

[Report of the Medical Officer of Health for Croydon].

Contributors

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County Borough of Croydon.

ANNUAL REPORT

ON THE

HEALTH

AND

SANITARY CIRCUMSTANCES

OF

CROYDON,

TOGETHER WITH

THE REPORTS OF THE BOROUGH HOSPITAL AND OF
THE BOROUGH LABORATORY,

AND

THE REPORT TO THE EDUCATION COMMITTEE,

FOR THE YEAR 1909.

BY

H. MEREDITH RICHARDS, M.D., B.S. (Lond),

Member of the Royal College of Surgeons, and Licentiate of the Royal College of Physicians; Fellow of University College, London, and of the Royal Sanitary Institute; Medical Officer of Health; Medical Superintendent of the Borough Hospital, and of the Croydon and Wimbledon Joint Smallpox Hospital; School Medical Officer.

Croydon :

PRINTED BY S. H. PURNELL, 103, HIGH STREET.

1910.

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Gentlemen,

I beg to present my Tenth Annual Report on the Health and Sanitary circumstances of the Borough, together with reports of the Borough Hospital and Borough Laboratory.

The report presented to the Education Committee is also presented herewith, so that the Council may have particulars of the whole of the work undertaken by the Public Health Department.

I am, Gentlemen,

Your obedient Servant,

H. MEREDITH RICHARDS, M.D.

May 28th, 1910.

COUNTY BOROUGH OF CROYDON.

Sanitary Committee 1908-9).

THE MAYOR—Alderman Major J. E. Fox, J.P.

Mr. Alderman ALLEN, J.P.

„ Sir F. T. EDRIDGE, J.P.

„ KING, J.P.

„ LILICO, J.P.

„ PRICE.

Mr. Councillor DENNING, J.P.

„ HOLT (Vice-Chairman).

„ HUSSEY.

„ MOSS (Chairman).

Mr. Council STEWART.

Mr. Councillor PAGE.

„ PECK.

„ SHIRLEY.

„ SOUTHWELL.

Staff of the Public Health Department:

Chief Sanitary Inspector and Inspector under Food & Drug Acts.

P. SAUNDERS (Cert. R. San. Institute).

THOS. H. CULVER (Cert. R. San. Institute), Deputy Chief and District Inspector.

J. C. EARWICKER „ „ District Inspector.

A. D. PECK „ „ „ „

F. RICHARDSON „ „ „ „

WILLIAM S. ADAMS „ „ „ „

W. H. STOKES (Cert. R. San. Institute) „ „

CHAS. J. VINCENT „ „ „ „

FREDK. F. FULKER „ „ Inspector for Infectious Diseases.

A. Low, C.S.A., Inspector of Meat, Dairies, Cowsheds and Milkshops.

Jos. H. BULL, C.R.S.I., Inspector under the Factory and Workshop Act and Shop Hours Act.

A. STANLEY, Disinfector.

A. W. PINK

S. T. BROWN

F. H. LENNARD

A. C. LARCOMBE

} Clerks.

Miss TAWNEY

Miss CHAPMAN

Miss RAW

Miss STOKES

Miss STEVENS

} Health Visitors.

Matron of Borough Isolation Hospital.

MISS BOND.

Senior Resident Medical Officer and Bacteriologist.

E. D. PARSONS, M.R.C.S., D.P.H. (Lond).

Assistant Medical Officer, Borough Hospital.

R. W. REES, M.R.C.S., L.R.C.P.

Assistant to Medical Officer of Health.

SOPHIE JACKSON, M.D., B.S. (Durh.)

Medical Officer of Health and School Medical Officer.

H. MEREDITH RICHARDS, M.D. (Lond.).

SUMMARY OF ANNUAL HEALTH REPORT FOR 1909.

COUNTY BOROUGH OF CROYDON.

Area—9,012 acres.

Soil and Situation—Croydon is situated in the county of Surrey, 10 miles south of London Bridge. The greater part of the borough is in the watershed of the Wandle, the remainder draining towards the Effra and Ravensbourne. The subsoil in the north of the Borough is London clay, while the upper chalk comes to the surface in the south, the clay and chalk being separated by a strip of lower London tertiaries comprised of beds of clay, sand and pebbles. Both the London clay and chalk are in parts overlaid by irregularly disposed beds of gravel.

Altitude—The height above ordnance datum varies from 375 feet at All Saints' church, Upper Norwood, to 110 feet at Mitcham Road; Average about 250 feet above ordnance datum.

Population—Census of 1901—133,895.

Estimated Population, June, 1909—161,078.

Estimated Inhabited Houses, June, 1909—32,508.

Rateable Value, £1,125,586.

General District Rate, 3s. 6d. in the £.

Poor Rate, including Education Rate, 3s. 6d. in the £.

VITAL STATISTICS, 1909.

Birth Rate, per 1,000 living, 24'4.

Death Rate, per 1,000 living, 11'7.

Infantile Mortality, per 1,000 births, 79.

Isolation Hospitals—For fever at Waddon Marsh Lane. For smallpox at North Cheam.

Water Supply—From the Thames, and from deep wells in the chalk.

County Borough of Croydon.

REPORT

OF THE

MEDICAL OFFICER OF HEALTH.

For the Year 1909.

A.—VITAL STATISTICS.

THE POPULATION at the Census of 1891 was 102,625, and had increased at the Census of 1901 to 133,895.

The population at the middle of 1909 according to the estimate of the Registrar-General, was 161,078.

The number of inhabited houses cannot be ascertained with accuracy. At the last Census, in April, 1901, it was 25,726, while 1,354 houses were empty at that date. From this date until June 30th, 1909, 9040 houses have been passed by the Borough Engineer as fit for occupation. The total number of inhabitable houses has, therefore, been increased to that extent. It is, however, a matter of common knowledge that the number of vacant houses in Croydon was larger than at the time of the census, being about 10 per cent., as compared with about 5 per cent. in 1901, and 9 per cent. in 1908. Taking this into consideration it is probable that the number of inhabited houses in June, 1909, was about 32,508. If the population per house remains the same as in 1901, this will give a total population of 169,041, which is considerably in excess of the Registrar General's estimate. The Registrar General's figure has, however, been used as the basis of the rates calculated for this report.

THE AREA of the Borough is 9,012 acres, and the density of the population 17·9 per acre.

The approximate acreage of the Wards is as follows:—

Areas in Acres	Wards.
1660	{ Upper Norwood (sub-division).
	{ Thornton Heath do.
980	South Norwood.
998	West.
1181	North.
404	Central.
2209	East.
1580	South.
9012	

THE BIRTHS during the year numbered 3,938. Of those born 2,035 were boys and 1,903 were girls. The birth rate equalled 24·4 per 1,000 as compared with 25·6 for England and Wales.

Of the total births, 198, or 4·5 per cent., were illegitimate.

The births were distributed as follows:—

	Total.	Birth rate per 1,000 estimated population.	
Central Ward	266	...	15·3
Upper Norwood Sub-Division ...	*151	...	18·0
South Ward	371	...	18·0
East „	396	...	20·6
BOROUGH	3938	...	24·4
Thornton Heath Sub-Division ...	455	...	25·0
South Norwood Ward	654	...	27·0
North Ward	653	...	28·8
West „	907	...	29·7
The Workhouse	85		

*Including 23 births at 89, Central Hill (Servants' Reformatory).

The birth-rate for 1909 was the lowest on record, and the number of births registered was actually less than in 1908 in spite of the increase in the population.

DEATHS.—During the year, 1974 deaths were registered in the Borough, or 12·3 per 1000. One hundred and seven of the deaths registered in the Borough were those of strangers dying at the Workhouse or Infirmary, 28 of strangers dying at the Croydon General Hospital, 2 at the Cottage Hospital, Purley, 19 at the Cottage Hospital, Upper Norwood, 1 at "Victoria House," 89, Central Hill (Servants' Reformatory), while 8 deaths at the Borough Hospital occurred among patients admitted from Penge, Kingston, and Kennington. Five of the deaths of strangers at the Borough Hospital were due to scarlet fever, two to diphtheria, and one to marasmus.

If we deduct these 165 deaths and add 29 deaths at the Mental Hospital, Warlingham, and 41 deaths of Croydon residents known to have occurred outside the district during the same period, we get a nett total of 1879 deaths, which is equal to 11·7 per 1,000, as compared with 14·5 for England and Wales, 15·6 for the 76 great towns, 14·5 for the 143 smaller towns, 13·6 for England and Wales less the 219 towns.

Corrections for deaths of strangers occurring within the Borough and of deaths of Croydon people dying outside the Borough are more complete than was formerly possible. This is due to returns being now available for the deaths of Croydon lunatics occurring at the Mental Hospital, Warlingham, and of Croydon people dying in London institutions. The latter return has been furnished by the courtesy of the Superintendent of Statistics, Somerset House, and has been available since 1903. Since these deaths have been added to those registered in the Borough, all deaths of strangers occurring at the General Hospital, Cottage Hospital, Purley, and Cottage Hospital, Upper Norwood, have been deducted. Formerly, these were included in the total number of deaths on the supposition that they were balanced by Croydon deaths in London institutions.

The nett death-rates for the four quarters of the year were:—

			1909.			Average for 1899-1908.
1st Quarter	...	...	17·4	...	...	15·8
2nd Quarter	...	...	11·0	...	...	11·9
3rd Quarter	...	...	8·6	...	...	12·3
4th Quarter	...	...	9·4	...	...	13·2
			— — —			— — —
Year	...	...	11·7	...	...	13·3

WARD DEATH-RATES.—Table II. gives the number of deaths assignable to each district in the Borough. Institution deaths have been, as far as possible, debited to the Wards in which the deceased lived prior to admission to hospital.

The Ward deaths for the year were as follows:—

				Deaths.	Death-rate per 1000.
South Ward	...	...	...	198	9·6
East Ward	...	...	...	189	9·9
Thornton Heath Sub-Division				184	10·1
Upper Norwood Sub-Division				87	10·4
South Norwood Ward	...			267	11·0
North Ward	...	...	...	259	11·4
BOROUGH	...	...	...	1879	11·6
Central	...	...	...	210	12·1
West Ward	...	...	...	462	15·1

The Registrar General has not yet published his Annual Summary for 1909. I am therefore unable to say what exact position will be assigned to Croydon on comparing the death-rate with those of the other 76 towns, but from an examination of the four quarterly reports, it would seem that Croydon maintains its position at the head of what were the 33 great towns. The death-rate, however, was considerably lower in many of the other 76 towns. For instance Hornsey had a recorded death-rate of 8·3; Walthamstow, 9·6; East Ham, 9·9; King's Norton, 9·9; Leyton, 10·3; and Willesden, 10·4.

INFANTILE MORTALITY is measured by the proportion of deaths under one year to 1,000 births, and amounted to 79 as compared with 99 in 1908, 94 in 1907, 125 in 1906, 96 in 1905, and 128 in 1904. During the year 1909 the rate for England and Wales was 109, while in the 76 large towns it ranged from 61 in Hornsey, 72 in King's Norton, 82 in Leyton to 150 in Nottingham, 156 in Burnley to 159 in Swansea.

The figures for the various Wards were:—

	Births.	Deaths under 1 year.	Death-rate per 1000 Births (all causes)	Death-rate per 1000 births from "diarrhoeal" diseases.
†Upper Norwood Sub-division	151	8	53	6
South Norwood Ward	654	39	59	5
South Ward	371	27	73	3
North Ward	653	50	77	4
BOROUGH	3938	313	79	7
East Ward	396	33	83	5
Thornton Heath Sub-division	455	40	88	7
Central Ward... ..	266	24	90	11
West Ward	907	92	101	13

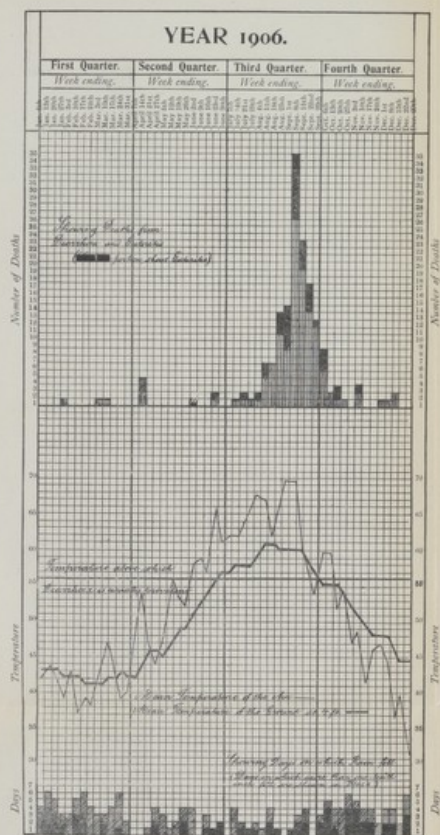
†Including 23 births at "89, Central Hill" (Servants Reformatory).

The following table shows the fluctuations since 1892 in the infantile mortality from "all causes," from "diarrhoeal diseases*," and from "causes other than diarrhoeal."

Years.	Total Infantile Mortality from all causes.	Infantile Mortality from "diarrhoeal" diseases.	Infantile Mortality from other than "diarrhoeal" diseases.
1893—1897 ...	142	25	117
1898—1902 ...	143	38	105
1903 ...	104	9	95
1904 ...	128	29	99
1905 ...	96	14	82
1906 ...	125	42	83
1907 ...	94	10	84
1908 ...	99	12	87
1909 ...	79	7	72

*Under "diarrhoeal" diseases are included deaths from "diarrhoea," from epidemic and zymotic enteritis, and from enteritis, that is, from the causes classified in schedules 10, 11, and 107 of Table IV.

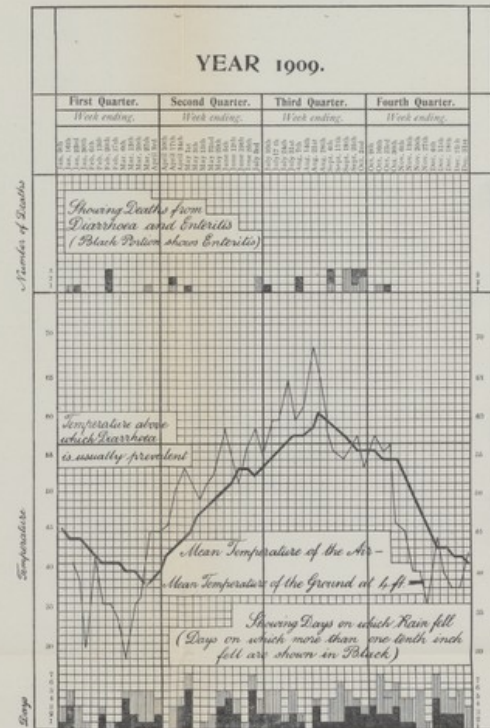
YEAR 1906.



YEAR 1908.



YEAR 1909.



It is satisfactory to record that the infantile mortality rate is not only considerably lower than in 1908 but is the lowest ever noted in Croydon. It is also satisfactory to find that there was a similar drop in the rate for England and Wales. Part of this improvement is doubtless due to the climatic conditions which were exceedingly favourable for infant life. There can also be little doubt that more care and more intelligence are now employed in the nurture of infants and that this is having its effect on the mortality rate.

DIARRHŒA AND EPIDEMIC ENTERITIS.

During 1909 diarrhœa and epidemic enteritis accounted for 19 deaths, of which 13 occurred in children under one year of age. There were also 26 deaths from other forms of enteritis, of which 15 were under one year of age. Thus 28 out of the 45 deaths from what are usually classified as "diarrhœal" deaths occurred in infants under one year of age.* It will be seen from Table VI. that "diarrhœal" deaths were considerably less numerous than in 1908, and this was one factor that led to the diminished infantile mortality rate.

The accompanying chart shews the seasonal distribution of the 28 diarrhœal deaths under one year of age. Though the majority of the deaths occurred in the third quarter, this seasonal distribution is by no means marked, and offers a striking comparison to the chart for 1906, which was the last year in which there was a considerable prevalence of fatal diarrhœa. There can be no doubt that the great difference between 1906 and 1909 must be ascribed to climatic conditions, and especially to the cold wet weather experienced in June and July. On the other hand it is clear that seasonal changes are not directly responsible for diarrhœa mortality, otherwise the short spell of hot weather experienced in the first half of August would have been followed by fatal diarrhœa. As far as they go the facts observed in 1909 lend some support to the suggestion that fatal diarrhœa is, to a considerable extent, diffused by the domestic fly, which in the year under review suffered severely from the absence of sufficient warmth to allow rapid increase in numbers. Whatever may be the exact route by which diarrhœa infection finds its way into the alimentary canals of infants, there is ample evidence that diarrhœa mortality falls especially heavily on those who are brought up by hand. This is clearly shewn in the following tables which have been prepared from information obtained by the health visitors on their visits to houses where children have been born.

* Deaths from Gastritis are sometimes classified as "diarrhœal." If this were done, a further addition of 6 deaths under one year must be made to the total "diarrhœal" deaths. It has not however been the practice to include these in former years, and for the sake of comparison the figures have been prepared as in past years.

The following are the particulars as to feeding of infants dying during the first six months of life :—

METHOD OF FEEDING.

Method of Feeding during the first six months of life of children who survived, and of children who **died between one week and six months old**. Deaths of infants under one week have been excluded because it is unlikely that methods of feeding can have been responsible for a fatal issue in so short a time.

TABLE A.

	Infants dying from Diarrhoeal Diseases. — 0-6 months.	Infants dying from other than Diarrhoeal Diseases. — 0-6 months.	Infants surviving 6 months.	Total investigated.
Breast alone	3	50	1129	1182
Breast supplemented by Cow's milk or other foods	4	7	457	468
Condensed Milk ...	7	9	92	108
Other prepared foods ...	2	2	46	50
Cow's Milk	5	21	145	171
Number investigated ...	21	89	1869	1979

Method of Feeding expressed in percentage.

TABLE B.

	All infants investigated under 6 months.	Infants dying from Diarrhoeal Diseases.	Infants dying from other than Diarrhoeal Diseases.
Breast alone	60	14	56
Breast supplemented by Cow's milk or other foods	23	19	8
Condensed Milk	5	33	10
Other prepared foods	3	10	2
Cow's Milk	9	24	24

The relation between diarrhoea and hand feeding is clearly shewn by Table B. Whereas 60 per cent. of all the infants investigated who survived were entirely breast fed until six months old, only 14 per cent. of those dying from diarrhoea were naturally fed. The reasons for the preponderance of diarrhoeal diseases in hand fed infants has already been discussed in several previous reports.

DEATH CERTIFICATION.

All deaths in the Borough were certified by the Medical Attendant or by the Coroner.

INQUESTS

were held in 163 instances, or 8·6 per cent. of the total deaths.

THE ASSIGNED CAUSES OF DEATH

are fully set out in Tables IV., V. and VI., but certain of them require special comment.

SMALLPOX.

Smallpox has been absent from the Borough since April, 1906.

CROYDON AND WIMBLEDON JOINT SMALLPOX HOSPITAL.

The Smallpox Hospital District comprises the County Borough of Croydon, the Borough of Wimbledon, the Urban Districts of Penge and of Merton, and the Croydon Rural District. The Hospital has not been used for smallpox since August, 1906. During the year 1909 an infant was admitted which had been notified as suffering from smallpox. The disease was subsequently found to be chickenpox, and the child was sent home in a day or so.

VACCINATION.

During the year ending December 31st, 1909, the number of primary vaccinations in Croydon and Penge amounted to 2,694, as compared with 4,315 registered births.

The number of infants vaccinated, therefore, amounted to 62 per cent. of the registered births as compared with 62 per cent. in 1908, 90 per cent. in 1907, and 82 per cent. in 1906.

The increase in the proportion of unvaccinated infants is doubtless due to the increased facilities offered to conscientious objectors by the last amendment of the Vaccination Acts.

MEASLES.

Measles accounted for 21 deaths. As was to have been expected, this number is considerably less than that recorded in 1908, when this disease was extremely prevalent. Though measles is not notifiable in the borough, the relative number of children attacked can be judged from the notifications received from the elementary schools.

The following are the figures for 1909 and the preceding five years:—

Year.	Cases reported to Elementary Schools.					Deaths.
1904	...	...	1,335	...	...	62
1905	...	...	1,267	...	...	24
1906	...	...	595	...	...	37
1907	...	...	363	...	...	8
1908	...	...	2,335	...	...	92
1909	...	...	364	...	...	21

The number of deaths was unusually large in proportion to the cases coming under notice, but this is in part accounted for by the fact that the disease was prevalent in the last quarter of 1908 and the first quarter of 1909. It is probable, therefore, that during the intervention of the Christmas holidays many children were suffering from the disease who were not reported to the Health Department.

The prevalence of measles was mainly confined to the first quarter, when 15 deaths were notified, as compared with three deaths in the second quarter, three in the third quarter, and no deaths in the fourth quarter of the year.

Nineteen out of the twenty-one deaths occurred in small houses. This is approximately the same proportion as was recorded in 1908.

SCARLET FEVER.

(See Tables III., IV. and VI.)

Seven hundred and twenty-seven cases were notified, of which 9 ended fatally. The disease was more prevalent than in any of the preceding ten years. The increase in numbers is noticed in each of the wards, but the incidence in the South Norwood district was again exceptionally high. This is the third year in succession in which this ward has been singularly unfortunate.

On Monday, June 21st, 1909, my attention was attracted by a considerable and sudden increase in the number of notified cases reported during the week end. Concerning this particular group of patients, no community of school or workplace gave any clue to the origin of the disease, and it at once became evident that some article of food was in all probability responsible for the simultaneous attack of some of the patients. Enquiry as to the milk supply was immediately made of the adult patients admitted into hospital during the last two days, when it was found that several had obtained their milk from a dairyman who bought the supply from a wholesale company. Finally, we were able to ascertain that 28 cases occurred among customers indirectly supplied by the same wholesale firm. As the wholesale dairy obtained its supply from various farms situated in many parts of Hampshire, Wiltshire and Somersetshire, we should have had considerable difficulty in investigating the possible source of infection, but on communication with neighbouring districts it was found that there was a considerable epidemic of scarlet fever in Kingston and in London among the customers of retailers who derived their milk from the dairy company in question. All the information available pointed to infection being conveyed by milk from a particular farm in Hampshire from which Croydon was supplied on the 14th and 15th June. Fortunately, the infected milk only reached Croydon in any considerable quantity on those two days, but had a little previously given rise to trouble in London and Surrey. The London County Council had therefore become cognisant of the danger a day or two before the Croydon outbreak, and had taken steps to stop the supply of milk from the incriminated source, and, thanks to the information supplied by Sir Shirley Murphy and Dr. Hamer, I was able to assure myself by noon on June 21st that further danger from this source was at an end.

The whole circumstances were fully investigated by Dr. Hamer on behalf of the London County Council, who was assisted by a veterinary surgeon and a bacteriologist. They were able to show not only that the infected milk was derived from a particular farm, but that there had been a contagious disease of the dairy herd that corresponded in

time to the period when the milk was infectious. The source of infection of the cows could not be ascertained. Many of the patients who were infected were admitted to the Borough Hospital, and one therefore had an opportunity of studying the nature of the malady. Briefly, it may be stated that the symptoms were indistinguishable from those of ordinary attacks of scarlet fever. It was, however, noted that there was not that disposition to spread from person to person in the infected houses that one usually observes with scarlet fever of human origin. Thus, of the 28 cases in Croydon eight occurred in four houses. Of these eight it would seem probable that the infection was due to a common origin, having regard to the dates of onset—(house A, onset June 17th and 18th; house B, onset June 17th and 17th; house C, onset June 16th and 17th; house D, onset June 17th and 18th). Apart from these duplicate cases there were no multiple attacks, and this is all the more striking because there was a considerable number of young persons living in the invaded houses who had not previously suffered from the disease. The exact figures were as follows :—

Number of invaded houses	...	...	...	...	24
Number of scarlet fever patients	...	...	...	...	28
Total inhabitants of infected houses (exclusive of the 28 patients)	...	...	...	...	100

Of the total inhabitants (exclusive of the 28 patients), 17 are stated to have previously had scarlet fever, 73 are stated not to have had scarlet fever, and concerning the remaining 10 information could not be obtained. The ages of the persons living in infected houses who did not develop scarlet fever were as follows :—

0—5.	5—10.	10—15.	15—20.	20 & upwards.
11	...	10	...	8
		8	...	6
		(One of whom is said to have been previously attacked).		(16 of whom are stated to have been previously attacked).

The incidence of scarlet fever varies with the social status of the district, and it is doubtless due in part to the considerable increase of the proportion of smaller tenements that we must ascribe the increased incidence of the disease during the last few years. In order to test this theory, I have investigated the proportion of fatal and non-fatal attacks occurring in various sized houses in the borough during the last four years.

The following are the figures:—

PARTICULARS AS TO SCARLET FEVER NOTIFICATIONS
AND DEATHS.

Year.	Total notifications in small and large tenements (small tenements = 5 rooms and under).		Total tenements infected.		Total deaths.	Remarks.
1909	727	Small tenements 516 Large tenements 187 *Public Institutions 24	408 { with 1 case 326 " 2 " 63 " 3 " 13 " 4 " 5 " 5 " 1 } 141 { with 1 case 111 " 2 " 20 " 3 " 7 " 4 " 1 " 5 " 1 " 6 " 1 }	9 9	9 9	These figures are compiled from notifications, and have not been corrected for errors in diagnosis.
1908	534	Small tenements 403 Large tenements 119 *Public Institutions 12	300 { with 1 case 234 " 2 " 43 " 3 " 14 " 4 " 7 " 5 " — " 6 " 1 " 7 " +1 } 86 { with 1 case 71 " 2 " 7 " 3 " 3 " 4 " +2 " 5 " 1 " 6 " +2 }	5 5	5 5	
1907	661	Small tenements 576 Large tenements 76 *Public Institutions 9	437 { with 1 case 344 " 2 " 61 " 3 " 22 " 4 " +7 " 5 " +2 " 6 " +1 } 61 { with 1 case 50 " 2 " 8 " 3 " 2 " 4 " 1 " 5 " — " 6 " — }	8 3	11 3	
1906	425	Small tenements 321 Large tenements 100 †Public Institutions 4	250 { with 1 case 193 " 2 " 47 " 3 " 6 " 4 " 4 } 74 { with 1 case 58 " 2 " 8 " 3 " 6 " 4 " 2 }	8 8	8 8	

* Institution notifications are those infected in Public Institutions or, imported case to Public Institutions where the home conditions could not be ascertained.

SUMMARY OF THE PARTICULARS AS TO SCARLET FEVER
NOTIFICATIONS AND DEATHS.

	Total notifications in small and large tenements (small tenements = 5 rooms and under.)	Total tenements infected.	Total deaths.	Remarks.
4 Years. 1906 to 1909	Small tenements 1816 <			

† Institution notifications are those infected in Public Institutions, or imported cases to Public Institutions where the home condition could not be ascertained.

It will be noticed that in three out of the four years there was not a single death from scarlet fever in any of the larger houses, while the total figures for the four years show a case fatality of only 0·6 among the children living in larger houses, as compared with a case fatality of 1·7 among those living in smaller tenements. This is in part to be explained by the more favourable conditions under which children live in the larger tenements, and to the fact that those living in smaller houses are more frequently exposed to infection, and are, therefore, liable to attack at an earlier age, when this disease is more likely to prove fatal.

Again, while 1,816 cases were notified in small tenements, only 482 were notified in large tenements. As it is estimated that the number of children living in large tenements is in the proportion of one for every $2\frac{1}{2}$ living in small tenements, it is obvious that the risk of a child living in a small tenement of contracting scarlet fever is half as large again as it is in the case of the more affluent.

RETURN CASES OF SCARLET FEVER.

In 1909 the number of patients discharged from isolation who subsequently proved infectious was exceptionally large. In no less than 39 instances secondary cases, to the number of 52 in all, arose in homes to which patients had been discharged from hospital. During 1908 some anxiety was felt as to whether the excessive number of return cases might not be due in part to the pressure under which the hospital was working. This pressure was continued in 1909, and I was therefore glad of an opportunity of testing this suggestion. During the last year the hospital became so full that on two occasions it was necessary to transfer patients to other institutions. Six patients were therefore sent to the Mary Wardell Convalescent Home, Stanmore, and 26 patients were admitted to the London Fever Hospital, while during the same period 533 patients were admitted to our own hospital. Of the patients suspected to be chronically infectious one was discharged from the Mary Wardell Convalescent Home, two from the London Fever Hospital, and 36 from the Borough Hospital. The proportion of chronically infectious patients leaving the Borough Hospital was therefore not larger than that found in Croydon patients discharged from other institutions.

The particulars of each of the 39 suspected patients are given in the following table:—

DISCHARGED PATIENT.						Notes as to any abnormality on Discharge.	Onset and number of return case.	Interval between discharge of patient and onset of return case.
No. in Register	Age.	Sex.	Date of Discharge.	Days in Hospital.	Length of illness.			
795	6	M	2/1/09	46	50	Cervical glands enlarged.	11/1/09 (29)	9 days
739	14	F	21/1/09	87	89	Post nasal catarrh. Tonsils enlarged. Soft palate red. Occasional nasal discharge. Glands palpable.	11/1/09 (30) 26/1/09 (78)	9 " 5 "
713	5½	M	21/1/09	95	98	Tonsils enlarged. Post-nasal catarrh.	5/2/09 (107)	15 "
874	6	M	2/2/09	52	53	Glands palpable.	5/2/09 (111)	3 "
860	7	F	21/1/09	43	45	Glands palpable. Feet rough.	22/2/09 (163)	32 "
880	9	M	6/2/09	53	56	Tonsils much enlarged. Glands palpable.	2/3/09 (179)	24 "
84	9½	M	11/3/09	41	43	Tonsils enlarged. Glands palpable.	17/3/09 (204) 18/3/09 (207)	6 " 7 "
50	4½	F	4/3/09	47	48	Tonsils enlarged.	26/3/09 (227)	22 "
933	4	F	11/3/09	71	72	Tonsils enlarged. Glands enlarged.	30/3/09 (238)	19 "
85	21	M	18/3/09	48	51	Post-nasal catarrh. Compound fracture of leg, wound discharging when patient left hospital.	28/3/09 (239) 15/4/09 (269)	10 " 28 "
123	10	M	20/3/09	38	41	Nil. (This patient was discharged and returned as a Diphtheria case, and admitted to Diphtheria-Scarlet Fever Ward on February 10th).	28/3/09 (244)	8 "
871	5	M	23/3/09	101	105	Nose slightly sore. Intermittent otorrhœa.	31/3/09 (246)	8 "
58	12	F	9/3/09	48	49	Fauces granular. Tonsils enlarged.	2/4/09 (247)	24 "
138	5	M	23/3/09	99	100	Glands palpable.	8/4/09 (262)	16 "
137	8 11-12ths	F	1/4/09	46	49	Tonsils enlarged. Glands + on one side.	16/4/09 (271)	15 "
170	4½	M	22/5/09	84	86	Glands palpable.	14/6/09 (414) 16/6/09 (415)	23 " 25 "
318	5	F	19/6/09	43	45	Tonsils much enlarged (removal recommended, but leave for operation refused).	29/6/09 (468)	10 "
287	9	F	10/6/09	43	45	Nil.	24/6/09 (—)	14 "
223	7 7-12ths	M	17/7/09	115	137	Cervical glands enlarged.	27/7/09 (534) 28/7/09 (546) 28/7/09 (547)	10 " 11 " 11 "
404	9	F	24/7/09	42	44	Glands palpable.	5/8/09 (564)	12 "
*513	4	M	1/9/09	48	49	Nil. (This patient was discharged from the Mary Wardell Convalescent Home, Stanmore)	14/9/09 (640)	13 "
563	6	M	18/9/09	41	43	Nil	1/10/09 (670A) 2/10/09 (671A)	13 " 14 "
572	9	M	28/9/09	44	46	Fauces granular.	11/10/09 (717)	13 "
386	8	F	31/8/09	86	89	Glands palpable.	22/9/09 (—)	22 "
539	11½	F	28/9/09	65	67	Glands palpable. Trace of albumen in urine	24/10/09 (752)	26 "
484	7	M	12/10/09	100	101	Slight nasal discharge. Tonsils enlarged.	28/10/09 (755)	16 "
562	11	F	12/10/09	65	66	Feet rough.	28/10/09 (758) 3/11/09 (778)	16 " 22 "
616	8	M	4/11/09	58	59	Tonsils enlarged.	15/11/09 (809)	11 "
656	7	M	2/11/09	42	44	Tonsils enlarged.	20/11/09 (815)	18 "
470	12	F	28/9/09	89	91	Tonsils enlarged.	14/11/09 (820) 22/11/09 (821)	47 " 55 "
687	5	F	16/11/09	46	49	Glands palpable.	23/11/09 (824)	7 "
669	13	M	16/11/09	52	55	Tonsils enlarged. Heels desquamating.	26/11/09 (834) 15/12/09 (883)	10 " 29 "
621	6¾	F	11/11/09	64	66	Nil.	30/11/09 (852)	19 "
600	7	M	27/11/09	92	92	Nil.	5/12/09 (847) 11/12/09 (872) 11/12/09 (873)	8 " 14 " 14 "
673A	6½	F	13/11/09	42	43	Tonsils enlarged.	16/12/09 (887)	33 "
†732	17	M	2/12/09	44	46	Nil. (This patient was discharged from London Fever Hospital).	16/12/09 (890)	14 "
667	10	M	25/11/09	55	57	Nil.	17/12/09 (894)	22 "
670	5	M	7/12/09	73	78	Tonsils enlarged. Glands palpable.	23/12/09 (909)	16 "
†762	6	M	18/12/09	48	52	Nil. (This patient was discharged from London Fever Hospital).	7/2/10 (79) 7/2/10 (80)	51 " 51 "

* This patient was discharged from the Mary Wardell Convalescent Home, Stanmore.

† This patient was discharged from the London Fever Hospital.

The remaining patients were discharged from the Borough Fever Hospital.

— Return case isolated at home.

It will be observed that the interval between the discharge of the patient and the onset of the return case varied from three days to 51 days and in 21 instances was more than 14 days.

Similar instances of chronic infectivity are also met with in families where children are nursed at home. The following are the particulars of an outbreak in a family of seven children. One child failed on November 23rd and another on November 28th. These children were about to be released from quarantine when two other children were attacked on January 4th. All four patients had recovered and the house was disinfected on February 10th. The family thereupon removed to another house, when in the course of a day or two, namely, February 15th, a fifth child failed with scarlet fever, and was in this case removed to the Borough Hospital. It is noteworthy that four out of the five children attacked in this family were suffering from enlarged tonsils or adenoids.

EPIDEMIC INFLUENZA

was the assigned cause of death in 59 instances, as compared with 52 in 1908.

WHOOPING COUGH

accounted for 30 deaths, all of which occurred in children under five years of age. The number of deaths is slightly larger than in 1908, when 29 were registered. The number of cases is unknown, but was in all probability larger than in the previous year, as 654 school notices were issued in reference to this disease as compared with 458 in 1908.

DIPHTHERIA AND MEMBRANOUS CROUP.

The number of cases notified amounted to 356, as compared with 405 in 1908, while 24 cases terminated fatally, as compared with 37 deaths in 1908.

The quarterly incidence of cases and deaths in 1909 and previous years is shown in the following table:—

		DIPHTHERIA.																	
		Year.																	
		1904.			1905.			1906.			1907.			1908.			1909		
Notified Cases—																			
1st quarter		...	50	...	101	...	52	...	93*	...	101	...	124.						
2nd	„	...	35	...	42	...	42	...	49	...	89	...	75						
3rd	„	...	98	...	44	...	54	...	59	...	92	...	78						
4th	„	...	126	...	80	...	148	...	84	...	123	...	79						
Registered deaths—																			
1st quarter		...	5	...	12	...	13	...	21*	...	11	...	13						
2nd	„	...	5	...	2	...	5	...	3	...	7	...	14						
3rd	„	...	6	...	2	...	9	...	5	...	7	...	4						
4th	„	...	9	...	7	...	13	...	1	...	12	...	3						

* Not including a fatal case admitted to General Hospital from Mitcham and thence transferred to the Borough Hospital.

It will be seen that there was marked improvement, both in the number of attacks and in the number of deaths from diphtheria during the year. We were particularly fortunate in escaping the usual autumnal rise, which is normally a marked feature in the diphtheria returns.

RELATION OF DIPHTHERIA TO DRAINAGE DEFECTS.

356 notified cases occurred in 261 houses. In two instances the drains were not examined. The following is the result of the examination of the drains of the remaining 259 houses :—

Number of houses where no defects were found :—178, or 68·7 per cent.

Number of houses where serious defects were found :—22, or 8·5 per cent.

Number of houses where slight defects were found :—59, or 22·8 per cent.

The proportion of houses infected with diphtheria that were found to have serious defects in their drains was 8·5, a figure which is almost identical with that found in 1908, namely, 8·7. This figure confirms the view previously expressed that drainage defects are not an important factor in the causation of diphtheria.

RETURN CASES OF DIPHTHERIA.

In four instances diphtheria occurred in houses to which patients had returned from hospital. In each instance steps were taken to test the condition of the discharged patient. In two instances there was no evidence that the discharged patient remained infectious.

The following are the facts relating to the other two outbreaks :—

Case I.—Sidney R., 6 years, admitted to Borough Hospital with diphtheria 8-12-08, and discharged 19-2-09. A brother, Leslie, aged 3, was away from home from 19-2-09 (before Sidney's return home) till 7-3-09. Leslie failed with diphtheria 20-3-09, and on investigation Sidney was found to have nasal discharge. Swab of his nose taken 22-3-09 proved positive. Further swabs taken weekly proved positive, and on 29-4-09 he was re-admitted to the Borough Hospital.

Case II.—Rose H., 9 years, admitted with diphtheria 25-4-09, and discharged 25-6-09. Lily H., 9 years, failed 6-7-09, was admitted to Borough Hospital 8-7-09, but swab taken of Rose on 9-7-09 was negative. Lily H. was discharged on 20-8-09, and Violet, 8 years, failed with diphtheria 22-8-09. Swabs taken of the whole family on 26-8-09 showed that Lily was free from infection, but the nose swab of Rose and the throat swab of her father were positive. The father was found negative at the end of fourteen days, and Rose and all other school contacts were finally freed for school on 4-9-09.

In case I. it was suspected that the diphtheria germs were lurking at the back of the nose on the child leaving the hospital, and were not capable of detection or producing ill results until the subsequent development of nasal discharge.

In the second case it would seem not improbable that the father's throat was persistently infectious.

NECESSITY FOR PROMPTNESS IN DEALING WITH DIPHTHERIA.

In my last Annual Report I called attention to the fact that many patients die from diphtheria because they do not come under treatment sufficiently early in the course of the disease. The following are the approximate times at which patients came under treatment during 1909 :—

Day of Disease.		Patients.		Deaths.		Mortality. per cent.
1	...	11	...	—	...	—
2	...	86	...	3	...	3.5
3	...	82	...	7	...	8.5
4	...	34	...	7	...	20.6
5	...	17	...	4	...	23.5
6	...	7	...	1	...	14.2
7	...	8	...	1	...	12.5
8 & upwards		16	...	1	...	6.2

It is noteworthy that none of the cases admitted on the first day died, and that the mortality of those admitted on the second day of the disease is small, while there is a considerable rise on the third day and a still larger on the fourth and fifth days.

It is satisfactory to find that a larger proportion of diphtheria patients came under treatment within the first three days of the disease, and it is probable that this helped to diminish the fatality

of the hospital cases. The question is so important that it is necessary to again record the fact that almost every case of diphtheria could be saved if anti-toxin treatment were begun sufficiently early. Every patient who is suspected to be suffering from diphtheria should be given anti-toxin without delay and without waiting for bacteriological confirmation of the diagnosis.

Since 1907 the following notice has been issued to medical men, but so far comparatively few have availed themselves of the offer:—

“EARLY TREATMENT OF DIPHTHERIA.”

“As success in treatment is dependent on antitoxin being administered at the onset of the disease, patients who present clinical symptoms of diphtheria should be sent to the Borough Hospital or receive antitoxin at home, without waiting the result of the bacteriological examination.”

“Antitoxin may be obtained at the Public Health Department, Town Hall, during office hours, and at the Borough Hospital at other times. The price is 2s. 6d. per 2,000 units, but preliminary doses for patients who will be admitted to hospital if the diagnosis is confirmed, may be obtained free of cost if special application be made to the Public Health Department or to the Borough Hospital, Waddon Marsh Lane, Croydon.”

ENTERIC FEVER.

Twenty-one cases were notified, and three deaths from this disease were registered during the year. Eleven cases were removed to hospital, and of these three were subsequently found to be suffering from some other complaint, viz.:—One from enteritis, one from pleurisy with effusion, and one from ulcerative colitis. There were thus 18 cases of supposed enteric fever which required investigation. Of these four were due to personal infection from a preceding case in the same house. In the remaining fourteen cases no source of infection could be discovered, but in three instances the blood reaction was negative, and there is considerable doubt as to the correctness of the diagnosis. One of the patients was a nurse at the Croydon Infirmary, the source of whose infection was not definitely traced. Possibly she was infected from a chronic “carrier” among one of the patients. Another of the notified patients was a missed case which had been admitted to the General Hospital for pneumonia, and the nature of the illness was only discovered through attention being directed by the investigations of the Health Department into the illness of a relative who was notified as suffering from enteric.

As epidemics of enteric fever are commonly traceable to infected water, and as Croydon has two distinct sources of water supply, I have once more compared the incidences of the disease in the parts of the Borough supplied by Croydon and by Lambeth (Metropolitan Water Board) water.

As the numbers for one year are small, the particulars have been taken out for the ten years, 1900-1909 inclusive.

PARTICULARS OF ENTERIC FEVER CASES.

1900 TO 1909 INCLUSIVE.

Cases Notified.—396 (including 14 cases of Continued Fever).

Removed to Borough Hospital.—230 cases (including four cases of Continued Fever).

On removal to the Borough Hospital fifty-two (52) were found to be suffering from other diseases.

Water Supply of the Cases Notified:—

CROYDON	...	...	...	...	...	272
LAMBETH	...	...	...	...	...	119
Cases brought to Public Institutions in the Borough from outside Districts	...	...	...	...	...	5
Total	...	...	...	...	...	<u>396</u>

Concerning the Notified Cases, the following facts were ascertained:—

Suffering from other diseases, and not enteric fever	...	...	...	...	...	52
Doubtful diagnosis	...	...	...	...	...	1
Home case, diagnosis subsequently amended...	...	...	...	...	...	2
Infected outside the Borough	...	...	...	...	...	50
Possibly infected by shellfish, watercress &c....	...	...	...	...	...	45
Infected from other cases	...	...	...	...	...	54
„ while unstopping of drains	...	...	...	...	...	1
„ by overflow of sewer	...	...	...	...	...	1
	...	...	...	...	...	<u>206</u>
Source of illness not traced	...	...	...	...	...	190
Total	...	...	...	...	...	<u>396</u>

Of the 190 cases, the source of which was not traced, and which, therefore, might have been water-borne infection, 136 live within the area of the "Croydon" supply, and 54 in the "Lambeth" area. The enteric fever incidence in the two areas was, therefore, 11 per 10,000 in the "Croydon" area, and 14 per 10,000 in the "Lambeth" area for the nine years. The numbers for both water supplies are small, and conclusively disprove the suggestion that there has been any water-borne epidemic in Croydon during recent years.

When the figures for 1909 are examined separately it is found that of the 14 cases, for which no definite cause could be assigned, all were in the Croydon area.

When the numbers of cases of enteric fever are so small as they were in Croydon in 1909, the question of a water epidemic does not arise, but knowing what we do of the potential dangers of water infection, it is still essential that the efforts made by the Water Committee to further safeguard the public supplies should be in no way relaxed.

Investigation was also made into the sanitary condition of all premises in which cases of enteric fever occurred, which could not be traced to infection outside the borough. As the numbers for 1909 are small, particulars have been extracted for the five years 1905—1909.

ENTERIC FEVER.

(Deducting wrong diagnosis and definitely imported cases).

Year.	Houses Infected.	Houses Tested.	Serious defects, i.e. bad stoppages, and drains requiring to be re-laid.	Slight defects, i.e. defective joints of ventilation pipes, &c.	Remarks.
1905	16	16	2	4	
1906	27	27	4	6	
1907	12	12	—	2	
1908	31	30	5	6	The Convent at Upper Norwood was not tested.
1909	18	17	2	5	Croydon Union Infirmary not tested.
	104	102	13	23	

PUERPERAL FEVER

was notified on 16 occasions, in 11 of which a doctor was present at the confinement.

Puerperal fever occurred twice in cases attended by midwives who were suspended from practice for three and 14 days respectively until their clothing and outfits were cleansed and disinfected.

Five cases ended fatally.

ERYSIPELAS

was notified on 92 occasions, and three cases ended fatally.

TUBERCULOSIS

of all forms was the assigned cause of death in 205 instances, or 1·3 per 1,000 persons living, while phthisis alone was responsible for 152 deaths or '94 per 1,000.

It will be seen from Table VI. that there is a slight decline in the mortality from phthisis:

Voluntary notification has been in force since the last quarter of 1903, and since January 1st, 1909, all cases treated by Poor Law Medical Officers have been compulsorily notifiable.

The number of cases notified in each year was as follows:—

Year.					Cases Notified.
1903 (part of)	...	...	...	...	57
1904	...	...	...	...	129
1905	...	...	...	...	75
1906	...	...	...	...	96
1907	...	...	...	...	83
1908	...	...	...	...	106
1909	...	...	...	...	139

Of the 139 cases notified in 1909 fifty-six were notified by the Medical Officers of the Croydon Union Infirmary, and 26 by the local district medical officers. I cannot but think that the notifications received from the latter are incomplete.

TUBERCULOSIS AND MILK.

Pending fresh legislation, no samples were taken under the Model Milk Clauses during the year.

MIDWIVES ACT, 1902.

An inspection of the midwives was carried out by Dr. Jackson on two occasions.

During the year information was obtained as to the proportion of births attended by medical men, by registered midwives and by unregistered women. The total number of births investigated was 4,022. The results may be summarised as follows:—

Number attended by medical men	2404
Number attended by registered midwives (including cases in which medical man was called in for some emergency)	642
Number attended by unregistered women	608
Removals, insufficient address, etc.	368
Total	4022

In the case of the births attended by unregistered women the names and addresses of the persons attending at the confinement were ascertained. In a large number of instances "a friend" or "neighbour" assisted, but it was evident that a considerable number of women were carrying on the business of midwifery nurses, though their names were not on the register. Thus:—

1 woman attended	58 cases
1 " " " " " "	41 "
1 " " " " " "	36 "
1 " " " " " "	31 "
1 " " " " " "	27 "
1 " " " " " "	25 "
1 " " " " " "	16 "
1 " " " " " "	14 "
1 " " " " " "	13 "
1 " " " " " "	12 "
1 " " " " " "	10 "
1 " " " " " "	8 "
2 women each attended	17 "
2 " " " " " "	15 "
2 " " " " " "	9 "
2 " " " " " "	7 "
3 " " " " " "	6 "
4 " " " " " "	5 "
7 " " " " " "	4 "
6 " " " " " "	3 "
16 " " " " " "	2 "
82 " " " " " "	1 "

The practice for gain by these unqualified women became illegal in April, 1910.

During the year one registered midwife withdrew from practice, four removed, and six new names were added, leaving 30 on the register on December 31st, 1909.

All the midwives' homes, except one outside the Borough, were visited by Dr. Jackson since the last report, and the registers and bags of appliances inspected.

Four midwives were cautioned.

NOTIFICATION OF BIRTHS ACT, 1907.

This Act was adopted by the Council on January 13th, and came into force on February 19th, 1908, after confirmation by the Local Government Board.

During the year 3,403 notifications were received. These births were notified as follows:—

Notified by medical men	798
Notified by parents	1487
Notified by certified midwives	671
Notified by uncertified midwifery nurses	447
	3,403

The number of births which actually occurred in the borough during the year was 3,938. The number of births notified by parents, medical men and midwives therefore amounted to 86 per cent. of the total. The percentage of notified births is considerably larger than in 1908, and there is now a reasonable compliance with the requirements of the Act.

After two years' experience of the Notification of Births Act, I am strongly of opinion that it should be repealed, and early registration (say within seven days) substituted.

CUSTOMS AND INLAND REVENUE ACTS.

No application under Section 26, 53 and 54 Vict., c. 8, was received during the year.

DISINFECTION.

During the year 1,255 houses and 9,774 articles were disinfected.

The articles disinfected were as follows:—659 Beds; 594 Mattresses; 1,698 Blankets; 315 Sheets; 1,491 Pillows; 557 Bolsters; 72 Palliasses; 282 Cushions; 25 Carpets; 4,081 Other Articles. Total, 9,774.

The much needed provision of a new disinfecting station is still in abeyance. Plans have been prepared for new premises in Factory Lane, as the proposed alterations in the main sewers will necessitate the demolition of the existing building. These plans include the provision of a limited number of baths, which are required not only for the purposes mentioned in my report to the Education Committee, but for the cleansing of verminous adults and for the complete disinfection of tramps and others who have been exposed to smallpox.

TABLE I.

For whole District, for Calendar Year 1909.

Year.	Population estimated to Middle of each Year.	BIRTHS.		DEATHS UNDER ONE YEAR OF AGE.		DEATHS AT ALL AGES. TOTAL.		Deaths in Public Institutions.	Deaths of Non-residents registered in District.	Deaths of Resident registered beyond District.	DEATHS AT ALL AGES. NETT. <i>d</i> .	
		Number.	Rate.*	Number.	Rate per 1,000 Births registered.	Number.	Rate.*				Number.	Rate.*
1	2	<i>a</i> 3	4	<i>b</i> 5	6	7	8	<i>c</i> 9	<i>d</i> 10	<i>e</i> 11	12	13
1899.	127,759	3204	25.1	500	156	1993	15.6	431	101	7	1899	14.9
1900.	131,186	3270	24.9	432	132	1977	15.1	419	63	6	1920	14.6
1901.	134,665	3578	26.6	501	140	1829	13.6	383	83	2	1743	12.9
1902.	137,917	3576	25.9	476	133	1965	14.3	429	74	13	1904	13.8
1903.	141,157	3726	26.4	386	104	1740	12.3	454	129	57	1670	11.8
1904.	144,419	3769	26.1	483	128	2071	14.3	598	148	75	1998	13.8
1905.	147,704	3894	26.4	372	96	1941	13.1	541	142	83	1882	12.7
1906.	151,011	3886	25.7	485	125	2085	13.8	629	160	94	2019	13.4
1907.	154,342	3967	25.7	371	94	1953	12.5	611	149	97	1901	12.3
1908.	157,698	4017	25.5	398	99	2053	13.0	608	137	105	2021	12.8
Averages for years 1899—1908	142,785	3688	25.8	440	121	1961	13.8	510	118	54	1896	13.3
1909.	161,078	3938	24.4	313	79	1974	12.3	572	165	70	1879	11.7

* Rates calculated per 1,000 of estimated population.

a These are total births (uncorrected for Institutions).*b* These are corrected for Institutions.*c* Includes all deaths of residents and non-residents in Workhouse, Workhouse Infirmary, Borough Hospital, General Hospital, Purley Cottage Hospital, 89, Central Hill (Servants' Reformatory), and Norwood Cottage Hospital.*d* Deaths of non-residents have been excluded in the case of the Workhouse, Workhouse Infirmary, Borough Hospital, General Hospital, Purley Cottage Hospital, 89, Central Hill (Servants' Reformatory), and Norwood Cottage Hospital. Prior to 1903 correction was only made for the first three institutions.*e* In 1903 arrangements were made for the first time whereby deaths of Croydon persons in the London district were notified to the Medical Officer of Health.

Area of District in acres (exclusive of area covered by water), 9,012.

AT CENSUS OF 1901.—Total population at all ages, 133,895; number of inhabited houses, 25,726; average number of persons per house, 5.2.

TABLE II.
Vital Statistics of separate Wards in 1909 and previous years.

NAMES OF LOCALITIES.	1. WEST WARD.				2. CENTRAL WARD.				3. EAST WARD.				4. SOUTH WARD.				5. SOUTH NORWOOD WARD.				6. UPPER NORWOOD SUB-DIVISION.				7. THORNTON HEATH SUB-DIVISION.				8. UNDISTRIBUTED INSTITUTION BIRTHS AND DEATHS.			
	Population estimated to middle of each year.	Births Registered.	Deaths at all ages.	Deaths under 1 Year.	Population estimated to middle of each year.	Births Registered.	Deaths at all ages.	Deaths under 1 Year.	Population estimated to middle of each year.	Births Registered.	Deaths at all ages.	Deaths under 1 Year.	Population estimated to middle of each year.	Births Registered.	Deaths at all ages.	Deaths under 1 Year.	Population estimated to middle of each year.	Births Registered.	Deaths at all ages.	Deaths under 1 Year.	Population estimated to middle of each year.	Births Registered.	Deaths at all ages.	Deaths under 1 Year.	Population estimated to middle of each year.	Births Registered.	Deaths at all ages.	Deaths under 1 Year.	Population estimated to middle of each year.	Births Registered.	Deaths at all ages.	Deaths under 1 Year.
YEAR.	a	b	c	d	a	b	c	d	a	b	c	d	a	b	c	d	a	b	c	d	a	b	c	d	a	b	c	d	a	b	c	d
1899	40,606	1100	521	182	16,553	388	223	59	13,734	323	153	58	17,235	421	193	48	19,346	488	248	62	8,228	102	91	13	12,057	315	133	49	* Prior to 1900, Institution Deaths could not be distributed as the Registrar did not supply the necessary information.	..	431	29
1900	41,839	1142	602	175	16,694	355	264	46	14,241	327	177	33	17,624	394	246	52	19,852	501	234	62	8,241	129	96	11	12,685	353	157	43		69	84	10
1901	43,138	1230	640	208	16,	397	200	48	14,790	345	158	45	18,011	409	197	49	20,309	571	245	73	8,254	132	93	16	13,288	414	164	57		80	51	5
1902	44,361	1271	658	191	16,853	326	219	44	15,325	361	175	44	18,363	413	222	45	20,899	547	276	75	8,277	155	113	26	13,828	404	158	43		98	83	8
1903	45,540	1355	570	160	16,937	379	210	45	15,835	339	155	34	18,735	378	181	27	21,412	611	250	55	8,302	149	85	7	14,375	443	171	48		72	37	1
1904	46,741	1319	609	190	17,051	362	229	35	16,346	375	191	47	19,107	399	227	55	21,925	641	322	70	8,327	148	90	20	14,922	463	192	63		82	46	3
1905	47,944	1446	706	162	17,106	344	236	37	16,983	387	161	30	19,404	384	197	34	22,370	648	297	60	8,335	134	105	10	15,562	466	159	39		85	21	..
1906*	49,219	1451	744	207	7,171	362	255	51	17,330	393	182	51	19,711	366	232	40	22,825	639	276	61	8,343	148	88	7	16,212	447	227	65		89	15	3
1907*	50,500	1515	715	171	17,236	351	207	38	18,088	392	173	25	20,022	363	210	29	23,284	643	285	53	8,351	145	94	9	16,866	456	195	44		102	23	..
1908*	51,891	1559	747	185	17,310	340	209	24	18,634	388	190	30	20,329	331	237	36	23,739	647	267	61	8,364	156	119	6	17,521	492	231	53		83	21	3
Averages of Years 1899 to 1908.	46,168	1387	656	184	15,971	360	225	43	16,151	363	171	39	18,854	388	214	41	21,605	591	271	63	8,302	140	97	13	14,731	425	179	60		76	81	6
1909*	53,125	1569	721	142	17,394	226	211	24	19,185	396	189	33	20,636	371	198	27	24,195	654	297	39	8,377	151	87	8	18,176	455	184	40		85	23	

NOTES.—For 1900—1909 deaths of residents occurring beyond the district are included in sub-columns c of this table, and those of non-residents occurring at the Workhouse, Workhouse Infirmary, Borough Hospital, General Hospital, Norwood Cottage Hospital, Purley Cottage Hospital, and 89, Central Hill (Servants' Reformatory) are excluded.

Deaths of residents occurring in Public Institutions are allotted to the respective localities, according to the addresses of the deceased, and all deaths of Croydon residents whose exact home could not be ascertained, are included in Block 8.

* Including North Ward.

TABLE III.
Cases of Infectious Disease notified during the Year 1909.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.								TOTAL CASES NOTIFIED IN EACH LOCALITY.										NO. OF CASES REMOVED TO HOSPITAL FROM EACH LOCALITY.									
	At all Ages.	At Ages—Years.							West.	North.	Central.	East.	South.	South Norwood.	Upper Norwood.	Thornton Heath.	Institution cases which could not be distributed.	West.	North.	Central.	East.	South.	South Norwood.	Upper Norwood.	Thornton Heath.	Institution Cases.	Total.	
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 & upwd.																					
Small-pox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Cholera	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Diphtheria	356	3	91	220	19	23	..	75	38	43	34	42	65	7	50	2	61	32	34	26	33	46	7	43	1	283		
Membranous Croup	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Erysipelas	92	2	4	9	8	55	14	28	21	7	3	5	20	2	6	..	..	..	..	..	..	..	..	..	..	..	..	
Scarlet Fever	727	6	161	485	45	30	..	95	97	55	89	56	208	28	94	5	74	69	36	66	40	158	17	68	5	533		
Typhus Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Enteric Fever	21	..	..	4	7	10	..	7	2	6	2	2	1	..	..	1	5	1	3	2	..	..	..	..	..	..	11	
Relapsing Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Continued Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Puerperal Fever	16	..	..	..	2	14	..	5	5	2	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Plague	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Phthisis	139	..	1	17	18	99	4	42	35	10	8	14	13	1	13	3	..	..	..	..	..	..	..	..	..	..	..	
TOTALS	1351	11	257	735	99	231	18	252	198	123	137	120	309	38	163	11	140	102	73	94	73	204	24	111	6	827		

The Borough (Fever) Isolation Hospital is situated in the West Ward.
*The Croydon and Wimbledon (Small-pox) Isolation Hospital is at North Cheam.

TABLE IV.

Causes of, and ages at, Death during Year ending December 31st, 1909, excluding Deaths of Strangers at the Workhouse, Workhouse Infirmary, Borough Hospital, General Hospital, Cottage Hospital, Purley, Cottage Hospital, Upper Norwood, 89, Central Hill (Servants' Reformatory), and adding Deaths of Croydon Residents known to have occurred outside the District.

Schedule No.	Causes of Death in Croydon during the Year ending December 31st, 1909.	DEATHS IN WHOLE DISTRICT AT SUBJOINED AGES.								DEATHS IN LOCALITIES AT ALL AGES.								Institution and Street Deaths which could not be distributed.	Total Institution Deaths distributed and not distributed.	Inquest Cases.	
		ALL AGES.			Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	West.	North.	Central.	East.	South.	South Norwood.	Upper Norwood.				Thornton Heath.
		Total.	M.	F.																	
2	Measles	21	6	15	8	10	2	1	..	..	4	8	2	..	..	2	..	10	..	3	..
3	Scarlet Fever	9	2	7	..	5	4	..	..	..	1	1	1	2	..	..	..	..	8 (5)	..	
5	Epidemic Influenza ..	59	17	42	2	2	3	1	14	37	18	10	3	7	6	8	5	2	3 (2)	1	
6	Whooping Cough ..	30	19	11	13	17	..	..	..	..	5	8	2	6	..	5	..	4	1	..	
7	Diphtheria (Mem. Croup)	24	12	12	..	6	17	1	..	..	10	..	1	2	4	3	..	4	24 (3)	..	
8	Enteric Fever ..	3	..	3	..	..	..	3	..	..	..	..	2	1	..	..	..	..	..	..	
10	Diarrhoea, Dysentery ..	16	10	6	11	1	1	..	..	3	5	1	3	..	1	3	1	2	..	..	
11	Epidemic Enteritis ..	3	..	3	2	..	..	1	..	..	2	..	..	..	..	1	..	..	..	..	
12	Other Allied Diseases ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
15	Tetanus	1	1	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	1	1	
18	Syphilis	6	4	2	5	..	..	1	..	..	3	..	..	1	2	..	..	..	3 (1)	..	
19	Gonorrhoea	2	2	..	..	..	..	2	..	..	1	..	..	..	..	1	..	..	1	..	
21	Erysipelas	3	2	1	..	..	..	2	1	..	..	2	..	..	..	1	..	..	1	..	
22	Puerperal Fever ..	5	..	5	..	..	1	4	..	..	1	..	2	1	..	1	..	..	2	..	
23	Pyæmia (Septicæmia) ..	6	4	2	2	..	2	..	2	..	3	..	1	1	..	..	1	..	6 (2)	2	
24	Infective Endocarditis ..	4	2	2	..	..	1	1	2	..	..	2	..	..	..	2	..	..	1	..	
25	Other Allied Diseases ..	7	6	1	1	..	..	..	4	2	3	1	..	1	1	..	1	..	3	..	
26	Malarial Fever ..	1	..	1	..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	
27	Rheumatic Fever ..	4	2	2	..	..	2	..	2	..	1	..	..	..	1	2	..	..	1	..	
28	Rheumatism of Heart ..	1	1	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	
29	Tuberculosis of Brain ..	24	12	12	5	7	7	1	4	..	10	3	1	2	..	5	..	3	10 (3)	..	
30	Tuberculosis of Larynx ..	1	1	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	..	..	
31	Phthisis	152	77	75	1	3	11	23	107	7	47	22	13	16	13	20	5	14	54 (11)	1	
32	Abdominal Tuberculosis ..	10	7	3	2	3	3	1	1	..	3	1	1	1	1	1	1	1	5 (2)	..	
33	General Tuberculosis ..	10	5	5	..	2	3	1	3	1	4	2	..	..	1	2	..	1	(1)	..	
34	Other forms Tuberculosis	8	7	1	..	1	1	2	1	3	..	..	2	1	1	2	2	..	2 (2)	..	
41	Acute Alcoholism ..	1	..	1	..	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	
42	Chronic Alcoholism ..	6	1	5	..	..	..	6	..	..	1	1	1	..	1	1	1	..	1	1	
43	Chronic Industrial Poisonings ..	1	1	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	2 (1)	..	
45	Osteo-arthritis ..	6	..	6	..	..	..	2	4	..	1	1	..	..	2	2	..	..	1	..	
46	Gout	3	3	..	..	..	..	2	1	..	..	..	1	2	..	..	..	..	..	..	
47	Cancer	170	65	105	..	..	..	1	107	62	35	15	24	23	18	33	8	14	55 (15)	..	
48	Diabetes Mellitus ..	11	7	4	..	..	..	3	4	4	3	..	..	1	3	..	3	1	5 (2)	..	
49	Purpura Hæmorrhagica ..	1	..	1	..	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	
50	Hæmophilia ..	2	1	1	..	1	1	..	..	..	..	..	1	..	1	..	..	..	1	..	
51	Anæmia	5	3	2	..	..	..	3	2	..	..	1	2	..	..	1	..	1	4 (1)	..	
52	Lymphadenoma ..	5	2	3	..	..	1	..	2	2	1	2	1	..	..	1	..	..	1	..	
53	Premature Birth ..	77	40	37	77	..	..	..	..	..	23	9	8	9	8	10	4	6	2	6	
54	Injury at Birth ..	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	
55	Debility at Birth ..	7	5	2	7	..	..	..	..	..	2	2	1	..	1	..	..	1	..	..	
56	Atelectasis ..	9	4	5	9	..	..	..	..	..	2	1	..	1	1	3	..	1	1	..	
57	Congenital Defects ..	17	9	8	13	2	2	..	..	..	2	5	..	4	..	3	1	2	4	1	
58	Want of Breast Milk ..	1	1	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	
59	Atrophy. Debility, Marasmus ..	41	27	14	39	2	..	..	..	..	12	12	1	4	6	3	2	1	14 (6)	3	
61	Rickets	1	..	1	..	1	..	..	..	..	..	..	..	1	..	..	..	..	(1)	..	
62	Old Age, Senile Decay ..	92	24	68	..	..	..	..	92	23	11	6	9	17	9	9	8	..	5 (1)	2	
63	Convulsions ..	19	7	12	18	1	..	..	..	..	6	2	1	1	2	3	..	4	..	9	
64	Meningitis ..	7	2	4	2	3	1	..	1	..	1	1	..	2	1	..	..	2	1	1	
65	Encephalitis ..	4	1	3	..	..	1	..	2	1	1	1	..	1	1	..	..	..	3	1	
66	Apoplexy ..	6	4	2	..	..	..	2	4	1	2	1	..	..	..	1	..	1	2	..	
67	Softening of Brain ..	6	2	4	..	..	..	..	6	1	1	1	..	1	2	..	..	..	(1)	..	
68	Hemiplegia ..	3	..	3	..	..	..	..	3	..	..	..	..	2	..	..	1	..	..	..	
70	Other forms of Insanity ..	8	3	5	..	..	..	5	3	1	..	..	1	..	1	..	..	5	10 (2)	1	
71	Chorea	1	1	..	1	..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	
72	Cerebral Tumour ..	4	3	1	..	1	1	1	1	..	1	1	..	..	1	..	1	..	1	..	
73	Epilepsy	15	4	11	..	..	2	9	4	4	4	1	2	..	1	4	1	1	13 (1)	..	
74	Laryngismus Stridulus ..	3	1	2	2	..	1	..	..	..	..	..	1	1	..	..	..	1	..	2	
75	Locomotor Ataxy ..	4	2	2	..	..	4	..	..	3	1	..	..	..	..	..	..	..	1	..	
76	Paraplegia ..	9	8	1	..	..	1	6	2	2	2	2	..	..	2	1	1	1	6 (3)	..	
77	Other forms, Brain Diseases	5	3	2	1	..	1	..	2	1	..	2	..	..	1	1	..	1	2	..	
78	Otitis	2	1	1	1	..	1	..	..	..	..	1	1	..	..	..	..	..	3 (2)	..	
79	Disease of Nose, Epistaxis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	(1)	..	
80	Diseases of Eye ..	1	1	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	
81	Pericarditis ..	1	..	1	..	..	..	..	1	..	..	1	..	..	..	..	..	..	(1)	..	
82	Endocarditis ..	88	38	50	..	2	6	41	39	24	15	8	11	7	15	2	4	2	25 (9)	12	
84	Angina Pectoris ..	4	1	3	..	..	..	1	3	1	1	2	1	..	..	..	..	..	..	1	
85	Aneurism	3	2	1	..	..	..	2	1	1	1	1	1	..	..	..	..	..	..	..	
86	Senile Gangrene ..	1	1	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	
87	Embolism Thrombosis ..	19	7	12	..	..	..	8	11	3	5	2	3	4	..	..	..	2	11 (6)	1	

Causes of, and ages at, Death during Year ending December 31st, 1909.

Schedule No.	Causes of Death in Croydon during the Year ending December 31st, 1909.	DEATHS IN WHOLE DISTRICT AT SUBJOINED AGES.								DEATHS IN LOCALITIES AT ALL AGES.										Institution and Street Deaths which could not be distributed.	Total Institution Deaths distributed and not distributed.	Inquest Cases
		ALL AGES.			Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	West.	North.	Central.	East.	South.	South Norwood.	Upper Norwood.	Thornton Heath.				
		Total.	M.	F.																		
90	Other Diseases, Heart and Vessels	200	95	105	..	1	2	..	63	134	36	25	36	18	14	27	14	21	9	74 (22)	27	
91	Laryngitis	5	4	1	..	..	1	..	1	1	1	..	2	..	1	..	1	..	..	4	1	
94	Acute Bronchitis	81	37	44	23	7	2	..	13	36	17	12	12	9	5	13	2	11	1	12 (2)	4	
95	Chronic Bronchitis	96	39	57	..	12	..	..	18	78	26	9	11	11	15	12	3	8	1	16 (6)	1	
96	Lobar Pneumonia	27	17	10	1	2	2	..	14	8	6	6	4	1	1	4	..	4	1	17 (1)	9	
97	Lobular Pneumonia	65	31	34	27	13	2	..	7	16	13	7	7	7	12	7	1	10	1	10 (7)	..	
98	Pneumonia	50	27	23	6	5	1	2	22	14	10	7	3	4	6	7	2	11	..	4 (3)	3	
99	Emphysema, Asthma	18	11	7	..	1	..	..	7	11	7	1	3	..	2	..	2	2	..	4 (1)	..	
100	Pleurisy	4	2	2	..	1	..	..	1	2	1	..	1	..	1	1	..	..	..	..	..	
101	Other Diseases Respiratory System	5	1	4	..	2	..	..	1	..	..	..	..	..	2	3	..	..	..	..	..	
102	Diseases of Mouth and Annexa	1	1	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	
103	Diseases of Pharynx	1	..	1	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	(1)	..	
105	Ulcer of Stomach and Duodenum	13	3	10	..	..	..	..	12	5	4	3	2	..	1	2	1	..	..	6	1	
106	Other Diseases of Stomach	13	7	6	4	3	1	..	2	..	4	3	1	1	2	1	..	1	..	3	2	
107	Enteritis	26	15	11	15	5	1	1	3	1	13	2	3	2	1	1	1	4	..	9 (3)	..	
108	Appendicitis	8	5	3	..	1	1	1	5	..	2	1	..	1	2	2	..	..	..	10 (3)	1	
109	Obstruction of Intestine	11	4	7	..	2	1	..	4	4	3	1	3	..	1	2	..	1	..	6 (3)	..	
111	Cirrhosis of Liver	14	9	5	..	..	..	..	10	4	3	1	2	..	..	1	1	1	..	1	..	
112	Other Diseases of Liver	6	1	5	..	..	..	..	4	2	..	2	1	..	..	1	..	..	..	1	..	
113	Peritonitis	2	..	2	..	..	..	..	2	..	..	..	1	..	..	1	..	..	..	1	..	
114	Other Diseases, Digestive System	2	2	..	1	..	..	1	..	..	..	..	..	..	..	2	..	..	..	1	..	
115	Diseases, Lymphatic System and Glands	7	3	4	1	1	2	2	1	..	1	..	1	..	2	2	..	1	..	2	1	
116	Acute Nephritis	11	5	6	..	2	2	..	3	4	..	2	3	..	3	1	..	2	..	13 (4)	1	
117	Bright's Disease	42	24	18	..	..	1	..	18	23	16	5	5	7	4	4	1	..	..	1	1	
118	Calculus	3	2	1	..	..	..	..	2	1	1	..	..	..	..	1	..	..	..	..	..	
119	Diseases of Bladder and Prostrate	12	12	..	..	..	..	..	..	12	..	3	1	3	..	4	..	1	..	4 (1)	..	
120	Other Diseases, Urinary System	2	1	1	..	..	..	..	1	1	..	1	..	..	1	..	1	..	..	..	..	
122	Diseases of Ovaries	3	..	3	..	..	..	..	2	1	..	..	1	..	..	1	1	..	..	2	..	
123	Diseases of Uterus and Appendages	1	..	1	..	..	..	..	1	..	..	..	..	..	..	1	..	..	..	..	..	
125	Diseases of Breast	1	1	..	1	..	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	
126	Abortion, Miscarriage	1	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	
127	Puerperal Mania	1	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	
128	Puerperal Convulsions	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	(1)	..	
129	Placenta Prævia Flooding	1	..	1	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	2 (1)	..	
132	Arthritis, Ostitis, Periostitis	2	2	..	..	..	..	1	1	..	..	..	1	..	1	..	..	1	..	..	..	
135	Eczema	1	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	
136	Pemphigus	2	..	2	2	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	
ACCIDENTS.																						
139	In Vehicular Traffic	2	1	1	..	..	..	..	2	..	1	..	..	..	..	..	..	1	..	3 (1)	2	
140	On Railways	1	1	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	3 (2)	1	
142	In Building Operations	1	1	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	..	1	1	
145	Burns and Scalds	5	3	2	..	2	..	1	1	1	1	..	..	1	1	..	1	1	..	8 (5)	5	
146	Poisons, Poisonous Vapours	3	3	..	1	..	..	..	2	..	..	..	..	..	1	..	1	..	..	..	..	
150	Drowning	1	1	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	
151	Suffocation, Overlaid in Bed	3	2	1	3	..	..	..	..	..	..	1	..	..	1	1	..	..	..	..	..	
152	Otherwise	2	1	1	1	1	..	..	..	..	..	1	..	..	1	1	1	2	..	16 (6)	16	
153	Falls not specified	16	8	8	..	2	1	..	5	8	5	4	1	1	1	1	1	..	..	1	1	
154	Weather Agencies	1	1	..	..	..	..	..	1	..	..	..	..	..	..	..	1	..	..	1	4	
155	Otherwise, not stated	5	4	1	4	..	..	..	1	..	2	2	1	..	..	..	..	..	..	..	1	
156	Homicide	1	1	..	..	..	1	..	..	..	..	..	..	1	..	..	..	..	..	..	1	
SUICIDES.																						
157	By Poison	4	1	3	..	..	..	..	4	..	..	1	2	..	1	..	..	..	..	(1)	5	
159	By Hanging & Strangulation	5	5	..	..	..	..	..	5	..	..	..	..	..	2	2	..	1	..	(1)	1	
161	By Shooting	1	1	..	..	..	..	..	1	..	1	..	..	..	..	..	1	..	..	2 (1)	..	
162	By Cut or Stab	5	3	2	..	..	..	..	5	..	2	1	..	1	..	..	..	..	..	..	..	
164	By Crushing	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
165	By other and unspecified methods	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
168	Ill-defined and Unspecified Causes	5	2	3	..	..	..	..	4	1	1	..	1	..	1	1	1	..	..	(3)	2	
TOTAL		1879	885	994	313	123	91	60	624	663	462	339	210	189	198	267	87	184	23	572 (185)	68	

The total Institution Deaths include those of strangers occurring within the Borough. Deaths of such strangers occurring at the Workhouse, Workhouse Infirmary, Borough Hospital, General Hospital, Cottage Hospital, Purley, Cottage Hospital, Upper Norwood, and 89, Central Hill (Servants' Reformatory), are excluded from all other columns of the Table. The numbers so excluded are in brackets.

TABLE V.

County Borough of Croydon—Whole District.

INFANTILE MORTALITY DURING THE YEAR 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths Under One Year.
All Causes.																	
Certified	82	20	12	8	122	38	20	16	10	21	17	16	18	15	9	11	313
Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Common Infectious Diseases.</i>																	
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles... ..	...	...	...	...	...	...	...	...	...	...	...	2	1	2	...	3	8
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria : Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	2	...	...	...	1	1	2	1	2	1	3	13
<i>Diarrhoeal Diseases.</i>																	
Diarrhoea, all forms	...	1	...	...	1	3	3	...	...	2	...	1	1	...	...	2	13
Enteritis (not Tuberculous)	...	1	...	1	2	1	1	3	2	3	1	1	1	...	...	...	15
Gastritis	...	...	...	...	...	1	1	...	...	...	1	...	...	...	...	...	3
<i>Wasting Diseases.</i>																	
Premature Birth	56	10	4	2	72	3	2	...	...	...	...	...	...	...	...	...	77
Congenital Defects	14	1	3	1	19	4	1	1	1	1	1	...	1	...	...	...	29
Injury at Birth	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Want of Breast-milk	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
Atrophy, Debility Marasmus	2	4	1	1	8	7	6	5	2	5	2	2	...	1	1	...	39
<i>Tuberculous Diseases.</i>																	
Tuberculous Meningitis	...	...	...	...	...	...	...	...	1	...	...	1	...	2	1	...	5
Tuberculous Peritonitis : Tabes Mesenterica	...	...	...	...	...	...	...	1	...	...	...	...	1	...	...	...	2
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	1	...	1	...	2	...	...	1	...	...	...	...	1	...	1	...	5
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis (not Tuberculous)	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...	2
Convulsions	3	2	...	1	6	1	3	2	1	1	1	1	1	1	...	...	18
Bronchitis	...	...	1	1	2	5	1	2	...	2	1	4	3	1	2	...	23
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	...	...	...	...	...	5	1	1	1	4	5	2	5	6	2	2	34
Suffocation, overlying	...	...	1	...	1	1	1	...	...	...	...	...	...	...	...	...	3
Other causes	5	1	1	1	8	4	...	...	2	2	2	...	1	...	1	1	21
	82	20	12	8	122	38	20	16	10	21	17	16	18	15	9	11	313

Population Estimated to middle of 1909—161,078.

Births in the year { legitimate, 3740.
 { illegitimate, 198.

Deaths in the year of { legitimate Infants, 278.
 { illegitimate infants 35.

Deaths from all Causes at all Ages ... 1879.

TABLE V.—*continued.*

County Borough of Croydon—West Ward District.

INFANTILE MORTALITY DURING THE YEAR 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths Under One Year.
All Causes.																	
Certified	22	6	6	3	37	12	6	8	4	6	3	2	5	6	2	1	92
Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Common Infectious Diseases.</i>																	
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	2
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria : Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	2
<i>Diarrhæal Diseases.</i>																	
Diarrhœa, all forms	...	...	...	...	...	1	1	...	...	1	...	...	1	...	...	...	4
Enteritis (<i>not Tuberculous</i>)	...	...	...	1	1	1	...	3	1	1	...	1	...	...	...	...	8
Gastritis	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
<i>Wasting Diseases.</i>																	
Premature Birth	15	4	2	...	21	1	1	...	...	...	...	...	...	...	...	...	23
Congenital Defects	3	...	1	...	4	2	...	...	...	...	...	...	...	...	...	...	6
Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Want of Breast-milk	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atrophy, Debility, Marasmus	...	1	...	...	1	2	2	3	...	1	...	1	...	1	...	...	11
<i>Tuberculous Diseases.</i>																	
Tuberculous Meningitis	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1
Tuberculous Peritonitis : Tabes Mesenterica	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...
Other Tuberculous D'ses	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	1	...	1	...	2	...	...	...	...	...	...	...	...	...	...	...	2
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1
Convulsions	2	1	...	...	3	...	1	1	1	...	...	...	...	...	...	...	6
Bronchitis	...	...	1	1	2	3	...	1	...	...	...	1	1	1	...	...	9
Laryngitis	...	...	...	...	...	...	1	...	1	1	...	...	2	2	...	1	9
Pneumonia	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5
Other Causes	1	...	1	1	3	...	...	...	1	1	...	...	...	...	...	...	5
	22	6	6	3	37	12	6	8	4	6	3	2	5	6	2	1	92

Population Estimated to middle of 1909—30,481.

Births in the year { legitimate, 846.
 illegitimate, 61.

Deaths in the year of { legitimate infants 79.
 illegitimate infants, 13.

Deaths from all Causes at all Ages ... 462.

TABLE V.—*continued.*

County Borough of Croydon—Central Ward District.

INFANTILE MORTALITY DURING THE YEAR 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths Under One Year.
All Causes.																	
Certified	7	1	1	1	10	3	...	...	1	2	2	2	1	2	...	1	24
Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Common Infectious Diseases.</i>																	
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria : Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Diarrhæal Diseases.</i>																	
Diarrhœa, all forms	...	...	...	...	...	1	...	...	...	1	...	1	...	...	...	...	3
Enteritis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Gastritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Wasting Diseases.</i>																	
Premature Birth	5	1	1	...	7	1	...	...	...	...	...	...	...	...	...	...	8
Congenital Defects	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	1
Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Want of Breast-milk	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atrophy, Debility Marasmus	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
<i>Tuberculous Diseases.</i>																	
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1
Tuberculous Peritonitis : Tabes Mesenterica ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Convulsions	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	...	...	...	...	1	1	1	...	...	...	...	3
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	...	...	...	...	...	...	...	...	...	...	1	...	1	1	...	1	4
Suffocation, overlying	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
Other causes	1	...	...	...	1	...	...	...	1	...	...	...	...	...	...	...	2
	7	1	1	1	10	3	...	...	1	2	2	2	1	2	...	1	24

Population Estimated to middle of 1909—17,394.

Births in the year { legitimate, 260.
 { illegitimate, 6.

Deaths in the year of { legitimate infants, 23.
 { illegitimate infants 1.

Deaths from all Causes at all Ages ... 210.

TABLE V.—*continued.*

County Borough of Croydon—East Ward District.
 INFANTILE MORTALITY DURING THE YEAR 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.		Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths Under One Year.
All Causes.																		
Certified	...	9	4	1	...	14	4	1	1	...	1	3	4	1	1	2	1	33
Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Common Infectious Diseases.</i>																		
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria : Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	2	...	1	...	1	4
<i>Diarrhoeal Diseases.</i>																		
Diarrhoea, all forms	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteritis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	2
Gastritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Wasting Diseases.</i>																		
Premature Birth	...	5	3	...	...	8	1	...	...	...	...	...	...	...	...	...	...	9
Congenital Defects	...	2	...	1	...	3	...	1	...	...	...	...	...	...	...	...	...	4
Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Want of Breast-milk	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
Atrophy, Debility Marasmus	...	1	1	...	...	2	...	...	...	...	...	1	1	...	...	...	...	4
<i>Tuberculous Diseases</i>																		
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Peritonitis:	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tabes Mesenterica	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Convulsions	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
Bronchitis	...	...	...	...	...	...	...	...	...	...	...	1	1	1	...	...	...	3
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	2
Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other causes	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
		9	4	1	...	14	4	1	1	...	1	3	4	1	1	2	1	33

Population Estimated to middle of 1909—19,185.

Births in the year { legitimate, 389.
 illegitimate, 7.

Deaths in the year of { legitimate infants, 31.
 illegitimate infants, 2.

Deaths from all Causes at all Ages ... 189.

TABLE V.—*continued.*

County Borough of Croydon—South Ward District.

INFANTILE MORTALITY DURING THE YEAR 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths Under One Year.
All Causes.																	
Certified	8	1	1	1	11	1	4	1	...	3	1	1	3	1	1	...	27
Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Common Infectious Diseases.</i>																	
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria : Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Diarrhœal Diseases.</i>																	
Diarrhœa, all forms	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Enteritis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Gastritis	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
<i>Wasting Diseases.</i>																	
Premature Birth	7	...	...	1	8	...	...	...	...	...	...	...	...	...	...	...	8
Congenital Defects	1	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	2
Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Want of Breast-milk	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atrophy, Debility, Marasmus	...	1	1	...	2	...	1	...	...	3	...	...	...	...	...	...	6
<i>Tuberculous Diseases.</i>																	
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Peritonitis : Tabes Mesenterica	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	...	...	...	...	...	...	...	1	...	...	...	...	1	...	...	...	2
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Convulsions	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Bronchitis	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	...	...	...	...	...	...	...	...	...	1	...	1	1	1	...	...	4
Suffocation, overlying	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Other Causes	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	8	1	1	1	11	1	4	1	...	3	1	1	3	1	1	...	27

Population Estimated to middle of 1909—20,636.

Births in the year {
 legitimate, 360.
 illegitimate, 11.

Deaths in the year of {
 legitimate infants, 20.
 illegitimate infants, 7.

Deaths from all Causes at all Ages ... 198.

TABLE V.—*continued.*

County Borough of Croydon—South Norwood Ward District.

INFANTILE MORTALITY DURING THE YEAR 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths Under One Year.
All Causes.																	
Certified	16	2	...	...	18	6	2	1	1	3	2	2	...	1	2	1	39
Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Common Infectious Diseases.</i>																	
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles... ..	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria : Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
<i>Diarrhoeal Diseases.</i>																	
Diarrhoea, all forms	...	1	...	...	1	1	...	...	...	...	...	...	...	...	...	...	2
Enteritis (<i>not Tuberculous</i>)	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Gastritis	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1
<i>Wasting Diseases.</i>																	
Premature Birth	10	...	...	...	10	...	...	...	...	...	...	...	...	...	...	...	10
Congenital Defects	5	...	...	...	5	...	...	...	1	...	...	...	...	...	...	...	6
Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Want of Breast-milk	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atrophy, Debility Marasmus	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	2
<i>Tuberculous Diseases</i>																	
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Tuberculous Peritonitis : Tabes Mesenterica	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Convulsions	1	...	...	...	1	...	1	...	...	1	...	...	...	...	...	...	3
Bronchitis	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	...	...	...	...	...	1	...	...	...	2	1	1	...	1	...	...	6
Suffocation, overlying	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
Other causes	...	1	...	...	1	...	...	...	...	...	...	...	...	...	1	1	3
	16	2	...	...	18	6	2	1	1	3	2	2	...	1	2	1	39

Population Estimated to middle of 1909—24,195.

Births in the year { legitimate, 646.
 { illegitimate, 8.

Deaths in the year of { legitimate infants, 36.
 { illegitimate infants, 3.

Deaths from all Causes at all Ages ... 267.

TABLE V.—*continued.*

County Borough of Croydon—Upper Norwood Ward District.

INFANTILE MORTALITY DURING THE YEAR 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths Under One Year.
All Causes.																	
Certified	3	1	...	...	4	2	2	...	...	...	...	...	...	...	...	...	8
Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Common Infectious Diseases.</i>																	
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria : Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Diarrhæal Diseases.</i>																	
Diarrhoea, all forms	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteritis (<i>not Tuberculous</i>)	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Gastritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Wasting Diseases.</i>																	
Premature Birth	3	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	3
Congenital Defects	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	2
Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Want of Breast-milk	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atrophy, Debility, Marasmus	...	1	...	...	1	1	...	...	...	...	...	...	...	...	...	...	2
<i>Tuberculous Diseases.</i>																	
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Peritonitis:	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tabes Mesenterica	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Convulsions	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Causes	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	3	1	...	...	4	2	2	...	...	...	...	...	...	...	...	...	8

Population Estimated to middle of 1909—8,377.

Births in the year { legitimate, 125.
 illegitimate, †26.

Deaths in the year of { legitimate infants, 7.
 illegitimate infants, 1.

Deaths from all Causes at all Ages ... 87.

† Including 23 at 89, Central Hill (Servants' Reformatory).

TABLE V.—*continued.*

County Borough of Croydon—Thornton Heath Ward District.

INFANTILE MORTALITY DURING THE YEAR 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths Under One Year.
All Causes.																	
Certified	5	4	1	...	10	2	3	1	1	4	4	3	3	5	1	5	40
Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Common Infectious Diseases.</i>																	
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	2	3
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria : Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	2
<i>Diarrhæal Diseases.</i>																	
Diarrhoea, all forms	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2
Enteritis (not Tuberculous)	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Gastritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Wasting Diseases.</i>																	
Premature Birth	4	1	1	...	6	...	...	...	...	...	...	...	...	...	...	...	6
Congenital Defects	...	1	...	...	1	...	...	...	...	1	1	...	...	...	...	...	3
Injury at Birth	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Want of Breast-milk	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atrophy, Debility, Marasmus	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
<i>Tuberculous Diseases.</i>																	
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...	2
Tuberculous Peritonitis:	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tabes Mesenterica	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis (not Tuberculous)	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1
Convulsions	...	1	...	...	1	...	1	1	...	...	...	...	...	1	...	...	4
Bronchitis	...	...	...	...	...	1	1	...	...	1	...	...	1	...	1	...	5
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	...	...	...	...	...	...	...	...	...	1	1	1	1	...	...	...	4
Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1
Other Causes	...	...	...	...	...	...	...	...	1	1	1	...	1	...	...	...	4
	4	4	1	...	10	2	3	1	1	4	4	3	3	3	1	5	40

Population Estimated to middle of 1909—18,176.

Births in the year { legitimate, 447.
 { illegitimate, 8.

Deaths in the year of { legitimate infants, 39.
 { illegitimate infants, 1.

Deaths from all Causes at all Ages ... 184.

TABLE V.—*continued.*

County Borough of Croydon—North Ward District.

INFANTILE MORTALITY DURING THE YEAR 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths Under One Year.
All Causes.																	
Certified	12	1	2	3	18	8	2	4	3	2	2	2	5	1	1	2	50
Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Common Infectious Diseases.</i>																	
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles... ..	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1	2
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria : Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	1	...	1	1	...	1	4
<i>Diarrhoeal Diseases.</i>																	
Diarrhoea, all forms	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteritis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	1	1	...	...	1	...	...	...	3
Gastritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Wasting Diseases.</i>																	
Premature Birth	7	1	...	1	9	...	...	...	...	...	...	...	...	...	...	...	9
Congenital Defects	3	...	1	...	4	...	...	1	...	...	...	...	1	...	...	...	6
Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Want of Breast-milk	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atrophy, Debility Marasmus	...	...	...	1	1	2	2	2	2	1	1	...	...	...	1	...	12
<i>Tuberculous Diseases</i>																	
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Peritonitis : Tabes Mesenterica	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Other Tuberculous D'ses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Convulsions	...	...	...	1	1	...	...	...	...	...	...	1	...	...	...	...	2
Bronchitis	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	2
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	...	...	...	...	...	2	...	...	...	...	...	1	...	...	...	...	3
Suffocation, overlying	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Other causes	2	...	...	...	2	3	...	...	...	...	...	...	...	...	...	...	5
	12	1	2	3	18	8	2	4	3	2	2	2	5	1	1	2	50

Population Estimated to middle of 1909—22,634.

Births in the year { legitimate, 671†.
 illegitimate, 67*.

Deaths in the year of { legitimate infants, 43.
 illegitimate infants, 7.

Deaths from all Causes at all Ages ... 259.

†Including 27 at the Workhouse Infirmary.

* " 58 " " "

TABLE VI.

Table showing the number of cases notified and deaths from the principal zymotic diseases for the Year 1909 and ten preceding Years.

	DISEASE.	1909.		1908.		1907.		1906.		1905.		1904.		1903.		1902.		1901.		1900.		1899.	
		Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Notifiable.	Small Pox	..	..	..	..	..	..	4	..	..	..	3	..	14	2	51	11	5	..	1	..	..	..
	Scarlet Fever	727	9	534	5	661	11	425	8	416	11	291	8	215	2	295	6	391	1	432	5	350	3
	Diphtheria and (1) Memb.Croup	356	24	405	37	286	40	304	40	266	25	312	24	259	18	285	29	448	23	187	25	127	17
	(2) Erysipelas	92	3	60	5	73	4	68	2	78	5	68	2	79	4	102	5	79	4	71	6	..	7
	Puerperal Fever	16	5	10	5	7	4	9	2	11	5	9	3	1	8	5	9	3	12	8	7	4	8
	Enteric Fever	21	3	52	5	19	1	34	5	34	4	21	5	32	5	59	9	57	11	56	9	56	8
	Simple Continued Fever	..	..	..	..	..	..	..	..	..	..	..	..	2	..	5	..	..	..	4	..	1	1
	Diarrhoea and Epidemic or	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Zymotic Enteritis	..	19	..	52	..	30	..	142	..	52	..	95	..	37	..	73	..	129	..	88	..	195
	Enteritis	..	26	..	23	..	26	..	61	..	22	..	35	..	14	..	17	..	37	..	25	..	1
Non-notifiable.	Measles	..	21	..	92	..	8	..	37	..	24	..	62	..	26	..	30	..	21	..	20	..	18
	Whooping Cough	..	30	..	29	..	32	..	28	..	31	..	15	..	58	..	31	..	25	..	56	..	40
	Influenza	..	59	..	52	..	31	..	20	..	30	..	27	..	28	..	58	..	37	..	106	..	91
	Bronchitis, Pneumonia, and	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
	Pleurisy	..	323	..	282	..	316	..	218	..	302	..	314	..	247	..	341	..	283	..	367	..	309
	Phthisis	..	152	..	150	..	160	..	173	..	162	..	142	..	151	..	112	..	123	..	135	..	154

(1) Notifiable since May, 1897.

(2) Notifiable since January, 1900.

In the above Table deaths of Non-residents occurring at the Workhouse, Workhouse Infirmary, Borough Hospital, General Hospital, Norwood Cottage Hospital, Purley Cottage Hospital, and "89, Central Hill" (Servants Reformatory), are excluded. Prior to 1903 correction was only made for the first three institutions.

B.—SANITARY WORK OF THE YEAR.

GENERAL SANITARY WORK.

The usual summary is given in Table IX., which gives a fair idea of the various matters engaging the attention of the Sanitary Inspectors.

During the year 5,127 house-to-house inspections were made, as compared with 5,812 in 1908.

The number of single *private* drains dealt with during the year was 55. This work was carried out under the provisions of the Croydon Corporation Act, 1905. The cost of carrying out the necessary works amounted to about £679 12s. 2d., and was borne by the owners instead of by the inhabitants at large.

Most of the nuisances discovered were remedied on receipt of informal notices, but in 255 cases, Council Orders had to be applied for. Of the 255 legal notices, 228 were complied with, and 27 were outstanding at the end of the year. Of the 27 outstanding Council Orders, 19 have been complied with (April 30th, 1910).

No prosecutions had to be undertaken for non-compliance with ordinary nuisance notices.

PAVING OF BACK YARDS.

Eight hundred and fifteen back yards have been paved during the year. There is a considerable increase over the number dealt with in the previous year and is a record of work of considerable sanitary value.

MUNICIPAL COMMON LODGING HOUSE.

This Lodging House affords accommodation for 17 women and 84 men. The number of occupants during the year amounted to 22,428 men and 4,052 women. The average number of lodgers amounted to 61 men and 11 women per night.

The receipts and expenditure (exclusive of sinking fund and interest) for the past five years were :—

		Receipts.					Expenditure.		
		£	s.	d.			£	s.	d.
1905	...	793	17	7	...	582	18	5	
1906	...	804	5	8	...	665	6	10	
1907	...	811	17	9	...	572	9	7	
1908	...	753	0	9	...	624	7	5	
1909	...	750	0	0	...	632	15	7	

OTHER COMMON LODGING HOUSES.

There are ten other houses on the register.

The following Table gives the situation of the ten registered houses and the accommodation provided therein:—

Premises.	No. of Rooms.		Accommodation.
11 & 12, Princess Road ...	12	...	54 men and 8 married couples.
9, Prospect Place (late Bell Yard) ...	6	...	14 men and 5 married couples.
19, 20, 21, 22, 23 & 24 Lahore Road ...	30	...	50 men, 10 women, and 6 married couples.
"The Jolly Bleachers," Union Street ...	13	...	30 men.

Nos. 19 to 24, Lahore Road.—These houses are under one management and worked as one establishment, as also are Nos. 11 and 12, Princess Road. Practically, therefore, only four common lodging houses now remain in the Borough, with a total accommodation for 196 adults, or if we add the Municipal Common Lodging House, a total of five houses with 259 single beds and 19 double beds.

During the year common lodging houses received 516 visits, while 10 houses received night visits.

Minor infringements of bye-laws were detected on 8 occasions, but in no case were they sufficiently serious for legal proceedings to be taken.

HOUSES LET IN LODGINGS.

There are now 64 houses registered under the bye-laws. During the year these houses received 2,029 visits. On no occasion were offences discovered for which prosecutions were necessary.

At the present moment the following houses are registered as houses let in lodgings:—

	Houses.				
Wilford Road...	...	...	...	...	39
Forster Road ...	...	...	...	...	12
Holmesdale Road	...	...	...	...	4
Ely Road ...	...	...	...	...	8
Grant Road ...	...	...	...	...	1
					—
					64

The results of registration and inspection have, on the whole, been satisfactory.

HOUSING OF THE WORKING CLASSES ACT.

One house was represented under Part II., Section 39, as unfit for human habitation. As the result of the notice, the premises were voluntarily reconstructed.

FACTORIES AND WORKSHOPS.

FACTORY AND WORKSHOP ACT.

Section 132 of the Factory and Workshop Act, 1901, provides :—

“ The Medical Officer of Health of every District Council, shall, in his Annual Report to them, report specifically on the administration of this Act in workshops and workplaces, and he shall send a copy of his Annual Report, or so much of it as deals with this subject, to the Secretary of State.”

The following is a summary of the work done under this Act in Croydon during 1909.

FACTORIES.

For the most part, the law relating to Factories is administered by the Home Office. 99 visits were, however, made to Factories, 37 being in reference to sanitary accommodation, 38 in reference to cleanliness of earth closets, 10 in reference to new occupation, four in reference to insanitary condition of messrooms at steam laundries, three in reference to want of w.c. accommodation in a wood yard, three in reference to ventilation of w.c. at a steam laundry, two in reference to smoke, one in reference to the want of screens to w.c.'s at a steam laundry, and one in reference to complaint of effluvium nuisance from a steam laundry. All the defects noted were remedied during the year.

WORKSHOPS.

The number of workshops on the register, the various trades carried on therein, the number of workpeople employed, and the number of visits paid by the Inspector, are shown in Table X.

The following is a list of the various matters requiring attention :—

	Factories.	Workshops	Laundries	Bake-houses.	Work-places.	Out-workers.	TOTAL
Premises requiring repair	1	—	—	1	—	—	2
Cleansing, etc.	1	13	2	8	15	2	41
Insufficient W.C. accommodation	1	2	—	1	—	—	4
Defective ditto	6	12	2	4	—	—	24
Drains stopped	—	1	—	—	—	—	1
Overcrowding	—	1	—	—	—	—	1
Dustbins	—	—	—	1	—	—	1
Paving	—	—	1	—	1	—	2
Insufficient ventilation ..	—	2	—	—	—	—	2
	9	31	5	15	16	2	78

Notices served—

Factories	...	...	...	...	...	...	9
Workshops	...	...	...	...	...	...	30
Laundries	...	...	...	...	...	...	5
Bakehouses	...	...	...	...	...	...	13
Workplaces	...	...	...	...	...	...	16
Outworkers	...	...	...	...	...	...	2
							<u>75</u>

All were remedied during the year with the exception of two which have now been complied with (April, 1910.)

Sixty-seven notices were sent to H.M. Inspector of Factories in accordance with the various requirements of the Act.

HOME WORK.

One hundred and thirteen lists were received from employers containing the names of 281 outworkers residing in the Borough. Seventy-six further names were received from the Medical Officers

of Health of various neighbouring districts, and the names of 48 outworkers residing outside the Borough were similarly despatched to the Medical Officer of Health for the district concerned.

One hundred and sixty visits were paid to outworkers.

BAKEHOUSES.

At the end of the year there were 116 Bakehouses in occupation of which eight were underground. Eight hundred and fifty-six visits were made by the Inspector during the year, and 15 nuisances discovered and abated.

WORKPLACES.

At the end of the year there were 66 workplaces on the register. One hundred and twenty-seven visits to eating-house kitchens have been made, and 16 notices served for cleansing, which have been complied with.

SHOP HOURS AND SEATS IN SHOPS ACTS

entailed 309 visits, and resulted in the discovery of 16 infringements of the Acts, 14 being the non-exhibition of notices, and four the want of seats for female assistants.

Written cautions were sent to the 16 offenders and subsequently complied with.

SMOKE NUISANCES.

Ninety-six observations were made, and 14 persons were cautioned.

DAIRIES AND COWSHEDS.

There were 39 cowsheds on the register at the end of the year, of which 34 were in occupation as against 42 sheds and 40 in occupation in 1908. The registered cowsheds provide accommodation for 614 cows with 800 cubic feet per head. The number of cows in the registered sheds in December was 482.

The number of Cowkeepers in the Borough is now 27 as compared with 28 in 1908.

During the year 61 dairies were removed from, and 51 added to the register, leaving 268 on the register at the end of the year.

One application for registration was refused, as the premises were unsuitable.

Nineteen notices were served during the year for various matters requiring attention on the premises of dairymen, all of which were complied with at the end of the year.

ICE CREAM VENDORS.

All premises where ice cream was known to be made were regularly visited during the season. All were found in a fairly satisfactory condition, and there was no occasion to serve any notices during the year.

MEAT AND FOOD.

The following is a summary of the meat and other articles of food destroyed as unfit for consumption during the year :—

ARTICLES.	Weight in lbs.			Remarks.
	Diseased.	Unsound.	Total.	
Beef	7,371	4,127	11,498	Including 13 carcasses.
Mutton	584	1,097	1,681	„ 32 „
Pork	8,402	390	8,792	„ 26 „
Veal	112	224	336	„ 4 „
Offal	4,305	1,151	5,456	
Fish	...	2,914	2,914	Cod, Haddocks, Bream, Plaice, Dabs, Whiting, Herrings, Crabs, and Escalops.
Other Articles ...	...	3,681	3,681	Apples, Black Currants, Tomatoes, and Rabbits.
Total lbs. ...	20,774	13,584	34,358	Including 75 carcasses.

The whole carcasses condemned were affected as undernoted :—

	Tuberculosis.	Peritonitis.	Pleuri-y.	Enteritis.	Pneumonia.	Jaundice.	Diarrhoea.	Septicaemia.	Nephritis.	Pyæmia.	Emaciated, various causes.	Immatures.	Injured, etc.	Unsound,	Total carcasses.	Total Weight of carcasses in lbs.
Cattle ..	9	1	..	1	..	..	..	..	..	..	2	..	..	..	13	6382
Sheep ..	..	..	1	..	2	..	..	..	..	4	7	..	7	11	32	1426
Pigs ..	16	3	..	..	..	2	..	2	1	..	..	..	..	2	26	4932
Calves ..	..	1	..	..	..	..	1	..	..	..	..	1	1	..	4	336
Totals	25	5	1	1	2	2	1	2	1	4	9	1	8	13	75	13076

In no cases had legal proceedings to be taken against the owner of any diseased or unsound meat. The large quantity destroyed was voluntarily submitted to the judgment of the Inspector, who, in case of doubt, consults the Medical Officer.

OFFENSIVE TRADES.

Only three such trades are now carried on in the Borough, viz., one by a knacker and two by a gut-scraper. The premises have been visited from time to time during the year and found in a satisfactory condition. One of the premises occupied by a gut-scraper was newly erected during the year on land belonging to the Corporation in Factory Lane.

SLAUGHTERHOUSES.

There are 16 registered Slaughterhouses and one licensed Slaughterhouse, in addition to the Municipal Slaughterhouses at Pitlake.

The following are the approximate number of animals slaughtered at Pitlake :—

	Municipal.	Beasts.	Sheep.	Pigs.	Calves.	Total.
Private Slaughterhouses ...	...	271	4,790	17,938	2,060	25,059
Public „ ...	...	308	2,466	2,168	420	5,362
Total ...	...	579	7,256	20,106	2,480	30,421

Summary of totals for last five years :—

	Beasts.	Sheep.	Pigs.	Calves.	Total.
1905	635	7,779	27,679	2,286	38,379
1906	790	8 284	20,080	4,764	33,918
1907	734	7,080	19,099	5,617	32,530
1908	696	6,365	18,525	3,894	29,480
1909	579	7 256	20,106	2,480	30,421
	3,434	36,764	105,489	19,041	164,728

The visits paid by Inspector Low in connection with the milk and meat trades are shown in the following Table :—

NATURE OF PREMISES.	WARD.								TOTAL
	No. of INSPECTIONS.								
	North.	West.	Central	East.	South.	S. Nor.	U. Nor.		
Slaughter-houses ...	...	788	466	22	160	55	46	1537	
Butchers ...	26	186	261	19	42	36	18	588	
Fishmongers ...	18	23	76	24	13	12	10	176	
Markets ...	...	...	51	...	51	...	...	102	
Cowkeepers ...	36	24	20	38	52	8	27	205	
Milk Purveyors ...	66	69	36	69	59	39	51	389	
Other Premises ...	3	2	1	...	...	...	...	6	
TOTAL ...	149	1092	911	172	377	150	152	3003	

FOOD AND DRUGS ACTS.

Table XI. gives the number of samples taken by Mr. Saunders during the year, the results of the analyses and the action taken thereon.

PROSECUTIONS, 1909 :—

Date.	Defendant.	Charge.	Result.	Penalty.	Costs.
				£ s d.	£ s. d.
Jan. 15	A. W. ...	Selling Butter adulterated with 100 per cent. foreign fat ...	Convicted ...	2 0 0	0 13 6
„ 29	J. W. T. ...	Selling Butter adulterated with 71 per cent. foreign fat ...	„	10 0 0	1 17 6
July 7	S. K. ...	Selling Milk 20 per cent. deficient in fat ...	„	5 0 0	3 16 6
Oct. 10	J. G. ...	Selling Milk adulterated with 25 per cent. added water and 15 per cent. deficient in fat ...	„	5 0 0	0 13 6
Nov. 28	H. Bros. ...	Selling Cream adulterated with 0.74 per cent. boric acid.	„	5 0 0	0 12 6
Dec. 23	E. R. J. ..	Selling Butter adulterated with 90 per cent. of foreign fat ...	„	20 0 0	—
„ 31	J. F. ...	Selling Butter adulterated with 80 per cent. foreign fat ...	„	1 0 0	0 5 6
Total ...				48 0 0	7 19 0

In eight cases the samples of milk were slightly below the standard suggested by the Board of Agriculture. Being first offences, the vendors were written to calling their attention to the fact, and asking them for some explanation, further samples being taken subsequently.

Of these eight samples, five contained an excess of water to the extent of an average of 1.4 per cent., and four were deficient in fat to the extent of an average of 6.9 per cent. One sample, it will be noticed, contained additional water, and was also deficient in fat.

Of the two prosecutions for selling adulterated milk, one defendant was a retailer, and the other a farmer and wholesale dealer, the sample being taken in course of delivery. The number of prosecutions for selling adulterated milk is considerably below the average, there being as many as eleven during the preceding year.

During the year eleven samples of cream were submitted for analysis. Of these, eight contained boric acid in varying amounts, three only having no preservative present. One sample which contained an excessive amount of boric acid (51.8 grains per lb.) was the cause of a successful prosecution.

Seven informal samples of Rice were taken during the year of which five were found to be adulterated by facing with small amounts of additional mineral matter varying from 0.05 per cent. to 1.0 per cent. Further attention will be given to this question during this year (1910).

One hundred and twenty-six informal, or test samples of Butter were purchased, of which nine proved to be not genuine. Subsequent official samples were taken in the adulterated instances, when in two cases the fraud was repeated, and prosecutions followed.

In one instance a dairyman was proved to have been carrying on an extensive fraudulent business, and although it was the first time he had been charged the Magistrate remarked that it was a case of wholesale fraud, and inflicted the full penalty of £20. It was only by the Inspector employing as his agent one of the man's regular customers that the defendant was brought to justice.

Thirty-eight informal samples were also taken of various articles. They were certified to be genuine with the exception of one sample of coffee.

The test samples were mostly purchased by a woman in small quantities with other articles, generally during the busy periods in the evenings.

The following table has been prepared from figures kindly supplied by the Borough Analysts (Mr. Lester Reed and Mr. P. G. Sanford):—

Total number of Samples of Milk collected and percentage below standard.

TABLE VII.

1909.

	No. of Samples.	No. below Standard.	Percentage of Samples below Standard.	Average percentage of fat of Genuine Samples.
Taken in course of delivery to Retailers under contract. New Milk	74	3	4.0	3.5
„ „ „ Separated Milk	2	—	—	—
Taken in course of delivery to Consumers under contract. New Milk	4	—	—	3.7
Taken on Milkmen's rounds. Sunday morning. New Milk. ..	79	5	6.3	3.5
Taken on Milkmen's round Sunday morning. Separated Milk ..	6	—	—	—
Taken on Milkmen's rounds. Week day. New Milk	40	1	2.5	3.5
Taken on Milkmen's rounds. Week day. Separated Milk	3	—	—	—
Taken in Dairy Shops	11	1	9.1	3.5

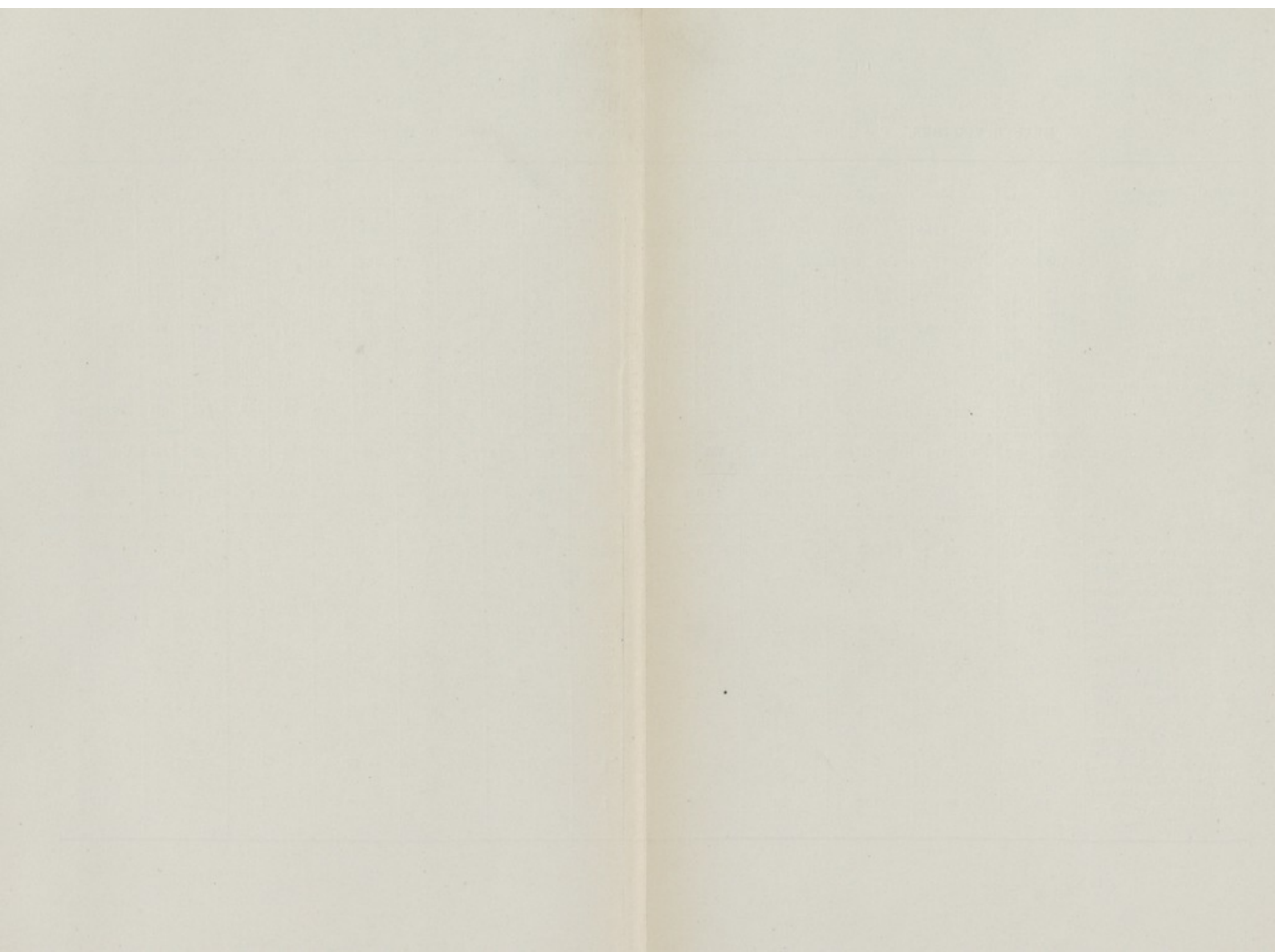
THE WORK OF THE HEALTH VISITORS.

This is set out in detail in Table VIII., and again shows a large mass of useful work, conscientiously and efficiently performed. Owing to the increased demands on this department, it became necessary to make certain modifications in the duties of these officers.—The Senior Health Visitor (Miss Tawney) has now been entrusted with the general supervision of the work with much advantage to all concerned. The districts have also been slightly re-arranged, so as to allow of the Superintendent Health Visitor being present on all occasions when children are presented for special examination at the Town Hall. This part of the work is

TABLE VIII.

HEALTH VISITORS.—The following is a summary of the work done and visits paid by the five Health Visitors.

Visits to Houses where the following Diseases have been reported.	Miss Tawney.				Miss Chapman.				Miss Raw.				Miss Stokes.				Miss Stevens.				TOTALS.			
	School Cases.		Other Cases.		School Cases.		Other Cases.		School Cases.		Other Cases.		School Cases.		Other Cases.		School Cases.		Other Cases.		School Cases.		Other Cases.	
	1st Visits.	2nd Visits.	1st Visits.	2nd Visits.	1st Visits.	2nd Visits.	1st Visits.	2nd Visits.	1st Visits.	2nd Visits.	1st Visits.	2nd Visits.	1st Visits.	2nd Visits.	1st Visits.	2nd Visits.	1st Visits.	2nd Visits.	1st Visits.	2nd Visits.	1st Visits.	2nd Visits.	1st Visits.	2nd Visits.
Measles	55	3	...	...	79	18	...	...	35	3	...	...	85	...	...	...	144	13	...	...	398	37	...	...
German Measles	2	...	...	...	1	1	...	...	...	...	...	...	1	...	...	...	4	...	...	...	8	1	...	...
Mumps	14	4	...	...	19	4	...	...	47	...	...	...	39	...	...	...	23	9	...	...	142	17	...	...
Whooping Cough	97	18	...	...	106	31	...	...	226	3	...	...	121	3	...	...	96	12	...	...	706	77	...	...
Chicken-pox	172	12	...	...	106	9	...	...	107	...	...	...	55	...	...	...	158	15	...	...	598	36	...	...
Sore Throat	158	68	50	103	161	49	...	...	109	10	...	...	140	39	...	...	109	79	70	30	677	245	120	133
Ringworm	82	250	1	...	74	189	...	...	69	131	...	...	90	138	...	...	72	198	...	...	387	906	1	...
Verminous Heads	8	4	1	1	...	...	...	...	17	3	...	...	...	...	...	...	6	...	...	...	31	7	1	1
Verminous Bodies	3	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	6	2	...	...	11	2	...	...
Impetigo Contagiosa	78	129	...	...	111	218	...	...	09	94	...	...	41	37	...	...	46	82	...	...	385	560	...	...
Scabies	11	28	...	...	5	11	...	...	9	5	...	...	2	...	...	...	6	10	...	...	33	54	...	...
Other diseases	89	51	...	...	70	59	42	28	221	82	...	...	123	37	...	...	70	82	34	18	573	311	76	46
TOTALS	769	567	52	104	792	589	42	28	951	331	...	...	697	254	...	...	740	502	104	48	3949	2243	198	180
	1st Visits.		2nd Visits.		1st Visits.		2nd Visits.		1st Visits.		2nd Visits.		1st Visits.		2nd Visits.		1st Visits.		2nd Visits.		1st Visits.		2nd Visits.	
Visits to houses where																								
Infants have been born...	743		596		1101		581		1007		606		1195		393		528		425		4574		2601	
Addresses given re Infants feeding, etc.	...		...		...		...		...		...		5		...		8		...		13		...	
Visits to houses where																								
Infants have died under one year of age	33		...		37		6		68		...		57		...		37		7		232		13	
Cultures taken	345		...		398		...		208		...		237		...		302		11		1490		...	
Phthisis cases visited	18		9		25		14		80		...		25		2		18		6		166		31	
Visits paid to Elementary Schools	59		...		55		...		58		...		46		...		44		...		262		...	
Number of Children prepared for Medical Inspection	1097		116		1024		138		959		...		770		20		954		147		4804		421	
Visits paid to homes to obtain further information concerning children inspected in Schools	31		...		7		2		49		16		93		...		57		61		237		79	
Visits paid to the homes of School Children for purpose of giving advice	105		86		102		62		126		7		97		...		107		57		537		212	



undertaken on behalf of the Education Committee, and entails an increasing amount of work, not only for the Health Visitors, but for the medical staff also.

HEALTH LECTURES.

Thirteen health lectures were given during the year by the Health Visitors. As explained in the Report to the Education Committee, arrangements have now been made to co-ordinate this branch of work with that of medical inspection.

TABLE IX.

Work done by the Sanitary Inspectors during the Year ending
December 31st, 1909.

NATURE OF CASES DEALT WITH.	Insp. Culver.	Insp. Earwicker	Insp. Peck.	Ins. Richardson	Insp. Stanley	Insp. Bull.	Insp. Adams.	Insp. Fulker.	Insp. Vincent.	Insp. Stokes Insp. Brown 1 m	TOTAL.
House to House Inspection	679	630	478	646	..	..	700	..	907	1087	5127
Visits to and inspections of houses where zymotic diseases have occurred	..	5	173	254	..	..	5	1107	6	18	1568
Inspection of Premises where offensive trades are conducted	..	..	..	..	..	..	..	..	..	..	..
Inspections of Factories, Workshops and Outworkers.. .. .	..	..	..	..	..	1214	..	..	..	..	1214
" " Greengrocers, Fishmongers & Ice Cream Shops	96	611	232	189	..	..	2003	..	725	1577	5433
" " Schools.. .. .	..	..	9	8	..	..	..	183	2	15	217
" " Shops	..	..	..	..	..	309	..	..	..	..	309
" " Bakehouses	..	..	..	..	..	856	..	..	..	..	856
" " Yards and Stables	347	946	877	921	..	..	1601	..	944	1627	7263
" " Common Lodging Houses	..	..	..	..	..	516	..	..	..	..	516
" " " " (night visits	..	..	..	..	..	10	..	..	..	..	10
" " Houses let in Lodgings	..	..	..	..	..	..	2009	..	12	8	2029
" " Urinals.. .. .	386	555	784	536	..	..	1191	..	757	1001	5210
Smoke observations	..	..	..	..	..	96	..	..	..	..	96
House drains tested with smoke	197	560	196	265	..	..	81	..	398	482	2179
" " " water	244	408	122	151	..	..	4	..	49	306	1284
" " on application	81	105	72	95	..	..	1	..	11	164	529
" drains re-laid	74	17	19	32	..	..	3	..	65	116	326
" " repaired	41	41	13	45	..	..	4	..	49	47	240
Re-inspections of work in progress	1832	2428	1465	1383	..	..	365	87	1393	2075	11028
Sundry inspections	305	436	536	247	..	102	266	119	277	419	2707
Complaints from public investigated	166	114	91	74	..	..	198	1	140	67	851
Houses disinfected	..	..	..	..	1255	..	..	..	..	..	1255
Articles disinfected	..	..	..	..	9774	..	..	..	..	..	9774
NUISANCES DISCOVERED.											
Premises requiring repair	86	285	61	102	..	3	123	1	61	52	774
" " Cleansing and Whitewashing	89	175	80	86	..	45	170	28	94	48	815
" " Overcrowded	10	4	..	6	..	4	3	1	1	8	37
Drains found defective	80	159	34	57	..	4	9	1	69	165	573
" " stopped	86	86	49	70	..	18	55	7	104	149	624
Defective Sanitary Fittings	272	223	209	190	..	39	51	23	88	173	1268
" Yard Surfaces	98	171	76	47	..	..	96	5	153	169	815
" Eaves and Downspouts	158	198	49	53	..	..	26	2	36	76	598
" Manure Receptacles	2	5	..	1	..	..	..	..	..	11	19
" Urinals	4	..	2	9	..	..	106	3	3	6	133
" Ashbins	125	168	64	64	..	1	140	8	119	88	777
Smoke Nuisances	..	..	..	..	..	14	1	..	..	2	17
Animals improperly kept	..	1	6	..	..	..	3	..	1	34	45
Infringements of Bye-laws and Regulations	..	3	4	..	..	16	..	..	1	16	40
Offensive Accumulations	11	17	15	4	..	..	5	1	7	57	117
Sundry other Nuisances	124	30	62	11	..	65	4	5	1	225	527
Total number of Nuisances	1145	1525	711	700	..	209	792	85	738	1279	7184
Informal Notices served	379	394	360	338	..	96	182	26	312	212	2299*
Informal Notices complied with	381	303	331	332	..	93	167	46	296	224	2173
" " In abeyance	65	54	54	38	..	10	29	2	44	19	315
Number of above for which Statutory Notices issued	75	69	43	30	..	3	..	..	35	..	255

* Not including 444 from the year 1908.

TABLE X.

Workshops on Register, number of Employees, and visits paid during the year.

TRADE.	No. of Workshops.	No. of Employees.	No. of Visits.
Baking Powder Manufacturers ..	1	6	2
Blind Makers	5	8	6
Blacksmiths	8	14	8
Bottlewashers	2	3	2
Bootmakers	18	29	25
Brushmakers	1	1	1
Builders	7	10	6
Cabinet Makers and Upholsterers	18	30	25
Cigarette Maker	1	1	1
Carriage Builders	12	34	24
Chemists	1	2	1
Confectioners	2	9	4
Cycle Works	26	48	40
Carpenters and Joiners	4	10	9
Dentists	7	12	7
Dressmakers and Milliners ..	227	1080	357
Dye Works	1	3	3
Electricians & Engineers	4	9	7
Film Maker	1	5	1
Florist	2	3	2
Glass Works	2	16	4
Greenhouse & Ladder Makers ..	4	14	4
Ironmongers	9	14	9
Laundries	59	276	89
Modeller	2	4	9
Naturalist	1	3	1
Pharmacy Works	1	12	3
Photographers	7	57	15
Piano Maker	1	3	2
Picture Frame Maker	6	16	3
Ragpicker	2	3	2
Rubber Works	1	4	7
Saddlers	5	18	7
Scenic Artist	1	3	2
Shop Fitters	4	7	10
Sign Writers	3	14	7
Stonemasons	3	11	7
Scale Makers	2	4	2
Tailors	54	144	81
Umbrella Makers	3	6	6
Watchmakers	3	8	4
Wig Makers	5	7	4
Wood Merchants	5	15	19
Totals	531	1976	828

TABLE XI.

FOOD AND DRUGS ACTS

Total Number of Samples taken during the year 1909.

Sample of	Total Samples.	Genuine.	Not Genuine.	Prosecu- tions.	Convic- tions.	Cautions.
Milk	208	198	10	2	2	8
Skimmed Milk	5	5	—	—	—	—
Separated Milk	6	6	—	—	—	—
Butter	177	163	14	4	4	1
Coffee	11	10	1	—	—	—
Cream	11	10	1	1	1	—
Rice	7	2	5	—	—	—
Sausages	4	4	—	—	—	—
Pickles	4	4	—	—	—	—
Citric Acid	4	4	—	—	—	—
Tartaric Acid	4	4	—	—	—	—
Cream of Tartar... ..	4	4	—	—	—	—
Dripping	3	3	—	—	—	—
Epsom Salts	2	2	—	—	—	—
Lard	1	1	—	—	—	—
Vinegar	1	1	—	—	—	—
Bread	1	1	—	—	—	—
Tapioca	1	1	—	—	—	—
Citrate of Soda	1	1	—	—	—	—
	455	424	31	7	7	9

TABLE XII.

Particulars of Samples taken during the ten years 1900-1909 inclusive :—

Year.	Number of Samples taken.	Number Genuine.	*Number Adulterated.	Percentage of Adulterated.	Prosecutions.	Total amount of Fines and Costs imposed.
						£ s. d.
1900	246	230	16	6·5	5	7 5 0
1901	299	274	25	8·3	3	6 6 0
1902	291	261	30	10·4	9	23 1 0
1903	294	268	26	8·8	4	5 16 0
1904	354	317	37	10·5	6	30 15 0
1905	356	320	36	10·0	8	36 13 6
1906	400	351	49	12·3	6	15 12 0
1907	448	413	35	7·8	13	86 8 0
1908	438	384	54	12·0	19	40 12 6
1909	455	424	31	6·8	7	55 13 0

* The term adulterated includes samples found to be not up to standard.

TABLE XIII.
METEOROLOGICAL RECORD—YEAR 1909.

Rain Gauge 5-in. in diameter, 1-ft. above ground, 146-ft. above sea level. Temperature taken in the shade of a Stevenson's Screen, 4-ft. from the ground. The Ground Thermometer is suspended in an iron tube, the bulb being 4-ft. *below* the level of the ground.

Months	Temperature of Air during the Month.				Mean Temperature of Air.	Difference from average 50 years at Greenwich.	Mean Temperature of Ground at 4-ft.	Mean Temperature of the Dew Point.	Mean Tensional Difference between Ground and Dew Point at 9 a.m. and 3 p.m.	Rainfall.		
	Highest.	Lowest.	Mean of							No. of Days on which Rain fell.	Amount collected in Inches.	Difference from average 85 years Greenwich
			All Highest.	All Lowest.								
January ..	49°	21°	41°·1	34°·2	37°·6	— 0°·9	43°·1	35°·1	in. 0·74	13	in. 1·20	in. — ·61
February ..	56°	22°	42°·7	31°·0	36°·8	— 2°·7	40°·4	31°·8	·52	6	·71	— ·82
March ..	59°	13°	43°·4	33°·7	38°·5	— 3°·2	39°·3	36°·8	·22	23	3·33	+ 1·82
April ..	72°	28°	59°·0	39°·5	49°·2	+ 2°·0	44°·6	43°·6	·11	13	1·95	+ ·35
May ..	83°	34°	64°·2	42°·4	53°·3	+ 0°·2	50°·0	46°·9	·39	9	1·07	— ·88
June ..	70°	36°	60°·1	48°·2	54°·1	— 5°·3	53°·0	50°·9	·30	20	2·99	+ 1·03
July ..	78°	45°	67°·2	53°·1	60°·1	— 2°·4	55°·6	60°·9	·92	18	2·89	+ ·44
August ..	89°	45°	71°·8	53°·1	62°·4	+ 0°·8	58°·4	58°·4	·00	12	1·85	— ·47
September	72°	39°	60°·9	48°·4	54°·6	— 2°·6	55°·8	54°·2	·25	20	2·99	+ ·75
October ..	66°	29°	57°·1	47°·7	52°·4	+ 2°·4	55°·2	51°·4	·57	24	4·34	+ 1·63
November	55°	26°	46°·1	35°·7	40°·4	— 2°·8	47°·5	39°·7	·85	16	·98	— 1·30
December	53°	22°	43°·4	35°·1	39°·2	— 0°·5	43°·2	39°·5	·37	21	3·08	+ 1·12
Means and Totals for the Year.	89°	13°	54°·7	41°·9	48°·3	— 1°·2	48°·8	45°·8	0·43	195	27·38	

The Rainfall for the Year was 1·61 inches above, and the number of days on which rain fell 35 above the average of 40 years at Croydon.

GEO. CORDEN, F.R. Met. Soc.,
Croydon.

TABLE XIV.
CROYDON BOROUGH HOSPITAL.

Detailed Analysis of Expenditure under all Heads for the Year ending March 25th, 1909, and four preceding Years.

Year ending March.	Average No. of Patients.	Provisions.		Alcohol.		Surgery and Dispensary.		Domestic, including Coal and Gas.		Establishment and Miscellaneous Charges.				Salaries and Wages.		Total Average Cost per Bed.	Sinking Fund and Interest.	Total Cost per Patient, including Sinking Fund and Interest.	
		Total.	Average Cost per Bed occupied.	Total.	Average Cost per Bed occupied.	Total.	Average Cost per Bed occupied.	Total.	Average Cost per Bed occupied.	Establishment Charges and Repairs.	Miscellaneous Charges.	Total.	Average Cost per Bed occupied.	Medical Dispensing, Nursing & other.	Average Cost per Bed occupied.				Total Ordinary Expenditure.
		£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	
1905	85	2297 6 7	27 0 6	16 13 8	4 0	744 4 1	8 15 1	1160 14 9	13 13 1	639 4 2	200 15 10	840 0 0	6 17 8	1592 6 3	18 14 8	6651 5 4	78 5 0	2272 3 1	104 19 7
1906	89	2529 0 0	28 8 4	27 16 6	6 3	812 1 9	6 17 6	1414 1 8	15 17 6	1097 19 10	262 12 0	1360 11 10	15 5 6	1995 2 7	22 8 4	7938 14 4	89 3 11	2272 3 1	114 14 6
1907	90	2254 19 6	25 5 1	13 17 7	3 1	536 16 11	5 19 3	1299 16 1	14 6 10	694 13 3	156 16 8	851 9 11	9 11 5	1920 6 0	21 1 6	6877 6 0	76 3 5	2272 3 1	101 8 4
1908	121	2588 1 7	21 7 9	5 16 0	0 11	393 16 3	3 5 4	1493 0 9	12 6 9	1074 16 9	197 9 9	1272 6 6	10 10 4	1997 17 1	16 10 3	7752 8 2	64 1 4	2272 3 1	82 16 11
1909	133	2586 11 8	19 9 0	13 5 10	2 0	501 10 8	3 15 4	1697 9 4	12 15 3	1260 10 11	128 18 10	1389 9 9	10 9 0	2361 9 5	17 15 1	18549 16 8	64 8 5	2101 10 9	80 1 8

During the year 1908-9 the sum of £3,385 17s. 5d. was received from other Local Authorities.

C.—REPORT OF THE WORK OF THE BOROUGH HOSPITAL.

The total nominal accommodation at the Borough Hospital amounts to 146 beds.

In 1909 half of the accommodation in Block F had to be allotted to nurses on account of the insufficient number of beds in the Administrative Block. Owing to a considerable increase in the prevalence of scarlet fever the hospital was under great pressure during the late summer and early autumn. A certain amount of relief was obtained by the transfer of 26 acute cases to the London Fever Hospital and six convalescents to the Mary Wardell Convalescent Home, Stanmore. In spite of that, there were many weeks during which the hospital accommodation was unduly strained. It is, therefore, satisfactory to report that during the year the Council approved of plans for an enlargement of the hospital, and sanction has since been obtained for the necessary loan.

The following Table shows the Highest and Lowest number of beds occupied on any one night during each month of the year 1909 :—

TABLE H. 1.

Month.	Beds Occupied.		Month.	Beds Occupied.	
	Highest.	Lowest.		Highest.	Lowest.
January ..	165	146	July	152	139
February ..	164	151	August	143	95
March	146	130	September ..	128	93
April	138	124	October	156	125
May	149	128	November ..	151	102
June	155	137	December ..	128	105

During 1909 the average daily number of cases under treatment amounted to 142·4 as compared with 127·1 in the previous year.

The following Table gives the total number admitted from the Borough and other Districts during the year 1909 :—

TABLE H. II.

Districts.	Remaining at end of 1908.	Admitted during 1909.	Discharged during 1909.	Died during 1909.	Remaining at end of 1909.
*The Croydon Union, cases admitted from Penge	—	1	1	—	—
Penge Urban D.C., non-pauper cases	15	113	113	6	9
The Borough of Kingston upon Thames	16	6	21	1	—
The Borough of Croydon	127	836	813	32	118

* In the above table cases included under the Croydon Union are only those pauper patients who have contracted the disease in Penge. Patients resident in the Infirmary or Workhouse who become infected whilst residents in these Institutions are reckoned as Croydon cases.

The total number of patients admitted was 956 as compared with 941 in 1908.

The following Table shows the comparative admissions during 1909 and previous years.

TABLE H. III.

	Cases admitted during 1904.	Cases admitted during 1905.	Cases admitted during 1906.	Cases admitted during 1907.	Cases admitted during 1908.	Cases admitted during 1909.
Scarlet Fever	235	352	338	562	497†	608‡
Diphtheria	233	178	239	249	354	292
Enteric Fever	12	15	20	10	59	11
Puerperal Fever	1	—	—	—	—	—
Pulmonary Phthisis	1	—	—	1	—	—
Other diseases	51	64	47	42	31	45
Total	533	609	644	864	941	956

† Includes five cases sent in as Diphtheria.

‡ Including 26 L.F.H. cases.

The following Table gives the number of patients admitted for each disease, the number discharged or died, and average duration of stay in hospital and probable detention in hospital, for the year 1909 :—

TABLE H. IV.

Disease.	Remaining at end of 1908.	Admitted during 1909.	Discharged during 1909.	Died during 1909.	Remaining at end of 1909.	Average Residence in days.		Probable detention in Hospital in days.	
						Fatal Cases.	Non-Fatal Cases.	Non-Fatal Cases.	Fatal Cases.
Scarlet Fever	89	608	589	11	97	18·2	58·1	47	11
Cases admitted to Hospital as but subsequently found not to be Scarlet Fever	—	6	6	—	—	—	14·3	7	—
Diphtheria	64	292	306	24	26	14·2	54·	44	4
Cases admitted to Hospital as but subsequently found not to be Diphtheria	—	21	18	3	—	4·6	6·9	6	1
Enteric Fever	5	11	11	1	4	—	62·7	55	—
Cases admitted to Hospital as but subsequently found not to be Enteric Fever	—	4	4	—	—	—	6	5	—
Other Admissions	—	14	14	—	—	—	22·6	22	—
Total	158	956	948	39	127	—	—	—	—

The following Table gives the fatality from each disease :—

TABLE H. V.

	1907.		1908.		1909.
Scarlet Fever ...	2·5	...	1·6	...	1·8
Diphtheria ...	13·6	...	8·5	...	7·4
Enteric Fever ...	9·5	...	3·6	...	8·3
Other diseases ...	4·8	...	6·3	...	6·4
All cases ...	6·1	...	3·5	...	3·9

4.—Under "Other Diseases" are included the following :—

Disease.	No. of Cases.		Result.
Cases notified as Scarlet Fever but not Scarlet Fever—Total	6	...	
Erythema	1	...	Discharged.
Varicella and Erythema ...	1	...	"
No disease observed ...	4	...	"
Disease.	No. of Cases.		Result.
Cases admitted as Diphtheria and found not to be Diphtheria—Total	21	...	
Measles and Laryngitis ...	2	...	Discharged.
Tonsillitis	12	...	"
Slough after Tonsillotomy	1	...	"
Bronchitis	1	...	"
Retro-pharyngeal Abscess	1	...	"
Laryngitis	1	...	"
Measles and Broncho Pneumonia	2	...	Died
Congenital Syphilis ...	1	...	Discharged.
Di ease.	No. of Cases		Result.
Cases admitted as Enteric Fever but found not to be — Total	4	...	
Pelvic Peritonitis...	1	...	Discharged.
Pleural Effusion	1	...	"
Ulcerative Colitis...	1	...	"
Enteritis	1	...	"
Disease.	No. of Cases.		Result.
Other admissions—Total	14	...	"
Infant at Breast	1	...	Discharged.
Acute Rheumatism	2	...	"
Influenza	10	...	"
Cerebral irritation	1	...	"

TABLE H. VI.

Illness amongst the staff, 1909 :—

1 Scarlet Fever	...	...	3 cases.
2 Diphtheria	...	...	1 case.
3 Other illnesses requiring treatment			12 cases.
Total	...	...	16 cases.

AMBULANCE.

During the year 936 journeys were made in removing patients to the Borough Hospital, including 99 journeys to Penge and Anerley. The ambulance also made sundry other journeys in connection with the removal of patients to their homes, in addition to the collection of parcels from the Town Hall and other Offices.

The sum of £82 1s. 6d. was received from the Penge Urban District Council and the Croydon Guardians for ambulance services rendered during the year.

MAINTENANCE OF BUILDINGS.

During 1909 a new vertical steam boiler was erected in place of the old defective boiler, and a new boiler house erected at the Administrative Block.

Various minor repairs to rain water guttering and other parts of Buildings have been carried out.

All Wards cleaned down.

D.—REPORT ON THE BOROUGH LABORATORY.

For the following account of the work of the laboratory I am indebted to Dr. Parsons, the Borough Bacteriologist and Senior Resident Medical Officer of the Borough Hospital.

For the first few years of its existence comparatively little use was made of the laboratory as is shown by the following table :—

Year.	Specimens examined for Diphtheria, Enteric Fever, and Tuberculosis.					
	Borough Cases (outside the Hospital).			Hospital Cases.		Totals
1897	...	85	...	not recorded	...	—
1898	...	125	...	not recorded	...	—
1899	...	not recorded	...	not recorded	...	—
1900	...	199	...	248	...	447
1901	...	784	...	885	...	1669
1902	...	698	...	859	...	1557
1903	...	1089	...	1322	...	2411
1904	...	2027	...	2494	...	4521
1905	...	2276	...	4164	...	6440
1906	...	2257	...	2485	...	4742
1907	...	2105	...	5154	...	7259
1908	...	3621	...	4582	...	8203
1909	...	3247	...	4876	...	8123

The total number of specimens examined in 1909 is somewhat smaller than in 1908, thanks to the diminished prevalence of diphtheria and enteric fever.

CLINICAL BACTERIOLOGY.

The following is a summary of the number of specimens examined for suspected diphtheria, enteric fever, or tuberculosis:—

	Suspected Diphtheria.		Serum reaction for suspected Enteric Fever.		Sputum for suspected Tuberculosis.	
	1908		1908		1908	
	Borough	Hospital.	Borough	Hospital	Borough	Hospital
	2942	4857	42	14	263	5
Total ..	7799		56		268	

DIPHTHERIA.

During 1909, 7799, specimens were examined in the Laboratory. Of these specimens about one-seventh (1,114) were primary examinations for diagnostic purposes. The remaining specimens were from "contacts" who had been exposed to diphtheria or from the throats of convalescents. The latter were examined with a view of ascertaining whether the bacillus of diphtheria was absent from the throat or nose. In some cases this organism was very persistent, requiring many examinations extending over many weeks before it was found to have disappeared.

Every case of scarlet fever admitted to the Hospital was also examined bacteriologically, in order to ascertain if diphtheria was present. Of these, 7.6 per cent. were found, on admission, to have bacilli indistinguishable from diphtheria in the nose, while 1.8 per cent. had similar bacilli in the throat. All these patients were specially isolated in order to guard against the introduction of diphtheria into the scarlet fever wards.

A large number of the specimens examined were from cases of sore throat or nasal discharge occurring in children attending elementary schools. In some instances these "sore throats" turned out to be mild cases of diphtheria in which infection persisted for many weeks or months though the children showed very little, if any, signs of ill-health.

ENTERIC (TYPHOID) FEVER.

The total number of specimens from suspected enteric fever patients amounted to 56, of which were received 42 from medical men in the borough, and 14 examinations were made of patients in the Borough Hospital.

The following table gives a summary of the serum re-actions obtained in the laboratory during 1909 :—

RESULTS OF EXAMINATIONS FOR DISEASES SIMULATING ENTERIC FEVER.

1909.					Examinations for Borough.			Examinations for Hospital.			Total.		
					Agglutinative Reactions.			Agglutinative Reactions.			Agglutinative Reactions for all purposes.		
					+	—	Total	+	—	Total	+	—	Total
January	...	...	...	...	2	2	4	—	—	—	2	2	4
February	...	...	...	...	1	4	5	—	1	1	1	5	6
March	...	...	...	...	—	1	1	—	—	—	—	1	1
April	...	...	...	...	—	2	2	—	—	—	—	2	2
May	...	...	...	...	—	—	—	—	1	1	—	1	1
June	...	...	...	...	—	1	1	—	—	—	—	1	1
July	...	...	...	...	—	5	5	—	—	—	—	5	5
August	...	...	...	...	—	2	2	—	2	2	—	4	4
September	...	...	...	...	2	5	7	8	—	8	10	5	15
October	...	...	...	...	1	—	1	—	—	—	1	—	1
November	...	...	...	...	4	6	10	—	1	1	4	7	11
December	...	...	...	...	1	3	4	—	1	1	1	4	5
First Quarter	...	...	...	...	3	7	10	—	1	1	3	8	11
Second „	...	...	...	...	—	3	3	—	1	1	—	4	4
Third „	...	...	...	...	2	12	14	8	2	10	10	14	24
Fourth „	...	...	...	...	6	9	15	—	2	2	6	11	17
Total	...	...	...	...	11	31	42	8	6	14	19	37	56

TUBERCULOSIS.

The number of specimens examined during the year amounted to 268, 5 of these being from patients already in the Hospital. Out of the total number of examinations 65 were found to contain the tubercle bacillus.

The following table shows the number of specimens examined for the detection of B. Tuberculosis during 1909 :—

RESULTS OF EXAMINATIONS FOR TUBERCULOSIS.

1909.					Examinations for the Borough.			Examinations for the Hospital.			Total.		
					All Examinations.			All Examinations.			All Examinations.		
					+	—	Total	+	—	Total	+	—	Total
January	...	...	...	...	7	9	16	—	2	2	7	11	18
February	...	...	...	...	4	24	28	—	—	—	4	24	28
March	...	...	...	...	6	24	30	—	—	—	6	24	30
April	...	...	...	...	7	22	29	—	—	—	7	22	29
May	...	...	...	...	8	13	21	—	1	1	8	14	22
June	...	...	...	...	5	18	23	—	—	—	5	18	23
July	...	...	...	...	5	10	15	—	—	—	5	10	15
August	...	...	...	...	2	8	10	—	—	—	2	8	10
September	...	...	...	...	9	17	26	—	1	1	9	18	27
October	...	...	...	...	4	15	19	—	1	1	4	16	20
November	...	...	...	...	4	14	18	—	—	—	4	14	18
December	...	...	...	...	4	24	28	—	—	—	4	24	28
First Quarter	...	...	...	...	17	57	74	—	2	2	17	59	76
Second „	...	...	...	...	20	53	73	—	1	1	20	54	74
Third „	...	...	...	...	16	35	51	—	1	1	16	36	52
Fourth „	...	...	...	...	12	53	65	—	1	1	12	54	66
Total	...	...	...	...	65	198	263	—	5	5	65	203	268

RINGWORM.

The number of specimens examined for the presence of this parasite amounted to 20, of this number 8 were from patients in the Hospital. Of the total examinations 14 showed the presence of ringworm spores or mycelium and the majority were of the small spore variety. The number of specimens now examined at the laboratory is not so great as formerly, many other specimens being now examined at the Town Hall.

MISCELLANEOUS EXAMINATIONS.

Various other bacteriological and microscopical examinations were made during the year. These included the examinations of a large number of specimens of urine; of faucial exudation for leptothrix; of brain tissue for meningo-coccus; of sputum for pneumo-coccus; and strepto-coccus; and of various other specimens of blood and morbid fluids.

PREPARATION OF MATERIAL.

In addition to the actual examinations of specimens much time has been occupied in the preparation of material needed for bacteriological work. Thus suitable "outfits" for the transmission of specimens to the laboratory in accordance with the requirements of the Postmaster General required careful preparation. 3089 Diphtheria, 292 Tuberculosis, 124 Enteric—Total 3505, of these "outfits" were supplied during the year for use by the Public Health staff and the medical men of the borough.

The making of serum culture media commenced in 1906 for use in the laboratory has been continued this year. The blood is obtained from the Public Slaughter House and prepared for use by the laboratory attendant (E. Hasler) under the direction of the medical officers. 934 dozen tubes of blood serum were prepared in 1909.

The material prepared in this way during 1909 if reckoned at the commercial price, viz., 3s. 6d. per dozen tubes, would have cost £163 9s. 0d. In this way a great saving is made in the working expenses of the laboratory.

E.—REPORT TO THE EDUCATION COMMITTEE.

I beg leave to present the following report, for the year 1909, on the work carried out by the staff of the Public Health Department, in connection with the Public Elementary Schools of the borough.

This is the sixth annual report which I have submitted to the Committee, and the second furnished in accordance with the requirements of the Board of Education.

The scope and arrangement of this report are similar to that adopted for the year 1908, which followed generally the suggestions of Circular 596 of the Board of Education. Though considerable progress has been made during the year, much time has again been spent in elaborating our methods and in improving our organisation.

SCHOOL BUILDINGS.

On December 31st, 1909, there were within the Croydon area :—

- 19 Provided Schools, including 55 departments, with recognised accommodation for 20,017 children, and
- 14 Non-Provided Schools, including 34 departments, with accommodation for 5,345 children.

The total provision for Elementary School children in the borough therefore amounted to 33 schools, with 89 departments and accommodation for 25,362 children.

The number of children on the register on December 31st, 1909, was 24,150.

During 1909, the St. James's School (non-provided) was closed, and Tavistock Grove School (provided) opened in substitution.

Tamworth Road School, which was reported in 1903 to be so unsatisfactory as to require closure, is still in use, but will eventually be re-built when the general scheme for re-organisation of the schools in this part of the borough matures.

Tavistock Grove School, which was opened in September, 1909, affords accommodation for 868 children. In the main this school is similar in type to the last five central hall schools designed for the Local Education Authority by Mr. Carter Pegg, but provision is

made for two departments only, namely juniors and "mixed," instead of the three groups for which accommodation is provided in the older schools. Though the building is similar in essentials to some of its predecessors, many minor improvements have been introduced, which have added to its utility as well as rendered it more attractive. The work-room, provided at small expense by making use of some of the space under the roof, is a specially satisfactory feature.

It may not be out of place to emphasize the fundamental importance of gradually modifying the curriculum so as to allow a greater and greater share of handwork being undertaken in all our schools. For this there is a sound physiological and medical basis. Not only is manual dexterity a valuable asset to every future citizen, but it is now generally recognised that mental development is to a considerable degree dependent on the education and training of that part of the nervous system which controls the muscles, and especially the muscles which carry out finer movements, such as those of the hands. Not only are "things done," remembered, and understood more thoroughly than what is simply heard or seen, but the final result is of considerably higher educational value. There is also reason to believe that the too implicit reliance on training through the eye and ear, which is so characteristic of the ordinary curriculum, makes for nervous instability and that lack of resourcefulness that is so often found in children who have done moderately well at book work.

EQUIPMENT.

Owing to lack of funds no further steps have been taken to re-desk the older schools. This is unfortunate, as in several instances the existing desks are unsuitable and are of such uniform size that appropriate seats cannot be found for children that do not happen to be of average size. Under present circumstances one cannot even meet the difficulty by suggesting the provision of single adjustable desks for those children who show signs of incipient spinal curvature.

SANITARY CONVENIENCES.

These have recently been inspected. The thirty-four schools in the borough are provided with:—

48 ranges of automatically flushed troughs.

8 ranges of automatically flushed separate closet pans.

39 ranges of wash-down closets with separate flushing cisterns to each closet.

The last arrangement is the only absolutely satisfactory one, and is now adopted in all new schools. The automatically flushed troughs are from many points of view unsatisfactory, and should be replaced as occasion offers. The troughs at Mitcham Road, Beulah Road, Birchanger Road, and Sydenham Road are the least satisfactory, and should receive attention at an early date. As previously reported, flushing apparatus is required for the urinals at Mitcham Road Boys', Beulah Road Infants', and Dering Place Infants' Schools. At the latter, the entrance from the playground might with advantage be screened from the public street.

During the past few months enquiry was made by the Medical Officer, Local Government Board, as to our experience with ordinary wash-down closets in infant schools. Objection had been raised in certain quarters to the provision of such appliances in infant schools on account of the alleged difficulty in getting young children to make proper use of the flushing apparatus. In order to clear up this point an inspection was made of the condition of the lavatories at all the infant schools where wash-down closets had been fitted. For the sake of comparison, the condition of similar closets in the boys' and girls' schools was also noted.

The following is the result of the inspection :—

SCHOOL LAVATORIES.

Schools with a separate flushing cistern to each W.C.

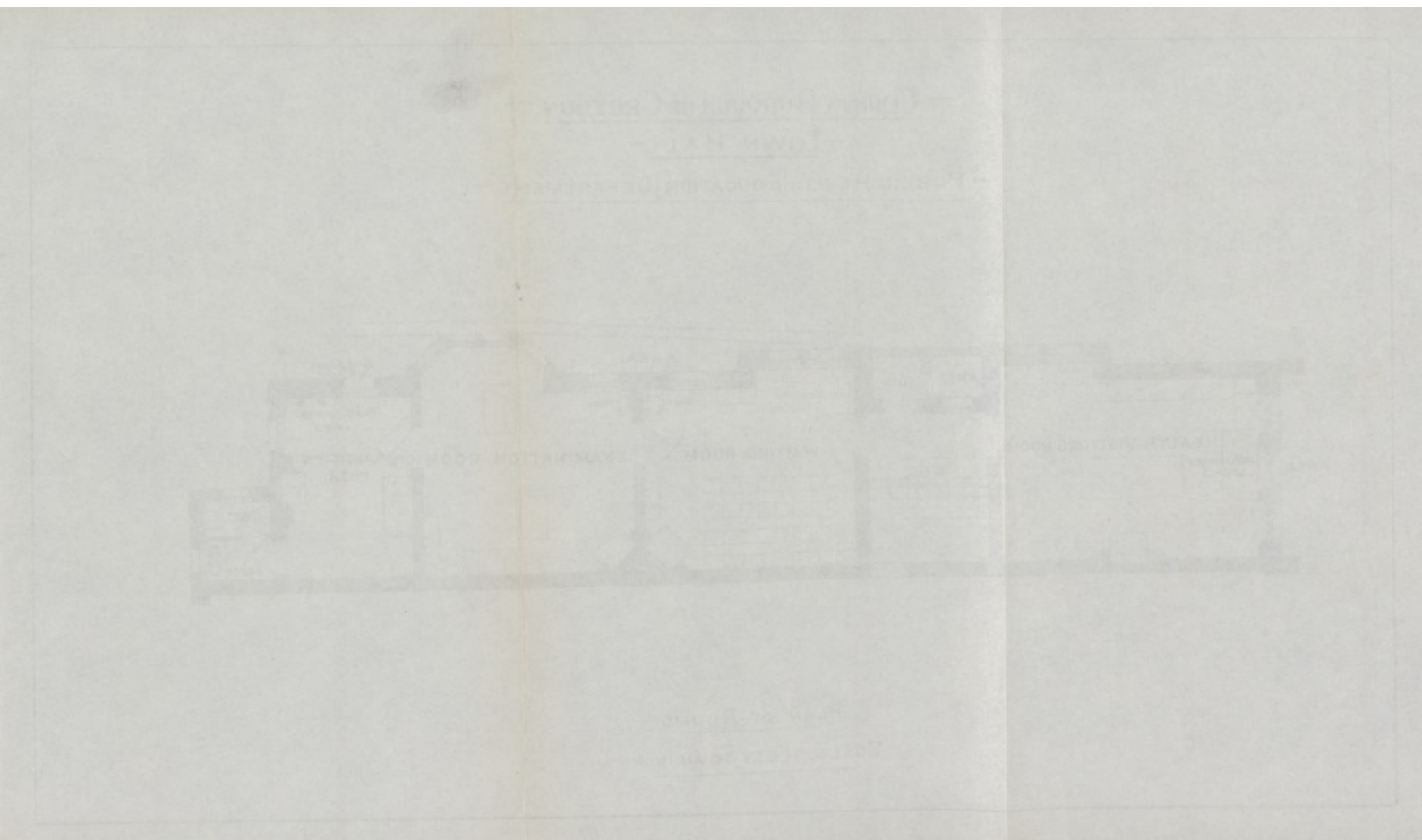
School.	Total pans of above kind in <i>Infants'</i> Dep'tm't	Condition of pans (How many used and not flushed).	Total pans of above kind for <i>Girls.</i>	Condition of pans (How many used and not flushed).	Total pans of above kind for <i>Boys.</i>	Condition of pans (How many used and not flushed).
St. Michael's ...	2	...	5	2 urine	2	...
Holy Trinity ...	4	...	5	2 urine	2	...
St. Mark's ...	4	...	2	1 urine	...	...
Woodside ...	4	2 soil, 1 urine	...	...	3	...
Tavistock Grove ...	10	...	7	1 soil, 2 urine	6	...
All Saints' ...	3	1 soil, 2 urine	6	2 urine	...	...
Winterbourne Road	10	1 soil	10	2 soil	7	...
Ingram Road ...	9	6 urine	8	2 soil, 4 urine	...	...
Princess Road ...	8	1 urine	5	...	4	...
Davidson Road ...	7	2 soil	14	...	5	2 soil
Bynes Road ...	8	1 soil, 3 urine	9	2 soil, 7 urine	7	3 soil
Totals ...	69	7 soil, 13 urine	71	7 soil, 20 urine	36	5 soil

It will be seen that in all three departments better use might have been made of the flushing apparatus, and it would be well if the attention of the head teachers and the caretakers were called to this point. There was, however, no evidence that any special difficulty arose in the infant schools. As a matter of fact the smaller children require personal supervision when using the lavatories, whatever form of apparatus is installed.

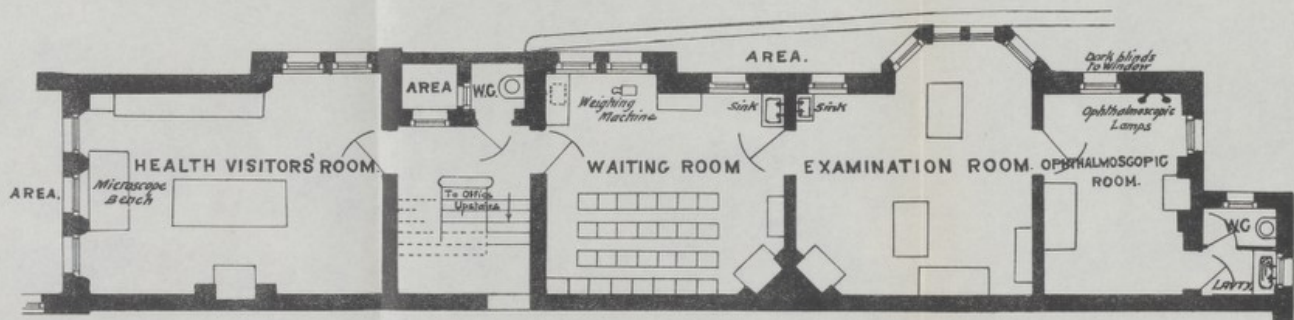
ORGANIZATION AND CO-ORDINATION OF SCHOOL AND OTHER PUBLIC HEALTH WORK.

The general organization remains the same as in 1908. The medical officer of health is school medical officer, and is assisted by one whole time assistant medical officer (Dr. Sophie Jackson), together with a part time ophthalmic surgeon, who devotes two half-days per school week to the work. The whole time of one clerk is also taken up with school duties, as is also half the time of each of the health visitors. Assistance is also rendered, when required, by other members of the public health staff, and especially by the senior resident medical officer at the borough hospital, who is not only responsible for the examination of the large number of bacteriological specimens sent from school children, but also assists me, when required, in the examination of children at the Town Hall on Wednesday and Saturday mornings. For the present, medical inspection is limited to those children for whom the present code compels us to make provision, together with a variable number of children presented for special examination at the suggestion of the teachers, attendance officers, attendance committee, or magistrates.

The children whom the code at present requires us to inspect are those about to leave school and newly admitted infants. It is found in practice that about 20 children can be inspected at a school session, and it is therefore undesirable to hold an inspection until as many as 20 children have matured for inspection. According to the standing orders, the head teachers should give notice when this point has been reached, and it would have been a great convenience if this information had been forwarded more regularly than at present, as it would then have been possible to map out the work of the staff to greater advantage. Until these notices are received we do not know the exact number of children who are waiting inspection, and I am, therefore, unable to foretell how many school sessions will be taken up by each school. It therefore sometimes happens that preliminary arrangements are made for holding inspections for which there are not sufficient children to occupy the whole of the time allotted to the



— COUNTY BOROUGH OF CROYDON —
 — TOWN HALL —
 — PUBLIC HEALTH EDUCATION DEPARTMENT —



PLAN OF ROOMS.
 SCALE, 8 FEET TO AN INCH

school. Though any superfluous time can in most instances be profitably spent in other ways, by the re-examination of special children or in other investigations, the present system has the disadvantage of reducing the average number of children inspected in a school session.

After Easter, 1910, it is hoped that this difficulty will be met by allotting definite days from Easter to the end of July to the various schools in proportion to their number on the registers.

During the past year the ophthalmic surgeon has carried out his work in the schools as heretofore. During the latter part of the year the Council granted further office accommodation to the Public Health Department, and it thus became possible to allot a special suite of rooms for use in the examination of school children, and from January, 1910, arrangements were made to modify the work of the ophthalmic surgeon in accordance with the suggestions made in previous reports to the Committee. All the schools in the borough are now divided into two groups of about equal size. At those nearest the Town Hall the preliminary examination of the sight is made by the school medical officer or his assistant, and any children requiring special examination by the ophthalmic surgeon are referred to him at the Town Hall, where he is in attendance on Tuesday mornings. Eye work in the more distant schools is carried out by Mr. Wray as heretofore. Some of the details of administration connected with this department of the school work are not yet fully worked out, but the general features of the scheme prove satisfactory. After twelve months' experience we shall probably be able to decide whether it will be possible to get the children from the more distant schools to attend the Town Hall or whether a second centre should be established for the examination of the eyes of children who live at a distance from the Town Hall.

OFFICE ACCOMMODATION.

The additional rooms allotted to the public health department have given us very satisfactory accommodation for school purposes, a suite of four rooms being specially set aside for this purpose. The general arrangement of the rooms is shown on the accompanying block plan. The rooms are situated in immediate proximity to my own office, and have a separate entrance from the street in Mint Walk, thus rendering it unnecessary for the children to use the main entrances of the Town Hall.

The following accommodation has been provided :—

- (1). On the east side of the entrance a convenient room has been allotted to the health visitors for clerical work. A bench has also been fitted in this room for microscopic work, more especially for use in connection with the examination of diseased hairs for ringworm spores. Two of the health visitors have been trained to prepare the specimens for examination, and a considerable saving in time has ensued, as cases of doubtful diagnosis can often be promptly dealt with.
- (2). Lavatory accommodation for school children has been provided under the entrance steps.
- (3). To the west of the entrance a suite of three rooms provides a waiting room for parents and children, a light and convenient examination room wherein two or more medical officers can work at the same time, together with a smaller room which serves as a private office for the assistant to the medical officer. Hot and cold water has been laid on to each of these rooms, and a convenient sink provided for use in connection with the preparation and examination of microscopic and other specimens. Arrangements have also been made for transforming the small room into a dark room for the use of the ophthalmic surgeon. Taken altogether, the accommodation is now very satisfactory, and enables the staff to carry out their work with greater ease and rapidity than was hitherto possible. The convenient arrangement of the department also enables us to keep a satisfactory check on the children submitted for examination, and to ensure that the records are kept with greater accuracy than was hitherto possible.

BOARD'S SCHEDULE OF MEDICAL INSPECTION.

No change has been made in the schedule, which was adopted in its entirety. Speaking generally, the use of this schedule has been much the same as in 1908. The duty cast upon Local Authorities by the Education (Administrative Provisions) Act, 1907, is to provide for the medical inspection of children attending schools, and anything like a complete examination has only been made when the history or the general appearance of the child indicated the necessity for so doing.

As mentioned in my last report, only quite a superficial inspection is possible in some of the schools, as there is no spare room in which the necessary privacy and freedom from noise can be secured for a more thorough examination of the children.

During 1909, the ophthalmic surgeon inspected the schools and dealt with any children suffering from defective vision on the same lines as in previous years. As these visits were made independently of the ordinary routine medical inspections, and for the most part did not include the same groups of children, it has not been possible to tabulate the results on the medical inspection schedules. This omission will, however, be made good in future years.

ASSISTANCE TO THE SCHOOL MEDICAL OFFICER AND HIS ASSISTANT.

The work of the Health Visitors is set out in detail in Table E. IX.

The teachers have continued to render willing and valuable assistance in the work of medical inspection, and I have once more to acknowledge the ready help rendered by the superintendent attendance officer (Mr. Jones) and his staff. Thanks to constant consultations between the attendance officers and the public health staff, it has been possible to carry on the work of the department without friction and with increasing efficiency.

ATTENDANCE OF PARENTS OR GUARDIANS.

This has been secured as heretofore by written notices despatched by head teachers prior to the medical inspections. The parents or guardians of children inspected were present in 1,564 instances, out of 4,360 children inspected, or 36 per cent. This proportion is one per cent. higher than in 1908. In the infants' schools 1,309 parents or guardians were present at the inspection of 2,945 children, or 44 per cent. This number compares favourably with 38 per cent. present in 1908. Many parents also attended at subsequent inspections to confer with the Medical Officer.

DISTURBANCE OF SCHOOL ARRANGEMENTS.

This has been inconsiderable in the newer schools where a special room can always be set aside for the purpose. In the older schools much inconvenience to all concerned is more or less inevitable though the head teachers have done their best to mitigate it as far as possible.

Now that a considerable number of children suffering from defective vision and other eye troubles are referred for further examination and treatment, I suggest that the Committee should obtain the consent of the Board of Education to reckon attendance at the medical department, at the Town Hall, as attendance at school. Though the gain in grant would be inconsiderable, such an arrangement would be popular with the children and with the teachers, as children who are in regular attendance, and are qualifying for attendance prizes, are very loth to attend at the Town Hall unless such attendance is counted. Article 44 (h) of the present Code permits such attendances to be reckoned for school purposes, and a similar recognition might be sought for children attending the class for remedial exercises at Whitehorse Road School.

EXTENT AND SCOPE OF MEDICAL INSPECTION DURING THE YEAR.

For the most part children have been selected for medical inspection in accordance with the requirements of Section 58 (b) of the Code.

Further experience has strengthened my opinion that the group of children about to leave school is the least satisfactory that could be selected for inspection.

The number of actual objections to medical inspection continued small. There was, however, a tendency in some of the schools for children who should have been medically inspected to be kept from school on the day fixed for inspection. Even if these absentees are taken into account, there is no considerable interference with the work of medical inspection, and I am of opinion that both active and passive resistance will soon disappear if left unnoticed. In several instances there is reason to believe that the children were withdrawn from inspection because they were dirty. When this is found to be the case, the difficulty can be dealt with in other ways, and especially by examining such children at a subsequent date without notice.

The following table shows the number of children whose medical inspection schedules were completed during 1909 :—

TABLE E. 1.
Total number inspected during 1909.

Age.	Number of Boys.	Number of Girls.	Total.
3-4	113	85	198
4-5	344	306	650
5-6	596	644	1240
6-7	289	323	612
7-8	92	104	196
8-9	22	21	43
9-10	3	...	3
10-11	3	...	3
11-12	...	...	...
12-13	15	9	24
13-14	765	426	1191
14-15	138	49	187
15-16	11	2	13
Total all ages ...	2391	1969	4360

The corresponding total for 1908 was only 3,659, but in the former year the full staff was only at work rather less than nine months.

In addition to the primary inspections, 453 children were re-inspected to ascertain progress, 227 children were examined at the instance of the teachers, and 315 were examined for cleanliness. Many other children were also examined while investigating outbreaks of diphtheria, scarlet fever, and other communicable diseases.

GENERAL DIRECTIONS TO PARENTS.

In 758 instances written directions were sent to parents, while in 2,932 instances printed or verbal directions were given.

THE WORK OF THE OPHTHALMIC SURGEON.

The following table prepared by Mr. Wray shows the schools inspected by him for eye trouble, the conditions found, and the number of children concerning whom advice was offered :—

TABLE E. II.

	All Saints.	Beulah Road.	Bo-ton Road.	Christ Church.	Der ng Place	Ecclesbourne Road.	Holy Trinity.	Mitcham Road.	Oval Road.	Prince-s Road.	South Norwood.	Sydenham Road.	St. Saviour's.	St. Andrew's.	St. Michael's.	St. Mary's.	St. Peter's.	Tamworth Road.	Whitehorse Road.	Woodside.	Upper Norwood.	Total.	
Anophthalmos ..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1	
Anterior synechia ..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1	
Aphakia ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	
Blepharitis ..	..	..	4	6	2	1	2	..	5	..	2	4	..	..	..	..	..	..	4	2	1	33	
Buphthalmos ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1	
Conjunctivitis ..	..	13	24	26	2	14	15	6	10	1	16	8	7	1	1	2	2	3	..	9	2	2	154
Coloboma of iris ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	
Cataract ..	..	..	1	..	1	1	4	..	..	..	1	1	..	..	..	..	..	..	1	..	..	10	
Chalazion ..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	2	
Capsulo pupillary membrane ..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1	
Dacryocystitis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	
Epiphora ..	..	..	..	..	2	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	3	
Granuloma of lower lid ..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1	
Hordeolum ..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	2	
Iridoplegia ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1	
Leucoma ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1	
Keratitis Superficial ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1	
Molluscum contagiosum ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	
Nebula ..	..	..	..	1	2	2	1	..	..	..	1	1	..	1	..	..	..	..	2	..	..	11	
Nystagmus ..	..	..	..	2	..	..	..	1	..	..	1	2	..	..	1	..	..	..	3	..	..	10	
Ophthalmia ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	2	
Phlyctenular Ophth. ..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	1	..	..	..	1	..	..	4	
Ptoxis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	
Paresis ..	..	..	..	1	..	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	3	
Pigmentation of sclera ..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	
Prolapse of Iris ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	
Perforating—wound of eye—old ..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	
Neoplasm of canthus ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	
Strabismus ..	..	..	14	20	6	5	10	2	10	..	..	9	9	2	..	1	2	..	12	7	10	119	
Shrunken lens ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	
Punctured wound of eyeball (old) ..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1	
Tuberculosis of lid ..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1	..	..	..	1	
Tubercle of choroid ..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	
Abscess of lid ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	2	
Ulcer of Cornea ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	
Opaque nerve fibres ..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	
Word Blindness ..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Refracted ..	..	..	41	71	1	18	71	..	38	27	..	46	10	13	..	6	..	27	88	29	18	504	
Glasses ordered ..	..	..	26	28	..	10	22	..	16	14	2	..	22	3	6	1	3	1	14	32	15	4	219

Princess Road—Four special visits Contagious cases.

In addition to the above schools, glasses have been ordered for children at Archbishop Tenison's, Parish Church, Winterbourne Road, Brighton Road, Davidson Road, and St. James'.

HEIGHTS AND WEIGHTS.

The following tables give the average heights and weights of the children measured in 1909. The numbers are omitted for groups of less than ten.

TABLE E. III.
HEIGHTS OF BOYS.

Age.	Number Examined.	Height in Centimetres.	Height in Inches.	B.A. Anthropometric Committee, 1883. All Classes.	
				Number Examined.	Average Height
					Inches.
3-4	113	94.6	37.2	...	...
4-5	344	94.4	37.2	107	38.46
5-6	596	104.8	41.3	201	41.03
6-7	289	110.8	43.6	266	44.00
7-8	92	115.5	45.5	307	45.97
8-9	22	117.8	46.4	1524	47.05
12-13	15	144.0	56.7	1981	54.99
13-14	765	142.2	56.0	2743	56.91
14-15	138	151.0	59.5	3428	59.33
15-16	11	155.2	59.8	3498	62.24

HEIGHTS OF GIRLS.

3-4	85	92.6	36.5	...	...
4-5	306	98.6	38.6	99	38.26
5-6	644	103.5	40.6	157	40.55
6-7	323	110.5	43.5	189	42.88
7-8	104	114.8	45.2	173	44.45
8-9	21	118.9	46.8	432	46.60
13-14	426	147.6	58.1	206	57.77
14-15	49	148.6	58.5	240	59.80

WEIGHTS.
WEIGHTS OF BOYS.

Age.	Number Examined.	Weight in Kilos.	Weight in Pounds.	B.A. Anthropometric Committee, 1883. All Classes.	
				Number Examined.	Average Weight.
					Pounds:
3-4	113	15·3	33·7	...	...
4-5	344	15·8	34·8	102	37·3
5-6	596	17·8	39·2	193	39·9
6-7	289	19·5	43·0	224	44·4
7-8	92	21·3	46·9	246	49·7
8-9	22	22·2	49·0	820	54·9
12-13	15	34·7	76·5	1786	76·7
13-14	765	36·2	79·8	2443	82·6
14-15	138	40·7	89·4	2952	92·0
15-16	11	43·4	95·4	3118	102·7

WEIGHTS OF GIRLS.

3-4	85	14·1	30·8	...	...
4-5	306	15·6	34·5	97	36·1
5-6	644	17·3	38·1	160	39·2
6-7	323	18·9	41·8	178	41·7
7-8	104	20·8	45·6	148	47·5
8-9	21	22·6	49·8	330	52·1
13-14	426	38·6	84·7	209	87·2
14-15	49	39·7	87·6	229	96·7

TABLE E IV.
BOYS' SCHOOLS.

Age.	No. enrl.	Guardians present.	Total No. in whom Defects found.	Nature of Defects.																				Written Directions to parents	Verbal and verbal directions		
				Want of Cleanliness.				Clothing.				Malnutrition	Ertl. Eye Disease.	Naso-pharyngeal Obstru.	Ear Trouble	Deformity and Spinal Dis.		Affections of the Heart.	Lung Trouble.		Infections or Contagious Disease.	Mentally Defective	Sundry Defects			Teeth.	
				Heads.		Body.		Clothing.		Defective Footgear.	Lateral Curvature.					Other Deformities.	Phthisis & Phthisia.		Other Lung Trouble.	Urgent Defects.						Other Defects of any kind.	
				Verminous	Nits only.	Dirty.	Verminous	Dirty.	Defective.																		Dirty.
12-13	15	4	13	...	...	...	...	...	1	...	...	2	5	...	...	...	...	1	...	...	...	1	12	...	11	5	6
13-14	765	89	750	10	45	16	6	33	40	33	48	113	68	175	26	4	13	31	2	9	2	4	646	113	446	248	442
14-15	138	16	120	...	2	...	...	1	1	4	...	7	16	26	5	...	8	6	...	3	...	...	79	13	57	48	65
15-16	11	3	11	...	...	...	...	...	...	...	...	2	2	2	1	...	...	...	...	...	...	...	5	2	9	6	5
	929	112	894	10	47	16	6	34	41	38	48	120	88	208	32	4	21	38	2	12	*2	5	742	128	553	307	514

*Including Ringworm ... 1 Impetigo ... 1

GIRLS' SCHOOLS.

12-13	9	...	10	...	5	...	...	...	...	...	...	1	2	6	...	...	...	1	...	...	...	...	10	...	7	3	6
13-14	426	127	417	16	154	2	6	16	16	7	30	34	46	113	6	4	14	13	...	5	...	5	345	69	250	130	244
14-15	49	15	48	1	9	...	1	...	...	...	...	1	3	12	...	1	3	1	...	...	...	...	38	5	27	14	29
15-16	2	1	2	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	2	...	2	7
	486	141	477	17	168	2	7	16	16	7	30	36	51	122	6	5	17	14	...	5	...	6	395	74	292	147	281

INFANTS' (BOYS') SCHOOLS.

3-4	113	56	91	1	5	1	...	1	4	1	4	8	14	28	...	...	9	1	...	5	1	1	75	...	33	8	60
4-5	144	149	308	6	21	7	2	5	5	4	13	34	38	84	7	3	30	12	(1 7) 2	5	5	5	257	2	167	24	243
5-6	596	277	569	7	52	17	2	10	20	10	20	58	59	182	15	4	47	15	(2 7) 4	14	11	6	497	21	368	66	433
6-7	289	123	216	10	23	9	5	8	13	14	24	34	23	88	4	3	14	12	(1 7) 1	6	2	7	261	16	220	17	225
7-8	92	32	92	...	5	...	...	3	1	4	16	11	35	2	...	2	2	2	2	3	...	...	85	4	76	10	76
8-9	22	7	19	1	...	2	...	...	1	2	4	4	2	10	1	...	1	1	...	...	1	...	18	4	11	6	13
9-10	3	4	2	...	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	1	...	1	1	...
10-11	1	3	2	...	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	1	...	2	...	1
	102	647	1157	25	106	30	9	24	46	32	75	155	148	428	32	10	103	44	19	31	*20	20	1195	47	882	152	1054

†Including Phthisis ... 4? *Including Ringworm ... 9 Impetigo ... 4 Scabies ... 4 Whooping Cough ... 3

INFANTS' (GIRLS') SCHOOLS.

3-4	85	40	72	...	27	1	...	1	1	1	4	2	11	10	1	...	5	...	...	2	2	1	48	...	17	4	49
4-5	306	139	268	5	90	1	1	5	1	3	22	14	32	81	9	...	16	7	(1 7) 2	3	4	2	254	7	125	23	208
5-6	44	303	607	27	170	1	5	18	11	8	22	66	54	177	12	2	31	14	3	21	9	3	514	32	469	65	481
6-7	323	126	315	14	66	2	4	5	1	9	13	42	32	92	7	...	14	11	1	6	3	5	273	16	214	40	253
7-8	104	44	95	9	39	...	3	4	3	5	4	10	4	26	2	1	3	2	...	2	3	...	94	7	69	15	79
8-9	21	10	21	...	10	...	...	2	1	3	2	2	2	11	1	...	...	2	2	...	...	...	18	4	14	5	11
	1483	662	1078	55	432	5	10	35	18	29	51	136	135	397	32	3	69	30	49	32	*21	12	1181	66	858	151	1081

†Including Phthisis ... 1? *Including Ringworm ... 16 Impetigo ... 1 Whooping Cough ... 3 Diphtheria ... 1 Scarlet Fever ... 1

TOTALS ALL AGES BOYS' AND GIRLS.

4360	1364	4106	107	753	59	32	109	121	106	94	447	412	1165	72	22	210	132	19	89	43	43	3513	315	2592	758	2932
------	------	------	-----	-----	----	----	-----	-----	-----	----	-----	-----	------	----	----	-----	-----	----	----	----	----	------	-----	------	-----	------

As in 1908, these tables show that the weights of Croydon children are on the average below the British Association figures for all classes. The heights, on the other hand, are approximately the same as the British Association figures, though there are slight variations in both directions at certain age groups.

As similar results have been reported in previous years, it is worth considering whether the Board of Education would not agree to the omission of these tables in future reports. They take a considerable time in preparation, and seem already to have fulfilled their only useful purpose, namely, the provision of a local standard of heights and weights at school ages. For comparative Anthropological observations, the work of weighing and measuring would have to be done more thoroughly than is compatible with routine inspection work. Moreover, useful comparisons between different groups of children cannot be made unless the heights and weights are correlated with racial characteristics and other information at present not available. Time so saved might be spent on more careful measurements of children attending selected schools and on the repeated weighing of children of poor nutrition in whom a tuberculous taint or insufficient feeding was suspected.

GENERAL RESULTS OF INSPECTIONS.

With the exception of heights and weights these are summarised in Table E iv.

The defects noted at inspections vary much, both in their extent and in their intrinsic importance. The personal equation of the individual observer has also to be taken into account, and it is therefore obvious that no useful purpose would be served by expressing all the defects in percentages, or by comparing school with school or town with town. The outstanding facts of medical inspections are the existence of a very large amount of remediable physical inefficiency and the necessity of providing means for its amelioration together with more frequent and prompt resort to the means provided for treatment.

WANT OF CLEANLINESS.

Condition of the Heads.—Of the 4,360 children inspected, 107 were infected with live vermin at the time of inspection, and 753 other children had "nits," and 59 children had dirty heads apart from vermin. The proportion showing "nits" is a better criterion of the usual condition of the children than the mere observation of

the number showing actual live vermin at the time of inspection. As previously pointed out most children are specially cleansed for the medical inspection, and some of the worst cases are actually kept from school to avoid detection. The extent of this trouble too varies with the school and with the season. Thus, during the autumn, surprise visits to Princess Road and Boston Road Schools gave the following results:—

TABLE E v.

School.	Class.	No. Examined.			Heads Vermin.	Nits only.	Vermin of the Body.
Princess Road Infants'	I.	Boys	24	...	4	9	5
		Girls	20	...	6	9	3
	III.	Boys	23	...	5	6	6
		Girls	18	...	7	8	5
		Total	85		22	32	19
Boston Road Infants'	I.	Boys	23	...	5	7	4
		Girls	30	...	11	12	3
	III.	Girls only	29	...	13	11	1
		Total	82		29	30	8

In addition to head and body vermin most of the Princess Road and Boston Road children were badly infested with fleas. Of this no figures were extracted, though the condition is obviously injurious and objectionable.

On the other hand, in many schools the percentage of dirty children is quite small, and even Princess Road and Boston Road would have given more favourable results at another time of year. It is well known that many children attending these schools are neglected during the hopping season.

During the year the method of dealing with unclean conditions was the subject of a special report, together with numerous supplementary reports. As a result, the Committee decided to avail

themselves of Section 122 of the Children Act, in order that their officers should have greater freedom in examining children in school. They therefore passed the following resolutions :—

(a) That in accordance with the provisions of Clause 122 (Sub-Section 1) of the Children Act, 1908, the Medical Officer, the Assistant Medical Officer, the Health Visitors, and the Head Teachers, be directed to examine in any Public Elementary School, provided or maintained by the Authority, the person or clothing of any child attending the School.

(b) That, as provided in Sub-Section 5, when notice is given under this Clause by the direction of the Committee to the parent or guardian of, or other person liable to maintain a child, requiring him to cleanse the person and clothing of the child, he be furnished with written instructions describing the manner in which the cleansing may best be effected.

Now that the teachers and the officers of the Public Health Department are armed with statutory authority to inspect children there should be no hesitation in increasing the frequency of the inspections and in dealing promptly with suitable delinquents. In addition to passing the above resolutions, the Committee have also modified the Standing Orders, which now read as follows :—

100.—*Treatment of Verminous Children.* Verminous heads are extremely common in all schools and are a constant source of anxiety to all concerned.

The parents of all children attending school should be advised to constantly be on the watch for this condition.

Teachers should examine the heads of children on admission and at intervals during the session. Any child found to be affected with vermin should be given one of the cards marked A. If this is not effectual and the child's head is not clean at the expiration of the week, card B should be issued.

Should the child be neglected for a further week, card C should be issued and the child excluded from school and reported forthwith to the attendance officer.

Children in an extremely filthy condition should be excluded forthwith and the attendance officer attached to the school notified immediately.

The following is the text of the Cards, which are a modification of those used by the L.C.C. :—

A. CROYDON EDUCATION COMMITTEE.

Parents should pay special attention to the hair of school children. Even clean children are liable to be infected with vermin, and this is why it is necessary to examine the hair both at home and at school. To avoid trouble, the hair should be kept as short as possible, and combed each night with a fine comb.

Girls with long hair should have it tied back while in school.

B. CROYDON EDUCATION COMMITTEE.

PRIVATE NOTICE.

Date.....

To the Parents or Guardians of

I beg to give you private notice that your child's head requires attention.

As it is most important that this complaint should be stamped out of our schools, it is expected that the child will be cured within a week.

On the other side you will find directions as to treatment.

Signed.....

Head Teacher,

.....School

C. CROYDON EDUCATION COMMITTEE.

Date.....

To the Parents or Guardians of

Your child is excluded from school for seven days on account of the condition of ^{his} head. If ^{he} does not return at the end of that time free from all vermin and nits, you will render yourself liable to prosecution.

Directions for cleansing heads are given on the other side.

Signed.....

Head Teacher,

.....School.

On the whole the present standing orders are a distinct improvement on those previously in force in respect to these conditions, but I am still of opinion that Card A should have been given to the parent of every child newly admitted to school, and that Card B should have been issued as soon as any verminous condition was noted. However, this is not a matter of very great importance, as most of the trouble arises with the old offenders, and in those cases Card B or C can be used according to circumstances without the loss of time that would ensue were it necessary to use Card A for each new offence. Probably the greatest difficulty arises from the fact that the standing orders are not absolutely enforced in a few of the worst schools.

If one takes a comprehensive view of the whole subject of dirty heads, I am of opinion that while the more flagrant cases have been checked by the activity of the last five years, there is still need for more systematic inspection of heads throughout our schools, together with sustained pressure on the parents of all children found dirty. Though one is loath to urge frequent prosecutions, there is no doubt that a certain proportion of parents are so indifferent to the interests of their own children and the rights of their neighbours' children, that they can only be taught their duty by the aid of the law. I trust that during the current year resort to prosecution in selected cases will make the Committee's new standing orders as effective in practice as they now are in theory. This can be accomplished without difficulty if the magistrates who deal with these cases appreciate the simple fact that prosecutions are undertaken primarily in defence of the children of clean, self-respecting parents, who naturally object to their little ones associating with verminous and filthy classmates.

As a check on the general cleanliness of school children Dr Parsons has again extracted particulars from the hospital notes concerning patients of school age admitted to the borough hospital. During 1909, 400 children entered the wards, and the following is a summary of the condition noted on admission:—

Children with clean heads, 194, or 48 per cent.

Children with nits on their hair, 139, or 35 per cent.

Children with nits and live stock, 67, or 17 per cent.

The proportion of quite clean children is exactly the same as in 1908.

VERMINOUS CONDITIONS OF THE BODY

were noted in 32 instances.

It will be seen from the tables that the condition is about as frequent in girls as in boys, thus forming a contrast with dirty heads, which are always more frequent in the girls. This condition is now dealt with in the following way. Every infested child is excluded from school and the following card sent to the parents:—

D. CROYDON EDUCATION COMMITTEE.

PRIVATE NOTICE.

Date.....

To the Parents or Guardians of.....

Your child is excluded from school for seven days on account of the condition of ^{his}_{her} body and clothing. If ^{he}_{she} does not return at the end of that time free from vermin and nits you will render yourself liable to prosecution.

Directions for cleansing are given on the other side.

.....Head Teacher

.....School.

COUNTY BOROUGH OF CROYDON.

DIRECTIONS FOR DESTROYING VERMIN OF THE BODY.

Take a warm bath, use plenty of soap. Boil all under-clothing and iron with a very hot iron all cloth or other garments that cannot be boiled. Special attention should be paid to the creases and folds of the garments as eggs are often deposited in these places. Repeat this process on three successive days and keep a careful watch for any return of the trouble. Should more than one member of the family be infected, it is important that all should be treated at the same time. In many instances bed clothes and bedding are also infested. These can be treated at the Public Disinfecting Station. This will be done free of charge if application is made at the Public Health Office, Town Hall, Croydon.

At the same time notification is sent to the Public Health Department, so that arrangements may be made for the disinfection of the premises, including the bedding and any clothing that the parents will submit to this operation. In the more aggravated cases permanent improvement cannot be secured until the whole household can be bathed and have their personal clothing submitted

to disinfection. In the smaller tenements this is not always practicable, and I have again to urge the necessity of providing limited accommodation for this purpose at the new disinfecting station. It is certain that so far from impairing the responsibility of parents for the cleansing of their children we should be in a much stronger position if we had to take a case into court, as we could then convince the magistrates that parents who neglected the means provided for cleansing were not using the best available means for rendering their children fit to attend school.

CLOTHING.

Defective clothing was noted in 121 instances. In most instances this refers to ragged and insufficient underclothing. On the other hand a very large proportion of children are overclothed, and it is a pity there is no easy way of averaging the amount per child. As heretofore, opportunity is taken at each inspection for distributing a leaflet on children's clothing. Similar remarks apply to footgear, which were noted as defective in 194 instances. Clothing was dirty, and required cleansing in 106 instances.

MALNUTRITION.

This is obviously a somewhat indefinite term, but is intended to include children that are not merely under weight but might in addition be suspected to be suffering from insufficient food, the effects of disease or injudicious dietary. I am convinced that the last group is very considerable, and have therefore arranged for the health visitors to give courses of instruction to mothers on this very important subject. Full particulars of these are given in another part of the report.

EYE DISEASES.

Defects of one kind or another were noted in 412 instances. As already explained, vision was not tested at the General Inspections, in 1909. Most of the defects here noted consisted of inflamed lids, conjunctivitis, squints, or other obvious external diseases. During the year under review, these children were referred to their own doctor or to a special hospital, but in future those requiring the assistance of an ophthalmic surgeon will be referred to Mr. Wray at the Town Hall.

NASO-PHARYNGEAL OBSTRUCTION.

Enlarged tonsils or adenoids were noted in 1165 children. In many instances the mere fact that the tonsils were enlarged is of little practical importance, but parents are urged to secure treatment whenever the obstruction of the upper respiratory passages leads either to mouth breathing by night or day, and whenever there is a history of recurrent sore throat or of chronic or recurrent ear trouble. The exact number of children for whom operative treatment was urged was not ascertained at the time that the cards were analysed, but from figures supplied by the House Surgeons at the Croydon General Hospital, I find that 158 Croydon school children were operated upon at that institution. I have again to thank the House Surgeons for kindly supplying me with a list of patients treated week by week for tonsils and adenoids. This information is of practical value, as it enables us to write to the teachers and emphasise the importance of after treatment.

EAR DISEASE.

This was noted in 72 instances.

DEFORMITIES.

Lateral curvature of the spine was noted in 22 instances. The rational treatment for this condition consists of remedial exercises. A special class for such exercises was arranged by Miss Appleton, with the valuable co-operation of Miss Higgins. Selected children to the number of 6 attended twice a week for ten weeks during the last quarter of the year. On re-examination of the children by Dr. Jackson, all were found to be improved. These results were so encouraging, that Miss Appleton kindly volunteered to carry on the class herself in 1910, as it was found to be impracticable to secure the services of an assistant.

Other deformities were noted in 210 instances. For most of these children little could be done, but in several instances advice was given as to the choice of apparatus which some children were found to have outgrown.

AFFECTIONS OF THE HEART.

Affections of the heart were noted in 132 children. Many were simply the result of debility, but others were due to injury from rheumatism. Appropriate advice was given in either case. Too

great emphasis cannot be laid upon the importance of recognising rheumatic troubles in children. In most instances the only obvious symptom of rheumatic fever in a child is the recurrence of so-called "growing pains." Every child that complains of pains of this nature should be overhauled, as these apparently trivial symptoms are often accompanied by serious heart disease, which could in most instances be arrested if the disease were recognised and treatment secured.

LUNG DISEASES.

In 14 instances phthisis was diagnosed at the inspection, and in 5 additional children this disease was suspected. Other lung diseases were noted in 89 instances. Hygienic advice was tendered to the parents of all these children. The rule followed in respect to phthisis is to exclude all children with active mischief, as they are considered to be a danger to others. Children with quiescent disease are excluded from school or not, according to circumstances. When the home conditions are such that the children could be properly looked after, exclusion is advised until convalescence is fully established. When the mother goes out to work, or the home is otherwise unsatisfactory, children are allowed to attend school at an earlier stage in their recovery. The means for dealing with children of this sort cannot be considered satisfactory until a class for physically defective children has been established.

COMMUNICABLE DISEASES.

At the routine inspections communicable diseases were diagnosed in 43 instances. These included ringworm 26, impetigo contagiosa 6, scabies 4, whooping cough 6, diphtheria 1, and scarlet fever 1. These numbers are, of course, in addition to the children who are specially examined on account of the known prevalence of some communicable disease in the school.

MENTAL DEFECTS.

Forty-three or one per thousand children were noted to be mentally defective. In addition, a number of infants entered as "very dull" may prove, on further observation, to be mentally slightly defective.

DENTAL DEFECTS.

The prevalence of dental trouble is shown by the following table.

TABLE E VI.

BOYS.

Age.	Number Examined.	Urgent Defects of Teeth.	Other Defects of Teeth.	Number with sound Teeth.	Percentage with sound Teeth.
3-4	113	...	33	80	70.8
4-5	344	2	167	175	50.9
5-6	596	21	368	207	34.7
6-7	289	16	229	44	15.2
7-8	92	4	76	12	13.0
8-9	22	4	13	5	22.7
12-13	15	...	11	4	26.7
13-14	765	113	446	206	26.9
14-15	138	13	87	38	27.5
15-16	11	2	9	...	...

GIRLS.

3-4	85	...	27	58	68.2
4-5	306	7	125	174	56.8
5-6	644	32	409	203	31.5
6-7	323	16	214	93	28.8
7-8	104	7	69	28	26.9
8-9	21	4	14	3	14.3
13-14	426	69	256	101	23.7
14-15	49	5	27	17	34.7
15-16	2	...	2	...	...

Respecting the importance of securing treatment, I cannot do better than quote the following extracts from a circular recently issued by the British Dental Association :—

“ This condition represents a great amount of unnecessary suffering, inattention to work, and loss of school-time, on the part of the children. Furthermore, dental caries, although in itself not an immediately dangerous disease, is the forerunner of many grave conditions. Diseased teeth in early childhood are a direct cause of malnutrition, and hence of an arrest of both mental and physical development at the age when growth is making the most urgent demands on the organs of digestion; the poisons produced in the mouth cause inflamed and enlarged glands in the neck, and thereby pave the way for tuberculosis; and the general health is severely impaired by the constant swallowing of the products of putrefaction and the germs of disease which abound in unhealthy mouths.

It has been shown that the serious complications of scarlet fever are much more common and severe in the case of children with diseased teeth and unhealthy mouths.

A detailed examination of the children in a large London County Council School proved that those with unhealthy mouths were as a rule unhealthy in appearance, under the average in weight, and below the average for their age in school-work.

In fact, the serious consequences of dental caries, which is especially a disease of childhood, are now generally recognised by medical men and those having the care of large numbers of children.

Among the practical consequences of neglect are rejection for the public services, naval, military, and civil; and increase of unemployment, on account of physical unfitness, in all vocations of life.

For many years dental surgeons have been employed in a large number of Poor Law Schools, and the medical officers of several of these schools have testified to the great benefits which accrue to the children, and have recognised the improved general health of the school.

Much might be done to diminish the prevalence of dental disease by teaching dental hygiene to the children, and enforcing the daily cleansing of the teeth. These two recommenda-

tions were made by the Admiralty and War Office Inter-Departmental Committee on Physical Deterioration. It is quite certain that, if they were carried out, the total amount of dental disease would be much reduced, and the problem of treatment brought within more manageable limits. The spending of comparatively small sums on the teaching of dental hygiene would be the highest form of economy; the teaching should be given by the school teachers themselves, who should receive instruction by means of lectures given by dental surgeons.

However, the utmost that may be done in the way of prevention is not likely to do more than ameliorate the evil, and the question of actual treatment remains for consideration.

The British Dental Association wishes to lay special emphasis on the particular portion of the Report of the Special Sub-Committee of the Education Committee of the London County Council which deals with this matter. There can be little doubt that the establishment of school clinics of a modest character, for the simple treatment of children's teeth, would not only be a great boon to the children themselves, but would prevent at the outset many serious conditions. The maintenance of a healthy mouth would go far towards allowing the children to reach maturity with a physique that would enable them to earn their living in the face of industrial competition, and thereby save them from being thrown upon charity or the State for partial or complete maintenance at an early age. It would in the long run be the truest economy."

Suggestions as to dental treatment are made in a later part of this report.

METHODS EMPLOYED OR AVAILABLE FOR THE TREATMENT OF DEFECTS.

During 1909 the Public Health Department continued to undertake the treatment of ringworm and minor skin complaints.

RINGWORM.

The arrangements described in my previous annual reports have continued in force during the past year.

The following table shows the number of cases supervised by the Public Health Department during 1909.

TABLE E. VII.

RINGWORM, 1909.

Total number outstanding Jan. 11th, 1909	Scalp	122		
	Body	14	136	
Total number reported during 1909	...	Scalp	252	
		Body	140	392 528
Total number freed during 1909	...	Scalp	308	
		Body	138	446 446
Total number outstanding Jan. 10th, 1910	Scalp	66		
	Body	16	82	82

On the whole the results for the year may be considered highly satisfactory. The more serious cases are certainly less frequent than formerly, and the number of children excluded from school at the end of the year was only 82 as compared with 136 twelve months previously. Of the 392 new cases 273 were treated at the Town Hall, 63 by application of X-rays, 210 by drugs, while a further 32 of the previous year's cases were also given X-rays. Altogether 1,390 attendances were made by children at the Town Hall in connection with the treatment of this disease.

The methods adopted for the treatment and supervision of ringworm have been so fully described in previous reports that it is unnecessary to discuss them further on this occasion.

TREATMENT OF EYE DEFECTS.

As already mentioned, the new organisation did not come into force until 1910. During 1909, however, I was instructed by the Committee to obtain prices for the supply of suitable spectacles for school children at a fixed price. Samples and prices were secured from reliable opticians, who undertook to supply spectacles equal in quality to the sample submitted, and in accordance with the prescription given to the patient. All the samples received were compared by the ophthalmic surgeon, with a result that an arrangement was entered into with Mr. J. F. Wölfe to supply school children at the following prices:—

Spectacles with spherical lenses	...	...	...	1/9
„ with plano-cylindrical lenses	...	...	...	2/9
„ with sphero-cylindrical lenses	...	...	...	3/9

ACTION TAKEN TO PREVENT SPREAD OF INFECTIOUS DISEASES.

The method of dealing with notifiable disease is dealt with in the report to the Sanitary Committee of the Council. During the year the undermentioned cases have been dealt with by my department :—

TABLE E. VIII.

Cases of illness reported by School Teachers or Attendance Officers :—

Illness.	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Totals.
Measles ...	205	91	28	23	347
Mumps ...	54	45	12	42	153
Whooping Cough	206	196	80	35	517
Chicken-pox ...	111	95	47	278	531
Sore Throat ...	113	93	107	94	407
Ringworm ...	122	84	41	71	318
Other Cases ...	172	130	104	154	560
Totals ...	983	734	419	697	2833

Cases of illness reported to Education Committee by the Public Health Department :—

Illness.	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Totals.
Scarlet Fever ...	79	151	130	150	510
Diphtheria ...	72	49	50	58	229
Enteric Fever ...	2	1	1	3	7
Measles ...	202	98	46	18	364
Mumps ...	62	38	9	38	147
Whooping Cough	240	334	55	25	654
Chicken-pox ...	137	117	29	395	678
Sore Throat ...	104	56	117	90	367
Ringworm ...	153	93	68	78	392
Impetigo ...	79	59	49	68	255
Scabies ...	7	20	12	14	53
Other Cases ...	9	14	5	59	87
Total ...	1146	1030	571	996	3743

In many instances the above reports dealt with the exclusion of several children,

WORK OF THE HEALTH VISITORS.

The five health visitors have largely been employed in visiting houses where non-notifiable infectious diseases have been reported by school teachers, and in generally assisting in the work of medical inspection. The number of visits paid in connection with this part of their duty is shown in the following table:—

TABLE E. IX.

Visits to houses where the following Diseases have been reported.				1st Visits.		2nd Visits.
Measles	...	...	...	398	...	37
German Measles	...	...	...	8	...	1
Mumps	...	...	...	142	...	17
Whooping Cough	...	...	...	706	...	77
Chicken-pox	...	...	...	598	...	36
Sore Throat	...	...	...	677	...	245
Ringworm	...	...	...	387	...	906
Verminous Heads	...	...	...	31	...	7
Verminous Bodies	...	...	...	11	...	2
Impetigo Contagiosa	...	...	...	385	...	560
Scabies	...	...	...	33	...	54
Other Diseases	...	...	...	573	...	311
Totals				3949	...	2243
Cultures taken				1490	...	—
Visits paid to Elementary Schools				262	...	—
Number of children prepared for medical inspection				4804	...	—
Number of children prepared for re-inspection				421	..	—
Visits paid to homes to obtain further information concerning children inspected in schools				237	...	79
Visits paid to the homes of school children for purpose of giving advice				537	...	212

As the number of children seen at the Town Hall has increased, it has been found necessary to slightly vary the districts allotted to each health visitor, so that one of the staff may be on duty at the Town Hall on all occasions when children are presented for special examination. The general work has also been rearranged, so that the Senior Health Visitor is responsible to the Medical Officers for the work of this part of the staff.

Since 1903 the Health Visitors have delivered addresses to suitable audiences on "The care of young infants and domestic hygiene." During the past winter it was thought desirable to somewhat vary this work, and to bring it more specifically into relation with a scheme for medical supervision of school children. It was therefore decided to arrange for the delivery of a short course of three lectures on "The health of the school child." In order to emphasize the relation of these lectures to medical inspection, it is intended to arrange for their delivery at various schools throughout the borough. So far, this has been attempted at Oval Road, where the co-operation of Mr. Field, Miss Metcalfe, and Miss Joyes, secured an audience of about 45 parents on three occasions. The lectures evoked considerable interest, and useful discussions followed. I hope as opportunity offers to arrange for similar conferences at the other schools in the Borough.

In the appendix will be found a somewhat modified syllabus of the lectures which I suggest may be reprinted for distribution to the parents.

It is only right to add that in the preparation of the section on diets and food values I have obtained much valuable assistance from the writings of Dr. Niven, of Manchester.

SCHOOL CLOSURE.

During the year 1909 five infant schools were closed in accordance with Article 45 (b) of the code. The prevalence of measles or whooping cough accounted for each of these closures.

EXCLUSION OF CHILDREN FROM SCHOOL.

During the year 45 children were excluded under Article 53 (b) of the code. This is in addition to the large number dealt with in accordance with the ordinary Standing Orders of the Committee.

PHYSICALLY AND MENTALLY DEFECTIVE CHILDREN.

At the end of the year the following Croydon children were under treatment in residential institutions outside the Borough:—

Blind children	...	...	...	...	...	9
Deaf children	...	...	...	...	...	4
Mentally defective children	...	...	...	...	...	4
Epileptic children	...	...	...	...	...	5

At present no serious attempt is being made to deal with the problem of the mentally defective child. While the funds at the disposal of the Committee for educational purposes are so limited I do not feel that any useful purpose would be served by discussing any scheme for the establishment of a special school. Certainly as a matter of *educational* economics better return can be insured by expenditure on normal children. On the other hand, if the mentally defective are regarded, as they should be, from a social standpoint there is little doubt that permanent institutional care must eventually be provided. This would be one way of thinning the ranks of the unemployable.

AUXILIARY CLASS.

In June, 1908, the Committee opened a small class at Whitehorse Road for the reception of children whose mental progress was retarded, and who could not be satisfactorily dealt with in ordinary schools. This class was intended for children whose education for one reason or another had been neglected and for those who could not be taught to read and write without more individual attention than is possible in an ordinary class. On the other hand it was not intended to admit children who were obviously mentally defective, though it could not be expected that the selection of children would in all cases be made with absolute accuracy, and in a few instances children were purposely admitted on trial so that one might judge from experience what their mental condition really was. The following is the result up to the end of 1909.

In all 16 children have been admitted. Four have been transferred back to ordinary schools, two have left for other reasons, and ten were in attendance in December, 1909. Of the ten remaining in December, seven are likely to be transferred to ordinary schools, and three are mentally defective.

It was hoped that during the coming summer the Committee would have been able to transfer this class to Grange Wood where facilities would have been afforded for increasing its scope and adding to its usefulness. The Committee has not however found it possible to make any provision for this extension in the current estimates.

NECESSITY FOR FURTHER TREATMENT.

This subject was dealt with at some length in my last annual report. I then stated that while the present arrangement for securing medical treatment for the poor left much to be desired, we

could meet the more urgent needs discovered by school inspection if adequate provision were made for the prompt and efficient treatment of skin, eye, throat, ear and teeth defects. For diseases of the skin in school children, which are mainly infectious, satisfactory provision has already been made by the Borough Hospital Committee. The re-arrangement of Mr. Wray's work will also meet most of the requirements in respect to eyes.

With respect to throats, ears and teeth, the Committee decided last summer to approach the General Hospital and to enquire if special facilities would be granted for the treatment of school children. To this the Hospital Committee demurred, as while anxious in every way to meet the wishes of the Education Authority they were of opinion that the general treatment of elementary school children did not fall within the scope of their work, and that it would be unfair to exploit the honorary staff in order to meet public requirements.

At the end of 1909 a special investigation was made into a limited number of cases respecting the extent to which treatment was secured. For this purpose, five typical schools were selected, namely, Whitehorse Road, Brighton Road, Mitcham Road, Princess Road and Davidson Road.

The children for whom advice was tendered were divided into three classes, namely :—

- (1) Those needing medical or surgical attendance.
- (2) Those needing a dentist.
- (3) Those for whom hygienic advice sufficed.

The following table shows the result of the enquiry :—

MEDICAL TREATMENT REQUIRED.

TABLE E x.

School.	Number of Children.	Treatment secured.		
		Yes.	?	No.
Whitehorse Road ...	12	9	1	2
Brighton Road ...	9	3	—	6
Mitcham Road ...	9	9	—	—
Princess Road ...	13	8	1	4
Davidson Road ...	20	10	1	9
Totals ...	63	39	3	21*

* Including 5 where poverty was the alleged reason.

DENTIST ADVISED.

School.	Number of Children.	Treatment secured.		
		Yes.	?	No.
Whitehorse Road	30	5	4	21
Brighton Road	20	1	1	18
Mitcham Road	10	3	—	7
Princess Road	15	1	2	12
Davidson Road	12	3	—	9
Totals	87	13	7	67*

* Including 32 where poverty was the alleged reason.

GENERAL HYGIENIC ADVICE GIVEN BY MEDICAL OFFICER.

School.	Number of Children.	Advice followed.		
		Yes.	?	No.
Whitehorse Road	1	1	—	—
Brighton Road	9	4	—	5
Mitcham Road	5	4	—	1
Princess Road	24	23	—	1
Davidson Road	15	9	1	5
Totals	54	41	1	12*

* Including 1 where poverty was the alleged reason.

Generally speaking, it will be seen from these figures, which are fairly typical, that hygienic advice has been followed to as considerable an extent as one could reasonably have expected. It is in respect to dental trouble that the need for treatment in Croydon is most evident. Concerning the importance of this matter I can add nothing to the extract from the British Dental Association's circular already quoted in an earlier part of this report. The whole matter, however, is one of very great difficulty, and I should be glad if the Committee would seriously consider the various alternatives. Those that suggest themselves to me are four in number:—

(1) The Committee may decide to allow things to remain as they are. This cannot be considered a satisfactory solution, and is economically unsound, as much permanent ill-health in after life is due to neglect of dental hygiene.

(2) The Committee might consider the advisability of throwing the responsibility for treatment on the Guardians of the Poor, who, according to a recent decision of the Local Government Board, are at present the responsible authority. This is shewn by a letter addressed by the Local Government Board to the Guardians of the Havant Union, which reads as follows :—

Local Government Board,
Whitehall, S.W.

Sir,

I am directed by the Local Government Board to advert to your letter of the 26th ultimo with reference to the question raised by Mr. L. E. W. Stephens, District Medical Officer in the Havant Union, in regard to medical attendance upon school children.

In reply the Board direct me to state that it appears to them that if the children do in fact need medical attendance, though not for acute illness, and the parents cannot obtain it, the Relieving Officer's Order for the attendance of the District Medical Officer should not be refused.

The Board direct me to add that if any children should be found to require operation or specialized attention, they would be prepared to approve of payments to the Medical Officer or other special arrangements.

I am, Sir,

Your obedient Servant,

JOHN LITHBY,

Assistant Secretary.

The Clerk to the Guardians
of the Havant Union.

The Croydon Guardians have not, however, any staff for dealing with dental out-patients, and if provision has to be made at public expense, it would doubtless be more convenient and not more costly for the local Education Authority to take the matter into their own hands.

(3) The Committee might follow the example of Kettering and endeavour to establish a dental provident dispensary where children could be treated at fixed fees. The following is an outline of the Kettering scheme :—

KETTERING URBAN DISTRICT EDUCATION COMMITTEE.

Scheme for the Provision of Dental Treatment for the Elementary School Children of Kettering.

A room to be provided by the Education Authority, and fitted up by the Dental Surgeons.

Hours of Attendance.—Monday, Tuesday, Wednesday, Thursday and Friday, 9 to 10 daily; Saturdays, 9 to 12 o'clock.

Scale of Maximum Fees.—Extractions 1s., with gas (the Dental Surgeon to decide whether gas is necessary or not) 5s. Stoppings 2s. 6d. (except in cases where nerve treatment was necessary, then by arrangement). Reduced rate for more than one extraction-

Regulation Cases.—By arrangement.

Charts.—Showing the proposed work and the total fee would be given to each patient before work was commenced (except in cases of emergency).

Fees to be paid for each operation at the time it was done and not left until the completion of the case.

If possible the School nurse to assist the Dental Surgeons by making appointments, cleaning instruments, helping with gas cases, etc.

June, 1907.

I am informed, however, that this scheme has not been successful in practice, as very few parents avail themselves of the services of the selected dentists.

(4) The scheme which most clearly commends itself to my judgment is the appointment of a dental surgeon who would attend at the Town Hall on one or two mornings a week, and assist in inspection for the next twelve months. By that means we would secure treatment for the absolutely urgent cases, and be able to gauge the amount of time required for treating school children, together with the expense to the local authority and the possibility of securing payment from the parents. At the end of twelve months, we should be in a position to consider the matter in all its bearings, and bring before the Council a scheme based on the experience thus gained.

Failing the adoption of this plan, I am of opinion that the Committee might usefully consult local dentists as to the practicability of the provident dispensary scheme.

EXAMINATION OF PUPIL TEACHER CANDIDATES.

Fifty-five young persons who desired to become pupil teachers were medically examined during the year. Of these 54 were passed and one rejected.

SPECIAL EXAMINATION OF TEACHERS.

Eight teachers were interviewed on one or more occasions by the medical officer. In three instances the interview had reference to the existence of infectious disease at the home of the teacher, while in five cases the Committee required special reports concerning the health of the teacher.

TRUANTS.

Eighteen children were examined before despatch to truant schools, and the necessary certificates given to the police.

EXAMINATION OF CHILDREN UNFIT TO ATTEND SCHOOL.

A large number of children referred by the Attendance Committee, attendance officers or teachers, in addition to others specially selected by the medical officers, attended at the Town Hall for medical examination. Owing to the very indifferent accommodation provided for school purposes prior to December, 1909, it was impossible to keep a reliable list of children seen in this way.

Among those seen were the following, many being seen on several occasions:—

Children seen for the first time in 1909—

Diseases of the Lungs	...	...	46
„ „ Heart	...	...	7
„ „ Ear	...	...	3
„ „ Skin	...	...	3
Mentally defective children	...	...	12
Other nervous diseases	...	...	13
Deformities...	...	...	11
Examined for special schools	...	...	12
Various diseases	...	...	17
			124

Re-examination of children seen in 1908—

Diseases of the Lungs...	...	...	7
„ „ nervous system	...	...	5
Other diseases	...	...	3
			15

H. MEREDITH RICHARDS, M.D.,

Medical Officer.

APPENDIX.

Syllabus of Lectures to Parents.

THE HEALTH OF THE SCHOOL CHILD.

School children must be healthy if they are to make the best use of their school time. The attention of parents is therefore directed to the following rules for health.

Care of the Skin.—The skin cannot be kept healthy unless a warm bath is given at least once a week. Daily cold sponging of the neck and chest strengthens healthy children and helps to ward off "colds." The hands should be washed before each meal to avoid swallowing harmful dust and dirt.

Care of the Teeth.—Decayed teeth injure digestion, and are harmful in other ways. Children should use a tooth brush the last thing each night. Clean teeth rarely decay. Read the leaflet on Teeth. Too much pappy food is bad for the teeth.

Care of the Hair.—The hair of young children is best worn short. Older girls should have the hair tied back or plaited. Every child's hair should be carefully combed with a fine comb each week in order to guard against the risks of vermin.

Clothing.—The most suitable outfit for a school boy consists of:—

- (1) A combination garment.
- (2) Knickerbockers.
- (3) Woollen stockings.
- (4) Jersey of knitted wool.
- (5) Lace boots.
- (6) Straw hat or cloth cap.

The combination garment should have sleeves, and reach just below the knees. The best material is wool, either woven or one of the unshrinkable flannel mixtures. If flannelette is used it must be the kind that will not burn. Ordinary flannelette is dangerous.

For children in the baby class the combination is best replaced by a vest and drawers.

The knickerbockers should be of corduroy or stout serge, and supported by braces, or by being buttoned to a bodice in the case of infants. Suspenders should be used for the stockings.

A knitted vest is a useful addition in the winter time, when an overcoat is also required.

While it is a mistake to endeavour to harden children by exposing the limbs, too many garments hinder the free movement of the body and the proper use of the lungs. Over-clothing also leads to sweating during exercise, and consequent risk of chills.

The boots should be of the natural shape of the foot, straight on the inside edge, and allow plenty of room for the toes.

Girls should be dressed in the same way as boys (suitable knickerbockers included), but with the addition of a kilt supported from the shoulders by a cotton bodice. If preferred the jersey and kilt may be replaced by a long-sleeved yoke frock reaching just below the knee, made of material suitable for the season.

Patterns for making suitable garments for boys and girls may be borrowed from the Health Visitors.

Sleep.—All underclothing should be changed at night. A child should be accustomed to sleep on its side, in a quiet room with an open window. Children in the infant school require twelve hours' sleep, and half-an-hour's rest in the middle of the day. Older children require at least ten hours. Medical advice should be sought for children who persistently snore at night.

Care of the Eyes.—Children must not sew, read or write in a bad light. When reading or working, children should sit with their feet on the floor, their backs straight, and the book or work not less than a foot from the eyes. Children who constantly work in awkward, twisted positions are likely to get twisted backbones.

The attention of the head teacher should be directed to any child who cannot see properly, or has pain after reading, in order that the sight may be tested by the medical officer.

The Feeding of School Children.—Food is required for growth and to enable the body to do its work and keep up its warmth.

To enable food to perform its work it must be chewed and digested, hence children require not only sufficient, suitable food, but regular meals and sufficient time for meals with subsequent rest for half an hour. Children should not eat standing and be hurried back to school directly they have finished the last morsel. The bowels must also be relieved each day.

Three necessary kinds of Food which must all find their place in the daily supply :—

- (1) Starches and sugars. Such as potatoes, rice, sugar, etc
- (2) Fats.
- (3) Meat and meat substitutes.

In selecting articles for diet we must consider :—

- (1) Their digestibility.
- (2) Their food value.
- (3) Their cost, *i.e.*, the amount we can buy for a given sum.

The real (strength giving) value of common food materials is best estimated by enquiring how much we can buy for say 1s., judged on this basis

Flour, bread, oatmeal and sugar are the four cheapest articles of food.

Other really cheap foods are peas, lard, dripping, margarine and herrings.

A satisfactory diet must contain all three great classes of food stuffs. Some articles of food, such as milk, contain all three.

Meat and Meat substitutes.—"Pieces" of lean meat can be bought for 3d. a lb. and are just as nutritious as a joint which costs twice as much. Hence 'pieces' made in a stew or meat pudding are twice as good value as a joint.

There are also other substitutes (some cheap and some dear) for joints of meat, thus a 5-lb. joint costing 2s. 6d. can be replaced by the consumption of :—

	s.	d.
5-lbs. "pieces" at 3d.	1	3
5-lbs. ox liver at 4d.	1	8
18 herrings	1	0
3-lbs. cheese at 6d.	1	6
11-lbs. flour at 7-lbs. for 1s.	1	7
7-lbs. oatmeal at 2½d.	1	6
15-lbs. bread at 1½d.	1	10
6-lbs. split peas		7
5-lbs. lentils at 2½d.	1	0
8-lbs. haricots	1	1
12 quarts milk at 4d.	4	0
12 quarts skim milk at 2d.	2	0
61 eggs at 1d. each	5	1

This table shows the wisdom of buying "pieces," herrings, cheese, peas and beans. Many of the foods in this table can not only take the place of a joint, but contain large amounts of other valuable food materials. Thus cheese contains as much fat as it does "*meat*," while peas and beans contain not only "*meat*," but more than half their weight of starch.

Cheese, peas and beans should therefore be eaten in larger quantities than is now usual.

The second class of food which requires consideration is

Fat.—This includes butter, margarine and dripping, lard, suet.

Margarine is as nutritious as butter, and only one-third the cost. Dripping is well worth buying. It is an extremely valuable food for children who will take it readily with bread or toast or as dripping pudding. Suet pudding should be given to children who dislike fat meat.

Starch and Sugars.—Sugar, bread, rice, oatmeal, etc., are usually eaten in sufficient quantity. It should be noted that jam is not a cheap substitute for butter. There is as much real food in 1-lb. of butter as in 3-lb. of jam. If cost is an object it is cheaper and better to substitute margarine or dripping for butter. Fats must be given to growing children, and cannot be replaced by sugars and starch. Avoid patent foods, which are invariably dear. Cook potatoes in their jackets in order to improve their flavour and make use of all the food.

Fluids for Children.—Milk is the best drink for a growing child. Skim milk is valuable if full milk cannot be spared. If any other beverage is given let it be cocoa, and not tea or coffee. Water should be given at dinner. Beer or spirits should never be given except under medical advice in case of illness.

Cooking.—Not only choose the right material, but make it digestible and appetising by proper cooking. Advice may be sought from the Health Visitors, who will give you directions concerning the preparation of cheap, nourishing dishes, which have all been carefully selected for the purpose.

For the purpose of this study, the following data were collected from the records of the Department of the Interior, Bureau of Land Management, for the years 1900 to 1950. The data were obtained from the files of the Bureau of Land Management, which are maintained in the Department of the Interior, Bureau of Land Management, Washington, D. C.

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HEALTH REPORT

HEALTH REPORT FOR 1909.

FOR

1909

OF THE

Croydon Rural District

BY THE

Medical Officer of Health.

Submitted to the Council 3rd February, 1910.

WALLINGTON

WILLIAM PILE, LTD., 5 AND 6, DANBURY TERRACE.

Croydon Rural District Council.

HEALTH REPORT FOR 1909.

GENTLEMEN,

I beg to submit to you my twelfth Annual Report upon the Health and Sanitary condition of the District.

Appended are the statistical tables, the report on the working of the Factory and Workshops Act, in accordance with the requirements of the Home Office, and a tabulated list of all Dairies, Cowsheds, etc., situate within the district.

The Death Rate, 9·0 per thousand of population, is much lower than in any previous year which I have been your Medical Officer. The Birth Rate is also very low being 25·0 per thousand of population.

The year 1909, generally speaking, has been a fairly healthy one, with no very serious outbreaks of epidemic disease.

It is with pleasure that I have again to place on record the kind help and assistance which I have received from the Council and all its officers with whom my work has brought me into contact.

I have the honour to be,

Your obedient servant,

C. M. FEGEN.

3rd February, 1910.

REPORT.

I.—AREA AND POPULATION.

The District consists of eight parishes, and the total area is 21,001 acres. The largest Parish is Conington, with 4,814 acres, and the smallest Wallington, with 828 acres.

In the year 1891, at the time of the last Census, the population was 38,071, but counting the three large institutions, viz. — The Asylum, the Holborn Workhouse, and the Holborn Schools.

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REPORT.

I.—AREA AND POPULATION.

The District consists of eight parishes, and the total area is 21,001 acres. The largest Parish is Coulsdon, with 4,314 acres, and the smallest Wallington, with 823 acres.

In the year 1901, at the time of the last Census, the population was 38,071, but omitting the three large institutions, viz. :—The Cane Hill Asylum, the Holborn Workhouse, and the Holborn Schools, the total population was 34,180, of which number 16,202 were males and 17,978 were females.

At the middle of 1909 the population was estimated to be 64,688, but, omitting all institutions, the corrected number was 60,300, of which number 28,825 were males and 31,475 were females.

The number of inhabitants in the three large institutions has increased from 2,468 in 1891 to 3,564 in 1909. There has been, however, a decrease of 78 since the middle of 1908.

The number of occupied houses in the District was :

In 1881	...	...	...	...	3,730
„ 1891	...	...	...	...	4,845
„ 1900	...	...	...	...	6,597
„ 1901	...	...	...	...	7,027
„ 1902	...	...	...	...	7,694
„ 1903	...	...	...	...	8,316
„ 1904	...	...	...	...	9,421
„ 1905	...	...	...	...	10,493
„ 1906	...	...	...	...	11,614
„ 1907	...	...	...	...	13,086
„ 1908	...	...	...	...	11,362
„ 1909	...	...	...	...	11,905

It will be seen that there has been an increase of 8,175 in the number of houses occupied during the last 28 years.

The subjoined table shows the number of houses in each parish in the years 1891, 1901, 1902, 1903, 1904, 1905, 1906, 1907, 1908, 1909, and also the increases between the years 1891 and 1901, 1901 and 1902, 1902 and 1903, 1903 and 1904, 1904 and 1905, 1905 and 1906, 1906 and 1907, 1907 and 1908, 1908 and 1909, and 1891 and 1909.

The number of occupied houses in the District was:

1891	11,000	...	...	...	...
1901	11,000	...	...	...	...
1902	11,000	...	...	...	...
1903	11,000	...	...	...	...
1904	11,000	...	...	...	...
1905	11,000	...	...	...	...
1906	11,000	...	...	...	...
1907	11,000	...	...	...	...
1908	11,000	...	...	...	...
1909	11,000	...	...	...	...

Parish.	Number of Houses										Increase									
	In 1891	In 1901	In 1902	In 1903	In 1904	In 1905	In 1906	In 1907	In 1908	In 1909	Between 1891 and 1901	Between 1901 and 1902	Between 1902 and 1903	Between 1903 and 1904	Between 1904 and 1905	Between 1905 and 1906	Between 1906 and 1907	Between 1907 and 1908	Between 1908 and 1909	Between 1891 and 1909
Addington ..	132	131	120	120	138	134	139	139	139	140	—1	—11	—	18	—4	5	—	—	1	8
Beddington ..	442	751	825	933	1035	1169	1442	1480	1700	1858	309	74	108	102	134	273	38	220	153	1416
Coulsdon ..	537	818	903	1001	1244	1365	1512	1643	1720	1817	281	85	98	243	121	147	131	77	97	1280
Mitcham ..	2055	2743	2934	3076	3337	3806	4177	4874	5131	5359	688	191	142	261	469	371	697	257	228	3304
Morden ..	138	186	155	196	210	206	205	224	236	225	48	9	1	14	—4	—1	19	12	—11	87
Sanderstead ..	96	203	211	250	309	342	425	492	545	577	107	8	39	59	33	83	67	53	32	481
Wallington ..	710	1063	1168	1272	1388	1464	1546	1564	1668	1714	353	105	104	116	76	82	18	104	46	1004
Woodmansterne	81	105	120	120	140	146	183	206	223	215	24	15	—	20	6	37	23	17	—8	134
	4191	6000	6476	6968	7801	8632	9629	10622	11362	11905	1809	476	492	833	831	997	993	740	543	7714

From this table it will be observed that activity in building has taken place at Mitcham with 228 and Beddington with 158 new houses.

In the District generally the average number of persons occupying each house in 1891 was 5·4, but at the census in 1901 it was found to have fallen to 4·8, while for 1909 it is estimated at 5·0.

The average number of persons to each inhabited house remains, as a general rule, fairly constant for each locality, though varying considerably in different parishes, according to the class of house erected. In many parts of the district "tenement" houses or houses let in flats have been built, and these houses have, of course, a considerably larger number of inmates. More particularly is this the case in Mitcham.

The "Natural increase" during the year was 968, as against 903 in the previous year.

In 1897 the increase was	...	...	474
" 1898	"	...	392
" 1899	"	...	379
" 1900	"	...	460
" 1901	"	...	543
" 1902	"	...	552
" 1903	"	...	730
" 1904	"	...	763
" 1905	"	...	879
" 1906	"	...	921
" 1907	"	...	986
" 1908	"	...	903
" 1909	"	...	968

And this has amounted to 11,612 since the census in 1891.

The "Natural increase" was greatest in 1909 in Mitcham with 478, Coulsdon with 174, and Beddington with 136.

Excess of Births over Deaths.

	Deaths in 1909.	Births in 1909.	Excess of Births in 1909.
Addington ...	5	14	9
Beddington ...	58	194	136
Coulsdon ...	49	223	174
Mitcham ...	318	796	478
Morden ...	11	29	18
Sanderstead ...	15	54	39
Wallington ...	80	165	85
Woodmansterne	9	38	29
	545	1513	968

II.—VITAL STATISTICS.

BIRTHS.

The number of Births registered in the District was 1513, as compared with 1487 last year. Of this number 33 children were registered as being illegitimate. This gives an illegitimate birth-rate of 2·1 per cent. of total births, which should be considered satisfactory.

	No. of Illegitimate Births.		Percentage.
Beddington ...	3	...	1·5
Coulsdon ...	4	...	1·7
Mitcham ...	22	...	2·7
Morden ...	2	...	6·8
Sanderstead ...	1	...	1·8
Wallington ...	1	...	0·6

The birth rate for the entire District was 25·0, as compared with 25·8 last year.

The birth rate in England and Wales in 1909 was 25·6 per thousand of the population, which is 0·9 per thousand below the rate in 1908, and lower than the

rate in any other year on record. Compared with the average in the 10 years, 1899-1908, the birth rate in 1909 shows a decrease of 2·2 per thousand.

REGISTERED BIRTHS AND BIRTH RATES.

Parish.	Estimated Population middle of 1909.	Registered Births.					Birth Rates.				
		1905	1906	1907	1908	1909	1905	1906	1907	1908	1909
Addington ..	695	11	11	7	11	14	16·4	15·8	10·1	15·9	20·1
Beddington ..	8740	123	157	162	176	194	21·0	22·2	22·8	22·0	22·1
Coulsdon ..	9300	150	183	163	200	223	21·2	23·2	19·1	22·7	23·9
Mitcham ..	27900	642	721	716	863	796	31·1	31·9	27·7	32·3	28·5
Morden ..	1125	20	29	24	26	29	19·5	28·2	21·8	22·0	25·7
Sanderstead ..	2700	28	35	49	53	54	16·3	17·1	16·5	20·6	20·0
Wallington ..	8750	155	155	138	139	165	19·8	18·5	16·4	16·0	18·8
Woodmansterne	1090	21	29	44	19	38	27·2	30·5	41·5	16·5	34·8
	60300	1150	1320	1303	1487	1513	25·7	26·7	24·6	25·8	25·0

DEATHS.

Exclusive of those Deaths which occurred in Public Institutions situated within the district, the deaths registered during the year numbered 545. This number includes those persons from within the district who died outside, either at the Workhouse, Workhouse Infirmary, or at the General Hospital at Croydon; the Surrey County Asylum at Brookwood; the Cottage Hospital at Carshalton; or the Council's Isolation Hospital at Beddington Corner. The number of these Deaths was 104.

The mortality corresponds to a death rate of 9·0 per thousand of population, as against 10·1 last year, 9·7 in 1907, 11·3 in 1906, 9·6 in 1905, 11·0 in 1904, and 10·4 in 1903, and as against an average of 11·1 during the ten years 1899-1908.

MORTALITY.*

Parish.	Population esti- mated to middle of 1909.	Deaths.					Death Rates.				
		1905	1906	1907	1908	1909	1905	1906	1907	1908	1909
Addington ..	695	11	4	7	2	5	16.4	5.7	10.1	2.9	7.1
Beddington ..	8740	39	48	55	56	58	6.7	6.8	7.7	7.0	6.6
Coulsdon ..	9300	39	79	69	88	49	5.4	10.0	8.1	10.0	5.2
Mitcham ..	27900	270	308	286	330	318	13.0	13.6	11.0	12.3	11.3
Morden ..	1125	15	9	12	10	11	14.4	8.7	10.9	8.4	9.7
Sanderstead ..	2700	8	11	16	13	15	4.7	5.3	6.8	5.0	5.5
Wallington ..	8750	62	96	76	77	80	7.8	11.5	9.0	9.0	9.1
Woodmansterne	1090	5	6	8	8	9	6.4	6.3	7.5	6.9	8.2
	60300	449	561	529	584	545	9.6	11.3	9.7	10.1	9.0

* Exclusive of deaths of non-residents occurring in public institutions in the District, but inclusive of deaths of residents occurring in public institutions outside the District.

N.B.—The number of deaths occurring to non-residents in public institutions in the District in 1909 was 208.

MORTALITY AT DIFFERENT AGES.

Infantile Mortality.—The number of infants under the age of one year who died during 1909 was 130, as against 126 in 1908, 170 in 1907, 199 in 1906, 138 in 1905, and 158 in 1904, the infantile mortality rate, therefore, being 85 per thousand births, as against 84 in 1908, 103 in 1907, 124 in 1906, 98 in 1905, and 123 in 1904, and an average of 111 in the ten years 1899 to 1908.

The deaths of children under the age of one year, numbering 130, gives a percentage rate of 23.8 of the deaths at all ages, as against 21.5 in 1908, 26.1 in 1907, 29.3 in 1906, 26.0 in 1905, and 29.3 in 1904.

The rate of Mortality in England and Wales among infants under one year of age to 1000 registered births, was 109, which is 11 per 1000 below the rate in 1908. The rate in 1909 was lower than the rate in any other year on record. Compared with the average in the ten years 1899-1908, the rate of infantile mortality in 1909 showed a decrease of 29 per 1000.

The deaths of children between the ages of one and five years, numbering 57, gives a percentage of 10·4 of total deaths, as against 12·8 in 1908, 10·7 in 1907, 12·9 in 1906, 7·7 in 1905, and 8·0 in 1904.

The deaths occurring in persons over 65 years of age, numbering 141, give a percentage of 25·8 of total deaths, as against 26·0 in 1908, 22·9 in 1907, 21·5 in 1906, 27·4 in 1905, and 22·8 in 1904.

Parish.	Children under One Year.				Children between One and Five.				People over 65 Years.			
	1906	1907	1908	1909	1906	1907	1908	1909	1906	1907	1908	1909
Addington ..	..	1	..	1	2	1	..	..	1	3	1	2
Beddington ..	11	5	6	17	6	7	6	4	14	14	19	22
Coulsdon ..	14	22	17	9	9	7	6	4	18	13	26	18
Mitcham ..	118	92	92	84	54	37	48	41	47	53	69	69
Morden ..	1	..	2	3	..	..	3	1	2	6	2	2
Sanderstead ..	..	3	1	4	1	1	3	..	3	2	2	3
Wallington ..	19	13	7	9	6	4	7	7	31	25	32	23
Woodmansterne	4	4	1	3	..	1	2	..	2	1	1	2
Totals ..	167	140	126	130	78	58	75	57	118	117	152	141

CAUSES OF DEATHS.

The deaths registered during 1909 included—

17	from Measles.
10	„ Scarlet Fever.
6	„ Whooping Cough.
18	„ Diphtheria.
16	„ Diarrhœa.
2	„ Typhoid Fever.
2	„ Puerperal Fever.
40	„ Phthisis.
10	„ Influenza.
19	„ Injuries (self-inflicted or otherwise).
97	„ Lung Complaints.
50	„ Cancer (malignant disease).
8	„ Alcoholism (cirrhosis of liver).

The Zymotic Death Rate is a term commonly applied to the rates of deaths occurring from the seven principle zymotic complaints:—Small Pox, Measles, Scarlet Fever, Diphtheria, Whooping Cough, Diarrhœa and “Fever”; which latter term includes Typhus. Typhoid (or Enteric) and Puerperal Fevers. During the year 1909 the deaths from these complaints numbered 71, the Zymotic Death Rate therefore, being 1·1 per 1,000 of population, as compared with 1·5 in 1908, 1·6 in 1907, 1·7 in 1906, 0·9 in 1905, and 1·5 in 1904.

The deaths from Phthisis numbered 40, as against 50 last year, 51 in 1907, 42 in 1906, 38 in 1905, and 37 in 1904. The Phthisical Death Rate is, therefore, 0·6 per thousand of the population, as against 0·8 last year, 0·7 in 1907, 0·7 in 1906, 0·6 in 1905, and 0·7 in 1904.

The deaths from Pulmonary Diseases numbered 97, as against 94 last year, 97 in 1907, 88 in 1906, 84 in 1905, and 126 in 1904. This gives a Death Rate of 1·6, as against 1·6 last year, 1·4 in 1907, 1·4 in 1906, 1·5 in 1905, and 2·6 in 1904.

The deaths from Influenza numbered 10 as against 14 last year, 14 in 1907, 8 in 1906, 7 in 1905, and 10 in 1904. This gives a Death Rate of 0·1 per thousand of population, as against 0·2 last year, 0·2 in 1907, 0·1 in 1906, 0·2 in 1905, and 0·2 in 1904.

To various forms of violence, whether self-inflicted or otherwise, 19 deaths were due, in all of which cases inquests were held. This gives a death Rate of 0·3, as against 0·3 last year, 0·3 in 1907, 0·3 in 1906, 0·2 in 1905, and 0·48 in 1904.

The Death Rate in England and Wales in 1909 was 14·5 per 1000 of estimated population, and this was 0·2 per 1000 below the rate in 1908, and lower than the rate in any year on record. Compared with the average in the ten years 1899-1908, the death rate in 1909 showed a decrease of 1·6 per 1000.

Birth Rate, Death Rate, and Analysis of Mortality in the year 1909.

Cols.	ANNUAL RATE PER 1000 LIVING.										Deaths under one year to 1000 Births.
	Births.	Deaths.	Principal Epidemic Diseases. (Cols. 4-10)	Small-pox.	Measles.	Scarlet Fever.	Diphtheria	Whooping Cough.	Fever.	Diarrhoea.	
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.
England and Wales ..	25·6	14·5	1·12	0·00	0·35	0·09	0·14	0·20	0·06	0·28	109
76 Great Towns	25·7	15·6	1·42	0·00	0·48	0·11	0·15	0·24	0·06	0·38	118
143 smaller Towns	24·8	14·5	1·08	0·00	0·33	0·09	0·16	0·17	0·06	0·27	111
England and Wales, less the 218 Towns ..	25·6	13·6	0·80	0·00	0·21	0·06	0·14	0·16	0·06	0·17	98
Croydon Rural District ..	25·0	9·0	1·17	0·00	0·28	0·16	0·19	0·09	0·06	0·26	85

DEATHS IN INSTITUTIONS.

The Deaths in Institutions situate in the District numbered 208, as against 161 in 1908, 239 in 1907, 204 in 1906, 178 in 1905, and 210 in 1904.

The deaths included :—

13	from	Phthisis.
19	„	Cancer (malignant disease).
33	„	Lung Complaints.
28	„	Heart Diseases.
83	„	Brain Diseases.

III.—INFECTIOUS DISEASE.

The Infectious Disease (Notification) Act has been in force in this District since the year 1890. In July of that year Measles was also included in the list of notifiable diseases, and continued to be a notifiable disease until June, 1909. In the summer of 1894 it was considered necessary that Diarrhœa should, for a short period, also be considered a notifiable disease. Owing to the epidemic of Small Pox that existed in and around London, as well as the Croydon Rural District, during the latter part of 1901 and the beginning of 1902, Chicken Pox was also made a notifiable disease, and continued to be so until the end of July, 1903. It was of great assistance in combating the outbreak of Small Pox. In April, 1907, Cerebro-Spinal Meningitis was also made a notifiable disease for twelve months.

The Infectious Disease (Prevention) Act is also in force in this District.

During the year 883 cases of Infectious Disease were either notified to the Sanitary Department or came to its knowledge through the vigilance of its Inspectors. Of this number 472 were due to Measles. Consequently,

excluding this disease, there were 411 cases of other notifiable diseases, as against 475 in 1908, 591 in 1907, 439 in 1906, 397 in 1905, and 333 in 1904.

Reference to Table III. at the end of the report will show:—

Firstly, cases notified in the whole District, with the ages of incidence and the nature of the Infectious Disease.

Secondly, the total number of cases (and nature of the disease) in each locality.

Thirdly, the number of cases removed from each locality to the Isolation Hospital.

INFANTILE SUMMER DIARRHŒA.

During the summer 10 deaths were registered as occurring from Infantile Summer Diarrhœa. It is a very satisfactory feature that the deaths from this complaint have fallen from 71 in 1906 to 40 in 1907, to 21 in 1908, and from that number to 10 this year. This gives a death rate of 0·16 per thousand of population, as against 0·36 last year, and 0·79 in 1907.

In every case a careful enquiry was made, and reference to Table XIII. in the appendix will show the circumstances, feeding, and family history of the victims to this, to some large extent, preventable disease in 1909. The parishes and roads (or streets) invaded during the past nine years will be found in Table XIV.

SCARLET FEVER.

During the year 212 cases of Scarlet Fever were notified, which is only three cases more than were notified last year, and is 105 less than the number notified during 1907. Of the 210 cases the disease had a fatal

ending in only 10 cases. One hundred and sixty-five cases were removed to the Isolation Hospital.

DIPHTHERIA.

During the year 150 cases of Diphtheria came under the notice of the Sanitary Authority. Of this number 124 were removed to the Hospital, and the remainder, viz., 26, were nursed at home. Of the number removed to the Hospital, 16 died, giving a death rate of 12·9 per 100 cases; of those remaining at home 2 died, giving a death rate of 7·6 per 100 cases.

Mitcham, as might be expected with its larger and poorer class population, was responsible for no less than 108 cases, Beddington coming next with 19 cases. It may be fairly assumed that schools influence very materially the incidence of the disease. More particularly is this influence felt when the epidemic of Diphtheria is not of a very severe type, and this is frequently noticed at the commencement of an epidemic. It should be remembered that for practical purposes cases of Diphtheria may be divided into two classes, viz., Clinical Diphtheria, in which all the symptoms of true Diphtheria are found at once in the patient, and the patient can at once be segregated, and all infection by direct contact be avoided for persons who are not immune to Diphtheria. These cases offer but little trouble to the Sanitary Authority, as all necessary steps can be at once taken to prevent any further spread. But it is to the second class of case, viz., the Bacteriological Diphtheria, in which the symptoms are so vague and so indeterminate that the true diagnosis of the disease can only be arrived at by bacteriological examination, that is the source of most outbreaks. Now, in a certain

number of cases it is by no means uncommon for no medical man to be called in, and, unfortunately, in some few instances, even when medical assistance has been sought, none of the secretions of the throat or nose have been submitted to bacteriological examination for the determination of the disease from which the patient is suffering, and it is these cases, which are possibly of a mild nature, that are the occasion of much of the increase in the number of cases of Diphtheria, more particularly in the case of children who have been so little affected during the few days of their unrecognised condition that they are allowed to return to school in a highly infective condition.

The Council has placed at the service of all medical practitioners in the district, not only a supply of Diphtheria Antitoxin, but also has made the necessary arrangements for having a bacteriological examination made free of charge, so that on the score of cost no reason should now exist for any medical practitioner not availing himself of the facilities placed at his disposal. The Council, it would be well here to mention, has done this most excellent service in the way of securing early detection and treatment of this most fatal form of disease since 1901, and it was, I believe, one of the first, if not the first, Councils to take such steps.

With regard to a certain class of cases which in themselves are not either typically clinical or bacteriologically true Diphtheria, the difficulty in dealing with them arises. The symptoms are practically only identical with an ordinary case of sore throat, possibly associated with some slight nasal discharge, and on bacteriological examination of swabbings from the throat

or nasal passages there are found the so-called pseudo diphtheritic or Von Hoffman bacilli. Now, bacteriologists say that there is no connection, directly or indirectly, between the bacillus of Klebs Löffler (the true Diphtheria) and the bacillus of Von Hoffman (the pseudo Diphtheria); this is true from an academic point of view, but it is a coincidence that in many outbreaks of Diphtheria at schools it has been found that a large number of the children in an invaded classroom have the bacillus of Von Hoffman in the throat or nasal passages, and that it is impossible to find that the children themselves have been ill at all. It is also a remarkable fact that in a great number of cases where repeated bacteriological examinations of the throat have been made throughout the whole of the illness, the Klebs Löffler bacilli has alone been found during the earlier weeks, although every endeavour has been made to find co-existing with the Klebs Löffler the Von Hoffman; still, as the case approaches convalescence the Klebs Löffler bacillus disappears and the Von Hoffman appears. Now, excluding the direct evidence of bacteriologists with regard to the relationship of the two bacilli, it would seem, from a purely clinical point of view, that the one bacillus is merely an attenuated form of the other, and it is most desirable that some definite decision amongst sanitarians should be come to as to what should be done in all cases where the bacillus of Von Hoffman alone is found. Personally, I am inclined to consider and treat them as mild cases of true Diphtheria, and not to confine the term "Diphtheria" to merely those cases where the Klebs Löffler bacillus

alone is found, but to treat and consider all these cases as coming under the generic term of Diphtheria.

It is interesting to note that the infective condition in patients who either have the true or pseudo bacillus of Diphtheria has been prolonged owing to the existence of decayed teeth, and in many cases where I have been able to remove the teeth the bacilli have very rapidly disappeared. During the year it was noted that in 73 per cent. of the cases of Diphtheria decayed teeth were found to be present.

No case is discharged from the Hospital until such time as all congestion of the throat or fauces has disappeared, or where there has been any cough or any discharge, such patient is not considered free from infection until cured of these sequelæ, as well as the absence of either of the bacilli associated with the disease on two swabbings on following days.

In attempting to trace outbreaks of Diphtheria during the last few years, I have been struck with the large number of cases which have occurred as a result of infection from a primary case which has not been recognised, nor has the individual even been appreciably unwell, but in whom I have discovered in many instances either the bacillus of Diphtheria or the existence of some one or other of the nervous sequelæ associated with an attack of Diphtheria, and that, in addition to the usual forms of paralysis, that there have been dilations of the pupils, which do not react readily to light; this dilation of pupils I find existing in a large number of cases sent in to the Hospital for treatment in the earlier stages of disease. It cannot

be too forcibly urged that in all cases of sore throat which may suggest the possibility of Diphtheria, antitoxin should be at once given, pending the result of an examination of swabs of the throat, as in this way much valuable time in the treatment of the disease will not be lost, and the sooner the antitoxin is used the greater the chance of ultimate recovery of the patient is assured. It would be well to controvert a statement that one hears very often, viz., that the Diphtheria antitoxin sometimes kills the patient by inducing heart failure. Now what really happens is, firstly, that the case has not come under treatment sufficiently soon, and therefore the dose of antitoxin has not been given sufficiently early to ensure complete recovery, but it has prevented the immediate death of the patient, and has given the patient a chance which, without the antitoxin, it would not have had of ultimate recovery. The poison of Diphtheria, although local at first, soon becomes a constitutional one, and unless counteracted by the administration of antitoxin, may act upon the muscular walls of the heart, inducing a condition of fatty degeneration (myocarditis).

Occasionally, however, such degeneration is not found upon post-mortem examination, and the death of the patient may be due to heart failure, owing to paralysis of the cardiac branches of the par vagum, or possibly the little understood condition status lymphaticus may exist. It is noticeable that most cases of failure of the heart occur between the end of the first week and the end of the third week of the disease, and that in such cases, where vomiting occurs of a "coffee ground" material, death is always to be expected.

TYPHOID FEVER.

A large decrease also took place in the number of Typhoid Fever cases notified during the year, viz., 9, as against 16 last year, 15 in 1907, and 33 in 1906. Five of these cases were removed to the Isolation Hospital. Of the 9 cases the disease had a fatal ending in 2 cases.

PHTHISIS.

A decrease took place in the number of deaths registered as occurring from Phthisis, viz., 40, as against 50 last year.

During the year I have examined the sputum of 41 persons, with a positive result in 31 cases.

Disinfection has again been largely carried out in the rooms occupied by Phthisical persons, and the clothing, bedding, etc., has been systematically dealt with at the Council's Disinfecting Station.

ERYSIPELAS.

A slight decrease took place in the number of cases of Erysipelas notified, viz., 33, as against 36 last year. Three of these cases were removed to the Isolation Hospital. Of the 33 cases, 2 had a fatal ending.

PUERPERAL FEVER.

During the year 5 cases of Puerperal Fever were notified, as against 10 last year.

CEREBRO-SPINAL MENINGITIS.

Two cases of Cerebro-Spinal Meningitis were notified during the year, both cases occurring in the parish of Mitcham, one case being a child of $2\frac{1}{2}$ and the other in a child of six months. One case was removed to the Isolation Hospital.

MEASLES.

During the year it was deemed advisable to discontinue Measles as a notifiable disease, and the notification of this disease therefore ceased during June. The number of cases notified or reported during the first six months of the year were 472. Seventeen deaths were registered during the year as occurring from Measles.

IV.—PREVENTIVE MEASURES.

During the year 388 patients were admitted to the Isolation Hospital at Beddington Corner, including 90 patients from neighbouring authorities.

The usual routine preventive and precautionary measures have been continued as in previous years to check the extension of infectious disease with most satisfactory results. Isolation, disinfection and quarantine have been carried out under the careful and intelligent supervision of the Sanitary Staff, and outbreaks of infectious disease have been very materially limited.

Unrecognised cases as in previous years have been the origin of most outbreaks, and such unrecognised cases are always likely to exist in all diseases, especially if the attack is a very mild type, so mild indeed are some of these cases that the advice of a medical man is, by the parents of the patients, considered superfluous. These, unfortunately, are the cases which prove the nuclei of almost every epidemic.

Immediately on notification being received of the existence of cases of Scarlet Fever, Diphtheria, Typhoid

Fever, and Small Pox, it is the custom to offer hospital treatment, and, if the offer is accepted, the patient is at once removed to the Hospital; in no case should longer than two hours elapse after receiving the intimation of the existence of infectious disease in any house before the patient, if for removal, is in the Hospital. Any delay is to be deprecated in all cases of diphtheria.

In all cases of Typhoid Fever which are not admitted to the Hospital, sanitary pails, of a special character, furnished with air-tight screw lids, are left at the infected houses for the reception of all excreta and other waste products of the sick room. These pails are collected daily, and their contents are dealt with in the destructor at the Hospital.

In every case of Notifiable Disease enquiries are made and recorded as to the number of persons in the house, where they are employed, milk supply, water supply, laundry, conditions of drains, etc., together with the history of the case and the probable cause of infection. Notice is at once sent to any school attended by children from infected houses, and these children are then excluded from school on my certificate, and are not allowed to return until due notice has been given to the school authorities of their freedom from possible infection.

Disinfection of infected rooms is carried out by fumigation with sulphur dioxide or formic aldehyde, and of the bedding and the clothes in the steam disinfector at the disinfecting station at the Isolation Hospital. Disinfectants are supplied free of charge during illness.

After the rooms have been disinfected the owners of the premises are required to strip and whitewash the ceilings and walls, under the supervision of the Sanitary Inspectors. This applies to all cases of Infectious Disease, and in the event of cases of Phthisis or Cancer occurring, on request, the rooms, as well as the bedding, clothing, etc., are from time to time disinfected.

During the year 355 houses and 8,740 articles were disinfected.

The Council places at the disposal of all medical practitioners, free of charge, means of having the diagnosis of all cases of infectious or contagious disease confirmed or otherwise by bacteriological examination, and also, at the end of the illness, for determining whether the patient is free from the specific bacterium or not. During the year 896 such examinations have been made.

While with regard to Diphtheria it is the custom to consider each case infective until the bacteriological examination shows the throat to be free from the true or pseudo-diphtheritic bacillus.

V.—ISOLATION HOSPITAL.

The Isolation Hospital, which is situated at Beddington Corner, was opened at the beginning of March, 1899, and since that date 2,788 patients have been admitted.

Accommodation.—At the time the Council approved of the plans for the erection of the Isolation Hospital,

the population of the district being about 28,000, it was thought that it would be sufficient if accommodation was provided for 28 patients, viz., 10 Scarlet Fever cases, 10 Diphtheria cases, 4 Typhoid Fever cases, and 4 beds for observation purposes. Between the approval of the plans by the Local Government Board and the completion of the Hospital, a very material increase had taken place in the population of the district, so that almost from its being thrown open for the reception of patients, the accommodation proved unequal to the demand.

In each succeeding year the shortage of beds became more pronounced, and in 1905 a very considerable enlargement took place by the provision of an additional Scarlet Fever Pavilion of 22 beds. At this time the hand laundry was converted into a steam laundry, and also some additional dormitory accommodation provided in the Administrative Block.

In 1907 and 1908 very great pressure was placed upon the resources of the Hospital, indeed, on many occasions it was unavoidably overcrowded, and in April, 1909, after much consideration, the Council decided to apply to the Local Government Board for sanction to considerably increase the accommodation of the Hospital itself, and, in addition, to provide quarters for a Resident Medical Officer. The Local Government Board, however, not entirely agreeing with all the proposals for extension, reduced the number of beds to be provided, and considerably curtailed the scheme of enlargement of the Administrative Block.

However, part of the scheme of extension put forward by the Council seems to be in a fair way to be carried out, and it is hoped that within the next six months there will be in working order a new Pavilion of 12 beds.

Staff.—The Staff consists of—

1 Matron	5 Servants
1 Assistant Matron	5 Wardmaids.
10 Nurses	1 Seamstress.
2 Laundresses	1 Gardener
2 Engineers	Porter and Portress

Patients.—During the year 388 patients have been admitted, of which number

228	were	Scarlet Fever
151	„	Diphtheria
5	„	Typhoid Fever
1	was	Cerebro-Spinal Meningitis.
3	were	Erysipelas

Twenty of these patients were admitted by arrangement with other authorities, and 70 were admitted from Merton.

Of the 388 patients admitted, 357 were discharged as cured, and 31 died (7 from Scarlet Fever, 21 from Diphtheria, 1 from Typhoid Fever, 1 from Cerebro Spinal Meningitis, and 1 from Erysipelas).

Very careful examination of the throat, nasal passages, and the teeth of every patient admitted to the Hospital was made, and it was found that out of the 379 Scarlet Fever and Diphtheria patients admitted, 206 had

enlarged tonsils, 29 had adenoid growths, 5 had nasal polypi, 11 had had attacks of tonsilitis, 4 Scarlet Fever and 3 Diphtheria patients had had previous attacks of the same disease for which they were admitted, and 43 were found to be suffering from both Scarlet Fever and Diphtheria.

During the year, after admission to the Scarlet Fever wards, it was found that several cases Whooping cough, measles, chicken pox, and ringworm were coincident complications of the disease.

Parish.	Scarlet Fever.		Diphtheria.		Typhoid Fever.		Cerebro-spinal Meningitis.		Erysipelas.		Total.	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Addington ..	..	..	1	1	..	..	..	..	..	..	1	1
Beddington ..	24	..	15	..	..	..	..	..	..	..	39	..
Coulsdon ..	26	2	2	..	..	..	..	..	..	..	28	2
Merton ..	47	..	23	5	..	..	..	..	..	..	70	5
Mitcham ..	84	2	96	14	4	1	1	1	3	1	188	19
Morden ..	7	..	1	1	..	..	..	..	..	..	8	1
Sanderstead ..	6	1	1	..	..	..	..	..	..	..	7	1
Wallington ..	9	..	7	..	1	..	..	..	..	..	17	..
Woodmansterne ..	9	2	1	..	..	..	..	..	..	..	10	2
Cases admitted by arrangement—												
Caterham ..	16	..	4	..	..	..	..	..	..	..	20	..
Totals ..	228	7	151	21	5	1	1	1	3	1	388	31

VI.—GENERAL.

Water Courses.—The condition of all water courses is kept under the constant supervision of your officers.

House Refuse Collection.—The collection of house refuse has been again extended during the year, and there is practically no part of the district which is without a frequent and adequate collection.

Nuisances have been dealt with with regard to the deposits made in this district of house refuse, which is brought in, both by road and rail, from the Metropolis.

Legal Proceedings.—In the following case legal proceedings were taken :—

Particulars.	Result.
For contravention of the Bye-laws for securing the decent lodging accommodation of persons engaged in picking fruit, vegetables, etc. (two summonses)	Fined £2 and costs on each summons.

REGULATED TRADES.

(1) DAIRIES, COWSHEDS AND MILKSHOPS.

There were 102 premises registered under the Dairies, Cowsheds and Milkshops Order, 1885, at the end of the year. This is 9 more than the previous year.

A very considerable amount of attention is paid to all the dairies, cowsheds, milkshops, and the milk supply generally in the district. During the year 527 visits of inspection have been paid.

As milk is the staple food for all children and most invalids, it is absolutely essential that the milk should be from healthy cows kept in a healthy and natural manner, and that no preservatives whatever should be used. It will be found that if milk be properly cooled immediately, it will keep sweet for a considerable time, provided that any utensil which is used for its reception, either in milking or subsequent handling, is kept perfectly clean.

An appendix will be found in which the state of every dairy, cowshed, etc., is set forth.

(2) SLAUGHTERHOUSES.

There are 16 slaughterhouses in the district, this being one less than in the previous year. All slaughterhouses are regulated by the bye-laws of the Council.

The total number of visits paid to these premises during the year was 317, and on 8 occasions complaint had to be made of uncleanness.

(3) BAKEHOUSES.

There are 32 bakehouses in the District. This is 2 less than the previous year.

(4) PIGGERIES

There are 35 piggeries in the district. This is the same number as in the previous year. All the piggeries are receiving special attention from your officers, but several complaints were received during the hot weather respecting the piggeries, particularly referring to those in the Eastfields, Mitcham.

Parish.		Dairies.	Cowsbeds.	Milkshops.	Butcher's Shops.	Slaughter-houses.	Piggeries.	Bakehouses.	Total.
Addington	..	..	2	..	..	..	..	..	2
Beddington	..	1	3	4	5	1	2	5	21
Coulsdon	..	5	10	11	9	5	2	5	47
Mitcham	..	12	8	26	18	7	27	16	114
Morden	..	..	4	..	..	..	4	2	10
Sanderstead	..	2	4	..	1	..	..	..	7
Wallington	..	2	2	6	6	3	..	4	23
Woodmansterne ..	..	..	..	..	..	..	..	..	..
Totals ..	..	22	33	47	39	16	35	32	224

HOUSING OF THE WORKING CLASSES ACT.

During the year 6 houses were dealt with under the Housing of the Working Classes Act. In four instances the houses were put into a satisfactory condition, and the other two houses were voluntarily closed, and remained so at the end of the year.

NOTIFICATION OF PULMONARY TUBERCULOSIS.

No system of notification, voluntary or otherwise, with regard to human tuberculosis is in operation in the district, except with regard to pauper patients, when the cases are notified under the Public Health (Tuberculosis) Regulations, 1908, but in many cases the sputum of tuberculosis persons has been submitted to bacteriological examination, and disinfection of the rooms and clothing is periodically carried out.

NOTIFICATION OF BIRTHS ACT, 1907.

The Notification of Births Act, 1907, has not been adopted, although I recommended to the Council the advisability of so doing.

MEDICAL INSPECTION OF SCHOOL CHILDREN.

The medical inspection of school children is carried out by the Education Department of the Surrey County Council, but I have in many instances been called in to see children who have been suspected to be suffering from infectious or contagious disease, and my services are always available for this purpose on an application from the Heads of the various schools. The sanitary condition of the schools within the area of the Croydon Rural District has received ample attention.

SANITARY SURVEYOR'S DEPARTMENT.

I am indebted to Mr. Chart for subjoined information :—

SEWAGE DISPOSAL WORKS.

The use of the new contact bed has considerably improved the condition of the land filtration area by the relief afforded it, but it will be necessary, owing to the increasing population, to extend these beds during the ensuing year.

Sewer extensions are being proceeded with at Smithambottom Lane and new roads abutting thereon, and Hayes Lane and Welcomes Road, Coulsdon, to obviate the necessity of draining the houses to cesspools; a new outfall sewer being constructed through the Woodcote Valley to Purley to receive the first-named sewer.

NEW STREETS AND BUILDINGS.

The number of new streets and buildings for which plans have been deposited during the year have been as follows :—

	New Streets.	Public Buildings.	Houses.	Other Buildings.	Total.
Addington	..	..	..	..	..
Beddington	1	..	204	36	241
Coulsdon	5	2	196	25	228
Mitcham	5	2	368	27	402
Morden	..	1	2	..	3
Sanderstead	3	..	38	6	47
Wallington	2	2	103	10	117
Woodmansterne	..	..	5	1	6
Total ..	16	7	916	105	1044

The following new streets have been made up and taken over during the year :—

IN THE PARISH OF BEDDINGTON.

Beddington Grove.

IN THE PARISH OF COULSDON.

Foxley Hill Road.

Cross Road.

Elm Road.

Foxley Gardens.

Hillside Avenue.

Purley Vale.

Silverdale Road.

Sunnydene Road.

IN THE PARISH OF MITCHAM.

Devonshire Road West.

Rutland Road.

Graham Avenue.

IN THE PARISH OF SANDERSTEAD.

Sanderstead Hill East.

Sanderstead Hill West.

IN THE PARISH OF MORDEN.

Queen's Road.

Stanley Road.

Queen's Place.

VII.—INSPECTORS' WORK.

Subjoined appears a summary of the Inspectors' work during the past year. It will be seen that 6,396 visits have been paid by them, as against 8,798 last year, 10,469 in 1907, 9,660 in 1906, 8,905 in 1905, 7,904 in 1904, and 8,083 in 1903.

I have again to bear testimony to the extreme care and accuracy, and the unceasing vigilance which each Inspector displays in the carrying out of his arduous and trying duties.

SUMMARY OF INSPECTORS' WORK FOR THE YEAR 1909.

	White	Inspectors, Payne	Rabbetts	Total
Total number of visits paid ...	1394	2412	2590	6396
Number of complaints received and investigated ...	102	133	78	313
Number of premises inspected ...	379	365	563	1307
Number of nuisances discovered ...	190	146	361	697
Nuisances abated without report ...	151	100	283	534
„ „ after report ...	39	42	90	171
Preliminary notices served ...	147	123	161	431
Legal notices served ...	39	14	25	78
Notices followed by legal proceedings	—	1	—	1

CHARACTER OF WORK DONE—

Houses dealt with under the Housing of the Working Classes Act ...	—	—	6	6
Houses cleansed and repaired generally	55	32	61	148
Ventilation of houses improved ...	3	5	—	8
Overcrowding abated ...	—	6	9	15
Defective roofs repaired ...	21	12	38	71
Houses under-pinned (damp proof course inserted) or damp walls remedied ...	11	5	15	31
Eaves guttering renewed or repaired	9	11	25	45
Water-closets renewed or repaired ...	23	15	57	95
Water-closets provided with water for flushing ...	2	2	82	86
Privies or earth-closets re-constructed, improved or abolished ...	1	3	1	5
Houses supplied with water from the main ...	—	1	1	2

	Inspectors.			Total
	White	Payne	Rabbetts	
Water cisterns or tanks cleansed or covered	3	2	26	31
Yards of houses paved with impervious material	16	8	16	40
Paving of yards repaired	3	14	20	37
Floors of sculleries paved or repaired	17	10	25	52
Ashpits or dustbins provided	22	31	77	130
Additional w.c. provided	1	—	—	1
Cesspools abolished or filled up	1	15	1	17
Cesspools cleansed	5	41	—	46
Houses at which drains were tested	34	72	36	142
Houses at which drains were found defective... ..	31	51	30	112
Houses at which drains were re-constructed or new provided	9	16	36	61
Houses at which drains were cleansed, ventilated, trapped or repaired	23	60	109	192
Number of drain tests made in course of work done under the two previous headings	27	63	80	170
Houses at which inspection chambers in drains were provided	11	15	20	46
Stables provided with drainage	2	2	—	4
Premises at which animals improperly kept were removed	4	3	4	11
Number of inspections of food exposed for sale	109	119	116	344
Urinals cleansed and repaired	1	2	6	9
Smoke nuisances abated	1	1	2	4
Offensive accumulations removed	6	27	21	54
Piggeries repaired and improved	1	1	6	8
Infective houses disinfected and cleansed	128	81	146	355
Number of visits to infective houses...	274	336	348	958
Number of dairies and milkshops	23	36	43	102
Number of visits to ditto	218	148	111	477
Number of complaints as to uncleanliness and neglect of regulations	2	4	6	12
Number of slaughterhouses... ..	6	5	5	16
Number of visits to ditto	147	75	95	317
Number of complaints as to uncleanliness	—	3	5	8
Number of drains opened up for examination (Section 41, P.H.A.)	23	6	15	44
Manure pits provided or repaired	1	—	1	2
Unsound food destroyed	1 Carcase	—	56 lbs.	—

ARTICLES DISINFECTED.

January	...	926	July	...	316
February	...	1021	August	...	620
March	...	810	September	...	998
April	...	431	October	...	366
May	...	801	November	...	862
June	...	987	December	...	607

 8,740

TABLE I.—Vital Statistics of Whole District during 1909 and Previous Years.

YEAR.	Population estimated to middle of each year.	BIRTHS.		DEATHS UNDER ONE YEAR OF AGE.		DEATHS AT ALL AGES. TOTAL.		DEATHS IN PUBLIC INSTITUTIONS.	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District.	DEATHS AT ALL AGES. NETT.	
		Number.	Rate.*	Number.	Rate per 1,000 Births registered.	Number.	Rate.*				Number.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1899	32515	823	25·4	129	156	622	19·1	227	227	49	444	13·6
1900	33304	862	25·8	102	118	603	18·1	249	249	48	402	12·0
1901	34180	961	28·1	105	109	551	16·1	200	200	67	418	12·2
1902	37500	976	26·0	106	108	585	15·6	219	219	58	424	11·3
1903	41120	1166	28·2	109	94	585	13·0	203	203	49	431	10·4
1904	47030	1284	27·3	158	123	654	13·9	210	210	77	521	11·0
1905	54763	1408	25·7	138	98	615	11·2	178	178	92	529	9·6
1906	59800	1600	26·7	199	124	781	13·0	204	204	102	679	11·3
1907	66300	1635	24·6	170	103	775	11·6	239	239	113	649	9·7
1908	57600	1487	25·8	126	84	639	11·0	161	161	106	584	10·1
Averages for Years, 1899—1908	46411·2	1220·2	26·3	134·2	111·7	641·0	14·2	209·0	209·0	76·1	508·1	11·1
1909	60300	1513	25·0	130	85	649	10·7	208	208	104	545	9·0

* Rates calculated per 1,000 of estimated population.

NOTE.—The deaths included in Column 7 of this table are the whole of those registered during the year as having actually occurred within the district. The deaths included in Column 12 are the number in Column 7, corrected by the subtraction of the number in Column 10, and the addition of the number in Column 11.

By the term “Non-residents” is meant persons brought into the district on account of sickness or infirmity, and dying in Public Institutions there; and by the term “Residents” is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in Public Institutions elsewhere.

The “Public Institutions” to be taken into account for the purposes of these Tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, workhouses, and lunatic asylums. A list of the institutions in respect of the deaths in which corrections have been made should be given on the back of this Table.

Area of District in acres (exclusive of area covered by water) }	22766	Total population at all ages	38071	} At Census of 1901.
		Number of inhabited houses	7027	
		Average number of persons per house	4.8	

Institutions within the District receiving sick and infirm persons from outside the District—

Cane Hill Lunatic Asylum, in the Parish of COULSDON.
Holborn Workhouse, in the Parish of MITCHAM.
Holborn Union Schools, in the Parish of MITCHAM.

Institutions outside the District receiving sick and infirm persons from the District—

Surrey County Asylum, at BROOKWOOD.
Carshalton Cottage Hospital, at CARSHALTON.
Croydon Rural District Isolation Hospital, at CARSHALTON.
Joint Small Pox Hospital, in the Parish of CHEAM.
Croydon General Hospital, at CROYDON.
Croydon Infirmary and Workhouse, at CROYDON.

Other Institutions, the deaths in which have been distributed among the several localities in the District—

Russell Hill School, in the Parish of BEDDINGTON.
Royal Female Orphanage, in the Parish of BEDDINGTON.
Reedham Orphanage, in the Parish of COULSDON.

TABLE II.—Vital Statistics of separate Localities in 1909 and previous years

Year.	WHOLE DISTRICT.				ADDINGTON.				BERKINGTON.				CULHAM.				MERTON.				MITCHAM.				MORDEN.				SANDHURST.				WALLINGTON.				WIMBORNE.			
	1				2				3				4				5				6				7				8				9				10			
	Population estimated to middle of each year.				Population estimated to middle of each year.				Population estimated to middle of each year.				Population estimated to middle of each year.				Population estimated to middle of each year.				Population estimated to middle of each year.				Population estimated to middle of each year.				Population estimated to middle of each year.				Population estimated to middle of each year.				Population estimated to middle of each year.			
	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.
1899	32515	825	444	129	673	14	19	2	3698	69	39	11	2885	94	29	9	4780	165	50	14	12699	381	216	78	291	15	5	1	892	11	8	1	4860	103	70	13	362	18	8	2
1900	32304	822	402	102	663	11	9	1	3732	69	31	4	2960	92	30	12	4208	116	48	14	12155	409	185	54	943	26	14	3	596	19	8	0	3602	113	49	18	312	20	4	4
1901	34180	961	418	105	642	14	9	1	3846	85	29	9	4042	99	40	6	4510	164	62	18	13493	469	200	56	969	27	13	3	1091	22	4	1	5152	126	54	10	334	25	1	1
1902	37500	976	424	106	620	10	12	2	4050	84	30	9	4090	108	31	7	5550	168	71	23	14500	428	202	56	1080	35	9	1	1050	15	7	0	5720	120	57	4	610	16	9	3
1903	41120	1166	431	109	620	7	5	1	4750	101	34	6	5150	122	49	9	6060	221	70	20	15000	497	195	57	1018	34	13	5	1260	26	8	2	5230	122	58	8	612	10	1	1
1904	47080	1394	521	109	700	13	11	2	5170	144	45	15	6436	149	41	9	7450	219	75	21	17000	542	247	86	1100	30	7	3	1530	28	10	6	6975	142	74	15	725	23	1	1
1905	54763	1604	529	108	670	11	11	1	5749	123	39	9	7197	150	39	8	9150	338	89	22	20617	642	270	78	1035	29	15	3	1660	28	8	2	7955	155	62	13	770	31	9	2
1906	62900	1600	679	109	695	11	4	0	7850	157	48	11	7860	163	78	14	9290	380	117	32	23560	721	310	118	1025	27	9	1	2040	35	11	0	8340	151	96	19	950	29	6	4
1907	68200	1635	649	170	690	7	7	1	7100	162	35	5	8500	163	69	22					25900	716	286	93	1100	24	19	0	2350	49	16	3	8400	138	76	13	1060	44	8	4
1908	57600	1487	584	136	690	11	2	0	8000	176	56	6	8800	200	88	17					26700	863	330	92	1180	26	10	2	3580	53	13	1	8500	139	77	7	1150	19	8	1
Average of years 1899—1908	46411.2	1229.2	509.1	134.2	664.5	10.9	8.9	1.2	5399.5	117.0	40.6	8.5	6038.4	135.1	50.5	11.3					18220.7	560.8	244.1	70.7	1026.2	23.5	10.7	2.2	1531.9	28.6	9.3	1.6	6711.4	134.5	67.3	11.2	743.8	22.5	6.8	2.3
1909	60300	1515	545	130	695	14	5	1	8740	194	58	17	9300	223	49	9					27900	796	318	84	1135	29	11	3	2700	54	15	4	8750	165	80	9	1090	38	9	3

Notes.—(a) The separate localities adopted for this table should be areas of which the productions are obtainable from the census returns, such as wards, parishes or groups of parishes, or registration sub-districts. Block 1 may, if desired, be used for the whole district; and blocks 2, 3, &c., for the several localities. In small districts without recognised divisions of known population this Table need not be filled up.
 (b) Deaths of residents occurring in public institutions beyond the district are to be included in sub-column c of this table, and those of non-residents registered in public institutions in the district excluded. (See note on Table I. as to meaning of terms "resident" and "non-resident.")
 (c) Deaths of residents occurring in public institutions, whether within or without the district, are to be allotted to the respective localities according to the addresses of the deceased.
 (d) Care should be taken that the gross totals of the several columns in this Table respectively equal the corresponding totals for the whole districts in Tables I. and IV.; thus the totals of sub-columns a, b, and c should agree with the figures for the year in the columns 2, 5, and 12 respectively, Table I.; the gross total of the sub-column c should agree with the total of column 2 in Table IV., and the gross total of sub-columns d with the total of column 3 in Table IV.

TABLE III.—Cases of Infectious Disease notified during the year 1909.

NOTIFIABLE DISEASES.	Cases Notified in whole District.							Total Cases Notified in each Locality.								No. of Cases Removed to Hospital from each Locality.								Totals.
	At all Ages.	At Ages—Years.						1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.	Addington.	Beddington.	Coulsdon.	Mitcham.	Morden.	Sanderstead.	Wallington.	Woodmanst'rne	Addington.	Beddington.	Coulsdon.	Mitcham.	Morden.	Sanderstead.	Wallington.	Woodmanst'rne	
Small Pox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cholera	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria (including Membranous Croup) ..	150	..	41	86	13	10	..	1	19	6	108	2	5	8	1	1	15	2	96	1	1	7	1	124
Erysipelas	33	2	3	2	5	18	3	..	2	8	20	..	..	3	..	..	..	3	..	..	..	..	..	3
Scarlet Fever	212	3	39	138	24	8	..	..	33	37	100	7	6	19	10	..	24	26	84	7	6	9	9	165
Typhus Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever	9	..	1	..	4	4	..	..	1	..	7	..	..	1	..	..	..	..	4	..	..	1	..	5
Relapsing Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Continued Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Fever	5	..	..	..	..	5	..	..	1	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..
Plague	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cerebro Spinal Menin- gitis	2	1	1	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	1	..	..	..	..	1
Measles	472	24	157	248	32	11	..	..	26	53	283	20	18	70	2	..	..	..	..	..	..	..	..	..
Totals	883	30	242	474	78	56	3	1	82	106	522	29	29	101	13	1	39	28	188	8	7	17	10	298

The Isolation Hospital is situated at Beddington Corner, Mitcham Junction, but is within the Carshalton Urban District.
The Small Pox Hospital is situated at Cheam, and is the Joint Hospital for Croydon Borough, Wimbledon, Penge, and the Croydon Rural Councils.

TABLE IV.—Causes of, and ages at, Death during 1909.

1 CAUSES OF DEATH.	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District.							Deaths at all ages of all "Residents" belonging to Localities, whether occurring in or beyond the District.								Total Deaths whether of Residents or non-Residents" in Public Institutions in the District.	
	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	All ages.	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 & under 65.	65 & upwards.	Addington.	Beddington.	Coulston.	Mitcham.	Morden.	Sanderstead.	Wallington.	Woodmanst'rne	Cane Hill Asylum	Holborn Union Workhouse
Measles	17	4	11	2	..	..	..	..	..	..	17	..	..	..	..	..	..
Scarlet Fever	10	1	5	2	2	..	..	..	1	3	3	..	1	..	2	..	..
Whooping Cough	6	1	4	1	..	..	..	..	1	..	4	..	..	1	..	..	..
Diphtheria (including Membranous Croup)	18	1	5	12	..	..	..	1	..	..	16	1	..	..	..	..	..
Enteric Fever	2	..	1	..	..	1	..	..	..	..	2	..	..	..	..	..	..
Epidemic Influenza	10	..	..	1	..	6	3	..	..	1	5	1	..	3	..	1	2
Diarrhœa	4	2	1	..	..	1	..	..	..	..	4	..	..	..	..	..	..
Enteritis	11	7	2	..	..	1	1	1	..	..	9	..	..	1	..	..	..
Gastritis	1	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..
Puerperal Fever	2	..	..	..	..	2	..	..	1	..	1	..	..	..	..	..	..
Erysipelas	2	1	..	..	..	..	1	..	..	..	2	..	..	..	..	..	..
Phthisis (Pulmonary Tuberculosis)	40	..	1	2	10	24	3	..	7	7	19	2	2	3	..	7	6
Other Tubercular Diseases	22	7	10	1	3	1	..	1	1	5	9	..	..	5	1	3	..
Cancer, malignant disease	50	..	..	..	3	25	22	2	4	8	22	..	3	11	..	9	10
Bronchitis	41	11	4	..	..	9	17	..	4	3	30	1	..	1	2	1	17
Pneumonia	44	21	6	..	..	8	9	..	7	5	23	1	2	5	1	12	1
Pleurisy	1	..	..	..	..	1	..	..	..	..	..	..	..	1	..	..	..
Other Diseases of Respiratory Organs	11	2	..	1	1	4	3	..	..	..	8	1	..	2	..	2	..
Alcoholism—Cirrhosis of Liver	8	..	..	..	..	7	1	..	..	1	6	..	..	1	..	..	1
Venereal Diseases	3	3	..	..	..	..	..	..	..	..	3	..	..	..	..	..	..
Premature Birth	15	15	..	..	..	..	..	..	3	..	7	..	1	3	1	..	..
Diseases and accidents of Parturition	24	20	..	..	..	4	..	..	4	3	13	..	1	3	..	..	..
Heart Diseases	53	1	1	1	2	22	26	..	4	5	32	1	1	10	..	20	8
Brain	37	..	..	..	..	19	18	..	3	3	14	1	4	12	..	71	12
Kidney	13	..	..	..	1	9	3	..	..	..	8	..	..	5	..	5	..
Accidents	13	2	1	1	..	7	2	..	2	2	8	..	..	1	..	..	..
Suicides	6	..	..	1	..	5	..	..	..	..	5	..	..	1	..	..	..
Cerebro-Spinal Meningitis	1	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..
All other causes	80	30	4	1	5	8	32	..	16	3	46	2	..	11	2	11	9
All causes	545	130	57	26	27	164	141	5	58	49	318	11	15	80	9	142	66

NOTES.—(a) In this Table all deaths of "Residents" occurring in Public Institutions, whether within or without the district, are to be included with the other deaths in the columns for the several age groups (columns 2-8). They are also, in columns 9-16 to be included among the deaths in their respective "Localities" according to the previous addresses of the deceased as given by the Registrars. Deaths of "Non-Residents" occurring in Public Institutions in the District are in like manner to be excluded from columns 2-8 and 9-16 of this table.

(b) See notes on Table I. as to the meaning of "Residents" and "Non-Residents," and as to the "Public Institutions to be taken into account for the purposes of these Tables. The "Localities" should be the same as those in Tables II. and III.

(c) All deaths occurring in Public Institutions situated within the District, whether of "Residents" or of "Non-Residents," are, in addition to being dealt with as in note (a), to be entered in the last column of this Table. The total number in this column should equal the figures for the year in column 9, Table I.

(d) The total deaths in the several "Localities" in columns 9-16 of this Table, should equal those for the year in the same localities in Table II., sub-columns c. The total deaths at all ages in column 2 of this Table should equal the gross total of columns 9-16, and the figures for the year in column 12 of Table I.

(e) Under the heading "Diarrhœa" are to be included deaths certified as from diarrhœa, alone or in combination with some other cause of ill-defined nature; and also deaths certified as from

Epidemic enteritis;
Zymotic enteritis;
Epidemic diarrhœa. Summer diarrhœa;
Dysentery and dysenteric diarrhœa;
Choleraic diarrhœa, cholera, cholera nostras
(in the absence of Asiatic cholera).

Under the heading of "Enteritis" are to be included those certified as from Gastro-enteritis, Muco-enteritis, Gastric catarrh, unless from information obtained by enquiry from the certifying practitioner or otherwise, the Medical Officer of Health should have reason for including such deaths, especially those of infants, under the specific term "Diarrhœa."

Deaths from diarrhœa secondary to some other well-defined disease should be included under the latter.

TABLE V.—Infantile Mortality during the Year 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.				Under 1 Week.	1—2 Weeks.	2—3 Weeks.	3—4 Weeks.	Total under 1 Month.	1—2 Months.	2—3 Months.	3—4 Months.	4—5 Months.	5—6 Months.	6—7 months.	7—8 Months.	8—9 Months.	9—10 Months.	10—11 Months.	11—12 Months.	Totals Deaths under One Year.	
ALL CAUSES—																					
Certified or Inquest	..	..	..	..	25	5	4	6	40	15	8	8	7	7	10	6	8	10	6	5	130
Uncertified	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Common Infectious Diseases—																					
Small Pox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Chicken Pox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2	1	..	..	4
Scarlet Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1
Diphtheria (including Membranous Croup)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Whooping Cough	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1
Diarrhoeal Diseases—																					
Diarrhoea, all forms	..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	2
Enteritis, Muco-enteritis, Gastro-enteritis	..	..	..	..	..	..	..	..	2	..	1	2	..	1	1	..	..	..	..	..	7
Gastritis, Gastro-intestinal Catarrh	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
Wasting Diseases—																					
Premature Birth	..	..	..	..	10	3	..	13	3	..	..	..	..	..	..	..	..	..	..	..	16
Congenital Defects	..	..	..	..	2	..	2	4	..	1	1	..	..	..	1	..	..	..	..	..	7
Injury at Birth	..	..	..	..	5	..	..	5	1	..	..	..	..	..	..	..	..	..	..	..	6
Want of Breast-milk, Starvation	..	..	..	..	..	2	..	2	1	..	..	..	..	..	..	..	..	1	..	..	4
Atrophy, Debility, Marasmus	..	..	..	..	4	2	3	9	2	1	2	2	3	..	..	2	..	..	..	..	21
Tuberculous Diseases—																					
Tuberculous Meningitis	..	..	..	..	..	..	..	..	..	..	2	..	..	1	1	1	..	..	..	..	5
Tuberculous Peritonitis: Tabes Mesenterica	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1
Other Tuberculous Diseases	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1
Other Causes—																					
Erysipelas	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1
Syphilis	..	..	..	..	1	..	..	1	1	1	..	..	..	..	..	..	..	..	..	..	3
Rickets	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1
Meningitis (not Tuberculous)	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1
Convulsions	..	..	..	..	3	1	..	4	..	1	..	..	..	..	..	..	2	..	..	..	7
Bronchitis	..	..	..	..	..	..	..	..	2	..	..	2	3	..	1	1	1	1	1	..	11
Laryngitis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pneumonia	..	..	..	..	..	..	..	..	2	..	3	..	2	1	2	2	4	3	2	..	21
Suffocation, overlying	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Causes	..	..	..	..	..	1	1	2	..	2	..	..	3	..	..	..	..	..	..	..	7
				25	5	4	6	40	15	8	8	7	7	10	6	8	10	6	5	130	

Births in the year—

Legitimate 1480.

Illegitimate 33.

Deaths in the year of—

Legitimate infants 116.

Illegitimate infants 14.

Deaths from all Causes at all Ages, 545.

Population—Estimated to middle of 1909, 60,300.

Table VI.—The Area in Acres, Inhabited Houses, Population, and Density of each Parish in the District in 1891 and 1909.

Parish.	Area in Acres.	Inhabited Houses.		Population.						Density.		Persons per house.	
				1891.			1909.			Persons per acre.			
		1891.	1909.	Persons.	Males.	Females.	Persons.	Males.	Females.	1891.	1909.	1891.	1909.
Addington	3605	132	140	670	346	324	695	355	340	·18	·18	5·0	4·9
Beddington	3128	442	1858	2607	1162	1445	8740	4160	4580	·8	2·7	5·9	4·6
Coulsdon	4314	537	1817	3335	1623	1712	9300	4400	4900	·7	2·1	6·2	5·1
Mitcham	2915	2055	5359	10758	5300	5458	27900	13350	14550	3·6	9·5	5·2	5·2
Morden	1475	138	225	763	387	376	1125	530	595	·5	·7	5·5	5·0
Sanderstead	3150	96	577	509	262	247	2700	1250	1450	·1	·8	5·3	4·6
Wallington	823	710	1714	3823	1587	2236	8750	4280	4470	4·6	10·6	5·4	5·1
Woodmansterne ..	1591	81	215	408	204	204	1090	500	590	·25	·68	5·0	5·0
	21001	4191	11905	22873	10871	12002	60300	28825	31475	1·1	2·8	5·4	5·0

In no instance are Institutions considered in this calculation.

TABLE VII.—Showing Parishes with Institutions.

Parish.	Area in Acres.	Inhabited Houses.		Population.						Density of persons per acre.		Average number of persons per house.	
				1891.			1909.						
		1891.	1909.	Persons.	Males.	Females.	Persons.	Males.	Females.	1891.	1909.	1891.	1909.
{ Beddington	3128	442	1858	2607	1162	1445	8740	4160	4580	·8	2·7	5·9	4·6
{ Royal Female Orphanage ..	..	..	..	..	..	..	145	—	145				
{ Russell Hill School ..	..	..	..	..	..	..	358	210	148				
							9243	4370	4873				
{ Coulsdon	4314	537	1817	3335	1623	1712	9300	4400	4900	·7	2·1	6·2	5·1
{ Cane Hill Asylum ..	..	..	..	..	..	..	2166	937	1229				
{ Reedham Orphanage ..	..	..	..	..	..	..	321	185	136				
							11787	5522	6265				
{ Mitcham	2915	2055	5359	10785	5300	5458	27900	13350	14550	3·6	9·5	5·2	5·2
{ Holborn Workhouse ..	..	..	..	..	..	..	929	554	375				
{ „ Schools ..	..	..	..	..	..	..	469	267	202				
							29298	14171	15127				

TABLE VIII.—Showing the Annual Birth and Death Rates, and Death Rates of Infants for the Year 1909 and 10 preceding years.

In the Year.	Birth Rate per 1,000 of Population.	Corrected Death Rate per 1,000 of Population.	Children under 1 year per 1,000 of Registered Births.
1909	25·0	9·0	85
1908	25·8	10·1	84
1907	24·6	9·7	103
1906	26·7	11·3	124
1905	25·7	9·6	98
1904	27·3	11·0	123
1903	28·2	10·4	94
1902	26·0	11·3	108
1901	28·1	12·2	109
1900	25·8	12·0	118
1899	25·4	13·6	156
Average of 10 Years, 1899—1908.	26·3	11·1	111·7

TABLE IX.—Showing the Population, Births and Deaths for the Year 1909, and 10 years preceding.

GROSS NUMBERS.

Year.	Estimated Population.	Registered Births.	Corrected No. of Deaths.			Deaths in Institutions.
			Total.	Under 1 year.	Under 5 years.	
1909	60300	1513	545	130	57	208
1908	57600	1487	584	126	75	161
1907	66300	1635	649	170	70	239
1906	59800	1600	679	199	88	204
1905	54763	1408	529	138	41	178
1904	47030	1284	521	158	42	210
1903	41120	1166	431	109	29	203
1902	37500	976	424	106	145	219
1901	34180	961	418	105	154	200
1900	33304	862	402	102	139	249
1899	32515	823	444	129	163	227
Average of 10 years, 1899-1908	46411.2	1220.2	508.1	134.2	94.6	209.0

**TABLE XI.—Ascertained Cases of Infectious Disease
since the adoption of the Notification Act.**

	1891	1892	1893	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909
Small-pox ..	..	7	1	2	..	..	3	..	..	..	..	29	9	5	1	1	..	..	..
Scarlatina ..	85	117	316	99	51	65	262	144	84	115	81	161	131	125	181	189	317	209	212
Diphtheria ..	17	16	44	63	26	45	35	107	38	62	87	77	48	169	134	161	190	204	150
Membranous Croup ..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Typhoid Fever ..	9	12	24	12	18	14	13	15	19	15	13	14	11	9	18	33	15	16	9
Continued Fever ..	..	..	1	..	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Fever ..	1	1	4	6	1	..	2	2	..	4	1	5	5	8	2	3	5	10	5
Anthrax ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..
**Cerebro-spinal Meningitis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	6	..	2
Cholera ..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas ..	13	22	31	18	18	33	26	23	29	34	20	35	23	27	44	52	56	36	33
***Measles ..	237	579	138	458	29	1083	172	1023	251	420	862	636	280	1085	679	954	326	999	472
Acute Diarrhœa ..	..	..	..	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
*Chicken Pox ..	..	..	..	..	..	..	..	..	..	..	..	162	188	..	..	..	..	..	..
Typhus Fever ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..
Totals ..	362	754	560	664	144	1243	513	1314	421	650	1064	1119	695	1428	1076	1393	917	1474	883

* Chicken Pox was a notifiable disease until July 31st, 1903.

** Cerebro-spinal Meningitis was a notifiable disease from the 22nd April, 1907, to April, 1908.

*** Measles ceased to be a notifiable disease on the 19th June, 1909.

TABLE XII.—Cases of Typhoid Fever (including Continued Fever) in each Parish since Notification was adopted.

	Addington	* Beddington	† Coulsdon	† Mitcham	* Morden	† Sanderstead	* Wallington	* Woodmansterne	Institutions	The District
1890	..	6	..	3	..	..	4	..	1	14
1891	..	2	2	2	..	1	1	..	..	8
1892	..	2	..	4	..	..	3	..	1	10
1893	..	2	4	12	1	..	1	..	1	21
1894	..	..	4	2	..	..	4	..	..	10
1895	..	1	1	6	1	..	3	..	3	15
1896	..	1	2	9	..	1	2	..	..	15
1897	..	1	2	6	..	..	3	..	..	12
1898	1	..	1	11	..	..	..	..	..	13
1899	..	1	2	4	1	2	1	4	..	15
1900	..	1	2	3	..	..	3	3	..	12
1901	..	..	3	3	..	2	1	..	..	9
1902	1	2	1	3	1	2	2	..	..	12
1903	..	..	5	4	..	..	..	..	..	9
1904	..	1	..	5	..	1	2	..	..	9
1905	1	..	1	8	..	..	..	..	..	10
1906	..	2	1	20	..	1	3	1	..	28
1907	..	1	2	10	..	..	..	..	..	13
1908	..	3	..	11	1	..	1	..	..	16
1909	..	1	..	7	..	..	1	..	..	9
	3	27	33	133	5	10	35	8	6	260

* Water supplied by Sutton Water Company.

† " " " East Surrey Water Company.

† " " " Lambeth Water Company.

Addington is principally supplied by the Croydon Corporation.

INFECTIOUS DISEASE during 1909.

Showing Disease; also place and month of incidence

TYPHOID FEVER.

Parishes.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Grand Totals.
Addington ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Beddington ..	..	1	..	..	..	..	..	..	..	..	..	..	1
{ Coulsdon ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Cane Hill Asyl'm ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Mitcham ..	1	..	..	..	..	2	..	2	..	..	1	1	7
{ Holborn Schools and Workhouse ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Morden ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Sanderstead ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Wallington ..	..	..	..	..	..	..	..	..	1	..	..	..	1
Woodmansterne ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	1	1	..	..	..	2	..	2	1	..	1	1	9

PULMONARY TUBERCULOSIS.

Public Health (Tuberculosis) Regulations, 1908.

Parishes.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Grand Totals.
Addington ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Beddington ..	..	..	..	..	1	..	..	..	..	..	..	..	1
{ Coulsdon ..	1	..	1	1	1	..	..	..	..	..	..	..	4
{ Cane Hill Asyl'm ..	1	..	..	..	..	..	..	2	..	..	..	..	3
{ Mitcham ..	3	4	11	5	4	2	4	..	4	5	..	5	47
{ Holborn Schools and Workhouse ..	1	..	..	1	..	1	..	..	..	..	..	..	3
Morden ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Sanderstead ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Wallington ..	..	..	..	..	..	1	..	..	..	..	1	1	3
Woodmansterne ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	6	4	12	7	6	4	4	2	4	5	1	6	61

PUERPERAL FEVER.

Parishes.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Grand Totals.
Addington ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Beddington ..	..	..	..	..	..	..	..	..	..	..	1	..	1
{ Coulsdon ..	..	..	..	..	..	..	..	..	2	..	..	..	2
{ Cane Hill Asyl'm ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Mitcham ..	..	2	..	..	..	..	..	..	..	..	..	..	2
{ Holborn Schools and Workhouse ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Morden ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Sanderstead ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Wallington ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Woodmansterne ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	..	2	..	..	..	..	..	..	2	..	1	..	5

MEASLES.

Parishes.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Grand Totals.
Addington ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Beddington ..	8	7	..	3	5	3	..	..	..	..	..	..	26
{ Coulsdon ..	19	11	10	5	2	6	..	..	..	..	..	..	53
{ Cane Hill Asyl'm ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Mitcham ..	17	19	44	56	114	33	..	..	..	..	..	..	283
{ Holborn Schools and Workhouse ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Morden ..	..	..	..	..	11	9	..	..	..	..	..	..	20
Sanderstead ..	2	2	10	2	1	1	..	..	..	..	..	..	18
Wallington ..	3	11	17	18	20	1	..	..	..	..	..	..	70
Woodmansterne ..	..	..	..	..	2	..	..	..	..	..	..	..	2
Totals ..	49	50	81	84	155	53	..	..	..	..	..	..	472

Measles ceased to be a notifiable disease on 19th June, 1909.

ERYSIPELAS.

Parishes.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Grand Totals.
Addington ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Beddington ..	..	..	2	..	..	..	..	..	..	..	..	..	2
{ Coulsdon ..	..	1	..	2	2	1	..	1	..	1	..	..	8
{ CaneHill Asyl'm ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Mitcham ..	..	3	1	..	4	1	4	..	2	2	1	2	20
{ Holborn Schools ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ and Workhouse ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Morden ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Sanderstead ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Wallington ..	..	..	..	..	..	..	..	..	..	..	2	1	3
Woodmansterne ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	..	4	3	2	6	2	4	1	2	3	3	3	33

SCARLET FEVER.

Parishes.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Grand Totals
Addington ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Beddington ..	1	3	1	2	..	1	2	2	13	4	2	2	33
{ Coulsdon ..	7	2	2	5	1	4	1	2	5	5	2	1	37
{ CaneHill Asyl'm ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Mitcham ..	8	6	11	7	9	7	10	7	13	7	8	7	100
{ Holborn Schools ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ and Workhouse ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Morden ..	..	..	..	..	1	6	..	..	..	..	..	..	7
Sanderstead ..	..	..	2	..	..	..	..	..	1	3	..	..	6
Wallington ..	..	3	2	3	2	..	..	..	2	2	3	2	19
Woodmansterne ..	1	..	1	5	..	1	1	..	..	..	1	..	10
Totals ..	17	14	19	22	13	19	14	11	34	21	16	12	212

DIPHTHERIA.

Parishes.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Grand Totals.
Addington ..	..	1	..	..	..	..	..	..	..	..	..	..	1
Beddington ..	5	3	2	4	1	..	..	2	..	..	1	1	19
{ Coulsdon ..	..	3	1	..	..	..	1	..	..	..	1	..	6
{ Cane Hill Asyl'm ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Mitcham ..	9	16	5	5	4	7	3	7	3	18	15	16	108
{ Holborn Schools and Workhouse ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Morden ..	1	..	..	..	..	..	..	..	..	..	..	1	2
Sanderstead ..	..	..	..	..	..	..	..	..	5	..	..	..	5
Wallington ..	1	2	..	..	1	1	..	1	..	1	1	..	8
Woodmansterne ..	..	..	..	..	..	..	..	..	..	..	..	1	1
Totals ..	16	25	8	9	6	8	4	10	8	19	18	19	150

CEREBRO-SPINAL MENINGITIS.

Parishes.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Grand Totals.
Addington ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Beddington ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Coulsdon ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Cane Hill Asyl'm ..	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Mitcham ..	..	..	..	..	..	..	..	1	1	..	..	..	2
{ Holborn Schools and Workhouse ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Morden ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Sanderstead ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Wallington ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Woodmansterne ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	..	..	..	..	..	..	..	1	1	..	..	..	2

TABLE XIII.—Deaths from Infantile Summer Diarrhœa, showing place of incidence and condition of domestic surroundings.

Address.	Age.	Sex.	L. or Ill.	Number in family and how many have died of similar complaints.	How fed: Cow, Breast or Tin Milk. Note conditions and cleanliness of Cooking Utensils.	Condition of			Notes.
						Interior of house.	Back and front yards.	W.C.'s.	
Upper Road, Bandon Hill	4 months	M.	Leg.	Four in family	Fed by bottle with milk and barley water; also with Savory & Moore's Food. Utensils clean	Clean throughout	Paved and clean	Clean	This child is one of twins, both of whom are deceased
Ashbourne Road, Mitcham	6 months	F.	Illeg.	None	Cow's milk and barley water previous to illness, afterwards with Nestle's Condensed Milk and barley water by a tubeless bottle. Utensils clean	Clean	Back yard partly paved	W.C. is in good order	
Commonside East, Mitcham	4 months	M.	Leg.	Six living; one died previously of diarrhoea, and nine of other complaints	Breast milk. Utensils clean	Back to back houses, with three rooms. Clean	Back yard is unpaved, but is well drained	W.C. is in good order	The mother was employed at a laundry prior to birth of child
Sarah Place, Mitcham	7 months	F.	Leg.	Three living	Nestle's Condensed Milk and barley water taken by a tubeless bottle. Utensils clean	Interior of house dirty. Slop sink, copper, and food cupboard are all in kitchen	Unpaved	W.C. is situate in yard, and is in good order	A notice was served to cleanse premises
Fortescue Road, Mitcham	6 weeks	M.	Leg.	None	Cow's milk and water at birth, later with cow's milk and barley water. Utensils clean	Clean, but kitchen is small and close	Front yard is paved with bricks	W.C. is foul	
Seesley Road, Mitcham	1 month	M.	Leg.	None	Cow's milk by tubeless bottle. Utensils clean	House very clean	Back yard partly paved	W.C. is in good order	
Miller Road, Mitcham	4 months	F.	Leg.	Five living	Cow's milk and Dr. Ridge's Food given by a bottle with rubber tube. Utensils clean	House kept fairly clean	Very small back yard, and partly paved	W.C. is in good order	Deceased was a very delicate child child from birth
Devonshire Road, Mitcham	1 month	M.	Leg.	One previously died of diarrhoea	Breast milk for first few days, afterwards cow's and condensed milks. Utensils very clean	House kept clean and in good order	Both back and front yards paved	Two w.c.'s inside house, well ventilated and in good order	This house is of good class, and the occupants are of extremely clean habits
Boundary Road, Mitcham	3 months	M.	Leg.	Two living	Cow's milk boiled, given by tubeless bottle. Utensils not kept clean	House is kept fairly clean	Back yard is partly paved	W.C. is in back yard, and is in good order	
Grove Terrace, Mitcham	2 months	M.	Leg.	One living	Boiled cow's milk and barley water, given by tubeless bottle. Utensils clean	This is a new house, and is kept in a cleanly state, but was built on the site of a pigery. A new pigery has now been built at the rear of the premises	Back yard is paved	W.C. is in back yard, and is in good order	Deceased had recently undergone a slight operation
Maldon Road, Wallington	4 months	F.	Illeg.	{ ..	Utensils clean	Very clean and good	In good order	Good	{ These cases are of the illegitimate children of a laundrymaid who came here from Salford to be attended during confinement
Maldon Road, Wallington	4 months	M.	Illeg.						

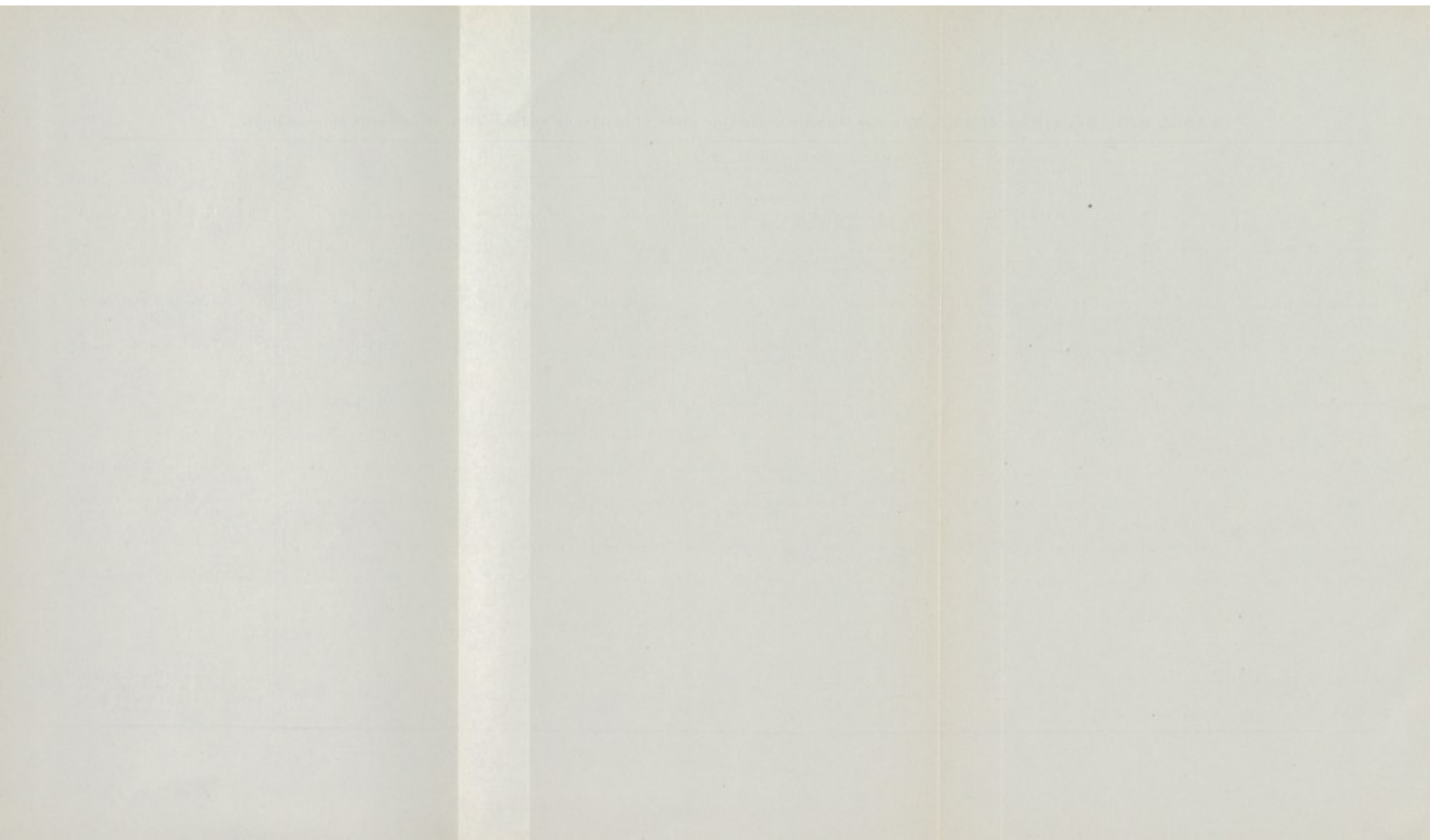


TABLE XIV.—Table showing Total Deaths from Infantile Summer Diarrhœa, during the nine years, 1901—1909, in each Parish, and in every Street invaded:—

ADDINGTON.

- | | |
|-------------------|--------------------|
| 1. Badger's Hole. | 1. Keeper's Lodge. |
|-------------------|--------------------|

BEDDINGTON.

- | | |
|---------------------|------------------|
| 4. Bandon Hill. | 1. Francis Road. |
| 1. Beddington Lane. | 1. Guy Road. |
| 1. Foxley Lane. | |

COULSDON.

- | | |
|-------------------|-------------------------|
| 1. Brighton Road. | 3. Lower Road, Kenley. |
| 1. Coulsdon. | 1. Roke Avenue, Kenley. |
| 1. Godstone Road. | |

MITCHAM.

- | | |
|--------------------------------|------------------------------------|
| 1. Acre Road. | 3. Lewis Road. |
| 1. Allen's Cottages, Lonesome. | 3. Leonard Road. |
| 2. Allen's Terrace. | 3. London Road. |
| 1. Aberdeen Road. | 1. Lonesome. |
| 1. Ashbourne Road. | 2. Love Lane. |
| 9. Bath Road. | 4. Lilian Road. |
| 2. Bailey Road. | 1. Lock's Lane. |
| 2. Belgrave Road. | 3. Manor Road. |
| 1. Benedict Walk. | 9. Marian Road, Lonesome. |
| 1. Bond Road. | 1. Miller Road. |
| 1. Boundary Road. | 1. Miles' Lane. |
| 1. Broadway. | 1. Nicholls' Cottages, Eastfields. |
| 2. Bruce Road. | 1. Norfolk Road. |
| 1. Byegrove Road. | 1. Marlboro' Road. |
| 2. Caithness Road. | 3. Palestine Grove. |
| 5. Chapel Road. | 3. Park Avenue. |
| 1. Chestnut Road. | 3. Phipp's Terrace. |
| 2. Church Buildings. | 1. Piccadilly. |
| 9. Church Road. | 1. Pitcairn Road. |
| 3. College Road. | 1. Portland Road. |
| 2. Commonsides. | 5. Princes Road. |
| 1. Concrete Cottages. | 8. Queen's Road. |
| 1. Courtney Road. | 1. Robinson Lane. |
| 3. Denison Road. | 3. Robinson Road. |
| 2. Devonshire Road. | 1. St. Mark's Road. |
| 1. Durham Place. | 1. Sarah Place. |
| 1. Eastfields. | 5. Seaton Road. |
| 2. Firework Road. | 1. Seeley Road. |
| 4. Fortescue Road. | 5. Sibthorpe Road. |
| 1. Fernlea Road. | 3. Smith's Buildings. |

2. Fountain Place.
8. Fountain Road
2. Gladstone Road.
1. Grange Villas, Eastfields
2. Greyhound Terrace.
4. Grove Road.
1. Grove Terrace.
1. Harewood Road.
7. Heaton Road.
1. Homewood Road.
1. Lewis Cottages.

1. Spencer Road.
1. Ravensbury Cottages.
2. Tramway Terrace.
4. Tynemouth Road.
1. Upper Green.
1. Waterfall Road.
1. Warren Road.
4. Western Road.
2. Westfields.
1. Whitford Gardens.
2. Willow View.

MORDEN.

1. Bishop's Cottages.

1. Crown Road.

SANDERSTEAD.

1. Mayfield Road.

1. Riddlesdown Road.

WALLINGTON.

2. Hackbridge.
2. Maldon Road.
2. Manor Road.
2. Percy Road.

2. Ross Parade.
1. Seymour Road.
1. Wood Street.

WOODMANSTERNE.

1. Chipstead Valley Road.
1. Rutland Cottages.

1. St. Dunstan's Cottages.
1. Woodman Road.

FACTORY AND WORKSHOP ACT, 1901.

The title of this Act is "An Act to consolidate with amendments the Factory and Workshop Acts."

It will be seen from the subjoined list that there are now 226 Factories and Workshops on the Register, which is 13 less than last year. All these are periodically visited, and due attention has been paid to maintaining them in such a condition as to comply with the requirements of the Act. During the year 272 visits of inspection were paid, and in 4 instances nuisances or irregularities were found.

FACTORIES AND WORKSHOPS.

TRADES.	FACTORIES.	WORKSHOPS.	TOTAL.	NO. OF EMPLOYEES.
Laundries	9	17	26	380
Cycle Works	2	11	13	23
Carriage Makers and Wheelwrights ...	2	6	8	27
Distilleries and Essential Oils	1	2	3	12
Printing	2	4	6	52
Brickmaking	2	1	3	28
Carpenters and Builders	6	14	20	73
Shoeing Forges ...	—	15	15	26
Dressmaking	—	15	15	49
Bakeries	—	21	21	39
Harness Making ...	—	4	4	2
Bootmaking & Repairing	—	13	13	19
Bottle Washing & Marine Stores	—	1	1	5
Snuff Mills	1	—	1	—
Buff, Parchment, and Chamois leather, Patent leather and Degreasing	2	4	6	115
Dye Extractors	1	—	1	12
Chaff Cutting and Corn Grinding	1	—	1	8
Flour Mills	—	—	—	—
Electrical Works ...	—	—	—	—
Bedding Manufacturers	—	1	1	1
Cardboard ditto ...	1	—	1	40
Motor ditto	2	—	2	7
Brewers	2	—	2	37

TRADES.	FACTORIES.	WORKSHOPS.	TOTAL.	No OF EMPLOYEES.
Varnish Making ...	10	4	14	146
Confectionery Making ...	1	4	5	258
Paper Making ...	—	—	—	—
Saw Mills & Timber yards	3	—	3	11
Silk and Chintz Printing	—	—	—	—
Block Cutting ...	—	—	—	—
Artificial Horse Hair Manufacturers ...	1	—	1	10
Lamp Maker ...	1	—	1	65
Gas Works ...	2	—	2	104
Watch Making ...	1	1	2	3
Firework Making ...	1	—	1	103
Mineral Water ...	1	—	1	22
Chemical Works ...	3	1	4	83
Margarine Works ...	1	—	1	20
Well Boring ...	1	—	1	3
Iron Works ...	1	—	1	50
Cork Cutting ...	1	—	1	25
Organ Building...	1	—	1	2
Brush Making ...	—	4	4	30
Belt Making ...	1	—	1	12
Sack Making ...	—	1	1	12
Trunk Cloth & Leather Substitute Making ...	—	1	1	2
Golf Club Making ...	—	2	2	4
Smelting Works ...	1	1	2	34
Engineering ...	2	—	2	18
Glove Cleaning ...	—	3	3	30
Furniture Making ...	—	1	1	1
Tailoring ...	—	4	4	4
Art Printers on Iron, etc.	1	—	1	50
Tobacco Mills ...	1	—	1	37
Floor Cloth Makers ...	—	1	1	6
Totals ...	69	157	226	2100

1.—INSPECTION.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR INSPECTORS OF NUISANCES.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories (including Factory Laundries)	102	1	
Workshops (including Workshop Laundries)	160	3	
Workplaces (other than Outworkers' premises included in Part 3 of this Report)	10		
Total	272	4	

2.—DEFECTS FOUND.

Particulars. (1)	Number of Defects			Number of Prosecutions. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
Nuisances under the Public Health Act—*				
Want of cleanliness	6	6		
Want of ventilation	—	—		
Overcrowding	1	1		
Want of drainage of floors	1	1		
Other nuisances, insufficient lighting	1	1		
†Sanitary accommodation {insufficient	2	2		
{unsuitable or defective	3	3		
{not separate for sexes	—	—		
(Sec. 22 of the Public Health Acts Amendment Act, 1890, has been adopted.)				
The standard of sufficiency and suitability enforced being that in the Order of the Secretary of State, of 4th February, 1903.				
Offences under the Factory and Workshop Act—				
Illegal occupation of underground bakehouse (s.101)	—	—		
Breach of special sanitary requirements for bake- houses (ss. 97 to 100)	4	4		
Other offences (excluding offences relating to out- work which are included in Part 3 of this Report)	—	—		
Total	18	18		

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

†For districts not in London state here whether section 22 of the Public Health Acts Amendment Act, 1890, has been adopted by the District Council; and if so what standard of sufficiency and suitability of sanitary accommodation for persons employed in factories and workshops has been enforced.

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year								Number.
(1)								(2)
Workshop Bakehouses	...	...	...	...	...	...	...	24
„ Confectioners	...	...	...	...	...	...	...	4
„ Dressmakers	...	...	...	...	...	...	...	16
„ Laundries	...	...	...	...	...	...	...	23
Other Workshops	...	...	...	...	...	...	...	90
Total number of Workshops on Register								157

5.—OTHER MATTERS.

Class.							Number.
(1)							(2)
Matters notified to H.M. Inspector of Factories							
Failure to affix Abstract of the Factory and Workshop Act (s 133)							5
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act, (s. 5)					Notified by H.M. Inspector Reports (of action taken) (sent to H.M. Inspector)		
Other							
Underground Bakehouses (s. 101):—							
Certificates granted during the year							
In use at the end of the year							1

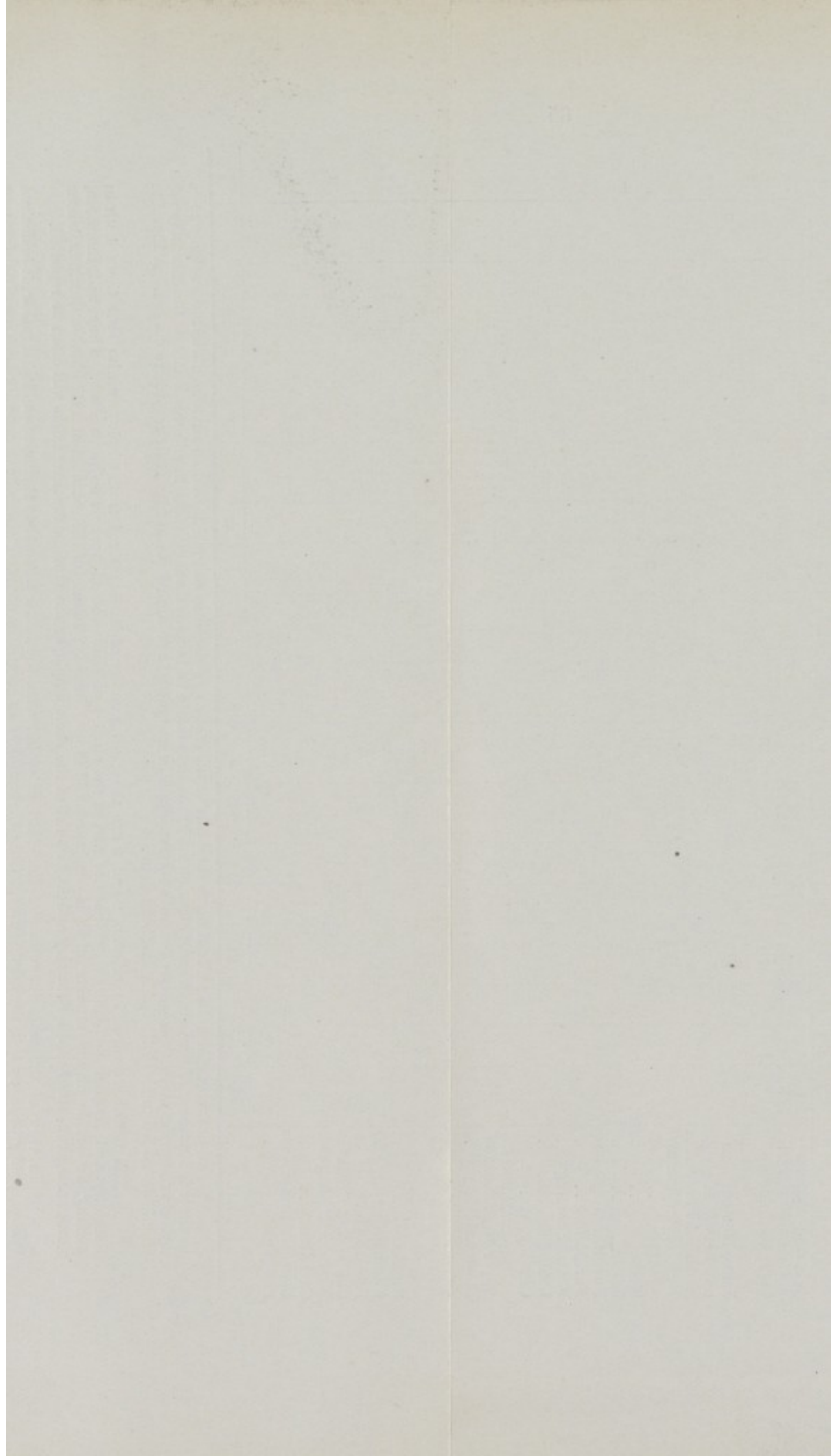
3.—HOME WORK.

NATURE OF WORK*	OUTWORKERS' LISTS, SECTION 107.											Inspections of Outworkers' Premises.	OUTWORK IN UNWHOLESOME PREMISES, Sec. 108			OUTWORK IN INFECTED PREM ISES, Sec. 109, 110		
	Lists received from Employers.						Addresses of Outworkers		Notice served on Occupiers as to keeping or sending lists	Prosecutions.			Instances.	Notices served.	Prosecutions.	Instances.	Orders made (S. 110).	Prosecutions (Sections 109, 110),
	Twice in the year			Once in the year			Received from Other Councils.	Forwarded to other Councils.		Failing to keep or permit inspection of lists.	Failing to send list.							
	Lists.*	Out- workers.+		Lists.	Out- workers.+													
		Con- tractors.	Work- men.		Con- tractors.	Work- men.												
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
Wearing Apparel— (1) making, etc. (2) cleaning and washing	8			20 1			29					39 3						
Lace, lace curtains and nets																		
Artificial Flowers ..																		
Nets, other than wire nets																		
Tents																		
Sacks																		
Furniture, Upholstry																		
Fur pulling																		
Feather sorting ..																		
Umbrellas, etc. ..																		
Carding, &c. of buttons, &c.																		
Paper bags & boxes																		
Basket making ..																		
Brush making ..																		
Racquet and tennis balls																		
Stuffed Toys ..																		
File making ..																		
Electro plate ..																		
Cables and Chains..																		
Anchor & Grapnels																		
Cart Gear																		
Lock, Latches & Keys																		
Pea picking ..																		
Total ..	8			21			29					42						

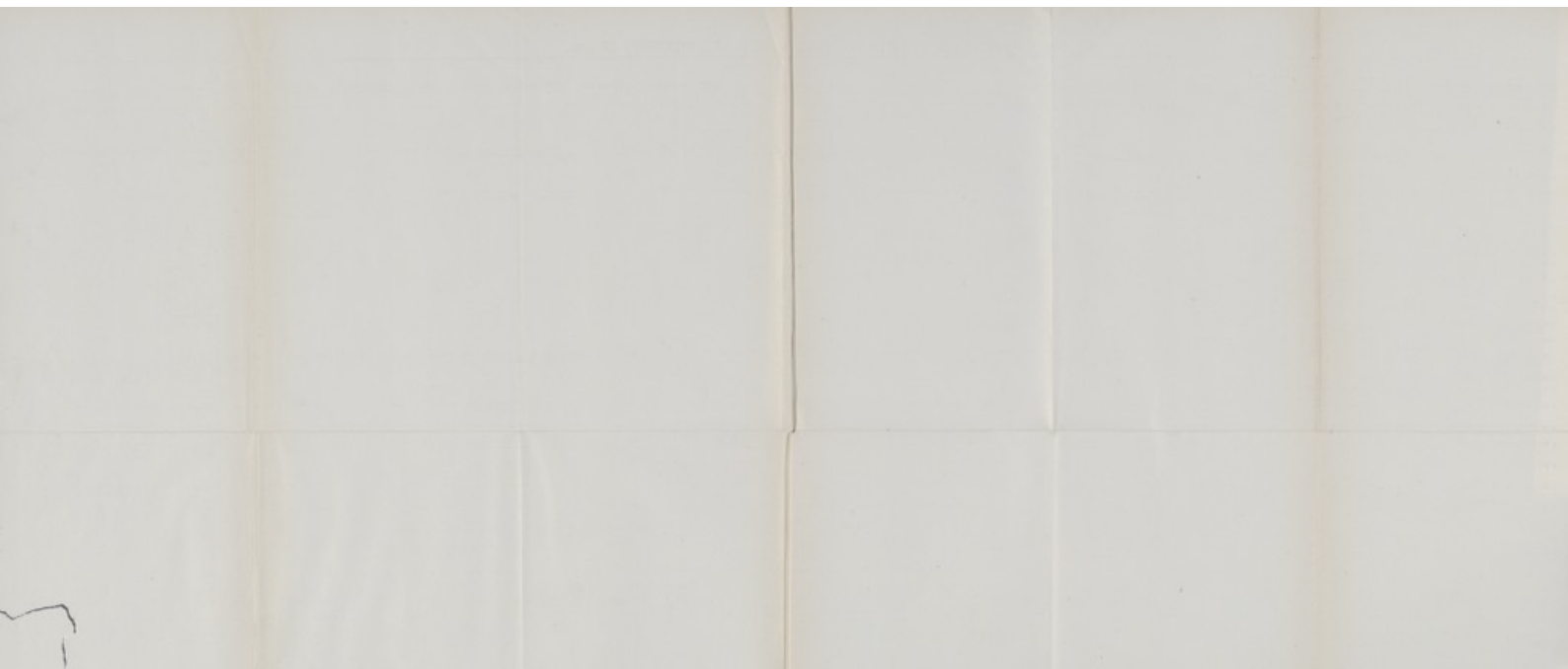
*If an occupier gives out work of more than one of the classes specified in column 1, and subdivides his list in such a way as to show the number of workers in each class of work, the list should be included among those in column 2 (or 4 as the case may be) against the principal class *only*, but the outworkers should be assigned in column 3 (or 5) into their respective classes. A footnote should be added to show that this has been done.

†The figures required in column 2 and 3 are the *total* number of lists received from employers who sent them both in February and August as required by the Act and of the entries of names of outworkers on those lists. They will, therefore, usually be double of the number of such employers and (approximately) double of the number of individual outworkers whose names are given, since in the February and August list of the same employer the same outworkers name will often be repeated.

§ In view of the wide discrepancies found to exist between the totals when the returns are added together, it is desired that care may be taken to give exact figures. Only those addresses should be counted which have actually been received from or forwarded to other Councils during the year covered by the report.



TABULATED REPORTS OF FARMS, DAIRIES, AND MILKSHOPS IN 1909

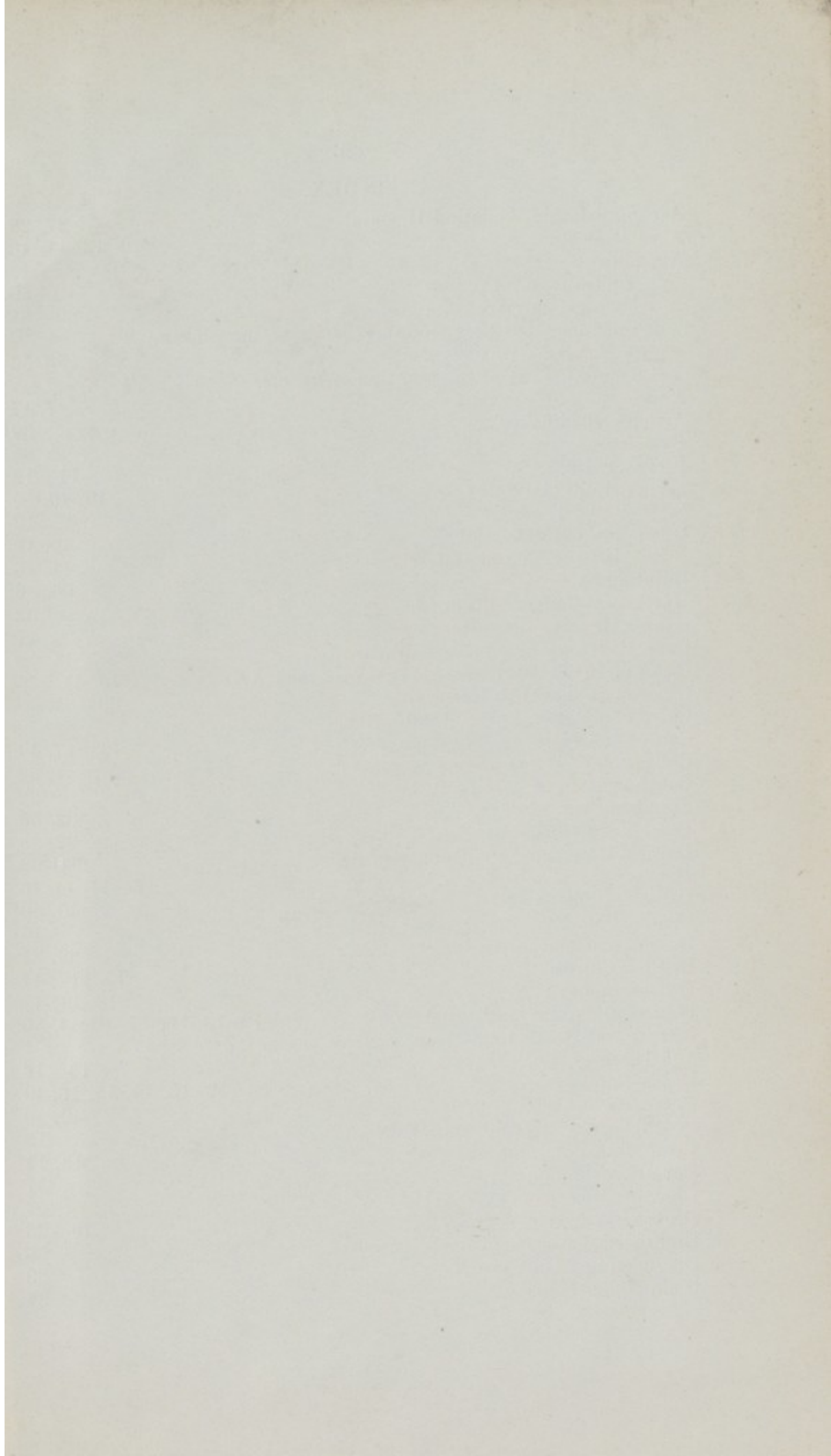


TABULATED REPORTS OF FARMS, DAIRIES, AND MILKSHOPS IN 1909



TABULATED REPORTS OF FARMS, DAIRIES, AND MILKSHOPS IN 1909





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