

[Report of the Medical Officer of Health for West Ham].

Contributors

West Ham (London, England). County Borough.

Publication/Creation

[1933]

Persistent URL

<https://wellcomecollection.org/works/e33gxcbj>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution, Non-commercial license.

Non-commercial use includes private study, academic research, teaching, and other activities that are not primarily intended for, or directed towards, commercial advantage or private monetary compensation. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>



County Borough of West Ham.

ANNUAL REPORT
OF THE
Medical Officer of Health
AND
School Medical Officer
1932.

**Including his Report as Administrative Officer
under the Mental Deficiency Acts.**

F. GARLAND COLLINS,

M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.

CONTENTS.

Natural and Social Conditions	...	...	...	...	11
General Provision of Health Services	...	...	...	...	26
Sanitary Circumstances of the Area	...	...	...	...	48
Housing	...	...	...	...	58
Inspection and Supervision of Food	...	...	...	...	62
Infectious Diseases	...	...	...	...	84
Tuberculosis	...	...	...	...	98
Venereal Diseases	...	...	...	...	108
Maternity and Child Welfare	...	...	...	...	114
Mental Deficiency	...	...	...	...	132
School Medical Officer's Report	...	...	...	...	141

INTRODUCTION

To The Mayor, Aldermen and Councillors of the County Borough of West Ham.

Mr. Mayor, Aldermen and Councillors,

I herewith present my Annual Report upon the Health Services of West Ham for the year 1932. I could make this volume, with ease and perhaps advantage, much bigger and have had difficulty in keeping it within reasonable bounds owing to the increased scope of the services and the mass of details connected therewith.

It is gratifying to note that the incidence of Smallpox rapidly declined during 1932 and that during the present year (1933) there have only been a few sporadic cases.

Infectious disease as a whole is far less fatal and damaging to the health of the children than it was some years ago. Scarlet Fever and Diphtheria together claimed only fifteen deaths in West Ham during the year and the after-effects of those who had suffered were not severe. It is regrettable that more people do not avail themselves of the opportunity afforded them at the Council's clinics to become immunised against Diphtheria. Measles and Whooping Cough claimed as victims no less than seven times the number of those who died of Diphtheria and Scarlet Fever.

The mortality from street accidents is again striking, the total being no fewer than sixty in number.

Heart disease caused six hundred and twenty-five deaths. This is a large figure but various intercurrent diseases are often the primary cause of a death finally attributed to heart disease.

Cancer caused four hundred and eleven deaths. The considerable and regular yearly increase of this disease is most disturbing. It is general throughout the country and can be only partly accounted for by increased accuracy of diagnosis and by the fact that a greater number of people live to an age when they are more susceptible to cancer.

The infant mortality is higher this year than it has been for some years past. It still remains a fact that about fifty per cent. of deaths occurring under one year of age take place before the baby reaches the age of one month. Out of a total of three hundred and fifty-eight deaths under one year of age, no fewer than one hundred and fifty-one died from congenital debility, premature birth, malformation and allied conditions. It is interesting to note that approximately one in five of the total deaths in West Ham occurred in people over seventy-five years of age.

I have set out in some detail the statistics regarding the death rates; for the balance sheet, as it were, of the health and well-being of the inhabitants of the Borough is reflected to a big degree in this rate.

The housing conditions are steadily improving, chiefly through the carrying out of work under the Housing Act, 1930.

A large number of houses have had extensive repairs under Section 17 of this Act. In the old Canning Town district, an area comprising nearly a hundred houses has been scheduled for clearance under the Act, and the scheme for the demolition of these houses is now awaiting the approval or otherwise of the Ministry of Health.

A number of houses have been demolished under Section 19, but lack of accommodation for the tenants who would be displaced acts as a severe deterrent in regard to more extensive use of this Section. Other areas which have been scheduled are awaiting further consideration and the necessary procedure.

The construction of the new Dock Road has been the means by which a big number of undesirable dwelling houses have had to be demolished, and has fulfilled the function of a clearance area in itself. The dispossessed tenants have been re-housed mostly on the Council's new housing estate at Prince Regent Lane.

Certain dilapidated properties have also been demolished in connection with the work of widening the High Street, Stratford.

Overcrowding with its associated evils still prevails, in some instances so bad that any attempt to enforce the elementary laws of hygiene or even of common decency proves futile.

A psychological clinic for dealing with adult and juvenile cases of early mental aberration and allied conditions was established by the Council at the Children's Hospital, Balaam Street, during the year.

The Poor Law Institutions still present overcrowding. At the time of writing, however, the Harold Wood Hospital for Children is being taken over from the Hospitals Committee by the Public Assistance Committee in order to accommodate cases of chronic sick adults, and this will relieve the overcrowding to a considerable extent.

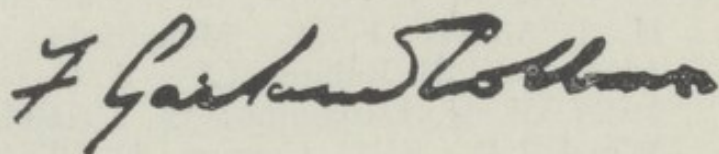
In July, Mr. Plackett, one of your Sanitary Inspectors, was obliged, after many years of good service, to resign owing to ill-health, and for the same reason in December, Dr. Muir resigned after twenty years as Medical Superintendent of Whipps Cross Hospital, during which time he did splendid work.

Specialists have been appointed to the hospitals where cases of acute sick are being treated, and I am convinced that there are, in the wards of the institutions for chronic and so-called incurable sick cases, a number of patients who would benefit greatly and possibly be restored to normal health if the advice of such specialists could also be made available for them.

I am more and more inclined to think that in dealing with the health of the community the outlook is often directed towards the wrong aspect, and instead of concentrating upon those social evils which definitely tend to illness and disease, attempts are made only to correct or minimize the disabilities arising therefrom.

There are numerous factors vital to the maintenance of the public health which though profoundly moulding the attitude of the medical profession to disease in general, can only be ameliorated by the practical application of sociology. In this connection I wish to express my appreciation of the co-operation and invaluable help afforded not only by the voluntary hospitals and ancillary services, but also by various philanthropic agencies working within the Borough.

Your obedient Servant,

A handwritten signature in dark ink, appearing to read 'F. Garth Jones'. The script is fluid and cursive, with the first name 'F.' and last name 'Jones' being the most prominent parts.

Municipal Health Offices,
Romford Road,
West Ham, E.15.

June, 1933.

List of Members of the Council.

The Worshipful the Mayor (Councillor Thomas Edward Groves, J.P., M.P.).

The Deputy Mayor (Councillor H. D. Clark).

Aldermen :—

W. T. Bell; G. Croot; W. Devenay; B. W. Gardner; W. Godbold; J. H. Hollins, J.P.; J. T. Husband, J.P.; J. J. Jones, J.P., M.P.; Edith Kerrison, J.P.; E. J. Reed, J.P.; W. J. Reed; H. J. Rumsey; J. T. Scoulding, J.P.; M. Streimer; W. J. Thorne, C.B.E., J.P., M.P.; T. Wooder.

Councillors :—

P. Hearn; A. E. Cresswell; E. W. Wordley, J.P.; Mrs. E. E. Wybrew; J. Foster; O. O. Motsfield; F. A. Warner; E. H. J. Adams; F. E. Mansford; W. A. T. Torrington (deceased); S. Bulling, J.P.; A. G. Gay, J.P.; E. W. White, J.P.; W. H. Luscombe; W. C. Ridgwell, J.P.; C. H. W. Ward, J.P.; E. C. Cannon; D. H. A. Hanley, B.Sc.; L. F. W. White, B.Sc. (Econ.); A. B. Macgregor; J. N. Osbourn; H. Parker; G. R. Blaker; W. T. Nichols; A. J. Walker; C. St. Clair Collins; D. W. Hall; A. W. Wells; Mrs. E. C. Cook; A. E. Killip; H. J. Manners; Mrs. A. A. Barnes; C. A. Bennett; G. J. Stokes; G. Doherty; A. C. Gentry; D. H. Smith; S. M. Edwards; Mrs. F. Harris; Mrs. D. Parsons, J.P.; Mrs. E. Bock; Mrs. E. J. Gregory; H. F. Willig; J. Doherty; Mrs. J. A. Hollins; Mrs. F. A. Wood.

List of Committees.

Dealing with Health Matters.

His Worship the Mayor
(Councillor Thomas Edward Groves, J.P., M.P.)
Ex-officio member of Committees.

Public Health Committee.

Chairman: The Deputy Mayor (Councillor H. D. Clark).

Aldermen: Husband, Edith Kerrison, E. J. Reed, Rumsey, Scoulding and Streimer.

Councillors: Mrs. Barnes, Collins, Foster, Mrs. Gregory, Hanley, Hearn, Killip, and Mrs. Wybrew.

Maternity and Child Welfare Committee.

Chairman: Councillor Hearn.

Aldermen: Husband, Edith Kerrison, E. J. Reed, Rumsey, Scoulding and Streimer.

Councillors: Mrs. Barnes, Collins, Foster, Mrs. Gregory, Hanley, Killip, Mrs. Wybrew and Gay.

Mrs. E. Lawrance, Mrs. C. Vincent, Mrs. E. M. Warner, Miss A. Davies, and Dr. P. I. Watkin.

Housing Committee.

Chairman: Councillor Mrs. Parsons.

Aldermen: Devenay, E. J. Reed and Rumsey.

Councillors: Mrs. Barnes, Mrs. Bock, Mrs. Cook, Gentry, Mrs. Harris, Nichols, Stokes, Walker, E. W. White, Mrs. Wood, and Wordley.

Education Committee.

Chairman: Councillor Bennett.

The Mayor (Councillor Groves).

Aldermen: Bell, Devenay, Gardner, Godbold, J. H. Hollins, Edith Kerrison, E. J. Reed, and W. J. Reed.

Councillors: Blaker, Mrs. Bock, Bulling, Collins, G. Doherty, Gay, Mrs. Gregory, Mrs. Hollins, Luscombe, Mrs. Parsons, Walker, Ward, Warner, and L. F. W. White.

Mrs. L. Jardine, Mrs. E. V. Parker, and Miss R. H. Cheetham.

The Revs. C. Carless, R. Rowntree Clifford and A. W. W. Wallace.

Dr. A. H. Ferguson, H. Madden and F. G. Reynolds, Esquires.

Special Schools and Welfare Sub-Committee.

Chairman: Councillor Collins.

Aldermen: Goldbold, Edith Kerrison and E. J. Reed.

Councillors: Mrs. Bock, Bulling, Mrs. Gregory, Mrs. Hollins, Luscombe and Mrs. Parsons.

Miss R. H. Cheetham, Mrs. L. Jardine.

H. Madden, Esq.

The Hospitals Committee.

Chairman: Alderman Croot.

Aldermen: Edith Kerrison, Rumsey and Streimer.

Councillors: Mrs. Barnes, Mrs. Bock, Hall, Mrs. Harris, Mrs. Hollins, Killip, Mrs. Parsons, Walker, Ward, Mrs. Wood and Wordley.

The Public Assistance Committee.

Chairman : Councillor G. Doherty.

Alderman Wooder.

Councillors : Mrs. Barnes, Mrs. Bock, Bulling, Mrs. Cook, Mrs. Gregory, Mrs. Harris, Mrs. Hollins, Killip, Manners, Mansford, Mrs. Parsons, Ridgwell, and Mrs. Wybrew ; together with Aldermen J. H. Hollins and Rumsey and Councillors Cannon, Edwards, Gay, Hanley, Osbourn, E. W. White and Mrs. Wood for facilitating the performance of the duties conferred or imposed on the Council by the Unemployment Insurance (National Economy) (No. 2) Order, 1931.

The Committee for the Care of the Mentally Defective.

Chairman : The Mayor.

The whole Council, Mrs. A. M. Bulling and Mrs. F. Cornelius.

The Executive Committee for the Care of the Mentally Defective.

Chairman : The Mayor.

Aldermen : Bell, Croot, Devenay, Godbold, J. H. Hollins, Husband, Scoulding and Streimer.

Councillors : Mrs. Bock, Mrs. Hollins, Mrs. Parsons, Ridgwell, Ward, Mrs. Wood, Wordley, Mrs. Bulling and Mrs. Cornelius.

Institutions Management Sub-Committee.

Chairman : Alderman Wooder.

Councillors : Killip, Mrs. Barnes, Mrs. Cook, Mrs. Parsons, Mrs. Gregory, Mrs. Wybrew.

Children's and Margate Convalescent Home Sub-Committee.

Chairman : Mrs. Bock.

Plus Rota of members of Public Assistance Committee.

County Borough of West Ham.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1932.

Natural and Social Conditions.



THE COUNTY BOROUGH OF WEST HAM is classified the tenth largest of the 118 Great Towns of England and Wales. Situated geographically within the County of Essex, it comprises an area of seven and a half square miles. In elevation it is almost flat, varying from less than 5ft. to 45ft. above ordnance datum.

The Charter of Incorporation was granted to West Ham in 1886.

It is bounded on the West by the Administrative County of London, on the East by the County Borough of East Ham, on the North by the Borough of Leyton, and on the South by the River Thames. The River Lee forms a natural boundary between West Ham and the Metropolis.

There are over 128 miles of dedicated roads in the Borough, and 123 acres of waterways.

The County Borough is an important industrial centre. In addition to a number of factories in the North, there are in the South of the Borough some of the largest and most important factories in or near London. These factories manufacture various articles such as rubber, soap, sugar, and glass.

By rail it is only about 5 miles from the City of London, hence a large number of the populace work in London and district.

The whole of the Royal Victoria Dock, and part of the Royal Albert, and the new King George the Fifth Docks, as well as the locomotive and other works of the London and North Eastern Railway Company, and the carriage works of the Midland Railway Company (London, Tilbury, and Southend section) are within the district. There are extensive docks, consequently one finds a large number of casual labourers.

West Ham is a densely populated town, having 63 persons to the acre.

There is still a great shortage of houses in the district, and even with the addition of new houses erected by the Council and private enterprise, there is still a very long list of persons requiring increased or improved housing accommodation. In this connection there is a dearth of building sites in the Borough.

The growth of the district can be observed by the fact that in 1762 the number of houses in the Borough was 700, whereas in 1931 the number was 49,280.

Summary of General Statistics.

Area (acres) 4,706.

Population—

Census 1931, 294,278.

Estimated population to the middle of 1932, 289,300.

Number of inhabited houses (1931), 49,280.

Number of families or separate occupiers (1931), 72,994.

Average Rateable Value—

General Rate, £1,404,660.

Sum represented by a Penny Rate—General District Rate, £5,853.

Vital Statistics.

		Total	Male	Female	
Live Births {	Legitimate	4836	2490	2346	} Birth Rate 17.21
	Illegitimate	144	68	76	
Still Births, 149	...	...	...	...	Rate per 1,000 total births, 30
Deaths, 3,313	...	...	...	...	Death Rate, 11.4
Deaths from diseases and accidents of pregnancy and child birth ...		from sepsis ...		...	9
		from other causes ...		...	6
		= Rate per 1,000 births, 3.0			
Deaths from Measles (all ages)		...	...	...	77
Deaths from Whooping Cough (all ages)		...	...	...	29
Deaths from Diarrhoea, etc. (under 2 years of age)		...	...	...	59
Death Rate of Infants under one year of age—					
All infants per 1,000 live births		...	...	...	71
Legitimate infants per 1,000 legitimate births...					70.3
Illegitimate infants per 1,000 illegitimate births					125

In the case of the Great Towns the Birth Rate was 15.4, the Death Rate 11.8, and the Infant Mortality Rate 69.0, whereas the Maternal Mortality Rate for England and Wales was 4.2.

Vital Statistics of the Wards of the Borough, 1932.

WARDS.	Births	Birth Rate	Deaths	Death Rate	Infant Deaths	Infant Mortality per 1,000 births	Natural increase Births over Deaths	Estimated resident population middle of 1932
New Town ...	318	18.49	213	12.38	21	66	105	17,195
Forest Gate ...	256	13.90	205	11.13	20	77	51	18,406
High Street...	282	16.31	198	11.45	27	95	84	17,280
Broadway ...	236	16.59	164	11.53	19	80	72	14,220
Park ...	263	17.20	185	12.10	16	60	78	15,283
Upton ...	234	14.10	200	12.05	19	81	34	16,584
Plashet Road	229	15.98	175	12.21	13	56	54	14,321
West Ham ...	235	14.91	188	11.93	16	68	47	15,755
Plaistow ...	288	14.47	232	11.88	24	83	56	19,520
Bemersyde ...	191	16.89	125	9.47	15	78	66	13,194
Canning Town and Grange ...	498	18.72	277	14.13	32	64	221	26,600
Hudsons ...	342	17.01	238	11.83	18	52	104	20,105
Ordnance ...	319	16.89	222	11.75	22	68	97	18,879
Beckton Road	373	19.24	237	12.22	23	61	136	19,384
Tidal Basin	550	24.48	253	11.26	52	94	297	22,467
Custom House and Silvertown ...	366	18.20	201	9.99	21	57	165	20,107
County Borough ...	4,980	17.21	3,313	11.4	358	71	1,667	289,300

The following matters affecting the health of the inhabitants of the borough were dealt with during the year, as set out below :—

Clinic for Early Cases of Mental Aberration. A Clinic was started by the Council in July this year at the Children's Hospital, Balaam Street, Plaistow, for the treatment and guidance of cases of borderline mental disease. The Medical Superintendent of West Ham Mental Hospital, Dr. H. Cuthbert, or one of his colleagues, attends to examine cases on Wednesdays and Saturdays of each week.

Margate Convalescent Home. During the year greater use was made of this Home; the admissions were nearly five times as many as in 1929, when the Home was taken over under the Local Government Act. The diet sheet was revised, and several additions made.

Convalescent Homes for Mothers. During the year St. Mary's Convalescent Home, Birchington, ceased to take cases of mothers recovering from confinement. It was, however, possible for one bed to be reserved for this purpose at "Child Haven," near Brentwood, and also a further one at Sunningdale Convalescent Home in Berkshire.

South Ockendon Colony. On the 5th May, 1932, the first portion of a colony for mental defectives at South Ockendon, Essex, was opened. The buildings comprise three villas, to accommodate 134 patients (44 adult males, 40 juvenile males, 30 adult females, and 20 juvenile females), together with the necessary nursing and domestic staff

Births.

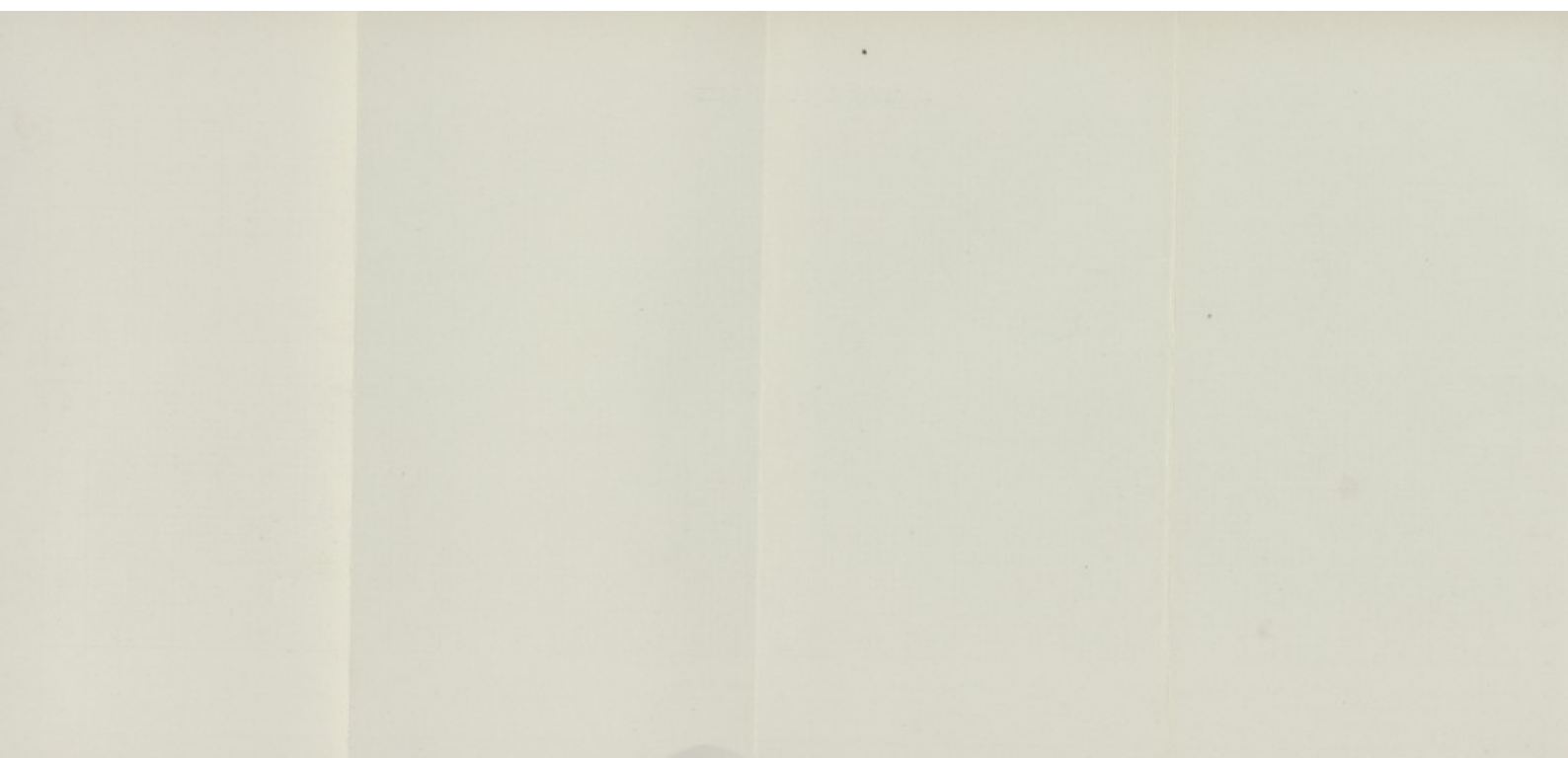
The number of births registered in the Borough during the year was 6,172 (3,163 Males and 3,009 Females); but of this total 1,490 were children of non-residents, who came to be confined in one or other of the Maternity Hospitals, or were confined while visiting relatives or friends; while 298 West Ham women were confined outside the Borough. Suitable adjustment makes the net West Ham Births 4,980 (2,558 Males and 2,422 Females); 144 of these (68 Males and 76 Females) were illegitimate.

Calculated on the Registrar General's estimate of the population of the Borough at the middle of 1932, viz. 289,300, the Rate for the year was 17.21, the lowest ever recorded for West Ham. The Birth Rate for the Great Towns was 15.4.

Deaths.

The number of deaths registered during the year was 2,616, but of these 383 occurred in persons not belonging to the Borough, while the deaths of 1,080 residents of West Ham occurred in various institutions and districts elsewhere, making the total net deaths attributable to the Borough number 3,313, of which 1,772 were Males and 1,541 Females.

The allocation of these deaths to their different causes will be found later in this report, but the grand total from all causes gives an annual Death Rate of 11.4 per 1,000 of the estimated population. The Death Rate for the Great Towns was 11.8.



Deaths in Public Institutions.

The great use made of the facilities for Institutional treatment is shown by the subjoined table, viz. :

Deaths in Council's Institutions.

				Under 1 year	1 year & upwards
Whipps Cross Hospital	..	...	...	36	470
Central Home	...	...	...	—	401
Dagenham Sanatorium	...	...	...	—	48
West Ham Mental Hospital	...	...	...	—	46
Plaistow Fever Hospital	...	...	...	38	90
Forest Gate Hospital	...	...	...	19	31

Deaths in other Institutions.

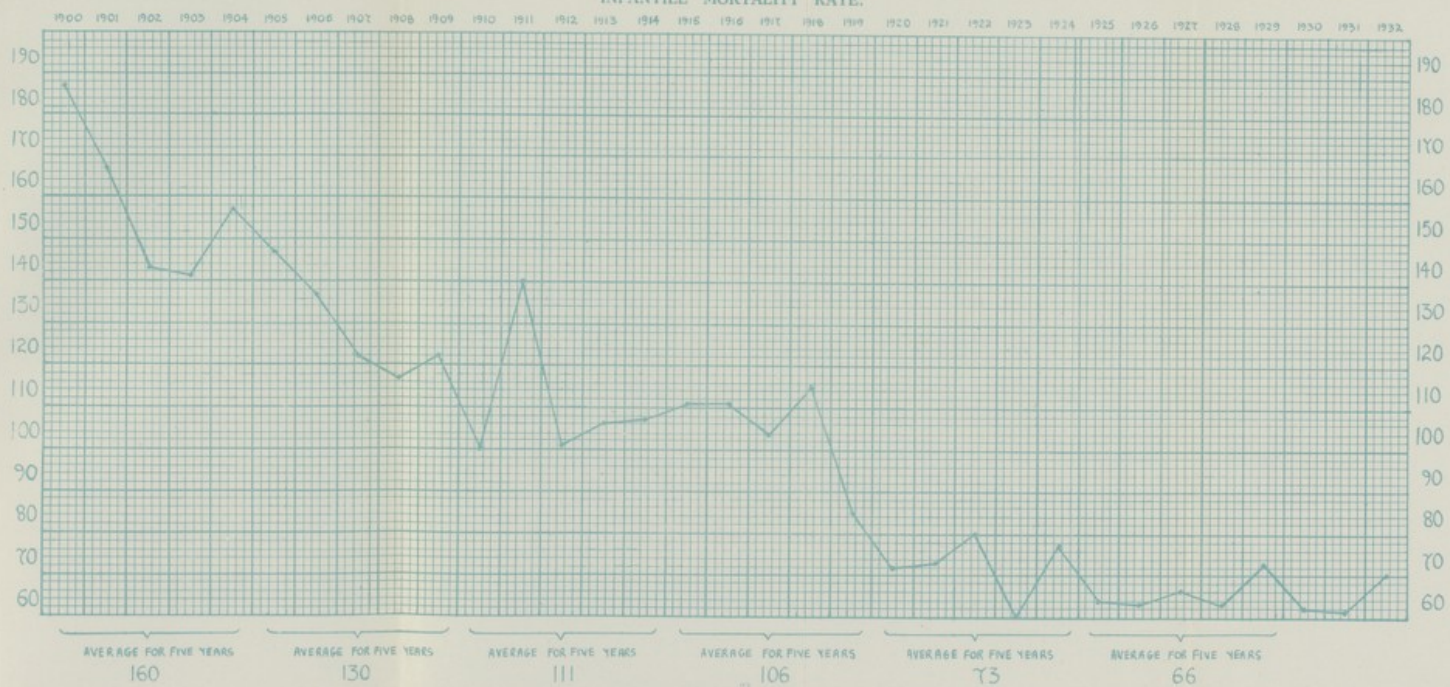
				Under 1 year	1 year & upwards
Queen Mary's Hospital for the East End	...	...	...	54	116
St. Mary's Hospital, Plaistow	...	...	...	19	31
Plaistow Maternity Hospital	...	...	...	30	13
Royal Albert Dock Hospital	...	...	...	—	28
Children's Hospital, Balaam Street	...	...	...	13	3
Other places, e.g. Docks, etc.	...	...	...	1	1
Residents dying in London Institutions	...	...	...	54	25
				<hr/> 264	<hr/> 1303
Non-residents dying in West Ham Institutions				79	304
				<hr/> 185	<hr/> 999
Net West Ham Deaths occurring in Institutions					1184

The above figures show that over 35 per cent. of the deaths occurring in West Ham took place in public institutions.

1932.

Causes of Death.		Sex	All	Ages 0—	1—	2—	5—	15—	25—	35—	45—	55—	65—	75—
ALL CAUSES	...	M.	1772	215	60	44	55	85	83	103	183	318	346	280
		F.	1541	143	52	40	44	81	73	66	149	227	323	343
1. Typhoid and Paratyphoid Fevers	...	M.	—	—	—	—	—	—	—	—	—	—	—	—
		F.	—	—	—	—	—	—	—	—	—	—	—	—
2. Measles	...	M.	45	4	24	13	4	—	—	—	—	—	—	—
		F.	32	5	17	6	4	—	—	—	—	—	—	—
3. Scarlet Fever	...	M.	2	—	2	—	—	—	—	—	—	—	—	—
		F.	1	—	—	1	—	—	—	—	—	—	—	—
4. Whooping Cough	...	M.	10	5	4	1	—	—	—	—	—	—	—	—
		F.	19	5	9	3	1	1	—	—	—	—	—	—
5. Diphtheria	...	M.	4	1	—	2	1	—	—	—	—	—	—	—
		F.	8	1	1	4	1	1	—	—	—	—	—	—
6. Influenza	...	M.	23	—	—	—	1	—	3	3	2	4	6	4
		F.	42	—	—	—	1	1	2	2	4	7	12	13
7. Encephalitis Lethargica	...	M.	1	—	—	—	—	—	—	—	—	1	—	—
		F.	2	—	—	—	—	1	1	—	—	—	—	—
8. Cerebro-spinal Fever	...	M.	8	2	3	—	1	—	1	—	1	—	—	—
		F.	7	1	2	2	1	—	—	—	1	—	—	—
9. Tuberculosis of Respiratory System	...	M.	166	—	—	1	—	31	46	29	26	29	4	—
		F.	114	—	2	1	2	44	29	13	11	5	5	2
10. Other Tuberculous Diseases	...	M.	26	4	4	3	8	2	—	2	3	—	—	—
		F.	26	6	3	10	2	2	—	1	—	—	—	—
11. Syphilis	...	M.	6	1	—	—	—	—	—	1	—	2	2	—
		F.	2	2	—	—	—	—	—	—	—	—	—	—
12. General Paralysis of the Insane, Tabes Dorsalis	...	M.	7	—	—	—	—	—	—	—	3	4	—	—
		F.	3	—	—	—	—	—	—	—	2	1	—	—
13. Cancer, Malignant Disease	...	M.	195	—	—	—	—	3	3	11	26	72	63	17
		F.	216	—	—	—	—	2	7	10	43	62	57	35
14. Diabetes	...	M.	10	—	—	—	—	—	2	1	—	1	4	2
		F.	18	—	—	—	—	1	—	1	2	5	5	4
15. Cerebral Haemorrhage, etc.	...	M.	88	—	—	—	—	1	1	2	10	17	30	27
		F.	91	—	—	—	—	—	—	6	14	35	36	—
16. Heart Disease	...	M.	302	—	—	—	3	8	3	9	30	74	89	86
		F.	323	—	—	—	7	7	11	11	24	57	102	104
17. Aneurysm	...	M.	4	—	—	—	—	—	—	1	1	2	—	—
		F.	3	—	—	—	—	—	—	—	—	1	—	2
18. Other Circulatory Diseases	...	M.	59	—	—	—	—	—	—	1	4	9	21	24
		F.	48	—	—	—	—	—	—	1	3	8	13	23
19. Bronchitis	...	M.	86	6	1	—	—	1	1	1	14	14	24	24
		F.	67	6	—	—	1	—	1	—	5	8	14	32
20. Pneumonia (all forms)	...	M.	161	46	16	10	3	9	3	10	14	19	21	10
		F.	115	28	12	5	7	3	2	6	7	8	28	11
21. Other Respiratory Diseases	...	M.	17	1	—	—	1	1	—	2	5	2	2	3
		F.	12	1	1	—	1	1	—	1	2	—	1	4
22. Peptic Ulcer	...	M.	28	—	—	—	—	1	1	4	10	7	4	1
		F.	4	—	—	—	—	—	—	1	2	1	—	—
23. Diarrhoea, etc.	...	M.	43	36	3	1	1	—	—	—	—	2	—	—
		F.	22	19	1	—	—	—	—	—	1	—	—	1
24. Appendicitis	...	M.	9	—	—	—	2	—	2	2	1	1	—	1
		F.	12	—	—	—	3	1	1	1	3	2	1	—
25. Cirrhosis of Liver	...	M.	5	—	—	—	—	—	—	—	1	—	—	—
		F.	2	—	—	—	—	—	—	—	—	1	—	—
26. Other Diseases of Liver, etc.	...	M.	6	—	—	—	1	—	1	—	—	2	1	1
		F.	12	—	—	—	1	—	—	—	3	2	5	1
27. Other Digestive Diseases	...	M.	25	2	1	1	2	1	2	1	2	4	9	—
		F.	37	2	—	—	—	2	1	1	5	12	8	6
28. Acute and Chronic Nephritis	...	M.	60	—	—	2	1	3	2	3	6	16	20	7
		F.	40	1	—	1	1	2	1	2	9	8	11	4
29. Puerperal Sepsis	...	F.	9	—	—	—	—	1	6	2	—	—	—	—
30. Other Puerperal Causes	...	F.	6	—	—	—	—	1	3	2	—	—	—	—
31. Congenital Debility, Premature Birth, Malformations, etc.	...	M.	96	93	1	—	—	—	—	—	—	—	—	—
		F.	55	52	1	—	1	1	—	—	—	—	—	—
32. Senility	...	M.	50	—	—	—	—	—	—	—	—	—	9	41
		F.	59	—	—	—	—	—	—	—	—	—	8	51
33. Suicide	...	M.	21	—	—	—	—	1	1	2	6	8	2	1
		F.	10	—	—	—	—	1	1	2	2	3	1	—
34. Other Violence	...	M.	75	1	1	5	9	16	5	6	7	8	12	5
		F.	23	3	2	4	1	2	—	1	1	2	3	4
35. Other Defined Diseases	...	M.	133	13	—	5	15	7	6	12	11	16	22	26
		F.	101	11	1	3	9	6	5	9	12	20	16	10
36. Causes Ill-defined, or Unknown	...	M.	1	—	—	—	—	—	—	—	—	1	—	—
		F.	—	—	—	—	—	—	—	—	—	—	—	—

INFANTILE MORTALITY RATE.





Chief Vital Statistics since 1877.

Year.	Population.	Births.	Birth Rate.	Deaths.	Death Rate.	Infant Deaths.	Infant Mortality Rate.
1877	112,541	4,149	36.8	1,817	16.1	530	128
1878	115,144	4,491	39.0	2,147	18.6	733	163
1879	120,747	4,862	40.2	2,113	17.5	688	141
1880	124,350	5,164	41.5	2,371	19.0	793	153
1881	128,953	5,488	42.5	2,409	19.4	745	136
1882	136,548	5,907	43.2	2,586	18.9	874	148
1883	144,143	6,014	41.7	2,693	18.6	897	149
1884	151,737	6,563	43.2	3,057	20.1	1,035	157
1885	159,334	6,547	41.0	3,503	21.9	1,070	163
1886	166,936	7,075	41.7	3,151	18.8	1,060	149
1887	174,523	6,865	39.1	3,286	18.7	723	105
1888	182,118	6,867	38.5	2,848	18.0	905	131
1889	189,713	6,947	38.5	2,883	18.0	907	130
1890	197,308	7,063	38.5	3,977	21.7	1,142	161
1891	206,463	7,911	38.2	3,952	19.1	1,191	150
1892	212,703	8,013	36.9	4,019	18.6	1,225	158
1893	218,942	8,026	35.3	4,565	20.0	1,387	172
1894	225,184	8,089	33.9	4,026	18.2	1,123	139
1895	231,426	8,591	35.9	4,656	20.9	1,452	169
1896	237,665	8,519	35.4	4,395	18.9	1,395	163
1897	243,908	8,761	35.8	4,486	18.3	1,535	175
1898	250,145	8,750	34.9	4,594	18.3	1,525	174
1899	256,386	8,779	34.2	5,213	20.3	1,770	201
1900	262,627	8,885	33.8	5,156	19.6	1,671	188
1901	268,868	9,434	35.0	4,910	18.2	1,589	168
1902	270,076	9,553	35.3	4,858	17.9	1,382	144
1903	272,250	9,478	34.8	4,394	16.1	1,344	142
1904	274,424	9,276	33.3	4,836	17.6	1,467	158
1905	276,598	9,018	32.5	4,574	16.5	1,341	148
1906	278,772	9,193	32.9	4,610	16.5	1,270	138
1907	280,946	8,759	31.1	4,412	15.7	1,078	123
1908	283,121	9,214	32.5	4,364	15.4	1,089	118
1909	285,471	8,730	30.6	4,435	15.1	1,087	123
1910	287,471	8,646	30.0	3,773	13.1	866	100
1911	289,646	8,642	29.8	4,561	15.7	1,223	141
1912	291,900	8,642	29.6	4,146	14.2	889	102
1913	294,223	9,125	30.5	4,312	14.4	984	107
1914	296,570	8,848	29.8	4,425	14.9	957	108
1915	294,396	8,380	28.4	4,744	16.1	940	112
1916	287,969	8,377	29.1	4,233	14.7	828	112
1917	271,934	6,701	24.6	4,203	15.4	707	105
1918	262,858	6,021	22.9	5,492	20.8	700	116
1919	287,966	7,132	24.7	3,946	13.7	619	86
1920	299,440	9,723	32.4	3,888	12.9	716	73
1921	300,903	8,242	27.3	3,712	12.3	615	74
1922	304,738	7,959	26.1	4,124	13.5	641	80
1923	314,400	7,803	24.8	3,331	10.5	466	59
1924	317,400	7,202	22.6	3,652	11.5	564	78
1925	318,500	7,017	22.0	3,428	10.7	463	65
1926	315,900	6,710	21.2	3,405	10.7	418	62
1927	315,400	5,991	18.9	3,481	11.0	404	67
1928	306,900	5,913	19.2	3,340	10.8	380	64
1929	307,600	5,766	18.7	3,926	12.7	427	74
1930	307,600	5,606	18.2	3,263	10.6	353	62
1931	296,700	5,266	17.7	3,384	11.4	330	62
1932	289,300	4,980	17.2	3,313	11.4	358	71

Average for 10 yrs. 41.0

Average for 10 yrs. 37.0

Average for 10 yrs. 34.2

Average for 10 yrs. 30.1

Average for 10 yrs. 24.3

Aver., 6 yrs. 18.3

Average for 10 yrs. 18.8

Average for 10 yrs. 19.2

Average for 10 yrs. 17.9

Average for 10 yrs. 14.9

Average for 10 yrs. 13.2

Aver., 6 yrs. 11.3

Average for 10 yrs. 148.7

Average for 10 yrs. 147.8

Average for 10 yrs. 163.6

Average for 10 yrs. 114.6

Average for 10 yrs. 79.8

Average for 6 yrs. 66.6

General Provision of Health Services.

HOSPITALS.

Infectious Diseases.

(1) The Plaistow Fever Hospital contains 200 beds which were originally allocated for the reception of scarlet fever, diphtheria and enteric fever cases with isolation beds for mixed or staff cases. Owing to the slight incidence of enteric fever during recent years other infectious cases are admitted, including severe Measles and Whooping Cough, Pneumonia, Tubercular Peritonitis and Encephalitis Lethargica. Cases of Puerperal Pyrexia and Puerperal Fever are also treated at this hospital.

(2) The Grange Convalescent Home, which has been re-named The Children's Hospital, Harold Wood, consists of a residential institution with seven acres of grounds, together with 61 acres of land. It is situated about nine miles from the Borough. This hospital is used for scarlet fever and diphtheria convalescents as occasion arises, and is capable of accommodating 116 patients.

In 1928, 56 additional beds were provided, but since this addition the number of scarlet fever and diphtheria cases have decreased greatly, and consequently the hospital has not been fully used. Recently, therefore, owing to the urgent need for accommodation for chronic sick cases, the Public Assistance Committee have made arrangements with the Hospitals Committee for the temporary use of this institution, and the Ministry of Health agreed to this proposition.

Smallpox.

(3) Dagenham Smallpox Hospital, now used as a sanatorium for Tuberculosis, situated in Essex, is about nine miles from the Borough, and comprises a site of $6\frac{1}{2}$ acres. The Council's Farm of about 119 acres adjoins this hospital. Milk is supplied by this farm to the Fever Hospital and Dagenham Sanatorium. The hospital is composed of permanent and temporary buildings sufficient to accommodate 300 patients.

By arrangements with the London County Council, all cases of smallpox which occur are removed for treatment by that Authority in their Institutions.

Tuberculosis.

Dagenham Sanatorium.

(4) With the sanction of the Ministry of Health, Dagenham Smallpox Hospital is permitted to be used as a Temporary Sanatorium for adults with Pulmonary Tuberculosis.

The total number of beds available for cases of tuberculosis at Dagenham is 128.

DIAGRAM ILLUSTRATING THE ACTIVITIES AND CO-ORDINATION OF THE HEALTH SERVICES.

Langdon Hills Sanatorium for Children.

(5) This sanatorium has accommodation for 40 children suffering from Pulmonary Tuberculosis, and is situated at the Council's Langdon Hills site. The site comprises 100 acres, and is situated in one of the highest parts of Essex, overlooking the mouth of the Thames. It is about 20 miles distant from West Ham, and 270 feet above the sea level.

By arrangement with other Authorities, cases suffering from Surgical Tuberculosis are treated at the Alexandra Hospital, Swanley, Kent; Sir William Treloar's Hospital, Alton; and at various London Voluntary Hospitals.

Whipps Cross Hospital.

This hospital is situated within the Borough of Leyton, and is owned by the Council.

It was built originally to accommodate 741 cases, but it is rarely, if ever, that the number of patients falls below nine hundred, and frequently over 1,000 patients are under treatment there.

The hospital is fully equipped with the most modern operating theatres and special light departments, X Ray apparatus, etc. In addition to the medical staff of the hospital there are also the following visiting specialists attached to the staff:

Dr. W. J. O'Donovan	Skin
Mr. Gellatly	Gynaecologist
Mr. Alan Todd.....	Orthopaedic Surgeon
Mr. Clifford Morson.....	Urologist
Mr. Archer Ryland	Ear, Eyes and Throat Surgeon
Dr. J. P. Martin	Neurologist
Dr. Lewis Slavin	Ophthalmic Surgeon
Dr. J. Barton	Dentist
Dr. de Lacy Walker	Anaesthetist

Forest House is on the same site, with 396 beds for aged men and mental cases, also Forest House Cottages with 90 beds, for aged married couples, at present occupied by aged women.

Forest Gate Hospital.

This institution is situated in the County Borough of West Ham, and is owned by the Council. The hospital has 900 beds to accommodate maternity patients, mental cases, and chronic sick. An extra 200 beds were added in 1930.

The Institution is approved by the Board of Control for 75 mental defectives, as under:—

Adult Males	20
Adult Females	30
Males under 16 years...	10
Females under 16 years	15

Central Home.

This home is situated within the Borough of Leyton, and is owned by the Council.

It is registered for 1,807 chronic sick and able-bodied persons. See Annual Report for 1930, appendix II.

Other Institutions.

(6) The Council have an agreement with Queen Mary's Hospital and Plaistow Maternity Hospital for the institutional treatment of maternity cases. (See page 123).

Orthopœdic treatment is carried out at the Children's Hospital, Balaam Street, and at the Brookfield Hospital, Walthamstow. (See page 123).

Cases of Ophthalmia Neonatorum are treated at the Royal London Ophthalmic Hospital. (See pages 126 and 127).

Open Air Schools.

There are two Open Air Schools, one at Fyfield (Residential), near Ongar, to accommodate 80 boys and 60 girls, and one within the Borough at Crosby Road (Day), to accommodate 60 girls.

In connection with the health services in West Ham it is interesting to note that during the year no fewer than fourteen different authorities made application for particulars of schemes in force in the borough, dealing with many phases of the public health work.

With regard to the co-ordination of the health services available in the borough consequent upon the taking over of the health services of the old Board of Guardians, it may be of interest to note that arrangements have been made whereby any suitable cases seen by the District Medical Officers may be drafted to a Maternity and Child Welfare Clinic, or to the Tuberculosis Dispensary. In the case of the former a post card as under is sent direct to the Medical Officer of Health, who then makes the necessary arrangements for their attendance. With regard to suspected cases of tuberculosis, or cases requiring treatment, the District Medical Officers send a card (specimen below) direct to the Tuberculosis Officer, who upon receipt of this, arranges for an appointment for examination.

A similar arrangement is made whereby patients attending any of the Maternity and Child Welfare Clinics or Tuberculosis Dispensary may be drafted to see the District Medical Officers, when circumstances make it desirable, or are referred to the Public Assistance Officer.

COUNTY BOROUGH OF WEST HAM.

Medical Officer of Health's Department.

Name Age.....

Address

I am of opinion that the above-named, who has to-day been examined by me, should attend the Maternity and Child Welfare

Clinic at

Date.....

.....
District Medical Officer.

Date.....

COUNTY BOROUGH OF WEST HAM.

Medical Officer of Health's Department.

Name Age.....

Address

.....
The above-mentioned person has to-day been examined by me and I am of opinion that ...he is a suitable case for observation or treatment at the Tuberculosis Dispensary.

Clinically I find

.....

.....

Signed.....

District Medical Officer.

Date.....

This card is for use only in cases of old or suspected Tuberculosis, definite cases must be notified to the Medical Officer of Health in the usual way, and will automatically be examined by the Tuberculosis Officer.

On various occasions cases are sent to me by the Public Assistance Officer where mental defect is suggested. Arrangements are made for all these cases to be examined to discover whether or not they are suitable to be dealt with under the Mental Deficiency Acts. Some form of treatment is arranged in cases which can be dealt with under the above Acts.

The Tuberculosis Officer visits the Whipps Cross Hospital at intervals and confers with the Medical Superintendent on various cases, and if necessary arranges their transfer to sanatorium or elsewhere.

With regard to persons employed as Home Helps, a list of persons so employed is sent to the Public Assistance Officer.

In the case of persons applying to be registered as Foster Mothers, the Public Assistance Officer is asked as to whether or not applicant is known to the Public Assistance Committee.

Vaccination Acts, 1867 to 1898.

The following is a summary of the work carried out under the above mentioned Acts during the year 1932.

No. of Cases in Birth Lists received during the year	...	6183
No. of Certificates of Vaccination received	... ..	1735
No. of Certificates of Postponement owing to—		
Health of Child	... ..	390
Condition of House	... ..	—
Prevalence of Infectious Disease	... ..	1
No. of Certificates under Section 2 of Vaccination Act, 1898, and No. of Statutory Declarations under Section 1 of the Vaccination Act, 1907	...	3084
No. of Certificates of Insusceptibility or of having had Smallpox	... ..	23
No of Cases—		
Parents removed out of District	... ..	975
Otherwise not found	... ..	254
No. of Entries in Lists sent to Public Vaccinator	...	1950

AMBULANCE SERVICE.

In connection with the Health Services of the Borough Ambulances are provided by the Council as follows:—

Whipps Cross Hospital (Public Assistance Committee)	.....Six
Plaistow Hospital (for infectious cases only)	.....Two
Harold Wood Hospital	.....One (to be transferred to Whipps Cross Hospital)
Public Health Committee and Highways Committee	.....Four (one emergency for Smallpox only)

In addition to the two Ambulances at Plaistow Hospital, three specially constructed motor vehicles are in use for removing bedding, clothing, or other infected material to the Disinfecting Station, which latter is situated at the Fever Hospital. The number of journeys made for Infectious diseases totals 1,294, and the journeys made by the vans for infected material 1,590.

The Borough Ambulances provided for the removal of persons to Hospitals in consequence of being injured in street accidents or on account of sudden illness responded to 2,560 calls during the year under review. Of this number 81 calls on the Ambulance which is situated at Silvertown were made. The Silvertown Ambulance is available daily between the hours of 7 a.m. and 11 p.m. The other two vehicles are available night and day.

Facilities for obtaining ambulances through the Council's Tram Conductors and the Police have been made, and notices are displayed in all West Ham tramcars giving information. Notices to the same effect are exhibited at all the Council's Conveniences and Fire Stations.

Reciprocal arrangements are in existence between the Boroughs of West Ham, East Ham, and Barking for the use of ambulances in the event of either of the vehicles belonging to the foregoing Authorities being unavailable. Seventeen journeys were made during 1932 under this agreement.

The ambulance may be requisitioned for a person requiring in-patient treatment at Hospital provided a medical certificate is supplied.

Persons receiving out-patient treatment at Hospitals are not permitted the use of the ambulance provided by the Local Authority.

School Clinics† and Treatment Centres.

Stratford Clinic, 84 West Ham Lane, E.	2 Dental Clinics* 1 Minor Ailment Clinic 1 Ophthalmic Clinic
Balaam Street Clinic, Plaistow, E.	1 Minor Ailment Clinic 1 Dental Clinic
Rosetta Road Clinic, Custom House, E.	1 Minor Ailment Clinic 1 Dental Clinic*
Swanscombe Street Clinic, Canning Town, E.16.	1 Minor Ailment Clinic 1 Dental Clinic*

* Also used as Dental Clinics under Maternity and Child Welfare Scheme.

All Clinics are used as Inspection Clinics, and are provided by the Local Education Authority.

Children's Hospital,
Balaam Street, E.13.

Orthopaedic and Sunlight Clinics,
and Psychological Clinic

Tuberculosis Dispensary.

Balaam Street, Plaistow. (See pages 99 to 102).

Maternity and Child Welfare Clinics.

See page 117. Maternity and Child Welfare Section.

† See Ministry of Health Circular 1269

Staff of Medical Officer of Health's Department*.

NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
Dr. F. Garland Collins	M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.	Medical Officer of Health, Chief Administrative Tu- berculosis Officer and School Medical Officer.
Dr. T. W. Hill	M.D., (Glasgow), D.P.H. (Cantab.)	Deputy Medical Officer of Health.
Dr. D. MacIntyre	M.D. (Glasgow), D.P.H.	Medical Superintendent Plaistow Fever Hospital
Dr. G. M. Mayberry	L.A.H. (Dublin), L.R.C.P. (Ireland)	Medical Superintendent Dagenham Sanatorium
Dr. P. A. Galpin	M.D., D.P.H.	Tuberculosis Officer
Dr. W. R. Kilgour	M.R.C.S.(Eng.), L.R.C.P. (Lond.)	Assistant Tuberculosis Officer
Dr. Helen Campbell	M.B., Ch.B. (Edin.), D.P.H.	Senior Assistant Medical Officer Maternity and Child Welfare
Dr. Janetta J. Powrie,	M.B., Ch.B., D.P.H.	Assistant Medical Officer Maternity and Child Welfare; left Council's service Sept., 1932
Dr. Charlotte E. Forsyth	M.B., Ch.B.	Assistant Medical Officer Maternity and Child Welfare
Dr. Dorothy Mitchell	L.R.C.P., L.R.C.S., (Edin.), L.R.F.P.S. (Glas.)	Part time Medical Officer Maternity and Child Welfare
Dr. Dorothy L. M. Keats	M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.	Assistant Resident Medical Officer Dagenham Sana- torium
Dr. J. S. Crawford	M.B., Ch.B.	Resident Medical Officer Plaistow Fever Hospital left Council's service July, 1932
Dr. G. McKinnon	M.B., Ch.B.	Resident Medical Officer Plaistow Fever Hospital
Dr. R. B. Douglas	M.B., Ch.B.	Assistant Resident Medical Officer, Plaistow Fever Hospital; annual ap- pointment
Dr. J. C. Muir	M.D.	Med. Supt., Whipps Cross Hospital; left Council's service Dec., 1932, super- annuated

NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
Mr. O. R. M. Kelly	F.R.C.S. (Eng.)	Med. Supt., Whipps Cross Hospital
Dr. D. G. Sharp	M.R.C.S., L.R.C.P.	Deputy Med. Supt. and First Assistant Whipps Cross Hospital
Dr. W. E. Joseph	M.R.C.S., L.R.C.P.	Second Asst. Med. Officer Whipps Cross Hospital
Dr. M. Bryer	M.R.C.S., L.R.C.P.	Asst. Med. Officer, Whipps Cross Hospital
Dr. N. H. Skelton-Browne	M.R.C.S., L.R.C.P.	Do.
Dr. S. C. S. Cooke	M.R.C.S., L.R.C.P.	Do.
Dr. Ian Mansfield	L.M.S.S.A.	Do.
Dr. W. J. O'Donovan	M.D. M.B. B.S. M.R.C.P. M.R.C.S., L.R.C.P.	Part time Consultant Whipps Cross Hospital
Mr. A. Gellatly	F.R.C.S., M.B., Ch.B.	Do.
Mr. Alan Todd	F.R.C.S. (Eng.), M.R.C.S.	Do.
Mr. Clifford Morson	F.R.C.S., M.R.C.S.	Do.
Mr. Archer-Ryland	F.R.C.S., M.R.C.S.	Do.
Dr. J. P. Martin	F.R.C.P., M.D.	Do.
Dr. Lewis Slavin	M.R.C.S., L.R.C.P.	Do.
Dr. J. Barton	L.M.S.S.A.	Do.
Dr. de Lacy Walker	L.M.S.S.A.	Do.
Dr. J. S. Greig	M.B., C.M.	Medical Supt. Forest Gate Hospital and Central Home, Union Road
Dr. I. B. McCann	M.R.C.S., L.R.C.P.	Senior Resident Medical Officer, Central Home
Dr. D. A. Lubbock	M.R.C.S., L.R.C.P.	Resident Medical Officer, Central Home
Dr. J. S. Coleman	M.B., B.S. (Lond.), M.R.C.S., L.R.C.P.	Asst. Med. Officer, Forest Gate Hospital & Central Home
Dr. T. L. Dolan	L., L.M. 1918, R.C.P. Ire- land; L., L.M. 1918 R.C.S. Ireland.	District Med. Officer and Public Vaccinator
Dr. C. E. Conran	L.R.C.P., L.R.C.S., L.F. P.S.	Do.
Dr. A. E. Kennedy	M.R.C.S., L.R.C.P., L.S.A.	District Med. Officer (part time); died January, 1933
Dr. P. G. S. Kennedy	M.R.C.S., L.R.C.P.	Public Vaccinator
Dr. J. F. Begley	M.B., B.S.	District Med. Officer (part time)

NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
Dr. R. V. Brews,	L., L.M., R.C.P. (Ireland) L., L.M., R.C.S. (Ireland)	District Medical Officer (part time)
Dr. W. E. Passmore	L.S.A. Lond.) L.M.S.S.A. (Lond.)	Public Vaccinator
Dr. A. S. Paterson	M.B., Ch.B.	Medical Officer (part time) Margate Convalescent Home
Mr. H. H. King		Vaccination Officer
Mr. A. E. Parkes	F.I.C., F.C.S.	Public Analyst (part time)
Mr. H. E. Bywater	M.R.C.V.S.	Veterinary Officer
Miss Esmée K. Wilson	L.D.S., R.C.S. (Edin.)	Dental Surgeon Maternity and Child Welfare; left Council's service Aug- ust, 1932
Miss Evelyn Richardson	L.D.S., R.C.S.	Dental Surgeon Maternity and Child Welfare
Miss R. Alefs	General Nursing, C.M.B., Fever Nursing Certifi- cate	Health Visitor
Miss C. H. Banks	General Nursing, C.M.B., Queen's Nurse, Health Visitors' Cert., Royal San. Inst.	Do.
Miss B. H. Clipstone	General Nursing, C.M.B.	Do.
Miss A. Connolly	General Nursing, Health Visitor's Certificate	Do.
Miss M. Cross	General Nursing, C.M.B.,	Health Visitor
Miss B. de Rochfort	San. Insprs. Cert. Royal San. Inst., Health Visi- tor's Cert. Royal San. Inst., C.M.B., Apothe- cary Hall Dispensing Cert.	Do.
Mrs. N. C. Gibbins	General Nursing, C.M.B., Health Visitor's and Fever Nursing Certifi- cates	Do.
Miss M. Grierson	General Nursing, C.M.B.	Health Visitor.
Miss F. B. E. Groub-Tong	General Nursing, C.M.B., Children's Nursing Health Visitor's Cert. Royal San. Inst., San. Inspector's Examn. Board	Do.

NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
Miss A. E. Lunn	General Nursing, C.M.B.	Do.
Miss L. Martin	General Nursing, C.M.B., Board of Education Di- ploma, Mat. and Child Welfare Cert.	Do.
Miss M. McKenzie	General Nursing, C.M.B., Health Visitor's Cert. Royal San. Inst.	Do.
Miss F. Moore	General Nursing, C.M.B.,	Do.
Miss C. Norrie	General Nursing Cert & Children's Cert., C.M.B., Board of Edu- cation Diploma, San. Insprs. Cert. Royal San. Inst.	Do.
Miss B. C. Prager	General Nursing Cert., C.M.B., T.B. Cert. Health Visitor's Cert. Royal San. Inst.	Do.
Miss M. B. Wallace	General Nursing, C.M.B.	Do.
Miss E. B. Welch	General Nursing, C.M.B., Board of Education Di- ploma	Do.
Miss D. M. White	General Nursing, C.M.B., Health Visitor's Certifi- cate Royal San. Inst.	Do.
Miss H. Welham	General Nursing, Fever Cert., C.M.B.	Dental Nurse
Mr. H. G. Clinch M.I.F.E.E. F.S.I.A.	San. Inspr. Cert. R. San. Inst., Meat and Food Inspr. R. San. Inst., Smoke Inspr. R. San. Inst., San. Inspr. Joint San. Insprs. Exam. Board, Exam. in ad- vanced knowledge of practical and adminis- trative duties of Inspr.	Chief San. Inspr., Inspr. under Rag Flock Acts
Mr. W. H. Roberts M.S.I.A.	San. Insprs. Cert. (1892) Royal San. Inst. Prizeman Building Const. (Honours) Prizeman Civil Engineer- ing (Survey Sec.) West Ham Tech. Inst.	Sanitary Inspr., Inspr. under Rag Flock Acts Superannuated February, 1932

NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
Mr. B. G. Bannington M.S.I.A.	San. Insprs. Cert. Royal San. Inst., Cert of Lon- don School of Economics (Lond. University) for Social Science and Ad- ministration; Honours- man and Gilchrist Med- allist (Lond. University Extension) for Public Administration.	Sanitary Inspector, Inspr. under Rag Flock Acts
Mr. A. T. Plackett M.S.I.A.	San. Insprs. Cert. Royal San. Inst.	Sanitary Inspector, In- spector under Rag Flock Acts; superannuated July, 1932
Mr. E. G. Simmons M.S.I.A.	San. Insprs. Cert. Royal San. Inst.	Sanitary Inspector, Inspr. under Rag Flock Acts
Mr. H. A. Smith M.S.I.A.	San. Insprs. Cert. Royal San. Inst.	Sanitary Inspector; died August, 1932
Mr. John F. Mules M.S.I.A., F.F.A.S., A.M.I.S.E.	San. Insprs. Cert., Meat and Food Inspr. Royal San. Inst.	Sanitary Inspector.
Mr. B. J. Driscoll M.S.I.A.	Cert. San. Inspectors' Ex- amn. Board London	Sanitary Inspector, Inspr. under Rag Flock Acts
Mr. C. F. Riley	San. Insprs. Cert., Meat and Food Inspr. Royal San. Inst.	Sanitary Inspector.
Mr. J. A. Dawson, M.S.I.A.	San. Inspr. R.S.I., Meat and Food Inspr. R.S.I.	Do.
Mr. H. G. Avril, M.S.I.A., A.R.San.I.	San. Inspr. Examn. Joint Board.	Do.
Mr. E. J. Cromwell, M.S.I.A.	San. Inspr. Examn. Joint Board, Meat and Food Inspector Royal San. Inst.	Sanitary Inspr., Inspr. un- der Rag Flock Acts
Mr. A. Ault	San. Inspr., Royal San. Inst. Meat Inspr., Royal San. Inst. Smoke Inspr., Royal San. Inst. Meat Inspr., Liverpool Univ., Schol of Hygiene Port Sanitation Cert., Liv- erpool Univ. School of Hygiene	Sanitary Inspector

NAME	QUALIFICATIONS	OFFICES HELD (Wholetime appointments except where otherwise stated)
Mr. R. Dicker, M.S.I.A.	San. Inspr. Royal San. Inst. Meat and Food Inspr. Royal San Inst.	Sanitary Inspector
Mr. J. B. H. Jones, M.S.I.A., A.R.San.I.	San. Inspr. Examn. Joint Board	Do.
Miss V. M. Busby M.S.I.A.	San. Insprs. Cert. Royal San. Inst., Royal San. Inst. and San. Insprs. Examn. Board	Sanitary Inspector
Miss B. M. Keagh	San. Insprs. Cert. London Exam. Board, Health Visitor's Cert. Sanitary Inst.	Sanitary Inspector
Miss G. Briggs, M.S.I.A.	San. Insprs. Examn. Joint Board	Sanitary Inspector
Miss A. Maughan, M.S.I.A.	San. Insprs. Cert. Royal San. Inst.	Do.
Mr. T. R. Harris M.S.I.A., A.R.San.I.	San. Insprs. Cert., Meat and Food Inspr., Royal San. Inst. San. Insprs. Cert., Meat and Food Inspr. San. In- spectors' Examn. Board, London San. Science Cert. 1st Class, Battersea Poly- technic Diploma in Bacteriology of the Battersea Poly- technic.	Do.
Mr. E. F. Hughes M.S.I.A., A.R.San.I.	Cert. San. Inspr. Royal San. Inst.	Sanitary Inspector, Inspec- tor under Food and Drugs Acts, and Official Sampler and Inspector under the Fertilisers and Feeding Stuffs Act, 1926
Mr. E. J. Ferrier Miss C. Aitken	General Nursing, Fever Nursing Cert.	Inspr. under Shops Acts Supervising Nurse under Mental Deficiency Act.

Medical Officer of Health's Office Administrative Staff†

Mr. J. A. Cheatle	Chief Clerk
„ F. W. Bromley	Senior Clerk
„ H. R. Cole	Clerk
„ F. H. Barker	do.
„ J. Sabin	do.
„ A. Clarke	do.
„ D. Thompson	do.
„ S. A. Lemmon	do.
Miss M. Sparrow	do.
„ A. E. Durand	do.
„ H. O. Williams	do.
Mr. J. W. McCarthy	Investigator

TUBERCULOSIS DISPENSARY.

Nurses.	Clerks.
Mrs. E. Siggins, Sister-in-Charge.	Mr. W. Pike
Miss E. J. Egerton	Miss M. F. Bush
Miss A. Williams	Miss G. Williams
Miss E. K. Pottinger	

PLAISTOW HOSPITAL.

Beds 200.

Matron.	Steward.	Clerks.
Miss I. Tulloch	Mr. W. Liddall	Mr. S. Strachan
		Mr. C. Poyser
74 Nursing Staff.		75 Domestic Staff.

THE CHILDREN'S HOSPITAL, HAROLD WOOD.

Beds 116.

Matron.	Steward.
Miss L. M. Mackie	Mr. W. Liddall
19 Nursing Staff. 26 Domestic Staff.	

DAGENHAM SANATORIUM.

Beds 128.

Matron.	Steward.
Miss M. Duguid	Mr. H. Bromley
27 Nursing Staff. 37 Domestic Staff.	

LANGDON HILL SANATORIUM.

Beds 40.

Matron.	Steward.
Miss F. M. Noble	Mr. H. Bromley
9 Nursing Staff. 11 Domestic Staff.	

WHIPPS CROSS HOSPITAL.

Beds 920.

Matron :
Miss E. Downs.

Chief Steward :
Mr. B. S. Lawrence.

Clerks :
Mr. J. Lis.
Mr. J. Jenkins.
Assistant Steward : Mr. V. J. Stebbings.
Mr. C. Samuel Mr. D. Jones.
Mr. R. Adams.

208 Nursing Staff. 135 Domestic Staff.

Medical Superintendent's Office.

Clerks.
Mr. H. R. Ramsey
Mr. C. R. Sandell
Miss B. M. Nicholson

CENTRAL HOME.

Beds 1,807.

Matron :
Mrs. M. E. Lambert.

Master :
Mr. S. P. Lambert.

Clerks :
Mr. H. Wiggins.
Mr. H. W. Latter.
Mr. A. J. Martin.
Mr. H. W. Hagger.
Mr. H. W. Quicke.
Mr. E. C. Steggel.

145 Nursing Staff. 293 Domestic Staff.

FOREST GATE HOSPITAL.

Beds 726.

Matron :
Mrs. E. M. Usherwood.

Steward :
Mr. E. J. Miles.

Clerks :
Mr. R. F. Sizer.
Assistant Steward : Mr. C. P. Chapman.
Mr. A. J. Fillmore. Mr. J. W. Burr.
Mr. A. W. Sawyer.

118 Nursing Staff. 73 Domestic Staff.

MARGATE HOME.

Beds 108.

Matron :
Miss G. B. Oddy.

Clerk & Store Keeper :
Mr. J. W. Rowe.

11 Nursing Staff. 9 Domestic Staff.

DISINFECTORS.

Mr. B. Lyons.
„ H. J. Murty.

Mr. C. Cornish.
„ W. Hubbard.

MORTUARY KEEPERS.

Mr. E. Heisterman.

Mr. A. Kelly

The Staff of the School Medical Officer is set out on page 145.

† A detailed list of the Staff is included in this Report by the request of the Minister of Health in Circular No. 1269.

Shops Acts.

The provisions of the Shops Acts are carried out by Mr. E. J. Ferrier under the supervision of the Medical Officer of Health, and the following Table shows the work performed in connection therewith :—

List of Shops Visited during the Year 1932.

Class of Shop.	Visited.	No half-holiday form exhibited.	Warned verbally.	Warning Notice sent.	Refused to serve.	Summonses attended.
Bakers	185	3	8	1	22	2
Boot repairers, etc.	35	...	2	2	3	1
Butchers	453	11	90	3	120	1
Caterers	31	...	...	...	...	...
Carpets and rugs	16	...	...	...	...	...
Chemists and druggists	80	4	7	8	11	...
China and glassware	136	5	14	...	12	1
Clothiers	179	3	11	...	16	...
Confectionery and tobacco	631	9	138	57	186	14
Corn merchants	20	...	...	...	...	...
Cycle Dealers	20	...	1	...	...	...
Drapers, Milliners and Mantle Dealers	535	19	108	11	69	2
Fishmongers	357	11	51	2	54	...
Fruiterers and Greengrocers	582	14	157	17	177	4
Furniture Dealers	73	2	4	...	4	...
Furriers	6	...	...	...	...	...
Grocers and General	700	18	156	39	199	14
Hairdressers and Barbers	337	4	25	...	24	...
Hosiers and Hatters	158	2	11	1	9	1
Ironmongers	29	...	...	...	1	...
Leather and Grindery	33	...	...	...	2	...
Mixed	460	28	82	30	111	1
Music	46	...	3	...	5	...
Picture Frames	21	...	1	...	1	...
Public Houses	56	3	6	...	1	...
Tailors	111	2	7	1	6	...
Toy and Fancy Goods	80	4	11	...	6	...
Watchmakers, Jewellers and Pawnbrokers	19	...	1	...	...	...
Wireless	94	1	12	...	16	1
Totals	5,483	143	906	172	1,055	42

For results of Police Court Proceedings, see page 56.

List of Local Acts, Adoptive Acts, Bye-Laws and Local Regulations relating to Public Health in force in West Ham.

The Public Health Act, 1890, Part III.—Adopted 13/1/1891.

The Public Health Acts Amendment Act, 1907—

Sections 16, 20, 22, 29, 33. Part II.

Sections 38, 50. Part III.

Sections 53, 62, 63, 64. Part IV.

Section 81 (part of). Part VII.

Section 95. Part X.

Adopted 10th April, 1909.

The Public Health Acts, 1925—

Sections 36, 37, 38, 39, 40, 41, 42, 43, and 44. Part III.

Sections 45, 46, 47, 48, 49, 50. Part IV.

Sections 51, 52, 53, 54, 55. Part V.

Adopted 22nd June, 1926.

West Ham Corporation Acts, 1888, 1893, 1898, 1900, 1902.

BYE-LAWS.

Good Rule and Government (Tent Dwellers, Squatters, etc.).

Adopted 22nd October, 1889.

*Removal of House Refuse. Adopted 28th December, 1892.

Common Lodging Houses. Adopted 26th July, 1892.

Knackers' Yards. Adopted 28th December, 1892.

Offensive Trades. Adopted 1st November, 1892.

(Dealing with the following trades:—Size Maker, Glue Maker, Tripe Boiler, Fat Melter or Fat Extractor, Tallow Melter, Leather Dresser, Tanner, Fellmonger, Bone Boiler, Blood Drier, Soap Boiler, Gut Scraper.)

Nuisances. Adopted 1st November, 1892.

Houses Let in Lodgings. Adopted 1st November, 1892.

Slaughter Houses. Adopted 1st April, 1921.

Nuisances in connection with the removal of offensive or noxious matter. Adopted 22nd August, 1907.

Trading in Streets by Licensed Traders. Adopted 22nd June, 1926.

* Transferred to Borough Engineer's Department, 1st June, 1925

LOCAL REGULATIONS.

Nil.

The Bye-Laws are enforced, where necessary, by the Public Health Committee, acting through their Medical Officer of Health.

Professional Nursing in the Home.

Apart from the nurses attached to the District Medical Officers there is no municipal staff for professional nursing in the homes; there are, however, several voluntary Associations employing a large number of efficient nurses who carry out invaluable work in nursing necessitous cases. As mentioned elsewhere, the co-operation between these Societies and the Local Authority is of the closest possible nature, both in respect to home nursing and health visiting. The Forest Gate section of this Borough is supplied with home-nurses by the Essex County Nursing Association from their branch in Beechcroft Road, Leytonstone. The Silvertown area is similarly supplied through the Tate Nurses (Queen's Nurses), Nurses' Home, Saville Road, Silvertown. By far the largest amount of nursing in the homes, however, is carried out by the Plaistow Maternity Hospital, which serves all local areas.

No arrangements are in force for the nursing of Infectious Diseases in the home. Cases requiring hospital treatment are removed to the Council's Isolation Hospitals.

Maternity and Nursing Homes.

There are three registered homes in the Borough. (See page 125. For Maternal Mortality. (See page 127).

Particulars of Bodies Received into the Mortuaries during 1932.

MONTH.	STRATFORD MORTUARY.											CANNING TOWN MORTUARY.									
	Number received.	No. of bodies in Queen Mary's Hospital. Morty on whom inquests were held.	Males	Females	Over 5 yrs.	Under 5 yrs.	Sent in by Coroner.	Sent in by Police.	Sent in on Sanitary grounds.	Number of Post-mortems.	Number of Inquests.	Number received.	Males	Females	Over 5 yrs.	Under 5 yrs.	Sent in by Coroner.	Sent in by Police.	Sent in on Sanitary grounds.	Number of Post-mortems.	No. of Inquests
January ...	15	1	9	7	13	3	12	4	...	10	8	3	3	...	3	...	1	...	2	1	...
February ...	12	2	10	4	13	1	11	3	...	10	6	4	3	1	4	...	2	2	...	3	1
March ...	11	3		5	11	3	5	9	...	6	9	4	2	2	3	1	1	2	1	3	...
April ...	9	3	9	3	11	1	7	5	...	6	6	3	3	...	2	1	2	1	...	2	1
49 May ...	12	...	6	6	10	2	9	2	1	7	5	2	...	2	1	1	1	1	...	2	...
June ...	7	3	9	1	10	...	8	2	...	5	6	2	1	1	2	...	2	...	...	2	...
July ...	14	...	11	3	11	3	13	1	...	11	8	1	...	1	1	...	1	...	...	1	...
August ...	15	1	15	1	13	2	9	7	...	7	12	2	2	...	2	...	...	1	1	1	1
September...	7	2	6	3	7	2	5	4	...	5	6	2	2	...	2	...	2	...	...	2	...
October ...	16	3	13	6	18	1	16	3	...	11	13	...	...	...	...	...	...	...	...	...	...
November...	11	2	9	4	12	1	8	5	...	6	9	1	1	...	1	...	...	1	...	...	1
December ...	15	4	11	8	17	2	11	8	...	10	11	2	...	2	1	1	2	...	...	2	...
Total ...	144	24	117	51	146	22	114	53	1	94	99	26	17	9	22	4	14	8	4	19	4
Grand Total	168		168		168		168						26		26			26			

Number of Days Bodies remained in Mortuaries.

70 remained 1 Day in Stratford Mortuary.

38	„	2 Days	„	„	„	„
18	„	3	„	„	„	„
10	„	4	„	„	„	„
3	„	5	„	„	„	„
4	„	6	„	„	„	„
1	„	14	„	„	„	„

8 remained 1 Day in Canning Town Mortuary.

9	„	2 Days	„	„	„	„
3	„	3	„	„	„	„
3	„	4	„	„	„	„
1	„	5	„	„	„	„
2	„	10	„	„	„	„

32 Doctors performed 1 Post-Mortem Examination each

19	„	„	2	„	„	Examinations	„
8	„	„	3	„	„	„	„
3	„	„	4	„	„	„	„
1 Doctor	„	„	7	„	„	„	„

Sanitary Circumstances of the Area.

WATER.

Practically the whole of the Borough is supplied with water by the Metropolitan Water Board. The supply is constant, and in every case it is conveyed directly to the house. A few large factories have private wells for drawing water from the chalk.

RIVERS AND STREAMS.

The Thames and the Lee are both tidal rivers. Part of the Lee and the whole of the Thames abutting on the Borough are under the control of the Port of London Authority. The remainder of the River Lee and the Back Rivers connecting therewith which pass through the Borough come under the control of the Lee Conservancy and the newly created River Lee Catchment Board.

The Council have hitherto been responsible for the maintenance of the river banks under powers which have devolved upon them as successors to the Dagenham Commissioners, but the Land Drainage Act, 1930, has transferred certain of these powers to the River Lee and River Roding Catchment Boards.

The Council are carrying out, in conjunction with the Lee Conservancy Board a large scheme for the improvement of the Back Rivers of the Borough under the provisions of the River Lee (Flood Relief, etc.) Act, 1930.

DRAINAGE AND SEWERAGE.

The water carriage system of sewage removal is almost universal throughout the whole Borough. With very few exceptions, houses are provided with properly flushed modern water closets, discharging by modern drainage into the Public Sewers which also convey the surface water. The part of the Borough lying South of the Victoria and Albert Docks drains into a main sewer which passes through portions of East Ham and North Woolwich, and discharges into the London County Council's sewer at North Woolwich.

With the exception of a few isolated cottages on the North side of the Borough, the whole of the sewage is waterborne.

Excepting this comparatively small area, the whole district North of the Victoria and Albert Docks is drained by gravitating sewers to the Corporation Pumping Stations at Abbey Mills, where the dry weather flow is pumped into the Northern outfall sewer, which crosses the Borough obliquely to the London outfall at Barking. There are certain other storm sewers provided which discharge into the rivers.

SCAVENGING.

This work is carried out by the Borough Surveyor's Department.

The main roads are cleansed nightly, and the remainder of the thoroughfares either daily or two or three times a week, according to circumstances.

Two "Karrier" motor sweepers are utilised to assist in this work.

REFUSE DISPOSAL.

The system of refuse disposal as a whole is one of far-reaching public health importance. The amount of refuse necessitating collection in West Ham averages about 250 tons daily, and is at present dealt with by the method of controlled tipping. The refuse collected is shot on controlled tipping dumps at Beckton Road and Temple Mills, and the East Ham Tip at Barking Road.

Common Lodging Houses.

There are eight Common Lodging Houses in the Borough, three in the North and five in the South. These were, with one exception, originally constructed and used for other purposes, such as private dwelling houses, but have been adapted to meet the Bye-laws governing Common Lodging Houses.

The total number of beds at these houses is 516.

One Common Lodging House was demolished in connection with the Royal Victoria and other Docks approaches (Improvement) Act, 1929.

The Sanitary Inspectors keep these premises under constant surveillance. During the year 32 inspections were carried out.

No applications were received in respect of new Common Lodging Houses.

It is a strange fact that in the present time of industrial depression, the Common Lodging Houses, which one might have expected to be full to overcrowding are, in fact, only partly occupied. It may be that the ordinary habitues of these places are now seeking shelter in the Public Assistance Institutions.

Rag Flock Acts 1911 and 1928.

There are four makers of Rag Flock in the Borough, and their premises are under constant supervision. There are also a number of premises wherein Flock is used in the manufacture of furniture and bedding.

Sixteen samples were taken during the year. One of these, taken from a furniture maker, was certified to contain 250 parts per 100,000 of soluble chlorine. Proceedings were instituted

when the defendant relied upon a warranty given by the wholesalers, also situated in the Borough. Information was laid against the latter firm, and the case was eventually dismissed by the Court on payment of costs.

All samples taken under the Rag Flock Acts are now divided into three parts, one being retained by the Inspector in case of the Public Analyst's certificate being disputed. In any future amendment of the Acts it would be advisable to make this procedure compulsory.

Offensive Trades.

There are 27 premises where statutory offensive trades are carried on in the Borough. The following table sets out the nature of these trades:—

Nature of Offensive Trade.	No. of Premises licenced
Fat Melters and Bone Boilers	17
Chemical Manure Manufacturers	1
Soap Boilers	2
Gut Scrapers	2
Fish Meal Manufacturers	1
Tripe Dressers	1
Animal Charcoal Manufacturers	1
Glue Makers	1
Fellmonger	1

In addition to these, there are two premises wherein soap is made by a cold process which does not involve boiling.

Information having been received from another district of the proposed removal to the Borough of a firm of pigs' hair cleaners, the firm were warned that permission to establish must be obtained. Such permission was refused by the Council.

The fish meal factory referred to in previous reports continues to be carried on in a very satisfactory manner. It will be understood that as the raw material consists of fish waste, often in a state of decomposition before delivery, the running of this factory without nuisance is a creditable achievement.

As a result of inspections by night, two firms were prosecuted for emitting to the atmosphere fumes arising from fat melting and the treatment of dog carcasses without having previously passed the fumes through a condenser and an incinerator as required by the Bye-laws. Penalties were imposed in each case.

Permission to extend their premises to a firm of fellmongers, was refused.

Five hundred and seven inspections of premises carrying on offensive trades have been made, resulting in many modifications of procedure in the conduct of the business.

Schools.

The Public Eelementary Schools consist of 48 Council Schools, 13 Non-Provided Schools, 2 Central Schools, and 2 Secondary Schools, affording, in the aggregate, accommodation for 66,607 scholars.

In addition, there are two Schools for Mentally and Physically Defective Children, two Centres for the Deaf, one Open-Air Day School, one Residential Open-Air School, and two Nursery Schools, each to accommodate 120 children.

The School Medical Service is administered by the Chief School Medical Officer (who is also the Medical Officer of Health) with a whole-time staff of a Chief Assistant School Medical Officer, 6 Assistant Medical Officers, 5 Dental Surgeons, 28 Nurses, and 9 Clerks.

The Schools are, with several notable exceptions, fairly modern, substantially built buildings adequately supplied with water, and provided with sufficient surrounding air space, moreover their general cleanliness is satisfactory. Cloak-room accommodation is very limited in some Schools, and more efficient heating is desirable.

With regard to the foregoing paragraph it should be noted that the remodelling of latrines was carried out at five of the Council's Schools, also new latrines were provided at one school.

The installation of hot water heating apparatus was carried out at another school.

Various minor alterations and additions have taken place at several schools.

With a view to checking the spread of epidemic disease the Medical Officer of Health, on receiving information of the occurrence of infectious disease in the family of a scholar, sends a red-coloured Notice to the Head Teacher of the School attended (Day School and Sunday School) recommending the exclusion of children coming from the infected home. The 'Red Notice' is subsequently followed by a 'White Notice' freeing the family from quarantine on the completion of the necessary isolation and the official disinfection of the premises. Each school is provided with a supply of disinfectants for general or special use by the Education Authority.

It was not found necessary to order the closure of any School, or part of a School, on account of infectious disease, or for any other reason.

No complaint has been received with regard to the water supply, which is taken from the mains of the Metropolitan Water Board.

With regard to children absent from school, the School Attendance Officers, as a result of their investigations, send me lists giving the names and addresses of children away from school, also the nature of their illnesses. In the case of infectious diseases, if it is found that the case has not been notified a Sanitary Inspector calls and makes full enquiries into the matter.

**Cases of Sickness extracted from the
Superintendent of Visitors' School Attendance Returns.**

Measles (including German Measles)	...	2346
Chicken Pox	... ..	767
Whooping Cough	... ..	626
Mumps	... ..	537
Tonsillitis	... ..	365
Other Diseases	... ..	1342

**Places of Public Amusement.
Ministry of Health Circular 120 of 1920.**

Sixty-three visits have been made to places of public amusement. Conditions generally continue to improve, but it is found difficult to maintain efficient ventilation, audiences being quick to complain of cold draughts.

Smoke Abatement.

**Public Health Act, 1875.
Public Health (Smoke Abatement) Act, 1926.**

A boiler testing plant at a large engineering works was a source of nuisance which ceased after service of a statutory notice.

Other offences occurred at a Printing Ink Factory, a Manufacturing Chemist, a Paint Factory, a Laundry and a Soap Works. Thirty observations of 30 minutes' duration were taken during the year. Eight Notices of Offence and one Statutory Notice to abate were served. Fifty advisory visits were made to boiler plants in connection with smoke prevention; there can be no doubt that this time was well spent.

**Railway Clauses Consolidation Act, 1845.
Regulation of Railways Act, 1868.**

One Railway Company received a communication in respect of emissions of smoke from locomotives working within the Borough. The nuisance ceased at once.

Steam Whistles Act, 1872.

Complaints were received of annoyance caused by the blowing of a steam siren at a soap works. The firm concerned were interviewed, eventually installed an electrical control, and reduced the times from 30 seconds to 10 seconds at each operation.

Housing of the Working Classes Act, 1885.

Public Health Act, 1925.

Bye-laws under Municipal Corporations Act, 1882.

Tents, Vans and Sheds.

As a result of pressure brought to bear, several vans which were structurally unsatisfactory and badly overcrowded, were removed during the year from land in the Custom House area.

The vans owned by the various showmen at seasonal fairs are not usually a source of trouble.

During December two vans were found on land near Churchill Road, and were removed after notice to the occupiers and the land owner.

Sixty-five visits were made during the year to lands occupied by caravans.

Summary of Work of Sanitary Inspectors.

Houses visited in connection with Infectious Diseases	...	2151
Houses, Factories, and any other premises visited in connection with smallpox	... ..	3010
Visits to Factories	... ..	573
„ Workshops	... ..	214
„ Outworkers	... ..	213
„ Bakehouses	... ..	217
„ Dairies	... ..	652
„ Common Lodging Houses	... ..	32
„ Houses Let in Lodgings	... ..	155
„ Workplaces	... ..	207
„ Slaughterhouses	... ..	39
„ Fish Friers	... ..	155
„ Knackers' Yards	... ..	30
„ Cafe and Restaurant Kitchens, etc., P.H.A. 1925	...	252
„ Ice Cream Makers or Dealers, W.H.C.A.	...	62
„ Other Food Purveyors	... ..	6845

Abatement of Nuisances.

The following table shows the number of Inspections and Sanitary Notices, served in respect of, in the sixteen Wards of the Borough during the year 1932:—

Ward	San. Insp. Name	Inspections	Notices served in respect of
New Town	(Miss B. M. Keogh) ...	638	454
Forest Gate	(Mr. A. Ault) ...	523	372
High Street	(Mr. B. J. Driscoll) ...	482	416
Broadway	(Mr. B. G. Bannington) ...	605	410
Park	(Mr. E. G. Simmons) ...	372	249
Upton	(Mr. E. G. Simmons) ...	196	132
West Ham	(Miss V. M. Busby) ...	465	420
Plashet Road	(Miss V. M. Busby) ...	317	246
Plaistow	(Mr. A. G. Avril) ...	577	498
Canning Town & Grange	(Mr. E. J. Cromwell) ...	877	682
Ordnance	(Mr. J. B. H. Jones) ...	519	385
Hudsons	(Mr. J. F. Mules) ...	348	245
Bemersyde	(Mr. J. F. Mules) ...	334	247
Tidal Basin	(Mr. J. A. Dawson) ...	742	662
Beckton Road	(Miss G. Briggs) ...	661	571
Custom House and Silvertown	(Miss A. Maughan) ...	435	382
Totals		8091	6371

In this connection, 716 summonses have been issued during the year.

Prosecutions, 1932.

Nuisances (Public Health Act)—

609 Summonses. 443 Summonses withdrawn. 1 Summons dismissed—case not proved. 1 Summons adjourned sine die. 164 Magistrates Orders were made.

Failure to Comply with Magistrate's Orders—

85 Summonses. 57 Summonses withdrawn. In 28 Cases penalties were imposed.

West Ham Corporation Acts, 1893 and 1898—

21 Summonses. 12 Summonses adjourned sine die. 6 Summonses withdrawn. In 3 Cases penalties were imposed.

Rag Flock Acts, 1911 and 1928—

1 Summons. 1 dismissed—defendant prosecuted wholesaler—and case was dismissed.

Housing Act, 1925. Section 5—

1 Summons. Withdrawn and proceedings taken under 1930 Act.

Housing Act, 1930—

1 Summons. Fined.

Shops (Hours of Closing) Act, 1928—

25 Summonses. 4 Summonses dismissed on payment of costs.
1 Summons dismissed—defendant in Mental Home.
In 20 Cases fines were imposed.

West Ham Grocers', etc., Closing Order, 1919—

13 Summonses. 5 Summonses dismissed on payment of costs.
In 8 Cases fines were imposed.

Shops' Act, 1912. Section 1. Sub-Section 1—

2 Summonses. 2 Summonses dismissed.

West Ham Bakers' Half-Holiday Order, 1913—

1 Summons. 1 Summons dismissed on payment of costs.

West Ham Grocers, etc. Half Holiday Order, 1912—

1 Summons. Fined.

Offensive Trade Bye Laws—

Bone Boiling. 1 Summons. Fined.

Fat Melting. 1 Summons. Fined.

Selling Whiskey deficient in strength to the extent of 7.0% of
proof spirit—

1 Summons. 1 Summons dismissed on payment of costs.

Selling Ginger Wine in which Alcohol was practically absent,
and contaminated with Tonic Salts—

2 Summonses. 2 Summonses adjourned sine die—service not
properly executed.

Selling Minced Meat adulterated with sulphur dioxide—

1 Summons dismissed on payment of costs.

Selling Meat adulterated with sulphur dioxide—

2 Summonses. 2 Summonses dismissed on payment of costs.

Adulterated Milk—

4 Summonses. 4 Summonses dismissed on payment of costs.

Bottling Milk in Street—

2 Summonses. 2 Summonses dismissed on payment of costs.

1.—Inspection of Factories, Workshops and Workplaces.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Occupiers Prosecuted. (4)
Factories (Including Factory Laundries)	573	...	...
Workshops (Including Workshop Laundries)	214	6	...
Workplaces (Other than Outworkers' premises)	207	4	...
Total	994	10	...

2.—Defects found in Factories, Workshops and Workplaces.

Particulars. (1)	Number of Defects.			Number of offences in respect to which Prosecutions were instituted. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
Nuisances under the Public Health Acts* :—				
Want of cleanliness ...	14	14	...	...
Want of ventilation ...	21	21	...	...
Overcrowding ... ..	...	...	...	...
Want of drainage of floors	8	8	...	...
Other Nuisances ... ..	...	...	...	...
Sanitary Accommodation—				
Insufficient	4	4	...	...
Unsuitable or defective...				
Not separate for sexes ...				
Offences under the Factory and Workshop Acts :				
Illegal occupation of underground bakehouse (s. 101) ... ..	...	...	4	...
Other Offences ... ..	...	...
(Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.)				
Total	47	47	4	...

* Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

Houses Let in Lodgings.

Public Health Act 1875. Section 90.

Housing Acts 1925 to 1930.

There are known to be 102 houses in the Borough which are let in lodgings, some of which are in an unsatisfactory state as such, in regard to safety from fire, the provision of separate sanitary conveniences, sinks, water supply, and cooking stoves for the separate use of each family.

Full investigation of these was being made at the year end, and a report will be made to the Committee in due course, if it is found necessary to obtain new bye-laws for dealing with these premises.

Housing.

Report of Chief Sanitary Inspector,
Mr. H. G. Clinch, M.I.F.E.E., F.S.I.A.

1. Inspection of Dwelling-houses during the year:—

- | | |
|--|-------|
| (1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) | 9177 |
| The number of inspections made | 45565 |
| (2) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 | 679 |
| The number of inspections made for the purpose | 3679 |
| (3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation | 8 |
| (4) Number of dwelling-houses (exclusive of those referred to under preceding sub-head) found not to be in all respects reasonably fit for human habitation | 6516 |

2. Remedy of Defects during the year without service of formal notices:—

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers

A certain number of defective Dwelling Houses are rendered fit as a result of interviews between Officials and Owners.

3. Action under Statutory Powers during the year :—

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

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	679
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By Owners	578
(b) By Local Authority in default of Owners	13

B. Proceedings under Public Health Acts :—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	5837
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :	
(a) By Owners	5942
(b) By Local Authority in default of Owners	32

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

(1) Number of dwelling-houses in respect of which Demolition Orders were made	5
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	5

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

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

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

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
---	-----

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

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

(1)	Number of dwelling-houses in respect of which Closing Orders became operative	Nil
(2)	Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	Nil
(3)	Number of dwelling-houses in respect of which Demolition Orders became operative	—
(4)	Number of dwelling-houses demolished in pursuance of Demolition Orders	5
(1)	The number of houses which on inspection were considered to be unfit for human habitation	6
(2)	The number of houses the defects in which were remedied in consequence of informal action by the Local Authority or their Officers	—
(3)	The number of representations made to the Local Authority with a view to (a) the serving of notices requiring the execution of works; or (b) the making of demolition or closing orders	(a) 679 (b) 8
(4)	The number of notices served requiring the execution of works	679
(5)	The number of houses which were rendered fit after service of formal notices	578
(6)	The number of demolition or closing orders made	5
(7)	The number of houses in respect of which an undertaking was accepted under subsection (2) of Section 19 of the Housing Act, 1930...	1
(8)	The number of houses demolished	5

Housing Act, 1930.

No appeals were made to the Courts during the year against Notices to repair under Section 17 which, considering the expensive repairs required is a surprising fact.

Repairs to blocks of defective properties have proceeded steadily, and no less than 578 Notices have been complied with. In some cases owners or their agents have after completion expressed their appreciation of the fact that their property has been given an extended life by reason of the works executed.

Numerous difficulties are met with in practice and are only to be surmounted by interviews on the affected properties. Many working class houses were constructed in West Ham in former times with either 4½in. walls or two 4½in. skins, not bonded, and composed of bricks and bats. In many cases it has been found impossible to decide whether or not a wall was of 9in. or 4½in. without cutting into it. Naturally a 3in. bulge in a wall likely to be of only 4½in. work, becomes a matter to be regarded seriously.

In cases where Notices are not complied with under Section 17, Notices are always served under Section 18 before works are executed in default. Under Section 18 Notices to the number of 143 were served during the year, and contractors were instructed to execute works in default in 13 cases.

Six official representations were made in respect of houses which were unfit for human habitation and could not be made fit at a reasonable cost. An owner appeared with an offer to make fit in one case, but in no case was it suggested that the house could be made fit at a reasonable cost. It should be noted that although a house cannot be made fit at a reasonable cost, no owner is prevented from making it fit at an unreasonable cost.

An injunction to restrain the Council from entering to execute works was applied for in the High Court by an owner who had entered into a contract to purchase a block of houses from the exors. of an owner deceased, who had been served with Notices under Section 17. The Notices had not been complied with at the time of his death. The injunction failed, but pending a further action against the Council in respect of the Notices, no entry is being made on the property.

In another case where Notices to repair had been served, and contractors had been instructed to execute the works in default, the owner arrived on the second day, shook a workman off a pair of steps, threw the steps into the street, and forcibly prevented the execution of any further work. Summonses were issued under the Housing Act, 1925, for obstruction, and also under Section 18 of the 1930 Act, when, at the hearing, the Court inflicted penalties. The work required by the Notices has since been completed by the contractors.

Inspection and Supervision of Food.

Milk Shops and Dairies.

Milk and Dairies (Consolidation) Act, 1915.

Milk and Dairies (Amendment) Act, 1922.

Milk and Dairies Order, 1926.

There were 652 inspections of dairies and milk purveyors' premises made during the year. Twenty-eight persons were registered as purveyors of bottled milk only, and there were transfers in respect of 9 dairies and 54 purveyors of bottled milk.

Two dairies were removed from the Register and 6 purveyors of bottled milk. Five dairymen occupying premises without the Borough and 2 purveyors of bottled milk were registered as purveyors within the Borough.

There are now 105 premises registered as dairies and their occupiers as dairymen, and 600 persons registered as purveyors of bottled milk only, their premises not being registered as dairies.

Examination of Milk.

Animal Inoculation.

Sixty-five samples of milk were procured from producers and purveyors (counter pans, churns, pails and bottles).

Included in this figure were 24 samples of Grade "A," and 3 samples of Grade "A" (Tuberculin Tested) milk, taken on delivery at the Council's Institutions from farms outside the Borough. These were submitted to the biological test for the presence of tubercle bacillus.

Particulars of the examinations are as under:—

Of 8 samples taken from producers, 1 gave evidence of T.B. infection.

Of 15 samples taken from purveyors, 3 gave evidence of T.B. infection.

Of 10 samples taken from Schools, all proved satisfactory.

Of 24 samples of Grade "A" milk taken on delivery at the Council's Institutions, 7 gave evidence of T.B. infection. Of this figure, 6 samples were from the same farm, and the supply from this source was discontinued forthwith.

In each case of infection the matter was immediately taken up with the Medical Officer of Health of the producing area, whose Veterinary Officer visited the farms concerned for the purpose of examination. As a result of these examinations 13 animals were slaughtered on various farms.

Condensed Milk Regulations.

Thirty-eight samples of condensed milk were taken, 26 for the purpose of testing the equivalent.

In every instance the particulars as to labelling conformed to the requirements of the regulations.

BACTERIOLOGICAL EXAMINATIONS.

Forty-five samples of milk were taken for bacteriological examination from producers and purveyors (counter pans, churns, bottles and pails). Sixteen of these were reported as being unsatisfactory. Of this number, eleven proved to contain excessive bacteria, 2 B. Coli and 3 contained excessive bacteria and in addition B. Coli. Letters of caution were sent, premises and utensils were thoroughly examined, and a close observation has been kept upon the relevant premises.

Public Health (Preservatives, etc., in Food) Regulations.

Twelve samples of various foods were reported upon as containing sulphur dioxide. One sample of confectionery purchased informally contained 16 parts per 1,000,000, but a subsequent sample proved satisfactory. Of 2 samples of sausages containing 100 parts and 400 parts per million of sulphur dioxide respectively, one vendor was warned and the other was proceeded against. Of 6 samples of meat 2 were purchased informally, 4 being subsequently purchased officially, and proceedings were taken. Of 2 samples of minced meat, proceedings were instituted in regard to one, and a letter of caution was sent in regard to the other. One sample of raspberry jam purchased informally contained 14 parts per 1,000,000, but a subsequent sample from the same source proved satisfactory.

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

The following licences were granted during the year:—

Eleven to sell Grade "A" (Tuberculin Tested) Milk including 6 supplementary licences; three to sell Certified Milk; one to produce, bottle and sell, and 8 to sell Grade "A" milk, including 5 supplementary licences; one to pasteurize and sell and 15 to sell Pasteurized milk including 12 supplementary licences.

One hundred and twenty-five samples were submitted for Bacteriological Examination, the results being as follows:—

Pasteurised—

Satisfactory, 58.

Unsatisfactory, 1 (Excessive Bacteria).

Grade "A" (Tuberculin Tested)—

Satisfactory, 16.

Unsatisfactory, 4 (3—B. Coli present in $\frac{1}{100}$ th c.c. and 1—Excessive Bacteria and B. Coli present in $\frac{1}{100}$ th c.c.).

Grade "A"—

Satisfactory, 37.

Unsatisfactory, 5 (3—B. Coli present in $\frac{1}{100}$ th c.c. 2—Excessive bacteria).

Certified—

Satisfactory, 2.

Unsatisfactory, 2 (1—B. Coli present in $\frac{1}{10}$ th c.c. 1—Excessive bacteria and B. Coli present in $\frac{1}{10}$ th c.c.).

Of the forty-two samples of Grade "A" milk, nineteen were taken on delivery at one of the Council's Institutions. Of this number one sample proved to contain B. Coli in $\frac{1}{100}$ th c.c. and one excessive bacteria — of the other 3 samples, one contained excessive bacteria and 2 B. Coli.

Of the four samples of Grade "A" (Tuberculin Tested) milk which failed to pass, 3 proved to contain B. Coli and 1 contained excessive bacteria and B. Coli.

The two samples of Certified Milk which did not meet the requirements of the order, 1 proved to contain excessive bacteria and B. Coli, the other contained B. Coli.

With regard to all cases of designated milk failing to meet the requirements of the Order, special letters of caution were sent asking for immediate investigations to be made with a view to tracing the source of contamination and preventing a recurrence.

Other Foods.

All factories dealing with food of various kinds, also retail shops, bakehouses (there are 29 underground bakehouses), and other premises are under the constant supervision of the District Sanitary Inspectors, and 6845 inspections were made during the year.

Ice Cream.

Thirty-two samples of Ice Cream were taken from shops and itinerant vendors, and submitted for bacteriological examination. Three of these samples were of an unsatisfactory nature, and the vendors in each case were warned. Of the 3 samples, 2 were manufactured by one vendor, who, after being cautioned and his premises and utensils thoroughly inspected and examined, was subsequently sampled, with satisfactory result. The other vendor was sent a letter of caution, his premises and utensils were also examined and a subsequent sample proved to be satisfactory.

Sixty-three inspections of ice cream makers premises were made. The number of individual makers of the commodity is fortunately rapidly diminishing, the tendency now being to take supplies as required from the large wholesale makers.

UNSOUND FOOD CONDEMNED.

Five stones of Conger Eel. 14 stones of Halibut. 120 lbs. of Apples. 4 boxes of Cod Roe. 210½ lbs. of Ham, Veal and Pork. 1 box of Oranges. 34 jars of Calves Tongues. 50 sacks of Potatoes. 24 tins of Ham. 36 Rabbits. 30 lbs. of Jellied Veal. 1 bag of Winkles. 84 lbs. of Filleted Cod. 36 lbs. of Luncheon Meat. 30 casks of Greengage Pulp. 1 case of Halibut. 10 boxes of Apples. 1 bag of Whelks. 1 kit of Skate Wings. 139 lbs. of Tinned Meat. 14 lbs. of Tinned Ham. 19 tins of Fruit. 1 bag of Mussels. 3 Fowls. 9 cases of Lettuce.

West Ham Corporation Act, 1925.

Street Traders.

Bye laws relating to Street Retailers of foods. All food stalls in the Borough are under almost daily supervision. It has not been found that there is any traffic in unsound meat, but there is a tendency for certain vendors of tinned foods to sell various lots of doubtful quality.

Six thousand, eight hundred and forty-five visits were made to stalls, shops, food factories, and 155 to fish friers premises.

Sale of Food (Labelling) Order, 1921..

Two hundred and ninety-three inspections were made during the year, 31 infringements were observed, and 13 warning letters were sent. The Order is now being observed generally, and the infringements were more the result of carelessness than of a desire to evade the law.

Public Health Act, 1925. Section 72.

Cafe kitchens, Restaurants and Dining rooms received 252 visits of inspection, when a considerable improvement, due to the intensive work of 1930 and 1931, was noticeable.

Samples Analysed by Borough Analyst, 1932.

Articles	Analysed		Genuine		Adulterated	
	Official	Unofficial	Official	Unofficial	Official	Unofficial
Milk	... 458	5	442	3	16	2
Condensed Milk	... 13	25	13	25	—	—
Dried Milk	... 25	2	25	2	—	—
Butter	... 61	59	61	59	—	—
Margarine	... 11	—	11	—	—	—
Lard	... 11	5	11	5	—	—
Dripping & Cooking Fat	... 8	5	8	4	—	1
Cocoa	... 5	—	5	—	—	—
Sardines in Oil	... 1	—	1	—	—	—
Coffee	... 4	—	4	—	—	—
Tea	... 26	2	26	2	—	—
Cordials	... 6	2	6	2	—	—
Beer	... 12	—	12	—	—	—
Corn Flour	... 2	—	2	—	—	—
Whiskey	... 1	9	—	8	1	1
Ginger Wine	... 1	—	—	—	1	—
Ground Ginger	... 4	1	4	1	—	—
Drugs	... 2	4	2	4	—	—
Pepper	... 16	13	16	13	—	—
Vinegar	... 28	—	24	—	4	—
do. Malt	... 7	—	7	—	—	—
Cake	... 6	3	6	3	—	—
Canned Fruit	... 2	—	2	—	—	—
Honey	... 1	3	1	3	—	—
Ground Almonds	... 1	3	1	3	—	—
Jams	... 13	11	13	9	—	2
Sugars	... 4	7	4	7	—	—
Sultanas	... 1	—	1	—	—	—
Mincemeat	... 4	4	4	4	—	—
Table Jelly	... 2	—	2	—	—	—
Golden Syrup	... 1	1	1	1	—	—
Chocolate & Chocolate Powder	... 2	—	2	—	—	—
Confectionery	... 16	21	16	20	—	1
Desiccated Cocoanut	... 1	—	1	—	—	—
Arrowroot	... 1	1	1	1	—	—
Pearl Barley	... 2	5	2	5	—	—
Rice	... 1	—	1	—	—	—
Epsom Salts	... —	1	—	1	—	—
Suet	... 1	2	1	2	—	—
S.R. Flour and Flour	... 28	1	26	1	2	—
Baking Powder	... 1	—	1	—	—	—
Sago	... 1	1	1	1	—	—

Continued at top of next page.

Samples Analysed by Borough Analyst, 1932.—Contd.

Articles	Analysed		Genuine		Adulterated	
	Official	Unofficial	Official	Unofficial	Official	Unofficial
Custard Powder ...	2	—	2	—	—	—
Tapioca ...	2	—	2	—	—	—
Bacon ...	5	4	5	4	—	—
Corned Beef ...	1	—	1	—	—	—
Meat ...	19	11	13	9	6	2
Sausages ...	15	1	13	1	2	—
Soup Mixture ...	—	2	—	2	—	—
Peas ...	4	—	4	—	—	—
Malt Extract & Cod Liver Oil ...	1	—	1	—	—	—
Meat & Fish Pastes	3	—	3	—	—	—
Camphorated Oil ...	—	7	—	7	—	—
Seidlitz Powder ...	—	3	—	3	—	—
Cream ...	8	6	8	6	—	—
Cheese ...	3	—	3	—	—	—
Coffee and Chicory Essence ...	—	1	—	1	—	—
Coffee and Chicory ..	—	1	—	1	—	—
Dried Fruit & Peels	11	4	11	4	—	—
Wine ...	6	—	6	—	—	—
Essence of Ginger Wine ...	—	2	—	2	—	—
Mustard ...	3	—	3	—	—	—
Cinnamon ...	1	2	1	2	—	—
Pickles ...	1	1	1	1	—	—
Lemon Curd and Cheese ...	3	1	3	1	—	—
Lemonade Powder ...	1	6	1	6	—	—
Arrowroot ...	1	1	1	1	—	—
Tripe ...	—	1	—	1	—	—
Brawn and Meat Products ...	6	1	6	1	—	—
Cheese Savoury Biscuits ...	—	2	—	2	—	—
Boracic Ointment ...	1	4	—	3	1	1
Olive Oil ...	2	—	2	—	—	—
Sauce ...	2	1	2	1	—	—
Bread ...	1	1	1	1	—	—
Ice Cream ...	1	—	1	—	—	—
	894	259	861	249	33	10

For List of Prosecutions taken in connection with adulterated articles, see page 56.

Bakehouses.

Factory and Workshops Act, 1901.

Ministry of Health (Transfer of Powers) Order, 1921.

The number of bakehouses on the register is as follows:—

71	Factories.
12	Workshops.
22	Domestic.

105

The number of cellar bakehouses certified by the Council under the Factory and Workshops Act, 1901, was 43, but 14 have since lapsed.

During the year the Sanitary Inspectors have made 217 visits to bakehouses, and appropriate action has been taken in all cases where necessary.

The Public Health (Meat) Regulations, 1924.

The Slaughter House Bye Laws, and the Knackers' Yard Bye Laws.

REPORT OF THE VETERINARY OFFICER

(Mr. H. E. Bywater, M.R.C.V.S.)

AND THE MEAT INSPECTOR (Mr. T. R. Harris).

Scope of Report:

In this report we survey the work carried out under the Regulations during the year (excepting that relating to Stalls, Shops, Stores, etc.) ; and also that carried out in connection with the Slaughter-house and Knackers'-yard Bye-laws.

Ante-Mortem Examinations.

Among the 7,673 animals which were inspected before slaughter, a few cases of notifiable disease were observed which were dealt with by the Veterinary Officer under the Diseases of Animals Acts, while a number were noted for particular attention after slaughter. Several cases of tuberculosis of the udder were noticed.

Post-Mortem Examinations.

16,881 animals were inspected after slaughter, and of these 1,897, or 11.23 per cent, were diseased.

Bovines numbered 1,836, of which 796, or 43.35 per cent., were affected with tuberculosis, while 249, or 13.56 per cent., were otherwise diseased. Swine accounted for 3,745, and of this number 266, or 7.10 per cent., were tubercular, and 240, or 6.40 per cent., were suffering with other diseases. Of the 11,300 sheep which were examined 346, or 3.06 per cent., were found to be diseased.

Detailed information is given in Table I. as to the numbers and percentages of animals diseased, while in Tables II., III., and IV. particulars of the meat found to be diseased, and the diseases which rendered it unsound are shown, and in Table V. the total quantity of meat found to be unfit for human food is enumerated.

Tuberculosis.

The incidence of tuberculosis observed among bovines is slightly less than in 1931, but is higher than for each of the years 1926 to 1930. In the case of swine the figure is slightly higher than in any one of the six preceeding years.

The presence of any degree of tuberculosis in an animal necessitates a special examination to determine the extent and character of the infection prior to releasing any part of even a slightly affected carcass, and such examinations involved the expenditure of a considerable amount of time.

In Tables VI and VII details are given of the deposition of tubercular lesions observed during post-mortem examinations.

Detention of Carcasses.

When a carcass is detained a label bearing the words "Detained for further examination" or, if condemned, one with the word "Condemned" on it is usually attached to the carcass. This procedure tended to prevent misunderstanding, particularly when dealing with large numbers of pigs.

Disposal of Diseased Meat.

Diseased meat and offal was released, under supervision, for industrial purposes. Prior to release a powerful dye or strong disinfectant was usually sprinkled over it to render it useless for the food of man. In other cases the placing of the diseased material in a digester at the premises where it was being destroyed was witnessed.

We are pleased to be able to record that we were again successful in effecting the voluntary surrender of all meat and offal found to be diseased.

Times of Slaughtering.

Slaughtering occurred in the Borough on all days of the week, including Sunday, and took place at all times during the twenty-four hours; as a result, the work of inspection frequently had to be continued until a late hour of the day, and also had to be performed on Public Holidays and on Sundays.

Sanitation of Slaughter-houses and Knackers'-yards.

The slaughter-houses and knackers'-yards in use have been kept, generally, in a satisfactory condition, and with occasional exceptions, have conformed to a reasonable standard of cleanliness.

Applications for Licences.

Ten applications were received for the renewal of slaughter-house licences, all of which were granted. Two knackers'-yard licences were issued also.

Prosecutions.

It was not deemed necessary to report any cases for legal proceedings, as the infringements of the regulations and bye-laws which were observed were remedied following verbal warnings or warning letters.

Slaughter of Animals Bills.

Two Bills relating to the slaughter of animals have been promoted by private members in the present Parliament. The one sponsored by Col. Moore was given a Second Reading on the 7th April, 1933, and was committed to a Standing Committee of the House.

A further provision contained in the Bill introduced by Col. Moore empowers inspection by constables and persons (i.e. officers of Animal Defence Societies) authorised in writing by a local authority or by the Minister of Health to ascertain whether mechanical stunning in slaughter-houses and knackers'-yards is being satisfactorily operated. This clause would appear to be open to objection from the point of view of local authorities, inasmuch as it would infringe upon the field already covered by certain of their officials who, for many years past under the provisions of the slaughter-house and knackers'-yard bye-laws, have been charged with the duty of seeing that animals are humanely killed.

TABLE I.

Table showing Animals examined post-mortem and those found to be Diseased.

Class of Animals.	Number Inspected	Affected with T.B.		Affected with other Diseases.	
		No.	Percentage.	No.	Percentage
Bovines—					
Bulls	20	4	20.00	1	5.00
Bullocks	486	27	5.55	56	11.52
Cows	1,233	761	61.71	187	15.16
Heifers	46	4	8.69	5	10.86
Calves	51	...	...	...	...
Porcines—					
Boars	24	2	8.33	...	...
Sows	47	7	14.89	5	10.63
Porkers	3,674	257	6.99	235	6.39
Ovines—					
Sheep	5,312	...	...	300	5.64
Lambs	5,988	...	...	46	0.76
Caprines—					
Goats ... ..	...	...	...	...	...
Kids ... ..	...	...	...	...	...
TOTALS	168,81	1,062	6.29	835	4.94

TABLE I

Table showing results of examination of various types of specimens found to be infected.

Specimen	Number of specimens examined	Number of specimens found to be infected	Percentage of infected specimens	Remarks
1. Blood	100	10	10%	
2. Liver	100	15	15%	
3. Spleen	100	12	12%	
4. Kidney	100	8	8%	
5. Lung	100	5	5%	
6. Heart	100	3	3%	
7. Brain	100	2	2%	
8. Stomach	100	1	1%	
9. Intestine	100	1	1%	
10. Pancreas	100	0	0%	
11. Gall bladder	100	0	0%	
12. Urinary bladder	100	0	0%	
13. Vagina	100	0	0%	
14. Cervix	100	0	0%	
15. Uterus	100	0	0%	
16. Ovary	100	0	0%	
17. Fallopian tube	100	0	0%	
18. Vagina	100	0	0%	
19. Cervix	100	0	0%	
20. Uterus	100	0	0%	
21. Ovary	100	0	0%	
22. Fallopian tube	100	0	0%	
23. Vagina	100	0	0%	
24. Cervix	100	0	0%	
25. Uterus	100	0	0%	
26. Ovary	100	0	0%	
27. Fallopian tube	100	0	0%	
28. Vagina	100	0	0%	
29. Cervix	100	0	0%	
30. Uterus	100	0	0%	
31. Ovary	100	0	0%	
32. Fallopian tube	100	0	0%	
33. Vagina	100	0	0%	
34. Cervix	100	0	0%	
35. Uterus	100	0	0%	
36. Ovary	100	0	0%	
37. Fallopian tube	100	0	0%	
38. Vagina	100	0	0%	
39. Cervix	100	0	0%	
40. Uterus	100	0	0%	
41. Ovary	100	0	0%	
42. Fallopian tube	100	0	0%	
43. Vagina	100	0	0%	
44. Cervix	100	0	0%	
45. Uterus	100	0	0%	
46. Ovary	100	0	0%	
47. Fallopian tube	100	0	0%	
48. Vagina	100	0	0%	
49. Cervix	100	0	0%	
50. Uterus	100	0	0%	
51. Ovary	100	0	0%	
52. Fallopian tube	100	0	0%	
53. Vagina	100	0	0%	
54. Cervix	100	0	0%	
55. Uterus	100	0	0%	
56. Ovary	100	0	0%	
57. Fallopian tube	100	0	0%	
58. Vagina	100	0	0%	
59. Cervix	100	0	0%	
60. Uterus	100	0	0%	
61. Ovary	100	0	0%	
62. Fallopian tube	100	0	0%	
63. Vagina	100	0	0%	
64. Cervix	100	0	0%	
65. Uterus	100	0	0%	
66. Ovary	100	0	0%	
67. Fallopian tube	100	0	0%	
68. Vagina	100	0	0%	
69. Cervix	100	0	0%	
70. Uterus	100	0	0%	
71. Ovary	100	0	0%	
72. Fallopian tube	100	0	0%	
73. Vagina	100	0	0%	
74. Cervix	100	0	0%	
75. Uterus	100	0	0%	
76. Ovary	100	0	0%	
77. Fallopian tube	100	0	0%	
78. Vagina	100	0	0%	
79. Cervix	100	0	0%	
80. Uterus	100	0	0%	
81. Ovary	100	0	0%	
82. Fallopian tube	100	0	0%	
83. Vagina	100	0	0%	
84. Cervix	100	0	0%	
85. Uterus	100	0	0%	
86. Ovary	100	0	0%	
87. Fallopian tube	100	0	0%	
88. Vagina	100	0	0%	
89. Cervix	100	0	0%	
90. Uterus	100	0	0%	
91. Ovary	100	0	0%	
92. Fallopian tube	100	0	0%	
93. Vagina	100	0	0%	
94. Cervix	100	0	0%	
95. Uterus	100	0	0%	
96. Ovary	100	0	0%	
97. Fallopian tube	100	0	0%	
98. Vagina	100	0	0%	
99. Cervix	100	0	0%	
100. Uterus	100	0	0%	

TABLE II.

Table showing Meat found to be Unfit for Human Food, and the Disease or Condition which required its Condemnation.

BOVINES.

Disease or Condition.	Entire Carcases and Viscera	Heads.	Tongues.	Forequarters.	Shins.	Clods.	Stickings.	Chucks.	Briskets.	Ribs.	Flanks.	Loins.	Rumps.	Hearts.	Lungs.	Diaphragms.	Stomachs.	Omenta.	Intestines.	Mesenteries.	Livers.	Pancreas.	Spleens.	Kidneys.	Kidney Knobs.	Mammary Glands.	Top Pieces.
Tuberculosis ...	21	197	197	12	8	9	9	...	4	2	8	3	...	22	724	4	40	23	22	157	91	50	22	6	8	20	...
Actinomycosis & Actinobacillosis	9	8	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Haematoma
Emphysema
Endocarditis
Distomatosis	1	...	...	...	...	...	163	...	...	...	...	...	...
Ecchinococcus Veterinorum
Cysts	1	...	...	...	...	...	...	2	...	...	...	...	...
Abscesses	18	...	...	...	...	...	...
Fatty Splenitis	1	...	...	...	...
Cavernous Angioma	14	...	...	...	...	...	...
Emaciation
Bruises, Fractures	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	8	...	...	...
Cystic Cirrhosis	8½	...	...	...	...	...	...
Oedema
Blood Aspiration
Hepatitis	2	...	...	...	...	...	...	...	...	...	...	...	...
Pleurisy	5	...	...	...
Nephritis	248	...
Mastitis
TOTALS ...	21	206	205	12	9	9	9	...	4	2	9	3	...	22	729	4	40	23	22	157	296½	50	23	19	8	268	...

TABLE III.

Table showing Meat found to be Unfit for Human Food, and the Disease or Condition which required its Condemnation.

SWINE.

Disease or Condition.				Entire Carcases and Viscera.	Heads and Collars.	Hands and Springs.	Spare Ribs and Blade Bones.	Bellies.	Loins.	Legs.	Hearts.	Lungs.	Stomachs.	Intestines.	Mesenteries.	Livers.	Spleens.	Kidneys.	Omenta
Tuberculosis	...	...	...	5	133	1	1	...	12	...	12	51	17	9	210	47	5	...	...
Swine Fever	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Splenitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...
Pneumonia	...	...	...	...	...	...	...	...	...	...	...	76	...	...	...	...	...	...	...
Septicaemia	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ecchinococcus Veterinorum cysts	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	2	...	...	...
Bruises and Fractures	...	...	...	...	...	...	...	...	...	4	...	...	...	...	...	...	...	...	...
Abscesses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Fatty Degeneration	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Oedema	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Emaciation	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cirrhosis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	111	...	...	...
Pleurisy	...	...	...	...	...	...	...	...	...	...	...	32	...	...	...	...	...	...	...
Pericarditis	...	...	...	...	...	...	...	...	...	23	...	...	...	...	...	...	...	...	...
Hepatitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...
Nephritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	...
TOTALS...	...	...	...	10	133	1	1	...	12	41	35	161	17	9	210	162	8	4	...

TABLE IV.

Table showing Meat found to be Unfit for Human Food,
and the Disease or Condition which required its
Condemnation.

OVINES.

Disease or Condition.	Kidneys	Entire Carcases and Viscera.	Chumps.	Lungs.	Legs.	Breasts.	Livers.	Omenta
Pneumonia	4	...	...	...	...
Distomatosis	248	...
Ecchinococcus Veterinorum Cysts	1	...	...	2	...
Tenuicollis Embryos and Cysts	34½	...
Strongylosis	17	...	...	...	...
Abscesses	1	...	1	...	...
Pyrexia	1	...	...	...	...	...	...
Emaciation	18	...	...	...	...	...	...
Bruises and Fractures	3	...	...	...
Oedema	2	...	...	...	...	...	...
Pleurisy	10	...	...	...	...
Pericarditis
Nephritis
TOTALS	—	21	—	33	2	1	284½	—

TABLE V.

**Table showing Unsound Meat Condemned as a result
of Post-Mortem Examinations.**

Bovines—

Entire Carcases and Viscera	...	21
Heads	... ..	206
Tongues	... ..	205
Forequarters	... ..	12
Shins	... ..	9
Clods	... ..	9
Stickings	... ..	9
Briskets	... ..	4
Flanks	... ..	9
Ribs	... ..	2
Loins	... ..	3
Hearts	... ..	22
Lungs	... ..	729
Diaphragms	... ..	4
Stomachs	... ..	40
Omenta	... ..	23
Intestines	... ..	22
Mesenteries	... ..	157
Livers	... ..	296½
Pancreas	... ..	50
Spleens	... ..	23
Kidneys	... ..	19
Kidney Knobs	... ..	8
Mammary Glands	... ..	268

Porcines—

Entire Carcases and Viscera	...	10
Heads and Collars	...	153
Hands and Springs	...	1
Spare Ribs and Blade Bones	...	1
Loins	...	$\frac{1}{2}$
Legs	...	$4\frac{1}{2}$
Hearts	...	35
Lungs	...	161
Stomachs	...	17
Intestines	...	9
Mesenteries	...	210
Livers	...	162
Spleens	...	8
Kidneys	...	4

Ovines—

Entire Carcases and Viscera	...	21
Breasts	...	1
Legs	...	3
Lungs	...	33
Livers	...	$284\frac{1}{2}$

TABLE VI.

Table showing deposition of Tubercular Lesions found in the Bones* and Organs and on the Serous Membranes of Bovines and Swine.

Class of Animals	No. of Animals affected with T.B.	Cervical Vertebrae	Dorsal Vertebrae	Adrenal Bodies.	Kidneys. (Substance)	Mammary Glands	Pleura	Peritoneum.	Hearts.				Lungs.		Livers.		Pancreas		Stomachs		Omenta.	Spleens.		Intes- tines.		Uteri & Ovaries.			
									Pericardium	Epicardium.	Myocardium.	Endocardium.	Pleura.	Parenchyma.	Capsule.	Substance.	Capsule.	Substance.	Outer Surface.	Inner Surface.		Capsule.	Substance.	Outer Surface.	Inner Surface.	Mesenteries (Surface).	Capsule.	Inner Surface or Substance.	Testicles & Penis.
Bovines—																													
Bulls	4	...	...	...	...	...	1	1	1	...	...	...	1	2	1	...	1	...	1	...	1	1	...	...	...	...	...	...	...
Bullocks	27	...	...	...	...	...	1	1	...	...	...	...	1	7	1	2	1	...	1	...	1	1	...	1	...	...	...	...	...
Cows	761	...	...	...	4	7	29	28	14	...	...	...	29	298	20	30	16	...	28	...	28	25	1	17	...	17	10	...	...
Heifers	4	...	...	...	...	...	1	1	...	...	...	...	1	2	1	...	1	...	1	...	1	1	...	...	...	...	...	...	...
Calves	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Swine—																													
Boars	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Sows	7	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...
Porkers	257	...	...	...	1	...	...	...	...	...	...	...	...	27	...	33	...	...	...	...	...	...	9	...	...	...	...	...	...

* No lesions were observed in the bones.

TABLE VII.

Table showing deposition of Tubercular Lesions found in the Lymphatic Systems of Bovines and Swine

Class of Animals	No. of Animals affected with T.B	Sub-Maxillary.	Retro-Pharyngeal	Parotid.	Atlantal	Pre-Scapula.	Pre-Pectoral.	Pre-Sternal.	Supra-Sternal.	Sub-Dorsal.	Renal.	Lumbar.	Iliacs.	Pre-Crural.	Supra-Mammary or Sup-Inguinal.	Ischiatic	Popliteal.	Xiphoid.	Bronchial.	Anterior Mediastinal.	Posterior Mediastinal.	Gastric.	Splenic.	Hepatic.	Pancreatic.	Mesenteric.
Bovines—																										
Bulls	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	3	3	2	...	...	...	...	...
Bullocks	27	...	12	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	13	10	11	...	...	7	3	10
Cows	761	15	186	4	...	14	8	18	7	4	8	3	...	...	9	...	...	19	607	451	479	9	3	86	39	158
Heifers	4	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	3	3	...	...	1	...	1
Calves	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Swine—																										
Boars	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Sows	7	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	1	1	1	...	4
Porkers	257	136	...	...	...	...	3	1	...	...	2	2	1	...	...	...	2	1	47	10	10	18	5	35	...	207

Milk and Dairies (Consolidation) Act, 1915.

Milk and Dairies Order, 1926.

Milk (Special Designations) Order, 1923.

Tuberculosis Order of 1925.

THE REPORT OF THE VETERINARY OFFICER.

The cowsheds and dairy cattle within the borough boundaries are inspected monthly under the provisions of the Acts and Orders relating to the milk supply and also as occasion demands under the Tuberculosis Order; at the same time the hygienic conditions governing the production of milk are also supervised.

During the year eight hundred and forty-five (845) inspections of cattle were made, and where it appeared desirable, samples of milk or sputum were taken for microscopical examination for the presence of tubercle bacilli. These measures resulted in the detection of one bull and seven cows which came within the scope of the Tuberculosis Order, and in consequence these animals were slaughtered. Three cases were tuberculosis of the udder, two, although not so affected, were found to be giving tuberculosis infected milk, while three were active cases of pulmonary tuberculosis.

Post-mortem examinations (at which the owner, accompanied by his Veterinary Surgeon, is entitled to be present) were conducted to ascertain the correctness of the diagnosis and also to certify the extent of the infection. Should the animal not be affected with tuberculosis the owner is entitled to the full value of his animal plus one pound, but if affected the compensation is assessed at 75% of the valuation in non-advanced cases, and 25% in advanced cases as defined by the Order, with a minimum of thirty (30) shillings.

Compensation amounting to £80 was thus paid during the year, 75% of which was borne by the Ministry of Agriculture and Fisheries. The carcasses of these animals were used, under supervision, for the manufacture of manures, etc.

The Tuberculosis Order was introduced to permit the destruction of any bovine animal suffering with tuberculosis in such a degree as to be a danger to other animals or a source of contamination to the milk supply. The percentage of milk cattle affected with tuberculosis is very high, but the majority do not come within the scope of the Order, although they must be regarded as potential sources of infection.

Fertilisers and Feeding Stuffs' Act, 1926.

(Inspector Mr. F. E. Hughes)

h

FEEDING STUFFS.

The following table sets out samples taken under the above Act during the years :—

Article	No. of Samples taken	Analysis agrees	Analysis disagrees
Barley Meal ...	3	3	...
Biscuit Meal ...	5	1	...
Bran ...	2	2	...
C——— ...	2	—	...
Fish Meal ...	3	2	...
Green Bone Meal ...	1	1	...
Laying Meal ...	2	2	...
Meat and Bone Meal...	9	8	...
Meat Meal ...	2	—	...
White Feeding Fish Meal ...	8	4	...

FERTILISERS.

Article	No. of Samples taken	Analysis agrees	Analysis disagrees
Bone Meal ...	3	3	...
C—— Fertiliser ...	2	—	...
C—— do. ...	1	—	...
Fertility ...	1	1	...
Garden Bone Meal ...	7	1	...
Hop Manure ...	2	—	...
I—— Fertiliser ...	1	1	...
M—— Garden Plant Food ...	2	—	...
Muriate of Potash ...	2	—	...
P—— Fertiliser ...	2	2	...
Potato Fertiliser ...	1	1	...
Pure Raw Guano ...	2	1	...
R—— Fertiliser ...	2	1	...
Sulphate of Ammonia ...	2	2	...
Sulphate of Potash ...	1	1	...
Superphosphate ...	2	1	...
T—— Manure ...	1	1	...

Infectious Diseases.

NOTIFIABLE DISEASES (Other than T.B.).

The following table shows the number of cases of notifiable diseases during the year 1932, together with the number removed to hospitals and the total number of deaths from each disease.

Diseases.	Cases Notified.	Removed to Hospital	Total Deaths.
Smallpox	185	185	...
Diphtheria	303	295	2
Scarlet Fever	672	598	13
Enteric Fever (including Paratyphoid) ...	9	5	...
Puerperal Fever	14	11	9
Pneumonia	661	466	276 ^o
(Acute Primary and Acute Influenzal only notifiable)			
Cerebro Spinal Fever	14	14	15*
Acute Polio Myelitis	7	4	...
Acute Polio Encephalitis ... ..	...	...	...
Encephalitis Lethargica ... ..	...	...	3
Erysipelas	158	59	...
Ophthalmia Neonatorum	29	14	...
Malaria ... ..	...	...	...
Continued Fever	2	...	...
Dysentery ... ..	...	...	...
Puerperal Pyrexia	47	28	...

* Includes unnotified case.

^o Includes all forms.

Table indicating deaths during the past eight years from:—

Year	Scarlet Fever	Whooping Cough	Measles
1925	6	81	32
1926	7	20	78
1927	7	73	6
1928	5	26	69
1929	6	114	22
1930	4	19	78
1931	5	35	3
1932	3	29	77
	—	—	—
	43	397	365
	—	—	—

Scarlet Fever (Return Cases).

Cases occurring within the margin of one month from the discharge of a case from Hospital to the same house were regarded as "Return Cases." Of 598 admitted to Hospital, 10, or 1.6%, were associated with recurrent infections in this way (see also report of Medical Superintendent of Plaistow Fever Hospital—pages 86—97.

Laboratory Work.

Bacteriological Work is carried out at the various Municipal Institutions.

At Plaistow Fever Hospital, in addition to the routine bacteriological work of the Hospital, any medical practitioner may have a bacteriological report upon any case of suspected diphtheria, typhoid or cerebro-spinal fever.

Queen Mary's Hospital, Stratford, carry out bacteriological examinations of samples of graded milk, ordinary milk, and various other articles.

The Tuberculosis Officer at the Tuberculosis Dispensary in Balaam Street examines all specimens of sputum suspected to contain the tubercle bacillus.

Samples of water, milk, and food stuffs are analysed by a Public Analyst, who is a part-time Officer of the Council. He is also the Analyst under the Fertilisers and Feeding Stuffs Act, 1926.

PLAISTOW HOSPITAL.

Report of Medical Superintendent.

(Dr. D. MacIntyre).

The number of patients under treatment during 1932 was 2,047. This is an increase of 533 over the number treated in the previous year. The total deaths numbered 128, which is more than double that of the previous year.

The increase in cases was due to the prevalence of measles, whooping cough and pneumonia. The total admissions from these three diseases numbered 614 and they were responsible for the 84 of the deaths which occurred during the year, whereas scarlet fever and diphtheria admissions together numbered 883, from which 11 deaths resulted.

Scarlet fever admissions showed a slight increase over the previous year, but the type of disease remained mild.

There was little change in diphtheria as compared with the previous year. The disease was not prevalent and the majority of the cases were of a mild type. A new record of only 9 fatal cases was reached.

Two mild cases of para-typhoid fever were under treatment.

An epidemic of measles was present at the beginning of the year, and during the first five months over 200 severe cases with complications were admitted. A supply of convalescent serum was unfortunately not obtainable either for prophylactic use or for clinical treatment, as most of the patients were children under two years of age, or were in other respects unsuitable as donors.

Whooping Cough continued to be rather prevalent throughout the year, and accommodation was provided for as many as possible of the more severe cases.

Pneumonia cases showed a marked increase in numbers. This was partly due to the continued low incidence of scarlet fever and diphtheria, which rendered accommodation available for cases of this disease.

Erysipelas showed a slight decrease in numbers, and the average type of case was not quite so severe as in the previous year.

One hundred and eighty-two patients were in residence at the beginning of 1932, 1,865 were admitted during the year, making a total of 2,047 under treatment. Of these, 1,653 were discharged recovered, 128 died, and 266 remained under treatment at the end of the year.

The chief causes of death during the year are briefly summarised as follows:—

Scarlet Fever	...	...	...	2 deaths.
Diphtheria	...	...	...	9 „
Measles	...	...	...	33 „
Whooping Cough	...	...	...	14 „
Pneumonia	...	...	...	37 „
Meningitis (various forms)	...	...	...	8 „
Erysipelas	...	...	...	4 „
Other Diseases	...	...	...	21 „
				<hr/>
				128 „
				<hr/>

The fatality rate, calculated on all the cases admitted during the year, was 6.86 per cent.

Table I shows the admissions and deaths for each month of the year, and in Table II there is shown the annual admissions and deaths from the principal infectious diseases since the Hospital was opened. (Page 89).

Scarlet Fever.

The total number of cases under treatment was 676. Of these 560 were discharged recovered, 2 died, and 114 remained under treatment at the end of the year.

Scarlet fever antitoxin was administered to 67 of the more severe cases which were admitted within the first three days of illness. The dosage varied from 10 c.c.s to 40 c.c.s.

The average duration of illness on admission was 3.76 days. Patients between the ages of 4 and 14 years, who were free from complications, were transferred to the Convalescent Hospital at Harold Wood at the end of their second week of illness. The average duration of residence at Plaistow Hospital of all cases was 22 days.

Corrected diagnosis:—41 cases, notified as scarlet fever, were wrongly diagnosed and proved after admission to be suffering from the following complaints:—measles, 9; tonsillitis, 6; no disease, 10; toxic rash, 5; scabies, 2; chickenpox, 2; influenza, 1; dermatitis, 1; sun burn, 1; abscess of jaw, 1; diphtheria, 1; bronchitis, 1; marasmus, 1.

Three cases admitted as diphtheria and 2 cases admitted as measles proved to be suffering from scarlet fever.

Five cases in which the diagnosis was doubtful on admission contracted the disease in the wards, and 4 cases suffered a relapse during the 3rd week of illness.

TABLE I.

1932	ADMISSIONS.											DEATHS.										
	Scarlet Fever.	Diphtheria.	Typhoid Fever.	Measles.	Pneumonia	Erysipelas.	Chicken- pox.	Puerperal Fever.	Whooping Cough.	Other Diseases.	Total.	Scarlet Fever.	Diphtheria.	Typhoid Fever.	Measles.	Pneumonia	Erysipelas.	Chicken- pox.	Puerperal Fever.	Whooping Cough.	Other Diseases.	Total.
January ...	33	28	...	5	22	3	...	...	9	24	124	...	1	...	1	8	...	...	...	1	4	15
February ...	29	22	...	33	13	...	...	...	8	24	129	...	...	...	2	4	1	...	...	...	2	9
March ...	37	24	...	84	11	4	...	...	4	15	179	...	1	...	9	3	...	...	...	1	5	19
April ...	39	19	...	94	5	2	...	...	9	23	191	...	...	...	15	1	...	...	...	1	1	18
May ...	33	14	...	30	7	8	...	...	6	16	114	...	...	...	3	1	...	...	...	1	2	7
June ...	33	26	...	19	5	4	...	...	7	22	116	...	...	...	2	...	...	...	...	1	1	4
July ...	47	20	...	13	18	1	...	...	7	24	130	...	...	...	1	3	...	...	...	1	2	7
August ...	39	27	...	3	12	3	...	...	9	28	121	...	...	...	...	1	2	...	...	2	3	8
September ...	75	23	...	1	7	1	...	...	13	22	142	...	...	...	...	1	...	...	...	1	2	4
October ...	82	31	...	...	12	4	...	...	16	48	193	...	5	...	...	2	...	...	...	2	3	12
November ...	52	20	...	...	48	7	...	...	12	26	165	...	1	...	...	3	...	...	...	1	2	7
December ...	91	39	...	...	54	5	...	...	18	54	261	2	1	...	...	10	1	...	...	2	2	18
Totals ...	590	293	...	282	214	42	...	...	118	326	1,865	2	9	...	33	37	4	...	...	14	29	128

TABLE II.

Year.	Scarlet Fever.		Diphtheria.		Typhoid Fever.		Measles.		Pneumonia.		Whooping Cough.		Erysipelas.		Other Diseases.		Total	
	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.	Ad.	D.
1896	170	8	114	23	...	...	...	...	...	...	...	...	...	...	...	...	284	31
1897	188	6	163	21	...	...	...	...	...	...	...	...	...	...	...	...	351	27
1898	206	4	249	42	...	...	...	...	...	...	...	...	...	...	...	...	455	46
1899	192	2	309	49	...	...	...	...	...	...	...	...	...	...	...	...	501	51
1900	177	4	269	36	...	...	...	...	...	...	...	...	...	...	...	...	446	40
1901	203	16	310	66	47	4	...	...	...	...	...	...	...	...	...	...	560	86
1902	257	12	431	72	138	30	...	...	...	...	...	...	...	...	...	...	826	114
1903	370	10	334	48	84	17	...	...	...	...	...	...	...	...	...	...	788	75
1904	679	29	351	31	95	15	...	...	...	...	...	...	...	...	...	...	1125	75
1905	747	18	438	53	62	14	...	...	...	...	...	...	...	...	...	...	1247	85
1906	806	18	421	70	127	18	...	...	...	...	...	...	...	...	...	...	1354	108
1907	667	29	422	82	68	12	...	...	...	...	...	...	...	...	...	...	1157	123
1908	665	26	373	47	73	12	...	...	...	...	...	...	...	...	...	...	1111	85
1909	990	32	337	35	34	5	...	...	...	...	...	...	...	...	...	...	1361	72
1910	655	17	260	45	71	14	...	...	...	...	...	...	...	...	...	...	986	76
1911	491	13	295	52	70	15	...	...	...	...	...	...	...	...	...	...	856	80
1912	562	17	291	35	49	10	...	...	...	...	...	...	...	...	...	...	902	62
1913	782	13	333	24	42	6	...	...	...	...	...	...	...	...	...	...	1157	43
1914	699	10	380	43	36	7	...	...	...	...	...	...	...	...	...	...	1115	60
1915	575	8	403	60	40	11	...	...	...	...	...	...	...	...	...	...	1018	79
1916	310	7	533	64	23	2	...	...	...	...	...	...	...	...	...	...	866	73
1917	304	8	559	67	27	4	...	...	...	...	...	...	...	...	...	...	890	79
1918	213	4	464	70	25	...	...	...	...	...	...	...	...	...	...	...	702	74
1919	373	3	601	57	15	2	18	2	5	2	...	...	...	...	24	3	1036	69
1920	748	6	769	62	14	3	11	...	2	2	...	...	1	...	25	5	1570	78
1921	1,119	10	560	32	7	...	1	...	2	2	...	...	...	...	21	11	1710	55
1922	592	8	611	40	3	1	15	...	5	1	21	4	1	...	23	9	1271	63
1923	412	7	671	23	10	...	33	...	12	6	...	...	10	...	34	7	1182	43
1924	317	4	713	27	2	1	100	19	24	7	44	15	8	...	137	7	1345	80
1925	412	4	719	18	5	1	81	6	24	2	22	8	14	1	150	9	1427	49
1926	899	6	647	13	7	...	85	17	25	5	5	2	15	2	189	11	1872	56
1927	1250	3	816	34	12	2	19	1	17	5	13	5	5	...	96	7	2228	57
1928	916	3	901	29	7	...	60	9	16	3	13	4	17	1	122	9	2052	59
1929	983	5	741	33	4	...	20	2	19	5	17	9	15	1	150	4	1949	59
1930	670	1	719	24	5	...	86	15	11	1	12	1	14	1	133	9	1650	52
1931	540	4	327	10	...	...	33	2	62	12	108	13	51	8	222	14	1343	63
1932	590	2	293	9	...	...	282	33	214	37	118	14	42	4	3-6	29	1865	128

Fatality rate:—The two fatal cases were children under 3 years of age. One of them, a girl, developed the disease 3 days after the removal of tonsils and adenoids. She had an extremely toxic attack, complicated by broncho-pneumonia, and died within 24 hours of admission. The other case, a boy aged 2 years, suffered from the septic type of the disease. The fatality rate was .33 per cent. of the cases admitted.

Complications:—Of the 560 cases discharged during the year, 198, or 35 per cent., suffered from complications as follows:

Adenitis	...	...	57	cases or 10.17 per cent.
Albuminuria	...	...	52	„ „ 9.28 „ „
Arthritis	...	...	7	„ „ 1.25 „ „
Otorrhoea	...	...	39	„ „ 6.96 „ „
Nephritis	...	...	10	„ „ 1.78 „ „
Cardiac affections				
	(transient)		8	„ „ 1.42 „ „
Rhinitis	...	...	25	„ „ 4.46 „ „

Diphtheria.

Forty-one patients were in residence at the beginning of 1932, and 438 cases, notified as diphtheria were admitted during the year. 293 of these proved to be suffering from the disease, making a total of 334 cases under treatment. Of these, 272 were discharged, 9 died, and 53 remained under treatment at the end of the year.

Of the 281 cases which were discharged or died, 23 had laryngeal diphtheria, 29 suffered only from nasal diphtheria, and 9 were cases of otorrhoea with positive swabs.

Among the 221 true faucial cases only 25 suffered from severe clinical attacks; the rest were mild or of moderate severity. The amount of antitoxin administered to the severe cases varied from 42,000 units to 194,000 units, given partly by intravenous and partly by intramuscular injection. The amount of antitoxin given to the other cases averaged 18,000 units.

Post-diphtheritic paralysis occurred in 15 cases. It was severe in 4 cases and mild in 11 cases.

Laryngeal diphtheria:—51 cases were admitted as laryngeal diphtheria, but 28 of these proved to be wrongly diagnosed. Of the 23 true cases, 5 required tracheotomy, and 2 of these proved fatal, giving a fatality rate of 40 per cent. of the cases operated on. The average amount of antitoxin administered to the laryngeal cases was 22,000 units.

Fatality rate:—7 deaths occurred among the faucial cases, which gives a fatality rate of 3.61 per cent. One of them was a child aged 3½ years, who was suffering from marked post diphtheritic paralysis and died within a few hours of admission.

Another case died of paralysis in the 40th day of illness; while the duration of residence of the other 5 averaged only 8 days. All the cases were under 5 years of age and had been ill for an average of 4 days on admission. The amount of antitoxin administered was 76,000 units.

Corrected diagnosis:—145 cases, notified as diphtheria, proved to be wrongly diagnosed and were found after admission to be suffering from the following complaints:—

Tonsillitis, 82; Pharyngitis, 10; Laryngitis, 20; Quinsy, 4; Bronchitis, 4; Br. Pneumonia, 2; No Disease, 5; Enteritis, 2; T.B. Meningitis, 2; Measles, 5; Scarlet Fever, 3; Nephritis, 2; Septicaemia, 1; Whooping Cough, 1; Adenitis, 1; Marasmus, 1.

Of these, 12 proved fatal, as follows:—

Bronchitis, 1; T.B. Meningitis, 2; Pharyngitis, 3; Quinsy, 1; Enteritis, 2; Septicaemia, 1; Nephritis, 1; Marasmus, 1.

Typhoid Fever.

Eight cases, notified as typhoid fever, were admitted, and 2 of them proved to be suffering from para-typhoid B. Both had mild attacks and made a satisfactory recovery. The other 6 cases were suffering from the following complaints:—Gastro-enteritis, 3; Appendicitis, 1; Multiple Abscesses, 1; Abdominal Tumour, 1.

Measles.

An epidemic of this disease appeared in the district during December, 1931. At the beginning of 1932, 8 cases were in residence and 282 were admitted during the year, making a total of 290 cases under treatment. Of these, 256 were discharged, 33 died, and 1 remained under treatment at the end of the year.

With the exception of 3 nurses and 2 other adults, the patients were all children under 6 years of age, and 28 of the 33 fatal cases were under 3 years of age. Broncho-pneumonia was present as a complication in 31 of the fatal cases and whooping cough in 2 cases.

Twenty-four cases suffered from marked laryngeal involvement, but in no case was it so severe as to require tracheotomy. The disease was complicated by the presence of whooping cough in 9 cases and by nasal diphtheria in 14 cases. Otorrhoea was present in 37 cases.

The fatality rate was 11.70 per cent. of the cases admitted.

Whooping Cough.

The number of cases under treatment was 124. Of these, 89 were discharged recovered, 14 died, and 21 remained under treatment at the end of the year. Twelve of the fatal cases were under

2 years of age; one was aged 3 years and one 5 years. Broncho-pneumonia was the terminal complication in all the fatal cases. The disease was associated with measles in 9 cases, with diphtheria in 4 cases, and with scarlet fever in 3 cases. The fatality rate was 11.86 per cent. of the cases admitted.

Pneumonia.

All cases of bronchitis and broncho-pneumonia are included in this group. The number under treatment was 299. Of these, 206 were discharged, 39 died, and 54 remained under treatment at the end of the year. Of the 245 cases which were discharged or died, 31 only were adults, suffering from lobar pneumonia, and of these 6 proved fatal, giving a fatality rate of 19.35 per cent. The rest were all children under 6 years, suffering from bronchitis or broncho-pneumonia, and 32 of these proved fatal, giving a fatality rate of 15.16 per cent. Fifteen of the fatal cases were infants under one year.

Erysipelas.

A total of 45 cases were under treatment. Of these, 38 were discharged, 4 died, and 3 remained under treatment at the end of the year. The face and scalp were the parts affected in 38 cases, the legs in 2 cases, and in 5 cases the disease had spread over the greater part of the body. Treatment by artificial sunlight was tried in a few cases, but the results were not very convincing. Erysipelas antitoxin and polyvalent antistreptococcal serum was administered to all the cases, the dosage varying from 35 c.c.s to 100 c.c.s. It was difficult to estimate how much benefit, if any, the patients derived from the serum treatment.

Of the 4 fatal cases 3 were babies under 4 months old. The other was a woman aged 50 years who had a virulent attack and died from general toxæmia. The fatality rate was 9.52 per cent. of the cases admitted.

Seven cases which had been notified as erysipelas were found to be suffering from the following complaints:—Cellulitis 4, dermatitis 1, infra-orbital abscess 1, herpes facialis 1.

Meningitis.

Five cases of cerebro-spinal meningitis were under treatment and 2 of them proved fatal. All were children under 10 years of age. Six other cases which had been notified as cerebro-spinal meningitis were found to be suffering from the following complaints:—Meningism 2, cerebral abscess 1, cerebral tumour 1, displaced cervical vertebra 1, uræmia 1.

Pneumococcal meningitis was present as a complication in 2 fatal cases of pneumonia. Tubercular meningitis was the cause of death in 4 other cases; 2 of these had been admitted as diphtheria, 1 as whooping cough, and 1 as pneumonia.

Other Diseases.

In addition to the cases of revised diagnosis which have already been mentioned, the following diseases are included under this group:—Puerperal pyrexia 4, smallpox 1, chickenpox 23, mumps 5, scabies 4, rubella 1, otorrhoea 2, endocarditis 1, influenza 3, rheumatism 3, poliomyelitis 2, pemphigus 2, encephalitis 1, impetigo 3, congenital hydro-cephalus 1, pulmonary tuberculosis 1, mastoid abscess 1, observation 4, re-admitted 2.

Of these, the cases of congenital hydro-cephalus and of pulmonary tuberculosis proved fatal.

Cross Infection.

Two cases of diphtheria and 3 cases of scarlet fever contracted measles from patients who had been admitted in the incubation stage of the disease. Four other patients contracted chickenpox in the wards. A patient who had been transferred to the Harold Wood Hospital in the incubation stage of mumps infected 8 cases there, and 16 other cases contracted chickenpox at Harold Wood.

Operations.

In addition to the cases of tracheotomy already mentioned, the following operations were performed during the year:—Tonsillectomies 24, Excision of left eye 1, Radical mastoids 5, Empyema 4, Excision of glands of neck 1.

Harold Wood Hospital.

Six hundred and seventy patients, convalescing from scarlet fever, diphtheria and pneumonia, had been transferred to the Harold Wood Children's Hospital during the year. These were: Scarlet fever 453 cases, diphtheria 116 cases, pneumonia 101 cases. Of these, 594 were discharged and 76 remained in residence at the end of the year. The average duration of residence of all the cases was 42 days. During the latter half of the year the patients were weighed at weekly intervals, and the records show that they all made substantial gains in weight during their periods of residence.

Active Immunisation Against Scarlet Fever and Diphtheria.

Schick Test, 1932.

Number of patients tested	...	...	777
Number which proved positive	...	...	352
Rate per cent. of positives	...	...	45.3
Number immunised	...	...	296
Number of cases in which permission for immunisation was refused	...	...	17
Rate per cent. of cases tested for whom permission for immunisation was refused	...	...	02.1

Dick Test, 1932.

Number of patients tested	...	...	485
Number which proved positive	...	...	299
Rate per cent. of positives	...	...	61.64
Number immunised (4 weekly doses of Dick Toxin)	...	...	231
Number of cases in which permission for immunisation was refused	...	...	31
Rate per cent. of cases tested for whom permission for immunisation was refused	...	...	06.3

Staff Illness.

During the year 3 "Dick positive" probationers contracted scarlet fever before their immunisation was completed, and one "Schick positive" probationer contracted a mild attack of faucial diphtheria a week after receiving her third dose of T.A.M.

Seventeen nurses and maids were warded with influenza, 15 with tonsillitis, 6 with quinsy, and 4 with rheumatism. Thirty-nine others were off duty for short periods with minor ailments. All recovered.

Schick Test, 1932.

Number of probationers tested	...	...	54
Number which proved positive	...	...	27
Rate per cent. of positives	...	...	50.00
Number immunised	...	...	26

Dick Test, 1932.

Number of probationers tested	...	54
Number which proved positive	...	17
Rate per cent. of positives	... ..	31.48
Number immunised	... ..	15

Cate Cases.

The following is a record of cases suspected to be suffering from infectious disease which were brought direct to the Hospital for diagnosis :—

Number sent by medical practitioners	...	111	
Number of these admitted	...		71
Number brought by relatives	...	215	
Number of these admitted	...		64
Number from other hospitals	...	203	
Number of these admitted	...		8
Total number of cases examined	...	529	
Total number of cases admitted	...		143

Smallpox.

Number of suspected cases of Smallpox visited	...	214	
Number which proved positive	...		73

Bacteriological Work.

Swabs examined for diphtheria bacilli :—

Number sent by medical practitioners :—

				Positive Results
Faucial	...	...	1360	100
Nasal	...	...	98	16
Aural	...	...	19	7
Total	...	1477		123

Number of Gate cases swabbed :—

Positive Results.

Faucial	...	...	...	91	14
Nasal	...	...	...	36	6
Aural	...	...	...	5	4
Total ...				<u>132</u>	<u>24</u>

Number of swabs examined for the
Invalid Children's Aid Association

Faucial	...	...	...	128	1
Nasal	...	...	...	125	9
Total ...				<u>253</u>	<u>10</u>

Number of swabs examined for the
Invalid and Crippled Children's
Society

Faucial	...	...	...	25	1
Nasal	...	...	...	23	1
Total ...				<u>48</u>	<u>2</u>
Widal Tests	...	...	...	4	1

Total number of examinations :

	<u>1914</u>	<u>160</u>
--	-------------	------------

Disinfecting Station, 1932.

Number of articles removed from infected homes for disinfection	...	...	...	...	18758
Number of hospital articles disinfected	...	...	...	...	10319
Total ...				<u>29077</u>	

Tuberculosis.

The following table sets out the number of cases of Tuberculosis and the number of deaths during the year at certain age periods.

AGE PERIODS.	NEW CASES.				DEATHS.			
	Pulmonary.		Non-pulmonary.		Pulmonary.		Non-pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0-1	...	2	10	6	1	1	4	5
1-4	1	2	18	8	...	3	11	14
5-9	12	13	13	12	1	...	3	3
10-14	9	10	7	9	...	2	1	...
15-19	34	30	9	6	10	22	2	1
20-24	33	47	8	4	23	22	1	1
25-34	59	43	8	3	44	28	...	2
35-44	54	28	7	2	29	15	3	...
45-54	30	19	3	...	24	9	1	...
55-64	31	4	2	...	27	5	...	...
65 and upwards	3	5	...	...	7	7	...	...
TOTALS	266	203	85	50	166	114	26	26

Included in the above new cases are 16 pulmonary males, 21 pulmonary females, and 10 non-pulmonary males and 4 non-pulmonary females, which were unnotified, but were discovered from the returns of the Registrar of Births and Deaths, showing that 15 per cent. of the deaths registered as due to Tuberculosis had not been notified during life.

The following table sets out the percentage of deaths from tuberculosis (not notified during life) for the years 1924—1932, inclusive :—

1924	...	10.5	1928	...	7.1
1925	...	11.2	1929	...	8.0
1926	...	12.8	1930	...	13.0
1927	...	12.03	1931	...	18.0
			1932	...	15.0

In this connection many deaths notified as having been due to Tuberculosis are frequently so notified because the case had at some time or other suffered from this complaint, the actual cause of death often being due to some intercurrent disease.

The total number of fresh cases of Tuberculosis coming to my knowledge was 604, of which 469 were pulmonary cases. The deaths from all forms of Tuberculosis numbered 332, giving a death rate of 1.14 per 1,000 of the population.

The death rate from respiratory Phthisis being .97, and from other forms .17 per 1,000 of the population.

The reports of the Tuberculosis Officer and of the Medical Superintendent of Dagenham Sanatorium will be found on pages 103—105.

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

No action taken.

PUBLIC HEALTH ACT, 1925. SECTION 62.

No action taken.

Tuberculosis Dispensary.

Annual Report of Tuberculosis Officer.

(Dr. P. A. Galpin).

The routine work of the Dispensary has been continued throughout the year.

Comparison with work done in previous years.

Year	1927	1928	1929	1930	1931	1932
Request Cases	760	670	683	567	592	564
Notified Cases	198	198	142	176	130	128
Definite Cases	516	473	467	495	400	451

Examination of Contacts.

Year	1927	1928	1929	1930	1931	1932
No. Examined	699	633	532	561	448	585
Positive	40	22	19	20	12	15
Percentage	5.7	3.5	3.7	3.7	2.6	2.5

Tuberculosis of Lungs.

Diagnosis. A close study of the history of illness, clinical examination and observation with sputum tests are the means of establishing a diagnosis. X-Ray examinations are not a routine measure, but are reserved for certain cases presenting unusual features. Sixty-six X-Ray examinations were made: arrangements have now been made for these to be carried out at the Whipps Cross Hospital.

Treatment. Dagenham Hospital and Sanatorium has been in full use throughout the year. A certain number of cases requiring special surgical treatment have been sent to the Brompton Hospital, and a few to the Grosvenor Sanatorium.

Colony Cases. Six youths were under treatment and training at the Burrow Hill Colony: three are now remaining. Three ex-service men were under treatment at Preston Hall Settlement: one now remains. Seven patients have been under treatment at the Papworth Colony: five now remain.

	Burrow Hill	Preston Hall	Papworth	Total
No. under treatment at 1st January or admitted during the year	6	3	7	16
Discharged	3	1	1	5
Died	—	1	1	2
Remaining	3	1	5	9

Children. The Children's Sanatorium has been in full use. The "Waiting List" has been short.

Domiciliary Treatment. Insured persons awaiting admission to Institutions and after discharge have been placed on Domiciliary Treatment. During the year 778 reports have been received: 311 patients were under treatment at the end of the year.

Dispensary Treatment. Children and non-insured persons have been treated at the Dispensary. At the end of the year 495 cases were under treatment.

Artificial Pneumothorax. Thirteen cases have been under regular treatment. Ninety-four refills have been given.
Non-Pulmonary Tuberculosis.

Institutional Treatment. Adult cases have been sent to the Royal Sea-Bathing Hospital, Margate. Average monthly number under treatment: 10.

Children. The number of children in Institutions at the end of the year was 41 scattered over 13 Institutions: the majority at the Lord Mayor Treloar Cripples' Hospital, Alton.

Out-Patient Treatment.

Tuberculosis of Skin. Eighteen cases have been under treatment by Finsen Light or Artificial Sunlight at the London Hospital.

Tuberculosis of Bones and Joints. These cases are kept under general supervision at the Dispensary and referred, when necessary, to Orthopaedic Surgeons.

After-Care.

Extra Nourishment. At the end of the year 220 patients were in receipt of grants.

The Causation of Tuberculosis. The investigations into the development of Tuberculosis of the Lung among School Children and Adolescents have been continued. These confirm the observations of last year. The records of nine other cases of Tuberculosis of the Lung (with positive sputum) among School Children show that all of them have been in the habit of leaving Green Vegetables and also a considerable proportion of leaving Fat.

Among a group of 37 young adults, ages 15—20 years, 23 have a history of habitually leaving Green Vegetables and a certain proportion of leaving Fat also.

A small group of three cases of Ophthalmic Tuberculosis have also a history of leaving Green Vegetables and Fat.

Among a group of children suffering from other forms of Tuberculosis, viz., Bones and Joints, Peritoneum, Glands, these dietetic rebels have also been found.

Among certain other age groups, from 20—60 years, suffering from Pulmonary Tuberculosis, dietetic rebels have also been noted; also certain individuals who, although ordinarily accepting Green Vegetables, have omitted these articles of food from their diet either on account of gastric disturbance (Gastric Ulcers or Indigestion) or after extensive dental extractions or through Anorexia following mental depression associated with some discouragement, loss of work, bereavement.

The Prevention of Tuberculosis.

In last year's report I suggested that particular attention should be directed to those individuals (Dietetic Rebels) who habitually leave or refuse Green Vegetables as well as finding out patients actually suffering from Tuberculosis. The investigations reported above confirm the wisdom of this line of action, but, further, they indicate that individuals leaving out fat should also be included.

These dietetic rebels have been sought not only among contacts but also among school children referred from the School Medical Department, Maternity and Child Welfare Centres, the Public Assistance Medical Officers, and also Private Practitioners.

Cases diagnosed as tuberculous have been dealt with in the appropriate manner, but cases diagnosed as non-tuberculous have been kept under observation at the Dispensary until they have been persuaded, with parental co-operation, to accept Green Vegetables and Fat as part of their daily diet. When parental co-operation is inadequate, admission to Open-Air School or Convalescent Home has been recommended, where the child may learn to accept these articles of food. On discharge from these institutions supervision is necessary to prevent relapse into the old habits.

It is becoming more evident that the work of preventing Tuberculosis is the work not only of the Tuberculosis Dispensaries, but of all Public Health Services and all National Health Insurance Services.

The welfare of the infant has demanded careful instruction and guidance from the parents in its feeding and upbringing. The same instruction and guidance are necessary in the rearing of the child of school age. Further, it is suggested that panel practitioners, when accepting adolescents as panel patients, and also medical officers of industrial organizations should investigate the food habits of each individual.

Investigations show that there is a widespread habit of eating fish and potatoes without greens, and so little or no fat at midday. When such a meal is eaten only once a week no harm may follow, but if such a meal is taken daily, as many dyspeptics do, or even four or five times a week, then there is a definite risk of Tuberculosis becoming manifest.

When warning notices are published in the face of epidemic diseases it is suggested that specific mention be made of the importance of Green Vegetables in the maintenance of health, and that no particle of green food, such as celery tops or outside leaves of cabbages, be wasted either by housewives or by greengrocers.

Further, if parents are unable to get their children to accept Green Vegetables, they should be advised to visit one of the Municipal Clinics or a Private Practitioner for advice.

The onset of Tuberculosis among unemployed appears to be associated with loss of appetite due to mental depression, rather than with food shortage. The provision of allotments or other open-air work would appear to be the appropriate prophylactic for overcoming mental depression and the loss of appetite, and at the same time increasing the supply of Green Vegetables.

There is some evidence of a psychogenic factor influencing the situation which requires further investigation, but it can be said that individuals more easily upset and discouraged, either through constitutional or environmental causes, show a greater risk of developing Tuberculosis.

DAGENHAM SANATORIUM AND LANC DON HILLS SANATORIUM FOR CHILDREN.

Annual Report of the Medical Superintendent
(Dr. G. M. Mayberry).

At the end of 1931 the number of patients remaining under treatment were:—

Males	...	...	...	78
Females	...	...	...	38—116

The total admissions during 1932 were:—

Males	...	...	...	173
Females	...	...	...	114—287

The number of deaths was:—

Males	...	...	...	42
Females	...	...	...	14—56

Discharges during the year totalled:—

Males	...	...	...	135
Females	...	...	...	95—230

Leaving under treatment at the 31st December, 1932:—

Males	...	...	...	74
Females	...	...	...	43—117*

* Including 17 Non-Insured persons.

Insured persons admitted during the year totalled 227, the remaining 60 being Non-Insured.

Forty-nine ex-service men were admitted to the Sanatorium during the same period.

The Death Rate (calculated on admissions) was 19.51 per cent. In the case of males the percentage was 24.27, and in the case of females 12.28.

The Average Duration of Residence (both sexes) was 146.92 days. The average for males was 157.40 days, and for females 132.03 days.

The grades of cases discharged and the results of treatment were as follows:

	T.B. Minus	T.B. plus Grade I.	T.B. plus Grade II.	T.B. plus Grade III.	Total
Males	28	8	62	37	135
Females	35	9	35	16	95
MALES.					
Quiescent	11	5	15	4	
Improved	15	3	43	14	
No material improvement	2	—	4	19	
	—	—	—	—	
	28	8	62	37	
	—	—	—	—	

FEMALES.

Quiescent	.....	24	4	11	—
Improved	.....	10	4	18	6
No material improvement		1	1	6	10
		—	—	—	—
		35	9	35	16
		—	—	—	—

During the past year 135 male and 95 female cases were discharged compared with 101 of both sexes the previous year. The average duration of residence for males was 157.40 days, compared with 216.40 days in the prior year, and 132.03 for females compared with 122.17. The shorter stay in the case of male patients during the year is accounted for by the fact that none were discharged who had exceptionally long terms of treatment as in the year 1931.

The class of case that came under treatment has been disappointing in as much as they compare unfavourably with previous years. In the early cases the results are always satisfactory as the advanced cases are unsatisfactory.

There appears to be no alternative to Institutional treatment.

The economic situation no doubt has a large bearing on Pulmonary Tuberculosis generally, and until cases can be admitted into an Institution before they reach the advanced stage, and when advanced, remain there, little headway can be made in combating Tuberculosis of the lungs.

As it is now, the advanced and infectious case, in many instances, is at liberty to contaminate his family and the public at large.

The following table shews the comparison of rainfall for the past three years :—

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
1930	1.73	.83	1.29	1.25	2.84	.53	1.61	3.24	2.01	.96	3.04	1.27
1931	1.31	1.41	.24	3.06	2.17	1.19	2.18	3.20	1.13	.48	1.99	.44
1932	.98	.16	1.31	1.38	2.57	.51	1.83	1.73	1.50	3.81	.45	.27

Entertainment.

As in previous years the usual Whist Drives and Billiard Handicaps were held, winning competitors being entitled to prizes. The monthly concerts were also enthusiastically received both by the patients and members of the Staff.

Nursing Staff.

One Nurse passed the final examination for the Certificate of the Tuberculosis Association during the past twelve months, and five were successful in passing Part 1.

Staff.

Medical—

Medical Superintendent.

Assistant Medical Officer.

Administration—

Steward.

Nursing—

Matron.

Assistant Matron and Sister Tutor.

3 Sisters (one night).

1 Nurse-Housekeeper.

2 Staff Nurses.

4 Assistant Nurses.

15 Probationers.

Domestic—

30 (including 6 laundry-maids and 1 sewing maid).

Males—

1 Caretaker.

1 Fitter.

1 Handyman.

1 Stoker.

1 Gardener.

4 Porters.

1 Night Watchman.

WEST HAM SANATORIUM FOR CHILDREN, LANGDON HILLS.

At the end of 1931 the number of patients remaining under treatment was:—

Males	...	...	...	18
Females	...	...	...	22—40

The total admissions during 1932 were:—

Males	...	...	...	18
Females	...	...	...	22—40

The number of deaths were:—

Males	...	...	...	Nil
Females	...	...	...	Nil—Nil

Discharges during the year totalled:—

Males	...	...	...	18
Females	...	...	...	22—40

Leaving under treatment at the 31st December, 1932:—

Males	...	...	...	18
Females	...	...	...	22—40

The Average Duration of Residence (both sexes) was 333.20 days. The average for males was 333.72 days, and for females 332.77 days.

The results of treatment for those discharged are as follows:

	T.B. Minus	T.B. plus Grade I.	T.B. plus Grade II.	T.B. plus Grade III.	Total
Males.....	17	1	—	—	18
Females.....	18	—	—	4	22

MALES.

Quiescent.....	13	1	—	—	
Improved.....	4	—	—	—	
No material improvement	—	—	—	—	
	—	—	—	—	
	17	1	—	—	
	—	—	—	—	

FEMALES.

Quiescent.....	16	—	—	—	
Improved.....	2	—	—	2	
No material improvement	—	—	—	2	
	—	—	—	—	
	18	—	—	4	
	—	—	—	—	

The results of treatment were as they always have been highly satisfactory even in the moderately advanced cases. In the young child the outlook appears most encouraging with prolonged treatment, whereas in the young adult results are far from being so. I believe a large percentage of cases of Pulmonary Tuberculosis in childhood could be cured if treatment was carried out for a long period, first in a Sanatorium and later to be transferred to a colony where they could be trained for a useful career. The discharge of the cases to their homes where the environment is entirely unsuitable in many instances is economically unsound.

Fortunately there were no cases of infectious disease during the year.

The following was the rainfall for the past three years in inches :—

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
1930	1.45	0.53	0.93	1.34	2.29	1.17	1.70	2.67	2.41	0.70	4.16	1.60
1931	0.99	1.37	—	4.08	2.57	0.88	3.33	4.48	0.91	—	1.87	0.38
1932	1.15	—	1.03	1.52	3.51	.26	2.98	1.35	1.48	3.90	.52	.26

Staff.

Nursing—

Matron.

2 Sisters.

7 Probationers.

Domestic—

8.

Males—

1 Head Gardener and Caretaker.

1 Motor Driver.

1 Handyman and Porter.

2 Assistant Gardeners.

Venereal Diseases.

Under the Public Health (Venereal Diseases) Regulations, 1916, West Ham is included in the Joint Scheme approved for the Greater London Area, the participating authorities being the London County Council, the Counties of Middlesex, Essex, Hertford, Buckingham, Surrey and Kent, and the County Boroughs of West Ham, East Ham and Croydon. Under the Scheme free treatment can be obtained by anyone (who has acquired Venereal Disease) at any of the 23 Hospitals approved under the joint agreements. There are also seven Hostels, assisted by financial grants, where women suffering from either of these diseases can be accommodated, with a view to facilitating continued treatment. Provision is made for enabling Medical Practitioners to obtain laboratory reports on suspected material or specimens, and for the free supply of Salvarsan substitutes to practitioners who have obtained the necessary qualification to be placed on the approved list. In addition to paying its proportionate share of the cost of carrying out the Scheme, approximately one-twenty-fifth of the total expenses incurred, the Council makes a grant to the British Social Hygiene Council to further propaganda work throughout the whole area.

Posters and enamel plaques pointing out the dangers of Venereal Diseases, urging immediate treatment and giving a list of Hospitals where treatment may be obtained free of cost, are exhibited in many parts of the Borough including all public sanitary conveniences.

Local Medical Practitioners are fully conversant with the facilities for diagnosis and treatment of Venereal Disease, and have a printed circular setting out all relevant details in connection with the Scheme. There are twelve practitioners who are qualified to receive supplies of arseno-benzol compounds. The attached tables show the use made of the various centres by patients and practitioners.

The following tables show the summary of work done under the Scheme during last year, setting out for comparison the particulars relating solely to West Ham and those relating to the whole of the participating authorities as regards the use made of the hostels.

Venereal Diseases (L.C.C. Scheme).

Summary of work done by the Hospitals during the Year 1932.

	London.	Middle- sex.	Essex.	Surrey.	Kent.	Herts.	Bucks	East Ham.	West Ham.	Croy- don.	Total.	Other Places.	Grand Total.
New Patients :—													
Syphilis ...	3,410	440	169	160	100	50	16	47	87	12	4,491	450	4,941
Soft Chancre...	113	13	8	3	3	2	1	2	7	1	153	34	187
Gonorrhoea ...	7,906	1,032	542	367	178	96	40	95	209	29	10,494	728	11,222
Not venereal...	8,234	1,099	559	527	206	121	50	98	189	77	11,160	442	11,602
TOTAL ...	19,663	2,584	1,278	1,057	487	269	107	242	492	119	26,298	1,654	27,952
Total attendances ...	772,839	69,760	44,667	26,660	12,657	6,340	2,504	8,151	19,640	2,835	966,053	17,868	983,921
No. of in-patient days ...	34,533	2,778	1,824	2,217	1,043	694	193	159	352	284	44,077	9,946	54,023
Salvarsan Subs. doses	46,370	6,091	3,505	2,405	1,131	684	211	673	1,468	216	62,754	2,182	64,936
For or at Centres :—													
Spirochaetes ...	2,514	104	135	86	27	31	8	21	48	11	2,985	103	3,088
Gonococci ...	75,493	6,464	5,906	4,442	1,885	1,118	372	776	1,744	487	98,687	2,371	101,058
Wassermann ...	30,956	3,075	2,024	1,785	717	502	189	400	749	237	40,634	1,332	41,966
Others ...	33,620	2,130	7,004	1,092	653	283	137	1,174	2,740	165	48,998	1,247	50,245
TOTAL ...	142,583	11,773	15,069	7,405	3,282	1,934	706	2,371	5,281	900	191,304	5,053	196,357
For Practitioners :—													
Spirochaetes ...	130	...	...	3	...	...	...	...	...	...	133	...	133
Gonococci ...	5,787	197	446	472	55	72	14	3	16	995	8,057	76	8,133
Wassermann ...	17,420	908	866	874	45	121	156	46	11	365	20,812	575	21,387
Others ...	9,087	153	664	316	17	35	17	35	11	320	10,655	318	10,973
TOTAL ...	32,424	1,258	1,976	1,665	117	228	187	84	38	1,680	39,657	969	40,626

Venereal Diseases.

Summary of the work done at the London Clinics for all areas from 1917.

Year.	New Cases.						Total Venereal Cases.		Total Non-Venereal Cases.		Total Attendances		In-patient days.		Pathological Examinations for	
	Syphilis.		Soft Chancre.		Gonorrhoea.											
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Clinic.	Prac-tition-ers.
1917	4,427	3,351	199	11	3,830	1,207	8,456	4,569	1,192	1,168	120,659		63,923		13,988	3,649
1918	3,764	3,002	116	13	4,844	1,940	8,724	4,955	1,345	1,348	169,485		66,095		25,973	6,380
1919	6,394	3,391	463	18	10,441	2,440	17,298	5,849	3,418	1,700	201,626	106,096	24,025	49,186	51,554	10,464
1920	6,988	3,579	766	25	10,669	2,427	18,423	6,031	4,403	2,189	329,940	134,093	29,430	52,182	58,920	14,027
1921	5,088	3,100	458	13	8,573	2,136	14,119	5,249	3,696	2,354	357,503	138,706	30,272	49,420	66,134	18,472
1922	4,207	2,600	309	12	8,233	2,402	12,749	5,014	3,759	2,191	387,631	141,372	28,809	83,755	74,022	19,836
1923	4,497	2,631	311	4	9,043	2,520	13,851	5,155	4,167	2,477	412,915	142,594	29,661	77,001	69,784	24,403
1924	4,174	2,452	301	4	8,565	2,785	13,040	5,241	4,869	2,423	424,850	164,152	31,620	70,836	79,005	24,797
1925	3,556	2,346	268	11	8,464	2,857	12,288	5,214	5,726	2,954	459,011	187,120	29,313	73,141	106,064	26,346
1926	3,725	2,013	301	2	8,825	2,858	12,851	4,873	5,830	3,158	490,578	196,497	31,258	70,477	100,543	27,565
1927	3,886	2,209	203	7	9,637	2,859	13,726	5,075	6,799	3,365	554,171	213,107	21,268	91,145	107,512	27,046
1928	3,433	1,837	229	6	8,249	2,647	11,911	4,490	6,369	3,226	544,969	218,566	23,821	41,285	107,410	29,785
1929	3,303	1,628	276	4	8,271	2,503	11,850	4,135	5,656	3,145	557,747	211,125	23,121	28,399	114,840	32,605
1930	3,389	1,836	347	12	8,620	2,503	12,356	4,351	6,305	3,857	623,820	212,399	21,033	00,183	125,177	33,309
1931	3,009	1,521	326	12	7,713	2,260	11,048	3,793	6,853	4,253	699,752	230,596	23,408	33,133	161,092	35,98
1932	3,270	1,671	172	15	8,566	2,656	12,008	4,342	7,286	4,316	737,558	246,363	22,774	31,249	196,357	40,626

Venereal Diseases (L.C.C. Scheme).

Return showing the extent to which the facilities have been utilised during the year ended 31st December, 1932.

HOSPITAL.	New Cases.					No. of Persons.		Total attendances.	No. of In-patient days.	Sal. Subs. doses given.	Pathological Examinations.								Total.
	Syp.	S.C.	Gon.	Not V.D.	Total.	Ceased to attend.	Discharged				Spiro.		Gon.		Wass.		Others.		
											(a)	(b)	(a)	(b)	(a)	(b)	(a)	(b)	
Albert Dock ...	176	28	324	231	759	118	419	11,435	2,445	1,622	43	1	382	5	738	349	738	349	2,605
Gt. Ormond Street ...	44	...	9	510	563	18	538	3,077	2,078	793	2	...	398	29	977	203	755	37	2,401
Guy's ...	380	16	625	965	1,986	245	1,605	62,193	2,202	7,821	259	...	13,968	1,047	3,671	2,786	4,461	920	27,112
King's College ...	138	1	99	210	448	127	306	13,634	1,250	1,010	15	5	1,249	184	1,374	2,531	14	...	5,372
L.C.C. Clinic (Whitechapel) ...	644	27	1,811	1,531	4,013	1,045	1,808	228,433	2,433	14,299	759	...	18,019	722	6,575	3,721	30,731	4,991	65,618
Metropolitan ...	78	19	155	138	390	103	230	25,116	245	1,391	23	...	720	65	490	295	101	96	1,790
Middlesex ...	184	1	408	100	693	205	348	35,606	1,456	1,650	21	2	4,230	271	814	1,256	15	632	7,241
Miller General ...	83	8	196	68	355	147	166	12,796	204	1,024	18	...	1,013	27	304	672	...	...	2,034
Royal Free ...	201	...	403	694	1,298	192	1,240	26,589	2,988	2,913	36	...	5,948	293	2,472	940	3,854	997	14,540
Royal London Oph. ...	45	...	7	4	56	31	...	784	106	252	...	...	20	...	150	...	1	...	171
Royal Northern ...	232	7	463	325	1,027	216	515	27,020	236	3,021	69	3	1,745	48	1,174	1,244	2	...	4,285
St. George's ...	240	11	623	298	1,172	336	625	38,986	493	2,459	...	114	581	394	1,718	140	1	1	2,949
St. John's (Lewisham) ...	50	2	138	230	420	12	295	10,667	653	744	13	...	289	53	692	325	592	77	2,041
St. Mary's ...	231	5	443	132	811	198	208	13,244	264	1,795	3	3	1,265	283	442	1,785	117	15	3,913
St. Paul's ...	321	8	968	1,250	2,547	256	2,037	136,178	2,042	4,814	315	...	11,885	1,483	3,708	511	109	17	18,028
St. Thomas' ...	840	34	2,022	3,113	6,009	1,209	3,969	176,662	5,074	7,629	1,279	...	25,012	2,472	10,662	1,974	4,683	359	46,441
Seamen's ...	362	13	668	226	1,269	901	328	13,949	9,472	1,201	44	1	1,567	101	702	114	801	4	3,334
South London for Women ...	24	...	111	128	263	34	152	4,038	683	40	3	...	884	113	245	697	...	...	1,942
University College ...	224	...	451	87	762	241	232	31,964	238	2,258	18	...	1,633	265	1,059	24	...	...	2,999
West London ...	332	2	840	1,004	2,178	421	1,615	79,832	2,237	6,980	138	4	5,519	227	2,956	764	2,994	832	13,434
Westminster ...	93	5	208	45	351	66	205	21,558	178	1,202	20	...	1,381	51	495	1,056	276	1,646	4,925
S.A. Mothers' ...	11	...	207	310	528	76	268	10,160	5,462	18	10	...	3,350	...	448	...	...	...	3,808
Children's, Waddon ...	8	...	43	3	54	...	60	...	11,584	...	...	...	...	...	...	...	...	...	...
TOTALS ...	4,941	187	11,222	11,602	27,952	6,197	17,169	983,921	54,023	64,936	3,088	133	101,058	8,133	41,966	21,387	50,245	10,973	236,983

Pathology—(a) For Centre, 196,357.

(b) For Practitioners, 40,626.

Venereal Diseases.

Utilisation of facilities at Hostels, 1932.

Particulars of the work done on behalf of the participating authorities by the hostels in the scheme for the year ended 31st December, 1932. These institutions are as follows:—

Royal Free—20-22 Highbury Quadrant, N.

Royal Free—62 Regents Park Road, N.W.

St. Thomas'—148 Lambeth Road, S.E.

Southwark Diocesan—80 Stockwell Park Road, S.W.

Salvation Army—122-4 Lower Clapton Road, E.

Salvation Army—126-8 Lower Clapton Road, E.

West London Mission—35 Parkhurst Road, N.7.

The following table shows the allocation of the patients received at these institutions, to the areas in the scheme:—

AREA.	No. of Patients.	Aggregate No. of days in residence.	Percentage (days).
London County	153	16,717	63.3
Middlesex	16	2,022	7.7
Essex	18	2,173	8.2
Surrey	16	2,060	7.8
Kent	15	1,500	5.6
Herts	14	1,242	4.7
Bucks	5	355	1.4
East Ham	—	—	—
West Ham	2	186	.7
Croydon	1	161	.6
TOTALS	240	26,416	100.0

ANTHRAX.

On May 18th information was received from the Medical Officer of Health of a neighbouring area to the effect that a man had died from Anthrax on May 15th in the district, after having used a shaving brush purchased from a vendor who had also supplied a shop in West Ham.

The shop was visited, and all these brushes were purchased (one dozen) immediately, and were destroyed by fire the same day.

One of the brushes referred to was reported upon as follows: Cultures of virulent Anthrax bacilli have been obtained from the shaving brush labelled A.T.S., deceased. Both the free hairs and the resin-embedded stump gave moderate numbers of Anthrax colonies, i.e. there is a strong presumption that the infection of the brush was primary and not secondary.

MATERNITY AND CHILD WELFARE.

Report of the Senior Assistant Medical Officer for Maternity and Child Welfare (Dr. Helen Campbell).

Notification of Births.

The birth rate for 1932 was 17.2. There were 6,223 live births and 192 stillbirths (total births, 6,415) officially notified in accordance with the Notification of Births Act, 1907. Of this total 5,430 births were notified by midwives, and 985 by doctors and parents.

Number of Births in the Borough in the last 5 years:—

1928	1929	1930	1931	1932
5913	5766	5606	5266	4980

These figures represent the net number of births of West Ham residents.

Health Visiting.

There has been no alteration during 1932 in the arrangements for the visiting of women by the Health Visitors. This home-visiting is carried out by eighteen full-time Health Visitors employed by the Council, and by thirty-four nurses attached to the Plaistow Maternity Hospital. In addition, the Superintendent Nurses of the various voluntary Infant Welfare Centres in the Borough visit infants who attend their Centres, and about whom the Medical Officer of the Centre requires a special report or investigation.

The routine for the visiting of infants and young children in their homes is as follows:—

Age period.	Minimum number of visits per year
0—1 years 	4—at intervals of 3 months
1—2 years 	4—at intervals of 3 months
2—5 years 	2—at intervals of 6 months

(or till admitted to School)

Premature infants are visited monthly till one year old. Weakly infants and children are visited more frequently than the routine, the number of visits depending, naturally, on the condition of the child. It has been possible to sub-divide the Borough into districts of such a size that the Health Visitor respon-

sible for each district is able to maintain this routine visiting of infants and toddlers, in addition to the many special visits required of her, viz.: visiting of expectant mothers, supervision of foster-mothers under the Children and Young Persons Act, 1932, supervision of Home Helps, visits for the investigation of infant deaths, stillbirths, puerperal fever and pyrexia cases, and of all cases notified as suffering from ophthalmia and pemphigus neonatorum. As a result of the keenness and close supervision of the Health Visitors, and of the excellent clinic facilities under the Council's Maternity and Child Welfare Scheme, a very large number of children have had medical supervision and been provided with required treatment for defects before attending school. The Health Visitors are kept in touch with the advice given at the Welfare Centres, so that they may follow up special cases by an extra home visit to see that the prescribed treatment is being carried out.

Immediately a child enters the Infant Department of one of the Council Schools, or is admitted to one of the Nursery Schools, notes of the child's progress and development from infancy, also of any illnesses from which he may have suffered, are sent to the School Medical Department for reference by the school doctor when the first school medical inspection takes place.

Visits paid by all Health Visitors during 1932.

	First Visits.	Total Visits.
(a) To expectant mothers.	6181	22645
(b) To children under 1 year of age.	6529	46161
(c) To children between the ages of 1 and 5 years.		68982
†(d) Infant Life Protection visits.		461
†(e) Special visits (Home Helps, etc.)		14056
		<hr/>
Total visits ...		152305
		<hr/>

The figures under (a), (b), and (c) include all visits paid to the homes by the Municipal Health Visitors, Plaistow Maternity Hospital Nurses, and the Nurses employed by other Voluntary Associations in the Borough.

† Special visits in regard to the supervision of Home Helps, supervision of Foster-mothers registered under the Children and Young Persons Act, 1932, and investigations into cases of puerperal fever, ophthalmia and pemphigus neonatorum, are made by the Municipal Health Visitors only.

Clinics.

There are five Municipal and seven Voluntary Maternity and Child Welfare Centres in the Borough, all of which are well-attended and utilised by the mothers of the districts in which they are situated. There is no area of the Borough which is now inaccessible to a Welfare Centre. At each of the five Municipal Clinics Antenatal and Infant Welfare Centres are held weekly; postnatal examinations are held at the Antenatal Session where required, but the necessity for a routine examination after confinement has not yet been established in the minds of the mothers. The Antenatal Clinics are well attended, not only by young primipara, but by older mothers who now realise that they should have regular supervision during pregnancy. Dental treatment for expectant and nursing mothers and for young children is arranged through the Clinics and carried out in the well-equipped dental departments of the three permanent Municipal Maternity and Child Welfare Clinics, and also at the Plaistow Maternity Hospital. Antenatal Sessions are held at four of the Voluntary Centres, and one or more Infant Welfare Sessions take place weekly at each of the seven Voluntary Clinics.

Owing to the increased attendance at the Clinics a part-time Assistant Medical Officer for Maternity and Child Welfare was appointed in September, 1932, to attend at two sessions weekly. A third Infant Welfare Session has now been established at Forest Gate Clinic.

It is impressed on all mothers who attend with their infants that they should attend regularly if the infant or child is to benefit fully from the advice and help given at the Clinics. As a rule, at the Municipal Centres a young infant is seen by the doctor once a month; naturally this varies according to the infant, who may require much closer supervision over a difficult period. A toddler is seen at least once a quarter. While many mothers realise the necessity of regular attendance, it was found that a certain number only attended for advice on one or two occasions, usually in respect of some special defect, e.g., dental caries, congenital defect in the infant, etc. In order that such absentees may again be brought into touch with the Clinic, a system has been introduced at the Municipal Clinics of sending "reminder" post cards after 'three months' absence, making a definite appointment for the child to be seen again by the Clinic Doctor. These post cards do much good, not only by bringing back mothers who might otherwise drift, but by making them realise that it is highly desirable for them to attend periodically, even if the child is apparently in good health. Through attendance at the Clinic the mother is put in touch with many facilities offered by the Council's Maternity and Child Welfare and other schemes, viz., convalescence for mothers with young infants, dental treatment for expectant and nursing mothers and young children, sunlight and orthopœdic treatment, convalescence for young children, and many other facilities.

Centres and Clinics (Municipal and Subsidized by the Council):

Address Where Held.	Number of Sessions held weekly (excluding Dental Sessions)	Day and Time of Meeting.	Average per Session.				Arrangements for Medical Supervision.
			Centre Attendances.		Medical Consultations.		
			Expectant Mothers.	Children.	Expectant Mothers.	Children.	
West Ham Lane Municipal Clinic	4	Mon., Tues., Thurs., 2 p.m. Tuesday, 9.30 a.m.	19.4	44.1	18.7	35.4	Dr. Helen Campbell.
*Forest Gate Municipal Clinic, Forest Street ...	4	Tuesday, 9.30 a.m. Tues., Wed., Thurs., 2 p.m.	9.23	50.	8.9	34.7	{ Dr. Helen Campbell. Dr. Charlotte Forsyth
*Grange Road Municipal Clinic	3	Wednesday, Friday, 2 p.m. Wednesday, 9.30 a.m.	15.9	33.5	15.7	31.8	{ Dr. Charlotte Forsyth Dr. Dorothy Mitchell
*Maybury Road Municipal Clinic	3	Monday, 9.30 a.m., 2 p.m. Friday, 9.30 a.m.	12.4	33.	12.4	23.8	Dr. Charlotte Forsyth
Silvertown Municipal Clinic	2	Wed., 10 a.m. and 2 p.m.	4.8	27.9	4.8	23.	Dr. Charlotte Forsyth
*Chesterton House Centre	6	Wed., Thur., 11 a.m. & 2.30 p.m. Mon., Fri., 1.30 p.m.	181.	82.4	67.	27.3	{ Dr. Flora Hogg & Dr. Peter Kennedy.
Docks Centre, Hoy Street	5	Daily, 2 p.m.	109.	70.9	42.6	48.0	
Martin Street Clinic ...	1	Thursday, 3.30 p.m.	29.8	37.	11.1	9.0	
South West Ham Health Society Clinic, Lees Hall	3	Tues., Wed., and Thurs., 1.30 p.m.	24.0 fortnightly	55.	11.0 fortnightly	25.3	Dr. J. Lorimer Hawthorne.
Trinity Mission Centre, Oxford Road	2	Wed. and Thurs., 1.30 p.m.	—	52.6	—	31.3	Dr. Jean Smith.
Stratford Day Nursery Centre, Welfare Road...	2	Mon. & Friday, 1.30 p.m.	—	38.3	—	24.	Dr. Dorothea Brooks
Given Wilson Institute, Pelly Bridge	1	Mondays, 2 p.m.	—	33.5	—	23.7	Dr. Eva Morton.

* Dental treatment for mothers, and children under 5 years, is given at these Clinics.

Dental Scheme.

Miss Esmée K. Wilson, L.D.S., resigned her appointment as Dental Surgeon in June, 1932, Miss Evelyn Richardson, L.D.S., being appointed in her place.

There is still much propaganda and teaching required to impress on parents the need for early dental treatment for the young child. This is best done at the Infant Welfare Centres and through individual talks to mothers by doctors and health visitors at Clinics and in the homes. Once a child has attended the Dental Clinic it is kept under regular supervision by the Dental Surgeon until reaching school age. This system of regular re-examination naturally fosters interest among parents in the care and protection of the teeth of their toddlers.

Amongst the mothers themselves there is a considerable prejudice against dental treatment, especially during pregnancy; this prejudice may be partly attributed to fear, but is often due to faulty advice given by friends of the patient. With the rearrangement of the dental work so that it is all carried out at the Maternity and Child Welfare Centres, the Dental Surgeon and Medical Officer are present at the same hours at the Clinics; thus a patient can be sent direct from the medical to the dental department. This has enabled more mothers to be dealt with, and obviates a long waiting list for dental treatment. Again, as with the young children, individual talks is the best form of propaganda, and in this the midwives can do much by advising the parent to ask for dental treatment when they present themselves at the Antenatal Clinics.

Attendances for Dental Treatment in 1932.

Children under five years of age:

Total No. of attendances for dental treatment	...	...	...	...	3847
No. of attendances for extraction	...	...	...	...	768
No of teeth extracted	...	...	...	...	2904
No. of attendances for fillings	...	...	...	...	2001
No. of teeth filled	...	...	...	...	2185
No. of attendances for special dressings, inspections, re-examinations, etc.	...	...	...	...	1204
Total No. of new cases treated	...	...	...	...	868

Expectant and Nursing Mothers.

Total number of attendances for dental treatment	...	...	...	...	853
Number of attendances for extraction	...	...	...	...	578
Number of teeth extracted	...	...	...	...	1253
Number of attendances for filling	...	...	...	...	117
Number of teeth filled	...	...	...	...	125
Number of attendances for special treatment	...	...	...	...	153
Number of new cases treated	...	...	...	...	276

Stratford Day Nursery.

The work at the Stratford Day Nursery has been carried on during 1932 as in previous years. The total attendances of children at the Day Nursery = 6,454, making an average daily attendance of 28 children throughout the year. The daily charge per child is 8d. a day.

Sunlight Treatment for Children under 5 years of age.

In accordance with the arrangement made in February, 1928, between the Maternity and Child Welfare Committee of the Borough and the Committee of the Stratford Day Nursery, all children under five years of age (unless they are attending school) who require this treatment can be referred to the Day Nursery Sunlight Clinic. The majority of such cases are recommended by the Medical Officers of the Infant Welfare Centres in the Borough, and all arrangements being made through the Medical Officer of Health. The two sessions held weekly under this agreement are attended by a Municipal Health Visitor who also visits the absentees from the Clinic, thereby keeping a close supervision on the children referred for this treatment.

In addition, the Day Nursery itself holds three sessions per week for sunlight treatment for children other than those referred through the Medical Officer of Health's Department.

Attendances at the Sunlight Clinic in 1932.

(1) Municipal Clinic. (2 sessions per week)	Number of new cases : 172. Total attendances for treatment : 3,393.
(2) Day Nursery Clinic. (3 sessions per week)	Number of new cases : 143. Total attendances for treatment : 4,646.

Home Helps.

There has been no change during 1932 in the administration of the Home Help Scheme; it has been fully utilised and appreciated. The Home Help is a woman, approved as suitable by the Health Visitor, who is employed by the Council to assist in the Homes during the lying-in period of certain necessitous women. She attends daily for 14 days, including attendance during the confinement in order to obtain anything required by the doctor or midwife. It is impressed on these women that they must not in any way undertake the nursing of the patient, or be responsible for the confinement or for the after-care of the infant; indeed, the Council refuse to sanction a Home Help unless a trained nurse has been engaged, whether as a midwife or as a maternity nurse acting under the direction of a doctor.

The work of each Home Help is closely supervised by the Health Visitor, who visits the patient's home several times during the lying-in period in order to see that the Home Help is fulfilling her duties as required. A list of these duties is handed to the Home Help when she is engaged for the case and approved of by the Health Visitor. In order that the Health Visitor may get in touch with the case at an early date after the confinement, the Home Help is required to notify the Medical Officer of Health not later than the day following the confinement that she has commenced her duties.

A list of women known to the Health Visitors to be satisfactory Home Helps is kept for reference and use at the Medical Officer of Health's Department; but, in the majority of cases, the patient selects her own Home Help from amongst her friends, relatives of the applicant being excluded. The suggested Home Help is visited at her home by the Health Visitor whose duty it is to decide whether this woman is suitable or not to be a Home Help. Particulars are also received from the Public Assistance Officer of the circumstances of both applicants and Home Helps where these may be known to him or his staff.

During 1932 there were 1,420 applications for Home Helps, of which number 1,166 were eligible; 39 were cancelled, making a total number of 1,166 women sanctioned by the Council under this Scheme.

Midwives.

The work of the midwives practising in the Borough is supervised by the Senior Assistant Medical Officer for Maternity and Child Welfare.

The total number who notified their intention to practise in the Borough in 1932 was 107, all of whom are trained midwives. At the end of 1932 it was found that there were only 57 midwives actually practising in the Borough; the difference between these two figures is accounted for by the fact that there are several large training schools for midwives in the Borough whose pupils may and frequently do continue to practise midwifery for a short period only in connection with their training schools after receiving the Central Midwives' Board Certificate.

The Council does not employ or subsidise directly any midwives, other than five who are employed in the Maternity Wards of one of the Council's institutions.

Number of cases attended by Midwives in 1932	...	...	2704
Number of cases in which medical aid was summoned	...	...	556
Number of cases in which the Midwife acted as a Maternity Nurse	...	...	239

Distribution of Dried Milk to Nursing and Expectant Mothers and to Children under 3 years of age during 1932.

During the year 1932 this scheme has been satisfactorily carried out and fully appreciated by the mothers in the Borough, as is evidenced by the fact that 102 tons, 5 cwt., 43 lbs. of Full-cream Dried Milk were distributed in 1 lb. grease-proof bags enclosed in carton packets, with printed directions clearly set out as to use. These have been distributed to eligible persons residing in the Borough from the undermentioned Centres:—

84 West Ham Lane, Stratford.

Public Hall, Barking Road, Canning Town.

Nurses' Home, Howards Road, Plaistow.

Maternity Centre, Barnwood Road, Silvertown.

The milk powder is received in bulk in hermetically sealed canisters, is packed by the Council's own staff, and only the estimated required quantity is weighed up daily so as to ensure the milk being fresh when supplied to applicants. Samples from each consignment have been submitted for chemical analysis and bacteriological examination with satisfactory result.

There is a strong but entirely erroneous impression amongst many people, including members of the medical profession, that the use of dried milk for infant feeding and in the diet of young children will produce Rickets.

One is impressed, after working over a period of several years at the Infant Welfare Centres in the Borough, by the comparative rarity of Rickets amongst a child population reared, as it were, on Full-cream Dried Milk. Breast feeding is encouraged, and the mother is given additional food in the form of Dried Milk in order that she may be able to feed her baby. But, where natural feeding is not possible, or later when the infant is weaned, Full-cream Dried Milk is almost universally employed with entirely satisfactory and gratifying results. Directions are printed on the cartons distributed from the Centre which point out, amongst other things, the fact that the child should have various vitamins added in the form of a cod liver oil preparation and fresh fruit juices. Through the Infant Welfare Centres it is possible for all mothers to obtain, at a very cheap rate, cod liver oil preparations or emulsions containing a standardised Vitamin-D content. The home conditions in many districts of this Borough provide no means of keeping clean and wholesome a supply of fresh cow's milk. The risk of contamination of fresh milk in the homes is so great that it is surely wiser to provide a child with a milk slightly deficient in certain vitamins but clean bacteriologically, than to give a milk which, becoming easily contaminated, will cause enteritis and other gastro-intestinal troubles, and may expose the child to the grave risk of introducing the tubercle bacillus into his system.

Hospital Accommodation. Expectant Mothers.

There has been no alteration in the arrangements for the admission of women for confinement to Queen Mary's Hospital and the Plaistow Maternity Hospital; both these hospitals are subsidised by the Council. The Forest Gate Hospital, under the Public Assistance Committee, also admits a large number of women to its Maternity Wards.

	No. of beds	No. of cases admitted	West Ham Residents No. Confined	No. of weeks spent
Queen Mary's Hospital	45	473	411	840
Plaistow Maternity Hospital	56	890	807	1712
Forest Gate Hospital	40	248	220	708

Hospitals for Children under 5 years of age.

Under the existing arrangements children under five years of age can be admitted for treatment to St. Mary's Hospital, Plaistow, and to the Invalid and Crippled Children's Hospital, Balaam Street, E.13. The majority of children admitted to the latter Hospital are suffering from some dietetic disorder, and are referred for admission through the Senior Assistant Medical Officer for Maternity and Child Welfare. Sixteen cots are reserved at this Hospital for such cases. The type of case admitted to St. Mary's Hospital varies, being chiefly acute medical or surgical cases.

Young children requiring orthopaedic treatment are referred to the Orthopaedic Department of the Invalid and Crippled Children's Hospital, whose Out-patient Department, is provided with full facilities for massage and electrical treatment, and for remedial exercises. If necessary, such children can be admitted to the surgical ward of the Society's Hospital, where the Council reserve four beds for this purpose.

	No. of beds	West Ham Residents No. of cases admitted	No. of weeks spent
(1) St. Mary's Hospital, E.13	10	178	615
(2) Children's Hospital, Balaam Street, E.13			
(a) Babies' Ward	16	200	804
(b) Orthopaedic Ward	4	28	53

Convalescent Homes for Children under 5 Years of Age.

Arrangements for convalescent treatment of young children are made through the Invalid Children's Aid Association and the Invalid and Crippled Children's Society. The children are all examined prior to being sent away by one of the Medical Officers for Maternity and Child Welfare.

Many more young children are now sent away than was formerly the case; this increase would appear to be chiefly a result of the larger number of children now attending Welfare Centres in the Borough, whereby more are brought into touch with such facilities as convalescent treatment. Many toddlers attending the Welfare Centres for the first time are found to be under-developed and ill-nourished, partly due to poor home conditions and partly also due to faulty diet and management. Such children respond rapidly to the regular healthy routine of a children's convalescent home, and the result of a period of four to six weeks' convalescence is remarkable. The benefit derived is permanent, and one finds that the mothers themselves are anxious to continue the regular training and habits acquired at the Homes.

All children under school age requiring convalescence are referred to the Medical Officer of Health, who makes the necessary arrangements with the two Societies. There is still great need for a convalescent home for young infants under one year of age.

During 1932, 219 children under school age were sent to various convalescent homes, being an increase of 122 compared with 1931. It is interesting to note how much greater use is now made of these Children's Convalescent Homes since the extension of the Council's Maternity and Child Welfare Scheme within the last seven years.

Number of children under school age who were sent to Convalescent Homes during:

1925	1927	1928	1929	1930	1931	1932
23	35	80	82	68	97	219

Convalescence for Nursing Mothers and Infants.

During the early part of 1932 the arrangement already in force continued, whereby the Council retained 2 beds at St. Mary's Home, Birchington-on-Sea. Unfortunately the Committee of this Home were obliged to close the Home to nursing mothers from September 30th, so that the Maternity and Child Welfare Committee had to make other arrangements.

During 1932, 23 mothers with their young infants were sent to St. Mary's Home, Birchington, with very beneficial results. The mothers always expressed great satisfaction and appreciation of the care and kindly attention received from the Staff of St. Mary's, so that it was with regret on the part of the Maternity and Child Welfare Committee that the agreement had to be terminated.

In order that convalescence might still be offered to those nursing mothers who required it, the Council arranged to rent one bed at The London Mothers' Convalescent Home, Sunningdale, Berkshire, and a second bed at "Child Haven," the convalescent home at Brentwood, Essex, of the West Ham Central Mission. The mothers are sent away with their infants (under three months of age) for a period of two weeks to both these Homes; each mother is examined immediately prior to admission to the Homes by the Senior Assistant Medical Officer for Maternity and Child Welfare. The mothers are recommended in every case from amongst those who attend the Welfare Centres in the Borough, and it is very gratifying to note the remarkable change in the women after they have had two weeks' complete rest and change. At both Homes the mothers are helped in the management of the infants and in the establishment of a regular method and routine in feeding, habit training, etc.

Three mothers with their young infants were sent to Sunningdale in 1932, and the arrangement made with "Child Haven" came into force in January, 1933.

Maternity and Nursing Homes in the Borough.

There are three Maternity and Nursing Homes in the Borough, registered under the Nursing Homes' Registration Act, 1927, one of these being the Plaistow Maternity Hospital. Of the two remaining Homes, one admits only senile and chronic cases, the other having accommodation for maternity, acute medical or surgical and chronic cases.

During 1932 there was one other application for registration of a private house as a Nursing Home, but the application was subsequently withdrawn by the applicant for personal reasons.

There have been no orders cancelling or refusing registration, and no applications for exemption from registration.

Children Act, 1908.

Under Part I. of this Act, the supervision of foster-children and of the homes of the foster-mothers is carried out by the Municipal Health Visitors in their respective districts. Application for registration as a foster-mother under the Act is sanctioned by the County Borough Council on the recommendation of the Maternity and Child Welfare Committee.

On receipt of an application for registration the Health Visitor makes the necessary detailed enquiry, the result of which is reported to the Maternity and Child Welfare Committee. In every case a report is received from the Public Assistance Officer

in respect of home and economic conditions where such is known to the Relieving Officers. The tuberculosis file is investigated to ascertain if the foster-mother and her family are free from tuberculosis. The foster-mother is informed that she must comply, if registered, with all rules under the Act and of the Council, including the provision of separate sleeping accommodation for the child and of a fireguard. She must also attend an Infant Welfare Centre where the child is under school age.

Registered foster-mothers are visited in their homes by the Health Visitors every two months.

During the year 1932

Number of applications for registration as foster-mothers...	40
Number of applications passed by the Council	28
Number of applications refused by the Council	3
Number of applications withdrawn	9
Number of visits paid to the Homes by the Health Visitor :	
(a) First visits	83
(b) Total visits	461

Number of Foster-parents on the Register.

(a) At the beginning of 1932	55
(b) At the end of 1932	65

Number of Foster-children who died during 1932 None

In no case were legal proceedings taken during the year.

OPHTHALMIA NEONATORUM.

Twenty-nine cases of ophthalmia neonatorum were notified to the Medical Officer of Health during 1932, of whom five were non-resident in West Ham but born in institutions in the Borough. Of these 29 cases, 16 were treated in hospital; 7 being treated in the institution in which they were born, and 9 transferred to a special hospital for cases of ophthalmia neonatorum. Any infant suffering from ophthalmia neonatorum can be admitted, with the mother, immediately to hospital if such treatment is required. The Health Visitor visits the infant's home weekly until the condition of the eyes is satisfactory.

Number Notified	Cases Treated		Vision		Total Blindness	Deaths
	At Home	In Hospital	Unimpaired	Impaired		
*29	13	16	†24	0	0	2

* 24 in Borough; 5 non-resident in the Borough.

† Resident in Borough.

Deaths. The two deaths amongst the above cases both occurred in the hospital to which the infants had been removed for special treatment for ophthalmia. Both occurred on the 14th day from the following causes respectively:—

- (1) Corneal ulcer, ophthalmia neonatorum, patent foramen ovale, morbis cordis.
- (2) Congenital atelectasis, ophthalmia and icterus neonatorum.

Maternal Mortality.

Total number of births notified in West Ham in 1932 was 6,415, of whom 4,980 were West Ham residents.

Number of deaths due to complications of pregnancy or child-birth was 15, **9 being due to Sepsis**, the remaining **6 from other causes**.

Of this total number four died at home and eleven in institutions.

Average age of death, 32.6 years.

Maternal Mortality Rate for 1932, 3.0, as compared with 3.0 per 1,000 for 1931.

Each case of maternal death is investigated by the Senior Assistant Medical Officer for Maternity and Child Welfare. Particulars are obtained from the doctor who attended the patient at the time of her death, whether at home or in hospital. It may be necessary to obtain further details in regard to the present pregnancy or confinement from a private midwife or medical practitioner. If the detailed report required by the Ministry of Health is still incomplete, especially in respect of home circumstances and history of the mother's previous health, this is obtained by the Health Visitor from the husband or a near relative of the mother.

Puerperal Fever and Puerperal Pyrexia.

Puerperal Fever.

Number of cases notified in 1932, 17; all of whom were West Ham residents:—

		At home	In hospital	Recovered	Result	Died
Confined	...	13	4	10		7
Treated	...	2	15			

Puerperal Pyrexia.

Number of cases notified in 1932, 48; of whom 36 were resident in West Ham. The remaining 12 occurred in patients confined in institutions in the Borough, but normally non-resident in West Ham.

		At home	In hospital	Recovered	Result	Died
Confined	...	27	21	45		3*
Treated	...	16	32			

* Of whom one was notified twice.

Arrangements are in force whereby the patient with her baby can be admitted immediately to hospital for treatment if so required. The doctor in attendance on the patient may also obtain, through the Medical Officer of Health, the services of a consultant obstetric surgeon who visits the patient at her home. The Council retain the services of three consulting obstetricians for this purpose. A report is sent to the Medical Officer of Health by the Consultant following his examination of the patient, and arrangements are made to assist the doctor to carry out the advice of the specialist.

The Health Visitor visits the home of the patient weekly until she is satisfactory or the case is completed.

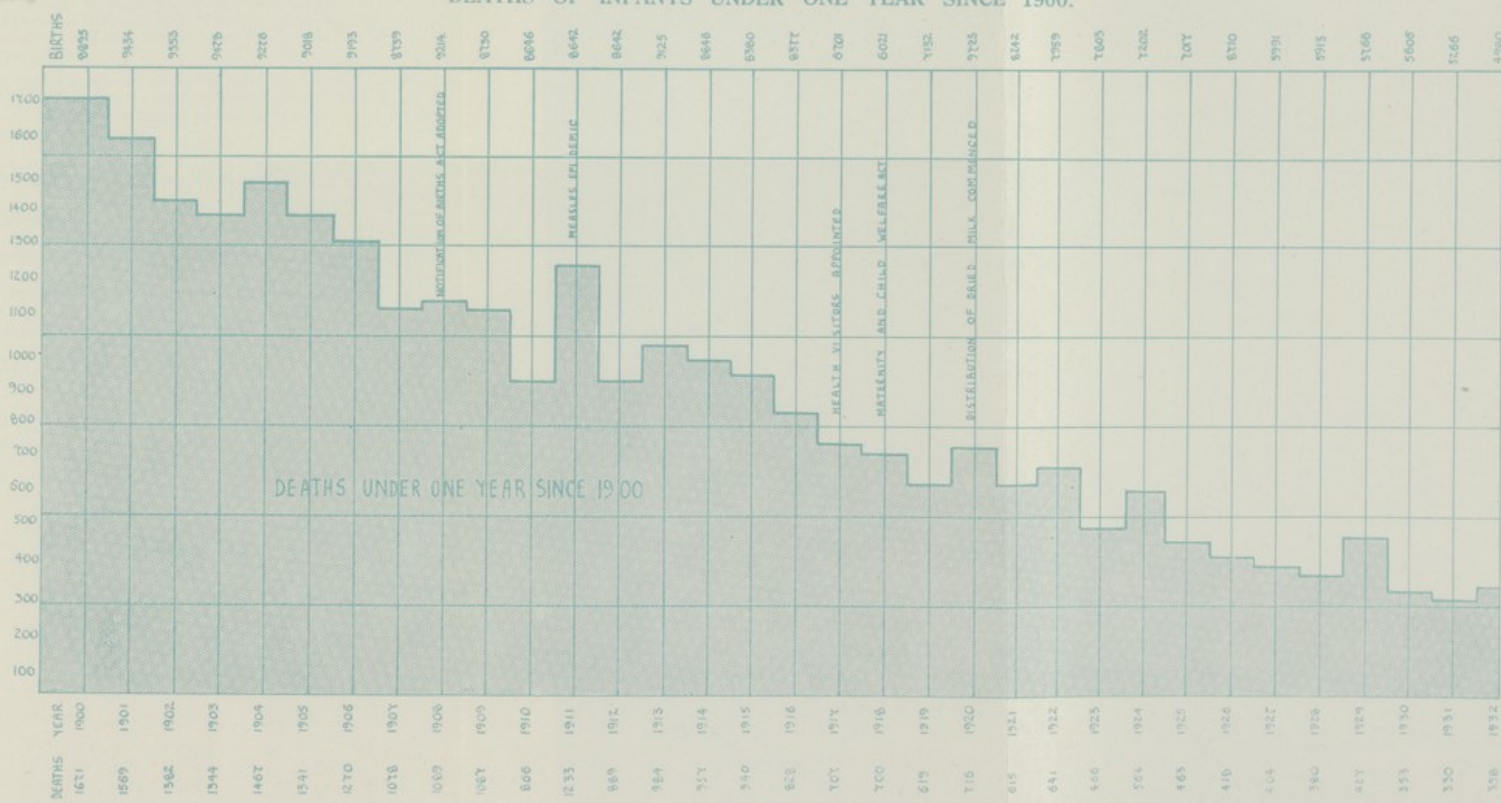
Home nursing of cases of Puerperal Fever and Pyrexia is carried out by the Nurses from the several District Nursing Associations in the Borough.

INFANTILE MORTALITY.

The infantile mortality rate for 1932 is 71.0 per 1,000 births, as compared with 62.6 per 1,000 in 1931. For the great towns the rate is 69.0, and for England and Wales, 65.0 per 1,000 births.

The total number of deaths under one year was 358, of which 215 occurred in male infants and 143 in female infants. Of the total number, 340 were amongst legitimate infants, the remaining deaths, viz., 18, being illegitimate infants.

DEATHS OF INFANTS UNDER ONE YEAR SINCE 1900.



Rate per 1,000 births: Legitimate 70.3; Illegitimate 125.0.

Analysis of this total number of deaths reveals the striking fact that out of 358 deaths, 145 or 40.5% occurred in infants under one month of age, death being due to prematurity, congenital debility or malformation in most instances. This percentage remains fairly constant, and it is due to the large numbers of neonatal deaths that the infant mortality rate is even as high as 71 per 1,000.

Of the total number of deaths under one month, viz. 145, no fewer than 40 occurred within 24 hours of birth, and 42 under 1 week, i.e. 82 deaths occurred within the first week of life from the following causes:—

Prematurity, 40 (21 under 24 hours).

Asthenia, 3.

Congenital defects and deformities, 27 (14 under 24 hours).

Result of disease of pregnancy or difficult labour, 8.

Acquired Infections, e.g., Pneumonia 3; Enteritis 1.

Total, 82.

In very few cases is there any apparent reason for the premature labour; the majority of these mothers have received antenatal supervision. The average period of pregnancy in such cases is 28—30 weeks. Twenty-seven of these mothers were delivered in hospital, so that, presumably, these premature infants received every necessary care and attention. Again the question arises as to whether the very widespread use of abortifacient drugs in the early months of pregnancy may not be one of the important contributory factors in this production of premature labours and in the birth of weakly infants.

MENTAL DEFICIENCY.

On 31st December, 1932, there were 603 Mental Defectives on the register. Males, 296; Females, 307.

Number in Institutions—

Males, 113; Females, 88. Total, 201.

Number under Statutory Supervision—

Males, 182; Females, 216. Total, 398.

Number under Guardianship under Order—

Males, —; Females, 2. Total, 2.

Number on licence from Institutions—

Males, 1; Females, 1. Total, 2.

One hundred and thirty-six new cases were dealt with during 1932 :—

Recommended Institutional Care—

Males, 29; Females, 61. Total, 90.

Recommended Supervision at Home—

Males, 16; Females, 20. Total, 36.

Referred for re-consideration—

Males, 6; Females, 4. Total, 10.

Number of cases notified by the Local Education Authority under Sec. 2 (2).

Males, 22; Females, 16. Total, 38.

Number of cases admitted to Institutions—

Males, 36; Females, 19. Total, 55.

During the year 41 Continuation Orders were received—

For 5 years: Males, 19; Females, 12. Total, 31.

For 1 year: Males, 2; Females, 8. Total, 10.

Twenty-one cases were removed from the register for reasons as follows :—

Removed to other Areas—

Males, 8; Females, 4. Total, 12.

Died—

Males, 5; Females, 4. Total, 9.

During the year 136 fresh cases were dealt with, 10 of whom were deemed to be not certifiable under the Acts. Of the remaining 126 a large percentage were recommended for admission to an Institution in order that they could receive appropriate training and care. In addition to the 2 patients placed under guardianship by order of a Judicial Authority, there are 2 females in the care of guardians, one on licence from an Institution, and the other placed direct from her home. The woman who is on licence has been with her guardian since 1928, and is doing quite well. After a period of training for domestic service, she was fortunate enough to secure a position at the local hospital, and while not yet receiving a very large wage, it is hoped that she will improve and be worthy of better hire.

SOUTH OCKENDON COLONY.

On the 5th of May, 1932, the first part of the South Ockendon Colony was officially opened by the Mayor (Alderman J. T. Scoulding, J.P.). This portion comprises 3 villas, which have been adapted to accommodate 134 patients (44 adult males, 40 juvenile males, 30 adult females, and 20 juvenile females) and a portion of the staff (some having to live out). Patients were admitted as soon as the various legal formalities were completed and quickly settled down to their new life.

Owing to the fact that no workshops or schoolrooms have yet been provided, the training and occupation of the patients is presenting some difficulty. The best use, however, is being made of the means at the disposal of the staff, and it is surprising how quickly the patients respond to training. Approximately a dozen male adults are employed regularly on the farm attached to the Colony, and they are proving very useful indeed. A number of the others are engaged in the ward cleaning and gardening, under the supervision of the staff. One of the men patients, who was transferred from a London County Council Institution and had been trained as a shoemaker, has proved very useful, and is able to do practically all the shoe repairs for the colony. He is teaching a fellow patient, and they are making good progress together. This is a very good example of the benefit some of these cases obtain from proper training. The women patients are taught knitting and plain sewing, and with assistance are able to do practically all the repairs to clothing. The boys are occupied in very simple tasks, and are taught counting, to recognise colours, crayon drawing, and the older boys plasticine modelling. The girls are employed similarly to the boys, and are also taught bead sewing and simple household work. In addition to these lessons, rug-making, raffia and basket work are also taught.

Steps are being taken to provide suitable workshops, and it is hoped that when these are completed, better and more efficient training will be arranged.

Attention is also paid to the physical side of training, and regular times are set aside for drill and concerted games.

The health of the patients generally has been very good, apart from minor ailments which occur from time to time. It has been observed that the companionship of persons of their own mentality has a wholesome influence upon their development and character; they become more reliable and useful, a fact which parents are quick to notice on visiting days. Occasionally low grade defectives may have out-bursts of temper, whilst others may be subject to frequent epileptic fits, which require closer care and supervision from the staff. Otherwise the life of the Colony is very smooth and amicable.

A point which merits consideration is the fact that there are a number of vacancies amongst the male juveniles. This is accounted for by the limited length of time during which children of this age are available for admission. It would therefore appear desirable in the future extensions of the Colony, to provide a larger percentage of places for adults than for children.

The Colony, which is administered from my department, is under the detailed supervision of my deputy (Dr. T. W. Hill) to whom I am indebted for most of the above report. Urgent cases and admissions are seen by arrangement with a local general practitioner with experience of mental defects (Dr. N. MacFarlane).

A Matron Superintendent (Miss W. S. Butler) is responsible for the general routine of the Institution, and for the duties of the staff, which consist of:—

- Matron Superintendent.
- 1 Male Charge Nurse.
- 1 Female Charge Nurse.
- 5 Male Nurses.
- 7 Female Nurses.
- 1 Cook.
- 2 Housemaids.
- 2 Kitchen Maids.
- 1 Handyman.
- 3 Porters.

By an agreement with the County Borough of East Ham, suitable mental deficiency cases occurring in that Borough are accepted on a capitation basis. On the 31st December, there were 70 cases from West Ham and 42 cases from East Ham resident at the Institution.

APPENDIX I.

LOCAL GOVERNMENT ACT, 1929.

The following statistics are in respect of the Forest Gate Hospital, Whipps Cross Hospital, Central Home, and Forest House, also of the District Medical Officers:—

District Medical Officers.

	Number of Men.	Number of Women.	Number of Children.
New cases seen	1192	3502	4121
Total No. of cases seen	5598	19206	13405
No. referred by Relief Sub-Committee	546	461	655
Attendances at Surgery	5076	15745	8931
Sent to Institutions:—			
Voluntary Hospitals	4	14	16
Whipps Cross Hospital	253	239	232
Mental	5	11	2
Otherwise	—	—	152
Central Homes	97	114	11
Forest House	1	1	—
Forest Gate Hospital	1	23	1
Aldersbrook Home	—	—	—
Discharged as no longer in need of treatment	926	2511	2874
New cases seen at Domiciliary visit	274	861	1675
Fresh cases transferred from			
(a) Institutions	3	1	2
(b) General Practitioner	6	1	4
Total No. of Domiciliary visits paid	803	3770	5543
Visits paid by District Nurse	223	3513	4066
Deaths	15	43	8
Total No. now on register as receiving treatment from D.M.O.	142	713	606
Prescriptions made up	6790	20943	12262
Total No. of vaccinations or re-vaccinations	280		740

WHIPPS CROSS HOSPITAL.

	MEN			WOMEN			CHILDREN			Total
	Acute	Sub-acute	Chronic	Acute	Sub-acute	Chronic	Acute	Sub-acute	Chronic	
Admitted	3221	—	19	3353	—	12	1949	—	0	8554
Discharged	2629	—	37	2891	—	36	1765	—	1	7358
Seen as out-patients	267	—	125	71	—	1	34	—	0	498
Not admitted	327	—	26	147	—	23	132	—	1	656
Admitted by means of :—	MEN			WOMEN			CHILDREN			
Relieving Officer and District Med. Officer	209			260			266			765
Gen. Practitioner and Relieving Officer	2581			2776			1376			6733
M.O.H.	—			—			2			2
Otherwise	3			4			5			12
Transferred from other Institutions	176			159			218			553
Police (not accidents)	70			34			2			106
Accidents	155			83			61			299
Med. Superintendent	59			30			15			104
No. of infectious cases	298			241			167			706
Transferred to other Institutions	248			228			263			739
Deaths	554			410			224			1188
Total No. being treated in hospital on 31/12/32	328			302			231			861
No. of cases seen by	Gynaecologist 42			No. of cases allocated to :			X-ray :			
Consultants 3170	Surgeon 183			West Ham 1586			West Ham 1271			
Ophthalmic 347	Neurologist 240			Essex 1083			Essex 1355			
Aural 500	Dentist 416			East Ham 481			East Ham 408			
Light 1240	Urologist 202									

CENTRAL HOME.

	MEN			WOMEN			CHILDREN			Total
	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	
Admitted	906	4	8	915	8	6	4	6	3	1860
Discharged	883	5	7	873	8	5	4	6	3	1794
Refused admission ...	—	—	—	—	—	—	—	—	—	—
Admitted by means of :—	MEN			WOMEN			CHILDREN			
Relieving Officer and District Med. Officer ...		149			203			2		354
Gen. Practitioner and Relieving Officer ...		483			526			1		1010
Gen. Practitioner & D.M.O.		—			—			—		—
M.O.H.		—			1			—		1
Otherwise		40			11			2		53
Transferred from other Institutions		246			186			6		438
Med. Superintendent ...		—			—			—		—
No. of infectious cases and nature of infection ...		7			—			13		20
Transferred to other Institutions		149			187			13		349
Deaths		534			470			—		1004
Total No. of sick cases in the Home on 31/12/32 ...		441			476			5		922
Total No. of able-bodied in the Home on 31/12/33 ...		487			344			5		836
No. of vacant beds, if any, on 31/12/32		13			18			—		31

FOREST GATE HOSPITAL.

	MEN			WOMEN			CHILDREN			Total
	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	
Admitted	4	17	30	641	19	18	467	26	4	1226
Discharged	4	30	29	628	25	15	490	14	4	1239
Refused admission ...	—	—	—	2	—	—	—	—	—	2
Admitted by means of:—	MEN			WOMEN			CHILDREN			
Relieving Officer and District Med. Officer ...		4			156			5		165
Gen. Practitioner and Relieving Officer ...		2			9			3		14
Gen. Practitioner and Dis. Med. Officer ...		—			144			1		145
M.O.H.		—			27			1		28
Otherwise		10			81			8		99
Transferred from other Institutions		44			146			35		225
Med. Superintendent ...		1			13			2		16
No. of infectious cases ...		—			—			1		1
Transferred to other Institutions		49			79			42		170
Deaths		1			44			26		71
Total No. of sick cases receiving treatment on 31/12/32		148			483			139		770
Total No. of maternity patients in the Home ...		—			47			—		47
No. of vacant beds, if any, on 31/12/32		—			9			—		9

FOREST HOUSE.

	MEN			WOMEN			CHILDREN			Total
	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	Chronic Sick	Mental	Epileptic	
Admitted	2	2	7	—	—	—	—	—	—	11
Discharged	4	4	2	—	—	—	—	—	—	10
Refused admission ...	—	—	1	—	—	—	—	—	—	1
Admitted by means of :—	MEN			WOMEN			CHILDREN			
Relieving Officer and District Med. Officer ...		—			—			—		—
Gen. Practitioner and Relieving Officer		—			—			—		—
139 Gen. Practitioner and Dis. Med. Officer		—			—			—		—
M.O.H.		—			—			—		—
Otherwise		—			—			—		—
Transferred from other Institutions		17			—			—		17
Med. Superintendent ...		—			—			—		—
No. of infectious cases ...		—			—			—		—
Transferred to other Institutions		11			—			—		11
Deaths		—			—			—		—
Total No. of sick cases in the Home on 31/12/32 ...		60			—			—		60
No. of vacant beds, if any, on 31/12/32		1			—			—		1

ANNUAL REPORT
OF THE
SCHOOL
MEDICAL OFFICER
FOR THE YEAR
1932

F. GARLAND COLLINS,
M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.

ANNUAL REPORT

SCHOOL

MEDICAL OFFICER

FOR THE YEAR

1933

W. H. HARRIS, M.D.

Medical Officer, U.S. Army

U.S. Army Medical Department

U.S. Army Medical Department

U.S. Army Medical Department

U.S. Army Medical Department

**TO THE CHAIRMAN AND MEMBERS OF THE
EDUCATION COMMITTEE.**

Mr. Chairman, Ladies and Gentlemen,

I beg to submit herewith the Annual Report on the School Medical Service for the year 1932.

In spite of the economic conditions causing distress in the Borough, the health of the children has not been allowed to suffer. In the vast child population of West Ham there must of necessity be a considerable amount of ill health, and of children needing special consideration, though the primary object of the School Medical Service is that of prevention rather than of cure.

In several of my previous Reports I have included tables which show the progressively high standard of physical fitness. It is significant to note that in the year 1928, out of two hundred and twenty-nine children examined with a view to admission into a Special School, eighty-two were found to need training in a School for Mental Defectives, and fifty-three in a School for Physically Defective Children, whereas in the year under review, one hundred and ninety-one cases were so examined, of whom only twenty-seven were found to require treatment at a Special School for Mental Defectives, and as few as twenty-one at a School for Physically Defective Children.

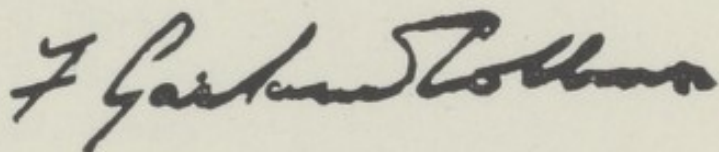
There is, however, a percentage of children, who though not sufficiently backward or defective to need admission into one or the other of the special schools mentioned, still, in my opinion, require some form of training other than that obtainable in an ordinary elementary school.

In a Memorandum which I submitted to the Education Committee in November, 1929, amongst other proposals, I suggested a special school for such cases. The majority of this type of child, though able to carry on in a fairly normal way during school life with parental protection and the aid of the Teacher, are unable properly to fend for themselves in after life, and eventually become, in some form or other, a charge to the community.

The work of the Open Air Schools and of the Nursery Schools continues to be of invaluable help in maintaining the health of the weakly and of the younger children.

The many social services ancillary to and concomitant with the School Medical Service are of inestimable value in the strenuous activities of this Authority so to bring up the children that they may become healthy, useful and contented citizens.

Your obedient Servant,



School Medical Officer.

Municipal Health Offices,
Romford Road,
Stratford, E.15.

June, 1933.

(1) Staff.

The staff consists of the following Officers:—

Chief School Medical Officer—F. Garland Collins, M.R.C.S. (Eng.). L.R.C.P. (Lond.), D.P.H. (Also Medical Officer of Health.)

Chief Assistant School Medical Officer—Robert J. Reid, M.B., Ch.B (Edin.), D.P.H. (Edin. Univ.).

Assistant School Medical Officers (full time)—

A. C. Lupton, M.B., C.M.

H. McD. Borland, M.B., Ch.B.

A. Furniss, L.R.C.P., L.R.C.S., L.R.F.P.S. (Glas.),
D.P.H., L.D.S.

A. Muriel Ison, M.D., D.P.H.

Jessie H. Fitchet, M.B., Ch.B., D.P.H.

Dental Officers (full time)—

L. K. Percy, L.D.S. (Eng.).

J. S. Dick, L.D.S. (Eng.).

Hélène M. Gubb, L.D.S. (Eng.).

O. B. Heywood, L.D.S. (Eng.).

Dorothy Marsden, L.D.S. (Eng.). (Temporary.)

School Oculist (full time).

W. J. Thomas, M.R.C.S., L.R.C.P., D.P.H.

Consultant Aural Surgeon (part time)—

F. Stoker, F.R.C.S.

CLERICAL STAFF.

Mr. F. W. England, Chief Clerk.

Mr. R. H. Thomas, Senior Clerk.

Miss P. I. Geaussent.

Miss G. A. Blackler.

Miss M. G. England.

Miss E. W. Wood.

Mr. T. P. Swatts.

Miss I. M. Parsons.

Mr. R. Huxtable.

NURSING STAFF.

Miss W. M. Barnes (Matron, Fyfield Residential Open Air School)

Miss E. Adams.
(Resigned November, 1932)

Miss E. Alford.

Miss D. S. Ayton.

Miss A. Burrows.

Miss E. M. Bussell.

Miss A. J. Costain.

Miss M. M. Empson.

Mrs. E. G. Eyton.

Miss E. Fraser.

Miss L. C. Glover.

Mrs. C. B. Halls.

Miss E. D. Harris.

Miss F. G. Hobbs.

Miss C. E. Hutton.

Miss E. K. Jack.

Miss M. James (Nurse, Fyfield
Residential Open-Air School).

Miss C. H. Jones.

Miss E. Large.

Miss A. K. McCormack.

Mrs. M. Mace.

Miss I. B. B. Mann.

Miss L. F. Manning.

Miss F. R. Pritchard.

(Resigned December, 1932)

Miss M. H. Rose.

Miss E. R. Tanner.

Miss M. E. Tanner.

Miss M. A. Van Ryssen.

Mrs. S. Wilderspin.

Miss D. Wright

Miss A. Sheehan (Temporary).

(2) Co-ordination of Departments.

The School Medical Officer is also Medical Officer of Health, and there is the closest co-operation between all the Departments under his control.

(a) Co-ordination between the School Medical Service and the Maternity and Child Welfare Department is secured by the transfer of the Health Visitors' following-up cards to the School Medical Department. These cards are allocated to the child's School Medical Dossier when it becomes of school age, and so are available for the School Medical Inspection at the first examination. The part use of the School Dental Clinics for children under 5 years (as a temporary measure) by the Dentist of the Maternity and Child Welfare Committee was discontinued in March, 1933.

(b) Care of Debilitated Children requiring Convalescent Treatment.—Arrangements for convalescent treatment of all children in the Borough are made through the Medical Officer of Health's Department. Cases are referred for convalescence to the Medical Officer of Health by:—(1) Assistant School Medical Officers, (2) Assistant Maternity and Child Welfare Medical Officers, (3) District Medical Officers, (4) Tuberculosis Officer, (5) Private Practitioners or Hospital Medical Officers.

The cases recommended are sent to various Convalescent Homes by arrangement with the Invalid and Crippled Children's Society, for the South side of the Borough, i.e., South of the L.M.S. Railway, and by the Invalid Children's Aid Association for the North side of the Borough, i.e., North of the L.M.S. Railway.

Children over five years of age whose parents are in receipt of Public Assistance are referred by the Medical Officer of Health to the District Medical Officer with a view to admission to the Margate Convalescent Home.

Every child recommended for convalescence other than one eligible for admission to the Margate Home is examined (1) if under school age by an Assistant Maternity and Child Welfare Medical Officer or (2) if attending school by an Assistant School Medical Officer.

(c) The Bye-Laws Department daily notifies the Medical Officer of Health of absentees from school on medical grounds.

(d) The Tuberculosis Officer is constantly in touch with the School Medical Department, reporting on children referred to him by the Assistant School Medical Officers, or who have been sent away for Institutional treatment.

THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

(3) School Hygiene.

Insanitary conditions arising within the School precincts or its immediate environment are reported to the School Medical Officer by Head Teachers as they arise. Structural defects relating to heating, light and ventilation are referred to the Committee's Architect, Mr. J. H. Jacques.

The Architect reports that during the year, owing to the financial crisis, no alterations or improvements to heating in the schools were made, and only one set of latrines were modernized, at the Infants' School, Clarkson Street.

Two new Senior Elementary Schools at Pretoria Road and South Hallsville were opened during the year, also the buildings accommodating the Grove and Russell Central Schools are now being used for elementary school purposes, and known as the Deanery and Ashburton Senior Mixed Schools respectively, the Central Schools being transferred to new buildings at Forest Gate and Upton Park.

In both the Nursery Schools the arrangements for cooking are working satisfactorily, and the buildings, which are of an experimental character, seem to be well adapted for the purpose. In future Nursery Schools however, it will be well to consider giving sanitary and cloakroom accommodation for each room separately, also a large room should be provided, or sliding and folding partitions, so that two rooms can be made into one, for assembly or other purposes; also more store room accommodation for toys, beds, etc., should be provided.

The desks in use are of the modern dual type, and as opportunity arises box desks are being gradually substituted for the older children, and chairs and tables for the younger ones. The schools, classrooms and cloakrooms are cleansed by an efficient staff of cleaners, under the direction of the School Caretakers. Head Teachers attend to the drying of children's clothes as required.

The question of meals at Schools hardly arises, as with few exceptions most children live near the Schools, and go home mid-day. In the two Special Schools, however, and in the Day Open-Air School at Crosby Road, the provision of a hot meal at a very low cost is arranged for, but many cases are on the free meal list.

There are ten School Dining Centres distributed in various parts of the Borough, in charge of a Lady Superintendent, which are visited periodically by the School Medical Officer.

The following Memorandum has been sent to Head Teachers:

"It is now an established fact that a little milk (about one-third of a pint) consumed by children during the morning session is in every way advantageous to their general health, and that their capacity for resisting disease is enhanced thereby.

“The source of supply, as well as the quality of the milk delivered to the Schools is supervised by the Medical Officer of Health.

“The milk is best contained in bottles, with straws for drinking, or in sealed containers.

“It must be remembered that on no account should the milk be warmed in any way, as this not only detracts from its value, but is apt to render it anything but innocuous in regard to the germ content.

F. GARLAND COLLINS,
Chief School Medical Officer.”

(4) Medical Inspection.

For the purposes of administration, the whole Borough is divided into five sub-areas, each served by a School Clinic, an Assistant School Medical Officer and Nurses. The schools in each area are visited in rotation. The Head Teachers send out notices to parents informing them of the time to attend the inspection, according to an arranged programme.

At the end of the Inspection of a School a written list is handed or sent to the Head Teachers informing them confidentially of any defects which are liable to interfere with a child's educational career.

Arrangements are in force whereby those scholars who were absent from Inspection are examined at a later special visit to the school by the Medical Officer.

(a) The “age groups” inspected throughout the schools are as follows:—

- (1) Children admitted to school for the first time during the year (Entrants).
- (2) Children of 8 years of age (Intermediates).
- (3) Children expected to leave, and who have not been previously inspected since reaching the age of 12 years. (Leavers).

Besides the above statutory routine examinations, a considerable number of other children have also been medically inspected—classified as follows:—

- (1) "Specials"—selected by Head Teachers and examined at School at the time of the Doctor's visit.
- (2) "Specials" sent by Teachers to the Clinics for treatment of minor ailments.
- (3) A number of non-ailing children are examined as to fitness for (1) sport; (2) employment; (3) camp life; (4) employment in entertainments. All these comprise "other routines."
- (4) All other children referred in any way to the School Medical Officer for examination, advice or treatment.
- (5) A census and medical examination of all exceptional children in the Schools for the purpose of Table III. of the Report.

(b) There has been no important departure made in the Board's Schedule of Medical Inspection.

Owing to exceptional circumstances the following schools, with the Board's sanction, were examined on other than school premises, viz. at the places indicated:—

Hallsville	}	The Public Hall, Canning Town.
Clarkson Street		
St. Margaret's		
Holy Trinity		
St. Luke's		The Boyd Institute.
St. Patrick's	}	The Old Vicarage, Christ Church.
Carpenters Road		
St. Francis'		The Wesleyan Hall, The Grove, Stratford
St. Paul's.	}	The Mechanics' Institute (L.N.E.R.)
Colegrave Road		
The Rosetta Junr.		The Bancroft Hall.
St. James'.		Hanford Memorial Hall, Forest Lane.
West Ham Church Boys.		Stratford School Clinic.
Frederick Road.		South Hallsville School, Medical Room (temporary).
St. Antony's,		St. Antony's Hall.
St. Andrew's.		St. Andrew's Vestry.

SCOPE OF THE SCHOOL MEDICAL SERVICE.

The School Medical Service now comprises the following activities :—

- (1) Medical Inspection in Elementary Schools (Routine and Specials).
- (2) "Following up" of children found defective.
- (3) Cleanliness Surveys (Five Special Duty Nurses engaged).
- (4) Treatment of Minor Ailments (four Clinics).
- (5) Dental Inspection and Scheme of Treatment (five full-time Dental Surgeons, four Clinics).
- (6) Treatment of Visual Defects.
- (7) Operative Treatment of Tonsils and Adenoids by arrangement with three local Hospitals.
- (8) X-Ray Treatment of Ringworm.
- (9) Provision of meals to necessitous children.
- (10) Provision of Surgical Instruments and Appliances for Crippled Children.
- (11) Orthopædic Treatment. Remedial Clinic in-patient and out-patient treatment at Orthopædic Hospitals.
- (12) Convalescent treatment for debilitated children.
- (13) Juvenile Employment.
- (14) Open Air Education. (1) Residential Open Air School for 80 Boys and 60 Girls at Fyfield. (2) Day Open Air School, Crosby Road, for 90 Children (Girls and Junior Boys). (3) Ten allocated beds for Girls at the Ogilvie School of Recovery, Clacton-on-Sea. (4) Two Holiday Camps (Boys and Girls) during the Summer Vacation at the Seaside.
- (15) Artificial Sunlight Treatment at the Balaam Street Children's Hospital.
- (16) Class for Stammering Children.
- (17) Medical Inspection of Special Defective Children at the two Special Schools and two Deaf Centres.
- (18) Medical Inspection of Scholarship Children at the two Central Schools.
- (19) Medical Inspection of Pupils, Bursars, and Scholars at the two Secondary Schools.
- (20) Medical Inspection of Junior Technical and Art Classes at the Municipal College.
- (21) Medical Inspection of St. Angela's High School for Girls.

- (22) Medical Inspection of Pupils at the West Ham High School for Girls.
- (23) Examination of Children attending Centres for the Deaf by Specialist Aural Surgeon.
- (24) Examination of Referred Pupils from Continuation Schools and Juvenile Unemployment Centres.
- (25) Examination of Children attending Nursery Schools.
- (26) Work in conjunction with N.S.P.C.C. as occasion arises.

(5) The Findings of Medical Inspection.

(a) UNCLEANLINESS.

To each of the five areas into which the Borough has been divided for the purpose of administration as before mentioned, is attached a Special Duty Nurse, who concentrates on cleanliness surveys in each school, in rota. The dirty and verminous children are followed up at their homes until clean. A certain number, with the parents' consent, are cleansed at the Clinics.

The following figures give a brief resumé of the work done, and the findings:—

Number Examined	Ova	Ova and Pediculi	Body Pediculi	Head and Body Pediculi	Sores	Dirty
59374	4463	802	58	6	354	190

The percentages for head and body vermin are respectively 1.36 and .107.

Number of Home Visits ...	3696
Number of Children visited at School ...	8596

Conditions remedied during the year under Cleanliness scheme:—

Defective Clothing	...	...	...	23
Unclean Heads	...	...	...	1044
Unclean Bodies	...	...	...	100
Skin Diseases	...	...	...	35

No children were cleansed under Section 122 of the Children Act, but 176 heads were cleansed at the School Clinics by the Nurses.

(b) MINOR AILMENTS.

Various minor affections common in school children are included under this heading, such as Impetigo, various Skin Diseases, Sore Eyes, Discharging Ears, and minor first aid cases. A few of these are discovered at School Medical Inspection, but by far the greater number are brought forward by the teachers, and sent to the Minor Ailments Clinics.

Columns 2 and 4 of Table II. in the Appendix give the findings among the Routines and Specials respectively.

(c) ENLARGED TONSILS AND ADENOIDS.

At Routine Inspection 1,372 cases were referred for operative treatment, and 816 among the Specials.

(d) TUBERCULOSIS.

Routine and Specials, Pulmonary—with definite signs	14
Suspected	84
Other Forms of Tuberculosis	67

(e) SKIN DISEASES.

Excluding Ringworm there were 197 cases among the "routines" requiring treatment and 3,283 among the "specials." There were 46 cases of Tinea Tonsurans (Head Ringworm) and 141 on the body, requiring treatment.

(f) EXTERNAL EYE DISEASE.

This type of disease includes Blepharitis, Conjunctivitis, Corneal Ulcers, etc. They usually connote eye-strain and debility (i.e. Blepharitis) or unhygienic surroundings. Table II. gives the findings, which in the case of routines amount to 103.

(g) VISION AND SQUINT.

At Routine Inspection 1,434 cases were referred for refraction and 190 for Squint, which amounts to 8.2% defective vision not already adequately provided for. In addition there were 1322 specially selected cases.

(h) EAR DISEASE AND DEAFNESS.

The testing of hearing is part of the routine examination of every child. There were 67 deaf children among the routines and 168 among the Specials.

(i) DENTAL DEFECTS.

The teeth are examined by the School Doctors as a matter of routine, and all defects referred for treatment. 114 Routines and 23 Specials were so referred.

A special Dental Inspection is made of all children recommended for the Open Air Schools at Fyfield and Crosby Road, and the Ogilvie School of Recovery, Clacton. Defective teeth are put in order before admission.

(j) CRIPPLING DEFECTS.

Marked crippling defects are seldom found among the Elementary School children, having been previously segregated out at the Special Schools. This may be done before school life, on first admission to school life, or at the examination of Exceptional children, which occurs annually.

Medical examinations are carried out from time to time for the admission of Crippled Children to the Special Schools, and children already on the roll are re-examined as regards fitness for continued attendance or return to elementary schools.

The following Tables give the classification of children medically examined with a view to admission to the two Special Schools.

Cases Recommended for Admission to Special Schools.

	Boys	Girls
Mental Defectives	20	7
Physical Defectives	13	8
	—	—
	33	15
	—	—

Cases not Admitted to Special Schools.

	Boys	Girls
Unfit for School, M.D.	4	3
Unfit for School, P.D.	6	10
Recommended for Open Air School ...	8	4
To continue, return or have trial at Elementary School	29	34
Recommended for Deaf Centre	2	—
Recommended Myopic School	1	—

	Boys	Girls
Recommended Epileptic Colony	—	2
Recommended Residential Heart Hospital	5	—
Recommended Hospital School	3	2
Absentees from Medical Examinations* ...	11	3
Notified to Local Authority (through admission examination)	6	10
	<hr/> 75	<hr/> 68

143

* Every absentee is followed up by a special Nurse. Absence is often due to the fact that the parent objects to any examination being made in regard to mental defect.

(k) NUTRITION.

There are comparatively few badly nourished children in the Borough. The free meals and the supply of the morning drink of milk at the schools is coping admirably with the question of under-nourishment, and although quite common in the earliest years of medical inspection, really bad cases are now practically unknown.

Table II. shows 333 cases requiring treatment and 133 cases under observation, giving a percentage of 2.3 for Routines.

AVERAGE HEIGHT AND WEIGHT, 1931—1932.

1931.					1932.		
Age	Number Examined		Average Height in inches.		Number Examined		Average Height in inches.
Boys							
5	1410	...	41.6	...	1153	...	41.7
8	2596	...	48.1	...	2313	...	47.5
12	1627	...	55.3	...	2425	...	55.6
Girls							
5	1372	...	41.4	...	1081	...	41.5
8	2536	...	47.3	...	2200	...	48.8
12	1459	...	56.3	...	2519	...	56.1

WEIGHT.

Age	Number Examined		Average Weight in lbs.		Number Examined		Average Weight in lbs.
Boys							
5	1410	...	40.0	...	1153	...	39.6
8	2596	...	54.8	...	2313	...	52.5
12	1627	...	77.4	...	2425	...	76.9
Girls							
5	1372	...	39.0	...	1081	...	39.2
8	2536	...	52.2	...	2200	...	53.4
12	1459	...	79.5	...	2519	...	78.9

(6) Infectious Disease.

There has been no school closure during the year from infectious diseases.

The following Table gives an analysis of the cases entered in the School Diseases Register during the year:—

Exclusions during 1932.

Impetigo	...	...	...	...	...	33
Scabies	...	...	...	...	...	155
Other Skin Diseases	...	...	...	...	...	20
Conjunctivitis	...	...	...	...	...	6
Verminous	...	...	...	...	...	7
Blepharitis	...	...	...	...	...	3
Mumps	...	...	...	...	...	20
Chorea	...	...	...	...	...	6
Enlarged Glands	...	...	...	...	...	9
Chicken Pox	...	...	...	...	...	6
Tonsillitis	...	...	...	...	...	3
Diphtheria	...	...	...	...	...	2
Anaemia and Debility	...	...	...	...	...	2
Scarlet Fever	...	...	...	...	...	1
Tuberculosis	...	...	...	...	...	156
Tinea Tonsurans—						
Treated by X-Rays	...	...	...	...	...	27
Treated at Clinic	...	...	...	...	...	20
Other Defects and Diseases	...	...	...	...	...	34
Total ...						510
Total number of children involved:						497

(7) Following-Up.

At the time of Medical Inspection a following-up card is made out for all children requiring treatment for any defects found. If the case is not one requiring Clinic or Hospital treatment the child is followed-up by home visits made by one of the School Nurses.

If the treatment required is beyond the scope of domestic measures the family Doctor or Hospital is advised. Both home and school visits are made in the course of following-up and the case is not relinquished until adequate improvement is obtained.

Children requiring new glasses are followed up by one of the School Nurses attached to the area, until glasses are obtained, and these children and their glasses are re-inspected by the Doctor within three months.

Cases of recovery from Ringworm treated by X-Rays are re-inspected at the Clinics.

All cases recommended for treatment, and those recommended for observation only, form the basis of the Doctor's re-inspection which takes place at a subsequent visit to the school.

The following Table gives a summary of work of the Nurses, in the process of following-up during the year :—

Total number of children visited at home or school ...	18524
Total number of hours spent by Nurses in visiting ...	3919
Number of Re-inspections by School Doctors of Elementary school children	9965

(8) Medical Treatment.

(a) MINOR AILMENTS.

There are many minor ailments amongst school children for which the poor parents in this Borough will not seek medical aid from a private Doctor or Hospital. For such, the Clinics are available and Head Teachers are empowered to send all such children who fall into this category to the School Clinics by means of the Clinic attendance cards which are provided for the purpose.

These minor ailments include such conditions as sores, slight skin affections, impetigo, eczema, scabies, sore eyes and minor cuts and bruises, also slight ear trouble and ringworm.

Table IV., group 1 (page 206), gives the amount of treatment undertaken at the School Clinics, as compared with that undertaken privately.

(b) TONSILS AND ADENOIDS.

Arrangements have been made for the operative treatment of these conditions with the following Institutions :—

- (1) Queen Mary's Hospital, Stratford.
- (2) St. Mary's Hospital, Plaistow.
- (3) The Children's Hospital, Balaam Street, Plaistow.

All cases are previously examined and recommended by one of the Assistant School Medical Officers, and a voucher is given on the appropriate Hospital. The child is also re-inspected after operation.

During the year, 1206 operations were performed under the Authority's scheme and 57 by private practitioner, or otherwise. Seventy-three cases received non-operative treatment, making a total of 1336.

The parent's consent is always obtained before an operation is undertaken.

(c) TUBERCULOSIS.

Treatment of this condition is not undertaken by the Education Committee, but cases are notified, on discovery, to the Medical Officer of Health, and then dealt with under the Council's scheme for the treatment of Tuberculosis. The School Doctors refer suspicious cases to the Tuberculosis Officer by a special card, for examination and report. By this means pre-tuberculous cases are kept under observation, and can receive any requisite preventative treatment.

The number of cases referred to the Tuberculosis Officer during the year was 101.

Provision is made for Institutional treatment of tuberculous children unfit for school life under the above-mentioned scheme of the Council, as follows:—

Tuberculous Children (out of school) having Institutional Treatment.

Langdon Hills Children's Sanatorium	...	...	40
Whipps Cross Hospital	...	...	2
Heritage Craft Schools, Chailey	...	...	5
Sir William Treloar's Home, Alton	...	...	11
Seven Oaks Hospital for Hip Diseases	...	...	3
Alexander Hospital, East Clandon	...	...	1
Royal National Orthopædic Hospital, Stanmore	...	...	1
St. Vincent's Cripple Home, Pinner	...	...	4
Children's Hospital, Cold Ash, Newbury	...	...	1
St. Martin's Hospital, Pyrford, Surrey	...	...	1
Ascot Cripple Home	...	...	1
Kettlewell Home, Swanley	...	...	1
Hayling Island, Convalescent Home	...	...	2
Princess Mary Hospital, Margate	...	...	1

In addition there were 22 out-of-school cases of Tuberculosis at the end of December, 1932.

(d) SKIN DISEASES.

The majority of skin diseases have already been included under the term "minor ailments," and their treatment falls under the arrangements as set out under that heading. There is one skin disease however which requires special mention, and that is Ringworm of the scalp. This condition is dealt with by arrangement of the Local Education Authority with (1) Dr. A. E. Kennedy, (2) The London Hospital. The cases are seen first by one of the medical staff and, after treatment, are re-inspected before re-admission to school.

Since the decease of Dr. Kennedy, the London Hospital has undertaken all the X-Ray treatment.

During the year 27 cases of Tinea Tonsurans (Head Ringworm) out of 47 were treated by X-rays, and 136 cases of Ringworm of the body, were treated at the Clinics.

A total of 237 cases of Scabies were also treated at the Clinics.

(e) EXTERNAL EYE DISEASES.

These comprise sore eyes, blepharitis, slight conjunctivitis, styes, corneal ulcers, etc. Table IV (1) shows that 1,178 such defects were treated at the Clinics, 30 being treated by private endeavour.

(f) DEFECTIVE VISION.

Cases of Defective vision are discovered at Medical Inspection, by teachers, by parents and at the Clinics. In the first place they are all examined by one of the Medical Staff and then referred for refraction. All cases are re-inspected within three months to see if the glasses are suitable. There is a scheme in force whereby glasses are provided at a reduced rate, or free, in cases of necessity.

The following is a report by Dr. Thomas on the work at the Ophthalmic Clinic during the year—

This is an important defect and correcting errors of refraction requires a sound knowledge of Ophthalmology. One has to assure oneself that there is no disease in the eye before deciding that correcting the error of refraction is all that is needed. Each case has to be judged on its own merits, and considerable experience, skill, patience and time are essential to deal with it satisfactorily.

"Educational Myopia" appears to be on the increase and the younger the child the more serious the myopia.

It is doubtful whether the ordinary school curriculum can convert the Educational into the Pathological Myopia, and the two types can only be distinguished by frequent examinations by the School Oculist.

Experience shows that a considerable number of Myopes were Emmetropes, or low Hypermetropes during early school life.

All children with defective vision, eye strain, and strabismus, are referred to the Oculist by the School Medical Officer.

All cases of Myopia are re-examined frequently according to the degree of Myopia.

The co-operation of the Head Teachers is of the greatest possible value in referring early backwardness and disability, that indicate defective sight, to the School Medical Officer; they also see that the children with glasses wear them as ordered.

The following figures set out the work done at the Clinic:—

Cases referred to Oculist	...	...	4229
Number attended	...	...	3584
Percentage Attendance	...	...	84.74
Glasses Ordered	...	...	3015
Number of Clinic Sessions	...	...	418

Table IV, Group II, gives the figures for the Elementary Schools.

(g) EAR DISEASE AND DEAFNESS.

These diseases are usually treated at the Clinics as minor ailments. Parents will not as a rule take their children to have the ears syringed for wax, and running ears involve long and expensive treatment for poor parents.

Minor ear defects to the number of 1,101 were treated at the Clinics, and 60 treated privately. See Table IV, Group I.

The question of providing facilities for ionization treatment will be considered.

The educational treatment of deaf children is provided for at the two Deaf Centres—Water Lane and Frederick Road, with places for 40 and 44 deaf mutes respectively. Arrangements have been made for the pupils at these Centres to be examined annually by an expert Aural Surgeon (Mr. Stoker, F.R.C.S.).

(h) DENTAL DEFECTS.

Dental defects found at Medical Inspection, such as caries and septic gums, are referred to the School Dentists as special cases, if falling within the scope of the Authority's dental scheme, otherwise, with a few exceptional cases, they are referred for Hospital or private treatment.

The Dental scheme as approved by the Board at present comprises the examination and treatment of all children of the 6—8 year period, inclusive. "Specials" of an urgent nature are also treated.

All candidates for the Open Air School at Crosby Road or at Fyfield, or the Ogilvie School at Clacton have their teeth attended to and mouths put in order before entering the School, as also do children due to go to the Summer Holiday Camps, and school children recommended by the Tuberculosis Officer for admission to the Langdon Hills Sanatorium.

There are two Clinics at Stratford (Mr. Dick and Miss Gubb), one at Rosetta Road (Miss Marsden), one at Swanscombe Street (Mr. Percy), and one at Balaam Street (Mr. Heywood).

Miss Marsden and Mr. Heywood have each been allotted an area of schools in which to inspect and treat children of all ages, as suggested by the Board of Education.

The undermentioned Schools come under this Scheme:—

Credon Road Infants'
and Ravenhill Senior.
New City Road.
Ravenhill Junior.
Balaam Street Infants'
and Burke Senior.
North Street.
Stock Street Infants'
and Burke Junior.
St. Andrew's.

Rosetta Road Infants'
and Rosetta Senior.
Russell Road.
Holborn Road.
Shipman Road.
Regents Lane.
St. Joachim's.
Custom House Infants'
and Rosetta Junior.

The following figures for the year show the amount of work done:—

21920 children inspected.
4189 "Specials."
15409 found to require treatment.
10805 given treatment.

The following remarks and comments are abstracted from the individual reports of the Dental Surgeons:—

Mr. Percy reports—

There has been a larger attendance at the Clinic in the past year than heretofore, and more children from the routine inspection have presented themselves for treatment.

At the School for Deaf and Dumb, all cases selected for treatment attended.

A great number of children who were recommended to the various Convalescent Institutions have been specially dealt with.

I have certainly noticed a marked improvement in the oral conditions of the younger children, which I attribute to the early treatment given at the Welfare Centres before school age.

Mr. Dick reports:—

The figures for the year deviate very little from those of previous years, showing that the work is necessarily continued on the same lines. It is to be regretted that such a large number of extractions are required, as this leaves less time for conservative work than is desirable.

The percentage attendance on cards sent out after routine

inspection remains good, which I think indicates an appreciation on the part of the parents and a satisfactory degree of popularity amongst the children, of the service.

"Special Cases" continue to hamper the routine work and can seldom, on account of their urgency, be turned away.

The co-operation of Head Teachers goes further towards making the service popular than is perhaps generally realised and they can and many of them do by their efforts secure a large percentage attendance for treatment. Their efforts are much appreciated, and I have also to thank them for their help at routine inspections.

Miss Gubb reports:—

The work for the year 1932 has been carried out as in previous years, consisting of the Annual Routine School Inspection and followed up by treatment at the Clinic, and varies very little from year to year.

The attendance remains very uniform each year and shows very little variation.

The number of "Specials" also remains very constant and always interferes with the Routine Work.

There is still a dislike amongst some parents to conservative treatment for their children, but gradually they are becoming more easily persuaded to consent to it when the necessity for it and the benefit of such treatment is repeatedly explained to them, they attend the Clinic more readily for advice and explanation on such important matters.

I have again to thank the Head Teachers for their very valuable help and co-operation at the Dental Inspections and the interest they show in helping to secure attendances at the Clinic for advice and treatment.

Miss Marsden reports:—

During the year under review, all the children attending the Schools allotted to this Clinic, were inspected, and treatment given to those who accepted. The attendance of children remained at practically the same averages as last year.

The Edith Kerrison Nursery School was also inspected quarterly.

The objection to conservative treatment still continues, most parents requesting extractions. Unfortunately there seems to be no chance of home visiting and any persuading of parents to accept treatment in that way. A great deal of work seems to be wasted, as very few children use tooth brushes in their homes. I have wondered whether there could be any scheme, whereby children who cannot afford tooth brushes, could obtain them at a cheaper rate.

I should like to thank all Head Teachers for the kind help and co-operation, especially those who have been instrumental in persuading the children to come promptly to the Clinic for treatment.

Mr. Heywood reports:—

In reviewing the work carried out at the Clinic during the past year, an outstanding feature has been, once again, the large number of parents who refused to accept dental treatment for their children. Despite the number of home visits paid, the co-operation of the Head Teachers, and letters sent to the parents by the School Medical Officer, there was a wide difference between the number of "acceptances" and the number referred for treatment.

The number of both permanent and temporary extractions shows a big increase, and the number of fillings remains relatively small. Under the present conditions of widespread oral sepsis in the area, I emphatically feel that this is a matter for congratulation.

SUMMARY OF WORK AT THE SCHOOL CLINICS.

The four School Clinics serving the Borough are as follows:—

- (1) Stratford Clinic, 84 West Ham Lane.
Drs. Thomas and Ison.
- (2) Balaam Street Clinic, Plaistow—serving two areas.
Drs. Lupton and Borland.
- (3) Swanscombe Street Clinic, Canning Town.
Dr. Fitchet.
- (4) Rosetta Road Clinic, Custom House.
Dr. Furniss.

Each Clinic serves a special area of the Borough, and a Nurse is always in attendance during school sessions. The Doctors attend two or three sessions per week, as required.

Certain defects found at routine inspection are referred to the Clinics for treatment or for further examination or observation. The Clinic at Stratford includes two Dental Clinics, and those at Balaam Street, Rosetta Road, and Swanscombe Street each have one Dental Clinic.

Following is a summation of the Medical cases attending the Clinics during 1932:—

New Cases	Total Attendance	Total Discharged
16992	64100	16493

The above figures do not include the work of the Ophthalmic Clinic, which appears separately. Each Clinic also acts as an Inspection Clinic, where cases are seen for further examination or kept under observation.

(9) Open Air Education.

(a) Opportunity is sometimes taken when weather permits of holding classes in the playground. Physical exercises, drill and games are taken in the open air whenever possible.

(b) School journeys to places of educational interest are undertaken during the Summer months.

(c) School Holiday Camps during the Mid-summer Holiday are now an established institution. Their value continues to be increasingly manifest. During 1932, 334 boys attended a School Holiday Camp at Shoeburyness for a fortnight, and at Dymchurch Camp, 202 girls attended for a similar period. The selected children were all previously medically inspected and dentally examined by the staff, special regard being paid to cleanliness, suitability and freedom from contagion. The Camps were visited by a special Committee and one of the School Medical Staff.

Extracts from Reports by Mr. T. Taylorson and Miss L. P. Wise in connection with the School Camps held at Shoeburyness and Dymchurch during the Summer Vacation, 1932, will be found in the Appendix to this Report.

(d) Four schools hold classes during the warmer months in the open air on the flat roofs provided, and certain schools hold classes in the neighbouring parks and recreation grounds.

(e) There is one Day Open Air School at Crosby Road for 90 children from the age of 7 years upwards. The accommodation of the School has recently been increased by the use of the rest room as an additional class room. Junior boys are now admitted to the two lower class rooms. The cases are recommended by the School Medical Staff from their findings at Medical Inspection. During the year 13 boys and 51 girls were admitted and 1 boy and 38 girls discharged.

A long period of attendance is usually required, as the home influences very often detract from the benefit that would otherwise accrue. The children have the advantage of good meals, morning milk, and plenty of rest, as well as lessons in an open air environment. They also benefit by spray baths, breathing exercises and handkerchief and tooth-brush drill.

The scholars are periodically medically examined.

To Miss Davies I am indebted for the following report on the School :—

The year began with 58 children on the roll and ended with 87. An extra class of thirty children has been formed, in charge of an additional teacher. To accommodate these children, and to improve conditions generally, two new cloak rooms have been added, each fitted with blanket racks and electric apparatus for heating and drying purposes.

The School now provides for boys up to the age of eleven, and those already admitted have settled down well, and have plainly improved, both in health and spirits.

The introduction of light green movable desks and chairs has added considerably to the brightness of the School, and the colour provided by the warm red and blue jerseys of the girls, and the grey jerseys of the boys, helps largely in giving it that happy atmosphere, so necessary in the treatment of debilitated, spiritless children.

School work necessarily at first, plays a secondary part, but towards the end of their stay here, the benefits of fresh air, regular and suitable meals (three meals a day are provided) quiet and ordered rest, and insistence on personal cleanliness, are very evident in their awakened or renewed zest for the usual childish games and occupations, and a different attitude altogether towards their school work. Difficulties are met and tackled, and a real desire to learn replaces the indifference and apathy of their former behaviour. The school garden and the activities connected with it, play a large part in this transformation, especially in the inculcation of self-respect, of respect for others, of self-confidence, and of endurance.

School functions are eagerly looked forward to and thoroughly enjoyed. A Parents' Day was held in April, to which seventy parents came, and the "Old Girls' " re-union was well attended in July.

Mr. J. H. Jacques, the Committee's Architect, reports on improvements carried out during the year at the school as follows :—

The School was re-decorated and the west sides of the two class room shelters and the Rest and Dining Rooms were enclosed with glazed folding sashes. The interiors were re-decorated in brighter colours, and new and improved folding desks and chairs, coloured in green cellulose paint were provided.

(f) The Local Authority retains ten beds at the Ogilvie School of Recovery, Clacton-on-Sea. The selected cases are delicate girls found at Medical Inspection, or notified by the Head Teacher to the School Medical Officer. The children are examined prior to admission, and periodic reports are received from the school. During the year nine girls were admitted and ten returned, all considerably benefited.

(g) The Authority has a Residential School for 80 Boys and 60 Girls, situated at Fyfield, Ongar, Essex. This School provides all the essentials for out-door education, comprising fresh air, abundant food, ample rest, physical exercises and games in the open. The children are selected by the School Medical Staff, and examined before admission. They are also visited by the Chief Assistant School Medical Officer once a fortnight, when all the boys and girls are re-inspected, and height and weight noted.

During the year 196 boys and 165 girls were admitted, and 192 boys and 166 girls discharged. The discharged cases are re-inspected by the relevant Assistant School Medical Officer a few months after leaving the Institution, to see if the improvement is maintained. All candidates for Fyfield have their teeth put in order, and any necessary operation on the throat performed prior to admission.

Improvement as a rule shows itself soon after admission, owing no doubt to a better régime of hygiene obtaining than exists at their homes. A local practitioner, Dr. David, is called in for emergencies or sudden illness, when they arise.

Out of 293 cases sent for re-inspection following their discharge from Fyfield, 19 did not attend owing to various reasons. Out of the 274 examined, 221 showed continued improvement, whereas 53 had had inter-current ailments, and their present condition was not considered so satisfactory.

The following is a brief account of the daily routine at the School:—

The children rise at 7 a.m., wash, clean boots, and are served with breakfast at 8. Then comes inspection, and any necessary attention by the nursing staff. From 9.10 to 11.50 a.m., and from 2.40 to 4.35 p.m. the children attend classes under properly qualified teachers, conducted in classrooms specially constructed for open-air school work. These classrooms are capable of being opened to the air on three sides, and are fitted with a hot water heating system for use in very cold weather. Under suitable conditions classes are often held outside in a meadow or under the shelter of some trees.

Dinner is served at 12, and this is followed by the "Rest" of 1½ hours, which is taken on a special chair in the large open-sided rest-room, under the supervision of one of the nurses. The children are bathed once a week, and great attention is given to the cleanliness of the teeth and personal hygiene generally.

The food served is ample in quantity and of the best quality, and includes fruit and fresh vegetables brought daily from the school gardens.

On arrival at the School each child is well and comfortably clothed, the outfit including good boots or shoes, woollen under-clothing, woollen jumpers, flannel suits for boys and blue gym frocks for girls, and, for winter use, heavy reefer overcoats.

There is a large playing field where cricket, football, netball and other games are played; while on winter evenings entertainments are given, and indoor games and a good library are made use of.

After a light supper the children retire to the dormitories about 8 p.m. and, as a result of a busy day under healthy conditions, are soon sleeping soundly.

WEEKLY MENU FOR SUMMER MONTHS.

	Breakfast.	Lunch.	Dinner.	Tea.	Supper.
Sunday	Cocoa, Bread and Butter, Jam, Fruit or Marmalade.	—	Roast Beef, Cabbage and Potatoes, Stewed Fruit and Custard.	Tea, Bread and Butter, Cake.	Milk, Bread and Dripping.
Monday	Tea, Porridge, Bread and Butter, or Dripping.	Milk.	Cold Meat, Beetroot, Potatoes, Suet Pudding with Syrup, Jam or Fruit.	Tea, Bread and Butter, Jam or Fruit.	Milk, Bread and Dripping.
Tuesday	Tea, Grape Nuts, Bread and Butter.	Lemonade or Milk.	Stewed Steak, Carrots and Onions, Potatoes, Milk Pudding, Fruit in Season.	Tea, Bread and Butter, Jam or Fruit.	Cocoa, Bread and Butter.
Wednesday	Tea, Fish, Bread and Butter.	Milk.	Meat Pudding Cabbage and Potatoes, Raw Fruit or Fruit and Custard.	Tea, Bread and Butter, Buns.	Milk, Bread and Butter.
Thursday	Tea, Grape Nuts, or Fruit, Bread and Butter.	Milk.	Stew, Carrots and Onions, Potatoes, Milk Pudding, Lemonade.	Tea, Currant Bread.	Milk, Bread and Dripping.
Friday	Tea, Boiled or Scrambled Eggs, Bread and Butter.	Milk.	Fish, White Sauce and Potatoes, Fresh or Dried Fruit, Suet Puddings.	Tea, Bread and Butter, Jam or Fruit.	Cocoa.
Saturday	Tea or Cocoa, Porridge or Fruit, Bread and Butter.	Milk or Lemonade.	Hot or cold Ham, Hot or cold Mutton, Two Vegetables or Potatoes and Salad, Jam Tarts or Blancmange and Stewed Fruit.	Tea, Bread and Butter, Jam or Fruit.	Milk.

Lettuce, Tomatoes, Radishes, for dinners and teas, when in season.

Fresh Fruit for breakfasts and teas, when in season.

All Milk used is Grade "A."

The Menu for the Winter months is very similar, except that there is less fruit and lettuce, etc.

(10) Physical Training.

There is no organiser of physical training for the Elementary Schools, but drill and games and physical exercises are supervised by individual teachers in various schools.

There is a well organised Sports Association, composed of members of the Education Committee and Teachers, who organise and superintend various sections of games, such as swimming, football, boxing, netball and cricket.

Scholars for whom an opinion is required as to fitness to participate in these games are referred for examination. During the year some 123 boys were examined, two being found unfit.

(11) Provision of Meals.

West Ham being largely a necessitous area, the Authority have always regarded the provision of meals to needy and under-fed children as one of their most important duties. The scheme has now been in operation several years, and is continued over the school holidays. At present there are ten Dining Centres under the superintendence of Miss Anderson. The Centres are clean and well managed; they have been provided with First Aid boxes, and paper handkerchiefs are supplied for children attending the Centres.

The Menus, which are arranged by the Superintendent and approved by the School Medical Officer, are drawn up on dietetic principles. Full advantage is taken of each season's supply of fresh fruit and vegetables, this giving the children every possible variety. Special attention is given to the very young children attending the School Dining Centres, and the requirements of the children at the Knox and Grange Road Special Schools, and the Crosby Road Open-air Day School are fully studied.

The following figures summarise the extent of the undertaking for the year under consideration:—

	Breakfasts	Dinners
School Dining Centres ...	548,943	977,985

These figures show a great increase over those of 1931, which were Breakfasts, 354,564 and Dinners, 673,245.

(12) School Baths.

Spray baths are provided at four Elementary Schools, viz:—Gainsborough Road, Rosetta Road, South Hallsville and Pretoria Road, and also at the Special School at Knox Road and the Fyfield Open Air School. Spray baths will also be provided at the new Tollgate School.

Selected children, with the consent of the parents, are conducted in rota to the Corporation Slipper Baths at Balaam Street, Jupp Road, Plaistow Road, and Silvertown. This takes place in school hours.

Facilities are afforded for swimming instruction in school hours at the following baths:—Balaam Street, Jupp Road, Silvertown, Dockland Settlement, and Plaistow Red Triangle Club. Men and women instructors are engaged for training and supervision.

The number of school children who attended the Corporation Washing Baths under the Committee's scheme during the year was as follows:—

		Boys		Girls
Balaam Street	...	5246	...	4773
Jupp Road	...	5556	...	2858
Silvertown	...	1592	...	1414
Fen Street	...	3992	...	2730
Plaistow Road	...	1312	...	1011
		<hr/> 17698	...	<hr/> 12786

(13) Co-operation of Parents.

The co-operation of parents continues to be an essential factor in the success of the School Medical Service. Without such co-operation and interest, a good deal of work would be futile. It is becoming increasingly recognised that the good work of the Education Committee is purely in the interest and welfare of the child, and advantage is largely taken of it by parents generally. There were a few exceptions this year; the following schools show cases where parents for various reasons objected:—

School		Boys	Girls	Infants
Abbey	...	—	3	1
Burke Senior	...	—	2	—
Balaam Street	...	—	—	1
Burke Junior	...	1	1	—
Stock Street	...	—	—	1
Canning Town	...	—	—	1
Denmark Street	...	—	—	1
Upton Junior	...	—	1	—
Elmhurst Road	...	—	—	1
Frederick Road	...	—	1	—
Godwin Road	...	2	1	2
Harold Senior	...	—	3	—
Holy Trinity	...	1	—	—
Hilda Road	...	1	—	—
Manor Road	...	1	1	—

School				Boys	Girls	Infants
Napier Road	...	...	—	—	—	1
New City Road	...	...	—	—	1	—
Odessa Road	...	...	—	—	1	4
Ravenhill Junior	...	...	3	1	—	—
Ravenhill Senior	...	...	—	—	2	—
Regent Lane	...	...	—	—	3	—
Rosetta Junior	...	...	—	—	1	—
Silvertown	...	...	1	2	—	—
St. Antony's	...	...	2	—	—	1
St. James'	...	...	1	4	—	—
St. Margaret's	...	...	—	—	2	—
Upton Lane	...	...	—	—	—	4
Water Lane	...	...	1	—	—	—
West Ham Park	...	...	1	—	—	—
Whitehall Place	...	...	1	—	—	1
(Senior Mixed)						

The percentage of parents or guardians present at the Elementary School Examinations (Routine and Special) was 82.

(14) Co-operation of Teachers.

The continued co-operation of the Head Teachers is a great factor in the School Medical Service. The teachers help in many ways. They prepare the lists for examination and select "specials" to be examined. They urge the attendance of parents, and render many services in connection with the Nurses' visits in the process of following-up. They also draft special cases to the Clinics for minor ailments, and interview many parents on the subject.

Their scope in treatment is of course limited to seeing that a child attends regularly the examination and Clinic, and urging parents to persist in treatment, or otherwise obtain treatment where advised.

They also put into action those special recommendations of the Doctor after his visit of routine examination.

In many matters connected with the School Medical Service valuable co-operation has been given by the Committee's Inspectors, Mr. T. Wall and Miss C. M. Bott.

The following list gives defects or recommendations notified to Head Teachers, which have a bearing on the educational career of the child:—

Vision, 1800.	Defective Speech, 4.
Physical Exercises, 40.	Mental Condition, 4.
Defective Hearing, 29.	Nervous System, 1.
Breathing Exercises, 1.	Skin Disease
Heart (Physical	(Verminous, etc.), 10.
Overstrain), 99.	Other Defects, etc., 25.

(15) Co-operation of School Attendance Officers.

There is a complete co-ordination between the School Medical Service and the School Attendance Bye-Laws Department, supervised by Mr. G. F. Crane.

The cases concerned involve school attendance, cleanliness, unfitness for school or for employment, and out-of-school cases.

The School Attendance Officer makes a daily return of all children out of school on medical grounds, and cases of infectious disease are visited by Sanitary Inspectors.

I consider the work done by the School Attendance Officers in connection with the Health Services of the Borough to be of great value.

The cases brought to the notice of the Public Health Department by the School Attendance Officer during the year were as follows:—

Measles (including German Measles), 2346.	Chicken Pox, 767.
Whooping Cough, 626.	Mumps, 537.
Tonsillitis, 365.	Other Diseases, 1342.

(16) Co-operation of Voluntary Bodies.

The following Societies or Associations are in constant touch with the School Medical Department re the welfare of individual children.

- (1) Invalid Children's Aid Association.
- (2) Invalid and Crippled Children's Society.
- (3) Central Association for Mental Welfare.
- (4) National Society for the Prevention of Cruelty to Children.
- (5) The Almoners of a large number of voluntary hospitals.

The first two Societies notify the School Medical Officer of such children coming under their notice who require convalescence or new or altered surgical instruments. The Education Committee assists in the purchase of instruments, or alteration of same.

During the year, 296 school children were sent away for varying periods of convalescence.

During the same period, 30 children were examined, and the parents assisted in the purchase of new Surgical Instruments or alterations to same.

Occasionally the Local Officer of the N.S.P.C.C. renders help in the case of recalcitrant or neglectful parents or guardians.

The Central Association for Mental Welfare interests itself in children of school age who are mentally defective, and also in their after-school welfare.

(17) Blind, Deaf, Defective and Epileptic Children.

(a) The returns of these children are obtained from two sources. The School Attendance Department has a complete list of all out-of-school cases, and of those already placed in various institutions. These cases are notified to the School Medical Officer as they arrive, and are followed up by a Special Nurse. They are also examined (by the Chief Assistant School Medical Officer) to ascertain their fitness for school or otherwise. Some go back to the Elementary Schools, many go to the Special Schools, but the majority are found unfit for school.

The permanent "out-of-school cases" are provided with a special card, and are vouched for from time to time by a Nurse detailed for the purpose. Any changes in their condition justifying re-examination are then brought to light.

Besides the above, an annual census is taken at the end of the year of all exceptional children submitted by Head Teachers. These are examined by the Medical Staff, and cases unfit for the ordinary school are referred for further consideration.

(b) A Special Nurse is employed following up all mentally defective children who are not in the schools. Briefly, all out of school cases are periodically examined to ascertain their fitness for the Special Schools, and followed up at home to urge any treatment advised.

Two voluntary After-Care Committees sit to consider the welfare of the children who have recently left the Special Schools.

The following reports have been received regarding children who have left during the year :—

KNOX ROAD SPECIAL SCHOOL.

Physically Defective.

- One at work with Cane and Wicker Ware Manufacturers.
- One at work with Furrier.
- One at Domestic work.
- One in School for Blind.
- One in Home for Epileptics.
- One at Open Air School.
- One in Children's Home.
- One Removed from Area.
- Two Unfit for School.
- Six Returned to Ordinary School.

Mentally Defective—

One Employed at Leathercloth Factory.
One Employed at Button Factory.
One Employed at Saw Mills.
One Employed at Dye Works.
One Employed at Sweet Stall.
One Employed as Packer.
Five Removed from Area.
One Returned to Ordinary School.
Three Unfit for School.
One Deceased.

Mr. J. H. Jacques, the Committee's Architect, reports on improvements carried out during the year at the School as follows:

An additional cloak room and lavatory was added at the School and some new furniture provided.

GRANGE ROAD SPECIAL SCHOOL.

	Mentally Defective	Physically Defective
Admitted to Institutions & Hospitals	1	3
Removed from Area	—	1
Permission to leave to take up work	3	3
Permission to leave to take up training	—	4
Age limit of 16 years	7	3
Unfit for School—Exclusions ...	1	3
Returned to Elementary Schools ...	—	7

Miss Gardner reports:—

There have been two After Care Committees during the year. No child leaving at the age limit of 16 years has been placed at work this year. This is partly due to the great present trade depression, and partly to the fact that the mentally defective children were of a low grade on the whole. One physically defective boy has continued his studies at the "Livingstone Institute" and has recently taken examinations in commercial work.

Some children leaving us at 14 years, with permission of the School Medical Officer, have fared better, but we fear even these in many cases are merely "blind-alley" jobs, for our children are so often turned away when they reach 16 years.

Municipal Employment seems the only possible future cure for this general unemployment of our own Defective Children, upon whom the Borough has spent so much.

We are glad to note that seven physically defective children this year have so benefited by hospital and school care that they have been found "fit" to return to work with their normal fellows in the Elementary Schools, and we hear good reports of their progress generally.

Neither of the boys who have taken up the Training in Shoemaking under the auspices of the Shaftesbury Society have obtained work. Both our own and the Shaftesbury's Centres in Shoemaking and Repairing are rather "behind times" now. We both need the addition of electrical lathes, brushes and machines to fit the boys with knowledge, for readiness for the modern Shoemaking Firms.

The girls generally take up Factory or Domestic work. A few physically defective girls follow up their needlework trends, and a few mentally defective girls and boys have found their bents in restaurant work—starting in the kitchen in most cases.

Three of the four physically defectives who have seriously taken up clerking in the recent years are in employment and doing well.

Many of the ineducable cases of the Mentally Defective Department are in urgent need of Institutional Care, or even of "Occupational Centres" if only "Funds" permitted. A travelling teacher to their homes regularly might help considerably with these cases.

Despite these rather depressing comments, these defective children greatly benefit by the Special School life here; for they improve physically, educationally, mentally and socially by the very contact with one another and the happy atmosphere, so therefore, they are more fit to take a place in the world as they grow older, and become worthy citizens, as the visits of many of our old pupils prove to us.

From the following table we get a rather interesting set of percentages. Of the fifty-three physically defectives and seventy mentally defectives that have been followed up the last preceding "three year" period, this gives the results:—

Department	Working or in Training	At Home Helping, Unfit or Unemployed	In Other Schools or Removed	In Institutions and Hospitals for Treatment and Training	Deceased	Returned to Special School after Treatment in Hospital, etc.
Physical Defective	24.53%	13.2 %	37.73%	7.54%	5.7 %	11.3 %
Mental Defective	14.3 %	30.0 %	41.4 %	12.9 %	1.41%	

The provision at the Special Schools, Grange Road and Knox Road, is as follows:—

			Mentally Defective	Physically Defective
Grange Road	...	...	90	60
Knox Road	...	...	93	83

Work in connection with After-Care Committees consists of

- (1) Interviews with parents and children by Head Teachers.
- (2) Investigations by two After-Care Committees in each half of the Borough.
- (3) Visits of Mr. Tarr, the Juvenile Employment Officer and Secretary of the After-Care Committee.

BLIND CHILDREN.

The Authority itself has no provision for the education of blind or semi-blind children — a few of the latter attend the Special Schools. The question of Myopic Classes is still under consideration.

The following is a list of Institutions where West Ham children are boarded:—

Barclay Home for Blind, Brighton	...	7 girls
Brighton School for Blind Boys	...	9 boys
East London School for Blind	...	3 boys, 1 girl
Swiss Cottage for Blind	...	1 boy
Forest Gate Hospital	...	1 boy (M.D.)
White Oak School, Swanley	...	1 girl
German Hospital, Dalston	...	1 girl
Two children are not placed.		

DEAF CHILDREN.

The Authority has Deaf Centres at Water Lane and Frederick Road with places for 40 and 44 deaf mutes respectively. These schools are visited annually by an Assistant School Medical Officer, and arrangements made for an annual examination by a Specialist Aural Surgeon.

A few of the cases belong to the partially deaf class, and one or two are aphasic cases. Children from outside areas are admitted by arrangement with the Local Education Authority, when vacant places permit.

Institutional cases:—

Royal School for Deaf and Dumb, Margate, 1 girl.
St. John's Institution, Boston Spa, 1 boy.

After-Care Committee Reports of West Ham Leavers during 1932:—

Water Lane Deaf Centre:

Two girls left the school and both are helping at home at present.

Frederick Road Deaf Centre:

One girl in Domestic Service.

One boy is general "odd jobber" within and without house in country.

One girl commencing work in Tie making factory.

Two girls unemployed.

EPILEPSY.

Table III. (d) gives a summary of the epileptics found among school children during 1932. Only the severe cases are excluded from school. A number of West Ham epileptic children are boarded out at Institutions, as follows:—

St. Elizabeth's School for Epileptics, Much Hadam—1 boy,
4 girls.

Lingfield Colony for Epileptics—1 boy.

Forest Gate Hospital—1 boy, 1 girl.

There is one case of severe epilepsy out of school.

STAMMERERS.

Throughout the year special classes of six weeks' duration have been carried on at North Street School.

The classes, which are under the supervision of Mrs. Wardhaugh, have been very successful, and the results have been promising. There were twenty-six cases where sufficient improvement was not made during the first Course; these were recommended for repeat Courses.

The children are medically examined before and at the end of the course. During the year 19 boys and 6 girls attended the first classes for stammering children, 19 boys were taking the second course, 4 boys a third course, 4 boys a fourth course, and 1 boy a fifth course.

(18) Nursery Schools.

The Authority has two Nursery Schools, one in the North and one in the South of the Borough on sites adjoining Abbey and Rosetta Road Schools.

The following are the details of organisation:—

Ages of Admission.

Children are admitted between the ages of 2 and 5 years, in order of application.

Hours of Attendance.

The Schools are open on each school day from 8.30 a.m. to 4.45 p.m.

Holidays.

The holidays are the same as for Elementary Schools.

Medical Inspection.

The children are medically examined on admission, or as soon after as possible. A School Nurse visits at frequent intervals, or daily when necessary. An Assistant School Medical Officer undertakes a quarterly medical inspection of all children.

Medical Treatment.

No charge is made for the treatment of minor ailments.

A Blanket is supplied to each child.

The Committee have engaged the services of a Needlewoman to make the children's overalls and other necessary articles.

Meals.

Milk and Rusks are provided during each morning, in addition to a mid-day meal, at an inclusive charge of 1s. 8d. per week, subject to reduction or exemption in accordance with the Council's scale in the case of necessitous children.

The supply of meals is under the direction of the Superintendent of the School Dining Centres.

Winter :

MENU (DINNERS).

Summer :

	1st week.	2nd week.		1st week.	2nd week.
Monday	Irish Stew, Greens. Rice or Tapioca Pudding and Jam.	Veal stewed with Carrots and Turnips. Potatoes. Rice Pudding and stewed Apricots.	Monday	Stewed Mutton Potatoes, Greens. Semolina Pudding.	Minced Roast Mutton, Potatoes and Greens. Rice Pudding and Jam.
Tuesday	Gravy Soup, containing vegetables, celery, etc. Rusks. Steamed Marmalade Pudding and Sauce.	Cottage Pie, Potatoes, Greens. Baked Swiss Apple Pudding	Tuesday	Mixed Vegetable Soup, Rusks. Steamed Marmalade Pudding and Sauce.	Lentil and Potato Pie with Tomatoes or Lentil and Tomato Puree and Rusks. Sponge Cake Pudding.
Wednesday	Minced Roast Mutton, Potatoes, mashed Turnips or Parsnips. Stewed Apples and Custard.	Mock Kidney Soup (made with liver). Potatoes. Steamed Ginger Pudding.	Wednesday	Grated Cheese, Potatoes, Tomatoes, Lettuce Salad, and Ryvita and Butter. Baked Cottage Pudding.	Buttered Tomato, Eggs, and Green Salad or Egg and Tomato Salad, Brown Bread and Butter. Banana Custard.
Thursday	Lentil and Potato Pie, Baked Tomatoes or Tomato Sauce. Chocolate Blanc Mange.	Minced Roast Leg Mutton, Potatoes, Parsnips or Carrots.	Thursday	Shepherd's Pie, Baked Tomatoes. Chocolate Pudding.	Veal Broth Soup made from Bone Stock and containing young carrots, turnips and onions with Mashed Potatoes or Dry Toast. Fruit Mould.
Friday	Steamed or Baked Fish, Parsley Sauce, Mashed Potatoes. Steamed Treacle Pudding.	Fish Pie. Steamed Sultana Pudding.	Friday	Fish baked in Milk, Potatoes, Green Peas. Custard and Stewed Fruit.	Kedgerie, Spinach or Young Greens. Ginger Pudding or Ginger Cake.

In addition a little fresh fruit will be given every day after the children have had their afternoon rest.

A milk pudding is provided for the tiny ones, when suet pudding is on the Menu.

Description of the Buildings.

The Committee's Architect (Mr. J. H. Jacques) has kindly supplied the following particulars:—

“THE EDITH KERRISON Nursery School is built on what was the School Gardens, at the rear of the Rosetta Road Infants' School; the site adjoins the Beckton Road Recreation Ground, and is secluded and yet easy of access.

The buildings consist of three large rooms, facing South, to accommodate 40 children each. At the rear of these rooms is a corridor with a Bathroom, two Cloak-rooms and two Offices, easy of access from the main rooms. At right angles to the main rooms are the Head Teacher's Room, the Main Entrance, Kitchen, Store Rooms, Staff Room, and Isolation Room. Around the buildings is a paved space for playground in any weather, with a sandpit, and in front of the buildings, at a lower level than the paved playground, is a grassed playing space. Trees have been planted along the South and East boundaries.

The buildings are constructed with a steel framework on a concrete base, filled in with studding and weather boarded on the outside, and covered with asbestos sheeting on the inside, the roof being covered with rough boarding and asbestos slabs. The front of the Main Rooms is filled in with glazed framing, most of which can be thrown open, as is also the rear of the rooms backing on the Corridor. The Bathroom has tiled walls, with asphalted floor and is fitted with a small bath and four sink baths, also four lavatory basins. There are also two lavatory basins in each Cloak-room.

The Domestic Hot Water Supply and Heating are from the basement in the adjoining School Clinic buildings; the Cooking is by gas, and the Lighting by electricity.

THE REBECCA CHEETHAM Nursery School is built on a site at the rear of the Abbey School, at the end of Village Street, leading off Marcus Street, and is practically the same as the Edith Kerrison School, except that the whole of the Heating, Lighting, and Cooking are done by Electricity.”

In both these Schools, the arrangements for cooking are working satisfactorily, and the buildings, which are of an experimental character, seem to be well adapted for the purpose. In

future Nursery Schools, however, it will be well to consider giving sanitary and cloak room accommodation for each room separately, also a large room should be provided, or sliding and folding partitions, so that two rooms can be made into one, for assembly or other purposes, also more store room accommodation for toys, beds, etc., should be provided.

Medical Inspection is carried out, and the same facilities provided, as in the Elementary Schools.

The following reports have been received on the Medical and Dental examinations:—

THE EDITH KERRISON NURSERY SCHOOL.

This School has now completed its second year. It was opened in August, 1930, and the first medical inspection was carried out in September of the same year. At first the examinations were held monthly, but after June, 1931, they were held quarterly. The following reports relate to the four examinations carried out during the year 1932.

Examinations	Boys examined	Girls examined	Total	Parents present	Number Defective	Percentage of Defects
March ...	53	56	109	92	22	20.1
June ...	47	53	100	86	20	20.
September ...	53	56	109	81	24	22.9
December ...	51	61	112	100	25	22.3

During the June term there was an epidemic of both Measles and Chicken Pox. The children recovered from these diseases in a remarkable manner and the after-effects were very few. Quite a number of the children had Measles and Chicken-pox together.

At the December examination the condition of the children on the whole was good—all being examined with the exception of eight. These latter were out of school with the following conditions—one with Whooping Cough, one with Diphtheria, one with Pneumonia, the remainder with Bronchitis. The chief defects encountered at this time of the year are respiratory diseases, and nose and throat conditions which, to a large extent, co-exist.

There is complete co-ordination between the Headmistress, Miss J. E. Cass, and the School Medical Staff. Any child requiring attention is sent to the neighbouring School Clinic (Rosetta Road) where any condition found to require treatment is promptly dealt with.

I am indebted to Dr. Furniss for the following histories of Nursery School cases:—

Boy: first examined at the Nursery School 1930, when aged 2 years 11 months. Height 36 inches, Weight 39.5 lbs. He was found to be rickety—curving of tibiae, large head, protuberant abdomen, anaemic, chest catarrhal. Tonsils were slightly enlarged, adenoids probable. He dribbled badly.

Advised orthopaedic treatment for the rickety deformities and kept under observation for nose and throat condition.

He made progress as noticed at each quarterly medical examination. In 1931 arrangements were made for his tonsils and adenoids to be removed, as this condition got worse. The operation was performed with good results.

When he left the Nursery School, 1932, he was a perfect specimen of happy boyhood. Height 44 inches, Weight 52.5 lbs. Limbs straight, chest clear, good colour, mentally alert, no dribbling and in excellent condition.

Boy: first examined at the Nursery School 1930, when aged 2 yrs. 6 mths. Height 34 inches, Weight 29 lbs. Chest catarrhal, tonsils enlarged, nasal catarrh, dribbled, speech defective, mentally backward and anaemic. A poor type of child. Advised tonsil and adenoid operation, which was carried out successfully. Advised regarding the chest condition. The boy made good progress as evidenced at each inspection. The bronchitis cleared, the catarrh and dribbling ceased, the mental condition definitely improved. At the last inspection at the Nursery School, 1932, when aged 4 years 6 months, his weight was 40.5 lbs., and his height 40 inches, and the boy was quite normal in every way.

Girl: first seen at Nursery School 1930, when aged 2 years 4 months. Height 35 inches, weight 34.5 lbs. Found to require treatment for severe bronchitis and observation for slight tonsillar enlargement and slight adenoids. The child made good progress in her general condition, the bronchitis cleared and the lungs remained clear. The nose and throat condition also cleared up. When last seen at the Nursery School (4 years 9 months), her height was 41.5 inches and her weight 47.5 lbs. A fine girl.

Girl: first seen when four years old, 1930. Height 38 inches, weight 29 lbs. Anaemic, catarrhal and debilitated. Tonsils enlarged, discharging right ear, suffers from insomnia. Advised tonsil and adenoid operation, which was satisfactorily performed. Treatment at school clinic for otorrhoea. Ultra-violet radiation treatment for insomnia and general debility. Made continued progress. At the last examination at the Nursery School, when aged 5 years, 1931, her height was 42.5 inches, weight 40 lbs., appetite good, sleeps well, ear clear, active and good colour. General condition excellent.

It may be mentioned that many more cases showing as good results as those quoted could be detailed.

Miss Marsden reports on the Dental Inspection and treatment at this School as follows:—

This School was inspected quarterly. It is very encouraging to see that there is a decided improvement in the mouths of these children. Parents seem to be taking more interest.

I should like to thank Miss Cass for her very great help.

REBECCA CHEETHAM NURSERY SCHOOL.

During the year eight visits were made to the Nursery School with the object of carrying out medical inspection. Four visits at three monthly intervals were made for the purpose of conducting a complete examination of every child in attendance, while the intermediate visits were concerned with the re-inspection of those children found defective at the previous examination.

Total number of children inspected	...	...	350
Number of defects found	...	...	147
Total number re-inspected	...	...	89
Special cases	...	...	12

The percentage of defects needing treatment was 45, only 9 per cent. of the total being due to malnutrition. Enlarged Tonsils and Adenoids requiring operative measures amounted to 12 per cent. of total defects. The personal hygiene of the children was remarkably good, there being only 15 children out of the 350 examined who required some cleansing. This satisfactory condition is due to the untiring efforts of Miss Whittingham and her staff in the care of the children, and their efforts in obtaining the interest and co-operation of the parents.

Miss Gubb reports on the Dental Examination and Treatment at this Nursery School as follows:—

The School was inspected twice during 1932.

All the children requiring treatment were referred and subsequently treated at the Clinic. The Dental condition of these children was very satisfactory as a whole. The majority of the treatments being conservative for the preservation of the 1st and 2nd milk molars in the endeavour to keep these important teeth for their allotted time in the jaw and until such time as their permanent successors are due to erupt.

A few children required extractions for septic conditions of the teeth.

The jaw development was good in most of the children and the eruption of the teeth normal for their respective ages. Evidence of the pernicious habit of "Dummy" and "Thumb-sucking" was already present in a small number of children, and the mothers were advised to discontinue the habit.

I have to thank Miss Whittingham for her kind co-operation and help at the inspections and in securing the attendances at the Clinic for treatment, and for her interest in the Dental welfare of the children.

(19) Higher Educational Institutions.

The Institutions referred to here comprise—

- (1) The Municipal College (Provided by the Authority).
- (2) The West Ham Secondary School (Provided by the Authority).
- (3) St. Angela's High School for Girls (Ursuline Convent) (Aided by the Authority).
- (4) The Plaistow Secondary School (Provided by the Authority).
- (5) The West Ham High School for Girls (Aided by the Authority).

MUNICIPAL COLLEGE.

The Local Authority undertakes the Medical Inspection of certain students in attendance at this College, provided by them. The students examined are (1) Junior Courses Engineering, first and second year (2) Trade School for Girls (a) Preparatory (b) Dressmaking, first and second year (c) Cookery, first and second year (3) Junior Art Trade School for Boys and Girls.

Two visits are made during the year, in April and September, and re-inspections are made of examinees from each previous medical inspection.

The examinations are fuller in detail than obtain in the Elementary Schools, colour vision, head and chest measurements, and other enquiries incidental to the age period being noted.

The procedure of following-up by Nurses' visits and re-inspection by the Assistant School Medical Officer is the same as in the Elementary Schools. The School Clinic and Hospital arrangements for the operative treatment of Tonsils and Adenoids, the School Oculist and the X-Ray Specialist are available if required.

The arrangements for recovering the cost of treatment from parents is undertaken by the School Attendance Department, the scale of charges being in accordance with the schedule of income adopted by the Authority.

Three separate inspections were carried out during the past year, with the following results, viz. :—

Total number inspected (123 boys, 92 girls)	...	215
Total number of defects found	...	52

The majority of the above defects were visual, and includes those either requiring glasses or change or renewal of glasses, the remainder being made up as under :—

Defects of Vision	...	40
Skin Diseases	...	1
Enlarged Tonsils and Adenoids	...	6
Anaemia	...	5
		—
	Total ...	52
		—

The general health and stamina of the pupils was very satisfactory, the majority being well grown and well developed.

Thanks are due to the Principal and Staff of the College for their kind and efficient co-operation during the Medical Inspections.

SECONDARY SCHOOLS.

All the Scholars in the West Ham Secondary, and Plaistow Secondary Schools are medically examined annually, in addition to which the Assistant School Medical Officers make one visit a year for the purpose of re-inspecting those pupils found with defects at the previous examination.

The procedure of following-up by Nurses' visits is the same as in the Elementary Schools.

The girl students in these Schools are medically examined by a Lady Doctor.

Every facility provided by the Authority for the treatment of children is available for these pupils. Many of the pupils, however, have their defects remedied privately. This treatment is obtainable by all the scholars, i.e. scholarship holders and fee-payers.

The Department responsible for recovering the cost of treatment from the parents is the Bye-Laws Department of the Education Officer, and the work is entrusted to the Attendance Officers through the Superintendent of Visitors. The Education Committee have drawn up a scale of charges to be applied in accordance with a scale of income.

WEST HAM SECONDARY SCHOOL.

All the pupils were medically examined during the months of September and October. The following is a resumé of the examination.

Number Examined		Number Defective	
Boys	Girls	Boys	Girls
349	240	68	81

Percentage Defective: Boys, 19.48; Girls, 33.75.

Chief Defects referred for Treatment and Observation.

Malnutrition	7	Other Nose and Throat	
Other Skin Diseases ...	14	Conditions	6
Scabies	1	Oral Sepsis	2
Defective Vision	117	Organic Heart Disease ...	6
Defective Hearing	1	Functional Heart Disease	1
Otitis Media	7	Anaemia	3
Other Ear Disease	1	Bronchitis	1
Enlarged Tonsils	17	Spinal Curvature	3
Enlarged Tonsils and		Suspected Pulmonary T.B.	1
Adenoids	1	Other Defects and Diseases	7
Adenoids	2	Other Deformities	3

One must stress the great interest taken in the work of medical inspection by the Principal, Dr. Churchill. He and his Staff render valuable assistance to the School Medical Department.

PLAISTOW SECONDARY SCHOOL.

All the pupils were medically examined during the year. The following is a resumé of the examination.

Chief Defects referred for Treatment and Observation.

Number Examined		Number Defective	
Boys	Girls	Boys	Girls
295	190	53	38

Percentage Defective: Boys, 17.8; Girls, 20.

Malnutrition	...	...	2	Oral Sepsis	...	...	4
Skin Diseases	...	...	8	Organic Heart Disease	...	...	5
Scabies	...	...	2	Functional Heart Disease	...	...	2
Defective Vision	...	...	80	Anaemia	...	...	1
Squint	...	...	3	Bronchitis	...	...	3
Conjunctivitis	...	...	1	Non-Pulmonary T.B.			
Defective Hearing	...	...	1	(Bone)	...	...	1
Otitis Media	...	...	5	Nervous Condition	...	...	1
Other Ear Disease	...	...	2	Spinal Curvature	...	...	1
Enlarged Tonsils	...	...	17	Epilepsy	...	...	1
Enlarged Tonsils and				Deformities	...	...	2
Adenoids	...	...	1	Other Defects and			
Defective Speech	...	...	1	Diseases	...	...	13

As on previous occasions, I again wish to emphasise the great interest taken in the work by Mr. J. W. Hand, the Principal, and my appreciation for the assistance he and his Staff have rendered.

WEST HAM HIGH SCHOOL FOR GIRLS AND ST. ANGELA'S HIGH SCHOOL.

On the request of the respective Governors, the Authority provides for the Medical Inspection of West Ham scholars in these Schools, with the exception of the Preparatory Schools. These Schools are visited each year by a Lady Doctor, and the same Medical Services are available for the scholars as for those children in the Elementary Schools. Vision is mainly treated by the School Oculist, but a few parents prefer to obtain treatment privately.

All other defects are treated almost entirely privately.

WEST HAM HIGH SCHOOL FOR GIRLS.

An inspection of the West Ham pupils attending this School was made, excepting those in the Preparatory Department.

The keenness and enthusiasm of the Principal, Dr. Florence Barnett, have helped to maintain the high standard of health found in the School.

Age Distribution of Examinees.

Age					No. Examined
9	...	...	...	...	1
10	...	...	...	...	7
11	...	...	...	...	34
12	...	...	...	...	53
13	...	...	...	...	33
14	...	...	...	...	20
15	...	...	...	...	31
16	...	...	...	...	8
17	...	...	...	...	5
Total ...					192

Attendance of parents, 80%.

Number of children found defective, 20 (10%).

Chief Defects Referred for Treatment.

Skin Diseases	...	...	2	Dental Caries	...	...	25
Defective Vision	...	...	13	Anaemia	...	...	3
Otitis Media	...	...	1	Chorea	...	...	2

Recommendations were left with the Principal re the following conditions :—

Defective Vision	...	12	Dental Caries	...	...	25
Defective Hearing	...	1	Unclean Head	...	...	12
Heart Disease	...	...	2	Physical Exercises	...	27
Chorea	...	...	1	(Flat foot, etc.)		

The remedial exercises for slight deformities are carried out by the Drill Mistress.

ST. ANGELA'S HIGH SCHOOL FOR GIRLS.

West Ham pupils attending this school are medically inspected annually.

Mother Mary Angela continues her active interest and co-operation in seeing that the recommendations for treatment are fully carried out.

Age Distribution of Examinees.

Age		No. of Girls Examined	
11	27
12	39
13	28
14	20
15	19
16	11
17	4
18	1
			<hr/> 149 <hr/>

Attendance of Parents, 79%.

Number of Children Defective, 22 (15%).

Chief Defects referred for Treatment.

Defective Vision	...	11	Chorea	...	...	...	1
Otitis Media	...	...	3	Spinal Curvature	...	...	1
Dental Caries	...	...	21	Nasal Catarrh	...	...	1
Anaemia	...	...	3	Malnutrition	...	...	1

Recommendations and advice were left with the Principal re the following conditions:—

Defective Vision	...	10	Unclean Heads	...	...	10
Defective Hearing	...	1	Physical Exercises	...	...	27
Dental Caries	...	...	23	(Flat foot, etc.)	...	...

The Drill Mistress undertakes the special exercises for slight deformities.

(20) Continuation Schools.

There are three Continuation Schools in the Borough: (1) The Shakespeare Institute; (2) The Livingstone Institute; (3) The Faraday Institute.

Scholars are not examined at the schools on account of the practical difficulties, but the Heads of these Institutes are empowered to refer cases to the School Medical Officer.

(21) Employment of Children and Young Persons.

The employment of school children out of school hours is subject to certain restrictions governed by Bye-Laws under Section 9 of the Education Act, 1921. These restrictions limit the age at which a child can commence such work, and the hours of employment. The child must also be medically examined and a certificate given that the work will not injure the child's health or prejudice its education.

The greater part of the work undertaken by children in this Borough consists of newspaper delivery and other errand rounds connected with provision stores.

The Bye-Laws under the Education Act, 1921, relating to the employment of children have been revised and adopted by the Council. In the main they give greater elasticity to child employment without essentially altering the hours of employment or encroaching on the conditions. Moreover they bring the conditions more into line with those of the London County Council and neighbouring Boroughs. During 1932, 141 children were examined; two certificates were not granted on account of unfitness.

During the same period certificates of fitness under the Employment of Children in Entertainments Rules (Sec. 101, Education Act, 1921), were granted in respect of 35 girls and 3 boys.

(22) Special Enquiries.

There have been no special enquiries during the year by the Assistant School Medical Officers, their time being fully occupied with essential duties.

(23) Miscellaneous.

All scholarship children are medically examined soon after taking up their scholarships. The schools at which such scholarships are held are:

Provided by the Authority:

- (1) The Grove Central School.
- (2) The Russell Central School.
- (3) The West Ham Secondary School.
- (4) The Plaistow Secondary School.

Aided by the Authority:

- (5) St. Angela's High School for Girls.
- (6) West Ham High School for Girls.
- (7) A few boys hold their scholarships at St. Bonaventure's.

Nos. 3, 4, 5, and 6 have been dealt with in separate reports.

SCHEME OF MEDICAL INSPECTION AT THE CENTRAL SCHOOLS PROVIDED BY THE AUTHORITY.

The two Central Schools, namely The Grove School, Stratford and The Russell School, Custom House, were transferred during the year to new premises, erected on sites at Forest Gate and Upton Park respectively.

At the present time there are two examinations in the year, one in September at which all newly entered scholarship children are inspected. The second examination takes place during the second quarter of the year, and comprises all scholars who are in their third year and due to leave at midsummer. At either of these examinations it is open for the Headmasters to submit as "specials" any scholars not due for examination where retarded progress or some definite ailment or condition makes it appear advisable. The Head may also consult with the School Medical Officer between school visits on any case where it is not deemed advisable to await the next medical inspection.

The same routine procedure of following up by Nurse's visits and re-inspection by the Assistant School Medical Officer, obtain as in the case of the Elementary Schools. The Committee's Oculist, X-Ray Specialist, School Clinic and Hospital arrangements for the operative treatment of Tonsils and Adenoids are available for cases needing it.

The arrangements for the recovering of cost of treatment from parents is undertaken by the Education Officer's Department; the scale of charges is in accordance with the schedule of income adopted by the Authority.

The Grove Central School.

Two routine medical examinations were carried out at this School during 1932.

In July, 100 children of the "leaving group" were inspected. Very few defects needing treatment were found, i.e., 3 per cent. only. This implies that when medical attention was required it was obtained during the School career.

In November, 220 children were inspected. This included the "Entrants." 36 children were found to need treatment—defective vision accounting for the major portion of medical attention required.

					Treatment Observation	
Malnutrition	...	...	...	...	1	—
Skin Diseases (not T.B.)	...	...	...	...	2	1
Otitis Media	...	...	...	...	1	1
Defective Vision	...	...	...	...	22	20
Squint	...	...	...	...	1	—

Oral Sepsis	...	...	...	...	3	...	—
Enlarged Tonsils	...	...	...	...	1	...	3
Other Defects	...	...	...	...	1	...	—
Deformities	...	...	...	...	1	...	2
Other Diseases and Defects	...	...	...	...	3	...	—

Total number requiring treatment, 16.4%.

Mr. Madden, the Headmaster, takes a great interest in the welfare of all the scholars, and his kind co-operation during the visits of the Doctor to the School is much appreciated.

The Russell Central School.

A visit of inspection was made in June, 1932, when the "Leavers" were examined—54 boys and 30 girls. The pupils commenced their training at the School in August, 1929, and were then medically examined. The present examination shows that the pupils, almost without exception, have done splendidly, the physical conditions and general fitness in many cases being exceptionally good.

Attendance of Parents: 26 with boys—48.1 per cent.
20 with girls—66.6 per cent.

Chief Defects referred for Treatment.

Skin Disease	...	...	3	Oral Sepsis	...	...	1
Defective Vision	...	...	15	Otitis Media	...	...	1
				Organic Heart Disease	...	...	1

Recommendations and advice re individual scholars left with the Head Teacher were as follows:—

Vision, 15. Heart Disease, 1. Hearing, 1.

One boy and three girls were examined as "Specials." The boy and one girl were referred to the School Oculist, one girl had heart disease and the parent was informed and given advice.

Vision: Two pupils were prescribed glasses and obtained them.
One pupil obtained glasses privately.
One pupil was prescribed glasses, but did not obtain them.
Eleven pupils failed to attend the Eye Clinic.
The two special eye cases referred to the Oculist were prescribed glasses and obtained them.

Acne: One case recovered, two improved.

Heart Disease: In Statuo Quo.

Otitis Media: Ear discharges at times.

Dealing with these re-inspections, twenty-seven home visits were made by the School Nurse.

This examination ("Leavers") is a most unsatisfactory one. The moment the pupils leave school, the majority requiring treatment fail to carry out the recommendations which have been made for their benefit.

The entrants were examined at the new premises in Carter Road in November, 1932. The following constitutes a resumé of this examination.

BOYS.		GIRLS.	
No. Examined.	No. Defective.	No. Examined.	No. Defective.
102	21	105	15

Parents present: Boys, 88. Girls, 89.

Combined percentage of 85.

Chief Defects referred for Treatment or Observation.

Malnutrition	...	...	1	Other Throat Conditions...	1	
Acne	...	...	1	Enlarged Cervical Glands	3	
Defective Vision	...	...	34	Defective Speech	...	1
Enlarged Tonsils	...	...	8	Oral Sepsis	...	1
Enlarged Tonsils and Adenoids	...	...	3	Organic Heart Disease	...	1
Squint	...	...	1	Bronchitis	...	1
Otitis Media	...	...	3	Deformity	...	1
				Other Defects	...	1

Following up and Treatment.

Defective Vision:	Thirteen boys and eleven girls prescribed glasses. Twelve boys and ten girls obtained glasses. Four boys and three girls—observation cases, were sent for treatment.
Otitis Media:	Improvement in each case.
Enlarged Tonsils:	Two cases much better, seven cases much the same.
Tonsillitis:	One case recovered.
Enlarged Cervical Glands:	No change in one case.
Oral Sepsis:	One case, treatment not carried out.
Defective Speech:	One case, no change.
Acne:	One case, much better.
Malnutrition:	One case, improved.
Deformity:	One case in statu Quo.
Other Defects:	One case recovered.

Mr. C. W. Truelove, the Headmaster, takes great interest in Medical Inspection at the School, with the result that a large percentage of the parents attend the two inspections each year. He greatly assists in dealing with "difficult" cases.

All the pupils seem particularly happy in their new School. A sports ground is available next to the School, which gives the opportunity of taking organised games as part of the curriculum.

Artificial Sunlight Treatment

The following is a report received from Dr. Eva Morton on West Ham School Children treated at the Sunlight Clinic at the Children's Hospital, Balaam Street, Plaistow, on behalf of the Education Committee:

During the year 196 patients were treated at the Clinic for School Children, the greater number of whom were referred for debility and malnutrition. Catarrh, rheumatism, anaemia, unstable nervous system and enlarged glands were the diagnoses next in frequency. Asthma, chorea, alopecia, otorrhoea and enuresis each accounting for a few additional cases. One boy, 9 years of age, suffering from the sequelae of Encephalitis Lethargica who had 48 treatments, showed a remarkable improvement as regards his sleep, appetite and speech. Of the cases discharged during the year, the enormous majority could be listed as "greatly improved," the next largest group being "improved"; of those "unchanged," which formed a very small percentage of the whole, nearly all had received seven treatments or less. A case each with thread worms, enlarged tonsils, and heart disease, who received respectively fourteen, twelve, and ten treatments, showed no improvement and three cases of "unstable nervous system" with twenty-nine, seventeen, and eleven treatments, also remained unchanged.

The results of treatment are estimated in regard to (a) the particular condition for which the case was referred for treatment, and (b) one or more of the following points:—General condition, appetite, weight, sleep, alertness and haemoglobin test—nearly all the children put on weight—many to a striking degree—and as in previous years, the haemoglobin test in practically every case showed a rise to nearly normal. Most of the cases of chorea or with choreic tendencies and those of "unstable nervous system" or "nervous debility," did surprisingly well, as did eleven out of twelve cases of sub-acute rheumatism.

The attendances have been satisfactory on the whole, and the results of the year's work definitely confirm the findings of previous years as to the value of ultra violet radiation therapy.

Blind Persons' Act.

During the year six men and one woman were examined and reported on as to suitability for training under the above Act.

Pathological Work.

The microscopical examination of sputum for the presence of the tubercle bacillus is undertaken by the Tuberculosis Officer.

Throat swabs are taken by the School Medical staff as required, and sent to the Superintendent of the Plaistow Fever Hospital for cultivation and report.

The microscopic diagnosis of ringworm of the head is undertaken by the School Medical staff in the Laboratory provided for that purpose.

Cheap Tram Fares.

I am indebted to the Acting Tramways Manager for the following Table which shows the number of children carried at halfpenny fares in all West Ham and London County Council No. 8 Service Cars during School Holidays in 1930, 1931 and 1932, and the advantage taken by the children of the facilities granted.

Holiday Period		1932 Number carried		1931 Number carried		1930 Number carried
Easter	...	141,557	...	143,915	...	147,976
Whitsun	...	131,453	...	126,689	...	124,950
Summer	...	429,561	...	392,404	...	384,906
Christmas	...	206,311	...	186,152	...	207,087
Totals	...	908,882	...	849,160	...	864,919

APPENDIX I.

SHOEBURYNESSE HOLIDAY CAMP, 1932.

Extracts from Report by Mr. T. Taylorson.

It is with great pleasure that I submit my Eighth Annual Report on your Committee's Holiday Camp. During July and August of 1932, 334 boys enjoyed your hospitality at Shoeburyness. For the seventh year in succession the large meadow of South Shoebury Hall was our temporary residence. This fine enclosed field of twenty acres, sloping gradually to the sea, is an ideal camping site, and offers the combined advantages of seclusion, perfect drainage, delightful sea views, ample water supply, and yet easy accessibility.

On Friday, July 15th, twenty of the teaching staff of the Council Schools made their way to the selected site, after the close of the afternoon session, and scenes of busy activity ensued, so that by Sunday mid-day, a complete transformation had been effected and the camp stood complete and ready for its youthful masters. Thirty-two bell tents, one large marquee and two smaller ones provided ample accommodation for eating and sleeping, whilst soundly built timber and iron kitchen, ablution shed, bath house with changing room and latrines appeared where but a few hours before had been bare ground. I might here report that the new canvas purchased on my recommendation in my last report proved satisfactory in every way, and in spite of some drenching days and nights, showed no signs of leaking.

The boys from the southern half of the Borough, together with those from the non-provided schools, formed the first contingent, whilst a similar number from the remaining schools enjoyed the second fortnight. It is pleasing to be able to report that general good health prevailed.

The diet was varied and ample, and four times a day, youthful appetites, whetted by keen sea breezes and active open air life, lost edge in our spacious dining marquee. All foodstuffs except vegetables, were supplied by the Co-operative Society, and were of uniform excellence of quality.

The boys' time was fully taken up by the pleasurable pursuits of camp life, and long joyous days of sports, games and swimming were rounded off by songs and story-telling till the evening hymn and prayers led to a quiet dismissal and hours of tranquil sleep, under the vigilant care of the teacher on night duty.

As in past years, the hot spray baths were a constant delight to the boys and a never failing source of wondering admiration to our visitors, who were many and distinguished.

After a thoroughly enjoyable holiday, the last batch of boys returned on Thursday, August 18th, and by four o'clock on the next day, all camp gear was packed and stowed away in the spacious new accommodation provided for it.

This report would be incomplete without a tribute to the loyal and unswerving service of my colleagues, who year by year give so ungrudgingly of their time and experience. Without their co-operation and support it would be impossible to carry on, and in the name of those hundreds of children, who have as your guests, enjoyed a health giving and restoring holiday under ideal conditions, I would say "Thank you."

DYMCHURCH HOLIDAY CAMP, 1932.

Extracts from Report by Miss L. P. Wise.

It is with very great pleasure that I present this Seventh Annual Report of the Girls' Camp held at Dymchurch from 12th August to 26th August, 1932.

The party numbered 202 girls and a staff of 10. Of these, 142 were assisted cases and the rest paid the full cost of the holiday.

The travelling facilities this year were excellent. It was decided to travel by motor coach instead of by rail. Arrangements were accordingly made with the L.C.S., and their coaches left nothing to be desired in the way of comfort. Six coaches carried the party and luggage. We left Stock Street School at 12 noon, and reached Dymchurch at 3 p.m., one stop of about twenty minutes being made on the way.

This very pleasant journey over, the children were divided into nine parties, each under the care of one member of the staff, the children choosing their own parties as far as possible. This method, I find, lessens the home-sickness, sometimes prevalent on the first night away from home, after the excitement of preparation and the journey.

This year we were again housed in the Berkshire Block, which has the advantage of having the dining hall under the same roof as the dormitories. The food, as usual, was plentiful and well prepared. The weather proved the best we have ever experienced at Camp; no rain fell during the fortnight, and we enjoyed day after day of brilliant and glorious sunshine.

Swimming and sun bathing, together with games on the sands, occupied most of the day-time, and the more strenuous games of netball, hockey, etc., in the camp grounds, were for the most part reserved for the cool of the evening, though I did hear of netball matches played before breakfast. Thanks to the calmness and warmth of the sea, several girls learned to swim during their holiday.

An excursion by motor coach to Folkestone was arranged for those who wished to go, and a very enjoyable day was spent seeing the sights there.

The usual competitions were entered into with zest, the annual shell hunt aroused great interest, the sand modelling was excellent, while the referee had to call a halt when four competitors passed the 2000 in the thrilling pastime of the moment, "Yo Yo."

The Drama and Music were not forgotten, and crowds of spectators thronged the auditorium (the sea wall) while the actors and musicians performed on the sands, or the whole party raised its voice in community singing. The staff, at their special evening concert, presented themselves as a Pierrot troupe, and delighted the audience with a variety entertainment, finishing with that now hardy annual, "A Day in Camp." Only those whose privilege it is to be present on these occasions, can know how eagerly this evening is awaited; tradition seems to be handed on from one set of campers to another; and I wonder to what heights future staffs must rise if they are to satisfy the admiring expectations of the children.

I am pleased to report that on one occasion only did we need to use the Camp Hospital—for a case of rheumatism—and that we had only one slight accident—a ricked knee, though several cases of sunburn had to be treated.

So many are the facilities now available for a day excursion to Dymchurch, that many parents, teachers and friends were able to spend a day there, and it was most gratifying to hear from parents how much they really appreciate what is being done for their children.

I cannot conclude this report without thanking most sincerely all who helped to make such a holiday possible; the Committee for their vigilant care for our comfort; the Staff at the Education Office, who attended so well to all the details of arrangements; the Medical Staff, both here and at Dymchurch; and the Camp Staff, who did much for our comfort. I realise each year that however good in itself camp life is, so much more is added by the capable attention, the sparkling gaiety, and the untiring efforts of these excellent helpers.

APPENDIX II.

STATISTICAL TABLES, SCHOOL MEDICAL OFFICER'S ANNUAL REPORT,

1932.

APPENDIX II

STATISTICAL TABLES

PREPARED BY THE BUREAU OF THE CENSUS

UNITED STATES DEPARTMENT OF COMMERCE

1915

TABLE 1.
RETURN OF MEDICAL INSPECTIONS.

A.—Routine Medical Inspections.

Number of Code Group Inspections :

Entrants	...	...	...	...	...	...	5604
Intermediates	...	...	...	...	...	...	4787
Leavers	...	...	...	...	...	...	6172
Total							<hr/> 16563 <hr/>

Number of other Routine Inspections 3274

B.—Other Inspections.

Number of Special Inspections	...	...	...	...	17420
Number of Re-Inspections	...	...	...	...	9965
Total					<hr/> 27385 <hr/>

TABLE II.
A.—Return of Defects found by Medical Inspection in the Year
ended 31st December, 1932.

Defect or Disease.	Routine Inspections.		Special Inspections	
	No. of Defects		No. of Defects	
	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
(1)	(2)	(3)	(4)	(5)
Malnutrition	333	133	290	74
Uncleanliness (See Table IV., Group V.)	—	—	—	—
SKIN—				
Ringworm—Scalp	2	—	44	—
Body	8	—	133	—
Scabies	21	—	233	—
Impetigo	46	—	1,004	—
Other Diseases (Non-Tuberculous)	130	22	2,046	3
EYE—				
Blepharitis	80	8	302	—
Conjunctivitis	23	—	512	—
Keratitis	2	1	7	—
Corneal Opacities	5	2	21	3
Defective Vision (Excluding Squint)	1434	222	1094	14
Squint	190	43	228	13
Other Conditions	13	10	305	5
EAR—				
Defective Hearing	34	33	113	55
Otitis Media	169	19	690	2
Other Ear Diseases	43	10	307	3
NOSE AND THROAT—				
Enlarged Tonsils only	795	308	371	7
Adenoids only	35	17	37	1
Enlarged Tons. and Ads.	542	37	408	—
Other Conditions	47	9	163	6
Enlarged Cervical Glands (Non-Tuberculous)	37	49	277	—
Defective Speech	20	41	55	23
Teeth—Dental Diseases (See Table IV., Group IV.)	114	76	23	2
HEART AND CIRCULATION—				
Heart Disease—Organic	34	121	33	54
" Functional	13	48	5	14
Anaemia	187	81	120	21
LUNGS—				
Bronchitis	128	58	45	10
Other Non-Tuberculous Diseases	17	8	13	6

TABLE II.—(Continued)

Defect or Disease. (1)	Routine Inspections		Special Inspections	
	No. of Defects		No. of Defects	
	Requiring treatment (2)	Requiring to be kept under observation, but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation, but not requiring treatment (5)
TUBERCULOSIS—				
Pulmonary :				
Definite	—	3	4	7
Suspected	30	21	29	4
Non-Pulmonary :				
Glands	1	2	6	2
Spine	—	18	—	6
Hip	—	7	—	2
Other Bones and Joints	—	9	—	3
Skin	—	1	—	—
Other Forms	3	2	5	—
NERVOUS SYSTEM—				
Epilepsy	6	7	22	3
Chorea	28	3	33	9
Other Conditions	82	51	26	28
DEFORMITIES—				
Rickets	2	18	2	2
Spinal Curvature	13	1	1	4
Other Forms	21	39	14	8
Other Defects and Diseases ...	496	80	5,965	172

B.—Number of Individual Children found at Routine Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases) :—

Group (1)	Number of Children		Percentage of Children found to require treatment (4)
	Inspected (2)	Found to require treatment (3)	
CODE GROUPS—			
Entrants	5,604	1,285	22.9
Intermediates	4,787	1,222	25.5
Leavers	6,172	1,350	21.9
Total (Code Groups)	16,563	3,857	23.3
Other routine Inspections	3,274	566	17.3

TABLE III.

Return of all Exceptional Children in the Area.

Children suffering from the following types of Multiple Defect, i.e., any combination of Total Blindness, Total Deafness, Mental Defect, Epilepsy, Active Tuberculosis, Crippling (as defined in penultimate category of the Table), or Heart Disease				Boys	Girls	Total
				4	5	9
Blind (including partially blind)	(i) Suitable for training in a School for the totally blind.	At Certified Schools for the Blind ..	..	4	1	5
		At Public Elementary Schools ..	..	—	—	—
		At other Institutions .. ..	..	—	—	—
		At no School or Institution .. ..	..	—	—	—
	(ii) Suitable for training in a School for the partially blind.	At Certified Schools for the Blind or Partially Blind .. ..	..	9	6	15
		At Public Elementary Schools ..	..	—	1	1
		At other Institutions .. ..	..	—	1	1
		At no School or Institution .. ..	..	1	3	4
Deaf (including deaf and dumb and partially deaf)	(i) Suitable for training in a School for the totally deaf or deaf and dumb.	At Certified Schools for the Deaf ..	..	25	26	51
		At Public Elementary Schools ..	..	—	1	1
		At other Institutions .. ..	..	—	—	—
		At no School or Institution .. ..	..	—	—	—
	(ii) Suitable for training in a School for the partially deaf.	At Certified Schools for the Deaf or Partially Deaf .. ..	..	12	4	16
		At Public Elementary Schools ..	..	—	—	—
		At other Institutions .. ..	..	—	—	—
		At no School or Institution .. ..	..	—	—	—
Mentally Defective	Feeble-minded.	At Certified Schools for Mentally Defective Children .. ..	..	99	69	168
		At Public Elementary Schools ..	..	20	21	41
		At other Institutions .. ..	..	7	6	13
		At no School or Institution .. ..	..	—	—	—
	Notified to the Local Mental Deficiency Authority during the year.	—	—	19	14	33
		—	—	—	—	—
Epileptics.	Suffering from severe epilepsy.	At Certified Schools for Epileptics ..	..	1	4	5
		At Certified Residential Open Air Schools .. ..	..	—	—	—
		At Certified Day Open Air Schools ..	..	—	—	—
		At Public Elementary Schools ..	..	4	7	11
		At other Institutions .. ..	..	—	1	1
		At no School or Institution .. ..	..	2	1	3
	Suffering from epilepsy which is not severe.	At Public Elementary Schools ..	..	1	6	7
		At no School or Institution .. ..	..	1	—	1
Physically Defective	Active pulmonary tuberculosis (including pleura and intra-thoracic glands).	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board .. ..	..	16	24	40
		At Certified Residential Open Air Schools .. ..	..	—	—	—
		At Certified Day Open Air Schools ..	..	—	—	—
		At Public Elementary Schools ..	..	2	1	3
		At other Institutions .. ..	..	—	—	—
		At no School or Institution .. ..	..	11	10	21
	Quiescent or arrested pulmonary tuberculosis (including pleura and intra-thoracic glands).	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board .. ..	..	—	—	—
		At Certified Residential Open Air Schools .. ..	..	—	—	—
		At Certified Day Open Air Schools ..	..	—	—	—
		At Public Elementary Schools ..	..	3	4	7
		At other Institutions .. ..	..	—	—	—
		At no School or Institution .. ..	..	—	—	—

TABLE III.—Continued.

			Boys Girls. Total.		
Physically Defective (continued)	Tuberculosis of the peripheral glands.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	1	1	2
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools	—	—	—
		At Public Elementary Schools	—	1	1
		At other Institutions	—	—	—
		At no School or Institution	—	1	1
	Abdominal tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	—	—
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools	—	—	—
		At Public Elementary Schools	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	1	—	1
	Tuberculosis of bones and joints (not including deformities due to old tuberculosis).	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	22	13	35
		At Public Elementary Schools	—	—	—
		At other Institutions	2	—	2
		At no School or Institution	2	3	5
	Tuberculosis of other organs (skin, etc.)	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	—	—	—
		At Public Elementary Schools	—	—	—
		At other Institutions	1	—	1
		At no School or Institution	1	—	1
	Delicate children, i.e. all children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School.	At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools	—	—	—
		At Certified Residential Open Air Schools	79	75	154
		At Certified Day Open Air Schools	75	13	88
		At Public Elementary Schools	6	11	17
		At other Institutions	—	1	1
		At no School or Institution	6	8	14
	Crippled Children (other than those with active tuberculous disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life.	At Certified Hospital Schools	5	4	9
		At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools	65	67	132
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools	—	—	—
		At Public Elementary Schools	13	15	28 (Nil)
		At other Institutions	1	3	4 (2)
		At no School or Institution	12	7	19 (7)
	Children with heart disease, i.e., children whose defect is so severe as to necessitate the provision of educational facilities other than those of the public elementary school.	At Certified Hospital Schools	2	—	2
		At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools	7	13	20
		At Certified Residential Open Air Schools	5	—	5
		At Certified Day Open Air Schools	1	—	1
		At Public Elementary Schools	1	—	1
		At other Institutions	1	1	2
		At no School or Institution	5	7	12

TABLE IV.

Return of Defects Treated during the Year ended 31st Dec., 1932.

Treatment Table.**Group I.—Minor Ailments**

(excluding Uncleanliness for which see Group V).

Disease or Defect. (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
Skin—			
Ringworm, Scalp	46	—	46
Body	136	—	136
Scabies	237	5	242
Impetigo	1,021	4	1,025
Other Skin Disease	2,098	29	2,127
Minor Eye Defects— (External and other, but excluding cases falling in Group II.)	1,178	30	1,208
Minor Ear Defects	1,101	60	1,161
Miscellaneous (e.g., minor injuries, bruises, sores, chilblains, etc.)	6,310	234	6,544
Totals	12,127	362	12,489

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group 1).

Defect or Disease. (1)	Number of Defects dealt with.			
	Under the Authority's Scheme. (2)	Submitted to refraction by private practitioner or at Hospital, apart from the Authority's Scheme (3)	Otherwise. (4)	Total (5)
Errors of Refraction (including Squint)	3,572	37	12	3,621
Other Defect or Disease of the eyes (excluding those recorded in Group 1)	12	—	—	12
Total	3,584	37	12	3,633

TABLE IV.—Continued.

Total number of Children for whom spectacles were prescribed:—

(a) Under the Authority's Scheme	...	...	3015
(b) Otherwise	...	...	53

Total Number of Children who obtained or received spectacles:—

(a) Under the Authority's Scheme	...	...	2671
(b) Otherwise	...	...	46

Group III.—Treatment of Defects of Nose and Throat.

Number of Defects.				
Received Operative Treatment.			Received other forms of Treatment.	Total number treated.
Under the Authority's Scheme, in Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.		
(1)	(2)	(3)	(4)	(5)
1,206	57	1,263	73	1,336

Group IV.—Dental Defects.

(1) Number of Children who were:—

(a) Inspected by the Dentist:

		Aged:			
Routine Age Groups	{	4	...	461	Total ... 21920
		5	...	957	
		6	...	6357	
		7	...	6258	
		8	...	3347	
		9	...	1072	
		10	...	1076	
		11	...	950	
		12	...	820	
		13	...	542	
		14	...	80	
Specials	4189
Grand Total					26109

TABLE IV.—Continued.

(b)	Found to require treatment	...	...	15409	
(c)	Actually treated	...	...	10805	
(2)	Half-days devoted to—				
	Inspection	...	...	262	
	Treatment	...	...	2068	
			Total	...	2330
(3)	Attendances made by children for treatment...			18812	
(4)	Fillings—				
	Permanent teeth	...	...	2501	
	Temporary teeth	...	...	1158	
			Total	...	3659
(5)	Extractions—				
	Permanent teeth	...	...	1439	
	Temporary teeth	...	...	19525	
			Total	...	20964
(6)	Administrations of general anæsthetics for extractions	...	...	...	Nil
(7)	Other Operations—				
	Permanent teeth	...	...	1816	
	Temporary teeth	...	...	581	
			Total	...	2397

Group V.—Uncleanliness and Verminous Conditions.

(i)	Average number of visits per school made during the year by the School Nurses	...	...	9.4
(ii)	Total number of examinations of children in the Schools by the School Nurses	...	...	59374
(iii)	Number of individual children found unclean	...		866
(iv)	Number of children cleansed under arrangements made by the Local Education Authority	...		Nil
(v)	Number of cases in which Legal proceedings were taken :—			
	(a) Under the Education Act, 1921	...	...	Nil
	(b) Under School Attendance Bye-laws	...		Nil

INDEX (Public Health).

	PAGE
Acts, Bye-Laws, and Local Regulations (list of adoptive)	44
Ambulance Services	33
Anthrax	113
Appendix I., Local Government Act, 1929	135-139
Bakehouses	68
Births	13 14
Central Home	30 137
Cerebro Spinal Fever	93
Charts 15 17 23 27	129
Children Act, 1908	125
Clinics, School, etc. 34 117	119
Committees, list of	8-10
Common Lodging Houses	49
Contents	4
Convalescence	124
Council, list of Members	7
Dagenham Sanatorium and Langdon Hills Sanatorium. Medical Superintendent's Report, etc. 26	103-107
Deaths	13 14
Deaths, causes of	20
Deaths in Institutions	19
Dental Work	119
Diarrhoea, etc. (deaths from) (under 2 years of age) ...	13
Diphtheria	91
Disinfection	97
District Medical Officer's Summary of Work	135
Drainage and Sewerage	48
Dried Milk, Distribution of	122
Erysipelas	93
Extracts from Vital Statistics	13
Factories, Workshops and Workplaces	68
Fertilisers' and Feeding Stuffs' Act, 1926	83
Food, Inspection and Supervision of, Unsound, etc.	62-83
Forest Gate Hospital	29 138
Forest House	29 139
General Provision of Health Services	26
Harold Wood Hospital	94
Health matters dealt with affecting inhabitants	14
Health Visiting	115
Home Helps	120
Hospitals 26-29 94	123

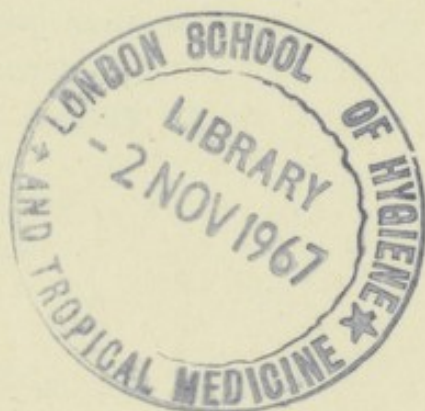
	PAGE
Housing : Report of Chief Sanitary Inspector	53 58
Housing Act, 1930	61
Houses let in lodgings	58
Ice Cream	65
Infantile Mortality	13
Infectious Diseases, Prevalence of, and control over, etc. 26 28 52 84-113	5-7
Introduction	85 96
Laboratory Work	29
Langdon Hills Sanatorium	14
Margate Convalescent Home	13 127
Maternal Deaths	
Maternity and Child Welfare: Report of Senior Medical Officer for, etc. 13 14 30 31 34 45	114-131
Maternity and Nursing Homes	45 125
Measles	13 92
Meat, disposal of condemned	69
Meat, Public Health Regulations, 1924	68-81
Meningitis (Cerebro-Spinal)	93
Mental Deficiency	132-134
Midwives	121
Milk, condensed, regulations	63
Milk, examination of (animal inoculation)	62
Milk, Bacteriological examination	63
Milk Supply	62
Milk (Special Designations) Order, 1923	63-64 82
Milk and Dairies (Consolidation) Act, 1915	62 82
Milk and Dairies Order, 1926	62 82
Mortality, Maternal, Infant and General 13 127 128 131	
Mortuaries	46-47
Natural and Social Conditions	11-12
Nuisances, Abatement of	55
Nursing Homes	45
Nursing, Professional, in the Home	45
Offensive Trades	50
Open Air Schools	30
Ophthalmia Neonatorum	126
Orthopœdic, Treatment, etc.	14
Places of Public Amusement	52
Plaistow Hospital, Medical Superintendent's Report ...	86-97
Plaistow Hospital, Bacteriological work	96
Pneumonia	93
Public Health Regulations Preservatives, etc., in Food.	63

	PAGE
Prosecutions	55
Psychological Clinic	14
Puerperal Fever and Puerperal Pyrexia	128
Rag Flock Acts	49
Rates—	
Birth	13
Death	13
Infantile Mortality	13
Maternal Mortality	13 127 128 131
Still Birth	13
Refuse disposal	49
Rivers and Streams	48
Samples taken, Food and Drugs Acts	66-67
Sanitary Circumstances of Area	48-61
Scarlet Fever, Return Cases, etc.	85
Scavenging	49
Schick and Dick Test	95
Schools	51
Shops Acts	43
Slaughter Houses	70
Smallpox	26 96
Smoke Abatement	52
Staff, List of	35
Statistics, Vital	13
South Ockendon Colony for Mental Defectives	14 133-134
Street Traders	65
Summary of General Statistics	12
Do. do. Work of Sanitary Inspectors	53
Sunlight Clinic	120
Tents, Vans and Sheds	53
Tuberculosis	26 34
Do. Table of Notified Cases, etc.	98
Do. Report of Tuberculosis Officer	99-102
Tuberculosis Order, 1925	82
Typhoid Fever	92
Vaccination Acts, 1867-1898, Summary of Work	32
Venereal Diseases	108-113
Veterinary Officer's Report	82
Vital Statistics, Extracts from	13
Do. of Wards	13
Do. Chief since 1877	25
Water	48
Whipps Cross Hospital	29 136
Whooping Cough	13 92

INDEX (School Medical).

SUBJECT.	PAGE
After-Care Committees	173
Artificial Light	193
Baths	169
Blind Children	176
Blind, Deaf, Defective and Epileptic Children	173
Blind Persons' Act	194
Central Association for Mental Welfare	172
Central Schools	190
Clinics—Summary of Work	163
Co-ordination	146
Continuation Schools	188
Convalescent Treatment	146, 172
Crippling Defects	154
Crosby Road Open Air School	164
Deaf Children	160, 176
Defective Children	143, 173
Dental Treatment	154, 160
Dymchurch Holiday Camp	196
Ear Diseases	153, 160
Edith Kerrison Nursery School	179, 180
Employment of Children and Young Persons	189
Epileptic Children	177
Exclusions	156
Eye Diseases (External)	153, 159
Following-up	156
Fyfield Open Air School	165
Grange Road Special School	174
Height (Comparative Tables)	155
Higher Education	183
Holiday Camps	164, 195
Hygiene	147
Infectious Disease	156
Invalid and Crippled Children's Society	147, 172
Invalid Children's Aid Association	147, 172
Knox Road Special School	173
Maternity and Child Welfare	146
Meals, Provision of	148, 169
Medical Inspection	149, 152
Menus	167, 178
Milk in Schools	148

SUBJECT.	PAGE
Minor Ailments	153, 157
Municipal College	183
National Society for the Prevention of Cruelty to Children	172
Nursery Schools	148, 177
Nutrition	155
Ogilvie School of Recovery	165
Open Air Education	164
Out-of-School Cases	172, 173
Parents, Co-operation of	170
Pathological Work	194
Physical Training	169
Plaistow Secondary School	185
Rebecca Cheetham Nursery School	179, 182
Ringworm	158, 194
St. Angela's High School	186, 187
Scholarship Children	189, 190
School Attendance Officers, Co-operation of	172
Scope of School Medical Service	151
Secondary Schools	184
Shoeburyness Holiday Camp	195
Skin Diseases	153, 158
Special Enquiries	189
Special Schools	143, 154, 173
Staff	145
Stammerers	177
Statistical Tables	199
Summary of Work at School Clinics	163
Surgical Instruments	172
Teachers, Co-operation of	171
The Grove Central School	190
The Russell Central School	191
Tonsils and Adenoids	153, 157
Tramways (Cheap Holiday Fares)	194
Treatment	157
Tuberculosis	153, 158
Tuberculous Children (Institutional Treatment)	158
Uncleanliness	152
Vision	153, 159
Voluntary Bodies, Co-operation of	172
Weight (Comparative Tables)	155
West Ham High School for Girls	186
West Ham Secondary School	185



9/25

