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Urban District Council of Hendon.

ANNUAL REPORT

- OF --

T. S. McINTOSH, M.A., M.D.,

M.R.C.P.Ed., D.P.H.

Medical Officer of Health,

FOR THE YEAR 1921,

TOGETHER WITH THE

ANNUAL REPORT

ON THE

Medical Inspection of Schools.

+:>:--:<+

London :

LVLE BARRS & Co., (Office Equipment Printers) LTD., 2, The Burroughs, Hendon.

1922.

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Urban District Council of Hendon.

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Public Health Department.

Medical Officer of Health ;-

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Annual Report for the Year 1921 of the

Medical Officer of Health.

Public Health Department, "Burroughs House," Hendon, N.W. 4. April 1022.

To The Chairman and Members of the Urban District Council of Hendon.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit to you my Report for the year 1921. A new form of Report has been prescribed by the Ministry of Health and this has been adopted, but I have retained certain features of former Reports which appeared to me to be of interest.

Speaking generally, the year has been a good one from the point of view of the Public Health, in spite of several adverse influences.

The exceptionally high rate of unemployment with all its attendant privations might have been expected to have a serious effect on the health of many people.

The prolonged drought and spell of very hot weather which were experienced are also factors usually regarded as unfavourable to the Public Health.

The year was one of exceptionally high prevalence of Diphtheria and Scarlet Fever in London and other neighbouring districts.

Notwithstanding these conditions the recorded death rate stood at the very low figure of 7.9 which is almost exactly the same as that of 1920 which was 7.8. The Infant Mortality Rate although higher than that of 1920 (61' as compared with 47') is still a very low rate. Although the incidence of Scarlet Fever and Diphtheria was high it was not nearly as high as might have been expected in view of the prevalence of these diseases in the London area.

I think the Council and its Officers may claim to have made some contribution towards these favourable results.

For example, apart from the activities of the Public Health Department which are detailed in the following Report, the work of the Council's Unemployment Committee was most valuable in diminishing the evil effect of unemployment, also the extensive programme of tarspraying of the roads which was undertaken in the summer possibly did a great deal to mitigate the effects of the dry weather and the shortage of water for street watering purposes.

I have the honour to be,

Ladies and Gentlemen,

Your obedient servant,

T. S. McINTOSH, Medical Officer of Health.

I.-GENERAL STATISTICS.

AREA-8,382 Acres.

POPULATION 1921-56,014.

The above is the Census population as published in the public press. Official details of the Census figures are not yet forthcoming and will have to be included in the Report for 1922. The population as estimated by the Registrar General is 55,500, but the method of arriving at this estimate is not stated and there seems no reason to suppose that the Census figures in this district are misleading.

Number of inhabited houses 1921 (Census figures not yet available).

Number of families or separate occupiers 1921 (Census figures not yet available).

Rateable value, £573,272.

Sum represented by a penny rate, \pounds , 2, 144.

CLIMATE.

The year was a particularly dry one with a very hot summer. During the summer some restrictions were placed upon the use of water, but the supply was at all times sufficient for essential purposes.

The following particulars have been extracted from the Register of Rainfall compiled by Mr. Butler, Headmaster of the Bell Lane School, and kindly furnished to me by him :--

Total Rainfall	•	17.67	inches.
Greatest Rainfall, September	ııth	2.03	,,
Wettest Month, September		2.71	,,
Driest Month, July		.07	,,
Total number of Rain Days		I 20	
Total number of Dry Days		245	

REGISTER OF RAINFALL 1921.

Kept at Hendon Central School in the County of Middlesex by J. W. Butler, Esc. Time of observation—9 a.m.

Nearest Railway Station-Midland.

Diameter of Rain Gauge-5 inches.

Height of top of Rain Gauge above ground-1ft. 4in.

	-
10.00	level
Sea	level

200ft.

_													
Date.	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sep,	Oct.	Nov.	Dec.	Date
	in.	in.	in.	in.	in.	in.	in.	in.	in.	in.	in.	in.	
I	.41	'01	.07	.00	'00	'00'	°00	'00	·08	'00	.05	.06	I
2	.12	.00	'00'	.00	.07	.00	'00'	.00	'00	.00	.48	.00	2
3	'01	'00	.00	.00	.18	.10	'00	.06	.00	°I 2	.45	'00	3
4	.25	'00	'00	.00	.07	*02	.00	.04	*00	.00	*27	.00	4
5	.00	'00'	.00	'00'	'00'	*00	.00	.05	'00	'00	.05	.00	5
6	.12	10'	'41	.00	.03	.00	.00	.00	.00	*00	.00	'00	6
78	'45	10'	'00	'00'	'09	.00	'00	.00	'00	'00	.00	.00	7
8	.03	.00	.04	.04	.23	*00	'00'	'00'	'00	'00	*00	.00	8
9	.0I	.00	·00	.06	.04	*00	.00	.00	.03	.00	.00	'00	9
IO	.28	.00	'00'	'00'	'00'	*00	.00	'00'	'00	.20	'00	.00	10
II	.17	'02	.00	'00	.00	*00	•00	.00	2.03	'00	.00	.02	II
12	.11	'00'	.13	'00	.04	.00	.00	*31	.33	.00	.00	.05	12
13	.02	*00	'25	.42	.00	'00	.00	*04	.17	.00	'00	.00	13
14	.00	'00	'00'	'00	.06	.00	*00	'02	*00	.00	'00	.23	14
15	.00	'00	*00	·12	10'	*00	*O1	'00	*00	.00	.00	'02	15
16	.11	*00	.04	.10	'00	'00	.00	.39	.00	'00	'43	.00	16
17	.07	.00	.07	.23	'00	*00	.00	.90	.03	*00	'00'	.00	17
18	.13	'00	.00	.02	'00	.00	.00	'00	*04	.23	'00	'00	18
19	.00	'00	'20	.10	'00	.05	.00	.00	.00	'57	'00	.05	19
20	'00	.00	.04	'00	'00	.00	•00	'00	*00	'02	'00	.00	20
21	'00	.00	.00	.00	'00	.00	•00	*00	.00	'00'	.09	.00	21
22	*00	.00	.00	.07	.00	.00	.00	.00	.00	'12	.00	.19	22
23	.00	.00	*00	.08	'00	.00	·01	.81	'00	.06	.00	.10	23
24	'00	'01	.00	.10	.00	*00	.00	.00	'00	'00	.00	.05	24
25	.04	'20	*00	.00	.23	10'	•00	.00	'00'	.00	.00	.20	25
26	.04	.00	.02	.00	.07	.03	.00	.00	'00	.00	.00	.05	26
27	.06	'00	•04	.00	'09	.00	.00	'00	.00	.00	.00	.07	27
28	'00'	.00	*20	.00	'12	'00	.03	*00	.00	.00	.00	.00	28
29	.00	-	*20	.00	.10	.00	'02	.00	.00	.00	.02	.00	29
30	.19	-	10'	'00	.03	.00	*00	.00	.00	'00	.27	.00	30
31	.00	-	.00		.00	-	'00	'00	-	'00	-	.00	31
Total.	2.20	•26	1.28	1.34	1.46	·2 I	.07	2.62	2.71	1.32	2'11	1.09	Tota for year 17'67
No. of Rain Days.	19	6	15	11	16	5	4	9	7	7	9	12	120

8

2.-VITAL STATISTICS.

The following are the statistics prescribed by the Ministry of Health. They are based on the Registrar General's figures.

		BIRTHS.		
		Total.	Male.	Female.
Legitimate		952	489	463
Illegitimate		42	19	23
	Total	994	508	486

Birth Rate, 17.9	
Deaths, 443	
Death Rate, 7.9	
Number of women dying in or in consequence of childbirth, from Sepsis	5
other causes	I
Deaths of Legitimate Infants under one year of age per 1,000 Legitimate births	58.8
Deaths of Illegitimate infants under one year of age per 1,000 Illegitimate births	119.
Total deaths of infants under one year of age per 1,000 total births	61.
Deaths from Measles (all ages)	Nil.
Deaths from Whooping Cough (all ages)	9.
Deaths from Diarrhoea (under 2 years of age)	13.

The following are fuller details of the Vital Statistics for the year. They are based on the Census population and on the Office records and differ slightly in some respects from the Registrar General's figures.

BIRTHS (Population-56,014).

Number of Births Registered		882
Number belonging to other Districts		14
		868
Births occurring in other Districts	and	
belonging to Hendon		126
Nett Births belonging to the District		994

Birth R	ate			 17.7
Birth R	ate (England a	nd Wale	es)	 22.4

The Births occurring in the District were distributed as follows :--

		Males			4	35
		Female	es		4	33
The	excess	of births	over	deaths	is	551

DISTRIBUTION IN DISTRICTS.

District.		Births.
Mill Hill		 87
Burnt Oak		 9
Central Hendon		 140
West Hendon		 209
Golders Green and Ten	nple Fortune	 165
Child's Hill and Crick	lewood	 258
Inward Transfers		 126

Forty-two illegitimate births belonging to the district were registered :--

Mill Hill			 I
Central Hendon			 5
West Hendon			 4
Golders Green and	I Temp	le Fortune	 2
Child's Hill and (Crickle	wood	 9
Inward Transfers			 21

DEATHS AND DEATH RATE.

(Population-56,014.)

Deaths Registe	red in the	e Distr	ict	676
Deaths of non-	residents			324
				352
Deaths of reside	ents regist	ered in	other	
Districts				91
Nett Number be	elonging t	to the	District	443
Males 2	22	Female	S 221	

	Gross Death Rate		1	12.06
	Recorded Death Rate			7.9
	Corrected Death Rate (co 1911 Census)		actor	8.35
	Death Rate, England a	nd Wales	1	12.1
	,, ,, London		1	12.4
	,, ,, 96Great T London (1911 Census	populatio	ns ex-	
	ceeding 50,000)			12.3
	Death Rate, 148 Smalle Census populations 20			11.3
-1	0/ of the deaths of reside	nte mora o	f perce	ins ove

36% of the deaths of residents were of persons over the age of 65 years.

Mill Hill			49
Burnt Oak			14
Central Hendon			83
West Hendon			81
Golders Green and T	emple Fortur	ne	96
Child's Hill and Cricl	klewood		I 20

CAUSES OF DEATH.

A table has been prepared which shows the causes of and ages at death.

The Zymotic Death Rate for the year is . 57, the causes of death on which the rate is based are :---

Small Pox			 NIL
Measles			 NIL
Scarlet Fever			 NIL
Diphtheria			 9
Whooping Con	ugh		 9
Diarrhœa (und	ler 2 years	of age)	 I 2
Enteric Fever			 2
	Total		 32

11

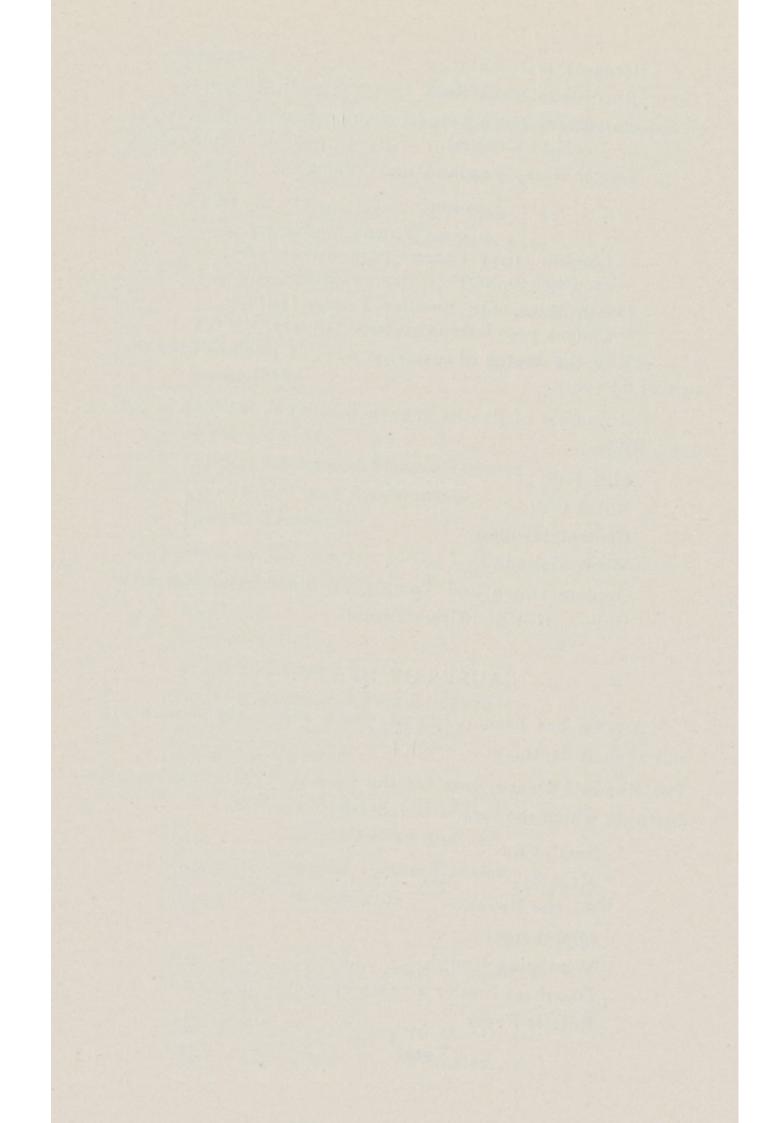
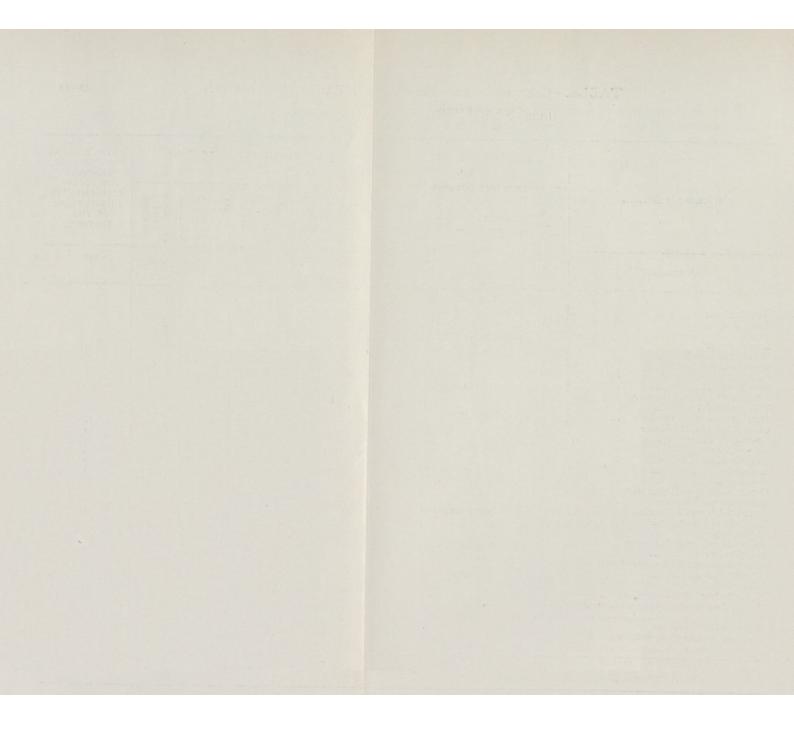


TABLE.-Causes of, and Ages at, Death during the Year 1921.

13-14

NAME OF DISTRICT-HENDON (URBAN) MIDDLESEX.

	N	NETT DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT.								
CAUSES OF DEATH.	All ages	Under 1 year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25. years	25 and under 45 years	45 and under 65 years	65 years and upwards	OR "NON- RESIDENTS" IN INSTITUTIONS IN THE DISTRICT.
All causes $\begin{cases} Certified & \\ Uncertified & \end{cases}$	443	61 	9	· 4	16 	17	60 	116	160 	346
Enteric Fever	$\begin{array}{c} 2 \\ \cdots \\ 9 \\ 9 \\ 9 \\ 1 \\ 28 \\ 4 \\ 3 \\ 56 \\ 1 \\ 4 \\ 3 \\ 5 \\ 12 \\ 4 \\ 1 \\ 3 \\ 11 \\ 5 \\ 1 \\ 25 \\ 12 \\ 6 \\ 144 \\ \cdots \end{array}$	 7 2 1 1 1 2 1 2 1 2 1 2 1 2 1 1 2 1 	···· ··· ··· ··· ··· ··· ··· ··	······································	······································	 	$ \begin{array}{c} 2 \\ \dots \\ 4 \\ 12 \\ 3 \\ 8 \\ 1 \\ 4 \\ 5 \\ 1 \\ \dots \\ 3 \\ 3 \\ 1 \\ \dots \\ 3 \\ 3 \\ 1 \\ \dots \\ 2 \\ 1 \\ 9 \\ \dots \end{array} $	 2 3 28 28 28 28 16 3 9 1 28 28 28 28 28 28 28 28 28 28 28 28 28 29 10 20 20 20 20 20 20 20 20 20 20 20 20 20	 	$ \begin{array}{c} \cdots \\ \cdots \\ 1 \\ 6 \\ 1 \\ 244 \\ \cdots \\ 10 \\ 1 \\ 1 \\ 5 \\ 2 \\ 4 \\ \cdots \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 5 \\ 2 \\ 1 \\ 1 \\ 1 \\ 5 \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ 5 \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 5 \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1$
Totals	443	61	9	4	16	17	60	116	160	346



SENILE MORTALITY.

160 Deaths of residents over 65 years of age were registered, a percentage of 36 of the total deaths of residents.

INQUESTS.

The following table shows the causes to which Deaths were attributed by Coroner's Juries :---

Natural Causes.		Accidents & Misadventure.	
Inattention at birth	I	Run over	2
Cardio Vascular degeneration	2	Suffocation	2
Pneumonia	I	Fractured skull	2
Nephritis & Bright's disease	I	Aeroplane crash	I
Atheroma Coronary arteries	I	Fall	I
Myocarditis & Pericarditis	2	Suicides.	
Prematurity	I	Coal Gas Poisoning	1
Fatty degeneration of the heart	2	Cut throat	I
Hypertrophy and Dilation of heart	I	Spirits of salts poisoning	I
Heart disease	I	Open Verdict.	
Thrombosis of left external Iliac vein	I	Drowning	I

INFANTILE MORTALITY.

61 Deaths of infants under one year of age were registered producing a death rate of 61 per 1,000 births.

Rate per 1	,000	Births.
England and Wales (total deaths under one year of age)		
96GreatTowns, including London (1911 Census Populations exceeding 50,000)		83
(total deaths under one year of age) 148 Smaller Towns (1911 Census Pop- ulations 20,000-50,000)		87
(total deaths under one year of age)		84
London (total deaths under one year of age		80

Table

DISTRICT-HENDON (MIDDLESEX).

Infant Mortality during the Year 1921.

Nett deaths from stated causes at various ages under one year.

CAUSES OF DEATH		Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 4 Weeks	4 Weeks and under 3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths under 1 year.
All causes { Certified Uncertified		20	7	6	1	34	8	7	5	7	61
Small-pox											
Chicken-pox											
Measles Scarlet-fever				***						•••	
When in Couch									 I		
Diphtheria and Croup								2		4	7
Erysipelas								***			
(Tuberculous Meningitis											
Abdominal Tuberculosis											
Other Tuberculous Disea	ses			I		I					1
Meningitis (not Tubercula	nus)							I			I
Convulsions		I	I	I		3					3
Laryngitis											
Bronchitis								I			I
Pneumonia (all forms)									I	I	2
∫ Diarrhœa		I				I					I
l Enteritis			2	I		3	3	2	2	I	II
Gastritis											
Syphilis	***								***		
Rickets								•••			
Suffocation, overlying			•••						••		
Injury at birth Atelectasis					••••					***	
Congenital Malformations				•••							8
Premature birth		4	2	I		7	I				11
Atrophy, Debility and		0	1	1		10					
Marasmus		I	I	I		3	2				5
Other Causes		5			1	36	1	1	I	I	10
Totals		20	7	6	I	34	8	7	5	7	61

Illegitimate 42 year.

Nett Deaths in the [Legitimate infants Illegitimate infants year

56 5

16

It will be seen that the Death Rate of Hendon compares very favourably with that of England and Wales as a whole, of London, of the 96 Great Towns and the 148 Smaller Towns.

The percentage (36) of deaths of persons over 65 years of age is high.

The Infant Mortality Rate is considerably higher than in 1920, in which year the rate was exceptionally low. The rate for the past 5 years is shewn below :---

Year.	Infa	ntile M	lortality	Rat
1917	 		74	
1918	 		54	
1919	 		73	
1920	 		47	
1921	 		61	

It again compares very favourably with that of England and Wales, London, and the Larger and Smaller towns.

The increase as compared with 1920 is in great measure due to Infantile Diarrhoea (12 deaths in 1921 as against 2 in 1920). A considerable increase in the deaths from this cause was to be expected as a result of the excessively hot, dry summer, and I think that it is a matter for congratulation that it is not higher. It represents a rate of 12 per 1,000 births as compared with :—

21.3 in London,
15.5 in England and Wales,
19.3 in the 96 Great Towns and
15.6 in the 148 Smaller Towns.

As regards the causes of death, the following points are of interest.

There were no deaths from Measles or Scarlet Fever.

Of the 9 Diphtheria deaths, 8 occurred during a sharp outbreak in the last month of the year, only one having occurred in the previous 11 months. This heavy mortality in December was due not only to an increase in the number of cases, but also to a sudden and marked increase in the severity of the disease.

A striking fact is that Cancer was the most important single cause of death during the year. The Death Rate from Cancer throughout the Country is steadily increasing while that from most other causes is diminishing. This may to

e.

some extent be due to the fact that longevity is increasing and that cancer is to a considerable extent a disease of old age. It is, however, rather disconcerting that out of the 56 deaths from cancer 8 took place before the age of 45, and 28 between the ages of 45 and 65. The cause of cancer is still unknown and not very much is known even of the predisposing factors, but it certainly looks as if there were something in modern conditions of life (possibly in the feeding habits of the people) which is favourable to the production of cancer. There is as yet no known method of prevention.

Heart disease comes next to Cancer in importance and accounts for a large proportion of the total deaths (about 10%). An important element in the production of Heart disease is Rheumatic Fever, another disease of which the causation is not fully understood and against which there are no welldefined lines of attack.

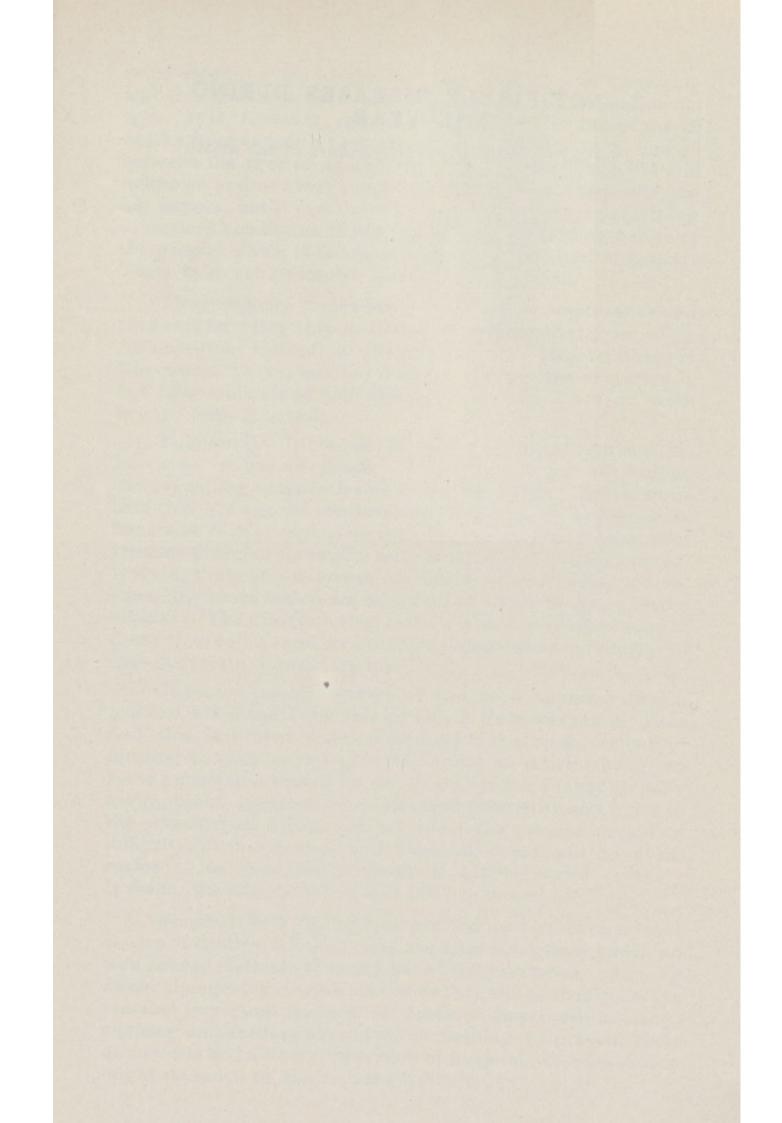
Pulmonary Tuberculosis (Consumption) remains an important cause of death. It accounted for 28 deaths, corresponding to a death rate of 0.5 per 1,000. It cannot be said that the special measures directed against Tuberculosis have met with conspicuous success. Sanatorium treatment remains the most successful form of treatment and undoubtedly brings about an arrest of the disease in many cases, especially cases which are admitted at an early stage of the disease. The disappointing feature about it is that many of these "cured" cases break down again after returning to face the strain of ordinary life.

Of recent years, however, it has been apparent that a gradual fall in the Tuberculosis Death Rate was taking place and this is probably associated with the improvement of housing conditions and general sanitation which (though to some extent interrupted by the War) has been fairly steadily taking place, together with increased prosperity and a rise in the standard of living. What effect the present period of difficulty, unemployment and financial stress will have, remains to be seen, but probably if a fairly rapid recovery is made, the adverse effect will not be marked.

Bronchitis and Pneumonia are the next most important causes of death. These again, are diseases against which no well defined methods of attack have been developed. As long as our changeable climate continues they will probably always remain important causes of death. Improved housing, clothing and feeding should do something to prevent their occurrence and a liberal provision of hospital accommodation might do much to diminish their fatality.

3.-NOTIFIABLE DISEASES DURING THE YEAR.

The following table gives particulars of the above.



	IA	BLE.					
Cases of Infectious	Diseases	notified	during	the	year	1921.	

Name of	District-	Hendon ((URBAN)	MIDDLESEX.
---------	-----------	----------	---------	------------

Number of cases notified.								Total cases notified in each locality of the district.						mital	
				At ag	res—	years	i.								to hos
Notifiable Diseases.	At all Ages.	Under 1 year.	1 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 years and upwards.	MiH IIiM	Burnt Oak.	Central Hendon.	West Hendon.	Golders Green and Temple Fortune.	Child's Hill and Cricklewood.	Total cases removed to hosnital
Small Pox Cholera—Plague															
Diphtheria (including Membranous Croup)		1	23	75	22	15	3		6	1	22	24	27	59	10
Erysipelas	10			1		2	5	2	3	1	1		2	3	1
Malaria															
yphus Fever															1
Relapsing Fever-Continued Fever														 1	
uerperal Fever	6				3	3						0	-		
Cerebro-Spinal Meningitis	170		10	100							18	34	22	30	11
Scarlet Fever	153	1	16	108	16	12			44	5					
Poliomyelitis															
2.1.41.1.1.N.	3		***			2	***	1				••••		2	
Dulmanany Tubanaulasia	58				13	 28	9		1 10		13	 11	7	17	
Other Forms of Tuberculosis	13			7	2	20	2		4		1	3	2	2	1
Pulmonary Tuberculosis(Secondary)	63			3	13	34	11	2	8	6	13	8	14	14	
	3				2	1			2					1	
Intoria Four	4					4							3	1	1
lucentery															
Acute Encephalitis Lethargica	2					1					1			1	
Acute Primary Pneumonia	21			2	···· 4	8	6	1	5	3	2	9	1	1	
	478	5	39	204	75	112	37	6	83	17	71	92	82	133	22

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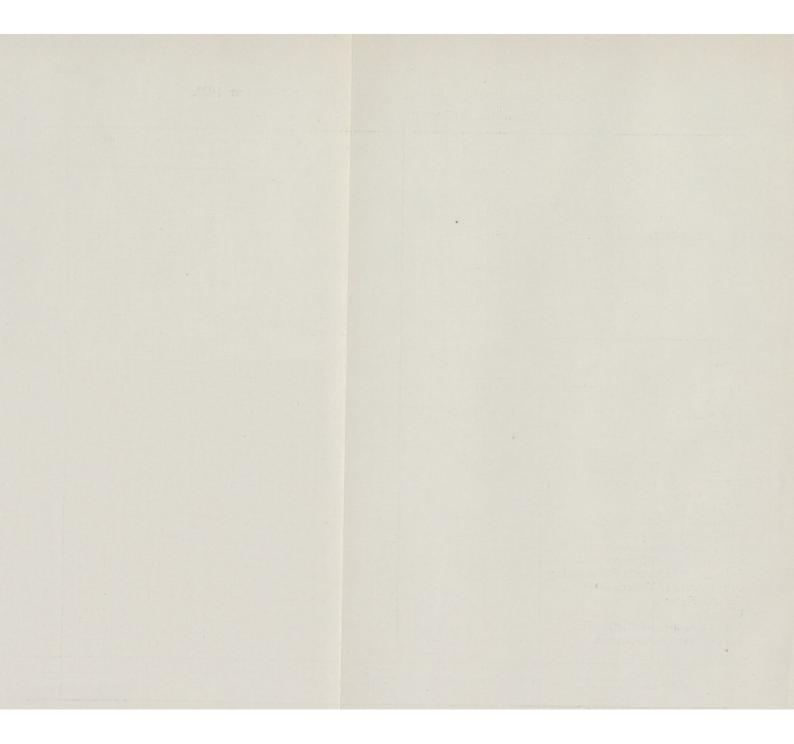


TABLE.

Deaths from Notifiable Infectious Diseases shewing Ages at Death.

NAME OF DISTRICT-HENDON (URBAN) MIDDLESEX.	NAME	OF	DISTRICT_H	IENDON ((URBAN)	MIDDLESEX.
--	------	----	------------	----------	---------	------------

							Ac	GES.					
Disease.		Under 1 year	I and under 2 years	2 and under 3 years	3 and under 4 years	4 and under 5 years	5 and under 10 years	to and under 15 years	15 and under 20 years	20 and under 35 years	35 and under 45 years	45 and under 65 years	65 years and
Diphtheria			1	I		I	4	I	I				
Influenzal Pneumonia		2									2	Ι	Ι
Erysipelas													Ι
Pulmonary Tuberculosis		I						I	3	8	5	8	2
Other forms Tuberculosis			2	I			Ι				3		
Puerperal Fever	•••								Ι	3	Ι		
Enteric Fever										Ι	Ι		
Pneumonia		2	2							2	3	IO	4

	CASES.					
Notified	At	eated In Hospital.	Unim-			Deaths
3	2	I	2	-	_	I *

OPHTHALMIA NEONATORUM.

* This was a case of a premature infant who was admitted to a London Hospital and died there.

The ratio of non-notified Tuberculosis deaths to total Tuberculosis deaths is 5 to 35.

It does not appear that there is any serious neglect of Notification of Tuberculosis.

VACCINATION.

The following Table, for which I am indebted to Mr. A. E. Taylor, Vaccination Officer, shows the particulars as regards vaccination.

*Number of Births registered in 1920		1907
Successfully vacccinated		
Insusceptible of vaccination		6
Exemptions		379
Dead, unvaccinated		46
Postponements by Medical Certificat	es	20
Removal to other districts and case	S	
not found		50
Number of births unaccounted for		20
Jumber at all ages vaccinated during the	year	(Primary)
Born within District		417
Born out of District		77

* Figures for the number of children born in 1921 and vaccinated are not available as vaccination may be performed any time during the first six months of life.

It will be observed that only about half of the children born are vaccinated. This is now the general experience throughout the Country. It means that in the event of an outbreak of Small Pox occurring, a large proportion of the population would be found unprotected, with the result that there would be a considerable danger of a serious spread of

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the disease. I do not hold extreme views as to the necessity for compulsory general infantile vaccination, but it must be apparent that the present unprotected state of the population as a whole is a somewhat dangerous one.

DIPHTHERIA.

139 cases were notified, 104 patients received hospital treatment, 90 being treated in the Hendon Isolation Hospital, the remainder were nursed at home.

The deaths from this disease numbered 9, of whom 1 died at home, 6 died at the Hendon Isolation Hospital and 2 in other hospitals.

A rather severe outbreak of Diphtheria began in December, 40 cases being notified during that month.

The District was never quite free from Diphtheria during the year, which was a year of high prevalence in London.

The cases, however, were scattered and not numerous until December when an epidemic began, which continued into 1922. The epidemic was fully dealt with in a special report to the Council dated 16.1.22. Cases occurred in all parts of the District, but it was only in Cricklewood and West Hendon that the epidemic assumed serious proportions. These are the parts of the district which are nearest to and in most frequent communication with the Cricklewood and Kilburn portions of Hampstead and Willesden, and a marked increase in prevalence in the latter districts preceded the epidemic in the Hendon Urban District. It appears quite certain that the Hendon epidemic was an extension from the neighbouring districts.

A very marked feature of the epidemic was the exceptional severity of the cases. The change in type of the disease took place with dramatic suddenness Up till 25th November, scarcely any cases admitted to hospital had caused any anxiety and only one patient (who was admitted in practically a dying condition) had died. The first of the very severe cases was admitted on the 25th November and died on the 2nd December and thereafter case after case of the utmost severity was admitted. On some of these cases the antitoxin treatment, which is usually so successful, seemed to have very little effect or only brought about a temporary improvement. On enquiry, I found that other Hospital Superintendents were having a similar experience. 8 of these severe cases died but a number of patients who appeared to be in an almost desperate condition ultimately recovered. Great difficulty was experienced in finding accommodation for all the patients but it was found possible to provide a bed either in the Hendon Isolation Hospital or elsewhere for every patient for whom hospital treatment was necessary.

SCARLET FEVER.

153 cases were notified and 117 received hospital treatment, of which number 86 were admitted to the Hendon Isolation Hospital.

No deaths from this disease occurred.

Scarlet Fever was very prevalent in London throughout the year and Hendon shared to some extent in this prevalence. No definite epidemic occurred. The cases were for the most part very mild and no death occurred. Towards the end of the year 3 cases occurred in one class of the Secondary School and I advised closure of this class. As the Christmas holidays were due to begin a week later it was decided to close the whole school. No further spread of the disease took place.

PUERPERAL FEVER.

6 cases of this disease were notified.

3 were admitted to various hospitals and died in hospital.

3 were treated at home by their own doctors, 2 of these died and the other recovered.

ENTERIC FEVER.

4 cases were notified.

In no case was any local source of infection discovered. One case had almost certainly been infected abroad. The cases were quite unconnected with each other and no extension of the disease took place.

4.-CAUSES OF SICKNESS.

There have been no causes of sickness and invalidity specially noteworthy during the year with the exception of Diphtheria and Scarlet Fever already dealt with.

5.—SUMMARY OF NURSING ARRANGEMENTS, Etc.

PROFESSIONAL NURSING IN THE HOME.

(A)—GENERAL.

The provision of home nursing is not undertaken by the County Council or the District Council. Voluntary Nursing associations provide a district nurse in each of the following parts of the district:

> Central Hendon, West Hendon, Child's Hill, Mill Hill,

Hampstead Garden Suburb,

so that the district is well provided for in this respect. These Nursing associations are quite independent of Public Authorities.

(B)-FOR INFECTIOUS DISEASES.

No special provision is made, but complicated cases of Measles, Whooping Cough, etc., are dealt with by the district nurses as part of their general work.

MIDWIVES.

The Hendon Urban District Council employs a Midwife whose work lies mostly in West Hendon. The fee charged for attendance on a confinement case is \pounds_1 is. od.

The following are the particulars of the work of the Council's Midwife during the year :

Number of cases Booked	90
Number of Confinements Attended	76
Number of Ante-natal Visits	223
	1167
Number of late Visits (i.e. Visits paid	'
after the normal period of 10 days)	171

Owing to a special rush of cases in October and November, it was found necessary to employ a temporary assistant Midwife for a short period. Arrangements were also made with the other midwives practising in the district, who agreed to attend cases on the books of the Council's Midwife in the event of the latter being prevented from attending.

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The total number of Midwives registered for practice in the district during the year was 7 Of these, one practises as a maternity nurse only and one other does so for the most part.

NAME.	SITUATION.	NATURE OF ACCOMMODATION.	By Whom Provided.
1. Central Hendon Maternity and Child Welfare Centre,	Burroughs House, Hendon.	Consultation and Weighing Rooms.	Hendon Urban District Council.
2. West Hendon Maternity and Child Welfare Centre.	The Broadway. West Hendon.	**	"
3. Child's Hill Maternity and Child Welfare Centre.	Granville Hall, Granville Road, Child's Hill.	"	,,
4. School Clinic.	Burroughs House, Hendon.	Examination and minor treatment rooms.	Hendon Education Committee.
5. West Hendon Day Nursery.	The Broadway, West Hendon,	Converted shop with dwelling over; accommodation for 24 children.	Voluntary Committee subsid- ised by the Ministry of Health and the Hendon Urban District Council.
6. Burgess Day Nursery.	1, Devonshire Place, Child's Hill.	Cottage with accommodation for 14 children.	Maintained by endowment.
7. Tuberculosis Dispensary.	The Broadway, West Hendon.	Consultation rooms.	Middlesex County Council.

CLINICS & TREATMENT CENTRES.

8. Venereal Diseases. There is no centre in the district for this purpose. Treatment for these diseases is provided at various London Hospitals under Middlesex County Council arrangements.

During the year each of the Council's Maternity and Child Welfare Centres was open one afternoon per week. The Assistant Medical Officer attends at each session. Owing to the steadily increasing number of attendances at the Child's Hill Centre it was decided to inaugurate a second session per week at this centre in the beginning of 1922. The following is a summary of the work done in connection with the Maternity and Child Welfare Scheme:--

	West Hendon Centre.	Child's Hill Centre.	Central Hendon Centre.
Total attendances of children	2,414	2,243	1,383
Examinations by Medical Officer	1,415	1,464	889
New members admitted	171 200		
under one year of age	143	157	63
over one year of age	28	43	8
Antenatal Cases	66	38	36

NUMBER ATTENDING THE CENTRES.

Number of visits paid in connection	Num	ber c	of visits	paid i	in c	connect	ion
-------------------------------------	-----	-------	-----------	--------	------	---------	-----

with the work	of the	Centres	 	2,582
Atenatal visits			 	165

The work of the Health Visitors in connection with the Notification of Births was as follows:

Number of	otified	 	877
First visits	 	 	645
Re-visits	 	 	896

I think that there can be no doubt that most valuable work is being done for the health of the district under the Council's Maternity and Child Welfare Scheme.

The number of deaths of infants under one year of age who had attended the Centres once or oftener was 10. Compared with the total number of new members under one year of age this gives an Infant Mortality Rate of 27.5 per 1,000, whereas the general Infant Mortality Rate for the district was 61 per 1,000 births. I am aware that this is not conclusive proof of the value of the Maternity and Child Welfare Centres but it at least suggests that they are doing something to reduce the Infantile mortality.

More valuable evidence is the very satisfactory progress made by most of the children who attended. Many of these children when first brought to the Centre are not thriving well, but by simple advice about feeding and other matters are rapidly converted into healthy sturdy babies. Others who are healthy are undoubtedly kept in health as a result of the advice given.

Above all, I consider that these Clinics are acting as educational centres and that the effect of their teaching will in time spread far beyond the individual mothers and children who attend.

DAY NURSERIES.

These institutions perform a useful function in providing a place where young children can be left under proper care by mothers who for one reason or another are obliged to go out to work.

The Burgess Day Nursery is self-suporting, its income being derived from endowment.

The West Hendon Day Nursery receives a grant of \pounds_{300} per annum from the Hendon Urban District Council. A charge of 1/- per head per day is made but this in some cases is reduced to 8d. The remainder of the necessary income is provided partly by voluntary contribution and partly by a grant from the Ministry of Health.

HOSPITALS PROVIDED OR SUBSIDISED BY THE LOCAL AUTHORITY OR BY THE COUNTY COUNCIL.

(1) TUBERCULOSIS.

Treatment of Tuberculosis is in the hands of the Middlesex County Council who now possess a County Sanatorium at Harefield. Patients are also sent to Clare Hall Sanatorium, South Mimms, and to various other hospitals and Sanatoria under County Council arrangements.

(2) MATERNITY.

There is no maternity hospital in the district. (Patients are frequently admitted to Queen Charlotte's Lying-in Hospital in Marylebone, and to Cedar Lawn Lying-in Home in Hampstead.)

(3) CHILDREN.

There is no children's Hospital in the district. (Children are admitted to the Hendon Cottage Hospital which is a purely voluntary hospital, and to the London Children's Hospitals.) (4) FEVER.

The Hendon Urban District Council provides an Isolation Hospital. The present hospital is a temporary building with accommodation for 16 Scarlet Fever and 8 Diphtheria patients. These numbers are frequently exceeded and it has been decided to provide additional temporary accommodation and to proceed with a scheme for a new permanent isolation hospital adequate to the needs of the district.

The following shews the number of patients treated in the hospital each year since it was first opened;

YEAR.	NUMBER OF PATIENTS.	YEAR,	NUMBER OF PATIENTS.
1890	4	1906	92
1891	23-	1907	53
1892	23	1908	83
1893	70	1909	175
1894	66	1910	125
1895	51	1911	100
1896	60	1912	129
1807	23	1913	102
1898	86	1914	219
1899	74	1915	118
1900	41	1916	62
1901	83	1917	92
1902	55	1918	79
1903	80	1919	118
1904	83	1920	199
1905	74	1921	176

The diseases treated were:

Scarlet Fever	 	 2,376
Diphtheria	 	 378
Enteric Fever	 	 47
Smallpox	 	 10
Erysipelas	 	 6
Measles	 	 1

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During the year 90 cases of Scarlet Fever were removed to the Infectious Diseases Hospital and 86 cases of Diphtheria.

(5) SMALL POX.

Accommodation for Small Pox cases is provided at Clare Hall, South Mimms, by the Middlesex Joint District Small Pox Hospital Board of which the Hendon Urban District Council is one of the constituent authorities. Hendon is entitled to one representative on the Board for every 25,000 of the population. During the greater part of the year the Chairman of the Public Health Committee, Mr. Councillor R. A. B. Teare, M.B.E., was the sole representative, but after the publication of the census figures, which shewed the Hendon Urban District Council to be entitled to 2 representatives, Mr. Councillor S. H. Egan, J.P., Chairman of the Council, was also appointed.

(6) OTHER HOSPITALS.

There are no other hospitals provided or subsidised by the Local Authority or the County Council.

The Hendon Cottage Hospital which is a voluntary one, has an accommodation of 40 beds for general medical and surgical cases.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN IN THE DISTRICT.

There is no special provision of this nature available for the district apart from that made by the Guardians.

St. Helena's Hospital Home and House of Rest, Thorverton Road, Cricklewood Lane, N.W. is situated in the district. It has an accommodation of 12 beds and admits unmarried mothers with their infants.

It is associated with the London Diocesan Council for Preventive, Rescue and Penitentiary work and admits cases coming under the supervision of that organisation.

The Mother's Rest Home at 110, Erskine Hill, Garden Suburb, is a small cottage with accommodation for 3 mothers and babies. They are admitted for a fortnight's rest after confinement and may be either unmarried or married. The cases come mostly from various parts of London.

The Hampstead Guardians maintain a cottage home, in this district, for destitute children for whom they are responsible. The address is Homesfield, Erskine Hill, Garden Suburb. It provides accommodation for 26 Children.

AMBULANCE FACILITIES.

The Council maintains 2 ambulances.

One is in charge of the Public Health Department and is used exclusively for Infectious Diseases.

The other is kept at the Fire Station and is available at all times for accidents and other non-infectious cases, a charge being made for its use.

6.-LABORATORY WORK.

Examinations of throat swabs, sputum and blood (Vidal test) are undertaken. Specimens are sent by the Medical Officer of Health and Private Practitioners in the district to the Virol Research Laboratories who undertake the examinations for the Council.

	Total Number.	Positive.	Negative.
Throat swabs for Diphtheria bacillus	381	103	278
Typhoid Fever, blood examinations	6		6
Tuberculosis, sputum examinations	17		17

The following is a summary of the work done;

Antidiphtheritic serum is supplied free of charge to Medical Practitioners practising in the district. It is obtainable at the Public Health Department and from certain chemists and (at any time, day or night) at the Isolation Hospital and the Fire Station.

LIST OF ADOPTIVE ACTS, BYE-LAWS & LOCAL REGULATIONS RELATING TO THE PUBLIC HEALTH IN FORCE IN THE DISTRICT.

The Infectious Disease Prevention Act 1890. Whole Act.

Public Health Acts Amendment Act, 1890. Parts II. and III.

Public Health Acts Amendment Act 1907. Part II., Sec. 15-33. Part III., Sec. 34-50. Part IV., Sec. 52-57 and 60-67. Part VI. Part X., Sec. 95. (Date of Adoption, 1910)

SYE-LAWS.			Date of adoption.
Slaughterhouses			26.2.1881
Nuisances			26.2.1881
Common Lodging Houses			26.2.1881
Tents, Vans and Sheds (by	M.C.(C.)	

B

Drainage of Existing Buildings 6.11.1907 & 6.9.1909 New Streets & Buildings ... 4.11.1907 & 28.9.1914

REGULATIONS.

Dairies, Cowsheds and Milkshops ... 13.4.1908 Ice Cream Regulations (by M.C.C.)

7.-SANITARY ADMINISTRATION.

SANITARY INSPECTION OF THE DISTRICT.

The following summary of the Inspection work performed by the Sanitary Inspectors has been submitted to me by Mr. S. J. Chapman, Chief Sanitary Inspector in accordance with Article 20 (16) of the Local Government Board's General Order of the 13th December, 1910.

Inspections made	 2011
Nuisances discovered and dealt with	 2640
Re-inspections after order or notice	 2315
Complaints received and investigated	 640
Visits paid to infected houses	 349
Rooms disinfected	 363
Drains, smoke and water tests applied	 104
,, Uncovered for examination	 33
,, Taken up, reconstructed or repaired	 44
,, Unstopped and Manholes cleansed	 68
,, Provided with intercepting traps, caps, etc.	9
,, Manholes provided to	 37
,, Manholes repaired or covered	 20
,, Manholes F.A.I. repaired or provided	 22
Yards, re-paved or paving repaired	 40
,, Cleansed	 16
Dustbins provided	 97
Water storage cisterns repaired or covered	 32
Rooms stripped and cleansed	 630
,, Plastering of walls and ceilings repaired	 390
Roofs of houses repaired	 143
Floors of houses repaired, cleansed, etc	 63
,, ,, Air spaces under ventilated	35
Window frames repaired and sash lines renewed	 113
Dampness of house walls remedied	 65
Accumulations of manure and refuse removed	 14
Animals, fowls, etc., nuisances from, abated	 8
Nuisances from overflowing cesspools removed	4

Cesspools abolished		2
Water supply provided to houses, or a supply laid	on	
over sink		
Water service pipes, etc., repaired		17
Taps taken off rising main for drinking purposes		5
Water closets, repaired and apartments cleansed		91
,, ,, New pans provided to		86.
,, ,, Unstopped and cleansed		26
,, ,, Provided with efficient flushing ciste or flushing cisterns repaired		72
Fluch nings sensingd		27
Soil pipes and ventilating pipes reconstructed	or	-1
repaired		30
Sinks removed and new provided		12
,, Waste pipes repaired, renewed and trapped		42
", Waste pipes unstopped		5
Rain water pipes repaired or renewed		41
Eaves gutters, repaired cleansed or renewed		71
Defective traps replaced or new stoneware gullies fix		55
Gullies unstopped, provided with grids, and cem		55
work around same repaired		34
Rooms ventilated (windows made to open)		7
Ditches cleansed		5
Smoky chimney flues remedied		5
Fire grates, kitcheners etc., repaired		37
Premises connected with sewer		I
Flooding of cellars remedied		I
Miscellaneous nuisances abated		118
NOTICES SERVED.	~~	
	586	
Outstanding from 1920	37	
(623	
Complied with	468	
Outstanding	118	
Note Of the US outstanding notices	IOI	were

Note :-- Of the 118 outstanding notices, 101 were complied with by the 31st January, 1922.

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STATUTORY NOTICES.

Under	the Public Heal	lth Acts, e	tc	34
Under	the Infectious	Diseases	(Pre-	
	vention) Act			42
				76
	Complied with			70
	Outstanding			6

SUMMONSES.

It was not found necessary to take proceedings for noncompliance with any of the Notices served.

I think the above must be considered to be a very satisfactory record. It shews that the vast majority of insanitary conditions are successfully dealt with without even the necessity of serving a Statutory Notice and that where Statutory Notices are served they are complied with and no legal proceedings are required.

The 6 outstanding Notices had been complied with before the end of March, 1922.

In addition to the defects shewn above, many othess have been remedied as a result of verbal recommendations by the Sanitary Inspectors.

MILK SUPPLY.

DAIRIES, COWSHEDS AND MILKSHOPS.

Number	of Registered	Cowsheds		19
,,	,,	Dairies		20
,,	,,	Milkshops and	Purveyors	5

During the year, 4 Cowsheds were re-opened, one change of occupation occurred, 2 were closed and one occupier was registered to trade as Cowkeeper at an Additional Shed.

A change of occupation occured at 4 Dairies and 2 Milkshops, and 3 new Dairies were opened and the occupiers registered.

An average of 267 Milch Cows are stalled in the Sheds, an increase of 61 over last year. The Milk produced in the Local Cowsheds is largely supplied to the Dairymen in the neighbourhood, but the bulk of the District's Milk Supply is imported from the large London Dairy Supply Companies, and is received, stored and distributed from the various Dairies and Dairy Company's premises in the District, most of which are quite modern and properly equipped for cooling, sterilization of vessels, and for the maintenance of cleanliness.

The Dairies, Cowsheds and Milkshops are inspected as frequently as possible, and the cows examined quarterly by the Council's Veterinary Surgeon.

One Dairy has been re-modelled on modern lines and many Sanitary improvements have been effected at other Cowsheds and Dairies, and any breach of the Dairies, Cowsheds and Milkshops regulations rectified on being brought to the notice of the occupiers.

The Veterinary Surgeon reported on all occasions that the cows examined by him were in a healthy condition except in one or two instances in which the cows were affected with Mastitis when the milk from the cows was not being used.

INSPECTION OF PLACES WHERE FOOD IS PREPARED.

The premises in the district in which foods are prepared and exposed for sale, have been kept under constant observation. The premises include butchers, fish, poultry and provision shops, restaurant kitchens and a manufactory where potatoes are prepared for sale as "crisps." Generally, due observance of the principles of hygiene is maintained and reasonable care is taken to prevent contamination by foreign matter. In the course of these inspections, the following articles were inspected, and found to be unfit for human consumption:

> I carcase pig (Peritonitis), 2 cwt. potatoes (Diseased), I cwt. I stone fish (Decomposition). 62 tins condensed milk ,, 12 lbs corned beef ,, 12 tins preserved fruits ,,

It was unnecessary to take legal proceedings in any instance, the articles being voluntary offered for inspection. The condemned foods were destroyed.

NUMBER & CONDITION OF SLAUGHTERHOUSES,

REGISTERED OR LICENSED.

Registered Slaughterhouses ... Licensed

Very little slaughtering was done on these premises, which were inspected as frequently as possible at the time of killing.

Most of the meat sold by the butchers in the district comes from the London Meat Market

As far as it was reasonably possible, the interior of the houses were kept cleansed and minor improvements made to render them more suitable in consideration of the old structure of the buildings.

SALE OF FOODS AND DRUGS ACTS.

The Administrative body under these Acts is the Middlesex County Council and their Inspectors have taken for analysis 207 Samples of Food.

The following table showing the Articles purchased with the result of their analysis was kindly supplied by Mr. R. Robinson, Chief Officer of the Public Control Department.

Article.			Taken.	Adulterated.
Milk			161	21
Milk Sepa	arated		2	_
Cream			9	3
Butter			15	
Baking P			5	
Cheese			2	
Coffee			3	
Fish Past	e		3	
Lard			3	_
Ale			2	_
Whisky			2	2
		Total	207	26
				_
Number of	f Prose	cutions		7
Number o				7
			•••	5
Fines and	Costs	imposed		£21 2 6

The twenty-one samples of milk reported against by the County Analyst included eleven "informal" samples and four formal samples in which the deficiences as compared with the presumptive standards, were insufficiently serious to justify legal proceedings.

DISINFECTION.

- 363 Infected rooms disinfected by spraying with a solution of Formalin or by the vapourising of Formaldehyde Tablets.
 - 42 Infected rooms cleansed, viz.: Wallpapers stripped from walls and ceilings whitewashed in compliance with Notices served under the Infectious Diseases (Prevention) Act, 1890.
- 5773 Mattresses, articles of bedding, clothing, etc., disintected at Disinfection Station by steam in a Washington-Lyon apparatus. All articles disinfected, collected and returned by the Sanitary Authority by a motor van.

	8.—PUB	LIC HEALTI	H STAFF.		
Office.	Name.	Diplomas, etc.	CONTRIBUTION TO SALARY.	OTHER OFFICES HELD.	Whole or Part-time.
Medical Officer of Health	T. S. McIntosh	M.A., M.D., M.R.C.P.Ed., D.P.H	Under Public Health Acts & M. and C.W. Grant	School Medical Officer	Whole-time
Assistant Medical Officer	Ethel M. L. Leitch	M.B., Ch.B.	Maternity and Child Welfare Grant	Asst. School Medical Officer	Part-time
Senior Sanitory In- spector	S. J. Chapman	Cert. R.San. Institute	Under Public Health Acts	Nil	Whole-time
Assistant Inspector	G. E. Luck	Cert. R. San. Institute Ditto. (Meat and Foods)	Nil	Nil	Whole-time
,, ,,	A. H. Smith	Cert. R.San. Institute	Nil	Nil	Whole-time
Health Visitor	M. E. Bascom	C.M.B Dip. of Nat. Health Society	Maternity and Child Welfare Grant	Nil	Whole-time
,, ,,	O. A. Hunt	C. M. B H. V. Cert. of Battersea Poly. San. Ins. Cert. of S.I. Ex. Bd.	,, ,,	Nil	Whole-time
Midwife	E. J. Degen	С. М. В	,, ,,	Nil	Whole-time
Veterinary Surgeon			Nil	Similar office under Finchley U. D. C	Part-time

9.-HOUSING.

		er of new houses erected during the year :
1.	UNFI	Γ DWELLING HOUSES.
	in	TION(I) Total number of dwelling houses spected for housing defects (under Public ealth or Housing Acts) 929
	in	amber of dwelling houses which were spected and recorded under the Housing aspection of District) Regulations, 1910 117
	(3) Nu sta	umber of dwelling houses found to be in a ate so dangerous or injurious to health as to unfit for human habitation I
	(4) Nu rel fo	umber of dwelling houses (exclusive of those ferred to under the preceding sub-heading) und not to be in all respects reasonably fit
	10	r human habitation 561
2.	REME	DY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.
	fit	amber of defective dwelling houses rendered in consequence of informal action by the ocal Authority or their Officers 445
	ACTION	UNDER STATUTORY POWERS.
		voceedings under section 28 of the Housing, own Planning, etc., Act, 1919.
	(1)) Number of dwelling houses in respect of which notices were served requiring repairs Nil.
	(2)	Number of dwelling houses which were rendered fit :
		 (a) By owners Nil. (b) By Local Authority in default of owners Nil.
	(3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close Nil,
		intention to close

(b) Proceedings under Public Health Acts.

(0)	1 100	cecurings anacer r about meanin mers.
	(I)	Number of dwelling houses in respect of which notices were served requiring defects to be remedied 34
	(2)	Number of dwelling houses in which defects were remedied :
		(a) By owners 28
		(b) By Local Authority in default of owners Nil.
(c)		ceedings under sections 17 and 18 of the using, Town Planning, etc., Act, 1909.
•	(I)	Number of representations made with a view to the making of Closing Orders I
	(2)	Number of dwelling houses in respect of which Closing Orders were made I
	(3)	Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having being rendered fit NuL.
	(4)	
	(5)	Number of dwelling houses demolished in pursuance of Demolition Orders Nil.
		(The 2 houses in respect of which Demoli- tion Orders were made, were demolished early in 1922.)

TABLE.-Shewing Action Taken with regard to Unfit Houses

Year.	Represent- ations by M.O.H,	Declaration of intention to close house by Owner under Section 28, Housing, Town Plan- ning, etc. Act 1919.	Closing Orders made or become operative after voluntary closure by Owner.	Houses Closed,	Demolition Orders.	Demolition.
1919	I	I	2		_	—
1920	-	-	—	I	-	—
1921	I	-	I	1	2	-

45

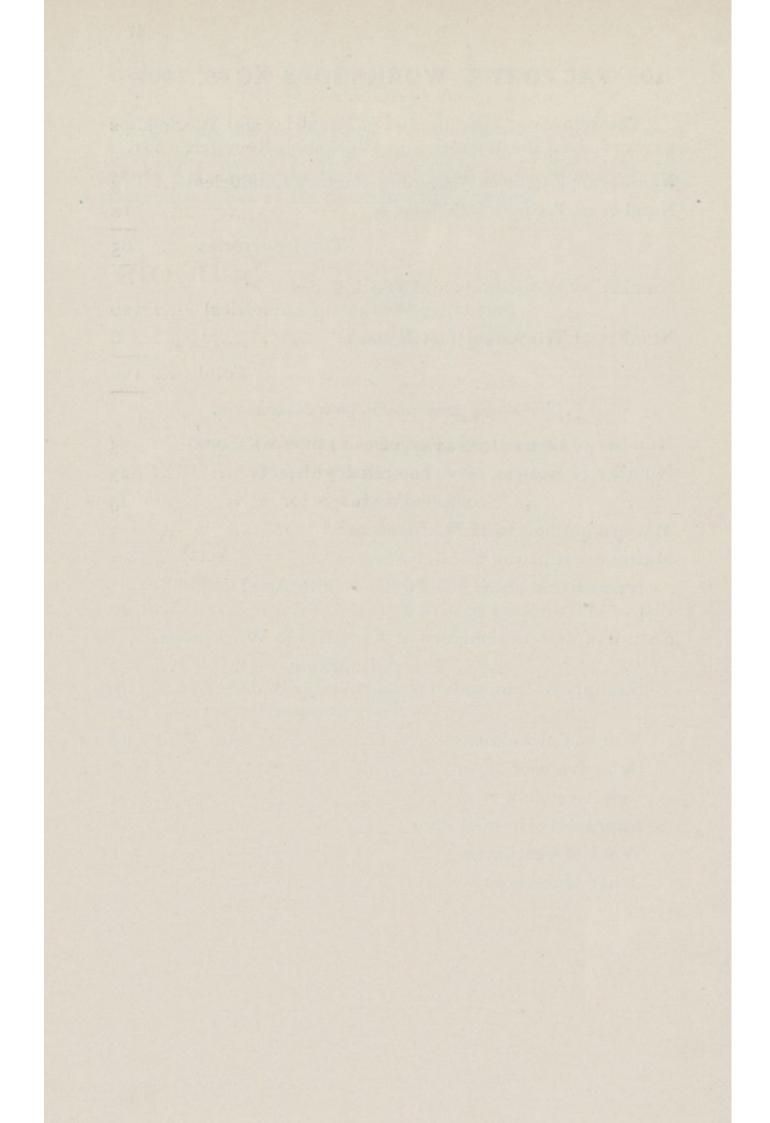
INCREASE OF RENT AND MORTGAGE INTEREST (RESTRICTIONS) ACT, 1920.

During the course of the year, several applications were made for the inspection of premises under Section 2 of the above Act. Reports were considered by the Public Health Committee and 21 Certificates were granted.

10.-FACTORY & WORKSHOPS ACTS, 1901.

The following is the number of Factories and Workshops as recorded on the Factory and Workshop Register, 1921.

Number of Factories (including Factory Laundries)		73
*Number of Factory Bakehouses		12
Total Factories	•••	85
Number of Workshops and Workplaces		
(including Workshop Laundries)		120
Number of Workshop Bakehouses	•••	6
Total		126
* One underground Factory Bakehouse.		
Number of Inspections (Factories and Workshops)		143
Number of Notices served to remedy defects		23
,, ,, complied with		
Matters notified to H.M. Inspector		
Matters notified by H.M. Inspector		
	• • •	5
(remediable under the Public Health Acts) List of Outworkers received		
		20
Nature of defects remedied at Factories & Worksho		
(insufficient		2
Sanitary accommodation unsuitable or defective		19
not separate for sexes	••••	
Want of cleanliness		8
Defective roof		I
Defective floor		Ι
Improperly drained floor		I
Want of ventilation		I
Other Nuisances		26



The School Medical Service in Relation to Public Elementary Schools. Hendon Education Committee.

Members of the Committee.

COUNCILLORS. Colonel F. W. HEARN (Chairman). Mr. C. C. CARTWRIGHT (Vice-Chairman). Mrs. S. J. BANNISTER. Mr. S. H. Egan, J.P. Major A. S. F. FORD. Miss E. C. GROWSE. Mrs. G. HARGRAVES. Miss M. HODGE. Rev. W. S. MACGOWAN, M.A., LL.D. Mr. J. H. STURGESS, Mr. W. TAYLOR. Mr. R. A. B. TEARE, M.B.E.

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Secretary to the Committee:

JAMES ANDERSON.

Medical Officers :

T. S. McIntosh, M.A., M.D., M.R.C.P.E., D.P.H. Ethel M. L. Leitch, M.B., Ch.B.

School Nurses :

Miss E. Murdoch,

Miss A. L. WHARTON.

SCHOOLS.

Provided.	Number	of Children on
Bell Lane		555
Algernon Road		887
Child's Hill		835
The Hyde		864
Garden Suburb		643
Wessex Gardens		420
Burnt Oak		257
Colindale Temporary		44

4,505

Rolls.

Non-provided.

.

St. Paul's C.E.	 	171
St. Vincent's R.C.	 	155
St. Mary's C.E	 	438
St. Mary's R.C	 	126
St. John's C.E	 	192
All Saint's C.E	 	342
St. Agnes R.C	 	120

1,544

Total

6,049

...

HENDON EDUCATION COMMITTEE.

ANNUAL REPORT OF THE SCHOOL MEDICAL OFFICER FOR THE YEAR 1921.

To the Chairman and Members of the Hendon Education Committee.

LADIES AND GENTLEMEN,

The Medical Inspections undertaken during the year revealed a standard of health which is, on the whole, very satisfactory. There is still room for improvement and I feel confident that as time goes on further improvement will be brought about, but taking things as they are at present I think there can be no doubt that the health of the school children of Hendon compares very favourably indeed with that of other districts throughout the country.

One of the main objects of the School Medical Service, to my mind probably *the* main object, is educational—the education both of children and parents in the importance of attention to health. I believe that this object is being pursued with a fair measure of success and that a gradual process of education of this nature has been inaugurated which will have a cumulative beneficial effect on the health of the people.

So far from the sense of parental responsibility being lessened I think that it is actually being increased as a result of the health activities of the Education Committee and that parents are being led to take a greater interest in the health of their children, and more pains to preserve it, than they have done in the past. There are exceptions, no doubt, but as a rule parents show a gratifying appreciation of the work of the School Medical Department and a readiness to adopt the advice given.

I am particularly anxious that people should look on the school doctors and nurses, not as part of a soulless official machine forcing them to do certain things to and for their children, but as sympathetic advisers to whom they can confidently turn for help and counsel in matters which concern the health of their children. There are encouraging signs that the parents are coming to regard us in that light.

Before proceeding to the details of the year's work I should like to draw attention to one or two points.

1. Uncleanliness.

The numbers found at the Routine Medical Inspections were remarkably low. Of course the parents are warned beforehand that these inspections are to take place and no doubt children are often specially cleaned up for the occasion. That however is all to the good. It is one of the beneficial effects of Medical Inspection, though an indirect one. The numbers found unclean by the nurses when they visit the school without notice being given is also gratifyingly low. Moreover, in the great bulk of the cases improvement is rapidly effected as a result of the nurses' representations to the parents. As long as there is one child in the schools with nits in her hair the ultimate aim has not been attained, but there seems little doubt that a gradual improvement is taking place, and that it is coming more and more to be looked on as a disgrace for a child to be in an uncleanly condition. I regard this gradual educational effect as of far greater importance than the benefit to the individual children who are cleansed, valuable though the latter is.

- 2. In Impetigo and Scabies which may also be classed as dirt diseases there has been a distinct falling off in the number of cases during the year, which is another hopeful sign.
- The number of Ringworm cases shows no sign of 3. diminishing at present. This can hardly be called a "dirt disease" and, so far as is known, it has no ill effects on the health of the sufferers. On the other hand it is a serious disease from the point of view of school attendance, since the children suffering from it must be excluded, and, even with efficient treatment, it often takes many months to cure. The only rapid cure is X-ray treatment and this is not easily available. There is a certain amount of prejudice against this form of treatment owing to the fact that permanent baldness has sometimes resulted from the application of the X-rays. It may be that this risk can never be entirely discounted but now that a vast experience in the use of X-ray has been accumulated it appears that the risk in the hands of a thoroughly skilled radiologist is very small indeed.

I have sometimes been asked if there were any danger of the brain being injuriously affected by

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the X-rays. Perhaps one is not in a position to say with absolute certainty that this could in no circumstances occur but so far as I am aware it has never been seriously brought forward that this is a possibility which has to be reckoned with, and all the evidence seems to point to the fact that no such effect is produced.

4. Adenoids and Enlarged Tonsils.

These defects bulk largely in all school medical reports. The number in this district cannot be considered unduly high. A good deal of discussion has taken place as to the proper treatment of these conditions and extreme statements have been made both for and against operative treatment. In my opinion two facts are indisputable, firstly, that many children have been subjected to the operation unnecessarily and secondly, that with regard to a considerable proportion of cases there can be no reasonable doubt that operation is the proper treatment. Such cases are those which show the defect in a very marked degree, those in which the general health is obviously suffering and those which are associated with ear complications. Personally I recommend operation only where I feel convinced that less radical measures will not be successful, and that successful treatment is imperative. In such cases the great benefit resulting from operation is not open to question. Over and over again parents have volunteered the information that the health of the children has been very much better since the operation and that they are very glad that they were persuaded to undertake it, a statement which is entirely in keeping with one's own observation.

An agreement between the Hendon Education Committee and the Hendon Cottage Hospital for the operative treatment of these cases at a cost of IC/6 per head has now been concluded and it is hoped that the great majority of cases requiring the treatment will in future obtain it.

5. Visual Defects.

The number found was considerable but is about the average for residential districts and much below the average for industrial districts as shewn in the Report for 1920 of the Chief Medical Officer to the Board of Education.

A very large proportion of the cases have received treatment. It is however becoming somewhat difficult for parents to obtain the necessary treatment as it is specialist work and the London hospitals are beginning to regard it as a form of treatment which should be provided by local Education Authorities. Treatment of Visual Defects is included in the Committee's scheme under the Education Act, 1918, and will, no doubt, be put in operation when financial conditions become less stringent.

6. Dental Defects.

The number of children referred for treatment for Dental defects is only a small proportion of those found so suffering. Some degree of dental defect is found in a very large proportion of all children examined and, no doubt, ought to receive treatment. Only those, however, have been referred for treatment who show extensive decay, or a septic condition of the mouth, or whose general health appears to be affected by the condition of the teeth. Parents cannot as a rule be persuaded of the necessity of having minor degrees of dental defect treated and it would be a mere waste of time to attempt to persuade them at present. This is another form of treatment provided for in the scheme, and when it is found possible to put it into operation great benefit should result.

With these introductory remarks I beg to submit my report which follows the lines laid down by the Board of Education.

I have the honour to be,

Ladies and Gentlemen,

Your obedient servant,

T. S. McINTOSH, School Medical Officer. The Provided Schools are all modern buildings of a good type and the standard of Sanitation and School hygiene in them is very satisfactory.

The Non-provided School buildings are older and not so well designed but on the whole are fairly satisfactory. In ST. JOHN'S SCHOOL the classrooms are somewhat dark owing to the proximity of other buildings. The playground is small and the W.C.'s are of the old trough pattern. At ALL SAINTS SCHOOL extensive alterations and additions have been made which have resulted in a great improvement of the premises, and have brought them up to a satisfactory standard.

MEDICAL INSPECTION.

(a) Age groups of the children inspected :

All children are inspected on first admission to school. The bulk of these are, of course, children entering the Infant Departments, at about the age of 5.

They are again examined between the ages of 8 and 9, and finally after attaining the age of 12.

The total number of children included in the Routine Inspections was 1,889.

(b) The Board of Education Schedule of Medical Inspection is adopted.

(c) Steps taken to secure the early ascertainment of crippling defects.

Children suspected to be suffering from defects of any kind are referred to the Medical Officers by teachers, school nurses, attendance officers, members of the Education Committee or any other person interested in the children, also by charitable organisations. In many cases parents also seek the advice of the Medical Officer with regard to their children.

In these ways serious defects of any kind come under observation early and are not left to be discovered only when the child happens to be due for Routine Medical Inspection. Children brought to notice by these various means are what are called "Specials," i.e., children first brought under observation by other means than by Routine Medical Inspection; 412 special cases were dealt with and 1,136 children were re-examined one or more times.

FINDINGS OF MEDICAL INSPECTION.

(a) UNCLEANLINESS.

At the Medical Inspections verminous conditions (mostly the presence of nits in the hair of girls) were found in 62 cases. In addition to the examination of the children at Medical Inspections, visits (without previous notice to the parents) are made to the Schools by the nurses, and the children systematically examined as regards cleanliness. The average number of these visits per school was 5; 5,016 children were examined and of them 389 were found to be unclean. The great bulk of these cases were children showing a moderate number of nits in the hair and not requiring to be excluded, 81 cases were excluded. All these excluded cases were cleansed at home and re-admitted without the necessity of any further action than visits to the home by the nurses. Notices were sent to the parents of all the 389 children and visits were paid to the homes with the view of impressing on the parents the importance of keeping their childrenclean. Advice as to how this might best be done was also given. By these means the condition was remedied in 153 cases and greatly improved in a further 208 cases. 26 cases were not improved and still remained under observation at the end of the year.

(b) MINOR AILMENTS.

This includes such skin diseases as Ringworm, Scabies and Impetigo and mild inflammation of the eye and ear. These are dealt with under their respective headings below.

(c) TONSILS AND ADENOIDS.

One hundred and twenty-five cases were found to be in need of treatment; 24 of these received operative treatment at the Hendon Cottage Hospital and 36 elsewhere; 30 received other forms of treatment; the remainder are still under observation.

(d) TUBERCULOSIS.

Six cases of suspected Pulmonary Tuberculosis are being kept under observation. One case of Tubercular cervical glands was treated and improved. One case of suspected Tuberculosis of the Spine is under observation.

(e) SKIN DISEASES.

There were 85 cases of Ringworm of the head and 65 cases of Ringworm of the body. All received treatment, 52 of the head cases and 44 of the body cases being treated at the School Clinic.

Sixteen head cases and 7 body cases had not completely recovered by the end of the year and remained under observation.

There were 54 cases of Scabies, all of which were treated and cured at the School Clinic.

Ninety-six cases of Impetigo were discovered and all received treatment and were cured by the end of the year. Ninety were treated at the School Clinic and 6 elsewhere.

There were 13 cases of other Skin diseases (not infectious). Of these 12 were treated at the School Clinic and 1 privately.

(f) EXTERNAL EYE DISEASE.

Twenty-eight cases were referred for treatment. Ten of these had received treatment by the end of the year. The remainder were still under observation at the end of the year.

146 cases of defective vision were referred for treatment. 141 were examined by private arrangement (most of them at London Hospitals). 123 were found to be in need of spectacles and obtained them. 13 were advised other forms of treatment and 5 were found not to require treatment. The remaining cases are still under observation.

(h) EAR DISEASE AND DEFECTIVE HEARING.

Sixteen cases of ear disease and 10 of defective hearing referred for treatment. Six of the cases of defective hearing received treatment and were remedied. Of the cases of ear disease (mostly discharging ears) 5 received treatment, 3 were remedied, and 2 improved. The remainder are under observation.

(i) DENTAL DEFECTS.

129 were referred for treatment and 42 received treatment by private arrangement.

(j) CRIPPLING DEFECTS.

One case of Infantile paralysis was found to be in need of treatment, received treatment and greatly improved.

(k) HEART DISEASE.

Twelve cases were referred for treatment and 84 for observation. Many of these cases referred for observation are very mild cases presenting only a heart murmur which may have little significance, but it is important that they should be kept under observation in case more serious symptoms should supervene. Sixteen cases showed definite improvement.

(1) ANÆMIA.

Eighteen cases were referred for treatment, 8 were remedied, and 1 improved.

(m) LUNGS (NOT INCLUDING TUBERCULOSIS).

Two cases were referred for treatment and 17 for observation. 6 showed definite improvement.

(n) MENTAL DEFECT.

Three cases were discovered during the year. One is attending the infant department of an ordinary elementary school. The other 2 are not at school. One of the latter is a cripple owing to infantile paralysis.

INFECTIOUS DISEASES.

Mumps, Chicken-Pox, and Whooping Cough prevailed to a considerable extent during the year but no serious epidemics of these diseases occurred and no special measures were necessary.

The incidence of Scarlet Fever in the district throughout the year was rather high but there was no severe epidemic. No particular school was specially involved and there was nothing to indicate that infection took place in the schools. Scarlet Fever was very prevalent in London throughout the year.

The District was never quite free from Diphtheria during the year but the number of cases was very moderate until the middle of December, when a rather serious epidemic began. It continued into the year 1922 and may be said to have lasted for about 8 weeks, from 11th December, 1921 to 4th February, 1922. Although the period covered falls partly in the year 1922 it will be convenient to deal with the whole epidemic in this Report.

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The cases were distributed in the schools as follows :

Child's Hill School 7	Bell Lane School	2
Algernon Rd. School 6	St. John's School	4
All Saint's School 2	Burnt Oak School	
Garden Suburb School 4	Wessex Gardens School	
The Hyde School 9	St Mary's C.E. School	I

It will be seen that the cases were spread over practically all the schools in the District except the Mill Hill Schools, and the schools specially involved are those which serve the parts of the district which were specially affected, namely Cricklewood and West Hendon.

The total number of cases occurring in the district during the period was 76 while the number of cases among children attending the Public Elementary Schools was 38. This is a smaller proportion than one would be inclined to expect, considering that Diphtheria is to a large extent a disease of childhood. It strongly suggests that school attendance did not play an important part in spreading the disease.

As soon as the schools re-opened after the Christmas holidays all the children attending the schools in the specially affected parts of the district were examined. All children of whom there was any suspicion that they might be suffering from a mild attack of Diphtheria, or that they might be carriers of the disease, were excluded after swabs had been taken. 64 were thus excluded. 4 of these were eventually diagnosed as suffering from Diphtheria, 12 others were found to have positive swabs and were looked on as possible carriers. These children remained excluded till freed from all suspicion of infection.

FOLLOWING UP.

When children are found to be suffering from defects their parents are informed and advised to consult their own doctors. The School Nurses visit the homes to see if this has been done and to urge the parents to obtain treatment if they have not done so. 2210 visits were paid by the School Nurses. The defective children are re-examined in the schools and at the clinic by the Medical Officer to ascertain the results of treatment. Children who require it are thus kept under continuous observation. The School Clinic is held at Burroughs House on Saturday Mornings. Children who have been excluded are brought there to be examined by the medical officer, with a view to being re-admitted when fit, other children are brought up by their parents for advice or are referred to the medical officer by teachers, nurses, attendance officers, etc. For certain minor ailments, such as Ringworm, Scabies and Impetigo, ointments are distributed with directions for treatment. Four hundred and seven children were examined and 1048 examinations were made. 256 cases were treated. All were cured with the exception of a small number whose treatment was not completed by the end of the year.

PROVISION OF MEALS.

The Hendon Unemployment Committee (a Voluntary Committee) had undertaken the feeding of children of the unemployed from March, 1921. In September they intimated to the Hendon Education Committee that their funds would not permit of their continuing the work beyond December. With the approval of the Board of Education, the Hendon Education Committee entered into an arrangement with the Voluntary Committee, whereby the work should be continued by the latter, the Hendon Education Committee paying the nett cost of the meals supplied to children on the school registers.

This arrangement took effect from 1st December, 1921, the number of meals supplied to school children to December 31st being 1806. Of these, 1298 were served at St. John's Hall and 508 at Bell Lane School. The former premises are lent by the St. John's Church Authorities, and the latter by the Education Committee, no charge being made for the use of the premises in either case.

The dietary is sufficient and satisfactory in quality and the meals are well cooked and palatable.

EMPLOYMENT OF CHILDREN.

The Education Committee's powers under the Employment of Children Act, 1903 and the Education Act, 1918 were in force throughout the year. 87 boys and 29 girls were examined for certificates sanctioning their employment. In 6 cases the certificate was refused. In the remainder it was granted. No case of a child suffering from health as a result of his or her employment was discovered during the year.

The following are the statistical tables prescribed by the Board of Education :--

TABLE 1.—Number of Children Inspected 1st January, 1921 to 31st December, 1921.

	Entrants.								
Age.	3	4	5	6	Other Ages.	Total.			
Boys	 I	112	159	18	59	412			
Girls	 -	98	142	59	57	356			
Totals	 I	210	301	140	116	768			

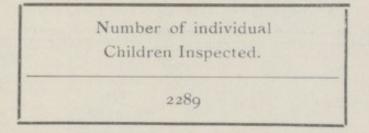
A.-Routine Medical Inspection.

Age.	Inter- mediate	I	Leavers.		Other Ages.	Total.	Grand Total.
	Group. 8	I 2	13	14			
Boys	293	286	21	2	15	. 617	1029
Girls	231	248	14	3	8	504	860
Totals	524	534	35	5	23	1121	1889

B.-Special Inspections.

	Special Cases.*	Re-examinations (<i>i.e.</i> No. of Children Re-examined.)
Boys	 237	479
Girls	 175	657
Fotal	 412	1136

C.—Total number of individual Children inspected by the Medical Officer, whether as Routine or Special Cases (no Child being counted more than once in one year).



* "Special Cases" are those children specifically referred to the Medical Officer, and not due for routine medical inspection under the Code at the time when specially referred. Such children may or may not be of Code group age and may be referred to the Medical Officer at the School or the Clinic by the Committee, Medical Officers, School Nurses, Teachers, Attendance Officers, Parents or otherwise.

TABLE II.—Return of Defects found in the course of Medical Inspection in 1921.

		Rou Inspec		Spec	ials.
Defect or Disease		No. referred for treatment.	No. requiring to be kept under observa- tion but not re- ferred for treatment.	No. referred for treatment.	No. requiring to be kept under observa- tion but not re- ferred for treatment
(1)		(2)	(3)	(4)	(5)
Malnutrition Uncleanliness		18	29	-	-
Head		60	_		
Body		2	-		-
Ringworm				0.	
Head		3	-	82	
Body		3		62	
Skin Scabies		5	_	49	
Impetigo Other Disea	 ses	9	-	87	-
(non-Tuber	cular	9	I	4	T
Blepharitis		12	I	1	_
Coniunctivit	IS	6	I	3	
Keratitis Corneal Ulc		_		_	_
Eye Corneal Opa		_	_		-
Defective Vi		110	19	23	I
Squint		11	10	2	-
Other Condi		2	3	2	I
(DefectiveHe		6	36	4	2
Ear Otitis Media		8	8	4	1
Other Lar					
Disea		3	1	1	
Enlarged T	onsils	47	43	3	_
Nose & Adenoids	maila	10	5	-	
Throat Enlarged To and Ade		45	8	4	-
Other Condi		6	8 8	4 8	-
Enlarged Cervical Gla					
(Non-Tubercu		7	18		3

			tine ctions.	Spe	cials.
	Defect or Disease.	No. referred for treat- ment. (2)	No. requir- ing to be kept under observa- tion but not re- ferred for treat- ment: (3)	No. referred for treat- ment:	No. requir- ing to be kept under observa- tion but not re- ferred for treat ment.
	(1)	(=)	(3)	(4)	(5)
					1
Defective		I	4	и 8	-
	Dental Diseases	121	17	0	-
and	Heart Disease Organic	7	18		I
Circula-	Functional	4	61	I	4
tion	Anæmia	13	8	5	I
	Bronchitis	I	6	-	I
Lungs	Other Non-Tubercular				
	Disease	I	8	-	2
	Pulmonary				
	Definite		-	-	-
	Suspected	_	5		I
	Non-Pulmonary			La Carrier	I
Tuber	Glands	1			1
culosis	Spine		1	Lok	
	Hip Other Bones and				
	Joints			_	_
	Skin	_	-	_	
	Other Forms		-	-	-
N	(Epilepsy	-	-	-	I
Nervous	Churea	2	I	-	-
System	Other Conditions	2	9	2	I
Defor-	(Rickets	-	-	-	-
mities	Spinal Curvature	1	2	2	I
	Other Forms	I	13	-	-
Other De	fects and Diseases	IO	13	6	I
ha v i Trea	er of Individual Children ng defects which required utment or to be kept under rvation	.,			1011

TABLE	III.—Numerical	Return of	fall exceptional	Children
	in the	area in	1921.	

		,	Boys	Girls	Total
(Including pa within the mo Elementary (Blind and D	eaning of the VEducation Peaf Children)	Attending Public Elemen- tary Schools AttendingCertifiedSchools for the Blind Not at School	- I -		
(Including pa within the mo Elementary (Blind and D	eaning of the y Education	Attending Public Element- ary Schools Attending Certifi'd Schools for the Deaf Not at School	I 	- - -	1
Mentally Deficient.	Feeble Minded.	Attending Public Element- ary Schools AttendingCertifi'd Schools for Mentally Defective Children Notified to the Local Con- trol Authority by Local Education Authority during the year Not at School	3	2	3
	Imbeciles.	At School Not at School	 I		
Epile	PTICS.	Attending Public Element- ary Schools Attending Certifi'd Schools for Epileptics In Institutions other than Certified Schools Not at School	1		I I I

			Boys.	Girls.	Total
Physically	Pulmonary Tuberculosis	Attending Public Element- ary Schools AttendingCertifi'd Schools for Physically Defective Children In Institutions other than Certified Schools Not at School	1 	-	Į
Defective.	Crippling due to Tuberculosis	Attending Public Element- ary Schools Attending Certifi'd Schools for Physically Defective Children In Institutions other than Certified Schools Not at School		- - I	
	to causes other than Tub erculosis <i>i.e.</i> , Paralysis, Rickets,	Attending Public Element- ary Schools * Attending Certifi'd Schools for Physically Defective Children In Institutions other than Certified Schools Not at School	7	2	9
	ren suitable for admission to Open-Air Schools ; Children suf-	Attending Public Element- ary Schools Attending Open-Air Schools Attending Certifi'd Schools for Physically Defective Children other than	I 2		ı 5
Dull or	Disease.	Retarded 2 years Retarded 3 years	104 22	76 33	180 55

* Judged according to Age and Standard

TABLE IV.-Treatment of Defects of Children during 1921.

	N	UMBER OF	CHILDREN.		
	Alteration	Treated.			
DISEASE OR DEFECT.	Referred for Treatment	Under Local Education Authority's Scheme	Test of the process of the second sec	Total.	
Skin :—					
Ringworm-Head	85	52*	17*	69*	
Ringworm-Body	65	44*	14*	58*	
Scabies	54	54	-	54	
Impetigo	96	90	6	96	
Minor Injuries	5	4	I	5	
Other Skin Disease	13	12	I	13	
Car Disease Cye Disease (external	16	-	9	9	
and other)	28	-	10	10	
liscellaneous*	23	-	9	9	

A .- Treatment of Minor Ailments.

* These figures represent the numbers whose treatment was completed by the end of the year. All the cases received treatment but 16 cases of ringworm of the head and 7 cases of ringworm of the body were still under treatment at the end of the year.

B.-Treatment of Visual Defect.

Submit	Submi	tted to R	ted to Refraction.						For
Re- ferred for re- frac- tion.	Under Local Educa- tion Autho- rity's Scheme Clinic or Hospital.	By Private Prac- titioner or Hospi- tal.	Other- wise.	Total.	For whom glasses were pre- scribed.	whom glasses were pro- vided.	for	Recom- mended for Treat- ment other han by glasses. Recei- wed other for for other treat- ment of con treat- ment of con treat- ment of con treat- ment con treat- con treat con treat- con treat treat treat con treat con treat treat con treat treat con tre tre treat con treat con treat c	whom no treat- ment was con- sidered neces- sary.
146	-	135	6	141	123	123	13	I 2	5

NUMBER OF CHILDREN.

		NUMBER OF	CHILDREN.	
	Received	I Operative Trea	atment.	
Referred for Treatment.	Under Local Education Authority's Scheme— Clinic or Hospital.	By Private Practitioner or Hospital.	Total.	Received other forms of treatment
125	24	36	60	30

C.-Treatment of Defects of Nose and Throat.

D.-Treatment of Dental Defects.*

NUMBER OF CHILDREN.				
	Routine	"Specials "	Total	
Referred for treatment	121	8	129	
Actually treated	40	2	42	
Re-treated (result of periodical examination)	-	-	_	

* Inspections by M.O. at Routine and Special Inspections. Treatment obtained by the parents by private arrangement.

	Number of Children.				
Disease or Defect,		Treated.			
	Referred for Treatment.	Under Local Education Authority's Scheme.	Otherwise.	Total.	
Minor Ailments Visual Defects Defects of nose	385 146	256	67 135	323 135	
and throat Dental Defects Other Defects	125 129 79	24 	66 42 65	90 42 65	
Total	864	280	375	655	

TABLE V.-Summary of Treatment of Defects.

TABLE VI.—Summary Relating to Children Medically Inspected at the Routine Inspections during the Year 1921.

(1)	The total number of children med spected at the routine inspection		y in- 	1889
(2)	The number of children in (1) suffering			
	Malnutrition			47
	Skin Disease			30
	Defective Vision (including Squi	nt)		150
	Eye Disease			26
	Defective Hearing			12
	Ear Disease			20
	Nose and Throat Disease			172
	Enlarged Cervical Glands (non-tu	berc	ular)	25
	Defective Speech			5
	Dental Disease			5 138
	Heart Disease :			
	Organic			25
	Functional			65
	Anæmia			21
	Lung Disease (non-tubercular)	· · · ·		16
	Tuberculosis :			
	Pulmonary { definite suspected			-
	rumonary suspected			5
Non-Pulmonary	Non-Pulmonary			2
	Disease of the Nervous System			14
	Deformities			17
	Other Defects and Diseases			23
(3)	The number of children in (1) suffer			
	defects (other than uncleanliness			
	tive clothing or footgear) who req			
	kept under observation (but not	refe	erred	
	for treatment.)			246
(4)	The number of children in (1) who	wer	e re-	
	ferred for treatment (excluding			
	liness, defective clothing, etc.)			447
				447
(5)	The number of children in (4) who			
	treatment for one or more defects			
	ing uncleanliness, defective cloth	ing,	etc.)	337

