[Report 1914] / Medical Officer of Health, Leicester Borough.

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Frank Brown, London Road, Leicester.

Mary and William W., 8 months old, fed on Dried Milk from the Leicester Corporation Infants' Milk Depot since they were three days' old.

THE SIXTY-SIXTH

ANNUAL REPORT

UPON THE

HEALTH OF LEICESTER,

For the Year 1914,

BY

C. KILLICK MILLARD, M.D., D.Sc.,

Medical Officer of Health; Medical Superintendent of the Borough Isolation Hospital and Sanatorium; Chief Administrative Tuberculosis Officer.

INCLUDING

REPORT ON TUBERCULOSIS.

REPORT on the SANATORIUM AND ISOLATION HOSPITAL.

REPORT on the INFANTS' MILK DEPOT.

REPORT of the PUBLIC ANALYST.

REPORT of the CHIEF INSPECTOR.

REPORT of the FOOD INSPECTORS.

REPORT of the HEALTH VISITORS.

REPORT of the REFUSE DISPOSAL DEPARTMENT.

REPORT of the STREET CLEANSING DEPARTMENT.

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BOROUGH OF LEICESTER.

SANITARY COMMITTEE.

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ALDERMAN WINDLEY, J.P.

Vice-Chairman :

ALDERMAN LAKIN.

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ALD. BANTON, J.P.
ALD. CHAPLIN, J.P.
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" GEARY
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MR. HUDSON
" JOHNSON
" MITCHELL
" PERKINS
" J. W. SMITH
" SQUIRE
" WALKER
" WILFORD
ALD. YEARBY

The Committee meet every Friday in the Committee Room, Town Hall, at 3-30 p.m.

The Committee is divided into the following Sub-Committees :—

Isolation Hospital, Sanatorium and Dispensary (Chairman, Ald. Windley).
Cleansing and Refuse Disposal (Chairman, Mr. Walker).
Sanitary Inspection and Accounts (Chairman, Ald. Yearby).

HEALTH DEPARTMENT STAFF.

MEDICAL.

Medical Officer of Health	C. KILLICK MILLARD, M.D., D.Sc. *(Also Medical Superintendent of the Isolation Hospital and Sanatorium, and Chief Administrative Tuberculosis Officer.)*
Assistant Medical Officers of Health	WYVILLE S. THOMSON, M.D., D.P.H. *(Tuberculosis Dispensary.)*
	W. JOHNSTONE, M.D., D.P.H. *(Isolation Hospital & Sanatorium.)*
	MARION H. ARCHIBALD, M.A., M.D., D.P.H. *(Tuberculosis Dispensary, Sanatorium and Infant Welfare.)*

SANITARY.

Chief Sanitary Inspector	FRANCIS BRALEY.[1]
Food Inspectors	M. TYLDESLEY.[1, 2]
	F. SOWERBUTTS, A.S.C.,[1, 2, 3, 4] *(serving with the B.E.F.)*
Inspector of Factories, Workshops and Housing	W. C. LONG.[1]
District Inspectors	T. BENT.[1]
	H. STOKES.[1]
	A. G. STANYON.
	T. HINES.[1]
	A. T. PRICE.[1]
Women Inspectors (Health Visitors)	MRS. HARTSHORN.
	MISS L. WALKER.[5]
Clerks, Sanitary	T. P. POYNOR.
"	C. H. LANGRAN.
To Medical Officer of Health	G. B. NEALE.

ISOLATION HOSPITAL AND SANATORIUM.

Matron	MISS E. A. DAVIES.[7]
Engineer	R. REDMILL.
Head Gardener	F. BAKER.

TUBERCULOSIS DISPENSARY.

Nurses	MRS. S. CALVERT.[7]
	MISS F. SPRIGG.[5, 7]
Clerk	MISS E. CHAPLIN.

INFANTS' MILK DEPOT.

Manageress	MRS. STANION.[6]

1. Holds Certificate of the Royal Sanitary Institute for Inspector of Nuisances.
2. Holds Certificate of the Royal Sanitary Institute for Inspector of Meat, &c.
3. Holds Certificate of the Sanitary Inspectors' Examination Board for Sanitary Inspector.
4. Holds Special Certificate of the Sanitary Inspectors' Examination Board for Inspector of Meat, &c.
5. Holds Certificate of the Central Midwives' Board.
6. Holds Certificate of the Royal Sanitary Institute for Health Visitor.
7. Holds Certificate as fully Trained Nurse.

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SUMMARY OF STATISTICS.

FOR THE YEAR 1914.

BOROUGH OF LEICESTER.

Population (estimated) at Mid-year 1914	232,664
Population at Census, 1911, 227,242.	
Marriages	1949
Marriage-rate	16·75
Births	5,144
Birth-rate	22·10
Deaths (corrected for transferable deaths)	3,282
Death-rate „ „ „ „	14·10
Infant Mortality (per 1,000 Births)	119·9
Zymotic-rate	1·13
Diarrhœa-rate	·27
Respiratory-rate	2·66
Cancer-rate	1·10
Tuberculosis-rate	1·55
Phthisis-rate	1·17

Area of Borough (in acres)	8,582
Number of persons per acre at Census, 1911 ...	26·4
Number of persons per Tenement at Census, 1911 ..	4·41
Number of Inhabited Tenements, Census, 1911 ...	51,481
„ „ „ „ July, 1914* ...	53,455
Number of Empty Houses, July, 1914	492
Rateable value (November 1st, 1914) ...	£1,127,470

Rates in the £, 1914-15:

	s.	d.
Poor Rate	1	10
General District Rate	6	3

Borough extended in year 1891.

* As returned by Overseers of Poor.

97 GREAT TOWNS.

(For Comparison.)

	Average.
Birth-rate	24·8
Death-rate	14·6
Infant Mortality	113

TOWN HALL, LEICESTER,

June, 1915.

To the Chairman and Members of the Sanitary Committee.

Gentlemen,

I have the honour to present to you my Annual Report on the Health of Leicester for the year 1914.

The retrospect will, I think, on the whole be considered satisfactory, although the general death-rate was slightly higher than was the case in the previous year.

Scarlet fever, diphtheria and enteric fever fortunately continued little prevalent, and in consequence of the small number of infectious cases requiring hospital treatment your Committee were able, after the war broke out, to set aside a considerable portion of the accommodation at the Isolation Hospital, Groby Road, for the treatment of sick and wounded soldiers. At the time of writing over 100 soldiers are being treated, and the total number dealt with so far is nearly 500.

The new sanatorium buildings on ground adjoining the Isolation Hospital were begun in August, 1914, and the opening ceremony took place on May 24th, 1915.

Embodied with the Report are the usual Special Reports, including one dealing at length with the subject of Tuberculosis.

I am, Gentlemen,

Your obedient servant,

C. Killick Millard

Medical Officer of Health.

Medical Officer of Health's Report

FOR THE YEAR 1914.

PART I.

STATISTICAL.

SITUATION AND SOIL.

The County Borough of Leicester lies in Lat 52 deg., 38 Min. North, and Long. 1 degree, 8 Min. West, in the North of the County of Leicestershire, on the banks of the River Soar, a tributary of the Trent. The subsoil is for the most part upper keuper red and grey marls and boulder clay, except in the Belgrave and Western districts, where considerable areas of gravel and sand are found.

AREA AND ALTITUDE.

The Borough has an area of 8,582 acres, extending about four miles from East to West, and about five miles from North to South. The area built upon extends about three miles each way. The altitude varies from about 165 feet at Belgrave to 305 feet at Stoneygate above mean sea level at Liverpool.

POPULATION.

The population of the Borough, estimated by the method of the Registrar-General to the middle of 1914, was 232,664, and it is upon this figure that the statistics in this Report have been calculated. It is probable, however, that the true population

of the Borough is somewhat greater than this. The "natural increase" in population, or excess of births over deaths, during the three years since the last census amounts to 6,460, and this, added to the population in the census year, would make the population for 1914 amount to 234,094.

It is interesting to learn that the Registrar-General proposes to abandon the method he has hitherto followed, viz., estimating population from the ascertained rate of increase in the previous inter-censal period—and to calculate populations in future from the births and deaths with an allowance for migration.

NUMBER OF INHABITED AND EMPTY HOUSES.

The number of inhabited houses in the Borough on July 1st, 1914, was 53,455. The number of empty houses and premises at the middle of the year was 492, compared with 920 twelve months before, and at the beginning of the present year there were 560 empty houses and premises in the Borough.

The number of "empties" in the Borough, both of houses and business premises, has been steadily declining for several years. Seven years ago the number of "empties" was no less than 3,393. The figures for the intervening years are given in Table 16. They indicate very strikingly the increasing dearth of houses in the Borough.

RATEABLE VALUE AND RATES.

The *Rateable Value* of the Parish on November 1st, 1914, was:—

	£	s.	d.
Buildings	1,114,761	5	9
Agricultural Land	12,709	7	3
	£1,127,470	13	0

The *Poor Rates* for the year, 1914-1915, were 1/10 in the £.

The *General District Rates* for the year, 1914-1915, were:—

Portion of Borough liable to School expenses, 6/3 in the £.

Braunstone portion of Saint Mary (not liable to Elementary Education expenses), 4/8¼ in the £.

MARRIAGES.

The number of marriages registered in the Borough during 1914 was 1949, compared with 1901 in the previous year.

The *Marriage-rate* was 16·75.

Of the total marriages, 1144 took place in Anglican Churches and 805 elsewhere. Marriages were most frequent in the second quarter of the year, and least so in the first quarter.

BIRTHS.

The number of births registered in Leicester during the year was 5,144 (including 53 births occurring at the Poor Law Infirmary, which is just outside the Borough). Of this number 2,627 were males and 2,517 were females. This is a decrease of 134 on the figures for the previous year.

The *Birth rate* was 22.10 per 1000 population, compared with 22·85 in the previous year. This is the lowest rate hitherto recorded.

The birth-rate in the 97 Great Towns during 1914 was 24·9, so that Leicester continues below the average.

Illegitimate Births.—These numbered 248 during the year, or 4·8 per cent. of the total births. The apparent increase in illegitimacy when expressed as a percentage of the total births is rather misleading, owing to the fall in the number of legitimate births. The social causes of illegitimacy are rather complex. The number of illegitimate births each year is remarkably similar. In last year's Report a table was given (No. 15) showing the illegitimacy rate in a number of large towns, from which it appeared that Leicester was slightly below the average. Some towns have habitually a high and others a low rate, and the factors conducing to the higher rates are often obscure.

ILLEGITIMACY IN LEICESTER.

Year.	Population.	No. of Illegitimate Births.	Percentage of Total Births.	Rate per 100,000 Population.
1907	221,000	196	3·5	88·6
1908	223,000	227	4·0	101·8
1909	224,000	227	4·2	101·3
1910	226,000	236	4·4	104·4
1911	227,000	240	4·5	105·7
1912	229,000	267	5·1	116·5
1913	231,000	239	4·5	103·4
1914	232,000	248	4.8	106·5

Still-births.—Although still-births are now notifiable by both midwives and medical men, the number notified is much below the actual number. During 1914 there were 25 notified by doctors and 110 by midwives. The number of burials of still-born infants during the year at the Borough Cemeteries was as follows:—

Gilroes Cemetery	89
Welford Road Cemetery	112
Belgrave Cemetery	16
Total	217

This is equivalent to 4·2 per cent. of the live births.

During the five previous years the percentages were 3·8, 3·9, 4·5, 4·7 and 4·5.

DEATHS.

After making the necessary corrections for institutions and for "transferable deaths,"* the number of deaths of residents of

* The corrections for 1914 were as follows:—98 deaths of non-residents occurring at the Leicester Royal Infirmary, 31 deaths of non-residents occurring at other hospitals, or nursing homes, 13 deaths at private houses, 1 death in the canal and 1 death in the street have been deducted from the deaths registered in Leicester; whilst 33 deaths of patients at the Borough Isolation Hospital and 349 deaths at the Leicester Poor Law Infirmary have been added, these institutions being outside the Borough. 48 transferable deaths occurring away from Leicester have also been added.

Leicester for the year 1914 was found to be 3,282, of which 1,680 were males and 1,602 were females.

Death-rate.—The death-rate, or proportion of deaths per 1,000 population, was **14·10.**

The revised death-rates for the past ten years are as follows:—

1904	...	15·05	average 14·34	1909	...	14·03	average 13·35
1905	...	14·01		1910	...	12·40	
1906	...	15·18		1911	...	13·40	
1907	...	13·48		1912	...	13·59	
1908	...	13.98		1913	...	13·36	

The death-rate in 1914 is slightly higher than has been the case during the last few years.

STATISTICS OF OTHER GREAT TOWNS.

Statistics for twenty-two of the principal towns in England and Wales will be found in Table 7. The list is not complete as the statistics for several large towns were not available. It will be seen, however, that Leicester compares very favourably with most of the towns in the list, only three, viz., Willesden, Croydon and Portsmouth, having a lower death-rate in 1914 than Leicester. The first two of these three towns are really suburbs of London and therefore are hardly comparable to an industrial self-contained town like Leicester.

INFANT MORTALITY.

The number of deaths of infants under one year of age was 617, equivalent to an *Infant Mortality* per 1,000 births of 119·9. This is practically the same figure as in the previous year.

The following figures indicate how remarkably the infant mortality figure in Leicester has decreased in recent years.

INFANT MORTALITY IN LEICESTER.

Quinquennial Period.	Average Rate.
1892—1896	194·4
1897—1901	189·2
1902—1906	158·1
1907—1911	128·5
1912 (an abnormal year) ...	109.0
1913	119·3
1914	119·9

When it is remembered that at one time Leicester held a very unenviable position as a town with an exceptionally high infant death-rate, it is gratifying to know that Leicester now compares favourably with other large towns of equal size.

DEATHS OF INFANTS AT SUCCESSIVE AGES DURING FIRST YEAR OF LIFE.

In Table 33 particulars are given of the causes of death at different age-periods in weeks and months during the first year of life. Of the 617 deaths, 136, or 22 per cent., occurred in the first week; 219, or 35 per cent., occurred in the first month; and 340, or 55 per cent., in the first three months. Of the deaths in the first month of life, the principal causes were premature birth (121), debility and marasmus (47), and convulsions (12). Deaths from premature birth are due to causes over which a sanitary authority at present has but little control, though it is quite possible that in the future we shall regard them as essentially preventable, and efforts to attack the problem are now beginning to be made in connection with infant and maternity welfare work.

DEATHS AMONGST ILLEGITIMATE CHILDREN.

There were 32 deaths of illegitimate infants, equal to a death-rate of 129 per 1,000 illegitimate births, compared with a rate of 119 for all infants. This is certainly a very low rate, and is the lowest hitherto recorded. Probably the efforts now being made in connection with infant welfare have contributed to such a satisfactory result.

The illegitimate infant death-rates during the past few years have been as follows:—

Year.	No. of illegitimate deaths.	Death rate per 1000 illegitimate births.
1910 ...	49 ...	207
1911 ...	46 ...	191
1912 ...	48 ...	180
1913 ...	49 ...	205

ZYMOTIC MORTALITY.

There were 263 deaths from the seven principal zymotic diseases, viz.:—

Smallpox	Nil
Measles	97
Scarlet Fever	5
Diphtheria	19
Whooping Cough	72
Enteric Fever	6
Diarrhœa	64
Total	263

The Zymotic Death-rate was 1·13 as compared with ·75 in the previous year. The year was rather a bad one as regards measles and whooping cough.

CANCER.

The deaths from cancer and other forms of malignant disease during 1914 numbered 267, compared with 252 in 1913, this being, I regret to say, the highest figure hitherto recorded. Of the total, 121 were in males and 146 in females. The cancer rate was 110 per 100,000.

As was stated in my last report, there has been a serious increase in cancer mortality throughout the whole country, and Leicester, unfortunately, is no exception. The increase set in about 27 years ago, but has been most noticeable during the past 18 years. The diagram appended (No. 1) illustrates this increase graphically.

As to the causes of this disquieting increase it must be confessed that hitherto no satisfactory explanation has been forthcoming, though numerous theories have been advanced. Most of these, however plausible, are not found on examination to fit all the facts and, therefore, have to be discarded.

Scientists who are working in connection with the Imperial Cancer Research Fund are continuing their labours, and we can only hope that in time they may succeed in throwing light on this important problem.

In the meantime, the best advice that can be given to possible sufferers from this terrible disease is to seek medical advice early in order that the nature of the malady may be recognised. Undoubtedly the best treatment at present, and the only one offering much hope of success, is early and complete removal by means of an operation.

ORGANS OF THE BODY CHIEFLY AFFECTED.

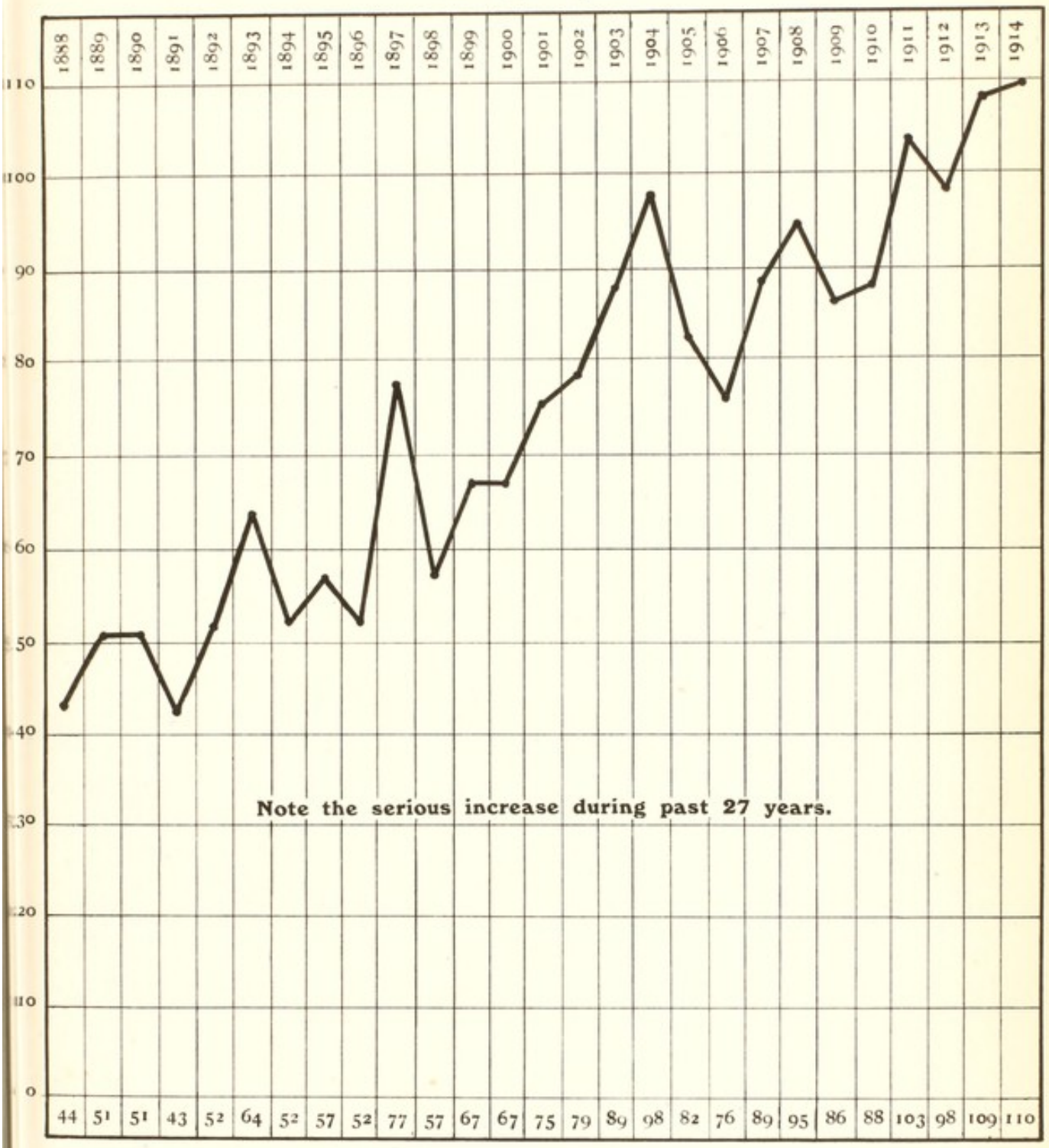
In Table 31 the cancer deaths in Leicester during 1914 are classified according to the organs affected, and also to age and sex. As regards males the organ chiefly affected was the stomach, of which there were 28 instances, the majority being over 60 years of age. Next in frequency was the intestinal tract (22 instances) and the liver (15 instances). In the case of females the incidence was as follows: the uterus was attacked in 25 instances, the stomach in 25, the intestinal tract in 23, the liver in 16.

The tongue was the organ attacked in six instances, all these being males. Once again there was no example of a female being attacked by this dreadful form of the disease. Indeed, during the last five years, out of 36 deaths from cancer of the tongue, *only one* was in a woman. It is supposed that the habits of males as regards alcohol and especially tobacco accounts for this remarkable contrast. It is certainly the case that chronic irritation of any kind is apt to predispose to cancer, so that this theory seems very plausible.

DIAGRAM I.

CANCER DEATH RATE IN LEICESTER.

Per 100,000 Population.



The same remarkable immunity of women to cancer of the tongue as compared with men holds good throughout the country and is in no way peculiar to Leicester.

WARD STATISTICS.

(See Tables 1—6.)

DEATH-RATES.

Knighton Ward, as usual, had the lowest death-rate, viz., 8·6 per 1,000, closely followed by Spinney Hill with 9·0, and Aylestone with 10·0. The last-named ward has had a consistently low death-rate for several years past, and it must be regarded as the healthiest of the working-class districts of the Borough. As we shall see below the infant mortality is also most satisfactorily low.

At the other end of the scale we find Wyggeston Ward with 23·2 per 1,000; Newton Ward, 19·2; and St. Margaret's, 18·3. Belgrave Ward, which usually has a low rate, also came out badly with 18·2. Belgrave's average for the preceding five years was only 12·9. I am at a loss to explain why the rate has jumped up so during the past year, and can only hope that it is quite accidental. As regards Newton Ward, which for many years had the reputation of having the highest death-rate in the Borough, it is interesting to note that for the past four years in succession it has not deserved this unenviable notoriety, its death-rate no longer heading the pole! Unfortunately, Wyggeston Ward has apparently been deteriorating, and the unenviable distinction of having the highest death-rate of any of the Municipal Wards must be transferred to her, she having now occupied this position for four years in succession.

BIRTH-RATES.

The lowest birth-rate was registered, as usual, in De Montfort Ward, viz., 12·5. This has been invariably the case for over ten years. Once again also, the birth-rate in De Montfort Ward was actually less than the death-rate, so that the inhabitants of this Ward are dying out. Knighton Ward comes next with

15·9; but the death-rate here being only 8·6 left a good margin for increase of population. Both these wards are, of course, residential districts where large families are not in vogue.

At the other extreme we have Belgrave Ward with a birth-rate of 30·7; closely followed by Wyggeston with 29·2, and Latimer with 27·9. The birth-rate for the whole Borough was 22·1.

INFANT MORTALITY.

This is the rate which always shows the most glaring contrasts of all, and in 1914 the contrasts were even more marked than usual. In Knighton and Aylestone the figure was only 61 (per 1,000 births), and in De Montfort and Westcotes it was only 86 and 88. But at the other extreme we find Wyggeston Ward with the appalling figure of 223, and St. Margaret's and Newton Ward each with 185.

The very low rate in Aylestone Ward is really remarkable, for this ward has not the social advantages of Knighton, where practically every baby has its own nursemaid. Taken in conjunction with the low general death-rate it clearly entitles Aylestone Ward to the blue ribbon!

AVERAGE RATES.

An average rate for several years being much more reliable for purposes of comparison than the rate for a single year, Table 4 has been prepared which gives the average rate for each ward for the past five years.

For convenience the wards with the highest and lowest average rates are given below:—

PERIOD 1910–1914.

DEATH-RATE.

LOWEST.		HIGHEST.	
Knighton ...	... 7·8	Wyggeston ...	... 19·5
Spinney Hill ...	... 9·4	Newton ...	... 18·1
Westcotes ...	... 10·4	St. Margaret's	... 16·4
Aylestone ...	... 10·5	Wycliffe ...	... 14·7

BIRTH-RATE.

LOWEST.		HIGHEST.	
De Montfort ...	... 12·6	Wyggeston ...	... 30·7
Knighton ...	... 16·4	Latimer ...	... 27·7
Charnwood ...	... 17·1	St. Margaret's	... 27·1
Wycliffe ...	... 17·9	Newton ...	... 26·2

INFANT MORTALITY.

(Per 1000 Births.)

LOWEST.		HIGHEST.	
Knighton ..	... 60	St. Margaret's	... 185
Spinney Hill...	... 85	Wyggeston ...	... 183
Aylestone ...	... 86	Newton ...	... 178
Westcotes ...	... 92	Latimer ...	... 141

INFLUENCE ON HEALTH OF BAD TEETH.

In my last report I drew special attention to the condition of the teeth as a very important factor in relation to health; and I desire to emphasize this again. Dental caries or decay of the teeth is so terribly common that it does not receive the attention it deserves as a factor in the public health. Probably no other single cause leads to more ill-health. Apart from the frequent attacks of "face-ache" and abscesses round the roots of decayed teeth, we have the debility, anæmia, dyspepsia, and chronic blood poisoning due to septic absorption so often associated with bad teeth.

The great difficulty is that good dentistry is very expensive, and has hitherto been regarded as a "luxury" which is out of reach of the working classes. As a matter of fact, however, the the effect upon health of proper dental attention is so great and may last for so many years that the cost, high though it may seem, is usually money well spent. It is very desirable that some scheme should be devised whereby the cost of efficient dentistry should be met by insurance so that the cost could virtually be shared and spread over a number of years. Possibly the machinery of the National Insurance Act might be made use of and dental treatment be included as an additional benefit for,

of course, an additional contribution. There would, no doubt, be special difficulties to be overcome, but I do not see that they need be insuperable. When the war is over this is one of many directions in which social reform may be called for.

PART II.

ZYMOTIC DISEASES.

SMALLPOX.

During 1914 no case of smallpox occurred in the Borough. A few "ship contacts" were dealt with, *i.e.*, persons arrived in Leicester who had been on board a ship on which a case of smallpox had occurred. They were visited and kept under observation until after the expiry of the incubation period. A certain number of such cases occur most years, but it has only very rarely happened that any of these has developed the disease.

No serious epidemic of smallpox occurred in the British Isles during the year, and there are good grounds for believing that the disease is leaving the country. This view, I am well aware, is not held by all Medical Officers of Health, there still being many who believe that owing to the increasing neglect of vaccination the disease will surely reappear and cause devastating epidemics such as occurred in the last century. Of course it is quite possible, indeed probable, that further epidemics will occur—it is too much to hope otherwise—and here in Leicester we cannot expect that all epidemics will be of as mild a character as the two last which occurred. Statistics, however, prove incontestably that the mortality from smallpox in this country has been steadily diminishing for 40 years, and this in spite of the increasing neglect of infantile vaccination.

When the next epidemic visits Leicester it is reasonable to hope, in view of past experiences, that the same measures which have hitherto proved successful, including especially prompt

isolation of patients, vaccination and surveillance of contacts, etc., will again prove efficacious.

During the year your Medical Officer of Health published his Chadwick Lectures on vaccination in volume form.*

VACCINATION STATISTICS, 1914.

The following figures show the number of vaccinations registered and the "exemptions" granted during each quarter of the year:—

	Public.	Private.	Total Vaccinations.	Exemptions Granted.
First Quarter ...	49	24	73	888
Second Quarter...	47	33	80	869
Third Quarter ...	43	36	79	904
Fourth Quarter...	32	29	61	777
Total for year 1914	171	122	293	3438

In the previous year the figures were:—Total vaccinations, 436; public, 264; private, 172; exemptions, 3391.

The number of vaccinations in Leicester continues to decrease.

The total number of births registered during the year was 5,144, so that the vaccinations amounted to 5·6 per cent., whilst the exemptions amounted to 66·8 per cent.

During the past 15 years, whilst 85,292 children have been born, only 12,436 vaccinations, or 14·5 per cent. of the births, have been registered. If we assume that about 14 per cent. of the children born have died unvaccinated, the proportion of the remainder, *i.e.*, of the population of Leicester under 15 years of age, who have been vaccinated is probably only about 16 or 17 per cent., leaving about 83 or 84 per cent. unvaccinated at the present time.

---

* "The Vaccination Question in the Light of Modern Experience." (H. K. Lewis.)

SCARLET FEVER.

(Table 23.)

(Cases, 577 : Deaths, 5 : Case-mortality, 0·8 per cent : Removed to Hospital, 380.)

The number of fresh cases of scarlet fever notified during the year was 577, against 548. The type of the disease continued very mild, there being 5 deaths, equivalent to a fatality of only 0·8 per cent. After being somewhat prevalent in the Borough for several years, a marked decline set in during the first quarter of 1913 and has continued ever since.

The relative prevalence of the disease during the year 1914 was as follows :—

	Cases.
First Quarter	117
Second Quarter	92
Third Quarter	166
Fourth Quarter	202
First Quarter (1915)	107

PRIMARY AND SECONDARY CASES.

By a "primary" case is meant the first case in any outbreak occurring in a household, subsequent cases being referred to as "secondary." In 1914, out of a total of 577 cases of scarlet fever reported there were 483 "primary" and 94 "secondary" cases.

RETURN CASES.

During the year, 402 scarlet fever patients were discharged from Hospital, and in 13 instances, or 3·2 per cent., the return home was followed within a period of six weeks by a further case. Such cases are usually referred to as "return cases."

DIPHTHERIA.

(Cases, 136 ; Deaths, 19 ; Case Mortality, 13·9.)

Rather fewer cases of Diphtheria were reported than in the preceding three years, but the deaths were the same number as

in 1913, *viz.*, *19*. 110 of the cases, or 81 per cent., were removed to the Borough Isolation Hospital. Particulars of these cases will be found in the Hospital Report.

Antitoxin is supplied free to Medical men for patients unable to pay for it. The number of doses thus distributed in 1914 was 27, given out to 12 Medical men. The supply is kept at the Town Hall.

In all houses were diphtheria occurs the drains are tested with the smoke test. Defects are not infrequently detected, but the escape of gas is nearly always external to the house. It is doubtful whether drain defects have as much to do with the causation of this disease as is often supposed. The mere presence of slight drainage defects is not of much significance as they are found to exist in a great many old houses. Moreover the disease frequently occurs in comparatively new houses where the conditions of the drains is apparently quite satisfactory. The true etiology is still rather obscure. It is known, however, that the virulence of the disease and its power to spread varies greatly from time to time. The fact that the disease has caused comparatively little trouble in Leicester for several years is unfortunately no guarantee that it may not return in a much more virulent form.

TYPHOID OR ENTERIC FEVER.

(Cases, 18; Deaths, 6.)

As the presence of typhoid fever is regarded as, in some sort, an index of sanitary condition, it is satisfactory that the disease has been steadily becoming less and less prevalent in Leicester, and in 1914 the number reported was less than in any previous year.

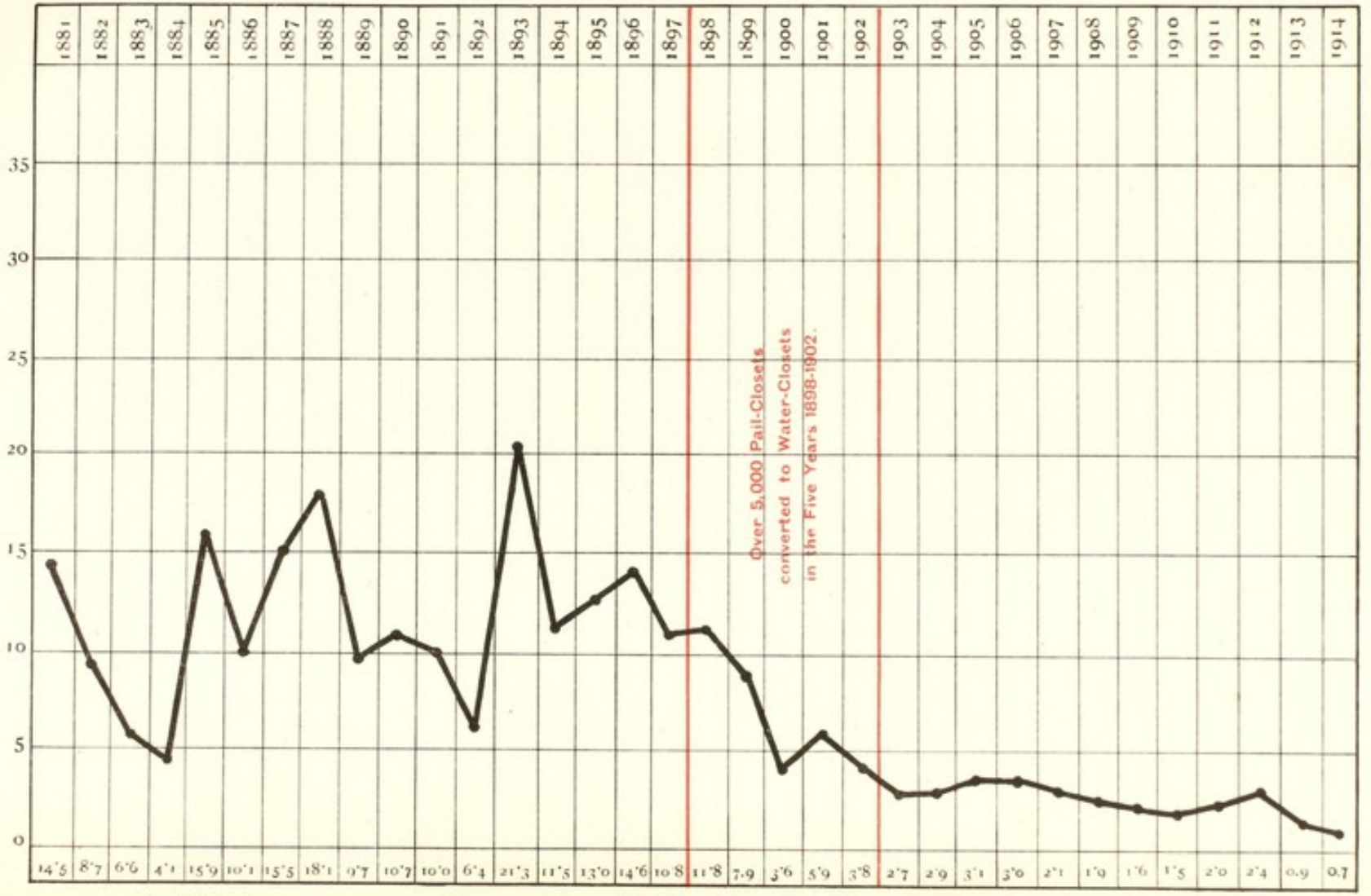
The extent of the decline which has taken place in proportion to population is shown graphically in the adjoining diagram.

It will be observed that there is a remarkable coincidence in time between the onset of the decline and the abolition of pail closets. As the latter was believed, on good grounds, to directly

DIAGRAM II.

ENTERIC FEVER IN LEICESTER.

Notification per 10,000 Population. Showing marked Decrease following Abolition of Pail-Closets.



See Table 27.

Cases were first admitted to the Isolation Hospital in 1901.

encourage the dissemination of bowel diseases, such as typhoid fever and diarrhœa, probably through the medium of house flies, this coincidence is of considerable significance, and it is reasonable to believe that a true causal relationship may exist.

OPHTHALMIA NEONATORUM.

(Inflammation of the eyes of the newly-born.)

The Leicester Corporation included Ophthalmia amongst the list of compulsorily notifiable diseases in September, 1913, and early in the year under review, 1914, the Local Government Board issued an Order making this disease compulsorily notifiable everywhere, thereby superseding the local provision.

Under the Local Government Board Order midwives as well as medical men are obliged to notify. They receive a fee of 1/- for each notification. Medical men receive the same fee as under the Notification Act.

The number of cases notified during the year was 55, 35 being notified by medical men and 20 by midwives.

Every case notified is at once visited by one of the health visitors in order to make sure that the child is receiving proper attention. Frequent repeat visits are made until the termination of the case. In the great majority of the cases it is satisfactory to be able to report that the trouble cleared up without the eye-sight being permanently injured. A number of the cases were of a very slight character, discharge from the eyes only persisting for a few days.

Many, indeed most of the cases reported by midwives were taken to the Royal Infirmary for treatment, as the father did not think fit or was unable to afford to call in a doctor. In such cases a common difficulty is to find some one to take the baby to the Infirmary. It means a daily visit (sometimes twice daily) which occupies two or three hours. The mother, of course, is usually unable to go, being still confined to bed. In a few special cases I have authorised our health visitor to pay a neighbour to take the infant to the Infirmary.

TUBERCULOSIS.

The number of deaths registered from all forms of tuberculosis in 1914 was 361, this number being made up as follows :—

Pulmonary Tuberculosis (including phthisis) ...	273
Abdominal Tuberculosis (tabes mesenterica, tubperitonitis, tubercular enteritis)	15
Cerebral Tuberculosis (hydrocephalus, tubercular meningitis)	39
Other forms of Tuberculosis	34
Total Tubercular deaths	361

The Tuberculosis rate was 155 per 100,000 population.

This is a lower figure than usual. Indeed in only one year previously (1911) has a lower figure ever been recorded, as will be seen by reference to Table 29.

The following figures show the average tuberculosis rate during past years :—

Period.	Rate per 100,000.
1894—1898	173
1899—1903	170
1904—1908	162
1909—1913	161
1914	155

It is apparent, therefore, that whilst progress is much less rapid than one could wish some improvement is taking place.

PHTHISIS.

The above remarks apply to all forms of tuberculosis. If we restrict consideration to the pulmonary form of tuberculosis, otherwise known as phthisis, or "consumption," we find that 273 deaths were ascribed to the disease. This is also a smaller figure than usual, less indeed than has been the case since 1901, when an alteration was made in the method of classification. The *Phthisis-rate* was 117 per 100,000 population.

AGE, SEX AND OCCUPATION.

Of the 273 deaths, 147 were in males and 126 in females. The age distribution and occupation are given in Table 29. As usual a large number of the male deaths, viz., 54, occurred in the shoe trade.

That the shoe trade suffers unduly from phthisis has long been recognised though the cause of this is uncertain. It has commonly been believed that the "finishing" process was the most injurious to health, owing to its dusty character, but statistics appear to show that the clickers and not the finishers suffer most. The Medical Research Committee appointed in connection with National Health Insurance are now carrying out an investigation in the hope of throwing light on this and other points connected with the etiology of this disease. Members of the Committee have paid several visits to Leicester and other centres in pursuit of this investigation.

ADMINISTRATIVE MEASURES FOR DEALING WITH TUBERCULOSIS.

Following the practice adopted last year I have thought it best to deal with the administrative measures for dealing with tuberculosis in the Borough, both for persons insured under the National Insurance Act and for the non-insured in a separate report which will be found in Appendix I. One reason for adopting this course is that a separate report is necessary to present to the Health Insurance Committee, and this obviates the writing of another report.

PART III.

GENERAL.

ADMINISTRATION OF FACTORY AND WORKSHOPS ACT, 1901.

In connection with Factories, Workshops, Workplaces and Home Work.

Report of the Medical Officer of Health for the year 1914 for the County Borough of Leicester.

1.—Inspection of Factories, Workshops and Workplaces.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories	430	121	None
Workshops	1809	123	None
Workplaces ... ... (other than Outworkers premises)	None	None	None
Total	2239	244	None

2.—Defects found in Factories, Workshops and Workplaces.

Particulars. (1)	Number of Defects.			Number of Prosecutions. (5)
	Found. (2)	Remedied (3)	Referred to H.M. Inspector. (4)	
Nuisances under the Public Health Acts:—				
Want of Cleanliness ...	74	67	None	None
Want of Ventilation ...	3	3	,,	,,
Overcrowding	None	None	,,	,,
Other Nuisances	163	131	,,	,,
Sanitary Accommodation Insufficient	26	18	,,	,,
Offences under the Factory and Workshop Act ...	None	None	,,	,,
Total	266	219	None	None

3.—Home Work.

The number of lists received from employers were as follows:

	Twice in the year. Lists.	Outworkers.	Once in the year. Lists.	Outworkers.
Wearing Apparel (making)	66	1374	41	731

The number of addresses of out-workers received from other Councils was 19.

The number of addresses of out-workers forwarded to other Councils was 404.

No notices were served on occupiers as to keeping or sending lists, and there were no prosecutions.

The number of inspections of outworkers' premises was 178. There were no special instances found of out-work being done on unwholesome or infected premises.

4.—Registered Workshops.

The number of workshops on the Register is 887.

5.—Other Matters.

Matters notified to H.M. Inspector of Factories:—

Failure to affix Abstract of Act	1
Action taken in matters referred by H.M. Inspector:—	
Notified by H.M. Inspector	67
Reports sent to Inspector	67
Other	1
Underground Bakehouses in use at end of year ...	2
Certificates granted during the year	None

ADMINISTRATION OF THE MIDWIVES ACT, 1902.

The number of certified midwives practising in the Borough at the end of 1914 was 32. During the year six midwives have started practice in the Borough, and another, Rosetta Smith, has resumed practice after having temporarily retired. On the other hand, five midwives have either died or retired

from practice, one (Miss L. Walker) has accepted the position of Health Visitor under the Corporation, and three have had their names removed from the roll.

The latter had been found guilty of negligence—one for failing to call in medical aid soon enough in case of ante partem hœmorrhage which proved fatal, one for failing to report or advise medical aid in a case of ophthalmia, and the third for giving the parents a certificate that a child was still-born when such was not the case. The cases were investigated by a Sub-Committee of the Sanitary Committee, and a *prima facie* case of negligence having been made out, the facts were brought to the notice of the Central Midwives Board, and the latter, after investigating the charges, decided, in each case, that the midwife's name ought to be removed from the roll.

The number of *Still-births* notified by midwives during the year was 110, and there were 290 notifications of having advised sending for medical help. This is a considerably higher figure than in previous years.

Notification of Births.

The Notification of Births Act came into operation on July 1st, 1914. During the year 2,637 births were notified by midwives and 613 by medical men and by parents. The Act has worked smoothly, and no friction or difficulty has been experienced. It is evident, however, that very many of the births attended by medical men are not being notified.

INFANT AND MATERNITY WELFARE.

The Government Offer of Help.

An event of far-reaching importance, the ultimate consequences of which are calculated to be very great, was the decision of the Government to offer special and direct encouragement to Local Authorities or private societies engaged in infant or maternity welfare work by agreeing to pay one half of all

approved expenditure having for its object the welfare of motherhood and infancy. This offer was made public by two circulars issued simultaneously, one by the Local Government Board and one by the Board of Education. The latter Department of the Government is specially interested in those infant-welfare centres which happen to have been named "Schools for Mothers"; whilst the Local Government Board is specially concerned with those which have been named "Infant Consultations" or "Maternity Centres." In practice, however, it is not always easy to decide *a priori* to which Department to apply for a grant for any particular centre: e.g., a centre may be named a "Mothers' and Babies' Welcome," but the work may be almost identical with that carried on at an adjacent centre which happens to have been labelled a "School for Mothers."

Soon, no doubt, some agreement will be arrived at between the Local Government Board and the Board of Education as to their respective spheres of action, and a reasonable arrangement would be that all work for motherhood and infancy up to the age, say, of three years should come under the Local Government Board, whilst above the age of three years the child should be regarded as coming within the proper sphere of the Board of Education as leading up to the medical inspection of school children.

The Government's offer of help was made immediately before the outbreak of the war, but was apparently quite independent of the latter. At first there was some fear that, in consequence of the terrible financial drain on the country caused by the war, the Government might have to withdraw their offer. It is satisfactory, however, to learn that such a step will probably not be taken, for in view of the appalling sacrifice of the Nation's best lifeblood, efforts to conserve and improve the quality of the rising generation becomes doubly desirable.

What is being done in Leicester.

The Government's offer has caused a very decided impetus to be given to infant and maternity welfare work in Leicester. The work already being carried on has been improved and

extended and fresh schemes are under serious consideration. Three different organisations are engaged, the Leicester Health Society, the Newton Ward Infant Consultation Centre Committee and the Sanitary Committee of the Town Council.

1.—The Leicester Health Society.

This is a voluntary Society which was founded 8 years ago with the object of co-operating with the Sanitary Committee of the Town Council in endeavouring to improve the health of the Borough. From the first the Society directed special efforts towards reducing infant mortality, and in late years its work has been largely confined to this. It employs a whole-time trained Health Visitor (Miss Prior), and has established and is carrying on six Schools for Mothers. Particulars of these will be found in the appended table.

The Society has also engaged a Medical Officer (Dr. Bessie Symington) to attend one afternoon a week to give advice to mothers.

Each school is under the control of a "Superintendent," a lady whose services are purely voluntary, with one or more voluntary helpers. There is also attached to each school a a professional Health Visitor. In three of the schools the Society's own Officer acts, whilst in the remaining three the two Corporation Health Visitors and the Manageress of the Infants' Milk Depôt (Mrs. Stanion) each serve one school.

Schools for Mothers and Infant Consultation Centres.

No.	Situation.	Open.	Superintendent.	Nurse.	Medical Officer.
1	Bedford Street, corner of George Street	Tuesday, 3 to 4.	Mrs. Appleton.	Miss Prior.	Dr. Bessie Symington.
2	St. Barnabas, Morton Road ...	Wednesday, 3 to 4.	Mrs. Leeson.	Mrs. Stanion.	Dr. Marion Archibald, Assist. M.O.H.
3	Belgrave Hall	Thursday, 3 to 4.	Mrs. Buckler.	Miss Prior.	Dr. Bessie Symington.
4	Clarendon Park Adult School, Avenue Road Extension ...	Wednesday, 3 to 4.	Mrs. Partridge.	Miss Prior.	Dr. Marion Archibald, Assist. M.O.H.
5	St. Stephen's Schools, East Park Road	Wednesday, 3 to 4.	Mrs. Eastwood Pickard.	Mrs. Hartshorn.	Dr. Marion Archibald, Assist. M.O.H.
6	Oxford Street Schools ...	Tuesday, 3 to 4.	Mrs. Turner.	Miss Walker.	Dr. Bessie Symington.
7	Newton Ward Centre, 119, High-cross Street	...	Committee of Management.	Miss Mellor.	Dr. G. E. Austin.
8	Corporation Infants' Milk Depot, 217, Belgrave Gate ...	Every day, 9 to 6.	Manageress: Mrs. Stanion.	...	Dr. C. K. Millard, M.O.H.

In connection with the work of the Health Society special reference must be made to the zeal and enthusiasm of the two honorary secretaries, Dr. N. I. Spriggs and Mrs. Cardinal Taylor, and of the Lady Superintendents of the various schools and the devoted ladies associated with them.

2.—The Newton Ward Infant Consultation Centre Committee.

This body was formed about two years ago to carry on an Infant Consultation Centre as a memorial to the late Mrs. H. H. Peach, a special fund being raised for the purpose. It was decided at the outset to confine its operations to one municipal ward, and Newton Ward was selected as having a specially high infant mortality.

The Committee have rented suitable premises in Highcross Street which are open every day, and a whole-time professional Health Visitor (Miss Mellor) has been engaged. A Medical Officer (Dr. Gertrude Austin) has been engaged to attend at the Centre one afternoon a week to give advice to mothers.

The Newton Ward Centre aims at carrying out its work very thoroughly, and in order to be able to do this it has restricted its sphere, as already mentioned, to one ward. It works in close co-operation with the Health Society, with which it is now affiliated, but financially it is quite independent.

3.—The Sanitary Committee of the Town Council.

For many years the Sanitary Committee has employed two whole-time professional Health Visitors, their principal duties being to visit births and give advice to mothers. Eight years ago the Committee established an Infants' Milk Depôt, in charge of a Manageress (Mrs. Stanion) with one assistant. In connection with the Milk Depôt an Infants' Consultation is held on two afternoons a week, at which the Medical Officer of Health or one of the Assistant M.O.H.'s attends and gives advice.

Recently, the Sanitary Committee, in order to co-operate with and assist the Health Society, has agreed to lend the

services of the two Health Visitors and of the Manageress at the Milk Depôt, and, as already stated, each of these three officials assists at one of the Health Society's schools. This arrangement appears to be answering very well.

The Committee helps the Health Society financially by means of an annual grant. For several years this has amounted to £25, but in future it is proposed to increase this amount. The Committee is also paying for the use of the rooms (an afternoon a week) in the case of two of the schools, and has agreed to provide such medical requisites as may be required in connection with the Infant Consultations carried on at the various schools.

It has also been arranged that one of the Assistant M.O.H.'s who has just been appointed (Dr. Marion Archibald) shall attend at certain of the Health Society's schools to give advice to mothers.

Future Developments.

It is hoped before long that further Infant Welfare Centres will be started in the Borough, there being still several important working-class districts not yet provided for. On the map at the end of this Report the positions of the various existing Centres is indicated by a red spot.

There is a strong feeling that it would materially help to strengthen and co-ordinate the work that is being carried on at the various Centres if permanent central premises could be secured to be open every day. At this Centre, one or other of the medical officers at present being employed, would be in attendance to give advice not only with regard to infants but also to mothers and expectant mothers. These central premises should be of a more roomy and capacious character than any of the existing Centres, and it would probably be advantageous if the Corporation Infants' Milk Depôt in Belgrave Gate, which at present is rather far from the centre of the town, were transferred to the new premises. In addition to the mutual advantage of such a combination, substantial economies could be effected in the matter of rent, rates and upkeep.

One immediate difficulty in the way of the realisation of such a scheme as this is that suitable premises have not yet been discovered. In the meantime, however, good work is being accomplished and experience is accumulating.

DISINFECTION.

Steam Disinfecting Station.—This is situated at the Mill Lane Destructor, being supplied with steam from the latter. During the year the following articles of bedding, clothing, etc., from 146 houses were removed to the Station and disinfected, viz.:—

Mattresses	26
Beds	201
Pillows and Bolsters	581
Blankets...	217
Counterpanes	94
Other articles	42
	1161

The nature of the infection on account of which the above articles were disinfected was:—

Scarlet Fever (nursed at home)	4 instances.
Enteric Fever	9 „
Phthisis (chiefly fatal cases) ..	132 „

The number of houses or parts of houses disinfected after infectious disease was 1186, the greater part of this number being on account of tuberculosis. It is the practice to disinfect wherever there has been a death from tuberculosis or when a patient changes his address (if this fact is notified to the Health Department), or when a patient is removed to Hospital, if the necessary permission can be obtained.

SMOKE PREVENTION.

Smoke observations are made by the inspectors systematically, and whenever the amount of black smoke observed reaches a certain limit an informal caution is sent to the firm whose chimney has been at fault. In the great majority of

instances this is found to be sufficient. If, however, the offence is repeated, the offender is requested to appear before the Sanitary Committee and give any explanation he may have.

During the year 2185 observations were made, 32 cautions were issued from the Sanitary Office, and 4 by the Town Clerk. In one case the manager and stoker appeared before the Sanitary Committee and were cautioned. There were no prosecutions.

It is a most important matter for the health and comfort of the inhabitants that the atmosphere of a large town should be kept as pure as is reasonably possible. Experience shows, so far at least as our town is concerned, that smoke nuisances are chiefly due to carelessness in stoking.

ATMOSPHERIC POLLUTION.

A National Committee has been formed for the prevention of atmospheric pollution, and at their instigation a number of local authorities are now keeping systematic records of atmospheric pollution in their own towns. Your Committee agreed to join in this praiseworthy effort, and the special standard apparatus devised by the National Committee was obtained. This apparatus is virtually a greatly enlarged rain gauge. It is fixed in some open space as near the centre of a town as possible, and the rain which falls, carrying with it the impurities in the atmosphere, is collected in large bottles beneath the receiver. These bottles are removed once a month for analysis, empty bottles being substituted.

Considerable difficulty was experienced in finding a suitable position in which to fix the apparatus, as it has to be at the ground level and in a place safe from interference. Ultimately Messrs. N. Corah and Sons were approached by the Borough Surveyor and Medical Officer of Health and they readily gave consent for the apparatus to be fixed in the open space in front of St. Margaret's Works.

As the apparatus has only recently been fixed I am not yet able to give any report as to results.

Your Committee have agreed to make an annual subscription of £2 2s. to the National Committee towards their expenses in conducting the work that is being done in different towns.

HOUSING OF THE WORKING CLASSES.

During 1914 (prior to the war) the campaign for improving old and poor class cottage property was actively continued. The number of houses dealt with, shown below, only gives a very inadequate idea of the extent and thorough character of the work carried out. As mentioned in the last report action is taken in Leicester either under the Housing and Town Planning Act or under the Leicester Improvement Act, 1868; the procedure under the latter being more simple, but not giving the same powers as regards demolition as the former. Whenever it is thought likely, therefore, that a house is beyond repair and will need to be pulled down action is taken under the Housing and Town Planning Act.

Chief Inspector Braley has continued to give the closest personal attention to this important work, but owing to the great increase in the work it was decided to give him some special assistance.

An additional inspector (Mr. W. C. Long) was therefore appointed, his duties including those of factories and workshops inspection, in addition to assisting Chief Inspector Braley in supervising the repairs of old cottage property condemned by the Medical Officer of Health.

The following statement shows the number of houses dealt with during 1914:—

Number of dwelling houses inspected under and for the purpose of Section 17 of the Housing, Town Planning, etc., Act, 1909	12,019
Number of dwelling houses which on inspection were considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	188

Number of representations made to the local authority with a view to the making of Closing Orders ...		188
Number of Closing Orders actually made—		
Housing and Town Planning Act ...	28	48
Local Act	20	
Number of dwelling houses the defects in which were remedied without the making of Closing Orders		90
Number of dwelling houses which after the making of Closing Orders were put into a fit state for human habitation		29
General character of the defects found to exist		general dilapidation and want of repairs.
Number of dwelling houses in which repairs are in hand		10

Extract from first Quarterly Report of Mr. W. C. Long, special Housing and Workshops and Factories Inspector, the period covered being four months.

I have the honour to herewith present to you a report concerning the nature of the work at present being done under the Leicester Improvement, and Housing and Town Planning Acts.

At the present time works of renovation are being carried out at the following properties:—8 to 18 Rudkin Street; 2, 4 and 6 Upper George Street; 127, 129 and 131 Bedford Street; 79½ to 89 Bedford Street; 22 to 26 Lower Grove Street; 13 to 23 Grosvenor Street; 2 to 6 Grove Street; 5 to 9 Lower Grove Street; 10 to 20 and Court B, Friday Street; 4 to 18 Cardinal Street; 245 Belgrave Gate; 22 to 26 Carley Street; 10 to 16 Bonners Lane; 12 to 18 Osborne Street.

Repairs have been completed at the following properties:—11 to 23 George Street; 8 to 12 Upper George Street; 3 to 9 Metcalf Street; 33 to 43 Metcalf Street; 6 and 8 Green Street; Court A, Abbey Street; 26 to 36 Benford Street.

The improvements are as follows:—

Walls.—Dampness is remedied by the insertion of blue bricks bedded in cement mortar in all outer walls, and in party walls where deemed necessary. Bulging and dangerous brickwork is taken down and rebuilt. Perished bricks are cut out and where necessary the walls are repointed in cement mortar.

Roofs.—The roofs are carefully examined, and in some cases stripped and reslated, according to their general condition. The sufficiency and condition of spouting and fallpipes also receive attention, and where necessary remedies or renewals made.

Windows, Doors and General Woodwork.—All woodwork receives careful attention. Windows and doors where very defective, are replaced with new ones, but if in fair condition they are repaired. New door steps and window sills of blue brick, stone or concrete, are required where they are defective or non-existent. In cases of insufficient light or ventilation extra windows and ventilators are inserted. Cross ventilation is always secured where conditions allow. Where unsightly black brickwork fills the space over front doors, this is taken out and a glazed fanlight inserted, which gives additional light and enhances the appearance of both the house and room. Defective staircases are either renewed or made safe and sound. Skirting boards are only asked for in livingrooms and rooms with boarded floors. Cupboards for the storage of food is a matter to which special attention is given. Ample accommodation is aimed at with efficient ventilation from the outer air. Proper and suitable fittings are provided to all cupboards and doors.

Plaster.—All loose, defective or bulging plaster on walls and ceilings is hacked off and replaced with good stuff and worked to a smooth face. Where replastering is required close to floors, this is done with sand and cement for hard usage and to prevent the harbouring of vermin.

Floors.—Floors are repaired or renewed according to their condition, good hard-burnt quarries being used. These are bedded in cement mortar on a layer of clean dry ashes, and afterwards grouted in with cement. Defective yard paving is repaired or renewed either with blue bricks or concrete with sufficient gulley traps to take off surface water.

Closet Accommodation.—All closets are put in a state of good repair. Insufficiency is remedied by the provision of one W.C. to every two houses. Where closet basins are entirely enclosed with fixed casings, these casings are abolished and the closet basin surrounded with brickwork to a height of about nine inches and provided with a sloping top. Bearers are built into the brickwork and support a lift-up seat. The lift-up seat does away with any need for urinals. A closet of this type can be cleansed with the minimum of trouble and provides no lodgment for offensive matter.

Washing Coppers, Sinks, &c.—Washing coppers are asked for in all houses comprising two or more rooms on the ground floor, or where there is a scullery. Sinks, with water taps over them and proper traps and drain connections, are provided wherever suitable accommodation is available. Convenient facilities for cleaning are an incentive for the tenant to be clean. Fire-ranges with oven and boiler are provided in all houses. In cases where ranges exist in both front and back living rooms, the backroom range is abolished and the fire-place arranged so as to hold the gas cooker and the flue utilized to carry off the fumes. All sculleries are provided with ample shelf accommodation.

Painting and Decorating.—All living rooms and front bedrooms are papered. Back bedrooms are distempered and all ceilings are limewashed. All internal woodwork is painted a suitable colour in two coats. Front doors are in nearly all cases grained and twice varnished, and window casements painted white inside and out. All old wallpapers are stripped off and old paint burnt off.

Large Yards and Courts.—Where yards and courts are common to a number of houses the owners of the property are induced, if possible, to divide the yards by partition walls and fence off portions of the ground for gardens. By this means more privacy is obtained and tenants take a deeper interest in keeping the rear of their houses in better order.

During the progress of the above alterations I visit the properties daily to see that proper materials are being used and

the work done in a proper manner. In cases where unforeseen difficulties arise or additional opinion is required I consult with Mr. Braley, your Chief Inspector. Since taking up my duties 3609 visits have been paid. (End of quotation from Inspector's Report.)

WATER SUPPLY.

The water supply of the Borough is derived from two sources.

(*a*) Upland surface water from the Charnwood Forest collected in three impounding reservoirs; only two of these are being used at the present time. This is the original source of supply. It contains some spring water and is only moderately soft.

(*b*) Upland surface water supplied by the Derwent Valley Water Board. This source of supply became available in 1912. This water is organically pure and extremely soft. It has a slight brownish tint due to its peaty origin.

The history of this great water supply undertaking is too lengthy to be inserted here. The Derwent Water Board is composed of representatives of the towns of Sheffield, Nottingham, Leicester and Derby, these towns sharing the water and the expense between them in certain fixed proportions.

SEWAGE DISPOSAL.*

The sewage of the Borough of Leicester was first pumped up to Beaumont Leys Farm in the year 1890.

The total lift is nearly 170 feet above the outfall sewer.

The Belgrave Sewage Farm was abolished and the sewage from the Belgrave district first pumped to Beaumont Leys Farm in 1905.

The total lift in this case is 175 feet above the outfall sewer.

The total dry weather flow is about nine million gallons per day.

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* The facts relating to Sewage Disposal have been kindly supplied by Mr. E. G. Mawbey, M.Inst. C.E., Borough Engineer.

On reaching the Beaumont Leys Sewage Farm, the whole of the sewage is subjected to preliminary bacterial treatment for clarification before final purification on the land.

It is first passed through subsidence tanks, and then treated in first-contact bacterial beds, which cover an area of about twelve acres.

After this preliminary bacterial purification, the sewage is finally purified by broad irrigation over about 1,350 acres of land, which consists largely of old pasture and rye grass.

The final effluent from the land is discharged partly into the River Soar, within the Borough, and partly into the Rothley Brook on the Anstey side of the farm, which also eventually discharges into the River Soar.

The total area of the farm is 1,710 acres. The portion not available for sewage is used for grazing when it is not convenient for the bullocks to be upon the sewage area.

PUBLIC BATHS:

There are five public baths in Leicester, viz., Bath Lane, Vestry Street, Cossington Street (Belgrave), Spence Street (West Humberstone), and Knighton Fields Road (Aylestone). The last named was opened in 1910, and differs from the others in being provided with a patent purification plant whereby the water is continuously being strained, filtered and aerated (except when the pump is not working). The degree of purification effected is very remarkable.

PUBLIC CONVENIENCES.

During the year your Committee have provided a fine new public convenience for men in the Market Place, on a site adjoining the Retail Fish Market. The accommodation provided is 20 stalls, 4 w.c.'s and a "wash and brush up" lavatory. It is regarded as one of the best public conveniences as yet provided, and undoubtedly it fills a long-felt want both as regards the Market Place and also the Town Hall Square, access from which

is obtained from an entrance in Horsefair Street. The number of men who avail themselves of it, especially on Market Days, is very great.

FOOD INSPECTION.

The Corporation employs two special Food Inspectors, whose whole time is devoted to the inspection of meat and other foods, and of premises where food is manufactured or prepared for sale, including cowsheds and dairies.

A special report prepared by Inspector Tyldesley upon the year's work is appended (Appendix VI).

A diagramatic record is now kept of each carcase condemned on account of tuberculosis, showing as far as possible the exact distribution of the disease and the organs and glands affected.

Towards the end of the year one of the Food Inspectors, Mr. Sowerbutts, obtained a commission in the Army Service Corps, and was appointed Purchasing Supply Officer and attached to the North Midland Division. He has since gone to the front. His work is being carried on by Mr. Tyldesley, assisted by the District Inspectors and Mr. Long.

Condemned Meat House.

The building of the new public convenience in the Market Place necessitated a new situation being found for the Condemned Meat House. Fortunately, one was found close by, with access from the Retail Fish Market. A satisfactory Meat House was built by the Borough Surveyor, better indeed than the old one and equally convenient as regards position.

SLAUGHTER HOUSES.

In addition to private slaughter houses, of which there are 66 in different parts of the Borough, Leicester possesses a Corporation Abbattoir, situate on the Aylestone Road, comprising eighteen slaughter houses. Twelve of these were erected about thirty years ago, and the other six in 1896. Seventeen are let to

private tenants, some of whom sub-let to others; whilst only one is reserved for casual slaughtering. The rent received amounts to between £300 and £400. The approximate number of animals slaughtered annually is—beasts, 4,500; sheep, 10,000; pigs, 15,000. Both the private slaughter houses and those belonging to the Corporation have been repeatedly visited during the year by the Meat Inspectors.

PUBLIC HEALTH MILK AND CREAM REGULATIONS, 1912.

These Regulations prohibit the addition of any preservative substance to milk. As regards cream they prohibit the addition of (*a*) any thickening substance; (*b*) any preservative substance to cream containing less than 35 per cent. of fat; and (*c*) to cream containing 35 per cent. of fat any preservative substance other than (1) boric acid or borax (2) hydrogen peroxide.

The Regulations also provide that every receptacle containing preserved cream intended for sale shall have affixed to it a label stating that the cream is preserved and contains boric acid or peroxide as the case may be, and in the former case the amount of boric acid.

During the year samples of milk have been examined by the Public Analyst from time to time for preservatives, but in no case was preservatives found. The number of samples so examined was 97. As regards cream, from time to time steps have been taken to see that the regulations have been carried out as regards labelling, and no offences were discovered.

THE WORKMEN'S COMPENSATION ACT, 1907.

During the year 1914, 36 cases of accident or injury to Corporation employees were referred to the Medical Officer of Health for examination and report. Many of these cases had to be seen more than once, the total number of examinations or interviews being 76, whilst the number of reports was 38.

CREMATION.

The Leicester Crematorium was opened by the Corporation in 1902. It is situated at the Gilroes Cemetery, Groby Road, and constitutes an annexe to one of the two cemetery chapels.

The number of cremations performed in 1914 was only 7. The Crematorium, however, which was closed for alterations in 1913 was only available for use during the latter half of 1914. The furnace has been entirely reconstructed on an improved principle, and the chimney has been raised.

Amongst the cremations during the year may be mentioned that of General the Hon. S. S. Burdett, at one time Commander-in-Chief of the United States Army, who died in "the Manse," Sutton-in-the-Elms, Leicestershire, the house in which he was born. After cremation his ashes were sent back to America.

APPENDIX I.

BOROUGH OF LEICESTER.

TREATMENT OF TUBERCULOSIS

DURING THE YEAR 1914.

Reports of the Medical Officers.

I.—GENERAL REPORT OF SCHEME FOR DEALING WITH TUBERCULOSIS IN LEICESTER.

By C. K. MILLARD, M.D., D.Sc.,

Medical Officer of Health and Chief Administrative Tuberculosis Officer.

II.—REPORT OF THE WORK OF THE TUBERCULOSIS DISPENSARY.

By W. S. THOMSON, M.D., D.P.H.,

Assistant Medical Officer of Health, Medical Officer at the Dispensary.

III.—REPORT ON THE WORK OF THE SANATORIUM.

By WILLIAM JOHNSTONE, M.D., D.P.H.,

Resident Medical Officer at the Sanatorium.

I.

GENERAL REPORT ON SCHEME FOR DEALING WITH TUBERCULOSIS IN LEICESTER.

By C. K. MILLARD, M.D., D.Sc.,

Medical Officer of Health and Chief Administrative Tuberculosis Officer.

I have pleasure in presenting the annual report of the Leicester scheme for dealing with tuberculosis. This is the second complete report since the National Insurance Act placed the subject of tuberculosis on the new footing.

Speaking generally, the same lines have been followed as in last year's report: Dr. Thomson is reporting on the work at the Tuberculosis Dispensary; Dr. Johnstone deals with the work at the Sanatorium; whilst I am making some general observations on the work as a whole.

In Leicester, as in most other towns, the Town Council, through the Sanitary Committee, provide institutional treatment for both insured and non-insured patients, being paid for the former cases by the Borough Insurance Committee.

The agreement* which has now been come to provides that the Insurance Committee shall pay the Corporation at the rate of 7½d. per head per insured person in the Borough, and in return the Corporation shall (*a*) provide a Tuberculosis Dispensary at which insured persons suffering from or suspected of

* The agreement in operation during 1914 was that a sum of £2750 should be paid and 36 beds be reserved at the Sanatorium, in addition to provision of a Tuberculosis Dispensary.

suffering from tuberculosis can be examined and treated; (*b*) provide a Sanatorium at which 45 beds shall be reserved for the treatment of cases of tuberculosis in insured persons recommended by the Insurance Committee; and (*c*) shall allow the Medical Officer of Health, as Chief Administrative Tuberculosis Officer, to act as Medical Adviser as regards tuberculosis to the Insurance Committee.

PRACTICAL WORKING OF THE SCHEME.

In practice the scheme works as follows:—Medical practitioners notify to the Medical Officer of Health all cases of tuberculosis occurring in their practice. The notifications received are dealt with at the Tuberculosis Dispensary, which is the centre for all tuberculosis work in the Borough. The cases are visited in the course of a day or two by one of the two special tuberculosis nurses attached to the Dispensary, particulars taken, and advice given according to the circumstances of the case.

In most cases if institutional treatment is desired the patient is advised to attend at the Dispensary, and he is then examined by one of the two Medical Officers. In special cases, a Medical Officer visits the patient in his home. When the case is considered a suitable one for institutional treatment, he is requested to again visit the Dispensary to be interviewed by the Medical Officer of Health, who makes the final decision as to whether or not the patient shall be recommended for admission to the Sanatorium. In arriving at this decision, various factors have to be taken into consideration—the patient's condition and prospect of recovering, home conditions and surroundings, and the amount of accommodation available at the Sanatorium. In the case of insured persons, the names are subsequently submitted to the Insurance Committee at the fortnightly meeting.

In addition to the cases recommended for treatment at the Sanatorium, a certain number are taken on for treatment at the Dispensary. Moreover, many patients continue to attend the Dispensary after leaving the Sanatorium.

SELECTION OF CASES.

During the year, 1914, under review, *i.e.*, prior to the opening of the new Sanatorium buildings, the number of beds available was not sufficient to deal with all the cases applying for treatment, and a careful selection had to be made. Also, it not infrequently happened that patients were kept waiting for admission much longer than was desirable With the increased accommodation now available it is hoped that this difficulty will not occur, or at least not to the same extent.

So long as there is insufficient accommodation to enable all cases to have the benefit of sanatorium treatment it is necessary either to restrict the number of cases recommended for admission or to curtail the period of stay. In practice it is best to adopt both methods, refusing those cases little likely to benefit, and curtailing the stay of those found not to be deriving so much benefit as others.

There are, however, certain cases which, though altogether too advanced to offer prospects of permanent benefit, yet owing to poor home circumstances, large families, &c., cannot be properly attended to at home. It is in the public interest that these cases should be removed to some institution, and it is undesirable to force them to apply to the Guardians for admission to the Poor Law Infirmary. These cases we usually refer to as "hospital" cases, and it is to accommodate such that the new "hospital" block at the Sanatorium is being provided.

THE NEW SANATORIUM.

The most noteworthy event of the year as regards the subject under consideration was the erection of the new Sanatorium buildings. After careful consideration of alternative sites it was decided that the best course was to build on land immediately adjoining the Isolation Hospital, Groby Road, where tuberculosis cases had been successfully treated for many years.

Site.—The site selected consists of a field of pasture, seven acres in extent, slightly higher than the Isolation Hospital site,

facing south and with a considerable slope. The prospect is particularly pleasing and it is certainly fortunate that such a good site happened to be available, the property of the Corporation. Being so conveniently close to the Isolation Hospital it was decided that a separate administrative block was unnecessary, and in this way a considerable saving in initial outlay was effected, whilst the cost of administration will certainly come out less than would be the case in an entirely separate institution.

Plan.—The architect selected was Mr. A. H. Hind. The plan decided upon, and ultimately approved, after certain modifications, by the Local Government Board, was similar in general design to that issued as a model by the Board. It consists of two elongated single-story wings, one for either sex, each divided into ten double-bedded rooms, and separated by a dining room, at the rear of which are a small kitchen, or "servery," and other offices. The lavatories and the bath-rooms are in the centre of each wing, with other offices immediately in the rear. The bedrooms open, back and front, upon verandahs, that in front (towards the south) being much the wider and having a glazed roof. To the rear of each wing are four single-bedded sleeping shelters which increase the accommodation to 48.

In addition to this building—the "Sanatorium" block—a second building, the "Hospital" block, has been provided for patients more seriously ill and requiring nursing. The "Hospital" block will accommodate 24 patients, 12 of either sex.

Altogether, therefore, the new buildings will provide accommodation for 72 patients.

It is quite certain that this number of beds will be in no way excessive if a serious effort is to be made to provide institutional treatment for all tuberculosis patients in Leicester who require it. Indeed, it is possible that it may scarcely be sufficient. Under normal circumstances, however, it will usually be feasable to supplement the accommodation provided by the new buildings by the buildings hitherto used for the treatment of consumption.

and which, judging by past experience, will very rarely, if ever, be required for the isolation of ordinary infectious disease.

Moreover, in the opinion of many authorities the isolation of advanced cases of tuberculosis is of more importance from the point of view of disease prevention and the good of the community than is the isolation of such a disease as scarlet fever. Certainly there is no comparison between the seriousness of these diseases or of the mortality caused by them.

GOVERNMENT GRANT.

In considering the cost of treating a large proportion of tubercular cases, the fact should be borne in mind that in addition to the amount contributed by the Insurance Committee the Government will contribute one half the net cost incurred by the Corporation after deducting this amount.

It is therefore clearly to the advantage of the rate-payers of Leicester that cases of tuberculosis should be treated by the Corporation rather than by the Board of Guardians, as the latter body does not obtain this Government assistance.

TREATMENT OF TUBERCULOSIS IN CHILDREN.

Cases of tuberculosis in childhood are being treated by the Corporation in the Anstey Lane Hospital. Although this hospital is primarily intended for smallpox, there is no sufficient reason why it should not be used for tuberculosis during the long intervals when it is not required for smallpox. The Local Government Board has consented to its being thus used provided that all tuberculosis patients are at once sent home or dealt with elsewhere should a case of smallpox at any time occur. It may be mentioned that one block is not used, but is held in reserve in view of the possibility of a case of smallpox unexpectedly occurring.

NON-PULMONARY TUBERCULOSIS.

Hitherto no definite provision has been made by the Corporation for dealing with non-pulmonary tuberculosis, *i.e.*

tuberculosis of other parts of the body than the lungs. A few cases of glandular tuberculosis and one of tuberculosis of the spine have been treated, including two or three cases after tubercular glands had been removed by operation at the Royal Infirmary.

PREVENTION.

Although the new arrangements which have been made practicable through the provisions of the National Insurance Act are principally concerned with the treatment of the disease both in institutions and otherwise, the prevention of the disease is after all the ideal which should be aimed at. It is true that to some extent prevention and treatment go hand in hand, and as mentioned above, the treatment of advanced cases especially will, it is believed on good authority, have a real influence upon the spread of the disease. Moreover, wherever the disease can be permanently arrested and thereby prevented from reaching an advanced stage, corresponding advantage will accrue.

Apart from treatment, attention must be given to all conditions, whether in the factory, workshop or the home, calculated to have a predisposing influence upon the development of the disease. The inculcation of fresh air principles is certainly very important, and there is good reason to believe that the steps that have been taken in recent years by means of posters, lectures, handbills, etc., together with the splendid object lesson afforded by open-air treatment in Sanatoria, are having considerable effect in creating a healthy public opinion on these matters. Experience shows that it is extremely difficult to secure proper ventilation in factories, public buildings, public conveyances, etc., unless strong public opinion exists in favour of fresh air.

C. KILLICK MILLARD,

Medical Officer of Health.

II.

REPORT

ON THE

TUBERCULOSIS DISPENSARY

For the Year 1914.

By WYVILLE S. THOMSON, M.D., D.P.H., Edin.

Senior Medical Officer.

TUBERCULOSIS DISPENSARY.

The Leicester Municipal Tuberculosis Dispensary was opened on the 14th October, 1911. The premises, which belong to the Corporation, are situated in St. Nicholas Square. This is near the centre of the town, being about five minutes' walk from the Clock Tower and is on the route of the Narborough Road, Fosse Road and Western Park cars.

When first opened only the ground floor was required, the front room, which is a large one, being used as a waiting room, with parts partitioned off for dressing rooms; and the back room was converted into a consulting room. The room behind this was used as a dispensary for the drugs. The staff at this time consisted of one Medical Officer, one nurse, and male attendant. Even with this limited staff and accommodation the results of the work proved very encouraging; but as the number of patients rapidly increased, it was soon found that to do the work efficiently, an increased staff and more accommodation were necessary. When the Insurance Act came into force, with the offer of a Government Grant towards the cost of providing dispensaries, the Sanitary Committee decided to have the remaining rooms of the building renovated and re-decorated. The rooms of the ground floor were considerably altered and improved, and used for the same purpose as before. Those of

the second floor were utilised as waiting room, consulting room and office, and the two rooms on the top floor were fitted up as laboratory and retiring room. Lavatory accommodation was provided, and two large gates were erected at the entrance at the side of the Dispensary in order to shut out the noise of the front street from the consulting rooms. A second Medical Officer and nurse, and also a clerk, were appointed, so that the staff was raised to two Medical Officers, two nurses, clerk and male attendant. During the year under discussion no further changes have been made.

HOURS OF ATTENDANCE.

The Dispensary is open for the treatment of patients on Mondays, Tuesdays, Thursdays and Fridays, from 10 till 1, and from 6 till 8 in the evening for those who are at work.

New patients are seen every afternoon (except Saturday) between 3 and 5.

(It is important to note that new patients, under medical attendance, desiring to be examined at the Dispensary, should bring a letter or card from their doctor, unless the case has been recently reported.)

MODE OF PROCEDURE WITH NOTIFIED CASES.

Every case notified as suffering from pulmonary tuberculosis is visited by a nurse from the Dispensary who takes notes about the patient's condition, and whether he desires Sanatorium or Dispensary treatment, also the names of contacts and whether it is desired to have these contacts examined.

At the same time the house is inspected and the nurse advises that the patient should sleep alone in the bedroom, wherever this is possible, and that the windows be kept well open both by day and night. Advice, both verbal and printed, is given regarding the spread of the disease, and the necessity for care in the disposal of the sputum. Every patient requiring it is supplied with a pocket sputum flask.

On this report being referred to the Medical Officer, a time is arranged for the patient to come to the Dispensary to be examined. If the house has been found to be damp, or in an insanitary condition, this is reported to the Sanitary Inspector.

When the patient calls at the Dispensary, he is first seen by the nurse, who takes the "history" of the case.

While the patient is undressing preparatory to examination, the "history" is considered by the Medical Officer. The patient is then shown into the consulting room and examined by the Medical Officer, a written record of the patient's condition being made.

If there is any doubt as to the diagnosis, a specimen of sputum is obtained, if possible, for examination for tubercle bacilli.

Occasionally, when physical signs are suggestive though not definite, and no tubercle bacilli have been found in the sputum, a test dose of tuberculin is given. Before doing this the nurse teaches the patient how to take the temperature, and supplies him with a thermometer and chart.

If confined to bed or too ill to visit the Dispensary, one of the Medical Officers calls and examines the patient at home.

All patients are advised as to treatment. The majority are sent in the first instance to Groby Road Sanatorium, and when discharged from this institution, suitable cases are "taken on" at the Dispensary. Some may be advised to have Dispensary treatment without going to the Sanatorium. Others are recommended to remain under their own doctor.

When a patient commences treatment at the Dispensary, he is supplied with a chart on which to record his temperature morning and evening. A time is fixed for his attendance at the Dispensary, and by keeping to the time appointed, tedious waiting and crowding in the waiting room are avoided.

For the convenience of Insured Patients, the special forms required to be filled up under the Insurance Act are kept at

the Dispensary. This saves the patient the trouble of calling at the offices of the Insurance Committee.

The following table gives the number of examinations made by the Medical Officers during the year:—

FIRST EXAMINATIONS.		RE-EXAMINATIONS.	
Men	260	Men	145
Women	223	Women	207
Children	106	Children	247
Total ...	589*	Total ...	599*

This gives a total of 1188 examinations, as compared with 1061 in 1913.

The 589 primary examinations are made up as follows:—

(*a*) First examination of notified cases.

(*b*) Patients sent by medical men for diagnosis.

(*c*) Patients, not under a medical man, calling for advice on their own initiative.

DISPENSARY A "CENTRE OF DIAGNOSIS."

The value of the Dispensary as a centre of diagnosis is being more and more appreciated by medical men in town, quite apart from the general public.

During the first year of its existence, comparatively few cases were sent for an opinion, but during the past year 174 cases were sent by doctors for diagnosis. This number is rapidly increasing, and recently as many as ten cases have been sent in one week by doctors who required our assistance in arriving at a definite conclusion.

At the Dispensary the diagnosis is arrived at by the Medical Officers by (1) a consideration of the "history," etc., (2) result of physical examinations of the chest, (3) result of examination of

* These numbers do not include examinations of contacts.

sputum, and (4) where specially indicated, and when other means have failed to reveal the true nature of the trouble, by the tuberculin test.

NEED FOR X RAY APPARATUS.

There is one other method of arriving at a diagnosis which is in use in several Dispensaries, namely, X Rays; but unfortunately we do not possess the necessary apparatus. Were this obtained it would undoubtedly prove of additional value as a means of arriving at a definite diagnosis in obscure cases.

EXAMINATION OF CONTACTS.

In all cases where it is desired, arrangements are made for the examination of contacts, provided they are not already under medical attendance. As in 1913, this still forms an important part of the work of the Dispensary.

By a careful examination of contacts, many cases are discovered in an early stage of the disease and means taken for their care and treatment.

In June, 1913, the Sanitary Committee decided to admit tuberculous children to the Borough Sanatorium, and some thirty beds were granted for this purpose. Towards the end of 1913, however, owing to an increase in the number of scarlet fever cases, it was found necessary to transfer the children to the Anstey Lane Hospital, which is now used as a children's sanatorium. Some fifty beds are now available. This provision has been found of very great value.

PRIMARY EXAMINATION OF CONTACTS.

During the year under discussion, 531 primary examinations of contacts have been made, and 145 re-examinations in suspicious cases—a total of 676, as compared with 341 during last year.

As will be seen from the following table, the great majority of contacts examined are children.

Men.	Women.	Children.	Total.
27	45	459	531

Of these, 31 were found to be definitely phthisical, 165 were suspicious, and 335 were negative.

RE-EXAMINATION OF SUSPICIOUS CASES.

Re-examinations to the number of 145 have been made of the suspicious cases, with the following results:—

Men.	Women.	Children	Total.
3	18	124	145.

Of these, 27 proved to be definitely phthisical, 30 are still considered suspicious and are under observation, and 88 proved negative.

VISITS.

The following table shows the number of visits paid by the Dispensary nurses and Medical Officers, compared with those paid during 1913,

		First Visit.	Re-visit.	Total.
Nurses.	1913	970	694	1664
	1914	1031	1766	2797
Medical Officers.	1913	214	45	259
	1914	241	72	313

The 1031 primary visits paid by the nurses have been, in the majority of instances, to persons notified as suffering from pulmonary tuberculosis. The number of such notifications has again been so high that it has not been found possible to visit every non-pulmonary case notified (gland, joint, etc.) However, whenever time has permitted, visits have been paid to these cases, and advice, verbal and printed, has been given.

Some of the 1766 re-visits made by the nurses have been to patients who have ceased attending the Dispensary, in order to find out the reason of their absence. Others were made to homes which, though not bad enough to report to the Sanitary Inspector, had been found at a previous visit to be in a dirty condition, and to see whether the instructions given were being followed. A considerable number too, were to patients who had

failed to return the "Report Forms" (relating to their condition and progress after discharge) which were sent out in the early part of the year.

The Senior Medical Officer, accompanied by the Chief Sanitary Inspector, has paid several visits to Factories to see that efficient ventilation is being maintained in the workrooms.

CONDITION OF HOMES.

As previously stated, the nurse at the time of her first visit inspects the home. Particulars are taken as to the number of bedrooms in the house and the number of occupants (adults and children) in order to judge whether there be overcrowding, also whether the patient sleeps alone in bed, or alone in bedroom. The general aspect is noted—whether it is clean, damp, dirty or close, and whether the windows are kept open (*a*) by day and (*b*) by night. The probable financial condition is also recorded (i.e., whether in poverty, poor circumstances, or comfort), and whether married or single.

The following table, though it must not be regarded as being absolutely correct, has been drawn up in order to give an idea of the home conditions.

TABLE 1.

Home Conditions.

Number of Bedrooms	5 or more.	4	3	2	1	Total.
Number of Houses	21	49	486	142	32	730
Clean	19	42	349	94	16	520
Untidy	2	5	75	32	9	123
Dirty	0	2	62	16	7	87
Bedroom windows open day and night ...	15	40	331	91	19	496
„ „ „ day only ...	4	7	88	31	8	138
„ „ closed day and night ...	2	2	67	20	5	96
Patient sleeps alone in room	8	11	108	22	0	149
„ „ alone in bed, not in room ..	10	19	70	15	3	117
„ does not sleep alone in bed ...	3	19	308	105	29	464
Appears in prosperous circumstances ...	0	2	4	2	0	8
„ „ comfortable circumstances ...	15	26	218	33	2	294
„ „ poor circumstances	6	20	201	78	11	316
„ „ poverty	0	1	63	29	19	112
Patient is married	11	10	230	93	24	368
„ „ single	10	39	256	49	8	362

OVERCROWDING.

It has been found practically impossible to make a definite statement as to the number of houses which are overcrowded. Only a very few come within the legal meaning of the word, but a considerable number, though they could not legally be regarded as overcrowded, should certainly be considered so, owing to the presence of consumption in the home and the need for the patient having a room to himself.

DISINFECTION.

Disinfection of rooms is carried out:—

(1) On receiving notification of death of a consumptive patient.

(2) When a consumptive person removes to another house.

(3) Whenever a householder desires disinfection on account of tuberculosis in the house.

In order that we may learn of the removal of a consumptive patient to another house, the nurse when first visiting, leaves an addressed post card with each notified case and requests that it be posted in the event of removal. The sender is instructed to fill in the old address and also the one to which the patient is about to remove. On receipt of this post card, steps are taken to have the house disinfected before the ingoing tenant takes possession. Unfortunately, people very often omit to send these post cards when they come to remove. Though a large number of removals must have taken place, intimation of intended removal has only been received from some 40 patients.

Houses to the number of 137 have been reported to the Sanitary Inspector—72 for disinfection and the remainder because of dirtiness, dampness, fixed closed windows, etc.

BACTERIOLOGICAL WORK.

During the year under consideration, all specimens of sputum have been examined by the Medical Officers at the Tuberculosis Dispensary, the number this year being 328, as

compared with 136 during 1913. Of these, 171 have been sent by medical men practising in the Borough, and 157 specimens have been taken at the Dispensary.

The following table shows the result of examinations (T.B. = Tubercle Bacilli).

No T.B.	Doubtful T.B.	Few T.B.	Many T.B.	Very many T.B.
187	14	72	33	22

In addition, 8 specimens of urine have been examined, of which one was positive and the remainder negative.

It should be understood that the Medical Officers are prepared to examine sputum from doubtful or suspected cases of pulmonary tuberculosis for medical practitioners free of charge. Specimen bottles, in which specimens of sputum should always be sent, may be obtained from the Sanitary Office or Dispensary.

SLEEPING SHELTERS.

Towards the end of 1912, the Sanitary Committee purchased six sleeping shelters for the use of patients suffering from pulmonary tuberculosis, these being erected in the patients' gardens or on suitable ground. Later on, this number was increased to twelve.

These shelters are supplied to insured or non-insured patients, a small rental being paid to the Sanitary Committee by the Insurance Committee for those supplied to the former.

One difficulty in connection with shelters is that often those patients, most in need of them, have not suitable ground on which to place them.

During the year under consideration, eleven persons have had the use of shelters. At the end of the year, eight insured and one non-insured patients were sleeping in shelters. The remaining three shelters were in use at the Sanatorium.

Several of those patients have written saying how much they appreciate the shelters and that they have used them

winter and summer. A few, however, have removed in-doors during the stormy winter nights.

CHARITY ORGANIZATION SOCIETY.

There is little doubt that poverty, with its attendant over-crowding and insufficiency of food, predisposes to consumption. Consumption too, through the wage earner being incapacitated for work, is a common cause of poverty.

One of the aims of the Charity Organization Society is, wherever possible, to prevent the onset of poverty. The Dispensary has always kept in close touch with the Society, the Decisions Committee meetings of which are attended by the Senior Medical Officer, who desires to take this opportunity to thank the Society for the kind help which has been so freely given to many Dispensary and Sanatorium patients. Without such help many of those patients would either have had to forego institutional treatment or fall back on the Guardians for assistance. In numerous instances, clothing has been supplied to patients, both insured and non-insured, before their admission to Sanatorium. Moreover, in several cases, an allowance in money and food has been made to families while the bread-winner is undergoing institutional treatment or until he has resumed work. The knowledge that the family is being properly cared for has undoubtedly a beneficial effect on the mind of the patient and allows him to make a longer stay in the Sanatorium than would otherwise be possible.

Other patients, both insured and non-insured, have been sent to the country or sea-side after leaving the Sanatorium and before re-commencing work.

A considerable number have been supplied with milk, after leaving the institution, where the income was insufficient to allow of a sufficiency of this.

Occasionally, in order to allow of a consumptive person sleeping alone, both bed and bedding have been supplied.

Mention might also be made of the large number of cases sent away by the Society, who though not showing any signs of consumption might be called "pre-tubercular" and who, without such change would sooner or later have shown definite signs.

It is the belief of the Medical Officer that many of those cases, by this timely help, escape this dreadful disease.

REPORT ON THE YEAR'S WORK.

NUMBER OF PATIENTS DEALT WITH.

On the 1st January, 1914, there were 172 patients attending the Dispensary. During the year 268 new patients were admitted and 254 were discharged, leaving 186 attending the Dispensary on the 30th December, 1914.

The following table gives the number of insured and non-insured patients and children.

TABLE 2.

Showing Number of Patients Treated at the Dispensary.

(a)	Patients attending on 1st January, 1914.	
	Insured Men	44
	„ Women	49
	Non-insured Men	9
	„ „ Women	20
	Children	50
	Total	172
(b)	New Cases admitted during 1914.	
	Insured Men	57
	„ Women	53
	Non-insured Men	7
	„ „ Women	23
	Children	128
	Total	268
(c)	Patients discharged during 1914.	
	Insured Men	64
	„ Women	65
	Non-insured Men	10
	„ „ Women	26
	Children	89
	Total	254
(d)	Patients remaining on 30th December, 1914.	
	Insured Men	37
	„ Women	37
	Non-insured Men	6
	„ „ Women	17
	Children	89
	Total	186

The following table shows the length of time that the patients remained under treatment at the Dispensary.

TABLE 3.

Duration of Treatment at the Dispensary.

	Under 1 Week.	Weeks 1-4	Months 1-3	Months 3-6	Months 6-9	Months 9-12	Months over 12	Total.
Insured Men ...	0	1	13	14	19	8	9	64
,, Women ...	0	4	15	11	9	11	15	65
Non-insured Men ...	0	0	1	1	3	3	2	10
,, ,, Women	1	2	6	2	5	4	6	26
Children	1	2	16	24	23	13	10	89
Total	2	9	51	52	59	39	42	254

Two hundred and fifty four Dispensary patients were discharged during the year. The following table shows the result of treatment after classification into stages (Turban Classification.)

TABLE 4.

Showing Results of Treatment.

STAGE I. (Early Cases.)

	Much Improved.	Improved.	No Improvement.	Worse.	Total.
Insured Men ...	10	15	2	0	27
,, Women	3	16	4	2	25
Non-insured Men	2	2	1	0	5
,, ,, Women	1	3	4	0	8
Children ...	14	28	16	0	58
Total ...	30	64	27	2	123

Table 4.—continued.

STAGE I.—II.

	Much Improved.	Improved.	No Improvement.	Worse.	Total.
Insured Men ...	5	7	5	1	18
„ Women	3	11	7	1	22
Non-insured Men	1	0	1	0	2
„ „ Women	1	3	1	1	6
Children ...	2	9	6	1	18
Total ...	12	30	20	4	66

STAGE II.

	Much Improved.	Improved.	No Improvement.	Worse.	Total.
Insured Men ...	1	5	3	2	11
„ Women	2	5	3	0	10
Non-insured Men	0	0	1	1	2
„ „ Women	0	4	5	0	9
Children ...	4	1	4	0	9
Total ...	7	15	16	3	41

Table 4.—continued.

STAGE II.—III.

	Much Improved.	Improved.	No Improvement.	Worse.	Total.
Insured Men ...	0	1	1	2	4
„ Women	0	2	1	1	4
Non-insured Men	0	0	0	0	0
„ „ Women	0	0	0	0	0
Children ...	0	0	0	1	1
Total ...	0	3	2	4	9

STAGE III. (Advanced Cases.)

	Much Improved.	Improved.	No Improvement.	Worse.	Total.
Insured Men ...	0	0	4	0	4
„ Women	0	1	2	1	4
Non-insured Men	0	0	0	1	1
„ „ Women	0	0	0	3	3
Children ...	0	1	0	0	1
Total ...	0	2	6	5	13

Adding together the totals in each stage gives the following results:—

TABLE 4 (a). Summary

	Much Improved.	Improved.	No Improvement.	Worse.	Total.
Stage I.	30	64	27	2	123
Stage I.–II. ..	12	30	20	4	66
Stage II.	7	15	16	3	41
Stage II.–III. ...	0	3	2	4	9
Stage III.	0	2	6	5	13
Total ...	49	114	71	18	252

The two additional cases included in the number shown as discharged in Table II. were glandular cases, in childen. Both were improved.

TUBERCULIN TREATMENT.

During the year, 178 of the patients discharged, or 70 per cent., received tuberculin treatment at the Dispensary.

In 71 cases, however, this method was stopped within three months, either because it was found to be unsuitable or because the patient desired to give up treatment.

In 107 cases, tuberculin was continued for over three months; in 65 for over six months, and in 15 cases for over twelve months.

The following table shows the length of time during which insured and non-insured patients and children received tuberculin treatment.

TABLE 5.

Length of Tuberculin Treatment.

	Under 1 week.	1-4 weeks.	1-3 months.	3-6 months.	6-12 months.	Over 12 months	Total.
Insured Men ...	1	5	14	13	15	6	54
„ Women ...	0	8	16	9	9	5	47
Non-insured Men	0	0	1	3	5	0	9
„ „ Women	0	1	5	2	5	1	14
Children ...	1	3	16	16	15	3	54
Total ...	2	17	52	43	49*	15*	178

* Only 53 patients were able to complete a full course of tuberculin.

Of the 186 patients remaining on the books on the 30th December, 1914, 89 were children and 97 were adults. The following table gives the number of adults at work and those not at work:—

TABLE 6.

At work.		Not at work.	
Insured Men ...	24	Insured Men ...	12
„ Women ...	28	„ Women ...	9
Non-insured Men ...	6	Non-insured Men ...	1
„ „ Women	11	„ „ Women	6
Total ...	*69	Total ...	*28

* Only a small proportion of these were at work when they commenced treatment.

AFTER RESULTS OF TREATMENT.

Early in 1915, a printed Inquiry Form was sent to each of those patients discharged during the years 1913 and 1914, either

from Groby Road Sanatorium or the Dispensary, exclusive of those who had previously died—99 in number.

This form contained questions to be answered by the patient, relating to his present condition, fitness for work, how long employed since treatment began, etc.

Of the 389 patients treated, either at the Sanatorium or Dispensary, during the year 1913, 82 have died. Report Forms were sent to the remaining 307, but only 185 were returned filled up as required. The remaining patients have been lost sight of, or have failed to return the form.

Of the 451 patients treated, either at the Sanatorium or Dispensary, during the year 1914, 64 have died. Report Forms were sent to the remaining 387, of which 319 were returned with the required information, leaving 68 whom we have been unable to trace, or who have failed to return the form.

Unfortunately it occasionally happens that Report Forms have been sent to patients who have died. This sometimes, not unnaturally causes annoyance to the relatives, but a certain number of such occurrences are unavoidable. Our only means of obtaining information of the death of a consumptive patient is through the Death Register, and if death be due to some other cause than tuberculosis, the name of the patient is not transferred to our Tuberculosis Death Register.

Two examples only need be given to illustrate this difficulty.

(1.) Early in 1915 a Report Form was sent to W.F. This was returned with the following remark—"Sir, very sorry to tell you that W.F. went down in H.M.S. 'Hawke,' on October 15th. Thanks for enquiring."

(2.) A Form sent to Mrs. R. was returned stating—"I don't think much of you for looking after patients as Mrs. R. is been dead twelve months on the 29th March." On referring to the Death Register, we found that death had been due to post-partum haemorrhage (*i.e.*, bleeding to death after giving birth to a child).

The following tables have been drawn up after grouping these reports into four classes; Class I. means "Very Satisfactory," Class II "Fairly Satisfactory" (in both these classes the adult patients are generally at work, or in the case of children at school), Class III means "Indifferent Health," and Class IV "Getting Worse."

TABLE 7.

Reports received from Patients discharged during 1913.

(a) Insured Men.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	13	10	6	0	29
Treated at Dispensary only	3	0	3	0	6
Treated at Sanatorium only	5	4	7	0	16
	21	14	16	0	51

(b) Insured Women.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	14	8	9	0	31
Treated at Dispensary only	0	0	1	1	2
Treated at Sanatorium only	3	7	1	0	11
	17	15	11	1	44

Table 7.—continued.

(c) Non-Insured Men.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	10	6	0	1	17
Treated at Dispensary only	2	2	1	0	5
Treated at Sanatorium only	0	0	0	0	0
	12	8	1	1	22

(d) Non-Insured Women.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	7	8	3	0	18
Treated at Dispensary only	8	5	3	1	17
Treated at Sanatorium only	0	0	1	0	1
	15	13	7	1	36

(e) Boys.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	3	2	2	0	7
Treated at Dispensary only	6	3	0	1	10
Treated at Sanatorium only	0	0	1	0	1
	9	5	3	1	18

Table 7.—continued.

(f) Girls.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	2	1	0	0	3
Treated at Dispensary only	5	2	2	1	10
Treated at Sanatorium only	1	0	0	0	1
	8	3	2	1	14

N.B.—This gives a total of 185 reports returned by patients out of 389 who were treated during the year 1913, either at the Sanatorium or Dispensary, 82 of whom have died.

From the remaining 122 we have been unable to obtain reports.

By studying this table it will be seen that many more are entered in Classes I. and II. (improved) than in III. and IV (no better).

It may be, no doubt, that those patients doing well, have been more willing to return reports, than those in whom there has been only temporary improvement.

TABLE 8.

Reports received from Patients discharged during 1914.

(a) Insured Men.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	16	15	8	4	43
Treated at Dispensary only	3	1	0	0	4
Treated at Sanatorium only	18	10	14	9	51
	37	26	22	13	98

Table 8 —continued.

(b) Insured Women.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	12	18	12	5	47
Treated at Dispensary only	2	1	3	1	7
Treated at Sanatorium only	12	12	13	9	46
	26	31	28	15	100

(c) Non-Insured Men.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	3	0	4	2	9
Treated at Dispensary only	0	1	0	0	1
Treated at Sanatorium only	0	1	0	0	1
	3	2	4	2	11

(d) Non-Insured Women.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	3	7	2	2	14
Treated at Dispensary only	1	0	1	0	2
Treated at Sanatorium only	2	4	5	3	14
	6	11	8	5	30

Table 8.—continued.

(e) Boys.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	4	14	9	3	30
Treated at Dispensary only	0	2	1	0	3
Treated at Sanatorium only	2	6	3	0	11
	6	22	13	3	44

(f) Girls.

	Class I.	Class II.	Class III	Class IV.	Total.
Treated at Sanatorium and Dispensary ...	11	7	5	1	24
Treated at Dispensary only	1	1	1	0	3
Treated at Sanatorium only	1	3	4	1	9
	13	11	10	2	36

The following table shows the length of time during which patients discharged during 1913, and who have returned Report Forms, have been at work :—

TABLE 9.

Working Capacity of Patients.

a. At work since leaving the Sanatorium.
(Where patients have had both Sanatorium and Dispensary treatment.)

	Under 1 month.	1-3 months	3-6 months.	6-9 months.	9-12 months.	12-18 months.	18-24 months.	Over 24 months.	Total.
Insured Men ...	1	3	1	3	12	6	1	27	
„ Women	0	1	1	0	7	8	2	19	
Non-insured Men	0	2	0	2	3	4	8	19	
„ „ Women	0	1	0	2	0	8	3	14	
Total ...	1	7	2	7	22	26	14	79	

b. At work since commencing treatment at Dispensary.
(Where patients have not been to Sanatorium.)

	Under 1 month	1-3 months.	3-6 months.	6-9 months.	9-12 months.	12-18 months	18-24 months.	Over 24 months.	Total.
Insured Men ...	0	2	0	0	2	0	0	4	
„ Women	0	0	0	0	0	1	0	1	
Non-insured Men	0	0	0	1	3	3	1	8	
„ „ Women	0	2	0	1	0	6	1	10	
Total ...	0	4	0	2	5	10	2	23	

Table 9.—continued.

c. At work since discharge from Sanatorium.

(Where patients have not had Dispensary treatment.)

	Under 1 month	3-6 months.	6-9 months.	9-12 months.	12-18 months.	18-24 months.	Over 24 months.	Total.
Insured Men ...	0	3	0	3	5	1	1	13
„ Women	0	2	1	1	1	2	0	7
Non-insured Men	0	0	0	0	0	0	0	0
„ „ Women	0	0	0	0	0	0	0	0
Total ...	0	5	1	4	6	3	1	20

The following table shows the length of time during which patients discharged during the year 1914, and who have returned Report Forms, have been at work :—

TABLE 10.

Working Capacity of Patients.

a. At work since leaving the Sanatorium.

(Where patients have had both Sanatorium and Dispensary treatment.)

	Under 1 month	1-2 months.	2-3 months.	3-6 months.	6-9 months	9-12 months.	Over 12 months	Total.
Insured Men ...	0	1	2	5	4	10	16	38
„ Women	0	0	1	9	4	8	10	32
Non-insured Men	0	0	3	4	2	1	4	14
„ „ Women	0	0	4	2	1	5	7	19
Total ...	0	1	10	20	11	24	37	103

Table 10.—continued.

b. At work since commencing treatment at the Dispensary.
(Where patients have not been to the Sanatorium.)

	Under 1 month	1-2 months.	2-3 months.	3-6 months.	6-9 months.	9-12 months	Over 12 months	Total.
Insured Men ...	0	0	0	0	0	1	4	5
„ Women	0	0	0	0	3	1	1	5
Non-insured Men	0	0	0	0	0	3	0	3
„ „ Women	0	0	1	0	0	1	0	2
Total ...	0	0	1	0	3	6	5	15

N.B.—This gives a total of 118 out of the 165 adult patients discharged during 1914, and includes a few treated here as children, who have since this time commenced work. This number is not quite complete as there are 35 Dispensary patients from whom we have not been able to obtain reports.

c. At work since discharge from Sanatorium.
(Where patients have not had Dispensary treatment,)

	Under 1 month	1-2 months.	2-3 months.	3-6 months.	6-9 months.	9-12 months.	Over 12 months.	Total.
Insured Men ...	0	4	2	14	7	3	0	30
„ Women	5	4	2	7	5	2	0	25
Non-insured Men	0	0	0	0	2	0	0	2
„ „ Women	0	6	0	0	0	0	0	6
Total ...	5	14	4	21	14	5	0	63

DOMICILIARY TREATMENT.

During the year 1913, 39 patients were granted Domiciliary Treatment, and during 1914, 283 patients were granted this form of treatment, making a total of 322 for the two years.

The deaths for this period numbered 79, leaving 243 on Domiciliary Treatment on 31st December, 1914.

Of these, 8 have been transferred to Sanatorium or Dispensary and 10 have removed from Leicester, so that reports regarding 225 patients were due from the Panel Doctors.

Thirty-seven of these reports have not yet been received. The following tables have been drawn up after classifying the remaining 188.

TABLE 11,

Reports received from Doctors regarding patients in receipt of Domiciliary Treatment.

	Much Improved	Improved.	No Improvement.	Worse.	Not Stated.	Total.
Men	5	33	12	43	9	102
Women ..	5	25	18	29	9	86
Total ..	10	58	30	72	18	188

TABLE 12.

The following table shows the number of patients receiving Domiciliary Treatment, who are at work and those not at work.

	At Work.	Not at Work.	Not Stated	Total.
Men	35	59	8	102
Women	29	47	10	86
Total	64*	106	18	188

* On the request of the doctors in attendance, 47 of these patients (26 men and 21 women) have now been "taken off" Domiciliary Treatment.

ILLUSTRATIVE CASES.

The following have been selected as illustrative cases:

CASE 1. E. W.—Girl, aged 12. *Duration of illness:* has always been delicate, and has had a cough for several years, worse of late; away from school for four weeks. *Symptoms:* cough, night-sweats, loss of weight and strength. General condition poor: temperature rather unsettled. Examination of chest showed condition to be early (Stage I). Was treated throughout at Dispensary, which she attended for nine months. Had part course of tuberculin treatment. Returned to school six months after treatment began. *On discharge:* general condition much improved and physical signs entirely disappeared. Gained 8½ lbs. in weight. *Report*, received 26th Feb., 1915, states that health is good, that she has no cough, no expectoration, no night-sweats, &c., that she is still gaining weight; that she commenced work two months previously in stock-room (shoe factory) and that she is working full time.

CASE II. T. G.—Boy, aged 13. *Duration of illness:* some years; away from school for twelve months. Had pneumonia five years previously. Three others in family suffer from phthisis. *Symptoms:* cough, expectoration, night-sweats, loss of

weight and strength, pains in chest. General condition poor and temperature unsettled, reaching 99° to 99·6° in evening. Examination of chest showed disease to be in Stage I. Treated first in Sanatorium (4½ months) then at Dispensary for four months. Had part course of tuberculin. *On discharge:* general condition improved, physical signs indefinite, gained 6 lbs. in weight. *Report*, received 14th Jan., 1915, states that health is very satisfactory, that he has no cough, no expectoration, no night-sweats, that he is still gaining weight, also that he commenced work as "finisher" five months ago.

Case III. N. S.—Woman (unmarried), aged 27. *Duration of illness:* six weeks. Away from work three weeks. Uncle died of phthisis; sister-in-law also affected. *Symptoms:* cough, expectoration, loss of weight and strength, pains in chest, shortness of breath, hoarseness of voice. General condition poor, average evening temperature about 99°. Examination of chest showed disease to be early (Stage I). Treated throughout at Dispensary, which she attended for 13 months. Had full course of tuberculin. Started work four weeks after treatment began. *On discharge:* no cough, no expectoration, &c. General condition much improved. Examination of chest showed that physical signs had entirely disappeared, disease entirely arrested if not cured. Had been continuously at work for 12 months. *Report*, received 10th May, 1915, states that health is very good, that she has no cough, no expectoration, &c. She also writes: "I should like to express my thanks to you and to Sister for the kindness I have received during the 13 months I have been under treatment at the Dispensary. I feel sure the injections have been the means of arresting the disease which threatened me, and I am pleased to say how much better and stronger I am, than when I first came to you for treatment. Again expressing my heartfelt thanks."

Case IV. E. B.—Married woman, aged 36. *Duration of illness:* eight weeks, off work six weeks. *Symptoms:* cough, expectoration, night sweats, loss of weight and strength, pains in chest and shortness of breath. General condition was poor and there was considerable wasting. Evening temperature, 99° to

100°. Examination of chest showed disease to be in Stage I., and tubercle bacilli were found in the sputum. Was treated first at Sanatorium (six weeks) then at Dispensary for fifteen months. Had full course of tuberculin. Started housework some two months after treatment at Dispensary began, having decided not to return to her former occupation at hosiery work in a factory. *On discharge:* general condition considerably improved; no cough, no expectoration, &c. Gained 5 lbs. in weight. Examination of chest revealed very indefinite physical signs. *Report*, received 22nd Feb., 1915, states that health is very good; that she has no cough, no expectoration, no night sweats, and that her weight is keeping up. She also says that she has been keeping in extremely good health ever since she attended the Dispensary; also that her mother died recently and though she had to sit up night after night with her, no ill effects have followed.

Case V. H. C.—Unmarried man, aged 26. *Duration of illness* given as six months, but had pleurisy three years previously. Off work six weeks. *Symptoms:* cough, expectoration, loss of weight and strength, hæmoptysis (half-a-cupful) a week before seen, pain in chest and shortness of breath. General condition was poor and temperature slightly raised. Examination of chest showed disease to be in Stage I.—II., and there were also signs of old-standing pleurisy. Tubercle bacilli were found in the sputum. Was treated first at Sanatorium (two months), then at Dispensary for seven months. Had full course of tuberculin. Started work soon after commencing treatment at Dispensary. *On discharge:* general condition much improved, no cough, no expectoration, no more hæmorrhage, &c. Was working very hard (coal heaving) from 6 a.m. till 8 p.m. *Report*, received 2nd Jan., 1915, states that health is excellent, that he has no cough, no expectoration, no night sweats, and that he has had no more hæmorrhage. Weight remains about the same. Temperature is normal. He also says: "Dear Sir, the state of my health keeps excellent, and although the nature of my work is very heavy, the more I do the better I feel, being out of doors in all sorts of weather. Again thanking you for your kind attention."

CASE VI. W.C.—widower, age 29. *Duration of illness*, three months, off work one month. Wife died two years previously of phthisis. *Symptoms*, cough, expectoration, night sweats, loss of weight and strength, haemoptysis one week before coming here. General condition rather poor, and evening temperature slightly raised. Examination of chest showed disease to be early (Stage I.) Treated throughout at Dispensary, which he attended for twelve months. Commenced work four weeks after treatment began. Had full course of tuberculin. *On discharge:* no cough, no expectoration, no night sweats, gained 10 lbs. in weight, temperature normal, looked well and felt well. Examination of chest showed that signs of disease had entirely disappeared. *Report*, received 7th January, 1915, states that health is excellent, that he has no cough, no expectoration, has had no more hæmorrhage, and that he is still gaining weight. His temperature has never been above 98·4° since discharge. Has been at work for sixteen months since treatment began. (This patient got married again about six months after being discharged from Dispensary.)

The following are some of the "Remarks" made by patients in the reports of their progress:—

F. T. (age 21).—"I have every reason to think that I have made a complete recovery, as, if possible, my general health is better and my physique improved, than last year."

E. W. (age 18).—"Since leaving the Sanatorium I have enjoyed good health."

W. O. (age 20).—"I might thank you and the staff for the kind attention I received during my stay. I think it was the means of setting me up again."

S. C. (age 22).—"Having received great benefit from your treatment, I thank you kindly."

J. R. (age 39).—"I am very grateful for treatment at Dispensary and Groby Road, and am keeping very well indeed, and doing a hard day's work."

H. R. H. (age 18).—"I am pleased to say I am still in good health and do not feel as if I am going back at all, and I wish to thank you for your kindness to me."

R. T. C. (age 18).—"I am very glad to say I feel thoroughly well and strong, except for just a slight cough, and I enlisted in 'Kitchener's' army and passed a week ago last Tuesday."

A. M. (age 21).—"Thank you very much for enquiring about my son and for the good that you did him. I am pleased to say that he is in first-class health and is doing his duty by serving in the army for King and Country."

OUR "ROLL OF HONOUR."

It is interesting to note that of those patients with whom we have been able to keep in touch, no less than 24 have joined His Majesty's Forces. This number is probably not complete as of the 389 treated in 1913, only 185 report forms have been returned, while of the 451 treated in 1914, we have only been able to obtain reports from 319.

WYVILLE S. THOMSON,

Medical Officer.

III.

REPORT

ON THE

WORK OF THE SANATORIUM

DURING THE YEAR 1914.

By WILLIAM JOHNSTONE, M.D., D.P.H.,

Resident Medical Officer.

PHTHISIS.

About fifty beds (25 male and 25 female) are set apart for the treatment of consumptive patients at the Borough Sanatorium.

At Anstey Lane Children's Hospital, 36 beds are available for the treatment of tubercular children between the ages of five and fifteen years.

The numbers for the year are as follows:

Remaining December 31st, 1914		74
Admitted during the year (adults) ...	294	434
„ „ „ (children)...	140	
Discharged during the year (adults) ...	290	419
„ „ „ (children)	129	
Died during the year		12
Remaining December 31st, 1914		77

The results of treatment in the 290 adult patients discharged (of whom 259 were insured persons) was as follows:

Much Improved.	Improved.	*In statu quo.*	Worse.	Died.
38	221	15	5	11

The average stay for adult patients in the Sanatorium was 59·6 days.

In the following table is shown a summarised tabulation of the results obtained in the treatment of the 259 insured patients, arranged according to the stage (Turban) of their disease:—

Insured Patients.

	Much Improved.	Improved.	*In statu quo.*	Worse.	Died.	Total.
Stage I. ...	9	106	14*	—	—	129
Stage I.—II. ...	5	28	8	—	—	41
Stage II. ...	8	9	5	—	—	22
Stage II.—III. ...	1	4	7	2	1	15
Stage III. ...	5	15	13	12	7	52
Totals ...	28	162	47	14	8	259

* Six of the cases included under this head for various reasons stayed less than 12 days.

A large percentage of patients admitted in Stages II.—III. and III. are more or less hopeless on admission and no improvement can reasonably be looked for: eight of these died in the Sanatorium.

It is only right, however, that such patients should be given the only chance of improvement they have, and if for no other reason than to educate them how to carry on personal hygienic regime as well as how to prevent the spread of infection to others, a period of residence in a Sanatorium is not spent in vain.

The treatment adopted in this Sanatorium may be classified thus:—

(1) Rest.

(2) Graduated exercises (including graduated walks and marching).

(3) Tuberculin injections.

Each insured patient admitted comes in the first instance for a minimum period of at least four weeks.

Every effort is made to let suitable cases have as long a period of residence as possible.

A list is made up every fortnight of patients who have almost completed their allotted time in the Sanatorium, and this is submitted to the Medical Officer of Health who deals with each case on its merits and recommends "extensions" to suitable cases with, at the same time, due regard to the exigencies of the waiting list.

With reference to the latter, the ideal of admitting patients to the Sanatorium as soon after they have applied (and have been passed) for Sanatorium treatment is never lost sight of.

As soon as a patient is admitted he is given rest in bed for a day or two in order that he may adjust himself to his new surroundings.

When he has settled down he is allowed up and given graduated walks, commencing with about ¼ mile once or twice daily according as his condition (chest and general) permits.

About the end of a week (unless his progress is more rapid) he is allowed to walk 1—1½ miles at least per diem and commences No. 1 Breathing Exercise which includes systematic expansion of the chest a given number of times twice daily.

When progressing favourably up to this stage a patient is next put on No. 2 and finally No. 3 Exercises which include graduated Swedish movements with dumbbells, in order not only to develop the chest specially but also to induce a good muscular tone throughout the body and improve posture. The walks are at the same time correspondingly increased in distance, the maximum being about 2½ to 3 miles.

In order that exercises may be properly supervised, so that a patient does not either under or overdo them, and in order that fresh movements may be taught, thereby keeping up a patient's interest, it has been arranged that they be under the control of an instructor who visits three times every week, giving instruction to men, women, and children separately.

On the days when he does not visit the exercises are gone through under the leadership of the "captains" of the various wards.

These graduated exercises are productive often of very much manifest improvement and are taken up on the whole with no little enthusiasm by the patients themselves who are fully alive to the benefits derived from them.

In addition, and when state of health permits, they do a varying amount of ward work in the direction of keeping wards tidy and otherwise assisting the staff.

Patients who are deemed suitable by the Medical Officer, after ten to fourteen days' residence, are, if willing, put on tuberculin injections as an adjuvant to the foregoing lines of treatment.

As illustrating the value of Sanatorium treatment in suitable cases of pulmonary tuberculosis in restoring a patient's working capacity and so rendering him a useful member of the community—the ultimate aim of such treatment—the following examples may be cited:—

G. B. (25/14), male, age 22 years. Stage II. Remained in Sanatorium ten weeks, gained in weight 8 lbs., had injections of tuberculin (P.T.O.) twice weekly, which were continued for some months at the Tuberculosis Dispensary after discharge from Sanatorium. Started work a month afterwards and continued work at outdoor occupation until outbreak of war, when he presented himself as a recruit for "Kitchener's" army and, to his surprise, was passed by the Doctor.

Latest reports (28 X. 14). "Since joining, have put on 18 lbs. in weight despite the hard training, and am feeling very fit, having lost the feeling of dulness I used to have. Can now "double" with the best and was promoted Lance-Corporal about three weeks ago."

J. H. G. (225/14), male, age 32 years. Stage I. Sanatorium for eight weeks, leaving in September; gain in weight 6 lbs., had injections of tuberculin (P.T.O.), 16 or 17 injections in all. Being considered a suitable case he was transferred to Darley Dale colony, where under the regime of six hours' gardening daily for 4½ weeks he gained a further 3½ lbs. in weight. Passed the

medical examination for entrance to the Leicester Territorials on 15th October, 1914, almost immediately after leaving Darley Dale. Reported himself at the Sanatorium on 1st May, 1915, to the effect that he has kept fit during whole course of training and able for hard physical demands incumbent on recruits in training. Is still gaining weight and has never felt so well all his life.

M. A. (10/14), female, age 29 years. Stage II. Remained in Sanatorium 13 weeks, gained in weight 6½ lbs., started course of tuberculin injections a fortnight after admission, these are being continued at the Dispensary, where she periodically reports herself. She began work a month after discharge from Sanatorium and has been able to do a full day's work ever since, maintaining at the same time the improvement in weight.

The above results speak for themselves and require no further comment.

CHILDREN.

Consumptive children have continued to be treated at the Smallpox Hospital, Anstey Lane, since November, 1913.

The cases on the whole are "early" and the treatment adopted is practically on the same lines as that for adults, viz.: rest, graduated exercises, and injections of tuberculin (P.T.O.), the latter after the consent of parents has been obtained.

It may be interesting to note that towards the close of the year there were over 70 per cent. of the total children having tuberculin injections.

In my opinion, children who receive tuberculin treatment gain weight more quickly and appear to make better progress than those who do not.

As with adult cases, children can, after discharge, follow up the tuberculin treatment begun at the Hospital by continuing it afterwards at the Dispensary.

It is worthy of note that while children are in residence at Anstey Lane their school education is not neglected, as there is

a school-room where classes meet daily and tuition is carried on by a teacher provided by the Education Committee without prejudice to the other elements entering into the system of treatment.

While the project of utilising the Smallpox Hospital for tubercular children undergoing treatment, may at its inception have been an experiment, it is now beyond the experimental stage, and justifies itself, if for no other reason than that it is a step in the right direction by tackling the tuberculosis problem from the proper standpoint, viz., from the preventive rather than the curative aspect.

The numbers for the year 1914 are as follows:—

Admitted	140
Discharged	129
Died	1
Average stay in Hospital ...	90.1 days
Average gain in weight ...	... 5·5 lbs.

The general condition in almost all the patients showed marked improvement and the results obtained have been on the whole very satisfactory.

AFTER RESULTS.

In Dr. Thomson's report, tables are given showing statistically the condition of patients who have replied to the enquiries addressed to them. The following are extracts from a few of these replies:

1.—Mrs. A., aged 32. Left Groby Road Sanatorium July 4th, 1914, after 9 weeks' stay, subsequently treated for three months at the Tuberculosis Dispensary. She writes: "I am very pleased to say that I have never been better in my life. I shall always be thankful that I went to the Sanatorium and grateful for the attention I received."

2.—John C., aged 35, rubber hand. Discharged from Sanatorium July 15th, 1914, after 13 weeks' stay. Has since done six months work, full time. Has kept well. He writes:

"I am pleased to state that my health is keeping remarkably good and I keep increasing in weight."

3.—George C., aged 24, painter. Left the Sanatorium December 2nd, 1914, after four weeks' treatment. Has now returned to work and writes: "I am keeping in good health and thank you for the treatment which put me on a sound footing. . . . Thank you very much for the way in which I was looked after at the Groby Road Sanatorium."

4.—Lavinia B., aged 21, stockroom hand. Discharged from Sanatorium November 7th, 1914, after four weeks' stay. Has returned to work and making full time. She has no cough or expectoration and is gaining weight. She writes: "I wish to state that the treatment at the Groby Road Sanatorium has done me a great deal of good, and the Staff give you every attention they can. I am very pleased that I have been."

5.—Millie K., aged 23, hosiery hand. Discharged from Sanatorium July 1st, 1914, after eight weeks' stay. Her health is keeping very good. She has no cough or expectoration and has been at work eight months and now doing overtime. She writes: "Thanks for the treatment I received: I am feeling quite fit and shall always be very grateful for the kindness I received at the Sanatorium, and feel sure I am a practical cure."

6.—Grace B., aged 36, domestic servant. Discharged from the Sanatorium (second time) October 14th, 1914, after 18 weeks' treatment. She has been back at work for four months and writes: "Very pleased to say I have kept very well . . . . . also return thanks for the good treatment received whilst in the Groby Road Sanatorium."

7.—Clara Y., aged 28, housewife. Discharged from Sanatorium November 8th, 1913, after four weeks. Her health is keeping good and she is gaining weight. She writes: "I have been keeping house for my father, I am in excellent health and think I am now cured."

WM. JOHNSTONE,

Resident Medical Officer.

APPENDIX II.

REPORT

ON THE

ISOLATION HOSPITAL AND BOROUGH SANATORIUM,

FOR THE YEAR 1914.

By WILLIAM JOHNSTONE, M.D., D.P.H.,

Resident Medical Officer.

The Leicester Isolation Hospital and Borough Sanatorium is situated on Groby Road, 2½ miles from the centre of the town and one mile beyond the Borough boundary.

The site, which covers 16 acres, increased during the year to 23 acres, is a particularly good one, being on rising ground with a gentle slope to the South.

The Smallpox Hospital (which is at present being used for the treatment of consumptive children) is on the Anstey Lane, a quarter of a mile away from the Isolation Hospital. It stands on four acres of ground and consists of wooden buildings covered with galvanized iron. It provides accommodation for 53 patients on the basis of 100 square feet of floor space per patient.

On 31st December, 1913, there were 153 patients remaining in the whole institution.

During the year 1006 patients were admitted, 942 were discharged, and 34 died, leaving 183 in Hospital on 31st December, 1914 (of whom 55 were sick and wounded soldiers).

The admissions show an increase of 28 over those of the previous year, but this is accounted for by the fact that in the month of October it was resolved to utilise vacant beds in the Hospital for the use of sick and wounded soldiers, placing them at the disposal of the 5th Northern General Hospital, Leicester. But for this factor the admissions would have shown a decrease

of 37 over the preceding year, due to a diminution in the number of cases admitted with diphtheria and tuberculosis.

Particulars of the admissions are as follows:—

Tuberculosis	434
Scarlet Fever	380
Diphtheria	110
Enteric Fever	10
Soldiers	65
Unclassified	7
Total	1006

SCARLET FEVER.

The number of admissions for 1914 was 380, as compared with 384 in 1913; 601 in 1912; 873 in 1911.

As evidenced from the above figures, the decrease noticed during recent years is still maintained, the admissions being the lowest recorded for the past 30 years with the exception of the years when the Hospital was closed for smallpox.

Greatest prevalence was observed during the third and fourth quarters of the year, the numbers being 117 and 113 respectively, while the second quarter was lowest with only 66 admissions.

A noticeable feature of the disease was the mildness of the type prevailing, so that there were only four fatal cases, equivalent to a case-mortality of 1·05 per cent., as compared with 1·5 in 1913, 1·2 in 1912, and ·7 in 1911.

Three of the four deaths were due to the disease being of a severe septic type, while the remaining death was accounted for by the patient contracting measles and succumbing to one of its complications.

It may here be noted that while the usual type of scarlet fever in the majority of the cases was mild, two soldiers admitted towards the latter part of the year had fairly severe attacks but made excellent recoveries.

At the beginning of the year, the outbreak of measles which commenced in November and December of the previous year in

one of the Wards still lingered and unfortunately caused one death, as above recorded.

The average stay in Hospital of all scarlet fever cases (including fatal ones) was 41·2 days.

DIPHTHERIA.

During the year there were 110 cases admitted, being 23 fewer than the previous year, and 33 less than the figure for 1912.

There was the usual diminution in numbers during the second and third quarters of the year.

The case mortality was 13·6, as compared with 9·02 in 1913; 10·4 in 1912; 6·8 in 1911.

This is the highest case mortality recorded during the past year and is to be accounted for, not so much by the number of cases admitted in a critical condition and requiring operative measures for their relief, as by the exalted virulence which the diphtheria poison seems to have acquired as well as by the extremely debilitated condition of many of the patients.

Operations for laryngeal obstruction were performed on 19 patients.

Of these, nine cases required intubation alone (in some cases repeated); three after being intubated required subsequent tracheotomy; on six, tracheotomy was performed at the outset; and in one case tracheotomy was followed by intubation.

The deaths amongst operation cases numbered six, as follows:—

Intubation alone	1
Intubation followed by tracheotomy ...	2
Tracheotomy alone...	3
	6

Tracheotomy has a larger number of deaths following it because it is the operation of necessity performed when the case

is too ill to be intubated, is moribund, or where a preliminary intubation fails to give the necessary relief.

Many of the non-operative cases were of a very virulent type and, of these, nine died, making a total of 15 deaths from diphtheria.

The average time which these patients had been ill before admission was 3·5 days.

The average duration of stay in hospital of all diphtheria patients (including the fatal cases) was 49·2 days.

ENTERIC FEVER.

Ten cases were admitted during the year, being a decrease of two on the figure for the previous year.

The cases might all be described as having been moderately severe, and of these two proved fatal, one being a very debilitated woman, while the other died of hæmorrhage with subsequent exhaustion.

The case mortality was therefore equivalent to 20 per cent., but the figures are much too small for any conclusion to be drawn.

Corresponding figures for previous years are:—16·6 in 1913 and 15·4 in 1912.

The average stay in hospital of all enteric fever patients (including fatal cases) was 66 days.

UNCLASSIFIED CASES.

These numbered 7, details of which are as follows:—

Pneumonia following measles or whooping cough	2
Follicular tonsilitis	1
Acute bronchitis	1
Copaiba rash	1
Pulmonary abscess	1
Supposed enteric fever	1
	7

Two of the above cases were sent in as urgent diphtheria, while one was admitted as a case of supposed scarlet fever. There was one death.

The average duration of hospital residence of all the above was 9 days.

SOLDIERS.

In October, 1914, the number of zymotic cases had decreased to such an extent that it was deemed a patriotic act to place the vacant accommodation in one of the hospital blocks at the disposal of the Leicester Base Hospital (5th Northern General). Accordingly, 48 beds were made available for the the reception of sick and wounded soldiers.

The first contingent to be admitted, on 31st October, comprised 12 Belgian wounded soldiers, to be followed two days later by a further batch of 18.

Never before in the history of the hospital had such a departure been made, but the experiment was soon found to justify itself as the soldiers made rapid recoveries from their wounds, and these defenders of brave Belgium soon settled down and almost without exception expressed their regret when the day came for their departure.

By December 29th a total of 45 had been admitted, and deducting 10 discharges, there were left at the end of the year 35 Belgian soldiers, which with 20 British sick and wounded added, gave a grand total of 55 remaining on December 31st. (This is exclusive of two British soldiers admitted with scarlet fever.)

By that date another smaller block had been set aside for the use of the soldiers to keep pace with the ever increasing need of the military authorities for hospital beds.

Since the end of the year a further block accommodating 48 soldiers has been placed at the disposal of the 5th Northern General Hospital, and at the time of writing, May, 1915, some 120 soldiers are being treated.

The rate of pay for the cost of treating soldiers which has been agreed upon is 2/6 per day. (Very serious cases, or cases likely to require surgical operation are not included.)

In addition to ordinary cases of sick and wounded soldiers, cases of scarlet fever or diphtheria in soldiers are admitted at 3/- per day, and cases of enteric fever, or cerebro-spinal fever at 30/- per week.

BACTERIOLOGY.

As in former years facilities are afforded to practitioners within the Borough to have specimens of throat swabs and blood examined free of charge, as an aid to diagnosis in doubtful cases of diphtheria and enteric fever.

About 104 specimens have been bacteriologically examined during the year, with the following results:—

Swabs (for diphtheria bacilli)	...	59	+ 12 − 41 doubtful 6
Blood (Widal reaction) ...	...	39	+ 19 − 16 doubtful 4
Sputum (for tubercle bacillus)	..	6	all negative
		104	

STAFF.

The health of the staff during the year has been eminently satisfactory.

There have been the usual influenza colds, causing three or four days' absence from duty, and one maid contracted diphtheria from which she made a good recovery. With the exception of these and one or two cases of tonsilitis there is nothing to report.

In the course of the year Dr. A. E. S. Martin left to become Tuberculosis Officer of Sunderland. He was replaced by Dr. H. Tylford Howell, who, however, resigned in October, having been appointed Medical Superintendent of the Winsley Sanatorium, near Bath.

HONORARY CHAPLAIN.

The Hospital owes a deep debt of gratitude to the Honorary Chaplain, the Rev. Canon Gedge, who still continues his voluntary ministrations to the sick. His weekly visits to the hospital are gratefully appreciated, both by the patients and staff.

The continued work of the Church-workers' Guild, which conducts a Sunday morning service for the consumptive patients, is also much appreciated.

The Rev. Mr. Veitch, under the auspices of the Free Church Council, is doing good work.

The usual tables are appended.

WILLIAM JOHNSTONE,

Resident Medical Officer.

GIFTS RECEIVED AT THE HOSPITAL DURING 1914.

FOR WOUNDED SOLDIERS.

H.M. The King	Pheasants.
Mrs. Cox	Fruit, Cigarettes, &c.
Mrs. Smart... ...	Body Belts and Cigarettes.
Canon Gedge ...	Games, Cigarettes, &c.
Mrs. Vallance ...	Fruit and Sweets.
Mr. Cecil Horne ...	Magazines and Papers.
Mr. A. Gibbs ...	Tobacco and Cigarettes.
Mrs. H. J. Gimson ...	Books and Papers.
Miss Vincent ...	Magazines, Papers, &c.
Mr. Thomson ...	Buns, Cake, &c.
Father Caus ...	Clothing.

FOR WHOLE INSTITUTION.

The Vicar, Newtown Linford ...	Papers and Magazines.
Lady Faire	Magazines.
Ald. T. Windley ...	Books and Magazines.
Miss Hodgson (Fosse Road) ...	Magazines.
Mrs. Cooper (Anstey Grange) ...	Magazines.
Miss Laurence ...	Scrap Books.
Mr. Clark	Toys and Books.
Mrs. Sabin	Alexandra Roses.
Rev. J. Casson, St. Augustine's Vicarage	Plants and Flowers.
The Vicar, St. Michael's Church	Plants and Flowers.
Mr. Whetton, De Montfort Press	Pictures.
Mrs. Williams (Knighton Park Road)	Magazines, &c.
Mrs. Pridmore ...	Books.

GIFTS TO THE HOSPITAL.—Continued.

Wyggeston Girls' School ...	Toys.
Mrs. A. Certs (Central Avenue)	Toys.
Mr. Carryer (Kirby Road) ...	Fruit and Sweets.
Mr. Rust	5/- for Toys.
An Old Patient	Two Dolls.
An Old Patient	Crackers and Cigarettes.
An Old Patient	Dolls.
Miss Ellingworth (St. Martins)	Doll.
Mr. Kemp, Littlethorpe House)	Toys and Games.
Children of Belvoir Street Sunday School	Dolls and Games.
Dr. & Mrs. Lakin	Magazines and Xmas Pictures.
Canon Gedge	Socks, Clothing, Tobacco, &c.
Miss Pickerstein	Magazines, Monthly,
Mrs. Freer (New Walk) ...	Dolls.
Mrs. Thomson, Groby ..	Magazines.
Rev. Whittingham, Knighton Vicarage	£2 2s.
Mrs. Ellis, The Gynsills ...	Magazines.
Rev. Lindsey, Belgrave Vicarage	Books and Toys.

TABLE A.
Number of Patients Admitted, Discharged and Died during 1914.

Disease.	Remaining 31st December, 1913.	Admitted during Year.	Discharged during Year.	Died during Year.	Remaining 31st December, 1914.
Scarlet Fever	58	380*	402	4	32*
Diphtheria	18	110	94	15	19
Enteric Fever	3	10	11	2	0
Tuberculosis — Adults ...	47	294	290	11	40
Tuberculosis — Children ...	27	140	129	1	37
Smallpox	0	0	0	0	0
Soldiers (Belgian)... ..	0	65	10	0	55
Unclassified	0	7	6	1	0
Total	153	1006	942	34	183

* Includes two British soldiers.

TABLE B.

Showing, for the different diseases, the number of patients admitted, the average number in Hospital each day, and the average stay in Hospital. (Year ending December 31st).

	Scarlet Fever.			Diphtheria.			Enteric Fever.			Smallpox.		Tuberculosis.			Other Diseases.		Total.		
	No. of Patients Admitted.	Average Patients in Hospital Each Day.	Average Days' Stay per Patient.	No. of Patients Admitted.	Average Patients in Hospital Each Day.	Average Days' Stay per Patient.	No. of Patients Admitted.	Average Patients in Hospital Each Day.	Average Days' Stay per Patient.	No. of Patients Admitted.	Average Days' Stay per Patient.	No. of Patients Admitted.	Average Patients in Hospital Each Day.	Average Days' Stay per Patient.	No. of Patients Admitted.	Average Days' Stay per Patient.	No. of Patients Admitted.	Average Patients in Hospital Each Day.	Average Days' Stay per Patient.
1905	739	82·4	40·7	89	6·3	26·1	43	5·3	45·2	5	35·0	157	16·0	37·3	...	...	1037	111·0	39·0
1906	1471	172·5	42·8	166	14·0	30·8	58	7·2	45·5	1	30	69	10·5	56·0	2	65·0	1765	204·4	42·2
1907	1196	154·5	47·1	102	8·1	29·1	35	5·0	52·1	...	...	82	14·7	65·6	5	19·1	1420	182·6	46·9
1908	866	149·3	48·1	92	12·5	49·8	29	4·9	61·7	...	...	91	15·2	60·8	21	18·6	1099	147·8	49·1
1909	1166	123·0	37·9	83	9·4	40·7	19	3·0	61·2	...	...	104	15·3	53·5	10	16·6	1382	149·3	39·4
1910	739	78·2	38·6	70	7·1	37·1	26	3·1	44·7	...	...	119	17·7	54·5	5	6·6	959	106·4	40·5
1911	873	73·7	30·8	176	13·9	28·6	37	3·6	47·0	...	...	201	27.1	48·9	64	45·0	1351	127·3	34.4
1912	801	80·9	36·9	143	16·7	42·8	39	7.2	68·1	...	...	169	22·6	49	14	14·5	1166	128·1	40·1
1913	384	42·8	40·7	133	13·8	37·9	12	1·8	56·2	1	28	445	55·9	45·9	3	3·6	978	114·3	40·4
1914†	380	44·1	41·2	110	13·7	49·2	10	1·9	66·0	0	...	434	81·5	69·7	72*	56·0	1006	147·9	55·4

* Includes 65 soldiers.

† TUBERCULOSIS.

	Total Patient-Days.	Average Days Stay.	Average No. of Patients each Day.
Adults ...	17,487	59·8	47·9
Children ...	12,264	90.1	33·6

The total patient-days, all diseases, during the year ending December 31st, 1914, was 53,995.

TABLE C.

BOROUGH OF LEICESTER. ISOLATION HOSPITAL.

Receipts and Payments during two years ending 31st March, 1915.

PAYMENTS.	Year 1913-14. £	s.	d.	Average Cost per patient day. s.	d.	Year 1914-15. £	s.	d.	Average Cost per patient day. s.	d.
Salaries and Wages	1906	1	5	0	10·06	2100	19	10	0	8·50
Meat	364	5	3	0	1·92	513	3	11	0	2·07
Other Provisions	1323	5	4	0	6·98	1678	6	10	0	6·79
Furniture, Fittings and Domestic Utensils ...	347	10	3	0	1·83	271	12	2	0	1·10
Bedclothing, Towelling, &c. ...	169	14	11	0	0·90	261	0	1	0	1·06
Fuel, Light and Water ...	1156	5	4	0	6·10	1199	14	11	0	4·85
Rates, Insurance and Telephone	385	4	4	0	2·04	392	6	10	0	1·59
Alterations and Repairs ...	412	12	2	0	2·18	586	7	2	0	2·37
Horsehire, Horsekeep and Ambulance	131	12	2	0	0·69	103	2	9	0	0·42
Drugs and Medical Appliances...	312	2	2	0	1·65	295	4	11	0	1·19
Advertising, Printing and Stationery	39	5	4	0	0·21	59	15	4	0	0·24
Grounds: Gardeners' Wages, Materials, &c.	386	8	2	0	2·04	450	16	10	0	1·82
Cleaning Materials	77	7	1	0	0·41	87	17	1	0	0·36
Sundries	116	12	3	0	0·61	187	17	1	0	0·76
Total Payments ...	7128	6	2	3	1·62	8188	5	9	2	9·12
RECEIPTS.										
Maintenance of Consumptive Patients	8	9	0	0	0·05	...			...	
Ditto (Leicester Insurance Committee)	1700	14	2	0	8.98	2040	0	0	0	8.25
Other Maintenance Receipts ...	26	12	0	0	0.12	...			...	
Pumping Cemetery Sewage ...	75	0	0	0	0·40	75	0	0	0	0·30
Sale of Hay, &c.	47	15	6	0	0.25	16	0	0	0	0·06
Sale of Thermometers and Sundries	55	17	11	0	0·29	76	18	9	0	0·31
Government Grant towards cost of Treatment of Tuberculosis	1585	17	0	0	8·38	1225	0	0	0	4·96
Treatment of Soldiers	...			...		730	8	9	0	2·96
Total Receipts ...	3500	5	7	1	6·47	4163	7	6	1	4·84
Net cost (excluding Loan Charges) ... ... £	3628	0	7	1	7·15	4024	18	3	1	4·28
No. of Patient days	45,475					59,345				

W. PENN-LEWIS,

May, 1915. *Borough Treasurer.*

TABLE D.

Details of Fuel used during the two years ending 31st March, 1915.

Particulars.	Rate per Ton.	Year 1913-14.		Year 1914-15.	
		Weight.	Value.	Weight.	Value.
	s. d.	T. C. Q.	£ s. d.	T. C. Q.	£ s. d.
Coal	10 7	40 18 3	21 13 3	...	...
„	11 3	...	...	147 18 1	83 4 0
„	11 4	113 19 1	64 11 10	55 1 2	31 4 3
„	15 3	5 10 1	4 4 2	...	...
„	15 6	...	...	13 11 1	10 10 3
„	16 0	16 6 1	13 1 1	5 5 1	4 4 2
Slack	9 11½	...	...	1 9 0	0 14 5
„	10 5	...	...	945 7 2	492 18 5
„	11 3	422 8 3	237 12 5	...	...
„	11 5	938 11 0	535 15 3	395 7 2	225 13 10
„	11 8	17 17 0	10 8 3	...	...
Firewood, &c. ...	...	...	1 8 2	...	1 3 0
Coke and Cartage ...	...	15 18 0	14 16 10	26 0 0	22 3 1
		1571 9 1	£903 11 3	1590 0 1	£871 15 5

W. PENN-LEWIS,

May, 1915. *Borough Treasurer.*

APPENDIX III.

REPORT

ON THE

MUNICIPAL INFANTS' MILK DEPOT

FOR THE YEAR 1914.

The Leicester Municipal Infants' Milk Depot has now completed eight years of existence, having been opened in July, 1906.

During this period its popularity has steadily increased and may now be regarded as firmly established. The annual turnover, as indicated by the gross takings, has steadily grown year by year, and it has now reached the respectable figure of £1600. For several years past it has more than paid its way, in contrast to the experience of most similar institutions, and the receipts have more than balanced the expenditure. Last year there was a small balance on the wrong side, this, however, being entirely attributable to the war. Instead of raising our prices at the end of the summer, when the wholesale prices went up, it was decided to continue charging summer prices, as it was believed there would be much poverty resulting from the war. The takings were thereby reduced, and at the same time the wholesale prices of the milk went up much higher than usual. A considerable number of customers (57) were also allowed to have the milk at a reduced price, whilst a certain amount of milk, to the value of £12 13s. 4d., was in special cases given away free of all charge.

A statement is given at the end of the report showing details of the payments and receipts for 1914.

Dried milk continues to be used to the entire exclusion of other forms of milk, and it has proved so satisfactory that there is no likelihood of any change in this respect.

LEICESTER INFANTS' MILK DEPOT.

Year.	Number of New Cases brought to Depot.	Average Number of Infants on the Books.	Gross Takings.	Excess of Payments over Receipts.
			£ s. d.	£ s. d.
1907	672	202	913 8 0	339 5 3
1908	632	195	872 11 7	167 14 6
1909	639	216	868 12 11	110 17 1
1910	854	274	1043 11 6	43 10 4
				Excess of Receipts over Payments.
1911	939	325	1347 16 11	41 3 7
1912	898	377	1456 8 7	87 2 1
1913	941	386	1541 19 7	53 9 9
				Excess of Payments over Receipts.
1914	911	399	1632 8 5	31 13 9

The following are the numbers for the year 1914:—

Infants remaining on the books, December 31st, 1913...	391	
New Cases admitted during 1914 ...	911	
	——	1302
Infants discharged or died during 1914 ...	885	
Number remaining on the books, December 31st, 1914	417	
	——	1302

The maximum number on the books during the year was 417, which occurred during the month of July and again at the end of the year. The minimum, 386, occurred in March. The average number for the year was 399, as against 386 in the previous year.

There were 28 sets of twins, 109 instances ot second babies, 26 instances of third, six of fourth, 3 of fifth, and 2 of sixth, brought to the Depot. The fact that we have so many "old customers,"—*i.e.*, mothers who come to the Depot with subsequent babies—is a gratifying proof of the satisfaction which the Milk Depot gives.

As a frontispiece to this Report there will be found a photograph of a pair of fine babies, twins, eight months old, who had been fed on the Depot milk since they were a few days old.

462 cases, or over 50 per cent., stated that they had come to the Milk Depot on the advice of medical men—another gratifying fact. I take this opportunity of expressing my appreciation of the support which the general practitioners in the Borough have accorded to the Milk Depot ever since it was started.

A considerable number of cases also were advised to come by the Matron at the Maternity Hospital (Miss Gray), by midwives, or by the Staff of the Royal Infirmary.

BRAND OF MILK USED.

Milk manufactured by the "Hatmaker" process is chiefly used, but in special cases we employ the milk known as "Trumilk."

PRICE OF THE MILK.

The price charged for the milk depends upon the percentage of fat—there being three grades—and also upon the season.

During the past summer the prices charged per lb., were as follows:—

Full Cream	1/-
Three-quarter Cream	10d.
Half Cream	9d.

The wholesale prices usually go up in October or November, and the above prices are then increased by about 2d. per lb. Last winter, however, in consequence of the war, we did not raise the price until January, when it was raised by one penny, whilst the second penny was not put on until end of February.

On the other hand, also owing to the war, we were paying 15/- per cwt. (on whole-cream milk) more than in the previous winter, and on other grades in proportion.

AMOUNT OF MILK USED.

The amount of milk used averages about six hundredweight per week.

INFANTS FROM OUTSIDE THE BOROUGH.

A certain number of infants from outside the Borough were supplied with milk, a small extra charge being made. The cases came from Anstey, Birstall, Blaby, Bramley, Countesthorpe, Hinckley, Ilkley, Newbold Verdon, Oadby, Syston, Thurmaston, Whetstone and Wigston.

CO-OPERATION WITH OTHER BODIES.

The Charity Organisation Society has continued to co-operate, paying for the milk in a few special cases. The number of cases helped by this Society in 1914 has been four: the average period per case being 14 weeks.

The Board of Guardians have helped ten cases in a similar way, though for shorter periods as a rule. The amount paid was (approximately) £3 2s. 10d. This was less than usual.

The following table shows the periods for which infants remained on the Depot.

COMPLETED CASES DURING 1914.

Not more than	
1 week	115
2 weeks	47
4 „	49
2 months	92
3 „	67
4 „	62
5 „	44
6 „	54
7 „	41
8 „	42
9 „	44
10 „	47
11 „	54
12 „	84
Over 12 months	43
	885

OUTLYING DISTRICTS. ARRANGEMENTS WITH RETAIL CHEMISTS.

Most customers call once a week for a fresh supply of milk. Formerly a considerable quantity was sent to customers through the trams parcel department, but this was closed in September, 1914.

To meet the requirements of the outlying districts, arrangements have been made whereby the following retail chemists will in future stock the Milk Depot milk for distribution to bona-fide Milk Depot clients. The chemists in question are:—

1. Mr. Howitt ... Aylestone Park.
2. Mr. Goodess ... Uppingham Road.
3. Mr. Blockley ... Woodgate.
4. Mr. Lewis... ... Narborough Road.

In the case of the last three, the arrangement has only just been started, but the first named has been acting for us for over twelve months and the arrangement has been found to work satisfactorily.

DEATHS.

There were 34 deaths of infants who were "on the Depot," but many of these cases were only brought when the child was already ill or wasting, and the Depot was being tried as a last resort. Many only lived to have the milk a short time.

The principal causes of death were marasmus, bronchitis, measles, diarrhœa, whooping cough and convulsions.

INFANT CONSULTATIONS.

An "Infant Consultation" is held in connection with the Milk Depot on two afternoons a week and constitutes a most important part of the work of the Depot. The Medical Officer of Health and one of his colleagues attend on alternate days, and mothers whose infants are not thriving on the milk, as shown by the weight or otherwise, are advised to bring them to see him. Recent admissions to the Depot are also advised

to come and see the doctor on "consultation" days. The usual attendance varies from 20 to 30, depending largely upon the weather. The average number for the year was 24.

STAFF.

The Infants' Milk Depot continues under the charge of Mrs. Stanion, who has been Manageress of the Depot since it was started. It is undoubtedly very largely owing to her enthusiasm and capable management, coupled with her tactful and kindly manner, that the Depot has been so successful.

Mrs. Stanion is assisted by her sister in law, Miss E. Stanion.

OUTSIDE WORK.

Mrs. Stanion devotes a part of her time to visiting cases in their own homes, and she also acts as the health visitor at one of the schools for mothers (St. Barnabas) carried on under the auspices of the Leicester Health Society.

The number of home visits paid during the year was 1325.

C. K. MILLARD,

Medical Officer of Health.

April, 1915.

BOROUGH OF LEICESTER.

INFANTS' MILK DEPOT.

Receipts and Payments during year ended 31st March, 1915.

PAYMENTS.	£	s.	d.	£	s.	d
Wages	116	1	2			
Purchase of Milk	1369	8	5			
Railway Carriage and Delivery of Milk	5	8	5			
Bottles, Stoppers, &c.	17	0	9			
Rent, Rates and Insurance ...	52	7	5			
Fuel, Light and Water	17	11	1			
Telephone	7	2	9			
Printing and Stationery	29	2	0			
Fittings and Repairs	8	18	9			
Sundries	9	7	8			
				1632	8	5
RECEIPTS.						
Sale of Milk	1570	11	6			
Various	30	3	2			
				1600	14	8
Payments in excess of Receipts ...				£31	13	9

W. PENN-LEWIS,

Borough Treasurer.

May, 1915.

APPENDIX IV.

PUBLIC ANALYST'S REPORT

FOR THE YEAR 1914.

To the Chairman and Members of the Sanitary Committee.

GENTLEMEN,

During the year 1914 the samples of food examined under the Sale of Food and Drugs Act followed on the lines hitherto adopted.

Particular attention was paid to the milk supply on account of its importance, as well as the rapidity with which the daily supply is disposed of; thus rendering the evidence of purity or otherwise difficult.

Of 228 samples examined, 41 were below the legal limit, including 25 reported as containing added water.

Seven persons were prosecuted and convictions obtained in each case.

The percentage of milk reported as containing added water = 10·96 per cent. of the *samples examined*. This must not be taken as representing the actual proportion of watered milks sold in the Borough, as some of these samples were purchased owing to information being given by the public in cases in which the supply was suspected of being of doubtful purity.

97 samples of milk were examined for artificial colouring or preservative, but no indication was found of their presence.

The amount of moisture found in butter showed a tendency to approximate to the legal limit.

Cocoas were carefully examined for excess of fibrous matter, none of the samples contained more than usual.

Your obedient servant,

S. F. BURFORD,

Public Analyst.

Corporation Buildings,
Horsefair Street, Leicester.

TABLE A.

Summary showing Samples taken and submitted for Analysis during 1914.

Nature of Samples.	1st Quarter.		2nd Quarter.		3rd Quarter.		4th Quarter.		Total for Year.	
	Samples taken.	Found Adulterated.	Samples taken.	Found Adulterated.	Samples taken.	Found Adulterated.	Samples taken.	Found Adulterated.	Samples taken.*	Found Adulterated.
Milk (New)	78	3	82	16	38	4	30	2	228	25
„ (Separated)	...	...	...	...	...	...	...	...	...	..
Coffee	6	...	12	...	...	...	6	...	24	...
Cocoa	12	...	...	...	...	...	...	...	12	...
Lard	12	...	12	...	...	...	...	...	24	...
Mustard	6	...	.	...	...	...	6	...	12	...
Cream	...	...	5	...	...	...	...	...	5	...
Butter	36	..	24	...	12	...	24	...	96	...
Bread	12	...	...	...	...	...	...	...	12	...
Margarine	...	...	...	...	...	...	...	...	...	..
Rum	...	...	...	. .	...	...	1	...	1	...
Gin	...	...	...	...	...	...	2	...	2	...
Whisky	...	...	...	...	...	...	2	...	2	...
Brandy	...	...	...	...	...	...	1	...	1	...
Total	162	3	135	16	50	4	72	2	419	25

* Of the total samples, 48 samples of butter, 12 of lard, 18 of coffee and 6 of mustard were taken informally.

TABLE B.

Particulars of Adulterated Samples in 1914.

No. of Sample.	Nature of Sample.	Nature and Amount of Adulteration.	Action Taken and Remarks.
75	New Milk ...	9·0 per cent. of added water ...	Vendor cautioned.
121	" " ...	4·0 " " " ...	Prosecuted. Dismissed on payment of costs.
162	" " ...	45·0 " " " ...	Vendor prosecuted. Fined £10 and costs.
178	" " ...	5·0 " " " ...	Vendor cautioned.
181, 182, 183, 184	" " ...	Below the standard.	No action taken.
185, 187, 188, 189, 190	" " ...	" " "	Prosecutions instituted but subsequently withdrawn.
191	" " ..	" " "	No action taken.
223, 225	" " ...	" " "	Prosecutions instituted, subsequently withdrawn.
244	" " ...	9·0 per cent. of added water ...	Vendor prosecuted. Fined £2 and costs.
245	" " ...	5·0 " " " ...	" " Ordered to pay costs.
257	" " ...	12·0 " " " ...	" " Fined £2 and costs.
331	" " ...	5·0 " " " ..	" " Fined £5 and costs.
333	" " ...	4·0 " " " ...	No action taken. Supplied by vendors of Nos. 334 and 335.
334	" " ...	8.0 " " " ...	Vendor prosecuted. Fined £5 and costs.
335	" " ...	6·0 " " " ...	" " Ordered to pay costs.
396	" " ...	6·0 " " " ...	" " Fined £2 and costs.
397	" " ...	5·0 " " " ...	" " Fined £2 and costs.

APPENDIX V.

CHIEF INSPECTOR'S REPORT

UPON THE

WORK OF THE SANITARY DEPARTMENT

DURING 1914.

To the Medical Officer of Health.

SIR,—I beg to submit the following report of work done by the Inspectors in the Sanitary Department during the year 1914. The appended Tables show the number and the nature of nuisances abated.

I am, Sir,

Your obedient servant,

FRANCIS BRALEY, CERT. SAN. INST.,

Chief Inspector.

9th March, 1915.

STATEMENT A.

Showing the work done by the Sanitary Staff during the year 1914, and also in 1913.

	No. of Visits. 1914.	1913.
Systematic House to House Inspection ...	12,019	10,427
Investigations of Complaints	27,080	26,100
Visits to ascertain the progress of Sanitary and Informal Orders	18,774	20,434
Visits in connection with Infectious Diseases ...	2,999	3,797
Visits to Common Lodging Houses	650	567
Visits to Bakehouses	589	551
Visits to Canal Boats	122	108
Visits to Workshops	1,809	609
Visits to Factories	430	251
Visits to Fried Fish Shops	254	225
Visits to Caravans	134	97
Visits to Marine Stores	33	30
Visits to Home-workers	178	258
Visits to Births	8,933	9,500
Visits to Dairies and Milk Shops	838	916
Visits to Cowsheds	123	262
Visits by Meat Inspectors	12,762	13,446
Visits to Restaurant Kitchens	58	—
	87,785	87,578
Samples of Food, &c., purchased for Analysis under Adulteration Acts	419	298
Observations for the purpose of Smoke Prevention	2,185	2,472
Stacks reported for Smoke Nuisance	32	22
Houses Disinfected by the Sanitary Staff ..	1,186	1,206
Articles Disinfected by Steam	1,161	1,194
Swine reported to Medical Officer of Health ...	71	60
Filthy Houses „ „ „ ...	31	37
Dilapidated Houses „ „ „ ...	219	368
Prosecutions under the Public Health and Local Acts	11	4
Letters (including Complaints of Nuisances) received	1,057	2,806
Letters (including School and Sanitary Notices) sent out from the Offices	8,399	7,987
Drains Tested (Smoke and Fluid)	317	354

STATEMENT B.

During the year Formal and Informal Notices have been served to abate Nuisances as follows:—

	No. of Orders.
To abolish Manure-pits and Ash-pits	38
„ repair ditto ditto	3
„ provide Ash-bins	2,236
„ erect new Water Closets	24
„ repair, alter or rebuild Closets	4
„ fix Closet Hoppers and Syphons	58
„ fix Flushing Apparatus and lay on Water Supply ...	37
„ repair ditto ditto ditto ...	65
„ alter and ventilate Soil Pipes	4
„ stop up or disconnect Cellar Drains	1
„ lay New Drains	2
„ relay or repair Defective Drains	73
„ clear Choked Drains	378
„ cleanse or repair Cisterns	17
„ fix lead or iron Sink Wastes	28
„ fix Gullies	68
„ reset Gullies or provide new Gratings	35
„ erect, alter, screen or repair Urinals	44
„ repair, rehang or provide new Doors for Closets and Dwellings	29
„ repair, renew and make good Spouting	191

STATEMENT B.—continued.

	No. of Orders.
To cleanse and limewash Closets and Passages	111
„ pave Yards and Passages, or repair Paving	346
„ provide new or relay and repair Floors	165
„ repair Roofs	36
„ cleanse and limewash Houses	431
„ ventilate Dwellings	8
„ remove Manure and Offensive Matter	12
„ remove Animals kept in such a condition as to be a nuisance	15
„ alter Chimneys and miscellaneous	326
„ reduce Number of Persons occupying Houses ...	50
„ repair Staircases	38
„ fix 4-inch Ventilating Pipes	22
„ repair Walls	67
„ insert Damp-proof Courses	86
„ arrange windows to open...	222
	*5,270

* The 5270 Defects ordered to be remedied were contained in 4868 Notices, and of these 193 were Formal and 4675 Informal Orders.

STATEMENT C.

Showing the Localities of Sewer Gas Escapes.

	No.
Into Breakfast Rooms, Sitting Rooms, and Dining Rooms	2
„ Houses from Rat Holes	1
„ Kitchens and Sculleries	2
„ Basement Kitchens and Cellars	6
„ Lobbies and other parts of Houses	5
„ Internal Water Closets	3
„ External Water Closets	40
„ Yards, from around badly set Gullies, defective Drains, etc.	79
From Soil Pipes	9
„ Heads and Joints of downright Rain Water Pipes ...	11
„ Untrapped Rain Water Cisterns	3
„ Gullies in Stables	1
„ Ventilating Pipes	9
	171
And in connection with Houses in which Infectious Diseases have arisen	54
Total	225

STATEMENT D.

In connection with Infectious Diseases Inspection, the following defects were found, either in the houses referred to in the certificates, or in the houses, closets, etc., in the same yard.

	No
Defective and Foul Ashpits	2
„ and dilapidated Closets	1
„ and choked Drains	6
„ and unventilated Soil Pipes	1
„ Urinal, Bath and Lavatory Wastes	1
„ Paving and Surface Channels	12
„ Untrapped or badly set Gullies to Sink and Yard Drains	12
„ Water Closet Hoppers and Flushing Apparatus	9
„ Spouting	4
Foul Brick and Defective Shafts to Sinks	1
Foul and Defective Rain Water Cisterns	6
Filthy Urinals, Closets and Passages	3
Filthy Houses...	19
Escapes of Sewer Gas into:	
External Closets	13
Living Rooms and Sculleries	3
Yards, from defective Drains, badly set Gullies, or Rain Water Pipes connected direct with the Sewers or Drains	38
Total	131

STATEMENT E.

In connection with the Inspection of Factories and Workshops, the following Sanitary defects have been found, and Formal and Informal Notices served.

	No. of Orders.
To abolish Manure and Ash-pits	1
„ provide Ash-bins	5
„ provide Ventilation	3
„ erect New Water Closets	26
„ provide Light, Ventilation and Lobbies to Closets ...	76
„ fix Closet Basins and Syphons...	7
„ fix 4-inch Ventilating Pipes	18
„ repair Flushing Apparatus and lay on Water Supply	13
„ alter and ventilate Soil Pipes	1
„ relay and repair defective Drains	1
„ clear choked Drains	19
„ fix Traps or Gully Gratings	2
„ erect, alter, screen, or repair Urinals	8
„ provide new, relay or repair Floors	12
„ repair Roofs	15
„ cleanse and limewash Workshops	74
„ repair Walls	3
Total	284

STATEMENT F.

Showing the number of Offensive Trades carried on, and Registered and Licensed Premises within the Borough requiring the constant attention of the Inspectors.

Description of Trade.	No.
Slaughter Houses (Registered)	66
„ „ (Public)	18
Tripe Houses	26
Common Lodging Houses	30
Bakehouses	256
Cowsheds	42
Milk Shops and Dairies	1243
Tallow Melters	1
Chemical Works	2
Tanners and Fellmongers	2
Bone Boilers	1
Knacker's Yard	1
Gut Scrapers	2

STATEMENT G.

Showing the quantity of Meat, &c., condemned by the Inspectors of Foods during the year 1914.

MEAT, ETC., CONDEMNED AND DESTROYED.

	Tons.	Cwts.	Qrs.	Lbs.
Meat	66	0	1	26
Fish	26	3	2	12
Fruit	2	17	2	18
Vegetables	3	1	2	24
Rabbits	1,828			
Preserved Foods	7,458			
Oysters	6,595			
Poultry	298			
Eggs	5,193			
Hares	21			
Game	181			

APPENDIX VI.

REPORT

OF THE

INSPECTORS OF FOODS.

By MARTIN TYLDESLEY.

During the year 1914 inspection has been made of the following:—Wholesale fish, fruit and vegetable markets (daily); retail fish market (daily, Mondays excepted); general markets (Wednesday and Saturday); meat market (Saturday); cattle markets (fat and store stock); Corporation and private slaughter-houses; butchers', fishmongers', fruiterers', and greengrocers' shops; hawkers' carts and barrows; pork pie manufactories; restaurants; tripe auction; tripe boilers' premises; jam manufactory; cold air stores (Corporation and private); gut scrapers' premises; knackers' yard; and cowsheds.

The amount of food voluntarily surrendered or seized is given in statement G in the Chief Inspectors' Report.

The number of carcases destroyed during the year for tuberculosis was as follows:—

Beef	...	...	...	91 carcases.
„	...	...	...	5 forequarters.
Pork	...	...	...	10 carcases.

In addition to the above carcases, 1 ton 7 cwt. 0qr. 11lbs. of offals were destroyed on account of localised tuberculosis.

There were five prosecutions during the year for exposing unsound meat for sale, and in four cases fines inflicted to the amount of £77 and costs, ranging from £2 to £40. One summons was dismissed.

Two tradesmen were cautioned by the Committee for exposing unsound meat.

There were two registered slaughter-houses closed during the year.

There are 42 cowsheds in the Borough, accommodating 440 cows, and all the sheds were limewashed according to the bye-laws.

MARTIN TYLDESLEY,

Inspector of Foods.

N.B.—One of the Food Inspectors, Frederick Sowerbutts, obtained a Commission in the Army Service Corps soon after war broke out. At the time of issuing this report he is at the front. C. K. M.

APPENDIX VII.

REPORT

OF THE

HEALTH VISITORS.

(A) MRS. HARTSHORN'S REPORT.

To the Medical Officer of Health.

SIR,—I beg to submit my Annual Report of work done by me during the year ending 1914.

BIRTHS.

During the year 1172 births have been notified on the Eastern District. 50 of these were notified by medical men after the adoption of the Notification Act; 56 were notified from Maternity Homes; 36 by parents; while 1030 were notified by midwives. Of these one was still born and seven were dead when visited. 25 were prematurely born.

In addition to these, 58 births were visited by me on the Western District during the interval of the resignation of my late colleague and a re-appointment.

After a first visit had been made 274 of these births were transferred to the Voluntary Health Visitors.

REVISITS.

2197 revisits have been made during this period in the interest of the child, to watch the progress and the carrying out of written and verbal instructions given.

FEEDING.

By far the greater number of these babies have been breast fed, although it is still to be deplored that many mothers who

would otherwise breast feed have to resort to artificial feeding in order to become wage earners in the factory.

The discontinuing of breast feeding also arises from other factors, such as insufficient breast milk, often due to insufficient nourishment; bad breasts, depressed nipples, etc.

ILLEGITIMATE BIRTHS.

30 were illegitimate births.

OPHTHALMIA NEONATORUM.

59 babies were found to have discharge from eyes; 15 of these proved to be ophthalmia, one of whom died, while one other lost the sight of one eye, the other eye being seriously affected. The remaining 44 cases were of a very much less serious character, and all have recovered. 73 revisits have been made to these cases, to declare the eyes clear.

WORKROOMS.

37 workrooms have been inspected and all found satisfactory.

RESTAURANT KITCHENS.

18 restaurant kitchens have also been inspected and found in a satisfactory condition.

HOMEWORKERS.

74 homes have been visited in which various occupations are carried on, and with few exceptions were fairly clean.

SPECIALS AND COMPLAINTS.

62 visits have been made to dirty homes, and others where children have been stated to be neglected, and dealt with according to their merits.

SCHOOL FOR MOTHERS.

Two afternoons I did the infant consultations at St. Barnabas' School for Mothers, and one afternoon at the Milk Depot during the absence of the manageress.

In conclusion may I be permitted to state here, that any deficiency in numbers of visits made in comparison with previous years is due to my having met with a somewhat serious accident which prevented my being on duty for several weeks.

Yours obediently,

H. HARTSHORN.

(B) MISS WALKER'S REPORT.

To the Medical Officer of Health.

SIR,—I beg to submit the following particulars of work done by Nurse Whyte from January 1st to April, 1914.

BIRTHS.

339 births were notified on the Western District and visited during the above period.

REVISITS.

959 revisits were made to watch the progress of the child.

SPECIAL VISITS.

20 special visits were made to dirty homes, etc.

OPHTHALMIA NEONATORUM.

6 of these cases were notified and visited.

OPHTHALMIA REVISITS.

14 revisits were made to the above cases of ophthalmia to watch the progress of the eyes.

HOME WORKERS.

86 visits were made to these homes and were found fairly clean.

RESTAURANT KITCHENS.

12 visits were made to restaurant kitchens and found satisfactory.

The above work was done by Miss Whyte, from January 1st to April 16th, 1914.

May 11th, 1914, I succeeded Miss Whyte.

BIRTHS.

697 births were notified, 35 of these being notified by doctors (10 requested not to visit), 7 were notified by parents and 71 cases were notified from the Maternity Hospital.

The above cases were all visited at least once.

148 births were visited by me on the Eastern District during Mrs. Hartshorn's illness.

58 births were visited by Mrs. Hartshorn on the Western District prior to my appointment.

REVISITS.

2029 revisits have been made by me during the above period, to note the progress of the child, and further advice given when necessary.

PREMATURE BIRTH.

7 were prematurely born.

ILLEGITIMATE.

30 of the births were illegitimate.

OPHTHALMIA NEONATORUM.

37 cases of ophthalmia were notified and visited by me; 5 of these cases were treated by private doctors; 32 had treatment at Royal Infirmary, one case neglected being sent for treatment, the mother being too ill and fearing for the sight, I took the baby to the Infirmary myself, afterwards finding a woman to take the baby for treatment daily.

OPHTHALMIA REVISITS,

232 revisits have been made to these cases, the eyes being dressed occasionally on my visits, sight and eyes cleared satisfactorily with the exception of two babies that died within eight days prematurely. 22 cases visited on the Eastern District for Mrs. Hartshorn.

DISCHARGE FROM THE EYES,

24 babies had a discharge in one or both eyes, but not of a serious character.

SPECIAL VISITS.

53 special visits have been made to homes kept in a dirty condition and neglected children. On my third and fourth

visits I have found the children and their clothes in a much cleaner condition, also the beds and the home greatly improved.

WORKROOMS.

34 workrooms were visited and revisited every three months and found satisfactory.

RESTAURANTS.

23 restaurant kitchens were also visited and revisited and found satisfactory.

COFFEE HOUSES.

7 coffee houses were visited and revisited every 3 months. The Albert coffee house being closed down. Frog Island coffee house being done away with.

MIDWIVES.

Three evenings were occupied in assisting with the inspection of midwives, and three visits were made to midwive's homes.

SCHOOL FOR MOTHERS.

One afternoon spent at St. Barnabas' School and one afternoon at Belgrave Road School.

MILK DEPOT.

On several occasions I have been on duty at the Milk Depot during the absence of the manageress.

Yours obediently,

LILY WALKER,

M.S.M.F., C.M.B.

APPENDIX VIII.

REFUSE DISPOSAL DEPARTMENT.

Report of the Superintendent, Mr. J. L. FREER.

I beg to submit the following particulars of work done in the Refuse Disposal Department during the past year, 1914 ;—

Population of Borough	232,664
Area in Acres	8,586
Miles of Streets	186½

The *House Refuse* of the Borough is all collected by Corporation workmen, with the exception of one small district (Knighton) which is still scavenged by contract. Almost all houses are now provided with the portable covered galvanized iron bins, of which there are 56,099. The Borough is divided into seventeen districts. The men work in gangs of six, with two horses and carts to each gang. Each gang is able to collect fifty-one loads per week. The wages are 27/- per week for collectors and 28/- for drivers; the latter have to attend to their horses, while the collectors wash the carts and clean the harness. Drivers required for Sunday stable duty are granted an extra shilling.

Ash-pit and Trade Refuse and Stable Manure is collected as follows :—The town is divided into four districts. There are four gangs of four men each, with two horses and carts to each gang. The men are paid 5d. per ton of ash-pit refuse collected, and 5d. per load for trade refuse and stable manure, and their average earnings are :—Collectors, 32/- per week; drivers, 34/- per week. The drivers get the extra 2/- for attending to their horses and harness.

The Plant consists of 62 carts, 45 railway wagons, 3 slop carts, and 1 tip wagon.

The number of men employed is as follows :—

Portable Ash-bin Men	88
Ash-pit Men	16
Foremen	2
Wagoners	3
Wharf Men	8
"Tip" Men at Destructors	4
Old Men, Sorting Refuse	4
Mess Room Attendants	2
Total	127

The number of horses is 43.

	1914.	1913.	
Portable Ash-bins collected weekly	56,099	55,543	556 more
Portable Ash-bins collected twice a week	487	492	5 less
Ashpits emptied every month ...	481	572	91 less
Manure-pits emptied at short intervals	191	191	...

AMOUNT OF REFUSE COLLECTED.

	TONS. **1914.**	TONS. 1913.	TONS.
From Portable Ash-bins	36,649	36,984	335 less
From Ash-pits	5,033	5,373	340 less
Trade Refuse	2,298	2,216	82 less
Various (Specials)	90	98	8 less
From Knighton District (House Refuse)	2,176	2,154	22 more
Total Tons	46,246	46,825	579 less

Of the above quantity, 2,950 tons were taken to Manure Wharves and Tips; the remainder was burnt at the Destructors. The amount of stable manure collected was 6,359 cart loads, including 530 loads from the Beast Market.

The sales of manure during 1914 were as follows:—

	TONS.	£	s.	d.
454 Railway Wagon loads, weight	3,331	452	10	0
94 Cart loads	94	10	17	6
Total	3,425	463	7	6
Previous year	2,947	493	15	6

TRADE REFUSE.

3899½ loads of trade refuse (weight, 2,298 tons) were removed and taken to the Destructors, the payment received amounting to £487 8s. 9d.

[NOTE.—A charge of 2s. 6d. per load is made for collecting and burning trade refuse, or 2s. per ton for burning only.]

DILAPIDATED DUST-BINS.

2,450 dilapidated dust-bins were reported; these are renewed by the landlord.

"TATTING."

The saleable articles picked out of the house refuse are sold, and one half of the proceeds is divided amongst the men, the other half being retained by the Corporation. The amount received by the men averaged:—

11d. per week for the first quarter.
1/3 „ „ second quarter.
1/- „ „ third quarter.
9d. „ „ fourth quarter.

HOSPITAL SATURDAY SOCIETY.

All workers in this department subscribe one penny weekly, the total amount raised last year being £26 19s. 0d.

DESTRUCTORS.

AMOUNT OF REFUSE RECEIVED AT THE DESTRUCTORS.

	Nedham Street.	Mill Lane.	Lero.	West Humberstone.	Total.
	Tons.	Tons.	Tons.	Tons.	Tons.
Delivered by Corporation	10,631	11,366	10,005	11,294	43,296
Delivered by Tradesmen	298	1,055	847	158	2,358
Total for 1914 ...	10,929	12,421	10,852	11,452	45,654
Total for 1913 ...	10,882	12,228	11,637	11,653	46,400

J. L. FREER,

Superintendent.

APPENDIX IX.

STREET CLEANSING DEPARTMENT.

Report of the Superintendent, Mr. H. F. WIGFIELD.

My Annual Report for the year 1914 is as follows:—

STREET CLEANSING.

The particulars of the streets swept are:—

	Hand-swept.	Machine-swept.
Once per week	37 miles	20 miles
Twice „	7½ „	23 „
Three times per week ...	½ mile	10½ „
Four „ „ ...	¼ „	3½ „
Six „ „ ...	½ „	10½ „
	45¾ miles	67½ miles

Total length of roads swept, 113¼ miles.

Upwards of 11 miles are also hand-swept on Sundays.

The number of streets swept is 924, and they are attended to in the following manner:—number swept once a week, 523; twice per week, 228; three times per week, 62; four times weekly, 24; six times, 87. In addition, 82 streets are also swept on Sundays. Thus a length of over 241 miles is down to be swept each week.

STREET GULLIES.

The number of gullies emptied during the year was 131,332, compared with 109,906 in 1913.

The actual number of gullies in the streets cleansed by this department is 9,674 Increased attention is being given to this particular work each year.

COURTS AND BACKWAYS.

238 courts and alleys are down for attention, and these were swept once a week during the year.

LOADS OF SWEEPINGS COLLECTED.

The total loads of sweepings collected during the year were:—dry, 8,738; sludge, 3,931; a total of 12,669, as compared with 11,958 loads in the previous year.

STAFF, &c.

Superintendent	1
Foremen	2
Clerk	1
Gangers	10
Sweepers	44
Carters	20
Truckmen and Youths	7
Paper Collectors	4
Street Swillers	3
Orderly Boys	8
Court Cleaners	2
Horsekeepers	2
Tipmen	3
Old Men	2
Blacksmiths, Painters, Wheelwrights, Joiner, Railway Wagon Repairer, &c.	11
Urinal Cleaners	4
Lavatory Attendants	5
Chauffeur	1
Total	130

The hours worked each week are the same as last year, viz.:—54 on day work and 48 on night work. The wages paid to all able-bodied men is 28s. per week.

SANDING AND GRAVELLING.

The number of loads of sand and gravel spread during the year was 1,679, as against 1,644 in 1913.

SNOW REMOVAL.

We had light falls of snow on two occasions last year.

The total number of loads removed was 400, as against 4,613 in 1913. The total cost in excess of our own Staff was £27 18s. 0d., made up as follows:—Overtime (own men), £4 4s. 6d.; Highway and Sewerage Department's men, £13 18s. 2d.; "Casuals," £3 11s. 0d.; and horse hire, £6 4s. 4d.

STREET WATERING, &c.

There were nine hired horses engaged in street watering during the past summer, and four of our own men and horses engaged in the work in dry weather.

During the past two years the cost of hiring horses has gone up from 9s. per day to 12s. per day. This means a very much increased charge on the Department.

The watering done by the Tramways Department with the three watering tanks was as follows:—

1914.	Loads Spread.	Quantity in Gallons.	£	s.	d.
April	383	689,400	44	13	8
May	490	882,000	57	3	4
June	684	1,231,200	79	16	0
July	469	844,200	54	14	4
August	544	979,200	63	9	4
September	255	459,000	29	15	0
	2,825	5,085,000	329	11	8
Previous year ...	2,738	4,928,400	319	8	8

These tanks work to instructions supplied daily by this Department. The cost of watering last year was slightly in excess of that for 1913.

Ninety-four macadam roads were treated with 110 tons of calcium chloride at a cost (exclusive of carting and spreading) of £310 1s. 8d.; 60 roads were treated with granular calcium at a cost of £247 16s. 6d.; and 34 roads treated with liquid calcium cost £62 5s. 2d.

In 1913, eighty-nine roads were treated with 80½ tons of calcium chloride at a cost of £222 11s. 9d.

ANNUAL STATEMENT OF RECEIPTS FROM CONVENIENCES.

Convenience.	Amount Received.			Amount Received Previous Year.		
	£	s.	d.	£	s.	d.
Humberstone Gate	142	10	11	143	1	2
Horsefair Street (Ladies') ...	133	4	1	127	8	9
Belgrave Gate (Ladies') ...	4	4	8	3	9	1
Belgrave Gate (Gent's) ...	9	2	3	10	9	11
Waterloo Street	2	19	1	3	9	10
Haymarket	6	9	10	6	17	11
Northampton Square ...	7	0	9	6	10	10
Russell Square	1	6	6	1	4	7
Infirmary Square	0	16	7	0	11	2
Victoria Park	3	11	7	...		
Market Place	3	8	1	...		
	£314	14	4	£303	3	3

The number of persons usuing the w.c.'s at Humberstone Gate Convenience was 21,928, and 12,238 persons made use of the lavatory accommodation, the amount taken being £91 7s. 4d. and £51 3s. 7d. respectively.

In 1913, the number of persons using the w.c.'s was 21,764, and 12,570 patronised the lavatories. The sum received from the w.c.'s amounted to £90 13s. 8d., and £52 7s. 6d. was obtained from the lavatories.

At the Ladies' Convenience, Horsefair Street, the amounts taken were as follows: lavatories, £5 17s. 11d.; care of parcels and bicycles, £6 11s. 5d.; use of w.c.'s, £120 14s. 9d.; a total of £133 4s. 1d., against £127 8s. 9d. in 1913.

The Market Place Convenience was opened to the public in November last; the receipts to the end of December amounted to a total of £3 8s. 1d.—£2 10s. 0d. from the w.c.'s, and the remainder for the use of the lavatory and care of parcels. Since December the receipts have increased very considerably, and now average about £2 weekly.

ROLLING STOCK.

Street sweeping carts, 24; sludge carts, 26; market cart, 1; orderly bin cart, 1; gravel carts, 7; watering carts and vans, 23; orderly trucks, 13; gravel trucks, 8; snow ploughs, 12; channel scraper, 1; snow scrapers, 5; horse brushes, 14; dray, 1; motor sweeper, 1; a total of 137 vehicles.

HOSPITAL FUND.

All adults in this Department subscribe one penny weekly, and all boys one penny monthly, to the above fund; the amount subscribed last year reaching the sum of £25.

SUMMARY OF MATERIALS HANDLED.

The loads of materials handled during the year were as follows:—

	1914.	1913.
Sweepings collected (dry)	8,738	8,469
„ „ (sludge) ...	3,931	3,489
Horse Manure collected (orderly boxes)	908	902
Market Refuse	843	823
Horse Manure, re-carted to gardens ...	534	570
Sweepings „ „ ...	618	846
Loads of Snow removed	400	4,613
Loads of Gravel spread	1,679	1,644
Loads of Water spread (own carts) ...	19,061	14,745
Miscellaneous	1,044	794
Stable Refuse to Jarvis Street ...	312	312
	38,068	37,207

There is an increase of 711 loads of sweepings collected, which is mainly due to the help received, for a portion of the year, from the new Motor Sweeper.

A decrease of 4,213 loads of snow is shewn, and an increase of 4,316 loads of water spread.

H. F. WIGFIELD,

Cleansing Superintendent.

APPENDIX X.

STATISTICAL TABLES.

(For List of Tables see page viii. of Report.)

MUNICIPAL WARDS. TABLE 1.

Area, Number of Inhabited Houses and Population.

WARD. (1)	Area in Acres. (2)	No. of Inhabited Tenements Census 1911. (3)	No. of Inhabited Tenements July, 1914. (4)	No. of Persons per Tenement Census 1911. (5)	Population Census 1911. (6)	Estimated Population, 1914. (7)
1. St. Martin's	81	602	585	4·49	2704	2626
2. Newton	153	2207	2221	4·20	9274	9338
3. St. Margaret's	274	3097	3155	4·27	13254	13471
4. Wyggeston	111	3383	3475	4·31	14594	14977
5. Latimer	250	3691	3772	4·64	17127	17502
6. Charnwood	116	1959	2012	4·32	8464	8691
7. Wycliffe	147	2725	2750	4·29	11712	11797
8. De Montfort	350	1692	1679	4·40	7458	7387
9. The Castle	370	3137	3134	4·34	13645	13601
10. Westcotes	801	5577	5934	4·22	23554	25041
11. The Abbey	891	4436	4566	4·66	20699	21277
12. Belgrave	1013	3699	3844	4·34	16081	12682
13. West Humberstone	887	3929	4176	4·74	18635	19794
14. Spinney Hill	702	5359	5650	4·42	23717	24973
15. Knighton	910	3555	3903	4·20	14931	16392
16. Aylestone	1530	2433	2599	4·68	11393	12163

TABLE 2.

Births, Deaths, and Deaths under 1 year in each Municipal Ward in 1914, and previous years.

Name of Ward.	1908			1909			1910			1911			1912			1913			1914		
	Total Births.	Total Deaths.	Deaths under 1 year.	Total Births.	Total Deaths.	Deaths under 1 year.	Total Births.	Total Deaths.	Deaths under 1 year.	Total Births.	Total Deaths.	Deaths under 1 year.	Total Births.	Total Deaths.	Deaths under 1 year.	Total Births.	Total Deaths.	Deaths under 1 year.	Total Births.	Total Deaths.	Deaths under 1 year.
1. St. Martin's ...	54	51	12	51	28	6	59	40	13	49	32	7	40	32	5	51	34	7	52	28	4
2. Newton	478*	188	55	474*	179	53	255	151	40	251	166	49	235	174	44	236	170	40	243	180	45
3. St. Margaret's ...	357	238	64	341	194	53	339	193	63	371	217	70	369	200	59	373	249	78	371	247	69
4. Wyggeston ...	456	278	100	441	274	73	453	230	82	468	263	79	474	317	69	438	287	87	438	348	98
5. Latimer	480	265	73	417	229	55	468	259	80	473	255	88	478	274	60	496	233	53	490	254	60
6. Charnwood ...	187	100	23	168	83	10	154	101	23	137	128	23	141	103	15	164	118	23	146	106	18
7. Wycliffe	190	276	29	176	172	32	218	146	15	209	161	35	195	233	21	210	126	21	212	140	19
8. De Montfort ...	84	105	15	90	103	16	86	76	13	106	94	12	93	105	10	89	86	7	93	101	8
9. The Castle ...	314	207	41	296	218	58	305	198	48	322	203	49	298	196	40	302	215	39	290	192	31
10. Westcotes ...	485	174	52	471	245	50	496	219	56	486	260	46	475	264	36	452	258	42	454	284	40
11. The Abbey ...	487	245	67	494	274	69	546	201	59	488	218	53	498	221	40	527	226	57	501	271	56
12. Belgrave	451	206	54	394	216	42	414	170	48	349	189	31	401	214	42	377	225	45	390	232	40
13. West Humberstone	484	269	58	476	238	65	523	197	49	517	236	75	445	284	39	502	211	43	474	228	44
14. Spinney Hill ...	541	266	47	532	259	56	465	230	37	450	222	30	484	244	37	504	245	46	466	245	53
15. Knighton ...	284	135	17	270	120	18	251	113	18	270	111	8	254	127	21	263	129	16	262	141	16
16. Aylestone .	274	116	30	275	129	32	295	126	34	275	117	21	302	130	27	294	129	26	262	122	16

N.B.—In order to make a fair comparison, all the deaths at the Borough Asylum and Union Workhouse have been subtracted, though not distributed. The Poor Law Infirmary at North Evington is just outside the Borough Boundary. The deaths occurring there have been distributed in their respective Wards with the exception of those transferred to the Infirmary from the Workhouse; these have been dealt with in the same way as Workhouse deaths. The births at the Maternity Hospital have been distributed to their respective Wards since 1909, the figures being obtained by the courtesy of the Matron of the Maternity Hospital.

* Includes births occurring at Maternity Hospital.

TABLE 3.

Vital Statistics in each Municipal Ward in 1914 and previous three years.

Name of Ward.	1911			1912			1913			1914		
	Death Rate.	Birth Rate.	Infant Mortality.	Death Rate.	Birth Rate.	Infant Mortality.	Death Rate.	Birth Rate.	Infant Mortality.	Death Rate.	Birth Rate.	Infant Mortality.
1. St. Martin	11.8	18·1	142	11.5	14·4	125	13·0	19·6	137	10·6	19·8	76
2. Newton	17·8	27·0	195	18·7	25·2	187	18·4	25·5	169	19·2	26·0	185
3. St. Margaret's ...	16·3	27·9	188	15·1	27·7	159	18·7	28·1	209	18·3	27·5	185
4. Wyggeston	18·0	32·0	168	21·6	32·2	145	19·3	29·5	198	23·2	29·2	223
5. Latimer	14·8	27·6	186	15·8	27·7	125	13·3	28·4	106	14·5	27·9	122
6. Charnwood	15·0	16.1	167	12·1	16·6	106	13·6	18·9	140	12·1	16·7	123
7. Wycliffe	14·9	17·8	167	20·0	16·7	107	11·7	17·9	100	12·9	17·9	89
8. De Montfort	12·6	14·2	113	14·4	12·8	107	11·5	11·9	78	13·6	12·5	86
9. The Castle	14·8	23·5	152	14·4	21·9	134	15·8	22·2	129	12·1	21·3	106
10. Westcotes	11·0	20·6	94	10·8	19·4	75	10·4	18·2	92	11·3	18·1	88
11. The Abbey	10·5	23·5	108	10·5	23·7	80	10·6	24·9	108	12·7	23·5	111
12. Belgrave	11·7	21.7	88	13·1	24·5	104	13·6	22·8	119	18·2	30·7	102
13. West Humberstone ...	13·2	27.7	145	14·6	23·0	87	11·3	25·6	85	12·0	23·9	92
14. Spinney Hill ...	9·3	18·9	66	10·0	19·8	76	9·9	20·5	91	9·0	18·6	113
15. Knighton	7·4	18·0	29	8·1	16·2	82	8·0	16·3	60	8·6	15·9	61
16. Aylestone	10·2	24·1	76	10·9	25·5	89	10·7	24·5	88	10·0	21·5	61
Whole Borough	13·40	22·94	130·0	13·59	22·59	109·0	13·36	22·85	119·3	14·10	22·10	119·9

NOTE.—The population has been calculated from the number of inhabited houses in each ward.

Wycliffe Ward contains the Union Workhouse, and West Humberstone Ward the Borough Asylum. It is not possible to distribute the deaths in these institutions to their respective wards, but they have been subtracted from the wards in question in order to enable a fair comparison to be made. The population of these institutions (Workhouse, 966; Asylum, 887) has also been subtracted.

The Union Infirmary is just outside the Borough Boundary. The deaths occurring there have been distributed to their respective wards, with the exception of the deaths of persons who had been transferred to the Infirmary from the Workhouse. These have been treated in the same way as Workhouse deaths.

The Maternity Hospital, Causeway Lane, is in Newton Ward. The births which occurred there have since 1909 been distributed, the figures being obtained by the courtesy of the Matron.

TABLE 4. MUNICIPAL WARDS.

Average Rates for Five Years, 1910-1914.

Ward. (1)	Average Rates.		
	Death-rate. (2)	Birth-rate. (3)	Infant Mortality. (4)
1. St. Martin's	12·1	18.5	140
2. Newton	18·1	26·2	178
3. St. Margaret's ...	16·4	27·1	185
4. Wyggeston	19·5	30·7	183
5. Latimer	14·6	27·7	141
6. Charnwood	12·8	17·1	137
7. Wycliffe	14·7	17·9	106
8. De Montfort... ...	12·4	12·6	107
9. The Castle	14·1	22·0	135
10. Westcotes	10·4	19·2	92
11. The Abbey	10·7	24·2	103
12. Belgrave	13·3	24·9	105
13. West Humberstone ...	12·4	25·7	100
14. Spinney Hill... ...	9·4	19·3	85
15. Knighton	7·8	16·4	60
16. Aylestone	10·5	24·1	86
Whole Borough ...	14·10	22·10	119·9

MUNICIPAL WARDS. TABLE 5.

Zymotic-rates, Diarrhœa-rates and Phthisis-rates in 1914.

WARD. (1)	Zymotic-rate, exclusive of Diarrhœa. (2)	Diarrhœa. rate. (3)	Phthisis-rate. (4)
1. St. Martin's	·3	·0	·3
2. Newton	2·1	·2	1·0
3. St. Margaret's ...	1·4	·6	1·7
4. Wyggeston	2·4	·8	2·0
5. Latimer	·9	·3	1·6
6. Charnwood	1·0	·0	·6
7. Wycliffe	·4	·0	1·8
8. De Montfort... ...	·8	·1	·9
9. The Castle	·6	·3	1·1
10. Westcotes	·8	·0	1·0
11. The Abbey	·9	·2	1·0
12. Belgrave	1·1	·4	1·4
13. West Humberstone ...	1·0	·1	1·2
14. Spinney Hill ...	·7	·1	·9
15. Knighton	·2	·1	·3
16. Aylestone	·4	·4	·7

N.B.—The deaths occurring in the Leicester Infirmary have been distributed to their respective wards. Those occurring in the Workhouse and in the Borough Asylum, have had to be excluded, as the addresses of the patients are not obtainable. In the case of Wards 7 and 13 a deduction has been made from the population on account of the inmates of the Workhouse and Asylum respectively.

The Union Infirmary is just outside the Borough, and the deaths there are distributed to their respective wards, with the exception of the deaths of persons transferred to the Infirmary from the Workhouse. These have been treated in the same way as the Workhouse deaths.

TABLE 6.

Deaths in each Ward from all causes in 1914.

WARD. (1)	0 to 1 year. (2)	1 to 5. (3)	5 to 60. (4)	Over 60 years. (5)	Total all ages. (6)	Smallpox. (7)	Measles. (8)	Scarlet Fever. (9)	Whooping Cough. (10)	Diphtheria. (11)	Typhoid Fever. (12)	Other Zymotics. (13)	Total. (14)	Diarrhœa. (15)	Phthisis. (16)	Respiratory Diseases. (17)	Other Causes. (18)	Convulsions. (19)	Total. (20)
No. 1. St. Martin's... ...	4	3	14	7	28	...	1	...	...	...	...	...	1	..	1	8	18	...	27
,, 2. Newton	45	27	47	61	180	...	12	...	4	1	...	3	20	2	10	40	103	5	160
,, 3. St. Margaret's ...	69	28	82	68	247	...	15	...	3	...	...	2	20	9	25	47	139	7	227
,, 4. Wyggeston	98	38	117	95	348	...	19	...	10	3	1	4	37	13	31	70	188	9	311
,, 5. Latimer	60	22	93	79	254	...	8	...	6	1	...	2	17	6	29	48	148	6	237
,, 6. Charnwood	18	12	42	34	106	...	...	1	6	1	1	...	9	...	6	13	77	1	97
,, 7. Wycliffe	19	15	64	127	225	...	...	...	3	1	1	...	5	1	20	52	146	1	220
,, 8. De Montfort ...	8	6	33	54	101	...	...	...	2	1	1	2	6	1	7	17	70	...	95
,, 9. The Castle	31	13	69	79	192	...	2	...	6	1	...	...	9	5	15	35	127	1	183
,, 10. Westcotes	40	23	99	122	284	...	12	1	2	1	2	4	22	2	26	47	183	4	262
,, 11. The Abbey	56	32	120	63	271	...	8	...	7	3	...	2	20	6	23	47	167	8	251
,, 12. Belgrave	40	20	85	87	232	...	6	...	6	...	...	2	14	6	18	38	153	3	218
,, 13. West Humberstone...	44	33	116	113	306	...	5	2	8	3	...	2	20	3	23	72	185	3	286
,, 14. Spinney Hill ...	53	19	90	83	245	...	6	1	7	2	...	3	19	3	24	32	159	8	226
,, 15. Knighton	16	6	46	73	141	...	2	...	...	1	...	1	4	2	6	17	109	3	137
,, 16. Aylestone	16	10	51	45	122	...	1	...	2	...	...	2	5	5	9	27	76	...	117
Union Workhouse	1	1	2	16	20	..	...	...	1	...	...	...	1	...	...	7	12	...	19
Borough Asylum	...	...	45	33	78	...	...	...	...	..	...	...	...	...	7	20	51	...	78
Workhouse deaths at Poor Law Infirmary	3	6	10	46	65	...	..	...	...	...	...	...	...	1	9	23	32	...	65

Deaths in Institutions have been subtracted from the Wards in which the Institutions are situated; and (except in the case of the Workhouse and Asylum) have been distributed to the Wards to which they belong. Deaths of persons transferred from the Workhouse to the Poor Law Infirmary, however, have not been distributed, as the home addresses of such persons are not obtainable.

TABLE 7.

Vital Statistics of 22 Great Provincial Towns of over 100,000 Population for the Year 1914.

Name of Town.	Population estimated to middle of 1914.	Per 1000 living			ZYMOTIC DEATH-RATE per 1000 living.						Death-rate per 1000 births.	
		Birth-rate.	Recorded Death-rate.	Corrected* Death-rate.	Small-pox.	Measles.	Scarlet Fever.	Diph-theria.	Whooping Cough.	Enteric Fever.	Diarrhœa and Enteritis (under 2 yrs).	Total Deaths under 1 year.
	1	2	3	4	5	6	7	8	9	10	11	12
1 Willesden	166,634	24·7	9·0	9·4	...	0·05	0·03	0·14	0·20	0·02	20·27	82
2 Croydon	181,596	22·0	10·8	10·4	...	0·06	0·03	0 09	0·13	0·03	16·24	80
3 Portsmouth... ...	245,827	23·3	12·4	12·3	...	0·15	0·02	0·32	0·20	0·12	12·42	84
4 Bristol	363,312	21·4	13·8	13.6	0·00	0·25	0·06	0 10	0.18	0·02	15·94	101
5 Leicester	**232,664**	**22·1**	**14·1**	**14·5**	...	**0·41**	**0·02**	**0·08**	**0·30**	**0·02**	**21·46**	**119**
6 Cardiff	188,495	25 3	14.3	14·2	...	0·32	0·10	0.22	0·38	0·06	19 81	109
7 London	4,516,612	24·3	14·4	14·4	0·00	0 31	0·07	0·16	0·20	0·03	27·64	104
8 Hull	291,118	27·1	15·0	15·1	...	0·32	0·02	0·16	0·16	0·14	32·29	121
9 Nottingham ...	266,918	23·2	15·3	15·4	...	0·50	0·04	0·13	0·24	0·02	29·07	146
10 West Ham	296,570	29 8	15·1	15·5	...	0·45	0·04	0 16	0·38	0·04	29·30	108
11 Birmingham ...	868,430	26·8	15·0	15·6	...	0·36	0·17	0·30	0 36	0·02	27·46	122
12 Leeds	459,260	23·3	15·0	15·9	...	0·48	0·07	0·13	0·31	0·05	26 61	124
13 Bolton	185,247	22·1	14·6	15·9	...	0 32	0·01	0·25	0·26	0·06	37·01	118
14 Bradford	291,482	19.5	15·4	16·2	...	0·39	0·03	0·12	0·32	0·07	14·55	124
15 Edinburgh	324,618	19·9	15·5	16·0	...	0·33	0·13	0·29	0·04	0·03	14·53	109
16 Sheffield	476,971	27·3	16·3	17·1	...	0·78	0·19	0·14	0·48	0·55	31·55	132
17 Salford	234,975	26·9	16·5	17·7	...	0·48	0·33	0.16	0·33	0·10	26·46	126
18 Glasgow	1,053,926	28·0	16·6	18·2	...	0·46	0·21	0.15	0.49	0·07	23·21	132
19 Manchester	738,538	25·3	16·8	18·1	...	0·40	0·22	0·15	0.38	0·05	26·85	128
20 Stoke-on-Trent ...	241,430	31·6	17·5	18 7	...	0 36	0·00	0·31	0·34	0·07	43·15	144
21 Newcastle	271,523	27·8	18·7	19·7	...	0·78	0·16	0·10	0·28	0·08	31·46	137
22 Liverpool	767,992	30·0	19·5	20·1	...	0·67	0·16	0·14	0·32	0·05	40·62	139

* Corrected for Age and Sex by the Registrar General's Factors.

TABLE 8.

Deaths in each Ward from Phthisis during the Ten Years, 1905-1914.

No. of Ward.	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	Total Deaths from Phthisis in 10 years.	Average Annual Phthisis Rate.
1. St. Martin's	5	8	2	4	1	2	5	0	1	1	29	1·10
2. Newton	20	23	12	17	15	16	26	19	20	10	178	1·90
3. St. Margaret's	24	29	20	19	13	14	23	26	26	25	219	1·62
4. Wyggeston	30	31	26	31	26	27	20	28	29	31	279	1·86
5. Latimer	26	25	32	24	24	22	26	21	28	29	257	1·46
6. Charnwood	17	19	15	11	9	10	12	6	12	6	117	1·34
7. Wycliffe	15	15	24	18	22	11	7	11	4	11	138	1·27
8. De Montfort	9	14	5	3	4	3	6	5	4	7	60	·81
9. The Castle	19	29	19	19	12	19	25	22	23	15	202	1·48
10. Westcotes	18	23	12	17	31	25	31	30	22	26	235	·93
11. The Abbey	19	25	35	33	21	26	17	19	19	23	237	1·11
12. Belgrave	13	26	20	18	24	18	12	17	23	18	189	1·49
13. West Humberstone ...	2	11	21	13	23	24	33	32	25	16	200	1·05
14. Spinney Hill	15	20	18	21	29	27	20	17	28	24	219	·87
15. Knighton	7	9	6	8	15	5	6	10	11	6	83	·50
16. Aylestone	14	17	6	19	12	16	9	9	12	9	123	1·01
Union Workhouse	23	10	...	...	...	...	...	...	...	...	33	...
Borough Asylum	12	5	2	12	9	11	5	2	6	7	71	...
Poor Law Infirmary (from Workhouse)	...	...	...	...	...	5	4	10	8	9	36	...
Transferable death (Ward not known)	...	...	...	..	...	...	1	...	...	...	1	...
Total	288	339	275	287	290	281	288	284	301	273	2906	1·28
General Infirmary	6	9	2	2	4	6	7	1	3	2	42	...
Poor Law Infirmary	...	...	36	30	53	36	45	53	43	48	344	...

N.B.—The deaths from Phthisis occurring at the Union Workhouse and at the Borough Asylum have been subtracted from Wycliffe and West Humberstone Wards respectively, but have not been distributed to the wards to which the persons belonged; whilst the deaths occurring at the General and Poor Law Infirmaries have been distributed, except in the cases of persons removed to the Poor Law Infirmary from the Workhouse, these have been treated in the same way as Workhouse deaths.

TABLE 9.

LEICESTER BOROUGH.

Showing estimated Population, Marriage-rates, Birth-rates, and Death-rates (General and Zymotic) per 1000 living during the last 69 years, 1846-1914.

Year. (1)	Estimated Population. (2)	Marriage Rate. (3)	Birth Rate. (4)	Death Rate. (5)	Zymotic (Death) Rate. (6)	Infant Mortality. (7)
1846	55,707	21·00	39·72	29·48	8·11	
1847	56,696	18·80	35·36	25·69	4·12	
1848	57,705	20·86	34·71	25·77	5·87	
1849	58,736	21·58	36·96	28·73	7·05	
1850	59,788	24·04	37·45	23·64	4·13	
1851	60,760	21·11	40·11	25·57	5·48	
1852	61,467	22·96	38·83	28·84	8·42	
1853	62,181	22·90	36·71	27·02	5·45	
1854	62,903	20·40	39·06	25·11	6·65	
1855	63,624	19·14	36·16	23·55	2·87	
1856	64,366	20·02	37·32	21·16	3·10	
1857	65,119	20·60	37·48	27·58	8·19	
1858	65,835	19·14	34·54	28·76	8·07	
1859	66,663	22·56	37·77	24·59	4·99	
1860	67,456	19·80	38.05	20·47	1·27	
1861	68,638	18·58	37·01	25·25	5·71	
1862	70,986	21·30	38·07	23·38	3·01	
1863	73,413	25·74	40·00	29·95	7·96	
1864	75,922	25·68	41·01	26·96	5·41	
1865	78,516	25·38	41·09	25·02	5·20	208·9
1866	81,197	24·94	42·02	23·33	3·37	205·1
1867	83,970	22·18	41·66	24·59	4·31	226·2
1868	86,837	22·62	41·32	28·15	7·88	256·6
1869	89,804	21·12	41·87	25·60	5·10	229·0
1870	92,873	21·22	40·90	27·33	7·24	235·2
1871	95,823	23·06	41·55	26·07	5·83	252·4
1872	98,251	23·90	42·36	26·95	8·23	231·3
1873	100,741	24·00	44·14	23·83	5·05	208·4
1874	103,294	20·90	42·34	24·29	3·83	222·6
1875	105,913	22·36	40·31	27·28	6·56	242·0
1876	108,599	22·64	44·02	23·58	5·26	199·9
1877	111,355	21·24	42·68	23·48	3·21	188·7
1878	114,182	19·38	41·85	21·89	4·18	205 2
1879	117,083	19·48	40·11	22·64	3·06	187·3
1880	120,059	19·60	40·04	24·73	6·48	220·1
1881	123,146	18·66	38·26	21·55	4·45	204·8
1882	126,275	19·02	38·46	20·04	3·23	194·4
1883	129,483	18·64	37·26	19·18	2·56	190·7

TABLE 9.—Continued.

Year. (1)	Estimated Population. (2)	Marriage Rate. (3)	Birth Rate. (4)	Death Rate. (5)	Zymotic (Death) Rate. (6)	Infant Mortality. (7)
1884	132,773	17·34	36·53	22·12	4·20	233·5
1885	136,147	16·36	34·39	19·39	3·32	193·5
1886	139,606	17·46	34·80	19 62	2·81	216·5
1887	143,153	16·60	32·79	19·10	3·05	215·8
1888	146,790	15·48	32·79	18·16	2·45	204·7
1889	150,520	16·08	31·82	16·63	2·30	209·6
1890	154,344	16·52	30·44	17·79	2·18	203·7
1891*	177,353†	19·16	33·58	21·22	3·39	214·5
1892‡	180,550	16·71	32·21	18·00	2·57	197·7
1893	183,900	15·85	32·65	19·72	3·56	220.4
1894	187,250	16·70	32·01	14·57	1·93	161.9
1895	190,600	16·41	31·28	17·41	3·01	206·6
1896	194,100	17·52	32·00	16·88	2·98	185·7
1897	197,600	16·78	31·63	17·98	1·97	206·0
1898	201,250	17·78	30·56	17·29	3·41	191·1
1899	204,900	17·58	30·61	18·18	3·41	196·0
1900	208,600	17·30	29·75	17·87	3·60	174·1
1901	212,498	17.17	29·03	15·71	2·34	178·0
1902§	213,974	16·36	29·50	14·82	1·56	153·3
1903	215,461	16·56	27·93	14·22	1·48	161·3
1904	216,958	17·00	27·56	15·05	2·01	161·1
1905	218,464	17·26	26·95	14·01	1·69	146·5
1906	219,980	16·16	26·66	15·18	2·46	166·2
1907	221,508	16·67	24·98	13·48	·96	130·1
1908	223,046	16·03	25·46	13·98	1·62	129·7
1909	224,595	15·75	24·18	14·03	1·37	126·6
1910	226,154	17·12	23·79	12·40	·76	126·3
1911	227,634	16·61	22·94	13·40	1·41	130·0
1912	229,294	16·36	22·59	13·59	·92	109·0
1913	230,970	16·46	22.85	13·36	.75	119·3
1914	232,664	16·75	22·10	14·10	1·13	119·9

N.B.—The above figures, prior to the year 1890, are those supplied by Mr. J. T. Biggs to the Royal Commission on Vaccination, and are taken from the Commission's Fourth Report.

* All figures after 1891 refer to extended Borough.

† This is the Population of the extended Borough. The figures in the other columns for same year refer to the old Borough.

‡ The figures for the nine years, 1892—1900, have been revised on the basis of the 1901 Census.

§ The figures for the years, 1902—1910, have been revised on the basis of the 1911 Census.

TABLE 10.

Number of Deaths from certain specified causes in 1914 and previous years.

	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	**1914**
Zymotic Diseases (except Diarrhœa) ...	205	177	171	291	146	250	212	118	166	206	89	223
Diarrhœa	133	289	211	258	73	120	106	70	167	24	105	64
Enteritis	52	35	32	25	58	63	29	27	52	21	49	55
Cancer	192	213	180	168	199	214	195	200	236	226	252	269
Phthisis	266	353	288	339	275	287	290	281	288	284	301	273
Apoplexy and Paralysis	179	201	165	185	150	169	170	170	129	168	169	190
Convulsions	117	107	89	98	85	103	83	72	59	60	69	59
Heart Disease	322	301	313	322	369	312	357	328	344	394	369	355
Bronchitis and Pneumonia	421	405	397	422	461	422	535	389	374	509	453	576
Premature Birth	154	111	147	156	133	113	106	125	109	115	116	131
Atrophy and Debility	168	187	173	160	119	121	132	151	122	99	113	102
Old Age	218	240	247	297	242	205	214	213	216	193	187	191
Violence	88	87	84	96	85	88	86	90	88	115	80	81
Ill-defined and not specified causes ...	45	49	48	85	31	61	40	40	60	34	43	53

TABLE 11.

Showing the Number of Inhabited Houses, Marriages, Births, Deaths, Zymotic Deaths, and Deaths in Public Institutions.

Year. (1)	No. of Inhabited Houses. (2)	Marriages. (3)	Registered Births. (4)	Corrected Number of Deaths.				Deaths in Public Institutions. (9)	Deaths from Seven principa Zymotic Diseases. (10)
				Total all Ages. (5)	Under One Year. (6)	Under Five Years. (7)	Over 60 Years. (8)		
1896	40,349	1701	6212	3277	1154	1624	689	441	580
1897	41,519	1658	6252	3553	1288	1758	746	340	645
1898	44,472	1789	6152	3480	1183	1703	773	406	687
1899	44,585	1801	6273	3727	1230	1707	897	543	699
1900	44,884	1805	6207	3729	1083	1627	863	583	751
1901	45,547	1825	6169	3338	1098	1435	827	553	499
1902	47,712	1752	6313	3172	981	1303	828	473	334
1903	48,348	1785	6018	3065	971	1279	954	583	320
1904	49,043	1845	5981	3266	964	1255	897	601	438
1905	49,348	1886	5888	3062	863	1148	897	685	370
1906	49,492	1778	5865	3341	975	1397	871	667	543
1907	48,825	1847	5534	2988	720	989	927	660	213
1908	49,174	1788	5680	3119	737	1109	952	507	363
1909	50,070	1769	5431	3153	688	1006	1073	608	308
1910	50,898	1936	5380	2806	680	890	897	533	172
1911	51,481	1891	5222	3051	679	965	1035	585	322
1912	52,373	1876	5182	3118	565	846	1080	600	212
1913	52,888	1901	5278	3088	630	836	1078	637	174
1914	53,455	1949	5144	3282	617	924	1190	688	263

NOTE.—In 1891 (Census year) the Borough was extended.
No. of Inhabited Houses of old Borough was 29,288; of new Borough, 35,795.

TABLE 12.

Showing the Annual Death-rates of Children, and proportion of Deaths in Public Institutions in a Thousand Deaths, for the past sixteen years.

Year. (1)	Deaths of Children under one year per 1000 Births, = Infant Death-rate. (2)	Deaths of Children under one year of age per 1000 of Total Deaths. (3)	Deaths of Children under five years of age per 1000 of Total Deaths. (4)	Deaths of Persons over sixty per 1000 of Total Deaths. (5)	Deaths in Public Institutions per 1000 of Total Deaths. (6)
1899	196	330	458	237	145
1900	174	290	436	231	156
1901	178	328	429	247	165
1902	153	327	410	261	145
1903	161	323	426	311	194
1904	161	298	384	274	184
1905	146	281	374	292	223
1906	166	296	418	260	199
1907	130	240	330	310	220
1908	129	236	355	305	162
1909	126	218	319	340	192
1910	126	242	317	319	189
1911	130	222	316	339	191
1912	109	181	271	346	192
1913	119	204	270	349	206
1914	119	187	281	362	209

TABLE 13.

Rates of Mortality of Children under one year of age from the chief Infantile Diseases, per 1000 Births.

Disease.	1909		1910		1911		1912		1913		1914	
	Total Deaths.	Rate per 1000 Births.	Total Deaths.	Rate per 1000 Births.	Total Deaths.	Rate per 1000 Births.	Total Deaths.	Rate per 1000 Births.	Total Deaths.	Rate per 1000 Births.	Total Deaths.	Rate per 1000 Births.
From all causes ...	688	126·6	680	126·3	679	130·0	565	109·0	630	119·3	617	119·9
Atrophy and Debility	117	21·5	147	27·3	111	21·2	93	17·9	106	20·0	96	18·6
Diarrhœa	91	16·7	58	10·7	146	27·9	21	4·0	91	17·2	48	9·3
Convulsions	70	12·8	63	11·7	52	9·9	43	8·2	48	9·0	50	9·7
Lung Diseases ...	91	16·7	103	19·1	66	12·6	107	20·6	91	17·2	82	15·9
Premature Birth ...	106	19·5	125	23·2	109	20·8	115	22·1	116	21·9	131	25·4
Tubercular Diseases ...	22	4·0	24	4·4	21	4·0	22	4·2	13	2·4	19	3·6
Measles	23	4·2	3	·5	19	3·6	26	5·0	7	1·3	23	4·4
Whooping Cough ...	26	4·7	32	5·9	19	3·6	20	3·8	4	0·7	34	6·6

TABLE 14.

Total Deaths, Death-rate, and Percentage of Deaths, from the eight principal groups of Diseases.

Disease.	1911			1912			1913			1914		
	Total Deaths.	Rate per 1000 Living.	Relative Percentage of Total Deaths.	Total Deaths.	Rate pe 1000r Living.	Relative Percentage of Total Deaths.	Total Deaths.	Rate per 1000 Living.	Relative Percentage of Total Deaths.	Total Deaths.	Rate per 1000 Living.	Relative Percentage of Total Deaths.
Zymotic	367	1·6	12·0	254	1·1	8·1	220	0·9	7·1	318	1·3	9·6
Parasitic	0	·00	·00	0	·00	·00	0	·00	·00	1	·00	·03
Dietetic	7	·03	·2	8	·03	·25	11	·04	·35	9	·03	·27
Constitutional	654	2·8	21·4	656	2·8	21·0	714	3·0	23·1	607	2·9	21·2
Local	1412	6·2	46·2	1609	7·0	51·6	1571	6·8	50·8	1669	7·1	50·8
Developmental	463	2·0	15·1	441	1·9	14·1	449	1·9	14·5	454	1·9	13·8
Violence	88	·3	2·8	115	·50	3·6	80	·34	2·5	81	·34	2·4
Ill-defined	60	·2	1·9	34	·14	1·0	43	·18	1·3	53	·22	1·6

TABLE 15.

Number of Persons living at different Age Periods in Borough of Leicester.*

	All Ages.	Under 1 year.	Under 5 years.	5	10	15	20	30	40	50	60	70	80	90
Census, 1891 ...	174,624	4,780	21,749	20,331	19,574	18,818	32,212	23,812	17,013	10,976	6,560	3,003	544	32
Census, 1901 ...	211,579	5,273	24,266	21,873	21,431	22,224	41,519	30,405	22,400	14,586	8,377	3,680	773	45
Census, 1911 ...	227,222	4,674	22,833	22,343	22,002	21,946	40,867	35,460	26,619	18,273	11,112	4,731	990	46

Proportion of Persons living at different Age Periods in Borough of Leicester.

(expressed as percentage of total population).

	All Ages.	Under 1 year.	Under 5 years.	5	10	15	20	30	40	50	60	70	80	90
Census, 1891 ...	100·0	2·7	12·4	11·6	11·2	10·8	18·4	13·7	9·7	6·3	3·8	1·7	·31	·02
Census, 1901 ...	100·0	2·5	11·4	10·3	10·1	10·5	19·6	14·3	10·6	6·8	3·9	1·7	·36	·02
Census, 1911 ...	100·0	2·0	10·0	9·8	9·6	9·6	17·9	15·6	11·7	8·0	4·8	2·0	·44	·02

*Abstracted from the Census Returns.

TABLE 16.

Showing Number of Empties in Leicester (supplied by Mr. W. Earp, Chief Assistant Overseer).

Date.	Houses.	Cottages.	Warehouses.	Workshops, &c.	Offices.	Total.
January 1, 1908	821	2,384	68	54	68	3,393
January 1, 1909	700	2,147	65	49	72	3,033
January 4, 1910	715	1,849	80	67	70	2,781
January 3, 1911	660	1,325	54	67	68	2,174
January 2, 1912	505	898	48	55	69	1,575
July 2, „	447	810	60	78	84	1,479
January 1, 1913	353	521	43	70	57	1,044
July 1, 1913	305	431	42	77	65	920
January 6, 1914	203	258	32	52	55	600
June 16 „	204	187	20	52	29	492
January 1, 1915	236	197	29	47	51	560

TABLE 17.

Showing mean weekly Temperature of Earth at Depth of 1-ft and 4-ft for the year 1914.

Week ending.	1 foot.	4 feet.	Number of Deaths per week from Diarrhœa.
May 30	53·0	52·2	1
June 6	54·0	54·2	1
„ 13	55·0	52·7	2
„ 20	60·2	54·0	1
„ 27	60·0	56·2	...
July 4	63·7	57·5	1
„ 11	61·0	58·0	...
„ 18	63·5	58·7	1
„ 25	62·0	59·2	4
Aug. 1	59·5	59·0	1
„ 8	59·5	58·2	1
„ 15	60·5	58·5	3
„ 22	61·5	59·5	1
„ 29	61·5	59·7	2
Sept. 5	62·5	59·7	6
„ 12	62·0	60·0	7
„ 19	57·5	59·0	7
„ 26	57·0	58·0	6
Oct. 3	54·5	56·0	7
„ 10	54·2	55·2	6
„ 17	53·7	55·0	1
„ 24	51·2	54·2	...

TABLE 18.

Monthly Rainfall and Temperature during 1914, as recorded at the Borough Mental Hospital.

Figures supplied by DR. J. F. DIXON.

Month.	Rainfall in Inches.	Mean Temperature Fahr.
January	1·15	36·45°
February	1·31	43·53°
March	2·70	42·47°
April	1 49	49·13°
May	1·44	50·51°
June	2·33	57·6°
July	2·14	61·66°
August	1·67	61·10°
September	0·57	55·88°
October	2·14	50·56°
November	3·46	43·18°
December	4·74	39·64°

Total Rainfall in 1914 ... ... 25·14

Rainfall in previous years:—

1910	26.75 inches.
1911	22·00 „
1912	35·07 „
1913	24·09 „

TABLE 19.

List of Registered Midwives practising in Leicester. (January, 1915).

Name.	Registered No.	Address.
Beck, Ann	3,394	8, Jackson Street.
†Blyth, Eliza	2,760	19, Baggrave Street.
Brant, Elizabeth	9,818	41, Dashwood Road.
*Bucklar, A. A.	25,486	24, Woodbine Avenue.
Carr, Mary	7,567	81, Cooper Street.
Chambers, Priscilla	2,906	31, Upper Charles Street.
‡*Coleman, Beatrice	36,726	16, Westbourne Street.
*Dawkins, Jemima	36,754	16, Glenfield Road.
‡*Fisher, Rosetta	30,582	15, Southgate Street.
‡*Folwell, Maria	36,784	15, Southgate Street.
Freer, Mary Ann	406	52, Marjorie Street.
Gawthorne, Fanny	30,974	45, Aylestone Road.
Howsam, Miriam	5,223	90, Sylvan Street.
†Howe, Alice Elizabeth	4,095	14, Welland Street.
†Hepplewhite, Edith Mary	3,865	144, Narborough Road.
‡*Hill, Matilda	28,009	37, Denmark Road.
‡*Harratt, Lizzie Annie	23,568	27, Ross's Walk.
*Harratt, Sarah	33,745	27, Ross's Walk.
*Hutchins, Ada	33,774	2, Shaftesbury Avenue.
Lappage, Mary Jane	7,772	21, Dunton Street.
*Larrad, Charlotte	39,714	34, Quorn Road.
Morris, Elizabeth	799	302, Humberstone Road.
‡*Noon, Lucy A.	30,688	1, Spence Street.
Russon, Emma	6,585	15, Moore's Road.
Shelley, Margaret	57	71, Stanley Street.
†Skinner, Ada	12,276	41, Lansdowne Road.
*Simister, E. E. Kemsey	28,446	98, St. Saviour's Road.
Smith, Rosetta	5,478	50 Noble Street.
Weston, Adelaide	689	105, Grasmere Street.
Woodward, Charlotte	1,039	180, Grasmere Street.
Walker, Emma	4,330	11, Abbey Park Road.
Wheelhouse, Margaret		16, Glenfield Road.
Total	32.	

* Holds Certificate of Central Midwives' Board.
† Holds Certificate of London Obstetrical Society.
‡ Trained at Maternity Hospital, Causeway Lane.

TABLE 20.

Showing the number of Deaths from Zymotic Diseases in the Fourteen Years, 1901-1914.

Disease	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	**1914**
Small Pox	0	5	21	4	0	0	0	0	0	0	0	0	0	0
Measles	17	73	74	32	53	80	60	167	109	13	71	96	31	97
Scarlet Fever ...	6	11	15	4	36	52	44	29	23	15	9	13	7	5
Diphtheria	155	29	28	6	11	27	17	9	14	11	21	21	19	19
Whooping Cough ...	77	67	36	89	50	112	14	30	51	53	43	50	11	72
Enteric Fever ...	20	12	13	14	9	14	5	8	5	10	11	7	1	6
Diarrhœa	224	137	133	289	211	258	73	120	106	70	167	23	105	64
Erysipelas	5	6	9	6	3	2	4	5	6	3	5	5	5	9
Influenza	13	14	6	17	2	0	17	15	19	13	10	15	19	24
Puerperal Fever ...	4	5	3	5	7	4	2	2	4	3	7	4	2	4
Totals	521	359	338	466	382	549	236	385	337	191	344	234	200	300

TABLE 21.

Showing the number of Notification Certificates for the Principal Zymotic Diseases for the Fourteen Years, 1901-1914.

Disease.	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	**1914**
Small Pox	4	18	406	307	5	1	0	0	0	0	0	0	0	0
Scarlet Fever ...	758	826	533	554	1117	2301	1710	1206	1768	1013	1309	1298	548	577
Diphtheria	1034	320	211	97	173	315	178	123	140	114	246	220	185	136
Enteric Fever ...	126	81	58	64	68	67	47	43	36	36	47	56	21	18
Erysipelas	181	225	214	239	253	158	166	162	196	156	143	170	192	258
Puerperal Fever ...	12	15	11	16	20	10	10	12	8	13	19	10	18	11
Phthisis	...	...	156	182	225	215	212	197	499	354	514	827*	872	730
Other forms ...	..	...	...	...	...	...	...	...	...	...	...	...	329†	138
Ophthalmia ...	...	...	...	...	...	...	...	...	...	...	...	..	15	55
Totals	2115	1476	1389	1473	1861	3067	2323	1743	2647	1686	2278	2581	2180	1923

Note.—Prior to the year 1900 a Local Notification Act was in force, under which first cases only in a house were notifiable. The figures, therefore, prior to that year, refer to infected "houses," not "persons."

* 424 of these were private cases, 226 from Hospitals, 154 Poor Law, 3 from Schools, and 20 from Tuberculosis Dispensary not otherwise notified. Compulsory notification came into force on January 1st, 1912.

†First became notifiable February, 1913.

TABLE 22.

Showing Births, Vaccinations, and Smallpox in Leicester, 1838-1914.

Year. (1)	Births. (2)	Vaccinations Registd. Public and Pvt. (3)	Smallpox Deaths. (4)	Smallpox Cases. (5)	Year. (6)	Births. (7)	Vaccinations Registd. Public and Pvt. (8)	Exemptions Granted (9)	Smallpox Deaths. (10)	Smallpox Cases. (11)
1838	1815	Not known	11	...	1876	4781	3426	...	...	...
1839	2024	...	50	...	1877	4753	3653	...	6	12
1840	1967	...	56	...	1878	4779	3372	...	1	8
1841	1972	...	31	...	1879	4697	3146	...	...	...
1842	1942	...	...	...	1880	4860	2886	...	...	1
1843	2035	...	...	...	1881	4712	3417	...	2	6
1844	2087	...	9	...	1882	4857	3106	...	5	29
1845	2197	...	164	...	1883	4825	1958	...	3	12
1846	2213	...	12	...	1884	4851	1763	...	...	6†
1847	2005	...	1	...	1885	4683	1842	...	...	8
1848	2003	...	31	...	1886	4863	1122	...	...	1
1849	2171	1613	66	...	1887	4695	471	...	...	10†
1850	2239	1240	5	...	1888	4814	314	...	...	22†
1851	2437	1292	2	...	1889	4796	172	...	...	...
1852	2387	1637	52	...	1890	4699	131	...	...	...
1853	2283	1843	11	...	1891	4790	92	...	...	...
1854	2467	2275	..	...	1892	5816	133	...	6	38
1855	2301	1771	...	...	1893	6006	249	...	15	320
1856	2402	1771	1	...	1894	5995	133	...	...	8
1857	2441	1880	17	...	1895	5962	75	...	...	4
1858	2276	2026	53	...	1896	6212	86	...	...	...
1859	2518	1447	3	...	1897	6252	81	...	...	...
1860	2567	1766	2	...	1898	6152	92	...	...	...
1861	2540	1614	1	...	1899	6273	156	167	...	...
1862	2723	1388	...	...	1900	6207	343	598	...	...
1863	2937	1608	5	...	1901	6169	357	500	...	4
1864	3114	1916	104	...	1902	6313	1237	1500	5	18
1865	3226	1183	10	...	1903	6018	2487	1029	21	406
1866	3412	1641	3	...	1904	5981	1232	1044	4	307*
1867	3496	1544	2	...	1905	5888	987	1112	...	5
1868	3588	3379	1	...	1906	5865	1073	1080	...	1
1869	3760	3560	...	...	1907	5534	1093	1256	...	...
1870	3799	3103	...	...	1908	5680	659	2401	...	...
1871	3982	3230	12	Not known	1909	5431	660	2367	...	...
1872	4162	4456	346	,,	1910	5380	564	2335	...	...
1873	4447	3692	2	,,	1911	5222	475	2964	...	...
1874	4374	3764	...	,,	1912	5182	447	3173	...	...
1875	4270	3527	1	1†	1913	5278	436	3391	...	...
					1914	5144	293	3438	...	...

The figures in this Table prior to the year 1890 are taken from the Fourth Report of the Royal Commission on Vaccination, App. 3, Tables, 5, 6 and 51. They were prepared and handed to the Royal Commission by Mr. J. T. Biggs.

In 1863-64, owing to the Smallpox epidemic which prevailed, there were 4,320 additional public vaccinations performed by the Medical Officers to the Guardians. These were chiefly vaccinations of children omitted in previous years. They are not included in the figures for the two years in question.

* These are the revised figures for the 12 months ending Dec. 31st, 1904. In the corresponding Table appearing in the Report for 1911 the figure is given as 321. The latter is the correct figure for the epidemic of 1903-1904, which begins in December, 1903.

† These figures have been corrected (for 1912 report) after reference to original reports.

TABLE 23.
Scarlet Fever Statistics.

Year.	Actual Numbers Recorded.			Rates.				
	Deaths	Cases Notified	Cases removed to Hospital	Deaths per 100,000 Pop.	Cases Notified per 50,000 Pop. ‡	Cases Removed to Hospital per 50,000 Pop.	Per-centage removed to Hospital	Per-centage Fatality
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
1880	119	802	230	99·1	334·1	95·8	28·6	14·8
1881	184	1065	388	149·5	432·9	157·7	36·4	17·2
1882	72	763	460	57·1	302·7	182·5	60·2	9·4
1883	91	797	383	70·3	308·9	148·4	48·0	11·4
1884	63	701	354	47·5	263·5	133·1	50·4	8·9
1885	113	1816	900	82·9	667·6	330·8	49·5	6·2
1886	44	817	439	31·5	291·7	156·7	53·7	5·3
1887	5	272	151	3·5	95·1	52·7	55·5	1·8
1888	4	132	94	2·7	44·8	31·9	71·2	3·0
1889	6	409	327	3·9	136·3	109·0	79·9	1·4
1890	38	516	471	24·6	167·5	152·9	91·2	7·3
1891	17	794	636	9·6	224·2	179·6	80·1	2·1
1892	41	1331	733	22·6	367·6	202·4	55·0	3·0
1893	81	2308	none*	44·0	627·1	none	none	3·5
1894	30	855	413	16·0	228·6	110·4	48·3	3·5
1895	15	723	445	7.8	189·2	116·4	61·5	2·0
1896	48	2110	1008	24·7	543·8	259·7	47·7	2·2
1897	73	1645	1048	36·8	415·4	264·6	63·7	4·4
1898	44	923	699	21·8	229·6	173·8	75·7	4·7
1899	42	1247	866	20·5	305·6	212·2	69·4	3·3
1900	28	839	574	13·3	200·7	137·3	68·4	3·3
1901	6	758	485	2·9	178·7	114·3	63·9	·7
1902	11	826	579	5·1†	192·9†	135·2†	70·0	1·3
1903	15	533	130*	6·9	123·9	30·2	24·3	2·8
1904	4	554	239*	1·8	128·2	55·3	43·1	·7
1905	36	1117	739	16·5	256·1	169·4	66·1	3·2
1906	52	2301	1471	23·7	525·3	335·8	63·9	2·2
1907	44	1710	1196	19·9	386·8	270·5	69.9	2·5
1908	29	1206	869	13·0	270·4	194·8	72·0	2·4
1909	23	1768	1166	10·2	394·6	260·2	65·9	1·3
1910	15	1013	739	6·6	224·1	163·4	72·9	1·4
1911	9	1309	908	3·9	287·5	200·0	69·3	·7
1912	14	1298	801	6·1	283·0	174·6	61·7	1·0
1913	7	548	384	3·0	118·6	83·1	70·0	1·2
1914	5	577	380	2·1	123·9	81·6	65·8	·8

Prior to the year 1900 a Local Notification Act was in force, under which first cases only in a house were notifiable. Allowance must be made for this in comparing with recent years.

* Smallpox Years. Hospital required during part of year for Smallpox.

† The rates for the years 1902-10 have been recalculated on population revised in the light of the 1911 Census.

‡ A diagram illustrating the figures in column 6 was given in the Annual Report for 1909.

TABLE 24.

Leicester. Scarlet Fever.—"Return" Case Statistics.

Year.	1908	1909	1910	1911	1912	1913	1914
Total Cases Notified	1,206	1,768	1,013	1,309	1,298	548	577
Number of Patients Discharged from Hospital	851	1,165	778	855	824	394	402
Average Days Stay	48·1	37·9	38·6	30·8	36·9	40·7	41·2
Number of "Infecting" Cases	57	83	53	47	50	13	15
Percentage of "Infecting" Cases	6·7	7·1	6·8	5·5	6·0	3·3	3.7
Number of Deaths in Hospital	19	17	13	6	10	6	4
Case Mortality in Completed Cases	2·2	1·43	1·67	·70	1·2	1·5	·99

The term "Infecting" Case implies a case which on returning home is followed by one or more further cases in the same house, these cases being known as "Return" Cases.

TABLE 25.

Diphtheria Statistics, Leicester, 1858-1914.

Year. (1)	No. of Deaths. (2)	Deaths per Million Living. (3)	Year.	No. of Deaths.	No. of Notified Cases.	Deaths per Million Population.	No. of cases Removed to Isolation Hospital.
1858	4	61	1880	23	87	192	
1859	10	150	1881	11	63	89	
1860	2	30	1882	5	38	40	
1861	4	58	1883	6	26	46	
1862	2	28	1884	11	84	83	
1863	7	93	1885	14	55	102	
1864	2	26	1886	4	51	29	
1865	3	38	1887	13	81	90	
1866	3	37	1888	13	67	89	
1867	3	36	1889	10	84	66	
1868	10	115	1890	11	75	71	
1869	9	110	1891	14	65	78	
1870	11	118	1892	10	67	55	
1871	7	74	1893	20	139	108	
1872	2	20	1894	12	66	64	
1873	7	69	1895	36	75	188	
1874	8	77	1896	53	170	273	
1875	7	66	1897	73	229	374	
1876	10	92	1898	63	218	313	
1877	9	80	1899	222	892	1083	
1878	5	44	1900	316	1452	1514	
1879	11	94	1901	155	1034	729	592
			1902	29	320	*135	183
			1903	28	211	129	47
			1904	6	97	27	26
			1905	11	173	50	89
			1906	27	315	122	166
			1907	17	178	76	102
			1908	9	123	40	92
			1909	14	140	62	83
			1910	11	114	48	70
			1911	21	246	92	113
			1912	21	220	91	143
			1913	19	187	82	133
			1914	19	136	81	110

N.B.—The local Notification Act came into force in 1879, and from that year the number of Notifications (Diphtheria) received are added. The figures after 1891 refer to the extended Borough of Leicester. Prior to 1900, first cases only were notifiable.

The rates for the years 1902-10 have been recalculated from the revised population in the light of the 1911 Census.

TABLE 26.

Enteric Fever.—Cases and Deaths in past years.

Year. (1)	Cases Notified. (2)	Deaths. (3)	Cases per 1000 Pop. (4)	Deaths per 1000 Pop. (5)	Cases removed to Hospital.† (6)
1887	222	31	1·55	·22	
1888	266	32	1·81	·22	
1889	147	22	·97	·14	
1890	165	24	1·07	·15	
1891	178	29	1·00	·16	
1892	116	17	·64	·09	
1893	392	47	2·13	·25	
1894	215	27	1·15	·14	
1895	248	38	1·30	·20	
1896	283	40	1·46	·21	
1897	215	38	1·08	·19	
1898	237	27	1·18	·13	
1899	162	28	·79	·14	
1900	117	26	·36	·12	
1901	126	20	·59	·09	60
1902*	81	12	·38	·05	54
1903	58	13	·27	·06	24
1904	64	14	·29	·06	37
1905	68	9	·31	·04	43
1906	67	14	·30	·06	58
1907	47	5	·21	·02	35
1908	43	8	·19	·03	29
1909	36	5	·16	·02	19
1910	36	10	·15	·04	26
1911	47	11	·20	·04	23
1912	56	7	·24	·03	39
1913	21	1	·09	·00	12
1914	18	6	·07	·02	10

N.B.—Prior to the year 1900 the figures indicate first cases only in a house.

* The rates for the years 1902-10 have been revised in the light of the 1911 Census.

† Enteric Fever cases were not treated in the Isolation Hospital until the Groby Road Hospital was opened at the end of 1900.

TABLE 27.

Diarrhœa and Enteritis Statistics.

Year.	No. of Diarrhœa Deaths.	No. of Enteritis Deaths.	Diarrhœa *plus* Enteritis.		Diarrhœa *plus* Enteritis under 1 year of age.		Mean Temperature 4ft. earth, 10 hottest weeks of year.
			Deaths.	Rate per 1000 Pop.	Deaths.	Rate per 1000 Births.	
1887	247	10	257	1·7	215	45·8	
1888	148	13	161	1·1	123	25·5	
1889	121	15	136	0·9	195	40·6	
1890	218	27	245	1·5	204	43·4	
1891	204	22	226	1·2	194	40·5	
1892	214	22	236	1·3	201	34·5	
1893	399	22	421	2·3	356	59·2	
1894	176	17	193	1·0	160	26·6	
1895	369	50	419	2·2	353	59·2	
1896	272	68	340	1·7	303	48·7	
1897	360	112	472	2·3	391	62·5	59·7
1898	323	86	409	2·0	346	56·2	59·3
1899	292	109	401	1·9	334	53·2	61·3
1900	286	90	376	1·8	331	53·3	59·7
1901	224	78	302	1·4	259	41·9	60·1
1902	137	42	179	0·84	154	24·3	57·6
1903	133	52	185	0·86	156	25·9	57·6
1904	275	35	310	1·43	277	46·3	59·5
1905	211	32	243	1·11	208	35·3	60·2
1906	258	54	312	1·42	266	45·3	59·8
1907	73	58	131	0·59	108	19·5	57·5
1908	120	63	183	0·82	148	26·0	58·6
1909	106	29	135	0·60	115	21·1	57·4
1910	70	27	97	0·43	70	13·0	57·0
1911	167	52	219	0·96	180	34·4	60·5
1912	24	21	45	0·19	34	6·5	57·6
1913	105	49	154	0·66	128	24·2	57·4
1914	64	55	119	0·51	86	16·7	59·3

TABLE 28.

Showing Number of Deaths from Tubercular Diseases in Leicester in past Years.

Year. (1)	Phthisis.* Deaths. (2)	Phthisis.* Rate per 100,000 Population. (3)	Other Tuberculous Diseases. Deaths. (4)	Other Tuberculous Diseases. Rate per 100,000 Population. (5)	Total Tuberculous Deaths. Deaths. (6)	Total Tuberculous Deaths. Rate per 100,000 Population. (7)
1894	207	110	104	56	311	166
1895	189	99	141	74	330	173
1896	220	113	128	66	348	179
1897	215	108	128	65	343	173
1898	221	109	137	68	358	177
1899	202	98	129	63	331	161
1900	230	110	144	69	374	179
1901	271	127	80	38	351	165
1902†	272	127	86	40	358	168
1903	266	123	111	51	377	175
1904	353	163	96	44	449	207
1905	288	132	87	40	375	171
1906	339	154	71	32	410	187
1907	275	124	99	44	374	169
1908	287	128	104	46	391	175
1909	290	129	82	36	372	166
1910	281	124	77	34	358	158
1911	288	126	66	28	354	155
1912	284	123	89	38	373	162
1913	301	130	82	35	383	165
1914	273	117	88	37	361	155

* In comparing the Phthisis figures for the years prior to 1901 with the figures for later years, it will be noticed that an apparent increase in the phthisis rate has occurred. It will also be seen, however, that there has been a proportionate decrease in the rate for "other tubercular diseases." The explanation is that in 1901 a different method of classification was adopted whereby a certain number of cases which had hitherto been classified as other tubercular diseases were transferred to the heading of "phthisis." If the total deaths from tuberculous diseases be considered it will be observed that no increase, but, on the other hand, a decrease has taken place in the past decade as compared with the previous one.

† The rates for the years 1902-10 have been revised in the light of the 1911 Census.

TABLE 29.

Age and Sex Distribution of Deaths from Phthisis in 1914.

Age Period.	Males.	Females.	Total.
0 to 5	4	...	4
5 „ 10	...	...	..
10 „ 20	9	17	26
20 „ 30	25	40	65
30 „ 40	42	28	70
40 „ 50	38	24	62
50 „ 60	17	14	31
60 „ 70	11	3	14
70 „ 80	1	...	1
Over 80	...	...	...
Total	147	126	273

Occupations of Persons Dying from Phthisis in 1914.

	M.	F.		M.	F.
SHOE TRADE:					
Finishers	16	...	Butcher	1	...
Clickers	8	...	Porters	3	...
Rivetters	6	...	Vanmen	1	...
Pressmen	6	..	Stokers	1	...
Machinists	1	4	Hawkers	4	...
Various	17	4	Carpenter	1	...
			Laundress	...	1
Total in Shoes ...	54	8	School Teacher ...	...	1
			Printers	1	...
Hosiery Trade* ...	5	24	Various	31	3
Labourers	16	...	Occupations not stated (includes Married Women, Widows, Children, and Persons of no occupation) ..	13	83
Clerks	5	...			
Tailoring Trade ...	3	3			
Painters	2	...			
Mechanics	2	...			
Cigar Hands		3			
Licensed Victuallers ...	2	...			
Plumber	1	...			
Stonemason	1	...	Total	147	126

* A large number of *married* women are engaged in the Hosiery Trade, but these are not included, for in the case of deaths of married women and widows, only the husband's occupation is registered.

TABLE 30.

Cancer Statistics for past Twenty-seven Years.

YEAR.	40 to 60 Years.				Over 60 Years.				Total of Cancer Deaths, all ages.		Cancer Death-rate per 100,000 of Population.
	Males.		Females.		Males.		Females.				
	Cancer Deaths.	Percentage of Total Deaths.	Cancer Deaths.	Percentage of Total Deaths.	Cancer Deaths.	Percentage of Total Deaths.	Cancer Deaths.	Percentage of Total Deaths.	Males.	Females.	
1888	11	6·3	23	12·9	7	2·7	16	5·1	21	45	44
1889	13	6·7	25	15·0	16	6·4	19	7·3	32	46	51
1890	10	4·8	25	12·2	12	3·8	23	6·5	23	56	51
1891	8	4·1	34	17·6	8	2·6	20	5·2	19	59	43
1892	14	6·2	28	14 0	18	5·8	22	6·0	38	57	52
1893	9	3·6	43	17·0	17	5·2	39	9·2	28	90	64
1894	11	5·2	34	17·3	13	5·0	29	9·3	28	70	52
1895	14	5·9	38	16·0	12	3·2	35	8·5	29	81	57
1896	18	8·0	39	16·1	14	4·7	23	5·8	33	69	52
1897	19	8·4	55	21·5	28	7·8	36	9·2	51	102	77
1898	24	9·7	31	15 2	23	6·2	29	7·1	50	66	57
1899	20	7·5	35	13·5	39	9·1	35	7·4	62	77	67
1900	25	8·1	41	13·8	24	5·9	33	7·2	57	83	67
1901	26	9·9	46	18·4	24	6·2	48	10·8	54	107	75
1902	21	8·0	51	19·9	39	9·8	43	9 9	63	108	79
1903	31	12·4	47	20·1	29	7·6	62	13·9	70	122	89
1904	35	12·2	43	16·4	51	11·3	63	12·4	94	119	98
1905	24	9·6	52	20·7	45	10·7	52	10·9	71	109	82
1906	22	7·4	34	15·9	40	9·8	55	11·8	69	99	76
1907	28	10·5	64	23·5	41	8·0	52	11·1	73	126	89
1908	29	9·5	50	20·2	53	12·2	60	11·5	90	124	95
1909	30	9·9	33	12·2	39	8·5	74	11·9	80	115	86
1910	43	15·2	42	16·6	44	10·5	53	11·0	94	106	88
1911	27	10·5	67	25·0	50	10·9	78	13·4	80	156	103
1912	30	9·1	60	21 1	53	10·2	60	10·7	86	140	98
1913	43	12·8	57	20·5	68	12·6	62	11·4	118	134	109
1914	40	11·6	61	19·9	78	13·1	70	11·7	123	146	115

TABLE 31.

CANCER DEATHS, 1914.

Deaths of Males and Females from Cancer, arranged in age periods and according to parts of body affected.

Part of Body affected.	20 to 40 years.		40 to 60 years.		Over 60 years.		Totals.		Both Sexes.
	M.	F.	M.	F.	M.	F.	M.	F.	
Pylorus	1	...	3	3	...	...	4	3	7
Liver	...	...	4	6	11	10	15	16	31
Stomach	...	2	9	9	15	11	24	22	46
Intestines	..	...	4	6	6	9	10	15	25
Uterus	...	4	...	11	...	10	...	25	25
Breast	...	2	...	12	...	10	...	24	24
Rectum	...	...	1	...	11	8	12	8	20
Lung	...	...	1	1	2	...	3	1	4
Bladder	...	...	3	...	7	1	10	1	11
Tongue	...	...	2	...	4	...	6	...	6
Throat	...	...	1	...	2	...	3	...	3
Larynx	...	...	1	...	1	...	2	...	2
Ovary	...	3	...	6	...	...	...	9	9
Æsophagus	...	...	2	...	2	2	4	2	6
Kidney	...	...	1	...	1	2	2	2	4
Pelvis	...	...	...	1	2	...	2	1	3
Pancreas	1	...	1	2	...	1	2	3	5
Testicle	...	...	1	...	1	...	2	...	2
Lumbar Vertebræ ...	...	...	...	1	...	...	...	1	1
Jaw	...	1	...	1	1	1	1	3	4
Mouth	...	...	...	...	2	...	2	...	2
Foot	..	...	...	...	...	1	...	1	1
Spine	..	...	...	1	...	...	...	1	1
Cervical Glands ...	...	...	1	4	1	1	2	5	7
Prostate	...	...	...	...	4	...	4	...	4
Face	...	...	...	...	1	...	1	...	1
Brain	...	1	...	...	...	...	...	1	1
Not Stated	1	...	4	1	5	1	10	2	12
Totals	3	13	39	65	79	68	121	146	267

TABLE 32. (L.G.B. Table I.)

Vital Statistics of whole District during 1914 and previous Years. Borough of Leicester.

Year. (1)	Population estimated to middle of each year, revised in light of 1911 Census. (2)	Births. Uncorrected Number. (3)	Births. Nett. Number. (4)	Births. Nett. Rate. (5)	Total Deaths Registered in the District. Number. (6)	Total Deaths Registered in the District. Rate. (7)	Transferable Deaths. Of Non-residents registered in the District. (8)	Transferable Deaths. Of Residents not registered in the District. (9)	Nett Deaths belonging to the District. Under 1 Year of Age. Number. (10)	Nett Deaths belonging to the District. Under 1 Year of Age. Rate per 1000 Nett Births. (11)	Nett Deaths belonging to the District. At all Ages. Number. (12)	Nett Deaths belonging to the District. At all Ages. Rate. (13)
1909	224,595		5431	24·18	2895		87	345	688	126·6	3153	14·03
1910	226,154		5380	23·79	2601		73	278	680	126·3	2806	12·40
1911	227,634	5160	5222	22·94	2799	12·29	110	362	679	130·0	3051	13·40
1912	229,294	5112	5182	22·59	2826	12·32	102	393	565	109·0	3118	13·59
1913	230,970	5222	5278	22·85	2817	12·19	126	397	630	119·3	3088	13·36
1914	232,664	5091	5144	22·10	2996	12·87	145	431	617	119·9	3282	14·10

Total population at all ages	232,664	Area of District in acres (exclusive of area covered by water)	8,582
Number of inhabited houses	53,455		
Average number of persons per house ...	4·41		

NOTE.—This Table has been filled in in accordance with the instructions given on the form supplied by the Local Government Board. The population and rates for the years prior to 1911 have been revised in the light of the 1911 Census.

TABLE 33. (L.G.B. Table IV.)

Borough of Leicester.

INFANT MORTALITY DURING THE YEAR 1914.

Nett Deaths from stated causes at various Ages under 1 Year of Age.

Cause of Death.	Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 1 Month	1-3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths Under 1 Year
All Causes Certified.	136	25	30	28	219	121	102	98	77	617
Small-pox	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	1	5	17	23
Scarlet Fever	...	...	...	...	...	...	...	...	...	...
Whooping-cough	...	...	...	...	1	1	4	10	14	5	34
Diphtheria and Croup	...	...	...	...	...	...	...	...	...	1	1
Erysipelas	...	...	...	...	...	...	...	1	...	...	1
Tuberculous Meningitis	...	...	...	...	...	...	1	...	3	1	5
Abdominal Tuberculosis	...	...	...	..	...	...	1	2	2	...	5
Other Tuberculous Diseases	...	...	...	...	...	...	1	2	5	1	9
Meningitis (*not Tuberculous*)	...	...	...	...	...	...	...	2	3	4	9
Convulsions	...	...	...	5	3	3	1	12	8	17	7	6	50
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	1	1	2	15	10	5	9	41
Pneumonia (all forms)	...	...	...	...	1	1	9	5	10	16	41
Diarrhœa	...	...	...	...	...	1	3	4	14	15	11	4	48
Enteritis	...	...	...	...	...	1	1	2	12	13	9	2	38
Gastritis	...	...	...	...	...	...	...	...	2	1	1	...	4
Syphilis	...	...	...	...	1	...	...	1	...	2	1	...	4
Rickets	...	...	...	...	...	...	...	...	...	...	1	1	2
Suffocation (overlying)	...	...	1	1	...	2	4	...	...	...	6
Injury at Birth	...	...	3	...	...	...	3	...	...	...	...	...	3
Atelectasis	...	...	...	2	1	...	...	3	...	...	...	...	...	3
Congenital Malformations	...	1	...	1	1	3	2	1	...	...	6
Premature Birth	...	...	95	9	9	8	121	9	1	...	...	131
Atrophy, Debility and Marasmus	...	...	...	23	8	8	8	47	29	9	5	6	96
Other Causes	...	...	...	7	2	5	3	17	10	10	16	4	57

Nett Births in the Year { legitimate, 4,896. illegitimate, 248. } 617

Nett Deaths in the Year of { legitimate infants, 585. illegitimate infants, 32. }

MORTALITY TABLE.

CLASSIFICATION OF DEATHS IN 1914 ACCORDING TO CAUSE.

MORTALITY TABLE.

Deaths in the Borough of Leicester during the 52 Weeks ending December 31st, 1914.

	0 to 1		1 to 5		Under 5		5 to 20		20 to 40		40 to 60		60 to 80		80 and upwards.		Over 5		All Ages.		Total.
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
CLASS I.																					
SPECIFIC FEBRILE OR ZYMOTIC DISEASES.																					
1.—Miasmatic Diseases.																					
Smallpox—Vaccinated	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Smallpox—Unvaccinated	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Smallpox—Not known	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Smallpox—Not stated	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Measles	11	12	40	29	51	41	2	3	.....	.....	.....	.....	.....	.....	.....	.....	2	3	53	44	97
Scarlet Fever	.....	.....	5	.....	5	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	5	.....	5
Diphtheria	1	.....	4	3	5	3	5	6	.....	.....	.....	.....	.....	.....	.....	.....	5	6	10	9	19
Whooping Cough	18	16	20	17	38	33	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	38	34	72
Typhus Fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Enteric or Typhoid Fever	.....	.....	.....	.....	.....	.....	.....	2	1	2	.....	.....	.....	1	.....	.....	1	5	1	5	6
Simple Continued Fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Influenza	.....	.....	1	.....	1	.....	3	1	3	1	4	.....	7	4	.....	.....	17	6	18	6	24
2.—Diarrhœal Diseases.																					
Dysentery	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	1	.....	1	.....	1
Diarrhœa	26	22	4	8	30	30	1	.....	.....	.....	.....	.....	1	1	.....	1	2	2	32	32	64
Cholera	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3.—Malarial Diseases.																					
Ague	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Remittent Fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4.—Zoogenous Diseases.																					
Cowpox, and Effects of Vaccination	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Hydrophobia	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Glanders	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Splenic Fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

5.—Venereal Diseases.																						
Syphilis	2	2	.....	.....	2	2	.....	.....	2	1	.....	.....	.....	.....	.....	.....	2	1	4	3	7
Gonorrhœa, Stricture of Urethra	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	1	.....	1	.....	1
6.—Septic Diseases.																					
Erysipelas	1	.....	.....	.....	1	.....	.....	.....	.....	.....	3	3	.....	2	... .	.....	3	5	4	5	9
Pyæmia, Septicæmia	.....	.....	.....	.....	.....	.....	.....	.....	2	1	3	.....	2	1	.....	.....	7	2	7	2	9
Puerperal Fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	4	.....	.....	.....	.....	.....	.....	.....	4	.....	4	4
CLASS II.	59	52	74	57	133	109	11	13	8	9	12	3	10	9	.....	1	41	35	174	144	318
PARASITIC DISEASES.																					
Thrush and other Vegetable Parasitic Diseases	1	.....	... ..	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.. ...	1	.....	1
Worms, Hydatids, and other Animal Parasitic Diseases	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.. ...	.....
CLASS III.	1	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
DIETIC DISEASES.																					
Want of Breast Milk, Starvation	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Purpura and Scurvy	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Alcoholism { *a.* Delirium Tremens	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	3	1	.....	.....	.....	.....	4	1	4	1	5
Alcoholism { *b.* Intemperance	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	1	2	.....	.....	.....	.....	1	3	1	3	4
CLASS IV.	.....	.....	.....	.....	.....	.....	.....	.....	1	1	4	3	.....	.....	.....	.....	5	4	5	4	9
CONSTITUTIONAL DISEASES.																					
Rheumatic Fever	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	1	.....	1	1
Rheumatism	.....	.....	.....	.....	.....	.....	2	2	1	2	2	3	1	4	.....	.....	6	11	6	11	17
Gout	....	....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	1	1	1	1	1	2
Cancer, Malignant Disease	.....	.....	1	.....	1	.....	1	.....	3	15	40	61	69	58	9	12	122	146	123	146	269
Cancrum Oris (Noma)	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Rickets	1	1	1	2	2	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	3	5

DEATHS—continued.

	0 to 1		1 to 5		Under 5		5 to 20		20 to 40		40 to 60		60 to 80		80 and upwards.		Over 5		All Ages.		Total.
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Tabes Mesenterica, Tub. Peritonitis and Tub. Enteritis	2	3	3	2	5	5	1	2	.....	1	.....	.....	1	.....	.....	.....	2	3	7	8	15
Phthisis and Pulmonary Tuberculosis ...	2	.....	3	.....	5	.....	9	16	67	69	55	37	11	4	.....	.....	142	126	147	126	273
Hydrocephalus and Tubercular Meningitis ...	5	3	5	6	10	9	7	9	1	1	2	.....	.....	.....	.....	.....	10	10	20	19	39
Other forms of Tuberculosis	2	2	2	5	4	7	1	6	4	1	3	5	2	1	.....	.....	10	13	14	20	34
Scrofula	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Anæmia, Chlorosis, Leucocythæmia	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	3	1	3	.....	1	2	7	2	7	9
Diabetes	.....	.....	.....	.....	.....	.....	.....	2	3	5	4	6	5	3	1	.....	13	16	13	16	29
Other Constitutional Diseases	.....	.....	.....	.....	.. ...	.....	.....	.....	.....	1	.....	2	1	.....	.....	.....	1	3	1	3	4
CLASS V.	12	9	15	15	27	24	21	37	79	96	108	117	91	73	10	14	309	337	336	361	697
LOCAL DISEASES.																					
1.—Diseases of Nervous System.																					
Inflammation of Brain or Membranes ...	4	5	3	4	7	9	3	5	.....	.....	1	.....	1	2	.....	.....	5	7	12	16	28
Apoplexy, Softening of Brain, Paralysis ...	.....	.....	.....	1	.....	1	.....	.....	2	3	14	22	65	60	9	14	90	99	90	100	190
Insanity, General Paralysis of Insane ...	.....	.....	.....	.....	.....	.....	.....	.....	2	1	3	2	2	1	.....	.....	7	4	7	4	11
Chorea	...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	...
Epilepsy	.....	.....	.....	.....	.....	.....	.....	2	1	4	5	1	.....	.....	1	.....	7	7	7	7	14
Convulsions	24	26	4	2	28	28	.....	2	.....	.....	.....	.....	.....	1	.....	.....	.....	3	28	31	59
Laryngismus Stridulus	1	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	... ..	.....	.....	.....	.....	1	.....	1
Disease of Spinal Cord, Paraplegia, Paralysis Agitans	3	2	.....	.....	3	2	1	.....	1	2	.. ...	1	10	2	2	1	14	6	17	8	25
Other Diseases of Nervous System	.....	3	.....	.....	.....	3	.....	.....	.....	.....	.. ...	2	.....	1	.....	.. ...	.....	3	.....	6	6
2.—Diseases of Organs of Circulation.																					
Pericarditis and Endocarditis	.....	.....	.....	.....	.....	.....	1	2	1	2	3	.....	1	.....	.....	.....	6	4	6	4	10
Heart Disease	5	5	1	3	6	8	12	18	15	17	50	48	80	79	8	14	165	176	171	184	355
Aneurism	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	1	.....	1	.....	1
Embolism, Thrombosis	.....	.....	.....	.....	.....	.....	.....	.....	.. ...	1	4	1	6	8	1	1	11	11	11	11	22
Other Diseases of Blood Vessels	.. ...	1	.....	.....	.....	1	.....	.....	1	.....	1	2	2	1	.....	.....	4	3	4	4	8

3.—Diseases of Respiratory Organs.																							
Laryngitis	.....	.....	1	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	... ..	1
Bronchitis	24	17	13	12	37	29	1	1	1	2	16	26	74	79	18	25	110	133	147	162	309
Pleurisy	.....	.....	1	.....	1	.....	.....	.....	2	.....	2	1	1	1	.....	1	5	3	6	3	9
Pneumonia	22	19	35	31	57	50	7	7	20	5	48	17	27	24	2	3	104	56	161	106	267
Asthma and Emphysema	.....	.....	.. ...	.....	.....	.....	.....	.....	.....	.....	3	1	6	4	.....	1	9	6	9	6	15
Croup	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Other Diseases of Respiratory Organs ...	3	3	1	1	4	4	1	.....	1	1	2	1	3	1	.....	1	7	4	11	8	19
4.—Diseases of Digestive Organs.																					
Gastritis	3	1	... ..	.....	3	1	.....	.....	.....	.....	.....	.....	3	3	.....	1	3	4	6	5	11
Other Diseases of Stomach	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	1	.....	1	1
Enteritis	24	14	1	3	25	17	1	.....	.....	.. ...	5	.....	1	3	2	1	9	4	34	21	55
Peritonitis	.....	.....	.....	.....	.....	.....	3	1	.....	2	1	1	1	1	.....	.....	5	5	5	5	10
Ascites	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	1	1
Obstructive Diseases of Intestines	4	.....	1	.....	5	.....	8	3	5	.....	4	4	7	6	.....	.....	24	13	29	13	42
Fistula	.....	.....	....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	1	.....	.....	1	1	1	1	2
Pancreas Disease, &c.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	1	1
Cirrhosis of Liver	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	5	12	4	6	.....	.....	9	18	9	18	27
Jaundice, and other Diseases of Liver	2	.....	.....	.....	2	.....	.....	.....	.....	.....	.....	.....	1	1	1	.....	2	1	4	1	5
5.—Diseases of Urinary Organs.																					
Nephritis	.....	.....	2	.....	2	.....	1	2	3	5	14	9	14	8	2	.....	34	24	36	24	60
Bright's Disease (Albuminuria)	.....	... ..	.....	.....	.....	.....	.....	1	.....	... .	2	3	3	6	.....	.....	5	10	5	10	15
Diseases of Bladder or Prostate	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	1	16	1	.....	.....	18	2	18	2	20
Calculus (Stone)	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	2	2	2	2	1	.....	6	4	6	4	10
Other Diseases of Urinary System	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	1	.....	1	1	1	.....	3	2	3	2	5
6.—Diseases of Reproductive System.																					
(a, ORGANS OF GENERATION.																					
Male Organs	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1	.....	.....	.....	.....	.....	2	.....	2	2
Female Organs	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

DEATHS—continued.

	0 to 1		1 to 5		Under 5		5 to 20		20 to 40		40 to 60		60 to 80		80 and upwards.		Over 5		All Ages.		Total.
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
(b) OF PARTURITION.																					
Abortion, Miscarriage	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	1	.....	1	1
Puerperal Convulsions	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Placenta Prævia, Flooding	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1	.....	.....	.....	.....	.....	2	.....	2	2
Other Accidents of Childbirth	.....	.....	.....	.....	.....	.....	.....	.....	.....	10	.....	1	.....	.....	.....	.....	.....	11	.....	11	11
7.—Diseases of Integumentary System.																					
Phlegmon	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Ulcer, Carbuncle	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	9	2	4	2	.....	.....	13	5	13	5[a]	18
Other Diseases of Skin, &c.	1	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
8.—Diseases of Bones and Joints.																					
Caries and Necrosis	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Arthritis, Ostitis, Periostitis	1	.....	.....	.....	1	.....	.....	.....	1	.....	1	.....	2	2	.....	2	4	4	5	4	9
Other Diseases of Bones and Joints	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	1	.....	1	.....	1
9.—Diseases of Organs of Special Sense.																					
Ear, Eye, Nose	1	.....	1	1	2	1	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	2	2	4
10.—Diseases of Lymphatic System, &c.																					
Lymphatics and Spleen	.....	.....	.....	2	.....	2	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	1	.....	3	3
Bronchocele, Addison's Disease	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	1	.....	1	.....	1
Quinsy	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	1	.....	1	.....	1
	122	96	64	60	186	156	39	45	58	60	201	164	338	309	48	65	684	643	870	799	1669

CLASS VI.

DEVELOPMENTAL DISEASES.

Premature Birth	71	60	.....	.....	71	60	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	71	60	131
Atelectasis	2	1	.....	.....	2	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	1	3
Congenital Malformations	6	.....	1	1	7	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	7	1	8
Teething	9	6	2	2	11	8	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	11	8	19
Atrophy, Inanition, Debility	48	48	.....	5	48	53	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	1	.....	49	53	102
Old Age	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	35	50	44	62	79	112	79	112	191
	136	115	3	8	139	123	.....	.....	.....	.....	1	.....	35	50	44	62	80	112	219	235	454

CLASS VII.

DEATHS FROM VIOLENCE.

1.—Accident or Negligence.

Fracture and Contusions	1	.....	3	.....	4	.....	1	1	3	.....	2	6	3	1	.....	.....	9	8	13	8	21
Gunshot Wounds	.....	.....	1	.....	1	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	1	.....	2	.....	2
Cut, Stab	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Burns and Scalds	.....	.....	3	2	3	2	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	3	3	6
Poison	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	1	.....	1	1	.....	.. ..	2	2	2	2	4
Drowning	.....	.....	.....	.....	.....	.....	2	2	1	2	.....	1	1	.....	.....	.....	4	5	4	5	9
Suffocation	4	5	.....	.....	4	5	.. ...	.....	.....	.....	2	.....	.....	.....	.....	.....	2	.....	6	5	11
Otherwise	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	1	1	.....	.....	.....	2	1	2	1	3

2.—Homicide.

Manslaughter	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Murder	.....	.....	1	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1

3.—Suicide.

	.....	.....	.....	.....	.....	.....	.....	1	10	.....	6	2	4	1	.....	.....	20	4	20	4	24
	5	5	8	2	13	7	3	6	15	2	12	10	10	3	.....	.....	40	21	53	28	81

DEATHS—continued.

	0 to 1		1 to 5		Under 5		5 to 20		20 to 40		40 to 60		60 to 80		80 and upwards.		Over 5		All Ages.		Total.
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
CLASS VIII. **DEATHS FROM ILL-DEFINED AND NOT SPECIFIED CAUSES.** (*e.g.*, Dropsy, Abscess, Tumour, Hæmorrhage, Mortification, Death from Natural Causes, &c.	3	2	.....	1	3	3	1	3	4	7	5	9	7	9	2	.....	19	28	22	31	53
	3	2	.....	1	3	3	1	3	4	7	5	9	7	9	2	.....	19	28	22	31	53
Class I.—Zymotic Diseases	59	52	74	57	133	109	11	13	8	9	12	3	10	9	.....	1	41	35	174	144	318
,, II.—Parasitic Diseases	1	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
,, III.—Dietic Diseases	.....	.....	.....	.....	.....	.....	.....	.....	1	1	4	3	.....	.....	.....	.....	5	4	5	4	9
,, IV.—Constitutional Diseases ...	12	9	15	15	27	24	21	37	79	96	108	117	91	73	10	14	309	337	336	361	697
,, V.—Local Diseases	122	96	64	60	186	156	39	45	58	60	201	164	338	309	48	65	684	643	870	799	1669
,, VI.—Developmental Diseases ...	136	115	3	8	139	123	.....	.....	.....	.....	1	.....	35	50	44	62	80	112	219	235	454
,, VII.—Violent Deaths	5	5	8	2	13	7	3	6	15	2	12	10	10	3	.....	.....	40	21	53	28	81
,, VIII.—Ill-defined, &c.	3	2	.....	1	3	3	1	3	4	7	5	9	7	9	2	.....	19	28	22	31	53
Total	338	279	164	143	502	422	75	104	165	175	343	306	491	453	104	142	1178	1180	1680	1602	3282

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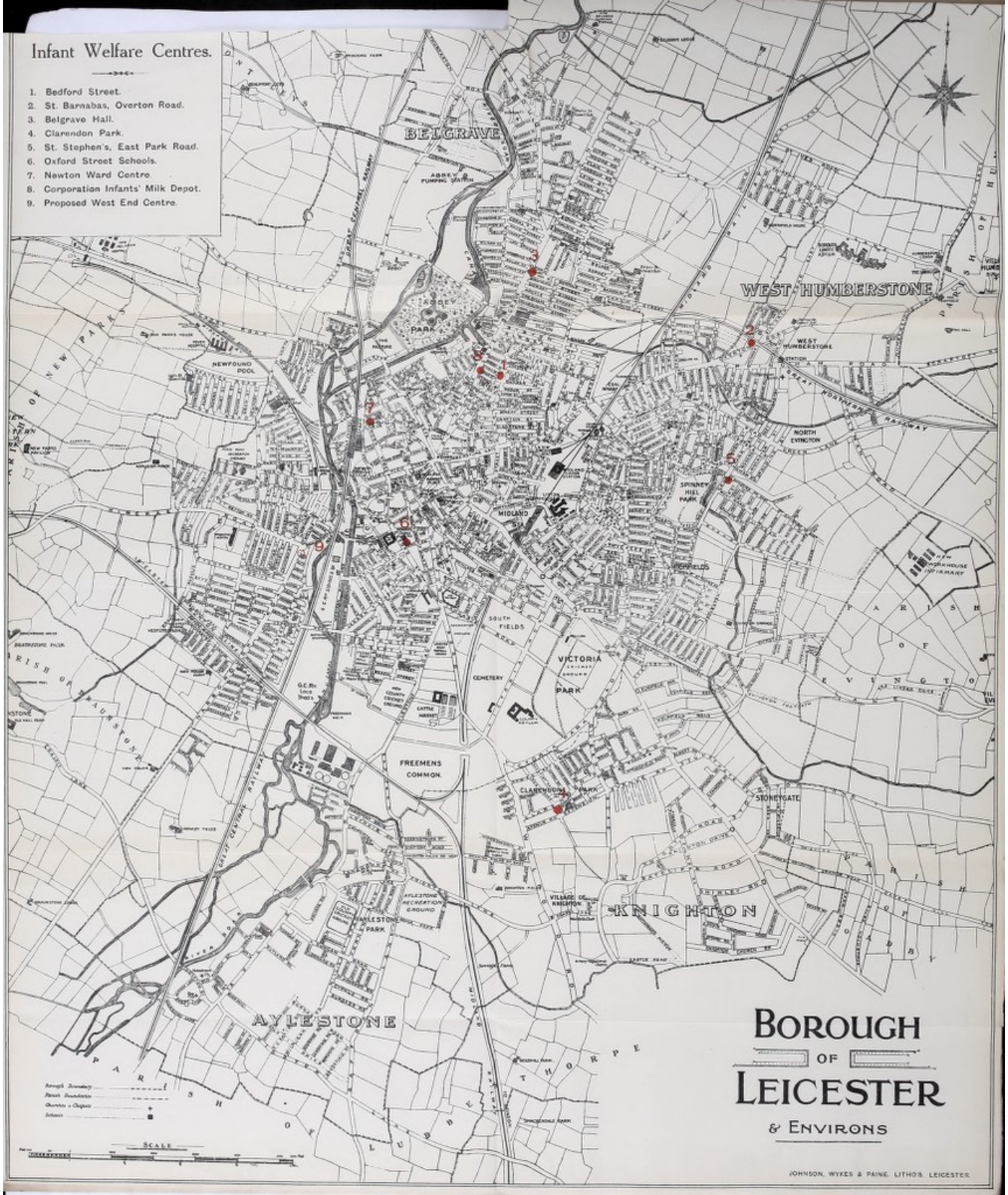
Infant Welfare Centres.
1. Bedford Street.
2. St. Barnabas, Overton Road.
3. Belgrave Hall.
4. Clarendon Park.
5. St. Stephen's, East Park Road.
6. Oxford Street Schools.
7. Newton Ward Centre.
8. Corporation Infants' Milk Depot.
9. Proposed West End Centre.
BELGRAVE
WEST HUMBERSTONE
KNIGHTON
AYLESTONE
BOROUGH
OF
LEICESTER
& ENVIRONS
JOHNSON, WYKES & PAINE, LITHO'S, LEICESTER.