

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

Contributors

Fulham (London, England). Metropolitan Borough.

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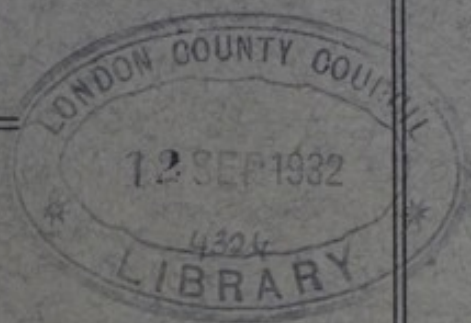
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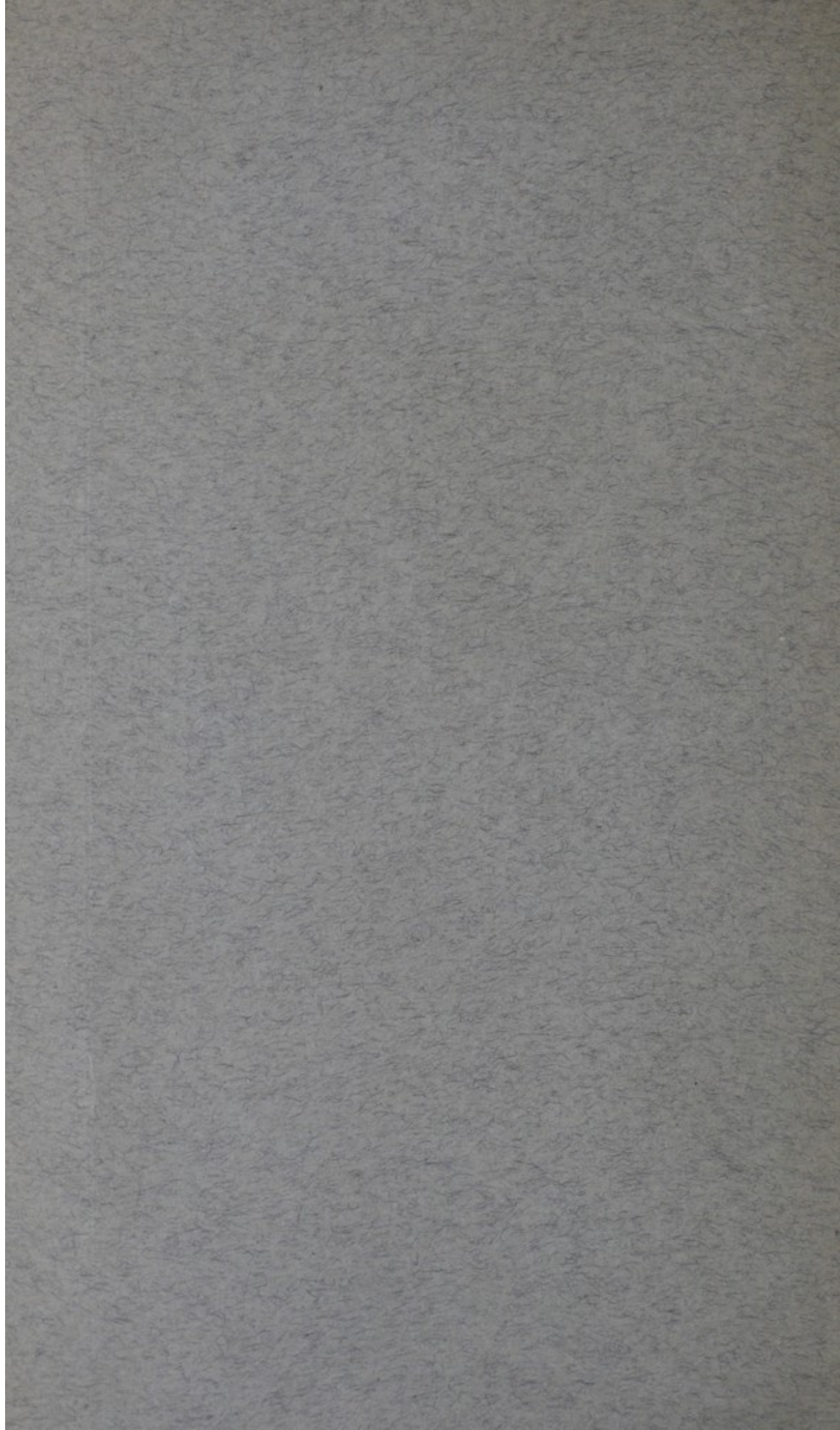


ANNUAL REPORT
of the
Medical Officer of Health
for the year
1931.

JOHN SULLIVAN, M.B., Ch.B., D.P.H.,
Medical Officer of Health.

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Metropolitan Borough of Fulham.

ANNUAL REPORT
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1931.

JOHN SULLIVAN, M.B., Ch.B., D.P.H.,
Medical Officer of Health.

WIGHTMAN
& Co., Ltd.,
REGENCY ST.,
WESTMINSTER

Fulham Borough Council.

PUBLIC HEALTH COMMITTEE, 1931.

HIS WORSHIP THE MAYOR (ALDERMAN W. J. WALDRON, J.P.)
Ex-officio.

Chairman : Councillor F. A. BARHAM.

Vice-Chairman : Councillor W. FOWELL, M.R.S.T.

Alderman W. R. CORBIN.	Councillor Mrs. L. M. LINEHAM,
Councillor J. W. BANFIELD, J.P.	J.P.
„ Dr. T. J. BOKENHAM.	„ A. MINUTE, J.P.
„ Mrs. W. BROOKS.	„ Sir T. W. RICHARDSON.
„ Miss C. FULFORD.	„ W. J. STOCKWELL,
„ G. L. HODGE.	M.R.S.T.
„ G. A. LINEHAM.	„ J. TURNEY.
	(Died 4th May, 1931).

MATERNITY AND CHILD WELFARE COMMITTEE.

HIS WORSHIP THE MAYOR (ALDERMAN W. J. WALDRON, J.P.).
Ex-Officio.

Chairman : Councillor A. MINUTE, J.P.

Vice-Chairman : Councillor Mrs. H. L. CUMMINS.

Councillor Dr. T. J. BOKENHAM.	Councillor G. R. RENTON.
„ S. T. CAVE.	„ Mrs. M. J. SHEPPARD.
„ H. DODIMEAD.	*Mrs. W. CORBIN.
„ G. L. HODGE.	*Mrs. A. MINUTE.
„ G. A. LINEHAM.	*Mrs. E. E. PRITCHARD.
„ Mrs. L. M. LINEHAM.	*Miss C. J. SKETCHLEY.
J.P.	*Miss C. M. L. WICKHAM.

* Co-opted members.

STAFF IN THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health :

*JOHN SULLIVAN, M.B., Ch.B. (Edin.), D.P.H. (Lond.).

Assistant Medical Officers of Health :

*P. L. T. BENNETT, M.C., M.R.C.S. (Eng.), L.R.C.P. (Lond.),
D.P.H. (Lond.), T.D.D. (Wales).

*(Tuberculosis Officer and Medical Officer Borough Bacteriological
Laboratory.)*

*RUBY THOMSON, M.B., Ch.B. (Edin.), D.P.H. (Edin. and Glas.),
(Maternity and Child Welfare Officer).

*G. F. HARDY, M.C., M.R.C.S. (Eng.), L.R.C.P. (Lond.).
(Resigned 31st December, 1931.)

*FLORENCE M. WILSON, M.B., Ch.B. (Glas.).	} <i>Part-time.</i>
*LILY C. BUTLER, M.R.C.S. (Eng.), L.R.C.P. (Lond.),	
*DOROTHY LEVERKUS, M.D. (Lond.). [D.P.H.]	

*Resigned
31st Aug.,
1931.*

*CATHARINE ROSS (Mrs. Colston), M.B., Ch.B. (Glas.), D.P.H. (Glas.).
(Appointed 1st September, 1931.)

Dental Surgeon :

*W. E. DODDS, L.D.S. *(part time).*

Consulting Obstetrician :

ALEX. GALLETTY, M.C., M.B., Ch.B. (Edin.), F.R.C.S.E.

Public Analyst :

CECIL H. CRIBB, B.Sc. (Lond.), F.I.C. *(part time).*

Public Vaccinators :

North District : A. G. WELLS, M.R.C.S. (Eng.), L.R.C.P. (Lond.),
L.S.A. *(part time).*

South District : E. CLARKE, M.D. (Brux.), M.R.C.S. (Eng.),
L.R.C.P. (Lond.), D.P.H. (Oxon.).
(Resigned 31st March, 1931.)

T. DUFF MILLER, M.D. (Glas.), Ch.B. (Glas.), F.R.F.P.S.
(Appointed 20th May, 1931.)

Vaccination Officer :

HUGH DAVIES.

Clerical Staff :

A. T. HURFORD, *Chief Clerk.*
 O. A. TRENDALL. S. J. CASSIDY.
 L. G. BROOKS. J. D. DANT.
 W. SWINSON.

Maternity and Child Welfare :

*Miss A. DRURY. *Miss W. E. NOBLE.
 *Miss G. M. KNIGHT.

Senior Sanitary Inspector :

¹ *CHARLES BRISTOW JONES (*Food and Drugs*).

Sanitary Inspectors :

¹ *FREDERICK H. MANNING.	^{1 2} *FREDERICK E. WALSH.
^{1 3} *ALFRED J. PARSONS	^{1 2} *ARTHUR S. JONES.
¹ *EDGAR DRAKE.	¹ *Mrs. M. E. DAVIES.
¹ *ALBERT E. CLUTTERBUCK.	^{1 2} *HENRY HUTCHINSON.
^{1 2} *THOMAS HENRY ROBEY.	^{1 2} *FREDERICK C. PAYNE (<i>tem-</i>
^{1 2} *ALEX. W. GAMMACK.	<i>porary housing inspector,</i>
	<i>appointed 24th August,</i>
	<i>1931).</i>

Health Visitors :

^{4 5 6} *Mrs. J. BRYNING.	^{4 5 6 8} *Miss E. BECKETT.
^{1 4 6} *Miss A. PERRETT.	^{4 5 6} *Mrs. J. GRANVILLE-SMITH.
^{4 5 6 7} *Miss D. M. HAYWARD.	^{4 5 6} *Miss P. KAYE.
^{4 5 6} *Miss G. LEACH.	

Tuberculosis Dispensary Staff :*Nurses :*

^{4 6} *Miss R. BOWEN. ^{4 5 6} *Miss E. C. CARMICHAEL.
⁴ *Miss E. E. WALKER.
 *Miss M. C. ROBINSON, *Bacteriological Assistant and Dispenser.*
 *Miss M. E. Sargent, *Clerk and Secretary of the Care Committee.*
 *Miss W. WRIGHT, *Clerk (part time).*
 *Mr. and Mrs. ROBERTS, *Caretakers.*

Matron of Maternity Home : ^{4 6} *Miss M. BUSTARD.

Assistant Matron : ^{4 6} *Miss M. DENMAN.

Housekeeper at Greyhound Road Infant Welfare Centre :

*Mrs. B. GREGORY.

Superintendent of the Disinfecting Station : A. V. WILLIAMS.

Disinfectors : E. J. EYLES, W. LEATON and G. PASSENGER.

Van Driver : S. WEBB.

Mortuary Keeper : S. CHURCHILL.

Rat Officer : H. HARVEY (Retired 8th June, 1931).

J. GIGNER (Appointed 9th June, 1931).

* The Council receives Exchequer grants towards the salaries of these Officers.

- | | |
|----------------------------------|--|
| 1 Certified Sanitary Inspector. | 5 Health Visitor's Certificate. |
| 2. Food Inspector's Certificate. | 6 Certificate of Central Midwives Board. |
| 3 Registered Plumber. | 7 Fever Trained. |
| 4 Trained Nurse. | 8 Queen's Nurse. |
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TOWN HALL,
FULHAM, S.W. 6.

August, 1932.

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

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit the Annual Report on the Vital Statistics and the Sanitary Condition of the borough for the year 1931.

This report relates only to the year 1931 whereas the previous one was a Survey Report dealing with the five years up to the end of 1930.

Staff Changes. I received the resignation of Dr. G. F. Hardy, the Council's Assistant Tuberculosis Officer and Assistant Maternity and Child Welfare Officer with much regret. The Public Health Committee on receiving the resignation came to the conclusion that it was unnecessary to appoint a successor as far as Dr. Hardy's tuberculosis duties were concerned. The reason for this was the fact that the number of cases of tuberculosis has diminished very markedly of late years.

The work of the staff of the Maternity and Child Welfare department was re-organised in 1931 as it was decided to appoint one half-time woman medical officer to carry out the duties formerly done by three part-time officers. This arrangement came into effect at the beginning of September, 1931, when Dr. Catharine Ross took over her duties.

On 12th January, 1931, Mr. G. F. Dearman commenced duty as temporary Housing Inspector for the purpose of surveying the Heckfield Place area and resigned the appointment on 24th April on obtaining a permanent post under another Local Authority ; the survey of the area was completed by Inspector Robey.

Mr. Frederick Payne was then engaged for a period of six months as temporary Housing Inspector to survey certain other areas in the borough and commenced his duties on 24th August.

Other staff changes are mentioned elsewhere in this report.

I wish to convey my thanks to the members of the staff for their loyal services during the year and to my colleagues in other departments for their willing co-operation.

I desire to take this opportunity of thanking the chairmen and members of the Public Health and Maternity and Child Welfare Committees for the valuable support they have given me and I also wish to thank the members of the Voluntary Societies who have been so intimately associated with me in the course of their work.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

JOHN SULLIVAN,

Medical Officer of Health.

GENERAL STATISTICS.

Area (acres)	1,706
Population (Census, 1931)	150,928
Population (mid, 1931)	151,200
Number of inhabited houses (Census, 1931) ...	26,245
Rateable Value	£1,138,738
Sum represented by a penny rate	£4,587

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

LIVE BIRTHS :—	Total.	Males.	Females.	
Legitimate	2,126	1,089	1,037	} Birth rate per 1,000 of the estimated resi- dent population, 15·08.
Illegitimate	155	76	79	
STILLBIRTHS ...	79	49	30	} Rate per 1,000 total (live and stillbirths) births, 33·5.
DEATHS... ..	1,857	958	899	
				} Death rate per 1,000 of the estimated resi- dent population, 12·3.
Percentage of deaths occurring in Public Institutions	...	55·03		
Deaths from diseases and accidents of pregnancy and childbirth				} from sepsis ... 5 from other causes 4
Death Rate of Infants under one year of age :—				
All infants per 1,000 live births	67			
Legitimate infants per 1,000 legitimate live births ...	66			
Illegitimate infants per 1,000 illegitimate live births...	77			
Deaths from :—				
Measles (all ages)	1			
Whooping Cough (all ages)	6			
Diarrhœa (under 2 years of age)	16			

Population. The Census taken on 26th April, 1931, showed that the population of the borough was 150,928, but the Registrar-General's estimate of the population for the middle of the year was 151,200. This latter figure has been used for the compilation of the various rates mentioned in this Report.

Marriages. The number of marriages was 1,336 and the marriage rate (the number of marriages per 1,000 of the population) was 8·8. In the two preceding years the number of marriages was 1,468 and 1,453 respectively, so that there was a decrease of 132 in 1931.

Births. During the year the live births corrected by the distribution of those occurring in lying-in institutions in the borough to those districts in which the mothers resided and the inclusion of children born to Fulham mothers in institutions outside the borough, numbered 2,281 of whom 1,165 were boys and 1,116 were girls. The birth-rate (the number of births per 1,000 of the population) was 15·08. The birth rate for the whole of London was 15·0 and for England and Wales was 15·8.

Stillbirths. The number of stillbirths during 1931 was 79 compared with 72 during the previous year.

Illegitimacy. The illegitimate live births numbered 155 (76 males and 79 females) during 1931 as compared with 144 for the previous year, and they constituted 6·8 per cent. of the total live births.

Natural Increase of the Population. The natural increase of the population, that is to say the excess of the total live births over the deaths, was 424 against 693 in 1931.

Deaths. During the year ended 31st December, 1931, 1,532 deaths were registered as having occurred in the borough. Of these 107 were of persons not belonging to the borough while 432 inhabitants of Fulham died outside the borough, chiefly in public institutions. There were therefore 1,857 deaths of persons—958 males and 899 females—having their usual residence in Fulham, representing an annual rate of 12·3 per 1,000 of the population. This rate is 1·5 above that of the previous year and 1·4 below

that of 1929. The death rate of males was 6·3 per 1,000 of the population and that of females 5·9.

The following death rates for 1931 are of interest:—

England and Wales	...	...	...	...	12·3
London	...	...	...	...	12·4
107 Large Towns (including London)	...	...	...	...	12·3
Fulham...	...	...	...	...	12·3

Certification of Causes of Death. Of the 1,857 deaths belonging to the borough, 1,690 or 91 per cent. were certified by registered medical practitioners, 119 by coroners after inquests and 44 by coroners without inquest, while four cases were uncertified.

DEATHS IN PUBLIC INSTITUTIONS.

Fulham Hospital. In this institution, belonging to the London County Council, there were 664 deaths, of whom 640 were Fulham residents, while 24 were persons belonging to other districts.

Western Hospital, one of the London County Council Fever Hospitals, had 72 deaths of whom 12 were residents of Fulham and 60 were of persons belonging to other districts.

Deaths of Fulham Residents outside the Borough. The deaths of Fulham residents outside the borough numbered 432, and occurred in the following places:—

St. George's Hospital	...	...	...	33
West London Hospital	...	...	...	18
Other General Hospitals	...	...	...	64
Children's Hospitals	...	...	...	26
Women's Hospitals	...	...	...	10
Other special hospitals	...	...	...	35
L.C.C. Infectious Diseases Hospitals	...	...	...	8
Public Assistance Hospitals	...	...	...	80
Mental Hospitals	...	...	...	77
Sanatoria	...	...	...	19
Nursing Homes, private houses and elsewhere	...	...	...	62

432

Of the deaths of Fulham persons, 55·03 per cent. took place in Public Institutions as follows :—

	Per cent.
720 deaths in Public Assistance Institutions or Hospitals	38·77
20 deaths in Infectious Diseases Hospitals	1·08
205 deaths in Other Hospitals	11·04
77 deaths in Mental Hospitals	4·14

Zymotic Deaths. The Zymotic death rate is that from the principal zymotic or infectious diseases, viz., small-pox, scarlet fever, diphtheria, measles, whooping cough, diarrhœa and fevers (typhus, enteric, other or doubtful fevers).

The mortality from these diseases was lower than in 1930, 39 deaths being due to them against 88 in 1930. The death rate per 1,000 of the population was 0·25 as compared with 0·57 for 1930, the difference being mainly due to the lower number of deaths from measles and diarrhœa in 1931 compared with 1930.

Seasonal Mortality. The mortality in the four quarters of the year under review was as follows :—

	1931.	1930.
First quarter	639	496
Second quarter	424	403
Third quarter	314	362
Fourth quarter	480	412

The increase in the number of deaths occurred mainly during the first quarter as the above comparison with the figures for 1930 will show.

Causes of Death. These are classified in Table 2, page 23. The following table shows the diseases which caused the largest number of deaths :—

Disease.	Males.	Females.	Both Sexes.	Percentage of total deaths.
Heart Diseases ...	210	245	455	24·5
Cancer ...	111	117	228	12·3
Pneumonia ...	90	82	172	9·2
Tuberculosis ...	103	66	169	9·1
Bronchitis ...	36	39	75	4·0
Totals ...	550	549	1099	59·1

It will be seen that 1,099 deaths or 59·1 per cent. of the total deaths were caused by five diseases. Heart diseases and Cancer more frequently head the list than any other conditions.

Heart diseases as in the last two years have taken first place ; 455 deaths were certified as due to this cause in 1931 as compared with 400 during the previous year. Cancer came next with 228 deaths, a decrease of 14 on 1930.

There was also an increase in the mortality from pneumonia, the number rising from 148 in 1930 to 172 in 1931. Tuberculosis again took fourth place with 169 deaths as against 134 in 1930.

There was also an increase in the mortality from bronchitis, the number of deaths being 75 as against 43 in 1930.

The following figures show the number of deaths from the common diseases classified according to the organs of the body affected.

Diseases of the organs of circulation caused 544 deaths in 1931, or 29·2 per cent. of the total, including 455 from heart diseases, 9 from aneurism and 80 from other circulatory diseases. Including hæmorrhage into the brain, the deaths from circulatory diseases were 617.

There were 404 deaths in 1931 from diseases of the respiratory organs, equal to 21·75 per cent. of the total deaths. This number is made up as follows :—Pneumonia 172, Tuberculosis of the lungs 146, Bronchitis 75, and other respiratory diseases 11. A large number of the deaths from bronchitis (69·3 per cent.) were in persons over 65 years of age. In the case of deaths from pneumonia 31·9 per cent. were in persons over 65 years of age and 23·8 per cent. were in children under two years of age.

Seventy-three persons died from nephritis and 33 from Influenza (compared with 16 during 1930).

DEATHS FROM CANCER IN 1931.

			<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Carcinoma	...	...	97	110	207
Sarcoma	...	...	5	6	11
Epithelioma	...	...	6	—	6
Not defined	...	...	3	1	4
Total	...	...	<u>111</u>	<u>117</u>	<u>228</u>

DEATHS CLASSIFIED ACCORDING TO THE ORGAN AFFECTED.

Cancer of Digestive Organs and Peritoneum	...	...	...	111 (54 males, 57 females)
Cancer of Respiratory organs	...	...	...	22 (18 males, 4 females)
Cancer of Breast	...	...	...	22
Cancer of Genito-urinary organs, male	...	...	...	20
Cancer of Uterus	...	...	...	18
Cancer of Buccal cavity and pharynx	...	...	...	18 (13 males, 5 females)
Cancer of other organs	...	...	...	17 (6 males, 11 females)

AGES AT DEATH OF PERSONS DYING FROM CANCER IN 1931.

<i>Age periods.</i>				<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
0 to 20 years	...	...	...	3	—	3
20 to 35	„	...	...	1	3	4
35 to 45	„	...	...	6	5	11
45 to 65	„	...	...	48	52	100
65 years upwards	...	...	...	53	57	110
Total	...	...	...	<u>111</u>	<u>117</u>	<u>228</u>

From the table showing the principal causes of death it will be seen that one out of every eight deaths in the borough in 1931 was due to Cancer.

THE PREVENTION OF CANCER.

An important circular (Circular No. 1186) containing a memorandum on Cancer of the lip, tongue and skin was published by the Ministry of Health in 1931 and may be obtained at a cost of 3d. from H.M. Stationery Office, Adastral House, Kingsway, W.C. 1.

Prior to the development of cancer of these organs there is usually present for a considerable period a non-cancerous condition which may be cured by treatment. The causes of the conditions which are the forerunners of cancer are known in many cases and can be prevented. The Ministry strongly advise the general public to make themselves acquainted with the causes and early symptoms of cancer so that preventive measures and effective treatment can be carried out, and it is pointed out that the stage of a disease in which advice is sought has a profound bearing on the ultimate result. Many valuable lives are lost which could be saved if the public were acquainted with the causes and early signs of the disease.

In the case of cancer of the lip, tongue and skin the detection of the disease is comparatively easy as these organs are accessible, the growth can be seen and there are often warning signs before the cancer has actually developed.

Cancer of these organs is commoner in men than in women and this is especially true in the case of cancer of the lip and tongue. The average age at which patients seek advice is between 55 and 60 ; the disease may, however, occur earlier in life and frequently occurs at later age periods.

Cancer of the Lip. The commonest position is to the right or left of the middle of the lower lip and the condition is not nearly so common at the angles of the mouth. Cancer of the lip usually starts as an ulcer or a wart on the red margin of the lip which is hard to the touch. It may start as a small crack or patch on the lip which gets covered with a scab. Later on the glands beneath the jaw and in the neck are affected so that they become enlarged and may break down, forming ulcers. The condition becomes painful and the patient looks ill, but this is not the case in the early stages.

Cancer of the lip appears in many instances at a point which is subjected to persistent irritation, for example, from the rough or hot stem of a pipe, from hot cigar smoke or from a decayed or broken tooth. Non-smokers may, of course, contract the disease and fortunately only a comparatively small number of smokers are affected with these growths.

Cancer is not the only disease which may cause a sore on the lip, but if one should develop which does not quickly disappear it is wise to seek medical advice. As preventive measures one should avoid irritation from a rough or hot pipe or cigar and decayed or broken teeth should be attended to by a dentist.

Early treatment is of supreme importance as the possibility of cure is much greater in the initial stages of the disease. The cases are treated by operation or by radiological treatment (radium or X-rays) or by a combination of these measures.

Cancer of the Tongue. The most common situation for the growth to appear is at the free margin of the tongue and the next position as regards frequency is on the upper surface, but it may start anywhere on the tongue. The growth is often situated in contact with a broken or decayed tooth and ill fitting dental plates have also been blamed. It usually commences as a crack or raw spot and the edges of the ulcer then become hard. It is not in itself painful at first, but generally gives rise to much pain by contact with hot or acid fluids and condiments.

Later on it causes pain, often shooting upwards towards the ear, and the glands below the jaw and in the neck become enlarged. Cancer of this organ extends much more rapidly than in the lip and medical advice should be obtained at the earliest possible moment.

Cancer of the tongue may follow syphilis of that organ which has not been thoroughly treated; the

syphilis shows itself in the form of white patches resembling white paint. From the above statement preventive measures will suggest themselves, namely, proper attention to and cleansing of the teeth and mouth, the avoidance of promiscuous kissing or drinking out of the same utensils as other people without thorough cleansing and the avoidance of risk of exposure to venereal disease.

It should be noted that all ulcers of the tongue are not due to cancer and that history of syphilis may be entirely absent.

Smoking should be avoided by patients who have any abnormal condition of the tongue and they should pay special attention to the care of their teeth.

The methods employed for treatment include surgical operations and radiological treatment (radium and X-rays).

Cancer of the Skin. A small number of men engaged in certain occupations develop what is called occupational cancer which mostly affects the genital organs, more especially the scrotum (skin covering the testicle). Scrotal cancers are found in mule-spinners, chimney sweeps and patent fuel workers and are caused by chronic irritation from substances in the course of the work. Thus cotton spinners are exposed to the action of the oil used for lubricating the mules, chimney sweeps to soot and fuel workers to certain oils, tar or pitch. Cases of skin cancer have been found in Cornish smelters and operatives in paraffin manufacturing. Insufficient cleanliness predisposes to occupational cancer of the skin and thorough cleanliness among the workers reduces the risk to a minimum. Persons who have pimples, scabs and other skin troubles are more liable to the disease and workers in the above-mentioned occupations should take every care to prevent such conditions.

Cancer may start in a mole in the skin especially if irritated by a razor while shaving.

The American Society for the Control of Cancer give the following advice: "the treatment of moles by 'beauty doctors' or by the use of electricity or caustics—methods which do not assure the complete removal of the deeper parts of the mole—are responsible for some epitheliomas (cancers of the skin). In these cases traces of the original mole are left behind and become subject to constant irritation from the pull of the scar that is produced by treatment. A brown or black mole should be left alone so long as it shows no signs of growth or, if it is so defacing that its removal is desired for cosmetic reasons, it should be treated by a surgeon." The treatment generally adopted is cutting it out.

Cancer of the skin is painless and the patient may pay little attention to it for this reason. The commonest type generally starts as a pimple or flat topped nodule in the skin with a little redness around it. Later on it ulcerates and scabs and the edge of the ulcer is hard. Cancer of the skin has not the same tendency to affect the glands as cancer of other parts of the body and if treated early there is a good prospect of complete cure.

The treatment consists of surgical operation or treatment by radium or X-rays.

In conclusion the same general principles hold good as in the case of cancer of other organs, and indeed of all diseases, namely, that prevention is better than cure and if prevention cannot be obtained the earlier the treatment the greater the chance of cure.

INFANTILE MORTALITY.

Of 1,857 deaths of persons of all ages belonging to Fulham, during 1931, 154 or 8·3 per cent. occurred in infants under One Year of age.

The infantile mortality rate (the number of deaths of infants under one year of age per 1,000 live births) was 67 per 1,000 as compared with 57 in 1930. The actual number of deaths was 154 as compared with 136.

The infantile mortality rate for England and Wales was 66 and for London 65.

INFANTILE MORTALITY RATE IN FULHAM SINCE 1891.

<i>Average for five years.</i>			<i>Actual rates for the last six years.</i>		
1891-1895	...	168	1926	...	64
1896-1900	...	167	1927	...	66
1901-1905	...	144	1928	...	77
1906-1910	...	117	1929	...	69
1911-1915	...	109	1930	...	57
1916-1920	...	92	1931	...	67
1921-1925	...	73			
1926-1930	...	67			

The following table shows the birth and infantile mortality rates during the last two years for the various wards in the borough:—

Ward.	Births and Birth rates.		Infantile deaths.		Infantile mortality rates.	
	1931	1930	1931	1930	1931	1930
Baron's Court	126 (10.1)	148 (11.7)	16	10	127	67
Lillie ...	214 (9.1)	221 (9.2)	19	26	89	77
Walham ...	178 (14.9)	198 (16.3)	34	18	191	90
Margravine ...	601 (33.7)	566 (31.1)	20	20	33	35
Munster ...	496 (13.7)	509 (13.8)	22	23	44	45
Hurlingham ...	51 (5.4)	82 (8.6)	4	6	78	73
Sands End ...	251 (9.7)	263 (10.0)	41	20	163	76
Town ...	364 (25.8)	379 (26.5)	8	13	22	34
BOROUGH ...	2281(15.08)	2366 (15.3)	154	136	67	57

It will be seen from Table III on pages 25 that the principal causes of infantile mortality were as follows :—

Pneumonia (all forms)	31 deaths as compared with 21 in 1930.				
Prematurity	27	„	„	„	27 „
Diarrhœa and Enteritis	15	„	„	„	28 „
Congenital					
malformations ...	12	„	„	„	8 „
Atrophy, debility and					
Marasmus	10	„	„	„	4 „

Fifty-six deaths of infants under four weeks of age occurred in 1931 as compared with 49 during 1930 and 52 in 1929.

The following table shows the number of infantile deaths from all causes as compared with infantile deaths from diarrhœa since 1923 :—

			<i>Infantile deaths from all causes.</i>	<i>Infantile deaths from Diarrhœa.</i>
1923 ... ..	...	...	199	21
1924 ... ..	...	...	214	18
1925 ... ..	...	...	211	36
1926 ... ..	...	...	173	28
1927 ... ..	...	...	162	16
1928 ... ..	...	...	185	50
1929 ... ..	...	...	173	33
1930 ... ..	...	...	136	28
1931 ... ..	...	...	154	15

MATERNAL MORTALITY.

During the year investigations were made into the causes of death in 9 cases of Maternal Mortality and the reports transmitted to the Maternal Mortality Committee.

The following is a list of the cases with the causes of death :—

Occupation.	Age.	Date and Place of death.	Cause of Death.
Wife of a Book-stall clerk	31	Jan. 1st, in hospital	1. Puerperal Septicæmia. 2. Thrombosis of R. Ovarian Vein.
Wife of an actor	27	Jan. 29th, in nursing home	Shock and Hæmorrhage due to ectopic gestation.
Wife of a stoker	39	Feb. 8th, at home	Pulmonary embolism following delivery.
Spinster, domestic cook	39	April 3rd, in hospital	Septicæmia following abortion. Insufficient evidence if natural or due to instrumental interference.
Wife of an accountant	43	April 25th, in hospital	Puerperal Septicæmia following full-term delivery.
Wife of a gas-fitter	43	Sept. 26th, in hospital	1. Puerperal Septicæmia. 2. Septic endometritis following full-term delivery.
Wife of a cabinet maker's wood machinist	26	Oct. 25th, at home.	Pulmonary embolism following miscarriage.
Wife of a dust-man (Borough Council)	43	Nov. 25th, in hospital	1. Hæmorrhage. 2. Placentapævia and Parturition (25.11.31).
Wife of a butcher (journeyman)	26	Dec. 15th, in hospital	Puerperal Septicæmia following full-term delivery.

TABLE I.—VITAL STATISTICS OF THE WHOLE BOROUGH DURING 1931 AND TEN PRECEDING YEARS.

YEAR.	Population Estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE BOROUGH.		TRANSFERABLE DEATHS.†		NETT DEATHS BELONGING TO THE BOROUGH.			
		Un-corrected Number.	Nett.		Number. *	Rate.	Of Non-Residents registered in the Borough. 8	Of Residents not registered in the Borough. 9	Under 1 Year of Age.		At all Ages.	
			Number.	Rate.					Number. *	Rate per 1,000 Nett Births.	Number. *	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1921	159400	3546	3528	22.1	1865	11.7	381	382	291	83	1866	11.7
1922	159500	3210	3242	20.3	1897	11.9	362	400	224	69	1935	12.1
1923	161600	3312	3123	19.3	1632	10.0	252	328	199	64	1708	10.5
1924	163100	2975	2967	18.2	1717	10.5	270	373	214	72	1820	11.1
1925	163700	2780	2771	16.9	1620	9.9	209	343	211	76	1754	10.7
1926	164300	2691	2670	16.2	1578	9.6	168	373	173	64	1783	10.8
1927	161900	2356	2444	15.1	1588	9.8	121	366	162	66	1833	11.3
1928	155300	2319	2388	15.4	1548	9.9	128	360	185	77	1780	11.5
1929	153700	2328	2502	16.2	1882	12.2	157	394	173	69	2119	13.7
1930	153700	2226	2366	15.3	1473	9.5	143	343	136	57	1673	10.8
1931	151200	2103	2281	15.08	1532	10.1	107	432	154	67	1857	12.3

NOTES.—This Table is arranged to show the gross births and deaths registered in the borough during the year, and the births and deaths properly belonging to it with the corresponding rates.

* In Column 6 are included the whole of the deaths registered during the calendar year as having actually occurred within the borough, but excluding the deaths of Soldiers and Sailors that have occurred in hospitals and institutions in the borough.

In Column 12 is entered the number in Column 6, corrected by subtraction of the number in Column 8 and by addition of the number in Column 9. Deaths in Column 10 are similarly corrected by subtraction of the deaths under 1, included in the number given in Column 8, and by addition of the deaths under 1 included in the number given in Column 9.

† "Transferable Deaths" are deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they resided. The deaths of persons without fixed or usual residence, e.g., casuals, are not included in Columns 8 or 9, except in certain instances under 3 (b) below. In Column 8 the number of transferable deaths of "non-residents" which are deducted is stated, and in Column 9 the number of deaths of "residents" outside the district which are added in calculating the nett death-rate of the Borough.

The following special cases arise as to Transferable Deaths:—

(1) Persons dying in Institutions for the sick or infirm, such as hospitals, lunatic asylums, workhouses and nursing homes (but not almshouses) are regarded as residents of the district in which they had a fixed or usual residence at the time of admission. If the person dying in an Institution had no fixed residence at the time of admission, the death is not transferable. If the patient has been directly transferred from one such Institution to another, the death is transferable to the district of residence at the time of admission to the first institution.

(2) The deaths of infants born and dying within a year of birth in an Institution to which the mother was admitted for her confinement are referred to the district of fixed or usual residence of the parent.

(3) Deaths from Violence are referred (a) to the district of residence, under the general rule; (b) if this district is unknown, or the deceased had no fixed abode, to the district where the accident occurred, if known; (c) failing this, to the district where death occurred, if known; and (d) failing this, to the district where the body was found.

Area of District in acres (land and inland water), 1706.

Total population at all ages at the Census of 1931: 150,928.

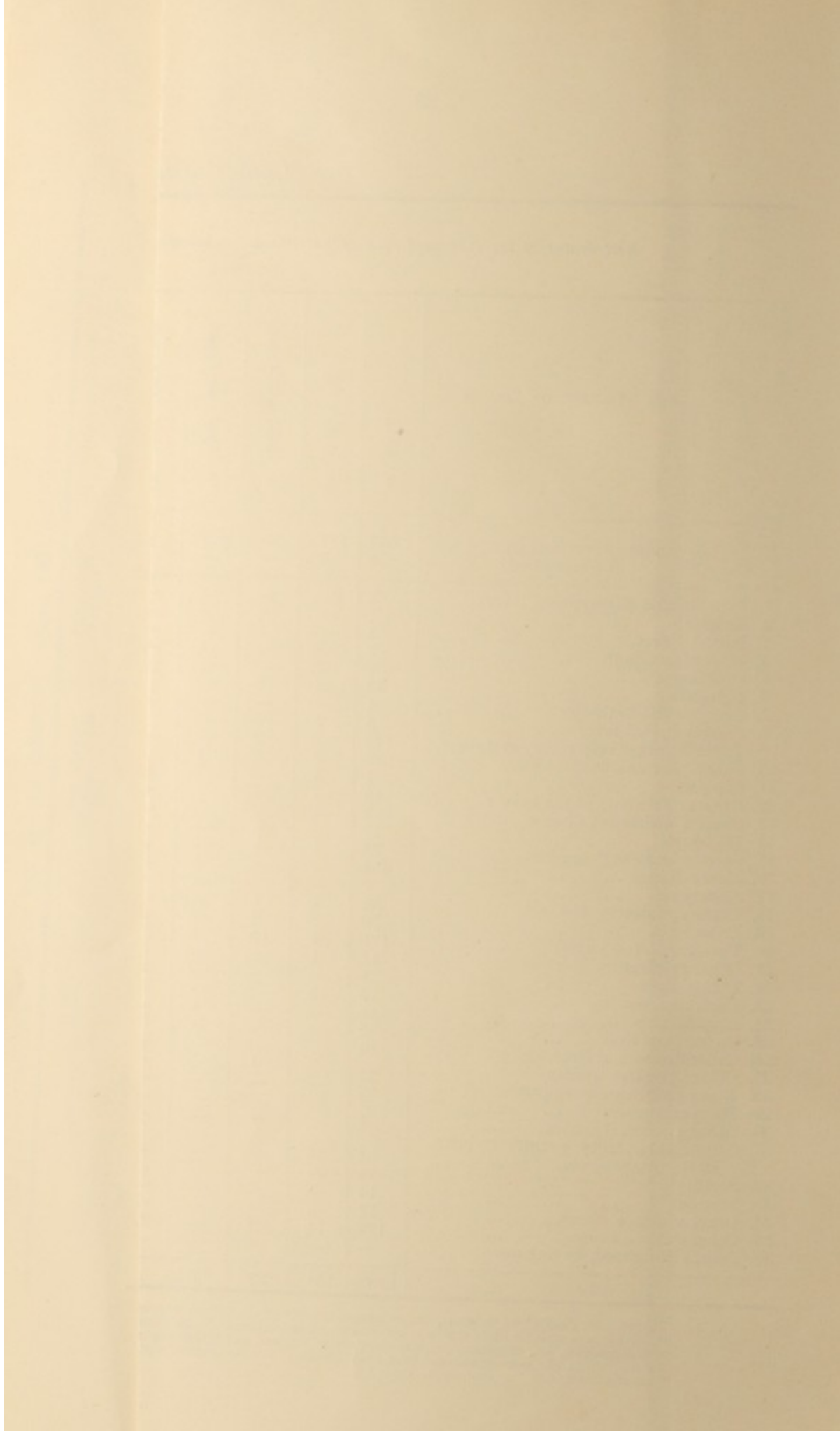
TABLE II.
Causes of and Ages at Death during the Year 1931.

Net deaths at the subjoined ages of "Residents," whether occurring within or without the District (a).														Net deaths at all ages of "Residents" in the Wards of the Borough, whether occurring in or beyond the Wards.									
CAUSES OF DEATH.	All ages.	Under 1 year.	1 and under 2 years.	2 and under 3 years.	3 and under 4 years.	4 and under 5 years.	5 and under 10 years.	10 and under 20 years.	20 and under 35 years.	35 and under 45 years.	45 and under 65 years.	65 years and upwards.	TOTAL DEATHS, WHETHER OF "RESIDENTS" OR "NON-RESIDENTS" IN INSTITUTIONS IN THE DISTRICT. (b)	Baron's Court Ward.	Lillie Ward.	Walham Ward.	Margravine Ward.	Munster Ward.	Hurlingham Ward.	Sands End Ward.	Town Ward.		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		
All Causes { Certified (c) ... Uncertified ...	1,853 4	151 3	29 —	9 —	4 —	3 —	21 —	51 —	139 —	107 —	499 —	840 1	759 1	190 —	291 —	200 1	221 2	393 1	132 —	246 —	180 —		
1. Typhoid and paratyphoid fevers ...	2	—	—	—	—	—	—	—	1	—	—	1	2	1	—	—	1	—	—	—	—		
2. Measles ...	1	—	—	—	—	—	—	—	—	1	—	—	4	—	—	—	1	—	—	—	—		
3. Scarlet Fever ...	2	—	1	—	—	—	—	—	—	—	1	—	5	—	—	1	1	—	—	—	—		
4. Whooping Cough ...	7	5	—	1	—	—	—	1	—	—	—	—	7	—	—	2	1	2	—	2	—		
5. Diphtheria ...	9	3	—	1	—	1	4	—	—	—	—	—	35	—	3	—	2	3	—	1	—		
6. Influenza ...	33	2	1	—	—	—	—	2	4	1	10	13	3	9	3	3	3	6	2	3	4		
7. Encephalitis Lethargica ...	4	—	—	—	—	—	—	—	—	2	—	—	1	2	1	—	—	—	—	1	—		
8. Cerebro-spinal fever ...	5	2	—	—	—	—	—	—	1	1	1	—	10	—	1	—	1	1	—	2	—		
9. Tuberculosis of respiratory system ...	146	1	2	—	—	—	1	11	52	24	45	10	58	8	26	21	17	30	10	22	12		
10. Other tuberculous diseases ...	23	3	4	1	—	1	2	5	2	2	2	1	14	1	4	1	3	8	1	3	2		
11. Syphilis ...	11	3	—	—	—	—	—	2	1	3	2	—	7	2	3	1	2	—	—	2	1		
12. General paralysis of the insane ...	10	—	—	—	—	—	—	—	2	7	1	—	5	1	2	2	1	2	—	2	—		
13. Cancer, malignant disease ...	228	—	—	—	—	—	—	3	4	11	100	110	67	19	34	19	18	54	20	31	33		
14. Diabetes ...	17	—	—	—	—	—	—	—	1	—	7	9	9	2	2	1	1	4	1	2	4		
15. Cerebral hæmorrhage, etc. ...	73	1	—	—	—	—	—	1	2	2	21	46	18	10	4	6	11	14	7	13	8		
16. Heart disease ...	454	—	—	1	—	—	—	2	12	10	108	321	172	49	75	36	56	102	39	50	47		
17. Aneurysm ...	9	—	—	—	—	—	—	—	—	—	6	3	8	—	3	1	3	1	—	1	—		
18. Other circulatory diseases ...	80	1	1	—	—	—	—	—	—	—	16	62	40	16	14	8	9	10	6	10	7		
19. Bronchitis ...	76	3	2	—	—	—	—	—	2	2	15	52	12	9	13	10	8	18	4	5	9		
20. Pneumonia (all forms) ...	171	31	10	4	1	1	—	4	7	9	49	55	66	18	26	22	24	38	9	23	11		
21. Other respiratory diseases ...	11	1	—	—	—	—	—	—	1	1	5	3	6	3	—	1	—	2	1	2	2		
22. Peptic ulcer ...	21	—	—	—	—	—	—	—	—	3	15	3	9	1	6	1	4	6	1	1	1		
23. Diarrhoea, etc. ...	19	15	—	—	—	—	—	—	1	—	1	2	12	2	5	1	1	5	2	3	—		
24. Appendicitis ...	14	—	—	1	—	—	2	2	1	2	4	2	10	—	3	1	1	4	1	2	2		
25. Cirrhosis of liver ...	6	—	—	—	—	—	—	—	—	—	5	1	1	—	3	—	1	1	1	—	—		
26. Other diseases of liver, etc. ...	10	—	—	—	—	—	—	—	1	1	4	4	5	3	1	—	3	3	—	—	—		
27. Other digestive diseases ...	22	2	1	—	—	—	—	1	1	3	3	11	14	1	8	3	1	1	2	4	2		
28. Acute and chronic nephritis ...	73	—	—	—	—	—	1	3	4	3	27	35	39	5	12	10	6	20	8	10	2		
29. Puerperal sepsis ...	5	—	—	—	—	—	—	—	2	3	—	—	2	—	1	2	—	—	2	—	—		
30. Other puerperal causes ...	4	—	—	—	—	—	—	—	2	2	—	—	1	—	1	1	1	—	—	—	1		
31. Congenital debility, premature birth, malformations, etc. ...	64	64	—	—	—	—	—	—	—	—	—	—	36	7	8	14	10	10	—	10	5		
32. Senility ...	38	—	—	—	—	—	—	—	—	—	—	38	1	4	5	4	3	5	4	12	1		
33. Suicide ...	14	—	—	—	—	—	—	—	2	3	5	4	4	1	3	5	—	3	—	1	1		
34. Other violence ...	71	3	4	—	—	—	7	9	15	3	14	16	32	5	6	9	12	21	2	11	5		
35. Other defined causes ...	124	14	3	—	3	—	3	8	18	15	25	35	54	11	15	15	17	20	9	17	20		
36. Causes ill-defined, or unknown ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
TOTAL ...	1,857	154	29	9	4	3	21	51	139	107	499	841	760	190	291	201	223	394	132	246	180		

(a) All "Transferable Deaths" of residents, i.e., of persons resident in the District who have died outside it, are included with the other deaths in columns 2-13, and columns 15-22. Transferable deaths of non-residents, i.e., of persons resident elsewhere in England and Wales who have died in the District, are in the manner excluded from these columns. For the precise meaning of the term "transferable deaths" see footnote to Table I.

(b) All deaths occurring in institutions for the sick and infirm situated within the district, whether of residents or of non-residents, are entered in column 14 of Table II.

(c) All deaths certified by registered Medical Practitioners and all Inquest cases are classed as "Certified" all other deaths are regarded as "Uncertified."



Infant Mortality during Year 1931.

Nett Deaths from stated causes at various ages under One Year of Age.													Nett Deaths under One Year of Residents in the Wards of the Borough.							
CAUSE OF DEATH.			Under 1 Week.	1—2 Weeks.	2—3 Weeks.	3—4 Weeks.	Total under 4 Weeks.	4 Weeks and under 3 Months.	3 Months and under 6 Months.	6 Months and under 9 Months.	9 Months and under 12 Months.	TOTAL DEATHS UNDER ONE YEAR.	Baron's Court Ward.	Lillie Ward.	Walham Ward.	Margrave Ward.	Munster Ward.	Hurlingham Ward.	Sands End Ward.	Town Ward.
All Causes	Certified	...	32	9	8	4	53	33	27	23	15	151	16	19	34	18	21	4	31	8
	Uncertified	...	3	—	—	—	3	—	—	—	—	3	—	—	—	2	1	—	—	—
1. Small-pox	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2. Chicken-pox	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3. Measles	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
4. Scarlet Fever	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough	...	...	—	—	—	—	—	2	1	1	1	5	—	—	2	1	—	—	12	—
6. Diphtheria and Croup	...	...	—	—	—	—	—	—	—	2	1	3	1	—	—	1	—	—	1	—
7. Erysipelas	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. Tuberculous Meningitis	...	...	—	—	—	—	—	—	1	2	—	3	—	1	1	—	1	—	—	—
9. Abdominal Tuberculosis (a)	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10. Disseminated Tuberculosis	...	...	—	—	—	—	—	—	—	—	1	1	—	—	1	—	—	—	—	—
11. Other Tuberculous Diseases	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. Meningitis (not Tuberculous)	...	...	—	3	—	—	3	3	—	3	—	9	1	—	5	—	—	1	2	—
13. Convulsions	...	...	1	—	—	—	1	1	2	1	—	5	1	—	2	—	1	—	1	—
14. Laryngitis	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
15. Bronchitis	...	...	—	—	—	1	1	—	2	—	—	3	—	—	1	—	2	—	—	—
16. Pneumonia (all forms)	...	...	1	—	2	1	4	5	9	7	6	31	3	2	7	4	5	1	7	2
17. Influenza	...	...	—	—	—	—	—	—	—	—	2	2	1	1	—	—	—	—	—	—
18. Diarrhoea	...	...	—	—	—	1	1	1	4	2	—	8	1	2	—	1	2	—	2	—
19. Enteritis	...	...	—	—	1	—	1	1	1	3	1	7	—	3	1	—	—	1	2	—
20. Gastritis	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
21. Syphilis	...	...	1	—	1	—	2	—	1	—	—	3	1	—	—	1	—	—	1	—
22. Rickets	...	...	—	—	—	1	1	—	—	1	1	3	—	—	—	1	—	—	2	—
23. Suffocation, overlaying	...	...	—	—	—	—	1	—	—	—	—	1	—	—	—	1	—	—	—	—
24. Injury by Birth	...	...	1	—	—	—	1	—	—	—	—	1	—	—	—	—	—	—	—	—
25. Atelectasis	...	...	8	—	—	—	8	1	—	—	—	9	3	3	—	2	1	—	1	—
26. Congenital Malformations	...	...	5	—	1	—	6	4	1	1	—	12	1	—	2	2	1	—	3	3
27. Premature Birth	...	...	15	4	1	—	20	6	1	—	—	27	2	4	7	2	6	—	5	1
28. Atrophy, Debility and Marasmus	...	...	2	1	1	—	4	3	3	—	—	10	—	1	2	3	1	—	1	2
29. Other Causes...	...	...	1	1	1	—	3	5	1	—	2	11	1	2	3	1	2	1	1	—
TOTAL	...	...	35	9	8	4	56	33	27	23	15	154	16	19	34	20	22	4	31	8

Nett Births in the Year :—
 Legitimate 2,126
 Illegitimate 155
 Net Deaths in the Year of :—
 Legitimate infants 142
 Illegitimate infants 12

(a) Under Abdominal Tuberculosis are included deaths from Tuberculous Peritonitis and Enteritis, and from Tabes Mesenterica.
 Want of breast milk is included under Atrophy and Debility.

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1	97	1912	1
1	98	1912	1
1	99	1912	1
1	100	1912	1

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INFECTIOUS DISEASES.

Incidence. Full particulars of all notifiable diseases arranged according to disease, ward and age will be found in Table IV on page 34.

The number of cases of infectious disease notified during 1931 was 1,505 compared with 4,229 in 1930. The large number of cases in 1930 was due to Measles; excluding Measles, the total cases notified were 1,395 in 1931 and 1,703 in 1930. The decrease in the number of notifiable cases, apart from Measles, is due to the smaller number of cases of Diphtheria and Scarlet Fever.

The notifications of Diphtheria decreased from 402 to 225 and the cases of Scarlet Fever from 595 to 331. The notifications of pneumonia were 275 in 1931 as compared with 207 in 1930. There was also an increase in the number of new cases of tuberculosis, 353 being notified against 296 in 1930. Notifications of Erysipelas rose from 74 to 86 and of infantile diarrhoea from 31 to 33. The number of cases of infectious disease of the nervous system, of which 7 were notified in 1930, rose to 14 in 1931. These included 1 case of encephalitis lethargica, 9 of cerebro-spinal meningitis and 4 of poliomyelitis.

Mortality from Infectious Disease. There were 392 deaths from notifiable infectious diseases in 1931, compared with 368 deaths in 1930.

The deaths from diphtheria fell from 19 to 9 and those from Scarlet Fever remained the same at 2 deaths.

The deaths from tuberculosis rose from 134 to 169 and those from pneumonia from 148 to 171.

There was only one death from Measles compared with 27 in 1930.

Diseases of the nervous system accounted for 10 deaths as against 9 in 1930 (Cerebro-Spinal fever 5, Encephalitis Lethargica 4, Poliomyelitis 1).

There were seven deaths from Whooping Cough compared with five during 1930 ; the deaths being of five children under one year of age, one of two years and one between 5 and 10 years of age.

DIPHTHERIA.

Notification. Two hundred and twenty-five notifications were received during 1931, a decrease of 177 compared with 1930. The attack rate was equal to 1.49 per thousand of the population and the two sexes were affected in the proportion of 117 males to 108 females.

Regarding the ages of those affected, the following table shows that most cases occurred in children under seven years of age, especially between 5 and 6 years.

0 to 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 6	6 to 7	7 to 8	8 to 9	9 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 & up	Total
12	21	18	19	16	35	14	11	10	8	26	12	20	3	—	—	225

The disease was prevalent all the year round, the cases varying from 13 in April to 29 in September. The following summary shows the number of notifications received during each month of the year :—

First Quarter :—

January...	...	16
February	...	23
March	...	16

Third Quarter :—

July	...	...	17
August	...	...	14
September	...	...	29

Second Quarter :—

April	...	...	13
May	...	...	20
June	...	...	18

Fourth Quarter :—

October	...	...	15
November	...	...	28
December	...	...	16

Deaths. Nine deaths were due to Diphtheria, giving a case mortality of 4·0 per cent. and a death rate of 0·06 per thousand of the population at all ages.

Four deaths were in males and five in females. The age periods at which the deaths occurred are given in the Table on page 23 and from this it will be seen that the majority of the deaths occurred during the fourth to tenth years of life.

Anti-toxin. During the year medical practitioners were supplied with 336,000 units of anti-toxin.

SCARLET FEVER.

Notification. Three hundred and thirty-one cases of Scarlet Fever were notified during the year, a decrease of 264 compared with 1930. The attack rate was equal to 2·2 per thousand of the population; females being more affected by the disease than males in the proportion of 191 to 140 cases.

Deaths. The two deaths which occurred were in males of one year and 35 years. The death rate per thousand of the population was 0·01 and the case mortality 0·6 per cent.

The ages at which the disease occurred will be seen from the following table which shows that children between 5 and 6 years of age were the chief sufferers :—

0 to 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 6	6 to 7	7 to 8	8 to 9	9 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 & up	Total
1	19	11	29	20	35	24	25	20	28	54	19	34	8	4	—	331

As regards the season, Scarlet Fever prevailed all the year round, being slightly more prevalent during the first half of the year. The following figures show

the number of notifications received during each month of the year :—

First Quarter :—

January...	...	15
February	...	34
March	...	39

Third Quarter :—

July	...	30
August	...	21
September	...	25

Second Quarter :—

April	...	26
May	...	37
June	...	31

Fourth Quarter :—

October	...	20
November	...	15
December	...	38

SMALLPOX.

No cases of Smallpox occurred in Fulham during 1931, but two cases were notified and the notifications subsequently withdrawn.

A worker in a factory in Fulham, who resided in another borough, contracted the disease but fortunately no further cases occurred among his fellow-workers.

During the year 64 contacts of cases occurring in other boroughs were kept under observation in Fulham.

VACCINATION.

Dr. A. G. Wells is Public Vaccinator for the northern part of Fulham and has ably carried out this work for many years.

I regret very much that Dr. Edward Clarke, who was Public Vaccinator for South Fulham for over five years, resigned at the beginning of 1931, his resignation taking effect on 31st March. His successor, Dr. T. Duff Miller, also a Fulham practitioner, is carrying out the duties most successfully.

Mr. H. Davies, the Vaccination Officer has supplied me with the following statistics relating to his work, which he has continued in a part-time capacity.

Number of births registered during 1930 ...	2,226
Successfully vaccinated	1,341
Insusceptible of vaccination	4
Unvaccinated on account of conscientious objections made by the parents ...	536
Died unvaccinated	85
Postponed by medical certificate and un- vaccinated on 31st January, 1932 ...	47
Removed to other districts and unvaccinated on 31st January, 1932	46
Removed to places unknown... ..	148
Outstanding on 31st January, 1932...	19
Number of successful primary vaccination certificates received during 1931 ...	1,425
Number of Conscientious Objection Certifi- cates received during the year 1931 ...	564

The figures show that 60·02 per cent. of the infants born in 1930 had been successfully vaccinated by the end of January, 1932.

MEASLES.

During the year 110 cases of Measles were notified in Fulham and only one death occurred from this disease ; this occurred in a man aged 24 years.

The number of cases which occurred during each month of the year were as follows :—

First Quarter :—

January... ..	38
February	5
March	6

Third Quarter :—

July	4
August	3
September	6

Second Quarter :—

April	5
May	8
June	17

Fourth Quarter :—

October	3
November	6
December	9

The cases were divided as to 53 in males and 57 in females, and the attack rate was 0·73 per thousand of the population.

ENTERIC FEVER.

Only three cases of Enteric Fever were notified during 1931 compared with 13 during 1930, and two of these cases died.

PUERPERAL FEVER.

Eleven cases of Puerperal Fever (puerperal sepsis) were notified during 1931, as against 17 during 1930. The incidence in 1931 was equivalent to 4·8 per thousand of the registered live births. There were five deaths from puerperal sepsis during the year.

Mr. Alexander Galletly, the Council's Obstetric Specialist, was called in for consultation in four cases of Puerperal Fever or Pyrexia during the year.

PUERPERAL PYREXIA.

Forty-seven cases of this disease were notified during the year as compared with 33 during 1930. In addition two cases which were notified as Puerperal Pyrexia were subsequently notified as Puerperal Fever.

OPHTHALMIA NEONATORUM.

During the year 17 cases of Ophthalmia Neonatorum were notified, compared with 19 during 1930, giving an attack rate of 7·5 per thousand of the registered live births. The notifications of this disease were the lowest for the past five years, the figures being :—

1926	...	...	...	...	...	...	29
1927	...	...	...	...	...	...	33
1928	...	...	...	...	...	...	38
1929	...	...	...	...	...	...	32
1930	...	...	...	...	...	...	19
1931	...	...	...	...	...	...	17

This improvement is very satisfactory as ophthalmia neonatorum is the commonest cause of blindness commencing in infancy. I have no doubt that the decrease is due to the great care which is now taken by midwives and doctors attending cases of child-birth.

Through an arrangement between the Borough Council and the District Nursing Association, the

services of the District Nurses are available for cases which are under medical treatment in their own homes. During 1931, 97 visits were paid to six such cases.

Details regarding the results of the seventeen cases notified during 1931 are given below :—

Cases Notified.	Treated		Vision.			Deaths.	Left the Borough.	Still receiving treatment.
	At Home.	In Hospital.	Inpaired.	Unimpaired.	Total Blindness.			
17	10	7	1*	15	—	—	1	4

* One eye totally blind.

TABLE IV.—Cases of Infectious Diseases notified during the Year 1931.

NOTIFIABLE DISEASES.	NUMBER OF CASES NOTIFIED.												TOTAL CASES NOTIFIED IN EACH WARD OF THE BOROUGH.								Total cases removed to Hospital.	Deaths.		
	At all Ages.	AT AGES—YEARS.											Baron's Court Ward.	Lillie Ward.	Walham Ward.	Margravine Ward.	Munster Ward.	Hurlingham Ward.	Sands End Ward.	Town Ward.				
		0—1.	1—2.	2—3.	3—4.	4—5.	5—10.	10—15.	15—20.	20—35.	35—45.	45—65.											65 and upwards.	
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera, Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Croup) ...	225	12	21	18	19	16	78	26	12	20	3	—	—	16	48	39	21	48	9	33	11	224	9	
Erysipelas... ..	86	2	1	1	—	—	3	1	4	11	10	35	18	6	9	14	17	18	1	17	4	65	4	
Scarlet Fever	331	1	19	11	29	20	132	54	19	34	8	4	—	31	46	53	37	72	31	36	25	318	2	
Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Enteric Fever	3	—	—	—	—	—	—	1	—	2	—	—	—	1	—	—	—	2	—	—	—	2	2	
Relapsing Fever, Continued Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Puerperal Fever	11	—	—	—	—	—	—	—	1	7	3	—	—	—	1	4	1	3	1	1	—	10	5	
Puerperal Pyrexia	47	—	—	—	—	—	—	—	1	42	4	—	—	4	7	7	7	7	2	9	4	45	—	
Cerebro-Spinal Meningitis	9	1	—	—	1	—	1	1	—	2	1	2	—	—	1	1	1	3	—	3	—	9	5	
Polio-myelitis	4	—	2	—	—	1	1	—	—	—	—	—	—	—	—	—	1	1	—	2	—	4	1	
Ophthalmia Neonatorum	17	17	—	—	—	—	—	—	—	—	—	—	—	—	4	4	2	4	—	2	1	7	—	
Tuberculosis of Respiratory System	275	—	1	1	1	—	8	5	30	113	48	59	9	21	41	31	46	46	23	43	24	—	146	
Non-Pulmonary Tuberculosis	78	1	3	3	1	4	11	10	11	19	6	9	—	6	10	6	6	23	4	15	8	—	23	
Measles	110	10	20	9	15	13	29	7	3	3	—	1	—	6	10	19	14	51	9	6	5	14	1	
Encephalitis Lethargica	1	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	4	
Pneumonia	275	14	13	11	7	8	14	11	14	58	39	63	23	12	34	28	54	80	15	32	20	140	171	
Diarrhoea	33	19	8	5	—	1	—	—	—	—	—	—	—	—	7	4	8	4	—	6	3	33	19	
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Dysentery... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Trench Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
TOTAL	1505	77	88	59	73	63	277	116	95	311	122	173	51	105	218	210	205	362	95	205	105	871	392	

MATERNITY AND CHILD WELFARE.

REPORT BY THE MEDICAL OFFICER IN CHARGE OF THE
MATERNITY AND CHILD WELFARE DEPARTMENT (MISS
RUBY THOMSON, M.B., Ch.B., D.P.H.) ON THE WORK
OF THE DEPARTMENT.

During the greater part of 1931 the work of the Maternity and Child Welfare Department was carried on under arrangements made when the Council took over full control of the Infant Welfare Centres in April, 1930.

In September, however, an important change took place. The Council decided that the time had come for a consolidation of the work of the Department by the appointment of one half-time medical officer to take the place of the three part-time doctors who had attended only at the Infant Welfare Centres. Accordingly, Dr. Catharine Ross (Mrs. Colston) was appointed, and her duties on three whole days each week were divided between the Infant Welfare Centres and the Town Hall, with visits to the Day Nursery and Maternity Home. Dr. Ross had worked for the Council as locum tenens on several occasions, and therefore came to the Department knowing well the nature of the work which she would be called upon to undertake.

While we regretted very much the departure of the three medical officers who had done such good work for Fulham, it was felt that a unification of the work was an essential step in its progress.

About this time Dr. Hardy notified his approaching resignation at the end of December. In view of this, and on account of the fact that she was for domestic reasons unable to devote any more time to the service of the Council, Dr. Ross also indicated that, when the Council saw fit to reconsider the medical arrangements, she would not stand in the way of the appointment of a full-time medical officer.

As will be seen from the statistics following, the work in 1931 has been very strenuous. Doctors, Health Visitors and Maternity and Child Welfare clerks have all been working at high pressure. Much of the success of the work of both Doctors and Health Visitors depends upon the efficient and friendly co-operation of the clerical staff, and this we have in full measure in Fulham.

No locum tenens is provided for the work of the Health Visitors during holiday periods, so that the services of one Health Visitor are not available for a period of approximately six months in every year. The question of arranging for a proper staff for the carrying on of the clinics and home visiting is therefore often difficult. We have only the minimum staff possible at each of the centres for ordinary purposes, and we have to depend upon the regular help of our voluntary workers. We are singularly fortunate in the services they so faithfully render, and we offer our most grateful thanks and appreciation to Miss C. Wickham, Mrs. Bell, Mrs. Tait, Mrs. Falcon, Miss Keenlyside, Miss Dolman, Mrs. Hollingbury and members of the Fulham Branch of the British Red Cross Society, who have all been such good friends to us during the past year.

During certain of the holiday periods of 1931, we managed at the clinics with one Health Visitor only, with the help of a voluntary worker. In this way, the other Health Visitors on duty were able to devote more time to visiting in the homes. I feel that the benefit of this arrangement has been felt amongst the mothers, although, of course, it made it more difficult for everyone at the clinics.

I have often expressed the opinion that a Health Visitor can do a great deal to make or mar the work of an Infant Welfare Medical Officer, as she acts as a liason officer between the home and the doctor. I should like to place on record my deep appreciation of the unselfish and devoted work carried on by the Council's Health Visiting staff. These services are very frequently cordially and voluntarily given during unofficial hours.

It is interesting to note that we have exceptionally highly trained and experienced women on our Health Visiting staff. All the Health Visitors are fully trained nurses and all have the certificate of the Central Midwives' Board in addition to possessing either the Health Visitors' or Sanitary Inspectors' Certificate. Added to these three essential qualifications, several Health Visitors hold qualifications in special branches of nursing, as follows:—One has had a complete Fever training, with special experience in Tuberculosis; one is a Queen's Nurse; a third has had special training in Venereal Disease and in Tropical Diseases; six have had a wide experience in practical midwifery; one has specialised knowledge of Massage and Actino-Therapy; and another was for several years a District Nurse for general and Tuberculosis work.

With all these highly specialised trainings at their disposal, the mothers of Fulham have a great storehouse of knowledge from which to draw for help and guidance.

HOME VISITS.

There are seven Health Visitors working in the Department and the scope of their work is indicated by the figures which follow:—

First visits to infants	2,826
Re-visits to infants	11,440
Re-visits to children aged 1 to 5 years ...	12,855
Visits to cases of ophthalmia neonatorum ...	15
" " measles	82
" " diarrhoea	29
" " pneumonia	28
" " puerperal fever	12
" " puerperal pyrexia	44
Ante-natal Visits	772
Other visits	155

I would direct attention to a great increase in these figures during 1931. This is explained partly by what I have said about the re-arrangement during holiday periods and partly by the fact that we have now seven Health Visitors on the permanent staff.

Each Health Visitor has one-seventh of the Borough as her area, and the work is directed from the Town Hall. The whole department is controlled by the provisions of the Maternity and Child Welfare Act, 1918, and a large proportion of the work of the Health Visitors is directly dependent on the Notification of Births Act, 1907, as through notifications made under the provisions of that Act information is received of births occurring within the Borough. The Health Visitor calls as soon as the period of attendance by the doctor or midwife has ended, i.e., eleven days after the birth of the child. This is done in all cases whether the child was born in an institution or at home.

The Health Visitors teach the mothers how best to maintain breast-feeding, and give advice on the general management of the child: in fact, any matter which has any bearing on the health and happiness of the parents or children is the concern of the Health Visitor. They encourage mothers to attend the Infant Welfare Centres for regular advice and medical inspection, and the attendance or otherwise of a mother at the Centre depends almost always directly upon the success of the Health Visitor's persuasion.

Artificial feeding has become a very common practice, which is greatly to be deplored. The Health Visitors' duty is to urge the continuance of breast-feeding to the utmost extent, and to ensure that the mother is given suitable advice as to the proper modification of a supplementary artificial feed, should this be necessary as a final resort.

Ophthalmia Neonatorum—inflammation of the eyes of the new-born—is a disease which does a great deal of harm to the eyes of new-born infants who may contract it unless most careful precautions are taken at the time of the confinement. When a case of this kind is notified the Health Visitor calls immediately. Cases of Puerperal Pyrexia and Fever are also notifiable by law, and here again the Health Visitor visits

to offer any advice which may be needed by the family. While she is in charge of a case, any eye discharge occurring in the infant must be notified by the midwife to her local supervising authority, which in London is the London County Council. Such notifications are forwarded to the Medical Officer of Health, and are handed over to the Health Visitors for home visitation. (See page 33.)

Measles is a notifiable disease in this Borough and of late years it has taken an alarming toll of the infant population, coming, as it does, as an epidemic every two years. In 1931 we were singularly free from this disease. When a child of under five years of age is notified as suffering from measles, a Health Visitor calls and advises the mother as to isolation and the calling in of medical or nursing assistance. Inevitably a considerable proportion of children receive no medical attention and, but for the timely intervention of the Health Visitor, still more would be in this unfortunate position.

NOTIFICATION OF BIRTHS.

During the year 1931, 2,013 births of living children and 53 births of stillborn children were notified. Of these, 254 or 12·3 per cent. were notified by doctors, 1,793 or 86·8 per cent. by midwives and 19 or 0·92 per cent. by fathers or persons in attendance at the births. The stillbirths during 1931 were equal to 2·6 per cent. of the notified births. These figures show a decrease from those for 1930.

In spite of the lower birth rate, the total attendances at the Infant Welfare Centres have increased by 2,004 and the first attendances have increased by 174, showing 57·8 per cent. of the notified births as against 46·3 per cent. in 1930. It must be remembered also that, in the case of a great number of the notified births, the infants attend the Centre attached to the Hospital where they were born, and some go to the Servite Church Centre in Fulham Road or to the Truby

King Mothercraft Centre at Walton Street, Chelsea, for convenience or for other reasons.

MATERNITY AND CHILD WELFARE CENTRES.

There are three Maternity and Child Welfare Centres in Fulham distributed over the Borough at 90-92, Greyhound Road, 170, Wandsworth Bridge Road and Melmoth Hall, Eustace Road.

In addition to my own full-time service, Dr. G. F. Hardy, Assistant Tuberculosis Officer, took certain Clinics each week until 31st December, and there were three part-time medical officers (Dr. Florence Wilson, Dr. Lily Butler and Dr. Dorothy Leverkus), until 1st September, when Dr. Catharine Ross was appointed as Assistant Medical Officer in the Maternity and Child Welfare Department.

Two special Toddlers' Clinics were carried on until 1st September but, after experience of these for several years, we realised that they were not a success in Fulham, and that mothers, as a rule, prefer to attend at clinics with their whole family together. It was decided that it was not worth while running special clinics for the very small number of mothers who were unwilling to attend the ordinary centres, and the Toddlers' Clinics were discontinued. It is certainly more satisfactory to consider the mother and her whole family under five years of age together, at least so far as public health work is concerned.

The supervision of the nursing mother is a most important part of the work. Without strict attention to this point, much of the edifice built by the Maternity and Child Welfare Department must fall to the ground. The economic and environmental conditions of the mother influence, to a great extent, the well-being of her family, and medical officers doing this work require always to keep in mind this social side of the work when dealing with the medical aspect. This cannot be too strongly emphasised. The mental care of the mother

is as important as her physical when the progress of the family is under consideration. For nearly thirteen years we have had special cards for recording the clinical histories of nursing mothers attending the Infant Welfare Centres.

Mothers so considered during 1931 were 1,741 in number, and they made 13,091 attendances in all.

The following table shows the attendances of children at the ordinary Infant Clinics :—

Clinic.	Number of Clinics held during 1931.	First Attendances of Babies.			Total attendances.		
		0-1	1-2	2-5	0-1	1-2	2-5
92, Greyhound Road ...	175	495	42	65	5,229	1,628	1,184
170, Wandsworth Bridge Road ...	173	401	31	48	4,703	1,496	1,306
Melmoth Hall, Eustace Road ...	111	267	34	27	3,123	1,266	824
Totals ...	459	1,163	107	140	13,055	4,390	3,314

ANTE-NATAL CLINICS.

Three Ante-Natal sessions are held weekly at the Fulham Centres, and all expectant mothers known to the Health Visiting or Medical staff are urged to place themselves under medical supervision either at the clinics or elsewhere. Any expectant mother in the Borough is entitled to avail herself of the medical and social services of the Ante-Natal Clinics, and it is being recognised increasingly that the proper supervision of an expectant mother is one of the most important factors in the prevention of Maternal Mortality. It is most important that the fears so often experienced by a pregnant woman should be removed, and that her physical condition should be closely observed in order that any abnormality that may exist, or develop during the pregnancy, may be suitably treated. When necessary treatment falls outside the scope of the Ante-Natal Clinics, such cases are referred to suitable

hospitals or institutions where they can be properly cared for.

Every Ante-Natal patient attending our Ante-Natal Clinics is visited by a Health Visitor, and advice is given both at the home and at the clinics about the hygiene of pregnancy and the suitable clothing of the mother and necessary garments for the coming child. The clinic Doctor satisfies herself that arrangements have been made for the suitable conduct of the confinement, and close co-operation is maintained between her and the doctor or midwife who is to conduct the confinement and with whom she communicates by letter when necessary.

All cases booked for the Maternity Home are required to attend the Ante-Natal Clinics, and one or other member of the Maternity Home staff attends at these sessions. This allows the pupil midwives in residence at the Maternity Home to get experience of Ante-Natal methods, and the mothers become acquainted with those who will care for them at their confinement.

The Health Visitors also regularly visit pregnant women in the Borough who are booked to enter maternity wards in Hospitals. The Almoners send lists of such cases for visitation, and by this means the department gets into touch with many pregnant women who would otherwise remain unknown.

The two Ante-Natal sessions at Greyhound Road Centre are conducted by myself, and the Clinic at Wandsworth Bridge Road was conducted by Dr. Leverkus until September, when it was taken over by Dr. Ross until the end of the year.

The attendances at the Ante-Natal clinics are steadily increasing each year and are as follows :—

Clinic.	No. of Weekly Sessions.	No. of Patients.	No. of Attendances.
92, Greyhound Road	93	506	1,539
170, Wandsworth Bridge Road	49	211	780
Totals	142	717	2,319

Mothers are coming to the Clinics in increasing numbers during the early months of pregnancy but, on account of the fact that many patients seek admission to various Maternity Hospitals the attendances tend to drop off during the later months of pregnancy, as such patients are usually required to attend the out-patient department of the Hospital concerned.

DENTAL CLINIC.

Dental work for mothers and children attending the Centres has been carried out by the Council's Dentist, Mr. W. E. Dodd.

Every effort is made towards the conservative treatment of the teeth, but it is very difficult to get mothers to understand the necessity for this, and far too often they only present themselves or their children for treatment when extraction is the only thing possible.

The number of women receiving dental treatment last year was 121 and the number of children treated was 80. The mothers attending the clinic made 331 attendances and the children 138. Dentures were supplied to 32 patients, while fillings were done in 31 cases and there were extractions in 147 cases. During

the year, 45 dental sessions were held and gas was administered at eleven of these sessions by Dr. R. C. Carswell, the Council's Dental Anæsthetist.

MASSAGE CLINIC.

Unfortunately Miss C. Wickham resigned her post as Voluntary Masseuse for the Council, which she has so ably filled for eleven years. We deeply regretted losing her valuable services. We were fortunate in obtaining the voluntary services of Miss Dolman, of the Middlesex Hospital Massage School, who took on the duties during the Winter months.

No. of children attending	...	...	...	67
Attendances	...	...	...	468

MINOR AILMENTS.

We are very careful not to undertake any treatment at the Infant Welfare Centres which should be undertaken by a doctor, midwife or District Nurse. Children requiring treatment that is outside the scope of the work of the Centres, are referred to the proper quarter for the attention they may need. The attendances for treatment of minor ailments have been as follows during 1931 :—

No. of children attending	...	...	...	212
Attendances made	...	...	...	482

Cases of eye defects in mothers and children are referred to the London County Council Oculist and this is a great convenience to the mothers. Children who attend the clinic regularly may attend the London County Council local School Treatment Centres should they be found to be suffering from Impetigo Contagiosa as no contagious or infectious disease is allowed in the clinics.

SUPPLY OF MILK UNDER THE PROVISIONS OF THE MATERNITY AND CHILD WELFARE ACT, 1918.

Under the provisions of the Maternity and Child Welfare Act, 1918, considerable quantities of milk, for the most part dried milk, are supplied free or at less than cost price to necessitous nursing and expectant mothers and to children under three years of age. During 1931 such grants were made in 407 cases, an increase of 74 over the numbers for the previous year.

The Local Authority is required by the Regulations of the Ministry of Health to ascertain that need actually exists and a special Visitor visits in the homes of applicants and reports on the home circumstances, while the ordinary reports of the Health Visitors are also available for reference. A special Milk Subcommittee of the Maternity and Child Welfare Committee meets every week to consider these reports.

It is interesting to note that, whereas the amount of free milk given has increased during the last two years, the quantity sold at cost price has gone down.

The approximate cost of the milk granted free or at less than cost-price during 1931 was :—

					£	s.	d.
Dried Milk	...	...	...	...	411	9	2
Wet Milk ...	...	...	...	...	141	18	9
Total	...	...	...	...	£553	7	11

In addition to the milk supplied free or at a reduced rate under the stringent conditions that have been described, milk is also sold at cost-price in cases recommended by the Medical Officers or Health Visitors. During 1931, under this part of the scheme, 6,703 lbs. of dried milk were supplied at a cost to the families of £634 14s. 6d. as compared with 7,294 lbs. at a cost of £672 13s. 8d. during the previous year.

It may be noted that the sale of milk has steadily dropped from 7,896 lbs. in 1928, to 7,432 lbs. in 1929, to 7,294 lbs. in 1930, and in 1931 to 6,703 lbs. These figures suggest that during the last four years, there has been a steady decrease in the incomes of the parents with whom the Maternity and Child Welfare department deals, in that more have come under the free milk scale and fewer have been able to buy it at cost price.

The question of the supply of dried milk rather than wet milk to the homes of over-crowded families is, in my opinion, one of the greatest urgency. Wet milk cannot be kept satisfactorily in hot and over-crowded rooms where it is almost certain to become contaminated by dirt and the germs of disease. Wet milk is a good medium for the growth of disease germs, while dried milk is much less liable to such contamination. Moreover, the curd of milk made from the dried powder is lighter and more easily digested than that of wet milk. It is reasonable therefore, to assume that the production of dried milk at a cost within the reach of the poorest family is one of the most important factors in the reduction of infantile mortality. The Vitamin content of milk is somewhat altered by drying, but every mother whose child is receiving dried milk from the Town Hall is carefully instructed by a Health Visitor as to the proper addition of raw orange or tomato juice to the diet of the infant. There is at the present time no difficulty for even the poorest mother to obtain such fruits throughout the winter in London.

MATERNITY HOME.

The Fulham Borough Council Maternity Home is situated at 706, Fulham Road, S.W. 6. It has ten beds for patients, with an isolation ward containing one bed. The home is primarily intended to alleviate overcrowding, and to ensure that mothers whose home surroundings are unsuitable for confinement should have privacy and proper attention such as they could not have in their own homes.

It should be understood that the Maternity Home is essentially a Home and not a Hospital, and cases in which any abnormality is to be anticipated are not admitted. The staff from the Maternity Home attend twice weekly at the Ante-Natal Clinics to study ante-natal methods and to give the women an opportunity of seeing beforehand the nurses who will be responsible for them at their confinement. The advantage is mutual.

We prepare trained nurses for the certificate of the Central Midwives Board.

The following is a record of the work done during the year 1931 :—

Cases admitted	...	...	...	...	211
Average duration of stay (days)	...	...	...	...	14
Number of cases notified as puerperal sepsis	...	...	...	...	—
Number of cases notified as puerperal pyrexia	...	...	...	...	2
Number of cases notified as ophthalmia neonatorum	...	...	...	...	—
Number of cases of infectious disease	...	...	...	...	—
Number of infants not entirely breast-fed while in Institution	...	...	...	...	—
Number of maternal deaths	...	...	...	...	—
Number of foetal deaths (stillborn or within ten days of birth)	...	...	...	...	6

Many cases entering the Home during the last few years have been in for the second, third and even fourth time. The fact of having had the same matron since the opening of the Home is, in my opinion, a great advantage, and many mothers have expressed themselves as being glad to get into the Home for a "holiday."

The minimum fee is £3 for the fortnight—the normal duration of treatment in the Home. The highest fee charged during 1931 was £8 8s. 6d. for the two weeks, and the average fee charged was £4 9s. 1d. The net cost per patient to the Council for the financial year 1931-32 was £4 18s. 9d., equivalent to £2 9s. 4½d. per week. This figure is high when compared with that for last year owing to the addition of a new Baby Room and various structural alterations at a total cost of £257 9s. 9d.

THE DAY NURSERY.

The Fulham Day Nursery is situated at Eridge House, Fulham Park Road, S.W. 6, and is under the control of a Voluntary Committee. The Council makes a grant of £626 per annum to the Day Nursery, in addition to providing the services of myself as Medical Officer.

The Day Nursery was established to meet the needs of mothers who are under the necessity of going out to work and who have no suitable person with whom to leave their children. Children can be left for whole or half days, and it means much to these mothers to know that their children are being well looked after and fed, in many cases, in a manner which would be impossible in their own homes. Children are admitted from the ages of six weeks to five years and a small daily payment is required.

The Health Visitors visit the homes of children for whom application has been made to enter the Nursery. Their reports are of great value to the Matron.

Mothers are in all cases encouraged to come to the Nursery at mid-day for breast feeding, where this is in progress ; and this is insisted on where possible, unless the mother's work is too far away to allow of her having a proper meal in the middle of the day in addition to going to the Day Nursery. It is never pressed where it would mean unnecessary hurry for the mother at mid-day and the possible sacrifice of a good mid-day meal. All the feeding of infants in the Nursery is done on the principle of the nearest possible approximation to breast standard milk, and an open air regime is strictly enforced.

The attendances during 1931 show a slight increase over those for 1930 and were as follows :—

Individual children attended :—

Under three years of age	...	...	...	92
Over three years of age and under five years of age	...	...	...	24

The total attendances made by the above children were :—

Under three years :—

Whole days	...	...	...	...	6,000
Half days	...	...	...	...	1,197

Over three years :—

Whole days	...	...	...	...	1,788
Half days	...	...	...	...	336

Total :—

Whole days	...	...	...	...	7,788
Half days	...	...	...	...	1,533
Total	...	...	...	...	<u>9,321</u>

HOME NURSING.

Home nursing is provided by the Borough Council for persons requiring such attention and unable to pay for it privately. There are three groups of cases included in the Council's scheme :—Certain illnesses in children under five years of age ; certain illnesses in expectant and nursing mothers, and certain infectious diseases.

A fee of 1s. per patient is paid for each attendance on a case, in the first two groups by the Maternity and Child Welfare Committee and in the third group by the Public Health Committee.

The Home Nursing is done by the nurses of the Fulham District Nursing Association, and Miss Watson, the Superintendent, gives us great help in our work. We are most fortunate in having her excellent co-operation.

It is interesting to note the very varied types of disease which the Borough Council asks the District Nurses to attend. (See table on page 52.)

MATERNAL MORTALITY.

The investigations called for by a special memorandum of the Ministry of Health in October, 1928, requiring careful enquiry into the causes of death in all cases in which women have died during pregnancy, at childbirth, or in the puerperium, are conducted by myself, as they are intimately connected with the work of the Maternity and Child Welfare Department.

In spite of all that is being done towards the prevention of maternal mortality, the annual figure is still high and it is now universally recognised that only constant observation and medical supervision of pregnant women will in time effect satisfactory results in this direction. Every effort is being made by the Fulham Maternity and Child Welfare Department towards this end.

THE BABIES' HOSPITAL.

The Babies' Hospital has accommodation for 21 children under five years of age and is under the control of a Voluntary Committee, who receive a grant of £1,447 per annum from the Fulham Borough Council and the services of a Medical Officer.

Children under five years of age are admitted to the Hospital suffering from a variety of diseases, the majority being patients requiring dietetic treatment or suffering from marasmus or wasting ; others include premature infants requiring special care and nursing and cases of malnutrition and enlarged glands, especially of the neck, which require careful dieting and open-air treatment. The number of cases of rickets has diminished markedly of late years, due to the mothers of the present day having more enlightened views regarding health, dieting and the value of fresh air and sunshine. Children are also admitted after minor operations such as adenoids and circumcision. A considerable number of infants and children with

pneumonia are treated in the course of the year, more especially during the autumn and winter months. Patients requiring open-air treatment sleep out on the balcony at night from June to early September and many cases are treated in the fresh air and sunlight on the lawn. The hospital was closed for painting and redecoration from 22nd May to 22nd June, 1931.

Dr. G. F. Hardy, who was in medical charge of this hospital, resigned at the end of 1931.

The following table gives an account of the work done during the year :—

In Hospital, January 1st, 1931	...	...	17
Number of babies admitted during the year	...	...	114
Average duration of stay (days)	...	...	36·6
Number of cases discharged :—			
(a) In good health	...	...	77
(b) Improvement	...	...	17
(c) No improvement	...	...	16
Number of deaths	...	...	4
Number of babies in Hospital, Dec. 31st, 1931	...	...	17

The average daily number in the wards during the year was approximately 14·7 as compared with 13·4 during 1930 and 13·1 during 1929.

HOME NURSING BY THE DISTRICT NURSING ASSOCIATION DURING 1931.

Quarter of the Year	Ophthalmia	Mammary Abscess	Ante-Natal	Parturition	Pyrexia	Umbilical Cord	Discharging Eyes	Pneumonia	Broncho- Pneumonia	Congestion & Pleurisy	Influenza	Measles	Whooping Cough	Chicken Pox	Diphtheria	Scarlet Fever	Total Cases	Total Visits
Jan. to Mar. Cases ...	—	—	1	1	1	—	7	24	19	2	21	12	10	—	—	—	98	—
Visits ...	—	—	6	8	14	—	104	345	249	15	200	108	167	—	—	—	—	1216
Apr. to June. Cases ...	3	2	—	1	—	—	2	12	10	—	2	3	2	—	1	—	38	—
Visits ...	36	38	—	5	—	—	15	117	137	—	20	62	19	—	3	—	—	452
July to Sept. Cases ...	3	1	1	—	—	1	2	7	4	—	2	—	—	1	—	—	22	—
Visits ...	61	20	30	—	—	6	63	113	44	—	7	—	—	7	—	—	—	351
Oct. to Dec. Cases ...	—	—	2	1	—	—	12	17	14	—	6	—	—	5	—	1	58	—
Visits ...	—	—	20	3	—	—	151	186	210	—	52	—	—	41	—	4	—	667
TOTAL CASES	6	3	4	3	1	1	23	60	47	2	31	15	12	6	1	1	216	—
TOTAL VISITS	97	58	56	16	14	6	333	761	640	15	279	170	186	48	3	4	—	2686

TUBERCULOSIS.

During the year under review the Tuberculosis Register has been corrected by the removal of all cases under the headings :—Cured, arrested, diagnosis not confirmed, lost sight of, left the district, or died, and the addition of all new cases notified, in accordance with the Public Health (Tuberculosis) Regulations.

The details of these removals and additions are as follows :—

	<i>Pulmonary.</i>		<i>Non-Pulmonary.</i>		<i>Total.</i>
	<i>Males.</i>	<i>Females.</i>	<i>Males.</i>	<i>Females.</i>	
Number of cases on the Register at commencement of 1931 ...	484	501	273	259	1,517
Number of cases removed during the year ...	108	96	21	24	249
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
	376	405	252	235	1,268
Number of cases notified for the first time during 1931 ...	152	123	36	42	353
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
	528	528	288	277	1,621
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

In Table IV (page 34) the notifications received during the year are classified according to the ages of the persons affected and the number of cases notified in each ward of the borough are also given.

MORTALITY FROM TUBERCULOSIS.

Respiratory System :—

146 deaths ... 90 males, 56 females.
 Death rate ... 0·97 per 1,000, being 0·21 higher than in 1930.
 130 notified (89·0 per cent.).
 16 not notified (11·0 per cent.). Of these 16 cases, two were notified after death ; six died in institutions.

Other Tuberculous Diseases :—

23 deaths ... 13 males, 10 females.
 Death rate ... 0·15 per thousand, as compared with 0·10 in 1930.
 13 notified (56·5 per cent.).
 10 not notified (43·5 per cent.). Of these 10, one was notified after death and seven died in institutions.

Steps are taken in the case of posthumous and non-notified cases to draw the attention of the practitioner concerned to the omission to notify.

PERIOD BETWEEN PRIMARY NOTIFICATION AND DEATH.

Respiratory System :—

Under 1 month	...	...	19 (14·39 per cent.)
1-3 months	...	...	15 (11·36 per cent.)
3-6 months	...	...	17 (12·88 per cent.)
6-12 months	...	...	23 (17·43 per cent.)
1-2 years	...	...	20 (15·15 per cent.)
Over two years	...	...	36 (27·27 per cent.)
Notified after death	...	...	2 (1·52 per cent.)

Other Tuberculous Diseases :—

Under 1 month	...	...	7 (50·00 per cent.)
1-3 months	...	...	2 (14·29 per cent.)
3-6 months	...	...	2 (14·29 per cent.)
6-12 months	...	...	—
1-2 years	...	...	1 (7·14 per cent.)
Over two years	...	...	1 (7·14 per cent.)
Notified after death	...	...	1 (7·14 per cent.)

DISPENSARY STATISTICS, 1913—1931.

TABLE V.

YEAR.	NEW PATIENTS.				ATTENDANCES AT DISPENSARY.		DOCTORS' HOME VISITS.	NURSES' HOME VISITS.
	Suffering from Pulmonary Tuberculosis.	Suffering from other forms of Tuberculosis.	Doubtful Cases.	Non-Tuberculous Cases.	Insured.	Uninsured.		
1913	324	86	323	429	2,361	11,967	2,175	1,517
1914	203	45	261	361	2,276	8,084	2,385	2,547
1915	174	28	260	323	1,171	5,568	1,910	2,918
1916	225	13	311	200	852	5,954	1,079	2,828
1917	286	13	349	329	1,052	6,528	1,141	2,789
1918	235	14	201	478	1,223	8,465	1,435	2,317
1919	221	50	251	281	1,444	8,116	1,724	4,043
1920	142	37	239	342	1,850	6,713	2,004	4,989
1921	116	23	163	344	2,074	5,387	2,217	5,640
1922	155	35	13	388	2,507	3,703	1,264	5,447
1923	132	70	24	401	2,288	3,261	552	4,603
1924	142	65	32	443	2,133	3,619	549	4,775
1925	162	44	46	414	1,956	3,405	605	5,421
1926	183	53	37	318	1,741	2,876	481	5,355
1927	143	56	14	431	1,612	2,666	592	5,422
1928	160	42	26	490	1,548	2,448	571	4,989
1929	158	48	23	436	1,411	1,834	521	5,272
1930	154	25	7	407	1,558	1,545	427	4,532
1931	159	20	7	422	1,444	1,625	292	4,156

TABLE VI.

YEAR.					NOTIFICATIONS.		DEATHS.		DEATH-RATE.	
					Pul-monary.	Other forms of Tuberculosis.	Pul-monary.	Other forms of Tuberculosis.	Pul-monary.	Other forms of Tuberculosis.
1913	...	...	...	...	765	289	215	49	1·34	0·31
1914	...	...	...	...	531	164	207	45	1·32	0·29
1915	...	...	...	...	461	97	198	51	1·29	0·34
1916	...	...	...	...	496	92	210	56	1·41	0·38
1917	...	...	...	...	582	118	191	49	1·32	0·34
1918	...	...	...	...	561	80	207	47	1·45	0·33
1919	...	...	...	...	433	145	168	42	1·01	0·27
1920	...	...	...	...	282	93	142	30	0·89	0·19
1921	...	...	...	...	287	76	153	31	0·96	0·19
1922	...	...	...	...	272	113	163	33	1·02	0·20
1923	...	...	...	...	319	155	149	32	0·92	0·19
1924	...	...	...	...	270	126	129	33	0·80	0·20
1925	...	...	...	...	279	114	151	22	0·92	0·13
1926	...	...	...	...	312	122	161	17	0·98	0·10
1927	...	...	...	...	251	95	126	21	0·77	0·13
1928	...	...	...	...	258	75	114	33	0·73	0·21
1929	...	...	...	...	279	85	149	24	0·96	0·15
1930	...	...	...	...	244	52	118	16	0·76	0·10
1931	...	...	...	...	165	24	146	23	0·97	0·15

TABLE VII.—PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.

Summary of notifications during the period from 28th December, 1930 to 2nd January, 1932.

Age Periods.	Formal Notifications.												
	Primary Notifications.												Total Notifications.
	0—1.	1—5.	5—10.	10—15.	15—20.	20—25.	25—35.	35—45.	45—55.	55—65.	65 & upwards	Total (all ages).	
Pulmonary :													
Males	—	2	5	1	13	16	33	36	25	14	7	152	265
Females	—	1	3	4	17	32	32	12	13	7	2	123	222
Non-Pulmonary :													
Males	1	5	6	5	4	4	3	2	4	2	—	36	54
Females	—	6	5	5	7	6	6	4	1	2	—	42	51

TABLE VIII.

NEW CASES OF TUBERCULOSIS COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER
OF HEALTH DURING THE PERIOD OTHERWISE THAN BY FORMAL NOTIFICATION.

Age Periods.	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45- 55	55-65	65 up- wards	Total Cases
Pulmonary :—												
Males	—	—	—	—	1	2	3	—	3	—	—	9
Females	1	1	—	—	—	2	—	—	—	1	1	6
Non-Pulmonary :—												
Males	2	—	1	—	—	2	—	—	—	—	1	6
Females	1	1	—	2	—	—	—	—	—	—	—	4

REPORT ON THE WORK OF THE TUBERCULOSIS DISPENSARY FOR THE YEAR 1931.

BY DR. P. L. T. BENNETT, TUBERCULOSIS OFFICER AND MEDICAL OFFICER OF THE BACTERIOLOGICAL LABORATORY.

ROUTINE.

The work in this department has been carried out without any change from the previous year.

It will be remembered that in 1930 a revised Time Table of Dispensary sessions was, with the approval of the Public Health Committee, drawn up and commenced to operate in June of that year. For the information of new members of the Borough Council I beg to submit this time-table, at present in operation :

<i>Monday</i>	...	10 to 11.30 a.m.—Women and Young Children. 1.45 to 3.0 p.m.—School Children.
<i>Tuesday</i>	...	10 to 11.30 a.m.—Men, Old and New Cases. 6.0 to 7.30 p.m.—Men and Women Workers.
<i>Wednesday</i>	...	10 to 11.30 a.m.—Women, Old and New Cases.
<i>Thursday</i>	...	1.45 to 3.0 p.m.—Children, New Cases.

Special appointments are also made for certain new cases to be seen by the Tuberculosis officer, either at home in consultation with their doctor, or at the dispensary during non-session times. It is found most convenient to deal with ear, nose and throat cases in this way, as the special examination required is occasionally lengthy and tends to delay other cases during an ordinary session.

The provision of dressing rooms for both sexes adjacent to the consulting rooms, and the working of the new time-table are proving most convenient both to patients and the dispensary staff.

STAFF.

I am pleased to report that Miss R. Bowen, Tuberculosis Health Visitor, who had the misfortune to be seriously injured in an accident in July, 1930, and had in consequence been unable to return to duty for many months, was pronounced fit by Sir John

Collie, M.D., and able to resume her post at the Dispensary on November 2nd. In this connection, I should like to record my appreciation of the very efficient manner in which her duties were carried out by Mrs. Tremeer, Temporary Health Visitor during the period of Miss Bowen's absence.

Holiday, etc., duties, were, as before, carried out by Dr. C. Ross (late Assistant Medical Officer M. and C.W. Dept.) who has acted as full-time tuberculosis officer on several occasions very efficiently.

NEW CASES.

During 1931, the number of new cases was 608, of which 262 were referred directly by private practitioners in the borough, and 100 by other medical authorities and departments.

CONTACTS.

Attendances numbered 512, with 415 examinations. These are higher figures than before and it is to be hoped that they can be kept up in the future. It must be remembered however that the factors which make for contact attendances vary a great deal from year to year, and all such attendances are entirely voluntary. There are so many who fail to attend in spite of persuasion and encouragement from the Dispensary Staff, of whom the tuberculosis Health Visitors in their home visiting play a most important part.

It is difficult to say whether indifference and apathy or actual fear of consequences is responsible for failure to attend; but the matter always receives close attention.

GENERAL ATTENDANCES.

There were during 1931, 3,581 attendances of both sexes at the dispensary, the actual number of patients being 1,388. There is but little difference in these figures compared with the previous year, but as has

been pointed out before, most dispensary statistics show a gradual decrease, a marked one being seen in the death rate which has become halved during the past 20 years. Both local and general factors are responsible for the changes, and there is no doubt that changes in procedure formulated by memoranda and regulations from the central authorities have a large influence on dispensary figures. In connection with this it might be pointed out that no official visits to the Fulham Hospital have been included in this year's statistics.

Much unnecessary work is slowly but surely eliminated, and out of it has evolved a much more effective scheme in which the General Practitioner, the School Medical Officer, the Tuberculosis Officer and Staff, the Sanatorium Medical Officer, and the Adminis-
trating Authorities all play their part in the campaign against Tuberculosis.

INSTITUTIONAL TREATMENT.

The London County Council is the authority responsible for sanatorium treatment recommended through the Dispensary or from the General Hospitals. In this connection it should be noted that according to the instructions of the Ministry of Health, patients living in the borough area who are admitted to public institutions for treatment of tuberculosis under the Tuberculosis Scheme, although they may never have been under the Tuberculosis Officer or even been seen by him, are placed upon the Dispensary register for the period of such treatment.

In 1931, 230 patients were sent to residential institutions on the recommendation of the Tuberculosis Officer. Of this number 139 were dealt with by the London County Council, and 47 by the Public Assistance Committee. In many cases the Public Assistance Committee would send further recommendations for Sanatorium treatment to the London County Council.

The problem of the advanced case has always been one of great difficulty ; and their effective treatment

and disposal constitutes, perhaps, the most serious present difficulty in the whole of the tuberculosis scheme. On account of their condition they are unsuitable for Sanatorium, and the accommodation for such cases in special hospitals for Tuberculosis is limited.

A certain proportion are admitted for varying periods into the London County Council general hospitals ; but many prefer their own homes in which proper segregation and nursing are very doubtful.

TUBERCULOSIS IN CHILDREN.

Both pulmonary and non-pulmonary types are met with amongst children, but the former are comparatively rare if one looks for a " definite and recognisable disease."

Observation and sanatorium treatment is very readily provided by the London County Council on the recommendation of suitable cases by the Tuberculosis Officer.

Large numbers of children, both contacts and others, come to the Dispensary and are kept under periodical supervision. Many of these little ones suffer from so mild a type of disease that residential treatment in an institution is unnecessary, and they can be recommended for admission to the special London County Council Open-air (Day) School in Broomhouse Road. This school (the Elizabethan) is also very much used for children who have been away to Sanatorium and require different treatment and environment from the usual elementary school.

The school regime continues on the same lines as before under the new Head Mistress, Miss Clarke, the former headmistress having retired at the end of 1930 ; and for some months the school was under the direction of a temporary head-mistress, Miss Clissold, until the new appointment was confirmed by the Education Branch.

The Tuberculosis Officers of the Borough during 1931 visited the school weekly for routine inspection of children. Periodical visits also were made to the kitchen at meal times.

The results of treatment in this school are very encouraging, and but very few children show evidence of retrogression.

X-RAY EXAMINATIONS.

During 1931, 122 cases were referred for screening and X-ray examinations ; and these were, as usual, carried out at Brompton Hospital, the borough being responsible for payments in cases recommended by the Tuberculosis Officer.

A good X-ray is often of very great assistance as an adjunct in the diagnosis of early tuberculosis, and also for showing lung changes which occur during the course of the disease ; and one may say that a bad X-ray is equally misleading.

In Fulham we are very fortunate both in regard to the actual excellence of the X-ray films taken at the hospital, and also from the fact that each case is seen and reported by such eminent radiologists as Dr. Stanley Melville and Dr. Rawlinson of the X-ray department.

ARTIFICIAL PNEUMOTHORAX AND OTHER SPECIAL TREATMENTS.

These are also carried out at Brompton and other hospitals, the cases being recommended by the Tuberculosis Officers, and kept under periodic supervision at the Dispensary.

CO-OPERATION WITH GENERAL PRACTITIONERS.

It is a pleasure to report the continued friendly relationship and support of the Borough private practitioners, which can be seen by the number of cases referred to the Dispensary for consultation and advice.

The Tuberculosis Officers have always on their part endeavoured to safeguard the interests of doctors practising in the area in every way possible.

BACTERIOLOGICAL DEPARTMENT.

Under new London County Council regulations, bacteriological examinations of sputum and other specimens concerning cases *in Fulham Hospital* were, after October, 1931, carried out by the hospital authorities and not at the Dispensary as in former years.

As usual other examinations, both Dispensary and for the Borough, have been carried out by Miss Robinson, the number of specimens of sputum alone being 1,453. This, of course, only constitutes a minor proportion of the specialised bacteriological work which is carried out during the year. (See page 72.)

CLERICAL DEPARTMENT.

A large number of letters and reports, both on Dispensary and Care Committee cases were dealt with by Miss Sargent and Miss Wright. The Tuberculosis Officers have invariably communicated with private practitioners on all new cases referred, and in any matters regarding changes of disposal or treatment in the case of old patients. The number of such reports during 1931 was 732; Reports sent to Public Bodies 543, and the number of general letters written 5,856.

In addition the registers are kept and statistical returns prepared in this department.

THE TUBERCULOSIS CARE COMMITTEE.

This representative Committee has met every second week at the Dispensary (except during holiday periods) to consider matters of assessment and conditions of every description affecting dispensary and other patients and their families; and in this connection special thanks should be given to the Charity Organisation Society, who visit and interview all adult

cases recommended for institutional treatment under the London County Council.

The Committee is composed of representatives from the Public Assistance Committee, the Employment Exchange, various voluntary organisations (Invalid Children's Aid Association, Charity Organisation Society, etc.), London County Council, and the Fulham Borough Council. The Tuberculosis Officer acts as Medical Adviser and the Clerk to the Dispensary as Secretary.

Many thanks are due to the Invalid Children's Aid Association for their great help during the past year, especially as regards the provision of convalescent home treatment for children, 25 of whom have been sent away for several weeks' holiday through them. In every case great benefit has resulted from the change; and there is no doubt that in certain cases the convalescence has been given at a critical time and has prevented much ill-health in after life.

The Children's Country Holiday Fund, the Charity Organisation Society and the United Services Fund have also helped us considerably in different directions, and to all these Societies I wish to express my great appreciation.

The following are two specimen cases supplied by Miss Sargent :—

- A. was a civil engineer who came to the Dispensary after a period of unemployment with savings exhausted and too ill to think of work. The home was given up; he was sent to sanatorium for prolonged treatment, while his wife found a post which enabled her to support herself, but the income was wholly insufficient on A's discharge.

A grant was obtained from the National Association for the Prevention of Tuberculosis for immediate necessities; and, with a great deal of persuasion, A. was induced to apply to a Benevolent fund in connection with engineering, and was given an allowance for a year.

Efforts, meanwhile, were made to find him suitable employment; but the ideal job, so often in sight, never actually

materialised and A. was beginning to lose heart, when an unexpected opening occurred. He was taken on the Staff of the sanatorium where he received treatment and was given a light, open-air job. He has found rooms in the village where his wife has been able to join him, and in country air, away from Fulham, it is hoped he will make good.

- B. was a young man, who returned to work after sanatorium treatment but gradually lost ground until he was forced to give up and eventually was confined to bed. Home conditions at the time were very unsuitable as the father had had a mental breakdown; there were two young children at home; sleeping accommodation was restricted and the mother was getting tired out with nursing and over-strain.

One of the children was admitted to High Wood Children's Hospital as an observation case, subsequently being notified as tubercular; the other was boarded out by the Invalid Children's Aid Association under the L.C.C.'s "contact" scheme: B. was finally persuaded to go into a General Hospital while his father was admitted to a Mental Home.

B. has since died and the children are back with their mother, whose income is supplemented by a grant from the Public Assistance Committee, while they are kept under the regular supervision of the Dispensary.

In conclusion, I wish to thank Dr. G. F. Hardy and all the members of the Dispensary staff for their loyal and most able support during the past year in carrying on the work of the dispensary.

SUMMARY OF STATISTICS, 1931.

No. of New Patients :—

Insured	...	...	...	...	...	...	263
Uninsured	...	...	...	...	...	...	345
Total	...	...	...	...	...	...	<u>608</u>

No. of Attendances :—

Insured	...	...	...	...	...	...	1,444
Uninsured	...	...	...	...	...	...	1,625
Attendances of Contacts	...	...	...	...	...	...	512
Total	...	...	...	...	...	...	<u>3,581</u>

No. of Patients who have attended, both old and new ... 1,388

No. of Notifications :—

Pulmonary	165
Non-pulmonary	24
Total	189

No. of Sputa examined	1,453
No. of Physical examinations	3,188
No. of Contacts examined	415
No. of Home visits paid by Doctors	213
Bedside consultations	79
Consultations otherwise	574
No. of Home visits paid by Nurses	4,156
No. of Reports sent to Public Bodies	543
No. of Reports sent to Doctors	732
No. of letters written	5,856
No. of Patients referred to Brompton Hospital... ..	4
For X-ray	122
No. of Notified Patients on Dispensary Books on 31/12/1931	903
No. of Patients sent away into institutions or to the country in 1931	230

TABLE IX.

230 Patients were sent to residential institutions on the recommendation of the Dispensary Medical Officers.

(a) 139 by the London County Council :—

	64 to Sanatoria.	3 to Colonies.	3 to Convalescent Homes.	69 to Hospitals.
Men	25	3	—	33
Women	26	—	—	33
Children	13	—	3	3

(b) 47 by the Public Assistance Committee :—

	26 to Hospitals.	21 to Sanatoria and Convalescent Homes.
Men	11	1
Women	9	4
Children	6	11

(c) 25 Children were sent to Convalescent Homes by the Invalid Children's Aid Association.

(d) 3 Children were boarded out under the L.C.C.'s Contact scheme.

- (e) 8 Children were sent away through the Children's Country Holiday Fund.
- (f) 1 Woman was sent away through the Women's Holiday Fund.
- (g) 5 Women were convalesced by the Charity Organisation Society.
- (h) 2 Women were convalesced by the United Services Fund.

TABLE X.
Showing Sources of New Cases.

262 were recommended by private doctors.

13	„	„	„ the Medical Officer of Health.
14	„	„	„ the School Medical Authority.
6	„	„	„ the School Authority.
52	„	„	„ Hospitals and Sanatoria.
21	„	„	„ other Dispensaries.
5	„	„	„ the Army Authorities.
9	„	„	„ the London County Council.
88	„	„	„ the Dispensary Staff.
39	„	„	„ friends.
8	„	„	„ other patients.
81	„	„	„ the door-plate.
9	„	„	„ the Invalid Children's Aid Association.
1 was	„	„	„ the District Nurse.

608

TABLE XI.

New Cases.	Pul- monary Tuber- culosis.	Other Forms.	Sus- pects.	Non- Tuber- cular.	Per- centage Tuber- culous.
294 Males ...	83	9	4	198	30·95
314 Females ...	76	11	3	224	27·70
608 both sexes	159	20	7	422	29·44

TABLE XII.

Sex and Age of New Patients for 1931.

	Un- der- 5 yrs.	5 to 10 yrs.	10 to 15 yrs.	15 to 25 yrs.	25 to 35 yrs.	35 to 45 yrs.	45 yrs. and over.	All ages.
Males...	28	56	27	48	48	36	51	294
Females	12	36	35	84	65	41	41	314
BothSexes	40	92	62	132	113	77	92	608

TABLE XIII.

Diagnosis at Various Age Periods. New Patients.

	Pul- monary Tuber- culosis.	Other Forms.	Sus- pects.	Non- Tuber- cular.	Per- centage Tuber- culous.
Under 5 years	—	1	—	39	2·5
„ 10 „ ...	3	3	1	85	6·52
„ 15 „ ...	5	2	1	54	11·29
„ 25 „ ...	42	7	2	81	37·12
„ 35 „ ...	46	3	2	62	43·36
„ 45 „ ...	24	3	—	50	35·06
45 and over ...	39	1	1	51	43·47
All ages ...	159	20	7	422	29·44

TABLE XIV.

Housing Conditions.

Of 166 of the 179 tuberculous patients found in 1931 :—

- 5 lived in the basement.
- 34 lived on the ground floor.
- 30 lived on the first floor.
- 15 lived on the second floor.
- 5 lived on the third floor.
- 1 lived on the fourth floor.
- 26 lived on the top floor.
- 20 lived on more than one floor (in many cases basement and ground).
- 30 lived in the whole house.

TABLE XV.
Housing Accommodation.

	Numbers of Families occupying					
	One room.	Two rooms.	Three rooms.	Four rooms.	Five rooms.	Six rooms or more.
Patient living alone	9	1	1	—	—	—
Patient living with—						
1 other	4	6	12	2	—	1
2 others... ..	6	3	21	2	1	1
3 „	1	2	15	12	3	3
4 „	—	4	4	7	3	4
5 „	—	1	7	6	4	3
6 „	—	1	2	4	1	3
7 „	—	—	2	1	—	—
8 „	—	—	—	1	—	1
9 „	—	—	—	—	—	1
	20	18	64	35	12	17

TABLE XVI.
Sleeping Accommodation of 166 Tuberculous Patients.

The patient slept :—

In a separate room in... ..	62 cases.
Alone in bed with 1 other in room in	15 cases.
„ „ 2 others „	5 cases.
„ „ 3 „ „	3 cases.
In bed with 1 person and no others in room in	49 cases.
„ „ „ 1 other „	22 cases.
„ „ „ 2 others „	6 cases.
„ „ „ 3 „ „	1 case.
In bed with 2 persons and no other in room in	2 cases.
„ „ „ 1 „ „	1 case.

166 cases.

TABLE XVII.

Occupations of 84 Men (New Cases) in 1931.

1 Able Seaman.	1 Liftman.
1 Baker.	1 Mechanic.
1 Bookbinder.	1 Milk roundsman.
1 Brass finisher.	1 Mineral water bottler.
1 Canvasser.	1 Motor coach builder.
3 Carpenters.	3 Motor drivers.
1 Chemist.	1 Motor fitter.
11 Clerks.	3 Musicians.
1 Collector.	1 Newsvendor.
1 Civil Servant.	1 Optician.
1 Engineer.	4 Painters.
1 Factory hand.	1 Palmist.
1 Fitter's mate.	1 Pewterer.
4 Foremen.	4 Shop or flat porters.
1 Furniture packer.	1 Postman.
1 Gas fitter.	1 Press setter.
1 Grocer's assistant.	1 Stoker.
1 Hot water fitter.	1 Tailor.
2 Hairdressers.	1 Traveller.
1 Handyman.	1 Tyre finisher.
8 Labourers.	1 Upholsterer.
	1 Waiter.
	2 Watchmakers.
6 No occupation.	

Occupations of 81 Women (New Cases) in 1931.

1 Bookkeeper.	1 Laboratory assistant.
1 Cashier.	1 Machinist.
1 Checker.	1 Nurse.
3 Clerks.	1 Packer.
2 Cooks.	1 Pastry-cook.
1 Counter hand.	1 Pastry packer.
6 Daily workers.	1 Printer.
6 Domestic.	1 Printer's folder.
1 Domestic trainee.	1 Saleswoman.
1 Dressmaker.	3 Shop assistants.
1 Factory hand.	4 Waitresses.
35 Housewives.	1 Wire joiner.
1 Laundry sorter.	1 Wireless assembler.
3 No occupation.	

Under 15 years of Age.

8 Boys.

6 Girls.

GENERAL SANITARY ADMINISTRATION.

BACTERIOLOGICAL EXAMINATIONS.

Of the 3,484 specimens sent by doctors during the year, 3,032 were examined at the Council's Laboratory, 114, New King's Road. The remaining 452 specimens were examined by the Clinical Research Association during week-ends, holidays and emergencies.

Bacteriological examinations were made during the year as follows :—

Material from cases of suspected Diphtheria :—

Diphtheria isolated	...	...	...	...	114
Negative result	...	...	...	...	1,669

Blood from cases of suspected Enteric Fever :—

Agglutination reaction for Typhoid or Para-

Typhoid obtained	...	...	...	...	3
Negative result	...	...	...	...	8

Pathological specimens for Enteric Organisms :—

Positive result	...	...	...	...	—
Negative result	...	...	...	...	11

Sputa from cases of suspected Tuberculosis :—

Tubercle bacilli found	...	...	...	...	249
Tubercle bacilli not found	...	...	...	...	1,218

Blood from suspected cases of Puerperal Fever :—

Positive result	...	...	...	...	13
Negative result	...	...	...	...	34

Cases of suspected Gonorrhœa :—

Gonococcus found	...	...	...	...	6
Gonococcus not found	...	...	...	...	70

Examinations of Urine ... | ... | ... | ... | 49 |

Blood counts ... | ... | ... | ... | 1 |

Other examinations ... | ... | ... | ... | 28 |

Special examinations of :—

Sputa	...	...	...	...	...	4
Urine	...	...	...	...	...	7

Total number of examinations ... | ... | ... | ... | 3,484 |

DISINFECTION.

The following rooms were disinfected and cleansed after infectious disease, etc. :—

Scarlet Fever	...	...	455	Ringworm	...	...	...	1
Diphtheria	...	...	301	Chickenpox	...	...	...	6
Phthisis	...	...	227	Influenza	...	...	...	1
Erysipelas	...	...	64	Septic Pneumonia	...	...	...	6
Smallpox	...	...	11	Encephalitis Lethargica	...	...	...	1
Cancer	...	...	31	Cerebro-Spinal Meningitis	...	...	...	7
Measles	...	...	5	Whooping Cough	...	...	...	3
Puerperal Fever	...	...	11	Puerperal Pyrexia	...	...	...	8
Scabies	...	...	31	Rooms fumigated for Vermin	...	...	...	87
Enteric Fever	...	...	6	Rooms sprayed	...	...	...	14
Mumps	...	...	1	Rooms fumigated by request	...	...	...	47
Poliomyelitis	...	...	2	Bedding, etc., destroyed by	...	...	...	20
Nephritis	...	...	1	request	...	...	...
				Total	...	...	...	1,347

The following articles were disinfected at the Council's Disinfecting Station :—

Articles.	From Private Houses.	From Institu- tions.	Total.
Beds	530	5	535
Mattresses	876	60	936
Palliasses	16	—	16
Pillows	1,803	98	1,901
Cushions	239	—	239
Bolsters	577	2	579
Blankets	2,009	515	2,524
Sheets	1,282	104	1,386
Covers... ..	240	83	323
Counterpanes	579	1	580
Curtains	7	—	7
Carpets	160	—	160
Hearth rugs	506	2	508
Articles of clothing	3,025	1,000	4,025
Eiderdowns	231	—	231
Sundries	1,133	356	1,489
TOTALS	13,213	2,226	15,439

PUBLIC MORTUARY.

One hundred and thirty bodies were removed to the Mortuary during 1931, and were admitted as follows :—

By order of the Coroner	...	...	115
Brought by the Police	...	...	4
For convenience till funeral	...	...	11
			<hr/>
TOTAL	...		130
			<hr/>

The number of inquests held during the year was 97 and in 56 of these cases post-mortem examinations were made. The total number of post-mortem examinations made during the year was 78.

SANITARY INSPECTION OF THE DISTRICT.

The ultimate aim of sanitary inspection is to promote the health of the inhabitants of the district and to lower the death-rate.

The duties of a sanitary inspector are many and varied, but are mainly in connection with housing, drainage and inspection of food, food premises, workshops and workplaces, and other places where work is done for profit. The inspection of factories is principally the duty of inspectors appointed by the Home Office but Local Authorities have also certain functions in factories which are carried out in co-operation with the Factory Inspector.

The following inspections of dwelling-houses were made during the year by the Sanitary Inspectors :—

<i>Cause.</i>	<i>Premises Inspected.</i>
In consequence of complaint ...	2,712
In consequence of infectious disease ...	810
House-to-house initial inspections ...	740
Re-inspections ...	18,390

The following notices were served :—

Intimation Notices.		Statutory Notices.	
Number served.	Number complied with up to 31st December, 1931.	Number served.	Number complied with up to 31st December, 1931.
3,123	2,591	569	553

The following works were carried out and repairs effected as a result of the action of the Sanitary Inspectors :—

Drainage :

Drains tested	2,266
Drains relaid	220
Drains repaired	482
Drains cleared	191
New W.C. pans provided	430
W.C. traps cleared, repaired and cleansed	129
Soil pipes repaired	51
Soil pipes renewed	202
Gutters and pipes repaired or renewed	381
Sinks and baths repaired and fixed ...	121
Waste pipes repaired and renewed ...	242
Yards and forecourts paved	441
Roofs repaired	750
Other external repairs	773
Flushing cisterns repaired and renewed...	244
Drinking-water cisterns repaired and cleansed... ..	130
Water provided from main	51
Dustbins provided	867
Dampness remedied	890
Internal house repairs	5,545
Rooms cleansed	3,927
Refuse removed	188
Animals in a state of nuisance	13
Other nuisances remedied... ..	58
Verminous rooms remedied	140
Rat runs traced	27
Houses provided with water supply ...	2

The following additional matters were dealt with by the Sanitary Inspectors :—

Ice Cream Premises :—					
Number of inspections	...	...	...	290	
Other food premises :—					
Number of inspections	...	...	...	1,013	
Smoke nuisances :—					
Complaints	...	...	...	7	
Observations	...	...	...	206	
Notices served	...	...	...	1	
Number abated	...	...	...	1	

Apart from these duties there are others such as the inspection of markets and food barrows and the supervision of slaughtering and slaughterhouses.

Drainage of Buildings. The following drainage plans were submitted to and approved by the Public Health Committee during 1931 :—

Plans of drainage of new buildings :—

Houses	...	...	...	—
Flats	...	...	...	480
Shops (large store)	...	...	...	1
do. (lock-up)	...	...	...	43
Jam Factory	...	...	...	1
Workshops (large)	...	...	...	6
Offices	...	...	...	4
Service Stations	...	...	...	2
Garages (large)	...	...	...	2
do. (lock-up)	...	...	...	14
Sub-Station	...	...	...	1
				— 554

Additions to existing buildings :—

Conversion to flats	...	...	...	20
Additions to shops	...	...	...	7
do. garages	...	...	...	4
do. offices	...	...	...	2
do. warehouses	...	...	...	1
do. public houses	...	...	...	3
do. workshops	...	...	...	2
Water closets, etc.	...	...	...	35
Social Centre	...	...	...	1
				— 75

Reconstruction of drains of existing buildings 141

The supervision of the work, with the exception of reconstruction, is in the hands of Inspector A. J. Parsons the Council's Drainage Inspector. In connection therewith he paid 1,356 visits to works under construction.

Combined Drainage. During the year under review the Council authorised the carrying out of work in connection with Combined Drainage in eight cases.

Work of the Female Inspector. The greater part of the work under the Factory and Workshops Act was undertaken by the Woman Sanitary Inspector, Mrs. Davies. During the year under review she carried out the following work :—

	<i>Visits.</i>	<i>Notices served.</i>
To Factories	71	3
To Workshops and Workplaces	188	19
To verminous cases and infirm and dirty tenants	69	7
To food kitchens	170	19
Infectious diseases enquiries ...	51	2
To outworkers	479	17

FACTORIES, WORKSHOPS AND WORKPLACES (Factory and Workshop Act, 1901.)

I.—INSPECTIONS MADE BY SANITARY INSPECTORS.

Premises. (1)	Number of		
	Inspections. (2)	Written notices. (3)	Prosecutions. (4)
Factories (including factory laundries)	143	33	—
Workshops (including workshop laundries)	360	56	—
Workplaces (other than outworkers' premises)	509	18	—
Outworkers' premises	1012	107	—
Total			

II.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars. (1)	Number of Defects.			No. of Prosecutions. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
<i>Nuisances under the Public Health Acts :—</i>				
Want of cleanliness	33	33	—	—
Want of ventilation	1	1	—	—
Overcrowding... ..	2	2	—	—
Want of drainage of floors	1	1	—	—
Other nuisances... ..	72	72	—	—
Sanitary accommodation—				
Insufficient... ..	9	9	—	—
Unsuitable or defective	74	74	—	—
Not separate for sexes	2	2	—	—
<i>Offences under the Factory and Workshop Acts :</i>				
Illegal occupation of underground bake-house (s. 101)	—	—	—	—
Other offences	1	1	—	—
(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	195	195	—	—

OUTWORK IN UNWHOLESOME PREMISES, SECTION 108.

Nature of Work.	Instances.	Notices served.	Prosecutions.
(1)	(2)	(3)	(4)
Wearing apparel—			
Making, etc.	18	18	—
Cleaning and washing ...	—	—	—
Household linen	—	—	—
Lace, lace curtains and nets ...	—	—	—
Curtains and furniture hangings	—	—	—
Furniture and upholstery ...	—	—	—
Electro-plate	—	—	—
File making	—	—	—
Brass and brass articles ...	—	—	—
Fur pulling	—	—	—
Cables and chains	—	—	—
Anchors and grapnels... ..	—	—	—
Cart gear	—	—	—
Locks, latches and keys ...	—	—	—
Umbrellas, etc.	—	—	—
Artificial flowers	—	—	—
Nets, other than wire nets ...	—	—	—
Tents	—	—	—
Sacks	—	—	—
Racquet and tennis balls ...	—	—	—
Paper, etc., boxes, paper bags	—	—	—
Brush making	—	—	—
Pea picking	—	—	—
Feather sorting	—	—	—
Carding, etc., of buttons, etc.	—	—	—
Stuffed toys	—	—	—
Basket making... ..	—	—	—
Chocolates and sweetmeats ...	—	—	—
Cosaques, Christmas crackers,			
Christmas stockings, etc. ...	—	—	—
Textile weaving	—	—	—
Lampshades	—	—	—
TOTAL	18	18	—

FOOD SHOPS AND FOOD STALLS.

All food stalls, shops, barrows and the Fulham Market are kept under careful supervision ; and in

addition, two of the Sanitary Inspectors have been on special duty, as in previous years, on two evenings a week in connection with these premises.

The Merchandise Marks Act, 1926 and the Merchandise Marks (Imported Goods) Orders.

The inspections under the Act and Orders were made at food shops, stalls and barrows at the same time as other food inspections.

It was not found necessary to institute proceedings but warning notices were sent when necessary.

Copies of the "Notice to Shopkeepers" and the "Short Notice to Traders," issued by the Ministry of Agriculture and Fisheries at the end of 1930 were sent to 400 shopkeepers and traders. These notices explain the provisions of the Act and Orders and have been found very helpful.

I also prepared a memorandum on the Merchandise Marks Act, 1926 and the Agricultural Produce (Grading and Marking) Act, 1928 during the year, copies of which were handed to the sanitary inspectors.

In connection with the Merchandise Marks Act a circular letter from the Ministry of Agriculture and Fisheries to Food and Drugs authorities, dated 28th October, 1931, is of interest. It explains that the object of the Orders is to enable purchasers to distinguish between goods of Home, Empire and Foreign origin and thus to allow them to take into account the factor of origin when making their selection. It also suggests that the Council, by securing wide-spread observance of these Orders, would be aiding the general public to encourage British industry.

Slaughterhouses. There are two licensed slaughterhouses in the borough situate at :—

No. 611, Fulham Road.

No. 640, King's Road.

During the year Inspector Manning made 79 visits of inspection to these premises. The slaughterhouses, lairs and utensils have been kept in a cleanly condition.

Milk. Of the 540 samples examined, three or 0·55 per cent. were adulterated as compared with 0·7 in 1930, 4·7 in 1929 and 2·5 in 1928.

Details of legal proceedings instituted by the Council will be found on page 90.

Milk Sellers.

Number on Register, 31st December, 1930	...	222
Number who transferred their business during the year 1931	... ..	11
		<hr/> 211
Number of Registrations granted during the year		12
		<hr/> 223
Number on Register, 31st December, 1931	...	<hr/> <hr/> 223

During the year forty-two applications were received for permission to sell bottled sterilised milk from premises which were not suitable for registration as dairies. The registrations were granted, provided the milk was not to be sold otherwise than in the properly closed and unopened receptacles in which it was delivered to the premises. The sale of milk in shops other than dairies has been increased recently owing to the introduction of sealed cartons instead of bottles.

THE MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

The following applications for Licences under this Order were granted for the year 1931 :—

Number of Licences to sell certified milk	...	8
Number of supplementary Licences to sell certified milk	... ..	1
Number of Licences to sell Grade " A " (Tuberculin Tested) milk	... ..	19
Number of supplementary Licences to sell Grade " A " (Tuberculin Tested) milk	... ..	1
Number of Licences to bottle and sell Grade " A " (Tuberculin Tested) milk	... ..	1
Number of Licences to sell Grade " A " milk	...	6
Number of Licences to sell Pasteurised milk	...	14
Number of Licences to Pasteurise milk	... ..	1
Number of samples taken in accordance with the instructions of the Ministry of Health	...	Nil

The Ministry of Health in a Memorandum published in 1931 give a statement of the present position as to the number of cases of tuberculosis caused by infection from cattle. The majority of cases of tuberculosis are of course spread by human agency. It seems probable, however, that more than 1,000 children under 15 years of age die annually in England and Wales from bovine tuberculosis and in the great majority of these cases the disease is caused by the consumption of the milk of tuberculous cows.

Much valuable information is also given as to the incidence of the bovine type of tuberculosis in cattle and man. The proportion of cows yielding tuberculous milk in this country is probably from one to one-and-a-half per cent. Milk is however, mixed before distribution to the public and from 5 to 7½ per cent. of the milk samples examined have been found to contain living tubercle bacilli. In other words more than one out of every 20 samples examined are tubercular.

Parents are well advised not to give their children raw cow's milk but to use pasteurised milk unless they are using one of the other special milks such as "Certified" and "Grade 'A' (Tuberculin Tested)" which are produced, under a special licence, from healthy tuberculin-tested cows. These two milks, however are more expensive than pasteurised milk.

Pasteurisation (heating the milk to a temperature of 145° to 150° F. for 30 minutes and then immediately cooling it to a temperature of not more than 55° F.) if efficiently carried out kills not only tubercle bacilli but other disease germs as well.

Milk sold as "Pasteurised" must, according to the Milk (Special Designations) Order, 1923, comply with certain specified bacterial tests, whereas ordinary milk need not conform to these tests. Pasteurised milk is very little, if at all, inferior in food value to milk which has not been treated and is much safer. Even if one does admit a slight loss of vitamin C and mineral

substances owing to pasteurisation the loss of vitamin C in the diet can be remedied by giving orange or tomato or their juices and any deficiency of mineral substances by green vegetables and wholemeal bread. Many other articles of food are also rich in vitamin C and mineral substances.

I do not wish to infer that pasteurisation is the only factor in a clean milk supply as if an ideal supply could be obtained, pasteurisation would then be unnecessary. Clean and healthy cattle, personally clean and healthy workers, clean utensils and hygienic methods are all necessary and milk traders are doing a great deal to attain these objects. Notwithstanding all that has been done, however, pasteurisation is a wise safeguard.

Once milk has been delivered to the home every care should be taken to retain its purity and cleanliness. It should be kept cool, and in a clean vessel and covered to prevent contamination by dust and flies and milk vessels should be cleansed with boiling water.

Milk is such a valuable food especially for the younger generation that we should do everything to promote its health-giving properties and make its use more general than at present.

BACTERIOLOGICAL EXAMINATION OF MILK.

Pasteurised Milk. Six samples of milk in bottles labelled "Pasteurised Milk" were examined bacteriologically during the year and in all cases the samples complied with the standard laid down in the Milk (Special Designations) Order, 1923. Under this Order pasteurised milk must not contain more than 100,000 bacteria per cubic centimetre of milk. The Table on page 85 shows the results of the examinations in greater detail.

Undesignated Milk. No bacterial standard can be insisted upon for ordinary milk but, as is well known, most of the milk sold in London is pasteurised although not labelled as such. Samples of bottled milk sold as milk without any special designation were

examined bacteriologically with the results shown in the Table on page 85. All the samples except six, however, contained less than 100,000 bacteria per c.c. and the great majority were well within the standard for pasteurised milk. These tests are of assistance as an object lesson to the dairymen and their employees, showing the necessity for hygienic methods, especially in bottling.

Sterilised Milk. This is milk which has been heated to a much greater extent than pasteurised milk. All the germs are killed, not only those which are capable of producing disease, but also those which cause decomposition of the milk on being kept.

Sterilised milk therefore, keeps much longer than either ordinary or pasteurised milk, and for that reason it is used when daily supplies are unobtainable, as on board ship. It is also useful for export, especially to warm countries. Sterilised milk has, however, been subjected to so much heat that most of the vitamins are destroyed and the heat also causes some of the valuable lime salts to be deposited and partially lost. Pasteurised milk is much to be preferred, besides being cheaper. Sterilised milk should not be used as a routine food for infants.

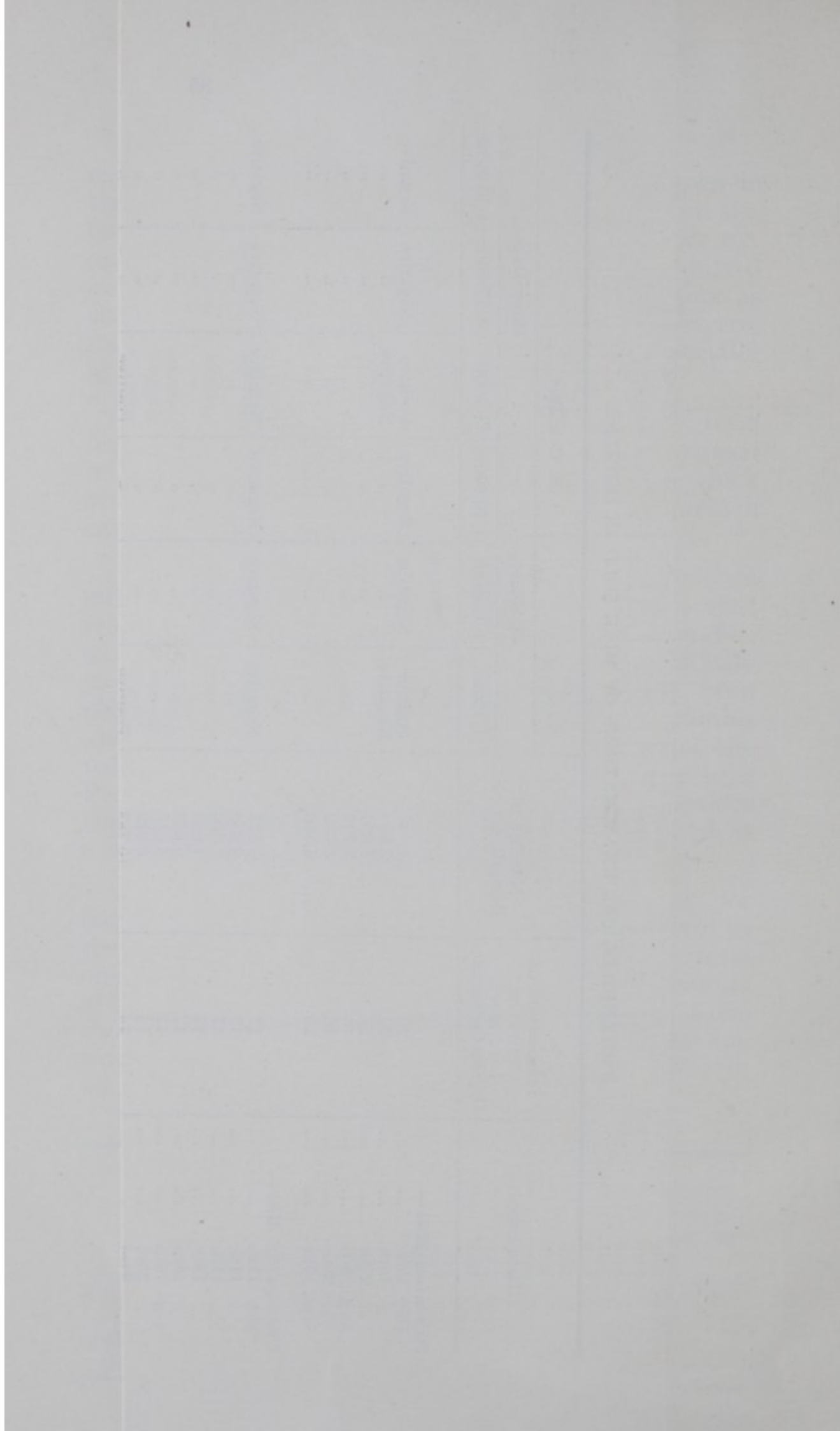
Six samples were taken during the year for bacteriological examination with the results shown in the table. It will be seen that according to the tests only one sample was absolutely sterile, four gave counts of less than 100 bacteria per cubic centimetre, and one showed 380 bacteria per cubic centimetre. As one would expect, the bacillus coli tests were negative in all six cases.

MILK AND CREAM.

Articles.	Number of samples examined for the presence of a preservative.	Number of samples in which a preservative was found to be present.
Milk and separated milk	543	—
Cream (including tinned cream) ...	8	—

BACTERIOLOGICAL EXAMINATIONS OF MILK SOLD IN BOTTLES.

Date taken.				Temperature on arrival at Laboratory. Degrees Centigrade.	Number of Bacteria per c.c.	B. Coli Test.						
						48 Hours.			Three Days.			
						1/100th.	1/1,000th.	1/10,000th	1/100th.	1/1,000th.	1/10,000th.	
<i>Pasteurised Milk—</i>												
July	10th	...	...	20	34,800	Positive	Negative	Negative	Positive	Negative	Negative	
"	10th	...	...	20	2,590	Negative	"	"	Negative	"	"	
"	24th	...	...	17	1,833	"	"	"	"	"	"	
Aug.	28th	...	...	16	3,723	"	"	"	"	"	"	
"	28th	...	...	16	4,660	"	"	"	"	"	"	
Sept.	10th	...	...	15	6,660	"	"	"	"	"	"	
<i>Undesignated Milk—</i>												
May	11th	...	...	17	575	Negative	Negative	Negative	Negative	Negative	Negative	
"	11th	...	...	17	8,890	"	"	"	"	"	"	
"	11th	...	...	17	7,796	"	"	"	"	"	"	
"	18th	...	...	17	4,660	"	"	"	"	"	"	
"	18th	...	...	17	9,853	"	"	"	"	"	"	
"	18th	...	...	17	9,016	"	"	"	"	"	"	
"	23rd	...	...	14	6,913	"	"	"	"	"	"	
"	23rd	...	...	14	10,783	Positive	"	"	"	"	"	
"	23rd	...	...	14	11,920	Negative	"	"	Positive	"	"	
June	1st	...	...	20	57,650	Positive	"	"	Negative	"	"	
"	2nd	...	...	20	49,800	Negative	"	"	Positive	"	"	
"	2nd	...	...	25	6,023	"	"	"	Negative	"	"	
"	15th	...	...	20	559,500	Positive	Positive	"	"	"	"	
"	15th	...	...	20	348,000	"	"	"	Positive	Positive	"	
"	15th	...	...	20	20,133	Negative	Negative	"	"	"	"	
"	15th	...	...	20	70,166	"	"	"	Negative	Negative	"	
"	15th	...	...	20	55,133	"	"	"	"	"	"	
"	15th	...	...	20	38,633	"	"	"	"	"	"	
July	10th	...	...	20	8,656	"	"	"	"	"	"	
"	10th	...	...	20	48,533	"	"	"	"	"	"	
"	13th	...	...	20	4,656	"	"	"	"	"	"	
"	7th	...	...	20	569,500	Positive	"	"	Positive	"	"	
"	9th	...	...	20	299,000	"	Positive	"	"	Positive	"	
"	13th	...	...	20	28,650	"	"	"	"	"	"	
"	13th	...	...	20	65,166	"	Negative	"	"	Negative	"	
"	13th	...	...	20	35,900	Negative	"	"	"	"	"	
"	13th	...	...	20	47,966	"	"	"	Negative	"	"	
"	20th	...	...	19	297,000	Positive	Positive	"	Positive	Positive	"	
"	20th	...	...	19	527,000	"	Negative	"	"	Negative	"	
"	20th	...	...	19	38,800	"	"	"	"	"	"	
"	20th	...	...	19	5,016	Negative	"	"	Negative	"	"	
"	20th	...	...	19	59,650	Positive	"	"	Positive	"	"	
"	24th	...	...	17	5,766	Negative	"	"	Negative	"	"	
"	24th	...	...	17	5,800	"	"	"	"	"	"	
"	24th	...	...	17	8,933	"	"	"	"	"	"	
"	24th	...	...	17	16,733	"	"	"	"	"	"	
Aug.	28th	...	...	16	6,663	"	"	"	"	"	"	
"	28th	...	...	16	6,913	Positive	"	"	Positive	"	"	
"	28th	...	...	16	20,100	Negative	"	"	Negative	"	"	
"	31st	...	...	16	7,010	"	"	"	"	"	"	
"	31st	...	...	16	7,653	"	"	"	"	"	"	
"	31st	...	...	16	6,593	"	"	"	"	"	"	
"	31st	...	...	16	6,730	Positive	"	"	"	"	"	
"	31st	...	...	16	7,653	Negative	"	"	Positive	"	"	
Sept.	10th	...	...	15	3,726	"	"	"	Negative	"	"	
"	10th	...	...	15	24,800	Positive	"	"	Positive	"	"	
"	10th	...	...	15	4,863	Negative	"	"	Negative	"	"	
"	10th	...	...	15	5,023	"	"	"	"	"	"	
<i>Sterilised Milk—</i>												
June	2nd	...	...	20	50	Negative	Negative	Negative	Negative	Negative	Negative	
"	2nd	...	...	20	10	"	"	"	"	"	"	
July	10th	...	...	20	60	"	"	"	"	"	"	
"	20th	...	...	19	380	"	"	"	"	"	"	
"	24th	...	...	17	Nil	"	"	"	"	"	"	
Sept.	10th	...	...	15	80	"	"	"	"	"	"	



Bakehouses. There are 66 registered bakehouses in the borough of which 37 are underground. Inspector C. B. Jones made 191 visits and served ten written notices, principally for the cleansing of the interiors of the bakehouses.

Manufacture, Storage and Sale of Ice Cream. All premises used for these purposes must be registered under Section 29 of the London County Council (General Powers) Act, 1928, but the provisions do not apply to premises registered as a factory or workshop or to an hotel, restaurant or club.

At the end of 1930, 104 premises were on the register and during the year 1931, 29 new premises were registered so that the total at the end of 1931 was 133. The 133 registrations are as follows :—

Premises registered for the manufacture, storage and sale of ice cream	...	...	...	...	66
Premises registered for the storage and sale of ice cream	...	...	...	...	58
Premises registered for the manufacture and storage of ice cream	...	...	...	...	6
Premises registered only for the manufacture of ice cream	...	...	...	...	1
Premises registered only for the storage of ice cream	...	...	...	...	2
					<hr/>
					133
					<hr/>

Unsound Food. The undermentioned articles, examined at the request of the owners, were condemned and destroyed during the year :—

Corned Beef	...	...	...	...	24 tins
Haddocks	...	...	...	...	1 parcel
Apples	...	...	...	...	35 boxes
Winkles	...	...	...	...	5 gallons
Tomatoes	...	...	...	...	8 boxes
Sardines	...	...	...	...	600 tins
Soft Roe	...	...	...	...	1 box
Rabbit	...	...	...	...	1
Sheep's carcass	...	...	...	...	1

Samples of Food Purchased for Analysis. Particulars of samples purchased for Analysis during the year together with the results of the analysis will be found on page 107.

THE FOOD AND DRUGS (ADULTERATION) ACTS.

The following are particulars of proceedings taken during 1931 under the above-mentioned Acts :—

Defendant.	Offence.	Result.	Costs.
Stanley J. Peachey, 6, Warminster Square, S.E. 25	Selling malt vinegar not of the nature, etc., demanded.	Dismissed under P.O. Act on payment of costs.	£ s. d. 2 2 0

FOOD POISONING.

No cases of Food poisoning were reported during the year.

RAG FLOCK ACTS, 1911 AND 1928.

There are no premises in Fulham at which rag flock is manufactured, used or sold.

INCREASE OF RENT AND MORTGAGE INTEREST (RESTRICTIONS) ACTS.

Fourteen applications for certificates that the houses occupied were not in all respects reasonably fit for human habitation or were otherwise not in a reasonable state of repair were made during 1931.

Certificates were granted in twelve cases, and two applications were withdrawn.

Five applications for " Clearance " Certificates were made by owners and granted

RAT DESTRUCTION.

Two hundred and thirty-seven formal complaints regarding infestation by rats were received during the year and poison baits were laid in the following positions :—

Private houses	...	...	...	...	295
Other premises	...	...	...	...	61
Sewers	...	...	...	...	1,071

The special dustbin traps in the sewers have accounted for the death of 661 rats during the year, and break-back traps and ferrets have accounted for 479 rats.

The amount received by the Council from property owners for the services of the Rat Officer was, during 1931, £20 5s. 0d.

Upon inspection of the premises concerning which complaints were received it was found that in 43 cases the drains were defective and in 14 cases the rats were coming from defects in the sewers. In all these cases the necessary repairs and relaying of the drains and sewers have been carried out.

Until 9th June, 1931, the arrangements detailed in my last report for the work of rat repression still obtained. On that date however, Mr. Harvey who had been part-time Rat Officer to the Council for ten years, retired, and Mr. J. Gigner who had been acting as his assistant, was appointed as full-time Rat Officer.

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

The purport of this section, whose provisions were described in detail in the annual report for 1928, is to enable the Medical Officer of Health to obtain the compulsory removal to an institution of aged and infirm or physically incapacitated persons who are living under insanitary conditions and unable to devote to themselves or to receive from persons with whom they reside, proper care and attention. Removal

may be necessary either in the interest of the health of the individual mainly concerned or in order to prevent injury to the health of, or serious nuisance to other persons. Old people will suffer many deprivations to retain their own homes and belongings, however humble, and applications are only made to the Magistrates where all other methods of dealing with the cases fail and it is impossible to obtain help from relatives or others.

The problem of how best to assist the aged and friendless poor without undue interference and without creating offence is a difficult and delicate one. Persons originating from all grades of society are met with in dealing with these cases—from casual labourers to Russian aristocrats—reminding us of the ever moving wheel of fortune and the interchangeability of the classes, especially manifest since the world crisis.

During 1931, one application was made to the Magistrate for an Order in respect of an aged man and he was removed to the Fulham Institution in accordance with the Order.

A number of other cases were also investigated in which an application to the Magistrate was not necessary as suitable arrangements were made for their care.

Legal Proceedings. Proceedings were instituted in the following cases during the year :—

Defendant.	Offence.	Result.	Penalty.	Costs.
North, Mrs. S., 3, Argyle Mansions	Fouling of footpath by dog	Fined.	£ s. d. 0 5 0	£ s. d. 0 2 0
Walker, John, 23, Dawes Road	Overcrowding	Order to abate	—	0 5 0
Handley, Thos. 40, Archel Road	Ditto	Ditto	—	0 5 0
Hunt, Mrs. H., 51, Talgarth Road	Nuisance— 3, Darlan Road	Abated	—	0 3 0
Walker, John, 23, Dancer Road	Failing to comply with Order	Withdrawn, abated	—	—

Defendant.	Offence.	Result.	Penalty.	Costs.
Hearn, Albert, 137, Estcourt Road	Filling milk bottles otherwise than on registered premises	Fined	0 10 0	0 5 0
Tutte, Arthur, 8, Lavender Terrace, S.W. 11	Ditto	Ditto	0 10 0	0 5 0
Hadder, Thos., 37, Burnthwaite Road	Ditto	Ditto	0 15 0	—
Carne, Hugh, 750, Fulham Road	Nuisance— 26, Heckfield Place	Order within 7 days	—	0 10 0
Ditto	Nuisance— 206, Munster Rd.	Fined	5 0 0	—
Atkins, Henry, 17, Star Road	Overcrowding	Order within 6 weeks	—	0 10 0
Smith, D. Ramsay, 17, Parsons Green	Failing to comply with drainage notice	Fined	5 0 0	1 1 0
Ditto	Obstructing Council's Officer	Withdrawn on under- taking	—	—
Rayner, W. J., Ltd, 40, Lower Richmond Road, S.W. 15	Failing to give notice of drainage at 25, Avalon Road	Fined	2 0 0	—
Ditto	Nuisance— 25, Avalon Road	Ditto	5 0 0	2 2 0
Defries, Sidney, 99, Wandsworth Bridge Road	Nuisance— 99, Wandsworth Bridge Road	Order to abate within 21 days	—	2 2 0
Reps, Ltd., 397, Albany Rd., Camberwell	Failure to give notice of intended repairs to drainage, 68, Elbe Street	Dismissed under P.O. Act on payment of costs	—	2 2 0
Harley, W., 5, Mund Street	Nuisance— 10, Eli Street	Adjourned <i>sine die</i> to enable com- pletion of work as promised	—	0 9 0
Lance, Norman A., 111, Estcourt Road	Fouling of footpath by dog	Dismissed under P.O. Act	—	0 3 0
Bird, May, 12, Wellesley Mans.	Ditto	Ditto	—	0 3 0

PUBLIC CONVENIENCES.

The accommodation detailed in my report for last year and the general arrangements for the control of the conveniences in the borough have remained unchanged.

HOUSING CONDITIONS.

In last year's annual report the housing conditions prevailing in the borough were reviewed in considerable detail so that it is unnecessary for this to be repeated in the present report.

Most of the inspections of houses are done on complaints being received from occupiers and on the occurrence of infectious diseases such as Scarlet Fever and Diphtheria. Housing is a fundamental factor in relation to health and the inspectors are fully alive to their responsibilities in this respect as well as to the importance of imparting information on practical sanitary questions and on health matters generally whenever it is needful and tactful to do so. In order to carry out their duties thorough training and practical experience are necessary and it is worthy of note that in addition to their qualifying certificates, most of the inspectors possess other certificates obtained by examination.

Changes of staff are inevitable but frequent changes prevent continuity of action. Fortunately during 1931 such changes have been few and closer co-ordination between the work of the various inspectors and between the Public Health and other departments has been possible.

The following table gives the housing statistics in the form desired by the Minister of Health.

Year ending 31st December, 1931.

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

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	4,262
(b) Number of inspections made for the purpose ...	22,652

(2) (a)	Number of dwelling-houses (included under subhead (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	740
(b)	Number of inspections made for the purpose	3,412
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	7
(4)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	3,116
2.	<i>Remedy of Defects during the year without Service of Formal Notices :—</i>	
	Number of dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers...	2,591
3.	<i>Action under Statutory Powers during the year :—</i>	
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	136
(2)	Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a)	By owners	124
(b)	By Local Authority in default of owners	—
B.	Proceedings under Public Health Acts :—	
(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	433
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a)	By owners	429
(b)	By Local Authority in default of owners	—
C.	Proceedings under sections 19 and 21 of the Housing Act, 1930 :—	
(1)	Number of dwelling-houses in respect of which Demolition Orders were made	—
(2)	Number of dwelling-houses demolished in pursuance of Demolition Orders	—
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	—
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	—

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

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

F. Proceedings under sections 11, 14 and 15 of the Housing Act, 1925

...	—
-----	-----	-----	-----	---

House to House Inspection. In addition to the inspections made by the District Sanitary Inspectors on complaint and after infectious diseases and the special surveys made by the Council's temporary Housing Inspector, house-to-house inspections were made during the year by the Housing Inspector under the Public Health (London) Act, 1891, the Housing Act, 1925, the Housing (Consolidated) Regulations, 1925 and the London County Council Byelaws with respect to houses divided into separate tenements.

The statistics were as follows :—

Initial inspections...	...	...	...	193
Re-inspections	...	...	...	2,232
Annual re-inspections	...	...	...	66
Houses registered during the year	...			41

These inspections necessarily take much more time than inspections made on complaint, as a more detailed inspection is made. A large number of re-inspections was made in respect of the work of the previous housing inspector and it was therefore some time before the new inspector could settle down to make his own inspections.

Considerable improvement in housing conditions has resulted from this work and the owners, with few exceptions, have given the Department much assistance. Many of the houses reflect very great credit on the tenants and good tenants are in the majority.

Better education and publicity on health matters are factors in bringing about this result. Some of the tenants, however, do not appreciate the necessity of attending to the ordinary rules of cleanliness and do not realise their responsibilities as tenants. House-to-house inspection is of special value in such cases, which require more frequent visits and compulsory measures have to be adopted when persuasion fails to bring about the desired result.

On 14th December I made a representation and report to the Public Health Committee that seven houses in Argon Mews were in my opinion unfit for human habitation and not capable at a reasonable cost of being rendered fit.

The representation was considered by the Committee and it was decided to serve notices on the owner under the Public Health (London) Act, 1891. The works specified in the notices have now been completed.

Surveys under the Housing Act, 1930. Housing surveys were made during 1931 in several areas in the borough.

Fane Street Area. This area is approximately two acres in extent and contains 58 houses, 26 in Fane Street, 13 in Fane Place and 19 in the adjoining part of Star Road.

Seven of the houses are occupied by owner-occupiers. The area is inhabited by 222 persons. The structure of the houses was in fair condition. The drainage of these houses has mostly been modernised within recent years and was tested in all cases and found to be in good condition.

The houses were formerly lighted by gas, but electric light has recently been installed in Fane Street and Fane Place.

Three hundred visits of inspection were made by the inspector during the survey and the owners willingly co-operated by carrying out a considerable amount of work, as the result of which all the houses are now reasonably fit for human habitation, in accordance with the provisions of the Housing Act, except two cottages which the owners have agreed to demolish.

Church Path. This street consists of 43 houses and is inhabited by 238 persons.

The structure of the houses is in fair condition ; the drainage is in good condition and has been modernised during recent years in some cases. During the survey 200 visits of inspection were made during 1931.

The owners have carried out a considerable amount of work as a result of the survey, and all the houses are now reasonably fit for human habitation.

Albert Mews. This mews, which consists of 11 houses, mostly occupied by street traders for residential and business purposes was surveyed during 1931. Considerable improvements are being carried out as a result of the survey, but as these were not commenced until early in 1932 they will be described in the Annual Report for that year.

Heckfield Place Area. This area, comprising Heckfield Place, Walham Avenue, Lodge Avenue and Rock Avenue was surveyed during 1931 by the staffs of the Borough Council and the London County Council in connection with a suggestion by the Borough Council that the County Council should consider the advisability of declaring the area an Improvement area under the Housing Act, 1930. No definite decision has been arrived at by the London County Council.

LONDON COUNTY COUNCIL ESTATES.

Since October, 1924, fifteen houses out of every thousand erected on London County Council Estates have been allocated to Fulham residents recommended by the Medical Officer of Health of the borough.

Families are accommodated on these estates both on the recommendation of the Medical Officers of Health of the various boroughs and on application direct to the County Council by intending tenants.

The following table shows the number of families accommodated on the various estates since October, 1924 :—

Estate.	Accommodated on recommendation by Fulham Borough Council.	Accommodated on applying direct to the London County Council.	Total Fulham families accommodated.
EAST HILL, Wandsworth ...	12	32	44
WATLING, Middlesex ...	137	78	215
DOWNHAM, Kent	54	18	72
*BECONTREE, Essex	97	340	437
*ST. HELIER, Morden	58	83	141
BROXHOLME HOUSE, Fulham, S.W. 6...	1	37	38
ROEHAMPTON, CASTELNAU, CENTRAL LONDON, ETC.	103	297	400
TOTALS ...	462	885	1,347

* Estates marked thus are still available for Fulham residents.

During the year 1931, 168 applications were made to the Public Health Department of the Borough

Council for accommodation on the London County Council estates and were dealt with as follows :—

- 116 families were recommended to the County Council for preferential treatment.
- 25 cases upon enquiry proved unsuitable for recommendation, and
- 27 applicants decided that the estates available were not suitable for them on account of the distance from their places of employment.

Of the 116 families recommended, 49 were successful in securing accommodation. Fourteen applicants, in addition to the 49, were offered accommodation but refused to accept it after the investigations and home visits had been made both by the Borough and the London County Council officials.

HEALTH PROPAGANDA.

As a Health Exhibition and Health Week was organised in 1930 it was decided not to hold one in 1931.

During the early part of the year the Fulham edition of "Better Health" was published and 2,000 copies were given away monthly ; articles were written by the staff on the following subjects :—

- " Chilblains," by Dr. P. L. T. Bennett.
- " Constipation," by the Medical Officer of Health.
- " Bugs, Fleas and Flies," by Mr. A. W. Gammack, Sanitary Inspector.
- " Tonsils and Adenoids," by Dr. G. F. Hardy.
- " The Maternity and Child Welfare Department," by Dr. Ruby Thomson.

Unfortunately the organisers of this very useful journal were unable to obtain sufficient support from local advertisers to enable them to continue publication which ceased after the May edition.

On account of the need for economy it was decided not to organise lectures and cinema displays during

the Winter months, but the Council's Health Leaflets were issued to the public as in former years.

The members of the Council's medical staff, the Health Visitors and the Sanitary Inspectors have continued their individual efforts in connection with health propaganda, which constitute an important part of their duties.

Health education is, fortunately, receiving more attention in the schools than formerly and much useful publicity is being given to health matters in the press.

Venereal Diseases. The British Social Hygiene Council, as in former years, continued their propaganda against Venereal Diseases and for the education of young people in sex matters. Children frequently learn the facts about reproduction in objectionable ways and a useful part of the Social Hygiene Council's work consists of Cinema Lectures to parents giving them suggestions as to the best methods of passing on such instruction to their children.

The following list shows the number of lectures and cinema displays given by the Social Hygiene Council in the borough during 1931.

Date.	Place.	Film.	Speaker.	Attendance.
Jan. 26th	Baths (men)	Tragedy of Ignorance	Dr. Feldman	400
„ 26th	Baths (men)	Any Evening after Work	Dr. Feldman	300
Feb. 12th	Hugon Road (Parents' Conference)	Our Bodies, Our Minds	Dr. Turner	32
Mar. 3rd	Star Road (Parents' Conference)	Gift of Life ...	Dr. Turner	20
„ 25th	United Methodist Church (women)	—	Miss Dugdale	20
May 6th	St. Etheldreda's Church (women)	—	Miss Dugdale	30
„ 6th	Walham Grove (open air)	—	{ Mr. Buckler, Mr. Harris, Mr. Lyons	{ 250
„ 21st	Welfare Centre (women)	—	Miss Dugdale	30
„ 27th	United Methodist Church (girls)	Gift of Life ...	Miss Dugdale	25
„ 27th	Walham Grove (open air)	—	{ Mr. Buckler, Mr. Harris	{ 300
June 2nd	Welfare Centre (women)	—	Miss Dugdale	20
„ 4th	Town Hall (women) ...	Irresponsibles ...	Dr. Hemmant	300
„ 24th	Walham Grove (open air)	—	{ Mr. Sanders, Mr. Harris	{ 300
Sept. 2nd	United Methodist Church Club (girls)	Our Bodies (strip lantern)	Miss Dugdale	16
„ 10th	William Street School (Parents' Conference)	Ways of Life ...	Dr. Turner	60
„ 15th	Shaftesbury Welcome (young people)	Ways of Life ...	Miss Dugdale	40
Oct. 28th	United Methodist Church Club (girls)	Our Minds ...	Miss Dugdale	15
Nov. 4th	St. Etheldreda's Church (women)	Gift of Life ...	Miss Dugdale	40
„ 24th	Fulham Palace Road (Parents' Conference)	Our Bodies, Our Minds	Dr. Turner	125
			Total ...	<u>2,323</u>

LEGISLATION ENACTED DURING 1931.

The Silicosis and Asbestosis (Medical Arrangements) Scheme, 1931 (S.R. & O. 2931 No. 341)	30th April, 1931.
Circular No. 1186—Cancer VIII.	30th April, 1931.
Circular No. 1202A—Housing	8th May, 1931.
Byelaw regulating the emission of Smoke, made under the Public Health (Smoke Abatement) Act, 1926	19th May, 1931.
Byelaws with respect to Houses divided into Separate Tenements, 1931	8th June, 1931.
Merchandise Marks (Imported Goods) No. 8 Order, 1931—Frozen and chilled salmon and sea trout	29th June, 1931
Agricultural Produce (Grading and Marking) Act, 1931	31st July, 1931.
Memo. 153/MCW—Birth Control	March, 1931.
Circular 1208—Birth Control	14th July, 1931.

THE SILICOSIS AND ASBESTOSIS (MEDICAL ARRANGEMENTS) SCHEME, 1931.

A Circular letter, dated 10th August, 1931, was received from the Home Office describing a scheme prepared by them for the medical examination of workmen newly engaged in certain processes used in the manufacture of pottery and asbestos. This scheme was prepared under the Workmen's Compensation Act, 1925 and the Workmen's Compensation (Silicosis and Asbestosis) Act, 1930.

Medical Boards were to be appointed under the Scheme to make the examinations and give certificates as to the health of the workmen and if the latter are suffering from tuberculosis or are otherwise unfit for their duties they must be suspended from employment. The letter stated that the initial examinations may be made by one of the members of the Medical Board or by a practitioner specially appointed for the purpose and asked the Council, whether, in the event of any of the processes mentioned in the Scheme being carried

on in the district, they would arrange for their Tuberculosis Officers to carry out these initial examinations. If so, a fee of 6s. is to be paid for each examination made by the Tuberculosis Officer.

There are no factories for the manufacture of asbestos in Fulham and the Fulham Pottery is the only pottery in the borough, but none of the processes mentioned in the Scheme are now being carried on in the Fulham works.

THE PUBLIC HEALTH (SMOKE ABATEMENT) ACT, 1926— BYELAW REGULATING THE EMISSION OF SMOKE, 1931.

This byelaw was made by the London County Council on 17th February, 1931, and was allowed by the Minister of Health on 19th May, 1931, and regulates the emission of smoke within the County of London (excluding the portion of the area administered by the Port Sanitary Authority of the Port of London) :—

The emission of black smoke for a period of three minutes, and, after five years from the date of confirmation of this byelaw for a period of two minutes, in the aggregate within any continuous period of thirty minutes from any one chimney of a building other than a private dwelling-house shall, until the contrary is proved, be presumed to be a nuisance liable to be dealt with summarily under the Public Health (London) Act, 1891.

There is a proviso in the byelaw that the chimneys of buildings used for certain manufacturing processes (including the smelting of ores and minerals, certain iron and metal works and buildings used for the manufacture of glass) are exempt from the byelaw, if the latter obstruct or interfere with any of the processes mentioned.

BYELAWS WITH RESPECT TO HOUSES DIVIDED INTO SEPARATE TENEMENTS, ETC. MADE BY THE LONDON COUNTY COUNCIL ON 24TH FEBRUARY, 1931 AND CONFIRMED AND ALLOWED BY THE MINISTER OF HEALTH ON 8TH JUNE, 1931.

1. These byelaws remove certain exemptions contained in the principal byelaws of 1925-1926.

Notwithstanding anything contained in Byelaw 7 of the principal byelaws the whole of byelaws 13, 17, 18 and 25 of the principal byelaws shall apply to a decontrolled house.

2. The new byelaws also repeal byelaw 8 of the principal byelaws which dealt with the minimum free air space necessary for sleeping rooms.

In decontrolled houses if a room is used either wholly or partly as a sleeping place the minimum free air space must be :—400 cubic feet for each person of 10 years or over, and 200 cubic feet for each person under 10 years.

In controlled houses, i.e., houses to any part of which the Increase of Rent and Mortgage Interest (Restrictions) Act, 1920, applies :—

- (a) If the room is used both for sleeping and living purposes, the minimum standard of free air space per person is 400 cubic feet for each person of 10 years and over, and 200 cubic feet for each person under 10 years.
- (b) If the room is used only for sleeping the minimum standard allowed is less than the above, viz., 300 cubic feet for each person of 10 years and over, and 150 cubic feet for each person under 10 years.

No standard is prescribed for rooms which are used only as living rooms.

THE MERCHANDISE MARKS (IMPORTED GOODS) No. 8
ORDER, 1931.

This Order in Council, dated 29th June, 1931, came into force on 29th December, 1931, and copies were sent by the Ministry of Agriculture and Fisheries to all local authorities concerned, along with a circular letter dated 9th September, 1931.

It deals with frozen or chilled salmon and sea trout imported into the United Kingdom.

The expressions "salmon" and "sea trout" are defined in the Order, "sea trout" includes trout, sea trout and salmon trout.

It is not lawful to sell or expose for sale in the United Kingdom any imported frozen or chilled salmon, or any imported or chilled sea trout unless it bears an indication of origin as defined in the Merchandise Marks Act, Sec. 10. The indication of origin is required whether the freezing or chilling has been done before or after importation.

There is one exception to the above, namely that *portions* of the fish in question may be *sold* without an indication of origin; portions of the fish *exposed for sale*, however, must be marked.

The method of marking (by show ticket or label) and the size of the letters required are detailed in the Order.

THE AGRICULTURAL PRODUCE (GRADING AND MARKING)
ACT, 1931.

This Act came into force on 31st July, 1931 and is to be taken as one with the Agricultural Produce (Grading and Marking) Act, 1928, termed the principal Act.

The primary object of the principal Act is to encourage the standardisation of agricultural products by enabling the Minister of Agriculture and Fisheries to prescribe grade designations and grade designation marks (National Marks) for articles of food and other articles produced in the United Kingdom. National Mark labels contain a map of England in black with a circle in the centre enclosing the Union Jack and the words "Produce of England and Wales" and "Empire buying begins at home."

The aim of the Ministry of Agriculture and Fisheries in bringing forward the National Mark scheme was to promote and encourage home produce, so that this country may capture and recover ground held by imports, but notwithstanding their efforts the scheme does not appear to have made rapid strides; certainly in Fulham it is not very popular and few traders in the borough are selling graded goods marked with the National Mark. The principal articles sold under the scheme are beef, eggs, and apples. In a few cases the traders are selling goods under the grade designations without using the National Marks.

The designations and the national marks give a guarantee of quality and there is a civil contract that articles so designated or marked with the national marks must conform to the standards laid down in the Regulations relating to the article in question.

Although any person may use the grade designations, only certain packers specially authorised by the Ministry of Agriculture and Fisheries are allowed to use the National Mark, and the National Mark labels are supplied to the packers only by the Ministry.

Authorised packers applying the National Marks improperly can be dealt with by the National Marks Committee appointed by the Minister under the principal Act, and, if necessary, expelled from the select body of traders who are allowed to apply the Mark.

Under section 2 (4) of the principal Act any person not specially authorised by the Ministry of Agriculture and Fisheries who marks an article, covering or label, with a National Mark commits an offence and is liable on summary conviction to a fine not exceeding twenty pounds.

Section 4 (1) of the 1931 Act goes a step further as it deals with cases in which there is no actual marking of an article, covering or label with the National Mark or the Mark is not falsely applied, but in which a label or ticket bearing a misleading mark is displayed on, in or near the goods ; it is an offence to use in connection with any article whatsoever a mark which is calculated to lead to a false belief that the article is one to which grade designations indicating quality have been prescribed.

The scope of section 2 (3) (c) of the principal Act is also extended by section 4 (2) of the 1931 Act.

The Ministry of Agriculture and Fisheries have pointed out that any apparent contravention of the above provisions should be reported to the Ministry so that it may instruct one of its officers to confer with the officers of the local authority on the question whether in all the circumstances, a prosecution is desirable and if so whether it should be undertaken by the local authority or the Ministry. If traders received the impression, however erroneous, that the use of the National Mark involved the risk of an appearance in the Police Court many of them would refuse to deal in National Mark Produce and the development of the Ministry's market policy would be seriously retarded.

SAMPLES PURCHASED FOR ANALYSIS DURING 1931.

ARTICLE.	Number of Samples.				Total Samples Analysed.	Total Samples Adulterated.	Percentage of Adulteration.
	Taken officially	Adulterated.	Taken unofficially.	Adulterated.			
Milk	539	3	1	—	540	3	0.55
Machine skimmed milk (condensed)	—	—	3	—	3	—	—
Cream	—	—	3	—	3	—	—
Tinned Cream	—	—	5	—	5	—	—
Butter	—	—	122	—	122	—	—
Margarine	—	—	10	—	10	—	—
Cheese	—	—	21	—	21	—	—
Lard	—	—	17	—	17	—	—
Beef Dripping	1	—	14	1	15	—	6.66
Olive Oil	—	—	8	—	8	—	—
Tea	—	—	8	—	8	—	—
Green Tea	1	1	4	2	5	3	60.0
Coffee	—	—	13	—	13	—	—
Cocoa	—	—	11	—	11	—	—
Cocoa Essence	—	—	2	—	2	—	—
Chocolates	—	—	10	—	10	—	—
Mustard	—	—	7	—	7	—	—
Pepper	—	—	10	—	10	—	—
Cayenne Pepper... ..	—	—	3	—	3	—	—
Demerara Sugar	—	—	3	—	3	—	—
Egg Powder	—	—	9	—	9	—	—
Self-raising Flour	—	—	14	—	14	—	—
Cornflour... ..	—	—	8	—	8	—	—
Arrowroot	—	—	10	—	10	—	—
Jam	3	—	18	3	21	3	14.28
Tinned Fruit	—	—	8	—	8	—	—
„ Vegetables	—	—	7	—	7	—	—
„ Fish	—	—	5	—	5	—	—
Corned Beef	—	—	2	—	2	—	—
Meat and Bacon	—	—	7	—	7	—	—
Steak and Kidney Pie	—	—	1	—	1	—	—
Pork Sausage	—	—	3	—	3	—	—
Egg Powder Substitute	—	—	4	—	4	—	—
Baking Powder	1	—	—	—	1	—	—
Fish Paste	—	—	4	—	4	—	—
Marmalade	—	—	3	—	3	—	—
Honey	—	—	3	—	3	—	—
Ground Ginger	—	—	3	—	3	—	—
Scotch Whiskey... ..	3	2	20	4	23	6	26.08
Rum	1	—	2	—	3	—	—
Gin	—	—	5	—	5	—	—
Lemon & Orange Squash	—	—	7	—	7	—	—
Cake	—	—	4	—	4	—	—
Sponge Cake	—	—	3	—	3	—	—
Barley	—	—	4	—	4	—	—
Malt Vinegar	—	—	3	—	3	—	—
Camphorated Oil	—	—	10	4	10	4	40.0
Syrup of Senna	1	—	5	2	6	2	33.33
Liquorice Powder	—	—	3	—	3	—	—
TOTALS	550	6	450	16	1000	22	2.20

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