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CITY OF LEEDS.

REPORT

ON THE

Health and Sanitary Administration

OF THE CITY

FOR THE YEAR 1925.

BY

J. JOHNSTONE JERVIS, M.D., D.P.H.,

Medical Officer of Health.

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PUBLIC HEALTH COMMITTEE.

LORD MAYOR (John Arnott).

Chairman : Alderman Dr. C. H. MOORHOUSE.

Alderman H. BROWN.	Councillor Dr. J. S. LOGAN.
" P. T. LEIGH.	" Dr. J. FRIEND.
" R. H. BLACKBURN.	" W. COTTAM.
" F. FOUNTAIN.	" Dr. C. J. G. EXLEY
" G. RATCLIFFE.	(<i>Deputy Chairman</i>).
Councillor Dr. A. A. ROBERTS	" W. O. FOX.

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Councillor W. COTTAM.	" W. O. FOX.

MATERNITY AND CHILD WELFARE.

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Mrs. CANDLER.	Mrs. AUSTYN BARRAN.

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<i>Representing Maternity and Child Welfare Committee.</i>	<i>Representing Education Committee.</i>
Councillor J. S. LOGAN.	Alderman D. B. FOSTER.
" W. O. FOX.	Councillor J. WORMALD.
" W. COTTAM.	Mrs. HOYLAND SMITH.
<i>Representing Leeds Day Nurseries Association :</i>	
Mrs. W. H. CLARKE.	
Mrs. G. HALBOT (<i>Chairman</i>).	
Mrs. A. E. IVES.	

PUBLIC HEALTH STAFF.

Medical Officer of Health and Chief Tuberculosis Officer.	J. JOHNSTONE JERVIS, M.D., Ch.B., D.P.H.
Assistant Medical Officer of Health ..	A. STUART HEBBLETHWAITE, M.C., M.B., Ch.B., D.P.H.
Assistant Medical Officer of Health for Maternity and Child Welfare and Medical Officer of Infants' Hospital	NORA F. SMITH, M.B., B.S., D.P.H.
Assistant Medical Officers for Maternity and Child Welfare.	MARION E. MACKENZIE, M.B., Ch.B. CECELIA SHISKIN, B.A., M.B., Ch.B. HARRY M. HOLT, M.B., Ch.B. MARIAN KNOWLES, M.B., Ch.B.
Consulting Clinical Tuberculosis Officer	H. de CARLE WOODCOCK, M.D., M.R.C.S., F.R.C.P. (Edin.), D.P.H.
Acting Chief Clinical Tuberculosis Officer and Assistant Medical Officer of Health	Z. P. FERNANDEZ, M.D., Ch.B., D.P.H.
Assistant Clinical Tuberculosis Officer	ALEXANDRENA M. MACLENNAN, M.D., Ch.B.
Medical Superintendents—	
Infectious Disease Hospital (Seacroft).	A. E. PEARSON, M.R.C.S., L.R.C.P.
Killingbeck Sanatorium	W. A. TODD, M.B., Ch.B.
Gateforth Sanatorium	H. M. HOLT, M.R.C.S., L.S.A., D.P.H.
Venereal Diseases Officer	J. P. BIBBY, M.B., Ch.B., M.R.C.P.
Assistant Medical Officer for Venereal Disease	D. J. MACKINNON, M.B., Ch.B.
Do. do. ..	DOROTHY PRIESTLEY, M.D., B.S.
City Bacteriologist	J. W. McLEOD, M.B., Ch.B.
Veterinary Assistant and Chief Meat Inspector	J. A. DIXON, M.R.C.V.S.
City Analyst	B. A. BURRELL, F.I.C., F.C.S.
Chief Sanitary Inspector	A. STUART HEBBLETHWAITE, M.C., M.B., Ch.B., D.P.H.
Divisional Sanitary Inspectors and Executive Rats Officers	E. STANDISH. G. F. MARSHALL.
Removal Officer	D. FERGUSON.
Principal Clerks—	
Finance	J. W. RIDSDALE.
Statistics	J. S. HOYLE.
Sanitary	A. SPARKS.
Infectious Diseases	H. O. PEAKE.

STAFF.

Special Inspectors including Smoke, Lodging-houses, Food and Drugs, Dairies, Meat and Housing	14
Laboratory Assistant	1
Sanitary Inspectors	18
Female Sanitary Inspectors	2
Health Visitors	21
Chief Woman Inspector	1
Tuberculosis Nurses	13
Clinic Nurses	14
Dispensers	8
Clerical Staff	28
Removal and Disinfecting Staff	17
City Hospital, Seacroft (2 Assistant Medical Officers, 1 Matron, 2 Assistant Matrons, 90 Nurses, 70 Female Servants, 46 Male Servants, including Engineers, Porters, etc.)	211
Killingbeck Sanatorium (1 Matron, 1 Assistant Matron, 1 Dispenser, 1 Clerk, 14 Porters, etc., 35 Nurses, 42 Maids)	95
Gateforth Sanatorium (1 Matron, 2 Assistant Nurses, 1 Cook, 7 Maids, 1 Working Foreman and 1 Handyman)	13
The Hollies Children's Sanatorium (1 Matron, 1 Sister, 4 Assistant Nurses, 1 Teacher, 1 Cook, 4 Maids)	12
Infants' Hospital, Wyther (1 Matron, 2 Sisters, 2 Staff Nurses, 14 Probationer Nurses, 1 Cook, 7 Maids)	27
Red House Day Nursery (1 Matron, 1 Staff Nurse, 6 Probationer Nurses, 3 Maids)	11
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CITY OF LEEDS.

To the Chairman and Members of the Health Committee.

Gentlemen,

In conformity with the wishes of the Ministry of Health my report for 1925, which I have pleasure in presenting to you, takes the form of a survey report and includes a review of the events of public health interest not only for 1925 but also for the four previous years.

The vital statistics for 1925 were on the whole favourable. For the fifth year in succession a fall in the birth-rate has to be recorded, the level reached 17.3 per 1,000 of the population, being the lowest in the history of the City with the exception of the two war years 1917 and 1918 when the rate was the same.

The death-rate was also low, 12.8 per 1,000 of the population, whilst the infant mortality rate, 91 per 1,000 births, was lower than in any previous year with the exception of 1923 when it was 89. During the five years 1921-1925, taking average figures, the reduction in the birth-rate amounts to 9.4 per cent., in the death rate to 4.5 per cent. and in the infant mortality rate to 6.2 per cent.

With the exception of an increased prevalence of epidemic diarrhoea during the summer and autumn quarters there were no serious epidemics of infectious disease in 1925. During the five years 1921-25 the most important outbreaks of infectious disease were measles in 1922, with 10,078 cases and 152 deaths and scarlet fever in 1922 with 2,722 cases and 33 deaths.

The number of notified cases of tuberculosis of all forms rose in 1925 to 1,869 as compared with 1,371 in the previous year and an average of 1,168 in the previous five years. The death-rate from this disease however fell from 1.40 in 1924 to 1.27 in 1925, whilst the average for the five years was 1.42.

It is a source of disappointment to me that at the end of five years the tuberculosis scheme is still incomplete. I have repeatedly pointed out in my annual report and elsewhere the urgency of the need for extended sanatorium

facilities but so far without result. To-day the list of cases awaiting admission to sanatorium numbers nearly 200 of which a considerable proportion are insured persons. With the number of beds at our disposal we cannot hope to overtake that list in anything like a reasonable time. There is no alternative therefore but to increase the number of available beds either by adding to one of the existing institutions or building an entirely new sanatorium. The latter is the better proposition though it entails the heavier outlay. Whichever proposal the Council ultimately decides to adopt I hope that there will be no further delay in dealing with the matter.

There is also need for a system of open-air schools in which to treat children of the delicate or pre-tuberculous type. Without the advantages which such schools afford our defensive organisation is imperfect. It is, of course, the business not of the Health but of the Education Committee to provide these schools but, as the matter closely effects the incidence of tuberculosis, I feel justified in alluding to it.

Another matter which demands attention is the care of the cripple child. The Education Committee already deals with cripples of school age but the scheme does not cover the infant under three years. What is wanted is a scheme comprehensive enough to include all children. This means that the two Committees must act together otherwise there will be overlapping and waste of effort.

The amalgamation of the public medical services carried on separately by the Health and Education Committees has not yet been consummated. This is a reform which is much needed and one which I am convinced would be beneficial to the community.

I proffer my thanks to the Members of the Health Committee for their continued confidence, as well as to my assistant, Dr. A. Stuart Hebblethwaite, and the other members of my staff for their loyal support and willing service.

I am, Gentlemen,

Your obedient Servant,

J. JOHNSTONE JERVIS.

Public Health Department, Leeds, August, 1926.

SUMMARY, 1925.

LATITUDE 53°48' North. LONGITUDE 1°32' West.

AVERAGE HEIGHT ABOVE SEA LEVEL 250 feet.

AREA OF CITY 28,090 Acres.

POPULATION (Registrar-General's estimate) 472,900

ESTIMATED NUMBER OF HOUSES 116,443

RATEABLE VALUE £3,022,378

SUM REPRESENTED BY A PENNY RATE £11,625

				Average. 1925. 1915-24.
BIRTH RATE (births per 1,000 living)	..	..	..	17·30 19·80
DEATH RATE (deaths per 1,000 living)	..	..	..	12·77 15·35
NATURAL INCREASE OF POPULATION (Excess of births over deaths in the year)	..	..	..	2,143 2,048
INFANT MORTALITY RATE (Deaths under 1 year per 1,000 births)	..	..	..	91 114
DEATH RATE from Pneumonia and Bronchitis	..	..	..	2·14 2·73
„ „ Cancer	..	..	..	1·28 1·21
„ „ Diarrhoea and Enteritis (under 2 years) per 1,000 births	..	..	..	18·22 17·73

			Cases.	Case- rate.	Deaths.	Death rate.
SCARLET FEVER	..	..	1,166	2·47	15	0·03
DIPHTHERIA	..	..	422	0·89	39	0·08
TYPHOID FEVER	..	..	9	0·02	3	0·01
MEASLES	..	..	5,301	11·21	39	0·08
PULMONARY TUBERCULOSIS	..	..	1,720	3·64	511	1·08
OTHER FORMS OF TUBERCULOSIS	..	..	149	0·32	88	0·19

CITY OF LEEDS.

NATURAL AND SOCIAL CONDITIONS.

Area.—The area of the City remains the same as in 1920, namely, 28,090 acres.

Population.—The population at the 1921 census was 458,232, adjusted later to 465,500. In 1922 the Registrar General estimated the population as 466,700, in 1923 as 469,900, in 1924 as 471,600, and his estimate for 1925 was 472,900. These figures represent an average increase of population of 1,850 per year and a total increase for the last four years of 7,400, representing an advance of 1·6 per cent. on the adjusted census population.

The following table shows the constitution of the population in age groups at the 1921 census.

1921 CENSUS POPULATIONS IN AGE GROUPS.

Sex.	Under 1	1 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards	Total.
Males ..	4,645	13,419	41,533	38,348	63,219	44,198	10,125	215,487
Females ..	4,511	13,217	41,354	45,677	76,492	47,830	13,664	242,745
Total ..	9,156	26,636	82,887	84,025	139,711	92,028	23,789	458,232

The number of inhabited houses at the census of 1921 was 111,271, of which 2,737 (approximately 2,000 of these were occupied but empty on the day of census) were vacant, and the number of families was 110,182.

I am not in a position to give even approximately the age and sex constitution of the population at the present time as the information is not available.

The distribution of the population throughout the 17 wards in which the City is divided is given in the table on page 12.

POPULATION IN WARDS.

WARD.	Census, April 2nd, 1911.	Census, June 19th, 1921.	Adjusted population, 1921.	Estimated population middle of 1925.
Central	14,503	12,528	12,727	12,664
North	41,968	42,423	43,096	43,633
North-East ..	36,239	36,011	36,582	36,749
New Ward* ..	..	7,814	7,938	9,648
East	34,701	35,272	35,832	36,196
South	12,562	12,817	13,020	12,980
East Hunslet† ..	33,562	35,264	35,823	38,041
West Hunslet ..	35,766	36,129	36,702	36,527
Holbeck	29,679	29,441	29,908	29,759
Mill Hill	5,856	5,286	5,370	5,286
West	20,553	22,029	22,378	22,128
North-West ..	30,570	31,531	32,031	31,778
Brunswick ..	23,219	23,930	24,310	24,060
New Wortley ..	16,714	17,773	18,055	18,049
Armley & Wortley	37,419	36,762	37,345	37,591
Bramley	23,937	23,481	23,853	24,740
Headingley ..	48,302	49,741	50,530	53,071
City	445,550	458,232	465,500	472,900

*Roundhay, Seacroft, Shadwell, and Crossgates added to Leeds, November, 1912. (1911 Census, 7,398).

†Including Middleton added to Leeds, April 1st, 1920. (1911 Census, 1,207).

In my annual report for 1924, I called attention to the fact that in consequence of the opening out of new building estates on the outskirts of the City there had been considerable movement of population especially in the more congested wards. That movement has continued throughout 1925, but has not been sufficient to warrant any further adjustment in the ward figures at the present time. The figures given in the accompanying table are, therefore, the adjusted figures which appeared for the first time in my 1924 report plus the 1925 increase of population.

Rateable Value.—The rateable value of the City in 1925 was £3,022,378 and the sum represented by a penny rate £11,625; in 1920 the rateable value was £2,339,971 and the sum represented by a penny rate £9,050.

Situation and Physical Features.—The City of Leeds is situated on the banks of the river Aire in the West Riding of Yorkshire, latitude $53^{\circ}48'$ north, longitude $1^{\circ}32'$ west. It stands for the most part on the coal measures at an average height above sea level of 250 feet. It is the chief town of the West Riding and is an important commercial and railway centre. In extent it is nine and a half miles in length from east to west, with a breadth from north to south of about seven and a half miles, and a circumference of approximately thirty-six miles.

Principal Industries.—The principal industries represented in the City are engineering, iron and steel, woollen, ready-made clothing, leather, boot and shoe, printing and dyeing. In addition to its being a noted industrial centre it is also important as a commercial and educational centre. It possesses a modern university and medical school, a large well-equipped technical school, and is an important training centre for teachers. There have been no changes of any importance in the character or type of the City's industries during the quinquennium. Owing, however, to the depressed state of trade following upon the war period, there has been a serious slump in the iron and steel and engineering trades which has had the effect of driving a considerable number of workers out of the City or into other trades in the City. The rate of unemployment amongst engineers and iron and steel workers is still very high though just recently there have been signs of improvement. Unemployment is one of the most powerful allies of disease.

Voluntary Medical Institutions.—The principal voluntary medical institutions in the City are, The Leeds General Infirmary, The Leeds Maternity Hospital, The Hospital for Women and Children and the Leeds Public Dispensary.

The Leeds General Infirmary has a total bed accommodation of 630 which is devoted to the treatment of medical and surgical diseases, including diseases of children, of the eye, ear, nose, throat and skin. In addition it possesses a large, modern and well-equipped out-patient department. Amongst the services which it renders of direct public health interest is the treatment of surgical tuberculosis and venereal diseases.

Details of the latter will be found on page 109.

The average number of patients in residence during 1925 was 561 which were allocated as follows :—surgical 242, medical 163, special diseases 156. The total number of admissions was 12,598 and the average length of residence 13.9 days. The total number of new out-patients admitted was 53,529 and the total attendances made 410,146.

Attached to the Infirmary is a convalescent home of 88 beds which is beautifully situated in the highlands on the north-western boundary of the City.

The Leeds Maternity Hospital situated in Hyde Terrace has accommodation for 75 lying-in women. The Board of Management of the Hospital has at present under consideration proposals for extension, and if these proposals materialise the total available accommodation will be increased to 102 beds. In addition the existing facilities for operative work for the isolation of infected cases, for cooking and storage will be greatly improved, and the hospital will become one of the most up-to-date of its kind in the North of England.

The hospital, as well as providing accommodation for lying-in women, is the centre of training in obstetrics for students proceeding to the ordinary degree in medicine and is also approved by the Central Midwives' Board for the training of midwives. Last year there passed through the hospital 46 students and 81 pupil midwives. Of the 81 pupil midwives, 63 entered for the examination of the Central Midwives' Board and 59 obtained the certificate.

By agreement with the Corporation the hospital maintains five district midwives. These midwives work under the supervision of the resident medical staff whose services are available at any time for consultative purposes or help in difficult cases.

The total number of births attended by the district midwives was 844 which when added to the total births occurring in the hospital makes a grand total for the complete hospital year of 2,355. This figure is less than last year's by 96; 27 more births took place in hospital and 123 fewer in the districts.

The total number of patients passing through the hospital was 1,847, of which 374 were abnormal cases ; the average number of patients resident daily was 71.5 and the average length of residence 14.3 days.

The Women and Children's Hospital, contrary to the inference which one would naturally draw from the title, does not deal with children, except as out-patients. Its beds are occupied by women suffering from gynaecological conditions. It has 50 beds, and last year the total number of patients treated was 2,266, namely, 758 in-patients and 1,508 out-patients. The average daily number in residence was 48 and the average length of stay 15 days.

The Leeds Public Dispensary besides providing facilities for the treatment of out-patients has also 16 beds and 4 cots for in-patients. These are chiefly used for the treatment of urgent cases. The total number of new cases treated in the Out-patient Department during the year (July 1st, 1924 to June 30th, 1925), was 20,018, the number of actual attendances being 81,790. The number of cases treated in the Casualty Room was 8,268, an average of 23 per day. The number of operations performed during the year was 1,946 ; 740 radiological examinations were made in the X-Ray department, whilst the attendances in the massage department numbered 2,427. The number passing through the Almoner's department was 27,849, and assistance, financial or otherwise, was given in 2,832 cases.

The following is an analysis of the In-patients :—

Ear, Nose and Throat	..	..	..	307
Surgical	..	..	..	274
Ophthalmic	..	..	..	71
Medical	..	..	..	28
Total ..				680

Of these patients, 362 were males and 318 females, and the average duration of treatment of each in-patient for the year was 6.9 days. The average cost of each out-patient attendance during the year was 1s. 9d., the average cost of each out-patient treated to a conclusion was 7s. 2d., and the cost of each in-patient was £2 12s. 1d. The total cost of the wards for the year was £1,772 16s. 4d.

Poor Law Institutions.—The Poor Law Institutions at which accommodation is reserved for the treatment of disease number four, namely, St. James' Hospital, Holbeck Infirmary, Bramley Infirmary and Rothwell Infirmary.

The first mentioned is modern and well-equipped and has accommodation for 1,100 cases. It has a resident medical staff as well as a staff of visiting physicians and surgeons. The cases admitted include all those dealt with in a general hospital. In addition to adults it has accommodation for 250 children as well as 25 beds for lying-in cases.

The Holbeck Infirmary is an older and much smaller institution and has very limited accommodation for hospital cases. The same may be said with regard to Bramley. Rothwell, on the other hand is more modern and possesses a larger number of hospital beds. It may be mentioned here that the Corporation subsidizes a certain number of beds for lying-in women at St. James' Hospital and Bramley Infirmary. More detailed information concerning these will be found on page 155.

All the above mentioned institutions have accommodation for non-medical as well as medical cases and in addition there are 17 children's homes with a total accommodation for about 316 children.

Casual wards are maintained in connection with Beckett Street, Holbeck and Rothwell Institutions.

The following tables give in detail the work of the four Poor Law Institutions for the year ended March 31st, 1926, with, in addition, the number of cases relieved, the gross total cost of out-relief for the year, and the average weekly number of persons dealt with by the district medical officers.

CASES IN RECEIPT OF OUT-RELIEF.

Year ended March, 1926.

Average Weekly No. of Cases relieved	..	..	..	..	4,370
Average Weekly No. of Persons relieved	..	..	..	..	9,892
Gross Total Cost of Out-Relief for year	..	..	£178,917	12s. 4d.	
Average Weekly No. of Persons dealt with by District Medical Officers					190

WORK OF POOR LAW INSTITUTIONS.

1925-1926.

SICK CASES (MEDICAL).

INSTITUTIONS.	No. of Inmates on the 1st April, 1925.	No. of Admissions during year.	No remaining on 1st April, 1926.
St. James' Hospital ..	1,081	2,061	1,196
Holbeck Institution Infirmary	62	108	..
Bramley Institution Infirmary	83	251	91
Rothwell Institution Infirmary	122	256	164
TOTAL	1,348	2,676	1,451

GENERAL INSTITUTION CASES (NON-MEDICAL).

INSTITUTIONS.	No. of Inmates on the 1st April, 1925.	No. of Admissions during year.	No remaining on 1st April, 1926.
Beckett Street	398	1,759	482
Holbeck	83	67	56
Bramley	106	62	112
Rothwell	168	83	138
Children in Guardians' Homes	269	246	307
TOTAL	1,024	2,217	1,095

CASUAL WARDS (NON-MEDICAL).

INSTITUTIONS.	No. of Inmates on the 1st April, 1925.	No. of Admissions during year.	No. on the 1st April, 1926.
Beckett Street	293	14,501	300
Holbeck	302	17,034	347
Rothwell	46	3,583	61
TOTAL	641	35,118	708

VITAL STATISTICS.

Marriages.—Since writing my last annual report several changes have taken place in the boundaries of the registration districts. These changes were occasioned by the amalgamation of the four Unions inside the City in accordance with the powers given by the Leeds Corporation Act of 1924. The principal changes were the transference on the 1st April, 1925, of Churwell Civil Parish from Holbeck Registration District to Dewsbury Registration District, Gildersome Civil Parish from Bramley Registration District to Dewsbury Registration District, and Oulton with Woodlesford and Rothwell Civil Parishes from Hunslet Registration District to Wakefield Registration District; also on the 1st October, 1925, Bramley Registration District and Holbeck were united and became Bramley and Holbeck Registration District. It will be obvious, therefore, that the figures in the new registration districts within the area of the amalgamated unions are not comparable with those which have appeared in my annual reports of previous years, and inasmuch as the populations of the new registration districts are not available for the whole year it is impossible to calculate the marriage rate for those districts or for the City. The only thing, therefore, to do in the circumstances is to give the actual figures and that is done in the subjoined table.

MARRIAGES.

Registration Districts.	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Year.
Bramley	75	173	201	..	449
Leeds	330	628	769	579	2,306
Hunslet	81	149	199	145	574
Holbeck	45	96	116	..	257
Bramley and Holbeck ..	..	..	..	221	221
Total	531	1,046	1,285	945	3,807

Births.—The number of births registered in the City during the year was 8,518, comprising 4,370 males and 4,148 females. Of these, 229 males and 212 females were born to parents belonging to districts outside the City, and have therefore been deducted from the total, whilst to the total have been added 58 males and 45 females, born outside but belonging to Leeds parents, making a nett total of 8,180 made up of 4,199 males, and 3,981 females. Compared with the figures for the previous year this is a decrease of 234 males, and 144 females or a total decrease of 378.

The birth-rate corresponding to the nett total of children born was 17·3, or 0·8 less than the rate for the previous year and 3·3 less than the rate for the previous five years. This is the lowest birth-rate ever recorded in the City's history with the exception of the war years 1917 and 1918.

Referring to the birth-rate curve, I stated in my last report that it showed signs of flattening out, but the promise of 1924 has not been fulfilled, for last year it took another plunge which resulted in it reaching a lower level than it has ever done before except in the war years 1917 and 1918. In 1915, 10 years ago, the birth-rate of Leeds was 21·5 and 10 years before that it was 28·4, so that in a period of 20 years it has dropped by as much as 39·1 per cent. This represents a heavy loss to the City as may be better appreciated by the reflection that had the rate been the same in 1925 as it was in 1905, it would have meant the addition of 13,430 lives to the population instead of, as was actually the case, only 8,180. Nor does this represent the entire loss, for in arriving at this figure one has not taken into account the progressive increase of the population in the intervening years.

It is sometimes stated that a low death-rate compensates for a low birth-rate. That is fallacious, as the gain to the population by the postponement of death (for that is really what it amounts to) is only apparent, whilst the loss to the population by the reduction in the number of births is real. In addition to which it must be borne in mind that a falling death-rate in conjunction with a falling birth-rate fills up the older age groups at the expense of the younger and increases the average age of the population. A population composed mostly of old people is likely to have a larger number of ineffectives than one in which the younger age groups predominate. And, as increasing age is accompanied by decreasing productivity, the birth-rate has an ever increasing tendency to drop.

But a falling birth-rate has another and in some respects a more disquieting significance. The fall is not equally distributed over all sections of the community, it is more pronounced amongst the rich than amongst the less well-to-do. The table on page 22 shows that the majority of the recruits to the population come from the poor and most congested wards of the City—South, East, East Hunslet, West and New Wortley—whilst the wealthier and less crowded wards have comparatively low birth-rates. Speaking generally, it is in the well-to-do classes that the healthier stocks are found, whilst amongst the poor are the diseased and the unfit.

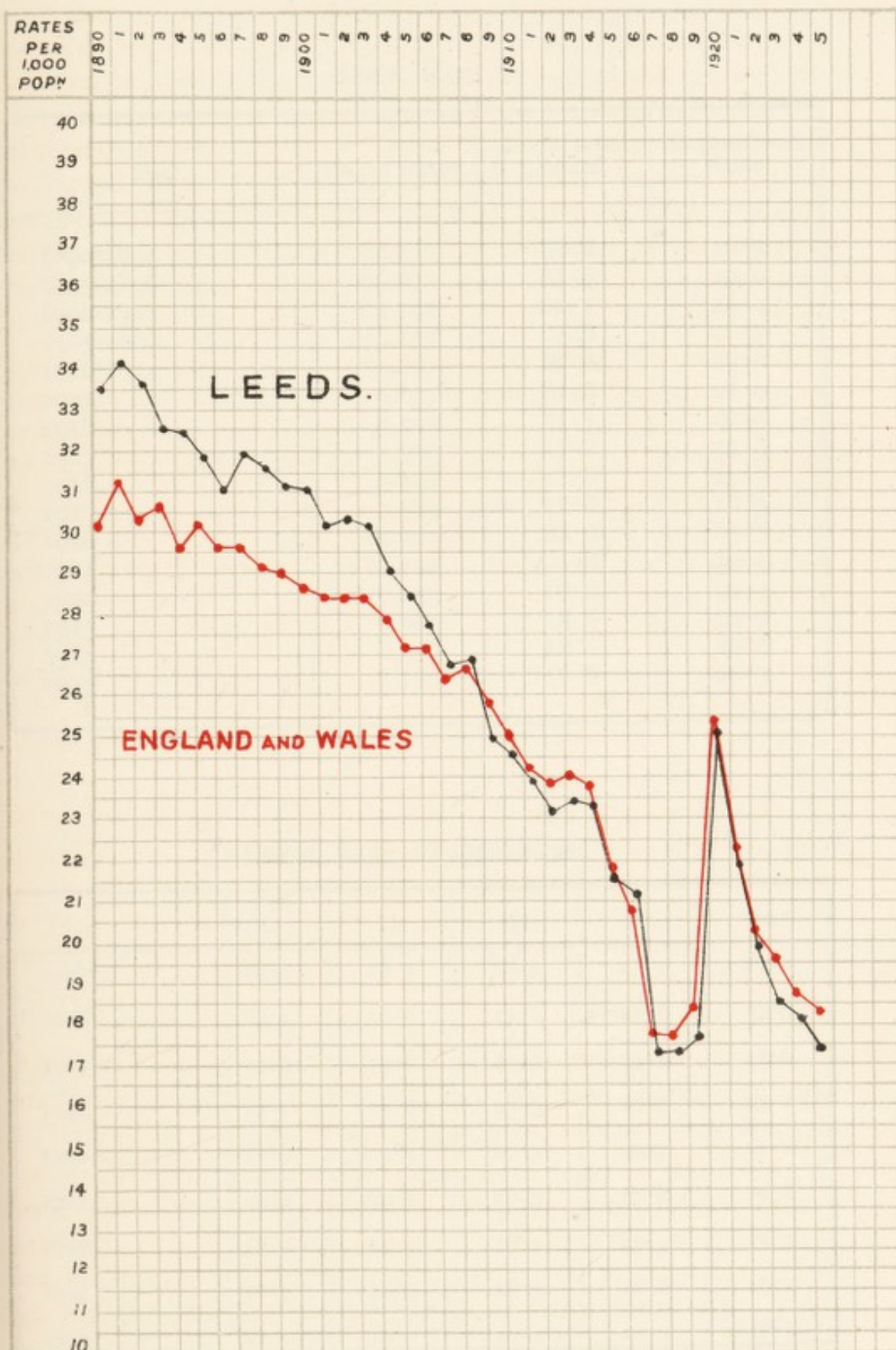
Methods of birth restriction have unfortunately a greater appeal for the well-to-do than they have for the poor, and no matter what efforts are made to educate the latter in the use of contraceptive devices this will always be the case for the very reason that amongst the poor these devices become absolutely impracticable. But it is from the poor that the population to an ever increasing extent, is deriving its recruits which means that the average fitness of the individual units is slowly but surely declining. It is not reassuring to contemplate the time when England will be forced into the position of having to depend upon the less fit of its people to make good the natural loss sustained by death and emigration. If such a time should ever come it will surely mean the decay of the nation and the race.

One must not assume, however, that the use of restrictive methods is the only reason for the decline in the birth-rate. Sterility in both sexes, but especially amongst women, is certainly on the upgrade as is proved by the comparatively large number of childless marriages especially amongst the professional classes. Whether this is a result of over-development or not, it is impossible to say, but the fact is certainly striking enough to call for comment.

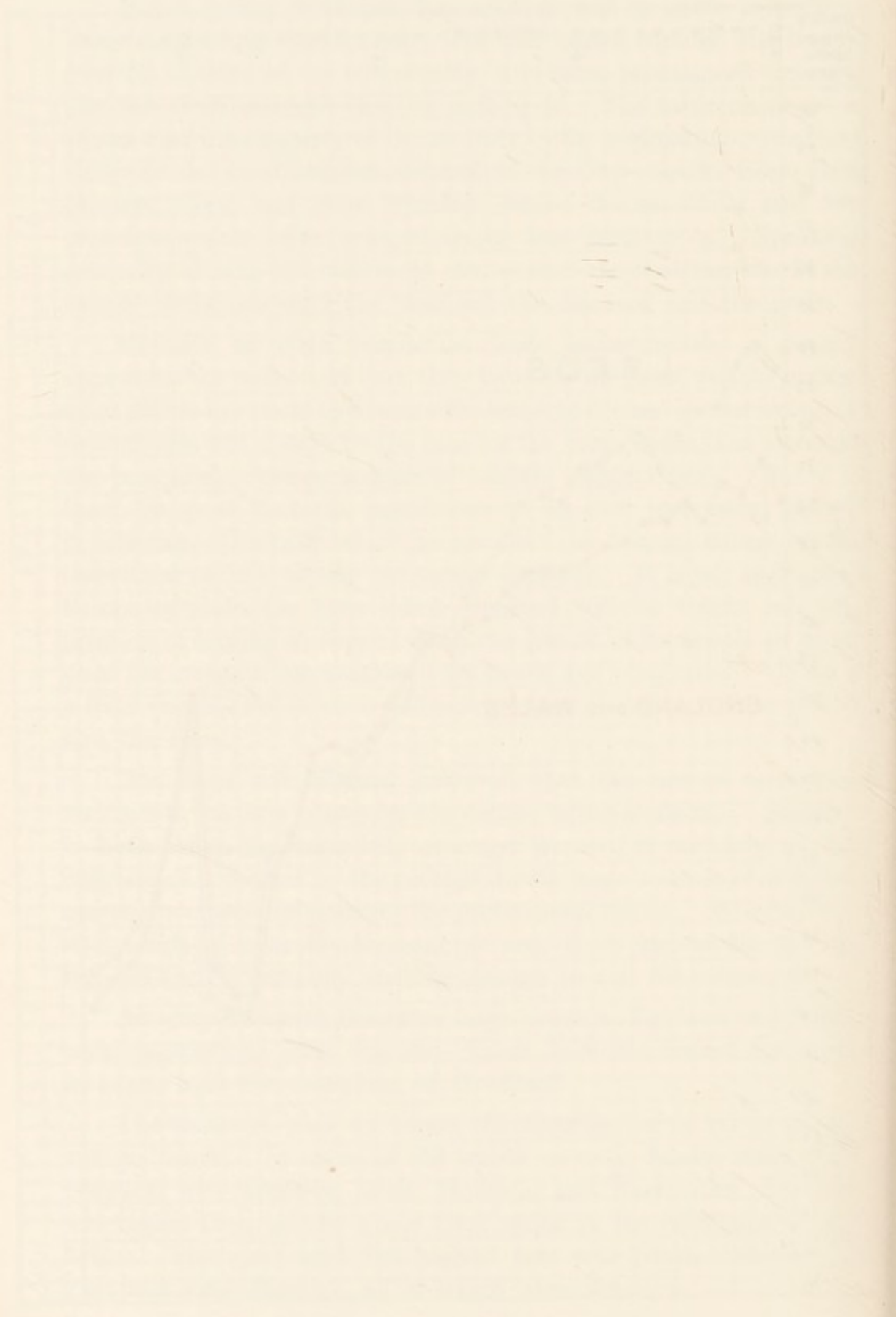
As compared with the other large towns in England and Wales with populations over 250,000, Leeds had the lowest birth-rate in 1925, with the exception of Bradford.

The table on page 22 shows the distribution of births in the various wards. In seven of the wards, namely, South, East, East Hunslet, New Wortley, West, Holbeck, and North-East, the rate was higher than for the whole City, whilst in the remainder it was below. The ward with the highest rate was South, followed by East and East Hunslet, all of which were above 20.

BIRTH RATE, 1890 - 1925.



BIRTH RATE, 1880-1910



BIRTH RATE.

Year.	No. of births.	Birth rate, LEEDS.	England and Wales.
1890-1894	62,270	33·2	30·5
1895-1899	63,873	31·5	29·6
1900-1904	64,791	30·1	28·4
1905-1909	59,117	26·9	26·7
1910-1914	53,267	23·6	24·2
1915	9,877	21·5	21·9
1916	9,432	21·1	20·9
1917	7,566	17·3	17·8
1918	7,392	17·3	17·7
1919	7,564	17·6	18·5
1920	11,229	25·0	25·5
1921	10,144	21·8	22·4
1922	9,253	19·8	20·4
1923	8,684	18·5	19·7
1924	8,558	18·1	18·8
1925	8,180	17·3	18·3

BIRTH RATE IN QUARTERS.

	I.	II.	III.	IV.	Year.
1917	19·2	18·0	16·2	15·7	17·3
1918	17·4	16·8	17·8	17·1	17·3
1919	13·6	14·6	17·5	24·4	17·6
1920	30·1	25·6	23·7	20·8	25·0
1921	21·9	22·4	22·2	20·7	21·8
1922	21·2	20·7	19·5	17·9	19·8
1923	18·9	19·5	18·1	17·4	18·5
1924	18·7	18·4	18·7	16·8	18·1
1925	17·0	19·0	17·5	15·7	17·3

BIRTHS AND BIRTH RATE IN WARDS.

MUNICIPAL WARD.	Estimated Population middle of 1925.	Nett births.	Birth- rate.	Illegiti- mate births.	Percentage of illegitimate births to total births.
Central	12,664	194	15·32	11	5·7
North	43,633	646	14·81	31	4·8
North-East	36,749	654	17·80	39	6·0
New Ward*	9,648	164	17·00	5	3·0
East	36,196	802	22·16	38	4·7
South	12,980	334	25·73	15	4·5
East Hunslet†	38,041	793	20·85	33	4·2
West Hunslet ..	36,527	549	15·03	16	2·9
Holbeck	29,759	564	18·95	24	4·3
Mill Hill	5,286	72	13·62	6	8·3
West	22,128	430	19·43	45	10·5
North-West	31,778	490	15·42	29	5·9
Brunswick	24,060	385	16·00	39	10·1
New Wortley ..	18,049	350	19·39	23	6·6
Armley and Wortley	37,591	576	15·32	30	5·2
Bramley	24,740	362	14·63	12	3·3
Headingley	53,071	815	15·36	26	3·2
City	472,900	8,180	17·30	422	5·2

*Roundhay, Seacroft, Shadwell, and Crossgates. †Including Middleton.

Details respecting notification and visitation of births are given on page 158.

Birth-rate in Quarters.—The highest rate was in the second quarter, 19.0, and the lowest in the fourth quarter, 15.7, whilst the rates in the other two were pretty much on a level.

Excess of Births over Deaths.—In 1925 the births exceeded the deaths by 2,143 which is considerably higher than the corresponding figure for the previous year. This is accounted for by the fall in the death-rate which was greater in proportion than that in the birth-rate, meaning that on the year's working there was a greater saving of life than in 1924. Taking the figures for the previous five years, 1920-1924, the natural increase in the population for 1925 was 1,013 less than the average.

Illegitimate Births.—Of the 8,180 nett births registered 7,758 (3,981 males, 3,777 females) or 94.8 per cent. were legitimate and 422 (218 males, 204 females) or 5.2 per cent. illegitimate. The ratio of illegitimate to legitimate was 1 to 18.

YEAR.	Illegitimate births.	Percentage of nett births registered.	Rate per 1,000 estimated population.
1917 ..	576	7.6%	1.31
1918 ..	528	7.1%	1.23
1919 ..	567	7.5%	1.32
1920 ..	631	5.6%	1.41
1921 ..	565	5.6%	1.21
1922 ..	511	5.5%	1.09
1923 ..	438	5.0%	0.93
1924 ..	423	4.9%	0.90
1925 ..	422	5.2%	0.89

Reference to the illegitimate death rate will be found on pages 146 and 148.

Deaths.—In 1925, 6,286 deaths (3,399 males and 2,887 females) were registered as having occurred in the City. To that number must be added 321 deaths of persons (178 males and 143 females) belonging to Leeds who died outside, and from it must be deducted 570 deaths of persons (324 males and 246 females) belonging to places outside the City who died in Leeds, giving a nett total of 6,037 Leeds deaths made up of 3,253 males and 2,784 females. These figures correspond to a gross death-rate of 13.3 and a nett death-rate of 12.8 which are 1.2 and 1.5 respectively less than the corresponding figures for the previous year. The decrease means a saving to the City of 709 lives or 10.5 per cent. as compared with 1924. These are amongst the lowest rates ever recorded for the City, the only year in which they were lower being 1923. Compared with the average of the previous five years the nett death-rate for 1925 is lower by 1.0.

When compared with the other large towns in England and Wales Leeds occupies fourth place, the towns with lower rates being London, Birmingham and Sheffield.

Compared with England and Wales as a whole the Leeds death-rate was 0.6 in excess, which is a more favourable comparison than in any other previous year in the City's history with the exception of 1892 when it was 0.5.

Death-rate in Quarters.—The quarter with the highest death-rate was the first, 14.8, that with the lowest was the third, 10.8, whilst in the second it was 11.4 and the fourth, 14.1. Had it not been for the prevalence of infantile diarrhoea in the third quarter and the consequent increase in the mortality from this disease the rate would have been even lower than 10.8. There was nothing of note in the other three quarters.

Death-rates in Wards.—Of the 17 wards in the City those with the highest death-rates in 1925 in order of numerical importance were Central, West, East and South, whilst those with the lowest were New Ward, North, West Hunslet and East Hunslet. One has been accustomed to associate the congested wards in the working class districts with a high death-rate but 1925 was an exception for, as will be seen by examination of the table on page 26, one of the lowest rates was in one of the most congested wards, namely, East Hunslet, whilst the highest was Central.

DEATH RATE IN QUARTERS.

	I.	II.	III.	IV.	Year.
1917	19.1	17.3	13.6	14.5	16.1
1918	19.7	16.0	14.3	29.8	19.9
1919	25.5	13.1	11.3	15.2	16.2
1920	20.6	13.9	11.2	13.1	14.7
1921	14.5	12.5	11.3	15.8	13.5
1922	17.5	14.6	10.6	12.9	13.9
1923	14.7	13.4	10.6	12.4	12.7
1924	22.4	12.9	9.9	12.2	14.3
1925	14.8	11.4	10.8	14.1	12.8

Causes of Death.—The principal causes of death were in order of numerical importance, organic heart disease, cancer, bronchitis, pulmonary tuberculosis, pneumonia, and cerebral hæmorrhage which together accounted for 51.8 per cent. of the total deaths.

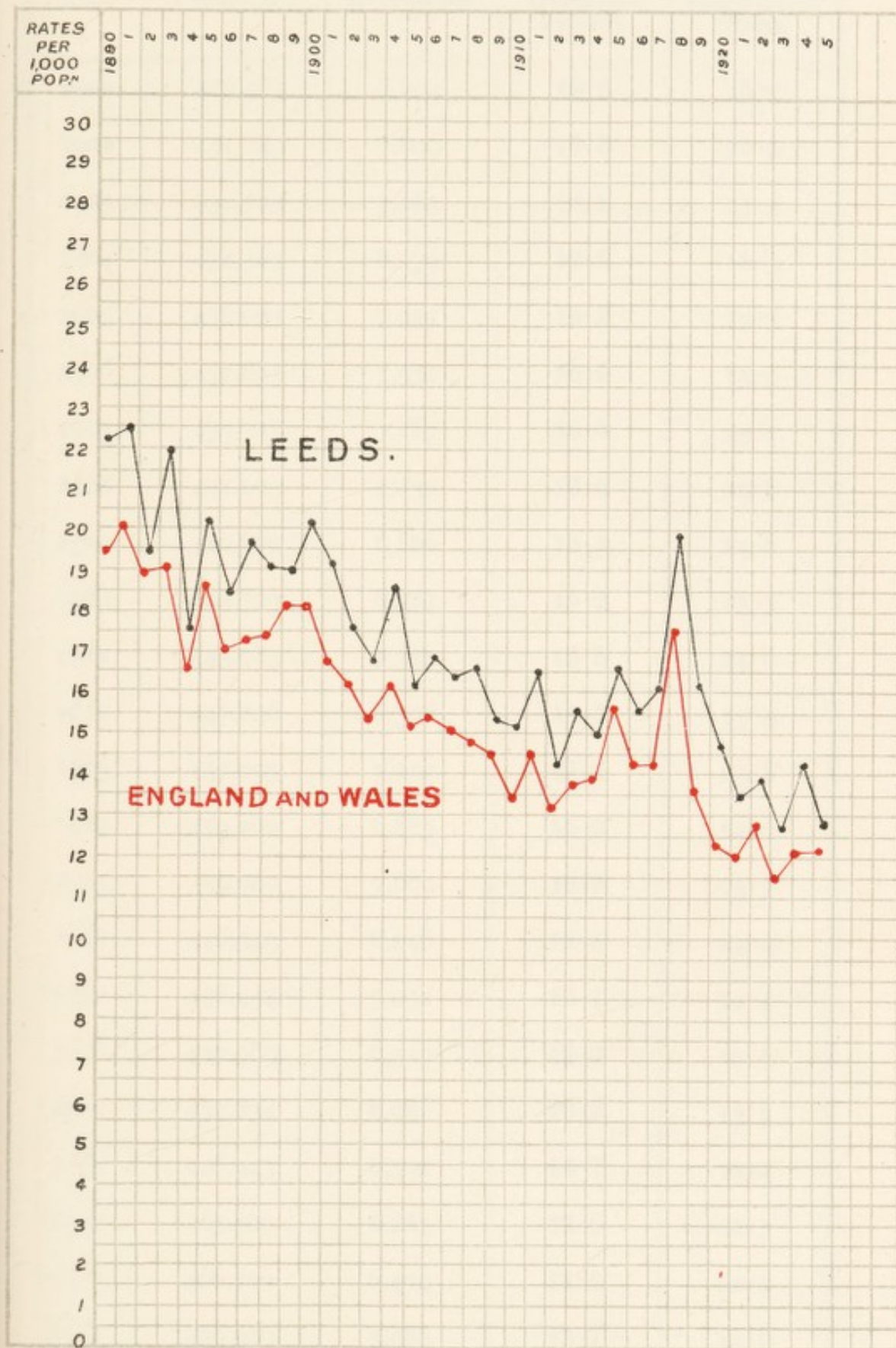
Taken as a group, respiratory diseases, including influenza but excluding pulmonary tuberculosis, were responsible for 1,262 deaths or 20.9 per cent. of the total. The explanation of this high death-rate may be to some extent climatic, but is also attributable to unhealthy habits on the part of the people. Amongst the deaths from respiratory conditions is undoubtedly a large number of old people, but there is also a considerable number of infants. Respiratory infections in young children are mostly contracted from contact with active disease in their elders, and with care and proper management could be avoided. Unfortunately, the average citizen has not yet arrived at the stage of development when he recognises that any acute catarrhal cold affecting the respiratory passages or lungs is infectious in nature, and therefore he does not appreciate the need for taking precautions, especially in the presence of young children. Likewise when infection has taken place, the method of treatment adopted is often entirely wrong. Too frequently the little patient is put into a hot, stuffy room without anything like an adequate supply of fresh air. Many of these children if nursed under open air conditions would undoubtedly recover, and, though such conditions are not available in the ordinary working-class dwelling, there certainly might be a closer approximation to them than one generally finds.

DEATHS AND DEATH RATE IN WARDS.

MUNICIPAL WARD.	Area in Acres.	Estimated population middle of 1925.	Nett deaths.	Death- rate.
Central	209	12,664	207	16·35
North	3,026	43,633	466	10·68
North-East	1,268	36,749	499	13·58
New Ward*	4,677	9,648	93	9·64
East	1,650	36,196	566	15·64
South	343	12,980	185	14·25
East Hunslet†	3,023	38,041	440	11·57
West Hunslet	1,414	36,527	417	11·42
Holbeck	507	29,759	382	12·84
Mill Hill	233	5,286	75	14·19
West	291	22,128	361	16·31
North-West	732	31,778	396	12·46
Brunswick	498	24,060	299	12·43
New Wortley	412	18,049	251	13·91
Armley and Wortley ..	1,604	37,591	460	12·24
Bramley	4,599	24,740	311	12·57
Headingley	3,604	53,071	629	11·85
City	28,090	472,900	6,037	12·77

*Roundhay, Seacroft, Shadwell, and Crossgates. †Including Middleton.

DEATH RATE, 1890 - 1925.





ANNUAL DEATHS AND DEATH RATE.

Year.	Population.	Nett deaths.	Death-rate LEEDS.	Death-rate England and Wales.
1901	429,383	8,204	19·2	16·9
1902	431,043	7,699	17·6	16·3
1903	432,703	7,263	16·8	15·5
1904	434,363	8,039	18·6	16·3
1905	436,023	7,047	16·2	15·3
1906	437,683	7,350	16·9	15·5
1907	439,343	7,167	16·4	15·1
1908	441,003	7,430	16·6	14·8
1909	442,663	6,806	15·4	14·6
1910	444,323	6,711	15·2	13·5
1911	445,983	7,331	16·5	14·6
1912	447,746	6,396	14·3	13·3
1913	457,295	7,237	15·6	13·8
1914	459,260	6,885	15·0	14·0
1915	459,260	7,609	16·6	15·7
1916	446,349	6,946	15·6	14·4
1917	438,254	7,052	16·1	14·4
1918	427,589	8,529	19·9	17·6
1919	430,834	6,992	16·2	13·7
1920	448,913	6,591	14·7	12·4
1921	465,500	6,285	13·5	12·1
1922	466,700	6,479	13·9	12·8
1923	469,900	5,986	12·7	11·6
1924	471,600	6,747	14·3	12·2
1925	472,900	6,037	12·8	12·2

PRINCIPAL CAUSES OF DEATH.

Death rate.	Diseases.	No. of deaths in 1925 (nett.)	Increase or decrease compared with 1924.	Houses.	
				Through.	Back-to-back.
0·01	Enteric Fever	3	- 3	2	1
..	Small-pox	..	..	..	..
0·08	Measles	39	- 7	5	34
0·03	Scarlet Fever	15	- 5	6	9
0·10	Whooping Cough	47	- 40	10	37
0·08	Diphtheria	39	+ 12	8	31
0·34	Influenza	159	- 245	56	102
0·03	Erysipelas	13	+ 3	3	10
1·08	Pulmonary Tuberculosis ..	511	- 2	157	351
0·19	Other Tuberculous Diseases	88	- 56	30	57
1·28	Cancer, malignant disease	606	- 33	251	354
0·05	Rheumatic Fever	22	- 4	8	14
0·11	Meningitis	52	- 18	12	40
0·68	Cerebral Hæmorrhage ..	322	- 10	126	195
1·43	Organic Heart Disease	674	- 74	270	403
0·50	Arterio-sclerosis	236	+ 27	111	125
1·08	Bronchitis	513	- 130	175	337
1·06	Pneumonia (all forms) ..	503	- 116	124	378
0·18	Other diseases of respiratory organs	87	- 24	40	47
0·38	Diarrhœa and Enteritis ..	179	+ 57	31	148
0·04	Appendicitis and Typhlitis	20	- 12	9	11
0·06	Cirrhosis of Liver	30	+ 13	15	15
0·43	Nephritis and Bright's Disease	205	- 4	80	125
0·05	Puerperal Fever	24	+ 15	1	23
0·04	Other accidents and diseases of Pregnancy and Parturition	21	- 3	7	14
0·54	Congenital Debility and Malformation, including Premature Birth ..	257	- 11	69	188
0·39	Violent Deaths, excluding Suicide	186	+ 3	64	118
0·08	Suicide	40	- 1	16	24
2·40	Other Defined Diseases ..	1,137	- 40	475	659
0·02	Diseases ill-defined or unknown	9	- 2	5	4
12·77	Totals	6,037	- 710	2,166	3,854

Of the 6,037 deaths, 17 had no home.

I have alluded to the subject of organic heart disease in previous annual reports and pointed out that in the majority of instances it is due to rheumatic infection. In nearly every case of rheumatic fever the heart is effected to a greater or less extent. The disease is quite common amongst children and young people and is a cause of very serious crippling. Up to the present very little has been done in the way of prevention. Generally speaking, the treatment is purely symptomatic and very little attempt is made to assist the impaired organ to regain its efficiency. That much can be done by suitable exercise, under healthy conditions to restore a damaged heart has been amply demonstrated. Indeed there are many of these so-called heart cases engaged in carrying out duties which entail considerable strain on the heart without suffering any ill-effects, whilst on the contrary others from sheer lack of training and exercise become confirmed invalids. I feel sure that with proper facilities for remedial treatment the crippling effect of heart disease might be very materially reduced, and many who at the present time are semi-invalids might with proper treatment be so far restored to health as to be able to take part in the ordinary activities of life. The provision of such facilities is a duty which might reasonably be shouldered by the Local Health Authority and I would suggest the matter be kept in mind should the opportunity arise of acquiring a suitable building for the purpose.

Cancer takes second place in the list of killing diseases. In former years it occupied a place further down the list. Cancer is definitely on the upgrade and every year witnesses an ever increasing number of victims. The age groups chiefly effected are 25-45, 45-65 and 65 upwards. The disquieting feature of the increase in the cancer death-rate in recent years is that it is showing a tendency to invade the younger age groups. A disease which kills in old age merely anticipates a natural process, but when it claims its victims, as cancer is doing in ever increasing numbers, from the age groups in which are the majority of the most valuable lives in the community then it is becoming a real menace. At the age of 45

a man is at his best ; it is then that the fruit of his accumulated experience begins to ripen and he may be said to have reached the zenith of his communal usefulness. To cut him off at that age is a serious loss and one which cannot be repaired. This fact is being realised more and more, and as a result, movements are being set on foot in this country and throughout the world to try to stem the advance of the malady. As stated in my last annual report a local Cancer Committee was formed in Leeds over a year ago, and since then a Yorkshire branch of the British Empire Cancer Campaign has been founded.

Further details with reference to the work of these two bodies and the subject generally will be found on pages 100 and 102.

For notes on bronchitis, infantile diarrhoea, see pages 98 and 93.

Housing and Death.—Of the total number of deaths which occurred in Leeds during the year 3,854 (or 63·8 per cent.) occurred in back-to-back houses, 2,166 (or 35·9 per cent.) in throughs, whilst 17 (or 0·3 per cent.) had no fixed domicile. When one speaks of a back-to-back house one does not necessarily mean an insanitary house. There are three types of back-to-back houses in Leeds, the most modern of which is quite a good and efficient dwelling. The other types, however, are not so desirable and many of the oldest are frankly bad. Most of the back-to-back houses of the unsatisfactory type are to be found in the older parts of the City, and generally speaking they are associated with high sickness and mortality rates. The table on page 28 has been designed to show the number of deaths from the various diseases in back-to-back houses as compared with through, and, though the comparison is not entirely accurate, yet it does show that a preponderating number of the deaths occurs in back-to-back houses, and a closer analysis would probably show that the majority were in those of the oldest type. All this means that it is useless to hope for any marked improvement in the health statistics of the City, until these unsatisfactory houses have been dealt with.

Deaths in Age Groups.—The table on page 32 sets out the deaths according to age groups. The observer will notice that the period of life at which death claimed most of its victims in 1925 was above 65 years, whilst the age group with the fewest was 5-15. Adding together the deaths in the four age groups 0-15 we get a figure of 1,245, which is equal to 20.6 per cent. of the total deaths at all ages. The loss of 1,245 lives of children under 15 years is of far more serious significance to the population than the demise of 2,129 old people, and, though the age distribution of deaths in recent years has shown a steady improvement, the wastage in the early years is still too high. If one compares 1925 with 1920 one finds that there has been a decrease in the number of deaths in all the age groups up to 45 years, with the exception of 15-25 group where there was a slight increase obviously purely temporary, whilst in the older groups 45-65 and 65 and upwards the increase was most marked, particularly in the oldest age group. The age groups in which improvement is most marked are 0-1, 1-2, 2-5 and 5-15.

There is encouragement in these figures because they indicate that the work done in the maternity and child welfare centres and the school clinics is beginning to bear fruit. The child is getting a better chance to survive and is evidently making the most of that chance. The current having set in the right direction ought to gather strength with every year that passes until the point is reached when the burden will be shifted completely from the lower to the top end of the scale. That is an ideal which may take many years to realise but it is nevertheless the ideal for which we must strive. In making a comparison however, to pick out a single year is apt to give a wrong impression. I have, therefore, got out the figures for the previous ten years and these are set out in the table on page 33. This table is worth a little study because it shows more clearly than can be expressed in words how rapid has been the rise in the expectation of life of the new born child during the last decade. It is true to say that a child born in 1925 may reasonably expect to live 12-15 years longer than his grandfather.

Infant Mortality.—The number of deaths of children under one year numbered 748 (or 12.4 per cent.) of the total deaths. The infantile mortality rate corresponding was 91 per thousand births. This subject is dealt with in detail on page 141.

DEATHS IN AGE GROUPS (NETT), 1915-25.

Together with the percentage of the total deaths, represented by each group
(in italics).

Year.	Under 1	1-2	2-5	5-15	15-25	25-45	45-65	65+	Total.
1915	1,253 <i>16.5%</i>	439 <i>5.8%</i>	389 <i>5.1%</i>	260 <i>3.4%</i>	318 <i>4.2%</i>	965 <i>12.7%</i>	1,850 <i>24.3%</i>	2,135 <i>28.0%</i>	7,609
1916	1,216 <i>17.5%</i>	391 <i>5.6%</i>	285 <i>4.1%</i>	240 <i>3.5%</i>	287 <i>4.1%</i>	885 <i>12.7%</i>	1,683 <i>24.2%</i>	1,959 <i>28.2%</i>	6,946
1917	1,023 <i>14.5%</i>	400 <i>5.7%</i>	422 <i>6.0%</i>	331 <i>4.7%</i>	302 <i>4.3%</i>	835 <i>11.8%</i>	1,734 <i>24.6%</i>	2,005 <i>28.4%</i>	7,052
1918	984 <i>11.5%</i>	474 <i>5.6%</i>	743 <i>8.7%</i>	514 <i>6.0%</i>	579 <i>6.8%</i>	1,214 <i>14.2%</i>	2,007 <i>23.5%</i>	2,014 <i>23.6%</i>	8,529
1919	899 <i>12.9%</i>	239 <i>3.3%</i>	298 <i>4.3%</i>	299 <i>4.3%</i>	344 <i>4.9%</i>	957 <i>13.7%</i>	1,780 <i>25.4%</i>	2,176 <i>31.2%</i>	6,992
1920	1,232 <i>18.7%</i>	255 <i>3.9%</i>	283 <i>4.3%</i>	283 <i>4.3%</i>	291 <i>4.4%</i>	844 <i>12.8%</i>	1,572 <i>23.9%</i>	1,831 <i>27.8%</i>	6,591
1921	997 <i>15.9%</i>	278 <i>4.4%</i>	130 <i>2.1%</i>	202 <i>3.2%</i>	297 <i>4.7%</i>	765 <i>12.2%</i>	1,562 <i>24.9%</i>	2,054 <i>32.7%</i>	6,285
1922	935 <i>14.4%</i>	283 <i>4.4%</i>	211 <i>3.3%</i>	198 <i>3.1%</i>	282 <i>4.4%</i>	766 <i>11.8%</i>	1,661 <i>25.6%</i>	2,143 <i>33.1%</i>	6,479
1923	773 <i>12.9%</i>	189 <i>3.2%</i>	153 <i>2.6%</i>	166 <i>2.8%</i>	277 <i>4.6%</i>	751 <i>12.5%</i>	1,620 <i>27.1%</i>	2,057 <i>34.4%</i>	5,986
1924	921 <i>13.7%</i>	270 <i>4.0%</i>	202 <i>3.0%</i>	173 <i>2.6%</i>	275 <i>4.1%</i>	786 <i>11.6%</i>	1,804 <i>26.7%</i>	2,316 <i>34.3%</i>	6,747
1925	748 <i>12.4%</i>	177 <i>2.9%</i>	161 <i>2.7%</i>	159 <i>2.6%</i>	297 <i>4.9%</i>	709 <i>11.7%</i>	1,657 <i>27.4%</i>	2,129 <i>35.3%</i>	6,037

COMPARISON OF PERCENTAGES OF DEATHS IN THE VARIOUS AGE GROUPS OF 1925 AS COMPARED WITH THE PREVIOUS DECENNIAL.

Period.	-1	1-2	2-5	5-15	15-25	25-45	45-65	65+
1915-1924 ..	14.8	4.6	4.5	3.9	4.7	12.5	25.0	29.9
Year 1925 ..	12.4	2.9	2.7	2.6	4.9	11.7	27.4	35.3
Decrease -	-2.4	-1.7	-1.8	-1.3	..	-0.8	..	..
Increase +	..	..	..	..	+0.2	..	+2.4	+5.4

Cremation.—In nothing are the people of these Islands more conservative than in the disposal of the dead. They have responded to the teaching of modern hygiene in all departments of life save this and year after year the number of burial grounds in and around our large centres of population continues to increase. These repositories of the dead not only represent a waste of valuable land which might be otherwise utilised for purposes of recreation or building sites, but they are by reason of the gross pollution of the soil an actual menace to those who live in the vicinity. It is generally recognised that the safest, most expeditious, as well as the least offensive way of disposing of dead organic matter is to consume it by fire. Instead of taking months or even years to disintegrate, as is the case with earth burial, it is reduced in the course of a few hours to its simplest elements and that without endangering the health of the living. Cremation may therefore be said to be the only true hygienic method of dealing with the dead, and in these days of sanitary ideals it does seem inconsistent that such an obviously insanitary practice as earth burial should be persisted in, and what is more inexplicable should receive the approval of the majority of the people. I have urged in previous reports the importance of cremation as a public health measure and it is to me a matter of some disappointment that the subject still appears to have no interest for the majority of the citizens. The time must come, however, when what is looked upon now as a fad will be imposed upon each citizen as a duty and I cannot help feeling that the sooner that time arrives the better.

The following is a list showing the number of cremations of Leeds people which have taken place at the Leeds Crematorium, Lawnswood, during the last twenty-one years.

CREMATIONS IN LEEDS.

Year.	No. of Leeds people cremated.	Nett total deaths in City.	Percentage of cremations on nett deaths (Leeds people cremated).
1905	7	7,047	0·10
1906	10	7,350	0·14
1907	12	7,167	0·17
1908	16	7,430	0·22
1909	9	6,806	0·13
1910	5	6,711	0·07
1911	7	7,331	0·10
1912	14	6,396	0·22
1913	7	7,237	0·10
1914	18	6,885	0·26
1915	13	7,609	0·17
1916	9	6,946	0·13
1917	10	7,052	0·14
1918	23	8,529	0·27
1919	18	6,992	0·26
1920	13	6,591	0·20
1921	9	6,285	0·14
1922	17	6,479	0·26
1923	11	5,986	0·18
1924	24	6,747	0·36
1925	26	6,037	0·43
Total	278	145,613	0·19

ABSTRACT FROM REGISTERS.

YEAR 1925.	Small Pox.	Measles.	Scarlet Fever.	Diphtheria.	Typhus.	Enteric Fever.	Pneumonia.	Inf. Diarr.	Other Diseases.	For Quarantine (Cottages).	Total.
Patients remaining in Hospitals and Isolation Cottages, on Saturday, January 3rd, 1925	..	1	190 (199)	40 (36)	..	..	2	1	18 (12)	..	252 (247)
Admitted from January 4th, 1925, to January 2nd, 1926	.. (8)	92 (102)	1,085 (1,197)	386 (274)	..	4 (7)	38 (56)	41 (45)	369 (299)	2 (83)	2,017 (2,071)
Total treated ..	.. (8)	93 (102)	1,275 (1,396)	426 (310)	..	4 (7)	40 (56)	42 (45)	387 (311)	2 (83)	2,269 (2,318)
Discharged ..	.. (8)	82 (93)	1,128 (1,186)	340 (245)	..	3 (6)	29 (36)	19 (26)	325 (268)	2 (83)	1,928 (1,951)
Died ..	..	10 (8)	16 (20)	37 (25)	..	1 (1)	10 (18)	23 (18)	34 (25)	..	131 (115)
Mortality per cent. ..	..	10.9 (7.9)	1.4 (1.7)	9.8 (9.3)	..	25.0 (14.3)	25.6 (33.3)	54.8 (40.9)	9.5 (8.5)	..	6.4 (5.6)
Patients remaining in Hospitals and Isolation Cottages, on Saturday, January 2nd, 1926	..	1 (1)	131 (190)	49 (40)	..	..	1 (2)	.. (1)	28 (18)	..	210 (252)

NOTE.—Bracketed figures are the corresponding figures of the previous year.

Hospital Accommodation.—I have again and again in previous reports alluded to the inadequacy of the hospital provision of this City. Year after year one is told of the large number of sick people awaiting admission to the voluntary institutions. What becomes of this long waiting list one can only surmise, but it must be obvious that if treatment is delayed indefinitely, irreparable damage may be done to the individual if indeed he still survives when his turn for admission arrives. The solution to the problem does not lie with the voluntary institution which finds it hard enough to carry on without adding to its already too heavy burden. There is, therefore, no alternative if the needs of the sick are to be adequately met but to appeal to the Municipality or the State. In saying that it must not be assumed that I am opposed to the voluntary system. I am not. I recognise, as indeed everyone must, that it has reached the limit of its capacity. The Poor Law is about to be reformed, and, as a result of the reformation the poor law infirmaries will probably pass into the hands of the local authorities. Many of these institutions are built and equipped on modern lines, and will make excellent ready-to-hand general hospitals. In that direction lies the solution to the hospital problem.

Comparative Statistics of the larger English Cities, 1925.

	RATE PER 1,000 POPULATION.					DEATH RATE PER 1,000 BIRTHS.	
	Population.	Birth Rate.	Death Rate.	Phthisis. Death Rate.	Other Tuberculosis. Rate.	Deaths under One Year.	Diarrhoea and Enteritis under 2.
London ..	4,602,000	17·9	11·9	0·95	0·17	68	10·8
Birmingham ..	952,766	18·7	11·7	0·98	0·16	78	11·3
Liverpool ..	842,968	23·3	14·1	1·25	0·27	99	21·1
Manchester ..	758,235	18·6	14·4	1·31	0·24	96	15·1
Sheffield ..	527,100 526,900	17·7	11·5	0·79	0·20	85	9·0
Leeds	472,900	17·3	12·8	1·08	0·19	91	18·2
Bristol	386,000 385,700	17·4	13·3	0·95	0·24	76	9·9
Hull	297,300	21·8	12·9	1·06	0·21	90	14·7
Bradford ..	290,200	16·6	14·0	0·77	0·15	96	8·3
Newcastle ..	287,100 286,300	21·6	13·6	1·20	0·35	88	10·5
Nottingham ..	270,600	19·1	13·8	1·02	0·17	96	10·2

SANITARY CIRCUMSTANCES.

Rivers and Streams.—In my report of 1920 I remarked on the condition of the river Aire which at that time was grossly polluted by the effluents from a number of sewage works on the outskirts of the City including that from the neighbouring City of Bradford. Since then some of these works have been abolished, whilst others have been reconstructed. The Bradford works are amongst those which have been reconstructed with the result that the quality of the effluent has been greatly improved and does not now pollute the river to the extent it did. But even so, the state of the river still leaves much to be desired. There is a great deal of wanton pollution by private individuals as well as by factories and public works. This is quite inexcusable. Unfortunately it is not always easy to find the culprits. A river or stream in the middle of a City forms a convenient dumping ground for refuse and garbage of all kinds and the only way to stop this deliberate fouling of the Aire is to have the banks patrolled and offenders punished.

As far as the smaller tributaries of the Aire are concerned—at least those within the boundaries of the City—the pollution of these has to some extent been minimised by the reduction in the number of cesspools which in former times, before sewers were available, were wont to overflow into them.

Water.—The water supply for the City is derived from the Washburn, a tributary of the Wharfe. It is collected into three storage reservoirs, Fewston, Swinsty and Eccup, the two first mentioned situated in the uplands between Otley and Pateley Bridge, and the third within a mile of the northern boundary of the City. The total capacity of the three reservoirs is 3,122 million gallons.

The total amount of water supplied to the City for the year ended March 31st, 1926, was 6,445,048,000 gallons which works out at an average of 17,657,665 gallons per day, a decrease of 42,943 gallons per day as compared with the previous year.

The supply in bulk to other Authorities during the year amounted to a total of 329,691,000 gallons, or an average daily consumption of 903,000 gallons, as against a daily consumption of 863,000 gallons during the year 1924-25.

The total number of persons supplied during the year was 519,586, as against 516,391 in the year 1924-25.

The daily average supply per head of the total population supplied during the year 1925-26 was 33·98, as against 34·29 gallons during the year 1924-25.

The supply for both trade and domestic purposes within the area of direct supply for the year 1925-26 was 6,115,357,000 gallons, or an average daily consumption of 16,754,402 gallons, equal to 35·17 gallons per head, as against 35·46 gallons during the year 1924-25.

The trade consumption within the area of direct supply during the year was 1,919,662,000 gallons, or an average of 5,259,000 gallons per day equal to 11·04 gallons per head per day, as against 11·31 gallons per head per day, during the year 1924-25.

The domestic consumption within the area of direct supply during the year was 4,195,695,000 gallons, or an average of 11,495,054 gallons per day, equal to 24·13 gallons per head per day, as against 24·15 gallons per head per day during the year 1924-25. The area of direct supply comprises the City of Leeds, Adel, Alwoodley, Wigton, Pudsey (part of), Calverley (part of), Farsley (part of), Weeton (part of), Pool (part of) and Arthington (part of), and the outside Authorities supplied in bulk are Rothwell U.D.C. (Rothwell), Hunslet R.D.C. (Oulton with Woodlesford, Temple Newsam, Halton, Whitkirk and Thorpe Stapleton), Garforth U.D.C., Tadcaster R.D.C. (Kippax Scheme, Barwick and Austhorpe) and Wharfedale R.D.C. (Leathley).

The minimum quantity of water in store at any time during the year was 1,570·23 million gallons on October 17th, and the minimum number of days of average supply was 89·00.

A new reservoir at Leighton in Colsterdale is in process of construction and may possibly be brought into commission during the current year. This reservoir when completed will have a capacity of 1,050 million gallons and will be a further addition to the water resources of the City.

Drainage and Sewerage.—As in previous years, representations have been made to the City Engineer's Department for sewer extensions to enable outlying property to be drained. In 1925

branch sewers of a total length of 1,460 yards were completed, which has allowed of the conversion of 32 privies, the abolition of 2 cesspools, the provision of 15 water closets and the connection of the drains of 54 houses.

Sewage Disposal.—The sewage of the City is disposed of at two main outfall works situated at Knostrop in Thorpe Stapleton, about three miles from the centre of the City to the south-east, and at Rodley about the same distance to the south-west. The former has been undergoing reconstruction since 1909 and when completed will deal with the sewage from practically the whole of the City with the exception of a small area on the south-western boundary which is served by the Rodley works. It is fully anticipated that the work at Knostrop will be finished in the course of another year or so. Already a great part of it is in active operation and when the new high level intercepting sewer is connected up the City will possess one of the finest and most up-to-date disposal works in the country.

The sewage works at Rodley are of a more limited capacity and deal with a smaller amount of sewage. During the five years they also have undergone reconstruction; two new bacterial beds with rotary sprinklers have been completed and further improvements are in progress.

The total length of sewers is 546 miles and the size of the main outfall sewer is 8 ft. by 7 ft. 9 in. high.

Scavenging and Cleansing.—The amount of household refuse including nightsoil collected by the Cleansing Department during the year was 168,465 tons, of which 71,725 tons were dealt with at the destructors, 96,504 tons at tips and for agricultural purposes and 236 tons sold as manure to farmers.

It will be observed that more refuse is tipped than is burnt and in view of the unsightly appearance of these tips as well as their danger to health it will be obvious that increased destructor capacity is required.

The public as well as the Cleansing Department has a duty in respect of refuse disposal and it would greatly help the latter if housewives exercised more care as to the kind of refuse placed in the ashpit or bin. All combustible material, especially that of an organic nature, should be excluded and the ashpit or bin reserved for dry, unburnable refuse only.

Dust.—The dry sweeping of streets, pavements, shop and warehouse floors, etc., is a practice much to be condemned as by the dust thus caused the air is polluted to a degree which is not only disagreeable but actually dangerous. Wet sweeping has not these disadvantages and should be adopted wherever possible.

Ashpits and Ashbins.—The total number of metal ashbins provided in response to notices from the Department during the year was 4,340. The sunken ashpit is admittedly a most dangerous and insanitary type of refuse receptacle. It cannot be properly cleansed and not being always water-tight the refuse inevitably becomes offensive. There are 2,048 ashpits of this type in the City. Every effort is made to induce property owners to discard the sunken ashpit and substitute the more sanitary metal ashbin, but the law does not empower the Department to deal with a sunken ashpit except as a nuisance or when it becomes dilapidated. The number of sunken ashpits abolished during the year was 154.

The policy of the Department in requiring one bin for each house has been continued. In certain localities the ashpit has been retained, as the site created by its abolition would not be sufficiently large to accommodate the requisite number of bins.

It cannot be gainsaid that the modern ashbin is preferable to the old fashioned ashpit and wherever possible landlords are urged to make the substitution.

Closet Accommodation.—During the year the work of converting trough-closets into modern pedestal water-closets has been continued. The number of such conversions was 559 or 84 in excess of the number for last year. The amount paid in compensation was £5,735 4s. 5d. as compared with £2,692 4s. 0d. for the preceding year. During the five years 1921-1925 inclusive the total number of trough-closets converted was 1,372. In addition to these 140 privies were dealt with, 127 being converted into pedestal water-closets and the remainder abolished. Four cesspools were abolished and 98 houses properly drained and connected to the sewer. During the five years 1921-1925 inclusive 627 privies have been converted into water-closets, 92 abolished, 71 cesspools filled in and 671 houses properly drained and connected to the sewer.

The general position with regard to the various types of sanitary conveniences in the City on December 31st, 1925, was as follows :— Privies, 332 ; Pail Closets, 94 ; Trough Closets, 8,222 ; and Water Closets approximately, 99,000.

TABLE SHEWING NUMBERS OF TROUGH CLOSETS, PRIVIES AND PAIL CLOSETS IN THE CITY DURING THE LAST TWENTY-ONE YEARS.

Year.	Trough Closets.	Privies.	Pail Closets.
1905	10,507	1,669	231
1906	10,461	1,193	229
1907	10,424	963	228
1908	10,410	875	202
1909	10,120	851	198
1910	10,047	821	165
1911	9,963	785	164
*1912	9,934	1,284	221
1913	9,790	1,269	217
1914	9,760	1,211	207
1915	9,738	1,047	188
1916	9,725	1,026	185
1917	9,723	1,023	169
1918	9,693	1,022	166
1919	9,655	1,014	166
†1920	9,594	1,051	155
1921	9,521	900	128
1922	9,324	651	111
1923	9,256	558	102
1924	8,781	472	101
1925	8,222	332	94

*Roundhay, Seacroft, Shadwell and Crossgates were brought within the city boundary in this year. In this area there were 502 privies and 61 pail closets.

†Middleton was brought within the city boundary in this year. In this area there were 148 privies.

Public Conveniences.—Works have been carried out during the year in connection with the construction or reconstruction of the public conveniences referred to in my last Report. The present position is as follows :—

In Course of Erection.—Junction of Jack Lane and Nineveh Road ; Cross Flatts Park ; East Street ; York Road Circus ; Cherry Row, Newtown ; Junction of Whitehall Road and Springwell Road ; *Holbeck Moor.

Tenders Accepted.—*Junction of Roundhay Road and North Street ; *Junction of Woodhouse Lane and Cookridge Street ; Junction of Low Road and Pepper Road ; Hunslet Lake.

With regard to the proposed conveniences at the Killingbeck and Lawnswood tram termini, a site has been obtained for the former but for the latter the matter is still under consideration.

The total number of urinal stalls in the new conveniences will be 75, water-closets for males 3, and water-closets for females 15.

Sanitary Inspection of District.—The standard of general inspectorial work reached in 1924 and during the last quinquennium has been fully maintained. Attention has been concentrated upon the remedying of defects in houses in order to render them fit for habitation, more especially those houses which, but for the stringency of the housing situation would have been closed.

The administration of the Rent and Mortgage Interest Restriction Acts 1920-1925, as far as these affect the Sanitary Authority, has been continued. Since these measures came into operation in July, 1920, up to the end of December, 1925, 1,062 applications for certificates have been received and 994 certificates and 22 reports issued. During the year under review 131 applications were received and 128 certificates and 4 reports issued. The explanation of the small number of reports issued is that in nearly all cases the work is done voluntarily by the owner on the presentation of the certificate by the tenant.

Notices.—The number of preliminary notices served during the year for the abatement of nuisances and for the repair of insanitary property was 9,329 and the number of statutory notices 3,025. Of the latter 2,108 were effective and 917 were outstanding at the end of the year. Compared with the previous year there was a decrease of 581 in the number of notices served which were effective, and an increase of 536 in the number of notices outstanding.

*Those marked with an asterisk include provision for females as well as for males,

Analysis of work done by District Inspectors in the several Wards, 1925.

Northern Division.											Southern Division.																
North.	North East.	New.	West.	Headingley.	Kirkstall.	Burley.	North West.	Bramswick.	Central.	Mill Hill.	Total.	HOUSE INSPECTION.						East.	South.	East Hunslet.	West Hunslet.	Holbeck.	New Wortley.	Armley and Wortley.	Bramley.	Total.	City Totals.
118	179	13	74	10	5	135	42	69	54	10	709	1. Houses and premises completely examined on account of	148	46	198	202	127	104	115	75	1,015	1,724					
3	1	..	6	8	..	44	228	3	3	6	302	2. Infectious disease	54	13	19	8	26	16	1	5	142	444					
29	..	..	74	1	74	113	93	30	27	50	497	3. House-to-house work	32	44	20	12	30	38	24	32	232	729					
1	12	..	9	5	1	5	12	1	11	..	57	4. Houses and premises examined only as to	..	14	28	25	19	5	5	5	101	158					
26	166	55	51	162	54	181	227	220	337	55	1,534	5. Alleged nuisances	512	307	134	568	840	179	753	104	3,397	4,931					
4	39	3	..	69	12	1	30	3	21	7	189	6. Drainage	..	1	27	133	134	4	36	3	338	527					
181	397	77	214	255	146	479	632	326	453	128	3,238	7. Number of houses wholly or partly examined	746	425	426	948	1,176	346	934	224	5,225	8,513					
47	222	43	54	234	64	246	540	194	370	39	2,053	8. Total number of above houses where sanitary defects or nuisances were found	534	343	182	546	972	224	760	126	3,687	5,740					
NUISANCES FOUND DURING ABOVE EXAMINATIONS AND DAILY INSPECTIONS.																											
48	13	1	12	1	..	10	14	12	57	3	170	9. Houses dirty	23	11	5	9	18	17	1	1	85	255					
7	22	..	7	8	..	1	22	8	49	..	126	10. Overcrowded houses	18	16	17	18	17	5	4	5	100	226					
115	281	48	290	45	18	153	402	319	239	79	1,989	11. Defective roofs, fallpipes and spouting, &c.	416	140	267	386	242	278	280	112	2,121	4,110					
42	62	5	61	22	2	24	5	29	55	9	316	12. Defective drains	40	8	57	157	61	22	70	213	628	944					
5	4	2	..	14	..	5	..	2	3	..	35	13. Houses without proper drains	..	..	..	2	2	4	40	89	137	172					
6	..	..	..	..	..	1	..	13	..	..	20	14. Houses without proper water supply	6	..	1	17	16	2	2	..	44	64					
..	..	..	..	..	..	..	..	..	..	..	10	15. Privies badly lighted or ventilated	..	7	..	..	..	..	..	2	9	19					
..	..	15	4	14	..	..	..	..	4	..	31	16. Additional closets required	..	..	..	3	..	2	14	73	87	118					
..	..	..	..	..	..	..	..	..	..	..	8	17. Pail closets	..	..	..	..	..	..	..	13	20	28					
4	334	12	94	22	6	83	92	5	134	18	806	18. Defective or unsuitable trough or water closets	39	83	142	210	224	209	136	64	1,107	1,913					
6	..	..	..	..	..	1	30	3	3	..	59	19. Ashpits (a) Sunk	1	2	11	14	9	8	22	2	69	128					
..	..	..	..	1	..	16	1	19	1	..	41	20. Ashpits (b) Other than sunken	..	1	18	14	24	25	22	34	138	179					
..	..	..	..	..	..	..	..	..	..	..	..	21. Houses with unsuitable or insufficient accommodation	390	156	419	472	389	289	539	299	2,953	5,514					
243	645	75	217	97	26	382	407	185	196	88	2,561	22. Dirty closets	45	11	17	5	6	55	4	4	147	446					
19	20	5	17	2	1	11	92	29	85	18	299																

Analysis of work done by District Inspectors in the several Wards, 1925—continued.

Northern Division.												Southern Division.											
North.	North East.	New.	West.	Headingley.	Kirkstall.	Burley.	North West.	Bramswick.	Central.	Mill Hill.	Total.	East.	South.	East Hunslet.	West Hunslet.	Holbeck.	New Wortley.	Armley and Wortley.	Bramley.	Total.	City Totals.		
2 136 297 1,076 63	22 125 293 2,123 157	1 30 42 241 6	1 132 262 1,350 15	4 33 38 302 26	1 11 10 100 11	3 69 127 1,166 24	62 124 506 2,075 268	42 136 229 1,035 54	74 154 190 1,237 22	19 55 90 523 29	230 1,005 2,084 11,228 675	23. 24. 25. 26. 27.	19 179 308 1,500 64	7 110 85 805 8	28 129 305 1,589 92	17 165 138 1,833 78	17 118 155 1,412 186	17 141 240 1,903 205	2 98 136 1,291 112	22 37 92 778 13	129 977 1,459 11,111 758	359 1,982 3,543 22,339 1,433	
33 2 1 1,030 13 61 639 158 184	55 1 1 2,035 26 118 1,880 328 349	26 2 1 271 9 86 81 764	15 3 2 1,132 2 13 201 209 225	11 3 3 347 2 92 450 167 314	1 11 2 93 1 18 185 11 76	16 7 13 964 52 69 675 157 49	20 12 8 2,057 20 43 1,115 232 294	20 119 1,119 83 201 1,372	51 9 6 1,336 14 36 390 225 710	22 1 9 440 15 7 337 276 487	269 2 44 10,824 149 477 6,047 2,045 4,824	28. 29. 30. 31. 32. 33. 34. 35. 36. 37.	12 179 308 1,500 64	21 110 85 805 8	15 129 305 1,589 92	86 118 155 1,412 186	6 14 2 15,17 1,500 1,541 1,517 1,088 11,209 22,033 106 255	23 98 136 1,291 112	11 37 92 778 13	188 977 1,459 11,111 758	457 1,982 3,543 22,339 1,433		
940 34 219 78 571 187	1,088 4 1 167 55 816 262	768 4 13 25 6 56 18	849 59 19 240 34 664 168	304 18 13 154 9 137 37	578 7 5 37 35 14	977 30 33 334 30 576 181	1,376 54 101 331 64 950 182	797 57 57 109 13 611 218	902 66 7 97 65 418 140	499 12 42 168 87 197 46	9,078 254 325 1,881 441 5,041 1,453	38. 39. 40. 41. 42. 43. 44.	1,587 49 14 169 84 721 210	808 18 5 91 48 483 74	1,245 58 79 208 124 679 263	1,069 39 19 158 174 65 504 224	362 49 11 174 65 504 224	962 5 4 59 113 162 143	8,155 304 151 995 661 4,288 1,572	17,233 *558 *476 2,876 1,102 9,329 3,025			
206 48 3	403 12 3	69 1 ..	123 15 2	83 1 ..	19 .. 2	339 9 5	445 32 9	140 7 2	125 57 35	57 10 1	2,009 192 62	45. 46. 47.	388 17 ..	102 5 ..	346 5 ..	333 2 2	306 18 3	422 16 7	227 1 ..	2,331 64 14	4,340 192 76		
NUISANCE ABATEMENT. Metal ashbins provided Houses cleansed... .. . Overcrowded houses dealt with																							

*In addition to the above, 345 visits were paid by the Workshops Inspectors to Offensive Trades; also 730 visits to premises (other than shops) where ice-cream is manufactured were paid by the two special inspectors who carry out this inspection along with other duties.

Legal Proceedings.—In fourteen cases legal proceedings were instituted for failure to carry out the requirements of notices served under the Public Health Acts. These included three cases of contravention of the bye-laws with respect to pig-keeping.

Complete details of the sanitary work are given on pages 44, 45 and 46.

Common Lodging Houses.—During the year the accommodation for men has remained unaltered. An additional house for women, with accommodation for 21 lodgers, at 30 Wheat Street, was registered.

The general standard of cleanliness of the houses has been well maintained and such complaints as have been received have been in respect of failure to carry out the bye-laws. Legal action has not been found necessary in any case, the owners or deputies agreeing to comply with the requirements of the Department on receipt of letter or notice.

I understand that the women's common lodging house at No. 54, Lady Lane will be abolished when the street improvements contemplated in this area are put in hand. Before this takes place alternative accommodation should be provided as, unless this is done, there will be a shortage of women's beds.

At the end of the year there were in the City 31 registered common lodging houses, 28 of which were for men and three for women. The total number of beds was 1,861, namely, 1,741 for males and 120 for females and children. In the 28 men's lodging houses there were accommodated during the year 54,688 permanent and 71,420 casual lodgers whilst in the two women's lodging houses (excluding 30, Wheat Street, registered on the 19th November, 1925) the numbers were 3,154 permanent lodgers, 4,134 casual lodgers and 439 children. The male beds provided were occupied on 454,236 occasions, the female on 26,212 occasions and the children's on 777 occasions.

In addition to the common lodging houses enumerated above there are four unregistered lodging houses, viz., three for men and one for women, which are under the control of the Salvation Army and the Church Army. These houses together possess 323 beds for men and 21 for women which during the year were occupied on 67,822 occasions by male and on 7,219 occasions by female lodgers.

COMMON LODGING-HOUSES.

Number registered—							
Men's	28	Beds available	1,741			..	..
Women's	3	"	"	120			
Routine visits paid	..	..	..	..		1,121	
Visits as to drain tests and abatements	..	..	..	..		174	
Visits to smallpox contacts	..	..	..	..		41	
Visits for infectious disease	..	..	..	..		2	
Nuisances found and abated:—						FOUND.	ABATED.
Dirty closets	..	..	..	..	..	17	17
Dirty rooms	..	..	..	..	..	32	32
Dirty bedding	..	..	..	..	..	71	71
Defective or stopped drains	..	..	..	..	..	..	..
Defective roofs or eaves spouts	..	..	..	..	..	19	17
Other nuisances	..	..	..	..	..	151	144
Total	..	..	..	..	..	290	281

HOUSES LET IN LODGINGS.

	HOUSES.	ROOMS.
Registered during 1925, let as furnished rooms	9	38
Removed from Register	29	94
On register at end of 1925	57	264
Houses let in lodgings visited though not registered	703	2,428
Houses examined (new lodgings)	64	220
Drains tested 107, in 40 houses		
Drains re-tested 19, in 9 houses		
Visits for abatement of nuisances .. 1,124		
„ infectious disease (14 cases) 26		
„ additional inspection .. 2,984		

Nuisances—	FOUND.	ABATED.
Dirty or bad bedding	75	75
Dirty rooms	151	147
Overcrowding	63	58
Dirty closets	14	13
Other nuisances	668	638
Structural defects	57	53

University Lodgings.—In accordance with established practice, lodgings which are to be placed on the register of approved premises for the use of students at the University have been inspected by the Public Health staff and the results reported to the University Authorities. Details of these inspections are as follows :—

New lodgings inspected during 1925, 8 houses with 20 rooms.

Houses previously examined :—inspected 113, with 344 rooms.

Drains tested :—282 drains in 73 houses.

Total number of visits to above houses, 130.

Details of the nuisances found and abated are included in the table under houses let-in-lodgings.

Residential Flats.—In 74 houses there are 370 flats to which 97 visits were paid. As a result of these visits defects to the number of 14 were abated. Particulars of the nuisances found and abated are set out in the table under houses let-in-lodgings.

Canal Boats.—During the year two new steel boats, each having a carrying capacity of 90 tons of petrol, have been registered. The boats are motor driven and generate their own electricity both for heating and lighting the cabins. These are the only boats on the register carrying petrol.

The Canal Boats Amendment Regulations, 1925, which are now in force will be of great assistance in dealing with boats which are not in a habitable condition owing to leaky decks, etc. Previously the Master was held responsible for seeing that his boat was in a good and habitable condition ; under the new Regulations the responsibility is placed upon the owner. Failure to carry out this obligation entails a penalty and/or suspension or cancellation of registration.

No cases of infectious disease have been notified and no sickness of any kind has been detected on any of the boats inspected. The general sanitary condition of all the cabins was satisfactory.

The work in connection with the registration and inspection of canal boats appears in the table appended.

CANAL BOATS.

Registered during the year 1925	8
Re-registered and Transferred to fresh owners ..	2
Struck off register (on revising register)	2
Remaining on register at end of year.. ..	164
Visits of inspection to wharves and locks	798
Complete inspections of boats (227 boats)	688
Cases of infectious disease	..
Cases of overcrowding	..
Dirty cabins	..
Absence of registration certificate	3
Boats not marked with registered number	8
„ not properly ventilated	..
„ requiring painting or repairing	4

Vans and Tents.—The new bye-laws introduced in June, 1923, have now been in operation for a period of twelve months and one is able to see considerable improvement in the general sanitary conditions of premises of this type, one of the results of which has been that fewer visits have been necessary. The summary action taken during 1924 for contraventions of these bye-laws has had a salutary effect.

VANS AND TENTS.

Visits to 224 vans during 1925	456
„ „ vans for infectious diseases (4 cases)	8
„ „ 13 tents	30
„ „ 44 camping grounds	198
Additional visits for nuisances	63
Nuisances—	
Dirty camping grounds	FOUND. ABATED.
Dirty vans and tents	I I
Overcrowded vans .. ..	.. ..
Camping grounds with no accommodation for van dwellers .. ..	.. ..
Other nuisances on camping grounds	49 45
	56 43

Ice Cream—Street Vendors, Shops and Sheds.—The conditions under which the manufacture and distribution of ice-cream is carried on in the City has shown marked improvement during the year. The printed instructions issued by the Health Committee in June, 1924 have had the effect of raising the general standard of the trade. Structural alterations were undertaken in 18 cases and every effort has been made by the majority of the traders to carry out the instructions both in spirit and letter.

ICE CREAM—STREET VENDORS AND SHEDS.

Ice cream sheds at end of 1925	74	visits 730
Number of vendors at end of 1925 ..	101	
Ice cream carts inspected	108	visits 262
Sheds unsuitable	19	
Sheds repaired	18	
Sheds closed	1	
Other visits in respect of abatements ..	50	
Nuisances—	FOUND.	ABATED.
Sheds requiring limewashing	12	12
Defective walls and floors	..	..
Defective drains	2	2
Other structural defects	11	11
Carts not marked	1	1
Total	26	26

Cellar Dwellings.—The following table has reference to the cellar dwellings existing in the City. These are not numerous and are kept under strict supervision.

CELLAR DWELLINGS.

Visits to 8 cellar dwellings	22
Visits to 42 new cellar dwellings	43
Nuisances—	
New cellar dwellings closed	42
Other Nuisances	1

Offensive Trades.—The City of Leeds (Offensive Trades) Confirmation Order, 1925, which came into force on the 27th of July augmented the list of offensive trades by the addition of nine trades not hitherto in the Schedule.

The trade of fish frier, which is included in the new Schedule, has a wide popularity, there being few districts in the City where one or more shops do not exist. The frying of fish can, under suitable conditions, be conducted in a manner which gives rise to no offence. The use of water-cooled condensers fitted to modern ranges eliminates all smell. In the past fish frying has been carried on in all sorts of premises, some structurally defective, others so badly ventilated that nuisance was bound to arise. Now that the Health Committee have power to refuse applications for the establishment of new shops they are in the position of being able to dictate their requirements and it may be assumed that these will be such as to secure a high standard of cleanliness and efficiency without being harsh or unreasonable. The use of coal for heating will be discouraged and gas-fired ranges will be recommended wherever possible.

The number of applications to establish the trade of fish frier dealt with from July to December was twelve, and of these two were refused.

The number of firms carrying on offensive trades (other than fish frying) was 82, and the number of fried-fish shops 479, making a total of 561 offensive trades of all kinds in the City.

The total number of visits of inspection made to offensive trades during the year was 903.

The provisions laid down in Section 63 of the Leeds Corporation Act, 1924 with regard to the separation of non-edible from edible fats have been carried out by the majority of the firms engaged in fat refining or fat melting.

Factories and Workshops.—In pages 54 and 55 will be found a complete summary of the work done under the Factory and Workshop Act, 1901, and in a separate table a report on the inspection of bakehouses.

In connection with premises where food for human consumption is prepared, manufactured, stored or sold, powers of a fairly comprehensive character are conferred on local authorities by Section 72 of the Public Health Act, 1925. The object of these is to secure the cleanliness of all articles of food as well as of the utensils in which they are stored or worked. The section supplies a long felt want in our sanitary legislation.

Plans.—The number of plans submitted to this Department in connection with sanitary works was 342, an increase of 15 over the figure for last year and is accounted for by the fact that all applications for the establishment of the trade of fish frying must be accompanied by plans of the premises where the trade is to be carried on.

Work of Women Inspectors.—Two women sanitary inspectors are constantly engaged in visiting the homes of outworkers, in carrying out investigations into outbreaks of infectious disease in factories, workshops and schools, and attending to complaints received from the factory inspectors or other sources as to sanitary defects affecting the health of the workers in factories and workshops.

The following is a summary of their work :—

Infectious Diseases.—The following visits were made :—

To schools (on account of 857 cases)	..	1,491
To absent pupils	.. .. .	79
To factories (90 cases)	.. .. .	157
To workshops (7 cases)	.. .. .	14
To workplaces, including restaurants (19 cases)		32
To absent employees	.. .. .	22

Outworkers.—Visits paid to the homes of outworkers numbered 2,176. In addition to these, 187 visits were paid to the premises of employers of outworkers.

Factories and Workshops.—Part of the work done by the women inspectors under this heading appears on pages 54 and 55.

In addition to that appearing in the table the following visits were paid :—

Factories	.. .. .	30
Workshops (routine and on complaint)		120
Workplaces and restaurants do.	..	104
Houses, on receipt of complaint	..	—
Public sanitary conveniences	.. .. .	97
Total	.. .. .	351

Nuisances found 32, abated, 28.

3. 4. 5.—OTHER MATTERS.

Homework :—	Number of		
	Lists.	Outworkers.	
		C.	W.
<i>List of Outworkers (S. 107) :—</i>			
(No homeworkers on our register except amongst those engaged in making wearing apparel)*	..	..	..
Lists received twice in the year	358	338	1,073
" once in the year	45	9	69
Addresses of) received from other Authorities ..		108	
outworkers) forwarded to other Authorities ..		5	
Notices to occupiers as to keeping or sending lists ..		573	
Prosecutions.. ..		..	
Inspection of Homeworkers' premises		971	
<i>Homework in unwholesome premises :—</i>			
Instances		19	
Notices		19	
Prosecutions.. ..		..	
<i>Homework in infected premises :—</i>			
Instances		1†	
Orders made (S. 110)		1	
Prosecutions (SS. 109, 110)		..	
[Infectious cases removed, disinfection carried out under ordinary powers.]			
Workshops on the Register (S. 131) at the end of year :—			
Ordinary (138 trades)		1,090	
Domestic (11 trades)		32	
Bakehouses on register as workshops		261	
Do. domestic		371	
Total number of workshops on Register		1,754	
Matters notified to H.M. Inspectors of Factories :—			
Failure to affix Abstract of the Factory and Workshop Act (S. 133)		39	
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factory Act (S. 5) {	Notified by H.M. Inspector ..	45	
	Reports (of action taken) sent to H.M. Inspectors..	42	
Other		..	
Underground Bakehouses (S. 101) :—			
Certificates granted during the year		..	
In use at the end of 1925		27	

* Two of the above lists (containing 8 workpeople) received twice a year—home workers engaged in nut cracking. All others in wearing apparel.

† Scarlet Fever patient.

The above table is that required by the Home Office and represents work done by the male workshops inspectors and by the women inspectors.

BAKEHOUSES.

WARD.	OVERGROUND.			UNDERGROUND.			Total visits to all.
	Em- ployees beyond family.	Work- shop bake- houses.	Domestic bake- houses.	Em- ployees beyond family.	Work- shop bake- houses.	Domestic bake- houses.	
Central	74	in 15	1	10	in 3	..	96
North	17	.. 8	26	..	..	4	203
North-East	36	.. 21	34	3	in. 1	..	129
*New Ward	11	.. 7	2	..	..	..	27
East	49	.. 25	24	..	..	..	169
South	20	.. 8	21	2	in 1	..	91
East Hunslet	13	.. 7	35	5	.. 2	..	208
West Hunslet	37	.. 18	34	3	.. 2	..	158
Holbeck	122	.. 11	26	..	..	..	335
Mill Hill	29	.. 10	9	..	..	..	214
West	49	.. 23	17	..	..	..	275
North-West	66	.. 13	37	10	in 4	2	331
Brunswick	39	.. 12	10	3	.. 1	..	114
New Wortley	25	.. 10	10	..	..	..	65
Armley & Wortley	52	.. 25	21	..	..	..	71
Bramley	19	.. 12	14	..	..	..	59
Headingley	68	.. 19	40	5	in 3	4	521
Totals.. ..	726	in 244	361	41	in 17	10	3,066

* Roundhay, Seacroft, Shadwell and Crossgates.

These visits made by Ward Inspectors only. This work is included in the figures given in table on page 45.

OTHER VISITS PAID BY MALE WORKSHOPS INSPECTORS.

	Factories.	Workshops.	Workplaces.
Non-abatements	174	275	48
Drain Inspection	21	74	6
Drains tested	49	9	36
Disease enquiries	56	11	13
River pollution	—	—	—
Complaints	82	29	13
Measurement of workrooms ..	—	156	—
Other causes	387	321	66
TOTAL	769	875	182

Rat Repression.—Particulars of the work done under the Rats and Mice Destruction Act are given in the subjoined table.

Complaints received	237
Premises inspected	680
Premises found to be more or less infested with rats	589
Premises cleared	250
Premises where infestation was diminished ..	339
Cases in which rat proofing was carried out ..	104
Cases in which drainage was found defective ..	59
Cases in which rat-catchers were employed ..	50
Premises with work in hand at end of year ..	65
Rats caught by ferrets, dogs, cats, traps, or killed by hand or found poisoned	3,235
Visits for purpose of observation, work in progress, or work done	1,123
Visits for other causes, such as appointments, interviews with owners and others, enquiries	140
Informal notices served	22
Notices complied with	14

A special endeavour was made during the first week in November—Rat Week—to interest the public and especially property owners in rat extermination. Special leaflets and a pamphlet on "Some Simple Suggestions on Rat Destruction" were circulated among the small shopkeepers in the City, as well as the owners of mills and warehouses inviting their co-operation in the Anti-Rat Campaign.

The Corporation has no official rat catcher. When necessity arises, as for example in the clearing of tips, mill-yards and other rat infested areas where dogs and ferrets have to be employed, private rat-catchers are engaged. The employment of a permanent officer for this purpose is desirable.

The Rag Flock Act, 1911.—During the past year six samples of rag flock were taken in the City and submitted to the City Analyst for analysis. Of the six samples, five were of flock manufactured in the City and one of flock manufactured outside. In every case the amount of soluble chlorine exceeded the standard of 30 parts per 100,000 laid down in the Regulations made under the Rag Flock Act.

Owing to a previous decision of the Court which called in question the accuracy of the existing definition of rag flock no action was taken. The position in Leeds with regard to rag flock at the present time is very unsatisfactory and until a clear definition of the term "rag flock" is arrived at the law must remain to all intents and purposes a dead letter at least so far as this area is concerned.

SMOKE.

During the year as a result of constant pressure by the smoke inspectors there has been a considerable diminution in the amount of factory smoke and hence an improvement in the state of the atmosphere. Progress is slow, but then it must be borne in mind that the present is hardly an opportune time for adding to the already heavy burdens which industry has to carry.

Legal proceedings were taken in four instances but with not very encouraging results. For some reason or other the Court is reluctant to convict for offences against the smoke laws. Unlike other offenders the smoke maker excites pity rather than condemnation though his offence is productive of more injury to health and is a greater menace to the safety and comfort of the people than say, that of the milk-man who waters his milk.

During the year the Department has been successful in persuading owners to fix mechanical stokers to their boilers in 20 instances with most satisfactory results. Of all the devices introduced with the object of controlling smoke emission, the one which gives the best results and certainly the one which has received the greatest commendation from manufacturers is the "mechanical stoker." The initial outlay in the installation of the appliance may be heavy but this is more than compensated for by the saving in the fuel bill. Wherever possible owners are urged to substitute electrical for steam power. As a matter of fact the demand for current at the present time is such as to tax the resources of the Electricity Department to their fullest extent. At the end of 1925, of the total number of factories using mechanical power in Leeds the following had substituted electricity for steam, either in whole or in part:—engineering, 75 per cent. ; clothing, 80 per cent. ; textile, 60 per cent. ; other trades, 90 per cent. These are remarkable figures and indicate how rapidly steam power, which connotes the use of raw coal and the emission of smoke and grit, is disappearing. I should like to direct attention to the table on page 62 which sets out in detail the work of the smoke inspectors for the year. It will be observed that the total number of chimneys exceeding the permissible time allowance of three minutes per hour was 92, or 21 less than the previous year and 110 less than 1923.

The total number of notices served for offences against the smoke laws was 76 which is about the same as for the previous year.

The Department is often criticised because of the small number of cases taken into Court, but the critics forget that in Leeds the number of exempt chimneys is as much as 40 per cent. of the total in addition to which the local Act of 1905, under which proceedings are taken, gives much greater latitude to the offender than does the Act of 1875. At present a new Bill is before Parliament, which, if it passes into Law, will do away with this anomaly and bring Leeds into line with other parts of the country.

As regards domestic smoke, efforts to induce householders to substitute gas or electricity for heating and cooking have been continued. Upwards of 1,000 circular letters, a copy of which is given below, were addressed to the owners of offices, warehouses,

shops, hotels and such places in the centre of the City asking them to consider the advisability of abandoning the use of raw coal for heating purposes and adopting smokeless methods.

" Dear Sir,

In furtherance of the efforts to obtain a clean atmosphere the Health Committee of the City Council desires me to draw the attention of owners and occupiers of offices, warehouses, shops and hotels to the vast amount of pollution resulting from the use of raw coal for heating and cooking purposes. My committee realises the difficulties of dealing with smoke from the purely domestic fire, but the same difficulties cannot be said to obtain in business premises. You will agree that a smoke-laden atmosphere is contrary to the best interests of the individual and the city as a whole, for whilst it endangers health it also causes damage to property amounting to thousands of pounds a year. I am, therefore, to ask you whether you do not think the time has now come when an earnest attempt should be made to rid the city of its smoke cloud, and to this end to enquire whether you would be willing to abandon the use of raw coal entirely and adopt smokeless methods of obtaining heat.

The change could be effected at comparatively little expense, and any extra cost would be more than compensated for by the greater degree of cleanliness, comfort and health resulting. If all proprietors and occupiers of premises of the type above mentioned will approach the question from the standpoint of the common welfare of the people, I do not doubt that there will be a good response to the Health Committee's request."

How far these letters had the desired effect is impossible to say, but judging from the number of enquiries received at the Gas and Electricity Departments, one may assume that a good deal of interest in the subject was aroused. Until something can be done to control the emission of smoke from public buildings, such as those mentioned in the circular, little progress will be made in the abatement of the smoke nuisance as far as the centre of the City is concerned.

Householders, generally speaking, throughout the City are becoming more and more interested in the subject, and gas, electricity and coke are undoubtedly increasing in popularity. Tradition in this as in other sections of Public Health work is the great bar to progress. The coal fire has become a fetish with many people and they refuse to consider any alternative. I am convinced, however, that once the popular prejudice to the use of coal substitutes is overcome—and amongst certain sections of the community it is disappearing—we shall be well on the way towards the attainment of our ideal. What is needed at the present time is a good coke of a standard quality which will burn in the ordinary domestic grate

and which householders can buy in small quantities. The objection that coke will not burn in an ordinary grate, is not well founded. If used properly it burns quite readily and makes a hot, clear fire. In coke probably lies the solution to the smoke problem but it must be made from good coal, conform to a recognised standard of thermal efficiency and be properly graded.

During the year two Committees have been sitting in Leeds to deal with the question of Smoke Abatement; one in connection with the Tercentenary Celebrations and the other representative of the principal local Health Authorities in the West Riding of Yorkshire. The former has recently issued its report in the form of a booklet which can be obtained by the public for the small sum of three pence. It is written in a popular style and deals with every phase of the subject. Every citizen interested in the welfare of his City should obtain a copy and peruse it for himself.

As regards the latter—the West Riding of Yorkshire Regional Smoke Abatement Committee—it has also produced a report which will be circulated to the various Local Authorities represented at the inaugural conference. It embodies many important recommendations which if adopted by the constituent authorities should go a long way towards securing uniformity of administration throughout the area.

The following are some of the more important recommendations included in the report.

- (1) "That the constituent authorities adopt a permissible standard allowance of black smoke not exceeding 2 minutes in 30."
- (2) "That systematic observations be taken and that all chimneys be covered within a period of three months."
- (3) "That the definition of black smoke be smoke of such a density which when observed at right angles to the line of drift, is impenetrable to vision."
- (4) "That the attention of the Government be directed to the serious nuisance caused by the emission of grit from chimneys and that provision be made in any future legislation promoted by the Government for its control."
- (5) "That as an inducement to manufacturers to substitute electricity for steam power representations be made to the Electricity Committees of the various local authorities and to private Electric Power Companies to reduce the price of electricity."
- (6) "That the attention of the Ministry of Health be directed to the difficulties experienced by smoke inspectors in obtaining convictions in cases tried before local magistrates even where there is clear proof of breach of the law."

- (7) "That the Council of any Local Authority shall have power to require the submission to them of any plans for the construction or reconstruction of any plant that may cause the emission of smoke or grit so as to be a nuisance and to require such alteration to the same as they may decide upon."
- (8) "That the Council of any Local Authority shall have power to require the reconstruction of any defective plant which causes the emission of smoke or grit so as to be a nuisance and to have plans of the proposed alteration submitted to them and to require such further alteration as they may decide upon."
- (9) "That the various constituent authorities be recommended to :—
 (a) Instal smokeless methods in their new houses wherever such a course is practicable.
 (b) Advise the occupiers of houses and offices to adopt smokeless methods and to encourage them to do so in every way possible, particularly by the provision of cheap gas, electricity, and a coke suitable for domestic use."
- (10) "That local authorities be required to examine plans of any houses to be erected with the object of securing the best type of heating appliance of an approved specification to enable any type of smokeless fuel to be burnt."

The work of the smoke inspectors is given in detail in the subjoined table.

	(1)	1925.	1924.
Furnaces inspected		3,036	3,612
Observation of chimneys (1 hour each) ..	..	4,373	6,773
Number of minutes dense smoke	..	3,397	4,770
Average duration of dense smoke per observation of one hour		0 mins. 47 secs.	0 mins. 42 secs.
Number of chimneys found emitting dense smoke three minutes per hour		92	113
Smoke prevention appliances adapted to furnaces		20	10
Furnaces altered or reconstructed		69	67
Furnaces superseded, plant electrified ..	..	—	4
Firms who have adopted smokeless fuel ..	..	30	6
Chimneys newly erected		4	8
Furnaces in connection with new chimneys		7	9
Notices served on manufacturers		25	7
Notices served on stokers		51	70
Prosecutions		4	2
Total amount in fines		To pay costs.	To pay costs.

SMOKE OBSERVATIONS, 1921-1925.

(2)

Year.	Observations of Chimneys (1 hour each).	No. of Chimneys found emitting dense smoke (three minutes per hour).	Percentage to observations.
1921	3,286	281	8.6
1922	3,853	275	7.1
1923	6,007	202	3.3
1924	6,773	113	1.7
1925	4,373	92	2.1

Sunshine.—With the object of determining the amount of active sunlight in the City, gauges have been fixed in various parts, viz. :—Park Square ; Powell Street, Hunslet ; Filter Beds, Headingley ; All Saints' Church, York Road ; and Oakwood Lane, Roundhay. These gauges consist of quartz tubes filled with a standard solution of acetone methylene blue. They are exposed for 24 hours, at the end of which time they are removed and fresh tubes substituted. The amount of bleaching in the methylene blue solution is determined by comparison with a series of standard tubes and from the result the actinic value of the light at the particular station is estimated. The mean for each quarter of the year (so far as the dates are complete) has been calculated for each station and from the figures it would appear that the parts of the City with the highest records are Roundhay and Headingley whilst those with the lowest are York Road and Hunslet.

Schools.—Generally speaking, the sanitary condition of the public elementary schools of the City is good. In some of the older or church schools the lighting and ventilation is not as satisfactory as it might be, and the water closet accommodation is insufficient. During the five years, since my last survey report was published, several of the schools have undergone improvement which has had the effect of bringing the buildings more up-to-date especially as regards the number and type of the sanitary conveniences. In one case where pails were in use modern water closets have been substituted and the school buildings properly drained to the sewer.

LEGISLATION IN FORCE.

The following is a list of Acts relating to the Public Health in force in Leeds :—

GENERAL ACTS.

The Public Health Act, 1875.
 The Public Health Acts Amendment Act, 1890 (Part III.).
 The Public Health Act, 1907 (Sec. 19, 36, 37, 51).
 The Public Health Act, 1925.
 The Bakehouse Regulation Act, 1863.
 The Infant Life Protection Act, 1872.
 The Midwives Acts, 1902 and 1918.
 The Sale of Food and Drugs Acts, 1875 to 1907.
 The Margarine Act, 1887.
 The Butter and Margarine Act, 1907.
 The Fertilisers and Feeding Stuffs Act, 1906.
 The Rivers Pollution Prevention Act, 1876.
 The Local Government Act, 1888 (relating to Pollution of Rivers).
 The Canal Boats Acts, 1877 and 1884.
 The Sale of Horseflesh, &c. Regulation Act, 1889.
 The Factory and Workshop Acts, 1883, 1891, 1895, 1901.
 The Infectious Disease (Notification) Act, 1889.
 The Infectious Disease (Prevention) Act, 1890.
 The Public Health (Venereal Diseases) Regulations, 1916.
 The Vaccination Acts, 1867 to 1898.
 The Cleansing of Persons Act, 1897.
 The Public Health (Tuberculosis) Act, 1921.
 The Milk and Dairies (Consolidation) Act, 1915.
 The Milk and Dairies (Amendment) Act, 1922.
 The Alkali, &c. Works Regulation Act, 1906.
 The Rag Flock Act, 1911.
 The Rats and Mice (Destruction) Act, 1919.
 The Maternity and Child Welfare Act, 1918.
 The Diseases of Animals Acts, 1894 to 1925.
 The Notification of Births Act, 1907.
 The Housing Act, 1925.
 The National Insurance Act, 1911 (Provision of Sanatoria).

LOCAL ACTS.

The Leeds Corporation (General Powers) Act, 1901.
 The Leeds Corporation (Consolidation) Act, 1905.
 The Leeds Corporation Act, 1924.

BYE-LAWS.

Common Lodging-houses, 1876.
 Houses-let-in-Lodgings, 1876.
 Pigstyes and Keeping of Swine, 1913.
 Slaughterhouses (Public Abattoirs), 1922.
 Slaughterhouses (Privately Owned), 1922.
 Tents, Vans, Sheds and similar Structures, 1923.

REGULATIONS.

Connection of Drains to Sewers.
 Dairies, Cowsheds and Milk Shops.
 Underground Sleeping Places, 1923.
 The Public Health (Milk and Cream) Regulations, 1912.

FOOD.

In previous reports I have remarked on the need for wider powers to deal with the use of preservatives in food and to ensure its cleanly storage and handling. The year which we are reviewing, 1925, saw a very definite attempt made to secure these objects. A Departmental Committee was appointed in 1924 to enquire into the whole question of preservatives in food. As a result of the enquiry special regulations known as The Public Health (Preservatives, etc., in Food) Regulations, 1925, were issued which embody most of the recommendations made in the aforementioned report. These regulations come into force as regards some articles of food on the 1st July, 1927, and as regards others on the 1st July, 1928. Briefly stated, they prohibit entirely the use of any preservative other than those indicated in the schedule appended to the regulations.

Another very important measure dealing with food, The Public Health Act, 1925, came into force in September. This Act includes a section which demands that any room in which food, other than food contained in receptacles so closed as to exclude all risk of contamination, is prepared, stored or sold shall be maintained in a clean and sanitary condition. Powers are also given to the Medical Officers of Health, Sanitary Inspectors or other duly authorised officers of Local Authorities at all reasonable times to enter and inspect any room to which the Act applies for the purpose of ascertaining whether the provisions of the section are being complied with. Contravention of or failure to comply with the section renders the person responsible liable to a penalty. These powers will be welcomed by all Local Authorities and should have the effect of closing many places which are totally unsuitable for the storage or preparation of food.

Milk.—The dangers of a dirty milk supply have been emphasized again and again in these reports. Last year I found it necessary in my annual report to animadvert in rather severe terms on the

non-progressive methods of the milk producers in the City. If I condemned in 1924, I am all the more pleased to be able to praise in 1925. At the close of 1924 there was not a single dairy farm within the City boundaries producing graded milk and only one licence had been issued to a dairyman for its distribution. The contrast at the end of 1925 was certainly remarkable. No fewer than four producer's licences and 160 distributor's licences had been issued. And whereas at the end of 1924 the amount of graded milk sold in the City was only 30 gallons a day approximately, at the end of 1925 it had increased to 850 gallons, comprising 30 gallons of "Certified" milk, 100 of "Grade A (Tuberculin Tested)" milk, and 720 of "Grade A" milk. That, it must be admitted, is a remarkable result and one on which farmers and distributors alike are to be warmly congratulated. If progress is maintained at the same rate the ideal for which we are striving, namely, the abolition of the milk-can and the substitution of the sealed bottle will be realised within the lifetime of this generation.

For some years Mr. J. A. Dixon, the veterinary inspector on the staff of the Department, to whom I should like to pay a well-merited tribute for the exceedingly good work he has done in connection with the improvement of the milk supply in Leeds, has kept records of his inspections of the farms, cows, and cowsheds within the City. A year or two ago a system of marking was adopted by which each farmer was credited with so many marks for the condition of his cows and cowsheds, the cleanliness of his utensils, and the methods of production. These were recorded on a score card designed for the purpose and in this way it was possible to keep the farmer informed of his progress, to show him his mistakes and explain the reasons for his failure. It was but a short step from that to the holding of what, for want of a better term, has been called a "Clean Milk" Competition—it was not a competition in the real sense of the term inasmuch as the farmer had no choice as to whether he took part in it or not. The object of the competition was to stimulate interest amongst the farmers in the production of clean milk and particularly in the production

of graded milk. One of the reasons for the farmer's reluctance to take up the production of graded milk was that he was under the impression that it entailed a heavy outlay of capital. This may be true of "Certified" and "Grade A. (T.T.)" milk but it certainly is not of "Grade A.," and it occurred to me that a competition of the kind I am about to describe would have the effect of removing this misconception. The competition was launched on the 1st of January, 1925, and continued throughout the year. At the end of the year the score cards were examined and a classification made of the results which were then embodied in a special report presented to the Health Committee.

The report is reproduced in full hereunder.

CLEAN MILK COMPETITION, 1925.

With the object of ascertaining the quality of milk produced at the various dairy farms within the city boundary a Clean Milk Competition was inaugurated in January, 1925, and continued throughout the year.

All the farms were visited once each quarter by the Veterinary Inspector who examined the cows, cowsheds, dairies and appliances, and the farm yards and surroundings, and awarded marks in accordance with a special mark sheet drawn up for the purpose. A facsimile of the mark sheet is appended to this report.

The Veterinary Inspector's visit was followed up by a visit from the Inspector of Dairies and Cowsheds who saw the cows milked, observed the methods employed, and took samples of the milk from the churns at the completion of milking and just before despatch to the retailers. One sample measuring a quart was filtered through a special apparatus designed for the purpose, the Tustmun Sediment Filter, which showed on a piece of white lint, the amount of visible dirt in the shape of dung, straw, etc., present. The second sample of about a half pint was placed in an ice box and conveyed to the laboratory at the Public Health Department, where it was examined for:—

- (a) Keeping properties.
- (b) The number of bacteria of all kinds present in 1 c.c.
- (c) The number of intestinal bacteria or B. Coli.

The standard adopted for these tests was that laid down in the Milk (Special Designations) Order of 1923, for "Grade A" milk.

Marks were given in accordance with the results of the tests which were added to the total obtained at the farm.

The total number of dairy farms taking part in the Competition throughout the whole year was 127, 125 in the City and 2 outside. The average number of cows in milk throughout the year was 1,932. Each farm was inspected on at least four occasions by the Veterinary Inspector, making a total of 563 inspections, and each cow was examined on at least four occasions, making a total of 7,738 examinations. The total number of samples taken for all tests was 1,032.

The following is a summary of the results :—

Number of Producers :—

City Council Farms	..	..	..	..	2
Farms in the County area adjoining	..	..	..	..	2
Private producers in the City	..	..	..	..	123
Total					127

Maximum marks	..	..	..	..	..	1,600
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Obtaining 90 per cent. and over ..	3—two City Council farms and one private producer in the City.
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Obtaining 80 per cent. and less than 90 per cent.	10—two County farms and 8 private producers in the City.
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Obtaining 75 per cent. and less than 80 per cent.	17 private producers in the City.
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Obtaining 60 per cent. and less than 75 per cent.	92 private producers in the City.
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Obtaining less than 60 per cent. ..	5 private producers in the City.
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The subjoined table shows the progress for the four quarters of the year.

	1st	2nd	3rd	4th
Samples up to "Grade A" bacterial standard	48	40	45	54
Average keeping (in days) ..	2.3	1.75	1.70	2.5
Average marks for sediment (maximum marks, 30) ..	16.5	17.60	19.30	23.2
Average marks for bacterial count (maximum marks, 40)	23.6	25.62	28.40	27.7
Farms using coolers	20	35	40	38

It is proposed to award First Class Certificates to producers obtaining over 75 per cent. of the total marks, and second Class Certificates to those obtaining 60 per cent. and under 75 per cent. On that basis, thirty producers get First Class Certificates, and ninety-two Second Class Certificates, whilst five have failed to qualify for any certificate.

MARK SHEET.

District..... No.....

Farm Address.....

Occupier's Name

Owner's Name

	Maxi- mum Marks.	Date	Date	
Cows :—				
Health	50			
Cleanliness	50			
Total	100			
Sheds :—				
Structure	30			
Cleanliness	50			
Lighting	15			
Ventilation	15			
Water Supply	5			
Paving and Drainage	5			
Yard	10			
Total	130			
Milk Handling :—				
Dairy	20			
Cooler	30			
Cleanliness of Vessels and Methods	20			
Total	70			
Milk Sample :—				
Sediment	30			
Bacterial Content	40			
Keeping Properties	30			
Total	100			
GRAND TOTAL	400			

PUBLIC HEALTH DEPARTMENT,
LEEDS.

18th February, 1926.

The results of the competition were certainly encouraging. That as many as 30 or 23.6 per cent. of the total farms in the city were producing milk of "Grade A" Standard was a pleasing and reassuring discovery. During the progress of the competition and since the publication of the results 4 farmers of the 30 have applied for and received licences to produce "Grade A" milk, and there seems no reason why the remaining 26 should not follow their example. I hope shortly to issue a report giving in greater detail than was possible in the report presented to the Health Committee the facts and figures of the competition.

By no means the least important outcome of the competition has been the raising of the standard of milk production generally throughout the City. The interest aroused amongst the farmers was very keen as was evidenced by the eagerness with which they looked forward to the visit of the inspector to make his periodical examination. An unsatisfactory report invariably gave rise to a train of questions or sometimes explanations, a proof that the desire to do well was present. It may be asked was the competition worth the time and money spent upon it? I should answer that question by an emphatic affirmative, as also, I doubt not, would many of the competitors.

Laboratory Work.—One of the indirect results of the competition has been the resuscitation of the departmental laboratory. The need for a laboratory to deal with the samples of milk from the various farms became apparent as soon as the competition started. Since its completion the ever increasing number of licences makes it imperative to provide facilities for the examination of the samples which in every case the licence demands. The laboratory has therefore been retained and an attendant appointed to look after it and be responsible for carrying out the examinations and keeping the records. In connection with the laboratory it may be observed that a general invitation to visit it and see the work in progress has been given to the local branch of the National Farmers' Union. Many farmers have already taken advantage of the invitation and judging from their remarks and the questions asked have been impressed by what they have seen and heard.

During the year 588 samples were examined including those in connection with the milk competition.

Graded Milk and Issue of Licences.—

LICENCES ISSUED UNDER THE MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

Description of Licences.	Number in force on 31st December, 1925.
(1) Producers' Licences to use the designation "Grade A"	4
(2) Dealers' licences to use the designation "Certified"	1
(3) Dealers' licences to use the designation "Grade A (Tuberculin Tested)":—	
(a) Bottling establishments	2
(b) Shops	57
(4) Dealers' licences to use the designation "Grade A":—	
(a) Bottling establishments	—
(b) Shops	100
(5) Dealers' licences to use the designation "Pasteurised":—	
(a) Pasteurising establishments	—
(b) Shops	—

The amount of graded milk produced per day in the City approximates 270 gallons, all of which is bottled at the place of production.

The cows are inspected at least once a month by the veterinary inspector who presents a report on his inspection with any criticisms or remarks he wishes to make. In the interval between the veterinary inspector's visits the farms are visited by the dairy and cowsheds inspector who sees that the premises are maintained in a cleanly and proper condition and that the methods of production employed are such as not to endanger the purity of the milk. He also takes samples which he transmits to the laboratory for examination.

Apart from the graded milk produced in the City, the following amounts are imported by road or rail every day, "Certified" milk, 30 gallons; "Grade A. (T.T.)," milk 100 gallons; "Grade A" milk, 450 gallons.

The two City Council farms at Temple Newsam and Skelton Grange produce milk of "Grade A" quality which is consumed at the hospitals and other institutions belonging to the Corporation. The amount produced at both farms is approximately 150 gallons per day. Both farms are regularly inspected and reported upon just as in the case of "Grade A" farms.

Cows and Cowsheds.—The total number of farms in the City visited for purposes of inspection of cows and cowsheds was 139, and the total number of visits paid 563. At nine of the farms there were no cows kept; 12 farmers discontinued and five commenced the keeping of dairy cows during the year, leaving at the end of the year a total of 132 farms in use as dairy farms in the City. The number of cows examined was 2,039, and the total examinations made 7,738. At 6,976 (or 90·1 per cent.) of the examinations the cows were found to be clean, and at 762 (or 9·9 per cent.) dirty. As regards the health of 2,039 cows examined, 29 (or 1·4 per cent.) were found to be diseased, six (or 0·3 per cent.) having tuberculosis of the udder, five (or 0·2 per cent.) generalised tuberculosis, and 18 (or 0·9 per cent.) diseases other than tuberculosis. In every case where tuberculosis was diagnosed the farmer was instructed to isolate the cow from the rest of the herd, and destroy the milk.

The number of cowsheds inspected was 213 and the total number of inspections 850, whilst the number of yards inspected was 130 with a total of 520 inspections. At 756 (or 88·9 per cent.) of the visits the sheds were reported clean, whilst at 94 (or 11·1 per cent.) they were dirty; the yards at 401 (or 77·1 per cent.) of the visits were clean and dirty at 119 (or 22·9 per cent.) of the visits.

The number of cows suffering from tuberculosis of all forms was 0·5 per cent. as against 0·6 for the previous year. Taking the figures for the previous five years which work at an average of 0·6 per cent. the year 1925 compares very favourably; indeed it is the lowest figure recorded since 1920.

As regard the cleanliness of the cows that still leaves something to be desired. That 9.8 per cent. were found to be dirty is not creditable and shows that certain farmers still fail to appreciate the close association between dirty cows and unclean milk. If we are to have a clean milk supply the cleanliness must start at the source, which is the cow.

As regards the cleanliness of the sheds and yards that shows a slight improvement as compared with the previous year. There is still a number of sheds in use in the City which are unsuitable and should be abolished.

Tuberculosis Order.—The Tuberculosis Order of 1913, which was suspended on the outbreak of War in 1914, was re-introduced last year. It came into operation on September 1st, and as previously was referred by the City Council to the Health Committee. The Order of 1925 is designed practically on the same lines as its predecessor and confers powers on Local Authorities to deal with dairy cattle suffering from tuberculosis.

The total number of cows dealt with under the Order since September 1st was nine—four reported by the owners and five discovered by the Veterinary Inspector in the course of his quarterly inspections. The total amount of compensation paid by the City Council less the amount recovered as salvage (£9 1s. 11d.) was £22 3s. 1d., of which the Government finds 75 per cent. or £16 12s. 4d., leaving the remainder, £5 10s. 9d., to be borne by the rates—surely a very moderate amount to pay for such a valuable service to the Public Health.

I may be permitted to remind dairy farmers that the Order places upon them the obligation of notifying to the Inspector of the Local Authority any cow suffering or suspected to be suffering from or showing signs of tuberculosis. Failure to do so exposes the offender to a penalty.

Inspection of Dairy Farms and Milkshops.—The following table shows the number of registered dairy farms and milk retailers in the City on December 31st, and gives a summary of the work done by the Food and Drugs Inspectors and Dairies and Cowsheds Inspector.

Number of registered milk retailers in the City	..	440
Number of registered dairy farms in the City	..	139
Number discontinued during year	.. ..	12
Number commenced during year	.. ..	5
Number in use at end of year	.. ..	132
New cowsheds built	.. ..	—
Cowsheds improved or reconstructed	.. ..	6
New dairies built	.. ..	3
Visits to milkshops	.. ..	1,304
Visits to cowsheds	.. ..	578
Visits to railway stations	.. ..	684
Visits to farms or milkshops re infectious disease	..	17
Visits to food shops and bottled milk stores	..	842

Milk and Food Analysis.—The subjoined tables set out the number of samples of milk taken during the year and examined by the City Analyst, with information as to quality and composition and results of Court proceedings.

SAMPLES OF MILK AND CREAM SENT TO THE CITY
ANALYST FOR EXAMINATION DURING 1925.

Article.	Genuine.	Adul- terated.	Total.	Taken formally.		Taken informally.	
				Genuine.	Adul- terated.	Genuine.	Adul- terated.
Milk	817	44	861	800	43	17	1
Skim Milk	..	..	..	..	..	..	..
Cream	4	..	4	4	..	..	..
TOTAL	821	44	865	804	43	17	1
				847		18	

The average composition of the 865 milk samples taken during the year was :—

	1925.	Standard.
Non-fatty solids ..	9.07 per cent.	8.50 per cent.
Fat	3.77 „	3.00 „
Total solids ..	12.84 per cent.	11.50 per cent.

Of the 44 samples of milk found to be adulterated, 16 were adulterated by the addition of water, 20 by the partial abstraction of fat, three by the addition of water and the partial abstraction of fat, one by the addition of preservatives and the partial abstraction of fat, and four by the addition of preservatives.

The largest amount of added water found in any sample was 25.0 per cent. whilst the most serious deficiency of fat was 45.7 per cent.

The largest amount of preservative found was 0.036 per cent. of boric acid.

SUMMONSES ISSUED DURING 1925, UNDER THE SALE OF FOOD AND DRUGS ACTS.

No. of Sample	Article.	Adulteration or Offence.	Fines. £ s. d.	Remarks.
74	Milk ..	10.4% added water ..	1 0 0	and costs ; retailer.
207	Do. ..	45.7% fat deficient ..	0 10 0	and costs ; retailer.
273	Do. ..	30.0% do. ..	..	to pay costs ; retailer.
406	Vinegar	12.5% acetic acid deficient	..	do. do.
408	Do.	20.0% do. ..	..	do. do.
434	Milk ..	6.6% added water ..	2 0 0	retailer.
447	Do. ..	14.8% do. ..	..	to pay costs ; retailer
507	Whiskey	4.9% do. ..	5 0 0	and costs ; publican.
			£8 10 0	

Milk Samples tested by the Gerber Method.—During the year 476 samples of milk were tested in the departmental laboratory by the food and drugs inspectors themselves, the results of which were as follows :—

Total.	Genuine.	Deficient in fat only.	Deficient in Solids-not-fat only.	Deficient in fat and Solids-not-fat.
*476	406	33	29	8

* These were all informal samples.

Guinea Pig Tests.—During the year in addition to the samples of milk submitted to the City Analyst, 77 samples were sent to the School of Medicine for examination for the presence of the tubercule bacillus. Five (or 6.5 per cent.) were returned as positive, all being from farms outside the City.

The Veterinary Inspector followed these up by a personal visit of inspection to the farms and examined 60 cows. As a result he reported cows at two farms as being affected with tuberculosis and took the necessary steps to have them isolated. The source of infection in the other three cases was not discovered.

Special Bacterial Tests.—Besides the 77 samples mentioned above, 20 samples were submitted to the City Bacteriologist for bacteriological analysis content. Three were samples taken from the Corporation farms at Temple Newsam and Skelton Grange, 13 were samples of graded milk, whilst the remaining four samples were of ordinary milk. All but eight were returned as having a bacterial content within the standard prescribed by the Ministry of Health for "Grade A" milk.

Milk and Cream Regulations.—All samples of milk submitted to the Analyst were tested for the presence of preservatives. Five of the samples taken formally were found to contain boric compounds but as the amount present in each case was so small proceedings were not taken. The retailers were warned in each case by letter from the Medical Officer of Health.

One sample of fresh cream proved on analysis to contain preservative. The retailer pleaded ignorance and was warned.

Food and Drugs.—The Food and Drugs inspectors paid 842 visits to shops and other premises in connection with the administration of the Sale of Foods and Drugs, and Margarine Acts, and took 157 formal samples and four informal samples, the result of the analysis of which appears in the subjoined table.

SAMPLES OF FOOD OTHER THAN MILK AND CREAM, SENT TO
THE CITY ANALYST FOR EXAMINATION DURING 1925.

Article.	Genuine.	Adul- terated.	Total.	Taken formally.		Taken informally.	
				Genuine.	Adul- terated.	Genuine.	Adul- terated.
Butter	20	..	20	20	..	..	..
Lard	22	..	22	22	..	..	..
Jam	17	..	17	17	..	..	..
Rice	2	2	4	2	2	..	..
Vinegar	22	3	25	22	3	..	..
Malt Vinegar ..	8	1	9	8	1	..	..
Whiskey	7	1	8	7	1	..	..
Rum	4	..	4	4	..	..	..
Baking Powder ..	6	..	6	6	..	..	..
Ground Rice ..	2	..	2	2	..	..	..
Cordials	3	5	8	3	5	..	..
Sugar	2	..	2	2	..	..	..
Kali	3	..	3	3	..	..	..
Rum and Coffee ..	1	..	1	..	..	1	..
Flour	4	..	4	4	..	..	..
Pepper	5	..	5	5	..	..	..
Chocolate	1	..	1	1	..	..	..
Lemon Cheese ..	1	3	4	..	2	1	1
Water	1	..	1	..	..	1	..
Condensed Milk ..	14	..	14	14	..	..	..
Health Salts ..	1	..	1	1	..	..	..
TOTAL	146	15	161	143	14	3	1
				157		4	

MEAT.

During the year the Public Health (Meat) Regulations, 1924, came into force. To carry out the provisions of these regulations efficiently necessitated the appointment of an additional lay inspector, thus increasing the staff of lay inspectors to three. The duties of these lay inspectors are as far as possible clearly defined. The senior assistant is in charge of the Public Abattoir and is responsible for all food stuffs in the Kirkgate Market as well as the supervision of the slaughterhouses in the neighbourhood of the abattoir. The other two assistants are engaged in visiting the private slaughterhouses throughout the City. The Chief Meat Inspector, Mr. J. A. Dixon, M.R.C.V.S., maintains a general supervision over the whole of the work and himself relieves the inspector at the Public Abattoir when the latter is off duty or engaged in some other work. A considerable amount of slaughtering still takes place on Sundays which entails the employment of an inspector to examine the carcasses. This Sunday duty is taken in turn by the assistant inspectors.

Speaking generally, the provisions of the new regulations, both with regard to slaughterhouses and butcher's premises, have been carried out fairly well. Some difficulty has arisen with regard to the notification of animals found on slaughter to be diseased. In one case, the inspector detected the disease when examining the carcase three or four hours after slaughter had been completed. The owner was prosecuted for not notifying this Department forthwith of the fact that he had diseased meat on his premises. The butcher's defence was that he intended to notify by post had sufficient time been given him to do so. The court accepted the man's statement and dismissed the case. This decision revealed a flaw in the Regulations which may have the effect of weakening or even rendering null and void this particular clause.

Meat Marking.—The Regulations (part 3) give Local Authorities the option of introducing a system of meat marking within their own areas. The Leeds City Council decided to take advantage of this and a special system was devised and approved by the Ministry of Health. Up to the present not a single request has been received from either the wholesale or retail butchers for their meat to be marked. The object of meat marking is to prove to the purchaser that the meat has been inspected by a duly authorised person as well as to enable unsound meat to be traced to the source of slaughter. One is not surprised that traders of doubtful repute have refused to take advantage of the facilities offered, but that the honest trader should not do so is difficult to understand.

Meat Shops and Stores.—As regards that part of the Regulations (part 5) dealing with shops and stores, I took an early opportunity soon after the introduction of the Regulations of meeting the Leeds Wholesale Meat Traders' Association and the Leeds Retail Butchers' Association and discussing with them how best to carry out the spirit of the Regulations without putting their members to unnecessary expense on structural alterations to their premises. After a good deal of deliberation a series of rules was evolved which both Associations approved and which at a later date also received the approval of the Leeds Grocers' Association. These rules deal with the protection of meat when exposed in the window or body of the shop from flies, dust and dirt, the hanging of carcasses or parts of carcasses outside shops, and the prevention of contamination from contact of the meat with the clothes of members of the public. The rules for the most part have been satisfactorily carried out. There is one rule, however, which has been more honoured in the breach than in the observance, and that is the rule which makes it obligatory for butchers to protect carcasses hung in the shop from contact with the clothes of customers by covering them with a clean white sheet as far up as the shoulders of a person of ordinary height. A rule so important as this cannot be permitted to fall into abeyance and unless it is observed better than it has been more stringent measures will have to be adopted to enforce it. This part of the regulations also contains provisions with regard to certain meat stores and places where made-up articles of food such as sausage and potted meat are produced. When one knows where these places are they can be regularly visited and inspected but the trouble is that we do not possess that knowledge nor is there any means of finding out when a person starts a business of this description. In this regard the Regulations would have been more effective had they made registration of such places compulsory. Until this is done it is idle to pretend that supervision can be complete or efficient.

Transport of Meat.—Part 6 of the Regulations, which deals with transport and handling, gave a little trouble in the beginning. The meat carriers, who had for many years been a law unto themselves and had carried on their business pretty much as they pleased, resented having to conform to rules which they considered irksome and unnecessary. After having the sections explained to them by the Chief Meat Inspector, however, they agreed to carry out the Regulations and the directions of the Department with regard thereto.

The following is a summary of the cases taken into Court under the Regulations during the year :—

THE PUBLIC HEALTH (MEAT) REGULATIONS, 1924.
PROSECUTIONS FOR THE YEAR 1925.

No.	Offences.	Result of Hearing.	Remarks.
1	Failing to notify Local Authority of diseased condition of meat ..	Fined £10.	
2	Dirty sheets on carts ..	Fined £2 and costs .. ,, 10/- and costs	Carrier. Employee.
3	Carrying meat without proper head covering ..	Fined 10/- and costs	
4	Dirty sheets on cart .. Carrying meat without proper head covering ..	Fined 10/- and costs ,, 10/- and costs	
5	Dirty lorry and sheets for conveyance of meat ..	Fined £2 or 14 days	

The following is an account of the quantities of unsound meat destroyed by consent :—

MEAT, ETC., DESTROYED BY CONSENT.

	1925.	1924.	1923.	1922.
Beef	134,725 lbs.	137,660 lbs.	121,087 lbs.	122,483 lbs.
Veal	7,767 "	8,103 "	4,659 "	4,588 "
Mutton	8,279 "	8,214 "	6,963 "	6,360 "
Bacon and Ham ..	82 "	224 "	214 "	508 "
Pork	14,987 "	9,004 "	9,957 "	11,238 "
Goat Flesh	70 "	80 "	..	..
Offals	39,931 "	25,971 "	23,270 lbs.	32,514 lbs.
Rabbits	9,839 "	16,407 "	20,095 "	21,497 "
Poultry	2,758 "	10,825 "	4,707 "	5,709 "
Game	545 "	111 "	476 "	1,124 "
Eggs	23,110 "	15,453 "	27,138 "	29,655 "
Cheese	..	56 lbs.	..	896 lbs.
Fish	80,882 lbs.	100,502 "	103,877 lbs.	78,189 "
Shellfish	70,621 "	86,952 "	103,672 "	77,484 "
Fruit	27,606 "	24,336 "	16,174 "	21,758 "
Vegetables	75,581 "	66,087 "	114,030 "	40,931 lbs.
Inedible fungi ..	..	..	14 "	110 "
Edible fungi ..	634 lbs.	120 lbs.	168 "	138 "
Yeast	2,381 "	448 "	3,920 "	876 "
Tinned Goods ..	7,883 "	3,947 "	5,643 "	9,903 "
Sundries	465 "	..	..	..

Tuberculous Carcases.—The number of carcases condemned for tuberculosis during 1925 was as follows :—154 carcases of beef and organs, three carcases of veal and organs, and 39 carcases of pork and organs. That is some indication of the high prevalence of this disease amongst cattle and pigs.

Private Slaughterhouses.—During the year the private slaughterhouses were reduced from 66 to 65 by the removal from the register of one which had ceased to be used as a slaughterhouse.

In addition to the private slaughterhouses in the City, there are two knackers' yards both of which have continued in operation and are well conducted. One of these has changed hands during the year, the licence being transferred to the new occupier.

The following table shows the number of slaughterhouses in the City and for comparison those in 1920.

SLAUGHTER-HOUSES IN USE.

	1920.	January, 1925.	December, 1925.
Public Abattoir	1	1	1
Private slaughter-houses (registered)	63	57	56
Do. (licensed)	8	9	9
Knackers' Yard	2	2	2

All the private slaughterhouses in use in the City are well conducted. Of the 65 on the register, seven are disused and three are used only very occasionally. The inspectors paid 7,380 visits of inspection to private slaughterhouses, which works out at an average of a little over two visits per week to each slaughterhouse in regular use. In a few of the slaughterhouses slaughtering goes on daily and to these daily visits are paid.

The need for increased accommodation at the Public Abattoir remains as urgent as ever. I understand, however, that plans to extend the existing buildings have now been passed. When

completed the enlarged Abattoir will provide additional accommodation for the slaughtering of cattle, the hanging of carcasses, the sale of meat, and the housing of animals awaiting slaughter. In addition special provision will be made for the slaughter of pigs. Though the plans do not include slaughtering accommodation for the private butcher, a thing very much wanted, I am hoping that as an indirect result of the extension there will be a certain enlargement of the facilities now existing for this purpose. As it is, there is no alternative accommodation to offer the butcher whose slaughterhouse is unsuitable or insanitary or who slaughters in an already overcrowded slaughterhouse belonging to some other butcher, and the lack of such facilities drives us into the position of having to put up with conditions which are to say the least of it anything but ideal.

During the year two official seizures of unsound meat were made and two convictions obtained. The offenders were fined.

A special report on private slaughterhouses was presented to the Health Committee during the year, the object of which was to show the need for the abolition of a certain number of them which by reason of situation or structural defects were totally unsuitable.

Mussels and Shellfish.—Mussels from Millom in Cumberland were found on examination to be sewage tainted and unfit for food and were excluded from sale.

INFECTIOUS AND OTHER DISEASES.

A complete summary of cases notified to this department during the year of all notifiable infectious diseases will be found in the Appendix (Table II.).

The most conspicuous feature of the year's record as regards the prevalence of infectious disease was the increased number of cases of diphtheria and erysipelas and the fall in the incidence of enteric fever, encephalitis lethargica, ophthalmia neonatorum and measles. The notifications of scarlet fever remained about the same as for the previous year.

Co-operation with School Medical Services.—A report is received daily from the School Medical Department giving particulars of absentees from the various Council Schools due to infectious disease. The information thus obtained is followed up without delay. A health visitor or sanitary inspector visits the home of each child whose name appears on the list and makes enquiries as to isolation, nursing, and the probable source of infection. Such precautionary measures as may be deemed necessary are then taken to prevent the further spread of the disease. In this way cases which might otherwise be missed are brought under control.

Smallpox.—No cases of smallpox were notified in the City during the year. In this respect the City was most fortunate, particularly as the disease was prevalent practically throughout the whole of the year in certain of the adjoining areas between the populations of which and that of Leeds there are constant comings and goings.

The number of primary vaccinations carried out by the Public Vaccinators during the year was 3,573 or 43·7 per cent. of the nett total births registered. Although the City has been immune from attack, the need for vigilance remains as imperative as ever. Immunity is apt to breed complacency and complacency is the enemy of security. If it is a parent's duty to insure his home against the possibility of fire, how much more is it necessary that he should insure his child against this painful and loathsome disorder? Vaccination is indisputably the best and cheapest insurance; I say cheapest, advisedly, because an outbreak of smallpox may involve a family in serious loss and the community in the expenditure of a large sum of money, whilst the victim, himself, may be maimed or crippled for life.

MEASLES.

Year.	Cases notified.	Case-rate.	Deaths.	Death-rate. LEEDS.	Death-rate England and Wales.
1915	..	..	78	0.17	0.46
1916	6,911	15.48	149	0.33	0.16
1917	5,094	11.62	277	0.63	0.31
1918	6,719	15.71	417	0.98	0.29
1919	2,605	6.05	48	0.11	0.10
1920	5,523	12.30	148	0.33	0.19
1921	240	0.52	5	0.01	0.06
1922	10,078	21.59	152	0.33	0.15
1923	5,224	11.12	50	0.11	0.14
1924	7,037	14.92	46	0.10	0.12
1925	5,301	11.21	39	0.08	0.13

AGES AT DEATH FROM MEASLES.

1925	0-1	1-2	2-3	3-4	4-5	5-10	15 +	Total.
No. of Deaths	11	16	5	3	..	2	2	39

Measles.—The number of cases of measles notified during the year was 5,301 (measles 5,100, German measles 201), a decrease of 1,736 as compared with the previous year. The case-rate for measles was 10.78 and German measles 0.43 as compared with 14.11 and 0.81 for the previous year and 11.59 and 0.50 for the previous five years. The total number of deaths certified as due to the disease was 39 giving a death-rate of 0.08 as compared with 46 deaths and

a death rate of 0·10 for the previous year, and an average of 80 deaths and a death-rate of 0·18 for the previous five years. Of the total number of cases notified 92 (or 1·7 per cent.) were treated in hospital, whilst in addition arrangements were made for the nursing of 68 cases in their own homes by the district nurses. With the limited accommodation available, only a few selected cases living under bad home conditions can receive hospital treatment.

During the last five years measles has accounted for no fewer than 401 deaths, mostly of children in the younger age groups, whilst in the same period scarlet fever, diphtheria and typhoid fever together have been responsible for 312 deaths. And yet the public continue to place more importance on the three last mentioned. It is the unseen rather than the visible damage which measles does that is most to be dreaded, and this is the aspect which the average parent seems to fail to grasp. That the disease is the starting point of other disabling conditions, principally tuberculosis, cannot be disputed, and for this reason it is essential that the child victim should be given the best possible chance of making a complete recovery.

Whooping Cough.—The number of deaths from this disease registered during the year was 47 or 40 fewer than the previous year. The death-rate was 0·10 as compared with 0·18 for the previous year and an average death-rate of 0·17 for the previous five years. Like measles, the seriousness of this disease is underrated by the public. It is not thought to be of much consequence, and yet the deaths last year from it almost equalled those from scarlet fever and diphtheria combined. Here again, as in the case of measles, it is not the immediate but the remote effects on the child's health which are important. This truth cannot be too strongly impressed on parents who are apt to look upon the disease merely as a childish ailment, more or less inseparable from childhood and of no very great significance. For this attitude of indifference the general medical practitioner is in some degree to blame, not because he, himself, does not realise its gravity but because he fails to warn parents of the possible consequences of treating it too lightly. All young children, especially babies in the first year of life, should be rigidly excluded from contact with an active case of the disease, and when symptoms do appear should be nursed with the greatest care so as to prevent complications.

WHOOPING COUGH.

Year.	Deaths.	Death-rate. LEEDS.	Death-rate England and Wales.
1915	158	0·34	0·23
1916	45	0·10	0·18
1917	69	0·16	0·13
1918	130	0·30	0·30
1919	66	0·15	0·07
1920	100	0·22	0·12
1921	72	0·15	0·12
1922	115	0·25	0·17
1923	32	0·07	0·11
1924	87	0·18	0·10
1925	47	0·10	0·15

AGES AT DEATH FROM WHOOPING COUGH.

1925	0-1	1-2	2-3	3-4	4-5	5-10	10-15	Total.
No. of deaths	21	11	6	6	1	2	..	47

Scarlet Fever.—There were 1,166 notified cases of scarlet fever in the City during 1925, which is the smallest number recorded since the war years 1916, 1917 and 1918 when the prevalence of this disease was exceptionally low. The case-rate was 2·47 as compared with 2·66 for the previous year and an average of 3·87 for the previous five years. The mortality was remarkably low, there being only 15 deaths, the equivalent of a death-rate of 0·03 as compared with 20 deaths in 1924 and a death-rate of 0·04. For the previous five years the average number of deaths was 23 and the average death-rate 0·05.

The type of disease was mild, so much so, that it was difficult to be sure in every case whether the infection was that of scarlet fever or not.

The number of cases removed to hospital was 1,091 or 93.6 per cent. of the total notifications.

It is generally recognised to-day by medical authorities that scarlet fever is not the dangerous disease it used to be and the necessity for hospital treatment is therefore not so great. Where facilities for isolation and nursing are adequate and the home conditions are suitable there is nothing to be gained by removal to hospital. Indeed, I am persuaded, from a public health point of view, it would be better to fill a proportion of the beds in our fever hospital at present reserved for scarlet fever with cases of measles and whooping cough.

Two localised outbreaks of scarlet fever occurred, the particulars of which may be interesting, one was in connection with a large ready-made clothing factory and the other on a milk round. As regards the former, one of the factory hands was attacked by the disease, but being mild, the infection was not detected in the initial stages, with the result that other members of the same staff to the number of 26 developed the disease. The outbreak illustrates the difficulty of dealing with mild cases. Notwithstanding strict injunctions given to the staff to be on the outlook for symptoms, employees in an infective state continued at work, and it was not until a system of individual inspection by medical officers was adopted and all suspects eliminated that the outbreak was brought under control.

With regard to the second outbreak, the infection in this case was confined to a certain milk round and when investigations were made was traced to a farm outside the City whereon there was a milker who showed signs of active disease. The Local Authority of the district in question was informed and as a result of the preventive measures adopted further cases were prevented and the outbreak cut short. The number of cases involved in this outbreak was ten, mostly children.

During the year 49 "return" cases were reported. That is rather a heavy list but it is doubtful whether all were true "return" cases. Seven of the primary cases were re-admitted to hospital for further treatment.

SCARLET FEVER.

Year.	Cases notified.	Case-rate.	Deaths.	Death-rate. LEEDS.	Death-rate England and Wales.
1915	1,454	3·17	30	0·07	0·07
1916	881	1·97	23	0·05	0·04
1917	543	1·24	7	0·02	0·02
1918	570	1·33	19	0·04	0·03
1919	1,340	3·11	23	0·05	0·03
1920	1,363	3·04	17	0·04	0·04
1921	1,526	3·28	14	0·03	0·03
1922	2,722	5·83	33	0·07	0·04
1923	2,134	4·54	31	0·07	0·03
1924	1,256	2·66	20	0·04	0·02
1925	1,166	2·47	15	0·03	0·03

Erysipelas.—Notifications were received of 321 cases of this disease as compared with 237 in 1924. There were 13 deaths or three more than the previous year. The death-rate was 0·03 as compared with 0·02 for the previous year and an average of 0·26 for the previous five years.

Puerperal Fever.—The number of cases of puerperal fever notified during the year was 52 as compared with 53 in 1924 and an average of 45 for the previous five years. Of these 28 (or 53·8 per cent.) were in the practices of midwives, 16 (or 30·8 per cent.) in the practices of doctors, and 8 (or 15·4 per cent.) in institutions. The number of deaths recorded was 24, an increase of 15 over the previous year, and the death-rate was 0·05 as compared with 0·02. The incidence remains much the same as in 1924 but the death-rate shows an increase of 0·03. It is difficult to advance a reason for this, but it is undoubtedly accounted for to some extent by delay in getting cases into hospital. In the early stages puerperal fever responds rapidly to treatment, but, as the disease progresses towards

the later stages, it becomes more and more uncertain, until there comes a stage when no treatment, however skilful, can save the patient.

Of the total cases notified 35 (or 67.3 per cent.) were removed to the City Hospital, the remainder being treated either in their own homes or in the Maternity Hospital, St. James' Hospital or the Women and Children's Hospital. The continued prevalence of this fatal disease is much to be deplored, particularly as one knows it is in the majority of instances preventable. Too frequently it is the result of carelessness on the part of the medical attendant, nurse or midwife, or the patient herself. The surest way of preventing it is by observing strict cleanliness throughout the whole of the lying-in period, but particularly during the progress of labour. During the last five years there has been in Leeds a death roll of 70 women due to this disease giving an average death-rate of 0.03 which is only two points below the rate for 1925. That means that practically no progress has been made during that period. Medical science has made rapid strides in other directions but for some reason or other it has halted before this disease.

A paragraph dealing with the incidence of puerperal fever in the practice of midwives is included in the section of Maternity and Child Welfare on page 150. Further reference is also made to the subject on page 156.

Encephalitis Lethargica.—There was a marked fall in the prevalence of this disease during the year. The notifications numbered 20 as compared with 41 in the previous year, whilst the number of deaths attributable to it rose from 7 to 11. The case mortality was therefore considerably higher. The death-rate was 0.02 which is an increase of 0.01 on the figure for the previous year and higher by 0.01 than the average for the previous five years. Of the deaths, four occurred in institutions and the remainder in their own homes. One case was removed to the City Hospital.

Acute Anterior Polio-Myelitis.—Three cases were notified during the year and there was one death as compared with no notifications and no deaths in 1924.

Cerebral-Spinal Meningitis.—Only one case of this disease was reported during the year and that case ended fatally. Last year there were five cases and three deaths.

Diphtheria.—The number of cases notified during the year was 422, as compared with 289 in the previous year, giving a case-rate of 0.89 or 0.28 in excess of the figure for 1924 (0.61). The disease was responsible for 39 deaths giving a death-rate of 0.08 as compared with 27 deaths and a death-rate of 0.06 in 1924. Of the total cases notified, 389 (or 92.2 per cent.) were removed to hospital. Though the prevalence was higher than in the two previous years the disease was of a mild type and caused death only in a comparatively small percentage of cases. Compared with the previous five years whilst there has been a considerable drop in the case-rate the mortality rate remains about the same. The average case-rate for the years 1920-1924 was 1.16 whilst the average death-rate was 0.08. If we take the earlier quinquennium 1915-1919 the contrast is more marked. In that period the average case-rate was 1.25, whilst the average death-rate 0.11, or 40.4 per cent. and 37.5 per cent. higher respectively. I am satisfied that with greater care on the part of parents to seek medical advice on the first appearance of symptoms and of medical practitioners to apply the appropriate treatment in the early stages, the death-rate could be even further reduced. There is a tendency on the part of medical men to await the report of the bacteriologist on his examination of the throat-swab before injecting anti-toxin or sending the case to hospital. A delay of this kind is always risky and I am convinced is responsible for a certain proportion of the failures. Supplies of antitoxin are available free of charge to any doctor in practice, and no doctor should go on his round without having one or two doses in his possession. Care of course should be taken to see that the material is fresh, because when kept beyond a certain period antitoxin loses its potency and becomes inert. Stocks of old antitoxin can always be replaced by fresh on application to the Department.

One has heard a good deal recently about the value of the Schick test and toxin-antitoxin immunisation, and whilst not questioning the accuracy of the claims made for the method, one is faced with the difficulty of applying it. The public is not enamoured of any kind of vaccination, and parents are just as likely to resent the inoculation of their children against diphtheria as they are against smallpox. And no matter how convincing the proofs adduced of its efficacy there will still be unbelievers. Much, however, may be done to break down opposition by education, and there are already several large centres of population in the country

where the method is in active operation with most encouraging results. I should like to see the example followed in this City and I hope to be able to make some advance in this direction in the near future.

DIPHTHERIA AND MEMBRANOUS CROUP.

Year.	Cases notified.	Case-rate.	Deaths.	Death-rate, LEEDS.	Death-rate England and Wales.
1915	402	0·88	50	0·11	0·17
1916	423	0·95	39	0·09	0·16
1917	549	1·25	60	0·14	0·13
1918	542	1·27	47	0·11	0·14
1919	811	1·88	43	0·10	0·13
1920	885	1·97	64	0·14	0·15
1921	665	1·43	38	0·08	0·13
1922	470	1·01	28	0·06	0·11
1923	368	0·78	20	0·04	0·07
1924	289	0·61	27	0·06	0·06
1925	422	0·89	39	0·08	0·07

Enteric Fever.—So far as Leeds is concerned, and indeed the whole country, enteric fever is a dying disease. There was a time when as many as 500 cases occurred in Leeds in one year with 92 deaths. Last year the total number of notifications was nine or sixteen fewer than in 1924. Of the nine cases, three died, which is equivalent to a death-rate of 0·01. In 1924 there were six deaths and the death-rate was the same (0·01). Taking the previous five years the average number of cases notified was 20 with an average case-rate of 0·04, whilst the average number of deaths was four and the average death-rate 0·01. One may safely prophesy, therefore, that if the incidence of this disease continues to fall at the same rate as it has fallen during the last decade, the disease will be practically unknown to the next generation.

ENTERIC FEVER.

Year.	Cases notified.	Case-rate.	Deaths.	Death-rate. LEEDS.	Death-rate England and Wales.
1915	106	0·23	21	0·05	0·04
1916	48	0·11	9	0·02	0·03
1917	37	0·08	7	0·02	0·03
1918	42	0·10	5	0·01	0·03
1919	33	0·08	8	0·02	0·02
1920	29	0·06	4	0·01	0·01
1921	24	0·05	2	0·00	0·02
1922	14	0·03	7	0·01	0·01
1923	9	0·02	1	0·00	0·01
1924	25	0·05	6	0·01	0·01
1925	9	0·02	3	0·01	0·01

CASES OF ENTERIC FEVER MONTH BY MONTH.

Jan.	Feb	March	April	May.	June.	July.	Aug.	Sept.	Oct	Nov.	Dec.
—	—	—	—	1	—	1	2	1	2	2	—

Malaria.—There were nine cases notified as occurring in the City during the year as compared with ten notified in 1924. There was no death from this disease.

Dysentery and Trench Fever.—There were three cases of dysentery and none of trench fever reported during the year and there were no deaths.

Ophthalmia Neonatorum.—There were 50 cases of this disease notified during the year as compared with 70 last year. There were no deaths. Of the 50 cases 12 (or 24 per cent.) occurred in

the practices of medical practitioners, 28 (or 56 per cent.) in those of midwives, and 10 (or 20 per cent.) in institutions. Thirty-three cases were treated at home and 17 in hospital as in-patients, namely, three in the Maternity Hospital, six in St. James' Hospital and eight in the General Infirmary.

The number nursed in their own homes by the district nurses was 17.

There has been a gratifying reduction in the number of cases during the last five years. The average number of notifications received during the quinquennium 1916-1920 was 107, in the succeeding quinquennium 75, a reduction of 29.9 per cent.

DAY OF ONSET FROM BIRTH.

1925.	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	10th-15th	15th-20th	20th-25th
No. of Cases	2	1	3	2	3	2	7	2	4	3	12	3	6

The results of treatment of the 50 cases above mentioned were as follows :—

Recovery apparently perfect	..	..	45
Recovery not perfect ..	..	..	2
Sight of both eyes affected ..	..	..	—
Still under treatment	..	..	—
*Died	..	..	2
Result not known owing to removal	..	1	

*Death in both instances was due to causes other than ophthalmia neonatorum.

Diarrhœa and Enteritis.—The long spell of hot, dry weather in the months of June, July and the beginning of August favoured the development of infantile or summer diarrhœa. From the third week of July, when the first death was recorded, right up to the end of the first week in October, the disease was present in more or less epidemic form, particularly in the East, North-East, Holbeck, East Hunslet and South Wards. The outbreak was not unexpected, because from past experience one has learned to look for an increased prevalence of the disease following upon a long spell of drought with high temperature. The 4 foot earth thermometer, which is the best indicator of an approaching outbreak, reached 57.5° F. on July 29th at or about which point it remained throughout August and until September 5th. The total number of deaths

during the year certified as being due to the disease in children under two years of age was 149, which is equivalent to a rate per thousand births of 18.2. These figures are the highest since 1921 when the deaths numbered 184 and the death-rate was 18.1 per thousand births. Summer diarrhoea like enteric fever is closely associated with insanitary conditions. Lack of cleanliness is at the root of much of it.

It is interesting to compare the mortality of this disease in 1925 with that in 1911 when there was a similar hot spell in the Summer quarter. In that year, the deaths from Summer diarrhoea numbered 578 and the death-rate per thousand births was 54.7. The average death-rate for the quinquennium, 1920-1924, was 13.2 and the previous quinquennium, 1915-1919, 22.4. Thus, there has been a steady fall until last year when there was a sharp rise which brought the curve back to the level of 1921. During the period from 1921 onwards, sanitation in the City has made steady progress, in addition to which the standard of living has improved.

One of the main causative factors in the incidence of infantile diarrhoea is the milk supply, which in Leeds as in other parts of the Country, is not so clean as it might be. Milk is the principal article of an infant's diet. It is at the same time an ideal breeding ground for germs, particularly in hot weather. Many of the germs found in milk are quite innocuous but there are others which introduced into the human intestine rapidly give rise to serious symptoms. The solution of the problem is to use only clean milk for infant feeding or milk which has been properly sterilised or rendered innocuous by boiling. In these days when graded milk in sealed bottles is available, there is no excuse for parents continuing to feed their children on milk of an inferior and doubtful quality. Cheapness is often an index of impurity, and if by using cheap milk the health of the child is endangered, it is economy to pay the higher price. What I have said regarding milk may be applied with equal force to all other food given to young children. The greatest care should be observed at all times, particularly in hot weather, to see that it is fresh, of good quality, and free from taint of any kind.

I had a careful record kept of the cases which proved fatal, with the object in view of trying to discover the cause of the infection. Of the total cases (138), of which a record is available 30 (or 21.7 per cent.) were fed entirely on the breast, 88 (or 63.8 per cent.) on the breast supplemented by other forms of food, and 20 (or 14.5 per cent.) entirely on other forms of food. Of the 88 cases fed on the breast supplemented by other forms of food, 23 (or 26.1 per cent.) were fed on the breast supplemented with cows' milk, 31 (or 35.2 per cent.) on the breast supplemented with dried milk, 15 (or 17.0 per cent.) on the breast supplemented with condensed milk, whilst the remainder, 19 (or 21.6 per cent.) were fed on the breast supplemented with other forms of food. Of the 20 cases fed entirely on other forms of food, four (or 20 per cent.) were fed on cows' milk only, six (or 30 per cent.) on cows' milk supplemented with other foods, three (or 15 per cent.) on dried milk only, five (or 25 per cent.) on dried milk supplemented with other foods and two (or 10 per cent.) on condensed milk only.

From these figures it will be evident that, though the breast fed baby is not entirely immune, it has a distinctly better chance of escaping the disease than the hand fed baby.

Most of the deaths took place in back-to-back houses. A few of these were dirty and fly invested, but the majority were reported upon as being clean and comparatively free from flies. In many cases the milk was stored in a cupboard in the kitchen, there being no larder or other provision.

It would appear, therefore, that the principal source of infection was the food, but how the food became contaminated is not clear. The evidence goes to show the great necessity in hot weather of exercising the utmost vigilance to ensure that the food at no stage from the source to the baby is exposed to possible risk. Those breast fed babies who died of the disease possibly became infected from dirty nipples or through the use of infected dummies.

The 149 deaths from diarrhoea and enteritis were of children aged as follows:—

Under one month ..	12	6-9 months ..	26
1-3 months ..	34	9-12 months ..	19
3-6 months ..	42	1-2 years ..	16

DIARRHŒA AND ENTERITIS DEATHS UNDER TWO YEARS
WITH RATES PER 1,000 BIRTHS.

Year.	Deaths.	Rate per 1,000 Births.	
		Leeds.	England and Wales.
1915	282	28.6	18.9
1916	214	22.7	13.1
1917	171	22.6	12.8
1918	146	19.8	11.7
1919	140	18.5	10.2
1920	140	12.5	8.9
1921	184	18.1	16.1
1922	92	9.9	6.6
1923	118	13.6	8.1
1924	103	12.0	7.6
1925	149	18.2	8.4

The incidence of diarrhœa month by month is shown in the following table.

DEATHS AND METEOROLOGICAL CONDITIONS IN EACH MONTH
OF THE YEAR.

1925.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov	Dec.	Year.
Deaths	4	3	3	4	3	2	41	60	10	10	9	149	
Barom. (inches)	30.08	29.41	30.00	29.67	29.59	29.98	29.83	29.83	29.90	29.71	29.89	29.58	29.79
Attached Ther.°F.	55.02	54.92	57.98	60.24	62.04	65.23	69.25	66.83	63.66	62.48	55.00	51.50	60.30
Dry Bulb	43.27	42.92	44.57	48.92	56.56	63.83	67.42	64.10	55.48	52.67	41.10	39.38	51.63
Wet Bulb	41.29	40.73	42.26	45.92	53.46	59.54	62.52	60.19	52.40	50.17	38.83	37.53	48.69
Humidity	84.92	83.54	83.00	79.86	80.96	76.26	74.29	79.27	79.62	83.48	81.19	83.22	80.70
Mn. of highest reading	46.85	46.93	47.91	53.57	62.29	70.23	74.11	70.10	61.40	58.46	48.43	45.03	57.03
„ lowest „	38.71	37.32	38.66	41.07	48.18	53.06	56.79	55.46	48.17	45.50	35.04	33.09	44.18
„ daily range ..	8.14	9.61	9.25	12.50	14.11	17.17	17.32	14.64	13.23	12.96	13.39	11.94	12.85
Total rainfall (inches)	1.49	2.88	2.85	3.03	3.67	0.07	0.82	1.94	2.90	2.84	1.81	4.53	28.83

The meteorological data are compiled from returns sent us by Mr. Crowther, Curator of the Museum. They are uncorrected readings, made at 10 a.m. and 4 p.m.

Influenza.—As far as influenza was concerned 1925 was an off year. The number of deaths due to the disease was 159 and the death-rate 0·34 as compared with 404 deaths and a death-rate of 0·86 in the previous year. Of the total deaths, by far the greater number were of persons above 25 years of age and occurred in the first quarter of the year. The average number of deaths for the previous five years was 206 and the average death-rate 0·44, so that there was a decrease of 22·7 per cent. between the death-rate in 1925 and the average for the previous quinquennium.

INFLUENZA.

Year.	Deaths.	Death-Rate. LEEDS.	Death-Rate England and Wales.
1915	102	0·22	0·29
1916	65	0·15	0·25
1917	59	0·13	0·21
1918	1,401	3·28	3·13
1919	623	1·45	1·22
1920	170	0·38	0·28
1921	164	0·35	0·24
1922	169	0·36	0·56
1923	122	0·26	0·22
1924	404	0·86	0·49
1925	159	0·34	0·32

AGES AT DEATH FROM INFLUENZA.

1925	0-1	1-2	2-5	5-15	15-25	25-45	45-65	65+	Total.
No. of Deaths	16	3	4	4	8	30	45	49	159

Bronchitis and Pneumonia.—The deaths from these diseases numbered 1,016 of which bronchitis was responsible for 513 and pneumonia 503. This figure represents 16·8 per cent. of the total deaths registered during the year. Compared with the previous year there was a reduction of 130 in the bronchitis figure and of 116 in pneumonia figure, whilst the death-rates showed a corresponding difference. The decrease in both diseases affected chiefly the younger age groups, that is to say, that the saving of life was greatest amongst the children. This is precisely as it ought to be, because whilst these respiratory conditions are almost inevitable in old age, they can by observance of the ordinary rules of hygiene be prevented from attacking a young child.

BRONCHITIS.

Year.	Deaths.	Death-Rate. LEEDS.	Death-Rate England and Wales.
1915	738	1·61	1·44
1916	620	1·39	1·25
1917	646	1·47	1·25
1918	653	1·53	1·23
1919	741	1·72	1·24
1920	625	1·39	1·01
1921	556	1·19	0·89
1922	596	1·28	1·07
1923	518	1·10	0·85
1924	643	1·36	0·97
1925	513	1·08	

AGES AT DEATH FROM BRONCHITIS.

1925	0-1	1-2	2-5	5-15	15-25	25-45	45-65	65+	Total
No. of Deaths	38	11	2	2	1	22	131	306	513

Smoke and fog are said to play an important part in exciting these respiratory complaints, but it is extremely difficult to obtain statistical evidence of this, for the reason that the smokiest wards of the City are also the most unhealthy from other causes. One may feel, for example, that the high respiratory death-rate of the Central and South wards is in a large measure due to smoke, but the difficulty of eliminating other factors such as bad housing and overcrowding renders it impossible to determine to what extent smoke is really culpable.

PNEUMONIA (ALL FORMS).

Year.	Deaths.	Death-Rate. LEEDS.	Death-Rate England and Wales.
1915	725	1.58	1.36
1916	586	1.31	1.07
1917	565	1.29	1.14
1918	768	1.80	1.65
1919	560	1.30	1.06
1920	622	1.39	0.99
1921	562	1.21	0.92
1922	502	1.08	1.07
1923	440	0.94	0.87
1924	619	1.31	1.00
1925	503	1.06	

AGES AT DEATH FROM PNEUMONIA.

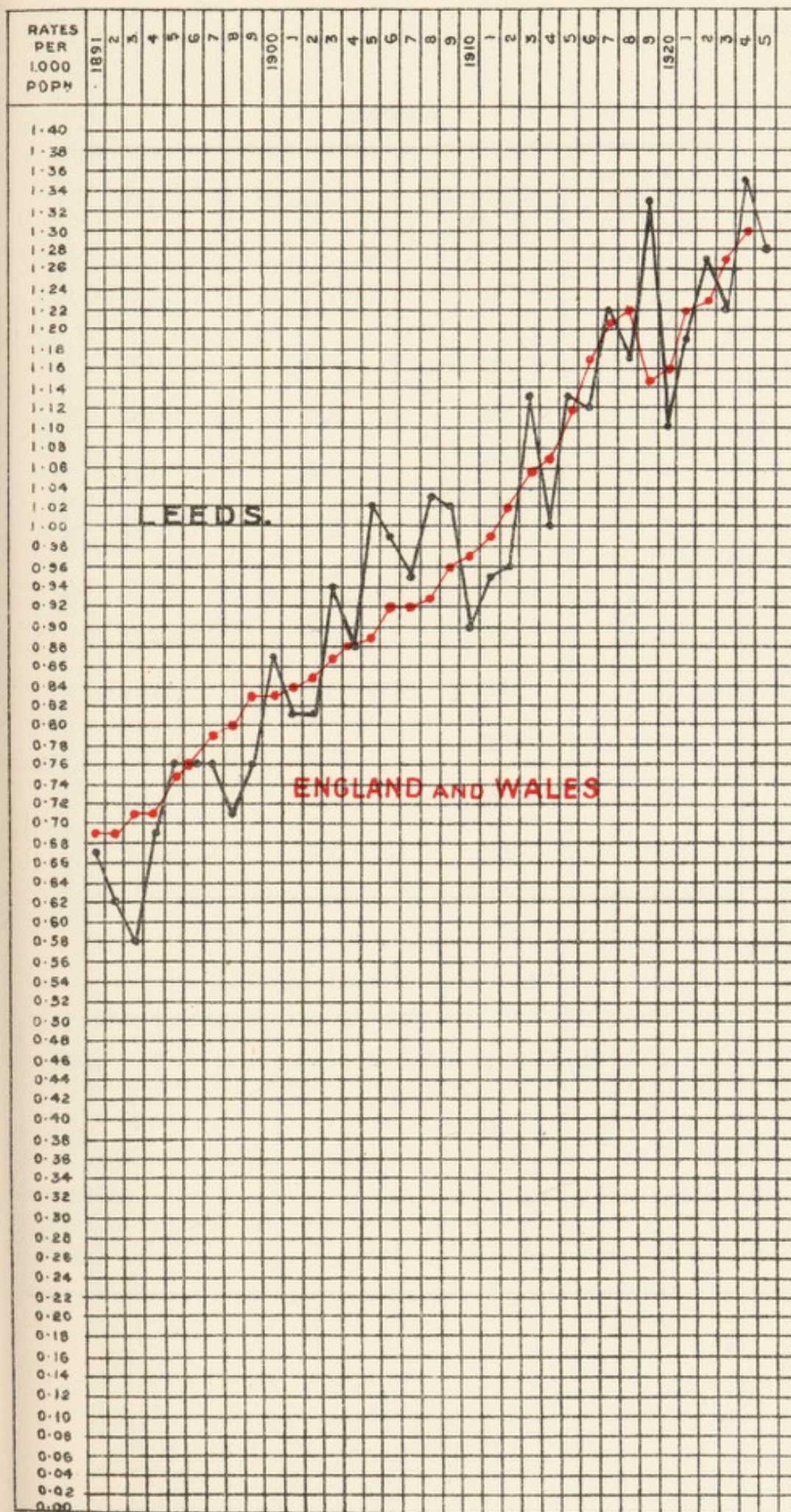
1925	0-1	1-2	2-5	5-15	15-25	25-45	45-65	65+	Total
No. of Deaths	96	65	44	18	25	56	118	81	503

I have again to call the attention of medical practitioners to the fact that acute primary and acute influenzal pneumonia are notifiable diseases. Last year, of the total number of deaths certified as due to these conditions quite a large proportion were unnotified, which means that this Department was entirely without any information about them until the receipt of the registrars' death returns.

Cancer.—The mortality from this disease showed a slight drop during the year. The deaths caused by it numbered 606 which is equivalent to a death-rate of 1.28 as compared with 639 deaths and a death-rate of 1.35 in the previous year. Taking the previous five years, the average number of deaths was 571 and the average death-rate 1.23, which means that the figure for 1925 has exceeded this average by 4.1 per cent. If one goes further back, still dealing with the five yearly periods, one finds that the highest increase between any two successive quinquennia was 20.2 and the lowest 3.4, whilst the average was 10.9. The age groups chiefly affected are set out in the table on page 101, by which it will be seen that the highest mortality occurs in the age groups 25-45, 45-65 and 65 and upwards. Compared with the previous year the only increase was in the age group 65 and upwards.

The special Committee, referred to in my last annual report, set up to deal with the subject undertook an investigation into the deaths from breast cancer of women resident in the City and outside the City who had received treatment at the Leeds General Infirmary and the Hospital for Women and Children. The work was carried out by a medical officer appointed for the purpose, Dr. Gretta Wardle, under the supervision of Professor Matthew J. Stewart of the department of Pathology in the Leeds University. The results were communicated to the Committee, and since have been analysed and classified by Dr. Janet Lane Claypon of the Ministry of Health and issued by that body as a special report. This report is in some respects a unique document and contains figures of very great interest alike to the medical profession and to the public. The report in draft form has been issued to the members of the Local Committee and will probably appear in connection with the "Special report series" of the Ministry of Health when it will be available for members of the medical profession or other interested persons.

CANCER DEATH RATE. — 1891 - 1925.





CANCER.

Year.	Deaths.	Death-Rate. LEEDS.	Death-Rate England and Wales.
1915	521	1.13	1.12
1916	500	1.12	1.17
1917	535	1.22	1.21
1918	500	1.17	1.22
1919	575	1.33	1.15
1920	492	1.10	1.16
1921	554	1.19	1.22
1922	595	1.27	1.23
1923	574	1.22	1.27
1924	639	1.35	1.30
1925	606	1.28	

AGES AT DEATH FROM CANCER.

1925.	0-1	1-2	2-5	5-15	15-25	25-45	45-65	65+	Total.
Males	..	..	..	..	3	18	146	136	303
Females	1	..	..	1	..	34	146	121	303
Total	1	..	..	1	3	52	292	257	606

I cannot close this portion of the report without mentioning the formation of a Yorkshire branch of the British Empire Cancer Campaign. The branch will be representative of all three Ridings.

A campaign to raise funds to equip an up-to-date cancer research laboratory at the University was inaugurated at the beginning of the current year. The inaugural meeting was presided over by the Rt. Hon. Viscount Lascelles and resulted in the raising of over £50,000. Since then that sum has been substantially augmented and at the present time the total stands somewhere in the region of £75,000. As soon as sufficient money has been raised, work in connection with the construction of the new laboratory will be commenced and it is hoped that research will be in full swing before the end of another year. The Branch will also undertake an educational campaign throughout the County for which purpose a special Committee has been appointed. This Committee has issued two leaflets, one for the use of medical practitioners and the other for the laity. Meetings will be held in all the principal towns with the object of forming local Committees to organize the campaign. In this way it is hoped to excite the interest of the general public in the effort and enlist their support. Yorkshire has made a good beginning and there is every reason to hope that the effort will be successful.

CANCER DEATH-RATES, ELEVEN LARGE TOWNS, ALSO ENGLAND
AND WALES.

	Year 1914.	Year 1915.	Year 1916.	Year 1917.	Year 1918.	Year 1919.	Year 1920.	Year 1921.	Year 1922.	Year 1923.	Year 1924.
London ..	1.18	1.24	1.24	1.35	1.33	1.25	1.25	1.33	1.33	1.39	1.42
Birmingham..	0.92	1.04	1.06	1.06	1.03	1.09	1.11	1.10	1.16	1.18	1.31
Liverpool ..	1.05	1.01	1.11	1.08	1.10	1.03	1.07	1.10	1.06	1.13	1.13
Manchester ..	1.03	1.12	1.18	1.19	1.24	1.17	1.28	1.28	1.29	1.41	1.40
Sheffield ..	0.93	0.91	1.08	1.03	1.06	0.97	1.08	1.17	1.18	1.19	1.26
Leeds ..	1.04	1.19	1.16	1.29	1.19	1.35	1.09	1.19	1.29	1.24	1.37
Bristol ..	1.20	1.20	1.12	1.24	1.30	1.18	1.15	1.26	1.21	1.32	1.28
Hull ..	1.03	1.05	1.11	1.26	1.17	1.15	0.97	1.21	1.21	1.04	1.29
Bradford ..	1.31	1.22	1.36	1.46	1.45	1.38	1.28	1.39	1.49	1.33	1.56
Newcastle ..	1.01	0.97	1.00	0.97	0.87	1.13	0.94	1.10	1.08	1.16	1.24
Nottingham ..	1.04	1.11	1.09	1.27	1.52	1.23	1.36	1.43	1.23	1.46	1.40
England and Wales ..	1.07	1.12	1.17	1.21	1.22	1.15	1.16	1.22	1.23	1.27	1.30

The rates are calculated from figures given in the Registrar General's Annual Reports.

Anthrax.—Two cases of this disease were reported during the year and in each case information was forwarded to the Inspector of Factories. Both cases received institutional treatment, one in the City Hospital, Seacroft, and the other in the General Infirmary.

INFECTIOUS DISEASES HOSPITAL.

Leeds possesses a large modern infectious diseases hospital (Seacroft Hospital), capable of accommodating 489 cases of infectious diseases of all types, exclusive of smallpox.

Provision has been made for smallpox at Killingbeck about a quarter of a mile distant from Seacroft Hospital. This hospital has accommodation for 180 cases. At present it is being used for the treatment of tuberculosis. A small emergency smallpox hospital of 20 beds has been erected at the north-east corner of the Killingbeck estate, and is kept in readiness for the reception of any sporadic cases of the disease which may occur. In the event of an outbreak of any size occurring, it would be necessary to evacuate the buildings at Killingbeck and the problem of alternative accommodation for tuberculosis would then arise.

The work of Seacroft Hospital for the year, is given in the table on page 35.

AMBULANCE WORK AND DISINFECTION.

Ambulances.—It was pointed out in my report for 1924 that certain of the ambulances for the removal of infectious cases were rapidly becoming unfit for use owing to age and the difficulty of obtaining spare parts. It is hoped to replace one of these worn out machines by a new one during the coming year, but even when that is done there will still remain two which on account of their condition are unreliable. These will have to be scrapped in the course of another year or so.

The housing of the ambulances and bedding vans is becoming a matter of some difficulty. At present they are garaged partly at the City Hospital and partly by the Cleansing Department at their depot in Dock Street. But with the extension of the City and the ever increasing demand for mechanical appliances for cleansing purposes, all of which have to be housed on the Dock Street premises, it is becoming a problem of no little difficulty to find sufficient space for the ambulances. The garage at the City Hospital has to some extent relieved the pressure by taking three of the vehicles, but with the commissioning of another during the year, the problem is likely to become acute. It is obvious, therefore,

that steps will have to be taken in the near future to find other accommodation. There are a number of sheds at the Beckett Street disinfecting station belonging to the Committee as well as a disused laundry, which are available. In a special report which I presented to the Committee at the beginning of the present year I suggested that the laundry might be transformed into a repair shop, office and messroom, whilst the sheds, with the addition of an extra one, would provide garage accommodation for the ambulances and bedding vans with the exception of the three infectious diseases ambulances which for convenience would continue to be housed at the City Hospital. I also suggested that two dwelling-houses might be built in the vicinity of the station for the use of the officer in charge and an emergency driver. One of the houses would include a sitting-room for the ambulance nurses. Repairs to the machines would be executed by a skilled mechanic appointed for the purpose. Such a scheme would make the service self-contained and independent, whilst at the same time increasing the accommodation at Dock Street available for housing the Cleansing Department's machines.

As compared with the previous year the number of cases removed by the ambulances to the City Hospital and Killingbeck Sanatorium was 2,111, an increase of 37 on the figure for the previous year. In addition to these 57 cases were removed from the City Hospital and Killingbeck Sanatorium to their own homes or to other institutions. Over and above these 34 other journeys were made.

Details of the cases removed to hospitals and lying-in institutions by the ambulances are given below :—

Scarlet Fever	1,121
Diphtheria	452
Measles	91
Typhoid Fever	13
Tuberculosis	188
Other Diseases	246
Maternity	367
TOTAL	2,478

The total mileage run by the four ambulances was 26,123.

Disinfection.—The following work was done by the Disinfecting Staff :—

Houses disinfected	..	..	..	..	2,550
Rooms disinfected	..	..	..	..	7,309
Beds and Mattresses disinfected	..	..	..	..	2,955
Articles of Bed Clothing disinfected	..	..	..	..	19,563
Articles of Wearing Apparel disinfected	..	..	..	..	30,545
Miscellaneous Articles disinfected	..	..	..	..	5,309

Also 378 infected persons or contacts went, or were taken, to one or other of the sanitary depots to have a disinfecting bath and disinfection of clothing carried out.

The total mileage run by the three bedding vans was 22,195.

Having regard to the fact that the Laundry in Beckett Street had largely fallen into disuse for the washing of infected articles, and that such articles as were still washed were of a type which could quite easily, and much more economically, be dealt with by a private laundry, the Committee decided to close the laundry premises entirely. This was done on April 1st, since which time the buildings have been standing empty. A use will, however, be found for them if the scheme already suggested in a previous paragraph of this section materialises. The number of articles washed during the year was 17,470.

Verminous Houses and Persons.—The number of verminous persons dealt with at the cleansing stations during the year was 16 while 716 articles of bedding and clothing were disinfected by steam in connection with verminous houses.

BACTERIOLOGICAL WORK.

The following is a complete summary of the work done for the Health Department by the Department of Pathology and Bacteriology in the Leeds University Medical School, under the supervision of Professor James W. McLeod, the City Bacteriologist.

GENERAL.

DESCRIPTION OF EXAMINATIONS.	No. of SPECIMENS.
Diphtheria bacillus—	
Swabs	1,854
Tubercle bacillus —	
sputum	1,288
milk for guinea pig inoculation	74
pus	11
urine	7
fæces	1
cerebro spinal fluid	2
other fluids	14
Fæces—	
for typhoid	2
for dysentery	2
Urine—	
for typhoid group	1
for guinea pig inoculation	1
Water—	
bacteriological examination	50
bacterial count	2
Blood—	
for culture	2
Widal test	6
Cerebro spinal fluid—	
bacteriological examination	3
Milk—for bacterial count	17
Eye swabs—	
for organisms	6
Miscellaneous examinations	8
TOTAL	3,351

WORK DONE IN THE DEPARTMENT OF PATHOLOGY AND
BACTERIOLOGY OF THE UNIVERSITY OF LEEDS IN CONNECTION
WITH THE V.D. REGULATIONS.

NATURE OF TEST.	NUMBER OF TESTS.
For detection of spirochetes—	
for treatment centre	47
for practitioners	2
for institutions	1
For detection of gonococci—	
for treatment centre	1,547
for practitioners	163
for institutions	269
For Wassermann reaction—	
for treatment centre	2,887
for practitioners	191
for institutions	1,326
Other examinations—	
for treatment centre	301
for practitioners	..
for institutions	1
TOTAL	6,735

PERSONS TREATED AT THE GENERAL INFIRMARY, LEEDS.
(LOCAL TREATMENT CENTRE).

				Year 1924.		Year 1925.		Increase or decrease.	
				M.	F.	M.	F.	M.	F.
Syphilis ..	first cases	..	..	329	219	343	227	+ 14	+ 8
Soft chancre	..	..	..	..	..	..	..	..	..
Gonorrhœa	..	..	..	503	103	498	87	- 5	- 16
Other diseases	..	..	..	136	37	246	57	+ 110	+ 20
not Venereal	..	..	..	..	..	..	..	..	..
Total	..	..	..	968	359	1,087	371	+ 119	+ 12
Total attendances of all cases				45,591		58,165		+ 12,574	
Aggregate No. of In-patient days				62		3		- 59	
No. of doses of Salvarsan substitutes				9,273		11,617		+ 2,344	
Pathological specimens examined :—									
Spirochetes				35		51		+ 16	
Gonococci				889		2,143		+ 1,254	
Other organisms				247		3		- 244	
Blood—Wassermann reaction				3,678		3,798		+ 120	

LEEDS PATIENTS

	Year 1924.		Year 1925.		Increase or Decrease.	
	M.	F.	M.	F.	M.	F.
Syphilis first cases	266	157	301	165	+ 35	+ 8
Soft chancre	..	..	..	..	..	..
Gonorrhœa	420	89	433	70	+ 13	- 19
Other diseases, not Venereal	108	28	192	48	+ 84	+ 20
Total	794	274	926	283	+ 132	+ 9
Total attendances of all cases	39,510		50,164		+ 10,654	
Aggregate No. of In-patient days	53		3		- 50	
No. of doses of Salvarsan sub- stitutes	6,912		8,938		+ 2,026	
Pathological specimens examined :—						
Spirochetes	26		47		+ 21	
Gonococci	748		1,848		+ 1,100	
Other organisms	209		..		- 209	
Blood—Wassermann re- action	2,800		2,887		+ 87	

VENEREAL DISEASES.

There were 32 deaths certified during the year as due to syphilis which is equal to a death rate of 0.07 per thousand of the population. Of these, 29 were children under one year of age, 17 males and 12 females; one male between 1 and 2 years; one female between 30 and 35; and one male between 75 and 85.

It is necessary to reiterate the statement which has appeared in previous reports that syphilis as a cause of death occupies a much more important place than would appear from these figures, but, in the absence of exact information on the subject, it is impossible to do more than merely direct attention to the fallacy.

Work of the Treatment Centre.—The total number of new cases registered at the Centre at the Leeds General Infirmary from Leeds and the contributory areas during the year was 1,458 or 131 in excess of the figure for the previous year. The increase was made up as follows:—syphilis, male 14 or 4.3 per cent., female, 8 or 3.7 per cent., other diseases not venereal, male 110 or 80.9 per cent., female 20 or 54.1 per cent. In gonorrhœa there was an actual decrease of 21 in the number of new cases registered, namely, males five and females 16. The total number of attendances of all cases was 58,165, an increase of 12,574 over the figure for the previous year.

Turning to the Leeds cases, the total number of new cases registered was 1,209 comprising 301 males and 165 females suffering from syphilis, 433 males and 70 females suffering from gonorrhœa, and 192 males and 48 females suffering from other diseases not venereal. These figures represent an increase in the case of syphilis of 35 males and 8 females, gonorrhœa 13 males, and other diseases not venereal 84 males and 20 females, and a decrease of 19 females suffering from gonorrhœa. The total attendances of all Leeds cases was 50,164 or an increase of 10,654 over the figure for the previous year.

LEEDS GENERAL INFIRMARY (LOCAL TREATMENT CENTRE).

Cases on the register on January 1st, 1925	..	1,650
New cases admitted	.. .. .	1,458
Cases ceased to attend	.. .. .	348
Transferred to other centres	.. .. .	85
Discharged on completion of treatment	.. .. .	823
Cases on the register on January 1st, 1926	..	1,852

The increase, it will be noted, is most marked amongst the suspected cases, which is significant as showing the increased appreciation of the value of expert treatment for these diseases both by medical practitioners and the public generally. Taken as a whole, men attend better than women. Especially is this the case with regard to gonorrhœa, and one cannot escape the impression that the number of cases of female gonorrhœa which go untreated is considerable. It is a matter of regret that this should be so because untreated gonorrhœa in the female is a prolific source of sterility and disabling complaints.

Of all cases 348 gave up attending the Centre before treatment was complete. This is 250 less than the figure for the previous year which was 598 of the total cases. Such a fall is distinctly encouraging because it must be recognised that the expense involved in the treatment of syphilis and gonorrhœa by modern methods is considerable and can only be justified if cure results. Cases failing to continue their attendances at the Centre until discharged by the Medical Officer not only represent a loss in cash but they remain a potential source of danger to themselves and to the community.

Institutions.—The shrinkage in the number of patients receiving treatment in the Maternity Hospital mentioned in my last report continued at even a more rapid rate during the year. New cases treated as in-patients fell from 35 to 11, whilst the total cases treated fell from 37 to 12. In-patient days were reduced from 343 to 197. As regards cases attending as out-patients, however, there was an increase of seven, namely, from 19 to 26, made up of syphilis 22 and gonorrhœa four.

At the Leeds General Infirmary the in-patient days dropped from 62 in 1924 to three in 1925.

At the Hope Hospital the number of cases treated was 55 as against 40 for the previous year, whilst the new admissions rose from 28 to 43. The in-patient days increased from 4,372 to 4,599. It should be pointed out, however, that these figures do not include

babies admitted with their mothers or born whilst their mothers were in residence. I had occasion in my last report to bewail the fact that the facilities provided at this hospital were not taken advantage of to the extent they might be. The record for 1925 is more encouraging and may be taken as evidence that the existence of this institution is becoming more widely known, not only in Leeds, but throughout the County and farther afield. Some of the cases treated in the hospital during the year came from as far north as Carlisle.

Further particulars of the cases admitted to and treated in the Maternity and Hope Hospitals are given on page 112.

Ophthalmia neonatorum is dealt with on page 92.

Supply of Salvarsan Substitutes.—The number of medical practitioners in the area qualified to receive free supplies of salvarsan substitutes up to the end of the year was 45. The amount of salvarsan substitutes distributed to practitioners was 1,078 doses, an increase of 324 over the figure for 1924.

Pathological Work.—The extent to which practitioners have availed themselves of the facilities for pathological examinations provided by the Council is shown on page 107.

Education and Propaganda.—During the year the National Council for Combating Venereal Diseases altered its title to the British Social Hygiene Council, and in consequence of this change the Leeds Branch became the Leeds Committee of Social Hygiene. This Committee will continue to be responsible for propaganda in connection with venereal disease, but in addition will undertake publicity work on the subject of public health generally. The constitution of the Committee remains unchanged. Seeing that the scope of the Committee is no longer restricted to venereal diseases the report of its work will be found in the section on Propaganda on page 177.

MATERNITY HOSPITAL, 42, HYDE TERRACE.

	Cases in residence on Jan. 3rd, 1925.	Cases admitted.	Cases discharged.	Cases in residence on Jan. 2nd, 1926.
Syphilis	..	11	10	1
Gonorrhœa	..	..	..	..
Syphilis and Gonorrhœa ..	1	..	1	..
Other disease ..	..	..	..	..
Total	1	11	11	1

Total days in residence 197

No. of doses of Salvarsan substitute .. 115

Pathological specimens examined :—

Spirochetes —

Gonococci 7

Other organisms —

Blood—Wassermann reaction.. .. 91

In addition to the above the following attended for the first time and were treated as out-patients, namely, syphilis, 22; and gonorrhœa, 4. The total attendances made by these out-patients were 91.

HOPE HOSPITAL, 126, CHAPELTOWN ROAD.

	Cases in residence on Jan. 3rd, 1925.	Cases admitted.	Cases discharged.	Cases in residence on Jan. 2nd, 1926.
Syphilis	2	20(+6)	21(+5)	1(+1)
Gonorrhœa	10(+4)	13(+7)	19(+10)	4(+1)
Syphilis and Gonorrhœa ..	..	5	2	3
Other disease ..	..	5(+1)	5(+1)	..
Total	12(+4)	43(+14)	47(+16)	(8+2)

Total days in residence 4,599(+1,650)

No. of doses of Salvarsan substitute .. 236

Pathological specimens examined :—

Spirochetes —

Gonococci 61

Other organisms —

Blood—Wassermann reaction.. .. 34

Of the 43 women admitted, 13 had babies (1 twins) shown in the above table in brackets and 3 children were admitted without mothers.

TUBERCULOSIS.

At the time of writing my last report the Tuberculosis Dispensary had been vacated by the National Health Insurance Committee and plans for its reconstruction had been approved. Since then the first floor consisting of offices for the clerical staff and nurses, doctors' rooms, committee room and store rooms has been completed and occupied. Owing to certain alterations in the plans the work on the ground floor has been somewhat delayed. It is anticipated, however, that the ground floor rooms will be ready for occupation in the Autumn. When complete, there will be, in addition to a waiting room for the patients, two consulting rooms, two dressing rooms, a surgery, an artificial sunlight room and a dental room. It was the intention when the plans were first considered to include an X-ray installation but the Committee at a later date decided to defer this for the time being. It is understood, however, that, as soon as the main alterations are finished, the matter will be considered again and in all probability one of the rooms on the first floor will be commissioned for the purpose.

The Old Hall at Killingbeck has been reconstructed and is now in occupation, one portion of it being used as resident quarters for male porters and the other as a maids' home, whilst the large rooms on the ground floor are used as rest and recreation rooms for women patients. The re-commissioning of this building has relieved very considerably the pressure on the accommodation for maids and porters at New Killingbeck.

The "Hollies," Weetwood, was opened as a Sanatorium School for children in April and since then the 40 beds provided in it have been fully occupied. With the heavy list of children suffering from early pulmonary tuberculosis awaiting sanatorium treatment, the opening of this institution will be of immense benefit. Already the results have been very satisfactory.

Detailed information concerning the work of the institutions will be found on pages 125 to 131.

The total accommodation at all the institutions provided by the Corporation for the treatment of tuberculosis of all forms on December 31st, 1925, was:—

	Males.	Females.	Children.	Total.
Killingbeck ..	88	78	54	220
Gateforth ..	50	—	—	50
The "Hollies "	—	—	40	40

New Sanatorium.—As regards the building of the new Sanatorium which has been alluded to in several of my previous reports, I regret to say no further progress has been made with the scheme. Further than examining a few sites in the vicinity of Leeds no definite steps have been taken to carry into effect this part of the proposals put forward by the Committee in 1918. That additional accommodation is required, cannot be gainsaid, as there is at present a waiting list every month of over 200 cases, including men, women and children, suffering from all forms of the disease. No matter how assiduous one's endeavours to reduce the list by accelerating the admission and discharge of cases to and from Killingbeck, Gateforth and "The Hollies" very little impression is made. It must be obvious that the mere speeding-up of the movement of cases into and out of the Sanatoria will not solve the problem, indeed, it is open to the grave objection that it may occasion curtailment of the period of residential treatment in cases where lengthening rather than shortening of stay is indicated. The only true solution of the problem, therefore, is to be found in augmenting the number of available beds. To do this at any of the existing institutions, even if it were practicable, is not advisable, so that there remains no alternative, but to build a new Sanatorium. It need not be an elaborate or expensive building—indeed as far as the wards are concerned these could be of the simplest design and the cheapest material. The administrative part would necessarily require to be of a more permanent character. Nor is it necessary, having obtained the site, to erect the whole of the buildings at once. It would be sufficient to begin with to erect the administrative block and offices and as many wards as would meet immediate needs. The matter is urgent and I hope there will be no further delay in making a start.

Register of Notifications.—A great work was undertaken during the year, in the revision of the register of notified cases. This register has been in use from the inception of the Tuberculosis Scheme in 1913 and though it was pretty well up-to-date until 1914 the intervention of the war rendered it impossible to make the necessary corrections due to death, emigration and change of diagnosis. Hence it was found at the end of the war that it had ceased to be an exact record of the tuberculous population of the City and the opportunity of revising it did not occur until last year. The fact that there were

over 7,000 persons to visit in order to find out whether they were alive or dead, and if the former whether they were still in the City, will give some idea of the magnitude of the task involved. It was, however, successfully accomplished in the early weeks of the current year, so that the register may now be looked upon as an exact record of the number of persons in the City who are suffering from the disease in its various forms. The actual number of names on the register on December 31st was 7,599.

Statistics.—During the year 1,720 cases of pulmonary and 149 of non-pulmonary tuberculosis were notified, making a total of 1,869 cases. Of these, 1,060 were males and 809 females. Compared with the previous year this is an increase of 529 in the number of notifications of pulmonary tuberculosis and a decrease of 31 in the number of non-pulmonary, and compared with the average of the previous five years an increase of 751 in pulmonary tuberculosis and a decrease of 49 in non-pulmonary. Of the cases notified during 1925, 1,723 were by medical practitioners, two by school medical officers, whilst 144 came from institutions.

The number of cases of pulmonary tuberculosis not heard of until the time of death was 60 which is a decrease of 24 on the figure for the previous year, or expressed in another way, of the total number of deaths from pulmonary tuberculosis which occurred during the year all but 60 (or 11.7 per cent.) had been previously notified to the Public Health Department.

Of non-pulmonary cases, the number unnotified was 43, or 48.9 per cent. of the total deaths from non-pulmonary tuberculosis, which, compared with the figure for the previous year, represents a decrease of 38. Thus, taking both pulmonary and non-pulmonary cases together, the number unnotified at the time of death was 62 less than in 1924. Such a result is very encouraging and I hope the number will be still further reduced in the current year. There is really no excuse for failure to notify in the majority of instances. One is perfectly aware of the fact that in some cases diagnosis is difficult, and in others death supervenes so rapidly that there is not time to notify, but such cases are comparatively few.

An analysis of the notifications in age groups will be found in the table on page 116, and I would direct attention to the marked increase in the number of children under 15 years of age notified as suffering from pulmonary disease. The total notifications in the three age groups, 0-1, 1-5 and 5-15 amount to 431 or 25.1 per cent.

The following tables show the number of notifications of tuberculosis received during the year.

PULMONARY.

Ages.	-1	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65+	Total.
Males ..	2	30	192	163	184	176	144	64	24	979
Females	1	18	188	158	177	110	55	25	9	741
Totals ..	3	48	380	321	361	286	199	89	33	1720

NON-PULMONARY.

Ages.	-1	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65+	Total.
Males ..	4	27	25	12	7	2	2	..	2	81
Females	4	12	25	14	8	3	1	1	..	68
Totals ..	8	39	50	26	15	5	3	1	2	149

TUBERCULOSIS.

YEAR.	DEATHS.						NOTIFICATIONS.					
	Pulmonary tuberculosis.		Non-pulmonary tuberculosis.		All forms tuberculosis.		Pulmonary tuberculosis.		Non-pulmonary tuberculosis.		All forms tuberculosis.	
	Deaths.	Death-rate.	Deaths.	Death-rate.	Deaths.	Death-rate.	Cases.	Case-rate.	Cases.	Case-rate.	Cases.	Case-rate.
1915	651	1.42	230	0.50	881	1.92	1,068	2.33	312	0.68	1,380	3.01
1916	695	1.56	268	0.60	963	2.16	1,029	2.31	320	0.72	1,349	3.03
1917	674	1.54	280	0.64	954	2.18	1,081	2.47	336	0.77	1,417	3.24
1918	705	1.65	257	0.60	962	2.25	1,238	2.90	241	0.56	1,479	3.46
1919	542	1.26	177	0.41	719	1.67	1,076	2.50	208	0.48	1,284	2.98
1920	552	1.23	146	0.33	698	1.56	962	2.14	209	0.47	1,171	2.61
1921	519	1.11	122	0.26	641	1.37	867	1.86	234	0.50	1,101	2.36
1922	533	1.14	120	0.26	653	1.40	824	1.77	172	0.37	996	2.14
1923	515	1.10	122	0.26	637	1.36	1,002	2.13	197	0.42	1,199	2.55
1924	513	1.09	144	0.31	657	1.40	1,191	2.53	180	0.38	1,371	2.91
1925	511	1.08	88	0.19	599	1.27	1,720	3.64	149	0.32	1,869	3.96

of the total notifications received. In former years this number was considerably lower, indeed at one time it was looked upon as a rare thing to get pulmonary tuberculosis in a child under five. There is evidently a change going on in the age distribution of this form of the disease, which may be the result of increased susceptibility amongst the younger section of the community or may be due to faulty diagnosis. Whatever the explanation the evidence seems to point to an increasing prevalence of the disease in children under 15 years. The most remarkable increases are in the age groups 1-5 and 5-15 where the figures have risen from 9 and 128 respectively in 1921 to 48 and 380 last year. As regards non-pulmonary tuberculosis the tendency is in the opposite direction, that is the disease is receding in the younger age groups with the exception of 1-5 and indeed throughout all the age groups over five years.

An analysis of the notifications in age groups will be found in table on page 116.

Of the total deaths which occurred in the City during 1925 599 (or 9.9 per cent.) were certified as being due to tuberculosis of which 343 were males and 256 were females. In 1924 the total number of deaths from tuberculosis was 657, comprising 364 males and 293 females. There was therefore a decrease of 21 in the male deaths and 37 in the female deaths or a total decrease of 58. Analysed according to the particular form of the disease 511 (or 85.3 per cent.) of the total deaths were due to pulmonary tuberculosis and 88 (or 14.7 per cent.) to non-pulmonary. As compared with 1924 these figures represent a decrease, the former of 2 and the latter of 56. The nett death rate from all forms of the disease was 1.27 made up of 1.08 pulmonary and 0.19 non-pulmonary, which represent a decrease in the total rate of 0.13, in the pulmonary rate of 0.01 and in the non-pulmonary rate of 0.12 as compared with the previous year. Compared with the average rate for the previous five years the decrease is even more marked being 0.14 on the total death rate and 0.05 and 0.09 on the pulmonary and non-pulmonary rates respectively. The striking thing about these figures is the tardy manner in which the pulmonary death-rate falls as compared with

the non-pulmonary. A decade ago that is in 1915, the rate for pulmonary tuberculosis was 1.42 and that for non-pulmonary 0.50 whilst last year the corresponding rates were 1.08 and 0.19 which represent a fall of 23.9 per cent. on the pulmonary and 62.0 per cent. on the non-pulmonary. Taking the average for the decade, 1915-1924, which is perhaps the fairer comparison the percentage decrease in the pulmonary rate 17.6 and non-pulmonary 54.8.

It is difficult to explain why the pulmonary should lag so far behind the non-pulmonary, and yet, if one surveys the conditions of the City ten years ago and to-day, one is bound to admit that any improvement there has been is more marked with regard to the food, including the milk which is the chief source of non-pulmonary infection, than it has been with regard to the purity of the atmosphere or the general domestic environment of those parts of the City where the disease is most rife. In addition, the measures adopted in recent years to improve the health of the children and to increase their powers of resistance to disease generally has doubtless had the effect of warding off attack from many who would otherwise have fallen victims. Pulmonary tuberculosis presents a harder problem than does the non-pulmonary because of the fact that the infection is more acute and more wide-spread and also that the type of infecting agent, the human bacillus, is much more ubiquitous and more virulent than the non-pulmonary type which is mostly bovine in origin and operates in a more restricted field. In Leeds we have been handicapped in our efforts to eradicate the disease by the lack of a complete organisation. It is only now that the Tuberculosis Dispensary, which ought to be the key-stone of any tuberculosis scheme, is being put on a proper basis, and there is great need for extended sanatorium facilities. It must not be assumed that a new sanatorium is going to solve our difficulties—it can at the best only aid our efforts in that direction—but without adequate and suitable accommodation for in-patient cases it is impossible to apply modern methods of treatment or to give to acute infective cases that medical and nursing care and attention which is necessary if the disease is to be successfully combated.

It is well known that environment plays an important part in the spread of pulmonary infection, and in a City like Leeds where the housing conditions are not as satisfactory as they might be and where overcrowding is common, the need for institutional accommodation is all the more imperative. An overcrowded back-to-back house in a congested part of the City provides a most favourable breeding ground for the tubercle bacillus and one has only to imagine a case of active disease in a family living under such conditions to realise how rapidly one case may be multiplied into three, four, or even more cases. I believe that with the decrease in overcrowding and the disappearance of the old unsatisfactory house property, so common in the meanest parts of the City, the problem would solve itself, but, as such a proposition is entirely impracticable at the present time, the next best thing to do is to make our tuberculosis organisation as perfect as possible.

The tables on pages 120 and 121 give the analysis of the deaths in the various wards and age groups.

I have already dealt with the growing incidence of pulmonary tuberculosis amongst children under five years (see page 115), but it will be observed that the trend of the death-rate in the younger age groups is rather in the opposite direction.

I refer to the influence of housing on the incidence of disease in another part of this report, see page 30, and the table on page 122 is inserted for the purpose of illustrating this point.

An important consideration in dealing with the mortality from tuberculosis is the time which elapses between notification and death, because the earlier the period in the development of the disease at which the case becomes known to the Public Health Department, the more likely are the measures taken to effect a cure and to prevent spread of the disease to other persons to be successful. Far too many cases are on the point of death before being notified as may be seen from the examination of the table on page 123 which shows that no fewer than 36.6 per cent. of the cases who died during 1925 were notified during the same year. This means that any steps taken by the Department to render assistance were doomed to failure from the beginning. This is a point which might very well have the attention of the medical practitioners who, I may remind, are under the obligation on discovering a case of tuberculosis in their practice forthwith to notify the Medical Officer of Health of the same.

PULMONARY TUBERCULOSIS.

AGES AT DEATH.

1925.	-5	5-10	10-15	15-20	20-25	25-45	45-65	65+	Total.
Males ..	13	1	2	19	19	114	109	14	291
Females	9	6	6	30	41	90	35	3	220
TOTALS	22	7	8	49	60	204	144	17	511
Average 10 years 1915-1924	24	11	21	58	64	246	142	25	590

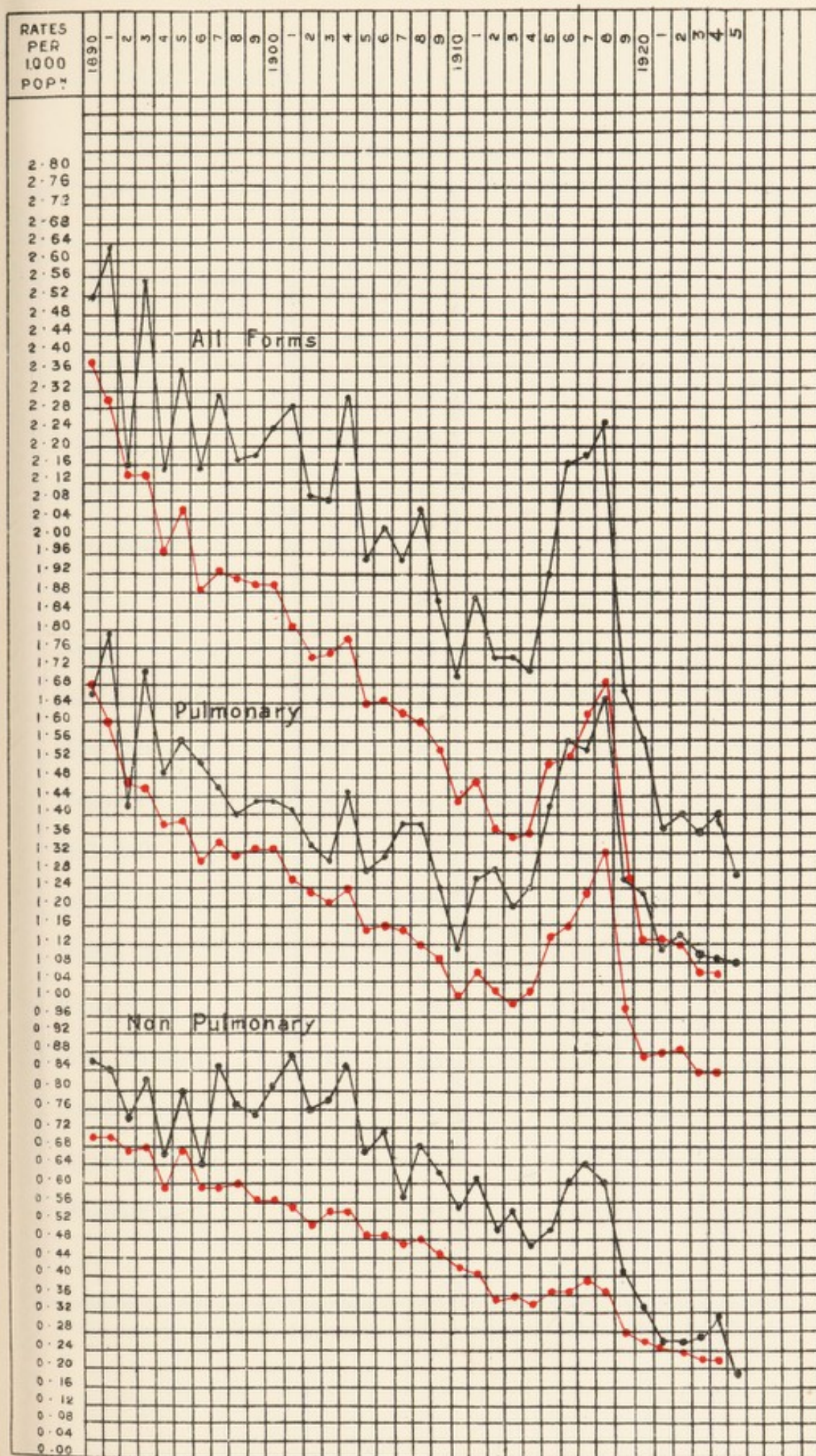
NON-PULMONARY TUBERCULOSIS. DEATHS.

1925.	Tubercular meningitis.	Abdomin- al.	Bones and Joints.	Other tuber- culosis.	Total.
Males ..	28	7	11	6	52
Females ..	13	10	7	6	36
Totals ..	41	17	18	12	88

AGES AT DEATH.

1925.	-5	5-10	10-15	15-20	20-25	25-45	45-65	65+	Total.
Males ..	26	5	1	5	3	6	4	2	52
Females	10	4	4	6	1	6	4	1	36
Totals ..	36	9	5	11	4	12	8	3	88
Average 10 years 1915-1924	85	25	17	16	9	17	12	4	187

TUBERCULOSIS DEATH RATE.— 1890 - 1925.



LEEDS — BLACK.
ENGLAND AND WALES — RED.



TUBERCULOSIS—DEATHS AND RATES IN WARDS.

MUNICIPAL WARD.	Pulmonary Tuberculosis.		Non-Pulmonary Tuberculosis.		All Forms Tuberculosis.	
	Deaths.	Death-rate.	Deaths.	Death-rate.	Deaths.	Death-rate.
Central	18	1·42	2	0·16	20	1·58
North	36	0·83	9	0·21	45	1·04
North-East	57	1·55	6	0·16	63	1·71
New Ward*	11	1·14	..	..	11	1·14
East	56	1·55	14	0·39	70	1·94
South	17	1·31	3	0·23	20	1·54
East Hunslett†	29	0·76	11	0·29	40	1·05
West Hunslet ..	30	0·82	8	0·22	38	1·04
Holbeck	33	1·11	4	0·13	37	1·24
Mill Hill	11	2·08	1	0·19	12	2·27
West	30	1·36	4	0·18	34	1·54
North-West	33	1·04	4	0·13	37	1·17
Brunswick	30	1·25	3	0·12	33	1·37
New Wortley ..	24	1·33	1	0·06	25	1·39
Armley and Wortley	35	0·93	8	0·21	43	1·14
Bramley	14	0·57	2	0·08	16	0·65
Headingley	47	0·89	8	0·15	55	1·04
City	511	1·08	88	0·19	599	1·27

*Roundhay, Seacroft, Shadwell, and Crossgates. †Including Middleton.

The housing conditions of 1,802 of the 1,869 cases of tuberculosis (all forms) notified, are shown in the table subtended :—

Rooms in house.	Through house.	Percentage of total throughs.	Back-to-back house.	Percentage of total back-to-back.	Percentage of total cases.
1 room	12	2.9	9	0.6	1.2
2 rooms	12	2.9	303	21.9	17.5
3 rooms	49	11.8	604	43.6	36.2
4 rooms	97	23.3	365	26.3	25.6
5 rooms	129	31.0	67	4.8	10.9
6 rooms	69	16.6	37	2.7	5.9
7 or more rooms	48	11.5	1	0.1	2.7
Total	416	100.0	1,386	100.0	100.0

In addition to the 416 through houses and 1,386 back-to-back houses, there were 63 cases notified from common lodging houses, etc., and four that could not be traced, making a total of 1,869 cases of all forms of tuberculosis notified during the year.

The sub-joined table indicates the type of house occupied by 200 persons who were notified during 1925 as suffering from tuberculosis of all forms and who died during the year :—

Rooms in house.	Through house.	Percentage of total throughs.	Back-to-back house.	Percentage of total back-to-back.	Percentage of total deaths.
1 room	1	1.8	..	..	0.5
2 rooms	1	1.8	32	21.9	16.5
3 rooms	4	7.4	58	39.7	31.0
4 rooms	11	20.4	45	30.8	28.0
5 rooms	15	27.8	8	5.5	11.5
6 rooms	13	24.1	2	1.4	7.5
7 or more rooms	9	16.7	1	0.7	5.0
Total	54	100.0	146	100.0	100.0

In addition to 54 through houses and 146 back-to-back houses, there were 19 deaths in which the home address was given as common lodging houses, etc.

DEATHS FROM ALL FORMS OF TUBERCULOSIS IN 1925 WITH YEAR
OF NOTIFICATION.

Year of Notification.			No. dying in 1925.	Percentage of total deaths.
1910	..	..	1	0.2
1911	..	..	3	0.5
1912	..	..	1	0.2
1913	..	..	5	0.8
1914	..	..	3	0.5
1915	..	..	5	0.8
1916	..	..	4	0.7
1917	..	..	9	1.5
1918	..	..	12	2.0
1919	..	..	10	1.7
1920	..	..	9	1.5
1921	..	..	21	3.5
1922	..	..	26	4.3
1923	..	..	39	6.5
1924	..	..	117	19.5
1925	..	..	219	36.6
Not notified	..		104	17.4
Died outside City			11	1.8
Total	..		599	100.0

NOTIFICATIONS AND DEATHS FROM ALL FORMS OF TUBERCULOSIS
OCCURRING IN 1925 CLASSIFIED ACCORDING TO OCCUPATION.

Occupation.	Notifications.		Deaths.	
	Number.	Percentage of total Notifications.	Number.	Percentage of total deaths.
Textile Workers ..	307	16·4	105	17·5
Leather „ ..	64	3·4	15	2·5
Metal „ ..	158	8·4	67	11·2
Coal „ ..	68	3·6	16	2·7
Stone „ ..	50	2·7	15	2·5
Wood „ ..	23	1·2	9	1·5
Other dusty Trades ..	61	3·3	20	3·3
Printers	17	0·9	7	1·2
Clerks, Typists, etc. ..	44	2·4	23	3·8
House Workers ..	254	13·6	103	17·2
Nurses	5	0·3	..	..
Food Trades, etc. ..	52	2·8	28	4·7
Labourers	88	4·7	37	6·2
Out-door Workers ..	90	4·8	27	4·5
Various	67	3·6	29	4·8
School Age	425	22·7	28	4·7
Infants	89	4·8	58	9·7
No Occupation ..	7	0·4	11	1·8
No Trace	..	..	1	0·2
Total ..	1,869	100·0	599	100·0

The table on page 124 indicates the occupation of persons notified during the year as suffering from tuberculosis or registered as dying from the disease. With the exception of the textile, no one trade seems to be more prone to attack than another. The clothing trade because of its dusty nature, and also perhaps because of the unhealthy conditions obtaining in some of the factories and workshops, is more conducive to pulmonary disease than the heavier trades. It must be borne in mind, however, that the number of persons engaged in the textile industries is considerably greater in Leeds than in any other industry.

Institutional Treatment.—Details of the cases admitted to the three Sanatoria, Killingbeck, Gateforth and "The Hollies," are given in the tables on pages 127, 129 and 131.

Killingbeck.—The Medical Superintendent, Dr. W. A. Todd, writes :—

"During the year ended 2nd January, 1926, the total number of cases treated in the Institution was 1,119, comprising 454 males, 415 females and 250 children, as compared with 1,060, made up of 476 males, 365 females and 219 children for the previous year. Of the total 289 were ex-service men. All types of the disease were admitted, but pulmonary cases predominated, there being 1,073 of this type against 46 non-pulmonary. The accommodation remains the same, viz., 220 beds, allocated as follows :—88 males, 78 females and 54 children.

"The conduct of the patients during the year was very satisfactory ; the school continued to be of great advantage both from a mental and physical point of view. The head teacher's report is appended.

"A scheme of work was introduced during the year which includes basket-making, gardening, carpentry, french polishing and light ward work. The scheme is in charge of a trained instructor who devotes the whole of his time to the work. The object of the scheme is to keep the minds and bodies of the patients occupied during their treatment so that progress is not retarded by an excess of unoccupied leisure which frequently results in marked introspection and discontent, sometimes in actual breaches of discipline and insubordination. The experience gained in the short period during which the scheme has been in operation has been encouraging and inspires me with hope of better results in the coming year.

"The effect of the appointment, by the Committee, to the staff of the hospital of a head gardener is seen in the greatly improved condition of the grounds around the sanatorium, and I am hoping to be able to show during the current year a satisfactory return on the money spent in this direction from gardening produce supplied for the use of the patients and staff in the institution. The keeping of pigs continued to be profitable, the nett profit for the year being £180.

School Report.—The total number of children enrolled was 174, varying in ages from 5 to 15 years, and the total attendances numbered 18,708.

"In May an assistant teacher was appointed and this additional help made it possible to give the children more individual attention.

"The subjects taught are those in the ordinary school curriculum, namely, arithmetic, English, history, geography, etc.

"Special attention is devoted to hand-work, sewing, leatherwork, light woodwork, and gardening.

"Singing and dancing are also taught and are a source of great pleasure to the children besides being of undoubted value from the point of view of their physical fitness.

"Whenever possible classes are held out-of-doors.

"The discipline has been good and the training afforded by the school most beneficial to the children in every way. Their love for school and eagerness not to miss an attendance are very encouraging features.

"In January Dr. M. C. Bywaters of the Board of Education visited the school and expressed her satisfaction with the work."

Gateforth.—The work at Gateforth continued on the lines indicated in previous reports. This institution is exceptionally well adapted for the treatment of early or arrested cases of the disease but owing to the pressure on the accommodation at Killingbeck it has been found necessary at times to send cases of a more advanced type. As was to be expected the results in such cases have not been satisfactory either to the staff of the institution or to the individuals themselves. The practice in former years was to send cases direct from the dispensary and this undoubtedly was responsible for many cases being sent to Gateforth which were not entirely suitable for the institution. An arrangement has now been made whereby all cases are sent through Killingbeck. They are selected by the Medical Superintendent conjointly with the Chief Clinical Tuberculosis Officer which ensures the elimination of unsuitable cases. Cases of a favourable type respond rapidly to treatment at Gateforth. The free open-air regime seems to have the effect of toning-up the body and enabling the tissues to consolidate the gains made at Killingbeck. Though admirable as a recuperative centre, Gateforth would not make a satisfactory sanatorium for the treatment of acute cases. It is as an adjunct to Killingbeck that it has its greatest use.

Killingbeck.**PULMONARY TUBERCULOSIS FOR YEAR ENDED
2nd JANUARY, 1926.**

KILLINGBECK SANATORIUM.	Males.		Females.		Total.
	Under 15	Over 15	Under 15	Over 15	
Remaining Jan. 3rd, 1925	22	81	17	61	181
Admitted	98	362	93	339	892
Discharged	94	327	87	304	812
Died	..	34	2	28	64
Remaining Jan. 2nd, 1926	26	82	21	68	197

Average length of stay, 66 days.

ANALYSIS OF CASES DISCHARGED.

KILLINGBECK SANATORIUM.	Males.		Females.		Total.
	Under 15	Over 15	Under 15	Over 15	
Disease quiescent	63	85	62	56	266
.. improved	30	213	24	201	468
.. not improved	1	29	1	47	78
TOTALS	94	327	87	304	812

Restoration of working capacity—				Males.	Females.	Total.
100 per cent. approximately	..	..	..	79	65	144
80	..	..	..	54	44	98
60	..	..	..	52	71	123
40	..	..	..	50	32	82
20	..	..	..	55	37	92
10	..	..	..	8	8	16
TOTALS	..	..	..	298	257	555

NON-PULMONARY TUBERCULOSIS FOR YEAR ENDED
2nd JANUARY, 1926.

KILLINGBECK SANATORIUM.	Males.		Females.		Total.
	Under 15	Over 15	Under 15	Over 15	
Remaining Jan. 3rd, 1925	4	5	9	8	26
Admitted	1	6	6	7	20
Discharged	4	7	10	11	32
Died	..	..	..	1	1
Remaining Jan. 2nd, 1926	1	4	5	3	13

Average length of stay, 116 days.

ANALYSIS OF CASES DISCHARGED.

KILLINGBECK SANATORIUM.	Males.		Females.		Total.
	Under 15	Over 15	Under 15	Over 15	
Disease quiescent	..	..	..	..	..
„ improved	4	6	9	6	25
„ not improved	..	1	1	5	7
TOTALS	4	7	10	11	32

Restoration of working capacity—				Males.	Females.	Total.
100 per cent. approximately	..	..	..	2	3	5
80 „ „	..	..	..	2	1	3
60 „ „	..	..	..	2	1	3
40 „ „	..	..	..	..	1	1
20 „ „	..	..	..	..	..	..
10 „ „	..	..	..	..	..	..
TOTALS	..	..	..	6	6	12

Gateforth.

**PULMONARY TUBERCULOSIS FOR YEAR ENDED
2nd JANUARY, 1926.**

GATEFORTH SANATORIUM.	Males.		Females.		Total.
	Under 15	Over 15	Under 15	Over 15	
Remaining Jan. 3rd, 1925	..	37	..	11	48
Admitted	..	171	..	14	185
Discharged	..	158	..	25	183
Died	..	..	..	..	..
Remaining Jan. 2nd, 1926	..	50	..	..	50

Average length of stay, 97 days.

ANALYSIS OF CASES DISCHARGED.

GATEFORTH SANATORIUM.	Males.		Females.		Total.
	Under 15	Over 15	Under 15	Over 15	
Disease arrested	..	15	..	4	19
„ improved	..	106	..	15	121
„ not improved	..	37	..	6	43
TOTALS	..	158	..	25	183

Restoration of working capacity—				Males.	Females.	Total.
100 per cent. approximately	..	..	..	15	4	19
80 „ „	..	..	..	47	7	54
60 „ „	..	..	..	59	8	67
40 „ „	..	..	..	32	4	36
20 „ „	..	..	..	2	2	4
10 „ „	..	..	..	3	..	3
TOTALS	..	..	..	158	25	183

One case of non-pulmonary tuberculosis was discharged improved from Gateforth after a residence of 260 days.

"*The Hollies*."—On the 1st of April "*The Hollies*," Weetwood, was opened as a Sanatorium School for children suffering from early pulmonary tuberculosis. The institution has accommodation for 40 cases including 18 boys under ten years of age and 22 girls under 14 years of age. Being a private dwelling-house there was some difficulty in adapting it for the purpose of a sanatorium as is always the case with buildings of this description, but the difficulty was overcome, and, though the building even now is not ideal, it serves its purpose fairly satisfactorily. The one great drawback about it is the lack of ground, only a small corner of the garden, not more than one acre in extent, being reserved for the use of the institution. The corner, however, is a very charming one with beautiful surroundings and a good exposure. The children have also the privilege of walking in the park which surrounds the sanatorium at times when it is not being used by the Public. The ground floor of the house itself is devoted to class-rooms, play-room, one large ward, as well as kitchen and offices. The first floor is taken up entirely with children's dormitories, and the second floor with staff dormitories. At the back there is a large play-ground of asphalt with an open-air shed which can be used as a school-room or recreation room in wet weather. The staff consists of a matron and four nurses and the medical work is supervised by the Dispensary medical staff who visit the institution regularly and examine the children. A trained teacher has been appointed to take charge of the educational side of the institution and she is also responsible for organising the games and seeing that the time of the children is suitably occupied when they are not resting or undergoing treatment.

"*School Report*.—The school was opened on the 1st April when 30 children were admitted.

"As from July 16th the number was increased to 40 of ages ranging from 3 to 13 years.

"All children who are physically fit to receive instruction attend school.

"The number of children admitted to the school register was 119 (boys 73 and girls 46).

"The number of school sessions was morning 184, afternoon 183, total 367.

"The total number of attendances was 12,403 and the average attendance per session was 33.

"The highest number on the roll was 40. The variation is due to the fact that children are discharged one morning and the new children admitted the following afternoon.

"The instruction given is in those subjects commonly taught in the ordinary elementary schools, with in addition basket work, dancing and music."

Details of the cases admitted to and discharged from the institution during the year will be found below.

"The Hollies" Sanatorium School.

PULMONARY TUBERCULOSIS FOR PERIOD ENDED 2nd JANUARY, 1926.

"THE HOLLIES," WEETWOOD LANE.	Males.		Females.		Total.
	Under 5	Over 5	Under 5	Over 5	
Opened April 1st, 1925.					
Admitted	8	72	1	47	128
Discharged	6	56	1	25	88
Died	..	..	..	..	..
Remaining Jan. 2nd, 1926	2	16	..	22	40

Average length of stay, 81.2 days.

ANALYSIS OF CASES DISCHARGED.

"THE HOLLIES," WEETWOOD LANE.	Males.		Females.		Total.
	Under 5	Over 5	Under 5	Over 5	
Disease arrested	..	..	..	..	..
„ improved	6	56	1	25	88
„ not improved	..	..	..	..	..
TOTALS	6	56	1	25	88

Children suffering from surgical tuberculosis continued to be sent for treatment to Marguerite Home, Thorparch and The Lord Mayor Treloar's Hospital, Alton, Hampshire. The number admitted to the former was eight and to the latter two,

Central Dispensary.—During the last quarter of the year the dispensary premises were in the hands of the workmen which to some extent impeded its activities and made it necessary to forego for the time being any new developments, nevertheless the work continued to grow both inside and outside.

The tables on pages 133 and 134 give the work in complete detail. In addition to the information appearing on these tables it should be noted that a certain number of patients attend regularly or are visited for the purpose of receiving treatment for surgical conditions of a minor nature. The number of such cases during 1925 was 293 and the total attendances and visits 1,708. The cases treated included :—

Tuberculin tests	..	..	..	43	in 43 cases.
Wasserman tests	..	..	..	69	„ 69 „
Aspirations of tuberculous abscess	..	..	..	262	„ 88 „
Galyl injections	..	..	..	11	„ 4 „
Insulin injections	..	..	..	105	„ 1 „
Tuberculin injections	..	..	..	148	„ 32 „
Plaster applications and cellulose splints	..	..	..	20	„ 16 „
Dressings and fomentations	..	..	..	753	
Urine tests	..	..	..	991	

The number of pneumo-thorax injections was 171, of which 154 took place at the Dispensary and 17 in their own homes.

During 1925 X-ray examinations were made of 312 adults and 68 children.

Special reports issued numbered 4,616, namely, to the Ministry of Pensions 1,985 and to medical practitioners and school medical officers 2,631.

Contacts.—As set out in the table on page 133 the total number of contacts examined was 355, including 117 adults and 238 children under 15 years of age, which together with 210 old contacts re-examined made a total of 565. The total number of examinations of all contacts was 1,022. Of the new cases 149 (or 42.0 per cent.) were found to have definite signs of tuberculosis, 112 (or 31.5 per cent.) were suspicious, and 94 (or 26.5 per cent.) had no signs. Of the definite cases 85 (or 57.0 per cent.) were adults over 15 years of age and 64 (or 43.0 per cent.) were children under 15 years of age. Of the 210 old cases re-examined 83 (or 39.5 per cent.) were definitely diagnosed as suffering from tuberculosis.

RETURN SHOWING THE WORK OF THE TUBERCULOSIS DISPENSARY FOR THE YEAR ENDED 31ST DECEMBER, 1925.

New Cases examined during the year (excluding contacts).	PULMONARY.						NON-PULMONARY.						TOTAL.	
	Adults.			Children.			Adults.			Children.			Adults.	
	M.	F.		M.	F.		M.	F.		M.	F.		M.	F.
Definitely Tuberculous	607	397		161	145		12	8		15	20		619	405
Doubtfully Tuberculous	..	..		..	..		..	..		..	..		28	26
Non-Tuberculous	..	..		..	..		..	..		..	..		5	..
TOTALS	607	397		161	145		12	8		15	20		652	431
Contacts examined during the year:—														
Definitely Tuberculous	25	60		30	34		..	..		..	..		25	60
Doubtfully Tuberculous	..	..		..	..		..	..		..	..		6	14
Non-Tuberculous	..	..		..	..		..	..		..	..		..	12
TOTALS	25	60		30	34		..	..		..	..		31	86
Cases written off Dispensary Register:—														
Cured	..	..		..	..		..	..		..	..		..	..
Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error)	..	..		..	..		..	..		..	..		5	13
TOTALS	..	..		..	..		..	..		..	..		5	13
Number of Persons on Dispensary Register:—														
Diagnosis completed	..	..		..	..		..	..		..	..		..	5,666
Diagnosis not completed	..	..		..	..		..	..		..	..		..	474
TOTAL	..	..		..	..		..	..		..	..		..	6,140

PATIENTS EXAMINED AT CENTRAL TUBERCULOSIS DISPENSARY FROM JANUARY 4th., 1925 TO JANUARY 2nd, 1926,
PULMONARY TUBERCULOSIS.

	New patients.		Number bacteriologically positive.		Number clinically positive, but not T.B.		Number found to be indefinite or negative.		Number recommended for Sanatoria.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
Insured	..	..	523	180	75	39	426	129	22	12	270	148
Non-insured	..	..	317	413	10	22	257	352	50	39	111	75

OTHER FORMS OF TUBERCULOSIS.

	New patients.		Glands.		Bones and joints.		Abdominal.		Others and indefinite.		Number recommended for Sanatoria.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Insured	6	4	2	1	1	2	1	..	2	1	2	..
Non-Insured	21	24	8	11	4	8	5	3	4	2	8	10

Total cases:—Males	..	1,321	Total attendances of all cases:—Males	..	15,622
Females	..	982	Females	..	12,699
Children	..	608			
			Total	..	28,321
			Total Number of Clinical Examinations (included in the above)	..	7,196

Domiciliary Work.—The Dispensary Medical Officers made 681 visits to the patients' homes for the purpose of consultation, re-examination, special treatment or other cause.

The nurse visitors attached to the Dispensary staff made a total of 27,382 visits, of which 2,334 were to ex-service men, 1,887 for environmental reports, 21,277 re-visits to civilians, 1,390 to contacts and 494 visits to houses where deaths had occurred. All these figures are considerably in excess of those for the previous year and indicate a healthy activity in the whole organisation.

As in previous years the District Nursing Association continued to visit cases in their own homes which because of weakness or the type of disability were unable to attend the Dispensary. This provision has been a great boon to many who would otherwise have had to depend upon the uncertain and, though well meant, often incompetent, attention of neighbours or friends. The total number of cases visited by the nurses was 157, the total visits paid 4,293, and the total cost to the City of the scheme was £160 19s. 9d.

Dealing with the work of the year, Dr. Z. P. Fernandez, the Acting Chief Clinical Tuberculosis Officer, writes :—

"Dispensary Clinics.—The structural alterations sanctioned by the Committee were still in progress during the whole of the past year. In spite of this handicap the clinical sessions were doubled, and all the primary cases were seen, or visited by the Acting Chief Clinical Tuberculosis Officer during the week they were referred. In the majority of cases a definite diagnosis was reported to the doctor concerned for notification. Cases of a difficult nature were re-examined by the team of medical officers available, and a majority finding ascertained. In such cases the sputum examination, X-ray, and other tests are less helpful than repeated clinical findings.

The close co-operation that exists in Leeds with the general practitioner, and the various public institutions, has been maintained.

The insurance practitioners have been more punctual in returning the G.P. 36 forms of patients under domiciliary treatment. Where the receipt of the forms has been delayed a request has usually expedited delivery. Progress reports of all insured patients examined have been regularly submitted to the doctors concerned.

Delay in seeking medical advice still exists, and consequently a number of deaths are reported simultaneously with, or subsequent to, notification. From a preventative point of view notification supplies the opportunity of searching out contacts in infected homes. These contacts are kept under observation and regularly visited by the nurse visitors for a period of at least one year.

"Deaths from bone and joint tuberculosis for the past five years have been very low compared with other cities, only averaging 14 per year. It is hoped by the use of artificial sunlight not only to reduce the mortality still further but also to prevent crippling and deformity which so often accompanies this form of the disease.

"*Contacts*.—Whilst routine examination of contacts reveals a number of primary cases of tuberculosis the disease is not as a rule severe. This is to be expected, as many contacts naturally acquire powers of resistance from association with active force of infection.

"The work in Leeds shows that the negative contact of one year may become the doubtful or even positive case of a subsequent year.

"*Infantile Tuberculosis*.—From the examination of contacts and school children there is evidence that tuberculous infection of the lung is not uncommon amongst quite young children. As a rule it is the root gland which is enlarged, but the condition is seldom fatal.

"Only six of these cases died during the year.

"The adult type of the disease in children of school age accounted for about 2.9 per cent. of all the deaths from phthisis which occurred during 1925 as compared with 4.4 per cent. during 1924, whilst of infants under 5 years it accounted for 4.3 per cent. in 1925 as compared with 2.9 per cent. in 1924.

"The most common form of tuberculosis in children under 5 years of age is the fatal meningeal type. These cases are not generally notified until death. During the period under review out of 32 cases of tuberculous meningitis traced by the nurse visitors, 7 were under 1 year of age. In five of these nothing was known of their existence till the notice of death was received. This seems to suggest that meningeal tuberculosis is less common in infected homes than in non-infected. In an average, for five years, of 875 deaths under 1 year of age from all causes, 31 (3.5 per cent.) were accounted for by all forms of tuberculosis and meningitis.

"It is satisfactory to note that the incidence of gland, and bone and joint tuberculosis—which can be successfully treated—again declined during the year.

"New non-pulmonary cases numbered 35, with 1 death. Of these, 10 were bone and joint, 17 glands, 6 primary abdominal and 2 other organs.

"*Adult Tuberculosis*.—Of the 1,088 cases diagnosed at the dispensary as pulmonary, 627 were males and 461 females. In the males the mild type of disease, whether early or fibrosing, accounted for 405 (64 per cent.) and in the females 252 (55 per cent.). Thus the virulent type of disease requiring longer treatment was more common amongst the females, who are, however, generally reluctant to profit by sanatorium treatment owing to domestic circumstances. The male type of disease is of a fibrotic type causing disability rather than rapid destruction. Only 5 cases of adult bone and joint tuberculosis were diagnosed at the dispensary during the year viz., 2 males and 3 females. The deaths from pulmonary tuberculosis were mostly in the age groups 15-45 (61.0 per cent.) and over 45 (31.0 per cent.).

" Domiciliary Work.—During the year the nurse visitors completed the tracing of all cases notified since 1912 and onwards. The investigation has revealed the fact that the life of consumptives has been appreciably lengthened. The rapidly destructive type of disease formerly common and generally fatal is diminishing. A number of old notified cases, whose diagnosis was not confirmed at the dispensary, have been re-examined, and the register is in process of revision. Bedfast cases that do not benefit by sanatorium treatment and who are under domiciliary treatment by a local doctor are visited by the district nurses by special agreement with the Health Committee.

" Sanatoria.—The Sanatorium School at " The Hollies " has had a successful year the beds having been kept well occupied throughout. The institution was visited twice weekly by the dispensary medical staff. With the exception of a case of chicken-pox and a few mild sore throats there was entire absence of infectious disease. The children profited greatly by their stay both physically and mentally.

" Killingbeck and Gateforth sanatoria have been periodically visited by the Consulting Tuberculosis Officer, and also during the latter part of the year by the Acting Chief Clinical Tuberculosis Officer. Clinical notes of cases admitted to the sanatoria are regularly sent to the Medical Superintendents. As the result of the institution of a new system of regulating the admission of cases the number of occupied beds has reached a higher average than in previous years. Arrangements have been made whereby cases due for discharge at the termination of the prescribed period are seen by the Clinical Tuberculosis Officer in conjunction with the Medical Superintendent. In this way cases requiring further treatment may be granted an extension of stay in the institution, whilst in the case of Killingbeck an opportunity is afforded of finding out the cases suitable for Gateforth. Special treatment, in certain cases, was undertaken at Killingbeck as far as time permitted.

" Administration.—The office work has been re-organised to cope with the increased routine work. Closer co-operation with the parent department has had the effect of facilitating the control of expenditure as well as preventing unnecessary reduplication of work.

" Pension reports, which occupy a good deal of the time of the dispensary clerical staff, have been dealt with expeditiously.

" There has been close co-operation between the dispensary and the School Medical staff regarding the examination of tuberculous children attending school. A monthly list of all children admitted to, or discharged from " The Hollies " has been forwarded to the Education Department.

" The heavy waiting list was again an index of the need for further sanatorium accommodation, especially for adults. The high mortality from pulmonary tuberculosis in adults during 1925 cannot but focus one's attention on this very urgent need."

Care Work.—The Leeds Association for the Care of Consumptives has continued to be responsible for this side of the work and I should like to put on record my personal acknowledgment of the very efficient manner in which it has discharged the duties devolving upon it.

I should like, however, to see the Association devoting a little more time to that part of the legitimate activities of a Care Committee which has to do with the employment of tuberculous persons. Particularly might it take an interest in the welfare of children who have had treatment at the Dispensary or one or other of the Sanatoria. Many of these children, over 14 years of age, when they leave school drift into employment which is quite unsuitable for persons in their state of health and for which they are physically unfitted. The result is that the malady returns and they slowly relapse into a state of chronic invalidism. Such disasters might, I feel convinced, be reduced in number, if not entirely obviated, by a more judicious selection of the type of employment as well as by a more regular supervision of the conditions under which that employment is carried on.

Another point which I should like to make is the need for a more aggressive policy with regard to after-care propaganda. The education of the public in matters relating to the nature of the disease, its causation and prevention, is a thing which is much needed, and which if well organised would well repay any time or money spent on it.

Details of the work of the Care Committee are given below.

Convalescent Treatment.—The number of children sent for convalescence last year was rather less than for the previous year due chiefly to the fact that the Children's Sanatorium at "The Hollies" was opened during the year to which many of the very early cases, which in other years were sent to convalescent homes, were accommodated. There are cases, however, for which "The Hollies" is not entirely suitable but which require the benefit of sea-air. Accommodation was found for these at various sea-side homes. The arrangements as a rule being made through the Children's Convalescent and Summer Holiday Fund. Parents are asked to make a contribution as far as their means will allow towards the expenses of these cases, and considering the economic difficulties of many homes in the City the response was very gratifying. Grants for the same purpose are obtained where possible from such funds as the United Services Fund, the Emergency Help Committee and Poor Law. Where the children have not the necessary clothing for going away in that is supplied either by the Association itself or in the case of children on the school roll through the Education Committee.

The number of children sent to Convalescent Homes was 134, the average length of stay $4\frac{1}{2}$ weeks, and the amount of money spent by the Association on this item was £140 18s. 4d.

Clothing and Bedding.—Beds and bedding have been supplied to a number of cases of an infectious type in order to enable them to have separate sleeping accommodation. Instances of as many as five or six persons occupying a bed with an infected case have come to the notice of the Association and it is in such cases as these where the risk of spreading the infection to non-infected individuals has been pronounced that the association has been able to do very useful and beneficial work.

The number of cases assisted in this way was 25, and extra clothing to persons in poor circumstances was provided in 69 cases.

Money Grants.—Small grants of money to tide cases over temporary financial difficulties were given in 239 cases.

Food.—Patients in need of extra nourishment are helped from two sources, namely (a) a special grant provided by the Ministry of Health amounting to a total of about £900, and (b) direct through the Association. The extra nourishment distributed is in the form of fresh milk and eggs whilst in a few special cases food of a more substantial character is supplied. The distribution is overlooked by a special sub-committee known as the Case Sub-Committee which meets regularly every week to consider fresh applications and to review old cases. The practice is to restrict the distribution of extra nourishment to a certain type of case recommended by the Dispensary Medical Officers chiefly those recently discharged from sanatoria and not yet sufficiently recovered to return to their usual employment. Women and children, the dependents of wage earners who have been admitted to a sanatorium, and who themselves show suspicious signs of the disease also receive assistance. All cases are reviewed regularly by the Committee each month and in this way abuses are obviated.

The total amount expended on extra nourishment during the year was £1,072 or £172 in excess of the amount allocated for the purpose. The reason for the over-spending was the continuation of the economic distress consequent upon the prevalence of unemployment.

In addition to this sum the Association spent £29 4s. 9d. in supplying nourishment to cases not eligible for the ordinary nourishment grant.

Appliances and Sick-room Accessories.—Surgical appliances and sick-room accessories in the form of rubber rings, water beds, etc., were supplied in 41 cases.

Home Service.—A very important aspect of the Association's work is that concerned with the provision of home helps. It frequently occurs that a mother of a family has to go into a sanatorium or hospital for treatment leaving the children to be looked after by a neighbour or relative. Again and again it has been found that families left in this way are neglected and this has undoubtedly been responsible for the

lighting-up of the disease in child contacts. Whenever a case of this description has come to the notice of the Association an attempt is made to provide the nursing, domestic assistance in the shape of home helps. These women, who are usually capable housewives accustomed to supervise the running of a home, take the place of the mother during her absence and carry out the ordinary domestic duties, thus keeping the domestic machine running, preventing neglect of the children, and easing the mind of the mother herself who is naturally anxious about her home and the welfare of those dependent upon her.

The Association has also assisted in finding more suitable houses for families living in overcrowded or insanitary dwellings.

Various.—The Association has also administered a sum of £488 6s. 3d. on behalf of the British Red Cross, chiefly expended in providing clothing and grants of money for those in poor circumstances who have been stricken with the disease. In a similar manner it has administered a sum of £249 5s. 3d. for the United Services Fund chiefly in relief of ex-service men.

The following is a summary of the services rendered :—

Help given.	No. of persons assisted.
By money grants for various purposes	36
By food, both through Nourishment Grant and by the Case Sub-Committee	269
By beds and bedding	25
By sick-room requisites	27
By surgical appliances	14
By convalescent treatment	145
By clothing	69
By notes, reports, etc.	319
TOTAL	904
Number of visits and interviews made by Secretary	1,691
Number of applications considered by Committee ..	1,655
Number of times the Committee has met during the year	44
Number of Committees (External) attended by Secretary	122
Number of milk coupons issued (approximate) during the year	1,150
British Red Cross :—	
No. of Cases helped with grants of money and clothing	132
Amount received for expending in connection with above	£488 6s. 3d.
United Services Fund :—	
No. of Cases helped with grants of money and clothing	71
Amount received for expending in connection with above	£249 5s. 3d.

MATERNITY AND CHILD WELFARE.

Statistics.—The number of children under one year of age who died during 1925 was 748 (males 441 and females 307) which represents an infantile mortality rate of 91. Compared with the previous year this is a reduction of 173 (or 18·8 per cent.) in the actual deaths and 17 in the rate itself. Had it not been for the unusual prevalence of infantile diarrhoea in the third quarter which accounted for no fewer than 90 deaths of children under one year of age, the rate would have been considerably lower. As it is, it is one of the lowest on record having been surpassed on only one previous occasion, namely, in 1923 when it was 89. Compared with the average of the previous five years (101) the rate for 1925 represents a reduction of 9·9 per cent. and with the average for the decade, 20·9 per cent. The decline in the rate has with the exception of 1924 been practically steady since the end of the war, and, though it is still much too high, the progress is in the right direction. In respect of the infantile mortality rate, Leeds, generally speaking, compares badly with the other great towns in England. It has for many years been one of the highest; last year it was exceeded by Liverpool, Manchester, Bradford and Nottingham, whilst it was 21·3 per cent. in advance of the rate for the whole of England and Wales. One of the chief causes of this high rate is indisputably the unsatisfactory housing conditions in certain areas of the City.

When one examines the list of causes of death given on page 146 it at once becomes obvious that the respiratory group is responsible for the greatest number of fatalities. Out of a total of 748 deaths of children under one in 1925 no fewer than 171 (or 22·9 per cent.) were attributable to diseases of the lung and respiratory passages including bronchitis, pneumonia, whooping cough and influenza. These conditions are the direct consequence of unhygienic surroundings including overcrowding, bad ventilation and indifferent and even careless mothering. Environment means much more to a baby than to an adult. The latter has perfected his defences whilst the former is only in process of establishing them. The polluted atmosphere of the City is itself a menace to the safety of

baby life and I have no hesitation in saying that if we could rid the atmosphere of its impurities the rate of infant death would immediately fall. Another important cause of the high infantile mortality is prematurity which accounted for 146 deaths (or 19·5 per cent.) of the total. Here, however, we are dealing with a different problem and one that is much less easy of solution. Prematurity is invariably the result of some ante-natal abnormality affecting either the mother or the child. It is not always easy to determine what the abnormality is and when determined it is often impossible to rectify it. The only way is by a careful and vigilant supervision of the mother throughout the period of pregnancy. This supervision should be carried out by the medical man or midwife who accepts responsibility for the confinement. Unfortunately it is not the invariable practice of either to enquire into the facts of pregnancy at the time of booking. The mother's conduct and mode of living are also important factors which should not be left out of account in any enquiry into the causes of prematurity or ante-natal death.

A third cause which has already been touched upon in another part of this report is infantile diarrhoea. Last year this disease accounted for 17·8 per cent. of the total deaths under one year.

Other causes of infantile death will be found in the list on page 146.

Death-rate in quarters.—The infant mortality rate for the four quarters of the year is given in the accompanying table.

	I.	II.	III.	IV.	Year.
1917	121	122	152	151	135
1918	162	101	114	155	133
1919	173	102	123	96	119
1920	139	95	88	112	110
1921	108	78	101	108	98
1922	119	106	77	101	101
1923	114	74	86	82	89
1924	171	83	68	109	108
1925	84	62	100	126	91

It will be noted that the death-rate in the third quarter was higher than any other of the previous years since 1921. This was due entirely to the prevalence of infantile diarrhoea concerning which I have already made some remarks on page 93.

Deaths in Age Groups.—Of the total (748) infant deaths 184 (or 24.6 per cent.) took place in the first week of life, 309 (41.3 per cent.) in the first month, 141 (or 18.9 per cent.) between one and three months, 119 (or 15.9 per cent.) between three and six months, 88 (or 11.8 per cent.) between six and nine months, and 91 (or 12.2 per cent.) between nine and twelve months.

The percentage changes in the infant death-rate per 1,000 births in 1925 as compared with the average of the previous ten years are as follows:—

Under 1 week, decrease	10.4%	3-6 months, decrease ..	29.6%
Under 1 month ..	12.9%	6-9	34.5%
1-3 months ..	12.7%	9-12	24.5%
Whole year decrease, 20.9%			

It is interesting to note the changes which have taken place at the various age periods of infancy since the quinquennium 1905-1909. These are set out in the special table on page 147. It will be observed that the quinquennial average has been taken in order to make a better comparison.

Neo-natal Death-rate.—The number of deaths of infants occurring in the first month of life was 309 or 22 less than for the year 1924 and the corresponding rate was 37.8 as against 38.7.

Causes of Infant Death.—The main causes contributing to the infantile death-rate in order of numerical importance were premature birth (146), diarrhoea and enteritis (133), pneumonia (96), atrophy, debility and marasmus (73) and bronchitis (38).

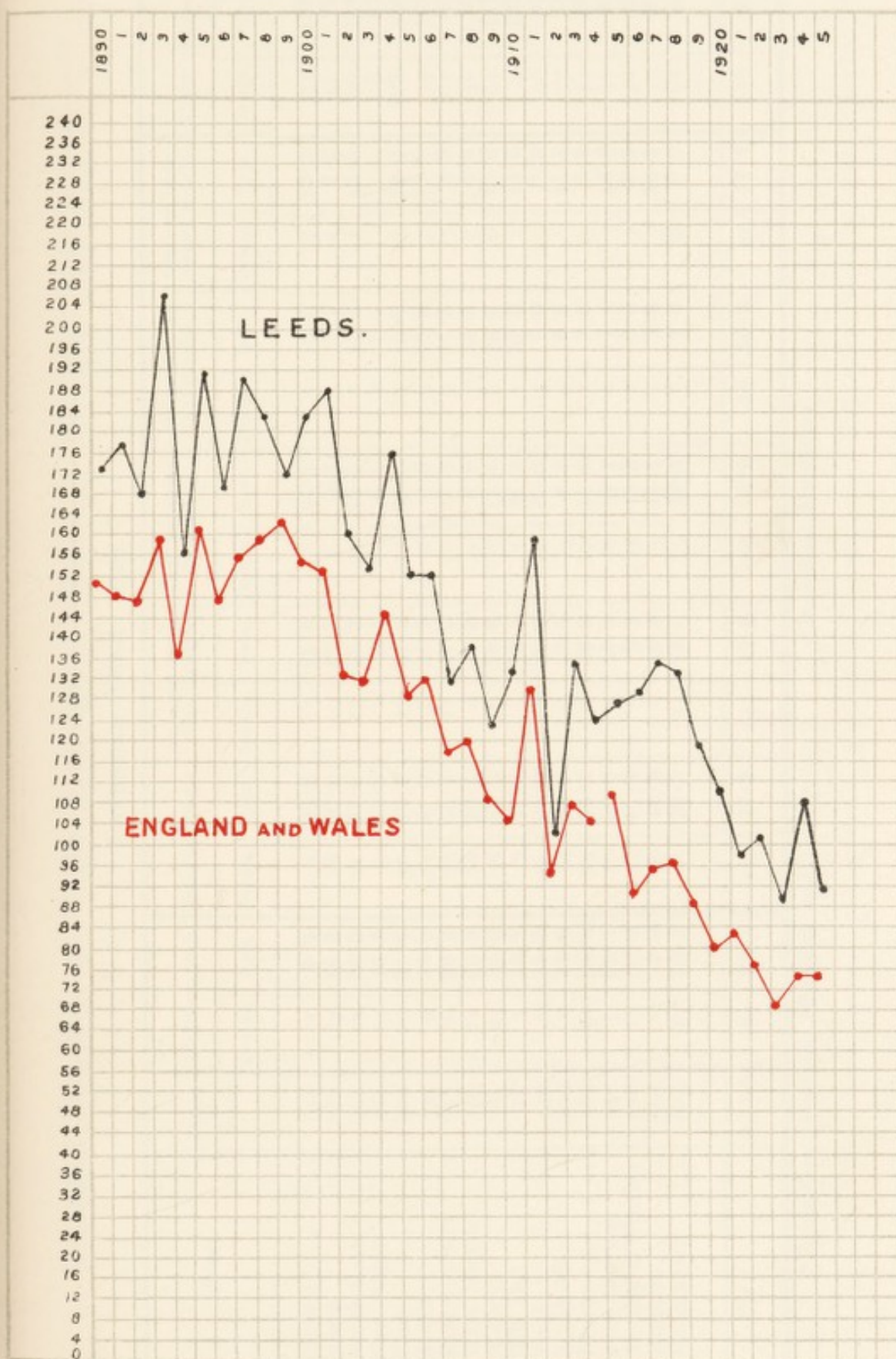
These are set out in detail in a table on page 146.

If the list be carefully examined it will be noted that the diseases fall somewhat naturally into four groups, namely, (1) the respiratory group including all those conditions which effect the lungs and respiratory passages, (2) the congenital group including those conditions involving the child previous to birth, (3) the infectious diseases group including those conditions which are due to a definite infection, and (4) general conditions largely unknown in origin such as convulsions, gastritis, rickets, and injury at birth.

INFANTILE MORTALITY DURING THE ELEVEN YEARS 1915-1925 AT DIFFERENT PERIODS OF
THE FIRST YEAR OF LIFE.

YEAR.	Births in year.	Under one week.		Under one month.		One and under three months.		Three and under six months.		Six and under nine months.		Nine and under twelve months.		Under one year.	
		Deaths.	Rate.	Deaths.	Rate.	Deaths.	Rate.	Deaths.	Rate.	Deaths.	Rate.	Deaths.	Rate.	Deaths.	Rate.
1915	..	258	26.1	413	41.8	194	19.6	242	24.5	205	20.8	199	20.1	1,253	127
1916	..	247	26.2	437	46.3	220	23.3	234	24.8	156	16.5	169	17.9	1,216	129
1917	..	179	23.6	318	42.0	185	24.4	213	28.1	159	21.0	148	19.5	1,023	135
1918	..	189	25.6	316	42.7	154	20.8	199	26.9	175	23.7	140	18.9	984	133
1919	..	230	30.4	373	49.3	147	19.4	156	20.6	125	16.5	98	13.0	899	119
1920	..	304	27.1	520	46.3	260	23.2	191	17.0	146	13.0	115	10.2	1,232	110
1921	..	249	24.5	419	41.3	184	18.1	180	17.7	116	11.4	98	9.7	997	98
1922	..	206	22.2	401	43.3	159	17.2	125	13.5	127	13.7	123	13.3	935	101
1923	..	204	23.5	363	41.8	110	12.7	125	14.4	92	10.6	83	9.6	773	89
1924	..	185	21.6	331	38.7	156	18.2	155	18.1	150	17.5	129	15.1	921	108
1925	..	184	22.5	309	37.8	141	17.2	119	14.5	88	10.8	91	11.1	748	91

INFANT MORTALITY PER 1000 BIRTHS, 1890 - 1925.



INFANT MORTALITY PER 1000 BIRTHS 1900-1922



INFANTILE MORTALITY IN WARDS AT DIFFERENT PERIODS OF THE FIRST YEAR OF LIFE,
CALENDAR YEAR, 1925.

WARD.	Births in year.	Under one week.		Under one month.		One and under three months.		Three and under six months.		Six and under nine months.		Nine and under twelve months.		Under one year.	
		Deaths.	Rate.	Deaths.	Rate.	Deaths.	Rate.	Deaths.	Rate.	Deaths.	Rate.	Deaths.	Rate.	Deaths.	Rate.
Central ..	194	1	5.2	4	20.6	5	25.8	8	41.2	3	15.5	7	36.1	27	139
North ..	646	17	26.3	26	40.2	10	15.5	6	9.3	5	7.7	4	6.2	51	79
North-East ..	654	15	22.9	31	47.4	12	18.3	13	19.9	8	12.2	12	18.3	76	116
* New Ward ..	164	3	18.3	3	18.3	1	6.1	1	6.1	1	6.1	..	..	6	37
East ..	802	25	31.2	36	44.9	25	31.2	17	21.2	15	18.7	15	18.7	108	135
South ..	334	9	26.9	14	41.9	8	24.0	2	6.0	5	15.0	5	15.0	34	102
† East Hunslet ..	793	16	20.2	28	35.3	14	17.7	10	12.6	9	11.3	3	3.8	64	81
West Hunslet ..	549	11	20.0	16	29.1	4	7.3	2	3.6	7	12.8	2	3.6	31	56
Holbeck ..	564	22	39.0	36	63.8	6	10.6	7	12.4	8	14.2	6	10.6	63	112
Mill Hill ..	72	1	13.9	3	41.7	1	13.9	2	27.8	2	27.8	1	13.9	9	125
West ..	430	6	14.0	11	25.6	11	25.6	12	27.9	3	7.0	3	7.0	40	93
North-West ..	490	6	12.2	14	28.6	9	18.4	4	8.2	4	8.2	6	12.2	37	76
Brunswick ..	385	10	26.0	14	36.4	8	20.8	6	15.6	3	7.8	3	7.8	34	88
New Wortley ..	350	9	25.7	10	28.6	5	14.3	6	17.1	6	17.1	5	14.3	32	91
Armley & Wortley ..	576	15	26.0	24	41.7	3	5.2	3	5.2	2	3.5	4	6.9	36	63
Bramley ..	362	7	19.3	16	44.2	6	16.6	5	13.8	1	2.8	7	19.3	35	97
Headingley ..	815	11	13.5	23	28.2	13	16.0	15	18.4	6	7.3	8	9.8	65	80
CITY ..	8,180	184	22.5	309	37.8	141	17.2	119	14.5	88	10.8	91	11.1	748	91

* Roundhay, Seacroft, Shadwell and Crossgates.

† Including Middleton.

DEATHS FROM STATED CAUSES UNDER ONE YEAR OF AGE.

Causes of death.	Year 1924.	Year 1925.	Increase or decrease.	Percentage of total deaths under one.
Smallpox	..	..	..	..
Chickenpox	..	1	+ 1	0.1
Measles	8	11	+ 3	1.5
Scarlet Fever	..	..	..	..
Whooping Cough	35	21	- 14	2.8
Diphtheria	2	1	- 1	0.1
Influenza	31	16	- 15	2.1
Erysipelas	1	1	- +	0.1
Tuberculous Diseases	22	15	- 7	2.0
Meningitis	11	7	- 4	0.9
Convulsions	55	30	- 25	4.0
Bronchitis	82	38	- 44	5.1
Pneumonia (all forms)	183	96	- 87	12.8
Other diseases of Respiratory Organs	7	3	- 4	0.4
Diarrhoea and Enteritis	89	133	+ 44	17.8
Gastritis	3	6	+ 3	0.8
Syphilis	27	29	+ 2	3.9
Rickets	2	1	- 1	0.1
Suffocation, including overlying	14	15	+ 1	2.0
Injury at birth	25	19	- 6	2.5
Atelectasis	19	17	- 2	2.3
Congenital Malformations	38	32	- 6	4.3
Premature birth	144	146	+ 2	19.5
Atrophy, Debility, and Marasmus	84	73	- 11	9.8
Other Causes	39	37	- 2	4.9
Totals	921	748	- 173	100

Of these four groups, the first and third may be looked upon as being controllable, whilst the second is largely beyond control, or at any rate, such control as may be possible is not so likely to be effective or successful. I have already referred in certain detail to the causes of infantile death in a previous paragraph.

Illegitimate Death-rate.—Of the 422 illegitimate births 92 (or 21.8 per cent.) died before reaching the age of one year which is equal to an infantile death-rate of 218. This is an increase of 15 per thousand as compared with the rate for 1924 which was 203.

PERCENTAGE CHANGES (5 YEAR PERIODS, ALSO YEAR 1925) IN THE INFANT DEATH-RATE PER 1,000 BIRTHS
AS COMPARED WITH THE AVERAGE OF THE FIVE YEARS 1905-1909.

Five year period.	Under one week.		Under one month.		One and under three months.		Three and under six months.		Six and under nine months.		Nine and under 12 months.		Under one year.	
	Rate.	Percentage increase or decrease over 5 years period 1905-1909.	Rate.	Percentage increase or decrease over 5 years period 1905-1909.	Rate.	Percentage increase or decrease over 5 years period 1905-1909.	Rate.	Percentage increase or decrease over 5 years period 1905-1909.	Rate.	Percentage increase or decrease over 5 years period 1905-1909.	Rate.	Percentage increase or decrease over 5 years period 1905-1909.	Rate.	Percentage increase or decrease over 5 years period 1905-1909.
1905 to 1909	26.2	—	44.3	—	25.5	—	28.0	—	23.0	—	18.6	—	139	—
1910 to 1914	26.6	+1.5%	44.1	-0.5%	24.7	-3.1%	23.9	-14.6%	20.1	-12.6%	18.0	-3.2%	131	-5.8%
1915 to 1919	26.4	+0.8%	44.4	+0.2%	21.5	-15.7%	25.0	-10.7%	19.7	-14.3%	17.9	-3.8%	129	-7.2%
1920 to 1924	23.8	-9.2%	42.3	-4.5%	17.9	-29.8%	16.1	-42.5%	13.2	-42.6%	11.6	-37.6%	101	-27.3%
Year 1925	22.5	-14.1%	37.8	-14.7%	17.2	-32.5%	14.5	-48.2%	10.8	-53.0%	11.1	-40.3%	91	-34.5%

BIRTHS AND DEATHS UNDER ONE YEAR WITH RATES.—CALENDAR YEAR 1925.

WARD.	Total Births (nett).	Birthrate per 1,000 population.	No. of legitimate births.	No. of illegitimate births.	Total deaths under one year (nett).	Death rate per 1,000 births.	No. of legitimate deaths under one year.	No. of illegitimate deaths under one year.	Legitimate death rate per 1,000 legitimate births.	Illegitimate death rate per 1,000 illegitimate births.
Central ..	194	15.32	183	11	27	139	25	2	137	182
North ..	646	14.81	615	31	51	79	43	8	70	258
North-East ..	654	17.80	615	39	76	116	68	8	111	205
*New Ward ..	164	17.00	159	5	6	37	5	1	31	200
East ..	802	22.16	764	38	108	135	98	10	128	263
South ..	334	25.73	319	15	34	102	32	2	100	133
†East Hunslet ..	793	20.85	760	33	64	81	59	5	78	152
West Hunslet ..	549	15.03	533	16	31	56	29	2	54	125
Holbeck ..	564	18.95	540	24	63	112	58	5	107	208
Mill Hill ..	72	13.62	66	6	9	125	9	..	136	..
West ..	430	19.43	385	45	40	93	31	9	81	200
North-West ..	490	15.42	461	29	37	76	28	9	61	310
Brunswick ..	385	16.00	346	39	34	88	27	7	78	179
New Wortley ..	350	19.39	327	23	32	91	31	1	95	43
Armley & Wortley ..	576	15.32	546	30	36	63	30	6	55	200
Bramley ..	362	14.63	350	12	35	97	29	6	83	500
Headingley ..	815	15.36	789	26	65	80	54	11	68	423
CITY ..	8,180	17.30	7,758	422	748	91	656	92	85	218

*Roundhay, Seacroft, Shadwell and Crossgates. †Including Middleton.

SUPERVISION OF MIDWIVES.

Number of Midwives.—The number of midwives on the register at December 31st, 1924 was 98. Thirty-three new names were added during the year, 23 names were removed, leaving a total on the register at December 31st, 1925 of 108. Of the total, 39 were attached to institutions. The actual number who took cases during the year was 92, of whom 79 (or 86 per cent.) were trained and 13 (or 17 per cent.) untrained. The number of births attended by midwives was 3,801 (or 44·6 per cent.) of the total births registered.

The following table gives an analysis of the cases attended by midwives :—

TRAINED.			UNTRAINED.	
79 midwives. Total cases attended .. 3,128 Average per midwife 40 cases.			13 midwives. Total cases attended .. 673 Average per midwife 52 cases.	
No. of Cases.	Practising on their own account.	Attached to institutions.	No. of Cases.	Practising on their own account.
Over 300	—	1	Over 300	—
„ 200	—	1	„ 200	—
„ 150	2	—	„ 150	—
„ 100	3	2	„ 100	2
„ 75	4	1	„ 75	3
„ 50	7	3	„ 50	2
„ 25	3	2	„ 25	1
„ 10	11	3	„ 10	1
„ 5	7	5	„ 5	—
Under 5	12	12	Under 5	4

Seventeen trained midwives (9 attached to institutions) and three not trained, took no cases during the year.

Inspection of Midwives.—The inspection of midwives' bags, books and appliances was carried out regularly during the year, the total number of such inspections made being 180. In addition to these inspections, the inspector of midwives made 56 enquiries into maternal deaths and paid 126 other visits. Midwives were interviewed on 57 occasions in connection with breaches of the rules of the Central Midwives Board and other minor misdemeanours. Eight midwives were reported to the Medical Officer of Health for offences against the Rules of the Central Midwives Board of whom two were considered by the Maternity and Child Welfare Committee.

Advising Medical Help.—Notifications of having advised medical assistance were received in 1,030 cases which may be classified as follows :—

Illness during pregnancy, or abortion	33
Malpresentation	53
Delayed or obstructed labour	173
Ruptured perineum.. .. .	196
Retained membrane or placenta	35
Hæmorrhage	36
Convulsions, eclampsia	2
Puerperal rise of temperature	53
Illness of mother during puerperium	48
Illness of child	196
Infants—discharging eyes	63
Artificial feeding	22
Death of infant under ten days	31
Still-births	76
Suspected infectious disease	12
Maternal deaths	1

Midwives' Emergencies.—During the year 358 claims were made by medical practitioners in the City for attendance on emergencies of labour under Section 14 of the Midwives Act, 1918. Of these 35 were paid direct by the parent whilst the remainder, 323, were met in whole or in part by the Local Authority at a total cost of £360 11s. 5d.

Puerperal Fever Cases.—All cases of high temperature were investigated and where the case was diagnosed as one of puerperal fever, however slight, disinfection of the midwife's person, clothing and maternity bag was carried out under the personal supervision of the chief woman inspector. The total number of visits paid for this purpose was 122 and the total number of midwives disinfected 41. In addition 53 visits were paid to cases of an infectious nature other than puerperal fever.

The number of cases of puerperal infection referred to the district nurses for treatment was 16. The object of this provision is to free the midwife from her obligation to continue her attendance on the case for the specified period of 10 days after the birth of the child, thus securing her against loss of practice.

Handywomen.—In addition to visits paid to midwives 83 visits were paid to handywomen and seven handywomen were disinfected. Four handywomen were reported to the Medical Officer of Health for minor misdemeanours.

Revision Course.—During the year arrangements were made for the holding of a special "refresher" course for midwives at the Leeds Maternity Hospital. The object of the course was to give the midwives an opportunity of revising their knowledge and receiving instruction in the newer methods of obstetrical practice. The syllabus included lectures, demonstrations and actual practice in the wards. The course was supervised by the Honorary Medical Staff of the hospital. The entire expense was met by a special grant from the Ministry of Health. Ten midwives selected by the local association of midwives attended the course which lasted a fortnight. Apart from certain difficulties at the beginning which are inseparable from an experiment of this kind, the course was a great success and much appreciated by the midwives who attended. It is hoped to repeat the course during the current year if the necessary arrangements can be made. Such courses as these are of the utmost service to practising midwives as they afford them an opportunity of refreshing their knowledge and becoming acquainted with the more modern developments in midwifery practice.

Still-Births.—The number of still-births do not vary to any extent from year to year. For the last decade since 1915 they have averaged 4.4 per cent. of the total births. The number notified during 1925 was 334 (or 4.0 per cent.) of the total births notified, which is a decrease of 14 on the figure for last year which was 348 (or 4.1 per cent.).

The following table shows the comparison between live births and still-births for the last eleven years :—

BIRTHS NOTIFIED (LIVE AND STILL).

Year.	Live births notified.	Still-births notified.	Total births notified live and still.	Percentage of still-births to total births.
1915	8,153	350	8,503	4.1
1916	7,836	394	8,230	4.8
1917	7,017	328	7,345	4.5
1918	6,892	287	7,179	4.0
1919	7,684	340	8,024	4.2
1920	10,749	461	11,210	4.1
1921	9,462	466	9,928	4.7
1922	8,658	418	9,076	4.6
1923	8,264	379	8,643	4.4
1924	8,105	348	8,453	4.1
1925	8,034	334	8,368	4.0

Notification of Births Act came into force 1st January, 1914

Of the 334 still-births notified, 71 (or 21.3 per cent.) were by midwives, and the remainder, 263 (or 78.7 per cent.) by medical practitioners, or institutions.

Ante-Natal Work.—The total number of expectant mothers attending the 15 ante-natal centres during the year was 1,487, which represents an increase of 211 over the figure for the previous year. Of these, 1,171 were new and attended for the first time. The total attendances was 7,306 as compared with 6,443 for the previous year, an increase of 863.

Particulars of the work of the ante-natal clinics are set out in the following table:—

EXPECTANT MOTHERS ON REGISTER.

Ward.	No. on register at beginning of year.	Registered during year.	Live Births.		On register end of year.	Total attendance of expectant mothers.
			Full Term.	Premature.		
Ellerby	32	118	97	2	38	735
West Street ..	25	74	69	..	25	333
Burmantofts ..	33	65	60	3	23	759
Hunslet	23	82	71	4	22	466
University ..	15	64	51	2	21	412
Woodhouse ..	23	88	70	..	32	359
Holbeck	39	153	130	1	41	711
Armley	25	141	110	1	46	1,205
Chapelton ..	22	71	65	..	16	312
St. Nicholas ..	23	80	74	1	16	318
Bramley	9	61	33	..	19	706
New Wortley ..	21	65	60	..	20	598
Middleton ..	6	18	13	..	9	111
West Hunslet ..	20	76	74	1	11	238
Burley	..	15	10	..	5	40
Totals	316	1,171	987	15	344	7,303

Of the 1,487 mothers on the register 19 miscarried and 33 had still births.

In addition to the above 3 expectant mothers attended at Centres where no ante-natal clinic is held, namely:—Meanwood 1, Crossgates 2, making a total of 7,306 attendances.

Though it is encouraging to note that the number of expectant mothers taking advantage of these clinics during the year was higher than in any previous year, nevertheless, the total is still far below what it ought to be. It is only by skilled ante-natal supervision that abnormalities either in the mother or child can be detected and only when such abnormalities are detected can they be rectified. Many lives, both of mothers and babies, are lost unnecessarily through failure to remedy some defect before pregnancy has advanced to a stage when interference is useless or impossible. One of the ways by which the maternal mortality, still so high throughout

the whole country, can be best reduced is by expectant mothers submitting themselves to regular supervision during the whole period of pregnancy.

Natal Work.—Of the total births registered in the City 1,888 (or 22·2 per cent.) took place in institutions or nursing homes as compared with 1,818 (or 20·5 per cent.) in 1924.

For various reasons, chiefly those concerned with housing and the difficulty of obtaining domestic assistance, women are showing a greater inclination to make use of nursing homes and lying-in institutions for their confinements. This applies not only to the woman in poor circumstances whose house consists of "one up and one down," but also to the wife of the professional or business man living under more comfortable conditions with the means at her disposal to supply whatever professional or domestic help that might be required. The truth is that there is a growing dislike amongst women to be confined in their own homes. For one thing it upsets the domestic routine though perhaps the most cogent reason is the detachment from ordinary household worries and cares which absence from home makes possible.

This attraction for the away-from-home confinement makes the necessity for close supervision of nursing homes and lying-in institutions all the more imperative. As far as Leeds is concerned, it is compulsory for all premises which are maintained as maternity homes to be registered, except those run by qualified medical men. By frequent inspections irregularities are detected and a high standard maintained.

As indicated in a previous report the Corporation have reserved beds in the three Poor Law Infirmaries, namely, St. James' Hospital, Bramley Infirmary and Hunslet Infirmary for the reception of women recommended through the Infant Welfare Centres. Since the amalgamation of the Unions the last mentioned has been dropped and cases are now admitted only to St. James' Hospital and Bramley Infirmary. That these facilities have been greatly appreciated may be gathered from the table appended hereto in which details of the cases admitted during 1925 are given.

REPORT FOR YEARS 1924 (9 MONTHS) AND 1925.

	St. James' Hospital.		Bramley Union Infirmary.		Hunslet Union Infirmary.	
	1924 (9 months).	1925	1924 (9 months).	1925	1924 (9 months).	1925 †
Number of Beds reserved	3	3	3	3	2	2
Total Number of Cases for which accommodation is available	58	78	58	78	39	34
Number of Cases treated						
(a) Normal	6	21	13	47	5	7
(b) Abnormal	1	1	5	13	..	1
(c) Not delivered	..	2	..	2	..	2
TOTAL	7	24	18	62	5	10
Number of Births.						
(a) Full term	6	22	19*	56	5	8
(b) Premature	..	..	..	..	..	..
(c) Stillborn	1	..	..	4	..	..
TOTAL	7	22	19	60	5	8
Average length of stay (in days)	17.3	16.3	16.7	13.8	14.6	12.0
Total Cost per case (in £'s)	£5 3s. 8½d.	£4 15s. 6d.	£6 6s. 10d.	£5 6s. 8½d.	£4 8s. 7½d.	£3 14s. 7½d.
Cost per case per week	£2 1s. 11½d.	£2 1s. 0d.	£2 13s. 2d.	£2 14s. 2½d.	£2 2s. 5½d.	£1 16s. 3½d.
Gross Cost to Corporation	£36 6s. 0d.	£114 12s. 0d.	£114 3s. 0d.	£330 15s. 0d.	£22 3s. 0d.	£37 6s. 0d.
Total nett cost to Corporation, 1924 (9 months)		..	..	..	£128 17s. 0d.	
Do. 1925..		..	..	..	£321 13s. 0d.	

*Includes 2 twins.

†Closed August 31st, 1925.

Maternity Homes.—There are 21 registered maternity homes in the City excluding all institutions and lying-in homes carried on by medical men. These homes were visited regularly and inspected. The number of visits paid for this purpose was 39.

An analysis of the births registered as occurring in the various lying-in institutions in the City is given in the following table:—

Institution.	No. of births.	Percentage of total registered.
Leeds Maternity Hospital	1,357	15·93
St. Faith's Home	92	1·08
Leeds Township Infirmary	134	1·57
Holbeck Township Infirmary	3	0·04
Bramley Township Infirmary	61	0·72
Hospital, H.M. Prison	—	—
Hope Hospital	11	0·13
Leeds General Infirmary	—	—
Women and Children's Hospital.. ..	3	0·04
City Hospital, Seacroft	—	—
Private Nursing Homes	227	2·66
Total	1,888	22·16

Illegitimate Births in Institutions.—Of the 1,888 births which took place in institutions 362 (19·2 per cent.) were illegitimate. This is an increase of 14 on the figure for last year, though the percentage remains practically the same.

For the number of cases removed to the various lying-in institutions by the special ambulance provided and maintained for the purpose, see page 105.

Maternal Mortality.—During the year 45 mothers lost their lives in childbirth. Last year the number was 33 so that there was an increase of 12. The rate of mortality was 5·50 per thousand births or put in another way for every 2,000 babies born 11 mothers died. Of the 45, 12 (or 26·7 per cent.) were in the practices of midwives, 27 (or 60·0 per cent.) in the practices of doctors, five (or 11·1 per cent.) in institutions and in one case (or 2·2 per cent.) an inquest was held.

One of the principal causes of death was sepsis which accounted for 24 (or 53·3 per cent.) of the total, the remainder being due to other diseases and accidents of pregnancy. Sepsis is a preventable

condition. That it is not prevented is a matter much to be deplored as it reflects on the skill and care of the doctor, midwife or nurse. I do not wish to infer that the fault always lies with the attendant, very frequently it is due to carelessness on the part of the mother herself or to the lack of proper and adequate preparation for the confinement.

This subject is further dealt with under puerperal fever, page 88.

The following table gives particulars of the maternal death rate in Leeds for the last 14 years (since 1911) :—

MATERNAL MORTALITY.

Year.	No. of deaths.	Death-rate per 1,000 births from		
		Sepsis.	Other causes.	Total childbirth.
1911 ..	42	1·51	2·46	3·97
1912 ..	41	1·15	2·78	3·93
1913 ..	61	2·74	3·02	5·76
1914 ..	62	3·16	2·61	5·77
1915 ..	41	1·62	2·53	4·15
1916 ..	39	1·48	2·65	4·13
1917 ..	22	1·06	1·85	2·91
1918 ..	21	0·95	1·89	2·84
1919 ..	36	1·72	3·04	4·76
1920 ..	58	3·03	2·14	5·17
1921 ..	38	1·28	2·46	3·74
1922 ..	33	1·84	1·73	3·57
1923 ..	49	2·07	3·57	5·64
1924 ..	34	1·28	2·69	3·97

From Registrar-General's Annual Reports.

Specialist Service.—The scheme adopted by the Corporation in 1924 whereby the services of the members of the consulting staff at the Maternity Hospital are placed at the disposal of general practitioners in cases of doubt or difficulty has not been taken

advantage of quite to the extent expected. Perhaps this is because it has not yet become sufficiently well known. There must be many occasions when the doctor is puzzled and when a second opinion would be helpful. To hesitate in such cases is risky because frequently what appears to be merely a little unusual turns out to be very abnormal with the result that a life is lost which, with more prompt action, might have been saved. The number of cases treated under the scheme was 12 at a total cost to the Corporation of £42 17s. 6d.

Post-Natal Work.—The number of births notified during the year (exclusive of still-births) was 8,034 (or 94·3 per cent.) of the total births registered.

Home Visiting.—First visits were paid by the health visitors to 8,659 infants. The number of re-visits was 51,749 which together with first visits makes a total of 60,408 visits for the year.

These figures represent a considerable increase over the figures for 1924 which were first visits, 9,020, re-visits, 42,045, total visits, 51,065.

The staff of health visitors was the same as in the previous year, namely, 21, which works out at one health visitor for every 390 births. When one takes into consideration the wide range of the health visitor's work covering as it does the whole period of a child's life up to five years, or until it goes to school, and includes in addition the visitation of still-births, expectant mothers and special cases referred from the Leeds General Infirmary and Public Dispensary the ratio is too great. More health visitors are required if the work is to be done efficiently.

A complete summary of the work of the health visiting staff is appended:—

	VISITS.
Notified births including re-visits ..	60,408
Still-births including re-visits ..	865
Ophthalmia neonatorum	37
Measles	9,712
Whooping Cough	2,621
Pneumonia	2,249
Medical aid claims	349
Other cases	690
Expectant mothers	693
Ill children notified from the Leeds General Infirmary and Public Dispensary	2,934

Infant Welfare Centres.—The number of infant welfare centres remains the same as in the previous year, namely, 18.

The number of new babies admitted to the centres was 4,194, as compared with 4,110 for the previous year, an increase of 84.

Of the total number of infants registered at the Welcomes during the year 1,378 (or 32·9 per cent.) were under one month, and 3,246 (or 77·4 per cent.) under three months.

Of the total children born during the year 51·3 per cent. attended one or other of the centres, as against 48·0 per cent. for the previous year. This constitutes a record for the City. That such a large proportion of the babies born should attend the Welcomes is very gratifying, but, good as the figure is, there is still room for improvement. The mortality rate of infants attending the Welcomes forms a striking contrast to that of the City as a whole (44 as against 91) which in itself is good testimony to the valuable work which they do. But the "Welcome" must not be judged only by the number of lives saved, the more searching test is the number undamaged and in this respect it undoubtedly does a great work though it is impossible to express it in actual figures.

A list of the centres and the wards in which they are situated together with the times when clinics are held, is given on page 160.

Infant Consultations.—The number of infant consultations at six of the centres is three per week, at eight, two and at four, one. In addition special morning clinics are held at 14 centres for the treatment of minor ailments, so that some of the centres are open practically the whole of the day. A clinic nurse is in charge of each centre and is responsible for all the arrangements in connection with the work of that centre. Any spare time which she may have is devoted to special cases which for one reason or another are unable to attend at the ordinary consultation hours.

Details of the work at the various centres will be found in the tables on pages 161, 162 and 163.

The following is a list of the Clinics —

WARD.	ADDRESSES.	DAYS.	TIMES.
E.	Wesleyan School, Richmond Hill	Tues.	9.30 a.m.
	Do. do. (New Babies) ..	Thurs.	9.30 a.m.
	Do. do.	Thurs.	2 p.m.
	Do. do. (Expectant Mothers) ..	Mon.	2 p.m.
E.	University Club, Berking Avenue, York Road ..	Mon.	2 p.m.
	Do. do. (New Babies) ..	Thurs.	9.30 a.m.
	Do. do. (Expectant Mothers) ..	Tues.	2 p.m.
N.	39, Burmantofts Street (New Babies) ..	Tues.	2 p.m.
	Do. do.	Wed.	9.30 a.m.
	Do. do.	Fri.	2 p.m.
	Do. do. (Expectant Mothers) ..	Thurs.	9.30 a.m.
N.W.	Church of the Holy Name, Servia Road, Woodhouse Street	Tues.	2 p.m.
	Do. do. (New Babies) ..	Thurs.	9 a.m.
	Do. do. (Expectant Mothers) ..	Thurs.	9 a.m.
M.H.	Little Queen Street, West Street	Mon.	2 p.m.
	Do. do.	Tues.	9 a.m.
	Do. do.	Wed.	2 p.m.
	Do. do. (Expectant Mothers) ..	Thurs.	2 p.m.
A. & W.	Oddy House, Theaker Lane, Armley	Tues.	2 p.m.
	Do. do.	Thurs.	2 p.m.
	Do. do.	Fri.	2 p.m.
	Do. do. (Expectant Mothers) ..	Wed.	9.30 a.m.
New Wor.	Holdforth Street, New Wortley	Mon.	2 p.m.
	Do. do.	Thurs.	2 p.m.
	Do. do. (Expectant Mothers) ..	Tues.	9.30 a.m.
Hol.	6, Granville Terrace, Holbeck	Tues.	2 p.m.
	Do. do.	Thurs.	2 p.m.
	Do. do.	Fri.	2 p.m.
	Do. do. (Expectant Mothers) ..	Wed.	9.30 a.m.
E.H.	St. Oswald's Institute, Balm Road Terminus, Hunslet Carr .. (New Babies) ..	Mon.	9.30 a.m.
	Do. do.	Mon.	2 p.m.
	Do. do.	Fri.	2 p.m.
	Do. do. (Expectant Mothers) ..	Thurs.	9.30 a.m.
Bnk.	Back Barrack Street, off Chapeltown Road ..	Tues.	9.30 a.m.
	Do. do.	Wed.	2 p.m.
	Do. do. (Expectant Mothers) ..	Mon.	9.30 a.m.
S.	St. Nicholas, 205, Hunslet Road	Tues.	2 p.m.
	Do. do.	Wed.	2 p.m.
	Do. do. (Expectant Mothers) ..	Tues.	9.30 a.m.
Bmy.	Town End House, Bramley (New Babies) ..	Mon.	9.30 a.m.
	Do. do.	Wed.	2 p.m.
	Do. do. (Expectant Mothers) ..	Fri.	9.30 a.m.
E.H.	Institute, Town Street, Middleton	Thurs.	1.30 p.m.
Hdy.	Wesleyan School, Meanwood	Wed.	1.30 p.m.
W.H.	West Hunslet, Wesleyan School, Ladypit Street (New Babies) ..	Mon.	9.30 a.m.
	Do. do.	Wed.	1.30 p.m.
	Do. do. (Expectant Mothers) ..	Fri.	9.30 a.m.
N.	St. Aidan's School, Roundhay Road	Fri.	2 p.m.
New.*	Cross Gates Wesleyan School, Crossgates ..	Tues.	2 p.m.
Hdy.	All Hallows School, Hyde Park Road	Tues.	2 p.m.
	Do. do.	Thurs.	2 p.m.

* Roundhay, Seacroft, Shadwell and Crossgates.

ATTENDANCES MADE AT INFANT WELFARE CENTRES DURING
YEAR 1925

WELCOME.	Consultations and meetings.			Morning treatment.			
	Mothers.	Babies under 1 year.	Babies 1—5 years.	Mothers.	Babies under 1 year.	Babies 1—5 years.	Callers.
Ellerby ..	3,755	3,514	2,304	159	621	577	505
West Street ..	1,885	3,701	2,977	98	781	2,024	267
Burmantofts ..	3,843	2,991	3,132	367	1,090	887	140
Hunslet ..	2,925	4,157	3,695	177	584	416	742
University ..	2,241	2,681	2,498	136	1,654	1,408	305
Woodhouse ..	1,047	3,212	1,855	83	449	266	169
Holbeck ..	1,929	4,008	4,317	74	1,213	2,752	669
Armley ..	2,687	3,654	3,675	530	1,789	3,168	956
Chapelton ..	1,452	2,909	2,294	26	908	417	401
St. Nicholas ..	3,204	2,979	2,136	192	780	999	748
Bramley ..	1,673	2,133	1,943	943	1,736	803	268
New Wortley ..	2,642	2,247	2,299	302	1,260	2,573	287
Middleton ..	175	1,143	982	2	136	77	5
Meanwood ..	1	1,032	845	..	..	..	..
West Hunslet ..	1,080	2,597	1,714	68	403	511	66
Harehills ..	16	1,672	544	2	187	1	1
Crossgates ..	12	518	279	..	8	11	3
Burley ..	641	2,329	889	32	358	221	27
Totals ..	31,208	47,477	38,378	3,191	13,957	17,111	5,559

BABIES UNDER ONE REGISTERED DURING YEAR 1925.

WELCOME.	0-1 month.	1-3 months.	3-6 months.	6-12 months.	Total.
Ellerby ..	101	135	30	25	291
West Street ..	122	146	42	36	346
Burmantofts ..	100	149	28	33	310
Hunslet ..	110	137	30	30	307
University ..	74	88	22	19	203
Woodhouse ..	87	111	36	19	253
Holbeck ..	150	137	44	54	385
Armley ..	101	156	31	32	320
Chapelton ..	102	116	42	28	288
St. Nicholas ..	103	111	18	11	243
Bramley ..	44	75	14	10	143
New Wortley ..	98	75	23	19	215
Middleton ..	26	46	5	33	110
Meanwood ..	17	47	11	19	94
West Hunslet	52	95	31	37	215
Harehills ..	24	105	22	13	164
Cross Gates ..	4	24	8	15	51
Burley ..	63	115	32	46	256
Totals ..	1,378	1,868	469	479	4,194

BABIES OVER ONE REGISTERED DURING YEAR 1925.

WELCOME.	1-2 years.	2-3 years.	3-4 years.	4-5 years.	Total.
Ellerby ..	34	24	11	8	77
West Street ..	53	35	18	12	118
Burmantofts ..	36	15	13	3	67
Hunslet ..	24	30	25	17	96
University ..	27	21	13	5	66
Woodhouse ..	36	11	9	6	62
Holbeck ..	64	46	43	14	167
Armley ..	43	31	32	16	122
Chapelton ..	34	41	11	11	97
St. Nicholas ..	32	22	12	4	70
Bramley ..	20	7	6	5	38
New Wortley ..	27	31	15	12	85
Middleton ..	29	19	14	13	75
Meanwood ..	14	16	8	3	41
West Hunslet	37	33	20	6	96
Harehills ..	27	22	10	..	59
Cross Gates ..	13	11	9	..	33
Burley ..	43	40	16	14	113
Totals ..	593	455	285	149	1,482

HOME VISITS PAID BY CLINIC NURSES DURING YEAR 1925.

WELCOME.	Babies under 1 year.	Babies 1—5 years.	Odd Visits.	Total Visits.	Expectant Mothers.	Total Visits to both.
Ellerby ..	118	152	9	279	124	403
West Street ..	185	548	8	741	76	817
Burmantofts ..	301	297	43	641	342	983
Hunslet ..	9	305	10	324	49	373
University ..	21	10	5	36	20	56
Woodhouse ..	536	319	221	1,076	201	1,277
Holbeck ..	7	427	1	435	3	438
Armley ..	16	32	4	52	13	65
Chapelton ..	50	158	35	243	30	273
St. Nicholas ..	..	..	2	2	..	2
Bramley ..	698	369	118	1,185	177	1,362
New Wortley ..	82	112	8	202	91	293
West Hunslet..	2	..	3	5	2	7
Eurley ..	60	23	6	89	5	94
Totals ..	2,085	2,752	473	5,310	1,133	6,443

Leeds Babies' Welcome Association.—I have once again to acknowledge with gratitude the help afforded by the Leeds Babies' Welcome Association in carrying on the work of this section of the Maternity and Child Welfare Scheme. The Association makes itself responsible for the premises in which the various Welcomes are held as well as for providing the voluntary help necessary to carry out the manifold duties connected with them. It has fulfilled its obligations in a highly creditable manner.

I feel sure that it would be the wish of the Maternity and Child Welfare Committee that their indebtedness to the Leeds Babies' Welcome Association should be adequately acknowledged. Were it not for the enthusiasm which the Association puts into the work it is almost certain that the voluntary element, which is such a valuable asset to the scheme, would disappear. The "official" and the "voluntary" are not always compatible. In Leeds the two mix very well and act in the closest harmony. I offer my own personal thanks to the Association and its officers for their assistance and support during the year.

Milk Distribution.—Particulars respecting the amount of liquid and dried milk supplied to necessitous mothers and babies attending the centres are given in the accompanying tables. As in previous years the scheme of distribution has been in the hands of a special committee composed of representatives from the Maternity and Child Welfare Committee, the Leeds Babies' Welcome Association and other outside bodies engaged in social work.

The Committee met on 49 occasions and considered 7,835 applications, which is 434 less than the previous year. In addition it supervised generally the work of the milk staff, details of which appear in table on page 165.

It will be noted that there was a decrease in the amount of dried milk distributed of 8,405 lbs. The decrease is mainly in the amount distributed free of charge. As regards the recipients there was an increase from 2,874 in 1924 to 3,424 in 1925, the increase being chiefly amongst those in receipt of assisted milk.

The amount of cows' milk distributed rose from 25,266 to 26,989½ pints, whilst the number of recipients increased from 224 to 250.

The cost of the milk distribution scheme for the year was £3,867 11s. 7d. which is £35 16s. 2d. in excess of the figure for last year. The nett cost per head to the Corporation was £1 1s. 0¾d.

COST OF MILK DISTRIBUTION SCHEME FOR YEAR ENDED
31st DECEMBER, 1925.

INCOME.				EXPENDITURE.			
	£	s.	d.		£	s.	d.
To cash received for sale of dried milk	1,960	4	4	By salaries and wages	599	15	0
				„ Cost of dried milk	4,700	0	11
				„ Cost of cows' milk	444	6	7
				„ Printing, stationery, etc.	47	16	6
				„ Superannuation			
				Contributions..	28	5	5
„ balance—loss	3,867	11	7	„ Sundries	7	11	6
	£5,827	15	11		£5,827	15	11

Nett cost per head to Corporation, £1 1s. 0¾d.

WORK OF MILK STAFF.

	I. Quarter.	II. Quarter.	III. Quarter.	IV. Quarter.	Year.
Applications dealt with (new)	317	301	384	275	1,277
„ „ (repeat)	2,737	2,883	2,776	2,814	11,210
„ „ (refused)	..	..	..	..	..
No. of re-applications ..	136	136	166	140	578
*No. of external cases dealt with at the office ..	267	185	196	187	835
	3,457	3,505	3,522	3,416	13,900
No. of visits to Welcomes paid by the milk secretaries	156	129	136	153	574

* Persons under treatment at the Public Dispensary and the General Infirmary.

AMOUNT OF DRIED MILK DISTRIBUTED IN LBS. (YEAR 1925).

WELCOME.	Free.	Assisted.	Full Price.	TOTAL.
Ellerby	4,072	3,043	127	7,242
West Street	2,794	1,550	285	4,629
Burmantofts	3,315	2,056	218	5,589
Hunslet	2,807	3,618	578	7,003
University	2,642	1,755	159	4,556
Woodhouse	1,260	962	344	2,566
Holbeck	1,584	2,365	411	4,360
Armley	2,549	1,455	289	4,293
Chapelton	1,770	1,375	184	3,329
St. Nicholas	2,968	2,877	146	5,991
Bramley	408	328	71	807
New Wortley	2,090	1,101	312	3,503
Middleton	353	231	5	589
West Hunslet	576	853	443	1,872
Burley	219	107	381	707
External	1,183	511	3	1,697
Totals	30,590	24,187	3,956	58,733

NUMBER OF RECIPIENTS (YEAR 1925).

WELCOME.	Free.	Assisted.	Full Price.	TOTAL.
Ellerby	231	134	21	386
West Street	143	82	27	252
Burmantofts	185	111	33	329
Hunslet	109	195	55	359
University	81	51	13	145
Woodhouse.. ..	69	23	39	131
Holbeck	91	157	39	287
Armley	113	89	60	262
Chapelton	116	82	29	227
St. Nicholas	159	142	24	325
Bramley	33	38	22	93
New Wortley	84	86	41	211
Middleton	22	20	2	44
West Hunslet	50	71	77	198
Burley	23	14	41	78
External	56	40	1	97
Totals	1,565	1,335	524	3,424

COWS' MILK DISTRIBUTED—NUMBER OF RECIPIENTS.

WELCOME.	Pints (Free).	Recipients (Free).
Ellerby	2,844½	24
West Street	2,561½	29
Burmantofts	3,632	24
Hunslet	1,662½	10
University	1,936½	23
Woodhouse.. ..	6	1
Holbeck	1,039	15
Armley	1,854½	20
Chapelton	2,836	26
St. Nicholas	1,501½	9
Bramley	429½	5
New Wortley	1,146	9
Middleton	1,105	7
West Hunslet	1,128	9
Burley	..	..
External	3,307	39
Totals	26,989½	250

THE INFANTS' HOSPITAL, WYTHER.

Details of the work of the hospital are given in the appended tables. The institution continued to do excellent work, but the building is out of date and there is great need for a modern hospital to deal with the diseases of children of all ages up to fourteen years. Wyther only admits infants up to five years.

SUMMARY OF CASES TREATED IN THE INFANTS' HOSPITAL, WYTHER.

	Males.	Females.	Total.
Remaining in Hospital, January 1st, 1925	14	24	38
Admitted during the year ..	102	97	199
Discharged during the year ..	87	88	175
Died during the year	14	9	23
Remaining in Hospital, December 31st, 1925	15	24	39

Mortality rate per cent. on admissions 11.6. Average stay in Hospital 65.6 days.

ANALYSIS OF DEATHS.

Cause.	Under 1 year.		Over 1 year.		Total.
	Males.	Females	Males.	Females	
Marasmus	8	2	..	..	10
Marasmus and tetany ..	..	1	..	..	1
Debility from birth ..	1	..	..	..	1
Marasmus, Bronchitis ..	1	2	..	..	3
Tuberculous Meningitis ..	..	..	1	..	1
Broncho-pneumonia ..	1	3	..	..	4
Chronic Enteritis	..	..	2	..	2
Miliary Tuberculosis ..	..	1	..	..	1
Totals	11	9	3	..	23

ANALYSIS OF CASES TREATED DURING 1925.

Reason for admission.	Under one year.		Over one year.		Total.
	M.	F.	M.	F.	
Acute pneumonia	3	3	2	..	8
Bronchitis	..	3	..	2	5
Empyema	..	..	2	..	2
Unresolved pneumonia	..	..	5	1	6
Abdominal tuberculosis	..	..	..	1	1
Miliary tuberculosis	..	1	..	..	1
Tuberculous meningitis	..	..	1	..	1
Marasmus	16	12	..	6	34
Severe Malnutrition	3	2	11	24	40
Marasmus after empyema	..	..	..	1	1
" " enteritis	..	..	2	1	3
Malnutrition after pneumonia	..	..	2	1	3
Malnutrition and anaemia	..	..	1	1	2
Rickets	3	2	12	18	35
Rickets and marasmus	1	1	3	3	8
" " malnutrition	2	1	15	11	29
" " anaemia	..	..	1	3	4
" " enteritis	..	..	2	3	5
" " tetany	..	..	2	1	3
Tetany	2	..	1	..	3
Acute gastro enteritis	..	2	2	..	4
Acute colitis	..	..	1	..	1
Chronic enteritis	..	..	7	5	12
Chronic colitis	..	..	2	1	3
Intestinal toxæmia	1	..	1	3	5
Improper feeding	7	4	..	..	11
Seborrhoea dermatitis	1	1	..	..	2
Congenital syphilis	..	1	..	..	1
Spastic diplegia.. .. .	..	..	..	2	2
Mentally defective	..	..	..	1	1
Nil	..	..	1	..	1
Totals	39	33	76	89	237

CLASSIFICATION OF ADMISSIONS ACCORDING TO AGE AND SEX.

Males.		Females.		Total Infants		Grand Total.
Under 1 year.	Over 1 year.	Under 1 year.	Over 1 year.	Under 1 year.	Over 1 year.	
36	66	28	69	64	135	199

Day Nursery.—The number of children who have been regular attenders for whole or half days during the year was 24. The total attendances are given in the accompanying table.

Residential Nursery.—There were 28 children in residence on January 1st, 1925, 58 were admitted during the year, and 22 remained on December 31st. Eight of the children admitted were illegitimate. The average length of stay was 101 days. The reasons for admission were as follows:—In 24 cases, mother's illness; in 2 cases, the death of the mother; in 1 case, illness of father; in 9 cases, mothers working; in 21 cases, mothers expecting confinement; and 1 case, desertion by the mother.

TOTAL ATTENDANCES OF RESIDENT AND DAY CHILDREN AT THE NURSERIES, IN AGE GROUPS FOR THE YEAR ENDED 31ST DECEMBER, 1925.

Nursery.	Whole attendances.				Half attendances.			
	Under 3 years.	3-5 years.	Over 5 years.	Total.	Under 3 years.	3-5 years.	Over 5 years.	Total.
Red House Residential Nursery ..	8,282	374	..	8,656	..	..	..	..
Cobden Place Day Nursery	6,719	2,205	16	8,940	541	170	..	711

Convalescent Treatment for Mothers and Babies.—The number of mothers and babies for whom convalescence was arranged was 76 and of mothers without babies 7. The average period of stay at the convalescent homes was 14.2 days. The cost to the Corporation of this provision was £346 8s. 11d., or an average of £2 1s. 0¾d. per case per week. Thirty-seven of the mothers were too poor to contribute anything towards their convalescence but the remainder contributed various amounts according to their means. The total sum contributed by the parents was £29 19s. 7d.

As in previous years arrangements for convalescence were made by the Leeds Children's Convalescent and Summer Holiday Fund on behalf of the Maternity and Child Welfare Committee.

In addition to the above, 153 children were sent for convalescence to the Meanwood Convalescent Home. The average stay of each child was 23.9 days, the cost to the Corporation was £515 10s. 11d., or an average of £3 7s. 5d. per case. It was decided to repeat the experiment of keeping the Home open during the winter as in the previous year. Contrary to what one would expect the mothers show just the same eagerness for their children to have convalescence during the winter as during the summer months. The fact of the weather being colder and more inclement does not seem to discourage them. The effect of keeping the home open all the year round has been to increase the number of admissions during the complete year and the total cost in proportion.

HOUSING.

Housing is still the most serious and urgent of the City's social problems. When I speak of housing I do not mean only the provision of new but also the demolition of old and insanitary houses. Whilst admitting the necessity for supplying the demand for new houses, which is still great, I am bound to point out that from the public health point of view the need for dealing with slum property, of which there is a considerable amount in the City, is just as pressing. It is now seven years since a survey of the City was undertaken with the object of estimating the need for new houses (*a*) to meet the growth of the population which had taken place during the years of the war, and (*b*) to replace worn out and dilapidated houses which were no longer in all respects reasonably fit for human habitation. Since that time there have been completed by public and private enterprise a total of 6,114 new houses, but up to the present no attempt has been made to deal with insanitary property. I understand that the number of applicants still awaiting new houses is over 3,000 so that if these are to continue to have prior consideration some time must elapse still before a start can be made with slum clearance. The gradual elimination of the slum by the opening out of new housing estates is likely to be a very slow process, and at the present rate of progress is going to take a long time before any appreciable effect is seen. The question that arises is how long are we justified in waiting, bearing in mind the baneful influence which the presence of these slum areas have

on the general health of the City. It must be obvious to everyone that the problem cannot be indefinitely postponed. Whilst new houses are being erected the old are going from bad to worse, and every year that passes renders the situation more acute. In my opinion the time has arrived when a definite start should be made with slum clearance. So long as we have these unhealthy areas in our midst, so long must we expect unfavourable vital statistics, because it is precisely those areas with their high mortality and sickness rates which depress the level of general healthiness of the City as a whole.

Number of Houses.—The total number of houses in the City on December 31st, 1925, was 116,443, made up of approximately 38,698 through houses and 77,745 back-to-back houses.

New Houses.—The total number of new houses completed and occupied during the year was 1,199 of which 822 were suitable for persons of the working classes and 377 were of a larger type. These figures are more favourable than those of the preceding year and show a nett increase of 425 houses. One of the most encouraging features of the year has been the renewed activity amongst private house builders. Of the total number of houses erected, no fewer than 960 were by private enterprise. They are mostly of the villa type and situated on the outskirts of the City, principally along the new arterial and ring roads. Of the 960, 583 were what are usually termed subsidy houses or were erected with state assistance. At the present time some 400 houses of a similar type are in course of construction and plans have been passed for an additional 221. The total number of subsidy houses erected in the City up to December 31st was 828.

Up to December 31st, 1925 the Leeds Corporation had built a total of 3,678 houses, all of which were in occupation. There are at the present time 500 houses in course of erection on the estates at Middleton, Cross Gates and Meanwood, whilst contracts have been let for an additional 850 houses, namely, 350 at Hollin Park, Roundhay and 500 in York Road.

Experiments are in process of being made with all-gas and all-electric houses. The result will be awaited with interest—as, if successful, an effective way of dealing with the smoke problem will have been found.

TABLE SHEWING THE NUMBER OF HOUSES ERECTED IN LEEDS DURING THE LAST TWENTY-FOUR YEARS, ENDED 31ST MARCH, 1926.

Year.					Number of Houses.
1903	..	..	..	..	2,572
1904	..	..	..	..	2,923
1905	..	..	..	..	2,442
1906	..	..	..	..	1,748
1907	..	..	..	..	1,135
1908	..	..	..	..	919
1909	..	..	..	..	836
1910	..	..	..	..	584
1911	..	..	..	..	505
1912	..	..	..	..	350
1913	..	..	..	..	220
1914	..	..	..	..	287
1915	..	..	..	..	228
1916	..	..	..	..	146
1917	..	..	..	..	51
1918	..	..	..	..	5
1919	..	..	..	..	4
1920	..	..	..	..	7
1921	..	..	..	..	196
1922	..	..	..	..	1,048
1923	..	..	..	..	1,918
1924	..	..	..	..	618
1925	..	..	..	..	951
1926	..	..	..	..	1,376
TOTAL					21,069

Housing Shortage.—The waiting list of applicants for new houses at the end of the year was 3,004, which is 1,262 fewer than at the end of the previous year. Fresh applications are still coming in at the rate of 50 a week so that there seems to be little evidence of the demand slackening.

Overcrowding.—The number of notices served by the Department during the year was 226 of which 76 were abated, whilst others went by default owing to the fact that alternative accommodation was not available. Some of the cases reported were of a very distressful character, for example, houses of two or three rooms with as many as eight or nine occupants and others with five or six persons living in one room where perhaps one or more were suffering from tuberculosis. Perhaps the worst case of all was a house in Hunslet occupied by a man, wife and six children of whom every member was suffering from active tuberculosis and had spent varying periods in a sanatorium. The only accommodation at the disposal of this family was one room—and that a cellar. Better accommodation, however, consisting of a living-room, scullery, two bedrooms and attic was found. Even so the accommodation is still inadequate.

The number given above does not in any sense represent the total number of overcrowded houses in the City. As mentioned in my last report a special census taken in 1925 covering 17,500 houses in all parts of the City revealed the fact that 1,770 (or 10·1 per cent.) were grossly overcrowded and I have no reason to suppose that this figure has been materially altered since the census was taken.

Unfit Houses.—The number of houses inspected and found to be unfit for human habitation was 343 as against 365 in the previous year. The reasons for unfitness of these houses were structural defects, dilapidations and lack of air and sunlight.

Notices were served in every case and in 262 instances the defects were made good, that is, as far as they could be considering the age, condition and situation of the property.

In addition to the above 24,235 houses were found defective in some respect or other and were repaired. Further details of housing work are set out in the special table on page 176.

Unhealthy Areas.—It is a matter of some regret to me that I am still unable to report any progress in connection with the treatment of unhealthy areas.

West Street was represented as an unhealthy area in May, 1923, but so far nothing has been done towards carrying the representation into effect. The difficulty is to find houses for the displaced tenants. This, I admit, is a very real difficulty but I am loathe to think it is one which is insurmountable. When one considers the cost entailed to the City by the loss of life and the undue prevalence of sickness and disease amongst the inhabitants of this area, one is driven to the conclusion that any expenditure incurred on an improvement scheme for the area would be money well spent. I hope that at no distant date the legal formalities in connection with the treatment of the Area under the Housing Acts will be completed and a start made with the clearance.

Another area almost as bad as West Street, and certainly as much in need of improvement, is the Regent Street area. I have dealt with it also in a previous year's report and had hoped that ere now something would have been done in the way of improvement. I understand however, that the new street which runs between Sheepscar and Lady Lane has reached a stage in its progress when it will become necessary at an early date to undertake the demolition of upwards of 300 houses in this area. This will open out the area and alleviate to some extent the distressing conditions obtaining there.

Other areas urgently in need of attention are Lupton's Fold in Armley; Greenwood Street, Hunslet; Fleece Lane, Meadow Lane; and Garden Street, Marsh Lane.

A small area, Ambler's Yard, Holbeck, consisting of 21 houses was dealt with during the year. Owing to age and dilapidation the houses had become unfit for habitation. To attempt to repair them was out of the question, owing to the cost. It was therefore decided to close the whole of them. This was done, the majority of the inhabitants being re-housed in tenements provided by the Corporation at the old Barracks in Chapeltown Road.

Another small area Cato Street and Crispin Street, Marsh Lane, consisting of 16 houses which had become so dilapidated through neglect as to be totally unfit for habitation was repaired and rendered fit for habitation.

TABLE SHEWING THE TOTAL AMOUNT OF HOUSING WORK
DONE TO 31st MARCH, 1926.

ASSISTED SCHEMES.

NAME OF ESTATE.	Sewers laid. Length in yds.	Roads formed, pitched and ashed. Length in yds.	No. of Houses for which Contracts have been signed.	No. of Houses upon which work has been com- menced.	No. of Houses completed included in previous column.
Hawksworth Wood ..	4,436	5,109	402	402	402
Wyther House ..	3,857	4,048	492	492	492
Meanwood	4,394	5,931	800	800	800
Crossgates	4,510	6,063	488	488	488
Middleton	3,993	5,231	697	697	697
Ivy House	Existing	Existing	46	46	46
Section 12/3 Houses	Do.	Do.	398	398	398
Demonstration Houses, Meanwood	included	above.	6	6	6
OTHER THAN ASSISTED SCHEMES.					
Wyther House ..	included	above.	6	6	..
(Phormium Houses)					
Meanwood	770	812	100	100	26
(part of 500 Scheme)					
Meanwood	51	53	2	2	..
(Atholl Steel Houses)					
Crossgates	included	above.	150	150	47
(part of 500 Scheme)					
Middleton	503	500	200	200	200
(for Improvements Committee)					
Middleton	1,851	2,123	250	250	76
(part of 500 Scheme)					
Hollin Park	797	659	351	150	..
York Road	1,062	100	500	86	..
Totals	26,224	30,629	4,888	4,273	3,678

**HOUSING, TOWN PLANNING, &c. ACTS, 1909, 1919, 1920, and
THE HOUSING OF THE WORKING CLASSES ACT, 1890, Parts I. & II.**

Table showing the number of houses examined by the Medical Officer of Health as part of the general survey of the town during the year ending December 31st, 1925, and the numbers represented or otherwise dealt with, pursuant to the Housing Acts, with the corresponding figures for 1923 and 1924.

	1923.	1924.	1925
Number of new houses erected during the year :—			
(a) Total including numbers given separately under (b)	886	650	1,19
(b) With State Assistance under the Housing Acts :			
(i) By the Local Authority	578	126	23
(ii) By other bodies or persons	..	..	58
1. <i>Unfit dwelling-houses.</i>			
Inspection—(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	10,048	8,383	9,12
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925	574	607	61
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	273	365	34
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation ..	301	242	27
2. <i>Remedy of Defects without Service of formal Notices.</i>			
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	273	239	26
3. <i>Action under Statutory Powers.</i>			
A.—Proceedings under section 28 of the Housing, Town Planning, &c. Act, 1919, and Section 3 of the Housing Act, 1925			
(1) Number of dwelling-houses in respect of which notices were served requiring repairs ..	..	..	..
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—			
(a) By owners	231	212	24
(b) By Local Authority in default of owners ..	..	..	..
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close ..	1	..	..
B.—Proceedings under Public Health Acts.			
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	20,549	21,078	22,33
(2) Number of dwelling-houses in which defects were remedied :—			
(a) By owners	19,821	20,548	24,23
(b) By Local Authority in default of owners ..	..	..	..
C.—Proceedings under sections 17 and 18 of the Housing, Town Planning, &c. Act, 1909, and sections 11, 14, and 15 of the Housing Act, 1925			
(1) Number of representations made with a view to the making of Closing Orders	3	39	..
(2) Number of dwelling-houses in respect of which Closing Orders were made	3	34	..
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	..	11	..
(4) Number of dwelling-houses in respect of which Demolition Orders were made	..	1	..
(5) Number of dwelling-houses demolished in pursuance of Closing or Demolition Orders ..	..	9	..

PROPAGANDA.

During Health and Baby Week in October a series of lectures on various aspects of public health was given in different parts of the City, also a number of dinner-hour talks to the employees of certain of the large firms. The programme was arranged by the Leeds Committee for Social Hygiene and the speaker was Mr. T. Bowen Partington of the British Social Hygiene Council, London. A second series of addresses on Psychology arranged by the same body was given during the Winter at which the speakers were well known authorities on the subject.

In addition 27 special lectures and addresses, including a broadcast talk on "A Retrospect and Forecast on Public Health Work," were given by myself and members of my staff.

Leaflets and pamphlets dealing with subjects relating to personal and communal health were distributed at all the important meetings.

STAFF CHANGES.

Marion Knowles, M.B., Ch.B., appointed Assistant Medical Officer for Maternity and Child Welfare from June 8th.

Carlton Oldfield, M.D., F.R.C.S., appointed Consulting Gynæcologist at the City Hospital, Seacroft, from June 1st.

APPENDIX.

I.

MINISTRY OF HEALTH TABLES.

TABLE I.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1925 AND PREVIOUS YEARS.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NETT DEATHS BELONGING TO THE DISTRICT.			
		Un-corrected Number.	Nett.		Number.	Rate.	Of Non-residents registered in the District.	Of Resi-dents not registered in the District.	Under 1 Year of Age.		At all Ages.	
			Number.	Rate.					Number.	Rate per 1,000 Births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1915	459,260	9,990	9,877	21.5	7,557	16.5	298	350	1,253	127	7,609	16.6
1916	446,349	9,572	9,432	21.1	6,867	15.4	302	381	1,216	129	6,946	15.6
1917	438,254	7,738	7,566	17.3	6,962	15.9	307	397	1,023	135	7,052	16.1
1918	427,589	7,609	7,392	17.3	8,452	19.8	318	395	984	133	8,529	19.9
1919	430,834	7,837	7,564	17.6	7,099	16.5	401	294	899	119	6,992	16.2
1920	448,913	11,587	11,229	25.0	6,725	15.0	417	283	1,232	110	6,591	14.7
1921	465,500	10,427	10,144	21.8	6,424	13.8	408	269	997	98	6,285	13.5
1922	466,700	9,500	9,253	19.8	6,589	14.1	425	315	935	101	6,479	13.9
1923	469,900	8,991	8,684	18.5	6,128	13.0	451	309	773	89	5,986	12.7
1924	471,600	8,862	8,558	18.1	6,824	14.5	435	358	921	108	6,747	14.3
1925	472,900	8,518	8,180	17.3	6,286	13.3	570	321	748	91	6,037	12.8

Area of District in } 28,090
 acres (land and
 inland water)

Total population at all ages at the 1921 Census 458,232

Do. adjusted for the 1921 Census 465,500

TABLE II. CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE CALENDAR YEAR 1925.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.						TOTAL CASES NOTIFIED IN EACH LOCALITY. (e.g. Parish or Ward) of the District.												Total Cases removed to Hos- pital.						
	At all Ages.	At Ages—Years.					Central.	North.	North-East.	New Ward.	East.	South.	East Hunstlet.	West Hunstlet.	Helbeck.	Mill Hill.	West.	North-West.		Brunswick.	New Wortley.	Armley and Wortley.	Bramley.	Headingley.	
		under 1.	1 and 5 years.	5 and 15 years.	15 and 25 years.	25 and 45 years.																			45 and 65 years.
Small-pox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cholera (C) Plague (P) ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria (including Mem- branous croup)	422	2	115	217	53	32	3	9	29	23	1	37	9	24	42	36	36	14	14	11	38	40	14	45	389
Erysipelas	321	6	6	10	48	85	135	15	26	28	3	33	10	21	27	27	11	15	11	20	20	14	18	22	109
Scarlet Fever	1,166	9	293	665	156	39	4	27	78	123	16	85	19	142	132	66	31	70	28	42	48	60	54	145	1,091
Measles	5,100	316	2,965	1,768	43	6	2	207	414	394	29	625	82	276	259	168	19	114	441	207	429	449	525	462	92
German Measles	201	7	54	120	12	7	1	8	9	5	3	5	6	7	6	1	..	8	7	11	7	4	98	16	..
Typhus Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever	9	..	1	3	2	3	..	1	..	..	1	..	..	..	2	..	..	..	1	..	1	..	..	3	4
Relapsing fever (R) Con inued fever (C)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Fever	52	..	..	..	12	39	1	3	4	6	1	4	2	4	7	9	2	3	2	2	2	2	..	1	35
Continued High Tempera- ture	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cerebro-Spinal Meningitis ..	1	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	2	..
Poliomyelitis	3	..	..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	1	..	..	5	3	..
Ophthalmia Neonatorum ..	50	50	..	..	..	..	..	2	7	4	..	2	1	4	1	9	..	5	2	1	..	4	5	3	..
Encephalitis Lethargica ..	20	..	2	2	4	4	7	2	2	1	1	..	2	2	1	1	..	3	..	1	2	..	1	1	1
Malaria	9	..	..	..	..	7	2	..	3	3	..	..	..	..	..	..	..	1	1	..	..	..	1	..	..
Dysentery	3	..	1	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	3
Trench Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Diseases	214	13	41	42	63	49	5	6	6	8	66	10	10	15	10	6	19	13	6	6	7	5	6	15	213
Pulmonary Tuberculosis ..	1,720	3	48	380	321	647	288	69	133	107	8	213	85	156	107	101	20	131	99	97	103	82	36	113	891
Other Forms of Tuberculosis ..	149	8	39	50	26	20	4	2	6	12	3	22	7	6	8	16	..	8	10	11	7	8	5	18	8
Pneumonia (Acute primary) ..	914	59	222	200	91	153	144	20	67	58	6	55	74	109	83	108	6	80	35	27	53	48	35	50	35
Do. (Acute Influenzal) ..	231	21	61	24	24	44	46	7	48	30	3	29	12	6	21	11	..	9	7	5	10	5	6	22	3
TOTALS	10,585	494	3,848	3,486	856	1,135	642	378	832	862	141	1,120	329	772	706	559	144	475	662	443	727	721	804	919	2,875

Isolation Hospital or Hospitals, Sanatoria, &c.:—City Fever Hospital, Seacroft and Killingbeck.

In addition to the 891 Pulmonary Tuberculosis and 8 Tuberculosis (Other Forms), removed, 115 Pulmonary Tuberculosis and 3 Tuberculosis (Other Forms), were admitted to "The Hollies," Westwood Lane, and 178 Pulmonary Tuberculosis, were admitted to Gateforth Sanatorium which is outside the City. They are included in the 1,720 and 149 notified.

3.

TABLE III.

CAUSES OF, AND AGES AT DEATH DURING THE CALENDAR YEAR 1925.

CAUSES OF DEATH.	Nett Deaths at the subjoined ages of " Residents " whether occurring within or without the District.									Total Deaths whether of " Residents " or " Non-Residents " in Institutions in the District.
	ALL AGES.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.	
1. Enteric Fever	3	..	..	..	..	..	2	1	..	3
2. Small-pox	..	..	..	..	..	..	..	..	..	..
3. Measles	39	11	16	8	2	1	1	..	..	13
4. Scarlet Fever	15	..	5	5	5	..	..	..	..	15
5. Whooping Cough	47	21	11	13	2	..	..	..	..	16
6. Diphtheria	39	1	3	13	19	3	..	..	..	36
7. Influenza	159	16	3	4	4	8	30	45	49	23
8. Erysipelas	13	1	..	..	..	..	2	7	3	10
9. Pulmonary Tuberculosis ..	511	8	5	9	15	109	204	144	17	180
10. Other Tuberculous Diseases	88	7	8	21	14	15	12	8	3	54
11. Cancer, malignant disease	606	1	..	..	1	3	52	292	257	253
12. Rheumatic Fever	22	..	..	..	2	7	3	6	4	1
13. Meningitis	52	7	3	1	2	2	2	4	31	45
14. Cerebral Hæmorrhage, &c...	322	..	..	..	..	..	7	108	207	58
15. Organic Heart Disease ..	674	..	..	..	10	23	61	243	337	164
16. Arterio-sclerosis	236	..	..	..	..	..	3	38	195	46
17. Bronchitis	513	38	11	2	2	1	22	131	306	29
18. Pneumonia (all forms) ..	503	96	65	44	18	25	56	118	81	146
19. Other diseases of respiratory organs	87	3	2	1	2	2	8	37	32	57
20. Diarrhœa and Enteritis ..	179	133	16	3	5	2	1	11	8	74
21. Appendicitis and Typhlitis	20	..	..	..	3	6	5	5	1	37
22. Cirrhosis of Liver	30	..	..	..	..	1	3	20	6	9
23. Nephritis and Bright's Disease	205	1	..	1	5	13	23	71	91	78
24. Puerperal Fever	24	..	..	..	..	5	19	..	..	28
25. Other accidents and diseases of Pregnancy and Parturition	21	..	..	..	..	3	18	..	..	18
26. Congenital Debility and Malformation, including Premature Birth ..	257	251	3	2	1	..	..	..	..	136
27. Violent Deaths, excluding Suicide	186	20	4	10	13	21	32	37	49	154
28. Suicide	40	..	..	..	..	3	9	18	10	7
29. Other Defined Diseases ..	1,137	133	21	24	34	44	131	310	440	600
30. Diseases ill-defined or unknown	9	..	1	..	..	..	3	3	2	1
Totals	6,037	748	177	161	159	297	709	1,657	2,129	2,291

THE STATE OF NEW YORK
IN SENATE
JANUARY 1, 1891.
REPORT OF THE
COMMISSIONERS OF THE LAND OFFICE.

Year.	1889.	1890.	1891.	1892.	1893.	1894.	1895.	1896.	1897.	1898.	1899.	1900.	Total.
Acres of land sold.	1,234,567	1,345,678	1,456,789	1,567,890	1,678,901	1,789,012	1,890,123	1,901,234	2,012,345	2,123,456	2,234,567	2,345,678	24,567,890
Value of land sold.	\$1,234,567	\$1,345,678	\$1,456,789	\$1,567,890	\$1,678,901	\$1,789,012	\$1,890,123	\$1,901,234	\$2,012,345	\$2,123,456	\$2,234,567	\$2,345,678	\$24,567,890
Acres of land purchased.	1,234,567	1,345,678	1,456,789	1,567,890	1,678,901	1,789,012	1,890,123	1,901,234	2,012,345	2,123,456	2,234,567	2,345,678	24,567,890
Value of land purchased.	\$1,234,567	\$1,345,678	\$1,456,789	\$1,567,890	\$1,678,901	\$1,789,012	\$1,890,123	\$1,901,234	\$2,012,345	\$2,123,456	\$2,234,567	\$2,345,678	\$24,567,890
Acres of land donated.	1,234,567	1,345,678	1,456,789	1,567,890	1,678,901	1,789,012	1,890,123	1,901,234	2,012,345	2,123,456	2,234,567	2,345,678	24,567,890
Value of land donated.	\$1,234,567	\$1,345,678	\$1,456,789	\$1,567,890	\$1,678,901	\$1,789,012	\$1,890,123	\$1,901,234	\$2,012,345	\$2,123,456	\$2,234,567	\$2,345,678	\$24,567,890
Acres of land reserved.	1,234,567	1,345,678	1,456,789	1,567,890	1,678,901	1,789,012	1,890,123	1,901,234	2,012,345	2,123,456	2,234,567	2,345,678	24,567,890
Value of land reserved.	\$1,234,567	\$1,345,678	\$1,456,789	\$1,567,890	\$1,678,901	\$1,789,012	\$1,890,123	\$1,901,234	\$2,012,345	\$2,123,456	\$2,234,567	\$2,345,678	\$24,567,890
Acres of land sold, purchased, donated, and reserved.	1,234,567	1,345,678	1,456,789	1,567,890	1,678,901	1,789,012	1,890,123	1,901,234	2,012,345	2,123,456	2,234,567	2,345,678	24,567,890
Value of land sold, purchased, donated, and reserved.	\$1,234,567	\$1,345,678	\$1,456,789	\$1,567,890	\$1,678,901	\$1,789,012	\$1,890,123	\$1,901,234	\$2,012,345	\$2,123,456	\$2,234,567	\$2,345,678	\$24,567,890