

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

Contributors

St. Margaret & St. John, Westminster (London, England). Parish. Vestry.
Norton, John.

Publication/Creation

1899.

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ANNUAL REPORT
UPON THE
PUBLIC HEALTH & SANITARY CONDITION
OF THE
UNITED PARISHES

OF
St. Margaret & St. John, Westminster,

FOR THE YEAR 1898,

BY

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Medical Officer of Health,

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London :

WIGHTMAN & Co., LIMITED, " OLD WESTMINSTER PRESS,"
REGENCY STREET, S.W.

—
1899,



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To the Members of the United Vestry.

MY LORDS AND GENTLEMEN,

I have the honour to place before you my Annual Report on the health, sanitary condition, and vital statistics of the United Parishes, for the year 1898.

METEOROLOGICAL SUMMARY.

FIRST QUARTER.

The mean reading of the barometer was 29·875 inches; the mean temperature of the air 41·5°. The amount of rain measured during the quarter was 3·24 inches, and the amount of bright sunshine recorded was 156·9 hours.

In January the weather was generally dry, mild and dull; in February it was still mild and dull, but with frequent rain. In March, with the exception of a few warm days in the middle of the month, it was cold.

March was the coldest and January the warmest month in the quarter.

SECOND QUARTER.

The mean reading of the barometer was 29·740 inches; the mean temperature of the air was 52·4°; the rainfall was 5·32

inches, and the amount of bright sunshine recorded during the quarter was 453·5 hours.

In April the weather was generally dull, but there was little rain; in May it was dull and cold with frequent rain; and in June it was dull and cool with very little sunshine.

THIRD QUARTER.

The mean reading of the barometer during this quarter was 29·903 inches; the mean temperature of the air was 62·7°; the rainfall measured 2·51 inches; and the duration of bright sunshine recorded was 619·1 hours.

The weather in July was for the most part dry and dull, with a temperature below the average; in August it was fine and bright with a remarkably hot period from the 11th to the 23rd; the weather in September was remarkable for its small rainfall, unusual amount of sunshine and an exceedingly hot period from the 2nd to the 17th.

FOURTH QUARTER.

During this quarter the mean reading of the barometer was 29·748 inches; the mean temperature of the air was 48·5°; the rainfall measured 7·78 inches, and the duration of bright sunshine registered was 185·4 hours.

The weather during the quarter was generally mild and dull. The temperature was below its average on a few days in each month, but the aggregate of all such cold periods from the beginning of October to the end of December was only about three weeks.

Fogs were prevalent from November 9th to 15th, and on December 27th a strong gale was experienced which caused much damage and loss of life.

BIRTHS AND DEATHS.

The number of births registered during the year 1898, when all the corrections have been made, was 1,088, showing a birth-rate of 19·6 per 1,000 of the population. 277 births occurred in St. Margaret's parish, of which 140 were males and 137 females, giving a birth-rate of 12·9 per 1,000; and 811 births in St. John's parish, of which 401 were males and 410 females, giving a birth-rate of 23·7 per 1,000.

The number of deaths of parishioners duly corrected amounted to 1,093, showing a recorded death-rate of 19·7, and a corrected death-rate of 22·2 per 1,000 of the population. Of these deaths 373 occurred in St. Margaret's Parish, giving a recorded death-rate of 17·4, and 720 in St. John's parish, giving a recorded death-rate of 15·2 per 1,000.

The following comparative table shows the birth and death rates per 1,000 during the past seven years for the United Parishes, viz. :—

YEAR.	BIRTH-RATE.	DEATH-RATE.	
		Recorded.	Corrected for age and sex distribution.
1891	26·8	19·7	22·2
1892	24·7	23·0	26·0
1893	24·4	23·1	26·1
1894	21·9	18·0	20·3
1895	22·9	20·7	23·4
1896	21·9	17·7	21·1
1897	22·2	18·0	20·3
1898	19·6	19·7	22·2

HEALTH OF LONDON DURING 1898.

132,432 births occurred in London during 1898, compared with 82,391 deaths, giving a natural increase of population of 50,041. The following table will give an idea of the acreage, population and deaths from chief zymotic diseases which have occurred in London during the past year :—

Acreage	...	...	...	...	74,672
Population in 1891	...	...	...	...	4,211,743
Deaths of Infants under one year of age	...	...	...	...	22,126
Deaths from Small Pox	...	...	...	...	1
„ Measles	...	...	...	...	3,070
„ Scarlet Fever	...	...	...	...	531
„ Diphtheria	...	...	...	...	1,789
„ Fever	...	...	...	...	597
„ Diarrhoea	...	...	...	...	4,363
„ Cholera	...	...	...	...	130
„ Violence	...	...	...	...	3,503

HEALTH OF ENGLAND AND WALES DURING 1898.

922,873 births occurred, giving a birth-rate of 29·4, and the number of deaths registered was 552,046, giving a death-rate of 17·6. The natural increase of population being 370,827.

UNITED KINGDOM.

The population of the United Kingdom in the middle of 1898 was estimated at 40,188,927 persons; that of England and Wales at 31,397,078, that of Scotland at 4,249,946; and that of Ireland at 4,541,903.

The following table gives the distribution of the deaths of parishioners dying in various institutions and elsewhere, all of which are included in the mortality statistics :—

<i>Institutions.</i>	<i>Deaths.</i>	<i>Institutions.</i>	<i>Deaths.</i>
Westminster Hospital	...258	Cancer Hospital ...	... 1
Station "	... 21	Royal Free Hospital ...	... 1
St. George's Infirmary	...210	Children's Hospital, Great	
Convent ... "	... 2	Ormond-street ...	... 1
St. George's Hospital	... 25	Queen Charlotte's Hospital	... 1
Charing Cross "	... 3	47, Albany Street, Regent's	
German "	... 1	Park ... "	... 1
Brompton "	... 6	Royal Western Ophthalmic	
St. Thomas's "	... 10	Hospital ... "	... 1
Victoria "	... 2	Hyde Park Barracks ...	... 1
St. Peter's "	... 1	Wellington "	... 1
South Western Fever Hos-		Regent's Park "	... 1
pital ... "	... 7	Friedenheim ...	... 1
Western Fever Hospital	... 9	Hostel of God ...	... 1
North Western "	... 1	Dr. Barnardo's Home ...	... 1
Fountain "	... 1	Asylum—Middlesex ...	... 1
St. Bartholomew's	... 2	" Leavesden ...	... 1
Chelsea Workhouse	... 1	" Cane Hill ...	... 1
St. George's Workhouse	... 2	" Caterham ...	... 2
Grosvenor Hospital	... 3	" Colney Hatch ...	... 1
Belgrave "	... 5	" Hanwell ...	... 1
Herbert "	... 1	" Hoxton House ...	... 2
St. Mary's "	... 1	Elsewhere ... "	... 6
Middlesex "	... 1		

TABLE I., giving the death-rates from certain classes of disease in the district :—

	Years.	Whole District.	St. Margaret's.	St. John's.
1. Chief Zymotic Diseases	1894	2·1	1·5	2·4
	1895	1·7	1·0	2·1
	1896	2·0	1·3	2·5
	1897	2·1	0·9	2·9
	1898	2·7	1·5	3·4
2. Phthisis...	1894	2·3	2·3	2·4
	1895	2·0	1·6	2·2
	1896	2·1	1·8	2·3
	1897	2·5	2·1	2·7
3. Pulmonary Diseases, including Bronchitis, Pneumonia and Pleurisy	1898	2·3	2·1	2·5
	1894	4·7	4·6	4·5
	1895	5·6	5·3	5·7
	1896	3·7	3·2	3·9
	1897	2·9	2·8	3·0
	1898	2·1	3·5	3·9

TABLE II.—Comparative Table of deaths from the principal zymotic diseases and deaths of infants under one year of age:—

YEARS.	1892.	1893.	1894.	1895.	1896.	1897.	1898.
Deaths (Total)	1297	1290	1006	1154	987	1005	1093
Small Pox	—	—	—	—	—	—	—
Measles	77	5	37	23	17	23	48
Scarlet Fever	18	25	8	9	10	14	6
Diphtheria & Membranous Croup	44	14	22	15	22	20	20
Whooping Cough	20	15	19	13	28	13	37
Typhus	—	—	—	—	—	—	—
Enteric Fever	3	7	4	3	10	5	10
Simple & ill-defined Fever Diarrhœa	22	43	11	27	28	40	26
Deaths of Infants under one year of age	233	255	180	246	209	200	198
Deaths under one year to every 1,000 Births re- gistered	169	188	147	192	171	161	182

(A₁) TABLE III.—DEATHS during the year 1898 in the Metropolitan Sanitary District of ST. MARGARET, Westminster, classified according to Diseases, Ages, and Localities.

LOCALITIES. ST. MARGARET.	MORTALITY FROM ALL CAUSES, AT SUBJOINED AGES.							MORTALITY FROM SUBJOINED CAUSES, DISTINGUISHING DEATHS OF CHILDREN UNDER FIVE.																											
	At all Ages.	Under 1	1—5.	5—15.	15—25.	25—65.	65 & upwards.	AGES.	1 Smallpox.	2 Scarlatina.	3 Diphtheria.	4 Membranous Croup.	5 Typhus.	FEVERS									10 Cholera.	11 Erysipelas.	12 Measles.	13 Whooping Cough.	14 Diarrhoea and Dysentery.	15 Rheumatic Fever.	16 Ague.	17 Phthisis.	18 Bronchitis, Pneumonia, and Pleurisy.	19 Heart Disease.	20 Injuries.	21 All other Diseases.	22 Total.
														6 Enteric (or Typhoid.)	7 Continued.	8 Relapsing.	9 Puerperal.																		
Westminster Hos- pital	258	40	34	23	19	124	18	Under 5 5 upwds.	...	...	4	...	...	1	...	...	...	...	...	...	...	...	1	12	...	...	1	24	1	2	28	74
Convent	2	1	...	...	...	...	1	Under 5 5 upwds.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Rest of Parish ...	211	34	27	5	6	94	45	Under 5 5 upwds.	...	...	2	...	...	...	...	...	...	...	...	...	7	7	1	...	...	...	6	1	3	34	61	
NET TOTAL ...	373	39	38	9	9	165	113	Under 5 5 upwds.	...	...	6	...	...	...	...	...	...	...	...	...	9	8	3	...	...	...	11	1	3	36	77	
									...	...	2	...	...	...	...	...	...	...	...	...	1	2	1	2	...	...	45	66	56	15	106	296

The subjoined numbers have also to be taken into account in judging of the above records of Mortality.

Parishioners dying out- side parish ...	160	4	11	4	3	71	67	Under 5 5 upwds.	...	...	4	...	...	...	...	...	...	...	...	...	2	1	2	...	...	...	4	...	...	2	15
Strangers dying in parish	258	40	34	23	19	124	18	Under 5 5 upwds.	...	...	4	...	...	1	...	...	...	...	...	...	...	1	12	...	...	1	24	1	2	28	74
									...	...	1	...	...	3	...	...	...	...	...	...	...	2	...	...	1	13	20	26	19	98	184

TABLE V.—Comparative statement of deaths from Tubercular and other Zymotic diseases, with age incidence, death rates, &c.

1897. (AGE.)	Tubercular Diseases.			Meningitis.	Peritonitis.	Bones.	Totals.	Small-pox, Scarlet Fever, Diphtheria and Enteric Fever (Notifiable).	Measles and Whooping Cough (Non-Notifi- able).	Totals.	Deaths from all causes.
	Lungs.	General.	Tabes Mesen- terica.								
Under 5 ...	1	6	8	16	1	—	32	19	36	55	—
5 & under 15	—	2	—	4	—	1	7	12	—	12	—
15 to 45 ...	138	1	—	1	2	2	144	8	—	8	—
Totals ...	139	9	8	21	3	3	183	39	36	75	1,005
Total Death Rates	3·2 per 1,000 of the population.							1·3 per 1,000 of the population.			18·0 per 1,000 of the popu- lation.

1898. (AGE.)	Tubercular Diseases.			Meningitis.	Peritonitis.	Bones.	Totals.	Small-pox, Scarlet Fever, Diphtheria and Enteric Fever (Notifiable).	Measles and Whooping Cough (Non-Notifi- able).	Totals.	Deaths from all causes.
	Lungs.	General.	Tabes Mesen- terica.								
Under 5 ...	3	11	3	18	3	1	39	19	80	99	—
5 & under 15	—	5	—	5	—	4	14	5	5	10	—
15 to 45 ...	120	4	—	4	2	—	130	12	—	12	—
Totals ..	123	20	3	27	5	5	183	36	85	121	1,093
Total Death Rates	3·2 per 1,000 of the population.							2·1 per 1,000 of the population.			19·7 per 1,000 of the popu- lation.

(B) TABLE OF POPULATION, BIRTHS, AND OF NEW the Medical Officer of Health, during the year 1898, in classified according to Diseases,

CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Sanitary Districts of St. Margaret and St. John, Westminster, Ages and Localities.

LOCALITIES.	POPULATION AT ALL AGES.		Registered Births.	NEW CASES OF SICKNESS							IN EACH LOCALITY.				NUMBER OF SUCH CASES REMOVED FROM HOME TO HOSPITALS.														
	Census 1891.	Estimated to middle of 1898.		AGES.	1	2	3	4	5	6	7	8	9	10	11	TOTALS	1	2	3	4	5	6	7	8	9	10	11	TOTALS.	
																													Smallpox.
ST. MARGARET.																													
Westminster Hospital	Under 5
Convent	5 upwards...	...	1	2	2	5	...	1	2	5
Rest of Parish...	Under 5	8	11	19	...	7	6	13	
				5 upwards...	1	24	32	11	1	14	83	1	20	30	7	1	...	60		
TOTAL	21,668	20,761	277	Under 5	8	11	19	...	7	6	13		
				5 upwards...	1	25	32	13	1	16	88	1	21	30	9	1	...	65			
ST. JOHN.																													
Grosvenor Hospital	Under 5	
Station Hospital	5 upwards...	
Rest of Parish	Under 5	18	27	1	...	3	1	50	...	16	24	1	...	2	44		
				5 upwards...	...	45	56	29	1	...	1	34	166	...	43	49	23	6	121		
TOTALS	34,092	31,813	811	Under 5	18	27	1	...	3	1	50	...	16	24	1	...	2	1	44		
				5 upwards...	...	45	56	29	1	...	1	34	166	...	43	49	23	6	121		

“Notification of Infectious Disease” has been compulsory in the District since Metropolitan Asylums Board, and occasionally the London

October 31st, 1889. The Isolation Hospitals are the Hospitals of the Fever Hospital and the London Small-Pox Hospital.

REMARKS ON INFECTIOUS DISEASES.

Small-Pox.—No death occurred from this disease during the year, and only one case was reported, in St. Margaret's Parish, which, however, was afterwards found to be a case of Chicken-Pox. Notice was received from Sir John Monckton of a man living at 149, Vauxhall Bridge Road, who had been engaged at Middlesborough in erecting an iron hospital where Small-Pox was raging at the time. The man, however, continued quite well and no further action was therefore necessary.

Scarlet Fever.—Six deaths occurred from this disease during the year, compared with 14 deaths in 1897. Ninety-six cases were notified. Two un-notified cases, however, came to my notice by chance in April through the kindness of the Librarian of the Public Library, and I found that the patients were still borrowing books, although when I examined I found them to be scaling freely, in fact, their stockings were full of scales. One of the little girls was out in the street when I visited her mother's house. Had these cases not become known the patients might have become centres for the free dissemination of Scarlet Fever right and left.

Sir R. Thorne, in his Annual report, says with regard to Scarlatina "Return Cases":—

The streptococcus *Scarlatinæ* or *Conglomeratus*, discovered by Dr. Klein a dozen years ago alike in the blood of scarlatina patients and in the udder-ulcers of cows the milk from which had been disseminating Scarlatina, has, in more recent years and on Continental authority, been found constantly present in the throat secretions of persons in the acute stage of that disease. This latter fact Drs. Klein and Mervyn Gordon have in the course of their researches as to "Return Cases of Scarlatina" fully confirmed. But though ever present in the throats of patients suffering from this disease in its earlier stages, this streptococcus could not be found by these observers during convalescence from Scarlatina in the skin shed by patients in their progress towards recovery; nor could it be found by them in the urine of such persons, or in the ear discharge from which some Scarlatina convalescents suffer. But in the nasal discharge of persons all but well of their Scarlatina this streptococcus was sometimes found, and, most important of all, it was found to persist, and even to recur, in abundance, in the throat secretions of certain Scarlatina patients long after these persons had to all appearance completely recovered from their illness.

In all probability it is persons who thus retain, or reproduce, in their throats streptococcus *Scarlatinæ*, at dates many weeks subsequent to their attack, that are able on their return

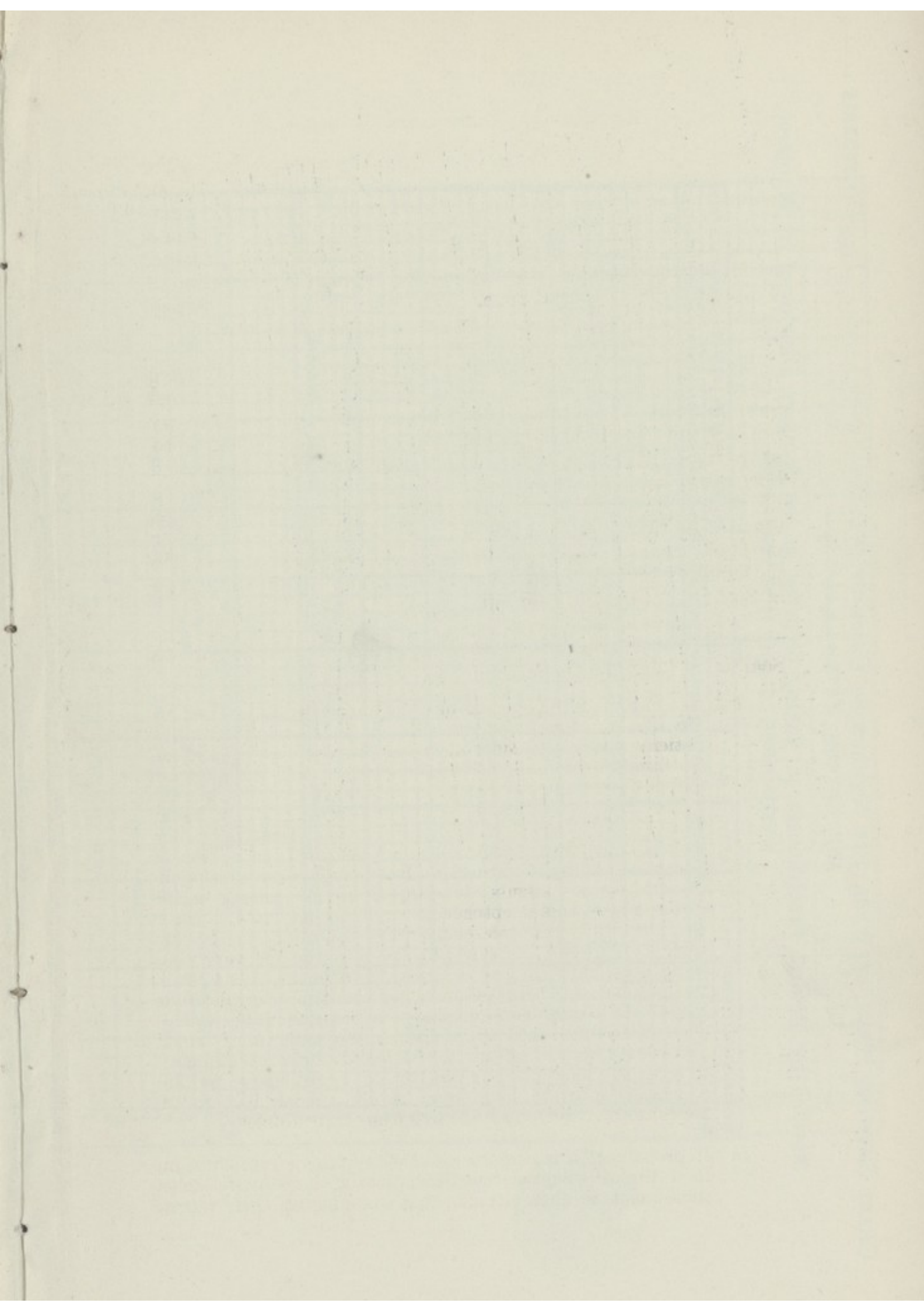
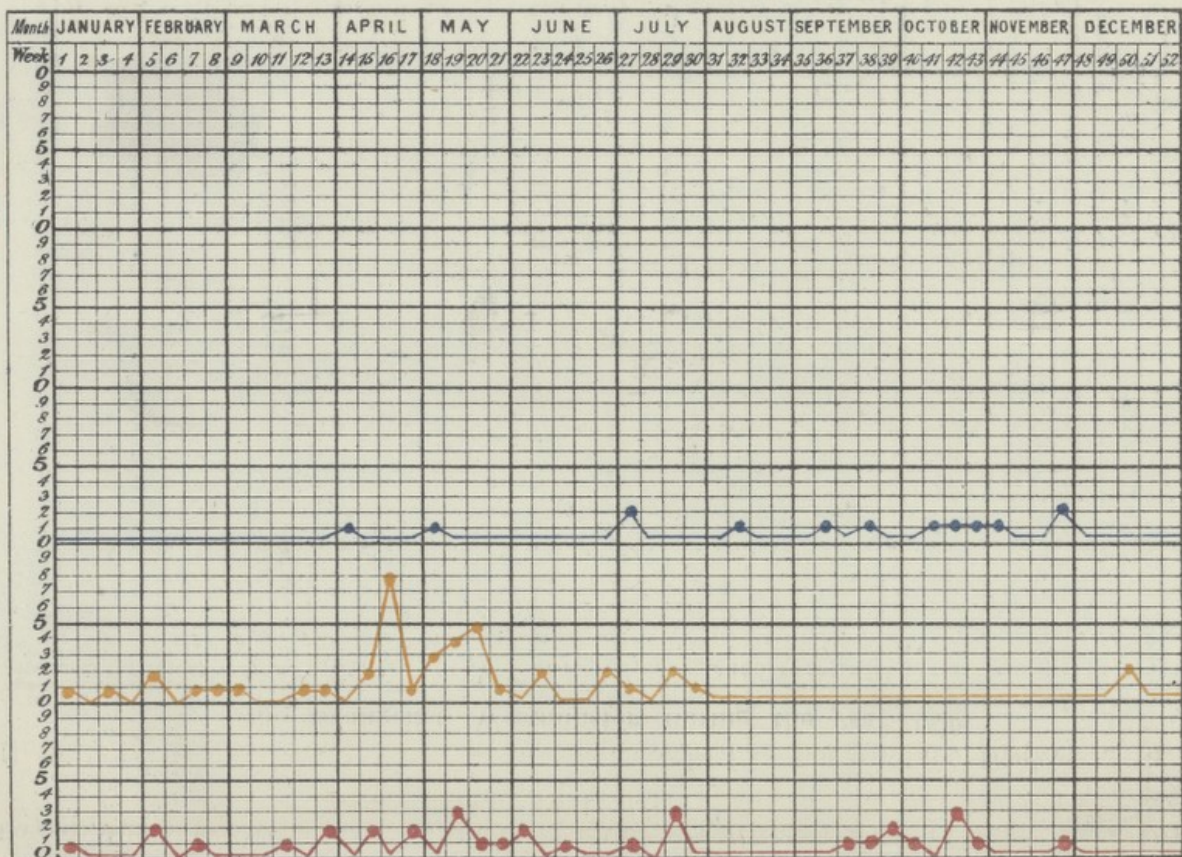


CHART SHEWING WEEK BY WEEK THE NUMBER OF CASES OF SCARLET FEVER _____ DIPHTHERIA _____
AND ENTERIC FEVER _____

Notified by Medical Practitioners as having occurred in the Sanitary District of St. Margaret,
Westminster, during the year 1898.





home from hospital to infect other persons brought into close relation with them. Obviously, therefore, further observation on an extended scale is required as to the proportion of Scarlatina patients in which this streptococcus Scarlatinae is apt to occur, whether in throat secretion or in nasal discharge, in the post-convalescent stage of their malady.

“RETURN” CASES OF SCARLET FEVER AND DIPHTHERIA.

The following is a letter received from the Metropolitan Asylums Board on the above subject:—

With the view to securing a prompt and reliable report upon all cases of Scarlet Fever and Diphtheria that may be alleged to have resulted from the premature discharge of patients from the Board's infectious hospitals, the managers have appointed Dr. W. J. R. Simpson, of 14, Oxford Terrace, Hyde Park, W., to conduct investigations on their behalf into such cases as may be reported during the six months commencing on the 1st of October next.

Dr. Simpson has been instructed to conduct his investigations with the full knowledge and concurrence of, and, as far as may be practicable, in conjunction with, the Medical Officer of Health of the District in which the case under investigation may have arisen; and in view of the important bearing which the successful conduct of these investigations may possibly have upon the incidence of infectious disease generally, and more particularly upon the duration of the hospital treatment of patients, the Managers trust that you, in conjunction with the other Metropolitan Medical Officers of Health, will afford Dr. Simpson every assistance that may lie in your power.

With this object the Board's Medical Superintendents have received instructions to place themselves in communication with yourself, as well as with Dr. Simpson, immediately upon any alleged “return” case being brought to their notice, so that no time may be lost in conducting the necessary investigations, and in tracing, if possible, the probable source of infection.

It was only necessary to communicate with Dr. Simpson *re* one alleged “Return Case of Scarlet Fever,” when the circumstances of the case were duly investigated by him.

Diphtheria.—During the year Diphtheria was very prevalent, chiefly during April, May and June, at the Newport Market Refuge School, Coburg Row, nine cases being reported during one week, and a total of 21 cases was reported during the months

of April, May and June. The boys infected were kept well isolated, and a most rigid examination was enforced each morning by the doctor in attendance, to whose energy and foresight it was chiefly due that the disease was abated. The probability is that the disease was originated by one of the boys visiting in the country a house where there was an inmate suffering from this disease. He, no doubt, got the infection in his clothes or throat and so spread the disease to the other inmates of the Refuge. The whole of the cases ran a mild course, not one having a fatal issue.

The drainage of one portion of this Refuge has since been entirely relaid, and other works carried out.

At St. James the Less Infant School, Upper Garden Street, during October and November several cases of Diphtheria occurred. As an example of how such a disease is spread in a small way by the aggregation of children at school, I may mention that the first case occurred in the main room in a boy who was attacked on October 21st; the second case occurred in the class-room on October 27th; the third case in the main room on October 28th in the person of a girl who sat next the boy referred to. On November 1st the boy who sat next the girl just mentioned was taken with the disease, and the girl who sat next this boy was taken with Diphtheria on November 4th. I may also state that in all these cases, with the exception of one case, they all lived in different streets some way distant from each other, and in the one case mentioned of the two children who lived in the same street, their houses were some distance apart from each other.

In the United Parishes 20 fatal cases of diphtheria occurred, compared with 22 in 1897; 126 cases were notified, 43 from St. Margaret's Parish and 83 from St. John's.

Enteric Fever.—Forty-five cases were notified during the year and ten deaths occurred, eight of them being cases from the Guards' Hospital, which were imported by soldiers serving in the late Soudan Campaign. In one case the origin was distinctly traced to the patient having eaten some infected oysters, and in another to contaminated cocoanut water having been consumed.

Puerperal Fever.—During the year one death only occurred from the above disease; two cases were notified. A letter was received from the London County Council, dated 5th December, forwarding copy of a report by their Public Health

Committee, on the subject of the diseases which would be regarded as being included in the term "puerperal fever" for the purposes of section 55 of the Public Health (London) Act, 1891. The Committee thanked the Council for their letter, and for the information conveyed thereby.

Diarrhœa.—Twenty-six deaths occurred, compared with 40 in 1897. Twenty-three of the deaths occurred in young children under 5 years of age.

Erysipelas.—Four deaths occurred, and 51 cases were notified.

Phthisis.—133 deaths were registered from this disease, of these 45 occurred in St. Margaret's and 88 in St. John's Parish; 18 of the deaths were reported as having occurred in people living in common lodging-houses, chiefly in St. John's Parish, that is about one-seventh of the deaths occurred amongst the occupants of common lodging-houses, which in this district, as in others in London, help to swell the death-rate from this disease. Only three deaths are reported as having occurred in children under 5 years of age. Apart from the above, three cases were registered as *tabes mesenterica*, aged 3 years and under, and five cases as *marasmus*, all under 1 year. With regard to the density of the population of Westminster it is generally given as $67\frac{3}{4}$ persons per acre, and in some statistics as 65; but as Mr. Smith, the Vestry Clerk, points out (Annual Report 1895) the number of persons per acre in what may be called the inhabitable parish is just over 120, whereas the average for the whole of London is 57. St. John's Parish has a population of $162\frac{2}{3}$ per acre. This makes a vast difference in dealing with the death-rate from phthisis in Westminster, as compared with other districts in London, showing Westminster as an apparently bad district.

With regard to the spread of tuberculosis by milk, Sir R. Thorne's three Harben lectures delivered during the past year are well worthy of notice. He shows that the period of forty-five years ending with 1895 has been marked by a reduction of almost 40 per cent. in the aggregate mortality of tuberculous diseases. The reduction has been remarkably steady and continuous throughout that period, and has affected all the age-periods of both sexes into which the span of life is divided in the official tables; and what is especially encouraging is the fact that the chief part of the life-saving represented by this fall in the death-rate has been experienced at those age-

periods when human life is economically the most valuable—namely, during adolescence and early maturity. In the mortality due to pulmonary phthisis, the most important member of this group, there has been since the decade ending with 1860 even greater reduction than in that resulting from tuberculous diseases generally; a fall has taken place in the death-rate at every stage of life, and in the several age groups comprised within the interval between the fifteenth and forty-fifth years the fall since that decade has ranged from 32 to not less than 58 per cent.

Amongst young children pulmonary phthisis is seldom fatal nowadays, and among infants under five years old such mortality as still occurs averages only one-third of what it was forty-five years ago. But there is one member of the tuberculous group, *tabes mesenterica*, to which children are especially liable, and the mortality from this malady instead of falling has actually increased since 1860 by nearly 28 per cent.

Sir R. Thorne points out that whereas pulmonary phthisis is generally produced by the inhalation into the lungs of particles of dried sputa from persons already suffering from phthisis, *tabes mesenterica* is chiefly caused in young children by the ingestion of food and especially of uncooked milk from diseased cows which contains the tubercle bacillus in an active and infective state, the latter finding its way into the mesenteric glands and so infecting the whole body. He also expresses the opinion that compulsory notification of phthisis is impracticable and undesirable in the best interests of public health, and that it would cause infinitely more mischief than it could possibly avert or cure.

BACTERIOLOGICAL EXAMINATION IN CONNECTION WITH THE DIAGNOSIS OF INFECTIOUS DISEASES.

With a view to assisting Medical Practitioners in the district in the diagnosis of Infectious Diseases, the Vestry has now provided at the Town Hall, an incubator, sterilizer and a powerful microscope. The apparatus can be used free of charge on application to the Public Health Department, between the hours of 10.30 a.m. and 4.30 p.m. (Sundays excepted), and between 10.30 a.m. and 12.30 p.m. on Saturdays.

Measles.—Measles were very prevalent at the beginning of the year at St. John's Infant School, Tufton Street. On

January 10th, when the School was re-opened, out of a possible 233 scholars only 123 were present, and of the absent ones twenty-five were known to be suffering from Measles. The school-room was thoroughly disinfected on a day when the scholars were absent, the desks, &c., washed with 1 in 40 carbolic acid, and the disease soon began to rapidly abate.

Notification of Measles.—The Committee had under consideration a letter from the London County Council, dated 18th April, forwarding copy of a letter received by the Council from the School Board for London on the question of classifying measles as a “dangerous infectious disease,” for the purposes set out in section 68 of the Public Health (London) Act, and in order that sanitary authorities may have power to proceed, if necessary, against parents who send their children to school while suffering from measles. Having had experience of the notification of Measles in years gone by, and recognising that Measles is infectious before the rash appears, the Committee recommended that no action be taken in the matter.

During the year 48 deaths occurred from Measles, compared with 23 in 1897.

Whooping Cough.—Whooping Cough, too, was very prevalent at the beginning of the year, and 37 deaths occurred, compared with 13 in 1897.

Influenza.—During the year nineteen deaths occurred from this disease, eight being in St. Margaret’s Parish, and 11 in St. John’s. In 1897 eight deaths only occurred.

NOTIFICATION OF INFECTIOUS DISEASES ARISING IN GENERAL HOSPITALS IN A PARISH.

As there has been a good deal of controversy as to the reading of section 55 (1) (b) of the Public Health (London) Act, 1891, the Statistical Committee of the Metropolitan Asylums Board published the following report to the various Metropolitan Sanitary Authorities:—

By section 55 (1) (b) of the Public Health (London) Act, 1891, it is provided that “every medical practitioner attending on or called in to visit the patient shall forthwith, on becoming

aware that the patient is suffering from an infectious disease to which this section applies, send to the Medical Officer of Health for the district a certificate, stating the full name and the age and sex of the patient, the full postal address of the house, and the infectious disease from which, in the opinion of such medical practitioner, the patient is suffering, and stating also whether the case occurs in the private practice of such practitioner, or in his practice as a medical officer of any public body or institution, *and where the certificate refers to the inmate of a hospital it shall specify the place from which and the date at which the inmate was brought to the hospital, and shall be sent to the Medical Officer of the district in which the said place is situate.*

The words which we have printed in italics in the above quotation are those which give rise to controversy ; but it appears to us that the words admit of no other interpretation than that, wherever a place is situated whence a patient is admitted to a hospital, the notification certificate must be sent to the medical officer of that place, and not to the medical officer of the district in which the hospital stands.

In cases where a patient develops an infectious disease within a short time after admission to hospital, it may reasonably be assumed that the disease was contracted before admission, and obviously, in the interests of public health, the notification of the case should be made, as the Act directs, to the Medical Officer of Health of the district in which the patient had been previously resident. But the utility of such a notification is not so apparent in cases where the patient has been resident in the hospital for a considerable time.

In either case undoubtedly it is desirable that the Medical Officer of Health of the district within which the hospital is situate should be made aware of any outbreak of infectious disease therein. But in our view this is met by section 55 (1) (a) which provides that where an inmate of any house within the district of a sanitary authority is suffering from an infectious disease "the head of the family to which such inmate (in this section referred to as the patient) belongs, and in his default the nearest relatives of the patient present in the house or being in attendance on the patient, and in default of such relatives, *every person in charge of or in attendance on the patient, and in default of any such person, the master of the house,* shall, as soon as he becomes aware that the patient is suffering from an infectious disease to which this section applies, send notice thereof to the Medical Officer of Health of the district."

The Managers will observe that the Act requires two things—a certificate from a medical practitioner, and notice from the

head of the family or other persons, as mentioned in the sub-section last quoted.

In the case of an inmate of a hospital who came to that hospital from a distance the ordinary notification certificate must, it seems to us, be sent to the medical officer of that district; but it seems to us that the local medical officer is entitled, not to a notification certificate, but to "notice" under sub-section (a) above quoted on the occurrence of any case of infectious disease; but there is no provision for paying for this "notice."

A list of the streets with the number of cases of the principal infectious diseases occurring in such streets, is given below :—

ST. MARGARET'S PARISH.

STREET OR PLACE.	Scarlet Fever.	Diphtheria.	Typhoid Fever.	Small-pox.
Arthur-street	—	1	—	—
Ashley-gardens	1	—	—	—
Buckingham-street	—	—	1	—
Carlisle-place	1	—	1	—
Castle-buildings	1	2	1	—
Catherine-street	1	1	—	—
Caxton-street	1	—	1	—
Charles-street	1	—	—	—
Cobourg-row	4	23	1	—
Dean's-yard	—	—	1	—
Francis-street	—	1	—	—
Gardener's-lane	—	—	—	1
James-street	1	1	—	—
Kensington-gardens	1	—	—	—
Lewisham-street	—	1	—	—
Mills-buildings	—	1	—	—
Palace-street	3	2	—	—
Parker-street	—	—	1	—
Peabody-buildings, James-street	1	—	—	—
Queen Anne's-gate	1	3	1	—
Richmond-terrace	—	—	1	—
Rutland-gate	—	3	1	—
Trevor-square	2	—	—	—
Victoria-street	4	3	—	—
Wellington-barracks	3	—	—	—
Westminster Hospital	1	1	2	—
Wilfred-street	1	—	—	—
Willow-street	5	—	—	—
York-street	—	—	1	—

The case of Small-pox mentioned above turned out to be one of Chicken-pox

ST. JOHN'S PARISH.

STREET OR PLACE.	Scarlet Fever.	Diphtheria.	Typhoid Fever.
Alfred-street	—	1	—
Artillery-row	—	—	1
Bell-street	—	1	—
Bennett's-yard.....	1	—	—
Bessborough-gardens	1	1	1
Bessborough-place	6	1	—
Bessborough-street	—	1	1
Carpenter-street	2	—	1
Causton-street	—	—	1
Chadwick-street	—	1	6
Chapter-street	—	1	—
Charlwood-street.....	—	1	—
Churton-street.....	—	4	—
Cobourg-row.....	1	—	—
Dorset-street	—	1	—
Douglas-place	—	1	—
Edward-street	—	—	1
Frederick-street	1	1	—
Great Peter-street	3	1	1
Great Smith-street	1	2	—
Greycoat-place.....	1	1	—
Grosvenor-road	2	2	—
Grosvenor-street	—	—	1
Harper's-place	—	1	—
Hide-place	—	1	—
Horseferry-road	3	3	2
Johnson-street.....	1	—	1
Lillington-street	1	6	—
Little Tufton-street	1	—	—
Marsham-street	—	—	1
Medway-street.....	—	1	—
Millbank-street	1	2	1
New-street	1	—	—
North-street.....	—	1	—
Old Pye-street	—	4	—
Page-street	2	1	1
Peabody-buildings	6	10	1
Ponsonby-place	3	3	—
Ponsonby-terrace	—	1	—
Regency-street.....	1	2	—
Rochester-row	1	—	1
Roehampton-street	1	—	—
Romney-street.....	5	2	1
St. John-street.....	—	—	1
Smith-square	—	3	4
Stanford-street.....	1	—	—
Strutton-ground	2	—	1
Tachbrook-street.....	4	1	—
Tufton-street	3	1	3
Upper Garden-street	—	7	—
Vauxhall-bridge-road	3	8	—
Victoria-street.....	—	1	—
Vincent-square	1	—	—
Vincent-street	2	1	—
Wood-street	1	2	—

Not a case of Small-pox was notified in St. John's parish during the year.

TABLE VI.—VACCINATIONS DURING THE YEAR 1898.

Primary Vaccinations.			Re-Vaccinations by Public Vaccinator.	Conscientious Objectors.
Public Vaccination.	Private Practitioners.	Total.		
407	357	764	11	28

In the 27th Annual Report of the Local Government Board Sir R. Thorne in the Vaccination Officers' returns shows:—

“That after deducting from a total of 921,512 births, those children who were successfully vaccinated, those who died unvaccinated, those who were registered as ‘insusceptible’ of vaccination, and those who had small-pox before vaccination, there still remained 20·5 per cent. who could not be traced or were otherwise not finally accounted for as regards vaccination. The proportion unaccounted for in the Metropolis was 24·9 per cent., that for the rest of England was 19·8; both of which rates show a still further increase on a failure to comply with the provisions of the Vaccination Acts which has been steadily growing for some fifteen years. Indeed, if allowance be made for the further falling off in this respect which is believed to have occurred since 1895, the number of children now born in England and Wales who in one way or another escape vaccination, is probably not much less than one-third of the whole. In this way the country is being prepared for wide-spread epidemics of small-pox such as have been unknown to the present generation; unless, indeed, the invariable rush and clamour for immediate vaccination on the part of those who have neglected or declaimed against the operation during times of freedom from small-pox, should be capable of being so far met in the moment of emergency as largely to mitigate the impending disaster.”

GLYCERINATED CALF-LYMPH LABORATORY.

Arrangements have been made by the Local Government Board at the laboratory of the British Institute of Preventive Medicine for the inoculation of special calves, and for the preparation of the lymph collected from them in the glycerinated form. The distribution of lymph by the Board will be commenced on January 1st, 1899, when the Vaccination Act of 1898 comes into operation. Sir R. Thorne continues thus:—

“Dr. Blaxall, in the same report, gives an account of one additional year's experience in vaccinating the calf, in collecting lymph from the calf; in glycerinating such lymph and in storing it; and as to the results of his bacterial testing of glycerinated calf-

lymph immediately prior to its use in vaccination. In all respects this additional experience has proved satisfactory. It comprised 17 vaccinated calves, the testing of the glycerinated lymph from which involved some 250 plate cultures. Almost invariably agar plates, inoculated, *four weeks subsequent* to collection and glycerination, with samples of the lymph from these 17 calves, failed to exhibit growth of extraneous micro-organisms. In the few instances, in which microbial growth appeared on such "four-week plates," the resistant bacterium proved to be either bacillus subtilis or bacillus mesentericus vulgatus, microbes which, as later experience showed, may be practically excluded from lymph by scrupulous attention to the cleansing of the vaccinated area on the calf immediately antecedent to collection of lymph from the vesicles.

"Dr. Blaxall has carried on a series of interesting experiments on the viability of the tubercle bacillus in glycerinated calf-lymph to which this pathogenic microbe had been purposely and abundantly added; and on the activity qua vaccination of samples of glycerinated calf-lymph which, after having been found free of extraneous micro-organisms, had been subsequently stored for considerable periods of time. He finds that the added tubercle bacillus is invariably killed off by a month's sojourn in this glycerinated lymph; that after having been thus dealt with it will not grow in its appropriate culture media, nor produce any pathogenic effect whatever on the guinea pig. And as regards the keeping quality of glycerinated lymph, he finds that at a period nine months subsequent to its having been demonstrably free from extraneous microbes, it is potent to cause in babies vaccinia vesicles in 100 per cent. of the points at which it was inserted."

Well worthy of attention at the present time is the following:—

FACTS ABOUT SMALLPOX AND VACCINATION.

*Issued by the Council of the British Medical Association,
December, 1897.*

- (1.)—The mortality from small-pox is much less now than in prevaccination times.
- (2.)—The greatest diminution in the small-pox mortality is found in the early years of life, in which there is most vaccination.
- (3.)—In countries where there is much vaccination and re-vaccination relatively to the population, there is little small-pox.
- (4.)—In classes among which there is much vaccination and re-vaccination there is little small-pox.
- (5.)—In places where small-pox prevails it attacks a much greater proportion of the unvaccinated than of the vaccinated, especially where the vaccinations are comparatively recent.

- (6.)—In houses invaded by small-pox in the course of an outbreak not nearly so many of the vaccinated inmates are attacked as of the unvaccinated in proportion to their numbers.
- (7.)—The fatality rate among persons attacked by small-pox is much greater, age for age, among the unvaccinated than among the vaccinated.
- (8.)—It cannot be truthfully alleged that independently of vaccination small-pox is a milder disease now than in former centuries.
- (9.)—The degree of protection conferred by vaccination corresponds to the thoroughness with which the operation has been performed, three or four marks being much better than one or two, and a large mark much better than a small one.
- (10.)—Sanitation cannot account for the facts above set forth.
- (11.)—Though isolation of small-pox cases in hospitals is a useful auxiliary to vaccination it is no substitute for it.
- (12.)—Vaccination is very safe.
- (13.)—Calf lymph is now available to boards of guardians, etc., for the vaccination of every child in this country.

NEW ACTS AND ORDERS, 1898.

VACCINATION ACT, 1898.

This Act received the Royal Assent on August 12th, 1898, but with the exception of the "Conscience Clause" which became law on that date (Section 2), the Act does not come in force until January 1st, 1899. It will be in operation five years, until January 1st, 1904, and apply to England only.

The chief alterations in the New Act are as follows :—

1. The period within which vaccination is to take place is extended from three to six months.
2. The operation is to be performed, if required, in the child's home.
3. Glycerinated Calf-lymph is to be used if possible.
4. The conscientious objector is not to be compelled to submit his child to the operation.
5. A recalcitrant parent cannot be convicted more than twice (*e.g.*, once under each of the sections 29 & 31 of the Vaccination Act, 1867).

6. If imprisoned, he is to be treated as a first-class misdemeanant.

Section I., Sub-section 4, is of especial importance to Medical Officers of Health. It is as follows :—

“The public vaccinator shall not vaccinate a child if, in his opinion, the condition of the house in which it resides is such, or there is or has been such a recent prevalence of infectious disease in the district, that it cannot be safely vaccinated, and in that case shall give a certificate under Section xviii. of the Vaccination Act of 1867 of postponement of vaccination, and shall forthwith give notice of any such certificate to the medical officer of health for the district.”

This Section is enforced so that the child may have favourable sanitary surroundings and escape all risk from septic diseases whilst there is an open vaccination wound.

Section II., Sub-section 1, “The Conscience Clause” over which there has already been so much controversy, and the interpretation of which seems to have puzzled a great many magistrates, says :—

“No parent or other person shall be liable to any penalty under Section 29 or Section 31 of the Vaccination Act of 1867 if within four months of the birth of the child he satisfies two justices or a stipendiary or metropolitan police magistrate in petty sessions that he conscientiously believes that vaccination would be prejudicial to the health of the child, and within seven days thereafter delivers to the vaccination officer for the district a certificate by such justices or magistrate of such conscientious objection.”

This is after the lapse of four months, and on the receipt of a twenty-four hours' notice from the public vaccinator it will be too late for a parent to make a conscientious objection, for *Section I., Sub-section 3*, says :—

“If a child is not vaccinated within four months after its birth, the public vaccinator of the district, after at least twenty-four hours' notice to the parent, shall visit the home of the child, and shall offer to vaccinate the child with glycerinated calf lymph or such other lymph as may be issued by the Local Government Board.”

If, upon the arrival of the Public Vaccinator the parent or other custodian objects to have the child vaccinated he will incur the penalty.

Section VIII. says :—

“The clerk of any sanitary authority which shall maintain a hospital for the treatment of small-pox patients shall keep a list of the names, addresses, ages, and condition as to vaccination of all small-pox patients treated in the hospital, such entries to be made on admission, and shall at all reasonable times allow searches to be made therein, and upon demand give a copy under his hand or under that of his deputy of every entry in the same on payment of a fee of sixpence for each search, and threepence for each copy.”

This is an important section from a statistical point of view, as in time it will render it possible to ascertain what percentage of persons afflicted with small-pox have been vaccinated.

VACCINATION ORDER, 1898.

This Order was issued by the Local Government Board on October 18th, 1898, to the Board of Guardians of every Poor Law Union in England and Wales, and to the Public Vaccinators of the several Vaccination Districts in England and Wales, and to all others whom it may concern.

Its provisions are put forth in view of the difficulties which the Vaccination Act, 1898 (Section 2, Conscience Clause), has already caused, and in view of prospective difficulties which may arise when the new Act comes into force on January 1st, 1899.

The Order is made chiefly under Sections VI. and VII., Vaccination Act, 1898.

Section VI. of the Vaccination Act, 1898, states that “the Local Government Board may make rules and regulations with respect to the duties and remuneration of public vaccinators, whether under contracts made before or after the passing of this Act.”

Section VI. of the Vaccination Act of 1867 is repealed, and the functions of the Poor Law Board set out therein with regard to the terms of the contract to be made with the public vaccinator are now vested in the Local Government Board.

Section VII. provides that “the Local Government Board may by order, if in their opinion it is expedient by reason of serious risk of outbreak of small-pox or of other exceptional circumstances, require the guardians of any poor law union to

provide vaccination stations for the vaccination of children with glycerinated calf-lymph or such other lymph as may be issued by the Local Government Board and modify as respects the area to which the order applies, and during the period for which it is in force, the provisions of this Act requiring the public vaccinator to visit the home of the child otherwise than on request of the parent."

The Order consists of thirty-two Articles and five Schedules.

Article 1 provides that the validity of existing contracts with public vaccinators, and the appointment and tenure of office of existing vaccination officers are not interfered with excepting that the duties and remuneration must be in accordance with the new Order.

Article 3 deals with the remuneration of public vaccinators, and states that—

- (a) A payment of not less than one shilling in respect of every child whose birth shall have been registered in his district after the Thirty-first day of August, One thousand eight hundred and ninety-eight, or who shall be resident in his district and whose birth shall have been registered in some other district after that date, or shall not have been registered at all, except children who shall have died or been removed from the district before attaining the age of four months, or who shall have been duly certified to have been successfully vaccinated otherwise than by the Public Vaccinator, or to be insusceptible of vaccination, or to have had small-pox, before reaching that age, or with regard to whom a certificate under Section 2 of the Act of 1898 is in force ;
- (b) A payment of not less than five shillings in respect of every successful primary vaccination or re-vaccination performed by him at the home of the person vaccinated ; and
- (c) A payment of not less than two shillings and sixpence in respect of every successful primary vaccination of any person other than a child, or of any successful re-vaccination, such primary vaccination or re-vaccination having been performed by him at his surgery or elsewhere than at the home of the person vaccinated :

Provided that no payment shall be made in respect of any vaccination unless the same shall have been performed in accordance with the conditions herein prescribed, nor unless the provisions of the Vaccination Acts, 1867 to 1898, and of this Order as to certificates and otherwise have been observed with reference thereto ;

Provided also that no payment shall be made in respect of the re-vaccination of any person who shall be less than ten years old, or who shall have been previously re-vaccinated within a period of ten years.

Articles 6 to 9, inclusive, deal with the duties of the public vaccinator, which are further specified in the third Schedule. His domiciliary visits must be made between 9 A.M. and 4 P.M., and he must give twenty-four hours' notice. His visit must be made within a fortnight after receiving the notice from the vaccination officer or a request from the parent.

The public vaccinator must keep such record of the lymph he uses for vaccinating as will enable him always to identify the origin of the lymph used in each operation. He must not employ lymph supplied by any person who does not keep an exact record of its source.

The public vaccinator must keep in good condition the lancets or other instruments which he uses for vaccinating, and he must not use them for any other purpose whatever. When he vaccinates he must cleanse and sterilise his instruments after one operation before proceeding to another and must always, when vaccinating, have with him the means of doing this. When once he has unsealed a tube of lymph he must never attempt to keep any part of its contents for the purpose of vaccination on a future occasion. Under no circumstances should the mouth be applied directly to the tube in which the lymph is contained for the purpose of expelling the lymph. In the case of ordinary capillary tubes an artificial blower may properly be used for this purpose.

Vaccination should at every stage be carried out with aseptic precautions. These should include: 1st, the cleansing of the surface of the skin before vaccination; 2nd, the use of sterilised instruments; and 3rd, the protection of the vaccinated surface against extraneous infection both on the performance of the operation and on inspection of the results.

Advice as to the precautions to be taken in this respect until the scabs have fallen and the arm has healed should always be given to the person having the custody of the child.

In all ordinary cases of primary vaccination the public vaccinator must aim at producing four separate good-sized vesicles or groups of vesicles not less than half an inch

from one another. The total area of vesiculation resulting from the vaccination should not be less than half a square inch."

Articles 10 to 15 inclusive deal with the appointment of vaccination officers.

The Notice to be given by the Public Vaccinator to the Medical Officer of Health under sub-section (4) of Section 1 of the Act of 1898 shall be in Form P. or to the like effect, as follows :—

FORM P.

THE VACCINATION ACTS, 1867 TO 1898.

Notice from Public Vaccinator to Medical Officer of Health.

To

Medical Officer of Health of the
District.

In accordance with Section 1 (4) of the Vaccination Act, 1898, I hereby give you notice that I have this day postponed the vaccination of

¹ the child of ²
who resides at ³ on account of
⁴ the condition of the house in which the
child resides.
⁴ the recent prevalence of infectious disease
in the district.

Dated this day of , 18 .
(Signed) ,

Public Vaccinator of the

District.

Union.

¹ Child's
name:
² Father's, or
(if the child
is illegitimate)
Mother's name
and surname.
³ Child's
residence.
⁴ Strike out
that cause which
does not apply.

Article 20 deals with the remuneration of vaccination officers, and is as follows—

- (a) A payment of not less than threepence in respect of each child entered on the Birth Lists sent to him after the Thirty-first day of December, One thousand eight hundred and ninety-eight, by the Registrar of Births and Deaths ;
- (b) A payment of not less than ninepence in respect of the registration by him after the same date in his vaccination

register of the successful vaccination of any child born in his district ; and

- (c) A payment of not less than ninepence in respect of the transmission by him after the same date to the vaccination officer of the district where the birth was registered of a copy, certified by him, of the certificate of the successful vaccination in his district of any child not born in the district a note of which he shall have entered in column 17 of his report book.

Subject to the above provisions as to minimum, the amount of such payments shall be such as We may approve or direct ; and shall be increased or reduced, and such additional payments shall be made for extraordinary services of the vaccination officer, or under other unforeseen circumstances, as we shall from time to time approve or direct.

The remuneration of the vaccination officer shall be deemed to include any expenses in respect of postage incurred by him unless otherwise agreed between him and the Guardians.

FACTORIES AND WORKSHOPS.

These have been regularly inspected during the year. In one factory it was found necessary to have increased water-closet accommodation. The Army and Navy Stores factory in Johnson-street was duly inspected by me at the request of the Public Health Committee, and all the sanitary arrangements were found to be in a perfectly satisfactory condition. Messrs. de Sélincourt furnished extra water-closet accommodation for their employees. The Incandescent Gas Light Company, on request, also did likewise and supplied thermometers to gauge the temperature of the workrooms, which in some of the rooms was too high. Messrs. Woolland, of Knightsbridge, have been requested to rearrange the w.c. accommodation during the building operations which are now progressing.

UNDERGROUND ROOMS.

In two cases it was found necessary to serve notices as to illegal occupation.

PEAT LITTER.

A communication was received from the London County Council, dated 7th July, on the question as to whether the nuisance arising from the use of peat litter is such as to render it desirable that the Council should include such litter within

the provisions of their bye-laws made under the Public Health London Act, 1891.

The bye-law of the London County Council referred to is as follows :—

“ Every person who shall remove or carry by road or water in or through London any fæcal or offensive or noxious matter or liquid, whether such matter or liquid shall be in course of removal or carriage from within or without or through London, shall not remove or carry such matter or liquid in or through London except between the hours of 4 o'clock and 10 o'clock in the forenoon during the months of March, April, May, June, July, August, September, and October, and except between the hours of 6 o'clock in the forenoon and 12 o'clock at noon during the months of November, December, January, and February. Such person shall use a suitable carriage or vessel properly constructed and furnished with a sufficient covering so as to prevent the escape of any such matter or liquid therefrom, and so as to prevent any nuisance arising therefrom.

“ Provided that this bye-law shall not apply to carriage of horse dung manure.”

As far as this parish is concerned the Public Health Committee decided that at present no alteration in the bye-law is required.

HOUSES DEMOLISHED DURING 1898.

During the year a considerable number of houses has been voluntarily demolished in Westminster. The principal improvement has been the pulling down of the block of houses on the western side of Parliament-street. “ An uninterrupted view of Westminster Abbey can now be had from Whitehall, and Parliament-square lying to the north of the Abbey, can now be seen to the advantage it deserves.”

The houses in King Street are now being demolished.

In Wards 1 and 3, St. John, the following houses have been voluntarily demolished or closed, viz. :—

	Population displaced.
Greycoat-place, Nos. 5, 6, 7 and 12	... 30
Mills'-buildings, Greycoat-place, 12 houses	70
Regency-street, eleven houses	... 90
Vincent-street, six houses	... 50
Hide-place, four houses	... 30
Moreton-street, two houses	... 14
Rochester-row, six houses	... 36
Bond-court, eight houses	... 56
Old Rochester-row, five houses	... 25

HOUSING OF THE WORKING CLASSES ACT, 1890.

Proceedings were taken under the above Act and closing orders obtained in respect of—

- Nos. 6 and 7, Frederick-street.
Nos. 1, 2 and 3, Povey's-cottages.
No. 8, Gulston's-cottages.

SALE OF FOOD AND DRUGS AND MARGARINE ACTS, AND UNSOUND FOOD.

During the year the following samples have been purchased for the purpose of analysis; and in addition two samples of butter were submitted by a parishioner and analysed, and certified as being genuine :—

Articles Purchased.	No. of Samples.	Genuine.	Adulterated.	Fines.			Costs.		
				£	s.	d.	£	s.	d.
Arrowroot	9	9	—	—	—	—	—	—	—
Bread	6	6	—	—	—	—	—	—	—
Butter.....	24	22	2	5	0	0	1	5	0
Cocoa (see Vi-Cocoa)	—	—	—	—	—	—	—	—	—
Coffee	9	8	1	—	—	no	—	—	action.
Flour	3	3	—	—	—	—	—	—	—
Ice-creams	6	6	—	—	—	—	—	—	—
Lard	3	3	—	—	—	—	—	—	—
Milk	24	20	4	4	10	0	1	17	6
Mustard	6	6	—	—	—	—	—	—	—
Vi-Cocoa.....	1	1	—	—	—	—	—	—	—
Whisky (Irish and Scotch).....	6	2	4	1	0	0	0	12	6
Total.....	97	86	11	10	10	0	3	15	0

The following articles were dealt with and destroyed during the year as being unfit for human consumption :—

- 4,368 lbs. of lamb.
515 lbs. of beef and one hind-quarter of beef.
120 lbs. of mutton.
44 lbs. of veal.
65 lbs. of turbot.
3 trunks of soles.
1 trunk of mixed fish.
3 trunks of plaice.
1 barrel of herrings.
2 boxes of kippers.
4 boxes of fish roe.
4 trunks of mackerel.
16 baskets of cherries.
2 barrels of grapes.

In one case a person was fined £10 and 21s. costs for unlawfully selling and exposing for sale 30 lbs. of putrid beef

Milk adulteration.—The Committee received a letter from the Vestry of Clerkenwell, dated 22nd July, with reference to proceedings taken in that parish in regard to the adulteration of milk. Three attempts at conviction were made on the part of the Vestry, but in each instance the summons was dismissed. In two of the prosecutions proceedings were against a retailer who on each occasion produced a written warranty. In the third instance the action was against the farmer who had given the warranties, the summons in this respect being also dismissed. The Vestry consider the results such as to practically put an end to successful proceedings for the adulteration of milk, as the retailer who obtains the warranty is protected, whilst the farmer giving the warranty cannot be reached. The Vestry therefore forwarded a report of the case to the Local Government Board, suggesting the urgent need of amendment of the law, and they invited the co-operation of the other local authorities in the matter. As difficulties of the kind referred to are liable to occur at any time in connection with the prosecutions instituted by this Vestry, the Committee recommended—

That this Vestry concur in the views of the Clerkenwell Vestry, and address a communication on the subject to the Local Government Board in support of the proposed amendment of the law.

During the year one is glad to note that the "Council of the British Dairy Farmers' Association, representing milk retailers as well as producers, have resolved to support any measure which appears to them likely to secure the production and distribution of milk free from the virus of tuberculosis and other infectious matter. They rightly contend that any measure for guarding the public against tuberculosis as communicated in milk or meat should be administered by the Board of Agriculture and the Local Government Board, and should be applicable to the whole country. Further, they urge upon the President of the Board of Agriculture the necessity of including tuberculosis among the diseases dealt with under the Contagious Diseases (Animals) Act."

In connection with the above I may state that the following two motions were brought before the Public Health Committee by Dr. Des Vœux, viz. :—

- (1) That in future all specimens of milk purchased for analysis shall be subjected to a bacteriological examination.

- (2) That a circular be sent to all purveyors of milk in the parish, informing them of the dangers to health of milk taken from tuberculous cows, and offering to have their milk bacteriologically examined free of expense.

I was asked by the Committee to report upon the same, which I did in the following letter, maintaining that it would be difficult to carry out successfully the ideas contained in the two motions without the unanimous working towards the same end of all the Metropolitan Vestries, and backed up by legal powers from Government.

To the Public Health Committee.

GENTLEMEN,—The great importance of taking every possible action to avoid risk to human life or health, especially with regard to food substances, appears so distinctly to be the duty of the Sanitary Authority, that if any practical benefit were likely to arise from the adoption of the measures suggested by Dr. Des Vœux I should, knowing as I do so well, the reality of the dangers which he points out, urge the Committee to adopt the measures suggested. I therefore now propose to analyse the powers which the Local Authority possesses in this matter.

Food and Drugs Acts.—There appears to be no power under the provisions of these Acts to deal with milk containing disease germs of any kind, and the extraordinary precautions necessary to be observed in the collection of the samples for bacteriological examination would tend to further complicate the procedure under the very technical provisions of these Acts.

Public Health (London) Act, 1891.—By the provisions of Section 71 of this Act, power is given to Sanitary Authorities to deal with “any dangerous, infectious disease attributable to milk,” but the power, whilst being extensive, cannot be applied to any form of “Tuberculosis,” the disease not coming within the meaning of the phrase “dangerous infectious disease.” Section 47 of the same Act provides that any article, solid or liquid, intended for food may be seized by a Medical Officer of Health or a Sanitary Inspector, hence, doubtless milk, containing tubercle bacilli, could be dealt with under this section, if it were known to be so affected; but the practical difficulties in the way of obtaining a knowledge that the milk was, from

this cause, unfit for the food of man in time to seize the bulk, are so great, that when taken in connection with the fact that the person to whom the milk belonged, has a good defence in saying, and probably truly, that he was not aware of the presence of the disease germs, there would be little hope of obtaining a conviction.

Dairies, Cowsheds and Milkshops Order.—Section 15 of this Order provides, “that if at any time disease exists among the cattle in a dairy, &c., the milk from a diseased cow therein:—

(a) Shall not be mixed with other milk.

(b) Shall not be sold or used for human food.”

Unfortunately, however, the Contagious Diseases Animals Act, under which this Order is made does not include tuberculosis, and even if it did the Authority for carrying out the provisions of this Act is, for all districts in London, the London County Council.

Only recently a Royal Commission has reported upon the subject of tuberculosis, and Sir Richard Thorne-Thorne, the Medical Officer of Health to the Local Government Board, has also dealt very fully with the dangers arising to man from the source you have asked me to report on, *vide* Table No. V., pages 12 & 13, and considering the whole of the circumstances, I am of opinion that the efforts of the Vestry to obtain the end they have in view should in the first instance be directed to the bringing about of an alteration in the law. This would enable them to deal with what is admittedly a grave source of danger to public health.

I do not think it wise that samples of milk should be taken only to substantiate a fact so thoroughly proved as this, when no definite results can be obtained in the present state of the law. Neither does it seem advisable that a circular should be sent to purveyors of milk until the powers to deal with this cause of disease are increased, because such warning might be the means of raising opposition to more stringent legal remedies being obtained.

At a later date the Committee again had before them the question of the sale of milk infected with “tubercle bacilli.” I again advised that milk forms a ready medium for its dissemination, and that there exists at present no law by which the sale of milk so infected can be prohibited. After

this further advice on the subject, the Committee recommended :—

That in the interests of the public health, and with a view to preventing the spread of tuberculous diseases among children, a communication be addressed to the Local Government Board, pointing out the need for legislation dealing with the sale of milk contaminated with tubercle bacilli ; also that it be suggested to the other local authorities in the metropolis that their co-operation in the matter would be to the advantage of the public health.

Professor Delépine, writing in the *British Medical Journal* on Tuberculosis and the Milk Supply, says :—

In the fight against tuberculosis in cattle by private enterprise unsupported by the State it seems to me that the following lines are clearly indicated :—

1. Healthy cowsheds, well lighted and ventilated, easily cleaned, arranged so as to separate the animals as completely as possible from each other and to prevent the food and litter of one from being contaminated by others. Good water supply. After discovery of a tuberculous animal thorough disinfection of its stall and if possible of the whole shed.
2. Isolation sheds of the same kind for cattle found to be affected with a moderate or slight degree of tuberculosis.
3. Stalls well isolated from the others might be provided in this shed for animals which have not been tested and have to be kept in quarantine until tested, or better still a special testing shed frequently disinfected might be provided.
4. Immediate slaughter of all cows in an advanced state of tuberculosis.
5. Fattening of cows with moderate tuberculosis, these cows not to be allowed to come again at any time in contact with the healthy ones.
6. Any dairy produce from these tuberculous cows to be sterilised. If butter be made the cream should be treated for some time at 85°, which does not interfere with the making of good butter (Bang). Tuberculous cows should, however, be fattened as soon as possible and their milk used as short a time as possible.

7. Tuberculous cows with tuberculous udders are usually in a state of advanced tuberculosis, but in any case a cow with tuberculous udder should be slaughtered at once.

8. All calves to be fed from the first on sterilised milk. The thoroughly sterilised milk of tuberculous cows might be used for this purpose.

To avoid the other sources of deterioration which I have mentioned :

9. The udder and milkers' hands should be kept absolutely clean.

10. The milk cans or pails should be washed with boiling water or sterilised by steam.

11. This milk should be cooled immediately after being milked and its temperature kept below 40° F. until it is treated in the dairy (by filtration, separation, sterilisation, &c.).

12. Milk which has not been sterilised and which has to be sent by rail from the dairy to a distance should be kept by packing in ice or otherwise at a temperature below 40° F. if possible, until it reaches the consumer. The same precautions with regard to cooling apply to all milk which cannot be consumed within a few hours—say, 8 or 10 hours at the most—from the time of milking.

13. The authorities should be asked to regulate the importation of foreign milk and dairy produce with the view to ensure that the precautions above mentioned have been duly taken to ensure the wholesomeness of these products.

14. The authorities should be asked to find the means to prosecute and punish adequately all kinds of neglect rendering milk dangerous to health so as to place the farms and dairies where proper precautions are taken on a fair footing in the general competition.

FOOD PRESERVATIVES.

During the year several actions have been brought in the courts in various parts of the country against the vendors of milk, butter, &c., who have added either "boric-acid" or borax, &c., as a preservative for these articles of food.

Some medical men of high standing state with perfect confidence that the use of antiseptics in food is not only necessary,

but that they cause no injury whatever to the consumers. Dr. Brunton says:—

“I think one must remember that poisons are actually formed from foods by their spontaneous decomposition, and that foods which might be perfectly good and harmless at the time they were sold might be allowed by the purchaser to remain lying in a warm place for such a time that spontaneous alterations might occur in them, and illness, or even death, might result from their consumption. . . . The question really comes to be whether the acids—salicylic, boric, or benzoic—which are added to prevent decomposition, are likely to be more injurious to health than the natural products of decomposition which would be formed were the preservative not added. My own belief is that the preservative acids are likely to be considerably less injurious to health than the natural products of decomposition.

On the other hand, the opponents of preservatives assert that all preservatives in food are dangerous to health, and that they are unnecessary—that milk under ordinary circumstances will keep good for twenty-four hours, allowing ample time for distribution and consumption, and that the sanitary safeguard for foreign and other milk should be refrigeration. A case is also quoted of a family having used milk preserved with boracic acid for seventeen years—the daily supply averaging two pints to each individual, and each pint having four grains to the pint in winter and six grains to the pint in summer, and no ill-effects were known to have occurred during this long period. I may state that section vi. of the Food and Drugs Act, 1875, permits the addition of an ingredient not injurious to health, if the same is required for the protection or preparation of the article in a state fit for carriage or consumption, but the question is whether the vendors of preserved milk and butter, &c., should not state for public information as to whether a preservative is used or not, and, if so, the quantity used.

French milk is now largely imported into London. During three months as much as 76,383 gallons came from Normandy. The milk is kept sweet by the use of an antiseptic called formalin, which is made from fusel oil.

CUSTOMS AND INLAND REVENUE ACT.

Sections 4 of the Acts of 1890 and 1891.

A certificate under the above Act for exemption from inhabited house duty was granted on application to the owners of Chapter-chambers, Chapter-street.

The premises comprise four blocks of dwellings containing 38 separate tenements—

8	of the tenements	have	2	rooms,	kitchen,	scullery.
25	”	”	3	”	”	”
5	”	”	are shops with two rooms.			

Each tenement is provided with a sink, a proper water supply, a copper, and water closet.

The sink waste pipes and the soil pipes are carried down on external walls to the drains.

The premises are clean and well kept.

INFANT LIFE PROTECTION ACT, 1897.

Only one notice has been received from the London County Council under the above Act, which informed the Sanitary Authority, “that infants are being kept for hire or reward at the premises, 105, Lillington-street, Vauxhall-bridge-road.”

The letter from the Council stated that the Council's Inspector under the Act would see that the infants were properly provided for, but suggesting the desirability of a Sanitary Inspector ascertaining if the sanitary condition of the house was satisfactory, and if this were done it would be desirable that the Inspector should not disclose the special object of his visit, as cases had occurred where landlords had ejected persons notified under this Act on ascertaining that their tenancy may involve the sanitary inspection of the premises.

LONDON WATER SUPPLY.

The first initial report of the Royal Commissioners, chiefly dealing with the wants of the East London Water Company, has just been issued as a Parliamentary paper. In it a definite recommendation is made which will place an auxiliary daily supply of 24,000,000 gallons at the command of the East London Water Company. In the report the question of connecting the systems of the eight water companies which supply the Metropolitan area with a view to rendering mutual aid in the event of drought or other contingencies is considered. The Commissioners state that inter-communication is not only useful and expedient, but necessary. In concluding the report the Commissioners say: “We regard the suggestions and recommendations in this report as entirely independent of the other matters referred to us, and as in no way prejudicing the question of purchase of the companies' undertakings by one or

more authorities, or the question of control to be exercised by local or other authorities, upon both which questions we are prosecuting our inquiry."

Mr. Hawksley, one of the principal Commissioners examined before the Commission, stated that the population of Greater London was estimated to grow from 5,656,909 in 1891 to 13,043,712 in 1941, and that in his opinion the Thames would be able to provide an adequate water supply for this enormously increased population. According to his experience, management by companies was preferable to management by public authorities.

WATER SUPPLY TO NEWLY-ERECTED DWELLINGS.

During the year seventy-one certificates have been granted, under section 48 of the Public Health (London) Act, to premises newly erected. The Committee also passed the following resolution, which has been faithfully carried out, viz. :—
 "That it be an instruction to the inspectors to report to this Committee upon the condition of the tenement and lodging-houses visited during each month, with special reference to the adequacy of the w.c. accommodation, the sufficiency of the water supply and cleanliness of cisterns, &c., and the sanitary condition of the houses generally.

HEATING AND VENTILATION OF THE COUNCIL CHAMBER OF THE TOWN HALL.

Early in February I was requested by the Vestry to test the air of the Council Chamber during one of their meetings, and reported to the following effect :—“Before the meeting I found the air in the Council Chamber to contain less than 0.05 per cent. of carbonic acid, and at the end of the meeting there was very little change in the percentage of carbonic acid.”

MILLBANK SITE.

Hogarth block of buildings erected by the London County Council are now almost finished. They consist of 54 dwellings, and will house about 350 people. It is proposed to proceed immediately with the erection of two similar blocks of buildings.

CHURCH ARMY HOME.

A shelter was opened at 59, Millbank-street in July last under the auspices of the above Home, which shelters about 48 men. The Duke and Duchess of Westminster and Lord Glenesk took part in the inaugural ceremony, and a chapel attached to the Home was dedicated by the Bishop of London to the memory of Lady Glenesk.

SANITARY CONDITION OF CERTAIN PROPERTIES IN THE PARISH.

The Committee received a letter from the Mansion House Council on the Dwellings of the Poor, dated 19th April, forwarding a report on the condition of seventy-nine houses in the parish.

From the reports made by the inspectors thereon, it appeared that of the seventy-nine houses alleged to be defective, more than half were in a satisfactory condition, and that in reference to the remaining houses, in the majority of cases the defects mentioned were of such a trivial character as would not justify the Vestry taking any action. The Public Health Committee also ascertained that, prior to the receipt of the report in question, several of the persons responsible for the more serious defects were under notice to remedy the same.

The Committee directed that a communication embodying the above facts be addressed to the Mansion House Council.

With regard to the above report, taking for instance two of the most serious cases in Ward No. 2, St. Margaret, where it was alleged that a closet had no water supply, the inspector found a good closet with a special 30-gallon tank for flushing the same, and in another case where it was alleged that a closet was stopped up, the closet was found to be in perfectly good working order.

In other cases where it was alleged there was no water supply to several closets, the supply had only temporarily been suspended owing to the cisterns being cleansed.

In another case where it was reported that there was a broken ceiling, this was found to be the case, but the occupier had an ejectment order made against him, and the ceiling was not, for obvious reasons, repaired until the order had been carried out.

I may state that in nearly every case of complaints being made as above, the defects were found to be of a most trivial character.

GREYCOAT HOSPITAL SCHOOLS.

Alterations were carried out during the year in connection with the water closets and lavatories at these schools.

NOXIOUS FUMES AND BLACK SMOKE.

Public Health (London) Act, 1891, Sections 23 and 24.

During the year 1898 the attention of the Public Health Committee has been called to the increase of the smoke nuisance in Westminster and in London generally.

It was stated that the Welsh strike and the consequent difficulty in procuring hard coal was largely responsible for the immense volumes of black smoke which daily and nightly issued from huge chimney stacks in all parts of the Metropolis.

During May a letter was received from the Public Control Department of the London County Council, on the question of smoke consumption generally, and urging the Vestries to strictly enforce the law, owing to a growing disregard of the sanitary provisions of the Smoke Prevention Act.

The Thames steamers were among the prominent offenders, and a pedestrian crossing one of the river bridges stood a good chance of partial suffocation.

During May also, the solicitor to the Vestry reported to the Committee on the question of the emission of black smoke from steamers plying on the river, pointing out the authority for the suppression of the nuisance is the Corporation of the City of London as the Port Sanitary Authority. The complaint having been confirmed by the remarks of the magistrate at the police-court, and by members' repeated observations,

The Public Health Committee directed that a communication be addressed to the Port Sanitary Authority, requesting them to take steps for an immediate and effective remedy, and to each of the riparian Sanitary Authorities in the Metropolis, asking them to co-operate by making a similar request to the responsible authority.

The Committee, in some instances, finding that no improvement followed upon the service of Notices, summonses were obtained, and in several of the more serious offences, fines were imposed.

Amongst the offenders are the following Companies :—

Westminster Electric Supply Corporation Limited, Eccleston- place	Failing to abate nuisance of black smoke after notice...	Abatement order made, fines & costs	£1 3s.
Royal Palace Hotel Com- pany, Limited, High-street, Kensington	Causing black smoke to be sent forth from engine-house chimney	Fines & costs	£5 & £1 3s.

Albert - hall mansions	Causing black smoke to be sent forth from engine-house chimney	Fines & costs	£5 & £1 3s.
Niagara Hall Company, York-street	For emitting offensive odour and black smoke from chimney shaft	Fines & costs	£7 & £4 4s.

Messrs. Burroughes and Watts, of the Billiard Table Works, Great Peter-street, Westminster, were similarly summoned, and fined £5, with 10s. 6d. costs.

The Army and Navy Co-operative Stores (Limited), of Francis-street, S.W., were summoned by the Vestry for permitting black smoke to issue from the chimney of their engine-house in Coburg-row, so as to be a nuisance. Mr. Warburton, counsel for the defendants, asked for a month's adjournment, which was granted.

HOUSES LET IN LODGINGS.

About 1,250 houses are now registered under the above bye-laws in the United Parishes. With regard to the working of these bye-laws the great advantage in legal procedure lies in the fact that a breach of them is a finable offence, with a further daily penalty after written notice, and is not a nuisance subject to an order for abatement within a certain time.

The special advantages of the bye-laws are that, for the purpose of this foregoing procedure, the local sanitary authority is the judge of the conditions which shall prevail in such houses—for a magistrate's duties are purely ministerial—because overcrowding is defined. Proper ventilation is required; the ceilings, walls and floors of the premises are to be kept cleansed, and the former whitened at certain periods; a sufficient number of closets is required in proportion to the number of occupants: a defective drain is an offence, and a definite period for the removal of solid or liquid filth from rooms is provided.

Used with discretion the bye-laws have no tendency to depreciate the value of property, for where cleanly persons occupy the houses as landlords the conditions obtainable under them are procured by the responsible persons themselves, whilst in other cases the constant loss of rent which is incurred by the removal of tenants because of the neglectful habits of

the other tenants or the landlord is at least as great as the cost of keeping the premises in the sanitary condition required by the bye-laws.

If the conditions imposed by the bye-laws are carried out, no doubt one of the best methods for preventing overcrowding is thus achieved.

During the month of March a copy of the bye-laws was left at each house and 73 notices were served requiring cleansing of rooms, passages, staircases and provisions of extra water-closet accommodation. In two cases proceedings were taken for non-compliance with the bye-laws and penalties were inflicted in each case.

SLAUGHTER-HOUSES.

With regard to the abolition of private slaughter-houses suggested by the Public Health Committee of the London County Council, a letter was received from the Meat and Cattle Trade Section of the London Chamber of Commerce and the London Butchers' Trade Society, dated 5th November respectively, forwarding copy letter and petition addressed to the London County Council, protesting against the scheme for the abolition of private slaughter-houses and the establishment of public abattoirs.

As the result of a full consideration of the question, the Committee have to report that they have every reason to be satisfied with the condition of the slaughter-houses in Westminster, and therefore see no necessity for alteration in the present system.

The opinion of the Medical Officer of the London County Council is that in order to insure the inspection of meat killed in London, it is absolutely necessary that all animals should be killed in public slaughter-houses, where alone an adequate and systematic inspection of the meat could be made. The chief arguments raised against the proposed abolition are:—

“The extent of the area which would be required for an abattoir in which to kill all the animals now slaughtered in the numerous private establishments; the cost of buildings and machinery; the storage room required in which the meat could “set” after killing; the amount of lairage which would be necessary in order that cattle might rest after a journey before they are killed; and the probable gross amount of extra labour, which the butchering trade would have to employ to conduct one part of their business in many cases a number of miles away from their retailing establishments.”

The three cow-houses and two slaughter-houses mentioned below were examined and found to be in a satisfactory condition, and no opposition was therefore offered by the Vestry to the renewal of the licenses.

COW-HOUSES.

<i>St. Margaret.</i>		<i>St. John.</i>
7, Arthur-street.	|	13, Marsham-street.
		28, Winchester-terrace.

SLAUGHTER-HOUSES.

<i>St. Margaret.</i>		<i>St. John.</i>
29, Great Chapel-street.	|	14, Regency-street.

BAKEHOUSES.

In Wards 1 and 3, St. John, at the beginning of the year there were 15 bakehouses in use, one of which has since been closed, viz., 52, Rochester-row. Only three of the aforementioned are above ground. The bakehouses situate at 9, Grey-coat-place, 23, Vauxhall-bridge-road, 81, Ponsonby-place, 14, Frederick-street, have not been in use for the past two years. It was found necessary during the year to reconstruct the drains at the bakehouse situate at No. 40, Vauxhall-bridge-road. All the other bakehouses in the district were inspected at intervals during the year.

STABLES AND MEWS.

In Wards 1 and 3, St. John, it was found necessary to require the drainage to be entirely reconstructed in twelve stables. The question of the removal of dung at the proper periods has also received attention.

Black Horse yard was a source of trouble during the year, and it was with difficulty that certain improvements were at last made to be carried out. These premises are shortly to be closed.

CORONER'S COURT AND MORTUARY.

Appended is a list of the work which has been done in the way of disinfection during the past year. As will be seen the disinfection of articles from the various Guards' Hospitals has entailed a great deal of work. The cases for which disinfection has been performed have been chiefly due to Enteric

Fever brought home by the soldiers, viz., the 1st Battalion Grenadier Guards, engaged in the recent Soudan Campaign.

Number of articles disinfected from the Guards' Hospitals	5,475
Number of articles disinfected from the Guards' Quarters	30
Number of articles disinfected from the United Parishes	11,248
Number of rooms fumigated	316
Number of families removed to the Vestry Reception Rooms	15
Number of bodies removed to the Mortuary	162
Number of inquests held at the Coroner's Court	131
Number of bodies to await burial	31

The Committee received and considered a recommendation from their Mortuary Sub-committee, recommending certain cleansing and repainting works being executed in connection with the mortuary premises, and specifying in detail the works necessary to be done. Having ascertained from the surveyor that the cost of the proposed works would not exceed £26 15s.,

They recommended that the works suggested by the Mortuary Sub-committee be executed under the direction of the surveyor, at a cost not exceeding £26 15s. These works have been carried out.

LEGAL PROCEEDINGS.

The following summonses have been taken out during the year 1898, by order of the Vestry :—

INSPECTOR DEE.

Eight summonses were taken out during the year, all under the powers conferred by the Public Health (London) Act, 1891.

A total sum of £24 7s. 6d. was recovered.

The only case in which the Vestry was unsuccessful was that in which an attempt was made to enforce the provision of water closets for workmen employed on a building in course of erection. The Magistrate in adjourning the case said that it would be advisable for the defendant to comply with the requirements of the Vestry, which he thought were reasonable, and although he might decide in defendant's favour as far as the legal question was concerned, yet he would certainly grant a case if the Vestry asked him to do so. This case is

important in so far as it shows that it is doubtful whether it is compulsory to provide sanitary accommodation for workmen employed in erecting new buildings, although as in this case, the work may be two or three years in progress, and often one hundred men or more are employed.

The defendant, however, in this case wisely provided the proper accommodation, and at the adjourned hearing the Vestry was enabled to withdraw from the case without any risk to the health of the neighbouring population.

INSPECTOR McNAIR.

Number of Summons.	Act of Parliament or Bye-law under which proceedings were taken.	Offence.	Result.	Fine.	Costs.
1	Housing of the Working Classes Act	Premises unfit for human habitation	Closing order	...	£1 1s.
1	Sale of Food and Drugs Act	Selling Adulterated Whiskey	Fined ...	£1	12s. 6d.
1	Public Health (London) Act Bye-laws	Insufficient w.c. accommodation to house let in lodgings	Works completed on hearing of summons. Fined	1s.	2s.
1	Do. do. ...	Do. do. ...	Do. ...	1s.	2s.
1	Metropolis Local Management Act	Obstructing footway	Do. ...	£1	2s.
1	Public Health Act Bye-laws	Defective w.c. ...	Do. ...	1s	2s.
1	Do. do. ...	Do. do. ...	Do. ...	1s.	2s.
1	Metropolis Local Management Act	Failure to pave and drain mews	Do. ...	£1	5s.
1	Sale of Food and Drugs Act	Adulterated milk	Do. ...	£1 10/-	12s. 6d.
1	Do. do. ...	Adulterated butter	Do. ...	£2	12s. 6d.
1	Do. do. ...	Margarine sold as butter	Do. ...	£3	12s. 6d.
5	Housing of the Working Classes Act	Five houses unfit for habitation	Do. ...	£2	—
1	Public Health (London) Act	Occupied houses without water supply	Adjourned <i>sine die</i> . Premises vacated	—	—
1	Do. do. ...	Selling unsound meat	Convicted. Fined	£10	£1 1s.
18			Total ..	£21 14s.	£5 7s.

INSPECTOR KIRK.

No of. Summons	Act of Parliament under which proceedings were taken.	Situation of Premises.	Offence.	Result.	Fine.	Costs.
2	Public Health (London) Act, 1891	Electric Light Works, Millbank-street	Smoke nuisance	Vestry's action upheld	Magistrate ordered the abatement of nuisance.	23/-
	Do. do.	Royal Aquarium Electric Light Generating Station, Princes-street	Do. do.	Do.	£5	23/-
3	Sale of Food & Drugs Act	34, Vincent-street	Adulteration of milk with 10 % of water	Do.	£1	12/6
	Do. do.	72, Millbank-street	Do. do.	Do.	£2	12/6
	Do. do.	11, Princes-street	Adulteration of milk with 5 % of water	Do.	Dismissed	
1	Public Health (London) Act, 1891	For the recovery of a Notice under Health Act.	5/- for service of Section 4, Public Health Act.	Do.	...	3/-
6				Total ...	£8 0 0	£3 14 0

INSPECTOR DEE'S

Report for Year ending December 31st, 1898, for Wards
Nos. 1 and 2, St. Margaret.

Inspections made	...	...	...	...	1,068
Defects found	...	...	...	...	1,187
Notices served	...	...	...	...	830
Works completed	...	...	...	...	859
Notices outstanding, January 1st, 1898	...	...	...	...	61
Notices uncompleted, December 31st, 1898	...	...	...	...	32
Re-inspections made	...	...	...	...	1,620
Water closets	...	...	...	...	274
Drains, new or repaired	...	...	...	...	304
Water apparatus repaired	...	...	...	...	110
Dust receptacle, provided or repaired	...	...	...	...	32
Premises cleansed	...	...	...	...	70

Overcrowding abated	...	...	...	...	5
Underground rooms found illegally occupied, and nuisance abated	...	...	...	...	4
Premises provided with proper means of ventilation	...	...	...	...	3
Yard paving repaired	...	...	...	...	13
Limewhiting carried out	...	...	...	...	6
Bakehouses ordered to be cleansed	...	...	...	...	5
Houses in which infectious disease occurred	...	...	...	...	85
Animals improperly kept (nuisance abated)	...	...	...	...	1
Accumulations of manure and refuse removed	...	...	...	...	104
New receptacles for manure provided	...	...	...	...	2
Black smoke, observed on	...	...	...	...	60
Miscellaneous nuisances abated	...	...	...	...	109

INSPECTOR McNAIR'S.

Report for the Year ending 31st December, 1898, for Wards
Nos. 1 and 3, St. John.

Inspections made	...	...	...	...	1,268
Defects found	...	...	...	...	1,574
Notices served	...	...	...	...	724
Works completed	...	...	...	...	729
Notices outstanding, 1897	...	...	...	...	78
" " 1898	...	...	...	...	73
Re-inspections made	...	...	...	...	1,678
Nuisances in connection with the following matters were abated :—					
Water closets	...	...	...	...	194
Drains	...	...	...	...	257
Water apparatus	...	...	...	...	169
Dust receptacles	...	...	...	...	109
Premises in uncleanly condition	...	...	...	...	246
Overcrowding	...	...	...	...	7
Underground rooms illegally occupied	...	...	...	...	2
Premises improperly ventilated	...	...	...	...	13
Yard paving	...	...	...	...	65

Limewhiting	164
Stables, cowsheds, slaughter-houses and bakehouses	11
Houses in which infectious disease occurred ...	114
Animals improperly kept	12
Accumulations of manure, refuse, &c.	22
Receptacles for manure	2
Registration of houses let in lodgings	6
Miscellaneous defects... ..	181

INSPECTOR KIRK'S

Report for the Year ended December 31st, 1898, for War
No. 3, St. Margaret, and No. 2, St. John.

Notices brought forward from 1897	6
Inspections made	1,139
Re-inspections made	917
Defects found	1,433
Notices served	762
Works completed	783
Notices not complied with 31st December, 1898 ...	46
The following nuisances have been abated and defects remedied upon notices served:—	
Animals kept so as to be a nuisance	2
Accumulations of manure, &c.	43
Black smoke nuisances	18
Cisterns (dirty)	33
Dust receptacles (dilapidated and not in accordance with Bye-Laws)	48
Drains (new, defective relaid, repaired, and un-stopped)	114
Houses in which infectious diseases have occurred...	121
Limewhiting of yards, bakehouses, stables, cow and slaughter-houses	98
Overcrowding	26
Premises improperly ventilated	12
„ in an uncleanly condition	432
Pavings to yard defective	35

Roofs defective...	16
Soil pipes (defective repaired and new fixed)	25
Sink waste pipes trapped	15
Underground rooms illegally occupied	2
Water closets (defective repaired and new fixed)	129
Water supply apparatus, defective repaired...	37
Miscellaneous	227

I remain,

My Lords and Gentlemen,

Your obedient Servant,

JOHN NORTON, M.D., D.P.H.,

Medical Officer of Health.

February, 1899.



