

General report with statistical tables of the patients under treatment in the wards of the Highgate Infirmary, from October 1st, 1870, to September 30th, 1871 / by Thomas Stretch Dowse.

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Publication/Creation

London : J.W. Thomas, printer, 1871.

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Central London Sick Asylum District.

18.
GENERAL REPORT

WITH

STATISTICAL TABLES

OF THE

PATIENTS UNDER TREATMENT

IN THE WARDS OF THE

HIGHGATE INFIRMARY,

From October 1st, 1870, to September 30th, 1871.

BY

THOMAS STRETCH DOWSE, M.D.

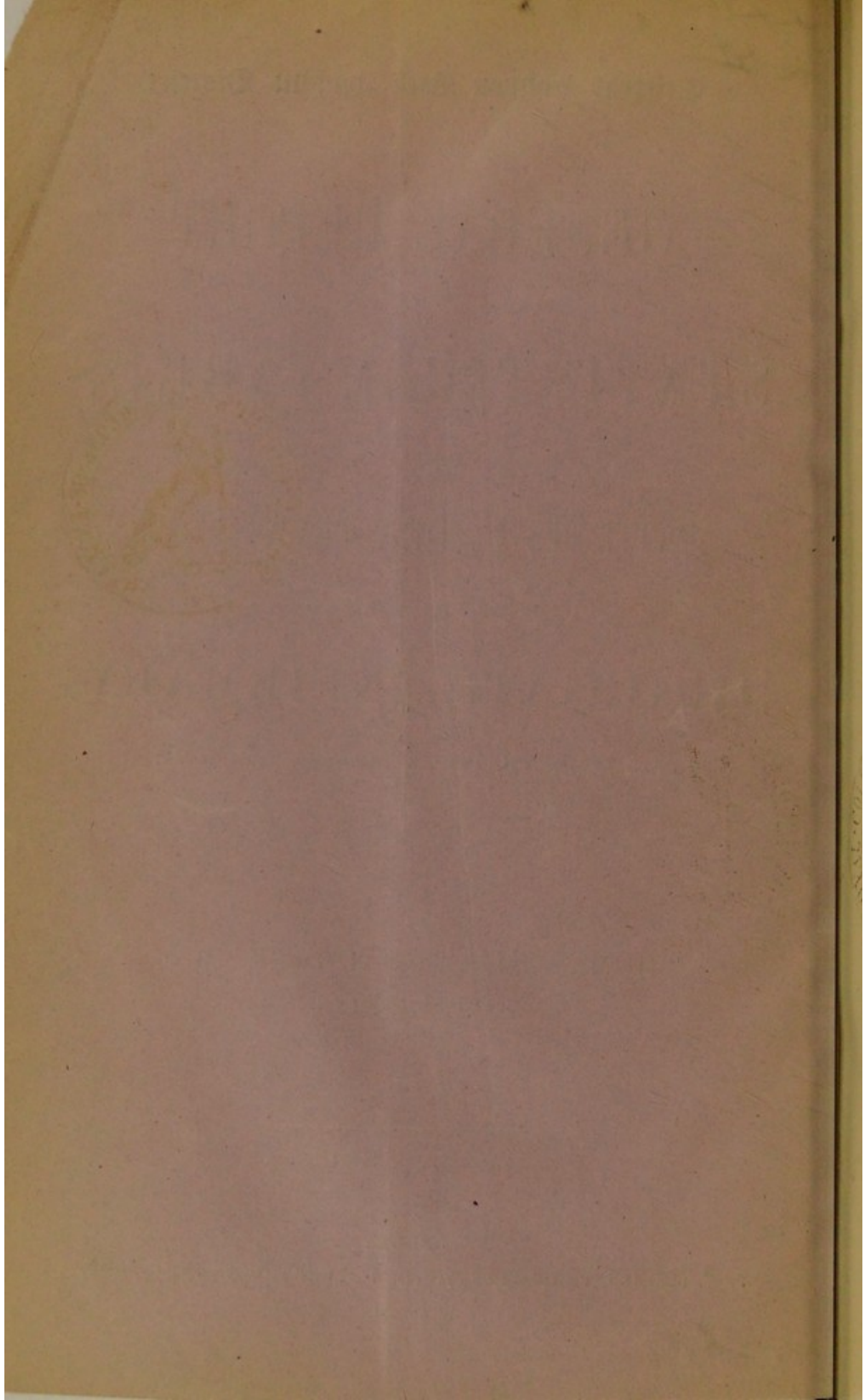
MEDICAL OFFICER.

LONDON :

J. W. THOMAS, PRINTER, TAVISTOCK STREET, COVENT GARDEN.

MDCCCLXXI.

Feb 19



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THE HISTORY OF THE

ROYAL NAVY

FROM THE

EARLIEST PERIODS

TO THE PRESENT

BY

ADMIRAL LORD BRADSHAW

LONDON: PRINTED BY RICHARD CLAY AND COMPANY, LTD.

1912

GENERAL REPORT.

GENTLEMEN,

I have the honour to lay before you, for your consideration and approval, my first Report, General and Statistical, respecting the Highgate Infirmary, in the Central London Sick Asylum District, for the twelve months commencing October 1st, 1870, and ending September 30th, 1871.

At the time when this Building was first taken possession of by you it was in a very different state to what it is at present, and nearly three-fourths of it was a mere skeleton. Five Wards were fitted for the reception of, and occupied by, one hundred and fifty-seven Patients from St. Pancras Parish. Beyond this there was not a Ward even partly furnished, and, as you will remember, considerable delay was experienced in consequence of the bedsteads having to be returned, as they were not sent according to contract.

Occupation.

These and other difficulties having been overcome, the Building was occupied by Patients in the same ratio that it was completed, and before the expiration of three months more than four hundred Infirm Paupers were receiving the benefits which this Asylum affords.

Admission of Patients.

I beg to thank you for having from time to time given consideration to the various requests that I have made to you relative to alterations and improvements. There are now upon the premises hand-pumps, with buckets and hose complete, to extinguish any small fire in the Wards; and in addition to these, there are stand pipes and hosing, which can be attached in two or three minutes to the water-cocks in different parts of the grounds, and one hundred gallons of water per minute can be directed upon any part of the structure; with these precautions, I do not think we have much to fear, and should a fire break out I trust it would be easily subdued. A good road has been made on the south side of the premises, which will prove very advantageous to the Patients for the purpose of exercise. Chairs have been placed in the Grounds for the use of the Patients, and found extremely serviceable during the past summer. Much more, however, requires to be done to render the building and its workings perfect.

Two important points for consideration are, the Ventilation and Warming of the Wards. But as I am aware that you have these matters at present under consideration, I need scarcely say more concerning them.

This Infirmary, situated as it is in one of the most healthful of the London suburbs, is admirably adapted to the treatment and cure of certain classes of Disease, and I cannot speak too highly of the great sanitary and hygienic advantages which I feel that I have at my command.

These great adjuvants, which are to the Physician and Surgeon alike of inestimable value, must always be considered, in relation to this Asylum, as most important elements towards curing or relieving the afflicted; and

Fire
Appliances.

Improvements.

Ventilation and
Warming.

Sanitary
Advantages as
to Position.

I might perhaps here take the liberty to suggest, that Medical Officers in connexion with the Central London Sick Asylum District would do well to consider these points and send their cases accordingly. I will here make some general observations in reference to this matter based upon my experience of the past twelve months. An erroneous impression appears to have taken deep root in the minds of some, that this Infirmary was built expressly for the Acute Sick, and for such only. Now this idea is entirely a wrong one, and has been denied by the Local Government Board. The difference between the terms "Acute Sick" and "Acute Disease" must always be borne in mind. By way of example, I will take a Patient suffering from Acute Inflammation of the Lungs, who might be considered both Acutely Sick and Acutely Diseased. But a Patient with Consumption might be Acutely Sick although not suffering from an Acute Disease. Hence this distinction is without doubt an important one, and would be a matter for consideration with, say for instance, the Medical Officer of the Westminster Union, whether he would think proper to send to this Infirmary a severe case of Pneumonia, which means both Acutely Sick and Acutely Diseased, or a case of Phthisis which means Acutely Sick, but Chronically Diseased: the former might be seriously injured by the journey, the latter benefited.

Difference
between Acute
Sick and Acute
Disease.

Concerning Phthisis, which is usually looked upon as an incurable form of Disease, and which is found more extensively in these Wards now than six months ago, and in all probability will have increased 20 per cent. six months hence, I have to state, that persons suffering from this

Phthisis.

Disease after having gone the round of the London Hospitals, will, if spared, eventually find their way here. I cannot see any special advantage which this Asylum is able to present to those who are reduced to "Death's door," although on the other hand I have numerous examples of Patients who have been admitted with diffuse tubercle, hectic, and emaciated, who are rapidly gaining flesh and strength, and feeling comparatively well. I am sure that had such continued in the close atmosphere of their own dwellings, the result would have been very different, and I attribute this to the healthy condition of the Building generally. Again, I have many at present under treatment where the Disease has made such ravages previous to their admission that their existence is merely a question of time.

Improvement
in Consumptive
Cases.

As to other Diseases of the Chest of a Chronic nature—
as Asthma, Bronchitic Asthma, and Chronic Bronchitis—
these all do well here if uncomplicated with other ma-
ladies. When, however, these affections are secondary to
Chronic Kidney or Heart Diseases it matters little where
they are treated, as the sequela is certain, and almost
definite in point of time. I cannot say as much for Acute
and Chronic Rheumatism—in fact I sometimes think they
would do better if treated in a less exposed situation.
Those admitted into this Asylum are for the most part
of long standing, and for which every drug in the
Pharmacopœia has been tried over and over again. My
treatment usually consists in the administration of hot
Alkaline Baths, which in some instances have proved
highly beneficial. Whilst referring to this class of Disease,
which is the most numerous of any in this Infirmary, I

Chronic
Bronchitis.

Rheumatism.

cannot help bringing before your notice the want of a hot-air room with appliances, after the manner of a Turkish bath. I feel sure that it would prove of great service, and well repay the outlay of money for its erection and maintenance.

Turkish Baths.

Of Ulcerated Legs, I have had a large number under treatment, and I am happy to say the result has been in the majority of instances most satisfactory. Cases of many years' standing have left the building perfectly cured; some, however, are so entirely due to constitutional causes that they will not yield to treatment. I consider the advantages of this Asylum particularly adapted to this class of Disease. For the treatment of an Ulcerated Leg there are required specific diet, perfect rest, as well as regular and careful dressing. There is no wound in surgical practice requiring more thoughtful care and skilful treatment than this, and what makes it more unfortunate for persons so afflicted is, that they are denied the advantages of a bed in almost all London Hospitals.

Ulcerated Legs.

Treatment of Ulcerated Legs.

Cases of Paralysis.—These are increasing in numbers weekly. I have set apart No. 11 Ward for this class of Disease, but at present there are more than enough to fill it. Shower Baths and Galvanism are brought into requisition in their treatment. I am sorry, however, to state that of nearly all the Diseases in the building these are the most intractable.

Paralysis.

Scrofulous cases are unlimited, and those chiefly coming under my care require Surgical treatment—as Sores and Diseased Joints. These are much more likely to be benefited in this Institution than at any Infirmary in London, let its ventilation be what it may. Whilst remarking upon

Scrofula.

this Disease I am sure there are, from my own experience, in a large area like that of your Asylum District, many little children helplessly afflicted, lying in the midst of poverty, to whom an Institution of this kind ought to be considered of inestimable value. I was under the impression that when a nice Ward was established for Children, such as we have at present, it would soon become occupied by little Patients with Diseased Hips and Spines. Cases of this nature might be much benefited by pure air, proper appliances, and the good diet and nursing afforded in this Asylum. I am very much disappointed that these advantages have been overlooked, and I fear they are not known by many of the District Medical Officers.

Childrens'
Ward.

Nearly two hundred Patients have been under treatment for Venereal Disease, and no trouble has been spared to render their cure as effective as possible. Vapour Baths and other appliances have been brought into requisition—in fact, everything has been done in this Department in accordance with the highest surgical opinions, and in addition to this their moral culture has not been overlooked. The Chaplain has been most indefatigable in his endeavours to reform some of the women, by placing them in homes especially prepared for them; and I am happy to say, much good has been done in this respect. Certain Wards have been set apart for the Treatment of these Patients, and as a rule they are not allowed the privileges enjoyed by other Inmates.

Treatment for
Syphitis.

Moral Culture.

I have thus brought briefly before you the principal Diseases which are at present under treatment in this Infirmary, with remarks thereon, made from very careful observation, and I venture to hope they may not be in-

opportune especially as there appears to be great diversity of opinion as to the Class and Nature of the Diseases which ought to be received here, and for which this Building was erected.

I now beg to direct your attention to certain points in connexion with the progressive development and general working of the Wards, the condition of the Patients, and the Rules which are enforced for their guidance and comfort. It has been my chief object, especially during the Summer months, to have every Patient in the open air as much as possible; by so doing the atmosphere of the Wards has been kept pure, and many ailments well-known to Hospital Medical Men have been kept at bay. Rules relating to every Department have been framed after mature consideration, just as circumstances have practically indicated. Great care has been given to insure to the Patients as much liberty as is compatible with the perfect working of the Building, and all possible attention is directed to communicating with their friends whenever danger to life appears imminent.

Treatment of
Patients.

It is the rule of this Asylum, and I believe of Hospitals generally, that all Patients shall assist as far as they are able in keeping their Wards clean, and helping their more unfortunate neighbours. This rule is carried out under the guidance of the Nurses, but no one is permitted to perform any duties at all laborious without my consent. I consider slight occupation of this nature of great help to the Patients, in relieving their minds of the constant anxiety which disease and confinement must induce. Nothing has ever been required of them except to assist to keep their Wards clean, and perform any light work in

Occupation for
Patients.

connexion therewith. As a matter of course females are expected to occupy their time in needlework, and in this way they save the Institution much expense by making their own garments. The men who understand tailoring are likewise employed to make male attire. These and other like duties relating to the Wards are entirely under the admirable superintendence of Miss Torrance; and her report of what has been done in this way by the Patients during the past twelve months will be extremely interesting

Hours for
Rising, Retir-
ing, &c.

All Patients whom I do not desire to keep constantly in bed, are expected to rise at 6 A.M., wash themselves, make their beds, and be ready for breakfast by 7.30 A.M.; the hour for dinner is Noon, for Tea 5 P.M., and at 7 P.M., all must be in bed, and the Gas extinguished. The Nurse of each Ward reads Prayers Morning and Night.

Religious
Devotion.

Divine Service is performed in each Ward at stated times on certain days. There are two general services on Sunday—viz., in the morning and evening—in No. 11 Ward; this is frequently found very inconvenient, and a proper place for the due performance of Holy Worship is greatly needed.

Papers, &c., for
the Wards.

The Patients are supplied with Daily Papers and Periodicals for their amusement and edification; each Ward has upon the average six daily. Some volumes of good standard works, containing interesting but solid information, such as Histories, Biographies of Eminent Men, great Travellers, &c., would be found an acquisition.

Lady Visitors.

Several ladies of the neighbourhood very kindly devote much time to visiting the Patients, and both by their good counsel and soothing influence help to mitigate the

pangs of suffering and soften the rough grip of disease and death.

Some Wards, as you know, are set apart by the order of the Local Government Board for Contagious Diseases. I have it in contemplation to set aside others for the treatment of Phthisis and Acute Affections of the Chest; but this cannot be done until means have been adopted for more perfect ventilation and warming.

Distribution of
Disease.

Concerning the Conduct of Patients, all things being considered, I have no great reason to complain. As a matter of fact, some are naturally dissatisfied, and fancy themselves ill-treated; others are irritable from the nature of their disease; many suffer great mental distress in consequence of their reduced condition in life; but in almost every case of insubordination I have found moral persuasion far more effective than restraint. Diet, however, is not unfrequently a subject which appears to give some displeasure. A large number of the Patients admitted here have been inmates of nearly all the London Hospitals, and come under the class of Incurables. These expect the daily allowance of wine and spirits so fashionable now with hospital life; this I never accede to unless absolutely necessary for the treatment of their disease.

Conduct of
Patients.

In referring to Diets and the use of Stimulants, which is a subject of the greatest moment in regard to the Expenditure of this Establishment, I beg to inform you that I always endeavour to give to it my best attention; and I may as well inform you that I do not advocate the system adopted by some of giving stimulants and wine in almost every form of disease; on the contrary, I believe it to be quite unnecessary, especially in this healthy situation. It must, however, be borne in mind that the

Diets and the
use of Stimu-
lants.

class of Patients coming under my care have in a large number of cases been in the habit of drinking to excess, and under these circumstances one must be guided by conditions rather than by rule.

Treatment of
Erysipelas.

The following remarks are of interest in a Medical and general point of view, as exemplifying most forcibly the success of treatment upon the anti-stimulant plan. When I first commenced Office twelve months ago, scarcely a Ward was free from Erysipelas; and during the first fortnight two deaths occurred from this Disease. I treated such cases at that time according to the usual practice at London Hospitals—namely, by the plentiful administration of Stimulants, with large doses of Iron and Quinine. Not feeling satisfied with the result, I completely altered my practice, and directly Erysipelas appeared I gave an Emetic, followed by a brisk purge, and, after this, simply Milk Diet. It gives me great pleasure to state that during the past twelve months I have cut short over one hundred attacks of this Disease, and for the last two months it has been quite unheard of. Furthermore, in prescribing Diets it is my practice to hold the Treatment of Disease in view and not the wishes of the Patients.

Sanitary State
of the Building.

It affords me great pleasure to refer to the general Hygienic condition of this Building during the past twelve months, and the almost total absence of Epidemic or Endemic Disease. Nineteen cases of Small Pox have broken out, which were sent to the Small Pox Hospital as soon as diagnosed. This number, when the virulence of the past Epidemic is taken into consideration, cannot be looked upon as large, and in my opinion is in no way due to the proximity of the Small Pox Hospital. Every

Patient admitted into the Building under fifty years of age was vaccinated, who had not suffered from this Disease.

There is a Special Department of this Establishment to which I refer with all possible regard—namely, the Nursing System. (By this I mean the Nurses collectively.) It merits my most unqualified approval, and it is quite an exception to the rule when I have cause to complain. No one can enter our Infirmary Wards without feeling satisfied that everything is under perfect control, and that management and training are here exemplified to exist from matters of minute detail up to the most important duty that a Nurse has to perform. I need scarcely say what a source of comfort and help it is to me to know that my directions are carried out to the letter, and that any question put relative to a Patient's rest, appetite, pain, desire, &c., is not only answered straightforwardly, but with a decided interest in the case. This is saying a great deal, but although there may be some exceptions it is correct in the main.

Nursing
Department,

As to the Cost of this Establishment, considerable outcry was at one time made that it was excessive, but the whole machinery was then in its infancy, and as it becomes matured so we find the expenses considerably diminish; I do not pretend to say that it is even now absolutely perfect, but I labour with the fullest confidence, that should improvements continue to be made as they have been of late, the severest critic will in a short time find no ground for complaint. Many a sickly Child has by good culture grown into the strongest of Men, and I feel sure that this Asylum will at no distant period amply

Remarks upon
Past and Present
State of
the Building.

repay us by its efficiency and usefulness for all the labour that we have bestowed upon it.

Condition. It is foreign to my Department to go deeply into Financial matters, but I find there has been a considerable and progressive saving in almost everything, and as far as I can judge there is not an ounce of waste throughout the entire Building. Nothing is supplied to the Wards for the use of the Patients, let it be ever so trifling, without an especial order signed by myself, or, if I am not in the way, by Mr. Thom, my Assistant Medical Officer. Spirits or wine are never supplied in quantity to the Nurse of a Ward. The daily allowance, and that alone, is given to each Nurse for her Patients.

I now conclude my Report, Gentlemen, by drawing your attention to the following Statistical Tables, arranged in numerical order, according to the manner by which the Diseases are classified. Each Table will show you those Patients who have been discharged Cured, Relieved, Irregular, or Dead. (By Irregular is meant those who have been discharged by their own request or transferred to other Hospitals.) After these there are four columns, giving the Five Hundred and Eleven Patients now in the Building, the Diseases from which they suffer, and whether to the best of my judgment they are curable or incurable. For conciseness these Tables are carried to a General Summary. In addition, I have drawn up Monthly Tables of the Mortality of Patients, and the Parish to which they belong. It will be seen that the Death-rate is for the most part due to Chronic Incurable Maladies, such as Consumption, Cancer, Heart and Kidney Diseases. The mortality will always of course vary according to the nature of the cases admitted. For the past twelve

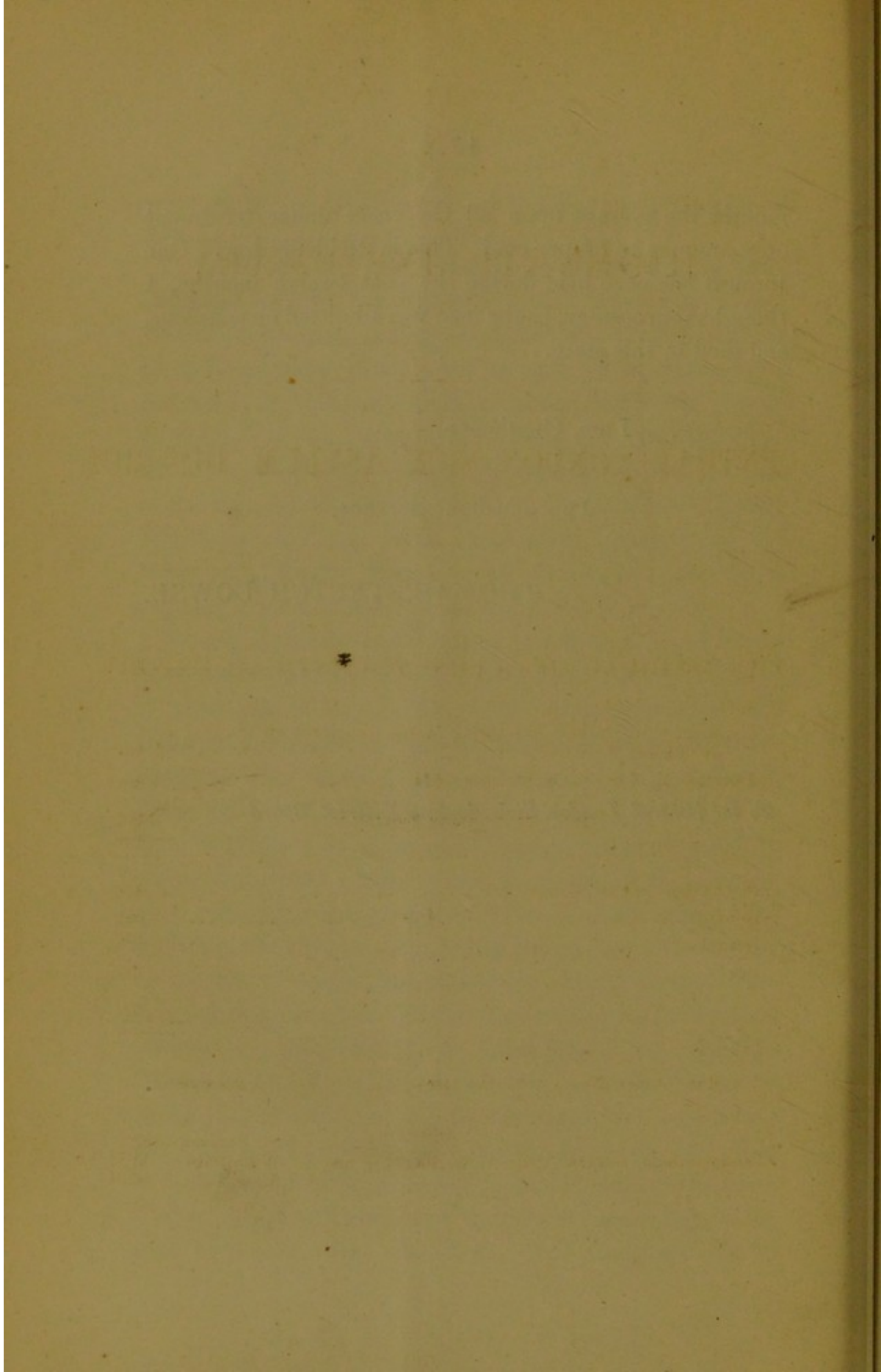
months the average upon all the cases under treatment only amount to ~~84~~ per cent. This is decidedly low. One Inquest has been ^{8.4} held during the past twelve months, I thought it necessary, as the man was admitted unconscious, and died in this state.

I am, Gentlemen,

Your obedient Servant,

THOMAS STRETCH DOWSE.

To the Central London Sick Asylum District Board.



HIGHGATE INFIRMARY.

CENTRAL LONDON SICK ASYLUM DISTRICT.

THE MEDICAL OFFICERS' STATISTICAL REPORT.

The number of Patients remaining in the Infirmary on the 1st of October, 1870, was	157
Admitted up to the 1st of October, 1871	1,945
Total number under Treatment	<u>2,102</u>

Discharged well or convalescent	1,027
Relieved	161
Irregular	225
Dead	178
	<u>2,102</u>

Rate of mortality over all the cases 8·4 per cent.

Average number resident, daily, throughout the year..	{	St. Pancras	297·3
		Westminster	53·123
		St. Giles	46·34

Monthly Return of Admissions, Discharges, and Deaths, distinguishing the Sexes, for the Year ending September 30th, 1871.

	NUMBER OF PATIENTS.					
	Admitted.		Discharged.		Died.	
	M.	F.	M.	F.	M.	F.
October	17	12	11	8	6	5
November	123	180	39	28	7	9
December	39	92	39	49	9	10
January	74	89	32	50	8	8
February.....	63	103	57	108	4	11
March	77	88	80	94	9	5
April	74	69	58	75	5	9
May	45	80	60	82	2	9
June	62	76	49	84	8	7
July.....	72	101	50	67	5	9
August	78	110	64	89	9	2
September	93	128	71	69	12	10
Total	817	1128	610	803	84	94

Admitted during the Year—

Males 817
 Females 1128
 ——— 1945

Remaining from last Year—

Males 89
 Females..... 68
 ——— 157

2102

Discharged during the Year—

Males 610
 Females 803
 ——— 1413

Died during the Year—

Males 84
 Females 94
 ——— 178

Remaining under Treatment 511

2102

General Summary of the Tables of Disease.

DISEASES.	Cured.		Relieved.		Irregular.		Died.		Under treatment.		Total.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
I. General diseases	164	176	18	17	12	18	2	6	19	34	466
II. Diseases of the eye, ear and nose	12	14	..	1	..	1	..	..	3	6	37
III. Diseases of the heart, blood- vessels, &c.	7	8	6	11	5	3	10	8	9	20	87
IV. Diseases of the nervous system	14	3	9	12	5	7	9	7	27	35	128
V. Diseases of the respiratory organs	78	98	26	12	43	16	47	45	73	63	501
VI. Diseases of the digestive system	21	26	5	5	1	4	6	11	14	17	110
VII. Diseases of the urinary organs	18	3	6	6	3	3	6	6	9	11	71
VIII. Diseases of the female organs of generation, &c.	..	87	..	6	..	10	..	10	..	22	135
IX. Diseases of the organs of locomotion	12	18	8	2	..	5	4	1	3	16	69
X. Diseases of skin and cel- lular tissue	77	138	2	1	14	12	..	..	39	59	342
XI. Miscellaneous	22	31	2	6	10	53	..	..	8	24	156
Total	425	602	82	79	93	132	84	94	204	307	2102

No. I.—General Diseases, Contagious and Constitutional.

DISEASES.	CASES DISCHARGED.								UNDER TREATMENT.				Observations.
	Cured.		Re- lieved.		Irregu- lar.		Died.		Curable.		In- curable.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Typhus fever .....	..	..	..	..	1	..	..	..	..	..	..	..	Sent to Fever Hospital.
Enteric fever	4	2	..	..	..	..	..	..	..	..	..	..	✱
Relapsing fever .....	..	1	..	..	..	..	..	..	..	..	..	..
Febricula	22	35	..	..	..	3	..	..	..	..	..	..
Ague	7	..	..	..	..	..	..	..	..	..	..	..
Erysipelas	16	13	1	..	..	1	1	1	*1	1	..	..	* This case died from pyæmia
Acute rheumatism	7	10	3	2	..	..	..	..	3	4	..	..
Gonorrhœal rheumatism	7	2	..	..	..	..	..	..	1	2	..	..
Chronic rheumatism	58	53	6	3	4	4	..	..	5	7	..	..
Lumbago	2	2	..	..	..	..	..	..	1	1	..	..
Gout	11	1	..	..	*1	..	..	..	4	1	..	..	* To Small Pox Hospital.
Syphilis, primary	6	36	1	1	1	5	..	..	..	6	..	..
„ secondary .....	..	..	..	..	..	..	..	..	..	..	..	..
„ tertiary	4	6	4	1	2	4	..	..	2	3	..	1	
Scrofula	5	12	..	..	1	1	..	..	1	3	..	..
Chlorosis .....	..	..	..	..	..	..	..	..	..	1	..	..
Diabetes .....	..	..	..	..	..	..	1	..	..	..	..	..
Ascites .....	..	..	3	5	..	..	..	..	..	..	..	..
Fatty tumour	1	..	..	..	..	..	..	..	..	..	..	..	Tumour removed.
Chicken-pox .....	..	2	..	..	..	..	..	..	..	..	..	..
Rheumatic arthritis .....	..	..	..	3	..	..	..	*1	..	4	..	..	* Old age. 7 weeks old.
Syphilis, hereditary .....	..	..	..	..	..	..	..	1	..	..	..	..
Gangrene .....	..	..	..	..	..	..	..	2	..	..	..	..
Disease of atlo-axoid joint .....	..	..	..	..	..	..	..	1	..	..	..	..	Reported <i>Med. Times and Gazette</i> for July 8th, 1871.
Rheumatic gout	9	1	..	1	1	..	..	..	1	..	..	..
Rheumatism, syphilitic	5	..	..	1	1	..	..	..	..	..	..	..
Total	164	176	18	17	12	18	2	6	19	33	..	1	

No. II.—*Diseases of the Eye, Ear and Nose.*

DISEASES.	CASES DISCHARGED.								UNDER TREATMENT.				Observations.
	Cured.		Re- lieved.		Irregu- lar.		Died.		Curable.		In- curable.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
<i>Eye—</i>													
Granular lids		3	..	..	..	..	..	..	..	1	1	..	
Corneitis	1	1	..	..	..	..	..	..	..	1	..	..
Conical cornea .....	..	..	..	1	..	..	..	..	..	..	..	..
Conjunctivitis .....	..	5	..	..	..	..	..	..	..	..	..	..
Catarrhal ophthalmia..	2	1	..	..	..	..	..	..	..	..	..	..
Strumous ophthalmia..	..	1	..	..	..	*1	..	..	..	2	..	..	* To Small Pox Hospital.
Pannus .....	..	..	..	..	..	..	..	..	..	..	..	..
Iritis	3	..	..	..	..	..	..	..	..	..	..	..
Sclero conjunctivitis ..	..	1	..	..	..	..	..	..	1	..	..	..
Gonorrhœal ophthalmia	3	..	..	..	..	..	..	..	..	..	..	..
<i>Ear—</i>													
Otorrhœa	3	1	..	..	..	..	..	..	..	..	..	..
<i>Nose—</i>													
Polypus, malignant ..	..	..	..	..	..	..	..	..	..	..	..	1	
Ozæna .....	..	1	..	..	..	..	..	..	1	..	..	..
Cancer of scalp .....	..	..	..	..	..	..	..	..	..	..	..	1	
Total	12	14	..	1	..	1	..	..	2	4	1	2	

No. III.—*Diseases of the Heart, Blood-vessels, &c.*

DISEASES.	CASE DISCHARGED.								UNDER TREATMENT.				Observations.	
	Cured.		Re- lieved.		Irregu- lar.		Died.		Curable.		In- curable.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
HEART.	Pericarditis	2	1	2	1	Associated with mitral regur- gitant disease.
	Hypertrophy	4	3	1	1	
	<i>Valvular</i>													
	Aortic obstructive	5	1	1	1	
	Aortic regurgitant	1	2	2	..	
	Mitral 'presystolic'	1	
	Mitral regurgitant	2	6	4	4	3	
	Tricuspid regurgi- tant	1	
Innominate aneurism	1	Paralysis, with occlusion of both tibial arteries and gangrene of extremity. * Cellulitis. Gangrene ex- haustion.	
Exophthalmic goitre ..	..	..	..	..	..	..	..	..	..	..	..	1
Varicose veins	2	..	..	..	..	1	..	..	..	2	..	1
Embolism .....	..	..	..	..	..	..	1	..	..	..	..	..
Phlebitis .....	..	1	..	..	..	..	..	*1	..	..	..	..
Arteritis .....	..	..	..	..	..	..	1	..	..	..	..	..
Glandular disease	3	..	..	..	..	..	..	..	1	..	1	..
Bubo	2	3	..	..	..	..	..	..	3	7	..	..
Angina pectoris .....	..	..	..	2	..	..	..	..	..	..	..	2
Dropsy .....	..	2	..	..	..	..	..	..	..	..	..	..
- Total	7	8	6	11	5	3	10	8	4	9	5	11		

No. IV.—*Diseases of the Nervous System.*

DISEASES.	CASES DISCHARGED.								UNDER TREATMENT.				Observations.
	Cured.		Re-lieved.		Irregu-lar.		Died.		Curable.		In-curable.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Encephalitis	2	1	..	1	1	..	2	* Occurred in a woman over 30 ; cerebral convolutions found completely flattened.
Meningitis .....	..	..	..	..	..	..	1	..	..	1	..	1
Meningitis, tubercular..	..	..	..	..	..	..	1	..	..	..	..	..
Apoplexy .....	..	..	..	..	..	..	1	1	..	..	..	..
Hydrocephalus .....	..	..	..	..	..	1	..	1*	..	..	..	..
Paralysis, general	1	2	3	1	1	3	* Small Pox Hospital.
Paraplegia .....	..	..	..	..	1	1	..	1	..	..	2	..
Hemiplegia, left .....	..	..	3	1	..	..	..	..	..	..	2	11
Hemiplegia, right .....	..	..	4	3	..	..	..	..	2	..	3	7
Locomotor ataxy .....	..	..	1	4	..	..	..	..	..	..	4	1
Aphasia .....	..	..	..	..	..	..	1	..	..	..	3	2
Epilepsy	1	..	..	1	4*	1	..	..	..	..	2	1
Shaking palsy .....	..	..	..	..	..	..	..	..	..	..	1	2
Chorea .....	..	..	..	..	..	2*	..	..	..	1	..	..
Hysteria .....	♂	♂	..	..	..	1	♂	..	1	1	..	..
Brain softening .....	..	..	..	..	..	..	1	2	..	..	2	3
Neuralgia	2	1	..	..	..	..	..	..	..	..	..	..
Vertigo and headache ..	2	1	..	..	..	..	..	..	..	..	..	..
Palsy .....	..	..	..	..	..	..	..	..	..	..	1	..
Imbecility .....	..	..	..	..	..	..	..	..	1	..	..	..
Cerebro-spinal hyperæsthesia .....	..	..	..	..	..	..	..	..	..	1	..	..
Delirium tremens .....	..	1	..	..	..	..	..	..	..	..	..	..
Sciatica	2	..	..	..	..	..	..	..	..	..	..	..
Total	N 9	8 8	9	12	5	7	9	7	6	4	21	31	

No. V.—*Diseases of the Respiratory Organs.*

DISEASES.	CASES DISCHARGED.								UNDER TREATMENT.				Observations.
	Cured.		Re- lieved.		Irregu- lar.		Died.		Curable.		In- curable.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Asthma	5	2	5	..	7	1	5	..	* To Small Pox Hospital.
Bronchitis, acute	12	16	..	..	..	..	2	2	2	6	..	..
Bronchitis, chronic	30	54	2	3	*1	2	4	6	10	12	3	5	
Bronchitic asthma	6	8	2	2	8	1	..	..	5	7	1	1
Broncho-pneumonia ..	..	3	..	2	..	..	1	1	..	..	..	..
Pneumonia	9	6	..	..	..	..	5	3	2	5	1	..
Emphysema .....	..	..	..	..	..	..	..	..	1	1	2	..
Empyema .....	..	..	..	..	5	2	..	..	2	..	..	..
Pleurisy .....	..	5	..	..	..	1	2	..	1	..	..	..
Pleurisy, chronic .....	..	..	2	1	..	..	..	..	..	..	..	..
Gangrene of lung .....	..	..	2	..	1	..	..	..	..	..	1	..
Hydrothorax .....	..	..	1	..	..	..	..	..	..	..	2	..
Hæmoptysis	1	..	1	127 cases have occurred dur- ing the past twelvemonths.
Phthisis, pulmonic	13	2	10	4	21	9	33	31	..	3	34	19	
Bronchitis and emphy- sema .....	..	..	2	..	..	..	..	..	..	..	..	..
Pleuro-pneumonia	3	2	..	..	..	..	..	1	1	1	..	..
Pulmonary abscess ....	..	..	..	..	..	1	..	..	..	1	..	..
Total ..	78	98	26	12	43	16	47	45	24	38	49	25	

No. VI.—*Diseases of the Digestive System.*

DISEASES.	CASES DISCHARGED.								UNDER TREATMENT.				Observations.
	Cured.		Re- lieved.		Irregu- lar.		Died.		Curable.		In- curable.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Epulis	1	Removed.
Cancer of tongue.....	2	2	1	To Small Pox Hospital.
Cleft palate .....	..	..	..	..	1	..	..	..	..	..	..	..
Sore throat	1	4	1	Removed.
Tonsillitis.....	2	6	..	..	..	..	..	..	..	3	..	..
Stricture of œsophagus	2	1	Removed.
Fibroid growth of tonsil	..	1	..	..	..	..	..	..	..	..	..	..
Ulcer of stomach.....	1	Sarcina ventriculi Tœnia solium.
Hæmatemesis .....	..	2	..	..	..	..	1	..	1	3	..	..
Cancer of stomach	2	* To Small Pox Hospital.
Cancer of pancreas .....	..	..	..	..	..	1	..	1	..	..	..	..
Dyspepsia	7	5	3	* Operated upon.
Vomiting .....	..	..	..	..	..	..	..	..	1	..	..	..
Parastic disease	1	* Chronic peri- tonitis, ascites.
Diarrhœa	2	6	..	..	..	..	..	..	..	3	..	..
Lead colic.....	1	1	..	..	..	*1	..	..	..	..	..	..
Cancer of rectum.....	1	2	2	2	* Operated upon.
Anal fistula	*2	..	..	..	..	1	..	..	*2	*1	..	..
Dysentery	1	* Chronic peri- tonitis, ascites.
Hernia .....	..	..	..	2	..	..	..	..	..	..	..	..
Hæmorrhoids	* Chronic peri- tonitis, ascites.
Cirrhosis of liver.....	..	..	3	2	..	..	..	..	..	..	..	..
Hydatid of liver	1	..	* Chronic peri- tonitis, ascites.
Cancer of liver.....	..	..	..	..	..	1	1	1	..	..	1	..
Amyloid liver .....	..	..	..	..	..	..	*2	..	..	..	2	..
Peritonitis	4	1	* Chronic peri- tonitis, ascites.
Cancer of mesenteric glands .....	..	..	..	..	..	..	1	2	..	..	..	..
Anus, artificial.....	..	..	..	..	..	..	..	..	..	..	1	..
Total	21	26	5	5	1	4	6	11	5	14	9	3	

No. VII.—*Diseases of the Urinary Organs.*

DISEASES.	CASES DISCHARGED.								UNDER TREATMENT.				Observations.
	Cured.		Re-lieved.		Irregu-lar.		Died.		Curable.		In-curable.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Bright's disease, chronic	..	..	..	4	..	2	5	4	..	..	4	7	
" " acute..	2	3	..	..	..	..	1	..	..	1	..	..
Abscess of kidney	..	..	1	..	..	..	..	1	..	..	..	..
Hæmorrhage from kidney	1	..	..	..	..	..	..	..	2	..	..	..
Cystitis	..	..	4	2	..	..	..	1	1	1	..	2	
Vesical calculus	..	..	..	..	1	..	..	..	..	..	..	..
Diseased bladder	..	..	..	..	1	..	..	..	..	..	..	..	To Small Pox Hospital.
Incontinence of urine..	1	..	..	..	..	1	..	..	..	..	..	..
Stricture of urethra	4	..	..	..	..	..	..	..	..	..	..	..
Urinary abscess	1	..	..	..	..	..	..	..	..	..	..	..
Urinary fistula	..	..	..	..	..	..	..	..	..	..	1	..	
Hydrocele	7	..	..	..	*1	..	..	..	..	..	..	..	* To Small Pox Hospital.
Orchitis	2	..	..	..	..	..	..	..	1	..	..	..
Scrofulous testicle	..	..	1	..	..	..	..	..	..	..	..	..
Total	18	3	6	6	3	3	6	6	4	2	5	9	

No. VIII.—*Diseases of the Female Organs of Generation, Breast, &c.*

DISEASES.	CASES DISCHARGED.								UNDER TREATMENT.				Observations.
	Cured.		Re- lieved.		Irregu- lar.		Died.		Curable.		In- curable.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Pelvic cellulitis	2	..	..	..	..	..	..	..	..	..	..
Diseased ovaries	2	..	..	..	..	..	..	..	..
Leucorrhœa	1	..	..	..	..	..	..	..	..	..	..
Ulcer of cervix	3	..	..	..	..	..	..	..	..	..	..
Hypertrophy of uterus, syphilitic	2	..	..	..	..	..	..	..	..	..	..
Fibrous tumour of ute- rus	4	..	..	..	..	..	..
Prolapse of uterus*	* Many cases have been under treatment, but not as the pri- mary disease.
Metritis	2	..	..	..	..	..	..	..	4	..	1	
Retroversion of uterus	2	..	..	..	..	..	..	..	..
Vesico-vaginal fistula	2	..	..	..	..	..	1	
Cancer of vagina	1	..	..	..	2	
Amenorrhœa	3	..	..	..	..	..	..	..	4	..	..
Dysmenorrhœa	2	..	..	..	..	..	..	..	..
Menorrhagia	8	..	..	..	..	..	..	..	..	..	..
Cancer of uterus	2	..	7	..	..	..	1	
Cancer of breast	*1	..	2	..	..	..	3	* Breast remov- ed. Recovery.
Ovarian fibroid	2	
Gonorrhœa	66	..	..	..	*1	..	..	..	4	..	..	* To Small Pox Hospital.
Total	87	..	6	..	10	..	10	..	12	..	10	

No. IX.—*Diseases of the Organs of Locomotion.*

DISEASES.	CASES DISCHARGED.								UNDER TREATMENT.				Observations.
	Cured.		Re- lieved.		Irregu- lar.		Died.		Curable.		In- curable.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
<i>Spine—</i>													
Angular curvature .. .. .	..	..	..	..	..	..	..	..	..	..	..	3	
Lateral " .. .. .	..	..	..	..	..	..	..	..	..	..	..	1	
Partial dislocation .. .. .	..	..	..	..	..	..	..	..	..	..	..	1	
Caries of .. .. .	..	..	..	1	..	..	1	..	..	..	..	..
<i>Bone—</i>													
Periostitis	2	1	..	..	..	..	..	..	..	..	..	..
Caries, bones of ribs .. .. .	..	..	..	..	..	..	..	..	1	..	..	..
" " sternum .. .. .	..	..	..	..	..	..	1	..	..	..	..	..	Scrofulous.
Necrosis of cranium .. .. .	..	..	5	..	..	..	..	..	2	..	..	..
" of jaw .. .. .	..	..	3	..	..	..	..	..	1	..	..	..
" of tibia	2	1	..	..	..	..	..	..	1	..	..	..
" of fibula .. .. .	..	..	..	..	..	2	..	..	1	..	..	..
" bones of foot	2	..	..	..	..	..	..	1	..	..	..	..
Cancer of bone .. .. .	..	..	..	..	..	1	..	..	..	..	..	..	Sent to Guy's Hospital where she died.
<i>Joints—</i>													
Acute synovitis	1	3	..	..	..	..	..	..	..	..	..	..
Knee, disease of	1	1	..	..	..	*1	..	..	..	1	..	..	* To Small Pox Hospital.
" ankylosis of .. .. .	..	..	..	..	..	..	..	..	..	..	..	..
Diseased hip	2	..	..	1	..	1	2	..	1	2	..	..
" ankle .. .. .	..	..	..	..	..	..	..	..	..	1	..	..
" wrist .. .. .	..	5	..	..	..	..	..	..	..	..	..	..
Progressive muscular atrophy .. .. .	..	..	..	..	..	..	..	..	..	..	..	2	
Disease of bursa	2	5	..	..	..	..	..	..	..	..	..	..
Ganglion .. .. .	..	2	..	..	..	..	..	..	..	..	..	..
Perforating ulcer of foot .. .. .	..	..	..	..	..	..	..	..	..	1	..	..	Chopart's ampu- tation of foot. Recovery.
Total	12	18	8	2	..	5	4	1	3	9	..	7	

No. X.—*Diseases of Skin and Cellular Tissue.*

DISEASES.	CASES DISCHARGED.								UNDER TREATMENT.				Observations.
	Cured.		Re- lieved.		Irregu- lar.		Died.		Curable.		In- curable.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Inflammation of cellular tissue—Cellulitis	2	5	..	..	..	..	..	..	1	3	..	..
Abscess, psoas . . . . .	..	..	..	..	..	..	..	..	..	..	2	5	
" iliac . . . . .	..	..	..	..	..	..	..	..	..	1	..	..
" of breast . . . . .	..	2	..	..	..	1	..	..	..	..	..	..
" of neck	4	..	..	..	..	..	..	..	..	..	..	..
" various	8	2	..	..	..	..	..	..	..	1	..	..
Bursal abscess . . . . .	..	5	..	..	..	2	..	..	..	..	..	..
Slough and gangrene . . . .	..	3	..	..	..	..	..	..	..	..	2	..	
<i>Skin—</i>													
Pytyriasis ruber . . . . .	..	2	..	..	..	..	..	..	1	..	..	..
Erythema	2	..	..	..	..	..	..	..	..	1	..	..
Psoriasis	2	5	..	..	..	..	..	..	..	3	..	..
Pemphigus . . . . .	..	..	..	..	..	1	..	..	..	..	..	..	To Small Pox Hospital.
Eczema	4	6	..	..	..	..	..	..	1	1	..	..
Rupia . . . . .	..	1	..	..	..	..	..	..	..	1	..	..
Lupus superficialis . . . .	..	..	..	1	..	..	..	..	1	1	..	..
Scrofuloderma . . . . .	..	5	..	..	..	..	..	..	..	3	..	..
Syphiloderma . . . . .	..	2	..	..	..	..	..	..	..	2	..	..
Ulcer of legs	34	44	2	..	14	*5	..	..	31	27	..	..	* Two to Small Pox Hospital.
Carbuncle	3	1	..	..	..	..	..	..	..	2	..	..
Impetigo . . . . .	..	7	..	..	..	..	..	..	..	1	..	..
Eczema impetiginodes . . .	..	2	..	..	..	..	..	..	..	4	..	..
Impetigo contagiosa . . .	..	3	..	..	..	..	..	..	..	..	..	..
Itch	15	38	..	..	..	*3	..	..	..	3	..	..	* Two to Small Pox Hospital.
Prurigo . . . . .	..	2	..	..	..	..	..	..	..	..	..	..
Pruritus	2	1	..	..	..	..	..	..	..	..	..	..
Tinea favosa . . . . .	..	1	..	..	..	..	..	..	..	..	..	..
Onychia	1	1	..	..	..	..	..	..	..	..	..	..	Syphilitic, ending in necrosis of bone, amputa- tion of phalanx.
Total	77	138	2	1	14	12	..	..	35	54	4	5	

No. XI.—*Miscellaneous.*

DISEASES.	CASES DISCHARGED.								UNDER TREATMENT.				Observations.
	Cured.		Re-lieved.		Irregu-lar.		Died.		Curable.		In-curable.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Debility.....	7	25	2	6	..	13	..	..	3	11	..	..
No disease .....	..	..	..	..	..	8	..	..	..	..	..	..
Convalescence from fevers .....	..	..	..	..	4	15	..	..	..	6	..	..
Unclassified .....	..	..	..	..	*4	17	..	..	..	4	..	1	* One to Small Pox Hospital.
Ununited fractures ....	..	..	..	..	1	..	..	..	..	..	1	..	
Partially united frac- tures .....	..	..	..	..	..	..	..	..	4	2	..	..
Fractures	5	1	..	..	*1	..	..	..	..	..	..	..	* To Small Pox Hospital.
Frost-bites	2	3	..	..	..	..	..	..	..	..	..	..
Jaundice	2	..	..	..	..	..	..	..	..	..	..	..
Injuries.....	6	2	..	..	..	..	..	..	..	..	..	..
Total	22	31	2	6	10	53	..	..	7	23	1	1	

Monthly Return of Deaths, and Causes of Death, and United Ages of Patients from the Parishes of St. Pancras, St. Giles, and the Union of Westminster, for the Year ending 30th September, 1871.

ST. PANCRAS.				ST. GILES.				WESTMINSTER.				
DISEASES.	Males.	Females.	Total.	DISEASES.	Males.	Females.	Total.	DISEASES.	Males.	Females.	Total.	Ages.
OCTOBER.				OCTOBER.				OCTOBER.				
Erysipelas, exhaustion ..	..	1	1	..	..	..	..	..	..	..	..
Heart disease, dropsy ....	..	1	1	..	..	..	..	..	..	..	..	69
Phthisis	3	2	5	..	..	..	..	..	..	..	..	57
Phthisis, pneumonia	1	..	1	..	..	..	..	..	..	..	..	165
Melæna, exhaustion	1	..	1	..	..	..	..	..	..	..	..	20
Cancer of tongue, exhaustn. ..	..	1	1	..	..	..	..	..	..	..	..	47
Erysipelas, pyæmia .....	..	1	1	..	..	..	..	..	..	..	..	45
Totals	5	6	11	..	..	..	..	..	..	..	..	38
NOVEMBER.				NOVEMBER.				NOVEMBER.				
Phthisis	2	2	4	Phthisis .....	..	1	1	Bronchitis .....	..	1	1	64
Pleurisy	1	..	1	..	..	..	..	General bronchitis, and pleurisy	1	..	1	30
Senile decay .....	..	1	1	..	..	..	..	..	..	..	..
Renal disease, dropsy ....	..	1	1	..	..	..	..	..	..	..	..
Broncho-pneumonia	1	1	2	..	..	..	..	..	..	..	..
Hemiplegia, aphasia ....	..	1	1	..	..	..	..	..	..	..	..
Cancer of uterus .....	..	1	1	..	..	..	..	..	..	..	..
Hip-joint disease, exhaustion	1	..	1	..	..	..	..	..	..	..	..	12
Cancer of uterus .....	..	1	1	..	..	..	..	..	..	..	..	74
Totals	5	8	13	..	..	1	1	..	1	1	2	94

ST. PANCRAS.				ST. GILES.				WESTMINSTER.				
DISEASES.	Males.	Females.	Total.	DISEASES.	Males.	Females.	Total.	DISEASES.	Males.	Females.	Total.	Ages.
DECEMBER.				DECEMBER.				DECEMBER.				
Phthisis.....	1	2	3	Phthisis.....	1	..	1	44				
Phthisis, pneumonia	1	..	1	Softening of brain	1	..	1	67				
Renal disease, dropsy.....	1	..	1	Acute bronchitis .....	..	1	1	60				
Epithelioma of tongue, <i>pharynx</i> .....	..	1	1	Cancer of liver.....	1	..	1	69				
Rheumatism, pericarditis ..	1	1	2	Pneumonia, diarrhoea .....	..	1	1	64				
Cancer of mamma .....	..	1	1									
Phlebitis, cellulitis, ex- haustion .....	..	1	1									
Paralysis, exhaustion	1	..	1									
Heart disease	1	..	1									
Apoplexy .....	..	1	1									
Total	6	7	13		3	2	5	304				
JANUARY.				JANUARY.				JANUARY.				
Apoplexy	1	..	1	Arteritis, mortification of leg.....	..	1	1	80				
Phthisis	3	..	3	Mortification of toes, ex- haustion .....	..	1	1	61				
Heart disease .....	..	1	1									
Phthisis, gangrene of lung	1	..	1									
Heart disease, hæmoptysis, syncope	1	..	1									
Exhaustn., caries of sacrum	1	..	1									
Cancer of uterus .....	..	1	1									
Abscess of kidney .....	..	1	1									
Scrofulus knee, phthisis	..	1	1									
Chronic bowel disease.....	..	1	1									
Totals	7	5	12		..	2	2	141				
									1	1	2	94

Acute bronchitis	1	1	68	1	1	37	Carcinoma of stomach and liver	1	1	72
Renal disease .....	..	1	59	..	1	52	Phthisis, pneumonia ..	..	1	60
Phthisis .....	..	4	163	..	1	36	Hæmoptysis, pneumonia..	..	1	71
Phthisis, ulceratn. of bowel	1	1	58	..	1	..	Cancer of stomach ..	..	1	73
Heart disease, dropsy .....	..	1	60	..	..	..	Total	1	3	276
Inanition (3 weeks old) ..	1	1	..	..	..	..	MARCH.			
Total	3	6	408	1	2	125	Syphilis (7 weeks old).....	..	1	80
MARCH.							Phthisis.....	..	1	24
Pericarditis	1	..	15	..	1	..	Bronchitis, exhaustion ..	1	..	..
Phthisis	3	..	85	..	1	49	Total	1	2	104
Syphilis, meningitis	1	..	41	..	..	65	APRIL.			
Bronchitis, dropsy .....	..	1	59	..	1	..	Inflammation of brain, empyema	1	..	37
Heart disease, dropsy	1	..	48	..	1	..	Total	1	3	114
Cancer of uterus, bronchitis	..	1	48	..	1	..	APRIL.			
Natural decay	1	..	81	..	1	..	Total	1	2	377
Total	7	2	377	1	2	114	NIL.			
APRIL.							Cancer of stomach, gangrene	..	1	24
Cancer of stomach, gangrene	..	1	24	..	1	..	Phthisis	1	1	61
Phthisis	1	1	61	..	2	64	Phthisis, kidney disease..	1	..	64
Phthisis, kidney disease..	1	..	64	..	1	65	Broncho-pneumonia .....	..	1	65
Broncho-pneumonia .....	..	1	65	..	1	60	Mortification of toes ..	..	1	60
Mortification of toes .....	..	1	60	..	1	58	Necrosis of foot, erysipelas	..	1	58
Necrosis of foot, erysipelas	..	1	58	..	1	53	Chronic cystitis .....	..	1	53
Chronic cystitis .....	..	1	53	..	1	31	Pneumonia, pleurisy	1	..	31
Pneumonia, pleurisy	1	..	31	..	1	67	Cancer of uterus .....	..	1	67
Cancer of uterus .....	..	1	67	..	1	48	Paralysis, dis. of arteries	1	..	48
Paralysis, dis. of arteries	1	..	48	..	1	62	Cancer of womb .....	..	1	62
Cancer of womb .....	..	1	62	..	1	52	Cancer of inguinal and lumbar glands	1	..	52
Cancer of inguinal and lumbar glands	1	..	52	..	1	13	Total	5	8	645
Total	5	8	645	1	3	37	APRIL.			

Monthly Return of Deaths, and Causes of Death—continued.

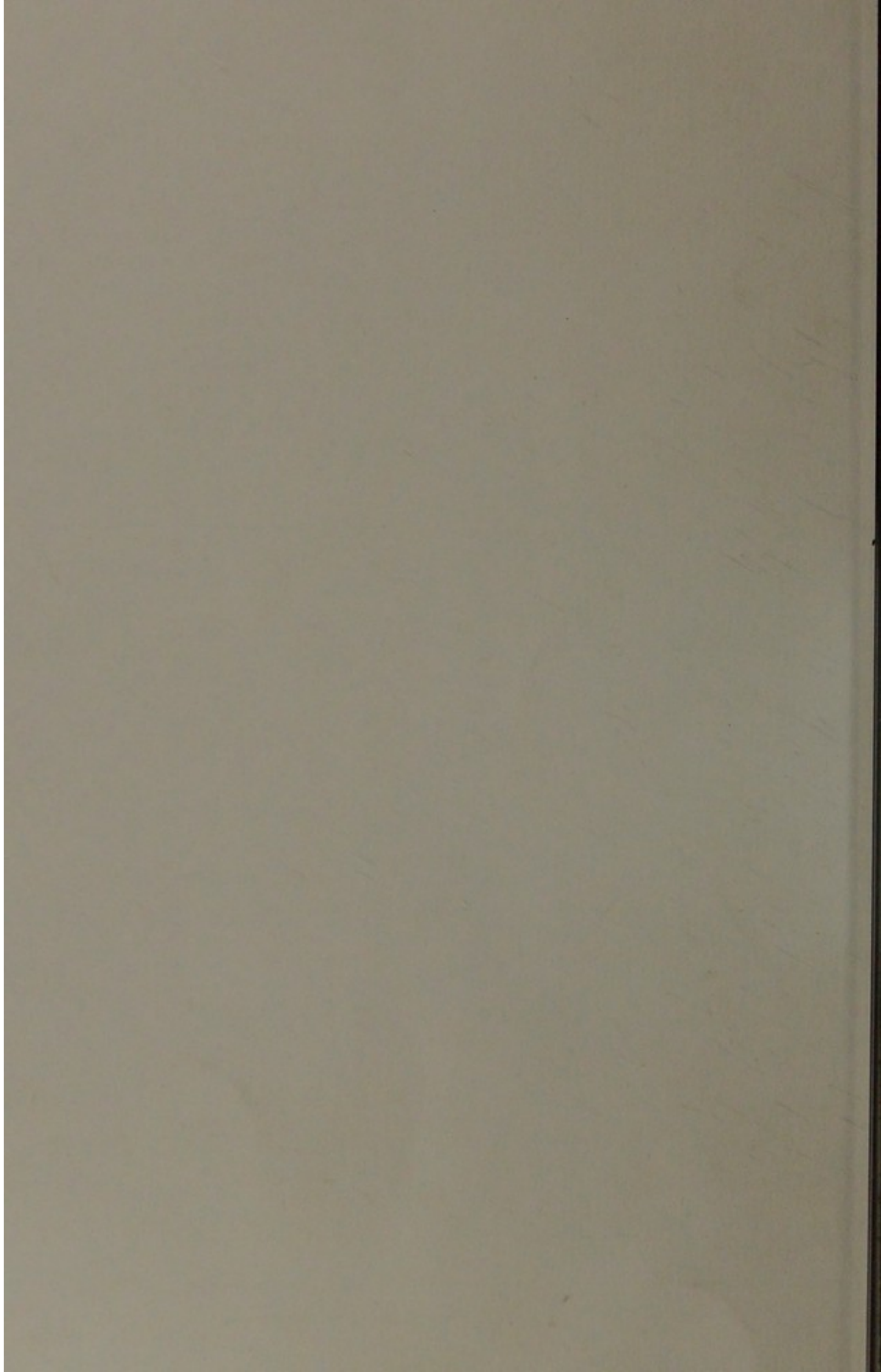
ST. PANCRAS.				ST. GILES.				WESTMINSTER.						
DISEASES.	Males.	Females.	Total.	Ages.	DISEASES.	Males.	Females.	Total.	Ages.	DISEASES.	Males.	Females.	Total.	Ages.
MAY.					MAY.					MAY.				
Acute bronchitis .....	..	1	1	62	Rheumatic arthritis, ex-	..	1	1	69	Cerebral softening, athe-	..	1	1	44
Phthisis, acute bronchitis,	..	1	1	22	haustion .....	..	1	1	77	roma .....	..	1	1	44
pleurisy .....	..	1	1	49	Cancer of breast .....	..	1	1	30					
Kidney disease, dropsy ..	..	1	1	33	Disease of heart, syncope	..	1	1						
Kidney disease, uræmia..	1	..	1	20										
Caries of sacrum	1	..	1		Total .....	..	3	3	176	Total .....	..	1	1	44
Fatty degeneration of														
heart .....	..	1	1	67										
Epithelioma, exhaustion..	..	1	1	63										
Total	2	5	7	316										
JUNE.					JUNE.					JUNE.				
Phthisis	2	..	2	66	Cystitis, exhaustion	1	..	1	67	Phthisis, hæmoptysis	1	..	1	32
Phthisis,pleuro-pneumonia	1	..	1	43	Phthisis .....	..	1	1	49	Phthisis.....	..	1	1	18
Disease of atlanto-axoidal														
joint, meningitis .....	..	1	1	31										
Bronchitis	1	..	1	53	Total	1	1	2	116	Total	1	1	2	50
Hepatic disease, dropsy ..	1	..	1	29										
Cancer of uterus .....	..	1	1	40										
Cancer of rectum .....	..	1	1	67										
Pneumonia	2	1	3	144										
Total	7	4	11	473	Total	1	1	2	116	Total	1	1	2	50

Kidney disease, dropsy ..	1	1	60	Phthisis	1	3	4	129	Kidney disease.....	..	1	1	28
Pyæmia.....	1	1	53	Paraplegia, mania .....	..	1	1	46	Kidney disease, pneu-	1	..	1	39
Cancer of liver .....	..	1	61	Cancer	1	..	1	72	monia	1	..	1	
Paralysis	1	1	22										
Phthisis.....	..	2	57										
Total	2	4	253	Total	2	4	6	247	Total	1	1	2	67
AUGUST.													
Diabetes mellitus, phthisis	1	..	36	AUGUST.									
Phthisis, hæmoptysis,	1	..	39	Pleurisy, hydrothorax....									
syncope	1	1	81	1 .. 1 38									
Phthisis	1	1	38	Total									
Pneumonia .....	..	1	62	1 .. 1 38									
Chronic bronchitis	1	..	32	Total									
Kidney disease	1	..	58	1 .. 1 38									
Paralysis .....	..	1	64	Total									
Pleuro-pneumonia .....	..	1	52	1 .. 1 38									
Heart disease, apoplexy ..	1	..		Total									
Total	6	4	462	1 .. 1 38									

Monthly Return of Deaths, and Causes of Death—continued.

ST. PANCRAS.				ST. GILES.				WESTMINSTER.						
DISEASES.	Males.	Females.	Total.	Ages.	DISEASES.	Males.	Females.	Total.	Ages.	DISEASES.	Males.	Females.	Total.	Ages.
SEPTEMBER.					SEPTEMBER.					SEPTEMBER.				
Caries of scapula, exhaustion	1	..	1	47	Kidney disease, dropsy ..	1	..	1	52	Kidney disease, pneumonia	1	..	1	54
Phthisis	2	2	4	147	Scrofula, amyloid liver, dropsy	1	..	1	18	Typhoid ulceration and diarrhoea .....	..	1	1	20
Phthisis, bronchitis, pleurisy	1	..	1	46						Cancer of vagina .....	..	1	1	67
Phthisis, diarrhoea	1	..	1	32						Softening of brain .....	..	1	1	48
Phthisis, pneumonia	1	1	2	67										
Cancer of uterus .....	..	1	1	47										
Pneumonia	1	..	1	41										
Tubercular meningitis ..	1	..	1	4										
Cancer of stomach and pancreas .....	..	1	1	65										
Cancer of rectum .....	..	1	1	35										
Chronic hydrocephalus ..	..	1	1	33										
Phthisis, heart disease ..	..	1	1	16										
Total	8	8	16	580	Total	2	..	2	70	Total	1	3	4	189

Total number of Deaths in the Infirmary for the Year, 178.





TABLE(S)
RUN INTO
GUTTER

