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ADMINISTRATIVE COUNTY OF ESSEX.

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1917.

BY

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REPORT OF THE

MEDICAL OFFICER OF HEALTH

OR THE ADMINISTRATIVE COUNTY OF ESSEX

FOR THE YEAR 1917.

The mortality statistics for this report are based upon the returns received from the Registrar-General, the remaining statistics have been supplied by the various Medical Officers of Health.

In consequence of the war the Local Government Board has only required the minimum of information, and as the result the reports furnished are chiefly in writing, and are exceedingly brief. Usually they merely record that nothing of importance has occurred during the year.

So far as I am aware, no change has been made either in the division of the county into sanitary areas, or in the staff of Medical Officers of Health.

Population. For statistical purposes two different estimates are used. For calculating the death-rates, the military portion of the population is excluded, whereas in estimating the birth-rate, the military portion is included. The results are not very trustworthy, since discharged soldiers who afterwards die from Tuberculosis or other disease are recorded in the civilian deaths. The Registrar-General, who has estimated the populations for 1917, takes it to be about 24,000 less than in 1916 for the purpose of the birth-rate, and about 40,000 less for calculating the death-rate (*vide* Table I.). I do not possess the information necessary to enable me to criticise these figures, but they certainly will lead to an over-estimate of the death-rate from Tuberculosis, and possibly from other diseases for the reasons above given.

Birth-Rate. The number of births registered during the year was 14,290, or 93 less than in 1916, corresponding to a fall of 3·5 per 1,000 in the birth-rate. As the latter is now only 16·1, it is approaching perilously near the death-rate, and the natural increment in population is becoming very small. Still the natural increase during the year was 4,249. The birth-rate was a little lower in the rural districts than in the urban, and the average was 1·7 per 1,000 below that for England and Wales.

TABLE I.

VITAL STATISTICS OF WHOLE ADMINISTRATIVE COUNTY DURING 1917 AND PREVIOUS 5 YEARS.

Year.	Population estimated to middle of each Year.	Nett Births.		Nett Deaths belonging to the County.			
				Under 1 year of age.		At all ages.	
		Number.	Rate.	Number.	Rate per 1,000 Nett Births.	Number.	Rate.
1912	1,026,340	23,562	21·7	1,660	70	11,384	10·5
1913	1,109,978	24,236	21·8	1,422	72	12,006	10·8
1914	1,043,446	22,141	21·2	1,680	76	11,503	11·0
1915	867,394	17,602	20·3	1,515	86	11,358	13·1
1916	836,507 for death-rate 910,136 for birth-rate	17,883	19·6	1,195	67	10,079	12·05
1917	795,510 for death-rate 885,854 for birth-rate	14,290	16·1	1,116	78	10,041	12·6

TABLE II.

ENGLAND AND WALES COMPARED WITH THE ADMINISTRATIVE COUNTY OF ESSEX.

	Birth-rates per 1,000 population.	Death-rates per 1,000 population.	Deaths of Infants per 1,000 births.
England and Wales	17·8	14·4	97
Urban Districts of Essex	16·3	12·2	80
Rural ,, ,, ...	15·6	13·5	74
Administrative County	16·1	12·6	78

TABLE III.

DEATHS FROM PRINCIPAL INFECTIOUS DISEASES PER 1,000 POPULATION.

	Enteric Fever.	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diph-theria.	Total
England and Wales ...	·03	·00	·30	·02	·13	·13	·61
Urban Districts of Essex ...	·05	·00	·35	·01	·12	·14	·67
Rural ,, ,, ...	·08	·00	·12	·00	·13	·05	·38
Administrative County ...	·06	·00	·30	·01	·12	·12	·61

Infantile Mortality. The number of deaths of children under 1 year of age as 1,116, being 75 less than in 1916, but as these deaths were associated with a much naller number of births, the infantile mortality was 78 per 1,000 births compared ith 67 in 1916. In England and Wales the rate was 97, and the County rate is, usual, well under the average for the whole country.

Death-Rates. The total deaths registered was 10,041, or 38 less than in 1916, t with the decreased estimated population, the rate is 12·6 for 1917 as against 12·05 r the previous year. There can be very little doubt that the actual death-rate is out the same as last year, and less than in 1915. It is about two per 1,000 more an in the pre-war era, but even then I expressed a doubt about such a low figure ing maintained. The death-rate for England and Wales was 14·4, which is 1·8 over at for the County.

The death-rate from infectious diseases was exactly the average for the whole untry, ·61 per 1,000 population. It is significant, however, that the death-rate om Typhoid (Enteric) Fever is about double the average. I attribute this chiefly the epidemic of Typhoid Fever which occurred at Brentwood Asylum; several ersons infected there died in other parts of the County.

The deaths from Tuberculosis numbered 888, being 129 more than in 1916, and 07 more than in 1915. This is a marked increase, and is probably due to the umber of men who developed the disease whilst in the Army. From the number discharged soldiers now being dealt with, it is very likely that there will be a rther increase. Many of the men are in an advanced condition when discharged] nd obviously have for some time been capable of infecting their comrades in the enches and in crowded billets.

Taking the statistics as a whole, they appear to be remarkably favourable nsidering the anxiety and deprivations which have been suffered.

Studying the detailed statistics for the various districts, Tuberculosis of the ungs is the only disease the increase in which can be directly attributed to war nditions. There is no increase in the number of deaths from suicide, which in itself as a great significance.

The death-rates in the following districts were unusually high (Table IV.) :—

Maldon Borough	19·4
Belchamp Rural	17·1
Ongar Rural...	16·9
Bumpstead Rural	16·8
Dunmow Rural	16·6
Brentwood	16·6
Saffron Walden Borough	16·2
Barking	16·0

The infantile mortality was high in the Dunmow and Orsett Rural districts, in the following Urban districts it exceeded 100 (*vide* Table IV.) :—

Barking, Brentwood, Buckhurst Hill, Burnham, Chelmsford, Chingf Tilbury and Walton.

It is well known that the mortality amongst illegitimate children greatly exc that amongst the legitimate, but reference to the last column of Table IV. shows this does not entirely account for the excessive infantile mortality in the dist named, but it must have some effect.

The percentage of illegitimate births is slightly higher in the Rural areas the Urban, but the variations in the constituent districts are very wide. The nu of illegitimate births in the following districts greatly exceeds the average :—

URBAN. Braintree, Brentwood, Brightlingsea, Buckhurst Hill, Burnl Clacton, Colchester, Maldon.

RURAL. Belchamp, Lexden and Winstree, Stansted, Tendring.

Whilst the average proportion of illegitimate to legitimate births is 1 in 1 one of the above-mentioned areas it was actually 1 in 4 ! But this is due t Registrar-General having overlooked the fact that there is a Lying-in-Home i District and that the births belong to London.

The highest and lowest birth-rates were recorded in the following districts :-

Highest.			*Lowest.*		
Harwich...	...	24·7	Belchamp R.	...	10·0
Tilbury ...	...	22·1	Wanstead U.	..	11·55
Barking ...	...	21·0	Frinton U.	...	12·0
Shoebury	...	19·7	Saffron Walden U.	...	12·5
Wivenhoe	...	19·0	Halstead U.	...	13·0
Orsett R.	...	19·0	Braintree R.	...	13·2

In Frinton U. and Billericay R. the death-rates and birth-rates are equal, b no less than 10 districts, 8 of which are rural, the death-rates exceed the birth-rat

Urban.		Death-rate.	Birth-rate.	Rural.		Death-rate.	Birth-rate
Halstead	...	14·4	13·0	Belchamp	...	17·1	10·
Saffron Walden	...	16·2	12·5	Braintree	...	14·5	13·
				Bumpstead	...	16·8	14·
				Dunmow	...	16·6	14·
				Halstead	...	16·1	13·
				Ongar ...	...	16·9	16·
				Saffron Walden	...	14·7	14·
				Stansted	...	14·9	14·

TABLE IV.

INISTRATIVE COUNTY OF ESSEX. POPULATIONS, DEATH-RATES, BIRTH-RATES, ETC.

URBAN ISTRICTS.	Population. Census, 1911.	Population, 1917.		Nett Death-rate.	Pulmonary Tuberculosis Death-rate.	Infantile Mortality.	Birth-rate.	Per cent. of Illegitimate Births.
		For Death-rate.	For Birth-rate.					
ING	31,294	32,394	36,110	16·0	2·3	117	21·0	3·3
NTREE	6,168	6,883	7,673	10·6	·9	61	14·8	12·3
TWOOD	6,923	5,233	5,833	16·6	1·0	118	17·5	9·8
TTLINGSEA ...	4,404	4,618	4,143	14·5	·25	71	15·1	13·0
HURST HILL ...	4,887	4,326	4,822	10·8	·5	105	16·0	26·0
HAM	3,190	2,758	3,074	14·8	·4	130	15·0	13·0
TON	9,777	7,648	8,525	12·8	·9	52	13·4	14·
MSFORD ...	18,008	19,578	21,824	12·6	·9	108	17·5	8·7
GFORD	8,186	8,517	9,494	11·1	·6	102	15·6	6·1
HESTER	43,452	36,911	41,235	14·2	1·0	94	17·0	10·7
NG	4,253	3,783	4,217	12·2	·0	49	14·5	4·9
TON	1,510	1,487	1,658	12·0	·0	100	12·0	0·0
S	16,003	15,130	16,866	11·9	1·6	82	18·0	6·2
TEAD	6,265	5,422	6,044	14·4	1·8	51	13·0	5·1
VICH	13,623	10,990	12,251	11·2	·7	62	24·7	3·3
D	78,188	75,130	83,749	10·5	1·05	70	14·0	4·5
ON	124,736	112,452	125.352	12·6	1·2	86	16·0	4·3
HTON	5,433	5,233	5,833	9·0	1·4	48	14·5	6·0
ON	6,253	5,238	5,839	19·4	·9	88	13·7	13·8
ORD	16,972	17,167	19,136	12·0	·65	92	16·4	7·2
SON WALDEN ...	6,311	4,813	5,365	16·2	1·2	45	12·5	4·5
BURYNESS ...	5,006	4,414	4,920	13·4	1·4	21	19·7	5·2
URY	6,429	6,368	7,099	13·6	·8	102	22·1	5·1
HAM HOLY CROSS	6,796	6,863	7,650	10·8	1·0	70	16·9	4·8
HAMSTOW ...	124,597	119,307	132,994	11·2	1·3	69	16·7	3·0
STEAD	13,831	14,424	16,079	8·2	·6	48	11·55	·5
AM	3,480	3,157	3,519	13·6	·0	77	18·4	7·7
DFORD	18,497	18,208	20,297	12·1	1·05	38	14·4	3·7
TON-ON-THE-NAZE	2,173	1,959	2,184	12·7	·0	158	17·3	8·0
NHOE	2,376	2,259	2,518	11·05	·0	21	19·0	8·3
TOTAL ...	599,021	562,670	626,303	12·2	1·1	80	16·3	5·3
RURAL DISTRICTS.								
HAMP	4,676	3,687	4,110	17·1	2·2	71	19·2	9·5
ERICAY	21,557	18,992	21,171	15·1	1·2	69	15·1	6·3
NTREE	18,463	17,272	19 253	14·5	1·1	79	13·2	8·7
PSTEAD	2,594	2,145	2,391	16·8	·5	86	14·6	·0
MSFORD ...	22,792	21,029	23,441	14·2	1·1	76	16·4	8·1
MOW	16,087	13,318	14,846	16·6	·8	100	14·2	4·7
NG	13,959	12,571	14,013	12·8	1·4	55	14·2	6·0
STEAD	10,322	8,681	9,677	16·1	1·0	45	13·7	6·8
DEN & WINSTREE...	19,686	16,434	18,319	13·8	·7	74	14·0	9·0
DON	16,164	14,017	15,625	14·3	1·0	58	16·6	6·0
AR	10,647	8,615	9,603	16·9	·6	81	16·7	6·0
TT	18,443	19,034	21,218	12·4	1·2	92	19·0	6·0
IFORD	18,399	17,165	19,134	13·9	·9	69	15·0	6·6
FORD	25,361	25,219	28,112	10·8	1·3	70	17·2	5·8
RON WALDEN ...	10,812	9,378	10.454	14·7	1·2	73	14·3	2·7
STED	7,066	6,118	6,820	14·9	·8	94	14·0	11·4
DRING	21,960	19,165	21,364	12·7	·8	67	17·5	9·6
TOTAL... ...	258,998	232,840	259,551	13·5	1·0	74	15·6	6·9
Total for whole County ...	858,019	795,510	885,854	12·6	1·1	78	16·1	5·8

It is obvious that every possible effort must be made to bring men back to the land at the conclusion of the war, both in the interest of Agriculture, and of the public generally. This is one of the greatest problems requiring the attention of County Councils and of the State. Failing this the rural population will continuously decrease, and the effect be disastrous to the country.

TUBERCULOSIS.

The appended Tables will, if studied, give all the information necessary with reference to the progress of the campaign against tubercular diseases. A few of the more important points, however, may be briefly noted.

At the commencement of 1917, there were 892 patients receiving actual treatment at our Dispensary.

At the end of the year there were 1,147, an increase of over 28 per cent.

Of those on the books at the end of the year, 536 or 47 per cent. were insured persons.

Besides the above, our Tuberculosis Officers had under observation 1,387 patients of whom 471, or 34 per cent., were insured persons.

During the year 258 insured persons and 143 uninsured persons were treated in our own Sanatoria, and 11 uninsured children were sent to special institutions outside the County.

The Tuberculosis Officers examined 1,532 patients (911 at the request of their Medical Advisers) and found 721 definitely suffering from Tuberculosis, and 300 more were doubtful, and are therefore kept under observation.

The Tuberculosis Officers furnished 6,013 reports on cases, of which 3,395 were dealt with by the Insurance Committee, advised by Dr. Platts, and 2,618 by the County Council, advised by the County Medical Officer of Health.

At the end of the year 56 shelters were being used by patients.

The visits made by patients to the Dispensaries were 21,924 against 19,140 for the previous year.

The beds at Sanatoria controlled by the County Council numbered 114, and these 73 were being used for insured persons; 25 beds (20 in the County and outside) are available for children. The provision of an increased number of beds for children is the present most urgent need. Usually the waiting list of children comprises 30 names, whereas for adults (uninsured) there is practically no waiting list of uninsured persons.

The subject of "care" and "after-care" of Consumptives received a great deal of attention during the year, but little can be done at present (as no funds are

ailable) beyond what is being done by our Nurses who report, through the uberculosis Officer, to the local committees. Under the new Nurse-midwife scheme will be possible to do a little more in this direction.

I should like to place on record my great appreciation of the services rendered the respective Tuberculosis Officers, and especially for the great and kindly interest aid to the well being of their patients. Many such patients have secured more uitable occupations through their influence.

Summary of Reports of Tuberculosis Officers for the Year ending December 31st, 1917.

TABLE V.

Patients attending Dispensaries for Treatment.

	Walthamstow.	Leyton.	Ilford.	Barking.	Romford.	Epping and Waltham.	Grays.	Rochford Dist.	Chelmsford.	Colchester.	Maldon, Clacton & Harwich.	Braintree Dst.	Totals.
No. of Patients on Register, January 1st, 1917.													
(a) Insured	91	59	44	31	19	9	25	5	31	20	16	18	368
(b) Uninsured—Adults ..	44	32	16	13	17	1	36	3	17	7	3	10	199
,, Children ..	74	39	21	58	47	5	43	—	7	17	4	10	325
Total	209	130	81	102	83	15	104	8	55	44	23	38	892
No. of Patients added to Register during the year—													
(a) Insured	127	100	40	30	37	5	32	8	20	26	23	42	490
(b) Uninsured—Adults ..	24	37	20	9	19	4	10	2	1	11	6	12	156
,, Children ..	50	43	15	31	29	3	23	1	3	4	1	18	220
Total	201	180	75	70	85	12	65	11	24	41	30	72	866
No. of Patients removed from Register during the year—													
(a) Insured	78	58	30	19	19	6	27	9	9	20	13	34	322
(b) Uninsured—Adults ..	18	20	16	7	10	—	17	3	3	5	1	11	111
,, Children ..	36	21	16	36	23	—	22	1	—	4	2	17	178
Total	132	99	62	62	52	6	66	13	12	29	16	62	611
No. of Patients on Register, December 31st, 1917.													
(a) Insured	140	101	54	42	37	8	30	4	42	26	26	26	536
(b) Uninsured—Adults ..	50	49	20	15	26	5	29	2	15	13	8	11	243
,, Children ..	88	61	20	53	53	8	44	—	10	17	3	11	368
Total	278	211	94	110	116	21	103	6	67	56	37	48	1147
No. of Patients suffering from Tuberculosis of Lungs, Dec. 31, 1917	205	186	80	95	68	14	68	6	64	52	33	38	909
Other Forms of Tuberculosis .	73	25	14	15	48	7	35	—	3	4	4	10	238

TABLE VI.

Patients attending Dispensary for Observation, and No of Domiciliary Patients.

	Walthamstow.	Leyton.	Ilford.	Barking.	Romford.	Epping and Waltham.	Grays.	Rochford Dst.	Chelmsford.	Colchester, Maldon and Harwich.	Braintree Dst.	T...
Observation following Treatment—												
6 No. on Register, December 31st, 1917.												
(*a*) Insured	77	42	21	13	34	27	79	13	13	22	2	
(*b*) Uninsured—Adults	10	13	12	3	26	2	30	3	9	4	4	
Children ..	50	25	23	30	56	3	50	1	10	13	—	
Total	137	80	56	46	116	32	159	17	32	39	6	
7 Persons under observation, doubtful cases	164	111	66	84	10	—	15	1	7	6	2	
Domiciliary—												
8 No. on Register, December 31st, 1917.												
(*a*) Insured	16	16	14	6	11	5	13	12	10	22	3	
(*b*) Uninsured	9	9	2	2	22	5	6	5	7	6	—	
Total	25	25	16	8	33	10	19	17	17	28	3	
Total under Treatment & Observation, including Domiciliary	604	427	232	248	275	63	296	41	123	166	59	2

TABLE VII.

Shewing cause of Treatment ceasing at Dispensaries and t number of Patients sent to Institutions for Treatment

Dispensary.	Insured.	Uninsured.	Total.	Why active Treatment at Dispensary ceased.						Gone to Sanatorium Hospital.			
				Working Capacity restored.	Transferred to Domiciliary.	Transferred to another Dispensary.	Left District.	Died.	Other Causes.	Provided by C.C.		Othe Institut	
										I.	C.C.	I.	
Walthamstow ..	78	54	132	72	24	—	13	23	—	41	22		
Leyton	58	41	99	27	23	8	18	23	—	32	19		
Ilford	30	32	62	22	16	—	9	11	4	31	15		
Barking	20	42	62	36	11	1	5	8	1	19	18		
Romford District ..	25	33	58	30	12	5	4	4	3	28	11		
Grays	27	39	66	43	4	5	6	6	2	17	9		
Shoeburyness U. and Rochford R. only ..	14	3	17	6	4	—	4	3	—	2	1		
Chelmsford ..	9	3	12	2	1	2	3	4	—	32	17		
Colchester District ..	34	11	45	18	18	1	1	5	2	33	11		
Braintree District ..	33	29	62	21	35	3	2	1	—	23	20		
Totals	328	287	615	277	148	25	65	88	12	258	143		

TABLE VIII.

Patients Discharged from Sanatoria.

RESULTS OF TREATMENT.

Dispensary Area.	Practically cured.	Much improved.	Improved.	Stationary	Worse.	Total.
Walthamstow	—	16	43	7	6	72
Leyton	—	14	22	8	2	46
Ilford	—	14	28	2	6	50
Barking	1	3	28	3	—	35
Romford	—	13	15	—	3	31
Grays	—	9	11	2	2	24
Rochford	—	1	5	—	—	6
Chelmsford	1	12	26	3	1	43
Colchester	—	8	35	5	1	49
N.W. Essex	—	9	28	9	6	52
Totals	2	99	241	39	27	408

TABLE IX.

Summary of Work done in each Dispensary Area.

	Walthamstow	Leyton	Ilford	Barking	Romford	Grays	Rochford	Chelmsford	Colchester	N.W. Essex	Total.
No. of Contacts and Suspects examined :—											
No. found suffering from Pulmonary Tuberculosis	214	167	54	49	9	9	—	13	55	28	598
,, ,, Non-Pulmonary Tuberculosis	19	19	17	22	6	13	6	3	10	8	123
No. of doubtful cases	90	45	41	50	10	16	—	13	6	29	300
No. not suffering from Tuberculosis ..	138	133	42	13	43	46	—	23	60	13	511
Total	461	364	154	134	68	84	6	52	131	78	1532
No. sent by Medical Men	358	186	49	41	33	63	1	34	83	63	911
Reports prepared :—											
Primary .. Insured..	97	90	27	15	38	40	9	22	42	29	409
Uninsured	58	75	22	38	58	33	5	4	18	26	337
Progress .. Insured..	710	569	192	173	217	295	70	209	334	217	2986
Uninsured	548	480	142	205	325	256	15	59	137	114	2281
Totals	1413	1214	383	431	638	624	99	294	531	386	6013

TABLE IX—*continued.*

	Walthamstow.	Leyton.	Ilford.	Barking.	Romford.	Grays.	Rochford.	Chelmsford.	Colchester.	N.W. Essex.	Totals.
Sputa Examined—Positive	107	92	22	5	31	22	1	28	34	20	362
Negative	285	238	52	36	59	38	4	57	57	34	860
Total	392	330	74	41	90	60	5	85	91	54	1222
Shelters in area in use December 31st, 1917	3	2	2	1	8	3	4	11	5	17	56
No. of domiciliary visits paid by Tuberculosis Officer	167	133	36	6	234	263	4	327	354	194	1718
No. of domiciliary visits paid by Nurse ..	2192	2336	702	626	330	265	8	471	1405	9	8344
No. of patients receiving Tuberculin (average)	—	—	1	—	6	5	—	3	3	—	18
Patients receiving Medicine :—											
From Stock .. .. (average)	89	109	16	30	35	28	—	25	11	3	346
From Chemist .. (average)	—	1	18	18	32	19	2	8	17	5	120
No. of patients receiving Oil and Malt (average)	101	101	40	46	57	50	2	35	26	8	466
No. of patients receiving extra nourishment (average)	1	—	—	—	2	—	—	2	2	2	9
Total attendance for all patients	4354	3753	1367	1848	3211	2657	142	2432	1678	492	21924

TABLE X.

Beds available and in use at Sanatoria and Hospitals.

	Males.	Females.	Children.
Chingford ..	14	—	—
Romford ..	—	8	—
Orsett ..	16	—	—
Ilford ..	12	—	—
Colchester ..	12	—	—
Black Notley ..		26	—
Nayland ..		—	4
Sible Hedingham			16
Halstead ..		6	—
Other Institutions		—	5
		—	—
Totals ..	54	40	25
Grand Total ..		119	

These 119 beds are allocated as under :—

	Males.	Females.	Children.	Total
Essex I.C. ..	50	23	—	73
Uninsured persons	4	17	25	46
				119

SUMMARY OF TABLES.

	Cases under treatment.	Observation after Treatment.	Domiliary cases.	Totals.	Total Attendances at Dispensaries during year.
On Dec. 31st, 1916 ..	884 ..	678 ..	242 ..	1,804 ..	19,140
,, Dec. 31st, 1917 ..	1147 ..	720 ..	201 ..	2,068 ..	21,924
Increase or Decrease ..	+ 263 ..	+ 42 ..	— 41 ..	+ 264 ..	+ 2,784

JOHN C. THRESH,
Chief Tuberculosis Officer.

VENEREAL DISEASES.

In the Report for 1916 details were submitted of a scheme for the treatment of these diseases in the County. An arrangement was made whereby Essex and other Home Counties and certain County Boroughs combined with the County of London and terms were arranged with practically all the London Hospitals for treatment and for Pathological investigations. Of the total estimated cost (£33,500), it was presumed that the share of Essex would be £2,377; this was 6.5 per cent. of the total cost for treatment, and 9·5 per cent. for pathological examination.

The following Table shows that these were over-estimated, as only 3·3 per cent. of the patients treated at the London Hospitals came from Essex, and under 4 per cent. of the pathological examinations were made for this County. The cost for the year, therefore, will be about half the estimate.

The London Hospital was utilized by the County far more than any other.

In the proposed arrangement for 1918, three additional hospitals will be recognized, and the Seaman's Hospital at the Albert Dock will be subsidised by West Ham, East Ham, the Port of London, and the Essex County Council.

Difficulties have arisen, chiefly with regard to women, who are unable to go backwards and forwards to the London Hospitals for efficient treatment, and certain philanthropic bodies having offered to provide hostels, it is proposed to make grants to the Royal Free Hospital (7 beds), Women's After-Care Hostel, Sydenham (20 beds), and the Diocesan Home, Woolwich (12 beds). No beds appear to be available in Essex for this purpose.

An arrangement was made with the County Hospital, Colchester, for the N. E. portion of the County, but very few cases have been treated here, and a fresh arrangement for 1918 will be made.

Arrangements were also made with the Saffron Walden Hospital for N. W. Essex, and with the Chelmsford Hospital for Central Essex, but as practically no patient would attend these hospitals, the arrangements have been allowed to lapse. When necessary the County Council will pay the travelling expenses of patients from these areas to enable them to receive treatment at the London Hospitals.

A good deal of literature was sent out during the year, and a few advertisements set out in the principal County newspapers. The Home Counties' Branch of the National Council for the Prevention of Venereal Diseases organized a number of meetings, chiefly within the extra-metropolitan area, and had large audiences. An extension of this propaganda work is absolutely necessary to render the scheme a success.

TABLE XI.

VENEREAL DISEASES.

Summary for year 1917 for the London and Home Counties' Scheme.

	London and Home Counties as a whole.	From Essex only.	Percentage actual from Essex.	Percentage estimated from Essex
Total number of cases treated	15,385	511	3·3	6·5
Pathological specimens examined : -				
For hospital cases	13,988	459	3·3	9·5
For private practitioners	3,649	164	4·5	9·5
Total	17,637	623	3·6	9·5

Hospitals utilized. Out-patients from Essex.		Hospitals used for Pathological purposes, Essex.	
London Hospital	200 cases.	London	138 specimens examined.
Lock (Male) ,, ...	121 ,,	St. Mary's ..	12 ,, ,,
Seamen's ,, ...	55 ,,	Guys	6 ,, ,,
Sick Children's,, ...	25 ,,	Middlesex ..	5 ,, ,,
Guys ,, ...	23 ,,	King's	1 ,, ,,
All others ,, ...	87 ,,	Royal Free ..	1 ,, ,,
Total	511	Westminster ..	1 ,, ,,
		Total ..	164

PARTICULARS OF THE 511 ESSEX CASES OF V.D. TREATED AT THE LONDON HOSPITALS.

Number suffering from Syphilis ..	308	Number who completed treatment ..	9
,, ,, ,, Soft Chancre ..	7	,, ,, ,, ..	—
,, ,, ,, Gonorrhea ..	141	,, ,, ,, ..	9
Not suffering from V. D.	55	Total	18
Total..	511		

MATERNITY AND CHILD WELFARE.

The scheme described in last year's report has with slight modification been adopted by the County Council, and an agreement has been entered into with the Essex County Nursing Association.

1. Under this agreement the County Council will make an Annual Grant to the County Nursing Association, and in return the Association will undertake the following duties :—

(*a*) Train or otherwise provide as many Nurse-midwives as may be required.

(*b*) Assist in the formation of additional local Associations and provide them with trained Nurse-midwives, each of whom shall be paid a salary of £80 to £100 a year.

(*c*) Maintain two midwives at the Leyton Home to attend any case which the County Medical Officer certifies requires the services of a midwife, who cannot be obtained locally.

(*d*) Make annual money grants to any Local Associations requiring assistance in defraying the cost of maintaining a Nurse-midwife.

2. The Nurse-midwife must attend any case of Tuberculosis in her district if required to do so by the Tuberculosis Medical Officer. This involves no risk either of infection to the Nurse or to any of the Nurse's patients, and is one of the conditions which must be fulfilled if a local association desires a grant.

The nurse may act as Visitor to Boarded-out children, or as Visitor for Infant Life protection, or as School-nurse if she has the time to act as such, and the Local Associations make the necessary arrangements with the Authorities concerned.

The fees for these services will be paid to the Local Associations.

3. Where the Nurse has qualified to act as a Health Visitor, she may with the approval of the County Council and Local Government Board, act as such if the Local Health Authority arrange with the Local Association for the use of her services and offer her a reasonable remuneration. These cases, however, will be exceptional.

4. The Nurse-midwife's duties will practically be the same as at present, but in the agreement entered into with the County Council it is stipulated—

(*a*) That the E.C.N.A. shall only give grants to Local Associations when the County Medical Officer of Health certifies that the Local arrangements are satisfactory, and that the Nurse-midwife has efficiently discharged her duties.

(*b*) That the Nurse-midwife acts as a Midwife whenever required.

(*c*) That whenever, acting as a Midwife, she requires medical help for mother or child (under circumstances which are fully set out in the Rules of the Central Midwives Board) she shall send for such assistance, and the E.C.N.A. shall guarantee the payment of reasonable fees to the Medical Attendant.

(*d*) That the Nurse-Midwife attends free of charge any patient suffering from Tuberculosis when required so to do by the Tuberculosis Officer.

5. The salary and expenses of a Nurse-midwife must be guaranteed by the Local Association, and the sum may be raised from the following sources:—

1. Midwifery, Maternity, and other fees paid by benefit subscribers.

2. Fees paid by persons other than subscribers.

3. Fees or subscriptions paid by Boards of Guardians for attendance on the cases in receipt of relief.

4. Fees or subscriptions paid by Local Authorities for the nurse's services as Visitor to Boarded-out children, etc., where such arrangements can be made.

5. Subscriptions from Local Charities, Clubs, etc.

6. Subscriptions from the wealthier members of the community.

7. Grant in aid made by the E.C.N.A.

The information furnished in the Annual Reports regarding Infant Welfare work, Housing conditions, etc., are very briefly summarised in the following Table:—

TABLE XII.

URBAN.	Infant Welfare. No. of Health Visitors.	Salaries.	Allowances.	No. of houses required.
Barking	2	£100 £95	U £5	1000
Braintree	—	— (9)	—	100
Brentwood	—	—	—	50
Brightlingsea	1	£12	—	?
Buckhurst Hill	—	—	—	0
Burnham	1	£6	—	0
Clacton	1	£50	—	0
Chelmsford	1	—	—	400-500
Chingford	1	£60	—	?
Colchester	2½	£90 (1)	U £6, W B £5	?
Epping	—	—	—	0
Frinton	1	£10	—	—
Grays	1	£80 (2)	A	100
Halstead	1	£26	—	50
Harwich	1	£105	—	150
Ilford	2	£100 £108	U £5	100
Leyton	3	£100 to £130 (2)	—	500
Loughton	1	£5	—	?
Maldon	1	£50 (2)	—	30-40
Romford	1	£100 (4)	U £5, B £3	300
Saffron Walden	—	—	—	0
Shoeburyness	1	£26	—	12-14
Tilbury	1	£115	W B £18, U £4 4s.	500
Waltham Cross	2	£12 £12	—	200 (5)
Walthamstow	3	(6)	—	25
Wanstead	1	£10 (7)	—	0
Witham	—	— (9)	—	—
Woodford	1	£130	—	?
Walton-on-Naze	1	£12	—	?
Wivenhoe	1	£10	—	50
RURAL.				
Belchamp	—	—	—	0
Billericay	—	—	—	156
Braintree	—	— (9)	—	140
Bumpstead	—	—	—	13
Chelmsford	1	£110	B £10, W B £10	70
Dunmow	—	— (9)	—	50
Epping	—	—	—	—
Halstead	—	—	—	99
Lexden and Winstree	1	£90	T £25, W B £10	100
Maldon	1	—	—	—
Ongar	—	—	—	200
Orsett	—	—	—	150
Rochford	1	£90	T £10	92
Romford	1	£100	U £5, B £3	190
Saffron Walden	—	—	—	34
Stanstead	—	—	—	?
Tendring	—	—	—	80

U—Uniform. B—Bicycle. T—Travelling.
W B—War Bonus.
A—Quarters, coal and lighting.

(1) One Health Visitor also acts as Tuberculosis Nurse, and receives £100 per annum.
(2) In addition to salaries, which are all subject to increase, £5 is allowed for Uniform, £3 for travelling expenses, and 20 per cent. additional as War Bonus.
(3) For share of services of H. V. employed by Maldon R.D.C.
(4) Employed by W. & R. Authorities jointly.
(5) During War time conditions only.
(6) Salaries £90 to £105, rising to £110 with £13 W. B. and Uniform.
(7) Extra fees for Measles.
(8) With quarters, coal and lighting.
(9) Medical Officer of Health proposes that the Nurse-Midwives should act as Health Visitors.

MIDWIVES' ACT, 1902.

There were 14,290 births in the Administrative County of Essex in 1917, and of this number 4,939 or 34 per cent. were attended by midwives.

*The total number of illegitimate births for the County was 757, and 126 or 19 per cent. of these were midwives' cases.

*Twin births occurred 53 times, and triplets twice in the practice of midwives.

*The deaths of mothers in midwives' cases were 12. Of these 6 were due to Puerperal Septicæmia, 2 to Eclampsia, 2 to Post partum Hemorrhage, 1 to Ruptured Uterus, and 1 to Pernicious Anæmia.

*51 deaths occurred among babies under 10 days old attended by midwives.

*Still-births occurred 102 times in midwives' practices.

*Medical help was called in for mothers in 216 cases, and for infants in 108. The total calls for medical help were 324, or in 8·5 per cent. of cases taken by midwives.

Midwives. 184 names were on the Midwives' Register at the close of 1917, an increase of four over the previous year. The average number of births attended by the Essex midwives in 1917 was 27, a slight increase over previous years.

There are now 150 trained and 34 untrained midwives working in the County.

*Puerperal Fever. 20 cases of rise of temperature were notified in 1917 in the practices of midwives, and 9 of these developed undoubted Puerperal Septicæmia. All these cases were investigated.

*Ophthalmia Neonatorum. Medical help was sought by midwives in 25 cases for discharging eyes. The majority yielded to treatment rapidly. All were investigated.

Penal Cases. Mrs. ——, of Leyton, was charged with manslaughter, and although acquitted on that charge, she was found guilty of serious neglect of infants in her care, and sentenced to imprisonment. Her name was removed from the Midwives' Roll.

Nurse ——, also of Leyton, was reported to the Central Midwives' Board for immoral conduct, but died before her case was heard.

Nurse ——, of Romford, was reported for neglecting a case of Ophthalmia Neonatorum. She was censured by the Central Midwives' Board, and put under special supervision for six months.

Inspections. The usual routine inspections have been made, and on the whole the midwifery service of the County has been very satisfactorily performed.

*Excluding Walthamstow.

HOUSING AND SANITARY INSPECTOR'S REPORTS.

In several areas the Medical Officers of Health doubt whether more houses are uired, but in the majority of cases houses are urgently needed. The numbers gested by the Medical Officers are given on Table XII., and apparently about 3,500 required in the urban districts and about 1,500 in the rural areas. Two or three ban Councils are considering Town Planning Schemes and Building Schemes so to be ready to make a start as early as possible after the termination of the War.

The subject is one which bristles with difficulties and which will, no doubt, be lt with by the Re-Construction Committee just appointed by the County Council.

The Sanitary Inspector's reports indicate, generally, that nuisances are not ng neglected. Considering how the Staff has been depleted the duties have been charged in a very creditable manner.

The duties of the Medical Officers of Health and of their Deputies have also en discharged admirably under the circumstances, and I have to thank them for eir courtesy in providing me with information when required and in carrying out y suggestions which I may have had to make.

JOHN C. THRESH.

CHELMSFORD,
June, 1918.