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

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Walthamstow Urban District Council.

REPORT

BY

THE MEDICAL OFFICER OF HEALTH

ON THE

SANITARY CONDITION AND VITAL STATISTICS

AND

REPORT OF THE SANITARY INSPECTOR,

FOR THE YEAR 1910.

Walthamstow:

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TO THE CHAIRMAN AND MEMBERS

OF THE

Walthamstow Urban District Council.

GENTLEMEN,

In accordance with Article XIX. of the recent order of the Local Government Board, governing the appointment and duties of Medical Officers of Health, I beg to submit to you my Annual Report "on the sanitary circumstances, the sanitary administration, and the vital statistics of the district," for 1910.

"The Medical Officer of Health ought not to have any difficulty in making this report within two months" of the completed year, says the memorandum issued by the chief Medical Officer.

This has not been my experience, and if the report had to be made in official hours it would never appear as all my time is fully occupied with the every day work of my position.

The report can only be a summary of those issued to you monthly, and therefore most of the matter will be quite familiar to you, and were it not compiled for other reasons the trouble involved, and the expense incurred in its production would hardly be justified.

In the report will be found evidences of a very satisfactory condition of the Public Health generally, and if the sanitary administration of your district might properly be judged by results it has been very efficient.

To do so however, would show a lack of appreciation of the many other factors involved over which we have little control.

No doubt efficient administration of the Public Health Statutes, and the adoption of the best means for the purpose, will in time "secure the home healthy, the house beautiful, the town pleasant," and all that improved physical well-being which these connote, but the work of any one year cannot rightly be judged by its apparent results.

While your district as a whole can be regarded as a desirable and healthy place to live in and one of the healthiest of London's suburbs, certain areas within it require the constant care and watchfulness of the Sanitary Inspector in co-operation with the friendly administrations of the Health Visitor.

In this connection I would like to draw attention to my suggestions under the headings of Ward and Infantile Mortality.

The year under review has been remarkable for the low birth, death and infantile mortality rates, and for an unprecedented freedom from the dangerous infectious diseases.

The general death-rate for the year has been the lowest recorded and compares most favourably with other towns, and the country as a whole.

It is less by 4 per 1,000 than that of England and Wales, lower than that of the "Smaller Towns," whose death rates were less by 1·5 than that of the 77 "Great Towns" among which we are classed.

Compared with neighbouring districts of a similar character, we occupy an enviable position as may be seen from the comparative table on page 18.

Our Zymotic death-rate, or that resulting from deaths caused by Measles, Scarlatina, Diphtheria, Whooping Cough, Typhoid and Diarrhœa, was ·74 a figure never before reached, less than half that of the preceding five years, and about one-third that prevailing from 1900 to 1904.

Under every heading of the Zymotics, our death-rate was as low as in 1909—an exceptionally favourable year—and lower than the corresponding rates for England and Wales and the 77 "Great Towns."

Although Zymotic deaths are largely preventable, little credit is taken for our lessened mortality from Diarrhœa, Measles and Whooping Cough. Diarrhœal deaths largely depend upon summer-heat over which we claim no power, and Measles and Whooping Cough tend to occur in epidemic cycles, and so far no serious sustained efforts have been expended in their control.

The lessened and comparatively small number of deaths from Scarlatina and Typhoid are worthy of note, and may be accepted as the result of the work carried out by others in searching out, and tracing the life history of these diseases, and showing that their incidence was independent of the mischances affecting drains and their surroundings, but the old time belief is still prevalent and the greater need for care of the personal unit is but slowly leavening the public conscience.

The deaths from Diphtheria were the same as in 1909, and 33 per per cent. less than those in the most favourable of the preceding years.

Its death-rate has shown a steady and continuous improvement since 1900 when it stood at ·86, the rate for 1910 was ·1 per 1,000 of the estimated population.

The deaths of children under 1 year of age to total births are greater than in 1909, but were not more than 95 per 1,000 born, a number less than that for rural England.

An infantile mortality rate of 100 was a few years ago looked upon as an object to be achieved, and I have already drawn your attention to my remarks under this heading.

For our lessened birth-rate I have no apology to make or explanation to give. In this connection the non-increase of illegitimates is a remarkable fact.

The following tabular statement taken from the Registrar General's Fourth Quarterly Report, gives the data for the foregoing comparisons and remarks :—

Birth-Rate, Death-Rate, and Analysis of Mortality in 1910.

——	Annual Rate per 1,000 Living.											Deaths under one year to 1,000 Births.
	Births.	Death-rate. Crude.	Death-rate. Corrected.	Principal Epidemic Diseases Cols. 4-10.	Small-Pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	Fever.	Diarrhœa.	
Cols.	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
England and Wales ...	24·8	13·4	13·4	0·99	0·00	0·23	0·06	0·12	0·24	0·05	0·29	106
77 Great Towns	25·0	13·4	14·3	1·23	0·00	0·31	0·08	0·12	0·29	0·05	0·38	115
136 Smaller Towns ...	23·7	12·4	12·9	0·88	0·00	0·16	0·06	0·11	0·24	0·05	0·26	104
England and Wales less the 213 Towns ...	25·0	13·6	12·8	0·74	0·00	0·15	0·05	0·12	0·17	0·05	0·20	96
Walthamstow '10	22·6	8·4	8 9	0·74	0·00	0·14	0·03	0·10	0·22	0·01	0·22	95·0
„ 1909	24·66	8·8	9·3	0·98	0·00	0·22	0·08	0·10	0·33	0·01	0·22	83·3

Closely associated with the death-rates and largely influencing them is the prevalence or absence of the dangerous Infectious Diseases.

During the year we not only had fewer cases relatively to population, but we actually received fewer notifications than in any previous year 1890 and 1891 excepted.

The decline in number was most marked for Scarlatina and Diphtheria and in consequence the Sanatorium was half empty during the Summer and Autumn months.

Although the actual number of persons who sickened with Typhoid was greater by 14 than in 1909, they were fewer by forty than the average of previous years, and since 1899, a continuous and steady decline has been shown in the incidence of this disease.

During the year important Regulations and Orders have been issued by the Local Government Board. The Diphtheria Antitoxin (outside London) Order, issued under Section 133 of the Public Health Act, makes legal the gratuitous provision of Antitoxin for poor patients suffering from Diphtheria, as well as for contacts.

The Order imposes upon the Council no fresh obligations, as they have been for years voluntarily undertaken by me. The expense incurred has never been questioned.

The Sanitary Officers (outside London) Order, made also under the Public Health Act, 1875, rescinds the Order of March, 1891, and prescribes afresh the duties of the Medical Officer of Health, and Inspector of Nuisances.

Articles 19 and 20 (3) prescribe for both officers the systematic inspection of the district at certain periods and at intervals as occasion requires.

Systematic inspection by the Medical Officer of Health in a district employing five officers for the very purpose would be an impossible task, and how the duties laid down by Article 20 (16), for the Inspector of Nuisances can be of any value to the Medical Officer of Health in "advising the Council on all matters affecting the health of the district," is only known to the framers of the New Order.

Were such a tabular statement as there referred to, rendered weekly, then the Medical Officer of Health, knowing his district, could readily appreciate what Sanitary work was being carried out, and how much his interference with the statutory duties of other officers might be of advantage to the Public Health.

Frankly, systematic visiting—that is, house to house inspection—except for those premises requiring certificates under the Customs and Inland Revenue Act of 1890 has not been undertaken by me, but I can truly say that I am perfectly familiar with the existing sanitary conditions in every Ward and have been into one or more houses in every street during the year.

The Regulations under Section 17 (1) of the Housing and Town Planning Act of 1909 have been issued in September.

In the absence of other instructions, Mr. West has undertaken the duties under Articles II. and III. as the work to be carried out comes more within his sphere of duties than that of any other officer.

The statutory powers now enjoyed by Sanitary Authorities to efficiently safeguard the Public Health are ample, but the anomaly remains that in growing districts like yours, the whole salaries of all the the Assistant Sanitary Inspectors have to be paid for by you.

A simple clause in the Act might have relieved you of the penalties incurred for its efficient administration.

Little change has occurred during the year in the personnel engaged in the Public Health work of the district.

The office accommodation for those engaged in clerical work and for those engaged in the medical inspection of school children is totally inadequate, and in consequence the work is much hampered.

Apart from the keeping of the various records and registers, etc., 6,697 letters were sent out and 3,372 persons called.

I believe you are well served by all your officers, they are good and loyal workers, and my relations with them have been most cordial and I hope mutually agreeable, and on their behalf and my own, I offer our best thanks to the Council for the courtesy and consideration always shown to us.

I beg to remain, Gentlemen,

Your obedient Servant,

J. J. CLARKE.

SANITARY AREA.

POSITION AND LOCALITY.

The Sanitary District of Walthamstow has an area of 4,355 acres, and is divided into five Wards for administrative purposes, but the character of the population is practically the same—the artisan and labouring classes predominating in all the Wards.

It lies between the River Lea and Epping Forest from the west to the east, extending from Leyton on its south to Chingford on the north.

The sub-soil is mainly gravel, the London clay showing itself in various parts on the surface, notably at Church Hill and portions of the Hoe Street and Northern Wards adjoining.

The district has two small streams—the Ching and the Dagenham Brook. The former enters the district at Highams Park, and winds its very sluggish course through Hale End and Chapel End to the River Lea. The latter, the Dagenham Brook, is the outlet for the drainage of the district, and having received the effluent from the Sewage Farm, winds its course through the neighbouring parish of Leyton and joins the River Lea near Temple Mills. Neither stream, at any point, is used for drinking purposes.

The whole district has a duplicate system of sewers, and practically every house water-closet accommodation. The drinking water is supplied by the Metropolitan Water Board, formerly East London Water Company, and is practically constant. The amount used per head per day is about 30 to 35 gallons.

The five Wards into which the district is divided are :—St James Street, varying from 18 to 54 feet above ordnance datum ; High Street, 21 to 60 feet ; Hoe Street, 50 to 140 feet ; Wood Street, 50 to 170 feet ; and the Northern Ward, 25 to 220 feet.

The Sewage Farm, about 182 acres in extent, is situated in the St. James Street Ward, and the reservoirs of the Metropolitan Water Board, about 367 acres in extent, are in the High Street and Northern Wards.

VITAL STATISTICS.

POPULATION.

The Registrar-General has estimated our mid-year, 1910, population as 141,748—an increase of 5,146 over that of 1909.

The natural increase, or excess of births over deaths during 1910, was 2,011, or 3,135 less than the estimated total.

That the estimated and actual populations differ greatly may be accepted, and as the Census will be taken in April and the actual numbers ascertained, without giving any data for the statement, I estimate our population as not more than 132,000.

The population assumed by the Registrar-General will be taken as the basis of the general birth and death-rates of the district, otherwise these rates would not be fairly comparable with those of other "Large Towns," whose populations are based on a like assumption, that their annual rates of growth since 1901, like ours, were similar to those prevailing in the intercensal period 1891–1901.

To estimate with any degree of accuracy the populations of the five Wards within the district, is much more difficult than for the total population ; but in order that this report may be uniform with preceding ones, and that comparisons may be made and deductions drawn from facts revealed during the year, I assign to the Wards the following populations, giving also those allocated in 1909 :—

WARD POPULATION.

	St. James St.	High St.	Hoe St.	Wood St.	Northern.	Total.
1910	25,000	23,000	25,000	18,500	40,500 =	132,000
1909	24,500	22,500	24,500	18,000	40,000	

During the year 242 new houses were certified by the Surveyor as fit for occupation, and the growth of the district has mainly taken place in the Northern Ward.

The Overseers on their official returns for 1910 certified as empty the following :—

Shops.	Houses.	Tenements.	Total.
154 ...	1,170 ...	517 ...	1,841

As compared with previous years :—

	Shops.	Houses.	Tenements.	Total.
1909	180 ...	1,268 ...	574 ...	2,022
1908	154 ...	1,246 ...	497 ...	1,897
1907	117 ...	1,268 ...	352 ...	1,737

The following Table, with slight alterations, is reproduced from last year's Report.

It will be interesting to learn from the Census returns how the supposed and actual conditions differ.

TABLE I.

WARDS.	Possible No. of Houses fit for Occupation, 1909.	New Houses certified as fit for occupation in 1910.	Empty, June, 1910 (Overseers' Lists).	Possible Occupied Mid-year, 1910.	Occupied Education Returns, January, 1910.	Proportion empty in 1910.	Proportion empty at Census, 1901.	Average number per House Census.	Assigned Population, 1910.
St. James Street	4,300	11	310	4,001	4,118	1 in 13	1 in 21	6	25,000
High Street ...	3,465	9	220	3,254	3,617	1 in 15	1 in 24	6·3	23,000
Hoe Street ...	4,810	20	266	4,564	4,744	1 in 17	1 in 15	5·5	25,000
Wood Street ...	3,141	6	209	2,938	3,007	1 in 14	1 in 15	6	18,500
Northern ...	7,233	196	577	7,552	7,059	1 in 13	1 in 7	5·7	40,500
Whole District ...	23,694	242	1,582	22,309	22,545	1 in 15	1 in 13·8	5·9	132,000 (or 131,623, 5·9 persons to house).

EDUCATION AUTHORITY'S FIGURES.

Houses fit for Occupation.		Houses Empty.		Houses Occupied.		Houses in Course of Construction.		Population (at 5·9 per house)
24,036	.....	1,491	.....	22,545	.....	53	.....	133,015
						Registrar-General's Estimate...		141,748

The age constitution of our population at the 1901 Census, as compared with England and Wales, and the average death-rates at the different age periods may be seen from the following table :—

TABLE II.

	All Ages.	Under 5 years.	Over 5 and under 10.	Over 10 and under 15.	Over 15 and under 20.	Over 20 and under 25.	Over 25 and under 35.	Over 35 and under 45.	Over 45 and under 55.	Over 55 and under 65.	Over 65 and under 75.	75 years and upwards.
England and Wales.	1,000	129	119	110	100	90	149	114	85	58	33	13
England and Wales (assumed).	95,131	12,271	11,320	10,464	9,513	8,561	14,174	10,844	8,086	5,517	3,139	1,236
Walthamstow.	95,131	13,916	12,608	11,079	8,786	7,768	15,810	11,969	7,069	3,721	1,710	695
Average Death-rates England and Wales.	17·7	54·7	3·85	2·25	3·4	4·7	6·3	10·65	16·75	32·7	61·8	153·6

The following Summary of the Sanitary and other data of importance are given for easy reference :—

WHOLE DISTRICT.

		Population.	Rateable Value. £.	General District Rate, per £.	Total Poor Rate, per £.	Education Rate, per £.
1881	Census ...	21,697	97,111	3/4	2/9	0/2
1891	,, ...	46,346	156,959	2/9	3/8	1/4¾
1901	,, ...	95,131	328,756	3/8	4/10	1/11¾
1904	Estimated ...	111,282	404,101	3/2	5/9	2/4¼
1905	,, ...	116,300	423,241	3/10	5/10	2/5
1906	,, ...	121,334	426,703	4/1	6/5	2/7
1907	,, ...	126,397	431,937	4/1	5/5	1/8
1908	,, ...	131,486	437,127	4/1	5/3	1/8½
1909	,, ...	136,602	444,582	4/1	5/1	1/9
1910	,, ...	141,748	444,850	4/-	5/11	2/3

The population was estimated to be 4,780 in 1851, 6,880 in 1861, and enumerated as 10,692 in 1871.

		Average for previous 10 years.
Total Births registered, 1910	3,197 ...	3,382
„ Deaths „ „	1,186 ...	1,275
Number of deaths of persons not belonging to this district	17 ...	12
Natural increase of population	2,011 ...	2,157
Birth-rate per 1,000 estimated population	22·6 ...	30·5
Death-rate	8·4 ...	11·3
Death-rate corrected for age and sex	8·9 ...	11·9
Zymotic Death-rate	·74 ...	1·96
Infantile Mortality Rate	88·5 ...	119·3
Infectious Sickness Rate	3·4 ...	10·0
Number of persons per house	5·9	
„ „ „ acre (exclusive of Sewage Farm and Reservoirs) or Density of Population ...	35·0	

ELEMENTARY SCHOOLS.

Summary. Schools.	Capacity. Original.	Present.	On Books.	Present.	Average.	Per-c'nt'ge.	Refused. Ov'r 5.	U'd'r 5.	Total
17 Boys'...	7294	7294	7212	6935	6634·3	91·9	—	—	—
18 Girls'...	7477	7239	7190	6751	6430·9	89·4	—	—	—
19 Infants'	7443	7211	7249	6598	6238·4	86·0	20	27	47
10 Mixed	3490	3418	3404	3223	3111·0	91·3	—	—	—
	25704	25162	25055	23507	22414·6	89·4	20	27	47
3 Special	150	150	107	104	97·4	91·0	—	—	—
M'th end'g Dec. 23,'10	25854	25312	25162	23611	22512·0	89·4	20	27	47
„ 23,'09	24797	24415	25310	22983	22057·0	87·1	29	36	65
Decrease	—	—	148	—	—	—	9	9	18
Increase	1057	897	—	628	455	2·3	—	—	—

TABLE III.

WARDS.—*Acreage, Estimated Population, Density, Birth and Death Rates, etc.*

WARDS.	Acreage.	Acreage (excluding Farm & Reservoirs).	Number of Houses, 1901.	Estimated number of Houses occupied. Mid-year 1910.	Estimated Population, 1910.	Density (excluding Sewage Farm & Reservoirs).	Birth Rate, 1910.	Death Rate, 1910.	Height in feet above Sea Level.
St. James Street	489	307	3937	4001	25,000	81	26·3	11·6	18 to 54
High Street	660⅓	415⅓	3220	3254	23,000	55	24·6	8·2	21 to 60
Hoe Street	347⅓	347⅓	4084	4564	25,000	71	20·8	8.3	50 to 140
Wood Street	499	499	2716	2938	18,500	37	22·1	9·6	75 to 176
Northern...	2359⅓	2237⅓	3377	7552	40,500	18	25·7	8·0	25 to 220
Whole District	4355	3806	17,334	22,309	132,000	34	24·2	9·0	

BIRTHS AND BIRTH-RATE.

The total number of births registered during the year was 3,197, males 1,671, females 1,526.

Twenty-one of these (males 11, females 10) were born at the Union Workhouse, and three males and two females elsewhere.

Of the total births 53 were illegitimate; thirteen took place at the Workhouse, two elsewhere without, and the remainder within the district. The number of these births varies but little from year to year—about sixteen in every 1,000 registered births are non-legitimates.

The total number of births since the last census was:—34,480 and there were actually fewer children born in 1910 than in 1901. The births registered yearly since 1891 are given on page 22.

The birth-rate for the year is 22·6 per 1,000 of the estimated population of the Registrar-General, a rate lower than any yet recorded here, lower than that of the country as a whole, the 77 "Great" and the 136 "Smaller Towns" of England.

A rate of 24·2 based on the population of 132,000 is likely to be much more consonant with the actual conditions than that given, but the fact remains that our birth-rate like the country generally, has been steadily diminishing within recent years.

Accompanying this decline we have had a corresponding fall in the general death-rate, so the natural increase of the population continues.

Our lowered birth-rate has also been compensated for largely by a lessened death-rate in children in the first year of life.

The birth-rate for England and Wales in 1910 was 24·8; for the 77 "Great Towns" 25·0; and for the 136 "Smaller Towns" 23·7.

The ratio of male to female births was as 100 to 91.

The following table shows the births distributed over the various Wards for the four quarters of the year :—

TABLE IV.

	St. James Street.		High Street.		Hoe Street.		Wood Street.		Northern.		Workhouse and others.		Totals.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1st quarter	76	73	85	53	57	61	57	46	134	104	4	1	413	338
2nd quarter	91	79	70	76	85	68	51	61	154	133	6	2	457	419
3rd quarter	79	94	67	76	56	59	54	43	143	125	2	7	401	404
4th quarter	88	74	60	73	64	66	55	37	131	113	2	2	400	365
	334	320	282	278	262	254	217	187	562	475	14	12	1671	1526
Workhouse	2	3	1	3	2	3	4	0	2	1				
Others	0	0	1	0	0	0	1	1	1	1				
Totals	659		565		521		410		1042		—		3,197	
Population	25,000		23,000		25,000		18,500		40,500		—		132,000	
Birth-rate 1910 ...	26·3		24·6		20·8		22·1		25·7		—		24·2	
Do. 1909 ...	29·4		27·4		21·4		23·6		27·0		—		26·0	

The birth-rates for the various Wards from Census year onwards are as follows :—

	St. James Street.	High Street.	Hoe Street.	Wood Street.	Northern.
1901	33	35·7	28	28·4	39·8
1902	33·22	36·65	29·45	30	39·55
1903	31·6	39·1	29·24	27·45	38·1
1904	33·3	37	27	28·1	40.6
1905	29	30	25·07	24·9	31·8
1906	30·4	35	24·7	26·2	30·2
1907	29	33·3	25	25	31·6
1908	30·2	30·7	23·4	23·8	30·5
1909	29·4	27·4	21·4	23·6	27
1910	26·3	24·6	20·8	22·1	25·7

The decline in the birth-rate as compared with that of 1901 of the different Wards varies. That for St. James Street, Hoe Street, and Wood Street Wards shows a similar reduction, those for High Street and the Northern Wards are so marked that the explanation may probably be over-estimated populations.

Since 1901, our general birth-rate has fallen from 33·1 to 22·6, that of the country as a whole 28·15 to 24·8.

That our decline in birth-rate is three times greater than elsewhere is not probable, and it is more than likely that our true birth-rate is at least 25 per 1,000 of our actual population.

DEATHS AND DEATH-RATES.

WHOLE DISTRICT.

During the year 949 deaths were registered within the district under the Council's authority—males 467, females 482.

Seventeen of these (males 11, females 6) were of non-residents and have been excluded.

Particulars of these deaths were transmitted to the appropriate localities, while the deaths of residents dying without the district, as far as I have been able to get the returns, are now added.

These were 52 at the Workhouse, 175 at the Infirmary, 14 at the Isolation Hospital, and 13 transmitted from Health Officers elsewhere.

These latter do not include all the deaths that have occurred among our people during the year, and hence the death-rate based on the above figures will be less than that subsequently to appear in the Registrar-General's Summary.

This is the last year such a discrepancy will be possible, a notification having been given that in future the Registrar-General will supply the necessary missing numbers to make our birth and death statistics correct.

The classification of the causes of death must also be accepted with some reserve.

"It is difficult to bring medical men to realise the unreliability of the data which they themselves supply. All mortality statistics are based on the death certificate, and non medical statisticians generally regard the death certificate as of fixed interpretation. As a matter of fact, however, medical men seldom write a death certificate with any appreciation of its utility as a contribution to vital statistics."

Seldom is a distinction made in the death certificates between Acute and Chronic Bronchitis, Lobar or Lobular Pneumonia, and deaths at 66 years of age from Senile Decay are quite frequent, and when three distinct diseases—any of which might be the cause of death—are registered, it is a matter of great difficulty to decide under which heading the death should be placed.

The total deaths ascertained for the year were 1,186—males 602, females 584—and all with the exception of an infant under 1 week were certified by a doctor or the coroner. The registered cause of the uncertified death was given as "Patent Foramen Ovale."

The deaths represent a crude death rate of 8·4 or a corrected rate for differences of age and sex in the population as compared with the whole country of 8·9 per 1,000 of the estimated population.

This death-rate is of course based on the assumption, that, like other large towns, our rate of growth has been what the Registrar-General assumes, and "missing deaths" are not included.

The death-rate for England and Wales was 13·4 and for the 77 "Great Towns" 14·3.

The death-rate for the 136 "Smaller Towns" was 12·9 and excluding these and the "Great Towns" the rate for the country was 12·8.

If my estimate of the population is correct and making due allowance for missing deaths, our death-rate would be 9·7 per 1,000, or 3·4 less than the mortality figure for England and Wales, and 4·3 less than that of the "Great Towns."

The birth, death, and infantile mortality rates of the following districts of the outer zone of London, compared with your own, will be of interest.

	Population.	Birth-Rate.	Death-rate.	Infantile Mortality rate or Proportion of Deaths of Children under one year to 1,000 Births
Croydon	164,485	23·1	10·9	87·4
Willesden	166,088	22·9	9·1	82·1
Hornsey	98,561	13·9	7·6	69·7
Tottenham ...	132,803	27·8	11·4	86·3
West Ham ...	328,585	26·3	11·6	100·7
East Ham... ...	156,208	21·8	8·8	94·1
Leyton	133,436	23·6	9·2	66·03
Walthamstow ...	**141,748**	**22·6**	**9·08**	**95·0**

The above figures are taken from the four quarterly returns of the Registrar-General, and include 102 more deaths and accounts for 9 fewer births for this district than have been returned to me.

DEATHS AND DEATH-RATES.

ACCORDING TO WARDS.

The deaths allocated to the different Wards are those received from the local Registrar, and from others as already mentioned.

The distribution of the deaths is correct but the populations are assumed, and no accuracy is claimed for the latter; inferences drawn therefore, must be accepted with this reservation.

The deaths and death-rates for 1910 and the death-rates for previous years are as follows:—

	St. James St.	High St.	Hoe St.	Wood St.	Northern.
Population, 1910	25,000	23,000	25,000	18,500	40,500
Deaths, ,,	290	189	208	178	321
Death-rate ,,	11·6	8·2	8.3	9·6	8
,, 1909	10	9·0	10·2	11·2	7·4
,, 1908	13·1	9·8	11	9·9	8·1
,, 1907	14·3	10·8	9·9	12·8	9
,, 1906	12·9	11·7	11	11·7	10·8
,, 1905	12·7	11·4	9·8	10·2	9·3
,, 1904	13·85	12	10·6	11·08	13·45
,, 1901 (Census year.)	15·03	12·8	11·5	12·05	15·27

The above rates are based on a population of 132,000 and although Hoe Street and St. James Street Wards are assumed to have like populations the latter has one-third more deaths than the former and a higher death-rate than any of the Wards.

This I think is quite correct judging from the local circumstances and the general character of the population.

The death-rates of all the Wards are very low ones and show an improvement on previous years, the rates given having been based on yearly populations assumed from local knowledge and not upon that of the Registrar-General.

The higher death-rates of St. James Street and Wood Street Wards as compared with the other portions of your district are confirmatory of the generally accepted views that mortality figures are largely a reflex of the housing and social conditions of a people.

In St. James Street and Wood Street Wards are to be found most of the older badly constructed houses put up at a time when Walthamstow began to change its rural character to become a dormitory for London's workers.

As the district grew, the better class artisans and city clerk moved farther away from the older areas in the vicinity of railway stations, and their places were taken by a poorer, more ignorant, and less thrifty population, and gradually the houses originally built for one came to be occupied by two families, with consequent deterioration of property and its surroundings.

These factors, joined to the Wards' unfavourable geographical conditions, largely account for the recorded differences.

Contrasting two Wards with equal populations but differing greatly in their economic conditions, it is found that the deaths from Tuberculosis and other diseases of the lungs, are twice as many in St. James Street as in Hoe Street, and that Wood Street with 26 per cent. less people has actually more deaths from these diseases than its more favourably conditioned neighbour.

Deaths from diseases from the lungs, whether associated with Measles, Whooping Cough or Tubercle, are always more numerous among the poor than among the well-to-do, and the increase is largely the result of ignorance and the bad conditions under which they live, and it is difficult to say that the excessive mortality among the poor and struggling workers can be reduced by measures short of betterment in their economic conditions.

As the latter is not within the scope of a sanitary authority, a vigorous administration of Sections 14 and 15 of the Housing and Town Planning Act, 1909, in association with the teaching in our schools of Hygiene, and the value of fresh air and cleanliness within the home are measures upon which we must largely rely.

The following table shows the mortality in the four quarters of the year for the various Wards :—

	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Total.
St. James Street ...	101	58	45	86	290
High Street ...	49	54	36	50	189
Hoe Street ...	51	49	49	59	208
Wood Street ...	52	44	34	48	178
Northern	87	72	68	94	321

It will be noticed how closely the figures approximate for all quarters in Hoe Street. Season has but little influence.

In striking contrast with this are the figures for St. James Street. The first and fourth quarters mortality greatly exceed the second and third, showing that want of employment, and unfavourable climatic conditions are most keenly felt and have the most serious consequences for the poor. Were the summer unduly hot and dry the mortality in the third quarter would probably be as unfavourable for the poorer Ward owing to increased deaths from Diarrhœa among the infants.

The following figures give the total deaths and the deaths of children under 5 years of age from Zymotic or preventable diseases in the five Wards :—

	St. James St.	High St.	Hoe St.	Wood St.	Northern.
Births	659	565	521	410	1,042
Deaths—Total	290	189	208	178	321
Death-rate	11·6	8·2	8·3	9·6	8
Deaths under 5 years from Zymotic diseases ...	25	14	10	9	28
Percentage of total deaths—					
For 1910	8·6	7·3	5	5	8·7
For 1909	11·8	7·0	10·3	11·8	14·2
For 1908	9·7	11·7	4·5	7	8
For 1907	17·3	14·7	9·6	11·8	17·8
For 1906	19·6	15·9	9·5	14·1	21·5

The total deaths are fewer by one-half than in 1909 owing to the fewer deaths from Measles and Whooping Cough. The Diarrhœal deaths were similar in number.

INQUESTS.

During the year 113 inquests were held on persons belonging to and dying within, and 10 upon inhabitants dying without the district.

The ages at which death took place and the causes are as follows :—

UNDER ONE YEAR:

Want of attention at birth, 2; Pneumonia, 6; Conjestion of Lungs, want of attention, 1; Convulsions, 3; Malnutrition, 2; Improper food, 3; Gastro Enteritis, 1; Meningitis, 1; Suffocation in bed with mother, 6; General Tuberculosis, 1; Acute onset of Zymotic disease undetermined, 1; Strangulation of Intestine, 2; Accidental hanging, 1.

OVER ONE YEAR:

	1—5 Years.	5—15 Years.	15—25 Years.	25—65 Years.	65 and upwards	Total.
Natural Causes	11	2	3	13	16	45
Syncope — Persistent Thymus Gland	1	1	...	...	...	2
Do. Over distension of Stomach	...	1	...	...	...	1
Do. After fit of Coughing	...	...	...	1	...	1
Do. Hæmophilia ...	...	1	...	...	...	1
Cerebral Hæmorrhage	...	1	...	2	1	4
Intussusception	1	...	...	...	...	1
Murder	...	...	1	...	...	1
Suicide	...	...	...	2	...	2
Do. Insane	...	...	...	3	...	3
Burns and Scalds	8	1	1	1	...	11
Accidents	...	1	1	5	3	10
Do. Injury to hand ...	1	1	...	1	1	4
Suffocation—Accidental	2	...	...	...	...	2
Do. by drowning	1	...	...	...	...	1
Asphyxia—Oedema of Glottis ...	...	...	...	1	...	1
Septicœmia following accident ...	...	1	...	...	...	1
Do. do. Pneumonia	...	...	1	...	...	1
TOTALS	25	10	7	29	21	92

The following table gives the number of births and deaths, their rates, the Zymotic death-rate, Infantile Mortality rate, and natural increase of population for the past nineteen years, and the average in five yearly periods compared with 1910:—

TABLE V.

Year.	Births.	Deaths.	B. Rate.	D. Rate.	Zymotic D. R.	Infantile Mortality Rate.	Natural Increase of Population
1891	1756	694	37·3	14·7	1·9	120	1062
1892	1717	915	34·75	18·0	3·9	145·6	802
1893	1809	809	34·78	15·55	2·43	133·2	1000
1894	1813	717	32	12·6	1·8	129·6	1096
1895	2021	965	33·2	15·8	3·5	153·3	1056
1896	2101	817	32·3	12·5	2·4	127·5	1284
1897	2246	832	32·08	11·88	2·8	132	1414
1898	2294	1034	29·8	13·4	3·67	169·5	1260
1899	2835	1282	34·14	15·44	2·94	170·0	1553
Average for 5 years 1895-99	**2299**	**986**	**32·30**	**13·80**	**3·06**	**150 4**	**1313**
1900	3037	1254	33·37	13·78	2·8	158·7	1783
1901	3210	1296	33·1	13·35	2·82	147·6	1914
1902	3426	1154	33·81	11·38	1·3	115	2272
1903	3535	1178	33·25	11·08	1·9	113·7	2357
1904	3649	1330	32·79	11·95	2·89	135·9	2319
Average for 5 years 1900-04	**3371**	**1243**	**33·26**	**12·30**	**2·34**	**134·1**	**2129**
1905	3389	1249	29·14	10·7	1·69	104·4	2140
1906	3594	1447	29·60	11·90	2·54	129·7	2147
1907	3629	1376	28·55	10·88	1·83	104·7	2253
1908	3482	1258	26·48	9·56	·95	100·8	2224
1909	3369	1205	24·66	8·8	·98	83·4	2164
Average for 5 years	**3492**	**1307**	**27·68**	**10·36**	**1·59**	**104·6**	**2185**
1910	3197	1186	22·5	8·3	·74	88·5	2011

Total natural increase of Population since 1891, 34,111.

Total increase as shown by census, 1901, 48,785.

Total increase as estimated to middle of the year 1910, 95,402.

Total increase per cent. since 1891, 205.

Total increase per cent. since 1901, 49.

INFANTILE MORTALITY.

During the year 283 deaths occurred in children under one year of age, compared to 281 in 1909; 351 in 1908; 380 in 1907; 466 in 1906; 354 in 1905; 496 in 1904; 401 in 1903; 394 in 1902 and 481 in 1901.

The infantile mortality rate for each year since 1891 is given on the preceding page.

This rate is one of great interest and importance, since it is independent of correct or incorrect estimated population, being based on the deaths in children under one year of age as compared with the total births.

If the total births and deaths are known the rate is not liable to error, but owing to faulty death returns the rate of 88·5 given is less than the actual rate, 95, ascertained from the figures of the four quarterly returns of the Registrar-General.

The reason for giving the lesser rate is to make the figure comparable with preceding years, whose rates were ascertained from the returns actually received.

It will be noticed that on page 22, by grouping the birth and infantile mortality rates into five-yearly periods, the average death-rate has fallen from 150·4 in 1895–1900, to 104·6 in 1905–1910, although the average number of births in the same period had increased from 2,299 to 3,493.

The improvement in the latter period shows a yearly saving of 160 infant lives, and the improvement recorded in 1910 on the previous five years, shows a saving of 50 for the total born.

The recorded rate of 95 per 1,000 children born for 1910, is a favourable one, and taken in association with that of 104·6 for the previous five years would bring the district within the category of the Registrar-General of "Towns with low rates of Infantile Mortality," and without further analysis it would seem that our work in this respect has been very satisfactory.

But that there is much scope for betterment will be seen by splitting up the district into its constituent parts.

The following table shows the Infantile Mortality and other associated data for the various Wards.

	Whole District.	St. James Street.	High Street.	Hoe Street.	Wood Street.	Northern
Population ...	132,000	25,000	23,000	25,000	18,500	40,500
Births	3,197	659	565	521	410	1,042
Birth-rate	24·2	26·3	24·6	20·8	22·1	25·7
Deaths	1,186	290	189	208	178	321
Death-rate ...	9·7	11·6	8·2	8·3	9·6	8·0
Infantile Mortality Rate	88·5	126·0	83·2	65·0	80·0	82·5
Deaths under 1 year of age ...	283	83	47	34	33	86

It is at once apparent that assuming the total deaths had been received and distributed, the rate for each Ward would be proportionately augmented by 6·5, making the rates respectively 132·5 ; 89·7 ; 71·5 ; 86·5 and 89.

In this way the St. James Street figures for a year with favourable climatic conditions show an excessive mortality, and the Hoe Street figure should be nearly possible in all the Wards.

The importance of a low infant mortality has been specially noted by the Registrar-General, who points out in his 71st Annual Report that the conditions which tend to a high mortality in the first year of life operate with adverse effect during the succeeding years of life.

The Chief Medical Officer of the Local Government Board has also demonstrated that excessive infant mortality implies excessive child mortality and excessive mortality right up to adult life, and in the supplement to his report for 1909-10, he shows in diagramatic form, that the superior prospects of life of those having lived under the conditions in which low infant mortality occurs persist right through life, and the conclusion is drawn that as each sanitary authority and the inhabitants of its district succeed in removing the conditions favouring high infant mortality they are removing the conditions producing a high rate of mortality in youth and throughout adult life.

This is very important and worth remembering.

The efforts made in recent years by various Sanitary Authorities in co-operation with voluntary agencies with a view to reducing the infant death-rate are justified by the highest and best authority, and the Notification of Births Act, 1907, enables those who believe that many infant deaths are due to ignorance on the part of the mothers, to appoint Health Visitors for the purpose of visiting the houses of the poor and instructing the mothers as to the best methods of rearing healthy children.

In dealing with the general death-rate of the St. James Street Ward, I pointed out that its low-lying situation, the homes, and the economic conditions of the people were factors influencing adversely its mortality figures, and I suggested a vigorous administration of our latest and best Public Health Act.

Since the medical inspection of school children has revealed conditions that call for new methods of sanitary administration and accentuated the importance of the personal unit, your Authority would be acting wisely in adopting the Act of 1907, and appointing a Health Visitor, whose time could be fully occupied in this work and that arising out of the medical inspection of our school children.

To whatever causes the excessive mortality disclosed may be due you would then be enabled to supplement the work of the Sanitary Inspector by dealing with the removable personal factors concerned.

TABLE VI.

Causes of Deaths.		Under 1 Week	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months	11-12 Months	Total Deaths under One Year.
All Causes.	Certified	72	23	9	15	119	29	24	14	16	16	8	11	14	8	11	12	282
	Uncertified	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
COMMON INFECTIOUS DISEASES.	Small-Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Chicken-Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
	Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	3
	Scarlet Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Diphtheria ; Croup ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Whooping Cough ...	—	—	—	—	—	1	2	—	1	—	—	1	3	—	1	2	11
DIARRHŒAL DISEASES.	Diarrhœa, all forms ...	—	—	—	—	—	—	1	1	1	1	1	2	—	—	—	1	8
	Enteritis, *Muco Enteritis, Gastro Enteritis*...	—	—	1	1	2	2	2	1	—	4	—	—	1	—	—	1	13
	Gastritis, Gastro-intestinal Catarrh ...	—	—	—	1	1	2	—	—	1	1	—	—	—	—	—	—	5
WASTING DISEASES.	Premature Birth ...	41	6	1	4	52	5	2	—	—	—	—	—	—	—	—	—	59
	Congenital Defects ...	10	4	—	—	14	1	2	—	—	—	—	—	—	—	—	—	17
	Injury at Birth ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Want of Breast-milk ...	—	—	1	1	2	1	1	1	—	—	—	—	—	—	—	—	5
	Atrophy, Debility, Marasmus ...	3	3	3	2	11	5	7	1	3	2	2	2	5	3	—	—	41
	Asthenia : Inanition ...	10	5	—	1	16	—	—	—	1	—	—	—	—	—	—	—	17
TUBERCULOUS DISEASES.	Tuberculous Meningitis	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	1	3
	Tuberculous Peritonitis: Tabes Mesenterica .	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
	Other Tuberculous Diseases ...	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	2
OTHER CAUSES.	Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Syphilis	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	1	2
	Rickets	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	2
	Meningitis *(not Tuberculous)*	—	—	—	—	—	—	—	—	—	1	2	—	—	—	1	—	4
	Convulsions	2	1	2	1	6	1	1	1	—	—	—	1	—	—	—	—	10
	Bronchitis	—	—	—	2	2	3	2	3	1	4	1	3	1	2	2	2	26
	Laryngitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Pneumonia	—	1	—	1	2	4	2	3	5	2	2	1	2	3	2	1	29
	Suffocation, overlaying	3	—	1	—	4	—	—	1	1	—	—	—	—	—	—	—	6
	Other Causes	4	2	—	1	7	4	2	—	—	1	—	—	1	—	1	2	18
		73	23	9	15	120	29	24	14	16	16	8	11	14	8	11	12	283

District (or sub-division) of Walthamstow.

Population.

Births in the year { legitimate, 3144. / illegitimate, 53.

Deaths in the year of { legitimate infants, 261. / illegitimate infants, 22.

Estimated to middle of 1910, 141,748.

Deaths from **all Causes at all Ages, 1186.**

Working in association with those responsible for mothers' meetings, a tactful and sympathetic woman would be capable of effecting immense good, by advice to the expectant mother and to those mothers revealed by the Act's operations, more particularly in those Wards, where the mothers need it most.

The facing table (No. VI.), giving the deaths of children under 1 year of age, is in accordance with the requirements of the Local Government Board. The table is most instructive, and will help in forming a judgment as to the possible saving of infant life that may be effected if my suggestion is carried out.

Of the 283 children so dealt with, 120 died within the first month of life.

Prematurity and inanition—inability to live—account for 68, or more than half; congenital defects and inability to thrive account for 25 others; convulsions and overlaying bring the total to 103.

Within the next three months 53 others have died, mainly from Prematurity, Bronchitis and Pneumonia, and Wasting Diseases, and so on to the end of the year, the latter diseases seem to be the chief cause of death.

In the formation of Table V. (L.G.B.), the deaths attributable to each Ward are indistinguishable. Dealing with the principal causes only, the following are the figures :—

Ward.	No. of Births.	Deaths from			
		Prematurity and Developmental.	Disease of Lungs.	Whooping Cough and Measles.	Diarrhœa
St. James Street ...	659	43	24	3	7
High Street	565	20	10	2	5
Hoe Street	521	20	6	3	1
Wood Street	410	21	2	—	2
Northern	1042	40	14	6	11

The deaths from Diarrhœa were below the usual in all the Wards, those from Syphilis and overlying similar to 1909. The deaths certified as due to Syphilis are the most unreliable of all recorded, and it is quite safe to say that two deaths in no way represent the total; more probably many of those attributed to Prematurity and Inanition should be grouped under this heading.

The influence of want of parental care upon Infantile Mortality could not be better exemplified than in the 22 deaths among the 53 illegitimates. These unwanted children are hardly ever breast-fed, being generally placed out to nurse and die.

The following shows in tabular form the number and causes of deaths in children under five years in 1910, 1909, 1908, 1907, 1906, 1905 and 1904:—

Diseases.	1910	1909	1908	1907	1906	1905	1904
Measles	16	28	31	30	35	34	45
Scarlet Fever	3	4	7	13	9	9	7
Influenza	—	1	—	2	1	0	1
Whooping Cough	31	45	2	72	18	31	29
Diphtheria	7	10	12	24	29	15	20
Croup	—	2	2	1	3	—	2
Enteric Fever	—	—	—	—	—	1	1
Diarrhœa	7	5	23	29	106	52	82
Zymotic Enteritis	2	9	14	15	49	26	99
Enteritis	18	7	7	6	11	12	4
Gastric-Enteritis	—	5	8	12	—	—	13
Septic Diseases	6	9	3	5	7	8	4
Tuberculosis of Meninges	18	12	12	26	13	13	13
Do. Lungs	4	3	—	—	4	4	3
Do. other forms	7	11	11	16	20	13	22
Cancer	1	1	1	—	—	—	1
Premature Birth	59	60	65	68	83	56	62
Developmental Diseases	90	76	89	76	88	84	94
Meningitis	5	9	10	13	14	16	18
Acute Bronchitis	36	29	41	42	34	31	32
Lobar Pneumonia	9	9	14	23	15	19	18
Lobular Pneumonia	52	45	56	59	49	54	45
Diseases of Stomach	6	2	7	4	2	2	6
Obstruction of Intestines	3	2	2	1	2	2	—
Bright's Disease	1	1	1	—	1	1	3
Accidents or Negligence	15	18	15	21	30	14	23
Congenital Syphilis	2	1	10	9	—	—	—
All other causes	27	26	47	41	66	47	46
	425	430	493	608	689	545	693

Four hundred and twenty-five deaths out of a total of 1,186 were of children under 5 years of age, and of the 425, 120 were in the first month and 283 within the first year of life.

SENILE MORTALITY.

Of the total deaths recorded, 280, or nearly 23 per cent., were 65 years and upwards, as compared with 22 per cent. for 1908, 19 in 1907, 17 in 1906, and 21 in 1905.

TABLE VIII.

SCHEDULE B. *Table of* DEATHS *during the year* 1910, *in the Urban Sanitary District of Walthamstow, classified according to Diseases, Ages, and Wards.*

No.	CAUSES OF DEATHS.	All Ages	Under 1	1 to 5	5 to 15	15 to 25	25 to 65	65 & upwards	St. James St.	High Street	Hoe Street	Wood Street	Northern	Total Deaths in Public Institutions (Workhouse and Infirmary included).
1	Small-Pox	—	—	—	—	—	—	—	—	—	—	—	—	—
2	Measles	20	3	13	4	—	—	—	6	5	1	3	5	3
3	Scarlet Fever	4	—	3	1	—	—	—	1	1	1	—	1	—
4	Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
5	Epidemic Influenza	10	—	—	—	—	3	7	1	2	3	4	—	2
6	Whooping Cough	32	11	20	1	—	—	—	10	5	5	1	11	8
7	Diphtheria, Membranous Croup	15	—	7	8	—	—	—	3	3	4	2	3	1
8	Croup	—	—	—	—	—	—	—	—	—	—	—	—	—
9	Enteric Fever	2	—	—	1	—	1	—	—	—	1	1	—	1
10	Asiatic Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—
11	Diarrhœa, Dysentery	8	7	—	—	—	1	—	3	2	—	2	1	—
12	Epidemic or Zymotic Enteritis	2	2	—	—	—	—	—	—	1	—	—	1	—
13	Enteritis	20	12	6	—	—	1	1	6	3	1	1	9	8
14	Gastro Enteritis...	1	—	—	—	—	1	—	—	1	—	—	—	—
15	Other continued Fevers	1	1	—	—	—	—	—	—	—	—	1	—	—
16	Cerebro Spinal Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—
17	Erysipelas	2	—	—	—	—	2	—	—	1	—	1	—	1
18	Puerperal Fever...	1	—	—	—	—	1	—	—	—	1	—	—	—
19	Other Septic diseases	24	4	2	5	1	8	4	5	4	—	6	9	12
20	Intermittent Fever and Malarial Cachexia ...	—	—	—	—	—	—	—	—	—	—	—	—	—
21	Tuberculosis of Meninges	24	3	15	4	2	—	—	2	5	6	4	7	3
22	Tuberculosis of Lungs	88	—	4	3	15	61	5	25	12	14	16	21	34
23	Other forms of Tuberculosis	16	3	4	3	—	5	1	2	3	3	2	6	1
24	Alcoholism	5	—	—	—	—	4	1	2	1	—	1	1	—
25	Cancer	74	1	—	—	—	50	23	16	10	24	4	20	19
26	Premature Birth	59	59	—	—	—	—	—	17	6	11	4	21	2
27	Developmental Diseases	90	85	5	—	—	—	—	27	15	9	17	22	15
28	Old Age	63	—	—	—	—	—	63	9	9	17	13	15	22
29	Meningitis	9	3	2	—	1	2	1	2	—	2	—	5	1
30	Inflammation and Softening of Brain ...	2	—	—	—	—	—	2	—	—	1	1	—	—
31	Organic Diseases of Heart	67	1	—	8	4	37	17	12	5	18	12	20	19
32	Acute Bronchitis	55	22	14	—	—	16	3	21	11	6	4	13	2
33	Chronic Bronchitis	64	—	—	1	—	20	43	16	13	8	12	15	5
34	Lobar (Croupous) Pneumonia...	53	3	6	2	3	34	5	15	11	5	8	14	10
35	Lobular (Broncho) Pneumonia	61	31	21	—	—	4	5	22	8	8	7	16	6
36	Diseases of Stomach	14	5	1	—	1	4	3	4	3	—	2	5	3
37	Obstruction of Intestines	9	2	1	—	—	1	5	—	3	—	4	2	3
38	Cirrhosis of Liver	10	—	—	—	—	9	1	1	1	3	3	2	4
39	Nephritis and Bright's Disease	31	1	—	—	—	19	11	10	7	5	5	4	8
40	Tumours and other Affections of Female Genital Organs	—	—	—	—	—	—	—	—	—	—	—	—	—
41	Accidents and Diseases of Parturition ...	1	—	—	—	—	1	—	—	—	—	—	1	—
42	Deaths by Accident or Negligence	34	4	11	4	2	8	5	6	5	7	6	10	20
43	Deaths by Suicide	8	—	—	—	2	6	—	1	2	1	1	3	4
44	Deaths from Ill-defined Causes	—	—	—	—	—	—	—	—	—	—	—	—	—
45	Syphilis	3	2	—	—	—	1	—	2	—	—	—	1	1
46	Overlying...	6	6	—	—	—	—	—	—	1	2	—	3	—
47	All other Causes	198	12	7	11	12	82	74	43	29	39	30	57	42
	All Causes	1,186	283	142	56	43	382	280	290	188	206	178	324	259

TABLE VII.

Table showing deaths for the four quarters of the year, and the total deaths for the entire district and for the Wards.

No.	CAUSE OF DEATH.	AT ALL AGES.					UNDER 1 YEAR.					1 TO 5 YEARS.					5 TO 15 YEARS.					15 TO 25 YEARS.					25 TO 65 YEARS.					65 AND UPWARDS.				
		1st Qr.	2nd Qr.	3rd Qr.	4th Qr.	Total.	1st Qr.	2nd Qr.	3rd Qr.	4th Qr.	Total.	1st Qr.	2nd Qr.	3rd Qr.	4th Qr.	Total.	1st Qr.	2nd Qr.	3rd Qr.	4th Qr.	Total.	1st Qr.	2nd Qr.	3rd Qr.	4th Qr.	Total.	1st Qr.	2nd Qr.	3rd Qr.	4th Qr.	Total.	1st Qr.	2nd Qr.	3rd Qr.	4th Qr.	Total.
1	Small Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2	Measles	2	12	3	3	20	—	2	1	—	3	1	9	2	1	13	1	1	—	2	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3	Scarlet Fever	—	3	—	1	4	—	—	—	—	—	—	3	—	—	3	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
4	Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5	Epidemic Influenza	8	—	1	1	10	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	1	—	3	6	—	—	1	7
6	Whooping Cough	22	7	—	3	32	6	4	—	1	11	15	3	—	2	20	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7	Diphtheria, Membranous Croup	3	1	4	7	15	—	—	—	—	—	2	—	2	3	7	1	1	2	4	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8	Croup	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9	Enteric Fever	—	—	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—
10	Asiatic Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11	Diarrhœa, Dysentery	3	1	2	2	8	2	1	2	2	7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—
12	Epidemic or Zymotic Enteritis	1	—	1	—	2	1	—	1	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
13	Enteritis	3	4	2	11	20	2	1	2	7	12	1	1	—	4	6	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	1	—	1
14	Other continued Fevers	1	—	—	—	1	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
15	Gastro Enteritis	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—
16	Erysipelas	—	—	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2	—	—	—	—
17	Puerperal Fever	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—
18	Other septic diseases	7	6	5	6	24	1	1	1	1	4	1	—	1	—	2	—	2	1	2	5	—	—	—	1	1	3	2	1	2	8	2	1	1	—	4
19	Intermittent Fever and Malarial Cachexia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	2	—	—	—	—	—	—	—	—	—
20	Tuberculosis of Meninges	3	7	7	7	24	—	—	1	2	3	3	5	4	3	15	—	—	2	2	4	—	2	—	—	2	—	—	—	—	—	—	—	—	—
21	Tuberculosis of Lungs	26	16	22	24	88	—	—	—	—	—	2	2	—	—	4	1	—	2	—	3	6	2	5	2	15	15	12	13	21	61	2	—	2	1	5
22	Other forms of Tuberculosis	3	2	5	6	16	2	—	1	—	3	—	—	1	3	4	—	1	1	1	3	—	—	—	—	—	—	1	2	—	4	—	—	1	—	1
23	Alcoholism	1	1	3	—	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	17	12	15	50	5	3	12	3	23
24	Cancer	11	21	24	18	74	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
25	Premature Birth	13	13	15	18	56	13	13	15	18	59	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
26	Developmental Diseases	34	13	21	22	90	33	12	20	20	85	1	1	1	2	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	20	10	10	23	63
27	Old Age	20	10	10	23	63	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	2	2	—	1	—	—	1
28	Meningitis	1	2	4	2	9	1	1	1	—	3	—	—	2	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	2
29	Inflammation and Softening of Brain	—	1	—	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
30	Organic Diseases of Heart	11	26	13	17	67	1	—	—	—	1	—	—	—	—	—	—	5	1	2	8	1	1	—	2	4	3	16	7	11	37	6	4	5	2	17
31	Acute Bronchitis	25	4	4	22	55	11	3	—	8	22	6	1	3	4	14	—	—	—	—	—	—	—	—	—	—	6	—	1	9	16	2	—	—	1	3
32	Chronic Bronchitis	21	9	9	25	64	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	6	6	4	4	20	15	3	5	20	43
33	Lobar (Croupous) Pneumonia	14	17	8	14	53	1	—	1	1	3	1	2	1	2	6	—	—	—	2	2	1	2	—	—	3	10	10	5	9	34	1	3	1	—	5
34	Lobular (Broncho-) Pneumonia	25	8	7	21	61	13	3	4	11	31	9	3	3	6	21	—	—	—	—	—	—	1	—	—	1	1	1	—	2	4	2	1	—	2	5
35	Diseases of Stomach	3	2	5	4	14	2	—	3	—	5	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	1	2	1	4	1	—	—	2	3
36	Obstruction of Intestines	2	3	2	2	9	—	1	—	1	2	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	2	1	1	1	5
37	Cirrhosis of Liver	2	3	3	2	10	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	2	3	2	9	—	1	—	—	1
38	Nephritis and Bright's Disease	12	11	1	7	31	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	9	5	1	4	19	3	5	—	3	11
39	Tumours and other Affections of Female Genital Organs	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
40	Accidents and Diseases of Parturition	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—
41	Deaths by Accident or Negligence	9	9	8	8	34	1	2	—	1	4	1	3	3	4	11	2	1	1	—	4	2	—	—	1	2	1	2	4	1	8	2	1	—	2	5
42	Deaths by Suicide	1	2	1	4	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	2	1	1	1	3	6	—	—	—	—	—
43	Deaths from Ill-defined Causes	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—
44	Congenital Syphilis	3	—	—	—	3	2	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
45	Respiratory Organs	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
46	Overlying	1	3	1	1	6	1	3	1	1	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
47	Marasmus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
48	All other Causes	47	60	38	53	198	1	5	3	7	21	1	2	2	2	7	4	1	3	3	11	5	3	1	3	12	19	27	16	20	82	17	22	12	23	74
	All Causes	340	277	232	337	1,186	95	54	58	76	283	44	36	25	37	142	10	12	13	21	56	15	12	7	9	43	89	105	79	109	382	87	58	50	85	280

Of the 280 Seniles, 141, or nearly 40 per cent., were over 75 years and 21 of these were over 85 at the time of death.

In the St. James Street Ward 23 were over 75, and 3 over 85 years.

„	High Street Ward	21	„	4	„
„	Hoe Street Ward	37	„	9	„
„	Wood Street Ward	30	„	1	„
„	Northern Ward	30	„	4	„

The preceding tables show the numbers and causes of death for the whole district and the several Wards. Table VII. gives the deaths in quarters, and Table VIII. is a combination of Schedule B (Form of the Medical Officers' of Health Society) and Table IV. (Local Government Board Form).

ZYMOTIC MORTALITY.

Included under this heading are the deaths from the "Seven Principal Epidemic Diseases":—Small Pox, Measles, Scarlet Fever, Diphtheria, Whooping Cough, Enteric Fever and Diarrhœa.

All the deaths attributable to Diarrhœa, certified as Enteritis and Gastro Enteritis are included.

The rate based on the total is ·74 per 1,000 of the population, which is less than that of 1909 by ·24.

The similar rate for the 77 "Great Towns" was 1·23, and for England and Wales, ·99.

The Zymotic Mortality is as low as rural England and as the death rates from the different diseases are separately discussed under their proper headings, it is needless to do more than to draw your attention to the number of deaths from Measles and Whooping Cough as compared with those from Scarlatina and Diphtheria and to refer to the table on page 5, which shows that for each individual disease of the Zymotics, our death rate was as low or lower than that for England and Wales.

The following tabular statement shows the numbers of deaths from these diseases since 1898.

TABLE IX.

	Small-Pox.	Scarlatina.	Diphtheria.	Croup.	Typhoid.	Measles.	Whooping Cough.	Diarrhœa.	Zymotic Enteritis.	Total.
1910	0	4	15	0	2	20	32	8	23	104
1909	0	11	14	3	2	30	46	7	10	123
1908	0	11	20	2	13	36	2	26	14	124
1907	0	22	35	1	5	22	76	56	15	232
1906	0	21	54	3	8	39	18	113	51	307
1905	0	17	28	0	8	35	31	52	26	197
1904	1	14	27	2	10	55	32	84	99	324
1903	0	6	17	0	19	52	34	28	37	193
1902	20	6	17	4	13	14	23	23	5	125
1901	1	13	38		12	43	26	131	10	274
1900	0	5	71	7	6	3	54	110	Gastro-Enteritis. 27	283
1899	0	6	64	9	19	33	34	144		309
1898	0	3	40	6	9	39	24	162		283

DEATHS FROM NOTIFIABLE INFECTIOUS DISEASES.

The deaths under this heading include those arising from Erysipelas and Puerperal Fever, but exclude those due to Measles, Whooping Cough and Diarrhœa ; with this difference the deaths are those usually classed as Zymotic.

The deaths under both heads are from "Preventable Diseases," as in theory all diseases ought to be, and old age the sole cause of death ; but in this connection we only refer to the diseases amenable to Public Health Administration and due to infection from person to person.

There were 24 deaths registered from these diseases ; 14 of them occurring at the Isolation Hospital.

The deaths are fewer in number by 10 than in the preceding year, and the mortality from these diseases as compared with previous years has been very little.

The following table shows these deaths for 1910 and 1909 for the whole district and for the Wards :—

TABLE X.

Names of Diseases.	Whole District.			Wards, 1910.				
	Deaths, 1910.	Deaths, 1909.	Increase + Decrease -	St. James Street.	High Street.	Hoe Street.	Wood Street.	Northern.
Small-Pox	—	—	—	—	—	—	—	—
Scarlatina	4	11	- 7	1	1	1	—	1
Diphtheria ... Membranous Croup	15	14	+ 1	3	3	4	2	3
Typhoid	2	2	—	—	—	1	1	—
Erysipelas	2	7	- 5	—	1	—	1	—
Puerperal Fever ...	1	—	+ 1	—	—	1	—	—
Cholera	—	—	—	—	—	—	—	—
Plague	—	—	—	—	—	—	—	—
Total	24	34	-10	4	5	7	4	4

The deaths from the notifiable diseases in previous years were—54 in 1908; 71 in 1907; 96 in 1906; 60 in 1905; 65 in 1904; 55 in 1903; 72 in 1902; 74 in 1901; 103 in 1900; and 104 in 1899.

Only one death occurred from Puerperal Fever. This fact is the more gratifying, considering that a large number of our mothers are attended in their confinements by midwives.

With the operation of the Act of 1902 the old order of ignorant midwife is passing away and the trained obstetric nurse is taking her place, with the result that lying-in-women are now and will be in future in safer hands.

The deaths registered under the heading of "Accidents and Diseases of Parturition" are also less than in previous years, as are the cases of Puerperal Fever notified.

DISEASES NOTIFIED DURING THE YEAR 1910.

Infectious Diseases Act, 1889.

The following table shows the number of cases of the various diseases certified each month during the year :—

TABLE XI.—*Cases of Infectious Disease notified during the Year* 1910.

1910. Notifications.		Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total.	Deaths.
Small-Pox	Under 5 years	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Over „	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Scarlet Fever ...	Under 5 years	5	3	8	2	4	9	6	4	9	10	1	6	67	4
	Over „	8	17	16	14	14	12	10	9	24	24	11	6	165	0
Diphtheria	Under 5 years	5	3	5	7	2	0	0	2	3	4	1	9	41	2
	Over „	4	4	11	4	10	3	8	5	13	8	7	20	97	8
Membranous Croup	Under 5 years	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Over „	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Enteric Fever ...	Under 5 years	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Over „	4	0	0	1	1	0	1	1	5	8	3	2	26	2
Continued Fever ...	Under 5 years	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Over „	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Puerperal Fever ...	Under 5 years	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Over „	0	1	0	2	0	0	0	0	0	0	0	0	3	2
Erysipelas	Under 5 years	1	0	1	0	0	1	0	0	0	2	1	0	6	0
	Over „	5	10	4	12	5	4	5	7	10	11	9	11	93	0
Totals	Under 5 yrs. 114	32	38	45	42	36	29	30	28	64	67	33	54	498	34
	Over „ 385														

The following table shows the distribution of Infectious Cases according to Wards, and the increase or decrease compared with 1909 :—

TABLE XII.—*Distribution of Infectious Diseases according to Wards.*

WARDS.	Estimated Population.	Small-Pox	Scarlet Fever.	Diphtheria.	Croup.	Erysipelas.	Enteric Fever.	Puerperal.	Totals.	Increase + or Decrease − on last year.
St. James Street	25,000	0	45	44	0	21	8	0	118	− 64
High Street ...	23,000	0	36	22	0	15	7	1	81	− 62
Hoe Street ...	25,000	0	51	21	0	20	4	1	97	− 40
Wood Street ...	18,500	0	21	7	0	13	2	1	44	− 27
Northern ...	40,500	0	79	44	0	30	5	0	158	−123
	Registrar General.									
1910	141,748	0	232	138		99	26	3	498	− 316
1909	136,602	0	506	183		112	13	0	814	−200
1908	131,486	0	635	233	0	111	37	8	1,014	−187
1907	126,397	0	815	251	6	105	21	3	1,201	− 52
1906	121,334	0	809	287	6	107	Con. 1 33	10	1,253	+ 65
1905	117,500	0	756	254	4	122	50	2	1,188	+213
1904	108,000	49	527	177	13	143	56	10	975	+328
1903	106,290	2	292	147	5	117	88	6	647	−436
1902	101,000	146	560	142	8	131	89	7	1,083	− 55
1901	97,000	3	608	322	11	111	73	10	1,138	+ 82

The following table is of interest to show the estimated Population, number of cases of Infectious Diseases notified, with Infectious Sickness Rate for the years since the Notification Act came into operation. The estimated Population is that of the Registrar-General:—

TABLE XIII.—*Estimated Population, Number of Infectious Diseases notified, with "Infectious Sickness Rate," and the Mean for the Years under consideration.*

Years.	Population.	Scarlet Fever.	Small Pox.	Diphtheria.	Croup.	Typhus Fever.	Typhoid Fever.	Continued Fever.	Erysipelas.	Puerperal Fever.	TOTALS.	Infectious Sickness Rate.
1890	46,500	129	0	160	3	1	117	3	31	0	444	9·5
1891	47,000	125	0	153	9	0	59	4	44	3	397	8·4
1892	49,400	399	6	137	17	0	28	0	94	3	684	13·8
1893	52,000	597	8	142	11	0	60	4	134	5	961	18·5
1894	57,000	247	11	129	15	0	66	0	75	3	546	9·5
1895	61,000	263	1	198	10	0	95	6	85	4	664	10·8
1896	65,000	315	0	124	6	0	193	2	122	5	767	11·8
1897	70,000	492	0	152	6	0	88	0	78	7	823	11·7
1898	77,000	293	0	225	9	0	75	0	82	3	688	8·9
1899	83,000	332	0	338	7	0	118	1	112	5	913	11·0
1900	91,000	347	0	516	11	0	86	1	87	8	1056	11·6
1901	97,000	608	3	322	11	0	73	0	111	10	1138	11·7
1902	101,318	560	146	142	8	0	89	0	131	7	1083	10·68
1903	106,290	292	2	147	5	0	88	0	117	6	657	6·2
1904	111,282	527	49	179	13	0	56	0	143	10	975	8·76
1905	116,300	756	0	254	4	0	50	0	122	2	1188	10·2
1906	121,334	809	0	287	6	0	33	1	107	10	1253	10·3
1907	126,397	815	0	251	6	0	21	0	105	3	1201	9·5
1908	131,486	635	0	220	3	0	37	0	111	8	1014	7·7
1909	136,602	506	0	183	0	0	13	0	112	0	814	5·9
1910	146,923	232	0	138	0	0	27	0	99	3	499	3·4
Average for previous years		452	12	212	8	0	72	1	100	5	843	10·0
Extremes	High't	815	146	516	17	1	193	6	143	10	1253	18·5
	Lowest	125	0	124	0	0	13	0	31	0	397	5·9

INFECTIOUS DISEASES AND MEASURES TAKEN TO PREVENT THEIR SPREADING.

During the year 498 cases of Infectious Disease were notified; they represent 447 infected houses.

Following upon notification each house invaded was visited, and enquiries made as to the probable sources of infection. This work was mainly entrusted to Miss Lamb, an experienced nurse, holding the Sanitary Institute's Certificate.

Cases of Erysipelas were undertaken by the Male Inspectors, as was the subsequent examination of all the premises.

All the Scarlet Fever and Diphtheria patients isolated at the Sanatorium were removed under the care of the Nurse, as were many of the Typhoids. Typhoid patients were mainly accommodated at the Whipps Cross Infirmary, or at the local General Hospital.

Cases of Erysipelas are seldom removed to Hospital, except by the Poor Law Authorities.

Full instructions, verbally and in writing as to the precautions to be taken against the spreading of infection, are given to the persons in charge of home-nursed cases. This is supplemented by re-visits by Miss Lamb to ensure that the instructions given are carried out.

Where necessary or desirable, Medical Officers of other districts are notified of the possibility of infection spreading through other members of the family.

Children from infected homes and contacts are not permitted to attend the day or Sunday Schools for varying periods. The Superintendents of the latter invariably co-operate in this exclusion.

At the beginning of each school term the Head Teachers were advised to examine the children for any signs of recent illness indicative of Scarlet Fever or Diphtheria, and all suspects were excluded until seen by me.

Graphic records are kept to show the incidence of diseases at each school, and when necessary particular class-rooms are visited, and children with suspicious symptoms are excluded. Disinfection of the cloak-rooms of the Elementary Schools is carried out during the holidays and at other times if considered necessary.

The provisions as to work in infected dwellings are enforced in accordance with Factory and Workshop Act of 1901.

Following removal or recovery, disinfection was carried out by the Council's employees, under the supervision of Mr. West, and all infected clothing, bedding, etc., were treated by steam under pressure.

Outfits for early Diphtheria and Typhoid diagnoses are kept at the Public Health Offices, and anti-diphthiretic serum may be obtained at all hours from the Fire Station and during the day from the Town Hall.

The serum is supplied gratuitously to those unable to pay for its cost or administration.

During the year 21 local practitioners were supplied with 155 bottles, and of these 11 were paid for.

The Phthisis notifications received in pursuance of the Public Health (Tuberculosis) Regulations Order, 1908, were dealt with on the same lines as last year, and disinfection of the rooms occupied by deceased consumptives was carried out whenever the consent of the householder could be obtained.

This was effected in 58 instances.

The non-notifiable diseases of Measles and Whooping Cough are dealt with by exclusion from the Infants' Schools of all contacts, and from the Senior Schools, of children from infected houses if the children have not already had the disease, or if the sufferers are not properly isolated.

TABLE XIV.—*Cases of Infectious Disease notified during the Year* 1910.

Name of District—Walthamstow.

Notifiable Disease.	Cases Notified in Whole District.							Total Cases Notified in Each Locality.					No. of Cases Removed to Hospital from Each Locality.					Total Cases Removed to Hospital.
	At all Ages.	At Ages—Years.						St. James Street.	High Street.	Hoe Street.	Wood Street.	Northern.	St. James Street.	High Street.	Hoe Street.	Wood Street.	Northern.	
		Under 1	1 to 5	5 to 15	15 to 25	25 to 65	65 and upwards											
Small Pox ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Croup)	138	—	40	83	6	8	1	44	22	21	7	44	34	15	20	6	36	111
Erysipelas ...	99	5	2	9	13	60	10	22	15	19	15	28	2	—	2	—	4	8
Scarlet Fever ...	232	4	63	141	20	4	—	45	37	49	22	79	38	33	44	17	57	189
Typhus Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever ...	26	—	—	10	8	8	—	8	7	4	2	5	6	5	3	1	4	19
Relapsing Fever...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Continued Fever...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever ...	3	—	—	—	2	1	—	—	1	1	1	—	—	1	—	—	—	1
Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals	498	9	105	243	49	81	11	119	82	94	47	156	80	54	69	24	101	328

Isolation Hospital—Walthamstow Sanatorium, Chingford.

Total available beds—93. Number of Diseases that can be concurrently treated—4 at least.

The following table shows Infectious Diseases according to Wards, and the number removed to Hospital:—

SMALL POX.

In a neighbouring district two persons were known to have been suffering from this disease, and three in London in the first quarter of the year, as were two in London in the second quarter.

Owing to the system of voluntary notification, one to the other, by Medical Officers of Health, your authority was made aware of the facts and enabled to take the necessary precautions in so far as contacts were known.

No case has arisen here since 1904.

The agreement with the West Ham Corporation for the reception and treatment of all our Small Pox patients is still in operation, and were the disease to occur in our midst I fail to see how it could spread to any great extent provided every sufferer was known to your officials.

Persons so suffering would gladly be removed to the Small Pox Hospital, and the housing conditions of our people are not those usually associated with the spreading of the disease.

Were London generally to suffer then we should also, owing to the numbers of our people who would be exposed to infection, but no precautions on our part could prevent that and the remedy suggested by the majority of the medical profession should not be neglected. Personally, I believe that vaccination, if not an absolute preventative for all persons, is a perfectly safe operation and a precautionary measure that all of us should take whenever Small Pox is rife in the metropolis.

SCARLET FEVER.

Two hundred and thirty-two cases of this disease were notified in 1910, compared with 506 in 1909; 635 in 1908; 815 in 1907; 809 in 1906 and 756 in 1905.

Since the Notification of Diseases Act came into operation in 1889, our freedom from Scarlet Fever was never so marked, and the total deaths from this disease were four, showing a case mortality of less than 2 per cent. and a death-rate of ·03 per 1,000 of the population.

Nearly 90 per cent. of those attacked were under 15 years of age and three of the four deaths were in children under five.

The number of cases occurring in each Ward is given on page 35. The attack rate for the district was 1·7.

The incidence in each Ward varied from 1·1 in Wood Street to 1·9 in Hoe Street and the Northern Wards. St. James Street and High Street had a rate of 1·8 and 1·6 respectively.

No death from this disease took place in Wood Street, but the other Wards had one each and the type of disease in all the Wards was mild.

Of the 232 cases notified, 189 or 81 per cent. were removed to hospital.

The number of cases removed from each Ward for 1910 and previous years with percentages of the total may be seen from the following:—

	St. James St.	High St.	Hoe St.	Wood St.	Northern.
1910	38	33	44	17	57
and for previous years—					
1909	97	53	48	32	134
1908	78	55	83	26	168
1907	83	86	61	83	118
1906	57	65	50	73	68
1905	50	70	44	31	62
1904	50	36	50	37	30
1903	59	63	53	67	45
Per cent. removed—					
1905	33	31	33	38	33
1906	41·6	37·5	38·4	42·2	34·7
1907	56	58	38	67	47
1908	68·4	78·5	63	42·5	65
1909	83	80	60	69	69
1910	84	90	90	77	72

DIPHTHERIA—MEMBRANOUS CROUP.

During the year 138 cases of this disease were notified compared with 183 in 1909, 223 in 1908 and 251 in 1907.

One hundred and eleven of the cases (80 per cent. of the total) were removed to Hospital.

No undue incidence was apparent in any particular period of the year, the cases varying from two in June to 15 in September, with a maximum of 25 in December.

The attack rate for the whole district was under one and the death-rate ·1 per 1,000 of the estimated population, but as in previous years the Wards were affected differently.

The following tabular statement gives the necessary facts.

	St. James Street.	High Street.	Hoe Street.	Wood Street.	Northern.
No. Notified	44	22	21	7	44
No. of Deaths	3	3	4	2	3
No. removed to Hospital	34	15	20	6	36
No. of Deaths in Hospital	3	1	3	1	2
Death-rate per cent. of those removed to Hospital	8·8	6·6	15·	16·6	5·5
No. remaining at home ...	10	7	1	1	8
No. of Deaths	1	1	0	0	1
Death-rate per cent. of those remaining at home	10	14	0	0	12·5

The freedom of Wood Street Ward from this disease is very noticeable and the comparatively large number of cases in St. James Street as compared with High Street and Hoe Street and the Northern Ward with nearly double the population, is evidence that the adverse conditions commented upon in previous reports and referred to on page 19, operate largely in promoting a high Diphtheria incidence.

The influence of age upon the resulting mortality from Diphtheria may be appreciated by stating that seven deaths occurred among 40 sufferers under five years of age, eight deaths among 83 others between five and fifteen years, while no death occurred among the remaining fifteen over that age, that is, the death-rate in children under five is twice as great as that between five and fifteen, and over that age the prospects of recovery are quite good.

The necessity for the early treatment of Diphtheria in children has been pointed out in previous reports and its insidious mode of onset referred to. The offer to provide serum gratuitously for injection in doubtful cases with the payment of a fee for provisional notification has not been availed of to any extent.

During the year three provisional certificates were received.

An order was issued in August by the Local Government Board, sanctioning the provision by urban authorities of a temporary supply of antitoxin serum.

The order has been anticipated by you for at least ten years and happily the expense incurred has never been questioned.

In a circular accompanying the order, the Board suggests that in notifying practitioners of your willingness to supply serum free, emphasis should be laid on the importance of prompt treatment by antitoxin of those attacked by Diphtheria or exposed to the infection of the disease.

Within six months of the issue of the order, Dr. Goodall, Superintendent of one of the Metropolitan Asylums Board's Hospitals, while making it quite clear that he was most firmly convinced of the value of antitoxin in the treatment of Diphtheria was equally strong in his aversion to its use as a prophylactic, and quite frankly stated that an indiscriminate use of serum as a prophylactic or preventative, is not only unnecessary but unjustifiable.

That the general practitioner, and those to whom the carrying out of the order is entrusted can steer a safe course with such diverging opinion from experts seems impossible, but it is well that all agree as to the great value of antitoxin serum for curative purposes, while we are left to recognise that there is little room for dogma in medical science.

The following figures taken from the Registrar-General's Quarterly Returns are of interest to show our position in reference to Scarlet Fever and Diphtheria, as compared with our immediate neighbours :—

	Population.	No. Notified.		Deaths.	
		S.F.	Diph.	S.F.	Diph.
Tottenham ...	132,803	283	90	4	13
West Ham ...	328,585	993	357	19	49
East Ham ...	156,208	329	145	4	13
Leyton	133,436	553	164	16	20
Walthamstow ...	141,748	234	139	4	14

The following table will be of interest as showing the drainage and other defects in houses in which cases of infectious diseases occurred, and will help to show their relationship :—

Total No. Notified.	Disease.	No. of Houses Invaded.	No. showing defects as to :—		Dirty Condition of the House.	Percentage showing defects in :—		Dirty Condition of Prem's.
			Drains.	Traps, Fittings. etc.		Drains.	Sanitary Fittings. etc.	
138	Diphtheria ...	132	7	33	24	5·3	25·0	18·2
99	Erysipelas ...	99	1	9	24	1·0	8·9	24·2
26	Typhoid Fever	22	3	6	6	13·6	27·2	27·2
3	Puerperal Fever	3	—	—	1	—	—	33·3
232	Scarlet Fever ...	191	13	36	58	6·8	18·8	30·3
498		447	24	84	113			

The following table shows the estimated population, the number of cases of Diphtheria and Membranous Croup, the attack rate since 1890, and the death-rate since 1898.

TABLE XV.

Years.	Population.	Number of Diphtheria cases.	Rate per 1,000.	Membranous Croup cases.	Diphtheria and Croup Death-rate per 1,000 population.
1890	46,500	129	2·5	3	—
1891	47,000	153	3·22	9	—
1892	49,400	137	2·77	17	—
1893	52,000	142	2·73	11	—
1894	57,000	129	2·26	15	—
1895	61,000	198	3·24	10	—
1896	65,000	124	1·9	6	—
1897	70,000	152	2·17	6	—
1898	77,000	225	2·9	9	·59
1899	83,000	338	4·0	7	·88
1900	91,000	516	5·6	11	·86
1901	97,000	322	3·4	11	·39
1902	101,318	142	1·40	8	·20
1903	106,290	147	1·38	5	·16
1904	111,282	177	1·59	13	·26
1905	116,300	254	2·18	4	·24
1906	121,500	287	2·3	6	·44
1907	126,397	251	2·0	6	·27
1908	131,486	220	1·6	3	·15
1909	136,602	182	1·3	0	·10
1910	146,923	138	0·93	0	·10

ISOLATION HOSPITAL.

In last year's report I pointed out, that owing to the large capital expenditure involved and the heavy yearly expenditure—over £6,000—incurred in the maintenance and upkeep of the Sanatorium, further extension, under present conditions, was not necessary.

I pointed out the difficulties experienced in the control of such a disease as Scarlet Fever, whose very mildness in some cases lead parents to ignore and the doctor to doubt its existence.

I showed how it is not yet satisfactorily explained why it should occur at one time in an epidemic form and at another fails to spread even amongst the most susceptible persons—the general conditions being apparently alike—and I urged that to minimise the volume of Scarlet Fever infection what is needed is a strict supervision of our school children, the co-operation of the parents and teachers and a reasonable number of beds for first cases, rather than the provision of a large hospital with beds for every possible case that may arise.

This view met with your approval.

During the past year the number of cases of Scarlet Fever and Diphtheria were practically fewer than in any previous year, and this satisfactory record is no doubt largely due to the willing and intelligent co-operation of the teachers and the attendance officers with those to whom the public health work of the town is entrusted.

As a result the Hospital accommodation was far beyond what was needed, and during several months of the year more than two pavilions were empty.

The possibility of using the vacant beds for other purposes was discussed, but the risk was too great to assume that the favourable conditions of 1910 would be permanent, or that with a constant population of 26,000 school children, 30 per cent. of whom migrate yearly from and to other districts, our present Hospital accommodation could be curtailed.

The report of the Resident Medical Officer will be read with interest, showing as it does the advantages and necessity of our Cubicle Block, and what an important part it plays in the efficient and economical management of the Hospital.

We have now had five years' experience of the treatment of patients suffering from Scarlet Fever, Diphtheria, Measles, Whooping Cough and Chicken Pox, placed side by side and under the same roof, the same nurses and doctor in attendance, and in not a single instance has infection been conveyed from one patient to another.

SANATORIUM REPORT, 1910.

ADMISSIONS, DISCHARGES, DEATHS.

	Scarlet Fever.	Diphtheria.	Diphth'a & W'ping Cgh.	Total.
Remaining on Dec. 31st, 1909 ...	44	6	—	50
Admitted during 1910	193	111	1	305
Total	237	117	1	355
Discharged during 1910	221	83	—	304
Died during 1910	4	10	1	15
Remaining on Dec. 31st, 1910 ...	11	24	—	35

The patients are entered in the above table and also in the following two tables, according to the disease notified from the Town Hall.

The case of mixed infection, notified Diphtheria, and Whooping Cough were admitted from Leyton; it was at once isolated in the cubicles, so did not become source of infection to others.

In some cases additional information was gained by the ambulance nurse regarding doubtful cases, or cases exposed to mixed infection, and these cases were also always isolated in the cubicles.

One of the Diphtheria cases was admitted from Edmonton. The case above mentioned of Diphtheria and Whooping Cough was admitted from Leyton. One Diphtheria case was admitted from West Ham. Five Scarlet Fever cases were admitted from Loughton. One Scarlet Fever case was admitted from West Ham.

AGES OF PATIENTS ADMITTED.

	Scarlet Fever.										
	Under 5 years.		From 5 to 10 years.		From 10 to 15 years.		15 years and upwards.		Total of		Total.
	M	F	M	F	M	F	M	F	M	F	
January ...	2	2	1	4	2	1	1	—	6	7	13
February ...	1	—	3	6	1	2	—	4	5	12	17
March ...	3	4	5	4	—	1	—	1	8	10	18
April ...	—	—	2	4	4	3	2	2	8	9	17
May ...	2	2	5	3	—	1	1	—	8	6	14
June ...	3	4	3	5	1	2	—	—	7	12	18
July ...	2	4	4	3	1	1	1	—	8	8	16
August ...	3	1	5	—	2	2	1	1	—	—	15
September	2	4	6	7	2	3	—	—	—	—	24
October ...	4	4	6	6	1	1	1	1	12	12	24
November	—	—	3	5	2	—	—	—	—	—	10
December	2	2	1	1	—	1	—	—	3	4	7
Total...	23	27	44	48	16	18	7	9	65	80	193
	50 (26·4%)		92 (47·6%)		34 (17·6%)		16 (8·2%)		145, 75·1%		

AGES OF PATIENTS ADMITTED.—DIPHTHERIA.

	Under 5 years.		From 5 to 10 years.		From 10 to 15 years.		15 years and upwards.		Total of		Total.
	M	F	M	F	M	F	M	F	M	F	
January ...	1	3	—	3	—	—	—	—	1	6	7
February ...	2	1	—	2	1	—	—	—	3	3	6
March ...	4	2	3	2	—	1	1	1	8	6	14
April ...	4	2	—	2	—	—	—	—	4	4	8
May ...	—	1	1	4	—	—	—	1	1	6	7
June ...	—	—	2	—	—	—	—	—	2	—	2
July ...	—	—	3	—	—	3	—	1	3	4	7
August ...	1	1	2	1	—	—	—	—	3	2	5
September	—	4	4	7	1	—	—	1	5	12	17
October ...	4	—	—	1	—	1	—	1	4	3	7
November	1	—	2	2	—	—	—	1	3	3	6
December	6	2	5	10	1	1	—	1	12	10	26
Total...	23	16	22	34	3	6	1	7	49	59	112
	39 (34·8%)		56 (50%)		9 (8·0%)		8 (7·1%)		108, 96·4%		

DEATHS.

Disease.	Under 5 years.		From 5 to 10 years.		From 10 to 15 years.		15 years and upwards.		Total of		Total.
	M	F	M	F	M	F	M	F	M	F	
Diphtheria*	2	3	1	3	1	—	—	1*	4	7	11
Scarlet Fev.	1	3	—	—	—	—	—	—	1	3	4
Total ...	3	6	1	3	1	—	—	1	5	10	15
	9		4		1		1		15		

* In case of one patient who was notified as Diphtheria, Lobar Pneumonia only was the cause of death.

One of these deaths, due to Diphtheria, was that of a patient from Leyton—a case of mixed infection—notified Diphtheria and Whooping Cough; on admission there was also the complication of broncho-pneumonia.

Of the deaths due to Scarlet Fever, one was a case of mixed infection—Scarlet Fever and Measles—Measles Rash developed on third day after admission, and Broncho-Pneumonia followed.

The average daily number of patients in Hospital was as follows:—

January	44·41
February	42·21
March	41·54
April	44·60
May	35·96

June	25·46
July	32·38
August	31·06
September	29·70
October	49·45
November	38·36
December	24·80

Complications of Scarlet Fever :—

Acute Nephritis	2
Adenitis	3
Adenitis (suppurative)	1
Albuminuria	2
Angina (late)	5
Arthritis	4
Bronchitis	2
Broncho-Pneumonia...	1
Corneal ulcer...	1
Endocarditis	1
Ear discharge (Otorrhœa)	14
Mastoid abscess	1
Meningitis	1
Nasal discharge	5
Relapse	4

Three patients notified as Scarlet Fever were also suffering from Diphtheria.

One Scarlet Fever patient developed Measles Rash third day after admission, and Broncho-Pneumonia supervened.

All these mixed cases were isolated in the cubicles, and no cases of infection followed.

Complications of Diphtheria :—	No. of Cases.
Antitoxin rash...	9
Anthritis accompanying rash	5
Albuminuria	10
Adenitis	9
Bronchitis	1
Cardiac complications	11
Diphtheritic paralysis	8
Ear discharge (Otorrhœa)	2
Epistaxis ... ... (In one case very severe).	5
Laryngeal cases	3
Nasal discharge ... ... (One had extensive membrane in nasal passages).	16
Recrudescence of Sore Throat	3

Four cases, notified Diphtheria, were suffering from Scarlet Fever only; these were isolated in cubicles, and no case of infection from them occurred.

There were only three larygeal cases admitted during the year; they all recovered; none required tracheotomy.

Over 470 bacteriological examinations from throats and noses were made during the year.

Of the Diphtheria cases sent into Hospital, some which were undoubtedly Diphtheria failed to give bacteriological evidence of the disease.

A slight outbreak of Chicken Pox occurred during the latter part of the summer; five patients in the Convalescent Scarlet Fever Block were affected.

In December, three cases of German Measles occurred in the Diphtheria Block.

Both of these groups of cases were isolated in the cubicles, and no other cases followed.

During the summer one of the staff—a new probationer—contracted Scarlet Fever in a mild form; she was isolated for six weeks. The other cases of illness which have occurred amongst the staff have been few and slight; in only one of these cases did absence from duty extend to a fortnight.

No other cases of infection amongst the patients or staff have occurred during the past year.

TYPHOID FEVER.

Twenty-six persons were notified as suffering from this disease in 1910.

The number is smaller than in any previous year, 1909 and 1907 excepted, and considerably below the average (54) for previous ten years.

Three of the cases were discovered by me, and were contacts from a previous case nursed at home. They were under treatment for Catarrh of Stomach, Influenza and Rheumatism respectively for some weeks previously. I reported the circumstances to the Public Health Committee, but the explanation for non-notification was accepted and no legal action was taken under the Act of 1889.

The history of two cases arising in one house was as follows:—

H. C., a male, aged 17 years, attended the local hospital for three weeks and was then admitted.

Four days subsequent to his discharge a brother, aged 13, fell sick and was removed to Whipps Cross Infirmary, and was within three days notified as suffering from Typhoid.

There were nine inmates in the house and no other case arose.

In September, E.P., male, aged 46, was nursed at home. No history was obtained as to how infection was contracted, but most probably it was from without the district.

Within a month a son, aged 19, contracted the disease and was removed to hospital, the remaining three inmates escaping.

One case notified on the 1st September was visited by his doctor on the following day, and the information given to the Inspector was that the patient was told that he had not had Typhoid, and that his illness was due to eating "tainted fish," and the man went to work within a week.

I visited the home and was satisfied that in notifying the error was on the safe side and no disinfection was carried out, nor did any subsequent trouble arise.

E. B., a female, aged 14½ years, was notified on the 30th of May—four weeks subsequent to first onset of illness—and died the next day.

The notification was not withdrawn, but the death certificate given after a post-mortem was Endocarditis.

The patient, M. C., female, aged 46 years, was notified on the 25th of April, eight days after onset of illness, and was removed to Whipps Cross Infirmary on the 27th, the premises were disinfected on the 28th. Upon subsequent enquiry I was told the illness was probably Pneumonia.

H. L., aged 12 years, a male, was treated for Anæmia for two weeks prior to removal to West Ham Infirmary, and was in that Institution for two more weeks when notified as Typhoid.

Careful investigation was made into every case as to the probable source of infection, but the alleged causes cannot be accepted as the true ones.

Excluding the contacts and those diagnosed differently subsequent to notification, eating cockles and mussels may account for one and four respectively.

One of the four who ate uncooked mussels died. Two of the seven home nursed cases also died, all the others recovered.

The invaded premises revealed defective drains in three instances, and defective sanitary fittings in six; there were five of the houses dirty, and in four were uncovered water drinking cisterns.

There can be no doubt there was no common origin in the great majority of cases, and drinking water has played a negligible part.

Dirty premises in so far as they imply dirty habits of the inmates may be credited with the responsibility they deserve.

The distribution of cases as to Wards was as follows :—

Wards :—St. James St.	High St.	Hoe St.	Wood St.	Northern.
8	7	4	3	5
And removals to Hospital were—				
6	5	3	1	4
And the deaths occurring were—				
0	0	1	1	0

The death from Endocarditis is not given, so that the death-rate for Typhoid was ·01 per 1,000, similar to that of 1909 and compares very favourably with ·05 for the 77 "Great Towns."

SUMMER DIARRHŒA—EPIDEMIC OR ZYMOTIC ENTERITIS.

During the year eight deaths were registered as due to Diarrhœa, two from Zymotic Enteritis, 20 from Enteritis and one from Gastro-Enteritis, or a total of 31 deaths from diseases whose prominent symptoms are Diarrhœa.

All these deaths are grouped together as in previous years, and compare favourably with 31 in 1909, 67 in 1908, 178 in 1906, and 73 in 1905.

The deaths from Summer Diarrhœa, or Zymotic Enteritis are of Public Health interest, from the belief that, occurring mainly in hand-fed children under one year of age, and under certain climatic and sanitary conditions, they are largely preventable.

From the table of deaths, facing page 27, it will be noticed that 9 deaths can strictly be reckoned as due to Summer Diarrhœa, and that 12 of the deaths from Enteritis might also be due to preventable causes.

Enteritis is a disease which mainly affects infants, and though more frequent in the summer months, is quite common at other periods of the year, more especially as a sequel to such diseases as Measles.

It is quite likely then that seven of the deaths over one year of age under opposite conditions may be really due to a cause not at all mentioned in the death certificate, and thus the total possible preventable deaths may not have exceeded 22 at most.

These numbers in a year with a cold and wet summer may readily become augmented five or ten fold under the opposite conditions of great heat and absence of rain, and all measures counteracting these unfavourable factors are worthy of our attention.

I have so fully dealt with Summer Diarrhœa in young children in previous reports that to most of you its causes and remedies are well known.

The importance of the subject is my excuse for repeating that the two main factors in its production are excessive summer heat and the improper feeding of infants.

The first is unavoidable but the experience of Brighton and elsewhere as to feeding, may again with advantage be reproduced.

"It is twice as dangerous to feed babies on condensed milk as on fresh cows milk; it is 40 times as dangerous to feed a baby on cows milk and 70 times as dangerous to feed a baby on condensed milk as on mother's milk."

The great danger to infant life from hand feeding is due to ignorance and inexperience on the part of the mothers, insanitary conditions within and around the home, and domestic uncleanliness.

When these are in association with an unclean milk supply the life of the hand-fed baby is always in serious danger.

What I said in 1907 is equally applicable in 1910.

The importance of a clean milk supply for the food of children is all important, and the recent Notification of Births Act, if adopted, will give ample opportunity of imparting to those in need of it, a knowledge of healthy infant rearing.

If a crusade against ignorance, dirt, want of fresh air. and unhealthy conditions generally in and about the house, can be organised through its adoption, the wastage of child life from Diarrhœal diseases will soon cease.

Our death-rate from Diarrhœa is similar to that of 1909, ·22 per 1,000 against ·5 for 1908, 1·04 in 1906, and ·67 in 1905.

The corresponding rate in 1910 for the large towns was ·38.

MEASLES AND WHOOPING COUGH.

There were 30 deaths registered during the year from Measles and 32 from Whooping Cough.

The deaths were fewer than in 1907, but as in previous years, they were actually more than those from all the other Zymotic diseases combined.

Sixteen of the deaths from Measles, and 31 of those from Whooping Cough were in children under five years of age and account for one-fourth of all the deaths occurring at this age period.

Unfortunately neither disease is looked upon by parents or the public as a dangerous infectious one.

Parents assume they are inevitable and the public seem unwilling to incur any great expenditure in a serious effort to lessen their mortality while enormous sums are spent yearly in the isolation and hospital treatment of such a disease as Scarlet Fever, whose mortality is a negligible one compared with that of Measles.

Excluding the years 1907 and 1909, the deaths from Whooping Cough have been pretty uniform during the past twenty years and averaged about thirty yearly.

Measles caused 87 deaths in 1895, and 52 and 55 deaths in 1903 and 1904, the remaining 17 years showed an alternate rise and fall with an average mortality of thirty.

The two diseases therefore, are responsible for about one-twentieth of the total mortality and instead of being of little importance, they are the most serious and fatal of all the diseases of children between one and five years of age.

In former reports I have pointed out that the measures possible against Measles and Whooping Cough are dissimilar to those undertaken on behalf of the so-called dangerous infectious diseases, and we rely upon exclusion from our infants schools of sufferers and contacts, with occasional visiting to homes affected, and the distribution of leaflets of advice.

Much more might be done with a larger staff of health visitors.

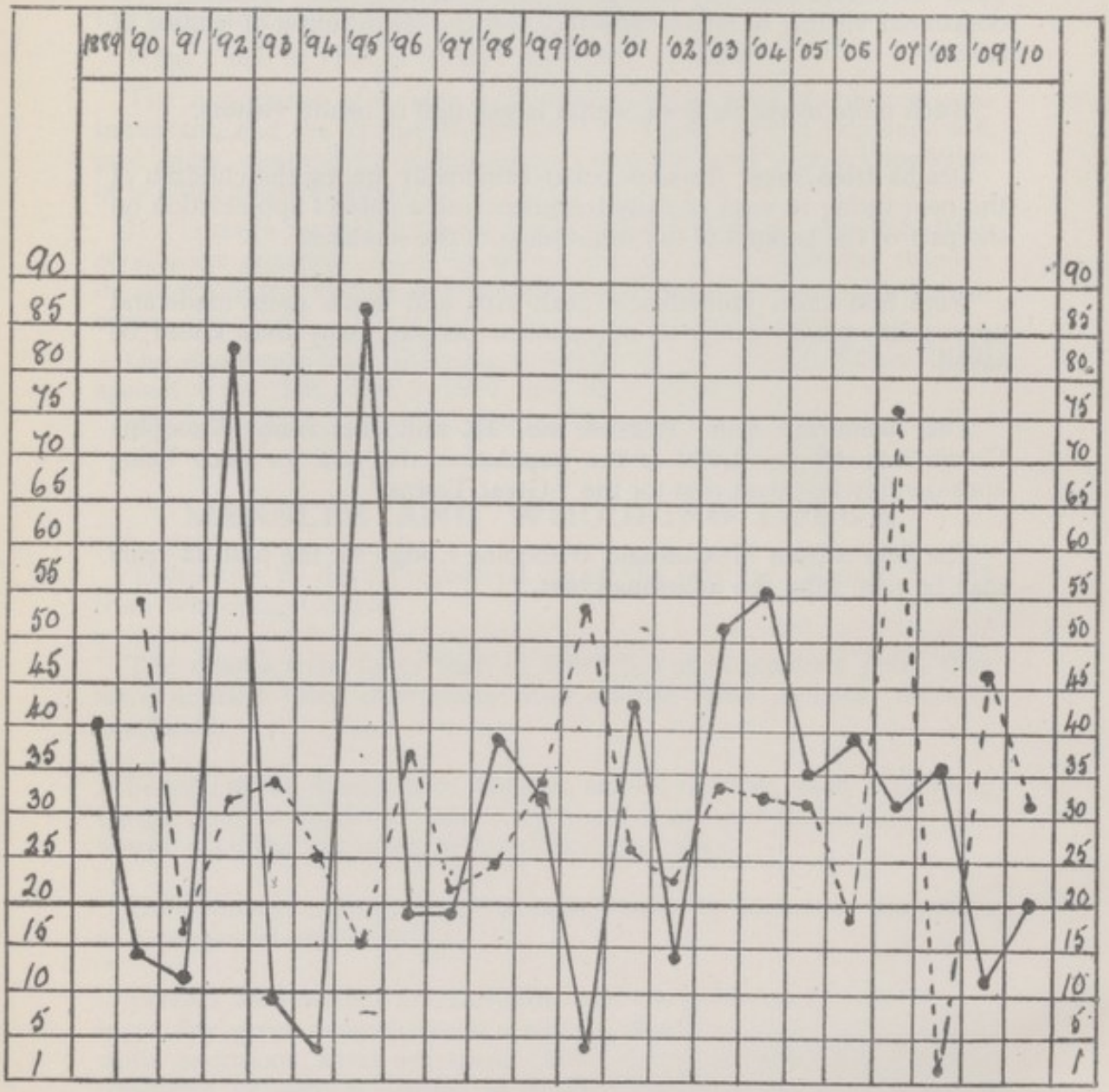
Deaths from these diseases occur principally among the children of the poor owing to want of early treatment and a correct appreciation on the part of the parents of the seriousness of the diseases.

Were first cases immediately dealt with, and home visits made and appropriate advice given to our poorest people, many lives could be saved.

The death-rate from Measles was ·14, and that from Whooping Cough was ·22 per 1,000 of the population, the rate for each being considerably less than that for the "Great Towns."

The deaths from Measles and Whooping Cough for the past 22 years may be seen from the following chart.

Deaths from Measles and Whooping Cough, 1889–1910.



The straight lines indicate Measles. The dotted lines indicate Whooping Cough.

The following figures are from those weekly supplied by the Education Committee's Superintendent of Attendance Officers, and show the number of children absent from school during the year, owing to Measles and Whooping Cough :—

TABLE XVI.

SICKNESS RETURN, FROM JANUARY, 1910, TO DECEMBER, 1910.

Month Ending	Measles.	Whooping Cough.	Total.
January	18	405	423
February	114	479	593
March	335	465	800
April	533	422	955
(Easter Holiday—1 week)			
May	573	226	779
(Whitsun Holiday—1 week)			
June	626	145	771
July	525	152	677
August	—	—	—
(Midsummer Holiday—4 weeks)			
September	41	21	62
October	13	9	22
November	20	53	73
December	49	130	179
(Christmas Holiday—2 weeks)			
Total	2,847	2,507	5,354

The numbers for each month are the sum of the weekly returns, and therefore represent nearly four-fold the actual number affected.

INFLUENZA.

This disease was at no time of the year epidemic. As in previous years, in association with Bronchitis and Pneumonia in elderly people, it is a dangerous affection, and was the cause of 10 deaths.

PUERPERAL FEVER.

One death was registered from this disease, and in "The Table of Deaths" one also is given as due to "Accidents and Diseases of Parturition."

The number of deaths attributable in any way to the lying-in state is very small, as was the number of women notified as suffering from Puerperal Fever. In fact the year was among the best on record, and considering that the home conditions of many of our poorer women are far from predisposing to safety, the result is remarkable.

This may in part be attributed to the work undertaken by the Essex Cottage Nursing Home, the Maternity Clubs associated with the Churches, and to the effective supervision exercised by the County Authority in the administration of the Midwives' Act of 1902.

The bad results of unskilled attendance upon lying-in women do not always show themselves in deaths from Puerperal Fever, and in spite of our favourable record for the year, for other reasons as well as for the safety of the mother, women during and shortly before and after confinement should be under the supervision of a doctor.

Very few persons who train as midwives have the requisite skill or knowledge to undertake alone with safety the care of lying-in women, and more particularly the care of the new-born infant.

The care of the latter requires great skill and knowledge, but unfortunately this is not always recognised, aud the consequences of certain affections, such as Ophthalmia Neonatorum, when unrecognised or improperly treated, are disastrous.

It is asserted that 10 per cent. of all cases of blindness in the adult is the result of Ophthalmia in infancy, and the *British Medical Journal* has pointed out that the malign influence of this disease is not one whit less grave in its social effects than that of many of the maladies now included in the list of notifiable infectious diseases.

As the tendency is for women to undertake midwifery without any supervision by a doctor, I would advise that Ophthalmia Neonatorum be added to those diseases already scheduled under the Notification Act of 1889.

PHTHISIS OR CONSUMPTION.

The deaths registered from this disease were 88, compared with 108 in 1909, 103 in 1908, 104 in 1907, 123 in 1906, 93 in 1905, and 96 in 1904.

Twenty-four deaths were registered from Tuberculosis of Meninges, and 16 from other forms of the disease.

The total deaths from Tuberculosis are, therefore, fewer by 14 than in 1909, and represent a death-rate of ·9 per 1,000 of the population, or 11 per cent. of the total deaths.

Assuming that these deaths and a third of those under 1 year of age are preventable under ideal conditions and were non-existent, our death-rate would be reduced to less than 7.

That such a possibility is quite true, shows how much preventive work still lies within your power.

A copy of the Memorandum by the Medical Officer of the Local Government Board on the Administrative Measures suggested to be taken against Tuberculosis in pursuance of the Public Health (Tuberculosis)

Regulation Order of 1908, was sent to all the resident practitioners in 1909. Apart from the Poor Law Medical Officers, who are under an obligation to notify cases of Phthisis among their Poor Law patients, only two notifications were received from private practitioners. The minimum number of Phthisical patients here may be reckoned at 350, and the total notifications received under the Order were 116.

Thirty-one of these were from the three District Medical Officers, 66 from the Infirmary, 5 from the Workhouse, and 6 from the Medical Officers of other Unions.

Sixty-three of the notifications were for persons coming for the first time under the notice of the medical officers, the remaining 53 were notified previously some as many as six times.

On several occasions the consumptives gave wrong addresses when taking their discharge from the Infirmary, and judging by the time elapsing between notification and death in many instances, the Order has been largely honoured in its breach as well as in its observance.

One notification arrived five days after, and six others one day before, the death of the patients.

The class of persons dealt with by the Order may largely account for this, as well as for the repeated notifications already referred to. Apart from the friendly supervision exercised over the sufferers, and the educational value of the visits to those in charge of them, the subsequent disinfection of the premises must be of material use in checking the spread of the disease.

Were notification of all cases of Consumption in force, I doubt if any real good effects would follow, unless adequate hospital provision was made for the treatment of early curable cases and for the isolation of advanced incurable ones.

Among those whom I visited during the year was a man in the last stages of Phthisis, whose expectoration was most copious and offensive, and under the conditions of his existence no proper care was taken as to its disposal.

He lived by day with his wife—who had a baby under a year old—and the other members of his family in a common room, without a window or door open, the air in the place being fœtid and heated to an unbearable degree.

The Health Visitor could effect no improvement by advice, and I was not surprised.

Could one expect that a man "on the Parish," with wife and children in need of the necessaries of life and devoid of every comfort except that of a warm fire, would accept advice and appreciate the dangers run by those around him?

In September last, following the opening of the "Alfred Boyd Memorial Sanatorium" at Little Baddow, an influential meeting of Essex Citizens including representatives of Sanitary Authorities throughout

the County, was held at the Shire Hall, Chelmsford, to discuss ways and means for effecting "the conquest of Consumption throughout the County."

An Association was subsequently formed, and the Lord Lieutenant of the County appealed for subscriptions to establish one or more central hospitals for dealing with Consumptives in the early stages and for the provision of "Lyster Shelters," which could be lent to patients for erection on ground at or near their own homes.

The movement so far as I can gather from the Press has not yet had the financial support that it deserves, although designed as a memorial to our late King.

It appeals to me that the provision of hospitals and shelters should be the duty of Sanitary Authorities, and to encourage them to undertake that duty, the County Council should contribute under the Isolation Hospitals Act; the funds from voluntary subscriptions being more usefully spent in assisting the families of consumptives while under treatment.

Once adequate provision was made for the treatment of the disease, sufferers in the early stages would soon apply, particularly as those depending on them would be looked after, and within ten years Phthisis would become a rare disease.

The West Ham Infirmary utilizes about one hundred beds for this disease.

No other provision is made here.

Diseases of the Respiratory Organs other than Phthisis.—These caused 233 deaths, as in 1909, compared with 213 in 1908, 299 in 1907, 208 in 1906, and 236 in 1905.

OTHER DISEASES.

Erysipelas.—Two deaths were registered from this cause, but 24 others were due to "other septic diseases."

The deaths from Erysipelas are yearly a negligible quantity, and there seems no legitimate reason for classing it as a dangerous infectious disease, judging by the rarity with which a second case in the same house arises.

Cancer.—Seventy-four deaths were returned as due as to this disease, as against 61 in 1909, 94 in 1908, and 75 in 1907. Twenty-three of the deaths were in persons of 65 years of age.

Alcoholism—Cirrhosis of the Liver.—Ten deaths were attributed to Cirrhosis, and five to Alcoholism. The latter can hardly be looked upon as an expression of the facts as known by every-day experience, and must be accepted *cum grano salis*.

Death certificates are seldom given with any idea of the part they play in directing public attention to social evils.

WATER SUPPLY.

The whole district is served by the Metropolitan Water Board.

The supply is constant and good; no complaints have been received from householders, and no analyses have been made, as no occasion for the latter arose during the year. Particular attention has been paid by the Sanitary Inspector to water cisterns improperly kept, and during the year 352 of these have been dealt with in conformity with the Public Health Act of 1907.

The Public Baths have been freely used by the Education Authority as in previous years, for the teaching of swimming to the boys and girls of our elementary schools.

During the year there were 114,203 bathers, made up as to 77,689 men, 16,963 women, 11,770 boys, and 7,781 girls.

COWSHEDS, MILKSHOPS, AND DAIRIES.

During the year, in company with the Veterinary Surgeon and Sanitary Inspector, I twice visited all the cowsheds. There were 12 registered cowsheds, stabling 237 cows at my last visit.

A marked improvement in the cleanly condition of the sheds and cattle was noticeable; but there is still much room for improvement.

The new bye-laws came into operation on January 1st, 1911, and as a consequence of their anticipated effectiveness, one of the worst premises has been abandoned.

Among the cows inspected, the Veterinary Surgeon certified that of five "in process of fattening," four had advanced tuberculosis of udder. These were in a separate byre on premises where over one hundred cows were kept.

In two other small premises, stabling 15 cows, there were four with tubercular udders. These undesirables were kept under observation until removed, but their destination could not be ascertained. It is quite simple to order the removal of diseased cows, and to tell the cowkeeper that he must not mix with other milk or sell for human food, that of cows with tuberculous udders, but there the simplicity ends; to ensure it requires the co-operation of the cowkeepers and the present Dairies, Cowsheds, and Milkshops Order should read that a registered cowkeeper must at once remove from his premises—intimating their destination—tubercular cows, or have his name struck off the Register.

The total number of cows kept in the district cannot supply more than a tenth of the milk consumed, and it may be accepted from the known conditions here and elsewhere, that a clean milk supply is impossible. Cleanliness is largely a matter of opinion, and the standard of the majority of cowkeepers is not that of the Public Health Official. Putting it mildly, it is inadequate, and no real improvement can be effected until some reasonable legalised standard is made. What applies to the cowkeepers is equally applicable to the milksellers.

There are 199 of these registered, and their premises are under the constant supervision of the Inspectors. Mr. West tells me that the small milk retailer—the keeper of a general shop—is one of the most difficult persons to deal with.

Why such a person, if he chooses to sell milk, must be registered by the Local Authority without any regard to the suitability of his premises, and then cast the onus upon the Authority of taking proceedings against him for not complying with the Regulations, which no reasonable person ever expected he could carry out, is a fine example of putting the cart before the horse. To get a conviction at the Police Court against such a person, however dirty and unsuitable the premises, is a remote contingency, and the most your officers can do is to keep pegging away and educating all engaged in the milk trade up to a standard more in consonance with modern views.

SLAUGHTER-HOUSES.

There are 15 slaughter-houses in the District—14 registered and 1 licensed.

None of the premises conform to the requirements suggested by the Local Government Board—as to site and structure—for the granting of new licenses and humane slaughtering in most of them is impossible.

In the premises most frequently used the animals are driven in, fastened to a stake and slaughtered in an old building, with the smoking carcases of the recently killed in full view.

There are 98 butchers' shops, and these and other premises—such as fish shops, etc.—are regularly visited by the Inspectors.

The slaughter-houses and other premises where food is prepared and sold are generally well kept as to cleanliness, and supervision as far as possible is strict and effective in the prevention of diseased or unsound food being sold.

In the Sanitary Inspector's report will be found a list of articles seized and the proceedings taken during the year in connection with tubercular meat.

HOUSING OF THE WORKING CLASSES.

There are no registered lodging houses within the district.

There is ample housing accommodation in all the Wards at rentals well within the means of the ordinary working classes. Rents run from five to ten shillings weekly, small self-contained flats being procurable for a less sum.

The houses generally are modern, convenient, and well built. They have all been erected by private enterprise, under the supervision of the building inspectors, and the air space round the dwellings exceeds that provided for in the Model Bye-Laws of the Local Government Board.

No action was necessary to be taken under the Housing of the Working Classes Act, all the necessary work being effected under the Nuisance Sections of the Public Health Act.

A considerable amount of improvement has been effected under the New Building Bye-Laws, which provide for paving around existing buildings and the improved appearance and sanitary conditions of the houses so dealt with is very noticeable.

Although the district is quite modern, the Sanitary Inspector has plenty to do in keeping up to a decent standard the houses occupied by those devoid of house pride.

There is but little overcrowding, and when found is usually readily remedied, as stated elsewhere. Nuisances are dealt with by the Inspector, and a summary of these, and the work done in connection with drainage defects, will be found in his report.

OFFENSIVE TRADES.

None of the six statutory ones are carried on in the District.

There are premises in the semi-rural portion of the Northern Ward where the cooking of offal with the extraction of the fats is carried out in connection with the feeding of pigs.

No complaints from householders or others have been received as to any nuisance arising therefrom.

The premises are not connected with the public sewer, and the overflow from the cesspool, which passes into neigbouring ditches, and ultimately into the Dagenham Brook, was very foul on two occasions when I visited.

The Lee Conservancy's Engineer visited the premises, and the owner has been fined £20 for polluting the Brook—a tributary of the Lee.

Neither the brook or the peccant effluent comes in contact or could possibly pollute any water used for drinking purposes.

Premises *ejusdem generis* with the Offensive Trades require a deal of supervision, and application has been made to the Local Government Board for an Order under Section 51 of the Public Health Acts Amendment Act, 1907, to declare as offensive trades, among others, fried fish frier, fish curer, rag and bone dealer, and marine store dealer.

HOUSE REFUSE REMOVAL AND SCAVENGING.

The work under these headings is carried out under the supervision of the Surveyor, and no complaints have been received.

There is a bi-weekly collection of house refuse throughout the District, and in the shopping areas a tri-weekly one. Approximately,

16,073 tons of house and trade refuse was collected, and almost the whole of it was burnt in the Destructor without any nuisance.

The roads have been well maintained, and the cleansing and lighting are satisfactory.

SEWAGE DISPOSAL.

No complaints have been received as to nuisance on the Farm, or arising from the tanks, or the effluent.

At my visits none existed.

The negotiations that have been undertaken in connection with the admission of the sewage of the district into the main drainage system of the Metropolis are likely to be soon successful and a long standing difficulty satisfactorily solved.

The existing drainage and sewerage systems are satisfactory and no complaints have been received from householders.

FACTORY AND WORKSHOP ACT, 1901.

The following Table filled in for your district gives the information as required by the Home Office :—

Factories, Workshops, Laundries, Workplaces and Homework.

1.—INSPECTION

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR INSPECTORS OF NUISANCES.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories ... ... (Including Factory Laundries.)	83	—	—
Workshops ... ... (Including Workshop Laundries.)	486	—	
Workplaces ... ... (Other than Outworkers' premises included in Part 3 of this Report.)	349	—	—
Total	918	—	—

2.—DEFECTS FOUND.

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
*Nuisances under the Public Health Acts:—**				
Want of cleanliness	71	71	—	—
Want of ventilation	3	3	—	—
Overcrowding	—	—	—	—
Want of drainage of floors... ...	—	—	—	—
Other nuisances	54	54	—	—
†Sanitary accommodations — insufficient... ...	2	2	—	—
†Sanitary accommodations — unsuitable or defective	29	29	—	—
†Sanitary accommodations — not separate for sexes	—	—	—	—
Offences under the Factory and Workshop Act:—				
Illegal occupation of underground bakehouse (s. 101)	—	—	—	—
Breach of special sanitary requirements for bakehouses (ss. 97 to 100)	—	—	—	—
Other offences ... ... (Excluding offences relating to outwork which are included in Part 3 of this Report).	—	—	—	—
Total	159	159	—	—

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

† For districts not in London state here whether Section 22 of the Public Health Acts Amendment Act, 1890, has been adopted by the District Council; and if so what standard of sufficiency and suitability of sanitary accommodation for persons employed in factories and workshops has been enforced.

3.—HOME WORK.

NATURE OF WORK.*	Outworkers' Lists, Section 107.											Inspections of Outworkers' premises.	Outwork in Unwholesome Premises Section 108			Outwork in Infected Premises, Sections 109, 110.		
	Lists received from Employers.						Addresses of Outworkers.§		Prosecutions.									
	Sending twice in the Year.			Sending once in the Year.														
	Lists.†	Outworkers.†		Lists.	Outworkers.		Received from other Councils.	Forwarded to other Councils.	Notices served on Occupiers as to keeping or sending lists.	Failing to keep or permit inspection of lists.	Failing to send lists.		Instances.	Notices served.	Prosecutions.	Instances.	Orders made (s. 110).	Prosecutions (ss. 109, 110.
		Contractors.	Workmen.		Contractors.	Workmen.												
Wearing Apparel— (1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
(1) making, &c.	16	...	171	23	...	145	962	59	...	...	...	380	16	...	...	2	...	...
(2) cleaning and washing...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lace, lace curtains and nets ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Artificial Flowers	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nets, other than wire nets ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tents	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Sacks	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Furniture and Upholstery ...	...	...	...	...	...	...	6	...	...	...	...	6	...	...	...	...	...	...
Fur pulling	...	...	...	...	...	...	11	...	...	...	...	11	...	...	...	...	...	...
Feather sorting	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Umbrellas, &c.	...	...	...	...	...	...	16	...	...	...	...	16	...	...	...	...	...	...
Carding, &c., of buttons, &c. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Paper Bags and Boxes... ...	...	...	...	...	...	...	23	1	...	...	...	23	...	...	...	1	...	...
Basket making	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Brush making	...	...	...	2	...	44	96	21	...	...	...	96	...	...	...	...	...	...
Racquet and Tennis Balls ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Stuffed Toys	...	...	...	...	...	...	3	...	...	...	...	3	...	...	...	...	...	...
File making	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Electro Plate	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cables and Chains	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Anchors and Grapnels	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cart Gear	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Locks, Latches and Keys ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pea picking	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total	16		171	25		189	1117	81				535	16			3		

* If an occupier gives out work of more than one of the classes specified in column 1, and subdivides his list in such a way as to show the number of workers in each class of work, the list should be included among those in column 2 (or 5 as the case may be) against the principal class *only*, but the outworkers should be assigned in column 3 and 4 (or 6 and 7) into their respective classes. A footnote should be added to show that this has been done.

† The figures required in columns 2, 3 and 4 are the *total* number of lists received from those employers who comply strictly with the statutory duty of sending *two* lists each year and of the entries of names of outworkers in those lists. The entries in column 2 must necessarily be *even* numbers, as there will be two lists for each employer—in some previous returns odd numbers have been inserted. The figures in columns 3 and 4 will usually be (approximately) double of the number of individual outworkers whose names are given, since in the February and August lists of the same employer the same outworker's name will often be repeated.

§ In view of the wide discrepancies found to exist between the totals in the two columns when the returns are added together, it is desired that care may be taken to give exact figures. Only those addresses should be counted which have actually been received from or forwarded to other Councils during the year covered by the report.

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of 1910.	Number.
Private Workshops	74
Outworkers' Workshops	73
Men's Workshops	74
Laundries	49
Domestic Workshops	162
Bakehouses	54
Total Number of Workshops on Register	486

5.—OTHER MATTERS.

Class.	Number.
Matters notified to H.M. Inspectors of Factories:—	
Failure to affix Abstract of the Factory and Workshop Act (s. 133)	25
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5). Notified by H.M. Inspector ...	—
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5). Reports (of action taken) sent to H.M. Inspector	—
Other	—
Underground Bakehouses (s. 101):—	
Certificates granted during this year	—
In use at the end of 1910	6

NOTE.—The Factory and Workshop Act, 1901 (s. 132), requires the Medical Officer of Health in his Annual Report to the District Council to report specifically on the administration of that Act in workshops and workplaces, and to send a copy of his Annual Report, or so much of it as deals with this subject, to the Secretary of State (Home Office). If the Annual Report is presented otherwise than in print, it is unnecessary to include in the copy sent to the Home Office the portions which do not relate to factories, workshops, workplaces or homework. The duties of Local Authorities and the Medical Officer of Health under the Act of 1901 are detailed in the Home Office Memorandum of December, 1904. A further Memorandum, on the Home Work Provisions of the Factory Act, was issued to all District Councils and Medical Officers of Health in October, 1906.

Sections 2, 3, 7 and 8 of the Act, dealing with cleanliness of premises, overcrowding, ventilation, want of drainage of floors (laundries), have received due attention and no prosecutions were necessary.

Factories.—Section 22 of the Public Health Amendment Act, 1890, is in force, and the provisions under it have been carried out.

The standard laid down by the Home Office under Section 9 of the Factory and Workshops Act, as to efficiency and suitability of sanitary accommodation, has been adopted and its conditions complied with.

Workshops.—These are systematically visited. Failure to affix "Abstract of Factory and Workshops Act" in 25 instances was due more to ignorance than evasion of the provisions of the Act.

Notice to comply was at once carried out.

Bakehouses.—There are 54 of these premises, six of which are underground, and the standard adopted in 1902 has been maintained. They are regularly visited to ensure that the regulations as to cleanliness and wholesome conditions are carried out.

Laundries.—Those classified as Registered Workshops are supervised by the Woman Inspector.

Outworkers' Premises.—These generally cause but little trouble. They consist mainly of one or two rooms of the dwelling house used as a workplace, and were generally found satisfactory.

They are supervised by the Woman Inspector and any defects found or nuisances discovered are remedied in the usual way.

Air Space.—No overcrowding was found.

Home Work.—Sections 107 to 115 give powers for the prevention of work in (*a*) unhealthy dwellings, (*b*) in premises where there is dangerous infectious disease. Under the latter heading in two instances the provisions of the Act were enforced.

All the wearing apparel found on the premises was disinfected, and no further work carried out until the premises were disinfected.

IMPROVEMENTS REQUIRED.

1. More Public Sanitary Conveniences.
2. Improved Disinfecting Station, and provision of Shelter in accordance with Section 15 of the Infectious Diseases (Prevention) Act, 1890.
3. An extra Health Visitor.
4. More suitable and increased Office accommodation.

APPENDIX.

LOCAL GOVERNMENT BOARD FORM.]

TABLE I.—For Whole District.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.		DEATHS UNDER ONE YEAR OF AGE.		DEATHS AT ALL AGES. TOTAL.		DEATHS IN PUBLIC INSTITUTIONS W'stow General Hospital	Deaths of Non-Residents registered in District.	Deaths of Residents registered beyond District.	DEATHS AT ALL AGES. NETT.	
		Number.	Rate.*	Number.	Rate per 1,000 Births registered.	Number.	Rate.*				Number.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1897.	70,000	2246	32·08	306	132·0	795	11·41	28	4	37	832	11·88
1898.	77,000	2294	29·80	390	169·5	974	12·65	16	15	60	1034	13·4
1899.	83,000	2835	34·14	482	170·0	1220	14·70	28	8	62	1282	15·44
1900.	91,000	3037	33·37	482	158·7	1166	12·80	23	13	88	1254	13·78
1901.	97,000	3210	33·10	473	147·6	1191	12·27	42	4	114	1296	13·35
1902.	101,318	3426	33·81	394	115·0	1009	9·95	28	8	153	1154	11·38
1903.	106 290	3535	33·25	402	113·7	1065	10·19	39	10	123	1178	11·08
1904.	111,282	3649	32·79	496	135·9	1175	10·55	38	13	168	1330	11·95
1905.	116,300	3389	29·14	354	104·4	1046	8 9	33	16	219	1249	10·7
1906.	121,334	3594	29·60	466	129·7	1206	9·9	35	10	251	1447	11·9
1907.	126,397	3629	28·55	380	104·7	1129	8·9	36	16	263	1376	10·88
1908.	131,486	3482	26·48	351	100·8	1017	7·7	32	11	252	1258	9·56
1909.	136,602	3369	24·66	281	83·3	982	7·2	31	11	224	1205	8·8
Averages for years 1897-1909.	105,308	3207	30·82	404	128·1	1075	10·55	31	11	155	1223	11·85
1910.	141,748	3197	22·6	283	88·5	949	6·6	34	17	254	1186	8·4

* Rates calculated per 1,000 of estimated population.

Area of district in acres (exclusive of area covered by water), 3,988
Total population at all ages, 95,131. Number of inhabited houses, 16,083. Average number of persons per house, 5·8.—At Census of 1901.

I. Institutions within the District receiving sick and infirm persons from outside the District.	II. Institutions outside the District receiving sick and infirm persons from the District.	III. Other Institutions, the deaths in which have been distributed among the several localities in the District
Walthamstow, Leyton, and Wanstead Children's and General Hospital. The Asylum.	Sanatorium, Chingford. Union Infirmary, Leytonstone. Union Infirmary, Whipp's Cross.	Small-Pox Hospital Dagenham.

LOCAL GOVERNMENT BOARD FORM.]

TABLE II.

Vital Statistics of separate Localities in 1910 and previous years.

YEAR.	NAMES OF LOCALITIES.																			
	St. James Street Ward.				High Street Ward.				Hoe Street Ward.				Wood Street Ward.				Northern Ward.				Whole District.			
	Population estimated to middle of each year.	Births registered	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year by Registrar General.	Births registered.	Deaths at all Ages.	Deaths under 1 year.
1897 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	70,000	2246	832	306
1898 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	77,000	2294	1034	390
1899 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	83,000	2835	1282	482
1900 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	91,000	3037	1254	482
1901 ...	23,218	772	349	124	19,886	714	255	105	21,500	604	247	79	15,512	443	187	68	16,884	677	258	105	97,000	3210	1296	481
1902 ...	23,000	766	293	89	20,000	735	228	81	22,000	650	224	55	16,000	482	183	64	20,000	793	234	105	101,318	3426	1154	394
1903 ...	23,600	747	281	98	20,000	781	230	90	22,500	658	226	64	16,500	453	187	50	23,500	896	236	99	106,290	3535	1178	401
1904 ...	23,600	793	327	125	20,400	762	246	98	23,100	628	246	68	16,600	471	184	66	24,300	995	327	139	111,282	3649	1330	496
1905 ...	24,000	705	305	90	21,000	640	240	82	23,500	589	232	45	17,000	429	173	46	32,000	1026	299	91	116,300	3389	1249	354
1906 ...	24,000	735	317	110	21,000	734	247	97	24,000	595	273	65	17,500	465	212	67	35,000	1065	398	127	121,334	3594	1447	466
1907 ...	24,000	697	344	100	22,000	733	238	68	24,000	601	238	38	17,000	426	219	65	37,000	1172	337	109	126,397	3629	1376	380
1908 ...	23,500	711	308	88	21,500	660	212	66	24,000	563	264	57	17,500	417	173	46	37,000	1131	301	93	131,486	3482	1258	351
1909 ...	24,500	722	253	75	22,500	618	202	46	24,500	524	251	40	18,000	426	220	40	40,000	1079	279	80	136,602	3369	1205	281
Averages of Years 1901-9	23,713	739	308	100	20,921	707	233	81	23,233	601	245	57	16,846	446	193	57	29,520	982	297	105	105,308	3207	1223	405
																					Average of	Years	1897	to 1909
1910 ...	25,000	659	290	83	23,000	565	189	47	25,000	521	208	34	18,500	410	178	33	40,500	1042	321	86	141,748	3197	1186	283

LOCAL GOVERNMENT BOARD FORM.]

TABLE IV.

SCHEDULE B. *Table of* DEATHS *during the year* 1910, *in the Urban Sanitary District of Walthamstow, classified according to Diseases, Ages, and Wards.*

No.	CAUSES OF DEATHS.	All Ages	Under 1	1 to 5	5 to 15	15 to 25	25 to 65	65 & upwards	St. James St.	High Street	Hoe Street	Wood Street	Northern	Total Deaths in Public Institutions (Workhouse and Infirmary included).
1	Small-Pox	—	—	—	—	—	—	—	—	—	—	—	—	—
2	Measles	20	3	13	4	—	—	—	6	5	1	3	5	3
3	Scarlet Fever	4	—	3	1	—	—	—	1	1	1	—	1	—
4	Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
5	Epidemic Influenza	10	—	—	—	—	3	7	1	2	3	4	—	2
6	Whooping Cough	32	11	20	1	—	—	—	10	5	5	1	11	8
7	Diphtheria, Membranous Croup	15	—	7	8	—	—	—	3	3	4	2	3	1
8	Croup	—	—	—	—	—	—	—	—	—	—	—	—	—
9	Enteric Fever	2	—	—	1	—	1	—	—	—	1	1	—	1
10	Asiatic Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—
11	Diarrhœa, Dysentery	8	7	—	—	—	1	—	3	2	—	2	1	—
12	Epidemic or Zymotic Enteritis	2	2	—	—	—	—	—	—	1	—	—	1	—
13	Enteritis	20	12	6	—	—	1	1	6	3	1	1	9	8
14	Gastro Enteritis...	1	—	—	—	—	1	—	—	1	—	—	—	—
15	Other continued Fevers	1	1	—	—	—	—	—	—	—	—	1	—	—
16	Cerebro Spinal Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—
17	Erysipelas	2	—	—	—	—	2	—	—	1	—	1	—	1
18	Puerperal Fever...	1	—	—	—	—	1	—	—	—	1	—	—	—
19	Other Septic diseases	24	4	2	5	1	8	4	5	4	—	6	9	12
20	Intermittent Fever and Malarial Cachexia ...	—	—	—	—	—	—	—	—	—	—	—	—	—
21	Tuberculosis of Meninges	24	3	15	4	2	—	—	2	5	6	4	7	3
22	Tuberculosis of Lungs	88	—	4	3	15	61	5	25	12	14	16	21	34
23	Other forms of Tuberculosis	16	3	4	3	—	5	1	2	3	3	2	6	1
24	Alcoholism	5	—	—	—	—	4	1	2	1	—	1	1	—
25	Cancer	74	1	—	—	—	50	23	16	10	24	4	20	19
26	Premature Birth	59	59	—	—	—	—	—	17	6	11	4	21	2
27	Developmentai Diseases	90	85	5	—	—	—	—	27	15	9	17	22	15
28	Old Age	63	—	—	—	—	—	63	9	9	17	13	15	22
29	Meningitis	9	3	2	—	1	2	1	2	—	2	—	5	1
30	Inflammation and Softening of Brain ...	2	—	—	—	—	—	2	—	—	1	1	—	—
31	Organic Diseases of Heart	67	1	—	8	4	37	17	12	5	18	12	20	19
32	Acute Bronchitis	55	22	14	—	—	16	3	21	11	6	4	13	2
33	Chronic Bronchitis	64	—	—	1	—	20	43	16	13	8	12	15	5
34	Lobar (Croupous) Pneumonia...	53	3	6	2	3	34	5	15	11	5	8	14	10
35	Lobular (Broncho) Pneumonia	61	31	21	—	—	4	5	22	8	8	7	16	6
36	Diseases of Stomach	14	5	1	—	1	4	3	4	3	—	2	5	3
37	Obstruction of Intestines	9	2	1	—	—	1	5	—	3	—	4	2	3
38	Cirrhosis of Liver	10	—	—	—	—	9	1	1	1	3	3	2	4
39	Nephritis and Bright's Disease	31	1	—	—	—	19	11	10	7	5	5	4	8
40	Tumours and other Affections of Female Genital Organs	—	—	—	—	—	—	—	—	—	—	—	—	—
41	Accidents and Diseases of Parturition ...	1	—	—	—	—	1	—	—	—	—	—	1	—
42	Deaths by Accident or Negligence	34	4	11	4	2	8	5	6	5	7	6	10	20
43	Deaths by Suicide	8	—	—	—	2	6	—	1	2	1	1	3	4
44	Deaths from Ill-defined Causes	—	—	—	—	—	—	—	—	—	—	—	—	—
45	Syphilis	3	2	—	—	—	1	—	2	—	—	—	1	1
46	Overlying...	6	6	—	—	—	—	—	—	1	2	—	3	—
47	All other Causes	198	12	7	11	12	82	74	43	29	39	30	57	42
	All Causes	1,186	283	142	56	43	382	280	290	188	206	178	324	259

LOCAL GOVERNMENT BOARD FORM.]

TABLE V.

CAUSES OF DEATHS.		Under 1 Week	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months	11-12 Months	Total Deaths under One Year.
All Causes.	Certified	72	23	9	15	119	29	24	14	16	16	8	11	14	8	11	12	282
	Uncertified	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
COMMON INFECTIOUS DISEASES.	Small-Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Chicken-Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
	Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	3
	Scarlet Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Diphtheria ; Croup ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Whooping Cough ...	—	—	—	—	—	1	2	—	1	—	—	1	3	—	1	2	11
DIARRHŒAL DISEASES.	Diarrhœa, all forms ...	—	—	—	—	—	—	1	1	1	1	1	2	—	—	—	1	8
	Enteritis, *Muco Enteritis, Gastro Enteritis*...	—	—	1	1	2	2	2	1	—	4	—	—	1	—	—	1	13
	Gastritis, Gastro-intestinal Catarrh ...	—	—	—	1	1	2	—	—	1	1	—	—	—	—	—	—	5
WASTING DISEASES.	Premature Birth ...	41	6	1	4	52	5	2	—	—	—	—	—	—	—	—	—	59
	Congenital Defects ...	10	4	—	—	14	1	2	—	—	—	—	—	—	—	—	—	17
	Injury at Birth ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Want of Breast-milk ...	—	—	1	1	2	1	1	1	—	—	—	—	—	—	—	—	5
	Atrophy, Debility, Marasmus ...	3	3	3	2	11	5	7	1	3	2	2	2	5	3	—	—	41
	Asthenia : Inanition ...	10	5	—	1	16	—	—	—	1	—	—	—	—	—	—	—	17
TUBERCULOUS DISEASES.	Tuberculous Meningitis	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	1	3
	Tuberculous Peritonitis: Tabes Mesenterica .	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
	Other Tuberculous Diseases ...	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	2
OTHER CAUSES.	Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Syphilis	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	1	2
	Rickets	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	2
	Meningitis *(not Tuberculous)*	—	—	—	—	—	—	—	—	—	1	2	—	—	—	1	—	4
	Convulsions	2	1	2	1	6	1	1	1	—	—	—	1	—	—	—	—	10
	Bronchitis	—	—	—	2	2	3	2	3	1	4	1	3	1	2	2	2	26
	Laryngitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Pneumonia	—	1	—	1	2	4	2	3	5	2	2	1	2	3	2	1	29
	Suffocation, overlaying	3	—	1	—	4	—	—	1	1	—	—	—	—	—	—	—	6
	Other Causes	4	2	—	1	7	4	2	—	—	1	—	—	1	—	1	2	18
		73	23	9	15	120	29	24	14	16	16	8	11	14	8	11	12	283

District (or sub-division) of Walthamstow.

Births in the year { legitimate, 3144. / illegitimate, 53.

Deaths in the year of { legitimate infants, 261. / illegitimate infants, 22.

Population. Estimated to middle of 1910, 141,748.

Deaths from **all Causes at all Ages, 1186.**

Chart shewing the Birth, Death and Zymotic Death-Rates, for the years 1880 to 1910.

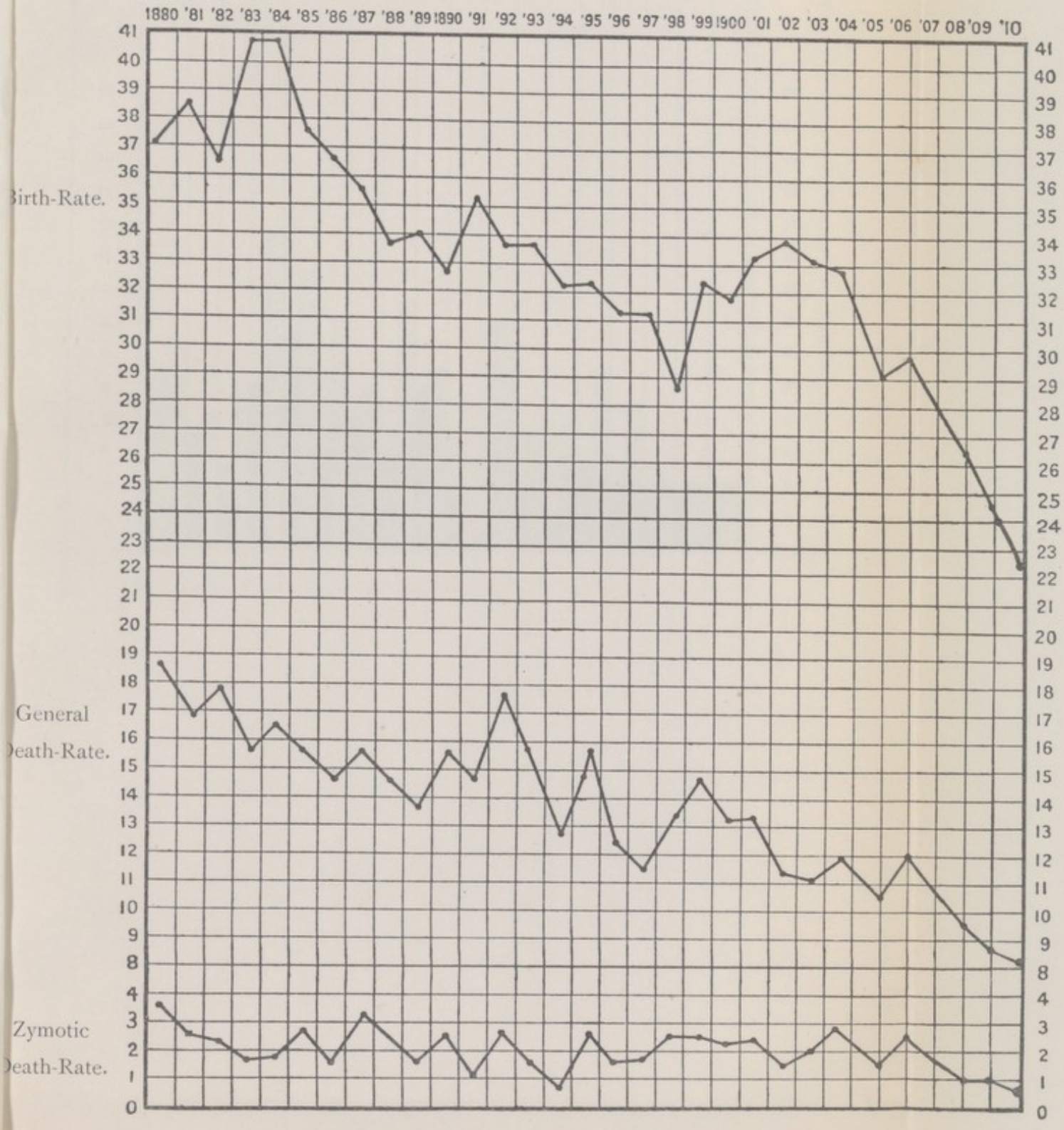
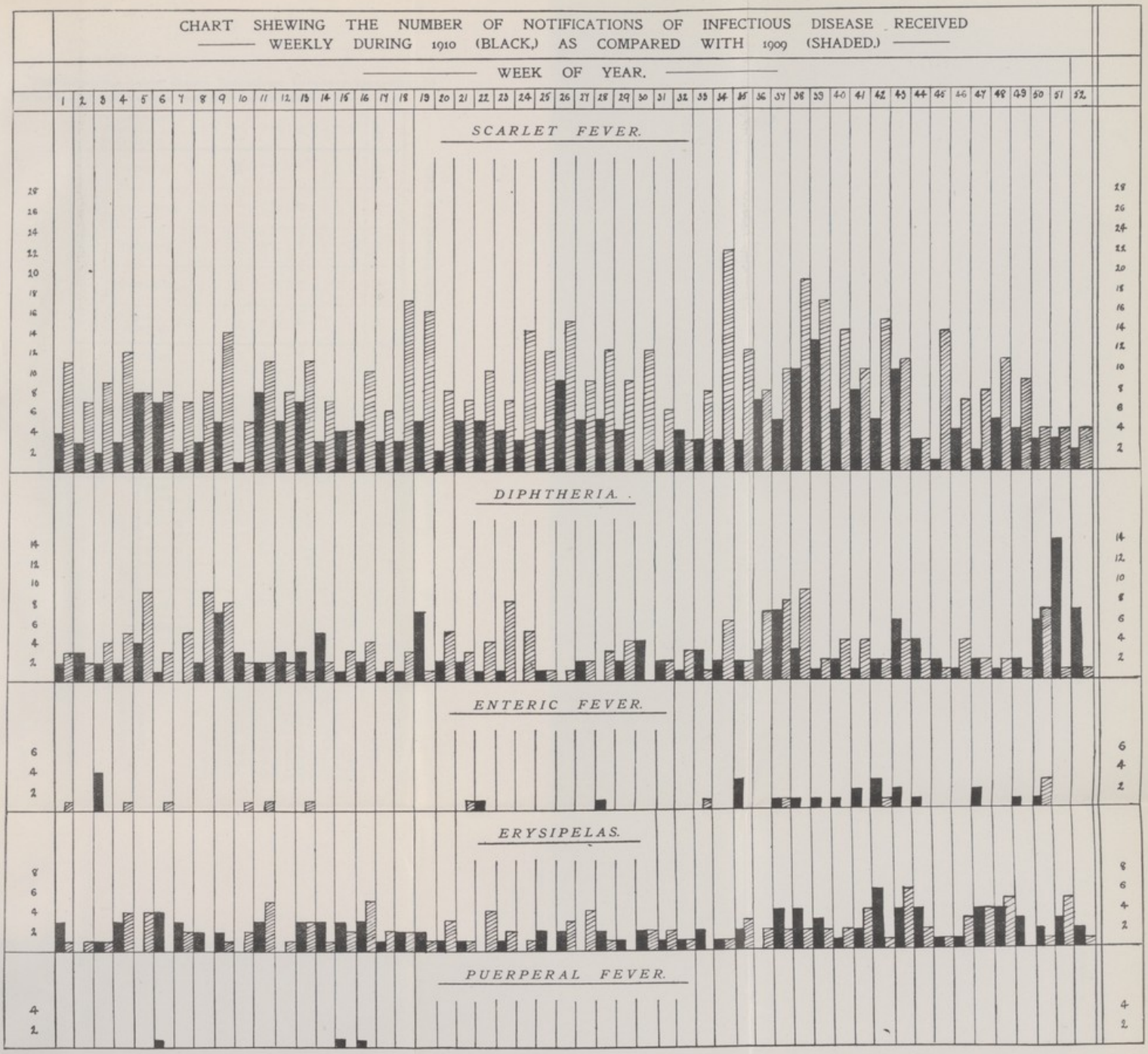
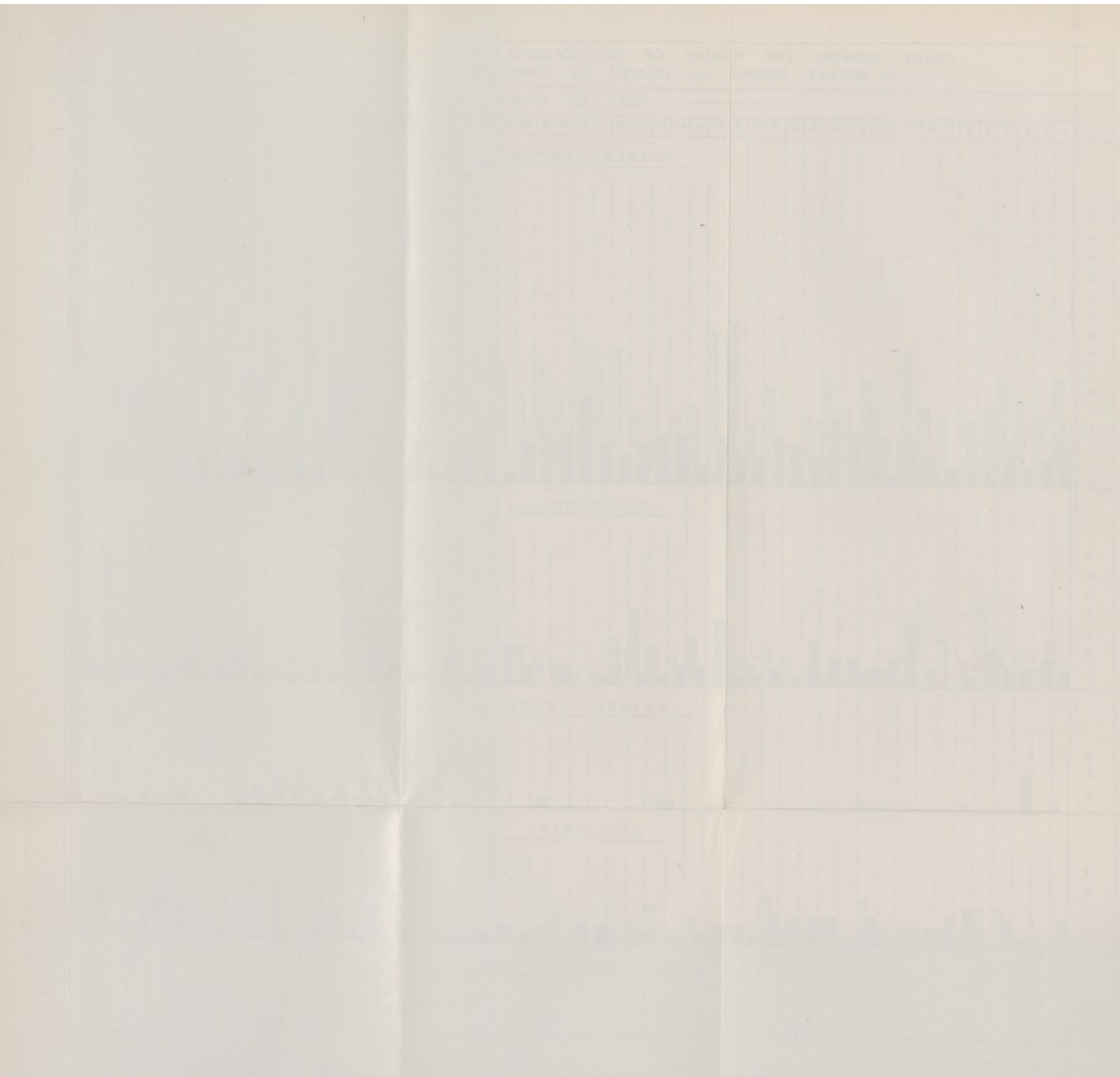


CHART SHEWING THE NUMBER OF NOTIFICATIONS OF INFECTIOUS DISEASE RECEIVED
WEEKLY DURING 1910 (BLACK,) AS COMPARED WITH 1909 (SHADED.)





LOCAL GOVERNMENT BOARD FORM.]

TABLE III.—*Cases of Infectious Disease notified during the Year* 1910.

Name of District—Walthamstow.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.							TOTAL CASES NOTIFIED IN EACH LOCALITY.					NO. OF CASES REMOVED TO HOSPITAL FROM EACH LOCALITY.					TOTAL CASES REMOVED TO HOSPITAL.
	At all Ages.	At Ages—Years.						St. James Street.	High Street.	Hoe Street.	Wood Street.	Northern.	St. James Street.	High Street.	Hoe Street.	Wood Street.	Northern.	
		Under 1	1 to 5	5 to 15	15 to 25	25 to 65	65 and upwards											
Small Pox ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Croup)	138	—	40	83	6	8	1	44	22	21	7	44	34	15	20	6	36	111
Erysipelas ...	99	5	2	9	13	60	10	22	15	19	15	28	2	—	2	—	4	8
Scarlet Fever ...	232	4	63	141	20	4	—	45	37	49	22	79	38	33	44	17	57	189
Typhus Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever ...	26	—	—	10	8	8	—	8	7	4	2	5	6	5	3	1	4	19
Relapsing Fever...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Continued Fever...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever ...	3	—	—	—	2	1	—	—	1	1	1	—	—	1	—	—	—	1
Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals	498	9	105	243	49	81	11	119	82	94	47	156	80	54	69	24	101	328

Isolation Hospital—Walthamstow Sanatorium, Chingford.

Total available beds—93. Number of Diseases that can be concurrently treated—4 at least.

The following table shows Infectious Diseases according to Wards, and the number removed to Hospital:—

TO THE CHAIRMAN AND MEMBERS

OF THE

Walthamstow Urban District Council.

GENTLEMEN,

In accordance with the regulations of the Local Government Board, I have the honour to present my customary report of the work done through your Sanitary Inspector's Department during the past year.

The responsible work of supervising sanitary conditions in the various directions covered by my report under the provisions of the Public Health Acts has been in my hands for twenty-five years, the population meantime increasing from 30,000 to 130,000, and inhabited houses from 4,000 to more than 22,000, and I desire most gratefully to acknowledge the appreciative and encouraging reference to my work made by your chairman, Councillor H. Brown, J.P., in his annual report early in 1910.

While, of course, in so large a population, insanitary conditions are continually arising to require our attention, the more serious structural defects are gradually being removed and more opportunity afforded for work in newer directions called for by new laws and higher modern sanitary ideals. Of these, perhaps, the most important is the supervision of our food supply, which year by year receives more of our attention with, I believe, useful results. Six hundred and thirty-six premises are under supervision in this connection.

I feel confidence in saying that, thanks to the importance attached to all sanitary questions by the Council, Walthamstow will compare favourably in these respects with any similarly situated district.

I would add that our work has been effected with a minimum of necessity for appeal to legal proceedings, thanks very largely to the interest and zeal displayed by my assistants at all times in their work.

Intimation notices to the number of 1011 have been issued, and 50 statutory notices have secured compliance with our requirements.

We have received 315 complaints of which 86 were anonymous, with reference to the existence of nuisances within the district, and only a few, 18, have been found to be without some foundation, although by no means always to the extent suggested in the complaint.

I have the honour to remain, Gentlemen,

Your obedient servant,

W. W. WEST.

House to House Inspection has been proceeded with in the undermentioned streets :—

Back Road.
Beaconsfield Road.
Bedford Road.
Billet Road.
Brookscroft Road.
Brunswick Street.
Chapel End.
Coleridge Road.
Collard Road.
Corbett Road.
Cuthbert Road.
Dudley Road.
Forster Road.
Hartington Road.
Jeffries Square.
King Edward Road.
Markhouse Avenue.
Marlowe Road.
Milton Road.
Oakfield Road.
Parkstone Road.
Raglan Road.
Ritchings Avenue.
Rosebank Road.
St. Stephen's Road.
Spring Gardens.
Waverley Road.
Woodlands Road.
York Road.

Sanitary improvements have been carried out in 2,176 premises out of a total of 5,529 which have been inspected.

Drainage Work.—As is naturally to be expected, the need for reconstruction or serious repair of house drainage becomes gradually less in amount year by year owing to the newer houses having been built under more exact requirements and supervision, and the number reconstructed during the year is 171 as compared with 247 last year.

Owing to the various legal decisions under the provisions of Sec. 41 of the Public Health Act, 1875, as amended by Sec. 19 of the Public Health Amendment Act, 1890, in the case of 13 blocks, comprising 38 separate premises, the main drains have been reconstructed by the Council at the public expense.

These were situated in the following streets :—

4 and 6, West Street.
27 and 29, Collingwood Road.
14 to 20, Collard Road.
29 and 31, Colebrook Road.
4, 6 and 8, Willow Walk.
30 and 32, Springfield Road.
Grove Road.
83 to 91, Oatland Rise.
6 and 8, Parkhurst Road.
201 and 203, Higham Hill Road.
26 and 28, Shernhall Street.
20 to 34, Beaconsfield Road.
13 and 15, Cottenham Road.

Notwithstanding occasional differences of opinion between your officers and various owners as to the respective liability of the owners and the Council, little friction or delay has occurred in the remaining instances. In addition to single houses the undermentioned blocks of houses have been dealt with.

39 to 49, Albert Road.
55 and 57, Albert Road.
35 and 37, Arkley Road.
67 and 69, Arkley Road.
19 to 23, Arkley Crescent.
6 to 10, Beaconsfield Road.
20 to 38, Beaconsfield Road.
67 to 73, Beaconsfield Road.
6 and 8, Blackhorse Road.
55 and 57, Brown's Road.
16 and 18, Brunswick Street.
8, 9, 10 and 10A, Chapel End.
21 to 25, Clacton Road.
27 and 29, Collingwood Road.
14 to 20, Collard Road.
11 to 15, Collard Road.
9 to 15, Cottenham Road.
54 and 56, Downsfield Road.
40 to 44, Downsfield Road.
42 to 46, Gosport Road.
46 and 48, Haroldstone Road.
201 and 203, Higham Hill Road.
28, 30, 32 and 34, Lynmouth Rd.
83 and 85, Markhouse Avenue.
38 to 56, Markhouse Avenue.
60 to 74, Markhouse Avenue.
7 to 11, Newman Road.
98 and 100, Northcote Road.
101 and 103, Oakfield Road.
87 to 93, Oatland Rise.
7 and 8, Parkhurst Road.
25 and 27, Ritchings Avenue
33 to 39, Ritchings Avenue
65 and 67, Ritchings Avenue.
30 and 32, Somers Road.
38 and 40, Somers Road.
30 and 32, Springfield Road.
52 to 60, Springfield Road.
16 to 20, Tower Hamlets Road.
21 and 23, West Street.
4 and 6, West Street.
8 and 10, Willow Walk.
196 to 200, Wood Street.

The following summary indicates the nature and variety of the works carried out to remedy insanitary conditions discovered in the course of inspection :—

Drains tested	344
,, reconstructed	171
,, repaired	123
,, cleared of obstruction	147
Inspection chamber and clearing eyes provided	121
Ventilation shafts provided	113
,, ,, repaired or heightened	97
Soil pipes repaired	29
,, (new) provided	6
Rain-water pipes provided or repaired	186
,, ,, disconnected from drains	63
Roofs repaired or renewed	233
Guttering repaired or renewed	249
New w.c. pans and traps	254
New gulley traps	238
Bell traps abolished	11
New water waste preventers to w.c.	55
W.c. floors concreted	144
W.c.'s repaired or cleansed	70
W.c. lighting and ventilation improved	33

W.c. flush disconnected from D.W. supply	10
W.c. flush repaired or renewed	120
New sinks provided	67
Sink and bath wastes repaired or renewed	246
„ „ trapped	103
Sink or food cupboards ventilated	19
Water supply reinstated or improved	61
Cisterns cleansed and covered	193
Cisterns abolished	23
Urinals specially cleansed	3
Sculleries paved	37
Yards and forecourts paved and drained...	419
Overcrowding abated	56
Dirty houses cleansed	131
Dirty rooms cleansed	1079
Floors repaired	93
Ventilation under floors provided...	176
New damp-proof courses provided	10
Sites concreted	14
Stables paved, drained and cleansed	23
Offensive accumulations removed...	153
Nuisance from keeping of animals abated	43
Manure receptacles provided or repaired	19
Rat infested places remedied	3

INFECTIOUS DISEASE.—Five hundred and fifty-five houses have been disinfected after infectious disease and inspection made as to their sanitary condition, and 105 books in use belonging to the Council's Public Library were removed, disinfected and returned to the Chief Librarian. As a result of this inspection, insanitary conditions, mostly slight in nature, have been found in 133 premises. These have been remedied, in addition to the fumigation of the infected rooms and, where necessary, stripping, cleansing and whitewashing of the same.

The bedding, clothing, etc., removed from infected premises have been disinfected at the Council's steam disinfecting chamber. The undermentioned articles have been dealt with :—

Beds	457
Bolsters	344
Plllows	842
Blankets	819
Miscellaneous...	4694
Rooms fumigated or sprayed	596

Schools throughout	9
„ cloak-rooms	19
Library books	105
Cases removed to the Chingford Sanatorium	291
„ „ „ Metropolitan Asylums Board Hospitals ...	6
„ „ „ London Fever Hospital	2

Overcrowding.—It will be noticed that 56 cases of overcrowding have been met with in the course of our inspection. In some few cases, this has been caused by some kindly disposed person affording house room to an even poorer neighbour evicted from their home from inability to pay rent, in other cases from sheer inability to pay more rent than the parents were paying, and in still others from pure carelessness and non-recognition of possible ill results. In every case the overcrowding has been abated in the former cases by means of a liberal allowance of time to secure better accommodation, provided the premises were made and kept clean. Want of cleanliness is an almost invariable accompaniment to overcrowding. I have reason to believe that the abatement in each case has been real, and not merely a transference to similar conditions in another house.

Dampness in House.—This condition usually arises from one or other of two causes, viz., the non-water-tight condition of roof and rain water pipes, or want of proper damp-proof courses to the walls, with dampness of the sites. The latter is found in the older houses and in 10 houses new damp-proof courses have been provided to remedy this defect. In almost all cases the remedy proposed by the owner is to face the wall inside with matched boarding or other material, but I invariably refuse to accept such a method of dealing with it as the effect is merely to hide the defect and is no remedy. In the former cases it will be seen that 249 gutters have been repaired or renewed, 233 roofs repaired or renewed, 185 rain water pipes renewed or repaired, 14 sites concreted and 419 yards and forecourts paved and drained.

Stable Premises.—Special inspection has been made during the year of 233 premises in which horses are known to be kept, particularly with reference to the presence of rats which are frequently to be found in such premises, generally due to untrapped openings in the drains. It was satisfactory to find that only 10 places were so infested, and the drains being found defective, were at once repaired and the evil remedied.

A second cause of frequent complaint associated with stable premises is the presence of flies, especially in warm weather. This is due to the fact that accumulation of refuse, especially stables manure, form a suitable breeding place, and the usual suggestion for remedy is to clear the refuse away at least once a week.

It is, however, necessary that the place of deposit be so constructed as to permit an easy cleansing on each occasion of its being emptied,

which is rarely done owing to the unsuitable mode of construction A brick pit enclosed on four sides is in no way suitable. There should be merely an impervious platform, draining to a gully, with just a sufficient guard round it to keep the whole tidy, and the nearer we get to this form, the more suitable the place. My endeavour is to increase the number of these and abolish everything in the nature of a pit.

In connection with our inspections the following works have been carried out:—

Premises paved, drained and cleansed ...	23
Drains repaired	5
Premises limewashed	5
New drainage provided	2
Receptacles provided...	4

Bakehouses.—There are 54 bakehouses under observation in the district, of which 6 are underground. The periodical cleansing required by Act of Parliament has been supervised and certain improvements effected.

Special cleansing	4
Improper accumulations removed	3
Manure receptacles improved...	1
Repairs to paving and floors	5
Drains repaired	4
Ventilation improved	2
Other repairs	8

Slaughter-houses and Butchers' Shops.—Fifteen slaughter-houses and 98 butchers' shops have been under constant supervision. In the case of slaughter-houses, an endeavour is made to visit them whenever slaughtering is in progress, as the only time at which a thoroughly satisfactory examination can be made of the animals slaughtered. In most cases every assistance is afforded to us and any abnormal conditions dealt with. In three instances, one in a slaughter-house and two in shops, seriously diseased meat has been found and prosecutions instituted.

In the slaughter-house case a carcase of a tuberculous cow was found shortly after slaughter and on proceedings being taken, the owner was fined £20 and costs. The owner has appealed to quarter sessions against the conviction.

In the butcher's shop, the carcase of a tuberculous cow recently removed from the slaughter-house was found hanging in portions round the shop, and a fine of £20 and costs inflicted by the bench.

In the third case, portions of tuberculous meat were discovered in a safe in the rear of the butcher's shop, but on proceedings being taken the case was dismissed.

The following list will show the meat destroyed during the year :—

2 sheeps plucks.
3 ox livers.
1 carcase of cow.
1 pair ox lungs.
1 melt.
26 lbs. rump of beef.
3 sets beef lungs.
8 pieces of mutton.
1 carcase of beef.
6 breasts of mutton.
1 liver and meshling of ox.
1 pair ox lungs.
1 ox head.
2 cow's lungs.
8 lbs. beef pieces.
1 pig's head and lungs.
1 cow's head, liver and lungs.
2 cows' heads.
3 ox livers.
1 carcase of cow.
6 pieces of beef.

The following sanitary improvements have been made :—

Special cleansing	20
Paving improved	5
Manure receptacles	2
Offal receptacles provided	2
Improper accumulations removed	4
Drainage repaired	3
Other repairs	9

Cowkeepers and Milksellers.—There are now 12 cowkeepers in the district, and 199 milksellers. The new regulations submitted to the Local Government Board came into force on the 1st of January, 1911. I have, however, during the latter part of 1910, prepared the way for these and already considerable improvements have been made in many of the premises in anticipation of the requirements of the new regulations. The inspection made in company with the Council's Veterinary Surgeon has disclosed the presence of a certain number of animals affected with disease and on the fact being made known to the owners the animals affected have been removed from the herds. There are now about 240 cows kept in the district and the improvement in their condition is very marked. During the year the following improvements have been effected in the premises :—

Drainage repaired	11
Paving repaired	27
Special cleansing	38
Water supply improved	5
Improper accumulation removed	4
Ventilation improved...	1
Other improvements	22

Fishmongers.—Sixty-seven premises used by fishmongers have been supervised both with reference to the condition of the premises as well as the articles sold. In accordance with my practice for many years, fish found on arrival from market to be unsound and brought to me, has been destroyed and a certificate given to that effect, stating the

time at which it was bought, thus enabling the retailer in most instances to obtain the return of his money and relieving him of the temptation to recoup himself by offering it for sale. There have been destroyed the following, viz. :—

2 boxes of mackerel.	15 boxes of kippers.
9 cole fish.	1 box of plaice.
40 lbs. of skate.	90 lbs. of skate.
1 box of herrings.	1 cwt. 1 qr. cole fish.
3 boxes of plaice.	2 trunks mixed fish.
3 stone mixed fish.	1 box cole fish.

The following improvements have also been effected in the premises :—

Smoking and frying premises removed ...	3
Animals, improperly kept, removed	2
Drainage repaired	3
Drainage obstruction removed	1
W.c. flush improved	2
Other improvements	12

Coffee Houses.—Frequent visits have been paid to the 48 coffee-houses in the district, and our suggestions have been readily met when suggesting improvements desirable. In this way the following improvements have been obtained :—

Special cleansing	23
Paving improved	3
Cisterns cleansed	5
Drains repaired	1
Receptacles for waste provided	1
Safes cleansed	3
Accumulation removed	7
Other improvements	6

Ice Cream Vendors.—One hundred and forty three premises where ice cream is made have been visited, more particularly in the summer months, with special reference to the sanitary conditions and the cleanliness exercised in the preparation of the article. No case of improper or unsound material has come before us but the following sanitary improvements have been secured :—

Cleansing of premises	9
Yard paving improved	3
Storage receptacles provided..	10
Water supply improved	4
Drainage repaired	3
W.c. flush improved	5
Other improvements	5

General supervision is also kept over articles sold in the streets, and the following articles besides those already mentioned have been surrendered and destroyed :—

1 sack of potatoes.	18 rabbits.
1 bag of potatoes.	6 quarterns of bread.
½ bushel of greengages.	1 barrel of peas.
36 lbs. of brisket.	1 box of bananas.

FACTORIES AND WORKSHOPS.—In the visitation of these premises the undermentioned improvements have been directed :—

Special cleansing	15
Additional w.c. accommodation provided ...	1
Improvements in w.c.'s affected	7
Urinals provided	1
W.c. flush improved	6
Drainage repaired	3
Paving repaired	3
Offensive accumulations removed	2
Ventilation improved	1
Manure receptacle provided	1
Other improvements	8

OUTWORKERS.—The premises occupied under this description form a large proportion of those visited under the provisions of the Factories and Workshops Acts, and the variety of work carried on in them will be shown by the accompanying list of names sent in to us :—

Aprons	50
Artificial flowers...	13
Blouses	423
Bows	10
Boots	120
Belts	26
Brushes	96
Boxes	23
Baby linen	16
Books	4
Clothing, juvenile	132
Costumes, children's	9
Collars	6
Corsets	1
Coats	17
Dressing-gowns	14
Dress shields	1

Embroidery	9
Furrier	11
Flags	1
Hats	4
Fancy leather goods	5
Millinery	15
Mantles	18
Masonic ornaments	3
Shirts	36
Skirts	14
Shoe vamp beading	6
Shoe trimmings	8
Ties	136
Tailoring	45
Toys	3
Trimmings	9
Underclothing	148
Upholstery	5
Umbrellas	16
Waterproof goods	1
Waistcoats	3

It will be seen that the conditions under which the work is carried on in these premises are good, the list of sanitary improvements found necessary being small in comparison with the number of premises. They were :—

Cleansing premises	6
W.c. improvements	6
Floor repairs	1
Offensive accumulations removed	4
Sundry repairs	8

Sale of Food and Drugs Acts.—I have submitted to Dr. Bernard Dyer, 189 samples of food for analysis under these Acts, of which 18 were certified to be adulterated, impoverished, or otherwise not in accordance with the law :—

Description of Article.	Number submitted.	Adulterated, etc.
Milk	97	8
Butter	82	8
Lard	7	—
Coffee	2	2
Pepper	1	—

SALE OF FOOD AND DRUGS ACTS.

Table showing how the samples found to be sold not in accordance with the law were dealt with:

No. of Sample	Description of Article.	Offence.	Fine Inflicted.			Analyst's Fee.			Costs.			Remarks.
			£	s.	d.	£	s.	d.	£	s.	d.	
3	Milk ...	4 p.c. added water ...	...			...			...			No proceedings.
14	Butter ...	25 p.c. margarine ...	1	0	0	0	10	6	0	4	0	
24	Butter ...	6 p.c. excess of water...	1	0	0	...			...			Including costs.
44	Milk ...	16 p.c. deficit in cream.	...			...			...			Vendor emigrated before proceedings.
50	Milk ...	13 p.c. ditto	...			...			...			
67	Milk ...	18 p.c. ditto	...			...			...			Same vendor.
75	Milk ...	7 p.c. added water ...	1	0	0	0	10	6	0	4	0	
78	Milk ...	7 p.c. ditto ...	1	0	0	0	10	6	0	4	0	
88	Butter ...	8 p.c. boric acid ...	...			...			...			Vendor cautioned.
115	Butter ...	50 p.c margarine ...	...			...			...			Informal sample.
123	Butter ...	25 p.c. ditto ...	2	0	0	0	5	0	0	4	0	Same vendor as No. 115.
150	Milk ...	6 p.c. added water ...	5	0	0	0	5	0	0	4	0	Two previous convictions.
160	Butter ...	Margarine	5	0	0	...			...			Informal.
161	Coffee ...	Mixed with chicory ...	...			...			...			Informal.
164	Coffee ...	Ditto ditto ...	...			...			...			Informal.
171	Butter ...	Margarine	...			...			...			Informal.
175	Butter ...	Margarine	...			...			...			Informal.
182	Milk ...	8 p.c. added water ...	2	0	0	0	5	0	0	4	0	

REPORT

TO THE

EDUCATION COMMITTEE

ON THE

MEDICAL INSPECTION OF SCHOOL CHILDREN

During the Year 1910.

INDEX.

TO THE CHAIRMAN AND MEMBERS

OF THE

Walthamstow Education Committee.

GENTLEMEN,

I beg to present for your consideration my Annual Report, dealing with the Elementary Schools and children under your control, in accordance with the Regulations made under section 13 of the Education (Administrative Provisions) Act, 1907.

The report is made mainly on the lines suggested in Circular 596 of the Board of Education.

The close supervision of the school buildings by your Architect, Superintendent of Repairs, and Members of the Committee has been reflected in the excellent condition in which they have been at all times kept.

A former Parliamentary Representative remarked that the Walthamstow Elementary Schools were a special feature of the district; they were similar to but better than high-class Grammar Schools. That description of ten years ago holds good to-day.

My monthly reports to your Committee, dealing with the individual schools and scholars, have made you quite familiar with all the work of Medical Inspection, and it will be well within your memory that the remedying of the defects found was the principal objective of the work.

The duty and obligation of the parents to their children in this respect was kept steadily before them, and generally the parents have responded well to our advice and instructions.

The migratory character of the population, the want of local facilities (in the case of very poor parents) "for the amelioration of the evils revealed by medical inspection," and the impossibility, with the staff at my disposal, of "following up" the children as closely as is necessary, militated largely against results commensurate with the work undertaken and its importance.

A step forward has been taken by the appointment, in November, of an Ophthalmic Surgeon, and he has already (April 3rd) dealt with a large number of the outstanding unremedied cases of defective vision which had accumulated during the year.

In future we shall be able to treat directly all our school children who suffer from defects of vision, and thus the most serious of all the defects found in school children will be remedied.

The medical inspection of all the children (Article 58 Code) has been fully carried out, but the work arising out of it is of such magnitude that the present permanent Clerical and Health-Visiting Staff is inadequate and must be strengthened, and more office accommodation, with suitable rooms for school purposes, provided.

Under existing conditions the work is hampered.

With slight modifications of forms and schedules used in the Office and for the Schools, the organisation and routine of the work were similar to 1909.

In all the Provided Schools new school registers are now in use, with spacing before each child's name for recording previous illnesses as well as defects found on medical inspection.

The registers must facilitate the work of the teachers in selecting the children for examination, and in carrying out the instructions given as to individual scholars. It ought to be no longer possible to present the same child twice within a year to the doctor if the registers are properly kept—except, of course, for special reasons.

There has been in 1910 a noticeable uniformity of co-operation on the part of all the head teachers in the work of medical inspection, and to the teachers and their influence with the parents we are indebted for much of the remedial work carried out.

I think, in all future inspections, the head teachers, other duties permitting, should be present with the doctor. Heretofore they have not been invited, the examination being looked upon as private and confidential.

The teacher occupies the position of parent in school hours, and there can be no objection to—in fact, there is much reason for—his or her presence.

The teacher is the best coadjutor to the school doctor, and by becoming familiar with those conditions indicating, or suspicious of, disease, will be the more capable of exercising a useful supervision over the children in the absence of the doctor. The head teacher by being present at the inspections will be interested at the starting-point, and knowing the reason for the doctor's advice and instructions, will the more readily co-operate in the carrying out of them in the children's interests.

In the girls' schools a nurse would hardly be then required, and that official thus relieved could visit or engage in other work.

The number of parents present at the inspections was slightly less than in 1909, the falling off being at the boys' and girls' schools.

Altogether 3,392 were present, and thus a great number of mothers had a useful object lesson in the work performed, and had the benefit of the doctor's advice regarding their children.

Only 304 parents of 6,781 invited refused to have their children inspected.

The refusals show that some prejudice still exists on the part of certain parents to the work. This will decrease yearly with a fuller knowledge of the aims and objects of medical inspection and its results, and in time a refusal will be a rarity.

No numerical count has been kept of the children inspected at the parents' request, but the number certainly more than counterbalanced the refusals.

While respecting the parents' wishes, children suspected of pediculosis by the teachers were examined for this condition, but the number found so suffering was very small.

Arising out of the 6,432 statutory inspections, the 354 made by me at the schools and the 2,434 attendances of children at my office, over 2,000 visits were made to the homes of the children hy the Health Visitors and School Nurse, and 67 by the Sanitary Inspector.

These latter were undertaken when the conditions of the children presupposed insanitary homes and surroundings.

I have no doubt that the Medical Inspection and the work arising from it, as carried out, have been of the greatest service to our children and to the public health.

I beg to remain, Gentlemen,

Your obedient Servant,

J. J. CLARKE.

GENERAL INFORMATION.

SCHOOL ACCOMMODATION.

	Boys.	Girls.	Infants.	Mixed.
Provided Schools ...	16	16	16	9
Voluntary Schools ...	1	2	3	1
Special Schools.				
Mentally Defective ...	1	1	—	—
Deaf and Dumb ...	—	—	—	1
	18	19	19	11

Number of children on Registers at the end of the year ...	25,162
Number of School places provided	25,312
Average Attendance	22,512
Percentage present for December	89·4

Rateable value of the district was £444,850.

The product of a penny rate approximates £1,700.

The Education Rate for the year was 2s. 3d. in the pound, and the cost per child for education was £3 0s. 10d.

The cost of Medical Inspection for the year was £467 4s. 4d. This includes supervising officer's salary as well as that paid to the inspecting doctor and nurse, clerk, and expenses of postage, printing, etc.

The Chief Medical Officer of the Board of Education gave on page 37 of his 1908 Annual Report, the cost of Medical Inspection as follows:—

	Cost of Salaries per child in average attendance.	Cost as decimal of 1d. rate.
Counties	4·79	·15
County Boroughs ...	5·69	·19
Municipal Boroughs	7·64	·23
Urban Districts ...	7·56	·28
Walthamstow, 1910	**4·8**	**·26**

SCHOOL BUILDINGS.

Provided Schools.—All these are modern, well equipped, and in every way suited for the work carried on.

They are mainly one storey buildings and each Department has a Central Hall.

The playgrounds are tar paved and each contains a covered playshed.

During the year repairs and improvements have been carried out at a total cost of £1,673 5s. 0d.

Non-Provided Schools.—During the year the playground of St. Saviour's (C. of E. Boys) has been tar paved, but no playshed for wet weather has yet been erected.

The remarks in last year's report still apply to the other Schools, excepting that a slight improvement in the cloak room accommodation at St. Mary's Infant School has been effected. Much more of a necessary kind remains to be done.

(a.) HYGIENIC CONDITIONS IN THE SCHOOLS.

These are on the whole very good and the description given in last year's report as to lighting, heating, ventilation and sanitation will serve for 1910.

I have visited the schools at various times throughout the year and invariably found that they were kept in a cleanly condition and that the caretakers carried out their duties as laid down in the Education Committee's Code of Regulations.

These inter alia are :—

(*b*) To sweep and dust once every day all the rooms, staircases and passages, taking care to thoroughly ventilate the premises while this is being done.

(*d*) To keep the W.C.'s and urinals thoroughly clean and disinfected and well flushed twice a day and oftener in hot weather, and to see that the seats, walls, etc., are kept perfectly clean.

(*f*) To clean inside of school windows at the same time as the contractors are cleaning the outside.

(*i*) To scrub out the school rooms once, at least, a month.

(*m*) In order to keep the schools thoroughly disinfected and to prevent the accumulation of dust, damped sawdust mixed with turpentine and carbolic acid in the summer months is spread over all the floors every Friday evening.

Sanitation.—During the year every school was visited and systematically inspected by one of the Sanitary Officers. The following defects were disclosed and referred to the School authority to be rectified.

Shernhall Street	...	Defective trap to drain by Girls W.C.
St. Mary's Girls	...	Defective flush cistern, Teachers W.C.
Gamuel Road Infants	...	Defective W.C. pans and traps, defective manhole cover.
St. Saviour's Infants	...	W.C. wanted cleansing, ventilation insufficient.
St. George's	... ...	Defective water supply to Boy's W.C. and urinals, seats of Girls W.C.'s dilapidated.

Disinfection.—All the rooms in nine schools, the cloakrooms of 15 schools and one classroom in another school were disinfected by Formalin during the year. The cloakrooms of three of the schools were twice disinfected.

Surroundings of Schools.—Attention was drawn in last year's report to certain schools bordering on main roads, and the Education Committee have under consideration the provision at an early date of a cheap noiseless and dustless road surface in front of them.

(b.) THE ARRANGEMENT FOR THE CO-RELATION OF THE SCHOOL MEDICAL SERVICE WITH THAT OF PUBLIC HEALTH.

These are quite satifactory. The Medical Officer of Health is recognised as the School Medical Officer under the Code and has acted as Medical Officer to the Education Committee since July 1906.

Dr. Hall, appointed in 1908 to carry out the statutory inspections continues to do so, and devotes the whole of her time to this work. She is assisted by a nurse who fills in her spare time visiting the homes of the children.

The work arising out of the medical inspection coming within the province of Public Health is carried out by the Sanitary Inspector and Health Visitor so that the two services coming under the supervision of one person tends to economy of time and efficiency in its performance, and avoids the friction and the overlapping which might otherwise arise.

The part time of one clerk has been deemed sufficient for carrying out the incidental clerical work. Were it not that all the clerical work of both services is carried out in the same office, one whole time clerk would be insufficient.

In the near future probably the staffs of the Public Health, School Medical Service and School Attendance Departments will be housed in the same building and this arrangement would much facilitate and render more efficient the work undertaken by them.

(i.) The Board's Schedule of Medical Inspection has been adopted with a few additional headings added for information as to occupation of parent, number of children in family, vaccination marks, etc.

(ii.) The Teachers and Attendance Officers co-operate in the filling up of certain items on the cards and in their transference to the office and to the various schools to which the children migrate.

(iii.) The parents are invited to all inspections and their co-operation is enlisted at the time and subsequently by visits from the School Nurse, Health Visitors or Sanitary Inspector.

(iv.) The arrangements of all our schools are such that a class-room is given up to the doctor's use during the inspections and the Central Hall temporarily used as a class room, so there is little disturbance of the ordinary school work.

(c.) GENERAL STATEMENT OF THE EXTENT AND SCOPE OF MEDICAL INSPECTION DURING 1910.

(i.) Visits to schools and departments.

All the schools have been visited at least twice during the year and routine inspections have been carried out in all the departments. The number of visits made for the purpose of medical inspection corresponds to the number of times the schools were open.

The time occupied at the different schools varied, most attention having to be devoted to the Infants schools and to the upper standards of the Boys and Girls schools. The average time for each individual inspection varies; **about 35 children are inspected daily.**

(ii.) The principle on which children have been selected for inspection was primarily the carrying out of the Board of Education's requirements.

Special care was taken that all entrants and leavers were inspected, and those between 7 and 8, and 12 and 13 years of age, as far as time would permit. These groups were selected as embracing children who were about to join the boys and girls schools and those that from any cause might leave school before they attained the age of 14 years.

Taking the age group, 12 to 13 gives ample time for the remedying of the defects discovered, and will make their final examination merely formal.

(iii.) **The number of Children inspected.**—The following table shows the number of children inspected, classified according to age and sex, and for each a complete schedule was filled up.

Age.	Males.	Females.	Total.
4– 5	205	182	387
5– 6	860	798	1658
6– 7	217	278	495
7– 8	676	695	1371
8– 9	8	10	18
9–10	12	5	17
10–11	12	12	24
11–12	17	6	23
12–13	451	380	831
13–14	743	634	1377
14–15	89	81	170
15–16	31	28	59
16–17	1	1	2
	3322	3110	6432

The largest age groups were those of 5–6 and 13–14 years of age.

Excluding the 7–8 years and 12–13 years' groups, the remainder were selected for some special reasons by the teachers or the doctor.

Those of the higher ages, 14 years and upwards, were children attending the Higher Elementary School.

In addition to the 6,432 routine inspections, 354 children were specially examined at the request of the Head Teachers by me at the schools, and 2,434 children were seen by me at the Town Hall. The latter include those referred to me by the Attendance Committees, as well as those sent by the Teachers in response to circular letters sent them following the holidays.

The tabular statement on page 97 shows the alleged defects for which these children were seen.

Those coming under the Elementary Education (Blind and Deaf) Act, and Defective and Epileptic Act, 1899, have also been inspected, and the schools visited, by me at various times.

The total number referred for further examination was 298.

These include those who required special treatment for defects such as Adenoids or Defective Vision, as well as those whose condition was suspicious of Tuberculosis, Diphtheria, etc.

GENERAL DIRECTIONS TO PARENTS.

Written instructions were given or sent to the parents of 973 children, or 15 per cent. of those inspected, and to the 3,392 who accompanied their children friendly advice on many points was given.

HEIGHTS AND WEIGHTS.

The following tables give the average heights and weights for each age group of all the children inspected.

In the weighing and measuring of the children the metric system is used, as it lends itself to more accuracy, and the averages are given in the English equivalents for comparison.

There is but little difference in the heights recorded for the age groups 12-13 and 13-14 as compared with last year.

The group 7-8 is also similar, but the 6-7 group (boys) shows a lesser height by 2 inches than the same group in 1909. The 6-7 group for girls was alike in both years.

The average heights of our boys are below the general average of the population as given by the British Association, but up to the standard of the artisan class; those for the girls are equal to the general population and above the artisan class.

The weights of our children—boys and girls—are below those given for the general population and artisan class.

This seems to be the general experience of Urban Districts.

AVERAGE HEIGHTS, 1910.

Age.	Boys.						Girls.					
	Total No. Measured, W'stow.	Centimetres.	Inches.	British Association, 1883.			Total No. Measured, W'stow.	Centimetres.	Inches.	British Association, 1883.		
				General Population. Inches.	Class IV. Artizans. Inches.	No. Measured.				General Population. Inches.	Class IV. Artizans. Inches.	No. Measured.
4-5	205	101·1	40	38·46	37·63	107	182	100·9	39¾	38·26	37·30	99
5-6	860	105·2	41½	41·03	39·72	201	798	103·6	40¾	40·55	39·77	157
6-7	217	104·5	41¼	44	41·90	266	278	108·5	42¼	42·88	41·84	189
7-8	676	114·2	45	45·97	44·60	307	695	113·9	44¾	44·45	43·56	173
8-9	8	116·8	45¾	47·05	46·46	1,523	10	116·5	45½	46·6	45·55	432
9-10	12	125·2	49¼	49·70	48·88	2,278	5	123·4	48¾	48·73	47·36	499
10-11	12	126·8	49¾	51·84	50·72	1,551	12	124·4	49	51·05	48·96	480
11-12	17	131·1	51½	53·50	52·68	1,766	6	136·3	53½	53·10	51·54	441
12-13	451	138·8	54½	54·99	53·72	1,981	380	140·6	55¼	55·66	53·98	222
13-14	743	143.3	56½	56·91	55·81	2,743	634	139·5	54¾	57·77	56·22	206
14-15	89	148·3	58¼	59·33	58·61	3,428	81	149·8	58¾	59·80	58·56	240
15-16	31	152·2	60	62·24	61·36	3,498	28	149·1	58½	60·93	59·41	201
16-17	1	148·0	58				1	154	60½			

AVERAGE WEIGHTS, 1910.

Age.	Boys.						Girls.					
	Total No. Weighed, W'stow.	Kilos.	Lbs.	British Association, 1883.			Total No. Weighed, W'stow.	Kilos.	Lbs.	British Association, 1883.		
				General Population. Lbs.	Class IV. Artizans. Lbs.	No. Weighed.				General Population. Lbs.	Class IV. Artizans. Lbs.	No. Weighed.
4-5	205	16·6	36¾	37·3	38.6	102	182	16·7	37	36·1	35·8	97
5-6	860	17·4	40	39·9	40·9	193	798	16·7	37	39·2	40·3	160
6-7	217	19·7	43	44·4	44·6	224	278	18·1	42	41·7	43·1	178
7-8	676	21·6	47	49·7	50·7	246	695	20·8	45½	47·5	46·2	148
8-9	8	21·4	46¾	54·9	54·3	820	10	20·7	45½	52·1	51·8	330
9-10	12	26·7	58½	60·4	58·3	1,425	5	25·5	56¼	55·5	55·2	535
10-11	12	27	59½	67·5	64	1,464	12	25·8	57	62	60·5	495
11-12	17	29·3	68¼	72	69	1,599	6	29·8	60½	68·1	66·8	456
12-13	451	32·7	72¼	76·7	72	1,786	380	32·6	72	76·4	74·9	419
13-14	743	35·8	78½	82·6	79	2,443	634	36·4	80	87·2	84·9	209
14-15	89	38·9	85½	92	87·2	2,952	81	40·9	90	96·7	97·7	229
15-16	31	41·3	91	102·7	96·4	3,118	28	50·5	111	106·3	107·6	187
16-17	1	38·5	85				1	40	88	113·1		128

Table of Defects found on Medical Inspection.

AGE.	Number Examined.	Parent Present.	Clothing: Good.	Clothing: Fair.	Clothing: Bad.	Footgear: Good.	Footgear: Fair.	Footgear: Bad.	Head, Cleanliness: Clean.	Head, Cleanliness: Somewhat Dirty.	Head, Cleanliness: Very Dirty.	Head, Other Particulars: Scurf.	Head, Other Particulars: Nits.	Head, Other Particulars: Lice.	Body, Cleanliness: Clean.	Body, Cleanliness: Somewhat Dirty.	Body, Cleanliness: Very Dirty.	Body, Oth'r P'rticles: Fleabites.	Body, Oth'r P'rticles: Lice.	External Eye Disease.
BOYS—																				
4- 5	205	113	184	21	—	179	25	1	200	2	—	2	3	—	200	5	—	2	—	6
5- 6	860	362	750	99	8	752	86	22	814	46	—	8	33	3	788	72	—	33	2	47
6- 7	217	126	171	43	3	173	40	5	203	14	—	—	16	—	193	24	—	9	—	11
7- 8	676	378	575	99	2	561	100	12	652	23	1	2	31	—	632	44	—	25	—	28
8- 9	8	5	6	2	—	5	3	—	8	—	—	—	3	—	7	1	—	2	—	—
9-10	12	4	10	1	1	10	2	—	—	11	1	—	—	1	—	10	2	—	1	2
10-11	12	7	9	3	—	8	2	2	12	—	—	—	—	—	11	1	—	—	—	2
11-12	17	3	16	1	—	15	1	1	16	1	—	—	—	—	15	2	—	—	—	3
12-13	451	113	392	57	2	395	43	13	446	5	—	3	8	1	438	13	—	11	1	96
13-14	743	146	627	105	11	644	77	22	719	24	—	5	8	1	707	36	—	9	—	19
14-15	69	12	62	7	—	66	3	—	68	1	—	—	1	—	68	1	—	1	—	6
15-16 (H.E.S.)	31	3	31	—	—	31	—	—	31	—	—	1	—	—	31	—	—	—	—	—
16-17	1	—	1	—	—	1	—	—	1	—	—	—	—	—	1	—	—	—	—	—
	3322	1474	2860	439	24	2857	387	78	3264	117	1	22	104	7	3121	201	—	96	3	220
GIRLS—																				
4- 5	182	124	155	27	—	150	31	1	177	5	—	3	28	3	179	3	—	6	6	6
5- 6	798	571	719	73	6	725	63	10	782	15	1	11	150	8	787	11	—	26	—	45
6- 7	278	169	239	37	2	242	27	9	265	11	2	2	88	5	261	15	2	17	—	28
7- 8	695	438	591	100	4	568	116	11	678	16	1	32	230	11	664	31	—	22	—	38
8- 9	10	5	5	3	2	6	2	2	9	1	—	1	4	1	8	2	—	1	—	—
9-10	5	1	4	1	—	4	1	—	5	—	—	—	—	—	5	—	—	2	—	—
10-11	13	4	6	5	1	6	5	1	12	—	—	—	2	1	12	—	—	—	—	2
11-12	6	2	5	1	—	5	—	1	6	—	—	—	1	—	6	—	—	—	—	1
12-13	380	198	317	55	8	314	52	14	366	14	—	3	85	2	375	5	—	16	—	10
13-14	634	282	487	137	10	494	116	24	633	1	—	21	200	2	628	6	—	13	—	25
14-15	81	29	78	3	—	78	3	—	81	—	—	4	11	—	81	—	—	1	—	3
15-16	28	22	28	—	—	28	—	—	28	—	—	1	3	—	28	—	—	—	—	1
16-17	1	1	1	—	—	1	—	—	1	—	—	—	—	—	1	—	—	—	—	—
	3110	1873	2635	444	31	2599	438	73	3043	63	4	79	805	36	3035	73	2	194	—	139
TOTALS.																				
BOYS	3322	1474	2860	439	24	2857	387	78	3264	117	1	22	104	7	3121	201	—	96	3	220
GIRLS	3110	1873	2635	444	31	2599	438	73	3043	63	4	79	805	36	3035	73	2	194	—	139
	6432	3347	5495	882	55	5456	825	151	6247	180	5	101	909	43	6156	274	2	290	3	359

AGE.	Vision: Both Eyes Good.	Vision: One Eye Good, ,, ,, Slightly Defective.	Vision: Both Eyes Slightly Defective.	Vision: One Eye Good, ,, ,, Very Defective.	Vision: One Eye Slightly ,, ,, Very Defective.	Vision: Both Eyes Very Defective.	Nutrition: Good.	Nutrition: Normal.	Nutrition: Below Normal.	Nutrition: Bad.	Teeth, Cleanliness: Clean.	Teeth, Cleanliness: Somewhat Dirty.	Teeth, Cleanliness: Foul.	Teeth, Decay: Average Number of Decayed Teeth per Child.	Tonsils: Slightly Enlarged.	Tonsils: Considerably Enlarged.	Tonsils: Urgently Requiring Removal.
BOYS—																	
4- 5	—	—	—	—	—	—	72	131	2	—	65	135	5	1·4	30	8	1
5- 6	—	—	—	—	—	—	198	660	2	—	179	658	23	2·2	142	47	1
6- 7	215	1	—	—	—	1	27	182	8	—	22	193	2	2·6	24	9	—
7- 8	565	36	26	16	7	22	107	565	4	—	111	563	2	2·3	59	27	—
8- 9	6	1	1	—	—	—	—	8	—	—	1	7	—	3·0	3	—	—
9-10	—	7	2	2	—	1	—	11	1	—	2	8	2	3·4	4	—	1
10-11	8	—	—	2	—	2	2	9	1	—	2	10	1	4·5	2	1	—
11-12	7	—	1	2	2	5	2	15	—	—	4	10	3	2·0	—	—	1
12-13	379	19	10	10	13	51	66	379	6	—	84	330	37	1·8	41	11	4
13-14	635	40	13	33	5	27	139	602	1	1	145	549	49	2·0	82	21	2
14-15	52	7	2	4	—	4	22	45	2	—	37	25	7	2·0	3	4	—
15-16 (H.E.S.)	26	2	—	—	1	2	13	18	—	—	12	18	1	2·9	3	—	—
16-17	1	—	—	—	—	—	—	1	—	—	—	1	—	3·0	—	—	—
	1931	98	51	63	27	86	669	2625	27	1	654	2536	132	2·4	434	128	10
GIRLS—																	
4- 5	—	—	—	—	—	—	64	118	—	—	32	137	13	·7	30	12	2
5- 6	—	—	—	—	—	—	157	637	4	—	179	611	8	1·5	142	36	2
6- 7	271	3	2	—	1	1	28	247	3	—	43	230	5	2·5	50	14	2
7- 8	595	28	27	12	11	13	86	600	6	3	136	554	5	1·9	119	27	1
8- 9	10	—	—	—	—	—	—	9	1	—	2	8	—	3·2	2	—	—
9-10	5	—	—	—	—	—	1	4	—	—	1	4	—	1·6	1	—	—
10-11	3	1	1	2	—	5	—	13	—	—	2	8	1	2·5	2	—	—
11-12	4	1	—	—	—	1	—	6	—	—	1	4	1	1·6	—	—	—
12-13	314	19	12	12	4	19	45	334	1	—	130	241	9	1·6	29	8	—
13-14	523	29	13	30	10	29	173	454	6	1	203	418	13	3·4	53	29	3
14-15	63	4	1	5	4	4	40	41	—	—	48	30	3	1·3	8	3	—
15-16	26	—	—	1	1	—	19	9	—	—	19	9	—	2·6	2	—	—
16-17	1	—	—	—	—	—	—	1	—	—	1	—	—	1·0	—	—	—
	1824	85	56	55	33	78	606	2474	20	4	821	2237	52	2·0	438	141	10
TOTALS.																	
BOYS	1931	98	51	63	27	86	669	2625	27	1	654	2536	132	2·4	434	128	10
GIRLS	1824	85	56	55	33	78	606	2474	20	4	821	2237	52	2·0	438	141	10
	3755	183	108	118	59	164	1275	5099	47	5	1475	4773	184	2·2	872	269	20

AGE.	Adenoids: Probable.	Adenoids: Mouth Breathing.	Adenoids: Requires Operation.	Ear Diseases: Cerumen in Excess.	Ear Diseases: Otorrhoea.	Ear Diseases: Perforation.	Ear Diseases: Defective Hearing.	Glands: Slightly Enlarged.	Glands: Considerably Enlarged.	Rickets.	Speech.	Heart Affection.	Lung Affection.	Tuberculosis.	Mental Condition: Bright.	Mental Condition: Average.	Mental Condition: Dull.	Nervous System.	Spinal Deformities.	Infectious or Contagious Diseases.	Other Diseases.	Average Number in Family.
BOYS—																						
4- 5	1	—	—	—	2	—	—	4	—	—	—	25	18	—	52	151	1	3	—	2	—	4·4
5- 6	3	1	—	—	8	—	4	18	3	3	16	76	114	3	252	602	6	2	—	8	13	4·0
6- 7	1	—	—	—	2	—	—	6	—	1	8	24	26	2	43	164	10	2	—	3	7	3·9
7- 8	5	2	—	—	4	—	4	16	—	3	8	90	61	4	128	525	23	—	1	7	11	4·1
8- 9	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	8	—	—	—	—	—	5·3
9-10	1	—	—	—	—	—	2	—	—	—	1	4	1	1	—	11	1	1	—	1	—	5·0
10-11	—	—	—	—	1	—	1	2	—	—	1	1	—	—	2	8	2	—	—	1	—	5·4
11-12	—	—	—	—	—	—	—	—	—	—	—	2	2	1	3	12	2	—	—	—	1	5·4
12-13	2	2	—	1	7	1	13	3	—	—	10	67	13	1	59	380	12	—	1	2	4	5·0
13-14	1	1	—	—	5	1	—	4	1	—	6	34	13	2	124	600	19	2	1	2	10	5·0
14-15	—	—	—	—	—	—	3	2	—	—	2	13	5	1	12	73	4	1	—	—	4	5·0
15-16 (H.E.S.)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	10	21	—	—	—	—	1	4·6
16-17	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	2·0
	12	6	—	1	29	2	25	49	6	7	48	393	248	15	686	2576	60	11	3	26	51	4·5
GIRLS—																						
4- 5	3	—	—	—	—	—	—	1	—	—	2	6	18	1	78	104	—	1	1	1	1	4·1
5- 6	4	2	—	—	6	—	1	13	1	1	8	86	92	8	239	557	2	2	1	3	13	4·0
6- 7	2	—	—	—	1	—	2	5	—	3	1	30	27	5	83	191	4	2	1	1	7	4·2
7- 8	5	1	—	—	4	—	2	5	2	—	3	63	58	3	145	541	9	2	—	6	3	4·9
8- 9	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	8	1	—	—	—	—	5·2
9-10	—	1	—	—	—	—	—	1	—	—	—	—	—	—	2	1	2	—	—	—	—	4·6
10-11	—	—	—	—	—	—	—	1	—	—	—	1	—	1	—	10	2	—	—	—	—	5·2
11-12	—	—	—	—	—	—	—	1	—	—	—	2	2	—	1	4	1	—	—	—	—	4·0
12-13	3	—	—	1	4	1	4	5	1	—	4	54	13	2	40	335	5	8	1	1	6	4·6
13-14	3	3	—	—	6	—	3	3	3	—	8	160	13	7	92	521	21	4	—	3	8	5·2
14-15	—	—	—	—	—	—	1	—	—	2	—	16	—	2	19	61	1	1	—	—	3	4·8
15-16	—	—	—	—	1	—	1	—	—	—	—	1	—	—	16	12	—	—	—	—	2	6·1
16-17	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	9·0
	22	7	—	1	22	1	17	37	7	6	26	358	227	24	725	2336	49	18	4	15	44	5·0
TOTALS.																						
BOYS	12	6	—	1	29	2	25	49	6	7	48	393	248	15	686	2576	60	11	3	26	51	4·5
GIRLS	22	7	—	1	22	1	17	37	7	6	26	358	227	24	725	2336	49	18	4	15	44	5·0
	34	13	—	2	51	3	42	86	13	13	74	753	475	39	1411	4912	109	29	7	41	95	4·7

Table of Defects—Three age groups in two selected Schools.

Description of School.	SCHOOLS.	Age.	Number Examined.	Parent Present.	Clothing: Good.	Clothing: Fair.	Clothing: Bad.	Footgear: Good.	Footgear: Fair.	Footgear: Bad.	Head Cleanliness: Clean.	Head Cleanliness: Somewhat Dirty.	Head Cleanliness: Very Dirty.	Head Other Particulars: Sores.	Head Other Particulars: Nits.	Head Other Particulars: Lice.
	BOYS—															
Poor	Markhouse Road ...	5- 6	62	88·7	82·3	17·7	—	79·3	14·5	6·1	88·7	11·3	—	1·6	9·6	3·2
Good	Maynard Road ...	5- 6	56	94·2	96·4	3·5	—	96·4	3·5	—	100·0	—	—	—	3·6	—
Poor	Markhouse Road ...	7- 8	42	83·3	78·1	23·8	—	73·8	14·3	12·4	90·4	9·5	—	—	13·9	—
Good	Maynard Road ...	7- 8	60	58·3	90·0	10·0	—	93·3	6·6	—	100·0	—	—	—	—	—
Poor	Markhouse Road ...	13-14	17	29·6	82·3	17·6	—	58·8	29·4	11·7	100·0	—	—	—	—	—
Good	Maynard Road ...	13-14	67	1·4	85·1	13·4	1·4	100·0	—	—	100·0	—	—	—	—	—
	GIRLS—															
Poor	Markhouse Road ...	5- 6	44	34·5	86·3	11·3	2·2	84·1	11·3	4·5	90·1	6·8	—	—	61·3	—
Good	Maynard Road ...	5- 6	46	76·0	97·8	2·1	—	97·8	2·1	—	100·0	—	—	2·1	6·6	—
Poor	Markhouse Road ...	7- 8	51	82·7	80·3	19·6	—	70·5	29·4	5·9	92·1	7·7	—	3·9	70·5	—
Good	Maynard Road ...	7- 8	62	73·6	88·7	11·3	—	90·3	9·6	—	100·0	—	—	1·6	14·5	—
Poor	Markhouse Road ...	13-14	21	47·6	52·3	23·8	23·8	52·3	19·1	28·5	100·0	—	—	—	52·3	—
Good	Maynard Road ...	13-14	44	20·4	95·4	4·5	—	88·6	9·1	2·2	100·0	—	—	2·2	13·6	—

TOTAL PERCENTAGES.

			Number Examined.	Parent Present.	Clothing: Good.	Clothing: Fair.	Clothing: Bad.	Footgear: Good.	Footgear: Fair.	Footgear: Bad.	Head Cleanliness: Clean.	Head Cleanliness: Somewhat Dirty.	Head Cleanliness: Very Dirty.	Head Other Particulars: Sores.	Head Other Particulars: Nits.	Head Other Particulars: Lice.
	BOYS ...	Poor	121	44·6	80·1	19·8	—	74·3	18·5	9·1	90·9	9·1	—	0·8	9·1	1·6
	BOYS ...	Good	183	44·3	90·1	9·3	0·5	96·7	3·3	—	100·0	—	—	—	0·5	—
	GIRLS ...	Poor	116	56·0	77·6	17·2	5·1	72·4	19·8	6·6	93·9	6·0	—	2·5	62·7	1·7
	GIRLS ...	Good	152	39·3	93·4	6·5	—	92·1	7·2	0·6	100·0	—	—	1·9	12·5	—

Description of School.	SCHOOLS.	Age.	Body Cleanliness: Clean.	Body Cleanliness: Somewhat Dirty.	Body Cleanliness: Very Dirty.	Oth'r P'ticlrs: Fleabites.	Oth'r P'ticlrs: Lice.	Vision: Both Eyes Good.	Vision: One Eye Good, 1 Slightly Defective.	Vision: Both Eyes Slightly Defective.	Vision: One Eye Good, 1 Very Defective.	Vision: One Eye Slightly, 1 Very Defective.	Vision: Both Eyes Very Defective.	Defective Hearing.
Poor	Markhouse Road	5- 6	73·8	24·1	—	11·2	—	—	—	—	—	—	—	—
Good	Maynard Road	5- 6	100·0	—	—	—	—	—	—	—	—	—	—	—
Poor	Markhouse Road	7- 8	85·7	14·2	—	11·9	—	88·1	—	2·3	2·3	2·3	4·7	—
Good	Maynard Road	7- 8	100·0	—	—	—	—	88·3	1·6	3·3	1·6	1·6	3·3	—
Poor	Markhouse Road	13-14	94·1	5·9	—	—	—	82·3	5·8	—	5·8	—	5·8	—
Good	Maynard Road	13-14	100·0	—	—	—	—	86·5	4·4	1·4	4·4	—	2·9	—
Poor	Markhouse Road (Girls)	5- 6	93·4	4·5	—	2·2	—	—	—	—	—	—	—	—
Good	Maynard Road (Girls)	5- 6	100·0	—	—	—	—	—	—	—	—	—	—	—
Poor	Markhouse Road (Girls)	7- 8	78·4	21·6	—	9·8	3·9	72·5	5·8	7·8	3·9	3·9	5·8	—
Good	Maynard Road (Girls)	7- 8	100·0	—	—	—	—	85·4	3·2	4·8	1·6	1·6	3·2	—
Poor	Markhouse Road (Girls)	13-14	100·0	—	—	9·5	—	80·9	4·7	—	—	4·7	9·5	—
Good	Maynard Road (Girls)	13-14	100·0	—	—	—	—	81·8	4·5	—	2·2	2·2	9·1	—
	BOYS (Total)	Poor	82·6	18·1	—	9·9	—	43·1	0·8	0·8	1·6	0·8	2·4	—
	BOYS (Total)	Good	100·0	—	—	—	—	60·6	2·1	1·6	2·1	0·5	2·1	—
	GIRLS (Total)	Poor	88·7	11·2	—	6·8	1·7	40·5	3·4	3·4	2·5	2·5	3·4	—
	GIRLS (Total)	Good	100·0	—	—	—	—	50·5	2·6	1·3	1·3	1·3	3·6	—

Description of School.	SCHOOLS.	Age.	Nutrition: Good.	Nutrition: Normal.	Nutrition: Below Normal.	Nutrition: Bad.	Average Height.	Average Weight.	Teeth Cleanliness: Clean.	Teeth Cleanliness: Somewhat Dirty.	Teeth Cleanliness: Foul.	Decay: Average Number of Decayed Teeth per Child.
Poor	Markhouse Road	5- 6	21·6	79·3	—	—	103·3	17·3	9·6	88·7	1·6	1·6
Good	Maynard Road	5- 6	25·0	75·0	—	—	108·3	17·5	25·2	71·4	5·3	3·2
Poor	Markhouse Road	7- 8	14·2	85·7	—	—	112·7	21·2	7·1	92·8	—	1·1
Good	Maynard Road	7- 8	20·0	80·0	—	—	117·1	21·5	30·0	70·0	—	2·4
Poor	Markhouse Road	13-14	17·6	82·3	—	—	142·4	35·2	11·7	64·7	23·5	2·2
Good	Maynard Road	13-14	20·8	79·1	—	—	143·3	36·1	25·3	73·3	1·4	1·5
Poor	Markhouse Road (Girls)	5- 6	15·9	84·0	—	—	103·6	16·9	15·9	84·0	—	1·1
Good	Maynard Road (Girls)	5- 6	13·1	84·7	2·1	—	108·3	18·1	15·2	84·7	—	1·7
Poor	Markhouse Road (Girls)	7- 8	5·8	92·1	1·9	—	114·0	19·9	7·8	92·1	—	1·3
Good	Maynard Road (Girls)	7- 8	16·1	83·8	—	—	113·6	21·8	27·4	72·5	—	1·7
Poor	Markhouse Road (Girls)	13-14	28·5	66·6	4·7	—	143·3	37·1	14·2	85·7	—	1·8
Good	Maynard Road (Girls)	13-14	29·5	70·4	—	—	144·9	39·9	61·3	36·3	2·2	2·7
	BOYS (Total)	Poor	18·1	81·8	—	—	—	—	9·1	86·7	4·1	1·6
	BOYS (Total)	Good	21·8	78·1	—	—	—	—	26·2	71·5	2·1	2·0
	GIRLS (Total)	Poor	13·7	84·4	0·8	—	—	—	12·0	87·9	—	1·4
	GIRLS (Total)	Good	19·1	80·2	0·6	—	—	—	33·6	65·7	0·6	2·0

Description of School.	SCHOOLS.	Age.	Tonsils: Slightly Enlarged.	Tonsils: Considerably Enlarged.	Tonsils: Urgently Requiring Removal.	Adenoids: Probable.	Adenoids: Mouth Breathing.	Adenoids: Requires Operation.	External Eye Disease.	Ear Diseases: Cerumen in Ears.	Ear Diseases: Otorrhoea.	Ear Diseases: Perforation.	Glands: Slightly Enlarged.	Glands: Considerably Enlarged.
Poor	Markhouse Road	5- 6	16·1	1·6	—	3·2	—	—	6·4	—	—	—	—	—
Good	Maynard Road	5- 6	23·4	8·9	—	1·7	—	—	8·9	—	1·7	—	1·7	3·5
Poor	Markhouse Road	7- 8	23·4	—	—	—	—	—	7·1	—	—	—	2·3	—
Good	Maynard Road	7- 8	6·6	5·0	—	—	—	—	—	—	—	—	—	—
Poor	Markhouse Road	13-14	17·6	5·8	—	—	—	—	—	—	—	—	—	—
Good	Maynard Road	13-14	10·4	1·4	1·4	—	—	—	—	—	—	—	—	—
Poor	Markhouse Road (Girls)	5- 6	20·4	2·2	—	—	—	—	4·5	—	—	—	2·2	—
Good	Maynard Road (Girls)	5- 6	13·5	6·5	—	4·3	—	—	2·1	—	—	—	6·5	—
Poor	Markhouse Road (Girls)	7- 8	25·4	13·1	—	3·9	—	—	9·8	—	3·9	—	1·9	—
Good	Maynard Road (Girls)	7- 8	16·1	1·6	—	1·6	—	—	—	—	—	—	—	1·6
Poor	Markhouse Road (Girls)	13-14	9·5	4·7	4·7	—	—	—	—	—	4·7	—	4·7	4·7
Good	Maynard Road (Girls)	13-14	13·9	4·5	—	—	—	—	4·5	—	—	—	—	—
	BOYS (Total)	Poor	18·1	1·6	—	0·8	—	—	3·6	—	—	—	0·8	—
	BOYS (Total)	Good	12·5	4·9	0·5	0·5	—	—	1·6	—	—	—	0·5	1·6
	GIRLS (Total)	Poor	20·6	6·8	0·8	0·8	—	—	6·0	—	2·5	—	2·5	0·8
	GIRLS (Total)	Good	15·4	3·9	—	1·9	—	—	1·9	—	—	—	1·9	0·6

Description of School.	SCHOOLS.	Age.	Rickets.	Speech.	Heart Affection.	Lung Affection.	Tuberculosis.	Mental Condition: Bright.	Mental Condition: Average.	Mental Condition: Dull.	Nervous System.	Spinal Deformities.	Infectious or Contagious Diseases.	Other Diseases.	Average Number in Family.
Poor	Markhouse Road	5- 6	—	1·6	16·6	30·3	—	16·1	83·8	—	—	—	1·6	—	4·6
Good	Maynard Road	5- 6	1·7	5·3	3·5	14·2	—	42·8	57·1	—	—	—	1·7	—	3·9
Poor	Markhouse Road	7- 8	—	—	19·4	14·2	2·3	23·8	76·1	—	—	—	—	—	5·4
Good	Maynard Road	7- 8	—	1·6	13·3	5·0	—	26·6	68·3	5·0	—	—	1·6	1·6	3·5
Poor	Markhouse Road	13-14	—	—	—	—	—	23·5	76·4	—	—	—	—	—	6·9
Good	Maynard Road	13-14	—	4·4	13·4	—	—	7·4	89·5	2·9	1·4	—	—	—	4·7
Poor	Markhouse Road (Girls)	5- 6	—	—	4·5	13·6	—	45·4	54·6	—	—	—	—	2·2	5·1
Good	Maynard Road (Girls)	5- 6	—	—	15·2	19·5	—	26·0	73·9	—	—	—	—	—	3·9
Poor	Markhouse Road (Girls)	7- 8	—	—	15·7	14·7	—	21·5	74·5	3·9	1·9	—	—	—	5·4
Good	Maynard Road (Girls)	7- 8	—	—	11·2	6·8	3·2	16·1	83·8	—	—	—	—	—	4·7
Poor	Markhouse Road (Girls)	13-14	—	4·7	9·5	—	4·7	19·1	61·9	19·1	—	—	—	—	6·5
Good	Maynard Road (Girls)	13-14	—	2·2	13·6	—	—	13·6	84·1	2·2	—	—	—	—	3·5
	BOYS (Total)	Poor	—	0·8	12·4	15·7	0·8	19·8	80·9	—	—	—	0·8	—	5·7
	BOYS (Total)	Good	0·5	2·4	10·3	6·6	—	24·3	72·7	2·7	0·5	—	1·0	0·5	3·6
	GIRLS (Total)	Poor	—	0·8	9·4	12·0	0·8	30·2	64·6	5·1	0·8	—	—	0·8	5·6
	GIRLS (Total)	Good	—	0·6	13·1	6·5	0·6	18·4	80·7	0·6	—	—	—	—	4·4

STATEMENT OF THE CHIEF DEFECTS REVEALED BY INSPECTION.

Defect or Disease.	No. of Children.	Percentage.
Verminous condition (bad)	43	0·7
Pediculosis Nits	909	14·0
Defective Vision	632	9·8
External Eye Disease	379	6·0
Otorrhœa	51	0·8
Defective Hearing	42	0·7
Nutrition—below normal	47	0·8
„ bad	5	
Adenoids	34	0·7
Mouth Breathers	13	
Considerably Enlarged Tonsils ...	269	4·5
Urgently requiring Removal	20	
Defective Teeth requiring immediate attention	184	3·0
Tuberculosis	39	0·6
Lung or Bronchial Affections ...	475	7·3
Diseases of Nervous System	37	0·6
Spinal Deformities	7	0·01
Heart Affections	753	11·7

The large numbers returned as suffering from heart and lung affections are made up largely of those noted as "Cardiac Weakness" and "Bronchial Catarrh."

SUMMARY OF DEFECTS.

The preceding Tables give the Summary of defects for boys and girls at the different ages and for all schools, and for three age groups in two schools selected as representative of two classes of children—those mainly of well-to-do and poorer parents.

(d) GENERAL REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION.

Clothing and Footgear.—Fifty-five children were found to have bad clothing and 151 with bad boots, less than 1 and 2·5 per cent. of the total.

In comparing the "good" and "bad" schools, however, it is found that while the percentage with insufficient clothing and footgear is neglible for "good" schools, the "bad" ones rise to 5 and 9 per cent. respectively.

This result is what one would expect.

As showing the influence that Head Teachers may exercise in this respect and how much good work on behalf of the poorer children some of them carry out, I may mention that of 148 children examined in one Infant School in a poor district only 1 child had bad boots. The remainder were classed as 137 "good," 10 "fair."

In the school referred to a large boot club is run on provident lines and 300 pairs of boots were supplied to the children during 1910.

The total sum expended was £53 3s. 7d, of which the Head Teacher provided £8 8s. by means of entertainments and donations from friends.

A central boot fund has recently been established under the control of the Education Authority, the funds for which will be procured by voluntary subscriptions and by the aid of entertainments, so that it is to be hoped our very poorest children everywhere will be in the future well cared for in this respect.

NUTRITION.

This is a relative condition and difficult to classify, and in drawing inferences from the findings the personal views of the inspecting doctor must be known as they largely influence the classification.

Forty-seven children were found whose nutrition was below normal, and five badly nourished.

These figures are very low ones, showing less than 1 per cent. badly nourished, and are a great contrast with those of last year and with what has been recorded elsewhere.

All children likely to be insufficiently fed, owing to the non-employment of the parents are supplied daily with a good dinner at the Canteen Centre.

CLEANLINESS OF HEAD AND BODY.

Of the 6,432 children inspected, 46 (girls 39, boys 7) were found to be verminous, and 909 (girls 805, boys 104) had nits in the hair.

The 909 evidently had recently suffered from vermin, and probably surprise visits to all schools would prove that a much larger percentage than that recorded of our poorer girls suffer more or less from head lice.

Among the 354 children seen by me at the request of the Head Teachers, about 25 per cent. of them were presented for this condition.

The children suspected by the class teachers to be so suffering were the poorest and most neglected looking, but a large proportion of them were found to be quite free.

My own experience, as well as the recorded figures prove that there has been a marked improvement in the general cleanliness of the heads of all our children.

Very few had vermin on their clothing or bodies.

No prosecutions have been undertaken, and with tact and sympathy on the part of those engaged in dealing with the children all that is required can be accomplished.

TEETH.

The condition of the mouth and teeth in 184 of the children was found to be foul and dirty, and the percentage with carious teeth varied according to the age of those examined.

About 15 per cent. of those between 7 and 8 years and 6 per cent. of those between 13 and 14 had five or more carious teeth.

A considerable amount of ill health is caused by bad teeth, but it is difficult to get the parents to realise this and seldom is any dental treatment procured further than the extraction of foul stumps. The poor have so many calls on their slender purses that one can hardly expect it.

By advice and encouraging the children, a much larger proportion now use tooth brushes than heretofore as evidenced by the cleanly condition of the teeth of the great majority.

TONSILS.

Two hundred and sixty-nine children suffered from considerably enlarged tonsils, and twenty required urgent removal.

The younger children were most affected, and the percentage (five) of all children whose condition would be improved by operation was similar to that found in the previous year.

ADENOIDS.

Thirty-four children were noted as likely sufferers and the thirteen others returned as mouth-breathers may be so considered.

These figures cannot represent the total, as a very considerable number of those with enlarged tonsils have probably also growths in the nasopharynx.

Without a digital examination, which is not undertaken, a correct diagnosis cannot be made, although the expression and characteristic appearance of these children are well known.

Growths, whether to the back of the nose or in the tonsils, tend to mouth-breathing and partial deafness, and seriously interfere with the general physical and mental development of the child, and, next to defects of vision, they are the most serious among those found affecting our school children. The greater attention now paid at all our schools to drill and breathing exercises in the open air may account for the small number of those defects noted in older children, and it is well known that these growths tend to diminish with age. Indiscriminate operations for such conditions would be unwise.

EAR DISEASE.

Forty-one children were found to be suffering from discharging ears.

GLANDULAR ENLARGEMENTS.

Eighty-six children suffered from slight and thirteen from considerably enlarged glands.

These were generally the result of irritation from bad teeth or pediculosis.

Those suffering from tubercular glands were few.

EXTERNAL EYE DISEASES.

These were generally of a simple nature, such as sore lids or styes; children with ulcers are referred to me by the teachers, and the parents are advised.

VISION.

Children unable to read and under six years of age are not subjected to any vision test except for special reasons.

The following tabular statement shows the vision of those inspected :—

Boys.			Ages.	Girls.		
Good.	Moderate.	Bad.		Good.	Moderate.	Bad.
215	1	1	6 to 7	271	5	2
585	49	42	7 to 8	595	55	45
6	2	—	8 to 9	10	—	—
7	4	1	9 to 10	5	—	—
8	—	4	10 to 11	3	2	7
7	1	9	11 to 12	4	1	1
379	29	43	12 to 13	314	31	35
625	53	65	13 to 14	533	42	59
72	8	9	14 to 15	62	5	14
26	2	3	15 to 16	26	—	2
1	—	—	16 to 17	1	—	—
1931	149	177		1824	141	165

Good—$\frac{6}{6}$ or $\frac{6}{9}$ in both eyes, or $\frac{6}{6}$ in one and $\frac{6}{9}$ in the other.
Moderate—$\frac{6}{9}$ and $\frac{6}{12}$, or $\frac{6}{12}$ in both eyes.
Bad—$\frac{6}{12}$ and over in one or both eyes.

About 85·5 per cent. of the children examined have "good" vision, 6·5 per cent. "moderate," and 8 per cent. "bad," and the influence of School work upon vision is shown in the percentages for the different ages as follows :—

	Boys.	Girls.
6 to 7 years	99 per cent.	97·4 per cent.
7 to 8 years	86·5 per cent.	85·6 per cent.
12 to 13 years	84 per cent.	82·6 per cent.
13 to 14 years	84·1 per cent.	84 per cent.

SPEECH DEFECTS.

Eighty-four children were found to have defects of speech. Many of them suffered simply from defects due to habit and home associations, which are remedied in the normal course of school work ; those with stutter were shown how to overcome their difficulty, and the teachers' attention was drawn to the necessity of breathing exercises and patience in dealing with these children.

A boy aged 11 years, with considerable stammer, assured me that his disability of three years' standing was entirely due to the impatience of his class teacher! This is possible, but it must be a very rare occurrence.

MENTAL CONDITION.

One hundred and twenty-nine of the 6,432 children inspected were returned as being of mental capacity below the average, 1,391 as bright, the remainder average.

All children who in the judgment of the teachers are incapable of receiving benefit from the instruction given in the ordinary schools are referred to me.

During the year 50 such children were examined, and 17 of them certified as coming under the Defective and Epileptic Act of 1899. They were transferred to the Special School.

HEART DISEASE.

The percentage of children with serious heart disease was very small. Seven hundred and fifty-three were suffering from cardiac weakness, which was mainly the result of debility or general weakness. The association of enlarged tonsils and unhealthy conditions of fauces with cardiac symptoms was looked on as due to rheumatism, and the parents were advised accordingly.

Rheumatism in children is quite a common affection, but parents seldom look upon pains in the limbs as other than "growing pains."

No greater mistake can be made by those having the care of children.

PHTHISIS.

Thirty-nine children were found to have symptoms indicative of this disease; but it is not always easy to make a correct diagnosis.

The majority of the children were under observation by their own doctors, or at the Hospitals, and when expectoration was present—which was very uncommon—a bacteriological examination was made. Unless a positive diagnosis was made, children were not excluded, but general and printed instructions were given to the parents.

All the children will be visited at their homes during the holidays by the School Nurse, and those of them with wasting, cough, or expectoration, will be re-examined.

RICKETS—DEFORMITIES.

Only 15 children were found to have symptoms of Rickets.

This disease is seldom found in children of school age, and only in so much as its bad after-effects militate against the child's mental progress is it of importance.

Rickety or bow-legs and knock-knee are quite a rarity among our school children.

The observed prevalence of early decayed and defective teeth, and catarrhal conditions of the throat and naso-pharynx, would indicate that many of the children in infancy had suffered from the disease.

SKIN DISEASES.

Forty-one children were found suffering from skin affections. Most of them were of minor importance. All children suspected by the Head Teacher to be suffering from Ringworm, Scabies, and Impetigo are referred to me, and are seen on Mondays, Wednesdays, and Fridays at the Town Hall.

Those found to have Scabies are few, and usually return to school within a week. Impetigo soon yields to suitable treatment, but Ringworm is a source of much loss of schooling to many children.

An average of 70 children are absent from school throughout the year from this cause, and it is to be hoped that in the coming year some method will be devised for dealing more satisfactorily with those children.

ACTION TAKEN TO PREVENT THE SPREAD OF INFECTIOUS DISEASES.

The measures adopted are detailed on page 33 of my report to the Council. Arising out of the supervision of the schools, fourteen cases of Scarlet Fever and two of Diphtheria were discovered among the school children.

No school has been closed during the year through infectious disease.

Such a procedure could only be thought of for Measles and Whooping Cough, and the practice of exclusion adopted for years has been continued.

The following instructions are carried out by the Attendance Officers :—

"No child from a Measles infected house can attend any Infants' School.

"No child under 10 years of age who has not had Measles can attend any school if coming from a Measles infected house.

"Children who have had Measles, or are over 10 years of age, may attend a Junior Mixed or Boys' or Girls' School.

RETURN showing the number of Cases of WHOOPING COUGH and MEASLES of Children attending the PUBLIC ELEMENTARY SCHOOLS.

1910.

	SCHOOL.	DEPARTMENT.	JAN.		FEB.		MAR.		APRIL		MAY.		JUNE.		JULY.		AUG.		SEPT.		OCT.		NOV.		DEC.		TOTALS.	
			M.	W.C.	M.	W.C.	M.	W.C.	M.	W.C.	M.	W.C.	M.	W.C.	M.	W.C.	M.	W.C.	M.	W.C.	M.	W.C.	M.	W.C.	M.	W.C.	M.	W.C.
W.C.	William Morris ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	MIDSUMMER VACATION.		—	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	Opened	in	June.			—	—	—	—			—	—	—	—	—	—	—	—	—	—
		Mixed	—	—	6	—	8	—	2	—	—	—	—	—	—	—			—	—	—	—	—	—	—	—	16	—
	Pretoria Avenue ...	Boys	—	—	—	—	—	—	—	—	—	—	1	—	—	—			—	—	—	—	—	—	—	—	23	—
		Girls	—	—	—	—	—	—	13	—	9	—	1	—	—	—			—	—	—	—	—	—	—	—	99	160
		Infants	—	20	—	26	3	22	38	31	26	22	16	16	16	21			—	—	—	—	—	—	—	2	1	1
	Deaf Centre	Mixed	—	—	—	—	1	—	—	1	—	—	—	—	—	—			—	—	—	—	—	—	—	—	8	—
E.	Maynard Road ...	Boys	—	—	—	—	—	—	2	—	—	—	—	—	—	—			6	—	—	—	—	—	—	—	55	—
		Girls	3	—	6	—	36	—	2	—	—	—	—	—	—	—			6	—	2	—	—	—	—	—	192	16
		Infants	7	—	50	2	84	2	32	4	4	6	—	2	—	—			8	—	5	—	2	—	—	—	14	—
	St. Mary's	Girls	—	—	2	—	6	—	4	—	—	—	—	—	—	—			2	—	—	—	—	—	—	—	86	31
		Infants	1	7	2	8	52	6	24	2	4	6	—	2	2	—			1	—	—	—	—	—	—	—	3	10
N.W.	Blackhorse Road ...	Boys	—	—	—	—	1	—	—	3	1	3	1	4	—	—			—	—	—	—	—	—	—	—	10	1
		Girls	—	1	—	—	—	—	4	—	3	—	1	—	2	—			—	—	—	—	—	—	—	—	80	233
		Infants	—	23	—	26	2	24	64	27	92	13	16	18	6	3			—	—	—	—	—	31	—	68	—	2
	Higham Hill	Boys	—	—	—	1	—	1	—	—	—	—	—	—	—	—			—	—	—	—	—	—	—	—	3	1
		Girls	—	—	—	1	—	—	—	—	—	—	3	—	—	—			—	—	—	—	—	—	—	—	149	106
		Infants	—	21	—	36	—	19	21	5	72	1	45	—	11	—			—	—	—	—	—	8	—	16	13	2
		Temp. Infants ...	—	2	—	—	—	—	1	—	2	—	6	—	4	—			—	—	—	—	—	—	—	—	14	1
		Junior Mixed ...	—	1	1	—	—	—	—	—	1	—	6	—	1	—			—	—	—	—	3	—	2	—	—	—
N.E.	Wood Street ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—			—	—	—	—	—	2	1	—	1	2
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—			—	—	—	—	—	—	5	—	35	9
		Infants	—	—	—	—	—	—	3	5	3	4	21	—	3	—			—	—	—	—	—	—	—	—	1	—
	Joseph Barrett ...	Boys	—	—	—	—	—	—	—	—	1	—	—	—	—	—			—	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—			—	—	—	—	—	—	—	—	121	—
		Infants	—	—	—	—	—	—	67	—	51	—	3	—	—	—			—	—	—	—	—	—	—	—	3	—
	Shernhall Street ...	Special (Boys) ...	—	—	—	—	—	—	—	—	1	—	—	—	2	—			—	—	—	—	—	—	—	—	—	—
		„ (Girls) ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—			—	—	—	—	—	—	—	—	7	7
	St. George's	Mixed	—	—	—	—	—	—	—	—	—	—	—	—	—	—			—	—	—	—	—	—	—	—	11	19
C.	Coppermill Lane ...	Boys	—	—	—	—	4	—	2	—	1	—	—	3	—	4			—	—	—	—	—	—	—	—	190	141
		Girls	—	1	2	—	1	—	4	2	—	3	1	2	2	8			1	—	—	—	—	—	—	3	—	—
		Infants	6	17	24	18	107	23	33	11	6	5	6	19	2	34			—	11	1	—	—	—	5	3	3	5
		Junior Mixed ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—			—	—	—	—	—	—	—	—	59	127
	Mission Grove ...	Girls	—	—	—	2	—	—	2	1	—	—	—	—	1	1			—	1	—	—	—	—	—	—	—	—
		Infants	—	17	3	30	11	25	13	14	8	10	14	9	10	5			—	1	—	7	—	4	—	5	2	—
N.	Chapel End	Boys	—	—	—	—	—	—	—	—	—	—	2	—	—	—			—	—	—	—	—	—	—	—	8	17
		Girls	—	—	—	2	—	5	—	8	3	2	5	—	—	—			—	—	—	—	—	—	—	—	179	396
		Infants	—	18	—	71	—	118	9	123	51	52	119	10	—	4			—	—	—	—	—	—	—	—	36	8
		Junior Mixed ...	—	—	—	3	—	3	3	2	7	—	23	—	3	—			—	—	—	—	—	—	—	—	8	6
	Selwyn Avenue ...	Senior Mixed ...	—	—	—	—	—	—	1	—	4	3	—	3	2	—			1	—	—	—	—	—	—	—	251	284
		Junior Mixed ...	—	2	—	10	—	46	1	122	4	61	89	23	150	20			6	—	1	—	—	—	—	—	—	1
S.W.	St. Saviour's ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—			—	—	—	1	—	—	—	—	11	5
		Girls	—	—	—	—	—	1	2	—	—	—	3	—	6	—			—	4	—	—	—	—	—	—	107	84
		Infants	—	27	—	24	—	28	—	—	4	1	67	1	32	2			—	—	—	—	—	—	4	1	4	2
	Markhouse Road ...	Boys	—	—	—	1	—	1	—	—	—	—	—	—	1	—			—	—	—	—	1	—	2	—	11	1
		Girls	1	—	4	1	—	—	—	—	—	—	2	—	—	—			—	—	—	—	—	—	4	—	188	157
		Infants	—	60	6	40	5	25	12	11	65	3	60	1	3	—			2	—	2	1	11	4	22	12	38	49
		Junior Mixed ...	—	25	4	14	2	10	3	—	5	—	8	—	9	—			—	—	1	—	2	—	4	—	9	1
S.	Queen's Road ...	Boys	—	—	—	—	1	1	4	—	3	—	1	—	—	—			—	—	—	—	—	—	—	—	21	8
		Girls	—	3	—	2	2	1	8	—	7	2	2	—	2	—			—	—	—	—	—	—	—	—	81	176
		Infants	—	62	—	48	2	22	54	18	13	6	10	5	2	3			—	3	—	—	—	2	—	7	—	15
	Gamuel Road ...	Boys	—	2	—	5	—	—	—	5	—	3	—	—	—	—			—	—	—	—	—	—	—	—	2	24
		Girls	—	12	—	6	—	3	—	1	—	—	—	1	2	—			—	—	—	—	—	—	—	1	285	112
		Infants	—	26	—	26	—	26	1	12	2	2	51	2	231	3			—	1	—	—	—	2	—	12	10	7
	Marsh Street ...	Boys	—	2	—	2	2	1	3	1	3	1	2	—	—	—			—	—	—	—	—	—	—	—	24	39
	Edinburgh Road ...	Junior Mixed ...	—	15	—	9	1	4	9	2	8	4	6	3	—	2			—	—	—	—	—	—	—	—	—	10
E.C.	Forest Road	Boys	—	3	—	4	—	3	—	—	—	—	—	—	—	—			—	—	—	—	—	—	—	—	4	—
		Girls	—	—	—	—	—	—	3	—	1	—	—	—	—	—			—	—	—	—	—	—	—	—	184	147
		Infants	—	36	—	55	2	38	76	6	86	4	13	1	7	7			—	—	—	—	—	—	—	—	—	—
	Higher Elementary ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—			—	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—			—	—	—	—	—	—	—	—	13	2
	Winns Avenue ...	Boys	—	—	—	—	—	—	12	2	—	—	—	—	—	—			1	—	—	—	—	—	—	—	—	3
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	3	—			—	—	—	—	—	—	—	—	52	74
		Infants	—	3	3	5	—	5	1	3	19	9	22	20	2	29			3	—	1	—	1	—	—	—	23	5
		Junior Mixed ...	—	—	1	1	5	1	—	—	3	—	1	—	11	3			2	—	—	—	—	—	—	—		
		TOTALS ...	18	406	114	479	338	464	533	422	573	226	626	145	525	152	—	—	39	21	13	9	20	53	49	130	2848	2507

RETURN showing the number of Cases of SCARLET FEVER and DIPHTHERIA notified each month of Children attending the PUBLIC ELEMENTARY SCHOOLS.

1910.

	SCHOOL.	DEPARTMENT.	JAN.		FEB.		MAR.		APRIL		MAY.		JUNE.		JULY.		AUG.		SEPT.		OCT.		NOV.		DEC.		TOTALS.	
			S F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.
W.C.	William Morris ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	1	—	—	1	—	—	—	2	2
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—
		Mixed	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
	Pretoria Avenue ...	Boys	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	3	—
		Girls	—	—	1	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	3
		Infants	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	2	—	4
	Deaf Centre	... ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
E.	Maynard Road ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	1	1
		Infants	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	1	—	—	—	—	—	—	3	3	3
	St. Mary's	Girls	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2	—	2	2	5
		Infants	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	1	—	2	1	—	—	2	1	5	4
N.W.	Blackhorse Road ...	Boys	—	—	—	—	1	—	—	—	1	—	1	—	—	1	1	—	—	—	—	—	—	—	—	—	4	1
		Girls	—	—	1	—	—	—	1	—	—	—	1	—	1	—	—	—	—	—	—	1	—	—	—	—	4	1
		Infants	—	—	—	—	1	1	—	—	—	1	—	—	—	—	1	—	—	—	2	—	—	—	—	1	4	3
	Higham Hill	Boys	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	2	0
		Girls	—	—	—	—	1	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	3	0
		Infants	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	2	—	—	—	3	1
		Junior Mixed ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Temp. Infants ...	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
N.E.	Wood Street ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Girls	—	—	1	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	1	2
		Infants	—	—	2	—	—	—	—	—	2	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	4	1
	Joseph Barrett ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Infants	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	2	—
	Shernhall Street ...	Special (Girls) ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		„ (Boys) ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—
	St. George's	Mixed	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
C.	Coppermill Lane ...	Boys	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—
		Girls	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
		Infants	—	—	—	—	—	2	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	2	2
		Junior Mixed ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Mission Grove ...	Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7	—	1	—	—	—	—	—	8	—
		Infants	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	4	—	2	—	—	—	1	1	8	1
N.	Chapel End	Senior Boys ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Senior Girls ...	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—
		Infants	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	1	—	—	—	3	1
		Junior Mixed ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Selwyn Avenue ...	Senior Mixed ...	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	1	—	—	—	—	—	1	1	3
		Junior & Infants...	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	3	1	—	1	—	—	1	4	4
S.W.	St. Saviour's ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
		Girls	—	—	—	—	1	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	1	2	1
		Infants	—	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	1	—	—	—	1	1	4
	Markhouse Road ...	Boys	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Infants	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	2	2
		Junior Mixed ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—
S.	Queen's Road ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Girls	1	—	—	—	1	—	2	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	1
		Infants	1	1	—	1	—	—	—	3	—	2	1	—	—	—	—	—	—	1	1	1	—	1	—	1	3	11
	Gamuel Road ...	Boys	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Infants	—	—	—	—	—	2	1	—	—	1	—	—	—	—	—	—	—	—	1	—	1	—	—	—	3	3
	Marsh Street ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	1	—	—	—	—	—	—	2	1
	Edinburgh Road ...	Junior Mixed ...	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	1	—	1	—	—	—	—	—	3	1
E.C.	Forest Road	Boys	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	2	—
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—
		Infants	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—
	Higher Elementary ...	Boys	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	2	—
		Girls	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
		Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Winns Avenue ...	Girls	—	—	—	—	—	1	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	2	1
		Infants	—	1	—	—	1	—	—	—	—	—	—	—	—	1	1	1	1	—	—	—	—	—	2	1	5	4
		Junior Mixed ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—
		TOTALS ...	6	3	11	3	10	7	9	3	7	8	7	1	6	7	5	3	24	10	18	8	7	5	7	15	117	73
		CASES NOTIFIED	13	9	20	7	24	16	16	11	18	12	21	3	16	8	13	7	33	16	34	12	12	8	12	29	232	138

"Special care should be taken that no child attends school from a Measles infected house, unless the sufferer is properly isolated."

The same regulations apply to Whooping Cough.

The preceding tables show the numbers of children who were affected with Scarlet Fever, Diphtheria, Measles, and Whooping Cough at the different Schools

MENTALLY DEFECTIVE CHILDREN.

These attend the Shernhall Street Centre, and have been individually examined during the year, the parents being usually present by invitation. The Centre has accommodation for 65 boys and 65 girls, with an average attendance of 84. The children are of very poor social status, and many of them live at long distances from the Schools. In consequence irregular attendance is common, although the children are provided with free passes on the Municipal trams, and Attendance Officers supervise their coming and going to and from the School. Heretofore the standard adopted for differentiating the feeble-minded from the normal child was not high, and in consequence a number of children were admitted that proved eventually unsuitable for the Schools.

At my examination of the children in September, I advised the exclusion of 17 of those in attendance, but pending an expected visit of Dr. Eicholtz this recommendation was not carried out until January of this year.

In 1909 an effort made to establish an After-Care Committee was unsuccessful, but the Head Teacher of the Girls' School has during 1910 held weekly a social evening for those girls who have left the school, and thus keeps in touch with them. Twelve of the former pupils attend more or less regularly, and Miss Firman has been so far fairly successful in her efforts on their behalf. In November she had a sale of the articles made by the children, which realized £1 19s. 9d.

Sixteen shillings profit made was distributed among the girls.

With the help of friends the Head Teacher was also able to give two "treats"—one in the Forest and one at the School—which were much appreciated by the girls.

Only a small percentage of children admitted to Special Schools can be expected to do well in after life. So far about 40 per cent. of our boys and 12 per cent. of our girls are "doing well." Feeble-minded children remain so permanently, and only with kindly supervision can they be expected in after life to become self-supporting.

DEAF AND DUMB CHILDREN.

The average number of these children in attendance is 21.

They are taught at a Special Centre under the care of a master and mistress, and the work of that School is excellent in its results.

The children are certified for by me, and were inspected during the year.

METHODS EMPLOYED OR AVAILABLE FOR TREATMENT.

As already recorded, an Ophthalmic Surgeon now deals with all vision defects, and sanction to an expenditure up to £25, if necessary, for the gratuitous provision of spectacles has been obtained.

There is a local Children's Hospital and General Dispensary voluntarily supported, but neither makes any provision for dealing with the defects common to school children, and treatment at the Hospital, except in the case of accidents, can only be obtained by letter and recommendation.

In the 1910 report of that institution I notice that among the out-patients treated were 149 for eye, ear and nose diseases, 626 for dental trouble, and presumably 96 were operated upon for Tonsils and Adenoids.

Following upon inspection, the parents of all children with serious defects are advised personally or by letter to seek advice and treatment from the family doctor and in many instances this is carried out.

Very poor parents and those with large families are persuaded with difficulty as to the necessity for the removal of conditions which do not make their children obviously ill, and a small percentage of them fail to do anything, but the great majority take their children to the London Hospitals and have treatment for such conditions as Adenoids and Ringworm.

To keep the children under observation, until a remedy is effected, the procedure detailed in last year's report was carried out, and to the teachers a great deal of credit is due for the trouble entailed in supervising the children and for the results obtained.

Summarised, the percentage of the commoner defects remedied was as follows:—

Schools.	Cleanliness of Head & Body.	Nose and Throat.	Teeth.	Tonsils and Adenoids.	External Eye Disease.	Vision.	Discharging Ears.	Various.
Boys	100	50	40·5	53·8	66·6	46·07	40	51·06
Girls	65·8	14·2	23·8	31·5	50	55·9	44·4	47·6
Infants ...	75	37	33	43·5	57	80	44	64

The following tables show, for individual schools, the numbers of children found with defects, the nature of them and the number remedied, as shown from the schedules returned by the Head Teachers:—

MEDICAL INSPECTION OF SCHOOL CHILDREN.

Summary of Teacher's Returns of Forms Nos. 1, 2, 3 *and* 4.

BOYS' SCHOOLS.

SCHOOL.	Number Examined.	Number with defects.	NATURE OF DEFECT.														Percentage of cases remedied.	Left School.	Still unremedied.	Visits arising out of.
			Cleanliness. Head & Body.		Nose and Throat.		Teeth.		Tonsils and Adenoids.		External Eye Disease.		Vision.		Discharging Ears.		Various.					
			No.	No. Remd.	No.	No. Remd.	No.	No. Remd.	No.	No. Remd.	No.	No. Remd	No.	No. Remd.	No.	No. Remd	No.	No. Remd.				
Winns Avenue ...	178	16	1	1	—	—	3	—	1	—	1	—	8	2	—	—	3	2	40·4	12	12	29
		22	—	—	—	—	4	1	—	—	—	—	18	10	—	—	3	1		4	13	
Chapel End ...	106	5	—	—	—	—	2	2	—	—	—	—	2	1	—	—	2	—	61·5	2	3	13
		7	1	1	—	—	2	1	—	—	2	1	1	1	—	—	1	1		—	2	
Blackhorse Road ...	39	5	—	—	—	—	1	—	—	—	2	1	4	2	—	—	—	—	37·5	2	4	3
		1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—		1	1	
Higham Hill ...	34	8	3	3	—	—	2	1	2	2	—	—	—	—	—	—	1	—	75·0	7	2	2
Markhouse Road ...	19	5	1	1	—	—	2	—	—	—	2	2	3	2	—	—	—	—	62·5	3	3	4
Coppermill Road ...	18	1	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	33·3	—	—	6
		2	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—		2	2	
Gamuel Road ...	50	12	2	2	—	—	2	—	—	—	—	—	5	2	—	—	3	3	53·5	—	5	15
		2	—	—	—	—	—	—	—	—	—	—	1	—	—	—	2	1		2	2	
Pretoria Avenue ...	23	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	2	50·0	2	2	3
Queen's Road ..	34	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	33·3	1	1	4
		8	—	—	—	—	—	—	—	—	—	—	6	3	—	—	1	—		1	5	
St. Saviour's ...	15	4	—	—	—	—	—	—	—	—	2	1	—	—	—	—	2	1	50·0	1	2	2
Marsh Street ...	42	5	1	1	—	—	2	—	—	—	—	—	2	1	—	—	—	—	28·5	—	3	11
		2	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—		2	2	
Maynard Road ...	177	20	3	3	—	—	4	3	—	—	2	2	8	4	2	1	4	2	65·2	2	8	26
Joseph Barrett ...	92	13	—	—	—	—	2	1	1	1	—	—	5	3	—	—	5	3	60·0	—	5	15
		4	—	—	1	1	—	—	1	—	—	—	3	3	—	—	2	—		—	3	
Higher Elementary .	149	23	2	2	1	1	2	2	2	1	1	—	11	5	2	—	3	2	54·1	7	11	15
William Morris ...	96	17	2	2	—	—	4	1	2	—	—	—	7	1	3	1	1	—	26·3	8	14	18
Wood Street ...	153	22	4	4	—	—	3	3	2	2	2	2	11	5	2	1	2	2	73·0	1	7	17
Forest Road ...	89	15	2	2	2	—	—	—	2	1	4	3	5	2	1	1	5	4	61·9	2	8	11
Totals ...	1314	224	23	23	4	2	37	15	13	7	18	12	102	47	10	4	47	24	—	62	120	194
Percentage remedied—			100·0		50·0		40·5		53·8		66·6		46·07		40·0		51·06					

MEDICAL INSPECTION OF SCHOOL CHILDREN.

Summary of Teacher's Returns of Forms Nos. 1, 2, 3 *and* 4.

GIRLS' SCHOOLS.

SCHOOL.	Number Examined.	Number with defects.	NATURE OF DEFECT.																Percentage of cases remedied.	Left School.	Still unremedied.	Visits arising out of.
			Cleanliness. Head & Body.		Nose and Throat.		Teeth.		Tonsils and Adenoids.		External Eye Disease.		Vision.		Discharging Ears.		Various.					
			No.	No. Remd.	No.	No. Remd.	No.	No. Remd.	No.	No. Remd.	No.	No. Remd.	No.	No. Remd.	No.	No. Remd.	No.	No. Remd.				
Winns Avenue ...	108	11	6	5	—	—	2	—	—	—	—	—	1	1	1	—	2	—	63·6	2	6	13
		20	9	9	1	—	3	1	2	1	1	1	5	3	—	—	—	—		4	6	
Chapel End ...	106	19	17	12	—	—	2	—	—	—	1	—	3	1	—	—	2	1	51·5	8	11	11
		32	24	13	1	—	3	—	1	—	1	—	6	4	1	—	2	2		9	20	
Blackhorse Road ...	77	25	9	4	—	—	2	—	2	1	1	—	6	4	1	—	7	3	58·9	5	16	16
		9	5	5	—	—	1	1	—	—	1	1	2	2	—	—	2	—		4	2	
Higham Hill ...	42	16	14	14	—	—	—	—	—	—	1	1	1	1	—	—	3	3	90·3	9	—	6
		8	4	4	—	—	—	—	—	—	1	—	6	4	—	—	1	1		5	3	
Markhouse Road ...	21	3	3	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	All Left.	3	3	34
		11	8	—	—	—	—	—	2	—	—	—	3	—	1	—	—	—		11	11	
Coppermill Road ...	36	7	2	—	—	—	—	—	1	—	1	1	5	2	—	—	—	—	25	5	6	11
		7	3	—	—	—	2	—	—	—	—	—	—	—	—	—	2	1		6	—	
Gamuel Road ...	36	13	10	9	—	—	1	1	—	—	1	1	2	2	1	1	—	—	86·3	2	1	6
		5	2	2	—	—	2	1	1	1	—	—	1	—	—	—	1	1		2	2	
Pretoria Avenue ...	36	9	6	2	2	1	1	—	—	—	—	—	1	—	—	—	1	—	38·4	5	8	5
		2	1	1	—	—	—	—	—	—	—	—	1	1	—	—	—	—		—	—	
Queen's Road ...	24	4	3	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	All Left except 1.	4	4	3
		4	3	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—		3	4	
Mission Grove ...	31	15	14	14	—	—	1	—	—	—	1	—	1	—	—	—	—	—	70	—	3	6
		2	2	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—		2	2	
St. Saviour's ...	8	3	2	1	—	—	—	—	1	—	—	—	1	1	—	—	—	—	50	—	2	5
Maynard Road ...	122	25	12	11	1	—	2	—	1	1	1	1	7	3	2	1	2	2	67·8	5	9	23
St. Mary's	70	23	12	6	1	—	3	—	2	—	—	—	6	5	—	—	4	—	39·2	—	17	18
Joseph Barrett ...	96	32	21	15	—	—	—	—	1	—	1	—	10	3	—	—	7	1	48·7	9	20	21
Higher Elementary	44	12	6	3	1	—	3	1	1	1	—	—	3	1	—	—	—	—	42·8	5	8	14
William Morris ...	91	30	19	9	—	—	2	2	1	—	1	1	8	4	—	—	3	3	55·8	7	15	15
Wood Street ...	109	54	44	35	—	—	2	2	1	—	—	—	9	8	2	2	3	2	80·3	5	12	26
Forest Road ...	77	22	14	7	—	—	6	1	2	1	1	—	3	2	—	—	—	—	42·3	6	15	5
Totals ...	1134	423	275	181	7	1	42	10	19	6	14	7	93	52	9	4	42	20		126	206	238
Percentage remedied—			65·8		14·2		23·8		31·5		50		55·9		44·4		47 6					

MEDICAL INSPECTION OF SCHOOL CHILDREN.

Summary of Teacher's Returns of Forms Nos. 1, 2, 3 *and* 4.

INFANTS' SCHOOLS.

SCHOOL.	Number Examined.	Number with defects.	NATURE OF DEFECT.																Percentage of cases remedied.	Left School.	Still unremedied.	Visits arising out of.
			Cleanliness. Head & Body.		Nose and Throat.		Teeth.		Tonsils and Adenoids.		External Eye Disease.		Vision.		Discharging Ears.		Various.					
			No.	No. Remd.	No.	No. Remd.	No.	No. Remd.	No.	No. Remd.	No.	No. Remd.	No.	No. Remd.	No.	No. Remd	No.	No. Remd.				
Winns Avenue ...	296	51	24	19	—	—	5	5	2	1	9	7	2	1	—	—	12	12	76·3	2	9	25
		22	5	4	1	—	2	1	3	1	5	3	2	1	—	—	4	3		1	9	
Chapel End ...	321	57	34	28	1	1	2	1	1	—	2	2	1	1	—	—	1	—	68·6	2	9	25
		44	16	14	2	1	6	1	4	2	8	4	—	—	1	—	7	4		—	18	
Blackhorse Road ...	196	35	19	14	1	1	5	1	1	—	4	2	1	—	1	—	5	2	50·8	3	14	11
		21	11	6	—	—	2	—	2	—	1	1	—	—	—	—	7	4		4	9	
Higham Hill ...	230	58	35	27	—	—	8	2	2	1	5	3	—	—	—	—	9	8	63·5	16	28	12
		36	18	17	1	—	5	—	3	1	4	—	—	—	—	—	6	2		1	17	
Higham Hill Temp.	29	11	4	4	—	—	4	1	3	1	—	—	1	1	—	—	2	1	57.1	4	6	4
Markhouse Road ...	201	50	37	35	—	—	4	4	1	1	1	1	5	5	1	1	6	5	83·8	4	3	25
		37	22	16	1	—	3	1	1	—	6	2	—	—	1	1	10	6		2	18	
Coppermill Road ...	249	24	10	10	1	—	3	1	2	1	3	—	2	2	—	—	5	2	64·7	2	10	11
		23	12	9	1	1	4	1	—	—	6	4	—	—	1	1	1	1		8	8	
Gamuel Road ...	209	54	41	25	—	—	6	2	3	1	4	3	4	3	1	—	3	2	48·3	2	26	26
		25	15	2	2	1	4	1	1	1	3	1	—	—	—	—	2	1		2	20	
Pretoria Avenue ...	215	26	16	11	—	—	6	3	4	2	2	2	3	3	—	—	1	1	59·2	13	10	11
		22	6	5	—	—	4	2	1	—	3	2	—	—	1	—	7	1		—	12	
Queen's Road ...	293	46	19	18	—	—	8	7	6	4	3	2	7	5	2	2	2	2	84·1	1	7	19
		16	6	6	—	—	—	—	6	4	1	1	—	—	1	—	2	2		—	3	
Mission Grove ...	210	51	21	20	3	2	8	—	7	2	3	1	6	5	2	—	5	2	48·8	18	23	9
		22	10	8	2	—	3	—	5	—	5	1	—	—	—	—	5	1		2	20	
St. Saviour's ...	76	17	10	9	1	—	1	—	2	1	3	3	1	1	1	1	2	1	62·1		5	7
		11	3	1	1	—	5	2	4	1	1	1	1	1	—	—	1	1		1	9	
Maynard Road ...	253	30	9	8	—	—	5	2	3	3	1	1	7	6	1	1	2	2	63·8	1	5	31
		19	6	2	1	1	6	—	1	—	3	3	—	—	1	—	1	1		—	12	
St. Mary's	90	7	2	1	—	—	—	—	—	—	2	2	2	1	—	—	—	—	26·9	2	2	14
		8	12	1	2	1	3	—	1	—	—	—	—	—	1	—	1	1		—	7	
Joseph Barrett ..	196	39	23	18	—	—	4	2	2	1	2	1	6	4	1	—	6	6	61·9	5	12	21
		22	10	7	1	—	5	—	5	3	3	1	—	—	—	—	3	1		1	15	
Wood Street ...	79	34	27	20	—	—	4	2	1	—	4	3	—	—	—	—	3	2	69·2	1	12	15
Forest Road ...	344	42	22	9	1	—	11	3	1	1	2	—	—	—	1	1	1	1	38·5	—	24	25
Totals ...	3487	960	505	374	23	9	136	45	78	33	99	57	51	40	18	8	122	78		98	382	291
Percentage remedied—			75·0		37·0		33·0		43·5		57·0		80·0		44·0		64·0					

The following table shows the schools visited and the children inspected at the request of the Head Teachers :—

Schools visited and numbers of children inspected by the Medical Officer of Health at the request of the Head Teachers for the reasons alleged.

Name of School.	Dirty Heads & Bodies.	Defective Vision.	Heart Weakness.	Otorrhœa.	Defective Hearing.	Enlarged Tonsils & Adenoids.	Tuberculosis.	General Weakness.	Chorea.	Various.	Totals.
Winns Avenue ...	1	8	1	2	3	5	—	1	—	5	26
Chapel End ...	1	8	4	—	2	—	—	—	1	2	18
Blackhorse Road ...	1	6	—	2	2	—	—	—	—	1	12
Higham Hill ...	14	2	—	—	3	4	—	—	—	4	27
Markhouse Road ...	12	11	—	—	—	2	1	2	—	11	39
Coppermill Road ...	1	—	—	—	—	—	—	—	—	—	1
Gamuel Road ...	1	5	—	—	—	—	—	—	—	4	10
Pretoria Avenue ...	—	16	1	2	3	2	1	2	1	7	35
Queen's Road ...	7	—	—	—	1	—	—	—	—	1	9
Mission Grove ...	—	1	1	—	2	5	—	—	—	2	11
St. Saviour's ...	5	13	2	1	2	2	1	—	—	4	30
Edinburgh Road ...	—	1	1	—	—	1	—	—	—	1	4
Maynard Road ...	—	4	—	1	—	4	1	1	1	4	16
St. Mary's	—	1	1	—	1	3	—	—	—	6	12
Joseph Barrett ...	21	2	—	—	1	—	—	—	—	2	26
Higher Elementary	—	3	—	—	—	1	—	—	1	1	6
William Morris ...	10	7	—	—	8	1	—	1	—	1	28
Wood Street ...	5	3	—	—	—	1	—	—	—	—	9
Forest Road ...	8	6	—	—	1	1	—	—	—	4	20
Selwyn Avenue ...	—	9	—	—	2	1	—	1	—	2	15
Totals ...	87	106	11	8	31	33	4	8	4	62	354

Arising out of the statutory and other inspections of school children, a good deal of home visiting was undertaken by the School Nurse and other members of the Public Health Staff.

Visits made in connection with Medical Inspection of School Children by the School Nurse.

Result.	Defective Vision.	Strabismus.	Blepharitis.	Nose and Throat.	Otorrhœa.	Other Reasons.	Totals.
Secured Treatment ...	202	41	16	39	19	24	341
Promised „ ...	110	51	—	27	1	8	197
Refused „ ...	3	1	—	—	—	1	5
Cannot afford „ ...	39	10	—	—	—	—	49
Nothing done	55	3	—	12	1	2	73
Left the District ...	26	12	—	6	—	3	47
Not at Home... ...	34	8	—	6	—	1	49
	469	126	16	90	21	39	761

Children seen by the Medical Officer of Health at the Town Hall during 1910.

Defects.	Number.		Totals.
	Allowed to go to School.	Excluded.	
Ringworm	191	404	595
Impetigo	43	79	122
Scabies, Eczema and Skin Diseases...	59	90	149
Dirty and Verminous Heads	58	70	128
Chorea	6	19	25
Discharging Ears	14	14	28
Sore Throats and Adenoids	69	144	213
Mumps	4	38	42
Cold and Bronchitis	29	77	106
Whooping Cough	6	28	34
Defective Vision and Sore Eyes ...	36	61	97
Rheumatism	21	45	66
Heart and Anæmia	11	10	21
Tuberculosis	5	26	31
Various	454	323	777
	1006	1428	2434

The numbers given represent attendances and not individual children in many instances. For example, those children suffering from Ringworm average about 70, but these children, once excluded, had to be repeatedly seen before their readmittance to school.

Visits made by the Women Inspectors and Others in connection with Medical Inspection, and Children seen by the Medical Officer of Health at the Town Hall during 1910.

	Miss Davis.	Miss Lamb.	Others.
Otorrhœa	—	47	—
Blepharitis	—	28	—
Malnutrition	4	3	—
Pediculosis and Nits	12	142	3
Defective Vision	3	69	—
Ringworm	5	49	88
Sore Throat	6	38	81
Weak Chest and Anæmic	—	4	—
Adenoids	16	10	—
Impetigo	2	22	—
Scabies	2	12	—
Whooping Cough	115	55	27
Bad Teeth	—	12	—
Phthisis (?)	11	—	—
Enlarged Tonsils	—	25	—
Measles	76	21	119
Chorea	—	2	—
Deafness	—	3	—
Generally Dirty	—	9	—
Chicken Pox	—	47	—
Various	—	27	—
Totals	252	625	318

Total ... ... **1195.**

EXCLUSION OF CHILDREN FROM SCHOOL.

During the year 115 children were excluded under Article 53 (6) of the code. Ninety of them were the result of the routine inspections, and 23 from those carried out by me.

The numbers are for those inspected at the Schools, and do not include children seen and dealt with by me at the Town Hall.

The exclusions were as follows:—Ringworm, 18; Impetigo, 24; Dirty Heads and Body, 22; Mumps, 4; Scabies, 3; Sore Throat, 32; Scarlet Fever (?), 6; Various, 4.

REPORTS ON TEACHERS AND OTHERS.

Upon instructions from the Education Committee I visited, at their homes or saw at the Town Hall, 49 of the staff absent from duty, owing to illness—Teachers, 46; Caretakers, 3.

EMPLOYMENT OF BOYS OUT OF SCHOOL HOURS.

Of the 1,206 boys over 12 years of age inspected, 155 or 13 per cent. were at work out of school hours for varying periods.

Twenty-eight per cent. of these worked for 20 hours or over during school days, and 40 per cent. of these worked for 10 hours or more on Saturdays. The following table gives the information in full:—

BOY LABOUR, 1910.

SCHOOL.	12 years and upwards. Number examined.	Number engaged out of School hours.	Percentage engaged outside School hours of those examined.	Boys engaged out of School hours whose parents are skilled workmen.			Boys engaged out of School hours whose parents are unskilled workmen.			Boys with Father dead.			Number of boys engaged 20 hours and over during School days.	Number of boys engaged 10 hours and over on Saturday.	Number of boys engaged on Sunday.
				Number.	Average number in family.	Boys with defects.	Number.	Average number in family.	Boys with defects.	Number.	Average number in family.	Boys with defects.			
Winns Avenue ...	166	33	19·8	15	6·2	1	15	5·3	1	3	5·6	—	12	11	14
Chapel End ...	106	2	1·8	2	5·0	—	—	—	—	—	—	—	—	—	1
Higham Hill ...	34	7	20·5	2	8·5	—	5	7·0	—	—	—	—	2	3	—
Gamuel Road ...	37	7	18·9	3	5·6	1	2	5·5	1	2	10·0	—	1	3	1
Markhouse Road ...	17	4	23·5	2	6·0	1	2	7·0	2	—	—	—	2	3	1
Blackhorse Road ...	37	4	10·8	2	4·5	—	1	6·0	1	1	4·0	—	—	3	1
Marsh Street ...	40	10	25·0	5	7·4	1	5	6·2	—	—	—	—	3	5	2
Maynard Road ...	171	15	8·7	10	5·0	—	5	4·4	1	—	—	—	3	3	5
Higher Elementary	149	8	5·3	5	4·7	1	2	4·0	—	1	3·0	—	1	7	1
St. George's ..	28	2	7·1	—	—	—	2	10·5	—	—	—	—	1	—	—
Joseph Barrett ...	84	7	8·3	4	6·7	—	3	7·6	—	—	—	—	2	1	2
Wood Street ...	153	32	20·9	19	6·7	4	11	5·9	—	2	6·0	—	12	13	11
Forest Road ...	87	13	14·9	9	5·3	—	4	5·5	1	—	—	—	4	7	1
Selwyn Avenue ..	39	7	17·9	3	4·0	—	3	7·6	—	1	9·0	—	—	1	3
Queen's Road ...	28	1	3·5	1	7·0	—	—	—	—	—	—	—	—	1	1
Coppermill Road ...	13	1	7·6	1	5·0	—	—	—	—	—	—	—	—	—	—
Pretoria Avenue ...	17	2	11·7	2	4·5	—	—	—	—	—	—	—	1	—	2
Totals ..	1206	155	12·8	85	5·0	9	60	6·0	7	10	6·0	—	44	61	46