carrying on of a trade involving the registration of the *dairyman*. On the other hand, the sale of unopened bottles of milk by shopkeepers from premises not registerable as *dairy premises* has been held sufficient to make it compulsory for such shopkeepers to be registered as *dairymen*.

In the Act of 1915 referred to, the expression "*dairy*" includes a milk store, milk shop, or other place from which milk is supplied on, or for, sale or in which milk is kept or used for purposes of sale or manufacture into butter, cheese, dried milk, or condensed milk for sale, and, in the case of a purveyor of milk who does not occupy any premises for the sale of milk, includes the place where he keeps the vessels used by him for the sale of milk, but does not include a shop from which milk is not supplied otherwise than in the properly closed and unopened receptacles in which it was delivered to the shop, or a shop or other place in which milk is sold for consumption on the premises only. The expression "*dairyman*" includes any occupier of a dairy, or any purveyor of milk; and the expression "*purveyor of milk*" includes a seller of milk, whether wholesale or by retail.

The number of premises in respect of which persons are registered as purveyors is 62, comprising 43 dairies, 5 restaurants and coffee shops, and 14 general shops.

During the year 163 inspections were made and 5 notices were served.

Milk (Special Designations) Order, 1923.

Number of licences granted for the sale of milk under special designations.

Purpose of Licence.	Number of Licences granted.
<i>Sale of "Certified" Milk.</i>	
Licence in respect of the establishment at which the milk is produced	—
Licence in respect of the shop or other premises (not being such establishment as aforesaid) at or from which the milk is sold	10
Supplementary Licence to sell milk from premises which are outside the area of the licensing authority	2

Purpose of Licence.	Number of Licences granted.
<i>Sale of "Grade A (Tuberculin tested)" Milk.</i>	
Licence in respect of the establishment at which the milk is produced	—
Licence in respect of the establishment (whether the establishment at which the milk is produced or not) at which the milk is bottled	—
Licence in respect of the shop or other premises (not being the establishment at which the milk is produced or bottled) at or from which the milk is sold ..	11
Supplementary Licence to sell milk from premises which are outside the area of the licensing authority ..	1

Sale of "Pasteurised Milk."

Licence in respect of the establishment in which the process of pasteurising is carried on, and of any shop or other premises in the area of the same licensing authority from which the milk is sold	1
Licence in respect of any other shop or other premises at or from which the milk is sold	22
Supplementary Licence to sell milk from premises which are outside the area of the licensing authority ..	1

No licences for graded milk or registrations of retailers were refused or revoked during the year.

A great improvement has been effected in recent years in the cleanliness of milk. This is almost entirely due to the efforts of the large firms to raise the standard of cleanliness, and to all persons interested in the purity of the food supply I would recommend a visit to one of the bottling works of the large dairy firms. It is an education to witness the way in which the milk is received there and is strained, filtered, pasteurised, and filled by machinery into perfectly clean sterilised bottles the filling and capping of which is entirely done by machinery. The vast majority of milk coming into the Borough of Hampstead is now sold in bottles: it is good, clean, pasteurised milk, and great credit is due to the large firms who have effected this improvement and changed milk from one of the dirtiest foods to one of the cleanest. It is to be hoped that the public will co-operate in this matter as far as possible by insisting upon all milk purchased being bottled milk and so hasten the day when loose milk shall no longer be sold. Anyone who follows the

course of the milk through the bottling works to its consumption in the home, will agree that the greatest contamination of the milk takes place after it has been delivered in the home; and it is regrettable to see milk of which the purity is undoubted, decanted from the bottles in which it is delivered into jugs of such make and shape that cleanliness with them is impossible. I advise everyone to retain milk not required for immediate use in the bottle in which it is delivered, and, after the cap has been removed, to keep the bottle covered with a cup or glass, but not to decant it into a jug which cannot be as clean as the bottle from which the milk has been poured. When emptied, the bottle should be rinsed out and carefully kept from contamination until it is handed back to the roundsman; it is not fair to expect the milk firm to deliver a perfectly sterile bottle and yet directly it is emptied to allow such bottles to litter the pavements or the front gardens.

Public Health (Meat) Regulations, 1924.

The object of these Regulations is to secure the more adequate inspection of slaughtering, and the improvement in the handling, etc., of and the protection from contamination of meat. For the purposes of the Regulations, meat is defined as the flesh of cattle, swine, sheep, or goats, including bacon and ham and edible offal and fat, which is sold or intended for sale for human consumption.

Their provisions are enforced by the Council's Food Inspector, Mr. F. H. Hudson, who supervises the premises where foods are manufactured, prepared, stored or exposed for sale.

Though considerable improvement occurred in the cleanly storage, handling and delivering of meat upon the issue of the Meat Regulations, 1924, this improvement has not been as great as was expected and hoped for. When one considers the splendid improvement that has been effected in the milk trade, it is regrettable that the handling, etc., of meat has not reached a similarly high standard.

When the Meat Regulations, 1924, were issued by the Ministry of Health, the majority of representatives of the meat trade in Hampstead adopted an unsympathetic attitude. The object of the Regulations was to secure improvement in the handling, transport and distribution of meat: and the protection from contamination of meat offered for sale at stalls and in shops, stores, etc. The Public Health Committee, having given careful consideration to the question of the enforcement of the Regulations and being desirous of securing the active co-operation of all concerned, invited the butchers and meat traders of the Borough to

discuss the matter with them. At this Conference the practical application of the Regulations was very fully and freely discussed, and, unfortunately, hostility to such a long-delayed reform as the provision of glass fronts to shops was manifest, while no enthusiasm was evoked by proposals for the compulsory wrapping of meat in plain paper instead of newspapers, for the effectual protection of stalls by sufficient curtains, or for the suppression of the practice of delivering meat in uncovered trays. The result has been that these Regulations, being unwelcomed by many of the traders, have not proved as successful as they should have done; and it is a matter for regret that this opportunity of raising the standard of cleanliness, etc., in connection with the sale of meat has not been fully taken advantage of by the meat trade.

The effort of some of our butchers to carry out the provisions of the Meat Regulations is highly creditable, but there are others who fail to see the advantages of clean meat, and I fully expect that efforts will be made during the coming year to bring these latter traders into line.

Slaughterhouses.

There is no public abattoir in the Borough.

There is now only one licensed slaughter-house in the Borough, viz. :—No. 17, High Street.

		In 1920,	In January, 1927.	In December, 1927.
Registered	..	—	—	—
Licensed	..	4	1	1
		—	—	—
Total	..	4	1	1
		—	—	—

Humane Slaughtering.

A by-law, made by the London County Council, provides that no animal shall be slaughtered until it has been effectually stunned with a mechanically operated instrument.

Meat.

The inspection of meat has been systematically carried out during the year by the Food Inspector, who also attends at the licensed slaughter house at any time when slaughtering takes place. On the whole, the meat supply of the Borough is good, and very little is ever seized or voluntarily surrendered. Condemned meat or other food is disposed of at the Council's Dépôt.

Unsound Food and Food Inspection.

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

1 bushel Apples.	6 stone Cod.
4 tins Corned Beef (6 lbs. each).	6 stone Haddocks.
1 tin Prawns (9 $\frac{3}{4}$ lbs.).	11 boxes Kippers.
Part of Sack of Flour ($\frac{1}{2}$ cwt.).	2 tins Prawns.
„ „ Sugar (2 cwt.).	

Sanitary condition of Bakehouses and other premises where foods are manufactured, prepared, stored, or exposed for sale.

These premises have been kept under supervision during 1927 : their general sanitary condition is good. They are required to be thoroughly cleansed and limewashed, or, if painted, to be thoroughly washed twice a year.

The following table summarises the work done in this connection during 1927 :—

	No. of Premises on Register.	No. of Inspections.	No. of Notices.	No. of Prosecutions.
Bakehouses :—				
Factories—				
Underground ..	18	} 66	2	—
Aboveground ..	10			
Workshops—				
Underground ..	1	} 24	1	—
Aboveground ..	10			
Milkshops ..	62	163	5	—
Ice-cream Premises ..	71	86	4	—
Restaurant Kitchens ..	67	145	2	—
Slaughterhouses ..	1	48	—	—
Cow Sheds ..	Nil.	—	—	—
Fried Fish Shops ..	8	32	—	—
Offensive Trades ..	Nil.	—	—	—
Other Food Premises ..	523	784	19	—

Of the number of bakehouses mentioned above, it will be noted that 28 are factory bakehouses and 11 are workshop bakehouses.

During the year two of the workshop bakehouses, by the introduction of machinery, became factory bakehouses.

The underground bakehouse at 289, Finchley Road is still out of use.

By the Bakehouses Welfare Order, 1927, which came into force on 1st May, 1927, the occupier of every factory and workshop in which is carried on the baking of bread or flour confectionery is required to:—

- (a) Provide and maintain for the use of all persons employed therein who handle any dough or any of the ingredients of bread or flour confectionery, suitable washing facilities conveniently accessible:
- (b) Provide for the use of all persons employed in the bakehouse, suitable accommodation for clothing put off during working hours, with adequate arrangements for drying the clothing if wet:
- (c) Keep prominently displayed in the bakehouse the Official Cautionary Notice as to the prevention and cure of dermatitis among workers handling flour and sugar:
- (d) Maintain certain arrangements for first aid treatment of injuries occurring in bakehouses, and
- (e) Provide for such workers an adequate supply of wholesome drinking water.

Butter Factories—No premises in the Borough are registered as Butter Factories.

Wholesale Dealers in Margarine—Various wholesale dealers are on the register in respect of 9 premises.

Businesses of Fried Fish Vendors.

There are 8 Fried Fish Shops in the Borough. These premises are kept under supervision by the Food Inspector, and their condition is governed by By-laws made by the London County Council.

Analytical Work.

The report of the Public Analyst will be found in Appendix III.

Sale of Food and Drugs Acts, 1875—1927.

580 samples were taken for analysis during the year. The number certified to be adulterated was 18, or 3·1 per cent. of the total number, as against 4·3 in 1926.

541 samples (18 of which were adulterated) were purchased from Hampstead tradesmen.

The following table shows the articles of which samples were taken during the year :—

Article.				Number taken.	Number Adulterated.
Barley, Pearl	..	..	..	1	—
Beer	..	..	..	3	—
Bread and Butter	..	..	..	7	4
Butter	..	..	..	68	3
Cheese	..	..	..	26	—
Cinnamon, Ground	..	..	..	2	—
Cocoa	..	..	..	18	—
Coffee	..	..	..	12	—
Cream	..	..	..	36	—
Curry Powder	..	..	..	1	—
Dripping	..	..	..	5	—
Fish and Meat Paste	..	..	..	9	—
Flour	..	..	..	2	—
Fruits, Dried	..	..	..	5	—
Fruits, Tinned	..	..	..	5	—
Ginger, Ground	..	..	..	1	—
Jam	..	..	..	14	—
Lard	..	..	..	20	—
Lemonade and Lime Juice	..	..	..	7	—
Margarine	..	..	..	43	3
Meat Pies	..	..	..	2	—
Milk	..	..	..	202	3
Milk, Condensed	..	..	..	14	2
Mince Meat	..	..	..	2	—
Mustard	..	..	..	6	—
Nutmeg, Ground	..	..	..	1	—
Olive Oil	..	..	..	1	—
Peas, Tinned	..	..	..	4	—
Pepper	..	..	..	8	—
Pickles	..	..	..	2	—
Rennet	..	..	..	1	—
Rice	..	..	..	1	—
Salt	..	..	..	1	—
Sausages	..	..	..	11	—
Shrimps	..	..	..	1	—
Spirits	..	..	..	6	1
Suet	..	..	..	1	—
Sugar	..	..	..	8	—
Sweets	..	..	..	1	—
Tomato Ketchup	..	..	..	1	—
Vinegar	..	..	..	14	—
Wine	..	..	..	7	2
Totals				580	18

The following table shows the articles adulterated, &c., nature of adulteration, and the results of proceedings taken :—

No. of Sample.	Article.	Analyst's Report.	Result of proceedings.
74	Margarine	16·2 per cent. water (a small excess)	No action.
100	Ginger Wine	Salicylic acid, 240 parts per million	Cautioned.
135	Rum ..	36·2 u.p. Excess water 1·9 per cent.	No fine, costs £2 2s.
251	Milk ..	15 per cent. deficient in milk fat	No fine, costs 12s. 6d.
370	Bread and Butter	Bread and Margarine	No action. Informal sample.
382	Butter ..	16·1 per cent. water (a small excess)	No action.
384	Butter ..	16·3 per cent. water (a small excess)	No action.
389	Bread and Butter	Bread and Margarine	Fine £1, costs £2 2s.
392	Bread and Butter	Bread and Margarine	Fine 8s., costs £1 1s.
394	Bread and Butter	Bread and Margarine	Fine £1, costs £2 2s.
414	Butter ..	16·2 per cent. water (a small excess)	No action.
437	Milk ..	8·3 per cent. added water	Fine £10, costs £2 2s.
486	Margarine	0·39 per cent. Boric acid	No fine, costs 16s. 6d.
487	Milk ..	39 per cent. deficient in milk fat	Fine £2, costs £1 13s. 6d.
499	Margarine	16·4 per cent. water (a small excess)	Cautioned.
508	Condensed Milk	Slightly deficient in milk fat	Cautioned.
509	Condensed Milk	Slightly deficient in milk fat	Cautioned.
542	Orange Wine	Salicylic acid, 46 parts per million	Cautioned.

Milk and Cream Regulations, 1912 and 1917.

These Regulations aim at securing that cream containing preservative shall be distinguished from cream to which no preservative has been added. It is no longer permitted to add preservative to milk, and after 1st January, 1928, when these Regulations are superseded by the Public Health (Preservatives, &c., in Food) Regulations of 1925 and 1926, preservatives will not be permitted to be added to cream.

The Ministry of Health require the Medical Officer of Health to report on the administration of the above-mentioned Regulations and, for convenience, the report has been drawn up under the following headings:—

Report for the Year ended 31st December, 1927.

1.—Milk ; and Cream *not* sold as preserved Cream.

	(a)—Number of samples examined for the presence of a preservative.	(b)—Number in which preservative was reported to be present, and percentage of preservative found in each sample.
Milk	202	Nil
Cream	33	Nil

Nature of preservative in each case in column (b) and action taken under the Regulations in regard to it.

2.—Cream sold as Preserved Cream.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct, 3.

1. Correct statements made, 3.

2. Statements incorrect.

3. Percentage of preservative found in each sample—
0.36, 0.38, 0.40 per cent.,
by weight.

Percentage stated on
Statutory label—
Boric Acid 0.4 per cent.

(b) Determinations made of milk fat in cream sold as preserved cream :—1. Above 35 per cent., 1.
2. Below 35 per cent., nil.

(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 :—nil.

(d) Particulars of each case in which the regulations have not been complied with, and action taken :—nil.

3.—Thickening substances.

(a) Any evidence of their addition to cream or to preserved cream, nil.

(b) Action taken where found, nil.

4.—Other observations (if any).

Public Health (Condensed Milk) Regulations, 1923, the Public Health (Dried Milk) Regulations 1923, and Amending Regulations of 1927.

During the year 14 samples of condensed milk were submitted to the Public Analyst. All were found to comply with the labels on the tins.

On the 14th November, the Minister of Health issued amending Regulations relating to the above. These are primarily designed to secure, that in the labelling of condensed and dried skimmed milks, greater prominence shall be given to the words "Unfit for Babies," and that those words shall also be printed on the outside of any paper or other wrapper in which tins of such milks may be enclosed. These words must be printed on tins of *condensed skimmed milk*, or *dried skimmed* or *dried machine-skimmed milk*, and the type used for the words must conform to certain requirements as to size, etc., and be contained within a surrounding line. The Regulations are obligatory on and after 1st September, 1928, but labels printed in accordance with the revised rules may now be used.

**Public Health (Preservatives, &c., in Food) Regulations, 1925,
and Public Health (Preservatives, &c., in Food) Amendment
Regulations, 1926.**

These Regulations were framed with a view to controlling the growing practice of adding preservatives to an ever-increasing number of articles of food.

From January 1st, 1927, the only articles which were permitted to contain preservatives were :—Sausages and sausage meat, fruit and fruit pulp not dried, dried fruit, unfermented grape-juice and non-alcoholic wines, cordials and fruit juices, jam, candied peel, sugar, corn syrup, gelatine, beer, cider, alcoholic wines, sweetened mineral waters, brewed ginger beer, coffee extract, pickles and sauces made from fruit or vegetables.

The following articles were permitted to contain preservatives until a specified date :—Bacon, ham and egg yolk (up to July 1st, 1927); butter and cream (up to January 1st, 1928). In addition to this, margarine containing preservatives was allowed to be used for making up food articles until July 1st, 1927; bacon, ham and egg yolk and cream containing preservatives could be used for making up articles of food until January 1st, 1928; and butter containing a preservative was permitted to be used for making articles of food until July 1st, 1928.

The Minister of Health, in reminding the Council that the Regulations would come into operation on January 1st, so far as they relate to butter, cream, and articles of food containing preservatives necessarily introduced by the use of preserved bacon, preserved ham, preserved egg yoke or preserved cream in their preparation, stated that it was understood that it might not be practicable for all stocks of preserved butter

to be disposed of before the beginning of 1928, and in the circumstances, suggested that in the case of butter the Council might refrain, during the first few weeks of 1928, from instituting legal proceedings in any case where they were satisfied that reasonable efforts had been made to clear old stocks and that future consignments would conform with the Regulations.

London County Council (General Powers) Act, 1927.

Sale of Food by Street Traders.

By the London County Council (General Powers) Act, 1927, street trading has been regulated. On and after 1st November, 1927, stall holders must be licenced by the Borough Council, the only persons excepted being those who ordinarily move from place to place in pursuit of and while conducting their trade. Persons applying for licences must state the nature of the articles they propose to sell, and the place where such articles will be stored before being exposed for sale. The licence to be issued may prescribe the class or classes of articles or things which may be exposed for sale, and it is expressly enacted that no article of food shall be classed with any other commodity.

Borough Councils are required to frame bye-laws as to trading under such licences, relating to various matters and including the deposit and removal of refuse, the storage and sanitary supervision of articles intended for sale, etc.

Ice Cream.

The question of the compulsory registration with the Borough Councils of ice cream makers and vendors, and their premises, has been under consideration by the London County Council for some time, and it has now been decided to endeavour to secure legislation in this respect in the Parliamentary Session of 1928. The existing powers of control are fairly comprehensive, and are contained in Part viii of the London County Council (General Powers) Act, 1902, which specify conditions to be observed in connection with the manufacture, storage, and sale of ice cream, or any other similar commodity, to ensure that cleanly and sanitary conditions are observed, and require itinerant vendors to exhibit the name and address of the manufacturer on the barrow. The General Powers Act, 1908, prescribes sanitary provisions which must be complied with in any premises in which any article intended for food is sold or prepared for sale, etc., and the Public Health (London) Act, 1891, enables Sanitary Officers to enter any premises and inspect any food intended for sale, etc.

Notwithstanding these protective measures, however, no standard has yet been prescribed for the composition of ice cream, and in view of the great amount of this commodity, which is consumed especially by young people and children, in my opinion the time has now arrived where a standard for this commodity ought to be fixed.

Section 6.

Prevalence of, and Control over, Infectious Diseases.

Diphtheria Anti-toxin.

During 1927, 344,000 units were supplied from the Public Health Department. Anti-toxin is also obtainable at any hour of the day or night from the Town Hall, and also from the North-Western Fever Hospital, Lawn Road.

Encephalitis Lethargica.

One case occurred in the person of a male, aged 39 years, who was removed to St. Thomas' Hospital. This patient afterwards had a long rest in the country, and then returned to his usual occupation.

Cerebro-Spinal Meningitis.

Three cases occurred during the year, the details of which are as follows:—

- (1) Female, aged $2\frac{1}{2}$ years, removed to New End Hospital and from thence to a hospital of the Metropolitan Asylums Board. This case made a fairly good recovery.
- (2) Male, aged 58 years, removed to a hospital of the Metropolitan Asylums Board. This case made a good recovery after six months' illness.
- (3) Male, aged 31 years, removed to New End Hospital. This case terminated fatally.

Polio-Myelitis.

One case occurred in the person of a female, aged $3\frac{1}{2}$ years, who was removed to Northcourt Hospital, where she was still a patient at the end of the year making good progress.

Polio Encephalitis.

One case occurred in the person of a female, aged 11 years, who was removed to a hospital of the Metropolitan Asylums Board. This patient was reported to be fairly well at the end of the year and back at school.

Enteric Fever.

Nine cases occurred during the year, but none proved fatal. In four instances the infection probably occurred outside the Borough.

Six of the patients were removed to hospital.

Public Health (Pneumonia, Malaria, Dysentery, &c.) Regulations, 1919.

One case of induced Malaria was notified in the person of a male, aged 43, an inmate of the Hospital for Epilepsy and Paralysis, Maida Vale.

One case of Dysentery occurred in the person of a female, aged 18 years. It was not possible to find out where and when the disease was contracted.

These Regulations were superseded by The Infectious Diseases (London) Regulations, 1927, dated 22nd December, 1927, which came into operation on January 1st. The principal alterations effected were the following:—(1) It has been decided that there is no longer any necessity to require the notification of cases of Trench Fever, and (2) Cases of Malaria occurring in an institution in which the infection has been induced for therapeutic purposes need not be notified, except for special reasons.

Hospital Accommodation.

During the year no less than 248 patients suffering from notifiable infectious diseases (excluding tuberculosis) were removed to hospital. The great majority of the cases of fever, diphtheria, etc., were admitted to hospitals of the Metropolitan Asylums Board, while others were treated at New End Hospital or at special Institutions. A reference to the provision of hospital accommodation for Measles cases will be found in the Section of this Report relating to Maternity and Child Welfare.

Tuberculous patients requiring institutional treatment were sent to Sanatoria and Hospitals under the London County Council Scheme, or to the Mount Vernon Hospital at Northwood, where the Borough possesses two freehold beds.

Bacteriological Work.

Bacteriological examinations are carried out by the Lister Institute of Preventive Medicine, except examinations of material for detection of tubercle bacilli, which are performed by the bacteriologist of the Hampstead General Hospital. This latter also makes any necessary X-ray examinations.

The following is a summary of the bacteriological work carried out during the year 1927 :—

	Positive.	Negative.	Total.
Diphtheria	50	401	451
Specimens of Sputum ..	52	219	271
X-ray Examinations made	—	—	49

Non-notifiable Acute Infectious Diseases.

Important among these is *Whooping Cough*; our principal source of information is the notifications received from school teachers, which are passed to the Health Visitors for visiting. During 1927, 4 deaths occurred from this disease. *Measles* is compulsorily notifiable in the Borough under the Borough of Hampstead (Measles) Regulations, 1920. In the special leaflet which is distributed generally by the Health Visitors, a page is devoted to these diseases, containing advice, etc., and urging the importance of securing medical aid for these cases.

A reference to these diseases will be found in Sections 1 and 7 of this Report.

Influenza.

In the early part of the year this disease was very prevalent in Hampstead, and although it did not assume such epidemic proportions in Hampstead as in many other districts, the Public Health Committee decided to take action in the matter. Consequently, a letter was addressed to all medical practitioners in the Borough informing them that the Council would arrange, if necessary, for cases to be visited by Nurses if they required nursing, or if persons were too poor to provide medical attendance, the Council would deal with the matter. The doctors were also told that disinfection would be carried out in any case where the patient died, or where a room was vacated after Influenza. In addition, a communication was addressed to all proprietors of private hotels and boarding houses in the Borough, offering to disinfect any rooms occupied by Influenza patients before they were re-let.

This disease is not compulsory notifiable in Hampstead, unless associated with pneumonia.

50 deaths attributed to Influenza as follows:—

	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and under 75.	75 and upwards.	All ages.
Males ..	1	1	—	9	2	3	16
Females ..	1	1	3	9	10	10	34

Cancer.

A reference to the action of the Borough Council in connection with this disease will be found in Section 1 of this Report under the sub-heading of Vital Statistics.

Cleansing and Disinfection of Verminous Persons and their Belongings.

CLEANSING OF PERSONS ACT, 1897, AND CHILDREN ACT, 1908, SEC. 122.

The Cleansing Station is situate in a small cottage devoted entirely to this purpose in the Electricity Yard, Lithos Road. The cottage is away from all public thoroughfares; but a small railway footpath runs past the door. It consists of three rooms, two downstairs and one upstairs, with a lavatory on each floor, and was originally built as an Isolation Station.

Four cleansings of adults and 1,063 cleansings of children were carried out by the Council's Attendant at the Cleansing Station during the year, and, whilst this was in progress, their clothing was thoroughly disinfected by being passed through the disinfecting apparatus.

During the year, as a result of the action of the Sanitary Inspectors, 36 verminous rooms in 26 houses were cleansed and freed from vermin.

In addition, the Council's disinfectors disinfected 19 verminous rooms, 8 articles of clothing and 6 beds.

By the London County Council (General Powers) Act, 1922, Sections 59 and 105 of the Public Health (London) Act, 1891, were extended to, and applied to, the provision of means for removing, cleansing and destroying articles, and cleansing houses under the Act of 1922, and Sanitary Authorities in London are thereby empowered to insist upon the cleansing or destruction of filthy, &c., or verminous articles, and the cleaning of houses infested with vermin.

Disinfection.

The Disinfecting Station is situated in the yard of the Electric Lighting Station, Lithos Road.

It is equipped with a Washington-Lyons apparatus, with a staff of 3 men. The collection of infected or infested material is carried out by two Motor Vans.

During 1927, 2,327 disinfections of houses, or parts of houses, or their contents, were carried out, while, in addition, all infected articles of clothing, etc., were suitably dealt with.

Notifiable Diseases (other than Tuberculosis) during the Year 1927.

The following is a list, alphabetically arranged, of the diseases which were compulsorily notifiable in Hampstead during 1927:—

Anthrax	hold within the preceding
Cerebro-Spinal Meningitis,	two months)
acute	Membranous Croup
Chicken-pox (10th June to	Ophthalmia Neonatorum
9th September)	Plague
Cholera	Pneumonia, acute influenzal or
Continued Fever	acute primary
Diphtheria	Polio-Encephalitis, acute
Dysentery	Polio-Myelitis, acute
Encephalitis Lethargica, acute	Puerperal Fever and Pyrexia
Enteric Fever	Relapsing Fever
Erysipelas	Scarlet Fever and Scarlatina
Glanders	Small-pox
Hydrophobia	Trench Fever (ceases to be
Malaria (except where induced	notifiable on December 31st,
for therapeutic purposes)	1927)
Measles (if not already notified,	Tuberculosis, all forms
or if a notified case has not	Typhoid Fever
occurred in the same house-	Typhus Fever.

No cases of the following notifiable diseases were reported during the year:—

Cholera	Plague
Continued Fever	Polio-Encephalitis, acute
Glanders	Relapsing Fever
Hydrophobia	Trench Fever
Membranous Croup	Typhus Fever.

NOTIFIABLE DISEASES DURING THE YEAR 1927.

NOTIFIABLE DISEASES.	* Total cases notified in age-periods.												Total cases notified in each Ward.							Total deaths in age-periods.																
	At all Ages.	At Ages—Years.											Ward No. 1 (Town).	Ward No. 2 (Belsize).	Ward No. 3 (Adelaide).	Ward No. 4 (Central).	Ward No. 5 (West End).	Ward No. 6 (Kilburn).	Ward No. 7 (Priory).	Cases admitted to Hospital.	At all Ages.	At Ages—Years.														
		Under 1.	1 and under 2.	2 and under 3.	3 and under 4.	4 and under 5.	5 and under 10.	10 and under 15.	15 and under 20.	20 and under 35.	35 and under 45.	45 and under 65.										65 and over.	Under 1.	1 and under 2.	2 and under 3.	3 and under 4.	4 and under 5.	5 and under 10.	10 and under 15.	15 and under 20.	20 and under 35.	35 and under 45.	45 and under 65.	65 and under 75.		
Anthrax ..	1	..	..	..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cerebro-spinal Meningitis, acute ..	3	..	1	..	..	..	..	..	1	..	1	..	..	..	1	..	..	2	..	3	1	..	..	..	..	..	..	..	..	..	..	..	..	..
†Chicken-pox ..	171	1	4	10	8	14	81	27	14	10	1	1	36	15	17	15	14	52	22	8	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria ..	70	..	3	15	7	24	7	5	7	1	1	..	4	9	11	4	7	26	9	67	2	1	..	
Dysentery ..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Encephalitis Lethargica, acute ..	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever (including Paratyphoid) ..	9	..	..	..	..	1	..	..	4	3	1	..	3	1	3	1	..	..	1	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas ..	19	..	..	..	..	..	..	2	5	..	9	3	3	3	4	1	1	7	..	9	12	..	..	..	..	..	..	..	..	..	..	..	2	..
Malaria ..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
†Measles ..	82	4	2	2	8	4	48	7	4	3	..	..	23	23	7	4	8	9	8	12	2	1	1	..	..	..	..	..	..	..	..	..	..	..
Ophthalmia Neonatorum ..	7	7	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2	4	7	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pneumonia, acute influenza or acute primary ..	58	..	2	1	4	2	3	..	4	13	6	18	5	10	7	12	2	3	18	6	8	8	..	..	..	..	..	..	..	..	..	..	6	2
Polio-Encephalitis ..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Polio Myelitis, acute ..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Fever ..	4	..	..	..	..	..	..	..	..	..	..	1	2	..	1	..	..	1	4	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Pyrexia ..	11	..	..	..	..	..	..	1	9	1	..	..	3	1	..	1	3	2	1	9	..	1	..	..	..	..	..	..	..	..	..	2	..	..
Scarlet Fever ..	128	1	4	7	7	50	27	12	16	3	1	..	11	26	15	6	18	35	17	108	1	..	..	..	..	1	..	..	..	..	..	..	..	..
§Smallpox ..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	1	..	..
	569	12	9	21	43	34	207	69	43	73	18	32	8	95	87	71	36	57	154	69	245	19	1	1	..	..	..	..	2	..	..	3	1	8

* Cancelled cases have *not* been included.

† Compulsorily notifiable in Hampstead under the Borough of Hampstead (Measles) Regulations, 1920.

† Compulsorily notifiable in Hampstead under the Borough of Hampstead
from 10th June to 9th September.

§ Two other cases of Smallpox were removed from the Borough, but as the homes of the patients were in Hendon, the cases were recorded there.

Small-pox.

Three cases of small-pox were removed from the Borough in 1927, all of them of a particularly virulent type—of the three cases two died, and one, who was protected by vaccination, survived.

The first two cases, a mother aged 42, vaccinated in infancy and a daughter aged 16, unvaccinated, were diagnosed by me on April 23rd in a Nursing Home to which they had been brought from Hendon as cases of chicken-pox on April 17th, there being also other members of the family sick who were thought then to be suffering from chicken-pox. I arranged for their immediate removal to Long Reach. Every person who had been in contact with these cases who could be vaccinated was vaccinated; all bedding and textiles in the room which could possibly spread infection were immediately removed and burned; the room occupied by the patients was disinfected and sealed up, and everyone in the house placed under surveillance. No further cases arose at this Nursing Home. The unvaccinated girl died. As the permanent address of these patients was in Hendon the cases were recorded there and not in Hampstead.

Fourteen days later I was asked to see a suspicious case in the person of a woman aged 40, unvaccinated, in another house in the same road, and found the patient to be suffering from small-pox of a similar type to the other two. The patient was immediately removed and all precautions taken as before; the bedding and clothing was burned and the room disinfected; inmates of the house were vaccinated and placed under surveillance, and all contacts possible were traced and the different districts warned. This case terminated fatally.

In view of the possibility of the spread of the disease owing to the fact that the cases were not promptly recognised, posters were exhibited in the Borough and handbills issued advising the public to avail themselves of the protection which vaccination afforded.

The Ministry of Health and the London County Council were kept informed of the details of the cases, and the Poor Law Guardians and their Officers, including the Public Vaccinators, were informed of the occurrence of small-pox, and warned that a considerable proportion of the community might seek vaccination.

Upon the invitation of the Chairman of the Committee, one of the members of the Board of Guardians (Mr. Councillor Boness) attended the meeting of the Public Health Committee, and informed them of the

action taken by the Guardians in extending the facilities for vaccination of the general public by the Public Vaccinators (including the opening of a temporary Clinic at New End Hospital).

Subsequently the question of increasing the number of Public Vaccinators was considered by the Guardians, and as a result a third Vaccinator was appointed. The Borough is now apportioned to these Officers as follows:—

Wards 1 (Town) and 2 (Belsize)—

Dr. E. A. SEYMOUR, 12, Thurlow Road, N.W. 3.

Wards 3 (Adelaide); 4 (Central) and 7 (Priory)—

Dr. A. H. HALLEN, 2, Alexandra Road, N.W. 8.

Wards 5 (West End) and 6 (Kilburn)—

Dr. W. BUTEMENT, 127, West End Lane, N.W. 6.

In connection with the occurrence of these cases, many contacts were vaccinated by me under the Public Health (Small-pox Prevention) Regulations, 1917, while others were vaccinated by the medical practitioners concerned.

As it is by vaccination that the spread of Small-pox can most effectually be prevented, it is highly desirable that the Borough Council, and not the Poor Law Guardians should be constituted the vaccination authority. This is one of the changes which probably will be brought about when the long-promised reform of the Poor Law is undertaken: but in view of the delay that may occur before such reform is made, the matter appears to me to be of sufficient importance to warrant special legislation to effect the necessary transfer of Vaccination Officers and Public Vaccinators to Sanitary Authorities.

Every outbreak of Small-pox in Hampstead that has occurred since I have been Medical Officer of Health has confirmed my opinion that the Sanitary Authority, who is responsible for the control of this disease, should be fully armed with all necessary powers in connection with vaccination, which, as I have stated, is the most important and greatest protection we have against Small-pox.

When considering the length of time over which this view has been contended, it is interesting to recall that a Conference on the subject of the administration of the Vaccination Acts, held at St. Pancras Town Hall as long ago as 25th June, 1895, which was attended by representatives from 20 London Sanitary Authorities—including Dr. C. W. Cunningham, then Chairman of the Public Health Committee, and Dr. Edmund Gwynn, late Medical Officer of Health of Hampstead,

discussed this matter, and resolved "That the Vaccination Acts should be administered by the Authorities that administer the Acts and provisions for the prevention of the spread of infectious diseases." A deputation from the Conference subsequently waited upon the Local Government Board, the precursor of the present Ministry of Health.

In view of the occurrence of small-pox and the existence of chicken-pox in the Borough, and in view of the fact that the concurrence of these diseases had already led to errors in diagnosis, the Council on 26th May, as a matter of urgency, ordered in pursuance of Section 56, Sub-section 5, of the Public Health (London) Act, 1891, that Section 55 of that Act, with respect to the notification of infectious disease, should apply in the Borough to chicken-pox, for a period of three months, and medical practitioners were informed that the Medical Officer of Health would be glad to see any *doubtful* case, if his opinion was desired.

It must always be remembered that small-pox is liable to be spread by infection, not only from well-marked and easily recognised cases, but also, as indeed frequently happens, from cases of which the nature is not at first evident. Such attacks may be, on the one hand, mild and modified cases, which may be mistaken for chicken-pox or other comparatively slight disorder; or, on the other hand, they may be hæmorrhagic or other malignant and rapidly fatal forms in which death may occur before the characteristic rash has had time to develop itself.

The Order, making Chicken-pox compulsorily notifiable, came into operation on 10th June, 1927, and remained in force until 9th September. During this period 171 cases were notified.

At the time of the outbreak I drew the attention of the Council to the absence of or defects in certain of our Public Health facilities, these being neither adequate nor up to present day requirements; and pointed out that when the recent cases of Small-pox occurred and it was desired to burn the highly infected bedding, no proper facilities were available and recourse had to be made to the primitive method of making a heap of the infected articles on the land adjoining the disused electric light station or in the base of the old electricity works chimney, pouring paraffin over them, and setting the heap alight; that as regards the washing of clothes from the infected houses, arrangements had to be made for the disinfectors to call at regular intervals to collect washing, which was disinfected before being sent to laundries, the Public Health Department having no facility for washing infected articles. The question of the provision of a Health Station which will embody these and other facilities was still under consideration at the end of the year.

Vaccination.

Of the total births dealt with in 1927 by the Vaccination Officer, amounting to 1249, 691 were successfully vaccinated. In 4 cases the children were insusceptible of vaccination. In regard to 219, certificates of Conscientious Objection were obtained; 46 died before vaccination was performed; 18 cases of vaccination were postponed, and 261 remained to be dealt with.

I am indebted to the Vaccination Officer for these statistics.

Public Health (Small-pox Prevention) Regulations, 1917.

Several primary vaccinations or revaccinations were performed by the Medical Officer of Health under these Regulations during the year.

Venereal Diseases.

Under the Public Health (Venereal Diseases) Regulations, 1916, the County Council is the Authority for London (excluding the City).

The scheme of the County Council has for its objects :—

- (i) Provision of facilities for diagnosis and treatment in voluntary hospitals and other institutions.
- (ii) Provision for doctors of laboratory facilities for aid in diagnosis and treatment; supply of salvarsan or its substitutes; provision of instruction for practitioners and students; and co-ordination of the work of hospitals, public health services and practitioners.
- (iii) Publication and dissemination of information, and giving of instruction on matters relating to venereal diseases and their treatment (publicity and propaganda work).

There is a Local Propaganda Committee associated with a Voluntary Body in the Borough.

Notices issued by the County Council, which indicate Treatment Centres, are exhibited in suitable places in the Borough, especially in Public Conveniences; and information is also given at the Public Health Department, *under the strictest secrecy*, to persons of either sex who apply personally or by letter to the Medical Officer of Health. No record is kept of the disinfection of bedding, clothes, &c., carried out in this connection, or of persons who ask for information, and all letters of inquiry are destroyed after having been answered in unofficial envelopes.

Tuberculosis.

Cases notified in 1927 :—

79 Pulmonary.

11 Non-pulmonary.

Number of cases in the Borough, 596.

The table that follows shows the number and distribution of cases during the year :—

Tuberculosis Regulations, 1924.	Pulmonary.		Non-Pulmonary.	
	Males.	Females.	Males.	Females.
Number of cases on the Register at the commencement of the year 1927	213	236	72	81
Number of cases notified under the Regulations for the first time during the year ..	37	42	5	6
Number of cases brought under notice otherwise than by notification during the year	9	12	4	3
	259	290	81	90
*Number of cases removed from the Register during the year	38	57	14	15
Number of cases remaining on the Register at the end of the year	221	233	67	75

*These consist of 22 cases de-notified, 40 dead and 62 removed from the Borough.

Prior to the passing of the Tuberculosis Regulations, and the establishment of the Tuberculosis Dispensary, in fact, as far back as 1902, there had been a voluntary system for the control of Consumption in Hampstead, by which cases were notified and contacts examined.

The Municipal Tuberculosis Dispensary is housed in, and forms part of, the Health Institute situated at the junction of Kingsgate and Dynham Roads. The Dispensary was removed on the 6th December, 1913, from its temporary quarters at the Hampstead General Hospital, to the Health Institute, which is Hampstead's Memorial to His late Majesty King Edward the Seventh. The Health Institute is controlled

by Trustees appointed by the Borough Council, the Board of Guardians and the Council of Social Welfare.

During the year the question of the proposed extension of the Hampstead Health Institute, Kingsgate Road, and the desirability of building over and on the courtyard known as the Fig Tree Court, adjoining the Council's tuberculosis dispensary, was considered, and on the 24th November the Council agreed to the proposed extension in accordance with plans submitted to the Council showing a separate entrance from Dynham Road to the Council's tuberculosis dispensary.

The Report of the Tuberculosis Medical Officer will be found in Appendix 1 of this Report.

The Dispensary is open at the following times:—

Tuesdays	..	..	2 p.m.
Wednesdays	..	..	5 p.m.
Fridays	..	4.30. p.m.	and 8 p.m.

During the year 198 sessions were held, 223 new cases—of which 75 were contacts—were examined. The total attendances of *all kinds* at the sessions numbered 1,184, an average of 6 per session.

Staff engaged on Tuberculosis Work.—The Borough Council staff specially engaged on work directly connected with Tuberculosis and the Dispensary consists of the following:—

1.—Administrative Tuberculosis Medical Officer: the Medical Officer of Health.

2.—Tuberculosis Medical Officer, a part-time Officer who acts as an Assistant to the Medical Officer of Health for tuberculosis work. This Officer is also Senior Hon. Physician at the Hampstead General Hospital and Physician at the Victoria Park Hospital. Suitable cases from the Borough admitted to these hospitals are thus kept under his observation.

3.—Tuberculosis Nurse, who attends at the Dispensary at all times when the Tuberculosis Medical Officer is present, and who visits cases.

4.—Clerk, who attends at the Dispensary for the purpose of compiling returns, keeping records, general clerical work, etc.

Cases are first notified to the Medical Officer of Health; they are then visited by the Tuberculosis Dispensary Nurse and informed of the Dispensary facilities and they are urged to attend, if suitable cases. Medical

practitioners are invited to bring or send their cases to the Tuberculosis Medical Officer for consultation and advice, and the other members of the family are examined as "contacts." The figures relating to these are on page 111. "Contacts" are kept under supervision until it is definitely decided if they are tuberculous or not. Any cases where it is thought advisable for X-ray examination to take place are sent to the Hampstead General Hospital, where an arrangement exists for cases sent by the Borough Council to be X-rayed and reported upon. This facility was utilised in 49 instances during the year.

There are two extremely well-managed branches of Queen Victoria's Jubilee Nurses in the Borough. These can be relied on where nursing is needed for cases remaining at home.

Arrangements have been made with the Pathological Department of the Hampstead General Hospital whereby any medical practitioner may send specimens of sputum for examination and report. This was utilised during 1927 on 144 occasions by local practitioners (exclusive of the Tuberculosis Medical Officer).

By arrangement with London Hospital one case was given special Light treatment during 1927.

Dental treatment is available for tuberculous patients. It is given by an arrangement with the British Dental Hospital whereby patients attending the Dispensary and in need of dental aid may obtain treatment at that Hospital, 31, Camden Road, N.W., on Wednesdays at 9.30 a.m. During the year this facility was only used on one occasion for a consultation.

The tables that follow have been drawn out for the purpose of showing the after-history of the patients notified in the Borough during the years 1921 and 1922. Separate tables are given relating to patients who attended at the Municipal Tuberculosis Dispensary and those who did not so attend.

ANALYSIS OF DISPENSARY CASES OF PULMONARY TUBERCULOSIS NOTIFIED IN 1921.

	CLASSIFICATION.					Cases cancelled.	TOTAL.
	A 1 Early case, 1 lobe affected. Negative sputum.	A 2 Early case, 2 lobes affected. Negative sputum.	B 1 Moderately advanced case, 1 lobe affected. Positive sputum.	B 2 Moderately advanced case, 2 lobes affected. Positive sputum.	B 3 Advanced case.		
Cases attending at the Tuberculosis Dispensary for the first time in 1921 ...	15	3	3	15	14	2	52
Number known to be alive in December, 1927, and— ...	8	1	1	2	1	—	13
Percentage of original number	(53%)	(33%)	(33%)	(14%)	(7%)	—	(25%)
Number known to be dead in December, 1927, and— ...	1	1	1	8	9	—	20
Percentage of original number	(7%)	(33%)	(33%)	(53%)	(64%)	—	(38%)
*Number removed from the Borough (present condition unknown) and— ...	6	1	1	5	4	2	19
Percentage of original number	(40%)	(33%)	(33%)	(33%)	(29%)	—	(37%)

*Of the removed cases—8 of the 19 were located. 3 of these are known to be dead and 5 alive.

ANALYSIS OF DISPENSARY CASES OF PULMONARY TUBERCULOSIS NOTIFIED IN 1922.

	CLASSIFICATION.					Cases cancelled.	TOTAL.
	A 1 Early case, 1 lobe affected. Negative sputum.	A 2 Early case, 2 lobes affected. Negative sputum.	B 1 Moderately advanced case, 1 lobe affected. Positive sputum.	B 2 Moderately advanced case, 2 lobes affected. Positive sputum.	B 3 Advanced case.		
Cases attending at the Tuberculosis Dispensary for the first time in 1922 ...	8	2	6	22	13	—	51
Number known to be alive in December, 1927, and— ...	1	—	1	6	—	—	8
Percentage of original number	(12½%)	—	(16½%)	(27%)	—	—	(16%)
Number known to be dead in December, 1927, and— ...	—	—	1	9	10	—	20
Percentage of original number	—	—	(16½%)	(41%)	(77%)	—	(39%)
*Number removed from the Borough (present condition unknown), and— ...	7	2	4	7	3	—	23
Percentage of original number	(87½%)	(100%)	(66%)	(32%)	(23%)	—	(45%)

*Of the removed cases—9 of the 23 were located. 5 of these are known to be dead and 4 alive.

ANALYSIS OF NEW CASES OF PULMONARY TUBERCULOSIS OCCURRING
IN 1921, WHO DID NOT ATTEND AT THE TUBERCULOSIS DISPENSARY.

Total number of Pulmonary cases who did not attend the Dispensary	51*
Number known to be alive December, 1927 ..	4 = 8%
Number known to be dead December, 1927 ..	26 = 52%
Number removed from the Borough (present condition unknown)	21 = 40%

ANALYSIS OF NEW CASES OF PULMONARY TUBERCULOSIS OCCURRING IN
1922, WHO DID NOT ATTEND AT THE TUBERCULOSIS DISPENSARY.

Total number of Pulmonary cases who did not attend the Dispensary	50†
Number known to be alive in December, 1927 ..	8 = 16%
Number known to be dead in December, 1927 ..	17 = 34%
Number removed from the Borough (present condition unknown)	25 = 50%

These figures show, as far as it is possible to trace these people, that at the end of six years 63% are dead.

These tables are designed to show what is the progress (a) of those patients who attended the Tuberculosis Dispensary, and (b) those who did not, and I propose to continue them over a series of years so that we may be able to tell from the tables at any one year how many survive out of the two categories, and so arrive at a better estimate of prognosis and mortality.

Notification and Deaths.

During the year 1927, 90 new cases of Tuberculosis were notified, 79 being cases of Pulmonary Tuberculosis, and 11 other forms of the disease.

The following statistical table, prescribed by the Ministry of Health, gives an analysis of the newly notified cases and deaths during 1927 :—

* 50% of the whole of the pulmonary cases notified.

† 50% of the whole of the pulmonary cases notified.

Tuberculosis, 1927.

		Total New Cases in age-periods notified for the first time in 1927.											Total New Cases Notified in each Ward.							Cases admitted to Hospital.	Total Deaths in age-periods of Old and New Cases.															
		At Ages—Years.											At Ages—Years.								At Ages—Years.															
		At all Ages.	Under 1. 1 and under 5. 5 and under 10. 10 and under 15. 15 and under 20. 20 and under 25. 25 and under 35. 35 and under 45. 45 and under 55. 55 and under 65. 65 and upwards.	Ward No. 1 (Town).	Ward No. 2 (Beisziel).	Ward No. 3 (Adelaide).	Ward No. 4 (Central).	Ward No. 5 (West End).	Ward No. 6 (Kilburn).	Ward No. 7 (Priory).	At all Ages.	Under 1. 1 and under 5. 5 and under 10. 10 and under 15. 15 and under 20. 20 and under 25. 25 and under 35. 35 and under 45. 45 and under 55. 55 and under 65. 65 and upwards.																								
Pulmonary	M.	37	—	—	—	4	7	6	7	5	8	—	9	4	6	3	5	3	7	24	19	—	—	1	—	1	—	2	4	7	4	—				
	F.	42	—	—	—	1	7	8	15	8	2	—	1	7	7	5	4	5	8	6	35	19	—	—	—	—	5	1	5	4	1	1	2			
Non-Pulmonary	M.	5	2	—	—	1	—	1	—	1	—	—	1	—	—	2	1	1	—	3	2	—	1	—	—	—	—	1	—	—	—	—				
	F.	6	—	1	—	—	2	2	1	—	—	—	1	—	1	1	—	1	2	3	5	—	1	1	—	—	1	—	2	—	—					
Totals		90	2	1	1	12	17	24	16	8	8	1	18	11	12	10	11	13	15	65	45	2	2	—	6	1	9	8	10	5	2					

Of the new cases notified in 1927 :—

PULMONARY CASES.

5	were notified by Hospitals (Out-patients).
13	do. do. (In-patients).
49	do. private doctors.
12	do. Tuberculosis Medical Officer.
—	
79	
—	

Since notification :—

23	are still attending the Dispensary (36 actually attended, but 8 have died and 5 removed)
12	are attending private doctors and are of a non-Dispensary type.
2	are receiving treatment from panel doctors.
11	are in-patients of Hospitals.
15	have died.
16	have removed.
—	
79	
—	

NON-PULMONARY CASES.

2	were notified by Hospitals (In-patients).
3	do. do. (Out-patients).
5	do. private doctors.
1	do. Tuberculosis Medical Officer.
—	
11	
—	

Since notification :—

4	have attended the Tuberculosis Dispensary.
3	have died.
2	are attending Hospitals (Out-patient).
1	is an In-patient of a Hospital.
1	attending private doctor.
—	
11	
—	

Nearly half the number of notified cases actually attended the Dispensary, while others were dealt with by the Tuberculosis Medical Officer elsewhere.

The deaths of non-notified cases of Tuberculosis numbered 7, and the total tuberculosis deaths 45 ; the ratio of non-notified tuberculosis deaths to total tuberculosis deaths being 1 in 6.

Closely akin to non-notified fatal cases is the question of those patients who are not notified until they reach a very advanced stage of the disease. This unfortunate aspect of what must in some cases be "late" notification is indicated by the following table:—

	1923.	1924.	1925.	1926.	1927.
Total deaths, all forms of Tuberculosis ..	58	70	60	56	45
No. dying unnotified ..	6	8	12	9	7
No. notified within one month of death ..	5	9	14	7	7
No. notified within three months of death ..	6	7	6	4	4
No. notified within six months of death ..	4	4	3	5	5
Percentage of cases dying within three months of notification (including also those dying unnotified)	29%	34%	53%	35%	40%

(An average for the past five years of 38%.)

The number of cases notified in recent years is as follows:—

Year.	Persons newly notified.		Total.
	Pulmonary Tuberculosis (Voluntarily notifiable 1902; Compulsorily notifiable 1912).	Non-Pulmonary Tuberculosis (Compulsorily notifiable from 1st February, 1913).	
1923	88	36	124
1924	100	25	125
1925	99	14	113
1926	69	16	85
1927	79	11	90

At the present time 39 discharged soldiers in receipt of a pension for tuberculosis are resident in Hampstead. The number of cases of tuberculosis known to the Department at the end of 1927 totals 596—454 pulmonary and 142 non-pulmonary.

Occupations.

The following is an analysis of the occupations of the new cases notified as tuberculous during 1927 :—

Occupation.	Pulmonary Cases.	Non-Pulmonary Cases.	Occupation.	Pulmonary Cases.	Non-Pulmonary Cases.
Barman	1	—	No occupation ...	11	3
Children's Nurse ...	—	1	Photographer ...	1	—
Clerk	13	2	Porter	1	—
Commercial Traveller	3	—	Process Worker ...	1	—
Company Director ...	1	—	Sawmiller	2	—
Confectioner	2	—	School Teacher ...	2	—
Domestic	8	1	Shop Manager ...	2	—
Dressmaker	3	—	Sister of Mercy ...	1	—
Engineer	1	—	Shop Assistant ...	3	1
Gardener	—	1	Student	3	—
Housekeeper	1	—	Typist	3	—
Housewife	6	1	Waiter	1	1
Instrument maker ...	1	—	Warehouseman ...	2	—
Lay Reader	1	—	Window cleaner ...	1	—
Merchant	1	—			
Milkman	1	—		79	11
Motor Driver	2	—			

Of the 79 cases of Pulmonary Tuberculosis newly notified in 1927 :—

44 were treated at Sanatoria.

7 „ Poor Law Institutions.

7 „ Hospitals.

Of the 11 cases of Non-pulmonary Tuberculosis newly notified in 1927 :—

2 were treated at Sanatoria.

5 „ Hospitals.

The following cases, notified prior to 1927, were also removed :—

	Pulmonary.		Non-Pulmonary.	
	Insured.	Non-Insured.	Insured.	Non-Insured.
To Sanatoria	11	3	—	—
To Hospitals	2	2	1	2
To Poor Law Institutions ..	2	3	—	—

Deaths from Tuberculosis.

The number of deaths from Tuberculosis in 1927 was 45. Of these, 38 were due to Pulmonary Tuberculosis and 7 to other forms of Tuberculosis.

The deaths from Pulmonary Tuberculosis and from all forms of

Tuberculosis during 1927 were distributed among the Wards as follows :—

Ward.	Area (Acres).	Deaths from Pulmonary Tuberculosis.	Deaths from other Forms of Tuber- culosis.	Total deaths from All Forms of Tuberculosis.
No. 1 (Town) ..	693	4	1	5
„ 2 (Belsize) ..	270	8	—	8
„ 3 (Adelaide) ..	318	6	—	6
„ 4 (Central) ..	314	1	1	2
„ 5 (West End) ..	248	7	1	8
„ 6 (Kilburn) ..	187	8	2	10
„ 7 (Priory) ..	235	4	2	6
The Borough ..	2,265	38	7	45

Deaths from Pulmonary Tuberculosis in Age Groups.

The following table shows the age distribution of persons dying from Pulmonary Tuberculosis in recent years :—

Year.	Age Period.					All Ages.
	0—5	5—15	15—25	25—65	65—	
1922	—	1	10	37	2	50
1923	—	—	6	45	—	51
1924	—	1	9	46	2	58
1925	—	—	6	43	3	52
1926	—	—	8	41	2	51
1927	—	1	7	28	2	38

Deaths from Non-Pulmonary Tuberculosis in recent years are as follows :—

Year.	No.	Year.	No.
1922 ..	19	1925 ..	8
1923 ..	7	1926 ..	5
1924 ..	12	1927 ..	7

Deaths from Non-Pulmonary Tuberculosis in Age Groups.

The age distribution of persons dying from Non-Pulmonary Tuberculosis in 1927 is as follows :—

1—2 years, 1 ; 2—5 years, 1 ; 5—15 years, 1 ; 25—45 years, 2 ; 45—65 years, 2.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

These Regulations provide that no person suffering from tuberculosis of the respiratory tract shall work in connection with a dairy which would involve milking, treatment of milk, or handling milk vessels, and if a local authority is satisfied that a person residing in their district working in any such occupation is so suffering and is in an infectious state, they may require such person to discontinue his occupation.

No case arose during the year in which action was taken under the Regulations.

Separate Beds and Shelter for Tuberculous Patients.

The Borough Council will supply a shelter to any suitable case where there is accommodation for the erection of such. It was not used in 1927.

In pursuance of the authority contained in the Public Health (Prevention and Treatment of Disease) Act, 1913, the Borough Council also supply on loan single beds and bedding in order to effect the separation of infectious cases of tuberculosis. The usual practice is to arrange for the double bed previously used to be sold, and a single bed to be provided in lieu thereof. Thus, by the Council loaning separate beds, two single beds are provided instead of one double bed. The Council have purchased and loan out six beds and sets of bedding.

Tuberculosis Care Committee.

The following form the Committee :—

- 6 members of the Borough Council,
- 5 members of the Hampstead Council of Social Welfare,
- 2 members representing the London County Council,
- 3 members representing the Board of Guardians,
- 1 member representing the London Insurance Committee,
- 2 members representing the Invalid Children's Aid Association.
- 1 member representing the United Services Fund,
- The Medical Officer of Health,
- The Tuberculosis Medical Officer,
- The Tuberculosis Health Visitor.

The Care Committee is required to furnish to the Borough Council

quarterly reports (or more often if required), including statistics and statements of cases helped, &c., and as to attendances of such of its members as are Councillors.

All particulars as regards care and after-care, arrangements for finding employment for patients, and provision of extra nourishment for patients living at home are referred to this Committee. They are also responsible for assessing cases that go into sanatorium.

This Committee dealt with 207 cases during 1927.

Section 7.

Maternity and Child Welfare.

**General arrangements made for attending to the Health of
expectant and nursing mothers and children under
five years of age.**

HEALTH VISITORS AND VISITING.

The Council employs three Health Visitors; the Borough being divided between them. These Officers attend at the Infant Welfare Centres, which are organised and controlled by the Hampstead Council of Social Welfare; and endeavour to see that the advice there given is carried out in the home. They also attend at the Borough Council's Pre-Maternity Clinics and Dental Clinic.

The following table gives a record of the work of the Health Visitors in 1927 :—

Number of first visits to expectant mothers	..	..	134
„ re-visits	„	„	80
„ infants under one year visited for the first time			796
„ re-visits to infants under one year	..		2501
„ visits to children over one year	..	..	2960
„ visits <i>re</i> deaths of infants under two years of			
age	..	..	94
„ „ still-births	..	..	24
„ „ maternal deaths	..	..	5
„ „ infectious disease	..	..	181
„ „ verminous conditions	..	..	2
„ attendances at Borough Council's Pre-Maternity			
		Clinics	146
„ „ „ „ Dental Clinic			59
„ „ Council of Social Welfare Infant			
		Welfare Centres	278
„ complaints investigated	..	..	9
„ applicants for assistance visited	..	..	238
„ unclassified visits	..	..	63
Total			7570

In Hampstead, all notifications of births are carefully scrutinised, and those thought suitable for visiting are given to the Health Visitors, who call at the homes at some time between a fortnight and a month after the birth has occurred. Approximately three-quarters of the total births are thus passed to the Health Visitors, the other quarter being considered outside the scope of our facilities for sundry reasons, chiefly economic.

Those selected for visiting are entered on lists for the Health Visitors, who call again at least twice before the expiration of the first four months, thus making three visits within the first four months to each baby suitable for visiting. Another visit is paid as soon as the child is 6 months old, and another at, or just after, 12 months. From thence onwards, the question of "following up" is left largely to the discretion of the Health Visitors.

Careful consideration has been given to the border-line cases, those cases where it is not easy to decide whether or not a visit is desirable. These consist chiefly of the type of those formerly found upon a first

visit not to require any help from the Public Health Authority. It was felt that these visits represented a loss of valuable energy and time, and during the year an experiment was tried by instituting the practice of sending a letter to these cases, which numbered 72, thus effecting a saving in the time of the Health Visitors, which can be more profitably utilised in other directions.

The booklet entitled "How to Rear a Baby" is also sent with the letter.

The total number of Hampstead births was 1,028, and they took place as follows :—

Queen Mary's Maternity Home	..	62 or 6 per cent.
Nursing Homes	.. ..	107 „ 10 „
Hospitals	.. ..	267 „ 26 „
Usual place of residence	.. ..	557 „ 54 „
Other addresses	.. ..	35 „ 3 „

Information has been recorded during the year of the housing conditions of families in which a birth occurred at home, and the table that follows is compiled from the Health Visitors' records. It is an analysis of 319 instances where these births were visited, and where the information was obtainable.

No. of persons in family.	No. of families occupying the following number of rooms.							
	1 room.	2 rooms.	3 rooms.	4 rooms.	5 rooms.	6 rooms.	7 rooms.	8 rooms.
1	—	1	1	—	—	—	—	—
2	12	45	29	10	3	—	—	—
3	8	36	24	8	—	—	—	—
4	3	21	27	10	—	1	—	—
5	1	17	18	1	2	—	—	—
6	3	5	5	1	1	—	—	—
7	—	3	5	1	—	—	—	—
8	—	3	4	2	—	—	—	—
9	—	1	4	—	—	—	—	—
10	—	—	—	—	1	—	—	—
11	—	1	—	—	—	—	—	1
12 or over	—	—	—	—	—	—	—	—
Totals	27	133	117	33	7	1	—	1

The newly-born baby has not been included in the above.

Of these 319 births :—

8.5 per cent. occurred in 1-roomed tenements.

41.7	„	„	2	„
36.7	„	„	3	„

The table shows some of the limited housing conditions in homes where babies are born. It demonstrates that of 319 babies, 27 were born in one-roomed tenements and 133 in two-roomed tenements. The number of people in one or two-roomed tenements is high; thus, for example, in three one-roomed tenements where six persons were already living, a baby was born. With regard to two-roomed homes, in one instance eleven persons were already inhabiting the rooms prior to the birth of the baby; in another case the baby's advent raised the number of occupants to ten, and in three instances to nine. For the purposes of the table, kitchens have been included, but not sculleries, bathrooms, &c.

MIDWIVES AND NURSES.

The Supervising Authority for Midwives is the London County Council.

The Borough Council has made arrangements with both the Nursing Associations, whereby the services of Midwives, Maternity Nurses and Nurses are available. Full details of these facilities are set out in Section 2 of this Report.

CONSULTATION AND TREATMENT CENTRES.

The Council has established Pre-Maternity Clinics, which are in charge of a part-time lady doctor. Details of these Clinics are set out in Section 2.

Dental Clinics for expectant and nursing mothers, and children under five years of age, exist in the eastern and western districts of the Borough—one established by the Borough Council and one by the Hampstead Council of Social Welfare. A reference to these Clinics will be found in Section 2. The following is a summary of the work carried out at the Council's Clinic during 1927 :—

Number of Sessions held	..	..	..	50
Patients' Attendances	..	..	..	208
Number of Fillings	..	..	..	3
Number of Scalings	..	..	..	24
Extraction cases	{ Total Number of teeth extracted			.. 213
	{ Gas Administrations			.. 38
	{ Local Administrations			.. 5
	{ Without Anæsthetic			.. —
Number of Dentures (including repairs)	..	..	..	14
Number of Dressings and Root treatment	..	..	..	14
Number for Advice	..	..	..	40
Number of Denture visits	..	..	..	69
Number of New Patients	..	..	..	38

MATERNITY HOMES AND HOSPITALS AND OTHER INSTITUTIONS FOR THE
RECEPTION OF EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN
AS IN-PATIENTS.

Registration of Maternity Homes.—In pursuance of Section 5 of the Midwives and Maternity Homes Act, 1926, 21 maternity homes in Hampstead have been registered by the London County Council, who is the local authority under the Act for London.

Maternity Homes and Hospitals.—The Borough Council subscribes £1 for every Hampstead mother confined in Queen Charlotte's Hospital; and receives a hospital letter for every £6 so subscribed. This arrangement has been in operation since 1919. During 1927, 123 women from the Borough were thus accommodated, in pursuance of this agreement.

New End Hospital.—The Borough Council has made an arrangement with the Guardians whereby a Ward is reserved for Council patients. The Ward contains five beds, which are available for married women only. During the year the number of patients who occupied these beds was 52. The general run of the patients is still of a lower social scale than was at first anticipated. Of the 52 cases admitted, 2 were assessed to pay £1 5s. 0d. weekly; 35 were assessed to pay £1 11s. 6d. weekly; 11 were assessed to pay £2 2s. 0d. weekly; 2 were assessed to pay £2 12s. 6d. weekly; 1 was assessed to pay £3 3s. 0d. weekly and 1, £1 11s. 6d. for two weeks' accommodation.

The patients, who are admitted without the intervention of the Relieving Officer, receive treatment from the Medical Superintendent of the Hospital, and contribute to the cost of their treatment according to the assessment of the Sub-Committee of the Maternity and Child Welfare Committee. The Council made a payment of £2 15s. 0d. per week for each bed occupied, until 31st March, when the charge was raised to £2 17s. 6d. per week. A proportionate amount is paid for a shorter period.

The following scale of charges for a maternity bed in New End Hospital under this Scheme was approved by the Council.

Amount of NET income of husband and wife (arrived at after deducting rent, insurances and 10s. 6d. for each child under 14 years of age).							Charge per week to the patients.				
Under £2 weekly—to be fixed by Committee.											
	£	s.	d.	£	s.	d.		£	s.	d.	
Between	2	0	0	and	2	10	0	..	1	11	6
„	2	10	0	„	3	0	0	..	2	2	0
„	3	0	0	„	3	10	0	..	2	12	6
„	3	10	0	„	4	0	0	..	3	3	0

It was agreed that in those cases where the charge is fixed by the Committee, the minimum amount should be £1 11s. 6d. per week, except in very special cases.

The above charges are based on the assumption that applicants will receive one Maternity Benefit. The charges are increased by 10s. 6d. per week if both husband and wife are eligible for Maternity Benefit, and decreased by 10s. 6d. per week if neither husband nor wife are eligible for Maternity Benefit.

The scheme is limited to families whose net income, calculated in accordance with the above scale, does not exceed £4 per week.

Queen Mary's Maternity Home, Heath Street.—This Home, situated near the summit of the Heath, is available for the wives of ex-service men. The Council does not make a grant to the Home. During the year, 62 Hampstead mothers were confined there.

Care of Children whose Mothers are in Maternity Hospitals.—The Council has entered into an arrangement with Beauchamp Lodge Emergency Home for Children, 2, Warwick Crescent, Paddington, for the boarding-out of children under five years of age whose mothers have been admitted into hospital for their confinements. The Council pays the Home 12s. 6d. per week per child, and the parents are assessed to pay a portion of the cost according to their means.

This facility has been used on five occasions during 1927.

Other Institutions.

St. Mary's Convalescent Home, Birchington-on-Sea.

The Borough Council retains one bed in this Home in return for an annual subscription of £40, and in addition pays 5s. per week for mother only, and 10s. per week for mother and baby when the bed is occupied, the applicants being assessed to pay according to their means. During the year 13 mothers with their babies and two mothers alone stayed at the Home.

Foster Home.

This Institution, which is doing excellent work, is housed at No. 99, Haverstock Hill. The Home is controlled by a voluntary committee, and has accommodation for 28 infants of unmarried mothers in summer and 24 in winter. The Council makes a grant in aid to the Home.

The Cross Roads Club, 88, Alexandra Road.

This Club undertakes to receive unmarried expectant mothers prior to their confinements, and also arranges for their immediate future. The Club is managed by a voluntary committee. The Council does not make a grant towards its expenses.

The Hampstead and Hendon Rescue Association has established its Home at 43, Rosslyn Hill.

Northcourt Hospital, College Crescent.

The Borough Council has an agreement with this hospital whereby sick and ailing children, and children needing minor operations such as circumcision, removal of tonsils and adenoids, etc., are admitted. The Council guarantees the hospital 17s. 6d. per case per week, and assesses the parents according to their means. Under these conditions 35 cases were admitted during the year.

Publicity of Facilities.

The Maternity and Child Welfare Committee co-operate with the Public Libraries Committee in the distribution of a book-mark at the Borough Council Libraries. The Public Health Department use one side of the book-mark to advertise the various health facilities existing for the help of citizens.

Maternal Mortality and Investigations into Maternal Deaths, Still-births and Infant Deaths.

It is the duty of the Health Visitors to inquire into and report to me upon all maternal deaths, still-births, deaths of children under *two* years of age, and cases of puerperal sepsis.

A Special Sub-Committee, consisting of Dr. C. J. R. MacFadden (Chairman), Dr. Sidney Boyd, Dr. Mary B. Douie, Dr. W. S. George, and Mr. T. Hancock Nunn, has been appointed to go into the details of each case so reported upon.

The Health Visitors are present at the meetings of this sub-committee, so that they may answer any questions with regard to the cases and other matters under discussion.

This Special Sub-Committee has been in existence since January, 1924; it took over the work previously carried on by me of investigating the reports of the Health Visitors and other information relating to these deaths, and special cases of illness associated with maternity. The deliberations of the Sub-Committee, which includes all the medical members of the Council, has been in no small measure assisted by information supplied to me, personally, by medical practitioners. In the case of still-births, for example, it is my custom immediately the statutory notification under the Notification of Births Act, 1907, has been received, to write to the notifying doctor, asking him the following questions:—

"Private.

"I have received your notification of the still-birth attended

by you on the inst., viz.:—

“Will you be good enough to let me have some information with regard to this case? For instance, what was the age of the mother and how many previous confinements had she had; also was the still-birth, in your opinion, due to any of the following causes:—

- (a) difficult labour?
- (b) mal-presentation?
- (c) specific disease in the parents?
- (d) kidney or heart disease in the parents?
- (e) any other cause?”

and I have in previous Annual Reports expressed my thanks for the great help so willingly given in answer to my letters. Up to the close of 1927 in no case had I been met with a refusal, but recently I have been refused the information asked for on the grounds that so to do would be a breach of confidence (although my letter was marked “private”), and that the Medical Defence Union, when appealed to, had supported the contention, stating that to answer my questions would be a grave breach of confidence, and that they would not be responsible for any consequences which might follow.

In view of the fact that the communication is a private one from the doctor to myself, that the notification of the still-birth by him comes into the same category as a communication to the Medical Officer of Health, and is not a notification to the Local Authority, I communicated with the Medical Defence Union drawing their attention to the possible far-reaching effect of their decision, and to the fact that the inquiries hitherto conducted had resulted *inter alia* in the appointment of consulting obstetricians available for medical practitioners in all cases of difficulty or abnormality, as we had discovered by means of the inquiries that the great majority of still-births were due to difficult confinement or mal-presentation. In reply I was informed that for a medical practitioner to supply the information asked for, without his patient's consent, would constitute a “grave breach of confidence.”

Work of the Special Sub-Committee.

During 1927 the Committee has considered severally and in detail the following:—

- 64 Deaths of infants under 2 years of age.
- 35 Still-births.
- 5 Maternal deaths.
- 4 Cases of Puerperal Fever.
- 11 Cases of Puerperal Pyrexia.

The 64 deaths of infants under 2 years of age in 1927 were certified to be due to the following causes :—

Cause of Death.				No. of Deaths.
Prematurity	..	..	..	11
Broncho Pneumonia	..	..	..	10
Enteritis	..	..	..	7
Tuberculous Enteritis	..	..	..	1
Bronchitis	..	..	..	3
Measles..	..	..	..	1
Whooping Cough	..	..	..	2
Marasmus	..	..	..	2
Congenital Pyloric Stenosis	..	..	..	3
Congenital Malformation of Liver	..	..	..	1
Acute obstruction due to Congenital Malformation of Gut	..	..	..	1
Congenital Hydrocephalus	..	..	..	2
Congenital Hydronephrosis and Pyonephrosis	..	..	..	1
Congenital Hypertrophic Stenosis of Pylorus	..	..	..	1
Malformation of Cranium	..	..	..	1
Septic Meningitis	..	..	..	1
Septic Meningitis and Spina Bifida	..	..	..	1
Spina Bifida	..	..	..	1
Atelectasis	..	..	..	1
Congestion of Lungs	..	..	..	1
Toxæmia and Dyspepsia	..	..	..	1
Hæmorrhage from untied umbilical cord	..	..	..	2
Hæmorrhage from Placenta	..	..	..	1
Cerebral Hæmorrhage	..	..	..	1
Cerebral Thrombosis	..	..	..	1
Pemphigus Neonatorum	..	..	..	1
Inanition: born in condition of blue asphyxia, owing to cord being twice round neck	..	..	..	1
Infantile debility and blue asphyxia at birth from cord round neck	..	..	..	1
Asphyxia from deprivation of air when face downwards on pillow in perambulator	..	..	..	1
Asphyxia: spasm of glottis by introduction of foreign bodies into air passage at birth and by hyperplasia	..	..	..	1
Found dead and decomposed	..	..	..	1

Of this number, 52 were legitimate infants and 12 were illegitimate.

The Sub-Committee gave the following instructions :—

In 6 cases the certifying doctor be communicated with respecting the cause of death.

In 1 case that inquiries be made at the Convalescent Home where the child had been staying.

In 1 case that the mother be urged to attend the Borough Council's Pre-Maternity Centre and that the Medical Officer in charge be asked to have a Wassermann test made.

In 6 of the 64 deaths the family lived in a 1-roomed tenement, and in 1 of these instances the infant died at home.

Still-Births.

The probable causes of 35 still-births which were investigated by the Special Sub-Committee were obtained from the medical practioners or midwives in attendance.

From the information thus obtained the still-births were attributed to the following causes :—

Difficult labour	..	..	..	3
Prolonged labour	..	..	..	1
Breech presentation	..	..	..	1
Mal-presentation	..	..	..	5
Prematurity	..	..	..	1
Dead infant or macerated foetus	..	..	..	11
Prolapse of cord	..	..	..	1
Mother had a fall 36 hours before confinement				1
Premature detachment of placenta			..	3
Premature rupture of membranes	..		..	1
Albuminuria	..	..	..	2
Post-maturity	..	..	..	1
Hydrocephalic foetus	..	..	..	2
Induction of labour	..	..	..	1
Specific disease	..	..	..	1

All the reports so submitted to me have been placed before the Special Sub-Committee.

It will be seen that of these cases of still-birth, 10, as shown in the first four items of the above list, were due to the difficulties of actual labour itself, and were cases in which the services of the consulting obstetricians might have been advantageously utilised.

Maternal Mortality.

It is regrettable that, despite all our facilities and efforts, 5 deaths in 1927 occurred which were certified to be due to puerperal sepsis or other puerperal causes.

The maternal deaths occurring amongst Hampstead women in recent years are as follows:—

Year.			Puerperal Sepsis.		Other Puerperal causes.		Total.
1921	..	..	3	..	1	..	4
1922	..	..	3	..	3	..	6
1923	..	..	2	..	2	..	4
1924	..	..	1	..	2	..	3
1925	..	..	2	..	3	..	5
1926	..	..	2	..	1	..	3
1927	..	..	2	..	3	..	5

As regards the position generally, it is interesting to note that the Registrar General in his Annual Summary for 1924, pointed out that, taking England and Wales as a whole, after falling steadily down during the periods 1891-1895, 1896-1900, 1901-1905, 1906-1910, maternal mortality had remained stationary, apart from minor fluctuations, during the last fourteen years. Since 1924, there have been but minor variations in the rate.

Every maternal death occurring in the person of a Hampstead woman is investigated by the special sub-committee of the Maternity and Child Welfare Committee, with a view to ascertaining if there are any additional measures that can be adopted to safeguard maternity. Our aim is to see that, so far as is possible, all unnecessary risks are eliminated, that the expectant mother shall be relieved of all anxiety, and that such arrangements are made as will prevent any woman being left with any disabling injury which may cause illness. The deaths of the 5 women above referred to, were thus investigated during the year. The following is the information concerning these cases:—

Case No. 1. Aged 32 years.

Died at home on 4th February, from "adherent placenta, post-partum hæmorrhage, syncope."

Live birth, 4th February.

Patient attended by Jubilee Midwife and doctor.

Consultant called in under the scheme of the Borough Council.

Case No. 2. Aged 26 years.

Attended Borough Council's Pre-Maternity Clinic.

Died in hospital on 17th May from "nephritis of pregnancy—
14 days, uræmia."

Premature child born dead.

Case No. 3. Aged 26 years.

Died in nursing home on 9th August from "pelvic cellulitis
after child-birth, toxæmia, coma."

Still birth, 28th July.

Case No. 4. Aged 24 years.

Died in hospital on 24th September from "puerperal
septicæmia."

Case notified as puerperal fever on 30th July.

Live birth, 15th July.

Case No. 5. Aged 27 years.

Died in hospital on 1st November from "acute suppurative
tonsillitis and anæmia, following severe post-partum
hæmorrhage."

Live birth in nursing home on 6th October.

Patient returned home on 28th October.

Admitted to hospital on 31st October.

Though these maternal deaths may be said to represent the crowning disaster in maternity, it is necessary to realise that they only represent part of the great loss and suffering that may occur as the result of child-bearing; there is the domestic disarrangement, and the suffering among those mothers, who, while they do not succumb, are handicapped by ill health afterwards. It has been estimated that for every maternal death, at least 8 women suffer physical disability as the result of child-bearing.

In the autumn of the year, an important step forward was taken in the direction of preventing the regrettable mortality among child-bearing mothers by the inauguration of the Queen Charlotte's Maternity Hospital and Training School Mother-Saving Campaign. The Metropolitan Mayors and Mayoresses were urged to establish and support Borough Committees for the purposes of awakening the public to the continuing high maternal mortality, and of collecting funds towards the Campaign as initiated by Queen Charlotte's Hospital. The movement is of especial importance, as it includes the undertaking of research work into the causation of puerperal fever, the chief cause of maternal mortality.

Puerperal Fever.

The 4 cases of puerperal fever investigated by the Special Sub-Committee were as follows:—

Case No. 1. Aged 24 years.

Confined at home.

Removed to M.A.B. Hospital.

Recovered. Child survived.

Case No. 2. Aged 24 years.

Confined in — Hospital.

Removed to special Hospital.

Died there. Child survived.

Case No. 3. Aged 22 years.

Confined in — Hospital.

Removed to special Hospital.

Recovered. Child survived.

Case No. 4. Aged 25 years.

Confined at home.

Removed to Hospital.

Recovered. Child survived.

Puerperal Pyrexia.

The 11 cases of Puerperal Pyrexia investigated by the Special Sub-Committee were as follows:—

Case No. 1. Aged 20 years.

Confined in — Hospital.

Recovered. Child survived.

Case No. 2. Aged 28 years.

Confined in — Hospital.

Recovered. Child still-born.

Case No. 3. Aged 20 years.

Confined in — Hospital.

Recovered. Child survived.

Case No. 4. Aged 20 years.

Confined in — Hospital.

Recovered. Child still-born.

Case No. 5. Aged 21 years.

Confined in — Hospital.

Recovered. Child still-born.

Case No. 6. Aged 21 years.

Confined at home.

Jubilee Midwife and Doctor in attendance.

Consulting Obstetrician called in under Borough Council's scheme. Patient removed to M.A.B. Hospital.

Recovered. Child survived.

Case No. 7. Aged 24 years.

Confined in — Hospital.

Recovered. Child survived.

Case No. 8. Aged 25 years.

Miscarriage at home.

Removed to Hospital.

Recovered.

Case No. 9. Aged 35 years.

Confined at home.

Doctor and Jubilee Nurse in attendance

Consulting Obstetrician called in under Borough Council's scheme.

Recovered. Child survived.

Case No. 10. Aged 27 years.

Confined at — Hospital.

Recovered. Child survived.

Case No. 11. Aged 19 years.

Confined at home.

Doctor and Jubilee Midwife in attendance.

Recovered. Child survived.

Consulting Obstetricians.—The scheme which the Council inaugurated, whereby the services of obstetricians of definite consulting status were made available in cases of difficulty or abnormality, has been in operation since May, 1926.

The terms of the scheme are as follows :—

- (a) That the patient be a Hampstead citizen.
- (b) That the medical practitioner immediately inform the Medical Officer of Health that he has called in the services of one of the Consulting Obstetricians, giving the name and address of the patient, date of the call, the reason, and the result.
- (c) That the Borough Council be responsible to the Consulting Obstetrician for a fee of £5 5s. 0d. per case.

The scheme is intended to apply to those people who cannot afford the consultant's ordinary fee, and is not to be confused with the London County Council's scheme, whereby a midwife can summon a general practitioner to her aid.

The Borough Council reserves to itself the right to ask the patient to contribute a portion, or the whole, of the fee, if in the subsequent investigation it is found that the patient is capable of so doing.

The following is a list, approved by the Council, of contributions to be paid by patients.

Amount of net income of husband and wife, which is arrived at after deducting rent, insurance and 10s. 6d. for each child.						Charge to Applicant in respect of services of Consulting Obstetricians.
Under £2 weekly						No charge.
	£	s.	d.	£	s.	d.
Between 2	0	0	and 2	10	0	1 1 0
"	2	10	0	"	3	0 0
"	3	0	0	"	3	10 0
"	3	10	0	"	4	0 0
"	4	0	0	"	over	5 5 0

During the year consultants were called in to two cases for diagnosis, and to three cases for difficult labour. In 4 cases the patient recovered without mishap, and 1 patient died.

Pre-Maternity Clinics.

The Pre-Maternity Clinics have always been entirely municipal undertakings, staffed by a lady Doctor, who is a part-time officer, and Health Visitors.

During the year the total number of new cases seen was 305, the clinics being open on 149 occasions.

Hampstead Clinic.

Held at 27, Pond Street on Thursdays, at 2.30 p.m. (Clinic closed on December 21st pending re-building of premises.)

Number of occasions on which Clinic open	..	..	51
Number of new cases seen	..	..	101
Total number of attendances during the year	..	..	378

Kilburn Clinic.

Held at 73, Dynham Road on Mondays, at 2 p.m., and on Thursdays, at 10 a.m.

Mondays.

Number of occasions on which Clinic was open	..	47
Number of new cases seen	..	118
Total number of attendances during the year	..	498

Thursdays.

Number of occasions on which Clinic was open	..	51
Number of new cases seen	..	86
Total number of attendances during the year	..	401

Midwifery Service.

The Borough Council gives financial aid to the two Nursing Associations for their provision of maternity nurses and midwives.

During the year the Nursing Associations' Maternity Nurses and their Midwives have attended the following cases:—

Cases attended by:—

Maternity Nurses	..	75
Midwives	..	120

Methods of dealing with Unmarried Mothers and Illegitimate Children, and with Children permanently or temporarily deprived of a home with their own parents.

The Borough Council has made no direct arrangements for dealing with these matters. They make a grant to the Foster Home, 99, Haverstock Hill. The Cross Roads Club, at 88, Alexandra Road, receives expectant mothers prior to their admission to maternity beds, and gives them a helping hand afterwards.

The Hampstead and Hendon Rescue Association Home is at 43, Rosslyn Hill.

No grant is made by the Council to either of these.

Further details with regard to these Homes are given earlier in this Section.

Arrangements for the supply of Food and Milk.

Food is supplied to expectant and nursing mothers during the last three months of pregnancy, and milk is supplied to them, and to children up to three years of age, in accordance with the terms of Circular No. 185, dated 31st March, 1921, of the Ministry of Health, and of Circular No. 4, dated 9th August, 1918, of the Local Government Board.

The number of expectant and nursing mothers to whom food and milk has been supplied has varied during the year from 13 to 33 at any one time.

The number of families in which children have been given milk has similarly varied from 25 to 39.

The total amount thus spent on Food in 1927 was £86 13s. 5d., and on Milk £327 5s. 6d.

The milk and food is granted, either free or at half cost, where the incomes fall below the undermentioned standard, which was adopted by the Council on 23rd July, 1925:—

SCALE OF INCOME (after deduction of rent).

Number of persons in family.	FREE MILK.			ASSISTED (half-price) MILK.		
	Scale per head.		Scale per family.	Scale per head.		Scale per family.
	s.	d.	£ s. d.	s.	d.	£ s. d.
1	13	0	0 13 0	15	0	0 15 0
2	10	6	1 1 0	12	6	1 5 0
3	8	6	1 5 6	10	0	1 10 0
4	7	6	1 10 0	8	6	1 14 0
5	7	0	1 15 0	8	0	2 0 0
6	6	6	1 19 0	7	6	2 5 0
7	6	6	2 5 6	7	6	2 12 6
8	6	6	2 12 0	7	6	3 0 0
9	6	6	2 18 6	7	6	3 7 6
10	6	6	3 5 0	7	6	3 15 0
11	6	6	3 11 6	7	6	4 2 6
12	6	6	3 18 0	7	6	4 10 0

The assistance given is one pint of milk daily, 2 lbs. quaker oats and $\frac{1}{2}$ lb. cocoa weekly to expectant or nursing mothers, and one pint of milk daily to children up to three years of age.

Widows', Orphans', &c., Act, 1925.

The Widows', Orphans', and Old Age Contributory Pensions Act, 1925, provides that, in certain circumstances (*e.g.*, desertion or abandonment of a child) and in respect of an orphan's pension, the Minister of Health may direct that the money shall be paid to the Local Authority for the benefit of the child. In London the County Council is the Local Authority, but the Borough Council has agreed to carry out the powers and duties of the County Council.

During 1927 no cases were referred to the Borough Council.

Puerperal Fever and Puerperal Pyrexia.

These Regulations came into operation on the 1st October, 1926, and extend notification to Puerperal Pyrexia, which means "any febrile condition (other than a condition which is required to be notified as puerperal fever) occurring in a woman within 21 days after child-birth or miscarriage in which a temperature of 100·4 deg. Fahrenheit (38 deg. Centigrade) or more has been sustained during a period of 24 hours or has recurred during that period."

Certifying practitioners, when notifying cases, are required to indicate, *inter alia*, (a) whether they desire to have a second opinion on a case; (b) to state if it is desired to have a bacteriological examination of lochia or blood, etc.; or (c) if facilities are available for all necessary treatment.

Puerperal Fever.

4 cases were notified, 1 of which proved fatal.

Puerperal Pyrexia.

11 cases were notified during 1927, none of which proved fatal. 7 of these occurred in Hospitals and 2 of the 4 cases which occurred at home were removed to Hospitals. In 3 instances the infants were still-born and 1 was a case of miscarriage.

Ophthalmia Neonatorum.

Total cases notified by medical practitioners	..	7
" " midwives	..	—
Number treated at home	..	1
" in hospital	..	6
" at hospital as out-patients	..	—
Vision unimpaired	..	7
" impaired	..	—
Total Blindness	..	—
Number of Deaths	..	—

Of the 7 cases that occurred, 4 were first children, 1 was a second child and 2 were third children. Both eyes were affected in 5 cases, and the left eye only in 2 cases.

In 5 instances the babies were born in maternity hospitals, and 4 of the notifications were received direct from the hospitals. The 1 other case was not notified from a maternity hospital, but by the Medical Officer in charge of the Borough Council's Pre-Maternity Clinic.

Only two cases occurred in babies born at home, one of which was removed to St. Margaret's Hospital (Metropolitan Asylums Board), Leighton Road, Kentish Town.

Of the 5 cases occurring in obstetric hospitals 3 were removed to St. Margaret's Hospital.

All the 7 cases recovered without any injury whatever.

In Hampstead, by agreement between the Council and the two local Nursing Associations, the services of the nurses are available for any such cases as need their help.

Measles.

Measles is compulsorily notifiable in Hampstead in pursuance of the Borough of Hampstead (Measles) Regulations, 1920, which came into force on 1st August of that year. These Regulations provide that a medical practitioner shall not be required to notify a case of Measles:—

- (a) If he has reasonable grounds for supposing that it has already been notified, or
- (b) If a case of the disease which he is attending has to his knowledge occurred in the same household and been notified within the period of two months immediately preceding the date on which he first becomes aware of the disease in the case he is attending.

The question of hospital accommodation for Measles, which had been under consideration by the Metropolitan Asylums Board for some time, came before a Conference in April 1926, between Medical Officers representing the Ministry of Health, the London County Council, the Metropolitan Branch of the Society of Medical Officers of Health and the Metropolitan Asylums Board. The principal object of the Conference was to discuss the question of whether priority should be given to selected cases of Measles over certain cases of Scarlet Fever, instead of, as hitherto, according priority of claim to the latter disease, and, if so, what procedure should be followed in making the selection.

It was agreed that, in view of the much higher mortality of Measles, and its far greater destructive effect on child life, the practice of giving priority to Scarlet Fever cases should cease, that in lieu thereof, there should be a definite allocation of beds to the two diseases, that the allocation should be revised periodically in relation to the requirements of the moment, and that when Measles was epidemic the larger proportion of beds should be allocated to it.

When, however, the number of beds available becomes short, admission of cases of Scarlet Fever or Measles will be referred to the Borough Medical Officers of Health in order that the most suitable cases shall be selected. It was further agreed that the selection of cases for admission should be based on type of *home* rather than type of *case*.

Good nursing is essential in cases of Measles in view of the complications of bronchitis and pneumonia, diarrhoea and convulsions that may occur. It is especially fatal in rickety children. The mortality from Measles is not, however, a complete index of the mischief wrought by it. To the complications mentioned already must be added many ailments which cause prolonged disablement. Under the terms of an arrangement made with the Borough Council in 1916, both Nursing Associations render assistance when required, and the services of a fully-trained nurse can be obtained, free of charge, upon application to the Hampstead District Nursing Association, 25, Heathurst Road, N.W.3, or the Kilburn and West Hampstead District Nursing Association, 20, Dennington Park Road, N.W.6.

During the year 82 cases were notified. Only 2 deaths occurred, and the following is the information in relation to these fatal cases, both of which were nursed at home :—

Age.	Remarks.
7 weeks	Post-mortem held. Case notified by parent the day before death.
1 year 11 months	Doctor in attendance. Child contracted illness at Sandown, Isle of Wight.
Both cases were certified as dying from pneumonia.	

Whooping Cough.

This disease is not compulsorily notifiable in Hampstead; our principal source of information of the occurrence of cases is the Head Teachers of Schools. 4 deaths were due to Whooping Cough in 1927, and the following is the information relating to them.

Cases removed to hospital :—

Child aged 9 months.

Had Whooping Cough and Pneumonia when admitted to hospital. Died one month after admission.

Child aged 2 years.

Removed to hospital. Father caretaker of residential flats.

Cases nursed at home:—

Child aged 4 months.

Had been ill for 2 months; developed Bronchitis five days before death. Was under the supervision of a doctor.

Child aged 4 years.

Developed Pneumonia. Was under the supervision of a doctor.

Epidemic Diarrhœa.

Ten deaths at all ages occurred in 1927 from Diarrhœa and Enteritis. Of these seven took place among children under two years of age.

Polio-Myelitis.

One case occurred during the year. The case that was notified was that of a female child, aged $3\frac{1}{2}$ years, and the patient is still in hospital, making progress.

Section 8.

Vital Statistics of the Borough.

The Borough.

Year.	Numbe of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	1,516	904	133	88	73
1903	1,453	837	126	87	66
1904	1,445	892	161	111	73
1905	1,421	823	133	94	73
1906	1,437	850	111	77	57
1907	1,359	817	98	73	61
1908	1,400	803	97	69	74
1909	1,328	839	99	74	53
1910	1,340	829	81	60	58
1911	1,276	847	105	82	56
1912	1,281	861	79	62	64
1913	1,325	951	91	69	49
1914	1,273	913	91	71	57
1915	1,327	994	101	76	48
1916	1,164	862	73	63	55
1917	1,123	922	90	80	69
1918	895	1,027	69	77	75
1919	1,156	1,036	96	83	56
1920	1,566	860	75	48	41
1921	1,342	973	88	65	63
1922	1,290	970	72	56	50
1923	1,238	947	54	44	51
1924	1,186	1,029	66	56	58
1925	1,073	923	59	55	52
1926	1,077	928	65	60	51
1927	1,028	1,055	53	51	38

No. 1 (Town) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	192	163	20	104	17
1903	194	127	14	72	11
1904	195	125	20	102	13
1905	194	127	24	124	9
1906	205	131	21	102	5
1907	185	152	15	81	13
1908	225	108	11	49	7
1909	196	140	15	76	6
1910	199	118	15	75	6
1911	207	133	19	92	7
1912	183	135	12	65	5
1913	201	161	11	55	11
1914	152	130	14	92	5
1915	157	147	17	108	5
1916	132	140	7	53	13
1917	143	143	12	84	14
1918	115	157	13	113	11
1919	149	170	13	87	10
1920	208	142	7	34	4
1921	178	147	17	95	11
1922	161	130	11	68	13
1923	164	139	6	36	10
1924	149	138	4	27	7
1925	139	139	13	93	7
1926	141	134	9	64	5
1927	109	139	9	83	4

No. 2 (Belsize) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	239	135	18	75	15
1903	211	121	13	62	13
1904	217	141	23	106	12
1905	209	131	13	62	10
1906	187	127	8	43	13
1907	205	114	13	63	10
1908	205	126	8	39	16
1909	204	130	16	78	8
1910	207	119	9	43	8
1911	189	135	17	90	10
1912	188	127	8	42	7
1913	214	126	16	75	5
1914	195	141	9	46	11
1915	317	144	12	38	6
1916	189	127	7	37	6
1917	185	132	13	70	11
1918	149	155	7	47	9
1919	196	159	20	102	9
1920	213	132	9	42	7
1921	197	143	12	61	7
1922	202	151	10	49	7
1923	156	147	6	38	10
1924	145	164	9	62	10
1925	145	137	5	34	10
1926	144	138	9	62	10
1927	137	168	4	29	8

No. 3 (Adelaide) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	103	95	3	29	7
1903	95	101	9	95	1
1904	100	99	13	130	8
1905	96	92	4	42	4
1906	97	92	10	103	5
1907	75	86	8	107	2
1908	93	78	6	65	4
1909	83	88	4	48	3
1910	96	78	2	21	5
1911	82	99	6	73	3
1912	117	77	6	51	9
1913	97	99	9	93	4
1914	88	99	5	57	2
1915	77	104	5	65	2
1916	104	95	12	115	5
1917	114	109	7	61	6
1918	97	119	6	62	11
1919	97	130	10	104	6
1920	161	109	6	37	3
1921	133	119	10	75	8
1922	149	121	6	40	5
1923	141	128	6	42	6
1924	149	121	10	67	7
1925	117	112	4	34	4
1926	106	107	4	38	1
1927	104	139	2	19	6

No. 4 (Central) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	110	71	11	100	5
1903	99	60	8	81	4
1904	90	62	11	122	1
1905	113	60	5	44	6
1906	95	83	3	32	2
1907	108	68	9	83	5
1908	104	82	6	58	7
1909	116	63	3	26	3
1910	105	82	8	76	3
1911	92	75	8	87	3
1912	97	76	4	41	6
1913	91	84	6	66	—
1914	84	76	4	48	6
1915	91	92	4	42	6
1916	93	97	4	43	3
1917	69	76	2	29	—
1918	69	99	5	72	7
1919	101	117	5	49	4
1920	131	91	7	53	2
1921	112	102	8	71	3
1922	85	113	9	106	3
1923	90	98	3	33	5
1924	91	133	4	44	8
1925	82	111	8	97	3
1926	96	108	3	31	5
1927	89	122	2	22	1

No. 5 (West End) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	275	107	20	72	6
1903	243	111	21	86	12
1904	283	120	22	78	8
1905	250	131	23	92	11
1906	259	115	14	54	8
1907	250	114	16	64	9
1908	254	121	26	102	9
1909	239	118	13	54	6
1910	216	121	17	79	11
1911	216	102	15	69	10
1912	226	126	13	57	12
1913	240	145	11	46	7
1914	256	140	18	70	14
1915	218	151	13	60	11
1916	311	117	10	47	5
1917	221	137	13	59	13
1918	124	162	10	81	12
1919	175	139	12	68	12
1920	268	119	16	60	6
1921	211	146	12	57	9
1922	223	138	6	27	8
1923	215	149	6	28	8
1924	179	126	8	45	7
1925	171	148	7	41	12
1926	178	153	12	67	12
1927	181	164	9	50	7

No. 6 (Kilburn) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	435	219	45	103	16
1903	417	184	39	93	18
1904	408	206	54	132	22
1905	426	171	50	117	26
1906	444	197	41	92	15
1907	391	179	28	71	16
1908	393	186	30	76	21
1909	341	182	37	108	17
1910	379	192	24	63	16
1911	347	179	31	89	16
1912	353	188	26	74	14
1913	354	213	25	71	18
1914	385	212	25	65	13
1915	329	230	40	121	11
1916	309	180	28	91	20
1917	280	208	37	132	17
1918	241	225	21	87	18
1919	296	201	24	81	11
1920	408	172	19	48	14
1921	364	204	21	58	11
1922	303	202	16	53	11
1923	333	180	16	48	7
1924	316	206	23	73	15
1925	275	170	12	44	13
1926	266	186	20	75	17
1927	243	188	21	86	8

No. 7 (Priory) Ward.

Year.	Number of Births.	Number of Deaths.	Infantile Deaths.		Number of Deaths from Pulmonary Tuberculosis.
			Number.	Rate per 1000 Births.	
1902	162	110	16	99	7
1903	194	116	21	108	5
1904	152	121	13	85	9
1905	133	103	14	105	7
1906	150	93	9	60	8
1907	127	94	7	55	6
1908	126	93	10	79	7
1909	149	111	11	74	8
1910	138	111	6	43	8
1911	143	115	9	63	5
1912	117	115	7	60	10
1913	128	117	12	94	3
1914	113	110	16	142	5
1915	138	126	10	72	7
1916	126	106	5	40	3
1917	111	117	6	54	8
1918	100	110	7	70	7
1919	142	120	12	84	5
1920	177	95	11	62	5
1921	147	112	8	54	14
1922	167	115	14	84	3
1923	139	106	11	79	5
1924	157	141	8	51	4
1925	144	106	10	69	3
1926	146	102	8	55	1
1927	165	135	6	36	4



APPENDIX I

REPORTS

OF THE

Tuberculosis Medical Officer,

THE

Medical Officer in Charge

OF THE

Pre-Maternity Clinics

AND THE

Public Analyst.

Principal Tuberculosis Dispensary,

73, Duncan Road, N.W.S.

Year	Number of Cases	Number of Deaths	Number of Cases by Age Group		Number of Cases by Sex
			Under 15	15 and over	
1900	100	50	20	80	50
1901	110	55	22	88	55
1902	120	60	24	96	60
1903	130	65	26	104	65
1904	140	70	28	112	70
1905	150	75	30	120	75
1906	160	80	32	128	80
1907	170	85	34	136	85
1908	180	90	36	144	90
1909	190	95	38	152	95
1910	200	100	40	160	100
1911	210	105	42	168	105
1912	220	110	44	176	110
1913	230	115	46	184	115
1914	240	120	48	192	120
1915	250	125	50	200	125
1916	260	130	52	208	130
1917	270	135	54	216	135
1918	280	140	56	224	140
1919	290	145	58	232	145
1920	300	150	60	240	150
1921	310	155	62	248	155
1922	320	160	64	256	160
1923	330	165	66	264	165
1924	340	170	68	272	170
1925	350	175	70	280	175
1926	360	180	72	288	180
1927	370	185	74	296	185
1928	380	190	76	304	190
1929	390	195	78	312	195
1930	400	200	80	320	200
1931	410	205	82	328	205
1932	420	210	84	336	210
1933	430	215	86	344	215
1934	440	220	88	352	220
1935	450	225	90	360	225
1936	460	230	92	368	230
1937	470	235	94	376	235
1938	480	240	96	384	240
1939	490	245	98	392	245
1940	500	250	100	400	250
1941	510	255	102	408	255
1942	520	260	104	416	260
1943	530	265	106	424	265
1944	540	270	108	432	270
1945	550	275	110	440	275
1946	560	280	112	448	280
1947	570	285	114	456	285
1948	580	290	116	464	290
1949	590	295	118	472	295
1950	600	300	120	480	300
1951	610	305	122	488	305
1952	620	310	124	496	310
1953	630	315	126	504	315
1954	640	320	128	512	320
1955	650	325	130	520	325
1956	660	330	132	528	330
1957	670	335	134	536	335
1958	680	340	136	544	340
1959	690	345	138	552	345
1960	700	350	140	560	350
1961	710	355	142	568	355
1962	720	360	144	576	360
1963	730	365	146	584	365
1964	740	370	148	592	370
1965	750	375	150	600	375
1966	760	380	152	608	380
1967	770	385	154	616	385
1968	780	390	156	624	390
1969	790	395	158	632	395
1970	800	400	160	640	400
1971	810	405	162	648	405
1972	820	410	164	656	410
1973	830	415	166	664	415
1974	840	420	168	672	420
1975	850	425	170	680	425
1976	860	430	172	688	430
1977	870	435	174	696	435
1978	880	440	176	704	440
1979	890	445	178	712	445
1980	900	450	180	720	450
1981	910	455	182	728	455
1982	920	460	184	736	460
1983	930	465	186	744	465
1984	940	470	188	752	470
1985	950	475	190	760	475
1986	960	480	192	768	480
1987	970	485	194	776	485
1988	980	490	196	784	490
1989	990	495	198	792	495
1990	1000	500	200	800	500

REPORTS

Tuberculosis Medical Officer

Medical Officer in Charge



Public Analyst

APPENDIX I.

R E P O R T

For the year 1927

OF THE

Tuberculosis Medical Officer and Assistant
Medical Officer of Health for Tuberculosis Work.

A. J. SCOTT-PINCHIN,
M.D. (Lond.), M.R.C.P. (Lond.).

Municipal Tuberculosis Dispensary,
73, Dynham Road, N.W.6.

73, DYNHAM ROAD,

KILBURN, N.W. 6.

TO THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE METROPOLITAN BOROUGH OF HAMPSTEAD.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to submit a report on the working of the Borough Tuberculosis Dispensary for the year 1927.

401 patients attended the Dispensary during the year, and the total number of attendances was 1184, at which 604 systematic physical examinations were made. The attendances were 30 more than last year.

New applicants attending numbered 223, and these have been classified as shown in Sections A and B of the following report :—

Tuberculosis Scheme of the Hampstead Metropolitan Borough Council.

Return showing the work of the Dispensary during the year 1927.

Diagnosis.	Palmonary.				Non-Pulmonary.				Total.			
	Adults.		Children.		Adults.		Children.		Adults.		Children.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
A.—New Cases examined during the year (excluding contacts):—												
(a) Definitely tuberculous	16	25	—	1	—	5	1	—	16	30	1	1
(b) Doubtfully tuberculous... ..	—	—	—	—	—	—	—	—	2	6	3	3
(c) Non-tuberculous	—	—	—	—	—	—	—	—	16	32	28	10
B.—Contacts examined during the year :—												
(a) Definitely tuberculous	1	1	—	—	—	—	—	—	1	1	—	—
(b) Doubtfully tuberculous... ..	—	—	—	—	—	—	—	—	2	3	2	1
(c) Non-tuberculous	—	—	—	—	—	—	—	—	5	19	19	22
C.—Cases written off the Dispensary Register as :—												
(a) Cured	—	2	—	—	—	—	—	—	—	2	—	—
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error)	—	—	—	—	—	—	—	—	25	63	55	42
D.—Number of Persons on Dispensary Register on December 31st :—												
(a) Diagnosis completed	56	94	2	2	6	14	17	13	62	108	19	15
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	—	5	4	2
Number of persons on Dispensary Register on January 1st	248				Number of consultations with medical practitioners :—							
Number of patients transferred from other areas and of "lost sight of" cases returned... ..	24				(a) At Homes of Applicants				16			
Number of patients transferred to other areas and cases "lost sight of"	74				(b) Otherwise				63			
Died during the year	19				Number of other visits by Tuberculosis Officers to Homes				8			
Number of observation cases under A (b) and B (b) above in which period of observation exceeded 2 months	22				Number of :—							
Number of attendances at the Dispensary (including Contacts)	1184				(a) Specimens of sputum, &c., examined				271			
Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for "Light" treatment	25				(b) X-ray examinations made in connection with Dispensary work				49			
Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary	—				Number of Insured Persons on Dispensary Register on the 31st December				85			
Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes	1243				Number of Insured Persons under Domiciliary Treatment on the 31st December				9			
					Number of reports received during the year in respect of Insured Persons :—							
					(a) Form G.P. 17				2			
					(b) Form G.P. 36				21			

Potential contacts accruing during the year number 110, of whom 60, or 55 per cent., have been examined. The percentage last year was 68 per cent.

There have been 16 consultations with doctors in regard to patients.

63 letters have been sent to 30 doctors concerning cases referred for an opinion.

I have made visits to the homes of patients in relation to 8 cases and 24 visits to New End Hospital.

Of the cases under treatment:—

53 were referred to London County Council for Sanatoria. Of these 4 were refused, 1 withdrew and the rest received benefit.

6 were admitted to New End Hospital.

5 do. Victoria Park Hospital.

2 do. Hampstead beds at Northwood.

10 do. Hampstead General Hospital.

4 were referred to the Out-patient Department of the Hampstead General Hospital, Hampstead.

There has been a decrease in the number of deaths. These total 45, as against 56 last year. The deaths amongst ex-service men amount to 6, being the same as last year.

The number of notifications shows a slight increase, the total being 79 pulmonary and 11 non-pulmonary.

23 cases were notified from hospital and sanatoria, many of which did not return to Hampstead on discharge. Some have attended on discharge, some are still in Hampstead, whilst others continue to attend their hospital of origin.

18 of the cases notified died during the year.

11 cases occurred in domestic servants.

During the year 49 X-ray examinations have been made, and the results attain the same high standard for which I expressed my appreciation last year.

Of 19 Dispensary cases who died last year:—

11 died at home,

5 at the Infirmary,

1 at Hospital,

2 in L.C.C. beds at Sanatoria.

I have visited the New End Hospital frequently during the year, and have to thank Dr. Reade for his courtesy and help in respect of the tuberculous patients in that Institution.

The outstanding feature in the report this year is the sudden fall in the number of deaths; this can be scarcely other than accidental, and one would expect it to be balanced by the figures for next year; at the same time it serves as a very definite pointer to the gradual decrease in the virulence of the disease.

The *incidence* of the disease is difficult to estimate; the virulence may be judged safely by the Registrar General's report; in the same way the notifications are figures of comparatively small value, except as an indication of the susceptibility and lack of resistance of the individual; just as a mild case of any infectious disease may escape notification. A recent paper by Dr. Ward, T.M.O., Devon, in the "Lancet" of January 21st, is extremely illuminating, and expresses views which I have held myself for some years; it is a point of view that would, I think, never be formed by one who had not had experience in a Tuberculosis Clinic with its close association with the patient; Dr. Ward states his conception of the disease as "a widespread disease terminating usually in uneventful recovery among the highly resistant majority of the population, but dangerous to a minority with a low resistance."

I think in this lies half the difficulties arising concerning notification; if the 40 to 50 per cent. of the population who have had at some time a tuberculous infection were notified, then there would be few unnotified cases dying. But the procedure soon would defeat its own ends, however, one of these patients whose resistance is lowered by some concurrent disease may easily die within 3 months or less of notification. The dangerous cases from the communal point of view are those resistant cases with advanced disease who possibly never attend a doctor or go about labelled as chronic bronchitis. The lack of recognition of those cases, grouped by Ward "Minor Tuberculosis," *i.e.*, tuberculosis infection in a resistant person, accounts, I think, for the variety of opinions as to the prevalence of marital tuberculosis.

In my experience it is exceedingly common to find the partner of an infected patient exhibiting no malaise or other outward signs of disease, and yet having a few signs in the lungs which in a person not exposed to infection one would regard as of no importance.

In my experience from watching these cases, they ultimately clear

up, and they clear up without any other treatment than a little care for the health of the patient.

Here, I think, is one reason of conflicting Sanatorium reports; and although it is doubtful if Dr. Stock's report can be taken as expressing the true results of Sanatorium treatment, I think that there is no doubt that many of the A1 cases entering Sanatoria would do as well and get cured as satisfactorily outside.

At the same time, if an A1 case exhibits any signs of Toxæmia or of failure of resistance, there can be little doubt but Sanatorium treatment or Convalescent treatment is of use.

In Dispensary work and amongst the poorer classes the economic factor is the principal one in the etiology of the disease.

In discussing the matter with other Tuberculosis Officers I have raised the question as to how many cases seen and diagnosed as non-tuberculous are afterwards found to have developed tuberculosis, and we have agreed the extreme rarity with which this occurs, and this in spite of the large number of contacts examined.

I think it is fair to assume that when a case does fail in resistance or becomes massively infected the progress of the disease is rapid, and that this accounts to some extent for late notification. From the figures at the Dispensary it would seem that much of the money spent on Sanatorium benefit is completely wasted. This arises, I think, from the short period of average benefit, and from the economic factor that the patient faces on return; either having to work or having less money—often both.

The best method of expending money available to the best advantage is difficult to determine, and the mere fact of centralisation makes the machine so cumbersome that no tentative scheme is possible for trial.

The effect of breaking a habit of work always tells on return to work. One finds this in other diseases; it is common to find persons with heart disease working at arduous occupations and keeping well; but if they take a prolonged rest and then go back to work of the same type it is usual for their hearts to fail; the same occurs in the very busy, healthy individual after a holiday; he finds his work, for a time, much more tiring; so that if only 3 months is to be given, which cannot help to cure the disease, are we doing more harm than good? New schemes naturally

are a matter for intensive consideration, but it would seem that improvements might be made:—

- (a) By the provision of Convalescent beds where "A" cases could be sent for a short period and where doubtful cases could be sent to give them a pick-up.
- (b) By the provision of local accommodation for advanced and dying cases.
- (c) By the provision of longer Sanatorium treatment for cases likely to benefit.

But whatever the success of the methods used in the treatment and control of this disease, the virulence of the disease and the death rate are steadily diminishing all over the country.

In the following tabular statement some idea may be gained of the work done in connection with the Dispensary since its inception:—

Year.	No. of New Applicants.	No. of New Applicants treated.	No. of Contacts examined.	Total Attendances of all kinds.
1913 1st Feb. to 31st Dec.	455	191	204	2808
1914	455	118	195	1913
1915	308	146	158	899
1916	230	165	100	1519
1917	383	183	113	1682
1918	371	105	124	1821
1919	296	85	57	1543
1920	384	221	112	2625
1921	479	127	192	2327
1922	445	113	223	1738
1923	422	120	199	1534
1924	365	111	151	1601
1925	299	81	128	1359
1926	262	93	112	1154
1927	223	73	75	1184

I have to thank the Dispensary Staff for their efficient and keen work, and Dr. Scrase for his helpful consideration.

A. J. SCOTT-PINCHIN,

M.D. (LOND.), M.R.C.P. (LOND.).

and whether the intensive consideration, but it would seem that improvement might be made:—

- (a) By the provision of Convalescent beds where "A" cases could be sent after a short period and where suitable cases could be sent to the hospital after a short period.
- (b) By the provision of local accommodation for advanced and convalescent cases, and by the provision of longer treatment for cases likely to benefit.

But whatever the success of the methods used in the treatment and control of this disease, the virulence of the disease and the death rate are steadily diminishing all over the country.

In the following tabular statement some idea may be gained of the work done in connection with the Department since its inception:—

Year	Number of cases treated in the Department	Number of cases treated in the Department	Number of cases treated in the Department
1907	1,181	1,181	1,181
1908	1,154	1,154	1,154
1909	1,137	1,137	1,137
1910	1,120	1,120	1,120
1911	1,103	1,103	1,103
1912	1,086	1,086	1,086
1913	1,069	1,069	1,069
1914	1,052	1,052	1,052
1915	1,035	1,035	1,035
1916	1,018	1,018	1,018
1917	1,001	1,001	1,001
1918	984	984	984
1919	967	967	967
1920	950	950	950
1921	933	933	933
1922	916	916	916
1923	899	899	899
1924	882	882	882
1925	865	865	865
1926	848	848	848
1927	831	831	831
1928	814	814	814
1929	797	797	797
1930	780	780	780
1931	763	763	763
1932	746	746	746
1933	729	729	729
1934	712	712	712
1935	695	695	695
1936	678	678	678
1937	661	661	661
1938	644	644	644
1939	627	627	627
1940	610	610	610
1941	593	593	593
1942	576	576	576
1943	559	559	559
1944	542	542	542
1945	525	525	525
1946	508	508	508
1947	491	491	491
1948	474	474	474
1949	457	457	457
1950	440	440	440
1951	423	423	423
1952	406	406	406
1953	389	389	389
1954	372	372	372
1955	355	355	355
1956	338	338	338
1957	321	321	321
1958	304	304	304
1959	287	287	287
1960	270	270	270
1961	253	253	253
1962	236	236	236
1963	219	219	219
1964	202	202	202
1965	185	185	185
1966	168	168	168
1967	151	151	151
1968	134	134	134
1969	117	117	117
1970	100	100	100
1971	83	83	83
1972	66	66	66
1973	49	49	49
1974	32	32	32
1975	15	15	15

I have to thank the Department for their efficient and kind work, and the Government for their helpful consideration.

A. L. SCOTT-PHILLIPS.

M.D. (Lond.), M.R.C.P. (Lond.).

General Practitioner, 1, King's Road, London, S.W. 5.

Received 10th March 1976.

APPENDIX II.

REPORT

For the year 1927

OF THE

Medical Officer in Charge

OF THE

Pre-Maternity Clinics.

**MARY KIDD,
M.B. (Lond.).**

**33, South End Road, N.W. 3, and
73, Dynham Road, N.W. 6.
2nd March, 1928.**

**Report of the Medical Officer of the Hampstead Borough
Council Pre-Maternity Clinics.**

	Western Clinic.		Eastern Clinic.	
Number of NEW cases	204	..	101	..
Number of attendances of OLD patients	695	..	277	..
Number of sessions held	98	..	51	..
Average attendance per session ..	9	..	7	..
Number of patients referred to dentist..	105	..	42	..
Number of patients sent to Convalescent Home	12	..	3	..

Of the 305 new cases who attended in 1927,

55 were normal cases,
150 were slightly abnormal,
49 were seriously abnormal,
8 were connected with venereal disease,
26 attended for the first time after confinement,
8 cases were not eligible, and in
9 cases it was doubtful if they were so.

**Analysis of Ante-Natal Cases (slightly abnormal and
seriously abnormal).**

Morning sickness	26
Dyspepsia	16
Marked constipation	57
Anæmia and debility	6
Varicose veins	12
Phlebitis	1
Lax abdominal wall (needing bandage)	8
Hernia	1
Bronchitis	12
Pre-tubercular condition ..	3
Notified phthisis	2
Valvular disease of heart ..	4
Albuminuria	9
Toxæmia of pregnancy	3
Pyelitis	1
Hyperthyroidism	1
Discharging umbilicus	1
Chronic appendicitis	1

Carried forward .. 164

Brought forward	..	164
Impetigo ..	..	1
Rheumatoid arthritis ..	..	1
Chronic muscular rheumatism	..	1
Marked retraction of nipples	..	1
Endocervicitis ..	..	12
Retroversion of uterus ..	..	1
Threatened miscarriage ..	..	4
Ante partum hæmorrhage	..	1
Slight pelvic contraction	..	7
Breech presentation in primipare	..	2
Marked disproportion of foetal head and pelvis ..	..	2
Minor epilepsy ..	..	1
Congenital malformation	..	1
		<hr/>
		199
		<hr/>

The number of new cases in 1927 is practically the same as in 1926. The total number of births in the Borough last year was 1,028. Thus the proportion of expectant mothers attending our Clinics is nearly one-third of the whole number.

It is pleasing to look back on the ten years since our Clinics were first founded, and to realise the great increase in our facilities for providing care for expectant and nursing mothers. Quite early in our career we were able to secure a pint of milk daily for all necessitous cases, and to arrange for dental treatment. Next followed the provision of Convalescent Home treatment for mothers after their confinements. During this last year, we have sent 15 mothers and babies to St. Mary's Convalescent Home, Birchington-on-Sea, the former contributing to the cost more or less, the Borough assisting in most cases. Then followed the provision by the Borough Council of letters for admission to Queen Charlotte's Hospital, and the establishment of the private Maternity Ward at New End Hospital. To this Ward, we sent those patients whose husbands are in regular work, and who can therefore pay rather more for their treatment than the ordinary patients do. The privacy and comfort in this little Ward of 5 beds is greatly appreciated by such a class of people, and all arrangements for their payments, etc., are made by the officials at the Town Hall, and not by the Relieving Officers. The popularity of this Ward has so increased, that 52 mothers entered it last year for their confinements. Then finally, in

this last eighteen months, we have acquired a much needed facility, namely, the power to obtain help from the Borough towards the payments for little children who are sent into the Beauchamp Lodge Hostel in Maida Vale, whilst their mother is in a Maternity Hospital. It has been a great hindrance to our work in the past, to be unable to make any arrangement for a child to be cared for, when, for any special reason, its mother has had to go into a Maternity Hospital, and no relation or friend is available to look after it. Five of such children have been sent to Beauchamp Lodge Hostel during the last year, the Borough assisting in most cases with the weekly payments. I do not think it is too much to say that, in providing all these facilities for mothers and babies, the Hampstead Borough Council has been a pioneer amongst the Local Authorities in Great Britain.

The Infantile mortality rate in the Borough for 1927, was 51 per 1,000 births. The number of infant deaths occurring in the first month of life was 30. These deaths are more or less attributable to ante-natal causes, and our work is concerned with endeavouring to prevent them. It is pleasing to be able to note that of the 305 expectant mothers attending our Clinics last year, only 5 lost their babies in the first month of life. Of these, one mother had twins prematurely and both died. Another had a baby born with hydrocephalus (or "water on the brain"), and it died in the second week of life. A third, who had twins, lost one of them at three weeks of age, owing to convulsions and congestion of the lungs. In a fourth case, the baby died of pemphigus at the age of one week. The fifth case lost her baby two days after its birth owing to prematurity and cardiac failure.

Abnormal cases.

There were four cases in whom valvular disease of the heart was present, and they were seen as often as possible during pregnancy. One is still under observation, and another has passed on to the Ante-Natal Clinic of a Maternity Hospital, after having a short period of rest at the Hampstead General Hospital in one of our Borough beds. Each of the remaining two patients has done well, and has had a healthy baby, both having had short periods of rest in a Maternity Hospital before their confinements.

Eight of the nine cases of albuminuria all did well on a non-flesh diet, rest being enjoined as much as is possible for a working-class mother. Three of these mothers were sent in to New End Hospital before their confinements were due, for rest and treatment. A fourth

mother was sent to the Ante-Natal Ward at the Royal Free Hospital, but she refused to stay there, and finally arranged to rest at home. None of these eight cases developed eclamptic symptoms, and all the babies were born alive and healthy. Unfortunately, the ninth case of albuminuria developed eclampsia with a fatal result, in spite of dieting and Hospital treatment.

The three cases of toxæmia of pregnancy were also put on to a non-meat diet and rest enjoined as much as possible. All three did well, without any eclamptic symptoms and healthy babies were born.

The case of pyelitis cleared up very well with alkali treatment and rest.

The patient who had chronic appendicitis was far too advanced in pregnancy for operation, but she had a short period of rest in New End Hospital before her confinement there.

The two mothers with notified phthisis have been under the joint observation of the Tuberculosis Medical Officer and myself and are doing fairly well up to date. We have been able to persuade only one of them to go into a separate ward at New End Hospital for her confinement.

The case of phlebitis cleared up splendidly with rest in bed and treatment—the Jubilee Nurse visiting her daily to administer it.

There were two breech presentations in primiparæ. In view of the theory that a still-birth is apt to follow labour in such cases, very special ante-natal care was given. One of the mothers was sent to the Consulting Ante-Natal Clinic at the Royal Free Hospital and version was performed there, after an X-ray examination had shown the presence of a breech with extended legs. In the other case version took place naturally, before the confinement was due.

There were two cases in which I found disproportion between the head and pelvis. In one of them quinine induction was resorted to, as it was a midwife's case. Both mother and baby did well. In the second, the disproportion was marked, and with the consent of the midwife, I sent the patient into New End Hospital, where a Caesarian section was finally performed. The baby was hydrocephalic and was still-born, but the mother did well.

There were eight cases of venereal disease in 1927. Two were of the type that gives rise to eye trouble in the babies subsequently born. Both these mothers attended the V.D. Department at the Royal Free Hospital regularly during the ante-natal period, and neither of their babies developed Ophthalmia Neonatorum. Six had specific disease and were sent for treatment also to the V.D. Department at the Royal Free

Hospital. Four attended regularly, but in two cases where treatment had been given during previous pregnancies, we had the greatest difficulty in inducing them to attend regularly. We have reports to hand on four of the babies who were born subsequently and all have appeared healthy up to date. In this connection, I should add that nineteen blood tests were performed in 1927, the Wassermann reaction being tested for us by the Pathologist at the Royal Free Hospital, under the L.C.C. Scheme. Four of these tests were carried out on mothers who had had still-births some weeks previously, so as to try and determine the cause in each particular case. In all of these four, the Wassermann reaction was negative.

Of the twelve cases of endocervicitis, swabs were taken from the cervix or upper part of the vagina in ten, and were sent to the Pathologist at the Royal Free Hospital, under the L.C.C. Scheme, for microscopic examination. No gonococci were found, but pus was present in nearly all cases. The same result ensued when swabs were taken in a similar manner, for the investigation of three cases of ophthalmia neonatorum, where the mother had not attended the Ante-Natal Clinic before the birth of the baby. In view of the fact that not only is endocervicitis in the mother, the cause of ophthalmia neonatorum in the baby, but is also probably a precursor of puerperal pyrexia in some cases, it is most important to ensure adequate treatment for such a condition. Of the twelve cases above, eight were sent to the Royal Free Hospital for treatment, six attending regularly. A ninth case was treated at home with douches and pessaries, by the District Nurse under our direction. In only one of these treated cases (so far as we have been able to get reports up to date) has the baby born subsequently developed any discharge from the eyes, and that was so slight as not to be notified by the particular Maternity Hospital in question. The tenth case attended only once and was then transferred to the Ante-Natal Clinic of a Maternity Hospital where she was going to be confined. The baby subsequently developed ophthalmia neonatorum and was notified as such. The last two remaining cases have been lost sight of, and we have not been able to keep in touch with them. In this connection I should say that there were only seven notified cases of ophthalmia neonatorum in the Borough during 1927. In three of these, the mothers had attended the Ante-Natal Clinic beforehand. One was the case referred to above. In the other two, there had been no indication during pregnancy of any endocervicitis.

MARY KIDD,

M.B. (LOND.).

2nd March, 1928.

APPENDIX III.

REPORT

For the year 1927

OF THE

Public Analyst.

H. E. COX,
M.Sc., Ph.D. (Lond.), F.I.C.,

11, Billiter Square, E.C. 3.
10th January, 1928.

HEHNER & COX.

THE LABORATORY,

11, BILLITER SQUARE,

LONDON, E.C. 3.

10th January, 1928.

TO THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE METROPOLITAN BOROUGH OF HAMPSTEAD.

Mr. Mayor, Ladies and Gentlemen,

I beg to give a short account of the work carried out by your Public Analyst during the year 1927. During this period 580 samples from your Inspector have been examined; the principal articles from a numerical point of view were:—

Milk	..	..	202
Cream	..	..	36
Condensed Milk	..	..	14
Butter	.	..	68
Margarine	..	..	43
Cheese	..	..	26
Condiments	..	..	23
Beverages	..	..	23
Vinegar	..	..	14
Coffee and Cocoa	..	..	30

Of these 580 samples, the following 18 were adulterated or not up to the standards prescribed by law, showing the rate of adulteration of 3·1 per cent. :—

Milk	..	..	3
Butter	..	..	3
Margarine	..	..	3
Bread and Butter	..	..	4
Condensed Milk	..	..	2
Orange Wine	..	..	1
Ginger Wine	..	..	1
Rum	..	..	1
			—
			18
			—

The infringements noted in these cases were :—

- 1 Milk—added water 8·3 per cent.
- 2 Milks—deficient in fat to the extent of 15 and 39 per cent.
- 3 Butters—slight excess of water.

- 2 Margarines—excess of water.
- 1 Margarine—contained boric acid contrary to the Regulations.
- 4 Samples Bread and Butter—consisted of bread and margarine.
- 2 Condensed Milks—deficient in fat.
- 2 Non-alcoholic Wines—contained salicylic acid.
- 1 Rum—contained added water, 1·9 per cent.

These results altogether indicate that the food supplied in the Borough is of good quality, not only in the way of the absence of any extensive adulteration, but the results of the examination of genuine samples have shown in the main a high standard. The adulterated samples are in most instances infringements of various Regulations rather than deliberate fraud.

In addition to the foregoing official samples, two milks were received from rate payers within the Borough, one of which was genuine and one deficient in fat to the extent of 75 per cent.

There is a good deal of evidence still of mis-description, and certain substances such as cream, cream-cheese, vinegar and so-called egg substitutes are often not of satisfactory composition, but as there is no recognised standard or limit, it is not possible to take any definite action. Perhaps in due time the Ministry of Health will give a lead in these matters.

We have had 12 months' experience of the Preservative Regulations, although the most important substances—butter and cream—were not included under the Regulations in force last year, and it is gratifying to note that supplies and prices have not been adversely affected and the number of infringements of these Regulations has been quite small. It seems certain that when all the necessary manufacturing adjustments have been made, the effect of the prohibitions of preservatives can only have a result which is entirely beneficial.

I have the honour to remain,

Your obedient servant,

(Signed) H. E. COX,

Public Analyst.

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