

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

Contributors

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REPORT

ON THE

Health and Sanitary Condition

OF THE

Metropolitan Borough of Shoreditch

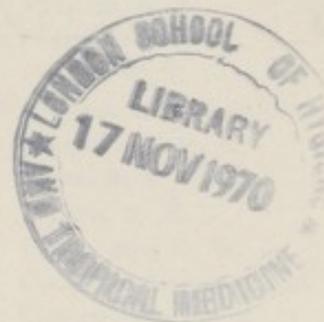
IN THE COUNTY OF LONDON,

FOR THE YEAR 1932,

BY

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

Medical Officer of Health.



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METROPOLITAN BOROUGH OF SHOREDITCH.

PUBLIC HEALTH COMMITTEE.
(Nov., 1931—Oct., 1932.)

MATERNITY AND CHILD WELFARE
COMMITTEE.
(Nov., 1931—Oct., 1932.)

Ex-officio: W. J. FUDGE, Esq., J.P. (Mayor).

- Chairman*: Councillor MATTHEWS, Dr. A. D.
- Vice-Chairman*: Councillor SHERWIN, A. H.
- Alderman JEGER, Dr. S. W., L.C.C.
- " LUSHER-PENTNEY, Mrs. C. R.
- Councillor BROWN, W. J.
- " CROUCH, C. H.
- " HOUSEMAN, J. E., J.P.
- " JARVIS, Mrs. M. J.
- " ORGEL, S.
- " PALMER, R. E.
- " PARKER, W. J.
- " RICKETTS, W.
- " RIDER, D.
- " THURTLÉ, Mrs. D.
- " TUCKER, T.

- Chairman*: Councillor YARROW, W. E., J.P.
- Vice-Chairman*: Alderman VARNALS, G. J.
- Alderman LUSHER-PENTNEY, Mrs. C. R.
- Councillor BAKER, J. S.
- " EELES, H. R.
- " ELLETT, W. T.
- " GIRLING, Mrs. H., J.P., L.C.C.
- " HOUSEMAN, J. E. J.P.
- " JARVIS, Mrs. M. J.
- " LEE, E.
- " BAKER, Miss D. W.
- (Co-opted) COLVILLE; Lady CYNTHIA, J.P.
- " CROUCH, Mrs. A. N.
- " FURSE, Mrs. J.
- " YEOMAN, Mrs.

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- " JEGER, Dr. S. W., L.C.C.
- " LUSHER-PENTNEY, Mrs. C. R.
- Councillor BROWN, W. J.
- " CROFTS, R. O.
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Metropolitan Borough of Shoreditch.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH.

PUBLIC HEALTH OFFICES,

8/14, LABURNUM STREET, E.2.

July, 1933.

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

SIR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for the year 1932.

There is nothing calling for special comment with regard to the vital statistics of the Borough.

The most important event of the year so far as the administration of the Department and the general comfort of the staff are concerned, was the move from the quarters so long occupied in the Town Hall to the New Building in Laburnum Street.

As regards light, air, and general convenience, the new offices are a very great improvement on the old, and after several months under the new conditions, it is satisfactory to be able to report that misgivings that may have been felt regarding difficulties likely to arise as a result of leaving the Town Hall have not, in fact, been fulfilled. The new arrangement has worked excellently.

My thanks are due to all sections of the staff of the Department for their help throughout the year, and especially to Dr. Evelyn McGregor, the Assistant Medical Officer of Health, Dr. Cullen, the Tuberculosis Officer, Mr. Wilsher, the Chief Clerk and Mr. Pearson, the Senior Sanitary Inspector.

It would, I know, be the wish of all his colleagues that I should take this opportunity to express our sense of loss at the early and sad death of Mr. T. W. Girling, who had carried out the duties of Sanitary Inspector with conspicuous ability and thoroughness since his appointment in 1920.

Finally, I wish to thank you, Sir, and the members of the Council, and especially those serving on the Health, Maternity & Child Welfare and Housing Committees, for the assistance I have received during the year.

I am, Sir, Ladies and Gentlemen,

Your obedient Servant,

MAITLAND RADFORD,

Medical Officer of Health.

I.—STATISTICS AND GENERAL INFORMATION.

STATISTICS.

Area: 662 acres. Population—Census 1931, 97,038; Registrar-General's estimate mid-1932—95,800. Number of structurally separate dwellings 1931 Census—14,115. Number of houses (end of 1932) according to Rate Books, 14,254. Number of families and separate occupiers, 1931 Census—25,156. Rateable value, £840,000. Sum represented by penny rate, £3,500. The length of public streets in the Borough is 43 miles.

Briefly, Shoreditch is a densely populated (average 145 to the acre) area containing approximately 14,000 structurally separate dwellings and 3,000 business premises.

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—600 may be given as a round number. Particulars regarding home work will be found in Section IV of this report, page 72.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR 1932.

	Total.	M.	F.	Birth Rate	
Live births {	Legitimate ...	1,597	812	785	17·5
	Illegitimate ...	77	41	36	
		<hr/>	<hr/>	<hr/>	
	1,674	853	821		
Still births				Rate per 1,000 total births	35·7
General Death Rate					12·3
Percentage of total deaths occurring in Public Institutions ...					69·3
Number of women dying in, or in consequence of, childbirth—					
From Sepsis					1
,, other causes					4
Death rate of infants under one year of age per 1,000 live births :—					
	Legitimate, 77. Illegitimate, 143. Total, 80.				
Deaths from Measles (all ages)					60
,, Whooping Cough (all ages)					4
,, Diarrhœa (under 2 years of age)					26
,, Pulmonary Tuberculosis					88
,, all forms of Tuberculosis					101
Death rate from Pulmonary Tuberculosis					0·92
Tuberculosis Death Rate					1·05

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	Net		Number	Rate	of Non-residents registered in the District	of residents not registered in the District	Under 1 year of age		At all Ages	
			Number	Rate					Number	Rate per 1000 nett Births	Number	Rate
1	2	3	4	5	6	7	8	9	10	11	12	13
1921	105200	2798	2975	28·5	1393	13·3	264	369	341	114	1498	14·4
1922	105800	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	11·3	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	98960	1664	1988	20·3	1097	11·2	214	325	129	65	1208	12·3
1931	98260	1399	1684	17·1	1105	11·2	195	317	126	75	1227	12·5
1932	95800	1361	1674	17·5	1039	10·8	215	356	134	80	1180	12·3

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 for all years up to and including 1930. The Registrar-General's estimated population is adopted for all statistical purposes for the years 1931 and 1932.

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 31st DECEMBER, 1932.

DISTRICTS.	Estimated Population. 1932.	ANNUAL RATE PER 1,000 PERSONS LIVING.														Infants under 1 year. Death rate per 1,000 Live Births.	PERCENTAGE TO TOTAL DEATHS.			
		BIRTHS.	DEATHS DURING THE YEARS.				DEATHS DURING 1932 FROM										Inquest Cases.	Deaths in Public Institutions.	Uncertified Causes of Death.	
			1929.	1930.	1931.	1932.	1 (cols. 2-8) Principal Zymotic Diseases.	2 Smallpox.	3 Measles.	4 Scarlet Fever.	5 Diphtheria.	6 Whooping Cough.	7 *Fever.	8 †Diarrhoea Enteritis (under 2 years).	9 Tuberculous Disease.					10 Violence.
London ...	4,357,800	14·3	13·8	11·4	12·3	12·3	0·54	0·00	0·19	0·02	0·07	0·08	0·00	0·18	0·89	0·57	67	6·2	...	0·00
Shoreditch	95,800	17·5	16·1	12·2	12·5	12·3	1·07	...	0·63	0·06	0·07	0·04	...	0·27	1·05	0·43	80	5·9	69·3	...
<i>Wards.</i>																				
Moorfields	3,906	18·2	18·5	15·5	10·6	16·9	1·78	...	1·02	...	...	0·25	...	0·51	1·54	0·51	70	7·6	75·8	...
Church ...	16,217	20·2	17·1	12·3	14·8	13·3	1·77	...	1·11	...	0·12	0·06	...	0·49	1·05	0·18	110	3·2	60·6	...
Hoxton ...	15,728	15·4	16·1	12·7	12·4	13·7	1·08	...	0·51	0·19	...	0·06	...	0·32	0·95	0·25	116	5·6	64·2	...
Wenlock ...	15,517	15·7	15·9	13·0	11·6	11·3	0·71	...	0·26	0·07	3·13	0·06	...	0·19	1·22	0·84	53	9·7	68·2	...
Whitmore§	14,580	19·9	17·1	13·1	12·9	12·5	0·75	...	0·47	...	0·14	...	...	0·21	0·82	0·48	72	6·6	69·2	...
Kingsland	9,475	18·8	14·5	10·1	12·1	11·5	0·84	...	0·42	0·21	0·11	...	...	0·11	0·74	0·53	62	6·4	70·6	...
Haggerston	9,770	16·9	13·6	11·1	13·0	11·9	0·82	...	0·72	...	...	...	...	0·10	1·74	0·31	67	5·2	70·7	...
Acton ...	10,607	14·9	16·3	10·5	10·0	9·4	1·13	...	0·85	...	...	...	...	0·28	0·75	0·38	57	4·0	74·0	...

* Fever includes typhus, typhoid and continued fevers.

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

§ 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 1932.

BIRTH-RATE, DEATH-RATE, AND ANALYSIS OF MORTALITY DURING THE YEAR 1932.

(Non-civilians included).

	Rate per 1,000 Total Population.		Annual Death-rate per 1,000 Population.										Rate per 1,000 Live Births.		Percentage of Total Deaths.		
	Live Births.	Still-births	All Causes.	Typhoid and Paratyphoid Fevers	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and Enteritis (under two years).	Total Deaths under one year.	Certified by Registered Medical Practitioners.	Inquest cases.	Certified by Coroner after P.M. No Inquest.	Uncertified Causes of Death.
Shoreditch	17.5	0.65	12.3	0.00	0.00	0.63	0.06	0.04	0.07	0.19	0.43	15.5	80	88.31	5.93	5.76	...
England and Wales ...	15.3	0.66	12.0	0.01	0.00	0.08	0.01	0.07	0.06	0.33	0.54	6.6	65	91.1	6.2	1.8	0.9
118 County Boroughs and Great Towns, including London ...	15.4	0.64	12.2	0.00	0.00	0.12	0.01	0.08	0.07	0.28	0.54	8.6	70	91.3	5.9	2.3	0.5
126 Smaller Towns (Estimated Resident Populations, 25,000 to 50,000 at Census, 1931)	15.2	0.68	11.4	0.01	...	0.07	0.01	0.07	0.04	0.31	0.53	5.3	61	91.9	5.8	1.3	1.0
London	14.3	0.46	12.3	0.00	0.00	0.19	0.02	0.08	0.07	0.28	0.57	12.5	67	89.4	6.2	4.4	0.0

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 follows:—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 1932, shows a rainfall for the year of 628 millimetres. This figure is 32 millimetres above the average for the thirty-five years, 1881-1915.

The daily mean number of hours of sunshine during the year in London was 3.19. This figure was 0.84 hours less than the average daily mean for the 35 years 1881-1915. March was the only month in which the average was exceeded. In that month there was a mean of 3.79 hours daily as compared with an average of 3.40 for March during the 35 years referred to above.

SOCIAL CONDITIONS.

Unemployment has continued to weigh heavily upon the people of this Borough as is shown in the following tables, for which I have to thank the Director of Statistics of the Ministry of Labour.

The observations contained in the section of this report dealing with Nutrition (page 60) are intended to be considered in conjunction with the figures in this and the following table.

Numbers of persons resident in the Metropolitan Borough of Shoreditch, recorded as unemployed, at quarterly dates in the years 1928 to 1932 :—

Date.	Men.	Women.	Juveniles.	Total.
1928.				
11th June	2,237	557	31	2,825
17th September	2,134	453	41	2,628
17th December	1,987	677	37	2,701
1929.				
11th March	2,286	719	68	3,073
17th June	2,325	541	29	2,895
16th September	1,929	381	21	2,331
16th December	1,994	680	49	2,723
1930.				
17th March	2,687	1,058	67	3,812
16th June	2,767	1,375	141	4,283
15th September	3,221	1,322	59	4,602
15th December	3,509	1,445	49	5,003
1931.				
16th March	4,320	1,566	104	5,990
15th June	3,882	1,450	79	5,411
14th September	4,101	1,382	88	5,571
14th December	4,294	1,076	99	5,469
1932.				
21st March	3,985	984	120	5,089
27th June	4,478	1,075	110	5,663
26th September	4,362	918	102	5,382
19th December	4,108	1,131	84	5,323

I have also to thank the Chief Officer of Public Assistance of the London County Council for the following figures relating to persons in receipt of domiciliary relief in Shoreditch :—

Week ended.	Number of persons in receipt of domiciliary relief (excluding medical relief only).	Number of persons in receipt of medical relief only.
1931.		
28th March	2,876	74
27th June	2,492	87
26th September	2,321	94
26th December	2,842	118
1932.		
26th March	3,366	92
25th June	3,087	105
24th September	2,974	138
31st December	2,982	145

HOSPITALS, ETC.

Within the Borough—

St. Leonard's Hospital, Hoxton Street, N. 1, General, London County Council, formerly Shoreditch Guardians	571 beds.
Royal Chest Hospital, City Road, E.C. 1	85 beds.
Shoreditch Model Welfare Centre, 210, Kingsland Rd., 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 page</i> 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	286 beds.
Mildmay Mission Hospital, Austin Street, E.2	55 beds.

Special Hospitals—

Queen's Hospital for Children, Hackney Road, E. 2	204 beds.
(Included in these beds are 44 at Branch, Little Folks' Home, Bexhill.)	
City of London Maternity Hospital, City Road, E.C. 1	71 beds.
Royal London Ophthalmic Hospital (late Moorfields), E.C. 1	152 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.
Hospital for Sick Children, Gt. Ormond Street, W.C. 1	252 beds.
(10 private)	

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

9 Fever Hospitals (acute)	... ..	containing 4,634 beds.
2 Fever Hospitals (Convalescent)	... ..	containing 1,882 beds.
3 River Hospitals (Fever or Small Pox)	... ..	containing 1,898 beds.

Hospital for Ophthalmia Neonatorum, Marasmus and Congenital Syphilis—

St. Margaret's, Leighton Road, Kentish Town, N.W. 5 60 beds.

Hospitals for Venereal Disease—

Sheffield Street Hospital, Kingsway, W.C.2 (Women) 82 beds.

Hospital for Post Encephalitis Lethargica—

Northern, Winchmore Hill, N. 21 (part of) 256 beds.

10 Sanatoria and Hospitals for Tuberculous Patients containing beds as follows : 739 (Children), 210 (Women), 581 (Men), 632 (Men and Women). In all 2,162 beds.

20 Mental Hospitals containing 32,247 beds.

Children's Hospitals and Homes—

Queen Mary's Hospital for Children, Carshalton, Surrey 1,274 beds.

The Down's Hospital for Children, Sutton, Surrey ... 360 beds.

St. Anne's Home, Herne Bay, Kent (Convalescent Children) 130 beds.

Contagious Diseases of the Skin and Scalp—

Goldie Leigh Homes, Abbey Wood, S.E. 2 248 beds.

Ophthalmia—

White Oak, Swanley Junction, Kent 364 beds.

Venereal Disease Clinics accessible from Shoreditch—

Hospital for Sick Children, Great Ormond Street, W.C.1 (male and female children).
Daily treatment (Sunday excepted) 9 to 10 a.m., Monday, Tuesday, Thursday and Friday 2 to 4 p.m.

London Hospital, Whitechapel Road, E.1. *Gonorrhœa (Clap)*—male and female.
Daily treatment between 9.30 a.m. and 7 p.m. *Syphilis*—male and female:
Monday 5 to 7 p.m., Tuesday 8.30 a.m. to 12 noon, Wednesday 10 a.m. to 12 noon. Thursday 8.30 a.m. to 12 noon. Patients can also be seen daily at other times.

Metropolitan Hospital, Kingsland Road, E.8 (male and female). Monday and Friday 6 to 7 p.m., Wednesday noon to 1 p.m.

- Royal Free Hospital, Gray's Inn Road, W.C.1 (females and children). Daily treatment between 7 a.m. and 9.30 p.m.
- Royal London Ophthalmic Hospital (Moorfields), City Road, E.C.1. Male : Monday and Friday 5.30 p.m. Female : Wednesday 1.30 p.m.
- Royal Northern Hospital, Holloway Road, N.7. *Skin*—Males and females : Wednesday and Thursday 1 p.m. *Syphilis*—Males : Monday, Wednesday, Thursday and Friday 6 p.m. to 8 p.m. Females and children : Monday 2.30 to 4.30 p.m., Tuesday and Thursday 6 to 8 p.m. *Gonorrhœa*—Males and females : Monday, Tuesday, Wednesday, Thursday, Friday 6 to 8 p.m.
- University College Hospital, Gower Street, W.C.1. *Special (Venereal)*—Male : Monday, Wednesday and Friday 5.30 to 7 p.m., Saturday 1.30 to 3 p.m. Female : Monday and Friday 5.30 to 7 p.m., Daily treatment (Sunday excepted) 9 a.m. to 10 p.m.

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, 8/14, Laburnum Street, E.2.

Briefly, the London County Council provides ambulances free of cost for the conveyance of persons meeting with accidents, parturient women if the cases are urgent, persons suffering from illness upon medical certificate, and persons suffering from infectious diseases 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.

COMMON LODGING HOUSES.

There are four of these in the Borough, as follows :—

Aubert Buildings, Boot Street.	Charles Garley	87 men.
29, Dunloe Street.	Joseph Milton Dowdall.	46 men.
2, Dunston Street.	Angelo Purcigo	28 men.
277, Kingsland Road.	Thomas Levy	123 men.

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 and mechanically operated vehicles, and is burned at the refuse destructor.

ACTS, REGULATIONS AND ORDERS

which became operative during 1932.

ACTS.

Children and Young Persons Act, 1932.

REGULATIONS.

Agricultural Produce (Grading and Marking) (Malt, Flour and Malt Extract) Regulations, 1932.

Agricultural Produce (Grading and Marking) (Plums) Regulations, 1932.

Agricultural Produce (Grading and Marking) (Bottled Fruits) Regulations, 1932.

Agricultural Produce (Grading and Marking) (Bottled Vegetables) Regulations, 1932.

Agricultural Produce (Grading and Marking) (Honey) Regulations, 1932.

Agricultural Produce (Grading and Marking) (Cider) Regulations, 1932.

Agricultural Produce (Grading and Marking) (Canned Fruits) (Amendment) Regulations, 1932.

The Merchandise Marks (Imported Goods) No. 1 Order, 1932 (which deals with the sale of imported butter).

II.—POPULATION, BIRTHS, MARRIAGES AND DEATHS.
CENSUS.

The report upon the Census taken on 26th/27th April, 1931 which was issued during the year here considered, contains much valuable information concerning the population of the Borough.

The following Tables are quoted as being of special interest in connection with this report:—

I.—ACREAGE, POPULATION, PRIVATE FAMILIES AND DWELLINGS IN THE BOROUGH AND IN EACH WARD.

Columns a.	Acreage (Land & Inland Water)	TOTAL POPULATION					PRIVATE FAMILIES & DWELLINGS, 1931				
		1921	1931				Private Families	Popula- tion in Private Families	Struc- turally Separate Dwellings occupied	Rooms Occupied	Persons per Room
		Persons	Persons	Males	Females	Persons per Acre					
b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	
SHOREDITCH	658	104,248	97,042	47,227	49,815	147.5	25,084	94,521	13,678	65,330	1.45
<i>Wards—</i>											
Acton	86	12,147	10,713	5,203	5,510	124.6	3,029	10,663	1,586	8,898	1.20
Church	105	17,153	16,404	7,940	8,464	156.2	4,301	16,176	2,491	10,229	1.58
Haggerston ...	68	10,381	9,870	4,732	5,138	145.2	2,427	9,780	1,461	6,756	1.45
Hoxton	79	16,686	15,898	7,746	8,152	201.2	4,292	15,751	2,313	10,350	1.52
Kingsland ...	72	10,484	9,571	4,713	4,858	132.9	2,435	9,462	1,341	6,870	1.38
Moorfields ...	71	4,349	3,929	1,921	2,008	55.3	1,083	3,906	880	3,093	1.26
Wenlock	96	16,287	15,689	7,726	7,963	163.4	3,914	14,643	1,666	9,902	1.48
Whitmore ...	81	16,761	14,968	7,246	7,722	184.8	3,603	14,140	1,940	9,232	1.53

II.—INTERCENSAL VARIATION IN POPULATION.

					<i>Shoreditch.</i>	<i>London.</i>
1911.	Persons	...	...	...	111,390	4,521,685
1921.	Persons	...	...	...	104,248	4,484,523
	Males	...	...	...	50,317	2,071,579
	Females	...	...	...	53,931	2,412,944
1931.	Persons	...	...	...	97,042	4,397,003
	Males	...	...	...	47,227	2,044,108
	Females	...	...	...	49,815	2,352,895

Increase (+) or Decrease (-).

1911-1921.	Per cent	...	...	...	-6.4	-0.8
1921-1931.	Amount	...	...	...	-7,206	-87,520

Per cent :—

Total	...	...	...	-6.9	-2.0
By births and deaths	...	...	...	+9.5	+5.3
By Migration	...	...	...	-16.4	-7.3

III.—AGES (GROUPED) BY MARITAL CONDITION

Age last Birthday	Persons	MALES					FEMALES				
		Total	Single	Married	Widowed	Divorced	Total	Single	Married	Widowed	Divorced
All ages	97,042	47,227	27,354	17,960	1,869	44	49,815	26,530	18,347	4,888	50
0-4	8,705	4,359	4,359	-	-	-	4,346	4,346	-	-	-
5-9	9,651	4,828	4,828	-	-	-	4,823	4,823	-	-	-
10-14	8,779	4,477	4,477	-	-	-	4,302	4,302	-	-	-
15-19	10,266	5,064	5,043	21	-	-	5,202	5,123	79	-	-
20-24	9,875	4,881	4,119	758	3	1	4,994	3,658	1,330	5	1
25-29	7,879	3,987	1,869	2,108	7	3	3,892	1,581	2,269	40	2
30-34	6,715	3,165	674	2,448	36	7	3,550	748	2,712	85	5
35-39	5,651	2,566	341	2,187	35	3	3,085	485	2,438	154	8
40-44	5,325	2,501	273	2,160	65	3	2,824	370	2,188	258	8
45-49	5,261	2,480	289	2,078	109	4	2,781	257	2,102	415	7
50-54	5,104	2,453	296	1,943	207	7	2,651	223	1,881	537	10
55-59	4,419	2,100	208	1,669	219	4	2,319	187	1,459	667	6
60-64	3,371	1,647	192	1,168	284	3	1,724	128	911	684	1
65-69	2,621	1,234	175	764	288	7	1,387	105	570	712	-
70-74	1,792	823	110	428	284	1	969	83	272	613	1
75-79	1,006	406	65	153	187	1	600	73	112	415	-
80-84	447	196	22	66	108	-	251	23	22	205	1
85-89	145	51	11	8	32	-	94	10	2	82	-
90-94	24	8	3	1	4	-	16	4	-	12	-
95 and over	6	1	-	-	1	-	5	1	-	4	-

IV.—AGE AND CONDITION DISTRIBUTIONS

	Average Age		Age distribution per 1,000 of each sex (Ages last birthday)								Marital condition distribution per 1,000 of each sex						No. of Married Women aged less than 45 per 1,000 females of all ages.	No. of Females per 1,000 Males.
	Males	Females	Males				Females				Males			Females				
			0-4	5-19	20-30	40-	0-4	5-19	20-30	40-	Single	Married	Widowed and Divorced	Single	Married	Widowed and Divorced		
Shoreditch	29.3	30.4	92	304	310	294	87	288	312	313	579	380	41	533	368	99	221	1055
London (Admin. County)	32.0	33.9	73	254	331	342	63	225	340	372	524	438	38	517	384	99	223	1151

The Registrar-General's estimate for the mid-year 1932 population was 95,800. This figure will be used for statistical purposes throughout this Report.

The population in the various Wards of the Borough is estimated as follows :—

Ward.	Population.	Area in acres*	Density per acre.
Moorfields	3,906	71	55
Church	16,217	105	154
Hoxton	15,728	79	199
Wenlock	15,517	96	162
Whitmore	14,530	81	180
Kingsland	9,475	72	131
Haggerston	9,770	68	144
Acton	10,607	86	123

* Exclusive of water.

The density of the population in the Borough as a whole is 145 per acre.

Further information upon the subject of the population, area, number of inhabited houses and rateable value are contained on pages 2, 4, 12 and 107.

BIRTHS.

Numbers of live births registered in the above-named area during the calendar year 1932 :—

Total Live Births (Legitimate and Illegitimate).	Live births registered (excluding re-registration).	Inward Transfers.	Outward Transfers.	Live births allocated to the Borough.
Males	689	179	15	853
Females	672	166	17	821
Totals	1,361	345	32	1,674
Illegitimate Live Births.				
Males	31	10	—	41
Females	28	11	3	36
Totals	59	21	3	77

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	37	34	71	18·2
Church	165	162	327	20·2
Hoxton	118	124	242	15·4
Wenlock	119	124	243	15·7
Whitmore	151	139	290	19·9
Kingsland	94	84	178	18·8
Haggerston	88	77	165	16·9
Acton	81	77	158	14·9
Totals	853	821	1,674	17·5

STILL BIRTHS.

Numbers of still births registered in the above-named area during the calendar year 1932 :—

Total Legitimate and Illegitimate.	Stillbirths registered.	Inward Transfers.	Outward Transfers.	Stillbirths allocated to the Borough.
Males	27	13	—	40
Females	13	9	—	22
Totals	40	22	—	62
Illegitimate.				
Males	3	—	—	3
Females	2	—	—	2

The birth rate for the Borough as a whole was 17·5. For England and Wales the birth rate was 15·3 and for London 14·3. The illegitimate births numbered 77, of which 41 were males and 36 females. Of these 29, of which 18 were males, occurred in St. Leonard's Hospital. The illegitimate births

amounted to 4·6 per cent for all births credited to the Borough during the year.

The number of births occurring in St. Leonard's Hospital was 371: 192 males and 179 females. In 32 of these the parents were not Shoreditch residents.

MARRIAGES.

The number of marriages during the year was 848, and the persons married were at the rate of 17·70 per 1,000 population. The marriage rate for the Metropolis was 18·02.

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

Year.	No. of marriages.	Marriage rate.	
		Shoreditch.	London.
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
1931	912	18·6	18·8
1932	848	17·7	18·0

DEATHS.

During 1932 the total number of deaths registered in the Borough was 1,039.

The transferable deaths were as follows:—

Deaths of non-residents registered in Shoreditch ...	215
Deaths of Shoreditch residents registered elsewhere	356

The number of deaths properly belonging to Shoreditch is accordingly 1,180, which figure gives a general death rate per 1,000 population of 12·3. In connection with these deaths 70 inquests were held. The death rate in England and Wales for 1932 was 12·0, and in London 12·3.

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	37	29	66	16·9	70·4
Church	115	101	216	13·3	110·1
Hoxton	116	99	215	13·7	115·7
Wenlock	97	79	176	11·3	53·5
Whitmore	88	94	182	12·5	72·4
Kingsland	65	44	109	11·5	61·8
Haggerston	70	46	116	11·9	66·6
Acton	66	34	100	9·4	56·9
Totals	654	526	1,180	12·3	80·0

Considering the deaths at all ages the chief causes are seen to be as follows :—Heart disease, 241 (20·4 per cent); Cancer, 148 (12·5 per cent); Tuberculosis, all forms, 101 (8·6 per cent); Pneumonia, all forms, 96 (8·1 per cent). The number of deaths due to accidents in connection with vehicular traffic was 18. In the years 1921 to 1931, inclusive, the corresponding figures were respectively 10, 12, 9, 15, 14, 16, 21, 15, 18, 21 and 22. The particulars regarding the deaths from cancer are contained in the table on page 29.

It will be noted from the Table on page 22 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 43 out of a total of 58 deaths between these ages.

Altogether 233 or 19·7 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.	GENERAL HOSPITALS— <i>contd.</i> —		No. of Deaths.
Cane Hill	...	2	St. Bartholomew's	...	35
Claybury	...	13	St Columba's	...	2
Dartford	...	5	West End	...	1
Fountain	...	1	Westminster	...	1
Grove	...	2	SPECIAL HOSPITALS :—		
Horton	...	5	Cancer	...	1
Hundred Acres, Epsom	...	5	City of London Maternity	...	6
Leavesden	...	3	Colindale	...	6
Leicester City	...	1	Ear, Nose and Throat	...	1
Manor	...	1	East London Children's	...	1
Tooting Bec	...	5	Elizabeth Garrett Anderson...	...	1
1, West Park Road, Epsom	...	2	Highwood	...	1
HOSPITALS FOR INFECTIOUS DISEASES :—			Infants, Westminster	...	1
Brook	...	6	Mothers' Hospital, Clapton...	...	2
Eastern	...	20	National	...	1
Grove Park	...	4	Queen Mary's, Carshalton	...	1
North-Eastern	...	27	24, Underwood Street, Stepney	...	1
North-Western	...	4	Victoria Park	...	2
Park	...	8	OTHER INSTITUTIONS :—		
Southern	...	1	Archway Hospital	...	4
South-Eastern	...	5	Bancroft Lodge, Stepney	...	1
South-Western	...	1	77a, Bishops Road	...	1
Western	...	1	2a, Bow Road	...	4
GENERAL HOSPITALS :—			214a, Cambridge Road	...	5
Children's, Gt. Ormond St.	...	5	199, Dartmouth Park Hill	...	1
German	...	8	Central Homes, Leyton	...	1
Guy's	...	4	32, Elder Road, W. Norwood	...	1
187, High Street, Stoke Newington	...	1	230, High Street, Homerton	...	7
Homœopathic	...	1	86, High Street, Poplar	...	3
Lambeth	...	3	77, Highgate Hill	...	1
London	...	2	Friern Barnet Infirmary	...	4
London Jewish	...	1	Little Folks Home, Bexhill...	...	1
Metropolitan	...	21	29, North Side, Clapham	...	8
Middlesex	...	1	1, Oldchurch Road, Romford	...	1
Mildmay	...	7	46, Ouseley Road, Balham	...	1
107, Nightingale Lane, Wandsworth	...	4	129, St. John's Road, Isling- ton	...	2
Queen's (Children)	...	28	St. Joseph's Hospice	...	4
Queen Mary's, Wandsworth	...	2	St. Luke's Home	...	1
Royal Free	...	1	St. Peter's Home	...	1
Royal Northern	...	2	Townsend House, Williton...	...	1
			1, Uxbridge Road	...	4

Of 334 persons belonging to Shoreditch dying in public institutions beyond the limits of the Borough, 130 died in general hospitals, 45 in asylums, 77 in fever hospitals, 25 in hospitals for special diseases, and 57 in other institutions. Elsewhere than in public institutions 17 persons belonging to Shoreditch died beyond the limits of the Borough.

Altogether 818 or 69·3 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 :—

1922	...	...	60·2 per cent	1927	...	...	63·1 per cent
1923	...	...	63·6 „	1928	...	...	67·0 „
1924	...	...	63·5 „	1929	...	...	63·9 „
1925	...	...	63·3 „	1930	...	...	67·5 „
1926	...	...	63·7 „	1931	...	...	66·3 „

PUBLIC MORTUARY, 1932.

Number of bodies deposited from—

St. Leonard's Hospital	...	...	...	...	34
L.C.C. Infectious Disease Hospitals	...	...	...	...	19
Undertakers	...	...	...	...	2
Other sources	...	...	...	...	168
					223
Total number of bodies deposited	...	...	...	...	223
Number of post-mortem examinations performed	...	...	...	...	123

The causes of deaths at all ages together with Ward distribution and particulars relating to

CAUSES OF DEATH.	AGES.														DEATHS	
	Under 1	1 to 2	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 to 85	85 and upwards.	Moorfields.	Chancery.
All Causes.	134	58	41	27	7	26	26	60	51	107	210	225	179	29	37	29
1 Typhoid and paratyphoid fevers ...															M	F
2 Measles ...	13	29	16	2											2	7
3 Scarlet fever ...			3	1		2									1	1
4 Whooping cough ...	3	1													1	1
5 Diphtheria ...		2	1	4											1	1
6 Influenza ...			1				1	2	2	3	3	3	3	1	1	1
7 Encephalitis lethargica ...								1							1	1
8 Cerebro-spinal fever ...	1	1	2	1				1							1	1
9 Tuberculosis of respiratory system ...	1			2	2	9	13	20	11	17	9	4			2	3
10 Other tuberculous diseases ...	1	2	3	3		2		2							1	1
11 Syphilis ...								1	2	1					1	1
12 General paralysis of the insane, tabes dorsalis ...									2	3	2				1	1
13 Cancer, malignant disease ...			1	1	1	1		4	8	24	59	29	17	3	7	13
14 Diabetes ...											3	5	1		1	1
15 Cerebral hæmorrhage, etc.) ...										2	9	24	11	4	3	4
16 Heart disease ...						1	2	10	8	15	53	77	64	11	13	17
17 Aneurysm ...										2	2				1	1
18 Other circulatory diseases ...		1						1	3	6	18	17	1	1	2	5
19 Bronchitis ...	2	1							4	8	8	13	2	2	3	3
20 Pneumonia (all forms) ...	25	14	6	2		1		4	3	7	15	12	7	1	10	10
21 Other respiratory diseases ...			3	1		1		1	1	3	5	2			1	1
22 Peptic ulcer ...								1	1	3	4	4			1	1
23 Diarrhoea, &c. ...	22	4		1	2					1					2	6
24 Appendicitis ...				1		2				1					1	1
25 Cirrhosis of liver ...										2					1	1
26 Other diseases of liver, &c. ...																
27 Other digestive diseases ...	4		2				2	1		3	3	7	3		1	1
28 Acute and chronic nephritis ...			1	1		1	1	2	1	2	5	6	8	1	1	6
29 Puerperal sepsis ...							1								1	1
30 Other puerperal causes ...							1	1	1						1	1
31 Congenital debility, premature birth, malformations, &c. ...	51														2	10
32 Senility ...												6	24	4	1	3
33 Suicide ...						1	1	2	1	2	4	2			2	1
34 Other violence ...	2		1	4		3	2	3	3	5	6	6	6		2	1
35 Other defined diseases ...	9*	3*	1	3	2	2	1	5	7†	7	13*	8	5*	2*	8	3
36 Causes ill-defined or unknown ...															2	10

* 1 Erysipelas death.

† 2 Erysipelas deaths.

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

SEX.	EACH WARD.										Public Institutions.							
	Male.	Female.	Holborn Institution	S. Leonards Hospital	Roy's Chest Hospital	Home of Good Shepherd	Convent Hospital	Infant Welfare Centre	Belonging to Shore ditch.	Not belonging to Shore ditch.	Belonging to Shore ditch.	Not belonging to Shore ditch.	Belonging to Shore ditch.	Not belonging to Shore ditch.	Belonging to Shore ditch.	Not belonging to Shore ditch.		
Male.	654	526	2	107	468	49	9	36	3	2	...	...	...	...	...
Female.	526	654	2	107	468	49	9	36	3	2	...	...	...	...	...
1 Typhoid and paratyphoid fevers ...																		
2 Measles ...	31	29																
3 Scarlet fever ...	4	2																
4 Whooping cough ...	3	1																
5 Diphtheria ...	2	5																
6 Influenza ...	1	10																
7 Encephalitis lethargica ...	1																	
8 Cerebro-spinal fever ...	5	1																
9 Tuberculosis of respiratory system ...	54	34																
10 Other tuberculous diseases ...	7	6																
11 Syphilis ...	3	1																
12 General paralysis of the insane, tabes dorsalis ...	6	1																
13 Cancer, malignant disease ...	85	63																
14 Diabetes ...	3	6																
15 Cerebral hæmorrhage, etc.) ...	22	28																
16 Heart disease ...	126	103																
17 Aneurysm ...	4																	
18 Other circulatory diseases ...	21	38																
19 Bronchitis ...	20	9																
20 Pneumonia (all forms) ...	35	1																
21 Other respiratory diseases ...	9	5																
22 Peptic ulcer ...	10	4																
23 Diarrhoea, &c. ...	11	20																
24 Appendicitis ...	1	3																
25 Cirrhosis of liver ...	1	3																
26 Other diseases of liver, &c. ...																		
27 Other digestive diseases ...	7	10																
28 Acute and chronic nephritis ...	12	17																
29 Puerperal sepsis ...	1																	
30 Other puerperal causes ...	3																	
31 Congenital debility, premature birth, malformations, &c. ...																		
32 Senility ...	31	20																
33 Suicide ...	19	15																
34 Other violence ...	28	13																
35 Other defined diseases ...	24	24																
36 Causes ill-defined or unknown ...	13	27*																

* 5 cases of erysipelas.

† 1 case of erysipelas.

INFANTILE MORTALITY.

The deaths amongst infants under one year numbered 134, of which 84 were males and 50 females. These deaths amounted to 11·4 per cent of the total nett Shoreditch deaths from all causes as compared with 10·0 per cent in 1931.

The mortality amongst infants under one year was at the rate of 80 per 1,000 births registered during the year. Amongst male infants this rate was 99 and amongst females 61. The infant mortality rates in the different Wards of the Borough are included in the table on page 24a.

The number of deaths of illegitimate infants was 11, which figure gives a mortality rate of 143 per 1,000 illegitimate births.

The chief causes of deaths amongst infants were pneumonia, diarrhoea and enteritis, prematurity, 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.
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
1931	66	65	75
1932	65	67	80

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

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INFANTILE MORTALITY IN THE BOROUGH DURING YEAR, 1932.

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.	
												M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
1 Enteric fever																														
2 Smallpox																														
3 Measles									1	7	5	13		3	2	2				1				1	2	2		8	5	
4 Scarlet fever																														
5 Whooping cough										1	2	3		1		1	1											2	1	
6 Diphtheria																														
7 Erysipelas							1					1				1												1		
8 Mumps																														
9 Acute poliomyelitis																														
10 German measles																														
11 Varicella											1	1									1									1
12 Influenza																														
13 (a) with Pulmonary complications																														
14 (b) with Non - Pulmonary complications																														
15 (c) without stated complications																														
16 Encephalitis Lethargica																														
17 Meningococcal Meningitis												1	1							1								1		
18 Tuberculosis of respiratory system								1				1													1				1	
19 Other Tuberculous diseases								1				1				1												1		
20 Bronchitis								2				2								1					1			2		
21 Pneumonia (all forms)			1	3	2	6	2	6	9	2	25		2	5	5	3	2	1	2		1	1	1	1	2		15	10		
22 Pleurisy																														
23 Empyema																														
24 Other Pleurisy																														
25 Laringitis																														
26 Rickets								1			1		1															1		
27 Convulsions																														
28 Diarrhoea and Enteritis							4	8	6	4	22	2	5	2	2	4	1	3		3		1	1			1	15	7		
29 Ulcer of stomach																														
30 Other diseases of the stomach																														
31 Syphilis																														
32 Congenital malformation		3				3	3	2	1		9		1	2	2	1		1	1		1						5	4		
33 Congenital debility and icterus	2					2	3	4	2		11		2	1	2	1	1	1	1	2		1					9	2		
34 Premature birth	4	14	2	2	2	24	2	1			27	2	6	2	1	2	1	2	1	1	7		2	1	2		16	11		
35 Injury at birth	2		1			3					3			1	1											1	1	2		
36 Accidental mechanical (suffocation)																														
37 Atelectasis																														
38 Other defined diseases		2	1			3	2	3	2	1	11			1	2	1	1	1	1	2	1	2	1	2			5	6		
39 Causes ill-defined or unknown																														
Other Violence	1					1					1	2					1									1		2		
Totals	9	19	5	5	4	42	17	30	28	17	134	4	122	14	18	10	9	4	10	11	7	4	6	5	8	1	84	50		

* Deaths of persons not belonging to Shoreditch occurring within the Borough are excluded.
 * Deaths of persons belonging to Shoreditch occurring beyond limits of Borough are included.



MATERNAL MORTALITY.

The number of Shoreditch women whose deaths were primarily classified to childbirth during the year was 4.

This gives a Maternal Mortality rate per 1,000 live births of 2.39 and per 1,000 total births (*i.e.*, Still births included) of 2.30. The corresponding figures for the County of London were 2.64 and 2.56.

The particulars of these deaths, classified according to age and cause, are given in the table on page 27.

For purposes of comparison the maternal mortality rates per 1,000 live births in England and Wales, London and Shoreditch, during the year 1932 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.
1932	...	...	...	1.17	1.47	2.64	*0.60	1.79	2.39
1931	1.66	2.45	4.11	2.02	1.78	3.80	...	1.78	1.78
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

* This figure relates to one death from post abortive sepsis.

The final Report of the Departmental Committee upon Maternal Mortality and Morbidity was issued by the Ministry of Health in July, 1932.

This report should be studied by all those who are engaged either professionally or administratively in work relating to pregnancy, labour or after care.

Two brief quotations must suffice to indicate the general conclusions of the Committee

“Nevertheless, we are confirmed in the opinion expressed in our Interim Report that at least half the deaths which have come under review could have been prevented had due forethought been exercised by the expectant mother and her attendant, a reasonable degree of skill been brought to bear upon the management of the case, and adequate facilities for treatment been provided and utilized.”

“We are, however, convinced that the primary essential for the reduction of a high maternal mortality is sound midwifery, before, during and after childbirth, and this does not chiefly depend upon administrative arrangements or the expenditure of public money.”

These conclusions are amplified with a wealth of practical suggestion. From the point of view of this report the suggestions that are of the greatest interest are those relating to the development of maternal care under the Maternity and Child Welfare Act.

A full account of what is being done in Shoreditch will be found in Section viii of this report.

It is a matter for satisfaction that the scheme for Maternal Care in this Borough is comprehensive. It must not, however, be forgotten that the tragedies with which the Committee's report deals can only be prevented by continual vigilance and the maintenance of the highest standard of professional work.

CANCER.

The deaths from Cancer in the Borough during the year numbered 148 as compared with 122 in 1931. Particulars concerning these deaths as regards age, situation of disease and Ward are given in the table on page 29.

As was the case last year the stomach was the most frequent site of disease among the deaths from Cancer allocated to Shoreditch during the year.

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>	
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
1931	...	1,555	...	1,641	...	1,242
1932	1,553	...	1,545

DEATHS FROM CANCER IN THE BOROUGH DURING YEAR 1932.

	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 up.	Male.	Female.	Moorfields.	Church.	Hoxton.	Wenlock.	Whitmore.	Kingsland.	Haggerston.	Acton.		
All situations	3	1	...	4	8	24	59	29	17	3	85	63	M F	M F	M F	M F	M F	M F	M F	M F	M F	
Tongue	1	1	...	...	2	...	1	...	...	...	...	...	...	...	1	...
Other buccal cavity	1	1	...	2	...	...	...	...	1	...	1	...	...	...	...
Pharynx	2	...	1	...	3	...	1	...	...	1	...	...	1	...	...	...
Oesophagus	5	3	...	...	6	2	1	2 1	1	...	1 1	...	1	...	...	...
Stomach	3	6	9	4	3	1	18	8	2 1	3 2	2 2	1 1	2	4 1	2 1	2	...	...
Liver	2	1	...	...	1	2	1	...	1	...	1	...	...	...	...	...
Gall bladder
Intestines	8	8	2	...	13	5	...	2 1	3 1	2 1	2 1	2	...	2	...	1
Rectum	1	...	1	4	1	3	...	6	4	...	1 1	2	...	1 1	...	3	1	...	...
Others
Uterus	3	4	4	1	...	...	12	...	...	2	3	1	2	...	3	...	1	...
Ovary and Fallopian tube	1	...	1	...	...	...	2	...	...	1	...	...	...	...	...	...	...	1
Vagina, Vulva
Breast	1	...	3	2	...	1	1	8	1	1	1	1	2	2	...	1	...	...	...
Skin	2	...	...	...	2	...	...	...	1	1	...	...	...	...	...	...
Larynx	3	2	...	...	5	...	2	...	...	3	...	...	...	...	...	...
Lung and Pleura	2	4	6	1	1	...	9	5	1 2	4 1	...	1 1	1 1	...	1	2	...	...
Mediastinum
Pancreas	1	3	1	1	...	...	5	1	1	...	...	2	1 1	1	...	...	...	...
Bladder	1	...	2	4	...	1	...	5	3	...	...	3 1	...	...	1 2	...	1	...	...
Prostate	1	...	1	1	3	...	...	...	...	...	1	2	...	...	...	...	...
Others	3	1	...	1	...	2	3	4	2	...	7	9	2	3	3	1 1	1 2	...	1	2	...	...

III.—INFECTIOUS DISEASE.

Notifiable Disease.

Excluding tuberculosis, the deaths during the year from notifiable infectious diseases numbered 129 (10.9 per cent of the total deaths. The corresponding number for 1931 was 158 (12.8 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.																		Case-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 Moor-fields	II Chur.h	III Hoxton	IV Wen-lock	V Whit-more	VI Kings-land				VII Hagg-er-ston	VIII Acton	
Enteric fever ...	...	1	2	2	5	...	...	1	2	2	...	...	...	3	...	...	2	...	...	...	5	...	...
Small-pox ...	1	7	4	2	14	...	1	2	3	4	3	1	...	3	3	...	...	...	...	...	14	1	...
Scarlet fever ...	86	108	126	143	463	7	169	251	23	11	2	...	20	76	62	90	58	56	54	47	461	44	6	
Diphtheria ...	72	73	71	79	295	11	114	130	21	15	4	...	10	57	46	47	39	23	52	21	295	46	7	
Acute primary pneumonia ...	9	...	6	11	26	2	11	4	4	3	2	...	2	2	3	7	5	5	1	1	18	...	96	
Acute influenzal pneumonia ...	4	...	...	1	5	...	1	...	2	1	1	...	...	...	...	1	...	2	...	2	1	...	7
Erysipelas ...	11	8	10	10	39	...	3	3	5	6	14	8	...	8	5	9	6	3	4	4	26	...	1	
Puerperal fever ...	1	1	1	...	3	...	...	...	1	2	...	...	...	1	...	...	1	...	...	1	2	...	3
Puerperal pyrexia	9	3	11	5	28	...	...	...	13	14	1	...	...	7	6	2	4	4	2	3	25	...	6
Cerebro-spinal fever	3	6	2	1	12	3	5	2	2	...	...	...	1	1	...	3	2	3	1	1	12	...	1
Encephalitis Lethargica	...	...	1	...	1	...	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	1
Ophthalmia neonatorum	8	8	6	7	29	29	...	...	...	...	...	...	...	7	3	3	3	1	6	6	7	...	...
Dysentery ...	...	...	...	7	7	...	3	...	1	1	...	2	...	6	...	...	...	1	...	...	1	...	...
Acute Poliomyelitis	...	...	...	3	3	...	3	...	...	...	...	...	...	1	...	1	...	...	1	...	3	...	...
Anthrax ...	...	...	...	1	1	...	...	...	1	...	...	...	1	...	...	...	...	...	...	...	1	...	...
Totals ...	204	215	240	272	931	52	310	393	78	60	27	11	34	162	129	163	137	98	121	87	871	91	129	
Numbers and percentages of cases moved to hospitals.	186	207	227	251	871	91.2%	96.5%	94.7%	92.3%	93.6%	<p><i>Note.</i>—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 fever, acute polio encephalitis 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).</p>											

The total number of cases of infectious disease occurring in the Borough was more than during 1931, the number for the two years being respectively 931 and 881.

SMALLPOX.
(*Variola minor.*)

No. of cases notified	14
No. of cases in which diagnosis not confirmed	1
No. of actual cases	13
No. of cases sent for observation	—
No. of observation cases subsequently notified	—

All cases were of the mild type of the disease (*variola minor*).

The age, Seasonal and Ward distribution are included in the table on page 30. 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 ...	...	...	...	...	...	...	...	...	...
Church ...	2	1	3	...	...	...	0·2	...	...
Hoxton ...	...	2	2	..	...	...	0·1	...	...
Wenlock ...	...	...	...	...	...	...	...	...	...
Whitmore ...	3	4	7	...	...	...	0·5	...	...
Kingsland ...	...	...	...	...	...	...	...	..	...
Haggerston...	...	...	...	...	...	...	...	...	...
Acton ...	1	...	...	...	...	...	0·1	...	...
Total ...	6	7	13	...	...	...	0·1	...	...
London ...	...	...	1133	...	...	3	0·26	0·00	0·26

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
1931	5,665	1,452	122
1932	2,070	1,133	14

The condition as to vaccination of the 13 actual cases was as follows :—

Unvaccinated	10
Vaccinated after infection	1
Vaccinated more than 10 years previously	2
Vaccinated less than 10 years previously	0

No vaccinations were performed by the Medical Officer of Health under the Public Health (Smallpox Prevention) Regulations, 1917.

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. L. Statnigrosch, 191, Kingsland Road, E.2 (Shoreditch North-East District).
- (2) Dr. N. H. Clubwala, 247, Kingsland Road, E.2 (Shoreditch South-West District).

VACCINATION OFFICERS' RETURN RESPECTING THE VACCINATION OF CHILDREN WHOSE BIRTHS WERE REGISTERED IN 1931.

Date.	Registration sub-districts comprised in vaccination officers' district.	Number of births returned in birth list sheets.	Number of these births duly entered in Columns 1, 2, 4 and 5 of the vaccination register (birth list sheets), viz. :—				Number of these births which are not entered in the vaccination register, on account (as shown by report book), of					
			Column 1, successfully vaccinated.	Column 2.		Column 5, dead, unvaccinated.	Postponement by medical certificate.	Removed to other districts and notified to vaccination officers of the districts.	Removal to places unknown, or which cannot be reached, and cases not having been found.	Cases remaining or temporarily unaccounted for.	Total number of certificates of successful vaccination received during the calendar year 1932.	Number of Statutory Declarations of Conscientious Objection actually received by the Vaccination Officer irrespective of the dates of birth of the children to which they relate, during the Calendar Year 1932.
				Insusceptible of vaccination.	Certificate of conscientious objection.							
1931.	1	2	3	4	6	7	8	9	10	11	12	13
1st Jan. to 31st Dec.	North-East	786	194	—	427	42	16	47	26	34	230	494
	South-West	613	170	—	310	20	—	2	110	1	141	271
	Other Districts	—	—	—	—	—	—	—	—	—	112	2
	TOTAL ...	1,399	364	—	737	62	16	49	136	35	483	767

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, 1932:—

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	—	5	5	29	—
Holborn & Finsbury Institution	Dr. R. T. Taylor	1	5	6	0	—
Shoreditch South-West District.	Dr. N. H. Clubwala	198	127	325	167	—
Shoreditch North-East District.	Dr. L. Statnigrosch	177	125	302	7	—
		376	262	638	203	

SCARLET FEVER.

The cases certified numbered 463, of which 44 or 9·5 per cent were subsequently not regarded as Scarlet Fever. The actual number of cases was accordingly 419, which gives an attack rate of 4·37 per 1,000 inhabitants.

The age, seasonal and Ward distribution of the cases are included in the table on page 30. There were six fatal cases. The number of cases and the attack rates in the Borough and Wards are given in the subjoined table:—

Ward.	No. of cases.			Fatal Cases.			Rates per 1,000 Population.		Case Mortality. Deaths per 100 cases.
	Male.	Female.	Total.	Male.	Female.	Total.	Attack	Death	
Moorfields ...	11	8	19	...	...	...	4·96	...	...
Church ...	29	36	65	...	...	...	4·01	...	...
Hoxton ...	35	24	59	3	...	3	3·75	0·19	5·08
Wenlock ...	27	58	85	1	...	1	5·47	0·07	1·28
Whitmore ...	20	30	50	...	...	...	3·43	...	...
Kingsland ...	20	33	53	...	2	2	5·59	0·21	3·77
Haggerston...	27	23	50	...	...	...	5·12	...	...
Acton ...	13	25	38	...	...	...	3·59	...	...
Total ...	182	237	419	4	2	6	4·37	0·06	1·43
London ...	...	...	14,192	...	...	83	3·28	0·02	0·58

The number of cases in Shoreditch was more than in 1931, in which year there were 263 cases with an attack rate of 2·7.

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

Isolation of patient. With the exception of two 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. It is sometimes found that there is a missed case in the house still in the infectious stage.

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.

DIPHThERIA.

The cases certified numbered 295, of which 46 or 15·6 per cent were subsequently not regarded as being diphtheria. The number of cases during the year was thus 249, which gives an attack rate of 2·6 per 1000 inhabitants. In 1931 the number of cases was 228 and the attack rate 2·3.

The age, seasonal and ward distribution of the cases are included in the table on page 30.

There were 7 fatal cases—2 males and 5 females. These occurred in the following age groups :—

Aged 1-2 years	...	...	...	2
Aged 2-5 years	...	...	...	1
Aged 5-10 years	...	...	...	4

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 ...	4	3	7	...	...	...	1·8	...	...
Church ...	18	36	54	...	2	2	3·3	0·12	3·70
Hoxton ...	11	22	33	...	...	...	2·1	...	...
Wenlock ...	29	15	44	1	1	2	2·8	0·13	4·55
Whitmore ...	16	17	33	...	2	2	2·3	0·14	6·06
Kingsland ...	13	5	18	1	...	...	1·9	0·11	5·55
Haggerston...	19	23	42	...	...	...	4·3	...	...
Acton ...	10	8	18	...	...	...	1·7	...	...
Total ...	120	129	249	2	5	7	2·6	0·07	2·81
London ...	...	...	8,162	...	...	305	1·87	0·07	3·74

The death rates from diphtheria in Shoreditch and London are compared in the table on page 35 of this Report.

The number of cases notified per 1,000 population are compared in the following table :—

	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932
England and Wales	1·37	1·05	1·07	1·23	1·31	1·33	1·55	1·59	1·86	1·26	
London	3·37	2·27	2·31	2·73	2·96	2·71	2·75	2·68	3·1	1·94	1·87
Shoreditch ...	4·1	3·4	3·6	4·1	4·0	3·7	3·5	2·8	3·3	2·3	2·6

During the year the number of bacteriological examinations made for the purpose of detecting the diphtheria bacillus numbered 673.

Home enquiries were made in the majority of cases notified and it was possible to trace the source of infection in 27 instances.

Much can be done to lower the mortality and to lessen the serious after effects of the disease by securing the prompt removal of patients to hospital and by advising those who have been exposed to infection to seek medical aid if suspicious symptoms develop.

It is usually possible for cases to be removed to one of the London County Council Fever Hospitals within an hour of the receipt of a telephone message from the doctor in attendance, so that there is a minimum of delay in the commencement of anti-toxin treatment. All the cases notified during the year were removed to hospital.

If for any reason the patient cannot at once be removed to hospital, anti-toxin and syringe can be obtained from the Public Health Department, now installed in the new building at 8-14, Laburnum Street, or after office hours from the Town Hall.

As has been explained in previous reports, diphtheria is sometimes spread by "carriers", that is, by individuals who though not ill themselves carry the diphtheria germ in the nose or throat. These cases are most commonly found amongst children, and the London County Council have made arrangements under which school children can be treated for this condition at special clinics at Guy's, the London, and St. Mary's Hospitals. On one or two occasions it has been possible to arrange for children who were below school age to attend these clinics.

This section of the report would be incomplete if reference were not made to the very important fact that children can be protected from diphtheria by means of an easily administered skin injection. There are several clinics under the control of Public Health Authorities in London and in the Provinces to which parents are invited to bring their children to be protected in this way.

In November, 1932, a Circular was issued by the Ministry of Health in which attention was directed to the importance of making provision to safeguard children against this most serious disease. Although no definite decision was reached during the year covered by this report, it affords great satisfaction to be able to record that at the time of writing the Council has given its approval to the establishment of a Diphtheria Immunization Clinic in Shoreditch.

ENTERIC FEVER.

Three cases of Typhoid and two of Paratyphoid fever were notified during the year. Careful enquiries were made in connection with these cases, but it was not possible to ascertain the source of infection. All made good recoveries.

DYSENTERY.

Eight cases of dysentery came to the knowledge of the Department during the year. One of these, a male 56 years of age, was only diagnosed at death, which took place in his own home. The remaining seven cases were notified. Brief particulars of these cases are as follows:—

A male aged 69 years was removed to Hospital on 30th August, was notified as suffering from dysentery on 17th October, and died on the following day. Six closely associated cases were notified from two houses in one street. By the time the diagnosis was confirmed by bacteriological examination all were well on the way to recovery and removal to hospital was unnecessary. There were no further cases.

ERYSIPELAS.

The cases certified numbered 39, and there were 7 deaths, 2 males and 5 females. The deaths occurred at the following ages:—

Under 1 year	...	...	...	1
Between 1 and 2 years	...	...	...	1
„ 35 and 45 years	...	...	...	2
„ 55 and 65 „	...	...	...	1
„ 75 and 85 „	...	...	...	1
Over 85 years	...	...	...	1

The age, seasonal and ward distribution of the cases are included in the table on page 30.

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	0.51	0.04	7.98
Shoreditch	0.41	0.07	17.95

Twenty-five cases were moved to Hospital, mostly to St. Leonards, 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.

Three cases were notified during the year. There was one death, the certificate being in the following terms:—

Septicæmia, abortion, natural causes. Inquest.

Of the twenty-nine cases of Puerperal Pyrexia notified, four were finally diagnosed as suffering from Puerperal Fever. The total number of cases of which information has been received during the year is accordingly seven.

In the following table the number of notified cases of and deaths from Puerperal Fever in London and Shoreditch during recent years are compared. It should be explained that the Shoreditch figures include only cases actually notified as Puerperal Fever. Cases primarily notified as Puerperal Pyrexia and afterwards stated to be suffering from Puerperal Fever are not included.

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.
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	0·9
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
1931 ...	293	4·3	120	1·8	9	5·3	...	...
1932 ...	220	3·3	79	1·2	3	1·78	1	0·59

Puerperal Fever is a disease associated with child-birth and caused by infection from the generative tract.

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.

Consultations were held in four cases notified under these regulations.

The number of cases of Puerperal Pyrexia notified was twenty-nine. It is the practice to follow up these notifications with a request for a final

diagnosis of the condition from which the patient is found to be suffering, and from replies received it is possible to group these cases as follows:—

Puerperal Fever, four cases; Puerperal Supraemia, seven; Pyrexia due to retained membranes, three; Puerperal endometritis, one; localized vaginal sepsis, one; local uterine infection, two; local uterine infection and mastitis, one; kinking of cervical canal, one; perineal tear, localized infection of anaerobic, streptococci bacillus coli and diphtheroids, and two weeks later breast abscess, one; pyelitis of B. coli type, two; pyrexia of unknown origin, which cleared up within seven days, one; mastitis, one; bronchitis following caesarian section for obstructed labour, one; abscess of breast, one; acute pleurisy, one; lacerated perineum, one.

Twenty-five of these cases were removed to hospital. Three cases died.

Consultations with the specialists referred to above were held in two instances.

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 gonorrhoeal infection of the child's eyes during 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				
29	22	7	29	...	...	...

The cases per 1,000 births numbered 17·3 in Shoreditch, as compared with 10·2 for London as a whole. In addition to the cases notified, 59 cases of inflammation of the eyes in the newly born were reported by the Medical Officer of Health of the London County Council. This figure includes 4 cases subsequently notified as ophthalmia neonatorum and included in the foregoing table.

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.

Four cases were removed to 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. Two cases were admitted to St. Leonard's Hospital. Eighteen cases were treated as out-patients at the Royal London Ophthalmic Hospital (Moorfields). Three 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 FEVER.

Twelve cases of this disease were known to occur in the Borough during the year. Six terminated fatally. In one of these cases the diagnosis was not made until the patient had recovered, and in one it was not confirmed.

In no instance was it possible to trace the source of infection.

Several bacteriological examinations of contacts were made in connection with these cases, but with negative result in every instance.

The number of deaths from this disease in London and Shoreditch during recent years have been as follows:—

		1932	1931	1930	1929	1928	1927
Shoreditch	...	6	6	—	4	3	1
London	...	131	131	80	85	61	71

ENCEPHALITIS LETHARGICA.

Number of cases notified during the year	...	...	...	...	...	...	1
Number of cases Post Encephalitis Lethargica known to live in Borough at end of year	...	...	...	...	...	...	27
Number of cases Post Encephalitis Lethargica admitted to special Institutions during the year	...	...	...	...	...	...	1
Number of applications for admission made by Medical Officer of Health	...	...	...	...	...	...	1

The case notified was a male aged 34 years.

The after effects of this disease are most serious. Years after the initial illness these patients frequently develop partial paralysis. If this is progressive they can only receive satisfactory treatment and care in special institutions.

ACUTE POLIOMYELITIS.

A girl aged eighteen months and two boys aged three years and two years and five months were notified as suffering from this disease. All three were removed to hospital.

This disease, which most commonly attacks children, is characterized by acute feverish onset, with pain in one or more limbs, and is followed by more or less extensive paralysis.

Frequently it is not diagnosed during the initial stages, and the number of actual cases is no doubt in excess of the notifications.

The after treatment of the paralysis, which should extend over several years, is most important. If neglected, children readily become badly crippled, who under skilled orthopaedic treatment might enjoy normally active lives. Every effort is made by the Health Visitors to secure that children under 5 years of age who are afflicted in this way attend hospital and that the parents carry out the advice given.

On reaching school age these children attend the Hoxton House Physically Defective School where all are medically inspected and referred to hospital where 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	...	...	...	...	26
Influenzal pneumonia	...	...	...	...	5

Of the 31 cases thus brought to the notice of the Department, it was found that 19 were receiving treatment in St. Leonard's Hospital. Of the cases treated at home: 1 was visited by the Nurses in 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 12, fairly satisfactory 7, unsatisfactory 4.

In addition to the cases of pneumonia notified, as above, 35 cases of pneumonia not of notifiable type were visited by the District Nursing Association. Altogether the Association paid 646 visits in connection with 36 cases of pneumonia.

ANTHRAX.

One case of Anthrax was notified in the person of a young man, 23 years of age, who was employed as a wool sorter. The patient, who was last at his place of employment in this Borough on 23rd September, was removed from his home, also in this Borough, to St. Bartholomew's Hospital on the following day.

Upon admission to hospital he had a skin lesion on the neck that was recognized as a typical malignant pustule and was given Sclavo's serum. Serum was also given on the 25th and 27th, and the patient made a good recovery.

The disease was contracted as a result of carrying infected hair which it is understood was imported from the United States.

Infectious Diseases not notifiable in Shoreditch.

MEASLES.

The deaths from Measles numbered 60 and occurred in the following age groups :—

Under 1 year	...	...	...	...	13
One to 2 years	...	...	...	...	29
Two to 5 years	...	...	...	...	16
Five to 10 years	...	...	...	...	2
					—
					60

Measles was responsible for 24·9 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
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
1931	26	115	0·26	0·03
1932	60	824	0·63	0·19

The distribution of the deaths in the different wards was as shown on the table on pages 22 and 23.

Information regarding cases of measles reaches the Public Health Department in various ways:—From the School Authorities, from the Measles Visitor, from the Health Visitor, and from Medical Practitioners in the Borough. The number of cases thus brought to our knowledge was 2,073.

Upon the recommendation of the Medical Officer of Health, the London County Council will take severe cases, or cases in which home nursing is specially difficult. During the year the number of cases removed to the hospitals of the Council was 568.

In accordance with arrangements made by the Borough Council, the District Nursing Association paid 320 visits in connection with 20 cases of measles.

Reference was made in the last Report to the temporary appointment of a Measles Nurse. This officer, who was appointed in November, 1931, continued until May, 1932 to carry out the duty of visiting homes in which information was received from the schools that cases of Measles had occurred or were suspected.

This scheme of co-operation with the London County Council School Medical Service worked smoothly and well and was undoubtedly the means of securing institutional treatment, or less frequently, nursing assistance in the homes in a large number of cases.

From the figures that have been given it will be seen that during 1932 Measles was responsible for a very great deal of illness and for a high proportion of all the deaths of children under five years of age.

As has been explained in previous reports, Measles is an epidemic disease. The serious epidemic, of which the figures for 1932 only express a part, began in 1931.

The following particulars which relate to the epidemic as a whole cover the period from 1st November, 1931 to 31st August, 1932.

Total number of cases brought to the notice of the Department	1,673
Number of cases reported from Schools on Form 84 (including suspected cases)	748
Total number of deaths	73

Measles Nurse :

How long employed : 5½ months—December-May.

Number of homes visited	2,096
Number of visits	2,932
Number of schools included under Scheme of Control	19 (out of 26)
Total number of cases admitted to Fever, General and Voluntary Hospitals	750
Percentage of cases removed to hospital	43·9%

As part of the scheme of co-operation with the London County Council, a leaflet, in the following form, was distributed to the parents of the children attending these schools:—

MEASLES WARNING.

MEASLES has appeared in your neighbourhood, and there is a possibility that the disease may become prevalent.

MEASLES is a highly infectious disease, especially in the early stages of illness **before the rash appears**. The early symptoms are those of a cold, which may be at first slight; there is generally running at the eyes and nose, sneezing and possibly a dry cough, followed by a rash about the fourth day after the first appearance of illness.

MEASLES SHOULD ALWAYS BE TREATED AS A SERIOUS DISEASE, ESPECIALLY IN YOUNG CHILDREN. As soon as it is suspected the child should be put to bed in a well-ventilated room (as far as possible away from other children) and be kept warm. A doctor should be called in at once, for many children lose their lives, or suffer from ill-health for years as a result of the after-effects of the disease, mainly because the disease is neglected in the early stages. The child should on no account be exposed to chill or draughts, or allowed to run about until the doctor or nurse gives consent.

IMMEDIATELY MEASLES OCCURS IN YOUR FAMILY YOU SHOULD INFORM THE HEAD TEACHER OF THE SCHOOL ATTENDED BY YOUR CHILDREN OR THE HEALTH VISITOR AT THE INFANT WELFARE CENTRES OR SEND WORD TO THE MEDICAL OFFICER OF HEALTH AT THE TOWN HALL.

IF CHILDREN ARE ABSENT FROM SCHOOL FOR MORE THAN TWO DAYS, PARENTS ARE SPECIALLY ASKED TO SEND A NOTE TO THE HEAD TEACHER STATING THE REASON FOR SUCH ABSENCE.

A child showing signs of sickening or suffering from measles must not attend Sunday School, Play Centres, Cinemas, Public Baths, or any place of entertainment, nor mix with other children.

ARRANGEMENTS FOR THE REMOVAL OF A MEASLES PATIENT TO HOSPITAL OR FOR NURSING ASSISTANCE IN THE HOME MAY BE MADE IN SPECIAL CASES WHEN THE NEED FOR THIS IS KNOWN TO THE MEDICAL OFFICER OF HEALTH.

The sooner you send word of the existence of measles in the home the sooner will the Medical Officer of Health know and the sooner will help be forthcoming. **Do not wait until bronchitis or pneumonia develop—it may then be too late.**

WHOOPIING COUGH.

The number of deaths from this disease in Shoreditch during 1932 and preceding years were as follows:—

Year.	Deaths.	Year.	Deaths.
1932	4	1927	24
1931	11	1926	0
1930	3	1925	29
1929	40	1924	28
1928	5	1923	10

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

The death rate from this disease was 0·04 per 1,000 inhabitants. The deaths in London as a whole numbered 334, the death rate being 0·08.

The number of cases removed to the hospitals of the London County Council during the year was 45.

INFLUENZA.

Influenza was less prevalent both in Shoreditch and in London as a whole in 1932 than during the immediately preceding year. Comparative figures for recent years are contained in the following table:—

SHOREDITCH.			LONDON.	
Year.	Deaths.	Deaths per 1,000 population.	Deaths.	Deaths per 1,000 population.
1932	19	0·19	1,188	0·27
1931	23	0·23	1,114	0·25
1930	1	0·01	370	0·08
1929	68	0·68	3,088	0·69
1928	16	0·16	502	0·11
1927	25	0·24	1,790	0·39

DIARRHŒA AND ENTERITIS.

The death rate per 1,000 live births in Shoreditch and other areas are compared in the table on page 4, and particulars of the age, sex and ward distribution of these deaths will be found in the tables on pages 22 and 23.

In the following table the deaths and death rates of children under one year and between one year and two years in Shoreditch and London are compared:

	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.	
	1931	1932	1931	1932	1931	1932	1931	1932	1931	1932
London ...	621	776	0·14	0·18	572	732	8·7	—	13·6	—
Shoreditch	33	26	0·34	0·27	29	22	17·2	13·1	23·8	16·4

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 from the Head Teachers 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	8
Diphtheria	393
Scarlet Fever	650
Measles	1,110
Chicken Pox	534
Whooping Cough	209
Mumps	152
Typhoid Fever	1
Other Infectious Disease	181
	3,238

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.

FACTORY AND WORKSHOPS ACT.

It was not found necessary to serve any notice under Sections 108 or 110 of the Factory and Workshops Act, 1901. These sections relate to infection in the homes of outworkers. Where it was considered that there was any risk of infection the work was temporarily discontinued and the premises were disinfected.

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 1932.

Disease	Under 5	Visits	Disease	Over 5	Visits
Abscess of Face	1	21	Abortion	2	26
Abscess of Foot	1	16	Ante-Natal	8	44
Abscess of Buttock	2	13	Enlarged Breasts	1	3
Acetonaemia	1	2	Influenza	8	61
Bronchitis	12	85	Influenza and Bronchitis	3	17
Broncho Pneumonia	6	71	Influenza and Pneumonia	8	101
Congenital Heart	1	3	Mammary Abscess	7	100
Conjunctivitis	1	9	Mastitis	7	121
Constipation	1	3	Measles	3	30
Cystitis	1	6	Measles and Bronchitis...	1	15
Discharging Ears	6	117	Measles and Pneumonia	1	9
Disease of Eyes	7	126	Miscarriage	4	33
Debility	2	7	Old Age (Supervision) ...	1	31
Dis. Umbilicus	2	4	Parturition	6	105
Delayed separation of cord	1	9	Pneumonia	23	434
Enlarged Glands	2	20	Pneumonia and Pleurisy	1	26
Influenza	1	17	Post Natal Pyrexia	1	10
Impetigo	4	36	Post Partum	2	11
Intestinal	2	8	Post Partum Pyrexia ...	1	1
Measles	25	327	Skin Affection of Breasts	1	7
Measles and Bronchitis ...	2	27	Tuberculosis	19	577
Measles and Pneumonia ...	11	178			
Ophthalmia Neonatorum	3	32			
Otorrhoea	21	472			
Pemphigus	2	36			
Pertussis	2	31			
Pneumonia	12	186			
Pyrexia	1	4			
Rickets	1	5			
Scalded Foot	1	7			
Septic Fingers	2	35			
Septic Spots	1	4			
Threadworms	58	447			
Tonsillitis	1	10			
Tonsils and Adenoids ...	60	232			
Ulcerated Mouth	1	32			
Totals	258	2,638	Totals	108	1,762

The total number of cases nursed at all ages was 366, in connection with whom 4,400 visits were made by the Nurses of the Association. Amongst those over five years there were two deaths from pneumonia, two from influenza and pneumonia, and nine from tuberculosis. Amongst the children under five, one died from pneumonia, one from measles and one from measles and pneumonia.

BACTERIOLOGICAL EXAMINATIONS.

With the exception of those carried out at 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 taken by messenger to the laboratory. The report upon a throat swab sent in this way is telephoned to the doctor the following morning.

During the year some 930 examinations were made, which included the following:—For suspected diphtheria 673, for suspected tuberculosis 115, in connection with the diagnosis of venereal disease 37.

DISINFECTION.

The premises disinfected numbered 1,117. The articles removed to the Borough Council's Disinfecting Station totalled 12,414, and included 840 beds, 463 mattresses, 1,865 pillows, 505 bolsters and some 8,741 other articles such as sheets, blankets, quilts, curtains, carpets, clothing and the like.

THE SHELTER.

The accommodation provided under Section 60 (4) of the Public Health (London) Act, 1891, was in use on 2 occasions, in order to facilitate disinfection after the 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 times at which these clinics are open will be found on page 9 of this Report.

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 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 :—

1928	...	78	1931	...	80
1929	...	69	1932	...	37
1930	...	79			

IV.—SANITARY WORK.

DISTRICT INSPECTORS.

It will be seen from reference to the portion of this Report dealing with Staff, that there was much sickness amongst the Sanitary Inspectors during the year. Altogether the time lost from this cause amounted, amongst the District Inspectors, to approximately 138 weeks, or 28 per cent of the total working time that should normally be available for this work. In consequence less Sanitary work was done than during the preceding year.

In order to deal with urgent matters as they arose, it was necessary to abandon to some extent the usual practice under which each District Inspector confines himself to his own district, and to arrange for Inspectors of adjoining districts to be responsible for matters arising on those of Officers who were not on duty. For this reason the work of the Inspectors is classified according to districts and not, as is usual, under the names of the individual Inspectors.

The total number of Intimations served as to insanitary conditions was 4,493. The number served on each Sanitary District was as follows:—

District No. I	...	307	District No. VI	...	414
II	...	397	VII	...	441
III	...	351	VIII	...	473
IV	...	851	IX	...	285
V	...	597	X	...	377

In connection with the Inspectors' Sanitary work, some 1,096 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 670 instances.

For non-compliance with the requirements of the Sanitary Authority, proceedings were taken before the Magistrates in 16 instances. A list of Legal Proceedings will be found on pages 75 and 76.

The following tables (pages 52 and 53), prepared by the Senior Sanitary Inspector, summarize the visits and work of the Sanitary Inspectors during 1932. The work done in compliance with the provisions of the Factory and

Work Done, 1932	DISTRICTS										Totals
	1	2	3	4	5	6	7	8	9	10	
Premises, throughout ...	39	13	11	32	5	10	16	14	8	4	152
„ partially ...	133	152	140	359	275	197	211	165	115	180	1,927
„ total rooms ...	389	387	337	669	853	546	602	387	290	471	4,931
Verminous rooms ...	1	8	16	24	28	16	9	2	...	19	123
„ premises ...	...	1	11	20	20	...	8	...	...	12	72
Premises, generally repaired	77	235	232	440	456	250	269	269	161	348	2,737
Light and Ventilation ...	...	2	2	6	8	3	1	1	3	2	28
Roofs, gutters, rain-water pipes ...	42	183	139	382	354	148	165	176	128	270	1,987
Overcrowding ...	8	8	16	112	19	11	19	3	2	...	198
Water re-instated ...	7	2	3	4	6	21	2	2	4	4	55
Drains, new ...	5	...	...	2	2	...	1	3	1	1	15
„ re-constructed ...	2	8	1	6	7	...	20	4	4	1	53
„ improved or repaired	9	16	14	51	22	8	27	23	9	30	209
„ obstructions removed	8	5	15	20	49	14	15	23	16	24	189
Soil, vent pipes repaired ...	2	5	5	46	7	5	5	5	4	2	86
W.C.'s—											
New ...	35	10	1	1	6	8	8	56	5	2	132
Improved or repaired ...	33	96	59	131	98	50	109	71	55	97	799
Obstructions removed ...	9	9	14	39	23	13	27	2	6	19	161
Sinks, improved ...	16	14	9	21	25	17	10	6	9	10	137
„ traps provided ...	...	4	3	6	4	...	5	...	7	3	32
<i>Outdoor Premises</i>											
Floors, paving repaired ...	...	39	13	103	61	11	34	43	16	35	355
Cleansed or limewashed ...	78	1	26	259	156	63	55	61	15	52	766
Improved or repaired ...	3	...	...	...	...	...	...	...	...	...	3
Dustbins provided ...	12	27	65	109	80	40	44	40	51	36	504
Ashpits improved or repaired	1	...	...	...	...	...	...	...	...	1	2
„ abolished ...	...	2	...	...	...	...	...	...	...	...	2
Accumulations removed ...	7	16	8	33	13	13	10	24	17	5	156
Urinals cleansed or repaired	1	...	2	5	...	1	...	2	...	...	11
Animals removed ...	...	1	2	3	1	1	...	3	...	...	11

WATER SUPPLY.

The number of certificates issued as required under the Public Health (London) Act, 1891, Section 48 (2), was 50.

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

There are nine artesian wells in the Borough, the water from one of which is used for brewing. In no instance is well water, so far as is known, being used for drinking purposes at the present time. There is a satisfactory supply of drinking water from the mains in the Public Elementary Schools.

RATS AND MICE DESTRUCTION ACT, 1919.

SUMMARY.

Inspectors	DISTRICTS										Totals
	1	2	3	4	5	6	7	8	9	10	
Complaints dealt with ...	21	20	6	43	25	...	20	13	5	8	161
Drains tested ...	3	13	2	14	5	...	1	5	5	6	54
Found defective ...	...	6	...	3	3	...	...	...	...	1	13
Found satisfactory ...	3	7	2	11	2	...	1	5	5	5	41
Premises where egress of rats was ascertained ...	8	7	...	34	15	...	14	3	5	5	91
Premises reported freed from rats ...	7	20	6	34	24	...	19	13	5	8	136

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 12. These requirements are as follows:—

1. All shelves, fittings and tables upon which instruments in general use are placed, to be on glass, slate, or other non-absorbent material.
2. A plentiful supply of clean towels and saloon linen to be kept and a fresh piece of paper or sanitary roll to be placed on the head rest for each customer.
3. Only liquid or powdered soap, or shaving cream to be used. Razors to be wiped on sanitary paper, and hot towels or similar implements used, to be rendered antiseptic before use.
4. An antiseptic spray should be used as a styptic after shaving, and powder also applied through the medium of a spray.
5. Only clean hairbrushes must be used.
6. All tools after use to be placed in an antiseptic solution, or sterilized by heat or flame.
7. Only those combs to be used which can easily be cleaned.
8. Machine or rotary brushes should be discarded.

9. Hair after cutting to be swept up and removed as soon as possible.
10. Floors to be washed every day.
11. No customer apparently suffering from any skin or hair affection to be attended to in a public saloon.
12. The most scrupulous cleanliness to be observed in all matters pertaining to the business, and a proper and efficient antiseptic to be used.

FOOD.

STREET MARKETS AND FOOD.

Early in the year under consideration, the Sanitary Inspectors' week-end duties in relation to the Street Markets were re-arranged. Instead of requiring two Inspectors to be on duty on Saturday night and Sunday morning, the Committee recommended that one Inspector only should be on duty at these times. The recommendation was made for the reason that the markets now close considerably earlier than they did before the War. This re-arrangement made possible a revision of the off-duty time to be allowed in respect of market duty, which resulted in a substantial increase in the time available for routine work.

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 52.

The following were surrendered or seized and destroyed as unfit for the food of man : 2½ lbs. of Veal ; 2 cwt. of Apples, Bananas and Oranges ; 28 lbs. of Herrings ; box of Skate Wings ; 3 cwt. of Apples ; 23 cases of Apples ; 78 boxes of Peaches ; 5 barrels of pears ; one box of Melons and one box of Peaches.

MEAT.

The number of butchers' shops under inspection during the year was 62 and the number of visits of inspection was 104.

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

SLAUGHTER HOUSES.

The application for the necessary licence of the last remaining Slaughter House in this Borough was not renewed when the annual licences were considered by the London County Council in October, 1932.

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.

COWHOUSES.

There are two licensed cowhouses in this Borough, viz. :—

26, Nile Street; Daniel G. Walters 22 cows.

76, St. John's Road; Thomas Williams 14 cows.

The sanitary condition of both these cowhouses is satisfactory, but in all the circumstances of the milk trade of to-day, the presence of cowhouses in the midst of a densely crowded city appears to be an anachronism in favour of which there is very little to be said.

Thirty visits of inspection were paid to these cowhouses during the year.

COOKSHOPS AND EATING HOUSES.

Including the kitchens of public houses where food is prepared for customers, the number of these under inspection during the year was 223, and some 426 visits were made in connection with them. Some 25 sanitary notices were served, mainly for cleansing.

FRIED FISH SHOPS.

Some 55 were under inspection and 228 visits were made to them. 22 sanitary notices were served, mainly for cleansing.

ICE-CREAM SHOPS.

The number under observation during the year was 120, and 205 visits of inspection were made. In 19 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 120.

BAKEHOUSES.

The number of bakehouses on the register throughout the year was 51.

The number underground was 31, and the number of factory bakehouses was 36.

In connection with bakehouses the Sanitary Inspectors paid 130 visits of inspection. Intimation notices were served in 14 instances.

SALE OF FOOD ORDER, 1921.

The provisions of this Order respecting the marking of imported Meat and Eggs were complied with. No contraventions were noticed or complaints received during the year.

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. 0d., and ordered to pay £1 1s. 0d. costs.

The following summary follows in the main the return made to the Medical Officer of Health of the London County Council for inclusion in his Annual Report for the year 1932 :—

SANITARY AREA.

PREMISES.	NUMBER OF PLACES—				Number of inspections, 1932	Number of notices, 1932	Number of prosecutions, 1932
	On register at end of 1931	Added in 1932	Removed in 1932	On register at end of 1932			
Milk premises ...	287	14	8	293	1,170	15	...
Cowsheds ...	2	...	...	2	30	2	...
Slaughterhouses ...	1	...	1	...	...	...	...
Offensive trade premises	1	...	...	1	5	2	...
Ice Cream premises ..	109	17	6	120	205	19	...
Houses let in lodgings	410	11	12	409	342	163	...
Restaurants and eating houses	205	25	5	223	426	45	...

SMOKE NUISANCES.

(1) Number of observations ...	371	(4) Number of Statutory notices served ...	Nil
(2) Number of intimations served ...	1	(5) Number of legal proceedings	Nil
(3) Number of complaints received ...	3	(6) Number of convictions ...	Nil

CLEANSING AND DISINFECTION.

Number of adults cleansed ...	5	Number of premises cleansed—	
Number of children cleansed ...	Nil	(a) After infectious diseases	1,082
		(b) For vermin ...	35

WATER SUPPLY TO TENEMENT HOUSES.

Number of premises supplied ...	12	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 (whole-time): Municipal—	6.	Voluntary—	2.
Number of Pupil Health Visitors (part-time)—	4.		
Total number of houses in the Borough ...	...	...	14,133
Number of houses occupied by the Working Classes ...	...	...	13,708
Number of houses inspected :—			
(a) On account of complaints or illness and otherwise under Public Health Act ...	...	...	5,360
(b) House-to-house (Public Health Act) ...	...	...	1,410

Number of Notices served—

(a) Under Public Health Act—							
(i.) Intimation	...	...	...	...	...	...	4,493
(ii.) Statutory	...	...	...	...	...	...	670
(b) Under Housing Act Nil							
Number of houses repaired or nuisances remedied under Public Health Act, 1891 4,493							
Number of houses repaired under Section 17 of Housing Act, 1930—							
(a) By owners	...	...	...	...	...	...	Nil
(b) By Local Authority in default of owners	...	...	...	...	...	...	Nil
Number of houses closed on notice by owner that they could not be made fit Nil							
Number of houses for the Working Classes—							
(a) Erected during the year	...	...	...	...	...	...	52
(b) In course of erection	...	...	...	...	...	...	Nil
Number of representations by Medical Officer or other person (Housing Act, Sec. 17) 2							
Number of houses included in such representations 2							
Number of Closing Orders made Nil							
Number of Closing Orders determined (i.e., houses made fit) Nil							
Number of Demolition Orders Nil							
Number of houses demolished—							
(a) In pursuance of Orders	...	...	...	...	...	...	Nil
(b) Voluntary	...	...	...	...	...	...	11

UNDERGROUND ROOMS.

Number illegally occupied 7 (Public Health (London) Act); 2,000 approximately (Housing Act)							
Number closed or illegal occupation discontinued 7							

OVERCROWDING.

Number of cases of overcrowding found 198							
Number remedied 240							
Number of prosecutions Nil							

OFFENSIVE TRADES.

The only business carried on within the Borough that falls within this category is that of a Fur Skin Dresser at 110, New North Road. Five visits of inspection were made. Two intimation notices were served in respect of lime washing. Both were duly complied with.

RAG AND BONE DEALERS.

Some 14 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 33. Intimations as to the need for cleanliness were written and duly attended to in 4 instances.

VERMINOUS HOUSES.

The houses where it was necessary to take measures on account of the presence of vermin numbered 72, and in connection with these some 123 rooms were dealt with during the year, sanitary notices being served where necessary. A number of these premises were found as a result of reports received from the School Authorities concerning children in a verminous condition.

During the year the homes of some 21 children, 10 boys and 11 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 6 boys and 10 girls had been given the opportunity of being cleansed at these stations, that in the case of 3 boys 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 1 boy and 1 girl legal proceedings were pending for non-compliance with the requirements of Statutory Notices under this Act. In one case a child was stated by its mother to be incontinent and was advised to seek medical advice.

In all the cases reported the homes were visited by the Sanitary Inspectors, and the following summarizes the results obtained: In 16 the rooms occupied were satisfactory, varying from fairly clean to very clean, in 5 they were dirty. In 16 the bedding was clean or fairly so, and in 5 verminous. In two of the homes evidence of poverty was marked. No evidence of lice was found in connection with any of the homes.

The children reported by the School Authorities as suffering from scabies numbered 46, of whom 27 were females. As a result of the enquiries made 8 other cases came under observation. As far as practicable steps were taken to prevent infection spreading.

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

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

SCHOOLS.

The sanitary condition of the Public Elementary Schools in the Borough, twenty-five in number, is satisfactory.

FOOD POISONING.

By Section 7 of the London County Council (General Powers) Act, 1932, the duty is imposed upon medical practitioners of notifying cases of food poisoning, and of suspected food poisoning.

A letter was sent to the medical practitioners in the Borough on 13th September, informing them of the provisions of this section, and between this date and the end of the year 19 notifications were received. Of these, two related to suspected food poisoning. The number of visits paid by the Sanitary Inspectors in connection with these notifications was 38.

In none of the cases did it appear upon investigation that the illness was due to contamination or unwholesomeness of food.

It is to be expected that at the outset notifications under this section will include a high proportion of cases of digestive disturbance and of idiosyncrasy and intolerance towards certain articles of diet.

All notifications are reported to the County Medical Officer of Health who circulates the information obtained to the Metropolitan Borough Health Departments. Useful machinery has thus been set up which should prove of real service in the control of disease caused by unsound food or by food containing poisonous substances.

NUTRITION.

The poverty and unemployment that have been so prevalent in the Borough during the year here considered (see tables, page 7) naturally make one ask oneself to what extent the health of the inhabitants has suffered through impaired nutrition.

There is, happily, no evidence of serious or widespread ill-health from this cause. On the other hand, there can be no doubt that a large number of families have so little money available for buying food that it must be impossible for even the most skilful housewife to provide a physiologically sound diet for every member of the family.

In December, 1931, the Ministry of Health issued a Memorandum, prepared by the Advisory Committee on Nutrition, in which the food requirements for men, women and children of various ages are given, and in which the essential principles of dietetics are clearly stated.

The official presentation of these facts has had the effect of stimulating interest, and in considering the circumstances of individual families in relation to assistance in one form or another, the Committees concerned have discussed on more than one occasion the adequacy of the family food supply.

Though good management plays an important part, a minimum sum must be available for food if an adequate and balanced diet is to be provided.

As a result of careful enquiry in local shops and markets, it appears that the minimum cost of the food necessary for an adult male is between 6/6d. and 7/- per week. The lower figure implies more than average skill in buying. From a table of relative requirements given in the Ministry memorandum, it is possible to estimate the cost of food necessary for the women and children of the family once that of the adult male has been agreed.

There are dangers in this method of approach. A minimum always tends to be accepted as a maximum and in thinking on the lines here considered, we must constantly remind ourselves that below the minimum lie malnutrition and lessened resistance to infection. We should always aim at a reasonably wide margin of safety.

The minimum cost figure given above is that for an individual in sound health. Many of the cases, however, that come to be considered in connection with the work of this Department are not normal and require an excess of special articles of diet, for example, milk, butter and eggs, which considerably increase the cost of the week's food supply.

Good food is probably more important to health than any other single factor, and for that reason it would be of great assistance if an official estimate of the cost of food necessary to maintain an individual in health were made available and kept up to date.

There are many questions that cannot be satisfactorily considered in the absence of a clear idea on this point. For example, should pressure be brought to bear on a family to pay more rent in order to move from a house in which they are living under overcrowded conditions? The answer must largely depend upon the effect that the move will have upon the food supply of the family.

A further important Ministry of Health Circular upon Nutrition (No. 1290) was issued in October. This deals with "Nutritional Anæmia in Infancy" and "Rickets and Dental Disease" and stresses the importance of giving milk to nursing and expectant mothers and to babies and young children, in order to combat and prevent these diseases.

Reference to the Maternity and Child Welfare section of this Report will show that this Authority makes full use of its power to grant allowances of milk.

Talks on food and on wise buying were continued at the Welfare Centres throughout the year, and it is clear that a large number of housewives take a great interest in this subject, and are anxious to learn and to apply their knowledge in their own homes.

REGISTRATION OF FOOD PREMISES.

The London County Council (General Powers) Act, 1932, Section 5, requires that premises used or proposed to be used (*i*) for the sale or manufacture or storage of ice cream or other similar commodity, or (*ii*) for the preparation

or manufacture of sausages or potted, pressed, pickled or preserved meats, fish or other food intended for sale, shall be registered with the Sanitary Authority.

It was agreed to interpret this section so as to require the registration of premises under (ii) above, at which the following are made :—

SAUSAGES and allies; large and small, with or without skins.

Saveloys.	Haggis.
Black Puddings.	Rissoles.
White Puddings.	Bladders of Lard.
Sausage Skins.	

MEAT: Potted, Pressed, Pickled, Preserved.

Potted meat or head, tongues, etc.

Meat Pastes.

Meat Extracts.

Faggots.

Cooked Meats, Sheep's-head, etc., Pork.

Meat Pies, Pork Pies.

Dripping.

Brawn.

Brisket (Pressed).

Meat and Pork (pressed).

Meat and Pork (pickled).

Trotters (pickled).

Hams

Bacon

} boiled, cooked, smoked or cured or otherwise preserved.

FISH: Potted, Pressed, Pickled, Preserved.

Pastes—various. Pickled or soured.

Cured or dried fish. Canned.

Eel pies and jellied eels.

OTHER FOODS: Potted, Pressed, Pickled, Preserved.

Canned soups containing Meat.

Hors d'œuvres, if containing Meat or Fish.

At the time of writing the number of premises that have been registered under this section is :—

(i) Ice Cream, etc.	...	...	133
(ii) Other Food	...	...	79

In no instance has an application for registration been refused, though in one this was made contingent upon the removal by the applicant of some greyhound kennels in close proximity to premises in which food was prepared.

INSPECTORS WITH SPECIAL DUTIES.

The matters referred to in this sub-section of the Report were dealt with by Mr. Grant and Mr. Shaw, two of the Sanitary Inspectors who have been relieved of their other duties in order to enable them to discharge the duties here recorded over the whole of the Borough.

THE FOOD AND DRUGS (ADULTERATION) ACT, 1928.

The reports of the Public Analyst, Mr. H. G. Harrison, M.A., show that 971 samples were submitted to him during the year. This number is at the rate of 10.1 per 1,000 inhabitants.

At its meeting in March, the Council resolved to reduce by 10 per cent the number of samples to be taken under this Act. This decision has the effect of reducing the number of samples to be taken in a full year from 1,056 to 950. It will be seen from the table on page 66 that the number and percentage of samples found to be adulterated were both higher than during recent years.

The results of the year's work are summarized in the following Table :—

Quarter of 1932.	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.		
								£	s.	d.	£	s.	d.
1st	258	13	5.0%	6	Nil	6	6	15	14	0	161	5	0
2nd	227	18	7.9%	6	Nil	6	6	9	8	0	119	3	6
3rd	199	11	5.5%	4	Nil	4	4	9	7	0	104	9	6
4th	287	2	.6%	2	Nil	2	2	6	6	0	150	13	6
Totals for Year	971	44	4.5%	18	—	18	18	40	15	0	535	11	6

The Samples taken during 1932 included :—

Milks	617		Rice	3	
Sausages	34	(28 Informal)	Pearl Barley ...	3	
Vinegar	30		Quaker Oats ...	3	(Informal)
Butter	24		Tinned Peas ...	11	(7 Informal)
Dried Fruits ...	13	(Informal)	Bread & Butter	8	(Informal)
Spirits	20		Tea	14	(Informal)
Jam	17	(Informal)	Cream	7	(4 Informal)
Meat Pies	13	(Informal)	Pepper	6	(4 Informal)
Dripping	3		Meat Paste ...	2	(Informal)
Condensed Milk	15	(Informal)	Mineral Waters	6	(Informal)
Chocolate	4	(Informal)	Zinc Ointment ..	6	(Informal)
Fish Paste	4	(Informal)	Cordials	3	(Informal)
Boracic Ointment	12	(Informal)	Sauce	6	(Informal)
Flour	8	(Informal)	Mustard	2	
Margarine	5		Non-Alcoholic		
Tinned Fruit ...	4	(Informal)	Wine	6	(Informal)
Arrowroot	1		Olive Oil	3	(Informal)
Beer	4		Ground		
Tinned Fish ...	10	(6 Informal)	Cinnamon	3	(Informal)
Spices	3	(Informal)	Borax	2	(Informal)
Tincture of Iodine	4	(Informal)	Pale Ale		
Sweets	4		2% Alcohol	1	(Informal)
Castor Oil	4	(Informal)	Ground Rice ...	1	
Malt Vinegar ..	4		Minced Beef ...	7	(4 Informal)
Cake	10	(Informal)	Boiled Ham ...	1	
Brawn	1				

Of the 7 creams taken, one informal cream (23 per cent butter fat declared) was certified to be deficient in butter fat to the extent of 7·2 per cent. A formal sample was taken from the same source and was certified to be genuine.

Of the 30 vinegars taken, one was certified to contain 3 per cent excessive water. No action was taken, but a further sample was taken from the same source and was certified to be genuine.

Of the 20 samples of spirits taken, six were certified to contain excessive water ranging from 2·4 per cent to 6·4 per cent. In 5 cases legal proceedings were instituted and in all 5 the proceedings were successful, costs amounting to £13 13s. 0d. being imposed. In 1 case where the amount was 2·4 per cent excessive water no action was taken. Further samples taken from the same source were reported as genuine.

Of the samples of milk 24 or 3·88 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 	153	8	5·2
2nd 	151	8	5·2
3rd 	136	8	5·8
4th 	177	—	—

In nine of these samples, water was certified to have been added. In each of these cases the amount of added water was less than 5 per cent. Thirteen of the samples showed deficiency in fat ranging from 1 to 11 per cent below the standard as laid down by the Board of Agriculture. In one sample it was certified that 1 per cent water was added and 2 per cent fat abstracted, and in another it was certified that 2 per cent water was added and 1 per cent fat abstracted.

Legal proceedings were instituted in 10, or 41·6 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 the departure from normal was so small that it was not thought advisable to institute legal proceedings was 58·4.

EXAMINATION OF MILK SUPPLIED TO L.C.C. HOSPITALS AND SCHOOLS, 1932.

During 1932, 20 samples of milk were taken in course of delivery to St. Leonard's Hospital and 12 to the Holborn Institution, all of which complied with the contract standard for chemical analysis.

In April a sample of Pasteurized milk was taken in course of delivery to each of these Institutions, both were submitted to the Bacteriologist. The samples conformed to the standard laid down for "Pasteurized" milk.

During 1932 samples of milk were taken from 9 dairymen who deliver milk to schools in the Borough as follow :—

Dairyman	Samples submitted for chemical analysis	Result	Samples for bacteriological examination	Bacteria per c.c.	Coliform Bacillus
A. ...	7	5 Genuine 2 1% added water	2	74,900 174,000	Absent in 1/10 c.c. Absent in 1/10 c.c.
B. ...	6	All genuine	2	20,200 8,400	Present in 1/10 c.c. Absent in 1/10 c.c.
C. ...	15	All genuine	1	225,000	Present in 1/100 c.c.
D. ...	5	All genuine	2	676,000 8,320	Present in 1/10 c.c. Absent in 1/10 c.c.
E. ...	3	All genuine	1	5,180	Present in 1/10 c.c.
F. ...	12	All genuine	1	49,600	Present in 1/100 c.c.
G. ...	6	All genuine	1	80,500	Present in 1/10 c.c. Absent in 1/100 c.c.
H. ...	4	All genuine	1	23,900	Present in 1/10 c.c. Absent in 1/100 c.c.
I. ...	11	9 Genuine 2 contained 4% added water.	2	128,000 67,500	Present in 1/100 c.c. Present in 1/100 c.c.

The subjoined table gives a comparison of the results of the work under the Sale of Food and Drugs Acts for the years 1907-1932 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.
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	94	26	2.5	16	...	16	16	42	4	0	660	0	0
1931	1060	91	34	3.2	10	1	9	7	18	17	0	662	10	0
1932	971	98	44	4.5	18	...	18	18	40	15	0	535	11	6

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

The following table shows the results of bacteriological analysis of samples of milk sold under this Order :—

No. of Sample	Designation of Milk	No. of bacteria per c. cm.	Presence of coliform bacillus	Remarks
42	Pasteurised ...	123,600	Present in 1/10 c.c.	Not satisfactory
43	Pasteurised ...	21,000	Absent.	Satisfactory
45*	Grade "A" (T.T.)	73,400	Absent.	"
46	Certified ...	8,020	Present in 1/10 c.c.	Not satisfactory
47*	Grade "A" (T.T.)	2,700	Absent.	Satisfactory
48	Certified ...	1,870	Absent.	"
49*	Grade "A" (T.T.)	15,800	Absent.	"
50	Pasteurised ...	17,100	Present in 1/10 c.c.	"
51	Pasteurised ...	37,400	Present in 1/10 c.c.	"
78	Pasteurised ...	7,180	Absent.	"
79	Pasteurised ...	17,750	Absent.	"
91	Pasteurised ...	225,100	Present in 1/10 c.c.	Not satisfactory
92	Pasteurised ...	287,400	Present in 1/10 c.c.	"
93	Pasteurised ...	7,320	Absent.	Satisfactory
98	Pasteurised ...	8,330	Absent.	"

* Milk sold as Grade "A" (Tuberculin tested) shall be produced and treated under such conditions that on a sample being taken at any time before delivery to the consumer the milk shall be found to contain :—

- (a) not more than 200,000 bacteria per cubic centimetre; and
- (b) no coliform bacillus in one-hundredth of a cubic centimetre.

TUBERCULOUS MILK.

Samples of milk consigned to London are taken by the London County Council at the railway termini and also from supplies entering by road. The number of samples examined in this way during 1931 was 1,970, and of these 201 or 10·2 per cent yielded tubercle bacilli. During 1930 the percentage of samples found to be tuberculosis was 9·1. These percentages are deplorably high.

The fact that there is but little evidence of milk borne tuberculous infection either among the community generally or among the mothers and children in receipt of milk allowances under the Maternity and Child Welfare Scheme is probably due to the fact, elicited by enquiry from wholesale dealers, that practically the whole of the milk sold in Shoreditch is treated by heat before delivery.

There are two cowsheds in Shoreditch. Ten samples of milk from these were examined by Dr. Teale for the Borough Council, but in no instance was the presence of tubercle bacilli reported.

UNDESIGNATED MILK.

The results of the bacteriological examination of thirty-four samples of ordinary milk are given in the following table:—

No. of Sample	Date when taken 1932	No. of bacteria per c. cm.	Presence of coliform bacillus
39	11 Feb.	74,900	Absent.
40	11 Feb.	174,000	Absent.
41	11 Feb.	128,000	Present in 1/100 c.c.
44	11 Feb.	29,000	Absent.
62	26 May	20,200	Present in 1/10 c.c.
63	26 May	8,400	Absent.
64	26 May	225,000	Present in 1/100 c.c.
65	26 May	1,481,000	Present in 1/100 c.c.
66	26 May	15,200	Present in 1/10 c.c.
67	26 May	676,000	Present in 1/10 c.c.
68	26 May	8,320	Absent.
69	26 May	90,800	Present in 1/100 c.c.
70	26 May	80,700	Present in 1/10 c.c.
71	26 May	3,870	Absent.
72	15 Aug.	129,000	Present in 1/100 c.c.
73	15 Aug.	5,180	Present in 1/10 c.c.
74	15 Aug.	223,000	Present in 1/100 c.c.
75	2 Sept.	7,970	Present in 1/10 c.c.
76	2 Sept.	257,000	Present in 1/100 c.c.
77	2 Sept.	53,700	Present in 1/100 c.c.
80	28 Sept.	54,900	Absent.
81	28 Sept.	384,000	Present in 1/100 c.c.
82	28 Sept.	49,600	Present in 1/100 c.c.
83	4 Nov.	173,600	Present in 1/100 c.c.
84	4 Nov.	401,200	Present in 1/100 c.c.
85	4 Nov.	13,850	Present in 1/10 c.c.
86	15 Nov.	6,800	Present in 1/10 c.c.
88	15 Nov.	80,500	Present in 1/10 c.c.
89	15 Nov.	34,400	Present in 1/10 c.c.
90	25 Nov.	67,500	Present in 1/100 c.c.
94	2 Dec.	23,900	Present in 1/10 c.c.
95	2 Dec.	31,800	Present in 1/10 c.c.
96	2 Dec.	73,000	Present in 1/100 c.c.
97	2 Dec.	1,760	Absent.

For purposes of comparison it may be noted that the bacteriological standard required in the Milk (Special Designations) Order for Certified Milks which is the highest grade of designated milks is as follows:—

On a sample being taken at any time before delivery to the consumer the milk shall be found to contain—

- (a) not more than 30,000 bacteria per cubic centimetre, and
- (b) no coliform bacillus in one-tenth of a cubic centimetre.

These samples were taken with the object of raising the standard of bacteriological purity of the milk sold in the Borough. It will be seen that they were taken in batches. When the reports upon each batch of milks were received, a list was sent to the vendors giving the particulars of the analyses of the milks in that batch, but omitting the names. The report relating to the milk of the vendor to whom each list was sent, was marked so that he might be able to compare his milk with that of other milks sold at the same time. An appropriate covering letter was also sent indicating the principles and emphasizing the importance of clean milk production.

PRESERVATIVES IN FOOD REGULATIONS.

Of the 34 samples of sausages taken, 6 informal samples were certified to contain sulphur dioxide ranging from 40 to 220 parts per million.

Formal samples were taken from the same sources, and in 3 cases were certified to contain 30, 240 and 250 parts per million of sulphur dioxide respectively. Legal proceedings were instituted in each case and fines and costs amounting to £4 2s. 0d. were imposed.

Of the 7 samples of minced beef taken, 1 informal sample was certified to contain sulphur dioxide 25 parts per million. A formal sample taken from the same source was certified to be genuine.

Of the 4 Sweets taken, one, acid tablets, was certified to contain 150 parts of sulphur dioxide per million parts.

No action was taken regarding this sample, for the reason that no standard of permissible preservative in boiled sweets is given in the schedule to these regulations. The matter was reported to the Health Committee and on their instructions a letter was sent to the Minister of Health requesting his favourable consideration to a proposal to amplify the schedule in this respect.

CONDENSED MILK REGULATIONS.

Fifteen 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 CREAM REGULATIONS, 1912.

None of the 617 samples of milk submitted for analysis were reported to contain any preservative.

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

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. Fifteen warning letters were sent in respect of minor infringements. These proved effective and no further action was necessary.

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 370 observations were made by the Special Inspectors, and in 1 instance intimation notice was served on the offender. This was effective, and there was no necessity for further action on the part of the Sanitary Authority.

RAG FLOCK ACTS, 1911 AND 1928.

Under the above Act 28 samples were taken for analysis.

Two of the samples did not comply with the standard laid down.

In one case where the amount of Soluble Chlorine was 112 parts in excess of the legal maximum allowed, proceedings were instituted and defendants were ordered to pay £5 5s. 0d. costs.

In the other case the amount of Soluble Chlorine was 94 parts in excess of the legal maximum allowed. Proceedings were instituted and defendant was ordered to pay £3 3s. 0d. costs.

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 1931 was 1,637. The number added to the register during the year under consideration was 63, the number removed was 57, and the number on the register at the end of 1932 was 1,643.

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

REGISTERED WORKSHOPS—1932.

Workshops on the Register (s. 131) at the end of the year. (1)	Number. (2)
(1) Furniture, woodwork, fitting and other branches of the furniture trades.	1,093
(a) Cabinet making ... 591	
(b) French polishing ... 198	
(c) Upholstery ... 118	
(d) Other workers ... 186	
(2) Dress ...	170
(a) Tailoring ... 72	
(b) Mantles ... 13	
(c) Dress ... 11	
(d) Millinery ... 7	
(e) Shirt making ...	—
(f) Boot and shoe trades ...	25
(g) Artificial flowers ...	4
(h) Other workers ...	38
(3) Skin, leather, hair and feather trades ...	75
(a) Furriers ... 22	
(b) Saddlery and Harness ... 9	
(c) Feathers ...	2
(d) Other workers ...	42
(4) Paper, printing, book, stationery and fancy goods trades ...	60
(a) Box and bag makers ... 25	
(b) Other workers ...	35
(5) Laundry and washing ...	4
(6) Food ...	11
(7) Metals, machines, implements and conveyances ...	91
(8) Precious metals, jewels, &c. ...	1
(9) Other trades than those mentioned above ...	138
Total number of workshops on Register ...	1,643

NOTE.—A separate register is kept for bakehouses, the number of which in use at the end of the year was 51, including 36 factory bakehouses..

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)	375	67	...
Workshops (Including Workshop Laundries)	1,366	170	1
Workplaces (Cookshops, Fried Fish Shops and Ice Cream Shops) ... (Excluding Outworkers' premises dealt with in Table III.)	859	66	...
Totals	2,600	303	1

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	99	99	...	...
Want of ventilation ... ..	...	...	...	...
Overcrowding ... ..	...	...	...	...
Want of drainage of floors ... ..	...	...	...	...
Other nuisances	196	196	...	...
Sanitary ac- commodation {	insufficient	4	4	...
	unsuitable or defec- tive	124	124	...
	not separate for sexes	3	3	...
<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 X).	...	...	...	...
Totals	426	426	...	...

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).	2
Action taken in matters referred by H.M. Inspector as remedial under the Public Health Acts, but not under the Factory and Workshops Act (s. 5).	40 (referring to 13 factories and 27 workshops.)
Notified by H.M. Inspector ...	
Other	2
Underground Bakehouses (s. 101) :—	
Certificates granted during the year	Nil.
In use at the end of the year	31

During the year 170 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	35	Urinals cleansed, etc.	1
Premises cleansed partially	48	Soil and vent pipes dealt with	1
Number of rooms cleansed	135	Water-closets newly constructed	11
Walls, floors, sashes, etc., repaired	39	Water-closets repaired, etc.	79
Light and ventilation improved	Nil	Water-closets obstructions removed	10
Roofs, guttering, etc., repaired	41	Sinks, etc., cleansed and repaired	4
Overcrowding abated	Nil	Sink taps provided	1
Water reinstated or improved	Nil	Sculleries, yards, etc., paving repaired	7
Drains newly constructed	3	Sculleries, yards, etc., cleansed or limewashed	38
Drains reconstructed	8	Dust receptacles provided	1
Drains repaired, etc.	10	Foul accumulations removed	16
Drains obstructions removed	9		

The number of factories under observation for insanitary conditions during the year was 67, and in connection with these some 67 sanitary notices were served. The work carried out to comply with these notices included the cleansing and repairing of water-closets in 29 instances, the removal of obstructions from drains and water-closets in 4 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, 41 in the first and 39 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 910 out-workers, of whom 463 were not residents in Shoreditch. The addresses of those non-resident were forwarded to the sanitary authorities of the districts to which they belonged.

NATURE OF WORK. (1)	OUTWORKERS' LISTS, SECTION 107.									Outwork in unwholesome premises. Section 108.			Out work in infected premises. Sections 109 and 110.		
	Lists received from Employers.						Notices served on Occupiers as to keeping or sending Lists. (8)	Prosecutions.		In-stances. (11)	Notices served (12)	Prosecu-tions. (13)	In-stances. (14)	Orders made (S. 109) (15)	Prosecu-tions. (S. 109, 110.) (16)
	Twice in the Year.			Once in the Year.				Failing to keep or permit inspection of Lists. (9)	Failing to send Lists. (10)						
	Lists. (2)	Outworkers.		Lists. (5)	Outworkers.										
		Con-tractors (3)	Work-men. (4)		Con-tractors (6)	Work-men. (7)									
Wearing apparel:—															
(1) Making, &c. ...	50	75	542	3	...	27	...	...	...	...	...	...	3	...	...
(2) Cleaning and washing ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Furniture and upholstery ...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...
Artificial flowers ...	2	...	17	...	...	...	...	...	...	...	...	...	1	...	...
Fur pulling ...	2	19	...	...	...	...	...	...	...	...	...	...	...	...	...
Umbrellas ...	...	...	...	...	...	...	...	...	...	...	...	...	6	...	...
Paper bags and boxes ...	18	...	199	3	...	7	...	...	...	...	...	...	...	...	...
Brush making ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Xmas Crackers ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Leather Goods ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Carding of Buttons ...	2	...	22	...	...	...	...	...	...	...	...	...	...	...	...
TOTALS ...	74	94	782	6	...	34	...	...	...	...	...	...	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, feather sorting, cleaning and washing, furniture and upholstery, umbrellas, brush making, Xmas crackers and leather goods.

(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.

(c) See page 75 of this report with regard to infectious disease in the houses of outworkers.

Communications were received from various sanitary authorities relating to some 1,157 outworkers for firms outside Shoreditch and as 5 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 1932.

SHOWING THE NUMBERS OF OUTWORKERS RECEIVED FROM OTHER DISTRICTS DURING 1932.																									
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.		Racquets or Tennis Balls.		TOTALS.
	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.	Feb.	Aug.			
Bethnal Green ...	30	21	24	19	...	...	...	...	...	...	...	...	...	...	13	10	9	9	...	...	...	...	...	...	135
Camberwell ...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
City of London ...	178	158	2	2	4	6	...	...	1	2	...	...	22	21	...	...	...	...	8	2	...	...	...	...	406
Finsbury ...	55	59	9	13	6	14	2	1	2	...	...	...	6	3	25	27	...	...	6	1	7	6	2	...	244
Fulham ...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Hackney ...	58	60	14	2	6	4	4	7	...	...	...	...	...	...	9	23	3	2	...	...	...	...	...	...	192
Hammersmith ...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Hampstead ...	1	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5
Holborn ...	5	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	10
Hornsey ...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Islington ..	12	9	4	...	5	...	1	...	...	...	...	...	...	...	7	8	...	...	...	...	...	...	...	...	46
Kensington ...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Leyton ...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	6
Poplar ...	3	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
St. Marylebone ...	7	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	12
St. Pancras ...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Southwark ...	4	4	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	10
Stepney ...	11	15	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	26
Stoke Newington...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	18	...	...	...	...	...	...	...	...	18
West Ham ...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	3
Westminster ...	13	14	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	27
TOTALS ...	386	163	53	36	21	24	8	8	3	2	...	...	28	24	56	87	12	11	14	3	7	6	2	...	1,152
	747		89		45		16		5		...		52		143		23		17		13		2		

The total number of out-workers reported was 2,067, and of these some 1,599 were residents in Shoreditch. These figures, which are below the average for the past five years, are slightly higher than those for last year.

As pointed out in previous reports, in numerous instances names and addresses of out-workers are duplicated owing to lists being sent in twice a year, and in some cases the same out-workers are employed by more than one firm, so that the numbers given above must not be taken as representing the actual numbers of individual out-workers. The tables on pages 73 and 74 show the distribution of out-workers 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 656 visits of inspection were made to places where home-work was being carried on, and in connection with these 84 sanitary notices were served. The cases of notifiable infectious disease occurring at out-workers' premises numbered 11 and included 6 scarlet fever, 4 diphtheria, and 1 pneumonia. 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.	
Mar. 31	Non-compliance with terms of Statutory Notice in respect of No. 37 Westmoreland Place.	—	—	—	2	2	0	Notice complied with.
Apr. 8	Non-compliance with terms of Statutory Notice in respect of No. 56 Cropley St.	—	—	—	2	2	0	Notice complied with.
Apr. 29	Non-compliance with terms of Closing Order in respect of No. 20 Whiston Street	5	0	0	—	—	—	

Date	Nature of Offence	Fine			Costs			Remarks
		£	s.	d.	£	s.	d.	
Apr. 29	Non-compliance with terms of Closing Order in respect of No. 20 Whiston Street	4	0	0	—			
May 13	Non-compliance with terms of Statutory Notice in respect of No. 37 Westmoreland Place.	—			2	2	0	Notice complied with.
June 3	Non-compliance with terms of Statutory Notice in respect of No. 55 Brunswick Street.	—			2	2	0	Notice complied with.
June 3	Non-compliance with terms of Statutory Notice in respect of No. 55 Brunswick Street (workshop).	—			1	3	0	Notice complied with.
June 17	Non-compliance with terms of Statutory Notice in respect of No. 58 Grange St.	—			2	2	0	Notice complied with.
July 29	Non-compliance with terms of Statutory Notice in respect of No. 109a Bridport Place.	—			1	3	0	Notice complied with.
Aug. 12	Fixing a W.C. pan at No. 69 Bridport Place without giving notice in writing to the Sanitary Authority.	1	0	0	1	3	0	
Aug. 12	Fixing a W.C. pan and trap at No. 91 Bridport Place without giving notice in writing to the Sanitary Authority.	10	0		1	3	0	
Aug. 12	Fixing a W.C. pan at No. 123 Bridport Place without giving notice in writing to the Sanitary Authority.	1	0	0	1	3	0	
Nov. 4	Non-compliance with terms of Statutory Notice in respect of No. 32 Grange St.	—			1	3	0	Notice complied with.
Nov. 18	Fixing a W.C. pan at No. 48 Newton Street without giving notice in writing to the Sanitary Authority.	10	0		1	1	0	
Dec. 2	Non-compliance with terms of Statutory Notice in respect of No. 5 Bristow St.	—			1	11	6	Notice complied with.
Dec. 2	Non-compliance with terms of Statutory Notice in respect of No. 7 Bristow St.	—			1	11	6	Notice complied with.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1927.

Milk and Dairies Order, 1926.

Date	Nature of Offence	Fine			Costs			Remarks
		£	s.	d.	£	s.	d.	
Feb. 19	Selling whiskey not of the nature, substance and quality demanded by the purchaser.	—	—	—	3	3	0	
Feb. 26	Selling gin not of the nature, substance and quality demanded by the purchaser.	—	—	—	2	2	0	
Feb. 26	Selling whiskey not of the nature, substance and quality demanded by the purchaser.	—	—	—	2	2	0	
Mar. 31	Being a person delivering milk in bottles, failed to cause milk bottle to be filled and closed on registered premises.	10	0	0	1	1	0	
Apr. 1	Selling milk not of the nature, substance and quality demanded by the purchaser.	—	—	—	2	2	0	
Apr. 1	Selling milk not of the nature, substance and quality demanded by the purchaser.	—	—	—	3	3	0	
Apr. 29	Selling milk not of the nature, substance and quality demanded by the purchaser.	1	0	0	2	2	0	
May 11	Selling milk not of the nature, substance and quality demanded by the purchaser.	—	—	—	2	2	0	
May 27	Selling milk not of the nature, substance and quality demanded by the purchaser.	—	—	—	2	2	0	
June 3	Unlawfully and wilfully obstructing or impeding the Officer in the execution of his duties under the Food and Drugs (Adulteration) Act, 1928.	—	—	—	2	2	0	
June 3	Neglecting to cause beef sausages which contained a preservative to be labelled at time of delivery to purchaser.	—	—	—	10	0	0	

Date	Nature of Offence	Fine			Costs			Remarks
		£	s.	d.	£	s.	d.	
June 3	Neglecting to cause pork sausages which contained a preservative to be labelled at time of delivery to purchaser.	—	—	—	10	0	0	
July 15	Selling milk not of the nature, substance and quality demanded by the purchaser.	—	—	—	2	2	0	
July 22	Selling milk not of the nature, substance and quality demanded by the purchaser.	—	—	—	2	2	0	
Aug. 12	Neglecting to cause pork sausages which contained a preservative to be labelled at time of delivery to purchaser.	1	0	0	2	2	0	
Aug. 19	Selling milk not of the nature, substance and quality demanded by the purchaser.	—	—	—	2	2	0	
Oct. 7	Selling milk not of the nature, substance and quality demanded by the purchaser.	1	0	0	1	1	0	
Oct. 21	Selling milk not of the nature, substance and quality demanded by the purchaser.	—	—	—	2	2	0	

RAG FLOCK ACTS, 1911 AND 1928.

Date	Nature of Offence	Fine			Costs			Remarks
		£	s.	d.	£	s.	d.	
June 13	Being in possession of Rag Flock to be used for the purpose of making articles of upholstery which did not conform to prescribed standard of cleanliness.	—	—	—	5	5	0	
Dec. 16	Being in possession of Rag Flock to be used for the purpose of making articles of upholstery which did not conform to prescribed standard of cleanliness.	—	—	—	3	3	0	

V.—TUBERCULOSIS.

Particulars regarding the Public Health (Tuberculosis) Regulations, 1930, are supplied to the Ministry of Health in the following form :—

FORM T.137, 1932.

Part I.—Summary of Notifications during the period from the 3rd January, 1932, to the 31st December, 1932 :—

Age periods	FORMAL NOTIFICATIONS.												Total Notifications
	Number of Primary Notifications of new cases of Tuberculosis.												
	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)	
Pulmonary Males	...	1	2	1	7	11	22	8	15	7	2	76	122
„ Females	...	...	1	2	14	11	9	5	2	1	1	46	65
Non-pulmonary Males	1	4	4	2	2	...	...	...	...	1	...	14	17
„ Females	...	...	7	1	1	1	...	...	2	...	...	12	15
Col. (1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)

SUPPLEMENTAL RETURN.

Part II.—New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by formal notification :—

Age 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 upwards.	Total (all ages).
Pulmonary Males	1	...	2	...	1	...	3	2	2	1	2	14
„ Females	...	...	...	...	1	2	4	4	2	...	...	13
Non-pulmonary Males	...	3	2	...	2	...	1	...	...	...	...	8
„ Females	1	3	2	...	2	...	1	...	...	...	...	9

Total 44

SOURCE OF INFORMATION AS TO THE ABOVE-MENTIONED CASES.	No. of Cases	
	Pulmonary	Non-Pulmonary
Death Returns { from local Registrars	2	5
transferable deaths from Registrar General	6	5
Posthumous notifications	1	2
“Transfers” from other areas (other than transferable deaths)	18	5
Other Sources if any (specify) ... ..	...	...

27

17

= 44

Part III :—

NOTIFICATION REGISTER.

Number of cases of Tuberculosis remaining on the Register at the 31st December, 1932	Pulmonary			Non-Pulmonary			Total Cases
	Males	Females	Total	Males	Females	Total	
	676	581	1257	239	199	438	1695
Number of cases removed from the Register during the year by reason <i>inter alia</i> of :—							
1. Withdrawal of notification ...	60	59	119	21	7	28	147
2. Recovery from the disease ...	13	18	31	10	3	13	44
3. Death	59	31	90	9	11	20	110
4. Totals	132	108	240	40	21	61	301

NOTES.

PART I.

(a) *Formal notifications* are notifications which are made in pursuance of Article 5 of the Public Health (Tuberculosis) Regulations, 1930, or by Naval, Military or Air Force Medical Authorities in pursuance of Section 5 (b) of the Local Government (Emergency Provisions) Act, 1916.

(b) *Primary Notifications* for the purpose of columns (2)-(13) relate to patients who have never previously been formally notified in the area to which the Return relates.

A patient who changes his residence from one Sanitary District to another in the same County may properly be the subject of Primary Notification in each such District. Only the first of such notifications, however, are recorded in columns (2)-(13) of the Return for the *County* concerned, the subsequent notification(s) being included in column (14).

(c) *Column (14)*. All *formal notifications*, whether duplicate or not, are included in this column.

General.—Patients notified as suffering from combined pulmonary and non-pulmonary tuberculosis are included among the “pulmonary” returns only. If a patient already notified as suffering from one form of tuberculosis is subsequently notified to the Medical Officer of Health of the same Sanitary District as suffering from another form of tuberculosis, the fact is noted in the Notification Register, but such notification is recorded as a duplicate notification.

PART II.

(a) New cases of tuberculosis first coming to knowledge otherwise than by formal notification may in some instances afterwards be formally notified under the Regulations. Should such formal notification be received *within the same year* as that in which the case first came to the knowledge of the Medical Officer of Health.

it is recorded as a "Primary Notification" and excluded from the Supplemental Return. If the formal notification is received in a *subsequent year*, such notification is regarded as duplicate, as the case has already been included in the Supplemental Return for a previous year.

(b) A formal notification which is not received until after the death of the patient is included in the Supplemental Return as a "posthumous notification."

(c) No case is included both in the Summary of Notifications and in the Supplemental Return for the same year.

The distribution of the cases notified (primary notification) among the different Wards was as follows:—

Ward.	Pulmonary.	Non-Pulmonary.	Total.	No. per 1,000 inhabitants.
Moorfields ...	7	2	9	2.3
Church ...	25	7	32	2.0
Hoxton ...	9	3	12	0.8
Wenlock ...	27	8	35	2.3
Whitmore ...	19	1	20	1.4
Kingsland ...	8	2	10	1.1
Haggerston ...	12	3	14	1.8
Acton ...	15	...	15	1.4
Totals ...	122	26	148	1.6

In addition to the notifications summarized on Form T, 137, 1932 on page 79, notifications are received respecting patients admitted to, and discharged from Institutions, the majority of which are now under the control of the London County Council.

These notifications are summarized below:—

	Number of Notifications on Form I (of admission of case to Institution).		Number of Notifications on Form II (of discharge of case from Institution).	
	Poor Law Institutions.	Sanatoria.	Poor Law Institutions.	Sanatoria.
Pulmonary Males ...	37	104	14	72
Pulmonary Females ...	16	71	16	47
Non-Pulmonary Males ..	3	19	1	12
Non-Pulmonary Females	4	22	1	12
TOTALS ...	60	216	32	143

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.
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
1931	200	1·7	0·4	2·1
1932	148	1·3	0·3	1·6

Particulars of new cases of tuberculosis and of all deaths from the disease in Shoreditch during 1932 are given in the following table :—

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0- ...	1	...	1	1	...	...	1	1
1- ...	1	...	7	3	...	...	2	3
5- ...	4	1	6	9	2	...	1	2
10- ...	1	2	2	1	1	1	...	...
15- ...	8	15	4	3	3	5	2	2
20- ...	11	13	...	1	6	5	...	...
25- ...	25	13	1	1	10	9	1	2
35- ...	10	9	...	...	7	3	...	...
45- ...	17	4	...	2	12	4	...	...
55- ...	8	1	1	...	6	2	...	...
65 and upwards	4	1	...	...	3	...	...	...
Totals ...	90	59	22	21	50	29	7	10

The ratio of non-notified tuberculosis deaths to total tuberculosis deaths for the year 1932 was 1 to 5.6.

No case came to notice in which it was necessary to advise that an individual suffering from tuberculosis should be required to discontinue his employment in the milk trade as provided for in the Public Health (Prevention of Tuberculosis) Regulations, 1925.

The interval elapsing between notification and death is an indication of the efficiency of notification. In the following table the deaths from tuberculosis are classified according to this interval :—

	Male		Female		Total
	Pul-monary	Non-Pul-monary	Pul-monary	Non-Pul-monary	
1. No. of cases only notified at death	1	1	...	1	3
2. No. of cases notified within a month of death	4	1	1	1	7
3. No. of cases notified within 3 months of death	5	...	1	...	6
4. No. of cases notified within 6 months of death	4	...	3	...	7
5. No. of cases notified over 6 months from date of death ..	30	1	22	2	55
6. No. of deaths from tuberculosis of cases not notified under Tuberculosis Regultns.	6	4	2	6	18
7. No. of tuberculous cases dying from disease other than tuberculosis	9	2	2	1	14
	59	9	31	11	110

THE DEATHS FROM TUBERCULOSIS NUMBERING 101, ARE CLASSIFIED AS TO SITE OF DISEASE AND WARD IN THE FOLLOWING TABLE :—

DEATHS FROM TUBERCULOSIS IN

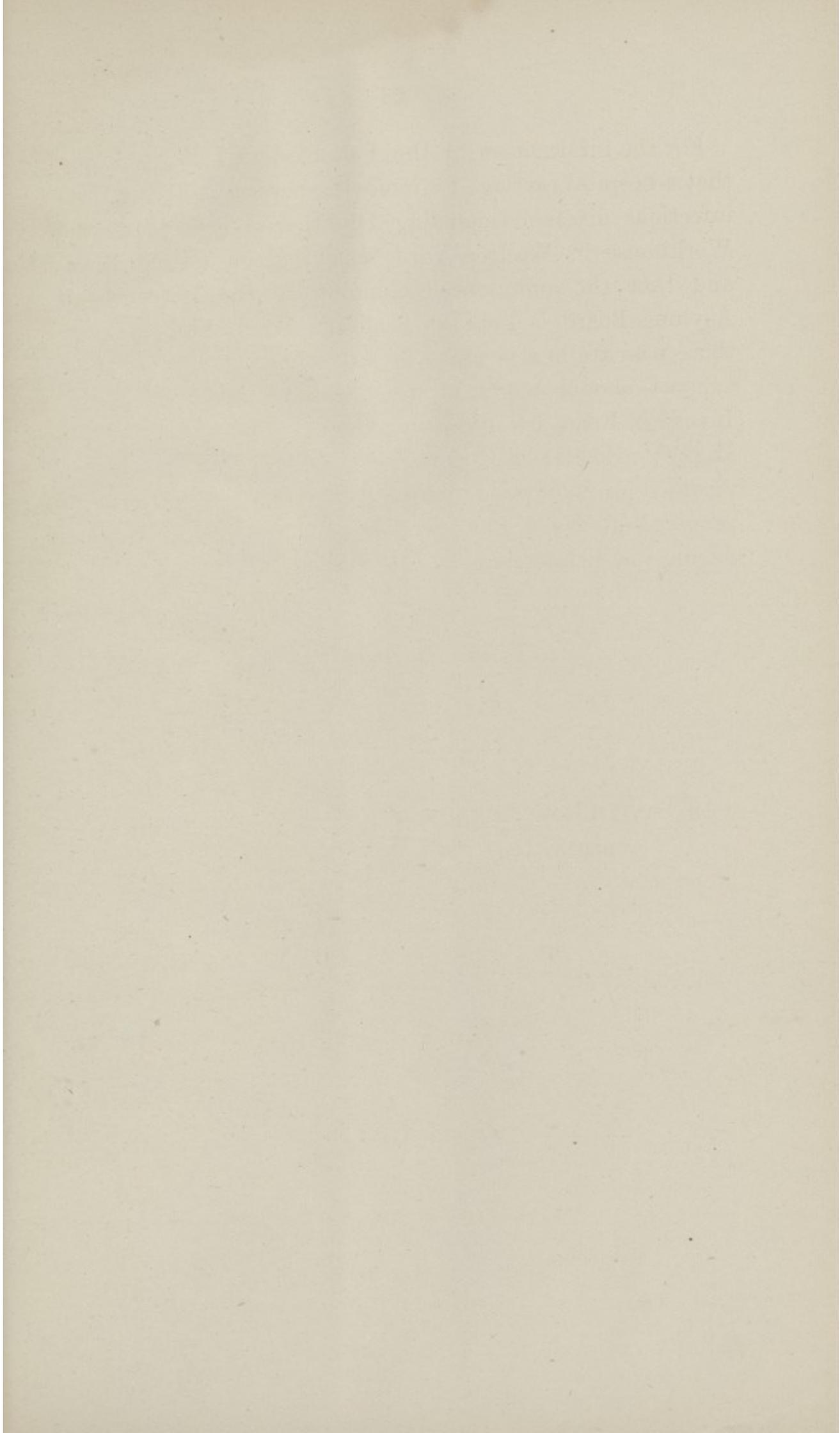
AS TO SITE OF DISEASE AND WARD IN THE FOLLOWING TABLE :—

THE BOROUGH DURING 1932.

	AGES.											DEATHS IN EACH WARD.								SEX.		TOTAL.	DEATHS.						
	Under 1 year.	1 to 2 years.	2 to 5 years.	5 to 10 years.	10 to 15 years.	15 to 20 years.	20 to 25 years.	25 to 35 years.	35 to 45 years.	45 to 55 years.	55 to 65 years.	65 to 75 years.	75 and upwards.	Moorfields.	Church.	Hoxton.	Wenlock.	Whitmore.	Kingsland.	Haggerston.	Acton.		Male.	Female.	Not in Institutions.	St. Leonard's Hospital.	Other Institutions		
All forms	2	2	3	5	2	11	13	22	11	17	9	4	6	17	15	19	12	7	17	8	61	40	101	26	35	9	4	6	
Respiratory system ...	1	...	...	2	2	9	13	20	11	17	9	4	5	16	12	16	10	6	16	7	54	34	88	25	31	9	3	6	
Central nervous system ...	1	...	2	3	...	...	...	1	...	...	...	...	1	1	1	1	2	1	...	...	4	3	7	...	3	...	...	...
Intestines and peritum	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	...	...	...	...	...
Vertebral column
Other bones and joints
Skin and subcutaneous tissue
Lymphatic system (abdominal glands excepted)
Genito-urinary system
Other organs—
Adrenals
Other sites
Disseminated Tuberculosis—
Acute	2	1	...	...	1	...	...	...	...	...	...	...	...	2	1	...	...	1	...	2	2	4	...	...	...	1	...	
Chronic
Not distinguished as acute or chronic	1	...	...	...	...	...	...	...	1	...	...	...	...	...	1	1	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.
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
1931	1·08	1·02
1932	1·05	0·89



TUBERCULOSIS DISPENSARY,

145, Great Cambridge Street, E.2.

(Tel. Bishopsgate 3480).

This report is the first to record a complete year's work of the Dispensary at its new quarters.

Patients can attend at the Dispensary on the following days and times :—

Monday, Tuesday, Wednesday, Thursday, Friday, 2 to 3.30 p.m.

Tuesday 4.30 to 6 p.m. For School Children ONLY.

To those at Work.

Patients suffering from Tuberculosis, and those who are living with, or have been in contact with, persons suffering from Tuberculosis can attend :—
Monday 6.30 to 8 p.m.

NON-PULMONARY TUBERCULOSIS

Supplementary Annual Report showing, in tabular form, the condition at the end of 1933 of all persons remaining on the Tubercular Register and the reasons for the removal of all non-patients of the Register.

Condition at the time of the last medical visit during the year or since the person refers	Previous to 1926				1926	1927	1928	1929	1930	1931	1932	1933
	Adults and Children	Adults	Other Organs	Peripheral Glands								
Discharge	4	1	1	1	1	1	1	1	1	1	1	1
Deaths	1	1	1	1	1	1	1	1	1	1	1	1
Discharge on parole	1	1	1	1	1	1	1	1	1	1	1	1
Condition not reported during the year	1	1	1	1	1	1	1	1	1	1	1	1
Total on Tubercular Register at last December	10	2	2	2	2	2	2	2	2	2	2	2
Treatment by pulmonary	1	1	1	1	1	1	1	1	1	1	1	1
Discharge on parole	1	1	1	1	1	1	1	1	1	1	1	1
Deaths	1	1	1	1	1	1	1	1	1	1	1	1
Discharge on parole	1	1	1	1	1	1	1	1	1	1	1	1
Condition not reported during the year	1	1	1	1	1	1	1	1	1	1	1	1
Total on Tubercular Register at last December	10	2	2	2	2	2	2	2	2	2	2	2
Treatment by pulmonary	1	1	1	1	1	1	1	1	1	1	1	1
Discharge on parole	1	1	1	1	1	1	1	1	1	1	1	1
Deaths	1	1	1	1	1	1	1	1	1	1	1	1
Discharge on parole	1	1	1	1	1	1	1	1	1	1	1	1
Condition not reported during the year	1	1	1	1	1	1	1	1	1	1	1	1
Total on Tubercular Register at last December	10	2	2	2	2	2	2	2	2	2	2	2
Treatment by pulmonary	1	1	1	1	1	1	1	1	1	1	1	1
Discharge on parole	1	1	1	1	1	1	1	1	1	1	1	1
Deaths	1	1	1	1	1	1	1	1	1	1	1	1
Discharge on parole	1	1	1	1	1	1	1	1	1	1	1	1
Condition not reported during the year	1	1	1	1	1	1	1	1	1	1	1	1
Total on Tubercular Register at last December	10	2	2	2	2	2	2	2	2	2	2	2
Treatment by pulmonary	1	1	1	1	1	1	1	1	1	1	1	1
Discharge on parole	1	1	1	1	1	1	1	1	1	1	1	1
Deaths	1	1	1	1	1	1	1	1	1	1	1	1
Discharge on parole	1	1	1	1	1	1	1	1	1	1	1	1
Condition not reported during the year	1	1	1	1	1	1	1	1	1	1	1	1
Total on Tubercular Register at last December	10	2	2	2	2	2	2	2	2	2	2	2

* The corresponding table in last year's report (pp. 226, 227) in the section referring to members of the Register gave only the numbers removed during that year.
The above table for 1933 shows the totals removed from the Register for each class of member during 1933 and previous years.

TUBERCULOSIS SCHEME OF THE SHOREDITCH METROPOLITAN BOROUGH COUNCIL.
Return showing the work of the Dispensary during the year 1932. Memo. 37/T (Revised).

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.				GRAND TOTAL.	
	Adults.		Children.		Adults.		Children.		Adults.		Children.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A.—NEW CASES examined during the year (excluding contacts) :—														
(a) Definitely tuberculous ...	45	31	2	2	1	3	6	7	46	34	8	9	97	
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	2	7	5	9	23	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	128	126	64	64	382	
B.—CONTACTS examined during the year :—														
(a) Definitely tuberculous ...	2	2	—	—	—	—	—	—	2	2	—	—	4	
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	1	—	2	1	4	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	42	72	50	50	214	
C.—CASES written off the Dispensary Register as :—														
(a) Recovered ...	12	16	1	1	6	1	5	2	18	17	6	3	44	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous) ...	—	—	—	—	—	—	—	—	178	215	126	130	649	
D.—NUMBER OF CASES on Dispensary Register on December 31st :—														
(a) Definitely tuberculous ...	262	197	30	21	33	39	50	39	295	236	80	60	671	
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	3	7	7	10	27	
1. Number of cases on Dispensary Register on January 1st ...	723				2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years ...				90					
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" ...	67				4. Cases written off during the year as Dead (all causes) ...				79					
5. Number of attendances at the Dispensary (including Contacts) ...	3861				6. Number of Insured Persons under Domiciliary Treatment on the 31st December ...				297					
7. Number of consultations with medical practitioners :— (a) Personal ... (b) Other ...	5 210				8. Number of visits by Tuberculosis Officers to homes (including personal consultations) ...				171 including 15 visits to St. Leonard's Hospital					
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes ...	2849				10. Number of :— (a) Specimens of sputum, etc., examined (b) X-ray examinations made in connexion with Dispensary work				1192 including 41 specimens of Urine 125					
11. Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above ...	1				12. Number of "T.B. plus" cases on Dispensary Register on December 31st ...				293					

12. remaining undiagnosed on 31st Dec. [see Memo. 37/T (Revised), p. 10, Sec. II, Note 4].

NOTE UPON CLASSIFICATION OF PATIENTS SUFFERING FROM TUBERCULOSIS.

Memo 37/T (Revised).

For the purpose of the Annual Returns required under this Memorandum, and of the case records necessary to enable these returns to be completed, the following system of classification of cases and of recording results should be used :—

I.—All patients should be grouped according to their sex and age; patients under 15 years of age should be classed as children, and those of 15 years and upwards as adults.

II.—Patients should then be classified according to the organs or parts affected as follows :—

(1) Pulmonary tuberculosis (including tuberculosis of the pleura or intrathoracic glands).

(2) Non-pulmonary tuberculosis.

Patients suffering from both pulmonary and non-pulmonary tuberculosis should be classified as pulmonary cases.

III.—Patients suffering from pulmonary tuberculosis should be divided into—

Class T.B. minus, viz., cases in which tubercle bacilli have never been demonstrated in the sputum, pleural fluid, faeces, etc., and

Class T.B. plus, viz., cases in which tubercle bacilli have at any time been found. It should be noted that a patient originally in Class T.B. minus must be transferred to Class T.B. plus at any stage in the course of treatment if and when tubercle bacilli are found, while on the other hand a patient who is once placed in Class T.B. plus can never be included in Class T.B. minus. Class T.B. plus should be further subdivided into three groups as follows :—

Group 1.—Cases with slight constitutional disturbance, if any; *e.g.*, there should not be marked acceleration of pulse nor elevation of temperature except of very transient duration; gastro-intestinal disturbance or emaciation, if present, should not be excessive.

The obvious physical signs should be of very limited extent as follows: Either present in one lobe only and, in the case of an apical lesion of one upper lobe, not extending below the second rib in front or not exceeding an equivalent area in any one lobe; or where these physical signs are present in more than one lobe, they should be limited to the apices of the upper lobes, and should not extend below the clavicle and the spine of the scapula.

No complication (tuberculous or other) of prognostic gravity should be present. A small area of dry pleurisy should not exclude a case from this group.

Group 3.—Cases with profound systemic disturbance or constitutional deterioration, with marked impairment of function, either local or general, and with little or no prospect of recovery.

All cases with grave complications (*e.g.*, diabetes, tuberculosis of intestine, etc.), whether those complications are tuberculous or not, should be classified in this group.

Group 2.—All cases which cannot be placed in Groups 1 and 3.

IV.—Patients suffering from non-pulmonary tuberculosis should be classified according to the site of the lesion as follows :—

- (1) Tuberculosis of bones and joints.
- (2) Abdominal tuberculosis (*i.e.* tuberculosis of peritoneum, intestines or mesenteric glands).
- (3) Tuberculosis of other organs.
- (4) Tuberculosis of peripheral glands.

Patients suffering from multiple lesions should be classified in one subgroup only, viz., in that applicable to the case which stands highest in the immediately preceding list.

An important report on Tuberculosis by Dr. A. S. Macnalty of the Ministry of Health (No. 64) was issued by the Ministry of Health for official use in the early part of the year.

This report deals in a comprehensive manner with the problem of Tuberculosis. Certain aspects of this problem do not directly concern the work for which a Borough Council is responsible, but the following brief quotations are given as indicating conclusions affecting our work.

The normal principles of Sanatorium treatment are summarised as follows :—

- (1) The diagnosis of pulmonary tuberculosis at an early age.
- (2) A proper selection of patients for sanatorium treatment.
- (3) Full co-ordination between the tuberculosis officer and the medical superintendent of the sanatorium.
- (4) Correct co-ordination of hospital and sanatorium treatment.
- (5) Study of the individual patient by the medical superintendent of the sanatorium.
- (6) A proper sanatorium regime.
- (7) Prolonged duration of stay in the sanatorium.
- (8) The ideal to be aimed at is the discharge of the patient with the disease quiescent and in fit condition to resume an occupation.

Considerable space is given to the discussion of the examination of contacts. From the examination of statistics obtained from Worcestershire, the following conclusion is reached :—

“ It is apparent that the death rate from tuberculosis among the contacts is eight times the control rate, while the total tubercle incidence rate is over sixteen times the control rate. It should be borne in mind that this control rate is probably much too high.”

This conclusion, which is of general applicability, shows the great importance of the examination of contacts.

The report concludes with the following words:—“ This report has endeavoured to make plain the following truth.

“ It is only by co-ordinated progress along various paths and by surveying the complex problem as a whole that tuberculosis is likely to be combated successfully.”

A further report of interest to all those concerned with anti-tuberculosis work, entitled “ The Value of Tuberculin Tests in Man,” by Dr. P. D’Arcy Hart, was issued by the Medical Research Council (No. 164) during the year here under consideration. The matters dealt with in this report are for the most part of a technical character, but the following conclusions relating to tuberculosis in childhood are of general interest:—

“ It is suggested that steps should be taken to improve the present methods of preventing tuberculosis in children of tuberculous parents. The formation of further settlements of the Papworth type might possibly be considered, together with a voluntary system for the separation of infants from their parents before infection, as shown by a positive tuberculin reaction, has taken place. These infants should be placed in healthy families for a period of several years. If infection has already occurred, the advantage of separation is less certain.

Home conditions are an important factor in the fate of children living in tuberculous families, and their amelioration may compensate to a certain extent for the presence of an infective adult. Whether this result is due more to prevention or limitation of infection, than to an effect on its subsequent course in the body, is not yet clear.

“ Tuberculous infection in London children of the poorer classes appears at the present time to be acquired for the most part in later childhood and adolescence, *i.e.*, during a period when the principal activities of the individual are away from the home. Almost all are sensitive to tuberculin when adult life is reached.

“ Systematic tuberculin tests on children may throw light on a new clinical entity—a transient and benign illness accompanying tuberculous first infection. Owing to the unobtrusive and temporary nature of its symptoms, it is likely that the tuberculous origin of the illness usually escapes recognition. The detection of a positive skin reaction in a previously tuberculin-negative individual may assist in establishing the tuberculous nature of the symptoms.”

REPORT BY DR. C. K. CULLEN, TUBERCULOSIS OFFICER.

The facilities provided by the Tuberculosis Dispensary and the changes in procedure and organization consequent upon the opening of the new dispensary at Great Cambridge Street were fully described in last year's report.

A few comments on the Dispensary statistics may be of interest. There has been a heavy drop in the new attendances during the year 1932, but a third of this drop was accounted for by the figures for December alone when, possibly owing to the very mild weather in that month, only fourteen new cases attended for examination compared with fifty-five in the previous year. Co-incident with the drop in new attendances, there has been a marked decrease in the number of new notifications during the year. Unfortunately this does not necessarily indicate a steady decrease in the incidence of tuberculosis, as the figures for the first quarter of 1933 show an increase of 33 per cent. in the new notifications compared with the same quarter of 1932. There is another factor which may possibly be partly responsible for the apparent decline in 1932. During the year practitioners have shown an increasing tendency to refer suspicious cases to the Dispensary before notification. There are a number of chest conditions which closely simulate tuberculosis and the more detailed investigation which is possible at the Dispensary has excluded the disease in many cases which might otherwise have been notified. A lesser factor, but one which undoubtedly exists in these times of widespread unemployment, has been the fact frequently stated by patients that they are often reluctant to attend for fear of being advised to go away to sanatorium and possibly lose their employment. When, as is often the case, the patient is the only member of the family at work and the only alternative means of livelihood is through relief by the Public Assistance Committee, there is even greater reason for this reluctance. Every effort is made to meet this difficulty and whenever the patient is willing a letter is sent to the employer urging him to promise re-employment when the patient is fit to return to work without danger to himself or others. In many cases these letters have been effective.

Corresponding to the decrease in new cases investigated, there has been a heavy drop also in the total attendances. This again may be partly due to the fact that with a smaller number of patients sent up it has been possible to give more detailed attention to each patient and thus arrive at a definite diagnosis more quickly and with fewer visits to the Dispensary. In this connection, I would point out that there has been a much higher proportion of examinations. Greater use has also been made of X-ray facilities and the number of sputum tests has again shown a considerable rise.

In spite of the fewer attendances, it is generally agreed by the whole Dispensary staff that the work of the past year has been heavier. Increasing economic difficulties present problems which are almost insoluble under present conditions, but which involve a great deal of time and anxiety in the attempt to find some solution.

Arrangements were made early in the year by the London County Council for facilities to be given to the Tuberculosis Officer to visit the Tuberculosis wards at St. Leonard's Hospital. Fortnightly visits were commenced in May and have continued since. This arrangement has been of considerable value to the efficiency of the Dispensary work. Patients for whom hospital treatment was really necessary have been more easily persuaded to accept admission to a general hospital, it has been possible to watch their progress and in many cases to recommend their transfer to sanatoria, and in a few advanced or dying cases removal to special homes has been arranged. Since the visits were begun the Medical Officers of St. Leonard's Hospital have given their full co-operation.

Special facilities.

(a) X-ray. Pulmonary cases are sent to the Royal Chest Hospital and Dr. Kerley's reports have been of very great assistance. Non-pulmonary cases are usually under the care and supervision of a surgeon at a General Hospital, and in most cases any X-ray examination required is carried out at the Hospital concerned. When this is not the case, the patient is referred either to St. Leonard's Hospital or the Royal Northern Hospital for examination and report.

(b) Artificial pneumothorax treatment. Refills are usually carried out, by arrangement through the Dispensary, at one or other of the Chest Hospitals, most of them at the Royal Chest Hospital. During the past year arrangements have been made for refills to be carried out at Colindale or Grove Park Hospitals for patients who have received treatment at these hospitals. The cost is payable by the Borough Council.

(c) Finsen light treatment for cases of lupus is provided at the London Hospital and general artificial sunlight treatment either at the London Hospital or the Royal Chest Hospital.

(d) Ear, nose and throat cases are referred to Mr. Zamora at the Royal Chest Hospital for examination and advice.

(e) Diseases of the eye are rarely met with at the Dispensary, but such cases are referred to the Royal London Ophthalmic Hospital.

(f) Surgical cases requiring the opinion of a surgeon are referred to one of the general hospitals, such as the London, St. Bartholomew's, and the Metropolitan Hospital, or the Queen's Hospital for Children.

After-care in surgical cases is supervised by the surgeon originally recommending sanatorium treatment or by one of the London County Council after-care clinics.

(g) Convalescence for non-tuberculous but ailing children is usually arranged through the Invalid Children's Aid Association.

(h) Nursing of bed-ridden cases is arranged through the Queen Victoria Jubilee Institute of Nursing.

(i) General Social Care Work. Cases of social, economic or domestic difficulty are referred to the Tuberculosis Care Committee, whose report is appended.

(j) Residential treatment for tuberculosis is ordinarily provided by the London County Council. A few patients suffering from advanced and incurable disease who are unwilling to go into General Hospitals are sent through voluntary agencies to Homes for the Dying.

Further figures relating to the work of the Dispensary are given in the following tables :—

	1931.	1932.
Total attendances	4,531	3,861
Total examinations	1,759	1,729
Contacts examined	313	229
Sisters' visits	2,545	2,849
Tuberculosis Officer's visits ...	156	156

In addition to the above, fifteen fortnightly visits were made by the Tuberculosis Officer to St. Leonard's Hospital.

Comparative numbers of insured and non-insured attendances were :

Insured	2,030
Non-insured	1,831

3,861

Special sessions for school children: These are held weekly, and the following table shows the total for each month :—

	1931.	1932.		1931.	1932.
January	39	23	July	18	11
February	41	28	August	3	17
March	51	32	September	25	20
April	25	30	October	42	31
May	37	25	November	52	52
June	42	36	December	42	35

	1931	1932
Total attendances	417	340
Total examinations	170	159

Laboratory examinations made at the Dispensary during the year :—

Sputum	1,151 (1931: 960)
Urine	41 (1931: 21)
Pus from abscesses, etc. ...	0 (1931: 2)

The number of patients receiving extra nourishment from the Borough Council during the year was 70, of whom 20 were receiving it on December 31st, 1932.

The number of shelters (supplied on loan) in use during the year was 3.

The number of patients who had beds and/or bedding on loan was 15.

TUBERCULOSIS CARE COMMITTEE.

Report of the Committee for 1932.

During the year the Committee has continued its work in the Borough, the following Members forming the Committee:—

Miss Wragge (Maurice Hostel), Chairman, Mrs. Barnard (Local P.A.C.), Mrs. Bourdon, Miss Broomfield (I.C.A.A.), Mrs. Cox, Dr. Cullen (Tuberculosis Officer), Councillor Mrs. H. Girling, Sister Grange, and Sister Hiscoke (Tuberculosis Visitors), Councillor Mrs. M. J. Jarvis, Dr. Kelleher (St. Leonard's Hospital), Miss Lee (Shoreditch and Bethnal Green District Nursing Association), Dr. Lewis (Hoxton House), Alderman Mrs. C. R. Lusher-Pentney, Miss Murch (District Organizer of Children's Care Committee), Dr. Maitland Radford (Medical Officer of Health), Mr. F. Rockcliffe (London Insurance Committee), Mrs. Yeomans, Miss M. Sutton Sharpe (Hon. Secretary till September), Miss M. E. King (acting Hon. Secretary from September).

In August the Committee accepted with great regret the resignation of the Hon. Secretary, Miss Sutton Sharpe, on her approaching marriage. While wishing her every happiness in the future, the Committee realized how difficult it would be to fill Miss Sutton Sharpe's place when she finally left them in September.

The "Care" work covers many aspects of the social problem, bad housing, under-nourishment, clothing and suitable work for the convalescent.

Overcrowding is the pressing problem; where there are children no one has rooms to let and where the children are earning, families cannot afford to move far out on account of the fares. Two instances of serious overcrowding will give some idea of the difficulty.

A.B.—A family of six, father, in regular work, with £3 a week coming in, mother, two girls, aged 15 and 13 respectively, both attending Special schools, two boys, aged 6 and 2, all live and sleep in one small room.

C.D.—Another family of six; father out of work, mother, son aged 19, in Sanatorium, daughters aged 17 and 14 both at work; the younger has been in Sanatorium; girl aged 10 still at school; all live and sleep in a very small room.

Under-nourishment is one of the dangers to look out for where wage-earners are away ill. It is a recognized and important fact that good feeding is essential in fighting tuberculosis, and it is very necessary to see that the members of a family are being properly nourished. Here close co-operation with the P.A.C. and the Children's Care Committees is very necessary.

Clothing for the patients is a never-ending anxiety; it is quite clear that the clothes which just do for home wear are not suitable for going away, nor has the patient sufficient for sanatorium treatment; the ready money to provide the necessaries is not forthcoming; it is a big extra expenditure which few, if any, are able to afford. Night attire is perhaps the most difficult, as this is practically unknown in the home, and is a necessity when going away.

Suitable work for the patient when he or she returns home is a great problem; in these days of unemployment it is impossible to pick and choose and yet to return to some occupations is asking for the return of the trouble; then again even if the work is suitable, employers are not always willing to reinstate the patient. The Committee can only watch and help where possible.

The Committee works in close co-operation with the local charitable and official agencies and has on frequent occasions been able to obtain assistance for families in need; for instance:—

E.F.—A man having to enter the local Hospital for treatment had his pension stopped. Pending the re-adjustment of the pension, the local Red Cross allowed the wife equivalent each week until the pension came through again.

G.H.—The C.O.S. kept this family from sinking into dire poverty when the father and third member of the family had to go into Sanatorium; helped the wife to get clear of debt and made a weekly allowance until one of the patients returned home and resumed work; continuing to keep in friendly touch with the family and now that sick benefit has been reduced making an allowance so that the one who has come home should not go back in health through lack of proper nourishment.

During 1932 there were 143 decisions made by the Committee on Care work; 142 assessments of new patients and 52 re-assessments.

Handicraft Centre.—At the end of May the attendance fell and the Centre had to be closed as an L.C.C. Centre—that is, the teacher ceased to be paid by the London County Council; rather than the good work should stop the Committee decided to carry on paying the teacher from the balance still in hand; the Centre was therefore only closed for the usual summer holidays. There were eleven students attending fairly regularly at the end of the year.

At the Exhibition held at Carpenter's Hall in October, we shared a stall with the Westminster Committee and sold or took orders to the value of £6.

The Students take a great interest in their work and it is of value to them from the recreative point of view as well as physically good for them to have change of scenery and something to talk about besides their own bad health. Their basket work is extremely good; as also the string stools they make.

Funds are badly needed, as will be seen from the Balance Sheet attached, if the work is to continue. Orders for goods such as waste-paper baskets, trays, stools, basket-pot-holders, leather work, etc., would be welcomed. The class can be visited any Friday morning between 11 and 12 o'clock and samples of work done can be seen.

We take this opportunity of thanking those who have sent us presents of clothing, new and second-hand; without this kind help we should have been sadly handicapped in helping those going away; we must not forget the unfailing assistance given by Miss Francis who comes every Monday evening lending a hand with the office work; we are very grateful to her.

There are many ways in which those interested can help in the work; by gifts of clothing, second-hand or new, flowers for giving away to the sick or for brightening the handicraft room and waiting room; old books, papers and periodicals for the patients; orders for goods to be made by the students; old pieces of material which can be used for work, such as pieces of silk.

METROPOLITAN BOROUGH OF SHOREDITCH.

HANDICRAFT CLASS.

STATEMENT OF ACCOUNTS.

From July 21st, 1930, to December 31st, 1932.

RECEIPTS.			EXPENDITURE.		
	£	s. d.		£	s. d.
To Grants	40	0 0	By Materials	24	15 2¼
„ Sale of Goods at Ex- hibition, 1931	4	15 11	„ Equipment	9	10 0
„ Ditto, 1932	6	0 0	„ Fees for Exhibition	4	4 0
„ Various	9	5 9	„ Teacher 24 Lessons	12	0 0
„ Students at cost	1	13 8	„ Part Student's fees to L.C.C.	0	12 3½
„ Student's Fees	0	6 4	„ To Students	2	15 0
			„ Cheques	0	8 4
			„ Postage and Stationery	0	5 4
			Balance December 31st, 1932—		
			At Bank ... £7 4 9		
			Cash in hand ... 0 6 9¼		
				7	11 6¼
				£62	1 8

Examined Pass Book and Accounts and found correct,

(Signed) P. BETHELL,

4th January, 1933.

4th January, 1933.

VI.—MUNICIPAL DENTAL HOSPITAL.

164, KINGSLAND ROAD.

REPORT FOR THE YEAR 1932.

A special Sub-Committee was appointed by the Health Committee to consider the report upon the work of this Hospital for the year 1931, and as a result various administrative changes were introduced. The most important of these related to the times of the Sessions and the scale of charges for treatment.

At its November meeting, the Council adopted a recommendation of the Health Committee to alter the times of the Sessions, and these are now as follows:—

Monday, Tuesday, Thursday and Friday: 2 p.m. to 8.30 p.m.

Wednesday: 10 a.m. to 12 noon, 4 p.m. to 8.30 p.m.

Thursday (Special session for Maternity and Child Welfare cases):
10 a.m. to 1 p.m.

Saturday: 10 a.m. to 1 p.m.

This re-arrangement, however, included a provision that the Dental Surgeon should not be in attendance between 5 p.m. and 6 p.m. on Monday to Friday evenings inclusive.

At the October meeting of the Council a report from the Health Committee to the effect that the charges for treatment were in some respects excessive was considered, and it was decided to modify these charges.

The new scale of charges, which with the exception of those for school children is lower than the old, is as follows:—

Scaling, per individual.—5s., but not chargeable in respect of a jaw in which a denture of eight or more teeth is supplied.

Fillings, per filling.—5s., with a maximum charge of 10s. for any one tooth.

Root treatment, per tooth.—5s., with a maximum charge of 12s. 6d. for fillings and root treatment in any one tooth.

Extractions.—2s. per tooth (with or without local anæsthetic). Maximum 10s. for any single attendance.

Extractions with general anæsthetics.—Extraction fee 2s. each tooth. Gas 3s. 6d. Maximum 15s. for any single attendance.

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. for each subsequent tooth.

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 :—

- (i) Cracks, fissures, or fractures of dentures.
- (ii) The replacing of a loosened tooth, or loosened band or wire.
- (iii) The adding of one new tooth.
- (iv) An extension of the plate, even when that extension embraces part of a natural tooth.
- (v) New band or wire, 3s. 6d.

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 charge to be made in special X-ray cases is considered and determined by the Committee.

In the case of Approved Society patients, the foregoing scale of charges is applied as follows :—

- (i) In the case of Approved Society patients the cost of the treatment to the Society is based on the Approved Society Scale of Charges, and
- (ii) In the case of Approved Society patients the Council's scale of allowances is applied to the portion of the cost of treatment not borne by the Approved Society.

The scale of charges for treatment of school children is as follows, viz. :—

Extractions	...	...	...	1s., with a maximum of 5s.
Fillings	...	...	...	2s. 6d. per filling, maximum of 7s. 6d.
Gas	...	...	...	3s. 6d.

Orthodontic Treatment—Cost of appliance, plus 50 per cent.

All who live or work in Shoreditch are eligible to receive treatment at this hospital. Persons who have resided in the Borough for six months (but not non-residents working in the Borough) who state that they are unable to afford the foregoing charges are asked to complete a form stating the number of the 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 six months residential qualification to which reference has been made does not apply to Maternity and Child Welfare cases who are entitled to the appropriate remissions by the fact that they are referred to the Hospital from one or other of the Welfare Centres.

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.

	No. of primary examinations	No. of 1st Attendances for Course of Treatment	No. of extractions (teeth)	Local Anaesthetics	General Anaesthetics	No. of Fillings		No. of scalings	No. of Orthodontic plates fitted	Orthodontic visits		No. of surgical operations	No. of other operations	No. of visits
						Complete	Temporary			1st (a)	Subsequent (b)			
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)		
Up to 2 yrs.	1	...	...	...	...	...	...	...	...	...	...	...	...	1
Over 2 „	19	11	34	2	13	...	...	...	...	...	...	...	2	29
Over 3 „	64	47	149	5	51	4	1	...	...	...	...	...	3	115
Over 4 „	166	167	497	8	156	26	5	...	...	...	...	...	7	326
School children	403	347	1040	41	332	143	68	5	44	9	438	3	349	1507
Total	653	572	1720	56	552	173	74	5	44	9	438	3	361	1978

TABLE II.—INSPECTION AND TREATMENT OF ADULTS.

	No. of primary examinations	No. of 1st Attendances for Course of Treatment	No. of extractions (teeth)	Local Anaesthetics	General Anaesthetics	No. of Fillings		No. of scalings	No. of dentures fitted	No. of repairs to dentures	No. of surgical operations	No. of other operations	No. of visits
						Complete	Temporary						
	(1)	(2)	(3)	(4)	(5)	(6)		(7)	(8)	(9)	(10)	(11)	(12)
Women referred from M.C.W. centres ...	293	267	1745	17	314	72	23	40	196	7	14	561	1421
Other Women ..	403	196	795	52	147	78	40	22	148	52	10	500	1344
Adolescents (half-rate cases)													
Female ...	82	41	113	5	39	52	39	6	1	4	1	41	231
Male ...	38	29	65	11	19	11	1	1	1	1	...	9	130
Men ...	344	128	1547	96	233	108	26	62	268	62	30	932	1881
Tuberculous ...	21	8	75	...	10	...	1	...	5	2	...	20	57
Total (including Children, Table I)	1834	1241	6060	237	1314	494	204	136	663	128	58	2424	7042

TABLE III.—ANALYSIS OF VISITS.

Sessions.	Morning.	Afternoon.	Evening.	Total.	No. of M. & C.W. Visits.				Anæsthetic Sessions. Attendances.
					Women.		Children.		
					1st	Subsequent.	1st	Subsequent.	
Saturday	3	—	—	3	—	—	—	—	—
Monday	—	722	608	1,330	65	117	50	7	15
Tuesday	555	647	20	1,222	36	290	37	112	656
Wednesday	623	750	589	1,962	90	219	55	15	21
Thursday	616	547	23	1,186	64	361	38	53	310
Friday	—	772	567	1,339	51	128	43	16	312
TOTAL	1,797	3,438	1,807	7,042	306	1,115	223	203	1,314

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NOTE.—TABLES I AND II.

Column 1.—When course of treatment prescribed at primary examination is completed next visit by individual is recorded as another primary examination.
 Column 2.—Number of patients whose treatment is commenced during the week.
 Column 3.—Weekly total of teeth extracted.
 Columns 4/5.—Weekly total of patients to whom anæsthetics have been administered.
 Column 6.—Total number of teeth filled, completely or temporarily.
 Column 7.—Number of patients who have had their teeth scaled.
 Column 8.—Number of single Orthodontic or Dental Plates fitted.
 Column 9.—Table I.—(a) Represents the number of patients presenting themselves for first time for Orthodontic treatment; (b) represents the weekly total of visits made by patients for Orthodontic treatment, and includes children who were already attending for Orthodontic treatment at the beginning of the year.
 Table II.—Represents the weekly total of single Denture repairs completed.
 Column 10.—Weekly total of separate surgical operations performed.
 Column 11.—Weekly total of operations not registered in the preceding columns.
 Column 12.—Total number of separate visits for examination or treatment.

TABLE III.

Total attendances given here include Tables I and II.

A comparison of the work done each year since the Hospital was opened is contained in the following table :—

	1927 From 31st Mar. Five Sessions	1928 Five Sessions	1929 Jan.-May Five Sessions. June-Dec. Eleven Sessions	1930 Eleven Sessions	1931 Eleven Sessions	1932 Eleven Sessions Jan.-Nov. when new Time Table introd'c'd (see p. 97)
No. of children's visits	499	794	1,081	1,577	1,576	1,978
No. of adults' visits*	1,430	3,032	3,505	6,658	6,174	5,064
No. of maternity cases visits ...	627	1,021	1,209	1,290	1,407	1,421
No. of dentures fitted	61	222	329	699	752	663

* Including Maternity cases.

The number of children attending is slightly, and the total number of children's visits considerably greater than during the preceding year.

Since the introduction of the revised scale of charges in November, however, the number of children attending has fallen considerably, and it is likely that the children's attendances during 1933 will be smaller than during the last four years.

Prior to November the charge for school children was one shilling for the first treatment and one shilling for all subsequent visits, making a maximum charge of two shillings for a course of treatment.

Reference to the new scale of charges for school children on page 98 will show that the present charges are likely to act as a deterrent and to have the effect of making parents choose treatment under the school dental service to the exclusion of treatment at this Hospital.

The number of visits paid by adult patients has fallen, the decrease being entirely due to the fewer number of adult cases, other than Maternity and Child Welfare cases, attending. The number of women referred from the Maternity and Child Welfare Centres is slightly greater than in 1931. Columns (1) and (2) of Table II on page 101, throw light on this matter. If children are excluded it will be found that only 57 per cent. of all adults examined attended for treatment.

During the years 1931 and 1930 this proportion was 78 per cent.

As was explained in the last Annual Report a new and higher scale of charges was introduced on 1st April, 1931, and this continued in operation until 22nd October, 1932.

Patients are informed what the charge for treatment will be after the primary examination has been made, and these figures suggest that the scale of charges in force during nearly ten months of this year have had the effect of turning patients away from the Hospital.

The number of maternity cases has been maintained, and as the cost of treatment of these cases is borne by the Maternity and Child Welfare Committee, the scale of charges in force has not had the deterrent effect noticed in Public Health cases.

That the number of dentures fitted is less than during the previous year is to be explained from the falling off in the number of adult cases. The new scale of charges now in operation is more lenient, except as regards children, and it is reasonable to hope that when it becomes generally known the number of adult patients will increase.

Miss Mould, the Dental Hygienist, for whose services we have to thank the Hon. Arthur Villiers, continued her work throughout the year. Miss Mould submits the following brief summary of her work :—

“My work during 1932 has been divided between attendance at the Dental Hospital, talks and demonstrations at the Welfare Centres, and visits to the homes.

I have attended the Hospital on four half days each week, and have received visits from 100 mothers for scaling.

My work at the Welfare Centres has, I am sure, led to an increased interest in the care of the teeth. Early in January a toothbrush drill class was started, and later the children in this class gave demonstrations at the Centre. This class is still popular.

When Toddlers' dinners were started in October, it was arranged that each child should be given a toothbrush and taught how to use it.

The following are, among other, demonstrations arranged at the Centres :—

Cleaning the teeth ; spread of decay in a tooth ; the best food for the teeth of the expectant mother and young child.

In March, the Dental Board of the United Kingdom kindly lent dental films which were shown at the Centre.

Home visits of which I have made 112 have been in connection with children's demonstrations and scaling appointments.

Cards for the attention of children leaving school which were first introduced during 1930 continued to be distributed throughout the year. This card is in the following terms:—

“Shoreditch Borough Council.”

THE CARE OF THE TEETH.

“To children leaving school.

“While you have been at school your teeth have been looked after for you. Now that you are leaving school you must make your own arrangements. Unless you do so, it is likely that your teeth will decay and your general health suffer.

“In order that the good work done at school may continue, you should place yourself under the care of a dental surgeon.

“Treatment can be obtained from any dental surgeon, of whom there are several in Shoreditch, or at the MUNICIPAL DENTAL HOSPITAL, 164, KINGSLAND ROAD, E. 2.”

Since the Hospital was first placed upon a whole time basis in 1929 every Annual Report has contained reference to more spacious accommodation to be provided in the new building to be erected in Laburnum Street at the rear of the Model Welfare Centre. This building is now completed. The top floor which is approached from a separate outside entrance has been designed to accommodate the Dental Hospital, and at the time of writing it is expected that it will be fully equipped and that it will be possible to move in in the course of a few weeks.

The accommodation in Kingsland Road now about to be vacated has been inadequate ever since work upon a whole time basis was commenced in 1929. That so much excellent work has been done under very trying conditions is encouraging as showing that the value of dental treatment is appreciated by the inhabitants of Shoreditch.

The new premises will be more comfortable for both patients and staff, and it is hoped that in its new home the Hospital will be the means of extending still more widely throughout the Borough the benefits to health that surely accrue to those who take care of their teeth.

These benefits are far-reaching. It is no exaggeration to say that after childhood is passed a high proportion of the inhabitants of Shoreditch are allowing their health to suffer from neglected teeth, and that by the time middle life is reached the individual who does not stand in immediate need of dental treatment is highly exceptional.

It is too often held that the be all and end all of teeth and dentists are toothache and extraction. Painless septic teeth which poison the system for years and bring crippling and life-shortening ills in their train are neglected with appalling frequency.

The residents of this Borough are in the fortunate position of being able to obtain dental treatment at a price graduated according to their capacity to pay, and taken in its entirety this Report shows that they have not been slow to avail themselves of their opportunities.

Much education, however, is still required to combat the apathy that has for so long been the prevailing attitude.

FINANCES OF THE HOSPITAL.

The following figures prepared by the Borough Treasurer show the general financial position of the Hospital during the last two years. A new scale of charges was introduced on April 1st, 1931.

	Jan.-Dec., 1931				Jan.-Dec., 1932				
	£	s.	d.	£	s.	d.	£	s.	d.
Cost of running the Hospital				3,569	4	4	3,164	5	7
Income from—									
Patients direct ...	547	17	3				407	6	8
Insurance Co.'s ...	750	17	6				591	10	9
	1,298	14	9				998	17	5
A/c Transfers from M. and C.W. Committee ...	712	17	6				841	12	0
Total Income ...				2,011	12	3			
Cost of Free Cases—									
Total Charges foregone under Council's Scheme				898	1	6			
Net Cost of Hospital ...				2,270	9	7			
Cost of Hospital had all Charges been paid in full cash ...				659	10	7			
Total Attendances ...				7,705			7,042		

VII.—HOUSING.

In the following table particulars are given in the form required by the Ministry of Health :—

1. *Inspection of Dwelling-houses during the Year :—*

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	6,768
(b) Number of inspections made for the purpose ...	30,065
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidation Regulations, 1925	Nil
(b) Number of inspections made for the purpose ...	Nil
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	Nil
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	Nil

2. *Remedy of Defects during the Year without Service of formal Notices :—*

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers (Intimation Notice)—Public Health London Act	4,493
---	-------

3. *Action under Statutory Powers during the Year :—*

A.—Proceedings under sections 17, 18 and 23 of the Housing Act, 1930 :

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners	Nil
(b) By local authority in default of owners	Nil

B.—Proceedings under Public Health Acts :

(1) Number of dwelling-houses in respect of which statutory notices were served requiring defects to be remedied (and see 2 above)	670
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) By owners	670
(b) By local authority in default of owners	Nil

C.—Proceedings under sections 19 and 21 of the Housing Act, 1930 :

- | | |
|--|-----|
| (1) Number of dwelling-houses in respect of which Demolition Orders were made | Nil |
| (2) Number of dwelling-houses demolished in pursuance of Demolition Orders | Nil |

D.—Proceedings under section 20 of the Housing Act, 1930 :

- | | |
|--|-----|
| (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made | Nil |
| (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit | Nil |

E.—Proceedings under section 3 of the Housing Act, 1925 :

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

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

- | | |
|---|-----|
| (1) Number of dwelling-houses in respect of which Closing Orders became operative | Nil |
| (2) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit | Nil |
| (3) Number of dwelling-houses in respect of which Demolition Orders were made | Nil |
| (4) Number of dwelling-houses demolished in pursuance of Demolition Orders | Nil |

NOTE.—Section 3 and Sections 11 to 15 of the Housing Act, 1925, have been repealed by the Housing Act, 1930, but the proviso to Section 64 of the Act of 1930 continues in force any Closing Orders and Demolition Orders made before the operation of the Act (15th August, 1930), and houses subject to those Orders must continue to be dealt with under the relative provisions of the Act of 1925.

From the foregoing it will be seen that no action was taken under the provisions of the Housing Acts during the year under consideration. This is in accordance with the traditional policy of the Council.

Since the War individual houses have been dealt with almost entirely by means of vigorous action under the Public Health (London) Act. A house to house inspection was commenced in January, 1920, since when the Inspectors have covered the Borough two-and-a-half times. This inspection has been the means of bringing to light and remedying a vast number of nuisances, and has proved of great value in maintaining the health of the Borough.

The houses in Shoreditch, however, are old, and no matter how many notices, formal and informal are complied with, their age sooner or later renders them derelict and unfit for human habitation and ultimately reduces them to a condition in which the District Surveyor must order their partial or complete demolition.

The Housing Acts contain provisions under which, subject to certain conditions being satisfied, it is possible for the Council to secure that a house shall be made in all respects fit for human habitation. In practice, however, so many difficulties are encountered in the application of this part of the Act, that, as explained above, action under the Public Health Act has been preferred.

Whatever may be done by way of slum clearance, it is essential if the remaining houses are not to be allowed slowly to degenerate into slums in their turn, that some workable scheme should be evolved whereby extensive re-conditioning of ageing house property may be effected.

The mention of slum clearance brings to mind the Ministry of Health circular No. 1331 dealing with this subject. The receipt of this circular does not fall within the period covered by this Report, but as it constitutes the most inspiring official call to action in the matter of slum clearance that has ever been issued, and as Shoreditch is an area in which this social evil is present in an acute form, it is permissible to express the hope that by the time the next Report comes to be written, it will at last be possible to record that a comprehensive and far-seeing scheme for the abolition of our slums is being put into effect.

DANGEROUS STRUCTURE NOTICES.

The numbers of these notices served during the last three years has been as follows :—

1930—148; 1931—190; 1932—211.

These notices afford some indication of the dilapidation that is so common in the Borough. In considering these figures it must be remembered that they relate only to notices actually served and that a great deal of work is carried out by owners in anticipation of the District Surveyor's Notice.

UNDERGROUND ROOMS.

It is estimated that there are in occupation in the Borough some 2,000 underground rooms which do not comply with the requirements contained in Section 18 of the Housing Act, 1925.

The great difficulty experienced by poor people in finding reasonable accommodation within their means is well illustrated by the fact that it has proved necessary to allow these rooms to continue in occupation.

RENT RESTRICTIONS ACTS.

A large proportion, some 90 per cent, of the rents in Shoreditch are controlled. Under these Acts the Sanitary Authority may issue certificates enabling tenants to withhold the allowed 40 per cent increase in rent until such time as the landlord has done the work necessary to put the house in a reasonable state of repair.

The number of these certificates issued during each of the last six years has been as follows :—

1927—2; 1928—5; 1929—1; 1930—3; 1931—1; 1932—4.

THE PROVOST STREET SITE.

In the last report mention was made of negotiations concerning certain empty houses in the possession of the London County Council. The houses referred to are situated in Provost, Custance, Marsom and Moneyer Streets. They are 53 in number and contain some 270 rooms. About ten years ago these houses were purchased by the London County Council for the purpose of demolition to provide a school site. Until the end of 1928 they were allowed to remain tenanted and were kept in repair. Since that date, however, they have gradually been emptied and at the present time only six or seven are occupied. No repairs are being undertaken and they are becoming more and more dilapidated.

As it was understood that it was no longer the intention of the London County Council to build a school upon this site, representations have been made to the County Council by the Health Committee requesting that these properties might in one way or another be utilized to relieve the overcrowding in the Borough, and to assist in providing the accommodation necessary in connection with Housing Schemes.

At the time of writing there is good reason to hope that a satisfactory scheme regarding these houses will be announced in the near future.

DERELICT PROPERTY.

At the same time that the Provost Street site was under consideration, the Housing Committee reviewed generally the question of derelict house property.

As the result of a survey by the Sanitary Inspectors it was shown that there are some 55 derelict houses in the Borough. These houses well illustrate the difficulties associated with the very considerable age of much of the house property and, moreover, afford a grim warning of the fate of an increasing number of houses unless some means can be devised whereby re-conditioning can be carried out before it is too late.

OVERCROWDING, 1932.

The number of cases dealt with by the Sanitary Inspector was 226 :—

Accommodated by the L.C.C. in Shoreditch	...	16
" " out of "	...	64
" " own efforts out of "	...	31
" " " in "	...	56
" " " address unknown	...	16
" " " in same house	...	43
		<hr/>
		226
		<hr/>

In addition to the above the following applications were dealt with by the L.C.C.

Accommodated by the L.C.C. on grounds of special hardship	...	5
" " " " " of health	... ..	18
" " " for various reasons	... ..	140
		<hr/>
		163
		<hr/>

CENSUS, 1931.

The information contained in the following Tables has been obtained from the Report on the 1931 Census. They are given here, as taken together they afford a bird's eye view of the housing situation in Shoreditch.

DWELLINGS, ROOMS, AND FAMILIES

	Structurally Separate Dwellings of								Number of Rooms			
	1 Room	2 Rooms	3 Rooms	4 Rooms	5 Rooms	6-8 Rooms	9 or more Rooms	All Sizes	Total	Occu- pied	Vacant	
											Furn's'd	Others
Dwellings occupied by 1 private family... ..	199	1,705	2,003	1,562	611	639	57	6,776	23,552	23,339	51	162
Dwellings occupied by 2 private families	-	33	108	800	893	1,954	47	3,835	20,936	20,848	20	68
Dwellings occupied by 3 or more private families	-	-	7	145	294	2,202	419	3,067	21,230	21,143	13	74
Total dwellings occupied	199	1,738	2,118	2,507	1,798	4,795	523	13,678	65,718	65,330	84	304
Dwellings wholly vacant :												
Furnished	4	8	4	2	-	1	-	19	46	-	46	-
Others	3	45	33	25	22	20	7	155	646	-	-	646
Total Dwellings occupied and vacant ...	206	1,791	2,155	2,534	1,820	4,816	530	13,852	66,410	65,330	130	950
No. of Private Families therein	199	1,771	2,240	3,614	3,332	11,887	2,041	25,084	-	-	-	-
Miscellaneous Habitations and Institutions housing Non-private Families								62				

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STRUCTURALLY SEPARATE DWELLINGS.—A structurally separate dwelling has been defined for the Census as any room or set of rooms, intended or used for habitation, having separate access either to the street or to a common landing or staircase. Thus each flat in a block of flats is a separate unit ; a private house which has not been structurally subdivided is similarly a single unit whether occupied by one family or by several families. But where a private house has been subdivided into maisonettes or portions, each having its front door opening on to the street or on to a common landing or staircase to which visitors have access, then each such portion is treated as a separate unit.

ROOMS.—For the purpose of the Census, the rooms enumerated are the usual living rooms, including bedrooms and kitchens, but excluding sculleries, landings, lobbies, closets, bathrooms, or any warehouse, office, or shop rooms.

DWELLINGS, ROOMS, AND FAMILIES

	No.	%
Increase or Decrease in Occupied Dwellings—(1921-1931)		
Shoreditch	—49	—0.36
London	+29,593	+4.22
Increase or Decrease in Private Families—(1921-1931)		
Shoreditch	—289	—1.14
London	+69,133	+6.17
Vacant Unfurnished Dwellings, 1931—		
Shoreditch	155	1.12
London	11,390	1.52
Average Size of Occupied Dwelling (Rooms)—		
Shoreditch	4.78	4.82
London	5.75	5.85
Average Family Occupation (Rooms)—		
Shoreditch	2.60	2.59
London	3.53	3.62
Families per Occupied Dwelling—		
Shoreditch	1.83	1.85
London	1.63	1.60
Average Size of Private Family (Persons)—		
Shoreditch	3.77	4.00
London	3.46	3.79
Average Persons per Room—		
Shoreditch	1.45	1.54
London	0.98	1.05
Persons living at more than 2 per room Density—		
Private Families, 1931 :	No.	%
Shoreditch	4,627	18.4
London	89,600	7.5
Population, 1931 :		
Shoreditch	27,537	29.1
London	541,352	13.1
Population, 1921 :		
Shoreditch	32,452	32.0
London	683,498	16.1

PRIVATE FAMILIES CLASSIFIED BY SIZE OF FAMILY, ROOMS OCCUPIED AND DENSITY OF OCCUPATION

No. of Persons in Family	Number Private Families occupying the following Number of Rooms									Total Private Families	Population in Private Families	Rooms Occupied	Average No. Persons per room	Density of Occupation			
	1	2	3	4	5	6-7	8-9	10 or more	Population at following densities of occupation (Persons per room)								
									over 3					3 and over 2	2 and over 1½	1½ and over 1	
1	2,355	621	191	45	10	8	3	—	3,233	3,233	4,475	0.72	—	—	—	—	
2	1,262	2,197	990	316	54	48	6	5	4,878	9,756	10,564	0.92	—	—	2,524	—	
3	718	2,048	1,368	620	115	77	11	—	4,957	14,871	12,540	1.19	—	2,154	—	6,144	
4	416	1,510	1,212	731	207	105	22	6	4,209	16,836	11,920	1.41	1,664	—	6,040	4,848	
5	219	889	802	598	227	106	16	5	2,862	14,310	8,780	1.63	1,095	4,445	4,010	2,990	
6	106	540	626	523	172	99	11	6	2,083	12,498	6,787	1.84	636	3,240	3,756	4,170	
7	39	304	386	345	145	81	7	2	1,309	9,163	4,486	2.04	2,401	2,702	2,415	1,519	
8	18	160	215	216	83	47	8	1	748	5,984	2,630	2.28	1,424	1,720	2,392	376	
9	5	89	108	129	60	31	4	1	427	3,843	1,558	2.47	846	2,133	540	315	
10	1	27	61	65	39	27	2	2	224	2,240	900	2.49	890	650	600	80	
11	1	10	23	33	10	16	—	1	94	1,034	384	2.69	374	473	176	11	
12	—	2	12	12	13	2	1	—	42	504	174	2.90	168	300	24	12	
13	—	—	2	2	1	—	—	1	6	78	51	1.53	52	13	—	—	
14	—	—	2	2	3	1	1	—	9	126	43	2.93	56	56	14	—	
15 and over ...	—	—	1	—	—	2	—	—	3	45	16	2.81	15	30	—	—	
2 Persons and over	2,785	7,776	5,808	3,592	1,129	642	89	30	21,851	91,288	60,833	1.50	9,621	17,916	22,491	20,465	
Total Private Famil's	5,140	8,397	5,999	3,637	1,139	650	92	30	25,084	—	—	—	—	—	—	—	
Population in Private Families ...	10,911	29,497	25,359	18,104	6,388	3,615	477	170	—	94,521	—	1.45	9,621	17,916	22,491	20,465	
Rooms occupied ...	5,140	16,794	17,997	14,548	5,695	40,12	761	361	—	—	65,308	—	—	—	—	—	
	20.5	33.5	23.9	14.5	4.5	2.6	0.4	0.1	100.0	1931	Percentage of families living in various units of occupation.						
	23.0	31.5	22.5	15.1	4.5	2.8	0.5	0.1	100.0	1921	..	..	..	..	..	..

VIII.—MATERNITY AND CHILD WELFARE.

For the purpose of Maternity and Child Welfare work the Borough is divided into seven districts. Six of these are allocated to the six Municipal Health Visitors whose office is now in the new Public Health Offices, 8-14, Laburnum Street, and one to the School for Mothers, a voluntary organization employing two Health Visitors, that for many years has done most excellent work in the Borough. The School for Mothers is at 28, Herbert Street, where the Health Visitors have their office, and where Centres are held.

HOME VISITING.

Under the provisions of the Notification of Births Act, 1907, and extending Act, 1915, all births must be notified to the Medical Officer of Health within 36 hours. Acting upon the information thus received the Health Visitors visit all babies born in their district as soon as the Midwife in charge has left, which she ordinarily does when the baby is ten days old.

The number of live births notified during the year was 1,635, and the number of still births 54. There were 77 illegitimate births. The number of registered births was 1,674. The number of births notified and registered are not strictly comparable as the time allowed to lapse is different under the two acts, but the fact that the ratio of births notified to births registered was 97.7 to 100 gives an indication that notification is being carried out in a satisfactory manner.

It was decided to keep an exact record during the year of the number of visits paid to children in each yearly age group.

In the table at the foot of this paragraph the results of this record are shown in relation to the actual number of children living in the Borough in each group as ascertained at the 1931 Census. Certain changes in population have taken place since the Census, but this table is useful as illustrating the fact often commented upon in these reports that the visiting of the older children is far from satisfactory. As has been explained it is a matter of great difficulty to arrange the Health Visitors' time tables so as to allow sufficient time for home visiting. In the meantime it is all to the good that the number of visits paid to children under five years of age has exceeded by 257 the corresponding figure for 1931.

It should be explained that Health Visitors' interviews with parents as distinct from visits to the home are not included in the table that follows and that neither are visits paid to the homes by Probationer Health Visitors. The situation is accordingly better than it appears in the bare record of visits. No alternative to a home visit by the Health Visitor of the district can however be regarded as having the same value.

It is hoped that at some time in the not too distant future it may be possible for the question of home visiting to be fully considered in relation to the duties and adequacy of the staff as a whole.

Age	No. living 1931 Census	No. individual Children Visited	Percentage of Children Visited	Average No. Visits paid to each child Visited
0-1	1,750	1,675	96	3
1-2	1,710	1,173	69	2
2-3	1,699	889	52	3
3-4	1,664	768	46	2.5
4-5	1,882	569	30	2

It will be noted that the total attendances of mothers and children at the Centres was 50,567. This is a considerable increase on the total for the previous years, and is the highest total number of attendances ever recorded. Again, however, it is necessary to utter the warning that attendances at Centres, however frequent, cannot be accepted as a satisfactory alternative to home visiting.

INFANT WELFARE CENTRES.

At the end of the year the weekly programme of Welfare Centres was as follows (Mornings, 9.30-11.30. Afternoon, 2-4):—

MONDAY. AFTERNOON.

Model Welfare Centre, 210, Kingsland Road. District 2.
Dr. Olivier Richards.

Hoxton Market Mission. District 6. Dr. R. Hudson.

TUESDAY. MORNING.

Model Welfare Centre, 210, Kingsland Road. District 1.
Dr. E. C. McGregor.

Hoxton Hall, Hoxton Street. District 4. Dr. R. Hudson.

TUESDAY. AFTERNOON.

Model Welfare Centre, 210, Kingsland Road. Districts 1 and 2.
Dr. E. M. Goffe and Dr. A. Rose.

School for Mothers, 28, Herbert Street. District 7. Dr. N. Dancy.

Hoxton Hall, Hoxton Street. District 4. Dr. R. Hudson.

St. Helen's Club, St. John's Road. District 5. Dr. E. C. McGregor.

WEDNESDAY. AFTERNOON.

Model Welfare Centre, 210, Kingsland Road. District 3.
Dr. Olivier Richards.

Hoxton Market Mission. District 6. Dr. E. M. Goffe.

THURSDAY. AFTERNOON.

Model Welfare Centre, 210, Kingsland Road. District 5.
Dr. E. C. McGregor.

School for Mothers, 28, Herbert Street. District 7. Dr. M. Ravell.

FRIDAY. AFTERNOON.

Model Welfare Centre, 210, Kingsland Road. District 4.
Dr. Sylvia Smith.

Harbour Lights, Goldsmith Row. Districts 1 and 3. Dr. E. M. Goffe
and Dr. A. Rose.

The Centre at Hoxton Hall on Tuesday morning is new, having been started as a result of the very large attendances on Tuesday afternoons at that Centre. The attendances at the Thursday afternoon Centre also became so large as to be unmanageable, and to meet this difficulty it was arranged that two doctors should occasionally be in attendance.

Particulars of attendances at the Centres are given in the table on page 139. Approximately 81 per cent. of all infants under one year of age visited the Centres during the year, making an average number of attendances of 16. Both these figures are higher than the corresponding figures for 1931.

Educational work at the Centres has been continued and extended during the year. Miss Mould, the Dental Hygienist, has continued to give talks and demonstrations upon the importance of the care of the teeth. Towards the end of the year an enquiry into the state of the teeth of 300 children born during 1929 was commenced with the object of ascertaining whether there were any special steps which might be taken to prevent the decay of teeth in young children.

For the first time the Shoreditch Centres entered the National Parentcraft Competition, and there can be no doubt that by so doing a stimulus was given to educational work.

STUDENTS.

The arrangement referred to in the last report under which five Students from the National Health Society attend the Maternity and Child Welfare Department on Tuesday and Thursday each week, continued until towards the end of the year when the number was increased to six. These Students are preparing for the examination for the Health Visitor's certificate and receive practical instruction in all branches of the work.

In addition to these Students, four probationer Health Visitors were engaged in this Department throughout the year in accordance with the arrangements approved by the Ministry of Health under Circular 978 and fully explained in last year's report.

BABIES' WARDS.

Model Welfare Centre.

There is accommodation at this Centre for 10 babies, or 8 babies and 2 mothers. Babies suffering from disorders of nutrition are admitted and mothers with their babies for the establishment of breast feeding.

The nursing staff comprises a matron (Miss Borrow), sister, three staff nurses and three probationers.

Statistical summary relating to children admitted :—

Number of cases in the wards on 1st January, 1932	10
Number of cases admitted	56 babies and 1 mother.
Average duration of stay	9 weeks

Reasons for admission :—

Wasting and malnutrition and debility	28
Prematurity	2
Disorders of digestion	4
Observation	1
Weaning	3
Establishment of breast feeding	8
Rickets	6
Bronchitis	1
Mismanagement	2
Anæmia	1
To improve general condition before operation ...	1

Three cases were transferred to Hospital.

There were two deaths :—

Male.—14 months : Miliary Tuberculosis.

Female.—3 months : Prematurity, Bronchitis, Broncho Pneumonia.

ARTIFICIAL SUNLIGHT CLINIC.

This Clinic is held on Monday, Wednesday, Thursday, and Friday afternoons, and is under the medical direction of Dr. McGregor, the Assistant Medical Officer of Health, who holds two medical consultations weekly. A mercury vapour lamp (K.B.B.) is used. Sister M. Pollard gives the treatment and is responsible for the records and the general arrangements of the Clinic.

Particulars of attendances during the last three years are shown in the following table :—

	1930.	1931.	1932.
Number of children referred to Light Clinic	244	269	257
Total attendances	4,095	4,973	5,552
Average number of visits per child ...	17	18.5	21.6
Average number of attendances per session	20	24.5	27

The diagnosis and progress of all cases referred to this Clinic for treatment of rickets is checked by X-ray examination which is carried out at St. Leonard's Hospital under an agreement with the London County Council. The number of X-ray examinations made during the year was 135.

Shortly after the end of the year covered by this report the Clinic was transferred to the new and very much more spacious accommodation provided in the new building. The new building is connected with the Welfare Centre by a short covered passage.

The members of the Sutton Branch of the Voluntary Aid Detachment continued, as they have done for so many years, to render invaluable assistance in the good work of this Clinic.

I should like to take this opportunity to thank also the many voluntary workers who have helped in the various activities of the Maternity and Child Welfare Department.

Perusal of this report will show that the work continues to grow and the voluntary assistance so generously given has made it possible to economise in the direction of confining qualified officers to duties for the performance of which their special qualifications are essential.

OTORRHŒA CLINIC.

The Otorrhœa Clinic is held at the Model Welfare Centre every morning, Saturday included, from 10 to 11.

The Assistant Medical Officer of Health supervises generally the work of this Clinic and she was formerly in medical charge of the children attending.

During the year, however, it was decided to refer all children suffering from Otorrhœa to the Queen's Hospital for medical advice, and they now receive at our Clinic, from a Nurse attached to the Shoreditch and Bethnal Green District Nursing Association, treatment recommended by the Consultant at the Hospital.

Particulars of the attendances of this Clinic since its inception are contained in the following table:—

YEAR.	No. of individuals treated.	Total Attendances.	Average No. of Attendances made per Patient.
1929 (44 weeks) ...	90	973	10·75
1930	161	1,812	11·25
1931	137	1,674	12·22
1932	131	1,819	13·89

BREAST FEEDING CLINIC.

This Clinic has now been moved to specially designed quarters adjoining the Light Clinic in the new building. As already explained there is a corridor between the new building and the Welfare Centre.

In the past the excellent work done by this Clinic has been carried on under very unfavourable conditions, and it is a matter for satisfaction that it is now suitably housed and equipped.

The Clinic is open from 9 a.m. to 5 p.m. on Monday, Wednesday, and Friday, and a mother can attend as often as necessary between these hours, or if advised to do so, can spend the day at the Clinic.

Dr. McGregor is in medical charge, and the routine work is carried out by Sister Christey (S.R.N., C.M.B.) assisted by Miss Grist, who is a Norland trained Nurse.

During 1932 the number of individual mothers who attended the Clinic was 310, and the total number of daily attendances 976.

DENTAL TREATMENT.

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
1931	527	1,776
1932	463	1,831

AGREEMENT WITH QUEEN'S HOSPITAL FOR EXAMINATION AND TREATMENT OF CHILDREN REFERRED FROM WELFARE CENTRES.

This Agreement came into operation on 22nd January, 1930, and in consideration of a payment of £150 per annum, 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 and treatment.

The following are the particulars of the cases referred under this Agreement during the year :—

	1930	1931	1932
Consultation Cases	107	133	192 (909 Attendances)
Minor Ailment Cases	121	155	189 (729 Attendances)
Admission to the Wards	2	13	37

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 six years have been as follows :—

			28, Herbert Street.		Model Welfare Centre.
1927	...	...	484	...	592
1928	...	...	463	...	549
1929	...	...	319	...	526
1930	...	...	416	...	595
1931	...	...	357	...	593
1932	...	...	378	...	633

DINING CENTRES.

There are two Dining Centres, one at 31, Herbert Street and one at the Model Welfare Centre, both under the direct control of the Maternity and Child Welfare Committee. At these Centres, the Maternity and Child Welfare Committee allow dinners to necessitous mothers upon the certificate of the Assistant Medical Officer of Health and the recommendation of the Health Visitor. Eligibility for these allowances is determined by the application to each case of the approved scale of income set out in the next section of this report dealing with milk allowances.

Except in special cases where the need is urgent, all statements as to income are verified before the allowance is made.

Great benefit is derived from these dinners both during the later months (5th to 9th inclusive) of pregnancy and the period of lactation.

The number of mothers attending for dinners during 1932 and the two preceding years are compared in the following table :—

	Model Welfare Centre.			31, Herbert St.		
	1930.	1931.	1932.	1930.	1931.	1932.
Number of individual mothers attending ...	114	183	234	122	148	201
Total attendances ...	6,625	11,552	14,130	8,749	10,046	13,659

The menus were revised during the year and fresh fruit and salads were more freely introduced.

In October a scheme was commenced under which selected children under five years of age who were eligible on financial grounds to receive milk allowances should as an alternative be allowed dinners at the Welfare Centre on the recommendation of the doctor at the Welfare Centre and the Health Visitor.

The menus for these Toddlers' dinners have received special consideration, and much time has been given by voluntary and other workers to assisting in feeding these babies, many of whom require much coaxing and management. The results, however, have been most gratifying, as these children have been found to make excellent progress and to have gained in weight.

One teaspoonful of pure cod liver oil is given to each child after the dinner.

The number of individual toddlers who had attended these dinners up to the end of the year was 44, and the total number of attendances was 848.

MILK ALLOWANCES.

An allowance of milk is made to necessitous nursing and expectant mothers and to children under five 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 or 1 lb. Dried Milk weekly.
Child under 3 years of age ...	1 pint daily or 1 lb. Dried Milk weekly.
Child 3-5 years (upon special medical certificate)	1 pint daily or 1 lb. Dried Milk weekly.
Child 3-18 months (upon special medical certificate)	1½ pints daily or 1½ lbs. Dried Milk weekly.

The number of individuals in receipt of milk allowances was 1,150 at the beginning of the year, rose to nearly 1,600 in September, and by the end of this year had fallen to 1,300. The middle figure is the highest recorded since these allowances were first commenced.

With the approval of the Committee the rule requiring parents to bring children in receipt of milk allowances regularly to the Centre was more strictly enforced. As a result the usefulness of the scheme increased by reason of the fact that mothers received more instruction regarding their children and that the latter were under medical supervision.

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.
1	s. d. 14 0	s. d. 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.

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 cases visited was 302 and the number of visits paid 3,097. The particulars of these cases will be found on page 48 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 24. In six cases convalescence was arranged by the Association without the Maternity Committee being asked to contribute.

The average period of convalescence was $7\frac{1}{2}$ weeks.

Reference was made in the last report to the fact that the Association of Infant Welfare Centres placed a bed at the Toddlers' Convalescent Home at Arkley at the disposal of the Committee for one year. This year ended in November, 1932.

Arrangements were then made with the Association under which a bed continued to be at our disposal in consideration of a payment of 15/- weekly. This bed was continually occupied throughout the year.

It was the intention of the Committee to consider some more comprehensive arrangement when the annual estimates were next under consideration. At the time of writing three cots are allocated to our use.

Thanks are due to Miss Ricketts, who, by a very generous gift of £40, made it possible to extend our usual arrangements for convalescence and to send away more cases than we should have otherwise been able to do.

SCHOOL ENTRANTS.

I have to thank the School Medical Officer of the County of London for the following information regarding the routine medical inspection of the Shoreditch children who entered school during 1931 and 1932.

This information is of interest as affording an indication of the physical condition of children at the age at which they pass beyond the scope of our Maternity and Child Welfare schemes.

ALL ENTRANTS

	Girls		Boys		Total		Percentage of Total	
	1932	1931	1932	1931	1932	1931	1932	1931
	<i>Nutrition :</i>							
Excellent	174	229	155	211	329	400	18.67	22.1
Normal	684	683	666	743	1,350	1,426	76.61	72.0
Sub-Normal	37	54	46	60	83	114	4.72	5.8
Bad	—	—	—	2	—	2	—	0.1
<i>Cleanliness and Skin Defects :</i>								
<i>Head :</i>								
Clean	170	224	133	202	303	426	17.19	21.5
Nits, not verminous	696	712	724	804	1,420	1,516	80.59	76.5
Vermin	29	30	10	10	39	40	2.22	2.0
<i>Body :</i>								
Clean	755	857	728	896	1,483	1,753	84.17	88.4
Dirty, not verminous	131	99	133	111	264	210	14.98	10.6
Verminous	9	9	6	10	15	19	0.85	1.0
<i>Teeth :</i>								
Sound	534	635	521	667	1,055	1,302	59.87	65.7
1-3 Decayed	266	241	245	257	511	498	29.00	25.1
4 or more Decayed...	95	91	101	92	196	183	11.13	9.2

PARTICULARS OF THE OCCURRENCE OF CERTAIN DEFECTS

Defect	Girls		Boys		Total	
	1932	1931	1932	1931	1932	1931
Nose and Throat	167	213	169	237	336	450
Eye Disease	26	27	22	12	48	39
Vision	4	4	4	12	8	16
Ear Disease or Hearing	11	15	16	16	27	31
Other Defects	97	115	103	113	200	228

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	1931	1932	1929	1930	1931	1932
No. of school entrants inspected	76,024	64,632	68,283	58,345	2,103	1,902	1,982	1,762
No. found requiring treatment (other than dental)	13,072	10,856	12,220	9,865	264	218	331	253
Percentage requiring treatment	17.2	16.8	17.9	16.9	12.5	11.5	16.7	14.4

MATERNAL CARE.

At the end of the year the Council's scheme for the care of women during the periods of pregnancy, parturition and puerperium comprised the following activities :—

Home Visiting.

Pregnancy is not a notifiable condition, but as a result of the widely spread knowledge concerning, and confidence in, Maternity and Child Welfare work, many women seek the advice of the health visitors in connection with this matter. If schemes for maternal care are to achieve their object of helping and safeguarding women during the critical periods referred to at the beginning of this sub-section it is of the greatest importance that advice should be sought as soon as pregnancy is suspected. Delay increases the difficulty of correcting any abnormality that may be present.

The numbers of individual expectant mothers visited and subsequent visits paid to these during recent years are shown in the following table :—

	1925	1926	1927	1928	1929	1930	1931	1932
No. of individuals visited ...	564	641	619	592	641	631	568	636
Total number of visits paid ...	1,027	1,200	1,109	1,045	1,156	1,215	1,011	1,075

ANTE AND POST-NATAL CLINICS.

Particulars of the attendances at the ante-natal clinics will be found in the table at the end of this section.

At the time of writing the ante-natal clinics are as follows :—

Monday morning. Model Welfare Centre. Districts 1-6. Dr. Gladys Hill.

Thursday morning. Model Welfare Centre. Districts 1-6. Dr. Gladys Hill.

Thursday morning. School for Mothers, 28, Herbert Street. District 7. Dr. Dancy.

Friday morning. Model Welfare Centre. Districts 1-6. Dr. Sylvia Smith.

A Post-Natal Clinic is held on Wednesday mornings (2nd and 4th in month only). Model Welfare Centre Districts 1-6. Dr. Gladys Hill.

Women attended the ante-natal and post-natal clinics either of their own accord or are referred by doctors or midwives practising in the Borough or by the Health Visitors or by the Municipal Midwife. The number of midwives practising in Shoreditch is 34.

Particulars of attendances at these clinics during recent years are contained in the following table :—

	1925	1926	1927	1928	1929	1930	1931	1932
ANTE-NATAL—								
No. of expectant mothers attending ...	380	504	399	412	494	525	543	646
Total attendances ...	673	863	750	763	961	984	1,348	1,740
POST-NATAL—								
No. of mothers attending ...	...	...	...	...	...	...	36	176
Total attendances ...	...	...	...	...	...	...	69	290

The number of women who attended the Ante-Natal Clinics during 1932 amounted to approximately 38 per cent. of the confinements in the Borough during the year.

Special importance attaches to suitable dietary for the expectant mother, and we were fortunate in securing the voluntary services of Miss Hayward, B.Sc., who attended the Ante-Natal Clinics weekly and gave detailed dietetic advice under the general supervision of Dr. Gladys Hill.

Panel of Consultants.

A medical practitioner in attendance upon a woman resident in Shore-ditch can upon application to the Medical Officer of Health obtain the advice of a consultant upon any condition arising during pregnancy, parturition or the puerperium.

The names of the consultants who are available under this arrangement will be found in the section of this report dealing with Staff.

The services of a consultant were engaged on four occasions during the year covered by this report.

Maternity Outfits.

Packages of sterile dressings for confinement cases have been supplied by the Borough Council since 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. 2d., and the patient is asked to contribute what can be afforded.

During the year 780 packets of dressings were distributed. The contents of these packets are as follows :—

- 1 Accouchement pad, 36 ins. by 36 ins.
- 12 Large Maternity Pads.
- 6 Medium Maternity Pads.
- 6 Umbilical Pads.
- 4 ozs. Absorbent Wool.
- 1 large Waterproof Sheet.

The question of the actual bacteriological sterility of these packets was carefully investigated during the year, and an arrangement was reached with the firm from whom they are obtained under which the firm agreed to consult a well-known bacteriologist upon all matters relating to their sterilizing process and periodically to submit to him samples for analysis.

Home Helps.

Home Helps are provided from a panel of women numbering twelve approved by the Maternity and Child Welfare Committee for this duty.

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 and should commence duty not later than 8 o'clock in the morning. 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 Public Health Offices 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.

It will be noted that under the arrangement regarding St. Bartholomew's Hospital students' cases, p. all cases under scale are offered the services of a Home Help.

Home Helps attended in 96 cases.

of these 59 were Midwives' cases,

2 doctors' cases (nurse also provided),

18 City of London Maternity Hospital,

17 St. Bartholomew's Hospital.

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>i.e.</i> , 6d. per 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

Ante-Natal Consultative Centres.

Agreements, in force since 1st April, 1930, have been entered into—one with the City of London Maternity Hospital and the other with St. Bartholomew's Hospital, under which cases may 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. The number of cases referred under the agreement during 1932 was: to St. Bartholomew's Hospital 10, to City of London Maternity Hospital 14.

MUNICIPAL MIDWIFERY.

Sister Leaton whose appointment to the position of Municipal Midwife was recorded in the last report submits the following statistical report upon her work during the year :—

	Municipal Cases	St. Bartholomew's Hospital Cases
No. of cases attended	35	91
No. of ante-Natal visits	202	394
No. of ante-Natal Clinics attended ...	60	—
No. of post-Natal Clinics attended ...	6	—

To understand this table it is necessary to remember that Sister Leaton takes cases in the Borough who apply for her services (Municipal cases) and also attends the confinements and acts as Maternity Nurse in cases conducted in Shoreditch by Students from St. Bartholomew's Hospital (St. Bartholomew's Hospital cases).

The full fee for Municipal cases is 25s. for the first child and 21s. for other children, and the Council have approved a comprehensive scheme under which these charges can be remitted in whole or in part to those whose income falls below a certain scale.

The Council receives 15s. from St. Bartholomew's Hospital for every case in which Sister Leaton acts as Maternity Nurse in the manner described.

LOCAL GOVERNMENT ACT, 1929.

The conditions, subject to which the grant formerly payable by the Ministry of Health to the Voluntary Institutions reported upon in this subsection, is now to be paid to the Borough Council out of the Treasury block grant, are set forth in the Ministry of Health scheme prepared under Section 101 of the Act. These conditions were quoted in full in the last report.

Subject to these conditions the following voluntary organizations receive the discontinued Ministry grant.

SHOREDITCH SCHOOL FOR MOTHERS.

Amount payable in respect of discontinued grant, £755 1s. 6d. At the end of the Financial Year 1931-32, this amount was increased by the Borough Council. The Committee of the School for Mothers administer the two following institutions:—

School for Mothers, 28, Herbert Street.

For many years this institution has worked in close co-operation with the Borough Council.

A district (No. 7) in the Western portion of the Borough in which this Centre is centrally placed has been allocated to the two Health Visitors employed.

Notifications of births are sent from the Public Health Offices, and the Health Visitors are responsible for all visiting within this district. Two Infant Welfare, one weighing centre without a doctor, one Ante-Natal Consultation, and a Sewing Class are held weekly. Particulars of the visits made and attendances at the Centres in the School for Mothers district will be found in the tables at the end of this section of the report.

As a result of an inspection of the work of this Centre in January, 1931, it was suggested that it would be more satisfactory if the Health Visitors were to adopt the same form of record-keeping as that used by the Health Visitors at the Town Hall. This suggestion was readily adopted and has worked well.

The Borough Council has for some years made an annual grant of £200 in respect of the duties under the Maternity and Child Welfare Act delegated to this Centre. This grant, is, of course, independent of the discontinued Ministry grant now payable through the Borough Council.

Brunswick Day Nursery, Brunswick Place.

This Nursery accommodates 40 children. The attendances during the year were as follows: Whole days, 7,358; half-days, 694. The corresponding figures for 1931 were: Whole days, 7,568; half-days, 707.

Dr. Dancy is the doctor in charge. She visits the Nursery weekly and in case of emergency a local practitioner is consulted.

The staff consists of Matron (Miss Sharpe), Staff Nurse, and five Probationers. The domestic staff, consisting of daily cleaner and laundry woman on two days each week, is non-resident.

SUN BABIES' NURSERY, NORRIS STREET, HOXTON.

The amount payable in respect of discontinued Ministry grant is £1,013 4s. 10d.

For several years an annual grant of £63 per annum has been paid by the Borough Council in consideration of the value of the work done by this Nursery for the Shoreditch children living in the vicinity. This amount was increased at the end of the financial year, 1931-32.

Accommodation for 100 children is available at this Nursery, though with this number the Nursery is somewhat crowded and the average attendance is rather less.

The number of whole day attendances during 1932 was 19,472 and of half-day attendances 1,166. The corresponding figures for 1931 were: whole day, 20,633; half-day, 1,128.

Dr. Margaret Morton, the Medical Officer in charge, attends the Nursery once weekly for the purpose of examining the children.

An arrangement has been made under which the services of a local medical practitioner are available in emergency.

There are two lamps at the Nursery, one a carbon arc, one a mercury vapour, and Dr. Morton gives artificial sunlight treatment twice a week to the children attending.

Dr. Mary Luff, who holds the diploma of Psychological Medicine, attends the Nursery at fortnightly intervals for the purpose of detecting early mental defect or abnormality and of advising as to the course of action most suitable to the case.

The Maternity and Child Welfare Committee have an arrangement with the Nursery under which payment (9d. per day) is made for the admission of the children of necessitous parents upon the recommendation of the Health Visitor.

Necessitousness under this scheme is determined by the application of the "milk scale" (see p. 122). In the case of parents falling within the half price scale, the Council pays 4½d. per day to the Nursery and the parent 4½d. Payments under this scheme amounted, during 1932 to £225 7s. 10½d. The numbers of children and attendances since the commencement of this arrangement are shown in the following table :

Year	No. of Children	ATTENDANCES		Total Attendances
		At Full Cost	At Half Cost	
1929 (11 weeks)	20	394	36	430
1930 (full)	69	4,508	124	4,632
1931	64	5,316	265	5,581
1932	158	5,980	61	6,041

In order to ensure continuity of feeding of the bottle fed babies attending the Nursery at the Council's expense, the Maternity Committee have agreed to pay for milk (wet or dry) supplied by the Nursery to the mothers of these babies for feeds at night and during week-ends. The total cost incurred during 1932 was 3s. It is understood that the cost of these additional feeds must not exceed 1s. 6d. per week per child.

The resident staff of the Nursery is as follows: Matron (Miss Faraker), two Nurses, one of whom has had a Children's (S.R.N.), and one Norland Institute Training, twelve Probationers, Day Nursery Teacher (Froebel Training College, and Cook.

The cleaning and laundry staff are non-resident.

DR. MORTON'S REPORT UPON THE YEAR'S WORK AT THE NURSERY
IS AS FOLLOWS:—

Average daily attendance 88.

Maximum daily attendance 101.

Waiting List.—(a) 6-10 children under 2 years. (*i.e.*, waiting on list for admission).

(b) No waiting list as a rule for children over 2 years.

The latter point I have especially noted—as in case of extension I think due regard would have to be paid to providing accommodation for additional children under 2 years.

Staff.—On the toddlers' side an additional Resident Nurse (Norland trained) has been appointed. This has greatly aided administration.

I have procured the voluntary services of two Voluntary Masseurs, both fully trained in actinotherapy to help with the Ultra Violet Department. The gift of a Mercury Vapour Lamp has also been a great boon. Some 15-20 children have U.V.R. twice weekly throughout the year.

Clinical Report.—I find the general physique of the nursery children compares most favourably mentally and physically with their less fortunate companions who play outside in the streets. This is particularly noticeable with regular attendants.

The babies (under 1 year) thrive very well—although of necessity artificial feeding has to be employed. Feeding difficulties are seldom encountered.

With children from 2-5 years a further pleasing point of comparison is the quite definite decrease in minor ailments and defects, particularly Dental Caries, Enlarged Tonsils and Skin Lesions and sores. This is very striking and is due I feel simply to open air nursery life, due regard being paid to regular sleeping hours and sleeping posture.

Infectious Disease has been purely incidental, apart from a mild outbreak of Scarlet Fever in the Autumn when three probationers and two children were notified. There have been odd cases of Whooping Cough, Pneumonia, Bronchitis, Diphtheria-aural, and Chicken Pox.

As elsewhere there has been a slight recurrence of rickets—but this was only noted in new cases.

Less robust children have been sent to specially selected convalescent homes for periods ranging from three weeks to five months. This scheme was substituted for the former plan of sending the children "en masse" for a holiday fortnight in the Summer. Selection was made according to health and domestic circumstances. Again, by way of comparison, I find the child who returns to the open-air nursery maintains the benefit of the change much better than the little one who goes back to the street. Outside the nursery—often with welfare children it is very distressing to note how the children begin to lose weight on their return home. In the nursery a course of artificial sunlight is given in an attempt to supplement the holiday and really make the change less abrupt. A great deal can be done for preventive medicine by developing this idea of preventive convalescence and studying the effects of abrupt change to home surroundings. The welfare ward, the convalescent home and the open-air nursery might be very happily linked towards this end and achieve much in preventing minor maladies of children.

A recent record of all new children reveals the fact that almost no child admitted to the Nursery has ever had a holiday. This means that the early years of childhood have in most cases been entirely spent in Hoxton.

In conclusion I must emphasize the general well being of the open-air nursery child. However much one would wish to see nurture entirely carried out in the home—I think meantime this is not practically probable and only a very poor second best course from the child's standpoint.

MEDICAL MISSION OF THE GOOD SHEPHERD, HARMAN STREET, HOXTON.

Amount payable in respect of discontinued Ministry grant, £176 4s. 8d. At the end of the financial year 1931-32 this amount was increased by the Borough Council.

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.

During the year 64 children were admitted. The particulars of the conditions from which they were suffering are as follows:—

Pneumonia 6	Diarrhœa and Vomiting 7
Broncho Pneumonia 4	Glands of Neck 1
Bronchitis 15	Post Tonsillectomy 1
Pyelitis and Asthma 1	Nævus of Buttock 1
Vomiting 1	Prematurity 1
Diarrhœa 3	Congenital Heart 4
General Debility 3	Heart Murmur 1
Wasting 14	Colic 1

There were six deaths.

At the 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.

The Nursing staff is as follows: Matron (Miss D. Edenborough), Sister, Night Nurse, and two Nurses (partially trained).

REPORT BY DR. EVELYN MCGREGOR, ASSISTANT MEDICAL OFFICER OF HEALTH.

The slight increase in the Infantile Mortality rate in the year 1932 calls for comment as the success of a Maternity and Child Welfare scheme is apt to be judged by this rate.

Approximately one-third of the deaths occurred in children during the first four weeks of life of these deaths.

32 died during the 1st week.

5 died during the 2nd week.

2 died during the 3rd week.

6 died during the 4th week.

Twenty-three deaths were due to the babies being born prematurely, and five to difficult confinements. Eight were due to some congenital abnormality. The neo-natal death rate is always high, but it could be reduced considerably if all expectant mothers took advantage of the various schemes for their care—in this way many difficult and many premature births would be prevented.

Respiratory disease including pneumonia and broncho-pneumonia accounted for 28 deaths of children under one year. The question of diseases of the chest in the young child is one of the most difficult problems the Maternity and Child Welfare service has to tackle. It is certainly one of the most urgent and important, not only because these diseases kill many children, but because they leave a large number weakened for life. As long as families are crowded together in one or two rooms it is difficult to make any real progress, as these diseases usually commence with a cold, caught from an adult or older child. Meantime a strenuous effort is being made to try to teach the mothers how to raise the child's resistance. So often it is the over clad, coddled child who is kept in a stuffy room who catches cold. Much can be done to educate the mothers by individual and group teaching about fresh air, open windows and general hygiene. Talks and demonstrations given regularly serve a very useful purpose, and although it is difficult for some to obtain adequate nourishment, a knowledge of the principles of dietetics will help many mothers.

Twenty-one infants died from diarrhoea and enteritis during the year. These diseases used to kill a large number of infants every year, but the teaching at Welfare Centres has helped to prevent these illnesses as has a satisfactory supply of wet and dried milk.

Sixteen infants died of measles, many of the cases being complicated by broncho-pneumonia. Measles is thus a very deadly disease among infants, and those who recover are very often debilitated for years. Other infectious diseases accounted for four deaths only.

The infants who do not succumb during their first year of life are strong and vigorous, surprisingly so when one considers the home conditions of many. The health of the toddler however is too often apt to suffer, especially when the family is large. It is difficult for the mother of a large family to devote sufficient time and attention to her children between the ages of one to five and they often suffer from lack of sleep and daily outing and exercise. These errors in hygiene are almost impossible to correct as in many cases the living room is also the sleeping room, and open spaces where young children can play are few.

Many mothers find it difficult to bring their toddlers to the Welfare Centres at frequent intervals. Regular supervision of children in their homes by the Health Visitors is thus of the utmost importance. Many of the clinics have large attendances and sufficiently frequent medical examination of the toddler is difficult to attain. Special clinics where toddlers could be seen by appointment and medically inspected at regular intervals would tend to raise the standard and improve the condition of school entrants. The toddlers' dinners which were commenced during the year should help many children and many should derive benefit from the three beds at the Association of Infant Welfare Centres Convalescent Homes, which it was hoped to secure at the end of the year.

Rickets in its severe disabling form is now rarely seen. During the year frequent demonstrations and talks on this disease and its prevention were given at the Centres, and the mothers are learning that rickets can be stamped out and are co-operating with us in an attempt to do so. The majority of children who attend the Welfare Centres are given prophylactic doses of cod liver oil and in some cases of Ultra-violet Light. Infants between the 4th and 9th month seem to benefit greatly by a course of Artificial Sunlight.

Adexolin (concentrated vitamins A and D) has also been given to many mothers attending the Ante-natal Clinics.

In order to improve the individual and group teaching at the Welfare Centres, much of the routine work, weighing, filing and registering, etc., has been transferred to Student Health Visitors and voluntary workers thus leaving the Health Visitors free to give advice and make notes on the child's progress between medical consultations.

Anyone in touch with Maternity and Child Welfare work in Shoreditch cannot fail to realize that the general standard of health among the young children in the Borough is gradually improving, and that the mothers and fathers are beginning to acquire a real knowledge of Parentcraft.

STATISTICAL REPORT FOR 52 WEEKS ENDING 31ST DEC., 1932, UPON THE WORK OF
THE HEALTH VISITORS.

	Health Visitors' Districts.							Total.
	1	2	3	4	5	6	7	
No. 1st visits to infants	182	212	160	252	270	227	372	1675
No. re-visits to infants	327	234	315	218	489	319	1244	3146
No. 1st visits to childn. 1-5 years (irrespective of whether visited pre- viously as an infant) ..	1194	1186	1150	1400	1183	1475	1238	8826
No. re-visits to childn. 1-5 years ... ..	...	...	...	...	...	...	...	...
No. 1st visits to expect- tant mothers	69	61	56	53	107	85	205	636
No. re-visits to expect- tant mothers	72	73	14	42	50	44	144	439
No. of futile visits ...	156	101	221	189	233	220	951	2071
No. interviews in con- nection with work ...	464	231	208	336	120	441	1460	3260
*No. 1st visits to infants with diarrhoea ... ..	...	...	...	...	...	...	...	...
*No. 1st visits to cases of ophthalmia neona- torum and other cases of inflammation of eyes	2	3	13	18	2	12	...	50
*No. of re-visits do. ...	7	9	9	10	8	15	...	58
No. 1st visits to cases of puerperal fever	1	2	2	5	1	4	...	15
No. re-visits do. ... ..	...	1	...	11	...	3	...	15
No. 1st visits to cases of puerperal pyrexia	3	2	...	5	...	3	...	13
No. re-visits do.	1	3	...	4	1	1	...	10
No. Health Visitors' attendees. at Centres :	ATTENDANCES AT CENTRES.							Total
	1	2	3	4	5	6	7	Total
(a) Hoxton Market In- stitute	8	8	1	...	52	98	...	167
(b) Hoxton Hall Centre	...	3	21	68	...	2	...	94
(c) St. Helen's Club ..	...	1	...	...	48	10	...	59
(d) Maternity Centre ..	195	260	115	186	111	85	...	952
(e) Harbour Lights Centre	48	4	51	...	1	3	...	107
(f) School for Mothers Centre ... ..	...	2	...	...	...	...	331	333

* These visits are also included above.

TOTAL ATTENDANCES OF INFANTS AND CHILDREN AT WELFARE CLINICS.

		Health Visitors' Districts.							Total.	
		1	2	3	4	5	6	7		
(a) Hoxton Market Institute :	(Mon.)	Infants ... ..	...	...	...	...	...	1,261	...	1,261
		Children ... ..	...	...	...	...	...	1,305	...	1,305
		Mothers with- out children ..	...	...	...	...	...	528	...	528
	(Wed.)	Infants ... ..	...	...	...	...	...	1,207	...	1,207
		Children ... ..	...	...	...	...	...	1,580	...	1,580
		Mothers with- out children ..	...	...	...	...	...	433	...	433
(b) Hoxton Hall :	(Tues.)	Infants ... ..	...	...	...	274	...	...	...	274
	a.m.	Children ... ..	...	...	...	384	...	...	...	384
		Mothers with- out children...	...	...	...	100	...	...	...	100
	(Tues.)	Infants ... ..	...	...	...	1,385	...	...	...	1,385
	p.m.	Children ... ..	...	...	...	1,545	...	...	...	1,545
		Mothers with- out children ..	...	...	...	571	...	...	...	571
(c) St. Helen's Club :	(Tues.)	Infants ... ..	...	...	...	...	1,170	...	...	1,170
		Children ... ..	...	...	...	...	1,000	...	...	1,000
		Mothers with- out children ..	...	...	...	...	244	...	...	224
(d) Maternity Centre :	(Mon.)	Infants ... ..	...	1,276	...	...	...	...	...	1,276
		Children ... ..	...	1,536	...	...	...	...	...	1,536
		Mothers with- out children ..	...	405	...	...	...	...	...	405
	(Tues.)	Infants	759	...	...	...	...	...	...	759
	a.m.	Children	630	...	...	...	...	...	...	630
		Mothers with- out children ..	137	...	...	...	...	...	...	137
	(Tues.)	Infants	940	1,288	...	...	...	...	...	2,228
	p.m.	Children	909	1,396	...	...	...	...	...	2,305
		Mothers with- out children ..	440	372	...	...	...	...	...	812
	(Wed.)	Infants ... ..	...	...	1,721	...	...	...	...	1,721
		Children ... ..	...	...	1,370	...	...	...	...	1,370
		Mothers with- out children ..	...	...	357	...	...	...	...	357

ANTE-NATAL CONSULTATIONS.

	Health Visitors' Districts.							Total
	1	2	3	4	5	6	7	
Maternity Centre : (Monday, Wednesday and Friday.)	...	...	...	...	...	...	...	...
First Attendances.	75	143	72	78	67	48	...	483
Total No. attendances ..	189	333	205	241	168	161	...	1297
School for Mothers : (Tuesday.)								
No. 1st attendances ...	...	...	...	...	...	...	163	163
Total No. attendances ..	...	...	...	...	...	...	443	443
Maternity Centre. Post-Natal Clinic : (2nd and 4th Thursday in month.)								
No. 1st attendances ...	22	21	19	10	27	9	...	108
Total No. attendances ..	22	39	36	19	37	16	...	169
School for Mothers : (Tuesday.)								
No. 1st attendances ...	...	...	...	...	...	...	68	...
Total No. attendances ..	...	...	...	...	...	...	119	...
Sewing Classes (2) :								
Total No. attendances ..	127	170	...	282	54	...	378	1,011

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	92	603	87	668
Dr. McGregor (Tues. a.m.)	1	34	365	26	344
Dr. Rose (Tues.)	1	78	449	12	359
Dr. Goffe „	2	60	602	81	676
Dr. Richards (Wed.)	3	97	704	19	625
Dr. McGregor (Thur.)	5	103	631	52	772
Dr. Smith (Fri.)	4	88	677	17	798
HOXTON MARKET.					
Dr. Hudson (Mon.)	6	89	490	49	541
Dr. Goffe (Wed.)	6	78	498	61	578
HOXTON HALL.					
Dr. Hudson (Tues.)	4	a.m. 12	167	3	204
		p.m. 81	541	27	709
ST. HELEN'S CLUB.					
Dr. McGregor	5	71	457	39	443
HARBOUR LIGHTS.					
Dr. Rose (Fri.)	1	49	406	19	518
Dr. Goffe „	3	50	406	12	439
SCHOOL FOR MOTHERS.					
Dr. Dancy (Tues.)	7	206	1166	67	934
Dr. Ravell (Thur.)	7	118	952	59	852

IX.—HEALTH WEEK.

Health Week, which was held during the week commencing Monday, 3rd October, consisted of a series of evening lectures, illustrated by films, with morning lectures and films for school children, with a swimming gala at the Hoxton Baths on Friday, 7th October, and a display of boxing at the Town Hall on the last day of the week.

The entertainment at the swimming gala consisted of a display of swimming by members of the Hammersmith Ladies' Swimming Club, diving by members of the Highgate Diving Club, team races by Shoreditch school children and a water polo match between teams from the Anlaby and Penguin Swimming Clubs.

The Hoxton Silver Prize Band provided an excellent programme of music, and led the audience of school children in community singing.

The boxing display at the Town Hall on the Saturday Afternoon and Evening was composed of a series of contests amongst schoolboys from various East London Boroughs, who provided an instructive and interesting exhibition, which was enthusiastically received by the schoolboy audience.

The Mayor addressed the boys on the subject of the benefits to be obtained from physical culture and boxing, and cups were presented by the Mayoress.

The programme for the week was as follows :—

<i>Date.</i>	<i>Lecturer.</i>	<i>Chairman.</i>
MONDAY, 3RD OCT., 1932.		
8 p.m.	Dr. I. Feldman, entitled "Parental Responsibility and Sex Education." Film: "How to Tell" ...	Councillor Dr. A. D. Matthews
9 p.m.	Dr. I. Feldman, entitled "The Tragedy of Ignorance." Film: "John Smith & Son" ...	Mr. Councillor R. E. Palmer
TUESDAY, 4TH OCT., 1932.		
7 p.m.	Dr. C. K. Cullen (Tuberculosis Officer), entitled "How we Deal with Tuberculosis," illustrated by Lantern Slides ...	Mr. Councillor J. E. Houseman, J.P.
9 p.m.	Dr. Maitland Radford (Medical Officer of Health), entitled "The Prevention of Disease. Film: "New Ways for Old" ...	Mr. Councillor D. Rider
WEDNESDAY, 5TH OCT., 1932.		
7 p.m.	Mr. Councillor H. P. Griffiths, entitled "Housing." "The Under Forty Club Housing Film" ...	Mr. Councillor W. J. Parker
8 p.m.	Councillor Dr. A. D. Matthews, entitled "Progress of Medicine during the Last Half Century. Film: "Almost a Tragedy." ...	Mr. Councillor S. Orgel
9 p.m.	Mr. J. L. Hodgkinson (Chairman Shoreditch Housing Association), Lecture, "Housing—What the Future holds for Shoreditch." Illustrated by Lantern Slides ...	Mr. Councillor W. Ricketts

THURSDAY, 6TH OCT., 1932.

- 7.15 p.m. Mr. Councillor W. E. Yarrow, J.P., entitled "Maternity and Child Welfare Administration." Film: "H.M. The Baby." Mrs. Yeomans
- 8.15 p.m. Dr. E. C. McGregor (Assistant Medical Officer of Health), entitled "Wonderful Discoveries" ... Mr. Councillor W. E. Yarrow, J.P.

FRIDAY.—SWIMMING GALA.

SATURDAY.—BOXING ENTERTAINMENT.

The attendances during Health Week were as follows:—

Days.	School Children. Morning.	Evenings.	Total.
Monday ...	—	1,050	1,050
Tuesday ...	380	1,350	1,730
Wednesday	670	1,800	2,470
Thursday ...	880	1,700	2,580
Friday ...	1,080	—	1,080
	3,010	5,900	8,910
(Friday)—School children at Baths ...			900
(Saturday)—School children at Town Hall			
Boxing			1,300
			<u>11,110</u>

X.—STAFF OF THE PUBLIC HEALTH DEPARTMENT.

The following are in the permanent employment of the Borough Council:—

GENERAL ADMINISTRATION (Town Hall).

Now Public Health Offices, 8/14, Laburnum Street, E. 2.

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

(including special duties in connection with Maternity and Child Welfare).

EVELYN C. MCGREGOR, M.B., CH.B., D.P.H.

Chief Clerk and Administrative Assistant, E. G. WILSHER.

First Assistant Clerks, E. J. HAYES, G. H. PRATT.

Clerks: H. P. ABBOTT (General Assistant), E. R. BANKS, H. FITZGERALD, W. L. JOB, W. WILSON, E. LEHANE† (13), I. M. RUTHERFORD†. († These two ladies also assist at Welfare Centres.)

Enquiry Officer (Part time in Health Department), W. E. DALE.

Sanitary Inspectors (Town Hall).

Senior Inspector, J. H. PEARSON.

District Sanitary Inspectors.

I, H. G. CHAPMAN^{7, 8, 10}, G. C. E. GIBBS^{9, 11}; III, Wm. SICKELMORE^{7, 10}; IV, R. A. BISHOP^{7, 10}; V, G. WALKER^{7, 11}; VI, T. W. GIRLING^{7, 8, 10, 12, 13}; VII, A. STRATTON^{7, 11}; VIII, C. J. WRIGHT^{7, 10}; IX, J. B. MOLLOY^{7, 8, 11}; X, J. H. THOMAS^{7, 11}.

Inspectors with duties under Food and Drugs Acts, etc., D. GRANT^{7, 11}; F. C. SHAW^{7, 11}.

Maternity and Child Welfare.

Health Visitors (Town Hall): District Numbers I, M. REDCLIFFE^{2, 3}; II, M. MORRELL^{2, 5, 9}; III, D. BALES^{1, 2, 3, 5}; IV, I. M. HEWARD^{1, 2, 3, 7, 8, 16}; V, B. C. HUNT^{1, 2, 3};

VI, A. M. BROTHERTON^{1 2 3}.

Model Welfare Centre, 210, Kingsland Road.

Municipal Midwife, A. E. LEATON^{1 2 3}.

Nursing Staff:—Matron, M. D. BORROW^{1 2 3}; Sister, D. A. KENNEDY^{1 2 3}; Staff Nurses, G. E. WOODS⁴, G. PRESTED⁴ (resigned 15-10-32), L. V. COOPER⁴ (resigned 31-8-32), I. ROCKINGHAM (commenced 1-9-32), J. WILLIAMS (commenced 16-10-32).

Other Staff:—Cook, E. RIGGS; Waitress, J. McDONNELL; Porters, J. E. PERRY, H. PETERS, H. OLIVER; Pram Minder and Assistant, E. SAGE.

Laundry:—Supervising Laundress, M. WHITTINGTON; Laundress, E. DURLING; Laundryman, F. J. DAVIES (transferred to Baths Dept. 1-8-32).

Dining Centre, 31, Herbert Street.

Cook Caretaker, M. ZEMAITIS.

General Assistant, W. MILLER.

Tuberculosis Dispensary, 145, Gt. Cambridge Street.

Tuberculosis Officer, CARL KNIGHT CULLEN, M.R.C.S., L.R.C.P., D.P.H.

Tuberculosis Visitors, A. A. GRANGE^{1, 3}; W. I. HISCOKE^{1 2 3 15}; Dispenser, J. N. HOLMES⁶; Clerk, W. HARRIS; Porter, A. WHITTARD.

DENTAL HOSPITAL,

164, Kingsland Road.

Dental Surgeon.

H. L. DAVIES, L.D.S., R.C.S. (England).

Sister and Clerk.

L. FRIER^{1 2 3}.

Nurse and Assistant Clerk.

A. RANDES^{1 2 3}.

Dental Mechanics.

T. A. DISS, T. LAMB, D. A. F. ROBINSON.

Porter, A. DUCK.

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 (Town Hall).

A. FAWNS.

G. KENNEDY.

A. FLACK.

Mortuary (St. Leonard's Churchyard).*Keeper, W. J. BAILEY.*

The following officers who are not members of the permanent staff perform various duties in connection with the work of the department:—

Physicians to Maternity and Child Welfare Centres: SYLVIA SMITH, M.B., B.S.; NOEL OLIVIER RICHARDS, M.D., B.S., M.R.C.P.; EDNA M. GOFFE, M.B., B.S., D.P.H.; ALICE ROSE, M.B., Ch.B., M.R.C.P.; GLADYS HILL, M.D., B.S.; ROSE HUDSON, M.B., Ch.B., D.P.H.; NAOMI DANCY, M.B., B.S.; MARION RAVELL, M.B., B.S., D.P.H.

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., Bch., F.R.C.S.; F. W. ROQUES, M.D., Bch., F.R.C.S.; HAROLD CHAPPLE, M.B., M.Ch., F.R.C.S.

Bacteriologist: F. H. TEALE, M.D., F.R.C.P.

Anæsthetist to Dental Hospital: MAURICE MARCUS, M.B., B.S., M.R.C.S., L.R.C.P.

Public Vaccinators: Dr. N. H. CLUBWALA, 247, Kingsland Road, E. 2. (For Moorfields, Church, Hoxton and Wenlock Wards.) — Dr. L. STATNIGROSCH, 191, Kingsland Road, E. 2. (For Whitmore, Haggerston, Kingsland and Acton Wards.)

Public Analyst: H. G. HARRISON, M.A., F.I.C.

Health Visitors, Shoreditch School for Mothers, 28, Herbert Street, N. 1. No. 7 District: E. F. DANCE^{1 2 3}; N. K. FITZMAURICE.

Sister in Charge, Artificial Sunlight Clinic: M. POLLARD³.

Sister in Charge, Breast Feeding Clinic and Relief Midwife: R. CHRISTEY^{1 2 3}.

Dental Hygienist: Miss MOLD¹⁷.

Honorary Secretary, Tuberculosis Care Committee: Miss M. SUTTON SHARPE.

Probationers, Model Welfare Centre: M. STOCKWELL, G. BASSETT, C. COCHIN.

Women Cleaners, Model Welfare Centre: J. DURLING, A. HESKETH, E. WILLIAMENT.

Clerks: G. A. NEWSON, W. F. LEAVER, V. H. SEWELL.

NOTES.

¹ State Registered Nurse. ² Certificate of Central Midwives Board. ³ Certificate of General Training. ⁴ State Registered Children's Hospital Paid Nurses. ⁵ Health Visitor's Certificate. ⁶ Certificate of the Society of London Apothecaries. Certificate in Practical Bacteriology given by London College of Pharmacy, Westbourne Park Road. ⁷ Certificate of Sanitary Inspectors' Examination Board. ⁸ Certificate of Royal Sanitary Institute as Inspectors of Nuisances. ⁹ Certificate of Royal Sanitary Institute and Sanitary Inspectors' Examination Joint Board. ¹⁰ Certificate of Royal Sanitary Institute for Inspection of Meat and other Foods. ¹¹ Certificate of Sanitary Inspectors' Examination Board for Inspection of Meat and other Foods. ¹² Certificate of Royal Sanitary Institute in Sanitary Science as applied to Buildings and Public Works. ¹³ Licentiate of the College of Preceptors. ¹⁴ Certificate of Fever Nursing Training. ¹⁵ Certificate for Tuberculosis, Brompton Hospital. ¹⁶ Certificate for Tuberculosis, Royal Chest Hospital. ¹⁷ Certificate of six months' training as Dental Hygienist at Dental Department, University College Hospital Medical School.

Reference was made in the introductory letter to this report to the sad death in November of Mr. T. W. Girling, Sanitary Inspector to Sanitary District, No. 6.

Mr. Sickelmore, Inspector to No. 3 District, was compelled, owing to ill health to resign his appointment at the end of June. Neither of these vacancies have been filled.

Owing to the increase in the number of milk allowances it became necessary to obtain further assistance in connection with the work of verifying statements as to income made by applicants, and Mr. C. A. Newson was accordingly appointed temporary Enquiry Officer. He commenced his duties in June.

As explained in the last Report the laundry instituted during 1931 in the basement of the Welfare Centre was to be closed, subject to alternative employment being found for the staff. The following arrangements were made to this end:—Mrs. Whittington was transferred to the staff of the Welfare Centre, Mrs. Durling undertook cleaning duties in the new building, and Mr. Davies returned to the service of the Baths Committee.

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