

General report upon the sanitary condition of the parish of St. Luke, Chelsea, during the year 1856 / by A.W. Barclay.

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GENERAL REPORT

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UPON THE

SANITARY CONDITION

OF THE

PARISH OF ST. LUKE, CHELSEA,

DURING THE YEAR 1856,

BY

A. W. BARCLAY, M.D.,

Fellow of the Royal College of Physicians,

MEDICAL OFFICER OF HEALTH FOR CHELSEA.

PRINTED BY ORDER OF THE VESTRY.

CHELSEA:
J. MACMICHAEL, KING'S ROAD.

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GENERAL REPORT

FROM THE

ANATOMICAL SOCIETY

OF THE

CITY OF LONDON

FOR THE YEAR 1857

BY

A. W. BARCLAY, M.D.

Member of the Royal College of Physicians

PHYSICIAN IN CHARGE OF THE DISPENSARY

PRINTED BY ORDER OF THE SOCIETY

CHURCHILL

15, NASSAU ST. KING'S ROAD

1857.

SANITARY REPORT

FOR THE YEAR 1856.

To the Vestry of the Parish of St. Luke, Chelsea.

GENTLEMEN,

The Metropolis Local Management Act defines the duties of the Medical Officers of Health to be—"to inspect and report upon the sanitary condition of the parish, to ascertain the existence of diseases, more especially epidemics, increasing the rate of mortality, and to point out the existence of any nuisance, or other local causes, which are likely to originate and maintain such diseases, and injuriously affect the health of the inhabitants, and to take cognizance of the fact of the existence of any contagious or epidemic diseases, &c." At the period of my appointment, the metropolis was happily free from any destructive epidemic, and it therefore became my duty to make myself thoroughly acquainted with all the other local causes of disease, with the distribution of the population, and the condition of the dwellings of the poorer classes. With this object in view, I requested you to place under my charge the reports upon nuisances, which had been previously made in a desultory and irregular manner, in order that I might combine with the necessary inspections an inquiry on broader principles into all the circumstances which were of importance to me as your Medical Officer of Health, in the event of any contagious disease breaking out in your parish. The nuisances which were discovered in the course of these inspections have been reported to you at your regular meetings, along with an abstract of the mortality, in which I have placed apart under the heading of "epidemic and infectious diseases," the six forms of zymotic diseases, which are always enumerated for each district by the Registrar General on the 6th page of his weekly return. Abstracts for the four quarters of the year, consisting of 13 weeks each, terminating on the last Saturdays in March, June, September, and December, and of the 52 weeks, terminating on the 27th December, accompany this report; and I wish to lay before you the result of these inquiries, as they seem to me to bear upon the health of the parish.

The General Condition of the Parish.

The population of Chelsea, as given at the census in 1851, was 56,538, and if the increase has proceeded at the rate exhibited by

the difference between 1841 and 1851, this number ought now to be about 66,000; if, on the other hand, the increase be taken at the average rate for all London, the total would be more nearly represented by 62,000. In relative wealth it stands 27th in the scale of metropolitan districts, there being only 7 in which the value of house and shop property for each inhabitant is smaller than in Chelsea. This relation is quite distinct from the value of each separate house as represented by the average rental, for in this respect it stands on a par with Wandsworth, there being 14 districts in which the rental is lower. The average elevation of Chelsea proper is but a few feet above high water mark, and this level does not vary more than 15 feet throughout the whole district. The very remarkable results obtained by an analysis of the deaths from Cholera throughout the metropolis in 1849, which proved that its spread was more influenced by lowness of level than by any other cause of equal extent, have given great importance to this circumstance; which subsequent experience in 1854, as well as the observation of independent inquiries prove to have been more constantly associated with the almost unavoidable imperfections of drainage in low-lying districts, than with any other condition which has hitherto been arrived at. In this respect Chelsea is not so unfavourably situated as many other metropolitan districts, no part of its surface is below high water level, and there are 11 districts out of 38 where the average elevation is lower than in your parish: still there are streets in which the difficulties of obtaining a sufficient fall for the drainage has operated injuriously.

In addition to this defect, the house drainage of the parish, has hitherto been very imperfect. Originally blessed with a fine gravel soil, which as a natural filter readily absorbs the surface water, and acts as a medium by which decomposing animal and vegetable matter may be converted into harmless elements, it has seemed to the inhabitants that they had nothing to do but bury beneath its surface all the excrementitious products of human life and labour; in many instances when the surrounding earth had become saturated with the sewage matter of one cesspool, another, and yet another has been dug to receive the superfluity. Who knows whether this pestiferous element may not yet tell on unborn generations! The returns which have been regularly made to you have borne very much upon this point, because it had been already most judiciously determined by you, before my appointment, to carry out to its fullest beneficial result, the system of drainage which had been commenced under the auspices of the late Commissioners of Sewers: I was also influenced in great measure by the feeling that to do this was a work of time, that the improvements which we sought to effect in most instances, required structural works for their completion, and that it was most desirable to proceed without delay, lest an epidemic should overtake us ere your intentions could be carried into effect. While on this subject I feel bound to offer you my best thanks for the

cordial co-operation you have accorded to me in this matter : my duty has been simply to carry out your wishes, and I can only claim your approbation on the ground that I have endeavoured to do so with the strictest impartiality. To most of you it has appeared in the same light that it has done to myself, that in so far as possible, the poor should be placed in this matter on a level with the rich. True it is that habits of filth and carelessness have been engendered by long custom, but I assure you that even now by the benefits you have conferred on them, feelings of self-respect have been awakened in their minds which will tell on the rising generation, and the good thus effected will ultimately justify what may at present be characterized as the effect of blind or misguided zeal.

Until last year in its water supply Chelsea was especially unfortunate. Collected from the river at a point very near where a large sewer discharges itself into the Thames, it was scarcely possible that the source could be uncontaminated, or that any process of filtration could purify in so short a time the large quantity of water daily issued to the consumers. A new era has now begun, and the source of supply is as good, the filtering beds as perfect, and the water as pure as has ever been the case in the most favoured districts of London. Considering the geographical position of London, it does not appear that any better source of supply can be obtained ; and the manner in which the company have completed their works shows that they are prepared to take the best means which practical men can suggest to remedy the evils which are unavoidably associated with a river supply. It only remains for the inhabitants to avail themselves of the boon, and by keeping their water receptacles pure, preserve it from contamination after it has reached their dwellings. In a very few places, the water is still derived from pumps, such, for example, as White Hart Court, memorable in the annals of Cholera ; and it will be my duty to keep a very strict watch over such sources of supply if Cholera should again find its victims in the same localities, for unquestionably there is some obscure connexion between the spread of the pestilence and the quality of the water. I am sorry to find many landlords stinting the poor in this most important necessary of life, so essential to health, to cleanliness, and to decency, by providing receptacles which are wholly inadequate for the uses of the numerous inmates : this remark applies especially to the courts and alleys where only one tank is in common use ; and it is not at all unusual, in any of the better conducted houses, to find the valuable supply, which the cistern cannot hold in sufficient quantity, stored in pails and pitchers of all shapes and sizes. I trust that by your assistance some means may be found to remedy this evil, because I feel that if the letter of the law be complied with, its spirit is frustrated by such arrangements.

The first step which I felt it my duty to take when the sanitary department was placed under my charge, was to arrange some definite plan of proceeding, so that no partiality should be shown

in taking the initiative towards effecting improvements,—none in carrying out the proceedings to their legitimate issue. Any parishioner has the opportunity of calling your attention to a nuisance specially affecting himself; it was my business to regard them only as they were likely to affect the health of the inhabitants. The Mortality Returns show that the causes of sickness and of death are more constantly, and more severely in operation among the poor; to them, therefore, and to their dwellings it was necessary first to turn my attention. A house to house visitation was set on foot, regular reports of all that was important for me to know, were made from week to week, I made myself familiar with the homes and the habits of the poor, and the resulting information has been classified, so as to be available, whenever circumstances arise, which seem to justify me in asking for your interference. Questions relating to drainage, as already stated, have chiefly been brought before you, and, I am glad to be able to report, that the greater part of the improvements required have been effected, that many are now in progress, and, I hope before the close of another year, that for all parts of the parish a like result will have been obtained.

Cleansing and lime-washing, from time to time, are not less important to health; but I have hitherto dwelt less on this subject, because such evidence of its necessity was wanting as could alone justify you in enforcing your order, viz., the existence and spread of infection; and I have felt that in the commencement of your official duties it was wise to abstain from asking you to issue indiscriminate orders, without regard to their being carried into effect. It is my wish that your authority should not come into contempt by such a course of proceeding, and a register has been therefore kept, in which every order is entered, with the time allowed for its completion, and I have made it my business to see that these orders were complied with, and to report to you when they were disregarded.

Another point of great importance to the welfare of the inhabitants is the proper ventilation of their houses. I have, therefore, obtained returns of all houses having no back windows, and of all in which there is no opening for ventilation in the staircase, and, in due time, it is my purpose to call your attention to this question: but I take this opportunity of recording the fact that, in a large number of instances, this state of things exists; and reminding you that the Nuisances' Removal Act gives you power to proceed against the owners, if it can be shown that it is injurious to health.

Not least in its ultimate consequences to the welfare of the parish is the question of over-crowding. In the extreme cases there can be no question of the necessity to put a stop to its existence; but, as a whole, the subject is one on which I feel it is extremely difficult to mete out even-handed justice to all parties, and I have felt it my duty to wait till I could trace out more definitely its pernicious effects. It is a subject which, in its ulterior results, must prove of the highest importance: these abodes of

wretchedness, over-crowded with inhabitants, are not only the hot-beds of pestilence and the haunts of famine, with all its attendant ills, but from thence come the applicants for parochial aid, and there they linger on in starvation till by law they have acquired a settlement, and can claim support from the industrious classes for the rest of their days. I think, gentlemen, you will agree with me, that, notwithstanding all that has been done, much remains to engage your most earnest attention.

The Sanitary Inspections.

I must now endeavour to present to you in a condensed form the operations of the past year, and the information which I have been able to gather from various sources regarding the general health of the district, craving your indulgence if the statistical results appear rather dry and uninteresting. For this purpose I will confine myself to the deductions arrived at from the existence, partial though it has been, of those diseases classed in the Table of Mortality as "Epidemic and Infectious," because they belong more particularly to the class of preventible diseases by which our annual mortality is unnecessarily swelled; and they hold out the greatest expectation of benefit from the introduction of sanitary measures. To a certain extent, I have been obliged to adopt the sub-divisions of the Parish as defined by the Registrar General, but within these I have formed distinct groups of streets, courts, and alleys occupied by the poor which were thoroughly inspected in the course of the past year, in order that I may be enabled to compare the mortality among them with the general mortality, and also with the mortality among the better classes. In this way I am also enabled to bring into comparison to a certain extent the relative amount of sickness belonging to the same classes of disease, as represented by the visiting lists of the Parish Surgeons, with the ordinary weekly returns of the Registrar General. But my primary object in adopting this arrangement was to make myself acquainted with the characteristics of each locality, and to see that no part of the parish, no occupied house indeed, should escape the observation of the Inspector: thus at once ensuring the completeness of the operation, and avoiding the possibility of partiality or injustice. Selections from these groups will be found in Table A at page 11 of this Report, in which is exhibited the actual number of inhabitants, the deaths from epidemic causes, and the relative mortality of certain of these sub-divisions.

In the first group are included those lying to the south of the King's-road and west of Cook's-ground; and in this district sanitary improvements were effected in thirty-three cases. The inmates are very differently distributed in proportion to the number of distinct dwellings in different parts of this district: for example, in World's-end-passage the houses rarely exceed two rooms in size, while in Lawrence-street some are ten-roomed houses; in the one

the average number of occupants does not exceed 6, in the other it is over 12, and in one instance 24 inmates occupy one house. I need not remind you of the difference in situation between the cottages west of Riley-street and the courts out of Church-street, Lombard-street, and Lawrence-street; and it is very remarkable that while Riley-street, and the lanes to the westward with 677 inhabitants, only furnish to the Parish Surgeon 7 cases of epidemic disease, Lawrence-street with less than half that number furnishes 15; Lombard-buildings, with only 53 inhabitants, 5 cases; and Danver's-buildings, and White Hart-court, having together only 41 inhabitants at the time of our inspection, have furnished 8 cases of epidemic disease.

The next group consists of Queen-street and Manor-row, with the small streets and courts adjoining, and includes Paradise-walk and Calthorpe-place. In Queen-street the average number of rooms in each house is six, in Calthorpe-place it is over five, in Manor-street it is five, and in the remainder it is below that number: the largest proportion of inmates to houses is found in Calthorpe-place, where they average 11,—one house of six rooms containing 23 persons. The largest average families are in Manor-grove, one of the most respectable of its courts, where four-roomed houses are almost invariably occupied by single families; the smallest average families are in Manor-gardens, which is nearly the worst of these courts, where each house has only two rooms, and two houses, on an average, contain three families: in the former the number is represented by 5.8 individuals, in the latter by 2.9,—exactly one half. This fact, brought into such a striking contrast in this district, may be traced almost everywhere throughout the parish; the families of the poor, cut down annually by the spread of infection, or slowly undermined by the hereditary transmission of the scrofulous taint, or dwindling away like drooping plants for the want of sun-light and fresh air, never attain to the same average size as those of the better classes of artizans, although they are well known to be on an average more prolific: it is among them that the infantile mortality attains its maximum. In this district 166 sanitary improvements have been carried out. The reports of the Parish Surgeon point especially to Queen-street, Calthorpe-place, Paradise-walk, and Manor-gardens. In Queen-street, the mortality from epidemic diseases reached the maximum, if considered apart from the rest of the group in which it is placed.

The third consists of George-street, with its courts and alleys, Turk's-row, Queen's-road East, and the densely populated square of building lying between. Here the most striking fact presented to our notice is the ratio of the population to the extent of the district. The average population of Chelsea is 62 persons per acre, but this small district, excluding Lower Sloane-street altogether, contains upward of 2,700! The size of the houses is quite as much out of proportion to the number of inmates: for example, there were found in one house of four rooms in George-place—the

average capacity of each room being only about 350 cubic feet—so large a number as 21 persons; each house contained on an average 10 individuals; in most instances each room was the dwelling of a separate family, the average being three families to each house; the families are represented by the number 3.5; the occupants of a room by the number 2.5. A very similar state of things prevailed in Bolton's-gardens, with this difference only, that many of the houses contain but one room, and none exceed two rooms in size. The average number of inmates to each room was four; in one case 15 persons occupied two of these wretched rooms, that upstairs being so low in the ceiling that I cannot stand upright with my hat on. Steps were taken to remedy this evil, but a constant surveillance in such cases is absolutely necessary. As might be anticipated, the Reports of the Parish Surgeon fully bear out the impression, that such a state of things is necessarily injurious. Bolton's-gardens, George-place, Jubilee-court, and Mermaid's-yard yield the largest number of Epidemic diseases requiring his assistance. In this district, 127 sanitary improvements were carried out.

I need not detain you by entering into details regarding all these groups, although similar statistical calculations have been made for each. I would only allude to one more, which attains an unenviable pre-eminence in the Table as that which gives the largest ratio of mortality from epidemic causes. It consists of the small streets and courts bordering on Leader-street, and extending down to Bond-street and College-place, west of the Marlbro'-road. Excluding Leader-street, which consists of 98 houses, and contains 540 inhabitants, and Keppel-street, with 82 houses and 437 inhabitants, this group comprises 423 houses and 2,870 inhabitants. Here 221 sanitary improvements have been effected; but much yet remains requiring constant and careful supervision. The worst places in the district are unquestionably Little College-street, Oakham-street, and Wickham-place. In the latter, each house consists of four rooms of small size, with an average number of nearly 11 persons, and more than 3 families: in Oakham-street, very nearly every room belongs to a separate family, the average size of which is represented by the numbers 3.5: in Little College-street, the averages are slightly lower, but one house of twelve rooms contains 40 individuals. Very much has been done for this last street by a new landlord in the course of the year, which I trust will tell favorably upon the health of the inhabitants. These streets yield the greatest number of Returns in the Books of the Parish Surgeon, and, from their confined situation, I fear that they will continue to be, even under the most favorable circumstances, a plague spot in Chelsea.

Of the Kensal district, I have to remark, that its general features are in many respects different from the rest of the parish. Placed on a level of at least 50 feet higher elevation, with the additional advantage of an open and airy situation, its Mortality Returns are

high, and the general death rate unfavorable. But, on reference to the Tables it will be seen that the prevalence of epidemic diseases is the cause to which this circumstance is owing; and the Books of the Parish Surgeon equally prove that the proportion of cases of sickness of this class coming under his care, was greater than in other parts of the parish. This fact, of itself sufficiently remarkable, becomes much more so on further analysis; for Kensal actually appears to be by far the healthiest district when these diseases are excluded, and does not even indicate so much a general liability to the whole class, as to the existence of Diarrhœa in particular: this circumstance will be more fully explained when the Returns are compared. Of all the diseases of the Zymotic class, Diarrhœa is the one most evidently associated with inefficient drainage, with fœcal fermentation, and the impregnation of the atmosphere with unwholesome emanations from foul drains, open ditches, and cesspools. These are exactly the conditions which prevail in this locality:—the house drainage was found in even a worse state than any of the poor and neglected courts in Chelsea itself; the surface drainage of the lanes and alleys very imperfect; while its clay soil of necessity prevents the absorption of foul surface water, which in Summer is evaporated by the heat of the sun; and here, too, exists a foul open ditch, which until recently received a great portion of the sewage of the East end of the district, and must even now be a constant source of atmospheric contamination. It was not until late in the season that complaints reached me of the state of the drainage, and having had other urgent matters to attend to, the hot weather had already passed away, and diarrhœa had everywhere abated before the inspection was commenced, and we must wait for the result of another year before it can be ascertained what good has been effected. The whole number of houses visited was 484, containing a population of 2,296 persons; the sanitary improvements reported as effected up to the close of last year were 128, but many have been since carried out, and several are now in hand. Let me add, that you will not have done justice to this part of your parish, until the open ditch is filled up.

In completing my summary of sanitary works, I may state generally that nearly 4,000 houses have been inspected, 3,600 having been included in the regular house to house visitation, which was undertaken under my direction, by the Inspector of Nuisances, and the remainder specially visited on account of complaints or suspected nuisances: 1191 improvements have been reported on as finished, a number remain in which the wishes of the Vestry have not been carried into full effect, and a very few in which nothing at all has been done, although second and peremptory Notices have been issued; with these it remains for you to deal as you shall see fit.

The Mortality Returns.

In reviewing the Mortality Returns, as they serve to throw light on the causes of death in different districts, a difficulty meets me in the outset,—that up to a very recent period, no account was kept at the Workhouse of the streets from which cases of illness were brought, and I am, therefore, unable to discriminate deaths occurring among regular inmates and those of persons seized with sickness at their own abodes; nor can I refer the latter to the particular district to which they belong, in making my calculations; but I believe that this cannot materially affect the result, if in a comparison of districts they be wholly excluded, because in all probability, they belonged equally to all divisions of the parish. The same remark applies to the deaths in St. George's Hospital, which have not been regularly returned to me. Arrangements will be made to obviate this in future.

In comparing the Mortality of Chelsea with that of the whole Metropolis, during the past year, it is to be remembered that in addition to the deaths occurring among Parishioners, properly so called, a large number took place in the Royal Hospital, and in St. George's Workhouse, which ought to be kept perfectly distinct: the inmates of the former, collected, in age and infirmity, from all parts of the country, the latter belonging absolutely and entirely to another part of the metropolis. The population of London at the census of 1851, was 2,362,236; that of Chelsea, exclusive of the two Public Institutions just named, was 55,404. The deaths registered during the 52 weeks ending the 27th of December, 1856, were,—for all London, 56,786; and for Chelsea, excluding the Royal Hospital and St. George's Workhouse, 1,233. In this number are included those dying in the Chelsea Workhouse, and to it must be added 46 deaths in St. George's Hospital of persons brought from various parts of the parish, making a total of 1,279 deaths. The ratio of mortality for all London is over 24 per 1,000, while that for Chelsea is under 23 per 1,000 persons living at the census of 1851. This calculation is, of course, liable to error if it should be proved that the increase of population has been either greater or less than the average, but for general purposes, I believe it offers a sufficiently close approximation.

On the other hand, in comparing the death rate of last year with that of previous years, we must take, as the basis of calculation, the whole registered mortality, because the deaths occurring in the several Public Institutions have not been kept distinct, but a correction must be made for increase of population. The average of 10 years really represents the mortality which should have occurred 5 years ago, and in place of 1,403.7, ought to be 1,544, provided the rate of increase has been the same for Chelsea as for the rest of London. The deaths registered during the year 1855 were 1,467, while those of last year were only 1,342. It must be

remembered that the deaths throughout London were less numerous last year than the year before, in the proportion of about 9 to 10; but even here a difference may be traced in favour of Chelsea, of 8 in every 1,000 deaths: in fact, while 922 deaths occurred throughout London in 1856 for every 1,000, in 1855, there were only 914 in Chelsea. I have pleasure in pointing out these facts, as believing them to be, in some part at least, attributable to the improvements which have been carried out under your direction.

I desire next to call your attention to the relative mortality of different districts, with especial reference to the prevalence of those diseases which have been classed together as "Epidemic and Infectious." For this purpose, I have arranged in Table A., some of the groups of streets which were mentioned in the early part of this Report, showing the population of each, the actual deaths, and the mortality per 1,000 inhabitants from these causes. I feel that it is always dangerous to draw deductions from small numbers, and, therefore, I have thrown these streets into distinct groups; but it is remarkable that the death rate should be lower in the George-street and Turk's-row district than elsewhere, and that this was one of the first localities in which sanitary improvements were made. It is also a curious coincidence that 4 of these deaths should have happened in Lower Sloane-street, which was not inspected until very late in the season; and that while 6 of the remaining 12 deaths occurred before April, and consequently before our operations were begun, the whole of those in Lower Sloane-street occurred later in the season.

TABLE A.

Exhibiting the Mortality from Epidemic and Infectious Diseases, in Groups of Streets, throughout the Parish of St. Luke, Chelsea.

Groups of Streets.	Total inhabitants.	Deaths.	Rate per thousand.	Streets in which there were more than two deaths.
World's End-passage, Riley-street, Anne's-place, &c. Lawrence-street & courts in that neighbourhood.	1552	10	6.4	
Paradise-walk, Calthorpe-place, Queen-street, Manor-street, & adjoining streets and courts.	3029	21	6.9	Queen-street, 7 deaths. Manor-street, 4; Manor-gardens, 4; Collingwood-street, 4.
Turk's row, Queen's-road East, and intervening courts. Lower Sloane-street, George-street, and adjoining streets & courts.	3190	16	5.0	Lower-Sloane-street, 4; George-street, 3.
New-road, small streets at both ends, with Doyley-street, Earl-street, &c.	3235	19	5.8	Lower North-street, 4; New-road, 4; Chapel-row, 3.
Small streets and courts between Brompton-road, & Bond-street & College-place, west of Marlboro'-road.	2870	21	7.3	Francis-street, 4; Oakham-street, 3; Wickham-place, 3; Waterloo-terrace, 3.
Streets and courts west of Sydney-street, and south of Bond-street.	2673	16	5.8	Godfrey-street, 4; Arthur-street, 3.
Kensal.	2296	16	7.0	
The Workhouse.	377	10		
St. George's Workhouse.	353	8		
The remainder of the parish as at Census, 1851.	36,873	70	1.9	Park-terrace, 4; Sydney-street, 4; Harker-street, 3; College-street, 3;
Do. estimated at 62,000.	42,300	70	1.6	Leader-street, 3.

The mortality from these causes, throughout the remainder of the parish, after deducting the ascertained population of the poorer districts from the census of 1851, forms a very striking contrast to the most favorable death rate in any of these groups of streets; it

diverges still further if the increased population be estimated at 62,000. In the last column of the Table, those streets are enumerated by name in which more than two deaths from these causes occurred, although I am not in possession of facts sufficient to explain the excess in each particular instance. Of the whole number cited, I believe Park-terrace presents the largest number in proportion to its relative size and respectability, and I cannot but suspect that this is in some measure due to the proximity of that nest of small, ill-drained, ill-ventilated houses at the rear, comprising Park-terrace Cottages and Little Camera-place.

In Table B. is exhibited the death rate as it affects the three Registration Districts and Kensal New Town respectively, both with reference to the general mortality, and also to the epidemic and infectious diseases. A separate calculation is made for the latter class in each district, after excluding the population and deaths enumerated in the preceding Table A.

TABLE B.
Shewing the General Mortality and the Deaths from Epidemic causes for each District.

District.	Population.	Total deaths.	Per thousand	Epidemic deaths.	Per thousand.
South Chelsea.....	17,781	361	20.3	64	3.6
Ditto. exclusive of } the groups in Table A. }	10,010	..	..	17	1.7
North West.	16,939	365	21.5	64	3.7
Ditto. exclusive of } the groups in Table A. }	11,306	...	..	27	2.4
North East.....	17,359	341	19.6	50	2.9
Ditto. exclusive of } the groups in Table A. }	14,124	..	..	31	2.2
Kensal New Town... ..	2,460	52	21.1	17	7.1

The most healthy, with reference to general mortality, is the North-east district, and the least so is the North-west. The North-east district also presents the smallest rate of mortality from epidemic causes, when the whole of the population is considered; the South district being the most favorable, when the poorer dwellings are excluded. Kensal, on the other hand, stands a long way pre-eminent as exhibiting the largest death rate from epidemic causes. This result was so remarkable, that it demanded further investigation, and has led me to draw up another Table (C.), in which the relations are more definitely exhibited.

TABLE C.

Shewing the Death Rate for each Registration District as effected by Epidemic Diseases, and by Diarrhœa.

Districts.	Population.	Deaths exclusive of epidemic causes.	Per thousand.	Deaths from all causes except diarrhœa.	Per thousand.	Ratio of general mortality
South.	17,781	297	16.7	336	18.9	20.2
North West.	16,939	301	17.7	347	20.5	21.5
North East.	17,359	291	16.7	334	19.2	19.6
Kensal.	2,460	35	14.2	42	17.0	21.1

The first column of this Table gives the population at the census ; the next two columns exhibit the deaths, and the ratio of mortality in each district, when those produced by epidemic causes are excluded ; the fourth and fifth columns include the deaths of this class, with the exception only of diarrhœa in all its forms ; the sixth repeats the general death rate for each district, as given in the preceding Table. The results are most striking. Kensal is by far the most healthy when we consider only the more ordinary causes of mortality: fevers, measles, scarlatina, and hooping-cough add to each of the districts somewhat between 2 and 3 deaths per 1,000, but diarrhœa alone, which is excluded in the 5th column, adds, in the 6th column, to the mortality of Kensal more than 4 per 1,000, while in the North-east district it adds less than $\frac{1}{2}$ per 1,000. To the causes of this difference I have already adverted.

In each of the foregoing Tables, the deaths occurring in Public Institutions have been excluded, as my object was to compare the salubrity of different districts. In the General Tables of Mortality at the end of this Report, will be found the statistics of deaths as occurring at various ages, and for each sex, throughout the parish ; to these I have added the particulars belonging to each of the Workhouses, and to the Royal Hospital, in order that persons desirous of working out any further deductions may have the opportunity of doing so. I will only remark that the death rate, as might be anticipated in so poor a parish, bears heavily on the infant population ; and, on the other hand, that there is a very respectable minority which survives the ordinary limit of "three-score years and ten." The deaths actually registered would give a much too favorable view of the salubrity of the parish, because of the constant influx of old men to the Royal Hospital ; and to get at the truth in this matter, the population and deaths of this Insti-

tution, and also of St. George's Workhouse, must be excluded. In the subjoined Table, I have exhibited the percentage of the whole mortality which is due to deaths of infants under 1 year and aged persons over 70; and in the latter part of the table, the percentage at each of three periods, childhood and age—under 5 and over 50 years of age,—and the interval of youth and adult life; in the upper line the whole registered deaths being taken, and in the lower the Hospital and Workhouse being excluded.

TABLE D.

Shewing the percentage of deaths at different ages.

	Under one year.	Over seventy years.	Total under five years.	Total over fifty years.	Total at intervening period.
All deaths registered in Chelsea Parish	22.2	16.2	40.9	35.3	23.8
Deaths excluding the Royal Hospital & St. George's Workhouse.....	23.0	12.4	43.1	31.8	25.1

The Returns of the Parish Surgeons.

I have derived much information from the Returns of the Parish Surgeons, as they have pointed out the localities in which diseases were at the time especially prevalent, and, as might be anticipated, the results obtained from this source coincide very much with those already detailed, as derived from the statistics of mortality. This circumstance in its bearing upon the relative unhealthiness of various streets and districts, has been already alluded to. I will merely add here a Table (E.) exhibiting the actual number of cases attended by each, and specifying in distinct columns the several numbers belonging to the subdivisions of epidemic and infectious diseases. The line below gives the total mortality in the parish for each of these diseases, from whence some idea may be formed of their relative fatality: this is, however, only a faint approximation, because the milder diseases are often treated by domestic remedies, and consequently a larger proportion of the more severe ones come under the notice of the surgeon, giving them an appearance of less relative severity than really belongs to them.

TABLE E.

Shewing the cases of sickness attended by the Parish Surgeons in 1856.

DISTRICT SURGEON.	Total cases.	Small pox and Chicken pox	Measles.	Scarlatina.	Whooping cough.	Diarrhoea.	Fever.
Mr. Keen.....	1054(a)	9	29	10	15	77	35
Mr. Ward	646	3	31	3	21	84	49
Mr. Dickinson	417	5	16	10	6	30	15
Mr. Scatliff.....	684	2	29	4	19	54	12
Mr. Brown, Kensal	213	...	3	3	4	26	11
Total of Epidemic Diseases		19	108	40	65	271	122
Deaths from Epidemic Causes		5	34	31	31	65	48

(a) This number is only an approximation.

The following Table (F.) represents the relative amount of epidemic diseases to other causes of sickness in each district, and also that of diarrhoea. The high ratio in Mr. Ward's district, which includes the 5th group in Table A., and in Mr. Brown's district affords a striking confirmation of the deductions already drawn from their relative mortality as compared with the rest of the parish.

TABLE F.

Shewing the Percentage of Epidemic Diseases and Diarrhœa severally in the Districts of the Parish Surgeons.

DISTRICT SURGEON.	Total cases of Sickness.	Cases of Epidemic disease.	Per cent.	Causes of diarrhœa.	Per cent.
Mr. Keen.....	1054	175	16.6	77	7.3
Mr. Ward	646	191	29.5	84	13.0
Mr. Dickinson	417	82	19.6	30	7.2
Mr. Scatliff	684	120	17.5	54	7.9
Mr. Brown, Kensal ...	213	47	22.0	26	12.2

I have already extended my Report to so great a length in dealing with questions which bear more directly on the health of the whole parish, that I am unwilling to detain you with matters referring more especially to particular localities, where, however, their inconvenience is perhaps even greater to the individuals who suffer directly from them. I will confine myself to one or two of the more important.

The Gas Works.

The Gas Works, though not situated within your boundary, are seriously prejudicial to one district of the parish lying in the direction in which the prevailing wind carries its noxious vapours. The damages awarded to the proprietor of the nursery-grounds in its neighbourhood have stimulated the managers to make efforts to obviate the nuisance arising from it, and on the occasions on which I have visited the premises, the suggestions made have been readily listened to, and experiments have been carried on by the engineer of the company, with the view of removing the grounds of complaint. Under the most favorable circumstances, such a manufacture cannot be wholly void of annoyance to the neighbourhood, and the Nuisances' Removal Act only empowers the magistrate to compel the owners to make use of the best available means to remedy or diminish the nuisance. It therefore appeared to Mr. Burge, the medical officer of health for the Fulham district, in which the works are situated, as well as to myself, that so long as

we were satisfied that efforts were being made to discover the best means for this purpose, we should not be justified in recommending to our respective Vestries legal proceedings against the Company ; but in the event of failure, it will be necessary to adopt some more stringent measures. By visiting other Gas Works I endeavoured to make myself familiar with all the details of the manufacture, and I have no doubt that with the friendly co-operation of the District Board, and Medical Officer for Fulham, you will be able to secure for your parishioners as complete protection as the nature of the works admit of. But it must be borne in mind that the best devised schemes may be frustrated by carelessness on the part of the workmen, especially during the night. The duty of your Medical Officer cannot possibly extend to a constant superintendence, and it will rest with those who are themselves the sufferers to prove that such neglect occurs, and to substantiate the charge before the magistrates.

Cows and Pigs.

I fear it must be admitted that the parish of Chelsea has more than its due proportion of Cows and Pigs. As one of the suburban districts, less densely populated than many other parts of the metropolis, the nuisances from these causes ought not to be so great as where ground is more completely covered by houses ; but it unfortunately happens that the open spaces are not those generally selected for these purposes. It is especially among the crowded cottages of the Irish that pigs abound ; while the cow-sheds, and the cab driver's stables are commonly to be found in those localities where the object of the owner has been to make the most of his property, by covering every inch of it with building, rather than to provide for the comfort or health of his tenants. The opinions of medical men as to the prejudicial effect upon the health of the population has been hitherto, I am sorry to say, much at variance, and the decisions of magistrates have not been always in harmony. It will be one of the functions of the Medical Officers of Health for London to seek out by careful and patient observation of facts, the actual influence which can be legitimately traced to these causes. In the meantime, it is satisfactory to be able to state that considerable improvements have been made in the manner in which the animals are kept, in consequence of the supervision which is now exercised ; and I trust in course of time this whole matter may be put upon a better and safer footing. It is not too much to say that it at least opens the way for bad meat being occasionally supplied to the poor : none of it indeed can be of the best quality ; and I cannot doubt that the town milk is a much less healthy nutriment in childhood than the produce of a country farm, even though chemistry might prove it to be richer in cheese or in butter.

Slaughterhouses.

The proximity of a slaughterhouse must be a nuisance to the neighbours, and unless conducted with the most careful regard to

cleanliness, it must be injurious to health. It is my belief, that when the Legislature appointed the erection of slaughterhouses in connexion with the new market, it was in the hope that by degrees all the inconveniences connected with the prevalent practice might be superseded; nor can I doubt that the change would be beneficial in very many ways to health. But the proposition involves many social and economic questions, with which society at large is not yet prepared to deal. In requiring that every slaughterhouse should be licensed by the Court of Quarter Sessions, and that sufficient notice of the intention to apply for a license should be given to you, an opportunity was afforded to the Medical Officers of Health to suggest such regulations as might conduce to an improved sanitary condition; and I had the honour to submit to you the recommendations which were adopted by the Metropolitan Association. Measures were immediately taken by the Vestry to acquaint the butchers throughout the parish with what would be required of them. In most instances your wishes were readily attended to, in others they were more tardily complied with; in one instance, through a clerical error in transcription, a license was unopposed which ought to have been withheld, and in another case it was refused. In the former, the error arose with myself, and I was much vexed to find on going to Clerkenwell to give evidence against it, that such was the case; in the latter, it rested wholly with the applicant, who had sent in a plan for a slaughterhouse which was quite unexceptionable, but who had neither begun to dig out the foundation, nor given any pledge to erect the building, nor even appeared in Court (which would have been quite satisfactory to me) to say that he meant to do so. The Court, of necessity held that they could not license that which did not exist.

In conclusion permit me to observe that my object has not been to advance theoretical opinions on circumstances which may appear to me injurious to health, neither has it been my object to present to you a detailed Report of the operations of last year, but to give you some information regarding the actual state of the parish. In making the statistical calculations from which these conclusions have been drawn, I have endeavoured not only to attain the greatest possible accuracy, but what is much more difficult—really to represent the truth. The scheme was one which early presented itself to my mind as one calculated to promote comprehensive views, and to establish general principles for our future guidance, and I have spared no trouble to develope its results: these I have now the honour to present to you in as condensed a form as possible for your information.

I have the honour to be, Gentlemen,

Your most obedient Servant,

A. WHYTE BARCLAY, M.D.,

Medical Officer of Health.

TABLE I.

HALF-YEARLY RETURN OF MORTALITY, ENDING SATURDAY, 27th DECEMBER, 1856.

FIRST QUARTER.

Deaths of Males, 160; Deaths of Females, 183; Total Deaths 343
 Deaths registered in corresponding Weeks of 1855 298
 Average Mortality in corresponding Weeks of 10 years.... 369.8

SECOND QUARTER.

Deaths of Males, 169; Deaths of Females, 163; Total Deaths 332
 Deaths registered in corresponding Weeks of 1855 325
 Average Mortality in corresponding Weeks of 10 years .. 335.6

DISTRICTS AND AGES:—	South.		N. West.		N. East.		Kensal.		Work-houses, &c.		Under 1		1 to 5		5 to 15		15 to 30		30 to 50		50 to 70		Over 70		Total.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
THIRD QUARTER.																											
Epidemic and Infectious Diseases.	1	3	2	3	...	...	...	...	...	...	1	1	...	2	1	1	...	2	...	...	...	...	1	...	3	6
Fever .....	...	1	...	...	1	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	1	...	1
Small Pox	2	4	6	7	2	9	1	1	...	...	1	5	10	14	...	1	...	...	...	1	...	...	...	11	21	
Measles, Scarlatina, and Hooping Cough	7	7	1	6	2	2	4	3	1	3	10	11	2	5	1	...	...	...	...	1	2	1	3	15	21	
Diarrhoea	1	1	...	2	1	...	...	...	...	2	1	...	...	...	...	...	1	...	...	...	...	...	1	2	3	
Cholera	7	11	7	2	7	5	1	...	4	3	4	3	7	4	1	...	4	1	3	3	5	7	2	3	26		
Other Acute Diseases	11	13	14	11	9	15	1	1	2	6	8	11	8	12	5	2	4	11	4	6	7	4	1	...	37		
Strumous Diseases.—Phthisis, Hydrocephalus, &c.	12	15	11	14	12	14	1	...	15	10	5	6	1	...	...	...	...	...	...	...	...	...	...	...	51	
Chronic Diseases and Old Age.....	3	3	2	2	4	5	1	...	4	1	10	11	3	...	1	...	...	...	...	...	...	...	...	...	14	
Violence, Privation, Poison and Premature Birth...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	11
TOTAL, 3rd Quarter.....	44	58	43	47	38	50	9	5	26	23	41	49	32	38	9	4	10	20	17	20	25	28	26	24	160	183	
FOURTH QUARTER.																											
Epidemic & Infectious Diseases.	1	3	1	3	...	1	...	...	1	3	...	...	2	4	1	2	...	1	...	...	...	1	...	2	3	10
Fever .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Small Pox	4	1	2	7	5	4	2	...	...	...	4	1	6	9	3	2	...	...	...	...	...	...	...	...	13	12
Measles, Scarlatina, and Hooping Cough	1	1	2	1	1	...	...	...	...	...	4	...	...	2	...	...	...	...	...	...	...	...	...	...	4	2
Diarrhoea	11	13	10	12	14	8	2	...	4	...	15	6	6	11	1	...	2	2	4	4	9	3	4	7	41		
Other Acute Diseases	8	13	16	13	9	8	4	...	6	7	5	7	12	8	2	1	4	8	12	11	7	5	1	1	43		
Strumous Diseases.—Phthisis, Hydrocephalus, &c.	8	19	13	11	15	12	3	...	11	13	5	4	3	2	1	1	3	...	7	7	16	18	15	23	50		
Chronic Diseases and Old Age.....	1	1	5	4	6	4	...	...	3	1	10	7	2	1	...	...	...	...	2	1	1	1	...	...	15	
Violence, Privation, Poison and Premature Birth...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	10
TOTAL, 4th Quarter.....	34	51	49	51	50	37	11	...	25	24	43	25	31	37	8	6	9	11	25	23	33	28	20	33	169	163	

TABLE K.

RETURN OF MORTALITY, DURING 52 WEEKS ENDING DECEMBER 27, 1856,
AT THE FOLLOWING PUBLIC INSTITUTIONS.

The Workhouse, Chelsea.

CAUSES OF DEATH.	Under 1		1 to 5		5 to 15		15 to 30		30 to 50		50 to 70		Over 70		Total.	
	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.
Epithemic diseases } Fever } Diarrhoea and Dysentery..... } Other acute diseases Strumous diseases Chronic diseases and Old Age Violence, Privation, Poison, and } Premature Birth..... } Total.....	1	1	...	...	...	...	1	1	...	...	...	3	2	...	...	7
	1	...	...	...	...	...	...	1	1	1	1	1	...	...	2	1
	2	1	...	...	...	...	1	1	1	1	3	4	3	...	7	10
	3	2	2	1	...	...	2	3	5	7	4	6	...	...	16	19
	3	2	...	...	...	...	...	3	2	2	6	11	5	15	17	30
	2	...	...	...	...	...	1	...	...	...	...	...	...	...	3	...
	11	6	2	1	...	...	3	5	10	10	11	25	8	20	45	67

St. George's Workhouse.

CAUSES OF DEATH.	Under 1		1 to 5		5 to 15		15 to 30		30 to 50		50 to 70		Over 70		Total.	
	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.
Epithemic diseases } Fever } Diarrhoea and Dysentery..... } Other acute diseases Strumous diseases Chronic diseases and Old Age Violence, Privation, Poison, and } Premature Birth..... } Total.....	1	...	...	...	...	...	...	...	2	2	...	2	...	1	1	5
	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
	1	2	2	...	...	1	...	2	2	5	...	5	...	...	3	5
	1	1	...	1	...	...	...	1	1	...	2	...	10	1	15	15
	6	3	...	...	...	...	...	...	...	...	...	...	...	...	6	8
	8	6	2	1	...	1	...	...	5	1	9	...	13	11	35	35

The Royal Hospital.

CAUSES OF DEATH.	15 to 30		30 to 50		50 to 70		Over 70		Total.	
	m.	f.	m.	f.	m.	f.	m.	f.	m.	f.
(No epidemic diseases.) Other acute diseases Strumous diseases Chronic diseases and Old Age Total.....	1	...	...	...	5	...	6	...	12	...
	...	1	1	...	3	...	4	...	8	1
	...	...	1	...	9	1	31	...	41	1
	1	1	2	...	17	1	41	...	61	2

TABLE II.

HALF-YEARLY RETURN OF MORTALITY, ENDING SATURDAY, 28th JUNE, 1856.

FIRST QUARTER.

Deaths of Males, 164; Deaths of Females, 162; Total Deaths 326
 Deaths registered in corresponding Weeks of 1855..... 457
 Average Mortality in corresponding Weeks of 10 years .. 372.6

SECOND QUARTER.

Deaths of Males, 166; Deaths of Females, 175; Total Deaths 341
 Deaths registered in corresponding Weeks of 1855 387
 Average Mortality in corresponding Weeks of 10 years 325.7

DISTRICTS AND AGES:—	South.		N. West.		N. East.		Kensal.		Work-houses, &c.		Under 1.		1 to 5.		5 to 15.		15 to 30.		30 to 50.		50 to 70.		Over 70.		TOTAL.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
FIRST QUARTER.																											
Epidemic & Infectious Diseases.	5	1	...	1	1	...	...	1	1	5	...	1	2	1	...	1	...	1	2	...	3	3	...	1	7	8
Small Pox	2	2	1	1	2	5	1	...	...	...	...	2	2	4	6	...	...	...	...	...	...	...	...	...	6	8
Measles, Scarlatina, and Hooping Cough .....	...	3	...	3	1	...	...	1	...	...	1	5	...	1	...	...	...	...	...	...	...	1	...	...	1	7
Diarrhoea and Dysentery	7	7	13	8	6	10	...	2	5	4	9	8	8	5	...	2	1	3	5	3	2	6	6	4	31	31	
Other Acute Diseases	13	15	9	11	12	13	1	2	14	5	10	7	12	9	3	5	4	12	8	7	11	4	1	2	49	46	
Strumous Diseases:—Phthisis, Hydrocephalus, &c.	12	16	11	11	10	15	5	3	17	9	4	6	3	2	...	2	1	...	5	7	22	17	20	20	55	54	
Chronic Diseases and Old Age	5	2	4	4	5	1	...	1	1	...	9	5	1	1	...	...	1	...	2	1	1	1	1	...	15	8
Violence, Privation, Poison and Premature Birth ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTAL, 1st Quarter.....	44	46	38	39	37	44	7	10	38	23	35	34	30	25	3	10	7	16	22	18	39	32	28	27	164	162	
SECOND QUARTER.																											
Epidemic & Infectious Diseases.	2	1	1	1	...	2	...	...	4	...	1	2	...	...	1	...	...	1	2	...	4	...	...	...	3	8
Small Pox	2	...	1	...	...	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	3	...
Measles, Scarlatina, and Hooping Cough	2	2	6	3	4	7	...	1	...	...	3	2	8	9	...	2	1	...	...	...	...	...	...	...	12	13
Diarrhoea and Dysentery	2	2	2	1	...	...	2	...	1	...	5	1	...	...	...	...	1	1	...	...	1	1	...	...	7	3
Other Acute Diseases	14	14	9	10	12	8	1	1	6	8	9	9	11	9	3	...	1	4	7	2	7	12	4	5	42	41	
Strumous Diseases:—Phthisis, Hydrocephalus, &c.	9	8	12	14	9	11	1	1	6	8	9	8	8	7	3	6	6	6	5	11	5	4	1	...	37	42	
Chronic Diseases and Old Age	10	10	17	18	10	17	...	2	17	13	5	7	...	1	3	...	1	5	7	17	20	24	24	24	54	60	
Violence, Privation, Poison and Premature Birth ...	4	2	1	2	2	2	...	1	1	1	5	7	...	...	...	...	2	...	...	...	...	1	1	...	8	8
Total, 2nd Quarter.....	45	39	49	49	37	47	4	6	31	34	36	35	32	26	9	9	10	12	19	22	29	42	31	29	166	175	

TABLE G.

RETURN OF MORTALITY DURING FIFTY-TWO WEEKS ENDING SATURDAY, 27th DECEMBER, 1856.

Extract from Census Returns:—
 “The Return, in 1841, includes 507 Pensioners and 267 other persons in the Royal Military Hospital; also 449 persons (365 of whom were children) in the Royal Military Asylum. In 1851, the Royal Military Hospital contained 781 persons, including 512 Pensioners; and the Military Asylum 488 persons, of whom 357 were children.
 “Chelsea Workhouse, in 1841, contained 527 persons, and 377 persons in 1851. The Workhouse belonging to the Parish of St. George, Hanover Square, contained 283 persons in 1841, and 353 in 1851.

Deaths of Males..... 659 } Total Deaths.... 1312
 Deaths of Females..... 683 }
 Deaths registered in corresponding Weeks of 1855 1467
 Average mortality in corresponding Weeks of 10 years 1403.7

CAUSES OF DEATH.	SOUTH CHELSEA SUB-DISTRICT. Population 17,781, Census 1851, exclusive of Hospital and Asylum.		NORTH WEST SUB-DISTRICT: Population 16,939, Census 1851, exclusive of Workhouses.		NORTH EAST SUB-DISTRICT: Population 17,359, Census, 1851, exclusive of Kensal.		KENSAL NEW TOWN: Population 2,460, Census 1851.		WORKHOUSES, HOSPITAL, AND ASYLUM: Aggregate Population 1,999, Census 1851.		Under 1 Year.		At 1 Year and under 5 Years.		At 5 Years and under 15 Years.		At 15 Years and under 30 Years.		At 30 Years and under 50 Years.		At 50 Years and under 70 Years.		Over 70 Years.		TOTAL.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Epidemic and Infectious Diseases.	9	8	4	8	1	3	...	1	2	12	1	3	6	7	2	5	...	4	3	2	3	8	1	3	16	32
Fever	9	8	4	8	1	3	...	1	2	12	1	3	6	7	2	5	...	4	3	2	3	8	1	3	16	32
Small Pox	2	1	1	1	1	1	...	...	...	...	...	...	4	1	...	...	...	...	...	...	...	...	...	...	4	1
Measles, Scarlatina, and Hooping Cough..	10	9	15	18	13	25	4	2	...	...	10	10	28	38	3	5	...	...	...	...	...	...	...	...	42	54
Diarrhoea and Dysentery	10	13	5	11	4	2	6	4	2	3	20	17	2	8	1	...	...	...	...	...	...	...	...	...	27	33
Cholera	1	1	...	2	1	...	...	...	...	...	2	1	...	...	...	...	...	...	...	...	...	...	...	...	1	2
Other Acute Diseases	39	45	39	32	39	31	4	3	19	15	37	26	32	29	5	2	8	10	19	12	23	28	16	19	140	116
Strumous Diseases.—Phthisis, Hydrocephalus, &c.	41	49	51	49	39	47	7	4	28	26	32	33	40	36	13	14	18	37	29	35	30	17	4	3	166	175
Chronic Diseases and Old Age.....	42	60	52	54	47	58	9	5	60	45	19	23	7	5	4	3	6	6	27	31	67	70	80	84	210	222
Violence, Privation, Poison and Premature Birth..	13	8	12	12	17	12	1	2	9	3	34	30	6	2	1	...	3	...	4	2	2	3	2	...	52	37
TOTAL.....	167	194	179	186	162	178	31	21	120	104	155	143	125	126	29	29	36	59	83	83	126	130	105	113	659	683

QUARTERLY RETURN
OF
BIRTHS AND DEATHS REGISTERED IN CHELSEA,
DURING 13 WEEKS,
ENDING SATURDAY, JUNE 27th, 1857,

BY DR. BARCLAY.

THE DEATHS from all causes and at all ages, registered during the Quarter ending June 27th *ult.*, number 305; they are therefore considerably less than those belonging to the corresponding period of last year, which were 341; they are also very considerably below the average of former years, 338.5, which if corrected for increase of population becomes 372.3.

Throughout London the deaths registered during this period were 817 fewer than in 1856; in Chelsea the difference was 36: hence while the saving of life throughout the Metropolis was 58 in every thousand deaths, the saving of life in Chelsea averaged 108 for the same number, or 10.8 per cent. During the corresponding Quarter 1856 the deaths in Chelsea bore a proportion of 2.42 per cent. to the gross mortality, whereas in the present year they only represent 2.30 per cent. A corresponding observation was made in the comparison of the preceding Quarter in each year.

Among the deaths above enumerated, 16 occurred in the Royal Hospital and 7 in the extra-parochial Workhouse of St. George's, Hanover Square: none of these properly belong to the Parish of Chelsea. On the other hand 12 deaths of persons residing in Chelsea have been returned from St. George's Hospital during the same period.

The infantile mortality has attained a higher ratio than obtained during the first Quarter of this year, or the corresponding periods in 1856. The deaths under five years of age numbered 121 and were at the rate of 39.6 per cent. of the whole: in the first Quarter of 1856 they were 124 or 38.0; in the second Quarter of the same year they rose to 129, and were at the rate of 37.8 per cent; and in the first Quarter of the present year although amounting to 131, the ratio was only 36.0 per cent. Hence it will be seen that while diminished in actual number, the loss by death in the infantile population was greater in proportion than among persons at more advanced ages. If the deaths under five years be subtracted from those occurring among persons under 20 years of age, the whole mortality during the fifteen years from childhood to manhood includes only 20 individuals.

The number referred to Zymotic diseases is very little below the average for the rest of London; nearly one third of the deaths being referred to hooping cough, which has prevailed very generally with more than its usual severity at this season. Those of the Tubercular class (82) exceed the proportion which they ought to bear to the whole Metropolis by more than one fourth (23); the same circumstance was also noticed in the previous Quarter.

The births of 247 boys and 224 girls, in all 471 children were registered during the thirteen weeks. During the Quarter ending 30th June there were registered in 1854, the births of 497; in 1855, of 459; and in 1856, of 520 children. The excess of births over deaths during the thirteen weeks ending 27th June, 1857, was 166.

Under 1 year.	At 1 and under 5 years.	CAUSES OF DEATH.	Deaths registered in corresponding weeks 1856.	Deaths at all Ages, in London, during the same 13 weeks.	Deaths registered in 13 weeks ending Saturday, March 28th, 1857.									
					AT ALL AGES.			Under 20 years	At 20 and under 40 years.	At 40 and under 60 years.	At 60 and under 80 years.	Over 80 years.		
					M.	F.	Total.							
66	66	ALL CAUSES	325	16093	179	184	363	151	42	68	75	27		
65	66	SPECIFIED CAUSES	323	15873	179	183	362	150	42	68	75	27		
10	23	1. Zymotic Diseases	45	2713	22	24	46	36	1	6	2	1		
1	1	2. Dropsy, Cancer, and others of uncertain seat }	10	660	8	10	18	2	..	6	8	2		
6	7	3. Tubercular Class	69	2640	40	37	77	22	26	22	7	..		
9	11	4. Of Brain, Nerves, &c.	51	1687	27	18	45	22	2	10	8	3		
1	1	5. Of Heart, &c.	18	731	4	5	9	3	2	2	2	..		
16	19	6. Of Respiratory Organs	64	3789	42	49	91	38	5	16	26	6		
1	3	7. Of Digestive Organs	11	857	5	9	14	5	2	4	2	1		
..	..	8. Of Kidneys, &c.	7	213	1	3	4	..	1	..	3	..		
..	..	9. Of Uterus: viz., Puerperal Disease, &c. }	2	110	..	4	4	..	1	2	1	..		
..	..	10. Of Joints and Bones: viz., Rheumatism, &c. }	1	94	..	..	..	..	..	..	..	..
..	..	11. Of Skin, &c.	1	50	1	1	2	..	..	..	..	2
1	..	12. Malformations . . . . .	..	48	..	1	1	1	..	..	..	..
11	..	13. Debility from Premature Birth, &c. }	10	364	7	4	11	11	..	..	..	..
5	1	14. Atrophy	5	455	5	2	7	6	..	..	1	..
..	..	15. Age	18	684	11	15	26	..	..	..	14	12
..	..	16. Sudden . . . . .	..	149	..	..	..	..	..	..	..	..
4	..	17. Violence, Privation, &c.	11	620	6	1	7	4	2	..	1	..		
3	..	1.—Small Pox . . . . .	..	60	2	1	3	3	..	..	..	..
..	2	Measles	2	349	..	2	2	2	..	..	..	..
1	6	Scarlatina	2	353	3	4	7	7	..	..	..	..
3	12	Hooping Cough	10	803	3	12	15	15	..	..	..	..
..	1	Croup	3	117	1	..	1	1	..	..	..	..
..	..	Thrush . . . . .	..	19	..	..	..	..	..	..	..	..
2	..	Diarrhoea	7	169	7	1	8	3	..	3	1	1		
..	..	Dysentery	1	12	..	1	1	..	..	1	..	..
..	..	Cholera . . . . .	..	5	..	..	..	..	..	..	..	..
..	..	Influenza . . . . .	..	28	..	..	..	..	..	..	..	..
..	..	Purpura; Scurvy . . . . .	..	10	..	..	..	..	..	..	..	..
..	..	Ague . . . . .	..	3	..	..	..	..	..	..	..	..
..	..	Remittent Fever . . . . .	..	36	..	..	..	..	..	..	..	..
..	..	Infantile Fever . . . . .	..	13	..	..	..	..	..	..	..	..
..	2	Typhus	15	489	4	3	7	4	1	1	1	..		
..	..	Metria	2	40	..	..	..	..	..	..	..	..
..	..	Rheumatic Fever	1	31	..	..	..	..	..	..	..	..
..	..	Erysipelas	1	99	1	..	1	..	..	1	..	..
1	..	Syphilis	1	67	1	..	1	1	..	..	..	..
..	..	Noma . . . . .	..	10	..	..	..	..	..	..	..	..
..	..	Hydrophobia . . . . .	..	..	..	..	..	..	..	..	..	..
..	..	2.—Hæmorrhage	2	50	1	1	2	..	..	1	1	..
..	1	Dropsy	2	200	1	3	4	..	..	2	2	..
1	..	Abscess	1	30	..	1	1	1	..	..	..	..
..	..	Ulcer . . . . .	..	12	1	..	1	1	..	..	..	..
..	..	Fistula . . . . .	..	6	..	..	..	..	..	..	..	..
..	..	Mortification	1	56	1	1	2	..	..	..	..	2
..	..	Cancer	4	288	4	4	8	..	..	3	5	..
1	1	Gout . . . . .	..	18	..	..	..	..	..	..	..	..
2	1	3.—Scrofula . . . . .	..	84	3	1	4	3	1	..	..	..
2	1	Tabes Mesenterica	2	157	2	2	4	4	..	..	..	..
1	4	Phthisis	55	1974	32	31	63	9	25	22	7	..		
..	..	Hydrocephalus	12	425	3	3	6	6	..	..	..	..

Under 1 year.	At 1 and under 5 years.	CAUSES OF DEATH.	Deaths registered in corresponding weeks 1856.	Deaths at all Ages, in London, during the same 13 weeks.	Deaths registered in 13 weeks ending Saturday, June 27th, 1857.							
					AT ALL AGES.			Under 20 years	At 20 and under 40 years.	At 40 and under 60 years.	At 60 and under 80 years.	Over 80 years.
					M.	F.	Total.					
..	3	4.—Cephalitis	8	149	3	4	7	5	..	1	1	..
..	..	Apoplexy	13	327	6	4	10	..	2	3	4	..
..	..	Paralysis	13	213	2	2	4	1	..	1	2	..
..	..	Delirium Tremens	1	30	..	1	1	..	..	1	..	..
..	..	Chorea . . . . .	..	2	..	..	..	..	..	..	..	..
..	..	Epilepsy	2	103	3	..	3	..	..	2	1	..
..	..	Tetanus . . . . .	..	4	..	1	1	..	..	1	..	..
..	..	Insanity . . . . .	..	25	..	..	..	..	..	..	..	..
9	4	Convulsions	10	448	8	5	13	13	..	..	..	..
..	..	Disease of Brain, &c.	6	185	3	2	5	..	..	..	1	4
..	..	5.—Pericarditis . . . . .	..	27	1	1	2	..	..	1	..	1
..	..	Aneurism	1	19	1	..	1	..	..	1	..	..
..	..	Disease of Heart, &c.	13	542	4	7	11	..	..	9	1	1
..	1	6.—Laryngitis	1	74	1	..	1	1	..	..	..	..
10	1	Bronchitis	29	1131	13	13	26	11	1	1	11	2
..	..	Pleurisy	4	31	2	..	2	..	1	..	1	..
6	9	Pneumonia	21	854	10	9	19	15	1	..	2	1
..	..	Asthma	3	100	1	3	4	..	..	1	3	..
..	..	Disease of Lungs, &c.	2	69	..	1	1	..	1	..	..	..
..	..	7.—Teething	3	200	..	..	..	..	..	..	..	..
..	..	Quinsy	2	15	..	1	1	1	..	..	..	..
..	..	Gastritis . . . . .	..	19	..	..	..	..	..	..	..	..
..	..	Enteritis	1	67	..	1	1	..	..	1	..	..
..	..	Peritonitis	3	45	..	1	1	..	..	1	..	..
..	..	Ascites	3	34	..	1	1	..	..	1	..	..
..	..	Ulceration of Intestines.	2	31	..	1	1	..	..	..	1	..
..	..	Hernia . . . . .	..	39	..	..	..	..	..	..	..	..
..	..	Ileus	1	28	..	..	..	..	..	..	..	..
1	..	Intussusception	1	17	1	..	1	1	..	..	..	..
..	..	Stricture of Intestine. . . . .	..	5	..	..	..	..	..	..	..	..
..	..	Disease of Stomach, &c. . . . .	..	74	..	..	..	..	..	..	..	..
..	..	Disease of Pancreas . . . . .	..	1	..	..	..	..	..	..	..	..
..	..	Hepatitis	3	46	..	..	..	..	..	..	..	..
..	..	Jaundice . . . . .	..	43	..	1	1	..	..	..	..	1
..	..	Disease of Liver	5	140	1	2	3	..	..	2	1	..
..	..	Disease of Spleen . . . . .	..	6	..	..	..	..	..	..	..	..
..	..	8.—Nephritis . . . . .	..	7	..	..	..	..	..	..	..	..
..	..	Nephria	1	68	..	1	1	..	1	..	..	..
..	..	Ischuria . . . . .	..	5	..	..	..	..	..	..	..	..
..	..	Diabetes . . . . .	..	14	..	1	1	1	..	..	..	..
..	..	Stone . . . . .	..	12	..	..	..	..	..	..	..	..
..	..	Cystitis	1	11	1	..	1	..	..	..	1	..
..	..	Stricture of Urethra . . . . .	..	9	..	..	..	..	..	..	..	..
..	..	Disease of Kidneys, &c. . . . .	..	72	..	..	..	..	..	..	..	..
..	..	9.—Paramenia . . . . .	..	1	..	..	..	..	..	..	..	..
..	..	Ovarian Dropsy	1	15	..	2	2	..	1	1	..	..
..	..	Childbirth . . . . .	..	43	..	..	..	..	..	..	..	..
..	..	Disease of Uterus, &c. . . . .	..	43	..	..	..	..	..	..	..	..
..	..	10.—Arthritis . . . . .	..	5	..	..	..	..	..	..	..	..
..	..	Rheumatism	1	47	..	..	..	..	..	..	..	..
..	..	Disease of Joints, &c. . . . .	..	39	..	..	..	..	..	..	..	..
..	..	11.—Carbuncle . . . . .	..	12	..	..	..	..	..	..	..	..
..	..	Phlegmon . . . . .	..	6	..	..	..	..	..	..	..	..
..	..	Disease of Skin, &c. . . . .	..	10	..	..	..	..	..	..	..	..
..	..	17.—Intemperance . . . . .	..	31	..	..	..	..	..	..	..	..
..	..	Privation of Food . . . . .	..	2	..	..	..	..	..	..	..	..
1	..	Want of Breast Milk	3	63	1	..	1	1	..	..	..	..
1	..	Neglect . . . . .	..	7	..	1	1	1	..	..	..	..
..	..	Cold . . . . .	..	3	..	..	..	..	..	..	..	..
..	..	Poison . . . . .	..	25	..	..	..	..	..	..	..	..
..	..	Burns and Scalds . . . . .	..	69	..	..	..	..	..	..	..	..
..	..	Hanging	1	27	2	..	2	1	..	..	1	..
1	..	Suffocation	1	62	1	..	1	1	..	..	..	..
1	..	Drowning	2	69	2	..	2	2	..	..	..	..
..	1	Fractures	3	152	2	1	3	1	..	..	1	1
..	..	Wounds . . . . .	..	23	..	..	..	..	..	..	..	..
..	..	Other Violence . . . . .	..	12	..	..	..	..	..	..	..	..
2	1	Total of last 8 Heads	7	439	7	1	8	5	..	..	2	1
..	..	Causes not specified . . . . .	..	106	..	..	..	..	..	..	..	..

Under 1 year.	At 1 and under 5 years.	CAUSES OF DEATH.	Deaths registered in corresponding weeks 1856.	Deaths at all Ages, in London, during the same 13 weeks.	Deaths registered in 13 weeks ending Saturday, Dec. 26th, 1857.							
					AT ALL AGES.			Under 20 years	At 20 and under 40 years.	At 40 and under 60 years.	At 60 and under 80 years.	Over 80 years.
					M.	F.	Total.					
86	91	ALL CAUSES	332	15115	208	215	423	224	39	55	83	22
86	91	SPECIFIED CAUSES	332	15060	207	213	420	223	38	55	82	22
21	43	1. Zymotic Diseases	56	3089	51	50	101	93	..	3	3	2
2	3	2. Dropsy, Cancer, and others of uncertain seat }	15	633	11	10	21	6	1	4	7	3
6	12	3. Tubercular Class	63	2367	35	44	79	26	24	23	6	..
11	9	4. Of Brain, Nerves, &c.	43	1559	24	26	50	20	3	5	18	4
..	..	5. Of Heart, &c.	15	573	3	11	14	..	2	8	4	..
20	18	6. Of Respiratory Organs	69	3135	50	37	87	43	4	3	29	8
2	2	7. Of Digestive Organs	12	791	11	7	18	5	2	6	5	..
..	..	8. Of Kidneys, &c.	4	197	5	1	6	1	2	2	1	..
..	..	9. Of Uterus: viz., Puerperal Disease, &c. }	3	107	..	..	..	..	..	..	..	..
..	..	10. Of Joints and Bones: viz., Rheumatism, &c. }	1	81	..	..	..	..	..	..	..	..
..	..	11. Of Skin, &c. . . . .	..	49	..	..	..	..	..	..	..	..
1	..	12. Malformations	1	40	1	..	1	1	..	..	..	..
8	..	13. Debility from Premature Birth, &c. }	14	420	4	4	8	8	..	..	..	..
6	4	14. Atrophy	6	440	6	5	11	11	..	..	..	..
..	..	15. Age	20	599	3	8	11	..	..	1	6	4
..	..	16. Sudden . . . . .	..	120	..	..	..	..	..	..	..	..
9	..	17. Violence, Privation, &c.	10	560	3	10	13	9	..	..	3	1
1	..	1.—Small Pox . . . . .	..	26	1	..	1	1	..	..	..	..
..	5	Measles	8	363	3	2	5	5	..	..	..	..
4	27	Scarlatina	14	619	23	28	51	51	..	..	..	..
4	5	Hooping Cough	3	526	6	4	10	10	..	..	..	..
..	2	Croup	3	135	1	1	2	2	..	..	..	..
1	..	Thrush . . . . .	..	25	1	..	1	1	..	..	..	..
6	1	Diarrhoea	5	378	7	3	10	7	..	1	1	1
..	..	Dysentery	1	53	..	..	..	..	..	..	..	..
1	..	Cholera . . . . .	..	24	1	..	1	1	..	..	..	..
2	..	Influenza . . . . .	..	94	2	2	4	2	..	..	1	1
..	..	Purpura; Scurvy	2	12	..	..	..	..	..	..	..	..
..	..	Ague . . . . .	..	6	..	..	..	..	..	..	..	..
..	..	Remittent Fever . . . . .	..	26	..	..	..	..	..	..	..	..
..	..	Infantile Fever . . . . .	..	6	..	..	..	..	..	..	..	..
..	2	Typhus	13	614	4	6	10	7	..	2	1	..
..	..	Metria	2	37	..	..	..	..	..	..	..	..
..	..	Rheumatic Fever	1	17	..	1	1	1	..	..	..	..
..	..	Erysipelas	1	67	1	1	2	2	..	..	..	..
2	1	Syphilis	1	54	1	2	3	3	..	..	..	..
..	..	Noma . . . . .	..	6	..	..	..	..	..	..	..	..
..	..	Hydrophobia . . . . .	..	1	..	..	..	..	..	..	..	..
..	..	2.—Hæmorrhage	8	40	3	1	4	..	..	2	1	1
1	1	Dropsy	4	203	2	3	5	2	..	..	2	1
..	1	Abscess . . . . .	..	29	2	1	3	2	1	..	..	..
..	..	Ulcer . . . . .	..	15	..	1	1	..	..	..	1	..
1	1	Fistula . . . . .	..	6	..	..	..	..	..	..	..	..
..	..	Mortification . . . . .	..	41	3	..	3	2	..	..	..	1
..	..	Cancer	3	288	1	4	5	..	..	2	3	..
..	..	Gout . . . . .	..	11	..	..	..	..	..	..	..	..
..	..	3.—Scrofula	1	83	..	..	..	..	..	..	..	..
..	..	Tabes Mesenterica	2	185	..	..	..	..	..	..	..	..
1	4	Phthisis	48	1816	32	34	66	13	24	23	6	..
5	8	Hydrocephalus	12	283	3	10	13	13	..	..	..	..

QUARTERLY RETURN
OF
BIRTHS AND DEATHS REGISTERED IN CHELSEA,

DURING 13 WEEKS,

ENDING SATURDAY, SEPTEMBER 26th, 1857,

BY DR. BARCLAY.

1. THE DEATHS from all causes and at all ages registered during thirteen weeks, ending September 26th, *ult.*, number 327. They are less by 16 than those registered during the corresponding period of last year, which were 343; and are very considerably below the average of former years, 377.1, which if corrected for increase of population becomes 404.8.

2. Throughout London *an excess* of 193 deaths has been recorded during this period beyond that which occurred in 1856: hence while the actual deaths have been 16 fewer in number, the saving of life in Chelsea as compared with last year may be estimated at 20 persons. The deaths in this district last year bore a proportion of 2.44 per cent. to the gross mortality of the metropolis during the quarter; whereas in the present year they only represent 2.29 per cent. It is remarkable how closely these numbers correspond to those obtained by a comparison of the preceding quarters of each year.

3. Among the deaths registered in this Parish, 7 occurred in the Royal Hospital and 7 in St. George's Workhouse, Little Chelsea, which must be deducted in calculating the death-rate according to population as compared with the rest of London, while 16 must be added for persons belonging to Chelsea, who died in St. George's Hospital.

4. In consequence of the prevalence of diarrhœa, the infantile mortality has attained a very high ratio. The deaths under five years of age amount to more than half of the gross mortality; but it is especially during the first year of life that this excess is to be found, they number 110 and exceed those of last year by 20. If these deaths be deducted from all occurring under twenty years of age, the whole mortality during the fifteen years from childhood to manhood includes only 14 individuals.

5. The births of 227 boys and 229 girls, in all 456 children were registered during the thirteen weeks. During the Quarter ending 30th September there were registered in 1854, the births of 465; in 1855, of 414; and in 1856, of 442 children. The excess of births over deaths during the thirteen weeks ending 26th September, 1857, was 129.

Under 1 year. At 1 and under 5 years.		CAUSES OF DEATH.	Deaths registered in corresponding weeks 1856.	Deaths at all Ages, in London, during the same 13 weeks.	Deaths registered in 13 weeks ending Saturday, Sept. 26th, 1857.							
					AT ALL AGES.			Under 20 years	At 20 and under 40 years.	At 40 and under 60 years.	At 60 and under 80 years.	Over 80 years.
					M.	F.	Total.					
1	..	4.—Cephalitis	8	120	1	3	4	1	2	1	..	..
..	..	Apoplexy	7	265	2	4	6	..	1	..	4	1
..	..	Paralysis	3	229	3	2	5	..	..	1	4	..
..	..	Delirium Tremens . . . . .	..	43	..	..	..	..	..	..	..	..
..	..	Chorea . . . . .	..	..	..	..	..	..	..	..	..	..
..	..	Epilepsy	3	84	3	1	4	1	1	2	..	..
..	..	Tetanus . . . . .	..	4	..	..	..	..	..	..	..	..
..	..	Insanity	1	21	..	..	..	..	..	..	..	..
12	3	Convulsions	16	414	8	7	15	15	..	..	..	..
..	..	Disease of Brain, &c.	4	157	2	1	3	..	2	..	1	..
..	..	5.—Pericarditis	2	14	..	..	..	..	..	..	..	..
..	..	Aneurism . . . . .	..	17	..	..	..	..	..	..	..	..
..	..	Disease of Heart, &c.	8	381	6	4	10	..	1	7	1	1
..	..	6.—Laryngitis . . . . .	..	59	..	..	..	..	..	..	..	..
2	2	Bronchitis	14	474	8	12	20	4	2	3	11	..
..	..	Pleurisy	4	22	2	1	3	1	1	..	1	..
4	5	Pneumonia	11	455	6	5	11	9	1	1	..	..
..	..	Asthma	5	57	..	..	..	..	..	..	..	..
..	..	Disease of Lungs, &c. . . . .	..	43	..	..	..	..	..	..	..	..
..	..	7.—Teething . . . . .	..	163	..	..	..	..	..	..	..	..
..	..	Quinsy	1	19	..	..	..	..	..	..	..	..
..	..	Gastritis	2	24	1	1	2	..	1	..	1	..
..	1	Enteritis	1	98	..	1	1	1	..	..	..	..
..	..	Peritonitis	4	51	..	..	..	..	..	..	..	..
..	..	Ascites . . . . .	..	36	..	1	1	..	..	1	..	..
..	..	Ulceration of Intestines.	1	33	..	..	..	..	..	..	..	..
..	..	Hernia	1	35	..	..	..	..	..	..	..	..
..	..	Ileus	1	37	..	..	..	..	..	..	..	..
..	..	Intussusception	1	15	..	..	..	..	..	..	..	..
..	..	Stricture of Intestine. . . . .	..	8	..	..	..	..	..	..	..	..
..	..	Disease of Stomach, &c.	2	80	..	..	..	..	..	..	..	..
..	..	Disease of Pancreas . . . . .	..	..	..	..	..	..	..	..	..	..
..	..	Hepatitis	2	27	..	..	..	..	..	..	..	..
..	1	Jaundice	4	66	1	4	5	1	..	..	..	4
..	..	Disease of Liver	3	187	..	1	1	..	..	..	1	..
..	..	Disease of Spleen . . . . .	..	4	..	..	..	..	..	..	..	..
..	..	8.—Nephritis . . . . .	..	5	..	..	..	..	..	..	..	..
..	..	Nephria	1	49	..	1	1	..	..	..	1	..
..	..	Ischuria . . . . .	..	..	..	..	..	..	..	..	..	..
..	..	Diabetes . . . . .	..	15	..	..	..	..	..	..	..	..
..	..	Stone . . . . .	..	1	..	..	..	..	..	..	..	..
..	..	Cystitis	1	7	1	..	1	..	..	..	1	..
..	..	Stricture of Urethra . . . . .	..	18	..	..	..	..	..	..	..	..
..	..	Disease of Kidneys, &c. . . . .	..	81	1	..	1	..	..	..	1	..
..	..	9.—Paramenia . . . . .	..	..	..	..	..	..	..	..	..	..
..	..	Ovarian Dropsy	1	14	..	..	..	..	..	..	..	..
..	..	Childbirth . . . . .	..	64	..	..	..	..	..	..	..	..
..	..	Disease of Uterus, &c. . . . .	..	29	..	..	..	..	..	..	..	..
..	..	10.—Arthritis . . . . .	..	1	..	..	..	..	..	..	..	..
..	..	Rheumatism . . . . .	..	45	..	..	..	..	..	..	..	..
..	..	Disease of Joints, &c.	1	45	..	..	..	..	..	..	..	..
..	..	11.—Carbuncle	1	17	..	1	1	..	..	1	..	..
..	..	Phlegmon . . . . .	..	4	..	..	..	..	..	..	..	..
..	..	Disease of Skin, &c. . . . .	..	12	..	..	..	..	..	..	..	..
..	..	17.—Intemperance	1	20	..	..	..	..	..	..	..	..
..	..	Privation of Food . . . . .	..	5	..	..	..	..	..	..	..	..
3	..	Want of Breast Milk	9	134	1	2	3	3	..	..	..	..
..	..	Neglect . . . . .	..	1	..	..	..	..	..	..	..	..
..	..	Cold . . . . .	..	..	..	..	..	..	..	..	..	..
..	..	Poison . . . . .	..	31	..	..	..	..	..	..	..	..
..	..	Burns and Scalds . . . . .	..	33	..	..	..	..	..	..	..	..
..	..	Hanging . . . . .	..	29	1	..	1	..	..	1	..	..
..	..	Suffocation	3	33	1	..	1	..	..	..	1	..
..	1	Drowning	1	128	4	1	5	3	1	1	..	..
..	..	Fractures . . . . .	..	188	..	1	1	..	..	..	1	..
..	..	Wounds . . . . .	..	30	1	..	1	..	..	..	1	..
..	..	Other Violence . . . . .	..	16	..	..	..	..	..	..	..	..
..	..	Total of last 8 Heads	4	488	7	2	9	3	1	3	2	..
..	..	Causes not specified . . . . .	..	74	..	..	..	..	..	..	..	..

Under 1 year.		CAUSES OF DEATH.	Deaths registered in corresponding weeks 1856.	Deaths at all Ages, in London, during the same 13 weeks.	Deaths registered in 13 weeks ending Saturday, Dec. 26th, 1857.							
At 1 and under 5 years.	AT ALL AGES.				Under 20 years	At 20 and under 40 years.	At 40 and under 60 years.	At 60 and under 80 years.	Over 80 years.			
	M.									F.	Total.	
1	3	4.—Cephalitis	2	136	3	2	5	4	..	..	1	..
..	..	Apoplexy	16	352	5	4	9	..	1	2	5	1
..	..	Paralysis	3	266	6	7	13	..	..	..	11	2
..	..	Delirium Tremens . . . . .	..	41	1	..	1	..	..	1	..	..
..	..	Chorea . . . . .	..	1	..	..	..	..	..	..	..	..
..	..	Epilepsy	3	89	1	1	2	..	..	..	1	1
..	..	Tetanus . . . . .	..	..	..	..	..	..	..	..	..	..
..	..	Insanity . . . . .	..	24	1	1	2	..	1	1	..	..
10	5	Convulsions	16	468	5	10	15	15	..	..	..	..
..	1	Disease of Brain, &c.	3	182	2	1	3	1	1	1	..	..
..	..	5.—Pericarditis	2	27	1	..	1	..	..	..	1	..
..	..	Aneurism	1	14	..	..	..	..	..	..	..	..
..	..	Disease of Heart, &c.	12	532	2	11	13	..	2	8	3	..
..	1	6.—Laryngitis	1	81	..	2	2	2	..	..	..	..
13	5	Bronchitis	38	1792	30	26	56	20	1	2	25	8
1	..	Pleurisy	1	36	2	1	3	2	1	..	..	..
6	11	Pneumonia	24	1290	15	6	21	18	1	..	2	..
..	..	Asthma	5	176	1	..	1	..	..	..	1	..
..	1	Disease of Lungs, &c. . . . .	..	60	2	2	4	1	1	1	1	..
..	..	7.—Teething . . . . .	..	133	..	..	..	..	..	..	..	..
1	..	Quinsy	1	24	1	..	1	1	..	..	..	..
..	1	Gastritis	1	23	2	..	2	1	..	..	1	..
1	..	Enteritis	2	67	1	2	3	2	..	..	1	..
..	..	Peritonitis . . . . .	..	45	..	2	2	..	2	..	..	..
..	..	Ascites . . . . .	..	34	..	..	..	..	..	..	..	..
..	1	Ulceration of Intestines, . . . . .	..	31	1	2	3	1	..	1	1	..
..	..	Hernia	1	28	..	1	1	..	..	1	..	..
..	..	Ileus	2	37	..	..	..	..	..	..	..	..
..	..	Intussusception . . . . .	..	11	..	..	..	..	..	..	..	..
..	..	Stricture of Intestine. . . . .	..	11	..	..	..	..	..	..	..	..
..	..	Disease of Stomach, &c. . . . .	..	67	..	..	..	..	..	..	..	..
..	..	Disease of Pancreas . . . . .	..	..	..	..	..	..	..	..	..	..
..	..	Hepatitis . . . . .	..	53	..	..	..	..	..	..	..	..
..	..	Jaundice	1	44	..	..	..	..	..	..	..	..
..	..	Disease of Liver	4	179	6	..	6	..	..	4	2	..
..	..	Disease of Spleen . . . . .	..	4	..	..	..	..	..	..	..	..
..	..	8.—Nephritis . . . . .	..	7	..	1	1	..	1	..	..	..
..	..	Nephria	3	56	2	..	2	1	1	..	..	..
..	..	Ischuria	1	4	..	..	..	..	..	..	..	..
..	..	Diabetes . . . . .	..	13	..	..	..	..	..	..	..	..
..	..	Stone . . . . .	..	7	..	..	..	..	..	..	..	..
..	..	Cystitis . . . . .	..	11	2	..	2	..	..	1	1	..
..	..	Stricture of Urethra . . . . .	..	15	1	..	1	..	..	1	..	..
..	..	Disease of Kidneys, &c. . . . .	..	82	..	..	..	..	..	..	..	..
..	..	9.—Paramenia . . . . .	..	3	..	..	..	..	..	..	..	..
..	..	Ovarian Dropsy	2	10	..	..	..	..	..	..	..	..
..	..	Childbirth	1	59	..	..	..	..	..	..	..	..
..	..	Disease of Uterus, &c. . . . .	..	35	..	..	..	..	..	..	..	..
..	..	10.—Arthritis . . . . .	..	2	..	..	..	..	..	..	..	..
..	..	Rheumatism . . . . .	..	51	..	..	..	..	..	..	..	..
..	..	Disease of Joints, &c. . . . .	..	28	..	..	..	..	..	..	..	..
..	..	11.—Carbuncle . . . . .	..	17	..	..	..	..	..	..	..	..
..	..	Phlegmon . . . . .	..	13	..	..	..	..	..	..	..	..
..	..	Disease of Skin, &c.	1	19	..	..	..	..	..	..	..	..
..	..	17.—Intemperance . . . . .	..	26	..	..	..	..	..	..	..	..
..	..	Privation of Food . . . . .	..	6	..	..	..	..	..	..	..	..
7	..	Want of Breast Milk	6	86	..	7	7	7	..	..	..	..
..	..	Neglect . . . . .	..	1	..	..	..	..	..	..	..	..
..	..	Cold . . . . .	..	1	..	..	..	..	..	..	..	..
..	..	Poison	2	21	..	..	..	..	..	..	..	..
..	..	Burns and Scalds . . . . .	..	52	..	..	..	..	..	..	..	..
..	..	Hanging . . . . .	..	25	..	..	..	..	..	..	..	..
1	..	Suffocation	1	40	1	..	1	1	..	..	..	..
..	..	Drowning . . . . .	..	90	..	..	..	..	..	..	..	..
1	..	Fractures . . . . .	..	170	1	3	4	1	..	..	3	..
..	..	Wounds	1	25	1	..	1	..	..	..	..	1
..	..	Other Violence . . . . .	..	17	..	..	..	..	..	..	..	..
2	..	Total of last 8 Heads	4	440	3	3	6	2	..	..	3	1
..	..	Causes not specified . . . . .	..	55	1	2	3	1	1	..	1	..

BRU7

Book - 1001

John Chatto Esq
Royal College of Surgeons
Lincoln's Inn fields