

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

Contributors

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Metropolitan Borough of Woolwich

ANNUAL REPORT

OF THE
MEDICAL OFFICER OF HEALTH
FOR
WOOLWICH

1934

BY
J. MACMILLAN, D.S.O., M.C., M.B., D.P.H.

Medical Officer of Health

LONDON:
WIGHTMAN & CO., LTD.
Regency Street, S.W.1

PUBLIC HEALTH AND HOUSING COMMITTEE.

At 31st December, 1934.

HIS WORSHIP THE MAYOR (Councillor A. H. Gilder, J.P.).

Councillor Miss M. CROUT, J.P. (*Chairman*).

Councillor Mrs. L. E. DRIVER (*Vice-Chairman*).

Aldermen :

R. T. BAILLIE

Mrs. E. BROOKS

E. H. KEMP, J.P.

Councillors :

E. BROWN

C. J. KEEDY

C. H. DARBY

Mrs. E. L. REEVES

J. B. FYSON

Miss S. TURNBULL

G. GREENWOOD

H. VAUGHAN

H. L. HUNT

Miss G. E. WALTERS, J.P.

MATERNITY AND CHILD WELFARE COMMITTEE.

Comprising the Members of the Public Health and Housing Committee.

Councillor Miss G. E. WALTERS, J.P. (*Chairman*).

Councillor Mrs. L. E. DRIVER (*Vice-Chairman*).

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PREFACE.

*To the Mayor, Aldermen and Councillors
of the Metropolitan Borough of Woolwich.*

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit the Thirty-Fourth Annual Report on the Health of the Metropolitan Borough of Woolwich.

In accordance with the instructions of the Council, the report, which is an "Ordinary Report" and not a "Survey Report," follows the outline indicated by the Ministry of Health in order to ensure uniformity in the presentation of Annual Reports of Medical Officers of Health throughout the country.

A précis of the Health Services of the Borough will be found in the first section and the Council's scheme of Health Propaganda is fully described in the second section. In December a general inspection of public health services in the Borough was begun by medical officers of the Ministry of Health but the inspection was not completed at the end of the year. This survey inspection is required in order that the Ministry may be satisfied from time to time that a local authority is maintaining a reasonable standard of efficiency and progress in discharging its duties relating to public health, regard being paid to the standards in other areas whose financial and other circumstances are substantially similar.

The Council's Maternity and Child Welfare Scheme is comprehensive and differs substantially from what it was when the first assistant medical officer—Dr. Rachel Mackenzie—was appointed in 1918. A detailed description of the year's working is given in Section III. Dr. Mackenzie retired on superannuation towards the end of the year and the following reference to her work was presented to the Council by the Maternity and Child Welfare Committee and recorded in the Council's minutes :—

"We desire to place on record our very deep appreciation of the devoted services to maternity and child welfare given by Dr. Mackenzie during her sixteen years' service with the Council. She was the first Medical Officer appointed for maternity and child welfare work, and has been, in a large measure, responsible for the development and success of the Council's Maternity and Child Welfare Scheme. Dr. Mackenzie has always taken the keenest personal interest in the care and comfort of mothers and the feeding and up-bringing of children, and has given the whole of her talent and time to the furtherance of their well being. We sincerely regret that we have to lose her services and hope that she will live long to enjoy a happy, well-earned retirement."

Ample evidence of the valuable work carried out by the Sanitary Section during the year will be found in those Sections dealing with Sanitary Administration, Housing, Supervision of the Food Supplies and Control of Infectious Disease. A very high standard of work has been maintained throughout.

The outstanding nuisance in the Borough during the year was that caused by the condition of the River Thames. The whole of the sewage of London is discharged into the River Thames just at or below Woolwich—at the northern outfall near Barking Creek and at the southern outfall at Crossness—and the only treatment the great bulk of London sewage receives is time to settle to allow of the deposit of crude matters in suspension. The liquid sewage is then discharged direct into the river, without further treatment except during hot spells when chemicals may be added as a palliative measure.

The removal of sewage from the Thames depends partly upon the tides and partly upon the supply of water from the upper reaches. Last summer, during the period of drought, the amount of such water available was very much below average, and so little was available for the aeration, dilution and removal of the sewage. The tides do not by themselves remove the sewage, and so the river at Woolwich, as the season went on, became a solution of sewage effluent. Offensive smells arose from it night and day and these were noticed not only in those parts of the town adjoining the river but in parts further away. The Thames had, in fact, arrived at a condition very little different from that described in words which were written in a government report on the sanitary condition of Woolwich in 1851 :—" There is the river in front, tainted by the refuse of the Metropolis and the daily tides cause the vitiated waters to oscillate, weaving much of the same water, with any refuse it contains, backwards and forwards in front of the town for several days." The London County Council in July decided to spend something over half-a-million pounds in providing additional sewage purification plant on the north side of the river, but according to the present plan it will be five years before the plant is complete, and then it will treat by the activated sludge process approximately 20 per cent. of London sewage. It will thus only be a partial scheme, and unless there is some alteration in outlook or speeding up, Woolwich will have to endure unpleasant odours from the River Thames every dry summer, since, as it is well put in the same report referred to above, " Rivers and natural streams cannot be turned into open sewers with impunity."

In housing matters much progress has been made. A general survey of the Borough has made clear what areas require to be dealt with by clearance schemes and negotiations are now in progress with the London County Council with a view to settling how much shall be undertaken by that body and how much by the Borough Council. Three representations were made by me during the year and the building

of 106 dwellings for re-housing the occupiers of these areas and the one represented in 1933 was commenced.

Compared with 1933, the incidence of infectious disease shows an increase, mainly due to the periodicity of measles, a disease which occurs in epidemics approximately every two years, but in addition there were more cases of diphtheria (416 against 370), erysipelas (119 against 67) and pneumonia (280 against 249). The number of cases of measles was 2,392, compared with 354 in the previous year. There was a slight decrease in the number of cases of scarlet fever (989 against 1,004) and puerperal fever and puerperal pyrexia (35 against 40). There were no cases of Smallpox.

Facilities for diphtheria immunisation were provided during the year by means of a family doctor scheme. Immunisation is carried out by the doctor and paid for by the Council, but Schick testing is undertaken by the Council. Full details of the scheme will be found in that section of the report dealing with the Control of Infectious Diseases.

The number of primary cases of tuberculosis coming to the knowledge of the Department during the year was 269 (252 in 1933). At the end of the year there were 829 persons suffering from pulmonary tuberculosis and 219 persons from other forms of tuberculosis, *i.e.*, in all 1,048 persons (1,035 in 1933) living in the Borough. The deaths from tuberculosis during the year numbered 146 (135 in 1933).

The principal vital statistics for the year are as follows :—The birth rate was 13·7, an increase of 1·0 on that of 1933 ; the death rate was 11·3 compared with 11·2 in 1933 ; the infantile mortality rate was 63, compared with 62 in the previous year and the neo-natal mortality rate (deaths under 4 weeks per 1,000 births) was 27·5 as against 33·92. Maternal deaths numbered three, compared with six in 1933 ; the rate for the year per 1,000 births being 1·44. Not in any year during the last quarter of a century have there been as few as three maternal deaths.

The population of the Borough is estimated by the Registrar General to be 145,520 at the middle of the year, a decrease of 680 on 1933. This is the total population and includes non-civilians. It is on this figure that the rates of the Borough are calculated, and so, when any comparison of figures in this report is made with those during the period 1915 to 1931 (when civilians only were included) allowance must be made for this alteration in method.

Since my last report the following staff changes have taken place :—

Miss E. L. Little, Tuberculosis Visitor, commenced duty on 1st January.

Dr. C. F. Clarke, who became a part-time public vaccinator in 1930, resigned his appointment in June on the grounds of ill-health.

Dr. Andrew Mair was appointed a Public Vaccinator from 1st August.

Mr. Amyas Britter, Committee Clerk, who entered the service of the Plumstead Vestry in 1900, died on the 28th August.

Mr. H. M. Collyer, Grade B Clerk, was promoted to Grade C from 1st October.

Mr. L. Pike, Grade A Clerk, was promoted to Grade B from 1st October.

Mr. A. Goad was appointed to a temporary clerkship from 30th November.

Dr. Rachel Mackenzie, Medical Officer for Maternity and Child Welfare, who entered the service of the Council in 1918, retired on superannuation in December.

Dr. Frances Smith, Assistant Medical Officer, commenced duty on 27th December.

It is pleasing to place on record that the following additional qualification was obtained during the year by one of the Council's Health Visitors :—

Diploma of Nursing, University of London—

Miss Winifred Adams.

I am very grateful to the Chairmen of the Health Committees, to the members of these Committees, and indeed to all the members of the Council for the interest they have taken in the work of the Department and for the kindness and consideration they have shown to me on all occasions. I thank sincerely every member of the staff for the valuable work they have done during the year and the help they gave to me personally.

I am,

Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

J. MACMILLAN,

Medical Officer of Health.

SECTION I.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

i. PUBLIC HEALTH OFFICERS OF THE AUTHORITY.

(a) In tabular form are shown below the names, qualifications and appointments of all Medical Officers employed by, or discharging duties for the Council, either whole or part time, or in a consultative capacity, at the 31st December.

TABLE No. 1.

Year appointed.	Name.	Qualifications.	Appointment.
1921	Blackmore, F. J. C. ...	M.R.C.S., L.R.C.P. ...	Assistant Medical Officer of Health and Tuberculosis Officer.
1931	Proudfoot, M. E. ...	M.B., Ch.B. ...	Assistant Medical Officer (General Purposes).
1931	Saunders-Jacobs, E. V.	M.A., M.B., B.S., M.R.C.S., L.R.C.P., B.Sc., D.P.H.	Assistant Medical Officer (General Purposes).
1934	Smith, F. E. ...	M.B., Ch.B., D.P.H. ...	Assistant Medical Officer (General Purposes).
1927	Lynham, J. E. A. ...	B.A., M.D., D.M.R.E. ...	Consultant, Artificial Sunlight.
1927	Taylor, H. G. ...	F.R.C.S. ...	Consultant under Puerperal Fever Regulations, 1926. Obstetric Consultant (1931).
1930	Emslie, M. ...	M.B., Ch.B. ...	Medical Officer, Toddlers Clinic (part-time).
1934	Smith, W. ...	M.A., M.D., B.Ch. ...	Medical Officer, Schick Testing Clinic.
1930	Brews, R. V. ...	L.R.C.P.I. and L.M., L.R.C.S.I. and L.M.	Public Vaccinator (part-time).
1930	Cowie, W. ...	M.A., M.B., C.M. ...	do.
1930	Wise, H. M. ...	M.B., M.R.C.S., L.R.C.P.	do.
1930	Milton, E. F. ...	M.D., B.S. ...	do.
1930	Blackall, G. ...	M.B., B.A.O., D.P.H. ...	do.
1930	Power, F. J. ...	L.R.C.P.I. and L.M., L.R.C.S.I. and L.M.	do.
1934	Mair, A. ...	M.D., D.P.H. ...	do.

The deputies for the above Public Vaccinators are respectively :

Dr. N. E. Sampey, Dr. D. Wilson, Dr. E. C. Wise, Dr. W. T. Milton, Dr. R. W. Wood, Dr. R. Lewys-Lloyd, Dr. H. M. Wise.

(b) In tabular form are shown below the dates of appointments, names, and qualifications of the Public Analyst, Sanitary Inspectors, Health Visitors, Vaccination Officer, Tuberculosis Staff and the Clerical Staff employed by the Council at the 31st December.

TABLE No. 2.

Year appointed.	Name.	Qualifications.	Appointment.
1933	Williams, H. Amphlett	A.C.G.F.C., F.I.C....	Public Analyst (part time).
1909	Shaw, H. ...	Cert. Royal San. Inst.; Cert. San. Insp., Exam. Board; Cert. San. Insp. Assocn.; Cert. Meat and other foods; Cert. San. Science, R.S.I.	Chief Sanitary Inspector. (1928)
1901	Tedham, W. ...	Cert. Royal San. Inst., Cert. Meat and other foods.	Sanitary Inspector.
1920	Pendrill, H. W. ...	Cert. San. Insp., Exam. Board; Cert. Advanced Inspectors, R.S.I., Cert. Meat and other foods; Cert. Smoke Insp., R.S.I.	Sanitary Inspector.
1921	Harris, C. V. ...	Cert. San. Insp., Exam. Board; Cert. Royal San. Inst.; Cert. Meat and other foods.	Sanitary Inspector.
1922	Couch, C. J. ...	Cert. San. Insp., Exam. Board; Cert. Royal San. Inst.; Cert. Meat and other foods; Cert. Smoke Insp., R.S.I.; Cert. Advanced Inspectors, R.S.I.	Sanitary Inspector.
1925	Pindar, E. B. ...	Cert. San. Insp., Exam. Board; Cert. Royal San. Inst.; Cert. Meat and other foods.	Sanitary Inspector.
1928	Andrew, F. A. ...	Cert. San. Insp., Exam. Joint Board; Cert. Meat and other foods.	Sanitary Inspector.
1929	Hemingway, F. ...	Cert. San. Insp., Exam. Joint Board; Cert. Meat and other foods.	Sanitary Inspector.
1930	Kersey, H. M....	Cert. San. Insp., Exam. Joint Board; Cert. Meat and other foods; Cert. Smoke Insp., R.S.I.	Sanitary Inspector.
1931	Hoines, F. J. ...	Cert. San. Insp., Exam. Joint Board; Cert. Meat and other foods.	Sanitary Inspector.
1933	Lewis, E. ...	Cert. San. Insp., Exam. Joint Board; Cert. Meat and other foods; Cert. Smoke Insp., R.S.I.; Cert. San. Science, R.S.I.	Sanitary Inspector.

TABLE No. 2—*continued.*

Year appointed.	Name.	Qualifications.	Appointment.
1904	Farrugia, Mrs. A. ...	Cert. San. Insp., Exam. Board ; Cert. Royal San. Inst.	Woman Sanitary Inspector.
1918	Garside, Mrs. M. ...	Cert. San. Insp., Exam. Board ; C.M.B. ; Health Visitors' Cert.	Health Visitor and Sanitary Inspector.
1919	Burnett, Miss W. ...	Cert. San. Insp. Exam. Board ; C.M.B. ; Health Visitors' Cert., Board of Education.	Health Visitor.
1919	Tibbits, Miss E. ...	Cert. San. Insp., Exam. Board ; Health Visitors' Cert., Board of Education.	Health Visitor.
1919	Ware, Miss C. ...	Cert. San. Insp., Exam. Board ; C.M.B. ; Health Visitors' Cert., Board of Education.	Health Visitor and Sanitary Inspector.
1920	Campbell, Miss M. ...	Cert. General Hospital Training ; C.M.B. ; Cert. San. Insp., Exam. Board ; Health Visitors' Cert., Royal San. Inst.	Health Visitor.
1920	Morgan, Miss F. ...	Cert. General Hospital Training ; C.M.B. ; Health Visitors' Cert. ; Maternity and Child Welfare Cert.	Health Visitor.
1922	Seccombe, Miss W. ...	Cert. General Hospital Training ; C.M.B. ; Health Visitors' Cert.	Health Visitor.
1927	Farrell, Miss E. V. ...	Cert. General Hospital Training ; C.M.B. ; Heliotherapy Cert. ; Health Visitors' Cert., Board of Education.	Health Visitor and Artificial Sunlight Nurse.
1930	Frederick, Miss F. E.	Cert. General Hospital Training ; C.M.B. ; Health Visitors' Cert.	Health Visitor.
1933	Carey, Miss A. ...	Cert. General Hospital Training ; Cert. Fever Training ; C.M.B. ; Heath Visitors' Cert.	Health Visitor.
1933	Adams, Miss W. ...	Cert. General Hospital Training ; C.M.B. ; Health Visitors' Cert. ; Diploma in Nursing, University of London.	Health Visitor.
1921	Castledine, Mrs. L. ...	Cert. General Hospital Training...	Tuberculosis Visitor.
1921	Mahony, Miss N. ...	Cert. General Hospital Training ; Health Visitors' Cert.	Tuberculosis Visitor.
1934	Little, Miss E. L. ...	Cert. General Hospital Training ; Cert. Fever Training ; C.M.B. ; Tuberculosis Cert. ; Health Visitors' Cert.	Tuberculosis Visitor.
1923	Smith, Mrs. M. ...	Dispensing Certificate	Dispenser and Secretary of Care Committee.

TABLE No. 2—*continued.*

CLERKS :

1901	Smith, H. S. ...	...	...	Chief Clerk.
1906	Collyer, H. M. ...	...	...	Committee Clerk.
1913	Prescott, H. T. ...	...	...	Clerk, Grade B.
1920	Taylor, S. G. ...	...	...	Vaccination Officer and Clerk, Grade B.
1920	Pike, L. ...	...	...	Clerk, Grade B.
1920	Stephenson, Miss D. ...	...	...	Maternity and Child Welfare Clerk.
1922	Edwards, Mrs. N. ...	...	...	Maternity and Child Welfare Clerk.
1930	Crawford, Miss I. ...	...	...	Clerk, Grade A.
1931	Allen, L. ...	...	...	Clerk, Grade A.
1933	Biswell, Miss V. ...	...	...	Tuberculosis Clerk.
1933	Bryant, Miss A. ...	...	...	Temporary Clerk.
1934	Goad, A. ...	...	...	Temporary Clerk.

The Medical Officer of Health is Administrative Tuberculosis Officer and Executive Officer under the Council's Maternity and Child Welfare Scheme.

ii. LABORATORY FACILITIES.

The bacteriological work of the Council rendered necessary by investigations into infectious diseases, food poisoning, and water control in the Council's swimming baths, is carried out at the Woolwich War Memorial Hospital. The bacteriological examination of milk samples is carried out partly at the Woolwich War Memorial Hospital and partly at the Clinical Research Laboratory.

A minimum of 500 samples is purchased annually in accordance with the provisions of the Food and Drugs (Adulteration) Act, 1928, and the various Regulations and Orders in which are laid down the standards for food. They are submitted for chemical analysis to the Public Analyst whose Laboratory is situated at 1, Southwark Street, London, S.E. 1.

iii. AMBULANCE FACILITIES.

The London County Council's ambulance service is available :—

- (a) For the removal to hospital, free of charge, of persons suffering from infectious disease ;
- (b) For the removal, on payment, of persons suffering from non-infectious diseases to hospitals or other places ;
- (c) For the removal, free of charge, of cases of accident and sudden illness arising in the streets or public buildings, to hospitals or home.
- (d) For the removal, free of charge, of ordinary maternity cases between the hours of 11 p.m. and 8 a.m., and urgent maternity cases during the day-time, when accompanied by a doctor or nurse.

In addition to these services the Council hire ambulances of the London County Council for the conveyance of non-urgent maternity cases, between 8 a.m. and 11 p.m., to hospitals in the London area. A note on the use of this service will be found in the Maternity and Child Welfare Section.

iv. PROFESSIONAL NURSING IN THE HOME.

During the year nursing assistance was available in all parts of the Borough. Such assistance is provided by four Nursing Associations, as follows :—

Woolwich and Plumstead District Nursing Association :

All Woolwich (except North Woolwich) and Plumstead.

Silvertown and North Woolwich District Nursing Association :

North Woolwich.

Eltham Provident Nursing Association :

All Eltham (except New Eltham).

New Eltham District Nursing Association :

New Eltham.

All these Associations insist that the patient shall be under the care of a medical practitioner, and, in ordinary circumstances, only nurse non-infectious cases. On the recommendation of the Medical Officer of Health, however, they provide nursing assistance for cases of measles, whooping cough, zymotic enteritis, ophthalmia neonatorum, pneumonia, anterior poliomyelitis, tuberculosis, puerperal fever and puerperal pyrexia. For nursing assistance the Borough Council pay, in necessitous cases, in accordance with the following schedule :—

Disease.	Rate of Payment.
Measles	1s. 0d. per visit for one case ; 6d. per visit, per case, for more than one case in the house at the same time.
Ophthalmia Neonatorum...	
Zymotic Enteritis...	
Whooping Cough	
Poliomyelitis	
Acute Primary Pneumonia	1s. 3d. per visit.
Influenzal Pneumonia ...	
Puerperal Fever	
Puerperal Pyrexia...	
Tuberculosis	

An additional grant is made yearly in respect of the nursing treatment of children suffering from threadworms.

v. CLINICS AND TREATMENT CENTRES.

In tabular form is shown below a list of clinics and treatment centres in the Borough :—

TABLE No. 3.
CLINICS AND TREATMENT CENTRES.

Situation.	Nature of Accommodation.	By Whom Provided.	Sessions Weekly.
Maternity and Child Welfare Centres.			
Old Town Hall, Woolwich ...	Doctor's Room, Weighing Rooms, Waiting Rooms, etc.	Woolwich Borough Council	8
236, Plumstead High Street ...	Doctor's Room, Ante-Natal Room, Ante-room, Weighing Room, Waiting Room, Dental Rooms	do.	6
Westhorpe Avenue, Eltham ...	Doctor's Room, Ante-Natal Room, Ante-room, Weighing Room, Waiting Room, Lecture Hall, Dental Rooms	do.	6
Elizabeth Street, North Woolwich	Doctor's Room, Weighing Room	do.	1*
Wesley Hall, Timbercroft Lane, Plumstead	do. do.	do.	2
All Saints' Church Hall, New Eltham	do. do.	do.	2
Holy Trinity Church Hall, Beresford Street, Woolwich	do. do.	do.	1
St. Luke's Hall, Westmount Road, Eltham	do. do.	do.	1
Sunlight Clinic.			
Old Town Hall, Woolwich ...	Treatment and Waiting Rooms, etc.	do.	9
Day Nurseries.			
Nil.			
School Clinics.			
Brewer Street, Woolwich ...	Doctor's Rooms, Treatment Rooms, Waiting Rooms	Local Medical Association	Daily
236, Plumstead High Street, Plumstead	Doctor's Room, Treatment Room, Waiting Rooms, Dental Rooms	do.	Daily
Westhorpe Avenue, Eltham ...	Doctor's Room, Dental Rooms, Waiting Room, Treatment Rooms	do.	Daily

* An Ante-Natal Clinic is held here once a month.

TABLE No. 3—*continued.*

CLINICS AND TREATMENT CENTRES.

Situation.	Nature of Accommodation.	By Whom Provided.	Sessions Weekly.
Cyril Henry Treatment Centre, St. Mary's Street, Woolwich	Accommodation for operating on, and detention of, cases of enlarged tonsils and adenoids	London County Council	Daily
Borough Disinfecting Station, Whitehart Road, Plumstead	Accommodation for cleansing of verminous children	Woolwich Borough Council	Daily
Tuberculosis Dispensaries.			
Maxey Road, Plumstead ...	Doctor's Rooms, Waiting Rooms, Dressing Rooms, Dispensary, etc.	do.	Daily
179, Well Hall Road ...	Doctor's Room, Waiting Room	do.	3
Venereal Diseases.			
Nil.			
Orthopædic Clinic.			
8, Thomas Street, Woolwich ...	Clinic, Waiting Room, Dressing Room	Woolwich Invalid Children's Aid Association	Daily

vi. HOSPITALS.

The Medical Officer of Health is asked to report under this heading on the hospitals belonging to the local authority and hospitals with which the local authority have made arrangements for the admission of patients. There are no hospitals belonging to this local authority, but arrangements for the admission of patients have been made with two local hospitals:—

(a) War Memorial Hospital.

(b) British Hospital for Mothers and Babies.

The Council's arrangements with these hospitals were fully reported on in the Annual Report for 1930, but it may be convenient to refer to them briefly here:—

At the War Memorial Hospital the Council reserve twelve beds for children under five years, and sufficient accommodation as may be necessary for 66 maternity cases per annum. In addition the hospital authorities are under contract to provide emergency treatment as occasion arises for such cases of midwifery as require it.

At the British Hospital for Mothers and Babies, such accommodation as may be necessary for 144 confinements per annum, and for their ante-natal treatment, is reserved for cases sent by the Borough Council.

vii. MIDWIFERY AND MATERNITY SERVICES.

There are no whole-time midwives employed by the Council. By the courtesy of the County Medical Officer of Health I have been able to ascertain that 47 midwives residing in the Borough gave notice during the year of their intention to practise.

The services of a Consultant Surgeon are available for cases of obstetric emergencies and difficulties occurring at home, and for consultation and treatment in cases of puerperal fever or puerperal pyrexia. Arrangements have also been made for the home nursing of such cases and for such bacteriological investigations as are necessary.

The Council's Maternity Services are fully described in the Maternity and Child Welfare Section of the report and no developments or changes took place during the year.

viii. INSTITUTIONAL PROVISION FOR MOTHERS OR CHILDREN.

There are no special provisions for the institutional treatment of unmarried mothers, illegitimate infants or homeless children in the Borough, but in February, 1934, the Council agreed to make a grant towards the cost of maintenance of Woolwich cases admitted to Stretton House Home, Grove Park, a home maintained by the Southwark Diocesan Preventive and Rescue Work Organisation for unmarried mothers. No grant, however, was made during the year.

ix. HEALTH VISITING.

The arrangements made for the visiting of children between the ages of one and five years are described in the Maternity and Child Welfare Section.

x. INFANT LIFE PROTECTION.

A third health visitor, Miss W. Adams, was appointed a part-time infant life protection visitor. A note on the administration of this service will be found in the Maternity and Child Welfare Section of the report.

xi. ORTHOPÆDIC TREATMENT.

Arrangements for orthopædic treatment of children under five years of age, were made with the local branch of the Invalid Children's Aid Association in 1925. This body has for many years maintained a remedial clinic in Thomas Street where all children requiring such treatment may be sent. The London County Council

make an annual grant in respect of children over five years of age. In the Maternity and Child Welfare Section of the Report there is an account of the year's working so far as children under five are concerned.

xii. SUPPLY OF INSULIN TO PERSONS SUFFERING FROM DIABETES.

In May, 1930, the Council obtained the approval of the Ministry of Health to supply Insulin to diabetic patients, who were necessitous and unable to obtain it under the National Health Insurance Acts. A continuing approval is obtained yearly.

A supply of Insulin was given under this scheme to eleven patients during the year, the total cost being £22 11s. 0d.

Insulin is supplied to medical practitioners under the following conditions:—

- (1) The application must state the name, age, address, and sex of the patient for whom it is required.
- (2) A quarterly report must be furnished in respect of each patient treated, giving the following information:—
 - (a) The number of doses of Insulin administered;
 - (b) Stating whether any tests were made of the urine or of the blood of the patient, and, if so, by whom and with what results;
 - (c) A report on the progress of the patient.

xiii. VACCINATION.

Dr. C. F. Clarke, who had held the appointment of Public Vaccinator under the Woolwich Board of Guardians for the major portion of the old parish of Woolwich, for many years, resigned on the grounds of ill-health, his last day of service being 28th June, 1934. The vacancy was filled by the appointment of Dr. Andrew Mair, who commenced duty on the 1st August, 1934. During the interim Dr. H. M. Wise acted as Public Vaccinator for Dr. Clarke's district.

The Council took the opportunity of making adjustments in the districts of the Public Vaccinators, as these were much overdue. The districts had not been altered for at least twenty years; many changes in the distribution of population had taken place during these years, particularly in Plumstead and Abbey Wood, and it was felt desirable that a medical practitioner resident in that part of the Borough should be appointed as Public Vaccinator for that area. The old parish of Plumstead, formerly a vaccination district, was divided into two, and Dr. Mair was appointed to the eastern portion. Dr. Wise's new district consists of the remaining portion of Plumstead and part of the old parish of Woolwich.

The districts of the Public Vaccinators are as set out below in the following Table No. 4, their names and hours of attendance being also shown :—

TABLE No. 4.

Public Vaccinator and Surgery.	Surgery Hours.	District.
Dr. R. V. Brews, 10, High Street, North Woolwich	Weekdays : 9-10 a.m. 6- 8 p.m.	NORTH WOOLWICH.
Dr. W. Cowie, Tudor House, Charlton Road.	Weekdays : 9- 10 a.m. 6- 8 p.m.	WOOLWICH—Streets between Greenwich bound- ary and a line through middle of Hill Street, Frances Street, Henry Street and Chapel Street.
Dr. A. Mair, 45, Lakedale Road, Plumstead	Weekdays : 9-10 a.m. 6- 7 p.m. (except Tuesday evenings)	PLUMSTEAD—All streets in the Borough east of a line running south down the centres of White Hart Road, Lakedale Road, The Slade, Garland Road to the junction of the Borough boundary with Shooters Hill.
Dr. H. M. Wise, 23, Plumstead Road, Plumstead	Weekdays : 9 a.m. 7 p.m.	WOOLWICH AND PLUMSTEAD—All streets between the above line and a line through the middle of Hill Street, Frances Street, Henry Street and Chapel Street.
Dr. E. Milton, Passeys House, High Street, Eltham	Weekdays : 9-10 a.m. 6.30-7.30 p.m. (except Thursday evenings)	ELTHAM—Well Hall and Sherard wards, and that part of Avery Hill ward lying west of a line through the middle of Gravel Pit Lane, Bexley Road, Southend Road, Footscray Road and Green Lane.
Dr. G. Blackall, 429, Footscray Road, New Eltham.	Weekdays : 2 p.m. 6-7.30 p.m. (except Thursday evenings)	ELTHAM AND NEW ELTHAM—That part of Avery Hill ward lying east of the above line.

I submit a return by the Vaccination Officer on the work carried out under the Vaccination Acts for the year 1933.

TABLE No. 5.

RETURN to be made on or before the 9th of February, 1935, by Mr. S. G. Taylor, Vaccination Officer of all Sub-Districts of the Metropolitan Borough of Woolwich Registration District, respecting the Vaccination of Children whose Births were registered from 1st January to 31st December, 1933, inclusive :—

Registration Sub-Districts comprised in Vaccination Officer's District.	Number of Births returned in the " Birth List Sheets " as registered from 1st January to 31st December, 1933.	Number of these Births duly entered by 31st January, 1935, in Columns I., II., IV. and V. of the "Vaccination Register" (Birth List Sheets), viz. :—				
		Col. I. Successfully Vaccinated.	Col. II.		Col. IV. Number in respect of whom Statutory Declaration of Conscientious Objection has been received.	Col. V. Died Unvaccinated.
			Insusceptible of Vaccination.	Had Small Pox.		
1.	2.	3.	4.	5.	6.	7.
1. PLUMSTEAD...	501	215	—	—	215	31
2. WOOLWICH†...	1,198	591	7	—	467	46
3. ELTHAM ...	462	209	—	—	189	25
Total ...	2,161	1,015	7	—	871	102

Number of these Births which on 31st January, 1935, remained unentered in the " Vaccination Register " on account (as shown by " Report Book ") of :—			Number of these Births remaining on 31st January, 1935, neither duly entered in the "Vaccination Register" (Columns 3, 4, 5, 6 and 7 of this Return) nor temporarily accounted for in the " Report Book " (columns 8, 9 and 10 of this Return).	*Total Number of Certificates of Successful Primary Vaccination of Children under 14 received during the Calendar Year 1934.	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 1934.
Postponement by Medical Certificate.	Removal to Districts the Vaccination Officers of which have been duly apprised.	Removal to places unknown or which cannot be reached ; and cases not having been found.			
8.	9.	10.	11.	12.	13.
8	11	20	1	These figures are to be obtained from columns 2 and 6 of the Summary (Form N.)	
6	49	22	10		
7	22	6	4		
21	82	48	15	1,236	944

For notes on Table 5 see page 21.

NOTES ON TABLE No. 5.

NOTE.—(a) The total of the figures in columns 3 to 11 should agree with the figures in column 2. Any cases of children successfully vaccinated after the declaration of conscientious objection had been made should be included in column 6 above and not in column 3. The number of such cases should be inserted here :—1.

(b) The figures in columns 2 to 11 should not include re-registered births or cases of children born in other districts.

*The total in this column should be the number of Certificates of successful primary vaccination of children under 14, actually received during the year, including any relating to births registered in previous years. The total thus given should include the Certificates of successful primary vaccination of which copies have been sent to the Vaccination Officers of other Districts. The total number of Certificates for the year 1934 sent to other Vaccination Officers should be stated here :—93.

†Includes the Burrage and Herbert Wards in Plumstead Parish.

(Signature) S. G. TAYLOR,

Date—10th February, 1935.

Vaccination Officer.

During the year ended 30th September, 1934, the number of persons successfully vaccinated and re-vaccinated at the cost of the rates was 1,144. This figure includes 672 primary vaccinations of persons under one year of age and 183 over one year of age, and 289 re-vaccinations.

XIV. ADOPTIVE ACTS, BY-LAWS AND REGULATIONS RELATING TO PUBLIC HEALTH IN FORCE IN THE DISTRICT.

Adoptive Acts.—The Small Dwellings Acquisition Acts, 1899-1923, have been adopted by the Council. During the year, the Borough Treasurer tells me, the Council made 369 advances to purchasers of houses in accordance with the provisions of these Acts.

Transfer of Powers Order, 1933.—This Order came into operation on the 1st April, 1933, and transferred certain duties to the Borough Council from the London County Council in respect of (a) Building Lines ; (b) Disused Burial Grounds ; (c) Seamen's Lodging Houses ; (d) Thames and other Embankments ; (e) Common Lodging Houses ; (f) Cowhouses and Places for the Keeping of Cows ; (g) Infant Life Protection ; (h) Offensive Trades ; (i) Slaughterhouses and Knackers' Yards.

By-laws.—In tabular form below is a list of the by-laws which are in force in the district :—

(a) MADE BY THE LONDON COUNTY COUNCIL—

Subject Matter.	Act.	Date when By-laws were allowed or took effect.
Common Lodging Houses... ..	London County Council (General Powers) Act, 1902—Sec. 53 (2)	1st October, 1903
Seamen's Lodging Houses	Merchant Shipping Act, 1894—Sec. 214	1st April, 1917
Conveyance of Dead Horses	London County Council (General Powers) Act, 1903—Sec. 554	21st February, 1905
Construction of new sewers	Metropolis Management Act, 1855	28th March, 1906
Drainage By-laws	do.	28th July, 1934
Closing and filling up of cesspools and privies and the removal and disposal of refuse	Public Health (London) Act, 1891—Sec. 16 (2)	28th June, 1893
Prescription of times for removal or carriage by road of offensive or noxious matter or liquid	do.	26th November, 1901
Ashpits and receptacles for dung	Public Health (London) Act, 1891—Sec. 39 (1)	28th June, 1893
Receptacles for dung	do.	3rd January, 1905
Ashpits and receptacles for dung...	do.	11th July, 1913
Water closets, urinals, earth closets, privies and cesspools	do. and London County Council (General Powers) Act, 1928—Sec. 24	21st August, 1930
Cleansing and disinfection of lairs and vehicles and apparatus used for the conveyance of animals	Foot and Mouth Disease Order 1928, Articles 22 (1) d and e	1st April, 1931
Spitting in public places	Municipal Corp. Act, 1882, and Local Government Act, 1888	12th May, 1903
Waste paper and refuse in streets	do.	4th July, 1906
Hairdressers' Establishments in which Massage Treatment is given	London County Council (General Powers) Act, 1915—Part V	15th June, 1921
Massage establishments	London County Council (General Powers) Act, 1920—Part IV	28th July, 1921
Nursing Homes	Nursing Homes Registration Act, 1927—Sec. 4	1st March, 1929

Subject Matter.	Act.	Date when By-laws were allowed or took effect.
Fat melter	Public Health (London) Act, 1891	25th November, 1907
Knacker	do.	do.
Gut scraper and catgut maker ...	do.	do.
Glue and Size manufacturer ...	do.	do.
Tripe boiler	do.	do.
Bone boiler, Manure manufacturer or Tallow melter	do.	do.
Soap boiler	do.	do.
Dresser of Fish Skins	do.	do.
Fishmonger	do.	do.
Dresser of Fur Skins	do.	22nd March, 1922
Slaughtering of Poultry	do.	22nd December, 1923
Slaughter of Cattle... ..	do.	7th December, 1923
Amended	do.	31st July, 1935
Fish Curers	London County Council (General Powers) Act, 1908—Sec. 9	28th February, 1914
Vendors of Fried Fish	do.	do.
Rag and Bone Dealers	do.	18th September, 1923
Slaughterhouses	Slaughterhouses, etc. (Metropolis) Act, 1887, and Local Government Act, 1888	27th October, 1891
Tenement Houses	Public Health (London) Act, 1891 and Housing Act, 1925	5th March, 1926
Amended	do.	8th June, 1931
Smoke Emission	Public Health (Smoke Abatement) Act, 1926	19th May, 1931

(b) MADE BY THE WOOLWICH BOROUGH COUNCIL—

Prevention of Nuisances from :—		
(1) Snow, ice, salt, dust, etc., in streets	Public Health (London) Act, 1891—Sec. 16	24th June, 1903
(2) Offensive matter running out of manufactories	do.	do.
(3) Keeping of animals... ..	do.	do.

Subject Matter.	Act.	Date when By-laws were allowed or took effect.
As to paving of yards and open spaces in connection with dwelling houses	Public Health (London) Act, 1891 —Sec. 16	24th June, 1903
Water supply to water closets ...	Public Health (London) Act, 1891 —Sec. 39	do.
Conduct of persons using Sanitary Conveniences	Public Health (London) Act, 1891 —Sec. 45	do.
Tanks, cisterns, etc., for storing drinking water	Public Health (London) Act, 1891 —Sec. 50	do.
Mortuaries	Public Health (London) Act, 1891 —Sec. 88	do.
Tents, vans, sheds used for human habitation	Public Health (London) Act, 1891 —Sec. 95	do.
Public Baths	Baths and Washhouses Act, 1846	do.
Market Place	Public Health Act, 1875 ...	do.
Street Noises on Sundays ...	Municipal Corporations Act, 1882 and Local Government Act, 1888, as applied by the London Government Act, 1899	23rd February, 1906
Litter	Municipal Corporations Act, 1882 and Local Government Act, 1888, as applied by the London Government Act, 1899	29th November, 1933

SECTION II.—HEALTH PROPAGANDA.

For many years the Council have carried out a progressive policy in health education, making full use of the powers given to them by the London County Council (General Powers) Act, 1926. The public response has been very encouraging, and this has been shown not only by large attendances at Health Exhibitions and Health Weeks but also by an increasing demand for informal talks at meetings in private halls.

Health Education is therefore an important section of the work of the Department and continuous endeavours are made not only to spread a knowledge of the laws of health, but also to bring home the personal responsibility of every individual in the matter, and so secure co-operation in health matters between the Council and the citizen. The importance of making use of the many health services now provided for the public, it need hardly be said, is always stressed. Without such use, value can never be obtained for the money spent on the pursuit of health by the State, by the County, by the Borough or by the individual.

Certain special activities are set out in greater or less detail in the next few pages but much unseen, or rather unheard of, work goes on daily in the home, at the Welfare Centres and Dispensaries, and in the office. The story of health is being continually spread by the Council's health officers. Leaflets, booklets and posters are in constant circulation or use. The Health Services booklet of 20 pages is now in its third edition.

The special activities of the year may be classified as follows:—

(a) HEALTH WEEK.—The tenth local Health Week was held in September, and the following is a copy of the report made by the Public Health Committee to the Council:—

“In accordance with the Council's resolution of the 31st January, 1934, we arranged a suitable programme for Health Week. During the week 24th-29th September, we held a Health Exhibition at the Town Hall, Woolwich.

“We were able to secure the co-operation of those Committees of the Council which deal directly or indirectly with matters affecting the public health, and the various national and local organisations. Trade exhibits were limited to those

which directly bear on our work. The Health Department's exhibits dealt with general sanitation, the control of infectious disease, bug infestation, maternity and child welfare and tuberculosis. In addition, illustrating the sub-divisions, there were exhibits from the British Legion Industries, Preston Hall ; Papworth Colony ; the National Association for Maternity and Child Welfare ; the Child Guidance Council ; the Greenwich Tuberculosis Handicraft Centre ; the Woolwich Invalid Children's Aid Association and the Woolwich Nursing Associations.

" The exhibits from the Woolwich War Memorial Hospital consisted of tableaux illustrating the hospital's work in connection with accident cases and an Appeal Stall in connection with the hospital extension fund organised by His Worship the Mayor. There were also exhibits from the National Institute for the Blind ; the National Society for the Prevention of Cruelty to Children ; the Health and Cleanliness Council ; the National Milk Publicity Council ; the British Social Hygiene Council and the Cremation Society.

" Attractive exhibits were arranged by the following Committees of the Council :—Works, Housing, Baths, Libraries and Allotments. In the Victoria Hall the Electricity Committee arranged a very complete and pleasing exhibit illustrating the home services which this Committee has provided for the citizens of the Borough. The trade exhibit was by Cow and Gate Limited.

" We acknowledge with thanks our indebtedness to the Ministry of Health ; the Trustees of the British Museum (Natural History Section) ; the London School of Hygiene and Tropical Medicine ; the London County Council ; the Bermondsey Borough Council ; St. Bartholomew's Hospital ; the National Smoke Abatement Society and many others, for the loan of models, pictures or articles in connection with the Exhibition.

" The attendances during the week are estimated at 16,500, including 1,214 school children in conducted parties.

" We are grateful to the lecturers who gave their services, and to all who helped by exhibiting, by speaking, by lending and by working, to whom we have extended the sincere thanks of the Council ; and we take this opportunity of placing on record once again, our appreciation of the work of the Council's staff."

(b) SCHOOL CHILDREN.—Prior to 1932, monthly sessions were held for the instruction of school children in matters of health, but in that year a new policy was adopted—that of combining with the Libraries Committee in the presentation of educational films—and this policy has been continued. The meetings are held on Mondays and films are shown at 9.30 and 11 a.m. and again at 3.30 p.m., to different

audiences. In this way some 1,500 children receive visual education each month. The health films shown were :—

January 22nd	...	"How we Hear."
February 19th	...	"The Climber."
October 15th	...	"How we See."
November 19th	...	"Almost a Tragedy."
December 10th	...	"Three Card Trick."

(c) INFORMAL TALKS.—These talks commenced in 1929 and the demand has grown each year since then. This service, providing, as it does, health education for the people in their own meeting places, establishes a direct contact which is of great value to the department in bringing closely to the attention of the people most interested (most interested because every endeavour is made to fit the subject to the audience) details of services about which they might remain in ignorance. The scheme, commenced in 1934, for the immunisation of children against Diphtheria, may be mentioned as an instance. There were many talks on this subject: the audiences were all keenly interested and it is known that many parents were so influenced as to make immediate arrangements for their children to be tested. The talks are given by members of the staff on subjects closely associated with the work on which they are engaged. At each meeting it is the practice to show films or lantern slides, or photographs by means of an epidiascope, or to give a practical demonstration.

(d) CENTRAL COUNCIL FOR HEALTH EDUCATION.—This organisation is composed of representatives of health and education authorities, insurance committees, friendly societies, etc., and it co-ordinates the activities of these organisations in different aspects of health education. This body advises and assists local health and education authorities, particularly in regard to the organisation of health exhibitions and the supply of health posters; it publishes literature on health matters; it sends weekly articles to the press; it holds a Conference in London each year and is, in short, a central agency of very great value to local authorities interested in health education. The Council makes an annual contribution of three guineas to its funds.

(e) BETTER HEALTH.—In an effort to bring current health topics to the attention of the public, the Council purchased monthly 2,000 copies of "Better Health," a journal published by the Central Council for Health Education, and distributed them through the Welfare Centres, Libraries and Schools. A limited number were posted to residents in the Borough, selected at random, each month. This journal has met with the approval of the public and there is no difficulty in finding ready readers.

(f) POSTERS.—The Central Council for Health Education provide a monthly service of health posters for use on the wooden poster frames originally erected by the Empire Marketing Board. The Borough Council have the use of two of

these frames and purchase two sets of posters monthly. The posters shown during the year were as follows :—

January	...	National Council for Maternity and Child Welfare (E.M.B. Adapted).
February	...	Food Education Society.
March	...	British Social Hygiene Council.
April	...	British Red Cross Society.
May	...	National Milk Publicity Council.
June	...	National Council for Maternity and Child Welfare.
July	...	Anti-Noise League.
August	...	Dental Board of the United Kingdom.
September	...	National Safety First Association.
October	...	Health and Cleanliness Council.
November	...	National Association for the Prevention of Tuberculosis.
December	...	National Smoke Abatement Society.

(g) COOKERY CLASSES.—Demonstrations in cookery were started at the Tuberculosis Dispensary in April, in order to provide instruction for the wives and mothers of the tuberculous in the buying and cooking of simple, cheap and nutritious articles of food and the preparation of them in an appetising, tempting and palatable way. The demonstrator is loaned by the South Metropolitan Gas Company and a demonstration meter shows how much the actual cooking has cost, in terms of pence. The cooked dishes are sold at about half cost to those attending the classes. A cup of tea and biscuits are provided by the Care Committee at each meeting. The nett cost to the Council for food for the year was £2 10s. 9d. The number attending was 21 ; the number of attendances was 294 and there were 31 meetings.

(h) BED-BUG DEMONSTRATION STALL.—A stall dealing with the bed-bug problem was prepared for this year's health exhibition. An article describing it was subsequently written by Mr. C. J. Couch and published in the Journal of the Royal Sanitary Institute in the November issue, 1934, and the stall was re-constructed and shown there. The article is reproduced below from part 5 of Volume 55 of the Journal, by kind permission of the Institute.

" In Woolwich the Bed Bug Campaign has now been intensively pursued for over two years and the experience gained during that period has clearly shown the necessity for measures to procure the interest and active co-operation of the general public. With this end in view the Public Health Department has given the widest publicity to the subject by memoranda, literature and by practical demonstrations. A stall at the recent Health Exhibition in Woolwich was set aside for the sole purpose of focussing attention on the bed bug, its habits, life history and the methods which are being used in the Borough to exterminate it. In the past too little attention has been paid to the fact that families living in bug infested dwellings are often led

to conceal the presence of these insects for fear of the comments of their neighbours, though they may be well aware that the whole area is infested. It was, therefore, decided that propaganda should be used to try and dispel some of the innate prejudice which exists in the minds of many people—one of the slogans used in the propaganda campaign, "The bed bug is not a social stigma, it is a misfortune," led to many questions being asked as to the methods of eliminating these pests and their practical application. The stall was the most popular focus of interest throughout the week and has led to a considerable increase of "bug-mindedness" in the Borough.

The stall itself consists of three shelves and the sides and back of the interior of the walls were used to display pictures, literature and slogans.

"The first shelf was used to show the life history of the insect and live bugs were exhibited in small glass jars in the six stages of development, with separate ones for adult males and females, eggs, "Mr. and Mrs. Bug and Family" and cast skins of the insect.

"On the second shelf the haunts of the bug were displayed by showing a portion of a spring mattress in a glass case infested with live bugs, a portion of the underside of a chair and of an iron bed rail, each being grossly infested, the latter clearly showing that the bug will live in an iron bedstead. Other examples were wood mouldings, skirtings, picture rails, ceiling fillets, bed ticking, and pillow casing, each showing the presence of eggs, cast skins and the filth deposited.

"The third shelf was utilised to show the materials used in Woolwich to destroy the bug, but the centre of this shelf contained a model of a bug, enlarged forty-five times in a glass case. On each side were arranged the gases, solutions and implements which consisted of, tins of Cyanide, Zyklon B preparation in a glass jar, a tin opener and hammer, gas mask, a cylinder and syphon of Etox, Cyanide testing outfit, a compressed air sprayer, bottles of various solutions, sulphur cylinders, sulphur candles and a pail, soap, floor cloth and scrubbing brush on which was a card bearing the words, 'You can use soap, and water and then paraffin oil. This method is also effective but takes longer.'

"The whole exhibit will be on view at the Institute on the occasion of the Sessional meeting on the 13th November when Mr. McKenny Hughes opens the discussion on 'The Bed Bug as a Housing Problem.'"

(i) HEALTH SERVICES BOOKLET.—In 1931 it was decided to publish a booklet which would inform the public of the services available and also act as a reference book in case of need. A booklet was accordingly prepared giving detailed information regarding the Care of the Mother and Child; the duties of foster-mothers under the Children's Act; the Nursing Services; Ambulance facilities; Infectious and other Diseases; Disinfection; Sanitary matters; Health Education, Vaccination and the Registration of Births and Deaths. A first edition of 5,000 copies was quickly distributed during Health Week and through the Council's Centres, and since then revised editions have been similarly circulated.

SECTION III.—MATERNITY AND CHILD WELFARE.

The Council's Maternity and Child Welfare Scheme embraces the following services :—

- (a) Administration of the Notification of Births Acts, 1907-15.
- (b) Home visits to mothers and children.
- (c) Infant Life Protection.
- (d) Establishment of Welfare Centres.
- (e) Establishment of an Artificial Sunlight Clinic.
- (f) The systematic medical inspection of toddlers.
- (g) Provision of maternity outfits.
- (h) Payment of compensation to midwives.
- (i) The services of a Consultant in cases of Puerperal Fever and Puerperal Pyrexia.
- (j) The services of a Consultant in exceptional cases of obstetric or ante-natal abnormality at home.
- (k) Provision of Home Helps in maternity cases.
- (l) An arrangement with the School Medical Treatment Committee for the treatment of minor ailments in young children.
- (m) An arrangement with the School Medical Treatment Committee for the provision of dental treatment to young children and to expectant and nursing mothers.
- (n) An arrangement with the Woolwich Invalid Children's Aid Association for orthopædic treatment for children requiring such treatment.
- (o) Provision of nursing assistance for young children suffering from Measles, Ophthalmia Neonatorum, Zymotic Enteritis, Whooping Cough, Polio-myelitis, Pneumonia and Influenzal Pneumonia, and for mothers suffering from Puerperal Fever, Puerperal Pyrexia, Pneumonia and Influenzal Pneumonia.
- (p) Day Ambulance service for maternity cases.
- (q) Reservation of twelve beds for children under 5 years of age who are suffering from such conditions as are usually treated in a general hospital, at the War Memorial Hospital.

- (r) Provision of beds for the institutional treatment of midwifery for 144 cases per annum at the British Hospital for Mothers and Babies, and for 66 cases at the War Memorial Hospital.
- (s) Reservation of beds, for ante-natal treatment and emergencies of midwifery, at the War Memorial Hospital, equivalent to 18 weeks' treatment per annum.
- (t) An arrangement with the Woolwich Invalid Children's Aid Association for the convalescent treatment of children requiring such treatment.
- (u) Convalescent Home treatment for expectant and nursing mothers.
- (v) Arrangements for the supply and distribution to young children, expectant and nursing mothers, of milk and food-drugs at cost price, half cost or free, according to economic circumstances.

In addition to these services the Council have, at the request of the London County Council, undertaken to do such work as is necessary in the case of children under five years of age :—

- (w) Under the Blind Persons Act, 1920.
- (x) Under Section 6 of the Widows', Orphans' and Old Age Contributory Pensions Act, 1925.

STAFF.—Three whole-time medical officers are in medical charge of the clinics. Each of these devotes eight sessions per week to Maternity and Child Welfare and three sessions per week to Tuberculosis. One part-time medical officer takes charge of the Toddlers Examination Clinic and two Consultants have been appointed—one for the Artificial Sunlight Clinic and one for consultations in connection with cases of puerperal sepsis and difficult obstetric cases at home. The dental staff—two dentists and an anæsthetist—are part-time and are appointed by the School Treatment Committee subject to the approval of the Council. The health visiting staff now consists of eleven whole-time health visitors: two of these are part-time sanitary inspectors, three are part-time infant life protection visitors and one is the artificial sunlight clinic nurse. It is the practice of the Council to appoint additional temporary health visitors during epidemics of measles.

Dr. Rachel Mackenzie, who entered the service of the Council on the 1st August, 1918, retired on the 22nd December, 1934, on superannuation. Dr. F. E. Smith, who was appointed to the vacancy so created, commenced duties on the 27th December.

Miss W. Adams, a health visitor in the service of the Council, was appointed an infant life protection visitor and commenced duty as such in February.

NOTIFICATION OF BIRTHS ACTS, 1907-15.—Every birth occurring in the Borough requires to be notified to the Medical Officer of Health within thirty-six hours of birth. As a matter of fact, only a very small percentage of births are so notified. As soon as a notification is received pamphlets dealing with the care and comfort of mothers and infants are sent by post to every mother. Subsequently, between the tenth and fourteenth day, a visit is paid to the home by the health visitor who decides on her first visit the necessity for subsequent visits. It may be stated, however, that, broadly, the general basis of visiting is as follows :—three visits during the first year and one visit in each subsequent year up to the age of five years, or until the child goes to school.

THE WORK OF THE HEALTH VISITORS.—The work performed by these officers during the year, with regard to maternity and child welfare, is summarised in the following Table :—

TABLE No. 6.

Births—First visits	2,007
„ Revisits	18,656
Infant deaths investigated	35
Still-births investigated	17
Expectant mothers—home visits	687
Infectious diseases :—	
Ophthalmia Neonatorum—First visits	7
„ „ Revisits	64
Measles—First visits	2,264
„ Revisits	585
Puerperal fever—First visits	5
„ „ Revisits	5
Puerperal Pyrexia—First visits	20
„ „ Revisits	3
Zymotic Enteritis—First visits	3
„ „ Revisits	—
Pneumonia	81
Anterior Poliomyelitis	—
Encephalitis Lethargica	1
Infant Life Protection	1,184
Visits unclassified	293
Visits unsuccessful	3,374
	<hr/>
	29,291

In 1934 the Council paid the class fees and expenses in connection with the visits to approved institutions of one of the health visitors who attended a refresher course for health visitors.

INFANT LIFE PROTECTION.—The Council became responsible on the 1st April, 1933, for Infant Life Protection work in Woolwich, and forthwith appointed two of their health visitors as Infant Life Protection Visitors (part-time), and in 1934 a third was so appointed. When evasion of the law is suspected the necessary investigations are made by one of the male sanitary inspectors. The houses of all new foster-mothers are inspected by the district sanitary inspectors, who furnish in each case, a sanitary report.

At the end of 1933 there were 104 foster children and 76 foster mothers on the Council's register and a year later the numbers were 93 and 68 respectively.

It is the custom to report on all homes where women indicate their desire to become foster-mothers and in addition to the number of foster mothers shown above, another 45 were either temporarily without nurse children or had been noted as suitable persons.

These figures do not, however, tell the whole story, as 171 foster children were added to the register and 182 foster children were removed during the year. The following Table shows the ages of the children under supervision on the 31st December, 1934 :—

TABLE No. 7.

Under 1 year.	1 -	2 -	3 -	4 -	5 -	6 -	7 -	8 -
16	12	10	12	10	9	11	2	11

The number of visits paid by the Infant Life Protection Visitors was 1,184. The number of visits made by the male inspector, in connection with infringements and kindred matters was 70, while the number of visits paid by the district sanitary inspectors was 91. The number of, and nature of the various legal infringements discovered during the year were as follows :—

TABLE No. 8.

<i>Nature of Infringement.</i>	<i>No.</i>
Keeping a nurse child without giving timeous notice ...	15
Change of address by foster mother without giving timeous notice	2
Infant removed from care of foster mother without giving timeous notice	14
Infant kept in premises or by persons prohibited from receiving same	—
Infant kept in excess of number fixed	1

Cautionary letters were sent in 28 cases. No action was taken in 4 cases and there were no prosecutions. In 5 instances insanitary conditions were discovered, in 5 instances there was overcrowding and in 7 instances verminous conditions existed. In all cases appropriate action was taken to secure the abatement of the nuisances. Nurse infants who are kept under unsatisfactory conditions may be removed to a place of safety, but it was not necessary to remove any such during the year.

All foster mothers are urged to attend the Council's welfare centres with the children under five years of age in their charge, and it is pleasing to record, that, with very few exceptions, every child of such age now regularly attends an infant welfare centre. Special care is taken to see that children who are weak and ailing attend the centres. During the year two nurse infants died—one from bronchitis and one from enteritis.

The only institution in the Borough holding a certificate of exemption is the Woolwich War Memorial Hospital.

THE WORK OF THE WELFARE CENTRES.—These are eight in number and are all municipal. Four are in buildings belonging to the Council and four are held in church halls. Infant welfare sessions are held at all of them and ante-natal sessions are held twice weekly at three of them and once a month at one other. At the end of the year 6·25 ante-natal sessions and 21 infant consultation and weighing sessions were being held each week.

In tabular form below are shown detailed statistics for 1934 and the consolidated statistics for the previous year :—

TABLE No. 9.

Centre.	No. on Roll of Centre.			No. of Attendances.		
	Mothers.		Children.	Mothers.		Children.
	Expectant.	Nursing.		Expectant.	Nursing.	
Town Hall	406	443	1,459	992	885	9,775
Plumstead	256	261	1,113	637	463	8,068
Eltham	404	201	1,127	1,073	472	6,348
Slade	4	123	445	7	200	4,093
New Eltham	2	78	414	4	175	4,486
St. Luke's	1	39	279	1	62	2,323
North Woolwich ...	20	43	154	36	116	1,247
Beresford Street ...	38	78	173	62	162	1,154
Totals, 1934 ...	1,131	1,266	5,164	2,812	2,535	37,494
Totals, 1933 ...	979	1,225	5,210	2,532	2,474	37,743

The next Table, No. 10, shows the number of children classified by year of birth and the number of attendances made by them during the year.

TABLE No. 10.

CHILDREN IN ATTENDANCE AT EACH CENTRE.

Year of Birth.	Town Hall.	Plumstead.	Eltham.	New Eltham.	Slade.	St. Luke's.	N. Woolwich.	Beresford St.	Totals.
1934	448	326	255	113	110	67	41	51	1,411
1933	418	324	276	106	126	85	36	44	1,415
1932	267	209	185	77	101	36	33	25	933
1931	195	112	165	64	50	37	24	28	675
1930	86	112	146	38	38	30	13	16	479
1929	45	30	100	16	20	24	7	9	251
	1,459	1,113	1,127	414	445	279	154	173	5,164

Table No. 10—*continued*

ATTENDANCES.

Year of Birth	Town Hall	Plumstead	Eltham	New Eltham	Slade	St. Luke's	N. Woolwich	Beresford St.	Totals
1934	3,356	2,866	2,009	1,426	1,074	749	427	338	12,245
1933	3,550	3,186	2,325	1,867	1,606	997	400	390	14,321
1932	1,652	1,114	882	671	822	204	250	160	5,755
1931	838	473	546	303	311	176	103	155	2,905
1930	285	366	417	174	217	142	37	77	1,715
1929	94	63	169	45	63	55	30	34	553
	9,775	8,068	6,348	4,486	4,093	2,323	1,247	1,154	37,494

These figures, which do not include attendances at the special Toddlers' Clinic or the Sunlight Clinic, show a slight decrease over 1933.

Feeding of Infants in Woolwich.—In midsummer the usual enquiry was made, as in previous years, as to the type of feeding adopted in the case of infants attending the welfare centres. The method used was as follows:—

- (a) On the card of every child under one year of age attending a welfare centre, between the 16th July and the 24th August, was inserted once, and once only, the terms "Breast," or "Breast and Hand," or "Hand Fed."
- (b) The child's age was taken on the day on which this note was made.
- (c) At the end of the period the results were summarised for the whole Borough and the appropriate percentages worked out.

The results of the enquiry are shown in Table No. 11, on the adjoining page.

TABLE No. 11.
Feeding of Infants attending Welfare Centres—16th July to 24th August, 1934.

Method of Feeding.	AGE IN MONTHS.													
	0-1	1-2	2-3	3-4	4-5	5-6	6-7	7-8	8-9	Total	9-10	10-11	11-12	Grand Total
Breast	61	75	58	53	41	27	26	19	5	365	3	—	—	368
Breast and Hand	11	14	11	10	11	5	11	17	9	99	12	3	2	116
Hand	6	19	41	35	37	30	50	47	33	298	44	48	71	461
	78	108	110	98	89	62	87	83	47	762	59	51	73	945
	PERCENTAGES.													
	0-1	1-2	2-3	3-4	4-5	5-6	6-7	7-8	8-9	Total	9-10	10-11	11-12	Grand Total
Breast	78.2	69.4	52.8	54.1	46.1	43.5	29.9	22.9	10.6	47.9	5.1	—	—	38.9
Breast and Hand	14.1	12.9	10.0	10.2	12.4	8.1	12.6	20.5	19.1	12.9	20.3	5.9	2.7	12.3
Hand	7.6	17.6	37.3	35.7	41.6	48.4	57.5	56.6	70.2	39.1	74.6	94.1	97.3	48.8

ARTIFICIAL SUNLIGHT CLINIC.—The artificial sunlight clinic is held in part of the Town Hall Infant Welfare Centre. The total number of patients treated during the year, including 133 whose course of treatment was not completed at the end of 1933, was 467. The total number of treatments given was 9,612: of these, 7,546 were by carbon arc, 1,254 by mercury vapour lamp, and 812 by radiant heat lamp.

The clinic is under the medical supervision of Dr. J. E. A. Lynham, who has furnished the following report on the year's work:—

“The figures for the Sunlight Clinic show but little change from the previous year. A smaller number was carried forward, but a larger number of new cases was treated, the total being practically the same. The group under the heading ‘Anæmia, Debility, etc.’ is still the largest, and is relatively considerably larger than last year. The total number cured or improved has dropped, but this is explained by an increase in those who ceased to attend and those who were under treatment at the end of the year. It seems undeniable that the Clinic is of real assistance in a district where social conditions are lowered by unemployment.”

In Table No. 12, are shown below the number and types of cases treated during the year:—

TABLE No. 12.
Cases treated at Sunlight Clinic, 1934.

	Brought forward from 1933	New Cases.	Total.	Much Improved or Cured.	Improved.	I.S.Q.	Ceased Treatment.	Treatment not yet complete
Rickets	43	72	115	28	23	9	19	36
Anæmia, Debility and Malnutrition	48	153	201	51	29	12	31	78
Catarrhal Children	14	28	42	9	5	3	11	14
Septic Conditions	1	2	3	1	—	—	—	2
Nervous Children	3	6	9	2	2	—	1	4
Enlarged Glands...	12	27	39	15	5	—	5	14
Miscellaneous Nervous Conditions	1	2	3	—	1	1	—	1
Miscellaneous Skin Conditions	3	12	15	8	2	—	—	5
Other Conditions...	4	18	22	6	—	1	4	11
Mothers	4	14	18	2	3	—	6	7
	133	334	467	122	70	26	77	172

TODDLERS CLINIC.—The routine medical examination of toddlers is now an integral part of the Council's Maternity and Child Welfare Scheme. Children are examined in their birthday month, aged 2 years, 3 years and 4 years. Those requiring observation are called up for review at intervals of a few months, and those requiring treatment are told how to obtain it. All are carefully followed up by the Health Visitors.

The examinations follow the lines of the school medical examinations and are recorded in the same way. The record cards, however, are slightly modified in order to deal with special points of importance to the toddler.

Three sessions are held weekly—one at the Old Town Hall, Woolwich, one at Plumstead Health Centre and one at Eltham Health Centre. The clinic is under the medical charge of Dr. Margaret Emslie and she reports below on the year's working :—

“The finding at routine toddlers' inspections during the year 1934 are summarised in Table, No. 13, appended.

“These figures and observations include all conditions clinically considered to show variation from the normal (i.e. from perfect functional utility and health), but it should be noted that all the conditions recorded were not necessarily considered to require treatment. In this respect the Table varies from certain other Tables embodying results of routine examinations, since these in some instances appear to show only cases or conditions referred for treatment, and are not a summary of simple observations on the child. In the case of certain defects or pseudo-defects there is in fact a large difference, in the conditions referred to here, between the incidence of signs and symptoms patent to the observer, or interesting to him, that may hold some possible significance on the future or past health of the child, or that might offer some indication for a different orientation of teaching in preventive health work at an earlier age, and therefore be worth recording, and that which is held to be a true abnormality or pathological state requiring treatment. The best instance of this is the disease of rickets, in regard to which, as will be seen later, there is a suggestion that a widespread condition of latent or non-disabling rickets may possibly prevail, but a very low rate (7 per cent. actually) of children was referred to the orthopædic clinic for treatment of deformities, of rachitic or other origin. Any suggestion that the cases recorded (on clinical evidence) as rachitic in this Table are comparable with the totals of cases of rickets referred for treatment of the acute condition, or for orthopædic deformity solely, in the records of other clinics, would entirely falsify the impression that is intended to be given by these figures, and falsify the actually prevailing state of affairs. The observations offered in these annual records are offered as observations only, pending further investigation and

the accumulation of evidence as to what is and what is not important in the protective care of toddlers or in the better concentration of teaching at an earlier age. Evidence of disease, it need hardly be said, can only be based on accredited facts, not on external observation, but in the beginning it is observation simply that must determine when it is or is not likely to be worth while to pursue the effort of getting more exact evidence.

"To go on to the recorded findings it will be seen that the nutrition of the children seen (as judged by height, weight and general appearance) was considered to be extremely satisfactory, the rate for actual malnutrition (marked 4 in the Table) being as low as 0·4 per cent. ; and for sub-normal nutrition or simple thinness (3 in Table) 11 per cent. (The ability to make a thin child fat is of course not always a question at the disposition of the parents' goodwill, or of their resources). In 53 per cent. of cases, i.e., more than half, the general nutrition was recorded as excellent (this, however, included some children who were too fat) and in a further 35·5 per cent. as average. These figures are believed to compare well with findings elsewhere and are on a par with what has been found in previous years, always, however, showing a slight improvement. There can be no question—if these observations are just—of any suffering of the children from under-nourishment, even in difficult times. The muscle tone, still a better test than weight of the well being of the children, was put down as excellent in 70 per cent. of those seen.

"Nevertheless there remains the question of possible rickets, aforementioned, and of anæmia, both commented upon in previous years. The number of cases showing external evidences of rickets (not necessarily active, in fact, in most cases, presumably *non-active* and healed, but the remnant of a non-healthy and unsatisfactory condition at an earlier age, on such assessment of symptoms as is here possible), amounts to 30 per cent. and that of anæmia 21 per cent. These figures are in accordance with what has been noted and annotated upon previously on the same evidence. Possibly these conditions are factitious, not to be supported by laboratory findings, but the impression recurs, and one may remember that there is actual evidence (in regard to anæmia, not rickets) of a proved high incidence of this condition in non-selected children of an earlier age investigated in a neighbouring part of London (c.f. Dr. Helen Mackay's work at the Queen's Hospital). If the miasma that rickets (of a discernible degree) and anæmia may exist somewhat widely amongst children of pre-school age, unrealised and unchecked till disclosed by routine examination, can be dispersed, all the better ; until it is there remains the uncomfortable possibility that in spite of all our efforts at intelligent teaching as we understand it, all of our education of the mothers isn't going home or some of the education we give is wanting still in knowledge, in an important sense. If the condition, or conditions, are found to exist in reality, then all the more reason for our efforts to be increased and to be amplified in knowledge so far as possible. All of this waits only for research.

"Some of the points that suitable research would elucidate are clear and interesting. Is the anæmia, if it exists, merely a hang-over from Dr. Mackay's nutritional anæmia of infants, or is it of a separate etiological and environmental origin? (i.e. *when* and *how* must we prevent it?) Can the rickets be established by X-ray findings and biochemical reports as true rachitis arising by the same causes as in earlier infancy? Is it healed or active? At what age did it begin? Does any of it, as a result of recent difficult times, and possibly selective feeding, show evidence of having arisen as a real deprivation complex, absolute or relative, in children who have been exposed to hardship, *at an age corresponding with the hardship*, and possibly at an age later than rickets is usually thought to be incurred? Does it correspond with any particular social stratum or circumstance? Or is it uniform (so far as it exists) throughout the centres in the district and the grades and circumstances roughly corresponding with these?

"Dental caries is a condition recorded in the Table, that elsewhere has been associated with rickets, on laboratory evidence, as being secondary to a poor formation of enamel coincident with defective calcium-phosphorus metabolism such as we know exists in rickets. This year the figures for dental caries in the children examined show a diminution at the earliest age (3·5 per cent. of children shows caries at the age of 2, i.e., at an age between their second and third birthdays, compared with the best previously recorded figure of 8 per cent.). At the next age, 3 years, the figure remains high at 27 per cent., and at the age of 4, unfortunately, still 48 per cent. The diminution at the youngest age is, however, very gratifying if it is real, but it may in fact be somewhat falsified by the fact that children now come more accurately in their birthday month for routine inspection, than at odd dates between birthdays, and at the exact age of two, one would expect to see less caries than for example, some months later, nearer 3.

"Of the 45 per cent. of children showing tonsil enlargement only 3·6 per cent. were considered to require operation."

TABLE No. 13.

Medical Inspection of Toddlers, 1934.

Disease, Defect or Condition.	BOYS Age last Birthday.			GIRLS. Age last Birthday.			Total
	2	3	4	2	3	4	
Total Children Examined ...	224	190	158	225	182	166	1,145
NUTRITION—							
(a) Excellent ...	145	85	35	167	109	62	603
(b) Normal ...	67	82	85	48	60	71	413
(c) Sub-normal ...	12	23	36	10	13	30	124
(d) Bad ...	—	—	2	—	—	3	5

Medical Inspection of Toddlers, 1934—*continued.*

Disease, Defect or Condition.	BOYS Age last Birthday.			GIRLS. Age last Birthday.			Total
	2	3	4	2	3	4	
MUSCULAR TONE—							
(a) Excellent	107	142	133	131	138	148	799
(b) Good	116	47	25	90	42	18	338
(c) Sub-Normal	1	1	—	4	2	—	8
CLOTHING AND FOOTGEAR—							
(a) Satisfactory	219	186	152	223	178	162	1,120
(b) Unsatisfactory	5	4	6	2	4	4	25
CLEANLINESS—							
(a) Excellent	212	181	154	217	176	156	1,096
(b) Fair	12	9	4	8	6	10	49
(c) Dirty	—	—	—	—	—	—	—
ANÆMIA	38	48	32	51	41	31	241
LUNGS—							
Bronchitis... ..	4	8	6	3	9	10	40
Asthma	—	—	—	—	—	2	2
NERVOUS SYSTEM—							
Behaviour Symptoms	81	56	37	85	45	30	334
Organic Disease	1	1	1	1	1	1	6
ALIMENTARY SYSTEM—							
Worms	3	—	3	2	3	4	15
Other Conditions... ..	6	6	3	6	7	2	30
GENITO-URINARY SYSTEM—							
Enuresis and Frequency	16	10	10	22	6	3	67
Other Conditions... ..	3	2	2	—	2	—	9
RICKETS—							
Including Healed Cases and Early Signs	74	76	65	52	45	34	346
SKIN CONDITIONS	16	16	8	19	8	11	78
EYE DEFECTS AND INFECTIONS including Squints	6	11	8	10	10	11	56
EARS—							
Otorrhœa, Earache, etc.	3	10	4	2	3	7	29
NOSE AND THROAT—							
Enlarged Tonsils	87	96	75	93	89	76	516
Enlarged Tonsils and Adenoids							
Adenoids							
TEETH—							
Caries	9	58	84	7	44	72	274
Hypoplasia	2	5	2	1	4	5	19
Malocclusion	25	11	3	29	14	3	85
HEART AND CIRCULATION—							
(a) Functional Hearts	39	39	48	35	35	42	238
(b) Organic Heart Disease	—	1	—	—	—	1	2
ENLARGED GLANDS—							
(a) Tonsillar	61	82	80	71	64	81	439
(b) Post-Cervical	50	48	53	39	53	45	288
OTHER DISEASES AND DEFECTS	1	3	7	2	3	4	20

PROVISION OF MATERNITY OUTFITS.—In 1930 the Council agreed to supply sterilised maternity outfits for the use of necessitous mothers in order to ensure the necessary cleanliness in domestic midwifery and with a view to minimising the risks of maternity. They are supplied free, half cost, or cost price, according to the family income, the Council's economic scales being used as tests of necessity. During the year 93 applications were received ; 82 were supplied—51 free, 7 at half cost and 24 at cost price.

COMPENSATION OF MIDWIVES.—Whenever an assistant medical officer finds it necessary to recommend hospital treatment for expectant mothers referred to the Council's ante-natal clinics for ante-natal examination by midwives, the midwife loses her patient if the mother accepts the advice of the medical officer and is admitted to hospital. In these cases the Council make a payment of 10s. by way of compensation to the midwife subject to certain conditions, which are referred to in detail in my Annual Report for 1931, being complied with. During the year compensation was paid in 8 instances.

ADMINISTRATION OF THE PUBLIC HEALTH (PUERPERAL FEVER AND PUERPERAL PYREXIA) REGULATIONS, 1926.—The Council's scheme under these regulations was fully described in the Annual Report for 1928. The extent to which it was made use of is reported on fully in that part of the Infectious Disease Section of the report which deals with the notification of these diseases.

OBSTETRIC COMPLICATIONS IN PRIVATE PRACTICE.—In September, 1931, the Council arranged for the services of Mr. Harold Taylor, F.R.C.S., the Council's Consultant under the Puerperal Fever and Puerperal Pyrexia Regulations, to be available in such exceptional cases, and to pay him a fee of £5 5s. 0d. for each such case. No case was dealt with under this scheme during the year.

HOME HELPS.—During the year 43 applications were considered by the Committee and 40 home helps were provided. The total cost of this service was £123 2s. 0d.

TREATMENT OF MINOR AILMENTS.—Children requiring medical or surgical treatment for certain minor ailments are referred to the School Clinics at Brewer Street, Woolwich, or to the Eltham and Plumstead Health Centres ; to a private practitioner or to a hospital. During the year 280 children were sent to these clinics and for each case the Council paid 5s. 0d.

Children referred to them suffered from the conditions set out in the following Table, No. 14, but it is well worthy of notice that the number of children treated at the Eltham Health Centre and the Plumstead Health Centre appear out of all proportion to the number sent to Brewer Street Clinic, Woolwich. The explanation

does not lie in the fact that Woolwich children require less treatment ; it is entirely due to the fact that facilities exist in the same building for the required treatment to be given at the time of the visit at Eltham and at Plumstead.

TABLE No. 14.

		<i>Brewer Street.</i>		<i>Eltham.</i>		<i>Plumstead.</i>
Impetigo ...	...	11	...	32	...	1
Ear Discharge ...	...	17	...	45	...	25
Eyes ...	...	19	...	37	...	34
Miscellaneous ...	...	2	...	40	...	17
		—		—		—
		49		154		77
		—		—		—

DENTAL TREATMENT.—Mothers and children requiring dental treatment are referred from the Welfare Centres to the School Clinics at Brewer Street, Woolwich, at Westhorpe Avenue, Eltham, and at Plumstead High Street. This service, which had been established at Woolwich for many years was extended to Eltham in 1932 and to Plumstead in 1933. There are three sessions per month at Woolwich, two per month at Plumstead and two per month at Eltham.

The following Table, No. 15, shows the cases attending and the total attendances during the year. The number of sessions was 84 excluding anæsthetic days.

TABLE No. 15.

			Expectant Mothers.		Nursing Mothers.		Children under 5.	
			No.	Attend- ances.	No.	Attend- ances.	No.	Attend- ances.
Woolwich ...	...	...	90	180	44	117	143	216
Eltham ...	...	...	—	—	—	—	126	221
Plumstead ...	...	...	—	—	—	—	112	161
			90	180	44	117	381	598

Dentures are provided free, at part cost, or at cost price, according to the ability to pay, and payment is spread over many weeks. In consequence, the income received during the year includes money received in respect of dentures

supplied in previous years. Twenty-five sets (complete or partial) of artificial teeth were supplied during the year at a total cost of £133 10s. 6d. Payments by mothers amounted to £72 1s. 0d.

ORTHOPÆDIC TREATMENT FOR CHILDREN UNDER FIVE YEARS OF AGE.—Children requiring orthopædic treatment are referred to the remedial clinic of the Woolwich Invalid Children's Aid Association. The Council pay for children under five years of age sent by their medical officers to the clinic, 2s. 0d. per attendance for cases requiring massage or electrical treatment and 1s. 6d. per attendance for any other form of treatment. The cost of these services for the year was £169 10s. 6d. Only cases recommended by the Medical Officer of Health are included in this scheme, and payment is only made for the number of attendances approved by him. In detail, the children referred to the clinic required treatment for the following conditions :—

TABLE No. 16.
Cases treated at Orthopædic Clinic, 1934.

Type of Case.	Number remaining over from 1933.	New Cases.	Total Cases.	Number who completed treatment by end of year.	Number with treatment not completed.
Talipes (Club Foot)	—	12	12	10	2
„ (Flat Foot)	2	9	11	10	1
Rickets—					
General	5	35	40	36	4
Genu Valgum (Knock Knee)... ..	4	31	35	32	3
Genu Varum (Bow Leg)	2	18	20	13	7
Infantile Paralysis	—	—	—	—	—
Erb's Paralysis	—	1	1	1	—
Bad Posture	1	5	6	5	1
Muscular Weakness	1	4	5	5	—
Mouth Breathing	1	3	4	3	1
Torticollis	—	2	2	2	—
Other Deformities	1	—	1	1	—
Other Diseases	4	2	6	5	1
Constipation... ..	—	1	1	1	—
	21	123	144	124	20

PROVISION OF NURSING ASSISTANCE FOR CERTAIN DISEASES.—In Section 1 of the report the general scheme of nursing assistance is described in full. The extent to which these services have been made use of in respect of specific diseases has been dealt with under these diseases, *q.v.*

In February the Council considered an application from the Woolwich and District Nursing Association requesting that payments should be made in respect of the nursing of children under five years of age, suffering from diseases, other than those specified infectious diseases for which payment is made under existing agreements. The Association asked that payments should be made in respect of children suffering from threadworms, discharging eyes, otorrhœa, blepharitis and boils. As arrangements already existed at the Minor Ailments Clinic for the treatment of these conditions, except threadworms, the Council decided to make payments in respect of the nursing of cases of threadworms only and to include all the nursing associations in the arrangement. It was agreed that during the financial year ended 31st March, 1935, a payment at the rate of 1s. 0d. per visit should be made in respect of such cases, that the total expenditure should not exceed £18, and that in the event of this amount being exceeded a pro rata reduction would be made in the payment to each of the associations. During the nine months of 1934 the number of cases so treated was 46, payment being made at approximately eleven pence per visit.

DAY AMBULANCE.—In accordance with an agreement entered into with the London County Council, ambulances are hired from that body for the conveyance of mothers to maternity hospitals between the hours of 8 a.m. and 11 p.m., and, except in rare instances, the cost is recovered from the patient. During the year this service was used on 8 occasions.

CHILDREN'S BEDS.—Twelve beds have been reserved by the Council in the Woolwich War Memorial Hospital for the treatment of children under 5 years of age suffering from such conditions as are usually admitted to general or children's hospitals. Including those remaining in hospital at the beginning of the year, the number of children who received treatment during the year was 193. Of these 167 were discharged cured or very much improved in health, 14 were discharged as improved and 5 died. No children were transferred to other hospitals, 4 others were discharged showing no improvement, and the number remaining in hospital at the end of the year was 3. The surgical conditions for which these children were admitted included :—enlarged tonsils and adenoids, phimosis, hernia, abscess, injury, pyloric stenosis, rectal prolapse, and cleft palate, etc., and those admitted for medical treatment included children suffering from prematurity, marasmus, pneumonia, bronchitis, diarrhœa, urinary infection, catarrhal jaundice, and chorea, etc.

INSTITUTIONAL MIDWIFERY.—(1) *British Hospital for Mothers and Babies.*—There are 42 beds in this hospital, and I am informed by Miss Gregory, the Secretary

of the Hospital, that 801 babies were born during the year. At the ante-natal clinics in connection with this hospital, 8,682 attendances were made, and at the infant clinics, 2,687 attendances. In addition there were 190 extern cases. The number of mothers admitted under the Council's scheme was 138, the nett cost to the Council being £974 3s. 0d.

(2) *War Memorial Hospital*.—There are 7 maternity beds in this hospital and I am indebted to Mr. R. S. G. Hutchings, the Secretary, for the following information regarding the admissions to the maternity unit during the year. The number of children born in the hospital was 195, and 40 mothers were admitted for ante-natal or emergency treatment. The number of attendances at the ante-natal clinic was 1,195. The number of mothers admitted under the Council's scheme was 61, the nett cost to the Council being £501 18s. 6d.

ANTE-NATAL TREATMENT AND EMERGENCIES.—The number of cases admitted for ante-natal or emergency treatment under the Council's scheme was 4. The reasons for admission were :—Albuminuria, 1 ; Pyelitis, 1 ; Heart Trouble, 2.

CONVALESCENT HOME TREATMENT FOR CHILDREN UNDER 5 YEARS OF AGE.—The necessary arrangements for this are made by the Woolwich Invalid Children's Aid Association to whom the Council give grants-in-aid for this purpose. During the year such grants were made in respect of 70 children, the total cost of whose convalescent treatment amount to £422 16s. 4d. The Council's grants amounted to £200. The children were sent away for periods varying from 2 to 27 weeks, and payment was only made in respect of children sent to homes approved by the Medical Officer of Health.

During the year at the request of the Metropolitan Boroughs' Standing Joint Committee, proposals on the subject of a scheme which has for its object the provision of a convalescent home for the reception of mothers after confinement and their babies, was considered. It appeared that money was available from a Trust for erecting and equipping such a home free of cost, but that no funds would be available for the maintenance of the home. The proposals provided for a home of thirty single rooms for mothers and babies, and nurseries for babies and toddlers. The Trustees who were responsible for the home asked whether the Metropolitan Boroughs as a whole would be responsible for 13 beds. The Council agreed to co-operate in the scheme.

CONVALESCENT HOME TREATMENT FOR EXPECTANT AND NURSING MOTHERS.—In June, 1931, the Council decided to make provision under their maternity and child welfare scheme for the convalescent treatment of expectant and nursing mothers. The scheme included payment of railway fares where necessary. It was resolved also to recover some of the cost from patients after consideration of each case on its merits. During the year one mother was so admitted to a convalescent home.

SUPPLY OF MILK, ETC., TO NECESSITOUS MOTHERS AND CHILDREN.—Under the provisions of the Maternity and Child Welfare Act, 1918, milk, etc., is provided by the Council for necessitous expectant and nursing mothers, and children under the age of five years, under the conditions laid down in Circular 185, issued by the Ministry of Health, in March, 1921. The approximate cost of these services during the year was as follows :—

Dried milk, £1,956 0s. 9d. ; Fresh milk, Nil ; Dinners, Nil.

In January the Council decided to co-operate with the London County Council in regard to the supply of extra nourishment to maternity cases where domiciliary relief was being granted by the County Council. The details of the scheme may be summarised as follows :—

(a) Grant of extra nourishment shall be considered as additional to, and not part of, ordinary relief.

(b) There shall be no material interval between the recommendation of extra nourishment, and the issue thereof, the Welfare Centre's recommendations shall be regarded as matters of urgency by Relieving Officers and District Medical Officers.

(c) Women in receipt of relief who attend London County Council ante-natal clinics for examination and advice prior to confinement in London County Council hospitals shall be dealt with by the London County Council, except in special cases.

(d) After confinement the nursing mothers will be referred to Borough Council's clinics, with a view to any extra nourishment required being supplied through such centres.

(e) Recommendations from Welfare Centres with regard to nursing mothers will be dealt with in the same way as expectant mothers.

All expectant mothers in receipt of relief not attending London County Council ante-natal clinics must attend Borough Council Welfare Centres, and the procedure suggested is as follows :—

(1) The medical officer of the centre will forward to the relieving officer his recommendation for any milk or special foods which may be necessary for a nursing or expectant mother.

(2) The relieving officer will consult the district medical officer on each recommendation, and will satisfy himself that the applicant is unable to provide the special nourishment without further assistance. The recommendation will then be submitted to the district sub-committee.

(3) If the district sub-committee agree to the recommendation received from the local welfare centre, arrangements will be made by the relieving officer for the supply to be issued by the centre. In cases of sudden or urgent necessity, the relieving officer will exercise his responsibility under Section 17 of the Poor Law Act, 1930.

(4) Accounts for the supplies issued by the welfare centre will be forwarded to the Chief Officer of Public Assistance for payment.

In May the scheme was modified as follows :—

(1) To extend the scheme to provide that nourishment over and above the normal diet and necessary on medical grounds may similarly be supplied for delicate children, attending the metropolitan borough councils' maternity and child welfare centres, whose parents are in receipt of out-relief.

(2) To modify the scheme by the deletion of the provision that a relieving officer must consult the district medical officer upon each recommendation as to extra nourishment received from a maternity and child welfare centre before the submission of the recommendation to the district sub-committee, on the clear understanding :—

- (a) That the district sub-committees, and (in cases of sudden or urgent necessity) the relieving officers may consult the appropriate district medical officer whenever in any case they consider such a course desirable, and
- (b) That the district medical officer shall be consulted in those cases in which medical relief is being afforded to the family.

In September the Council decided to accept certificates from medical officers in charge of London County Council ante-natal clinics at hospitals in the cases of expectant mothers attending such clinics who, though not in receipt of relief, are nevertheless in such financial circumstances as to be unable to bear the cost of such nourishment; reserving the right, however, of requiring a certificate from one of the Council's medical officers whenever such course is considered desirable.

At the end of the year it was estimated that the amount due from the London County Council in respect of extra nourishment was £353.

BLIND PERSONS ACT, 1920.—The Council, at the request of the London County Council, have arranged that home visiting of blind children under five years of age should be carried out by the Council's health visitors. Reports are furnished to the County Council, as the occasion arises, when the home conditions are unsuitable for blind children or it is advisable that the child should be admitted into a suitable institution. During the year no new cases came to the knowledge of the department.

WIDOWS', ORPHANS' AND OLD AGE CONTRIBUTORY PENSIONS ACT, 1925.—The local authority may, in case of desertion of a child who is an orphan, administer the payments on behalf of the child. No case under the provisions of this Act was dealt with during the year.

SECTION IV.—SANITARY ADMINISTRATION.

STAFF.—At the end of the year there were on the staff of the Sanitary Section of the Department, one Chief Sanitary Inspector, ten male Inspectors, one female Inspector and two part-time female Inspectors.

WATER SUPPLY.—The Metropolitan Water Board is responsible for the water supply of the Borough, and no complaints were received as to the quality of the water supply during the year.

REMOVAL AND DISPOSAL OF REFUSE.—House refuse is collected and disposed of by direct labour under the control of the Works Department of the Council. Collection is made once weekly, with the exception of a small central area, where a twice-weekly collection is made. All refuse is disposed of by burning at the Council's destructor at White Hart Road, Plumstead. An opportunity of improving the present system of refuse collection was taken during the year, when the necessity arose for replacing the electric collection vehicles. These vehicles were definitely out of date, inasmuch as dust blew about during collection and transport, and the loading line was too high. After trials of six different types of vehicles, it was decided to purchase four "Pagefield Prodigy" refuse collection vehicles of 15 cubic yards capacity each. Steps were also taken to improve the efficiency of the method of disposal of refuse at the Plumstead Destructor by a decision to provide a new hopper and refuse handling plant, together with the necessary conveyors. The cost of this improvement, including a new approach roadway and certain new buildings, was £12,000.

Offensive trade refuse is removed by contractors, who remove fish waste from shops in the Borough and make their own arrangements with the shopkeepers as to the time and day of removal. The contractors provide airtight containers of a type approved by your Medical Officer of Health, the number of these supplied varying according to the individual requirements of the proprietors of the shops.

Inoffensive trade refuse is removed by the Works Department at a charge of five shillings per load and 1,886 tons of such refuse were removed.

DRAINAGE.—Practically every house in the Borough is connected with the water-carriage system for the disposal of sewage. The exceptions are in out-lying parts of Eltham.

The inspection of new drainage and of extensive reconstruction of old systems is carried out by the Borough Engineer, but in all other cases alterations are supervised by the Sanitary Inspectors. During the year 47 complaints were received regarding the defective action of combined drains; on investigation 244 houses in all were found to be affected. In all systems, except seven, the obstruction was of a temporary character. In 17 instances choked interceptors were found. Costs recovered from the owners amounted to £3 7s. 6d. In the following 7 instances reconstruction was necessary, and the work was carried out by the owners after the service of notices:—Mast Pond Wharf and Tuff & Hoar's Wharf, Woolwich High Street; 78 Archery Road, Eltham; 5-7 Speranza Street, Plumstead; 52-72 Tuam Road, Plumstead; 38-46 Spray Street, Woolwich; 28-29 Albion Road, Woolwich; 89-91 Kingsman Street, Woolwich. Seven single private drains were cleared at the request of the owners, from whom the costs, £1 14s. 0d., were recovered.

ACTION WITH REGARD TO SMOKE ABATEMENT.—Twenty-six special observations were made to ascertain whether there were any breaches of the law regarding smoke emission and four nuisances were discovered, notices being served in each instance. No legal proceedings were instituted, as the action taken by the Sanitary Inspectors resulted in the abatement of the nuisances.

FOULING OF PAVEMENTS BY DOGS—BY-LAW.—In view of the fact that nuisance and inconvenience caused to pedestrians by the fouling of pavements by dogs appeared to be increasing, and because of representations made by ratepayers and residents in the Borough, the Council decided to make a by-law in the interests of public health. The by-law is as follows:—

- “(1) No person being in charge of a dog in any street or public place and having the dog on a lead shall allow or permit such dog to deposit its excrement upon the public footway.
- (2) Any person offending against this By-law shall be liable on summary conviction to a fine not exceeding Forty Shillings.”

The by-law was adopted by the Council at their meeting on the 3rd October, 1934. The Home Secretary confirmed the by-law on the 30th November, 1934, and fixed the date upon which it was to come into operation as the 1st January, 1935.

THE RATS AND MICE (DESTRUCTION) ACT, 1919.—Each district Inspector is the rats officer for his area and investigates all complaints received. The total number of inspections made was 381. In 50 instances defective drains were repaired, 12 premises were rat-proofed, and other effective measures were taken in 30 instances. National Rat Week was held from the 5th to the 10th November, and during it co-operation was obtained from the Borough Engineer and many large firms in the Borough. The number of baits laid in old sewers in Woolwich and Plumstead, which were regarded as infested, was 10,548.

COMPLAINTS.—During the year 3,402 complaints of nuisances were made to the Health Department or to the Sanitary Inspectors on the district, and all these were investigated by the Sanitary Inspectors. Notices for the remedy or abatement of the defects or nuisances discovered were served upon the owner or other person responsible under the provisions of the Public Health (London) Act, 1891, or the appropriate Sections of the London County Council (General Powers) Acts, or under By-laws.

SANITARY INSPECTION OF THE AREA.—A summary of the inspections carried out by the Sanitary Inspectors will be found in Table No. 17. In connection therewith the number of Intimation and Statutory notices served was 2,642 and 444 respectively. The Statutory notices related to 379 premises and included 315 general, 48 ashpit, 9 water-closet and 33 paving notices. In addition to these notices under the Public Health (London) Act, 1891, 39 notices were served under London County Council (General Powers) Acts and under By-laws.

In 38 instances, where owners did not comply with the Statutory notices, the Town Clerk was asked to institute proceedings. It was only necessary, however, to issue summonses in three instances, as in all the other cases the necessary steps were taken on receipt of a letter from him.

In Table No. 18, will be found a summary of the nuisances abated and defects remedied.

TABLE No. 17.

INSPECTIONS.

Housing Survey — Houses		Drainage Inspections	1,690
Inspected	772	Drains Tested by Smoke Test	418
Clearance Areas — Houses		Drains Tested by Water Test	68
Surveyed	122	New Houses	1,627
Complaints Investigated ...	3,402	Tents and Vans	60
Outworkers' Premises	151	Factories	329
Houses Let in Lodgings ...	702	Workshops	418
Houses <i>re</i> Infectious Disease ...	1,550	Workplaces	121
Houses <i>re</i> Smallpox Contacts... ..	33	Theatres and Cinemas... ..	27
Houses <i>re</i> Verminous Cases ...	4,471	Rag and Bone Premises ...	5
Houses <i>re</i> Scabies Cases	192	Urinals Accessible to the Public	195
Houses <i>re</i> Other Diseases	243	Women's Lavatories	248
Common Lodging Houses ...	152	Smoke Observations	26
Overcrowding Investigated —		Special Inspections <i>re</i> Rats ...	381
Rooms	30	Miscellaneous	1,905
Underground Rooms Illegally		Re-Inspections	8,196
Occupied	5		

TABLE No. 18.
NUISANCES ABATED.

Cleansing—				Sinks Repaired or Provided ...	233
Interiors Cleansed	966			Wastes Cleansed	14
Rooms Cleansed	2,239			Wastes Trapped or Repaired...	322
Damp Conditions—				Water Closets—	
Walls	587			Flushing Apparatus Repaired	210
Sites	16			" " Renewed	83
Roofs	483			New Pans	270
Rain Water Pipes and Gutters	290			New Traps	254
Others	46			Foul Pans Cleansed by Owner	24
Dilapidations—				" " Occupier	65
Walls	771			Additional W.C.s Provided...	1
Ceilings	596			Doors and Fastenings	
Floors and Hearths	239			Remedied	58
Coppers	146			Dust Bins Provided	708
Stoves	202			Underground Rooms Closed ...	8
Others	70			Overcrowding—Cases Remedied	18
Verminous Conditions—				Water Supply—	
Rooms Cleansed	1,391			Additional	5
Defective Lighting—				Re-instated	20
Windows Repaired	200			Cisterns Cleansed	2
" Enlarged	10			" Covered	2
" Additional	—			" Removed	1
Defective Ventilation—				Foul Accumulations—	
Windows Rendered Usable...	431			Manure Removed	11
" Additional Provided	3			Offensive Accumulations Re-	
Other Means	6			moved	29
Defective Paving—				Back Yards Cleansed	13
Yards Re-paved	185			Dung Pits Provided... ..	7
" Repaired	162			Rats—	
Scullery Floors Re-paved or				Drains Repaired in Conse-	
Repaired	92			quence	50
House Drains—				Premises Rat Proofed	12
Defective Drains Repaired...	280			Other Effective Measures	30
Choked Drains Cleared	286			Rag and Bone Premises—	
Vent Pipes Repaired	22			Premises Cleaned	—
Soil Pipes Repaired	12			Rain-proof Premises Provided	—
Gullies Fixed... ..	119			Vermin-proof Conditions	
New Drainage	5			Provided	—
Rain Water Tanks Repaired...	—			Miscellaneous	124
" " Abolished	2				

THE CONDITION OF THE RIVER THAMES.—During the summer months there was a most offensive smell from the River Thames and this was the subject of general complaint, not only from those who worked or travelled on the river, but also from householders and shopkeepers in those areas near the River. London sewage effluent is discharged into the River from two main outfalls belonging to the London County Council, situated near Barking and Crossness, both in close proximity to Woolwich.

Strong representations were made by the Council to the London County Council who were urged to take steps towards securing a permanent improvement in the state of the Thames so far as this was affected by the discharge of sewage into it.

The quantity of sewage reaching the Outfalls is approaching 300 million gallons per day and most of it is discharged into the river after preliminary settlement of the sewage for removal of solid matters in suspension. A small proportion is treated with activated sludge, one large unit being installed at the Northern Outfall in 1931. In 1934 the County Council resolved to instal an additional five units and this will enable one third of the total dry weather flow at the Northern Outfall to be treated by this process, but the construction of these works will take time and will not be complete at the present rate of progress till 1940. As a temporary measure the County Council propose to use sulphate of iron, but this is only a palliative.

The County Council, in November, in a letter to the Council enclosed the following statement :—

“ During the past summer the water of the Thames from some distance below the Council's outfalls up to the tidal limit at Teddington has been in an unusually bad condition. So far as the reaches below, say, London Bridge are concerned, this condition is no doubt mainly due to the effluent entering the river at the Council's outfalls making more demands on the self-purificatory powers of the river than can be satisfied under the unusually difficult conditions which have prevailed during the last two years and which became more difficult when the fresh water flow of the river was allowed to be reduced to about one-fifth of the volume of effluent discharged from the outfalls.

“ It must be admitted that the progress of self-purification has at times reached the point where it has been physically impossible for the oxygen of the air to be absorbed at a rate sufficient to keep the water free from offensive smell or to oxidise fully compounds in the water which would discolour white lead paint.

“ Careful investigation shows, however, that the condition of the upper tidal reaches is due rather to the polluted state of water coming over Teddington weir, combined with the many discharges of effluent between Teddington and

the County of London. It has been realised for some years that the water of the Thames during the summer does not progressively improve from the outfalls to Teddington. The improvement which is observed on the early part of the journey does not continue, but a zone of deteriorating water is reached followed by some improvement towards Teddington. The low salt content of the bad water in these upper tidal reaches shows that it is not water which has come up with the tide from the region of the outfalls of the Council but is rather fresh water from the non-tidal reaches which has become polluted on its way to the outfalls and ultimately to the sea. It is this water only which is available for dilution of the Council's effluent and it is insufficient both in quantity and quality for this purpose.

" During the summer months (June to September) of this year the flow of sewage from the Council's outfalls averaged 238·9 million gallons per day (the average for the last ten years was 273·3 million gallons per day), and it is estimated that the effluent from other sewage works discharging directly or indirectly into the Thames below Teddington weir and above the Council's outfalls averaged 65 million gallons per day, and that the flow of upland water in this length into the Thames which is not measured would be, perhaps, 15 million gallons per day. The flow of the Thames itself over Teddington weir averaged 76·7 million gallons per day (June, 129·6 million gallons per day, July, 73·8 million gallons per day, August, 54·1 million gallons per day, September, 50 (approximately) million gallons per day.

" The statutory flow in the Thames under the Thames Conservancy Act, 1932, is fixed at 170 million gallons per day, but under powers provided in that Act the Minister of Health reduced the minimum to 100 million gallons per day on 22nd June and to 50 million gallons per day on 11th July.

" The result is that during the last four months a quantity of sewage effluent approximating to 300 million gallons has been discharged each day into the above-mentioned length of the Thames and has been carried up and down by the tides, while the flow of upland water tending to drive it down stream was on occasions as low as 1/15th of this quantity, while during an average year the flow of upland water was at least equal to the sewage flow and generally exceeded it two and three times.

" The Thames has not received a winter scouring by flood water for two years. As far up as Twickenham at high water it is both dirty and covered with floating matter—barges are employed in collecting driftwood. The quantity and quality of the freshwater flow available or permitted do not suffice to remove all this matter, to remove and oxidise accumulation of foul mud and to purify the Council's effluent.

" It does not appear that there is any hope of improvement of the quality of water available for dilution—except the natural improvement due to increased freshwater flow—until the standard of purification of the sewage effluent in the upper part of the tidal portions of the river is improved.

" Until the further purification plant which has been authorised is in use it will therefore be necessary to avoid bad summer periods by the use of chemical agents which will oxidise the more readily putrescible matters in the effluent as at present discharged rather than merely as heretofore to attempt to fix, without oxidising, constituents which might cause odours."

OFFENSIVE TRADES.—By the Transfer of Powers Order, 1933, consideration of, and decision on applications to the establishment anew or the enlargement of certain offensive businesses, or imposition, modification, or removal of conditions, was transferred from the London County Council to the Metropolitan Borough Councils. In Woolwich, however, there is only one offensive trade, namely, that of a slaughterer of poultry. The premises were approved by the London County Council in November, 1931.

RAG FLOCK ACT.—Two samples of rag flock were taken for analysis. Such material must comply with the Rag Flock Regulations, in which it is laid down that the soluble chlorine in the form of chlorides must not exceed 30 parts of chlorine in 100,000 parts of flock. Both samples complied with the Regulations, as the results of analyses show, the number of parts of chlorine being, respectively, 3 and 4.

MORTUARIES.—The Public Mortuary is in Sun Street, Woolwich, and a temporary mortuary is provided in Eltham High Street. The following Table shows the use made of the mortuaries during the year :—

TABLE No. 19.

	Sun Street.	Sun Street (Infectious).	Eltham.	All Mortuaries.	
Number of Bodies Received :—				1933	1934
(a) For Inquest	—	—	—	—	—
(b) For Custody	11	—	3	16	14
	11	—	3	16	14
Number of Post-Mortem Examinations	—	—	—	—	—

CEMETERIES.—There are two cemeteries in the Borough, known as the Woolwich Cemetery and the Plumstead Cemetery, the Woolwich one being divided into two parts, the old and the new. Both are owned by the Council and both are in the Parish of Plumstead.

In 1932, land at Eltham was purchased by the Council for an additional cemetery. During the year, development of the land, and the erection of a Chapel and other buildings was undertaken by direct labour, under the supervision of the Borough Engineer. Only the western half of the land is being laid out at present, and provision is being made for three Church of England, two General and one Roman Catholic Sections. These sections comprise 4, 2 and $1\frac{1}{4}$ acres respectively. Two other sections of approximately $2\frac{1}{2}$ acres are in course of development. A site has been reserved in the grounds for a Crematorium and a Garden of Rest.

Burials also take place in Eltham Churchyard and in a private burial ground within the grounds of Christ Church Priory in Eltham High Street.

In the following Table is shown the number of interments in the different graveyards. The information in the case of the cemeteries is given through the courtesy of the Town Clerk, and, in the case of the Eltham Churchyard, through that of the Vicar of Eltham.

TABLE No. 20.

	Number of Interments.		
	1932	1933	1934
Woolwich Cemetery	560	545	661
Plumstead Cemetery	765	769	755
Eltham Churchyard	232	252	236

Exhumations.—During the year one exhumation under Home Office Licence was carried out.

FACTORY AND WORKSHOP ACT.—The following Table No. 21, is in the form adopted by the Secretary of State to provide for uniformity throughout the country in the presentation of certain particulars of this work which lend themselves to statistical treatment.

TABLE No. 21.

Factories, Workshops and Workplaces.

1.—*Inspection.*

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Occupiers prosecuted. (4)
Factories (Including Factory Laundries) ...	329	17	—
Workshops (Including Workshop Laundries)	418	6	—
Workplaces (Other than Outworkers' premises)	121	1	—
Total	868	24	—

2.—*Defects Found.*

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
(1)	(2)	(3)	(4)	(5)
<i>Nuisances under the Public Health Acts :—</i>				
Want of Cleanliness... ..	24	24	—	—
Want of Ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of Drainage of Floors ...	2	2	—	—
Other Nuisances	12	11	1	—
Sanitary Accommodation {	Insufficient	1	1	—
	Unsuitable or Defective	27	27	—
	Not separate for Sexes	—	—	—
<i>Offences under the Factory and Workshop Acts :—</i>				
Illegal Occupation of Underground Bakehouse (S.101)	—	—	—	—
Other Offences	3	—	3	—
Total	69	65	4	—

Table No. 21—*continued*.3.—*Outwork in Unwholesome Premises, Section 108.*

Nature of Work (1)	Instances. (2)	Notices Served. (3)	Prosecutions. (4)
Wearing Apparel— Making, etc. 	2	2	—

REMOVAL OF INFIRM AND DISEASED PERSONS.—Power is given by Section 28 of the London County Council (General Powers) Act, 1928, to remove infirm and diseased persons living under insanitary conditions to institutions. Usually such persons are persuaded to enter an institution, but occasionally difficulty is experienced in this connection, and it is necessary to make application to a Magistrate for an Order. No such application was made during 1934.

SANDPITS.—It is the practice of the Council to disinfect all children's sandpits under their control at regular intervals during the year.

PUBLIC BATHS AND WASHHOUSES.—There are three bathing establishments in the Borough, one at Plumstead, one at Woolwich, and a small one at North Woolwich. At Plumstead there is a First Class Swimming Bath (capacity 120,000 gallons); a Second Class Swimming Bath (capacity 80,000 gallons); 64 Slipper Baths and a separate building for Turkish and Russian Vapour Baths. There is also a Public Washhouse. At Woolwich there is a First Class Swimming Bath (capacity 120,000 gallons); a Second Class Swimming Bath (capacity 90,000 gallons) and 60 Slipper Baths. At North Woolwich there are 22 Slipper Baths.

Through the courtesy of the Baths Superintendent I am able to say that the total number using the Swimming Baths during the year was 334,070; Turkish and Russian Vapour Baths 13,335; Slipper Baths 195,159, and the Public Washhouse 18,242.

LEGAL PROCEEDINGS.—The particulars of the various prosecutions instituted under the Public Health (London) Act, 1891, and kindred Acts are set out in detail in the following Table No. 22.

TABLE No. 22.

Prosecutions under Public Health and Kindred Acts.

No.	Date of Hearing.	Offence.	Situation.	Result.
1	13th February	An occupied dwelling-house without a proper and sufficient supply of water.	"The Woodlands," Shooters Hill	Closing Order made. Costs £1.
2	29th June ...	Defective W.C. flushing apparatus, defective and dilapidated ceilings.	23, Sand Street ...	Work done. Summons withdrawn on payment of 10s. 0d. costs.
3	29th June ...	Defective and choked rain water pipe; defective W.C. flushing apparatus.	25, Sand Street ...	Work done. Summons withdrawn on payment of 10s. 0d. costs.
4	7th December	Exchanging toys for rags contrary to the by-laws relating to Rag and Bone Dealers.	—	Fined 10s. 0d.

NUISANCE FROM PIGEONS.—Under Section 52 of the London County Council (General Powers) Act, 1927, a Borough Council is empowered to seize and destroy, sell or otherwise dispose of house-doves or pigeons in excessive numbers, if they appear to have no owner. No action under this Section was taken during the year.

SHOPS ACT, 1934.—This Act, which came into operation on the 30th December, contains, *inter alia*, provisions for the health and comfort of shop workers, and it applies to retail shops, wholesale shops and warehouses. These welfare provisions deal with ventilation, temperature and lighting; with the provision of sanitary conveniences and sufficient washing facilities; and with facilities for taking meals, if these have to be taken in the shop. Metropolitan Borough Councils are responsible only for the administration of those sections which deal with ventilation, heating and the provision of sanitary conveniences. Adequate means of ventilation and of lighting must be provided and maintained, and, unless the shop be specially exempt, suitable and sufficient sanitary conveniences must be provided, not only for those employed in the shop, but also for those employed about the shop. The Medical Officer of Health and all the Sanitary Inspectors were appointed Inspectors for the purposes of the Act.

PHARMACY AND POISONS ACT, 1933.—This Act places upon Metropolitan Borough Councils the duties of enforcing the provisions of that part of the Act which relates to poisons in Part 2 of the Poisons List. Poisons in Part 1 of the Poisons List may only be sold by "authorised sellers" and those in Part 2 by authorised sellers and by persons whose names appear in a register to be kept by the local authority. "Authorised sellers," i.e., pharmacists, will be inspected by Inspectors appointed by the Pharmaceutical Society, but the Borough Council are required to arrange for the necessary inspection of all other persons. It will be necessary to appoint an inspector for this purpose and also to see that the requirements of the law relating to the marking and storage of poisons are enforced.

The Act will come into force on an appointed day.

SECTION V.—INSPECTION AND SUPERVISION OF FOOD.

Each district sanitary inspector exercises a general supervision over all food exposed for sale and all food premises in his district. In addition three food inspectors have been appointed, two of whom are responsible for the inspection of meat at the slaughterhouses and for the taking of samples under the Food and Drugs (Adulteration) Act, 1928, while the third systematically and regularly inspects all food premises. Immediate steps are taken to secure the abatement of any insanitary condition discovered. The inspectors, in turn, are responsible for bi-weekly inspections of the markets.

REGISTERED PREMISES.—The London County Council (General Powers) Act, 1932, requires the registration of premises used for the following purposes:—

- (a) The sale, manufacture or storage of ice cream or similar commodity ;
- (b) The manufacture of sausages ;
- (c) The preparation or manufacture of potted, pressed, pickled, or preserved meat, fish or other food.

Since the Act came into force an inspection of all food shops in the Borough has been undertaken and any structural alterations or improvements which have been regarded as necessary in such premises have been required by the Council to be carried out before registration is granted.

The register of such premises is kept in five parts, and the numbers in each part at the end of the year, were as set out below:—

(a) Sale, manufacture or storage of Ice Cream	...	...	...	...	195
(b) Manufacture of Sausages	...	...	...	...	77
(c) Preparation or manufacture of Potted, Pressed, Pickled or Preserved Meat	...	...	...	...	93
(d) Preparation or manufacture of Potted, Pressed, Pickled or Preserved Fish	...	...	...	...	32
(e) Preparation or manufacture of Potted, Pressed, Pickled or Preserved other foods	...	...	...	...	4

The total number of inspections made was 968.

Inspection of Food Premises.—In addition to the premises dealt with above registers of other food premises in the Borough are kept, and Table No. 23, shows the number of inspections made in respect of each of these during the year :—

TABLE No. 23.

Premises.	On Register 31st December.	Number of		Legal Proceedings.
		Inspections.	Notices.	
Bakehouses	35	93	10	—
Cowsheds	8	86	3	—
Dairies	77	254	2	—
Slaughterhouses... ..	4	27	5	—
Fried Fish Shops	62	311	11	—
Butchers' Shops	108	133	8	—
Premises where food is prepared (other than above)	66	70	—	—
Shops and Markets	—	1,312	3	—

MILK SUPPLY.—The Borough Council is required to keep registers of all persons carrying on in the Borough the trade of cowkeeper or dairyman, and of all premises in the Borough which are used as dairies. The following Table No. 24 shows the state of the registers at the end of the year :—

TABLE No. 24.

	No.
Dairy premises	77
Dairymen with premises in Borough	49
" " outside Borough	39
Cowkeepers	2
Cowsheds	8
Purveyors of milk in sealed bottles	145

The standard of cleanliness in cowsheds and dairies and in other premises where milk is sold has been maintained at a high level.

The cowsheds in the Borough at the end of the year were as set out in the following Table No. 25.

TABLE No. 25.

<i>Situation of Cowhouse.</i>	<i>No. of Sheds.</i>	<i>No. of Cows.</i>	<i>Licencee.</i>
Avery Hill Farm, Eltham ...	3	69	W. F. Fisher.
Coldharbour Farm, Eltham ...	2	88	C. U. Fisher.
Chapel Farm, Eltham ...	3	59	C. U. Fisher.

Eleven samples of raw milk were bacteriologically examined during the year. The results are shown below. *Bacillus Coli* was present in all these samples except those marked with an asterisk :—

					Bacteria per 1 c.c.	
January	...	...	...	...	16,666*	17,666
February	...	...	...	...	117,666	80,000*
March	...	...	...	...	17,200	—
May	...	...	...	...	38,333	77,000
July	...	...	...	...	8,200,000	14,800,000
September	...	...	...	...	78,666	27,666*

Designated Milks.—Under the Milk (Special Designations) Order, 1923, the Council are authorised to grant licences to persons other than a producer to sell milk under special designations. Each licence automatically terminates on the last day of the year in which it is issued. In tabular form is shown below certain information relating to this Order :—

Number of pasteurisers' licences issued 2

Number of dealers' licences issued to use the designation :—

(a) " Certified "	5
(b) " Grade A (Tuberculin Tested) "	7
(c) " Grade A (Pasteurised) "	13
(d) " Pasteurised "	14

Number of supplementary licences issued to sell :—

(a) " Certified " milk	2
(b) " Grade A (Tuberculin Tested) " milk	3
(c) " Grade A (Pasteurised) " milk	2
(d) " Pasteurised " milk	8

Thirty-eight samples of pasteurised milk were bacteriologically examined during the year, including milk supplied to hospitals and schools in the Borough. The results of the examinations are shown below. Such milk must not contain more than 100,000 bacteria per cubic centimetre.

			Bacteria per 1 c.c.		
January	...	27,000*	1,500	—	—
February	...	15,800	2,500	—	—
March	...	15,000*	4,700	—	—
April	...	4,800	2,700	—	—
May	...	10,433	6,066	5,200	30,000*
July	...	3,400	4,600	14,833	—
September	...	5,200	7,000	4,200	3,700
		49,000*	24,000	—	—
October	...	212,000*	2,600,000*	36,000*	124,000*
November	...	920	730	94,000	57,000*
December	...	16,800*	8,600*	11,200*	23,000*
		222,000*	318,000*	98,000	102,000
		320,000			

Bacillus Coli was present in those samples marked with an asterisk.

Dried and Condensed Milks.—Seven samples of condensed milk and five samples of dried milk were examined. The appropriate Regulations were being complied with in every respect.

Artificial Cream Act, 1929.—This Act has for its object the regulation of the manufacture and sale of artificial cream.

The Council are required to keep a register of all premises where artificial cream is manufactured, sold, exposed or kept for sale. No premises are registered in this Borough.

MEAT SUPPLY.—Notice of intention to slaughter any animal must be given to the Council in accordance with the provisions of the Public Health (Meat) Regulations, 1924.

The following Table, No. 26, shows the number of animals slaughtered and inspected in the Borough during the year. In 1933 the number was 38,763.

TABLE No. 26.

Month.	Cattle.	Sheep and Lambs.	Pigs.	Calves.	Total.
January	231	1,913	2,012	—	4,156
February	199	1,258	1,774	1	3,232
March	239	1,409	1,695	—	3,343
April	201	1,637	1,328	1	3,167
May	204	1,906	439	70	2,619
June	208	1,751	94	35	2,088
July	186	1,950	30	—	2,166
August	222	1,913	237	—	2,372
September	234	1,657	1,439	1	3,331
October... ..	266	1,750	1,923	—	3,939
November	288	1,391	1,898	—	3,577
December	246	1,259	2,099	—	3,604
	2,724	19,794	14,968	108	37,594

The number of whole carcasses condemned on account of disease or injury was 54 (44 pigs, 7 sheep and 3 cattle). In 2,330 instances partial condemnation was necessary in respect of 1,965 pigs, 41 sheep and 324 cattle.

Slaughter of Animals Act, 1933.—This Act, which deals with the humane slaughter of animals, came into force on the 1st January, 1934. It conferred new powers on local authorities and imposed new duties upon them as well as upon persons carrying on slaughterhouses and knackers' yards.

The subject matter of the Act is not, however, new to local authorities as there is already a statutory duty to make by-laws for preventing cruelty in slaughterhouses. In London, the London County Council had, by their by-laws, required the use of mechanical stunning instruments for all animals (except in the case of animals killed according to the Jewish method of slaughtering) and this is the central requirement of the new Act.

The Act requires that animals in slaughterhouses and knackers' yards are to be stunned before slaughter, and that the stunning shall be by a mechanically operated instrument which is defined to include an electrical instrument. This does not apply to sheep unless the local authority apply it by resolution, while goats

may be excluded by resolution. The requirement applies to pigs, but if electrical energy is not available this is a defence to proceedings unless it can be shown by the prosecution that electricity can reasonably be made available. Provision is made for slaughtering by Jews or Mohammedans for their co-religionists. In accordance with the provisions of Section 2, the Council at their meeting on the 3rd January, 1934, resolved that Section 1 should, on and from the 1st February, 1934, apply to sheep, ewes, wethers, rams and lambs, and they decided not to pass a resolution exempting goats or kids.

The Act places on local authorities a new duty, that of licensing slaughtermen, and licences once granted are available throughout England and Wales. In this matter the Council decided as follows:—

- (a) That licences for slaughtermen be for a period not exceeding one year, and shall expire on the same day that slaughterhouse licences expire ;
- (b) That renewals be for a period of one year ;
- (c) That a charge of two shillings be made for each original licence ;
- (d) That a charge of one shilling be made for each renewal.

The number so licensed during the year was nineteen.

The Act gives statutory force to requirements for slaughterhouses and knackers' yards most of which, apart from slight differences, have long been normal in the by-laws of local authorities in respect of slaughterhouses, and they also give the right of inspection to the Medical Officer of Health or Sanitary Inspector at any time when business is or appears to be in progress, or is usually carried on.

Slaughterhouses.—There is no public slaughterhouse in the Borough. Slaughterhouses are subject to annual licence and in Table No. 27, which follows, are shown those licensed at the end of the year.

TABLE No. 27.

<i>Situation of Slaughterhouse.</i>				<i>Owner.</i>
Bostall Farm, Abbey Wood	...	...	...	Royal Arsenal Co-operative Society, Ltd.
14, Church Street	...	...	...	Portlock, T. W.
33, Herbert Road	...	...	...	Anderson, F.
38, Plumstead Common Road	...	...	...	Reed, A. J.

Inspection of Imported Meat.—In Woolwich, as in other parts of the country, much imported meat is sold. In the usual way this meat comes from the London markets after inspection, and such inspection as it receives in Woolwich takes place in the butchers' shops where it is exposed for sale. Occasionally, however, the Port of London Sanitary Authority allows foreign meat to be removed from the Port of London without examination on the understanding that:—(a) the meat shall be

taken to a wholesale depot ; (b) none of it shall be removed without the permission of the local Medical Officer of Health ; and (c) the consignees shall give the Medical Officer of Health notice as soon as the meat is received at the depot. Guarantees are obtained by the Port of London Authority before such permission is given. During the year, however, no such meat was inspected.

OTHER FOOD PREMISES.—As a matter of routine a number of food premises, including eating houses, coffee stalls, butchers' shops and restaurants, are visited each week by the Food Inspector, and immediate action is taken in regard to any insanitary condition found. In addition, 1,312 visits were made to shops and to stalls in the markets.

Bakehouses.—There were, at the end of the year, 35 bakehouses in the Borough, of which 30 were factory and 8 underground. The inspections numbered 93, and 10 notices were served. The conditions on the whole were satisfactory.

UNSOUND FOOD.—There were 337 instances of unsound food being surrendered. These compare with 574 in 1933. Included in the food surrendered were :—1 ton 11 cwts. Beef ; 1 cwt. Mutton ; 3 tons 5 cwts. Pork ; 1 ton 2 cwts. Pig Offal ; 19 cwts. Ox Livers ; 4 cwts. Ox Lungs ; $1\frac{1}{2}$ cwts. Sheeps' Offal ; 1 cwt. Fish ; 80 lbs. Veal ; $1\frac{3}{4}$ cwts. Sweets ; 2 cwts. Flour, and 50 Rabbits.

Only one seizure was made (15 lbs. of sweets) and on the instructions of the Public Health Committee a cautionary letter was sent by the Town Clerk.

MERCHANDISE MARKS Act, 1926.—Under the provisions of Section 9 of the above Act, Food and Drugs Authorities have power to execute any of the provisions of the Act, other than those relating to importation, in respect of foodstuffs which are subject to an Order in Council made under the Act. The Orders which so far have been made are as follows :—

The Merchandise Marks (Imported Goods)				
No. 3 Order, 1928	...	...	...	Honey ; Fresh Apples.
The Merchandise Marks (Imported Goods)				
No. 5 Order, 1928	...	...	...	Currants ; Sultanas ; Raisins ; Eggs in Shell ; Dried Eggs ; Oat Products.
The Merchandise Marks (Imported Goods)				
No. 4 Order, 1929	...	...	...	Raw Tomatoes.
The Merchandise Marks (Imported Goods)				
No. 5 Order, 1930	...	...	...	Malt Products.
The Merchandise Marks (Imported Goods)				
No. 8 Order, 1931	...	...	...	Salmon and Trout.

The Merchandise Marks (Imported Goods)			
No. 1 Order, 1932	...	...	Butter.
The Merchandise Marks (Imported Goods)			
No. 3 Order, 1934	...	...	Bacon and Ham.
The Merchandise Marks (Imported Goods)			
No. 5 Order, 1934	...	...	Dead Poultry.
The Merchandise Marks (Imported Goods)			
No. 6 Order, 1934	...	...	Maize Starch.
The Merchandise Marks (Imported Goods)			
No. 7 Order, 1934	...	...	Meat.

These Orders prohibit the sale, or exposure for sale, respectively, in the United Kingdom, of the products mentioned above, unless the goods bear an indication of the country of origin. The term "sale" includes sale, wholesale, or sale by retail; and exposure for sale includes exposure for sale, wholesale, and exposure for sale by retail. As a general rule imported produce does not require marking when sold in quantities not exceeding 14 lbs. in weight.

AGRICULTURAL PRODUCE (GRADING AND MARKING) ACTS.—These Acts empower the Minister of Agriculture and Fisheries to make Orders for the grading and marking of agricultural produce. One mark—the National Mark—is used, or will be used, for all graded produce of England and Wales, and by law it conveys a guarantee that the produce is of the grade stated. It is not compulsory for all such food stuffs to be so marked, but, if marked, they must conform to the standard.

In London the local authority is the Metropolitan Borough Council concerned, and in Woolwich the Medical Officer of Health, the Chief Sanitary Inspector and three Sanitary Inspectors have been appointed Officers under the Act.

The following is a list of products regarding which Regulations were in force on the 31st December, 1934 :—

<i>Date of Regulations.</i>			<i>Produce.</i>
1929	...	...	Potatoes.
1930	...	...	Eggs ; Glass-house grown Tomatoes and Cucumbers ; Strawberries ; Cherries.
1931	...	...	Beef.
1932	...	...	Cider ; Bottled Vegetables ; Plums.
1933	...	...	Apples ; Wheat Flour ; Malt Extract and Malt Flour ; Dressed Poultry ; Bottled Fruits ; Cabbage Lettuce ; Blackcurrants ; Gooseberries ; Loganberries ; Raspberries ; Red Currants ; Cheshire Cheese ; Green Peas ; Brussels Sprouts ; Celery ; Pears.

Date of Regulations.

1934

...

...

Produce.

Cauliflower and Broccoli ; Canned Fruits ; Canned Vegetables ; Honey ; Asparagus ; Jam ; Carrots ; Leeks ; Radishes ; Red Beet ; Cabbage Greens and Cabbage ; Salad (Spring) Onions ; Parsnips ; Ripe Onions and Shallots ; Turnips and Swedes ; Watercress ; Horseradish ; Kidney and Runner Beans ; Mushrooms ; Forced Rhubarb ; Natural Rhubarb ; Stilton Cheese ; Hot House Grapes.

During the year Regulations affecting Canned Vegetables (1931), Honey (1932), Cauliflower and Broccoli, Canned Fruits, Asparagus, Jam, and Bunched Carrots (1933), were revoked and the Regulations affecting Bottled Fruits were amended.

No offences were discovered during the year.

SOPHISTICATION OF FOOD.—The following Table No. 28, gives details of the various analyses made under the Food and Drugs (Adulteration) Act, Public Health (Condensed Milk) Regulations, Public Health (Dried Milk) Regulations and the Public Health (Preservatives, etc., in Food) Regulations.

TABLE No. 28.

Article.	Formal Samples.	Informal Samples.	Number Analysed.	Number Adulterated.
Milk	203	34	237	7
Separated Milk	1	—	1	—
Cream	—	12	12	—
Condensed Milk	—	7	7	—
Dried Milk	5	—	5	—
Butter	3	14	17	1
Margarine	—	3	3	—
Lard	—	3	3	—
Suet... ..	—	4	4	—
Tea	—	2	2	—
Cocoa	—	2	2	—
Coffee	—	3	3	—
Flour	—	1	1	—
Baking Powder	—	3	3	—
Cornflour	—	1	1	—

TABLE No. 28—*continued.*

Article.	Formal Samples.	Informal Samples.	Number Analysed.	Number Adulterated.
Custard Powder	—	3	3	—
Rice... ..	—	3	3	—
Sago	—	3	3	—
Sage... ..	—	2	2	—
Seasoning	—	1	1	—
Dried Fruit	—	6	6	—
Currants	—	1	1	—
Sultanas	—	6	6	—
Raisins	—	5	5	—
Prunes	—	4	4	—
Glacè Cherries	—	2	2	—
Candied Peel	—	4	4	—
Ground Almonds	—	4	4	—
Almond Essence	—	2	2	—
Sugar	—	7	7	—
Jam... ..	4	19	23	3
Ginger	—	2	2	—
Preserved Ginger	—	2	2	—
Mincemeat	—	3	3	—
Mace	—	1	1	—
Dried Mint... ..	—	5	5	—
Sauce	—	8	8	—
Pickles	—	5	5	—
Vinegar	—	13	13	—
Salad Cream	—	4	4	—
Tinned Beans	—	1	1	—
„ Peas	—	1	1	—
„ Potatoes	—	1	1	—
„ Tomatoes	—	3	3	—
„ Beetroot	—	1	1	—
„ Cherries	—	1	1	—

TABLE No. 28—*continued.*

Article.	Formal Samples.	Informal Samples.	Number Analysed.	Number Adulterated.
Tinned Figs	—	1	1	—
" Grape Fruit	—	1	1	—
" Loganberries	—	1	1	—
" Plums	—	2	2	—
" Pears	—	2	2	—
" Gooseberries	—	2	2	—
" Fruit Salad	—	1	1	—
" Fish	1	13	14	4
Ox Tongue... ..	—	1	1	—
Minced Beef	5	4	9	2
Minced Meat	4	—	4	—
Meat Roll	—	1	1	—
Sausages	4	3	7	—
Steak and Kidney	—	2	2	—
Fish	10	—	10	—
Confectionery	—	13	13	—
Ice Cream	4	2	6	—
Lemonade Crystals	—	4	4	—
Sherbert	—	1	1	1
Lemon Gin... ..	1	—	1	—
Lime Juice Cordial	—	1	1	—
Mineral Waters	—	4	4	—
Cream Filled Pastries	—	2	2	1
Non-alcoholic Wines	—	2	2	—
Beer... ..	—	7	7	—
Brandy	5	—	5	—
Gin	5	—	5	—
Whisky	11	—	11	2
Solution of Hydrogen Peroxide...	—	3	3	—
Ammoniated Tincture of Quinine	—	2	2	—
Cod Liver Oil	—	3	3	—

TABLE No. 28—*continued.*

Article.	Formal Samples.	Informal Samples.	Number Analysed.	Number Adulterated.
Camphorated Oil	—	3	3	—
Formalin	—	3	3	—
Lime Water	—	2	2	1
Phenacetin Tablets	—	2	2	—
Seidlitz Powders	—	3	3	—
Tincture of Iodine	—	6	6	—
	266	310	576	22

The Public Analyst has furnished the following figures showing the percentages of fat found in each sample of milk submitted for analysis during the last three years :—

TABLE No. 29.

	1932	1933	1934
4·5 per cent. and over	3	4	7
4 per cent. and under 4·5 per cent. ...	12	8	9
3·5 per cent. and under 4 per cent. ...	121	116	88
3 per cent. and under 3·5 per cent. ...	68	124	128
Below 3 per cent.	7	3	5
	<u>211</u>	<u>255</u>	<u>237</u>

ADULTERATED SAMPLES—ACTION TAKEN.—The following Table No. 30, shows the number of adulterated samples and the action taken in each instance where the sample was formal :—

TABLE No. 30.

Sample No.	Article.	Formal or Informal.	Result of Analysis.	Result of Legal Proceedings or other Action.
451	Blackcurrant Jam	Informal	Contained only 14 per cent. fruit instead of 30 per cent.	—
453	Blackcurrant Jam	Informal	Contained about 23 per cent. fruit instead of 30 per cent.	—

TABLE No. 30—*continued.*

Sample No.	Article.	Formal or Informal.	Result of Analysis.	Result of Legal Proceedings or other Action.
480	Milk	Formal	Contained 1 per cent. added water	—
508	Milk	Formal	8 per cent. deficient in fat ...	Fined £3 and £6 6s. costs.
513	Milk	Formal	31 per cent. added water ...	Fined £1 and 10s. 6d costs.
514	Milk	Formal	1 per cent. added water ...	—
515	Milk	Formal	Small percentage water ...	—
524	Sardines ...	Informal	Contained lead 43 parts per million	—
545	Sardines ...	Formal	Contained lead 20 parts per million	—
565	Milk	Formal	1 per cent. deficient in fat ...	—
591	Whisky ...	Formal	2·3 per cent. excess water ...	—
1	Milk	Informal	11 per cent. deficient in fat...	—
44	Strawberry Jam	Informal	Contained only 25 per cent. fruit instead of 42 per cent.	—
64	Minced Beef ...	Formal	Contained sulphur dioxide 260 parts per million	Vendor cautioned.
131	Whisky ...	Formal	Contained 3 per cent. excess water	Vendor cautioned.
133	Sardines ...	Informal	Contained lead 15 parts per million	—
135	Sardines ...	Informal	Contained lead 16 parts per million	—
194	Cream Pastry...	Informal	Contained no cream... ..	—
200	Sherbert ...	Informal	Only tartaric acid and sugar	—
243	Butter ...	Informal	Contained 16·3 per cent. water	—
248	Minced Beef ...	Formal	Contained sulphur dioxide 95 parts per million	—
406	Lime Water ...	Informal	Contained chlorides ·0033 per cent.	—

FOOD POISONING.—The London County Council (General Powers) Act, 1932, requires every medical practitioner in London to notify to the Medical Officer of Health every person whom he suspects or finds to be suffering from food poisoning.

In his certificate he must state the name, age and sex of the person, the full postal address and particulars of the food poisoning from which the person is suffering or suspected to be suffering.

The number of notifications received during the year was 37. With two exceptions, where two persons and three persons respectively were involved, these were all single cases.

The age and sex distribution of the cases notified is shown in the following Table, No. 31 :—

TABLE No. 31.

Cases of Food Poisoning Notified during 1934 :—

Age Periods.	Male.	Female.	Total.
Under 1	—	—	—
1 and under 5	3	—	3
5 and under 10	2	—	2
10 and under 15	2	1	3
15 and under 20	2	1	3
20 and under 35	7	7	14
35 and under 45	3	1	4
45 and under 65	3	5	8
65 and over... ..	—	—	—
	22	15	37

The medical practitioner notifying is required to state on his certificate the food he suspects. In 14 instances meat, in one or other form—pork, rabbit, sausage, beef, minced ham, meat pie, etc.—was suspected; in 11 instances fish—fresh, fried or tinned; in 6 instances fruit—fresh or tinned; in 3 instances ice cream; in 1 instance cream; in 1 instance fried chip potatoes, and in 1 instance mincemeat. Most of the cases were slight in character and there were no deaths.

NUTRITION.—Dissemination of knowledge and instruction on matters affecting nutrition is part of the Council's general scheme of health propaganda, *q.v.*

As part of the Council's scheme for Health Propaganda, cookery demonstration classes were arranged at the Tuberculosis Dispensary for the instruction of the wives and mothers of the tuberculous in the buying and cooking of simple, cheap and nutritious articles of food and the preparation of suitable dishes. These classes were well attended. The scheme is more fully reported on in the Health Propaganda Section.

BY-LAWS.—The power was given to the London County Council in the General Powers Act, 1932, to make by-laws with regard to food premises. Draft by-laws have been prepared by that Council and have been considered by the Metropolitan Borough Councils, who have submitted observations thereon, but there the matter rests at present.

SECTION VI.—HOUSING.

The following Table shows the main housing figures for the year set out under the headings given in Circular 1,417, issued by the Ministry of Health for securing uniformity in the presentation of these statistics.

TABLE No. 32.

1.—Inspection of Dwelling Houses during the Year.

(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	5,873
Inspections made	...	...	...	...	...	...	...	13,816
(2) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing (Consolidated) Regulations, 1925	...	...	...	...	...	...	...	772
Inspections made	...	...	...	...	...	...	...	2,218
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	...	...	...	54
(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	...	...	...	...	...	...	...	2,434

*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	1,988
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* Includes intimation notices.

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	2
---	-----	-----	-----	-----	-----	-----	---

(2) Number of dwelling houses which were rendered fit after service of formal notice :—

(a) By Owners 1

(b) By Local Authority in default of owners —

(b) Proceedings under the Public Health Acts :—

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied 379

(2) Number of dwelling houses in which defects were remedied after service of formal notices :—

(a) By Owners 356

(b) By Local Authority in default of owners —

(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 5

(2) Number of dwelling houses demolished in pursuance of Demolition Orders 4

(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 8

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

INSPECTION OF HOUSES.—The systematic inspection of houses in the district in accordance with the provisions of the Housing (Consolidated) Regulations, 1925, was carried on during the year and 772 houses were so surveyed. These figures are smaller than in previous years owing to the fact that one Sanitary Inspector was seconded for special survey of the Borough in connection with unhealthy areas and in systematically reporting on houses which might be so dealt with.

In tabular form, Table No. 33, is shown a detailed statement of specific action (except action taken in respect of clearance areas) taken under the Housing Acts during the year.

TABLE No. 33.
Action under the Housing Acts.

Premises.	Action Taken.	Date.
*Woolwich Common, 35	Closing Order	3rd January.
*Rectory Place, 21	do.	31st January.
Church Street, 30	Undertaking to recondition house accepted	19th April.
Elibank Road, 49A	Demolition Order	2nd May.
*Woolwich Common, 25	Closing Order	6th June.
* do. 27	do.	5th July.
* do. 43	do.	do.
* do. 48	do.	do.
Woolwich High Street, 54	Representation	12th September.
do. 55	do.	do.
do. 56	do.	do.
do. 56A	do.	do.
do. 80	Demolition Order	7th November.
*Woolwich Common, 1	Closing Order	do.
* do. 1	do.	do.
†Nightingale Place, 1	do.	do.
Eltham High Street, 26	Demolition Order	do.
do. 28	do.	do.
Anglesea Avenue, 5	Notice under Section 17	do.
do. 6	Demolition Order	5th December.
Ann Street, 3	Representation	do.
do. 5	do.	do.
do. 7	do.	do.
do. 9	do.	do.
do. 39	do.	do.
Dumblane Road, 13	do.	do.
Katrine Terrace, 2	do.	do.
Prospect Row, 24	do.	do.
Brookhill Road, 52	Notice under Section 17	do.

* Underground rooms.

† Part of a house.

CLEARANCE AREAS.—The following unhealthy areas were dealt with as clearance areas by the Council during the year :—

(1) *Shepherds Farm Hutments*.—These hutments were represented by me as an unhealthy area in November, 1933. There were 67 dwelling houses and the number of occupants was 311.

There was no local inquiry and the Clearance Order was confirmed by the Minister on the 24th April, 1934.

At the end of the year 20 hutments had been demolished, 108 persons being displaced. Re-housing is being provided partly on the site of the hutments and partly on an adjoining portion of the Page Estate.

The hutments included in the representation were as follows :—

Ashwood Road ...	...	Nos. 1 and 3.
Barleycorn Street	...	Nos. 3A, 5, 5A, 7, 7A, 9, 9A. Nos. 8, 10 and 12.
Bilberry Road ...	...	Nos. 4, 6, 8, 10, 14, 16. Nos. 1, 3, 5, 9, 11, 15, 17, 19, 21, 23, 25 and 27.
Elderberry Road	...	Nos. 1, 3, 5. Nos. 2, 4, 6, 8, 10 and 12.
Elmbrook Street	...	Nos. 1, 3, 5A, 7, 9, 11, 13 and 15. Nos. 2, 4, 6, 8, 10 and 12.
Marlfield Road ...	...	Nos. 2, 4, 9, 11.
Rochester Way	...	Nos. 449, 451, 453 and 455.
Well Hall Road	...	Nos. 87, 89, 91, 93, 95 and 97.

(2) *Prospect Row and Kidd Street Clearance Area*.—On the 14th June, 1934, I represented this area, consisting of nine cottages, as an unhealthy area. The cottages in question are known as Prospect Row Cottages, Nos. 1, 2, 3, 4, 5 and 6, and Kidd Street, Nos. 45, 47 and 49. The number of occupants was 36.

The Council made a Clearance Order on the 25th September; a Ministry of Health inquiry was held on the 6th November and the Clearance Order was confirmed by the Minister, without modification, under date 9th January, 1935.

Re-housing is to be provided in the same area as for No. 1.

(3) *St. Thomas' Cottages*.—On the 14th June, 1934, I represented this area, consisting of eight cottages, as an unhealthy area. The number of occupants was 13. The Council made a Clearance Order on the 25th September; a Ministry of Health

inquiry was held on the 6th November and the order was confirmed by the Minister, without modification, under date, 9th January, 1935.

Re-housing is to be provided in the same area as for No. 1.

(4) *Kirks Yard and Eltham High Street Area*.—This area, consisting of 14 houses, was represented by me to the Council as an unhealthy area on the 14th June, 1934. The houses included in the area were as follows:—

Eltham High Street	...	Nos. 8, 10, 12, 14, 16, 18 and 20.
Kirks Yard	... ..	Nos. 1, 2, 3 and 4A.
Halams Cottages	...	Nos. 1, 2 and 3.

The number of occupants was 46.

No inquiry had been made at the end of the year.

Re-housing is to be provided in the same scheme as for Area No. 1.

There are several other smaller areas which will be required to be dealt with in a similar way as part of the five years programme and there are larger areas in the Borough which no doubt will be dealt with by the London County Council in the course of a year or two.

ELTHAM HUTMENTS—SCHEME FOR RE-HOUSING OF TENANTS.—For a long time the Borough Council have been seriously concerned with the position of the hutments in Eltham which were erected by the Government in the early part of the war for the purpose of housing munition workers in Woolwich Arsenal, and consultations were held with the London County Council as to the best method of dealing with these hutments, which were fast becoming unfit for human habitation, and the re-housing of the tenants.

After conference with the London County Council and the owners of the hutment areas to whom the Government had sold, and also with the Tenants' Association, a scheme was agreed under which the Borough Council are to erect on a portion of their Middle Park Estate houses and flats for the re-housing of the hutment tenants, the owners agreeing to pay to the Borough Council a sum of £10 per hutment where the occupier was re-housed by the Council. The London County Council agreed to contribute a sum of £1 17s. 6d. per dwelling per annum for 40 years and the Borough Council agreed to make a like contribution, this involving both the London County Council and the Borough Council in an estimated contribution of £858 15s. 0d. per annum for 40 years.

At the meeting on the 28th March, 1934, the Borough Council considered a full report from the Housing Committee, and they approved the scheme and decided to

erect as a first instalment 458 dwellings (houses and flats) at an estimated cost of £155,300, the necessary road and sewer work in connection with the scheme being estimated to cost £22,430; the dwellings and the roads and sewers were to be constructed by direct labour under the supervision of the Borough Engineer.

The first of the dwellings were ready for occupation on the 1st September, 1934.

It is confidently expected that the scheme now in operation will prove a satisfactory solution of the difficulty.

COUNCIL'S HOUSES.—During the year the Council erected 360 houses, 20 on the Page Estate and 340 on the Middle Park Estate. At the end of the year 246 houses were in course of erection on the Middle Park Estate, and 32 on the Page Estate.

OVERCROWDING.—Early in 1935 the Registrar General issued a special report on housing conditions compiled from information obtained by the Census of 1931. It is particularly opportune at the present time in view of the Housing (Overcrowding) Bill now before Parliament. I have extracted from this report information which is likely to be of interest to the Council as it sets out to some extent the problem of the less favourably housed sections of the community.

(A) *Dwellings originally intended for one family which are now shared.*

The following tabular statement shows to what extent dwellings originally intended for one family are now occupied by two or more :—

Number of dwellings in England and Wales occupied by private families								9,123,279
Number of these shared by two or more families								838,695
Percentage so shared								9·19
Number of dwellings in London occupied by private families								730,628
Number of these shared by two or more families								293,303
Percentage so shared								40·14
Number of dwellings in Woolwich occupied by private families								29,870
Number of these shared by two or more families								7,303
Percentage so shared								24·45

Expressed in another way, there were approximately ten and a quarter million families in England and Wales; the number of families in excess of separate dwellings was just over eleven hundred thousand. In London there were 1,190,030 private families or 459,402 families in excess of separate dwellings. In Woolwich there were 38,176 private families and 8,306 families in excess of separate dwellings.

In considering these figures it is important to remember that, for Census purposes, a family is a person or group of persons included in a Census schedule so that it includes such persons as lodgers or caretakers. In Woolwich there were 2,930 families consisting of one person and a deduction should be made in this respect.

(B) *Density of Population.*

For many years one of the accepted standards of overcrowding has been what is known as the Registrar General's Standard of more than two persons per room. It has never been looked on as an absolute standard but merely as a convenient measure for comparing density of population in a neighbourhood. The following tabular statement shows to what extent certain densities of persons per room exist :—

Number of persons living more than three persons per room in							
England and Wales	...	...	...	...	...	...	565,869
Percentage so living	...	...	...	...	...	...	1.48
Number of persons living more than three persons per room in							
London	...	...	...	...	...	...	150,130
Percentage so living	...	...	...	...	...	...	3.64
Number of persons living more than three persons per room in							
Woolwich	...	...	...	...	...	...	1,431
Percentage so living	...	...	...	...	...	...	1.04
Number of persons living at a density of three and over two persons							
per room in England and Wales	...	...	...	...	...	...	2,074,325
Percentage so living	...	...	...	...	...	...	5.45
Number of persons living at a density of three and over two persons							
in London	...	...	...	...	...	...	391,222
Percentage so living	...	...	...	...	...	...	9.49
Number of persons living at a density of three and over two persons							
per room in Woolwich	...	...	...	...	...	...	6,378
Percentage so living	...	...	...	...	...	...	4.62
Number of persons living at a density of two and over one and a half							
persons per room in England and Wales	...	...	...	...	...	...	4,446,940
Percentage so living	...	...	...	...	...	...	11.68
Number of persons living at a density of two and over one and a half							
persons per room in London	...	...	...	...	...	...	665,542
Percentage so living	...	...	...	...	...	...	16.14
Number of persons living at a density of two and over one and a half							
persons per room in Woolwich	...	...	...	...	...	...	16,210
Percentage so living	...	...	...	...	...	...	11.75

It is more useful to consider this in terms of families rather than of individuals. In Woolwich 237 families were living at a greater density than three persons per room ; 1,010 families at more than two but not more than three persons per room, and 2,928 families at more than one-and-a-half but not more than two per room. A further 6,398 families were living at more than one but not more than one-and-a-half per room. Expressed per thousand private families, these figures become 6, 26, 77 and 168 respectively. The corresponding figures for London Administrative County are 20, 56, 119 and 162.

COMMON LODGING HOUSES.—These are licensed annually by the Borough Council in accordance with the provisions of the Transfer of Powers Order, 1933. The number of inspections made during the year was 152. The following Table No. 34, shows details of the accommodation available in each common lodging house in the Borough :—

TABLE No. 34.

<i>Premises.</i>	<i>Accommodation Men.</i>
60, Beresford Street	50
50, Woolwich High Street	22
93, Woolwich High Street	24
102, Woolwich High Street	22
4, Rope Yard Rails	15
7, Rope Yard Rails	24
10, Rope Yard Rails	51
10A and 11, Rope Yard Rails	62
21 and 21A Rope Yard Rails	42
	312

INCREASE OF RENT AND MORTGAGE INTEREST (RESTRICTION) ACTS.—Only one application for a certificate under these Acts was received during the year, and this was subsequently withdrawn, the landlord having carried out the necessary work.

TENTS AND VANS.—By-laws regulating the use of these were made by the Council in 1903. All tents and vans (which are few in number) were inspected regularly and steps were taken to ensure that the by-laws were being observed. The total number of inspections made was 60.

HOUSES LET IN LODGINGS.—No register is now kept of houses let in lodgings but as the records of this Department in respect of individual houses are kept on cards, such houses are kept prominently before the district sanitary inspectors by means of "signals" on the cards which serve as reminders to the inspectors that they are dealing with houses that would formerly have been registered. During the year 702 inspections of such houses were made.

NEW HOUSES.—The following Table No. 35, shows the number of certificates of a proper and sufficient supply of water for new houses granted by the Public Health Committee at each of their meetings. Of these, 386 were in respect of houses built by the Council.

TABLE No. 35.

Date of Meeting.	Woolwich.	Plumstead.		Eltham.	Total.
		West.	East.		
10th January	—	4	23	75	102
7th February	—	54	25	30	109
1st March	—	42	24	93	159
11th April	—	70	34	83	187
9th May	—	39	28	115	182
13th June	4	66	29	90	189
5th July	—	54	26	26	106
25th July	—	1	13	16	30
12th September	—	28	72	125	225
10th October	2	12	27	30	71
6th November	—	5	22	48	75
5th December	—	15	34	143	192
	6	390	357	874	1,627

BUG INFESTATION OF HOUSES.—The Council's obligations with regard to bug-infested premises and the experience they have gained in their new housing estates in dealing with the problem, have already been dealt with in my last two Annual

Reports. How the campaign against the beg-bug progressed during 1934 may be conveniently considered now under several heads :—

(I) Variations in Routine Methods—

(a) *The Disinfestation of Occupied Houses in Private Ownership.*—The routine method of disinfestation by sulphur dioxide followed in these cases was described fully in my Annual Report for 1932 and no modification other than those referred to in my Annual Report for 1933 took place during the year. The number of rooms so disinfested during the year was 736.

(b) *Occupied Houses belonging to the Council.*—The same method of disinfestation was followed in practically all cases but in one particularly intractable infestation of a block of four houses temporary shelter was found for the occupiers for two nights while the whole block was successfully treated with Cyanide (Zyklon B). Excluding this block the number of rooms so disinfested during the year was 220.

(c) *Unoccupied Houses belonging to the Council.*—The routine method followed in these cases was spraying with orthodichlorobenzene. At the beginning of the year this chemical was used undiluted but latterly mixtures of orthodichlorobenzene and other chemicals of different strengths were experimented with, e.g., carbon tetrachloride, methylated spirit and paraffin, in half and quarter strengths. The number of rooms so treated was 415.

(d) *Transfer of Bug-infested Tenants to New Houses on the Council's Estates.*—From the beginning of April the routine method of disinfestation was by means of cyanide (Zyklon B), in hired furniture vans, but in a few instances bug infested furniture was permitted to be taken to new houses, where it was treated the same night with sulphur dioxide. This method gave satisfactory insecticidal results but unfortunately the effect of sulphur in rooms where the plaster was new caused damage to metal articles, looking glasses and marble slabs, as well as to the plaster itself. For that reason this method which was only used as a temporary expedient was discontinued. The number of instances where cyanide disinfestation was carried out in hired vans was 57 and the number of instances where sulphur was used in new houses was 14.

(e) *Bug Infested Houses in Slum Areas.*—Only a portion of one area was dealt with by the Council during the year. In 1933 I represented an area of some 67 hutments as unfit for human habitation. A Clearance Order was made by the Council and subsequently confirmed by the Minister of Health. As these huts became empty, those which were bug-infested were sprayed through-

out with a mixture of orthodichlorobenzene and carbon tetrachloride, with results which appeared to be highly satisfactory.

Any gaseous disinfectant is unlikely to be satisfactory for use in the disinfestation of a timber framed hut, when the timbers are warped and the inside lining is broken, and it was for that reason that this mixture was used, carbon tetrachloride being extremely toxic to the bed-bug. The number of huts so treated was 7.

(II) Procedure in Routine Disinfestations—

(a) *Sulphur Dioxide*.—More use has been made of this chemical than any other, and the methods used, which briefly can be described as gaseous disinfection plus cleansing, have been successful with one treatment only in 84 per cent. of all cases.

(b) *Orthodichlorobenzene*.—In the report for 1933 I referred to experimental work carried out with this chemical which promised well. Briefly its fumes are so irritating to the bed-bug that it leaves its resting places much in the same way as rabbits are bolted by ferrets. Further experience has shown that ODCB is a valuable adjunct to our armamentarium against the bed-bug. Our knowledge of its efficiency justifies a more detailed scientific investigation of its action as it has been used only in an empirical manner up to now. So far we have only used it in empty houses but it has been used in other areas in occupied rooms as well. The method we have followed is as under :—

(1) Space between floor and skirting, and wall and skirting, are cleared of dust and dirt by putty knife or similar tool ;

(2) Visible openings at architraves and mouldings are enlarged with same knife ;

(3) Built in cupboards especially those next to fireplaces, are carefully inspected and a similar procedure is carried out where this is possible.

(4) Openings are made into any obvious cavities such as window frame pulley boxes, and other cavities such as are sometimes found around chimney breasts between the latter and the trimming and trimmer joists.

(5) The room is now ready for spraying. In doing so the general idea is to endeavour to dislodge the bed-bug from his hiding places by means of the fumes and then to drive him on to an open surface, where he is accessible to orthodichlorobenzene concentration. Following out this idea, the cupboards, the obvious and other cavities, the edges of the architraves and all mouldings, and the floor next the skirtings are sprayed with orthodichlorobenzene. When

bed-bugs are noticed leaving their resting places the disinfectors (who always work in pairs and wear masks), now spray again and finish by spraying the floors, walls and ceilings from below upwards. The room is then sealed up and remains so until the next morning. The amount used has been varied during the year, but on an average one gallon of a mixture has been used for every 700 cubic feet. Failures were recorded in 5 per cent. of all rooms treated.

(c) *Hydrocyanic Acid*.—In December, 1933, Mr. Couch, one of the Council's Sanitary Inspectors, went to Manchester to study the methods of disinfestation followed there and after consideration of his report the Council decided to adopt the following scheme so far as the transfer of bug-infested tenants to the Council's Estates was concerned, since experience had shown that some 40 per cent. of all new tenants selected for transfer to the Council's houses were living in bug-infested premises. The details are as follows :—

(1) The homes of selected tenants are inspected by Mr. Couch who submits one of the following reports to the Housing Department :—(1) Free from bugs ; (2) Bugs suspected or very slight infestation ; (3) Bug infested.

(2) No further action is taken by this Department with regard to those in the first category. Those in the second category are shown how thoroughly to clean their furniture and kill bugs in the structure of the home. They are subsequently re-inspected to see whether they are free from infestation or not : if they are clean no further action is taken by this Department, if not, they are dealt with as in the next class. With regard to the third category, however, the Housing Department notifies the Health Department the date upon which the tenants are being given a new house and arrangements are then made by the Health Department with a contractor for the hire of a pantehnicon and with another contractor for cyanide disinfestation. The cost of removal varies with the number of families moved on a particular day but a uniform payment of 10s. 0d. is made by each tenant towards the cost of removal.

(3) The routine procedure then is as follows :—The furniture van and disinfecting van arrive at the old house at 7.30 a.m. ; all the bedding is taken away by the disinfecting van and treated by steam. Everything else, except food, which the people take themselves, is put into the pantehnicon. The latter is then driven to the Borough Engineer's Yard at Eltham and parked underneath a Dutch barn. The inside of the pantehnicon is then heated to a temperature of between 65° F. and 90° F. by means of electric radiators and the van is then charged with cyanide (Zyklon B). The concentration is between one and two per cent. and the gas is allowed to remain in contact with the furniture for 3½-4 hours. At the end of that time the van is opened and a certain amount of the furniture is taken out, underneath the barn, and steps are taken

to free the articles from Cyanide. Tests are made to ensure that the furniture is free from gas before being removed from the yard. Between 4.30 and 5.0 the same evening the furniture is driven to the new house and the bedding is delivered about the same time. All the hopper windows, ventilators and access doors to roof space are fixed so that they cannot be closed during the first night of occupation. Mr. Couch, in every instance, is satisfied by further tests that the house is safe for occupation before he leaves it.

Cyanide was also used on one occasion for the disinfestation of a block of four houses on the Council's estate and the story of one of these illustrates how difficult disinfestation may be on occasion. This house was treated, either wholly or partially, with sulphur dioxide on six occasions and with orthodichlorobenzene on two occasions. Within 48 hours the bed-bug was seen again after each treatment. Obvious and concealed cavities were exposed and treated but in spite of all these efforts the bed-bug still remained. It became necessary to consider the question of the use of cyanide and as the other three tenants in the block were also infested with bugs in greater or less degree, it was decided to disinfest the whole block.

With the co-operation of the Housing Sub-Committee the four families in the block were accommodated for two nights in four flats, the bedding, etc., being supplied by the Council from existing stores. The premises were sealed up late in the afternoon and were opened about 1.0 o'clock the next morning. On this occasion a successful issue was obtained.

(4) At different times during the year experiments were made with other disinfestants—proprietary and otherwise—with greater or less success. Nothing however, was discovered which justified extensive use.

It is becoming more and more clear that until someone discovers something simpler to use than any of the three mentioned above, consideration must be given to improving the technique in each instance, or reducing the cost. In this connection towards the end of the year the Council decided to establish a Clearing House on the new housing estate in order to deal with blocks already infested from which the bug could not be eradicated by other methods and also to reduce the cost of cyanide disinfestation by eliminating the cost of removals. Under this scheme the prospective tenants who will occupy a complete block of four or six dwellings make their own arrangements for furniture removal to the new houses on a day fixed by the Department. Their furniture is then placed in two rooms in each of the new dwellings in the same block. These rooms are sealed up and used as containers for cyanide. The tenants sleep for two nights in the clearing house where they are provided with bedding, furnishing, light and heating.

(III) Following up after Disinfestations—

No scheme of disinfestation can be regarded as satisfactory until arrangements are made for following up in order to prevent re-infestation arising from any cause, e.g., second-hand furniture ; incomplete success in the first instance ; or sub-letting to a bug-infested family, etc.

As the number of houses requiring supervision was greater than the existing staff of the Council could deal with, the Council decided to appoint an additional woman sanitary inspector for this purpose. The appointment had not been made at the end of the year.

(IV) Limitation of Harborage—

Ordinary methods of house construction provide much harborage for the bed-bug and in some designs of houses it is impossible to eliminate the bed-bug except by using a gas like cyanide, the use of which is cumbersome and troublesome in occupied properties. Consideration was given to this aspect of the problem by the Housing Committee who decided that in the case of cottage flats the first floor should be constructed on the hollow tile principle screeded up in concrete and plastered on the underside according to the method of the Kleine Company ; that concrete skirting with wood beading (three-quarters of an inch), at the joint of the floors and concrete skirting be substituted for the usual wood skirting. They decided also not to have picture rails except in the living rooms, and also to do away with all forms of board construction except where this was floated over with plaster on the under side. So far as applicable this construction is followed also in cottages.

(V) Propaganda against the Bed-bug—

(a) The Council's Health Services booklet contains an article on The Bed-bug and this booklet is given to every tenant entering into occupation of one of the Council's houses.

(b) To every tenant whose furniture is disinfested a letter is sent, incorporating this article which is as follows :—

“ You are now occupying a new house and my Council have done everything in their power to prevent it becoming infested with bugs, which are very prevalent. They have adopted similar precautions with all the other tenants in the area, and are also doing everything they can to keep the houses free from bugs in future. They ask for your co-operation in this matter.

Bugs may be brought into houses in various ways, of which the following are some of the most usual :—

- (a) In furniture and pictures.
- (b) In trunks, boxes and suitcases which have been stored for a time in buggy houses.
- (c) In old wood from a bug-infested building which has been bought for firewood or for other domestic purposes.
- (d) Very rarely by someone having the misfortune to pick up a bug on his or her clothes.

If you are considering buying or accepting furniture for your new house let us know beforehand and we will inspect it and if necessary disinfest it free of charge.

No doubt you are already taking precautions to see that bugs are not introduced into your house, but should you find them or suspect their presence, let us know at once, and we will advise you as to the best means of getting rid of them and will assist you in taking the necessary steps. Remember that bugs dislike cleanliness, and you should therefore keep all parts of your house thoroughly clean.

WE WILL DO ALL WE CAN TO HELP YOU AND WE ASK YOU TO HELP US."

On the Council's estates the percentage of recurrence is about six, which is about one-third that found in the rest of the Borough, but it is an interesting commentary that not on one occasion were we asked to disinfest any second-hand furniture.

(c) Talks on the bed-bug have been included in the series of lectures to organisations.

(d) At the Health Exhibition a bug stall was shown. It is fully described in the Health Propaganda section of the report.

SECTION VII.

PREVALENCE AND CONTROL OF INFECTIOUS DISEASE.

In addition to food poisoning (which is reported on in Section V) the following diseases are notifiable in the Borough :—

Anthrax	Ophthalmia Neonatorum
Cerebro-spinal Meningitis	Pneumonia—Acute Primary
Cholera	Pneumonia—Acute Influenzal
Continued Fever	Poliomyelitis
Diphtheria	Polio-encephalitis
Dysentery	Plague
Encephalitis Lethargica	Puerperal Fever
Erysipelas	Puerperal Pyrexia
Enteric (or Typhoid) Fever	Relapsing Fever
Glanders	Scarlet Fever
Hydrophobia	Smallpox
Malaria	Tuberculosis
Membranous Croup	Typhus Fever
	Zymotic Enteritis

Although notification of an infectious disease in a house is incumbent not only upon the medical practitioner in attendance, but upon the head of the family, or the nearest relative or person in charge of the patient, in actual fact it is a rare thing for a lay notification to be received. If the patient is an inmate of a hospital in most cases the certificate is sent to the Medical Officer of Health of the district in which the normal residence of the patient is situate, but notifications of malaria, dysentery and the acute pneumonias, are always notifiable to the Medical Officer of Health of the District in which the patient is residing at the time he is notified.

In London, the London County Council maintain institutions for the isolation and treatment of the sick suffering from infectious diseases. Cases from Woolwich are usually admitted to the Brook Hospital, Greenwich, or to the Park Hospital, Lewisham, but during times of pressure cases are sent to Joyce Green Hospital, Dartford, or indeed, to any other of the fever hospitals belonging to the London County Council in the County of London.

The less common infectious diseases are admitted to any of the London County Council's infectious disease hospitals, but it is the practice of the County Council to select certain of their hospitals for the treatment of such diseases as puerperal fever, or anterior poliomyelitis, so that special facilities and experience may be available for such cases.

The total number of notifications, excluding cases of tuberculosis, which are dealt with later in this Section, was 1,865, compared with 1,764 in 1933.

In tabular form are shown in the next five Tables, statistics relating to the incidence of infectious disease in the Borough in 1934 and previous years.

TABLE No. 36.

Notification of Infectious Disease (excluding Tuberculosis), 1934.

Diseases.	Total Cases Notified.	Admissions to Hospital.	Total Deaths.
Diphtheria	416	411	11
Scarlet Fever	989	918	3
Enteric Fever (including Para-Typhoid Fever)	8	7	—
Puerperal Fever	5	5	2
Puerperal Pyrexia	30	29	—
Erysipelas	119	62	6
Smallpox	—	—	—
Pneumonia	280	167	126
Malaria	1	1	—
Ophthalmia Neonatorum	7	2	—
Encephalitis Lethargica	—	—	—
Dysentery	—	—	—
Cerebro-spinal Meningitis	4	4	1
Polio-encephalitis	1	1	1
Poliomyelitis	2	2	—
Zymotic Enteritis	3	2	—
* Measles (including German Measles)	2,392	188	10
	4,257	1,799	160

* Not notifiable.

TABLE No. 37.
Ward Incidence of Infectious Diseases (excluding Tuberculosis), 1934.

DISEASES.	Borough.	Dockyard.	St. Mary's.	River.	St. George's.	Burridge.	* Herbert.	Glyndon.	St. Margaret's.	Central.	St. Nicholas.	Abbey Wood.	Well Hall.	Avery Hill.	Sherard.
Diphtheria	416	21	14	14	12	13	9	22	26	18	32	17	25	24	169
Scarlet Fever	989	36	41	51	62	43	26	58	69	38	97	70	56	50	292
Enteric Fever (including Paratyphoid Fever)	8	—	—	1	—	1	1	1	—	—	2	1	1	—	—
Puerperal Fever	5	2	—	—	—	—	—	—	—	—	—	1	—	2	—
Puerperal Pyrexia	30	4	1	3	2	1	1	1	1	2	7	1	2	3	1
Erysipelas	119	6	11	8	8	6	3	4	9	7	20	6	8	4	19
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	280	16	16	33	12	18	12	13	14	8	49	23	7	21	38
Malaria	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	7	1	—	—	—	—	—	1	1	1	1	—	—	1	1
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-spinal Meningitis	4	—	1	—	—	—	—	—	—	—	1	2	—	—	—
Poliomyelitis	2	—	—	—	—	—	—	—	—	1	—	1	—	—	—
Polio-encephalitis	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—
Zymotic Enteritis	3	1	—	—	—	—	—	—	—	—	—	1	—	—	1
* Measles (including German Measles)	2,392	111	150	292	224	104	155	127	200	121	197	161	82	151	317
	4,257	198	234	402	321	186	208	227	320	196	406	284	181	256	838

* Not notifiable.

TABLE No. 38.
Cases of Infectious Diseases Notified 1934 (excluding Tuberculosis).

DISEASES.	Number of Cases Notified.												
	Age Groups.												
	All Ages.	Under 1 year.	1 and under 2 years.	2 and under 3 years.	3 and under 4 years.	4 and under 5 years.	5 and under 10 years.	10 and under 15 years.	15 and under 20 years.	20 and under 35 years.	35 and under 45 years.	45 and under 65 years.	65 and over.
Diphtheria	416	3	12	12	31	35	158	84	22	42	10	7	—
Scarlet Fever	989	3	17	54	79	94	390	212	49	63	23	5	—
Enteric Fever (including Para-typhoid Fever)	8	—	—	—	1	—	1	—	—	4	1	1	—
Puerperal Fever	5	—	—	—	—	—	—	—	—	5	—	—	—
Puerperal Pyrexia	30	—	—	—	—	—	—	—	—	5	—	—	—
Erysipelas	119	2	1	3	2	3	2	5	2	24	4	—	—
Smallpox	—	—	—	—	—	—	—	—	—	14	17	50	14
Pneumonia	280	37	16	15	20	13	41	8	6	17	26	52	29
Malaria	1	—	—	—	—	—	—	—	—	1	—	—	—
Ophthalmia Neonatorum	7	7	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-spinal Meningitis	4	—	—	—	1	—	1	1	—	1	—	—	—
Polio-encephalitis	1	—	—	—	—	—	1	—	—	—	—	—	—
Poliomyelitis	2	1	—	—	—	—	1	—	—	—	—	—	—
Zymotic Enteritis	3	2	—	1	—	—	—	—	—	—	—	—	—
*Measles (including German Measles)	2,392	61	166	218	307	418	1,152	51	13	6	—	—	—
	4,257	116	212	303	441	563	1,747	361	98	177	81	115	43

* Not notifiable.

TABLE No. 39.
Notification of Infectious Diseases (including Tuberculosis), 1901 to 1934.

Year.	Smallpox.	Diphtheria and Mem. Croup.	Erysipelas.	Scarlet Fever.	Enteric Fever.	Continued Fever.	Puerperal Fever.	§Puerperal Pyrexia.	Pneumonia Primary.	Influenzal Pneumonia.	Malaria.	Dysentery.	Anthrax.	Ophthalmia Neonatorum.	Encephalitis Lethargica.	Cerebro-spinal Meningitis.	Poliomyelitis and Polio-encephalitis.	*Zymotic Enteritis.	*Pulmonary Tuberculosis.	*Tuberculosis Non-pulmonary.	†Measles.	× Chicken Pox.
1901 ...	21	216	72	311	68	1	8	—	—	—	—	—	—	—	—	—	—	—	—	—	323	—
1902 ...	228	233	98	267	50	1	11	—	—	—	—	—	—	—	—	—	—	—	189	—	646	301
1903 ...	6	186	58	389	42	3	2	—	—	—	—	—	—	—	—	—	—	—	165	—	661	—
1904 ...	6	163	74	472	25	1	5	—	—	—	—	—	—	—	—	—	—	—	186	—	1,240	—
1905 ...	7	273	83	513	27	1	12	—	—	—	—	—	—	—	—	—	—	212	145	—	465	—
1906 ...	—	387	97	528	40	—	8	—	—	—	—	—	—	—	—	—	—	366	176	—	825	—
1907 ...	—	275	110	1,023	27	—	6	—	—	—	—	—	—	—	—	1	—	93	150	—	1,453	—
1908 ...	—	362	90	596	19	—	6	—	—	—	—	—	—	—	—	1	—	173	154	—	519	—
1909 ...	—	268	113	1,027	13	—	9	—	—	—	—	—	—	—	—	—	—	149	206	—	768	—
1910 ...	1	171	89	524	10	—	7	—	—	—	—	—	—	—	—	—	—	102	196	—	396	—
1911 ...	—	239	82	518	16	—	16	—	—	—	—	—	—	8	—	1	3	866	375	—	801	—
1912 ...	3	429	87	474	20	—	2	—	—	—	—	—	—	20	—	1	3	129	689	—	775	—
1913 ...	—	321	70	626	14	—	8	—	—	—	—	—	—	14	—	—	1	338	532	143	387	—
1914 ...	—	416	107	714	18	—	7	—	—	—	—	—	—	18	—	—	—	199	400	98	967	—
1915 ...	—	286	138	601	31	—	6	—	—	—	—	—	—	19	—	50	2	173	420	69	1,179	—
1916 ...	1	271	95	232	9	—	16	—	—	—	—	—	—	33	—	17	—	80	392	77	1,590	—
1917 ...	—	277	79	147	12	—	12	—	—	—	—	—	—	41	—	22	1	101	448	95	1,710	—
1918 ...	—	240	61	222	12	—	14	—	—	—	—	—	—	23	—	11	3	118	563	97	800	—
1919 ...	4	398	63	243	26	—	7	—	123	—	61	7	1	34	3	7	1	123	394	80	1,886	—
1920 ...	1	427	82	538	6	—	13	—	136	—	29	1	—	29	3	6	—	31	359	69	1,013	—
1921 ...	—	592	59	1,351	11	—	14	—	187	49	10	4	—	32	9	2	—	454	285	71	481	—
1922 ...	—	437	37	511	8	1	11	—	212	133	11	—	—	26	3	2	4	31	245	60	2,698	—
1923 ...	—	152	40	334	16	—	8	—	196	46	4	1	—	18	1	5	6	49	245	66	194	—
1924 ...	—	195	45	440	11	—	7	—	249	105	3	1	—	27	17	12	5	13	273	69	2,679	—
1925 ...	—	299	44	364	16	—	9	—	237	40	5	1	—	31	10	5	1	13	246	54	1,916	—
1926 ...	—	393	46	411	8	1	4	7	259	33	5	—	—	18	7	9	5	23	287	52	1,246	—
1927 ...	—	278	65	478	9	—	8	30	280	36	3	1	—	19	6	4	3	12	269	84	457	—
1928 ...	3	300	89	529	17	—	20	28	216	14	12	1	—	14	8	3	3	5	263	62	2,418	—
1929 ...	5	496	80	567	7	—	15	38	293	90	5	—	—	17	4	9	4	8	250	52	151	—
1930 ...	10	497	77	627	8	—	5	31	262	21	2	1	—	8	—	2	2	22	244	55	2,702	597
1931 ...	3	281	80	387	3	—	8	41	327	44	3	—	—	7	2	12	6	3	229	51	113	672
1932 ...	7	233	44	554	3	—	5	35	199	48	2	1	—	7	2	15	6	11	235	48	3,135	—
1933 ...	2	370	67	1,004	5	—	4	36	181	68	2	—	—	9	—	9	2	5	207	45	354	—
1934 ...	—	416	119	989	8	—	5	30	273	7	1	—	—	7	—	4	3	3	219	50	2,392	—

§Notification of Puerperal Pyrexia commenced October, 1926.

*Voluntary notification to 1910; partial to 1912; all cases thereafter.

× Chicken Pox was again made notifiable from April, 1930, to 30th September, 1931.

†Measles notifiable from 1/1/1916 to 31/12/1919.

‡Compulsory notification of Zymotic Enteritis commenced 1913.

1931.

TABLE No. 40.
Deaths from Infectious Diseases (excluding Tuberculosis), 1934.

DISEASES.	Number of Deaths.											
	All Ages.	Age Groups.										
		Under 1	1-	2-	5-	15-	25-	35-	45-	55-	65-	75-
Diphtheria	11	1	2	2	6	—	—	—	—	—	—	—
Scarlet Fever	3	—	—	—	2	1	—	—	—	—	—	—
Enteric Fever (inc. Para-typoid Fever)	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever	2	—	—	—	—	1	1	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	6	1	—	—	—	—	1	—	1	1	2	—
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	126	32	7	2	3	1	3	14	15	25	15	9
Malaria	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-spinal Meningitis	1	—	—	—	—	1	—	—	—	—	—	—
Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—
Polio-encephalitis	1	—	—	—	1	—	—	—	—	—	—	—
Zymotic Enteritis	—	—	—	—	—	—	—	—	—	—	—	—
*Measles (including German Measles) ...	10	4	1	2	3	—	—	—	—	—	—	—
	160	38	10	6	15	4	5	14	16	26	17	9

* Not Notifiable.

DIPHTHERIA.

Notification.—During the year 416 cases were notified, compared with 370 in 1933 and 233 in 1932. The number of military cases was five. The number of notifications received each quarter was as follows :—

First quarter	146	Second quarter	93
Third quarter	67	Fourth quarter	110

Multiple cases.—The following Table No. 41, shows the house distribution in wards. The term “house” is synonymous with the term “family” except in one case, where two families were involved.

TABLE No. 41.

Diphtheria—Multiple Cases.

	Dockyard.	St. Mary's.	River.	St. George's.	Burrage.	Herbert.	Glyndon.	St. Margaret's.	Central.	St. Nicholas.	Abbey Wood.	Well Hall.	Avery Hill.	Sherard.	Total Houses.	Total Cases.
Number of houses in which																
1 case occurred	19	11	8	9	13	7	13	17	12	24	10	21	18	115	297	297
2 cases occurred	1	—	1	1	—	1	1	1	3	4	2	2	3	19	39	78
3 „ „	—	1	—	—	—	—	1	1	—	—	1	—	—	4	8	24
4 „ „	—	—	1	—	—	—	1	1	—	—	—	—	—	1	3	12
Total houses ...	20	12	10	10	13	8	16	20	15	28	13	23	21	139	347	411
Military cases...	—	—	—	5	—	—	—	—	—	—	—	—	—	—	—	5
																416

Return cases.—Five cases gave rise to six return cases.

Deaths.—There were 11 deaths from Diphtheria, compared with 15 in 1933 and 8 in 1932. Five of these deaths were in children under five years of age and 6 were in school children.

Home Isolation.—Five cases were isolated at home. Frequent visits are made by the district sanitary inspectors to all cases isolated at home, in order to ensure that proper precautions are being taken for preventing the spread of the disease. Employees of the Royal Arsenal are not allowed to remain at work unless cases are removed to hospital, or a certificate of efficient home isolation is issued by the Medical Officer of Health. No certificates were issued during the year.

Antitoxin.—A supply of Diphtheria Antitoxin is kept at the Town Hall, the Plumstead Library and the Eltham Library, and is available for medical practitioners on application, at cost price, or free where there is inability to pay. The amount supplied during the year was 118,000 units. The total cost to the Council was £7 3s. 0d., of which, £4 16s. 0d. was recovered.

DIPHTHERIA IMMUNISATION.

In June the Council considered the need of introducing a scheme for the active immunisation of children against diphtheria, and after negotiations with the Woolwich Division of the British Medical Association a scheme was agreed upon, by which children living in the Borough would be immunised by local medical practitioners on behalf of the Council, the Council undertaking to appoint an expert for diphtheria immunisation work who would prescribe the technique to be followed in all cases, and who would undertake all Schick Testing which might be necessary.

The Council appointed as their expert Dr. William Smith.

The scheme is fully described in a Circular which was sent to all medical practitioners in the Borough. It reads as follows :—

“ Subject to the conditions mentioned below, the Council of the Metropolitan Borough of Woolwich have agreed to pay a fee of 10s. 0d. to medical practitioners who undertake immunisation for a Woolwich child against diphtheria.

(a) The medical practitioner's name must be on a panel prepared by the Medical Officer of Health.

(b) The Council will not pay a fee in respect of any child under the age of one year or over the age of twelve years.

(c) Before immunising a child, the medical practitioner must obtain the written consent of the parent or guardian.

(d) The child must be given a prescribed course of immunisation.

(e) The diphtheria prophylactic selected by the medical practitioner must be approved by the Medical Officer of Health and obtained from a firm licensed under the Therapeutic Substances Acts.

(f) Each dose of the prophylactic must be contained in a separate sealed glass ampoule. *In no circumstances* will the Council pay a fee in respect of the immunisation of a child by a preparation from a container holding more than one dose.

(g) The medical practitioner will enter the particulars of each immunising dose on a record card provided by the Council. When this record card is completed and returned to the Public Health Department, the Medical Officer of Health will, in appropriate cases, forward particulars of the case to the Borough Treasurer, in order that the fees due may be paid each quarter.

(h) In every case the medical practitioner must place before the parent or guardian the significance of the Schick test and advise that this should be applied to children over five years of age. If the parent or guardian decides to forego the Schick test before immunisation, it may be omitted. The medical practitioner must urge in every case that the Schick test should be applied three months after the immunising injections have been given.

(i) If the parent or guardian desires the Schick test to be performed before immunisation the medical practitioner must refer the child to the Council's immunisation expert. The medical practitioner will also endeavour to arrange for every child to visit the immunisation expert three months after the last injection.

(j) The technique to be employed in connection with diphtheria immunisation work must be that prescribed by the Council's immunisation expert.

(k) The fee of ten shillings to be paid by the Council in respect of each child immunised in accordance with these rules will be the limit of the Council's liability in connection with diphtheria immunisation, and the cost of purchasing the diphtheria prophylactic must be borne by the medical practitioner, who will also be responsible for any subsequent medical attention necessary and for any other liability which may result.

(l) A fee of 2s. 6d. will be paid by the Council in respect of each child over five years of age referred to the Council's immunisation expert and found to be Schick negative and therefore not requiring immunisation.

(m) The Medical Officer of Health may examine any child before, during or after the administration of the immunising doses, and all records kept by the medical practitioner in respect of diphtheria immunisation must be open to his inspection.

The Council have appointed an expert in diphtheria immunisation work who will prescribe the technique to be followed in respect of these cases for which

the Council are prepared to pay a fee. He will also undertake all Schick testing that may be necessary or desired. He will attend at the Old Town Hall Children's Welfare Centre, Woolwich, from 2.0 to 3.0 p.m., and at the Eltham Health Centre, Westhorne Avenue, from 3.30 to 4.30 p.m., on the first and second Tuesday in each alternate month of the year, that is to say :—January, March, May, July, September and November. When a medical practitioner or a parent wishes a child to be Schick tested the patient should be sent to the expert on the first Tuesday of the alternate month when the test will be performed. The interpretation of the test will be undertaken on the second Tuesday of the month.

Medical practitioners may consult the expert at his clinic when he is in attendance, or privately at any other time by appointment.

Most children under one year of age are immune from diphtheria, and it is therefore not considered necessary to immunise them. After the age of twelve years the risk of contracting diphtheria diminishes rapidly, and the Council do not propose at present to pay fees in respect of persons over this age. In these circumstances, if a medical practitioner desires to immunise infants under twelve months or persons over twelve years of age, it will be necessary for him to arrange for a private fee to be paid for his services and for the services of the immunisation expert, if desired.

As the majority of children between the ages of one and five years are susceptible to diphtheria, there is no need to apply the Schick test, and immunisation can be recommended immediately (except in the case of those who have had diphtheria).

A medical practitioner should not undertake immunisation until the appropriate facts have been placed before the parent or guardian.

If the Schick test after the immunising injections have been given proves positive, the expert will advise the medical practitioner to give further injections, and on evidence being produced that these have been given, the Council will agree to pay an additional fee of 10s. 0d. subject, however, to the limitation of liability indicated under (k) above.

The Council, by means of the usual health propaganda channels, will bring to the notice of Woolwich residents the fact that diphtheria can be prevented and that those who desire security for their children should apply to their own family doctor."

The first Schick Testing Clinics at Eltham and Woolwich were held on the 6th November but it was soon apparent that the proposal to hold these clinics twice in

every two months would have to be altered, and indeed it was necessary to hold two clinics in December. At the time of writing the Schick Testing Clinics are being held weekly and in consequence the procedure has been modified, as it became necessary to have all appointments made by the Department instead of by the doctors in order to regulate the numbers at the Clinics. By an arrangement with the London County Council, a list of all attendances of school children is sent monthly to that body so that they do not lose their attendance marks while attending the clinic.

At the end of the year 131 children (34 of whom were under 5 years of age), had been given immunising injections by their doctor and were awaiting the Schick Test. Two children immunised previously were Schick Tested.

In tabular form is shown below details of the work done under the scheme, but each afternoon is regarded as one clinic only :—

TABLE No. 42.

							<i>Woolwich and Eltham.</i>
No. of Schick Testing Clinics held	...	...	...	...	...	...	4
Preliminary Schick Tests—							
No. of children tested—							
Positive	...	...	...	...	...	...	53
Negative	...	...	...	...	...	...	24
Final Schick Tests—							
No. of children tested—							
Positive	...	...	...	...	...	...	—
Negative	...	...	...	...	...	...	2
No. of children immunised during the period by general							
medical practitioners	...	...	...	...	...	...	131
Fees paid to medical practitioners—							
Positive cases at 10s. 0d. (103)	...	...	...	...	...	...	£51 10s. 0d.
Negative cases at 2s. 6d. (21)	...	...	...	...	...	...	£2 12s. 6d.

The propaganda leaflet issued by the Council is as follows :—

PROTECTION AGAINST DIPHTHERIA.

“ One of the most serious diseases which attack children is diphtheria, both in the severity of the illness and in the after effects which it leaves with the sufferer. Not every child, of course, is attacked by diphtheria, but the risk is always present, especially amongst young children and school children. The fact that anyone can be protected against the disease has been abundantly proved. Owing to the nature of their work, fever hospital nurses are greatly exposed to the infection of diphtheria, but when protected by immunisation,

they do not contract the disease. Children in large numbers in Great Britain have been similarly treated and protected against the disease.

The Council of the Metropolitan Borough of Woolwich have now made arrangements with medical practitioners to pay the doctor's fee for the protection of children between the ages of one and twelve years.

The treatment involves three injections, which usually cause no disturbance to the child ; there is no sore at the point of injection and no scar or mark is left. The protection does not develop fully until about three or four months after the three injections. After this time, it will generally last over that period of the child's life when it is most likely to contract diphtheria, and may indeed last throughout life.

If any parent or guardian wishes to have his children protected against diphtheria, or to have any further advice on the matter, he should consult his own doctor, or, if he has no family doctor, he should consult the Health Visitor at the nearest Infant Welfare Centre, or visit the Public Health Department at the Town Hall.

P.S.—Although your child, if protected, is extremely unlikely to contract diphtheria, it must not be assumed that such a thing is impossible. A very few cases of diphtheria have occurred amongst immunised children, but it must be pointed out that such attacks are nearly always slight."

SCARLET FEVER.

Notification.—During the year 989 cases were notified, compared with 1,004 in 1933 and 554 in 1932. There were 33 military cases. The number of notifications received each quarter was as follows :—

First quarter	251	Second quarter	238
Third quarter	210	Fourth quarter	290

Multiple Cases.—The following Table No. 43, shows the house distribution by wards. The term "house" is synonymous with the term "family" except in two instances, where two families were involved.

TABLE No. 43.

Scarlet Fever—Multiple Cases.

	Dockyard.	St. Mary's.	River.	St. George's.	Burrage.	Herbert.	Glyndon.	St. Margaret's.	Central.	St. Nicholas.	Abbey Wood.	Well Hall.	Avery Hill.	Sherard.	Total Houses.	Total Cases.
Number of Houses in which																
1 case occurred	32	27	41	24	35	16	50	53	32	69	42	44	42	190	697	697
2 cases occurred	2	2	5	6	4	5	1	8	3	7	5	6	4	33	91	182
3 " "	—	—	—	1	—	—	2	—	—	2	4	—	—	6	15	45
4 " "	—	—	—	—	—	—	—	—	—	2	—	—	—	3	5	20
5 " "	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6 " "	—	—	—	—	—	—	—	—	—	—	1	—	—	1	2	12
Total houses...	34	29	46	31	39	21	53	61	35	80	52	50	46	233	810	956
Military ...	—	5	—	28	—	—	—	—	—	—	—	—	—	—	—	33
																989

Return Cases.—The following Table No. 44, shows the number of return cases, the dates of admission to hospital, and the dates of discharge from hospital. It will be noted that in most of these cases the primary case was less than five weeks in hospital.

TABLE No. 44.

Scarlet Fever—Return Cases.

No. in Register	Date Admitted to Hospital.	Date Discharged.	Total Days in Hospital.	Onset of Secondary Case.	Remarks on Primary Case.
	1934	1934		1934	
60	15th January	13th February	29	24th February	—
102	27th do.	27th do.	31	24th do.	—
112	30th do.	22nd do.	23	10th March	—
125	5th February	14th March	37	17th do.	—
185	3rd March	31st do.	28	23rd do.	—
232	24th do.	21st April	28	23rd do.	—
239	26th do.	26th do.	31	5th April	—
288	4th April	8th May	26	3rd May	—
294	14th do.	25th do.	41	29th April	—
314	24th do.	18th do.	22	9th May	—
322	26th do.	18th July	85	15th do.	—
357	10th May	10th June	31	4th June	—
405	31st do.	25th July	55	21st May	—
440	20th do.	19th do.	60	26th July	—
482	28th June	25th do.	27	15th June	—
529	13th July	7th August	25	17th do.	—
560	24th do.	18th do.	25	12th August	—
571	28th do.	17th September	51	23rd July	—
648	6th September	6th October	30	24th do.	—
675	17th do.	29th do.	42	31st do.	—
696	26th do.	19th do.	23	2nd August	—
727	3rd October	7th November	34	24th do.	—
732	5th do.	7th do.	32	7th September	—
773	16th do.	13th do.	27	13th do.	—
788	22nd do.	16th do.	25	27th do.	—
803	26th do.	24th do.	28	18th October	—
807	27th do.	23rd do.	26	16th November	—
873	13th November	24th December	41	1st do.	—
				6th do.	—
				11th do.	—
				11th do.	—
				26th do.	—
				20th do.	—
				21st do.	—
				25th do.	—
				2nd December	—
				14th do.	—
				29th do.	—

Deaths.—There were three deaths from scarlet fever during the year. In 1933 there were none.

Home Isolation.—Seventy-one cases, or 7·17 per cent., were isolated at home, and in one instance a return case occurred. The same procedure as in Diphtheria was carried out. Five certificates of efficient home isolation were issued.

Dick Test.—This has not been employed in the neighbourhood so far as I am aware.

SMALLPOX.

There were no cases of Smallpox.

ERYSIPELAS, MALARIA AND DYSENTERY.

The number of notifications of Erysipelas received was 119, compared with 67 in 1933, and one case of Malaria was notified. No case of Dysentery was notified.

ENTERIC FEVER.

Eight cases were notified, seven of which were treated in hospital. There were no deaths. The following Table No. 45, gives details of each case notified.

TABLE No. 45.

Enteric.

No.	Date Notified.	Sex.	Age.	Diagnosis.	Final Diagnosis.	Remarks.
1	11/ 1/34	M.	30	Typhoid Fever ...	Typhoid Fever ...	—
2	17/ 3/34	F.	50	Typhoid Fever ...	Paratyphoid Fever...	—
3	30/ 4/34	M.	23	Paratyphoid Fever...	Paratyphoid Fever...	—
4	2/ 5/34	M.	24	Typhoid Fever ...	Paratyphoid Fever...	—
5	6/ 6/34	F.	29	Enteric Fever ...	Bacterial Endocarditis	Died
6	30/ 7/34	M.	41	Typhoid Fever ...	Typhoid Fever ...	—
7	13/ 9/34	F.	8	Typhoid Fever ...	Typhoid Fever ...	—
8	22/10/34	M.	3	Typhoid Fever ...	Typhoid Fever ...	—

ANTERIOR POLIOMYELITIS.

Three notifications including one of polio-encephalitis were received and all patients were admitted to hospital, but the diagnosis was not confirmed in one instance. The case of polio-encephalitis died.

CEREBRO-SPINAL MENINGITIS.

Four cases were notified, all of which were admitted to hospital. In one instance the diagnosis was not confirmed. There was one death. The following Table No. 46, gives details of each case :—

TABLE No. 46.

Cerebro-spinal Meningitis.

No.	Date Notified.	Sex.	Age.	Ultimate Diagnosis.	Remarks.
1	19/ 2/34	F.	14	Cerebro-spinal Meningitis ...	—
2	21/ 2/34	M.	5	Pyrexia of unknown origin ...	—
3	1/11/34	F.	3	Cerebro-spinal Meningitis ...	—
4	28/11/34	M.	23	do. do. ...	Died

ENCEPHALITIS LETHARGICA.

As in 1933, no cases of this disease were notified.

PUERPERAL FEVER AND PUERPERAL PYREXIA.

Thirty-five cases were notified, compared with 40 in 1933, and 40 in 1932. In 30 instances the notification was in respect of Puerperal Pyrexia, but in four of these instances the notification should have been Puerperal Fever. In four instances the disease was a sequel to abortion.

Treatment.—The Council's scheme for the treatment of these diseases provides for a Consultant, for hospital treatment, for bacteriological examination where necessary, and for nursing assistance. Specific sera may also be supplied. No cases were seen by Mr. Harold Taylor during the year. It was not necessary to provide nursing assistance and no bacteriological examinations were carried out. Only one case did not receive hospital treatment.

Deaths.—There were two deaths, compared with two in 1933 and four in 1932.

OPHTHALMIA NEONATORUM.

Seven cases were notified, two of which were admitted to hospital. Three cases were nursed at home under the Council's scheme, 111 visits in all being paid. The cost of this service was £5 11s. 0d. The following Table No. 47, gives details of each case.

TABLE No. 47.

Date Notified.	Cases Treated.		Vision Unimpaired.	Vision Impaired.	Total Blindness.	Deaths.
	Home.	Hospital.				
1934						
15th January ...	Yes	—	Yes	—	—	—
20th January ...	Yes	—	Yes	—	—	—
11th March ...	Yes	—	Yes	—	—	—
28th March ...	Yes	—	Yes	—	—	—
18th April ...	Yes	—	Yes	—	—	—
26th July ...	—	Yes	Yes	—	—	—
29th October ...	—	Yes	Yes	—	—	—

ZYMOTIC ENTERITIS.

Three cases were notified during the year, compared with five cases in 1933 and eleven in 1932. The number of deaths in children under two years of age, certified to be due to diarrhoeal diseases, was nine. None of the notified cases died.

WHOOPIING COUGH.

During the year 253 cases of Whooping Cough came to the knowledge of the Department, compared with 514 in 1933 and 233 in 1932. As this disease is not notifiable in the Borough, knowledge is usually obtained through the School Medical Service, but, exceptionally, cases are notified by medical practitioners and occasionally cases are discovered by the health visitors in their routine visits.

Nursing.—Two cases were nursed under the Council's scheme, 69 visits in all being paid. The cost of this service was £3 9s. 0d.

Deaths.—There were 13 deaths certified to be due to this disease, compared with 9 in 1933.

MEASLES.

The two main sources of our knowledge of the incidence of Measles in the Borough are the School Medical Service and the health visitors. Occasionally, however, information comes through the local nursing associations and from parents. During the year 2,392 cases (including 55 cases of German Measles) were discovered. In 1933 and 1932 the corresponding figures were 354 and 3,135.

Measles occurs in epidemic form every two years and usually lasts for four months. The incidence in each of the twelve months of the year was as follows :—

January	168	February	367	March	350
April	353	May	614	June	381
July	62	August	3	September	20
October	50	November	12	December	12

From these figures it will be noted that the disease first assumed epidemic proportions in January, reached its peak in May, and fell away thereafter.

The Council's scheme for dealing with Measles epidemics was put in force at the beginning of the year, two temporary health visitors being appointed for Measles work. They investigated every reported case of Measles from whatever source information came ; they visited cases absent from school from unknown causes and every case of suspected Measles. The staff health visitors made subsequent visits to cases where children were under school age, but where they were of school age the subsequent visits were made by the temporary health visitors.

Notices were sent to head teachers when the diagnosis of Measles was not confirmed and when suspect cases were diagnosed as Measles.

The co-operation between the School Medical Service and the Department was excellent, visits being paid to every home where cases of Measles or suspected Measles were living, within 24 hours of the teacher sending the notification to the Department.

The scheme worked very well in other respects. It enabled the normal routine work of the health visitors to be maintained with very little disturbance ; it ensured the early diagnosis of secondary cases and their exclusion from school in an infectious state ; it ensured the early provision of nursing assistance and it enabled arrangements to be made for the early admission of cases to hospital where necessary. In every way the Council's policy was justified.

Home Nursing.—In 33 cases nursing assistance was provided during the year, 410 visits in all being paid. The cost to the Council was £20.

Hospital Treatment.—The number of children admitted to fever hospitals was 188.

Deaths.—There were 10 deaths from Measles during the year.

PNEUMONIA.

The number of cases notified was 280, compared with 249 in 1933. Of these, 7 were influenzal. The number of deaths certified to be due to lobar or broncho pneumonia was 126 and to acute influenzal pneumonia 6. The ward incidence of the Pneumonias is shown in Table No. 37.

The following Table No. 48, shows the number of notifications of Pneumonia received each month, classified by sex and according to type. It also shows the number of deaths occurring from acute primary pneumonia and influenzal pneumonia.

TABLE No. 48.
Monthly Incidence of Pneumonia.

Month.	Male.	Female.	Total.	Type.				No. of Deaths.	
				Lobar.	Broncho.	Influenzal.	Acute Primary (not specified)	Acute Primary Pneumonia.	Influenzal Pneumonia.
January ...	25	17	42	5	7	2	28	18	1
February...	18	14	32	4	8	—	20	9	2
March ...	15	16	31	6	4	1	20	17	2
April ...	20	7	27	2	1	—	24	13	—
May ...	10	5	15	—	1	—	14	7	—
June ...	9	10	19	3	2	—	14	3	—
July ...	7	2	9	3	—	1	5	3	—
August ...	4	4	8	3	1	—	4	8	—
September	11	2	13	4	1	—	8	3	—
October ...	8	5	13	—	2	1	10	8	—
November	23	17	40	9	9	1	21	17	—
December	19	12	31	2	9	1	19	20	1
	169	111	280	41	45	7	187	126	6

Nursing.—Nursing assistance is provided by the Council for cases of Pneumonia and during the year 24 cases were nursed, 431 visits being paid by the nurses of the local nursing associations. The total cost to the Council was £26 18s. 9d.

Anti-Pneumococcal Serum.—During the year the Council provided, free of charge, anti-pneumococcal serum (mainly Felton's) for the treatment of persons suffering from Pneumonia to those medical practitioners who considered this form of treatment suitable. The total cost to the Council was £102 10s. 4d.

TUBERCULOSIS.

The Council's tuberculosis scheme was set out fully in the Annual Report for 1933 and no substantial change took place during 1934.

Notifications.—During the year, excluding duplicates, 219 cases of pulmonary tuberculosis and 50 cases of non-pulmonary tuberculosis were notified. Cases of tuberculosis are often notified more than once, and in this way during the year 56 duplicate notifications were received. The number of cases notified from each of the different wards of the Borough is shown in Table No. 49.

TABLE No. 49.

Ward Incidence of Tuberculosis, 1934.

Ward.								Pulmonary.	Non-Pulmonary.
Dockyard	...	...	...	...	...	...	...	14	2
St. Mary's	...	...	...	...	...	...	...	8	2
River	...	...	...	...	...	...	...	19	4
St. George's	...	...	...	...	...	...	...	22	3
Burrage	...	...	...	...	...	...	...	11	2
Herbert	...	...	...	...	...	...	...	10	4
Glyndon	...	...	...	...	...	...	...	12	4
St. Margaret's	...	...	...	...	...	...	...	12	4
Central	...	...	...	...	...	...	...	14	1
St. Nicholas	...	...	...	...	...	...	...	23	5
Abbey Wood	...	...	...	...	...	...	...	14	3
Well Hall	...	...	...	...	...	...	...	17	4
Avery Hill	...	...	...	...	...	...	...	24	7
Sherard	...	...	...	...	...	...	...	19	5
Total	...	...	...	...	...	...	...	219	50

In the following Table No. 50, appears a summary of cases coming to the knowledge of the Department in 1934. It includes notifications received from general practitioners, cases not notified but included in the death returns, and cases transferred from other areas. It does not include notifications received from Medical Superintendents of hospitals on admission or discharge of patients, nor any duplicate notifications. Deaths occurring within the year are classified in the same Table by age and sex groups.

TABLE No. 50.

TUBERCULOSIS—NEW CASES AND MORTALITY, 1934.

Age Periods.	NEW CASES.				DEATHS.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0-1 year ...	—	1	—	1	—	—	—	2
1-5 years ...	1	1	4	3	—	—	4	—
5-10 years ...	3	4	7	1	—	—	1	1
10-15 years ...	7	4	6	1	3	—	1	1
15-20 years ...	6	19	6	1	4	8	2	1
20-25 years ...	16	20	5	3	6	5	2	1
25-35 years ...	34	24	6	3	13	9	4	—
35-45 years ...	23	14	1	5	19	11	—	1
45-55 years ...	22	9	1	1	13	6	—	1
55-65 years ...	17	4	3	1	10	3	—	2
65 and upwards	9	4	2	—	8	2	1	1
Totals ...	138	104	41	20	76	44	15	11

The following Table No. 51, shows the site of the disease in patients notified each year since 1930.

TABLE No. 51.

Year.	Lungs.	Meninges.	Intestines and Peri- toneum.	Glands.	Joints.	Spine.	Other Forms.	All Forms.
1930	244	6	5	18	15	3	8	299
1931	229	11	5	18	8	2	7	280
1932	235	6	6	11	8	5	12	283
1933	207	7	4	14	10	4	6	252
1934	219	8	6	12	9	2	13	269

Cases of Tuberculosis in the District.—The usual steps were taken during the year to ensure that the Tuberculosis register correctly represented the number of cases of Tuberculosis in the district, and the following Table No. 52, shows the changes which have taken place during the year.

TABLE No. 52.

	Pulmonary.		Non-Pulmonary.		Totals.
	M.	F.	M.	F.	
Number on register on 1st January, 1934 ...	471	356	95	113	1,035
Number of new cases notified... ..	117	95	33	17	262
Number of cases restored	11	6	1	—	18
Other additions	13	8	5	4	30
Deletions	135	113	25	24	297
Number on register on 31st December, 1934	477	352	109	110	1,048

Of the total number on the register on the 31st December, 91·75 per cent. were on the dispensary register, i.e., had been dealt with in connection with the Public Health scheme for the treatment of tuberculosis. In 1933 the corresponding percentage was 86·66 and in 1932, 92·91.

Deaths.—The following Table No. 53, shows the number of deaths and the death rates each year since 1930.

TABLE No. 53.

Tuberculosis—Deaths and Death-Rates.

Year.	Deaths.			Death-rates.		
	All Forms.	Pulmonary.	Non-Pulmonary.	All Forms.	Pulmonary.	Non-Pulmonary.
1930 ...	165	150	15	1·17	1·06	0·11
1931 ...	168	148	20	1·14	1·00	0·14
1932 ...	154	139	15	1·05	0·95	0·10
1933 ...	135	116	19	0·92	0·79	0·13
1934 ...	146	120	26	1·00	0·82	0·18

In addition to the deaths recorded in the above Table, seven persons who had been notified as suffering from tuberculosis died during the year from other causes, and detailed information as to these is given in the following Table No. 54.

TABLE No. 54.

Case No.	Date notified as Tuberculosis.	Cause of Death.
1	4/10/1933	Ulcerative Endocarditis.
2	3/ 1/1917	Hypostatic Pneumonia. Myocarditis.
3	3/ 4/1930	Cerebral Hæmorrhage. Cerebral Tumour.
4	16/ 2/1934	Oxalic Acid Poisoning.
5	12/ 5/1919	Broncho-pneumonia. Auricular Fibrillation and Cardiac engorgement.
6	17/11/1932	Pelvic Abscess. Perforative Diverticulitis. Operation, secondary abscess, liver.
7	31/ 1/1932	Chronic Bronchitis.

The period which elapsed between notification and death is shown below :—

TABLE No. 55.

	Pulmonary.	Percentage.	Non-Pulmonary.	Percentage.
Not notified	14	11·67	10	38·50
0- 1 month	18	15·00	12	46·11
1- 3 months	9	7·50	—	—
3- 6 months	13	10·83	1	3·85
6-12 months	16	13·33	—	—
1- 2 years	17	14·17	—	—
2- 5 years	22	18·33	—	—
Over 5 years	11	9·17	3	11·54
	120	100·00	26	100·00

The ratio of non-notified tuberculosis deaths to the total tuberculosis deaths was as 1 is to 6. In 1933 it was as 1 is to 8, and in 1932 it was as 1 is to 12.

Public Health (Prevention of Tuberculosis) Regulations, 1925.—These Regulations provide for the compulsory discontinuance of employment of persons engaged in the handling or treatment of milk, who are suffering from tuberculosis. No case of this kind came to the notice of the Council during the year. Every milk vendor in the Borough is periodically reminded that the Tuberculosis Officer is willing to examine, free of charge, all employees or candidates for employment in the milk trade. One such examination was made during the year.

The County of London (Tuberculosis) Regulations, 1930.—These Regulations enable the County Council to maintain or arrange for the maintenance, otherwise than in their homes, of children living in London in houses where, owing to overcrowding or otherwise, they are, in the opinion of the County Medical Officer, in danger of being infected with tuberculosis; or whose parent or parents are receiving institutional treatment for tuberculosis and for whose care adequate arrangements cannot otherwise be made. During the year such arrangements were made for four children.

Staff.—There is one whole-time Tuberculosis Officer and the other three assistant medical officers devote three half-days per week to Tuberculosis and eight half-days per week to Maternity and Child Welfare. There are three Tuberculosis Health Visitors; one Clerk-Dispenser, who also acts as Secretary to the Care Committee, and one Clerk.

The Work of the Dispensaries.—The Council's Dispensary is situated at Maxey Road, Plumstead, and there is a branch Dispensary at 179, Well Hall Road, Eltham. The Eltham branch was opened in 1931 and more use of it is being made now than in that year. In accordance with the Minister of Health's instructions the Dispensary figures are shown for the Borough as a whole and not for individual dispensaries.

One of the Tuberculosis Officers attends at the main Dispensary every week-day, but an evening session is held, instead of an afternoon one, on Thursdays. Eight separate clinical sessions in all are held for men, for women and for children.

The branch Dispensary is open on three half-days a week—Monday afternoons for men, and Wednesday and Friday mornings for women and children.

The total number of attendances at the Dispensaries during 1934 was 4,833. In this connection it is interesting to point out that 202 of the persons notified during 1934 attended the Dispensaries, which is equivalent to 75·08 per cent. The corresponding percentage in 1933 was 68·25, and in 1932 it was 89·7.

A return of the work of the Dispensaries is given in Table No. 56.

Alterations at Maxey Road Dispensary.—During the year the Council had under consideration the question of modernising the Council's Tuberculosis Dispensary, as an opportunity was afforded by the fact that other services of the Council were no longer maintained in the existing building. It was possible by using the existing rooms, by adding the Caretaker's office and the office formerly used for rate collection and a portion of the yard and buildings previously used by the Works Department, to make such alterations as would provide a modern and convenient dispensary. The Council decided to carry out this work at an estimated cost of £760 and the plans were approved by the Ministry of Health and by the London County Council.

The work was started before the end of the year.

Home Visiting of Tuberculosis Cases.—On receipt of every notification the home is visited by the Tuberculosis Visitor, who advises as to any re-arrangement that seems possible and desirable in the interests of the patient and other members of the family. In the case of patients notified by the Tuberculosis Officer a visit is also made by one of the medical staff, who thus gains a knowledge of the home circumstances of the patient. The Tuberculosis Visitor endeavours to visit each home in her district once in three months, but, in the case of patients with recent and more active disease, visits are more frequent.

Work for the Ministry of Pensions.—The amount of work done under this heading has practically come to an end. In 1933 only 4 reports were made; during 1934 no reports were made.

Examination of Home Contacts.—On receipt of each primary notification every effort is made to induce people living in the same house as the patient to present themselves for examination. In many cases, however, it is very difficult to persuade them of the necessity for examination. During the year under review 477 contacts were examined.

TABLE No. 56.
Return showing the Work of the Dispensaries for 1934.

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	124	104	7	7	14	12	16	10	138	116	23	17	294	
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	—	1	—	—	1	
(c) Non-tuberculous	—	—	—	—	—	—	—	—	126	151	94	68	439	
B.—CONTACTS examined during the year :—														
(a) Definitely tuberculous	8	7	3	3	1	—	—	1	9	7	3	4	23	
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	—	—	—	—	—	
(c) Non-tuberculous	—	—	—	—	—	—	—	—	82	144	103	125	454	
C.—CASES written off the Dispensary Register as:—														
(a) Recovered	15	23	1	3	1	3	4	2	16	26	5	5	52	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	—	—	—	—	—	—	—	—	219	301	198	196	914	
D.—NUMBER OF CASES on Dispensary Register on December 31st :—														
(a) Definitely tuberculous	405	331	24	18	51	53	38	48	456	384	62	66	968	
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	—	1	—	—	1	

Return showing the Work of the Dispensaries for 1934—*continued*.

1. Number of cases on Dispensary Register on January 1st	...	...	897
2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	...	...	7
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"	...	...	68
4. Cases written off during the year as Dead (all causes)	...	...	112
5. Number of attendances at the Dispensary (including Contacts)	...	...	4,833
6. Number of Insured Persons under Domiciliary Treatment on the 31st December	...	...	223
7. Number of consultations with medical practitioners :—			
(a) Personal	...	...	72
(b) Other	...	...	1,157
8. Number of visits by Tuberculosis Officers to homes (including personal consultations)	...	...	457
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes	...	...	4,654
10. Number of :—			
(a) Specimens of sputum, etc., examined	...	...	538
(b) X-ray examinations made	...	...	411
in connection with Dispensary work			
11. Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above	...	...	11
12. Number of "T.B. plus" cases on Dispensary Register on December 31st			365
Number of Dispensaries for the treatment of Tuberculosis (excluding centres used only for special forms of treatment).			
Provided by the Council	...	...	2
Provided by Voluntary Bodies	...	...	Nil

X-Ray Examinations.—More and more use is being made of X-rays in the investigation of cases of Tuberculosis. They are used to diagnose the disease in its early stages ; they are used in the efficient control of the treatment of tuberculosis ; and more and more use is being made of them in the clinical investigation of contacts previously found to be positive to the Mantoux test—an intradermal tuberculin test.

The figures now presented do not show the total use made of X-rays by the Tuberculosis Officer, because when cases are sent into St. Nicholas Hospital for institutional treatment he is able to make use of the X-ray apparatus there for diagnosis and control.

The Council's arrangements for X-ray examinations are made with the War Memorial Hospital, and during the year 411 such examinations were carried out.

Co-operation with St. Nicholas Hospital (L.C.C.).—Since July, 1926, the Tuberculosis Officer has visited St. Nicholas Hospital weekly in accordance with an arrangement made with the late Board of Guardians. In 1933 the London County Council, in pursuance of their policy of uniformity throughout London, terminated the appointment of all Consultants in their service and subsequently made re-appointments. Included in these appointments were Tuberculosis Officers as Consultants at the Poor Law Hospitals for their respective areas. In July, the London County Council decided to continue these appointments subject to review at a later date.

Co-operation with Local Practitioners.—During the year 72 new cases were seen by the Tuberculosis Officer at the homes of the patients, and 280 were referred to the Dispensary by medical practitioners in the Borough.

Co-operation with the School Medical Service.—There is intimate relationship between the School Medical Service and the Dispensary. Many cases are referred to the Dispensary by the School Medical Officers, and the child contacts of tuberculous patients are referred to the School Medical Service for special observation and supervision. The Divisional School Medical Officer and the Tuberculosis Officer in personal consultation, discuss these contacts and decide on the supervision desirable. Other children, whose condition is unsatisfactory, are referred to the School Clinic for the treatment of minor ailments and dental caries; to the School Care Organiser, with a recommendation as to the provision of milk and cod-liver oil to be given at school, or to the Woolwich Invalid Children's Aid Association.

Extra Nourishment.—Extra nourishment in the form of butter, eggs and milk, is supplied to tuberculous patients on the certificate of the Tuberculosis Officer. The object of this measure is to help the ex-sanatorium patient and other suitable cases by the provision of such extra nourishment as will make the difference between progress and relapse: it is not intended for advanced cases of tuberculosis where real improvement cannot be expected. The expenditure on this service is limited to £2 per 1,000 of the population.

Dental Treatment.—Dental treatment is carried out under the Council's scheme at the School Clinic, Brewer Street. During the year 21 cases received treatment the number of attendances being 40. The only charge made to patients is in

connection with the supply of dentures, and then patients are assessed according to their means. Dentures were supplied in 5 cases at a cost of £23 0s. 0d. and payments by patients amounted to £10 7s. 6d. In assessing patients due regard is given to dental benefits they may be entitled to from approved societies.

Finsen Light Treatment.—In 1921 the Council entered into an agreement with the London Hospital for the treatment of persons suffering from Lupus in the Finsen Light Department of the Hospital. A fee of 5s. is paid for each attendance. During the year 14 attendances were made.

Artificial Pneumo-thorax.—This treatment consists of collapsing the diseased lung and so putting it at rest. This is done by introducing gas or air through a needle into the pleural cavity of the affected side. The air so introduced becomes absorbed and has to be replaced at varying intervals. These refills have to be maintained over a period varying from two to five years. In 1921 the Council agreed to pay 10s. 6d. a refill to the Brompton Hospital, where this work was carried out, in the case of patients recommended by the Tuberculosis Officer, but since that date payments have been made in respect of patients so treated at other special hospitals and at hospitals belonging to the London County Council. The number of patients who received such treatment during the year was 38, and the number of refills was 368.

Woolwich Tuberculosis Care Committee.—At the end of the year the Committee was constituted as follows :—

<i>Bodies.</i>				<i>Representatives.</i>
Woolwich Borough Council...	...	...	...	Alderman Mrs. E. Brooks, Councillors R. Campbell, Mrs. L. E. Driver, S. Crown, J.P., G. Greenwood, Mrs. E. L. Reeves.
Trade Unions ...	...	...	...	Mr. W. H. Fairchild, Mr. E. Ware.
Employers ...	...	...	...	Miss L. Ames, Miss Fletcher, Mr. C. N. McLaren.
Friendly Societies ...	...	...	...	Mr. W. A. Lyon, Mr. A. J. Rourke, Mr. F. Smyth.
London County Council ...	...	...	...	Dr. H. R. Kidner, Miss C. F. Aves.
London County Council (Public Assistance Committee)				Mr. R. Campbell, Mrs. B. G. Dickinson, Mr. T. Moran.
London Insurance Committee ...	...	...	...	Mr. S. H. Brown.
Panel Committee for the County of London				Dr. H. M. Wise.
British Red Cross Society ...	...	...	...	Mr. J. O'Connell.
War Pensions Committee ...	...	...	...	Mr. A. R. Loader.
Woolwich Invalid Children's Aid Association				Mrs. J. B. Great Rex.
Late Tuberculosis Dispensary Committee ...	...	...	...	Mr. W. Dashwood, Mr. E. G. Dixon, J.P.
United Services Fund ...	...	...	...	Mrs. A. Evans.
<i>Ex-Officio.</i>				
Voluntary Visitors ...	...	...	...	Miss D. A. Frye, Miss M. Ross.
Tuberculosis Officer ...	...	...	...	Dr. F. J. C. Blackmore.
Medical Officer of Health ...	...	...	...	Dr. J. MacMillan, D.S.O., M.C.

The After-Care Committee continued to do excellent work during the year, and the assistance rendered to necessitous cases makes the Council's Tuberculosis Scheme more effective. They assist in many ways. They help by the provision of clothing to necessitous patients entering an institution; by aiding in the purchase of surgical apparatus and nursing requisites; by paying fares for varying periods in the case of patients going to and from hospital for out-patient treatment, and in many other smaller ways.

Prior to September, the Committee assessed patients' payments for institutional treatment, but when the London County Council resolved to make all institutional treatment free of charge, this work ceased. The Committee assessed patients' payments under the Council's Dental Scheme, and supervised the provision of additional nourishment.

Institutional Treatment.—Institutional treatment for the tuberculous became free in London in September, but when the County Council adopted this modification of their scheme, they decided to accept voluntary contributions from patients.

The following Table No. 57, shows the number of admissions to special hospitals, sanatoria, public general hospitals, institutions and training colonies:—

TABLE No. 57.
Admissions to Hospitals, etc.

	Special Hospitals.	Sanatoria.	Public General Hospitals.	Training Colonies.
Insured	108	78	122	3
Uninsured	59	23	48	1
Children	17	14	34	—
	184	115	204	4

These figures refer to 374 patients and the monthly admissions were as follows:—

January ... 32	May 51	September ... 42
February ... 32	June 53	October... .. 27
March 57	July 35	November ... 54
April 55	August 39	December ... 30

Shelters.—Thirteen shelters are maintained by the Council for patients returning from sanatoria who are able and willing to continue this form of treatment.

Nursing.—Home nursing is provided for certain cases of tuberculosis, and in accordance with the arrangements entered into with the local Nursing Associations the number of visits paid by nurses during the year was 1,203, and the cost to the Council was £75 3s. 9d.

ARRANGEMENTS FOR DISINFECTION AND DISINFESTATION AND THE EXTENT OF THEIR USE.

Disinfection.—The Council's Disinfecting Station is situated at White Hart Road, Plumstead, where there are installed two Washington Lyon steam disinfectors, one high-pressure steam washing disinfecter, and one room for disinfecting articles which cannot be subjected to heat.

The heavy demand on the resources of the Station owing to the work of bug eradication was again apparent during the year.

The Station is sometimes used for special disinfection at the request of inhabitants. A small charge is made for these disinfections and during the year 35 such disinfections were carried out, and charges amounting to £8 13s. 6d. were paid.

In tabular form is shown below the amount of disinfection which was carried out during the year.

TABLE No. 58.

Rooms disinfected after ordinary fevers	...	...	1,394
" " " tuberculosis	...	...	180
" " " verminous cases	...	...	1,391
" " for other reasons	...	...	13
Articles disinfected	...	...	62,029

Disinfestation.—In accordance with the terms of an agreement with the London County Council, disinfestation of school children is carried out at the Cleansing Station, White Hart Road. Disinfestation of adults is carried out at times when the children are not there.

The following Table No. 59, shows the number of persons cleansed each year since 1930.

TABLE No. 59.

Year.	CHILDREN.			ADULTS.			Grand Total.
	Boys.	Girls.	Total.	Males.	Females.	Total.	
1930	477	1,386	1,863	11	10	21	1,884
1931	483	1,543	2,026	14	4	18	2,044
1932	560	1,613	2,173	8	4	12	2,185
1933	550	1,579	2,129	7	11	18	2,147
1934	611	1,715	2,326	6	1	7	2,333

A report on disinfestation of bug-infested premises will be found in the Housing Section.

SECTION VIII.—GENERAL STATISTICS.

TABLE No. 60.

Area	...	...	...	...	...	...	...	...	... (acres)	8,282
Population, estimated to middle of 1934...	...	...	...	...	...	...	...	...	...	145,520
Population, Census 1931 :—										
Total (including military)	...	...	...	...	...	...	...	...	...	146,881
Civilians	...	...	...	...	...	...	...	...	...	141,504
Number of inhabited houses, 1931	...	...	...	...	...	...	...	...	...	29,870
Number of families or separate occupiers, 1931...	...	...	...	...	...	...	...	...	...	38,176
Rateable value (April, 1934)	...	...	...	...	...	...	...	...	...	£1,089,801
Sum represented by a penny rate (April, 1934)	...	...	...	...	...	...	...	...	...	£4,541

POPULATION.

The Registrar General estimates the population of the Borough at the middle of the year as 145,520, a decrease of 680 on the previous year. Each year since 1931 he has shown a decrease on the previous year. It is difficult to believe that this is correct because there is much new building going on in the Borough and it is definitely known that many of the new occupiers come from outside the Borough, and in addition, each year, there is a natural increase in the population. As the figures of the Registrar General are used generally throughout the country they are the only safe basis for comparison and so his total has been used in calculating rates for the purposes of this report. It should be noted, also, that this figure includes non-civilians and that the pre-war practice in this respect was returned to from the beginning of 1932. In estimating the population of the wards of the Borough regard has been had to such information as is available from the records of the Housing Department so far as occupants of new Council houses are concerned, and of the records of the Treasurer's Department when advances have been made under the Small Dwellings Acquisition Acts. The estimated population of each of the wards of the Borough at the middle of 1934, is shown in the following Table No. 61.

TABLE No. 62—*continued.*

Industry.	Males.	Females.
v. Manufacture of Chemicals, Dyes, Explosives, Paints, Oils, Grease	1,716	146
vi. Manufacture of Metals, Machines, Implements, Conveyances, Jewellery, Watches	11,958	2,578
vii. Manufacture of Textiles and Textile Goods (not dress) ; Cellulose	114	173
viii. Preparation of Skins and Leather, and Manufacture of Goods of Leather and Leather Substitute (not clothing or footwear)	78	32
ix. Manufacture of Clothing (not knitted)	600	1,457
x. Manufacture of Food, Drink, Tobacco	1,263	567
xi. Wood Working : Manufacture of Cane and Basket Ware, Furniture, Fittings (not elsewhere enumerated) ...	354	31
xii. Paper Making : Manufacture of Stationery and Stationery Requisites ; Printing, Bookbinding and Photography	686	305
xiii. Building, Decorating, Stone and Slate Cutting and Dressing and Contracting	3,300	37
xiv. Other Manufacturing Industries	583	478
xv. Gas, Water, Electricity	882	42
xvi. Transport and Communication	3,402	160
xvii. Commerce and Finance	7,632	3,600
xviii. Public Administration and Defence... ..	10,458	2,012
xix. Professions	839	902
xx. Entertainments and Sport	360	167
xxi. Personal Service (including Hotels and Catering but excluding Government and Local Authority)	1,466	3,644
xxii. Other Industries, or Industry not stated	45	31
Total in Industries	46,587	16,486
Unoccupied and Retired	5,313	39,963
Out of Work	4,895	1,265
Total population aged 14 years and over	56,795	57,714

The following Table No. 63, shows those employed in different industries, classified by Industrial Status, viz., Managerial, Operative, Working on Own Account and Out-of-Work. The Managerial group consists of employers, directors, managers,

superintendents and persons of like status. The figures in column one indicate the same industries as set out in the previous table.

TABLE No. 63.

Industry	Managerial.		Operative.		Own Account.		Out-of-Work.	
	M.	F.	M.	F.	M.	F.	M.	F.
I. ...	—	—	1	—	—	—	—	—
II. ...	32	—	139	8	69	1	40	3
III. ...	3	—	94	12	—	—	31	—
IV. ...	5	1	508	102	—	—	47	7
V. ...	29	1	1,686	145	1	—	91	12
VI. ...	158	4	11,714	2,570	86	4	1,482	258
VII. ...	10	—	102	169	2	4	12	18
VIII. ...	11	—	58	31	9	1	9	6
IX. ...	75	16	410	1,313	115	128	55	53
X. ...	70	14	1,179	551	14	2	126	33
XI. ...	21	1	284	24	49	6	52	5
XII. ...	57	3	608	300	21	2	51	17
XIII. ...	193	2	2,973	35	134	—	748	2
XIV. ...	32	2	526	474	25	2	60	28
XV. ...	5	1	877	41	—	—	61	—
XVI. ...	68	1	3,261	159	73	—	468	7
XVII. ...	902	119	5,848	3,223	882	258	551	184
XVIII. ...	35	13	10,423	1,999	—	—	453	44
XIX. ...	87	21	622	721	130	160	34	36
XX. ...	30	—	300	152	30	15	77	34
XXI. ...	267	106	1,001	3,422	198	116	220	416
XXII. ...	2	3	41	28	2	—	227	102
Totals ...	2,092	308	42,655	15,479	1,840	699	4,895	1,265

SICKNESS AND INVALIDITY.

There was no unusual or excessive mortality during the year which calls for any comment under this head.

PHYSICAL FEATURES AND GENERAL CHARACTERISTICS OF THE AREA.

In the physical configuration of the Borough the outstanding feature is Shooters Hill, which rises over 400 feet above sea level. At a little lower level, on the Woolwich and Plumstead side, there is a well-marked plateau of Woolwich and Plumstead Commons, due to the erosion of local clay from off the pebble beds. Lower down still is the level plain of the Thames. Southward, in Eltham and Lee, the land, after sloping downwards from Shooters Hill, rises slightly again in Eltham and then falls away towards New Eltham and Lee, but rises again as it approaches Chislehurst. In the main this area is composed of London clay although there is a considerable amount of sand and gravel in Avery Hill Ward.

SECTION IX.—VITAL STATISTICS.

In accordance with the requirements of the Ministry of Health, the following extracts from the vital statistics of the year are shown below :—

TABLE No. 64.

Births—Legitimate	...	...	...	...	...	1,927
Births—Illegitimate	...	...	...	...	...	73
					—	2,000
Still-births	...	...	...	...	...	75
Still-births—Rate per 1,000 total births	...	...	...	...	...	36·1
Birth Rate	...	...	...	...	...	13·7
Deaths	...	...	...	...	...	1,650
Death Rate	...	...	...	...	...	11·3
Percentage of total deaths occurring in public institutions	...	...	...	...	...	60·18
Number of women dying in, or in consequence of, Child Birth :—						
(a) From Sepsis	...	...	...	...	...	2
(b) From other causes	...	...	...	...	...	1
Deaths of Infants under one year :—						
(a) Legitimate	...	...	...	...	...	113
(b) Illegitimate	...	...	...	...	...	14
Infantile Mortality Rate...	...	...	...	...	...	63
Deaths from Measles (all ages)	...	...	...	...	...	10
Deaths from Whooping Cough (all ages)	...	...	...	...	...	13
Deaths from Diarrhoea (under 2 years of age)	...	...	...	...	...	9

The chief Vital Statistics since 1901 are given in the following Table :—

TABLE No. 65.

YEAR.	Population estimated to middle of each Year.	Births.		Nett Deaths belonging to the District.			
		Nett.		Under 1 year.		At all Ages.	
		Number.	Rate.	Number.	Rate per 1,000 Nett Births.	Number.	Rate.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1901	117,652	3,536	30·1	457	129	1,709	14·6
1902	119,285	3,734	31·3	467	125	1,837	15·4
1903	117,842	3,684	31·3	398	108	1,638	13·9
1904	118,456	3,535	29·8	477	135	1,763	14·9
1905	118,589	3,546	29·9	362	102	1,604	13·5
1906	119,143	3,549	29·8	388	109	1,668	14·0
1907	119,704	3,330	27·8	373	112	1,616	13·5
1908	122,258	3,176	26·0	300	94	1,516	12·4
1909	120,227	2,947	24·5	242	82	1,587	13·2
1910	121,197	2,842	23·6	242	85	1,418	11·7
1911	121,487	2,810	23·1	272	97	1,566	12·9
1912	121,932	2,776	22·8	208	75	1,456	11·9
1913	122,382	2,833	23·1	228	80	1,549	12·7
1914	122,431	2,838	23·2	241	85	1,706	13·9
1915 <i>a</i>	138,200	2,839	21·9	268	94	1,837	14·2
<i>b</i>	129,505						
1916 <i>a</i>	141,783	3,068	23·5	213	69	1,704	13·1
<i>b</i>	130,313						
1917 <i>a</i>	147,078	2,718	20·6	216	79	1,566	11·9
<i>b</i>	131,942						
1918 <i>a</i>	150,650	2,548	19·0	270	106	2,100	15·6
<i>b</i>	134,453						
1919 <i>a</i>	141,918	2,737	20·1	235	86	1,679	12·3
<i>b</i>	136,237						
1920 <i>a</i>	140,000	3,658	26·9	224	61	1,487	10·9
<i>b</i>	135,904						
1921 <i>a</i>	141,700	3,197	23·2	197	62	1,594	11·6
<i>b</i>	137,604						
1922 <i>a</i>	142,350	2,941	21·3	184	63	1,603	11·6
<i>b</i>	138,254						
1923 <i>a</i>	143,530	2,867	20·5	123	43	1,387	9·9
<i>b</i>	140,000						
1924 <i>a</i>	144,400	2,590	18·5	168	65	1,543	11·0
<i>b</i>	139,980						
1925 <i>a</i>	145,440	2,582	18·3	141	55	1,519	10·8
<i>b</i>	140,740						
1926 <i>a</i>	146,200	2,463	17·4	107	43	1,450	10·2
<i>b</i>	141,900						
1927 <i>a</i>	144,770	2,242	15·9	95	42	1,491	10·6
<i>b</i>	140,770						
1928 <i>a</i>	146,600	2,269	16·1	114	50	1,554	11·0
<i>b</i>	141,100						
1929 <i>a</i>	146,800	2,312	16·3	144	62	1,780	12·6
<i>b</i>	141,600						
1930 <i>a</i>	146,800	2,188	15·5	91	42	1,547	10·9
<i>b</i>	141,600						
1931 <i>a</i>	147,400	2,155	15·1	128	59	1,654	11·6
<i>b</i>	142,600						
1932 <i>a</i>	146,400	2,054	14·0	123	60	1,635	11·1
1933 <i>a</i>	146,200	1,857	12·7	116	62	1,634	11·2
1934 <i>a</i>	145,520	2,000	13·7	127	63	1,650	11·3

a Total Population.*b* Civil Population.

The chief Vital Statistics for 1934 for the Wards of the Borough are given in the following Table :—

TABLE No. 66.

Wards.	Popula- tion.	Births.		Deaths under 1.		Deaths at all Ages	
		Number.	Rate.	Number.	Rate.	Number.	Rate.
Dockyard	6,547	112	7·1	9	80	93	14·2
St. Mary's	5,797	97	16·7	4	41	80	13·8
River	10,834	166	15·3	13	78	174	16·06
St. George's	7,853	155	19·7	9	57	83	10·6
Woolwich	31,031	530	17·0	35	66	430	13·9
Burrage	7,394	109	14·7	4	37	103	13·9
Herbert	8,375	122	14·7	2	16	101	12·1
Glyndon	8,144	116	14·2	7	60	111	13·6
St. Margaret's	11,944	144	12·0	9	62	126	10·5
Central	7,422	102	13·7	8	78	126	16·9
St. Nicholas	13,454	202	15·0	22	108	159	11·8
Abbey Wood	11,672	140	12·0	5	35	116	9·9
Plumstead	68,405	935	13·7	57	60	842	12·3
Well Hall	12,278	113	9·2	9	79	94	7·6
Avery Hill	13,268	148	11·1	3	20	130	9·8
Sherard	20,538	274	13·3	23	84	154	7·5
Eltham	46,084	535	11·6	35	65	378	8·2
BOROUGH	145,520	2,000	13·7	127	63	1,650	11·3

If the rates in St. Mary's, River and St. George's Wards and in Woolwich parish are compared with those of previous years, it must be borne in mind that from 1915 to 1931 these rates were calculated on the civilian population and not on the total population.

BIRTHS.

During the year, 2,349 births were registered in the Borough, 1,177 being males and 1,172 females. Corrected by outward (254 males and 292 females) and inward (96 males and 101 females) transfers, these numbers become 2,000, 1,019 and 981 respectively.

The birth rate was 13·7, compared with 12·7 in 1933 and 14·0 in 1932.

Illegitimate Births.—The number of illegitimate births registered was 64. There were 16 inward transfers and 7 outward transfers, making a nett figure of 73, equivalent to 36 per 1,000 births.

Natural Increase of Population.—This term means the excess of births over deaths. In 1930 it was 641 ; in 1931 it was 501 ; in 1932, 419 ; in 1933, 223, and in 1934, 350.

Notification of Births.—During the year 2,334 births were notified. This is at the rate of 99·4 per cent. of the registered births and compares with 99·6 per cent. last year. The births were notified as shown in the following Table :—

TABLE No. 67.

British Hospital for Mothers and Babies	...	...	786
Midwives	...	...	570
St. Nicholas Hospital	...	...	345
Military Families' Hospital	...	...	260
War Memorial Hospital	...	...	183
Medical Practitioners	...	...	62
Parents	...	...	51
Eltham Cottage Hospital	...	...	35
Midwives' Homes	...	...	9
Other persons	...	...	33

In addition to these, 87 notifications were received from the Medical Officer of Health, Lewisham, 44 from the Medical Officer of Health, Greenwich, and 35 from other Medical Officers of Health. Ninety-six still-births were notified. It is known that 1,273 Woolwich births took place in institutions either within or without the Borough, so that the percentage of institutional midwifery for the Borough as a whole was 63·6.

The following Table No. 68, shows the number of corrected births each year since 1930 ; the number of live and still-births notified ; the percentage of notified births and the birth rates for the same period for Woolwich, London and England and Wales.

TABLE No. 68.

Year.	No. of Births.	No. of Live Births Notified.	No. of Still-Births.	Percentage of Births Notified.	Birth Rate.		
					Woolwich.	London.	England and Wales.
1930	2,188	2,272	74	98	15·5	16·3	15·7
1931	2,155	2,303	84	99	15·1	15·0	15·8
1932	2,054	2,209	78	98	14·0	14·3	15·3
1933	1,857	2,154	59	99	12·7	13·2	14·4
1934	2,000	2,334	75	99	13·7	13·2	14·8

MARRIAGES.

There were 1,324 marriages (1,248 in 1933). The marriage rate was 18·19 as compared with 17·70, 15·79, 17·7 and 14·1 in the four preceding years.

DEATHS.

The total number of deaths registered in the Borough was 1,364. This figure includes 167 non-residents who died in the district, but does not include 453 residents who died outside the Borough. When allowance is made for inward and outward transfers the nett figure of 1,650 is obtained. The death-rate for the year was 11·3, compared with 11·2 in 1933 and 11·1 in 1932.

In order to make the local death rate comparable from a mortality point of view with the crude death rate of the country as a whole or with the mortality of any other area, the Registrar General supplies a factor by which the crude death rate should be multiplied, based upon age and sex constitution of the population. This adjusting factor for Woolwich is 1·06, so that the adjusted death rate for 1934 is 12·0.

In 1934 the death-rate for England and Wales was 11·8, for London, 11·9, and the mean death-rate for 121 County Boroughs and Great Towns (including London) was 11·8.

The seasonal mortality in the four quarters of the year was as follows :—First quarter, 13·7 ; Second quarter, 10·1 ; Third quarter, 9·2 ; Fourth quarter, 11·8.

Deaths in Public Institutions.—In tabular form is shown below the number of deaths of Woolwich residents which took place in various institutions during the year.

TABLE No. 69.

<i>Hospitals or Institutions.</i>	<i>Number of Deaths.</i>
Public General Hospitals	694
Voluntary General Hospitals	120
Mental Hospitals	68
Special Hospitals	29
Infectious Diseases Hospitals	35
Sanatoria and Tuberculosis Institutions	15
Cottage Hospitals and Nursing Homes	32
	<hr/>
	993
	<hr/>

The percentage of institutional deaths to total deaths was therefore 60·18.
The following Tables are self-explanatory.

TABLE No. 70.
Birth Rates, Death Rates and Analysis of Mortality in the Year 1934.

	Rate per 1,000 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.	Smallpox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhea and Enteritis (under 2 yrs.).	Total Deaths under 1 year.	Certified by Registered Medical Practitioners.	Inquest Cases.	Certified by Coroner after P.M. No Inquest.	Uncertified Causes of Death.
England and Wales	14.8	0.62	11.8	0.00	0.00	0.09	0.02	0.05	0.10	0.14	0.54	5.5	59	90.4	6.5	2.1	1.0
121 County Boroughs and Great Towns, including London.	14.7	0.66	11.8	0.00	0.00	0.12	0.02	0.06	0.11	0.12	0.47	7.4	63	90.5	6.1	2.9	0.5
140 Smaller Towns (Estimated Resident Populations 25,000 to 50,000 at Census 1931).	15.0	0.67	11.3	0.00	—	0.07	0.02	0.04	0.09	0.14	0.42	3.6	53	91.2	6.1	1.6	1.1
London	13.2	0.50	11.9	0.00	0.00	0.20	0.02	0.07	0.11	0.12	0.56	12.6	67	87.7	6.3	6.0	0.0
WOOLWICH ...	13.7	0.51	11.3	—	—	0.07	0.02	0.08	0.07	0.08	0.62	4.5	63	86.7	9.2	4.1	—

TABLE No. 71.
 Nett Deaths during the Calendar Year 1934, including Non-Residents in Institutions in the Borough.

Causes of Death.	Nett Deaths at the subjoined ages of " Residents " whether occurring within or without the district.													Deaths in Public Institutions.		
	All Ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 35 years.	35 and under 45 years.	45 and under 55 years.	55 and under 65 years.	65 and under 75 years.	75 years and upwards.	In Borough.		Outlying Institutions.	
													Resi- dents.	Non-Resi- dents.		
All Causes	1,650	127	23	21	58	69	64	105	153	288	368	374	562	150	431	
Typhoid and Paratyphoid Fevers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Measles	10	4	1	2	3	—	—	—	—	—	—	—	—	—	8	
Scarlet Fever	3	—	—	—	2	1	—	—	—	—	—	—	—	1	3	
Whooping Cough	13	3	6	2	2	—	—	—	—	—	—	—	2	—	10	
Diphtheria	11	1	2	2	6	—	—	—	—	—	—	—	—	—	11	
Influenza	12	—	—	—	—	—	—	1	1	4	4	2	1	1	1	
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cerebro-spinal Fever	1	—	—	—	—	1	—	—	—	—	—	—	—	1	1	
Tuberculosis of Respiratory System...	120	—	—	—	2	24	22	30	19	13	10	—	57	20	26	
Other Tuberculous Diseases	26	2	—	4	4	6	4	1	1	2	2	—	11	1	9	
Syphilis... ..	9	1	—	—	—	—	—	—	1	6	1	—	5	—	3	
General Paralysis of the Insane, Tabes Dorsalis	5	—	—	—	—	—	—	1	3	1	—	—	1	—	4	
Cancer, Malignant Disease	222	1	—	1	—	—	1	11	36	60	66	46	74	20	47	
Diabetes	17	—	—	—	—	1	1	—	2	4	8	1	8	1	6	
Cerebral Hæmorrhage, etc.	67	—	—	—	—	—	—	3	6	18	16	24	22	5	9	
Heart Disease	391	—	—	—	4	6	11	12	27	68	121	142	97	14	73	
Aneurysm	11	—	—	—	—	—	1	—	2	2	6	—	3	1	2	
Other Circulatory Diseases	55	1	—	—	—	—	—	1	4	14	20	15	8	3	18	
Bronchitis	58	4	1	—	1	—	—	2	1	8	8	33	6	2	17	
Pneumonia (all forms)	126	32	7	2	3	1	3	14	15	25	15	9	40	11	47	
Other Respiratory Diseases	14	—	—	1	1	1	1	2	3	1	2	2	4	1	4	
Peptic Ulcer	18	—	—	—	—	—	—	1	2	5	6	3	1	9	4	
Diarrhoea, etc.... ..	14	9	—	—	2	—	—	—	—	2	1	—	6	7	4	
Appendicitis	9	—	—	1	2	1	—	1	1	1	1	1	3	1	5	
Cirrhosis of Liver	4	—	—	—	—	—	—	—	1	1	2	—	1	—	3	
Other Diseases of Liver, etc....	7	—	—	—	—	—	—	—	2	3	2	—	4	4	2	
Other Digestive Diseases	31	2	1	3	3	2	—	3	2	4	7	4	16	5	11	
Acute and Chronic Nephritis...	45	—	1	—	1	2	2	2	2	9	17	9	12	1	10	
Puerperal Sepsis	2	—	—	—	—	1	1	—	—	—	—	—	1	1	1	
Other Puerperal Causes	1	—	—	—	—	—	—	1	—	—	—	—	1	1	—	
Congenital Debility, Premature Birth, Malformations, etc....	61	58	2	—	1	—	—	—	—	—	—	—	29	14	14	
Senility	55	—	—	—	—	—	—	—	—	—	11	44	30	3	15	
Suicide	23	—	—	—	—	2	—	4	4	10	2	1	3	1	3	
Other Violence... ..	68	3	1	2	5	13	7	5	7	3	9	13	29	13	25	
Other defined Diseases	141	6	1	1	16	7	9	9	8	23	34	27	79	13	32	
Causes ill-defined or unknown ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	

TABLE No. 72.
 Nett Deaths during 1934, classified by Sex and Wards.

Causes of Death.	THE BOROUGH.		WOOLWICH.				PLUMSTEAD.							ELTHAM.		
	Males.	Females.	Dockyard.	St. Mary's.	River.	St. George's.	Burridge.	Herbert.	Glyndon.	St. Margaret's.	Central.	St. Nicholas.	Abbey Wood.	Well Hall.	Avery Hill.	Sherard.
All Causes	908	742	93	80	174	83	103	101	111	126	126	159	116	94	130	154
Typhoid and Paratyphoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	6	4	—	—	—	—	—	—	—	1	1	4	2	1	—	1
Scarlet Fever	1	2	1	—	—	—	—	—	—	—	—	1	1	—	—	—
Whooping Cough	5	8	—	2	—	—	1	2	1	—	1	4	—	—	—	2
Diphtheria	6	5	—	1	—	—	—	—	1	3	1	1	—	—	2	2
Influenza	6	6	—	—	—	—	—	1	—	2	1	2	—	—	—	6
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-spinal Meningitis	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	76	44	7	5	13	14	11	2	7	6	10	6	12	7	9	11
Non-Pulmonary Tuberculosis...	15	11	—	3	—	2	1	1	3	1	1	2	2	2	4	4
Syphilis...	8	1	2	—	3	—	1	1	1	—	1	—	—	—	—	—
General Paralysis of the Insane,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tabes Dorsalis	5	—	—	—	1	—	1	—	—	—	1	—	—	1	1	—
Cancer	119	103	14	10	27	12	12	15	15	16	20	17	18	18	13	15
Diabetes	8	9	—	1	1	—	1	1	2	4	—	1	1	1	2	2
Cerebral Hæmorrhage, etc. ...	30	37	10	4	7	4	7	5	7	2	4	4	3	5	2	3
Heart Disease	191	200	19	22	47	18	23	28	28	26	31	28	21	25	42	33
Aneurysm	6	5	1	—	—	—	1	1	4	1	1	1	—	—	1	—
Other Circulatory Diseases ...	31	24	1	2	3	1	1	8	3	7	4	4	—	5	12	4
Bronchitis	30	28	2	1	6	1	4	2	4	6	8	8	2	3	3	8
Pneumonia	77	49	6	1	18	8	12	4	7	11	9	11	9	7	10	13
Other Respiratory Diseases ...	9	5	1	2	2	—	—	—	1	1	1	1	2	1	1	1
Peptic Ulcer	15	3	—	1	2	1	1	3	—	—	—	1	3	1	3	2
Diarrhœa, etc.	8	6	2	—	1	—	—	1	2	1	—	2	1	—	—	4
Appendicitis	4	5	1	—	—	1	1	—	—	2	1	—	2	1	—	—
Cirrhosis of Liver	3	1	—	1	—	—	—	—	—	—	1	1	—	1	—	—
Other Diseases of Liver, etc. ...	3	4	1	—	1	—	—	2	—	—	—	2	—	—	—	1
Other Digestive Diseases	19	12	2	2	3	2	—	—	1	1	2	6	2	1	4	5
Acute and Chronic Nephritis...	22	23	4	4	1	2	4	4	4	5	2	6	4	—	4	1
Puerperal Sepsis	—	2	—	—	—	1	—	—	—	—	—	—	—	—	1	—
Other Puerperal causes	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—
Congenital Debility, Premature	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Birth, Malformations, etc. ...	27	34	2	1	5	7	3	1	1	7	4	10	1	5	1	13
Senility	24	31	1	2	13	2	2	3	6	4	3	7	4	2	4	2
Suicide	21	2	1	2	2	1	1	3	2	3	4	—	2	1	—	1
Violence	42	26	6	4	5	4	6	1	2	4	5	11	5	1	3	11
Other Defined Diseases	90	51	9	8	13	2	9	12	9	12	10	17	19	5	7	9
Causes ill-defined or unknown	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

Causes of Death.—Table No. 71 shows that 391 deaths were due to Heart Disease, 222 to Cancer, 146 to Tuberculosis, 67 to Cerebral Hæmorrhage and 55 to diseases of circulation. There were 61 deaths from Congenital Debility and Prematurity. These figures differ but little from those of 1933, in some instances being slightly higher and in some instances slightly lower. There were 126 deaths from Pneumonia compared with 86 in 1933. There were 12 deaths from Influenza, compared with 40 in 1933 and 10 deaths from Measles as against one in 1933. Seventy-one per cent. of all deaths occurred in persons over 45 years of age.

Respiratory Disease.—The following Table No. 73 shows the number of deaths each year since 1930 from Respiratory diseases, the annual death-rate, the number of deaths under five years of age, and the percentage of deaths occurring in children under five years of age.

TABLE No. 73.

Year.	Bronchitis.	Pneumonia.	Other Respiratory.	Total.	Death-Rate.	Number under 5 years.	Percentage under 5 years.
1930	61	101	19	181	1·3	35	19·3
1931	91	126	20	237	1·7	54	22·8
1932	67	81	21	169	1·2	40	23·6
1933	52	86	16	154	1·0	21	13·6
1934	58	126	14	198	1·3	47	23·7

Cancer.—The total number of deaths was 222 of which 119 occurred in males and 103 in females. In the following Table No. 74 is shown the number of deaths certified as due to Cancer and Malignant Disease, each year since 1930 :—

TABLE No. 74.

Deaths from Cancer and Malignant Disease.

Year.	Males.	Females.	Total.	Rate.	Percentage of Total Deaths.
1930	107	94	201	1·42	12·99
1931	125	95	220	1·54	13·30
1932	108	102	210	1·43	12·84
1933	105	103	208	1·42	12·72
1934	119	103	222	1·52	13·45

The following Table No. 75, shows the seat of primary disease in all deaths from Cancer (including all other specified malignant tumours).

TABLE No. 75.
Deaths from Malignant Disease.

Seat of Primary Disease.	Males.	Females.	Total.	Deaths in Hospital.
Lip	1	—	1	1
Tongue	9	2	11	7
Mouth and Tonsil	5	—	5	3
Jaw	—	1	1	—
Oesophagus	8	1	9	7
Stomach	22	21	43	18
Liver and Gall Bladder	7	5	12	6
Intestines	9	12	21	12
Rectum	12	6	18	10
Ovary	—	4	4	1
Uterus... ..	—	15	15	8
Breast	1	20	21	10
Skin	2	3	5	3
Larynx	3	1	4	2
Lung	10	—	10	7
Bronchus	6	—	6	6
Pancreas	3	—	3	1
Kidney	1	—	1	—
Bladder	9	2	11	6
Prostate	6	—	6	4
Abdominal Cavity	—	3	3	1
Others and unspecified	2	3	5	3
Sarcoma	3	4	7	5
	119	103	222	121

Maternal Mortality.—The Council appointed two delegates to attend the Autumn Conference of the Maternal Mortality Committee held at the Friends' Hall, Euston Road, in November, and agreed to support the following resolutions:—

“ This Conference welcomes such encouragement to Local Authorities to maintain and develop the Maternity and Child Welfare Services for which they are responsible as is given by Circular 1433, dated October 10th, 1934.

This Conference, however, is deeply impressed by the reports it has received of malnutrition among married women especially in areas where prolonged unemployment persists ; it is not satisfied that all Local Authorities are exercising or can exercise, their present powers so as to prevent continuous and increasing deterioration in health among such women ; and it therefore urges the Ministry of Health and H.M. Government to consider what additional measures, either administrative or financial, are necessary to correct a growing evil.

Further, in view of the reported deterioration in health among women in certain areas, the Conference calls upon Local Authorities to make special

arrangements for the setting up of Women's Clinics under the Public Health Acts for the supervision of post-natal and associated ailments."

The number of deaths from Puerperal Sepsis was 2, and from other accidents and diseases of pregnancy, 1, making a total of 3 maternal deaths, compared with 6 in 1933. The maternal death rate per 1,000 births was 1.44 as against 3.29 in 1933.

The following Table shows the causes of death each year since 1912 :—

TABLE No. 76.
Maternal Mortality, Woolwich, 1912-1934.

Year.	Abortion.	Ectopic Gestation	Placenta Prævia.	Other Puerperal Hæmorrhage.	Other Accidents of Child Birth.	Child Birth with Secondary Causes.	Puerperal Eclampsia	Puerperal Phlebitis and Embolism	Puerperal Fever.	Totals.
1912	1	—	—	—	—	—	1	1	1	4
1913	1	—	—	—	1	—	1	—	2	5
1914	1	—	1	2	—	1	1	1	4	11
1915	1	1	—	—	1	—	2	—	3	8
1916	—	1	1	1	4	—	1	—	7	15
1917	—	1	—	2	—	1	2	1	7	14
1918	1	—	—	2	1	—	1	1	9	15
1919	—	2	1	2	—	—	2	1	5	13
1920	—	1	—	—	1	—	1	3	5	11
1921	—	—	—	—	—	—	3	2	5	10
1922	—	—	—	1	—	—	2	—	3	6
1923	—	—	—	—	1	—	1	—	3	5
1924	—	—	2	1	1	—	3	1	2	10
1925	—	—	1	2	1	1	1	—	3	9
1926	—	1	—	2	—	—	—	1	2	6
1927	—	1	—	—	—	—	1	1	3	6
1928	—	2	1	—	1	—	1	—	8	13
1929	2	2	—	—	2	1	3	1	3	14
1930	1	—	—	—	—	1	2	—	4	8
1931	—	—	—	—	1	—	1	—	6	8
1932	—	—	—	1	—	—	1	—	4	6
1933	—	1	—	—	1	1	—	1	2	6
1934	—	—	—	—	—	1	—	—	2	3
Totals	8	13	7	16	16	7	31	15	93	206

Inquests.—There were 152 inquests held on Woolwich residents during the year, compared with 121 in 1933.

Deaths of Children, 1-5 years of age.—The number of deaths of children between 1 and 2 years of age was 23, and between 2 and 5 years, 21. In 1933 these figures were 13 and 24. The causes of death are given in detail in Table No. 71.

The following Tables, show the variation in the rate of mortality in these ages in the last five years. These rates have been calculated on the estimated populations at these ages and in stated groups of diseases.

TABLE No. 77.

Child Mortality (1—2 years).

Death-rates per 1,000 estimated age population from stated Groups of Diseases.

Period.	Estimated mean Population.	Infectious Fevers.	Tuber- culosis.	Respira- tory Diseases.	Diarr- hœal Diseases.	All other causes.	Total Deaths.
1930	2,190	5.48	.91	4.11	1.37	1.37	13.24
1931	2,071	1.45	1.45	6.76	.48	3.86	14.0
1932	2,016	6.45	—	1.99	.49	2.48	11.41
1933	1,927	2.07	—	3.11	1.55	—	6.75
1934	1,726	5.21	—	4.63	—	3.47	13.32

TABLE No. 78.

Child Mortality (2—5 years).

Death-rates per 1,000 estimated age population from stated Groups of Diseases.

Period.	Estimated mean Population.	Infectious Fevers.	Tuber- culosis.	Respira- tory Diseases.	Diarr- hœal Diseases.	All other causes.	Total Deaths.
1930	6,534	1.39	.46	.92	.00	.76	3.53
1931	6,373	.78	.62	.94	.16	2.20	4.70
1932	6,294	.79	.48	.79	—	1.43	3.49
1933	6,188	.97	.80	.48	—	1.62	3.88
1934	5,953	1.01	.67	.50	—	1.34	3.52

INFANT MORTALITY.

The number of deaths of infants under one year of age was 127, compared with 116 in 1933 and 123 in 1932. The rate of infant mortality resulting from these deaths (deaths under 1 year per 1,000 births) was 63, compared with 62 in 1933 and 60 in 1932. The rates for the different Wards in the Borough are shown in Table No. 66.

The rate for the Administrative County of London was 67, and for England and Wales, 59.

The following Table No. 79, shows the distribution of infant mortality throughout the year, calculated on a varying year basis.

TABLE No. 79.

		<i>Births.</i>		<i>Deaths under 1 year.</i>		<i>Rate.</i>
First Quarter	...	499	...	32	...	67
Second Quarter	...	518	...	31	...	64
Third Quarter	...	510	...	20	...	40
Fourth Quarter	...	473	...	44	...	88

Causes of Death.—The causes of infant mortality are set forth in Tables Nos. 81 and 82, which show the incidence of mortality from each cause for infants, classified by age, sex and wards. It will be noted from these Tables that the chief causes of death were :—Premature Birth, 36 ; Pneumonia, 32 ; Diarrhoeal Diseases, 9 ; Congenital Malformation, 9 ; and injury at birth, 5. The neo-natal mortality rate (deaths under 4 weeks) was 27·5, compared with 33·92 in 1933 and 24·82 in 1932. Of the 55 neo-natal deaths, 34 were certified to be due to Premature Birth ; 5 to Injury at Birth ; 7 to Atelectasis ; 4 to Congenital Malformation and 2 to Pneumonia.

The number of deaths occurring in the first week of life was 39.

Deaths of Illegitimate Children.—Fourteen illegitimate children died, compared with 13 in 1933 and 12 in 1932. The infant mortality rate figure for illegitimate children was 191, compared with 63 for legitimate children.

Institutional Deaths.—In tabular form is shown below the number of deaths of Woolwich infants which took place in various institutions during the year. These figures are included in those shown in Table No. 69.

TABLE No. 80.

<i>Hospitals or Institutions.</i>					<i>Number of Deaths.</i>
Public General Hospitals	...	...	...	...	54
Voluntary General Hospitals	...	...	...	...	11
Special Hospitals	...	...	...	...	12
Infectious Diseases Hospitals	...	...	...	...	6
Cottage Hospitals and Nursing Homes	...	...	...	...	8
					—
					91
					—

Tables are set out in the following pages which classify in various ways causes of infant deaths during 1934.

TABLE No. 81.

Infant Mortality, 1934.

Net Deaths from stated causes at various Ages under One Year of Age.

CAUSES OF DEATH.	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	1 month and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total deaths under 1 year.
Measles	-	-	-	-	-	-	2	1	1	4
Scarlet Fever	-	-	-	-	-	-	-	-	-	-
Whooping Cough	-	-	-	-	-	1	-	1	1	3
Diphtheria and Croup... ..	-	-	-	-	-	-	-	1	-	1
Meningococcal Meningitis	-	-	-	-	-	-	-	-	-	-
Tuberculous Meningitis	-	-	-	-	-	-	-	1	-	1
Abdominal Tuberculosis	-	-	-	-	-	1	-	-	-	1
Other Tuberculous Diseases	-	-	-	-	-	-	-	-	-	-
Syphilis	-	-	-	-	-	-	-	1	-	1
Bronchitis	-	-	-	-	-	2	1	-	1	4
Pneumonia	-	1	-	1	2	10	10	8	2	32
Laryngitis	-	-	-	-	-	-	-	-	-	-
Diarrhoea	-	-	-	-	-	5	2	2	-	9
Injury at Birth	5	-	-	-	5	-	-	-	-	5
Atelectasis	7	-	-	-	7	-	-	-	-	7
Congenital Malformation	1	1	1	1	4	3	-	2	-	9
Premature Birth	24	5	3	2	34	1	1	-	-	36
Atrophy, Debility and Marasmus	-	-	-	1	1	2	1	-	-	4
Erysipelas	-	-	-	-	-	-	-	1	-	1
Convulsions	-	-	-	-	-	-	-	-	-	-
Other Causes	2	-	-	-	2	2	4	1	-	9
	39	7	4	5	55	27	21	19	5	127

Net Births registered during the calendar year ... Legitimate, 1,927 ; Illegitimate, 73.

Net Deaths registered during the calendar year ... Legitimate, 113 ; Illegitimate, 14.

TABLE No. 82.
 Nett Infant Deaths, Classified by Sex and Wards.

CAUSES OF DEATH.	THE BOROUGH.		WOOLWICH.				PLUMSTEAD.							ELTHAM.		
	Males.	Females.	Dockyard.	St. Mary's.	River.	St. George's.	Burage.	Herbert.	Glyndon.	St. Margaret's.	Central.	St. Nicholas.	Abbey Wood.	Well Hall.	Avery Hill.	Sherard.
Measles	2	2	-	-	-	-	-	-	-	-	-	3	1	-	-	-
Scarlet Fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough	-	3	-	-	-	-	-	1	-	-	1	1	-	-	-	-
Diphtheria and Croup	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
Meningococcal Meningitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Tuberculous Meningitis	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-
Abdominal Tuberculosis	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-
Other Tuberculous Diseases... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Syphilis... ..	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-
Bronchitis	2	2	-	1	1	-	-	-	1	-	-	1	-	-	-	-
Pneumonia	17	15	2	1	4	2	2	-	2	2	1	5	1	3	1	6
Diarrhœa	6	3	1	-	1	-	-	-	1	-	-	1	1	-	-	4
Injury at Birth	2	3	1	1	-	-	-	-	1	-	1	-	1	-	-	-
Atelectasis	2	5	-	-	-	1	-	-	-	2	-	-	-	-	-	4
Congenital Malformation	2	7	1	-	1	2	-	-	-	-	1	2	-	1	-	1
Premature Birth	19	17	1	1	3	4	1	1	1	3	2	5	1	4	1	8
Atrophy, Debility and Marasmus	2	2	-	-	1	-	-	-	-	1	1	1	-	-	-	-
Erysipelas	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-
Convulsions	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Causes	5	4	2	-	2	-	1	-	1	-	-	3	-	-	-	-
	60	67	9	4	13	9	4	2	7	9	8	22	5	9	3	23

APPENDIX.

METEOROLOGICAL OBSERVATIONS TAKEN AT THE
ROYAL OBSERVATORY, GREENWICH, DURING THE YEAR 1934.

Week ending.	Temperature of the Air.			Departure from average mean air temperature for 65 years.	Average temper- ature 4 feet below ground.	Number of days on which rain fell.	Rainfall in inches.
	Highest during week.	Lowest during week.	Mean temper- ature.				
Jan. 6	50.4	27.3	39.1	+ 0.8	43.9	3	0.14
" 13	49.7	27.8	41.4	+ 3.5	43.9	5	0.37
" 20	55.0	26.6	43.6	+ 5.1	44.0	6	0.64
" 27	50.0	23.8	34.8	- 4.2	43.1	2	0.11
Feb. 3	42.9	22.5	36.2	- 3.5	42.0	4	0.19
" 10	49.5	31.9	41.4	+ 2.0	41.7	-	—
" 17	51.2	30.6	38.1	- 1.1	41.6	-	—
" 24	49.8	27.5	38.3	- 1.4	41.3	-	—
Mar. 3	49.5	28.1	37.6	- 2.8	41.3	4	0.22
" 10	54.8	30.8	42.0	+ 1.1	41.5	3	0.55
" 17	52.0	36.9	42.5	+ 1.1	42.0	6	1.05
" 24	53.5	31.5	41.8	- 0.3	42.4	3	0.42
" 31	57.5	30.7	42.6	- 1.1	42.9	2	0.03
Apr. 7	58.4	32.4	42.5	- 3.5	43.4	3	0.24
" 14	66.2	29.3	47.8	+ 1.8	43.9	3	0.15
" 21	77.6	41.9	53.2	+ 5.3	45.7	4	0.47
" 28	60.8	37.1	46.9	- 1.7	46.7	6	1.29
May 5	69.7	36.6	52.9	+ 3.3	47.5	1	0.04
" 12	79.1	39.3	55.7	+ 4.3	48.7	4	0.29
" 19	68.9	35.7	51.6	- 1.4	50.3	2	0.07
" 26	72.8	40.7	56.7	+ 1.8	51.3	-	—
June 2	77.6	41.9	58.1	+ 1.3	52.3	-	—
" 9	75.6	44.1	55.8	- 2.4	53.2	3	0.12
" 16	87.3	42.6	63.2	+ 4.7	54.2	-	—
" 23	90.6	49.8	64.2	+ 4.3	55.7	3	0.26
" 30	78.1	48.2	60.9	- 0.6	56.2	5	1.11
July 7	82.4	48.8	66.3	+ 4.3	57.2	-	—
" 14	84.0	50.5	66.4	+ 3.6	58.5	2	0.32
" 21	88.4	51.4	67.7	+ 4.4	50.6	2	0.22
" 28	83.6	51.7	65.4	+ 2.7	59.6	1	0.32
Aug. 4	82.0	47.6	64.8	+ 2.6	59.9	4	0.26
" 11	77.8	49.9	62.9	+ 0.7	59.8	3	0.17
" 18	81.6	48.9	62.7	+ 0.4	59.4	2	0.36
" 25	76.8	48.1	62.3	+ 1.2	59.5	2	0.26
Sept. 1	77.2	41.1	57.9	- 2.4	59.4	3	0.67
" 8	82.7	43.1	62.4	+ 3.1	58.8	3	0.64
" 15	82.4	43.9	63.7	+ 5.7	59.0	2	0.05
" 22	74.7	41.9	58.9	+ 2.4	59.1	2	0.27
" 29	81.3	44.0	58.1	+ 3.0	58.4	3	0.23

APPENDIX—*continued.*

Week ending.	Temperature of the Air.			Departure from average mean air temperature for 65 years.	Average temperature 4 feet below ground.	Number of days on which rain fell.	Rainfall in inches.
	Highest during week.	Lowest during week.	Mean temperature.				
Oct. 6	69.0	44.1	55.4	+ 2.0	57.9	5	0.62
" 13	66.9	42.9	56.9	+ 5.6	57.2	4	0.23
" 20	61.2	36.0	50.4	+ 0.9	56.4	3	0.11
" 27	65.3	40.2	54.2	+ 6.3	55.6	2	0.11
Nov. 3	55.9	28.2	42.1	— 5.0	54.5	1	0.07
" 10	51.7	31.1	42.5	— 2.9	52.4	5	1.74
" 17	51.1	32.0	44.2	+ 0.9	51.2	4	0.39
" 24	51.3	32.0	43.3	+ 1.1	50.5	—	—
Dec. 1	55.0	38.0	48.0	+ 6.6	50.1	2	0.06
" 8	56.9	45.6	52.1	+ 10.9	50.4	6	1.67
" 15	53.8	40.1	47.3	+ 6.8	50.4	7	1.24
" 22	53.6	32.3	44.7	+ 5.1	49.6	5	0.62
" 29	51.4	36.0	44.6	+ 6.0	48.5	7	0.83