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HALLATON RURAL DISTRICT COUNCIL.

ANNUAL REPORT,

of the

MEDICAL OFFICER OF HEALTH

For the Year 1925.

Annual Report of M.O.H.

Please circulate as quickly as possible.

S.M.O. III.
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S.M.O. II.
(86 II).

S.M.O. IV.
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ALLIANCE RURAL DISTRICT BOARD

ANNUAL REPORT

OF THE

ALLIANCE RURAL DISTRICT BOARD

FOR THE YEAR 1927.

HALLATON RURAL DISTRICT COUNCIL.

A N N U A L R E P O R T

of the

MEDICAL OFFICER OF HEALTH,

For the year 1925.

Mr. Chairman and Gentlemen,

In accordance with the requirements of the Ministry of Health this Report is in some respects more comprehensive than has heretofore been customary, for it includes particulars of Public Health improvements which have been effected during the past five years. Statistics of mortality and sickness during that period are also included.

As this is but one of fifteen Reports which I am submitting to as many Authorities its size and scope are necessarily more curtailed than would be the case were I merely acting for a single District.

The subjects dealt with are systematized under the following six headings:-

Natural and Social Conditions of the Area.

General Provision of Health Services in the Area.

Sanitary Circumstances of the Area.

Housing.

Inspection and Supervision of Food.

Prevalence of, and Control over, Infectious Diseases.

I. NATURAL AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres) 13,654

Population Census, 1921..... 1,746

" Estimated, 1925..... 1,750

Since 1911 the population has decreased by about 6 per cent.

REPORT OF THE

ANNUAL REPORT

REPORT OF THE

for the year 1922

Mr. Chairman and Members,

It is a pleasure to have the opportunity of the Ministry of Health to report to you on the work of the Department during the year 1922. The report is in some respects more comprehensive than has hitherto been customary, for it includes a summary of the work of the various departments which have been affected by the new organization. The report is divided into two parts, the first dealing with the work of the various departments and the second dealing with the work of the Ministry as a whole.

The first part of the report deals with the work of the various departments. It is divided into four sections, the first dealing with the work of the Department of Health, the second with the work of the Department of Public Health, the third with the work of the Department of Medical Research, and the fourth with the work of the Department of Medical Education.

The second part of the report deals with the work of the Ministry as a whole. It is divided into two sections, the first dealing with the work of the Ministry during the year 1922, and the second dealing with the work of the Ministry during the year 1921.

The first section of the second part of the report deals with the work of the Ministry during the year 1922. It is divided into four sections, the first dealing with the work of the Ministry during the first half of the year, the second with the work of the Ministry during the second half of the year, the third with the work of the Ministry during the year as a whole, and the fourth with the work of the Ministry during the year 1921.

The second section of the second part of the report deals with the work of the Ministry during the year 1921. It is divided into four sections, the first dealing with the work of the Ministry during the first half of the year, the second with the work of the Ministry during the second half of the year, the third with the work of the Ministry during the year as a whole, and the fourth with the work of the Ministry during the year 1920.

The third section of the second part of the report deals with the work of the Ministry during the year 1920. It is divided into four sections, the first dealing with the work of the Ministry during the first half of the year, the second with the work of the Ministry during the second half of the year, the third with the work of the Ministry during the year as a whole, and the fourth with the work of the Ministry during the year 1919.

The fourth section of the second part of the report deals with the work of the Ministry during the year 1919. It is divided into four sections, the first dealing with the work of the Ministry during the first half of the year, the second with the work of the Ministry during the second half of the year, the third with the work of the Ministry during the year as a whole, and the fourth with the work of the Ministry during the year 1918.

The fifth section of the second part of the report deals with the work of the Ministry during the year 1918. It is divided into four sections, the first dealing with the work of the Ministry during the first half of the year, the second with the work of the Ministry during the second half of the year, the third with the work of the Ministry during the year as a whole, and the fourth with the work of the Ministry during the year 1917.

The sixth section of the second part of the report deals with the work of the Ministry during the year 1917. It is divided into four sections, the first dealing with the work of the Ministry during the first half of the year, the second with the work of the Ministry during the second half of the year, the third with the work of the Ministry during the year as a whole, and the fourth with the work of the Ministry during the year 1916.

Physical Features and General Character of the Area.

The District which is situated in the South East of Leicestershire covers an area of 21 square miles. It is chiefly undulating grass land with a fall towards the river Welland which separates it on the South from Northamptonshire.

Fringing the Welland the geological formation is Alluvium. For the rest Lower Lias predominates, but Middle Lias, Marlstone Rock, Northampton Sand and Lincolnshire Colitic Limestone are also in evidence.

Number of families or separate occupiers (1921)	445
Rateable Value	£24,046
Sum represented by a penny rate	£66

Social Conditions.

The population which has for years been steadily decreasing (having fallen from 2,139 in 1891 to but little over 1,600 at the present moment) is essentially agricultural, most of the land being grazed. There are no factories in the District and beyond the village bakehouses, blacksmiths and carpenters only one workshop. This is at Great Easton where some women are employed in corset-making. The District is the centre of Fernie's Country, which for hunting is second to none in England.

The three largest villages with their Census Populations are:- Hallaton, 465: Great Easton, 397: and Medbourne, 380.

A large Private School (preparatory for Public Schools) is situated in the parish of Neville Holt.

Vital Statistics.

Births, legitimate.	M. 15.	F. 10.	Total - 25.
" illegitimate	-	1	" - 1
Total:-	15	11	26
	<u> </u>	<u> </u>	<u> </u>

General Features and General Character of the Area

The District which is situated in the South East of

the District is bounded on the North by the River

and on the South by the River

and on the East by the River

and on the West by the River

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General Features

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General Features

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Birth Rate.....	14.8
" " (1921 - 1925)	16.7
" " for England & Wales (1925).....	18.6
Deaths - M. 17. F. 11. Total - 28.	
Death Rate	15.9
" " (1921 - 1925)	12.3
" " for England & Wales (1925).....	12.2
Deaths of Infants under one year of age.....	4 (1 illegitimate)
Infant Mortality Rate per 1000 births.....	153
" " " (1921 - 1925)	56
" " " for Eng. & Wales (1925)	75

Two per cent of the births registered during the past five years were illegitimate.

In so small a population birth and death rates for a single year are liable to great fluctuations. The rates for the quinquennium form a much less unreliable indication of the District's health.

Causes of Death in 1925.

Civilians only.

<u>Causes of Death:-</u>	<u>Males.</u>	<u>Females.</u>
<u>All Causes</u>	<u>17</u>	<u>11</u>
Whooping Cough	-	1
Influenza	-	1
Tuberculosis of the Respiratory System	2	2
Other tuberculous diseases.....	-	-
Cancer, Malignant disease.....	-	3
Cerebral haemorrhage.&c.....	1	-
Heart disease.....	3	1
Bronchitis.....	1	1
Puerperal sepsis.....	-	1 ^x
Suicide.....	1	-
Other deaths from violence.....	2 ^{xx}	-
Other defined diseases.....	6	1
Causes ill-defined or unknown.....	1	-

x Vide Heading VI (Infectious Diseases)

xx One, an infant, died from the sting of an insect. The other, an old man aged 91, died from shock following burns.

Birth rate.....	14.8
" " (1951 - 1952).....	14.7
" " for England & Wales (1951).....	18.6
Deaths - M. 171 F. 111 Total - 282.....	
Death rate.....	12.9
" " (1951 - 1952).....	12.5
" " for England & Wales (1951).....	12.1
Deaths of infants under one year of age.....	4.1
Infant mortality rate per 1000 live births.....	123
" " (1951 - 1952).....	94
" " for Eng. & Wales (1951).....	72

The low level of the birth rate recorded during the past five years very definitely in the small population birth and death rates for a single year are liable to great fluctuations. The rates for the population show a much less marked indication of the fluctuation.

Causes of Death in 1952

Causes of Death	Males	Females
All causes.....	12	14
Ischaemic heart disease.....	7	4
Influenza.....	1	1
Tuberculosis of the respiratory system.....	3	2
Other respiratory diseases.....	1	1
Cancer, malignant diseases.....	1	1
Cerebral infarction.....	1	1
Heart disease.....	1	1
Neuritis.....	1	1
Prostatic hypertrophy.....	1	1
Other causes.....	1	1
Other deaths from violence.....	1	1
Causes defined elsewhere.....	1	1
Causes ill-defined or unknown.....	1	1

A Wide Health VI (Infectious Diseases) is One, as indicated from a study of an insect. The other, as indicated from those following.

II. GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

Hospitals provided or subsidized by the Local Authority or County Council:-

Tuberculosis, Maternity and Children's hospital accommodation are controlled by the County Council and the matter is dealt with comprehensively in the County Report.

Fever. There are eight Isolation Hospitals with a total of 85 beds, controlled by the Leicestershire Isolation Hospitals' Committee. Patients are sent to such hospitals as have beds available for the disease from which they are suffering. None of the hospitals are in this District.

Small Pox. There are two hospitals provided for the County as a whole.

Ambulance Facilities.

- (a) For Infectious Cases - Motor ambulances are provided in connection with the Isolation Hospitals.
- (b) For Non-infectious Cases and Accident. None under the District Council. The Leicester Royal Infirmary and other voluntary Organizations provide the necessary facilities.

Clinics and Treatment Centres.- All under the County Council.

Public Health Officers of the Local Authority.-

The Medical Officer of Health acts for this and fourteen other Districts in four counties. The Combined Districts cover 500 square miles and have a population of about 120,000. No office or clerical staff is provided.

The Sanitary Inspector is also District Surveyor. They are part-time appointments.

II. GENERAL REVIEW OF HEALTH SERVICE IN THE AREA

Hospitals provided or subsidized by the local authority or County Council:-

Infantile, Maternity and Children's Hospital - Administration is controlled by the County Council and the matter is dealt with comprehensively in the County Report.

Other - There are eight Isolation Hospitals with a total of 65 beds, controlled by the District Health Officer. Patients are sent to such hospitals as have beds available for the diseases from which they are suffering. Some of the hospitals are in the District.

Small Pox - There are two hospitals provided for the County as a whole.

Sanatorium Facilities

Sanatorium - For Tuberculosis Cases - Hotel arrangements are provided in connection with the Isolation Hospitals.

Sanatorium - For Non-Tuberculous Cases and Children - There is no separate County Council. The District Health Officer and other voluntary organizations provide the necessary facilities.

Sanatorium and Tuberculosis Centre - All under the County Council.

Public Health Officer of the Local Authority

The Medical Officer of Health acts for this and fourteen other districts in the County. The combined districts cover 500 square miles and have a population of about 150,000. He is assisted by a District Officer.

The Sanitary Inspector is also District Surveyor. They are part-time appointments.

Professional Nursing in the Home.

The County Council's Health Visitors visit cases in this District.

Midwives.

The supervision of Midwives is vested in the County Council.

Chemical Work.

Analyses of foods and drugs are conducted by the County Analyst. The Medical Officer of Health analyses samples of water.

Legislation in Force.

There are no Local Acts, Special Local Orders, Building Bye-laws or General Adoptive Acts in force in the District.

III. SANITARY CIRCUMSTANCES OF THE AREA.

Water:-

Chiefly from springs and shallow wells. Most of the village of Hallaton is supplied by spring water conveyed by pipes.

Rivers & Streams:-

Save in the parish of Medbourne, where sewage is reaching the brook untreated, there is very little river pollution in the District. The village is relatively low lying and any attempt at efficient treatment would involve the expense of pumping.

At Hallaton there is a four acre sewage-farm which is ample for the treatment of the sewage.

At Horninghold an installation for the purification of sewage was completed in 1911 on the initiative of the principal landowner.

In the remaining parishes most of the sewage has to flow through a considerable length of ditch in which it undergoes partial purification before reaching the brook.

The County Council's Health Inspector visits every house in this

district.

Water.

The supervision of water is vested in the County Council.

Technical Staff.

Analysis of food and drink are conducted by the County Council. The Medical Officer's Health Inspector examines the water.

Localities in Water.

There are no local wells. Special Local Orders, including the laws on General Orders, are in force in the district.

III. SANITARY CIRCUMSTANCES OF THE AREA.

Water.

Water is supplied from springs and shallow wells. Most of the water of the village is supplied by spring water conveyed by pipes.

Water & Sewage.

There is no sewerage system, water sewage is removed to the brook untreated, there is very little river pollution in the district. The village is relatively low lying and any attempt at efficient drainage would involve the removal of the brook.

At Millton there is a four foot sewage-lane which is

used for the drainage of the house.

At Northfield an installation for the purification of sewage was completed in 1911 on the initiative of the parish council.

In the remaining parishes most of the sewage has to flow through a cess-pit or a tank of some kind in which it is untreated. Partial purification before reaching the brook.

Closet-Accommodation:-

In Hallaton the majority of the houses have hand-flushed water-closets. For the rest privies still predominate there being over a hundred in the District. During the past five years only 27 have been abolished. I cannot too fully emphasize the desirability of replacing the latter by pail-closets, especially in the larger villages.

Scavenging:-

At Hallaton refuse is deposited on the sewage farm and at a refuse tip. At Medbourne and Great Easton on the land. My consistent advice throughout the Combined Districts is that every village with over forty inhabited houses, and frequently with less, should have a public system of scavenging. This is as a rule a condition precedent to the effective and sanitary conversion of privies to pail-closets.

Sanitary Inspector's Report for 1925.

Total No. of complaints received during the year.....	8
" " " inspections made for all purposes.....	113
" " " notices served - 8. Informal - 8. Statutory-	nil
" " " summonses issued	nil

Insanitary houses	No. inspected	8
(Public Health Act 1875)	No. cleansed	8
Smoke Nuisances	No. of observations	nil
	Nuisances abated	nil
Overcrowding	No. of houses inspected	nil
	Nuisances abated	nil
Offensive Accumulations:	No. inspected	4
	Nuisances abated	4

Closet Accommodation:-

Total No. in District	(1) Privies	105
	(2) Pail closets	79
	(3) W.C's	88
Privies (middens)	No. of new provided	nil
	No. repaired	4
	No. converted to (a) pails	2
	(b) W.C's.	nil

General Information

The following is a summary of the results of the survey conducted in the District of Columbia for the year 1952. The survey was conducted by the Bureau of Census, and the results are presented in the following tables. The survey was conducted in the District of Columbia, and the results are presented in the following tables. The survey was conducted in the District of Columbia, and the results are presented in the following tables.

Population

The population of the District of Columbia for the year 1952 was 203,379. This represents an increase of 1.5% over the population of 200,200 in 1951. The population of the District of Columbia for the year 1952 was 203,379. This represents an increase of 1.5% over the population of 200,200 in 1951. The population of the District of Columbia for the year 1952 was 203,379. This represents an increase of 1.5% over the population of 200,200 in 1951.

Population by Race and Sex

Total	203,379
White	181,111
Black	19,111
Other	3,157
Male	101,111
Female	102,268
Under 18	45,111
18 to 64	95,111
65 and over	63,157

Population by Age and Sex

Total	203,379
Male	101,111
Female	102,268
Under 18	45,111
18 to 64	95,111
65 and over	63,157

Pails or earth closets	No. of new provided	2
	No. converted to W.C's	nil
Water closets	No. of new provided	nil

Drainage and Sewerage:-

Drains, drain traps &c.	No. inspected	26
	Nuisances abated	4
Cesspools	No. repaired, cleansed &c.	2
	No. abolished & drains connected to sewer	2

Scavenging:-

Ashpits	No. of new provided	5
	No. converted to ashbins	nil
Ashbins	No. of new provided	nil

"Rodine" has been used at the refuse tip at Hallaton for the destruction of rats.

Water Supply:-

No. of samples taken for analysis.....	2
No. condemned	1
Wells	
No. closed	1
No. cleansed, repaired &c.	-
No. of instances where public supply was instituted for well.	nil

Infectious Diseases:-

Houses	No. inspected	5
	No. of inspections	10
No. disinfected	(a) Houses	5
	(b) Schoolrooms	nil
Arrangements for disinfection of:- (a) bedding } Fumigation by		
(b) premises } formalin.		

Premises or Occupations which can be controlled by Bye-laws or Regulations:-

None in the District.

Schools:- The three Public Elementary Schools are all fairly well kept and have a sufficient water supply.

Water closets	No. of new provided	No. of new provided	No. of new provided
all	all	all	all

Urinals and lavatories:-

Urinals	No. provided	No. provided	No. provided
all	all	all	all

Sanitary:-

Sanitary	No. of new provided	No. of new provided	No. of new provided
all	all	all	all

"Sanitary" has been used at the rate of 100 at all times.

Water supply:-

Water supply	No. of new provided	No. of new provided	No. of new provided
all	all	all	all

Interstate Highway:-

Interstate Highway	No. of new provided	No. of new provided	No. of new provided
all	all	all	all

Records of operations which can be supplied by law:-

None in the District.

Remarks:- The above figures represent the total amount of work done in the District.

IV. HOUSING.

Save at Horninghold where excellent modern houses have been provided by the principal land-owner most of the working class dwellings are very old. With a decreasing population building has been practically at a standstill save for twenty-two houses which have been provided by the Council.

I do not know of any instance of accentuated overcrowding and the last census revealed no house with more than two occupants per room.

With old properties such as prevail in old-world agricultural villages there is of course a great deal that fails to reach or even to approach modern standards of hygiene and fitness. Defects are rectified, probably imperfectly, from time to time, but nothing like the complete overhaul implied in the term 're-conditioning' is effected. Here, as in most Rural Districts, with decreasing populations, it is re-conditioning that is really required, and should a subsidy become available for this purpose I would urge you to do all in your power to encourage the improvement of these older properties.

There is, in my judgment, no need for further building by the Council. The average agricultural labourer cannot possibly pay an economic rent. But private enterprise should be encouraged to the uttermost by offering the full subsidy of £100 for any farm labourer's cottages that may be required.

No dwelling-houses have been built during 1925 and there have been no inspections under the Housing Regulations. All the inspections are included in the Sanitary Inspector's report.

The Inspector, however, reports two houses which were "Found not to be in all respects reasonably fit for habitation." Both were voluntarily closed.

There have been no proceedings under the Housing Act of 1925 or under the Public Health Act.

No dwelling-houses have been demolished.

State of Tennessee where excellent modern houses have been erected by the principal land-owners most of the working class dwellings are very old. With a decreasing population building has been practically at a standstill save for ten or twelve houses which have been provided by the County.

I do not know of any instance of unimproved property and the last census revealed no houses with more than two rooms.

Even old properties when so small in size would not be taken as a basis for a census of the town. It is not to be expected that the standards of hygiene and life would be met in such a situation. The houses are small, probably two or three rooms, but not fitted with the complete equipment in the modern sense. The population is small, as in most small towns, with decreasing population, it is no longer possible that it would be a rapidly growing town. It is not to be expected that it would be a rapidly growing town. It is not to be expected that it would be a rapidly growing town.

There is, in my judgment, no need for further action by the County. The present situation is satisfactory. The present situation is satisfactory. The present situation is satisfactory.

The building-house have been built during 1905 and 1906. The building-house have been built during 1905 and 1906. The building-house have been built during 1905 and 1906.

There have been no proceedings under the Housing Act of 1901 or under the Public Health Act. There have been no proceedings under the Housing Act of 1901 or under the Public Health Act.

V. INSPECTION AND SUPERVISION OF FOOD.

Milk:-

<u>Retail Purveyors:</u>	(a) Register - No. on	13
	(b) Premises - Total No. of inspections made.	26
	No. found to require (a) Cleansing	6
	(b) Structural or san imprs.	2

Wholesale Traders & Producers:-

(a) Register - No. on	10
(b) Premises - No. of inspections made - (1) Total	26
(2) During milking time	4
No. found to require (1) Cleansing	1
(2) Structural or san. imprs.	2

There are about 150 milch-cows in the District. No Veterinary Surgeon has as yet been appointed by the Council to inspect these cows. As nothing but benefit to producer as well as to consumer can accrue from the periodic examination of all milking cows I venture to hope that you will fall into line with nearly all the other Rural District Councils in the country by appointing a Veterinary Surgeon for this purpose. I would also suggest that you take advantage of the County Council's arrangements for the bacteriological examinations of samples of milk.

Meat:-

There are only three slaughter houses on the Register. In 1920 there were four. Twelve inspections have been made during the year, 8 being at time of slaughter. The slaughter houses are well kept. Slaughtering is done now on Mondays and every facility is afforded for inspections. No carcass or part of a carcass was condemned or surrendered by reason of its being unsuitable for food.

The little shops are inspected at the same time as the Slaughter houses.

Other Foods:-

Bakehouses are regularly inspected and are on the whole exceedingly well kept. One of the most commendable features in Rural Districts for which I am Medical Officer of Health is the pride which bakers take in maintaining the strict cleanliness of their bakehouses.

VI. PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

A case of Scarlet Fever was notified at Hallaton in May the patient being kept at home.

In November a case of Puerperal Fever was reported, but the onset of the fever, which was diagnosed as Influenza, preceded the patient's confinement and it was not included in my returns. There were, I am advised, no subsequent symptoms suggesting puerperal origin. The case proved fatal and is included in the death returns as Puerperal Fever.

Two cases of Pulmonary Tuberculosis were notified and four cases proved fatal. These cases are classified as follows:-

Age-Periods.	New Cases.				Deaths.			
	Pulmonary		Non-Pulmonary.		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
10 & under 15 yrs.	-	1	-	-	1	-	-	-
15 " " 20 "	-	-	-	-	-	1	-	-
45 " " 55 "	-	-	-	-	1	-	-	-
65 and upwards..	-	1	-	-	-	1	-	-
<u>Totals:-</u>	-	2	-	-	2	2	-	-

One of the fatal cases had not been previously notified.

The notifications received during each of the past five years were as follows:-

	1921	1922	1923	1924	1925	Total	Admitted to Hos.	Deaths
Scarlet Fever	-	2	-	-	1	3	1	-
Cerebro-spinal F.	-	1	-	-	-	1	-	1
Encephalitis Lethargica.	-	-	-	1	-	1	1	-
Pulmonary Tuberculosis.	-	-	2	1	2	5	-	11
Other Tuberculous diseases.	-	-	-	-	-	-	-	2

Bacteriological examinations are conducted at the County Council's Laboratory in Leicester. The County Bacteriologist examined the following specimens during 1925:-

Sputa for Tubercle bacilli.....	3
Urine " " "	1
" (general and Bacteriological).	1
Sewage and water analyses.....	<u>2</u>
<u>Total:-</u>	<u>7</u>

Factories and Workshops.

With the exception of a small corset making industry established at Great Easton there are no factories or workshops save of course such of the latter as are common to all Rural Districts. The four bakehouses have all been inspected. No faults were found during the year and it has not been necessary to refer any matter to H. M. Inspector.

There are, in so far as I know, no outworkers in the District.

I have the honour to be,

Gentlemen,

Your obedient Servant,

J. E. O'CONNOR,

Medical Officer of Health.

Kirby Muxloe,
Nr. Leicester.
May 15th, 1926.

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