[Report of the Medical Officer of Health for Edmonton, UDC].

Contributors

Edmonton (London, England). Urban District Council.

Publication/Creation

[1925?]

Persistent URL

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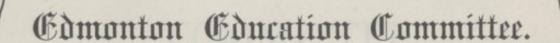
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REPORT

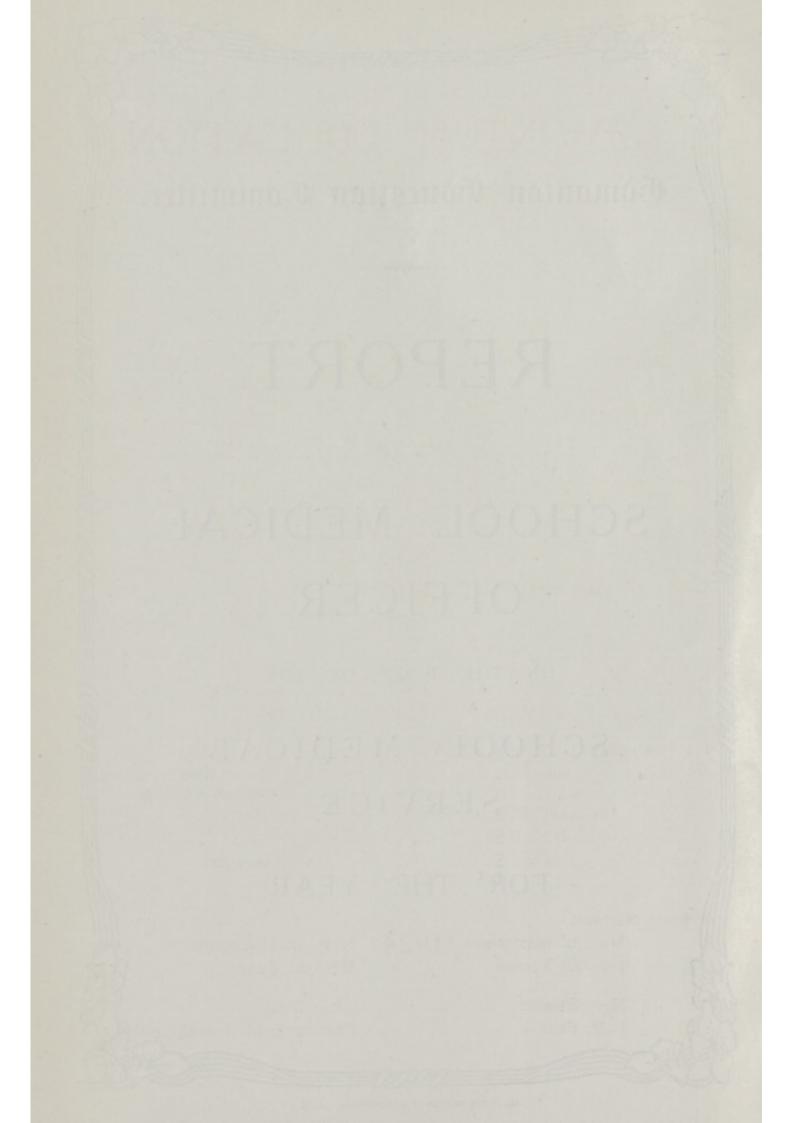
OF THE

SCHOOL MEDICAL OFFICER

ON THE WORK OF THE

SCHOOL MEDICAL SERVICE

FOR THE YEAR 1924.



EDMONTON EDUCATION COMMITTEE

1924.

Chairman Councillor Mrs. L. R. ITHELL. Vice-Chairman ... ,, A. J. G. HOLLYWOOD.

Councillors.

G. J. W. Tott.

MRS. M. L. KEY. J. ANTHONY.
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H. P. HARVEY. S. JENNER.

H. Barrass.
J. W. Sanders.
Mrs. E. A. Young.
J. Reid.

Co-opted Members (not being Councillors).

MRS. W. C. ELMS.

MISS E. SMITH.

SCHOOL MEDICAL STAFF.

H. W. Harding, M.D. (Lond.), D.P.H. ... School Medical Officer.
R. H. Strong, L.R.C.P., L.R.C.S. ... Assistant School Medical Officer (until November 27th).

MISS L. SMITH-CLARK, M.B., Ch.B. ... Opthalmic Surgeon. W. H. WILLIS, L.D.S., B.Sc. ... Dentist.

D. A. R. Aufranc, M.R.C.S., L.R.C.P., ... Dental Anaesthetist. L.D.S.

School Nurses.

MISS L. MATTHEWS. MISS M. HAZELTON.
MRS. C. TONKIN. MISS A. FAHY.

MISS BROOKS ... Clinic Clerk.

J. P. FARRAR ... Clerk for S. M. O. (half-time).

GENERAL INFORMATION.

NUMBER OF SCHOOLS AND ACCOMMODATION.

	DEPARTMENTS.				ACCOMMODATION.			
	Boys.	Girls.	Infants.	Mixed.	Boys.	Girls.	Infants.	Mixed.
Provided	 7	7	7	3	3,508	3,009	3,464	1,121
Non-provided	 2	2	2	I	518	662	667	336
TOTAL	 9	9	9	4	4,026	3,671	4,131	1,457

The Committee propose, with the sanction of the Board of Education, to write down the accommodation of the classrooms so that, as far as circumstances permit, the classes shall not exceed 50 on the rolls. On this basis the effective accommodation of Council Schools is 9,473 and non-provided schools 2,072, making a total of 11,545.

	March, 1921.	March, 1922.
Number of children on rolls	12,193	11,690
Average number on the rolls during the	e school year en	ding
March 31st, 1924		10,947
Average attendance same period		9,944
Births for the year 1911		1,847
,, ,, ,, 1920		1,921
Special Schools.		Accommodation,

66

80

Nassau House, Enfield Highway, for the feeble-minded, in

Deaf and Dumb Centre, Tottenham, in conjunction with

Tottenham, Hornsey, Wood Green and Enfield ...

conjunction with Enfield ...

To the Chairman and Members of the

Edmonton Education Committee.

LADIES AND GENTLEMEN,

The Report of the work carried out by the School Medical Service for the year 1924 is not bound with the Report of the Medical Officer of Health as in previous years, but is issued separately. The main reason for this is due to the fact that the latter Report must necessarily be delayed as certain figures given by the Registrar-General have to be incorporated in the latter, and these figures have in the past come to hand about the last week in March.

This will enable the necessary copies to be furnished to the Board of Education before April 1st—a point on which is laid great importance—and also the Report being in the hands of the Members of this Committee soon after the year in question, will probably be of greater interest.

It is with regret that I mention the loss which this Committee has sustained in the death of Dr. R. H. Strong, the Assistant School Medical Officer, who has occupied this post for over nine years. His previous wide experience in general practice fitted him well for its duties; his co-workers found in him a pleasant colleague and his little patients a real friend.

GENERAL CONSIDERATIONS.

The work of the School Medical Service embraces several activities, all working to one end, namely:—the health of the school child. Generally speaking, these activities may be classified under two headings:—(1) supervision, extending to each individual child and the detection of defects or of those conditions likely to lead to defects; and (2) the treatment and amelioration of these defects and conditions.

This work is a branch of Preventive Medicine which differs in its conception from that of the older term (Public Health), inasmuch as the individual as one of a group is considered as well as the environment. I need only mention the work carried out by various authorities:—for the nursing and pregnant mother; the child under five years; the person afflicted with consumption or venereal disease to illustrate my meaning. Incidentally, it sometimes appears as if the environment might possibly be neglected for the more fascinating work of looking after the individual.

This phase of the work has undoubtedly appealed to this Committee who, during the past year, has spent some time considering the various ways in which the weakly and defective child could be benefitted. The following have come into operation during the past year:—(1) The opening of another minor ailment clinic at the North end of the district, (2) the reservation of three places at a residential open-air school at the seaside for weakly boys, and (3) the formation of a special class for the partially blind and the myope—this latter opens on January 6th, 1925.

Other projects include a similar residential school for weakly girls, a complete scheme for orthopaedic treatment, an improvement in the arrangements made for the operation of tonsils and adenoids, and an open-air school.

The above will be discussed under their appropriate headings.

As occurred in other parts of the ccuntry, the birth-rate for Edmonton fell during the years of the war and during 1919: this meant a diminished number of infants being entered on the school registers year by year: the diminution during 1924 was masked by the decision of the Committee to admit children younger than five years; practically it meant that children who were 4½ by April 1st and October 1st could attend school for the summer and winter respectively.

The year 1920 was characterised by a heavy birth-rate which will be reflected in the increased numbers in the Infants' Departments during the coming year. Since then, however, the rate has fallen rapidly, and that for 1924 will probably prove less than 70% than that for 1920.

Nursery schools have not been established, but with the presence of a thriving Day Nursery in our midst, and children being admitted to school at 4½ years, one cannot say that there is a great need for such.

GENERAL HYGIENE.

The past year has not been characterised by a serious outbreak of any disease.

Scarlet fever and diphtheria have occurred in sporadic fashion until the Autumn months, when the incidence of both increased.

Measles, chicken-pox and whooping cough have occurred similarly, the latter shewing an increase during the last month of the year. A few cases of mumps occurred.

Encephalitis Lethargica or "sleepy sickness" at one time appeared to threaten an outbreak. The incidence of the disease had increased during the early months of the year in the northern part of England and in the spring months in London. The first case in Edmonton was notified in March, and altogether eight cases were notified, of whom three were school children.

I have since seen another child whose complaint was not recognised at the time, but in whom the after effects were conspicuous.

Fortunately the disease as an outbreak did not last long, but sporadic cases have been occurring in the country and in London ever since.

The mortality from the disease varies, but is heavy, while its sequælæ, affecting mind and body, are often most distressing.

Although a notifiable infectious disease, the source of the infection is usually impossible to trace; no apparent relationship existed between any of the cases notified.

Contacts of the sufferer living in the same house are excluded from school for three weeks.

Scarlet Fever.—Of 148 cases notified, 80 or 54 per cent. occurred in children of school age. During the summer holidays some mild cases occurred, and several children were discovered desquamating whilst attending school later. They apparently caused no spread of the complaint amongst their companions.

School contacts are seen by me at the Town Hall and are excluded for a fortnight; the patient is seen by me after discharge from the hospital and is returned to school on my certificate.

I should like to see all elder contacts returned promptly to school and for them to report to the Head Teacher every morning, and the Doctor at the Clinic every other day for a fortnight. It would be interesting to do this where the Heads are willing to co-operate, and carefully note results. **Diphtheria.**—All contacts under 14 years of age are seen by me and with the mother, have the throat, and if thought necessary, the nose swabbed. Scholars are thus returned to school after an absence of four or five sessions.

Measles.—These cases are visited by the nurses only when we receive early notice of the condition and know that no doctor is in attendance. To call at a house when the child has been away from school for seven days is to waste time; the diagnosis often cannot be confirmed and it is too late to suggest preventive measures. Visits paid to the homes for this and other infectious complaints were:—

Measles	 ***	***	314
Whooping cough	 		134
Chicken pox	 		164
Mumps	 		1

No schools or departments have been closed during the year. It is interesting to note that it will not be so easy in future to shut departments for infectious complaints and gain a 90% attendance grant.

Individual exclusions have been made under Article 53 (b) of the Code.

School Hygiene.—As a result of an enquiry made by one of the Committee, the following report on the ventilation of the schools was made in May:—

"All the schools are provided with accessory means of ventilation consisting of ceiling ventilators, Tobin's tubes, hoppers to the windows, etc. All these extra means of ventilation are utilised, and speaking generally, the Head Teachers report that they are able to ventilate the rooms without unduly lowering the temperature or creating undue draughts.

Exceptions are provided by Raynham Road Schools (all departments), where some of the rooms with a North aspect are difficult to warm in cold weather and hence cannot be ventilated properly; also in Brettenham Road Schools where similar conditions obtain. I reported the difficulty in warming some of the rooms in these two schools in my Annual Report for 1921.

Houndsfield Road Schools are exposed to certain winds, and it is sometimes difficult there to maintain a proper warmth and due ventilation. A similar remark applies to exposed rooms in the Silver Street and Montague Road Schools.

It is a practice in all the schools to flush the class-rooms and hall during drill and recess, except in most inclement weather.

It will be seen by the above that the means of ventilation are sufficient, but owing to difficulty in warming some of the class-rooms, it is impossible in cold weather to have the air changed as frequently as it ought to be.

Raynham Road School has open fire-places, Brettenham Road School has both open fire-places and hot-water radiators in the majority of the class-rooms."

The following are the improvements made during the past year:-

- (a) A Scheme was passed for replacing old long desks with dual desks in all schools, and one set of kindergarten chairs and tables in Infants' Departments. Loans have been sanctioned by the Board of Education and the Ministry of Health, and the work of refurnishing is now in progress.
- (b) Teachers' lavatories have been provided at Croyland Road Boys' and Raynham Road Boys' Departments.
- (c) The playground at Latymer Elementary School has been asphalted, also part of St. James' School Playground.
- (d) Removal of all semi-circular galleries in Infants' Departments at Eldon Road and Montague Road Schools.

The unsatisfactory state of St. James' playgrounds must be a source of loss of attendance due to children getting damp feet.

SUPERVISION AND THE DETECTION OF DEFECTS.

The Staff of the Medical Service number 11, as given on page 1; 4 doctors, 1 dentist, 4 nurses and 2 clerks. The School Medical Officer is also Medical Officer of Health and Supervisor for the Maternity and Child Welfare Committee; thus co-ordinating all the medical work carried out by the Council. The Assistant School Medical Officer carries out routine inspection and re-inspection at the schools and supervises the minor ailments clinics, whilst the School Medical Officer looks after the defective child. These latter are becoming more and more important, for they include all those children who are handicapped in the battle of life; the blind, the deaf and the halt—these and others come under this category.

The Oculist has one session weekly, and the Dentist has six, one of which is given to extraction under gas.

Routine medical inspection is carried out on the school premises and three different age groups are called up for inspection: (1) Entrants—all children who have not been inspected since entering the school, (2) Leavers—that is, children who have arrived at the age of 12 years, and (3) an intermediate group, those between the ages of eight and nine years.

Parents are duly informed and are invited to be present; their attendances naturally is greatest in the youngest group, namely 82 per cent.; it was 58 per cent. in the intermediate group and 37 per cent. in the leavers.

The number of parents objecting to the examination was two

As would be expected, the number of children who would be found unfit at this routine inspection and require exclusion from school would be very few. They numbered six in all, the causes of their unfitness being:—

German measles	 	 I
Body vermin	 	 I
Tonsillitis	 	 2
Febrile condition	 	 2

At the time of routine medical inspection, the Head Teachers are able to bring before the Doctor any child whom they suspect to be suffering from any ailment or defect. These are called "Specials," a term which includes all children other than those inspected at the appropriate age groups—for instance, those sent to the school clinic by parent, teacher or attendance officer. This definition of "Special" is necessary when interpreting Tables I and II.

It is thus seen that every child ought to be examined three times during its school career; at other times it can be seen when the doctor is on the school premises, or can be sent to the school clinic.

Doubtful infectious diseases are sent to the Town Hall to be seen by the School Medical Officer—this to obviate mixing with other children. That this is very necessary is shewn by the fact that I recently saw in one morning a case of diphtheria, a case of measles and a case of chicken-pox!

Re-inspection of children found to be defective is carried out usually about three months later. The names of all children with defects, whether for treatment or for observation, are entered into a special book—one for each school, and which is kept on the school premises. In the same book are

entered the names of those due for routine examination, but who were absent during the time the doctor was at the school. Thus on the visit for re-inspection, previous absentees automatically come up for inspection, thus saving wastage.

Defects not attended to are "followed up"—that is, a nurse calls at the home to see the mother, to find out the reason for non-treatment, to remove obstacles and to stiffen parental responsibility. A promise to have the defect seen to is a ready means of getting rid of the nurse, but the promise may not necessarily bear fruit! Or the mother is quite willing, but father's consent must be obtained—with the same result—no treatment. These visits during the year totalled 2,336.

The District with its Schools is divided in three areas, each nurse having her own schools and area. Each nurse has thus an opportunity to get into closer touch with scholar and parent, to know home conditions, and thus be of greater service to the child.

REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION.

Malnutrition.—The number of children found to be suffering from malnutrition is much about the same as in 1923. Although the number so found during routine inspection is lessened, the number of specials is increased.

A greater number each year is stated to require treatment, and of course there is less for "observation." The ability to give Cod Liver Oil Emulsion to those children who would probably benefit by its administration, probably accounts for this transference.

There are many factors underlying malnutrition besides want of food—namely: improper or badly cooked food, bad teeth (which parents refuse to have treated), improper clothing, going to bed late, overcrowded bedrooms, etc. A child I saw recently was badly clothed—she had six knitted woollen garments on her body, but her legs and the greater part of her thighs were bare!

The respective numbers of the above belonging to each age group were as follows:—

entage of
nspected.
5
11
8

In 1923, the Infants furnished 28 per cent. of the total; the leavers 30 per cent.; and the 8—9 year old group 42 per cent.

SKIN DISEASES.

Uncleanliness.—The figures for this year shew an improvement on those for 1923. In my Report for that year, I noted a serious relapse into those conditions which prevailed in the earliest years, and one is glad to note this improvement.

In this connection, it must not be forgotten that in 1921 there was a staff of five nurses and the half-time of a sixth, whereas during 1923 and 1924 there were four.

Dr. Cook, the Superintendent of the Isolation Hospital, furnishes me with monthly percentages of the number of verminous heads amongst those admitted during the month. Amongst the males it varied from nil to 75 per cent.; amongst the females from 18 per cent. to 100 per cent.

The work at the Cleansing Station is given under treatment, and also in Table IV., Group V.

Ringworm, both of the scalp and of the skin, shews a lessened incidence; Scabies or the Itch remains about the same, whilst there is a drop in Impetigo, a contagious skin complaint, and other diseases of the skin.

Diseases of the Eye. — Inflammation of the lids and of the conjunctiva—both external eye diseases—furnish a slightly diminished number as compared with 1923; but the cases for that year were double those found in 1920.

Only 11 cases of Corneal trouble were met with.

Defective Vision shews a slight increase amongst the routine cases and a marked increase, 50 per cent., amongst the specials. It is difficult to account for this increase, and I am unable to offer an explanation.

Diseases of the Ear.—There was a slight decrease in the number of children found to be suffering from deafness apart from otitis, whilst the total number of cases of this latter complaint which came under observation numbered 229; for 1923 the corresponding figure was 234.

As many of these cases are chronic, it will be realised that the routine cases of one year will become the specials for the next two years, and conversely a proportion of the specials of one year will furnish those in the routine group for next year.

Although this condition of "running from the ear" is treated at the Minor Ailments Clinic, it is by no means a "minor ailment." It is indeed a very serious complaint, and, being a potent cause of deafness, handicaps the sufferer in many ways during life, apart from the actual danger to life. It is high time it was lifted out of the category of "minor ailments."

Amongst preventive measures may be mentioned the removal of septic tonsils and septic teeth, handkerchief drill, correct breathing through nose, better ventilation of rooms and similar conditions which mean a healthy naso-pharynx.

Nose and Throat.—This year's figures relating to the number of cases of enlarged tonsils and adenoids are about the same as in previous years. It will be interesting to note whether the excessive wet of this year will increase or decrease this affection for next year—the increase due to cold and naso-pharngeal affections, and the decrease due to a cleaner atmosphere.

"Other conditions" include mostly sore throats and nasal catarrhs.

Dental Defects.—The number of these defects found at routine inspection form a lower percentage than that of last year. Whether it is the result of treatment or whether it is simply a matter of luck, the reports for following years will shew. The incidence amongst the various groups are as follows:—

Infants 147 of 1,104 inspected ... 13 per cent.

Intermediate 70 ,, 990 ,, ... 7 ,,

Leavers 37 ,, 1,053 ,, ... 4 ,,

Heart Disease.—The number of cases of Organic Heart Disease coming under observation this year is only half that for last year; there being 30 cases last year, and 14 this year.

Theoretically this number should be fairly constant, as all heart cases should be under observation (some, of course, perhaps requiring treatment), either as routine or special cases.

Diseases of the Lungs. (Non-Tubercular).—The commonest of these will always be Bronchitis, and this complaint will always be responsible for a certain number of absentees in the infant departments. Given a few bad days of fog with an impure atmosphere, the number of cases of bronchitis rapidly goes up.

Another potent cause is an outbreak of Influenza, but we have been fairly free from this complaint during the past year.

Pulmonary Tuberculosis.—The age of the School Child, 5 to 14 years, is a period of life during which the incidence of consumption is low. Few cases are found, and in many, the symptoms are not characteristic.

The Tuberculosis Dispensary is in Silver Street, near the School Clinic, and all doubtful cases are referred to the Tuberculosis Officer.

Further details are mentioned under Treatment.

Non-Pulmonary Tuberculosis.—Enlargement of the glands of the neck in children is fairly common, and it is possible that tuberculosis is a more frequent cause than one suspects. One can only be certain of the diagnosis when the inflammatory trouble has so far persisted as to cause changes outside the gland, and it is likely that, in some cases, the trouble is arrested before reaching that stage. Eleven cases recognised as glandular tuberculosis came under observation.

Nervous System.—Epilepsy is not a common condition; whilst Chorea furnished 12 cases, the same number as last year.

"Other Nervous" conditions will remain with us so long as mothers practice suggestion, by constantly reiterating a string of symptoms supposed to be of nervous origin in the child's ears.

Deformities due to rickets numbered seven only, whilst other forms of deformities met with during routine inspection numbered 16, 12 of these latter having received appropriate treatment in the shape of splints, high boots, etc.

Other Diseases.—This is a heterogeneous group, embracing alimentary disorders, such as indigestion, abdominal pains, worms, constipation; chills, rheumatic pains, and injuries to joints, such as sprains, etc., etc.

MEDICAL TREATMENT.

Minor Ailments.—Until the Summer holidays, treatment for minor ailments was carried out in the mornings at Pymmes Park Clinic. Dr. Strong attended four mornings, whilst on the other two—Tuesday and Thursday—two nurses attended to carry out treatment. Owing to the large number of children attending Wednesday and Saturday mornings, the three nurses were required.

After the summer holidays, an additional clinic was started at Honndsfield Road School in the Northern part of the district, Pymmes Park Clinic being in the South. This is favourably situated for four of the schools, and the number of children treated is about one quarter to one third of the whole.

The following re-arrangement of the work was necessary:—both clinics are held every school afternoon, the Doctor being present at Pymmes Park Clinic on Monday, Wednesday and Friday, and at the Houndsfield Clinic on Tuesday and Thursday, there being two nurses at the former and one at the latter.

Saturday morning's Clinic is held as usual at Pymmes Park.

The opening of Houndsfield Road Clinic has been beneficial in more ways than one—it has saved the scholars a long walk as well as their time, it enables the younger child to attend in the bad weather, which they could not otherwise do, and the afternoon lessons which are disturbed are perhaps not quite as important as the morning ones.

The number of attendances at Pymmes Park Clinic for the year was 30,268; at Houndsfield School Clinic, 2,210; making a total of 32,478.

The total attendances for the previous year, 1923, were 34,400.

The scale of charges introduced by the Committee, in June, 1923, remains the same, namely:—

(1) Free treatment in those cases where the weekly income after deducting rent, does not exceed the following allowance:—

S. d.

Parents—Father 1 0 0

Mother 0 12 0

Each Child 0 6 0

(2) If the family be in excess of this,

Free treatment for the first two weeks;

1/- for a longer period up to three months;

2/- ,, ,, six ,,

Tonsils and Adenoids.—The operative treatment of enlarged tonsils and adenoids is carried out at the Prince of Wales' Hospital, Tottenham, the Committee paying 10/- per case.

A charge of 5/- is made to those parents whose income is above the scale just mentioned; free to others.

The Council's Ambulance takes the children home from the Hospital after operation, a nurse accompanying them, and a nurse visits the patient on the following day.

The child is seen 10 days later at the clinic to see that the operation is satisfactory, and to determine whether the child is fit to return to school.

Before operation, septic teeth are attended to by the Dentist and the mouth thus put into a healthy state.

Enucleation is practised, and the results have been extremely satisfactory.

This operation is now regarded more in the nature of a major operation than ever before; the Operator must be a Specialist, and the Anæsthetist must have special qualifications for his duties; greater attention is paid to concomitant circumstances, such as the condition of the mouth, whether free from sepsis or not, and the environment to which the patient returns.

Owing to the overcrowding which so often exists, this Committee will have to tackle this problem by arranging to have kept in the Hospital for 48 hours, all tonsil and adenoid cases who after operation would have to go back to insanitary conditions.

The Authorities at Great Ormond Street Hospital ask for such a sanitary report prior to operation, and they do not hesitate to keep over the night those cases concerning whose homes an adverse report is given.

There were 138 cases operated on under this Authority's scheme during the year.

Skin Diseases.—These complaints are treated at the Minor Ailments Clinic, as well as external eye diseases, such as inflammatory conditions of the lids, etc., and cases of otorrhoea; these are the conditions which pile up the clinic attendances.

Cases of ringworm of the scalp are sent to the Prince of Wales' Hospital for X Ray Treatment. Eleven cases were sent during the year, the charge per case to this Authority being 25/-. No charge is made to the parent.

Cleansing Station.—This is situated in the Town Hall yard, and one session per week is allocated to each of the three nurses for the cleansing of verminous children and the treatment of scabies. Unfortunately, it is frequently the same children who require the cleansing, but I impress on the nurses that their duty in this matter is not necessarily to relieve the mother of all responsibility in keeping their children clean, but rather to lend a helping hand to those mothers who have been bowled over by illness, etc., and where the condition is an unfortunate accident, and in those cases where there is no mother and the responsibility falls on an elder sister, perhaps herself still at school.

As will be seen by Table IV., Group V., there has been one case in which the parent has been before the Court for non-attendance at school due to exclusion for verminous conditions, and where I gave orders that no further cleansing should be undertaken.

Defective Vision and Squint.—Dr. (Miss) Smith-Clark attends one session weekly to see cases of the above, whilst an optician attends the same time to receive the prescription and take measurements for the spectacles.

No charge is made for the services of the Oculist, but parents whose income is above the scale previously mentioned have to pay the full cost of the spectacles.

In a few cases, owing to special circumstances, the Committee have remitted the cost on the application of the parent.

The prices paid for the spectacles are fixed by contract with a local optician. In July the Committee decided to purchase a stronger frame at an extra cost of 1/3; the prices of new spectacles and repairs are now as follows:—

	0.12 t	02.D.	2.25 t	0 4.D.	4.25 t	06.D.	6.25 t	08.D.
	s.	d.	S.	d.	S.	d.	S.	d.
Steel specs. and spheres	3	9	4	3	4	9	5	3
Steel specs. and plano-cyls	5	9	6	9	7	9		9
Steel specs. and sphero-cyls.	6	9	7	9	8	9	10	
One new sph. lens only		3	I	6		9		0
One new plano- cyl. lens only		0	2	6		0		6
One sphero-cyl. lens only	2		3	0		6	4	
New steel frame to	existing	g lenses					2	

For round lenses add 6d. per pair to above prices.

The spectacles supplied are verified by the Oculist, and the Head Teachers of the various departments are notified monthly as to those children who are required to wear glasses whilst doing school work.

Special Class for the Myopes and Partially Blind.—This class will be opened on January 6th, 1925.

A room at Montagu Road School Infants' Department, will be utilised. The school is fairly central (about 10 minutes' walk from the tram route) and the children will have the opportunity of receiving oral lessons in the other departments of the school.

Arrangements have been made to provide a hot mid-day meal for the scholars at a cost to the parents of 3d.—this to be remitted in the case of those who would be entitled, on account of penury, to the free meals.

The following are the cases selected for attendance:--

			В.	G.
Myopes		 	I	9
Albino	***	 	0	I
Retinitis		 	1	2
Congenita	Cataract	 	0	I

Several of the parents have however, refused to allow their children to attend, as attendance at this, as at other special schools, is required until the age of 16 years.

The care of the adult blind is a duty of the County Authority, and the future will undoubtedly see a scheme linking the work of Local Educational Authorities to that of the County, making for a continuity of educational assistance for those who come under this category.

Regarding myopic or short-sighted children, it is only those who shew a marked state of this condition, or those who shew progressive deterioration who require different educational treatment; and it does not necessarily mean that such a myope would remain at the school until the age of 16 years. It is possible that the myopia may become stationary and enable the child to return to the ordinary school.

On the other hand, there would be some who would have to be taught Braille and whose education and special training would have to be continued after the age of 16 is reached.

This Authority is responsible for three blind children; one boy and two girls at the East London Home for the Blind, Clapton.

Dental Defects.—The six sessions for dental treatment comprise three mornings and three afternoons, one of the afternoons being devoted to extraction under gas, Dr. Aufranc giving the anæsthetic.

Occasional sessions are spent at the schools, examining the infants and re-inspecting those among the older children who have already been through the Dentist's hands.

It would be a boon if all the younger children could be seen soon aftertheir admission to school, but that is impossible with a dentist working half-time; as it is, only about half the schools or less are visited during the course of a year. There is one advantage accruing however; the Maternity and Child Welfare Committee have recently established dental treatment for nursing mothers and children under 5 years. There is only one session a week, but if mothers would only take advantage of it for their young children, it is hoped that its good work would be shewn in a lessened number of entrant scholars requiring treatment, and thus enable the Dentist to visit a greater number of the schools.

The charge to parents is nominal: 6d. per attendance, but not to exceed is.: for those coming under the scale previously mentioned, treatment is free.

Tuberculosis.—During 1924 there have been notified as suffering from tuberculosis 24 children of school age:—

		Lungs	Non pulmonary
Boys		11	2
Girls	***	8	3

At the time of writing we have the names of 101 children of school age on the tuberculosis register. Many of these cases are quiescent, and it will be seen from Table III. the number still regarded as in an active condition.

I am indebted to Dr. Evans, the Tuberculosis Medical Officer for the District, for help in preparing these figures in Table III., and also for his willingness to see children referred to him from the school clinic and for his advice regarding them.

It will be noted that 22 children are being treated in Sanatoria at the present time, and that some children with the lung trouble regarded as still in an active condition—although not infectious—are attending school.

It is a matter always worthy of consideration, as to whether such a child should be excluded from school or should be allowed to attend.

During the summer weather, the child, if excluded, could have the benefit of practically living out of doors even in most homes, but in the winter weather the home conditions—smallness of rooms and perhaps overcrowding—are such that to remain at home is the worse fate of the two. If the child is otherwise fit, my opinion is that the child is better at school—the school-room is better ventilated than the home room would be, and the mental occupation afforded by school life is beneficial. Those cases, however, with a rise of temperature or shewing signs such as weariness, sleeplessness or muscular debility, must be excluded from school.

The term pre-tubercular is a convenient one which is often used in connection with school children. It means that one is unable to find signs of tuberculosis, although, judging by the appearance of the child, the poor weight, the family and previous history, etc., one suspects that infection might readily take place.

These and similar cases are kept under observation at the school clinic, coming up usually once a fortnight and having their weight recorded. A good many have a cod-liver oil emulsion given them, others have milk ordered, and a few with whom the oil disagrees, are advised other means of trying to improve the health.

The emulsion is administered by the Head Teachers on the school premises (except during the holidays); the milk is warmed and given at lunch time.

During the year 288 children have been put on the emulsion, and 81 are now having the benefit of the milk. The total quantity of emulsion ordered has been 1,205 sixteen-ounce bottles.

Dr. Strong has continued the use of the 10 per cent. Tuberculin ointment for inunction in suitable cases, and was satisfied that it is a useful remedy: he used it in three types of cases:— (1) those with enlarged glands of the neck, (2) phlyctenular conjunctivitis that did not yield readily to the usual measures, (3) some of the pretubercular children above mentioned. The preparation is made by Duncan and Lockhart.

Crippling Defects and Orthopædics.—In the early part of the year, the Committee decided that surgical appliances be supplied free to school children in cases where the family income falls below the limit fixed in the Committee's scale for medical treatment, viz., 32/- for the parents and 6/- per child, but that in other cases the proportion of cost to be paid by the parent shall be determined after a consideration of the circumstances by the Committee.

Also that as regards crippled children in residential institutions, these cases be dealt with financially as they arise, after a consideration of the circumstances by the Committee.

As a result of the above, some eight children have benefitted during the year.

One boy has been in a Residential Hospital School for the last three months of the year, one boy has had a special chair on wheels supplied for school use, and the others have had help towards securing splints and surgical appliances; the cost to the Committee for latter being £17 16s. 6d.

In May of this year, I submitted to the Committee a scheme for Orthopædic Treatment under the auspices of the Royal National Orthopædic Hospital. This, however, was not adopted, but in order to give members the opportunity of reviewing the scheme again, I present it in its entirety.

SPECIAL REPORT

PROVISION OF ORTHOPÆDIC TREATMENT FOR CRIPPLED AND DEFORMED CHILDREN.

"There have been recently, two letters on this subject from the Board of Education, one dated March 7th, informing this Authority that the Managers of the Royal National Orthopædic Hospital, Great Portland Street, would be willing to undertake the treatment of crippled and deformed children sent to their branch Hospital at Stanmore, Middlesex (near Elstree). This is a special school for physically defective children, and the Board of Education are willing to recognise expenditure on approved arrangements.

The other letter refers to the provision of apparatus—splints, high boots, etc.—in order to overcome the effects of the crippling and to enable the child to get to school. The Board would consider individual cases, but they refer to their previous letter of March 7th, and suggest that a scheme to cover the whole treatment of the child should be propounded.

In accordance with instructions, I have visited Stanmore in company with the Secretary to the Hospital, and carefully observed site, buildings, arrangements for treatment, the food and water supply, the drainage, and am quite satisfied with my observations. Unusual features were the large amount of milk consumed by the patients—well over a pint a day—and the fact that the cows supplying this had to be free from tuberculosis.

The following scheme for the treatment of our children has been drawn up in consultation with the Secretary, to whom I am much indebted for the time he gave and the interest he shewed.

- (1) The Surgeons at the Orthopædic Hospital are willing to see children sent to them by this Authority for the purpose of confirming the diagnosis and for advice regarding the necessary treatment. No charge for this is asked, but I suggest that this Committee make either a yearly contribution to the Hospital or pay a small fee for every child sent. Cost, 5 to 10 guineas.
- (2) Where residential treatment is necessary, the Authorities will take the cases into Stanmore at a charge of two guineas a week. As this is a "Special School," this Authority has power to send children there as soon as they reach the age of two years.

It is difficult to say how many beds we would require, as a case might stay in three months, a year or longer.

One of the common causes of crippling is tuberculosis, but the County deals with these cases. Another cause is infantile paralysis. I know of 22 cases amongst our school children, and assuming they are spread over the whole 10 years of school life, this would allow for 2.2 cases per year. This disease, under the heading of Anterior Poliomyelitis has been a notifiable disease for the last 10 years, but the total number of notifications received during that time only number 13. It is a disease essentially of young children. Other causes of crippling are congenital deformities, such as club foot, those due to injuries or disease at birth, to rickets, to accidents, etc. There are 10 such cases known to me, making on the average one a year.

Two beds (reserved by this Authority) would allow nine months' treatment of 2.2 cases of infantile paralysis, and four months of one or more of the other forms of crippling.

Total cost of two beds, £210 per annum.

(3) Outpatient Treatment—After residential treatment, and for other cases, outpatient treatment would be required, such as massage, electrical treatment, and re-education of muscles.

The Hospital Authorities are prepared to send a specially trained nurse to carry out this treatment at our own clinic. The cost of the nurse would be £150 to £200, depending on whether we required her part time or whole time. The cost of the electrical apparatus would be at least £30, plus upkeep.

The Surgeon would visit the Clinic monthly or as required to keep the children under observation or order appropriate treatment.

(4) Apparatus, Splints, etc.—The Hospital Authorities have their own workmen, and thus any splints ordered would be suited for the case and at a legitimate price.

Cost of Apparatus, probably under £25 per year.

(5) As far as possible, children would continue at the ordinary school: those children who are not obtaining "proper benefit" should be sent to an open-air school.

In a recent interview with the Medical Officers of the Board of Education, the view was expressed that a special school for cripples as a distinct entity was a psychological mistake.

- (6) Children would be conveyed to and from Stanmore by the Hospital Ambulance, which picks them up at the Hospital. In some cases it would be necessary that our own Ambulance take them direct from their homes to Stanmore.
- (7) In order to make the scheme complete, I have made a similar report to the Maternity and Child Welfare Committee, suggesting that they should co-operate with this Committee, in order that children under the age of two years might have the benefit of the residential treatment, and under the age of five years the benefit of the outpatient treatment.
- (8) The question of approaching the Enfield Authority to adopt a similar scheme is worth considering. The two Authorities by combining, could reserve four beds, which, by being interchangeable, would probably be of mutual advantage."

As will be seen from Table III. there are comparatively few crippled children not attending school, but on the other hand, several children attend school who can only do so because their department happens to be on the ground floor—to go up steps is unnecessary.

It is difficult to make provision for a small group of cases, but when the open-air school is in existence, it might be possible to review the situation and see whether this group could be catered for.

OPEN-AIR EDUCATION.

A Sub-Committee has during the last six months visited several open-air schools—at Barking, Bow and Clapham—and have been much impressed with the beneficial results obtained therefrom. As the result, the Committee have decided to establish such a school in Edmonton. A site, fairly central and easy of access is necessary, and one not shut in by surrounding buildings. With an administrative block capable of expansion, such a school might become in the future a centre of special activities.

Unfortunately, every scholar in such a school will not be returning to equally wholesome conditions on going home at night.

Residential Open-air School.—Three beds have been reserved for Edmonton boy scholars at the Russell-Cotes Residential School, Parkstone, near Bournemouth, and at the end of the year the third batch were in residence.

The length of stay is six weeks, and the boys are accompanied to Waterloo Station by one of the Attendance Officers and then handed over to the Superintendent or Matron of the School, and vice versa.

The boys have enjoyed their visit and their parents and myself have been pleased with the results.

It is hoped shortly to secure at Clacton similar advantages for the girls.

No school journeys, camps, etc., have been undertaken during the year.

Physical Training.—There is no Area Organiser for this; drill, if possible, is taken in the open air, and the syllabus of the Board of Education is followed. I am giad to say that one no longer sees that relic of the past, namely, forced expiration through the open mouth; it has died at last.

The elder children are taught swimming in the Council Baths: there is a Teaching Mistress for the girls, but their respective masters take the boys. The appointment of a Swimming Instructor for boys will be made at the commencement of the swimming season.

PROVISION OF MEALS FOR NECESSITOUS CHILDREN.

The two centres—one at the Northern and the other at the Southern end of the district—have been in operation during the year.

Applications come before a Joint Committee of the Heads of the Departments, whilst a Central Care Committee composed partly of Councillors and partly of Teachers and others interested in the work supervises administration.

The Supervisor has a fairly free hand in the purchase of vegetables, fruit, depending on the state of the market, and this policy certainly makes for a good meal from this point of view.

The menu is varied, as can be seen from the following menu, which is that adopted for the Winter months:—

Monday.—Soup made from stock-pot, bones, calves' feet, onions, grated carrots, potatoes, haricot beans and dumplings.
Rice pudding and Lyle's golden syrup.

Tuesday.—Beef and mutton, roast, alternate weeks, potatoes baked and boiled, greens.

Currant roll.

Wednesday.—Shepherd's Pie, potatoes and greens.

Jam Roll.

Thursday.—Meat pudding and pie alternate weeks, potatoes, haricot beans.

Rice pudding baked and rice boiled with currants, alternate weeks.

Friday.—Fish boiled with sauce and baked in dripping, alternate weeks, potatoes and lentils.

Bread puddings baked and boiled.

Saturday.—Beef salt, potatoes and carrots.

Yorkshire puddings, or batter made with egg-powder, raisins.

The scale of family income is the same as given in last year's Report. The total number of children fed was 487.

The total number of meals given were:-

	Breakfasts	Dinners
St. Michael's Hall	 _	31,698
Pymmes Park	 64	35,285

The cost per head per meal, including all items—food, rent of premises, gas, salaries, etc.—is 5.6 pence.

In addition, milk has been given to necessitous and ill-nourished children during the year: this is warmed on the school premises and given during the morning. Altogether 81 children are now receiving this, and a total of 5,745 pints have been given—roughly a pint makes three cupfulls.

Co-operation between all those dealing with the school child has, as in past years, been carried out whole-heartedly, and I here take the opportunity of thanking all, including those on my own staff, who have helped to facilitate the work of the School Medical Service.

Head Teachers and their Staff are always ready to assist, Mr. Yarrow the Superintendent of the Attendance Department and his Staff are equally willing, and I think that the majority of the parents realise that we seek the child's good, and are ready to co-operate.

After-care.—The Education Committee have recently taken over these duties, and have appointed a Special Sub-Committee to be known as the Juvenile Employment Committee, and constituted from various bodies. The representatives of the Committee are six in number, of whom two are women, and there are 12 representatives from seven other bodies.

This Committee deals with boys and girls under 18 years of age with regard to the choice of suitable employment and unemployment insurance and exercise their powers under Section 107 of the Education Act, 1921, and Section 6 (1) and Section 6 (2) of the Unemployment Insurance Act, 1923.

THE DEFECTIVE CHILD.

The educational facilities for the blind and the partially blind made by this Committee have been previously given under defective vision and squint.

For the deaf and dumb there is a special school at Tottenham to which our scholars travel by tram—about 15 minutes' ride—under the care of a guide.

This school has been rebuilt during the past year and has now accommodation for 80 children and serves the needs for Tottenham and four other districts. We have six boys and eight girls in attendance.

The mentally defective go by tram to Nassau House, Enfield Highway, under the charge of two guides, one picking up the children at the Northern end, and one at the Southern end of the District.

This Special School is under a Joint Committee formed by members of the two Education Committees—Enfield and Edmonton—constituting a separate Educational Authority with a separate Certifying Medical Officer.

At present we have 36 children in attendance, and there are several attending the elementary schools.

There is great difficulty in getting parents to consent to their child attending, and during the past year the parents of four children have refused this consent. Two are still in the elementary schools, and two have been sent to private schools.

One can readily understand the reason behind the refusal: no parent would like to think that their child is defective in this respect, and would try and blind themselves to the fact. But it is an unfortunate thing for the child: for example, a boy arriving at the age of eight or nine is due to go up into the Boys Department, but he barely knows his letters, he cannot read, and his knowledge of figures is limited to simple concrete numbers; such a child requires more individual attention than he can get in a class of 50 or 60 boys, and he wants to be with his peers in intelligence.

He might get this in a class for backward children, but in addition, he can devote at a special school more time to manual work which is provided by the curriculum.

In the early part of the year, there was placed in the garden of Nassau House a hut for the purpose of teaching carpentering, and a teacher was provided.

The garden is commodious and open, whilst gardening provides a pleasant change to drier studies.

In fine weather, classes are held in the open.

During the year, I have examined 29 boys and 13 girls for presumed mental deficiency; several have been examined on more than one occasion, thus making a total of 44 examinations.

Secondary Schools.—Dr. Strong has carried out the Routine Medical Inspection in two of the three secondary schools in Edmonton; his Report is furnished to the County.

He has also carried out the medical examination of 58 children under the bye-laws for the employment of children of school age.

The Tables which follow are in accordance with instructions received from the Board of Education.

The meaning of "Routine" and "Special" have been already explained.

The number of re-inspections are those actually seen by the Doctor, and the total attendances at the Clinics are altogether 32,478.

In Table IV.—Group II.—the total number of cases for refraction include 187 new cases this year, and 158 cases which came under observation during previous years.

In Table IV.—Group IV.—it will be noted that of 254 cases of dental trouble found at routine inspection 177 were treated. The Specials include cases selected by the Dentist himself on his visits to the schools, and all other cases referred to him by Teachers or Medical Staff, etc.

The remaining portions of the tables require no explanation.

I am,

Ladies and Gentlemen,

Your obedient servant,

H. W. HARDING,

School Medical Officer.

TABLE I.

RETURN OF MEDICAL INSPECTIONS.

A.-Routine Medical Inspections.

Number of o	ther Routine	Inspec	tions			Nil.
	Total			1621	1526	3147
Leaver	'S	0.000		529	524	1053
_	ediates			513	477	990
Entran		***	***	579	525	1104
Number of C	algorith ed	Inspecti	ons:—	Boys.	Girls.	Total.

B.—Other Inspections.

Number of Special Inspec	tions	 	 	3401
Number of Re-inspections		 	 	7403
Total		 ***	 	10804

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR 1924.

					Rou	TINE.	SPE	CIAL.
					No. of	defects.	No. of	defects.
(.200	DEFECT OR DI	SEASE.	IST I	Has	Requiring Treatment.	Requiring to Specific Conservation.	Requiring Treatment.	Requiring to
Malnutrition					68	171	199	II
Uncleanliness-					I	72	18	5
	Body				I	27	2	-
SKIN-	Ringworm—Scal				I	-	34	-
	Bod	у				-	67	-
	Scabies		**		2	-	10	-
	Impetigo	on tubou	ulana)		21	_	342	-
EYE—	Other diseases (n. Blepharitis				5		202	30
	Conjunctivitis			**	58		149	-
	Keratitis						103	2
	Corneal Opacities	s		::	I	1	8	10000
	Defective Vision				114	118	303	
	Squint				53	10	70	
	Other conditions				I	2	44	2
EAR-	Defective Hearin	g			13	35	56	I
	Otitis Media				32	I	196	-
Nose and	Other Ear Diseas				-	-	52	2
THROAT	Enlarged Tonsils				31	142	56	12
INKOAI	Adenoids only				-	-	5	2
	Enlarged Tonsils Other conditions	and Ade	noids		17	28	47	I
Enlarged Cerv	ical Glands (non-tr	horonlov		**	-	I	37	64
Defective Spee	ch	Derculou			3	9	17	3
TEETH-	Dental Diseases				254	I		
HEART AND	Organic Heart Di				254	-0	85	
CIRCULATION	Functional	**			_4	9 26		I
	Anæmia				_	2	2	8
LUNGS-	Bronchitis				_	23	42	76
	Other non-tuberc	ulous dise	eases		_	_		1
TUBER-	Pulmonary—Defi	nite			I	I	I	
CULOSIS	Susp	ected			-	5	16	IO
	Non-pulmonary				3	_	7	I
		Spine			-	-	I	I
		Hip			-	2	4	-
		Other bor Skin	ies and		I		-	, 2
		Other for	ms				-	-
Nervous	Epilepsy	ther for				2	I	-
System	Chorea				I			-
	Other conditions				_	20		II
DEFORMITIES-	Rickets				_	7		_ 9
	Spinal Curvature				_			1 1000
	Other forms				4	12	3	_ I
American Danier	TS AND DISEASES				6	5	521	-

B.—NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT.

(Excluding Uncleanliness and Dental Diseases.)

Group.		Number of	Percentage of Children found	
		Inspected.	Found to require Treatment.	to require Treatment.
CODE GROUP—				
Entrants		1104	118	10.7
Intermediates		990	135	13.6
Leavers		1053	201	19.1
Total (Code Groups)		3147	454	14'4
				Manager and the second
Other Routine Inspection	S	-	Towns Towns or the	-

TABLE III. RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

			Boys.	Girls.	Total
BLIND (including partially blind). Suitable in a Class	Suitable for training in a School or Class for the totally blind.	Attending Certified Schools or Classes for the Blind Attending Public Elementary Schools	I	2 I —	3 -
	Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind Attending Public Elementary Schools		12	- 13 -
DEAF (including deaf and dumb and partially deaf). Suitable for training in a School or deaf and dumb. Suitable for training in a School or Class for the partially deaf.	in a School or Class for the totally deaf or	Attending Certified Schools or Classes for the Deaf Attending Public Elementary Schools	6 -	8	14
	Attending Certified Schools or Classes for the Deaf Attending Public Elementary Schools	- - -	- =	_ I	
MENTALLY DEFECTIVE.	Feebleminded (cases not notifiable to the Local Control Authority).	Attending Certified Schools for Mentally Defective Children Attending Public Elementary Schools	30 2 -	6 3 _	36 5 —
	Notified to Local Control Authority during the year.	Feebleminded	3	_ _ _	<u>4</u>

TABLE III.—Continued.

	A	THE HET ME	Boys.	Girls.	Total,
EPILEPTICS.	Suffering from severe epilepsy.	Attending Certified Special Schools for Epileptics	- - -		_ _ _ _ 2
	Suffering from epilepsy which is not severe.	Attending Public Elementary Schools At no School or Insiitution	5	-	5
Physically Defective.	Infectious pulmon- ary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board At other Institutions At no School or Institution			
	Non-infectious but active pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board At Certified Residential Open-air Schools	10 - - 2 - 4	8 - 4 - 4	18 - - 6 - 8
	Delicate Children (e.g., pre- or latent tuberculo- sis, malnutrition, debility, anæmia, etc.).	At Certified Residential Open-air Schools	3 87 - 2	- 105 - 4	3 192 —
	Active non-pulmon- ary tuberculosis	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board At Public Elementary Schools At other Institutions At no School or Institution	2 1 — 3	1 3 1 1	3 4 1 4
	Crippled Children (other than those with active tuber-culous disease), e.g., children suffering from paralysis, etc., and including those with severe heart disease.	At Certified Hospital Schools At Certified Residential Cripple Schools	7 - 5	- - 8 - 7	1 — — — — — — — — — — — — — — — — — — —

TABLE IV.—RETURN OF DEFECTS TREATED DURING THE YEAR 1924.

TREATMENT TABLE.

GROUP I.-MINOR AILMENTS (excluding uncleanliness).

		Number of defects treated, or unde treatment during the year.				
Disease or Defect.	sease or Defect.				Total.	
SKIN—						
Ringworm—Scalp			34	4	38	
		* *	68	3	71	
			10	2	12	
			351	5	356	
The second of th				3	205	
MINOR EYE DEFECTS (external and others)		* *	339	2	340	
		* *	321	3	324	
MISCELLANEOUS (minor injuries, etc.)	••	**	871	52	923	
TOTAL			2196	73	2269	

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects).

		Number of defects dealt with.						
Defect or Disease.	the Authority's Scheme.	Submitted to refrac- tion by private pract. or at hospital.	Other- wise.	Total				
Errors of Refraction (including Squint) Other defects or diseases of the eyes		345	7	-	35 ² 5			
TOTAL		350	7	_	357			

Total number of chile	dren for whom sp	ectacles were	presci	ribed :-	-010	
	he Authority's S					334
(b) Otherwis	se					6
Total number of chile						
(a) Under the	he Authority's S	cheme				333
(b) Otherwis	se					6

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

	. Number of	of Defects.		
Received (Operative Treatment.			
Under the Authority's Scheme, in Clinic or Hospital.	By private practitioner or hospital apart from the Authority's Scheme.	Total.	Received other forms of Treatment.	Total Number Treated.
138	10	148	-	148

GROUP IV.-DENTAL DEFECTS.

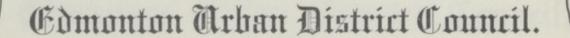
(1) Number of children who were:-

(b) (c) (d)

(a) Inspected by the Dentist as the result of Routine Inspection:-

1	Age.	By Doctor.	. Ву	Dentist.	
	4	18		-	
	5	83		- Tonor	
Take Aura	6	10		126	
(0)000	7	I		270	
Routine age	8	49		186	
groups.	9	-		76	
	10	-		143	
	II	_		135	
male New	12	16		33	
	13	_		-	
,	14	_		-	
				-	1146
Specials, exclu					00
selected b	y the dentist		***		889
	Grand	l Total			2035
					=
Found to require	treatment				1854
Actually treated					1433
Re-treated during		s the result	of per	iodical	
examination					273

(2)	Half-days devoted to		Inspecti Treatme			20 239
(3)	Attendances made by	children for treatn	nent			2391
(4)	Fillings	Permanent teeth Temporary teeth		_	Total	1012
(5)	Extractions	Permanent teeth Temporary teeth	-	_	Total	4128
(6)	Administrations of ger	neral anæsthetics f	or extra	ctions		783
(7)	Other operations	Permanent teeth Temporary teeth		_	Total	232
	GROUP YUN	CONDITIO	NS.			08
(1)	Average number of vi- the School Nurs			g the ye	ar by	14
(2)	Total number of exa		ldren in	the so	chools	26203
(3)	Number of individual		clean			2348
	Number of children			ents ma		-34-
(+)	the Local Educa			***		229
(5)	Number of cases in w	hich legal proceed	ings were	e taken-	_	
		Inder the Educati				Nil.
	(b) (Jnder School Atte	ndance]	Bye-law	S	I



REPORT

OF

The Medical Officer of Health

ON THE

Sanitary Conditions and Vital Statistics

AND

Report of the Sanitary Inspector.

Report to the Education Committee

ON THE

School Medical Service

AND

Medical Inspection of School Children

FOR THE YEAR

1923.

Community Vebrum District Committee

REPORT

The Medical Officer of Health

Sanitary Conditions and Vital Statistics

Report of the Sanitary Inspector

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Medical Inspection of School Children

Edmonton Arban District Council.

1923-1924.

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H. WILLIAMS, J.P.J. A. KILBRIDE.

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Chairman

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A. DEFFEE. Dr. A. E. TUGHAN.
W. PREYE.

H. BARRASS. W

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Chairman Vice Chairman

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Co-opted Members.

Mrs. E. ELMS.

Miss E. SMITH.

To the Chairman and Members of the

EDMONTON URBAN DISTRICT COUNCIL.

LADIES AND GENTLEMEN,

I beg to present to you my Report for the year 1923 on the sanitary conditions and vital statistics for the District of Edmonton.

The infectious complaints have not been prevalent this year with the exception of Tuberculosis; it will be noted with alarm that there is an increase of 63 names on the Register at the end of 1923, compared with that at the end of 1922—an increase of 7 per cent. What are the means by which the bacillus is disseminated? Roughly, the answer is:—infected milk; indiscriminate spitting and non-disinfection of the phlegm; inefficient isolation of the patient; unknown cases. As regards the latter, I hope to get in touch with local medical practitioners and have the sputa of those suffering from chronic bronchitis examined during the year. What is being done with regard to the former? I am afraid the only answer is, Education; and when the individual is ineducable, what then? I wish that those railway and other companies which possess bye-laws re spitting on their premises would put them into effect more frequently, and that Edmonton possessed such bye-laws.

The death-rate this year—excluding foreign inmates of institutions in the district—is 9.5 as against 10.8 for 1922. A quarter of these deaths are due to affections of the heart and lungs, and another quarter to tubercular affections and cancer.

It is satisfactory to note that the death-rate per 1,000 of population for diphtheria has fallen in the last 3 years from 0.48 to 0.09; the corresponding figures for London are 0.25 and 0.13. I attribute this to the thorough swabbing of all possible sources of infection.

The Maternity and Child Welfare Clinics are increasingly appreciated by mothers; the attendances for the children have increased by nearly 900 over that of last year, whilst the attendances at the Ante-natal Clinic have increased by 108.

The increased accommodation due to the building of a new doctor's room will facilitate the work in this Department.

The amount of milk granted this year is 8,900 pints more than for 1922.

REDUCTION IN STAFF.—At the end of 1922, for reasons of economy, notices to terminate their appointments were given to one Sanitary Inspector and the Nurse in the Public Health Department who acted also as Ambulance and Fever Nurse and assisted in the laboratory.

The diminished Sanitary Staff have been unable to carry out the Housing (Inspection of District) Regulations, 1910, and a parent or relative has had to accompany the patient to the Isolation Hospital.

In the early part of the year, one of the two motor drivers resigned, and a part-time man was engaged to take his place.

The outstanding needs of the district from the public health point of view are:—

- (1) More housing accommodation.
- (2) Improved travelling facilities.
- (3) More hygienic method of disposing of house refuse than the present one of dumping.
- (4) Satisfactory method of treating the sewage; this latter is being undertaken during the coming year.

I am,

Ladies and Gentlemen, Your obedient Servant,

H. W. HARDING,

Medical Officer of Health.



STAFF OF THE PUBLIC HEALTH DEPARTMENT.

- * H. W. Harding, M.D. (Lond.), D.P.H., Medical Officer of Health, School Medical Officer and Supervisor for the Maternity and Child Welfare Committee.
- * R. J. Butland, M.R.S.I., Chief Sanitary Inspector, Inspector of Canal Boats and Inspector under the Shops' Act, 1912.
- ab J. E. Winter, Sanitary Inspector. Inspector under the Shops' Act.

ab G. H. HUCKLE,

ab

W. TILLCOCK, ,,

"

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ab A. Ede.

- E, , (until April 1st).
- a Miss G. M. Shiner, C.M.B., Sanitary Inspector.
- cd Mrs. J. A. Hobbs, C.M.B., Ambulance and Fever Nurse (until March 1st).
 A. Oades, Clerk.
- J. P. FARRAR, Clerk (half-time)
 F. PADLEY.

MATERNITY AND CHILD WELFARE.

- * Mrs. G. F. FLEETWOOD-OUTRAM, M.B., Ch.B. (Glas.) (part time), in charge of the Ante-Natal Clinic and Child Welfare Centre.
- * ae Miss A. BINTCLIFFE, C.M.B., Superintendent of the Centres.
- * a Miss A. NAYLOR, C.M.B., Health Visitor.
- * Mrs. C. Воотнву, С.М.В.,
- * Miss Warburton, Clerk.
 - * Moiety paid under Public Health Act, or by Exchequer Grants.
 - a Certificated Sanitary Inspectors.
 - b Certificate of Meat and Food Inspector.
 - c Certificate of three years' General Training.
 - d Certificate of Fever Nursing.
 - e Maternity and Child Welfare Certificate.

SCHOOL MEDICAL STAFF.

R. H. STRONG, L.R.C.P., L.R.C.S., Assistant School Medical Officer. Miss L. Smith-Clark, M.B., Ch.B., Ophthalmic Surgeon.

W. H. WILLIS, L.D.S., B.Sc., Dentist.

D. A. R. Aufranc, M.R.C.S., L.R.C.P., L.D.S., Dental Anæsthetist.

School Nurses-

Miss L. Matthews.

Mrs. C. Tonkin.

Miss M. HAZELTON.

Miss A. FAHY.

Miss Brooks, Clinic Clerk.

J. P. FARRAR, Clerk for S.M.O. (half-time).

SECTION 1.

GENERAL STATISTICS.

Area, including 31 acres of water	 3,894 acres.
Population, as estimated by the Registrar-General	 69,590 ,,
,, (Census of 1921)	 66,807 ,,

There are several Institutions in the district and in arriving at the figures for the vital statistics, the number of Non-Edmonton residents are deducted.

			Inmates.	Staff, etc.	Edmonton Residents.
North Middlesex Hospital	 		813	272	120
Edmonton House (Guardians)	 		813 674	74	215
Epileptic Colony (M.A.B.)	 		330	70	77
Halliwick Home for Cripples	 	4.5	54	13	I
Bury House Nursing Home	 		I	13	2

Census of 1921.—I have abstracted the following figures from the Census for the County of Middlesex published this year:—

	War	ds.		Area.	Males.	Females.	Total.	Persons per Acre
Bury Street Church Stree Fore Street	t	::	 ::	1215 1456 1223	10982 10360 11018	11387 11625 11435	22369 21985 22453	18·4 15·1 18·4
	Γotal		 	3894	32360	34447	66807	17.2

The total population of the County was 1,253,002, persons per acre being 8.4.

Local Age and Condition Distribution.

	Average age.		Age distribution per 1,000.							
	W E		Males.				Females.			
10013	М.	F.	0-4	5-19	20-39	40-	0-4	5-19	20-39	40-
Edmonton County	28·2 29 8	28·5 31·5	101	333 299	277 295	289 318	95 73	318 265	305 331	282 331

Marital Condition Distribution per 1,000 of each sex.

	2		Males.		Females.			
		Single.	Married	Widowed or Divorced.	Single.	Married.	Widowed or Divorced	
Edmonton	 	574	395	31	554	378	68	
County	 	532	438	30	539	378 382	79	

Number of females per 1,000 men-1,064.

The Census returns of 1921 regarding dwellings and inhabitants were as follows:—

Undivide	d priva	te houses		 11,149	with	58,191	rooms.
Structura	ally divi	ded privat	e houses	 25	,,	74	"
Blocks o	f flats, t	enements,	etc.	 81	,,	266	,,
Shops				 731	"	3,612	"
Others				 22	,,	. 140	,,
Total				 12,008	,,	62,283	,,
Vacant o	n Censi	us night		 117	,,	636	"
Occupied	l			 11,891	"	61,647	"

Dwellings Occupied.	r—3 Rooms.	4-5 Rooms.	6—8 Rooms.	9 Rooms or over.	Total
By 1 private family By 2 ,, families By 3 ,,	301	7374 1412 57	1552 862 120	132 38 24	9359 2331 201
Total dwellings occupied	320	8843	2534	194	11891
Percentage	3	74	21	2	100
Total private families)	339	10374	3650	291	14654

	No. of		Perce	ntage.	
S. C.	Families.	Population.	1921	1911	
Living in 1 room	872	1912	6.0	3.5	
2 rooms	1588	5005	10.8	5.9	
., 3	2042	8040	13.9	10.5	
4	2308	10952	15.7	15.4	
5	6120	30802 6763	41.8	47.4	
., 6—7 rooms	1418	6763	9.7	14.1	
,, 8-9 ,,	232	1087	1.6	2.3	
., 10 rooms and over	74	374	0.5	0.9	

The housing conditions of private families as well as the range of variations obtaining throughout the County were as follows:—

Edmonton.	Maximum.	Minimum.
5.18	6.97	4.68
1.23	1.65	1.04
4.43	4.77	3.69
4.99	4.99	4.19
0.95	1.46	0.91
11.2%	13.2%	1.8%
-5586 or -8.4%	23%	- 14.7%
7.9	147.2	1.3
17.6	142.3	7.2
	5.18 1.23 4.43 4.99 0.95 11.2% - 5586 or -8.4% 7.9	5.18 6.97 1.23 1.65 4.43 4.77 4.99 4.99 0.95 1.46 11.2% 13.2% -5586 or 23% -8.4% 7.9 147.2

Number of inhabited houses.—The Overseer has kindly furnished me the following returns for 1923:—

		Ho	uses.	Tene	ments.
		East.	West.	East.	West.
Bury Street Ward	 	2,551	1,308	147	34
Church Street Ward	 	1,246	2,867	348	211
Fore Street Ward	 	1,518	2,395	15	78
		5,315	6,570	510	323

The total number of houses and tenements in assessment is 12,718. The number of houses on the Council's Housing Estate is 232.



SECTION II.

VITAL STATISTICS.

		Total	M.	F.	
Rinths	Legitimate Illegitimate	 1,466	734	732]	Birth Rate 22.2.
Direns	Illegitimate	 54	25	29)	22 21

Deaths.—Males, 346; Females, 305; Total, 651; Death Rate 9.5.

Number of women dying in, or in consequence of childbirth from sepsis, 1. other cause, 1.

Deaths of infants under 1 year of age per 1,000 births:-

Legitimate, 53; Illegitimate, 111. Total, 55.

Deaths	from	n measles (at all ages)	 	 	9.
"	,,	whooping cough (at all ages)	 	 	4.
"	21	diarrhœa (under 2 years of age)	 	 	16.

The following list of the causes of death have been furnished by the Registrar-General:—

Causes of Death.			M.	F.	Total.
Measles		 	 3	6	9
Scarlet Fever		 	 -	_	_
Whooping Cough		 	 _	4	4
Diphtheria		 	 2	4	6
Influenza		 	 2	7	9
Meningoccal Meningitis		 	 I	-	I
Tuberculosis of respiratory syst	em	 	 54	23	77
Other Tuberculous diseases		 	 7	5	12
Cancer, malignant disease		 	 37	40	77
Rheumatic Fever		 	 I	2	3
Diabetes		 	 2	4	6
Cerebral Hæmorrhage, etc.		 	 15	17	32
Heart disease		 	 34	50	84
Arterio Sclerosis		 	 7	6	13
Bronchitis		 	 15	13	28
Pueumonia (all forms)		 	 22	23	45
Other Respiratory diseases		 	 4	2	6
Ulcer of stomach or duodenum		 	 4	I	5
Diarrhœa, etc. (under 2 years)		 	 12	4	16
Appendicitis and Typhlitis		 	 3	2	5

All causes					346	305	651
Causes ill-defined or unknown	•••		•••		_	I	1
Other defined diseases					65	60	125
Other deaths from violence			***		14	7	21
Suicide					5	2	7
Congenital debility and malfor	matio	n, pren	nature	birth	31	14	45
Other accidents and diseases of	pregr	nancy a	and par	turitio	n —	I	I
Puerperal Sepsis					-	I	I
Acute and Chronic Nephritis					. 6	6	12

Comparative Statistics.—The Registrar-General has forwarded provisional figures regarding England and Wales, and I am thus enabled to show the following comparative tables.

		Annual death-rate per 1,000 population.										
di vi badajami d	All Causes.	Enteric Fever.	Small-Pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.				
England and Wales London Edmonton	 11.6 11.2 9.5	0.01 10.0 00.0	0.00	0.14 0 08 0.13	0.03 0.02 0.00	0.10 0.09 0.06	0.07 0.13 0.09	0.22				

		Rate per 1,000 births.						
		Birth-rate per 1,000 of population.	Diarrhœa, etc., under 2 years.	Total deaths under 1 year.				
Edmonton	 	19.7	7·7 10.2	69 60				
Edmonton	 	22.2	10.5	55				



SECTION III. NOTIFIABLE INFECTIOUS DISEASES.

The incidence of these diseases has diminished considerably during the year; this also has been the experience of London and the Outer Ring of Suburbs.

Early in the year, owing to reasons of economy, the ambulance nurse was discharged; since March 1st, the patient has been accompanied in the ambulance by a relative, or, as in some cases, by a friend.

Contacts of scarlet fever and diphtheria of school age and under, are seen by me at the Town Hall usually within 24 hours of the removal of the patient; in the case of the latter disease, swabs of the throat or nose are taken.

Children returning from the Isolation Hospital are inspected in the week following their discharge, to assess their fitness for school.

The following table gives various details regarding the diseases notified.

		Total Number of cases.	Number removed.	Under 1 year.	I-2 years.	2-3 years.	3-4 years.	4-5 years.	5—ro years.	10-15 years.	15-20 years.	20-35 years.	35-45 years.	45-65 years.	65 and over.
Diphtheria	Cases Deaths	81 6	75 6	::	3	7	14 2	6 I	31 3	14	2	3		I	
Scarlet Fever	Cases Deaths	116	103		5	6	8	7	44	22	11	8	4	I	
Enteric Fever	Cases Deaths	2	I				::					1		I	
Puerperal Fever.	Cases Deaths	6 1					::			::		6 I	::		
Pneumonia	Cases Deaths	82	1	7 5	5 5	3	I 2	3	13	3 2	8 1	14	9	13 5	3 6
Erysipelas	Cases Deaths	37	2	2		1			2	4	3	5	9	9	2
Ophthalmia Neonatorum	Cases Deaths	8	::	8	::										
Encephalitis Lethargica	Cases Deaths	3	::			.:			::			2		I	
Polio-myelitis	Cases Deaths	I		::	I	::									
Malaria	Cases Deaths	2			.:		::	::		::		I	I	::	

The Registrar-General states that 45 deaths were due to pneumonia; we have particulars of only the 37 which were registered as such.

The conditions under which many residents travel to and from Town are not conducive to public health. At certain times of the day, all means of transit are badly overcrowded; this is undoubtedly a cause of many respiratory infections, including influenza, pneumonia and the common cold. Seats facing one another are also unhygienic, especially with the narrow interval that exists in railway carriages. The modern 'bus from this point of view, is built on correct lines.

Scarlet Fever.—This disease which has been prevalent since 1919, shews a welcome decline.

The total number of notifications from 1919 to 1922 inclusive is 1648, the total deaths for the same 4 years being 22.

Efforts have been made in every case to trace the source of infection, that is to say, the previous case; this has, in the vast majority of cases, given a negative result. It is probable that anomalous cases are responsible for the spread of infection.

It is interesting to class these notifications according to their ages; namely those of school age, 5 to 14 years, and those above and below:—

			Cases.
o—5 years	 	 ***	26
5—14 years	 	 	66
Above 14 years	 	 	24

In 1921, I showed that the average number of residents in houses infected with scarlet fever and diphtheria—749 in all—was 7; the census figures for that year was 5.5. The corresponding figure for 1923 for scarlet fever alone is 6.6 per house and for diphtheria alone is 8.1 per house.

Accommodation per invaded house is:-

	Sca	arlet Fever.	Diphtheria.
		per cent.	per cent.
At least one room per head		39	22.8
Less than one room per head. Between 1 and 2 per room		58	58.2
Less than 2 per room		3	19

As these figures are only based on 100 cases of scarlet fever and 79 cases of diphtheria, more convincing figures are given by a total of 1,100 houses invaded by scarlet fever and diphtheria during the last three years.

The total population of these at the time of invasion was 7,806, giving an average per house of 7.1 inmates.

Comparing this with the census figures for the whole district of 5.5, there is no doubt in my mind that overcrowding is responsible for the increased virulence of the infections we have been suffering from during the last few years; the decline of this year is probably due to an exhausted pabulum.

Diphtheria.—The incidence of this disease has also lessened, whilst nasal diphtheria which had been markedly prevalent for the last four years, has almost disappeared.

Since the summer holidays, all children attending the school clinic for sore throat have been swabbed—this on account of the mildness of some cases of diphtheria occurring about that time.

In accordance with the recommendation of the Ministry of Health, antidiphtheric serum of 8,000 units has been stocked at the Town Hall and the Fire Station instead of 4,000 units. Prophylactic doses of 500 units are also available.

During the year, 14 phials of 8,000 units have been supplied by the Council free of charge to local medical men, to whom a fee of 3/6 is paid for its administration.

As in the previous year, all child contacts and the mother have been swabbed; this enables the school child to return to school with less than three days' exclusion.

The Death Rate from diphtheria has improved considerably during the last two years, as evidenced by the following figures:—

	Death Rate	e per 1,000 of popu	lation.
	England and Wales.	London.	Edmonton
1921	0.12	0.25	0.48
1922	0.11	0.25	0.30

We are, however, still higher than the neighbouring districts.

Diphtheria carriers have given little trouble during the year; the total number found was 17 of whom 8 were removed to the Isolation Hospital owing to the conditions at home being unfavourable for isolation. The average stay in hospital of these 8 cases was 30 days.

Small Pox.—No cases have been notified, and contacts of cases occurring in other districts have only numbered two. Most of the staff were vaccinated at the end of 1922.

Pneumonia.—The incidence of this disease still continues unduly high. By this I do not mean that it is higher than the rest of London, but regarded as a preventable disease it is high.

The unhygienic method in which most of the London workers have to travel is in my opinion, partly responsible for this and other forms of respiratory infectious complaints; cramped sleeping accommodation, due to shortage of houses, does not lessen the chances of infection.

Enteric Fever.—Two cases were notified during the year; one case was furnished by a member of the staff of the North Middlesex Hospital, the origin of the infection not being traced; the other case was living outside the district, but when the illness commenced, the patient came to her sister's home in Edmonton to be nursed.

Malaria.—The two cases notified contracted the disease abroad.

Tuberculosis.—The following table gives details regarding the incidence of this infection as shewn by the notifications received and the deaths registered.

			New	Cases.			Deat	hs.	
Age Periods		Pu	lm.	Non-	Pulm.	Pu	lm.	Non-l	Pulm.
		М.	F.	М.	F.	M.	F.	М.	F
Under 1 year									
I - 5 years			1	3	2				
5-10 ,,		4	IO	4	4	1 ::	**		2
0-15 ,,		2	6	3	I		 I		
5-20 ,,		6	12	ī	2	3	4		
0-25 ,,		9	15	I	I	10	2		
5-30 .,		7	II	I	I	3	7		
0-35 ,,		5 8	5			3 6	2	I	
5-45		8	3			8	I		
5-55		7	3			7 6	2		
5-65 ,.		2	I			6	2		
55 and over	••	2				2			
Total		52	67	13	11	45	21		3

The following number of cases have died of tuberculosis, concerning whom no notification has been received.

			Males.	Females.	Total.
Pulmonary		 	8	2	10
Non-pulmona	ry	 	8	2	10

There is no occasion to attribute these failures to notify to wilful neglect, and there has been no refusal to notify.

Five notified cases, 2 males and 3 females, died from other causes.

The notifications were received from the following: -

1	11	ln	10	17	-	254	1
т.	ч.		w	ы	es.	£Λ	ν

		Males.	Females.	Total.
General Practitioner	S	 31	32	63
School Medical Insp	ector	 _	I	I
Hospital		 7	13	20
Tuberculosis M.O.		 12	20	32
Asylum M.O		 I	til the to-	I
Poor Law M.O.		 I	I	2
		_		
Total		 52	67	119
		_	there are making	

The non-pulmonary forms of Tuberculosis were:-

Distant			Males.	Females.	Total.
Meningeal	***		THE THE PERSON OF	I	I
Bones and Joints			7	3	10
Glandular			2	3	5
Other forms	•••	1	4	4	8
Total			13	11	24
			_		

The number of cases on the Register at the end of the year was 520 males and 445 females, total 965. The corresponding figures for the end of 1922 were 505 males, 397 females, total 902.

During the year three names have been removed from the Register in accordance with the paragraph dealing with this procedure in the Annual Report of 1921 of the Chief Medical Officer of the Ministry of Health.

Dr. Tate, the County Medical Officer of Health, has kindly furnished the following particulars which relate wholly to Edmonton residents. The Dispensary is in Silver Street, under the charge of Dr. Evans.

Number	of new	cases se	een at the Dispensa	ry dur	ing 19	23	 242
Number	diagnos	ed as si	uffering from Tuber	culosi	S		 83
"	of cases	sent to	Sanatorium				 55
"	"	,,	Hospital				 27
,,	"	,,	Surgical Hospital				 IO
,,	"	"	Training Colony				 . 2
"	,,,	,,	Observation Hosp	ital			 12
Number	of sputa	exami	ned				 324
"	"	found	positive			***	 53

The Woman Sanitary Inspector has paid 950 visits to homes after notification, removal or death; whilst 205 rooms and 165 lots of bedding have been disinfected from these premises.

Ophthalmia Neonatorum.—The following are the details:—

Cases notified ... 8

Treated (1) at home ... 4 (2) in hospital ... 4

Vision (1) not impaired 8 (2) impaired ... —

No case terminated in total blindness or death.

Every effort is made to induce the mother to get appropriate treatment for herself where it is shewn by microscopical examination that the cause is venereal.

Non-Notifiable Infectious Disease.

Measles occurred in small numbers towards the end of the year in the southern portion of the district and appeared in the northern half during the Christmas holidays. The number was not at any time great, but seven deaths occurred, the weather being very unfavourable. The outbreak of 1922 occurred in the early summer months which were exceptionally warm, and the mortality was considerably less.

German Measles.—A limited outbreak of this disease occurred in one Infants' Department during the autumn months. The symptoms were typical with a long incubation period.

Mumps and Chicken Pox.—These occurred in the early part of the year, a continuation of the outbreak which started in the autumn of 1922.

Influenza and other respiratory affections. These complaints were not noticeably prevalent during the year.

SECTION IV.

OTHER CAUSES OF SICKNESS.

The mortality figures already given suggest the illnesses that have been prevalent during the year, but I am informed that the amount of illness during the greater part of the year has not been great. It will be noticed that the mortality figures for cancer, pulmonary tuberculosis, organic heart disease and lung diseases are similar, each furnishing about 12 per cent. of the total number of deaths.

The recent circular from the Ministry with regard to cancer was discussed by the Local Medical Society and the following conclusions were arrived at:—

- (1) That the local facilities for consultations and pathological examinations were sufficient.
- (2) That the facilities for treatment were adequate.
- (3) That the facilities for transporting patients were satisfactory.
- (4) That the public were being sufficiently educated in the matter by the press and by general literature and that special propaganda work as suggested in the Circular was unnecessary; that there was already a feeling of nervous apprehension on the subject among the population and it would not be wise to increase this feeling.



SECTION V.

NURSING ARRANGEMENTS, etc.

Nursing in the Home.—In February, 1921, the Council entered into an agreement with the Cottage Benefit Nursing Association of Vauxhall Bridge Road, whereby the latter supplies, through its local branch at Bury House, a fully trained nurse for those infectious illnesses which are not usually received into an Isolation Hospital; also such other cases as may be selected by the Medical Officer of Health.

The Council pay a retaining fee of £20 per annum, and in addition a fee for each visit by the Nurse at the following rate:—

1/- for each of the first three visits and 6d. for each subsequent visit. The Council also pays the cost of necessary dressings.

The cost for the year was £34 2s.

Midwives.—At the beginning of 1923, there were 14 midwives practising in the district. At the beginning of 1924 there were 17, including three at the North Middlesex Hospital and five in connection with the Cottage Nursing Association, leaving 9 in private work.

The Local Authority does not employ nor subsidise midwives.

The County is the supervising Authority and the County Medical Officer of Health informs me that the number of applications received during the year from doctors called in to Edmonton patients was 79, and that the total amount of fees paid for these cases was £98 10s. 6d.

Clinics and Treatment Centres.

	Situation.	Accommodation.	Authority
Maternity and Chil Welfare	Brookfield House, ad- joining Town Hall	5 sessions weekly in- cluding one Ante- Natal session	Edmonton Council.
Day Nursery .	Fore Street	30	Private
School Clinic .	Pymmes Park	Minor Ailments Dentist Oculist	Edmonton Education Committee
Tuberculosis .	Silver St., Edmonton	Dispensary	Middlesex County
Venereal Disease .	None in Edmonton; the nearest is the Prince of Wales' Hospital, Tottenham		County

Maternity and Child Welfare.—The work in this Department has been fully maintained during the past year. Its sphere of usefulness has so far increased that the Committee, late in the year, decided to increase the accommodation by building an extra room for consultations; the room now used for this purpose will, when vacated, be used as a weighing room; this has up to the present been carried on in a corner of the hall screened off. It is hoped that when the three rooms are in use the work will be found to run more smoothly.

The District is divided into two portions, a Health Visitor to each portion; each has a bicycle supplied by the Council.

The attendances at the Clinic for the year were as follows:-

CHILI	WELFARE.						
T	otal number o	f session	ıs				179
N	New Cases						641
	otal attendanc						11,286
A	verage attenda	inces pe	r sessi	ion			63
ANTE	-NATAL CLINIC	. Alle					
I	otal number of	f session	15				45
N	New Cases						114
	otal attendanc						570
A	verage attenda	ances					12.6
. The visits	to homes are a	s follow	vs:				
Visits	to expectant n	nothers-	Many .				
(1) First visits						140
(:	2) Total visits						201
Visit	to infants unde	r one ye	ear of	age—			
(1	r) First visits					10.II	1,491
(:	2) Total visits						4,094
To ch	ildren 1 to 5 ye	ears of a	ige—				
T	otal visits						1,691
							mM a
	al visits as milk						
"	" puerj	peral fer	ver		•••		26
	Grand	Total					6,041
						_	

Included in the above are those for specific diseases.

A branch grant			Notified.	Visited.	No. of Visits.	Removed to Hospital.
Ophthalmia neonatorun	n	 	8	8	86	2
Puerperal fever Measles		 	6	6	26	4
Whooping cough Epidemic diarrhœa		 }	Not notifiab	le, and not vi	sited as such	
Anterior poliomyelitis		 	I	I	6	I

"Baby Week" was celebrated in July. Dr. Nash on one afternoon gave a short talk on economic cooking, whilst Professor Louise McIlroy, M.D., took as her subject the following afternoon "Health Hints."

An outing to Southend completed the programme.

The sewing class was discontinued in May.

Births notified during the year were:-

Live births—(1) by midwives	 	1577
(2) by doctors or parents	 	469
Still births—(1) by midwives	 	40
(2) by doctors	 	13
Total births notified	 	2099

Infantile Mortality.—During the past year, 84 children under the age of one year have died; per 1,000 births, this gives an infantile mortality figure of 55.

The number of births notified, as given above, includes births of non-Edmonton Mothers occurring in the Maternity Wards of the North Middlesex Hospital. In the quarterly return No. 300, issued by the Registrar-General, these births are included as Edmonton births, and raise the birth rate to the fictitious figure of 29.7 and lower the infantile mortality rate to 41. It must be realised that these figures as quoted on page 28 of that report are provisional.

MUNICIPAL MILK SUPPLY.

A Sub-Committee appointed by the Maternity and Child Welfare Committee has, since April, administered the above. The scheme is given in detail in the Report for 1921.

The following particulars apply to 1923:-

Numbe	er of	applica	nts						1,171
"		"	gra	anted milk		***	***	***	1,126
Numbe	er of	pints g	ranted	free					3,972
"	"	"	21	half cost		***			224
,,,	"	"	"	quarter co	ost	***			43,708
Total n	nonie	s paid	during	year endi	ng M	arch 31	st,		
1924								£459	14 4

DAY NURSERY.

This is in Fore Street, fairly central, and on the tram route. The fee is 9d. a day or 3/6 per week.

The attendances this year have improved considerably; for the six months, June to November, the total attendances were 3,306 or 2,000 more than the corresponding period of 1922, requiring the services of an additional nurse.

In September a mothercraft class was instituted in conjunction with the Education Authority. Senior girls, in groups of six, attend one day per week for instruction from 9 to 10.45 a.m. for a period of six to seven weeks. At this rate 60 girls would pass through this class every term. So far, it has been a success and the girls are keenly interested in their work.

The health of the babies has been very good and no infectious complaint has made its appearance among them.

The **School Clinic** is situated in the Southern part of the district; details of the work carried out there is given under School Medical Service.

The **Tuberculosis Dispensary.**—The work carried out here under the County is mentioned previously under Tuberculosis.

Yenereal Diseases.—The nearest hospital is the Prince of Wales, a general hospital, at Tottenham. The scheme of treatment under the Middlesex Council, includes daily treatment at this Hospital and treatment at some 28 other hospitals scattered throughout London.

HOSPITALS

provided or subsidised by the Local Authority or by the County Council.

Tuberculosis.—The County of Middlesex is responsible for the treatment of this infectious disease; the County Sanatorium of 318 beds is at Harefield; the class of case admitted is pulmonary and as far as possible of the sanatorium type. Clare Hall is still retained for male patients of the "hospital" type and for female patients of the "hospital" and the "advanced" type. The Council also rent a block of buildings at Isleworth belonging to the Brentford Guardians and containing 40 beds for male advanced pulmonary cases.

Details of Edmonton residents receiving sanatorium treatment are already given.

Maternity.—The arrangements with the Guardians for the admittance into the North Middlesex Hospital of maternity cases still hold. The Council is responsible for the fee at the rate of 6/- per day, and this is collected from the patient previous to the order for admittance being given. The order is signed by Dr. Outram, who is in charge of the Ante-Natal Clinic, and who sees each case before admission. Seven prospective mothers have adopted this procedure during the year. No case has been assisted either partly or wholly by the Committee.

Children.—There are no special hospitals for children.

Fever.—The Isolation Hospital is a combined one for the two districts, Enfield and Edmonton, and is situated in Enfield on its Winchmore Hill border. In addition to scarlet fever, diphtheria and enteric fever, the Hospital Committee are prepared to accept cases of erysipelas, ophthalmia neonatorum and puerperal fever, provided there is the necessary accommodation.

Small Pox.—The Middlesex District Joint Hospital is at South Mimms, and Edmonton is one of the contributors. There are 14 beds at Pickett's Lock Lane, Edmonton, available for sporadic cases.

Other Hospitals.—The North Middlesex Hospital is under the jurisdiction of the Guardians and the Prince of Wales' Hospital is situated in Tottenham. The former of these, with the workhouse, make provision for unmarried mothers, homeless children, etc.

AMBULANCE FACILITIES.

(I) For Infectious Disease. — The Local Authority maintains a motor ambulance for the conveyance of patients to the Isolation Hospital.

As the Hospital is quite four miles from the centre of Edmonton, the Council also maintains a dixie-bus, capable of holding six people; this conveys patients home when recovered, and also takes parents to the Hospital when the child is on the dangerously ill list.

After hours on Week-days and on Sundays, the Fire Brigade undertake the latter.

(2) For **Non-Infectious** and **Accident Cases.**—An ambulance is housed at the Fire Station and the following figures given by the Superintendent shew the extent to which it is used:—

Private removals		 	 	753 P	atients.
Accident cases		 	 	134	"
Maternity ,,		 	 	69	"
School Clinic		 	 	117	"
Isolation Hospital	visits	 	 	25	
	Total	 	 	1,098	

The School Clinic cases are removals home from the Prince of Wales' Hospital after operation for the removal of tonsils and adenoids.

The total number of miles run was 7,681, whilst consumption of petrol was 714 gallons.

SECTION VI.-LABORATORY WORK.

The usual bacteriological examinations are carried out by the Medical Officer of Health at the Laboratory in the Town Hall.

The examinations for diphtheria were:-

					Positive.	Negative.	Total.
Swabs f	rom	suspects			 24	240	264
"	,,	contacts			 16	395	411
,,	"	old cases	and	carriers	 9	34	43
		То	tal		 49	669	718

194 swabs came from outside Doctors.

Tubercle.—61 specimens of sputa were examined, of which eight were found to contain the tubercle bacillus.

Ringworm.—Hairs were examined in five instances; four contained the parasite.

Ophthalmia Neonatorum.—Six smears were examined, of which, two were positive

Typhoid.—Only one specimen of blood was examined; that was negative to B. Typhosus and the "A" and "B" varieties.

Diphtheria antitoxic serum in phials of 8,000 units and 500 units are stored at the Town Hall and at the Fire Station. It is issued free to medical men who are paid 3/6 for its administration. Sterilised syringes are also supplied.

No other serum has been asked for or issued during the year.



SECTION VII.

SANITARY ADMINISTRATION.

List of Adoptive Acts, Bye-laws, Local Regulations, etc., in force in the District. Acts.

ts.	Date of Adoption
Infectious Disease Notification Act, 1899	 13-1-1891
Infectious Disease Prevention Act, 1890	 13-1-1891
Baths and Washhouses Acts of 1847-78-82	 26-2-1901
Public Health Acts (Amendment) Act, 1890-	
Parts 2 and 3	 9-12-1890
Part 5	 23-4-1895
Public Health Acts (Amendment) Act, 190 Sections 35, 36, 37, 38, 39, 40, 41, 42, 43, 4	 e Order of the L.G.B., made Dec.

Public Health Acts (Amendment) Act, 1907,
Sections 35, 36, 37, 38, 39, 40, 41, 42, 43, 46
to 51 inclusive, comprising Part 3 relating to
Sanitary Provisions, the whole of Part 4
relating to Infectious Diseases, and the
whole of Part 5 relating to Common Lodging
Houses.

Edmonton Urban District Council Act 1898

24th, 1909, declaring

these Sections to be

in force in Edmon-

ton, came into operation Feb. 11th, 1910

re-laws.	Date when confirmed by the Board (L.G.B.).
Bye-laws with regard to removal of house	A SECURIOR DESTRUCTION
refuse and with respect to nuisances	31-8-1903
Bye-laws with respect to slaughter-houses	21-4-1904
Bye-laws with respect to pleasure-grounds	13-9-1904
Bye-laws with respect to houses-let-in-lodgings	19-10-1906
Bye-laws with respect to the management of	
sanitary conveniences and lavatories	23-1-1909
Bye-laws for the regulation of the offensive trade	
of a gut-scraper	15-9-1913
Bye-laws with regard to new streets and buildings	5-6-1904
Bye-laws with regard to common lodging houses	21-4-1904

Regulations and Orders.

By

These are issued from time to time by the Local Government Board, the Home Secretary and the Ministry of Health, and confer great power on local authorities; they are however applicable as a rule to the whole of the Country and Edmonton possesses no local regulations under which this Health Authority works.

Factory and Workshop Acts. — The following work has been carried out in connection with these Acts:—

Visits to Factories and Workshops			 318
" Outworkers			 136
Sanitary accommodation provided			 2
Water-closets cleansed or repaired		***	 19
New water-closet pans provided			 5
Water-closets lighted and ventilated			 2
Flushing apparatus repaired			 12
Lavatory basins provided			 3
Urinals cleansed			 8
Sink waste pipe provided			 I
Drains cleared or improved			 I
Paving repaired			 3
Ceilings repaired or renewed			 2
Sashes repaired			 I
Bakehouses limewashed			 24
Workshops limewashed			 15
Approach to mess-room cemented			 I
Bakehouse roof re-covered	***		 I
Workshop floor repaired			 2

The Engineer has kindly furnished me with the following notes re roads, sewerage and farm:—

Roads.—Several widenings and improvements have been carried out under the Unemployment Relief Schemes. Little Bury Street from Church Street to Salmon's brook has been widened to 40 feet; the old brick arch over the latter 20 feet wide, has been replaced by a steel trough structure with a width of 42 feet.

Improvements at road corners have been made in Bury Street and St. Mark's Road.

Cross Street has been paved with granite setts and Constance Road is being made up under the Private Street Works Act.

Sewerage.—Re-drainage works, comprising sections of new drains and sewers, have been carried out to 111 houses in Tillottson, Raynham and other roads.

Sewage Farm.—Experimental tanks have been in operation during the year to ascertain the results of treating the sewage by the Bio-æration process.

Preliminary drawings and reports have been prepared for a comprehensive scheme of dealing with the sewage of Edmonton and Southgate to the extent of $4\frac{1}{2}$ million gallons dry weather flow by systematic treatment in tanks and bacteria beds and also for the construction of deeper reservoirs so that the low level sewer may be emptied.

Refuse and its Removal.—For the last half-year, the removal of house refuse has been in the hands of a contractor, the Council no longer directly undertaking this work. All refuse is dumped at the Farm near the River Lea. Some more hygienic method of disposal will form one of the problems of the future.

Food and Food Stores, etc. — The supervision of slaughter houses, bakehouses, milk stores, etc., are mentioned in detail under the report of the Chief Sanitary Inspector.

Milk (Special Designations) Order, 1923.—Under this heading two licenses have been granted during the year; both of these are supplementary licenses, one for certified milk and one for pasteurised milk. No arrangements have been made with any Laboratory for bacteriological examinations as no principal license has been applied for.

Means of Transit to and from Town.—At certain times of the day, all means of transit are badly crowded in spite of the fact that several different lines of buses are now catering for the needs of the district.

There is no doubt in my mind that such overcrowding is an efficient means of spreading colds and other forms of respiratory infections.



SECTION VIII.-HOUSING.

During the year I have had frequent enquiries for adequate accommodation; parents with two, three or four children have been living in one room only, both day and night. During the last few years the Council have put up 232 houses at an average cost of £1,679 per house.

I have already, under Infectious Disease referred to the numbers of people in houses infected with scarlet fever and diphtheria during the past three years; 1,100 such houses had an average population of 7.1 against the census (1921) figure of 5.5 for the whole district.

As regards Tuberculosis, there were 1,036 persons in 767 rooms in the houses affected, giving an average of 0.74 room each person; the corresponding census figure for the whole district was 0.95.

In the Report to the Education Committee, I point out that from several aspects there is a relapse to those conditions of uncleanliness which the School Medical Service have been striving against for years—to my mind, a serious relapse.

Looked at simply from these two points of view, namely infectious illnesses and uncleanliness, I consider that the housing problem is an urgent one, and is related directly to the physical health of the individual.

The following are the particulars of the year's work in connection with housing:—

I.—Number of New Houses erected during the Year.

(a)	Lotal					 ***	24
(b)	As part	of a	Municipal	Housing	Scheme	 	0

II.—Unfit Dwelling Houses.

I. INSPECTION :-

human habitation ...

1265	(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)
70	(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910
72	(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for

(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading (found not to be in all respects reasonably fit for human habitation)	960
II. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES:—	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	698
III. Action under Statutory Powers:—	
A. Proceedings under Section 28 of the Housing, Town Planning, etc., Act, 1919:—	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	70
(2) Number of dwelling-houses which were rendered fit:—	
(a) By Owners (b) By Local Authority in default of Owners	76 —
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by Owners of intention to close	_
B. Proceedings under Public Health Acts:—	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	109
(2) Number of dwelling-houses in which defects were remedied:—	
(a) By Owners (b) By Local Authority in default of Owners	8 ₇
C. Proceedings under 17 and 18 of the Housing, Town Planning, etc., Act, 1909:—	
(1) Number of representations made with a view to making Closing Orders	_
(2) Number of dwelling-houses in respect of which	

(3)	Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses have been rendered fit	_
(4)	Number of dwelling-houses in respect of which Demolition Orders were made	-
(5)	Number of dwelling-houses demolished in pur- suance of Demolition Orders	_

The Report of the Chief Sanitary Inspector, which follows this, completes the account of the Sanitary Administration of the District.



EDMONTON URBAN DISTRICT COUNCIL.

REPORT

OF THE

Chief Sanitary Inspector

For the YEAR 1923.

PUBLIC HEALTH DEPARTMENT,

TOWN HALL, EDMONTON.

To the Chairman and Members of the

Edmonton Urban District Council.

LADIES AND GENTLEMEN,

I have the honour to present to you my Report on the work done in the Public Health Department for the year 1923 by your Inspectors and Staff.

MOTOR VEHICLES.

The Council's Ford vehicles (two bedding vans, one Dixie 'bus and ambulance) have been running well during the year.

The old Deasey ambulance, which was to be used as a stand-by only, has been doing the whole of the ambulance work for three months (i.e. while the new Ford Ambulance was lent for other service).

It made 57 journeys, and did its work exceedingly well. It will take patients up the hill to the Hospital on top gear and on less petrol. This good running condition is, no doubt, due to having an engineer-driver, who has done many important repairs to the vehicles while in the garage, which must otherwise have been done elsewhere.

DISINFECTING STATION.

The work of disinfecting the bedding is still carried out at Claverings Farm. The conversion of the temporary structure into a permanent building has much improved the working conditions.

The steam disinfecting apparatus has been in constant use for about 22 years, and up to the present, with minor repairs, is working well. It will shortly be subjected to a rigid test by the Boiler Insurance Co., when I hope it will again be found in perfect order.

The following is a list of the work carried out in connection with infectious disease:—

No. of journeys of motor ambulance to remove patients to hos	pital	 186
No. of journeys of bedding van to remove infected bedding		 300
No. of journeys of bedding van to return bedding		 286
No. of journeys of motor 'bus to fetch patients from hospital		 147
No. of patients returned to their homes		 202
No. of rooms disinfected for vermin		 20
No. of books disinfected		 112
No. of articles disinfected in connection with infectious disease		 2923
No. of articles disinfected in connection with phthisis		 967
No. of rooms disinfected in connection with infectious disease		 301
No. of rooms disinfected in connection with phthisis		 241
No. of rooms disinfected in connection with cancer		 6

DISINFECTANTS.

The public continue to avail themselves of the opportunity afforded them by the Council of obtaining disinfectants (powder and fluid) free of cost. The number of applicants during the year was 46,136, a decrease of 3,581 on the previous year.

The disinfectants are given out every afternoon between 4 and 5 p.m., Saturdays excepted.

The disinfectants are also supplied from the Public Health Department for disinfecting and deodorising house refuse, cleansing of street gullies, flushing of sewers, watering roads in hot weather, and for all purposes required by the Council.

MORTUARY.

During the year, 61 bodies were received into the mortuary, 41 inquests were held, and 37 post-mortem examinations were made; four bodies were

deposited owing to being of an infectious nature; 15 were deposited by the undertakers to await burial. One body was detained owing to decomposition having set in, and arrangements made for speedy internment.

PUBLIC LAVATORIES, ETC.

There are in the district six water troughs, two with drinking fountains attached. Also three separate drinking fountains, exclusive of those in the Park.

Much wilful damage is still being done, and we cannot catch the offenders.

The whole of the public urinals in connection with the public houses require much attention, as in many cases we find them much abused.

The Council's public lavatories are well patronised, but the amount realised from the lavatories and "wash and brush up" are greatly decreasing. The amount collected from the Angel Road lavatory during 1923 was £316 5s. 4d., and the amount collected from The Green lavatory during the same period was £308 12s. 5d.

Free W.C. accommodation is provided at these lavatories.

SLAUGHTER HOUSES AND FOOD INSPECTION.

At the present time there are only five slaughter houses in use; four licensed from year to year under the Public Health Acts Amendment Act, 1890, and one registered. This latter slaughter house has been in existence a great number of years. The access to the premises is bad, but very little slaughtering is done here.

Those licensed annually give the Council much more control, especially should they at any time desire to establish a public abbatoir.

No doubt the Contagious Diseases (Animals) Act lessened the slaughtering in the district to some extent during the year.

The number of animals inspected was:-

Oxen			 	 18
Cows			 	 3
Heifers			 	 3
Sheep as	nd La	mbs	 	 98
Calves			 	 3
Pigs			 	 726
		Total	 	 851

We still adhere to the practice of assisting the retailers to get the money returned if the articles of food on arriving in this district are found, on examination, to be found unfit for human food. This prevents, to a large extent, food of such a nature being exposed for sale.

In connection with meat and other foods, New Zealand, especially the City of Auckland, set us a good example. Not only must a licence be obtained from the City Authorities before the premises can be used for the sale or preparation of meat for human food, but the person occupying the shop must also be licensed, and the licences must be renewed in the month of January in each vear. Most stringent by-laws and regulations are in force there, and these provide for the cleanliness and health of persons handling food stuffs; the protection of food from vermin, flies and dust; and the suitability of premises used in connection with the sale, manufacture, preparation, storage and packing of food for sale. They also provide for the protection of meat, etc., in course of conveyance to shops or delivery to customers. They further provide that every person who engages in the manufacture, preparation, storage, packing, carriage or delivery of food for sale within the city, shall (when so engaged) maintain his clothing and his body clean. No person may use any animal, vehicle or receptacle in the carriage or delivery of any food within the city unless he at all times keeps the same clean; nor may he use any such vehicle or receptacle which at any time may have been used for the carriage of any matter whereby the wholesomeness, cleanliness and freedom from contamination of any food carried, or usually carried therein, would be endangered. Further, every person who sells within the city any meat or fish or any food which is ordinarily consumed in the state in which it is sold, shall protect such food, until it is delivered to a purchaser, from dust and flies, by storage in covered receptacles, by covering with gauze, or other effectual means; no vendor may carry such food through the streets until it is protected aforesaid, and no person may sell any food within the city so packed that it can come into contact with paper or other material which is not clean. Also the whole of the external openings of any room or place used for the sale or preparation of meat for human food which are not enclosed with glass, must be completely covered with wire gauze, so as to prevent, as far as practicable, the access of flies and dust; and every external door must be kept closed, save when in use for ingress and egress. And these are not all their by-laws respecting foods, but sufficient have been quoted to show that New Zealand is well in advance of us.

Unsound Food Examined, Surrendered and Condemned:-

January—96 tins condensed milk.

February—2 imported livers, I tin of corned beef.

March—I trunk herrings, I box Spanish onions, 7 boxes foreign tomatoes.

May—6 boxes imported apples, 56 boxes imported tomatoes.

June—1 bag periwinkles, 1 box "rock salmon," 1 crate of lemons.

July—3 boxes of lemons, I trunk of herrings, I box (20 lbs.) imported greengages.

July—I trunk of haddock.

August-1 trunk of monkfish.

September-1 trunk of catfish, 6 boxes of plums.

November—2 boxes of coal fish, I box of plaice, I trunk of haddock.

December-2 trunks of skate.

Herewith I append a statement of the work done under the Sale of Food and Drugs Act, by the Middlesex County Council Inspector for this District, kindly supplied by the Chief of the Public Control Department of the Middlesex County Council:—

Particulars relating to Samples purchased during the Year 1923.

Art	icle.			Ta	ken.	Adult	erated.
Milk					181		II
Milk, conden	sed mad	chine s	skimmed		2		-
Cream					4		I
Butter					9		-
Beer					2		_
Flour, self-ra					3		00-
Lard					2		-
Liquid Paras	ffin				I		_
Olive Oil					I		-
Oxide of Zin					I		-
Rice					I		-
Zinc Ointme	nt				2		-
					209		12
					THE THE	Terest -	Total of
	mber of					3	
	mber of			***		3	
Fin	es and	costs ii	mposed			£5 115.	6d.

DAIRIES, COWSHEDS AND MILKSHOPS.

We have only one registered cowkeeper in the district. The number of cows vary from 16 to 20, and these cows are out to graze during the greater part of the year.

There are 79 milksellers on the register, 19 of these are purveyors of sterilised milk in bottles. The business of selling bottled milk is greatly on the increase, and it is somewhat difficult to say who should or who should not sell it, but only those who keep their premises clean are put on the register and a condition is laid down in the licence that bottled milk must be sold direct to the customer, and not allowed to be opened on the purveyor's premises.

Nine persons have given up business or have been removed from the register.

OFFENSIVE TRADES.

Permission to establish the business of a fish fryer was granted in one instance during the year, so that we now have four who have been given permission since the Order came into force.

There are 12 who established this business prior to the Order being made, and these will come within the Bye-laws when put into force.

The new building erected for the business of a gut scraper and for which the Council granted permission, was finished early in the year. The work was commenced in March. The employees must appreciate the decided improvement in working under better conditions, which has done away with much of the nuisance inseparable from such a business.

The premises are regularly inspected during working hours, and the ventilating shafts for extracting the effluvia have always been found to be working satisfactorily.

SHOPS' ACT.

This Act, to my mind, needs considerable amendment, if it is to be properly administered. There are many opportunities for those who wish to evade the Act, and it is difficult to catch the offenders, especially is this so in the "mixed shops," who only sell certain articles after time to their known customers.

If it is necessary to close shops, why not make all shops close at one time. During the year much time was spent by your Inspectors in the evenings, in looking for delinquents. The little trader, who conducts his own business, is most affected by the Act. Especially is this so on Sunday, as in many instances it is the only opportunity they get of doing extra business.

However, a part-time Inspector has now been appointed to carry out this work, under my supervision.

Proceedings were instituted against five persons for contraventions:-

- 1 Stall-holder fined 5/- and costs.
- I ,, discharged on payment of costs.
- I Shopkeeper fined 10/- and costs.
- I ,, ,, 20/- ,,
- I ,, 10/-.

RAT AND MICE DESTRUCTION ORDER.

The rat nuisance has received much attention. In some instances where rats have made their appearance, on investigation, we have found this due to defects in the drainage, which we have had at once made good.

From my own observation, I find that using Red Squill bait preparation has destroyed a large number of rats, and where there are animals, it is fairly safe, where other poisons are very dangerous to use.

To keep these pests down, it is necessary to follow up the operation, for if only a few are left, it is not long before the premises become again infested.

The Middlesex County Council are still doing a great amount of good at the Council's Sewage Farm and buildings. During the year they have destroyed large numbers.

CANAL BOATS.

There were 19 registered boats inspected during the year, and only two contraventions, i.e., one defective cabin top and one boat not properly marked. This latter defect was due to the boat going out of dock before the painting was finished. These defects have since been remedied.

The registered boats chiefly using the Lea Canal are those from Ware and Hertford. I rarely come upon a boat from other districts.

SMOKE NUISANCE.

There has been very little cause for complaint during the year, as unfortunately, many factory chimneys are not now in use. One serious nuisance occurred, and although the height of the shaft was increased, the nuisance was not abated, as there were fumes being emitted that were a serious nuisance to the inhabitants in the vicinity.

However, proper plans have since been submitted for erecting a plant to deal with the smoke and also the fumes, and the same is now under construction.

GIPSIES.

These Nomads, as usual, have given us a deal of trouble during the year, and while they are allowed to roam about scot-free without paying rates and taxes, will continue to do so. There are a few good, clean gipsies, who occasionally visit the district and stay for a night, but most of those who hang about the district are decidedly filthy in person and habits.

Proceedings were instituted against three; one was fined £3 and ordered to vacate the land, and two failed to appear and warrants were issued for their arrest, but up to the present, they have not been seen.

DRAINAGE.

During the year, besides the ordinary work of repairs and drainage to property, the main and branch drains were reconstructed in the following roads:—

Tillottson Road			 	19 h	ouses.	
West Street			 	21	"	
Chauncey Street			 	9	"	
Victoria Road			 	4	,,	
Raynham Road			 	34	,,	
Beamish Road			 	12	,,	
Bounces Road			 	12	"	
	16 1	Fotal	 	III		

and in connection with these, the whole of the soil and ventilating pipes were tested, and where found defective, were either repaired or renewed. Waste pipes were also repaired, and in some instances, where necessary, new traps were provided.

INSPECTIONS. ETC.

The following is a summary of most of the work done in connection with the abatement of nuisances:—

Complaints				 	939
Infectious dise	ase			 	213
House-to-hous	e			 	72
Houses let in l	lodgings			 	10
Factories				 	130
Workshops	CONTROL TO			 	120
Outworkers				 	136
Schools				 	91
Dairies, cowsh	eds and m	ilksho	os	 	289
Offensive trade				 	86
Shops and stal	lls			 	209
Common lodgi				 	56
Sanitary conve	-	rinals	etc.	 	319
The second secon	omoneos, a	,	0001	 ****	
Stables				 	64
Piggeries				 	68
Gipsies				 	284
Petroleum				 	IOI
Shops' Act				 	178
General inspec	ctions			 	813

INSPECTION OF PLACES WHERE FOOD IS PREPARED :-

Butchers				 	 198
Fish shops		***		 	 34
Coffee shops				 	 17
Ice cream sh	ops			 	 41
Dairies, cow	sheds	and	milkshops	 	 289
Slaughter ho	uses			 	 304
Bakehouses				 	 68
Re-inspection	ns	***		 	 7613
Sundry visit	S			 	 1646

WORK DONE :-

Houses or parts of houses repaired				598
Drinking water cisterns covere	d, cle	ansed	or	
repaired		***	***	27
Water fittings repaired				88
Water taken from main				9
Water supply restored				2
Drains examined, tested or expose				402
Drains cleared, trapped or repaire	d			556
Drains reconstructed	***	•••	***	130
		********		76
Chambers sealed down		*** 111 1		53
Soil and ventilation pipes renewed	or rep	paired		77
Water closets repaired, cleansed o	r impr	oved		267
Flushing cisterns repaired				182
Waste pipes renewed or repaired				114
Sinks repaired				20
Roofs repaired				398
Gutters and rain water pipes repa	ired		***	291
Yards paved or repaired				205
Scullery floors repaired				91
Spaces under floors ventilated				28
Dampness remedied				60
Ventilation improved				II
Floors repaired				65
Coppers and stoves repaired				291
New dustbins supplied				281
Accumulation of refuse removed .				34
Nuisances from animals abated				
Gipsies removed				208
Other nuisances abated				791
Rooms cleansed after infectious di				212
Preliminary notices served				1099
Statutory notices served				1053

The systematic house-to-house inspection has practically ceased, but where necessary, we are applying the Housing, Town Planning Act, as this facilitates getting work done that would otherwise be difficult to deal with.

I sincerely hope the coming year will see the erection of a number of houses, for to deal with overcrowding under the present lack of house accommodation is practically impossible; we endeavour to see that cleanliness is observed.

It gives me much pleasure to express my appreciation of the valuable help given by the Inspectors in carrying out the work recorded in this Report.

I desire to express my thanks for the continual support I have received from the Committee and the Council in the discharge of the numerous and varied duties pertaining to the Department.

I have the honour to be, Ladies and Gentlemen,

Your obedient servant,

RICHARD JOHN BUTLAND, Chief Sanitary Inspector.



SCHOOL MEDICAL SERVICE.

SUMMARY.

Routine	Inspections							 3.557
Special	"							 2,623
Re-inspe	ections							 6,485
Attenda	nces—Minor	Ailme	nts C	linic				 34,400
,,	Ophth	almic		,,				 908
,,	Denta	1		11				 3,391
Visits to	Schools by	Nurses	(hea	d inspec	tion)			 158
Children	cleansed							 164
Visits of	Nurses to h	omes						 2,356
Operatio	n on Tonsils	and A	deno	ids				 129
Glasses	prescribed as	nd rece	ived					 318
Treated	by Dentist							 2,012
Total me	eals							 81,510
Milk giv	en (cupfuls)							 10,205
	r oil emulsio							 116
Children	received Sa	natoriu	m tre	eatment	through	the C	ounty	 24
In specia	al schools							 51

REPORT OF THE WORK

OF THE

SCHOOL MEDICAL SERVICE.

GENERAL INFORMATION.

NUMBER OI	3 S	SHOC	DLS	AND	Acc	MMOS	ODA	TI	ON.
	. I	DEPART	MENTS			Ассомы	IODATI	ON.	
	Boys	Girls	Infants	Mixed	Boy	s Girls	Infan	ts	Mixed
Provided	7	7	7	3		8 3,009	100		1,121
Non-provided	2	2	2	I	51	8 662	66	7	336
	9	9	9	4	4,02	6 3,671	4,13	I	1,457
					J	une, 1914.	Dec.	31st	, 1923
Number of chi	ildren o	n rolls				13,462	I	0,9	18
Estimated mic	l-year p	opulati	on			68,203	6	9,59	90
Percentage of	childre	n to po	pulatio	n		19.7		15	.7
Average numb	er on r	olls du	ring th	e school	year e	nding			
March 31	st, 1923	3					I	1,35	58
Average atten	dance s	ame pe	riod				I	0,3	80
Births for the	years 1	910 and	d 1919			1,8	78 &	1,2	37
Special School	s.								
Nassau House	Enfie	ld for	fooble	minded			Accom	60	
Deaf and Dun								70	
2011 1111 2 111									
Total cost of medic	al carv	ice for	the ve	ar endin	a Marc	h	£	S.	d.
	ar serv		the yea	ar cham	5 maic		3,202	2	II
Total receipts from		ion of s	pectac	les, treat	tment.	tc.	106		9
Cost per child in a								IO	
Cost per child at N								10	0
Cost per child at I								0	0
Education Rate fo			4						1-15-00-
First half-year			Secon	d half-ye	ar—Is.	11.16d.	0	4	I

The work of the School Medical Service has gone on smoothly during the year; no alteration in method or routine has been adopted. Co-ordination with other similar activities carried out by the Council has been maintained as well as possible; it must be remembered that there are three separate Committees controlling these activities, namely, the Education, the Public Health, and the Maternity and Child Welfare Committees; that the former is controlled by the Board of Education and the two latter by the Ministry of Health. Overlapping with the Guardians cannot be remedied; the Education Committee feeds necessitous school children and gives the ill-nourished ones cod liver oil and milk.

There are no nursery schools in the district, and children are admitted to the elementary schools at the age of five years; but taking into consideration the decrease in the number of infants attending school, I would suggest a revision of such a rigid rule, especially during the Summer months. There would be an advantage from the medical point of view—the children would come under supervision at an earlier age.

Debilitated Children have cod liver oil emulsion administered to them on the school premises; if necessitous, they are also given free dinners, breakfasts, and a hot cup of milk in the morning. During the year, 10,205 cups of milk have been given, the cost to the Committee being £17 7s. 7d. for the year ending March 31st, 1923; the corresponding cost of the cod liver oil was £18 5s. 3d. The dinners are mentioned in detail later, under provision of meals; 116 children have received emulsion.

School Hygiene.—During the year, new dual desks, to replace the long desk, have been supplied for the top class in each of three departments, and an infants' classroom has been furnished with small tables and chairs. An assistant teachers' room has been provided at Raynham Road boys' school.

Outstanding defects are the condition of the playground of St. James' school, and the want of means in some of the cloak rooms for drying children's coats.

Medical Inspection has been carried out as detailed in last year's report. The Board's schedule has been followed and the three age groups have been duly examined on the school premises.

There has been only one refusal, whilst the exclusions at routine inspection have been eight in number, comprising one case each of chicken-pox, whooping cough, tonsillitis, bronchitis, ringworm of the head, appendicitis, and two cases with febrile symptoms.

Parents present at the inspection have been 79, 56 and 36 per cent respectively for the infants, 8-9 year old group and leavers: a very satisfactory figure.

The Committee has this year carried out a scheduling of the whole district of all children from the age of two up to 14 years. All absentees of school age have been reported, so that Table III is fairly correct as regards defective children not at school. Regarding any possible defectives who attend school, the Head Teachers are invited to submit these at any routine inspection or send them to the School Clinic for medical examination.

Children with symptoms suggestive of any infectious complaint are sent to the Town Hall rather than the clinic, so as to avoid mixing with other children.

No schools or departments have been closed during the year: individual exclusions have been carried out under Art. 53 (b) of the Code.

REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION.

Table II. gives these defects, and I propose to take them seriatim. As Dr. Strong has been carrying out this inspection for several years past, a certain standard must have been adopted by him, and I will compare the findings of 1923 with those of the previous three years.

Malnutrition.—There is a slight increase as compared with previous years, the 8-9 year old group furnish 42 per cent., the leavers 30 per cent., and the infants only 28 per cent. It is noteworthy that the 8-9 year old group were born during the war and for the next few years were living under war conditions.

Uncleanliness.—These figures shew a marked increase over those of the previous two years, and have approximated those of 1920. One may offer an explanation—that it is due to a decrease in the morale and social responsibility, associated with a lack of employment in the district. Whatever the explanation, it means a serious backslide into conditions prevailing prior to medical inspection, and from which it was hoped that we had emerged once and for all time.

Skin Complaints.—Whilst ringworm of the skin remains fairly steady, ringworm of the scalp—a far more serious complaint, has decreased from 103 cases in 1920, 71 in 1921, 52 in 1922, to 50 in 1923.

One hardly expects to be free of this complaint as the condition is not recognised in the early stages: the spores produced are very numerous and are easily disseminated.

Scabies or itch, a disease very prevalent during the early years of the war have decreased from 165 cases in 1920 to 11 in 1923.

External Eye Conditions.—The most common of these is inflammation of the lids, frequently associated with uncleanliness. These conditions are twice as numerous as in 1920.

Defects of Vision and Squint remain much the same as in previous years.

Otitis Media.—There has been an increase in the number of cases this year which, compared with the number in 1920, forms a marked increase. This is a disquieting feature, as so many of these cases become chronic and the condition may cause serious deafness or endanger life. This increase is not due to scarlet fever, but it does depend on infective conditions in the naso-pharynx perhaps due to a faulty environment, but certainly due to a faulty hygiene of the nasal passages, due to the neglect of the pocket handkerchief and the still prevalent use of the dumb teat.

Tonsils and Adenoids are slightly in excess this year; this affection and the previous go hand in hand. One advantage of a routine inspection at an earlier age would be that these defects might be remedied at an earlier age; the same remark is equally applicable to

Dental Disease.—Of the 344 children referred at routine inspection for dental treatment, 42 per cent. were infants, although they only formed 28 per cent. of the total inspections.

This in spite of the fact that the Dentist carries out his primary inspection amongst the infants only; the older children mentioned in Table IV., Group IV. are re-inspections of children previously treated.

Heart and Lung Disease.—The findings this year are very similar to those of the previous three years.

Nervous System.—Defects of this system have shewn a marked decline; this is the reverse of what one would have expected; many teachers have referred to the alteration in the temperament and the nervous stability of the present day school child. Want of attention and difficulty in self-control have been noted, and the teachers in infants' departments say it is much more difficult to teach the present day child.

INFECTIOUS DISEASE.

There has been no serious outbreak of infectious disease during the year. Scarlet fever and diphtheria are still diminishing; mumps and chicken pox died down in the earlier months; whilst localised outbreaks of measles and German measles occurred in the later months. Respiratory complaints, including influenza, have not been prevalent; whilst whooping cough has furnished comparatively few cases during the year.

Contacts of scarlet fever are excluded a fortnight; contacts of diphtheria are promptly swabbed and usually get back to school with the loss of five or six sessions at the most. The contacts of measles and whooping cough are excluded from the infant departments alone.

Efforts are made to get into touch with cases of measles as quickly as possible by the school nurses, as it is then the greatest good can be done. Visits by the school nurses for these infectious complaints were as follows:—

Measles	 	307
Mumps	 	17
Whooping cough	 	106
Chicken pox	 	64

No action was taken during the year under Art. 57 or 45 (b) of the Code. The exclusion of individual children is made under Art. 53 (b).

FOLLOWING-UP.

Defects found during the routine inspection are entered in a special book for each Department, and kept on the school premises. Cards for the same children are kept at the School Clinic. Thus the teachers have a list of the defects, and it is readily noticed when these defective children fail to come to the Clinic for treatment. The following-up include all such cases; those who drop treatment before being cured: special cases where a home visit is deemed necessary, etc.

The total number of visits paid to the home under this heading is 1,862.

MEDICAL TREATMENT.

Minor Ailments.—Dr. Strong attends the School Clinic four mornings a week, whilst on the other two mornings, the nurses carry out treatment already ordered.

The total attendances during the year were 34,400, being an average of 112 a day for 307 days. During the summer holidays, the number dwindles to about 40 a day: the greatest number is usually on Wednesday, when frequently 180 attendances are made, and the three nurses are fully occupied: the three nurses are at the clinic also on Saturday morning: on the other four mornings there are two.

In June, the Education Committee introduced the following charges:-

(1) Free treatment in those cases where the weekly income, after deducting rent, does not exceed the following allowances:—

		£	S.	d.
Parents:—Father	 	 I	0	0
Mother	 	 0	12	0
each Child	 	 0	6	0

(2) If the family income be in excess of this:—

Free treatment for the first two weeks.

1/- for a longer period up to three months.

2/- ,, , , six ,,

Tonsils and Adenoids.—The operative treatment of these cases have been carried out at the Prince of Wales' Hospital, Tottenham, the charge to the Committee being 10/- per case.

The Council's ambulance takes the patients home, and the school nurse visits them the next day.

The charge to parents introduced this year is 5/- per case to those parents whose income is in excess of the scale just mentioned, free to others.

Tuberculosis.—Details regarding those children suffering from active tuberculosis, pulmonary and non-pulmonary, are given in Table III.

Close co-operation exists between the School Medical Service and the Tuberculosis Dispensary. Dr. Evans, who is in charge of the latter, takes a keen interest in the children brought to his notice, and keeps under careful observation those with doubtful signs. There appears to be no difficulty in getting sanatorium treatment for those children who require it.

The following notifications regarding children of school age have been received during this year:—

			Boys.	Girls.	Total.
Tuberculosis	of lungs		9	13	22
,,	" bones and joir	nts	4	I	5
,,	" glands		-	-	-
"	" other forms		2	- '	2
			15	14	29

Of the above, 24 have received or are receiving treatment in Sanatoria, etc., under the County's scheme.

Children with doubtful signs coming under Dr. Evans' observation are referred by him to the School Clinic for the administration of cod liver oil.

Dr. Strong has been using a tuberculin ointment in the treatment of some cases of phlyctenular conjunctivitis and enlarged cervical glands, and I append his observations:—

"Since November 1st, I have been using a 10 per cent. Tuberculin ointment (Duncan and Flockhart) on the following cases:—four children with enlarged glands, three with severe phlyctenular conjunctivitis, and four with doubtful signs of pulmonary tuberculosis. All these cases improved considerably and at a greater rate than other similar cases not receiving this particular form of treatment.

Skin Diseases. External Eye Disease and Otitis Media are treated at the Minor Ailments Clinic.

Suitable cases of ringworm of the scalp are sent to the Prince of Wales' Hospital, Tottenham, for treatment by X Rays. The charge to the Authority is 25/-, but no charge is made to the parents.

Vision.—Dr. (Miss) Smith-Clark attends one session weekly to see cases of defective vision. An optician attends the same afternoon to take measurements and the details of the prescription.

No charge is made for the services of the Oculist, but parents whose income is above the scale previously mentioned have to pay the full cost of the spectacles: this is a contract price.

The Head Teachers of the various Departments are notified monthly as to those children who are required to wear glasses whilst at school work. Table IV, Group II, gives details as to the work accomplished during the year.

Dental Defects.—These are treated at the School Clinic as described in last year's Report. Mr. Willis attends for five mornings and one afternoon, this latter being devoted to gas operations, the anæsthetic being given by Dr. Aufranc. Table IV., Group IV., gives a record of the work done.

The charge is 6d. per attendance, but not to exceed 1/-; whilst treatment is free for those coming under the scale previously mentioned.

Crippling Defects and Orthopædics.—Children suffering from these defects attend various hospitals for treatment, including the North Middlesex Hospital (Guardians) in Edmonton, where a good many cases have been receiving massage and electrical treatment.

One child has been helped financially to obtain leg irons enabling her to get to school.

The provision of assistance for these children is at present being discussed by a Sub-Committee appointed for the purpose of enquiring as to facilities for the education of all physically defective children in the district. Its Report will come before the full Committee early in 1924.

OPEN-AIR EDUCATION, Etc.

There are no open-air schools or class-rooms; there are sheds suitable for open-air classes in most of the playgrounds, and should prove serviceable.

No school journeys, camps, etc. have been undertaken during the year.

There is no Area Organiser of Physical Training. Drill, if possible, is taken in the open-air, and the syllabus of the Board of Education is followed.

The elder children are taught swimming in the Council's baths; there is a teaching mistress for the girls, but the respective masters take their own classes.

PROVISION OF MEALS FOR NECESSITOUS CHILDREN.

During the year, two Centres have been in use; one in Upper Edmonton and the other in Lower Edmonton, both under the direct supervision of the Education Committee through a Supervisor, Mr. Peters.

A Central Care Committee, partly of Councillors and partly of Head Teachers, supervises administration, whilst applications come before a School Committee representing each school.

The scale of family income is the same as given in last year's Report. The total number of children fed was 517, whilst meals given were:—

			Breakfasts.	Dinners.
St. Michael's Hall	 		-	43,538
Pymmes Park	 ***	***	2,214	35,762

The cost per head is 5d.

During the year milk has been ordered necessitous and ill-nourished children: this is warmed on the school premises and given during the morning. The children have benefited by this to the extent of 10,205 cup-fuls, and there are at present 71 children on this list.

Co-operation between parents, teachers, attendance officers, and the medical staff is a close one: it is very necessary for us in order to carry out our work to the best advantage of the child, and we are grateful for all help accorded us.

There are no after-care Committees, nor is there co-operation with any voluntary body.

THE DEFECTIVE AND ABNORMAL CHILD.

These children, though forming a small percentage of the whole number of children, require a good deal of attention devoted to them, and form a serious problem for the Education Authority, and through them for the community at large.

Provision is made for the deaf child and for the feeble-minded, whilst four children have been in residence at the East London Home and School for the Blind, Clapton.

The deal and the deaf and dumb are sent to the Special School at Tottenham, travelling by train under the care of a guide. At the end of the year there were four boys and seven girls on the roll, whilst there are at the elementary schools four children who should attend this school when they reach the age of seven years.

A representative After-care Committee should be formed to look after these children at the age of 16 years in order to see that they get suitable employment on leaving school. The Headmistress of this school interests herself in the after-welfare of her pupils, and to her the best thanks of this Education Committee are due. The mentally defective children go by tram to Nassau House, Enfield Highway, under the charge of two guides. The usual curriculum is carried out, and towards the end of the year, the joint Committee (Enfield and Edmonton) passed plans for a hut to be erected in the garden for the purpose of teaching carpentry.

The number of Edmonton children on the books at the end of the year was 27 boys and 10 girls.

During the year the School Medical Officer has examined 43 boys and 22 girls for mental deficiency, 12 of these on more than one occasion.

As a result, 18 boys and six girls have been certified as feeble-minded, and 10 have been notified to the County, two of these being moral imbeciles, one already at Nassau House and one in an elementary school.

The formation of an After-Care Committee was discussed a year ago, but it has not been formed yet.

There is a type of child which is very difficult to cater for, and that is the morally depraved. It is not associated with mental deficiency, although the child may be backward, and hence is not notifiable to the County Authority. Two such cases have been brought to my notice during the year, but we are unable to render any assistance. Such children take in the unwary by their lies, posing and cunning, and will eventually become parasites on the community.

Secondary Schools.—Dr. Strong carries out medical inspection in two of the three secondary schools in Edmonton. His Report is furnished to the County Authority.

Other Schools.—There are no Nursery or Continuation Schools in the District.

Employment of Children of School Age.—During the year, Dr. Strong examined 51 children under the bye-laws. The physical condition of all of them was satisfactory.

The following Four Tables are in accordance with instructions from the Board of Education. A few explanations are required.

Table I.—Children are examined in the school at special age groups, as entrants, intermediate (8 to 9 years) and leavers, this latter being those who-

arrived at the age of 12 years. All other cases seen for whatever purpose are "specials." These latter and the routine children if seen by any member of the medical staff are re-inspections. Thus cases referred to the Eye Specialist or to myself at the Town Hall are counted as re-inspections.

The re-inspections do not give the total number of children attending the clinic, but only those seen and examined by a doctor. Total attendances at all the clinics for the year were 38,699.

Table II.—The only point about this table is that children under observation may on re-inspection be found worse, and treatment is then necessary.

Table III gives details of physically and defective children in the District. The differentiation this year between infectious and non-infectious tuberculosis in children is new.

With non-pulmonary tuberculosis, the distinction is easy, the presence or otherwise of a discharging sinus or sore. For pulmonary tuberculosis the presence or otherwise of the bacillus in the sputum has been adopted as the criterion.

Table IV.—This table does not necessarily correspond to the number of defects in Table II. Firstly, some defects were existing from the previous year; conversely, some of the defects found towards the end of the year have not been treated yet; secondly, some of the "observation" cases of Table II have, on re-inspection, required treatment.

Group IV requires explanation. For purposes of dental inspection, the routine age group is those under seven years, and those over that age who have been treated by him previously. It includes all children under seven years who, on examination by Dr. Strong, or myself, have been referred to the Dentist for treatment.



TABLE I.

RETURN OF MEDICAL INSPECTIONS.

"A."-Routine Medical Inspection.

NUMBER OF CODE GROUP INSPECTIONS:-

			Boys.	Girls.	Total.
Entrants		 	475	527	1,002
Intermediates		 	627	609	1,236
Leavers		 	673	646	1,319
	Total	 	1,775	1,782	3,557

NUMBER OF OTHER ROUTINE INSPECTIONS:-

NIL.

"B."-Other Inspections.

Number of Special Inspections	 		 2,623
Number of Re-Inspections	 	•••	 6.485
			9,108

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR, 1923

				No. of	defects	No. of	
DEFECT	or Diseas	SE.		Requiring Treatment	Requiring to be kept under Observa- tion	Requiring Treatment	Requiring to be kept under Observa- tion
	(1)			(2)	(3)	(4)	(5)
Malnutrition				 33	365	100	4
UNCLEANLINESS-				33	3-3		7
Head				9	188	30	3
Body				5	57	9	2
SKIN-						.0	
Ringworm Scalp Body					_	48 80	
Scabies	::	• • •			_	10	
Impetigo		••		-	_	438	
Other diseases (non-ti	aberculous	3)		6	I	362	6
Eye-		,	-			3	
Blepharitis				. 73	_	169	_
Conjunctivitis					-	96	
Keratitis					-	-	-
Corneal Opacities					I	7	
Defective Vision				1000000	147	202	7
Squint					16	18	-
Other conditions				. 3	3	21	I
Ear— Defective hearing					***	08	
Otitis Media					19	98 186	
Other Ear diseases					7	I	
Nose and Throat—						1	
Enlarged Tonsils only	y			. 25	151	35	_
Adenoids only				1000	2	10	_
Enlarged Tonsils and	Adenoids				8	59	3
Other conditions					2	127	3 8
Enlarged Cervical Glands	(non-tube	erculous)			4	31	IO
Defective Speech					11	-	-
Teeth—Dental Diseases				. 344	6	91	-
HEART AND CIRCULATION				1			
Organic Heart Diseas					18	II	1
Functional Heart Dis	sease				18	7	3
Anæmia Lungs—				· I	3	11	-
Bronchitis					20	96	
Other non-tuberculou	e diseases			I	20 I	26	2 2
Tuberculosis-	u diocases				-	20	2
Pulmonary—Definite					2	I	
Suspecte					6	21	2
Non-pulmonary-Gla					I	-	_
Spi	ne				_	2	-
Hip					-	3	-
	er bones a	and joints			-	-	-
Ski					-	-	-
	ner forms				-	I	-
NERVOUS SYSTEM-				14 14 10	1		
Epilepsy	**				6	3	-
Chorea Other conditions						10	2
Deformities—		**			15	7	7
Rickets					-		1
Spinal Curvature	**				3	4	
				. 2	12	24	_ I
Other forms							

TABLE II.

B.—NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT

(excluding uncleanliness and dental diseases).

		196	Number	of Children.	Percentage of children	
Group.		History	Inspected	Found to require treatment	found to require treatment.	
CODE GROUP:						
Entrants		**	1,002	102	10.1	
Intermediates			1,236	167	13.5	
Leavers			1,319	205	15.5	
				7.00	HARDEN PROPERTY.	
Total (code groups)			3,557	474	13.3	
Other routine inspec	tions				1200	

TABLE III. RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

			Girls.	Boys.	Total.
cluding blind).	Suitable for training in a school or class for the totally blind	Attending certified schools or classes for the blind Attending public elementary schools At other institutions	2 -	2 1 —	4 1 —
Blind (including partially blind).	Suitable for training in a school or class for the partially blind	Attending certified schools or classes for the blind	_ _ _ _	10	- 13 -
ding deaf	Suitable for training in a school or class for the totally deaf or deaf and dumb	Attending certified schools or classes for the deaf	4 3	7 1 —	11 4 —
Deaf (including dumb and partiall	Suitable for training in a school or class for the partially deaf	Attending certified schools or classes for the deaf	4 -	_ _ _ _	6 -

TABLE III (Continued).

		TENOT BUILDY	Boys.	Girls.	Total
Mentally Defective.	Feebleminded (cases not notifiable to the Local Control Authority)	Attending certified schools for mentally defective children Attending public elementary schools At other institutions	26 4 1	10	36 4 1
	Notified to Local Control Authority during the year	Feebleminded	2 2 —	_ 6 _	2 8
	Suffering from severe epilepsy	Attending certified special schools for epileptics			_ I
	Suffering from epil- epsy which is not severe	Attending public elementary schools At no school or institution		2	3
	Infectious pulmon- ary and glandular tuberculosis	At sanatoria or sanatorium schools approved by the Ministry of Health or the Board			
	Non-infectious but active pulmonary and glandular tuber-culosis	At sanatoria or sanatorium schools approved by the Ministry of Health or the Board At certified residential open air schools At certified day open air schools At public elementary schools At other institutions At no school or institution	5	8 - 3 - 4	13 - - 3 - 6
rnysicany Defective.	Delicate children (e.g. pre or latent tuberculosis, malnutrition, debility, anæmia, etc.)	At certified residential open air schools At certified day open air schools At public elementary schools At other institutions At no school or institution	61 		
Fuysica	Active non-pulmonary tuberculosis	At sanatoria or hospital schools approved by the Ministry of Health or the Board	2 _ _ _ 2		2 - - 2
	Crippled children (other than those with active tuber-culosis disease), e.g., children suffering from paralysis, etc., and including those with severe heart disease	At certified hospital schools At certified residential cripple schools At certified day cripple schools At public elementary schools At other institutions At no school or institution	1 - 9 - 6	6 - 5	1 - 15 - 11

TABLE IV. RETURN OF DEFECTS TREATED DURING THE YEAR 1923.

TREATMENT TABLE. Group I. Minor Ailments (excluding uncleanliness).

		per of Detects treated, treatment during the	
Disease or Defect.	Under the Authority's Scheme.	Otherwise.	Total.
SKIN—			
Ringworm—scalp	 38	17	55 81
,, body	 79	2	
Scabies	 II	I	12
Impetigo	 445	13	458
Other skin diseases MINOR EYE DEFECTS	 336	15	351
(external and others)	 340	II	351
MINOR EAR DEFECTS	 352	16	368
(minor injuries, etc.)	 521	65	586
TOTAL	 2,122	140	2,262

Group II.—Defective Vision and Squint

(excluding Minor Eye Defects).

	Nu	mber of defects dealt	with.	
Defect or Disease.	Under the Authority's Scheme.	Submitted to refraction by private practitioner or at hospital.	Other- wise.	Total.
Errors of Refraction (including Squint) Other defects or diseases of the eyes)	339	12 I	_	35 ¹
TOTAL	364	13		377

(a) Under the Authority's Scheme ...

.. 318

.. ..

Group III.—Treatment of Defects of Nose and Throat.

	Number of	DEFECTS.		
Receiv	ed Operative Treatment.			
Under the Authority's Scheme. In Clinic or Hospital.	By Private Practitioner or Hospital apart from the Authority's Scheme.	Total:	Received Other Forms of Treatment.	Total Number Treated.
129	7	136	123	395

Group IV.—Dental Defects.

(1) Number of Children who were:-

(a) Inspected by the Dentist:-

	and clauses with the markings	Aged.					
	(5.	150	1			
		6.	297				
		7.	339				
	cirrorgaments unalled by the	8.	431				
	Routine Age Groups:	9.	221	-	Total		1604
		10.	112				
	- India only and	II.	53				
		12.	I				
	-11-11-11-11-11-11-11-11-11-11-11-11-11	13.	-				
		14.	-)			
	Specials						408
			41.0				
		Grand	Total				2,012
						-	
	(b) Found to require treatment					•••	1,843
	(c) Actually treated						1,483
	(d) Re-treated during the year	r as t	he res	ult o	f period	dical	
	examination						219
(2)	Half-days devoted to-Inspection			19			
,	Treatment			248			
					Total		267

(3)	Attendances made by	y children for tr	eatment	mines!			3,382
(4)	Fillings—	Permanent to	eeth	494			
		Temporary to	eeth	430			
				Charles of	Total		924
(5)	Extractions—	Permanent to	eeth	566			
		Temporary to	eeth	4,365			
	A STREET OF STREET				Total	•••	4,931
(6)	Administrations of				TD-4-1		
	tractions				Total		937
(7)	Other operations—	Permanent to					
		Temporary t	eeth	135			
					Total		150
(1)	Group. Y.—Und						
	the School		1			***	14
(2)	Total number of ex	aminations of	children	in the	schools	by	
. ,						-,	
(3)	School Ival	ses					18,000
							18,000 2, 069
	Number of individu	al children foun	d unclea	n			
(4)	Number of individu	al children foun	d unclea	n	 nade by	the	
	Number of individu Number of children Local Edu	al children foun cleansed under cation Authorit	arrange	n ments n	ade by	the	2,069
(4)	Number of individu Number of children Local Edu Number of cases in (a) Under the	al children foun cleansed under cation Authorit which legal pro	arranger y occeedings	ments n	ade by	the	2,069





Egham Urban Sanitary District.

Report

TO THE URBAN DISTRICT COUNCIL OF

Egham, Hurrey,

FOR

THE YEAR ENDING, DECEMBER 31st, 1923,

BY

G. TREW CATTELL, M.D., D.P.H.,

Medical Officer of Health.

Egham Urban District Council.

Public Health Staff:

Medical Officer of Health—G. T. CATTELL, M.D., D.P.H., Cantab. Sanitary Inspector, &c.—A. P. Sturt, A.R.S.I., Both whole time.

Inspector of Cowsheds & Dairies—A. E. WILLETT, part time.
Inspection of Food, Health Visitors & Special Nurses are administered by the Surrey County Council.

GENERAL STATISTICS.

Area of District							7,786
Land, 7,621 Acres.			In	land W	ater, 1	65 Ac	res.
Population (1921)							13,735
Nett Population afte	r dedu	cting I	nmates	of Ins	titution	ns, 12,	865.
Estimated Number of Inf							
Giving a Density of Occ							
Rateable Value							
Sum repr						,	

GEOLOGICAL CHARACTER—East of the London and South Western Railway, the district is on the river drift gravels. To the West of this line it is mainly on the Bagshot formation, except between Englefield Green and Virginia Water where the London clay prevails.

POPULATION—In the last ten-year Census period—1911-21, there was an average increase of 118-4 persons per annum.

During the year 1923 the total number of deaths registered in the district of Egham was 133, of these 14 were persons temporarily residing in the district, but actually residents of other places. This number of deaths has to be deducted, and the deaths of 37 persons belonging to Egham who died while staying away from home added, thus making the nett deaths for the year 1923, 156.

The district is essentially residential in character, and with the exception of one engineering firm no large industries are carried on.

During the year 220 births were registered, making the number of births over deaths 64.

The estimated nett population for the year is 13,620.

HOUSING—The condition of the district for the year under review has little changed from the preceding year. Fifty-three buildings were erected during 1923 by private enterprise, twenty-one being of a temporary nature, viz., timber and asbestos construction.

UNFIT DWELLING-HOUSES.

I.-Inspection.

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	176
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	15
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	6
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	49
II.—Remedy of Defects without Service of Formal Notices.	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	39
III.—Action under Statutory Powers.	
A. Proceedings under section 28 of the Housing, Town Planning, &c., Act, 1919.	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	_
(2) Number of dwelling-houses which were rendered fit-	
(a) by owners (b) by Local Authority in default of owners	_
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	_
B. Proceedings under Public Health Acts.	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	
(2) Number of dwelling-houses in which defects were remedied—	
(a) by owners	-
(b) by Local Authority in default of owners	
c. Proceedings under sections 17 and 18 of the Housing, Town Planning, &c., Act, 1909.	
(1) Number of representations made with a view to the making of Closing Orders	_
(2) Number of dwelling-houses in respect of which Closing Orders were made	_
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	
(4) Number of dwelling-houses in respect of which Demolition Orders were made	_
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders	

SEWERAGE AND SCAVENGING—Dry scavenging is carried out by the Authority. In cases where difficulty arises in the emptying of pail closets this also is undertaken by the Council.

No part of the district is sewered. The Council possess a Motor Vacuum Emptier for emptying the contents of cesspools. The plant for disposal of sewage collected is still incomplete. The approximate number of the various forms of closet is as under:—

Privies	 	60
Pail Closets	 	292
Cistern-flushed Water Closets	 	1,329
Hand-flushed Water Closets	 	1,398

The question of the provision of covered receptacles for the temporary deposit of refuse is being enforced, owners of property being liable to provide the necessary articles. The estimated number of receptacles provided during the year is 350.

WATER SUPPLY—The South-Western Suburban Water Company supply the greater part of the district. The analytical results of the examination of the water are good. No cases of disease have been traced to this source. The outlying portions of the district rely almost entirely on wells. Eight samples were submitted to analysis, four of which were condemned.

FOOD—Thirty samples were submitted to analysis under the Food and Drugs Act, Including Milk. Six cases of Adulteration or Deterioration were detected, and in one case a prosecution and conviction followed.

NURSING—For general home nursing there are two efficient trained nurses provided by the Egham District Nurses' Fund. These do excellent work.

For infectious cases the Isolation Hospital provides the necessary treatment.

Midwives, seven in number, are under the supervision of the Surrey County Council who also administer the clinics and treatment centres.

There is no special institution for unmarried mothers or homeless children. These are dealt with at the Union Infirmary.

A horse ambulance is provided for conveying infectious cases to the Hospital.

ISOLATION HOSPITAL—The accommodation of the Hospital is for 18 beds.

During the year 14 cases of diphtheria, 15 cases of scarlet fever, and 4 of enteric fever were treated in the Hospital.

Smallpox cases are sent to the Surrey County Smallpox Hospital at Clandon.

Bacteriological diagnosis is carried out by the Camberwell Research Laboratories in cases of Diphtheria, Tuberculosis and other diseases where necessary.

NOTIFIABLE INFECTIOUS DISEASE—The number of cases of infectious diseases is more than in the last three years. The subjoined table gives the figures for the year and those for 1921 and 1922:—

1921. 33 65	1922. 20	1923. 20
65	00	
	62	14
3	5	5
	_	6
_	_	1
_	-	_
15	13	13
4	5	4
_	_	
_		_
_	_	2
_	_	_
15	38	18
4	_	_
2	-	-
141	143	83
	4 - - - 15 4 2	4 5

SCARLET FEVER—The cases were evenly distributed throughout the year and were of a mild type, no fatal case was registered.

DIPHTHERIA—This disease shewed a large decrease from the past two years, and the cases notified were of a mild character.

ENTERIC FEVER—Of the six cases notified during the year, the first occurred at the Holloway College; a student contracted the disease during the vacation and was treated in College Isolation Block. Of the remaining five, four occurred in one family, and the disease was evidently imported. In the sixth case, which had no connection with the others, it was impossible to trace the origin. No fatal case was notified.

TUBERCULOSIS—Cases are well notified in the district and the houses of patients regularly visited.

NON-NOTIFIABLE INFECTIOUS DISEASES.

INFLUENZA-Very few cases occurred during the year.

CHICKEN POX—A small outbreak occurred in May among the children attending Egham Hythe Schools-

MEASLES—A considerable number of cases were notified among the scholars at Egham Hythe in September and the schools were closed for three weeks. In October the Englefield Green Schools were closed for three weeks for the same reason. One fatal case was registered.

WHOOPING COUGH was prevalent in all parts of the district in the months of April and May.

SANITARY WORK-Mr. A. P. Sturt, the Sanitary Inspector, reports having visited 885 premises during the year.

One hundred and twenty-two complaints were received, and 152 detailed inspections carried out.

Two hundred and thirty-six cases of nuisance were discovered. These chiefly related to:—

House drains		 	 125
Privies		 	 25
Overcrowding		 	 10
Foul Houses		 	 6
Dilapidated Hou	ses	 	 52
Foul Ditches		 	 2
Foul Streams		 	 2

Nuisances were abated on 225 premises, 3 statutory and 127 informal notices were served, but in no case was it necessary to institute legal proceedings, the notices in each case being complied with.

Fifty-five premises were disinfected after infectious disease.

Disinfection of Verminous persons and their belongings is carried out at the Infirmary when required.

All premises used for the preparation of food intended for human consumption were regularly and frequently inspected, both by the Medical Officer of Health and the Sanitary Inspector. These were generally found to be well kept, clean, and in every way satisfactory. A few minor defects were pointed out and subsequently remedied by the owner or occupier concerned.

The slaughter-houses were frequently visited while work was being done. No case of tuberculosis in meat or cattle was reported.

The number of slaughter-houses is as under:-

		Dec	ember, 1914.	December, 1923.
Registered			_	_
Licensed	***		4	6
			_	_
Tota	al		4	6

MILK SUPPLY—The district being semi-rural in character, the supply of milk has met all requirements.

Children and expectant mothers have received a sufficient quantity at all times.

The cowsheds, dairies and milk shops were frequently visited and found to be clean and well kept.

WORKSHOP AND FACTORY ACT—The district being essentially residential in character, there are no industrial works of importance except the Lagonda Motor Co., and The Paripan Co.

F	orty-one workshops are	on th	e regis	ter :-		
	Bakehouses			***		7
	Dressmaking, Taile	ors, M	lillinery	, etc.		10
	Builders, Coachbuil	ders, a	and Cyc	cle Rep	airers	12
	Laundries					6
	Other Workshops					6
						_
						41

and were frequently inspected.

VITAL STATISTICS—The number of births in the district for the year 1923 is 220, of which 114 are males and 106 females; 15 illegitimate births were registered.

One hundred and thirty-three deaths occurred during the year. Of these 14 were non-residents. Thirty-seven persons belonging to Egham died away from home, making the nett deaths 156.

	Causes of Dea	th.				Males.	Females.
	All Causes					75	81
1	Enteric Fever					_	01
2	Smallpox						
3	Measles			•••	***	1	
4	Scarlet Fever			***		1	
5	Whooping Cough	***	***	***	***		_
6	Diphtheria	***	***	***		_	_
7	Influence	***	***		***		-
8	Encephalitis Letha			***		-	1
9				222		-	-
	Meningococcal Me					-	
10	Tuberculosis of Re	spirat	ory Sy	stem		7	6
11	Other Tuberculous	Disea	ses			1	2
12	Cancer, Malignant	Dise	ase			6	11
13	Rheumatic Fever			***		0	11
14	Diabetes					_	_
	Dianctes	***	***	***	***	1	2

	Causes of Death.			Males.	Females.
15	Cerebral Hæmorrhage			6	2
16	Heart Disease			12	15
17	Arterio-sclerosis			1	_
18	Bronchitis			4	5
19	Pnuemonia (all forms)			4	4
20	Other Respiratory Diseases			2	2
21	Ulcer of Stomach or Duoder	num		_	1
22	Diarrhœa, &c. (under 2 yea	rs)		_	_
23	Appendicitis and Typhlitis			1	_
24	Cirrhosis of Liver			3	_
25	Nephritis			4	5
26	Puerperal Sepsis			_	2
27	Parturition, apart from Puers	peral Fe	ver	_	1
28	Congenital Debility, &c			5	1
29	Suicide			_	1
30	Other Deaths from violence			2	1
31	Other Defined Diseases			14	19
32	Causes Ill-defined or Unknown	wn		1	_
Spec	cial Causes (included above)-	_			
	Cerebrospinal Fever				_
	Poliomyelitis			_	_

INFANTILE MORTALITY—Ten deaths of infants under one year of age were registered, of whom five were illegitimate.

Table X - Birth-rate, Death-rate, and Analysis of Mortality during the year 1923

(Provisional figures. The rates of England and Wales have been calculated on a population estimated to the middle of 1923, while those for the towns have been calculated on populations estimated to the middle of 1922. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns).

	Birth-									Rate per Percentage 1,000 Births Total Dea					
	rate per 1,000 Total Population.	All Causes	Enteric Fever	Small-pox	Measies	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under two years)	Total Deaths under One year	Causes of Death certified by Registered Medical Practitioners	Inquest Cases	Uncertified Causes of Death
England and Wales	19.7	11.6	0.01	0.00	0.14	0 03	0.10	0.07	0.55	0.44	7:7	69	92.0	6.9	1.1
105 County Boroughs and Great Towns, including London	20.4	11.0	0.01	0.00	0.12	0.03	0.13	0.09	0.55	0.40	9.9	72	92.2	7:2	0.6
157 Smaller Towns (1921 Adjusted Populations 20,000—50,000	198	10 6	0.01	-	0.13	0.03	0.10	0.00	0.51	0.38	6.4	69	92.6	6.1	1.3
London	20.5	11 2	10.0	0.00	0.08	0.03	0.09	0.13	0.12	0:45	10.3	60	90.8	9.1	0.1
Egham	16.1	11:4	0.00	0.00	0.07	0.00	0.00	0.00	0.02	0.55	0.0	45	91.0	9.0	0.0

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LIST OF ADOPTED ACTS, &c.

ADOPTED ACTS-

- (1) The Public Health Acts, Amendment Act, 1890.
- (2) Certain parts and sections of The Public Health Acts. Amendment Act, 1907 (7th December, 1920).

ByE-LAWS-

With respect to New Street and Buildings (allowed 23rd May, 1898).

With respect to Slaughter Houses (allowed 9th August, 1907).

With respect to Nuisances (allowed 6th November, 1914). For Imposing on Occupiers duties in connection with the Removal of House Refuse.

REGULATIONS-

With respect to Dairies, Cowsheds and Milkshops.

