

**[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 1936,

BY

E. ASHWORTH UNDERWOOD, M.A., B.Sc., M.D., D.P.H.,

*Medical Officer of Health.*

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

REPORT

ON THE

PROGRESS OF

THE

FOR THE YEAR 1852.

AND

OF THE

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## CONTENTS.

SECTION.	PAGE
I.—Statistics and General Information ... ..	12
II.—Population, Births, Marriages and Deaths ... ..	22
III.—Infectious Disease ... ..	38
IV.—Tuberculosis ... ..	62
V.—Maternity and Child Welfare ... ..	86
VI.—Municipal Dental Hospital ... ..	120
VII.—Special Clinics for Women ... ..	127
VIII.—Foot Clinic ... ..	132
IX.—Sanitary Circumstances ... ..	134
X.—Housing ... ..	164
XI.—Health Propaganda ... ..	169

## LIST OF STATISTICAL TABLES CONTAINED IN THE REPORT.

	PAGE
Statistical Summary ... ..	11
Whole district during 1936 and previous years ... ..	13
Comparison of Shoreditch and London birth and death rates for 1936 ... ..	14
Birth-rate, death-rate and analysis of mortality during 1936 ... ..	15
Unemployment ... ..	17
Birth-rates: Comparison between Shoreditch, London, and England and Wales for period of years ... ..	24
Death-rates: Comparison between Shoreditch, London, and England and Wales for period of years ... ..	26
Infantile mortality: Comparative table, Shoreditch, London, and England and Wales for period of years ... ..	31
Cancer: Summary of deaths during 1936 ... ..	33
Vital statistics for the metropolitan boroughs ... ..	34
Infantile mortality: Summary of deaths during 1936 ... ..	31
Causes of, and ages at, death during 1936... ..	36
Cases of infectious disease notified during 1936 ... ..	40
Vaccination Officers return ... ..	42
Scarlet fever: Comparison of Shoreditch, London, and England and Wales case and death rates for period of years ... ..	44
Diphtheria: Comparison of Shoreditch, London, and England and Wales case and death rates for period of years ... ..	45
Measles: Comparison of Shoreditch, London, and England and Wales death rates for period of years ... ..	51
Whooping cough: Comparison of Shoreditch, London, and England and Wales death rates for period of years ... ..	55
Influenza: Comparison of Shoreditch, London, and England and Wales death rates for period of years ... ..	55
Nursing list for 1936... ..	59
Summary of tuberculosis certificates received ... ..	64
Tuberculosis Notifications: Comparison of Shoreditch, London and England and Wales notification rates for period of years ... ..	67
Tuberculosis: Comparison of Shoreditch, London and England and Wales death rates for period of years ... ..	67
Summary of deaths from tuberculosis during 1936 ... ..	69
Return of work carried out at tuberculosis dispensary ... ..	72-76
Return of tuberculosis care work ... ..	83
Premature deaths and death rates: Comparison between Shoreditch and England and Wales for period of years ... ..	87
Maternal mortality: Comparison between Shoreditch and England and Wales for period of years ... ..	89
Statistical Report upon the work of the health visitors ... ..	96
Attendances at welfare centres during 1936 ... ..	97
Routine medical inspection of elementary school entrants ... ..	118, 119
Dental hospital: Summary of work done during 1936 ... ..	121, 122
Summary of work carried out by the Sanitary Inspectors ... ..	135, 136
Summary of work under Factory and Workshop Act ... ..	142-144
Outworkers, tables relating to ... ..	146, 147
Legal proceedings ... ..	162

## METROPOLITAN BOROUGH OF SHOREDITCH.

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### PUBLIC HEALTH COMMITTEE.

(Nov., 1935—Oct., 1936.)

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

*Chairman* : Councillor THURTLÉ, Mrs. D.  
*Vice-Chairman* : Alderman TOUCHARD, G. J.  
 Alderman KELLETT, Miss E.  
 „ LUSHER-PENTNEY, Mrs. C. R.  
 Councillor ALSFORD, Mrs. H.  
 „ ALSFORD, M.  
 „ CHARLES, A.  
 „ CRATHERN, Mrs. A.  
 „ HIGGINS, Mrs. M.  
 „ JEGER, Dr. S. W., L.C.C.  
 „ LINALE, R. G.  
 „ MACBETH, A. I.  
 „ MURPHY, Mrs. J. M.  
 „ ORGEL, S., J.P.  
 „ SALTZBERG, L.  
 „ SHERWIN, A. H. (resgd. 18.2.36.)

### MATERNITY AND CHILD WELFARE COMMITTEE.

(Nov., 1935—Oct., 1936.)

*Chairman* : Alderman KELLETT, Miss E.  
*Vice-Chairman* : Councillor HIGGINS, Mrs. M.  
 Alderman LUSHER-PENTNEY, Mrs. C. R.  
 Councillor ALSFORD, Mrs. H.  
 „ CHARLES, A.  
 „ CLEMENSON, P. D.  
 „ CRATHERN, Mrs. A.  
 „ GIRLING, Mrs. H., O.B.E., J.P., L.C.C.  
 „ HIGGINS, Mrs. M.  
 „ MURPHY, Mrs. J. M.  
 „ PARKINSON, G.  
 (Co-opted) BROWN, Mrs. E.  
 „ CHARLES, Mrs. E. M.  
 „ COLVILLE, Lady CYNTHIA, J.P.  
 „ PENN, Mrs. B.  
 „ SMITH, Mrs. L.

### PUBLIC HEALTH COMMITTEE.

(Nov., 1936—Dec., 1936.)

*Ex-officio* : Mrs. D. THURTLÉ, J.P. (Mayor).

*Chairman* : Councillor CHARLES, A.  
*Vice-Chairman* : Councillor HIGGINS, Mrs. M.  
 Alderman KELLETT, Miss E.  
 „ LUSHER-PENTNEY, Mrs. C. R.  
 „ TOUCHARD, G. J.  
 Councillor ALSFORD, Mrs. H.  
 „ ALSFORD, M.  
 „ CEENEY, H. S.  
 „ CRATHERN, Mrs. A. S.  
 „ JEGER, Dr. S. W., L.C.C.  
 „ KEEBLE, A.  
 „ MACBETH, A. I.  
 „ MURPHY, Mrs. J. M.  
 „ ORGEL, S., J.P.  
 „ POOLER, T.

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(Nov., 1936—Dec., 1936.)

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*Vice-Chairman* : Councillor ALSFORD, Mrs. H.  
 Alderman LUSHER-PENTNEY, Mrs. C. R.  
 Councillor CHARLES, A.  
 „ CLEMENSON, P. D.  
 „ CRATHERN, Mrs. A. S.  
 „ GIRLING, Mrs. H., O.B.E., J.P., L.C.C.  
 „ HIGGINS, Mrs. M.  
 „ MURPHY, Mrs. J. M.  
 „ PARKINSON, G.  
 (Co-opted) BROWN, Mrs. E.  
 „ CHARLES, Mrs. E. M.  
 „ COLVILLE, Lady CYNTHIA, J.P.  
 „ LANTON, Mrs. E. J.  
 „ PENN, Mrs. B.



## STAFF OF THE PUBLIC HEALTH DEPARTMENT.

<i>Medical Officer of Health and Chief Tuberculosis Officer.</i>	E. ASHWORTH UNDERWOOD, M.A., B.Sc., M.D., Ch.B., D.P.H.
<i>Assistant Medical Officer of Health</i> ...	EVELYN C. MCGREGOR, M.B., Ch.B., D.P.H.
<i>Clinical Tuberculosis Officer</i> ... ..	CARL KNIGHT CULLEN, M.R.C.S., L.R.C.P., D.P.H.
<i>Dental Surgeons</i> ... ..	C. S. ABRAHAM, M.C., L.D.S., R.C.S. (Eng.). H. V. E. JESSOP, L.D.S., R.C.S. (Eng.).
<i>Anæsthetist</i> ... ..	MAURICE MARCUS, M.B., B.S., M.R.C.S., L.R.C.P.
<i>Medical Officers for Maternity and Child Welfare.</i>	EDNA M. GOFFE, M.B., B.S., D.P.H. FLORENCE HARVEY, M.B., Ch.B. ROSE HUDSON, M.B., Ch.B., D.P.H. LOUISE LIVINGSTONE, M.D. LILIAN PHILLIPS, M.R.C.S., L.R.C.P. The Hon. NOEL OLIVIER RICHARDS, M.D., B.S., M.R.C.P. ALICE ROSE, M.B., Ch.B., M.R.C.P. SYLVIA SMITH, M.B., B.S.
<i>Physician to General Medical Clinic for Women</i>	JANET K. AITKEN, M.D., B.S., M.R.C.P.
<i>Gynæcologist</i> ... ..	GLADYS HILL, M.A., M.D., B.S., M.C.O.G., F.R.C.S.
<i>Bacteriologist</i> ... ..	F. H. TEALE, M.D., F.R.C.P.
<i>Public Analysts</i> ... ..	H. G. HARRISON, M.A., F.I.C. H. A. WILLIAMS, A.C.G.F.C., F.I.C.
<i>Obstetric Consultants</i> ... ..	HAROLD CHAPPLE, M.B., M.Ch., F.R.C.S. EARDLEY HOLLAND, M.D., F.R.C.P., F.R.C.S. W. H. MCKIM McCULLAGH, D.S.O., M.C., M.B., B.Ch., F.R.C.S. F. W. ROQUES, M.D., B.Ch., F.R.C.S.
<i>Public Vaccinators</i> ... ..	N. H. CLUBWALA, M.D., B.Hy., D.P.M., D.T.M. & H. L. STATNIGROSCH, M.D., M.R.C.S., L.R.C.P.
<i>Chief Clerk and Administrative Assistant</i> ...	E. G. WILSHER.
<i>Senior Sanitary Inspector</i> ... ..	C. J. WRIGHT <sup>7, 10</sup> .
<i>District Sanitary Inspectors</i> ... ..	R. A. BISHOP <sup>7, 10</sup> . H. G. CHAPMAN <sup>7, 8, 10</sup> (retired 15-9-36). G. C. E. GIBBS <sup>9, 10</sup> . D. GRANT <sup>7, 11</sup> . T. H. JACKSON <sup>7</sup> (appointed 20-10-36). J. MARGINSON <sup>9, 10</sup> . J. E. MILLWAY <sup>7</sup> (temporary). J. B. MOLLOY <sup>7, 8, 11</sup> . A. STRATTON <sup>7, 11</sup> . J. H. THOMAS <sup>7, 11</sup> . G. WALKER <sup>7, 8, 10</sup> . W. WILSON <sup>7</sup> (resigned 16-6-36).
<i>Food and Drugs Inspector</i> ... ..	F. C. SHAW <sup>7, 11</sup> .
<i>Infectious Disease Visitor</i> ... ..	IVY M. HEWARD <sup>1, 2, 3, 7, 8, 14</sup> .
<i>Health Visitors...</i> ... ..	D. BALES <sup>1, 2, 3, 5</sup> . A. M. BROTHERTON <sup>1, 2, 3</sup> . C. M. G. GLASS <sup>1, 2, 3, 5, 15</sup> (appointed 21-4-36). M. HORNBY <sup>1, 2, 3, 5</sup> . D. L. MACKENZIE <sup>1, 2, 3, 5</sup> . M. MORRELL <sup>2, 5, 8</sup> . M. REDCLIFFE <sup>2, 3, 5</sup> . M. W. TOOGOOD <sup>1, 2, 3, 5, 12, 13</sup> (resigned 16-6-36). M. WILLIAMSON <sup>1, 2, 5, 16</sup> (appointed 21-7-36). E. F. DANCE <sup>1, 2, 3</sup> . N. K. FITZMAURICE <sup>2</sup> } School for Mothers.

<i>Tuberculosis Visitors</i> ... ..	MRS. A. A. GRANGE <sup>1, 3</sup> W. I. HISCOKE <sup>1, 2, 2, 13</sup> .
<i>First Assistant Clerks</i> ... ..	E. J. HAYES. G. H. PRATT.
<i>Clerks</i> ... ..	W. L. JOB (General Assistant). E. R. BANKS. V. H. SEWELL. H. FITZGERALD. W. F. LEAVER. H. M. B. BURGE (appointed 17-12-35). W. E. D. SMITH (appointed 21-1-36). W. HARRIS. EILEEN LEHANE <sup>12</sup> . MRS. IDA M. RUTHERFORD.
<i>Tuberculosis Care Committee Secretary</i> ...	Mrs. G. B. GREEN, B.A.
<i>Chiropodist</i> ... ..	Mrs. H. E. MABER, M.C.Ch.A.
<i>Matron</i> ... ..	MARGARET D. BORROW <sup>1, 2, 3</sup>
<i>Dispenser</i> ... ..	J. N. HOLMES <sup>6</sup> .
<i>Vaccination Officers</i> ... ..	S. W. DYSON. W. H. WILLIAMS.
<i>Nursing Staff at Dental Hospital—</i>	
<i>Sister-in-charge</i> ... ..	L. FRIER <sup>1, 2, 3</sup>
<i>Nurse</i> ... ..	M. F. CAMPBELL <sup>3</sup> .
<i>Municipal Midwives</i> ... ..	A. E. LEATON <sup>1, 2, 3</sup> . E. M. BALL <sup>2</sup> (temporary).
<i>Enquiry Officer</i> ... ..	C. A. NEWSON.
<i>Telephone Operator</i> ... ..	A. DUCK.
<i>Dental Mechanics, etc.</i> ... ..	Four.
<i>Nursing Staff in Wards at Centre</i> ... ..	Seven.
<i>Kitchen Helpers</i> ... ..	Two.
<i>Porters</i> ... ..	Four.
<i>Disinfecting Officers</i> ... ..	Three.
<i>Caretakers and Cleaners</i> ... ..	Ten.
<i>Mortuary Attendant</i> ... ..	One.
<i>Additional Temporary Staff</i> ... ..	Two.

## NOTES.

<sup>1</sup> State Registered Nurse. <sup>2</sup> Certificate of Central Midwives Board. <sup>3</sup> Certificate of General Training. <sup>4</sup> State Registered Children's Hospital Trained Nurses. <sup>5</sup> Health Visitor's Certificate. <sup>6</sup> Certificate of the Society of London Apothecaries. Certificate in Practical Bacteriology given by London College of Pharmacy, Westbourne Park Road. <sup>7</sup> Certificate of Sanitary Inspectors' Examination Board. <sup>8</sup> Certificate of Royal Sanitary Institute as Inspectors of Nuisances. <sup>9</sup> Certificate of Royal Sanitary Institute and Sanitary Inspectors' Examination Joint Board. <sup>10</sup> Certificate of Royal Sanitary Institute for Inspection of Meat and other Foods. <sup>11</sup> Certificate of Sanitary Inspectors' Examination Board for Inspection of Meat and other Foods. <sup>12</sup> Certificate of Fever Nursing Training. <sup>13</sup> Certificate for Tuberculosis, Brompton Hospital. <sup>14</sup> Certificate for Tuberculosis, Royal Chest Hospital. <sup>15</sup> Certificate of Seamen's Hospital, Greenwich. <sup>16</sup> Certificate of the Mothercraft Training Society.

# Metropolitan Borough of Shoreditch.

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To the MAYOR, ALDERMEN and COUNCILLORS.

*Madam, Ladies and Gentlemen,*

*I beg to submit my third annual report on the progress of the health services of your Authority. As the County Borough Council of West Ham have done me the honour to appoint me as their Medical Officer of Health, this will be the last report to you from my pen. It is fitting, therefore, that in this brief introduction I should refer to any accomplishments which have been effected since I was appointed as head of your Public Health Department.*

*During the last three years much progress has been made in the provision of clinics for all members of the community. In May, 1935, two new clinics for women were inaugurated, viz., the medical clinic, the function of which is largely diagnostic, and the gynæcological clinic, which also serves as a medium for advice on birth control. These clinics have both been successes, and, at the time of writing, arrangements have been made for the inauguration of additional evening sessions. The functions of these clinics were described in my report for 1935, and in the appropriate section of this report additional information is given regarding their working. In November, 1935, I reported to you that in my opinion a municipal foot clinic would provide for a need which apparently existed, and, as a result of your approval of my suggestion, this clinic was opened in May, 1936. In this instance, also, the response on the part of the public has been excellent, and the three sessions which were originally held weekly have now been increased to six.*

*The municipal dental hospital is now arousing considerable interest in other areas, and during the last twelve months a number of officers from other local authorities have paid special visits to study the administration and working of the hospital. It is pointed out in this report that the attendances at this clinic increased to such an extent that during 1936 an additional dental surgeon was appointed to conduct extra sessions. Additions to the laboratory staff were also effected. The year was also marked by the inauguration of special measures for dealing with the dental condition of pre-school children.*

*In November, 1936, I presented a report dealing with the medical condition of toddlers and as a result of your consideration of this report—which is reprinted verbatim on page 107—a toddlers' clinic was commenced in May, 1937.*

*Co-ordination of the work dealing with environmental conditions has been gradually effected. An effort has been made to attack the problem of verminous houses and a scheme has been in operation during nearly two years for the disinfection of the contents of verminous houses. This service is the prelude to a larger scheme for disinfection and disinfection; this scheme has been considered on several occasions by the appropriate committees.*

*The year under review was notable for the passing of several important measures; those which mainly concern the metropolitan boroughs are the Public Health (London) Act, 1936, and the Housing Act, 1936.*

*The population of the Borough, in common with that of most other metropolitan boroughs, continues to decrease. Since slum clearance measures are now advancing, it is probable that the population will continue to decrease until a new level is reached at the termination of the housing programme. The decrease of the population is also accentuated by the low birth rate. It is satisfactory to note that for the year 1936 this rate was slightly higher than for the year 1935, but the increase was offset by a slight increase in the general death rate. The increased general mortality was due to a large extent to diseases of the respiratory system. Malignant disease, although important as a cause of death, was to a certain extent held in check during 1936.*

*The death rate from tuberculosis showed a marked decline and the continued downward trend of the incidence and mortality of this disease should be noted with satisfaction. There has, however, been no marked improvement in the mortality from this disease in young adults.*

*It is also a matter for satisfaction that there were no maternal deaths in the Borough during 1936. The infant mortality rate showed an increase over the rate for 1935, but this increase, as explained in the report, was in part due to the prevalence of acute respiratory conditions and to measles.*

*Apart from these respiratory conditions and measles there were no noteworthy outbreaks of infectious disease.*

*The continued existence of a number of underground bakehouses is an undesirable condition which is difficult to deal with effectively. During the year under review I carried out an investigation relative to these bakehouses and I presented to you a report, which is reprinted on page 150. It is encouraging to note that this report was referred to the Metropolitan Boroughs' Standing Joint Committee, who received it sympathetically, and that as a result of my suggestions it is probably that legislation will be introduced in the near future to deal with the anomaly of bakehouses which were long ago certified as being fit for use, and which at the present time cannot be removed from the register.*

*It is with pleasure that I tender my thanks to all members of my staff for the assistance which they have given me during the year, and my gratitude is especially due to those senior members who have maintained the high level of the work in their respective sections. To the Chairmen and members of the Public Health and Maternity and Child Welfare Committees I desire to express my appreciation of the assistance which they have given me, and of the readiness with which they have adopted my suggestions—not only during 1936, but ever since I was appointed to the post which I now relinquish.*

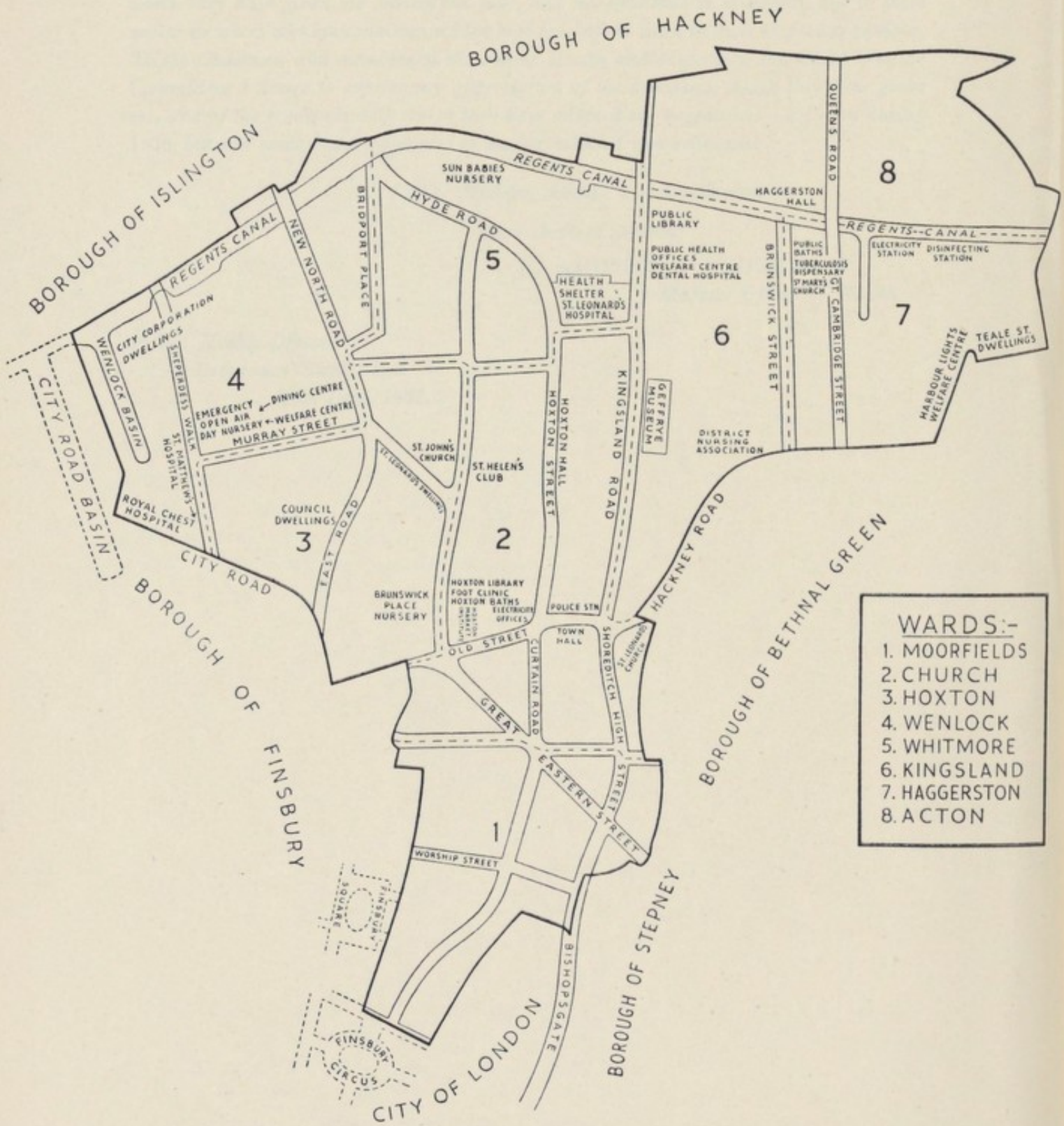
*I am, Madam, Ladies and Gentlemen,*

*Your obedient Servant,*

E. ASHWORTH UNDERWOOD,  
*Medical Officer of Health.*

*Public Health Offices,  
Laburnum Street, E.2.  
26th June, 1937.*





- WARDS:-**
- 1. MOORFIELDS
  - 2. CHURCH
  - 3. HOXTON
  - 4. WENLOCK
  - 5. WHITMORE
  - 6. KINGSLAND
  - 7. HAGGERSTON
  - 8. ACTON

WARD MAP OF THE BOROUGH OF SHOREDITCH.

## SUMMARY.

1936.

Area of Borough	...	...	...	...	...	...	...	...	662 acres
Average height above sea-level	...	...	...	...	...	...	...	...	60 feet
Population (Registrar-General's mid-year estimate)	...	...	...	...	...	...	...	...	85,400
Estimated number of houses	...	...	...	...	...	...	...	...	13,990
Number of families (1931 census)	...	...	...	...	...	...	...	...	25,156
Rateable value	...	...	...	...	...	...	...	...	£814,519
Sum represented by a penny rate	...	...	...	...	...	...	...	...	£3,000 16s. 8d.

	1936.	Average. 1926-1935.	London.	
			1936.	Average 1926-35.
Birth rate (rate per 1,000 living)	14.92	18.70	13.6	14.97
Still births (rate per 1,000 total births)	31.91	32.18	31.9	32.19*
Death rate (deaths per 1,000 living)	12.81	12.92	12.3	12.03
Marriage rate (persons married per 1,000 living)	19.6	19.08	21.5	18.65
Infantile mortality rate— (deaths under 1 year per 1,000 births)	75	73	66	64
Maternal mortality rate (deaths per 1,000 live births)	0.00	2.46	1.92	3.13
Death rate from pneumonia and bronchitis	1.08	2.01	1.35	1.53
„ „ cancer	1.66	1.40	1.75	1.59
„ „ diarrhoea and enteritis (under 2 years) per 1,000 births	21.98	12.87	14.5	10.88

	Cases.	Case-rate.	Deaths.	Death-rate.
Smallpox	0	0.00	0	0.00
Scarlet fever	256	3.00	0	0.00
Diphtheria	176	2.06	5	0.06
Typhoid fever	5	0.06	0	0.00
Measles (all ages)	—	—	41	0.48
„ (notified cases under 5 years)	975‡	—	—	—
Puerperal fever	2	0.02	0	0.00
Pulmonary tuberculosis	96	1.12	50	0.58
Other forms of tuberculosis	20	0.23	11	0.13

\* Average rate for 1930-1935; Still births were not recorded before 1930.

‡ This figure represents only the first cases under 5 years in each household.



## I.—STATISTICS AND GENERAL INFORMATION.

## STATISTICS.

Area—662 acres. Population, Census 1931—97,038; Registrar-General's estimate mid-1936—85,400. Number of structurally separate dwellings, 1931 Census—14,115. Number of houses (end of 1936) according to rate books—13,990. Number of families and separate occupiers, 1931 Census—25,156. Rateable value—£814,519. Sum represented by penny rate—£3,001. The length of public streets in the Borough is 43 miles.

Briefly, Shoreditch is a densely populated area—average density, 129 persons per acre—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, 500 may be given as a round number. Particulars regarding home work will be found in Section IX of this report, page 145.

## EXTRACTS FROM VITAL STATISTICS FOR THE YEAR 1936.

	Total.	M.	F.	Birth Rate.	
Live births {	Legitimate ... ..	1,231	628	603	
	Illegitimate... ..	43	20	23	
		1,274	648	626	14·92
Still births ... ..				Rate per 1,000 total births	31·91
General death rate (crude rate) ... ..					12·81
Percentage of total deaths occurring in public institutions ... ..					73·5
Number of women dying in, or in consequence of, childbirth—					
From sepsis ... ..					0
„ other causes ... ..					0
Death rate of infants under one year of age per 1,000 live births—					
Legitimate, 72. Illegitimate, 139. Total, 75.					

Deaths from measles (all ages) ... ..	41
„ whooping cough (all ages) ... ..	8
„ diarrhoea (under 2 years of age) ... ..	28
„ pulmonary tuberculosis ... ..	50
„ all forms of tuberculosis ... ..	61
Death rate from pulmonary tuberculosis ... ..	0.58
Death rate from all forms of tuberculosis ... ..	0.71

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

YEAR.	Population estimated to middle of each year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT.			
		Un-corrected Number.	Nett.		Number.	Rate.	Of Non-residents registered in the District.	Of residents not registered in the District.	Under 1 year of Age.		At all Ages.	
			Number.	Rate.					Number.	Rate per 1,000 nett Births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
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
1933	93550	1233	1494	16.0	1153	12.3	254	313	110	74	1212	13.0
1934	90630	1223	1456	16.1	1096	12.1	219	311	122	84	1188	13.1
1935	88400	1121	1290	14.6	1013	11.4	294	282	67	52	1001	11.3
1936	85400	1174	1274	14.9	1224	14.3	442	312	95	75	1094	12.8

NOTE.—This 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 population.

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, 1936.

DISTRICTS.	Estimated Population 1936.	ANNUAL RATE PER 1,000 PERSONS LIVING.														Infants under 1 year. Deaths per 1,000 live births.	PERCENTAGE OF TOTAL DEATHS.			
		BIRTHS.	DEATHS DURING THE YEARS				DEATHS DURING 1936 FROM										Inquest Cases.	Deaths in Public Institutions.	Uncertified Causes of Death.	
			1933	1934	1935	1936	1	2	3	4	5	6	7	8	9					10
							Principal Zymotic Diseases. (cols 2-8)	Smallpox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	*Fever.	†Diarrhoea Enteritis (under 2 years).	Tuberculous Disease.					Violence.
London ...	4,141,100	13.6	12.2	11.9	11.4	12.3	0.48	...	0.14	0.01	0.05	0.07	0.01	0.19	0.78	0.56	66	5.9	—	0.1
Shoreditch	85,400	14.9	13.0	13.1	11.3	12.8	0.96	...	0.48	...	0.06	0.09	...	0.33	0.71	0.50	75	4.2	73.5	0.18
<i>Wards.</i>																				
Moorfields	3,458	12.1	14.6	14.0	12.8	15.3	1.44	...	0.87	...	...	0.29	...	0.29	1.74	0.58	143	3.8	79.2	...
Church ...	14,436	17.5	13.9	14.4	11.4	13.8	1.52	...	0.76	...	...	0.29	...	0.48	0.90	0.55	115	4.0	77.9	...
Hoxton ...	13,990	14.2	12.5	13.8	10.5	12.9	0.50	...	0.29	...	0.07	...	...	0.14	0.36	0.29	40	1.6	71.3	...
Wenlock ...	13,807	14.9	11.4	13.0	12.6	12.2	0.65	...	0.29	...	...	0.07	...	0.29	0.65	0.58	44	4.8	70.8	...
Whitmore	13,172	15.1	14.5	13.7	10.8	12.7	1.21	...	0.83	...	0.15	...	...	0.23	0.68	0.15	65	2.4	76.6	0.59
Kingsland	8,423	14.5	13.2	12.4	10.6	12.5	1.06	...	0.59	...	0.12	0.12	...	0.24	0.12	0.71	74	6.7	69.5	...
Haggerston	8,686	16.2	11.0	13.0	12.0	14.3	1.27	...	0.35	...	0.12	0.12	...	0.69	0.15	1.04	106	8.1	72.6	0.80
Acton ...	9,428	12.0	13.4	10.7	10.9	10.3	0.32	...	...	...	...	...	...	0.32	0.85	0.42	53	4.1	70.1	...

\* Fever includes typhus, typhoid and continued fevers.

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

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 1936.

BIRTH-RATE, DEATH-RATE, AND ANALYSIS OF MORTALITY DURING THE YEAR 1936.  
(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 .. .. .	14.9	0.49	12.8	...	...	0.48	...	0.09	0.06	0.12	0.50	22.0	75	88.5	4.2	7.1	0.2	
England and Wales ..	14.8	0.61	12.1	0.01	...	0.07	0.01	0.05	0.08	0.15	0.55	5.7	59	90.4	6.2	2.4	1.0	
122 County Boroughs and Great Towns, including London ..	14.9	0.59	12.3	0.01	...	0.10	0.01	0.06	0.09	0.13	0.54	7.8	63	90.9	5.6	3.0	0.5	
143 Smaller Towns (Estimated Resident Populations, 25,000 to 50,000 at Census, 1931) ..	15.0	0.64	11.6	0.01	...	0.05	0.01	0.04	0.07	0.16	0.54	4.6	56	92.0	5.0	1.9	1.1	
London .. .. .	13.6	0.45	12.3	0.01	...	0.14	0.01	0.07	0.05	0.13	0.56	14.5	66	87.9	5.9	6.1	0.1	

The maternal mortality rates for Shoreditch, and England and Wales, are as follows:—

	Puerperal Sepsis.	Other Causes.	Total.
England and Wales, per 1,000 live births..	1.40	2.41	3.81
" " per 1,000 total births .. .. .	1.34	2.31	3.65
Shoreditch, per 1,000 live births .. .. .	0.00	0.00	0.00
" " per 1,000 total births .. .. .	0.00	0.00	0.00

## GENERAL.

Shoreditch is a district of irregular shape, of which the two longest diagonals measure 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 3 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 5 feet.

The Meteorological Table for London, deduced from observations at Greenwich under the superintendence of the Astronomer Royal, issued by the Registrar-General for 1936, shows a rainfall for the year of 625 millimetres. This figure is 29 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 3.20. This figure was 0.81 less than the average daily mean for the 30 years 1901-1930.

## SOCIAL CONDITIONS.

I have to thank the Director of Statistics of the Ministry of Labour for the following tables which show improvement in the unemployment figures for the year as compared with those for 1935. There was a very significant decrease in the numbers of unemployed females for the year, and in the number of unemployed juveniles. There was also a decrease of 2,144 in the number of persons who were in receipt of domiciliary relief, as compared with the figure for 1935.

Number of persons resident in the Metropolitan Borough of Shoreditch, recorded as unemployed, at quarterly dates in the years 1928 to 1936 :—

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
1933				
20th March ... ..	4,508	1,216	99	5,823
26th June ... ..	3,838	815	44	4,697
25th September ... ..	3,507	690	32	4,229
18th December ... ..	3,104	599	20	3,723
1934				
19th March ... ..	3,654	604	43	4,301
25th June ... ..	3,316	831	37	4,184
24th September ... ..	2,993	759	47	3,799
17th December ... ..	3,067	897	31	3,995
1935				
25th March ... ..	2,859	985	45	3,889
24th June ... ..	3,172	1,099	43	4,314
23rd September ... ..	2,803	687	38	3,528
16th December ... ..	2,798	868	21	3,687
1936				
23rd March ... ..	3,206	869	38	4,113
22nd June ... ..	2,761	945	28	3,734
21st September ... ..	1,949	613	15	2,577
14th December ... ..	2,767	601	16	3,384

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
1933		
25th March ... ..	3,047	126
24th June ... ..	2,983	59
30th September ... ..	2,918	51
30th December ... ..	2,684	45
1934		
31st March ... ..	2,969	62
30th June ... ..	3,255	50
29th September ... ..	3,194	44
29th December ... ..	3,578	55
1935		
30th March ... ..	3,538	57
29th June ... ..	3,447	43
28th September ... ..	3,183	55
28th December ... ..	3,085	58
1936		
28th March ... ..	3,079	38
27th June ... ..	2,721	49
26th September ... ..	2,624	48
26th December ... ..	2,684	52

## HOSPITALS, ETC.

### *Within the Borough—*

St. Matthew's Hospital, Shepherdess Walk, N.1 (for chronic sick, London County Council) ... ..	834 beds
St. Leonard's Hospital, Hoxton Street, N.1 (general hospital), London County Council ... ..	513 beds.
Royal Chest Hospital, City Road, E.C. 1 ... ..	85 beds.
Shoreditch Model Welfare Centre, 210, Kingsland Road, E. 2 ...	10 cots.
Shoreditch Tuberculosis Dispensary, 145, Great Cambridge Street, E. 2 ... ..	No beds.
Shoreditch Municipal Dental Hospital, 8-14, Laburnum Street, E.2	No beds.
Shoreditch Municipal Foot Clinic, Hoxton Library, N.1. ... ..	No beds.

Welfare Centres, *see* page 98, M. & C. W. Section of this report.

City of London & East London Dispensary, Wilson Street, E.C. 2	No beds.
London County Council, Shoreditch Treatment Centre, 80, Nichols Square, E. 2	No beds.
London County Council, Hoxton Schools Treatment Centre, Crondall Place, 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	466 beds.
German Hospital, Ritson Road, Dalston, E. 8	180 beds.
London Hospital, Mile End, E. 1	875 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	315 beds.
Mildmay Mission Hospital, Austin Street, E.2	56 beds.

Special Hospitals—

Queen's Hospital for Children, Hackney Road, E. 2 (Included in these beds are 44 at Branch, Little Folks' Home, Bexhill.)	204 beds.
City of London Maternity Hospital, City Road, E.C. 1	79 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	188 beds.
Elizabeth Garrett Anderson Hospital for Women, Euston Road, N.W. 1	105 beds.
Hospital for Sick Children, Gt. Ormond Street, W.C.1	252 beds.
London Fever Hospital, Liverpool Road, N.1	200 beds.
Home Hospital for Women, High Street, Stoke Newington, N.16	31 beds.
Popham Road Schools Treatment Centre, 26, Popham Road, N.1	No beds.
Finsbury Schools Treatment Centre, 31, Spencer Street, E.C.1	No beds.

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

9 Fever Hospitals (acute)	containing 4,589 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. ...		75 beds.
Hospital 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) ... ..		271 beds.
11 Sanatoria and Hospitals for Tuberculous Patients containing beds as follows: 777 (children), 210 (women), 581 (men), 632 (men and women). In all ... ..		
		2,200 beds.
20 Mental Hospitals containing ... ..		
		33,338 beds.
Children's Hospitals and Homes—		
Queen Mary's Hospital for Children, Carshalton, Surrey ...		1,284 beds.
The Down's Hospital for Children, Sutton, Surrey ... ..		360 beds.
St. Anne's Home, Herne Bay, Kent (for convalescent children)		127 beds.
Contagious Diseases of the Skin or Scalp—		
Goldie Leigh Hospital, Abbey Wood, S.E. 2 ... ..		248 beds.
Ophthalmia—		
White Oak Hospital, 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, and Friday 2 to 4 p.m.
- Whitechapel (L.C.C.) Clinic, Turner Street, Mile End, E. 1 (males, females and children). Daily treatment between 8 a.m. and 9 p.m.
- 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 10.0 a.m. and 8 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 and 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, Thursday 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 (Wat. 3311) or to the Public Health Department, Laburnum Street, E.2 (Bis. 4825/4826).

Briefly the London County Council provides ambulances free of cost for the conveyance of persons meeting with accidents, for parturient women if the cases are urgent, for persons suffering from illness (upon production of medical certificate), and for persons suffering from infectious diseases who are to be removed to the Council's fever hospitals.

In other cases ambulances are supplied at a charge of 12s. 6d. if they are not to be used outside the Administrative County of London. Additional charges are made if there is more than one patient, and there is a special scale of charges for journeys extending outside London.

## HOUSE REFUSE.

The removal of this is under the administrative control of the Borough Surveyor. It is collected at intervals which are never longer than one week ; in many instances it is collected daily, and from a considerable proportion of the premises in the Borough two or three times per 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 1936.

### ACTS.

Housing Act, 1936.

Midwives Act, 1936.

Public Health (London) Act, 1936.

### REGULATIONS.

Regulations under the Agricultural Produce (Grading and Marking) Acts, 1928 and 1931, relating to various articles of food.

Housing Acts (Form of Orders and Notices) Regulations, 1936.

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

The Registrar-General's estimate for the mid-year 1936 population was 85,400. This figure is 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 ... ..	3,458	71	49
Church ... ..	14,436	105	138
Hoxton ... ..	13,990	79	177
Wenlock ... ..	13,807	96	144
Whitmore ... ..	13,172	81	163
Kingsland ... ..	8,423	72	117
Haggerston ... ..	8,686	68	128
Acton ... ..	9,428	86	110

\* Exclusive of water.

The density of the population in the Borough as a whole is 129 persons per acre.

Further information upon the subject of the population, area, number of inhabited houses and rateable value are contained on pages 11 and 12.

### BIRTHS.

The numbers of live births registered in the Borough during the calendar year 1936 are given in the following table :—

Total Live Births (legitimate and illegitimate).	Live births registered (excluding re-registration).	Inward transfers.	Outward transfers.	Live births allocated to the Borough.
Males ... ..	590	130	72	648
Females ... ..	584	105	63	626
Totals ... ..	1,174	235	135	1,274
Illegitimate live births.				
Males ... ..	20	3	3	20
Females ... ..	21	4	2	23
Totals ... ..	41	7	5	43

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 ... ..	17	25	42	12·1
Church ... ..	133	120	253	17·5
Hoxton ... ..	92	106	198	14·2
Wenlock ... ..	121	85	206	14·9
Whitmore ... ..	111	88	199	15·1
Kingsland ... ..	58	64	122	14·5
Haggerston ... ..	61	80	141	16·2
Acton ... ..	55	58	113	12·0
Totals ... ..	648	626	1,274	14·9

## STILL BIRTHS.

The numbers of still births registered in the Borough during the calendar year 1936 are given in the following table :—

Total (legitimate and illegitimate).	Still births registered.	Inward transfers.	Outward transfers.	Still births allocated to the Borough.
Males ... ..	21	4	1	24
Females ... ..	18	4	4	18
Totals ... ..	39	8	5	42
Illegitimate.				
Males ... ..	1	—	—	1
Females ... ..	1	—	1	—

The birth rate for the Borough as a whole was 14·9. For England and Wales the birth rate was 14·8 and for London 13·6. The illegitimate births numbered 43, of which 20 were males and 23 females. Of these, 25, of which 13 were males, occurred in St. Leonard's Hospital. The illegitimate births therefore represented 3·4 per cent. of all the births in the Borough during the year.

The number of births which occurred in St. Leonard's Hospital was 539 : 263 males and 276 females. In 137 of these the parents were not Shoreditch residents.

The table on page 24 gives details of the birth rates for Shoreditch, London, and for England and Wales since 1893.

The birth rate for 1935 was the lowest recorded for the Borough, and it is satisfactory to note that the rate for 1936 shows a slight increase. The birth rates for different wards showed rather more than the usual variation. The rate for Church Ward showed a marked increase over the corresponding rate for 1935.

The slight rise in the birth rate is possibly associated with the corresponding slight rise in the rate for the country as a whole. Last year the Shoreditch birth rate was slightly higher than that for London, but below that for England and Wales, and it is satisfactory to note that the Shoreditch rate for 1936 is once again higher than the rate for the country as a whole. Nevertheless, the difference is not sufficiently great to warrant an attitude of optimism. In 1934 the birth rate for Shoreditch was the highest of the rates for the Metropolitan Boroughs ; in 1935 four London Boroughs

had higher rates ; and last year this number was increased to five, while the rate for one other Borough equalled that for Shoreditch. The conclusion must be accepted that this highly congested borough is no longer an area with a high birth rate. Some of the factors which have possibly helped to bring about the reduction in the number of births were briefly discussed in my Report for 1935.

## BIRTH RATES.

YEAR.	POPULATION (SHOREDITCH)	NO. OF BIRTHS (SHOREDITCH)	BIRTH RATES (SHOREDITCH)	BIRTH RATES (LONDON)	BIRTH RATES (ENGLAND & WALES)
1893	122,420	4,366	35.5	31.0	30.7
1894	122,420	4,203	34.5	30.1	29.6
1895	122,090	4,255	34.8	30.5	30.3
1896	121,108	4,275	35.5	30.2	29.6
1897	120,708	4,233	35.0	30.0	29.6
1898	120,370	4,233	35.1	29.5	29.3
1899	120,120	4,052	33.7	29.4	29.1
1900	119,950	3,947	32.9	28.6	28.7
1901	117,162	4,025	34.3	29.0	28.5
1902	116,573	3,890	33.3	28.5	28.5
1903	116,365	3,835	32.9	28.5	28.5
1904	115,985	3,672	31.6	27.9	28.0
1905	115,564	3,953	34.2	27.1	27.3
1906	115,130	3,870	33.6	26.5	27.2
1907	114,700	3,720	32.4	25.8	26.5
1908	114,269	3,678	32.2	25.2	26.7
1909	113,912	3,692	32.4	24.2	25.8
1910	113,653	3,575	31.6	23.9	25.1
1911	109,951	3,497	31.8	25.0	24.4
1912	109,739	3,529	32.1	24.7	24.0
1913	109,082	3,393	31.1	24.8	24.1
1914	108,362	3,470	32.0	24.6	23.8
1915	102,299	3,091	30.2	24.3	21.8
1916	98,614	2,983	30.3	23.4	21.0
1917	88,347	2,225	22.5	17.5	17.8
1918	87,045	1,719	17.5	16.1	17.7
1919	97,534	2,286	22.3	18.3	18.5
1920	101,000	3,731	36.9	26.5	25.5
1921	104,184	2,975	28.5	22.3	22.4
1922	104,800	2,926	27.9	21.0	20.4
1923	105,200	2,832	26.9	20.2	19.7
1924	105,500	2,528	23.9	18.7	18.8
1925	106,400	2,627	24.6	18.0	18.3
1926	106,400	2,516	23.5	17.1	17.8
1927	104,700	2,188	20.9	16.1	16.6
1928	100,200	2,091	20.9	15.9	16.7
1929	98,710	2,005	20.3	15.7	16.3
1930	98,710	1,988	20.1	15.7	16.3
1931	98,260	1,684	17.1	15.0	15.8
1932	95,800	1,674	17.5	14.3	15.3
1933	93,550	1,494	16.0	13.2	14.4
1934	90,630	1,456	16.1	13.2	14.8
1935	88,400	1,290	14.6	13.3	14.7
1936	85,400	1,274	14.9	13.6	14.8

## MARRIAGES.

The number of marriages during the year was 839, and the marriage rate was 19·6 per 1,000 population. The marriage rate for the Metropolis was 21·5.

During recent years the corresponding figures were as follows :—

Year.	No. of marriages.	Marriage rate.	
		Shoreditch.	London.
1930	969	19·6	19·4
1931	912	18·6	18·8
1932	848	17·7	18·0
1933	858	18·3	18·9
1934	929	20·5	16·9
1935	890	20·1	21·1
1936	839	19·6	21·5

It will be seen that the increase of the marriage rate, which was noted in the report for last year, is being maintained. More interesting than the increase for Shoreditch is that for London as a whole.

## DEATHS.

During 1936 the gross number of deaths registered in the Borough was 1,224.

The transferable deaths were as follows :—

Deaths of non-residents registered in Shoreditch	...	...	442
Deaths of Shoreditch residents registered elsewhere	...	...	312

The number of deaths which must be debited to Shoreditch is accordingly 1,094, which figure gives a net death rate of 12·81 per 1,000 population. In connection with these deaths 46 inquests were held. The death rate for England and Wales for 1936 was 12·1, and for London 12·3.

The table on page 26 gives comparative death rates for a number of years.

## DEATH RATES.

YEAR.	POPULATION (SHOREDITCH)	NETT DEATHS (SHOREDITCH)	DEATH RATE (SHOREDITCH)	DEATH RATE (LONDON)	DEATH RATE (ENGLAND & WALES)
1893	122,420	3,146	25·7	22·7	19·2
1894	122,420	2,466	20·1	17·8	16·6
1895	122,090	2,860	23·4	19·8	18·7
1896	121,108	2,622	21·6	18·6	17·1
1897	120,708	2,626	21·8	17·7	17·4
1898	120,370	2,704	22·4	18·3	17·6
1899	120,120	2,911	24·2	19·7	18·3
1900	119,950	2,576	21·4	18·8	19·5
1901	117,162	2,596	22·1	17·6	16·9
1902	116,573	2,441	20·9	17·2	16·3
1903	116,365	2,280	19·6	15·7	15·5
1904	115,985	2,392	20·6	16·1	16·3
1905	115,564	2,296	19·8	15·1	15·3
1906	115,130	2,289	19·8	15·1	15·5
1907	114,700	2,365	20·6	14·6	15·1
1908	114,269	2,006	17·5	13·8	14·8
1909	113,912	2,189	19·2	14·7	14·6
1910	113,653	1,913	16·8	12·7	13·5
1911	109,951	2,227	20·2	15·8	14·6
1912	109,739	2,017	18·3	14·3	13·3
1913	109,082	2,008	18·4	14·2	13·8
1914	108,362	2,101	19·4	14·4	14·0
1915	102,299	2,071	20·2	14·4	15·7
1916	98,614	1,841	18·7	14·3	14·4
1917	88,347	1,990	22·5	15·0	14·4
1918	87,045	2,108	24·2	18·9	17·6
1919	97,534	1,537	15·7	13·4	13·7
1920	101,000	1,583	15·6	12·4	12·4
1921	104,184	1,498	14·4	12·4	12·1
1922	104,800	1,712	16·3	13·4	12·8
1923	105,200	1,370	13·0	11·2	11·6
1924	105,500	1,444	13·7	12·1	12·2
1925	106,400	1,421	13·3	11·7	12·2
1926	106,400	1,298	12·2	11·6	11·6
1927	104,700	1,328	12·7	11·9	12·3
1928	100,200	1,381	13·8	11·6	11·7
1929	98,710	1,593	16·1	13·8	13·4
1930	98,710	1,208	12·2	11·4	11·4
1931	98,260	1,227	12·5	12·3	12·3
1932	95,800	1,180	12·3	12·3	12·0
1933	93,550	1,212	13·0	12·2	12·3
1934	90,653	1,188	13·1	11·9	11·8
1935	88,400	1,001	11·3	11·4	11·7
1936	85,400	1,094	12·8	12·3	12·1

The distribution of the deaths and the death rates in the different wards is given below :—

Ward.	Males.	Females	Total.	Deaths per 1,000 population.	Deaths of infants under 1 year per 1,000 births registered.
Moorfields ... ..	32	21	53	15.3	143.0
Church ... ..	111	88	199	13.8	114.6
Hoxton ... ..	94	87	181	12.9	40.4
Wenlock ... ..	86	82	168	12.2	43.7
Whitmore ... ..	91	76	167	12.7	65.3
Kingsland ... ..	58	47	105	12.5	73.8
Haggerston ... ..	55	69	124	14.3	106.4
Acton ... ..	55	42	97	10.3	53.1
Totals ... ..	582	512	1,094	12.8	74.6

In the table on page 36 will be found the numbers of deaths from different causes and at different ages with their distribution by wards, together with particulars of deaths in public institutions within the Borough.

Considering the deaths at all ages the chief causes are seen to be as follows :— Heart disease, 283 (25.9 per cent.) ; cancer, 142 (13.1 per cent.) ; tuberculosis, all forms, 61 (5.6 per cent.) ; bronchitis, 61 (5.6 per cent.) ; measles, 41 (3.8 per cent.) ; pneumonia, all forms, 93 (8.5 per cent.). The number of deaths due to accidents in connection with vehicular traffic was 7. In the years 1932 to 1935 inclusive, the corresponding figures were respectively 18, 17, 19 and 17. The particulars regarding deaths from cancer are contained in the table on page 33.

The death rate for Shoreditch for 1935 was 11.3, so that the rate for 1936 represents a considerable increase to 12.8. The crude rate for Shoreditch is still slightly below the average for the last ten years, but it is higher than the rates for London as a whole and for England and Wales respectively. Nevertheless certain features are not unpleasing. The crude death rate does not give a very accurate conception of the position, but it should be noted (see table on page 34) that there are four other London boroughs whose adjusted death rates are equal to or higher than that of Shoreditch.



As has been mentioned, the number of deaths upon which the crude death rate is calculated was 1,094, and the corresponding figure for 1935 was 1,001. It is comforting to reflect that a considerable proportion of the increased deaths were due to causes which are not generally preventable so far as official hygiene is concerned. Although there was a diminution of 14 deaths from tuberculosis and of 17 from "other diseases of the digestive system," deaths from the following causes were increased as shown: measles, + 41; cerebral hæmorrhage, + 14; heart disease, + 25; bronchitis, + 15; pneumonia, + 34; diarrhœa, + 20. It must be admitted that deaths from both measles and diarrhœa and enteritis could be considerably reduced if every use was made of the available methods of prevention, but the other diseases noted may be mitigated more by the hygiene of the individual than by public measures.

The ward death rates given in the table above show no very unusual features. The death rate for Acton ward has in the past frequently been much below that for the other wards and this feature is again noted for the year 1936.

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

The following table shows the age-grouping of the deaths from all causes :—

Age	0-	1-	2-	5-	15-	25-	35-	45-	55-	65-	75-	All ages.
No. of deaths	95	38	26	25	30	35	47	96	189	265	248	1,094
Percentage	8.69	3.38	2.38	2.29	2.75	3.20	4.22	8.78	17.28	24.22	22.76	100

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

ASYLUMS & MENTAL HOSPITALS :—	No. of Deaths.	SPECIAL HOSPITALS :—	No. of Deaths.
Bexley, Dartford ... ..	1	Cheyne, for Children ... ..	1
Fountain, Tooting ... ..	1	City of London Maternity ... ..	2
Horton, Epsom ... ..	5	Colindale ... ..	2
Hundred Acres, Banstead ... ..	3	Downs, for Children ... ..	1
Infirmiry, Friern Barnet ... ..	2	Gordon ... ..	1
Leavesden, Herts. ... ..	3	Home and Hospital for Jewish Incurables ... ..	1
1A, Manor Road, Ilford ... ..	5	Hospital for Sick Children ... ..	2
Stone House, Dartford ... ..	1	Homœopathic ... ..	3
Tooting Bec ... ..	9	Infants, Westminster ... ..	1
1, Uxbridge Rd., Norwood ... ..	5	National ... ..	1
West Park, Epsom ... ..	5	St. Mark's (Cancer) ... ..	1
		St. Luke's ... ..	1
		St. Paul's ... ..	1
		St. Joseph's ... ..	2
		Queen's (for Children) ... ..	32
		Queen Mary's, Carshalton ... ..	2
HOSPITALS FOR INFECTIOUS DISEASES :—			
Brook ... ..	3		
Eastern ... ..	22		
Grove ... ..	1		
Joyce Green ... ..	1		
Northern ... ..	1		
North-Eastern ... ..	11		
"  -Western ... ..	8		
Park ... ..	3		
Southern ... ..	1		
South-Eastern ... ..	2		
"  -Western ... ..	1		
Western ... ..	1		
GENERAL HOSPITALS :—			
Charing Cross ... ..	1		
German ... ..	5		
Grove Park ... ..	1		
Guy's ... ..	1		
Hertford County ... ..	1		
London ... ..	5		
London Jewish ... ..	1		
Metropolitan ... ..	19		
"  Caterham ... ..	1		
Middlesex ... ..	1		
Mildmay Memorial ... ..	1		
Mildmay Mission ... ..	8		
North Middlesex County ... ..	1		
Queen Mary's, Chislehurst ... ..	4		
Royal Northern ... ..	3		
Royal Free ... ..	1		
Royal Sussex County ... ..	1		
St. Bartholomew's ... ..	25		
University College ... ..	1		
West Kent General ... ..	1		
Westminster ... ..	1		
		PUBLIC ASSISTANCE INSTITUTIONS :—	
		Archway Hospital ... ..	24
		Bancroft Lodge, Stepney ... ..	1
		Bethnal Green Hospital ... ..	5
		Dulwich Hospital ... ..	1
		Coxheath Home, Linton ... ..	1
		Hackney Hospital ... ..	5
		Highgate Hospital ... ..	3
		Islington Institution ... ..	3
		Lambeth Hospital ... ..	3
		29, North Side, Wandsworth ... ..	1
		St. Andrew's Hospital ... ..	6
		St. George-in-the-East Hosp. ... ..	1
		St. James Hospital ... ..	1
		St. Mary's, Islington, Hospital ... ..	3
		St. Olave's Hospital ... ..	3
		St. Pancras Hospital ... ..	2
		St. Peter's Hospital ... ..	4
		St. Stephen's Hospital ... ..	1
		OTHER INSTITUTIONS :—	
		2, Fitzjohn's Ave., Hampstead ... ..	1
		Jewish Home of Rest, Wandsworth ... ..	1

Of 302 persons belonging to Shoreditch who died in public institutions beyond the boundary of the Borough, 83 died in general hospitals, 40 in asylums, 55 in fever hospitals, 54 in special hospitals, 68 in public assistance institutions and 2 in other institutions. Elsewhere than in public institutions, 10 persons belonging to Shoreditch died beyond the boundary of the Borough.

Altogether 804, or 73·5 per cent., of the people belonging to Shoreditch who died during the year died in public institutions. The corresponding figures for recent years were as follows:—

1930 ... ..	67·5 per cent.	1933 ... ..	68·5 per cent.
1931 ... ..	66·3 „	1934 ... ..	73·1 „
1932 ... ..	69·3 „	1935 ... ..	74·8 „

### INFANTILE MORTALITY.

The deaths of infants under one year numbered 95, of which 55 were of males and 40 of females. These deaths amounted to 8·68 per cent. of the total net Shoreditch deaths from all causes as compared with 6·69 per cent. in 1935.

The infantile mortality rate (death rate of infants under one year) was 75 per 1,000 births registered during the year. For male infants the rate was 85 and for females 64. The infant mortality rates in the different wards of the Borough are included in the table on page 27. The number of deaths of illegitimate infants was 6, which gives a death rate of 139 per 1,000 illegitimate births.

The table on page 31 gives the comparative infant mortality rates for Shoreditch, London and England and Wales respectively.

It will be noted that the infant mortality rate for 1936 showed a marked increase on the rate for 1935, which was one of the lowest for any of the London Boroughs. Of the 95 deaths, no fewer than 60 were due to three conditions. Pneumonia caused 22 deaths, diarrhoea and enteritis 25, and prematurity 13. In previous reports I pointed out that a substantial reduction in the number of deaths from any one of these three causes would cause a considerable reduction in the infantile mortality rate. The figures for the present year demonstrate this—though unfortunately in a negative manner. In 1935 these three conditions were responsible for the following deaths: pneumonia, 14; diarrhoea and enteritis, 9; prematurity, 16. In 1936 there was therefore a slight reduction in the number of deaths from prematurity, but the marked increase in the infantile mortality rate was largely caused by a considerable increase in the number of deaths due to pneumonia and to diarrhoeal diseases respectively, and to this rate the 7 deaths from measles (under 1 year) also contributed. Prematurity and diarrhoeal diseases are discussed at greater length in later sections.

The causes of the deaths of infants under one year of age, together with age and ward distributions, are given in the table facing page 31.



INFANTILE MORTALITY IN THE BOROUGH DURING THE YEAR 1936.

CAUSE OF DEATH.	*AGES.									*DEATHS IN EACH WARD.								SEX.		Total Deaths under 1 year.									
	Under 1 day.	1 day to 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.	Moorfields.	Church.	Hoxton.	Wenlock.	Whitmore.	Kingsland.	Haggerston.	Acton.	Male.		Female.								
1 Enteric fever ... ..	...	...	...	...	...	...	...	...	...	...	M	FM	FM	FM	FM	FM	FM	FM	F	...	...	...							
2 Smallpox ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
3 Measles ... ..	...	...	...	...	...	...	...	1	2	4	1	3	...	...	3	...	...	...	...	6	1	7							
4 Scarlet fever... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
5 Whooping cough ... ..	...	...	...	...	...	...	...	3	...	1	1	1	...	1	...	1	...	...	...	2	2	4							
6 Diphtheria ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
7 Erysipelas ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
8 Mumps ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
9 Acute poliomyelitis ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
10 German measles ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
11 Varicella ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
12 Influenza ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
13 (a) with pulmonary complications ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
14 (b) with non-pulmonary complications ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
15 (c) with stated complications ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
16 Encephalitis lethargica ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
17 Meningococcal meningitis ... ..	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	...	...	1	...	1							
18 Tuberculosis of respiratory system ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
19 Other tuberculous diseases ... ..	...	...	...	...	...	...	...	...	1	2	...	...	1	1	...	...	1	...	...	1	2	3							
20 Bronchitis ... ..	...	...	...	...	...	...	...	1	2	...	...	2	...	...	...	...	1	...	...	2	1	3							
21 Pneumonia (all forms) ... ..	...	1	...	...	1	2	5	4	4	7	13	33	11	11	13	12	1	...	13	9	22								
22 Pleurisy ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
23 Empyema ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
24 Other pleurisy ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
25 Laryngitis ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
26 Rickets ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
27 Convulsions ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
28 Diarrhoea and enteritis ... ..	...	...	...	...	...	...	2	11	8	4	13	4	12	12	1	12	3	1	2	11	14	25							
29 Ulcer of stomach ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
30 Other diseases of the stomach ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
31 Syphilis ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
32 Congenital malformation ... ..	1	2	1	...	...	4	1	1	...	...	1	1	...	1	1	...	...	...	3	3	6								
33 Congenital debility and icterus ... ..	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	1							
34 Premature birth ... ..	9	2	...	...	...	11	2	...	...	...	1	4	2	2	...	...	...	2	2	9	4	13							
35 Injury at birth ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
36 Accidental mechanical suffocation ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
37 Atelectasis ... ..	4	...	...	...	...	4	...	...	...	...	1	...	...	2	...	1	...	...	...	3	1	4							
38 Other defined diseases ... ..	...	...	1	...	...	1	1	2	...	1	...	1	1	1	...	...	1	...	...	3	2	5							
39 Causes ill-defined or unknown ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
Other violence ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
Totals ... ..	14	5	2	1	1	23	11	25	17	19	2	4	18	11	5	3	5	4	10	3	5	4	6	9	4	2	55	40	95

\* 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.

## INFANTILE MORTALITY.

Year.	Shoreditch Deaths under one year.	Rate per 1,000 Births.		
		Shoreditch.	London.	England and Wales.
1893	809	186	164	159
1894	704	166	143	137
1895	867	203	166	161
1896	786	183	161	148
1897	789	186	159	156
1898	846	200	167	160
1899	854	210	167	163
1900	741	187	160	154
1901	812	201	149	151
1902	704	181	139	133
1903	676	176	131	132
1904	706	190	146	145
1905	652	165	131	128
1906	651	168	131	132
1907	569	153	116	118
1908	510	138	113	120
1909	512	138	107	109
1910	528	147	103	105
1911	598	171	128	130
1912	451	128	91	95
1913	530	157	105	108
1914	496	143	104	105
1915	447	144	111	110
1916	369	124	89	91
1917	352	158	103	96
1918	286	166	107	97
1919	251	110	85	89
1920	340	91	75	80
1921	341	114	80	83
1922	301	102	74	77
1923	232	82	60	69
1924	221	87	69	75
1925	233	88	67	75
1926	167	66	64	70
1927	163	74	59	70
1928	164	78	67	65
1929	168	83	70	74
1930	129	65	59	60
1931	126	75	65	66
1932	134	80	67	65
1933	110	74	59	64
1934	122	84	67	59
1935	67	52	58	57
1936	95	75	66	59

## MATERNAL MORTALITY.

No Shoreditch woman lost her life as a result of childbirth during the year 1936.

For purposes of comparison the maternal mortality rates per 1,000 live births in England and Wales, London and Shoreditch, during the year 1936 and the six preceding years are given as follows :—

YEAR.	SHOREDITCH.			LONDON.			ENGLAND AND WALES.		
	Deaths from Sepsis.	Deaths from other diseases and accidents of Pregnancy.	TOTAL.	Deaths from Sepsis.	Deaths from other diseases and accidents of Pregnancy.	TOTAL.	Deaths from Sepsis.	Deaths from other diseases and accidents of Pregnancy.	TOTAL.
1930	2.01	1.51	3.52	1.71	1.45	3.16	1.84	2.38	4.22
1931	0.00	1.78	1.78	2.02	1.78	3.80	1.59	2.36	3.95
1932	*0.60	1.79	2.39	1.19	1.47	2.64	1.55	2.49	4.04
1933	2.68	1.34	4.02	1.48	1.72	3.20	1.79	2.63	4.42
1934	0.00	0.69	0.69	1.18	1.30	2.48	2.03	2.57	4.60
1935	1.55	1.55	3.10	1.15	1.43	2.58	1.68	2.42	4.10
1936	0.00	0.00	0.00	0.75	1.17	1.92	1.40	2.41	3.81

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

#### CANCER.

The deaths from cancer in the Borough during the year numbered 142 as compared with 147 in 1935. Of these 142 persons, 83 were males and 59 females. Particulars concerning these deaths as regards age, situation of disease, and the ward in which they occurred are given in the table on page 33.

The deaths from cancer during the last six years per 1,000 persons living are given in the following comparative table :—

Year.	Shoreditch.	London.	England and Wales.
1931	1.24	1.64	1.48
1932	1.55	1.55	1.51
1933	1.44	1.60	1.53
1934	1.48	1.72	1.56
1935	1.66	1.66	1.59
1936	1.66	1.75	1.63

During the year under review there was a slight decrease in the total number of deaths from malignant disease. The table on page 33 shows that the alimentary tract was again the most frequently affected site, and that the stomach, intestines and œsophagus, in that order, were the organs most frequently affected. There was a decrease in the number of deaths due to malignant disease of the uterus, but the frequency of cancer of the breast was practically unchanged. An interesting feature was the single death due to cancer of the male breast. It is satisfactory to note that there has been no increase in the frequency of deaths due to malignant disease of the lungs and pleura.

DEATHS FROM CANCER IN THE BOROUGH DURING YEAR 1936.

	AGES.										SEX.		WARDS.										TOTAL.						
	0 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 to 75.	75 to 85.	85 and upwards.	Male.	Female.	Moorfields.	Church.	Hoxton.	Wenlock.	Whitmore.	Kingsland.	Haggerston.	Acton.									
Tongue ...	...	...	...	...	...	...	...	...	...	...	...	...	M	F	M	F	M	F	M	F	M	F	M	F	M	F	...		
Other buccal cavity ...	...	...	...	...	...	1	1	2	2	...	5	1	1	2	...	...	...	...	...	1	...	2	...	...	...	...	...		
Pharynx ...	...	...	...	...	...	...	1	2	...	...	2	1	1	1	...	1	...	...	...	...	...	...	...	...	...	...	...		
Oesophagus ...	...	...	...	...	...	...	3	2	2	...	7	...	1	...	...	1	...	...	...	...	...	3	1	1	1	...	...		
Stomach ...	...	...	...	...	1	1	6	12	6	2	19	9	1	1	3	1	4	2	3	3	1	1	1	1	1	4	2		
Liver ...	...	...	...	...	...	...	1	...	1	...	...	2	...	...	2	...	...	...	...	...	...	...	...	...	...	...	2		
Gall bladder ...	...	...	...	...	...	...	...	...	1	...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1		
Intestines ...	...	...	...	1	...	1	7	3	3	1	9	7	...	1	1	3	1	3	1	2	1	1	1	1	2	...	16		
Rectum ...	...	...	...	...	...	...	5	4	2	...	5	6	1	2	1	1	2	1	1	...	...	...	...	2	2	...	11		
Others ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Uterus ...	...	...	...	...	3	2	4	...	1	...	10	...	...	3	2	...	2	...	3	...	...	...	...	...	...	...	10		
Ovary and Fallopian tube	...	...	...	...	...	...	...	2	...	...	2	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	2		
Vagina, vulva ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Breast ...	...	...	...	...	1	2	4	5	2	...	1	13	...	...	1	2	2	2	2	...	...	...	...	4	3	...	14		
Skin ...	...	...	...	...	...	...	...	1	1	...	2	...	...	...	1	...	...	...	...	...	1	...	...	...	...	...	2		
Larynx ...	...	...	...	...	...	1	1	1	...	...	3	...	...	...	...	2	1	...	...	...	...	...	...	...	...	...	3		
Lung and pleura	...	...	...	...	1	1	5	3	3	...	11	2	1	3	2	1	1	1	1	1	1	...	...	3	...	...	13		
Mediastinum ...	...	...	...	...	...	...	1	...	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1		
Pancreas ...	...	...	...	...	...	2	1	2	...	...	3	2	...	1	...	1	1	1	...	...	...	...	...	...	...	...	5		
Bladder ...	...	...	...	...	...	3	...	1	1	...	5	...	...	...	...	...	4	...	...	1	...	...	...	...	...	...	5		
Prostate ...	...	...	...	...	...	...	...	2	2	...	4	...	...	...	...	2	...	...	...	1	...	1	1	1	...	...	4		
Others ...	2	...	...	...	2	...	1	3	1	...	6	3	...	1	1	1	2	2	1	...	...	1	...	...	...	...	9		
All situations ...	2	...	...	1	8	14	41	45	28	3	83	59	1	5	13	8	13	11	15	8	14	9	8	5	6	7	13	6	142



Metropolitan Boroughs.	Estimated Resident Population. (mid-1936).	Birth rate.	Death rate—		Infantile Mortality per 1,000 births.	Maternal Mortality.						
			Crude.	Adjusted.		Rate per 1,000 live births.			Rate per 1,000 live and still births.			
						Puerperal Sepsis.	Other causes.	Total.	Puerperal Sepsis.	Other causes.	Total.	
<b>WEST DISTRICTS.</b>												
Paddington ...	139,200	13.8	13.0	12.8	72	2.60	2.60	5.20	2.50	2.50	5.00	
Kensington ...	176,100	12.7	12.5	11.7	73	0.4	0.4	0.9	0.4	0.4	0.8	
Hammersmith ...	127,700	15.1	12.5	12.9	60	0.52	1.04	1.56	0.50	1.01	1.51	
Fulham ...	141,300	14.9	12.6	12.7	64	0.95	0.95	1.89	0.92	0.92	1.85	
Chelsea ...	56,500	11.3	13.7	11.6	53	0.00	3.1	3.1	0.00	3.0	3.0	
Westminster...	124,100	8.5	11.1	11.4	66	0.00	0.9	0.9	0.00	0.9	0.9	
<b>NORTH DISTRICTS.</b>												
St. Marylebone ...	92,400	9.8	12.6	12.5	75	0.00	2.21	2.21	0.00	2.15	2.15	
Hampstead ...	90,700	10.4	10.2	9.6	66	2.0	1.0	3.0	1.8	0.91	2.7	
St. Pancras ...	183,900	13.0	13.5	13.8	79	2.1	0.8	2.9	2.0	0.8	2.8	
Islington ...	304,100	15.2	12.4	12.6	61	0.63	1.06	1.69	0.62	1.03	1.65	
Stoke Newington ...	50,350	13.7	11.4	10.9	45	0.00	5.8	5.8	0.00	5.5	5.5	
Hackney ...	209,100	14.4	12.0	12.6	63	0.33	0.99	1.32	0.32	0.96	1.28	
<b>CENTRAL DISTRICTS.</b>												
Holborn ...	34,850	8.3	12.0	12.8	62	0.00	0.00	0.00	0.00	0.00	0.00	
Finsbury ...	60,800	13.8	14.0	15.3	81	1.19	2.38	3.57	1.15	2.30	3.45	
City of London ...	9,100	7.5	11.4	12.6	147	0.00	0.00	0.00	0.00	0.00	0.00	
<b>EAST DISTRICTS.</b>												
<b>Shoreditch ...</b>	<b>85,400</b>	<b>14.9</b>	<b>12.8</b>	<b>14.1</b>	<b>75</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	
Bethnal Green ...	96,900	13.5	12.7	14.3	98	1.52	0.76	2.28	1.46	0.73	2.19	
Stepney ...	207,800	14.7	12.6	14.7	100	0.97	0.65	1.62	0.94	0.62	1.56	
Poplar ...	140,300	15.0	12.5	13.8	72	0.47	1.42	1.89	0.46	1.38	1.84	
<b>SOUTH DISTRICTS</b>												
Southwark ...	152,200	14.8	13.1	—	59	0.44	1.33	1.77	0.43	1.29	1.72	
Bermondsey...	100,400	15.4	12.8	14.6	60	1.28	4.49	5.77	1.26	4.40	5.66	
Lambeth ...	277,500	13.9	12.5	12.4	59	0.26	0.52	0.77	0.25	0.50	0.75	
Battersea ...	145,500	14.6	13.1	12.9	59	1.41	0.94	2.35	1.37	0.91	2.29	
Wandsworth...	343,000	11.5	11.8	11.0	58	0.25	1.52	1.77	0.24	1.48	1.72	
Camberwell ...	229,300	13.9	12.6	12.6	59	0.31	1.88	2.19	0.30	1.82	2.12	
Deptford ...	98,900	15.7	12.2	12.6	50	0.00	0.6	0.6	0.00	0.6	0.6	
Greenwich ...	95,900	13.8	11.4	11.6	49	0.00	0.75	0.75	0.00	0.73	0.73	
Lewisham ...	224,000	13.0	10.8	10.9	55	0.34	1.70	2.04	0.32	1.64	1.97	
Woolwich ...	146,500	13.8	11.2	11.8	59	0.99	1.48	2.47	0.96	1.44	2.40	
<b>LONDON ...</b>	<b>4,141,100</b>	<b>13.6</b>	<b>12.3</b>	<b>—</b>	<b>66</b>	<b>0.75</b>	<b>1.17</b>	<b>1.92</b>	<b>0.72</b>	<b>1.14</b>	<b>1.86</b>	

## PUBLIC MORTUARY, 1936.

## Number of bodies deposited from—

St. Leonard's Hospital ... ..	23
L.C.C. Infectious Disease Hospitals ... ..	2
Undertakers ... ..	158
Other sources ... ..	4
	<hr/>
Total number of bodies deposited ... ..	187
Number of post-mortem examinations performed ... ..	137

In my report for 1934 reference was made to the condition of the Public Mortuary. Although certain of the structural features of the building were discussed during the year under review, and a fan was installed, no action has so far been taken with a view to the provision of a new mortuary.



### III.—INFECTIOUS AND OTHER DISEASES.

During the year 1936 the number of notifications of all infectious diseases (excluding tuberculosis) was 1,681, as compared with 810 for the year 1935. The deaths from notifiable diseases (excluding tuberculosis) during 1936 numbered 146, which figure represents 13·3 per cent. of the total deaths for the Borough. The corresponding number for 1935 was 79 (7·9 per cent. of the total deaths). It should be noted that for the year 1936 the notifications included 975 for measles, and that this disease was not notifiable in previous years. Full particulars of the notified cases, classified according to the time of occurrence, age, and the wards in which they occurred, are given in the table on page 40.

The most noteworthy feature of the year's work in relation to infectious diseases was the prevalence of measles. The epidemic was expected, and adequate measures had been taken in advance to deal with the situation. As was noted in the Report for 1935, measles was made a notifiable disease in Shoreditch by an Order of the Ministry of Health dated 24th June, 1935. Notification is compulsory only in respect of the first case of measles under 5 years of age in each household. This means that the notification figures are of no value for the purpose of estimating the extent of the disease, and it should therefore be emphasised here that the figures for measles which are given in this Report should not be used unless their significance is appreciated. A short time before the epidemic commenced, arrangements were completed with the County Medical Officer of Health for the exchange of information regarding individual patients, and for co-operation in other directions. Temporary additions were made to the infectious diseases staff during the period of the epidemic, and at the peak of the epidemic five whole-time visitors were employed. The arrangements worked very satisfactorily. A fuller description of the epidemic will be found on page 50. It is only necessary to mention here that the outbreak and the measures taken to deal with it imposed a considerable strain on certain members of the staff, and it was due to their loyal co-operation that the results achieved were so satisfactory.

A relatively high incidence was shown by three other diseases, namely, scarlet fever, diphtheria, and dysentery. During the year under review the cases of both scarlet fever, and diphtheria showed a considerable decrease on the corresponding figures for 1935, but the diminution was more marked in the case of diphtheria. Examination of the table on page 40 will indicate that diphtheria showed no definite seasonal

prevalence, but that the number of cases of scarlet fever increased progressively from the first quarter to the fourth. It should be noted that no fewer than 11 (3.9 per cent.) of the 287 scarlet fever cases occurred in persons over the age of 25 years. True scarlet fever is essentially a disease of childhood, but recent work has shown that the clinical condition is not nearly so definite as was thought some years ago, and as a result, scarlatiniform rashes in adults, when accompanied by certain other signs, have not infrequently to be reckoned as true manifestations of scarlet fever. As was the case during 1935 the disease continued to be a mild one ; no deaths occurred from this cause during the year.

Of the 223 notified cases of diphtheria the diagnosis was subsequently revised in respect of 47, so that the total accepted cases for the year was 176—which gives a true attack rate of 2.06 per 1,000 of the population. The number of deaths in these 176 diphtheria cases was 5, which gives a death rate of 0.06 per 1,000 and a case mortality rate of 2.84 per cent. compared with a case mortality of 3.6 per cent. for 1935. Of the 223 patients, 6 (2.7 per cent.) were over the age of 25 years. The reduction of the incidence and mortality of diphtheria is welcome, as the disease is one of the most serious of childhood. In previous reports I have explained the necessity for action during inter-epidemic periods, and the fact that the disease can be very effectively prevented by artificial immunisation.

A noteworthy feature of the history of infectious diseases in various areas during recent years is the prominence achieved by dysentery bacilli of the Sonné type. Although the organism has long been known it was only in 1926 that the first outbreak of an illness due to this cause was described. Nowadays the disease appears to be almost endemic in certain areas. During the year 1936, 51 cases occurred in Shoreditch. A further discussion of these cases appears on page 46.

Attention should be directed to the fact that in 10.8 per cent. of the notified cases of scarlet fever and in 21.1 per cent. of the notified cases of diphtheria the diagnosis was subsequently altered. These percentages may appear to be high, but it should be remembered that the London County Council requires every case to be certified as suffering from one of the notifiable diseases before the Council will remove the patient to one of its infectious hospitals. The result is that the weekly figures of notifications are unduly swollen by the inclusion of patients who obviously require observation in hospital, but who are possibly not suffering from one of the notifiable diseases. It should be noted that during the year 64 per cent. of all notified cases of infectious disease were removed to hospital. When measles cases are left out of consideration this figure becomes 89 per cent.



## SMALLPOX.

No case of smallpox occurred in the Borough during the year 1936.

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

YEAR	CASES NOTIFIED.		
	Shoreditch.	London.	England & Wales.
1929	246	1,905	10,975
1930	788	5,167	11,855
1931	122	1,452	5,665
1932	14	1,133	2,070
1933	29	530	631
1934	2	147	179
1935	—	—	1
1936	—	—	12

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

## VACCINATION ORDER.

The Public Vaccination Officers are :—

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

The Public Vaccinators are :—

- (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 1935.

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 1936.	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 1936.	
				Insusceptible of vaccination.	Certificate of conscientious objection.								
1935.	1	2	3	4	6	7	8	9	10	11	12	13	
1st Jan. to 31st Dec.	North-East	778	132	—	373	26	17	168	34	28	176	391	
	South-West	343	74	—	185	12	7	2	20	43	82	169	
	Other Districts	—	—	—	—	—	—	—	—	—	71	7	
	TOTAL ...	1,121	206	—	558	38	24	170	54	71	329	567	



RETURN showing the number of persons successfully vaccinated and re-vaccinated at the cost of the rates by the Medical Officers of Institutions and the Public Vaccinators during the year ended 30th September, 1936 :—

Name of the 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. A. Morris	—	—	—	—	—
Holborn & Finsbury Institution	Dr. R. T. Taylor	1	4	5	—	—
Shoreditch South-West District.	Dr. N. H. Clubwala	131	79	210	12	—
Shoreditch North-East District.	Dr. L. Statnigrosch	133	41	174	2	—
		265	124	389	14	

#### SCARLET FEVER.

The cases certified numbered 287, of which 31 or 10·8 per cent. were subsequently not regarded as scarlet fever. The actual number of cases was accordingly 256, which gives an attack rate of 3·00 per 1,000 inhabitants.

The age, seasonal and ward distribution of the cases are included in the table on page 40. There were no fatal cases. The number of cases and the attack rates in the Borough and wards are given in the subjoined table :—

(See also table on page 14.)

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 ...	10	8	18	...	...	...	5·20	...	...
Church ...	32	21	53	...	...	...	3·67	...	...
Hoxton ...	22	19	41	...	...	...	2·93	...	...
Wenlock ...	14	17	31	...	...	...	2·24	...	...
Whitmore ...	16	28	44	...	...	...	3·34	...	...
Kingsland ...	4	9	13	...	...	...	1·54	...	...
Haggerston...	7	9	16	...	...	...	1·73	...	...
Acton ...	20	20	40	...	...	...	4·24	...	...
Total ...	125	131	256	...	...	...	3·00	...	...
London ...	...	...	10,826	...	...	42	2·57	0·01	0·39

The number of cases in Shoreditch was less than in 1935, in which year there were 306 cases with an attack rate of 3.46.

The following table gives particulars regarding scarlet fever for Shoreditch, London, and England and Wales for a period of years:—

SCARLET FEVER.

Year	Shoreditch.				London		England & Wales	
	Cases notified	Case rate	Deaths	Death rate	Case rate	Death rate	Case rate	Death rate
1920	513	5.3	5	0.04	5.0	0.05	3.19	0.04
1921	917	8.7	7	0.06	7.3	0.06	3.64	0.03
1922	337	3.2	6	0.07	3.8	0.07	2.85	0.04
1923	391	3.7	6	0.06	2.2	0.02	2.24	0.03
1924	366	3.4	2	0.02	2.5	0.02	2.16	0.02
1925	485	4.5	5	0.04	2.7	0.03	2.36	0.03
1926	432	4.0	4	0.04	2.7	0.02	2.10	0.02
1927	383	3.7	3	0.03	2.9	0.01	2.16	0.02
1928	457	4.6	3	0.03	3.4	0.02	2.61	0.02
1929	314	3.2	3	0.03	3.6	0.02	3.05	0.02
1930	384	3.9	1	0.01	3.8	0.02	2.76	0.02
1931	263	2.7	0	0.00	2.8	0.02	2.05	0.01
1932	419	4.4	6	0.06	3.3	0.02	2.12	0.01
1933	567	6.1	0	0.00	5.1	0.02	3.21	0.02
1934	306	3.5	2	0.02	2.6	0.01	3.76	0.02
1935	364	4.0	2	0.02	4.3	0.02	2.96	0.01
1936	256	3.0	0	0.00	2.6	0.01	2.53	0.01

The disease continued to be of the mild type which is now prevalent in this country. This mildness has changed the whole problem of scarlet fever. In past years it was a killing disease, comparable in severity with diphtheria, and treatment in hospital was therefore very desirable. Yet the disease still tends to produce lasting effects as a result of complications—though these, fortunately, have been reduced by the adoption of serum treatment in suitable cases. From the administrative point of view the problem of scarlet fever is now largely one of correct diagnosis and the search for missed cases.

The effect of seasonal incidence was not marked during the year. There was a slight increase in the incidence of the disease during the fourth quarter.

During the year all the notified cases except 4 were removed to hospital. This high hospitalization rate seems worthy of special mention.

*Return cases.*—Returned cases are defined as “cases occurring in the same house or elsewhere within a period of not less than twenty-four hours, or not more than twenty-eight days after return or release from isolation.” During the year only 1 case was considered to come in this category.

Although a skin test for scarlet fever (the Dick test) is now well established, and although specific immunization can now be effected with considerable success, these procedures are more suitable for hospital experience than for use in the general population. This is due largely to the fact that, although scarlet fever is a specific disease, it is difficult to differentiate it from certain other conditions which are due to closely allied organisms. Consequently specific immunization is not as useful as it is in diphtheria. During the year there was no clinic for this work in the Borough.

#### DIPHThERIA.

The number of cases notified during the year was 223, of which 47, or 21·1 per cent., were subsequently not regarded as being cases of diphtheria. The actual number of cases for the year was thus 176, which gives an attack rate of 2·06 per 1,000 inhabitants. In 1935 the number of cases was 252 and the attack rate was 2·85. The age, seasonal incidence and ward distribution of the cases are given in the table on page 40. The number of deaths was 5—two of males and three of females. This gives a death rate of 0·06 per 1,000 inhabitants and a case mortality of 2·84. The deaths occurred in the following age groups :

Up to 2 years, 1 ; 2-5 years, 1 ; 5-10 years, 2 ; 10-15 years, 1.

The following table gives particulars regarding diphtheria for Shoreditch, London, and England and Wales for a period of years:—

Year	Shoreditch				London		England & Wales	
	Cases notified	Case rate	Deaths	Death rate	Case rate	Death rate	Case rate	Death rate
1920	401	3·9	26	0·25	3·0	0·22	1·86	0·15
1921	584	5·8	40	0·38	3·7	0·25	1·76	0·13
1922	439	4·1	27	0·26	3·4	0·25	1·37	0·11
1923	365	3·4	13	0·12	2·3	0·13	1·05	0·07
1924	381	3·6	15	0·14	2·3	0·12	1·07	0·06
1925	440	4·1	17	0·16	2·7	0·07	1·23	0·07
1926	372	3·5	12	0·12	2·9	0·12	1·31	0·08
1927	467	4·5	12	0·11	2·7	0·09	1·33	0·07
1928	354	3·5	13	0·13	2·7	0·09	1·55	0·08
1929	281	2·8	10	0·10	2·7	0·08	1·59	0·09
1930	326	3·3	20	0·20	3·1	0·10	1·84	0·09
1931	288	2·3	7	0·07	1·9	0·06	1·26	0·07
1932	249	2·6	7	0·07	1·9	0·07	1·08	0·06
1933	286	3·1	15	0·16	2·3	0·08	1·18	0·07
1934	288	3·2	13	0·14	2·8	0·11	1·70	0·10
1935	252	2·9	9	0·10	2·2	0·06	1·60	0·09
1936	176	2·1	5	0·06	1·7	0·05	1·39	0·08

The number of cases, the deaths amongst males and females and the attack, death and case 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 ...	...	3	3	...	...	...	0·87	...	...
Church ...	13	17	30	...	...	...	2·08	...	...
Hoxton ...	14	18	32	...	1	1	2·29	...	3·12
Wenlock ...	13	21	34	...	...	...	2·46	...	...
Whitmore ...	15	12	27	1	1	2	2·05	...	7·41
Kingsland ...	11	5	16	1	...	1	1·90	...	6·25
Haggerston ...	6	16	22	...	1	1	2·53	...	4·55
Acton ...	2	10	12	...	...	...	1·27	...	...
Total ...	74	102	176	2	3	5	2·06	0·06	2·84
London ...	...	...	7,132	...	...	228	1·69	0·05	3·20

During the year the number of bacteriological examinations made in connection with diphtheria was 1,188. In fifteen instances the source of infection, as represented by a previous case in the same household, was established.

*Diphtheria Immunization.*—The desirability of an increase in immunization work, and one of the methods adopted to effect it, was mentioned in the introduction to this section (page 39). At the diphtheria immunization clinic the total number of attendances was 1,257. The number of persons who received the primary Schick test was 207, and of these 143 were naturally immune and were not immunized. During the year 134 of the children completed the course of inoculations and 170 of these were tested and found immune. At the end of the year 100 cases were still under treatment or were awaiting the final Schick test.

In connection with this service I have to thank Dr. McGregor, Sister Pollard, and Miss Heath, of the Sutton Branch of the Voluntary Aid Detachment, for the work which they carried out during the year.

*Diphtheria Carriers.*—Two persistent carriers were referred by the County Medical Officer of Health to the Carrier Clinic for treatment of school children at the Hospital for Sick Children, Great Ormond Street.

#### DYSENTERY.

During the year 1936, notifications were received of 51 cases of dysentery. Forty-five of these were removed to hospital, and in three other cases the patients were in hospital when the disease supervened. Bacteriological confirmation of the presence of the dysentery bacillus in the stools was obtained in 25 cases before the patient went into hospital, and the diagnosis was confirmed in other cases in hospital. Information from the various hospitals to which the patients were sent showed that ten of the notified cases were discharged as not suffering from dysentery.

In every instance the type of organism which was isolated from the stool was the Sonné bacillus.

The monthly distribution of the 51 cases was as follows :—January, 22 ; February, 8 ; March, 7 ; April, 8 ; May, 1 ; July, 1 ; August, 1 ; November, 2 ; December, 1. The cases were therefore sufficiently numerous during the first two or three months of the year to constitute a small local epidemic.

The ages of the patients varies considerably. The youngest notified patient was aged 6 weeks and two were aged 5 months. The oldest patient was 33 years and others were 28, 22 and 13 years, respectively. The ages of the other patients were mostly below 8 years. Twenty-seven of the notified patients were males and 24 were females. In seven instances in which the primary cause was notified as dysentery and the organism was isolated from the stools, examination of the house contacts revealed the fact that at least one of the contacts in each household was carrying the organism. Whenever possible, examination of the stools of all or the majority of the contacts was carried out and investigation was extended to any persons who had been closely in contact with the patients.

From the clinical notes which are available in respect of certain patients, it would seem that in the majority of cases the attack was mild. A proportion of the patients showed blood in the stools during the early phase of the illness and diarrhoea and vomiting were common features.

In every case enquiries were made regarding the diet of the patients, and in certain instances bacteriological examinations were carried out. These investigations elicited nothing of value.

#### ERYSIPELAS.

The cases certified numbered 53, and there were three deaths, 1 male and 2 females. The deaths occurred at the following ages :—

Under 1 year	...	...	...	...	...	2
Between 75 and 85 years	...	...	...	...	...	1

The disease affected all ages, but it was much more frequent in adults than in children. The maximum incidence was in the first quarter of the year.

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

	Per 1,000 inhabitants.		Deaths per 100 cases.
	Attack rate.	Death rate.	
London ... ..	0.44	0.02	4.83
Shoreditch ... ..	0.62	0.04	5.66

Twenty-five cases were removed to hospital, mostly to St. Leonard's, during the course of the year.

### PUERPERAL FEVER AND PUERPERAL PYREXIA.

Two cases of puerperal fever were notified during the year, giving a case rate of 0·02 per 1,000 population. There were no deaths. One case occurred in the practice of a private practitioner, and in the other case a doctor was called in following an abortion. Both cases were removed to hospital.

In the Borough provision is made for consultations under the Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926, and during the year 1936 six such consultations were held.

During the year 23 cases of puerperal pyrexia were notified. Of the 23 cases, 21 were removed to hospital. The final diagnosis in these cases was as follows:—

Breast affections	...	...	...	...	...	...	...	3
Local uterine sepsis	...	...	...	...	...	...	...	2
Local uterine sepsis and cystitis	...	...	...	...	...	...	...	1
Pyelitis	...	...	...	...	...	...	...	3
Pyelitis and cystitis	...	...	...	...	...	...	...	2
Pyelitis and perinephritic abscess	...	...	...	...	...	...	...	1
Retention of lochia	...	...	...	...	...	...	...	2
Retention of placenta	...	...	...	...	...	...	...	1
Incomplete septic abortion	...	...	...	...	...	...	...	1
Bronchiectasis	...	...	...	...	...	...	...	1
Tuberculosis	...	...	...	...	...	...	...	1
Broncho pneumonia	...	...	...	...	...	...	...	1
Lobar pneumonia	...	...	...	...	...	...	...	1
Lacerated cervix and retained membranes	...	...	...	...	...	...	...	1
Local urinary infection	...	...	...	...	...	...	...	1
General constitutional disturbances	...	...	...	...	...	...	...	1

It will be apparent that a considerable proportion of the cases of puerperal pyrexia, although not finally diagnosed as puerperal fever, were due to septic conditions of the generative tract.

### 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.

In about 70 per cent. of cases the infection is gonorrhœal in nature, and in these cases it is usually due to infection from the generative tract during birth. The ideal method of treatment is removal of the child and the mother to hospital.

The following table gives particulars of the cases which occurred during the year :—

Cases.			Vision unimpaired.	Vision impaired.	Died.
Notified.	Treated at home.	In hospital.			
11	8	3	11	Nil reported.	Nil

The three patients who were removed were treated at St. Margaret's Hospital. Of the eight patients treated at home seven attended other hospitals as out-patients. The case rate per 1,000 births was 8.63 as compared with 8.33 for London as a whole.

In addition to these cases of ophthalmia neonatorum 24 cases of inflammation of the eyes were reported by the Medical Officer of Health of the London County Council. Of these five were subsequently notified as ophthalmia neonatorum and are included in the above table.

#### CEREBRO-SPINAL FEVER.

Three cases of this disease occurred in the Borough during the year, all being notified. The patients were males aged 30 and 16 years, and 5 months respectively. These cases were evidently sporadic in nature.

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

	1931	1932	1933	1934	1935	1936
Shoreditch ... ..	6	6	6	2	2	3
London ... ..	131	131	116	80	73	72

The patient aged 5 months succumbed 4 days after notification, the cause of death being certified as meningococcal meningitis and Sonné dysentery.

#### ENCEPHALITIS LETHARGICA.

No new cases of this disease were notified during the year. It is well known that the after effects of this disease present numerous administrative difficulties. At the end of the year 25 patients who were suffering from post-encephalitic symptoms were living in the Borough. There were four deaths of patients who were suffering from post-encephalitic symptoms.

## ACUTE ANTERIOR POLIOMYELITIS.

No case of this disease was notified during the year. There was one death from this disease, a male aged 3 years; the condition was not notified during life.

Children of school age attend Hoxton House Centre for physical defectives, where they are kept under observation and referred to hospital where necessary. The Invalid Children's Aid Association also renders valuable assistance in assisting parents with the purchase of appliances which may be necessary for the correction of deformities.

## PNEUMONIA.

The Ministry of Health Regulations of 1919 made two forms of pneumonia compulsorily notifiable, viz., acute primary pneumonia and acute influenzal pneumonia. During the year under review the number of notifications of pneumonia received was 48, of which 31 were in respect of the primary and 17 of the influenzal type.

The attack rate for the two varieties, based on the notifications received, was 0.36 and 0.20, as compared with 0.38 and 0.06 for 1935.

The number of deaths from pneumonia of all types was 93, which gives a death rate of 1.09 per 1,000. It will be apparent that during the year under review influenza contributed very little to the causes of death.

The table on page 40 shows that the cases of acute primary pneumonia were distributed more or less evenly throughout all the age groups. The highest incidence was in the first quarter, but there was also a high incidence in the fourth quarter.

Of the 48 cases of pneumonia brought to the notice of this department, 18 received treatment in St. Leonard's Hospital, and 4 in the Archway Hospital. In addition to the 48 cases, 35 cases of pneumonia of types which are not notifiable were visited by members of The District Nursing Association, who paid in all 640 visits to pneumonia cases.

## ANTHRAX.

No case of this disease was notified during the year.

## MEASLES.

The deaths from measles during 1936 numbered 41, and occurred in the following age groups—under 1 year, 7; between 1 and 2 years, 24; between 2 and 5 years, 8; between 5 and 10 years, 2. Measles was responsible for 24.5 per cent. of all deaths of children under 5 years of age. Of the 41 deaths, 37 occurred in hospital.



The following table shows the numbers of deaths from measles in age groups for a period of years :—

Year.	Under 1.	1 and under 2.	2 and under 5.	5 and under 10.	10 and under 15.	Total deaths.
1927	2	4	1	—	—	7
1928	9	28	19	3	—	59
1929	4	6	7	—	—	17
1930	13	25	8	3	—	49
1931	8	11	6	1	—	26
1932	13	29	16	2	—	60
1933	1	4	2	—	—	7
1934	5	15	8	1	—	29
1935	—	—	—	—	—	—
1936	7	24	8	2	—	41

A comparison of the death rates from measles for Shoreditch, London, and England and Wales is given below :—

Year.	Shoreditch.		London. Death rate.	England and Wales. Death rate.
	Deaths.	Death rate.		
1920	50	0·49	0·22	0·19
1921	18	0·17	0·05	0·06
1922	84	0·81	0·34	0·15
1923	23	0·21	0·08	0·14
1924	58	0·55	0·29	0·12
1925	34	0·32	0·07	0·14
1926	25	0·23	0·20	0·09
1927	7	0·09	0·04	0·09
1928	59	0·59	0·30	0·11
1929	17	0·17	0·05	0·09
1930	49	0·59	0·23	0·11
1931	26	0·26	0·03	0·08
1932	60	0·63	0·19	0·09
1933	7	0·07	0·02	0·05
1934	29	0·32	0·20	0·09
1935	0	0·00	0·00	0·03
1936	41	0·48	0·14	0·07

In my report for 1935 the provisions of the Shoreditch (Measles) Regulations, 1935, were given. These regulations provide that every medical practitioner, as soon as he becomes aware that a child under five years of age is suffering from measles, shall, provided that it is the first case in the household, forthwith send a notification to the Medical Officer of Health.

The following table shows the number of accepted notifications during the quarters March, June, September and December of 1936, and the number of these cases removed to hospital.

## CASES NOTIFIED UNDER REGULATIONS.

Quarter 1936	Under 1	1 and under 2	2 and under 3	3 and under 4	4 and under 5	Total	Cases removed
March	48	88	103	135	192	566	241
June	34	91	85	89	94	393	186
Sept.	3	5	—	1	2	11	9
Dec.	1	2	—	1	1	5	3
	86	186	188	226	289	975	439

The ward distribution of the notified cases is given in the table below :—

Ward.	Number of cases.		Total.
	Male.	Female.	
Moorfields ... ..	11	23	34
Church ... ..	97	103	200
Hoxton ... ..	81	48	129
Wenlock ... ..	69	59	128
Whitmore ... ..	78	78	156
Kingsland ... ..	59	51	110
Haggerston ... ..	44	52	96
Acton ... ..	63	59	122
Total ... ..	502	473	975

The measles epidemic commenced in some parts of London in November, 1935, but did not occur in Shoreditch in epidemic proportions until January, 1936.

In order to ensure the visiting of every possible case or suspect, a letter was sent to the medical practitioners resident in the borough and neighbouring districts asking for their co-operation. This resulted in many secondary cases coming to the knowledge of the department. Measles advice leaflets were distributed to schools in the borough and in the Council's welfare centres and posters were also exhibited throughout the borough.

Provisional information is now available for the whole period of the epidemic, viz., from the beginning of January until the end of August, 1936. It will be noticed that the number of actual cases is naturally greatly in excess of the number of notifications.

The following table gives the age distribution of the cases and the deaths :—

Ages	Under 1	1 and under 2	2 and under 3	3 and under 4	4 and under 5	5 and under 6	6 and under 7	7 and under 8	8 and under 14	14 and over	Total.
No. of cases	149	329	325	363	425	334	172	53	28	5	2,182
No. of deaths	7	24	4	3	1	1	—	—	1	—	41

The following table shows the occurrence of the cases month by month:—

Week ending.	No. of actual cases.	No. removed to hospital.	Week ending.	No. of actual cases.	No. removed to hospital.
January 4	1	1	May 2	77	27
„ 11	11	2	„ 9	70	17
„ 18	13	2	„ 16	46	11
„ 25	12	3	„ 23	25	11
February 1	39	7	„ 30	23	9
„ 8	80	24	June 6	14	4
„ 15	64	17	„ 13	14	7
„ 22	132	49	„ 20	12	3
„ 29	123	41	„ 27	8	1
March 7	194	54	July 4	5	1
„ 14	190	70	„ 11	2	1
„ 21	205	76	„ 18	2	1
„ 28	279	116	„ 25	—	—
April 4	197	65	August 1	2	—
„ 11	158	67	„ 8	—	—
„ 18	93	42	„ 15	1	—
„ 25	87	28	„ 22	2	1
			„ 29	1	—
			Totals	2,182	758

The figures for notifications and deaths show that the epidemic was of considerable magnitude. I am, nevertheless, convinced that the scheme of control which was adopted was instrumental in reducing the extent and severity of the complications which are such an unfortunate feature of this disease.

In order to ensure the effective follow-up of cases and the discovery of secondary cases, five whole-time nurses were temporarily employed during the period of the epidemic; each nurse being retained for approximately four months. The first visits to the homes of all suspects and cases by these nurses numbered 2,790, the total visits (including re-visits) being 7,283. During the epidemic the district nursing association paid 780 visits to 62 cases in which nursing was requested by the practitioners in attendance.

The County School Medical Officer again instituted a scheme of control which facilitated close co-operation between the school nursing staff and the special staff which was employed by the Borough Council. This scheme enabled home and school contacts to remain at school under the supervision of the school nurses. The measles visitors met the school nurses daily and received from them the names of absentees and suspects; in this way any undue delay in visiting was prevented.

The scheme of control was put into operation in no fewer than twenty of the twenty four schools in the Borough, and the provisions of the scheme had to be re-applied in two schools owing to further outbreaks. As can be seen the scheme worked extremely well in Shoreditch and a noteworthy feature was the close co-operation which existed between the measles visitors and the school nursing staff.

In this connection the following table furnished by the School Medical Officer regarding absentees and suspects reported by the school nurses to the Borough Medical Officer of Health shows the results of the work required by the scheme:—

	Home contacts.	Other cases.	Total.
1. No. of children excluded by nurse as suffering from measles ... ..	1	5	6
2. No. of children referred to in (1) who were subsequently confirmed as cases of measles ...	1	5	6
3. No. of children excluded by nurse with signs indicating the possible onset of measles, such as coryza ... ..	10	159	169
4. No. of children referred to in (3) who subsequently proved to be cases of measles ... ..	5	67	72
5. No. of children reported to Borough Medical Officer of Health or Divisional Officer whose cause of absence was suspected to be measles...	103	715	818
6. No. of children referred to in (5) who subsequently proved to be cases of measles ... ..	30	241	271
7. No. of children reported to Borough Medical Officer of Health or Divisional Officer whose cause of absence was unknown ... ..	—	305	305
8. No. of children referred to in (7) who subsequently proved to be cases of measles ... ..	—	73	73
9. Total No. of home contacts who were kept under special supervision in school ... ..			703

#### WHOOPING COUGH.

As this disease is not notifiable in Shoreditch, the actual number of cases cannot be ascertained. It is apparent, however, from the number of deaths, viz., 8, that there was no considerable outbreak of the disease in the Borough.

The ages of death are given in the following table:—

Under 1 year	1-2 years.	2-5 years.	Total.
4	2	2	8

The death rate from this disease was 0.09. The deaths in London as a whole numbered 273, the death rate being 0.07. The number of cases removed to London County Council hospitals during the year was 108.

The following table gives comparative annual figures for mortality from whooping cough.

WHOOPING COUGH.

Year.	Shoreditch.		London. Death rate.	England and Wales. Death rate.
	Deaths.	Death rate.		
1920	12	0·11	0·17	0·12
1921	19	0·18	0·12	0·12
1922	27	0·26	0·25	0·17
1923	10	0·09	0·09	0·11
1924	28	0·26	0·11	0·10
1925	29	0·27	0·19	0·16
1926	0	0·00	0·05	0·11
1927	24	0·22	0·12	0·09
1928	5	0·05	0·09	0·08
1929	40	0·40	0·26	0·16
1930	3	0·04	0·03	0·05
1931	11	0·11	0·07	0·06
1932	4	0·04	0·08	0·07
1933	14	0·15	0·08	0·06
1934	12	0·13	0·07	0·05
1935	4	0·04	0·04	0·04
1936	8	0·09	0·07	0·05

INFLUENZA.

The year 1936 was not an influenza year. Ten deaths occurred from this disease, which gives a death rate of 0·12. The following table gives comparative annual figures for mortality from influenza.

Year.	Shoreditch.		London. Death rate.	England and Wales. Death rate.
	Deaths.	Death rate.		
1920	51	0·50	—	0·28
1921	27	0·26	0·23	0·24
1922	69	0·66	0·57	0·56
1923	14	0·13	0·17	0·22
1924	28	0·26	0·37	0·49
1925	19	0·18	0·24	0·33
1926	25	0·23	0·18	0·23
1927	25	0·24	0·40	0·57
1928	16	0·16	0·13	0·20
1929	68	0·68	0·71	0·73
1930	1	0·01	0·08	0·13
1931	23	0·23	0·25	0·36
1932	19	0·19	0·28	0·33
1933	45	0·48	0·52	0·57
1934	6	0·07	0·12	0·14
1935	14	0·16	0·11	0·18
1936	10	0·12	0·13	0·15

The following table gives the age distribution of the 10 persons who died from influenza during 1936 :—

Under 1 year.	1— year.	5— years.	15— years.	25— years.	35— years.	45— years.	55— years.	65— years.	75— years.
—	—	—	1	—	1	—	2	4	2

From general information in the possession of the Health Department it would appear that the prevailing type of influenza was mild.

#### DIARRHŒA AND ENTERITIS.

During the year 28 deaths of children under two years of age from diarrhœa and enteritis, along with associated and other conditions, were reported. This gives a death rate of 0·33 per 1,000 population and 21·98 per 1,000 births. These figures for Shoreditch and for London respectively are given along with the corresponding figures for children under one year of age in the following table :—

	Deaths under two years.						Deaths under one year.							
	Total number.		Rate per 1,000 population		Rate per 1,000 births.		Total number.		Rate per 1,000 population		Rate per 1,000 births.		Percentage of deaths under 1 yr.	
	1935.	1936.	1935.	1936.	1935.	1936.	1935.	1936.	1935.	1936.	1935.	1936.	1935.	1936.
London ...	622	823	0·15	0·20	11·2	14·5	583	785	0·14	0·19	10·4	13·95	18·1	20·9
Shoreditch	10	28	0·11	0·33	7·6	21·98	9	25	0·10	0·29	6·9	19·60	13·4	25·3

The disease "diarrhœa and enteritis" occurring in children under two years of age is often termed "summer diarrhœa." True summer diarrhœa is, however, a disease which occurs towards the latter end of a hot summer and persists during the early autumn. The frequency of this condition bears very little relation to the actual numbers of deaths certified as due to "diarrhœa and enteritis." This statement is borne out by the following table, which shows the actual numbers of deaths which were certified as due to enteritis and other conditions respectively in the six years 1931–1936 :—

	1931.	1932.	1933.	1934.	1935.	1936.
Enteritis ... ..	20	13	11	19	5	14
Broncho-pneumonia and enteritis	7	4	2	4	—	7
Bronchitis and enteritis ...	2	1	3	4	3	3
Marasmus and enteritis ...	4	3	2	1	—	1
Convulsions and enteritis ...	—	1	—	1	1	—
Prematurity or debility from birth and enteritis ... ..	—	—	—	1	—	1
Skin conditions and enteritis ...	—	1	—	—	—	—
Other conditions and enteritis...	—	3	4	1	1	2
Percentage of true enteritis ...	33 60·6	26 50·0	22 50·0	31 61·3	10 50·0	28 50·0

The deaths which were certified as due to enteritis alone were possibly not associated with any other condition, but in all the other instances the enteritis was probably a complication of the primary condition which is stated in the table. It is seen that true enteritis cases make up approximately 50 to 60 per cent. of all deaths due to diarrhoea and enteritis which are certified in any one year.

The following table shows the monthly incidence of the deaths of true enteritis in the six years 1931–1936. The table shows that the seasonal incidence in these small samples was quite unimportant apart from the fact that a slightly larger number of deaths occurred in July, 1931. The conclusion that must be drawn from these figures is that deaths which are certified as being due to diarrhoea and enteritis are not due to typical epidemic (summer) diarrhoea, which is essentially a disease of the late summer and early autumn.

True Enter- itis.	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	TOTAL
1931	—	1	1	1	2	1	5	2	3	2	1	1	20
1932	1	—	3	3	—	1	—	1	—	2	1	1	13
1933	1	—	1	—	1	—	—	1	2	2	2	1	11
1934	1	3	4	—	3	1	—	1	2	1	—	3	19
1935	1	—	—	—	1	1	—	—	1	1	—	—	5
1936	2	3	2	—	1	1	1	—	2	—	—	2	14

As was mentioned on page 30 the increased incidences of diarrhoea and enteritis during 1936 was in part responsible for the increase in the infant mortality rate for that year.

## 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.
Measles ... ..	1,174
Scarlet fever ... ..	336
Diphtheria ... ..	290
Chicken pox ... ..	299
Whooping cough ... ..	231
Mumps ... ..	182
Dysentery ... ..	19
Scabies ... ..	95
Impetigo ... ..	44
Erysipelas ... ..	2
Other exclusions ... ..	123
	<hr/>
	2,795
	<hr/>

## FACTORY AND WORKSHOP ACT.

It was not found necessary to serve any notice under Sections 108 or 110 of the Factory and Workshop 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 has an agreement with the Borough Council under which the following types of cases are nursed under medical direction in consideration of a payment of 1s. 4d. per visit:—(i) cases referred by the Medical Officer of Health, (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.



Below is a list of cases nursed under this agreement during the year 1936:—

In addition to the cases referred to in the table, the District Nurses paid a number of visits to otorrhœa cases as a result of the closing down of the otorrhœa clinic. These cases are referred to in another section of this Report (*see* page 99).

Disease.	Under 5	Visits.	Disease.	Over 5	Visits.
Abscess ... ..	3	38	Abortion ... ..	3	33
Abdominal ... ..	1	2	Ante-natal conditions ...	7	76
Burn of leg ... ..	1	28	Enlarged breasts ... ..	1	7
Bronchitis... ..	19	211	Influenza ... ..	6	81
Broncho-pneumonia ...	7	109	Influenza and pneumonia	2	20
Circumcision ... ..	4	27	Mastitis ... ..	2	18
Chest condition ... ..	1	1	Measles ... ..	6	65
Chicken-pox ... ..	1	4	Measles and pneumonia	2	104
Conjunctivitis ... ..	1	3	Miscarriage ... ..	7	81
Discharging eyes ... ..	14	221	Parturition ... ..	17	134
Excision of eye ... ..	2	7	Post-natal condition ...	6	62
Eczema of head ... ..	1	39	Post-partum condition ...	2	24
Face wound ... ..	1	6	Pneumonia ... ..	11	201
Influenza ... ..	2	21	Puerperal pyrexia ... ..	1	16
Intestinal ... ..	8	73	Tuberculosis ... ..	10	674
Impetigo ... ..	16	309			
Lobar pneumonia ... ..	1	8			
Measles ... ..	42	394			
Measles and pneumonia ...	13	206			
Neo-natal condition ... ..	14	126			
Ophthalmia neonatorum	3	24			
Pemphigus ... ..	4	44			
Pertussis ... ..	2	16			
Pertussis and bronchitis...	1	8			
Pneumonia ... ..	8	140			
Pleurisy ... ..	1	8			
Phimosis ... ..	1	5			
Renal sarcoma ... ..	1	13			
Septic throat ... ..	1	10			
Septic finger ... ..	2	12			
Septic thumb ... ..	1	7			
Sores on head ... ..	1	4			
Sores on face ... ..	1	1			
Stomatitis... ..	1	10			
Swollen glands ... ..	1	8			
Threadworms ... ..	31	166			
Tonsils and adenoids ... ..	46	204			
Tuberculosis ... ..	1	3			
Vaginal discharge ... ..	1	31			
TOTALS ... ..	260	2,547	TOTALS ... ..	83	1,596

#### BACTERIOLOGICAL EXAMINATIONS.

With the exception of those carried out at the Tuberculosis Dispensary, all the examinations made on behalf of the Borough Council are performed by Dr. F. H. Teale

at the University College Hospital Medical School, and the following is a summary of the work done by him for the Borough:—

Swabs for <i>B. diphtheriae</i> ... ..	1,175
Swabs for virulence test ... ..	3
Sputum for tubercle bacilli ... ..	100
Swabs for gonococci ... ..	35
Blood for Wasserman reaction ... ..	15
Swabs for hæmolytic streptococci and other organisms ...	24
Pus for tubercle bacilli ... ..	1
Blood counts ... ..	21
Blood agglutination test ... ..	1
Stools for infective organisms ... ..	119
Urine „ „ „ ... ..	1
Urine for tubercle bacilli ... ..	3
Routine examination of milk ... ..	84
Milks for <i>Brucella abortus</i> ... ..	5
Maternity outfits (examination for sterility) ... ..	3
Material in bread ... ..	1
Insect in jam ... ..	1
Scrapings of skin for bacteria (Midwife) ... ..	1
Canned ham—complete examination—animal inoculation ...	2
„ „ complete examination ... ..	6
Meat pie ; examination and inoculation ... ..	1
Vomit ; complete examination ... ..	1
	1,603

Examinations by Bacteriologists other than Dr. Teale :—

Swabs for <i>B. diphtheriae</i> ... ..	10
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#### FOOD POISONING.

During the year two notifications of suspected food poisoning were received. Both of these cases appeared to be minor gastric disturbances, possibly due to dietetic indiscretions.

#### DISINFECTION.

The premises disinfected numbered 1,018. The articles removed to the Borough Council's Disinfecting Station totalled 9,643, and included 866 beds, 305 mattresses, 1,890 pillows, 456 bolsters and 6,126 other articles such as sheets, blankets, quilts, curtains, carpets, clothing and the like. For further particulars regarding the disinfection station, see page 166.

#### DISINFECTING STATION.

Consequent upon the proposed extension of the Town Hall which necessitated the use of the land at the rear of this building, it became necessary during the year to

acquire a new site for the disinfecting station. A suitable site was acquired in Alfred Place which is bounded on one side by the Regents Canal and a new building was erected and the existing plant was removed thereto. The new building which comprises a boiler house, containing two disinfectors and boilers, drying room, office and garage for disinfecting vans, was taken over in August 1936.

#### SHELTER.

It was not found necessary to remove any contacts to the Shelter which is provided under Section 195, sub-section 4, of the Public Health (London) Act, 1936.

#### 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 is 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 20 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 six years is as follows :—

1931	...	80	1934	...	36
1932	...	37	1935	...	22
1933	...	45	1936	...	35

#### IV.—TUBERCULOSIS.

The result of the year's work in connection with tuberculosis must be regarded as very satisfactory. There was a marked decrease in the number of notifications, especially in respect of pulmonary tuberculosis in males. The case rate for all forms of tuberculosis fell from 1.53 in 1935 to 1.36 in 1936, and a noteworthy feature was the decline in the incidence of non-pulmonary tuberculosis from 0.31 in 1935 to 0.24 in 1936. The death rates give information which is more reliable and it will be noted from the tables that the death rate for all forms of tuberculosis has been approximately halved in the last ten years. This marked reduction in the rate for an industrial area like Shoreditch is a matter of considerable satisfaction. The death rate from all forms of tuberculosis for 1936 is 0.71 per 1,000 of the population. This rate is considerably lower than that for London as a whole, though still slightly in excess of that for England and Wales. The deaths for the pulmonary type of the disease also showed a considerable decrease, viz., 0.72 in 1935 to 0.58 in 1936.

The decrease in the incidence of all forms of tuberculosis is apt to obscure the fact that the non-pulmonary form of the disease is still a cause of much long-standing illness, of crippling, and of many deaths. During the year 1936, 20 notifications of non-pulmonary tuberculosis were received, and in addition another 13 cases came to the notice of the medical officer of health other than by formal notifications. This disease caused the death of 11 persons during the year.

Another regrettable feature of the trend of tuberculosis at the present time is the high incidence of the disease among young adults. During the year 1936 the number of cases of tuberculosis between the ages of 15 and 25 years which came to the notice of the medical officer of health was as follows:—males 14, females 18. The total number of new cases for the year was 87 males and 74 females, so that 19.9 per cent. of the new cases occurred in persons between the ages of 15 and 25 years. I have in previous reports referred to the grave problem created by this high incidence of the disease in young adults and especially in young adult females in the country as a whole.

The general decrease in the incidence of tuberculosis in the Borough is probably an expression of the general downward trend which is occurring in many parts of the country, but there is no gainsaying the fact that the incidence of the disease is influenced very largely by economic factors and by the social conditions which they induce. In the case of Shoreditch the last few years has seen a thinning out of the population. The density per acre has fallen gradually from 141 in 1933 to 129 in 1936. Apart altogether from this general decrease in density and improvement in housing conditions of the inhabitants as a whole, there has been during the last few years an increasing co-operation between the London County Council and the Borough Council. So far as the amelioration of conditions of individual patients is concerned the County Council has given great assistance in the provision of better housing accommodation for patients.

In my report for 1935 mention was made of the investigation which was being carried out by Dr. F. Ridehalgh, working at the Royal College of Physicians under the auspices of the Proffit Trust. During 1936 Dr. Ridehalgh continued to investigate contacts between the ages of 15 and 25 years. For this work a separate clinic is held every six weeks, and the investigations include the carrying out of tuberculin tests and the radiological investigations of the contacts. The cost of the work is borne by the Proffit Trust.

#### STATISTICS.

The total number of cases on the tuberculosis register on 31st December, 1936, was 1,476, as compared with 1,538 at the corresponding period of the previous year this represents a decrease of 62 cases.

There were added to the register during the year, on account of fresh notifications and inward transfers, 151 names. On account of cancellations, as a result of death, removal from the area, cure, or change in diagnosis, 213 names were removed from the register (*see table on page 65*).

#### NOTIFICATIONS.

During the year there were received notification of 96 cases of pulmonary and 20 cases of non-pulmonary tuberculosis, making a total of 116 cases, of which 61 were males and 55 females. This represents a decrease of 12 in the number of notifications of pulmonary disease, and a decrease of 7 in the number of cases of non-pulmonary disease. Compared with the average for the previous five years these figures represent a decrease of 40 in pulmonary and a decrease of 9 in non-pulmonary tuberculosis. Of the total cases, 18 were notified by private practitioners and 98 by medical officers of institutions.

From the point of view of age grouping it is found that 6.3 per cent. of the total notifications of pulmonary tuberculosis which were received were in respect of children under 15 years and 93.7 per cent. were in respect of persons over 15 years, the corresponding figures for 1935 being 11.1 per cent. and 88.9 per cent. respectively. As regards non-pulmonary tuberculosis 50.0 per cent. were children under 15 years and 50.0 per cent. were individuals over 15 years. The corresponding figures for the previous year were 55.6 per cent. and 44.4 per cent., respectively.

The following table gives details regarding the ages of notification of pulmonary and non-pulmonary cases respectively :—

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	—	—	—	—	9	3	6	10	14	6	3	51	84
„ females	1	—	3	2	7	5	6	6	6	6	3	45	64
Non-pulmonary, males	1	—	4	—	—	3	1	1	—	—	—	10	13
„ females	—	2	2	1	1	—	2	1	1	—	—	10	10

The supplementary table gives the age grouping of cases of tuberculosis which came to the notice of the Medical Officer of Health, otherwise than by formal notifications, during the year 1936 :—

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	3	4	—	—	1	11
„ females	—	—	—	—	—	6	4	—	1	—	—	11
Non-pulmonary, males	1	2	2	—	—	—	—	—	—	—	—	5
„ females	2	2	1	1	—	1	1	—	—	—	—	8

The source of information in respect of these 35 cases is also given in tabular form :—

SOURCE OF INFORMATION AS TO THE ABOVE-MENTIONED CASES.	No. of Cases.	
	Pulmonary.	Non-pulmonary.
Death returns { from local registrars ... ..	2	—
{ transferable deaths from Registrar-General	1	6
Posthumous notifications ... ..	1	—
“ Transfers ” from other areas (other than transferable deaths) ... ..	18	7
Other sources (if any) ... ..	—	—
Total	22	13
Pulmonary and non-pulmonary		35

Further particulars regarding the notifications, with the reason for removal of cases from register, is given in the following table :—

#### NOTIFICATION REGISTER.

Number of cases of tuberculosis remaining on the Register at the 31st December, 1936 ... ..	Pulmonary.			Non-pulmonary.			Total Cases.
	Males.	Fe-males.	Total.	Males.	Fe-males.	Total.	
	567	506	1073	217	186	403	1476
Number of cases removed from the Register during the year by reason <i>inter alia</i> of :—							
1. Withdrawal of notification ...	3	6	9	0	0	0	9
2. Recovery from the disease ...	16	10	26	4	7	11	37
3. Death ... ..	43	26	69	5	7	12	81

The distribution of the cases notified (primary notification) in the different wards is as follows:—

Ward.	Pulmonary.	Non-pulmonary.	Total.	Rate per 1,000 population.
Moorfields ...	4	2	6	1·8
Church ...	22	5	27	1·9
Hoxton ...	14	1	15	1·1
Wenlock ...	14	2	16	1·2
Whitmore ...	17	3	20	1·5
Kingsland ...	7	—	7	0·8
Haggerston ...	12	4	16	1·8
Acton ...	6	3	9	0·9
Totals ...	96	20	116	1·4

In addition to the notifications summarized on Form T. 137, 1936, on page 64, 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 (see p. 70).

#### DEATHS.

The total deaths from tuberculosis of all types during the year numbered 61, of which 35 were males and 26 females. In the previous year the total number was 76, of which 51 were males and 25 females. Of the total deaths from tuberculosis, the pulmonary form of the disease accounted for 50, or 82·0 per cent., and the non-pulmonary form for 11, or 18·0 per cent. The death rate from pulmonary tuberculosis was 0·58 and from non-pulmonary 0·13, making a total death rate from all forms of the disease of 0·71. The corresponding figures for 1935 were, pulmonary 0·72, non-pulmonary 0·14, a total of 0·86. The average death rates for the five years 1931–1935 in respect of pulmonary tuberculosis, non-pulmonary tuberculosis and all forms of tuberculosis, respectively, were 0·89, 0·11 and 1·00. The figures for 1936, therefore, represent a decrease of 0·31 in the pulmonary and an increase of 0·02 in the non-pulmonary rate, making a decrease for all forms of the disease of 0·29 compared with average of those years.



The following tables show the incidence of cases of tuberculosis and of deaths from that disease for a number of years for Shoreditch, London and England and Wales respectively :—

NOTIFICATIONS PER 1,000 POPULATION.

Year.	Shoreditch.			London.			England and Wales.		
	Pul.	Non-pul.	All forms.	Pul.	Non-pul.	All forms.	Pul.	Non-pul.	All forms.
1925	2.28	0.57	2.85	1.64	0.45	2.09	1.49	0.49	1.98
1926	2.12	0.58	2.70	1.50	0.45	1.95	1.43	0.47	1.90
1927	1.77	0.50	2.27	1.50	0.42	1.92	1.37	0.45	1.82
1928	2.03	0.53	2.56	1.51	0.41	1.92	1.34	0.45	1.79
1929	2.18	0.36	2.54	1.60	0.37	1.97	1.32	0.42	1.74
1930	1.79	0.41	2.20	1.49	0.34	1.83	1.26	0.42	1.68
1931	1.66	0.38	2.04	1.45	0.32	1.77	1.24	0.40	1.64
1932	1.25	0.27	1.52	1.40	0.31	1.71	1.16	0.38	1.54
1933	1.68	0.32	2.00	1.37	0.29	1.66	1.10	0.35	1.45
1934	1.45	0.29	1.74	1.40	0.21	1.61	1.19	0.40	1.59
1935	1.22	0.31	1.53	1.27	0.27	1.54	0.97	0.31	1.28
1936	1.12	0.24	1.36	1.25	0.25	1.50	0.96	0.30	1.26

DEATH RATES PER 1,000 POPULATION.

Year.	Shoreditch.			London.			England and Wales.		
	Pul.	Non-pul.	All forms.	Pul.	Non-pul.	All forms.	Pul.	Non-pul.	All forms.
1925	1.10	0.30	1.40	0.80	0.20	1.00	0.83	0.21	1.04
1926	1.20	0.20	1.40	0.80	0.10	0.90	0.77	0.19	0.96
1927	0.82	0.25	1.07	0.91	0.14	1.05	0.79	0.18	0.97
1928	1.20	0.16	1.36	0.89	0.14	1.03	0.76	0.17	0.93
1929	0.98	0.18	1.16	0.96	0.13	1.09	0.79	0.17	0.96
1930	0.88	0.13	1.01	0.87	0.12	0.99	0.74	0.16	0.90
1931	0.90	0.10	1.00	0.90	0.13	1.03	0.74	0.15	0.89
1932	0.92	0.13	1.05	0.82	0.12	0.94	0.69	0.15	0.84
1933	0.96	0.09	1.05	0.82	0.11	0.93	0.69	0.13	0.82
1934	0.93	0.11	1.04	0.73	0.10	0.83	0.64	0.13	0.77
1935	0.72	0.14	0.86	0.68	0.09	0.77	0.61	0.11	0.72
1936	0.58	0.13	0.71	0.69	0.09	0.78	0.58	0.11	0.69

TABLE of year of notification of all deaths during 1936.

Year of notification.	Number of deaths in 1936.				Total.	Percentage of total deaths from tuberculosis.	
	Male.		Female.				
	Pul.	Non-pul.	Pul.	Non-pul.			
Died in Borough	1926 ... ..	1	—	—	—	1	1.64
	1929 ... ..	1	—	—	—	1	1.64
	1930 ... ..	2	—	1	—	3	4.92
	1931 ... ..	1	—	2	—	3	4.92
	1932 ... ..	2	—	—	—	2	3.28
	1933 ... ..	1	—	1	—	2	3.28
	1934 ... ..	4	2	1	—	7	11.50
	1935 ... ..	3	—	4	1	8	13.10
	1936 ... ..	2	—	4	—	6	9.82
Died outside Borough	1921 ... ..	—	—	—	1	1	1.64
	1927 ... ..	1	—	—	—	1	1.64
	1931 ... ..	1	—	—	—	1	1.64
	1932 ... ..	—	—	1	—	1	1.64
	1933 ... ..	—	1	2	—	3	4.92
	1934 ... ..	2	—	—	—	2	3.28
	1935 ... ..	2	—	—	—	2	3.28
	1936 ... ..	5	—	2	1	8	13.11
		28	3	18	3	52	85.25
1936 Not notified ... ..	2	2	1	4	9	14.75	
Totals ... ..	30	5	19	7	61	100.00	

DEATHS FROM TUBERCULOSIS IN THE BOROUGH DURING 1936.

	AGES.														DEATHS IN EACH WARD.								SEX.		TOTAL.	DEATHS.											
	Under 1 year.	1 to 2 years.	2 to 5 "	5 to 10 "	10 to 15 "	15 to 20 "	20 to 25 "	25 to 35 "	35 to 45 "	45 to 55 "	55 to 65 "	65 to 75 "	75 and upwards.	Moorfields.		Church.		Hoxton.		Wenlock.		Whitmore.		Kingsland.		Haggerston.		Acton.		Male.	Female.	Not in institutions.	St. Leonards Hospital		Other institutions.		
														M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.		F.	M.	F.	M.				F.	M.	F.	M.	F.
All forms ...	3	—	2	1	1	5	4	10	8	12	9	6	—	5	1	8	5	2	3	5	8	1	1	—	4	6	3	5	35	26	61		14	23	16	—	8
Respiratory system	—	—	—	—	1	3	4	9	7	12	9	5	—	5	1	7	3	2	2	3	3	7	1	1	—	3	5	3	4	31	19	50	13	21	14	—	8
Central nervous system ...	2	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Intestines and peritoneum ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Vertebral column ...	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other bones and joints ...	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Skin and subcutaneous tissue ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Lymphatic system (abdominal glands excepted) ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Genito-urinary system	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other organs— Adrenals ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other sites ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Disseminated tuberculosis— Acute ...	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Chronic ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Not distinguished as acute or chronic	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	

Particulars of new cases of tuberculosis and deaths during the year 1936 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	2	2	—	—	1	2
1- ... ..	—	—	2	4	—	—	1	2
5- ... ..	—	3	6	3	—	—	—	1
10- ... ..	1	2	—	2	1	—	—	—
15- ... ..	9	7	—	1	—	3	1	—
20- ... ..	5	11	3	1	1	3	—	—
25- ... ..	9	10	1	3	6	3	1	—
35- ... ..	14	6	1	1	4	3	—	1
45- ... ..	14	7	—	1	10	2	—	—
55- ... ..	6	6	—	—	6	3	—	—
65 and upwards ...	4	3	—	—	3	2	—	1
Totals ... ..	62	56	15	18	31	19	4	7

The ratio of non-notified tuberculosis deaths to total tuberculosis deaths for the year 1936 was 1 to 6·8.

The figures for the new cases are the number of formal notifications and of the cases which came to the notice of the Medical Officer of Health otherwise than by formal notification. These figures, therefore, represent the most accurate record of the incidence of the disease during the year.

#### INSTITUTIONAL ACCOMMODATION FOR TUBERCULOSIS.

Institutional treatment of this disease is carried out at sanatoria, the majority of which are now under the control of the London County Council. The following table shows the number of admissions and discharges according to the intimations of admissions and discharges received from these sanatoria and from other institutions during the year 1936 :—

	Number of intimations on Form I (of admission of case to institution).		Number of intimations on Form II (of discharge of case from institution).	
	L.C.C. Hospitals.	Sanatoria.	L.C.C. Hospitals.	Sanatoria.
Pulmonary, males ...	53	69	46	39
Pulmonary, females ...	36	56	30	27
Non-pulmonary, males...	6	8	5	5
Non-pulmonary, females	1	5	—	10
Totals ... ..	96	138	81	81

## OUT-PATIENT TREATMENT.

During the year 1936 a scheme was entered into with the London County Council in respect of arrangements for X-ray examinations and for artificial pneumothorax work. The basis of the charges are (1) no charge for pneumothorax refills ; (2) no charge for X-ray examinations for the purpose of screening, and (3) where films are exposed the cost price (2s. 6d.) only of the films is charged. The main changes effected by this scheme are incorporated in the following resumé :

*Radiology.*—Pulmonary cases are usually sent for a first radiological examination to the Royal Chest Hospital, City Road. Cases in which specialised opinion of a radiologist is not necessary are sent to St. Leonard's Hospital or to the Royal Northern Hospital and the films are then seen by the Tuberculosis Officer. Screening is carried out at St. Leonard's Hospital by the Tuberculosis Officer. Non-pulmonary cases are sent to St. Leonard's Hospital or to the Royal Northern Hospital ; or if they are already under the supervision of a surgeon at a general hospital, the radiological examination is carried out there.

*Artificial pneumothorax treatment.*—This operation is usually carried out at a chest hospital or a sanatorium while the patient is in residence there. Refills are performed at various chest hospitals.

*Light treatment.*—Specialised light treatment—for example, Finsen light for lupus—is carried out at the light department of the London Hospital.

*Dental treatment.*—Patients who require dental treatment are treated at the municipal dental hospital, and particulars of this work will be found on page 122.

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS)  
REGULATIONS, 1925.

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 work of the Tuberculosis Dispensary is summarised in the following returns to the Ministry of Health :—

TUBERCULOSIS SCHEME OF THE SHORE DITCH METROPOLITAN BOROUGH COUNCIL.

PULMONARY TUBERCULOSIS.

Supplementary Annual Return showing in summary form (a) the condition at the end of 1936 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register. The Table is arranged according to the years in which the patients were first entered on the Dispensary Register, and their classification at that time.

Table with columns for years 1926-1936. Rows include: Disease Arrested (Adults M/F, Children M/F), Disease not Arrested (Adults M/F, Children M/F), Condition not ascertained during the year, Discharged as Recovered (Adults M/F, Children), Lost sight of, or otherwise removed from Dispensary Register, and Dead (Adults M/F, Children). Grand Totals are provided for each year.

Table with columns for years 1928-1936. Rows include: Disease Arrested (Adults M/F, Children M/F), Disease not Arrested (Adults M/F, Children M/F), Condition not ascertained during the year, Discharged as Recovered (Adults M/F, Children), Lost sight of, or otherwise removed from Dispensary Register, and Dead (Adults M/F, Children). Grand Totals are provided for each year.

(a) Not now on Dispensary Register (b) Remaining on Dispensary Register (c) Reason for removal from Register (d) Not now on Dispensary Register (e) Remaining on Dispensary Register (f) Reason for removal from Register (g) Not now on Dispensary Register (h) Remaining on Dispensary Register (i) Reason for removal from Register

NON-PULMONARY TUBERCULOSIS.

Supplementary Annual Return showing in summary form (a) the condition at the end of 1936 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register.

Condition at the time of the last record made during the year to which the return relates.	Previous to 1926				1926				1927							
	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	
																Adults
Disease Arrested	M.	1	—	—	1	—	—	—	—	—	—	—	—	—	—	
	F.	—	1	—	—	—	—	—	—	—	—	—	—	—	—	
Disease not Arrested	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Condition not ascertained during the year																
Total on Dispensary Register at 31st December																
Transferred to Pulmonary																
Discharged as Recovered	M.	5	—	—	1	4	1	—	—	—	—	—	—	—	—	
	F.	1	—	1	1	2	2	—	—	3	5	—	—	—	—	
Lost sight of, or otherwise removed from Dispensary Register	M.	14	1	—	12	27	4	1	1	3	9	2	—	1	4	
	F.	19	5	2	17	43	3	1	—	6	10	10	—	1	4	
Dead	M.	1	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F.	2	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total written off Dispensary Register																
GRAND TOTALS of (a) and (b) (excluding those transferred to Pulmonary).																
		56	10	3	40	111	14	3	2	13	32	21	1	2	6	30

Condition at the time of the last record made during the year to which the return relates.	1928				1929				1930				1931			
	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	
																Adults
Disease Arrested	M.	1	—	—	—	1	—	—	—	—	—	—	—	—	—	
	F.	—	1	—	—	—	—	—	—	—	—	—	—	—	—	
Disease not Arrested	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Condition not ascertained during the year																
Total on Dispensary Register at 31st December																
Transferred to Pulmonary																
Discharged as Recovered	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Lost sight of, or otherwise removed from Dispensary Register	M.	14	1	—	12	27	4	1	1	3	9	2	—	1	4	
	F.	19	5	2	17	43	3	1	—	6	10	10	—	1	4	
Dead	M.	1	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F.	2	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total written off Dispensary Register																
GRAND TOTALS of (a) and (b) (excluding those transferred to Pulmonary).																
		56	10	3	40	111	14	3	2	13	32	21	1	2	6	30

Condition at the time of the last record made during the year to which the return relates.	1932				1933				1934							
	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	
																Adults
Disease Arrested	M.	—	—	—	—	1	—	—	—	1	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—		
Disease not Arrested	M.	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—		
Condition not ascertained during the year																
Total on Dispensary Register at 31st December																
Transferred to Pulmonary																
Discharged as Recovered	M.	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—		
Lost sight of, or otherwise removed from Dispensary Register	M.	5	—	—	3	8	4	2	1	7	2	—	2	1	5	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—		
Dead	M.	1	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	1	—	—	—	—	—	—	—	—	—	—	—	—		
Total written off Dispensary Register																
GRAND TOTALS of (a) and (b) (excluding those transferred to Pulmonary).																
		13	1	1	8	23	9	4	2	10	25	11	—	10	6	27

Condition at the time of the last record made during the year to which the return relates.	1935				1936						
	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	
											Adults
Disease Arrested	M.	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	
Disease not Arrested	M.	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	
Condition not ascertained during the year											
Total on Dispensary Register at 31st December											
Transferred to Pulmonary											
Discharged as Recovered	M.	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	
Lost sight of, or otherwise removed from Dispensary Register	M.	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	
Dead	M.	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	
Total written off Dispensary Register											
GRAND TOTALS of (a) and (b) (excluding those transferred to Pulmonary).											
		5	1	2	9	17	6	2	3	7	18

## TUBERCULOSIS SCHEME OF THE SHOREDITCH METROPOLITAN BOROUGH COUNCIL.

(A) Return showing the work of the Dispensary during the Year 1936.

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 ...	36	24	—	5	4	4	6	4	40	28	6	9		83
* (b) Diagnosis not completed	—	—	—	—	—	—	—	—	5	7	5	1		18
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	98	128	75	79		380
B.—CONTACTS examined during the year :—														
(a) Definitely tuberculous ...	1	—	—	—	—	—	—	—	1	—	—	—		1
* (b) Diagnosis not completed	—	—	—	—	—	—	—	—	—	1	—	—		1
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	44	59	57	52		212
C.—CASES written off the Dispensary Register as :—														
(a) Recovered ...	14	10	1	1	4	3	—	4	18	13	1	5		37
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous) ...	—	—	—	—	—	—	—	—	149	195	136	134		614
D.—NUMBER OF CASES ON Dispensary Register on December 31st :—														
(a) Definitely tuberculous ...	225	169	19	16	47	38	42	35	272	207	61	51		591
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	5	8	5	1		19
1. Number of cases on Dispensary Register on January 1st ...			644											
2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years ...														36
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" ...			59											
4. Cases written off during the year as Dead (all causes) ...														55
5. Number of attendances at the Dispensary (including Contacts) ...			3845											
6. Number of Insured Persons under Domiciliary Treatment on the 31st December ...														295
7. Number of consultations with medical practitioners :—														
(a) Personal† ...			1											152
(b) Other ...			150											† Plus 29 visits to St. Leonard's Hospital.
8. Number of visits by the Tuberculosis Officer to homes (including personal consultations)† ...														
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes ...			3136											
10. Number of :—														
(a) Specimens of sputum, etc., examined ...														883
(b) X-ray examinations made in connection with Dispensary work ...														‡ 268
11. Number of "Recovered" cases restored to Dispensary Register, and included in A (a) and A (b) above			—											
12. Number of "T.B. plus" cases on Dispensary Register on December 31st ...														255

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

†All personal consultations, whether held at the homes of patients or elsewhere, are included in Item 7 (a); and all visits by the Tuberculosis Officer to homes, whether or not accompanied by a personal consultation already included in Item 7 (a), are entered in Item 8.

‡Excluding Propit Trust cases.



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

I am glad to report that the number of new cases of tuberculosis seen at the Dispensary continued to decline in 1936. Despite this there was an increase in the number of patients who attended for observation and diagnosis. There has also been a slight increase in the number of cases written off the Dispensary Register as cured, a marked increase in the number of X-ray examinations and of cases treated by artificial pneumothorax. The proportion of contacts examined at the Dispensary remains fairly constant and averages approximately 2.5 per notified case. Every effort is made by the Dispensary staff to secure the attendance of all contacts for examination, but unfortunately a considerable number of them cannot be convinced of the advisability of undergoing a thorough examination as soon as infection is discovered in the family.

The appointment of tuberculosis officers to act as tuberculosis consultants in the County Council's general hospitals has been extended for another period, and I have continued to visit the tuberculosis ward of St. Leonard's Hospital fortnightly during the year.

## SPECIAL FACILITIES.

*Radiological work* :—When the opinion of an expert radiologist is desirable, pulmonary cases are referred to the Royal Chest Hospital, and the reports given by Dr. Peter Kerley, radiologist to the hospital, are of very great value and assistance. Special facilities for X-ray work were accorded to the dispensaries during the latter part of the year by the London County Council in their general hospitals, and cases in which Dr. Kerley's opinion is not considered necessary are now X-rayed at St. Leonard's Hospital and the films are interpreted by the Tuberculosis Officer. Non-pulmonary cases are usually under the care and supervision of a surgeon at a general hospital and any X-ray examinations required are usually 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. During the past year the following X-ray examinations were made at the request of the Tuberculosis Officer, viz.: 246 at the Royal Chest Hospital, 2 at the Royal Northern Hospital and 20 at St. Leonard's Hospital. In addition, a number of examinations of contacts were carried out under the auspices of the Proffit Trust.

*Artificial Pneumothorax Treatment* :—With further developments in technique, the proportion of cases treated by artificial pneumothorax has continued to increase. The treatment is almost invariably initiated while the patient is in sanatorium or hospital and the refills are continued when the patient returns home at one or other of the chest hospitals, the majority of them at the Royal Chest Hospital. If the treatment has been commenced at the County Council Hospitals at Colindale or Grove Park, arrangements are made, when desirable, for the patient to continue to attend there for refills after discharge.

Particulars of the cases are given below :—

Cases referred to in last year's report in which treatment had not been completed on December 31st, 1935.

- Male, aged 35, carman, stage B.1., notified 21/11/32. A.P. commenced 9th January, 1933 ; discontinued temporarily in December, 1935, owing to fluid. Under treatment in hospital for hæmaturia till June, 1936. Aspirations of fluid carried out from time to time, but no refills given and lung now being allowed to expand. Pulmonary disease practically quiescent. Not working.
- Male, aged 34, tinker, stage B.2, notified 21/1/35. A.P. commenced 24th April, 1935. In and out of hospital during 1936 owing to domestic difficulties. 14 refills through dispensary while on domiciliary treatment. A.P. discontinued in October owing to obliteration of pleural space. In hospital at close of year. Disease still active.
- Male, aged 26, woodcarver, stage B.2, notified 2/1/32. A.P. commenced 8th January, 1932. Nine refills during 1936. Progress very satisfactory, sputum consistently negative in 1936, disease appears quiescent ; treatment likely to be terminated shortly. Fit for light work.
- Female, aged 33, housewife, stage B.2, notified 18/9/35. A.P. commenced 28th October, 1935. In and out of hospital and sanatorium during 1936. Developed pleural effusion in June. Fifteen refills or aspirations with air replacements during year through the Dispensary. Disease still slightly active. Does part of her housework.
- Male, aged 20, office boy, stage B.1, notified 27/4/34. A.P. commenced 23rd August, 1934. No refills through this Dispensary in 1936 ; removed to another district in January.
- Female, aged 26, umbrella polisher, stage B.2., notified 3/10/28. After a period of quiescence, disease became active again in 1932 and the patient has been in hospital or sanatorium most of the time since. A.P. commenced in June, 1934, but treatment has not been very successful and surgical measures are now being considered. Patient was in sanatorium throughout 1936.
- Male, aged 24, window-cleaner, stage B.2, notified 27/2/34. A.P. commenced 9th April, 1934 ; 7 refills through Dispensary in 1936. Failed to attend Dispensary during 1936 until October and was irregular in attendance at hospital for refills. Extensive disease developed on opposite side. Admitted to hospital early in November and bilateral A.P. commenced but abandoned in December. Disease still advancing and patient in hospital at end of year.
- Female, aged 31, coat-presser, stage B.2, notified 28/9/33. A.P. commenced 10th October, 1933. Six refills through Dispensary in 1936. Admitted to hospital for phrenic evulsion in May, after which refills were discontinued. Removed to an unknown address in November : was then keeping well and fit for work, but unemployed.

Cases coming under Dispensary for A.P. treatment for first time in 1936.

- Female, aged 22, clerk, stage B.2., notified 16/8/35. In hospital until December, 1935, but refused transfer to sanatorium. Left A.P. commenced on 2nd September, 1935 ; some disease developed on right side, but improved after right phrenic evulsion. Refills continued at the expense of the hospital out-patient department for first three months, but liability accepted by Council from April onwards. Nine refills through Dispensary prior to August, when she was re-admitted. Refills then discontinued. Disease extending and patient confined to bed.
- Female, aged 35, housewife, stage B.2, notified 28/5/35. A.P. commenced 30th October, 1935. Residential treatment from June, 1935, to April, 1936 ; 31 refills through Dispensary in 1936. Awaiting re-admission to hospital for section of adhesions. General condition good ; sputum negative.
- Female, aged 23, leather machinist, stage B.2, notified 13/10/33. A.P. commenced 7th October, 1933. Monthly refills during 1936 until August, when an oleothorax was performed. Pleural effusion followed and patient was in hospital till November, three aspirations of fluid being carried out. A.P. now discontinued. General condition now fair, sputum negative.

- Female, aged 26, housewife, stage B.2, notified 3/7/33. A.P. commenced 6th February, 1935 (while resident in Islington). Moved to Shoreditch in September, 1936. Monthly refills. Keeping well but has scantily positive sputum.
- Male, aged 32, radio engineer, stage B.1, notified 6/10/35. A.P. commenced 21st October, 1935. Phrenic evulsion May, 1936. Returned home from sanatorium July, 1936; 11 refills during remainder of year. Disease appears quiescent; no cough or sputum. Working.
- Male, aged 26, packer, stage B.2, notified 18/12/34. A.P. commenced 14th January, 1936. In hospital during first half of 1936; 8 refills after discharge. Was at first a very unsatisfactory patient. Extensive disease (bilateral) and bad family history. Marked improvement, but unfit for work.
- Male, aged 37, messenger, stage B.2., notified 6/8/35. In sanatorium from September, 1935, to June, 1936. Date of commencement of A.P. 29th October, 1935. 11 refills since discharge. Moved out of London in December; condition then fair but sputum still positive and patient unfit for work.
- Male, aged 24, polisher, stage B.2, notified 1/1/36. A.P. commenced 3rd February, 1936. Discharged from sanatorium in October, 3 refills since. Disease appears to be quiescing. Sputum negative. Unfit for work yet.
- Male, aged 34, clerk, stage B.2, notified 9/7/35. A.P. commenced 8th November, 1935, after severe hæmorrhage. Discharged from sanatorium August, 1936. Seven refills since. Prognosis at first seemed very poor, but patient has improved very well. Sputum still positive and patient unfit for work.
- Male, aged 28, licensed victualler, stage B. 2. Disease apparently diagnosed September, 1935, but not notified till 22/5/36. A.P. commenced 20th September, 1935. In hospital till May, 1936. 22 refills. "Quite fit" and superintending his business at end of year.

Progress in 1936 of patients still under supervision at the Dispensary whose A.P. treatment was terminated in 1935.

- Female, aged 27, pencil maker, stage B.1, notified 30/1/33. A.P. commenced 13th May, 1933, terminated March, 1935. Disease remains quiescent. Patient working.
- Male, aged 27, labourer, stage B.2, notified 15/4/34. A.P. commenced 28th December, 1934, but only partial collapse obtained; discontinued in December, 1935, owing to obliteration of pleural space. General condition remains fairly good but T.B. still present in sputum. Patient working.
- Male, aged 24, metal polisher, stage B.2, notified 24/7/31. A.P. commenced 6th January, 1932, terminated March, 1935. Disease quiescent, probably arrested. No sputum. Working.
- Male, aged 24, clerk, stage B.1, notified 8/3/32. A.P. commenced 15th July, 1932, terminated December, 1935. Removed to another district in October, 1936; disease then arrested, no sputum, patient working.

The total number of refills chargeable to the Dispensary in 1936 was 164, of which 90 were carried out at the Royal Chest Hospital, 45 at Colindale Hospital, 22 at Victoria Park Hospital, and 7 at Grove Park Hospital. The charge per refill is 10s. 6d., which includes any necessary X-ray examinations made for control of the treatment.

*Finsen Light Treatment*:—Three cases of lupus were under treatment at the London Hospital during 1936. Particulars are as follows:—

- Female, aged 63, dress cutter. Notified 26/3/31. Two patches of lupus on right cheek. Commenced treatment 26th March, 1931. Condition steadily improving. 30 treatment in 1936.

Male, aged 19, unemployed. Notified as pulmonary tuberculosis and lupus 12/3/23. Commenced light treatment 24th August, 1932, when he first came to live in Shoreditch. Extensive lesions on both sides of face and scars of old lupus on L. arm, R. wrist, and R. thigh. General arc light treatment being given in addition to Finsen light. Condition steadily improving. Moved to Essex in July to take up farm work. Pulmonary condition quiescent and general health good. 127 Finsen light and 126 arc-light treatments given in 1936 before removal.

Female, aged 24, domestic servant. First notified as a case of lupus in 1920 when living in another county and discharged as cured in 1927. Disease became active again in 1932; re-notified 10/6/32. Finsen light treatment was commenced on 28th June, 1932. Moved into Shoreditch in May, 1936. Lesions on R. elbow, L. forearm and L. heel (the two latter almost healed) when first seen in Shoreditch. Condition improving slowly. 11 treatments in 1936 since moving into Shoreditch.

The total number of attendances for Finsen light which were chargeable to the Dispensary during 1936 was 168, and for general arc-light in lupus cases, 126. The charge per attendance for Finsen light is 5s. and for general arc-light treatment 1s.

*Ear, Nose and Throat cases*:—Twelve cases were referred for an opinion to Mr. A. M. Zamora, F.R.C.S., Consulting Laryngologist to the Royal Chest Hospital, whose advice and assistance in treatment are much valued.

*Dental Treatment* is carried out for patients who desire it at the Shoreditch Borough Council Dental Hospital. Many patients however make their own arrangements for dental treatment. In the case of tuberculous patients (and since October, of other members of the family), the assessment for payment is made by the Tuberculosis Care Committee, subject to approval by the Public Health Committee.

*Diseases of the Eye* are rarely met with at the Dispensary, but such cases are referred to the Royal London Ophthalmic Hospital.

*Surgical cases* requiring the opinion and supervision of a surgeon are referred to one of the general hospitals, usually St. Bartholomew's, the London, or the Metropolitan, or to the Queen's Hospital for Children. After-care in surgical cases is supervised by the surgeon who originally recommended sanatorium treatment or by one of the County Council's After-Care Clinics, but the patient is also seen from time to time at the Dispensary. In rare cases supplementary treatment in the way of artificial sunlight is recommended. One case during 1936 was recommended for this treatment and attended at the London Hospital for arc light treatment on 94 occasions.

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

*Convalescence* for non-tuberculous but ailing children is usually arranged through the Invalid Children's Aid Association. *Nursing for bed-ridden patients* is arranged through the Shoreditch and Bethnal Green District Nursing Association, the Borough Council paying 1s. 4d. a visit.

Cases of social, economic or domestic difficulty are referred to the Tuberculosis Care Committee (appointed by the Shoreditch Borough Council). Assistance in the

way of extra nourishment and the provision of separate beds or of garden shelters is given to a number of patients on the recommendation of the Tuberculosis Officer, the cost being met by the Borough Council. The number of patients who received extra nourishment during the year through the Borough Council was 81, of whom 35 were receiving these extras on December 31st, 1936. Patients in receipt of relief from the Public Assistance Committee are recommended to that body for extra nourishment and a few patients are similarly helped by the Unemployment Assistance Board. The number of shelters (lent by the Borough Council) in use during the year was 4, and the number of patients to whom beds and/or bedding was lent was 28.

A few comparative figures relating to the work of the Dispensary for the years 1935 and 1936 are given below :—

	1935	1936
Total attendances ... ..	3,778	3,845
Total examinations ... ..	1,679	1,683
New cases of tuberculosis coming under supervision of		
Dispensary ... ..	97	84
Contacts examined ... ..	237	209
Sisters' Visits ... ..	2,917	3,136
*Tuberculosis Officer's visits ... ..	161	152

\* In addition 29 visits were made by the Tuberculosis Officer to St. Leonard's Hospital.

Comparative numbers of insured and non-insured persons who attended were :—

	1935	1936
Insured ... ..	1,948	1,866
Non-insured ... ..	1,830	1,979

Special sessions for school children are held weekly and the following table shows their attendances for each month :—

	1935	1936		1935	1936
January ... ..	44	25	July ... ..	22	16
February ... ..	36	46	August ... ..	12	6
March ... ..	43	63	September ... ..	21	27
April ... ..	33	36	October ... ..	51	35
May ... ..	26	41	November ... ..	50	32
June ... ..	24	31	December ... ..	28	48
			Total attendances	390	406
			Total examinations	197	201

Laboratory examinations made at the Dispensary during the year :—

	1935	1936
Sputum ... ..	810	849
Urines, etc. ... ..	33	34

X-ray examinations :—

1935	1936
190	268

## SHOREDITCH TUBERCULOSIS CARE COMMITTEE.

The following is the annual report of the Tuberculosis Care Committee :—

The work of the Tuberculosis Care Committee has this year followed very closely the lines laid down during the previous year. We have concentrated on the care of the patient and his family, as we have now no assessment duties, and on the development of the Tuberculosis Fund.

It will be noticed that the number of new patients on the Care Committee register again shows a decrease and this has enabled the Committee to devote more time to individual patients. This also brings out one point in connection with the appended figures. The number of visits and interviews have certainly decreased since there have been no assessments to make and no contributions to collect, but these were matters of routine which rarely made the patient or his family feel grateful for the existence of the Care Committee or encouraged him to say much about any difficulties that might be worrying him. Practically all the present interviews and visits may be properly classified as "care work" although they do not by any means all give a material result. They do, however, in many cases, give some over-anxious person an opportunity to talk over his worries, and wherever possible help is given.

The Shoreditch Tuberculosis Fund has now its own Committee which has issued its first annual report, but naturally the Fund is closely connected with the Tuberculosis Care Committee and cannot go unmentioned in this report. It can be seen from the figures that the Care Committee was able to help a great many more cases through the Fund this year. This has been possible owing to the very generous support which has been given to the Fund, which, it is felt, will be of increasing help to the Care Committee in its work.

Some word of explanation is needed if the figures are to give any real idea of what the Committee has done. The clothing given has been mainly to patients on entering sanatorium where clothing which can be worn at home is not adequate. In a few cases clothing has been given to patients who are not going away and in some cases to children who have been at a sanatorium for a long time, and while there have been provided with clothing by the London County Council, but who are not allowed to keep it on their discharge. The clothing which the child wore before going to the sanatorium is no use for him a year or two later, and the mother cannot afford a complete new outfit at a few weeks' notice.

So also with the phrase "fares paid;" in most cases it alludes to money paid for relatives to visit patients in the sanatorium. In one case, however, it was for a patient to come home for a week-end, and in another for a patient's wife to go away for a short holiday. Rent has been paid when it has been needed in advance on account of the patient's removal to better housing accommodation, and also when he has through misfortune become so much in arrears as to cause him anxiety.

It should also be mentioned that the number of cases referred to the Public Assistance Committee includes only those who are referred under rather special circumstances where it is felt that, had the Care Committee not been there to advise or to send a supporting letter, the application might not have been made. Similarly, only special cases referred to the School Care Committee are mentioned although cases

are constantly being recommended for school meals or free milk. Indeed, both these Committees have been helping us continuously throughout the year and we are correspondingly grateful to them. We should like also to thank the many other bodies who have assisted us and all those who have helped with gifts of money, clothing or books.

The sewing class has continued this year its useful work of making clothing needed by other patients at a sanatorium. Unfortunately the membership is still small.

Figures for the year's Care Work :—

	1935	1936
New patients ... ..	112	96
Re-registrations ... ..	35	23
Dental cases ... ..	5	8
Removals ... ..	4	5
Visits paid ... ..	593	467
Interviews ... ..	325	371
<u>Cases reported to Committee :—</u>		
New cases ... ..	142	110
Dental cases ... ..	4	11
Care work ... ..	124	111
Admissions ... ..	190	160
Discharges ... ..	131	103
Deaths ... ..	58	41
Total ... ..	649	536
<u>Referred :—</u>		
Shoreditch Tuberculosis Fund ... ..	39	62
Public Assistance Committee ... ..	56	17
London County Council ... ..	2	11
Red Cross ... ..	1	4
School Care Committee ... ..	—	3
Public Health Committee ... ..	1	1
Charity Organisation Society ... ..	6	1
East London Workers among the Poor... ..	11	1
British Legion ... ..	—	1
<u>Details of Care Work :—</u>		
Clothing obtained ... ..	55	56
Relief obtained ... ..	29	11
Relief increased ... ..	7	2
Fares paid ... ..	12	12
National Health Insurance contributions paid ... ..	4	3
Temporary help given ... ..	6	4
Rent paid ... ..	3	5
Admitted to Homes ... ..	5	1
Removal expenses paid ... ..	3	1
Pocket money paid ... ..	2	5
Surgical appliance supplied ... ..	—	1

## SHOREDITCH TUBERCULOSIS CARE COMMITTEE, 1936.

Councillor Mrs. H. Alford	...	...	St. Leonard's Hospital.
Miss. A. Broomfield	...	...	Invalid Children's Aid Association.
Mr. H. S. Ceeney	...	...	Public Assistance Committee.
Mr. Councillor A. Charles	...	...	Public Health Committee.
Dr. C. K. Cullen	...	...	Tuberculosis Officer.
Councillor Mrs. H. Girling, O.B.E., J.P., L.C.C.	...	...	—
Sister A. A. Grange	...	...	Tuberculosis Visitor.
Councillor Mrs. M. I. Higgins (Chairman)			—
Sister W. Hiscoke	...	...	Tuberculosis Visitor.
Dr. Margaret Hogarth	...	...	Divisional Medical Officer.
Mrs. Hooten	...	...	—
Mr. Councillor S. Landau	...	...	—
Miss D. F. Lee	...	...	Shoreditch and Bethnal Green District Nursing Association.
Mr. Councillor A. I. Macbeth	...	...	—
Miss G. Murch	...	...	School Care Committee.
Miss Parsell	...	...	London Insurance Committee
Mrs. Salmon	...	...	—
Mr. Councillor C. J. Smith	...	...	—
Dr. E. Ashworth Underwood	...	...	Medical Officer of Health.
Mrs. G. B. Green	...	...	Secretary.



## SHOREDITCH TUBERCULOSIS FUND.

*Committee :*

Councillor Mrs. M. HIGGINS (Chairman), Councillor Mrs. H. ALSFORD,  
Mr. Councillor A. CHARLES, Mrs. SALMON, Dr. C. K. CULLEN.

*Hon. Treasurer :* R. JONES, Esq.

*Secretary :* G. B. GREEN.

The fund is devoted to the following objects :—

1. To cover the expenses of the Handicraft Class.
2. To provide clothing and boots.
3. To assist with the removal expenses when better housing accommodation has been obtained.
4. To pay arrears of National Health Insurance in order to entitle a patient to benefit.
5. To pay fares for relatives to visit patients not more often than once in three months.
6. To provide pocket-money in special cases to patients at sanatorium, such pocket-money not to exceed 2s. weekly.
7. To assist, in certain special cases approved by the Tuberculosis Officer, patients and/or their families in ways which are not specifically mentioned in the preceding six clauses provided that the persons assisted are ineligible to obtain such assistance from any other charitable organisation or from the Public Assistance Committee, and provided that the members of the Fund Committee are agreed that such assistance would be legitimately supplied through a Fund of this nature.

## V.—MATERNITY AND CHILD WELFARE.

The principal rates which are used in estimating the value of maternity and child welfare work in any area are the maternal mortality rate and the infantile mortality rate. Conclusions which are based on a series of either of these rates for a number of consecutive years are of considerable value, but it should be noted that no valid opinions can be based on the rates for isolated years.

The infantile mortality rate for Shoreditch for 1936 was 75. The corresponding rate for 1935 was 52, so that the 1936 figure is considerably in excess of that for 1935. In the report for 1935 I pointed out that the low rate of 52 was possibly associated with the fact that there were few deaths from diarrhoea and enteritis in infants, and also with the fact that epidemic disease was not prevalent. The brief analysis of the figures for 1936 which is given on page 30 of this report suggests that this was probably the explanation. The excess for 1936 was made up largely by deaths from measles, diarrhoea and respiratory conditions.

For a moderately small area like Shoreditch maternal mortality rates are apt to show even more surprising features. This is due of course to the fact that even one death adds considerably to the rate for the whole borough. For example the maternal mortality rate for 1934 was 0·69 per 1,000 live births, which represents one maternal death during the year. During 1935 there were four maternal deaths, and the rate was then increased to 3·10. Considerable fluctuation in the rate for Shoreditch is, therefore, to be expected. It is, however, satisfactory to note that during 1936 no Shoreditch mother lost her life as a result of childbirth, and the maternal mortality rate is therefore 0 per 1,000 live births.

### STATISTICS.

#### INFANTILE MORTALITY.

The number of children under one year of age who died in 1936 was 95, of whom 55 were males and 40 females, as compared with 67 (males 35, females 32) for 1935. The infant mortality rate was 75 as compared with 52 for the previous year, and an average of 73 for the previous five years. The rate for England and Wales was 59, or 21 per cent., and for London 66, or 12 per cent. lower than the rate for Shoreditch.

## CAUSES OF DEATH.

The causes of death of the 95 infants who died in 1936 are set out in the table on page 31. The main causes of death were diarrhœa and enteritis (25 deaths); pneumonia (22 deaths); prematurity (13 deaths); and measles (7 deaths). The corresponding figures for the year 1935 for the first three of these causes was 9, 14 and 16 deaths, respectively. As was mentioned on page 30, the chief cause of the relatively high infantile mortality for 1936 was the increase in the number of deaths due to diseases of an infectious nature, chiefly diarrhœa and enteritis, and pneumonia. These, together with prematurity and congenital malformations, constitute the chief causes of infant mortality. The infectious conditions have already received sufficient consideration in this report, but prematurity deserves further discussion.

It is interesting to note that the deaths from prematurity were lower in 1936 than in 1935. Prematurity exerts its effects mainly during the first month of life, whereas it will be seen from the table on page 31 that the other principal diseases usually caused death later in the year. Prematurity, as a cause of death in infants under one year, has not generally received the consideration which it deserves. A premature infant may be defined as one born before the 38th week of gestation, and the incidence of this condition is said to be about 10 per cent. of all live births. The death rate for premature infants is very high, and in many series of statistics about 50 per cent. of such infants die within the first year of life. Prematurity reflects the condition not only of the child after birth, but also of its ante-natal life. Hence it gives some indication of the condition of the mother before her confinement.

The following table gives the death rate for premature infants over a series of years:—

Year.	SHOREDITCH.			ENGLAND AND WALES.		
	Total births.	Deaths from pre-maturity.	Death rate (per 1,000 births).	Total births.	Deaths from pre-maturity.	Death rate (per 1,000 births).
1924	2,528	35	13·84	729,933	13,738	18·82
1925	2,627	29	12·18	710,582	12,534	17·64
1926	2,516	38	15·10	694,563	12,146	17·49
1927	2,188	26	11·88	654,172	12,132	18·55
1928	2,091	35	16·74	660,267	11,671	17·68
1929	2,005	32	15·96	643,673	11,992	18·63
1930	1,988	26	13·08	648,811	11,360	17·51
1931	1,684	14	8·43	632,081	11,565	18·30
1932	1,674	27	16·13	613,972	11,174	18·20
1933	1,494	20	13·39	580,413	10,885	18·75
1934	1,456	26	17·17	597,642	10,518	17·60
1935	1,290	16	12·40	599,167	10,315	17·21
1936	1,274	13	10·20	605,609	10,106	16·69

The actual age incidence of the Shoreditch infants who died from prematurity are shown in the following table :—

Year.	Births in year.	Under 1 week.	Under 1 month.	1 and under 3 months.	3 and under 6 months.	6 and under 9 months.	Between 9 months and 1 year.
1924	2,528	26	33	2	—	—	—
1925	2,627	19	27	1	1	—	—
1926	2,516	27	34	4	—	—	—
1927	2,188	20	25	—	1	—	—
1928	2,091	23	28	7	—	—	—
1929	2,005	20	31	1	—	—	—
1930	1,988	20	24	2	—	—	—
1931	1,684	11	12	2	—	—	—
1932	1,674	18	24	2	1	—	—
1933	1,494	14	18	2	—	—	—
1934	1,456	20	23	3	—	—	—
1935	1,290	12	15	1	—	—	—
1936	1,274	11	11	2	—	—	—

The first of these tables shows that there has been no substantial change in the death rate for these premature infants either in Shoreditch or in England and Wales as a whole. The rates for Shoreditch—being calculated from a smaller number of deaths—show more fluctuation than the rates for the country as a whole, but it is obvious that in this short period there has been no substantial decrease in the rate. The second table shows that of the 337 infants who died of prematurity during the thirteen years 1924 to 1936, 241 (or 71·5 per cent.) died within the first week, and 305 (or 90·5 per cent.) died within the first month.

The second table shows that there was a slight reduction in the number of premature infants who died later than the first week and before the end of the first month.

#### DEATHS IN AGE GROUPS.

The table opposite page 31 gives particulars of the deaths at different ages under one year. Of the total of 95, 14 (14·78 per cent.) occurred on the first day of life ; 19 (20·00 per cent.) within the first week ; 23 (24·21 per cent.) in the first month ; 11 (11·58 per cent.) between 1 and 3 months ; 25 (26·32 per cent.) between 3 and 6 months ; 17 (17·90 per cent.) between 6 and 9 months, and 19 (20·00 per cent.) between nine months and one year. The following table sets out these particulars for a period of years :—

Year.	1 day.	Under 1 week.	Under 1 month.	1 and under 3 months.	3 and under 6 months.	6 and under 9 months.	Between 9 months and 1 year.
1924	—*	46	70	32	35	44	40
1925	—*	36	64	45	52	39	33
1926	—*	44	72	24	18	28	25
1927	—*	33	51	24	30	29	29
1928	19	36	55	29	37	20	23
1929	21	35	56	23	35	22	32
1930	14	30	46	18	26	21	18
1931	12	21	30	20	30	25	21
1932	9	28	42	17	30	28	17
1933	13	27	36	10	34	21	10
1934	14	32	38	23	23	24	14
1935	8	23	30	14	8	7	8
1936	14	19	23	11	25	17	19

\* Not given for these years.

#### ILLEGITIMATE DEATH RATE.

Of the 43 illegitimate births, in 6, or 13.95 per cent., death occurred before the child reached the age of one year, which corresponds to an infantile mortality rate of 139 per 1,000 births. This is an increase of 116 as compared with 1935.

#### MATERNAL MORTALITY.

The following table shows the maternal mortality rates for a period of years :—

Year.	Shoreditch Total Maternal Deaths.	Rate per 1,000 Live Births.		
		Shoreditch.	London.	England and Wales.
1919	9	3.84	—	4.37
1920	7	1.89	—	4.33
1921	7	2.35	2.98	3.92
1922	6	2.00	2.84	3.81
1923	4	1.41	2.89	3.82
1924	9	3.59	3.08	3.90
1925	8	3.04	3.19	4.08
1926	6	2.40	3.35	4.12
1927	3	1.38	2.91	4.11
1928	7	3.34	3.59	4.42
1929	4	2.00	3.61	4.33
1930	7	3.50	3.33	4.40
1931	3	1.78	3.81	4.11
1932	4	2.39	2.99	4.21
1933	6	4.02	3.66	4.51
1934	1	0.69	2.48	4.60
1935	4	3.10	2.58	4.10
1936	0	0.00	1.92	3.65

## MATERNITY WORK.

## ANTE-NATAL SUPERVISION.

The ante-natal work which is carried out under the control of the Borough Council may be divided broadly into three groups—(a) home visiting by health visitors; (b) medical examinations and supervision at ante-natal clinics held at the Model Welfare Centre; and (c) medical examinations and supervision at the ante-natal clinic connected with the Shoreditch School for Mothers.

(a) *Home visiting*.—This is carried out by the health visitors mainly as an adjunct to an examination of pregnant women by a doctor at one of the ante-natal clinics. In addition certain women whose confinement is to be conducted by the municipal midwife are visited by her during their pregnancies.

The municipal midwife also visits expectant mothers who are to be confined by students of St. Bartholomew's Hospital under her supervision (see page 92). The following table shows the number of mothers who were attended by the health visitors for a number of years. The table also gives the total visits made to these patients each year:—

	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936
No. of individuals visited...	641	619	592	641	631	568	636	456	805	706	842
Total number of visits paid ...	1,200	1,109	1,045	1,156	1,215	1,011	1,075	998	1,573	1,597	1,958
Average No. of visits per individual ...	1.8	1.9	1.8	1.8	1.9	1.8	1.7	2.2	2.0	2.3	2.3

In connection with the above table it is interesting to note that in the last four years there has been an appreciable increase in the average number of attendances per individual.

(b) and (c) *Medical examinations and supervision at the ante-natal clinics*.—At the present time four ante-natal clinics are held—three at the Model Welfare Centre and one at the School for Mothers, 28, Herbert Street. At these clinics the most modern methods of supervision are constantly employed and facilities are available for radiological examination where necessary.

During the year 632 expectant mothers attended at the ante-natal clinics and 2,156 attendances were made in all. This represents an increase of 45 individuals and 90 total visits on the figures for 1935. The average attendance per individual works out at 3.41 visits.

The following table shows particulars of the ante-natal attendances for a period of twelve years:—

Year.	First visits by expectant mothers.	Total attendances.	Average attendance per individual.
1925	380	673	1.77
1926	504	863	1.71
1927	399	750	1.88
1928	412	763	1.85
1929	494	961	1.95
1930	525	984	1.88
1931	543	1,348	2.50
1932	646	1,740	2.69
1933	547	1,636	2.99
1934	544	1,629	3.00
1935	587	2,066	3.52
1936	632	2,156	3.41

The number of women who attended the ante-natal clinics during 1936 amounted to approximately 49 per cent. of the confinements of mothers resident in the Borough during the year.

#### PANEL OF CONSULTANTS.

A medical practitioner in attendance upon a woman resident in Shoreditch 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 six occasions during the year covered by this report.

#### NATAL WORK.

##### MIDWIVES.

The total number of midwives on the roll practising in Shoreditch at the end of the year 1935 was 38. At the end of the year there were 26 midwives practising in the Borough. The reduced number is due to the exclusion of those midwives, who, although attached to Organisations doing midwifery work in Shoreditch, do not themselves come into the Borough for this purpose. The number of births attended by midwives was 517, which represents 40 per cent. of the total births notified during the year.

## MUNICIPAL MIDWIFE.

The municipal midwife was appointed in 1931 for the purpose of attending those expectant mothers in the Borough who apply for her services (municipal cases); she also attends the confinements and acts as maternity nurse in cases conducted in Shoreditch by medical students from St. Bartholomew's Hospital. The full fee for municipal cases is 25s. for the first child and 21s. for other children, and the Council has 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.

It will be seen from the table below that the expansion of this work necessitated extra assistance. A temporary additional midwife was appointed on March 18th, and, with slight breaks she continued in the Council's employment throughout the year.

The following table shows the number of cases attended by students from St. Bartholomew's Hospital and the municipal midwife since the inception of this service :—

	1931	1932	1933	1934	1935	1936
<i>Municipal Midwife—</i>						
(a) No. of cases attended ... ..	1	35	55	41	75	136
(b) No. of ante-natal visits ... ..	—	202	148	169	440	507
(c) No. of ante-natal clinics attended ... ..	*	60	46	40	46	41
(d) No. of post-natal clinics attended ... ..	*	6	2	3	8	2
<i>St. Bartholomew's Hospital—</i>						
(a) No. of cases attended ... ..	7	91	81	57	38	30
(b) No. of ante-natal visits ... ..	—	394	350	286	246	185
(c) No. of ante-natal clinics attended ... ..	—	—	—	—	—	—
(d) No. of post-natal clinics attended ... ..	—	—	—	—	—	—

\* No figures available.

The Council receives 15s. from St. Bartholomew's Hospital for every case in which the municipal midwife acts as maternity nurse in the manner described.

## PLACES OF CONFINEMENT.

Of the 1,271 confinements which occurred during 1936, 686, or 54·0 per cent., took place in institutions, and 585, or 46·0 per cent., in the homes of the women concerned.



## MATERNITY DRESSINGS.

During the year 572 sterilised maternity outfits were supplied to mothers through the ante-natal clinics and the midwives practising in the Borough. The use of these outfits undoubtedly tends to make the confinement more hygienic. The patients who received the sets were asked to contribute what they could afford towards the cost.

## HOME HELPS.

Home helps are provided from a panel of 13 women who have been approved for this duty by the Maternity and Child Welfare Committee. During the year these women attended, to assist with the housework, etc., 174 cases, of which 143 were conducted by midwives, 15 by students from St. Bartholomew's Hospital, 1 by a student from the London Hospital, 10 where the patient was admitted to St. Leonard's Hospital, and in 5 cases of illness on the recommendation of medical practitioners.

The women on the panel are specially selected for this duty and they work according to rules which have been drawn up to regulate their duties, and to prevent the possibility of a home help in any circumstances acting as a nurse. A printed copy of these rules is supplied to the home help and also to the woman she will attend. Application for the services of a home help is made by the husband and the charge is based on a scale of income, reference to which is made in the annual report for 1933 (page 128).

Under the arrangement with St. Bartholomew's Hospital all patients who are to be attended by the hospital students are offered the services of a home help if their income is under scale.

## POST-NATAL WORK.

One post-natal clinic is held at the Model Welfare Centre on the second and fourth Wednesdays in each month. This clinic was established in 1931, and the following table gives particulars of the first attendances and total visits for the year over a period of six years:—

Year.	First visits by nursing mothers.	Total attendances.	Average attendance per individual.
1931 ... ..	36	69	1.92
1932 ... ..	176	290	1.65
1933 ... ..	152	287	1.89
1934 ... ..	151	286	1.89
1935 ... ..	198	327	1.65
1936 ... ..	193	276	1.43

This clinic continues to fulfil a very necessary function.

## BREAST-FEEDING CLINIC.

This clinic is now held in the specially designed quarters adjoining the light clinic in the new building. The clinic is open on three days each week from 9 a.m. to 5 p.m., and a mother can attend as often as is necessary between these hours or, if advised to do so, she can spend the whole day at the clinic. During the year 296 individual mothers attended the clinic, as compared with 260 in 1935. The total attendances were 819 as compared with 835 in 1935. In nine instances it was possible to establish total restoration of breast-feeding and in another 144 instances a partial restoration was effected. In 28 cases the establishment of breast milk was impossible. Of the 296 cases, 27 attended because of over-feeding of the children, and in 30 instances the children were not receiving sufficient nourishment. Breasts were treated in 9 instances. Four babies were admitted to the ward for observation. During the year 49 visits were paid to persons who had defaulted.

## PUERPERAL FEVER.

Two cases of puerperal fever were notified during the year. There was one death. Both cases occurred at home and were subsequently removed to hospital. During the year 23 cases of puerperal pyrexia were notified. Further notes on these conditions will be found on page 48.

## STILL BIRTHS.

The following table gives a comparison between live and still births notified under the Notification of Births Act, 1907, for the last twelve years :—

Year.	Live births notified.	Still births notified.	Total births notified.	Percentage of still births to total births.
1925	2,287	44	2,331	1.88
1926	2,369	59	2,428	2.43
1927	2,083	73	2,156	3.39
1928	1,956	54	2,010	2.68
1929	1,953	53	2,006	2.64
1930	1,891	38	1,929	1.97
1931	1,648	50	1,698	2.94
1932	1,635	54	1,689	3.20
1933	1,448	51	1,499	3.40
1934	1,425	38	1,463	2.59
1935	1,266	44	1,310	3.36
1936	1,246	42	1,288	3.26

## HOME VISITING.

The number of visits paid by the health visitors during the year was 20,770. Of these 1,240 were first visits, 3,802 were subsequent visits to infants of under one year, and 10,220 visits to children between one year and five years of age. These figures should be compared with 1,304, 2,975 and 8,838 for 1935. A summary of the work done by the health visitors appears below. Further particulars will be found in the detailed table on page 96.

Number of first visits to infants ... ..	1,240
Number of first visits to children one to five years ... ..	2,085
Number of revisits to infants ... ..	3,802
Number of revisits to children one to five years ... ..	8,135
Number of visits to still births ... ..	36
Number of visits to ophthalmia cases ... ..	10
Expectant mothers—first visits ... ..	842
Expectant mothers—revisits ... ..	1,116
Puerperal Fever—first visits and revisits ... ..	5
Puerperal Pyrexia—first visits and revisits ... ..	21
Number of futile visits ... ..	3,491

In addition to the above visits the health visitors interviewed mothers on 4,062 occasions.

STATISTICAL REPORT FOR 53 WEEKS ENDING 2ND JANUARY, 1937, UPON THE WORK OF THE HEALTH VISITORS.

	Health Visitor's Districts.										Total.
	1	2	3	4	5	6	7	8	9	10	
1st visits to infants ... ..	174	101	202	143	116	80	102	127	49	146	1,240
Re-visits to infants ... ..	648	163	423	426	211	411	488	339	239	454	3,802
Visits to children aged 1-5 years ... ..	1,578	606	1,653	783	612	1,329	928	968	625	1,138	10,220
1st visits to expectant mothers ... ..	129	41	124	121	87	72	65	68	34	101	842
Re-visits to expectant mothers ... ..	167	79	129	163	66	115	107	103	88	99	1,116
Futile visits ... ..	247	83	265	521	441	230	220	802	235	447	3,491
Interviews, etc. ... ..	547	118	537	466	490	251	457	193	350	653	4,062
1st visits to cases of ophthalmia neonatorum, etc. ... ..	1	—	1	1	4	2	1	—	—	—	10
Re-visits to cases of ophthalmia neonatorum, etc. ... ..	5	—	—	—	10	1	4	2	1	—	23
1st visits to cases of puerperal fever ... ..	—	—	1	—	—	1	—	—	—	—	2
Re-visits to cases of puerperal fever ... ..	—	—	3	—	—	—	—	—	—	—	3
1st visits to cases of puerperal pyrexia ... ..	2	1	4	1	2	1	—	—	—	1	12
Re-visits to cases of puerperal pyrexia ... ..	—	1	6	—	—	1	—	1	—	—	9
Health Visitors' attendances at centres:											
(a) Hoxton Market Institute ... ..	56	—	4	3	—	94	—	—	1	1	159
(b) Hoxton Hall ... ..	—	—	12	95	1	14	—	—	9	48	179
(c) St. Helen's Club ... ..	—	4	3	1	83	75	—	—	1	1	168
(d) Model Welfare Centre ... ..	145	355	117	190	81	51	—	—	74	70	1,083
(e) Haggerston Hall ... ..	1	—	52	—	—	—	—	—	—	—	53
(f) Harbour Lights ... ..	46	—	51	—	—	—	—	—	—	—	97
(g) School for Mothers ... ..	—	—	—	—	—	—	212	174	—	—	386

REPORT OF ATTENDANCES AT WELFARE CENTRES DURING THE 53 WEEKS ENDED 2ND JANUARY, 1937.

District .. .. .	1		2		3			4			5		6		7 & 8		9		10		Total	
Day .. .. .	Tuesday. a.m. p.m.		Mon.	Tue.	Wed.	Thu.	Fri.	Tuesday. a.m. p.m.		Fri.	Tue.	Fri.	Mon. Wed.		Tue.	Thursday.	Thursday. a.m. p.m.		Tue. a.m.	Thursday. a.m. p.m.		
Centre .. .. .	*M.C.		M.C.		M.C.	H.R.	H.L.	H.H.		M.C.	St. H.		H.I.		Herbert	St.	H.H.	M.C.	H.H.	M.C.		
1st attendances of infants	27	67	59	48	68	37	69	10	42	73	47	47	27	33	100	77	3	29	43	—	58	964
Total do. do.	602	1,030	859	670	868	661	928	230	834	1,292	1,015	791	570	535	1,445	1,293	26	466	708	12	1,126	15,961
1st attendances, children over 1 year.	17	17	19	35	14	16	8	1	15	21	6	11	14	12	27	28	—	12	8	—	18	299
Total do. do.	639	1,040	1,059	1,061	718	563	793	475	832	976	839	711	818	647	973	1,107	49	671	868	34	1,324	16,197
Attendances—Mothers without children.	117	305	282	253	265	189	355	136	206	194	289	253	368	301	—	—	2	165	337	2	390	4,409
First exam by Dr. : infants	30	67	59	47	66	39	67	10	46	71	42	44	28	34	100	77	1	31	42	—	58	959
Total infants seen by Dr.	318	584	497	403	629	430	567	110	468	764	528	406	330	320	1,024	882	1	215	354	—	435	9,265
First exam by Dr. : children 1-5 yrs.	5	19	20	34	14	16	8	1	14	21	7	12	12	11	26	27	—	12	9	2	18	288
Total children seen by Dr.	360	531	606	640	518	460	503	235	526	536	460	391	522	391	700	858	—	377	438	2	636	9,690
Suffering from disorders of digestion and nutrition	1,264		432		1,460			795			174		93		1,172		165		610		6,165	
Suffering from minor ailments.	487		356		1,220			703			257		576		1,239		199		553		5,590	
Referred to hospital ..	54		185		100			61			69		15		77		21		63		645	
1st ante-natal attendances	52		82		86			68			65		35		131		22		91		632	
Total do. do.	158		231		333			263			189		170		380		97		335		2,156	
1st post-natal attendances	13		20		21			25			23		7		41		15		28		193	
Total do. do.	19		23		33			25			27		10		91		19		29		276	
Sewing class attendances	217		209		62			209			3		—		459		89		250		1,498	

\*—M.C. = Maternity Centre, Kingsland Road. H.R. = Haggerston Road Mission Hall. H.L. = Harbour Lights, Goldsmith's Row. H.H. = Hoxton Hall, Hoxton Street.  
H.I. = Hoxton Market Institute, Boot Street. St. H. = St. Helen's Club, St. John's Road.

### INFANT WELFARE CENTRES.

In the Borough of Shoreditch there are 18 infant welfare clinics. Seven clinics are held at the Model Welfare Centre, 210, Kingsland Road, and the others are held at Hoxton Market Mission (two), Hoxton Hall (three), St. Helen's (two), Haggerston Road (one), Harbour Lights (one) and Herbert Street (two).

The total first attendances of infants during 1936 was 964, as compared with 1,048 in 1935. The figure for the total attendances was 15,961 as compared with 16,406 in 1935. The first attendances of children was 299 against 277 in 1935. The total attendances of children between one and five years was 16,197, against 18,024 for 1935. The average number of attendances per infant in 1936 was 16.6 and the corresponding figure for 1935 was 15.6. Practically all the children were seen by a doctor on at least one occasion.

The number of first examinations of infants was 959 (99.5 per cent.) of the total infants who attended on at least one occasion. The corresponding figure for children between one and five years was 288, which represents 96.3 per cent. of the total children at these ages who were examined on at least one occasion by one of the assistant medical officers for maternity and child welfare.

The work of the clinics proceeded as usual during the year and no detailed comments on their functions are called for. The total number of children who attended at the centres during the year, who at the end of the year were under one year of age, was 912, and the corresponding number between one and five years was 2,571; hence the total number of children under five years of age who were on the registers at the end of the year was 3,483. Of this total 645 were referred to hospital by clinic doctors during the year. This represents 18.5 per cent. of the total infants and children on the register and is a fairly high figure.

### SPECIAL CLINICS.

#### ARTIFICIAL SUNLIGHT CLINIC.

This clinic is equipped with two mercury vapour lamps. Additional sessions were commenced in June, 1934, on Tuesday and Thursday mornings, so that sessions are now held on six half-days each week. Particulars of those referred to the clinic during the last seven years are shown in the following table:—

	1930	1931	1932	1933	1934	1935	1936
Number of children ... ..	244	269	257	214	262	260	427
Number of mothers ... ..	—	—	—	—	21	44	45
Total attendances of children	4,095	4,973	5,552	5,655	5,654	5,813	6,599
„ „ mothers	—	—	—	—	284	462	498
Average number of visits per—							
Child ... ..	17	18.5	21.6	26.4	21.6	22.4	15.5
Mother ... ..	—	—	—	—	13.7	10.5	11.1
Average number of attendances per session—							
Children ... ..	20	24.5	27	27.9	23.9	19.4	21.3
Mothers ... ..	—	—	—	—	5.5	4.7	4.8

The conditions for which treatment was given during the year are shown in the following table :—

Muscular weakness ... ..	30	Anaemia ... ..	14
Debility ... ..	80	Bronchitis ... ..	12
Rickets ... ..	48	Malnutrition... ..	36
Late results of rickets ... ..	15	For prophylactic purposes ... ..	53
Enlarged glands ... ..	2	Other minor conditions ... ..	35

The diagnosis and progress of all cases referred to this clinic for rickets is confirmed by radiological examination. This work is carried out at St. Leonard's Hospital. The number of X-ray examinations made during the year was 42.

The members of the Sutton Branch of the Voluntary Aid Detachment continued, as they have done for many years, to render invaluable assistance at this clinic.

#### DENTAL CLINIC.

The dental treatment of cases of mothers and children referred by the clinic doctors is carried out by the dental surgeons in the municipal dental hospital. The following table summarises the work done in connection with this branch of the maternity and child welfare work since the hospital was opened on a full-time basis.

Year.	First attendances.		Total attendances.	
	Mothers.	Children.	Mothers.	Children.
1931	309	217	1,410	401
1932	306	223	1,421	426
1933	272	217	1,263	464
1934	266	263	1,541	680
1935	240	216	1,325	478
1936	245	310	1,365	716

During the year 245 women were referred from the maternity centres for dental examination ; 212 of these attended for a course of treatment. 1,365 visits were paid in all. 310 children were referred from the maternity centres, and 262 attended for a course of treatment. The total number of visits paid was 716. Further particulars regarding this work is given in the section on the dental hospital.

#### OTORRHOEA CASES.

For a number of years the otorrhœa clinic was held at the Model Welfare Centre every Saturday morning. Children who were found at the welfare centres to be suffering from otorrhœa were referred to the Queen's Hospital for Children, and thereafter the children attended the otorrhœa clinic, where treatment was carried out by a nurse from the Shoreditch and Bethnal Green District Nursing Association.

The following table gives particulars of the work which was carried out at this clinic since its inception.

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
1933 ... ..	64	1,082	16·90
1934 ... ..	58	432	7·5
1935 (48 weeks)...	42	690	16·43

For some time it was felt that certain mothers did not bring their children very regularly to have the prescribed course of treatment carried out, and at the beginning of December, 1935, the clinic was discontinued and arrangements were made for the cases to be visited regularly in their homes by the district nurses. The Superintendent of the nurses furnishes a weekly report on the condition of each case. No changes were made in the method of recommending patients for treatment. So far the new arrangement is working satisfactorily.

The number of cases visited by the district nurses during the year was 42, and the total visits made was 860. The average number of visits per patient was 20·5.

## INSTITUTIONS.

### BABIES' WARDS—MODEL WELFARE CENTRE.

This institution was opened in December, 1923, when the centre was built. There is accommodation for ten babies or eight babies and two mothers. The nursing staff consists of a matron, sister, three staff nurses and three probationer nurses. Acutely ill cases are not admitted, but the ward does good work in helping to tide infants and young children over some of the more difficult ailments of childhood.

At the end of the year 1935 nine patients were in residence, 70 children were admitted during the year and 70 were discharged or transferred to hospitals or convalescent homes. Particulars of the condition for which children were admitted are given in the following table:—

Debility and loss of weight	...	...	...	...	46
Rickets	...	...	...	...	1
General management	...	...	...	...	1
Weaning	...	...	...	...	6
Mothers in hospital	...	...	...	...	3
Vomiting	...	...	...	...	1
Test feeds	...	...	...	...	9
Mothers admitted with their infants for the establishment of breast feeding	...	...	...	...	3



The average duration of stay in the wards of these children was six weeks and three days.

Of the 70 children who were discharged during the year, 6 were healthy, 57 were much improved, 2 were improved and 5 were sent to convalescent homes. There was one death during the year.

The Committee of the School for Mothers administers two institutions, viz., 28, Herbert Street and the Brunswick Day Nursery, Brunswick Place.

#### 28, HERBERT STREET.

This is an institution which has for many years worked in close co-operation with the Borough Council, which contributes a grant of £1,205 per annum towards the expenses of the institution. The Committee employs two health visitors and the western portion of the borough, in which this institution is situated, is allocated to them. A note of all births is sent from the public health offices and these two health visitors are responsible for all visits in this district. Two infant welfare centres, one weighing centre, one ante-natal consultation centre, and a sewing class are held weekly.

During the year 177 infants attended at the centre for the first time and 2,738 total attendances were made. The number of first attendances of children between one and five years of age was 55, and the total number of attendances was 2,080. These figures may be compared with the corresponding figures for the year 1935 when 244 infants and 66 children had their first examination by the doctor in charge. The total examinations of infants by the doctor numbered 1,906, and of children from one to five years, 1,558. One hundred and thirty-one expectant mothers attended the clinic on 380 occasions and 41 mothers attended on 91 occasions after their confinements. These figures are recorded in the table on page 97.

#### BRUNSWICK DAY NURSERY.

This nursery accommodates 40 children. The staff consists of the doctor in charge who visits the nursery weekly; a matron, a staff nurse and five probationer nurses. The domestic staff is made up of a daily cleaner and laundry woman who attends on two days a week. A local practitioner is called in in emergencies. During the year 1936 the whole day attendances were 7,192 and half-day, 690, the corresponding figures for 1935 being 7,277 and 752 respectively.

#### SUN BABIES' NURSERY, NORRIS STREET.

The nursery has accommodation for 100 children. With this number the buildings are rather crowded and the average attendance is usually less. For several years an annual grant was paid by the Borough Council in consideration of the value of the work which was done by this nursery. With the discontinued Ministry grant, this figure makes a total of £1,200, which is the annual contribution of the Borough Council to this institution.

The medical officer-in-charge—Dr. Morton—attends once weekly for the purpose of examining children. The services of a local practitioner are available in an emergency.

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 Annual Report for 1933). In the case of parents whose income falls within the half-price scale, the Council pays 4½d. per day to the Nursery and the parent 4½d. Payments under this scheme amounted, during 1936, to £134 17s. 0d. In addition a grant of £5 12s. 9d. was made towards the cost of holidays for 12 children. 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 ... ..	69	4,508	124	4,632
1931 ... ..	64	5,316	265	5,581
1932 ... ..	158	5,980	61	6,041
1933 ... ..	75	5,292	164	5,456
1934 ... ..	62	5,562	124	5,686
1935 ... ..	70	6,775	136	6,911
1936 ... ..	38	3,475	242	3,717

In order to ensure continuity of feeding of the bottle-fed babies attending the Nursery, milk (wet or dry) is supplied by the Nursery to the mothers of these babies for feeds at night and during week-ends.

The total number of whole-day attendances at this nursery during 1936 was 17,532, and of half-day attendances 800. The corresponding figures for 1935 were : whole-day, 19,220 ; half-day, 1,118.

The resident staff of the Nursery consists of a matron, two nurses, two probationers, a day nursery teacher and a cook. The cleaning and laundry staff are non-resident.

Dr. Morton in her report to the Medical Officer of Health on the medical aspect of the work of this institution for 1936 states as follows :—

*Incidence of infectious disease.* The year was marked by the prevalence of measles and also by a minor outbreak of scarlet fever during June and July and by isolated cases of diphtheria. The following cases occurred during the year :—diphtheria, 7 ; scarlet fever, 13 ; measles, 34 ; chicken pox, 1 ; pneumonia, 3 ; influenza, 5 ; diarrhoea and vomiting, 2 ; impetigo, 1 ; tonsillitis, 2.

*Light treatment.* During the year 68 children received this treatment for various conditions.

*Convalescence.* During the year 52 children were sent to convalescent homes individually or in batches for periods varying from two to eight weeks.

#### EMERGENCY OPEN-AIR NURSERY.

By an arrangement entered into between the Borough Council and the Secretary of the Emergency Open-air Nursery School, Trinity Place, Shepherdess Walk, 20 Shoreditch children under the age of five years can be sent to this institution.

This Nursery is situated in the western part of the Borough, and was established expressly for children whose parents are receiving public assistance, and are not therefore in a position to pay the usual nursery fee of one shilling per week.

The amount paid for this service by the Council is 1s. 8d. per week of 5 days per child, which amount is said to cover the cost of the food supplied.

The number of individual children sent to this Nursery during the year was 26. The attendances were 1,135 at full cost, and 26 at half cost, the total being 1,161, and the cost £19 2s. 8d. An allowance of £2 10s. was made in respect of summer holidays of children.

#### QUEEN'S HOSPITAL FOR CHILDREN.

An agreement was entered into on the 22nd January, 1930, whereby, in consideration of a payment of £150 per annum (increased since that date to £200 per annum) children might be sent to the hospital for examination and report by a member of the honorary staff, for treatment at the minor ailment centre, or for admission to hospital for examination and treatment. The following are particulars of the cases referred under this agreement since 1930 :—

Year.	IN-PATIENTS.		OUT-PATIENTS.		CASUALTY.	
	Number.	Days.	New cases.	Attendances.	New cases.	Attendances.
1930	2	—	—	107	—	121
1931	13	235	133	597	155	276
1932	37	624	192	909	189	729
1933	35	616	255	1,191	225	597
1934	33	517	167	911	169	708
1935	50	1,103	206	796	195	698
1936	54	1,029	185	832	184	708

#### CONVALESCENCE.

In my annual reports for the last two years mention was made of the fact that existing facilities for convalescence were entirely inadequate, and in the report for 1935 details were given of an investigation into the requirements of the Borough so far as facilities for convalescence are concerned. Since May, 1936, detailed figures

have been kept of all children who are reported by the Clinic doctors as requiring convalescence. The following table gives particulars of these cases under the different categories :—

(a) Very urgent	...	...	...	...	...	35
(b) Moderately urgent	...	...	...	...	...	81
(c) Convalescence when convenient				...	...	27

The existing facilities are as follows :—(i) through the Invalid Children's Aid Association ; (ii) through the Association of Infant Welfare Centres.

In June, 1936, an arrangement was made with the Association of Maternity and Child Welfare Centres for the reservation of two beds for mothers and babies at the Mayfield Convalescent Home. The Home was opened in August. The figures for cases dealt with through these three channels are as follows (the categories being as indicated above) :—

			1933.	1934.	1935.	1936.
(a)	...	...	16	9	6	18
(b)	...	...	18	20	21	20
(c)	...	...	—	—	—	13

In addition to the above 14 mothers were sent to various Homes during the year.

Mrs. Gwendolin Choyce very kindly made a grant towards the cost of convalescence of children belonging to a certain area of the Borough, and this fund enabled 7 children to be sent to convalescent homes. This gift was much appreciated by the Borough Council.

#### NURSING.

The District Nursing Association undertakes the nursing of children under five years and of parturient women referred to them by medical practitioners and by the Maternity and Child Welfare Department. The number of cases visited was 306 and the number of visits paid 2,998. The particulars of these cases will be found on page 59 of this report.

#### INFANT LIFE PROTECTION.

On 1st January, 1936, there were eight registered foster mothers in the Borough, each having the care of one child. During the year three new foster mothers applied for registration. One was removed from the register.

During 1936, 138 visits were paid, 74 to registered cases, the remainder being to the following :—

- (1) To children who were returned to their parents from foster mothers living out of the Borough.
- (2) To people wishing to adopt children.
- (3) To women who undertake the care of children without registration.

The care exercised by the foster mothers has been of a high standard. In two cases there was some overcrowding of the home. In one of these cases this was due to the fact that the child had to be temporarily transferred owing to the regular foster mother having had to undergo an urgent abdominal operation. There was one death of a foster child; this child was removed to hospital with whooping cough and died in hospital. No inquest was held, the coroner being satisfied that the foster mother had taken every possible care of the child.

During the year five un-registered foster mothers were found in the Borough. Of these one had already returned the child to its parents when she was visited; two were removed by the parents when the foster parents were told that they must register; and two foster mothers refused to register and returned the children to their own homes. In each instance the foster mother concerned pleaded ignorance of the fact that she was required to register. Five of the foster children are of school age and attend regularly. Those who are not of school age attend the infant welfare centre.

#### DINING CENTRES.

There are two dining centres in the Borough, both of which are under the control of the Maternity and Child Welfare Committee. Necessitous mothers receive dinners on production of a certificate from the assistant medical officer of health. Liability is determined by the milk scale. The number of mothers who attended during 1936 and the preceding five years is shown in the following table:—

Model Welfare Centre.						
	1931.	1932.	1933.	1934.	1935.	1936.
Number of individual mothers attending ... ..	183	234	229	169	149	132
Total attendances ... ..	11,552	14,130	13,635	10,312	7,102	6,939
31, Herbert Street.						
	1931.	1932.	1933.	1934.	1935.	1936.
Number of individual mothers attending ... ..	148	201	194	149	127	95
Total attendances ... ..	10,046	13,659	12,017	10,406	8,400	6,355

In October, 1932, 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. The number of individual toddlers who attended for dinners during the year was 109, and the total number of attendances was 6,753.

#### MILK ALLOWANCES.

Particulars regarding the scale of income and the quantities of milk allowed under this scheme were given in the Annual Report for 1933.

The number of individuals in receipt of milk or dinner allowances was 783 at the beginning of the year ; it rose to 848 in February, but fell to 723 in August, and, by the end of the year, it had again risen to 774.

### 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 ten years were 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
1933	...	...	...	560	...	573
1934	...	...	...	606	...	637
1935	...	...	...	478	...	875
1936	...	...	...	459	...	1,039

### NATIONAL PARENTCRAFT COMPETITION.

During the year the number of entries for the National Parentcraft and Health Week Competitions was 275.

For several years mothers and fathers have been encouraged to enter for these competitions and have acquired much of their knowledge on maternity and child welfare matters at the centres.

It is with pleasure that I mention the result of the National Parentcraft Competition held in May. In this competition Shoreditch was awarded the Silver Medal for all England. The successes included 5 Honours Certificates, 7 First Class Certificates and 2 Second Class Certificates. The Silver Medal referred to was presented to the Chairman of the Maternity and Child Welfare Committee (Alderman Miss E. Kellett), on behalf of the Council, by Mr. Geoffrey Shakespeare, M.P., Parliamentary Secretary to the Ministry of Health, at the National Conference on Maternity and Child Welfare which was held at Liverpool on 1st July.

### VOLUNTARY WORKERS.

It is fitting to close this section of the report with an expression of appreciation of the services of those ladies who have attended voluntarily for the purpose of assisting with the work of the various centres and clinics.

## HEALTH OF THE PRE-SCHOOL CHILD.

This subject has exercised the attention of all administrators during 1936. Towards the close of the year I submitted a report to the Council on this subject, and it is reprinted here verbatim.

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REPORT OF THE MEDICAL OFFICER OF HEALTH ON ARRANGEMENTS  
FOR THE SUPERVISION OF PRE-SCHOOL CHILDREN IN SHOREDITCH.

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*(Submitted to the Council, 15th December, 1936.)*

PUBLIC HEALTH OFFICES,

8-14, LABURNUM STREET, E.2.

28th October, 1936.

I.—On the 29th May, 1936, the Ministry of Health issued Circular 1550, which deals with the existing arrangements for the care and supervision of the health of children aged 18 months to five years, and suggests various means whereby these arrangements may be improved. The circular states that the Council of each Local Authority should review its existing arrangements and inform the Ministry of the results of their consideration of the suggestions made in the circular.

Before summarising the contents of the circular, I desire to draw attention to the fact that it applies to England and Wales as a whole and not only to London.

The circular states that the Minister has had under consideration the arrangements made by Local Authorities generally for the supervision of the health of children not in attendance at school. He is convinced that in general the arrangements are satisfactory in so far as they apply to children up to 18 months or two years, but he is concerned to find that in many areas insufficient attention is being given to the health of young children between 18 months and five years of age and he understands that more than 16 per cent. of the children entering school are found to require treatment for some disease or defect which would have been prevented or cured if there had been adequate supervision during the pre-school years.

The Minister mentions that even if the policy of the Government with regard to the provision of nursery schools and the admission of children under five years of age to elementary schools has been followed, there will still be a considerable number of children under five years who will remain at home, and in the interests of their health it is essential that in all areas there should be systematic periodical health visiting of those young children who are not in attendance at school. The Minister states that it should be the duty of the health visitor to see these children at regular intervals, to make enquiries as to their state of health and to be on the look-out for

any signs or symptoms which suggest a departure from normal health. In all cases where there is ground for suspecting disease or defect, the mother should be advised to consult the family doctor, or to take the child to the appropriate clinic for medical examination, without any delay.

In paragraph 5 it is stated that in some areas special arrangements have been made for the holding of toddlers' clinics at the infant welfare centres, and there is much to be said for these arrangements if the mothers can be persuaded to bring the toddlers periodically to the clinic for examination by the doctor. But the success of these clinics will depend to a great extent on the regular visiting of the homes by the health visitor and on the relations which she is able to establish with the mothers.

In paragraph 6 the Minister mentions that the school clinic should be made more readily available for the treatment of minor ailments and special defects in young children, and that it is desirable that special arrangements should be more generally made. In those areas in which the maternity authority is not also the Local Education Authority, these needs may be reached by agreement between the authorities, or more readily if the maternity service is in the hands of the Local Authority responsible for the school medical services.

In paragraph 7 the Minister suggests that, where the responsibility is divided between the two authorities, there is provision in section 60 of the Local Government Act, 1929, whereby representations may be made to him by the Council which is the local education authority that it is desired that the maternity and child welfare services should be transferred to them. It should be noted, however, that Section 60 of the Local Government Act, 1929, does not apply to London.

In paragraph 8 the Minister states that it is clear that the success of any efforts to secure adequate supervision of the health of young children will depend to a large extent on the efficiency of the health visiting staff, and that in many areas it may be necessary to increase that staff. The Minister regrets to find that in some areas the salaries offered for these posts are inadequate.

In paragraph 9 the Minister mentions that in certain areas day nurseries have been established for the care of young children whose mothers go out to work or whose home conditions are such that their health would benefit by the daily supervision which can be secured in this way. He suggests that Councils should consider the desirability of establishing such institutions.

II.—In order that the Maternity and Child Welfare Committee may consider what, if any, additions to existing facilities are necessary, I propose to review the present services. As the Minister suggests that generally the arrangements for the care of infants are adequate, this report will deal only with children aged one to five years.



III.—The estimated number of children between the ages of 12 months and five years in Shoreditch is as follows :—

<i>Age.</i>					<i>Number of children.</i>
1—2 years	...	...	...	...	1,341
2—3	„	...	...	...	1,350
3—4	„	...	...	...	1,487
4—5	„	...	...	...	1,480
					—
	Total	...	...	...	5,658
					—

Of this number, 1,400 attend schools or nursery schools, and a further 250 attend day nurseries.

The arrangements which have already been made for the care of toddlers in the Borough will be dealt with under the following headings :—

- (a) Infant Welfare Centres.
- (b) Medical Staff and Supervision.
- (c) Health Visiting Staff and Home Visiting.
- (d) Hospital Treatment.
- (e) Minor ailments.
- (f) Dental Treatment.
- (g) Artificial Sunlight Treatment.
- (h) Orthopædic Treatment.
- (i) Convalescent Homes.
- (j) Home Helps.
- (k) Day Nurseries.
- (l) Home Nursing.
- (m) Supply of Extra Nourishment.

#### (a) INFANT WELFARE CENTRES.

In the Borough of Shoreditch 16 child welfare clinics are held weekly under municipal auspices and two clinics are conducted by a voluntary association—The School for Mothers, 28, Herbert Street, N.1. Seven of the municipal clinics are held at the Model Welfare Centre, 210, Kingsland Road, E.2, and the others are : Hoxton Market Institute, 2 ; Hoxton Hall, 3 ; St. Helen's, 2 ; Haggerston Hall, 1 ; Harbour Lights, 1. The centres are so arranged that no mother has a long distance to travel to a clinic. It has been the practice for toddlers to attend at these clinics and no special clinics have been instituted for children between the ages of 12 months and five years.

During 1935, 81·24 per cent. of the children born in the Borough during that year attended a child welfare centre in the Borough.

The following are the statistics of the work carried out during 1935 :—

Total number of individual children aged 12 months to five years attending the infant welfare centres ... ..	2,565
Total number of attendances of children of these ages at the infant welfare centres ... ..	18,024
Total number of attendances of children of these ages at doctors' consultations at the centres ... ..	10,001
Average number of children aged 12 months to five years examined at each of the doctors' consultations at infant welfare centres ...	11.5

Considering children as a whole, the average number seen by doctors at each session at the centres was 21. This number is rather large, and possibly the work would be improved if a special clinic or clinics were instituted for toddlers.

#### (b) MEDICAL STAFF AND SUPERVISION.

One whole-time and seven part-time medical officers are employed at the child welfare clinics. Of the part-time medical officers, one is employed by the School for Mothers referred to above. Several of the part-time officers are consultants who are attached to important hospitals for children in London.

At the present time this staff is adequate, but if new clinics are instituted its adequacy will have to be reconsidered.

#### (c) HEALTH VISITORS AND HOME VISITING.

The Council employ eight whole-time health visitors, three of whom have additional duties apart from those strictly concerned with the visiting of children in their homes and in attending at child welfare clinics. The School for Mothers, 28, Herbert Street, employs two health visitors. These two voluntary visitors are employed in the western portion of the Borough, so that there is no overlapping of the duties of municipal and voluntary health visitors respectively. Efforts have been made to standardise the work of these municipal and voluntary workers, and investigations which are being made by the municipal health visitors should also be carried out by the voluntary health visitors. In my opinion, however, it would be a distinct advantage, from the point of view of the co-ordination of the work, if these two voluntary workers were members of the Public Health Department.

All the Council's health visitors are paid on the London District Council scale of salaries, viz., commencing at £232 17s. and rising by annual increments of £12—£13 to a maximum of £390 per annum, so that the remarks on salaries which are found in the circular do not apply so far as the members of the Council's staff are concerned. Of the two health visitors employed by the voluntary association, one receives £250 per annum, and the other £230 per annum, and there is no recognised scale of increments.

The total number of births in the Borough during 1935 was 1,290. During the same year the total number of visits paid by health visitors to children aged one to five years was 8,838, and the average number of visits to each child aged one to five years was 1.5.

(d) HOSPITAL TREATMENT.

In the wards at the Model Welfare Centre, ten beds are provided for children under five years of age and facilities are also available for admitting mothers with their infants. During 1935, 62 children were admitted. Of these 62 children, 24 were between the ages of one and five years. Most of these were suffering from debility or loss of weight, but a few cases were suffering from other minor ailments. Six years ago an agreement was entered into with the Queen's Hospital for Children whereby children attending the welfare centres could be sent to the hospital for examination or for admission. During 1935, 50 children were admitted to the wards, and the total number of in-patient days in respect of these patients was 1,103. 206 new cases attended as out-patients and 195 cases as casualties.

(e) MINOR AILMENTS.

Most of the work in connection with minor ailments is carried out at the Queen's Hospital for Children—as was mentioned above. During 1935, in addition to medical and surgical cases, the "casualties" included 58 ear, nose and throat cases, and 32 children suffering from skin conditions. Children suffering from eye conditions are usually sent to the Moorfields Eye Hospital. Otorrhœa cases were formerly treated at a special clinic which was held at the Model Welfare Centre. At the beginning of December, 1935, this clinic was discontinued, and arrangements were made for the cases to be visited regularly in their homes by the district nurses. From December, 1935, to the end of September, 1936, 36 individual children were treated: these children were visited on 720 occasions.

In addition to the cases sent to the above hospitals, a few children are occasionally sent to the following hospitals: St. Leonard's Hospital, Metropolitan Hospital, The Hospital for Sick Children (Great Ormond Street), St. Bartholomew's Hospital, and the London Hospital.

(f) DENTAL TREATMENT.

At the Municipal Dental Hospital complete facilities are provided for the treatment of dental conditions in children between the ages of one and five years, and for the inspection of their teeth with a view to the prevention of dental caries. During 1935, 222 children between the ages of one and five years attended the Dental Hospital for examination and 186 of these attended subsequently for treatment. The total number of attendances of these 222 children was 473, giving an average attendance per child of 2.13. 563 extractions of individual teeth were performed on these 222 children and 175 fillings were carried out.

In recent reports I stressed the importance of periodic examination of the teeth of young children, and as a result of a scheme which I recently initiated, selected children are referred to the dental surgeon and their mothers are requested to bring them at intervals of three months for inspection of their teeth and any treatment which may be necessary. Since this scheme was commenced in May, 1936, 39 children have attended for examination and treatment, if necessary, and the numbers are rapidly increasing.

It may be said that this Shoreditch scheme of municipal dental treatment is almost unique, and that by it the requirements of the pre-school children are very effectively met.

(g) ARTIFICIAL SUNLIGHT TREATMENT.

In the Model Welfare Centre there is an artificial sunlight clinic which is equipped with two mercury vapour lamps, and sessions are held on six half-days each week. During 1935, 260 children between the ages of one and five years attended, and the total number of attendances made by these children was 5,813, the average number of visits per child being 22·4. These arrangements are sufficient to meet the needs.

(h) ORTHOPÆDIC TREATMENT.

Orthopædic cases are relatively infrequent, and the majority of these are sent to the Queen's Hospital for Children. During 1935, 14 of these cases were dealt with in this way.

(i) CONVALESCENT HOMES.

At the present time the following facilities are available for the convalescence of children at homes under the management of:—

- (a) The Invalid Children's Aid Association.
- (b) The Association of Infant Welfare Centres (Letchworth).
- (c) Other agencies.

In a report presented to the Maternity and Child Welfare Committee some time ago, I suggested that the Council should establish a municipal convalescent home. Negotiations for the purchase of suitable premises were initiated.

As a result of special enquiries it was shown that on an average about 75 children between the ages of one and five years required convalescent treatment per annum, and, in addition to these children, there was a considerable number who would profit by convalescent treatment if this were readily available. A more detailed enquiry which has been in progress since May shows that in six months 18 children were reported to me as urgently requiring convalescent treatment, and that another 61 children were reported as requiring convalescent treatment as soon as this could be arranged.

There is no question that adequate facilities are not at present available for convalescent treatment in respect of children resident in the Borough.

*(j)* HOME HELPS.

Under the Council's maternity scheme, home helps are provided for women who have toddlers at home when the mother has to enter hospital for her confinement. Further, the Maternity and Child Welfare Committee, on 11th January, 1935, approved of my suggestion whereby a home help might also be provided for a period of a fortnight—to be extended, if necessary—in cases where the mother was suffering from some illness other than that arising out of parturition, and where, at the same time, assistance would be helpful. During 1935, it was only necessary to provide two home helps on these grounds.

*(k)* DAY NURSERIES.

There are in Shoreditch three day nurseries—all established under voluntary agencies. The Sun Babies' Nursery, Norris Street, has accommodation for 100 children; the Brunswick Place Day Nursery has accommodation for 40 children, and the Emergency Open-air Nursery School, Trinity Place, has accommodation for 40 children, so that there is day nursery accommodation in the Borough for 180 children. Although the Sun Babies' Nursery takes also children from Islington, the majority of the children who attend reside in Shoreditch.

In 1934 an arrangement was entered into between the Borough Council and the Secretary of the Emergency Open-air Nursery whereby ten children under five years of age could be sent to the institution. In April, 1935, this number was increased to 20 and during that year 23 children were sent to the nursery. These children made a total of 1,384 attendances. Apart from these 23 children who had "free places" in the nursery, other 39 children attended this nursery during the year. The total number of attendances at the Sun Babies' Nursery was 19,220, and at the Brunswick Place Day Nursery the whole-day attendances were 7,277.

It might be thought that the needs of the Borough so far as day nurseries are concerned are adequately met, but in view of the Minister's suggestions, and in view also of the fact that a proportion of the population of Shoreditch consists of families in which the mother goes out to work, it might be advisable to reconsider the question. I am of opinion that, in view of the Council's financial responsibilities in the case of certain day nurseries, more active supervision should be exercised, and I especially desire to emphasize the point that if, in the future, further day nursery accommodation is required, this should be supplied by the Borough Council.

*(l)* HOME NURSING.

Facilities are available for the nursing of patients in their homes and an arrangement is in force under which the Shoreditch and Bethnal Green District Nursing Association carry out this work. During 1935, 221 children between the ages of one and five years were visited by these nurses, the total number of visits made being 2,086.

*(m)* SUPPLY OF EXTRA NOURISHMENT.

Under the Maternity and Child Welfare Act, 1918, the Council provides grants of milk, free or at reduced cost, to mothers and children. Milk, free or at reduced cost, is also supplied to expectant mothers. Additional allowances of milk may be made to children between the ages of three and 18 months on special medical certificate, and such a certificate is also required for an ordinary allowance of milk to children between the ages of three and five years, or for the provision of dinners to toddlers.

In special cases the usual amounts of wet or dried milk may be increased by 50 per cent. on production of a medical certificate to that effect. The gross annual cost of this service is about £4,000, about £700 of which is recovered from the recipients.

During 1935, 18,331 gallons of milk were distributed to persons in the Borough, and it is estimated that of this amount 12,341 gallons were distributed to children between the ages of one and five years. In the same period 30,329 lbs. of dried milk were distributed to children of all ages.

There are in the Borough two dining centres, both of which are conducted under the supervision of the Medical Officer of Health. One centre is at the Model Welfare Centre and the other is at 31, Herbert Street. In October, 1932, a scheme was commenced under which selected children under five years of age who are eligible on financial grounds to receive milk allowances should as an alternative be allowed dinners. The number of individual toddlers who attended during the year 1935 was 121 and the total number of attendances was 6,596.

It is estimated that the average monthly number of persons in receipt of food allowances—including wet and dried milk and dinners—is 750 throughout the year.

A scheme for the supply of free cod liver oil was introduced many years ago, and, during 1935, 121 gallons were supplied free to children.

## IV—DISCUSSION.

It was mentioned on page 2 (i.e., page 109 of this Report) that there are in the Borough of Shoreditch approximately 5,658 children between the ages of one and five years, and it might be assumed that the majority of these children belong to families which are of a type suitable for some supervision by officials of the Public Health Department. Of these 5,658 children, I have ascertained that approximately 1,400 attend schools and nursery schools. The actual attendances of Shoreditch children at day nurseries during 1935 was approximately 270. Further, during 1935, 2,565 children attended the child welfare clinics. The total number of children who were under supervision was therefore 4,235. This leaves a balance of 1,423 children between the ages of one and five years who are presumably not having any supervision. It is desirable that any scheme which is suggested should permit of the visiting of each of these children three times per year.

It will be advantageous to criticise briefly the existing services which are enumerated in the preceding pages.

(i) **INFANT WELFARE CENTRES.**—I am of the opinion that the children of Shoreditch are being extremely well catered for in the way of child welfare clinics. The attendances of children between the ages of one and five years might presumably be higher, but they compare favourably with the attendances in many other areas.

In the circular the Minister suggests that special clinics should be established for toddlers. I believe that a special toddlers' clinic permits the medical officer in charge to concentrate more on diseases, such as rickets, which are prevalent at these ages, and from this point of view the inauguration of such a clinic is commendable. On the other hand it must be borne in mind that special clinics imply special visits on the part of the mothers, and consequently a temptation to cut down attendances at other clinics. In view however of the Minister's very definite statement, I suggest that a toddlers' clinic should be established at an early date, and that further action should be dependent upon the measure of success achieved after an experimental period of six months. In my opinion no additional staff would be required for this experimental period.

(ii) **MEDICAL STAFF AND SUPERVISION ; HEALTH VISITING STAFF AND HOME VISITING.**—Although the Council has a fairly large staff of health visitors it should be remembered that the number of sessions at clinics is also very large, so that the proportion of the work which would otherwise be done in the homes of the children is carried out at the centres ; and, although the opening of a new centre in congenial surroundings is a matter upon which any Council will pride itself, it should nevertheless not be overlooked that the primary function of the health visitor is to get into contact with individual children in their own homes. In Shoreditch, possibly one side of the work has been somewhat overshadowed by the magnitude of the other. I am unwilling to suggest any extensive addition to a staff which is at present considerable, but, if a satisfactory number of visits is to be paid to the 1,400 children who are not at present receiving attention, some addition must be made. I believe that by administrative re-arrangements and by the appointment of one additional health visitor, the number of visits to children between the ages of one and five years could be markedly increased. At a later date it will be possible to decide whether the appointment of one additional health visitor is sufficient.

(iii) **HOSPITAL TREATMENT ; MINOR AILMENTS.**—The provision for hospital treatment appears to be satisfactory. The arrangements for minor ailment treatment are also satisfactory. It might however be possible to make some use of the London County Council clinics which have already been established for this purpose, and I intend to give consideration to this matter.

(iv) The arrangements for dental treatment and artificial sunlight treatment are quite satisfactory.

(v) The arrangements for the provision of orthopædic treatment are satisfactory but it might be desirable to overhaul the machinery for the follow-up of these cases so that some check might be obtained of the progress which has been made.

(vi) Emphasis has already been placed on the fact that provision of convalescent treatment is not at present satisfactory, and I suggest that the Council should not relax their efforts to obtain a convalescent home.

(vii) The arrangements for home helps, home nursing and the supply of extra nourishment are satisfactory.

(viii) I believe that there is in the Borough further need for day nursery accommodation, and I suggest that the Council should consider the establishment of a municipal day nursery.

I desire to draw special attention to the suggestion which is put forward in paragraph 6 of the Minister's circular, namely, that the maternity and child welfare services should be handed over to the Local Education Authority, which is in this case the London County Council. Such a procedure might be very advantageous in the case of a Local Authority which is constituted as a whole, but, in the case of the Administrative County of London, the varying environmental conditions in different constituent parts renders it desirable that the local needs should be met by bodies who are closely connected with these areas, and that the necessary work should be carried out by officials who are responsible to such local bodies. In Shoreditch the needs of the child population, especially as regards the provision of clinics, has been extremely well met, and this end has probably been attained largely because of the close association between officials and the members of the community.

It is suggested that the health of young children can best be preserved if the doctors who are responsible for child welfare work are also responsible for school medical work. While this argument may hold for a small authority, it seems to me that it is quite fallacious when an authority of any size is considered. Other arguments can easily be given against the suggestion which is put forward, and there is no doubt that any attempt to further this scheme will be met by the concentrated opposition of all the Metropolitan Boroughs.

#### V—RECOMMENDATIONS.

To summarise, I recommend—

- (a) The establishment of a toddlers' clinic for an experimental period of six months.
- (b) The appointment of an additional health visitor. This appointment should be made as early as possible.



- (c) That the Council should continue their efforts to secure the establishment of a municipal convalescent home.
- (d) That the Council should consider the establishment of a municipal day nursery.
- (e) That a copy of this report should be sent to the Minister of Health with the assurance that the needs of the toddler will receive the continued attention of the Council.

E. ASHWORTH UNDERWOOD,  
*Medical Officer of Health.*

#### 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 1936.

*Routine Medical Inspection of Elementary School Entrants in Shoreditch in 1936.*

†—Defects found. \*—Noted for treatment and included in defects found.

Disease or Defect.	Boys 743.			Girls 737.		
	Shoreditch. No.	Per cent.	London. Per cent.	Shoreditch. No.	Per cent.	London. Per cent.
Skin disease ... .. †	8	1.1	1.0	6	0.8	1.0
... .. *	7	1.0	0.7	5	0.7	0.6
Tonsils only ... .. †	117	15.9	14.0	98	13.3	13.6
... .. *	37	5.0	5.6	30	4.1	5.1
Adenoids... .. †	6	0.8	1.0	1	0.1	0.7
... .. *	5	0.7	0.6	1	0.1	0.5
Tonsils and adenoids ... †	2	0.3	3.3	4	0.5	2.9
... .. *	—	—	2.3	1	0.1	2.0
Other nose and throat ... †	9	1.2	1.2	3	0.4	1.0
... .. *	2	0.3	0.4	1	0.1	0.4
Glands of neck ... .. †	55	7.5	3.1	56	7.6	2.5
... .. *	1	0.1	0.3	—	—	0.3
Eye disease ... .. †	23	3.1	2.8	22	3.0	3.1
... .. *	14	1.9	1.7	14	1.9	1.8
Otorrhœa ... .. †	4	0.5	1.0	4	0.5	0.9
... .. *	—	—	0.6	2	0.3	0.5
Other ear defects ... †	2	0.3	0.3	5	0.7	0.4
... .. *	2	0.3	0.2	1	0.1	0.2
Hearing ... .. †	—	—	0.2	1	0.1	0.2
... .. *	—	—	0.1	1	0.1	0.1
Speech ... .. †	—	—	0.3	—	—	0.2
... .. *	—	—	0.0	—	—	0.0
Heart ... .. †	6	0.8	1.5	10	1.4	1.3
... .. *	—	—	0.1	—	—	0.1
Anæmia ... .. †	—	—	0.7	1	0.1	0.6
... .. *	—	—	0.3	1	0.1	0.3
Lungs ... .. †	25	3.4	3.7	25	3.4	3.3
... .. *	4	0.5	1.4	5	0.7	1.3
Epilepsy ... .. †	—	—	0.0	1	0.1	0.0
... .. *	—	—	0.0	—	—	0.0
Chorea ... .. †	—	—	0.0	1	0.1	0.0
... .. *	—	—	0.0	1	0.1	0.0
Paralysis ... .. †	—	—	0.1	—	—	0.0
... .. *	—	—	0.0	—	—	0.0
Other nervous diseases... †	—	—	0.4	1	0.1	0.4
... .. *	—	—	0.1	—	—	0.1
Pulmonary tuberculosis †	—	—	0.1	2	0.3	0.0
... .. *	—	—	0.0	1	0.1	0.0
Other tuberc. lesions ... †	1	0.1	0.1	—	—	0.0
... .. *	—	—	0.0	—	—	—
Rickets ... .. †	2	0.3	1.1	—	—	0.5
... .. *	—	—	0.1	—	—	0.1
Spinal deformities ... †	—	—	0.1	—	—	0.1
... .. *	—	—	0.1	—	—	0.0
Other deformities ... †	3	0.4	1.1	1	0.1	0.9
... .. *	1	0.1	0.4	—	—	0.3
Other defects ... .. †	15	2.0	2.6	8	1.1	2.3
... .. *	7	1.0	1.6	4	0.5	1.4

Percentage of boys requiring treatment for all defects ... 53.0 London 48.2 per cent.

Percentage of boys requiring treatment for all defects

(excluding teeth) ... .. 11.3 „ 15.5 „ „

Percentage of girls requiring treatment for all defects ... 50.8 „ 48.3 „ „

Percentage of girls requiring treatment for all defects

(excluding teeth) ... .. 10.0 „ 14.1 „ „

ROUTINE MEDICAL INSPECTION OF ELEMENTARY SCHOOL ENTRANTS IN SHOREDITCH IN 1936.

	Number examined	Clothing and boots.			Nutrition.				Cleanliness of head.			Cleanliness of body.			Teeth.				
		Good	Fair	Poor	Good	Average	Below normal	Bad	Clean	Nits	Pediculi	Clean	Dirty	Pediculi	All sound	Less than 4 decayed	4 or more decayed	For treatment	
Entrants—																			
Boys ... ..	734	164	556	14	60	636	37	1	623	105	6	679	52	3	359	250	125	340	
Girls ... ..	737	144	569	24	58	635	44	—	593	128	16	680	52	5	376	256	105	328	
Total ... ..	1,471	308	1,125	38	118	1,271	81	1	1,216	233	22	1,359	104	8	735	506	230	668	
Percentage, Shoreditch		20.9	76.5	2.6	8.0	86.4	5.6	—	82.7	15.8	1.5	92.4	7.1	0.5	50.0	34.4	15.6	45.4	
Percentage, London ...		57.8	41.8	0.4	15.1	78.6	6.3	—	97.8	1.9	0.3	99.2	0.8	0.0	57.3	34.5	8.2	39.2	

## VI.—MUNICIPAL DENTAL HOSPITAL.

The year 1936 was marked by the continued expansion of the work of the dental hospital, and by the necessity for adding to the existing staff.

In July, 1936, the Council, acting on a report of the Medical Officer of Health, agreed to the holding of two additional dental clinics weekly, and to the appointment of a temporary assistant dental surgeon for that purpose. Mr. H. V. E. Jessop, L.D.S., took up his duties on the 13th July and the additional clinics have been held continuously since that date. These additional sessions are held on Mondays and Wednesdays. The necessity for extra staff was also felt in the dental laboratory, and on 17th November the plaster boy was promoted to the position of "improver," and a new plaster boy was appointed. This section of the staff therefore now consists of two dental mechanics, one improver, and a plaster boy.

### FINANCIAL ASPECT.

The procedure involved in the reception of patients remains substantially the same as in previous years. During the year the following changes were made in the scale of charges: (a) At a meeting on 21st January, 1936, the Council resolved that the charge of 1s. per attendance, with a maximum of 2s., operate also in respect of children under school age who are not referred from the maternity and child welfare clinics; (b) at a meeting held on 17th March, 1936, the Council authorised the dental surgeon, at his discretion, to give urgent dental treatment to persons resident in the Borough, but who have not been so resident for six months.

For reference purposes the complete scale of charges is printed herewith:—

Scaling, per individual	...	5s. (not chargeable in respect of a jaw in which a denture of eight or more teeth is supplied).
Fillings, per filling	... ..	5s. (maximum 10s. for any one tooth).
Root treatment, per tooth	... ..	5s. (maximum 12s. 6d. for fillings and root treatment in respect of any one tooth).
Extractions, per tooth (with or without local anæsthetic).		1s. (maximum 12s. 6d., irrespective of number of attendances).
Extractions with general anæsthetics—Extraction fee, 1s. per tooth. Gas, 3s. 6d. Maximum 15s., irrespective of number of attendances, until all recommended extractions have been performed.		
Dentures, full upper or lower		£2 15s. 0d.

Dentures, full upper and lower	£5 10s. 0d.
Partial dentures ... ..	£1 1s. for first two teeth ; 5s. for each subsequent tooth.
Repairs ... ..	7s. 6d. for the first item. Additional items graded. Maximum charge for one denture, £1.
New band or wire ... ..	3s. 6d.
Crowns ... ..	£1 1s., including any necessary root treatment.
Other items at Approved Society rates.	

The scale of charges for treatment of children is as follows :—

General treatment—1s. per attendance, with a maximum of 2s. until the course of treatment is completed—for extractions (including gas) and any fillings, but not orthodontic treatment.

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

The scale of income for remission of charges remains unchanged from that printed in the report for 1934.

#### SUMMARY OF THE WORK DONE DURING 1936.

Tables I, II and III summarise the work which was done at the dental hospital during 1936.

TABLE I.—INSPECTION AND TREATMENT OF CHILDREN.

	No. of primary examinations	No. of 1st attendances for treatment.	No. of extractions (teeth.)	Local anaesthetics.	General anaesthetics.	Conservative work.			Orthodontics.		Mechanical work.		Total visits.	
						No. of fillings.	Silver nitrate treatment.	No. of scalings.	No. of 1st visits, <i>i.e.</i> , new cases.	No. of subsequent visits.	Other operations.	Dentures fitted.		Repairs.
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)
Up to 2 years ...	10	4	5	1	3	2	1	..	..	..	3	..	..	14
Over 2 " ...	22	12	17	..	7	16	25	1	..	..	1	..	..	39
" 3 " ...	90	70	145	..	56	78	56	2	..	..	6	..	..	197
" 4 " ...	188	176	502	..	157	217	90	3	..	..	14	..	..	466
School children	310	262	669	1	223	313	172	6	..	..	24	..	..	716
	177	160	452	..	151	206	8	8	6	49	91	8	1	536
Totals ...	487	422	1121	1	374	519	180	14	6	49	115	8	1	1252

TABLE II.—INSPECTION AND TREATMENT OF ADULTS.

	No. of primary examinations.	No. of 1st attendances for treatment.	No. of extractions (teeth).	Local anaesthetics.	General anaesthetics.	Conservative work.			Orthodontics.		Mechanical work.		Total visits.	
						No. of fillings	Silver nitrate treatment.	No. of scalings.	No. of 1st visits, <i>i.e.</i> , new cases.	No. of subsequent visits.	Other operations.	Dentures fitted.		Repairs.
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)
Women referred from M. & C.W.	245	212	1425	6	328	100	4	56	...	...	600	130	16	1365
Other women ...	498	375	1845	33	389	146	...	39	...	...	1007	254	92	2232
Half-rate women	72	50	108	3	48	66	...	13	...	...	39	3	...	223
Half-rate men ...	24	21	67	3	21	14	...	4	...	...	9	1	...	72
Other men ...	399	328	1849	36	367	116	4	74	...	...	942	268	84	2061
T.B. patients ...	13	10	48	2	10	4	...	4	...	...	21	6	...	56
Adults and adolescents ...	1251	996	5342	83	1163	446	8	190	...	...	2618	662	192	6009
Totals (including Children, Table I)	1738	1418	6463	84	1537	965	188	204	6	49	2733	670	193	7261

TABLE III.—ANALYSIS OF VISITS.

	Morning.	Afternoon.	Evening.	Total.
Monday ...	597	583	672	1,852
Tuesday ...	—	772	551	1,323
Wednesday ...	892	620	—	1,512
Thursday ...	673	606	—	1,279
Friday ...	—	653	642	1,295
Total ...	2,162	3,234	1,865	7,261

## NOTES ON TABLES I, II AND III.

Column 1.—When course of treatment prescribed at primary examination is completed, next visit by individual is recorded as another primary examination.

Columns 4/5.—Number of patients to whom anaesthetics were administered.

Column 6.—Total number of teeth filled, completely or temporarily.

Column 7.—Application of silver nitrate when the fillings are impracticable.

Column 8.—Number of patients who have had their teeth scaled.

Column 9.—Represents the number of patients presenting themselves for first time for orthodontic treatment.

Column 10.—Represents the total visits made by patients for orthodontic treatment, and includes children who were already attending for orthodontic treatment at the beginning of the year.

Column 11.—Total separate surgical operations performed.

Column 13.—Represents the total single denture repairs completed.

Column 14.—Total number of separate visits for examination or treatment.

TABLE III.

Total attendances given here include Tables I and II.

## NOTE ON "OTHER OPERATIONS."

The column for "other operations" includes the surgical operations given in previous reports. Operations include the following :—(a) Children : dealing with abscesses without extraction ; division of labial frena ; (b) Adults : socket syringing after treatment following difficult septic extraction ; curetting of sockets ; treatment of epulis ; division of fibrous bands, treatment of cysts, removal of sequestra.

## GROWTH OF HOSPITAL.

Until last year a table showing comparative figures for the attendances of different classes of patients was given in respect of the period from the opening of the institution. Classifications naturally vary according to the particular scheme adopted, and it is felt that a more accurate method of comparison will be obtained by commencing with the year 1933 and giving the figures for subsequent years ; this period is marked by a more or less uniform system of classification.

	1933.	1934.	1935.	1936.
No. of children's visits ... ..	849	857	830	1,252
No. of adults' visits* ... ..	4,685	4,971	5,183	6,009
No. of maternity cases visits ...	1,287	1,545	1,325	1,365
No. of dentures fitted ... ..	509	552	622	670
No. of fillings ... ..	492	566	695	965

\* Including maternity cases.

## ANÆSTHETICS.

During the year 84 local anæsthetics and 1,537 general anæsthetics were administered. The preceding table shows that the number of local anæsthetics each year is always below 200. The number of general anæsthetics increased from 894 in 1933 to 1,537 in 1936. Actually the ratio which these figures for general anæsthetics bear to the total for all anæsthetics each year was as follows :—

1933	...	...	...	...	...	...	84.5 per cent.
1934	...	...	...	...	...	...	85.7 „
1935	...	...	...	...	...	...	91.3 „
1936	...	...	...	...	...	...	94.8 „

These figures indicate the reliance which is placed upon a general anæsthetic for the purposes of extractions performed in a district like Shoreditch. In other words, they indicate that most of the mouths upon which extractions have to be carried out show some degree of sepsis.

## DENTAL INSPECTION AND TREATMENT OF PRE-SCHOOL CHILDREN.

The special investigation which was referred to in my report for last year showed that the teeth of pre-school children were not nearly so satisfactory as one might expect. This feature does not appear to be confined to Shoreditch but is possibly found also in the country as a whole. With a view to encouraging a systematic attack on this problem a scheme for the routine inspection and treatment of the teeth of selected toddlers was instituted in May, 1936.

The essential feature of the scheme is that the doctors at the maternity and child welfare clinics refer children monthly to the dental hospital for examination. Any treatment necessary is carried out after the first examination and arrangements are made for the children to return again at intervals of from three to six months at the discretion of the dental surgeon. The clinic doctors are recommended to base their choice of cases not necessarily upon any dental examination which they may make, but upon the question of whether the mother is or is not likely to bring the child up at the stated intervals.

*Procedure.*—The clinic doctors are supplied with cards, one of which is filled up when a child is being recommended for examination and treatment. The card is handed to the mother who takes it on one of the specified days to the municipal dental hospital. Further arrangements are made at this institution direct with the mother.

*Results of examination.*—Since the inauguration of the scheme 166 pre-school children have been recommended to attend for examination and treatment. Of these 78 (47 per cent.) actually attended. In only one case treatment was not necessary, and six children attended but did not carry on with the treatment. Of the remainder all received treatment with the exception of 12 who have not yet completed the prescribed course. The information in respect of the 59 children who received treatment is given in following table :

Age (years).	2-3	3-4	4-5
Number ... ..	10	24	25
Percentage ...	16.95	40.68	42.37

## COMMENTS ON THE WORK OF THE HOSPITAL.

The proportion of first attendances to primary examinations for various classes of patients is given in Table IV,



TABLE IV.

(a) No. of patients who had primary examinations.

(b) No. of those who first attended for treatment.

	1933.			1934.			1935.			1936.		
	(a)	(b)	Per-centage. (b) to (a)	(a)	(b)	Per-centage. (b) to (a)	(a)	(b)	Per-centage. (b) to (a)	(a)	(b)	Per-centage. (b) to (a)
Under 5 years ...	222	189	85.1	274	258	94.2	222	186	83.8	310	262	84.5
School children ...	108	51	47.2	88	51	58.0	126	111	88.0	177	160	90.4
Women from												
M. & C. W. ...	293	208	70.9	251	205	81.6	240	190	79.2	245	212	86.5
Other women ...	338	198	58.6	372	264	71.0	410	303	73.9	498	375	75.3
Adolescents ...	79	61	77.2	81	61	75.3	58	47	81.0	96	71	74.0
Adult males ...	345	216	62.6	293	224	76.5	338	274	81.1	399	328	82.2

It will be seen that nearly all groups show a higher percentage for 1936 than for 1935, the only exception being a slight fall in the adolescent group. A very satisfactory feature is the considerable rise which has taken place in respect of school children during the last two years, and it now seems very probable that this increase is due to the fact that a reduction was made in the charge for treatment of school children in February, 1935.

In conclusion it may be said that the work of the hospital continues to increase in bulk and in importance, and there is now no reason why every member of the community should not have satisfactory natural or artificial dentures.

## VII.—SPECIAL CLINICS FOR WOMEN.

In my report for 1935 I outlined the steps which led to the institution of two special clinics for women, and I gave some details regarding the results of the functioning of these two clinics during the first six months of their existence. It was pointed out that the medical clinic was not intended to serve as an institution for the treatment of patients; in the writer's view the function of the clinic would be mainly diagnostic, and special arrangements were made for the transfer to other institutions of patients who required treatment.

The inauguration of these two clinics aroused much interest and the results indicate that they are both fulfilling a necessary service. The work of the clinics is growing steadily and at the time of writing arrangements have been made to hold an additional evening session at each clinic. The specialist staff of the clinics remains unchanged. The Council is fortunate to be able to retain the services of Dr. Janet K. Aitken, M.D., M.R.C.P., as physician, and of Dr. Gladys Hill, M.A., M.D., B.S., M.C.O.G., F.R.C.S., as gynæcologist. For reference purposes the scope of the work carried out at the clinics and the method of administration are again described in this section, and any changes which were effected during the year are embodied in the following account.

### SCOPE OF THE WORK CARRIED OUT AT THE CLINICS.

*General Medical Clinic.*—Women suffering from any complaint of a medical nature may attend this clinic, but they are strongly advised to bring with them a report from their private practitioner or from the doctor at some other clinic. In actual fact the majority of the patients do bring such references. It was thought that this clinic would be specially useful in the difficult work of differentiating between functional and organic conditions, and this expectation has been realised. As a general rule continued treatment is not carried out. Many women do receive courses of a comparatively small number of stock drugs, but in most cases this therapy can be regarded as mainly diagnostic. This clinic is held every Friday at 10 a.m.

*Gynæcological Clinic.*—At the gynæcological clinic birth regulation cases and gynæcological cases are dealt with at the same session. In the case of all patients who request birth-control information a complete gynæcological examination is performed, and any necessary minor treatment is carried out. Patients who request birth-control information are also recommended to attend at the medical clinic for examination, and a large proportion of them have a general medical examination. Minor conditions which are treated at the clinic include erosions, prolapse, and other

displacements. No single method of contraceptive technique is used. In many cases Dutch caps are recommended and fitted, and frequently these are supplemented by solubles or by lactic acid pessaries. The method employed is often dictated by the medical condition of the applicant, *i.e.*, the degree of necessity for prevention of contraception. The clinic is held every Monday at 2 p.m.

*Reference of individual patients to hospital.*—In my report for 1935, reference was made to certain arrangements with St. Bartholomew's Hospital. In later sections it will be seen that few patients had to be referred to this hospital. In general it may be said that the results of the working of these clinics indicates that many women suffer from minor disorders which can be dealt with efficiently at an outdoor clinic, but which if left untreated would certainly cause considerable trouble or discomfort and which might lead to more grave conditions, requiring in-patient treatment in hospital.

*Financial aspect.*—The cost of maintenance of the medical clinic, including the fees for medical and nursing staff, laundry, and a proportion of the drugs—for the year 1936 was £221 11s. 2d. and, similarly, the cost of maintenance of the gynaecological clinic was £221 17s. 8d. During 1936 no alterations were made in the fees which the patients are required to pay. Women who receive treatment at either clinic pay the sum of 1s. per attendance, and those who receive birth control appliances are required to refund to the Council the cost thereof. The Medical Officer of Health is empowered to use his discretion in the matter of the collection of the charges for birth control appliances, in cases where the women concerned are unable to afford the cost. It was necessary to remit a portion of the cost in only nine cases during the year. The fee is usually collected before the apparatus is supplied. Any female adult who resides or works in the Borough may attend the clinic.

## RESULTS.

### (a) Medical Clinic.

During the year fifty sessions were held, 105 new cases attended the clinic, and the total attendances were 550. Most of these patients were referred by clinic doctors or by health visitors; five cases were referred from the ante-natal clinic and 26 cases from the gynaecological clinic.

The age distribution of the patients is shown in the following table:—

Age (years) ...	15—	20—	25—	30—	35—	40—	50—	60—	Total.
No. of patients	0	10	29	34	30	22	8	2	135

The youngest patient was aged 21 years and the oldest 75 years. The mean age of these 135 patients was 35·7 years. It will be seen that a considerable proportion of the women were at an age when the strain of child-bearing was beginning to assert itself.

The obstetric history of the patients is shown in the following table :—

No. of pregnancies ...	0	1	2	3	4	5	6	7	8	9	10	11	12	13	20	Total.
No. of patients	6	18	20	19	18	12	12	8	7	4	2	3	2	1	3	135
No. of children alive ...	0	1	2	3	4	5	6	7	8	9	10	—	Total.			
No. of patients	7	20	32	20	19	11	13	7	2	2	2	—	135			

The average number of pregnancies was 4·5 and the average number of children alive per patient was 3·4. These figures bear out remarkably well the tentative conclusions which were reached from the inadequate data available at the date of writing of the last report. The patients who attend this clinic do not on the whole present any exceptional obstetric history in respect of the total number of pregnancies, and it would appear that if the children play any part in the causation of ill health in the mothers, they possibly exert their influence not so much through the strain of child bearing but owing to the economic factors which are induced by the presence of several children in a poor household. Contrary to what might be expected in a working class district like Shoreditch, families of more than four children appear to be definitely exceptional.

*Medical findings.*—In a report of this type a detailed description of the medical findings is unwarranted, but the following brief summary will give some idea of the conditions dealt with during the year :—

Heart conditions ...	9	Debility ...	7
Anæmia ...	26	Malnutrition ...	6
Circulatory conditions ...	6	Rheumatism ...	4
Chest conditions ...	12	Migraine ...	1
Nervous conditions ...	8	Other conditions ...	24
Menopausal or allied conditions ...	15	No apparent disease ...	14
Diseases of the liver or ducts	3		

Of the patients mentioned above four were referred to St. Bartholomew's Hospital for further examination or for out-patient treatment, and one was sent to the hospital for admission. Six patients were referred to their own practitioners.

One patient was referred to the Elizabeth Garrett Anderson Hospital for admission and four patients were sent to other hospitals for special methods of diagnosis. Apart from the methods of treatment which have been mentioned one patient was referred to the Medical Officer of Health for convalescent treatment. This patient was sent to a convalescent home.

It will be noted that there has been a very definite increase in the number of cases of anæmia. The type of anæmia was in many cases diagnosed as a result of blood tests. It may be said that almost half of the anæmias were microcytic in type.

(b) *Gynæcological clinic.*

During the year 48 sessions were held; 206 new cases attended the clinic and the total attendances were 556. As in the case of the medical clinic most of the patients were referred by clinic doctors or by health visitors.

The age distribution of the patients is shown in the following table:—

Age (years) ...	15—	20—	25—	30—	35—	40—	50—	60—	Total.
No. of patients	3	35	46	52	37	28	3	2	206

The youngest patient was aged 18 years, and the oldest 64 years. The mean age of these 206 patients was 32·8 years.

The obstetric history of the patients is shown in the following table:—

No. of pregnancies	0	1	2	3	4	5	6	7	8	9	10	11	12	13	Total.
No. of patients ...	16	30	37	36	22	16	17	12	8	4	5	1	—	2	206
No. of children alive	0	1	2	3	4	5	6	7	8	9	10	11	12	13	Total.
No. of patients ...	13	34	48	37	20	17	18	12	3	1	1	1	—	1	206

The average number of pregnancies per patient for the 206 patients was 3·7 and the average number of children alive per patient in respect of the 206 patients was 3·2. These averages are definitely lower than the corresponding figures for the patients who attended the medical clinic. It would seem that the remarks which were made in that section apply also to those patients who attended the gynæcological clinic.

*Duration of married state.*—The following table shows the length of time which had elapsed since marriage in respect of the 206 patients. Patients who were married during 1935 were counted as having been married one year, those married in 1934, two years, and so on:—

Period since marriage (years) ...	1	2	3	4	5	6	7	8	9	10	10+	Total.
No. of patients ...	14	9	10	19	10	11	9	15	7	10	92	206

This table brings out the rather important fact—which was also elicited last year—that there was apparently no relationship between attendance at the clinic

and the duration of the married state. Opponents of birth control clinics often state that there will be a preponderance of young married women at such clinics, but the figures above—although they refer to both gynæcological and birth regulation cases—indicate broadly that such a supposition is incorrect.

*Gynæcological work.*—Of the 206 patients who attended the clinic, 131 were gynæcological cases. The conditions found and treated, when treatment was necessary, may be shown broadly as follows :—Cervical erosions, 6 ; menorrhagia, 18 ; leucorrhœa, 15 ; pregnancy, 30 ; fibroid, 2 ; uterine displacements, 25 ; rectal fissures, 1 ; other conditions, 25.

*Birth regulation work.*—During the year 71 women had advice regarding birth regulation, and in these instances the necessary appliances were provided.

Of the 206 women, one was referred to St. Bartholomew's Hospital and one to Mildmay Mission Hospital for examination or for admission.

#### SOCIAL AND PHYSICAL CONDITIONS.

Of the 135 patients who attended the medical clinic, the husbands of 96 were employed, those of 31 were unemployed, and the husbands of the remaining 8 were in receipt of public assistance relief. In the case of the gynæcological clinic the corresponding figures for husbands are :—Employed, 96 ; unemployed, 31 ; on relief, 8. These figures show a considerable degree of unemployment amongst the husbands. Further information was available in respect of 206 of the women who attended the gynæcological clinic. It was found that 4 of these were employed and the remaining 202 did no work apart from their domestic duties.

The weights of 135 of the patients who attended the medical clinic are available. It is not possible to draw any deduction from this small sample, but the figures are inserted here for reference purposes :—

Weight (Stones)	6	6½	7	7½	8	8½	9	9½	10	10½	11	11½	12	12½	13	14	15
No. of patients	5	10	16	20	11	22	10	6	5	5	7	4	4	1	4	3	2

## VIII.—FOOT CLINIC.

As the result of a report on the desirability of inaugurating a foot clinic for the use of the inhabitants of the Borough, which I presented to the Public Health Committee in November, 1935, the Council at their meeting on the 18th February, 1936, passed a resolution authorising the establishment of such a clinic. It was recommended that the clinic should deal with minor abnormalities of the feet such as corns, bunions, ingrowing toenails, etc. The clinic was opened on the 8th May, 1936, at the Pitfield Street Baths, commencing with three sessions, each of two hours. Subsequently, owing to the success of the clinic, the weekly sessions were increased to six, and the clinic was removed to a room in the Public Library building in Pitfield Street. Sessions are now held as under:—

MONDAY	...	2.30 till 4.30 p.m.
TUESDAY	...	2.30 till 4.30 p.m. 6 till 8 p.m.
WEDNESDAY		2.30 till 4.30 p.m. 6 till 8 p.m.
FRIDAY	...	10 a.m. till noon.

Orthopædic cases are not treated at this clinic, but are referred either to the patient's own doctor or to hospital. The charge made is 1s. for one foot and 1s. 6d. for two feet per attendance, but in the case of unemployed persons, or those in receipt of public assistance, or of members of their families, these charges are remitted.

The total number of attendances for the year under review was 1,033 at 195 sessions, giving an average attendance of 5.3 per session. The total number of new patients who attended was 445.



The following table shows, briefly, the type of cases dealt with and gives some indication of the progress made by the patients:—

Type of ailment.	Number treated.	Cured.	Improved.	Remarks.
Arthritic and rheumatic conditions of joints.	48	—	Majority improved.	Two sent to hospital for treatment.
Bunions ... ..	42	—	40	Two sent for operation.
Bursitis ... ..	20	20		
Bursal sinus ... ..	17	17		
Chilblain ... ..	36	—	36	Several kept under observation.
Corns ... ..	345	190	155	
Flat foot ... ..	80	—	All corrected.	Kept under observation.
Fissures (heels and between toes).	16	16		
Hallux valgus ... ..	20	—		Kept under observation <i>re</i> shoes, etc.
Hammer toes ... ..	31	—	Improved.	Under observation.
Hyperidrosis ... ..	32	32		
Metatarsalgia ... ..	63	—		A large number of these patients are pregnant women. After confinement condition is completely cleared up.
Morton's toe ... ..	7	7		
Onychogryphosis (ram's horn nail).	60	—	Improved.	Visit for periodical observation.
Onychocryptosis ... ..	30	30		
Paronychia ... ..	7	7		
Various forms of sprains, etc.	15	15		
Verrucas ... ..	13	10		Three patients ceased treatment.

## IX.—SANITARY CIRCUMSTANCES.

## DISTRICT SANITARY INSPECTIONS.

The following tables, which are based on reports made to the Medical Officer of Health of the London County Council, for inclusion in his Annual Report for 1936, summarize the work done by the sanitary inspectors during the year :—

The total number of intimations served in respect of insanitary conditions was 4,684. The number served on each sanitary district was as follows :—

District No. I	...	309	District No. VI	...	685
„ „ II	...	418	„ „ VII	...	299
„ „ III	...	532	„ „ VIII	...	588
„ „ IV	...	690	„ „ IX	...	512
„ „ V	...	651			

In connection with the inspectors' sanitary work, 1,276 letters were written to owners and others. Statutory notices under the Public Health (London) Acts, 1891 and 1936, were served by order of the Sanitary Authority upon the parties responsible for the abatement of nuisances in 840 instances. For non-compliance with the requirements of the sanitary authority, proceedings were taken before the magistrates in 5 instances. A list of legal proceedings will be found on pages 162 and 163.

The following tables (pages 135 and 136) summarize the visits and work of the sanitary inspectors during 1936. The work done in compliance with the provisions of the Factory and Workshop Act, 1901, and in connection with the drains and sanitary arrangements of new buildings is included :—

Inspections, 1936	DISTRICTS.									Total
	1	2	3	4	5	6	7	8	9	
Housing Act, 1936, section 9	...	...	...	...	...	...	128*	...	...	128*
Housing Consol- idated Regs. 1925 ...	6	121	84	27	34	58	117	52	36	535
Other premises	594	571	837	1,300	589	832	777	1,088	1,140	7,728
Re-inspections, &c.	1,868	2,455	2,725	2,751	2,236	3,616	2,368	2,585	3,696	24,300
Visits in connec- tion with infec- tious diseases										
(a) By sanitary inspectors ...	16	52	32	11	79	25	10	23	23	271
(b) By infectious disease visitor	...	...	...	...	...	...	...	...	...	1,196
Common lodging houses ...	3	...	...	...	...	...	8	12	9	32
Houses-let-in lodgings ...	...	20	30	...	383	...	...	11	...	444
Workshops ...	172	188	42	254	119	162	72	28	144	1,181
Factories ...	94	258	141	222	35	13	33	15	15	826
Outworkers ...	91	89	99	170	77	20	55	86	84	771
Bakehouses ...	2	23	28	35	13	13	15	8	11	148
Milkshops, cow- sheds ...	53	34	154	239	86	26	70	87	100	849
Cookshops ...	120	79	58	76	28	19	29	28	15	452
Fried fish shops	7	21	17	35	5	8	15	9	18	135
Ice cream shops	27	50	52	36	17	14	27	25	33	281
Meat and food	24	34	69	69	35	13	14	41	25	324
Stables ...	...	1	...	9	13	1	2	2	...	28
Rag and bone dealers ...	4	29	2	14	2	...	...	...	5	56
Markets ...	17	26	25	30	20	23	28	24	29	222
Total ...										39,907

\* The whole of the inspections under this section of the Housing Act, 1936, are carried out by the Inspector for District 7, and do not therefore relate to one district.

Work Done, 1936.	DISTRICTS									Totals
	1	2	3	4	5	6	7	8	9	
Premises, cleansed throughout ...	20	10	8	43	3	3	31	2	18	138
Premises, partially ...	128	181	243	392	283	196	151	282	138	1,994
Premises, total rooms ...	510	681	746	922	787	396	429	864	323	5,658
Verminous rooms ...	36	13	47	50	44	23	30	...	22	265
„ premises ...	25	11	36	34	33	16	13	...	...	168
Premises, generally repaired ...	245	343	454	609	508	510	280	421	381	3,751
Light and ventilation ...	3	11	...	15	2	1	3	2	1	38
Roofs, gutters, rain-water pipes ...	109	274	224	477	211	326	124	255	277	2,277
Overcrowding ...	14	9	9	110	80	19	10	4	6	261
Water re-instated ...	8	9	2	36	12	5	4	14	...	90
Drains, new ...	19	3	3	4	2	4	9	1	3	48
„ re-constructed ...	26	9	8	1	6	7	...	4	5	66
„ improved or repaired ...	26	24	45	46	31	26	10	53	31	292
„ obstructions removed ...	21	29	36	25	28	28	12	15	33	227
Soil, vent pipes repaired	11	10	8	25	4	...	3	1	11	73
W.C.'s—										
New ...	112	32	106	41	3	79	156	7	...	536
Improved or repaired	137	152	114	213	146	162	54	92	89	1,159
Obstructions removed	22	24	10	47	25	23	13	21	25	210
Sinks, improved ...	59	20	97	139	47	52	45	86	11	556
„ traps provided ...	17	1	11	23	11	14	...	27	3	107
<i>Outdoor Premises.</i>										
Floors, paving repaired ...	23	67	155	126	114	93	22	78	25	703
Cleansed or limewashed ...	72	6	202	270	214	39	109	174	26	1,112
Improved or repaired ...	2	...	21	...	...	...	...	...	...	23
Dustbins provided ...	63	31	43	82	91	37	23	62	37	469
Ashpits improved or repaired ...	2	1	...	1	...	...	...	1	...	5
Ashpits abolished ...	...	...	...	...	...	...	...	1	...	1
Accumulations removed	41	61	39	63	57	16	24	26	7	334
Urinals cleansed or repaired ...	4	7	...	9	4	...	...	2	...	26
Animals improperly kept	1	1	...	2	...	...	...	2	...	6

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 1936 :—

PREMISES.	NUMBER OF PLACES—				Number of inspections, 1936	Number of notices, 1936	Number of prosecutions, 1936
	On register at end of 1935	Added in 1936	Removed in 1936	On register at end of 1936			
Houses let in lodgings	417	...	...	417	444	271	Nil
Common lodging houses	4	...	...	4	32	1	"
Seamen's "	...	...	...	...	...	...	"
Cowsheds (licensed) ...	2	...	1	1	16	...	"
Slaughterhouses "	...	...	...	...	...	...	"
Other offensive trades	1	...	...	1	11	3	"
Milkshops ...	314	10	8	316	833	37	"
Ice cream premises ...	183	19	12	190	281	15	"
Restaurants and eating houses ...	238	20	17	241	452	46	"
Registered foster mothers ...	9	...	...	10	74	...	"
Nurse children kept ...	9	...	...	10	74	...	"

#### SMOKE NUISANCES.

(1) Number of observations ...	66	(5) Number of legal proceedings ...	Nil
(2) Number of intimations served...	2	(6) Number of convictions...	Nil
(3) Number of complaints received	5	(7) Amount of penalty and costs imposed in each case ...	Nil
(4) Number of statutory notices served ...	Nil		

#### CLEANSING AND DISINFECTION.

Number of adults cleansed ...	21	Number of premises cleansed—	
Number of children cleansed ...	6	(a) After infectious diseases ...	774
		(b) For vermin ...	274

#### WATER SUPPLY TO TENEMENT HOUSES.

Number of premises supplied ...	70	Number of prosecutions ...	Nil
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#### HOUSING.

Total number of houses in the Borough ...	13,990
Number of houses occupied by the working classes ...	13,724

#### Public Health Act—

Number of houses inspected on account of complaints or illness ...	8,824
Number of statutory notices served ...	840
Number of houses repaired or nuisances remedied ...	4,684

*Housing Acts (1925-1935)*—

Number of houses inspected—house-to-house (Housing Consolidated Regulations, 1925) ... ..	535
(a) Number of houses included in representations by the Borough Medical Officer under Section 1 of the Housing Act, 1930 ...	104
(b) Number of houses demolished following representation by Borough Medical Officer under Section 1 of the Housing Act, 1930 ...	4
Number of houses repaired under sections 17 and 18 of the Housing Act, 1930.	
(a) by owners ... .. 78	
(b) by local authority in default of owners...	Nil
Number of houses demolished :—	
(a) in pursuance of orders under section 19 of the Housing Act, 1930	Nil
(b) Voluntarily ... ..	81
Number of houses (wholly or in part) the subject of Closing Orders (excluding underground rooms) ... ..	Nil
Number of Closing Orders determined ( <i>i.e.</i> , houses made fit) ... ..	Nil
Number of houses erected by the Borough Council for working classes during year ... ..	20

## HOUSES LET IN LODGINGS.

1) Number in Borough ... .. 417	(3) Number of prosecutions ...	Nil
(2) Number of inspections... .. 444	(4) Number of complaints remedied under the Bye-laws (not included under any other heading)...	Nil

## UNDERGROUND ROOMS.

Number occupied but unfit under Section 18 of the Housing Act, 1925, as modified by Section 84 of the Housing Act, 1935 ... ..	17
Number closed or modified occupation approved under Section 84, Housing Act, 1935 ... ..	Nil

## OVERCROWDING (HOUSING ACT, 1935).

Number of houses inspected under Section I of the Housing Act, 1935 ...	Nil
Number of families found to be living in overcrowded conditions. Section I of the Housing Act, 1935 ... ..	Nil
Number of overcrowded families who have obtained alternative accommodation ... ..	235

## WATER SUPPLY.

The number of certificates issued as required under the Public Health (London) Act, 1936, section 95 (2), was 214.

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.

#### L.C.C. DRAINAGE BYE-LAWS.

During the year, 13 contraventions of the above bye-laws were reported to the Public Health Committee. In nine instances the builder responsible for the work was prosecuted and in the remaining four instances warning letters were sent.

#### ASHPITS.

It is satisfactory to be able to state that there are now only three ashpits in the Borough. One of these serves 14 houses, one 12 houses and one 11 houses. These are reported to be in satisfactory condition, but total abolition would certainly be desirable.

#### PUBLIC CONVENIENCES FOR WOMEN.

During the year a detailed inspection was made of the women's public conveniences in the Borough. A summary of the main points of the investigation is as follows :—

There are five women's conveniences in the Borough, all being underground, and situated in main thoroughfares. Each of the conveniences has walls of marble or glazed bricks and the roofs are partly of iron and concrete with prismatic lights. Only one has a double entrance and this is a modern convenience which was built in 1934. Lighting is provided by means of prismatic roof lights, and electric points. Ventilation in one convenience is by means of the entrance and two iron gratings into the men's convenience adjoining. In another this is effected by means of the entrance and louvres in the roof, and in the remaining three the chief means is by the entrance and a ventilating shaft situated in an electric light standard.

The accommodation provided in the five conveniences is as follows :—

- (1) Four W.C.'s (automatic ld. in slot locks). One free W.C. Two urinettes. Four lavatory basins.
- (2) Two W.C.'s (automatic ld. in slot locks). One free W.C. One lavatory basin in attendant's cubicle.
- (3) Two W.C.'s (automatic ld. in slot locks). One free W.C. Three urinettes. Two lavatory basins.
- (4) Two W.C.'s (automatic ld. in slot locks). One free W.C. Two urinettes. One lavatory basin.

- (5) Three W.C.'s (automatic lid in slot locks). Four W.C.'s (one free). Three urinettes. One lavatory basin in attendant's cubicle.

The water closets are partitioned off by glazed brickwork or marble, the doors being of wood. In most cases the W.C.'s are of the white glazed wash-down type with wooden lift-up seats; the flushing apparatus being hand pulled. Of the four conveniences which have urinettes, three have automatic flushing cisterns.

The washing accommodation in the conveniences is provided by means of fitted hot and cold water taps, but the hot water is only supplied direct to the basins in one convenience, the hot water having to be obtained from a kettle or gas heater in the others. The water supply is direct from the main in all cases.

*General Observations.*—Children without their parents often use the conveniences and have to be watched. A separate W.C. for their use would seem to be advisable.

Every effort is made to keep the conveniences in a clean condition but it is apparent that they are frequently misused by adults in addition to children, it being a common practice for persons using the W.C.'s and urinettes to neglect to pull the flush. The sanitary condition of these conveniences is on the whole considered to be satisfactory.

#### COMMON LODGING HOUSES.

The work in connection with common lodging houses, is carried out under the Public Health (London) Act, 1936.

The number of common lodging houses in the Borough is four, the number of beds being 123, 87, 46 and 28 respectively. All the lodging houses are for males. During the year 32 visits of inspection were paid.

In general it may be said that the common lodging houses are not of modern type; the buildings are old and the houses can only be kept up to the required standard of efficiency by constant supervision.

#### HOUSES LET IN LODGINGS.

At the commencement of the year 1936, 417 houses were registered as houses let in lodgings.

The type of house varies but the greater proportion consist of from seven to ten rooms. It need hardly be mentioned that the majority of these houses were originally constructed for a totally different purpose and generally it may be said that they are unsatisfactory for the purpose for which they are used. This is, however, a difficulty which can only be overcome when improvement is effected in the housing of the people as a whole. Many of these houses have basement rooms which are occupied in contravention of the regulations of the Borough Council. The sanitary conveniences are usually in the yard; there is generally a water supply in the yard and



most of the houses have a water supply on the upper floors. The sinks are often fitted on the landings of the staircase. The houses are kept in fair repair, and action to maintain this is taken under the Public Health (London) Act, 1936. During the year 444 visits of inspection were made. There was no appreciable amount of overcrowding above that which generally prevails in the district.

#### VERMINOUS HOUSES.

It was necessary to take measures on account of the presence of vermin in respect of 168 houses, and in connection with these 265 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.

#### VERMINOUS PERSONS.

During the year the homes of 24 children, four boys and 20 girls, notified as verminous by the School Medical Officer, were reported with a view to the homes, bedding, etc., being dealt with by the Sanitary Authority, whilst the children were cleansed and their clothing disinfected at the cleansing stations of the London County Council. Intimation was received that 3 boys and 8 girls had been given the opportunity of being cleansed at these stations, that in the case of a boy and girl statutory notices had been served upon the parents to cleanse the children within 24 hours under section 87 of the Education Act, 1921, and that in the case of 11 girls legal proceedings were pending for non-compliance with the requirements of the statutory notices under the Act. In all the cases reported the homes were visited by the sanitary inspectors, and the following summarizes the reports received:— Seven of the homes were satisfactory, the condition varying from fairly clean to clean, and 9 were dirty. In 6 instances the bedding was fairly clean and in 10 instances it was dirty.

The children reported by the school authorities as suffering from scabies numbered 225, of whom 134 were females. As a result of the enquiries made, 8 other cases came under observation. As far as practicable steps were taken to prevent the spread of infection.

#### OFFENSIVE TRADES.

The only business carried on in the Borough which falls within this category is that of a fur skin dresser. Eleven visits of inspection were made.

#### RAG AND BONE DEALERS.

At the end of the year 17 premises to which bye-laws under Section 9 of the London County Council (General Powers) Act, 1908, as amended by Section 146 of the Public Health (London) Act, 1936, apply were on the register. Fifty-six visits were paid to these during the year. Intimation as to the need for cleanliness was sent and duly attended to in three instances.

## RAG FLOCK.

The legal provisions in respect of rag flock are now contained in the Public Health (London) Act, 1936, Section 136.

During the year 32 samples of rag flock were submitted to the Public Analyst. All complied with the legal standard of not more than 30 parts of chlorine per 100,000 parts. The amount of chlorine varied from 1 to 24, the average being 7.5 parts per 100,000.

## 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 occurring in factories are however only remediable under the Public Health Act, and these are referred by H.M. Inspectors to the Health Department.

The number of workshops, exclusive of bakehouses, on the register at the end of 1935 was 1,559. The number added to the register during the year under consideration was 33, the number removed was 17, and the number on the register at the end of 1936 was 1,575.

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

## REGISTERED WORKSHOPS—1936.

Workshops on the Register (s. 131) at the end of the year.	Number.
(1)	(2)
(1) Furniture, woodwork, fitting and other branches of the furniture trades.	1,067
(a) Cabinet making ... 620	
(b) French polishing ... 182	
(c) Upholstery ... 130	
(d) Other workers ... 135	
(2) Dress ...	167
(a) Tailoring ... 76	
(b) Mantles ... 8	
(c) Dress ... 17	
(d) Millinery ... 9	
(e) Shirt making ...	
(f) Boot and shoe trades ... 22	
(g) Artificial flowers ... 3	
(h) Other workers ... 32	
(3) Skin, leather, hair and feather trades...	49
(a) Furriers ... 23	
(b) Saddlery and Harness ... 8	
(c) Feathers ... 1	
(d) Other workers ... 17	
(4) Paper, printing, book, stationery and fancy goods trades ...	39
(a) Box and bag makers ... 33	
(b) Other workers ... 6	
(5) Laundry and washing ...	3
(6) Food ...	12
(7) Metals, machines, implements and conveyances ...	84
(8) Precious metals, jewels, &c. ...	1
(9) Other trades than those mentioned above ...	153
Total number of workshops on Register ...	1,575

NOTE.—A separate register is kept for bakehouses, the number of which in use at the end of the year was 42, including 35 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)	826	104	...
Workshops ... .. (Including workshop laundries)	1,181	179	...
Workplaces (cookshops, fried fish shops and ice cream shops) ... (excluding outworkers' pre- mises dealt with in Table III.)	868	97	...
Totals ... ..	2,875	380	...

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 ... ..	281	281	...	...
Want of ventilation ... ..	2	2	...	...
Overcrowding ... ..	...	...	...	...
Want of drainage of floors ... ..	...	...	...	...
Other nuisances ... ..	678	678	...	...
Sanitary ac- commodation {	insufficient ... ..	...	...	...
	unsuitable or defec- tive ... ..	290	290	...
	not separate for sexes	11	11	...
<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 outwork which are included in table on page 146).	...	...	...	...
Totals ... ..	1,072	1,072	...	...

\* 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).		Nil.
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshops Act (s. 5).	Notified by H.M. Inspector ...	18 (10 referring to factories and 8 workshops.)
	Reports (of action taken) sent to H.M. Inspector.	18 (10 referring to factories and 8 workshops.)
Other ... ..		2
Underground Bakehouses (s. 101) :—		
Certificates granted during the year	... ..	Nil.
In use at the end of the year	... ..	27

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

Premises cleansed throughout ...	48	Soil and vent pipes dealt with ...	3
Premises cleansed partially ...	44	Water-closets newly constructed	26
Number of rooms cleansed ...	148	Water-closets repaired, etc. ...	91
Walls, floors, sashes, etc., repaired	58	Water-closets obstructions removed	11
Roofs, guttering, etc., repaired...	64	Sinks, etc., cleansed and repaired..	12
Water reinstated or improved...	Nil.	Sculleries, yards, etc., paving re-	
Drains newly constructed ...	2	paired ... ..	8
Drains reconstructed ... ..	7	Sculleries, yards, etc., cleansed or	
Drains, repaired, etc. ... ..	17	limewashed ... ..	54
Drains, obstructions removed ...	11	Dust receptacles provided ...	10
Urinals cleansed, etc. ... ..	6	Foul accumulations removed ...	31

The number of factories under observation for insanitary conditions during the year was 104, and in connection with these 104 sanitary notices were served. The work carried out in compliance with these notices included the cleansing and repairing of water-closets in 112 instances, the removal of obstructions from drains and water-closets in 16 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 70 lists of out-workers were received from employers in the Borough, 34 in the first and 36 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 905 out-workers, of whom 656 were not residents in Shoreditch. The addresses of those non-resident were forwarded to the sanitary authorities of the districts to which they belonged.

The total number of out-workers reported was 1,957, and of these 1,297 were resident in Shoreditch. These figures may be compared with the corresponding figures of 1,978 and 1,321 for the year 1935.

As was pointed out in previous reports, in numerous instances names and addresses of outworkers are duplicated owing to lists being sent in twice a year, and in some cases the same outworkers are employed by more than one firm, so that the numbers given above must not be taken as representing the actual numbers of individual outworkers. The tables on pages 146 and 147 show the distribution of outworkers as regards trades in the Borough.

During the year 771 visits of inspection were made to places where home-work was being carried on, and in connection with these 110 sanitary notices were served. The cases of notifiable infectious disease occurring at out-workers' premises numbered 39 and included 16 of scarlet fever, 21 of diphtheria and 2 of pneumonia. The usual steps were taken in connection with these cases by the officers of the sanitary authority.

The following is a summary of the lists received from employers in the Borough :—

HOME WORK.

NATURE OF WORK.  (1)	OUTWORKERS' LISTS, SECTION 107.									Outwork in unwholesome premises, Section 108.			Outwork in infected premises, Sections 109 and 110.		
	Lists received from Employers.						Notices served on Occupiers as to keeping or sending Lists. (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)	Con-tractors. (3)	Work-men. (4)	Lists. (5)	Con-tractors. (6)	Work-men. (7)									
Wearing apparel :—															
(1) Making, &c. ... ..	37	120	448	2	...	25	...	...	...	42	42	Nil.	10	...	...
(2) Cleaning and washing...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Artificial flowers ... ..	2	...	15	...	...	...	...	...	...	10	10	Nil.	1	...	...
Upholstery ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Paper bags and boxes ... ..	16	...	185	7	...	54	...	...	...	40	40	Nil.	13	...	...
Fancy leather goods ... ..	4	...	36	...	...	...	...	...	...	15	15	Nil.	9	...	...
Carding of buttons ... ..	2	...	22	...	...	...	...	...	...	3	3	Nil.	7	...	...
TOTALS ... ..	61	120	706	9	...	79	...	...	...	110	110	Nil.	40	...	...

(a) 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. Therefore these figures constitute 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.

(b) See page 145 of this report with regard to infectious disease in the houses of outworkers.

Communications were received from various sanitary authorities relating to 1,060 outworkers for firms outside Shoreditch and as 8 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 1936.

SHOWING THE NUMBERS OF OUTWORKERS RECEIVED FROM OTHER DISTRICTS DURING 1936.																							
DISTRICTS.	Making Wearing Apparel.		Toys and Crackers.		Artificial Flowers.		Furniture and Upholstery.		Fur Pulling.		Umbrellas, &c.		Paper Bags and Boxes.		Brush Making.		Fancy Leather Goods.		Card Mounting.		Stuffed Toys.		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	21	15	...	10	...	...	...	...	...	...	1	1	12	14	1	...	...	...	...	...	8	...	83
Croydon	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Chelsea	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
City of London	133	137	...	...	6	8	...	...	6	10	13	14	...	...	...	...	5	3	...	...	...	...	335
Finsbury	58	57	5	20	19	15	10	4	3	1	5	4	28	25	1	...	29	7	11	10	13	...	325
Hackney	47	48	1	4	10	...	1	1	...	...	...	...	12	20	...	...	...	...	...	...	...	1	145
Hampstead	1	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Holborn	3	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	8
Islington	12	12	3	...	2	1	...	...	...	...	...	...	2	...	...	...	...	...	1	...	...	...	33
Kensington	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Lambeth	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	2
Lewisham	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Leyton	1	1	...	...	...	...	...	...	...	...	...	...	2	2	...	...	...	...	...	...	...	...	4
Poplar	...	...	...	...	...	...	...	...	...	...	...	...	2	2	...	...	...	...	...	...	...	...	4
St. Marylebone	2	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6
St. Pancras	...	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	5
Stepney	13	11	2	1	...	...	...	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	29
Stoke Newington	...	...	6	14	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	20
Southwark	4	4	...	...	...	...	1	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	11
Tottenham	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
West Ham	2	...	...	...	...	...	...	1	...	...	...	...	2	...	...	...	...	...	...	...	...	...	5
Walthamstow	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Westminster	10	15	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	25
TOTALS	311	316	17	51	37	24	12	8	10	11	20	19	60	65	2	...	34	10	13	10	21	1	1,052
	627		68		61		20		21		39		125		2		44		23		22		

LONDON COUNTY COUNCIL (GENERAL POWERS) ACT, 1928, SECTION 28.  
(POWERS NOW GIVEN BY THE PUBLIC HEALTH (LONDON) ACT, 1936, SECTION 224.)

Five cases which might possibly have been dealt with under the above Act came to the notice of the department during the year under review. Enquiries were made into each of these cases with the following result: In two it was found that they were not suitable for action under the Act; in two the patients were removed by order of the Court to St. Leonard's Hospital; and in one satisfactory arrangements were made for the necessary cleaning of the premises at which the patient resided.

SCHOOLS.

The sanitary condition of the public elementary schools in the Borough is satisfactory.

SMOKE NUISANCE.

During the year under review the inspectors continued to pay attention to the possibility of nuisance due to smoke from chimneys of factories and workshops. Observations were made in 66 cases, the usual period of observation ranging from five to thirty minutes. In two instances intimation notices were served.

According to the latest information there are, in the Borough, six brick shafts and eight steel shafts from factory boilers.

RAT SUPPRESSION.

During November, 1936, the annual Rat Week was held and an effort was made to educate the public concerning the danger to health and the economic wastage which is occasioned by rats. Posters were exhibited throughout the Borough.

It is not sufficiently realised by members of the general public that the Rats and Mice (Destruction) Act, 1919, places upon the owner the onus of clearing rat-infested premises. The sanitary inspectors offer considerable assistance to owners in the matter of advice regarding the most suitable methods of suppression in connection with any particular type of building. The work done during the year is summarised in the following table, but it should be realised that the items tabulated do not embrace all the work done by the inspectors in connection with rat suppression.

	Districts.									Totals.
	1	2	3	4	5	6	7	8	9	
Complaints dealt with ...	22	7	19	26	25	10	3	17	12	141
Drains tested ...	—	2	16	8	10	10	1	4	4	55
Found defective ...	—	—	3	6	8	1	—	—	4	22
Found satisfactory ...	—	2	13	2	2	9	1	4	—	33
Premises where egress of rats was ascertained ...	—	1	11	26	22	—	3	11	4	78
Premises reported freed from rats ...	20	7	19	26	24	10	2	12	6	126

In addition to the above, rat poison was deposited in sewers four times during the year.



\* 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.

PREMISES FOR PREPARATION AND SALE OF FOOD STUFFS.

STREET MARKETS.

The street markets were kept under observation in the evenings and on Sunday mornings in accordance with arrangements approved by this Committee.

MEAT.

The number of butchers' shops under inspection during the year was 58 and the number of visits of inspection was 104.

General observation was kept of all meat stalls where butchers' meat was exposed for sale. No warning letters were sent in respect of minor infringements of the Public Health (Meat) Regulations, 1924.

SLAUGHTER HOUSES.

There are no slaughter houses in the Borough.

COW HOUSES.

There is one licensed cow house in the Borough, in St. John's Road, licensed for 14 cows.

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 244, and 452 visits were made in connection with them. Sanitary notices were served on 46 owners mainly for cleansing.

FRIED FISH SHOPS.

At the end of the year 50 fried fish shops were under the supervision of the Health Department, and 135 visits were made to them.

ICE CREAM.

The number of premises under observation during the year was 202 and 281 visits of inspection were made. In 15 instances sanitary notices were served. Most of these were for general cleansing.

At the end of the year the number on the register was 190.

## BAKEHOUSES.

The number of bakehouses in use during the year was 42. Of these 27 were underground, and 35 were factory bakehouses.

In connection with bakehouses the sanitary inspectors paid 196 visits of inspection. Intimation notices were served in 18 instances.

The condition of many of the bakehouses in Shoreditch has long been unsatisfactory, and the peculiar difficulties which hamper any attempts to improve these conditions were dealt with in a report which I presented to the Public Health Committee in September, 1936. As this report is of some general interest, it is reproduced here *verbatim*.

*To the Chairman and Members of the Public Health Committee.*

*Bakehouses.*

I beg to present a report upon the condition of the bakehouses in the Borough of Shoreditch. Before dealing with the conditions found it may be advisable to summarise briefly the main legal enactments relating to bakehouses.

Section 98 of the Factory and Workshop Act, 1901, deals with nuisances in respect of bakehouses, and provides for a fine for non-compliance with a notice setting out the work necessary to remove the cause of complaint. Regulations regarding the limewashing of bakehouses are given in Section 99 of the same Act. Underground bakehouses are dealt with in Sections 101 and 102 of this Act. These Sections impose upon the local authority the onus of dealing with retail bakehouses. Important sub-sections of Section 101 are as follows:—

Sub-section (1): "An underground bakehouse shall not be used as a bakehouse unless it was so used at the passing of this Act."

Sub-section (2): "Subject to the foregoing provision, after the first day of January one thousand nine hundred and four an underground bakehouse shall not be used unless certified by the district council to be suitable for that purpose."

Sub-section (4): "An underground bakehouse shall not be certified as suitable unless the district council is satisfied that it is suitable as regards construction, light, ventilation, and in all other respects."

Sub-section (6): "If any place is used in contravention of this section, it shall be deemed to be a workshop not kept in conformity with this Act."

It should be especially noted that no power is given to a local authority by any Act of Parliament to cancel a certificate which has already been granted, and that no matter how bad the premises are, the certifying local authority cannot prevent their use as a bakehouse.

*Number of Bakehouses in the Borough.*

The total number of bakehouses in the Borough is 51, of which 27 are underground bakehouses within the meaning of the Factory and Workshop Act, 1901. Of these 51 premises, 9 are not at present in use, and 6 of these 9 are in premises which are let for other purposes and at the present time there is apparently no intention of using them again for baking purposes. It should be noted, however, that no further authorisation for this purpose is required from the local authority.

*Description of the Bakehouses in the Borough.*

I have divided all the bakehouses into three categories as follows :—

- (A) Bakehouses which are above ground and which are satisfactory in all respects.
- (B) Those which are not at present satisfactory but which could conceivably be somewhat improved by structural alterations and by other means.
- (C) Bakehouses which are definitely unsatisfactory by reason of structural defects and the lay-out of the premises, both of which cannot be satisfactorily improved without complete reconstruction.

As will be seen later, for all practical purposes categories (B) and (C) represent conditions which are very similar.

The number of bakehouses in each of these categories is given in the following table :—

	<i>Above ground.</i>	<i>Underground.</i>	<i>Total.</i>
(A) ... ..	2	—	2
(B) ... ..	12	18	30
(C) ... ..	1	9	10
	—	—	—
	15	27	42
	—	—	—

*Extent of trade.*

Of the 42 bakehouses which are in use 17 manufacture both bread and smalls, 20 bake bread only, and 5 bake cakes and smalls. Of bakehouses where bread is baked, the largest appear to be one which uses 36 sacks of flour per week, two which use 26 sacks, 5 between 20 and 25 sacks, 8 between 10 and 20 sacks, 6 between 5 and 10 sacks ; the majority of the remainder have only a small trade. 39 bakehouses have shops attached, and three bakehouses manufacture for the wholesale trade only.

*Condition of bakehouses.*

Generally speaking, I should say that the condition of the bakehouses in the Borough is poor, and in several instances the conditions are very bad.

Dealing first with those bakehouses which are listed above under categories (B) and (C), it was found that the ventilation is usually quite unsatisfactory, since air gains access to the bakehouse through a grating or slats which are situated at street level, and which, therefore, also act as a most effective opening for the admission of dust and other matter from the street. In one bakehouse the grating was placed horizontally at street level and opened into a small area about 18 inches in depth. This area was in no way screened from the bakehouse itself. The result is that it is practically impossible to prevent dust and dirt from the street finding access directly into the bakehouse. In many instances bakehouses are ventilated by slats placed vertically in the neighbourhood of the oven and again there is ample opportunity for the entry of dirt. In this worst type of bakehouse, the premises are often small—in fact sometimes much too small for the work which has to be carried out in them. Natural lighting is often deficient and artificial light has to be used throughout much of the day. The plaster of the walls is frequently defective and in only a few are the walls treated in such a way that the surface is impervious. The ceilings are frequently constructed of open joists and boards which are not made impervious.

A very important criticism of some of these bakehouses is that the entry to the baking premises from the shop is by means of a trap door which leads directly, not to a properly constructed stair, but to a permanent wooden ladder with steps instead of rungs. The trap door is sometimes situated in such a position that it is dangerous to leave it open, and consequently whenever the trap door is opened or closed, dust is carried down into the bakehouse. In seven of the bakehouses dampness was found in the walls or elsewhere.

The flour stores are frequently in premises at the rear or they are sometimes situated over the bakehouse. Those premises sometimes consist of sheds or of portions of the yard which have been covered over.

W.C.'s are provided for all bakehouses, and these are usually situated in the yards. Although all the bakehouses are provided with taps for washing purposes, only 25 have satisfactory sinks.

*Discussion of the position.*

I feel that a considerable proportion of the bakehouses in the Borough are in such a state that any action which might condone their existence in their present condition is to be deprecated. In other words, I am of opinion that every effort should be made to prevent the further use of such premises for the preparation of food stuffs. The main difficulty is that once a bakehouse was certified in 1904 as suitable for use as such, no power is given to the local authority by any Act to revoke a certificate. I have discussed this matter with various persons who are

dealing directly with the control of bakehouses in other parts of London, and I have not heard of any instance where action has been taken or attempted to revoke such a certificate.

I would ask the Committee to remember that the outlook of the public with regard to public health matters has altered considerably in the last thirty years, and premises which were considered suitable for baking purposes in 1904 would in no circumstances be regarded, for purposes of certification, as satisfactory at the present time. It would be possible to serve notices on the owners of certain bakehouses demanding that certain work should be carried out, but I wish to emphasize the point that the work asked for could be of only comparatively limited scope, and that this work could not, for example, create a satisfactory bakehouse out of premises which are at present underground, cramped, badly lighted and badly ventilated. I am, therefore, of opinion that it would be unwise to ask for extensive structural work in respect of the worst bakehouses, and that efforts should be made to obtain a revocation of the certificate.

As was pointed out above, there are at present no powers by which this can be accomplished, and as the question of the suitability of baking premises is not confined solely to the Borough of Shoreditch, I suggest that this Council should initiate a discussion with other local authorities in London with a view to the institution of new powers containing special provisions for the abolition of the old system of permanent certification and the substitution therefor of annual registration following an inspection by officials of the local authority. In the meantime efforts are being made to improve the cleanliness and general condition of the bakehouses and notices are being served for the carrying out of the repair of minor defects. Further, in the case of this Borough an opportunity to effect the closing of a number of these bakehouses is given by the powers of the local authority and of the London County Council under the Housing Acts. Thirteen bakehouses are situated in areas which are either being dealt with or will be dealt with by this Council or by the London County Council.

E. ASHWORTH UNDERWOOD,  
*Medical Officer of Health.*

Public Health Offices,  
23rd September, 1936.

The Council adopted my suggestion and the main provisions of the report were referred to the Metropolitan Boroughs' Standing Joint Committee. It was felt that the time was particularly appropriate for official action, as a new Factory Bill was then before Parliament. The history of the further proceedings to the time of writing is contained in the following report of the Public Health Committee, which was adopted by the Council at the meeting which was held on 25th May, 1937 :—

“ That your Committee have had before them a report submitted to, and adopted by, the Metropolitan Boroughs' Standing Joint Committee, referring to Clause 52 of the Factories Bill, relating to basement bakehouses and expressing

the opinion that opportunity should be taken, in connection with any new legislation, to provide for the review of certificates issued in respect of underground bakehouses. These certificates were allowed by virtue of the exceptions contained in Section 101 of the Factories and Workshops Act, 1901, and it is considered that steps should be taken gradually to ensure the application of modern standards to the continued certification of underground bakehouses, which at present can continue on a certificate issued 36 years ago.

“The Standing Joint Committee have approved of the forwarding of suggestions to the Secretary of State for Home Affairs, that provision should be included in the Bill that all certificates at present in existence should expire at a given date, when application for renewal must be made to the local sanitary authority, and that after the year 1950 the exemption in respect of present underground bakehouses should terminate.

“Your Committee have received a report on this matter from the Medical Officer of Health, in which he suggests that the Standing Joint Committee be asked to take steps to secure that, within six months of the coming into force of the Bill, all bakehouses should require to be re-licensed, such licensing to be annual, and that the year 1940 be substituted for 1950 as the year in which the exemption in respect of present underground bakehouses should terminate. In regard to the second suggestion, he pointed out that, having regard to the improving standard deemed desirable, the existing underground bakehouses (which have been in existence since before 1901) will be in a relatively worse condition in 1950 as compared with the then modern standards.

Your Committee

*Recommend*—That this Council do approve of the suggestions of the Medical Officer of Health, as set out above, and that representations be made to the Metropolitan Boroughs' Standing Joint Committee accordingly.”

#### REGISTRATION OF FOOD PREMISES.

The Public Health (London) Act, 1936, section 187, requires the registration with the sanitary authority of certain premises which are used or are proposed to be used for the sale or manufacture of certain food stuffs.

The number of premises on the register at the end of 1936 under this section was:—

(i) Ice cream, etc.	...	...	...	...	...	...	...	190
(ii) Other food	...	...	...	...	...	...	...	99

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 135.

The following foodstuffs were surrendered and destroyed during the year: 1 ton 13 cwts. savoy's; 12 cwts. sheep's heads; 7 cwts. cod; 48 fowls; 2 cwts. 2 qrs. 17 lb. jellied veal; 18 lb. corned beef; 2 cwts. haddocks; 3 stones skates; 37 lb. (about) boneless ham; 117 tins silds; 5 stones (about) rock salmon.

## MILK AND DAIRIES ORDER, 1926.

General observation was kept by the inspectors on all purveyors of milk in the Borough. No legal proceedings were taken during the year.

## PHARMACY AND POISONS ACT, 1933.

Under this Act the onus of enforcing the provisions which relate to poisons in Part II of the Poisons List is placed upon the local authority. Poisons in Part I of the Poisons List may be sold only by authorised sellers, i.e., registered pharmacists, but poisons in Part II may be sold by authorised sellers and by persons who are registered with the local authority. Authorised sellers are inspected by the inspectors appointed by the Pharmaceutical Society.

Section 25, sub-section 5, of the Act places upon the local authority the duty, by means of inspection and otherwise, of taking all reasonable steps to secure compliance with the provisions of the Act, by persons who are required to be registered as being authorised to sell those poisons included in Part II of the Poisons List. Each of the sanitary inspectors has been appointed to carry out these inspections, but in practice this work is usually performed by the food and drugs inspector.

Section 25, sub-section 6, gives a sanitary inspector, for the purposes of section 25 (5), power to enter at all reasonable times any premises on which any person whose name is entered in the list carries on business, and any premises on which the inspector has reasonable cause to suspect that a breach of the law has been committed in respect of any poisons included in Part II of the Poisons List. He also has power to make such examination and enquiry and to do such other things, including the taking, on payment therefor, of samples, as may be necessary for the purposes of the inspection.

The number of persons whose names are entered in the list as being entitled to sell those poisons included in Part II of the Poisons List is 39.

## MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

During the year 61 applications were received for the sale of milk under these regulations in the Borough. The applications were investigated and all were found to be satisfactory.

Sixty samples of milk were taken during 1936, compared with 84 in 1935.

Of the 60 samples, 12 did not comply with the standard laid down by the order. The result of the examination of these is given in the following table :—

No. of sample.	Designation of milk.	No. of bacteria per c.cm.	Presence of coliform bacillus.	Remarks.
22	Pasteurised	279,000	Present in 1/10 c.c.	Unsatisfactory.
31	"	124,900	"	"
32	"	119,000	"	"
33	"	110,900	"	"
34	"	130,900	"	"
57	"	170,900	"	"
58	"	136,000	"	"
70	"	263,600	"	"
71	"	208,600	"	"
72	"	296,000	"	"
73	"	260,000	"	"
85	"	149,000	"	"

Of the 12 samples which did not comply with the order, 2 were taken from dairymen in the Borough, and 10 from wholesalers outside Shoreditch who were delivering milk in this district. Warnings were issued to the offending Shoreditch dairymen, and in the other cases details were furnished to the district concerned.

Of the remaining 48 samples, six were "Grade A (T.T.)" milk and the remainder were "Pasteurised" milk. None of the samples of "Grade A (T.T.)" showed the presence of *B. coli* in 1/10 c.c., and the total counts were 860, 2,460, 3,670, 33,100, 131,000 and 95,000 per c.cm. respectively. Of the 42 samples of "Pasteurised" milk which complied with the prescribed standards 10 showed *B. coli* in 1/10 c.c. The total counts of these 10 samples are shown in the following table:—

Below 1,000.	Below 10,000.	Below 20,000.	Below 50,000.	Below 100,000.
—	2	1	3	4

In all the others *B. coli* was absent in 1/10 c.c. The total counts of these 32 samples are shown in the following table:—

Below 1,000.	Below 10,000.	Below 20,000.	Below 50,000.	Below 100,000
—	14	10	6	2

#### UNDESIGNATED MILK.

During the year 25 samples of undesignated milk were submitted for bacteriological examination. Of these 25 samples, 5 were from individual cows in the Borough. *B. coli* was absent in 1/10 c.c. in all of these samples. The total counts in these 5 samples were all between 3,000 and 11,000.

A sample of milk taken from an individual cow was found to contain pus cells, and the udder appeared to be abnormal. The advice of a veterinary surgeon was



sought. He stated that the cow was suffering from acute mastitis. The sale of the milk for human consumption was immediately stopped, and the cow was removed from the herd.

In the other 20 cases samples were taken in course of delivery. In these *B. coli* was present in 1/1,000 c.c. in six samples, present in 1/100 c.c. in one sample, present in 1/10 c.c. in five samples and absent in 1/10 c.c. in the remaining eight samples. The total counts in these 20 samples are shown in the following table:—

Under 1,000	1,000–5,000.	5,000–25,000.	25,000–100,000.	100,000–200,000.	200,000–500,000.	Over 500,000.
5	2	4	4	—	1	4

These samples were taken with the object of raising the standard of bacteriological purity of the milk sold in the Borough. The samples were taken in batches. When the reports upon each batch of milk were received, a list was sent to the vendors giving the particulars of the analyses of the samples 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 samples sold at the same time. An appropriate covering letter was also sent indicating the principles and emphasizing the importance of clean milk production.

A milk bottle from a bottle washing machine in use in the Borough was submitted for bacteriological examination. The total count was seven. No *B. coli* were present in 1/10 c.c.

#### CONDENSED MILK REGULATIONS.

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

#### DRIED MILK REGULATIONS.

One sample of dried milk was submitted for analysis under the above Regulations; it complied with the standard laid down.

#### MILK AND CREAM REGULATIONS, 1912.

None of the 312 samples of milk submitted for analysis was reported to contain preservative.

Ten samples of cream were submitted for analysis; none of these was reported to contain preservative.

#### TUBERCULOUS MILK.

Samples of milk entering London are taken by the London County Council at railway termini and also from supplies entering by road.

There is one cowshed in Shoreditch. Five samples of milk from this and eleven samples of milk in course of delivery were submitted for guinea pig test, but in no instance was the presence of tubercle bacilli reported.

## EXAMINATION OF MILK SUPPLIED TO L.C.C. HOSPITALS AND SCHOOLS, 1936.

During 1936, 30 samples of milk were taken in course of delivery to St. Leonard's Hospital and 15 to St. Matthew's Hospital; 6 of these failed to comply with the standard laid down by the Board of Agriculture.

In two instances fat was deficient to the extent of 3 per cent. and 0.6 per cent., respectively. The remaining four adulterated samples contained added water, in three cases to an extent of not less than 1.0 per cent., and in the other case to not less than 4.0 per cent. Legal proceedings were instituted with regard to the last-mentioned sample, but owing to successful proceedings being taken against the farmer the summons was withdrawn, five guineas costs being paid to the Council.

## MILK SAMPLES TESTED IN THE DEPARTMENT.

During 1936, 142 samples of milk were tested in the department by the Gerber process with the following results:—

Genuine.	Deficient in fat only.	Deficient in solids other than fat.	Deficient in fat and non-fatty solids.
138	2	2	—

The average composition of these samples was:—

Fat, 3.3%      Solids not fat, 8.8%      Total solids, 12.1%

## THE FOOD AND DRUGS (ADULTERATION) ACT, 1928.

During the year 614 samples were submitted to the Public Analyst, Mr. H. G. Harrison, M.A. This figure gives a rate of 7.2 per 1,000 inhabitants.

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

Quarter of 1936.	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.
1st	174	12	6.89	1	—	1	1	£ 2 2 0
2nd	155	7	4.58	—	—	—	—	—
3rd	112	4	3.27	—	—	—	—	—
4th	173	16	9.24	2	1	1	1	8 8 0
Totals for year	614	39	6.35	3	1	2	2	10 10 0

The samples taken during 1936 included :—

312 milk ; 5 fish paste (4 informal) ; 1 butter ; 1 ground rice ; 1 ground arrowroot ; 4 shredded suet (2 informal) ; 10 chopped suet (7 informal) ; 10 cream (8 informal) ; 5 zinc ointment (2 informal) ; 6 peppercorns (4 informal) ; 8 sugar (4 informal) ; 10 sausages (8 informal) ; 4 ale ; 10 vinegar ; 4 margarine ; 8 ground almonds (4 informal) ; 8 whiskey.

Informal samples were also taken as follows :—

8 chopped peel ; 4 minced beef ; 12 jam ; 4 sulphur ointment (B.P.) ; 1 rum ; 8 tea and tea dust ; 8 brawn ; 4 pickles ; 4 tinned soup ; 11 tinned fruit ; 4 cod liver oil (B.P.) ; Parrish's chemical food 5 ; 3 cream of magnesia ; 4 soup powder ; 12 condensed milk ; 10 tinned fish ; 8 bread and butter ; 8 cocoa ; 8 tinned peas ; 1 coffee ; 3 coffee and chicory ; 5 olive oil ; 5 liquid paraffin (medicinal) ; 4 boric acid ointment ; 4 mineral water ; 8 black pudding ; 4 ice cream ; 4 dripping ; 4 boiled ham ; 4 breakfast sausage ; 2 marmalade ; 4 sulphur ointment (B.P.) ; 6 corned beef ; 5 meat pie ; 1 medicine (Mothers' tonic) ; 1 cod liver oil emulsion (B.P.C.) ; 1 cod liver oil and malt ; 1 dried milk (full cream) ; 4 sauce ; 4 castor oil ; 3 bacon ; 3 non-alcoholic wine.

The subjoined table gives a comparison of the results of the work under the Sale of Food and Drugs Acts for the years 1932-1936 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.
									£ s. d.
1932	971	98	44	4.5	18	—	18	18	40 15 0
1933	677	138	21	3.1	6	1	5	4	12 1 6
1934	660	137	22	3.3	8	1	7	1	19 4 6
1935	640	138	34	5.3	7	—	7	5	14 0 6
1936	614	139	39	6.3	3	1	2	2	10 10 0

Two informal samples of tinned fish were found to have an excessive amount of tin, the amount being 2.73 and 2.31 grains per pound respectively. The vendors were approached on the matter, and a total of 143 tins were surrendered for destruction.

An informal sample of tinned cream bearing a declaration that it contained 23 per cent. of milk fat was found to be 6 per cent. below the declared amount. A formal sample was obtained from the same source and was found to be deficient to the extent of 4.5 per cent. A warning letter was sent to the manufacturers from whom satisfactory assurances were later received.

An informal sample of zinc ointment B.P. was found to be deficient in zinc oxide to the extent of 8 per cent. A formal sample was obtained from the same source. This was found to be of genuine B.P. Standard.

An informal sample of chopped suet was found to contain 14.4 per cent. of rice flour. A formal sample taken from the same source was found to contain 9.6 per cent. of rice flour. A suitable warning letter was addressed to the vendor.

An informal sample of foot sugar was found to contain 3.71 grains per pound of tin. An attempt was made to obtain a formal sample, but it was found that the supply was exhausted.

A sample of vinegar was found to be deficient in acetic acid to the extent of 4.7 per cent. A suitable warning letter was addressed to the vendor.

A sample of whiskey was found to contain 5.3 per cent. of added water. Legal proceedings were instituted and defendant was ordered to pay three guineas costs.

The majority of the samples taken were of milk which was represented by 312 samples during the year. Of these 17 or 5.45 per cent. were found to be below the standard fixed by the Board of Agriculture. The following table shows the results of analysis :—

Quarter of the year.	Number of samples.	Number not genuine.	Percentage adulterated.
1st	84	8	9.52
2nd	90	—	—
3rd	62	2	3.23
4th	76	7	9.21

In eleven of these samples water was certified to have been added. In all of these cases the amount of added water was less than 5 per cent. Six of the samples showed deficiency in fat ranging from 0.6 to 3 per cent. below the standard laid down by the Board of Agriculture.

Legal proceedings were instituted in 2, or 11.77 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 which were 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 88.2.

## PRESERVATIVES IN FOOD REGULATIONS.

All articles taken were in accordance with the regulations.

## 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.

## 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.
Jan. 29	Fixing lavatory basins with waste pipes at No. 10, East Road, without previous notice in writing to the Sanitary Authority.	£ s. d. —	£ s. d. 2 0	Ordered to pay 2s. cost of summons.
Mar. 17	Fixing w.c. pan and trap at No. 4, Grange Street without previous notice in writing to the Sanitary Authority.	—	1 3 0	—
Mar. 18	Fixing sink with trap and waste pipe at No. 54, Albion Road, without previous notice in writing to the Sanitary Authority.	—	1 3 0	—
Apr. 29	Fixing w.c. pan at No. 39, Hyde Road, without previous notice in writing to the Sanitary Authority.	—	2 2 0	—
May 26	Non-compliance with Statutory Notice in respect of No. 46, Rushton Street.	—	3 3 0	—
July 7	Non-compliance with Statutory Notice in respect of No. 47, Falkirk Street.	—	2 2 0	—
July 28	Fixing w.c. pan at No. 5, Bristow Street, without previous notice in writing to the Sanitary Authority.	—	3 3 0	—
Aug. 7	Non-compliance with Statutory Notice in respect of No. 69, Westmoreland Place.	—	2 2 0	—
Sept. 8	Non-compliance with Statutory Notice in respect of No. 319, Hoxton Street.	—	2 2 0	—
Oct. 14	Non-compliance with L.C.C. Bye-laws in respect of the repair of certain drainage work at No. 8, Branch Place.	1 0 0	1 3 0	—
Nov. 19	Fixing sink with trap and waste pipe at No. 101, Pownall Road, without previous notice in writing to the Sanitary Authority.	—	1 1 0	—
Nov. 24	Fixing w.c. pan at No. 26, Edith Street, without previous notice in writing to the Sanitary Authority.	—	1 1 0	—

## FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Date.	Nature of Offence.	Fine.	Costs.	Remarks.
Jan. 28	Selling milk not of the nature, substance or quality demanded by the purchaser.	£ s. d. —	£ s. d. 12 6	—
Apr. 7	Selling milk not of the nature, substance or quality demanded by the purchaser.	—	2 2 0	—
Dec. 15 adj.	Delivering milk not of the nature, substance or quality demanded by the purchaser.	—	5 5 0	—
Jan. 5	by the purchaser.			

## X.—HOUSING.

The year 1936 was marked by the passing of a consolidating measure of considerable importance, viz., the Housing Act, 1936. The provisions of the Housing Acts, 1925 to 1935, and those of certain other enactments relating to housing are consolidated in this new Act. However, as the 1936 Act did not become operative until the 1st January, 1937, activities in connection with housing continued during the year under review to be governed by the previous Acts.

### OVERCROWDING.

The special conditions which are found in Shoreditch have so far made it impossible to fix the date of the "appointed day." Overcrowding is therefore not yet an offence in this Borough, but the question has been vigorously dealt with throughout the year, and although a great deal remains to be done some progress has been made.

The overcrowding survey which was carried out last year brought to light the fact that 72 families living in properties owned by the Borough Council were overcrowded. During 1936 this question was dealt with as follows:—

Families overcrowded at time of survey, 1935	...	...	...	...	72
Overcrowding abated by members of family leaving home (chiefly marriage) and in one case death	...	...	...	...	11
Overcrowding abated by removal (in eight cases to larger flats owned by the Borough Council)	...	...	...	...	16
Overcrowding abated in houses owned by Borough Council by sub-tenants taking additional rooms	...	...	...	...	8
Still overcrowded at the end of the year...	...	...	...	...	37

### ACTION TAKEN IN RESPECT OF OVERCROWDING.

During the year 1936, 235 cases of overcrowding were abated as a result of enquiry and action by the sanitary staff, and in some cases as a result of reports to the Housing Committee. The London County Council accommodated 64 of these families and in the other 171 instances the accommodation was obtained from other sources. In addition to these cases 328 families were re-housed by the London County Council in connection with their slum clearance programme, 17 cases were



dealt with on the grounds of special hardship, and 1 as a result of representations made to the London County Council regarding the health of certain members of the family.

Whilst a certain amount of relief of overcrowding is being steadily effected by official housing activities, it is apparent that many more families are being accommodated as a result of their own efforts. There are, of course, other factors which have a bearing on the subject. Any information which is available is therefore incomplete, and does not form a proper basis for an accurate estimate of the number of houses which are overcrowded or of families which are still living under overcrowded conditions. It is regrettable that the accurate figures which were supplied by the survey which was carried out in 1935 cannot be kept up to date unless a further survey is carried out.

### CLEARANCE AREAS.

During the year nine areas were represented for demolition. The areas, with the number of houses represented in each, were as follows: Lees Buildings, 13; Renous Court, 9; Bartlett Buildings, 10; Market Street, 27; Brunswick Street, 5; Dunston Street, 6; Bevenden Street, 11; Batemans Place, 11; Reliance Square, 12. The total number of houses which were represented was 104.

Four areas represented in 1935, Dereham Place, French Place, Socrates Place, and Holywell Place were, in February, 1936, declared clearance areas in pursuance of the provisions of Section 16 (5) (ii) of the Housing Act, 1930, and clearance orders were made. In May, three other areas, viz., the Reliance Square, Batemans Place and Dunston Street areas, were similarly declared to be clearance areas and orders were made. Clearance orders made in connection with French Place, Socrates Place, Batemans Place, and Dunston Street areas were duly confirmed by the Minister of Health. As objections to the confirmation of the orders made in respect of Dereham Place, Holywell Place and Reliance Square were received, the Ministry held a Local Enquiry at the Town Hall on the 16th July. In due course the orders were confirmed by the Minister of Health.

These areas contained 64 houses which accommodated 85 families, consisting of a total of 313 persons. When the orders became operative, the work of clearing the areas was commenced. By the end of the year 33 houses were vacant and 48 families had been found accommodation, and the four houses in French Place were demolished.

### INDIVIDUAL UNFIT HOUSES.

#### HOUSING ACT, 1930, SECTION 19.

In 1936, two houses, Nos. 47 and 55, Appleby Street, were represented as not fit for human habitation and not capable, at a reasonable expense, of being rendered so fit. The owners gave undertakings that the premises would not be used for residential

purposes, and these undertakings were accepted by the Council. By the end of the year No. 47 had been vacated and early in 1937 demolition was completed. At the time of writing No. 55 is empty.

### UNDERGROUND ROOMS.

Owing to the difficulties experienced in re-housing the occupants of underground rooms, it has not been possible to deal as a routine measure with the numerous basements which are found in Shoreditch. Where the question of accommodating a family occupying basement rooms has arisen, the opportunity of dealing with the rooms as underground rooms is taken and 27 properties were inspected for this purpose. Of these, 17 were reported for action under the Housing Act, 1935, Section 84, but as this was in the latter part of the year, the preliminary action had not been completed by the end of the year. At the time of writing a number of these underground rooms have been dealt with.

### VERMINOUS HOUSES.

Disinfestation, by the cyanide method, of furniture, etc., of tenants moving into this Council's flats was continued. During the year the contents of 31 houses were dealt with in this way. The work was performed by a private firm under the supervision of one of the Council's sanitary inspectors who has specialised in this type of work. The tenants whose effects were dealt with were those moving into new flats in Halley House, Pritchards Road, and to other flats which had become vacant.

### REPAIR OF DEFECTS.

#### HOUSING ACT, 1930, SECTION 17.

During 1936 the powers given by this section were used in respect of working-class dwelling-houses which are not likely to become the subject of clearance orders for some time and which are generally occupied by a good type of tenant. The following are particulars of the work done during the year under this section:—

Number of premises inspected	...	...	...	...	...	...	...	128
Number of premises where notices have been served	...	...	...	...	...	...	...	78
Number of premises where work has been satisfactorily completed	...	...	...	...	...	...	...	78

The total estimated cost of works required by notices amounted to £2,967 16s. 0d. Visits of re-inspection numbering 1,173 were made in connection with the supervision of repairs required.

In a number of cases where inspections were being made, it was found that owners had already instructed builders to do certain repairs. In these cases an inspection was made, and in every instance the repairs so ordered by the owners were of such a character that it was not necessary to serve notices.

*Dangerous Structure Notices.*

The number of these notices served during the last six years was as follows :

1931—190 ; 1932—211 ; 1933—225 ; 1934—210 ; 1935—106 ; 1936—110.

## REBUILDING.

During the year the following new blocks of flats were commenced (but not completed), viz. :—

L.C.C. Estate, Clarissa Street	...	...	...	...	132 flats.
Shoreditch Borough Council, Stonebridge Estate	...	...	...	...	70 "

The following table gives particulars of the work done under the Housing Acts 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)	...	...	8,841
(b) Number of inspections made for the purpose	...	...	35,180
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	...	...	535
(b) Number of inspections made for the purpose	...	...	804
(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	...	...	387

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	...	...	4,684
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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	...	...	78
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—			
(a) By owners	...	...	78
(b) By local authority in default of owners...	...	...	N <sub>i</sub> l

## 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) ... ..	840
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) By owners ... ..	840
(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 or Undertaking accepted ... ..	2
(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

4. *Housing Act, 1935.—Overcrowding :—*

(a) (i) Number of dwellings overcrowded at end of year ... ..	} See page 164 of this Section.
(ii) Number of families dwelling therein ... ..	
(iii) Number of persons dwelling therein ... ..	
(b) Number of new cases of overcrowding reported during the year ...	
(c) (i) Number of cases of overcrowding relieved during the year ...	
(ii) Number of persons concerned in such cases ... ..	
(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding ... ..	
(e) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report ... ..	

## RENT RESTRICTIONS ACTS.

The number of these certificates issued during the last eight years was as follows :—  
 1929—1 ; 1930—3 ; 1931—1 ; 1932—4 ; 1933—3 ; 1934—7 ; 1935—1 ;  
 1936—3.

## XI.—HEALTH PROPAGANDA.

Health Week, which was held from the 12th to 16th October, 1936, did not include an exhibition, but took the form of a series of lectures—illustrated by films—which were given in the afternoons and evenings on health subjects. In the mornings parties of school children attended to hear talks given on matters relating to health; films were also shown at these talks.

The programme of lectures was as follows:—

<i>Date.</i>	<i>Lecturer and Title of Lecture.</i>	<i>Chairman.</i>
MONDAY, 12TH OCTOBER, 1936.		
8 p.m.	Dr. E. Ashworth Underwood, Medical Officer of Health. "The Health of London." Film.	Mr. Councillor T. J. Silltoe, J.P.
8.30 p.m.	In Council Chamber. For Women only. Dr. Gladys Hill. "Healthy Pregnancy."	Councillor Mrs. D. Thurtle
9 p.m.	Dr. J. E. McCartney, Director of Research and Pathological Services, L.C.C. "Diphtheria and its Prevention." Film.	Mr. Councillor A. I. MacBeth.
TUESDAY, 13TH OCTOBER, 1936.		
3 p.m.	Lecture demonstration by the Women's League of Health and Beauty.	
7.30 p.m.	Mr. A. W. McKenny Hughes. "Bugs—The Red Army." Film.	Councillor Dr. S. W. Jeger, L.C.C.
8.30 p.m.	Mr. C. S. Abraham, M.C., L.D.S. "Health and your Teeth." Films: (i) "The Trapeze Man Talks"; (ii) "A Brush with the Enemy."	Mr. Councillor R. G. Linale.

## WEDNESDAY, 14TH OCTOBER, 1936.

- 3.30 p.m. Films: (i) "The Nutrition Film";  
(ii) "A famous cook at work."
- 4 p.m. Mr. T. T. Stamm, F.R.C.S. "The mechanism of the foot." Film: "The Foot." Mr. Councillor A. Charles.
- 7.30 p.m. Swimming Gala at Hoxton Baths, Pitfield Street. (Admission by Special Programme only.)

## THURSDAY, 15TH OCTOBER, 1936.

- 3 p.m. Lecture demonstration by the Women's League of Health and Beauty.
- 7.30 p.m. Professor S. J. Cowell, F.R.C.P. "Food and Health." Film. Mr. Alderman G. J. Touchard.
- 8.30 p.m. Dr. C. K. Cullen, Tuberculosis Officer. "Tuberculosis: An unnecessary scourge." Film: "Stand Up and Breathe." Councillor Mrs. M. Higgins.

## FRIDAY, 16TH OCTOBER, 1936.

- 3 p.m. Films: (i) "The Nutrition Film";  
(ii) "A famous cook at work."
- 7.30 p.m. Dr. E. C. McGregor, Asst. Medical Officer of Health. "The Skin and its uses." Alderman Miss E. Kellett.
- 8.30 p.m. Dr. Drummond Shiels, M.C. "Our Young People To-day." Film. Mr. Councillor P. D. Clemenson.

On Tuesday a demonstration which was given by the Women's League of Health and Beauty was much appreciated.

As has been the case in previous years, Wednesday evening was devoted to a swimming gala at the Pitfield Street Baths. The programme included team races for Shoreditch boys and girls; a display of fancy diving by the "Lucraties," a display of fancy and scientific swimming by ladies of the Hammersmith Ladies' Swimming Club; a demonstration by Miss Ivy Clifford; a water polo match between the "Penguins IV" and "Anlaby," and the final of the London League Water Polo Championship (Girls)—Hounslow v. Hammersmith. Music was provided by the Hoxton Excelsior Silver Band.

The attendances during Health Week numbered 5,440. This total includes school children and the number of persons who attended the swimming gala.

## APPENDIX.

## LIST OF CLINICS.

Day.	Clinic.	Where Held.	Time.	Officer.
Mon. ..	Ante Natal .. ..	210, Kingsland Road ..	10.0 — 12.0	Dr. G. Hill.
	Child Welfare .. ..	Do. .. ..	2.0 — 4.0	Dr. N. O. Richards.
	Do. .. ..	Hoxton Market Institute	2.0 — 4.0	Dr. R. Hudson.
	Artificial Sun Light ..	210, Kingsland Road ..	2.0 — 4.0	Dr. E. C. McGregor.
	Breast Feeding .. ..	Do. .. ..	12.0 — 5.0	Do.
	Foot .. ..	Hoxton Library, Pitfield St.	2.30 — 4.30	Mrs. H. E. Maber.
	Gynæcological .. ..	210, Kingsland Road ..	2.0 — 4.0	Dr. G. Hill.
	Tuberculosis Dispensary	145, Gt. Cambridge Street	2.0 — 3.30	Dr. C. K. Cullen.
	Do. .. ..	Do. .. ..	6.30 — 8.0	Do. *
	Dental Hospital.. ..	8-14, Laburnum Street ..	10.0 — 12.30	Mr. C. S. Abraham.
		2.0 — 4.30	Do.	
		6.0 — 8.0	Do.	
Tues. ..	Child Welfare .. ..	210, Kingsland Road ..	10.0 — 12.0	Dr. E. C. McGregor.
			2.0 — 4.0	Drs. E. Goffe and
	Do. .. ..	St. Helen's Club .. ..	2.0 — 4.0	A. Rose.
	Ante Natal .. ..	28, Herbert Street .. ..	10.0 — 12.0	Dr. L. Phillips.
	Child Welfare .. ..	Do. .. ..	2.0 — 4.0	Dr. N. Dancy.
	Do. .. ..	Hoxton Hall .. ..	10.0 — 12.0	Do.
			2.0 — 4.0	Dr. R. Hudson.
	Artificial Sun Light ..	210, Kingsland Road ..	10.0 — 12.0	Do.
	Foot .. ..	Hoxton Library, Pitfield St.	2.30 — 4.30	Dr. E. C. McGregor.
			6.0 — 8.0	Mrs. H. E. Maber.
			Do.	
	Diphtheria Immuniza- tion .. ..	210, Kingsland Road ..	2.30 — 4.0	Dr. E. C. McGregor.
	Tuberculosis Dispensary	145, Gt. Cambridge Street	2.0 — 3.30	Dr. C. K. Cullen.
			4.30 — 6.0	Do. †
	Dental Hospital.. ..	8-14, Laburnum Street ..	2.0 — 4.30	Mr. C. S. Abraham.
			6.0 — 8.0	Do.
Wed. ..	Post Natal (2nd and 4th Wednesdays only) ..	210, Kingsland Road ..	10.0 — 12.0	Dr. G. Hill.
	Child Welfare .. ..	Do. .. ..	2.0 — 4.0	Dr. N. O. Richards.
	Do. .. ..	Hoxton Market Institute	2.0 — 4.0	Dr. E. Goffe.
	Artificial Sun Light ..	210, Kingsland Road ..	2.0 — 4.0	Dr. E. C. McGregor.
	Breast Feeding .. ..	Do. .. ..	9.0 — 5.0	Do.
	Foot .. ..	Hoxton Library, Pitfield St.	2.30 — 4.30	Mrs. H. E. Maber.
			6.0 — 8.0	Do.
	Tuberculosis Dispensary	145, Gt. Cambridge Street	2.0 — 3.30	Dr. C. K. Cullen.
	Dental Hospital.. ..	8-14, Laburnum Street ..	10.0 — 12.30	Mr. C. S. Abraham.
			2.0 — 4.30	Do.
Thurs.	Ante Natal .. ..	210, Kingsland Road ..	10.0 — 12.0	Dr. G. Hill.
	Child Welfare .. ..	Do. .. ..	2.0 — 4.0	Two Doctors.
	Do. .. ..	Haggerston Hall .. ..	2.0 — 4.0	Dr. A. Rose.
	Do. .. ..	28, Herbert Street .. ..	2.0 — 4.0	Dr. L. Livingstone.
	Artificial Sun Light ..	210, Kingsland Road ..	10.0 — 12.0	Dr. E. C. McGregor.
			2.0 — 4.0	Do.
	Tuberculosis Dispensary	145, Gt. Cambridge Street	2.0 — 3.30	Dr. C. K. Cullen.
	Dental Hospital.. ..	8-14, Laburnum Street ..	10.0 — 12.30	Mr. C. S. Abraham.
		2.0 — 4.30	Do.	
Fri. ..	Ante Natal .. ..	210, Kingsland Road ..	10.0 — 12.0	Dr. S. Smith.
	Child Welfare .. ..	Do. .. ..	2.0 — 4.0	Do.
	Do. .. ..	Harbour Lights .. ..	2.0 — 4.0	Dr. E. Goffe.
	Do. .. ..	St. Helen's Club .. ..	2.0 — 4.0	Dr. L. Phillips.
	Artificial Sun Light ..	210, Kingsland Road ..	2.0 — 4.0	Dr. E. C. McGregor.
	Breast Feeding .. ..	Do. .. ..	9.0 — 5.0	Do.
	General Medical for Women .. ..	210, Kingsland Road. ..	10.0 — 12.0	Dr. J. K. Aitken.
	Foot .. ..	Hoxton Library, Pitfield St.	10.0 — 12.0	Mrs. H. E. Maber.
	Tuberculosis Dispensary	145, Gt. Cambridge Street	2.0 — 3.30	Dr. C. K. Cullen.
	Dental Hospital.. ..	8-14, Laburnum Street ..	2.0 — 4.30	Mr. C. S. Abraham.
		6.0 — 8.0	Do.	

\* For patients and contacts at work during the day.

† For School children only.

## INDEX.

SUBJECT.	PAGE	SUBJECT.	PAGE
Acts, Regulations and Orders ...	21	Cookshops and eating houses ...	149
Acute anterior poliomyelitis ...	50	Cowhouses ...	149
Aged and infirm persons ...	148	Dental Hospital—	
Ambulance facilities ...	21	Anaesthetics ...	123
Ante-natal supervision ...	90	Financial aspect ...	120
Anthrax ...	50	Pre-school children ...	124
Area of Borough ...	12	Premises and staff ...	120
Artificial sunlight clinic ...	98	Summary of work ...	121
Ashpits ...	139	Dangerous structure notices ...	167
Bacteriological examinations ...	59	Deaths, causes of ...	36
Bakehouses ...	150	Deaths in age groups ...	28
Births registered ...	22	Deaths in outlying institutions ...	29
Births in sub-districts ...	23	Deaths in public institutions ...	30
Birth rates ...	24	Death rates ...	26, 27, 89
Breast feeding ...	94	Deaths from street accidents ...	27
Brunswick day nursery ...	101	Deaths in wards ...	27
Cancer ...	32	Density of Borough ...	22
Cerebro-spinal fever ...	49	Diarrhoea and enteritis ...	56
Child welfare ...	86, 98	Dining centres ...	105
Circular 1550 ...	107	Diphtheria ...	45
Cleansing ...	137	Diphtheria immunization ...	46
Clearance areas ...	165	Disinfection ...	60, 137
Clinics, list of ...	171	Disinfecting station ...	60
Committees—		Drainage byelaws ...	139
Public Health ...	3	Dried Milk regulations ...	157
Maternity and Child Welfare ...	3	Dysentery ...	46
Tuberculosis Care ...	84	Emergency open-air nursery ...	103
Common lodging houses ...	140	Encephalitis lethargica ...	49
Condensed milk regulations ...	157	Enteritis ...	56
Consultants, panel of obstetrical ...	91	Erysipelas ...	47
Convalescence ...	103	Factories and workshops ...	142
		Food and Drugs (Adulteration) Act ...	158
		Food poisoning ...	60



## INDEX.

SUBJECT.	PAGE	SUBJECT.	PAGE
Food premises ... ..	154	Maternity work ... ..	86, 90
Foot clinic ... ..	132	Maternity dressings ... ..	93
Foreword ... ..	6	Measles ... ..	51
Fried fish shops ... ..	149	Meat ... ..	149
Fur skin dresser ... ..	141	Medical clinic for women ... ..	128
Gynæcological clinic ... ..	130	Merchandise Marks Act, 1926 ... ..	149
Health propaganda ... ..	169	Midwives ... ..	91
Home helps ... ..	93	Milk allowances ... ..	105
Home visiting by health visitors ... ..	95	Milk and Cream regulations, 1912 ... ..	157
Home work ... ..	145	Milk and Dairies Order, 1926 ... ..	155
Hospitals ... ..	18	Milk (Special Designations) Order, 1923 ... ..	155
House refuse ... ..	21	Milk supplied to L.C.C. hospitals and schools ... ..	158
Houses let in lodgings ... ..	138, 140	Model welfare centre ... ..	100
Housing ... ..	164	Municipal dental hospital ... ..	120
Housing Act, 1930—		Municipal midwife ... ..	92
Repair of defects ... ..	166	Natal work ... ..	91
Individual unfit houses ... ..	165	National Parentcraft Competition ... ..	106
Housing—particulars required by		Nursing in the home ... ..	58, 104
Ministry of Health ... ..	167	Offensive trades ... ..	141
Ice cream ... ..	149	Ophthalmia neonatorum ... ..	48
Infant life protection ... ..	104	Otorrhoea ... ..	99
Infantile mortality ... ..	30, 86	Outworkers ... ..	145
Infant welfare centres ... ..	98	Overcrowding ... ..	138, 164
Infectious cases, number ... ..	40	Pharmacy and Poisons Act, 1933 ... ..	155
Infectious cases, hospitalization ... ..	40	Pneumonia ... ..	50
Infectious diseases, deaths from ... ..	40	Population ... ..	22
Infectious diseases and schools ... ..	58	Post-natal work ... ..	93
Influenza ... ..	55	Prematurity ... ..	87
Inquests ... ..	14, 25	Preservatives in food regulations ... ..	161
Legal proceedings ... ..	162	Prosecutions ... ..	162
Legislation ... ..	21	Public conveniences for women ... ..	139
Map, shewing wards ... ..	10	Public Health (Prevention of Tuberculosis) Regulations ... ..	71, 161
Marriages ... ..	25	Public mortuary ... ..	35
Maternal mortality ... ..	31, 89	Puerperal fever and pyrexia ... ..	48

## INDEX.

SUBJECT.	PAGE	SUBJECT.	PAGE
Queen's Hospital for Children ...	103	Tuberculosis, deaths and death rates	66-69
Rag and bone dealers ... ..	141	Tuberculosis, institutional accommo- dation for ... ..	70
Rag flock ... ..	142	Tuberculosis, out-patient treatment ...	71
Rateable value ... ..	12	Tuberculosis dispensary ... ..	72
Rat suppression ... ..	148	Tuberculosis Officer's report ... ..	77
Rent Restrictions Acts ... ..	168	Tuberculosis Care Committee report...	82
Sanitary circumstances ... ..	134	Tuberculous milk ... ..	157
Scarlet fever ... ..	43	Undesignated milk ... ..	156
School entrants ... ..	117	Underground rooms ... ..	138, 166
Schools ... ..	148	Unemployment ... ..	17, 18
School for Mothers ... ..	101	Vaccination ... ..	41
Sewing classes ... ..	106	Venereal diseases ... ..	61
Shelter ... ..	61	Verminous houses ... ..	141, 166
Slaughterhouses ... ..	149	Verminous persons ... ..	137, 141
Smallpox ... ..	41	Vital statistics ... ..	11
Smoke nuisances ... ..	137, 148	Voluntary workers ... ..	106
Social conditions ... ..	16	Ward map of borough ... ..	10
Staff ... ..	4	Water supply ... ..	138
Still births ... ..	23, 94	Water Supply to tenement houses ...	137
Street markets ... ..	149	Whooping cough ... ..	54
Sun Babies Nursery ... ..	101	Workshops ... ..	142
Tuberculosis, statistics ... ..	63	Women, special clinics ... ..	127
Tuberculosis, notifications ... ..	63		