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Publication/Creation

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REPORT

ON THE

Health and Sanitary Condition

OF THE

Metropolitan Borough of Shoreditch,

IN THE COUNTY OF LONDON,

FOR THE YEAR 1930,

BY

MAITLAND RADFORD, M.D., B.S., D.P.H.,

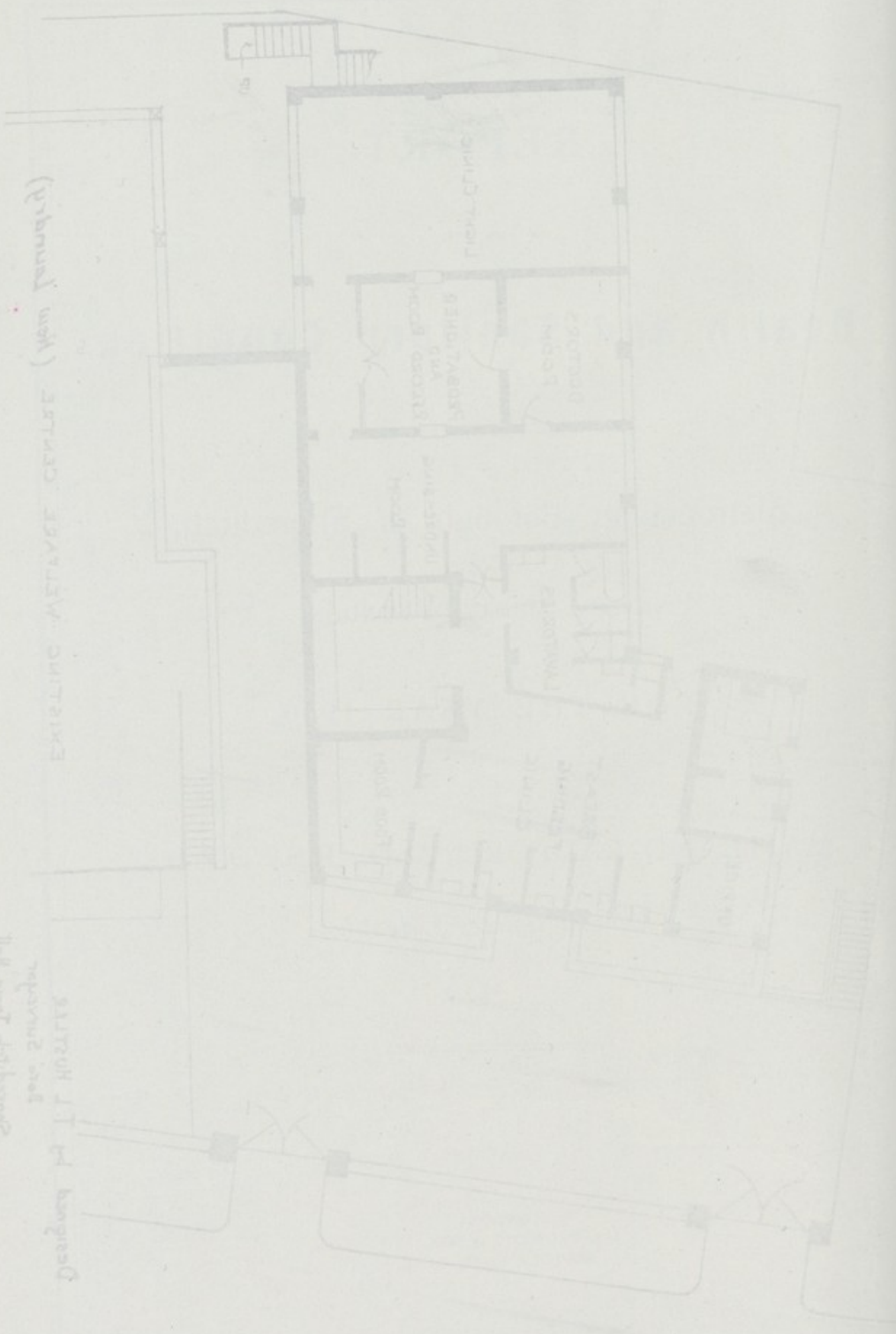
Medical Officer of Health.

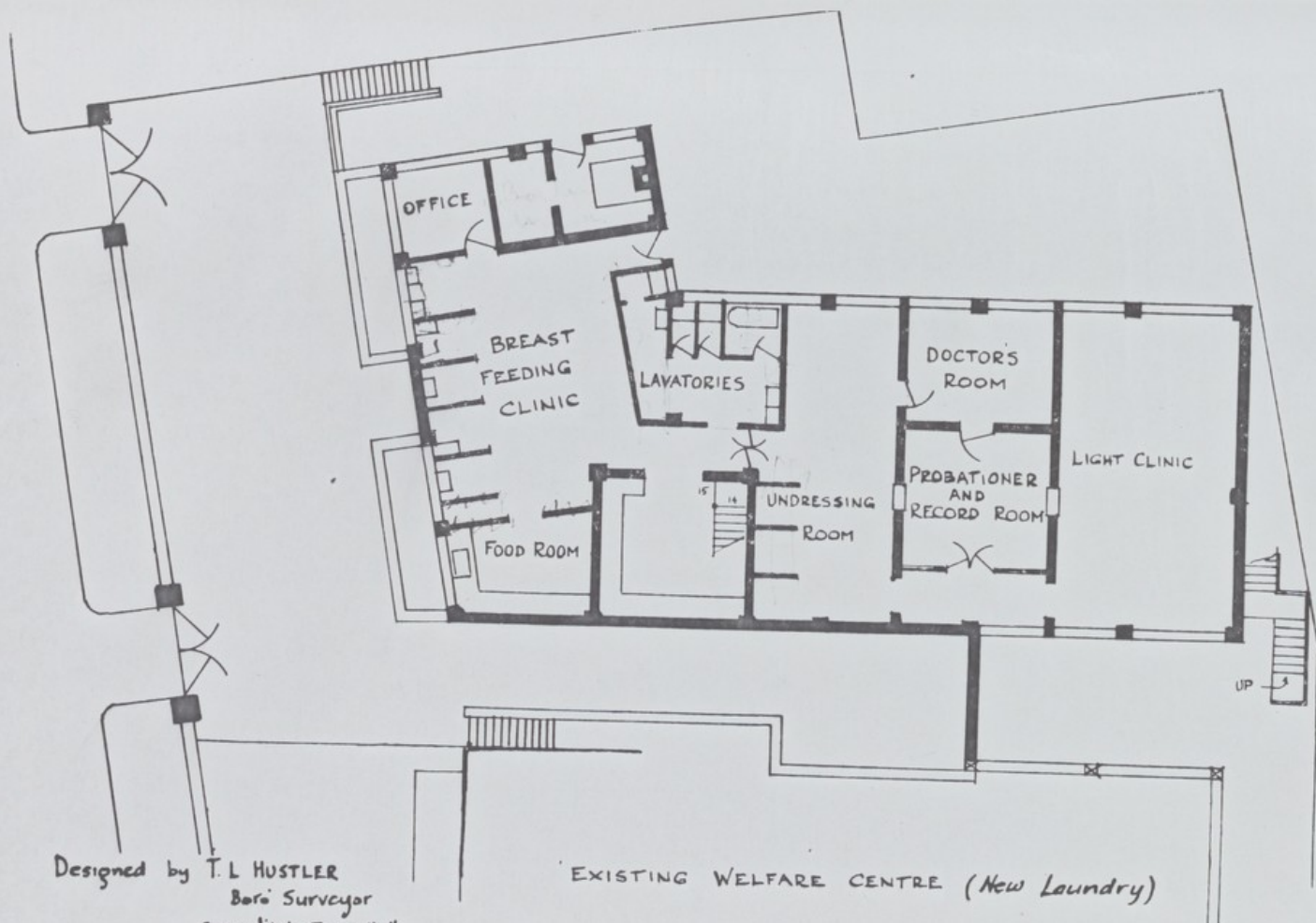
LONDON:
JAS. TRUSCOTT & SON, LTD.
SUFFOLK LANE, E.C. 4.

BASEMENT PLAN (BASIC ROOMS AND STAIRS)

EXISTING METAL CENTER (NEW STAIRS)

DESIGNED BY J. F. HARRIS
 1000 2nd Ave.
 New York, N.Y.





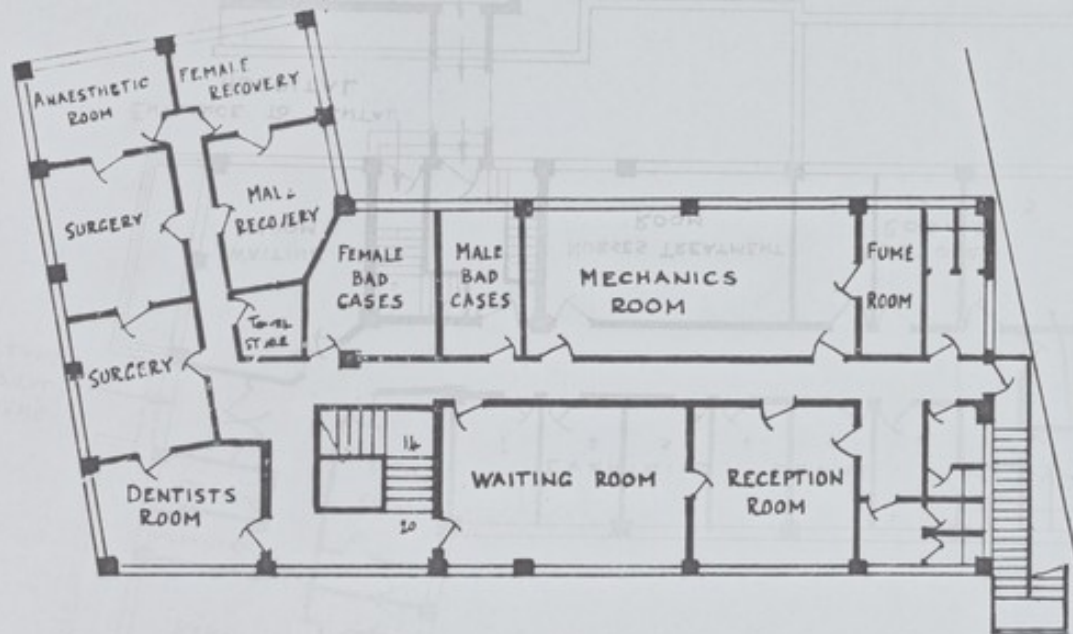
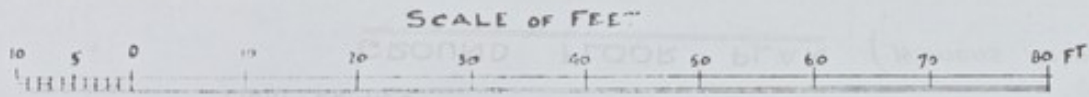
Designed by T. L. HUSTLER
 Boro' Surveyor
 Shoreditch Town Hall
 E.C.1
 December 1930.

EXISTING WELFARE CENTRE (New Laundry)

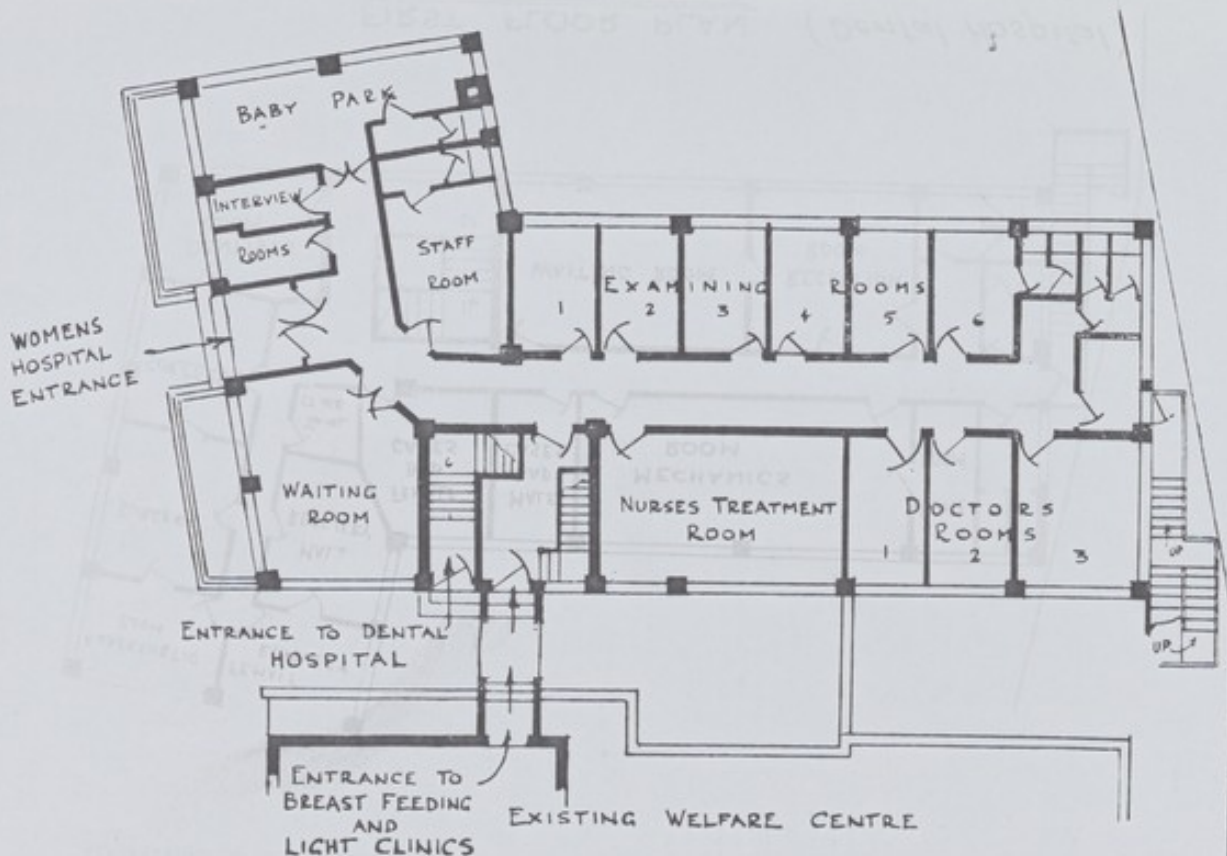
BASEMENT PLAN (Breast Feeding and Light Clinics)



EXISTING MATERNITY CENTRE KINGSLAND RD



FIRST FLOOR PLAN (Dental Hospital)



GROUND FLOOR PLAN (Womens Hospital)

METROPOLITAN BOROUGH OF SHOREDITCH.

PUBLIC HEALTH COMMITTEE.

(Nov., 1929—Oct., 1930.)

Ex-officio : Dr. S. W. JEGER, J.P. (Mayor).

Chairman : Councillor BROWN, T. W.

Vice-Chairman : Councillor CROWE, W. J.
Alderman LAND, C.

Councillor COOMBS, T. C.

" CROFTS, R. O.

" ELLWOOD, Mrs. L.

" HARVEY, Mrs. J.

" ISAACS, L.

" KELLETT, Miss E.

" KEMPSON, A. E.

" KENNY, T. J.

" O'CONNOR, Mrs. M.

" REED, E.

" SMITH, Mrs. M.

" TUCKER, T.

MATERNITY AND CHILD WELFARE COMMITTEE.

(Nov., 1929—Oct., 1930.)

Chairman : Alderman LAY, E. W.

Vice-Chairman : Alderman GIRLING, Mrs. H.,
J.P., M.A.B.

Alderman REYNOLDS, G.

Councillor BAKER, J. S.

" DAVIES, H. W.

" FAIRCHILD, Mrs. E. M.

" HARVEY, Mrs. J.

" HURLEY, J. J.

" KELLETT, Miss E.

" LEE, E.

(Co-opted) COLVILLE, Lady CYNTHIA

" HIGGINS, Mrs. C.

" INGHAM, Mrs. R. M.

" LAY, Mrs. H.

" ROGERS, Mrs. M.

PUBLIC HEALTH COMMITTEE.

(Nov. and Dec., 1930.)

Ex-officio : Mrs. H. GIRLING, J.P., L.C.C. (Mayor).

Chairman : Alderman Dr. S. W. JEGER,
L.C.C.

Vice-Chairman : Councillor CROWE, W. J.

Councillor BROWN, T. W.

" COOMBS, T. C.

" ELLWOOD, Mrs. L.

" FAIRCHILD, Mrs. E. M.

" HARVEY, Mrs. J.

" KELLETT, Miss E.

" KEMPSON, A. E.

" KENNY, T. J.

" O'CONNOR, Mrs. M.

" REED, E.

" SMITH, Mrs. M.

" THURTLIE, Mrs. D.

" TUCKER, T.

MATERNITY AND CHILD WELFARE COMMITTEE.

(Nov. and Dec., 1930.)

Chairman : Councillor KELLETT, Miss E.

Vice-Chairman : Councillor ELLETT, W. T.

Alderman LAY, E. W.

Councillor BAKER, J. S.

" ELLWOOD, Mrs. L.

" HURLEY, J. J.

" FAIRCHILD, Mrs. E. M.

" LEE, E.

" O'CONNOR, Mrs. M.

(Co-opted) COLVILLE, Lady CYNTHIA, J.P.

" HIGGINS, Mrs. C.

" INGHAM, Mrs. R. M.

" LAY, Mrs. H.

" MURPHY, Mrs.

CONTENTS

Section	Page
I—Statistics and General Information	1 to 7
II—Fostered Births, Marriages, and Deaths	8 to 18
III—Infantile Diseases	19 to 38
IV—Sanitary Work	39 to 62
V—Tuberculosis	63 to 75
VI—Municipal Dental Hospital	76 to 82
VII—St. Andrew's Women's Hospital	83 to 84
VIII—Housing	85 to 95
IX—Maternity and Child Welfare	96 to 110
X—Health Week	120 to 131
XI—Miscellaneous	132 to 135

LIST OF STATISTICAL TABLES CONTAINED
IN THE REPORT

Statistical summary	2
For whole district during 1939 and previous years	3
Cases of infectious diseases notified during 1939	10
Deaths of and ages at death during year 1939	12 to 15
Infantile mortality during 1939	16
Comparisons of London and Southern birth and death rates in 1939	17
Summary of proceedings under Public Health (London) Act, 1929	58 to 61
Summary of Tuberculosis Certificates received	62
Abstracts compiled from the abstracts of their work prepared by the Sanitary	
Authorities for 1939	60 to 61
Housing Committee	62 to 66
Health and Welfare Committee—Summary of work	63 to 67
Return of new-born at St. Andrew's Dispensary	68 to 75
Maternity and Child Welfare	114 to 119
Health Week	120
Municipal Maternity	121 to 12
London	17 to 18
Summary of deaths from Tuberculosis	66 to 67
Municipal Dental Hospital	76 to 80

CONTENTS.

SECTION.	PAGE
I.—Statistics and General Information	2 to 7
II.—Population, Births, Marriages and Deaths	8 to 18
III.—Infectious Disease	19 to 38
IV.—Sanitary Work	39 to 62
V.—Tuberculosis	63 to 75
VI.—Municipal Dental Hospital	76 to 82
VII.—Shoreditch Women's Hospital	83 & 84
VIII.—Housing	85 to 98
IX.—Maternity and Child Welfare	99 to 119
X.—Health Week... ..	120 & 121
XI.—Staff	122 & 123

LIST OF STATISTICAL TABLES CONTAINED
IN THE REPORT.

Statistical Summary	2
For whole district during 1930 and previous years	3
Cases of Infectious disease notified during 1930	19
Causes of, and ages at, death during year 1930	12 & 13
Infantile mortality during 1930	14
Comparison of London and Shoreditch birth and death rates in 1930	4
Summary of proceedings under Public Health (London) Act, 1891	58 to 61
Summary of Tuberculosis Certificates received	63
Summary compiled from the abstracts of their work prepared by the Sanitary Inspectors for 1930	40 & 41
Housing Conditions	85 to 98
Factory and Workshop Act—Summary of work	53 to 57
Return of work carried out at Tuberculosis Dispensary	68 to 73
Maternity and Child Welfare	114 to 119
Nursing List	36
Maternal Mortality	15 & 16
Cancer	17 & 18
Summary of deaths from Tuberculosis	66 & 67
Municipal Dental Hospital	76 to 80

Metropolitan Borough of Shoreditch.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH.

TOWN HALL,
OLD STREET, E.C. 1.

June, 1931.

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

MADAM, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for the year 1930. It is gratifying to be able to report that so low an infantile mortality rate as 65 has never before been recorded in Shoreditch.

It is hoped that the epidemic of small-pox (*Variola minor*), particulars of which are given in the report, reached its peak during the year. This disease, though happily not severe, was the cause of over 700 persons being removed to hospital, of the infliction of anxiety, inconvenience, and in many cases, serious economic loss upon a large number of families, and of a very great strain being thrown upon the administrative resources of the Health Department.

More pleasant is it to remember important developments of the Health Services of the Borough. These include a Tuberculosis Dispensary, new Dental Hospital, Maternity and Child Welfare extension, Women's Hospital, Laundry, Municipal Midwife, Municipal Day Nursery, arrangements in connection with all of which were well advanced at the end of the year.

I wish to place on record my appreciation of the manner in which the Staff of the Department carried out their duties and to thank them for their ready help throughout a very busy year. In this connection I will name Dr. James Fanning, Assistant Medical Officer of Health, who retired; his successor, Dr. Evelyn McGregor; Mr. Davies, Dental Surgeon; Mr. Wilsher, Chief Clerk; and Mr. Pearson, Chief Sanitary Inspector.

Finally, I wish to thank all the members of the Council, and in particular the Chairmen and Members of the Health and Maternity and Child Welfare Committees for their assistance in all matters relating to the work for which I am responsible.

I am, Madam, Ladies and Gentlemen,

Your obedient Servant,

MAITLAND RADFORD,
Medical Officer of Health.

I-STATISTICS AND GENERAL INFORMATION.

STATISTICS AND SOCIAL CONDITIONS.

Area: 1,000 acres. Population—Census, 1921, 101,518; Registrar-General's estimate 1921—99,710. Number of inhabited houses, 1921—15,745. Number of houses (and of lots) according to Rate Book, 14,153. Number of families and persons according to 1921—23,375. Rateable value, £102,870. Town represented by rating rate £3,000.

Some account of the social and economic conditions prevailing in the Borough will be found in Section VI of this report. Briefly, although it is a densely populated town (100 to the acre) and contains approximately 14,000 separately separate dwellings and 3,000 business premises. The length of public streets in the Borough is 45 miles.

A great variety of industries are carried on in these business premises. Furniture making is one of the most common of these, and one which is by tradition largely established in the Borough. The number of home workers cannot be stated with accuracy, as there is necessarily some overlap in lists received from employers. The only figures given as a round number. Particulars regarding home work will be found in Section IV of this report, page 48.

Unemployment was, naturally, prevalent throughout the year, and must be mentioned one of the most painful of the conditions that have had a prejudicial effect upon health.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR 1928.

	Total	Estimate	Birth Rate
1928	1,914	1,914	20.1
1927	1,900	1,900	19.7
1926	1,886	1,886	19.3
1925	1,872	1,872	18.9
1924	1,858	1,858	18.5
1923	1,844	1,844	18.1
1922	1,830	1,830	17.7
1921	1,816	1,816	17.3
1920	1,802	1,802	16.9
1919	1,788	1,788	16.5
1918	1,774	1,774	16.1
1917	1,760	1,760	15.7
1916	1,746	1,746	15.3
1915	1,732	1,732	14.9
1914	1,718	1,718	14.5
1913	1,704	1,704	14.1
1912	1,690	1,690	13.7
1911	1,676	1,676	13.3
1910	1,662	1,662	12.9
1909	1,648	1,648	12.5
1908	1,634	1,634	12.1
1907	1,620	1,620	11.7
1906	1,606	1,606	11.3
1905	1,592	1,592	10.9
1904	1,578	1,578	10.5
1903	1,564	1,564	10.1
1902	1,550	1,550	9.7
1901	1,536	1,536	9.3
1900	1,522	1,522	8.9
1899	1,508	1,508	8.5
1898	1,494	1,494	8.1
1897	1,480	1,480	7.7
1896	1,466	1,466	7.3
1895	1,452	1,452	6.9
1894	1,438	1,438	6.5
1893	1,424	1,424	6.1
1892	1,410	1,410	5.7
1891	1,396	1,396	5.3
1890	1,382	1,382	4.9
1889	1,368	1,368	4.5
1888	1,354	1,354	4.1
1887	1,340	1,340	3.7
1886	1,326	1,326	3.3
1885	1,312	1,312	2.9
1884	1,298	1,298	2.5
1883	1,284	1,284	2.1
1882	1,270	1,270	1.7
1881	1,256	1,256	1.3
1880	1,242	1,242	0.9
1879	1,228	1,228	0.5
1878	1,214	1,214	0.1
1877	1,200	1,200	0.0
1876	1,186	1,186	0.0
1875	1,172	1,172	0.0
1874	1,158	1,158	0.0
1873	1,144	1,144	0.0
1872	1,130	1,130	0.0
1871	1,116	1,116	0.0
1870	1,102	1,102	0.0
1869	1,088	1,088	0.0
1868	1,074	1,074	0.0
1867	1,060	1,060	0.0
1866	1,046	1,046	0.0
1865	1,032	1,032	0.0
1864	1,018	1,018	0.0
1863	1,004	1,004	0.0
1862	990	990	0.0
1861	976	976	0.0
1860	962	962	0.0
1859	948	948	0.0
1858	934	934	0.0
1857	920	920	0.0
1856	906	906	0.0
1855	892	892	0.0
1854	878	878	0.0
1853	864	864	0.0
1852	850	850	0.0
1851	836	836	0.0
1850	822	822	0.0
1849	808	808	0.0
1848	794	794	0.0
1847	780	780	0.0
1846	766	766	0.0
1845	752	752	0.0
1844	738	738	0.0
1843	724	724	0.0
1842	710	710	0.0
1841	696	696	0.0
1840	682	682	0.0
1839	668	668	0.0
1838	654	654	0.0
1837	640	640	0.0
1836	626	626	0.0
1835	612	612	0.0
1834	598	598	0.0
1833	584	584	0.0
1832	570	570	0.0
1831	556	556	0.0
1830	542	542	0.0
1829	528	528	0.0
1828	514	514	0.0
1827	500	500	0.0
1826	486	486	0.0
1825	472	472	0.0
1824	458	458	0.0
1823	444	444	0.0
1822	430	430	0.0
1821	416	416	0.0
1820	402	402	0.0
1819	388	388	0.0
1818	374	374	0.0
1817	360	360	0.0
1816	346	346	0.0
1815	332	332	0.0
1814	318	318	0.0
1813	304	304	0.0
1812	290	290	0.0
1811	276	276	0.0
1810	262	262	0.0
1809	248	248	0.0
1808	234	234	0.0
1807	220	220	0.0
1806	206	206	0.0
1805	192	192	0.0
1804	178	178	0.0
1803	164	164	0.0
1802	150	150	0.0
1801	136	136	0.0
1800	122	122	0.0
1799	108	108	0.0
1798	94	94	0.0
1797	80	80	0.0
1796	66	66	0.0
1795	52	52	0.0
1794	38	38	0.0
1793	24	24	0.0
1792	10	10	0.0
1791	0	0	0.0
1790	0	0	0.0
1789	0	0	0.0
1788	0	0	0.0
1787	0	0	0.0
1786	0	0	0.0
1785	0	0	0.0
1784	0	0	0.0
1783	0	0	0.0
1782	0	0	0.0
1781	0	0	0.0
1780	0	0	0.0
1779	0	0	0.0
1778	0	0	0.0
1777	0	0	0.0
1776	0	0	0.0
1775	0	0	0.0
1774	0	0	0.0
1773	0	0	0.0
1772	0	0	0.0
1771	0	0	0.0
1770	0	0	0.0
1769	0	0	0.0
1768	0	0	0.0
1767	0	0	0.0
1766	0	0	0.0
1765	0	0	0.0
1764	0	0	0.0
1763	0	0	0.0
1762	0	0	0.0
1761	0	0	0.0
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1759	0	0	0.0
1758	0	0	0.0
1757	0	0	0.0
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1735	0	0	0.0
1734	0	0	0.0
1733	0	0	0.0
1732	0	0	0.0
1731	0	0	0.0
1730	0	0	0.0
1729	0	0	0.0
1728	0	0	0.0
1727	0	0	0.0
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1725	0	0	0.0
1724	0	0	0.0
1723	0	0	0.0
1722	0	0	0.0
1721	0	0	0.0
1720	0	0	0.0
1719	0	0	0.0
1718	0	0	0.0
1717	0	0	0.0
1716	0	0	0.0
1715	0	0	0.0
1714	0	0	0.0
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1708	0	0	0.0
1707	0	0	0.0
1706	0	0	0.0
1705	0	0	0.0
1704	0	0	0.0
1703	0	0	0.0
1702	0	0	0.0
1701	0	0	0.0
1700	0	0	0.0
1699	0	0	0.0
1698	0	0	0.0
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1691	0	0	0.0
1690	0	0	0.0
1689	0	0	0.0
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1686	0	0	0.0
1685	0	0	0.0
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1683	0	0	0.0
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1681	0	0	0.0
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1679	0	0	0.0
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1677	0	0	0.0
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1672	0	0	0.0
1671	0	0	0.0
1670	0	0	0.0
1669	0	0	0.0
1668	0	0	0.0
1667	0	0	0.0
1666	0	0	0.0
1665	0	0	0.0
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1663	0	0	0.0
1662	0	0	0.0
1661	0	0	0.0
1660	0	0	0.0
1659	0	0	0.0
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1651	0	0	0.0
1650	0	0	0.0
1649	0	0	0.0
1648	0	0	0.0
1647	0	0	0.0
1646	0	0	0.0
1645	0	0	0.0
1644	0	0	0.0
1643	0	0	0.0
1642	0	0	0.0
1641	0	0	0.0
1640	0	0	0.0
1639	0	0	0.0
1638	0	0	0.0
1637	0	0	0.0
1636	0	0	0.0
1635	0	0	0.0
1634	0	0	0.0
1633	0	0	0.0
1632	0	0	0.0
1631	0	0	0.0
1630	0	0	0.0
1629	0	0	0.0
1628	0	0	0.0
1627	0	0	0.0
1626	0	0	0.0
1625	0	0	0.0
1624	0	0	0.0
1623	0	0	0.0
1622	0	0	0.0
1621	0	0	0.0
1620	0	0	0.0
1619	0	0	0.0
1618	0	0	0.0

I.—STATISTICS AND GENERAL INFORMATION.

STATISTICS AND SOCIAL CONDITIONS.

Area : 662 acres. Population—Census 1921, 104,248 ; Registrar-General's estimate 1929—99,710. Number of inhabited houses, 1921—13,727. Number of houses (end of 1930) according to Rate Books, 14,183. Number of families and separate occupiers, 1921—25,373. Rateable value, £762,879. Sum represented by penny rate £3,083.

Some account of the social and economic conditions prevailing in the Borough will be found in Section VI of this report. Briefly, Shoreditch is a densely populated (average 150 to the acre) area containing approximately 14,000 structurally separate dwellings and 3,000 business premises. The length of public streets in the Borough is 43 miles.

A great variety of industries are carried on in these business premises. Furniture making is one of the most common of these, and one which is by tradition firmly established in the Borough. The number of home workers cannot be stated with accuracy, as there is necessarily some overlapping in lists received from employers—700 may be given as a round number. Particulars regarding home work will be found in Section IV of this report, page 58.

Unemployment was, unhappily, prevalent throughout the year, and must be considered one of the most harmful of the conditions that have had a prejudicial effect upon health.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR 1930.

			Total.	M.	F.	Birth Rate	
Live births	{	Legitimate	1,914	951	963	20·1	
		Illegitimate	74	37	37		
			<u>1,988</u>	<u>988</u>	<u>1,000</u>		
Still births	...	...	...	Rate per 1,000 total births			18·7
Percentage of total deaths occurring in Public Institutions						...	67·5
Number of women dying in, or in consequence of, childbirth—							
	From Sepsis	...	...	...	...	...	4
	„ other causes	...	...	...	...	...	3
Death rate of infants under one year of age per 1,000 live births :—							
	Legitimate	63.	Illegitimate	108.	Total	65.	
Deaths from Measles (all ages)	...	...	...	...	...	...	49
„ Whooping Cough (all ages)	...	...	...	...	...	...	3
„ Diarrhoea (under 2 years of age)	...	...	...	...	...	...	20
„ Pulmonary Tuberculosis	...	...	...	...	...	...	87
„ all forms of Tuberculosis	...	...	...	...	...	...	100
Death rate from Pulmonary Tuberculosis						...	0·9 %
Tuberculosis Death Rate						...	1·0 %

For purposes of comparison the vital statistics of the Borough during recent years are given in the following table:—

Year	Population	Deaths		Transfers		Deaths		Deaths		Deaths	
		Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
1900	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1901	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1902	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1903	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1904	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1905	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1906	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1907	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1908	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1909	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1910	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1911	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1912	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1913	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1914	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1915	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1916	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1917	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1918	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1919	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78
1920	10,000	378	3.78	1,000	10.00	378	3.78	378	3.78	378	3.78

The above table is arranged to show the gross births and deaths in the Borough, and the births and deaths properly belonging to it with the corresponding rates. The rates are calculated per 1,000 of the estimated average population. For instance, 3.78 is the population of the Borough, estimated at 1,000, has been obtained in calculating the rates.

In column 2 are included the whole of the deaths except those of soldiers and sailors, and those of persons who have been registered during the year as being actually resident in the Borough. In column 3 is entered the number in column 2 corrected by subtraction of the number in column 2 and by the addition of the number in column 2. Deaths in column 3 have been similarly corrected by subtraction of the deaths under one year included in the number given in column 2 and by addition of the deaths under one year included in the number given in column 2.

"Transferable Deaths" are deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they reside.

For purposes of comparison the vital statistics of the Borough during recent years are given in the following table :—

YEAR.	Population estimated to middle of each year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NETT DEATHS BELONGING TO THE DISTRICT.			
		Un-corrected Number.	Nett.		Number.	Rate.	of Non-residents registered in the District.	of residents not registered in the District.	Under 1 year of Age.		At all Ages.	
			Number.	Rate.					Num-ber.	Rate per 1,000 nett Births.	Num-ber.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1920	102044	3546	3731	36·9	1450	14·2	245	378	340	91	1583	15·6
1921	105200	2798	2975	28·5	1393	13·3	264	369	341	114	1498	14·4
1922	105800 (Census)	2645	2926	27·9	1508	14·2	204	408	301	102	1712	16·3
1923	106200	2552	2832	26·9	1191	11·2	191	370	232	82	1370	13·0
1924	106500	2336	2528	23·9	1309	12·3	232	367	221	87	1444	13·7
1925	107300	2361	2627	24·6	1298	12·1	258	381	233	88	1421	13·3
1926	107300	2235	2516	23·5	1180	10·9	217	335	167	66	1298	12·2
1927	105700	1870	2188	20·9	1194	11·29	209	343	163	74	1328	12·7
1928	101200	1754	2091	20·9	1232	12·3	197	346	164	78	1381	13·8
1929	99710	1685	2005	20·3	1438	14·9	254	409	168	83	1593	16·1
1930	99710	1664	1998	20·1	1097	11·1 12·2	214	325	129	65	1208	12·2

NOTE.—The above table is arranged to show the gross births and deaths in the Borough, and the births and deaths properly belonging to it with the corresponding rates. The rates are calculated per 1,000 of the estimated gross population. For columns 5 and 13 the population of the Holborn Institution, estimated at 1,000, has been deducted in calculating the rates.

In column 6 are included the whole of the deaths except those of soldiers and sailors in public institutions, which were registered during the year as having actually occurred within the Borough. In column 12 is entered the number in column 6 corrected by subtraction of the number in column 8 and by the addition of the number in column 9. Deaths in column 10 have been similarly corrected by subtraction of the deaths under one year included in the number given in column 8 and by addition of the deaths under one year included in the number given in column 9.

“ Transferable Deaths ” are deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they reside.

ANALYSIS AND COMPARISON OF LONDON AND SHOREDITCH BIRTH AND DEATH RATES
FOR THE YEAR ENDING 3RD JANUARY, 1930.

DISTRICTS.	Estimated Population 1930.	ANNUAL RATE PER 1,000 PERSONS LIVING.															PERCENTAGE TO TOTAL DEATHS.			
		BIRTHS.	DEATHS DURING THE YEARS:				DEATHS DURING 1930 FROM													
							1 (cols 2-8)	2	3	4	5	6	7	8	9	10				
			1927.	1928.	1929.	1930.	Principal Zymotic Diseases.	Smallpox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	*Fever.	Diarrhoea Enteritis (under 2 years).	Tuberculous Disease.	Violence.	Infants under 1 year. Death rate per 1,000 Live Births.	Inquest Cases.	Deaths in Public Institutions.	Uncertified Causes of Death.
London ...	4,417,900	15.7	11.9	11.6	13.8	11.4	0.56	0.00	0.23	0.02	0.10	0.03	0.01	0.16	0.96	0.55	59	7.4	...	...
Shoreditch	†98,710	20.1	12.7	13.8	16.1	12.2	0.96	0.02	0.50	0.01	0.20	0.04	0.00	0.20	1.0	0.86	65	8.4	67.5	...
Wards.																				
Moorfields	3,940	20.6	11.6	10.3	18.5	15.5	0.51	...	0.25	...	...	...	...	0.25	1.02	0.76	49	8.3	75.0	...
Church ...	17,360	20.4	14.7	13.4	17.1	12.3	1.15	0.05	0.74	0.06	0.11	0.05	...	0.12	1.09	0.98	85	9.3	71.5	...
Hoxton ...	15,080	21.5	14.0	16.2	16.1	12.7	0.93	...	0.46	...	0.33	...	...	0.13	0.73	0.79	49	9.0	61.8	...
Wenlock ‡	13,570	24.5	14.3	14.7	15.9	13.0	0.81	...	0.51	...	0.15	...	...	0.15	1.19	1.03	51	8.5	67.1	...
Whitmore§	17,020	19.4	11.9	13.4	17.1	13.1	0.82	...	0.58	...	0.12	...	...	0.12	0.99	0.82	63	7.6	70.4	...
Kingsland	9,910	21.1	11.1	11.5	14.5	10.1	1.01	...	0.30	...	0.50	0.10	...	0.10	1.20	0.81	53	7.0	69.0	...
Haggerston	10,460	19.1	10.5	11.8	13.6	11.1	1.43	0.09	0.48	...	0.28	...	...	0.57	1.05	0.86	70	8.1	63.7	...
Acton ...	11,370	13.8	11.3	14.5	16.3	10.5	0.77	...	0.26	...	0.08	0.87	...	0.35	0.88	0.70	102	8.4	62.1	...

* Fever includes typhus, typhoid and continued fevers.

† Diarrhoea in this table includes enteritis in children under two years.

‡ The inhabitants of the Holborn Institution, which is situate in Wenlock Ward, estimated at 1,000, and the deaths occurring in that institution are excluded.

§ The Shoreditch Institution is situate in this Ward. In the cases of some of the deaths in outlying institutions, the Shoreditch Institution is the last known place of residence. This Ward is therefore probably credited with some deaths belonging to other Wards.

NOTE.—Where the deaths under any heading are too few to express as a rate per 1,000 within two places of decimals, 0.00 is inserted; where no deaths have occurred, dots are placed in the space under the heading. The London population is adjusted to the middle of 1929.

GENERAL

The hospital is situated on the north side of the River Thames, between the two main roads which are the main thoroughfares of the district. The hospital is situated on the north side of the River Thames, between the two main roads which are the main thoroughfares of the district.

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HOSPITALS

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GENERAL.

Shoreditch is a district of irregular shape of which the two longest diagonals are approximately one and a half miles. Its boundaries are as follow :—Hackney, N. & N.E. ; Bethnal Green, E. ; Stepney, S.E. ; City, S. ; Finsbury, W. ; Islington, N. & N.W. The average height of the Borough above sea level is 60 feet.

The subsoil of the Borough is London clay with many pockets of gravel. Some areas are covered to a depth of three feet with a good quality sandy gravel on this subsoil.

Refuse material, probably from the City and other adjacent areas, which has been deposited on this subsoil during the last 100 years or more, now has a depth of approximately five feet.

The Meteorological Table for London, deduced from observations at Greenwich under the superintendence of the Astronomer Royal, issued by the Registrar-General for 1930, shows a rainfall for the year of 697 millimetres. This figure is 101 millimetres above the average for the thirty-five years, 1881–1915.

HOSPITALS.

Within the Borough—

St. Leonard's Hospital, Hoxton Street, N. 1, General, London							
County Council, formerly Shoreditch Guardians	...	...	...	...	...	...	556 beds.
Royal Chest Hospital, City Road, E.C. 1	...	...	...	...	...	...	85 beds.
Shoreditch Model Welfare Centre, 210, Kingsland Road, E. 2							
							10 cots for babies.
Medical Mission of the Good Shepherd, 41-49, Harman Street, N. 1.							
							10 cots for babies and young children.
Shoreditch Tuberculosis Dispensary, 145, Great Cambridge							
Street, E. 2	...	...	...	...	...	...	No beds.
Shoreditch Municipal Dental Hospital, 164, Kingsland Road, E.2...							No beds.
Welfare Centres, <i>see</i> page 100, M. & C.W. Section of this report.							
City of London & East London Dispensary, Wilson Street, E.C. 2							No beds.
London County Council School Treatment Centre, Hoxton House,							
Hoxton Street, N. 1	...	...	...	...	...	...	No beds.

Near the Boundary of the Borough—

General Hospitals—

Metropolitan Hospital, Kingsland Road, E. 8	...	...	...	150 beds.
Royal Northern Hospital, Holloway Road, N. 7	...	...	...	220 beds.
German Hospital, Ritson Road, Dalston, E. 8	...	...	...	160 beds.
London Hospital, Mile End, E. 1	...	...	...	839 beds.
University College Hospital, Gower Street, W.C. 1	...	...	...	540 beds.
St. Bartholomew's Hospital, West Smithfield, E.C. 1	...	...	...	692 beds.
Royal Free Hospital, Gray's Inn Road, W.C. 1	...	...	...	268 beds.

Special Hospitals—

Queen's Hospital for Children, Hackney Road, E. 2	170 beds.
City of London Maternity Hospital, City Road, E.C. 1	71 beds.
Royal London Ophthalmic Hospital (late Moorfields), E.C. 1... ..	138 beds.
St. Mark's Hospital for Cancer, Fistula and other Diseases of Rectum, City Road, E.C. 1... ..	72 beds.
City of London Hospital for Diseases of the Heart and Lungs, Victoria Park, E. 2	186 beds.
Elizabeth Garrett Anderson Hospital for Women, Euston Road, N.W. 1... ..	107 beds.

*Hospitals under Public Health Department of London County Council used
by Inhabitants of Shoreditch—*

9 Fever Hospitals (acute)	containing 4,665 beds.
2 Fever Hospitals (Convalescent)	containing 1,881 beds.
3 River Hospitals (Fever or Small Pox)	containing 1,898 beds.
Hospital for Ophthalmia Neonatorum—	
St. Margaret's, Leighton Road, Kentish Town, N.W. 5.	60 beds.
Hospitals for Venereal Disease—	
Sheffield Street Hospital, Kingsway, W.C. 2 (Women)	52 beds.
Thavies Inn Infirmary, Robin Hood Court, Holborn, E.C. 1 (Women)	20 beds.
Hospital for Post Encephalitis Lethargica—	
Northern, Winchmore Hill, N. 21 (part of)	125 beds.
10 Sanatoria and Hospitals for Tuberculous Patients containing beds as follows : 725 (Children), 210 (Women), 581 (Men), 627 (Men and Women).	
4 Hospitals for Mental Defectives containing	7,127 beds.
Training Colony for Improvable Imbeciles and the Feeble Minded, Darenth, Dartford, Kent	
	2,260 beds.
Children's Hospitals and Homes—	
Queen Mary's Hospital for Children, Carshalton, Surrey	900 beds.
The Down's Hospital for Children, Sutton, Surrey	360 beds.
St. Anne's Home, Herne Bay, Kent (Convalescent Children)	150 beds.
Contagious Diseases of the Skin and Scalp—	
Goldie Leigh Homes, Abbey Wood, S.E. 2	218 beds.
Ophthalmia—	
White Oak, Swanley Junction, Kent	364 beds.

Venereal Disease Clinics accessible from Shoreditch—

- The London County Council (Whitechapel) Clinic, Turner Street (adjoining the London Hospital), Mile End, E. 1.
Metropolitan Hospital, Kingsland Road, E. 8.
Royal Free Hospital, Gray's Inn Road, W.C. 1.

AMBULANCE FACILITIES

ambulance facilities are provided by the London County Council in accordance with the provisions of the Public Health Act, 1936, and the London County Council (Ambulance) Regulations, 1936. The Council is responsible for the provision of ambulance services in the London County Council area, and for the payment of the ambulance rates.

The London County Council provides ambulance services free of cost for the following classes of persons:—
(a) persons suffering from illness or injury;
(b) persons suffering from mental illness;
(c) persons suffering from physical disability;
(d) persons suffering from physical disability who are unable to walk.

In other cases ambulance services are supplied at a charge of 10s. 6d. per journey within the London County Council area. Additional charges are made if there is more than one patient, and there is a special scale of charges for journeys extending outside the London County Council area.

HOUSE REFUSE

The removal of refuse is under the administrative control of the Borough Surveyor. The Surveyor is responsible for the collection and removal of refuse from the premises in the Borough. The Surveyor is also responsible for the provision of refuse receptacles and for the collection and removal of refuse from the receptacles.

Refuse is removed by horse-drawn vehicles and is either burned at the destructor or is taken away by barge from the wharf in Kingsland Road.

All the refuse burning arrangements are well advanced for the introduction of a new system of refuse burning in connection with the existing destructor.

REGULATIONS AND ORDERS

which become operative during 1930.

Acts

Public Health Act, 1936. See page 100.

London County Council (Ambulance) Regulations, 1936.

Refuse Regulations and Orders.

Refuse Regulations, 1930. See page 25.

Refuse Regulations (Amendment) Regulations, 1930.

Refuse Regulations (Amendment) Regulations, 1930.

Refuse Regulations (Amendment) Regulations, 1930.

Refuse Regulations (Amendment) Regulations, 1930.

Refuse Regulations (Amendment) Regulations, 1930.

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Refuse Regulations (Amendment) Regulations, 1930.

Refuse Regulations (Amendment) Regulations, 1930.

AMBULANCE FACILITIES.

Ambulances are provided by the London County Council in accordance with arrangements, detailed particulars of which will be found in the London County Council reports, and can be obtained upon application to the London County Council (City 7200) or to the Public Health Department, Shoreditch Town Hall.

Briefly, the London County Council provides ambulances free of cost for the conveyance of persons meeting with accidents, parturient women if the case is one of urgency, persons suffering from illness upon medical certificate, and persons suffering from infectious disease to the Council's fever hospitals.

In other cases ambulances are supplied at a charge of 10s. if going wholly within Administrative County of London. Additional charges are made if there is more than one patient, and there is a special scale of charges for journeys extending outside London.

HOUSE REFUSE.

The removal of this is under the administrative control of the Borough Surveyor. It is collected at never longer than weekly intervals ; in many instances it is collected daily, and from a considerable proportion of the premises in the Borough two or three times a week.

Refuse is removed in horse-drawn vehicles and is either burned at the destructor at the Electricity Station or is taken away by barge from the wharf in Kingsland Road.

At the time of writing arrangements are well advanced for the introduction of two motor vehicles to be used in conjunction with the existing carts.

ACTS, REGULATIONS AND ORDERS

which became operative during 1930.

ACTS.

Local Government Act, 1929. *See* page 108.

Housing Act, 1930.

REGULATIONS AND ORDERS.

The Vaccination Order, 1930. *See* page 23.

The Parrots (Prohibition of Import) Regulations, 1930.

Agricultural Produce (Grading & Marking) (Eggs) Regulations, 1930.

" " (Glasshouse grown Tomatoes & Cucumbers) Regulations, 1930.

" " (Dressed Poultry) Regulations, 1930.

" " (Strawberries) Regulations, 1930.

" " (Canned Fruit, Peas & Beans) Regulations, 1930.

" " (Cherries) Regulations, 1930.

The Merchandise Marks (Imported Goods) No. 4 Order, 1929 (which deals with the sale of imported Malt products).

The Merchandise Marks (Imported Goods) No. 5 Order, 1930 (which deals with the sale of imported Tomatoes).

II.—POPULATION, BIRTHS, MARRIAGES AND DEATHS.

POPULATION.

The Registrar-General's estimate of the mid-1930 population will not be available until after the 1931 census has been taken, and in these circumstances it has been decided to act upon the suggestion contained in the Ministry of Health Circular 1119, and to use the Registrar-General's mid-year 1929 estimate for statistical purposes in this report.

The Registrar-General's estimate of the population of the Borough on 30th June, 1929, was 99,710. This figure is 2,490 less than the corresponding figure for 1928, and includes the inmates of the Holborn Institution in Wenlock Ward numbering approximately 1,000, who are not regarded for statistical purposes as belonging to Shoreditch.

For the purpose of this report 98,710 will accordingly be regarded as the population for the year 1930. The population in the various Wards of the Borough is estimated as follows:—

Ward.	Population.	Area in acres*	Density per acre.
Moorfields	3,940	71	55
Church	17,360	105	165
Hoxton	15,080	79	190
Wenlock	13,570	96	141
Whitmore	17,020	81	210
Kingsland	9,910	72	137
Haggerston	10,460	68	154
Acton	11,370	86	132

* Exclusive of water.

The density of the population in the Borough as a whole is 150 per acre.

Further information upon the subject of the population, area, number of inhabited houses and rateable value are contained in the Tables on pages 3.

BIRTHS.

	Males.	Females.	Total.
Number registered in the Borough ...	826	838	1,664
Number registered outside the Borough, parents being residents of Shoreditch ...	173	171	344
Number registered in the Borough, parents not being residents of Shoreditch ...	11	9	20
Corrected number of births	988	1,000	1,988

The distribution of the corrected births and the birth rates in the eight Wards of the Borough are given below:—

Ward.	Males.	Females.	Total.	Births per 1,000 Population.
Moorfields	44	37	81	20·6
Church	155	199	354	20·4
Hoxton	163	161	324	21·5
Wenlock	179	154	333	24·5
Whitmore	159	172	331	19·4
Kingsland	116	93	209	21·1
Haggerston	97	102	199	19·1
Acton	75	82	157	13·8
Totals	988	1,000	1,988	20·1

The birth rate for the Borough as a whole was 20·1. For England and Wales the birth rate was 16·3 and for London 15·7. The illegitimate births numbered 74, of which 37 were males and 37 females. Of these 30, of which 16 were males, occurred in St. Leonard's Hospital. The illegitimate births amounted to 3·7 per cent. for all births credited to the Borough during the year.

The number of births occurring in St. Leonard's Hospital was 337 : 169 males and 168 females. In 20 of these the parents were not Shoreditch residents.

MARRIAGES.

The number of marriages during the year was 969 and the persons married were at the rate of 19·63 per 1,000 population. The marriage rate for the Metropolis was 19·4.

During recent years the corresponding figures have been as follows :—

Year.	No. of marriages.	Marriage rate.	
		Shoreditch.	London.
1921	976	18·9	19·6
1922	959	18·3	18·4
1923	873	16·6	17·3
1924	979	18·5	17·3
1925	936	17·5	17·2
1926	947	17·8	17·2
1927	956	18·2	18·2
1928	1,033	20·6	18·9
1929	956	19·3	19·1
1930	969	19·6	19·4

DEATHS.

During 1930 the total number of deaths registered in the Borough was 1 097.

The transferable deaths were as follows :—

Deaths of non-residents registered in Shoreditch 214

Deaths of Shoreditch residents registered elsewhere 325

The number of deaths properly belonging to Shoreditch is accordingly 1,208, which figure gives a general death rate per 1,000 population of 12·2. The death rate in England and Wales for 1930 was 11·4 and in London 11·4.

In connection with these deaths 101 inquests were held.

In the Table on page 3 are included corresponding figures for Shoreditch during recent years.

The distribution of the deaths and the death rates in the different Wards are given below :—

Ward.	Males.	Females	Total.	Deaths per 1,000 population.	Deaths of infants under 1 year per 1,000 births registered.
Moorfields	39	21	60	15·5	49·4
Church	116	98	214	12·3	84·8
Hoxton	94	97	191	12·7	49·4
Wenlock	94	83	177	13·0	51·1
Whitmore	125	98	223	13·1	63·4
Kingsland	53	47	100	10·1	52·6
Haggerston	68	56	124	11·1	70·4
Acton	56	63	119	10·5	101·9
Totals	645	563	1,208	12·2	64·9

Concerning the deaths at all ages the chief causes are seen to be as follows:—
Heart disease, 241 (10 per cent); Cancer, 133 (11 per cent); Tuberculosis, all forms, 107 (9 per cent); Pneumonia, all forms, 107 (9 per cent). The number of deaths due to accidents in connection with vehicular traffic was 21. In the years 1930 to 1933, inclusive, the corresponding figures were respectively 16, 10, 12, 9, 16, 14, 16, 11, 15 and 16. The particulars regarding the deaths from cancer are contained in the table on page 18.

It will be noted from the Table on page 12 that the chief causes of death of children between the ages of one and two years were Measles and Pneumonia—these two causes accounted for 27 out of a total of 52 deaths between these ages. Altogether 240 or 17·4 per cent of the total number of deaths of all ages were of children under the age of 5 years.

The particulars regarding deaths from Tuberculosis are given in the section of the report devoted to that disease.

In the appended table are set forth the various institutions outside Shoreditch with the number of persons belonging to the Borough dying therein:—

Institutions for Infectious Diseases—		No. of Deaths	
South-Western	1	1	1
Western	1	1	1
General Hospitals—			
Charing Cross	1	1	1
Children's Hospital	4	4	4
German	12	12	12
Guy's	2	2	2
Imperial Warburg	1	1	1
London	2	2	2
London Jewish	2	2	2
Metropolitan	23	23	23
Middlesex	3	3	3
Mildmay	7	7	7
Philstead	1	1	1
Queen's (Children)	13	13	13
Queen Mary's West Ham	2	2	2
Royal Free	2	2	2
Royal Waterloo	1	1	1
St Bartholomew's	40	40	40
St George's	1	1	1
St Thomas's	1	1	1
University College	1	1	1
Westminster	2	2	2
Hospitals for Infectious Diseases—			
Brook	5	5	5
Eastern	21	21	21
Grosvenor	1	1	1
Grove Park	2	2	2
Isaac Green	2	2	2
London Fever	2	2	2
North-Eastern	11	11	11
North-Western	3	3	3
Park	2	2	2
South-Eastern	1	1	1
South-Western	2	2	2

Considering the deaths at all ages the chief causes are seen to be as follows :— Heart disease, 227 (19 per cent.) ; Cancer, 133 (11 per cent.) ; Tuberculosis, all forms, 100 (8 per cent.) ; Pneumonia, all forms, 107 (9 per cent.). The number of deaths due to accidents in connection with vehicular traffic was 21. In the years 1920 to 1929, inclusive, the corresponding figures were respectively 16, 10, 12, 9, 15, 14, 16, 21, 15 and 18. The particulars regarding the deaths from cancer are contained in the table on page 18.

It will be noted from the Table on page 12 that the chief causes of death of children between the ages of one and two years were Measles and Pneumonia—these two causes accounted for 37 out of a total of 52 deaths between these ages.

Altogether 210 or 17·4 per cent. of the total number of deaths of all ages were of children under the age of 5 years.

The particulars regarding deaths from Tuberculosis are given in the section of this report devoted to that disease.

In the subjoined table are set forth the various institutions outside Shoreditch with the number of persons belonging to the Borough dying therein :—

ASYLUMS :—				No. of Deaths.					No. of Deaths.
Claybury	...	...	...	12	HOSPITALS FOR INFECTIOUS DISEASES— <i>contd.</i> —				
Dartford	...	...	...	5	South-Western	...	...	...	1
East Riding	...	...	...	1	Western	...	...	...	1
Fountain	...	...	...	1	GENERAL HOSPITALS :—				
Horton	...	...	...	1	Charing Cross	...	...	...	1
Hundred Acres, Epsom	...	...	...	1	Children's, Holborn	...	...	...	6
Leavesden	...	...	...	1	German	...	...	...	12
Manor, Epsom	...	...	...	2	Guy's	...	...	...	5
Tooting Bec	...	...	...	1	Jubilee, Woodford	...	...	...	1
1, West Park Road, Epsom	...	...	...	2	London	...	...	...	9
HOSPITALS FOR INFECTIOUS DISEASES :—					London Jewish	...	...	...	2
Brook	...	...	...	6	Metropolitan	...	...	...	23
Eastern	...	...	...	21	Middlesex	...	...	...	3
Grove	...	...	...	1	Mildmay	...	...	...	7
Grove Park	...	...	...	2	Plumstead	...	...	...	1
Joyce Green	...	...	...	2	Queen's (Children)	...	...	...	13
London Fever	...	...	...	2	Queen Mary's, West Ham	...	...	...	2
Northern	...	...	...	1	Royal Free	...	...	...	5
North-Eastern	...	...	...	11	Royal Waterloo	...	...	...	1
North-Western	...	...	...	3	St. Bartholomew's	...	...	...	40
Park	...	...	...	6	St. George's	...	...	...	1
Southern	...	...	...	1	St. Thomas's	...	...	...	1
South-Eastern	...	...	...	3	University College	...	...	...	1
					Westminster	...	...	...	2

	No. of Deaths.		No. of Deaths.
SPECIAL HOSPITALS :—		OTHER INSTITUTIONS :—	
Addenbrooke Hospital ...	1	Archway Hospital ...	3
Bethnal Green Chest ...	3	2A, Bow Road ...	1
Cancer ...	1	214A, Cambridge Road ...	6
City of London Maternity ...	3	199, Dartmouth Park Hill ...	1
Colindale ...	5	73A, Devons Road ...	1
East Ham Memorial ...	1	72A, East Dulwich Grove ...	1
East London Children's ...	1	230, High Street, Homerton ...	4
Epileptic Colony, Edmonton ...	1	Friern Barnet Infirmary ...	2
Infants, Vincent Square ...	1	4, King's Road, St. Pancras ...	1
Mothers' Hospital ...	1	29, North Side, Clapham ...	3
Mount Vernon ...	1	St. George's Home, Chelsea... ..	1
National ...	1	St. Joseph's Hospice ...	7
Queen Mary's, Carshalton ...	1	Star & Garter Home, Sand- gate	1
Queen Mary's, Wandsworth ...	1	76, St. Mark's Road, Maiden- head	1
Royal Northern ...	1	1, Uxbridge Road ...	1
St. Columba's ...	1		
St. Luke's, Paddington ...	3		
St. Margaret's... ..	1		
St. Mark's ...	1		

Of 287 persons belonging to Shoreditch dying in public institutions beyond the limits of the Borough, 136 died in general hospitals, 27 in asylums, 61 in fever hospitals, 29 in hospitals for special diseases, and 34 in other institutions. Elsewhere than in public institutions 38 persons belonging to Shoreditch died beyond the limits of the Borough.

Altogether 815 or 67·5 per cent. of the people belonging to Shoreditch who died during the year died in public institutions. The corresponding figures for recent years have been as follows :—

1920	55 per cent.	1925	63·3 per cent.
1921	56·9 „	1926	63·7 „
1922	60·2 „	1927	63·1 „
1923	63·6 „	1928	67·0 „
1924	63·5 „	1929	63·9 „

PUBLIC MORTUARY, 1930.

Number of bodies deposited from—

St. Leonard's Hospital	67
L.C.C. Infectious Hospitals	10
Undertakers	6
Other sources	97

Total number of bodies deposited 180

Number of post-mortem examinations performed 97



*the deaths in Public Institutions in the Borough is contained in the following table:—

* Includes 4 deaths from Erysipelas. † Two deaths from Erysipelas are included in "Other defined diseases" belonging to Shoreditch and dying in St. Leonard's Hospital.

Income Statement

The following statement shows the results of the operations of the company for the year ended 31st March 1958. The figures are in thousands of pounds.

The company's revenue for the year was £1,500,000. This was made up of sales of £1,200,000 and other income of £300,000. The cost of sales was £800,000, leaving a gross profit of £700,000. After deducting expenses of £400,000, the net profit for the year was £300,000.

The net profit for the year was £300,000. This was divided into 1,000,000 shares, giving a dividend of 3 pence per share.

The following table shows the distribution of the net profit for the year ended 31st March 1958.

The following table shows the distribution of the net profit for the year ended 31st March 1958.

The following table shows the distribution of the net profit for the year ended 31st March 1958.

	£	£	£
Revenue	1,500	1,200	300
Cost of sales	(800)		
Gross profit	700		
Expenses	(400)		
Net profit	300		
Dividend	300		
Reserves			
Profit and loss account			
Balance brought forward			
Profit for the year			
Balance carried forward			

The following table shows the distribution of the net profit for the year ended 31st March 1958.

INFANTILE MORTALITY.

The deaths amongst infants under one year numbered 129, of which 65 were males and 64 females. These deaths amounted to 10·7 per cent. of the total nett Shoreditch deaths from all causes as compared with 10·6 per cent. in 1929.

The mortality amongst infants under one year was at the rate of 65 per 1,000 births registered during the year. This is the lowest infantile mortality rate ever recorded in Shoreditch. Amongst male infants this rate was 66 and amongst females 64. The infant mortality rates in the different Wards of the Borough are included in the table on the opposite page.

The number of deaths of illegitimate infants was 8, which figure gives a mortality rate of 108 per 1,000 illegitimate births.

The chief causes of deaths amongst infants were pneumonia, prematurity, diarrhoea and enteritis and measles.

During the last ten years the infant mortality rates for England and Wales, London and Shoreditch have been as follows :—

Deaths of Infants under one year per 1,000 births registered :—

Year.			England and Wales.	London.	Shoreditch.
1921	...	...	81·2	80	114
1922	...	...	74·7	75	102
1923	...	...	69·2	61	82
1924	...	...	74·2	69	87
1925	...	...	74·5	68	88
1926	...	...	70·2	64	66
1927	...	...	69·7	59	74
1928	...	...	69	67	78
1929	...	...	74	70	83
1930	...	...	60	59	65

The causes of deaths of infants under one year together with ages and ward distribution are given in the table on the opposite page.



INFANTILE MORTALITY IN THE BOROUGH DURING YEAR 1930.

CAUSE OF DEATH.	*AGES.										DEATHS IN EACH WARD.								SEX.			
	Under 1 day.	1 day 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 1 month.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total under 1 year.	Moorfields.	Church.	Hoxton.	Wenlock.	Whitmore.	Kingsland.	Haggerston.	Acton.	Male.	Female.	
1 Enteric fever
2 Smallpox	1	...	1	...	1	...	...	...	...	...	...	...	...	1
3 Measles	5	8	13	...	3	1	4	1	1	1	2	5	8	
4 Scarlet fever...
5 Whooping cough	1	1	...	1	...	...	...	...	...	...	1	...	...
6 Diphtheria	1	1	2	...	...	...	...	...	1	1	...	...	2	...
7 Erysipelas	1	1	...	...	2	...	...	...	...	1	1	...	...	...	2	...
8 Mumps
9 Acute poliomyelitis
10 German measles
11 Varicella
12 Influenza
13 (a) with Pulmonary compli- cations
14 (b) with Non - Pulmonary complications
15 (c) without stated complica- tions
16 Encephalitis Lethargica
17 Meningococcal Meningitis	1	...	1	...	...	1	...	...	...	...	...	...	1	...
18 Tuberculosis of respiratory system
19 Other Tuberculous diseases	1	1	...	2	...	1	...	1	...	...	...	...	...	2	...
20 Bronchitis	1	...	...	1	2	...	1	...	...	1	...	...	...	...	2	...
21 Pneumonia (all forms)	1	1	2	7	11	5	3	28	2	5	5	3	4	4	2	3	14	14	
22 Pleurisy
23 Empyema
24 Other Pleurisy
25 Laryngitis
26 Rickets	1	...	1	...	...	...	...	1	...	...	...	...	1	...
27 Convulsions	1	...	...	...	1	...	...	...	...	1	...	...	...	1	...	...	...	...	...	1	...
28 Diarrhoea and Enteritis	1	...	1	3	8	4	2	18	1	1	2	2	2	1	5	4	11	7	
29 Ulcer of stomach and duo- denum
30 Other diseases of the stomach	1	...	...	1	...	1	...	...	...	...	...	...	...	1	...
31 Syphilis	1	...	...	1	...	1	...	...	...	...	...	...	...	...	1
32 Congenital malformation	2	2	2	1	...	7	1	...	...	1	9	...	3	...	...	4	...	1	1	3	6	
33 Congenital debility and icterus	1	3	...	...	4	1	1	1	...	7	...	3	...	...	1	...	1	2	4	3	
34 Premature birth	9	11	3	1	...	24	2	...	...	...	26	...	3	7	3	4	3	2	4	12	14	
35 Injury at birth	1	1	...	1	...	3	...	...	...	...	3	...	1	...	1	...	...	...	...	1	2	
36 Suffocation in bed or not stated. Accidental mechan- ical suffocation	1	...	...	...	1	...	...	...	...	1	...	...	...	...	1	...
37 Atelectasis	1	...	...	...	...	1	...	...	...	...	1	...	...	...	1	...	...	...	...	...	1	...
38 Other defined diseases	1	...	1	1	...	3	1	2	1	1	8	1	5	...	1	...	...	1	...	5	3	
39 Causes ill-defined or unknown
Totals	14	16	9	6	1	46	18	26	21	18	129	4	30	16	17	21	11	14	16	65	64	

* Deaths of persons belonging to Shoreditch occurring beyond limits of Borough are included.

MATERNAL MORTALITY.

The number of Shoreditch women who lost their lives in connection with childbirth during the year was 7.

This gives a Maternal Mortality rate per 1,000 births of 3·5.

The particulars of these deaths, classified according to age and cause, are given in the table on page 16.

For purposes of comparison the maternal mortality rates per 1,000 live births in England and Wales, London and Shoreditch, during the year 1930 and ten preceding years are given as follows :—

YEAR.	ENGLAND AND WALES.			LONDON.			SHOREDITCH.		
	Deaths from Sepsis.	Deaths from other diseases and accidents of Pregnancy.	TOTAL.	Deaths from Sepsis.	Deaths from other diseases and accidents of Pregnancy.	TOTAL.	Deaths from Sepsis.	Deaths from other diseases and accidents of Pregnancy.	TOTAL.
1930	1·92	2·48	4·40	1·71	1·45	3·16	2·0	1·5	3·5
1929	1·80	2·53	4·33	1·88	1·73	3·61	1·0	1·0	2·0
1928	1·79	2·63	4·42	1·59	2·00	3·59	1·43	1·91	3·34
1927	1·57	2·54	4·11	1·31	1·60	2·90	0·91	0·47	1·38
1926	1·60	2·52	4·12	1·61	1·74	3·35	1·19	1·2	2·4
1925	1·56	2·52	4·08	1·42	1·77	3·19	0·76	2·24	3·04
1924	1·39	2·51	3·90	1·24	1·84	3·08	0·39	3·2	3·59
1923	1·30	2·51	3·81	1·37	1·52	2·89	0·0	1·41	1·41
1922	1·38	2·43	3·81	1·36	1·48	2·84	1·02	1·0	2·0
1921	1·38	2·53	3·91	1·42	1·56	2·98	1·34	1·0	2·0
1920	1·81	2·52	4·33	1·78	1·60	3·38	1·34	0·53	1·83

Abortion was an associated cause of death in four of the seven maternal deaths that occurred during 1930.

In connection with these deaths, it is pertinent to remember that those who advocate the dissemination of knowledge upon the subject of birth control argue that such knowledge should prevent women from being exposed to the temptation to resort to the desperate measure of abortion.

The particulars of these deaths are entered in the following table :—

MATERNAL MORTALITY.	AGES.							Married.	Single.	Widowed.	WARDS.						
	15 to 20 yrs.	20 to 25 yrs.	25 to 30 yrs.	30 to 35 yrs.	35 to 40 yrs.	40 to 45 yrs.	45 yrs.				Moorfields.	Church.	Hoxton.	Wenlock.	Whitmore.	Kingsland.	Haggerston.	Acton.
Accidents of Pregnancy :—
Abortion
Ectopic gestation
Other accidents of pregnancy	1	...	...	1	...	...	...	1	...	...	...	...	...
Puerperal hæmorrhage	1	...	...	...	...	1	...	...	...	...	...	1	...	...	...
Other accidents of childbirth
Puerperal sepsis	1	1	1	1	...	4	...	...	...	...	1	...	2	...	1
Puerperal phlegmasia alba dolens not returned as septic
Puerperal embolism and sudden death
Puerperal albuminuria and convulsions	...	1	...	...	...	...	...	1	...	...	...	...	...	1	...	...	...
Childbirth not assignable to other headings
Puerperal diseases of the breast
*Mitral Stenosis and pregnancy	1	...	...	...	1	...	...	...	...	...	1	...	...	...

*This death was associated with pregnancy or childbirth, but was assigned to Heart Disease.

CANCER.

The deaths from Cancer in the Borough during the year numbered 138 as compared with 146 in 1929. Particulars concerning these deaths as regards age, situation of houses and Ward are given in the table on page 18.

The deaths from Cancer during the last five years per million persons living are given in the following comparative table:—

Year.	England and Wales.	London.	Shoreditch.
1929	1,362	1,400	1,201
1927	1,310	1,400	1,261
1925	1,177	1,220	1,128
1923	1,127	1,300	1,170
1921	1,134	1,563	1,318

It is important to note that the cause of cancer is not known. It is impossible to take preventive measures against the disease as is done in the case of diseases the cause of which is known.

It is also important to note that cancer cannot be prevented. It can in many instances be cured if it is detected early enough. Many lives are lost as a result of delay in treatment.

It is important to note that the main factor governing cancer should be known to the public. It is a disease which is caused by the action of certain factors, and it is important that the public should be made aware of these factors.

The following are the main factors which are considered to be important:—

(1) Age. Cancer is more common in older people than in younger people.

(2) Sex. Cancer is more common in women than in men.

(3) Race. Cancer is more common in certain races than in others.

(4) Occupation. Cancer is more common in certain occupations than in others.

(5) Diet. Cancer is more common in certain diets than in others.

(6) Inheritance. Cancer is more common in certain families than in others.

(7) Radiation. Cancer is more common in certain areas than in others.

(8) Hormones. Cancer is more common in certain conditions than in others.

(9) Infection. Cancer is more common in certain conditions than in others.

(10) Trauma. Cancer is more common in certain conditions than in others.

(11) Immunity. Cancer is more common in certain conditions than in others.

(12) Other factors. Cancer is more common in certain conditions than in others.

The following are the main factors which are considered to be important:—

(1) Age. Cancer is more common in older people than in younger people.

CANCER.

The deaths from Cancer in the Borough during the year numbered 133 as compared with 146 in 1929. Particulars concerning these deaths as regards age, situation of disease and Ward are given in the table on page 18.

The deaths from Cancer during the last five years per million persons living are given in the following comparative table:—

	<i>England and Wales.</i>			<i>London.</i>	<i>Shoreditch.</i>	
1926	...	1,362	...	1,400	...	1,201
1927	...	1,376	...	1,400	...	1,261
1928	...	1,425	...	1,520	...	1,428
1929	...	1,437	...	1,300	...	1,479
1930	...	1,454	...	1,553	...	1,346

Inasmuch as the cause of cancer is not known, it is impossible to take preventive measures against this disease as is done in the case of diseases the cause of which is clearly understood.

Although cancer cannot be prevented, it can in many instances be cured if diagnosed early and suitably treated. Many lives are lost as a result of delay in obtaining medical advice.

It is important that the main facts concerning cancer should be known to the general public. In a book recently issued by the British Cancer Campaign, entitled "The Truth about Cancer," these facts are summarised as follows:—

1. CANCER IS RELENTLESS IF IGNORED.
2. IN ITS EARLY STAGES VERY OFTEN CANCER IS QUITE PAINLESS.
3. IN ITS EARLY STAGES CANCER IS A PURELY LOCAL DISEASE.
4. IN ITS EARLY STAGES VERY OFTEN CANCER CAN BE TREATED WITH COMPLETE SUCCESS.
5. IT IS IN ITS EARLIEST STAGES THAT COMPETENT MEDICAL ADVICE MUST BE SOUGHT.
6. THE ONLY RELIABLE MEASURES OF TREATMENT FOR CANCER KNOWN AT PRESENT ARE SURGICAL OPERATION AND RADIATION.
7. FOR COMPLETE SUCCESS TREATMENT OF CANCER BY OPERATION OR RADIATION MUST BE EXTENSIVE AND ADEQUATE.

When the Shoreditch Women's Hospital is opened it is anticipated that in many cases it will be the means of securing earlier diagnosis and treatment of women suffering from this disease. Propaganda of the facts concerning cancer will be much assisted so far as women are concerned, when we are able to invite those who have any anxiety in the matter to attend the Municipal Hospital for examination. As explained on page 83, the Hospital will be linked with various Institutions in such a manner as to secure that patients receive appropriate treatment without delay.

The question of providing facilities of a similar kind for men is one which is being kept in mind and in which the experience regarding cancer gained at the Women's Hospital will be of great value.

Определ.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	524	525	526	527	528	529	530	531	532	533	534	535	536	537	538	539	540	541	542	543	544	545	546	547	548	549	550	551	552	553	554	555	556	557	558	559	560	561	562	563	564	565	566	567	568	569	570	571	572	573	574	575	576	577	578	579	580	581	582	583	584	585	586	587	588	589	590	591	592	593	594	595	596	597	598	599	600	601	602	603	604	605	606	607	608	609	610	611	612	613	614	615	616	617	618	619	620	621	622	623	624	625	626	627	628	629	630	631	632	633	634	635	636	637	638	639	640	641	642	643	644	645	646	647	648	649	650	651	652	653	654	655	656	657	658	659	660	661	662	663	664	665	666	667	668	669	670	671	672	673	674	675	676	677	678	679	680	681	682	683	684	685	686	687	688	689	690	691	692	693	694	695	696	697	698	699	700	701	702	703	704	705	706	707	708	709	710	711	712	713	714	715	716	717	718	719	720	721	722	723	724	725	726	727	728	729	730	731	732	733	734	735	736	737	738	739	740	741	742	743	744	745	746	747	748	749	750	751	752	753	754	755	756	757	758	759	760	761	762	763	764	765	766	767	768	769	770	771	772	773	774	775	776	777	778	779	780	781	782	783	784	785	786	787	788	789	790	791	792	793	794	795	796	797	798	799	800	801	802	803	804	805	806	807	808	809	810	811	812	813	814	815	816	817	818	819	820	821	822	823	824	825	826	827	828	829	830	831	832	833	834	835	836	837	838	839	840	841	842	843	844	845	846	847	848	849	850	851	852	853	854	855	856	857	858	859	860	861	862	863	864	865	866	867	868	869	870	871	872	873	874	875	876	877	878	879	880	881	882	883	884	885	886	887	888	889	890	891	892	893	894	895	896	897	898	899	900	901	902	903	904	905	906	907	908	909	910	911	912	913	914	915	916	917	918	919	920	921	922	923	924	925	926	927	928	929	930	931	932	933	934	935	936	937	938	939	940	941	942	943	944	945	946	947	948	949	950	951	952	953	954	955	956	957	958	959	960	961	962	963	964	965	966	967	968	969	970	971	972	973	974	975	976	977	978	979	980	981	982	983	984	985	986	987	988	989	990	991	992	993	994	995	996	997	998	999	1000	1001	1002	1003	1004	1005	1006	1007	1008	1009	1010	1011	1012	1013	1014	1015	1016	1017	1018	1019	1020	1021	1022	1023	1024	1025	1026	1027	1028	1029	1030	1031	1032	1033	1034	1035	1036	1037	1038	1039	1040	1041	1042	1043	1044	1045	1046	1047	1048	1049	1050	1051	1052	1053	1054	1055	1056	1057	1058	1059	1060	1061	1062	1063	1064	1065	1066	1067	1068	1069	1070	1071	1072	1073	1074	1075	1076	1077	1078	1079	1080	1081	1082	1083	1084	1085	1086	1087	1088	1089	1090	1091	1092	1093	1094	1095	1096	1097	1098	1099	1100	1101	1102	1103	1104	1105	1106	1107	1108	1109	1110	1111	1112	1113	1114	1115	1116	1117	1118	1119	1120	1121	1122	1123	1124	1125	1126	1127	1128	1129	1130	1131	1132	1133	1134	1135	1136	1137	1138	1139	1140	1141	1142	1143	1144	1145	1146	1147	1148	1149	1150	1151	1152	1153	1154	1155	1156	1157	1158	1159	1160	1161	1162	1163	1164	1165	1166	1167	1168	1169	1170	1171	1172	1173	1174	1175	1176	1177	1178	1179	1180	1181	1182	1183	1184	1185	1186	1187	1188	1189	1190	1191	1192	1193	1194	1195	1196	1197	1198	1199	1200	1201	1202	1203	1204	1205	1206	1207	1208	1209	1210	1211	1212	1213	1214	1215	1216	1217	1218	1219	122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DEATHS FROM CANCER IN THE BOROUGH DURING YEAR 1930.

	AGES.										SEX.		WARDS.									
	0 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 to 75.	75 to 85.	85 and upwards.	Male.	Female.	Moorfields.	Church.	Hoxton.	Wenlock.	Whitmore.	Kingsland.	Haggerston.	Acton.		
All situations	3	7	27	46	36	13	1	77	56	M F 7 3	M F 11 10	M F 16 13	M F 8 11	M F 21 4	M F 4 3	M F 5 5	M F 5 7		
Tongue		
Other Buccal Cavity	1	1	...	...	2	...	...	...	1	...	...	...	...	...
Pharynx		
Oesophagus	1	...	...	2	3	1	...	6	1	...	...	3	...	2	...	1	1		
Stomach	1	1	7	11	11	5	...	23	13	1	3	1	5	4	2	3	8		
Liver	1	...	1	...	1	1	...	...	...	...	1	1	...	...
Gall Bladder	1	...	...	1	...	1	...	...	...	...	...	...
Intestines	1	4	3	1	...	1	4	6	1	1	1	2	2	...	1	...		
Rectum	1	5	3	...	...	8	1	1	1	2	1	2	1	...	1		
Others		
Uterus	1	4	2	3	...	...	...	10	...	2	2	...	1	...	...	2		
Ovary and Fallopian tube	2	1	2	...	...	...	5	...	2	2	...	...	...	...	1		
Vagina, vulva		
Breast	1	3	3	1	1	...	...	9	1	2	...	3	2	...	1	...		
Skin	1	3	...	...	2	2	...	1	...	...	...	...	1	1		
Larynx	2	...	3	2	...	...	7	...	4	...	...	...	2	...	1	...		
Lung and Pleura	1	1	3	4	2	...	...	9	2	1	3	2	1	1	2	...	1		
Pancreas	3	...	...	...	1	2	...	...	...	...	1	...	1	1		
Bladder	2	...	...	...	...	2	...	...	...	...	...	2	...	...	...
Prostate	1	1	3	...	5	...	...	1	...	...	1	2	...	1		
Others	1	5	3	1	...	7	3	...	2	2	1	2	1	1	...		

THE UNIVERSITY OF CHICAGO

Notifiable Disease

Excluding tuberculosis, the deaths during the year from notifiable infectious diseases numbered 140 (11·6 per cent. of total deaths). The corresponding number for 1929 was 177 (11·1 per cent. of total deaths).

The following table shows the numbers of cases of infectious disease (tuberculosis excluded) notified in the Borough, together with distribution as to quarter, age and Ward:—

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.																				Cases removed to Hospital.	Diagnosis revised subsequently.	Deaths.		
	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	AGES.								WARDS.											
						Under 1 year.	1 to 5.	5 to 15	15 to 25.	25 to 45.	45 to 65.	65	I Moorfields.	II Church.	III Hoxton.	IV Wrenlock.	V Whitmore.	VI Kingsland.	VII Haggerston.	VIII Acton					
Chicken pox ...	122	202	53	...	377	22	124	224	5	2	...	...	11	77	65	94	65	21	29	15	2	1	...
Enteric fever ...	...	...	...	4	4	...	1	1	...	1	1	...	...	...	...	...	1	3	...	...	4	1	...
Small-pox ...	378	274	76	60	788	16	75	312	195	130	58	2	12	158	161	40	122	91	152	52	788	29	2		
Scarlet fever ...	103	84	120	127	434	8	167	218	30	9	2	...	17	82	67	49	73	41	70	35	429	50	1		
Diphtheria ...	113	71	84	78	346	9	174	121	17	21	4	...	22	65	68	44	47	37	34	29	344	20	20		
Acute primary pneumonia ...	37	19	11	25	92	7	25	18	10	14	13	5	2	21	6	9	23	11	8	12	50	}			
Acute influenzal pneumonia ...	3	...	2	...	5	...	1	...	...	1	2	1	...	1	1	...	1	2	...	...	...	
Erysipelas ...	13	19	13	22	67	6	3	11	6	13	23	5	1	14	7	14	11	8	6	6	3	5	...	4	
Puerperal fever	3	1	1	1	6	...	...	...	3	3	...	...	...	3	1	2	...	...	...	...	5	2	4
Puerperal pyrexia	8	2	6	7	23	...	...	...	6	17	...	...	...	8	2	2	3	3	2	3	15	3	...
Cerebro-spinal fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Poliomyelitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica	2	...	...	3	5	...	...	...	2	1	2	...	...	3	...	...	...	...	2	...	2	2	2
Ophthalmia neonatorum	10	6	8	5	29	29	...	...	...	...	...	...	...	7	4	3	1	4	7	3	2	...	...
Dysentery ...	2	...	...	3	5	...	1	...	1	3	...	...	...	2	...	...	...	3	...	...	5	1	...
Totals ...	794	678	374	335	2,181	97	571	905	275	215	105	13	65	441	382	257	347	224	310	155	1,681	109	140		
Numbers and percentages of cases moved to hospitals.	635	446	299	301	1,681	Note.—The following diseases are notifiable:— Small-pox, cholera, diphtheria, erysipelas, scarlet fever, typhus fever, typhoid fevers, relapsing fever, continued fever, puerperal fever, puerperal pyrexia, plague, cerebro spinal meningitis, acute poliomyelitis and poliomyelitis, encephalitis lethargica, glanders, anthrax, hydrophobia, malaria, dysentery, acute primary pneumonia, acute influenzal pneumonia, ophthalmia neonatorum, Tuberculosis, all forms (for which see special section of this report).															79·9%	65·8%	79·9%	89·8%	77·1%

SMALLPOX.

(Variola minor)

No. of cases notified	788
% of cases in which diagnosis not confirmed	29
% of actual cases	759
No. of cases sent for observation	45
% of observation cases subsequently notified	36
	45 included above

The age, seasonal and Ward distribution are included in the table on page 19. Further information is contained in the following table:—

Ward	No. of cases			Total Cases		Rates per 1,000 Population	Case-Mortality per 100 cases
	M.	F.	Total	M.	F.		
St. Andrew's	8	6	14	...	...	3.0	...
St. George's	21	24	45	1	...	5.8	0.00
St. James's	88	49	137	...	...	10.2	...
St. John's	13	23	36	...	...	2.8	...
St. Luke's	68	30	98	...	...	7.0	...
St. Mark's	38	34	72	...	...	9.1	...
St. Martin's	31	21	52	...	...	12.6	0.79
St. Michael's	23	25	48	...	...	4.9	...
St. Nicholas	4	...	4	...	...	1.1	0.79
St. Paul's	...	...	...	...	...	1.9	0.23

The following table shows the prevalence of smallpox in the country, London and St. Andrew's during recent years:—

Year	Country	London	St. Andrew's
1920	11,655	5,167	788
1921	10,975	1,908	346
1922	12,433	296	3
1923	14,769	5	...
1924	10,206	5	...
1925	8,306	13	...
1926	8,192	4	...
1927	2,402	16	...
1928	698	6	...
1929	197	2	...
1930	207	3	...

SMALLPOX.
(*Variola minor.*)

No. of cases notified	...	...	...	...	...	788
No. of cases in which diagnosis not confirmed	...	...	...	...	...	29
No. of actual cases	...	...	...	...	...	759
No. of cases sent for observation	...	...	...	...	...	45
No. of observation cases subsequently notified	...	...	...	...	...	36

} included
} above.

The age, Seasonal and Ward distribution are included in the table on page 19. Further information is contained in the following table :—

Ward.	No. of cases.			Fatal Cases.			Rates per 1,000 Population.		Case Mortality Deaths per 100 cases.
	M.	F.	Total.	M.	F.	Total.	Attack	Death.	
Moorfields ...	6	6	12	...	...	...	3.0	...	...
Church ...	64	88	152	...	1	1	8.8	0.06	0.66
Hoxton ...	86	69	155	...	...	...	10.3	...	...
Wenlock ...	13	25	38	...	...	...	2.8	...	...
Whitmore ...	59	60	119	...	...	...	7.0	...	...
Kingsland ...	36	54	90	...	...	...	9.1	...	...
Haggerston ...	61	81	142	1	...	1	13.6	0.1	0.70
Acton ...	26	25	51	...	...	...	4.5	...	...
Total ...	351	408	759	...	...	...	7.7	0.02	0.26
London ...	...	...	5167	...	...	12	1.2	0.00	0.23

The following table shows the prevalence of smallpox in the country, London and Shoreditch during recent years :—

	CASES NOTIFIED.		
	England & Wales.	London.	Shoreditch.
1920	... 206	... 22	... Nil.
1921	... 187	... 2	... "
1922	... 669	... 69	... "
1923	... 2,462	... 16	... "
1924	... 3,792	... 4	... "
1925	... 5,355	... 15	... "
1926	... 10,205	... 5	... "
1927	... 14,769	... 5	... "
1928	... 12,433	... 296	... 3
1929	... 10,975	... 1,905	... 246
1930	... 11,855	... 5,167	... 788

The particulars of the two fatal cases are as follows :—

1. Male, 10 years, certified cause of death :
 - 1 (a) Encephalo Myelitis.
 - (b) Smallpox
(Not vaccinated). P.M.
2. Female, 8 months, certified cause of death :
 - 1 (a) Broncho-Pneumonia.
 - (b) Smallpox.
(Vaccinated after infection). P.M.

The condition as to vaccination of the 759 cases was as follows :—

Unvaccinated	...	...	...	...	...	...	653
Vaccinated after infection	...	...	...	...	...	...	11
Vaccinated more than 10 years previously	...	...	...	...	...	...	94
Vaccinated less than 10 years previously	...	...	...	...	...	...	1

(Pt. 8 years of age, vaccinated in infancy—one small scar.)

It was explained in the previous report that the work of contact surveillance had begun to assume such proportions by the end of 1929 as to be difficult to deal with by the regular sanitary and clerical staff.

During the year now under consideration the number of contacts under surveillance was approximately 9,260. The work falling upon the Sanitary Inspectors became so heavy that their routine duties could not be carried out satisfactorily, and a temporary staff was accordingly appointed as follows :—

Mr. Barlow	...	...	...	Commenced duty	2nd April, 1930.
„ Parkinson	...	...	...	„	10th April, 1930.
Miss Littlejohn (Nurse)	...	...	...	„	14th January, 1930.
„ O'Keefe (Nurse)	...	...	...	„	20th January, 1930.
„ Sumpner (Nurse)	...	...	...	„	10th March, 1930.
Mrs. Campbell (Nurse)	...	...	...	„	27th January, 1930.

In addition to the above named, temporary clerical assistance was required to deal with correspondence relating to smallpox cases.

With the aid of this staff administrative measures were taken as laid down in Ministry of Health Memorandum No. 71a/Med. It was not possible, however, to persuade more than a small proportion of those who had been exposed to infection to be vaccinated.

It was found that many persons who had been exposed to infection were thrown temporarily or permanently out of work as an indirect result of these administrative measures, and for this reason, among others, the Council at their meeting on 21st October requested the Minister of Health to approve the following administrative procedure so long as smallpox retained its mild character :—

“ **DIAGNOSIS.**—The Medical Officer of Health or his Assistants to see any suspected case when requested by a medical practitioner to do so, and to endeavour to see as many as possible of all notified cases. (It is not always practicable for the Medical

Office of Health to see all cases during an epidemic, and confirmation by the Medical Officer of Health should not be insisted upon as a condition to the removal to hospital of cases that have been notified.

Disinfection.—The contents of the room occupied by the patient, together with the clothing of the patient, to be disinfected after removal of the patient to hospital. Disinfection to be carried out during regular office hours unless in special circumstances the Medical Officer of Health instructs otherwise.

The room notified after 5 p.m. on week days to be disinfected the following morning, and cases notified after 1 p.m. on Saturday to be disinfected on Monday morning.

Isolation.—Cases of chickenpox to be kept under observation by the Medical Officer of Health or Assistant Medical Officer of Health during the incubation period. The patient to be isolated from the public and to be kept in a room or rooms as to their isolation. The patient to be kept in a room or rooms as to their isolation. The patient to be kept in a room or rooms as to their isolation.

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Officer of Health to see all cases during an epidemic, and confirmation by the Medical Officer of Health should not be insisted upon as a condition to the removal to hospital of cases that have been notified.)

DISINFECTION.—The contents of the room occupied by the patient, together with the clothing of the patient, to be disinfected after removal of the patient to hospital.

Disinfection to be carried out during regular office hours unless in special circumstances the Medical Officer of Health instructs otherwise.

The cases notified after 6 p.m. on week days to be disinfected the following morning, and cases notified after 1 p.m. on Saturday to be disinfected on Monday morning.

SURVEILLANCE OF CONTACTS.—Close contacts to be kept under observation by Officers of the Public Health Department for unexpired portion of incubation period (18 days) by visits at their homes and enquiries from responsible persons as to their health. Pamphlets on precautions to be taken to be left at the home and contacts instructed to call in a doctor on any sign of illness.

Unless the circumstances are exceptional, visits to the homes of contacts to be confined to usual office hours. The surveillance of contacts at work to be discontinued. Information that an individual resident in Shoreditch and working elsewhere is a contact not in future to be sent to the Medical Officer of Health of the district in which he works.

As before, information that an individual has developed smallpox to be given either to his employer, or, if working outside the Borough, to the Medical Officer of Health of the district in which he works.

It will be seen that the general effect of these recommendations, if adopted, would be that mild smallpox would be treated in much the same manner as Scarlet Fever; that the loss of employment amongst smallpox contacts would be reduced to a minimum, and that the staff would, except in exceptional cases, be able to confine their duties to usual office hours.

In support of this application it would be opportune to remind the Minister that in Circular 1025, issued in August, 1929, the mild character of the smallpox now prevalent was referred to, and was given as one of the reasons for modifying advice to be given regarding the vaccination of children of school age and adolescents."

In December the Minister intimated his approval of the suggested procedure with the reservation that the diagnosis should be verified by the Medical Officer of Health before the case was removed, and that immediately after removal steps should be taken to secure the disinfection of personal clothing, bedding or beds which might have become infected.

In order to prevent the possibility of smallpox infection spreading in the Borough as a result of the prevalent mild cases of the disease being mistaken for chickenpox, the latter disease was made notifiable for a period of six months, commencing 8th February.

During the six months that notification was in force 393 cases were notified, all of which were seen by the Medical Officer of Health or Assistant Medical Officer of Health. Only 15 cases notified as chickenpox proved to be smallpox, and it was decided not to prolong notification for a further period as the error intended to

be guarded against did not appear to be sufficiently common to justify this administrative measure.

It may be mentioned in passing that the disease with which mild smallpox (*Variola minor*) is especially likely to be confused is influenza. *Variola minor* commences with rise of temperature, headache and a general feeling of ill health, and it is at this stage that medical advice is commonly sought. The patient frequently pays no attention to the rash that appears two or three days later, as he then feels much better and considers that he has recovered. A proposal to make influenza notifiable, with the object of following up cases a few days after the initial symptoms, was abandoned as impracticable after careful consideration.

VACCINATION ORDER.

Under this Order, as from the 1st April, 1930, the functions relating to vaccination carried out by the Boards of Guardians were transferred to the Borough Council, to be discharged as functions relating to Public Health.

The officers transferred were as follows:—

Vaccination Officers:

- (1) Mr. Dyson (Mansfield Street Baths), Shoreditch North-East Sub-District (Acton, Haggerston, Kingsland and Whitmore Wards).
- (2) Mr. H. W. Williams (94, New North Road), Shoreditch South-West Sub-District (Church, Hoxton, Moorfields and Wenlock Wards).

Public Vaccinators:

- (1) Dr. S. W. Jeger, 79, New North Road, N. 1 (Shoreditch South-West District).
- (2) Dr. L. M. Ladell, 116, St. John's Road, N. 1 (Shoreditch North-East District).

Owing to the fact that he was the Mayor of the Borough, Dr. S. W. Jeger resigned his appointment and Dr. N. H. Clubwala was appointed as from the 1st April, 1930, for the Shoreditch South-West District.

The following report upon vaccination is in the form required by the Registrar-General:—

VACCINATION.

RETURN showing the number of Persons successfully vaccinated and re-vaccinated at the cost of the Rates by the Medical Officers of the Poor Law Institutions and the Public Vaccinators during the year ended 30th September, 1930:—

SHOREDITCH BOROUGH COUNCIL.

Name of Poor Law Institution or Vaccination District.	Name of Medical Officer or Public Vaccinator.	Numbers of successful primary vaccinations of persons.			Number of successful re-vaccinations, i.e., successful vaccinations of persons who had been successfully vaccinated at some previous time.	Observations.
		Under one year of age.	One year and upwards.	Total.		
St. Leonard's Hospital.	Dr. T. Kelleher	3	23	26	41	—
Cottage Homes, Hornchurch.	Dr. Levy ...	—	5	} 6	—	—
	Dr. S. R. Wright	—	1			
Shoreditch South-West District.	Dr. S. W. Jeger	} 263	806	1,069	357	—
	Dr. N. H. Clubwala					
Shoreditch North-East District.	Dr. L. M. Ladell	199	524	723	248	—
		465	1,359	1,824	646	

SCARLET FEVER.

The cases certified numbered 434, of which 50 or 11.5 per cent. were subsequently not regarded as Scarlet Fever. The annual number of cases was 251, which gives an attack rate of 3.9 per 1,000 inhabitants.

The Registrar and Wards distribution of the cases are included in the table on page 19. There was one fatal case, a female between 5 and 10 years of age. The number of cases, deaths and the attack, death and case mortality rates in the Registrar and Wards are given in the appended table:—

Case mortality Deaths per 100 cases.	Rate per 1,000 population.	Fatal cases.			No. of cases.			Wards.
		Total.	Fe- male.	Male.	Total.	Fe- male.	Male.	
1-30	0.00	4.1	...	...	18	7	11	...
...	...	4.1	1	...	77	44	33	...
...	...	4.0	...	...	81	44	37	...
...	...	3.4	...	...	48	26	22	...
...	...	3.3	...	...	55	26	29	...
...	...	3.3	...	...	33	20	13	...
...	...	3.3	...	...	33	20	13	...
...	...	3.1	...	...	34	23	11	...
...	...	2.7	...	...	31	18	13	...
0-35	0.01	3.2	1	...	284	139	145	...
0-67	0.02	3.8	112	...	1,270	...	...	...

The number of cases in Shoreditch was more than in 1919 in which year there were 314 cases with an attack rate of 5.1.

The measures taken to control the disease are as follows:—

Isolation of patient. With the exception of 5 cases all those certified as cases were removed to Hospital.

Notification of family and of other likely to spread infection.

Advice to those exposed as to early symptoms and importance of testing.

Search for source of infection. A mixed case is sometimes found still in the infectious stage and is removed to Hospital.

As is the case with Erythema infectiosum, Scarlet Fever can now be ascertained by a simple test and persons who are liable to contract the disease can be immunised. There is no clinic for this purpose in Shoreditch and no case of artificial Scarlet Fever immunisation came to the knowledge of the Public Health Department.

SCARLET FEVER.

The cases certified numbered 434, of which 50 or 11·5 per cent. were subsequently not regarded as Scarlet Fever. The actual number of cases was accordingly 384, which gives an attack rate of 3·9 per 1,000 inhabitants.

The age seasonal and Ward distribution of the cases are included in the table on page 19. There was one fatal case, a female between 5 and 10 years of age. The number of cases, deaths and the attack, death and case mortality rates in the Borough and Wards are given in the subjoined table :—

Wards.	No. of cases.			Fatal cases.			Rates per 1,000 population.		Case mortality. Deaths per 100 cases.
	Male.	Fe-male.	Total.	Male.	Fe-male.	Total.			
							Attack.	Death.	
Moorfields ...	9	7	16	...	...	...	4.1	...	...
Church ...	33	44	77	...	1	1	4.4	0.06	1.30
Hoxton ...	17	44	61	...	...	...	4.0	...	...
Wenlock ...	18	28	46	...	...	...	3.4	...	...
Whitmore ...	30	26	56	...	...	...	3.3	...	...
Kingsland ...	13	20	33	...	...	...	3.3	...	...
Haggerston...	31	33	64	...	...	...	6.1	...	...
Acton ...	13	18	31	...	...	...	2.7	...	...
Total ...	164	220	384	...	1	1	3.9	0.01	0.26
London ...	...	...	16,750	...	...	112	3.8	0.02	0.67

The number of cases in Shoreditch was more than in 1929, in which year there were 314 cases with an attack rate of 3·2.

The measures taken to control the disease are as follows :—

Isolation of patient. With the exception of 5 cases all those certified were removed to Hospital.

Disinfection of home and of articles likely to spread infection.

Advice to those exposed as to early symptoms and importance of seeking medical aid.

Search for source of infection. A missed case is sometimes found still in the infectious stage, and is removed to Hospital.

As is the case with Diphtheria, susceptibility to Scarlet Fever can now be ascertained by a simple test and persons who are liable to contract the disease can be immunized. There is no clinic for this purpose in Shoreditch, and no case of artificial Scarlet Fever immunization came to the knowledge of the Public Health Department.

DISCUSSION

The first case of diphtheria in the district was reported on January 1st, 1920. The number of cases during the year was 329 and the mortality was 10 per cent. The number of cases during the year was 329 and the mortality was 10 per cent. The number of cases during the year was 329 and the mortality was 10 per cent.

The age and sex distribution of the cases are included in the table on page 10.

The number of cases in the district was 329 and the mortality was 10 per cent. The number of cases during the year was 329 and the mortality was 10 per cent.

Under 1 year	...	...	...
1-2 years	...	...	...
2-5 years	...	...	...
5-10 years	...	...	...

The number of cases in the district was 329 and the mortality was 10 per cent. The number of cases during the year was 329 and the mortality was 10 per cent.

Age	Sex	No. of cases		Total		Mortality
		M	F	M	F	
Under 1 year
1-2 years
2-5 years
5-10 years
10-15 years
15-20 years
20-25 years
25-30 years
30-35 years
35-40 years
40-45 years
45-50 years
50-55 years
55-60 years
60-65 years
65-70 years
70-75 years
75-80 years
80-85 years
85-90 years
90-95 years
95-100 years

The number of cases in the district was 329 and the mortality was 10 per cent. The number of cases during the year was 329 and the mortality was 10 per cent.

The number of cases in the district was 329 and the mortality was 10 per cent. The number of cases during the year was 329 and the mortality was 10 per cent.

DIPHTHERIA.

The cases certified numbered 346 of which 20 or 5·8 per cent. were subsequently not regarded as being diphtheria. The number of cases during the year was thus 326 which gives an attack rate of 3·3 per 1,000 inhabitants.

The age seasonal and Ward distribution of the cases are included in the table on page 19.

There were 20 fatal cases—9 males and 11 females. These occurred in the following age groups :—

Under 1 year	...	...	...	2
Aged 1-2 years	...	...	...	5
Aged 2-5 years	...	...	...	5
Aged 5-10 years	...	...	...	8

The number of cases, the deaths amongst males and females and the attack, death and mortality rates in the Borough, its Wards and in London are given in the subjoined table :—

Ward.	No. of cases.			Fatal cases.			Rates per 1,000 population.		Case mortality. Deaths per 100 cases.
	M.	F.	Total	M.	F.	Total	Attack.	Death.	
Moorfields ...	11	11	22	...	...	...	5·6	...	...
Church ...	23	36	59	1	1	2	3·4	0·11	3·4
Hoxton ...	27	36	63	2	3	5	4·2	0·33	7·9
Wenlock ...	17	23	40	1	1	2	2·9	0·15	5·0
Whitmore ...	30	16	46	1	1	2	2·7	0·12	4·3
Kingsland ...	16	19	35	1	4	5	3·5	0·50	14·3
Haggerston...	16	17	33	2	1	3	3·1	0·28	9·0
Acton ...	16	12	28	1	...	1	2·5	0·09	3·6
Total ...	156	170	326	9	11	20	3·3	0·20	6·13
London ...	...	....	13,527	...	...	460	3·1	0·10	3·4

Diphtheria is to be regarded as a serious disease of childhood, both by reason of the lives which it takes and the prolonged ill-health by which it is often followed.

The cases in Shoreditch were more numerous than in 1929, when they numbered 281. The type of disease was more severe as is shown by the fact that it caused twice as many deaths as in 1929.

The conditions prevailing in the Borough are on the whole favourable to this disease and diphtheria is relatively more prevalent in Shoreham than in the rest of London.

Cases notified per 1,000 Population

	1921-1922	1922-1923	1923-1924	1924-1925	1925-1926	1926-1927	1927-1928	1928-1929	1929-1930
East Ham and West Ham	1.76	1.57	1.50	1.47	1.23	1.31	1.23	1.55	1.59
London	3.62	3.37	2.37	2.34	2.73	2.46	2.71	2.73	2.63
Shoreham	5.5	4.1	3.4	3.6	4.1	4.6	3.7	3.5	3.3

The administrative measures taken in regard to the disease are as follows:—

The isolation of the patient. With one exception all cases were removed to hospital for treatment. It is most important that diphtheria anti-toxin should be administered at the earliest possible moment, and this is done on arrival at the Fever Hospital, which is usually within an hour of the doctor telephoning particulars of the case. If for any reason the case is to be treated at home or is not to be immediately removed to hospital, anti-toxin can be obtained from the Public Health Department by the doctor in charge of the case. Disinfection of the home is carried out as in the case of scarlet fever, particulars attention being paid to all articles put into the mouth, e.g., spoons, bottles, etc. It is advised that these should be boiled after use if this has been a case in the home.

Those who have been exposed to infection are advised regarding early symptoms and of the importance of obtaining medical aid.

The fact that the toxin causing diphtheria can be detected in the throats of those suffering from, and in certain cases of those who have recovered from, the disease is of value in its administrative control for the following reasons:—The diagnosis of diphtheria is confirmed by the following reasons:—The diagnosis is made at the earliest possible moment, diagnosis may be made by means of the microscope; individuals may be discovered who, though they are not themselves ill, are carrying the germs in their throats and are thus a source of infection to others. During the year the number of bacteriological examinations made for the purpose of detecting the diphtheria bacillus numbered 615.

These figures were made regarding the notifications received. The age distribution was as follows:—

Age-period	Male	Female	Total
Under 1 year	—	—	—
1-2 years	21	14	35
2-3 years	16	23	39
3-4 years	22	14	36
4-5 years	23	21	44
5-9 years	31	38	69
10-14 years	17	16	33
Over 15 years	14	27	41
Total	143	173	316

In 22 instances there was evidence pointing to infection from a previous case.

The conditions prevailing in the Borough are on the whole favourable to this disease, and diphtheria is relatively more prevalent in Shoreditch than in the rest of London :—

CASES NOTIFIED PER 1,000 POPULATION.

	1921.	1922.	1923.	1924.	1925.	1926.	1927.	1928.	1929.	1930.
England and Wales	1.76	1.37	1.05	1.07	1.23	1.31	1.33	1.55	1.59	...
London ...	3.62	3.37	2.27	2.31	2.73	2.96	2.71	2.75	2.68	3.1
Shoreditch ...	5.8	4.1	3.4	3.6	4.1	4.0	3.7	3.5	2.8	3.3

The administrative measures taken in regard to the disease are as follows :—

The isolation of the patient. With one exception all cases were removed to Hospital for treatment. It is most important that diphtheria anti-toxin should be administered at the earliest possible moment, and this is done on arrival at the Fever Hospital, which is usually within an hour of the doctor telephoning particulars of the case. If for any reason the case is to be treated at home or is not to be immediately removed to hospital, anti-toxin can be obtained from the Public Health Department by the doctor in charge of the case. Disinfection of the house is carried out as in the case of scarlet fever, particular attention being paid to all articles put into the mouth, e.g., spoons, forks, etc. It is advised that these should be boiled after use if there has been a case in the home.

Those who have been exposed to infection are advised regarding early symptoms and of the importance of obtaining medical aid.

The fact that the germ causing diphtheria can be detected in the throats of those suffering from, and in certain cases of those who have recovered from the disease, is of value in its administrative control for the following reasons :—The diagnosis of doubtful cases is rendered less difficult, diagnosis may in some instances be made more rapidly ; individuals may be discovered who, though they are not themselves ill, are harbouring the germs in their throats and are thus a source of infection to others. During the year the number of bacteriological examinations made for the purpose of detecting the diphtheria bacillus numbered 845.

Home enquiries were made regarding the notifications received. The age distribution was as follows :—

Age period.	Male.	Female.	Total.
Under 1 year ...	6	3	9
1-2 years ...	21	18	39
2-3 years ...	16	22	38
3-4 years ...	22	14	36
4-5 years ...	28	21	49
5-10 years ...	37	53	90
10-13 years ...	7	15	22
Over 13 years ...	16	27	43
Total ...	153	173	326

In 22 instances there was evidence pointing to infection from a previous case.

The problem of the child who harbours diphtheria germs in its throat, and who, if not treated, is a source of danger to others is a most difficult one.

The London County Council have made arrangements under which these children, if necessary, can receive treatment at special clinics at Guy's, London, and at other hospitals.

Like many other diseases, diphtheria is now a preventable disease. Unlike the mild type of diphtheria, the severe type is unduly a very serious disease. During the last few years the number of diphtheritic persons who have died from diphtheria has been very small. In 1925 there were under five years of age, 23 between the ages of five and ten, and 11 over ten. It must be remembered that in addition to the children who died there were a large number whose health was seriously impaired.

The best way to prevent diphtheria and death from this cause is preventable is one that calls for the most careful consideration of a Public Authority responsible for the prevention of disease.

One of the difficulties through Councils have clinics at which children are vaccinated against diphtheria, and it is not immune are protected against the disease. In many cases, however, the children are not vaccinated. There are a number of similar cases in which the children are not vaccinated and in many cases and towns throughout the country.

It is known that in some cases children were protected against diphtheria by the use of antitoxin during the year.

Case Reports

In one instance the child was vaccinated during the year. In one instance the child was vaccinated during the year. The two cases were both aged 10 and the child was vaccinated during the year.

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The problem of the child who harbours diphtheria germs in its throat, and who, though not ill, is a source of danger to others is a most difficult one.

The London County Council have made arrangements under which these children, called "carriers," can receive treatment at special clinics at Guy's, London, and St. Mary's hospitals.

Like smallpox, diphtheria is now a preventable disease. Unlike the mild type of smallpox now prevalent, diphtheria is unhappily a very serious disease. During the last five years the number of Shoreditch persons who have died from diphtheria is 67. Of these 43 were under five years of age, 23 between the ages of five and ten, and one over ten. It must be remembered that in addition to the children who died there were a large number whose health was seriously impaired.

The fact that illness and death from this cause is preventable is one that calls for the full and careful consideration of a Public Authority responsible for the prevention of infectious disease.

Twelve of the Metropolitan Borough Councils have clinics at which children are tested as to their susceptibility to diphtheria, and, if not immune, are protected by means of an easily administered skin injection. There are a number of similar clinics in districts surrounding London and in many counties and towns throughout the country.

So far as is known, no Shoreditch children were protected against diphtheria by this means during the year.

ENTERIC FEVERS.

Three cases of typhoid fever were notified during the year. In one instance the diagnosis was not confirmed. The two cases were both men, one aged 40 and the other 46. It was not possible to trace the source of infection in either case.

There was one case of paratyphoid—a young girl aged 13—who had been ill for many weeks before a doctor was consulted, and she was admitted to hospital. She had been at the seaside at about the time when infection probably occurred, and information was sought from the Medical Officer of Health of the district in question, but it was not possible to trace the source of infection.

All these cases made a good recovery.

DYSENTERY.

Five cases of dysentery were notified. In one the diagnosis was not confirmed. Three cases occurred in one family. A man aged 29 years was notified as suffering, and in the course of investigation it was found that his wife and small daughter, aged 3, had previously both had dysentery and had not completely recovered. Both were accordingly removed to hospital.

It was not possible to trace the source of infection in the case of the mother and daughter, but it appeared possible that they had become infected while on a visit to the country.

The remaining case was that of a young woman aged 24. The way in which she became infected was not ascertained.

These patients all recovered satisfactorily.

EPIDEMIOLOGY

The cases recorded numbered 57, and there were 4 deaths, all females. The deaths occurred at the ages of 17 years, 18 years, 19 years, 20 years, 21 years, 22 years, 23 years, 24 years, 25 years, 26 years, 27 years, 28 years, 29 years, 30 years, 31 years, 32 years, 33 years, 34 years, 35 years, 36 years, 37 years, 38 years, 39 years, 40 years, 41 years, 42 years, 43 years, 44 years, 45 years, 46 years, 47 years, 48 years, 49 years, 50 years, 51 years, 52 years, 53 years, 54 years, 55 years, 56 years, 57 years, 58 years, 59 years, 60 years, 61 years, 62 years, 63 years, 64 years, 65 years, 66 years, 67 years, 68 years, 69 years, 70 years, 71 years, 72 years, 73 years, 74 years, 75 years, 76 years, 77 years, 78 years, 79 years, 80 years, 81 years, 82 years, 83 years, 84 years, 85 years, 86 years, 87 years, 88 years, 89 years, 90 years, 91 years, 92 years, 93 years, 94 years, 95 years, 96 years, 97 years, 98 years, 99 years, 100 years.

A comparison between London and Stockholm is contained in the following table:—

	Attack rate	Deaths per 1,000 cases	Deaths per 1,000 population
London	0.04	0.03	0.02
Stockholm	0.04	0.04	0.03

These cases are not as a routine measure admitted to Hospital; 35 however were moved, mostly to St. Isambard's Hospital, during the course of the year.

Administrative measures have for their object the securing of adequate treatment, the discovery of the source and the prevention of the spread of infection. A careful vigilance in the home is a source of danger, during a confinement or the post-natal period, and enquiries are accordingly made and steps taken to safeguard against this danger.

POST-NATAL FEVER

511 cases were notified, 120 of whom were removed to Hospital. There were four deaths.

The particulars of the four fatal cases are as follows:—

- Age 27 years—Cause of death "Septicæmia following abortion."
- Age 30 years—Cause of death "Septicæmia—Septic abortion induced by douching."
- Age 30 years—Cause of death "Puerperal Septicæmia."
- Age 30 years—Cause of death "Septicæmia following incomplete abortion."

Insufficient evidence is available or due to interference. It is several years since there have been as many as four deaths from Post-natal Fever in Stockholm. It will be noticed, however, that in three of these four cases infection was associated with abortion.

A comparison between London and Stockholm during the last 10 years is contained in the following table:—

London				Stockholm			
Year	Cases	Deaths	Rate per 1,000	Year	Cases	Deaths	Rate per 1,000
1907	207	3	0.01	1907	12	4	0.33
1908	211	3	0.01	1908	9	3	0.33
1909	202	3	0.01	1909	1	0	0.00
1910	233	3	0.01	1910	10	0	0.00
1911	224	3	0.01	1911	13	0	0.00
1912	211	4	0.02	1912	10	0	0.00
1913	200	3	0.01	1913	11	0	0.00
1914	203	3	0.01	1914	7	0	0.00
1915	215	4	0.02	1915	5	0	0.00
1916	222	4	0.02	1916	8	0	0.00

ERYSIPELAS.

The cases certified numbered 67, and there were 4 deaths, all females. The deaths occurred at the ages of 47 years, 46 years, 3 months and 2 months respectively. The age, seasonal and ward distribution of the cases are included in the table on page 19.

A comparison between London and Shoreditch is contained in the following table :—

			Per 1,000 inhabitants.		Deaths per
			Attack rate.	Death rate.	100 cases.
London	...	...	0.54	0.03	6.75
Shoreditch	...	...	0.68	0.04	5.97

These cases are not as a routine measure admitted to Hospital; 35 however were moved, mostly to St. Leonard's Hospital, during the course of the year.

Administrative measures have for their object the securing of adequate treatment, the discovery of the source and the prevention of the spread of infection. A case of erysipelas in the house is a source of danger during a confinement or the puerperium, and enquiries are accordingly made and steps taken to safeguard against this danger.

PUERPERAL FEVER.

Six cases were certified, five of whom were removed to Hospital. There were four deaths.

The particulars of the four fatal cases are as follows :—

Age 27 years—Cause of death "Septicaemia following abortion."

Age 30 years—Cause of death "Coma-Septicaemia—Septic abortion induced by deceased."

Age 30 years—Cause of death "Puerperal Septicaemia."

Age 40 years—Cause of death "Septicaemia following incomplete abortion, insufficient evidence if natural or due to interference."

It is several years since there have been as many as four deaths from Puerperal Fever in Shoreditch. It will be noticed, however, that in three of these four cases infection was associated with abortion.

A comparison between London and Shoreditch during the last 10 years is contained in the following table :—

London.					Shoreditch.			
Year.	Cases.	Cases per 1,000 births.	Deaths.	Deaths per 1,000 births.	Cases.	Cases per 1,000 births.	Deaths.	Deaths per 1,000 births.
1921 ...	353	3.5	142	1.4	12	4.0	4	2.0
1922 ...	311	3.3	129	1.3	9	3.1	3	1.0
1923 ...	352	3.9	126	1.3	7	2.5	...	...
1924 ...	298	3.5	106	1.2	10	3.9	1	0.4
1925 ...	324	3.9	117	1.4	13	4.9	2	0.8
1926 ...	341	4.3	127	1.6	10	3.9	3	1.2
1927 ...	265	3.5	96	1.3	11	5.0	2	0.91
1928 ...	295	3.5	115	1.5	7	3.4	3	1.4
1929 ...	315	4.5	131	1.9	5	1.9	2	1.0
1930 ...	296	4.2	119	1.7	6	3.0	4	2.0

Paratyphoid fever is a disease caused by the infection of the gastrointestinal tract after the ingestion of food or drink contaminated with the organism. It may be stated as a general rule that the actual source of the infection is the patient himself or in the hands, instruments and appliances of the patient or his family.

The majority of a notification steps are taken to secure the best treatment for the patient, to maintain the source of infection and to carry out such disinfection as may be necessary. The majority of cases are removed to hospital and the earlier the better. Search for the source of infection is undertaken primarily to prevent the spread of the disease. All cases occurring in the home are further investigated by the Local Health Officer, who is responsible for the supervision of midwives practicing in the district. In cases in which practice a case of paratyphoid fever has occurred are reported to carry out a complete disinfection of their persons, clothes and their surroundings. It sometimes happens that improper examinations and manipulations are made by unqualified women who are engaged extensively to attend patients. These women, known as "handy women," who confine themselves to their proper sphere, become a grave danger if they attempt to grasp the functions of the midwife. It is the duty of the Local Health Officer to prevent this.

The Local Health Officer and Child Welfare Section of the report particulars will be given of the Local Health Officer's scheme for antenatal care and supervision. Of this scheme which includes the provision of antenatal care and supervision upon the application of the Local Health Officer. It may be said here that everything that is done by way of caring for the health of the patient and assisting her to make the best possible average result for her antenatal health is the task of paratyphoid fever.

Paratyphoid Fever.

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Paratyphoid Fever.

Paratyphoid fever is caused by the infection of the gastrointestinal tract after the ingestion of food or drink contaminated with the organism. It may be stated as a general rule that the actual source of the infection is the patient himself or in the hands, instruments and appliances of the patient or his family. The majority of a notification steps are taken to secure the best treatment for the patient, to maintain the source of infection and to carry out such disinfection as may be necessary. The majority of cases are removed to hospital and the earlier the better. Search for the source of infection is undertaken primarily to prevent the spread of the disease. All cases occurring in the home are further investigated by the Local Health Officer, who is responsible for the supervision of midwives practicing in the district. In cases in which practice a case of paratyphoid fever has occurred are reported to carry out a complete disinfection of their persons, clothes and their surroundings. It sometimes happens that improper examinations and manipulations are made by unqualified women who are engaged extensively to attend patients. These women, known as "handy women," who confine themselves to their proper sphere, become a grave danger if they attempt to grasp the functions of the midwife. It is the duty of the Local Health Officer to prevent this.

The Local Health Officer and Child Welfare Section of the report particulars will be given of the Local Health Officer's scheme for antenatal care and supervision. Of this scheme which includes the provision of antenatal care and supervision upon the application of the Local Health Officer. It may be said here that everything that is done by way of caring for the health of the patient and assisting her to make the best possible average result for her antenatal health is the task of paratyphoid fever.

Puerperal fever is a disease caused by the infection of the generative tract after labour. It may be stated as a general rule that the actual source of the infecting agent lies in the patient herself or in the hands, instruments and appliances of the Doctor or Midwife.

On receipt of a notification steps are taken to secure the best treatment for the patient, to ascertain the source of infection and to carry out such disinfection as may be necessary. The majority of cases are removed to Hospital and the earlier this is done the better. Search for the source of infection is undertaken primarily with a view to preventing the risk of further infections. All cases occurring in the practice of midwives are further investigated by the London County Council, who are the authority responsible for the supervision of midwives practising in the Metropolis. Midwives in whose practice a case of puerperal fever has occurred are required to carry out a complete disinfection of their persons, clothes and instruments before taking fresh cases. It sometimes happens that improper examinations and manipulations are made by unqualified women who are engaged ostensibly to give general assistance to the patient. These women, known as "handy women," who are most useful so long as they confine themselves to their proper sphere, become a grave danger if they attempt to usurp the functions of the midwife. Enquiries are made with the object of discovering and preventing this abuse.

Under the Maternity and Child Welfare Section of this report particulars will be given of the Council's scheme for ante-natal care and supervision. Of this scheme, which includes the provision of sterilized maternity dressings upon the application of the Doctor or Midwife, it may be said here that everything that is done by way of caring for the health of the patient and assisting her to make the best possible arrangements for her confinement lessens the risk of puerperal fever.

PUERPERAL PYREXIA.

Puerperal pyrexia, as defined in the Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926, means any febrile condition, other than puerperal fever, occurring in a woman within 21 days after childbirth, or miscarriage, in which a temperature of 100·4 Fahrenheit, or more, has been sustained during a period of 24 hours or has recurred during that period.

Provision is made in these Regulations for consultations between the Doctor notifying and obstetric specialists, and arrangements have been made with five specialists whose names are included in the list of the staff at the end of this report, to meet practitioners in consultation on these cases upon request.

During the year 23 cases were notified, of which 16 were removed to hospital.

Consultations with the specialists above referred to were held in three cases.

OPHTHALMIA NEONATORUM.

This disease, the duty of notifying which was, under the Public Health (Ophthalmia Neonatorum) Regulations, 1926, placed solely upon the medical practitioner in charge of the case, consists of a purulent discharge from the eye of an infant occurring within 21 days of birth.

If not properly treated, Ophthalmia Neonatorum may cause blindness or serious impairment of vision. It is due to a gonorrheal infection of the child's eyes during

which infection is nearly always from the genital tract and the mother should accordingly also undergo treatment. Unfortunately, however, it is only possible to arrange this in very few cases.

Cases				Total Deaths
	Treated at home	In Hospital	Unreported Deaths	
...	25	5	...	...

The cases for 1950 numbered 150 in Scotland as compared with 200 in London as a whole. In addition to the cases notified 110 cases of inflammation of the eye in the newly born were reported by the Medical Officer of Health of the London County Council.

The Health Visitor does all that lies in her power to secure that the child receives prompt and thorough treatment and she keeps cases under close observation until recovery is complete.

At St. Margaret's Hospital—a special institution of the London County Council for the treatment of this disease—children can be admitted with their mothers, thus ensuring continuity of breast feeding.

Some of the cases notified during the year were nursed by the mother at the home, and others at St. Margaret's Hospital. During the year the nurses visiting under the arrangements of the doctor in charge of the cases.

STATISTICS FOR 1950

At St. Margaret's Hospital during the year

STATISTICS FOR 1950

Number of cases notified during the year

Number of cases for which the mothers known to live in

London at end of year

Number of cases for which the mothers admitted to

St. Margaret's Hospital during the year

Number of applications for admission made by Medical Officer

of Health

Of the 150 cases notified during the year two were females, aged 15 and 26 years

and three were males aged 15, 21 and 25 years.

The other 145 cases were most serious. Years after the initial illness

these patients are frequently in a condition of partial paralysis most distressing to

themselves and to the members of their family who are called upon to give them the

best of medical assistance that is possible.

Arrangements have recently been made and are now under the control of the

London County Council whereby cases of post-operative infection (persons

suffering from the after effects of the disease) are admitted to special institutions.

birth. Infection is nearly always from the genital tract and the mother should accordingly also undergo treatment. Unfortunately, however, it is only possible to arrange this in very few cases.

Cases.			Vision unimpaired	Vision impaired.	Total blindness.	Deaths.
Notified.	Treated at home.	In Hospital.				
30	25	5	30	...	...	...

The cases per 1,000 births numbered 15·0 in Shoreditch as compared with 8·9 for London as a whole. In addition to the cases notified, 110 cases of inflammation of the eyes in the newly born were reported by the Medical Officer of Health of the London County Council.

The Health Visitor does all that lies in her power to secure that the child receives prompt and thorough treatment, and she keeps cases under close observation until the eyes are cured.

At St. Margaret's Hospital—a special institution of the London County Council for the treatment of this disease—mothers can be admitted with their infants, thus securing continuity of breast-feeding.

Four of the cases notified during the year were nursed by the nurses of the Shoreditch and Bethnal Green District Nursing Association, the nurses acting under the instructions of the doctor in charge of the case.

CEREBRO-SPINAL MENINGITIS.

No case was certified during the year.

ENCEPHALITIS LETHARGICA.

Number of cases notified during the year	...	...	...	...	5
Number of cases Post Encephalitis Lethargica known to live in Borough at end of year	...	...	...	...	31
Number of cases Post Encephalitis Lethargica admitted to special Institutions during the year	...	...	...	...	Nil
Number of applications for admission made by Medical Officer of Health	...	...	...	...	3

Of the five cases notified during the year two were females, aged 49 and 56 years, and three were males, aged 19, 21 and 26 years.

The after effects of this disease are most serious. Years after the initial illness these patients are frequently in a condition of partial paralysis most distressing to themselves and to the members of their family who are called upon to give them the very great deal of assistance that they require.

Arrangements have recently been made and are now under the control of the London County Council whereby cases of post encephalitis lethargica (persons suffering from the after effects of the disease) are admitted to special institutions.

This has proved a great boon both to the patients and their families, and it is hoped that this accommodation will be extended so that all these cases will have an opportunity of receiving institutional treatment.

ACUTE POLIOMYELITIS.

No case was notified during the year. This disease, which most commonly attacks children, is characterised by acute feverish onset, with pain in one or more limbs, and is followed by more or less extensive paralysis.

The disease is frequently not diagnosed during the initial stages, and the number of actual cases is no doubt considerably in excess of the notifications.

The after treatment of the paralysis, which should extend over several years, is most important. If neglected, children easily become badly crippled, who under skilled orthopaedic treatment might enjoy normally active lives. The number of children under five years of age known to the health visitors to be suffering from paralysis following this disease is five. Every effort is made to secure that these children attend hospital and that the parents carry out the advice given.

I have to thank Dr. Lewis, the Divisional School Medical Officer, for the information that 24 Shoreditch children who are similarly afflicted attend the Hoxton House Physically Defective School. These children are all medically inspected at the school and are referred to hospital when necessary.

The Invalid Children's Aid Association render valuable assistance in the case of children to whom apparatus for the correction of deformity has been supplied at hospital. A note of the particulars of each case is sent by the hospital to the Association, whose visitors advise and assist the parents in all matters relating to the use, repair and inspection of the apparatus supplied.

ACUTE PRIMARY PNEUMONIA.

ACUTE INFLUENZAL PNEUMONIA.

The number of cases notified during the year was as follows :—

Acute primary pneumonia	...	...	...	...	...	92
Influenzal pneumonia	...	...	...	...	...	5

Of the 97 cases thus brought to the notice of the Department it was found that 69 were receiving treatment in various institutions, as follows :—52 in St. Leonard's Hospital, 2 in the Metropolitan Hospital, 3 in St. Bartholomew's Hospital, and 12 in other institutions. Of the cases treated at home, 4 were visited by the Nurses of the Shoreditch and Bethnal Green District Nursing Association, acting under the direction of the doctor in charge of the case.

The sanitary condition of the homes visited as a result of these notifications was found as regards air space, light and ventilation, to be as follows :—Satisfactory 45, fairly satisfactory 15, unsatisfactory 22.

In addition to the cases of pneumonia notified, as above, 52 cases of pneumonia not of notifiable type were visited by the District Nursing Association. Altogether the Association paid 543 visits in connection with 56 cases of pneumonia.

Two cases of measles not notified in Sharncliffe

Measles

The disease which is one of the most serious of childhood was more prevalent than during 1929.

The deaths numbered 42 and occurred in the following age groups:-

Under 1 year	12
One to 2 years	25
Two to 5 years	8
Five to 10 years	7
42	

Measles was responsible for 21 per cent. of all deaths of children under 5 years of age.

As will be seen from the following table, measles is a disease which tends to be more prevalent every few years, but the reason that after a bad measles year a large number of children are protected by the fact that they have had the disease.

Year	Sharncliffe	London	Measles	Death rate per 1,000 population
1921	15	241	0.17	0.15
1922	81	1,528	0.21	0.20
1923	33	507	0.21	0.20
1924	88	1,800	0.25	0.20
1925	24	387	0.22	0.17
1926	33	314	0.23	0.20
1927	7	179	0.09	0.04
1928	33	420	0.30	0.20
1929	17	191	0.17	0.04
1930	49	1,075	0.30	0.24

The distribution of the deaths in the different wards was as shown on the table on page 12 and 13.

Information regarding cases of measles reaches the Public Health Department in various ways. From the School Authorities from the Health Visitors and from Medical Practitioners to the Borough. The number of cases thus brought to our knowledge was 1,165.

The London County Council will take severe cases of measles in which it is thought is steadily difficult upon the recommendation of the Medical Officer of Health. During the year the number of cases removed to the hospitals of the Council was 242.

In accordance with arrangements made by the Borough Council, the District Nursing Association paid 263 visits in connection with 40 cases of measles.

Infectious Diseases not notifiable in Shoreditch.

MEASLES.

This disease, which is one of the most serious of childhood, was more prevalent than during 1929.

The deaths numbered 49 and occurred in the following age groups :—

Under 1 year	...	...	...	...	13
One to 2 years	...	...	...	...	25
Two to 5 years	...	...	...	...	8
Five to 10 years	...	...	...	...	3
					<hr/> 49

Measles was responsible for 21·9 per cent. of all deaths of children under 5 years of age.

As will be seen from the following table, measles is a disease which tends to become widespread every few years, for the reason that after a bad measles year a large number of children are protected by the fact that they have had the disease.

Year	Deaths		Death rate per 1,000 population	
	Shoreditch	London	Shoreditch	London
1921	18	241	0·17	0·05
1922	84	1,559	0·81	0·35
1923	23	367	0·21	0·08
1924	58	1,335	0·55	0·29
1925	34	357	0·32	0·13
1926	25	914	0·23	0·20
1927	7	179	0·09	0·04
1928	59	1,355	0·59	0·30
1929	17	194	0·17	0·04
1930	49	1,035	0·50	0·23

The distribution of the deaths in the different wards was as shown on the table on pages 12 and 13.

Information regarding cases of measles reaches the Public Health Department in various ways :—From the School Authorities, from the Health Visitors, and from Medical Practitioners in the Borough. The number of cases thus brought to our knowledge was 1,165.

The London County Council will take severe cases, or cases in which home nursing is specially difficult, upon the recommendation of the Medical Officer of Health. During the year the number of cases removed to the hospitals of the Council was 248.

In accordance with arrangements made by the Borough Council, the District Nursing Association paid 363 visits in connection with 40 cases of measles.

For the reasons explained in the report for the year 1929, the appointment of special nurses to visit schools, obtain lists of absences likely to be suffering from measles, and to visit the homes of these children, was not a great success and was discontinued.

The existing arrangements regarding measles cannot, however, be regarded as satisfactory.

During the last five years 107 sporadic children have died from measles, of whom 101 have been under five years of age and 6 between the ages of five and ten years. During the same period the deaths from whooping cough numbered 73, from diphtheria 47 and from scarlet fever 18. Measles is thus seen to be one of the chief causes of infant mortality. It is highly infectious and greatly eludes all forms of isolation and is important in preventing pneumonia which is the usual cause of fatal complication.

For this reason, the seriousness of measles is not appreciated as it should be by the general public. Resistance is often not sought until the child is obviously very ill. In many cases the housing conditions in the Borough are such that proper isolation and treatment are impossible in many homes.

It is thus the object to be any local action for the present administrative authorities to take. It is suggested that a committee be formed, the members of which would be drawn from the various health authorities. It is suggested that the committee should be expected to report.

The importance of the disease would be impressed upon the public and parents would be urged to obtain medical advice. The development of a vaccination would be presented to a considerable extent by the report to the committee. It is suggested to expect that the committee would lead to prevent the spread of the disease.

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Measles Cases

During the last five years 107 sporadic children have died from measles, of whom 101 have been under five years of age and 6 between the ages of five and ten years.

The death rate from this disease was 0.04 per 1,000 inhabitants. The death rate from whooping cough was 0.03, the death rate from 0.03. The number of deaths in the Borough in the last five years have been as follows:

Year	Deaths	Year	Deaths
1926	19	1927	24
1928	10	1929	29
1930	28		

For the reasons explained in the report for the year 1929, the appointment of special nurses to visit schools, obtain lists of absentees likely to be suffering from measles, and to visit the homes of these children, was not a great success and was not repeated.

The existing arrangements regarding measles cannot, however, be regarded as satisfactory.

During the last five years 157 Shoreditch children have died from measles, of whom 151 have been under five years of age and 6 between the ages of five and ten years. During the same period the deaths from whooping cough numbered 72, from diphtheria 67 and from scarlet fever 18. Measles is thus seen to be one of the chief killing diseases of early childhood. It is highly infectious and prompt diagnosis and good nursing are all important in preventing pneumonia which is the most common fatal complication.

Unfortunately, the seriousness of measles is not appreciated as it should be by parents, and medical assistance is often not sought until the child is obviously very ill. Unfortunately, also the housing conditions in the Borough are such that proper nursing and isolation are impossible in many homes.

There does not appear to be any logical reason for the present administrative difference made between scarlet fever and measles. If the latter were made notifiable and all cases were removed as is the case with the former, the following very definite benefits might be expected to result:—

The seriousness of the disease would be impressed upon the public and parents would be under an obligation to obtain medical advice. The development of complications would be prevented to a considerable extent by prompt removal to hospital. It is reasonable to expect that isolation would tend to prevent the spread of infection.

A measles serum prepared from blood given voluntarily by patients recovering from measles is now available, and in one or two of the Metropolitan Boroughs this is used in the Public Health Departments to protect susceptible children in homes in which cases of measles have occurred. If it proves practicable to confer artificial immunity in this way a valuable new weapon with which to fight the disease will be in the hands of the Public Health Service.

WHOOPING COUGH.

There were 3 deaths from whooping cough during the year.

One of the deaths occurred under one year of age, one between one and two, and one between two and five.

The death rate from this disease was 0.04 per 1,000 inhabitants. The deaths in London as a whole numbered 131, the death rate being 0.03. The number of deaths in Shoreditch in recent years have been as follows:—

Year.	Deaths.	Year.	Deaths.
1921 ...	19	1926 ...	0
1922 ...	27	1927 ...	24
1923 ...	10	1928 ...	5
1924 ...	28	1929 ...	40
1925 ...	29		

The number of cases removed to the hospitals of the London County Council during the year was 18.

What has been written in favour of the notification of measles applies with almost equal force to the notification of whooping cough.

Whooping cough also is a serious disease commonly neglected at first, frequently leading to complications and for which isolation and good nursing are required.

GLANDULAR FEVER

Two cases of this disease were brought to the notice of the Health Department under interesting circumstances.

On 21st March a practitioner asked for a second opinion upon a case which he believed to be one of Typhus Fever. The patient was a girl aged 16 who became suddenly ill and developed a well marked bloody rash a few days later. There were boils upon the skin, probably due to lice.

After consultation with a member of the medical staff of the Ministry of Health it was decided to regard the case as one of Typhus and it was accordingly notified and removed to the Western Fever Hospital.

The mother of the girl was taken ill with somewhat similar symptoms a few days later and was also removed to the Western Hospital as a case of Typhus.

The two cases of the illness from which these patients were suffering was not associated with the fourth week of the disease when the enlargement of the glands and the excretion of the blood (showing mononuclear leucocytes) pointed to glandular fever as the correct diagnosis. The notifications referred to were with-
drawn.

INFANTIA

There was only one death attributed to Infantia.

The number of deaths in Shoreditch during recent years has been as follows:

Year	Deaths	Deaths per 1,000
1927	27	0.23
1928	59	0.25
1929	44	0.16
1930	28	0.08
1931	19	

During the last four years the deaths and death rate from Infantia in London as a whole have been as follows:

Year	Deaths	Deaths per 1,000
1927	1,761	0.23
1928	202	0.17
1929	204	0.09
1930	210	0.08

INFANTIA

There was somewhat less Infantia in Shoreditch than during 1929, though the disease was rather more prevalent in London as a whole.

The number of cases removed to the hospitals of the London County Council during the year was 12.

What has been written in favour of the notification of measles applies with almost equal force to the notification of whooping cough.

Whooping cough also is a serious disease commonly neglected at first, frequently leading to complications and for which isolation and good nursing are required.

GLANDULAR FEVER.

Two cases of this disease were brought to the notice of the Health Department under interesting circumstances.

On 27th March a practitioner asked for a second opinion upon a case which he believed to be one of Typhus Fever. The patient was a girl aged 16 who became suddenly ill and developed a well marked blotchy rash a few days later. There were bites upon the skin, probably due to lice.

After consultation with a member of the medical staff of the Ministry of Health it was decided to regard the case as one of Typhus and it was accordingly notified and removed to the Western Fever Hospital.

The mother of the girl was taken ill with somewhat similar symptoms a few days later and was also removed to the Western Hospital as a case of Typhus.

The true nature of the illness from which these patients were suffering was not suspected until the fourth week of the disease when the enlargement of the glands and the examination of the blood (showing mononuclear leucocytosis) pointed to glandular fever as the correct diagnosis. The notifications referred to were withdrawn.

INFLUENZA.

There was only one death attributed to influenza.

The number of deaths in Shoreditch during recent years has been as follows :—

Year.	Deaths.	Year.	Deaths.
1921	27	1926	22
1922	69	1927	25
1923	14	1928	16
1924	28	1929	68
1925	19		

During the last four years the deaths and death rate from influenza in London as a whole have been as follows :—

	Number of deaths.	Deaths per 1,000 population.
1927	1,790	0.39
1928	502	0.11
1929	3,088	0.69
1930	370	0.08

DIARRHŒA.

There was somewhat less diarrhœa in Shoreditch than during 1929, though the disease was rather more prevalent in London as a whole.

distributed as to the deaths are contained in the following table:—

Deaths under two years.			Deaths under one year.		
Total Number.	Rate per 1,000 Population.	Rate per 1,000 Births.	Total Number.	Rate per 1,000 Births.	Percentage of deaths under 1 year.
224	0.54	2.4	181	15.1	
30	0.20	2.0	13.2		

It is to be noted that a high percentage of deaths occurring in infants and young children should be due to the fact that the child is not yet fully developed. It is not to be overlooked that the child should be kept properly and to the strength is maintained. As soon as the child is suffering from this condition the parent should be advised to the best method of obtaining the medical attention for the child.

INFANTILE DISEASES AND SCOLARS.

The following table shows the percentage of the total number of deaths of the children under two years of age, which is caused by the various diseases. It is to be noted that the percentage of deaths caused by the various diseases is as follows:—

Disease	Number of deaths	Percentage of total
Whooping Cough	119	53.1
Scarlet Fever	47	21.1
Diphtheria	40	18.1
Measles	13	5.9
Smallpox	9	4.1
Other Infectious Diseases	3	1.4

It is to be noted that the percentage of deaths caused by the various diseases is as follows:—

Particulars as to the deaths are contained in the following table :—

Deaths under two years.				Deaths under one year.		
	Total Number.	Rate per 1,000 population.		Total Number.	Rate per 1,000 births.	Percentage of deaths under 1 year.
London	696	0·16		638	9·9	15·1
Shoreditch	20	0·20		18	9·0	13·9

Cases of diarrhoea and enteritis occurring in infants and young children should be quickly brought to the notice of the Health Visitors by the parents. It is most important that treatment should be begun promptly and before the strength is undermined. As soon as she knows that a child is suffering from this condition the Health Visitor advises the parents as to the best method of obtaining the medical care appropriate to the case.

INFECTIOUS DISEASES AND SCHOOLS.

In accordance with the requirements of the School Management code of the London County Council, information is received concerning children excluded from school by reason of the fact that they are suffering from infectious disease or reside in houses in which infectious disease exists.

The particulars of these exclusions from school are as follows :—

Disease from which suffering or to which exposed.							Number of exclusions from School.
Smallpox	...	...	...	...	...	...	719
Diphtheria	...	...	...	...	...	...	480
Scarlet Fever	...	...	...	...	...	...	630
Measles	...	...	...	...	...	...	1,180
Chicken Pox	...	...	...	...	...	...	593
Whooping Cough	...	...	...	...	...	...	92
Mumps	...	...	...	...	...	...	158
Typhoid Fever	...	...	...	...	...	...	3
Other Infectious Disease	...	...	...	...	...	...	163
							4,018

In addition to the exclusions from school referred to above, information was received from the School Medical Officer that three children had been excluded from

school on account of the presence of diphtheria bacilli in their noses or throats. The families resident in the three houses to which these children belonged were kept under observation. No cases of diphtheria, however, were subsequently notified amongst the residents of these houses.

NURSING IN THE HOME.

The Shoreditch and Bethnal Green District Nursing Association undertakes home nursing in the Borough and have an agreement with the Borough Council under which the following types of cases are nursed under medical direction in this Borough in consideration of a payment of 1s. 4d. per visit:—(i) cases referred by M.O.H., (ii) children under 5 years of age (the cost of these cases being chargeable to the M. & C. W. Committee), (iii) cases of notifiable diseases.

Subjoined is a list of cases nursed under this agreement during the year 1930.

Disease.	Under 5.	Visits.	Disease.	Over 5.	Visits.
Measles	32	237	Osteo-Myelitis	2	79
Broncho-Pneumonia	15	144	Tuberculosis... ..	17	402
Pneumonia	14	121	Measles	8	126
Marasmus	1	2	Pneumonia	27	278
Bronchitis	11	65	Influenza	6	59
Threadworms	50	364	Erysipelas	3	21
Tonsils and Adenoids	75	247	Diabetes	2	95
Intestinal	9	53	Hemiplegia	1	5
Burns	3	45	Senility	1	4
Pyrexia	3	35	Pleurisy	1	25
Cardiac	1	10	Post-Partum Pyrexia	7	67
Abscess	1	3	Parturition	6	61
Stomatitis	2	7	Puerperal Pyrexia ...	1	13
Phymosis	1	15	Miscarriage	3	25
Septic Throat	1	3	Abortion	12	144
Mastoid	2	66	Lying-in	1	13
Impetigo	1	20	Mammary Abscess ...	3	24
Ulcer of Buttock ...	1	46	Mastitis	2	42
Dermatitis	1	35	Intestinal	1	5
Eczema	1	11	Ante-natal	8	67
Constipation... ..	1	11	Post Partum		
Rheumatism	1	7	Phlebitis	2	30
Glands of Neck	1	18			
Scald of Arm	1	17			
Tuberculosis	11	15			
Prematurity	1	52			
Otorrhœa	41	654			
Discharging Eyes ...	7	81			
Ophthalmia					
Neonatorum	4	52			
Pemphigus	2	16			
Conjunctivitis	1	6			
Circumcision	1	9			
Septic umbilicus ...	3	24			
Totals	300 cases	2,491 visits	Totals	114 cases	1,585 visits

The total number of cases at all ages was 414, in connection with which 4,076 visits were made by the Nurses of the Association. Amongst persons over five years there were four deaths from pneumonia, five from tuberculosis, two from measles and one from abortion, and amongst the children under five, three died from pneumonia and one from measles.

BACTERIOLOGICAL EXAMINATIONS.

With the exception of those carried out at the Chest Hospital in connection with the work of the Tuberculosis Dispensary, all the examinations made on behalf of the Borough Council are by Dr. F. H. Teale at the University College Hospital Medical School.

In order to enable practitioners to receive reports upon specimens without delay, a box has been placed on the front steps of the Town Hall into which specimens may be put between 12 noon and 7 p.m. At 7 p.m. the specimens are then taken by messenger to the laboratory. Under this arrangement the report upon a throat swab sent in this way is telephoned to the doctor the following morning.

During the year some 1,309 examinations were made, which included the following:—For suspected diphtheria 845, for suspected tuberculosis 237, in connection with the diagnosis of venereal disease 79.

DISINFECTION.

The premises disinfected numbered 2,030. The articles removed to the Borough Council's Disinfecting Station totalled 40,802, and included 1,749 beds, 803 mattresses, 3,529 pillows, 1,016 bolsters and some 33,705 other articles such as sheets, blankets, quilts, curtains, carpets, clothing and the like. It was necessary to destroy one pair of mattresses, which was too dilapidated to be returned. It was replaced.

THE SHELTER.

The accommodation provided under Section 60 (4) of the Public Health (London) Act, 1891, was in use on 41 occasions, in order to facilitate disinfection after removal of smallpox cases.

VENEREAL DISEASES.

The London County Council is the authority responsible for the provision of facilities for the diagnosis and treatment of these diseases and special clinics are held in various voluntary hospitals and in other institutions. None of these are actually within the boundaries of the Borough, but those of the Metropolitan, the London, the Royal Free and University College Hospitals are readily accessible to the people of Shoreditch. Lists of these centres are displayed in the Public Conveniences in the Borough and can also be seen in the Health Department.

The London County Council also provides for doctors, laboratory facilities to aid diagnosis, the supply of salvarsan and its substitutes, and courses of instruction

in modern methods of diagnosis and treatment. The County Council further co-ordinates the work of hospitals, public health services and practitioners, and maintains publicity and propaganda work with regard to matters relating to venereal disease.

Although the means for treatment are available, much educational work remains to be done. Cases not infrequently come to the notice of the Department in which patients recommended to one of their clinics postpone treatment before they are cured, thus running the gravest risk of disaster to themselves, of infecting their wife or husband and of transmitting disease to their children.

The number of bacteriological examinations carried out on behalf of the Borough Council in connection with the diagnosis of venereal disease during the past five years is as follows:

1928	...	26	1929	...	40
1927	...	65	1930	...	79
1926	...	48			

in modern methods of diagnosis and treatment. The County Council further co-ordinates the work of hospitals, public health services and practitioners, and undertakes publicity and propaganda work with regard to matters relating to venereal disease.

Though the means for treatment are available, much educational work remains to be done. Cases not infrequently come to the notice of the Department in which patients recommended to one of these clinics discontinue treatment before they are cured, thus running the gravest risk of disaster to themselves, of infecting their wife or husband and of transmitting disease to their children.

The number of bacteriological examinations carried out on behalf of the Borough Council in connection with the diagnosis of venereal disease during the past five years is as follows :—

1926	...	26	1929	...	69
1927	...	66	1930	...	79
1928	...	78			

IV.—SANITARY WORK.

The re-arrangement explained in the last Annual Report under which the Borough was divided into ten sanitary districts, and duties under the Sale of Food and Drugs Acts and other similar duties were allocated to two Inspectors was continued during the year, which is thus the first complete year during which this new arrangement has been in operation.

DISTRICT INSPECTORS.

The total number of Intimations served as to insanitary conditions was 5,126. The number served by each Sanitary Inspector was as follows:—

Inspector Wright	...	...	525	Inspector Girling	...	...	611
„ Chapman	...	...	331	„ Stratton	...	...	407
„ Sickelmore	...	...	511	„ Walker	...	...	544
„ Thomas	...	...	385	„ Gibbs	...	...	524
„ Molloy	...	...	431	Tempy. Inspector Barlow	...	...	96
„ Bishop	...	...	669	„ „ Parkinson	...	...	92

In connection with the Inspectors' sanitary work, some 1,483 letters were written to owners and others.

Statutory Notices under the Public Health (London) Act, 1891, were served by order of the Sanitary Authority upon the parties responsible for the abatement of nuisances in 1,016 instances.

For non-compliance with the requirements of the Sanitary Authority, proceedings were taken before the Magistrates in 37 instances. A list of Legal Proceedings will be found on pages 58, 59, 60 and 61.

The following tables (pages 40–41), prepared by the Senior Sanitary Inspector, summarise the visits and work of the Sanitary Inspectors during 1930, the work done in compliance with the provisions of the Factory and Workshops Act, 1901, and in connection with the drains and sanitary arrangements of new buildings is included:—

Inspections, 1930.	Wright.	Chapman.	Sickelmore.	Thomas.	Molloy.	Bishop.	Girling.	Stratton.	Walker.	Gibbs.	Barlow. (Temporary.)	Parkinson. (Temporary.)	Shaw.	Grant.	Totals.
House to house	258	233	116	96	194	37	279	108	129	324	126	97	...	...	1,997
Other premises	432	432	740	492	577	941	761	663	502	474	...	9	...	...	6,023
Re-inspections, &c. ...	2,698	1,416	1,892	2,496	1,734	2,412	2,321	2,050	2,627	1,999	352	464	...	...	22,461
Visits in con- nection with— Smallpox ...	1,063	1,303	756	1,016	942	1,376	649	953	1,043	1,261	2,358	1,700	...	...	14,420
Other infec- tious diseases	36	41	107	99	65	146	244	40	102	124	...	...	...	...	1,004
Houses let in lodgings ...	22	22	17	...	10	5	582	...	134	7	...	...	...	...	799
Workshops ...	79	245	38	90	113	112	322	101	73	199	...	...	...	...	1,372
Factories ...	2	70	38	20	21	103	23	36	15	34	...	...	...	...	362
Outworkers ...	70	25	49	150	139	87	42	16	39	99	...	...	...	...	716
Bakehouses ...	4	...	8	10	10	13	29	9	5	14	...	...	...	...	102
Milkshops, Cowsheds ...	174	52	73	93	59	152	72	75	121	92	...	...	...	...	963
Cookshops ...	15	160	17	7	21	21	60	12	42	61	...	...	...	...	416
Fried Fish Shops ...	38	16	23	12	6	28	33	12	19	24	...	...	...	...	211
Ice Cream Shops ...	22	16	15	11	12	42	42	10	31	25	...	...	...	...	226
Slaughter Houses ...	...	...	...	...	...	5	...	...	...	...	...	...	...	...	5
Meat and Food	...	2	9	4	15	13	27	1	19	2	...	...	...	...	92
Stables ...	...	...	...	1	...	...	3	...	4	...	...	...	...	...	8
Rag and Bone	5	...	13	2	...	10	4	...	7	7	...	...	...	...	48
Markets ...	14	28	21	39	22	32	35	27	22	32	16	15	39	36	378

Total ... 51,603

Work done, 1930.	Wright.	Chapman.	Sickelmore.	Thomas.	Molloy.	Bishop.	Girling.	Stratton.	Walker.	Gibbs.	Barlow. (Temporary.)	Parkinson. (Temporary.)	TOTALS.
Premises, throughout ...	5	19	7	8	3	2	30	10	10	12	...	...	106
" partially ...	203	166	190	153	177	220	207	223	271	255	69	61	2,195
" total rooms ...	549	399	535	420	418	440	637	682	695	678	197	122	5,772
Vermineous rooms ...	7	6	11	17	1	25	10	22	54	10	...	11	174
" premises ...	6	2	10	12	...	19	7	19	46	2	...	11	134
Premises, generally re- paired ...	323	110	319	200	188	320	408	331	327	383	69	79	3,057
Light and ventilation ...	1	1	6	...	1	3	2	...	3	...	1	...	18
Roofs, gutters, rain-water pipes ...	209	67	303	210	149	212	235	147	224	228	35	50	2,069
Overcrowding ...	1	1	2	10	14	75	7	5	18	3	...	...	136
Water re-instated ...	7	3	15	...	9	4	28	4	6	6	1	...	83
Drains, new ...	2	3	4	1	2	5	4	2	2	3	...	...	28
" re-constructed ...	6	5	4	1	1	3	15	6	17	15	...	...	73
" improved or re- paired ...	13	18	42	39	26	25	8	4	33	20	2	3	233
" obstructions re- moved ...	22	13	34	30	7	20	16	18	25	23	...	2	210
Soil, vent pipes repaired ...	1	6	19	1	2	6	...	1	14	4	1	6	61
W.C.s— New ...	57	26	28	8	13	55	36	20	11	100	...	...	354
Improved or repaired ...	73	61	194	104	86	94	102	76	83	92	2	12	979
Obstructions removed ...	12	9	26	18	10	15	33	21	35	20	3	1	203
Sinks, improved ...	12	31	20	20	19	2	46	10	13	14	1	...	188
" traps provided ...	2	1	2	3	4	2	...	...	1	12	...	1	28
<i>Outdoor Premises.</i>													
Floors, paving repaired ...	34	5	41	41	24	32	39	24	28	49	1	14	332
Cleansed or limewashed ...	63	72	72	80	2	103	3	57	123	...	...	...	575
Improved or repaired ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ashpits provided ...	35	22	66	30	59	78	64	48	54	45	17	3	521
" improved or re- paired ...	...	1	7	...	2	1	2	...	...	...	...	...	13
" abolished ...	...	...	7	...	2	5	3	...	...	1	3	...	21
Accumulations removed...	17	7	15	...	14	25	8	4	19	27	1	...	137
Urinals cleansed or re- paired ...	1	...	...	...	1	1	...	...	1	...	...	...	4
Animals removed ...	1	...	...	...	...	1	1	...	1	...	...	...	4

The following summary follows in the main return made to the Medical Officer of Health of the London County Council for inclusion in his Annual Report for the year 1930 :—

SANITARY AREA.

PREMISES.	NUMBER OF PLACES—				Number of inspections, 1930.	Number of notices, 1930.	Number of prosecutions, 1930.
	On register at end of 1929.	Added in 1930.	Removed in 1930.	On register at end of 1930.			
Milk premises ...	288	5	20	273	863	11	...
Cowsheds ...	2	...	...	2	31	1	...
Slaughterhouses ...	1	...	...	1	5	...	...
Offensive trade premises	1	...	...	1	8	2	...
Ice Cream premises ...	91	5	...	96	226	12	...
Houses let in lodgings	389	19	6	402	799	191	...
Restaurants and eating houses	194	...	5	189	456	23	...

SMOKE NUISANCES.

(1) Number of observations ...	748	(4) Number of Statutory notices served ...	...
(2) Number of intimations served ...	11	(5) Number of legal proceedings	Nil
(3) Number of complaints received ...	3	(6) Number of convictions ...	Nil

CLEANSING AND DISINFECTION.

Number of adults cleansed ...	6	Number of premises cleansed—	
Number of children cleansed ...	Nil	(a) After infectious diseases ...	1,999
		(b) For vermin ...	31

WATER SUPPLY TO TENEMENT HOUSES.

Number of premises supplied ...	35	Number of prosecutions ...	Nil
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SANITARY OFFICERS.

Number of Sanitary Inspectors (whole-time) :	Male—13.	Female—Nil.
“ “ “ (part-time) :	Male—Nil.	Female—Nil.
Number of Health Visitors (wholetime) :	Municipal—6.	Voluntary—2.
“ “ “ (part-time) :	Nil.	
Total number of houses in the Borough ...	...	14,026
Number of houses occupied by the Working Classes ...	...	13,126
Number of houses inspected—		
(a) On account of complaints or illness (Public Health Act) ...	...	6,023
(b) House-to-house (Housing Consolidated Regulations, 1925) (Public Health Act) ...	...	1,997

Number of Notices served—

(a) Under Public Health Act—

(i.) Intimation ... 5,126

(ii.) Statutory ... 1,016

(b) Under Housing Act ... —

Number of houses repaired or nuisances remedied under Public Health Act,
1891 ... 5,126

Number of houses repaired under Section 3 of Housing Act, 1925—

(a) By owners ... —

(b) By Local Authority in default of owners ... —

NOTE.—*This Section was, in August, rendered inoperative by the
Housing Act, 1930.*

Number of houses closed on notice by owner that they could not be made fit —

Number of houses for the Working Classes—

(a) Erected during the year ... 54

(b) In course of erection ... 55

Number of representations by Medical Officer or other person ... —

Number of houses included in such representations ... —

Number of Closing Orders made ... —

Number of Closing Orders determined (i.e., houses made fit) ... —

Number of Demolition Orders ... —

Number of houses demolished—

(a) In pursuance of Orders ... —

(b) Voluntary ... 59

UNDERGROUND ROOMS.

Number illegally occupied ... 2

Number closed or illegal occupation discontinued ... 2

OVERCROWDING.

Number of cases of overcrowding found ... 136

Number remedied ... 92

Number of prosecutions ... —

FUR SKIN DRESSERS.

At the end of the year there was one on the Register. Eight visits of inspection were made, and two Intimation Notices were served in respect of lime washing. These were duly complied with.

RAG AND BONE DEALERS.

Some 22 premises to which bye-laws under Section 9 of the London County Council (General Powers) Act, 1908, apply, were on the Register at the end of the year. The visits paid to these during the year numbered 48. Intimations as to the need for cleanliness were written and duly attended to in 7 instances.

Vermicious Houses.

The houses where it was necessary to take measures on account of the presence of vermin numbered 125, and in connection with them some 174 rooms were dealt with during the year. Sanitary notices were served where required and the usual steps taken. A fair number of the vermin cases came under notice through intimations from the Local Authorities as to children reported as being in a verminous condition.

During the year the homes of some 79 children, 37 boys and 23 girls, notified as verminous by the School Medical Officer, were reported with a view to the homes being dealt with where necessary, being dealt with by the Sanitary Authority, whilst the children were cleaned and their clothing disinfected at the cleaning stations of the London County Council. Intimations were received that 15 boys and 10 girls had been given the opportunity of being cleaned at these stations, that in the case of 15 boys and 23 girls Sanitary Notices had been served upon the parents to clean the children within 24 hours under Section 122 of the Children's Act, 1908, and that in the case of 2 boys and 1 girl legal proceedings were pending for non-compliance with the requirements of Sanitary Notices under this Act. In 2 cases the addresses given were erroneous.

In all the cases reported the homes were visited by the Sanitary Inspectors and the following summary of the results obtained—in 63 the rooms occupied were satisfactory, varying from fairly clean to very clean, in 3 they were dirty, and in 2 also filthy. In all the bedding was clean or fairly so, in 6 it was verminous over-crowding was noticed in one instance. In four of the homes evidence of poverty was marked. No evidence of lice was found in connection with any of the homes.

Apart from the visits of the Sanitary Inspectors three Sanitary Notices were served upon the parents and two upon the children for clothing.

The homes reported by the School Authorities as suffering from scabies numbered 11, of whom 20 were boys. As a result of the enquiries made 4 other cases came under observation. As far as practicable steps were taken to prevent infection spreading. In 1 case the address given was erroneous.

London County Council (Verminous Houses) Act, 1925, Section 28.

Intimation was made to the Local Authorities for the removal to St. Leonard's Hospital of two infants under this Section.

Water Supply.

The number of certificates issued as required under the Public Health (London) Act, 1901, Section 13 (2), was 37.

The water supply is derived entirely from the Metropolitan Water Board. There are, however, a certain number of wells in the Borough from one or two of which drinking water is obtained. Nine wells were under the observation of the Sanitary Inspectors during the year.

VERMINOUS HOUSES.

The houses where it was necessary to take measures on account of the presence of vermin numbered 133, and in connection with them some 174 rooms were dealt with during the year. Sanitary notices were served where required and the usual steps taken. A fair number of the premises came under notice through intimations from the School Authorities as to children reported as being in a verminous condition.

During the year the homes of some 70 children, 37 boys and 33 girls, notified as verminous by the School Medical Officer, were reported with a view to the homes, bedding, etc., where necessary, being dealt with by the Sanitary Authority, whilst the children were cleaned and their clothing disinfected at the cleansing stations of the London County Council. Intimations were received that 18 boys and 10 girls had been given the opportunity of being cleansed at these stations, that in the case of 15 boys and 22 girls Statutory Notices had been served upon the parents to cleanse the children within 24 hours under Section 122 of the Children's Act, 1908, and that in the cases of 2 boys and 1 girl legal proceedings were pending for non-compliance with the requirements of Statutory Notices under this Act. In 2 cases the addresses given were erroneous.

In all the cases reported the homes were visited by the Sanitary Inspectors, and the following summarises the results obtained :—In 63 the rooms occupied were satisfactory, varying from fairly clean to very clean, in 3 they were dirty, and in 2 also buggy. In 62 the bedding was clean or fairly so, in 6 it was verminous, overcrowding was noticed in one instance. In four of the homes evidence of poverty was marked. No evidence of lice was found in connection with any of the homes.

Arising out of the visits of the Sanitary Inspectors three Sanitary Notices were served upon the owners and two upon the occupiers for cleansing.

The children reported by the School Authorities as suffering from scabies numbered 41, of whom 29 were females. As a result of the enquiries made 4 other cases came under observation. As far as practicable steps were taken to prevent infection spreading. In 1 case the address given was erroneous.

LONDON COUNTY COUNCIL (GENERAL POWERS) ACT, 1928, SECTION 28.

Application was made to the Magistrate for the removal to St. Leonard's Hospital of two individuals under this Section.

WATER SUPPLY.

The number of certificates issued as required under the Public Health (London) Act, 1891, Section 48 (2), was 35.

The water supply is almost entirely from the Metropolitan Water Board.

There are, however, a certain number of wells in the Borough from one or two of which drinking water is obtained. Nine wells were under the observation of the Sanitary Inspectors during the year.

RATS AND MICE DESTRUCTION ACT, 1912.

SUMMARY.

Year.	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
1911	17	21	6	20	15	10	8	35	25	10	68	10	211
1912	6	14	1	11	4	1	1	1	1	1	1	1	57
1913	8	1	1	1	1	1	1	1	1	1	1	1	20
1914	1	1	1	1	1	1	1	1	1	1	1	1	17
1915	—	—	—	—	—	—	—	—	—	—	—	—	—
1916	10	14	10	11	11	11	11	11	11	11	11	11	98
1917	10	14	10	11	11	11	11	11	11	11	11	11	104

FOOT.

EXPLANATION OF TABLE.

The figures in the above table represent the number of rats and mice destroyed during the year. The figures in the column headed "Total" represent the total number of rats and mice destroyed during the year. The figures in the column headed "Jan." represent the number of rats and mice destroyed during the month of January, and so on for the other months of the year.

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RATS AND MICE DESTRUCTION ACT, 1919.

SUMMARY.

INSPECTORS.	Wright.	Chapman.	Sickelmore.	Thomas.	Molloy.	Bishop.	Girling.	Stratton.	Walker.	Gibbs.	Total.
Complaints dealt with ...	10	68	25	5	9	15	25	6	31	17	211
Drains tested ...	4	1	22	4	1	4	11	1	14	5	67
Found defective ...	2	1	4	2	—	2	1	—	8	—	20
Found satisfactory ...	2	—	18	2	1	2	10	1	6	5	47
Premises where egress of rats was ascertained ...	10	14	13	4	—	14	21	1	21	—	98
Premises reported freed from rats ...	9	1	23	5	9	15	25	6	26	15	134

FOOD.

STREET MARKETS AND FOOD.

The number of inspections of premises at which food is prepared or sold, made by each Inspector during the year, is shown in the Table on page 40.

The following were surrendered or seized and destroyed as unfit for the food of man : 1 tin of peeled tomatoes, 1 bundle (4 boxes) of tomatoes, 1 tray of chocolate, 56 lbs. of plaice, 5 cwts. of pigs' heads, 20 lbs. of currants and 3 qrs. of haddocks.

SLAUGHTERHOUSES.

There is only one licensed slaughterhouse in the Borough. No animals however were slaughtered during the year.

MEAT.

The number of butchers' shops under inspection during the year was 54 and the number of visits of inspection was 92.

General observation was kept of all meat stalls where butchers' meat was exposed for sale. Ten warning letters were sent in respect of minor infringements of the Public Health (Meat) Regulations, 1924.

Legal proceedings were instituted in one case, and the defendant was ordered to pay £1 10s. costs.

COWHOUSES.

Particulars regarding the inspection of the two cowhouses in the Borough are contained in the Table on page 42.

At the end of the year 26 cows were being kept in these two cowhouses.

Structural improvements were carried out during the year at the premises in St. John's Road whereby the lighting and ventilation were made much better.

The sanitary condition of both cowsheds can be regarded as satisfactory. The animals were generally housed in the same sheds which are kept in the same condition and the sheds cannot be regarded as unsatisfactory.

THE PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1925.

The Regulations provide a person suffering from Tuberculosis, who is in an infected condition, from allowing any employment or occupation in connection with a dairy which would involve the milking of cows, the treatment of milk, or the handling of vessels used for containing milk.

It was not necessary for these reasons to prohibit any person from following his occupation in a dairy during the year under consideration.

COOKHOUSES AND EATING HOUSES.

Included the kitchens of public houses where food is prepared for customers. 150 were under inspection during the year, and some 450 visits were made in connection with them. Some 25 sanitary notices were served, mainly for cleaning.

FILTHY-DIRT SHOPS.

Some 50 were under inspection and 211 visits were made to them. Twenty-three sanitary notices were served, mainly for cleaning.

ICE-CREAM SHOPS.

The number under observation during the year was 56, and 230 visits of inspection were made. In 15 instances sanitary notices were served. Most of these were for general cleaning. The F.C.C. (General Powers) Act, 1925, provides for the registration of ice-cream premises.

At the end of the year the number on the register was 26.

HANDICAPES.

The number of handiapes on the register throughout the year was 63. The number inspected was 25 and the number of sanitary notices was 12. In connection with handiapes the sanitary inspectors made 103 visits of inspection. Sanitary notices were served in 12 instances.

REGISTRATION OF HANDICAPES.

At the end of the year the number of handiapes in the Borough on the voluntary register of handiapes is 63, and the number of sanitary notices is 12. The Council was 11.

SALE OF FOOD QUOTES, 1921.

The results of the Order respecting the marking of meat, etc., are compiled with in the Borough. No contraventions were noticed during the year.

The sanitary condition of both cowhouses can be regarded as satisfactory. Speaking generally, however, the arrangement under which cows are kept in the middle of a densely-populated urban area like Shoreditch cannot be regarded as altogether suitable.

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

These Regulations prohibit a person suffering from Tuberculosis, who is in an infectious condition, from following any employment or occupation in connection with a dairy which would involve the milking of cows, the treatment of milk, or the handling of vessels used for containing milk.

It was not necessary for these reasons to prohibit any person from following his occupation in a dairy during the year under consideration.

COOKSHOPS AND EATING-HOUSES.

Including the kitchens of public houses where food is prepared for customers, 189 were under inspection during the year, and some 456 visits were made in connection with them. Some 23 sanitary notices were served, mainly for cleansing.

FRIED FISH SHOPS.

Some 59 were under inspection and 211 visits were made to them. Twenty-three sanitary notices were served, mainly for cleansing.

ICE-CREAM SHOPS.

The number under observation during the year was 96, and 226 visits of inspection were made. In 12 instances sanitary notices were served. Most of these were for general cleansing. The L.C.C. (General Powers) Act, 1928, provides for the registration of ice-cream premises.

At the end of the year the number on the register was 96.

BAKEHOUSES.

The number of bakehouses on the register throughout the year was 52.

The number underground was 35 and the number of factory bakehouses was 29.

In connection with bakehouses the Sanitary Inspectors paid 102 visits of inspection. Intimation notices were served in 19 instances.

REGISTRATION OF HAIRDRESSERS.

At the end of the year the number of hairdressers in the Borough on the voluntary register of hairdressers agreeing to comply with the hygienic requirements of the Council was 14.

SALE OF FOOD ORDER, 1921.

The provisions of this Order respecting the marking of Meat, etc., are complied with in the Borough. No contraventions were noticed during the year.

REGULATIONS AS TO THE SALE OF LARD.

It is the duty of the Board to see that the lard is sold properly and that the regulations are enforced as to the sale of lard during the year.

INSPECTION WITH SPECIAL DUTIES.

The Board has decided to send Mr. Shaw to inspect the lard during the year and to see that the regulations are enforced as to the sale of lard during the year.

Food and Lard Sales.

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REGULATIONS AS TO THE SALE OF EGGS.

All eggs exposed for sale in the Borough during the year appeared properly marked. No complaints or evidence as to contravention were received during the year.

INSPECTORS WITH SPECIAL DUTIES.

The arrangement under which Mr. Grant and Mr. Shaw continued throughout the year to devote the whole of their time to the matters referred to in this sub-section of the Report worked well, and it is hoped that this arrangement will become permanent.

FOOD AND DRUGS ACTS.

The reports of the Public Analyst, Mr. H. G. Harrison, M.A., show that 1,056 samples were submitted to him during the year. This number is at the rate of 10·5 per 1,000 inhabitants.

The results of the year's work are summarised in the following table :—

Quarter of 1930.	Number of Samples taken.	Number of Samples Adulterated.	Percentage Adulterated.	Number of Prosecutions Instituted.	Prosecutions withdrawn because of Warranties, &c.	Prosecutions Proceeded with	Number of Successful Prosecutions.	Fines and Costs.	Amount paid to Analyst for Samples Analysed.
1st	280	4	1·9%	0	—	0	0	£ s. d.	£ s. d.
2nd	271	10	3·3%	9	—	9	9	23 3 0	169 7 6
3rd	217	8	3·6%	5	—	5	5	11 16 0	135 12 6
4th	288	4	1·4%	2	—	2	2	7 5 0	180 0 0
Totals for Year	1,056	26	2·46%	16	—	16	16	42 4 0	660 0 0

The samples taken included : 559 milks, 34 butter, 24 dried fruits (3 informal), 21 bread and butter (17 informal), 21 tea (1 informal), 30 cheese, tinfoil wrapped (21 informal), 20 margarine, 17 whisky, 17 sterilised milk, 16 condensed milk (sweetened), 16 sausage (5 informal), 14 jam (8 informal), 11 meat pies (10 informal), 11 tinned fish (informal), 11 rum, 10 cake ingredients, 9 cordials (6 informal), 8 tinned fruits (informal), 8 beet, 7 gins, 7 non-alcoholic wines, 7 sugar, 6 sweets, 6 dripping, 6 tapioca (2 informal), 5 marmalade (4 informal), 5 malt vinegar, 5 boiled ham (4 informal), 5 wine (1 informal), 4 milk chocolate, 4 cocoa, 4 coffee, 4 self-raising flour, 4 pepper, 4 pearl barley, 4 lard, 4 bread, 4 cake, 4 castor oil (informal), 4 compound syrup of figs (informal), 3 flour, 3 lemonade powder, 3 cream (2 informal), 3 cod liver oil emulsion (informal), 3 boracic ointment (informal), 3 zinc ointment (informal), 3 mustard (2 informal), 2 brawns (1 informal), 2 Kruschen salts (informal), 2 cheese, 2 ground arrowroot (1 informal), 2 lemon squash, 2 saveloys, 2 weak tincture of iodine (informal), 2 comp. liquorice powder (informal), 2 ground rice (informal),

and 1 each of Glauber salts (informal), glycerine (informal), pressed beef (informal), vinegar essence (informal), baking powder, beef paste, chicory and coffee, egg substitute powder, sago, sardines, tea dust, ground ginger, jelly, nut oil, olive oil, rice, chicken and ham paste, corned beef, bread and margarine, lime juice cordial and chopped meat.

Of the samples of milk 14 or 2·4 per cent. were found to be below the standard fixed by the Board of Agriculture.

In the subjoined table are shown the number of samples of milk taken during the four quarters of the year, with the numbers and percentage of those not found to be genuine :—

Quarter of the year.			Number of Samples.	Number not genuine.	Percentage adulterated.
1st	...	...	128	2	1·5
2nd	...	...	180	9	5·0
3rd	...	...	125	3	2·4
4th	...	...	143	0	0

In two of the samples, water was certified to have been added ; in both cases it was less than 5 per cent. ; in 11 cases the samples showed deficiency in fat ranging from 1 to 35 per cent., taking the standard as laid down by the Sale of Milk Regulations. In one sample it was certified that 3 per cent. water was added and 3 per cent. fat abstracted.

Legal proceedings were instituted in nine, or 64·28 per cent., of the cases in which samples of milk were below standard.

No legal proceedings were considered advisable regarding the remainder of the samples of milk below standard. The percentage of the adulterated samples of milk in which it was not thought advisable to institute legal proceedings was 35·72.

Of the forty samples of vinegar taken, one contained 9 per cent. excessive water. Proceedings were taken and the defendant was found guilty and ordered to pay £2 2s. costs.

Of the 18 samples of sausages taken, three were certified to contain sulphur dioxide to the extent of 250, 240 and 100 parts per million respectively. Legal proceedings were instituted in all three cases, and fines and costs amounting to £5 1s. were imposed.

Of the 35 samples of spirits taken, two samples of whisky contained 3·2 per cent. and 2 per cent. excessive water. One sample of gin was certified to contain 5·8 per cent. of excessive water. Proceedings were instituted regarding the cases with

excessive water to 5·8 per cent. and 3·2 per cent., and £3 3s. costs were allowed the Council in each case.

Twenty informal samples of bread and butter were taken. Three were found to have margarine substituted for butter. Three formal samples were taken from the same sources, and in one case margarine was again found substituted for butter. Proceedings were instituted and the defendant was fined £2 with £3 3s. costs.

The subjoined table gives a comparison of the results of the work under the Sale of Food and Drugs Acts for the years 1906–1930 inclusive :—

Year.	Number of Samples.	Number of persons in the Borough to each Sample.	Number of Samples adulterated.	Percentage of Samples adulterated.	Number of prosecutions instituted.	Summonses with- drawn on account of warranties.	Prosecutions proceeded with.	Number of successful prosecutions.	Fines and Costs.	Amount paid to Public Analyst.
									£ s. d.	£ s. d.
1906	520	224	122	23·4	44	2	42	34	106 12 6	260 0 0
1907	519	223	99	19·0	36	4	32	27	67 14 0	259 10 0
1908	580	200	92	15·8	45	...	45	39	117 10 0	290 0 0
1909	570	200	92	16·1	76	2	74	69	255 18 6	276 5 0
1910	578	200	133	23·0	65	...	60	49	93 17 6	279 5 0
1911	577	200	149	25·8	64	...	62	58	180 0 6	278 17 6
1912	584	190	100	17·1	48	1	48	45	172 11 0	281 10 0
1913	768	144	132	17·1	47	...	47	42	94 2 6	350 10 0
1914	768	143	132	17·1	36	...	36	21	74 6 0	350 10 0
1915	768	135	130	17·8	43	...	43	30	63 16 0	350 10 0
1916	768	130	144	18·7	50	...	49	36	134 18 0	350 10 0
1917	770	129	154	20·0	65	...	65	41	99 12 0	351 5 0
1918	724	134	137	17·5	54	1	53	37	284 13 0	340 12 6
1919	632	155	72	11·3	32	1	31	17	137 3 0	316 0 0
1920	934	109	69	7·4	25	1	24	14	38 3 6	700 10 0
1921	1077	98	58	5·4	25	...	25	20	94 14 0	807 15 0
1922	1068	97	58	5·4	20	...	20	14	31 5 0	700 15 0
1923	1049	101	51	4·9	19	...	19	10	24 18 6	655 12 6
1924	1051	101	37	3·5	17	...	17	11	49 9 0	656 17 6
1925	1073	100	55	5·1	16	2	14	5	32 14 6	670 12 6
1926	1058	101	27	2·5	3	...	3	1	5 2 0	661 5 0
1927	1062	101	20	1·9	11	...	11	10	16 16 0	663 15 0
1928	1076	93	18	1·7	9	...	9	7	16 16 0	672 10 0
1929	1060	95	26	2·5	15	...	15	15	48 8 6	662 10 0
1930	1056	44	26	2·46	16	...	16	16	42 4 0	660 0 0

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

The following samples were taken and submitted to the Bacteriologist for examination: 1 sample of Grade "A" T.T.; 1 sample of "Certified" milk and 5 samples of "Pasteurized" milk.

The results show that the milks conformed to the standard laid down by the Order.

Two samples of ordinary undesignated milk with the following results :—

Sample No. 24.

B. coli present in 0.001 c.c.m.

Colonies growing at 37° C.—434,000 per c.c.m.

„ „ 22° C.—245,000 per c.c.m.

B. Sporogenes and welchii present in 10 c.c.m.

Sample No. 25.

B. coli present in 0.001 c.c.m.

Colonies growing at 37° C.—136,400 per c.c.m.

„ „ 22° C.—75,600 per c.c.m.

B. Sporogenes and welchii present in 10 c.c.m.

Four samples of " Pasteurized " Milk and 1 Grade " A " T.T. Milk. The results show that these milks did not conform to the standard laid down by the Order. The following are the results of the examinations made by the Bacteriologist :—

Sample No. 16—Grade " A " T.T. Milk.

No. of bacteria per 1 c.c.—710,000	(a) 1/10	c.c. 63,500	} Not more than 200,000 allowed.
	(b) 1/100	c.c. 7,120	
	(c) 1/1000	c.c. 784	

Presence of *B. coli* in 1/100 c.c. in three tubes :—

	48 hrs.	72 hrs.	} No <i>B. coli</i> in 1/100 c.c. allowed.
1.	+	+	
2.	+	+	
3.	+	+	

Sample No. 15—Pasteurized Milk.

No. of bacteria per 1 c.c.—627,000	(a) 1/10	c.c. 58,400	} Not more than 100,000 allowed.
	(b) 1/100	c.c. 6,250	
	(c) 1/1000	c.c. 672	

Presence of *B. coli* in 1/10 c.c. in three tubes :—

	48 hrs.	72 hrs.
1.	+	+
2.	+	+
3.	+	+

Sample No. 17—Pasteurized Milk.

No. of bacteria per 1 c.c.—125,000	(a) 1/10	c.c. 10,600	} Not more than 100,000 allowed.
	(b) 1/100	c.c. 1,240	
	(c) 1/1000	c.c. 146	

Presence of *B. coli* in 1/10 c.c. in three tubes :—

	48 hrs.	72 hrs.
1.	—	—
2.	—	—
3.	—	—

Sample No. 18—Pasteurized Milk.

No. of bacteria per 1 c.c.—222,500	(a) 1/10	c.c. 19,760	} Not more than 100,000 allowed.
	(b) 1/100	c.c. 2,140	
	(c) 1/1000	c.c. 256	

Presence of *B. coli* in 1/10 c.c. in three tubes :—

	48 hrs.	72 hrs.
1.	—	—
2.	—	—
3.	—	—

Sample No. 19—Pasteurized Milk.

No. of bacteria per 1 c.c.—128,000	(a) 1/10	c.c. 11,800	} Not more than 100,000 allowed.
	(b) 1/100	c.c. 1,220	
	(c) 1/1000	c.c. 146	

Presence of *B. coli* in 1/10 c.c. in three tubes :—

	48 hrs.	72 hrs.
1.	+	+
2.	+	+
3.	+	+

*Notes on these samples.**Sample No. 16—Grade " A " T.T. Milk.*

Warning letter was sent by M.O.H. 8/4/30.

Endeavours were made to obtain further samples of Grade " A " Milk, but were unsuccessful.

Sample No. 17—" Pasteurized Milk."

Sample No. 18— " "

Sample No. 19— " "

Warning letters were sent in each case and further samples were taken which conformed to the standard. The explanation given was that due care had not been taken by the man in charge of the Pasteurizing plant.

Sample No. 15—" Pasteurized " Milk.

Warning letter sent by the M.O.H. 8/4/30.

The explanation given was that the milk was wrongly labelled and should not have been sold as designated milk. Sale of " Pasteurized " milk has been discontinued in the Borough by this vendor.

TREATMENT OF MILK BY HEAT.

An enquiry was carried out during the year with the object of ascertaining the extent to which milk sold in the Borough is subjected to heat before reaching the purchaser. It was found that, with the exception of the relatively very small quantity of milk supplied from the two cow sheds in the Borough, milk sold in Shoreditch is obtained wholesale from some seventeen firms. A letter was written

to each of these, and from replies received it is clear that with the exception referred to all milk is subjected to heat by the various wholesale dealers.

This fact has an important bearing upon the safety of milk as a food for the young. During the last ten years the American & Child Welfare Committee have supplied a large amount of milk from the milk shops in the borough to nursing and expectant mothers, infants and young children. During 1933 the amount supplied was approximately 300,000 gallons. It is known from the London County Council reports that an appreciable percentage of this milk contains tubercle bacilli, and that it does not entirely conform to a satisfactory bacteriological standard, but that this contamination is due to the fact that the milk is heated as a result of giving milk to the infants and young children, having been a definite tendency to increase during this period.

There are doubtless other factors to be considered, but it is reasonable to suppose that the fact that it has been possible to give away 1,000 pints and more of unheated milk daily for ten years without any ill effects having become apparent is largely attributable to the heating of milk by the wholesale dealers.

Milk and Cream Regulations, 1913

Some of the samples of milk submitted for analysis were reported to contain no preservatives.

Microscopic examination of cream was carried out for analysis some of which were reported to contain no preservatives.

Comments on Milk Regulations

Various samples of condensed milk were submitted for analysis under the above Regulations, all of which were found to comply with the standard laid down by the Regulations.

Milk and Cream Regulations, 1923

Special attention was kept on all packages of milk by the Food and Drug Department. In one case a few years of milk was delivered, filling bottles in the morning. These packages were heated and the defendant was fined 10s.

Microscopic Milk Act 1925 (Ontario)

Special attention was kept on all bottles and shops in the borough where bottles were sold. These bottles were examined for sale. These two bottles were sent to the Food and Drug Department. These bottles were found to be contaminated and the defendant was fined 10s.

Milk Regulations, 1934

Special attention was kept on all milk stalls where bottles of milk were exposed for sale. The bottles were sent to the Food and Drug Department.

Smoke Regulations

There were 3 communications from the London County Council relating to the Smoke Regulations. These were duly brought to the notice of the parties concerned. Under the Regulations were made by the Sanitary Inspectors and in

to each of these, and from replies received it is clear that, with the exception referred to, all milk is subjected to heat by the various wholesale dealers.

This fact has an important bearing upon the safety of milk as a food for the young. During the last ten years the Maternity & Child Welfare Committee have supplied a large amount of milk from the milk shops in the Borough to nursing and expectant mothers, infants and young children. During 1930 the amount supplied was approximately 30,500 gallons. It is known from the London County Council Reports that an appreciable percentage of this milk contains tubercle bacilli, and that it does not otherwise conform to a satisfactory bacteriological standard, but tuberculosis and infantile diarrhoea, the two diseases to be feared as a result of giving milk thus contaminated to infants and young children, have shown a definite tendency to decrease during this period.

There are doubtless other factors to be considered, but it is reasonable to suppose that the fact that it has been possible to give away 1,200 pints and more of undesignated milk daily for ten years without any ill effects having become apparent is largely attributable to the heating of milk by the wholesale dealers.

MILK AND CREAM REGULATIONS, 1912.

None of the samples of milk submitted for analysis were reported to contain any preservative.

Three samples of cream were submitted for analysis none of which were reported to contain any preservative.

CONDENSED MILK REGULATIONS.

Sixteen samples of condensed milk were submitted for analysis under the above Regulations, all of which were certified to comply with the standard laid down by the Regulations.

MILK AND DAIRIES ORDER, 1926.

General observation was kept on all purveyors of milk by the Food and Drug Inspectors. In one case a purveyor of milk was observed "filling bottles in the street." Legal proceedings were instituted and the defendant was fined 10s.

MERCHANDISE MARKS ACT, 1926, ORDERS.

General observation was kept of all stalls and shops in the Borough where foodstuffs scheduled under these Orders were exposed for sale. Thirty-four warning letters were sent in respect of minor infringements. These proved effective and no further action was necessary.

MEAT REGULATIONS, 1924.

General observation was kept of all meat stalls where butcher's meat was exposed for sale. Ten warning letters were sent in respect of minor infringements.

SMOKE NUISANCES.

There were 3 communications from the London County Council referring to the emission of black smoke. These were duly brought to the notice of the parties responsible. Some 748 observations were made by the Sanitary Inspectors and in

in factories, notices and in 1 statutory notice were served on the offenders. These notices were served on the offenders and there was no necessity for further action on the part of the Health Department.

Factories and Workshops, 1911 and 1928.

Under the above Act 25 samples were taken for analysis. Two contained 65 and 100 parts respectively of soluble chlorine per 100,000 in excess of the amount allowed. In both cases proceedings were instituted and fines and costs to the extent of £100 were imposed.

Factories and Workshops, Act, 1901.

The Act was passed with the object of improving the health of the workers in factories and workshops. It was passed by the House of Commons. Certain sanitary defects, however, occurring in factories and workshops are only punishable under the Public Health Act, and are referred by the Health Department.

The number of workshops, exclusive of bakeries, on the register at the end of the year 1928 was 1,612. The number added to the register was 161, the number removed was 10.

The number of workshops on the register at the end of the year is contained in the following table.

Registered Workshops—1928.

Number		Workshops on the Register (a) at the end of the year	
(1)	(2)	(3)	(4)
1,612	1,612	Total number of workshops on Register	
108	108	Other trades than those mentioned above	
1	1	Trades mentioned in the Act	
81	81	Trades mentioned in the Act	
10	10	Trades mentioned in the Act	
5	5	Trades mentioned in the Act	
55	55	Trades mentioned in the Act	
40	40	Trades mentioned in the Act	
1	1	Trades mentioned in the Act	
61	61	Trades mentioned in the Act	
26	26	Trades mentioned in the Act	
73	73	Trades mentioned in the Act	
22	22	Trades mentioned in the Act	
1	1	Trades mentioned in the Act	
104	104	Trades mentioned in the Act	
210	210	Trades mentioned in the Act	
65	65	Trades mentioned in the Act	
1,076	1,076	Trades mentioned in the Act	

At the end of the year 1928 the number of bakeries on the register was 51, including 25 factory bakeries.

11 instances intimation notices and in 1 statutory notice were served on the Offenders. These were effective, and there was no necessity for further action on the part of the Sanitary Authorities.

RAG FLOCK ACTS, 1911 AND 1928.

Under the above Act, 36 samples were taken for analysis. Two contained 65 and 190 parts respectively of soluble chlorine per 100,000 in excess of the amount allowed. In both cases proceedings were instituted and fines and costs to the extent of £19 9s. 0d. were imposed.

FACTORY AND WORKSHOP ACT, 1901.

Factories are dealt with by H.M. Inspectors of Factories and Workshops by the Officers of the Borough Council. Certain sanitary defects, however, occurring in factories are only remediable under the Public Health Act, and are referred by H.M. Inspectors to the Health Department.

The number of workshops, exclusive of bakehouses, on the register at the end of the year was 1,612. The number added to the register was 161, the number removed 144.

A classification of the workshops on the register at the end of the year is contained in the following table :—

REGISTERED WORKSHOPS—1930.

Workshops on the Register (s. 131) at the end of the year.										Number.
(1)										(2)
(1) Furniture, woodwork, fitting and other branches of the furniture trades.										1,078
(a) Cabinet making		...	600	(c) Upholstery		...	...	95		
(b) French polishing		...	173	(d) Other workers		...	...	210		
(2) Dress										194
(a) Tailoring		...	...	83	(e) Shirt making		...	1		
(b) Mantles		...	...	15	(f) Boot and shoe trades		...	29		
(c) Dress		...	...	18	(g) Artificial flowers		...	3		
(d) Millinery		...	...	9	(h) Other workers		...	36		
(3) Skin, leather, hair and feather trades...										64
(a) Furriers		...	...	15	(c) Feathers		...	1		
(b) Saddlery and Harness		...	...	8	(d) Other workers		...	40		
(4) Paper, printing, book, stationery and fancy goods trades										58
(a) Box and bag makers		...	...	38	(b) Other workers		...	20		
(5) Laundry and washing										6
(6) Food										16
(7) Metals, machines, implements and conveyances										87
(8) Precious metals, jewels, &c.										1
(9) Other trades than those mentioned above										108
Total number of workshops on Register										1,612

NOTE.—A separate register is kept for bakehouses, the number of which in use at the end of the year was 52, including 29 factory bakehouses.

The particulars of inspections made by the Sanitary Inspectors are as follows:—

Particulars	Number of Inspections		Number of Notices Issued	Number of Notices Served
	(1)	(2)	(3)	(4)
Factories	1	1	1	1
Public Houses	1	1	1	1
Private Houses	1	1	1	1
Shops	1	1	1	1
Public Places	1	1	1	1
Other	1	1	1	1
Total	5	5	5	5

The details of the notices served are as follows:—

Particulars	Number of Notices		Number of Notices Served	Number of Notices Served
	(1)	(2)	(3)	(4)
Factories	1	1	1	1
Public Houses	1	1	1	1
Private Houses	1	1	1	1
Shops	1	1	1	1
Public Places	1	1	1	1
Other	1	1	1	1
Total	5	5	5	5

The particulars of inspections made by the Sanitary Inspectors are as follows :—

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories (Including Factory Laundries)	362	49	1
Workshops (Including Workshop Laundries)	1,372	179	1
Workplaces (Excluding Outworkers' pre- mises dealt with in Table III.)	893	72	...
Totals	2,627	300	2

The defects found and dealt with were as follows :—

Particulars.	Number of Defects.			Number of Prosecu- tions.
	Found.	Remedied.	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts :*</i>				
Want of cleanliness	112	112	...	...
Want of ventilation ... ..	...	...	...	...
Overcrowding ... ..	...	...	...	...
Want of drainage of floors ... ..	...	...	...	...
Other nuisances	237	237	...	...
Sanitary ac- commodation {	insufficient	10	10	...
	unsuitable or defec- tive	122	122	...
	not separate for sexes	2	2	...
<i>Offences under the Factory and Workshop Act :</i>				
Illegal occupation of underground bakehouse (Section 101) ... ..	...	...	...	...
Breach of special sanitary require- ments for bakehouses (Sections 97 to 100) ... ..	...	...	...	...
Other offences (Excluding offences relating to out- work which are included in table on page 56.)	...	...	...	...
Totals	483	483	...	...

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

OTHER MATTERS.

Class.	Number.
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshop Act (s. 133).	1
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshops Act (s. 5).	Notified by H.M. Inspector ... 23 (referring to 16 factories and 7 workshops.)
Other	Reports (of action taken) sent to H.M. Inspector. 3 (referring to 16 factories and 7 workshops.)
Underground Bakehouses (s. 101) :—	3
Certificates granted during the year	Nil.
In use at the end of the year	35

During the year 179 Sanitary Notices were served upon as many workshops. The following is an abstract of the sanitary work carried out in compliance with these notices :—

Premises cleansed throughout ...	167	Soil and vent pipes dealt with ...	11
Premises cleansed partially ...	55	Water-closets newly constructed	30
Number of rooms cleansed ...	197	Water-closets repaired, etc. ...	109
Walls, floors, sashes, etc., repaired	47	Water-closets obstructions removed	13
Light and ventilation improved	—	Sinks, etc., cleansed and repaired..	5
Roofs, guttering, etc., repaired...	77	Sink traps provided	15
Overcrowding abated	—	Sculleries, yards, etc., paving re-	
Water reinstated or improved...	1	paired	3
Drains newly constructed ...	2	Sculleries, yards, etc., cleansed or	
Drains reconstructed	6	limewashed	39
Drains, repaired, etc.	14	Dust receptacles provided ...	8
Drains obstructions removed ...	19	Foul accumulations removed ...	3
Urinals cleansed, etc.	3		

The number of factories under observation for insanitary conditions during the year was 49, and in connection with them some 49 sanitary notices were served. The work carried out to comply with these notices included the cleansing and repairing of water-closets in 42 instances, the removal of obstructions from drains and water-closets in 12 instances, besides several other matters. Limewashing of factories can only legally be dealt with by the Factory Inspector, but defects in connection with the sanitary arrangements in factories are matters within the province of the sanitary authority.

HOME WORK.

During the year 80 lists of out-workers were received from employers in the Borough, 40 in the first and 40 in the second half-year. Those for the first half-year are due in February, for the second in August. These lists contained the names of 891 out-workers, of whom 652 were not residents in Shoreditch. The addresses of those non-resident were forwarded to the sanitary authorities of the districts to which they belonged.

and on the 1st of April 1914, the following list of persons was received from the employers in the Borough:—

(1) The following list of persons was received from the employers in the Borough:—

(2) The following list of persons was received from the employers in the Borough:—

Employer's Name	Address	Occupation	Number of Persons	Sex	Age	Marital Status	Religion	Education	Other Notes
Mr. J. H. Smith	123 High Street	Shopkeeper	10	5	15-65	3	Anglican	Elementary	
Mr. W. B. Jones	45 Market Lane	Blacksmith	8	4	18-55	2	Anglican	Elementary	
Mr. T. C. Brown	78 Church Lane	Farmer	12	6	20-70	4	Anglican	Elementary	
Mr. R. D. White	90 Mill Lane	Miller	6	3	25-60	1	Anglican	Elementary	
Mr. S. E. Green	101 Station Road	Engineer	15	8	18-75	5	Anglican	Elementary	
Mr. P. F. Black	112 Bridge Street	Publican	9	5	20-65	3	Anglican	Elementary	
Mr. Q. G. Grey	123 Park Lane	Lawyer	7	4	25-60	2	Anglican	Elementary	
Mr. H. I. White	134 Church Lane	Teacher	11	6	18-65	4	Anglican	Elementary	
Mr. J. K. Black	145 Mill Lane	Miller	8	4	20-60	2	Anglican	Elementary	
Mr. L. M. Grey	156 Station Road	Engineer	13	7	18-70	5	Anglican	Elementary	
Mr. N. O. White	167 Bridge Street	Publican	10	6	20-65	4	Anglican	Elementary	
Mr. P. Q. Black	178 Park Lane	Lawyer	9	5	25-60	3	Anglican	Elementary	
Mr. R. S. Grey	189 Church Lane	Teacher	12	7	18-65	5	Anglican	Elementary	
Mr. T. U. White	190 Mill Lane	Miller	7	4	20-60	2	Anglican	Elementary	
Mr. V. W. Black	201 Station Road	Engineer	14	8	18-70	6	Anglican	Elementary	
Mr. X. Y. Grey	212 Bridge Street	Publican	11	6	20-65	4	Anglican	Elementary	
Mr. Z. A. White	223 Park Lane	Lawyer	10	7	25-60	4	Anglican	Elementary	
Mr. B. C. Black	234 Church Lane	Teacher	13	8	18-65	6	Anglican	Elementary	
Mr. D. E. Grey	245 Mill Lane	Miller	9	5	20-60	3	Anglican	Elementary	
Mr. F. G. White	256 Station Road	Engineer	16	9	18-70	7	Anglican	Elementary	
Mr. H. I. Black	267 Bridge Street	Publican	12	7	20-65	5	Anglican	Elementary	
Mr. J. K. Grey	278 Park Lane	Lawyer	11	8	25-60	5	Anglican	Elementary	
Mr. L. M. White	289 Church Lane	Teacher	14	9	18-65	7	Anglican	Elementary	
Mr. N. O. Black	290 Mill Lane	Miller	10	6	20-60	4	Anglican	Elementary	
Mr. P. Q. Grey	301 Station Road	Engineer	17	10	18-70	8	Anglican	Elementary	
Mr. R. S. White	312 Bridge Street	Publican	13	7	20-65	6	Anglican	Elementary	
Mr. T. U. Black	323 Park Lane	Lawyer	12	9	25-60	6	Anglican	Elementary	
Mr. V. W. Grey	334 Church Lane	Teacher	15	10	18-65	8	Anglican	Elementary	
Mr. X. Y. White	345 Mill Lane	Miller	11	7	20-60	5	Anglican	Elementary	
Mr. Z. A. Black	356 Station Road	Engineer	18	11	18-70	9	Anglican	Elementary	
Mr. B. C. Grey	367 Bridge Street	Publican	14	8	20-65	7	Anglican	Elementary	
Mr. D. E. White	378 Park Lane	Lawyer	13	10	25-60	7	Anglican	Elementary	
Mr. F. G. Black	389 Church Lane	Teacher	16	11	18-65	9	Anglican	Elementary	
Mr. H. I. Grey	390 Mill Lane	Miller	12	8	20-60	6	Anglican	Elementary	
Mr. J. K. White	401 Station Road	Engineer	19	12	18-70	10	Anglican	Elementary	
Mr. L. M. Black	412 Bridge Street	Publican	15	9	20-65	8	Anglican	Elementary	
Mr. N. O. Grey	423 Park Lane	Lawyer	14	11	25-60	8	Anglican	Elementary	
Mr. P. Q. White	434 Church Lane	Teacher	17	12	18-65	10	Anglican	Elementary	
Mr. R. S. Black	445 Mill Lane	Miller	13	9	20-60	7	Anglican	Elementary	
Mr. T. U. Grey	456 Station Road	Engineer	20	13	18-70	11	Anglican	Elementary	
Mr. V. W. White	467 Bridge Street	Publican	16	10	20-65	9	Anglican	Elementary	
Mr. X. Y. Black	478 Park Lane	Lawyer	15	12	25-60	9	Anglican	Elementary	
Mr. Z. A. Grey	489 Church Lane	Teacher	18	13	18-65	11	Anglican	Elementary	
Mr. B. C. White	490 Mill Lane	Miller	14	10	20-60	8	Anglican	Elementary	
Mr. D. E. Black	501 Station Road	Engineer	21	14	18-70	12	Anglican	Elementary	
Mr. F. G. Grey	512 Bridge Street	Publican	17	11	20-65	10	Anglican	Elementary	
Mr. H. I. White	523 Park Lane	Lawyer	16	13	25-60	10	Anglican	Elementary	
Mr. J. K. Black	534 Church Lane	Teacher	19	14	18-65	12	Anglican	Elementary	
Mr. L. M. Grey	545 Mill Lane	Miller	15	11	20-60	9	Anglican	Elementary	
Mr. N. O. White	556 Station Road	Engineer	22	15	18-70	13	Anglican	Elementary	
Mr. P. Q. Black	567 Bridge Street	Publican	18	12	20-65	11	Anglican	Elementary	
Mr. R. S. Grey	578 Park Lane	Lawyer	17	14	25-60	11	Anglican	Elementary	
Mr. T. U. White	589 Church Lane	Teacher	20	15	18-65	13	Anglican	Elementary	
Mr. V. W. Black	590 Mill Lane	Miller	16	12	20-60	10	Anglican	Elementary	
Mr. X. Y. Grey	601 Station Road	Engineer	23	16	18-70	14	Anglican	Elementary	
Mr. Z. A. White	612 Bridge Street	Publican	19	13	20-65	12	Anglican	Elementary	
Mr. B. C. Black	623 Park Lane	Lawyer	18	15	25-60	12	Anglican	Elementary	
Mr. D. E. Grey	634 Church Lane	Teacher	21	16	18-65	14	Anglican	Elementary	
Mr. F. G. White	645 Mill Lane	Miller	17	13	20-60	11	Anglican	Elementary	
Mr. H. I. Black	656 Station Road	Engineer	24	17	18-70	15	Anglican	Elementary	
Mr. J. K. Grey	667 Bridge Street	Publican	20	14	20-65	13	Anglican	Elementary	
Mr. L. M. White	678 Park Lane	Lawyer	19	16	25-60	13	Anglican	Elementary	
Mr. N. O. Black	689 Church Lane	Teacher	22	17	18-65	15	Anglican	Elementary	
Mr. P. Q. Grey	690 Mill Lane	Miller	18	14	20-60	12	Anglican	Elementary	
Mr. R. S. White	701 Station Road	Engineer	25	18	18-70	16	Anglican	Elementary	
Mr. T. U. Black	712 Bridge Street	Publican	21	15	20-65	14	Anglican	Elementary	
Mr. V. W. Grey	723 Park Lane	Lawyer	20	17	25-60	14	Anglican	Elementary	
Mr. X. Y. White	734 Church Lane	Teacher	23	18	18-65	16	Anglican	Elementary	
Mr. Z. A. Black	745 Mill Lane	Miller	19	15	20-60	13	Anglican	Elementary	
Mr. B. C. Grey	756 Station Road	Engineer	26	19	18-70	17	Anglican	Elementary	
Mr. D. E. White	767 Bridge Street	Publican	22	16	20-65	15	Anglican	Elementary	
Mr. F. G. Black	778 Park Lane	Lawyer	21	18	25-60	15	Anglican	Elementary	
Mr. H. I. Grey	789 Church Lane	Teacher	24	19	18-65	17	Anglican	Elementary	
Mr. J. K. White	790 Mill Lane	Miller	20	16	20-60	14	Anglican	Elementary	
Mr. L. M. Black	801 Station Road	Engineer	27	20	18-70	18	Anglican	Elementary	
Mr. N. O. Grey	812 Bridge Street	Publican	23	17	20-65	16	Anglican	Elementary	
Mr. P. Q. White	823 Park Lane	Lawyer	22	19	25-60	16	Anglican	Elementary	
Mr. R. S. Black	834 Church Lane	Teacher	25	20	18-65	18	Anglican	Elementary	
Mr. T. U. Grey	845 Mill Lane	Miller	21	17	20-60	15	Anglican	Elementary	
Mr. V. W. White	856 Station Road	Engineer	28	21	18-70	19	Anglican	Elementary	
Mr. X. Y. Black	867 Bridge Street	Publican	24	18	20-65	17	Anglican	Elementary	
Mr. Z. A. Grey	878 Park Lane	Lawyer	23	20	25-60	17	Anglican	Elementary	
Mr. B. C. White	889 Church Lane	Teacher	26	21	18-65	19	Anglican	Elementary	
Mr. D. E. Black	890 Mill Lane	Miller	22	18	20-60	16	Anglican	Elementary	
Mr. F. G. Grey	901 Station Road	Engineer	29	22	18-70	20	Anglican	Elementary	
Mr. H. I. White	912 Bridge Street	Publican	25	19	20-65	18	Anglican	Elementary	
Mr. J. K. Black	923 Park Lane	Lawyer	24	21	25-60	18	Anglican	Elementary	
Mr. L. M. Grey	934 Church Lane	Teacher	27	22	18-65	20	Anglican	Elementary	
Mr. N. O. White	945 Mill Lane	Miller	23	19	20-60	17	Anglican	Elementary	
Mr. P. Q. Black	956 Station Road	Engineer	30	23	18-70	21	Anglican	Elementary	
Mr. R. S. Grey	967 Bridge Street	Publican	26	20	20-65	19	Anglican	Elementary	
Mr. T. U. White	978 Park Lane	Lawyer	25	22	25-60	19	Anglican	Elementary	
Mr. V. W. Black	989 Church Lane	Teacher	28	23	18-65	21	Anglican	Elementary	
Mr. X. Y. Grey	990 Mill Lane	Miller	24	20	20-60	18	Anglican	Elementary	
Mr. Z. A. White	1001 Station Road	Engineer	31	24	18-70	22	Anglican	Elementary	

NATURE OF WORK.	OUTWORKERS' LISTS, SECTION 107.									Outwork in unwholesome premises, Section 108.			Outwork in infected premises, Sections 109 and 110.		
	Lists received from Employers.						Notices served on Occupiers as to keeping or sending Lists.	Prosecutions.		In- stances.	Notices served.	Prosecu- tions.	In- stances.	Orders made. (S. 109.)	Prosecu- tions. (S. 109, 110.)
	Twice in the Year.			Once in the Year.				Failing to keep or permit inspection of Lists.	Failing to send Lists.						
	Lists.	Outworkers.		Lists.	Outworkers.										
		Con- tractors.	Work- men.		Con- tractors.	Work- men.									
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)
Wearing apparel :—															
(1) Making, &c. ...	42	63	488	6	4	55	...	...	...	35	35	...	7	...	...
(2) Cleaning and washing...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Furniture and upholstery ...	2	...	5	...	...	...	...	...	...	...	...	...	...	...	...
Artificial flowers ...	4	...	28	...	...	...	...	...	...	2	2	...	1	...	...
Fur pulling ...	2	19	...	...	...	...	...	...	...	...	...	...	...	...	...
Umbrellas ...	...	...	...	...	...	...	...	...	...	2	2	...	...	...	...
Paper bags and boxes ...	16	...	134	5	...	65	...	...	...	20	20	...	3	...	...
Brush making...	...	...	...	...	...	...	...	...	...	2	2	...	...	...	...
Xmas Crackers ...	...	...	...	...	...	...	...	...	...	4	4	...	...	...	...
Leather Goods ...	2	...	26	1	...	4	...	...	...	3	3	...	...	...	...
Carding of Buttons ...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...
TOTALS ...	68	82	681	12	4	124	...	...	...	69	69	...	11	...	...

(a) There were no names and addresses of outworkers received in respect to the following classes of work :—Sacks, basket making, mats other than wire nets, racquet and tennis balls, stuffed toys, file making, electro plate, cables and chains, anchors and grapnels, cart gear, locks, latches and keys, pea picking, household linen, lace, lace curtains and nets, curtains and furniture hangings, brass and brass articles, tents, and feather sorting.

(b) The figures in columns 2, 3 and 4 are the total number of lists received from employers who sent them both for February and August, and of the entries of names of outworkers in those lists. They are therefore double the number of employers and approximately double the number of individual workers whose names are given, since in the February and August lists of the same employers, the same outworker's name will often be repeated.

Communications were received from various sanitary authorities relating to some 1,291 outworkers for firms outside Shoreditch and as 21 of these were residents in other Boroughs, their addresses were forwarded to the authorities concerned. The following table shows the numbers of addresses of outworkers received from the sanitary authorities referred to during 1930.

SHOWING THE NUMBERS OF OUTWORKERS RECEIVED FROM OTHER DISTRICTS DURING 1930.

DISTRICTS.	Making Wearing Apparel.		Toys and Crackers.		Artificial Flowers.		Furniture and Upholstery.		Fur Pulling.		Lace Curtains.		Umbrellas, &c.		Paper Bags and Boxes.		Brush Making.		Fancy Leather Goods.		Card Mounting.		Sponges.		TOTALS.
	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	
Battersea ...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Bermondsey ...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Bethnal Green ...	39	40	14	20	1	...	2	...	...	...	...	...	...	...	26	19	7	9	...	...	...	...	...	...	177
Camberwell ...	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4
City of London ...	178	191	3	...	3	...	...	...	6	7	...	...	27	19	1	...	...	...	2	3	...	...	...	...	440
Croydon ...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Deptford ...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Edmonton ...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Finsbury ...	62	68	9	10	7	2	1	1	...	2	...	...	6	2	34	40	...	...	6	5	5	4	...	...	264
Hackney ...	85	79	4	7	3	...	2	2	...	2	...	...	1	1	16	26	6	5	...	...	...	...	...	...	239
Hammersmith ...	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4
Hampstead ...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Holborn ...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4
Hornsey ...	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4
Poplar ...	2	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5
Islington ...	19	13	4	4	2	1	...	...	...	...	...	...	...	...	2	7	...	...	...	...	...	...	...	...	52
Kingston ...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Leyton ...	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	4
Southwark ...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
St. Marylebone ...	3	3	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	7
Stepney ...	7	14	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	24
St. Pancras ...	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Stoke Newington ...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	9	...	...	...	...	...	...	...	...	...	12
Tottenham ...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Westminster ...	18	15	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	33
TOTALS ...	430	448	34	42	16	3	5	3	6	12	...	...	34	22	88	95	14	14	8	8	5	4	...	...	1,291
	878		76		19		8		18		...		56		183		28		16		9		...		

The total number of outworkers reported was 2,182, and of these some 1,509 were residents in Shoreditch. These figures are below the average for the past five years.

As pointed out in previous reports, in numerous instances names and addresses of outworkers are duplicated owing to lists being sent in twice a year, and in some cases the same outworkers are employed by more than one firm, so that the numbers given above must not be taken as representing the actual numbers of individual outworkers and the tables on pages 56 and 57 show the distribution of outworkers as regards trades in the Borough. Most of them are engaged in work connected with the making of wearing apparel, artificial flowers, paper bags and boxes, umbrellas, toys and crackers.

Some 706 visits of inspection were made to places where home-work was being carried on, and in connection with these 69 sanitary notices were served. The cases of notifiable infectious disease occurring at outworkers' premises numbered 11 and included 5 smallpox, 5 scarlet fever and 1 diphtheria. The usual steps were taken in connection with them by the officers of the sanitary authority.

LEGAL PROCEEDINGS.

The following is a full list of legal proceedings instituted during the year under report :—

PUBLIC HEALTH (LONDON) ACT, 1891, AND BYE-LAWS.

Date.	Nature of Offence.	Fine.	Costs.	Remarks.
		£ s. d.	£ s. d.	
Jan. 3	Non - compliance with Statutory Notice, 61, Grange Street.	—	2 2 0	Notice complied with prior to hearing.
Jan. 10	Non - compliance with Statutory Notice, 71, Grange Street.	—	1 1 0	Notice complied with prior to hearing.
Jan. 10	Non - compliance with Statutory Notice, 71, Grange Street.	—	1 1 0	Notice complied with prior to hearing.
Jan. 31	Fixing a soil pipe in connection with W.C. at 56, Shaftesbury Street without notice.	—	2 2 0	—
Feb. 7	Non - compliance with Statutory Notice, 18, Laburnum Street.	—	2 2 0	Magistrate's Order for Notice to be complied with within 14 days.
Feb. 21	Non - compliance with Statutory Notice, 6, Witham Street.	—	—	Magistrate's Order for Notice to be complied with within 14 days.

Date.	Nature of Offence.	Fine.			Costs.			Remarks.
		£	s.	d.	£	s.	d.	
Feb. 21	Non - compliance with Statutory Notice, 130, Bridport Place.	2	0	0	2	2	0	—
Feb. 27	Non - compliance with Statutory Notice, 5, Norris Street.	—			1	1	0	Notice complied with prior to hearing.
Feb. 27	Non - compliance with Statutory Notice, 21, Norris Street.	—			1	1	0	Notice complied with prior to hearing.
Mar. 7	Non - compliance with Statutory Notice, 46, Wilson Street.	—			2	2	0	Notice complied with prior to hearing.
Mar. 7	Non - compliance with Statutory Notice, 66, Gopsall Street.	5	0	0	2	2	0	—
Mar. 14	Fixing a W.C. pan and trap at 60, Grange Street without notice.	1	0	0	2	2	0	—
Mar. 21	Fixing a W.C. pan and trap at 22, Victoria Chambers, Paul Street, without notice.	—			—			—
Mar. 21	Non - compliance with Statutory Notice, 3, Felton Street.	1	0	0	2	2	0	—
Apr. 11	Non - compliance with Statutory Notice, 42, Charles Square.	—			2	2	0	Magistrate's Order for Notice to be complied with within 14 days.
Apr. 25	Non - compliance with terms of Magistrate's Order, 6, Witham Street.	5	0	0	—			Nuisance Order to continue.
Apr. 25	Non - compliance with Statutory Notice, 10, Wareham Street.	—			1	1	0	Notice complied with prior to hearing.
May 2	Non - compliance with Statutory Notice, 165, New North Road.	—			2	2	0	Magistrate's Order for Notice to be complied with within 7 days.
May 16	Non - compliance with terms of Magistrate's Order, 42, Charles Square.	2	0	0	2	2	0	—
May 16	Non - compliance with Statutory Notice, 42, Charles Square.	—			2	2	0	Notice complied with prior to hearing.
May 16	Removal of offensive matter by road during prohibited hours.	—			—			Dismissed under Probation of Offenders Act.
June 6	Non - compliance with Statutory Notice, 64, Gopsall Street.	—			1	1	0	Magistrate's Order for Notice to be complied with within 7 days.

File	Name of Owner	Time	Costs	Remarks
File 1	Wm. Chapman & Son Stationery Notice 101 Market Street	1 2 0	1 3 0	Master's Order for Notice to be complied with within 24 days
File 11	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 21	Wm. Chapman & Son Stationery Notice 101 Market Street	—	—	Master's Order for Notice to be complied with within 24 days
File 31	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 41	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 51	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 61	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 71	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 81	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 91	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 101	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 111	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 121	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 131	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 141	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 151	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 161	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 171	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 181	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 191	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days
File 201	Wm. Chapman & Son Stationery Notice 101 Market Street	—	1 2 0	Master's Order for Notice to be complied with within 24 days

Date.	Nature of Offence.	Fine.	Costs.	Remarks.
July 4	Non - compliance with Statutory Notice, 151, Hackney Road.	£ s. d. —	£ s. d. 1 3 0	Magistrate's Order for Notice to be complied with within 28 days.
July 11	Non - compliance with Statutory Notice, 93, Brunswick Street.	—	2 2 0	Magistrate's Order for Notice to be complied with within 21 days.
July 25	Non - compliance with Statutory Notice, 34A, Scrutton Street.	—	—	Magistrate's Order for Notice to be complied with within 7 days.
Aug. 29	Non - compliance with Statutory Notice, 62, Grange Street.	—	2 2 0	Notice complied with prior to hearing.
Sept. 5	Non - compliance with Statutory Notice, 33, Anning Street.	—	2 2 0	Adjourned <i>sine die</i> .
Sept. 5	Non - compliance with terms of Magistrate's Order, 151, Hackney Road.	5 0 0	2 2 0	—
Sept. 5	Non - compliance with terms of Magistrate's Order, 93, Brunswick Street.	5 0 0	2 2 0	—
Sept. 12	Non - compliance with Statutory Notice, 42, Grange Street.	—	1 3 0	Notice complied with prior to hearing.
Oct. 10	Non - compliance with Statutory Notice, 66, Gopsall Street.	—	2 2 0	Notice complied with prior to hearing.
Oct. 10	Fixing a W.C. pan at 1 to 3, Penn Street without notice.	1 1 0	2 2 0	—
Oct. 31	Non - compliance with Statutory Notice, 20, Whiston Street.	—	2 2 0	Magistrate's Order for Notice to be complied with within 28 days.
Oct. 31	Non - compliance with Statutory Notice, 22, Whiston Street.	—	2 2 0	Magistrate's Order for Notice to be complied with within 28 days.
Oct. 31	Non - compliance with Statutory Notice, 49, Grange Street.	—	2 2 0	Notice complied with prior to hearing.
Oct. 31	Non - compliance with Statutory Notice, 32, Grange Street.	—	1 0 0	Notice complied with prior to hearing.
Nov. 14	Non - compliance with Statutory Notice, 56, Grange Street.	—	1 1 0	Notice complied with prior to hearing.
Nov. 14	Non - compliance with Statutory Notice, 133, St. John's Road.	—	2 2 0	Notice complied with prior to hearing.

Date	Nature of Offense	Fine	Costs	Remarks
Nov 25	Having 20 lbs of corn at 30¢ withheld from the street for the purpose of sale, which was removed and sold for the food of man.	10 0 0	5 0 0	—
Dec 10	Non-compliance with Statutory Notice.	—	1 1 0	Magistrate's Order for Notice to be complied with within 14 days.
Dec 10	Non-compliance with Statutory Notice.	—	1 1 0	Magistrate's Order for Notice to be complied with within 14 days.
Dec 12	Non-compliance with Statutory Notice.	2 0 0	0 10 0	—
Dec 12	Non-compliance with Statutory Notice.	2 0 0	0 10 0	—

FOOD AND DRUG (AMULGATION) ACT, 1925.
 PUBLIC HEALTH (REGISTRATION) ETC. IN FOOD (REGISTRATION) 1925 IN 1921.
 MUM AND DRUGS ORDER, 1925.
 17th March 1921 (MUM) REGISTRATIONS, 1921.

Jan 12	Having 20 lbs of corn at 30¢ withheld from the street for the purpose of sale, which was removed and sold for the food of man.	10 0 0	—	—
Jan 25	Having 20 lbs of corn at 30¢ withheld from the street for the purpose of sale, which was removed and sold for the food of man.	10 0 0	—	—
May 2	Having 20 lbs of corn at 30¢ withheld from the street for the purpose of sale, which was removed and sold for the food of man.	—	2 2 0	Dismissed under Pro- vision of Offenders Act.
May 25	Having 20 lbs of corn at 30¢ withheld from the street for the purpose of sale, which was removed and sold for the food of man.	—	2 10 0	—
June 2	Having 20 lbs of corn at 30¢ withheld from the street for the purpose of sale, which was removed and sold for the food of man.	—	1 1 0	—
June 12	Having 20 lbs of corn at 30¢ withheld from the street for the purpose of sale, which was removed and sold for the food of man.	1 0 0	2 2 0	—
June 25	Having 20 lbs of corn at 30¢ withheld from the street for the purpose of sale, which was removed and sold for the food of man.	—	1 0 0	—
June 30	Having 20 lbs of corn at 30¢ withheld from the street for the purpose of sale, which was removed and sold for the food of man.	—	2 0 0	—
July 1	Having 20 lbs of corn at 30¢ withheld from the street for the purpose of sale, which was removed and sold for the food of man.	—	2 2 0	—

Date.	Nature of Offence.	Fine.	Costs.	Remarks.
Nov. 25	Having 20 lbs. of currants at 39, Pitfield Street deposited for the purpose of sale, which were unsound and unfit for the food of man.	£ 10 s. 0 d.	£ 5 s. 0 d.	—
Dec. 10	Non - compliance with Statutory Notice, 1, Ilva Place.	—	1 1 0	Magistrate's Order for Notice to be complied with within 14 days.
Dec. 10	Non - compliance with Statutory Notice, 1, Ilva Place.	—	1 1 0	
Dec. 12	Non - compliance with terms of Magistrate's Order, 20, Whiston Street.	2 0 0	0 10 0	—
Dec. 12	Non - compliance with terms of Magistrate's Order, 22, Whiston Street.	2 0 0	0 10 0	—

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD) REGULATIONS, 1925 TO 1927.

MILK AND DAIRIES ORDER, 1926.

PUBLIC HEALTH (MEAT) REGULATIONS, 1924.

Jan. 17	Failure to cover stall in proper manner.	1 10 0	—	—
Jan. 22	Filling milk bottles in street.	0 10 0	—	—
May 9	Selling milk not of the nature, substance and quality demanded by the purchaser.	—	3 3 0	Dismissed under Probation of Offenders Act.
May 23	do. do.	—	2 10 0	
June 6	Selling beef sausages not labelled in accordance with the Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1927.	—	1 1 0	—
June 13	Selling milk not of the nature, substance and quality demanded by the purchaser.	1 0 0	3 3 0	—
June 20	do. do.	—	1 0 0	—
June 20	do. do.	—	5 0 0	—
July 4	do. do.	—	2 2 0	—

Date	Nature of Offense	Fine	Costs	Remarks
July 1	Selling milk not of the nature submitted and quality demanded by the purchaser.	—	2 2 0	—
July 18	do do	—	2 2 0	—
Aug 1	do do	0 2 0	1 8 0	—
Oct 17	Selling whiskey not of the nature submitted and quality demanded by the purchaser.	—	2 4 0	Placed under Pro- hibition of Offenders Act.
Oct 18	Selling milk bottled in street.	0 10 0	—	—
Oct 20	Selling milk not of the nature submitted and quality demanded by the purchaser.	—	2 4 0	Placed under Pro- hibition of Offenders Act.
Oct 21	Selling pork sausage not labeled in accord- ance with the label Health Department Act in force from June 1922 to 1927.	0 10 0	1 10 0	—
Oct 21	Selling pork sausage not labeled in accord- ance with the label Health Department Act in force from June 1922 to 1927.	0 10 0	1 10 0	—
Nov 1	Selling bread and butter which was not of the nature and quality demanded by the pur- chaser.	2 0 0	2 4 0	—
Nov 2	Selling milk bottled in street.	0 10 0	—	—
Nov 23	Selling vinegar not of the nature submitted and quality demanded by the purchaser.	—	2 4 0	—
Jan 24	Doing in violation of reg. book which did not conform to standard.	—	4 4 0	—
Apr 1	Doing in violation of reg. book in the use of the purpose of making articles of adornment which did not conform to standard.	10 0 0	2 4 0	—

Not From Acts 1911 and 1922

Date.	Nature of Offence.	Fine.	Costs.	Remarks.
July 4	Selling milk not of the nature, substance and quality demanded by the purchaser.	£ s. d. —	£ s. d. 2 2 0	—
July 18	do. do.	—	2 2 0	—
Aug. 1	do. do.	0 2 0	1 8 0	—
Oct. 17	Selling whiskey not of the nature, substance and quality demanded by the purchaser.	—	3 3 0	Dismissed under Probation of Offenders Act.
Oct. 17	Filling milk bottles in street.	0 10 0	—	—
Oct. 20	Selling gin not of the nature, substance and quality demanded by the purchaser.	—	3 3 0	Dismissed under Probation of Offenders Act.
Oct. 24	Selling pork sausages not labelled in accordance with the Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1927.	0 10 0	1 10 0	—
Oct. 24	Selling beef sausages not labelled in accordance with the Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1927.	0 10 0	1 10 0	—
Nov. 14	Selling bread and butter which was not of the nature, substance and quality demanded by the purchaser.	2 0 0	3 3 0	—
Nov. 28	Filling milk bottles in street.	0 15 0	—	—
Dec. 29	Selling vinegar not of the nature, substance and quality demanded by the purchaser.	—	2 2 0	—

RAG FLOCK ACTS, 1911 AND 1928.

Feb. 14	Being in possession of rag flock which did not conform to standard.	—	4 4 0	—
Apr. 4	Being in possession of rag flock to be used for the purpose of making articles of upholstery which did not conform to standard.	10 0 0	5 5 0	—

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1912.
SUMMARY OF NOTIFICATIONS DURING THE PERIOD FROM THE 29TH DECEMBER, 1929, TO THE
27TH DECEMBER, 1930, IN THE METROPOLITAN BOROUGH OF SHOREDITCH.

Age-periods.	Notifications on Form A. (By Doctor who takes diagnosis.)													Notifications on Form B. (By School Medical Inspector.)					Number of Notifications on Form C. (of admission of case to Institution).		Number of Notifications on Form D. (of discharge of case from Institution).			
	Number of Primary Notifications * of new cases of Tuberculosis †.													Number of Primary Notifications * of new cases of Tuberculosis †.					Total Notifica- tions on Form B.		Poor Law Insti- tutions.	Sana- toria.	Poor Law Insti- tutions.	Sana- toria.
	0 to 1.	1 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 and upwards.	Total (all ages).	Total Notifications on Form A.	Under 5.	5 to 10.	10 to 15.	Total 0-15.							
Pulmonary, Males	3	2	5	9	13	13	23	23	10	...	101	175	...	...	...	...	...	45	84	32	57	
„ Females	6	7	10	11	18	16	4	4	...	76	119	...	...	...	...	...	24	57	16	58		
Non-pulmonary, Males	3	7	1	1	1	3	1	...	...	...	17	21	...	...	...	...	...	2	27	...	18	
„ Females...	...	3	6	6	1	3	1	2	...	1	...	23	30	...	...	...	...	...	1	14	1	15
Cols. (1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)		

Patients notified as suffering from both pulmonary and non-pulmonary disease are included among the "pulmonary" returns only.

* Primary notifications relate to patients who have never previously been notified, either on Form A or on Form B, in the Sanitary District in which the case was notified in 1930. Any additional notification of a case which has been previously notified in the same Sanitary District is regarded as duplicate.

† Cols. 2-13 and 15-18. Only those cases which have been notified for the first time during the year on Form A or on Form B in Shoreditch, and which have not been brought to the notice of the M.O.H. in a previous year otherwise than through formal notification, are included in Cols. 2-13, or 15-18, respectively.

Notifications of tuberculosis which are made by Naval, Military, or Air Force medical authorities in pursuance of §5 (b) of the Local Government (Emergency Provisions) Act, 1916, are included in the Table above as if they were notifications made on Form A.

Col. 14. All notifications on Form A, whether duplicate or not, are included in this column.

Col. 19. All notifications which have been made during the year on Form B in Shoreditch, whether the cases have previously been notified in the area or not, either on Form A or on Form B, are included in this column.

The particulars of the notifications received during the year are given in the following summary:—

V.—TUBERCULOSIS.

Particulars of new cases coming to the knowledge of the Medical Officer of Health are given in Supplementary Returns made to the Ministry of Health, viz.:-

Period	Age Periods										Total Cases
	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45-65	65 and upwards	
Pneumonia—											
Males	—	—	—	—	1	1	1	1	—	4	9
Females	—	—	—	—	1	—	—	—	—	—	3
Non-Pneumonia—											
Males	1	—	—	—	—	1	—	—	—	—	3
Females	—	—	—	—	—	—	—	—	1	—	5

Source of Information	No. of Cases	
	Pneumonia	Non-Pneumonia
From Local Registrar	8	4
Death Notices	1	2
General Notices	—	—
From other Agencies (other than Registrar)	2	1
From I and II (in respect of cases not previously known to M.O.H.)	—	—
Other sources (if any)	—	—

The number of cases removed from the Information Register during the year was 507. The particulars of these cases are as follows:-

Cases removed from Register as cured	55
Patients removed from Hospital	18
Deaths	107

The following comparative figures for recent years show that tuberculosis is becoming less prevalent in Shropshire:-

Year	Total Number of Notifications per 1,000 Inhabitants		
	Pneumonia	Non-Pneumonia	All forms
1930	217	1.8	217
1929	231	2.0	233
1928	227	2.0	229
1927	208	1.8	210
1926	207	2.1	209
1925	203	2.2	205
1924	208	2.0	210
1923	203	2.2	205
1922	220	2.1	222
1921	222	2.1	224
1920	207	2.0	209
1919	203	2.0	205

Particulars of new cases coming to the knowledge of the Medical Officer of Health are given in Supplementary Returns made to the Ministry of Health, viz. :—

Aged Periods.	0 to 1.	1 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 and up- wards.	Total Cases.
Pulmonary—												
Males ...	—	—	—	—	—	1	2	1	1	—	4	9
Females ...	—	—	1	—	1	1	—	—	—	—	—	3
Non-Pulmonary—												
Males ...	1	1	—	—	—	1	—	—	—	—	—	3
Females ...	—	1	—	1	1	—	—	—	1	1	—	5

Source of Information.	No. of Cases.	
	Pulmonary.	Non-Pulmonary.
Death Returns { from Local Registrars... ..	8	4
{ transferable Deaths from Registrar-General	1	3
Posthumous notifications	—	—
"Transfers" from other Areas (other than transferable deaths)	3	1
Forms C and D (in respect of cases not previously known to M.O.H.)	—	—
Other sources (if any)	—	—

The number of cases removed from the Tuberculosis Register during the year was 265. The particulars of these cases are as follows :—

Deaths	107
Patients removed from Borough	73
Cases removed from Register as cured	85

The following comparative figures for recent years show that tuberculosis is becoming less prevalent in Shoreditch :—

Year.	Total Number Primary Notifications.	Notifications per 1,000 Inhabitants.		
		Pulmonary.	Non-Pulmonary.	All forms.
1919	503	4.0	1.1	5.1
1920	303	2.8	0.2	3.0
1921	265	2.1	0.4	2.5
1922	287	2.1	0.6	2.7
1923	259	2.1	0.3	2.4
1924	266	2.0	0.4	2.4
1925	303	2.2	0.7	2.9
1926	287	2.1	0.6	2.7
1927	238	1.8	0.5	2.3
1928	257	2.0	0.6	2.6
1929	251	2.2	0.4	2.6
1930	217	1.8	0.4	2.2

31st August, 1931.

Respected Sir, (Ref. No. 1115 736/4002)
 I have to inform you that the new cases of
 this disease during 1930 were as follows:

Total	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
1	1	-	-	-	-	-	1	-
2	1	-	-	-	-	-	1	-
3	1	-	-	-	-	-	1	-
4	-	-	-	-	-	-	-	-
5	1	-	-	-	-	-	-	-
6	1	-	-	-	-	-	-	-
7	1	-	-	-	-	-	-	-
8	1	-	-	-	-	-	-	-
9	1	-	-	-	-	-	-	-
10	1	-	-	-	-	-	-	-
11	1	-	-	-	-	-	-	-
12	1	-	-	-	-	-	-	-
13	1	-	-	-	-	-	-	-
14	1	-	-	-	-	-	-	-
15	1	-	-	-	-	-	-	-
16	1	-	-	-	-	-	-	-
17	1	-	-	-	-	-	-	-
18	1	-	-	-	-	-	-	-
19	1	-	-	-	-	-	-	-
20	1	-	-	-	-	-	-	-
21	1	-	-	-	-	-	-	-
22	1	-	-	-	-	-	-	-
23	1	-	-	-	-	-	-	-
24	1	-	-	-	-	-	-	-
25	1	-	-	-	-	-	-	-
26	1	-	-	-	-	-	-	-
27	1	-	-	-	-	-	-	-
28	1	-	-	-	-	-	-	-
29	1	-	-	-	-	-	-	-
30	1	-	-	-	-	-	-	-
31	1	-	-	-	-	-	-	-
32	1	-	-	-	-	-	-	-
33	1	-	-	-	-	-	-	-
34	1	-	-	-	-	-	-	-
35	1	-	-	-	-	-	-	-
36	1	-	-	-	-	-	-	-
37	1	-	-	-	-	-	-	-
38	1	-	-	-	-	-	-	-
39	1	-	-	-	-	-	-	-
40	1	-	-	-	-	-	-	-
41	1	-	-	-	-	-	-	-
42	1	-	-	-	-	-	-	-
43	1	-	-	-	-	-	-	-
44	1	-	-	-	-	-	-	-
45	1	-	-	-	-	-	-	-
46	1	-	-	-	-	-	-	-
47	1	-	-	-	-	-	-	-
48	1	-	-	-	-	-	-	-
49	1	-	-	-	-	-	-	-
50	1	-	-	-	-	-	-	-
51	1	-	-	-	-	-	-	-
52	1	-	-	-	-	-	-	-
53	1	-	-	-	-	-	-	-
54	1	-	-	-	-	-	-	-
55	1	-	-	-	-	-	-	-
56	1	-	-	-	-	-	-	-
57	1	-	-	-	-	-	-	-
58	1	-	-	-	-	-	-	-
59	1	-	-	-	-	-	-	-
60	1	-	-	-	-	-	-	-
61	1	-	-	-	-	-	-	-
62	1	-	-	-	-	-	-	-
63	1	-	-	-	-	-	-	-
64	1	-	-	-	-	-	-	-
65	1	-	-	-	-	-	-	-
66	1	-	-	-	-	-	-	-
67	1	-	-	-	-	-	-	-
68	1	-	-	-	-	-	-	-
69	1	-	-	-	-	-	-	-
70	1	-	-	-	-	-	-	-
71	1	-	-	-	-	-	-	-
72	1	-	-	-	-	-	-	-
73	1	-	-	-	-	-	-	-
74	1	-	-	-	-	-	-	-
75	1	-	-	-	-	-	-	-
76	1	-	-	-	-	-	-	-
77	1	-	-	-	-	-	-	-
78	1	-	-	-	-	-	-	-
79	1	-	-	-	-	-	-	-
80	1	-	-	-	-	-	-	-
81	1	-	-	-	-	-	-	-
82	1	-	-	-	-	-	-	-
83	1	-	-	-	-	-	-	-
84	1	-	-	-	-	-	-	-
85	1	-	-	-	-	-	-	-
86	1	-	-	-	-	-	-	-
87	1	-	-	-	-	-	-	-
88	1	-	-	-	-	-	-	-
89	1	-	-	-	-	-	-	-
90	1	-	-	-	-	-	-	-
91	1	-	-	-	-	-	-	-
92	1	-	-	-	-	-	-	-
93	1	-	-	-	-	-	-	-
94	1	-	-	-	-	-	-	-
95	1	-	-	-	-	-	-	-
96	1	-	-	-	-	-	-	-
97	1	-	-	-	-	-	-	-
98	1	-	-	-	-	-	-	-
99	1	-	-	-	-	-	-	-
100	1	-	-	-	-	-	-	-

The ratio of non-notified tuberculosis deaths to total
 for the year 1930 was 1 in 6.

There is no evidence of excessive incidence of, or mortality
 in any particular occupation is ascertained.

Yours faithfully,

Medical Officer of Health.

of Health.

31st August, 1931.

Sir,

As requested in Memorandum (ref.No. 111a 736/4002) dated 31st July, I have to inform you that the new cases of tuberculosis and deaths from this disease during 1930 were as follows:

Age Periods,	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
.....	-	-	1	-	-	-	1	-
.....	3	-	4	4	-	-	1	2
.....	2	7	7	6	-	-	1	-
.....	5	7	1	7	-	-	-	-
.....	9	11	1	2	2	6	-	1
.....	14	12	2	3	5	8	1	-
.....	15	18	3	1	9	5	2	-
.....	24	16	1	2	8	3	1	-
.....	24	4	-	1	16	5	-	1
.....	10	4	-	2	10	4	-	1
and upwards	4	-	-	-	6	-	-	-
	110	79	20	28	56	31	7	5

The ratio of non-notified tuberculosis deaths to total tuberculosis for the year 1930 was 1 in 6.

There is no evidence of excessive incidence of, or mortality tuberculosis in any particular occupation in Shoreditch.

Yours faithfully,

Medical Officer of Health.

Secretary,
Ministry of Health,
Whitehall, S.W.

The distribution of the cases notified among the different Wards was

Ward	Pulmonary	Non-Pulmonary	Total	Per 1,000 Inhabitants
1	1	1	2	1.0
2	46	10	56	2.2
3	20	1	21	2.3
4	22	12	34	2.3
5	23	6	29	1.7
6	11	4	15	1.3
7	12	3	15	1.1
8	10	1	11	1.6
Total	177	40	217	

The additions to and removals from the Tuberculosis Register during the

TABLE III.—TUBERCULOSIS (REGISTRATION) 1934

Ward	Pulmonary		Non-Pulmonary		Total Cases
	Male	Female	Male	Female	
1	1	1	1	1	2
2	46	10	56	2.2	56
3	20	1	21	2.3	21
4	22	12	34	2.3	34
5	23	6	29	1.7	29
6	11	4	15	1.3	15
7	12	3	15	1.1	15
8	10	1	11	1.6	11
Total	177	40	217		217

1934	177	40	217	1.93
1933	101	20	121	1.7
1932	9	3	12	2.0
Total	287	63	350	2.13

1934	177	40	217	1.93
1933	101	20	121	1.7
1932	9	3	12	2.0
Total	287	63	350	2.13

The distribution of the cases notified among the different Wards was as follows:—

Ward.	Pulmonary.	Non-Pulmonary.	Total.	No. per 1,000 inhabitants.
Moorfields ...	4	...	4	1.0
Church ...	46	10	56	3.2
Hoxton ...	36	1	37	2.5
Wenlock ...	22	12	34	2.5
Whitmore ...	23	6	29	1.7
Kingsland ...	11	4	15	1.5
Haggerston ...	19	3	22	2.1
Acton ...	16	4	20	1.8
Total ...	177	40	217	—

The additions to, and removals from, the Tuberculosis Register during the year were as follows:—

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1924.

	Pulmonary.			Non-Pulmonary.			Total Cases.
	Males.	Females.	Total.	Males.	Females.	Total.	
Number of cases on the Tuberculosis Register, 31st December, 1929 ...	732	662	1,394	284	217	501	1,895
Number of cases notified under the Public Health (Tuberculosis) Regulations, 1912, during the year 1930 ...	101	76	177	17	23	40	217
Other cases added to the Tuberculosis Register during 1930 ...	9	3	12	3	5	8	20
Total ...	842	741	1,583	304	245	549	2,132
Cases removed from Tuberculosis Register during 1930 ...	102	66	168	48	49	97	265
Cases remaining on Tuberculosis Register 31st December, 1930 ...	740	675	1,415	256	196	452	1,867

The deaths from Tuberculosis, which numbered 100 are classified
DEATHS FROM TUBERCULOSIS IN

	AGES.												
	Under 1 year.	1 to 2 years.	2 to 5 "	5 to 10 "	10 to 15 "	15 to 20 "	20 to 25 "	25 to 35 "	35 to 45 "	45 to 55 "	55 to 65 "	65 to 75 "	75 and upwards.
All forms	2	1	2	2	...	9	13	17	11	22	15	4	2
Respiratory system ...	...	...	...	...	...	8	12	16	10	21	14	4	2
Central nervous system ...	...	1	2	2	...	1	1	...	...	...	...	...	...
Intestines and peritæum...	...	...	...	...	...	...	...	1	...	...	...	...	...
Vertebral column ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Joints ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...
Skin and subcutaneous tissue ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...
Bones (Vertebral column excepted) ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lymphatic system (abdominal glands excepted) ...	...	...	...	...	...	...	...	...	...	...	1	...	...
Genito-urinary system ...	...	...	...	...	...	...	...	...	1	...	...	...	...
Other sites ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...
Disseminated Tuberculosis—													
Acute... ..	2	...	...	...	...	...	...	...	...	...	...	...	...
Chronic or unstated...	...	...	...	...	...	...	...	...	...	1	...	...	...

The death rates from Pulmonary and Non-Pulmonary Tuberculosis for 1930 in London and Shoreditch are compared in the following table :—

	Deaths per 1,000 population.			Percentage of total mortality caused by Tuberculosis.		
	Pulmonary	Non-Pulmonary	All forms	Pulmonary	Non-Pulmonary	All forms
Shoreditch ...	0·88	0·13	1·0	7·20	1·08	8·28
London ...	0·85	0·12	0·96	7·31	1·01	8·32

as is shown of cases and ward in the following table.

THE BOROUGH DURING 1930.

DEATHS IN EACH WARD										DEATHS			
Ward	1	2	3	4	5	6	7	8	9	10	11	12	13
1	1	1	1	1	1	1	1	1	1	1	1	1	1
2	1	1	1	1	1	1	1	1	1	1	1	1	1
3	1	1	1	1	1	1	1	1	1	1	1	1	1
4	1	1	1	1	1	1	1	1	1	1	1	1	1
5	1	1	1	1	1	1	1	1	1	1	1	1	1
6	1	1	1	1	1	1	1	1	1	1	1	1	1
7	1	1	1	1	1	1	1	1	1	1	1	1	1
8	1	1	1	1	1	1	1	1	1	1	1	1	1
9	1	1	1	1	1	1	1	1	1	1	1	1	1
10	1	1	1	1	1	1	1	1	1	1	1	1	1
11	1	1	1	1	1	1	1	1	1	1	1	1	1
12	1	1	1	1	1	1	1	1	1	1	1	1	1
13	1	1	1	1	1	1	1	1	1	1	1	1	1
14	1	1	1	1	1	1	1	1	1	1	1	1	1
15	1	1	1	1	1	1	1	1	1	1	1	1	1
16	1	1	1	1	1	1	1	1	1	1	1	1	1
17	1	1	1	1	1	1	1	1	1	1	1	1	1
18	1	1	1	1	1	1	1	1	1	1	1	1	1
19	1	1	1	1	1	1	1	1	1	1	1	1	1
20	1	1	1	1	1	1	1	1	1	1	1	1	1
21	1	1	1	1	1	1	1	1	1	1	1	1	1
22	1	1	1	1	1	1	1	1	1	1	1	1	1
23	1	1	1	1	1	1	1	1	1	1	1	1	1
24	1	1	1	1	1	1	1	1	1	1	1	1	1
25	1	1	1	1	1	1	1	1	1	1	1	1	1
26	1	1	1	1	1	1	1	1	1	1	1	1	1
27	1	1	1	1	1	1	1	1	1	1	1	1	1
28	1	1	1	1	1	1	1	1	1	1	1	1	1
29	1	1	1	1	1	1	1	1	1	1	1	1	1
30	1	1	1	1	1	1	1	1	1	1	1	1	1
31	1	1	1	1	1	1	1	1	1	1	1	1	1
32	1	1	1	1	1	1	1	1	1	1	1	1	1
33	1	1	1	1	1	1	1	1	1	1	1	1	1
34	1	1	1	1	1	1	1	1	1	1	1	1	1
35	1	1	1	1	1	1	1	1	1	1	1	1	1
36	1	1	1	1	1	1	1	1	1	1	1	1	1
37	1	1	1	1	1	1	1	1	1	1	1	1	1
38	1	1	1	1	1	1	1	1	1	1	1	1	1
39	1	1	1	1	1	1	1	1	1	1	1	1	1
40	1	1	1	1	1	1	1	1	1	1	1	1	1
41	1	1	1	1	1	1	1	1	1	1	1	1	1
42	1	1	1	1	1	1	1	1	1	1	1	1	1
43	1	1	1	1	1	1	1	1	1	1	1	1	1
44	1	1	1	1	1	1	1	1	1	1	1	1	1
45	1	1	1	1	1	1	1	1	1	1	1	1	1
46	1	1	1	1	1	1	1	1	1	1	1	1	1
47	1	1	1	1	1	1	1	1	1	1	1	1	1
48	1	1	1	1	1	1	1	1	1	1	1	1	1
49	1	1	1	1	1	1	1	1	1	1	1	1	1
50	1	1	1	1	1	1	1	1	1	1	1	1	1
51	1	1	1	1	1	1	1	1	1	1	1	1	1
52	1	1	1	1	1	1	1	1	1	1	1	1	1
53	1	1	1	1	1	1	1	1	1	1	1	1	1
54	1	1	1	1	1	1	1	1	1	1	1	1	1
55	1	1	1	1	1	1	1	1	1	1	1	1	1
56	1	1	1	1	1	1	1	1	1	1	1	1	1
57	1	1	1	1	1	1	1	1	1	1	1	1	1
58	1	1	1	1	1	1	1	1	1	1	1	1	1
59	1	1	1	1	1	1	1	1	1	1	1	1	1
60	1	1	1	1	1	1	1	1	1	1	1	1	1
61	1	1	1	1	1	1	1	1	1	1	1	1	1
62	1	1	1	1	1	1	1	1	1	1	1	1	1
63	1	1	1	1	1	1	1	1	1	1	1	1	1
64	1	1	1	1	1	1	1	1	1	1	1	1	1
65	1	1	1	1	1	1	1	1	1	1	1	1	1
66	1	1	1	1	1	1	1	1	1	1	1	1	1
67	1	1	1	1	1	1	1	1	1	1	1	1	1
68	1	1	1	1	1	1	1	1	1	1	1	1	1
69	1	1	1	1	1	1	1	1	1	1	1	1	1
70	1	1	1	1	1	1	1	1	1	1	1	1	1
71	1	1	1	1	1	1	1	1	1	1	1	1	1
72	1	1	1	1	1	1	1	1	1	1	1	1	1
73	1	1	1	1	1	1	1	1	1	1	1	1	1
74	1	1	1	1	1	1	1	1	1	1	1	1	1
75	1	1	1	1	1	1	1	1	1	1	1	1	1
76	1	1	1	1	1	1	1	1	1	1	1	1	1
77	1	1	1	1	1	1	1	1	1	1	1	1	1
78	1	1	1	1	1	1	1	1	1	1	1	1	1
79	1	1	1	1	1	1	1	1	1	1	1	1	1
80	1	1	1	1	1	1	1	1	1	1	1	1	1
81	1	1	1	1	1	1	1	1	1	1	1	1	1
82	1	1	1	1	1	1	1	1	1	1	1	1	1
83	1	1	1	1	1	1	1	1	1	1	1	1	1
84	1	1	1	1	1	1	1	1	1	1	1	1	1
85	1	1	1	1	1	1	1	1	1	1	1	1	1
86	1	1	1	1	1	1	1	1	1	1	1	1	1
87	1	1	1	1	1	1	1	1	1	1	1	1	1
88	1	1	1	1	1	1	1	1	1	1	1	1	1
89	1	1	1	1	1	1	1	1	1	1	1	1	1
90	1	1	1	1	1	1	1	1	1	1	1	1	1
91	1	1	1	1	1	1	1	1	1	1	1	1	1
92	1	1	1	1	1	1	1	1	1	1	1	1	1
93	1	1	1	1	1	1	1	1	1	1	1	1	1
94	1	1	1	1	1	1	1	1	1	1	1	1	1
95	1	1	1	1	1	1	1	1	1	1	1	1	1
96	1	1	1	1	1	1	1	1	1	1	1	1	1
97	1	1	1	1	1	1	1	1	1	1	1	1	1
98	1	1	1	1	1	1	1	1	1	1	1	1	1
99	1	1	1	1	1	1	1	1	1	1	1	1	1
100	1	1	1	1	1	1	1	1	1	1	1	1	1

The death rate per 1,000 from all forms of Tuberculosis in 1930 and 1931 during the last 12 years are compared in the following table:—

Year	1930	1931
1930	1.0	1.0
1931	1.0	1.0
1932	1.0	1.0
1933	1.0	1.0
1934	1.0	1.0
1935	1.0	1.0
1936	1.0	1.0
1937	1.0	1.0
1938	1.0	1.0
1939	1.0	1.0
1940	1.0	1.0
1941	1.0	1.0
1942	1.0	1.0
1943	1.0	1.0
1944	1.0	1.0
1945	1.0	1.0
1946	1.0	1.0
1947	1.0	1.0
1948	1.0	1.0
1949	1.0	1.0
1950	1.0	1.0

as to situation of disease and ward in the following table :—

THE BOROUGH DURING 1930.

DEATHS IN EACH WARD.								SEX.		TOTAL.	DEATHS.				
Moorfields.	Church.	Hoxton.	Wenlock.	Whitmore.	Kingsland.	Haggerston.	Acton.	Male.	Female.		Not in Institutions.	St. Leonards.		Other Institutions.	
												Belonging to Shoreditch.	Not belonging to Shoreditch.	Belonging to Shoreditch.	Not belonging to Shoreditch.
4	19	11	16	17	12	11	10	65	35	100	38	34	3	1	11
2	17	11	12	16	10	9	10	57	30	87	38	28	3	1	10
1	...	...	1	1	2	2	...	4	3	7	...	3	...	...	1
...	1	...	...	...	...	...	...	1	...	1	...	1	...	...	...
...
...
...
...	...	...	1	...	...	...	...	...	1	1	...	1	...	...	...
...	...	...	1	...	...	...	...	1	...	1	...	1	...	...	...
...
...	1	...	1	...	...	...	...	2	...	2	...	...	...	...	...
1	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...

The death rates per 1,000 from all forms of Tuberculosis in Shoreditch and London during the last 10 years are compared in the following table :—

Year.	Shoreditch.	London.
1921	1·6	1·2
1922	1·7	1·2
1923	1·5	1·1
1924	1·3	1·1
1925	1·4	1·0
1926	1·4	0·9
1927	1·07	1·05
1928	1·36	0·98
1929	1·15	1·03
1930	1·0	0·96

TUBERCULOSIS DISPENSARY

During the year a series of conferences were held between representatives of the Health Committee of Epsbury, Arlington and Shoncliffe at which the question of transferring the dispensary under which a joint dispensary has been provided for these three boroughs at the Royal Gresham Hospital, City Road, since October, 1912, was fully discussed.

As a result of these deliberations the Council decided at their meeting on 11th March not to follow the present agreement after 31st March 1913, and to consider arrangements to be made for the establishment of a separate dispensary for Shoncliffe after that date.

The association with the Hospital authorities during the year that the present agreement has been operative have been most happy, and has been the means of doing a very great deal of excellent work.

I wish to thank Dr. Litch and the Medical and Nursing Staff who have assisted me by their cooperation and help during the past year, and to place on record an appreciation of the fine service they have rendered in conducting tuberculosis in the Hospital.

At their meeting on the 10th September, the Committee appointed Dr. Carl Knight, Chairman, M.B., F.R.C.P., D.P.H. (Assistant Tuberculosis Officer and Assistant Medical Officer of Health, Metropolitan Borough of Finsbury), to the post of Tuberculosis Officer. It was arranged that Dr. Carter should take up his duties at the beginning of March 1913.

It was further decided for the purpose of a 25 bedded dispensary was provided at the Great Cambridge Street, and by the end of the year the approval of the Ministry of Health and the London County Council having been given to the plan, the work of reconstruction was in hand.

The work of the Dispensary during the year is shown in the following tables in the form required by the Ministry of Health.

TUBERCULOSIS DISPENSARY.

During the year a series of conferences were held between representatives of the Health Committees of Finsbury, Islington and Shoreditch at which the question of terminating the agreement under which a joint dispensary has been provided for these three Boroughs at the Royal Chest Hospital, City Road, since October, 1913, was fully discussed.

As a result of these deliberations, the Council decided at their meeting on 11th March not to renew the present agreement after 31st March, 1931, and to consider arrangements to be made for the establishment of a separate dispensary for Shoreditch after that date.

The association with the Hospital authorities during the years that the present agreement has been operative have been most happy, and has been the means of doing a very great deal of excellent work.

I wish to thank Dr. Leitch and the Medical and Nursing Staff who have assisted him for their co-operation and help during the past years, and to place on record an appreciation of the fine service they have rendered in combating tuberculosis in the Borough.

At their meeting on the 16th December, the Committee appointed Dr. Carl Knight Cullen, M.R.C.S., L.R.C.P., D.P.H. (Assistant Tuberculosis Officer and Assistant Medical Officer of Health, Metropolitan Borough of Poplar), to the post of Tuberculosis Officer. It was arranged that Dr. Cullen should take up his duties at the beginning of March, 1931.

Premises suitable for adaptation for the purpose of a Shoreditch Dispensary were purchased at 145, Great Cambridge Street, and by the end of the year the approval of the Ministry of Health and the London County Council having been given to the plans, the work of reconstruction was in hand.

The work of the Dispensary during the year is shown in the following tables in the form required by the Ministry of Health :—

TUBERCULOSIS SCHEME OF THE SHOREDITCH METROPOLITAN BOROUGH COUNCIL.
Return showing the work of the Dispensary (or Dispensaries) during the year 1930.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.			
	(¹) Adults.		(⁶) Children.		Adults.		Children.		Adults.		Children.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
NEW CASES(⁷) examined during the year (excluding contacts) :—												
(a) Definitely tuberculous ...	43	28	8	8	3	2	11	10	46	30	19	18
(b) Doubtfully tuberculous(⁸) ...	—	—	—	—	—	—	—	—	2	—	—	—
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	72	47	35	34
CONTACTS examined during the year :—												
(a) Definitely tuberculous ...	19	12	4	4	—	2	1	1	19	14	5	5
(b) Doubtfully tuberculous(⁸) ...	—	—	—	—	—	—	—	—	—	—	1	—
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	44	62	70	61
CASES written off the Dispensary Register(⁹) as												
(a) Cured(¹⁰) ...	2	2	—	—	1	—	2	—	3	2	2	—
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error) ...	—	—	—	—	—	—	—	—	120	110	107	97
NUMBER OF PERSONS on Dispensary Register(⁹) on December 31st :—												
(a) Diagnosis completed ...	261	208	28	29	33	25	53	29	294	233	81	58
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	2	—	1	—
1. Number of persons on Dispensary Register(⁹) on January 1st ...	646				9. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary ...				15			
2. Number of patients transferred from other areas and of "lost sight of" (¹¹) cases returned ...	40				10. Number of consultations with medical practitioners :—							
3. Number of patients transferred to other areas and cases "lost sight of" ...	95				(a) At Homes of Applicants ...				4			
4. Died during the year ...	65				(b) Otherwise ...				147			
5. Number of observation cases (⁸) under A (b) and B (b) above in which period of observation exceeded 2 months ...	3				11. Number of other visits by Tuberculosis Officers to Homes ...				295			
6. Number of attendances at the Dispensary (including Contacts) ...	5,795				12. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes ...				Approx. 3,540			
7. Number of attendances of non-pulmonary cases at Orthopædic Out-stations for treatment or supervision ...					13. Number of							
8. Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for					(a) Specimens of sputum, etc., examined ...				718			
(a) "Light" treatment ...					(b) X-ray examinations made in connection with Dispensary work ...				99			
(b) Other special forms of treatment					14. Number of Insured Persons on Dispensary Register(⁹) on the 31st December ...				352			
					15. Number of Insured Persons under Domiciliary Treatment(⁴) on the 31st December ...				154			
					16. Number of reports received during the year in respect of Insured Persons :—							
					(a) Form G.P. 17 ...				2			
					(b) Form G.P. 36 ...				—			

NOTES.

- (N.B.—Notes 1 to 5 below repeat definitions (A) to (E) on p. 1 of Memorandum 37(T).)
- (1) *Public Medical Treatment*.—Treatment at a dispensary or residential institution or "general supervision," under a scheme approved by the Minister of Health for the treatment of tuberculosis, of a person who has been diagnosed to be suffering from tuberculosis. (Note.—A patient under compulsory treatment should be regarded as also under "general supervision" by the Tuberculosis Officer.)
- (2) *Private*.—A person who has been diagnosed to be suffering from tuberculosis and is not under medical treatment for tuberculosis.
- (3) *Observation case*.—The term does not include a person who is kept under observation pending the establishment of the diagnosis and who is referred to in the Memorandum under "observation case," but includes all persons on the Dispensary Register who are under "general supervision," even if not in receipt of any treatment.
- (4) *Dispensary Treatment*.—Treatment by a Tuberculosis Officer in cases where the patient is seen not less frequently than once in every month and is examined not less often than once in three months.
- (5) *Residential Treatment*.—Treatment of an insured patient by his insurance contribution or the contribution of the Tuberculosis Officer.
- (6) *Year*.—The calendar year ending on the 31st day of December.
- (7) *Death*.—For the purpose of Tuberculosis Records all patients of 15 years and upwards should be classed as deaths.
- (8) *Discharge*.—
- (a) All persons discharged for the reasons (a) or (b) in connection with the Dispensary, except tuberculous cases of tuberculosis transferred from the Dispensary to other local authorities, because such a discharge would not be regarded as death with the Dispensary, should be
- (b) Persons who have been death with dispensary by the Dispensary and discharged as "cured," or provisionally discharged as not at that time suffering from tuberculosis who return to the Dispensary as requested cases of tuberculosis.
- (9) *Transfer*.—
- (a) *Transfer to other local authorities*.—Transfer of a person attending at or in connection with the Dispensary to other local authorities for tuberculosis treatment within a period of one month from the date of diagnosis of the case, or to a definite transfer after medical examination and the diagnosis of the necessary facts. In completing returns under this section should be entered under subhead (c) in each section.
- (b) *Transfer to other local authorities*.—List containing names of all persons attending at or in connection with the Dispensary for diagnosis or treatment for tuberculosis, including patients under "general supervision" (whether or not accompanied by other persons) and patients or observation cases in residential institutions, and "contacts." (This must be distinguished from the Notification Register kept by the Medical Officer of Health.)

NOTES.

(N.B.—Notes 1 to 5 below repeat definitions (d) to (h) on p. 7 of Memorandum 37/T.)

(1) *Public Medical Treatment*.—Treatment at a dispensary or residential institution or “general supervision,” under a scheme approved by the Minister of Health for the treatment of tuberculosis, of a person who has been diagnosed to be suffering from tuberculosis. (*Note*.—A patient under domiciliary treatment should be regarded as also under “general supervision” by the Tuberculosis Officer.)

(2) *Patient*.—A person who has been diagnosed to be suffering from tuberculosis and is under public medical treatment for tuberculosis.

(The term does not include a person who is kept under observation pending the establishment of the diagnosis, and who is referred to in the Memorandum as an “observation case,” but includes all persons on the Dispensary Register who are under “general supervision,” even if not in receipt of any treatment.)

(3) *Dispensary Treatment*.—Treatment by a Tuberculosis Officer in cases where the patient is seen not less frequently than once in every month, and is examined not less often than once in three months.

(4) *Domiciliary Treatment*.—Treatment of an insured patient by his Insurance practitioner on the recommendation of the Tuberculosis Officer.

(5) *Year*.—The calendar year ending on the 31st day of December.

(6) *Adults*.—For the purposes of Tuberculosis Records all patients of 15 years and upwards should be classed as adults.

(7) *New cases*.—

(a) All persons examined for the first time at, or in connection with, the Dispensary, except definite cases of tuberculosis transferred from the areas of other local authorities. Persons seen in consultation, who will subsequently be dealt with by their own private practitioners, should be included.

(b) Persons who have been dealt with previously by the Dispensary and discharged as “cured,” or provisionally diagnosed as not, at that time, suffering from tuberculosis, who return to the Dispensary as suspected cases of tuberculosis.

(8) *Observation Cases*.—Persons attending at, or in connection with, the Dispensary, in whose cases the Tuberculosis Officer cannot, within a period of one month from his first examination of the case, come to a definite diagnosis after physical examination and the application of the necessary tests. In completing sections A and B, such cases should be entered under sub-head (b) in each section.

(9) *Dispensary Register*.—List containing names of all persons attending at, or seen in connection with, the Dispensary for diagnosis or for treatment for tuberculosis, including patients under “general supervision” (whether or not accompanied by domiciliary treatment), and patients or observation cases in residential institutions, and “contacts.” (This must be distinguished from the Notification Register kept by the Medical Officer of Health.)



Table E

TUBERCULOSIS SCHEME
of the Shoreditch Metropolitan Borough Council.

(a) PULMONARY TUBERCULOSIS.

Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary (or Dispensaries) at the end of 1930, arranged according to the years in which the patients first came under Public Medical Treatment for pulmonary tuberculosis, and their classification as shown on Form A.

Condition at the time of the last record made during the year to which the Return relates				Previous to 1926					1926					1927					1928					1929					1930				
				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus			
					Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)
ALIVE	Discharged as cured	Adults	M.	4	1	—	—	1																									
			F.	5	—	—	—	—																									
		Chil- dren	M.	1	—	—	—	—																									
			F.	1	—	—	—	—																									
	Disease arrested	Adults	M.	17	1	—	—	1	1	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
			F.	24	3	—	—	3	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Chil- dren	M.	2	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
			F.	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Disease not arrested	Adults	M.	43	5	23	9	37	2	—	6	3	9	3	4	4	5	13	2	2	11	6	19	10	5	10	7	22	17	9	21	4	34
			F.	24	2	8	7	17	5	2	5	1	8	2	—	6	3	9	7	1	9	5	15	15	3	15	6	24	12	6	14	3	23
		Chil- dren	M.	—	—	—	—	—	2	—	—	—	—	1	—	—	—	—	3	—	—	—	—	5	—	—	—	—	11	—	—	1	1
			F.	1	—	—	—	—	—	—	—	—	—	4	—	1	—	1	—	—	—	—	—	5	—	2	—	2	9	1	1	—	2
CONDITION NOT ASCERTAINED DURING THE YEAR				21	3	2	2	7	5	1	1	—	2	2	1	2	—	3	4	—	1	—	1	5	—	3	—	3	—	—	—	—	—
LOST SIGHT OF OR OTHERWISE REMOVED FROM DISPENSARY REGISTER				91	15	28	9	52	33	6	10	9	25	10	11	3	1	15	11	2	9	2	13	6	5	5	1	11	1	—	1	—	1
DEAD	Adults	M.	3	—	7	42	49	2	1	4	37	42	2	—	8	23	31	2	1	2	20	23	6	1	7	11	19	3	1	2	6	9	
		F.	6	2	5	17	24	1	—	6	24	30	2	—	1	10	11	4	—	3	12	15	3	—	4	4	8	—	—	—	5	5	
	Chil- dren	M.	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		F.	1	—	—	1	1	1	—	1	1	2	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Totals				245	32	73	88	193	55	11	33	75	119	27	16	25	43	84	33	6	35	45	86	55	14	46	29	89	53	17	39	19	75

To face page 71.

[P.T.O.]

Table F

(b) NON-PULMONARY TUBERCULOSIS.

Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary (or Dispensaries) at the end of 1930, arranged according to the years in which the Patients first came under Public Medical Treatment, and their classification as shown on Form A.

Condition at the time of the last record made during the year to which the Return relates				Previous to 1926					1926					1927					1928					1929					1930				
				Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total
ALIVE	Discharged as cured	Adults	M.	3	—	—	—	3																									
			F.	—	—	1	1	2																									
		Children	M.	1	—	—	1	2																									
			F.	1	—	—	1	2																									
	Disease arrested	Adults	M.	4	—	—	1	5	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
			F.	4	—	—	—	4	1	—	—	—	1	—	—	—	—	—	—	1	1	2	—	—	1	—	1	—	—	—	—		
		Children	M.	3	1	1	3	8	3	1	—	1	5	3	—	—	1	4	—	1	—	—	1	1	—	—	—	1	—	—	—	—	
			F.	1	—	—	—	1	1	—	1	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	Disease not arrested	Adults	M.	3	—	1	3	7	1	—	1	1	3	—	—	—	—	1	—	—	—	1	1	—	1	—	2	1	2	—	—	3	
			F.	3	—	—	—	3	1	—	—	—	1	2	—	—	1	3	1	—	—	1	2	2	—	—	—	2	3	—	—	3	
		Children	M.	3	—	—	2	5	1	—	—	—	1	2	—	—	—	2	5	1	1	1	8	2	1	—	2	5	6	2	—	4	12
			F.	1	1	—	1	3	—	—	—	—	—	3	—	—	2	5	—	—	—	—	—	2	1	1	1	5	6	2	—	3	11
TRANSFERRED TO PULMONARY				1	—	1	—	2	2	—	—	—	2	—	—	—	—	—	—	—	1	1	1	—	—	—	1	—	—	—	—		
CONDITION NOT ASCERTAINED DURING THE YEAR				7	1	—	2	10	1	—	—	1	2	1	—	—	—	1	—	1	—	—	1	1	—	1	1	3	—	—	—	—	
LOST SIGHT OF OR OTHERWISE REMOVED FROM DISPENSARY REGISTER				7	3	—	13	23	—	1	—	6	7	5	—	1	4	10	3	2	2	3	10	1	1	—	2	4	—	—	1	—	
DEAD	Adults	M.	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
		F.	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
	Children	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
		F.	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Totals ...				44	6	4	28	82	11	3	2	9	25	16	—	2	8	26	10	5	4	7	26	11	3	4	6	24	16	6	1	7	30

(10) *Cured*.—Patients with tuberculosis should not be deleted from the Dispensary Register as “cured” until in the case of non-pulmonary tuberculosis, 3 years, and in the case of pulmonary tuberculosis, 5 years, have elapsed without any symptoms of active disease (*i.e.*, arrest has been maintained for 3 years).

(11) *Cases “lost sight of.”*—Patients who have failed to submit themselves for examination during two consecutive calendar years notwithstanding all efforts to trace them. These should be written off the Dispensary Register at the end of the year. (Patients who are known to have left the district permanently but who cannot be transferred to another local authority because their destination is not known, and patients seen only in consultation for the purpose of diagnosis, and others who desire no further assistance under the tuberculosis scheme for public medical treatment may be marked off at once.)

Table E—(*See inset*).

Note.—Group I.: Cases with slight constitutional disturbance (if any).

Group III.: Cases with profound systemic disturbance or constitutional deterioration, and with little or no prospect of recovery.

Group II.: All cases which cannot be placed in Groups I. and III.

Table F—(*See inset*).

The work of the Tuberculosis Dispensary is further dealt with by Dr. Leitch, the Tuberculosis Officer, and Miss M. Sutton-Sharpe, in the two following reports:—

ROYAL CHEST HOSPITAL.

SHOREDITCH TUBERCULOSIS DISPENSARY.

Statistical Report for year 1930.

TO THE MEDICAL OFFICER OF HEALTH.

The following table shows at a glance the work done during the year in question.

The total attendances paid to the Dispensary and the total number of new cases examined are somewhat less than in 1929 owing to a smaller number of old cases on the Tuberculosis Register being seen than in the previous year. Except for this, the figures would have been more or less identical.

	1929.	1930.
Total attendances	6,017	5,795
Total examinations	2,137	1,755
Total new persons examined	797	565
Renewed cases	482	529
Sisters' visits to homes	2,155	2,108
Medical Officers' visits	347	299

The comparative numbers of insured and non-insured attendances were:

Insured	2,170
Non-insured	2,023
Total	4,193

Of the 4,193 persons including "Contacts" examined there were:

Insured	2,170
Non-insured	2,023
Total	4,193

The results of examinations in the months ending there were:

Insured		Non-insured		Total	
Examinations	Examinations	Examinations	Examinations	Examinations	Examinations
113	37	113	37	226	74
237	13	237	13	474	26
237	13	237	13	474	26

The results of all the new persons shown in the above table are as follows:

Under 15		15 to 64		65 and over		Total	
Examinations	Examinations	Examinations	Examinations	Examinations	Examinations	Examinations	Examinations
113	37	113	37	113	37	226	74
237	13	237	13	237	13	474	26
237	13	237	13	237	13	474	26

Special Section for Newborn Children.

The results of examinations and examinations made each month are shown in the following table:

Month	Examinations	Examinations	Examinations	Examinations
January	113	37	113	37
February	113	37	113	37
March	113	37	113	37
April	113	37	113	37
May	113	37	113	37
June	113	37	113	37
July	113	37	113	37
August	113	37	113	37
September	113	37	113	37
October	113	37	113	37
November	113	37	113	37
December	113	37	113	37

Total Examinations
Data 1932 ... 120

Total Examinations
Data 1933 ... 120

The comparative numbers of insured and non-insured attendances were :—

Insured	3,170
Non-insured	2,625
Total	5,795

Of the new persons, including "Contacts," examined, there were :—

Insured	226
Non-insured	339
Total	565

As analysed, according to the monthly returns, there were :—

	Tuberculous.	Suspects.	Non-Tuberculous.	Total.
"Contacts"	37	13	218	268
Other New Persons	113	2	182	297
Totals	150	15	400	565

The final analysis of all the new persons shown in the above table is as follows :—

	Under 15 years.		Over 15 years.		Total
	M.	F.	M.	F.	
Total New Persons	126	115	176	148	565
Pulmonary Tuberculosis	11	11	56	36	114
Non-Pulmonary Tuberculosis	9	9	2	3	23
Suspects	1	...	2	...	3
Non-Tuberculous	105	95	116	109	425

SPECIAL SESSION FOR SCHOOL CHILDREN.

The number of Attendances and Examinations made each month are shown in the following table :—

	Attendances.	Examinations.		Attendances.	Examinations.
January	38	14	July	34	12
February	41	13	August	7	1
March	30	5	September	41	15
April	23	5	October	45	21
May	27	13	November	37	19
June	29	10	December	32	11

Total Attendances ... 384
Ditto, 1929 ... 293

Total Examinations 139
Ditto, 1929 ... 120

The following table is an analysis of all persons attending the Dispensary:—

	Under 15 years	Over 15 years	Totals
Male	178	188	366
Female	180	222	402
Total	358	410	768
Male	61	291	352
Female	55	283	338
Total	116	574	690

Further information relating to the year of the Dispensary is as follows:—

1. Persons who attended during the year 1917 and consisted of the following:

2. Persons who attended during the year 1918 and consisted of the following:

3. Persons who attended during the year 1919 and consisted of the following:

4. Persons who attended during the year 1920 and consisted of the following:

5. Persons who attended during the year 1921 and consisted of the following:

6. Persons who attended during the year 1922 and consisted of the following:

7. Persons who attended during the year 1923 and consisted of the following:

8. Persons who attended during the year 1924 and consisted of the following:

9. Persons who attended during the year 1925 and consisted of the following:

10. Persons who attended during the year 1926 and consisted of the following:

11. Persons who attended during the year 1927 and consisted of the following:

12. Persons who attended during the year 1928 and consisted of the following:

13. Persons who attended during the year 1929 and consisted of the following:

14. Persons who attended during the year 1930 and consisted of the following:

15. Persons who attended during the year 1931 and consisted of the following:

16. Persons who attended during the year 1932 and consisted of the following:

The following table is an analysis of all persons attending the Dispensary :—

	Under 15 years.	Over 15 years.	Totals.
NON-TUBERCULOUS.			
Males	178	185	363
Females	180	222	402
Totals	358	407	765
TUBERCULOUS.			
Males	81	294	375
Females	58	233	291
Totals	139	527	666

Further information relating to the work of the Dispensary is as follows :—

The Laboratory Examinations made during the year total 717, and consisted of the following :—

683 specimens of Sputum.

20 specimens of Urine.

13 Nose and Throat Swabs for suspected diphtheria, and 1 Blood Examination.

Total number of X-ray examinations 99

“ “ Patients recommended to the London County Council for Institutional Treatment ... 170

“ “ Progress Reports furnished, etc. ... 231

“ “ Examinations made for, and Reports sent to, the Ministry of Pensions ... 24

“ “ Patients sent by Doctors ... 139

The number of patients on the Dispensary Register on 31st December, 1930 :—

Insured 352

Non-insured 317

Total 669

A. LEITCH,
Tuberculosis Officer.

TUBERCULOSIS CARE COMMITTEE FOR SHOREDITCH.

32, HERBERT STREET, HOXTON, N. 1. Telephone : Clerkenwell 7313.

Particulars of the excellent work performed by this Committee during the year are contained in the following report by the Hon. Secretary, Miss Sutton Sharpe :—

The Tuberculosis Care Committee has for its Chairman, Dr. Maitland Radford (M.O.H.), Vice-Chairman, Dr. Leitch (T.O.), and the following members: Miss Broomfield (I.C.A.A.), Rev. F. E. Birch, Dr. Fanning (Asst. M.O.H.), Sister Grange (Dispensary Nurse), Miss Hiscoke (T.B. Nurse), Mrs. Jeger, Dr. Kelleher (St. Leonard's Hospital), Miss Kastor (Red Cross), Councillor Kenny, Dr. Lewis (Hoxton House), Miss Murch (District Organiser of Children's Care Committees),

and Miss C.O.S. P. Kishin Esq. (Lancashire House) Miss Tucker (East End) and Miss C.O.S. P. Kishin Esq. (Lancashire House) and the Hon. Secretary.

The Committee is now in a position to start its work. The work of the Committee is to start its work. The work of the Committee is to start its work.

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Hospitality Centre

The Committee is now in a position to start its work. The work of the Committee is to start its work. The work of the Committee is to start its work. The work of the Committee is to start its work.

Miss Miller (C.O.S.), P. Rockliff, Esq. (Tabernacle House), Miss Tucker (East End Workers amongst the Poor), Miss Wragge (Maurice Hostel), and the Hon. Secretary, Miss Sutton Sharpe.

In the name "Tuberculosis Care Committee" the work of this Committee is shown. It is the "care" of all Tuberculous persons and the "care" of their families.

There are many troubles that come to those stricken with tuberculosis and to the families where one member has this disease.

Clothes present a problem to patients going away to Sanatoria, and many pairs of pyjamas are handed over to despairing mothers who do not know how to get such expensive things for the son going away "to get better." Sometimes the Committee has to consider the whole outfit for some man or woman whose money has all gone in the long dragging months of ill health, then the Committee puts the patient in touch with the Society or Institution able to help.

Work must be changed, patients must be got to airier surroundings for their employment. This is not easy but with the kind assistance of other workers, suitable jobs have been found by this Committee and living made more possible for some.

In various families we find some debt dragging down the mother. A debt she has incurred sometimes without her husband's knowledge. In one instance it took much questioning and many friendly talks to find out about the millstone. But when all was clear the mother was persuaded to tell her husband, then the moneylender was paid off and the mother now looking much happier, cheerfully came up week after week to pay back to the Committee half of the debt by degrees; the other half was a gift.

A boy of 17 was working in an underground cellar for less than 15s. a week. Undersized, lame and sick and ill, living in lodgings because his father had turned him out—"such a nuisance because he was lame!" The Committee got him away to one of the L.C.C. Training Colonies, the Maurice Hostel gave him a complete new outfit and now the C.O.S. has been battling for many months to get his insurance on a sound footing; and the boy writes regularly.

The Committee has had very loyal workers this year, two members of Toc H League of Women Helpers have come with utmost regularity every week and done clerical work. This regular filing away of papers and orderly working is of the utmost value to the Secretary. Also there have been helpers in visiting.

Co-operation with the Borough Council and the C.O.S., I.C.A.A., Red Cross, and the close touch between this Committee and many other activities has made for quickness and ease in dealing with cases.

HANDICRAFT CENTRE.

This Committee at Easter opened a class for the Tuberculous patients who were sufficiently well to require occupation though not fit for regular work. The L.C.C. provides an excellent teacher, the Royal Chest Hospital has lent a room and sufficient funds have been collected for materials and tools; and now the class is going well and proving of service to those wearied with the idle life enforced by their illness.

It is a class where men and women learn leather work, knife work and various things. But it is a very interesting and a social event and a very pleasant thing for students and teachers and those that visit it. And for two hours these interesting men and women are bright and interested, and the fact that they are ill is forgotten. Each student is supplied with one pint of milk at each class.

At their meeting on 21st October the Council adopted a resolution of the Health Committee recommending that the constitution of the Care Committee should be revised as follows:-

(1) That subject to the approval of the London County Council, the Shoreditch Public Health Committee be constituted of 12 members, including two representatives of the Public Health Committee, and one representative of the Local Public Assistance Committee.

(2) That the appointment of such Committee be made by the Council on the recommendation of the Public Health Committee, who shall consider recommendations from the Local Public Assistance Committee.

(3) That the Public Health Committee be appointed annually.

(4) That the Council be asked to consider the recommendation of the Public Health Committee.

(5) That the Public Health Committee shall have the power to elect a vacant seat, and in any matter of the Public Health Committee for the purpose of the constitution of the Committee for a period of three months.

It is a class where men and women learn leather work, raffia work and various things, but also it is becoming somewhat of a social event and Friday morning in the Lecture Room of the Royal Chest Hospital is a very pleasant friendly time for students and teacher and those that visit it. And for two hours these tuberculous men and women are bright and interested, and the fact that they are ill is forgotten. Each student is supplied with one pint of milk at each class.

At their meeting on 21st October, the Council adopted a resolution of the Health Committee recommending that the constitution of the Care Committee should be revised as follows :—

- (1) That, subject to the approval of the London County Council, the Shoreditch Tuberculosis Care Committee be constituted of 15 members, including two representatives of the Public Health Committee, and one representative of the Local Public Assistance Committee.
- (2) That the appointment of such Committee be made by the Council on the recommendation of the Public Health Committee, who shall consider recommendations from the Tuberculosis Care Committee.
- (3) That the Tuberculosis Care Committee be appointed annually.
- (4) That casual vacancies caused by resignation or disqualification be filled by the Committee on the recommendation of the Public Health Committee ;
and
- (5) That the Public Health Committee shall have the power to declare vacant the appointment of any member of the Tuberculosis Care Committee for non-attendance at the meetings of the Committee for a period of three months.

VI.—MUNICIPAL DENTAL HOSPITAL, 164, KINGSLAND ROAD. REPORT FOR THE YEAR 1930.

Eleven sessions per week have been held at this Hospital throughout the year, the time table being as follows:—

Monday ...	...	2.30 to 4.30 and 6.30 to 8.30 p.m.
Tuesday ...	...	10 a.m. to 12 noon and 2.30 to 4.30 p.m.
Wednesday ...	...	10 a.m. to 12 noon, 2.30 to 4.30 p.m. and 6.30 to 8.30 p.m.
Thursday ...	...	10 a.m. to 12 noon, and 2.30 to 4.30 p.m. (Maternity and Child Welfare Cases).
Friday ...	...	2.30 to 4.30, and 6.30 to 8.30 p.m.

As will be explained later, it became necessary to engage the services of a temporary Assistant Dental Surgeon for some weeks at the end of the year, but there are no changes to report in the permanent staff which is as follows:—

Dental Surgeon, Sister and Clerk, Nurse, three Dental Mechanics, Caretaker and Cleaner.

Anæsthetics are administered by a medical practitioner who is not a whole time officer of the Council.

The names of these Officers will be found in the section of this Report dealing with Staff.

A summary of the work done during the year is contained in the following tables:—

TABLE I.—INSPECTION AND TREATMENT OF CHILDREN.

	Number of examinations.	Number of attendances for treatment.	Number of extractions.	Number of Administrations of Anæsthetics.		Number of fillings.	Number of other operations.	Number of children receiving orthodontic treatment.	Number of children's visits for orthodontic treatment.	Number of visits.
				Local.	General.					
Under 2 years ...	30	16	48	...	15	1	2	...	...	35
" 3 years ...	125	86	247	...	72	10	7	...	...	149
" 4 years ...	276	198	553	...	167	42	3	...	...	331
" 5 years ...	115	88	199	...	61	22	2	1	4	138
Over 5 years ...	807	656	983	17	283	232	61	15	167	924
Total... ..	1353	1044	2030	17	598	307	75	16	171	1577

TABLE II.—INSPECTION AND TREATMENT OF ADULTS.

	Number of examinations.	Number of attendances for treatment.	Number of extractions.	Number of Administrations of Anæsthetics.		Number of fillings, including root fillings.	Number of scalings.	Number of other operations.	Number of dentures fitted.	Number of repairs to dentures.	Number of visits.
				Local.	General.						
Maternity cases ...	1083	838	1954	29	297	105	35	390	119	8	1290
Women ...	2187	1690	2169	61	332	319	82	768	257	59	2376
Unmarried girls (16-20) ...	455	365	394	14	109	208	12	77	12	3	528
Men ...	2229	1738	2468	121	388	326	96	753	265	59	2412
Tuberculous ...	49	37	34	—	6	10	3	18	7	2	52
Total including children (Table I) ...	7356	5712	9049	242	1730	1275	233	2081	669	131	8235

TABLE III.

Sessions.	Total attendances.			Total.	No. of visits M. & C. W. cases.	Anaesthetic Sessions attendances.
	Morning.	Afternoon.	Evening.			
Monday ...	4	758	916	1,678	270	481 (6 special visits)
Tuesday ...	697	713	—	1,410	366	298 (27 " ")
Wednesday ...	653	655	853	2,161	294	83 (19 " ")
Thursday ...	758	671	—	1,429	456	334 (19 " ")
Friday ...	—	678	879	1,557	207	534 (14 " ")
Total ...	2,112	3,475	2,648	8,235	1,593	1,730

Shortly after the end of the year covered by this Report the Council decided that as from 1st April, 1931, the scale of charges should be the same as that of the Approved Societies under the National Health Insurance Act. At the same time it was decided to vary the income scale qualifying for remission of charges.

At the time of writing, the Council's complete scale of charges is as follows :—

Scaling, per individual	7s. 6d. but not chargeable in respect of a jaw in which a denture of eight or more teeth is supplied.
Fillings, per filling	7s. 6d. with a maximum charge of 12s. 6d. for any one tooth.
Root Treatment, per tooth	7s. 6d. with a maximum charge of 17s. 6d. for fillings and root treatment in any one tooth
Extractions, per tooth, with local anaesthetic	2s. 6d.
Maximum for Upper or Lower	12s. 6d.
Maximum for Upper and Lower	£1 2s. 6d.
Extractions, with general anaesthetics.—Extraction fee, 2s. 6d. each tooth ; maxima as for Local. Simple administration fee, Upper or Lower, 7s. 6d. ; Upper and Lower, 10s. Prolonged Anaesthesia (12 or more teeth) : Extractions, £1 2s. 6d. ; Anaesthetist's fee, £1 1s. 0d.	
Dentures, full Upper or Lower	£2 15s. 0d.
Dentures, full Upper and Lower	£5 10s. 0d.
Partial Dentures, extractions not included	£1 1s. 0d. for first two teeth. 5s. 0d. for each subsequent tooth.

to be made for the first \$5 for each subsequent item on a schedule as stated below with a maximum of \$25 for each item in respect of items 1, 2 and 3 and of \$1 in respect of all items.

4. The fee for material or fixtures of dentures.

5. The replacement of a broken tooth or loosened band or wire.

6. The fitting of a new tooth in one band or one wire.

7. An extension of the plate, even when that extension constitutes part of a

replacement.

8. For the first two years, and \$5 for each additional tooth up to a maximum of \$1 for each for each tooth or wire. Maximum fee for any

renewal or addition at the first year of service \$2.

9. Half original fee.

10. If the fee for material or fixtures of dentures is necessary, that

fee shall be

added to the fee for material or fixtures of dentures.

11. The fee for material or fixtures of dentures.

12. The fee for material or fixtures of dentures. The fee for material or fixtures of dentures shall be added to the fee for material or fixtures of dentures.

13. The fee for material or fixtures of dentures. The fee for material or fixtures of dentures shall be added to the fee for material or fixtures of dentures.

14. The fee for material or fixtures of dentures. The fee for material or fixtures of dentures shall be added to the fee for material or fixtures of dentures.

15. The fee for material or fixtures of dentures. The fee for material or fixtures of dentures shall be added to the fee for material or fixtures of dentures.

16. The fee for material or fixtures of dentures. The fee for material or fixtures of dentures shall be added to the fee for material or fixtures of dentures.

Item	Fee for material or fixtures of dentures	Fee for material or fixtures of dentures	Fee for material or fixtures of dentures	Fee for material or fixtures of dentures	Fee for material or fixtures of dentures
1	5.00	5.00	5.00	5.00	5.00
2	10.00	10.00	10.00	10.00	10.00
3	15.00	15.00	15.00	15.00	15.00
4	20.00	20.00	20.00	20.00	20.00
5	25.00	25.00	25.00	25.00	25.00
6	30.00	30.00	30.00	30.00	30.00
7	35.00	35.00	35.00	35.00	35.00
8	40.00	40.00	40.00	40.00	40.00
9	45.00	45.00	45.00	45.00	45.00
10	50.00	50.00	50.00	50.00	50.00
11	55.00	55.00	55.00	55.00	55.00
12	60.00	60.00	60.00	60.00	60.00

The charge to be made in special cases is established and determined by the Commission.

The charge made in ordinary cases is the cost of the material, plus the fee for the work, in addition to the ordinary charge of \$5 made to school children subject to the reduced scale of charges for necessary cases being applied.

Repairs.—7s. 6d. for the first, 5s. for each subsequent item on a denture as stated below, with a maximum of 12s. 6d. for each denture in respect of items 1, 2 and 4, and of £1 in respect of all items :—

- (1) Cracks, fissures, or fractures of dentures.
- (2) The replacing of a loosened tooth, or loosened band or wire.
- (3) The adding of one new tooth or one band or one wire.
- (4) An extension of the plate, even when that extension embraces part of a natural tooth.

Remakes.—14s. for the first two teeth, and 3s. 4d. for each additional tooth, up to a maximum of £1 16s. 8d. for nine teeth or more. Maximum (including any necessary additions at 5s. per tooth) per denture, £2.

Remakes within 12 months Half original fee.

Crowns £1 12s. 6d. including any necessary root treatment.

Examination and report fee where patient does not return for treatment 2s. 6d.

The age limit for young persons receiving treatment at half price was lowered from 21 years to 19 years of age.

School children 1s. 0d. for first treatment, and 1s. 0d. for all subsequent visits, making the maximum charge 2s. 0d. for a course of treatment.

Residents of the Borough who state they are unable to afford to pay in accordance with the above scale are asked to complete a form stating the number in family and the income.

After verification by the Enquiry Officer this statement is used to fix the proportion of the full charge to be paid, the remissions being 25, 50, 75 and 100 per cent., in accordance with the following income limits approved by the Council :—

No. in family.		No charge to be made.	To pay 25% of maximum.	To pay 50% of maximum.	To pay 75% of maximum.
		s. d.	s. d.	s. d.	s. d.
1	Income per head after deducting rent. National Health and Unemployment Insurance contributions not more than :	14 0	16 0	18 6	21 0
2		12 0	14 0	16 6	19 0
3		10 0	12 0	14 6	17 0
4		9 0	10 0	11 0	14 6
5		8 0	9 0	10 0	12 6
6		7 0	8 0	9 0	10 6
7		7 0	8 0	9 0	10 6
8		7 0	8 0	9 0	10 6
9		7 0	8 0	9 0	10 6
10		7 0	8 0	9 0	10 6
11		7 0	8 0	9 0	10 6
12		7 0	8 0	9 0	10 6

The charge to be made in special X-Ray cases is considered and determined by the Committee.

The charge made in Orthodontic cases is the cost of the appliance, plus 50 per cent. of such cost, in addition to the ordinary charge of 2s. made to school children, subject to the reduced scale of charges for necessitous cases being applied.

As explained in the last Annual Report the number of sessions was increased to eleven per week at the beginning of June, 1930. The year 1930 is accordingly the last year for which we have records of the work done under this new arrangement.

A comparison of the work done each year since this Hospital was opened is contained in the following table:

1930	1929 Jan-May Five Sessions June-Dec Eleven Sessions	1928 Five Sessions	1927 From 31st March Five Sessions	
1,517	1,041	784	499	No. of children's visits
6,858	3,808	3,032	1,430	No. of adults' visits
1,299	1,209	1,021	927	No. of operating cases visited
899	329	229	61	No. of patients treated

The above figures show in the foregoing table of the work done is most satisfactory. The Hospital's record of the teeth is one of the most common and one of the most for visiting cases of ill-health, and the statistical records here given of treatment carried out show in fact that an increasingly large number of the patients who visit the Hospital are suffering from dental disease, and that the work done by the Hospital is becoming more and more important.

Particularly gratifying in the record of the last year's work is the fact that in children made 171 attendances for orthodontic treatment.

As has been explained, the treatment carried in correcting deformities and malpositions of the teeth and jaws of growing children, and is the means of removing conditions that would otherwise seriously prejudice their future health.

Reference has been made to the fact that it became necessary to engage a temporary Assistant Dental Surgeon, shortly after the summer recess the Health Committee had authorized the steps necessary to be taken to deal with the increase in work that had accumulated as a result of the increasing number of patients. These were put into two categories—patients who were waiting for dental treatment who were waiting for the completion of other forms of treatment.

In order to overcome the serious difficulty the Committee decided in September to make a temporary measure, the rules as to eligibility for treatment, and accordingly restricted the Dental Surgeon that extensions likely to necessitate the postponement of treatment should not be performed unless the case was urgent or the patient in pain. In practice this decision has not been very effective as a large

As explained in the last Annual Report the number of sessions was increased to eleven per week at the beginning of June, 1929. The year 1930 is accordingly the first complete year for which we have records of the work done under this new arrangement.

A comparison of the work done each year since this Hospital was opened is contained in the following table :—

	1927. From 31st March, Five Sessions.	1928. Five Sessions.	1929. Jan.-May, Five Sessions. June-Dec., Eleven Sessions.	1930. Eleven Sessions.
No. of children's visits ...	499	794	1,081	1,577
No. of adults' visits ...	1,430	3,032	3,505	6,658
No. of maternity cases visits...	627	1,021	1,209	1,290
No. of dentures fitted ...	61	222	329	699

The steady increase shown in the foregoing table of the work done is most satisfactory. In this Borough neglect of the teeth is one of the most common and one of the most far-reaching causes of ill-health, and the statistical records here given of treatment carried out mean in fact that an increasingly large number of the people of Shoreditch are either regaining their health, or, better still, preserving their health by availing themselves of facilities for dental treatment now within the reach of all.

Particularly gratifying in the record of the last year's work is the fact that 16 children made 171 attendances for orthodontic treatment.

As has been explained, this treatment consists in correcting deformities and mal positions of the teeth and jaws of growing children, and is the means of removing conditions that would otherwise seriously prejudice their future health.

Reference has been made to the fact that it became necessary to engage a temporary Assistant Dental Surgeon. Shortly after the summer recess the Health Committee had under consideration the steps necessary to be taken to deal with the arrears of work that had accumulated as a result of the increasing number of patients. These arrears fell into two categories—patients who were waiting for dentures and patients who were waiting for the completion of other forms of treatment.

In order to overtake the arrears of dentures, the Committee decided in September to modify, as a temporary measure, the rules as to eligibility for treatment, and accordingly instructed the Dental Surgeon that extractions likely to necessitate the provision of dentures should not be performed unless the case was urgent, or the patient in pain. In practice this decision has not been very effective as a large

institutions of patients postpone their visits until their teeth are so far decayed as to cause pain or to make extraction an urgent matter on grounds of health.

London with a view of work other than dentures the services of a temporary dental surgeon were engaged for five sessions each week. Mr. Mitchell, L.D.S., R.C.S.D., was the gentleman appointed. He commenced duty on 2nd November, and was still attending the hospital at the end of the year.

The Committee also gave instructions that children of school age should only receive orthodontic treatment at the Dental Hospital, as these children were able to attend the London County Council school dental clinic.

As will be seen from the following figures, the patients both of dentures and of other work had been considerably reduced by the end of the year:

	Denture work	Patients of other work
31st September	138	498
31st December	30	111

It will be necessary early in the New Year to consider the steps necessary to be taken to cope with the fact that it does not appear to be possible for the regular and regular with the number of patients who are eligible under the Council's original regulations and who wish to receive treatment.

There is also the arrangements referred to in the last Annual Report for the reduction of the hospital charges throughout the year.

The scheme finally decided upon was the erection of a building on the vacant site at the rear of the Dental Hospital. The new treatment to accommodate the hospital and night clinics the ground above a Women's Hospital, and the top floor the new Dental Hospital. Each floor is to be self-contained, and there is to be a separate entrance from the street to each.

A plan of the proposed new building appears as a supplement to this Report.

STONKINGTON ALFRED DENTAL HOSPITAL, 1930

Report by Mr. H. L. Davies, L.D.S., R.C.S.D. (London).

The number of patients of all kinds and the number of attendances made by them has steadily increased throughout the year. A temporary part-time Assistant Dental Surgeon was engaged in November to deal with patients of work which were by this arrangement reduced by the end of the year.

The policy of the Hospital has been "Hospital treatment with private practice facilities," and all members of the staff have worked in this spirit.

The practice surgeons saved their premises for a part-time Hospital, but they are no longer sufficient. With the prospect of a new and up-to-date building in mind, there is every reason to believe that the Hospital will be better attended and more popular than ever.

It is hoped that the equipment of the new Hospital will include an X-Ray apparatus as more accurate and quicker results would be obtained than is possible under the present arrangement of referring patients to St. Leonard's Hospital.

proportion of patients postpone their visits until their teeth are so far decayed as to cause pain or to make extraction an urgent matter on grounds of health.

To deal with arrears of work, other than dentures, the services of a temporary Dental Surgeon were engaged for five sessions each week. Mr. Metcalf, L.D.S., R.C.S. (Eng.), was the gentleman appointed. He commenced duty on 3rd November, and was still attending the hospital at the end of the year.

The Committee also gave instructions that children of school age should only receive orthodontic treatment at the Dental Hospital, as these children were able to attend the London County Council school dental clinics.

As will be seen from the following figures, the arrears both of dentures and of other work had been considerably reduced by the end of the year :—

			Arrears of Denture work.		Arrears of other work.
27th September	...	...	196	...	496
26th December	...	...	30	...	111

It will be necessary early in the New Year to consider the steps necessary to be taken in view of the fact that it does not appear to be possible for the regular staff to deal with the number of patients who are eligible under the Council's original resolution and who wish to receive treatment.

Discussion upon the arrangements referred to in the last Annual Report for the rehousing of the Hospital continued throughout the year.

The scheme finally decided upon was the erection of a building on the vacant site at the rear of the Model Welfare Centre. The semi-basement to accommodate breast-feeding and light clinics, the ground floor a Women's Hospital, and the top floor the new Dental Hospital. Each floor is to be self-contained, and there is to be a separate entrance from the street to each.

A plan of the proposed new building appears as a frontispiece to this Report.

SHOREDITCH MUNICIPAL DENTAL HOSPITAL, 1930.

REPORT BY MR. H. L. DAVIES, L.D.S., R.C.S. (England).

The number of patients of all kinds and the number of attendances made by them has steadily increased throughout the year. A temporary part-time Assistant Dental Surgeon was engaged in November to deal with arrears of work which were by this means much reduced by the end of the year.

The policy of the Hospital has been "Hospital treatment with private practice civility," and all members of the staff have worked in this spirit.

The present premises served their purpose for a part-time Hospital, but they are no longer adequate. With the prospect of a new and up-to-date building in sight, there is every reason to believe that the Hospital will be better attended and more popular than ever.

It is hoped that the equipment of the new Hospital will include an X-Ray apparatus, as more accurate and quicker results would be obtained than is possible under the present arrangement of referring patients to St. Leonard's Hospital.

As a new hospital is being erected, I will refrain from further comment on the

I have endeavored to set out below the chief points of interest:

1.—SCHOOL CHILDREN.

The rapid increase of attendance made by the school children appears to be due to the fact that the Hospital is becoming more popular with this type of patient. The reason for this is probably that parents of the patients are finding that the Hospital is prepared to give close attention to the various diseases of the teeth and to the oral cavity, and to make the necessary adjustments in treatment for extracting them.

It must not be forgotten that the period of 5-14 years is very important for dental treatment because at these ages baby teeth are being shed and permanent ones coming into position. Owing to the present-day diet it is at this period that permanent teeth are misshapen and irregularly formed. The extraction of dental disease at this age will have a beneficial and far-reaching effect on the health of the child. Many children are sent to the Hospital because they have dental troubles. These are in my opinion caused by (1) insufficient attention to the mouth, (2) insufficient mastication and (3) improper brushing of the teeth.

If the child is a boy, who will be the father of to-morrow, he will be early and regular dental treatment which restores and perfects his teeth will be provided.

A most striking result is obtained in the branch of the work that has been the dental surgery, in which the patient is brought to the Hospital with a broken or loose tooth, and the tooth is replaced in its position and the patient is sent home with a new tooth.

2.—ORTHODONTIC TREATMENT.

The extraction of wisdom teeth.

Orthodontic treatment is now much more common than it was formerly. The treatment of the case which has been brought to the Hospital during the past few years has been very successful. The treatment is now being given to the patient in the Hospital and the patient is sent home with a new tooth.

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As a new Hospital is being erected, I will refrain from further comment on the present premises.

I have endeavoured to set out below the chief points of interest :—

1.—SCHOOL CHILDREN.

The rapid increase of attendances made by the school children appears to be due to the fact that the Hospital is becoming more popular with this type of patient. The reason for this is probably that parents of the patients are finding that the Hospital is prepared to give close attention to the various diseases of the teeth and to the saving of existing teeth where possible, in preference to extracting them.

It must not be forgotten that the period of 5-14 years is very important for dental treatment, because at these ages baby teeth are being shed and permanent ones coming into position. Owing to the present-day diet it is at this period that permanent teeth are misplaced and irregularly formed. The correction of dental diseases at this age will have a beneficial and far-reaching effect on the health of the Borough in years to come. Many children are sent to the Hospital because their bad teeth have caused digestive troubles. These are, in my opinion, caused by (1) absorption of septic matter from the mouth, (2) inefficient masticating area through loss of teeth.

If the child of to-day, who will be the citizen of to-morrow, receives early and regular dental treatment, much digestive and other illness will be prevented.

A most gratifying result obtained in this branch of the work has been the education of parents to accept the advice of the Dental Surgeon as to the treatment and preservation of baby teeth. Parents are too apt to come to the Hospital with a demand for wholesale extractions.

2.—ORTHODONTIC TREATMENT

(OR REGULATION OF MISPLACED TEETH).

Orthodontic treatment covers much more ground than is generally understood. A few of the cases which have passed through my hands at the Hospital during the past year will give one an idea of how varied the work really is, and what treatment the word "orthodontic" covers.

- (a) A boy, aged 9, with upper lip shortened, and in consequence a bad mouth breather. After treatment with a lip exerciser and an oral screen, the lip developed to such an extent that he is now a good nose breather, with a more intelligent look.
- (b) A child with the upper lip firmly attached to the upper gum, thus preventing the child from speaking correctly. After treatment, which necessitated cutting away the fibrous attachment, the child's lips are now quite normal.

- (c) A child with a receding lower jaw with the lower lip closing behind the upper teeth. By inserting plates in this case the jaw was brought forward to normal position.

Other cases consist of protruding teeth, instanding teeth, rotated teeth, teeth badly spaced and teeth badly crowded. These cases have all been successfully treated at the Hospital.

About 95 per cent. of the children who present themselves for orthodontic treatment are mouth breathers, the reason being that mouth breathing prevents the normal development of the jaws as no muscular movement takes place as in nose breathing. Furthermore, mouth breathers are :—

- (a) Flat chested.
- (b) Easily get out of breath when running.
- (c) Backward at school.
- (d) Suffer from adenoids and tonsilitis.
- (e) Always bear a dull vacant facial expression, and, to sum it up in a word, are of a C3 class.

It is to make these C3 children into A1 class that orthodontics are practised. There are, of course, exceptions even in this class of patient.

There is every reason to hope that an increasing number of parents will bring their children for this treatment as the Hospital gets better known.

3.—EVENING WORK.

At present there are only three evening sessions for day workers per week, or approximately 25 per cent. of the available time. This is proving inadequate. It would appear that extra evening sessions are required. Saturday is the best day of all for treatment of these patients, but, unfortunately, we should be compelled to forego other sessions if this were instituted.

4.—POPULARITY OF GENERAL ANAESTHETICS.

From the foregoing statistics, it will be seen that injections for extractions are becoming very much less frequent, being only 12·6 per cent. of the total. Gas is so popular that patients often prefer it even in cases in which a local anaesthetic is advised.

5.—STAFF.

I wish to take this opportunity to express my appreciation of the assistance I have received from all members of the staff.

In thanking the staff one and all, I will refer to Sister Frier's gift for making the patients welcome and for assisting them in all matters relating to their treatment.

VII—SHORTDITCH WOMEN'S HOSPITAL.

An important development of the Health Services of the Borough was approved by the Council at their meeting in March when it was decided to establish a Women's Hospital under section 75 of the Public Health (London) Act, in accordance with the following general scheme:—

Scheme of Hospital.

Women to receive advice and out-patient treatment on matters relating to their health, special attention being paid to slight degrees of ill-health.

The staff engaged to be in sympathy with the Council's resolution upon Birth Control.

Provision for special treatment in the Hospital to be arranged. If a woman is unable to attend, minor ailments to be treated at times when the doctor is not in attendance.

Medical Staff.

The Medical Staff required, who would be women, would be as follows:—

A General Practitioner.

A Generalist engaged in the use of contraceptives.

A Generalist to attend at the same time for two sessions each week.

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Hospital Treatment.

The treatment to be made, if possible, with the same Hospital, under which—

The treatment to be made, if possible, with the same Hospital, under which—

The treatment to be made, if possible, with the same Hospital, under which—

The treatment to be made, if possible, with the same Hospital, under which—

Histological Examination.

Histological examinations to be undertaken by Dr. James University College

Hospital, and the Hospital for the Borough.

Contraception.

Advice to be made under which cases to be attended by the Hospital

will be attended, and women to be attended by the Hospital.

Treatment for Tuberculosis.

Women who have been in the Borough of Shortditch to be eligible to attend

the Hospital, and to attend at the Hospital under the standard arrangement.

and to attend at the Hospital for the Borough.

On cases.

A case in which to be reported, and cases to be treated or referred to

the Hospital, and to attend at the Hospital under the standard arrangement.

and to attend at the Hospital for the Borough.

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VII.—SHOREDITCH WOMEN'S HOSPITAL.

An important new development of the Health Services of the Borough was approved by the Council at their meeting in March when it was decided to establish a Women's Hospital, under Section 75 of the Public Health (London) Act, in accordance with the following general scheme :—

SCOPE OF HOSPITAL.

Women to receive advice and out-patient treatment on matters relating to their health, special attention being paid to slight degrees of ill-health.

The staff engaged to be in sympathy with the Council's resolution upon Birth Control.

Provision for venereal disease treatment in the Hospital to be arranged. If a whole-time nurse is appointed, minor ailments to be treated at times when the doctors are not in attendance.

MEDICAL STAFF.

The Medical Staff required, who would be women, would be as follows :—

A General Physician.

A Gynæcologist experienced in the use of contraceptives.

(These doctors to attend at the same time for two sessions each week.)

A Specialist in the treatment of Venereal Disease to attend, say, one session every two weeks, to begin with, on a day on which a usual session is being held.

Women consultants on the staff of a general Hospital, to attend and see cases at the request of the regular Doctors.

HOSPITAL TREATMENT.

An arrangement to be made, if possible, with the same Hospital, under which—

(a) Cases requiring in-patient treatment shall be admitted.

(b) Cases requiring special treatment or examination by special methods shall receive the same by appointment.

BACTERIOLOGICAL EXAMINATIONS.

Bacteriological Examinations to be undertaken by Dr. Teale, University College Hospital, the Bacteriologist for the Borough.

CONVALESCENCE.

Arrangements to be made under which cases recommended from the Hospital shall be admitted, with youngest baby, if possible, to convalescent homes.

ELIGIBILITY FOR TREATMENT.

All women who live or work in the Borough of Shoreditch to be eligible to attend the Hospital, but In-patient treatment at a Hospital under the aforesaid arrangement, and convalescence to be limited to those residing in the Borough.

CHARGES.

A scale of charges to be prepared, such charges to be remitted or reduced to residents in the Borough who cannot afford them. Also a scale of income to be prepared to be applied as is done at the Dental Hospital. Arrangements to be made for payments to cover attendance for a course of treatment extending over a prescribed period.

GENERAL PRACTITIONERS.

General Practitioners in the Borough to be written to, and invited to send cases up for consultation or for special forms of treatment. Reports upon such cases to be sent from the Hospital to the Practitioners.

TIMES FOR SESSIONS.

To begin with, two sessions each week to be held—one afternoon session and one evening session.

STAFF.

The Clerical and Nursing Staff required would be as follows :—

- (i.) Part of time of lady clerk in the Public Health Department to be allocated to the clerical work.
- (ii.) One nurse to begin with—either part-time or whole-time.

If the nurse is engaged for whole-time, she could carry out the clerical duties.

RECORDS.

All records to be kept under numbers. The names and addresses of patients not to appear on case sheets.

At their meeting on the 20th May, 1930, the Council designated Dr. Helena Wright for the post of Gynæcologist.

It was later decided to accommodate this Hospital on the ground floor of a building to be erected on the vacant space at the rear of the Model Welfare Centre, and plans, which are reproduced as a frontispiece to this Report, were prepared by Mr. Hustler, the Borough Surveyor.

It will be noted that the building will house three different departments in such a manner that each will have its own separate entrance.

A Report should for the most part confine itself to recording work done, but inasmuch as this Hospital is likely to be the first of its kind in the country, brief reference will be made to the hopes that are entertained of the useful function that it will perform.

Experience in the now extensive Maternity and Child Welfare Services in the Borough has taught that there are a large number of ailments, some slight but debilitating, some serious and likely permanently to cripple health or to shorten life, from which women suffer, for the diagnosis and treatment of which existing facilities are inadequate.

Experience of the conditions in this Borough has further convinced the Council that the demand existing among working class married women for information as to methods of family limitation is one which should be met by the provision of facilities through the Public Health Services.

The latter, no less than the former, is essentially a medical question, and reference to the approved scheme for this Hospital will show that it is intended to place first rate medical advice upon all these matters at the service of the women of the Borough.

The preparation of plans and negotiations regarding the various sanctions to be obtained took considerable time, and work was not actually commenced upon the new building during the year under consideration.

VIII—HOUSING.

of the following particulars are given in the form required by the Ministry of Health:—

STATISTICS.

Number of new houses erected during the year:—

(a) Total including numbers given separately under (b):—

(i) By the Shirecliffe Borough Council:—

(ii) By other Local Authorities:—

(iii) By other bodies and persons:—

(b) Houses erected under the Housing Act:—

(i) By the Shirecliffe Borough Council:—

(ii) For the purposes of Part II of the Act of 1925:—

(iii) For the purposes of Part III of the Act of 1925:—

(iv) For other purposes:—

(v) By other bodies and persons:—

4. Duration of dwelling houses during the year:—

(a) Total number of dwelling houses reported for housing defect:—

(b) Number of dwelling houses reported for housing defect:—

(c) Number of inspection made:—

5. Number of dwelling houses (including under sub-head (i) above):—

reported and recorded under the Housing Corporation:—

Revolutions 1925:—

(i) Number of inspection made:—

(ii) Number of dwelling houses found to be in a state of dangerous:—

(iii) Number of dwelling houses found to be in a state of dangerous:—

(iv) Number of dwelling houses (exclusive of those stated in under the:—

provisional sub-head) found not to be in all respects satisfactory:—

(v) Number of inspection made:—

6. Number of dwelling houses found without satisfactory internal notice:—

(i) Number of dwelling houses found without satisfactory internal notice:—

(ii) Number of dwelling houses found without satisfactory internal notice:—

VIII.—HOUSING.

The following particulars are given in the form required by the Ministry of Health :—

STATISTICS.

Number of new houses erected during the year :—

(A) *Total including numbers given separately under (B)—*

(i.) By the Shoreditch Borough Council	...	...	...	...	0
(ii.) By other Local Authorities	...	...	...	...	55
(iii.) By other bodies and persons	...	...	...	...	0

(B) *With State assistance under the Housing Acts—*

(i.) By the Shoreditch Borough Council	...	...	...	...	0
(a) For the purpose of Part II. of the Act of 1925	...	...	...	...	—
(b) For the purpose of Part III. of the Act of 1925	...	...	...	...	—
(c) For other purposes	...	...	...	...	—
(ii.) By other bodies or persons	...	...	...	...	0

I. Inspection of dwelling houses during the year :—

1. Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	...	8,020
The number of inspections made	...	...	...	...	30,481
2. Number of dwelling houses (included under sub-head (i.) above) inspected and recorded under the Housing Consolidated Regulations, 1925	...	...	...	...	0
The number of inspections made	...	...	...	...	0
3. Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	0
4. Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	...	...	...	...	0

II. Remedy of defects during the year without service of formal notices :—

Number of defective dwelling houses rendered fit in consequence of informal action of Shoreditch Borough Council or its Officers	...	4,000
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III. Action under Statutory Powers during the year:—

A. Proceedings under Section 2 of the Housing Act, 1936:

(1) Number of dwelling houses in respect of which Notices were served requiring repairs	0
(2) Number of dwelling houses which were rendered fit after service of formal Notices:—	
(a) By owners	0
(b) By Borough Council in default of owners	0
(3) Number of dwelling houses in respect of which Closing Orders were operative in pursuance of requisitions by owners of intention to close	0

B. Proceedings under Public Health Acts:

(1) Number of dwelling houses in respect of which Notices were served requiring repairs to be remedied	1,126
(2) Number of dwelling houses in which defects were remedied after service of formal Notices:—	
(a) By owners	1,126
(b) By Borough Council in default of owners	0

C. Proceedings under Sections 11, 14 and 15 of the Housing Act, 1936:

(1) Number of requisitions made with a view to the making of Closing Orders	0
(2) Number of dwelling houses in respect of which Closing Orders were made	0
(3) Number of dwelling houses in respect of which Closing Orders were obtained, the dwelling houses having been rendered fit after service of formal Notices:—	
(a) Repairs were made	0
(b) Number of dwelling houses demolished in pursuance of requisition orders	0

IV. Total number of houses used by the St. Leonards Borough Council in

as follows: none of these were built within the last two years:—

(1) Part III of the Housing Act, 1936	251
(2) Part II of the Housing Act, 1936	277

(3) Other powers	
Housing of the Working Classes Act, 1890—built in	108 flats
acquired	11 shops
144 houses	
177 flats	
24 cottages	
15 houses	
renovated	

Housing Town Planning Act, 1919

III. Action under Statutory Powers during the year :—

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

(1) Number of dwelling houses in respect of which Notices were served requiring repairs	0
(2) Number of dwelling houses which were rendered fit after service of formal Notices—	
(a) By owners	0
(b) By Borough Council in default of owners	0
(3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	0

B. Proceedings under Public Health Acts :

(1) Number of dwelling houses in respect of which Notices were served requiring defects to be remedied... ..	1,126
(2) Number of dwelling houses in which defects were remedied after service of formal Notices—	
(a) By owners	1,126
(b) By Borough Council in default of owners	0

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

(1) Number of representations made with a view to the making of Closing Orders	0
(2) Number of dwelling houses in respect of which Closing Orders were made	0
(3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit	0
(4) Number of dwelling houses in respect of which demolition orders were made	0
(5) Number of dwelling houses demolished in pursuance of demolition orders	0

IV. Total number of houses owned by the Shoreditch Borough Council is as follows ; none of these were built within the last two years :—

(1) Part III. of the Housing Act, 1925... ..	Nil
(2) Part II. of the Housing Act, 1925	Nil
(3) Other powers :—	
Housing of the Working Classes Act, 1890—built or acquired	<div> 106 flats 11 shops 144 houses </div>
Housing, Town Planning, &c., Act, 1919	<div> 115 flats 14 cottages 15 houses renovated </div>

Housing Committee

... it may be said that the housing conditions are bad and constitute the worst factor in the environment of the inhabitants of Shanghai.

The total number of houses in the Bund is estimated to be 14,026, of which the number occupied by the working class is approximately 13,700.

The average number of houses to the acre is 21, but in the Bund, which is the best and most modern part of the city, this average is considerably exceeded in the densely populated residential districts.

The approximate number of the various types of houses is as follows:—

Two-room cottages	501
Four-room cottages	2,031
Six-room houses	2,968
Tenement houses	2,964
Blocks of tenement dwellings	219 containing 2,088
Separate dwellings	...

In his Annual Report for the year 1913 my predecessor wrote: "Much of the residential area in Shanghai is old, the wear and tear is great, and it will always require much looking after."

The houses which have since elapsed have served to replace the general position thus described.

Further information as to the housing conditions can best be given by quoting the following figures from the Census of 1911:—

HOUSING CONDITIONS.

General observations.—Speaking generally, it may be said that the housing conditions are bad and constitute the worst factor in the environment of the inhabitants of Shoreditch.

The total number of houses in the Borough is estimated to be 14,026, of which the number occupied by the working classes is approximately 13,700.

The average number of houses to the acre is 21, but as Moorfields Ward, which adjoins the City, is largely and increasingly occupied with business premises, this average is considerably exceeded in the densely populated residential districts.

The approximate number of the various types of houses is as follows :—

Two-room cottages	...	...	...	...	601
Four-room cottages	...	...	...	...	3,051
Six-room houses	...	...	...	...	3,968
Tenement houses	...	...	...	...	2,994
Blocks of tenement dwellings	...	...	...	...	249 containing 3,088 separate dwellings.

In his Annual Report for the year 1919 my predecessor wrote : “ Much of the residential house property in Shoreditch is old, the wear and tear is great, and it will always require much looking after.”

The eleven years that have since elapsed have served to aggravate the general position thus described.

Sufficiency of supply of houses.—Information under this heading can best be given by quoting the following figures from the Census of 1921 :—

1 Wards.	2 Population.	3 Area in Acres.	4 Persons per Acre.	5 Private Families.	6 Population in Private Families.	7 Structurally Separate Dwellings Occupied.	8 Rooms Occupied.	9 Rooms per Person.	10 Structurally Separate Dwellings per Acre.
Moorfields ...	4,349	71	61	1,106	4,313	910	3,257	0.76	12.8
Church ...	17,153	105	163	4,207	16,928	2,506	10,338	0.61	23.9
Hoxton ...	16,686	79	211	4,307	16,507	2,297	10,310	0.62	29.0
Wenlock ...	16,287	96	170	3,793	15,097	1,619	9,536	0.63	16.5
Whitmore ...	16,761	81	207	3,939	15,793	1,955	9,693	0.61	24.1
Kingsland ...	10,484	72	146	2,550	10,448	1,377	7,103	0.68	19.1
Haggerston ...	10,381	68	153	2,329	10,300	1,436	6,599	0.64	21.1
Acton ...	12,147	86	141	3,142	12,108	1,627	8,980	0.74	18.9
Shoreditch ...	104,248	658	158	25,373	101,494	13,727	65,816	0.65	20.9
London ...	4,484,523	74,850	60	1,120,897	4,243,838	701,035	4,057,271	0.96	9.4

Notes on foregoing table.

Column 2.—According to the Registrar General's estimate there has been a fall in the Shoreditch population since the Census amounting to approximately 4 per cent.

Column 4.—The density of the population per acre in Shoreditch is now estimated to be 150.

Columns 5 & 6.—Present-day estimate for Shoreditch is 4 per cent. less than Census figure.

Column 7.—The estimated number of the dwellings is now 13,700.

Column 10.—It is important to remember when considering figures in this column and in others in which reference is made to dwellings, that there are a large number of factories, workshops and business premises in Shoreditch, and that these are not included in figures here given. The proportion of these business premises is highest in Moorfields Ward.

From the foregoing it will be seen that Shoreditch is seriously overcrowded both as regards the number of buildings it contains and the number of persons housed therein.

A large proportion of the dwellings are old and dilapidated, and though originally designed as the houses of single families are now inhabited by two families or more without having been adapted for this purpose.

Of the families living under these conditions, it may safely be said that a great number would not continue to do so if both the extra rent for better accommodation, and the cost of travelling between the areas in which this is available and their workplace, could be afforded.

In a word, the housing difficulty in this Borough is due not to a lack of houses, of which there are already too many, but to the fact that owing to a complex variety of circumstances, too many people are compelled to live in this small area.

For many years the population of Shoreditch has been decreasing; this tendency being due to the replacement of dwelling houses by business premises in the neighbourhood of the City, and to the improved facilities for travel which make it possible for those who can so afford to live in less crowded areas.

But for the war and subsequent legislation, the effect of industrial and economic causes would undoubtedly have been to accelerate the demolition of dwelling houses, and the industrialisation of the area. The Rent Restriction Acts, however, have checked this tendency.

In considering changes in the population to be anticipated in the future, it would appear certain that industrialisation, and consequent fall in population, will continue, but how quickly or slowly this inevitable change will occur must depend to a great extent upon future legislation as affecting the security of the tenant.

I have to thank Mr. Bean, the Council's Valuation Officer, for the following note showing the relative numbers of dwelling houses and business premises in the Borough at the present time :—

“Of the 17,195 separately rated hereditaments appearing in the rate book, 14,183 are occupied as dwelling houses, or are rateable as such, and 3,012 are occupied solely for business premises.”

The number of separately rated hereditaments per acre in the Borough is 26.

Overcrowding.—There are a great many houses in which there are two or more persons per room, and in which persons of the opposite sex over twelve years of age are obliged to occupy the same sleeping apartment, although not living together as husband and wife.

Owing to the generally overcrowded state of the Borough and the very great difficulty experienced by poor persons in finding alternative accommodation, it has not been practicable to apply a uniform standard of overcrowding to all cases. The attention of the Health Committee has, however, been directed to houses in which

the cubic space per head has been less than that laid down in the Hygiene Regulations, 1912, and is not allowed by the Local Government Board in October, 1912.

Shedding rooms. Not less than 500 cubic feet free air space per head per person over 10 years of age.

Not less than 150 cubic feet free air space per head per person under 10 years of age.

Hotels and boarding houses. Not less than 500 cubic feet free air space per head per person over 10 years of age.

Shedding rooms. Not less than 300 cubic feet free air space per head per person under 10 years of age.

I have also visited industrial districts in which new houses or dwellings can be built and would houses or houses are extremely rare and quickly become untenable.

The question of the extent of the overcrowding accordingly resolves itself into the question of what a proportion of those upon whom 100,000 is compelled to seek housing accommodation in the small area.

The fact is that the industrial, economic and vocational. Last century the population of Birmingham was greater than it is to-day, and consisted of a densely packed population in the south of the Borough, which clustered round the business premises and workshops in and adjoining the City, and a more sparsely distributed population in the Northern part.

Actually the business premises have captured the space adjoining the City, and the most numerous residents have moved farther afield. The result has been that a large proportion of the population has been shifted to the working class. The number of houses originally designed for one family and now occupied by two or more families without having been adapted for this purpose, must be in the neighbourhood of 50,000.

The result of a large proportion of the population in the Borough are faced under the Rent Restriction Acts and are thus lower than rents for corresponding unregulated accommodation elsewhere. This fact and the additional expense in the form of taxes to which a householder is subjected when the rent would render their habitable conditions to exert economic pressure upon the working class under crowded or otherwise unsatisfactory housing conditions to remain where they are.

Notwithstanding the fact made to the steady growth of business premises in the South of the Borough, the new estate along the South-west border, and but for the fact that the working class would have been much more rapid.

The industrial and working class living in Birmingham are largely employed in these various industries, or in adjoining areas, and when out of employment they have to obtain work in or near their homes. Thus, whether in work or out of work, the pressure of an industrial area in which proximity is a further and strong inducement to those of working age to remain in the locality.

the cubic space per head has been less than that laid down in the Byelaws respecting houses let in lodgings allowed by the Local Government Board in October, 1912, viz. :—

Sleeping rooms ...	Not less than 300 cubic feet free air space per head per person over 10 years of age.
	Not less than 150 cubic feet free air space per head per person under 10 years of age.
Rooms used for both living and sleeping.	Not less than 400 cubic feet free air space per head per person over 10 years of age.
	Not less than 200 cubic feet free air space per head per person under 10 years of age.

There is no vacant land available in Shoreditch on which new houses or dwellings can be built, and vacant houses or rooms are extremely rare and quickly become re-tenanted.

The question of the cause of the overcrowding accordingly resolves itself into the question of why a population of close upon 100,000 is compelled to seek housing accommodation in this small area.

The reasons for this are historical, economic and vocational. Last century the population of Shoreditch was greater than it is to-day, and consisted of a densely crowded working class population in the South of the Borough, which clustered round the business premises and workshops in and adjoining the City, and a more prosperous residential population in the Northern part.

Gradually the business premises have replaced the slums adjoining the City, and the more prosperous residents have moved further afield. The result has been that Shoreditch is now chiefly inhabited by members of the working classes. The number of houses originally designed for one family and now occupied by two or more families, without having been adapted for this purpose, must be in the neighbourhood of 6,000.

The rents of a large proportion of the lettings in the Borough are fixed under the Rent Restriction Acts, and are thus lower than rents for corresponding unrestricted accommodation elsewhere. This fact and the additional expense in the form of fares to which a home away from the area would render them liable, combine to exert economic pressure upon those living under crowded or otherwise unsatisfactory housing conditions to remain where they are.

Reference has been made to the steady growth of business premises in the South of the Borough. This now extends along the South-west border, and but for the Rent Restriction Acts, would have been much more rapid.

The inhabitants of working age living in Shoreditch are largely employed in these business premises, or in adjoining areas, and when out of employment they hope to obtain work in or near their homes. Thus, whether in work or out of work, the presence of an industrial area in close proximity is a further and strong inducement to those of working age to remain in the locality.

A special committee is created if young men and women who are living at home are able to return home for their school meals.

The number of cases of overcrowding coming to the notice of the Officers of the Health Department during the year was 130. It must be understood that these were not cases which were as serious as to attract attention or cases which were the subject of complaint.

It is not possible to give the figures of the sanitary inspectors to take measurements of rooms of the houses. The Board as part of their routine inspections. To have done so would have required a great deal of time and would undoubtedly have brought to the attention of the Health Department a large number of cases which in which it was not possible to take the necessary action.

The following table shows the number of cases reported to the Health Committee during the year:

Overcrowding	130
Unsanitary conditions	44
Unsanitary conditions	48

The following table shows the number of cases reported to the Health Committee during the year:

Overcrowding: The sanitary inspectors should, explained, the Committee decided in all cases to take action and to give instructions to the owners to obtain better sanitary conditions.

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The following table shows the number of cases reported to the Health Committee during the year:

A great economy is effected if young men and women who are living at home are able to return home from work for their mid-day meal.

The number of cases of overcrowding coming to the notice of the Officers of the Health Department during the year was 136. It must be understood that these were bad cases which were so obvious as to attract attention, or cases which were the subject of complaint.

It has not been the practice of the Sanitary Inspectors to take measurements of cubic space available per head as part of their routine inspections. To have done so would have occupied a great deal of time, and would undoubtedly have brought to light many cases in which the requisite space was not available, but in which it was not practicable for the Sanitary Authority to take effective action.

Of the 136 cases of overcrowding referred to above, 92 were remedied as follows :—

Moved to L.C.C. estates outside the Borough	...	...	...	44
Moved elsewhere	...	...	...	48

In all, 47 cases of overcrowding were reported to the Health Committee during the year.

Owing to the general circumstances already explained, the Committee decided in all but one instance that nothing more could be done than to give instructions that the persons living under these conditions should be urged to endeavour to obtain better accommodation.

The full particulars of many of these cases were sent to the Ministry of Health. The following five examples will serve to illustrate the types of case to which reference has been made :—

No. 1.—No. of rooms, 3. Adults : male, 4 ; female, 4. Children : male, 2 ; female, 2. Cubic space available, 3,400 cub. ft. Cubic space required, 4,000 cub. ft.

This family require a 6-roomed house. The L.C.C. have not a house large enough on the Morden Estate, therefore unable to offer accommodation. Total income, £6 1s. per week.

No. 2.—No. of rooms, 2. Adults : male, 1 ; female, 5. Children : male, 2 ; female, 1. Cubic space available, 1,650 cub. ft. Cubic space required, 2,600 cub. ft.

Income, £2 1s. 6d. per week. Not sufficient to recommend to L.C.C.

No. 3.—No. of rooms, 1. Adults : male, 2 ; female, 1. Children : male, 2 ; female, 3. Cubic space available, 900 cub. ft. Cubic space required, 2,200 cub. ft.

Unwilling to go out of the Borough owing to employment. Tuberculosis in family. Income, £4 16s. per week.

No. 4.—No. of rooms, 2. Adults : male, 1 ; female, 1. Children : male, 5 ; female, 2. Cubic space available, 1,060 cub. ft. Cubic space required, 2,800 cub. ft.

L.C.C. refused to offer accommodation as applicant was not a suitable tenant. Income, £5 5s. per week.

No. 5.—No. of rooms, 1. Adults: male, 1; female, 1. Children: male, 2; Cubic space available, 500 cub. ft. Cubic space required, 1,200 cub. ft.

L.C.C. regret being unable to offer accommodation as rent of 17s. per week, together with travelling expenses, would be too great a strain on their resources. Income, £3 per week.

The circumstances in the isolated instance referred to above were as follows:—

A family consisting of father, aged 60, bedridden wife, daughter aged 16, and son aged 13, occupied a small back room on first floor, having a capacity of 500 cubic feet.

Owing to the fact that this room contained a considerable quantity of furniture, the air space was appreciably less than this figure.

There was no fire place or stove, and only one small broken window, measuring 5 square feet. The ceiling, which was sloping, varied in height from 5 to 8 feet. The walls and ceiling were dirty and dilapidated, and the floor was broken.

As it appeared to the Committee that the father had not made any serious attempt to find alternative accommodation or otherwise to comply with the notice urging him to abate the overcrowding, a summons was issued. An order was made for compliance within 14 days. Later it became necessary to issue a summons for non-compliance with this order, and the defendant was fined £5. An application by the defendant for an extension of time in which to pay this fine was granted, and at the expiration of the 14 days allowed, the defendant was committed to prison.

A period of nearly eight months elapsed between the facts of the case being reported to the Committee and the imprisonment of the defendant. The overcrowding was finally abated by the family moving to another part of London.

FITNESS OF HOUSES.

In the Ministry of Health Manual on Unfit Houses and Unhealthy Areas, 1919, the following standard of fitness is laid down. A fit house should be:—

1. Free from serious dampness;
2. Satisfactorily lighted and ventilated;
3. Properly drained and provided with adequate sanitary conveniences and with a sink and suitable arrangements for disposing of slop water;
4. In good general repair; and should have
5. A satisfactory water supply;
6. Adequate washing accommodation;
7. Adequate facilities for preparing and cooking food; and
8. A well ventilated store for food.

With regard to room darkness, it may be said generally that houses are kept as a rule in a state of darkness so far as rooms 1, 2 and 3 are concerned, but with regard to the other rooms a few lights are kept burning so as to give some satisfaction.

From the finding of lighting, attention must be made of the fire wiring scheme of the Housing Council. I am informed by Mr. Wheeler, the Housing Electrical Engineer, that up to 31st March 1931, the number of electric light installations provided under this scheme was 11,172. Nearly half the families in the Housing Council area have electric light in their homes.

It is interesting to find that the Housing Council has made provision for health and safety in the wiring of the houses, and that the Council is now in a position to provide a standard of health and safety in the wiring of the houses.

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It has been pointed out that many houses are overcrowded, and that the Housing Council is now in a position to provide a standard of health and safety in the wiring of the houses. It is also interesting to find that the Housing Council has made provision for health and safety in the wiring of the houses, and that the Council is now in a position to provide a standard of health and safety in the wiring of the houses.

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With regard to these desiderata, it may be said generally that houses are kept in a satisfactory condition so far as items 1, 3 and 5 are concerned, but with regard to the other items a very large number of houses do not conform to a satisfactory standard.

Under the heading of lighting, mention must be made of the free wiring scheme of the Borough Council. I am informed by Mr. Weekes, the Borough Electrical Engineer, that up to 31st March, 1931, the number of electric light installations provided under this scheme was 11,172. Nearly half the families in the Borough are thus enjoying the benefits of electric light in their homes.

Good artificial lighting in the home has such far reaching reactions upon health that this scheme must be regarded as an important ally of the Health Services.

Reference should also be made to the fact that steps have been taken to improve the lighting of the staircases of the tenement buildings in the Borough in accordance with Sec. 61 of the London County Council (General Powers) Act, 1927.

It has been explained that many houses are overcrowded, old and more or less dilapidated, that there is no vacant space for building, and no vacant dwelling house accommodation. The result of this combination of circumstances has been that the predominating activity of the Sanitary Authority has been to keep existing houses, so far as possible, in reasonable habitable repair by means of action under the Public Health (London) Act.

The number of houses dealt with during each of the last five years is as follows :—

1926 ... 6,213	1927 ... 5,736	1928 ... 6,357
1929 ... 5,347	1930 ... 5,126.	

It will be seen that the work carried out under the Public Health (London) Act is considerable. The procedure works well, and the requirements of the Inspectors are, on the whole, complied with in a reasonable manner.

No difficulty is experienced in taking action under the Public Health Act. In spite of the work done, however, in compliance with sanitary notices, these houses gradually become so defective structurally that they require to be largely rebuilt or reconditioned to prevent them from becoming dangerous and liable to be demolished in part or wholly under the direction of the District Surveyor of the L.C.C.

During 1930 dangerous structure notices were served respecting 148 premises.

This Authority has not availed itself of its power under section 3 of the Housing Act, 1925, for the following reasons :—

In practice little difficulty is experienced in requiring owners to keep houses in repair under the Public Health (London) Act. The fact that in many houses repairs could not be carried out while the house is occupied, and that there is nowhere for tenants to go, has deterred the Committee from taking action under the Housing Act.

The difficulty just referred to does not, of course, apply to empty houses, but these are now very few.

The following are the particulars of the results of the action that was taken under the Housing Act, 1919:

Houses scheduled as dilapidated and suitable for action under the Act	281
Houses purchased by Housing Council, repaired and let	13
Houses dealt with by owners without service of notice	57
Houses repaired by owners in compliance with notice	23
Houses repaired by Council in default of owners	4
Houses in respect of which owners appealed to Ministry of Health on grounds that property could not be repaired without reconstruction	20

In every case decision of Ministry was given in favour of owners.

The experience summarized above has had the effect of discouraging similar action under the 1919 Act for two reasons. In the first place difficulty was experienced by the Housing Council in recovering money spent upon repairs when the owners were in default. In the second, the result of appeals to the Ministry of Health created the impression that there was a large proportion of the houses deemed suitable for action under the 1919 Act were concerned, the Act was now likely to prove worthless.

For the last seven years a routine house-to-house inspection has been carried out, and the results of returning to light and of having repaired a very large number of houses. The number of houses inspected under this scheme has been as follows:

1917	4,403	1921	1,667	1925	1,455
1918	1,816	1922	2,876	1926	3,370
1919	2,207	1923	2,750	1927	3,976
1920	2,530	1924	1,967		

Water Supply.—Every dwelling house in the Borough has a water supply from the mains of the Metropolitan Water Board. In the great majority of cases the supply is made to the house, but there are some houses in which the tap is in the yard.

It has been explained that houses originally designed for one are now occupied by two or more families. In these houses the water supply has in the majority of cases been carried to one of the upper storeys.

Water Council.—With very few exceptions all houses have water-closets, and many have their own lavatories. In the case of tenement houses the original accommodation is frequently found to be inadequate, and a considerable

The difficulty just referred to does not, of course, apply to empty houses, but these are now very few.

The following are the particulars of the results of the action that was taken under the corresponding section (28) of the Housing, Town Planning, &c., Act, 1919:—

Houses scheduled as derelict and suitable for action under this Schedule	...	...	...	...	...	...	...	264
Houses purchased by Borough Council, repaired and let	...							13
Houses dealt with by owners without service of notice	...							57
Number of notices served	...	...	...	...	...	...		83
Houses repaired by owners in compliance with notice	...							32
Houses repaired by Council in default of owners	...							4
Houses in respect of which owners appealed to Ministry of Health on grounds that property could not be repaired without reconstruction	...	...	...	...	...	...		29

In every case decision of Ministry was given in favour of owners.

The experience summarised above has had the effect of discouraging similar action under the 1925 Act for two reasons. In the first place difficulty was experienced by the Borough Council in recovering money spent upon repairs when the owners were in default. In the second, the result of appeals to the Ministry of Health created the impression that in so far as a large proportion of the houses deemed suitable for action under this Section were concerned, the Act was not likely to prove workable.

For the last eleven years a routine house-to-house inspection has been carried out, and has been the means of bringing to light and of having rectified a very large number of defects. The number of houses inspected under this scheme has been as follows:—

1920	...	4,495	1921	...	1,987	1922	...	1,495
1923	...	1,619	1924	...	3,279	1925	...	3,270
1926	...	3,202	1927	...	2,756	1928	...	3,973
1929	...	2,050	1930	...	1,997			

Water Supply.—Every dwelling house in the Borough has a water supply from the mains of the Metropolitan Water Board. In the great majority of cases the supply is inside the house, but there are some houses in which the tap is in the yard.

It has been explained that houses originally designed for one are now occupied in many instances by two or more families. In these houses the water supply has, in the majority of cases, been carried to one of the upper storeys.

Water Closets.—With very few exceptions all houses have water-closet accommodation within their own curtilage. In the case of tenement houses the original accommodation is frequently found to be inadequate, and a considerable

number of water-closets to serve these houses are built yearly as a result of action taken by the Sanitary Authority.

In the few cases in which the water-closet is not within the curtilage, the house abuts upon a yard not used as a general thoroughfare.

V.—UNHEALTHY AREAS.

During the year 1919 the following areas were represented as insanitary under Part I of the Housing of the Working Classes Act, 1890 :—

1. Ware Street area, 14·2 acres in extent, comprising Phillip Street, Louisa Square, part of Whitmore Road, part of Hoxton Street, Smart's Buildings, Barrett's Buildings, Byng's Buildings, Wilmer Gardens, Louisa Street, Watson's Place, Ware Street, Nancy Street, Adelaide Place, Canal Road (south side), Mill Row, Halcombe Place, Halcombe Street, Reeves Place and Nuttall Street. The number of houses in the area is 574, but about 80 were empty and more or less in ruins. The average population for the five years ending 1918 was estimated at 5,000.

A scheme for the improvement of part of this area was made by the London County Council in May, 1920. The area included in this scheme was 9·2 acres on which a population of 2,621 occupied 349 houses.

A local Enquiry was held at the Town Hall in November, 1920. The scheme was approved by the Ministry of Health in June, 1922. Work upon the scheme was commenced in the Summer of 1924. By the end of 1930 the number of blocks of dwellings completed was 11, containing 319 tenements.

Two further blocks were in course of erection at the end of 1930, one in Kingsland Road, and one in Phillip Street. Eight sites included in the scheme still remain to be dealt with.

2. Britannia Gardens area, 1·68 acres in extent, comprising Britannia Gardens, Canton Terrace, Kingsnorth Place, Pimlico Walk, and Pounds Buildings. Included in this area are 114 houses with a population of about 560 persons.

3. Drysdale Place area, 2·19 acres in extent, including Crooked Billet Yard, Dodsley's Folly, Drysdale Place, Eliza Place, Windsor Place, and part of Drysdale Street, comprising 104 houses with an estimated population of 520 persons. A number of the houses in Windsor Place are derelict.

4. Lynedoch Street area, 1·8 acres in extent, comprising Lynedoch Street and Ely Place, including 152 houses with about 900 persons.

5. Wilks Place area, 0·56 acres in extent, including Barton Court, Wilks Place and Wilks Court ; the houses number 47 with an estimated population of 230 persons.

In January, 1921, the London County Council intimated to the Borough Council that this area would not be the subject of an improvement scheme for, say, seven years.

6. Foundry Place area, 0·7 acres in extent, including Foundry Place, Foundry Row, Foundry Walk, Royal Oak Place and Royal Oak Walk, the number of houses being 68 with an estimated population of 330 persons.

No improvement scheme has as yet been made by the London County Council respecting areas Nos. 2, 3, 4, 5 and 6, referred to above.

In 1929 the following area, population 506, was represented under Part II of the Housing Act, 1925 :—

Drysdale Street, even numbers 4 to 24 inclusive.

Drysdale Place, Nos. 1 to 32 inclusive.

Sarah Street, Nos. 1 to 26 inclusive, including Nos. 14A and 26A.

Eliza Place, Nos. 1 to 12 inclusive.

Crooked Billet Yard, Nos. 1 to 8 inclusive.

Windsor Place, Nos. 4 and 8 to 25, inclusive.

Basing House Yard, Nos. 1 to 5 inclusive.

At their meeting in November, 1929, the Council directed a reconstruction scheme to be prepared for the improvement of this area under Sec. 37 of the Housing Act, 1925.

It will be noted that this area is in the main the same as that represented in 1919 (No. 3 above).

At their meeting in October, 1930, it was resolved by the Council that the representation made by the Medical Officer of Health under Part II of the Housing Act, 1925, with respect to the Drysdale Street area, be referred to the L.C.C. with a view to such area being dealt with as an improvement area under the Housing Act, 1930.

VI.—HOUSES LET IN LODGINGS.

The houses on the register numbered 402, and the number of inspections made was 799. The general remarks regarding old and ill-adapted houses in the Borough apply with special force to the houses on this register. The Byelaws are adequate, and are reasonably complied with, the difficulties met with being due to the general housing situation.

VII.—GENERAL.

Consideration of the housing conditions in Shoreditch, of which the foregoing report gives a brief summary, forces a few conclusions upon the mind.

Firstly.—The great need of this district, which is a cockpit in which conflicting interests fight continually for building sites, is some form of authoritative zoning arrangement which will allocate certain areas for industrial development, and others for housing schemes.

Secondly.—In spite of the efforts that have been made, the number of new dwellings that have been built since the war is far too few having regard to the deplorable housing conditions that are known to exist. It will be noted that in 1919 six areas, containing a population of 7,540, were represented, and that of these a scheme has only been approved in respect of part of one (containing a population of 2,621), and that this scheme is not yet completed.

It is especially important that new schemes should be carried out quickly in an area in which, as has been explained, a large proportion of the houses are old, and many are literally falling into ruins. Further, when considered in terms of the lives of children, a few years is a long time. In ten years a very large number of children reach and leave behind them those impressionable years during which, of all the years in their lives, the greatest ill effects to mind and body are likely to result from living under the conditions implied by saying that their homes are situated in unhealthy areas.

Thirdly.—Reference should be made to the proposal of the Shoreditch Borough Council that free or assisted travel facilities be granted between home and workplace. If this were done, many workers with young children would be able to enjoy a home life in the less densely populated outlying districts.

Lastly.—There is the problem of rebuilding within the Borough.

The greatest difficulty in the path of housing schemes is to find alternative accommodation for those who occupy the houses to be demolished. The worse the overcrowding, the greater this difficulty, and hence a deadlock is reached during which the evils attendant upon long delays bear fruit.

The urgency of the situation is such that housing authorities should have power to provide temporary housing accommodation, as was done for soldiers during the war, either within or outside London, and if necessary to pay the travelling expenses of workers until the new homes are ready for occupation.

New dwellings in Shoreditch tend of necessity to take the form of blocks of tenement dwellings. During the last few years it has been most gratifying to see the improvement in happiness, health and standard of living enjoyed by many families who have moved into the flats in the Ware Street area.

The following is a list of tenement dwellings built in the Borough since the war :—

By the Borough Council—

St. Leonard's Dwellings, New North Road	...	...	...	40 flats.
Teale Street Dwellings	...	...	...	75 „

By the London County Council—

Ware Street Area Flats	...	...	...	319 „
Whiston Street Dwellings	...	...	...	12 „

By the Corporation of the City of London—

A block of 104 flats upon site adjoining Wenlock Road. These flats were built to accommodate persons displaced in connection with housing schemes in the City.

In 1930 data have been built in the House since the war.

Whatever the change in the population it is certain that there will be a large increase in the number of people living in the country for many years to come of which an increasing proportion will be housed in flats. A few general observations upon flats may accordingly be of use.

At present the flats recently built are a very great improvement upon the houses which they replace. Ideas however regarding housing accommodation are moving rapidly. It is now realised that a house should not only meet the essential requirements of health, but that the surroundings should be spacious and pleasant. The phrase "flat house" should be so designed as to make possible the continued enjoyment of leisure upon which the health of the mind depends as much as does the health of the body upon fresh air and good food.

Reports of flats recently built in Germany and elsewhere indicate that it has been possible from the Continent to pay more attention to this aspect of the housing question than we are doing in London. One hears of students round the flats nurseries in which children can be left while their parents are at work or enjoying themselves at the theatre, bathing pools and so forth.

The flats in a densely crowded urban area are at a disadvantage as regards health and happiness compared with those living where there is more elbow room, and the flat house should be designed as to compensate as far as possible for this disadvantage.

In all 550 flats have been built in the Borough since the war.

Whatever the changes in the population, it is certain that there will be a large residential population in Shoreditch for very many years to come of which an increasing proportion will be housed in flats. A few general observations upon flats may accordingly not be out of place.

As stated, the flats recently built are a very great improvement upon the houses which they replaced. Ideas, however, regarding housing accommodation are moving rapidly. It is now realised that a house should not only meet the essential requirements of health, but that the surroundings should be spacious and pleasant. The place called "home" should be so designed as to make possible the contented enjoyment of leisure upon which the health of the mind depends as much as does the health of the body upon fresh air and good food.

Reports of flats recently built in Germany and elsewhere indicate that it has been possible upon the Continent to pay more attention to this aspect of the housing question than we are doing in London. One hears of gardens round the flats, nurseries in which children can be left while their parents are at work or enjoying themselves at the theatre, bathing pools and so forth.

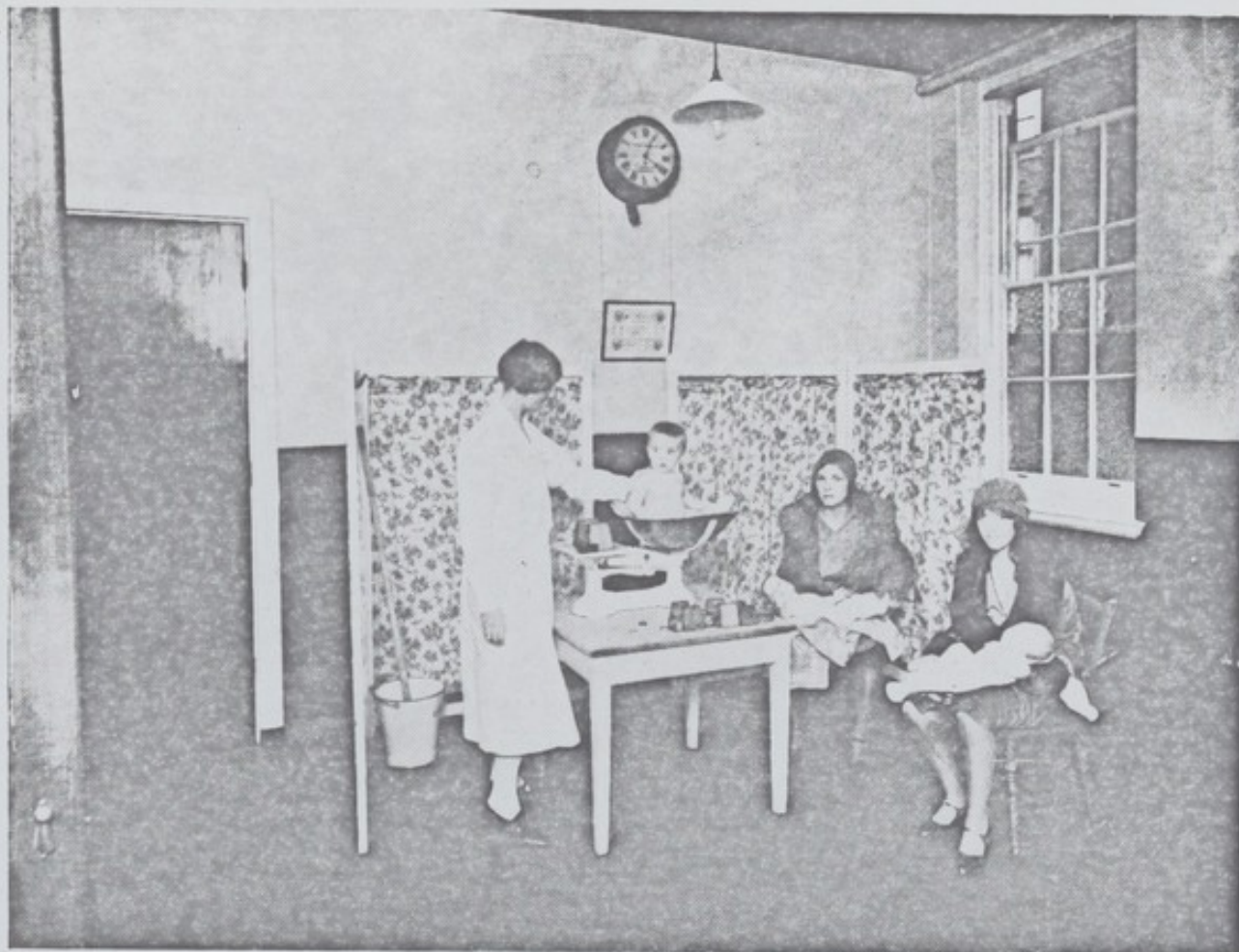
The dwellers in a densely crowded urban area are at a disadvantage as regards health and happiness compared with those living where there is more elbow room, and for this reason houses should be designed so as to compensate, as far as possible, for this disadvantage.



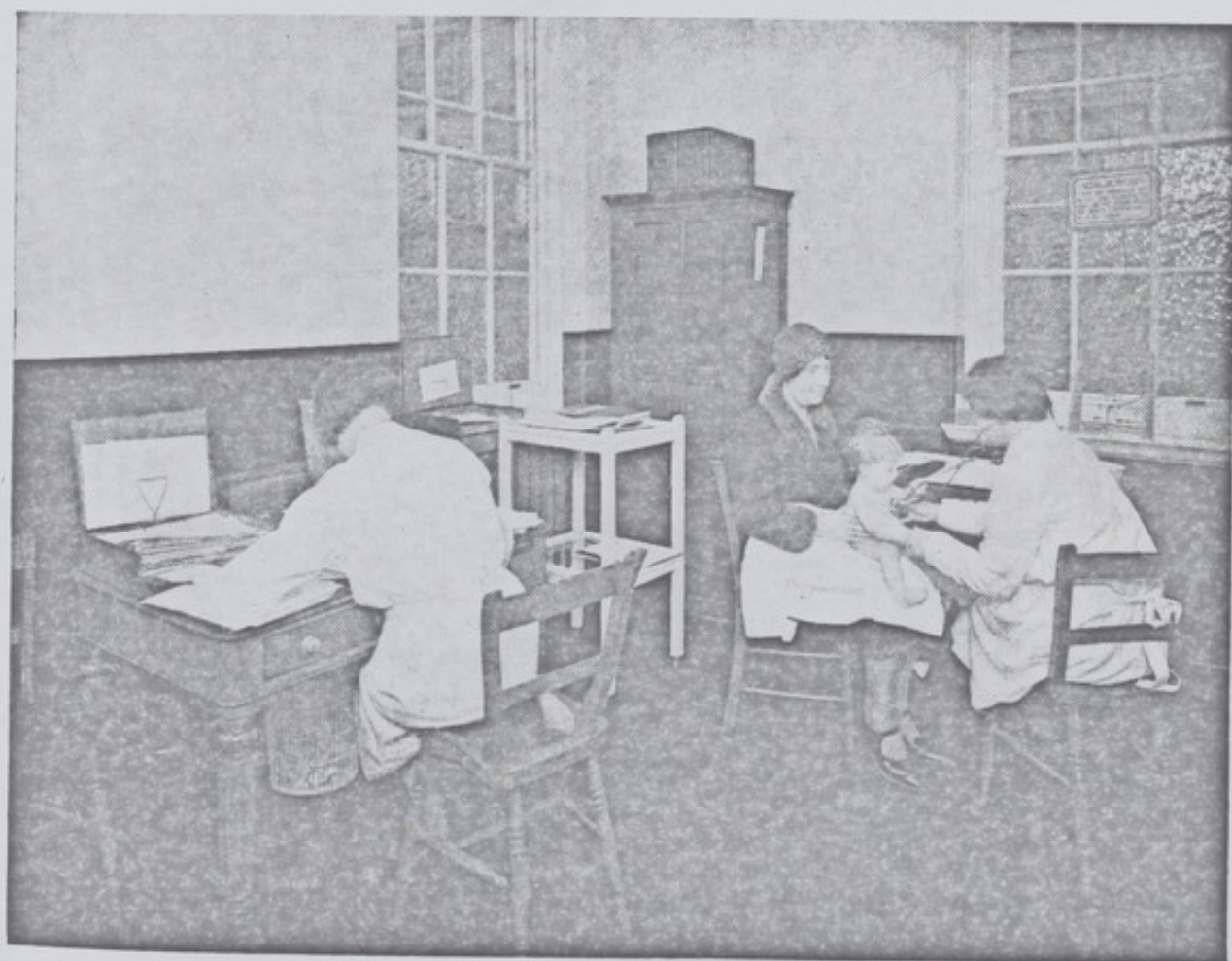
THE BROWN FAMILY, 1900



THE BROWN FAMILY, 1900



WEIGHING BABY.



DOCTOR'S CONSULTATION.

IX—MATERNITY AND CHILD WELFARE.

Home Visitation.

As has been explained in previous reports, the Borough is divided into seven districts, six being allocated to the six Health Visitors employed by the Borough Council and one to the two Health Visitors of the Shoreditch School for Mothers. The School for Mothers is a voluntary organization that has done excellent work in the Borough in close co-operation with the Town Hall for many years.

Home visiting is the mainstay of maternity and child welfare work upon which welfare-centres and ancillary activities depend for support. The increase in the number of Centres, however, necessitated by the steady growth of their popularity, makes it increasingly difficult to arrange the work of the Health Visitor so that the time available for home visiting is not unduly curtailed.

As in former years, we have been able to overcome this difficulty to some extent owing to the generous help given at the Centres by voluntary workers, to whom cordial thanks are tendered for their services.

On five days each week four students attend from the National Health Society. They are located in the various branches of maternity and child welfare work and are later, fortuitously, most useful in the general work of the department.

At the end of the year a scheme was under consideration for engaging Probation Health Visitors.

The number of visits paid by the Health Visitors during the year, particulars of which are given in the accompanying table, corresponds to approximately ten visits each per week for each of the necessary clinical work has been done. This is a good average if detailed and helpful advice is given in the home. When viewed, however, in relation to the total population to be visited, the amount of visiting cannot be regarded as excessive.

It is estimated that the children under one year received an average of three visits each. There are probably some 7,000 children in the Borough aged one to five, and approximately 2,500 visits were paid to these.

Infant Welfare Centres.

We have become used to crowded Centres in Shoreditch, and the year under consideration was no exception to the rule. Approximately 60 per cent. of all infants under one year were brought to the Centres making an average of eleven visits each.

Crowded Centres, however, although gratifying as evidence of the appreciation of the movement, do not afford the Health Visitors an opportunity to follow their best work, and it is impossible for them to give the full care and attention they wish to each individual if too large a number have to be passed through the Centres during each session.

At the end of the year the Committee were considering opening fresh Centres, which they hope to be able to do without encroaching unduly upon the time available for home visiting.

Particulars as to the attendances at the various Centres will be found in the accompanying table.

IX.—MATERNITY AND CHILD WELFARE.

HOME VISITING.

As has been explained in previous reports, the Borough is divided into seven districts, six being allocated to the six Health Visitors employed by the Borough Council, and one to the two Health Visitors of the Shoreditch School for Mothers. The School for Mothers is a voluntary organisation that has done excellent work in the Borough in close co-operation with the Town Hall for many years.

Home visiting is the mainstay of maternity and child welfare work, upon which welfare centres and ancillary activities depend for support. The increase in the number of Centres, however, necessitated by the steady growth of their popularity, makes it increasingly difficult to arrange the work of the Health Visitor so that the time available for home visiting is not unduly curtailed.

As in former years, we have been able to overcome this difficulty to some extent owing to the generous help given at the Centres by voluntary workers, to whom cordial thanks are tendered for their services.

On five days each week four students attend from the National Health Society. They are instructed in the various branches of maternity and child welfare work and are later, incidentally, most useful in the general work of the department.

At the end of the year a scheme was under consideration for engaging Probationer Health Visitors.

The number of visits paid by the Health Visitors during the year, particulars of which are given in the accompanying table, corresponds to approximately ten visits each per half day after the necessary clerical work has been done. This is a good average if detailed and helpful advice is given in the home. When viewed, however, in relation to the child population to be visited, the amount of visiting cannot be regarded as adequate.

Thus it is estimated that the children under one year received an average of three visits each. There are probably some 7,000 children in the Borough aged one to five, and approximately 9,500 visits were paid to these.

INFANT WELFARE CENTRES.

We have become used to crowded Centres in Shoreditch, and the year under consideration was no exception to the rule. Approximately 60 per cent. of all infants under one year were brought to the Centres, making an average of eleven visits each.

Crowded Centres, however, although gratifying as evidence of the appreciation of the mothers, do not afford the Health Visitors an opportunity for doing their best work, as it is impossible for them to give the full care and attention they wish to each individual if too large a number have to be passed through the Centre during each session.

At the end of the year the Committee were considering opening fresh Centres, which they hope to be able to do without encroaching unduly upon the time available for home visiting.

Particulars as to the attendances at the various Centres will be found in the table at the end of this section.

The weekly programme of Infant Welfare consultations (afternoons, 2 to 4)

Monday	Model Welfare Centre, 210, Kingsland Road Hoxton Market Institute
Tuesday	Model Welfare Centre, 210, Kingsland Road 22, Herbert Street Hoxton Hall
Wednesday	Model Welfare Centre, 210, Kingsland Road Hoxton Market Institute
Thursday	Model Welfare Centre, 210, Kingsland Road Central Clinic, 164, Kingsland Road 22, Herbert Street
Friday	Model Welfare Centre, 210, Kingsland Road Hoxton Market Institute

and children are referred to the following auxiliary centres—
 Model Welfare Centre
 There is no charge for the centre for 10 babies, or 2 babies and 2 mothers
 and the centre is open to babies suffering from disorders of nutrition, mothers
 can be consulted with their babies for the establishment of breast feeding.
 The centre will accept a patient (Miss Bennett) after two visits
 and four consultations.

For information relative to children admitted
 number of cases in the week on 1st January, 1930
 Number of cases admitted
 Number of cases referred
 Number of cases of day

Reasons for admission—
 Failure to maintain and healthy
 Examination
 Examination of digestion
 Examination of weight
 Examination of breast feeding

All cases admitted after a period of very much improved
 There was no case of chronic disease during the year
 Four cases were transferred to hospital

Two children received one from London and one from Westing in which the
 children were found to be post-natal examination to be required

For more details of the centre, this is held on Monday, Tuesday, Wednesday
 and Friday afternoon and is under the medical direction of the Medical Officer
 of Health. A lecture report from H.L.B. is read

Miss Pollard gives the treatment and is responsible for the records and the
 general management of the clinic

The weekly programme of Infant Welfare consultations (afternoons, 2 to 4) is as follows :—

Monday	...	...	{ Model Welfare Centre, 210, Kingsland Road. Hoxton Market Institute.
Tuesday	...	...	{ Model Welfare Centre, 210, Kingsland Road. 28, Herbert Street. Hoxton Hall.
Wednesday	...	...	{ Model Welfare Centre, 210, Kingsland Road. Hoxton Market Institute.
Thursday	...	...	{ Model Welfare Centre, 210, Kingsland Road. Dental Clinic, 164, Kingsland Road. 28, Herbert Street.
Friday	...	...	{ Model Welfare Centre, 210, Kingsland Road. Harbour Lights, Goldsmith Row.

Mothers and children are referred if necessary to the following ancillary Centres :—

Babies' Wards.—Model Welfare Centre.

There is accommodation at this Centre for 10 babies, or 8 babies and 2 mothers, and the cases treated are babies suffering from disorders of nutrition; mothers can be admitted with their babies for the establishment of breast feeding.

The nursing staff comprises a matron (Miss Borrow), sister, two staff nurses and four probationers.

Statistical summary relating to children admitted :—

Number of cases in the wards on 1st January, 1930	...	10
Number of cases admitted	...	54 babies and 3 mothers.
Average duration of stay	...	9 weeks.

Reasons for admission :—

Wasting and malnutrition and debility	...	26
Prematurity	...	5
Disorders of digestion	...	5
Observation	...	8
Weaning	...	2
Establishment of breast feeding	...	8

All those discharged were either normal or very much improved.

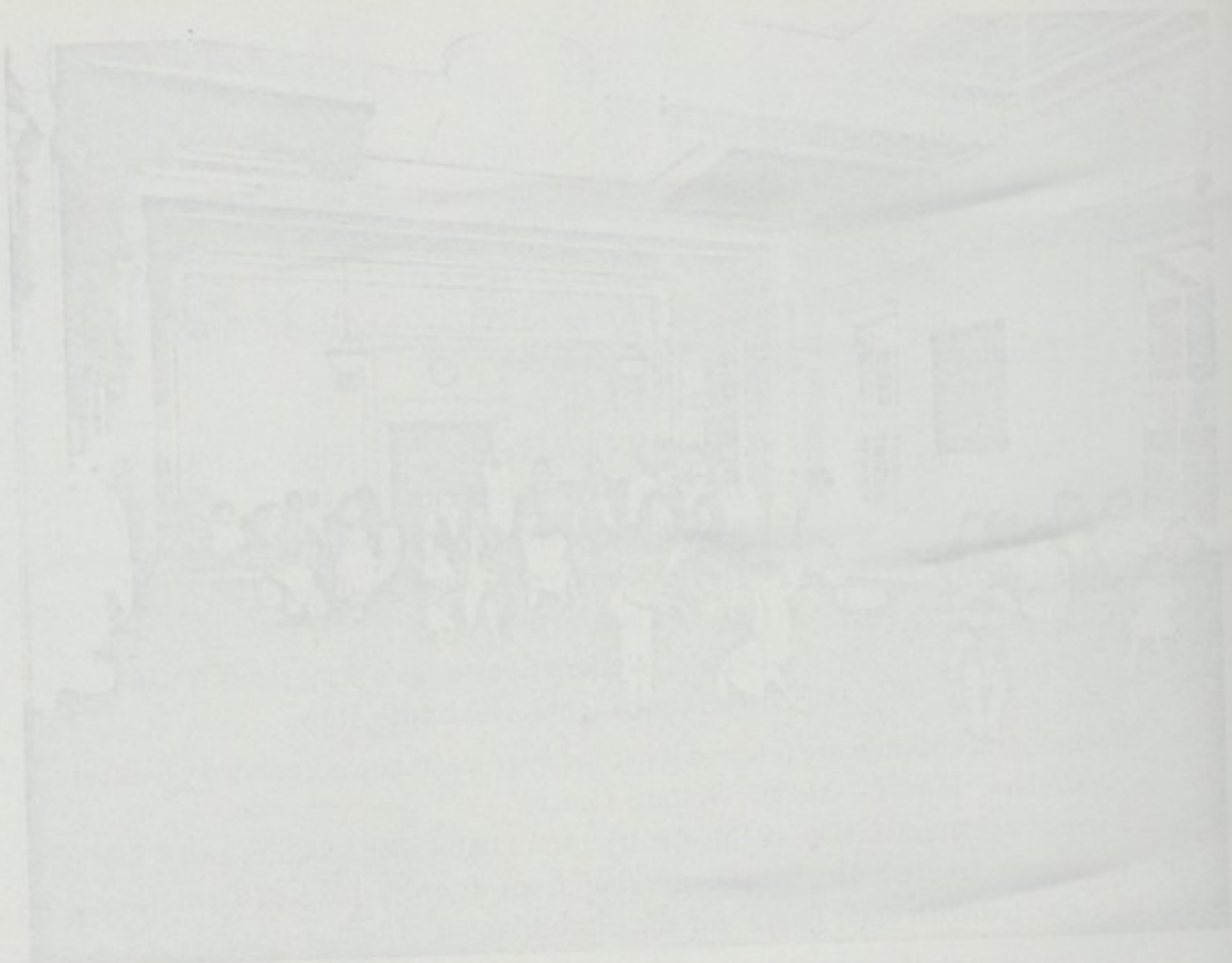
There was one case of infectious disease during the year.

Four cases were transferred to hospitals.

Two deaths occurred, one from Pneumonia and one from Wasting, in which the Thymus was found at the post-mortem examination to be enlarged.

Artificial Sunlight Clinic. This Clinic is held on Monday, Tuesday, Wednesday and Friday afternoons, and is under the medical direction of the Assistant Medical Officer of Health. A mercury vapour lamp (K.L.B.) is used.

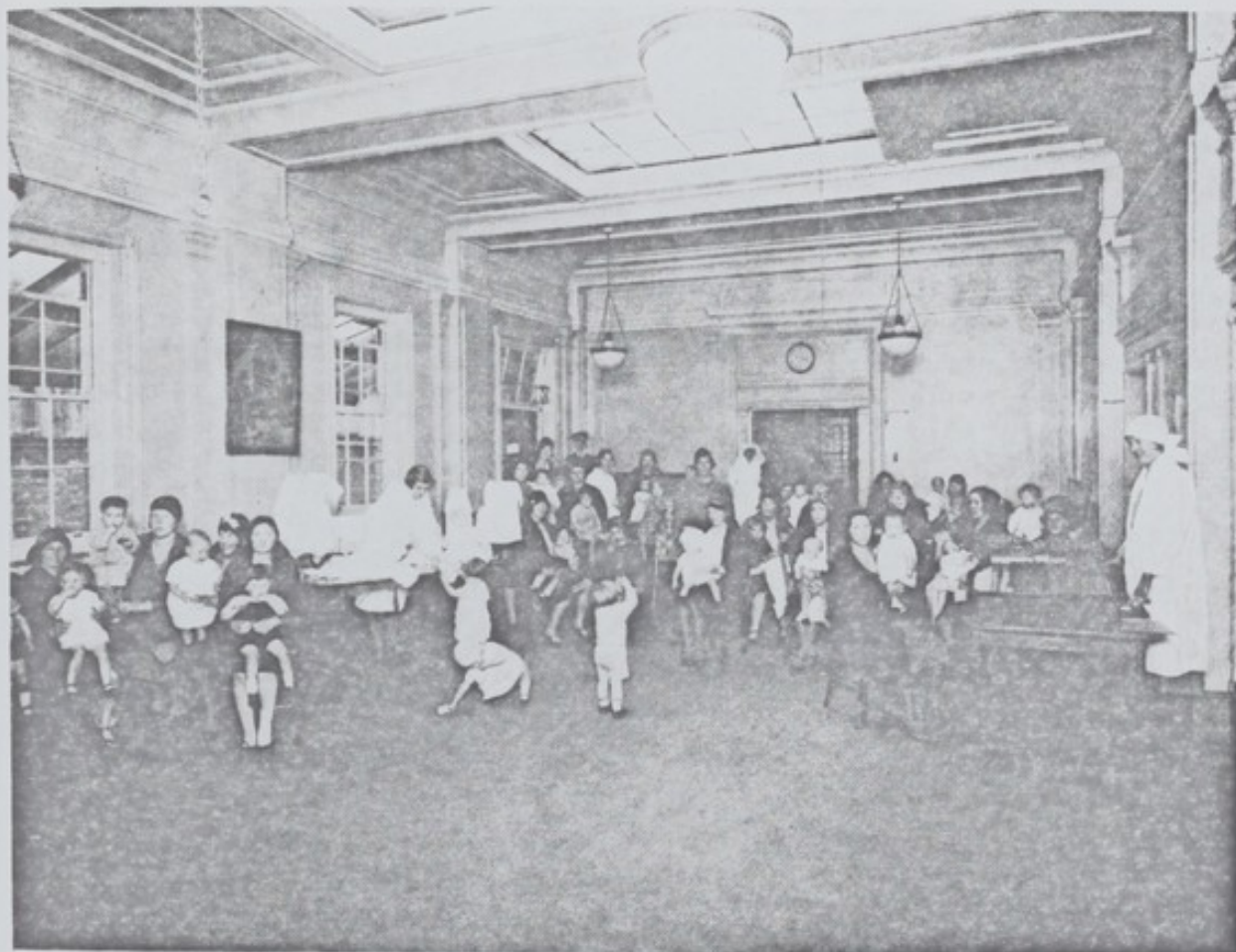
Sister Pollard gives the treatment and is responsible for the records and the general management of the Clinic.



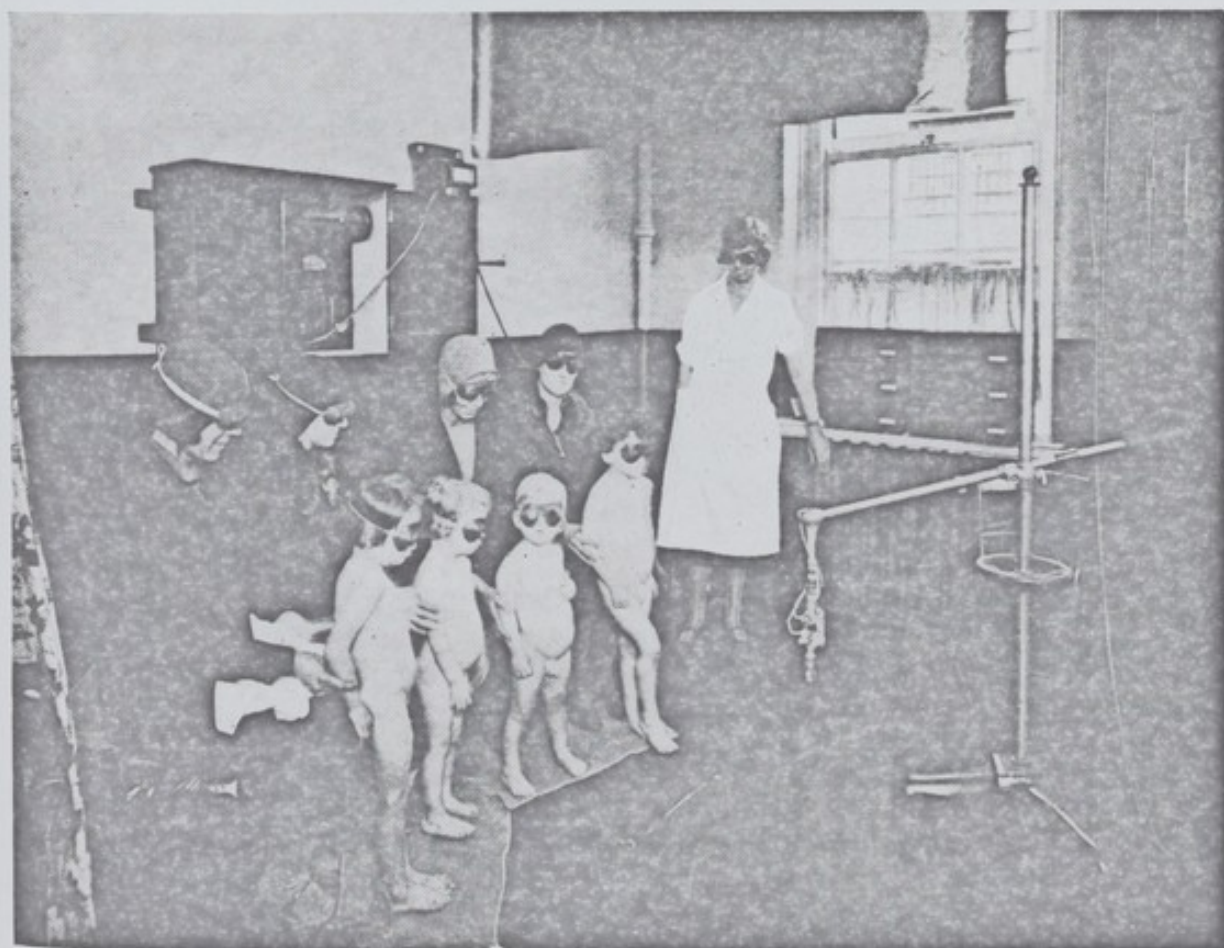
Students in the Large Hall, Mount Wilson Centre.



Students in the Large Hall, Mount Wilson Centre.



A GROUP IN THE LARGE HALL, MODEL WELFARE CENTRE.



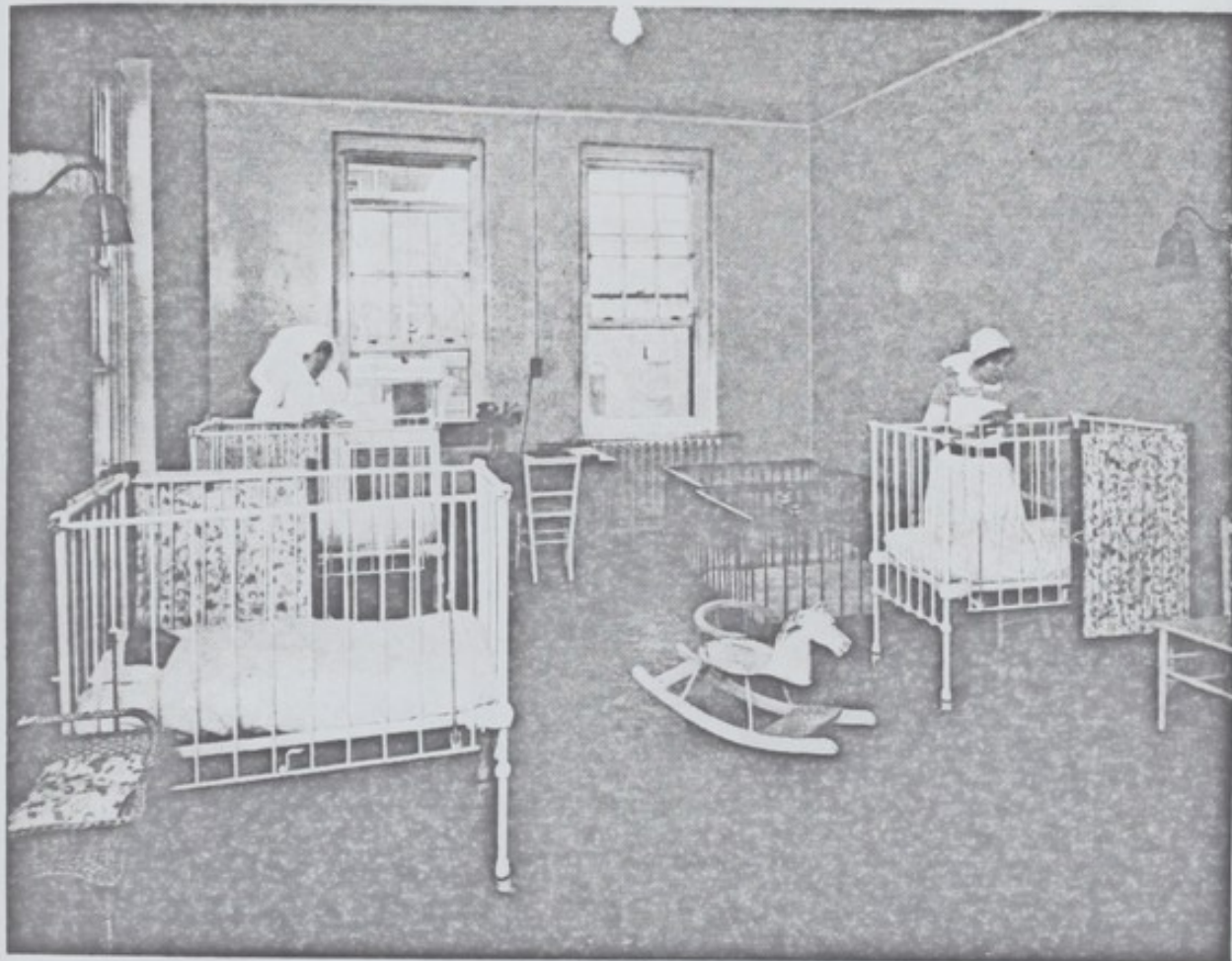
ARTIFICIAL SUNLIGHT CLINIC.



11225 North Western Avenue



11225 North Western Avenue



WARD, MODEL WELFARE CENTRE.



ROOF ADJOINING WARD, MODEL WELFARE CENTRE.

[To face page 100.]

During the year 244 children were referred to this Clinic, making 4,095 attendances. The average number of visits per child was 17, and the average number of attendances per session was 20.

The accommodation has been inadequate for some time, and arrangements have been made for the Clinic to be transferred to the basement of the new building to be erected on the vacant site at the rear of the Model Welfare Centre.

Very many thanks are due to the members of the Sutton Branch of the Voluntary Aid Detachment for the regular and willing help they have given. As in previous years, this help has contributed largely to the success of the Clinic.

OTORRHŒA CLINIC.

The *Otorrhœa Clinic* is held at the Model Welfare Centre every morning, Saturday included, from 10 to 11. The useful work of this Clinic has been continued throughout the year.

The Assistant Medical Officer of Health is responsible for the general supervision of the work and sees all patients once a week. Treatment is carried out by a Nurse supplied by the Shoreditch and Bethnal Green Nursing Association. A Health Visitor attends also on the day of the doctor's visit, and she assists in the general arrangement of the Clinics at other times.

Particulars of the Cases treated during the year are given in the following table :—

Diagnosis	Dis- charged well	Discont'd Treatment		Referred to Hospital	Still Attending	Totals
		Improved	Not Improved			
Otitis Media Suppurative ...	38	28	13	8	6	93
Otitis Media Catarrhal ...	5	7	2	—	—	14
Meatitis... ..	4	—	—	1	—	5
Internal Ear Disease ...	—	—	—	—	—	—
Eustachian Obstruction ...	—	—	—	—	—	—
Rhinitis... ..	4	3	1	—	—	8
Diphtheria Wax in Ears ...	6	—	—	—	—	6
Turbinate Disease ...	1	—	1	—	—	2
No Ear Disease found ...	7	—	—	8	—	15
Totals	65	38	17	17	6	143

DENTAL TREATMENT.

Dental treatment was first undertaken by the Borough Council to supply the needs of mothers and children attending the Welfare Centre, and it is satisfactory to be able to report that the number of cases referred from the Centres to the Dental Hospital for treatment continues to increase.

It is not necessary to repeat here what has already been written in the report upon the Dental Hospital as to the importance of dental treatment generally, but reference may be made to the fact that large numbers of children are found to have defective teeth when they are examined as school entrants. Early detection of

irregularity or decay in the teeth of children attending the Welfare Centres and the securing of proper treatment at the Dental Hospital should do much to improve the dental records of school entrants.

The number of cases reported from the Welfare Centres for dental treatment since this has been available are as follows :—

Year.	First Attendances.	Total Attendances.
1924	118	244
1925	138	479
1926	168	476
1927	279	682
1928	357	1,101
1929	266	1,413
1930	410	1,666

AGREEMENT WITH QUEEN'S HOSPITAL FOR EXAMINATION AND TREATMENT OF CHILDREN REFERRED FROM WELFARE CENTRES.

This Agreement which came into operation on 22nd January, 1930, contains provision for the following :—

- (1) Examination and report by member of Honorary Staff.
- (2) Treatment at Minor Ailment Centre.
- (3) Admission to Hospital of suitable cases for examination or treatment.

The following are the particulars of the cases referred under this Agreement during the year :—

Consultation Cases	...	...	...	...	...	107
Minor Ailment Cases	...	...	...	...	...	121
Admission to the Wards	...	...	...	...	...	2

SEWING CLASSES.

Two classes are held each week—one at the Model Welfare Centre on Thursday afternoon and one at the School for Mothers on Monday afternoon. These classes fulfil a most useful purpose, as many young girls in Shoreditch work in factories when they leave school and are ignorant of needlecraft when they marry.

The attendances at the Sewing Classes during the last five years have been as follows :—

	28, Herbert Street.	Model Welfare Centre.
1926	296	611
1927	484	592
1928	463	549
1929	319	526
1930	416	595

DINING CENTRES.

Two dining centres are maintained by the Maternity & Child Welfare Committee. Necessitous, nursing and expectant mothers are referred to these and derive great benefit. Expectant mothers are not entitled to receive dinners until the seventh month of pregnancy. Good midday meals at this time are of great value in building up the health of the mother, and in giving the child a good start in life.

The great aim is to ensure that the nursing mother is able to attend for dinner which the mother is unable to make possible for many to breast feed their babies who are otherwise weak from at least a few weeks.

The attendance at these two Centres during the year was as follows:-

Model Welfare Centre, 31, Herbert St.		Number of individual mothers attending	
122	114	...	...
8,749	8,628	...	...

MILK ALLOWANCES

An allowance of milk is made to necessitous nursing and expectant mothers and to children under 5 years of age whose parents are necessitous. These allowances which are made on the recommendation of the Health Visitor and the certificate of the Assistant Medical Officer of Health, after report by the Family Officer, are as follows:-

Expectant and nursing mothers	...	...	1 pint daily
Children under 5 years of age	...	...	1 pint daily
Children under 5 years of age (medical certificate)	...	...	1 pint daily
Children under 5 years of age (special medical certificate)	...	...	1 1/2 pints daily

The amount of milk per week is allowed at the discretion of the doctor instead of 1 pint daily.

The number of individuals in receipt of milk allowances which was 800 at the beginning of the year, reached a maximum of 1,300 in June and fell to 1,000 at the end of the year.

The amount of milk per week is allowed at the discretion of the doctor instead of 1 pint daily.

The number of individuals in receipt of milk allowances which was 800 at the beginning of the year, reached a maximum of 1,300 in June and fell to 1,000 at the end of the year.

Total Family Income per week		Free Dinner and Milk	
£ 4	£ 4	£ 4	£ 4
15 0	15 0	15 0	15 0
15 0	15 0	15 0	15 0
15 0	15 0	15 0	15 0
15 0	15 0	15 0	15 0
15 0	15 0	15 0	15 0
15 0	15 0	15 0	15 0
15 0	15 0	15 0	15 0
15 0	15 0	15 0	15 0
15 0	15 0	15 0	15 0

The amount of milk per week is allowed at the discretion of the doctor instead of 1 pint daily.

The number of individuals in receipt of milk allowances which was 800 at the beginning of the year, reached a maximum of 1,300 in June and fell to 1,000 at the end of the year.

This good start is continued by allowing the nursing mother to attend for dinners which are the means of making it possible for many to breast feed their babies who would otherwise wean them at once or after a few weeks.

The attendances at these two Centres during the year were as follows :—

					Model Welfare Centre.	31, Herbert St.
Number of individual mothers attending	...	...	...	...	114	122
Total attendances	...	...	...	...	6,625	8,749

MILK ALLOWANCES.

An allowance of milk is made to necessitous nursing and expectant mothers and to children under 5 years of age whose parents are necessitous. These allowances, which are made upon the recommendation of the Health Visitor, and the certificate of the Assistant Medical Officer of Health, after report by the Enquiry Officer, are as follows :—

Nursing and expectant mothers	...	...	...	...	...	1 pint daily.
Child under 3 years of age	...	...	...	...	...	1 pint daily.
Child 3-5 years (upon special medical certificate)	...	...	...	...	...	1 pint daily.
Child 3-18 months (upon special medical certificate)	...	...	...	...	...	1½ pints daily.

1 lb. of dried milk per week is allowed at the discretion of the doctor instead of 1 pint of wet milk daily.

The number of individuals in receipt of milk allowance which was 800 at the beginning of the year, reached a maximum of 1,200 in June and fell to 1,000 at the end of the year.

Necessitousness referred to above in connection with allowance of dinners or milk is determined by the application of the following scale to the family income. This scale was revised in February, as follows :—

No. in family.						Net family income per head.	
						Free Dinners and Milk.	Half-price Dinners and Milk.
						s. d.	s. d.
1	...	...	...	...	...	14 0	16 0
2	...	...	...	...	...	12 0	14 0
3	...	...	...	...	...	10 0	12 0
4	...	...	...	...	...	9 0	10 0
5	...	...	...	...	...	8 0	9 0
6 (and over)	...	...	...	...	...	7 0	8 0

In calculating the net family income for the purposes of this scale, there should be deducted from the gross income payments made in respect of rent and contributions for State insurances, for health, unemployment and pensions and voluntary contributions for hospital treatment.

Notes

The District Nursing Association undertakes the nursing of children under five years of age who are referred to them by medical practitioners and by the Maternity and Child Welfare Department. The number of visits paid was 2,501. The particulars of these cases will be found on page 28 of this report.

Convalescence

Children recommended for convalescent treatment by the doctors at the Maternity and Child Welfare Department are referred to the District Nursing Association. The Maternity and Child Welfare Committee make a contribution towards the cost in suitable cases after considering a report by the Secretary of the Local Council upon the financial aspect of the case.

The total number of children towards the cost of whose convalescence the Committee contributed during the year was 30.

The average period of convalescence was 9 weeks (not including one case away for treatment).

The convalescent had suitable conditions and benefit of open spaces, sunshine to make convalescent treatment most satisfactory for children who are found either to be suffering from illness or in a generally debilitated condition. At the end of the year the Maternity and Child Welfare Committee had under consideration the extension of the facilities for convalescent treatment and also the provision of convalescent treatment for George coming under their care.

School Examinations

The figures relating to the physical condition of children on entering school are as follows:

	Boys	Girls	Total
Number of children	972	930	1,902
Number with defects (other than dental) requiring treatment	411	342	753
Number with dental defects requiring treatment	307	287	594
Number with defects (other than dental) not requiring treatment	83	47	130
Number with dental defects (not requiring treatment)	13	4	17

For comparison purposes may be made between the number at defective school entrance in 1929 and in 1928 as a whole:

	1929	1928	1929	1928
Number of school entrance inspected	75,024	64,632	2,192	1,902
Number of school entrance requiring treatment (other than dental)	10,900	9,012	287	287
Number requiring treatment (other than dental)	472	150	110	110

NURSING.

The District Nursing Association undertake the nursing of children under five years referred to them by medical practitioners and by the Maternity and Child Welfare Department. The number of visits paid was 2,491. The particulars of these cases will be found on page 36 of this report.

CONVALESCENCE.

Children recommended for convalescent treatment by the doctors at the Welfare Centres are referred to the Invalid Children's Aid Association. The Maternity and Child Welfare Committee make a contribution towards the cost in suitable cases after considering a report by the Secretary of the Care Committee upon the financial aspect of the case.

The total number of children towards the cost of whose convalescence the Committee contributed during the year was 30.

The average period of convalescence was 9 weeks (not including one case away for 19 months).

The overcrowding, bad housing conditions and dearth of open spaces, combine to make convalescent treatment most necessary for children who are found either to be recovering from illness or in a generally debilitated condition. At the end of the year the Maternity and Child Welfare Committee had under consideration the extension of the facilities at present available and also the provision of convalescent treatment for women coming under their care.

SCHOOL ENTRANTS.

The figures relating to the physical condition of children on attaining school age are of interest :—

	Boys.	Girls.	Total.
Number of entrants	972	930	1,902
Number with defects (other than dental) requiring treatment	111	107	218
Number with dental defects requiring treatment ...	307	283	590
Number with defects (other than dental) not requiring treatment	83	47	130
Number with dental defects (not requiring treatment)	13	6	19

An interesting comparison may be made between the number of defective school entrants in Shoreditch and in London as a whole :—

	London.		Shoreditch.	
	1929	1930	1929	1930
Number of school entrants inspected ...	76,024	64,632	2,103	1,902
Number found requiring treatment (other than dental)	13,072	10,856	264	218
Percentage requiring treatment	17.2	16.8	12.5	11.5

MATERNAL CARE.

Careful consideration has been given to the question of improving the facilities for safeguarding the health of the women of the Borough during pregnancy, confinement and the puerperium.

At the end of the year the arrangements made for this purpose were as follows :—

ANTE-NATAL CLINICS.

Model Welfare Centre, Wednesday morning (transferred from Hoxton Market Institute in April) ; Friday morning.

Shoreditch School for Mothers—Thursday morning.

The home visits to expectant mothers and total attendances at the Ante-Natal Clinics during recent years are shown in this table :—

Year.	Home Visits.		Attendances at Ante-Natal Centres.	
	First Visits.	Re-visits.	First Attendance.	Total Attendances.
1925	564	463	380	673
1926	641	559	504	863
1927	619	490	399	750
1928	592	453	412	763
1929	641	515	494	961
1930	626	579	525	984

It will be seen that both the number of visits and the number of attendances show a tendency to increase, and this is encouraging as evidence that the importance of examination and advice at this critical time is being more fully realised.

It has been previously reported that a panel of consultants was appointed and advice in regard to cases notified under the Puerperal Fever and Puerperal Pyrexia Regulations. The services of these Consultants have now been extended so as to include advice upon all conditions arising during pregnancy, parturition or the puerperium. To meet the anticipated increased demand for their services, two additional Consultants have been placed upon the panel. The complete list will be found in the section of this report dealing with the Staff.

The number of Midwives practising in Shoreditch is 40.

MATERNITY OUTFITS.

There was an increased demand for the packages of sterile dressings for confinement cases which were first supplied by the Borough Council during 1929. These are supplied on the recommendation of the doctor or midwife by whom the confinement is to be conducted. The cost of the packets to the Council is 5s. 10d., and the patient is asked to contribute what can be afforded.

During the year 838 packets of dressings were distributed. The following is a list of the contents of these packets :—

Sterilized Maternity Dressings—

2 Draw Sheets, Bolton sheeting, washable.

1 Binder, soft calico.

2 sheets of prepared paper for machines.
 1 Small Assessment Sheet.
 1 Pkt. Wool Labels for wool.
 2 Safety Pins.
 6 Laundry Towels, smaller.
 6 Laundry Towels, very large.

Home Help.

The scheme for the provision of Home Help, the inception of which was referred to in the last Annual Report, came into operation during the year under consideration. Towards the end of the year it was decided to work with a panel of Home Help. This has proved much better than selecting women at random as it affords opportunity for tuition in their duties.

Application for a Home Help is made by the husband, who is required to state his name and to give the name of his employer. The Home Help is provided in those cases in which the family income per head is within the following scale:—

Number in family	Income per head after deduction of rent	
	Free	Half price, i.e. 6d. per day, per week
1	21 0	20 0
2	18 0	17 0
3	15 0	14 0
4	12 0	11 0
5	10 0	9 0
6	8 0	7 0
7	6 0	5 0
8	4 0	3 0
9	3 0	2 0
10	2 0	1 0
11	1 0	0 0
12	0 0	0 0

The working arrangements and the duties of the Home Help under the scheme are explained in the following table, copies of which are given both to the Home Help and the family to which she is assigned:—

"Home Help"

Arrangements have been made by the Managers and Child Welfare Committee for the supply of Home Help to families in cases of children occurring in the Borough.

When a Home Help is selected in the selection of women for the Home Help both in regard to character and competence, the Managers and Child Welfare Committee cannot accept responsibility for the conduct of these Home Help.

- 6 Sanitary Towels, very large.
- 6 Sanitary Towels, smaller.
- 6 Safety Pins.
- 1 pkt. Wool Flakes, for wipes.
- 1 Small Accouchement Sheet.
- 2 Sheets of prepared paper for mackintosh.

HOME HELPS.

The Scheme for the provision of Home Helps, the inception of which was referred to in the last Annual Report, came into operation during the year under consideration. Towards the end of the year it was decided to work with a panel of Home Helps. This has proved much better than selecting women at random as it affords opportunity for tuition in their duties.

Application for a Home Help is made by the husband, who is required to state his earnings and to give the name of his employer. The Home Help is provided in those cases in which the family income per head is within the following scale :—

Number in Family.	Income per head after deduction of rent.	
	Free.	Half price, i.e., 6d. per day. hour
	s. d.	s. d.
1	21 0	40 0
2	18 0	35 0
3	15 0	25 0
4	13 6	19 0
5	12 6	16 0
6	11 6	14 0
7	10 0	12 6
8	9 0	11 0
9	8 0	10 0
10	7 6	9 0
11	7 0	8 6
12	7 0	8 0

The working arrangements and the duties of the Home Helps under this scheme are explained in the following leaflet, copies of which are given both to the Home Help and the family to which she is supplied :—

" HOME HELPS.

" Arrangements have been made by the Maternity and Child Welfare Committee for the supply of Home Helps to homes in cases of childbirth occurring in the Borough.

" Care has been taken in the selection of women to act as Home Helps both in regard to character and competency, but the Maternity and Child Welfare Committee cannot accept responsibility for the conduct of these Home Helps.

In any case where a Home Help is found inefficient or unsatisfactory in any respect, information should be sent at once to the Medical Officer of Health at the Town Hall.

The duties of a Home Help are as follows:—

On being summoned to the case, she must as soon as possible inform the Medical Officer of Health at the Town Hall. A stamped addressed envelope will be given for this purpose.

"She must not attend the case until the confinement is over, and her services are only to be given between the hours of 7 a.m. and 7 p.m. except in special circumstances."

"She is only expected to attend up to a maximum of 48 hours per week for two weeks. Any time in excess of this is not paid for unless special authority is given."

"The names of attendances must be entered on a time-sheet daily, which sheet is sent weekly by the patient or some responsible person on her behalf, and presented at the Town Hall for payment at each week is completed."

"The duties consist of general home management, including cooking, and a limited amount of washing, and the care of the children (and will not undertake laundry or washing)."

"A doctor and a nurse, or midwife, will be in attendance, and it must be fully understood that no nursing duties are to be undertaken by the Home Help."

"There are no special facilities for washing in the house, the Home Help will have a separate (bath, etc.) and out-of-pocket expenses, if any, will be paid."

"The Home Help is expected to provide meals for Home Help."

"Home Help will be under the general supervision of the Health Department, and they are expected to attend at the Model Welfare Centre, 210, Kingsland Road, as ordered from time to time for instruction in their duties."

The responsibilities for Home Help were not so drawn in the first instance, but were revised in their present form in order to prevent the possibility of a Home Help being placed in the neighbourhood of being present at a confinement at which the doctor is expected to attend.

Consideration of the position arising in homes in which the confinement is conducted by a doctor or student, and where consequently no arrangement is made for the necessary nursing duties during the post-natal period, led the Council to decide that they would supply a nurse to doctors, cases in a Home Help is being supplied.

The position of nursing students for the nursing of cases delivered by students in which a Home Help is supplied was taken up with the Hospital concerned, and it was decided that at the end of the year.

It was decided that in cases in which a Home Help was supplied was 25, and in two of these a nurse was supplied also.

In any case where a Home Help is found inefficient or unsatisfactory in any respect, information should be sent at once to the Medical Officer of Health at the Town Hall.

"The Duties of a Home Help are as follows :—

"On being summoned to the case, she must as soon as possible inform the Medical Officer of Health at the Town Hall. A stamped addressed envelope will be given for this purpose.

"She must not attend the case until the confinement is over, and her services are only to be given between the hours of 7 a.m. and 7 p.m. (except in special circumstances).

"She is only expected to attend up to a maximum of 48 hours per week for two weeks. Any time in excess of this is not paid for unless special authority is given.

"The times of attendances must be entered on a time-sheet daily, which sheet should be signed by the patient or some responsible person on her behalf, and presented at the Town Hall for payment as each week is completed.

"The duties consist of general home management, including cooking, not more than two weeks' washing, and the care of the children (she will not undertake arrears of washing).

"A doctor and a nurse, or midwife, will be in attendance, and it must be fully understood that no nursing duties are to be undertaken by the Home Help.

"If there are not suitable facilities for washing in the house, the Home Help will wash elsewhere (Baths, etc.) and out-of-pocket expenses, if any, will be paid.

"Patients are not expected to provide meals for Home Helps.

"Home Helps will be under the general supervision of the Health Department, and they are expected to attend at the Model Welfare Centre, 210, Kingsland Road, as requested from time to time for instruction in their duties."

The foregoing rules for Home Helps were not so drawn in the first instance, but were modified to their present form in order to prevent the possibility of a Home Help being placed in the predicament of being present at a confinement at which the doctor or midwife failed to arrive.

Consideration of the position arising in homes in which the confinement is conducted by a doctor or student, and where consequently no arrangement is made for the necessary nursing duties during the puerperium, led the Council to decide that they would supply a nurse to doctors' cases if a Home Help is being supplied.

The question of arrangements for the nursing of cases delivered by students in which a Home Help is supplied was taken up with the Hospitals concerned, and was still under discussion at the end of the year.

The number of cases in which a Home Help was supplied was 33, and in two of these a Nurse was supplied also.

ANALYTICAL CONSTITUTIONAL CHARTER

The agreement between the Borough Council and the City of London Authority, which was entered into in 1902, was a landmark in the history of the City of London. The following is a brief summary of the main provisions of the agreement:

The total number of cases dealt with was 1,500, of which 1,000 were examined by the City of London Authority, and 500 by the Borough Council. The number of cases dealt with by the City of London Authority was 1,000, and by the Borough Council 500.

The number of cases dealt with in the district during the period under review was 1,500, and in the City of London 1,000.

With a view to carrying out the provisions of the agreement, the Council entered into an agreement with the City of London Authority, which provided for the City of London Authority to examine 1,000 cases, and the Borough Council to examine 500 cases. The agreement also provided for the City of London Authority to examine 1,000 cases, and the Borough Council to examine 500 cases.

ANALYTICAL CONSTITUTIONAL CHARTER 1902

The agreement between the Borough Council and the City of London Authority, which was entered into in 1902, was a landmark in the history of the City of London. The following is a brief summary of the main provisions of the agreement:

The total number of cases dealt with was 1,500, of which 1,000 were examined by the City of London Authority, and 500 by the Borough Council. The number of cases dealt with by the City of London Authority was 1,000, and by the Borough Council 500.

ANALYTICAL CONSTITUTIONAL CHARTER 1902

The agreement between the Borough Council and the City of London Authority, which was entered into in 1902, was a landmark in the history of the City of London. The following is a brief summary of the main provisions of the agreement:

The total number of cases dealt with was 1,500, of which 1,000 were examined by the City of London Authority, and 500 by the Borough Council. The number of cases dealt with by the City of London Authority was 1,000, and by the Borough Council 500.

The agreement between the Borough Council and the City of London Authority, which was entered into in 1902, was a landmark in the history of the City of London. The following is a brief summary of the main provisions of the agreement:

The total number of cases dealt with was 1,500, of which 1,000 were examined by the City of London Authority, and 500 by the Borough Council. The number of cases dealt with by the City of London Authority was 1,000, and by the Borough Council 500.

The agreement between the Borough Council and the City of London Authority, which was entered into in 1902, was a landmark in the history of the City of London. The following is a brief summary of the main provisions of the agreement:

ANTE-NATAL CONSULTATIVE CENTRE.

The agreement between the Borough Council and the City of London Maternity Hospital, under which cases have been referred to this Clinic, expired on the 31st March.

The following is the report received from the Secretary for the first three months of the year, viz. :—

“ The total number of cases dealt with was 146, all of whom were examined by the Obstetric Surgeon in charge of the Department ; the number of examinations by the Surgeon was 270 and by the Sister 139.

“ The number of patients delivered in the district during the period under review was 28, and in the Hospital, 66. Urine was tested in all cases.”

With a view to carrying on and extending the excellent principle of co-operation with Hospitals embodied in the agreement just terminated, the Council entered into fresh agreements—one with the City of London Maternity Hospital and the other with St. Bartholomew's Hospital, under which cases could be referred for examination and report by a member of the Honorary Staff for a fee of half-a-guinea, and for admission to the wards at a charge of two guineas per week.

MINISTRY OF HEALTH MEMORANDUM 156/M.C.W.

This important Memorandum was issued by the Ministry of Health in December. At the end of the year the Committee were engaged in a careful consideration of the Ministry's suggestions in relation to the arrangements for maternal care already in being in this Borough.

Although nothing was definitely settled during the year covered by this report, it may be noted that these deliberations led to the recommendation that an additional Ante-Natal Clinic should be opened and that a Municipal Midwife should be appointed.

LOCAL GOVERNMENT ACT, 1929.

This Act, which came into force on 1st April, introduced important changes in the administrative arrangements in connection with Maternity and Child Welfare.

The 50 per cent. grant payable by the Ministry of Health upon approved expenditure which has proved of such assistance to a young and growing service has been discontinued. The equivalent of the grant previously made is now included in the Treasury block grant which is revised every few years.

The change from percentage grant to block grant was viewed with apprehension by many of those who are keenly interested in the expansion of Maternity and Child Welfare, as assistance from the Treasury for new schemes or extensions rendered necessary now lags behind any fresh expenditure incurred by the local authority.

It is to be hoped that these fears will prove groundless, and that the growth of the Maternity and Child Welfare services which are of great and far reaching importance to the health of the Nation will continue unchecked both in the Borough and in the country as a whole.

The discontinuance of the Ministry of Health grant has placed local authorities in a different relationship to the voluntary organisation to whom this grant was

mainly paid. The voluntary grant is now, in certain cases, included in that to be paid by the Government. It is provided that the voluntary organizations, subject to the following conditions, may set forth in the Ministry of Health a scheme proposed for the provision of the following services:

(i) That the Council are satisfied as to the efficiency of the Maternity and Child Welfare service provided by the association in respect of which the contribution is payable and that such service is being used by a reasonable number of those persons for whom it is provided;

(ii) That no restriction or abridgment of such service is made without the consent of the Council;

(iii) That such service, and any premises in which it is carried on, are open to inspection at all reasonable times by any officer of the Council duly authorized by the Council and by any officer of the Ministry of Health appointed for that purpose by the Minister;

(iv) That the association sends to the Council in each year a copy of the annual report of the association on maternity and child welfare work of the previous year, together with a statement of the accounts of the association for that year, together with a copy of the auditor's certificate thereon; and that the Council from time to time with such other information relating to the maternity and child welfare services provided by the association and the expenditure thereon as the Council may reasonably require; provided that the Council shall not enter into any contract with the Minister of Health, or any other authority, for the provision of any service on the ground that any of the conditions of the grant are not fulfilled in the case of that service.

The following voluntary organizations receive the designated Maternity Grant subject to the conditions set forth above:

1. The London School for Mothers.

2. The London School for Mothers. The London School for Mothers, which has been doing valuable work in the Borough for many years, administers the following maternity services:

School for Mothers, 25, Hawley Street, E.C. 4.

This is a centre for health visiting. Two Health Visitors are employed who are responsible for visiting in an area (District 7) in south-eastern London comprising some 1,200 children under five years of age, and in which about 100 births occur annually. The centre provides ante-natal, post-natal and family planning services. The Borough Council makes an annual grant of £10,000 to the centre under the Maternity and Child Welfare Act. The centre has been transferred to the Council.

formerly paid. The discontinued grant is now, in certain cases, included in that to the borough council concerned, by whom it is passed on to the voluntary organisations, subject to the following conditions set forth in the Ministry of Health scheme prepared under Section 101 of the Act :—

- (i) That the Council are satisfied as to the efficiency of the Maternity and Child Welfare service provided by the association in respect of which the contribution is payable, and that such service is being used by a reasonable number of those persons for whom it is provided ;
- (ii) That no reduction or alteration of such service is made without the consent of the Council ;
- (iii) That such service, and any premises in which it is carried on, are open to inspection at all reasonable times by any officer of the Council duly authorised by the Council, and by any officer of the Ministry of Health appointed for that purpose by the Minister ;
- (iv) That the association sends to the Council in each year a copy of the annual report of the association on maternity and child welfare work of the previous year, together with a statement of the accounts of the association for that year relating to such work, and a copy of the auditor's certificate thereon, and furnishes the Council from time to time with such other information relating to the maternity and child welfare services provided by the association and the expenditure thereon as the Council may reasonably require :

Provided that the Council shall not, except with the consent of the Minister of Health, terminate or make any reduction in the annual contribution payable to an association in respect of any service on the ground that any of the foregoing conditions are not fulfilled in the case of that service.

The following voluntary organisations receive the discontinued Ministry grant subject to the conditions set forth above.

SHOREDITCH SCHOOL FOR MOTHERS.

Amount payable in respect of discontinued grant—£755 1s. 6d. This organisation which has done most valuable work in the Borough for many years administers the two following institutions :—

SCHOOL FOR MOTHERS, 28, HERBERT STREET.

This is a centre for health visiting. Two Health Visitors are employed who are responsible for visiting in an area (District 7 in accompanying tables) containing some 1,600 children under five years of age, and in which about 460 births occur annually. Two Infant Welfare Centres, and Ante-Natal Centre and a Sewing Class are held weekly at this Centre. The Borough Council makes an annual grant of £200 in respect of the important duties under the Maternity and Child Welfare Act that have been delegated to this Centre.

BRUNSWICK DAY NURSERY, BRUNSWICK PLACE.

This Nursery accommodates 35 children. The attendances during the year were as follows: Whole days, 6,730; half days, 675.

Dr. Dancy, who is the doctor in charge of the Nursery, visits weekly. In case of emergency a local practitioner is consulted.

The staff consists of Matron, Nurse and six Probationers. The domestic staff consisting of daily cleaner, and laundry woman two days weekly, is non-resident.

SUN BABIES' NURSERY, NORRIS STREET, HOXTON.

Amount payable in respect of discontinued grant, £1,013 4s. 10d. This Day Nursery has been approved to accommodate 100 children, but there is barely sufficient elbow room for this number during the winter, and the average attendance is somewhat less. The attendances during the year were as follows: Whole days, 20,489; half days, 1,296.

Dr. Leslie Ladell is in medical charge of the Nursery. A weekly inspection is made and Dr. Ladell is available at other times in emergency. Suitable cases receive light treatment (carbon arc lamp) under the medical direction of Dr. Ladell and Dr. Howard Humphries.

An interesting feature of the work of this Nursery is that Dr. Hamilton Pearson attends regularly for the purpose of detecting, and where possible, correcting, backwardness and early tendencies to abnormality in the children.

The Maternity and Child Welfare Committee have an arrangement under which payment is made for admission of children of necessitous parents to this Nursery upon the recommendation of the Health Visitor that the home conditions make this desirable. The Council pay 6d. per day per child under this arrangement. The total number of children so admitted was 69, and the total number of attendances was 4,632. Exclusive of payments made under the arrangement just referred to, the Council make a grant to the Sun Babies' Nursery of £63 per annum.

MEDICAL MISSION OF THE GOOD SHEPHERD, HARMAN STREET, HOXTON.

Amount payable in respect of discontinued Ministry grant, £176 4s. 8d.

At this Institution there are ten cots for the treatment of babies and young children suffering from acute medical conditions. Cases are frequently accepted for admission on the recommendation of the Maternity and Child Welfare Department.

These wards are under the care of Dr. W. E. A. Worley, who visits daily, and is available at any time in case of emergency.

The Nursing Staff is as follows: Matron, Sister and four Probationers.

During the year 57 children were admitted. There were five deaths. The children of the condition from which they were suffering are as follows:—

2	...	...	...	...	...
2	...	...	...	...	...
1	...	...	...	...	...
1	...	...	...	...	...
12	...	...	...	...	...
1	...	...	...	...	...
1	...	...	...	...	...
1	...	...	...	...	...
2	...	...	...	...	...

At the institution there are also two midwives who take the cases in the morning and afternoon, but the part of the work does not rank for grant, and accordingly is not paid for under the supervision of the Maternity and Child Welfare Committee.

German Year—From May to June 1930

Special leave of absence was granted to two of the Health Visitors to join the German Year. They were much interested in all aspects, and returned to their work with new ideas and fresh enthusiasm from which we have all benefited.

The following report was submitted to the Maternity and Child Welfare Committee:

"During the German Year (from May to June 1930)...

"The German Year was arranged by the Association of Women Public Health Officers in the district of the Health Training School in Berlin. A very extensive programme was carried out, and institutions connected with Public Health were visited in ten towns in Northern Germany.

"The first day was spent at the place of call, and on 2 and 3 May we were visiting in the Health Office by Professor Hübner and the Medical Officer of Health. The women we visited here and also at other points in the district were very enthusiastic, and great stress was laid on the fact that their patients were not so poor as possible from each other in order that they might be better to the health and welfare of the people was this helped the work.

"The Hospital is situated on the outskirts of Hamburg, was visited, the general number of patients is 2,100, and there are departments for every kind of patient except certain mental, in this, and in every hospital we visited we found that all patients admitted were isolated in glass cubicles for their treatment, and to this day before being admitted to their respective wards. The general feeling was of great interest, and that there are usually 100-150 patients in the hospital, and that the treatment of patients must not only be to the benefit of the patient, but also to the benefit of the community.

During the year 67 children were admitted. There were five deaths. The particulars of the condition from which they were suffering are as follows :—

Pneumonia	12	Diarrhoea	2
Diarrhoea and Vomiting ...	13	Otorrhoea	2
Wasting and wrong feeding ...	13	Starolitis	1
Vomiting	1	Circumcision	1
Pyrexia	1	Bronchitis	12
Tubercular Meningitis ...	2	Colitis	1
Scald	1	Hare Lip and Cleft Palate ...	1
Septic Hand	1	Eczema	2
Abdominal Obstruction ...	1		

At this Institution there are also two midwives who take the cases in the surrounding district, but this part of the work does not rank for grant, and accordingly does not come under the supervision of the Maternity and Child Welfare Committee.

GERMAN TOUR—23RD MAY TO 10TH JUNE, 1930.

Special leave of absence was granted to two of the Health Visitors to join this Tour.

They were much interested in all they saw, and returned to their work with new ideas and fresh enthusiasm from which we have all benefited.

The following report was submitted to the Maternity and Child Welfare Committee :—

" 20th June, 1930.

" LADIES AND GENTLEMEN,

GERMAN TOUR (23RD MAY TO 10TH JUNE), 1930.

" This tour was arranged by the Association of Women Public Health Officers, with the assistance of the Public Health Training School in Berlin. A very extensive programme was carried out, and institutions connected with Public Health were visited in ten towns in Northern Germany.

" Hamburg was our first place of call, and at 9 a.m., 26th May, we were officially received in the Health Office by Professor Pheiffer and the Medical Officer of Health. The welcome we received here and also at every point throughout the tour, was very enthusiastic, and great stress was laid on the fact that both countries were out to learn as much as possible from each other, in order that every avenue leading to the health and welfare of the people was fully explored and used.

" The Bambeck Hospital, situated on the outskirts of Hamburg, was visited, the normal number of patients is 2,400, and there are departments for every kind of patient except certified lunatics. In this, and in every hospital we visited, we found that all patients admitted were isolated in glass cubicles for periods varying from 3 to 21 days, before being drafted to their respective wards. The Venereal Disease Block was of great interest, and here there are usually 200 men and 300 women under treatment either indoor or as out-patients. In Hamburg, venereal disease is notifiable. Medical Practitioners must notify

every case they find, but they may continue to treat the patient themselves if they wish to do so. Also, from every child born in the borough a Wasserman blood test is taken, and if a positive reaction is obtained the mother and child are notifiable cases.

" Later, we visited Grienstrasse School, which is a model school built on a new Housing Estate. This School is run by a Parents' Council, and the aim of the Teaching Staff is to maintain good relations between home and school, and to provide an atmosphere in the school as much like home as possible. The class rooms are fitted with chairs and tables graded in size, instead of desks, and special workrooms for practical work are fitted up. To these rooms the children return voluntarily in the afternoons and evenings for practical instruction and recreation. A Kindergarten is attached for children under school age.

" In Germany generally, Kindergarten Schools and Day Nurseries are largely made use of by mothers wishing to leave their children, whilst out as work, or when shopping, or during the time spent in the laundry. In the new Housing Estates a Kindergarten and a Central Laundry are arranged in every block of flats.

" In Lichtenberg, where slum dwellers are being re-housed, every house is so arranged that it faces south or west, and the rent is stationary for families with more than four children—thus avoiding overcrowding. Open-air river baths are provided on an area of 30,000 square yards of river bank, and there are facilities for 12,000 people to undress. We visited these baths between 10 and 11 a.m. on Saturday (31st May) and hundreds of people were either bathing or taking sun baths on the banks.

" Swimming is compulsory in elementary schools throughout Germany, and everywhere possible Open-air Pools are provided and large numbers of people take advantage of them. Men and women in employment usually pay about 2d., unemployed and children are free.

" Convalescent Homes for men, women and children are provided by the State or Municipality in every part of Germany. Jena, a town of 15,500 inhabitants, has 39 small convalescent homes for children alone. Some of these houses have, in the first instance, been given by philanthropists, some are simple structures of wood taking 12 to 40 children. All are in charge of a Matron with a Kindergarten Staff, and a doctor visits and examines all children once weekly or at any other time deemed necessary by the Matron.

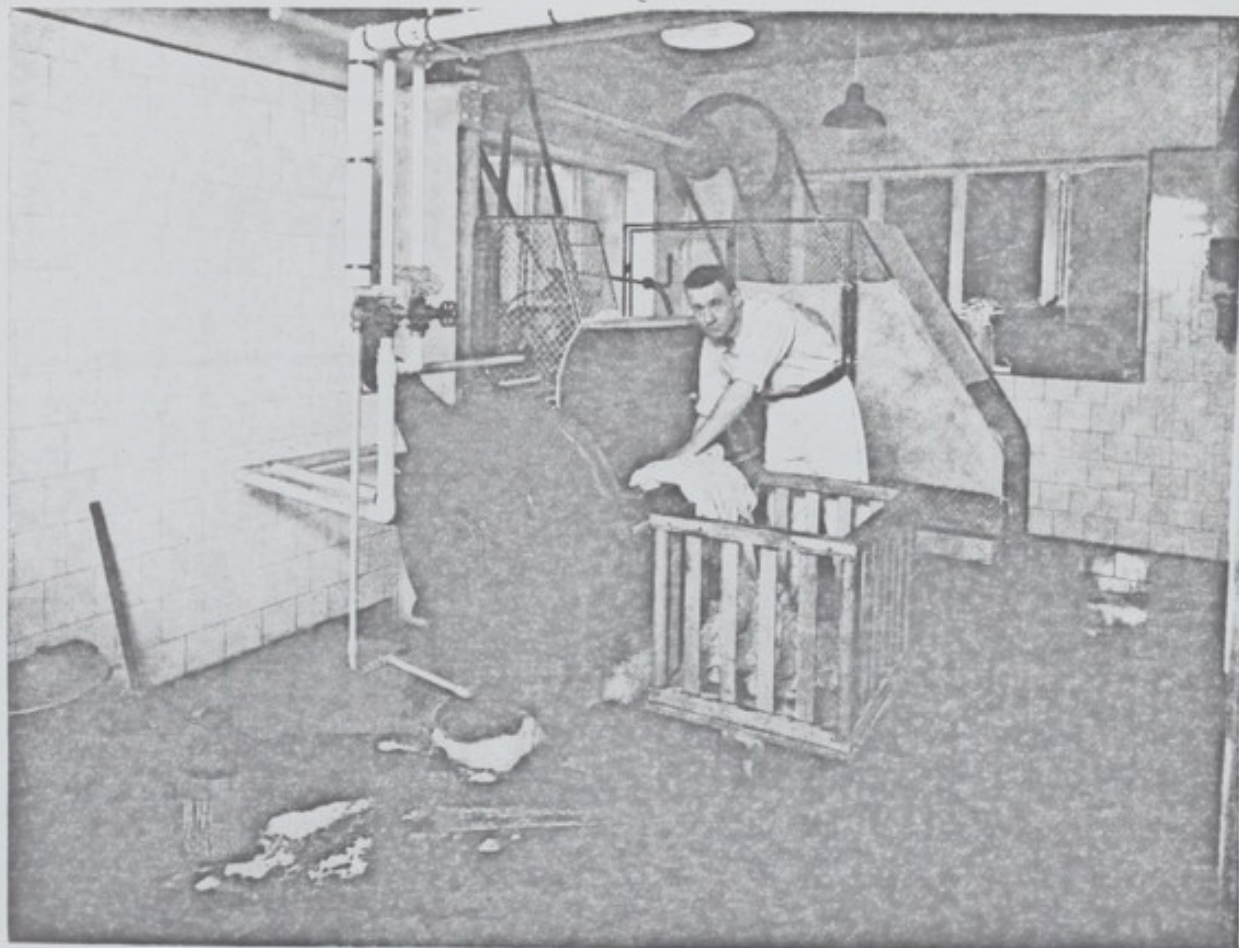
" We were interested here to see the Marl Zeiss Public Library, which gives reading and studying facilities to the working classes for a very small subscription. No limit is placed on educational books borrowed, but a small amount has to be paid if more than one novel is taken out within a month. In Dresden we visited the International Health Exhibition and the Museum of Hygiene. This Exhibition dealt with every aspect of health and we wished we could transport many exhibits to Shoreditch. At Dresden, also, we visited a Convalescent Home



The New Palace



The New Palace



THE NEW LAUNDRY.



THE NEW LAUNDRY.

[To face page 113.]

Several of the children who are recommended by the Medical Officer for a change of air, have been sent to the children's home at Lymington, and they are in a very good state of health.

A swimming pool is also provided, and there are facilities for gymnastic exercises in the open air, and we were impressed with the arrangements for washing, bathing and feet in hot and cold water.

The last two days of the tour were spent in the Westphalian Industrial Area. We visited Bielefeld and the Welfare Department of Kumpfer; also the Hospital for the Blind, which has its own Kindergarten, swimming pool, and facilities for gymnastics for adults and children.

At Kumpfer we were taken to the Sewage Works, which deal with all sewage from this area. This is a good running district, and we were interested to hear from the Medical Officer of Health that their unemployment problem was no worse there as in England.

We feel that this tour has been of great educational value to all members of the party, and we should like to express our gratitude to the Committee for giving us this opportunity.

We are, Ladies and Gentlemen,

Your obedient servants,

(Signed) "I. M. Howard"

"Mary Howard"

STRENGTH IN PROGRESS AT THE END OF THE YEAR

DAY NINETEEN

The Committee have been greatly helped by the advantage derived by the fact that the children's home at Lymington has been attended at Lymington, and accordingly have been able to go to the children's home at Lymington for a further day. It is not easy to find accommodation of the kind in Lymington, but fortunately the Committee were able to find and obtain two rooms at the children's home at Lymington, the children's home at Lymington, and the children's home at Lymington. At the end of the year there were under consideration for adoption three two houses and existing children in the garden.

END

The amount of money work required by the Maternity and Child Welfare Committee has been steadily increasing during recent years.

To deal with this it was decided to extend the night laundry in the basement of the Welfare Centre by means of excavation. At the end of the year the work had been completed, and it is hoped that before many months have passed the extension of the Health Department will be undertaken in these

extended premises.

School for children who are recommended by the Medical Officers for a change of air. We saw the children having their afternoon rest lying on trestles in a wood.

"A swimming pool is also provided, and there are facilities for gymnastic exercises in the open air, and we were impressed with the arrangements for washing hands and feet in hot and cold water.

"The last two days of the tour were spent in the Westphalian Industrial Area. We visited Essen and the Welfare Department of Krupps; also the Housing Estate where each block has its own Kindergarten, swimming pool, and facilities for gymnastics for adults and children.

"At Bottrop we were taken to the Sewage Works, which deals with all sewage from this area. This is a coal mining district, and we were interested to hear from the Medical Officer of Health that their unemployment problem was as acute there as in England.

"We feel that this Tour has been of great educational value to all members of the party, and we should like to express our gratitude to the Committee for giving us this opportunity.

"We are, Ladies and Gentlemen,

"Your obedient Servants,

(Signed) "I. M. HEWARD.

"MARY MORRELL."

SCHEMES IN PROGRESS AT THE END OF THE YEAR.

DAY NURSERY.

The Committee have been greatly impressed by the advantage derived by children living under bad housing conditions from attendance at Day Nurseries, and accordingly gave instructions for search to be made for a suitable site for a Municipal Day Nursery. It is not easy to find accommodation of this kind in Shoreditch, but eventually the Committee were successful and obtained two semi-detached houses, Nos. 77 and 79, in Queen's Road, the combined gardens of which constitute a pleasant open space. At the end of the year plans were under consideration for rebuilding these two houses and erecting shelters in the garden.

LAUNDRY.

The amount of laundry work required by the Maternity and Child Welfare Committee has been steadily increasing during recent years.

To deal with this it was decided to extend the small laundry in the basement of the Welfare Centre by means of excavation. At the end of the year this work had made considerable progress, and it is hoped that before many months have passed the whole of the washing of the Health Department will be undertaken in these extended premises.

Particulars of the Health Visitors' visits and of the attendances at the various Welfare Centres during the year are given in the following tables:—

VISITS.

	Health Visitors' Districts.							
	1.	2.	3.	4.	5.	6.	7.	Total.
No. of 1st visits to infants	244	238	189	325	292	254	462	2,002
No. of re-visits to infants	333	452	321	381	677	477	1,319	3,960
No. of 1st visits to children aged 1 to 5 years (irrespective of whether visited previously as an infant)	173	64	103	123	142	188	1,086	1,879
No. of re-visits to children aged 1 to 5 years	693	1,073	1,090	1,190	1,126	1,245	1,318	7,735
No. of 1st visits to expectant mothers ...	82	60	35	62	72	111	209	631
No. of re-visits to expectant mothers ...	125	81	26	60	59	61	172	584
No. of unsuccessful visits	188	97	238	159	211	283	472	1,648
No. of interviews in connection with work...	246	236	104	447	72	442	1,068	2,615
*No. of 1st visits to infants with diarrhoea... ..	8	...	...	...	...	...	...	8
*No. of 1st visits to cases of ophthalmia neonatorum	13	1	10	29	11	19	...	83
*No. of re-visits to cases of ophthalmia neonatorum	15	3	12	19	17	20	...	86
No. of 1st visits to cases of puerperal fever ...	...	...	...	5	1	...	...	6
No. of re-visits to cases of puerperal fever ...	...	1	...	3	3	...	...	7
No. of 1st visits to cases of puerperal pyrexia ...	1	4	1	4	1	4	...	15
No. of re-visits to cases of puerperal pyrexia ...	1	8	1	3	2	6	...	21
No. of Health Visitors' attendances at Centres:								
(a) Hoxton Market Institute ...	42	2	1	12	110	117	...	284
(b) Hoxton Hall Centre ... ..	...	1	7	52	2	8	...	70
(c) Maternity Centre..	149	202	100	151	96	58	...	756
(d) Harbour Lights Centre	50	27	52	...	1	4	...	134
(e) School for Mothers Centre ... ..	...	...	...	...	...	...	331	331

* These visits are also included above.

NUMBER OF FIRST ATTENDANCES OF INFANTS AND CHILDREN AT WELFARE CLINICS.

	Health Visitors' Districts.							
	1.	2.	3.	4.	5.	6.	7.	Total.
(a) Hoxton Market Institute :								
(Mon.) under 1 yr.	..	..	..	..	..	78	..	78
over 1 yr.	..	..	..	..	..	44	..	44
(Wed.) under 1 yr.	..	..	..	..	30	78	..	108
over 1 yr.	..	..	..	..	19	41	..	60
(b) Hoxton Hall :								
(Tues.) under 1 yr.	..	..	..	74	..	..	..	74
over 1 yr.	..	..	..	13	..	..	..	13
(Mon.) under 1 yr.	..	108	..	..	..	..	..	108
over 1 yr.	..	49	..	..	..	..	..	49
(Tues.) under 1 yr.	94	113	..	..	..	..	..	207
over 1 yr.	35	23	..	..	..	..	..	58
(c) Maternity Centre :								
(Wed.) under 1 yr.	..	..	79	..	..	..	..	79
over 1 yr.	..	..	26	..	..	..	..	26
(Thur.) under 1 yr.	..	..	..	..	161	..	..	161
over 1 yr.	..	..	..	..	57	..	..	57
(Fri.) under 1 yr.	..	..	..	92	..	..	..	92
over 1 yr.	..	..	..	19	..	..	..	19
(d) Harbour Lights :								
(Fri.) under 1 yr.	63	..	74	..	..	..	..	137
over 1 yr.	26	..	18	..	..	..	..	44
(e) School for Mothers :								
(Tues.) under 1 yr.	..	..	..	..	..	..	200	200
over 1 yr.	..	..	..	..	..	..	40	40
(Thur.) under 1 yr.	..	..	..	..	..	..	151	151
over 1 yr.	..	..	..	..	..	..	36	36

TOTAL ATTENDANCES OF INFANTS AND CHILDREN AT WELFARE CLINICS

Health Visitors' Districts									
1	2	3	4	5	6	7	Total		
(a) Hoxton Health Institute:									
Infants	1,283	..	1,283	Infants ..	..
Children	1,093	..	1,093	Children ..	..
Mothers without children	431	..	431	Mothers without children ..	..
Infants	308	..	308	Infants ..	..
Children	248	..	248	Children ..	..
Mothers without children	199	..	199	Mothers without children ..	..
(b) Hoxton Hall:									
Infants	1,441	..	1,441	Infants ..	..
Children	1,178	..	1,178	Children ..	..
Mothers without children	360	..	360	Mothers without children ..	..
(c) Hoxton Green:									
Infants	1,378	..	1,378	Infants ..	..
Children	1,158	..	1,158	Children ..	..
Mothers without children	413	..	413	Mothers without children ..	..
Infants	1,478	..	1,478	Infants ..	..
Children	1,211	..	1,211	Children ..	..
Mothers without children	363	..	363	Mothers without children ..	..
Infants	1,471	..	1,471	Infants ..	..
Children	1,378	..	1,378	Children ..	..
Mothers without children	363	..	363	Mothers without children ..	..
Infants	1,820	..	1,820	Infants ..	..
Children	1,061	..	1,061	Children ..	..
Mothers without children	816	..	816	Mothers without children ..	..
Infants	1,390	..	1,390	Infants ..	..
Children	1,073	..	1,073	Children ..	..
Mothers without children	816	..	816	Mothers without children ..	..

TOTAL ATTENDANCES OF INFANTS AND CHILDREN AT WELFARE CLINICS.

		Health Visitors' Districts.							
		1.	2.	3.	4.	5.	6.	7.	Total.
(a) Hoxton Market Institute:									
(Mon.)	Infants .. ..	..	..	..	..	..	1,283	..	1,283
	Children .. ..	..	..	..	..	..	1,093	..	1,093
	Mothers without children ..	..	..	..	..	..	431	..	431
(Wed.)	Infants .. ..	..	..	..	..	396	1,319	..	1,715
	Children .. ..	..	..	..	..	248	816	..	1,064
	Mothers without children ..	..	..	..	..	199	307	..	506
(b) Hoxton Hall:									
(Tues.)	Infants .. ..	..	..	..	1,444	..	..	..	1,444
	Children .. ..	..	..	..	1,176	..	..	..	1,176
	Mothers without children ..	..	..	..	360	..	..	..	360
(c) Maternity Centre:									
(Mon.)	Infants .. ..	..	1,275	..	..	..	..	..	1,275
	Children .. ..	..	1,186	..	..	..	..	..	1,186
	Mothers without children ..	..	411	..	..	..	..	..	411
(Tues.)	Infants	1,476	1038	..	..	..	..	..	2,514
	Children	1,211	902	..	..	..	..	..	1,113
	Mothers without children ..	300	365	..	..	..	..	..	665
(Wed.)	Infants .. ..	..	..	1,471	..	..	..	..	1,471
	Children .. ..	..	..	1,278	..	..	..	..	1,278
	Mothers without children ..	..	..	352	..	..	..	..	352
(Thur.)	Infants .. ..	..	..	..	..	1,820	..	..	1,820
	Children .. ..	..	..	..	..	1,061	..	..	1,061
	Mothers without children ..	..	..	..	..	516	..	..	516
(Fri.)	Infants .. ..	..	..	..	1,290	..	..	..	1,290
	Children .. ..	..	..	..	1,072	..	..	..	1,072
	Mothers without children ..	..	..	..	348	..	..	..	348

TOTAL ATTENDANCES OF INFANTS AND CHILDREN AT WELFARE CLINICS—*continued.*

[illegible]

ANTE-NATAL CONSULTATIONS.

[illegible]

As from the 10th April 1950, the *Westbury Anti-Natal Centre* had been held at *Westbury Market Hall*, and was transferred to the *Westbury Centre*.

The *Westbury* and *Friday* attendances were therefore recorded together.

Health Visitors' Districts						
1.	2.	3.	4.	5.	6.	7. Total
Westbury Centre (Dr. Smith, West and Fri.) No. of 1st attendances	22	20	22	30	17	111
Westbury St. Andrew's	50	124	80	201	104	559

Health Visitors' Districts						
1.	2.	3.	4.	5.	6.	7. Total
Westbury Centre (Dr. Smith, West and Fri.) No. of 1st attendances	24	19	43	41	40	207
Westbury St. Andrew's	121	202	202	212	104	841

Health Visitors' Districts						
1.	2.	3.	4.	5.	6.	7. Total
Westbury Centre (Dr. Smith, West and Fri.) No. of 1st attendances	22	20	22	30	17	111
Westbury St. Andrew's	50	124	80	201	104	559

As from the 30th April, 1930, the Wednesday Ante-Natal Clinic which had been held at Hoxton Market Institute, was transferred to the Maternity Centre.

The Wednesday and Friday attendances were thereafter recorded together.

	Health Visitors' Districts.							
	1.	2.	3.	4.	5.	6.	7.	Total
Maternity Centre : Dr. Smith (Wed. and Fri.) No. of 1st attendances ..	33	90	52	30	47	31	..	283
Total No. of attendances ..	66	134	93	104	94	47	..	538

DENTAL CLINIC. (Mr. H. L. Davies.)	Health Visitors' Districts.							Total.
	1.	2.	3.	4.	5.	6.	7.	
Number of first attendances ..	54	72	47	61	45	29	103	411
Total number of attendances ..	191	269	205	258	218	165	384	1,690

SEWING CLASSES (2).	Health Visitors' Districts.							Total.
	1.	2.	3.	4.	5.	6.	7.	
Total number of attendances ..	292	3	—	246	64	—	416	1,021

Health Visitors District No.	Infants seen by Doctor		Children (1-5 yrs.) seen by Doctor	
	For 1st time	Total No.	For 1st time	Total No.
1	100	100	100	100
2	100	100	100	100
3	100	100	100	100
4	100	100	100	100
5	100	100	100	100
6	100	100	100	100
7	100	100	100	100
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Health Visitors' Districts		Total	
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The remainder were making satisfactory progress.

CHILD WELFARE CONSULTATIONS.

	Health Visitors' District No.	Infants seen by Doctor.		Children (1-5 yrs.) seen by Doctor.	
		For 1st time	Total No.	For 1st time.	Total No.
MATERNITY CENTRE.					
Dr. Richards ... (Mon.)	2	108	680	50	430
Dr. Phillips } (Tues.)	1	80	586	30	446
Dr. Karn ... }	1	16	177	7	161
Dr. Goffe ... }	2	115	713	25	461
Dr. Richards ... (Wed.)	3	80	600	25	485
Dr. Rose ... } (Thur.)	5	63	224	16	131
Dr. Fanning ... }	5	47	176	21	130
Dr. McGregor ... }	5	37	253	16	126
Dr. Smith ... (Fri.)	4	92	705	18	464
HOXTON MARKET.					
Dr. Rose ... } (Mon.)	6	27	148	21	138
Dr. McGregor ... }	6	28	210	6	135
Dr. Fanning ... }	6	22	173	12	117
Dr. Goffe ... (Wed.)	6	78	521	36	305
	5	39	170	18	84
HOXTON HALL.					
Dr. Rose ... } (Tues.)	4	19	190	6	136
Dr. Fanning ... }	4	23	195	5	167
Dr. McGregor ... }	4	28	153	4	177
HARBOUR LIGHTS.					
Dr. Phillips } (Fri.)	3	61	412	14	308
Dr. Karn ... }	3	9	79	4	43
Dr. Goffe ... (Fri.)	1	63	576	22	469
SCHOOL FOR MOTHERS.					
Dr. Dancy... } (Tues.)	7	48	390	15	205
Dr. Pratt ... }	7	152	667	25	431
Dr. Pratt ... } (Thur.)	7	133	798	22	437
Dr. Dancy... }	7	18	150	14	122

REPORT OF INFANTS ATTENDING DOCTORS' CONSULTATIONS.

	Health Visitors' Districts.							Total.
	1.	2.	3.	4.	5.	6.	7.	
Number suffering from disorders of digestion and nutrition ...	820	901	1,024	997	136	455	1,030	5,363
Number suffering from other minor ailments ...	1,123	413	850	791	84	637	616	4,514
Number referred to Hospital or to Medical Practitioner ...	91	203	117	92	87	56	127	773

The remainder were making satisfactory progress.

X-HEALTH WEEK

The fourth annual X-Health Week Exhibition at the Borough Council Exhibition Centre in the Town Hall was held during the week commencing Monday 6th October.

Interest in the exhibition was high both in the exhibits and in the lectures and the number of people who attended was greater than during any of the previous Health Weeks.

A list of the exhibits and the lectures together with the number of persons attending each day are given below.

EXHIBITS

1. The Borough Council, Limited.
2. A. J. Baker, Limited (Exhibitors).
3. J. H. Baker, Limited.
4. J. H. Baker, Limited.
5. J. H. Baker, Limited.
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X.—HEALTH WEEK.

The fourth consecutive Annual Health Week Exhibition arranged by the Borough Council and the third in the Town Hall was held during the week commencing Monday, 6th October.

Great interest was shown both in the exhibits and in the lectures, and the number of persons who attended was greater than during any of the previous Health Weeks.

A list of the exhibits and the lectures together with the number of persons attending each day are given below :—

EXHIBITS.

1. The Parazone Company, Limited.
2. A. Wander, Limited (Ovaltine).
3. Hovis, Limited.
4. Sun Babies Nursery.
5. Nasal Hygiene Exhibit.
6. Borough of Shoreditch Electricity Department.
7. Borough of Shoreditch Maternity and Child Welfare Department.
8. Tuberculosis Dispensary.
9. Handicraft Class.
10. Health and Cleanliness Council.
11. Borough of Shoreditch Sanitary Inspectors.
12. } Borough of Shoreditch Maternity and Child Welfare Department.
13. }
14. } Borough of Shoreditch Dental Hospital.
15. }
16. Borough of Shoreditch Maternity and Child Welfare Department.
17. Borough of Shoreditch Sanitary Inspectors.
18. Borough of Shoreditch Baths Department.
19. Borough of Shoreditch Libraries Department.
20. Metropolitan Water Board.
21. British Social Hygiene Council.
22. Marmite Food Extract Company, Limited.
23. Virol, Limited.
24. Borough of Shoreditch Highways and Works Department.
25. Borough of Shoreditch Maternity and Child Welfare Department.
26. { Good Room.
26. { Bad Room.
27. The Workers' Birth Control Group.
28. United Dairies, Limited.

LECTURES.

Miss M. BORROW, Matron, Model Welfare Centre, entitled "The Scientific Management of Infants."

Dr. M. B. RAY, entitled "Rheumatism."

Dr. MAITLAND RADFORD, Medical Officer of Health, entitled "Germs and what they are."

Lieut. I. T. MULLER, entitled "Health Through Daily Exercise," with demonstration.

Dr. OCTAVIA LEWIN, entitled "Nasal Hygiene."

Mr. P. W. JAMES, Superintendent Registrar, entitled "Births, Deaths and Marriages."

Dr. E. C. MCGREGOR, Assistant Medical Officer of Health, entitled "Infant Feeding in Bygone Days."

Mr. Alderman E. W. LAY, entitled "Child Welfare Work."

Dr. A. LEITCH, entitled "Tuberculosis."

Dr. H. W. S. WRIGHT (to married men), entitled "Birth Control."

Dr. F. VINCENT DENNE, Dental Board of the United Kingdom, entitled "Why we have toothache." "The Care of the Teeth."

Dr. ALICE ROSE, entitled "The Mothers' Diet as it affects the well-being of the Child."

Mr. F. MARSH, Elma Electric Service Bureau, entitled "Electric Light and Health."

Mr. R. A. BISHOP, Sanitary Inspector, entitled "From Infancy to Old Age, or Health and the Sanitary Inspector."

Dr. HELENA WRIGHT (to married women), entitled "Birth Control."

ATTENDANCES.

Days.	School Children.	2-9 p.m.	Total.
	Mornings.		
Monday ...	—	1,025	1,025
Tuesday ...	96	1,735	1,831
Wednesday ...	299	1,754	2,053
Thursday ...	71	1,994	2,065
Friday ...	188	1,204	1,392
Saturday ...	—	1,260	1,260
	654	8,972	9,626

XI.—STAFF.

Medical Officer of Health.

Administrative Maternity and Child Welfare Officer.

Administrative Tuberculosis Officer.

MAITLAND RADFORD, M.D., B.S., D.P.H.

Assistant Medical Officer of Health.

JAMES FANNING, M.D., B.S., D.P.H. (*resigned 23/4/30*).
E. C. MCGREGOR, M.B., CH.B., D.H.P. (*appointed 15/4/30*).

Clerical Staff.

E. G. WILSHER, *Chief Clerk and Administrative Assistant*.

E. J. HAYES and G. H. PRATT, *First Assistant Clerks*.

H. P. ABBOTT, *General Assistant*.

W. HARRIS.

Mrs. I. M. RUTHERFORD.

W. WILSON.

W. L. JOB.

Miss E. LEHANE.

W. E. DALE (*Part-time*

E. R. BANKS.

H. FITZGERALD.

Enquiry Officer).

Sanitary Inspectors.

J. H. PEARSON, *Senior Inspector*.

C. J. WRIGHT.

J. H. THOMAS.

R. A. BISHOP.

D. GRANT.

H. G. CHAPMAN.

F. C. SHAW.

T. W. GIRLING.

G. WALKER.

W. SICKELMORE.

J. B. MOLLOY.

A. STRATTON.

G. C. E. GIBBS.

NOTE.—In addition to their Sanitary Inspector's certificates, all the Inspectors possess the recognised certificates for inspection of meat and other foods.

Health Visitors.

Miss I. M. HEWARD, S.R.N., C.M.B. Miss B. C. HUNT, S.N.R., C.M.B. Miss M. MORRELL, C.M.B.
(*Certs. of Sanitary Inspectors' Joint Examination Board.*) (*Inspector of Nuisances, R.S.I.*)

Miss M. REDCLIFFE, C.M.B.

Mrs. D. BALES, S.N.R., C.M.B.

Miss A. M. BROTHERTON,
S.R.N., C.M.B.

Tuberculosis Nurse and Infectious Disease Visitor.

Miss W. I. HISCOKE, S.R.N., C.M.B.

Dental Hospital:

Dental Surgeon.

H. L. DAVIES, L.D.S., R.C.S. (Eng.).

Dental Mechanics.

T. LAMB.

Sister and Clerk.

Mrs. L. FRIER, S.R.N., C.M.B.

Caretaker.

Mr. A. WHITTARD.

T. A. DISS.

Assistant Nurse and Clerk.

D. A. F. ROBINSON.

Miss A. RANGLES, S.R.N., C.M.B.

Model Welfare Centre, Kingsland Road.

Miss D. BORROW, S.R.N., C.M.B., *Matron*.

Miss D. A. KENNEDY, S.R.N., C.M.B. (*Sister*), Miss G. E. WOODS, S.R.N.,

Miss M. HITCHCOCK, S.R.N. (*Staff Nurses*), and 4 Probationers.

Miss E. RIGGS (*Cook*), Mrs. J. McDONNELL (*Waitress*), J. P. BEAR and J. E. PERRY (*Porters*).

Staff of Dining Centre, 31, Herbert Street.

Miss M. ZEMAITIS (*Cook-Caretaker*).

Miss W. MILLER (*General Assistant*).

Vaccination Officers.

*S. W. DYSON, Haggerston Public Baths, Mansfield Street, E. 2. (For Whitmore, Kingsland, Haggerston and Acton Wards.)

*W. H. WILLIAMS, 94, New North Road, N. 1. (For Moorfields, Church, Hoxton and Wenlock Wards.)

* These two Officers also act as Registrars of Births and Deaths, and in the case of Mr. Dyson also as Registrar of Marriages.

Disinfecting Officers.

A. FAWNS.

G. KENNEDY.

A. FLACK.

Mortuary Keeper.

W. J. BAILEY.

Temporary Shelter.

Mrs. WATSON (*resigned 15/7/30*).

Mrs. A. WHITTARD (*appointed 15/7/30*).

The following officers who are not members of the permanent staff perform various duties in connection with the work of the department:

Clerical Staff.

V. H. SEWELL.

F. S. HUGHES.

W. F. LEAVER.

Dental Hospital:

Anæsthetist.

MAURICE MARCUS, M.B.B.S., M.R.C.S., L.R.C.P.

Model Welfare Centre, Kingsland Road.

Physicians to Maternity and Child Welfare Centres.

SYLVIA SMITH, M.B., B.S.

HON. MRS. OLIVIER RICHARDS, M.D., B.S., M.R.C.P.

E. M. GOFFE, M.B., B.S., D.P.H. ELIZABETH DOVE, M.R.C.S., L.R.C.P., D.P.H.

GLADYS HILL, M.D., B.S.

Panel of Obstetrical Consultants.

GERTRUDE DEARNLEY, M.D., B.S.

EARDLEY HOLLAND, M.D., F.R.C.P., F.R.C.S.

W. H. M. McCULLAGH, D.S.O., M.C., M.B., B.Ch., F.R.C.S.

F. W. ROGUES, M.D., B.Ch., F.R.C.S.

HAROLD CHAPPLE, M.B., M.Ch., F.R.C.S.

Artificial Sunlight Clinic.

Mrs. M. POLLARD, S.R.N., *Sister-in-charge.*

Breast-Feeding Clinic.

Miss R. CHRISTEY, S.R.N., C.M.B., *Nurse.*

Mrs. J. DURLING, Mrs. A. HESKETH, Mrs. E. WILLIAMT (*Cleaners*).

Tuberculosis Officer.

A. LEITCH, M.B., Ch.B.

Bacteriologist.

F. H. TEALE, M.D., F.R.C.P.

Public Analyst.

H. G. HARRISON, M.A., F.I.C.

Public Vaccinators.

Dr. N. H. CLUBWALA, 247, Kingsland Road, E. 2. (For Moorfields, Church, Hoxton and Wenlock Wards.)

Dr. L. M. LADELL, 116, St. John's Road, N. 1. (For Whitmore, Haggerston, Kingsland and Acton Wards.)

Dr. James Fanning, who had held the post of Assistant Medical Officer of Health since April, 1928, resigned in April, 1930, upon his appointment to the post of Assistant Medical Officer of Health to the Surrey County Council.

Dr. Evelyn McGregor, who was appointed as his successor, was required to give three months' notice before relinquishing her duties as Assistant Medical Officer of Health to the County of Nottinghamshire, and accordingly did not commence duty in Shoreditch until July. During this interval Dr. Alice Rose was appointed temporarily as Assistant Medical Officer of Health, and, as smallpox was prevalent at the time, her services were further retained during the holiday month of August when Dr. McGregor was in charge of the Department.

Two additions were made to the permanent staff of the Dental Hospital:

Nurse Randles was appointed Assistant Nurse and Clerk in January, and Mr. D. A. F. Robinson was appointed third Dental Mechanic in the following month.

As stated in portion of report relating to infectious disease, two temporary Sanitary Inspectors and four temporary nurses were engaged to assist in the surveillance of smallpox contacts. An additional temporary Clerk was also engaged. On abatement of smallpox he remained in the Department to assist in additional work caused through extension of various services.

INDEX.

	PAGE		PAGE
Area	2	L.C.C. (General Powers) Act, 1928—	
Ambulance facilities	7	Sec. 28	44
Acute Poliomyelitis	31	Legal Proceedings	58
Acute Primary Pneumonia	31	Local Government Act, 1929	108
Acute Influenzal Pneumonia	31	Laundry	113
Ante-natal Clinics	105	Medical Mission of Good Shepherd	110
Births in sub-districts	8	Maternity Outfits	105
Birth-rates	8	Maternal Care	105
Bacteriological examinations	37	Milk Allowances	103
Butchers' shops	45	Maternity and Child Welfare	99
Bakehouses	46	Merchandise Marks Act, 1926	52
Brunswick Day Nursery	110	Marriages	9
Cancer	16	Marriage-rate	9
Cerebro-Spinal Meningitis	30	Mortuary	11
Cowhouses	45	Maternal mortality	15
Cookshops and Eating-houses	46	Measles	32
Condensed Milk Regulations	52	Milk (Special Designations) Order, 1923	49
Convalescence	104	Milk and Cream Regulations, 1912	52
Deaths in sub-districts	9	Milk and Dairies Order, 1926	52
Death rate	9	Meat Regulations, 1924... ..	52
Deaths—ages at	12	Nursing in the home	36
Deaths—causes of	12	Ophthalmia Neonatorum	29
Deaths in Public Institutions	11	Overcrowding	43
Deaths in Outlying Institutions	10	Outworkers	55
Diphtheria	25	Otorrhœa Clinics	101
Dysentery	27	Population	8
Diarrhœa	34	Puerperal fever	28
Disinfection	37	Puerperal pyrexia	29
Dental Hospital	76	Public Health (Prevention of Tuber- culosis) Regulations, 1925	46
Dental Hospital, Scale of Charges (treatment)	78	Rateable value	2
Dental Hospital—Orthodontic... ..	81	Rag and Bone Dealers	43
Dining Centres	102	Rats and Mice (Destruction) Act	45
Day Nursery	113	Regulations as to the Sale of Eggs	47
Enteric fevers	27	Rag Flock Acts	53
Erysipelas	28	Sun Babies' Nursery	110
Encephalitis Lethargica	30	Smallpox	20
Fur Skin Dressers	43	Scarlet fever	24
Fried Fish Shops	46	Sanitary Work	39
Food and Drugs Acts	47	Shelter	37
Factory and Workshop Act	53	Smoke Nuisances	52
Glandular Fever	34	Sanitary Officers... ..	42
Hospitals	5	Staff	122
House refuse	7	Street Markets and Food	45
Hairdressers	46	Slaughterhouses	45
Houses let in lodgings	96	Sale of Food Order	46
Home Visiting	99	Sewing Classes	102
Home Helps	106	School for Mothers	109
Health Week	120	Treatment of Milk by Heat	51
Housing conditions	85	Tuberculosis	63
Inhabited houses	2	Tuberculosis, deaths from	66
Infantile Mortality	14	Tuberculosis Dispensary	68
Infectious cases, number certified	19	Tuberculosis Care Committee	73
Infectious cases, number removed to hospitals	19	Unemployment	2
Infectious diseases, age periods	19	Underground Rooms	43
Infectious diseases, deaths from	19	Unhealthy Areas	95
Infectious diseases and schools	35	Vital Statistics	3
Influenza	34	Venereal Diseases	37
Ice Cream Shops	46	Verminous Houses	44
Infant Welfare Centres	99	Whooping Cough	33
		Water Supply to Tenement Houses	42
		Water Supply	44
		Women's Hospital	83

