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HERTFORDSHIRE COUNTY COUNCIL.

TWENTY-FIFTH ANNUAL REPORT ON THE

PUBLIC HEALTH

OF

HERTFORDSHIRE

BEING THAT FOR THE YEAR

1923

BY

H. HYSLOP THOMSON

M.D., D.P.H.

County Medical Officer of Health.

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To the Chairman and Members of

the Public Health and Housing Committee.

LADIES AND GENTLEMEN,

I have the honour of presenting to you the Annual Report on the Public Health of the County during the year 1923, being the twenty-sixth you have received.

The statistics for the year show that there has been a slight decrease in the birth-rate and a distinct fall in the general death-rate.

It is satisfactory to be able to report a marked fall in the infant mortality and a decreased death-rate from epidemic disease and pulmonary tuberculosis.

From the figures submitted it will be seen that the health of the County during 1923 has been good, and has reached an appreciably higher level than during the previous year.

I am, Ladies and Gentlemen,

Your obedient servant,

H. HYSLOP THOMSON,

County Medical Officer of Health.

HERTFORD.

DUTIES OF COUNTY MEDICAL OFFICERS OF HEALTH.

Directly, the County Medical Officer is responsible to you for the administration of the following measures:—

- (1) "The Midwives Acts, 1902 and 1918."
- (2) "The Notification of Births Acts, 1907 and 1915."
- (3) As School Medical Officer, "The Education (Administrative Provisions) Act, 1907."
- (4) "The Mental Deficiency Act, 1913."
- (5) Certain measures under "The Public Health (Prevention and Treatment) of Diseases Act, 1913."
- (6) "The Public Health (Venereal Diseases) Regulations, 1916."
- (7) "The Maternity and Child Welfare Act, 1918."
- (8) "The Blind Persons Act, 1920."
- (9) "The Public Health (Tuberculosis) Act, 1921."

Members of the Public Health and Housing Committee.

Chairman: Marchand, I. H. A.*

Ball, C. F.	Harris, L. T.
*Barnard, E. B., O.B.E.	Haslam, R. H.
*Blount, Miss M. B.	Herbert Dennis, H., M.P.
Bradford, Miss E. E. R.	Holland Hibbert, The Hon. A. H.
Bushby, H. N. G.	Loyd, E. H.
Cull, J.	Malins, A. G.
Daltry, B. H. R.	Russell, G. W.
Drake, J. R.	Russell Smith, H.
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Flack, A.	Smith, Rev. Roland
Ford, A.	Speaight, F. W.
Franklin, E. J.	Taylor, Colin
*Gabain, C. E.	Tompson, E. H.
Goulding, A.	Ward, W. S.
*Graveson, W.	Weir, A.
Grimwood, T. R.	*Dr. West
Halsey, C. H.	*Whately, G. L.
Halsey, The Rt. Hon. Sir Frederick, Bart.	Wiggs, A. W.

Those marked * are members of the Sub-Committee as to County Medical Officer of Health's Reports.

THE HEALTH OF THE COUNTY, 1923.

STATISTICAL SUMMARY.

(For each District see Table at end of Report.)

TABLE I.	URBAN.			RURAL.			COUNTY.		
	1923. <i>a</i>	1922. <i>b</i>	10 years 1901-10. <i>c</i>	1923. <i>d</i>	1922. <i>e</i>	10 years 1901-10. <i>f</i>	1923. <i>g</i>	1922. <i>h</i>	10 years 1901-10. <i>i</i>
I. Population	232,200	230,511	176,888	105,600	104,195	101,174	337,800	334,706	278,062
II. Birth-rate ...	17·0	17·6	23·6	17·6	16·9	22·6	17·2	17·4	22·9
III. Death-rate	9·5	10·8	11·8	10·0	10·9	12·0	9·6	10·7	11·7
IV. Infant Mortality	42	57·8	90	43	49·3	83	42	55·2	88
V. Epidemic Death-rate	·11	·24	·77	·15	·23	·68	·12	·24	·73
VI. Diarrhoea Death-rate*	·04	·06	·26	·03	·01	·23	·04	·04	·24
VII. Phthisis Death-rate	·5	·6	·8	·6	·5	·7	·59	·6	·8
VIII. Cancer Death-rate	1·3	1·2	·92	1·4	1·4	·93	1·3	1·3	·91

* Per 1,000 population.

The above figures give a summary of the vital statistics for the County during 1923. The estimate of the population, as given by the Registrar-General, is 337,800, compared with 334,706 for 1922. There is a distinct fall in the death-rate in the County, namely, 9·6, compared with 10·7 for 1922. There is a slight decrease in the birth-rate, which is 17·2, compared with 17·4 for the previous year.

There is a marked decrease in the infant mortality, which is 42 compared with 55·2 for 1922. This is by far the lowest infant death-rate which up to the present has been attained, the previous best being 48·46 in 1920. There is a slight fall in the death-rate from pulmonary tuberculosis, namely, 0·59 compared with 0·61 for 1922. On the other hand, there is a slight increase in the death-rate from non-pulmonary tuberculosis, which is 0·14, compared with 0·11 for the previous year. The death rate from malignant disease remains unchanged. The epidemic death rate shows a distinct fall, being 0·12 compared with 0·24 for 1922.

POPULATION AND ACREAGE.

(For each District see fly-leaf at end of Report.)

TABLE 2.	Acreage (land and water).	POPULATION.			
		Census 1901.	Census 1911.	Census 1921.	Estimate 1923.
Urban Districts ...	51,632	155,150	194,263	228,546	232,200
Rural Districts ...	352,900	103,273	117,058	103,674	105,600
County ...	404,523	258,423	311,321	332,220	337,800
England & Wales ...	37,337,630	32,527,843	36,070,492	37,885,242	38,158,000 (1922)

The 1921 census population for the County was 332,220, and the population estimated by the Registrar-General for 1923 is 337,800, an increase of 3,094, the increase for the urban districts being given as 1,689 and for the rural districts as 1,405.

BIRTH-RATE.

(For each District see fly-leaf at end of Report. For number of births, legitimate and illegitimate, in each district, see Table 6.)

TABLE 3.	Hertfordshire.			England and Wales.
	Urban.	Rural.	County.	
1901-10 ...	23·6	22·6	22·9	27·2
1922 ...	17·6	16·9	17·4	20·4
1923 ...	17·0	17·6	17·2	
Number, 1923 ...	3,961	1,857	5,818	780,124(1922)

The birth-rate for 1923 shows a slight fall from 17·4 to 17·2, the rate for the urban districts being 17 and for the rural 17·6. The fall in the birth-rate is restricted to the urban districts, the rate in the rural districts having increased from 16·9 last year. The highest birth-rate in the urban districts was 24 (Baldock), and in the rural districts 20·7 (Welwyn). The lowest rate in the urban districts was 9·6 (Chorleywood) and in the rural districts 12·8 (Watford).

DEATH-RATE.

(For each District see fly-leaf at end of Report. For causes see Tables 6 and 7.)

TABLE 4.	Hertfordshire.			England and Wales.
	Urban.	Rural.	County.	
1901-10 ...	11·8	12·0	11·7	15·4
1922 ...	10·8	10·9	10·7	12·8
1923 ...	9·5	10·0	9·6	
Number, 1923 ...	2,202	1,058	3,260	486,229(1922)

The death-rate shows an appreciable decrease for 1923, being 9·6, compared with 10·7 for the previous year. The death-rate is slightly higher in the rural than in the urban districts. In the urban districts the highest death-rate was 16·4 (Baldock) and the lowest 6·9 (Harpenden). In the rural districts the highest death-rate was 13·2 (Buntingford) and the lowest 7·9 (Barnet and Hatfield).

The fall in the death-rate during 1923 is due to a decrease in the infant mortality and in the death-rate from pulmonary tuberculosis and epidemic diseases, and to a decrease in the number of deaths from the following diseases:—Influenza, bronchitis, pneumonia, heart disease, and cerebral hæmorrhage. Further reference to these various diseases will be found under their appropriate headings in the body of the Report.

INFANT MORTALITY.

TABLE 5.	Hertfordshire.			England and Wales.
	Urban.	Rural.	County.	
1901-10	90	83	88	127
1922	57	49	55	76
1923	42	43	42	
Number, 1923 ...	166	80	246	60,121 (1922)

The infant mortality, which is the number of deaths under twelve months per 1,000 births, shows a distinct decrease from 55 to 42, the actual number of deaths being 246, compared with 322 for 1922. This is the lowest infant death-rate which has been recorded up to the present, and it would be an excellent achievement if from year to year the infant mortality could be retained at or under 40. But the infant death-rate is a sensitive indication, extremely susceptible to adverse circumstances, and easily influenced for the worse by such diseases as influenza, pneumonia, bronchitis, measles, whooping cough, diphtheria, and epidemic diarrhœa. A year during which some of these diseases were prevalent would at once show an increased infant mortality.

The low infant mortality during 1923 is chiefly due to fewer deaths from pneumonia, bronchitis, influenza, diphtheria, whooping cough, diarrhœa, and congenital malformations and premature birth. The decrease in the number of deaths in young infants from preventable causes emphasizes the value of

TABLE 6.
BIRTHS, DEATHS, AND INFANT DEATHS IN 1923.

Districts.	Popula- tion.	Deaths at all ages.	Births.			Number of infant deaths in first year.			Rates per 1,000 births.
			Legi- timate.	Illegi- timate.	Total.	Legi- timate.	Illegi- timate.	Total.	
<i>Urban.</i>									
1 Baldock	2,620	43	61	2	63	5	...	5	79·36
2 Barnet	11,900	118	167	7	174	8	1	9	51·72
3 Berkhamstead ...	7,297	74	117	3	120	5	...	5	41·66
4 Bishop's Stortford	8,752	103	136	3	139	6	1	7	50·35
5 Bushey	8,092	68	123	5	128	2	1	3	23·43
6 Cheshunt... ..	13,900	114	266	11	277	7	1	8	28·88
7 Chorleywood ...	2,391	32	22	1	23	...	...	...	...
8 East Barnet Valley	13,780	115	217	10	227	6	1	7	30·83
9 Harpenden	6,625	46	89	...	89	5	...	5	56·17
10 Hemel Hempstead	13,930	144	214	6	220	8	...	8	36·36
11 Hertford	10,870	117	169	6	175	5	...	5	28·57
12 Hitchin	13,470	131	206	7	213	9	...	9	42·25
13 Hoddesdon	5,441	66	88	4	92	6	...	6	65·21
14 Letchworth	10,990	87	220	9	229	8	...	8	34·93
15 Rickmansworth ...	7,700	78	145	6	151	5	...	5	33·11
16 Royston	3,797	45	46	3	49	4	...	4	81·63
17 St. Albans	25,850	225	379	22	401	14	4	18	44·88
18 Sawbridgeworth...	2,345	23	35	1	36	...	...	...	...
19 Stevenage	5,087	52	82	6	88	4	...	4	45·45
20 Tring	4,263	46	82	4	86	4	...	4	46·51
21 Ware	6,000	70	114	1	115	5	...	5	43·47
22 Watford	47,100	405	835	31	866	39	2	41	47·34
Total Urban	232,200	2202	3,813	148	3,961	155	11	166	41·90
<i>Rural.</i>									
1 Ashwell	3,576	41	55	4	59	4	2	6	101·69
2 Barnet	4,647	37	87	3	90	...	...	...	...
3 Berkhamstead ...	4,757	49	84	7	91	8	...	8	87·91
4 Buntingford	4,913	65	85	5	90	6	...	6	66·66
5 Hadham	5,503	63	87	4	91	2	...	2	21·97
6 Hatfield	8,517	68	164	7	171	...	...	...	...
7 Hemel Hempstead	7,026	81	134	5	139	8	...	8	57·55
8 Hertford	7,223	83	123	7	130	7	...	7	53·84
9 Hitchin	13,260	143	257	8	265	12	...	12	45·28
10 St. Albans	15,010	122	234	13	247	11	...	11	44·53
11 Ware	11,310	138	198	3	201	6	...	6	29·85
12 Watford	16,280	139	198	11	209	11	...	11	52·63
13 Welwyn	3,578	29	73	1	74	3	...	3	40·54
Total Rural ...	105,600	1,058	1,779	78	1,857	78	2	80	43·08
„ Urban...	232,200	2,202	3,813	148	3,961	155	11	166	41·90
Total County	337,800	3,260	5,592	226	5,818	233	13	246	42·28

The Death-rate of Legitimate and Illegitimate Infants per 1,000 Legitimate and Illegitimate Births is :

<i>Legitimate.</i>		<i>Illegitimate.</i>	
Urban Districts ...	40·65	Urban Districts ...	74·32
Rural „ ...	43·84	Rural „ ...	25·64
County „ ...	41·66	County „ ...	57·52

the work undertaken in the County in connection with maternity and child welfare. The work at maternity and child welfare centres undertaken in the various districts in the County by nurses, midwives, and health visitors, is carried out quietly and without fuss from day to day and from year to year, and the results attained as indicated by the figures submitted above and in Table 17 are distinctly encouraging.

A remarkable fall has taken place in the death-rate of illegitimate infants, which is 57·5, compared with 129·1 for 1922, and this in part at least is undoubtedly due to the work carried out at the centres and to the efforts of the nurses, midwives, and health visitors.

DIARRHŒA.

DEATH-RATES OF CHILDREN UNDER 2 YEARS PER 1,000 BIRTHS.

(For each District see fly-leaf at end of Report.)

TABLE 7.	Hertfordshire.			England and Wales.
	Urban.	Rural.	County.	
1918	5·7	—	3·8	9·54
1919	2·7	2·6	2·7	9·59
1920	3·35	4·05	3·56	8·3
1921	7·5	9·4	8·1	15·5
1922	3·4	1·1	2·7	5·57
1923	2·7	2·1	2·5	
Number, 1923 ...	11	4	15	

The death-rate from diarrhœa of children under two years of age per 1,000 births has further decreased during the year, the rate being 2·5 compared with 2·7 for 1922. This low rate is in part at least due to the very wet season, in consequence of which the conditions which bring about infantile diarrhœa were absent. It is also, however, partly the direct result of increased knowledge on the part of the mother regarding the steps to be taken to prevent diarrhœa and to the facilities which

exist at the centres for the supply of dried milk during the summer months in the case of infants who are not breast-fed. The diarrhoea death-rate under two years varied from 0 in 25 districts to 20.4 in Royston urban district and 11.1 in Barnet rural district.

For the prevention of epidemic diarrhoea in infants and young children efforts must be continued in the following directions:—(1) The encouragement of the breast-feeding of infants, (2) the provision of a clean milk supply, (3) the attaining of a satisfactory standard of domiciliary cleanliness, and (4) the abolition of refuse and flies.

CANCER OR MALIGNANT DISEASE.

(Including carcinoma and rodent ulcer. For each District see fly-leaf at end of Report.)

TABLE 8.	Hertfordshire.			England and Wales.
	Urban.	Rural.	County.	
1901-10	0.92	0.93	0.91	(1906-10) 0.94
1922	1.2	1.4	1.3	1.2
1923	1.3	1.4	1.3	—
Number, 1923 ...	307	153	460	—

The death-rate from malignant disease is the same as last year, namely, 1.3, the number of deaths being 460, compared with 443 for 1922. As is generally the case, the death-rate is slightly higher in the rural than in the urban districts. The highest death-rates from malignant disease in the urban districts were 2.5 (Chorleywood), 1.8 (Bishop Stortford), and 1.7 (Cheshunt and Hemel Hempstead). In the rural districts the highest death-rates were 2.8 (Buntingford), 2.7 (Ashwell), and 1.7 (Hemel Hempstead and Hertford).

Of the total number of 460 deaths from malignant disease during the year 201 were males and 259 were females. The number of females over the age of 65 who died from malignant disease during the year, proportionately to males, is considerably higher in urban than in rural districts. The percentage of deaths in both sexes over the age of 65 is 46.5 in urban districts and 56.2 in rural districts.

TUBERCULOSIS.

CRUDE DEATH-RATES FROM PULMONARY TUBERCULOSIS.

(For each District see fly-leaf at end of Report.)

TABLE 9.	Hertfordshire.			England and Wales.
	Urban.	Rural.	County.	
1901-10	0·83	0·78	0·80	(1906-10) 1·30
1922	·6	·5	·6	·8
1923	·5	·6	·59	—
Number, 1923 ...	132	70	202	—

CRUDE DEATHS FROM NON-PULMONARY TUBERCULOSIS.

	Hertfordshire.		
	Urban.	Rural.	County.
1921	·18	·30	·21
1922	·13	·05	·11
1923	·16	·10	·14
Number, 1923 ...	38	11	49

The death-rate from pulmonary tuberculosis shows a further fall, being 0·59, compared with 0·61 in 1922. This is the lowest death-rate from pulmonary tuberculosis in the County which has so far been recorded. The death-rate from non-pulmonary tuberculosis has slightly increased, the rate being 0·14, compared with 0·11 during the previous year.

The comparative death-rates from pulmonary and non-pulmonary tuberculosis during the past seven years are given in the following table:—

COMPARATIVE DEATH RATES FROM TUBERCULOSIS.

	1923.	1922.	1921.	1920.	1919.	1918.	1917.
Pulmonary Tuberculosis ...	0·59	0·61	0·71	0·70	0·72	1·04	0·89
Non-Pulmonary Tuberculosis	0·14	0·11	0·16	0·21	0·26	0·24	0·29

The death-rate from pulmonary tuberculosis during 1922 has been slightly higher in the rural than in the urban districts, although the converse is usually the case. On the other hand, the death-rate from non-pulmonary tuberculosis is higher in the urban than in the rural districts.

The number of cases of pulmonary tuberculosis notified during the year was 411, compared with 520 last year, giving an attack rate of 1·55 per 1,000, compared with 1·56 for 1921. There is a decrease in the number of cases of non-pulmonary tuberculosis notified during the year, namely, 126 compared with 164.

The highest death-rate from pulmonary tuberculosis during the year in the urban districts occurred in Chorleywood (1·12) and the lowest in Hoddesdon and Stevenage (0·1). In the rural districts the highest death-rate occurred in Hitchin (1·1) and Watford (1·0), and the lowest in Hatfield and Hemel Hempstead (0·1). In two rural districts, Hadham and Welwyn, no deaths from pulmonary tuberculosis occurred.

The highest death-rate from non-pulmonary tuberculosis occurred in Barnet and Chorleywood Urban Districts. In seven urban and eight rural districts no death from this form of tuberculosis occurred.

PARTICULARS OF CASES NOTIFIED.

1923.				1922.			
PULMONARY.		OTHER FORMS.		PULMONARY.		OTHER FORMS.	
Notifications.	Rate.	Notifications.	Rate.	Notifications	Rate.	Notifications	Rate.
411	1·22	126	0·37	520	1·55	164	0·48

It will be observed from the above tables that the number of cases of pulmonary tuberculosis notified during the year is considerably lower than last year. The number of cases of non-pulmonary tuberculosis notified during the year is also lower.

Preventive Measures.—It has been frequently emphasized that the provision of facilities for the immediate treatment of all cases of tuberculosis, essential as such facilities are, will not alone control the spread of this disease. Early diagnosis and early and efficient treatment will favourably influence the death-rate, but if the prevalence of tuberculosis is to be further checked and controlled preventive measures on a comprehensive scale must be carried out. Improved housing, sufficient food of good quality, and the abolition of overcrowding and unhealthy conditions of employment are essential measures in relation to the prevention of this disease. A further essential step is the abolition of tuberculosis from dairy herds with the consequent supply of milk free from contamination by tubercle bacilli. Special care is called for during the treatment of certain diseases such as measles, whooping cough, and influenza, which are liable to pave the way for tuberculosis.

The following steps are taken with a view to closer co-operation in preventive effort between the County Council and Local Sanitary Authorities. Information of all cases of pulmonary tuberculosis with tubercle bacilli in the sputum is sent to the District Medical Officer of Health. This supplements the information from notification and provides more accurate information regarding these cases of the disease.

Information is sent to the District Medical Officer of Health regarding the death of a patient and of removal of a patient to hospital or sanatorium so that disinfection may be carried out. The reports regarding the home conditions of patients forwarded by the health visitors and nurses contain from time to time references to insanitary conditions, structural defects, overcrowding, etc. The information thus obtained is forwarded to the District Medical Officer of Health with a view to the necessary action being taken.

The following tables give information regarding the home conditions in the case of 389 patients suffering from tuberculosis:—

HOME CONDITIONS.

	Good.	Indifferent.	Bad.
Ex-Service Men	81·8	13·6	4·5
Insured	65·0	28·6	6·4
Uninsured	59·3	33·2	7·5
Total	64·0	29·2	6·8

NUMBER OF PERSONS PER BEDROOM.

	Two or less.	Three.	Four.	Over Four.
Ex-Service Men ...	79.5	18.2	2.3	...
Insured	71.4	21.5	5.7	1.4
Uninsured	63.3	26.6	9.1	1.0
Total ...	68.1	23.8	7.1	1.0

The above tables yield some suggestive information regarding the home conditions of patients suffering from tuberculosis. In over thirty per cent of the patients regarding whose home conditions a report was received, there existed a ratio of three or more than three persons per sleeping room. This indicates the existence of overcrowding and emphasizes the urgent need for the provision of additional houses. Special attention is paid to the open type of case existing under such conditions, and special efforts are made to secure immediate institutional accommodation for this type of case. When the home conditions are reported as bad, or the extent of overcrowding as serious, steps are taken through the District Medical Officer of Health to deal with the matter as far as is practicable.

Although the death-rate from pulmonary tuberculosis during 1923 has further decreased, the type of the disease which has been met with during the last few months gives rise to some concern. In the majority of cases it is well advanced and of active type, even when the disease is of comparatively recent onset. The explanation of this is probably twofold, namely, the adverse climatic conditions with cold east winds and the absence of sun which have prevailed and the likelihood that owing to the economic conditions which exist the resistance of the population to tuberculosis is not being well maintained.

Summary of New Work during the Year.—In the following tables particulars are given of the work carried out during the year in connection with tuberculosis, including recommendations for treatment in the case of new patients.

Number of cases examined	945
Cases treated in sanatoria	365
Cases treated in hospitals	132
Cases treated at home	330
Cases treated at dispensaries	348
Cases recommended milk	57
Shelters issued	16
Specimens of sputum examined	1,143
Tubercle bacilli present	342

The County Sanatorium at Ware Park was opened for the reception of patients during the year. It provides accommodation for both ambulant and bed cases. Treatment with Professor Dreyer's vaccine, and sodium morrhuate has been carried out during the year. Treatment by means of artificial pneumothorax has also been commenced, and will be extended during the year. A system of graduated walking exercise and graduated manual labour has been organized for ambulant patients, and an open-air workshop is being provided with the generous help of the Hertfordshire branch of the British Red Cross Society.

Further particulars of the work carried out in connection with tuberculosis are given in the Annual Report on Tuberculosis for 1923.

VENEREAL DISEASES.

The scheme adopted by your Council with a view to the prevention, diagnosis, and treatment of venereal diseases has been continued during the year, and patients suffering from this form of disease attend one or other of the hospitals in London with which arrangements have been made for treatment. The number of patients from Hertfordshire attending the hospitals in London during 1923 was 213, compared with 142 for 1922, 166 for 1921, 215 for 1920, 235 for 1919, 113 for 1918, and 124 for 1917. Of this number 155 were found to be suffering from venereal disease, compared with 142 for 1922, 126 for 1921, 176 for 1920, 180 for 1919, 94 for 1918, and 108 for 1917. The total attendances were 2,443, compared with 1,708 for 1922, 2,436 for 1921, and 463 doses of salvarsan substitutes were given, as against 513 last year.

The number of pathological examinations carried out for practitioners was 89, compared with 69 for the previous year.

The amount of work carried out during the year is shown in the following table:—

ANNUAL SUMMARY FOR 1923.

Hospitals.	New Patients.					Total Attendances.	In-patient days.	Salvarsan. No. of doses.
	Syp.	S.C.	Gon.	Not V.D.	Total.			
Albert Dock ... ..	...	...	...	...	...	...	...	...
Charing Cross ... ..	...	...	1	...	1	9	...	...
Diseases of Skin ... ..	...	...	...	...	...	...	...	...
E. G. Anderson	3	...	1	1	5	26	19	18
Gt. Northern	11	...	6	15	32	204	...	48
Hospital for Sick Children, Gt. Ormond Street	2	...	...	12	14	67	30	32
Guy's	3	1	2	2	8	46	...	16
King's College ... ..	...	...	2	...	2	16	...	...
Lock (male)	9	3	22	2	36	782	177	28
Lock (female)	12	...	20	2	34	63	482	39
London	1	...	1	2	4	78	18	18
Metropolitan	2	...	...	1	3	25	...	11
Middlesex	2	...	3	2	7	126	...	10
Miller General ... ..	...	...	...	...	...	...	...	...
Royal Free	5	...	7	3	15	232	19	47
Royal London Ophthalmic	4	...	1	...	5	68	57	23
St. George's ... ..	...	...	1	...	1	10	...	...
St. John's Skin	2	...	...	...	2	18	...	17
St. John's, Lewisham ... ..	...	...	...	...	...	...	...	...
St. Mary's	1	...	1	1	3	60	...	...
St. Paul's	1	...	6	4	11	203	...	15
St. Thomas'	6	...	3	4	13	228	...	66
Seamen's	1	...	1	...	2	15	...	6
S. London for Women... ..	...	...	...	...	...	...	...	...
University College	6	...	4	2	12	138	64	57
West London ... ..	...	...	...	...	...	...	...	...
Westminster	2	...	...	1	3	29	...	12
S. Army Mothers' Hospital	...	...	...	...	...	...	...	...
Children's Medical Home	...	...	...	...	...	...	...	...

The total number of pathological examinations made for private practitioners in the County during the year is 89.

BLIND PERSONS.

Under "The Blind Persons Act, 1920," the County Council has prepared a scheme for promoting the welfare of blind persons ordinarily resident within their area, which came into operation on the 1st April, 1923.

This scheme, which will be additional to the provision made by the Education Authority, will embrace the following arrangements.

Children under School Age.—To consider cases of infants born blind or with sight so defective as to be unable to distinguish

common objects. When considered necessary, arrangements to be made for such children to be boarded out or sent to a residential home. Parents to contribute according to means.

Employment.—The service of employment will be treated under the heading Home Workers.

Home Workers and Home Teachers.—These services to be carried out in cases approved by the County Council by the London Society for Teaching the Blind, Swiss Cottage. The Council to pay on a basis of service a sum not exceeding the rate of £5 per head per annum after allowing for the grants receivable by the said Society from the Ministry of Health.

Homes.—To make maintenance grants to blind persons not destitute, but whom the Council may consider it desirable to send to a home for the blind approved by the Ministry of Health.

Hostels.—To contribute towards the maintenance of blind persons employed in approved workshops and resident in a hostel approved by the Ministry of Health, who from lack of housing or for some other reason may require such provision.

Unemployable Blind.—To arrange, when necessary, for aged, infirm, and unemployable blind persons to be boarded out or to receive weekly or other payments direct when they reside in their own homes or lodgings. Destitute cases to be dealt with as hitherto by Boards of Guardians.

Registration.—To provide a system of registration of all blind persons living within the area to be carried out by the County Medical Officer of Health.

In carrying out the scheme described above, the County Council are arranging to secure the help and co-operation of the County Nursing Association and the Hertfordshire Association for the Blind. The register of blind persons in the County, which has been prepared, contained at the beginning of the year 315 names, 143 males and 162 females. During the year 17 names were added to the register, 6 males and 11 females, while 18 names, 12 males and 6 females, were removed for various reasons. Two cases received grants or training from the County Council during the year.

MENTAL DEFECTS.

The work of ascertaining and dealing with mental defectives has been continued during the year. During 1923, 98 cases were reported to the County Medical Officer as being mentally defective within the meaning of the Act, as compared with 78 last year. Of the 98 cases reported, 54 were males and 44 were females. Of the 98 cases, 63 were mentally defective, 9 were defective and epileptic cases, 4 were epileptic, and the remainder either dull and backward or suffering from some form of physical defect associated with backwardness.

During the year 25 children were admitted to Kingsmead, the special residential school for mentally defective children. Of the children admitted, 16 were boys and 9 were girls. At the end of the year there were in residence 67 boys, 50 girls, and 10 feeble-minded females, a total of 127. Of this number, 76 were County cases and 51 were out-County cases.

During the year 22 cases were discharged from Kingsmead School. Of these, 15 had reached the age of 16 and were transferred to the care of their parents or were subsequently sent to certified institutions. Nine cases were sent to certified institutions or placed under guardianship during the year, as compared with 13 so dealt with in 1922. Of these 9 cases, 6 were feeble-minded, 2 imbecile, and 1 feeble-minded and epileptic.

The absence of adequate accommodation in certified institutions, more especially for low-grade and complicated cases, is seriously felt from time to time. In the case of defectives over the age of 16, if adequate supervision and protection cannot be provided at home, it is essential that they should be admitted to and be retained in certified institutions where suitable training, employment and supervision are provided. The condition of mental deficiency is not infrequently associated with some serious physical defect, such as epilepsy, blindness, or deafness, and for such cases adequate institutional accommodation is essential. The helpless type of mentally defective, namely, the idiot and low-grade imbecile, also requires institutional treatment of a character similar to that provided in a hospital, including medical supervision and nursing.

In the following tables particulars are given of the type of defective in respect of those cases ascertained during the year, and of the procedure adopted. Further particulars are given in the Annual Report to the Committee under "The Mental Deficiency Act, 1913".

PARTICULARS AS TO TYPE OF MENTAL DEFECT.

	Males.		Females.	
	Under 21.	Over 21.	Under 21.	Over 21.
Idiots	1	—	1	—
Imbeciles	5	—	1	2
Feeble-minded	28	3	17	4
Moral Imbeciles	—	—	1	—
Lunatics	—	—	—	—
Epileptic and Feeble-minded	2	—	—	1
Epileptic Imbeciles	2	—	—	—
Epileptics	2	—	2	—
Physically Defectives	5	—	7	1
Dull and Backward	4	—	2	—
Doubtful	2	—	2	3
Totals	51	3	33	11

During the year the nurses paid 676 visits to 97 defectives in their homes, while 70 forms giving particulars regarding home conditions and circumstances of the defective were forwarded to the County Medical Office.

PARTICULARS AS TO CIRCUMSTANCES AND PROCEDURE
ADOPTED.

	<i>Males.</i>	<i>Females.</i>
Sent to Certified Institutions or placed under Guardianship	4	5
Reported to Education Committee	35	28
Under proper care, no action desired by parents, able to work, or no action taken	8	6
On waiting list	6	5
Dealt with under Lunacy Acts	—	1
Total	<u>53</u>	<u>45</u>

EPIDEMIC DISEASES.

There has been a fall in the death-rate from epidemic disease, the rate for 1923 being 0·12, compared with 0·24 for 1922, the number of deaths being 41, compared with 81 for the previous year. The death-rate is higher in the rural than in the urban districts, namely, 0·15, compared with 0·11.

DEATH-RATES FROM EPIDEMIC DISEASES.
(For each District see fly-leaf at end of Report.)

TABLE 10.	Urban.		Rural.		County.	
	Average 1901-10.	1923.	Average 1901-10.	1923.	Average 1901-10.	1923.
Smallpox	'00	—	'00	—	'00	—
Measles	'15	'01	'09	'04	'13	'02
Scarlet-fever	'04	'008	'04	'02	'04	'01
Diphtheria and Croup...	'10	'03	'13	'02	'11	'03
Enteric and Continued Fever	'03	'004	'01	'009	'02	'006
Whooping-cough ...	'16	'02	'17	'01	'16	'02
Cerebro-spinal Fever...	—	'01	—	—	—	'008
Encephalitis Lethargica	—	'008	—	—	—	'006
Polioencephalitis ...	—	'004	—	'009	—	'006
Total Rates ...	'48	'11	'44	'15	'46	'12
Total Numbers ...	1,362	26	691	15	2,053	41

Smallpox.—There were no deaths from smallpox during the year. In January, 1923, one case was notified from the rural district of Watford. This was a very mild case, the patient being a child who had travelled from the North of England. Immediate isolation and energetic preventive measures were successful in limiting the disease to the one case.

Chicken-pox.—This disease is of some importance, as modified smallpox may be mistaken for it, and for this reason notification has been adopted in several districts for varying periods.

Measles and Whooping-cough.—There were 8 deaths from measles during the year, compared with 10 last year. Three of these were in urban districts and 5 in rural districts. The importance of the early treatment of measles so as to minimize the risk of serious pulmonary complications is becoming more definitely recognized by parents, and medical advice is now more frequently sought for this disease. Rest in bed during the early stages, even when the disease appears to be mild, is essential. The largest number (2) occurred in Hadham Rural.

There were 7 deaths from whooping-cough, compared with 39 last year; of these, 5 were in urban districts and 2 in rural districts.

Scarlet Fever.—There were 486 notifications of scarlet fever and 5 deaths from this disease during the year, compared with 785 notifications and 2 deaths last year, the death-rate being 0·01, compared with 0·005. The deaths occurred in St. Albans City, Watford Urban, Buntingford, Hadham, and Watford Rural Districts. The higher death-rate from scarlet fever during 1923 is obviously due to a more severe type of the disease, as the notifications were considerably fewer. For some years scarlet fever has been an extremely mild disease, and it is therefore quite possible that in the near future a more virulent type may be met with.

Influenza.—There has been a considerable decrease in the number of deaths from influenza, the number being 61, compared with 208 during 1922, 53 during 1921, 59 during 1920, 250 during 1919, and 815 during the year 1918, when the disease was pandemic. There were 46 deaths in the urban districts and 15 in the rural districts. In the urban districts the largest number of deaths were 11 (Watford), 6 (Rickmansworth), 4 (Hitchin), 3 (Bushey). The largest number of deaths in the rural districts were 3 (Hitchin), 2 (Hatfield), 2 (Buntingford), and 2 (Barnet).

During the early months of the present year influenza has again been somewhat prevalent, but there has been a decrease in the number of deaths from this cause. Broncho-pneumonia and bronchitis are the complications in influenza which are chiefly responsible for a fatal issue, especially in persons of advanced years. The risk of such complications is greatly increased if persons attacked by influenza do not take immediately to bed and obtain medical treatment. A rise in temperature, whatever the cause may be, should always be an indication for rest in bed and securing medical advice.

Diphtheria.—There were 189 cases of diphtheria notified during the year, 101 cases in the urban districts and 88 in the rural districts. The highest number of notifications was received from Hertford Urban (17), Watford Borough (14), St. Albans City (13), Harpenden Urban (9), Barnet Urban (8), Letchworth Urban (7), Welwyn Rural (21), Barnet Rural (16), Ware Rural (14), Watford Rural (11), St. Albans Rural (8), Hertford Rural (7). There were 12 deaths from this disease during the year, compared with 18 last year, 9 in urban districts and 3 in rural districts, and the death-rate was 0·03, compared with 0·05 for the previous

year. The largest number of deaths from this disease in the urban districts was 3 (East Barnet), and in the rural districts the largest number was one (Barnet, Berkhamstead, and St. Albans).

Enteric Fever.—The total number of cases of enteric fever notified during the year was 39, compared with 35 last year; this includes 12 cases of para-typhoid. Of this number 23 were in urban districts and 16 in rural districts. The number of deaths from enteric fever was 2, there being 1 in the urban districts and 1 in the rural districts. The death-rate was lower than last year, being 0.006, compared with 0.02. The deaths occurred in the following districts: Tring Urban and Ware Rural. The largest number of notifications was received from Bishop's Stortford (10) and Watford Rural (9). The twelve cases notified from Bishop's Stortford were all para-typhoid, and occurred in a residential institution. The type of the disease was not severe, although a high temperature was recorded for a few days and the outbreak was readily controlled by the energetic precautionary measures which were carried out.

Typhus Fever.—There were no cases of typhus fever notified during the year.

Puerperal Fever.—There were 8 cases of puerperal fever notified during the year, as compared with 12 last year. There were 4 deaths returned as due to puerperal sepsis, compared with 12 last year. Of these, 3 were in urban districts and 1 only in the rural districts. The urban districts in which deaths from puerperal sepsis occurred are as follows: Barnet (1), Bishop's Stortford (1), Watford Urban (1). There were 13 deaths from parturition and accidents, or disease of pregnancy, the same as last year, 9 in the urban districts and 4 in the rural districts, the largest number being 3, in the urban district of Cheshunt.

Erysipelas.—There were 54 cases of erysipelas notified during the year, 43 in urban districts and 11 in rural districts, compared with 57 for the previous year, but no return has been received regarding the actual number of deaths in the County from this cause.

Meningococcal Meningitis and Encephalitis Lethargica.—There was one case of meningococcal meningitis notified during the year, compared with 6 last year. There were three deaths from this cause, the same as last year. Two cases of encephalitis lethargica were notified during the year, and there were two deaths from this disease, compared with four last year.

Polioencephalitis and Poliomyelitis.—One case of polioencephalitis was notified during the year, and there were two deaths from this disease. There were seven cases of poliomyelitis notified during the year, but no deaths from this disease.

Pneumonia.—The number of deaths from this cause shows a decrease, namely, 175, compared with 188 for 1922, the number for previous years being 145 for 1921, 153 for 1920, 166 for 1919, 260 for 1918, 212 for 1917, 173 for 1906, 279 for 1915, and 203 for 1914. There were 126 deaths in urban districts and 49 in rural districts. In the urban districts the largest number of deaths occurred in Watford (18), St. Albans (12), Hitchin and Hertford (9), and Baldock (8). In the rural districts the largest number of deaths occurred in Hemel Hempstead (11), Ware (8), and Hertford and Watford (6). During the year 134 cases of pneumonia were notified.

Bronchitis.—There were fewer deaths from bronchitis, the number being 277 compared with 314 last year. Of this number there were 188 in urban districts and 89 in rural districts.

Heart Disease.—There has been a decrease in the number of deaths from heart disease, namely 475, compared with 534 for 1922. There are more deaths from heart disease than from any other cause. Of the total number 324 were in urban and 151 in rural districts.

Other Diseases.—The number of deaths from *acute* and *chronic Bright's disease* is slightly lower than last year, namely 78 compared with 80. There are fewer deaths from *cerebral hæmorrhage*, the number being 234 compared with 269. The number of deaths from *cirrhosis of the liver* was 14 compared with 16 last year. The deaths from *appendicitis* have increased, being 33 compared with 29 last year. There is also an increase in the number of deaths from *arterio-sclerosis* and *diabetes*.

Other Notifiable Diseases.—During the year 16 cases of *dysentery* were notified compared with 26 last year. There were five cases of *malaria* notified. The number of cases of *ophthalmia neonatorum* notified during the year was 13 compared with 11 last year, 22 in 1921, and 31 in 1920.

TABLE 12.—CAUSES OF DEATHS

CAUSES OF DEATH.	Baldock.		Barnet.		Berkhampstead.		Bishop's Stortford.		Bushey.		Cheshunt.		Chorleywood.		E. Barnet Valley.		Harpenden.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1 Enteric Fever ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
2 Smallpox ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
3 Measles ... ..	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
4 Scarlet-fever ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5 Whooping-cough ... ..	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	...	...
6 Diphtheria ... ..	...	1	1	...	...	...	...	...	...	...	...	...	...	...	1	2	...	...
7 Influenza	2	...	2	1	...	1	1	1	2	1	...	...	...	...	1	1	...	...
8 Encephalitis Lethargica ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
9 Meningococcal Meningitis ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
10 Tuberculosis of Respiratory System ... ..	...	2	3	3	4	...	6	1	2	5	5	1	2	1	3	1	2	...
11 Other Tuberculous Diseases ... ..	...	1	...	...	...	...	1	1	...	2	1	...	...	2	2	1	...	...
12 Cancer, Malignant Disease	3	...	6	8	6	5	8	8	4	6	7	17	2	4	6	7	2	...
13 Rheumatic Fever ... ..	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...
14 Diabetes ... ..	...	1	...	3	1	...	...	...	1	...	...	1	...	...	1	...	...	...
15 Cerebral Hæmorrhage, etc.	1	2	3	4	2	...	4	1	3	4	7	...	...	1	8	2	1	...
16 Heart Disease	1	1	5	8	4	5	4	4	3	2	9	6	2	1	8	7	1	...
17 Arterio-sclerosis ... ..	...	1	5	1	1	1	4	1	3	...	4	2	2	1	6	2	3	...
18 Bronchitis	1	1	3	6	5	4	9	8	2	3	7	3	5	1	10	3	...	...
19 Pneumonia (all forms)	5	3	4	1	3	2	3	1	...	5	2	...	...	5	2	3	...	...
20 Other Respiratory Diseases	1	...	2	...	...	...	1	...	...	2	1	...	...	1	...	...	...	...
21 Ulcer of Stomach or Duodenum ... ..	...	...	...	...	1	3	2	...	...	...	...	...	...	...	...	...	...	...
22 Diarrhœa, etc. (under 2 years) ... ..	...	...	...	...	...	...	...	...	...	1	1	...	...	...	1	...	...	...
23 Appendicitis and Typhlitis	1	...	...	1	...	1	1	...	3	...	1	...	...	...	...	...	...	...
24 Cirrhosis of Liver ... ..	...	...	2	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...
25 Acute and Chronic Nephritis	1	2	1	...	1	1	...	1	1	1	...	1	1	1	...	...	1	...
26 Puerperal Sepsis ... ..	...	...	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...
27 Other Accidents and Diseases of Pregnancy and Parturition ... ..	...	1	...	...	...	...	...	1	...	...	3	...	...	...	1	...	...	...
28 Congenital Debility and Malformation, Premature Birth	1	...	6	1	...	2	4	1	2	...	3	2	...	2	1	3	...	...
29 Suicide ... ..	...	...	1	...	1	1	2	1	...	1	1	...	...	1	...	...	...	...
30 Other Deaths from Violence	1	2	2	2	1	...	...	...	1	2	3	3	...	1	3	1	...	...
31 Other defined Diseases	3	4	10	20	10	7	9	13	5	11	5	7	2	4	8	14	3	...
32 Causes ill-defined or unknown ... ..	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
All causes... ..	21	22	55	63	42	32	59	44	31	37	63	51	17	15	67	48	21	23

BETWEEN SEXES IN URBAN DISTRICTS, 1923.

Hemel Hempstead		Hertford Borough.		Hitchin.		Hoddesdon.		Letchworth.		Rickmansworth.		Royston.		St. Albans City.		Sawbridge-worth.		Stevenage.		Tring.		Ware.		Watford.		TOTAL.	Causes of Death.
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M. & F.	
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	3
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	2	4
...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	1	...	5	5
...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...	1	...	9	6
...	2	1	...	1	3	1	1	1	1	4	2	2	...	1	1	...	...	...	...	...	...	...	...	5	6	46	7
1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	8
...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	3	9
3	2	1	6	4	4	...	1	2	3	2	3	...	2	8	5	1	1	...	1	1	2	2	3	18	15	132	10
4	1	2	...	...	2	1	1	1	...	1	1	...	...	2	1	...	1	1	...	1	...	1	1	4	38	11	
15	10	8	9	7	7	3	3	6	11	3	8	3	2	17	13	...	...	2	6	4	3	2	3	19	39	307	12
1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	5	13
...	...	1	1	...	2	...	...	...	1	...	...	1	1	...	3	...	...	...	1	...	...	...	7	3	29	14	
5	1	2	5	4	6	2	7	1	4	2	2	4	...	8	10	2	...	1	...	1	2	3	5	7	13	141	15
13	22	7	10	10	11	4	5	8	5	4	5	5	5	19	30	2	...	6	3	4	7	7	10	22	28	324	16
2	1	6	1	1	...	1	3	1	1	1	1	1	...	1	5	2	...	1	3	...	...	...	3	1	76	17	
5	8	6	7	6	6	3	3	4	6	1	5	4	1	5	7	...	...	...	3	1	4	2	15	15	188	18	
3	4	7	2	5	4	...	1	3	3	2	3	1	...	6	6	2	2	2	1	2	2	1	3	10	8	126	19
1	1	...	1	...	...	...	1	...	...	...	...	...	...	2	...	1	...	1	...	...	...	1	2	6	25	20	
...	...	1	1	2	...	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	6	1	21	21
...	...	2	1	...	...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	2	1	11	22	
...	...	...	...	1	...	1	1	...	...	...	...	...	2	2	...	...	...	...	...	...	...	...	3	3	22	23	
...	...	...	...	1	...	...	2	...	...	1	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	10	24
4	5	3	1	3	1	1	...	...	1	...	1	...	1	5	1	1	...	...	...	2	...	1	...	5	2	53	25
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	3	26
...	...	...	...	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	9	27	
2	3	1	...	3	1	2	2	4	...	3	...	2	...	7	6	...	...	1	...	1	1	2	...	19	6	94	28
1	...	...	...	...	2	1	...	1	...	...	...	...	...	...	1	...	...	1	...	...	...	1	1	2	2	22	29
4	...	1	2	3	...	1	...	2	...	2	...	...	1	6	...	...	...	1	2	1	...	...	6	4	59	30	
11	8	6	11	13	15	4	6	7	6	7	13	3	3	20	22	2	6	10	7	3	2	7	8	45	46	430	31
...	...	1	...	...	...	...	...	1	1	1	...	...	...	...	...	...	...	...	1	...	...	...	...	...	6	32	
75	69	58	59	64	67	27	39	43	44	34	44	27	18	111	114	13	10	27	25	25	21	33	37	198	207	2202	

TABLE 13.—CAUSES OF DEATH BETWEEN SEXES

CAUSES OF DEATH.	Ashwell.		Barnet.		Berkhampstead.		Buntingford.		Hadham.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1 Enteric Fever ... ..	...	...	...	...	...	...	...	...	...	...
2 Smallpox ... ..	...	...	...	...	...	...	...	...	...	...
3 Measles ... ..	...	...	...	...	1	...	...	...	1	1
4 Scarlet Fever ... ..	...	...	...	...	...	...	1	1	...	...
5 Whooping-cough ... ..	...	...	...	...	1	...	...	...	...	...
6 Diphtheria ... ..	...	...	1	...	1	...	...	...	...	...
7 Influenza ... ..	...	1	2	...	...	...	2	1	...	...
8 Encephalitis Lethargica ... ..	...	...	...	...	...	...	...	...	...	...
9 Meningococcal Meningitis ... ..	...	...	...	...	...	...	...	...	...	...
10 Tuberculosis of Respiratory System ...	2	1	...	3	2	1	...	2	...	...
11 Other Tuberculous Diseases ... ..	...	...	...	...	...	...	...	...	...	...
12 Cancer, Malignant Disease	7	3	2	2	1	2	6	8	5	3
13 Rheumatic Fever ... ..	...	...	...	...	...	...	1	...	...	...
14 Diabetes ... ..	...	...	...	...	1	...	2	...	...	...
15 Cerebral Hæmorrhage, etc.	3	1	...	3	3	2	4	1	7	3
16 Heart Disease	3	1	2	2	4	5	3	4	6	5
17 Arterio-sclerosis ... ..	...	...	3	1	1	...	...	4	1	...
18 Bronchitis	4	2	1	1	3	2	4	3	2	4
19 Pneumonia (all forms)	2	1	1	...	1	2	...	...	...	1
20 Other Respiratory Diseases ... ..	...	...	...	...	1	...	1	...	...	...
21 Ulcer of Stomach or Duodenum ... ..	...	...	...	...	...	...	1	...	...	...
22 Diarrhœa, etc. (under two years) ...	...	...	1	...	...	...	...	1	...	...
23 Appendicitis and Typhlitis ... ..	...	...	...	1	1	...	1	...	...	...
24 Cirrhosis of Liver ... ..	...	...	...	...	...	...	...	1	...	...
25 Acute and Chronic Nephritis... ..	...	...	...	1	1	...	2	...	1	...
26 Puerperal Sepsis ... ..	...	...	...	...	...	...	...	...	...	...
27 Other Accidents and Diseases of Pregnancy and Parturition ... ..	...	...	...	...	...	...	...	...	...	...
28 Congenital Debility and Malformation, Premature Birth	2	1	...	...	4	1	3	1	1	...
29 Suicide ... ..	...	...	1	1	...	1	...	...	...	...
30 Other Deaths from Violence ... ..	...	...	2	1	1	1	...	...	...	...
31 Other defined Diseases	5	2	4	1	4	1	6	9	7	7
32 Cases ill-defined or unknown ... ..	...	...	...	...	...	...	...	...	...	...
All causes	28	13	20	17	31	18	28	37	37	26

IN RURAL DISTRICTS, 1923.

Hatfield.		Hemel Hempstead.		Hertford.		Hitchin.		St. Albans.		Ware.		Watford.		Welwyn.		TOTAL.	Causes of Death.
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.&F.	
...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	5	3
...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	3	4
...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	2	5
...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	3	6
...	2	...	...	...	1	2	1	1	...	1	...	...	...	1	...	15	7
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	8
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	9
1	...	1	...	3	...	10	5	4	10	7	1	11	6	...	...	70	10
1	...	2	1	2	...	...	1	2	...	...	1	...	1	...	...	11	11
6	7	6	6	5	8	7	7	12	9	4	10	5	16	2	4	153	12
...	...	...	...	...	...	1	...	2	1	...	...	...	...	...	...	5	13
...	...	...	...	...	1	1	1	...	...	1	1	...	1	1	...	10	14
3	5	3	3	4	3	5	8	4	4	9	4	3	6	2	...	93	15
3	3	7	7	5	4	13	8	13	8	10	11	6	15	...	3	151	16
3	2	1	...	3	1	...	...	3	1	3	2	...	...	1	...	30	17
4	2	3	1	1	6	7	7	3	2	10	5	7	3	2	...	89	18
1	...	2	9	3	3	2	2	3	1	4	4	3	3	...	1	49	19
1	...	...	1	...	...	1	1	...	1	3	1	...	...	...	1	12	20
2	...	...	...	...	...	1	3	1	1	...	...	1	...	...	...	10	21
...	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	4	22
1	...	...	...	...	1	...	...	1	...	1	...	1	2	1	...	11	23
1	...	...	...	1	...	...	...	1	...	...	...	...	...	...	...	4	24
...	1	3	1	...	1	1	...	1	1	1	5	2	1	2	...	25	25
...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	26
...	1	...	...	...	...	...	2	...	...	...	...	...	1	...	...	4	27
...	...	3	1	2	...	4	2	5	5	4	...	4	5	...	2	50	28
...	...	...	...	...	...	...	...	1	...	2	...	...	1	...	...	7	29
2	...	2	1	1	1	2	2	...	...	2	3	4	1	...	...	26	30
7	9	7	8	15	8	14	18	5	13	12	14	12	17	4	1	210	31
...	...	...	...	...	...	2	...	...	...	1	...	...	...	1	...	4	32
36	32	41	40	45	38	75	68	64	58	75	63	60	79	17	12	1058	

ISOLATION HOSPITALS.

Previous reports have contained full particulars as to the function of isolation hospitals and as to the accommodation available in various districts of the County.

In some districts the facilities provided for the isolation and treatment of certain forms of infectious and notifiable diseases are still inadequate. The old restricted view that accommodation in the isolation hospital should be available for cases of scarlet fever and diphtheria only is still held and no consideration is given to the fact that since the war certain acute diseases involving the central nervous system, and for which isolation and hospital treatment are necessary, have become more prevalent. Even in the cases of enteric fever and erysipelas, it is difficult in some districts to obtain admission to isolation hospitals. The isolation hospital, if it is adequately to meet the requirements of this district which it serves, must be so arranged and administered as to be in a position to admit without delay any acute specific disease of an infectious character for which isolation and treatment in hospital are considered necessary.

SMALLPOX ISOLATION HOSPITAL.

In most of the districts in the County some provision is now made for the isolation of cases of smallpox, although the standard varies considerably. The accommodation which exists for the isolation of cases of smallpox in the various districts of the County is under review from time to time. Except for one mild case of the disease in January, the county has been free from smallpox, but the persistence with which the disease continues in some parts of England emphasizes the necessity of having everything ready to meet any emergency which might arise.

By an order under Section 2 of "The Public Health (Prevention and Treatment of Diseases) Act, 1913", your Council has provided a smallpox hospital at Cheshunt, with accommodation for ten patients, for the Barnet Urban, Cheshunt Urban, East Barnet Valley Urban, and Barnet Rural Districts. The hospital is partly furnished and is occupied by a caretaker.

PROVISION OF ANTITOXIN.

By the Diphtheria Antitoxin Order, 1910, issued by the Local Government Board in August, 1910, local authorities are empowered to provide, directly or by contract, a temporary supply of antitoxin and of medical assistance for its use, subject

to the advice of the Medical Officer of Health. Suitable arrangements for the supply of antitoxin are made in about half of thirty-four districts. Some difficulty no doubt arises in the rural districts, but this could be overcome if the uniform method were adopted of medical practitioners supplying the antitoxin in necessitous cases and having the cost refunded by the Councils. Every facility should be offered for the immediate use of antitoxin even in suspected cases.

BACTERIOLOGICAL EXAMINATION.

Arrangements are made by the County Council (with the Counties Public Health Laboratories, London) for the free examination of sputum for tubercle bacilli and for the examination of cerebro-spinal fluid and swabs taken from suspected or doubtful cases of cerebro-spinal fever. In most districts arrangements are made by the District Councils for the examination of swabs for the diphtheria bacillus. The swabbing of all diphtheria contacts followed by an antiseptic toilet of the nose and throat on the lines adopted in the case of carriers of the meningococcus, if systematically carried out, would prove of value; for this purpose a solution of 1-4,000 potassium permanganate in normal saline may be used. The early swabbing of contacts should be a routine practice.

DISINFECTION.

Disinfection aims at destroying the organisms which give rise to disease, and this can best be secured by means of steam. Steam disinfection is carried out either by means of a portable disinfector or by utilizing the large disinfectors at the Isolation Hospitals. In many districts the necessity for a suitable disinfecting apparatus is urgently felt, especially to secure the disinfecting of bedclothes in the case of infectious diseases. With regard to house disinfection, cleanliness, fresh air, and sunlight are valuable natural means of securing the destruction of micro-organisms.

Steps are taken to keep in close touch with the local authorities in connection with the disinfection of premises occupied by open cases of tuberculosis. After the admission of such cases to hospital or sanatorium, or immediately it is known that death of the patient has occurred in his home, a communication is sent to the district Medical Officer of Health requesting that disinfection should be carried out.

MATERNITY AND CHILD WELFARE.

The work carried out under "The Maternity and Child Welfare Act, 1918," and "The Notification of Births Acts, 1907 and 1915," has continued during the year without much alteration. It is satisfactory to be able to report a marked fall in the infant mortality during the year, which was 42 compared with 55·2 last year, this being the lowest infant mortality which has so far been recorded in the county, the number of maternal deaths from puerperal sepsis has decreased, being 4, compared with 12 the previous year, 3 of which occurred in urban districts. The number of deaths due to other accidents and diseases of pregnancy and parturition was 13, the same as last year.

The scheme of Maternity and Child Welfare in the County includes both official and voluntary effort, and may be briefly summarized as follows:—(1) Thirteen County Council Maternity and Child Welfare Centres, at which consultations are held, infants are weighed, and instruction and advice are given to nursing and expectant mothers; in addition, also, a considerable amount of voluntary work is undertaken in various directions by ladies who are interested in the work of the Centres; (2) Thirteen Voluntary Maternity and Child Welfare Centres; (3) Eleven Weighing Centres; (4) Provision of maternity beds in four districts in the County, namely Hertford, Hitchin, Hemel Hempstead, and Watford; (5) Convalescent Home at St. Leonards; (6) attendance at orthopædic and massage clinics and dental clinics; (7) the provision of hospital treatment in exceptional cases of infantile diarrhoea and ophthalmia neonatorum; (8) health visiting; and (9) the granting of milk free or at half cost to necessitous mothers and young children on a medical certificate.

Special reference requires to be made to the excellent work in connection with the care of mothers and children which is being carried out at the Voluntary Maternity and Child Welfare Centres and the Weighing Centres. These Centres are linked up to your Council scheme, and they are the means of supplementing the work of the County Council Centres. As they are established in the smaller urban and some rural districts, they meet the requirements of a population which would not otherwise have been provided for. The Weighing Centres, at which the Health Visitor attends and where she weighs the infants and gives health talks and advice to the mothers, have been found to serve a very useful purpose, especially in rural districts. They help to centralize the work of the Health Visitor, and by this means lessens the amount of time which would be occupied in getting

TABLE GIVING PARTICULARS OF ATTENDANCES AT VOLUNTARY MATERNITY AND CHILD WELFARE CENTRES DURING 1923.

Centres.	No. of Mothers Attending.	No. of Children Attending.	Total Children's Attendances.	Average Attendance of Children.	Total Attendances of Expectant Mothers.	Average Attendance of Expectant Mothers.	No. of Infant Consultations.	No. of Mothers' Consultations.	No. of Ante-Natal Consultations.	No. of Talks given at Centre.	No. of Times Centre open in 1923.
Apsley End ...	71	78	553	19.0	...	...	152	...	...	14	29
Baldock ...	61	91	778	19.4	8	1	19	...	...	9	40
Chorleywood ...	25	41	339	14.7	...	...	204	...	...	20	23
Harpenden ...	65	80	399	18.1	7	1	61	11	7	6	22
Hoddesdon ...	101	148	1837	36.0	...	...	343	...	14	28	51
Knebworth ...	55	87	1195	24.3	146	14	105	32	24	24	49
Kings Langley	47	53	1193	33.1	154	15	185	185	...	18	36
Langleybury ...	14	18	340	17.0	10	2	144	...	...	20	20
Rickmansworth	46	50	144	16	5	1	...	...	...	...	9
Royston ...	46	51	336	14	...	...	12	12	...	3	24
Welwyn ...	83	96	756	16.8	9	1	21	21	9	6	45
Welwyn Garden City	75	106	553	10.8	8	1	51	...	6	6	51

TABLE GIVING PARTICULARS OF ATTENDANCES AT VOLUNTARY WEIGHING CENTRES DURING 1923.

Centres.	No. of Mothers Attending.	No. of Children Attending.	Total Children's Attendances.	Average Attendance of Children.	No. of Talks given at Centre.	No. of Times Centre open in 1923.
Bushey	32	38	1048	22	46	46
Croxley Green	25	25	276	23	12	12
High Cross	22	24	102	8.5	6	12
Kings Walden	49	41	1886	41	46	46
North Mimms	32	45	540	45	19	12
Offley, Lilley, and Cockernhoe ...	25	29	103	4.1	...	25
Potten End	15	26	90	12.8	1	7
Redbourn	38	38	303	33.6	...	9
Ware	5	5	8	2.4	...	3
Weston	24	26	118	11.8	2	10

about in order to carry out the work of health visiting. These centres are linked up to the County scheme through the County Health Visitor, who supervises the work of the health visitors, midwives, and nurses in the County, and who keeps a record of the work carried out at these various voluntary centres during the year. Particulars of this work is given in tables appearing on page 33.

Accommodation for maternity cases is provided at the Maternity Home, Watford (12 beds), West Herts Hospital (5 beds), the Maples, Hitchin (4 beds), and the County Hospital, Hertford. During the year 196 maternity cases were admitted to the Watford home, 56 maternity cases were admitted to the West Herts Hospital, 2 were admitted to the County Hospital, Hertford, and 58 were admitted to the maternity beds at the Maples, Hitchin.

In the following report Dr. Swatman gives particulars of the work carried out at the County Council Centres during the year.

DR. SWATMAN'S REPORT.

The Herts County Council Maternity and Child Welfare Centres have been held weekly during the year at Berkhamstead and Tring (Dr. Sparrow), Barnet, Bishop's Stortford, Cheshunt, East Barnet, Hatfield, Hemel Hempstead, Hertford, Hitchin, Letchworth, St. Albans, and Stevenage. The work has been carried out on the same lines as in previous years, medical consultations being held twice a month at each centre except at East Barnet, where they are held once a month as during the latter part of 1922.

Below are given the figures for the Centres as a whole for 1923 :—

Number of times the Centres were open, 615.

Number on registers of :—

(a) Expectant Mothers, 200.

(b) Children under 5 years old, 2,567.

Average attendance of children each time the Centre was open, 42.

Number of deaths among the children who attended Centres during the year, 13.

Number of children who had orthopædic treatment, 17.

Number who had dental treatment :—

- (a) Of Mothers, 4.
- (b) Of Children, 23.

Number of defects and ailments among the children (other than bronchitis, malnutrition, digestive troubles, and those directly due to wrong feeding), as tabulated, 455.

Number of prescriptions (for cod-liver oil, malt, or iron) given free or at half cost, 1,316.

The percentage of breast-feeding for infants up to 6 months old for the Centres as a whole, was :—

- (1) Entirely breast-fed, 66 per cent.
- (2) Partly breast-fed, 20 per cent.
- (3) Entirely bottle-fed, 14 per cent.

In the accompanying tables the figures are set out for each Centre separately.

From these it will be seen that from various causes the Centres have been open rather less frequently than in 1922 (615 times, instead of 627). This is accounted for by the fact that three of the Centres—Bishop's Stortford, Stevenage, and Hertford—had to be closed for epidemics of measles and whooping cough, and others were closed for climatic conditions (the thunder-storm and the heat-wave).

Probably owing to these closures there has been a very slight lessening (18) of the number of children on the registers, though there has been no very big drop in this at any of the Centres, and at Bishop's Stortford, Hatfield, Hemel Hempstead, Letchworth, and Tring there has been a slight increase.

There has been an increased number of expectant mothers on the registers as a whole, the figures being especially augmented at Berkhamstead, Cheshunt, Hatfield, Hitchin, and Letchworth.

In spite of various drawbacks, the total number of attendances of the children has very greatly increased, the actual figures being 25,704, exceeding those of the previous year by 1,831. The children have come with much greater regularity, so that the average attendance each time the Centre was open was 42 (against 38 in 1922).

The number of deaths among the children (13) was the same as in the previous year. The causes of death were : (a) Tubercular meningitis (2), (b) measles (1), (c) pneumonia or broncho-pneumonia (5), (d) meningitis after scarlet fever (2), (e) congenital malformation of the bowels and convulsions (1), (f) marasmus

TABLE SHOWING PARTICULARS OF ATTENDANCES, ETC., AT THE VARIOUS CENTRES IN 1923.

Year when first opened.	Name of Centre.	No. of times open in 1923.	CHILDREN UNDER 5 YEARS OLD.							EXPECTANT MOTHERS.			NURSING MOTHERS.		
			No. of children on the books in 1923.	No. of attendances of children in 1923.	Average attendance of children each time the Centre was open in 1923.	No. of children in 1923.	No. of children who had orthopaedic treatment in 1923.	No. of children who had dental treatment in 1923.	No. of defects as tabulated in 1923.	No. of expectant mothers on books in 1923.	No. of consultations of expectant mothers with doctor in 1923.	Percentage of breast-feeding. (Up to six months).			
										Entirely breast-fed. 1923.	Partly breast-fed. 1923.	Entirely bottle-fed. 1923.			
1917	Barnet	48	204	2113	44	...	2	...	18	4	5	70.6	12	17.4	
1918	Berkhampstead	43	192	1256	30	3	2	...	51	35	38	69	19	12	
1916	Bishop's Stortford	46	195	2899	63	...	1	...	40	11	13	78	10	12	
1916	Cheshunt	49	221	2595	54	...	...	5 ch. 1 m.	42	22	44	62	25	13
1916	East Barnet	43	108	822	19	1	...	...	18	3	3	43.5	17.5	39
1918	Hatfield	49	141	1686	34.4	...	1	1	32	12	22	73	16	10	
1916	Hemel Hempstead	51	180	1478	28.5	...	...	...	40	12	21	79	15	6
1916	Hertford	47	131	611	13	2	3	...	37	11	21	70	16	14	
1918	Hitchin	47	246	2182	46.5	1	5	7 ch. 1 m.	27	27	37	69	19	12	
1919	Letchworth	50	298	4400	88	...	...	7	35	24	43	58.2	33.3	8.5
1916	St. Albans	51	343	2246	44	5	2	4	53	9	14	56	26	18	
1915	Stevenage	44	134	1264	29	1	1	9 ch. 2 m.	31	7	10	58.5	29	12.5	
1918	Tring	47	182	2112	45	...	...	...	31	23	29	79.5	11	9.5
		615	2567	25704	42	13	17	33 ch. 4 m.	455	200	310	66	20	14	

Prescriptions (for cod liver oil, malt, or iron): Number given in 1922 = 959. Number given in 1923 = 1316.

(premature twin) (1), (g) bronchitis (1). There were no deaths from diarrhoea.

More children have been referred to the orthopædic clinic. The majority of these needed wedging of boots or shoes or splinting for some weakness of the leg or ankle, and did not necessarily have massage treatment.

There was a decided increase in the number of children and mothers who have had dental treatment. This would have been much greater if there had been facilities for obtaining this treatment at more of the Centres. At present more than half the Centres are so far from any H.C.C. dental clinic that it is impossible to get any help in this way for the expectant or nursing mothers or the toddlers. There is no doubt that the health of many of these could be greatly benefited by such treatment.

There has been a lessening in the total number of defects and ailments (as tabulated) among the children, especially as regards the number of cases of rickets (27, against 39 in 1922), and umbilical hernia (28, as against 53 in 1922). Dr. Sparrow especially mentions the increased number of cases of enlarged glands at Berkhamstead and Tring. There has been no diminution of cases of otorrhœa, and there has been a considerable increase in the number of cases of strabismus. Dr. Sparrow reports a case of molluscum contagiosum at Tring, "not very infectious, and easily controlled by treatment in the outpatient department of the West Herts Hospital."

A much larger number of prescriptions for cod-liver oil, malt, or iron have been given during the year, and the majority of these have been given free of cost to the patient, as so many were suffering from the lack of employment and the shortage of money. 1923 has not been a good year for either the children or the mothers, especially the latter, who have suffered much from depression and lack of energy. There have been many cases of colds, coughs, chills, and enteritis among the children, traceable to the cold, wet year. As a rule it is found that the attendances at the Centres are better in the dull rather cold weather, but 1923 was characterized by very wet afternoons. During the first ten months of the year, with only three or four exceptions, every Wednesday afternoon was wet, having such heavy rain that the mothers could not bring the babies out. The effect of this is noticeable on the attendances at the two Centres which are held on Wednesdays, i.e. Hertford and St. Albans.

With regard to the premises in which the Centres are held, some are very much more suitable and commodious than others, but the popularity of a Centre depends far more upon its location

DEFECTS AND AILMENTS (OTHER THAN THOSE DUE TO WRONG FEEDING, BRONCHITIS, AND DIGESTIVE TROUBLES) OF CHILDREN WHO ATTENDED THE CENTRES IN 1923.

	NAME OF CENTRE.												TOTAL.	
	Barnet.	Berkhampstead.	Bishop's Stortford.	Cheshunt.	E. Barnet.	Hatfield.	Hertford.	Hemel Hempstead.	Mitchin.	Leitchworth.	St. Albans.	Stevenage.		Tring.
Anæmia	2	...	6	4	2	1	3	4	3	3	3	...	...	31
Adenoids	2	2	1	1	...	1	...	2	...	1	2	12
Asthma	1	...	...	1	...	...	2
Abscess (glandular)	1	...	...	...	1	...	2
Blepharitis	1	2	1	3	1	2	3	2	2	...	...	17
Boils	1	...	...	...	1	...	...	...	...	...	2
Congenital Coloboma	2	...	...	...	...	...	...	...	...	...	...	2
Congenital Syphilis	1	...	...	...	...	...	...	1	1	...	...	...	3
Conjunctivitis	1	...	...	...	1	...	1	1	...	3	...	...	7
Cyanosis	1	1	...	...	...	...	1	...	...	3
Cyst	1	1	...	...	...	...	...	...	...	...	...	...	2
Chorea	1	...	...	1	...	...	...	...	...	2
Dermatitis and Urticaria	2	1	3	...	2	...	...	...	1	2	...	1	2	14
Enuresis...	1	...	1
Eczema and Impetigo	7	3	4	2	2	5	3	1	2	2	4	10	45
Fracture	1	...	...	...	...	...	...	...	...	1
Fits and Convulsions	3	...	...	1	...	1	...	...	1	...	...	6
Glands (enlarged)	1	8	...	2	3	4	2	1	1	2	2	1	6	33
Herpes	1	...	...	...	...	...	...	...	1
Hernia—inguinal	1	...	1	...	...	1	...	1	1	...	1	...	6
Hernia—umbilical	1	...	2	3	...	...	6	...	2	3	8	3	...	28
Hæmatoma	1	1	2
Hæmorrhoids	1	...	...	...	...	...	...	1	...	...	...	2
Incontinence (nocturnal)	...	1	1	...	...	...	1	...	...	1	...	...	...	4
Infantile paralysis	1	...	...	...	...	...	...	...	...	...	...	...	...	1
Jaundice	1	...	...	...	...	...	...	1	2
Knock-knee	1	...	...	...	1	...	...	2
Keralitis	1	...	...	...	...	...	...	...	1
Laryngitis	1	...	...	...	...	...	...	...	...	...	...	...	1
Mentally defective	2	...	...	...	...	...	...	...	...	1	3
Lipoma	1	...	...	...	...	...	...	...	...	...	...	1	1
Molluscum Contagiosum	1	1
Nerves	1	...	...	...	1	1	...	1	...	...	...	4
Otitis Media	1	...	...	...	...	...	...	...	...	...	...	...	1
Otorrhœa	1	4	...	1	...	3	3	2	2	2	2	2	1	23
Ophthalmia Neonatorum	1	...	...	...	1	...	...	2
Phimosis	4	9	4	2	...	2	3	4	4	5	8	4	1	50
Pemphigus	1	...	...	...	...	...	...	1	...	...	...	2
Prolapsus recti	2	...	...	...	...	...	...	...	...	...	...	...	2
Rhinitis	1	...	...	...	...	...	...	...	...	...	...	...	1
Rickets	3	4	...	2	...	2	2	2	3	2	5	2	...	27
Seborrhœa	2	...	...	...	...	...	...	...	...	...	...	...	2
Scabies	1	...	...	...	...	...	...	...	...	...	...	...	1
Shingles	1	...	...	...	1
Strabismus	1	1	4	6	3	2	3	2	1	...	2	1	...	26
Spinal Curvature	1	...	...	...	...	...	...	...	...	...	...	1
Septic Navel	1	1
Tonsils (enlarged)	2	3	...	1	1	3	1	...	...	...	...	11
Tongue-tie	1	...	...	...	...	...	...	...	...	1	1	...	3
Talipes	2	1	...	...	2	2	...	...	6
Tuberculosis	2	1	...	...	1	...	...	...	4
Undescended testicle	1	1	...	1	...	...	...	...	...	...	2	5
Vaginitis	1	1
Vermes	2	2	1	4	...	3	3	2	2	3	3	2	...	27
	18	51	40	42	18	32	40	37	27	35	53	31	31	455

than upon the type of building. Thus at St. Albans, where excellent accommodation is provided, the numbers attending are still much below what they were when the Centre was held in much less suitable premises, but in a more central spot, and of the Berkhamstead Centre Dr. Sparrow reports: "The removal to the more commodious rooms at the station has evidently militated against the attendance, as they are less central."

Feeding of infants up to 6 months old.—Whenever it is possible mothers are encouraged to breast-feed their infants either wholly or partially. In 1923 there has been a slight increase in the number of entirely bottle-fed infants at Barnet, Berkhamstead, Bishop's Stortford, East Barnet (much increased), Hertford, and Tring. Even with this increase, except at East Barnet, at no Centre does the percentage of entirely bottle-fed infants exceed 17·4 per cent. Hemel Hempstead has the lowest percentage (6) for this, and Letchworth ranks next, with 8 per cent.

There has been a great decrease in the number of entirely bottle-fed infants at Cheshunt, Hatfield, Hemel Hempstead, St. Albans, and Tring.

Many thanks are due to the voluntary workers for all the help they have given at the Centres, especially in regard to the arrangements for the supply and sale of dried milk, Virol, model garments, and tea for the mothers, besides assistance with the secretarial work. At each Centre there is some difference in the voluntary work, dependent upon the amount of the funds which the voluntary workers have at their disposal, and which they obtain from rummage sales, donations, or grants from local or other charitable sources.

These have been expended in various ways for the benefit of the mothers or children, e.g. :—

- (1) Expenses of journey to the Convalescent Home.
- (2) Expenses of sojourn in the Convalescent Home.
- (3) Grants of milk to poor families, or during the fortnight after confinement.
- (4) Home helps (weekly charwoman) for expectant and recently confined mothers.

(N.B.—Owing to the difficulty of finding a "home help" this grant has had to be discontinued during the past year.)

- (5) Providing or helping to provide dental treatment for mothers.

(6) Providing a weighing centre in a poorer and more central district where the Centre is less conveniently situated.

(7) Providing a special treat or " Baby Day " celebration for the mothers and children.

The work at all the Centres has been carried on very steadily and equably throughout the year. Although it is more monotonous for the workers, it is found that better work is done and the Centre is on a firmer footing when the routine work is strictly adhered to, and special treats or teas are very rare occurrences.

On the whole, the work of the Centres during the year has been very satisfactory, and they are much nearer the same standard than they have been in previous years.

HEALTH VISITORS, NURSES, AND MIDWIVES.

The work of the health visitors, nurses, and midwives in connexion with the public health of the County increases from year to year in volume and importance. At the present time there are four whole-time County Council nurses and one subsidized midwife, the services in the remaining districts being provided by nurses of the County Nursing Association. The character of the excellent work which is being carried out by the nurses in the County may be estimated from a survey of their duties which include: Midwifery service which is practically complete for the County; health visiting, including the supervision of children up to five, attendance at maternity and child welfare and weighing centres, school nursing and attendance at school clinics, tuberculosis nursing and attendance at tuberculosis clinics, visiting and reporting on the homes of tuberculous patients, visiting and reporting on mental defectives in their homes, and certain duties in connexion with blind persons. In addition, the nurses do much valuable work in connexion with sick nursing.

The standard of work of the nurses in the various districts in the county has been well maintained during the year under the direction and supervision of Miss Harrington, the County Health Visitor, Inspector of Midwives, and County Superintendent of Nurses, who gives particulars of the work of the health visitors, nurses, and midwives during the year in the following report:—

ANNUAL REPORT OF THE INSPECTOR OF MID-
WIVES AND COUNTY HEALTH VISITOR FOR THE
YEAR 1923.

NOTIFICATION OF BIRTHS ACT, 1907-15.

During the year 1923 the Health Visiting work has been carried out by 102 health visitors, including 4 whole-time County Council nurses and 1 subsidized midwife.

3,858 of the 4,940 babies born alive during 1922 (exclusive of Watford Urban District) have been visited by the health visitors, a percentage of 78·0 per cent.

Of the babies visited, 71 died before reaching the age of one year, showing a mortality of 18·4 per 1,000; 412 babies left the county before completing their first year. In all cases when the address could be obtained it was forwarded to the local Health Authority.

From the health visitors' returns it is shown that 2,604 or 67·4 per cent. of the infants were breast-fed, 880 or 22·8 per cent. were partly breast-fed, and 364 or 9·4 per cent. were bottle-fed, 988 or 25·6 per cent. used dummies, 1,310 or 33·9 per cent. were vaccinated, 2,948 or 75·4 per cent. were up to the average weight.

The work of the Health Visitors is shown in Table 15.

PROVISION AND TRAINING OF MIDWIVES.

Ten Nurse Midwives were trained at the Watford Training Home during 1923, and the County Council grant, amounting to £500, has been given to the County Nursing Association.

STATEMENT OF WORK AS INSPECTOR OF MIDWIVES AND COUNTY
HEALTH VISITOR FOR THE YEAR 1923.

Inspection of Midwives	605
Visits to Health Visitor, Nurses, and Doctors	371
Attendance at Committee Meetings	52
Health Visitors to Report	4
Attendance at Infant Welfare Centres, County Council	24
Attendance at Infant Welfare Centres, Voluntary	22
Talks to Mothers at Infant Welfare Centres and Women's Institutes	49
Letters, Circulars, etc., under Midwifery Act and Notification of Births Act	7,449

STATISTICS OF MIDWIVES PRACTISING IN THE COUNTY.

There were 147 midwives practising in the County on 1st January, 1924, 142 trained and 5 untrained. In addition, there were 14 temporary midwives and 57 who have left or retired, making a total of 218 practising in 1923.

Of those in practice on 1st January, 1924, 25 are in private practice and 103 work for Nursing Associations; 7 are employed by the County Council, and 12 in Institutions.

In 1923 the total number of cases was 5,818, excluding stillbirths. The midwives attended 3,925 cases. Of these 1,240 were with a doctor engaged, and included 43, or 3 per cent. stillbirths; 2,685 cases were attended by the midwives alone, and included 39 or 1 per cent. stillbirths.

The number of infants who died before the tenth day was 33 in midwives' cases born alive, being a mortality of 11 per 1,000. In addition to these cases the midwives attended 74 abortions with a doctor.

The number of ante-natal visits paid by the midwives was 10,680.

MATERNAL MORTALITY.

In the 2,685 cases attended by the midwives there were 6 maternal deaths.

MEDICAL AID AND OTHER NOTIFICATIONS RECEIVED.

The number of medical aid notices was 514 or 19.1 per cent. Five babies died, no doctor having seen them.

TABLE 14.—MIDWIVES AND THEIR WORK FOR THE YEAR 1923.

DISTRICTS.	POPULATION.	TOTAL BIRTHS.		BIRTHS ATTENDED BY MIDWIVES.		INFANT DEATHS.			NOTIFICATIONS.				MATERNAL DEATHS FOR WHOLE COUNTY. MIDWIFE.	NUMBER OF MIDWIVES.				
		Legitimate.	Illegitimate.	Midwife.	With Doctor.	Under one Year.	Rate per 1,000.	Midwives' cases under Ten Days.	Medical Aid.		Stillbirths.			Private.	Nursing Association.	County Council.	Institution.	Total.
									Mother.	Child.	With Doctor.	Midwife.						
Urban.																		
Baldock	2,620	61	2	44	13	5	79'3	1	6	5	1	1	1	...	1	1	...	2
Barnet	11,900	167	7	55	19	9	...	1	12	2	...	1	...	2	...	...	...	2
Berkhampstead	7,297	117	3	89	8	5	51'7 41'6	1	12	5	...	1	...	...	4	...	1	5
Bp. Stortford...	8,752	136	3	63	21	7	50'3	...	2	...	...	...	1	...	3	...	1	4
Bushey	8,092	123	5	40	18	3	23'4	2	6	1	1	...	...	1	2	...	...	3
Cheshunt	13,900	266	11	115	70	8	28'8	1	22	7	1	1	...	1	4	...	...	5
Chorleywood...	2,391	22	1	6	5	...	...	...	1	1	...	...	...	...	1	...	...	1
E. Barnet Valley	13,780	217	10	76	27	7	30'8	...	2	...	1	2	...	2	2	...	...	4
Harpenden	6,625	89	...	33	23	5	56'1	...	8	2	...	3	...	...	3	...	...	3
H. Hempstead	13,930	214	6	58	42	8	36'3	...	5	3	...	1	...	2	3	...	...	5
Hertford	10,870	169	6	100	41	5	28'5	2	14	4	3	2	...	1	3	...	...	4
Hitchin	13,470	206	7	109	80	9	42'2	...	22	8	3	5	...	1	...	4	1	6
Hoddesdon	5,441	88	4	65	14	6	65'2	2	15	2	...	3	...	1	2	...	...	3
Letchworth	10,990	220	9	73	89	8	34'9	1	12	2	4	2	1	3	...	1	...	4
Rickmansworth	7,700	145	6	61	55	5	33'1	2	4	4	1	...	...	...	2	...	...	2
Royston	3,797	46	3	30	17	4	81'6	...	7	3	...	...	...	...	1	...	...	1
St. Albans	25,850	379	22	167	69	18	44'8	3	30	5	2	2	...	1	4	...	1	6
Sawbridgeworth	2,345	35	1	30	3	...	...	...	4	...	...	...	...	...	2	...	...	2
Stevenage	5,087	82	6	27	25	4	45'4	...	3	1	1	1	...	...	2	...	...	2
Tring	4,263	82	4	23	15	4	46'5	...	4	1	1	...	...	...	...	1	...	1
Ware	6,000	114	1	68	26	5	43'4	...	8	4	1	1	...	...	3	...	1	4
Watford	47,100	835	31	500	196	41	47'3	6	64	16	7	2	1	2	7	...	...	9
Total for U.D. ...	232,220	3,813	148	1,832	876	166	41'9	22	263	76	27	28	4	17	49	7	5	78
Rural.																		
Ashwell	3,576	55	4	46	11	6	101'6	1	15	2	2	1	...	...	3	...	...	3
Barnet	4,647	87	3	36	15	...	...	...	7	...	1	1	...	1	2	...	...	3
Berkhampstead	4,757	84	7	31	14	8	87'9	...	3	...	...	1	...	1	4	...	...	5
Buntingford	4,913	85	5	38	8	6	66'6	...	12	2	2	2	...	...	2	...	...	2
Hadham	5,593	87	4	58	28	2	21'9	...	12	2	3	1	...	1	3	...	...	4
Hatfield	8,517	164	7	34	52	...	...	...	6	2	1	...	...	...	6	...	...	6
H. Hempstead	7,026	134	5	59	37	8	57'5	1	12	1	...	...	...	...	6	...	...	6
Hertford... ..	7,223	123	7	70	20	7	53'8	1	9	5	1	1	...	...	5	...	...	5
Hitchin... ..	13,260	257	8	124	58	12	45'2	3	28	5	2	2	1	...	8	...	...	8
St. Albans	15,010	234	13	138	40	11	44'5	2	16	6	2	...	...	1	5	...	...	6
Ware	11,310	193	3	151	36	6	29'8	1	18	3	1	2	...	1	9	...	...	10
Watford	16,280	198	11	45	33	11	52'6	1	3	1	1	...	1	...	6	...	...	6
Welwyn	3,578	73	1	23	12	3	40'5	1	4	1	...	...	...	...	1	...	...	1
Total for R.D. ...	105,600	1,779	78	853	364	80	43'0	11	145	30	16	11	2	5	60	...	...	65
Total for U.D. ...	232,200	3,813	148	1,832	876	166	41'9	22	263	76	27	28	4	17	49	7	5	78
Total for County	337,800	5,592	226	2,685	1,240	246	42'2	33	408	106	43	39	6	22	109	7	5	143

TABLE 15.—TABLE OF HEALTH VISITORS' WORK, carried out under "The Notification of Births Act, 1907-1915".

District and Health Visitor.	Parishes in each District.	Population covered.	No. of new Homes visited.	No. of Babies under supervision, Dec. 31, 1923.	Health visits to Mothers and Babies.	Health Visitors' Attendances at Maternity Centres.	No. of cases as Midwife and Maternity Nurse and Visits.
No. 1. Miss Milner	Barnet, Arkeley, Totteridge, Elstree, Cuffley, Little Heath, and Northaw	15,616	183	166	1,253	48	—
No. 2. Miss Shore	Tring Urban District, Aldbury, and Wigginton	5,773	72	62	621	44	38 cases, 835 visits.
No. 3. Miss Halsall	Letchworth and Willian	10,509	136	191	1,398	49	—
No. 4. Miss Williams	Hitchin and Walsworth	13,525	179	198	2,172	47	—
Midwife Nurse Read	Ditto	—	—	—	—	—	121 cases, 1,601 visits.
Subsidized Midwife Nurse Thomas	Baldock, Bygrave, Walington, and Radwell	2,872	66	77	622	46	56 cases, 980 visits.
Nurses working under the County Nursing Association.		228,617	2,924	3,258	31,621	1,381	
		276,912	3,560	3,952	37,687	1,615	

TABLE 16.

BIRTHS NOTIFIED UNDER "THE NOTIFICATION OF BIRTHS ACT, 1907".

From 1st January to 31st December, 1922.

DISTRICT.	Births.		Cases attended.		Stillborn.		Premature.	Infants visited by Health Visitors.			Death rate per 1,000 on infants under 1 year for the County excluding Watford.	No. of Health Visitors.
	Notified.	Returned by Registrar.	By Doctor.	By Midwife.	Doctors' Cases.	Midwives' Cases.		Visited.	Died under 1 year.	Death-rate per 1,000 visited.		
Urban.												
1. Baldock ...	47	2	17	32	—	—	4	44	2	45·4	66·6	1
2. Barnet ...	178	46	152	72	9	—	13	110	1	9·0	45·1	1
3. Berkhamstead ...	81	16	36	61	1	1	3	67	3	44·7	20·2	4
4. Bishop's Stortford ...	126	7	67	66	3	1	3	112	2	17·8	47·2	3
5. Bushey ...	108	15	85	38	1	—	2	92	—	—	100·9	2
6. Cheshunt ...	233	11	146	98	7	1	14	200	3	15·0	51·5	3
7. Chorleywood ...	19	18	34	3	—	—	1	26	1	38·4	25·0	1
8. E. Barnet Valley ...	162	47	105	104	3	3	9	146	2	13·6	69·3	1
9. Harpenden ...	94	6	64	36	4	—	7	65	2	30·7	51·0	3
10. Hemel Hempstead...	195	38	162	71	4	1	13	173	2	11·5	36·6	3
11. Hertford ...	174	22	77	119	3	2	11	160	4	25·0	76·9	4
12. Hitchin ...	244	4	126	122	11	5	11	183	8	43·7	76·6	1
13. Hoddesdon ...	87	12	35	64	—	1	6	87	2	22·9	40·4	2
14. Letchworth ...	207	8	112	103	2	—	12	178	4	22·4	82·0	1
15. Rickmansworth ...	120	32	85	67	3	—	8	116	3	25·8	60·0	2
16. Royston ...	70	1	44	27	—	—	1	53	1	18·8	43·4	1
17. St. Albans ...	334	96	248	182	11	3	22	293	3	10·2	73·9	2
18. Sawbridgeworth ...	45	6	25	26	1	1	—	45	—	—	19·2	2
19. Stevenage ...	92	2	52	42	1	1	5	76	1	13·1	30·6	2
20. Tring ...	87	1	73	15	2	—	2	60	—	—	22·9	1
21. Ware ...	119	17	48	88	4	2	11	116	3	25·8	47·6	3
Total for Urban Districts	2,822	407	1,793	1,436	70	22	158	2,402	47	19·5	57·6	43
Rural.												
1. Ashwell ...	51	1	19	33	1	1	4	43	1	23·2	98·0	3
2. Barnet ...	81	15	43	53	—	2	1	66	—	—	31·5	1
3. Berkhamstead ...	98	2	44	56	1	2	4	74	—	—	63·1	3
4. Buntingford ...	84	2	44	42	—	—	5	80	1	12·5	35·7	3
5. Hadham ...	76	2	24	54	2	2	—	68	—	—	11·4	4
6. Hatfield ...	101	50	134	17	3	—	4	125	—	—	46·1	6
7. Hemel Hempstead...	170	15	120	65	6	—	8	147	6	40·8	59·7	6
8. Hertford ...	118	7	58	67	5	2	10	113	2	17·6	61·9	5
9. Hitchin ...	253	6	130	129	7	4	9	216	3	13·8	50·9	8
10. St. Albans ...	188	46	84	150	3	2	4	186	5	26·8	46·3	5
11. Ware ...	166	10	46	130	1	3	4	149	2	13·4	38·0	8
12. Watford ...	168	38	160	46	5	—	11	147	2	13·5	60·4	6
13. Welwyn ...	46	—	14	32	1	1	—	42	2	47·6	48·3	1
Total for Rural Districts	1,600	194	920	874	35	19	64	1,456	24	16·4	49·3	59
Total for Urban Districts	2,822	407	1,793	1,436	70	22	158	2,402	47	19·5	57·6	43
Total for County	4,422	601	2,713	2,310	105	41	222	3,858	71	18·4	54·6	102

WATER SUPPLY.

The general source of water supply in the various Districts of the County and the defects still complained of have been fully described in previous Reports. The Urban Districts are, as a whole, well supplied and the standard of purity is high, although in some districts the total hardness reaches a high figure. No serious shortage such as was experienced in the latter part of 1921 and early part of 1922 occurred, as the year was a wet one. It is proposed in next year's annual report to include an up-to-date description of the water-supplies in the various districts of the county.

RIVERS POLLUTION.

River Lea.—Hertfordshire representative on the Lea Conservancy Board: H. N. G. Bushby, Esq.

The River Lea rises just north of Dunstable, in Bedfordshire, and flowing through Luton enters the County a mile north of Harpenden, cutting across eastwards north of Hatfield, through Hertford and Ware, to join the Stort Navigation close to Hoddesdon, where it turns south and forms the eastern border of Herts. It receives the Mimram, Beane, Rib, Ash, and Stort, and drains most of the northern third and eastern section of the County.

Pymmes Brook, in East Barnet Valley, on leaving the County, flows due eastward into the New River.

River Thames. Thames Conservancy Board.—Hertfordshire C.C. Representative: Right Hon. Sir Frederick Halsey, Bart.

The new Board exercises authority over the River above Teddington, with its tributaries, including the River Colne. The Colne rises to the west of Hatfield, flows south-west by Colney Heath, London Colney, and across the Midland Railway and the Watling Street at Colney Street. Passing to the south of Rickmansworth between Watford and Bushey Stations, it receives certain streams, notably in Hertfordshire the Ver, the Chess and the Gade. The Chess, from Chesham, in Bucks, passed just east of Chorleywood and Rickmansworth, and joins the Colne near the North-Western railway station of Rickmansworth. The Gade, from Gaddesden and Hemel Hempstead, receives the Bulbourne, from Northchurch and Berkhamstead, below Boxmoor, and flows along on the west side of the North-Western Railway by King's Langley through Cassiobury Park west of Watford, to join the Colne just east of Rickmansworth.

DISPOSAL OF HOUSE-REFUSE.

House-refuse.—The question of the dumping of house-refuse in Hertfordshire by authorities outside the County last year came up for consideration by the County Council, and representation regarding the necessity of preventing or controlling the dumping of outside refuse in the County was made to the Ministry of Health. The Ministry of Health suggested certain precautions to be carried out with regard to refuse dumps. The following rules are to be complied with : (1) the deposit to be made in layers ; (2) no layer to exceed 6 feet in depth ; (3) each layer to be covered on all surfaces exposed to the air with at least 9 inches of earth or other suitable substance except a portion which may be allowed uncovered during the formation of the layer ; (4) no layer to be left uncovered for more than 72 hours from the time of deposit ; (5) sufficient screens or other suitable apparatus to be provided where necessary to prevent any paper or other debris from being blown by the wind away from the place of deposit. Since these precautions were enforced the objectionable features of the refuse-dumps in Hertfordshire have been to a considerable extent mitigated.

A further improvement to be reported is that through the action of the Ministry of Health all railway wagons conveying refuse into the County are now covered, and this not only prevents the blowing about of dust and paper, but minimizes to a large extent the nuisance caused when such wagons are standing in a railway siding.

The House-fly.—In wet seasons the house-fly as a carrier of the germs of disease is a less serious menace than in hot, dry weather. In the home especially when overcrowding exists every effort should be made to keep the house-fly in check. Exposed food and uncleanness attract flies to the house, and attention should therefore be given to cleanliness and protection of food. Refuse should not be allowed to remain in the vicinity of the house except in proper receptacles, and as much of it as possible should be burned. There are many points relating to public health in which the assistance of the householder is of the greatest possible value and the suppression of the house-fly is one.

Sanitary Inspection.—In rural districts frequent routine inspection of cottage property from the point of view of structural and sanitary conditions is necessary. House-refuse is liable to be carelessly dealt with in rural districts. Such refuse as cannot be immediately disposed of should be burned so as to

prevent it remaining in heaps near the house and become an attraction for rats and flies.

Covered Dust-carts.—The removal of refuse should be carried out by means of covered dust-carts, so as to prevent the blowing about of dust and papers. There is much need for a better organized system of removing refuse in many districts. In many rural districts efforts to provide public scavenging should be made. By employing motor dust-carts, the difficulties of scavenging in many of the larger villages could be overcome. Refuse should not be allowed to collect in dumps, but should be destroyed in a destructor; several districts might unite for this purpose.

HOUSING AND TOWN PLANNING.

In some districts progress in the provision of houses by local authorities continues to be made, while in others it is more or less at a standstill at present, although new schemes are under consideration. In the annual report for 1920 a summary of what had been accomplished with regard to new construction was given, and it is proposed in next year's report to bring the report up to date.

TRADE PREMISES UNDER SUPERVISION.

Dairies, Cowsheds, and Milkshops.

Milk Supply.—The passing of the Milk and Dairies (Amendment) Act, 1922, is a step forward towards securing a pure milk supply. In pursuance of this Act, the Minister of Health has made an Order, the Milk (Special Designation) Order, 1922, prescribing the conditions subject to which licences may be granted. The authorities responsible for the issuing of licences under the above Order are as follows:—(1) The Minister of Health, licences to producers of Certified and Grade A (tuberculin-tested) milk. Producers holding above licences from the Minister of Health will also be entitled to sell milk produced under such licence as Grade A milk without further licence from Local Authority; (2) County Councils and County Borough Councils, licences issued to producers of Grade A milk; (3) Sanitary Authorities, licences issued to distributors of Certified milk, Grade A milk, including Grade A tuberculin-tested and Grade A Pasteurized milk, and of "Pasteurized" milk. No licence from a Sanitary Authority is necessary in the case of a licensed producer who distributes milk directly to the consumers.