

**Quarterly report on the sanitary condition of the parish of Saint Luke,
Middlesex. July, August, and September, 1856 / by F.W. Pavy.**

Contributors

Pavy, F. W. 1829-1911.
Royal College of Surgeons of England

Publication/Creation

London : Printed by F. Nicholls, 1856.

Persistent URL

<https://wellcomecollection.org/works/z zr5jrsg>

Provider

Royal College of Surgeons

License and attribution

This material has been provided by This material has been provided by The Royal College of Surgeons of England. The original may be consulted at The Royal College of Surgeons of England. where the originals may be consulted. This work has been identified as being free of known restrictions under copyright law, including all related and neighbouring rights and is being made available under the Creative Commons, Public Domain Mark.

You can copy, modify, distribute and perform the work, even for commercial purposes, without asking permission.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

19
QUARTERLY REPORT

ON THE

SANITARY CONDITION

OF THE

PARISH OF SAINT LUKE,

MIDDLESEX.

BY

F. W. PAVY, M.D. LOND:

Licentiate of the Royal College of Physicians.

Medical Officer of Health to the Parish of Saint Luke, Middlesex.

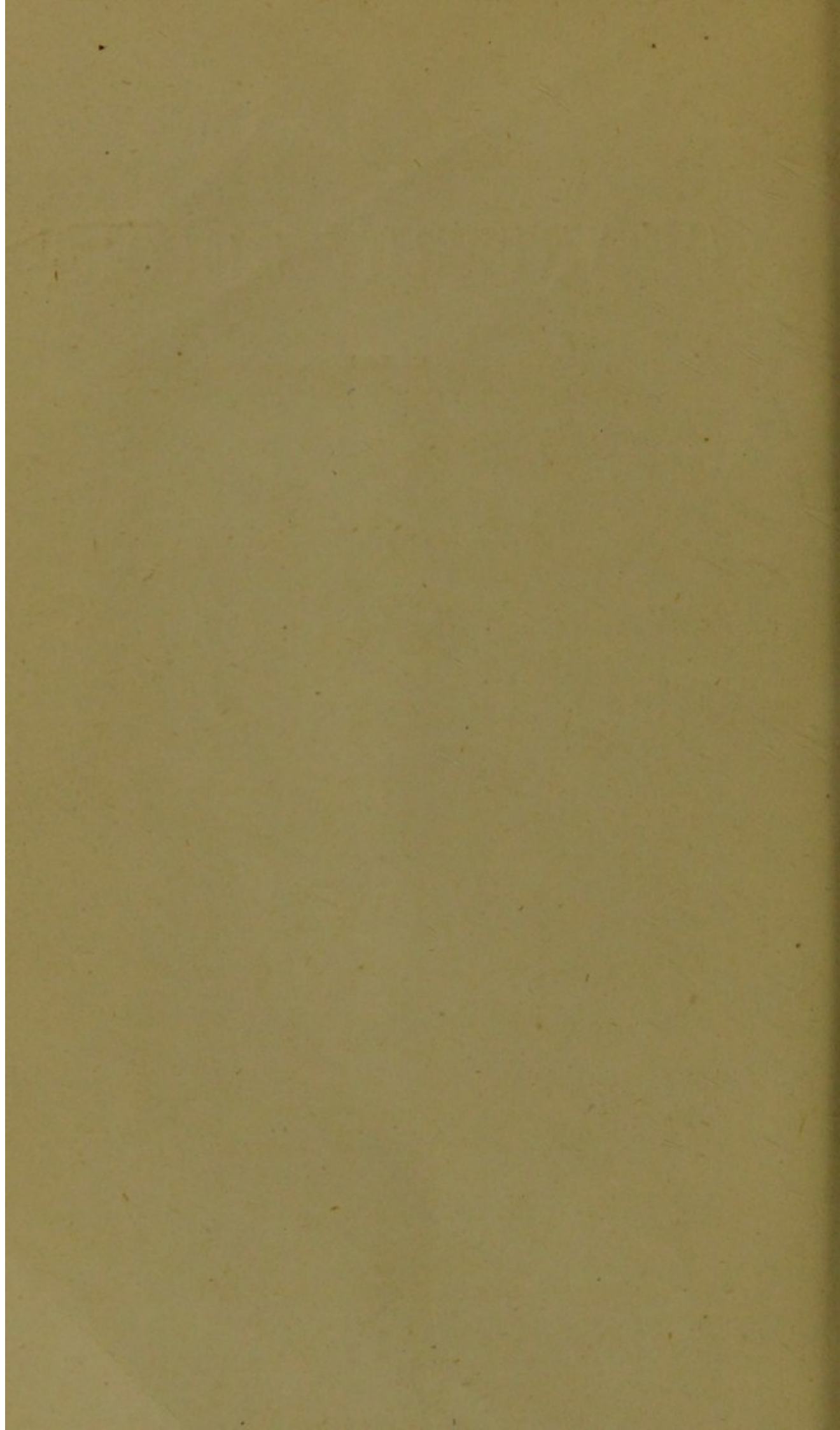
Lec'turer on Anatomy and Physiology at Guy's Hospital.

JULY, AUGUST, AND SEPTEMBER, 1856.

London :

PRINTED BY F. NICHOLLS, 2, MILTON STREET, FINSBURY SQUARE.

1856.



QUARTERLY REPORT

ON THE

SANITARY CONDITION

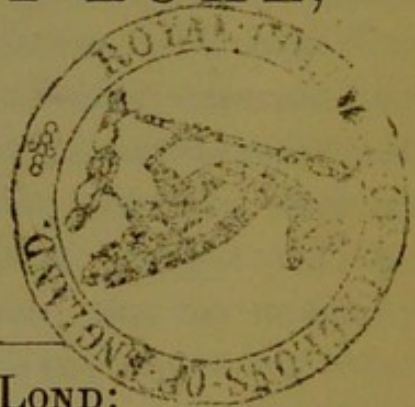
OF THE

PARISH OF SAINT LUKE,

MIDDLESEX.

BY

F. W. PAVY, M.D. LOND:



Licentiate of the Royal College of Physicians.

Medical Officer of Health to the Parish of Saint Luke, Middlesex.

Lecturer on Anatomy and Physiology at Guy's Hospital.

JULY, AUGUST, AND SEPTEMBER, 1856.

London :

PRINTED BY F. NICHOLLS, 2, MILTON STREET, FINSBURY SQUARE.

1856.

the City of London on the South, and flanked on either side, by the Parishes of Shoreditch on the East, and of Clerkenwell on the West. By the Registrar-General, it is divided into the following four sub-districts, two of which are situated on the North, the other two on the South side of Old Street, which, running from East to West, separates the Parish, into two pretty nearly equal portions, especially as regards amount of population.

1. The district of Old Street is situated between Goswell Street and Goswell Road, on the West, and Brick Lane, York Street, and Macclesfield Street North, on the East, and extends from Old Street to the Northern boundary of the Parish. Its population at the last census, (1851) was 10,617.

2. The City Road District is bounded on the West by Brick Lane, York Street, and Macclesfield Street North, and on the South by Old Street; it extends to the Shoreditch boundary of the Parish. Population, 16,840.

3. The Whitecross Street District comprises the local divisions of Whitecross Street and Golden Lane Liberties. It extends from Old Street, Southwards to the City, and is bounded on the East by a line running between Whitecross Street, and Bunhill Row. Population, 13,657.

4. The Finsbury District forms the South East portion of the Parish, and comprises the East and West Finsbury Liberties. It is bounded on the North by Old Street, and is separated from the Whitecross Street District, between Bunhill Row and Whitecross Street. Population, 12,941.

Elevation of the Parish and its Districts.

The elevation of a locality is an important item in determining its sanitary position, and in this respect the Parish of Saint Luke is sufficiently favored. During the progress of the Cholera

epidemics that have visited our country ; it has been noticed, other circumstances being equal, that the lowest districts have suffered most. Whilst much of that portion of London situated on the south side of the Thames, is on a level with, or below the level of the river at high water, the mean elevation of our own parish is 52 feet above Trinity high water mark. Of the sub-districts, the Old Street District stands 60, the City Road District, 52, the Whitecross Street District, 52, and the Finsbury District, 43 feet above the high water level of the Thames.

Density of Population.

The area of Saint Luke's being 220 acres, and the population at the last census, 54,055, this gives, at that period, 246 human inhabitants to an acre of ground, or one person to every $19\frac{1}{2}$ square yards of surface. But these figures will convey a more practical expression of our density of population, if we make a comparison of our own with other localities. In all London there were at the same period (1851) 30 persons to an acre. Of the several parishes, St. Luke's stands third in the order of density. Thus, East London, (a portion of the City adjoining our Whitecross Street District,) has 290 persons to an acre; and the Strand, 256. Next comes Saint Luke's with its 246 inhabitants to an acre, and afterwards Holborn, with 238. In the parishes surrounding our own, the density of population is as follows.—

Whitechapel,	....	196	persons to an acre.
Clerkenwell,	....	170	„
Shoreditch,	....	169	„
Islington,	....	30	„
Hackney,	....	15	„

Three of our sub-districts show a pretty uniform rate of crowding, but in the fourth the density is immense, and nearly equals the highest return for any sub-district in London. In the

Old Street District, the census gave 204 persons to an acre; in the City Road District, 219; in the Finsbury district, 223; and in the Whitecross Street District, 414, or one inhabitant to about every $11\frac{1}{2}$ yards of surface! Deduct the space occupied as streets, the centres of courts, alleys, etc., and what will be the crowding, when the inhabitants are housed, and what must be the refuse, and what the contamination of the atmosphere, arising from such a dense congregation of living beings, in habitations as badly constructed for ventilation, as they are deficient of the necessary conveniences of life!!

The only two sub-districts in London, more densely populated than our Whitecross Street District, are Saint Andrew's, Eastern Holborn, which returned 423, and Berwick Street, Saint James' Westminster, which returned 432 persons to an acre.

Number of Houses.

According to the census of 1851, there were 6349 inhabited, and 247 uninhabited houses in the parish, which with the population at the same period gives 8.5 persons to an inhabited house. The average annual value of houses is £28.

Water Supply.

The water supply is entirely derived from the New River Company's service; and although, there are in many parts great complaints of its deficiency, yet, for domestic purposes certainly, this arises rather from an absence of proper receptacles for its collection and retention, than of any failure in the source. The Water supply of the parish, however, is a subject to which my attention has been for some time past specially directed. In compliance with the request of your Sanitary Committee, I have already completed my Analyses of several of its spring waters and of different specimens of the New River Company's supply, but as there are waters that still remain to be examined, I shall reserve my remarks on this subject for a future and special report.

Increase of Population.

The population of our Parish, like that of London in general, shows an increase at each census return, although in a much less extensive proportion. During the decennial period 1841—51, the population of all London, increased at the rate of 1.97 per cent. annually. In 1841, the population of Saint Luke was 49,829, and in 1851, 54,045, (26,178 males, 27,867, females), which gives an increase of 4216, during the ten years, or .846 per cent, annually. Whilst, therefore, between the years 1841,—51, the population of London increased at the rate of nearly two per cent, annually, that of Saint Luke's during the same period increased at the rate of less than one per cent.

Calculating from the increase, during the ten years preceding the census in 1851, we may say, in round numbers, that the inhabitants of our parish, at present, increase about 450 in number every year; and as there is no extension of building carried forward, this increase can only render our long since over-populated districts, more dense with human beings than they were before. Each year indeed adds to the necessity of more efficient drainage, water supply, and house ventilation. A district which at one time was provided with passable accommodation, for its inhabitants, is now totally inadequate for that purpose, because, instead of a family to each house, there is a family to each room.

Rate of Mortality compared with other Parishes.

With this brief review of the sanitary bearings of our parish, let me next direct your attention to its past and present rate of mortality, as compared with other districts of London.

During the seven years 1838—44, St Luke's stands eighth

on the list of metropolitan districts, arranged according to the highest annual percentage of mortality. Thus :—

	Annual Mortality per cent., of population from all causes, and at all ages. 1838—44.
West London, (a part of the City between Holborn and the river Thames) ..	3.02
Saint Saviour	2.92
Whitechapel	2.90
Saint George, East	2.89
Chelsea	2.87
Saint Olave	2.81
Rotherhithe	2.77
Saint Luke	2.76

The districts surrounding St. Luke's, with the exception of Whitechapel stand all below it in the same table of mortality. Thus :

East London, (bounding the south side of St. Luke)	2.59
Shoreditch	2.51
Clerkenwell	2.42
Islington	2.
Hackney	1.97
<i>All London</i>	<u>2.52</u>

The average mortality of females during the same period, is in every case under the average mortality of males. Taking all London, we find the average annual per-centage of mortality amongst males, for the period, to be 2.73; whilst that amongst females stands at 2.30. Examined comparatively, the parish of Saint Luke appears exceedingly uncongenial to its female population, being second only to Whitechapel, in its average amount of female mortality. Thus :—

	Annual Mortality per cent of FEMALES, during the seven years 1838—44.
Whitechapel	2.77
Saint Luke's	2.71

The Districts adjoining St. Luke's give

East and West London	2.58
Shoreditch	2.40
Clerkenwell	2.31
Islington	1.84
Hackney	1.73

In the above tables the Parish of Luke, although indeed standing bad enough in a sanitary point of view, yet it occupies even a rather better position, than in reality is its due; on account of our Workhouse being situated within the Shoreditch precincts and its mortality being added in the Registrar General's returns to the numbers of that parish, notwithstanding that they belong to our inhabitants. In the following statistics, however, for the year 1855, I am enabled to correct this error, and therefore to give a more accurate representation of the relative mortality of our inhabitants.

Mortality during 1855.

During the year 1855 there were 61,506 deaths in London. And, if the population of London has increased since the census of 1851, at the same rate at which it increased during the ten years that preceded it, viz:—1.97 per cent, annually, the number of inhabitants, at the commencement of 1855, may be computed at about 2,540,000. The 61,506 deaths amongst 2,540,000 London inhabitants, gives twenty-four deaths to 1000 living, or 2.40 per cent, of mortality for the year; or, again, one death to every forty-one persons living.

During the year 1855, there were 1286 deaths registered for the parish of Saint Luke and 168 for the Workhouse of Saint Luke, standing in Shoreditch parish. Add these figures, and they give 1454 deaths to be placed against our population, at the commencement of the year 1855, which, calculating that the increase has gone on since the census of 1851, in the same ratio as during the ten years that preceded it, may be estimated at about 55,960,

The 1454 deaths to 55,900 inhabitants, gives twenty-six deaths to 1000, or 2.60 per cent of mortality for the year, or in other words, one death to every thirty-eight persons living. 2.60, indeed, as compared with 2.40 per cent of deaths; or a privilege of 1—12th over the average mortality of London for the favored inhabitants of the parish of Saint Luke!

Again, if we compare our mortality for the year 1855 against that of the several divisions of London we find it to present an equally unsatisfactory disclosure.

The most healthy division of London embraces the western districts, which consist of Kensington, Chelsea, Saint George Hanover Square, Westminster, Saint Martin's-in-the-Fields, and Saint James'. In this division the mortality for the year 1855, was at the rate of 2.25 per cent.

In the eastern division, including Shoreditch, Bethnal Green, Whitechapel, Saint George'-in-the-East, Stepney and Poplar, the mortality for 1855 was greater than in any other division, and stood at the rate of 2.51 per cent.

In the central division of London to which the parish of Saint Luke belongs, and which also includes Saint Giles and Saint George, Strand, Holborn, Clerkenwell, East London, West London, and London City, the mortality for 1855 was at the rate of 2.44 per cent.

It is thus apparent that the mortality of the parish of Saint Luke during 1855, not only stands out prominently in excess of the average of the division of London to which it belongs, but that it actually exceeds the highest rate of any of the main divisions of London. The Eastern division giving a return of 2.51, and the parish of Saint Luke 2.60 per cent. of mortality.

Mortality from Cholera and Diarrhœa, 1849 and 1854.

In the Cholera epidemics of 1849, and 1854, the mortality of Saint Luke's from Cholera and Diarrhœa was in the following proportion:—

	1849—1853½-1854		
Mortality in Saint Luke's from Cholera } to every 10,000 inhabitants.....	34	..	10
Mortality in Saint Luke's from Diarrhœa } to every 10,000 inhabitants.....	18	..	29

During the last epidemic our four sub-districts suffered in the subjoined proportion to each other.

Deaths from Cholera and Diarrhœa to 10,000 persons living during the Cholera epidemic of 1853½-1854.

	Cholera.	Diarrhœa.	Cholera & Diarrhœa.
Old Street District	9	17	13
City Road District ...	8	22	15
Whitecross St. District	16	49	32.5
Finsbury District	10	27	18.5

I give these figures, because the most favorite resort of Cholera and Choleraic-diarrhœa, has been noticed in those localities, where the sanitary requirements are found to be the most defective. The last column of the table, which represents the proportion of deaths from Cholera and Diarrhœa, together, gives a pretty good general idea of what our other statistics show to be the relative healthiness of the several districts of the parish.

Mortality during Summer quarter, 1856.

With these precursory observations on the relative healthiness, or rather unhealthiness of our parish, as shown by the statistics of preceding years; let us next review the data, furnished by the

records of mortality and parochial sickness during the past three months, and subsequently give attention to the sanitary improvements that have been ordered and carried out.

During the thirteen weeks, ending September 27, 1856, there were 249 deaths in the parish of Saint Luke, and 39 in St. Luke's Workhouse; giving a total of 288; 155 of which occurred to males, 133 to females. During the corresponding period of last year, there were 311 deaths in the parish, and 36 in the Workhouse; total, 347. During a similar period of 1854, (cholera year), 409 in the parish and 50 in the Workhouse; total, 459. And during the same time, 1853, there were 295 in the parish, and 32 in the Workhouse; total, 327. So that, the mortality during the quarter just passed, is considerably under that for the corresponding quarters of the three preceding years,—an observation which coincides with the low rate of mortality, that has been noticed for London generally during the quarter last completed.

Mortality in the respective Districts of the Parish.

In Table 1 at the end of this Report, will be found a detailed statement of the mortality, for the several districts of our parish, during the summer quarter just completed. Of the 288 deaths, 44 of them, occurred in the Old Street District; 67 in the City Road District; 77 in the Whitecross Street District; 61 in the Finsbury District; and 39 in the Workhouse.

To give these figures their due significance, we must ascertain the proportion they bear to the number of inhabitants in each district. Taking the population as it was at the census of 1851, the rate of mortality during the preceding quarter, will have been,—in the

Old Street District	4.14	deaths, to 1000 living.
City Road District	3.97	„ „
Whitecross Street District	5.63	„ „
Finsbury District	4.71	„ „

Whilst therefore the rate of mortality in the City Road District, was under 4 per 1000; in the Whitecross Street District it was something more than $5\frac{1}{2}$ per 1000,—a fact which speaks for itself, as to the relative healthiness of these localities. The mortality returns for the four sub-districts, with the 39 deaths that occurred in the Workhouse, show a proportionate rate of 5.32 deaths to 1000 living, amongst our parishioners, during the months of July, August and September, 1856.

Mortality during June, 1856.

At Table 2, I have given a corresponding summary of the mortality during the month of June, 1856. For that period, there were sixteen deaths in the Old Street District; twenty-six in the City Road District; thirty in the Whitecross Street District; twenty in the Finsbury District; and eleven in the Workhouse; giving a total of 103. If these numbers be placed in comparison with the population, they give a mortality rate during the month of June, of 1.50 to 1000 inhabitants, in the Old Street District; 1.54 in the City Road District; 2.19 in the Whitecross Street District; and 1.54 in the Finsbury District. Here, again, it will be noticed, that the Whitecross Street District stands prominently forward with its high rate of mortality, and its consequent comparative unhealthiness.

Mortality from Fever.

The deaths from Fever during the quarter, in the several districts, were as follows:—Old Street District, 1; City Road District, 2; Whitecross Street District, 2; Finsbury District, 2. This statement however, if taken simply as it stands, would convey a very erroneous expression of the deaths from fever, amongst the inhabitants of our four sub-districts. Fever is a disease that holds its highest sway in the most crowded, the most inadequately drained, the most imperfectly ventilated,—in short, in the most unwholesome

localities; and yet, in the above returns, our Whitecross Street does not hold a worse position than our City Road, or Finsbury Districts. This arises from the practice of removing the greater part of the cases of fever, as soon as they occur, into the Workhouse, or sending them to an Hospital. So that, to give a more accurate idea in this respect, we must distribute the deaths in the Workhouse amongst the districts in which the cases originated. By Table 1, it will be seen that 12 deaths from fever took place in the Workhouse during the quarter. I have also a return of the deaths of 2 persons who were sent by the parish authorities to the Fever Hospital, when the wards of the Workhouse were too full with Fever to receive them. I have no doubt also that other cases have been taken to Saint Bartholomew's and other hospitals, but of these I have no record. Of the 12 deaths from Fever, registered in the Workhouse, and the 2 referred to, at the London Fever Hospital; 1 was from the Old Street District, 1 from the City Road District; 7 from the Whitecross Street District; and 2 from the Finsbury District. The remaining 3 deaths occurred to inmates of the Workhouse. One of these was engaged in cleansing the clothes of the fever patients received into the house, and thus caught the disease; another was a paraplegic patient, lying in the next bed to a fever patient, and the third was an old woman, who had been for several years an inmate of the workhouse. If, now, we add these numbers to the return belonging to each district; we have record of 2 deaths from fever, amongst the inhabitants of the Old Street District; 3 amongst those of the City Road District; 9 for the Whitecross Street District; 4 for the Finsbury District, and 3 amongst the inmates of the Workhouse.

Mortality from Scarlet Fever and Small Pox.

In the case of Scarlet Fever and Small Pox, the patients do not appear to be so generally removed from their residences, at the onset of the disease. There has been no death from Scarlet Fever or Small Pox in the Workhouse during the quarter, indeed only two

cases of Scarlet Fever were admitted during that time. One case of Small Pox occurred in the Workhouse and was sent to the Small Pox Hospital, but ultimately recovered. By reference to Table 1, we see that during the quarter, Scarlet Fever was not fatal to any one in the Old Street District; was fatal to 1 in the City Road District; to 5 in the Whitecross Street District; and to 2 in the Finsbury District. From Small Pox there is no return for either the Old Street or the City Road Districts; whilst 6 deaths took place in the Whitecross Street, and 2 in the Finsbury District.

Mortality amongst Infants.

Table 1 also shows the ages at which the deaths took place during the quarter, and it is interesting to notice the increasing percentage of the mortality to infants, as we proceed from our more healthy, towards our less favored districts. Those causes, arising from a defective sanitary condition, which encourage the extension of epidemic and contagious diseases, are especially prejudicial to infantile life. The atmosphere they breathe, and the conditions under which they are placed, are, but ill-suited to their tender frames. Combined with this, there is the feeble constitution, they have often inherited from their sickly parents, the imperfect quality of the maternal fluid, upon which they have to subsist; and, from the position of life in which they are born, a deficiency of that care and attention which their impoverished condition places them in more than ordinary need of. It is not surprising, therefore, to find that our Whitecross Street locality, yields the largest proportion of infantile mortality, as is shown by the following returns. In the Old Street District; of the 44 deaths, 26 occurred to infants under five years of age, which is at the rate of 59 per cent. In the City Road District, the 67 deaths with 41 under five years of age, gives a per centage of 61 to infants. In the Whitecross Street District the 77 deaths with 59 of them under five years of age, gives 76 per cent of the

mortality to infantile subjects. In the Finsbury District, 61 deaths with 41 under five years of age, gives the proportion of 67 per cent.

*Sickness attended by the Parochial Medical Officers
during Summer quarter 1856.*

Having thus far dilated upon the inferences to be derived from our mortality returns, let me next engage your attention upon the cases of sickness amongst the poor, which, have been attended by the Parochial Medical Officers, and which have been received into the workhouse. To render myself cognizant with the sickness prevailing in the parish, and with the localities in which it prevails the most, (in order that these may be submitted the first to sanitary improvement) I weekly inspect the medical officers' books, which have been kindly placed at my disposal by the Guardians of the Poor. The information with which I am thus supplied, forms valuable addition to the mortality returns.

At Table 3, will be found a detailed account of the sickness arising from causes of a local and atmospheric nature, which has from week to week come before the Poor Law Medical Officers. The Table does not express all the sickness attended by the several Medical Officers, but only that which is available to my purpose as the Sanitary Officer of your Parish. There are many diseases to which our frail bodies are subject, that cannot be attributed to causes connected with any particular locality, but depend rather on the habits and constitution of the individual. Such is the sickness that has been omitted from the list, as it would only encumber an already somewhat lengthy catalogue of diseases, and confuse by adding to the number of figures without being attended with any advantageous result.

At the top of the list of diseases stands Fever with the number of cases attended every week in each of the four sub-districts. I would strongly urge that this portion of the table be attentively

inspected, for the figures, it contains, disclose a sad tale respecting the sanitary condition of a great part of our parish. Fever, indeed, has been, for many months past, and is now raging to a frightful and even alarming extent in those densely populated localities of St. Luke's, on the City side of Old Street. And, I have no hesitation in asserting, that the extreme prevalence of this disease in this neighbourhood, is attributable to the inadequate arrangements that exist for the wholesome accommodation of the inhabitants. If we look at the aggregate of the 13 weekly returns of fever, we notice, that whilst the Old Street District gives only 9, and the City Road District 52; the Whitecross District gives 158 and the Finsbury District 87, making a total of 306 returns for the quarter. Again, for Diarrhoea; whilst we have 58 as the aggregate of the 13 weekly returns for the Old Street District, and 130 for the City Road District, we have 251 for the Whitecross District and 197 for the Finsbury District. But, if the table itself be examined—and it conveys some instructive information—it will be noticed, that those diseases *especially* dependent on local causes, greatly preponderate in that part of the parish situated on the South or City side of Old Street, as compared with that situated on its North.

Cases of Fever admitted into the Workhouse.

A virulent and fatal disease such as Fever, prevailing amongst the poor to the extent I have pointed out, must necessarily greatly intrench upon the funds of the parish. When they fall ill and are unable to support themselves, they seek admission into the Workhouse; and if they die, a wife and family may be thrown into the hands of the Parochial authorities to maintain. During the quarter, I find that no less a number, than 82 cases of fever were admitted into the Workhouse; 25 of which were sent to the Fever hospital, on account, I presume, of the over-crowded state of the sick-wards with so infectious a disease. Of the 82 cases received into the Workhouse, 3 were from the Old Street District, 7 from the City Road

District (the whole 7 from one house in Lizard Street), 55 from the Whitecross District, 15 from the Finsbury District, and the remaining 2 were casualties amongst non-parishioners admitted from their destitute condition.

Besides these cases of fever I have a return of 2 cases of measles, 2 of scarlatina, 2 of diarrhoea, and 1 of consumption received into the house during the quarter.

Conveyance of Fever cases in Street Cabs.

As so many cases of infectious disease, especially of typhus fever, are thus transferred from different parts of the parish to the Workhouse; I would bring it before the Vestry, as a serious and urgent question for them to decide, whether, the safety of these patients, and of the public in general, does not demand that some specially adapted litter* or vehicle, should be provided for this purpose by the parish. Nothing can be more pernicious—nothing can be more baneful or dangerous to society at large, than, that street cabs should be employed for the conveyance of sick persons afflicted with infectious disease. Who knows, when he hires a cab for the use of himself or his family, that it has not immediately before been employed to convey a case of small pox, or of typhus, or of scarlet fever, or of measles, to some metropolitan hospital or parochial infirmary. And, who, did he know this, would not shudder at the idea, or would be bold and imprudent enough to endanger his own life, or the lives of others, by an exposure to the contamination it has received. Yet, such things are to our knowledge constantly taking place, and probably many a case of contagious disease has spread itself to others in this way.

* There is a small litter at the Workhouse which is frequently sent out to bring sick persons in; but cases are being constantly conveyed there in cabs, and the patients are always forwarded in cabs from the Workhouse to the Fever Hospital.

A patient, also, laid prostrate with so severe a disease as Fever, cannot be removed from the recumbent posture without running imminent danger of a sudden failure of the heart's action; and ought, therefore, on no account to be placed in an upright position in a cab. It is with this consideration in view, that a vehicle adapted for the conveyance of the sick should be constructed. And, it is with such a vehicle, or with two such vehicles,—one for contagious the other for non-contagious diseases—that every parish should be provided. These alone should be used for transferring the sick poor from their dwellings to the parochial Workhouse or infirmary, or from the infirmary to the hospital.

Record of Contagious and Epidemic Disease.

Soon after commencing the duties of Officer of Health, I thought it especially desirable that a system should be adopted, which would show, against every locality of the parish, the number of cases that came before me, of sickness and death arising from contagious and epidemic diseases. To carry out this plan, I have a book or ledger, the pages of which are given to the several streets, lanes, alleys, courts, etc. of the parish, which, being arranged in alphabetical order can be at all times turned to with facility. In this book, I, from week to week, enter under the respective localities in which they occur, all the cases of death and sickness arising from fever, small pox, scarlatina, and measles which come before me, in the Poor Law Medical Officer's books, the Workhouse returns of sickness admitted, and the register of deaths for the parish. *All the deaths must* come before me under the system in practice, but I am fully aware that a large amount of sickness must necessarily escape my notice, as, where the patients are attended independently of the parish. The return I get, however, from the Parish Medical Officer is happily that which I especially require, because it embraces those cases which occur in the poorest and dirtiest localities. If, therefore, my record does not express the whole of the sickness that has occurred in a place, yet where it

indicates an extensive prevalence of disease, it forms a sufficient ground for the suggestion of measures of sanitary improvement. Immediately, indeed, I find sickness prevailing to any extent in a locality, I submit it to inspection and thereupon suggest the requirements that are needed to place it in a wholesome and habitable condition.

I will lay before you a few extracts from this record. Many, I doubt not, will be astonished, as they read the following statements and see the alarming extent to which disease prevails in many parts of the parish.

COWES PLACE, CHEQUER ALLEY.

A small court consisting of six 3-roomed houses, five of which are constructed of wood with the basement situated below the level of the pavement. Amongst the inhabitants of these six small houses, I have the following returns of sickness and mortality during the months of July, August, and September last.

DEATHS.

July 26th. at No. 5, a female, aged 3, of small pox.

Aug. 23rd, from No. 3, a male, aged 44, of typhus (death took place in the Workhouse.)

Sep. 20th, from No. 5, a female, aged 46, of typhus (death took place in the Workhouse.)

„ from No. 5, a female, aged 50, of typhus (death took place at the Fever Hospital.)

„ from No. 5, a female, aged 5, of typhus (death took place at the Fever Hospital.)

SICKNESS DURING THE THREE MONTHS.

At No. 1.—7 cases of fever, 1 of which was sent to the Workhouse.

At No. 2.—1 case of fever.

At No. 3.—12 cases of fever, 3 of which were sent to the Workhouse.

„ 2 cases of scarlatina which were sent to the Workhouse.

At No. 4.—1 case of fever which was sent to the Workhouse.

At No. 5.—1 case of small pox.

„ 8 cases of fever, 6 of which were sent to the Workhouse.

KING COURT, BLUE ANCHOR ALLEY.

At No. 2, there occurred 8 cases of fever during the month of September, 4 of which were sent to the Workhouse.

The fever was brought into this house by a female who had been nursing one of the inhabitants of Cowes Place. After falling ill herself, it rapidly spread to the other inmates, but happily has not extended to the inhabitants of the neighbouring houses.

EDMUNDS PLACE, ARTHUR STREET.

An exceedingly narrow and confined court, consisting of twelve 2-roomed houses.

During the months of June and July, there occurred 2 deaths from small pox, and 1 from fever, amongst the inhabitants.

I have, besides, returned as sickness, 1 case of small pox, and 12 cases of fever, 9 of which latter were sent to the Workhouse.

At the time of this outbreak the place was submitted to a process of purification as far as was practicable. Some of the inhabitants were frightened away, and I have not had a single return of fever or of any other contagious disease since the 9th of August last.

WARWICK PLACE, WHITECROSS STREET.

During the months of June and July, there were 2 deaths from small pox, and 1 from fever. There occurred besides 1 case of scarlatina, and 6 cases of fever.

This was formerly one of the worst places in the parish, with regard to its defective accommodation for the inhabitants. It has been submitted to a thorough sanitary improvement, and I have not received a single return of fever, or of any other contagious disease during the months of August and September.

GLO'STER COURT, WHITECROSS STREET.

During July, August, and September, there were 13 cases of fever, and 2 of measles, with 1 death from fever.

BLUE ANCHOR ALLEY, BUNHILL ROW.

During July, August, and September, I have a record of 1 death from fever, and 1 from diarrhoea; with 18 cases of fever, and 1 of small pox, returned as sickness.

I might continue multiplying these examples with many more extracts of a closely analogous nature; but the ones, I have given, will suffice to show you, the extent—the alarming extent, to which the contagious diseases prevail in many parts of the parish. To effect any permanent good will require a considerable period of time. But the task has been placed in our hands to accomplish. Powers have been entrusted to our charge, for carrying out a sanitary improvement of our parish; and the government and the people will hold us responsible for doing so. The Act of Parliament under which we are organized is essentially an act for improving the sanitary condition of the metropolis. All I can do, as your Medical or Sanitary adviser, is to discover and point out to you the unwholesome localities of the parish, and suggest those measures, which are required for their permanent improvement. This done, and I

look to you for an earnest co-operation in enforcing the execution of the improvements that are deemed necessary; so that, by extending and improving the drainage: by ameliorating the habitations of the poor for ventilation: by causing the erection of water receptacles that the people may be more adequately supplied with this necessary commodity: by preventing the over crowding of houses; and by rendering the accommodation more complete for getting rid of the necessary refuse of living beings; the atmosphere may be so depurated of its present impurities, as to abate the sickness that now so extensively prevails, and diminish the rate of mortality to the standard of healthy localities.

Measure to prevent spreading of Fever.

Before concluding this report with an enumeration of the sanitary operations that have been carried out; there is one point upon which I would wish for a few moments yet to detain you. As the preceding statements have shown you, Typhus has been raging, for some time past, to a most serious extent amongst the inhabitants of certain localities of the parish. Now, we know of nothing more certain in our profession, than, that if a number of fever cases be congregated together, the disease is sure to extend to those around. In the wards of our hospitals, experience has taught us, that we may place a few fever patients, dispersed amongst the others, without the production of any untoward result. There is a limit, however, to this number, which depends on the size of the ward, and its ventilating capacity; and if this limit be exceeded, the disease is sure to extend to the other patients, and likewise to the attendants. In our own parish, I have several times noticed an out-break of fever in a house, and on account of its confined situation, in a densely populated neighbourhood, have been able to predict the spreading of the disease that has subsequently taken place. Although we have immediately attended to the drainage, the water supply and other accommodation, and have subjected the premises

to a process of cleansing and lime-washing; yet, the disease has run its course and laid prostrate many of our unfortunate poorer inhabitants. Nothing, I feel convinced, can prove of avail in these cases, in preventing the extension of this contagious disease; save, removing the inhabitants, and closing the premises, until their complete purification shall have been effected. An energetic step, of this kind, at the onset of an out-break, will, I am persuaded, obviate the spreading of the complaint; and thus, not only prevent much suffering and distress amongst the poor, but likewise economise the funds of the parish. Under the "Nuisances Removal and Diseases prevention Act" the closure of a house can be effected, if it can be shown to be unfit for human habitation, and in any future case that may require it, I shall hope to receive the support of the Vestrymen in carrying out so desirable an operation.

Sanitary operations carried out.

Since my tenure of office 326 dwellings of the poor have received a detailed inspection. The result of these inspections, has suggested the requirement of various sanitary improvements, which, being sanctioned by your Sanitary Committee were ordered to be enforced. The following are the improvements that have been enforced and are already completed, but there are numerous others in progress of completion.

179 houses cleansed and lime-washed, 83 of which were in addition repaired.

9 back yards paved, or pavement amended, for efficient surface drainage.

14 dust bins erected.

5 capacious cisterns erected.

6 water-butts provided.

1 water-butt repaired.

Water supply laid on to 3 houses,

10 covers to water-butts provided.

16 cesspools emptied and destroyed.

6 privies converted into panned and trapped closets.

14 closets with pan and trap, and water supply, constructed.

Drains of 2 closets opened and cleared.

1 public gully trapped.

The "Metropolitan Market Act," and the "Metropolis Local Management Act" providing—that slaughter-houses in future should be licensed, and that the licenses, should not be granted without previous application to the vestry; the regulation of the slaughter-houses now falls within the scope of our sanitary operations. For the wholesome and cleanly keeping of these premises, a notice was framed with a code of sanitary regulations appended, which having received your approval, was printed and circulated to all the Butchers and Slaughter-house keepers in the parish. Thirty-seven applications for licences were received. The premises of each applicant were visited and a detailed report sent in, stating the requirements that were necessary to render them conformable to the sanitary regulations you had adopted. One opposition was raised which resulted in the grant of the license being refused, by the Magistrates' Court at the Clerkenwell Sessions.

I beg to remain,

GENTLEMEN,

Yours most respectfully,

F. W. PAVY.

Finsbury Square,
October 1856.

TABLE II.

MORTALITY OF THE PARISH OF SAINT LUKE, MIDDLESEX, DURING THE FOUR WEEKS
ENDING SATURDAY, JUNE 28TH, 1856.

	Sub-district of Old Street, Population 10,617.	Sub-district of City Road, Population 16,840.	Sub-district of Whitecross St. Population 13,657	Sub-district of Finsbury, Population 12,941.	St. Luke's Workhouse in Hoxton New Town.	Entire Parish of St. Luke with Workhouse Population 54,055.
Mortality of Males.....	7	9	15	12	6	49
Mortality of Females	9	17	15	8	5	54
Total—Males and Females	16	26	30	20	11	103
At what ages deaths took place						
Under 5 years	6	9	21	8	1	45
From 5 to 10	1	3	..	..	..	4
„ 10 to 15 .....	..	..	1	1	..	2
„ 15 to 20 .....	..	..	..	..	..	..
„ 20 to 30	1	2	..	2	..	5
„ 30 to 40	3	3	1	..	1	8
„ 40 to 50	3	2	4	..	4	13
„ 50 to 60	1	2	1	4	2	10
„ 60 to 70	1	4	2	2	3	12
„ 70 and upwards .....	..	1	..	3	..	4
	16	26	30	20	11	103
From what causes deaths took place.						
Fever	1	..	..	3	3	7
Scarlet Fever and Cynanche	}	2	1	..	..	3
Maligna						
Small Pox .....	..	..	5	..	..	5
Measles Hooping Cough and and Croup	}	4	5	2	..	13
Erysipelas and Puerperal Fever						
Dysentery and Acute Diar- rhœa (of Infants excepted)	..	..	..	1	..	1
Diarrhœa Bronchitis and Pneumonia (of infants under 3 years of age) ..	1	..	3	2	..	6
Hydrocephalus and Convul- sions of Infancy	2	1	4	2	..	9
Consumption & other Stru- mous diseases	4	5	4	1	4	18
Violence, Privation, Poison, and Premature Births ..	1	2	1	..	1	5
Various other diseases chiefly Chronic	5	12	7	9	3	36
	16	26	30	20	11	103

NEW YORK CITY BOARD OF HEALTH

Name of Person or Family	Address of Person or Family	Date of Birth
100	10	
101	10	
102	10	
103	10	
104	10	
105	10	
106	10	
107	10	
108	10	
109	10	
110	10	
111	10	
112	10	
113	10	
114	10	
115	10	
116	10	
117	10	
118	10	
119	10	
120	10	
121	10	
122	10	
123	10	
124	10	
125	10	
126	10	
127	10	
128	10	
129	10	
130	10	
131	10	
132	10	
133	10	
134	10	
135	10	
136	10	
137	10	
138	10	
139	10	
140	10	
141	10	
142	10	
143	10	
144	10	
145	10	
146	10	
147	10	
148	10	
149	10	
150	10	
151	10	
152	10	
153	10	
154	10	
155	10	
156	10	
157	10	
158	10	
159	10	
160	10	
161	10	
162	10	
163	10	
164	10	
165	10	
166	10	
167	10	
168	10	
169	10	
170	10	
171	10	
172	10	
173	10	
174	10	
175	10	
176	10	
177	10	
178	10	
179	10	
180	10	
181	10	
182	10	
183	10	
184	10	
185	10	
186	10	
187	10	
188	10	
189	10	
190	10	
191	10	
192	10	
193	10	
194	10	
195	10	
196	10	
197	10	
198	10	
199	10	
200	10	

TA
from Lo
ring the

..	..	
..	..	
..	1	
1	1	
..	..	
..	..	
..	..	

LE 3.

l and Atmos

3 Weeks end

..
1	1	..	1
1	..	..	1
..
..	..	..	1
..
..



