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Leicestershire County Council.

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR

1919

TOGETHER WITH AN

ABSTRACT OF THE ANNUAL
REPORTS OF THE DISTRICT
MEDICAL OFFICERS OF
HEALTH.

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Officers of the Medical Department 1919.

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County Medical Officer.

Chief School Medical Officer.

Chief Tuberculosis Administrative Officer.

Chief Maternity and Child Welfare Administrative Officer.

J. A. FAIRER, M.D., CH.B., D.P.H. (Man.),

Senior Assistant County Medical Officer.

Senior Assistant School Medical Officer.

Venereal Diseases Medical Officer.

N. A. COWARD, O.B.E., M.D., CH.B. (Edin.), D.P.H. (Oxon.)

Assistant County Medical Officer.

Senior Tuberculosis Medical Officer.

Medical Officer for Maternity and Child Welfare.

H. CARPENTER, M.B., B.S. (Lond.), M.R.C.S., L.R.C.P.,

Second Tuberculosis Medical Officer.

HEALTH VISITORS :

Asbery, Miss M. J.

Hall, Miss M.

Beardmore, Miss B. M.

Hewton, Miss E.

Brunsdon, Mrs. P.

Hughes, Miss S.

Cade, Mrs. F.

Kelly, Miss M.

Clist, Miss R. E.

Shaw, Miss M.

Dennis, Miss S.

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Furness, Miss M.

Wright, Mrs. E. E.

The County
Sanitary and Housing Committee,
1919.

J. W. BLACK, Esq. (Chairman).

Bastard, W.	Orton, H.
Cope, Sir Thos., Bt., (<i>ex-officio</i>).	Pickard, A. (<i>Vice-Chairman</i>)
Dalglish, R. (<i>ex-officio</i>)	Reynolds, A. S.
Forsell, J. T.	Sanders, J. W.
Goodacre, C.	Sarson, T.
Goodman, J. A.	Squirrell, E. A.
Hawley, A. E.	Stubbs, W.
Hubbard, B.	Timms, R.
Kinton, G.	Whitwell, H. J.
Levers, G. T.	Wilson, C.
McCarthy, M.	

REPORT.

17, FRIAR LANE,
LEICESTER,
December, 1920.

To the County Council of Leicestershire.

MR. CHAIRMAN, MY LORD DUKE, AND GENTLEMEN,—

I have the honour to present to you my Twenty-Second Annual Report on the Health of Leicestershire, together with a summary of the Annual Reports of the Medical Officers of the several Urban and Rural Districts in the County.

The arrangement of this year's Report differs from that of previous years in that the outline of the Report has followed the Memorandum issued by the Ministry of Health who asked that a similarity in Health Reports should be made by various Authorities.

The Report will be seen to be fuller than during the years of the War, and special Reports are included with reference to the Tuberculosis, Venereal Diseases, and Maternity and Child Welfare Schemes.

The estimated population for 1919 is 261,836 for the Birth rate and 251,352 for the Death rate. The natural increases (*i.e.*, the number of Births in excess of Deaths) is 1,085. I have to report that the Birth rate for the County is the lowest on record, being 16·5 against 18·5 for the rest of Rural England and Wales. The Birth rate for the County is steadily declining. The Death rate is 12·8 as against 16·6 last year, when Influenza and Pneumonia accounted for so many deaths, and compares favourably with the rate for Rural England and Wales, which is 13·8.

It is again gratifying to report favourably on the Infant Mortality rate, although it is 3 per 1,000 above the rate for 1918. This rate for the year under review for the County is 82 per 1,000 births, compared with 89 for Rural England and Wales.

The Infantile Diarrhoea Rate for the County is less than half that of Rural England and Wales, being 4·4 as against 9·6. There has been a steady decrease in the number of deaths from Diarrhoeal Diseases in children under two years of age since 1913, when the deaths totalled 73; this reflects credit on the work of (1) Infant Welfare Centres and (2) the Health Visiting Staff.

The Deaths from the seven principal Zymotic Diseases compare favourably with that of Rural England and Wales, with the exception of Typhoid Fever, where the Death rate is just double, and Diphtheria where the rate is '17 against '13.

The Death rate from Diphtheria has for the last few years been above that of the rest of the Country, and allusion is made to this later on in the Report.

In reference to Typhoid Fever, the comparison stated above is somewhat misleading. The actual rate for Leicestershire was lower than the previous average, but on the other hand the rate for Rural England and Wales was reduced to about one-third of the previous years.

The low Death rates from Measles, Scarlet Fever, and Diarrhoea for the County as compared with the rest of the country will be noted.

During the early months of the year the Influenza epidemic of the previous year continued until the early spring when this ceased, so that the decrease in the deaths from Influenza and Pneumonia this year will be observed as compared with 1918.

The number of Deaths from Phthisis is 225, as compared with 301 last year, and this is 24 less than the average for the previous five years.

In December, the whole of the Urban and Rural Districts were joined together to form one Hospital District under the name and style of the Leicestershire Isolation Hospital Committee.

Arrangements have been made for the establishment of a County Laboratory, and this will open in the first week of 1920. Full particulars of the work to be undertaken are referred to in the Report.

The following diseases were made notifiable during the year:—Encephalitis Lethargica, Malaria Dysentery, and Trench Fever.

It is hardly possible to publish this Report earlier in the year as it cannot be completed until the Annual Reports are received from all the District Medical Officers of Health.

I have the honour to be,

Mr. Chairman, My Lord Duke, and Gentlemen,

Your obedient Servant,

T. ROBINSON,

County Medical Officer.

REPORT.

NATURAL AND SOCIAL CONDITIONS OF THE COUNTY.

Population.—The population at the last Census (1911) was 249,331, and the estimated population for 1919 is 261,836 for the Birth rate, and 251,353 for the Death rate.

These two estimates have been taken from the table of vital statistics supplied by the Registrar-General. The last estimate, viz., the figure 251,353, will be used when supplying vital statistics, except for the Birth rate. The corresponding figures of last year were 255,329 and 227,878.

The following Table shows the population for each of the last five years, and it will be seen that the natural increase (*i.e.*, the number of births in excess of deaths) of the population in the County is 1,085, compared with 554 for 1918. The average natural increase of the previous four years is 1,600. The low figure (554 for 1918) was almost entirely caused by the increased number of deaths produced by the Influenza Epidemic. There is a marked fall in the Birth rate of 2.0 per thousand as compared to the rate for Rural England and Wales.

YEAR	URBAN			RURAL			COUNTY		
	Populat'n Estimated	Incr. + or Dec - over prev. year	Natural Incre'se	Populat'n Estimated	Incr. + or Dec - over prev. year	Natural Incre'se	Populat'n Estimated	Incr. + or Dec - over prev. year	Natural Incre'se
1915	102,787	— 2270	966	146,320	— 5613	1190	249,107	— 7883	2156
1916	99,909	— 2878	1086	140,311	— 6009	1179	240,220	— 8887	2265
1917	97,082	— 2827	674	134,213	— 6098	751	231,295	— 8925	1425
1918	95,747	— 1335	263	132,131	— 2082	291	227,878	— 3417	554
1919	106,553	+ 10806	457	144,800	+ 12669	628	251,353	+ 23475	1085

PHYSICAL FEATURES AND GENERAL CHARACTER OF THE DISTRICT.

The area of the administrative County at the Census of 1911 was 524,197 acres. Of this total the twelve Urban Districts comprise 39,801 acres, and the thirteen Rural 484,396. The highest part of the County is Bardon Hill, in the Charnwood Range, being 853 feet above the level of the sea. Altogether Leicestershire is high, but is well watered, healthy, and mild. The chief river is the Soar, which flows northerly until it reaches the Trent, on the north-west border.

Industries.

Leicestershire is a great grazing County, for which it is well fitted by the rich soils on the many rivers, but much wheat, oats, and barley are grown. Hinckley and Loughborough are great seats of the framework knitters, and makers of woollen and cotton hose, whilst the elastic web and shoe trade is also carried on in different parts of the County to a considerable extent. Collieries are largely worked, and fire-brick making is also undertaken. The influence of any of these occupations on the health of the community is referred to in the reports of the different diseases.

VITAL STATISTICS FOR 1919.

A summary of the chief statistical information relating to both the Urban and the Rural Districts, and to the County as a whole is given below. The respective returns for Rural England and Wales are given as a comparison.

The system of inquiry as to the transferable Death returns remains the same, whereby a correct record is ensured of deaths of persons actually belonging to the County, and to each individual parish.

The principal feature of this Return is that all the rates, with the exception of Diphtheria, Births, and Typhoid, are better than the respective rates for England and Wales.

	LEICESTERSHIRE COUNTY, 1919.						ENGLAND AND WALES, 1919.		
	Urban.		Rural.		Whole County.				
	No.	Rate.	No.	Rate.	No.	Rate.	Rates.		
Population (for Birth-rate)	110,997		150,839		261,836		—		
Population (for Death-rate)	106,553		144,800		251,353		—		
Births	1800	16·2	2508	16·6	4308	16·5	18·5		
Deaths (all causes and all ages)	1343	12·6	1880	13·0	3223	12·8	13·8		
* „ (under one year ..)	156	*86·	199	*79	355	*82·	*89·		
„ (total Zymotic) ..	36	0·34	55	0·38	91	0·36	—		
Deaths from—									
The seven principal Zymotic Diseases.									
Small Pox	0	0·0	0	0·0	0	0·0	0·00		
Enteric Fever	0	0·0	5	0·03	5	0·02	0·01		
Measles	1	0·01	2	0·01	3	0·01	0·10		
Whooping Cough ..	2	0·02	15	0·10	17	0·07	0·07		
Diphtheria	22	0·21	22	0·15	44	0·17	0·13		
Scarlet Fever	2	0·02	1	0·007	3	0·01	0·03		
*†Diarrhœa (under 2 years) ..	9	*5·	10	*3·99	19	*4·41	*9·59		
							†Percentage of Total Deaths.		
							Urban.	Rural.	County.
The five chief causes of Death.									
Influenza	105	0·98	174	1·20	279	1·11	7·82	9·25	8·
Phthisis	103	0·97	122	0·84	225	1·89	7·67	6·49	6·98
Heart Disease	157	1·47	233	1·61	390	1·55	11·69	12·39	12·10
Pneumonia	68	0·64	97	0·67	165	0·66	5·06	5·16	5·12
Cancer	98	0·92	152	1·05	250	0·99	7·30	8·08	7·76

NOTES.—The Rates are calculated per thousand of the population except where marked (*) which are per thousand registered births.

† The Diarrhœa Rates per thousand of the population are : Urban, 0·08 ; Rural, 0·07 ; whole County, 0·076.

Diphtheria for several years has been relatively higher in Leicestershire as compared to the rest of the Country. The rate for 1918 was 0·17, as against 0·14 for Rural England and Wales. This year the rate is again 0·17, whilst the rate for the Country has fallen to 0·13.

The Birth rate is 16·5 per thousand, compared to 18·5 for Rural England and Wales, a difference of 2·0. Last year the Birth rate was 16·94, against 17·7 for the Country, a difference of only ·76. The Birth rate has steadily declined since 1915, the rate then being 22·0. It will be noted that whilst there has been

a fairly marked increase in the years 1918 and 1919 in the Birth rate for the Country (18·5 and 17·7), the number of births in the County is 18 less than that for last year.

Births.

YEAR	URBAN		RURAL		COUNTY		Rate for Rural England and Wales.
	Net No. Registered	Rate	Net No. Registered	Rate.	Net No. Registered	Rate.	
1915	2369	23·0	3105	21·2	5474	22·0	20·7
1916	2270	21·1	3027	22·9	5297	19·7	17·8
1917	1890	17·5	2543	17·0	4433	17·2	17·8
1918	1811	16·9	2515	17·0	4326	16·9	17·7
1919	1800	16·22	2508	16·63	4308	16·5	18·5

Of the 4,308 births given by the Registrar-General, 2,211 were males and 2,097 females. Included in these are 199 illegitimate births, comprising 94 males and 105 females.

The following Table shews the percentage of illegitimacy in the County:—

PERCENTAGE OF ILLEGITIMATE BIRTHS.

	Males.	Females.	Total.
Urban.. ..	4·1	5·1	4·5
Rural	4·4	4·9	4·6
Whole County	4·3	5·0	4·6

It will be seen that the illegitimate percentage for the whole of the County is 4·6. This compares favourably with the illegitimacy figure for the rest of England (6·26 for 1918; the figure for 1919 being not yet available). The deaths of illegitimate infants numbered 33, and as there were 199 illegitimate children born, the

mortality was at the rate of 165·8 per thousand. The infantile mortality of the County for this year for all children born was only 82, so that it will be seen that the mortality was more than twice as great amongst the illegitimate infants as compared to the legitimate.

A separate Table shows the proportion of male births compared to females for the whole County. This figure is 105·4 males born per 100 females:—

	Births.	Proportion.	Legitimate Births.	Proportion.	Illegitimate Births.	Proportion.
Males ..	2211	105·4	2117	106·2	94	89·5
Females ..	2097	100·0	1992	100·0	105	100·0

This Table also shows the relative decrease of male births among the illegitimate, the proportion of males born compared to females being 106·2 legitimately born males, compared with only 89·5 illegitimately born.

Deaths.—The Death rate is lower by 3·7 this year than last year, when Influenza and Pneumonia accounted for many deaths. This year's rate compares favourably with that of the Country, being 1·0 lower. The most gratifying feature of the Report is the low Death rates of Measles, Scarlet Fever, and Diarrhœa (under two years). The Death rate for the first disease being $\frac{1}{10}$ less whilst Scarlet Fever and Diarrhœa are less than $\frac{1}{3}$ and $\frac{1}{2}$ respectively, compared to the rest of the Country.

The lessened Infantile Mortality rate is still maintained, but not to such a noticeable extent as in 1918. In that year there was a decrease of 18 per thousand as compared with England and Wales. This year the decrease is only 7 per thousand.

The total deaths from all causes, at all ages, is 3,223, giving a rate of 12·8, against 13·8 for England and Wales.

The following Table shews the Death rates for the last five years:—

YEAR	URBAN.		RURAL.		COUNTY.		Rate for Rural Engl'nd and Wales.
	Net No. Registered	Rate	Net No. Registered	Rate	Net No. Registered	Rate	
1915	1403	13·6	1995	13·8	3398	13·7	13·6
1916	1184	11·8	1858	13·1	3042	12·6	14·0
1917	1216	12·5	1792	13·3	3008	13·0	14·4
1918	1548	16·2	2224	16·8	3772	16·6	17·6
1919	1343	12·60	1880	13·0	3223	12·8	13·8

The lessened number of Deaths this year is chiefly accounted for by the marked decrease in the number of deaths caused by Influenza and Pneumonia. The Influenza epidemic of 1918 accounted for 863 deaths, this year the deaths from Influenza total only 279, a decrease of 584, whilst Pneumonia, which was responsible for 284 deaths in 1918, only claimed 165 this year, a difference of 119. Also there are 76 less deaths from Tuberculosis, and 25 less from Cancer. However, 101 more persons died from Heart Disease than in the previous year, whilst the deaths reported from other defined diseases are given as 1,035 this year, compared with 875 last year.

The five chief causes of death in 1918 were:—Influenza 22·9 per cent., Pulmonary Tuberculosis 8 per cent., Heart Disease 7·7 per cent., Pneumonia 7·5 per cent., and Cancer 7·3 per cent.

In order, the chief causes of death in 1919 were:—Heart Disease 12·1 per cent., Influenza 8 per cent., Cancer 7·8 per cent., Pulmonary Tuberculosis 7·0 per cent., and Pneumonia 5·1 per cent.

A comparison of the five chief causes of death for 1918 and 1919 is given in the following Table, together with the percentage of the total for the County:—

Disease.	URBAN.						RURAL.						WHOLE COUNTY.					
	1918			1919			1918			1919			1918			1919		
	No.		Per Cent.	No.		Per Cent.	No.		Per Cent.	No.		Per Cent.	No.		Per Cent.	No.		Per Cent.
Heart Disease ...	98		6.33	157		11.69	191		8.59	233		12.39	289		7.65	390		12.10
Influenza ...	321		20.74	105		7.82	542		20.37	174		9.25	863		22.88	279		8
Cancer ...	104		6.72	98		7.30	171		7.69	152		8.08	275		7.29	250		7.76
Phthisis ...	135		8.73	103		7.67	166		7.46	122		6.49	301		8.00	225		6.99
Pneumonia ...	138		8.91	68		5.06	146		6.56	97		5.16	284		7.52	165		5.12

The Birth rate, Death rate and the Analysis of Mortality for England and Wales is shown in the following Table, for comparison:—

Birth-rate, Death-rate, and Analysis of Mortality during the Year 1919.
(Provisional figures, Populations estimated to the middle of 1919 have been used for the purposes of this Table.)

	BIRTH-RATE PER 1,000 TOTAL POPULATION.	ANNUAL DEATH RATE PER 1000 CIVILIAN POPULATION.							RATE PER 1000 BIRTHS.		
		All Causes.	Enteric Fever.	Small-Pox.	Measles.	Scarlet Fever.	Whooping cough.	Diphtheria.	Violence.	Diarrhoea and Enteritis (under 2 Years).	Total Deaths under One Year.
England and Wales	18.5	13.8	0.01	0.00	0.10	0.03	0.07	0.13	0.47	9.59	89
96 Great Towns, including London - (Census Populations exceeding - 50,000).	19.0	13.8	0.01	0.00	0.13	0.04	0.07	0.14	0.45	12.24	93
148 Smaller Towns (Census Popula- tions 20,000—50,000)	18.3	12.6	0.01	0.00	0.10	0.03	0.08	0.12	0.39	8.67	90
London	18.3	13.4	0.01	0.00	0.08	0.03	0.05	0.18	0.47	16.22	85
Leicestershire	16.5	12.8	0.02	0.00	0.01	0.01	0.07	0.18	0.03	4.41	82

Zymotic Diseases.—The diseases included in the Zymotic Group are Small-pox, Enteric Fever, Measles, Whooping Cough, Diphtheria (including Membranous Croup), Scarlet Fever, and Diarrhoea (under two years). The number of Deaths from Zymotic Diseases has fallen to 91, as against 130 and 178 in the years 1917 and 1918 respectively. This is a very gratifying figure to report. The rate this year is 0·3, as against 0·8 last year. The most noticeable feature is the fact that only 3 deaths were reported this year from Measles, as against 51 in 1918, whilst the deaths from Whooping Cough total 17, compared to 53 the previous year.

The record of the Zymotic Death rate of the previous five years is given below:—

YEAR	URBAN.		RURAL.		COUNTY.		Rate for Rural England and Wales
	No.	Rate.	No.	Rate.	No.	Rate.	
1915	125	1·2	96	0·6	221	0·9	0·9
1916	51	0·5	81	0·5	132	0·5	..
1917	57	0·6	73	0·5	130	0·6	..
1918	70	0·7	108	0·8	178	0·8	..
1919	36	0·3	55	0·3	91	0·3	..

Infantile Mortality.—The Infantile Mortality rate is 82, and compares favourably with the rate for the rest of the Country (89), being 7 per 1,000 lower.

Unfortunately, it is 3 per 1,000 above the rate for 1918 (79), but, as will be seen by the following Table, the low County rate has been maintained fairly evenly for the last three years, being 81, 79, and 82. The lowest record is in the year 1916, when it was only 71. In the years 1914 and 1915 the rate was as high as 91 and 97 respectively.

With the formation of Child Welfare Centres and the ready and willing help of the Local Committees interested in this work, it is hoped that an even further decline in the Infantile Death rate may ensue.

YEAR	URBAN		RURAL		COUNTY		Rate for Rural England and Wales.
	No.	Rate	No.	Rate	No.	Rate	
1915	241	102	289	93	530	97	..
1916	165	62	209	69	374	71	91
1917	157	83	203	80	360	81	97
1918	153	84	187	74	340	79	97
1919	156	26	199	78	355	82	89

Diseases of the Respiratory Organs.—The number of Deaths from these diseases has shown a marked decrease. Collectively, Bronchitis, Pneumonia, and other Respiratory Diseases accounted for 445 deaths in 1916, 451 in 1917, and 542 in 1918.

This year's total is only 457, showing a decrease of 85 from last year. Of these 457 deaths, Bronchitis claimed 245, and Pneumonia 165, as compared to 219 and 284 in 1918 respectively.

The lessened number of Deaths from Pneumonia is chiefly due to the fact that Influenza subsided after the first three months of this year.

The age incidence of Bronchitis, Pneumonia, and other Respiratory Diseases was as follows:—

NO. OF DEATHS.

AGE.	BRONCHITIS.						PNEUMONIA.						OTHER RESPIRATORY DISEASES.					
	Urban.			Rural.			Whole County.			Urban.			Rural.			Whole County.		
	M		F	M		F	M		F	M		F	M		F	M		F
	M	F		M	F		M	F		M	F		M	F		M	F	
Under One	11	6	...	15	11	17	26	17	...	8	7	15	12	8	4	20	4	...
1 to 2	4	1	...	5	3	4	9	4	...	3	4	11	8	3	1	11	2	...
2 to 5	2	3	...	1	1	4	3	4	...	3	6	9	3	3	2	6	1	5
5 to 15	...	...	...	3	1	1	3	1	...	2	1	7	1	6	...	3	1	...
15 to 25	1	...	...	...	...	...	1	...	...	2	1	4	4	3	...	6	...	...
25 to 45	1	2	...	2	...	2	3	2	...	3	7	11	8	4	2	11	...	3
45 to 65	6	6	...	8	5	11	14	11	...	6	3	10	11	7	3	17	8	6
65 and upwards	25	47	...	34	41	88	59	88	...	7	5	13	8	8	4	15	10	7
Totals ...	50	65	...	68	62	127	118	127	...	34	34	76	55	42	11	89	26	21
GRAND TOTALS	115	130	245	130	115	245	130	115	245	68	97	165	20	27	47	20	27	47

This record shows that no less than 25·2 per cent. of these Deaths were of children under two years of age; this is an increase of 2·0 per cent. on the figures for the previous year. There is also a considerable increase in the number of deaths of Infants (under one year), being 17·94 per cent. this year, against 12·0 per cent. in 1918.

These deaths were to a large extent preventable, and it is to the Infant Welfare Centres that one must look to diminish this infantile loss, and to see that the mothers are duly impressed with the necessity of protecting the children from undue exposure to cold in the early years of life. In many cases the mothers if anything overclothe their children, and it is desirable that they should be taught what is the most suitable and hygienic clothing necessary for the child.

Cancer.—This disease occupies the third place in the chief causes of death this year, while last year it was fifth; which was accounted for by the marked increase in the number of deaths from Influenza and Pneumonia in 1918. 250 deaths occurred (25 less deaths than in 1918) which is equivalent to a percentage of 7·7 of the total deaths from all causes in the County. The average for the last five years is 267, showing that the number of deaths from Cancer is not increasing.

Organic Heart Disease.—This disease heads the list of the chief causes of death in the County this year. With the exception of 1918 (when it held the third position), Organic Heart Disease has for the last eight years held the premier position as the chief cause of death in the County.

In 1918, 289 deaths were reported from this disease, this year 390 were recorded (of which 233 occurred in the Rural and 157 in the Urban areas), showing an increase of 101 in the number of deaths. Of this number the deaths in the Urban Districts have increased by 59, and the Rural by 42.

The percentage of total Deaths from this disease in the County is 12·10, as compared to 7·66 in 1918, showing a decided increase on the figure for the previous year.

Cirrhosis of the Liver.—The excellent record of last year (7 deaths in all) has been maintained this year, and it is a peculiar coincidence that the numbers are exactly the same

in the Urban and Rural Districts as those for last year, viz., 7 deaths (4 in the Urban and 3 in the Rural Districts). This disease showed a decrease in the number of deaths in the last two years as compared to the number in the years 1916 (26) and 1917 (12).

Alcoholism.—Two deaths have been recorded this year from this disease, both occurring in the Urban Districts, and were in females.

There were 2 deaths in 1913, 8 in 1914, and 7 in 1915 from Alcoholism. In the three years 1916, 1917, and 1918 only 1 death was reported, and this also was a female.

Thus there has been a welcome decrease of deaths from this disease during the last four years.

Nephritis and Bright's Disease.—Eighty-nine deaths were accounted for this year by these diseases, as compared with 64 in 1918. Of these 89, 47 were in males and 42 in females. Thirty-nine occurred in the Urban and 50 in the Rural areas.

Hospital Accommodation.—The Leicester and Leicestershire Royal Infirmary, which has 300 beds, including 70 available for children, receives many cases from the County. Various villages, by means of the Saturday Hospital Fund and weekly collections from the factories, provide a considerable amount of money per year towards the maintenance of the Royal Infirmary. The Faïre Hospital, a small semi-private Hospital, is available for the use of County patients, and here, for a reasonable sum, persons of middle class can have operations performed, and also obtain medical treatment.

Of the two Maternity Hospitals in the City, the one in Causeway Lane (provided with 20 beds) receives County patients, and is supported by voluntary contributions, augmented by payments for admission.

A Hostel is contemplated, and will be opened early in 1920, for the reception of County unmarried mothers only.

The Board of Guardians in the following areas have small Poor Law Infirmarys, viz.:—Ashby-de-la-Zouch at Ashby-de-la-Zouch, Barrow-on-Soar at Rothley, Billesdon at Billesdon, Blaby

at Enderby, Hinckley at Hinckley, Loughborough at Loughborough, Lutterworth at Lutterworth, Market Bosworth at Market Bosworth, Market Harborough at Great Bowden, and Melton Mowbray at Melton Mowbray.

The total number of beds available are 2,335, and here treatment is carried out by the local practitioners appointed by the Guardians for the purpose.

There is a well-equipped General Hospital at Loughborough where patients are admitted for medical or for operative treatment. The Hospital is provided with 38 beds, and has also a separate Out-Patient Department, in which arrangements have been made for the formation of a Venereal Diseases Clinic (male and female) to commence early in 1920.

There are Cottage Hospitals at Ashby-de-la-Zouch, Hinckley, Market Harborough, and Lutterworth. The number of beds in these hospitals are 15, 11, 11, and 9 respectively.

Further Cottage Hospitals are contemplated at Melton, Mowbray, and Coalville; the former has been somewhat delayed by the difficulty in procuring labour and building materials, while the latter has been indefinitely postponed owing to the lack of public enthusiasm.

(For Isolation Hospital see pp. 94-95).

SANITARY CIRCUMSTANCES OF THE DISTRICT.

Water Supply.—Many of the villages in Leicestershire obtain their water supply from the Derwent Valley, in North Derbyshire, under the Derwent Valley Scheme. This water is the principal source of supply for the City of Leicester, and is a pure, soft, upland surface water.

The water main proceeds through the County from Derbyshire in a direction south-east, passing through the Castle Donington Rural, Loughborough Rural, Shepshed Urban, and the Barrow-on-Soar Rural Districts to Leicester.

There is a bye-law which reads as follows:—

As to supply to other Authorities. 155.—(1) "Subject to the provisions of this Act the Leicester Corporation shall as soon as they are by means of works constructed under the powers of this part of this Act in a position to supply water within

their water limits supply in bulk to any Corporation or Urban or Rural District Council or any Joint Board or Joint Committee authorized to supply water (in this part of this Act referred to as "the authority") demanding the same any part of whose district is situate wholly or partly in the County of Leicester and within ten miles of any aqueduct of the Leicester Corporation constructed under the powers of this part of this Act."

The following towns and villages take advantage of this to obtain a reliable and adequate supply of water:—Birstall, Cropstone, Anstey Pastures, Kirby Muxloe, New Parks, Wigston Magna, Humberstone, Barrow-on-Soar, Mountsorrel, Syston, Quorn, Bushby, Blaby, South Thurmaston, Thurmaston, Leicester Frith, Kirby Frith, Glen Parva, South Wigston, Groby, Evington, Rothley, Cossington, Enderby, Thurnby, Leicester Forest West, Leicester Forest East, Anstey, Beaumont Leys, Glenfield, Glenfield Frith, Lubbesthorpe, Oadby, Braunston Frith, Sileby, Swithland, Thurmaston, and Woodhouse.

In reference to the other towns and villages in the County their water supplies are as follows:—

LOUGHBOROUGH URBAN.

The following is an abstract from the Medical Officer of Health's Report:—

"The water supply of the district is derived from the uplands of the Charnwood Forest, a sparsely populated district, most of which is grass land. The water has no plumbo-solvent action, and is collected from the sources of supply of the Blackbrook and Woodbrook, each stream having a separate reservoir in which the water is stored. The Blackbrook water-shed is the larger, as also is the reservoir, and stands on a higher altitude, so that the water gravitates therefrom to the Woodbrook reservoir at Nanpantan, where ample means of filtration of the most recent type are available to render the water free from all risk of pollution. The supply is ample and continuous. I am glad the Council have been able to carry out the extension of the water main to Thorpe Lane and district during the year. A very great danger to the health of the inhabitants of this district has been removed, as the previous supply was from surface wells, liable at any time to pollution by sewage from cess-pools, etc."

COALVILLE URBAN.

This town has its own public water supply, which is pumped from a deep well in the Sandstone Measures.

The Medical Officer of Health reports as follows:—

“It continues fairly sufficient and of high standard of organic purity. Samples of it have been regularly analysed. I understand that it is contemplated augmenting this supply by obtaining water from the Whitwick Colliery Company.”

HINCKLEY URBAN.

The Medical Officer of Health reports as follows:—

“Hinckley is provided with a good constant supply of wholesome water. The source of supply is a deep well at Snarestone, 14 miles away. The daily supply is about 450,000 gallons. This water is also supplied to the neighbouring districts of Barwell and Shilton (1913) and Burbage (1916). The total population thus supplied being estimated as 24,885 for 1919. During the year, 139,113,000 gallons were supplied, giving a daily average consumption of 391,000 gallons; 413,000 gallons per diem were supplied for the months of July, August, and September, the maximum number of gallons consumed in one day being 477,000, the average number of gallons consumed per head per diem for July, August, and September was 17. At the present time an attempt is being made to increase the supply by driving additional adits at the bottom of the well.”

MARKET HARBOROUGH URBAN.

The following is the Medical Officer of Health's Report:—

“The water supply is from a natural underground reservoir, at North Kilworth, 8 miles distant; water being received into a reservoir above the town. The supply yields 200,000 gallons per day, equivalent to about 20 gallons per head of the population. The water is of a high degree of hardness, and with no plumbosolvent property. There are also 65 private wells, the water from which is analysed periodically.”

ASHBY-DE-LA-ZOUCH URBAN.

“New springs have been tapped to augment the supply, but there is still an insufficient quantity, and particularly is this noticeable in the summer months.” The Medical Officer of Health reports that “the water supply was under consideration during the

year, but war conditions and other matters delayed progress. This question will, however, have to be met and dealt with in the near future." This is still being considered.

ASHBY WOULD'S URBAN.

The whole of the district is supplied from Swadlincote and Ashby Water Works.

OADBY URBAN.

Of 713 houses, 618 are supplied from the Leicester Corporation mains, which are laid throughout the town. The remaining houses, many of which lie outside the town, are supplied chiefly from shallow wells.

MELTON MOWBRAY URBAN.

The Medical Officer of Health says:—

"The public water supply, which is laid on throughout the town, only outlying properties being supplied by wells, is derived from three sources, at Scalford, some $3\frac{1}{2}$ miles distant. It is chemically a fairly pure water of some 24 degrees of hardness, most of which is removable by boiling, and would readily lend itself to artificial softening. Bacteriologically, however, in this water there is room for great improvement, and in view of the nature of the part of the catchment area and of the shortness and low pressure after periods of dry weather, I have had reason to direct attention to the desirability of your having recourse to the Derwent supply. This would probably cost some £40,000, but as the main would pass through or close to several villages in the Barrow and Melton Rural Districts, which are themselves in need of a public supply, you would be relieved of a proportion, if only a small one, of this capital outlay. There can be no doubt whatever that this water supply would be a great sanitary acquisition making for the better health of the people. It is erroneous to suppose that any notifiable disease has ever been spread by the present water supply, but it is interesting in this connection to note a recent increase in the prevalence of goitre, a disease which is frequently associated with the consumption of hard water. Moreover, a water of such hardness is unsuitable for the vast majority of rheumatic subjects. The main object in securing a supply from the source which is above suspicion is the safe-guarding and protection of the public from diseases which may be disseminated by means of water. Incidentally, a softer water leads not only to a higher standard of

comfort and cleanliness, but to a great saving for householders in the money spent in toilet and household soaps."

ASHBY-DE-LA-ZOUCH RURAL.

The Medical Officer of Health reports as follows:—

"A public water supply for Oakthorpe and Donisthorpe is under consideration, and an engineer has been appointed to prepare a scheme. The main supply of water for the district is derived from wells."

BELVOIR RURAL.

No part of the district is supplied from any water works. The Medical Officer of Health reports that "Harston, Cropstone, Knipton, and Belvoir have a good supply of spring water, free from pollution, and the parishes in the Vale are supplied from shallow wells, being more shallow in Bottesford than in other villages."

BILLESDON RURAL.

"111 premises derive their water from wells."

BLABY RURAL.

The Medical Officer of Health reports that "16 samples of water were taken for analysis, and three were condemned. Two wells were closed and four repaired, and in two instances the public supply was substituted. A supply of wholesome water is urgently needed for Whetstone, and an extension of the water mains throughout the village of Countesthorpe. At Huncote a constant supply of water is necessary on account of the shortage and contamination of wells on the lower side of the village."

CASTLE DONINGTON RURAL.

The Medical Officer of Health reports that "the main supply is obtained from brooks. The number of premises deriving their water supply from wells is 28."

HALLATON RURAL.

The following is an extract from the Medical Officer of Health's Report:—

"This District's supply is chiefly from springs and shallow wells. Most of the village of Hallaton is supplied by spring water conveyed by pipes, and should be supplemented by a similar supply for the remainder of the village."

HINCKLEY RURAL.

"The three largest villages—Earl Shilton, Barwell, and Burbage have a public water supply obtained from Hinckley, and Stoney Stanton has a separate public supply. In all four, however, there is a quatum of shallow wells, and as these are almost invariably more or less contaminated, their closure and the substitution of the public supply, a work which proceeded apace in 1914, should be resumed."

LOUGHBOROUGH RURAL.

The following is an extract from the Medical Officer of Health's Report:—

"The village of Nanpantan, and Prestwold Hall as well as Burleigh Hall, have the public supply of water from the Borough of Loughborough. The village of Thorpe Acre has recently had the main extended from Loughborough, and as the well water in this village is of very poor quality, I hope soon to see every house in the village connected up to the main. In other parts of the district the water supply is derived from wells, and as well water is constantly liable to change from pollution from the surface of adjoining grounds, movement of sub-soil water, etc., this matter received a considerable amount of attention from the Inspector of Nuisances. Eight samples of drinking water were submitted to me for analysis during the year, seven were condemned, and the wells cleaned and repaired."

LUTTERWORTH RURAL.

The following is the Medical Officer of Health's Report:—

"I had occasion during the year to renew my pre-war advice as to the extension of the Derwent water supply throughout a section of south-west Leicestershire, including part of the Lutterworth Rural District. Three samples of water were taken for analysis and one condemned. In 35 instances the public supply was substituted for wells."

MARKET HARBOROUGH RURAL.

The Medical Officer of Health reports as follows:—

"During the year two public taps have been fixed to the Urban District Council's main at Lubenham. These will greatly help a part of the village which has suffered in the past from shortage of good water."

MELTON MOWBRAY RURAL.

The Medical Officer of Health reports:—

“The District is for the most part supplied by wells, the majority of these varying from 10 to 20 feet in depth. The water, therefore, consists chiefly of that which has penetrated through the surrounding soil. The wells sometimes become polluted by surface water, which finds entrance from the surface. How far the majority of these waters would bear a chemical and bacteriological examination is doubtful, but when a really bad water comes to light its use is forbidden. We have, however, a large number of really good wells providing excellent water. Some years ago I began a survey of the waters of the entire district, but having met with discouragement, and even opposition from various parties, some of whom were members of your Council, I desisted from prosecuting my inquiries into the value of the water supply.”

There were no Local Government Board inquiries during the year in reference to the water supply of any district in the County.

Samples of water are taken for analysis from time to time in the various areas so that any contamination should be detected and remedied if the report of the analysis is unfavourable.

Rivers and Streams.—Examinations were conducted and analysis made of the following Rivers and Streams in Leicestershire, viz.:—Garendon Brook, Shepshed, Anstey, Ratby, and Kirby Muxloe Brooks, also the River Soar above and below Wanlip, at which place the storm water overflow from Leicester joins this river.

Examinations were also performed on the River Eye, above and below the point where the Melton sewage joins the river.

At Coalville there are two brooks, one flowing north the other south, and these ultimately receive the effluents from the two Sewage Farms, and the Medical Officer of Health reports that “by the time these effluents reach the brooks they are in an innocuous state.” An examination of these brooks, made by myself, confirms this.

At Hinckley, the Medical Officer of Health reports that “the Sketchley Brook receives the effluents from the Sewage Works, but no complaint of pollution has been received during the year.”

Drainage.—The following are extracts from the Medical Officers of Health Reports on the Drainage in the various Districts:

ASHBY URBAN.

“The drainage system works satisfactorily, and flushing of the drains is done regularly.”

COALVILLE URBAN.

“Except in the Rural part the district is drained and sewered throughout.”

HINCKLEY URBAN.

“The town is supplied with an ample system of drainage in the combined system, and practically all the sewers have a sufficient gradient to ensure a self-cleansing velocity. The flat grated sewers have been flushed from time to time.”

MELTON MOWBRAY.

“The town is for the most part well drained. Sections of sewer which pass through running sand have, however, given trouble through choking of the tanks at the outfall. The worst of these is at the present moment being rectified.”

OADBY URBAN.

“The inspection of drainage of private property is intimately interwoven with the work which is now being systematised under the housing regulations. While a great deal of work lies in front of us with regard to the older properties, all of which have been reinspected under these regulations, it is satisfactory to report that for the greater part of your district the existing provision is satisfactory. Indeed, the majority of the newer houses are not only well but excellently drained.”

WIGSTON MAGNA URBAN.

“The district is efficiently drained.”

MARKET HARBOUROUGH URBAN.

(See “Sewage Disposal”).

ASHBY-DE-LA-ZOUCH RURAL.

“Drainage systems for Measham and Thringstone are both matters which should receive your attention, as in both localities antiquated and inefficient methods are in use.”

Sewage Disposal.—In general, the District Medical Officers of Health Reports speak of the satisfactory working of the sewage schemes of their own particular area.

ASHBY WOULD'S URBAN.

"The disposal of sewage is in perfect order, and so is the system of excrement disposal."

MELTON MOWBRAY URBAN.

In this town there has been some trouble owing to the choking of the tank sewer, but steps have been taken to remedy this defect. This choking of the tank sewer gave rise to temporary river pollution, and there were complaints from the village of Asfordby, which is situated lower down the river.

The Medical Officer of Health reports that "the provision for sewage treatment for Melton Mowbray is ample and adequate."

The following are the Reports from the Medical Officers of Health of different districts:—

COALVILLE URBAN.

"The two sewage farms at Kelham Bridge and the Snarrows are both working well, and the effluent has been examined and found satisfactory."

HINCKLEY URBAN.

"The sewage is disposed of, after being treated with lime, and allowed to stand in the settling tanks, by a combination of filter beds and broad irrigation. The town is supplied with an adequate system of drainage on the combined system, and practically all the sewers have a sufficient gradient to ensure self-cleansing velocity. The flat grated sewers are flushed from time to time."

LOUGHBOROUGH URBAN.

"The sewage is disposed of at the sewage farm by (1) Dortmund tanks, by which a large amount of heavy sludge is extracted, (2) by irrigation in furrows over a cultivated farm, with specially drained sub-soil, (3) by bacteria beds, and (4) by broad irrigation."

MARKET HARBOROUGH URBAN.

"The system is in good order and self cleansing. Sewage gravitates through a 24-inch outfall sewer of glazed stoneware pipe to the sewage disposal works, situate two and a half miles east of .

the town. Drainage is on the "separate" system, storm water being excluded from the sewers as far as possible. Dry weather flow of sewage is about 339,000 gallons a day, an equivalent of $37\frac{2}{3}$ gallons per head of 9,000 population. The system is capable of dealing with a population of 12,000; it includes detritus and sedimentation tanks, sludge pumping machinery and sludge lagoons, together with 10 acres of land laid out on the intermittent irrigation system. The total area of the farm is 110 acres, of which 65 acres are laid out on the broad irrigation system in addition to the above. The sewage is of a typical character; analyses of the effluent have been uniformly satisfactory. Excrement disposal is entirely by the water carriage system of sewage."

QUORNDON URBAN.

"More land (about 14 acres) is being acquired for sewage disposal by broad irrigation."

SHEPshed URBAN.

"The portion of the sewage farm west of the central carrier was thoroughly overhauled and cleaned during the latter part of the summer, and was of considerable value in helping the system of irrigation. With the cutting of the three-year-old osiers on the east side, opportunity should be taken to clean on similar lines, which will be a further help. The Council have called in Mr. T. I. McCarthy, of Coalville, to advise as to a permanent improvement in the whole system being effected."

Inspections were made by Dr. J. A. Fairer on the following sewage farms during the year, viz., Shepshed, Kibworth, Fleckney, Oadby, Blaby, Kelham Bridge (Coalville), Ashby, Anstey, Kirby Muxloe, Glenfield, Sileby, Mountsorrel, and Melton Mowbray.

Effluents were collected and examined from each of these farms. As a result of these inspections and reports, communications were sent to the various Medical Officers of Health intimating the necessity of rectifying any pollution discovered.

Further particulars as to sewerage and sewage disposal of the different areas are to be found in the summary at the end of this Report.

Closet Accommodation.—The Reports from the District Medical Officers of Health, on Closet Accommodation, are as follows:—

MELTON MOWBRAY URBAN.

"The vast majority of the houses are provided with cistern flushed water closets. A small percentage of pits still, however, exist."

HINCKLEY URBAN.

"Number of privy middens 9, and pails or earth closets 14. These are on the outskirts of the town, where it is not possible to connect to the sewer. The remainder of the closets in the town are water closets."

COALVILLE URBAN.

"Several conversions of ash pit privies into water closets have been made, and minor improvements in house drainage have been effected. The sanitary conveniences at the end of the year were as follows:—

Water closets	...	...	...	...	1,581
Privies with fixed receptacles	...	...	...	...	1,689
Privies with moveable receptacles	...	...	...	...	55

The difficulties in connection with materials and labour, although not so acute as in previous years, have retarded the conversion of ash pit privies into water closets."

MARKET HARBOROUGH URBAN.

"Vault closets none, buckets 6, and water the remainder."

QUORNDON URBAN.

"There are in the district 232 water closets, 375 pan closets, and 19 middens, some of which are deep ones."

WIGSTON MAGNA URBAN.

"The sanitary conveniences of the district are approximately as follows:—

W.C.'s	...	...	...	...	1,730
Pail closets	...	...	...	...	49
Privies	...	...	...	...	58

The necessity for the complete abolition of the latter is a sanitary measure which is now claiming systematic attention."

THURMASTON URBAN.

"Nearly all the houses are provided with pail closets."

BELVOIR RURAL.

"At Croxton and Knipton some of the houses have water closets, and the sewage goes to the filter bed. The houses that have pan closets are emptied in the ordinary way by the tenant. At Harston they have mostly pan closets, and at Belvoir chiefly water closets. Muston, Redmile, Barkeston, and Plungar have principally pan closets. At Bottesford they are chiefly pan closets, but several houses have water closets which drain into the main sewer."

HINCKLEY RURAL.

"It will be observed that some 15 per cent. of the sanitary conveniences are of a type which sanitarians have long since pronounced to be not permissible. These pits are not only a fertile source of well pollution but play an important part in the dissemination of disease by flies.

In 1914 over 100 of the worst of these nuisances were abolished, but during the years that have since elapsed but little headway has been made. It is most imperative on health grounds that the completion of this work should be expedited."

Scavenging.

The following are various Medical Officers of Health reports on scavenging:—

COALVILLE URBAN.

"The more general use of dust-bins and the conversion of ash-pit privies into water closets are gradually making efficient scavenging more easy. During the year 5,778 loads of refuse were removed and 13,000 dust-bins emptied. The refuse, where it has any manurial value, is disposed of upon agricultural land. The dry ash and dust-bin refuse generally is carted to suitable tips."

HINCKLEY URBAN.

"The ash-bins and earth closets are emptied weekly, and the ash-pits as required, by the Council's workmen. During recent years it has not been possible to obtain galvanised ash-bins, consequently a great number of boxes and barrels have come into use. This is a great nuisance, and an endeavour is now being made to get every house provided with a proper galvanised dust-bin. The whole of the refuse is taken to a tip at the Council's sewage farm, where the tins are sorted out, and periodically crushed and sold, and the waste paper, etc., burned. At the present time new boilers

are being installed at the gas works, in the furnaces of which it is proposed to burn the town refuse after the tins, etc., have been sorted out."

MARKET HARBOROUGH URBAN.

"Scavenging is effected by the Council carts once or twice a week as necessary; refuse is conveyed to a nursery outside the town. There are only one or two ash-pits in the district, the remainder being moveable ash-bins. There are no cesspools."

SHEPSHED URBAN.

"This work has been carried out by contract fairly satisfactory, but in my opinion the time is approaching when your Council will be forced to undertake this work themselves."

THURMASTON URBAN.

"Nearly all the houses are provided with pail closets, and a weekly system of scavenging of night soil and refuse obtains. In this connection there can be no doubt that a small refuse destructor would be a decided sanitary acquisition."

MELTON MOWBRAY URBAN.

"The town is systematically scavenged by direct labour. No complaints have reached me during the year regarding this, but I think it relevant to direct your attention to the necessity for employing for this purpose proper sanitary transport in lieu of open carts. The refuse destructor is reported by your Surveyor to be working satisfactorily."

LOUGHBOROUGH URBAN.

"This important branch of our work has not been carried out as well as one could have desired owing to the difficulty of obtaining extra horses, plant, etc., this became necessary owing to the working hours being curtailed, increased population and the very poor class of fuel in comparison with that used in pre-war days. The residue from the coal used to-day is very much greater than was formerly the case, and in the aggregate practically 1,000 more loads have been dealt with than was the case last year."

OADBY URBAN.

"Night soil and refuse are scavenged weekly, and cesspools of outlying properties which are not connected with the public sewers are periodically emptied by the public scavenger. After September

20th, 1920, scavenging, heretofore in the hands of a contractor, will be carried out by the Council's employees.

The necessity for the provision of a refuse destructor cannot be gainsaid, and the question is now claiming your careful consideration. Improvement of the sewage farm will enable you to encourage the extension of water carriage, and the reduction or abolition of dry methods of removal will modify the type of destructor which should be provided.

As the Council for the adjoining district of Wigston Magna Urban is in all probability about to provide a destructor, economy and efficiency render it desirable that the two districts should combine for this purpose."

ASHBY-DE-LA-ZOUCH RURAL.

"Public scavenging is carried out at Measham, Oakthorpe and Donisthorpe, and at Heather. It is of great value and might well be extended to other parts of your district."

LOUGHBOROUGH RURAL.

"Removal and disposal of house refuse is done by the occupier; there are no public scavengers."

LUTTERWORTH RURAL.

"It will be noted that Lutterworth and seven of your villages are systematically scavenged. As in all Rural Districts for which I am Health Officer I have again to urge extension of the system of scavenging of night soil and refuse to all villages with over forty houses."

MARKET HARBOROUGH RURAL.

"The scavenging of Fleckney and Kibworth Beauchamp is now carried out by the Council by direct labour and hired team labour. During the past year the work has been carried on with difficulty owing to the shortage of labour.

The public scavenging of Kibworth Harcourt is carried out by contract. The remainder of the district has no scavenging system other than the removal of refuse, soil, etc., by the owners and occupiers."

BELVOIR RURAL.

"There is none in the district."

BARROW-ON-SOAR RURAL.

"Eleven villages are systematically scavenged. In the remainder, viz., the smaller and more scattered villages, this work is left to the occupier."

Schools.

The following are the sanitary conditions of schools in the County, extracted from the School Annual Report:—

The total number of school departments is 321.

During the latter years of the war only the most urgent sanitary defects could be rectified. During the last few months of 1919, however, every effort was being made to get the conditions of the schools up to a good standard. A summary of the general defects noted in the reports which have been received is as follows:—

EXCREMENT DISPOSAL.

W.C.'s	...	...	...	60
Pail	...	...	...	117
Privy	...	...	...	55

Of the above, 57 are reported to be unsatisfactorily kept, and the same applies to 16 urinals.

DAMPNESS.

Walls	...	...	...	27
Ceilings	...	...	...	10
Floors	...	...	...	6

Most of the dampness of the walls and ceilings is due to defective roofs, spoutings, and rain pipes. These require remedying as damp walls may be expected to endanger the health of the children. In other cases the dampness of the lower portion of the walls is due to the absence of a proper damp proof course, and this would require more extensive alterations to the school buildings than would be necessary when such dampness is due to defective roofs and spoutings.

WATER SUPPLY.

No supply	...	...	...	12
Insufficient supply	...	...	...	2
No drinking water	...	...	...	8

In some of the smaller villages there is a considerable difficulty in reference to water supply, but a reasonable supply of drinking

water should certainly be available in every school. Some of the schools depend for their supply of drinking water from some adjacent well, and this has to be carried from such a well to supply the school. Not only does this apply to drinking water, but also for water for use in lavatories. In the latter case some steps should be taken to remedy this defect by collecting the rain water from the school roof.

The methods employed in this County for detecting and preventing the spread of infectious disease amongst school children are as follows:—

The Head Teachers of all school departments forward to the Chief School Medical Officer each week a form (M. 9) giving particulars whether there is, or is not, any infectious illness. The names and addresses of children absent on account of infectious illness (both "sufferers" and "contacts") the date when the child was first absent, the nature of the complaint as far as can be ascertained, and the informant, are given on this form. In cases where the informant is a parent, further information is obtained through the School Attendance Officer, and where a medical man is in attendance this fact is recorded. In those cases where the nature of the complaint is doubtful, consultation is made with the District Medical Officer of Health, who is asked to visit the school in order to verify the diagnosis. If the attendance at any school is very low owing to infectious illness, it is closed for a definite stated period. Previous to re-opening, information is obtained through the School Attendance Officer as to the probable attendance on re-opening, and if necessary the school closure is further extended. In cases where the attendance is only slightly below the average, the Head Teacher is requested to forward a daily post-card of the attendance in order that the Chief School Medical Officer may be kept fully informed of the conditions prevailing.

As regards notifiable diseases these are forwarded each week by the District Medical Officers of Health.

The Medical Inspectors, in their periodical visits, examine all children and take the necessary steps to exclude any suspicious cases of Notifiable Disease.

All school premises are thoroughly disinfected by the Sanitary Authorities after any outbreak of infectious illness.

Food.**(a) MILK SUPPLY.**

There is an adequate supply of milk throughout the County and much milk is exported into the neighbouring cities, a large quantity being despatched daily to the Metropolis. In an agricultural County like Leicestershire there is always an adequacy of milk supply, and constant supervision is made by the Sanitary Inspectors of all dairies, cowsheds, and milkshops. Inspection is made of all exported milk by Government Inspectors specially appointed for this purpose.

(b) MILK AND CREAM REGULATIONS.

No case of preservatives being added to milk was discovered out of 143 samples examined for the presence of any preservative substance in the milk. A record of the inspections is found under heading "Sale of Food and Drugs Act."

MILK (MOTHERS AND CHILDREN) ORDER, 1918.

This is dealt with under the heading "Maternity and Child Welfare Centres."

Sale of Food and Drugs Acts.—The Acts relating to the sale of Food and Drugs, and the Regulations made thereunder, are administered in this County by the Police.

The following is a Record of the work done under the Public Health (Milk and Cream) Regulations, 1912, during 1919:—

1. Milk; and Cream not sold as Preserved Cream.

	(a) No. of Samples examined for the presence of a preservative substance.	(b) No in which a preservative was reported to be present.
Milk	143	None
Cream	0	None

2. Cream Sold as Preserved Cream.

(a) Instances in which samples have been submitted for analysis to ascertain if statements on labels as to preservatives are correct.			(b) Determinations made of milk fat in cream sold as preserved cream.			(c) Instances where (apart from analysis) the requirements as to labelling or dec- laration of preserved cream in Art. v (1) and the provision in Art. v (2) have not been taken.	(d) Particulars of each case in which regu- lations have not been com- plied with, & action taken.
¹ Statements correct.	² Statements incorrect.	TOTAL	¹ Above 35 p.c.	² Below 35 p.c.	TOTAL		
0	0	0	0	0	0	None	None

3. Thickening Substances.

(a) Evidence of their addition to cream or preserved cream.	(b) Action taken.
None	None

4. Other observations.

The 143 samples of Milk were all taken with the usual formalities under the Sale of Food and Drugs Act.

Prevalence of and Control over Infectious Disease.—The Schedule below gives the numbers of each disease notified in the Urban and Rural Districts, with the totals for the whole County during the year under review:—

DISEASE.		URBAN DISTRICTS.	RURAL DISTRICTS.	ADMINIS- TRATIVE COUNTY.
Notification Act.	Diphtheria (including Membranous Croup) ..	155	206	361
	Erysipelas	30	47	77
	Scarlet Fever	197	196	393
	Enteric Fever	11	29	40
	Continued Fever	—	—	—
	Puerperal Fever	5	7	12
	Chicken Pox	81	10	91
	Impetigo	—	2	2
Public Health Act.	Measles	125	248	373
	German Measles	30	28	58
	Tuberculosis (Lungs) ..	203	133	336
	Ditto (other forms) ..	30	23	53
	Ophthalmia Neonatorum ..	20	7	27
	Poliomyelitis	2	1	3
	Cerebro Spinal Meningitis ..	10	7	17
TOTALS	Notification Act	479	497	976
	Public Health Act	420	447	867
GRAND TOTALS ..		899	944	1843

It will be seen that the total number of notifications received this year was 1,843. The notifications were 4,687, 4,923, and 4,882 in the previous years 1916, 1917, and 1918 respectively.

The marked decrease of 3,039 notifications of infectious disease is chiefly accounted for by the lessened number of cases of Measles

which were notified, the number being 431 this year, as against 3,776 and 3,686 in the previous two years.

Small-pox.—During the year no cases of Small-pox have been notified. The last case of this disease reported in the County occurred in 1910. Of the two Small-pox Hospitals at Syston and Snarestone, the former is still kept in readiness to receive patients at a moment's notice, while the latter, in July, 1919, was transformed into a Sanatorium for the sole use of discharged soldiers suffering from Tuberculosis. In the event of a Small-pox epidemic all arrangements have been made to discharge the Tuberculous patients immediately from this institution and to use the same as a Small-pox Hospital.

Diphtheria and Croup.—In this disease, both incidence and fatality were worse this year than last. However, the Death rate for the whole County is the same as for last year, viz., $\cdot 17$. The Death rate for the rest of England is only $\cdot 13$. The County for the last three years has had a higher Death rate from this disease than has the rest of England. The deaths this year totalled 44 as against 29 in the years 1915 and 1916, and 34 and 39 in the following two years. The attack rate has steadily risen since 1917, when it was $\cdot 95$. In 1918 it was $1\cdot 13$, whilst this year it is $1\cdot 44$. The County Council continue to provide for the examination of Throat Swabs taken from suspicious and doubtful cases with the object of assisting Medical Practitioners in their diagnoses.

During the year under review 91 examinations have been made, and 35 were found to be true Diphtheria, whilst the remaining 56 gave negative results. The total cost of these examinations was £26 2s. 2d.

It is with the object of diminishing the Death rate from this disease, and of giving the general practitioners greater facilities in their diagnoses, that the County Laboratory is being formed. This Laboratory, when fully equipped, will undertake the work in the first week of 1920.

If a throat swab is received in which the Diphtheria bacilli can be demonstrated by direct smear, the doctor in attendance will be at once notified by either telephone or telegraph. In all cases a report will be given within 24 hours.

DIPHTHERIA.—The following Table gives the statistics of this disease.

Year.	No. of Notifications.			No. of Deaths.			Attack Rate.			Case Fatality per cent.			Death Rate.			* Death Rate for Rural England and Wales.
	Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County	
1915	111	152	263	14	15	29	1.1	1.1	1.1	12.6	9.9	11.0	0.14	0.10	0.12	0.14
1916	95	141	236	5	24	29	0.9	1.0	0.98	5.3	17.0	12.3	0.05	0.17	0.12	0.14
1917	95	125	220	19	15	34	0.98	0.93	0.95	20.0	12.0	15.45	0.19	0.11	0.14	0.13
1918	121	137	258	20	19	39	1.26	1.03	1.13	16.6	13.8	15.11	0.21	0.14	0.17	0.14
1919	155	206	361	22	22	44	1.45	1.42	1.44	14.19	10.67	12.18	0.21	0.15	0.17	0.13

* Per 1000 of Population.

It is further hoped that in case of any severe outbreak, swabs will be taken from all contacts, and especially does this apply where an epidemic occurs in a school. Throat swabs will be taken of all the children in the infected village previous to the closure of the school. A report of all these swabs will be given to the District Medical Officer of Health, and by this means "carriers" of the disease can be isolated at once. It will mean a considerable amount of laboratory work; but it is hoped by this means to lessen the mortality and incidence of this disease in the County. Throat swabs and anti-toxin are always kept in stock by the Local Medical Officers of Health, and are available, on request, by the local practitioners.

In the Market Harborough Rural District the Medical Officer of Health reports "9 cases of Diphtheria were reported and 3 of these proved fatal. In the first case no medical man was called in until death had occurred, so that the disease was not notified, nor were any precautions taken. Proceedings would have been taken; but, unfortunately, the father died of the disease and the mother was blind, so that the proceedings were abandoned."

In the Shepshed Urban District there were three cases (two in one family, one of which ended fatally).

Of the five cases in the Hinckley Rural Area only one died.

An outbreak of Diphtheria occurred in Redmile, commencing in August, and going on until the end of the year. There were 19 cases, of which 13 were sent to the Hospital; and all were given anti-toxin treatment.

The Medical Officer of Health of the Belvoir District reports that in his opinion the disease was imported into the village, and was first spread by carelessness.

In the Melton Mowbray Rural District there were 19 cases; but no deaths were reported.

The number of cases notified from the Market Bosworth District was 53, and 11 deaths were reported.

The largest number of deaths occurred in the Coalville Urban District, where 13 were reported, and the number of notifications totalled 60. This area for the last three years has claimed the highest number of deaths from Diphtheria, the figures being 11 (1917 and 1918) and 13 (1919).

The Medical Officer of Health for Coalville Urban District states that "of the 60 cases, 47 were clearly contact cases. The milk supply did not appear to play any part in the spread of the disease. Two of the deaths occurred in persons over 17 years of age, but the majority of the deaths occurred in children from 3 to 12."

Six cases of Diphtheria were reported from the Hinckley Rural District. Only one case proved fatal.

The number of notifications received from the Blaby Rural District was 8, and 7 of these were removed to the Isolation Hospital. All the cases recovered.

Of the 43 cases reported from the Barrow-on-Soar Rural District, only three died. The Medical Officer of Health for the District states that "the Queniborough cases were associated with several sources of insanitation, including very inefficient scavenging. These conditions were rectified. Ten cases occurred in Ratcliffe College; five of these were removed to Leicester, and the remaining five to Blaby Isolation Hospitals."

Of the 14 cases notified from Thurmaston Urban District none proved fatal.

Only four cases occurred in the Oadby Urban District, and all recovered. The Medical Officer of Health for the District reports that "there was nothing either in the sanitary circumstances or surroundings to suggest local origin."

Twelve cases of this disease were notified from the Melton Mowbray Urban District, but no deaths were reported.

Only three cases of Diphtheria were notified from the Wigston Magna Urban District. The Medical Officer of Health reports that "at no time in the history of the district have so few notifications of infectious diseases been recorded (total 21). It is most exceptional to record a nil Zymotic Death rate for an Urban District possessing a population of over 8,000.

Contrasting this with the reports of previous years it must be regarded as an incentive of renewed energy in improving the sanitation of the district."

Thirteen notifications were received from the Lutterworth area, and three of these were complicated by the subsequent development

of Scarlet Fever. All three, together with two other cases of Diphtheria were removed to the Blaby Isolation Hospital. No deaths occurred.

Seven cases were notified from the Castle Donington District, and one death occurred.

The deaths from Diphtheria were as follows:—

Urban Districts.—Ashby Woulds 2, Coalville 13, Hinckley 1, Loughborough 5, and Shepshed 1.

Rural Districts.—Ashby-de-la-Zouch 2, Barrow-on-Soar 3, Castle Donington 1, Hinckley 1, Loughborough 1, Market Bosworth 11, and Market Harborough 3.

As was noted last year, this disease was more fatal to females than to males. The Deaths in 1917 were 21 females and 13 males; in 1918—22 females against 17 males, whilst this year 28 females died as compared to 16 males.

With the formation of the County Laboratory it is hoped to furnish in the coming year further particulars as to the benefits which have accrued as a result of bacteriological investigation in diminishing the fatality from this disease in the County.

Erysipelas.—Seventy-seven cases of this disease were notified in the County this year, being an increase of three upon the figure for last year. Thirty cases occurred in the Urban and 47 in the Rural Districts. There were only three fatal cases (1 male and 2 females), and all these occurred in the Rural Districts, viz., Ashby-de-la-Zouch 1, Castle Donington 1, and Melton Mowbray 1.

The majority of the notifications came from the following districts:—

Market Bosworth 12, Ashby-de-la-Zouch Rural 11, Hinckley Rural 8, Market Harborough Urban 6, Hinckley Urban 5, Melton Mowbray Rural 5, Barrow-on-Soar Rural 5, and Blaby Rural 4.

SCARLET FEVER.—The statistical information relating to Scarlet Fever is as follows.

Year.	No. of Notifications.			No. of Deaths.			Attack Rate.			Case Fatality per cent.			Death Rate.			* Death Rate for Rural England and Wales.
	Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County	
1915	271	265	536	4	3	7	2.6	1.8	2.1	1.5	1.1	1.3	0.039	0.020	0.028	0.06
1916	150	231	381	1	0	1	1.5	1.7	1.6	0.66	Nil	0.26	0.010	Nil	0.004	0.04
1917	161	205	366	1	1	2	1.65	1.52	1.56	0.62	0.49	0.55	0.01	0.007	0.009	0.02
1918	184	119	303	2	0	2	1.92	0.90	1.33	1.08	...	0.66	0.02	0.00	0.009	0.03
1919	197	196	393	2	1	3	1.85	1.35	1.56	1.01	0.51	0.76	0.02	0.007	0.011	0.03

* Per 1000 of Population.

Scarlet Fever.

It will be seen that there were 393 notifications this year from this disease, an increase of 90 on last year. Three deaths were reported, two being from the Urban and one from the Rural Districts. All were females, two occurred in Coalville and one in Blaby Rural area. The largest number of cases were reported in the Coalville area.

The Medical Officer of Health reported as follows:—

“During 1919, 102 cases of Scarlet Fever were notified as compared with 49 for the previous year. Two deaths were attributed to this cause. It will be seen that the case mortality is very low—2 per cent.—and this mildness of the disease proved a factor in its spread. Many of the cases were notified in the “peeling” stage, and apparently apart from that the illness was unrecognised in several cases. In one case Police Court proceedings were taken, and a conviction secured against a parent for exposing a child in a public place in an infectious condition.

A curious characteristic of the outbreak was the large number of adult cases affected, some 12 cases being amongst persons over 30 years of age. In one case, aged 61, the disease was not notified until the “peeling” stage was reached; in fact, it was the marked desquamation that led the patient to consult a medical man.”

A large number of cases were reported from the Market Bosworth District, the number of notifications being 76; but no deaths occurred.

The Medical Officer of Health for the Market Harborough District, where 47 cases were notified, reports as follows:—

“The Scarlet Fever cases have again been of the same mild type as in 1918 (when 109 cases were notified); being so mild that they often escaped the parents’ notice, and so the prevalence continued. Cases have occurred at widely separated parts of the district, and amongst scholars from different schools. All have been isolated at home, and only two ‘return’ cases occurred.”

The majority of the remaining cases occurred in the following districts:—

Ashby-de-la-Zouch Rural.—31 (6 removed to Swannington Fever Hospital. None proved fatal).

Blaby Rural.—21 cases with 1 death.

Shepshed Urban.—15 cases. The Medical Officer of Health reports that “the 15 cases of Scarlet Fever were spread over the whole year, and were not confined to any particular locality or school.”

Melton Mowbray Rural.—14 cases; 12 removed to hospital, and no deaths occurred.

Market Harborough Rural.—25 cases. All these cases were of a mild type and confined chiefly to the Langtons and Foxton.

As will be seen from the above Table, Scarlet Fever cases have decreased in the last four years, the yearly average being 360, whilst in 1915—536 cases were notified, and in 1911, 1912, 1913, and 1914 the total notifications for Scarlet Fever were 3,366, a yearly average of 841. This year the County Death rate is .011, as compared to .03 for Rural England and Wales.

TYPHOID FEVER.—The statistics relating to Typhoid Fever are given below.

Year.	No. of Notifications.			No. of Deaths.			* Attack Rate.			Case Fatality per cent.			* Death Rate.			* Death Rate for Rural England and Wales.
	Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County	
1915	7	14	21	1	3	4	.07	.09	.08	14.3	21.4	19.0	.009	.020	.016	0.05
1916	4	27	31	5	8	13	0.04	0.18	0.13	...	29.6	42.0	0.05	0.06	0.05	0.03
1917	7	19	26	2	4	6	0.07	0.14	0.12	28.6	21.0	23.1	0.02	0.03	0.03	0.03
1918	6	22	28	1	6	7	0.06	0.16	0.12	16.6	27.2	25.0	0.01	0.04	0.03	0.03
1919	11	29	40	0	5	5	0.10	0.20	0.16	0.00	17.24	12.50	0.00	0.03	0.02	0.01

* Per 1000 of Population.

Typhoid Fever.

Forty cases of this disease were notified this year as compared with 28 last year, and the deaths totalled 5 as against 7. Eleven cases occurred in the Urban Districts and 29 in the Rural. No deaths were reported from the former, whilst 5 were recorded out of the 29 Rural cases. The Death rate of the County is just double that of England and Wales, being 0.02 against 0.01.

Deaths occurred in the following Districts:—Ashby-de-la-Zouch Rural 3 (1 male and 2 females), Hallaton Rural 1 female, and Market Harborough Rural 1 female.

Eight cases were reported from the Blaby Rural District—all occurring at Whetstone, and the Medical Officer of Health reports as follows:—"The incidence of Enteric Fever towards the close of October, in Whetstone, a village whose record as regards this disease is far from satisfactory, led to an extension of the disease beyond the district. Milk was the medium by which infection was conveyed, for the initial cases occurred in a farm-house from which milk was supplied to a dairy in Leicester.

On notification of the first case I took immediate steps, in addition to hospital isolation and disinfection, to interdict milking or handling of utensils used in the business by all members of the household, all milk being rigorously excluded from the house and the churns being removed to another farmyard. In addition, a contaminated well, to whose specific pollution I ascribed the earlier cases, was put out of action. As subsequently transpired, the milk had been infected prior to any intervention, and there can be no doubt whatever that a subsequent leakage of infection took place, not once, but probably at intervals, until the occurrence of the first four cases in Leicester led to refusal of the milk supply on the advice of the Medical Officer of Health. I found that the well, whose use I had interdicted, was again being employed, and although the use of this water for washing churns was not admitted, I found one churn near by. There was, indeed, sufficient evidence of laxity to compel a refusal of the milk, and this culminated in the permanent closure of the business.

In addition to the Whetstone cases, 24 persons who had been directly or indirectly infected by this milk contracted the disease. Although most of the cases were mild, and all recovered, the consequences might have been far more serious. In so far as I am

personally concerned, the outbreak, by reason of its potentialities, caused the most anxious period I have ever passed through in all my long experience as a Medical Officer of Health.

In a large combined district I have often to deal with infectious disease in farm-houses from which milk is distributed. This was, however, the first occasion on which a complete stoppage of a supply was necessary, other less drastic measures invariably sufficing in all other instances.

The village of Whetstone derives its water supply from shallow wells, almost all of which are more or less polluted, and Enteric Fever has been so prevalent in the past (there were 13 cases in 1918) that the continued use of water from these wells is a perpetual menace to the public health. We might have a recrudescence of such trouble at any moment with a broadcast spread of infection before any steps could be taken to avert it. It is for this reason that I have been urging the utmost expedition in securing the Leicester City water supply for this village.

For some years before the war I counselled an extension of the Derwent supply into a large part of south-west Leicestershire, and, needless to say, the desirability for this extension is in no wise diminished. The need for a public supply in Whetstone is far more pressing than is the case elsewhere; for no parish within that area has so unenviable a record regarding what is *par-excellence* a water borne disease."

Five cases occurred in the Ashby-de-la-Zouch Rural, three at Measham, and one each at Heather and Thringstone; three of the cases proved fatal. The Medical Officer of Health states "no definite cause for the occurrence of this disease was found."

With reference to the death in the Hallaton Rural District, this occurred at Great Easton, and the Medical Officer of Health reports that "the diagnosis was doubtful and lacked bacteriological confirmation."

The Medical Officer for the Market Harborough Rural District reports "five cases (all occurring in one house) with one death, but no cause could be assigned for the original case."

Puerperal Fever.—This year 12 notifications were received and seven deaths reported, giving a case fatality per cent. for the whole county of 58·33. Comparison cannot be made with the

previous three years as the total number of cases reported in these years was 12, whilst the deaths totalled 25, showing an obvious discrepancy and failure to notify.

Strict supervision prevails as regards all certified midwives in cases of this disease.

Measles.—There is a marked diminution in the notifications of Measles and German Measles in the County this year. During the last three years these notifications have always totalled well over 3,000. This year it will be seen that the number is only 431. With the lesser prevalence of Measles there is also a decrease in the number of deaths. The disease seems to run in a cycle, showing three or four years in which there is a marked prevalence followed by an abatement.

Such has occurred this year both in the number of cases and of deaths. The number of schools closed on account of Measles averages 54 for the last five years, and the average period of weeks closed was $4\frac{3}{4}$, whilst the number of children affected was on an average 6,673. This year the number of schools closed was only seven, with an average period of closure of $2\frac{1}{2}$ weeks, and 397 children were affected. This shows a great decrease from last year when the figures were 76 schools closed for a period of $3\frac{1}{2}$ weeks, affecting 10,844 children.

The yearly average of deaths during the last five years is 43·0. This year only three deaths were reported. The number of deaths compares more than favourably with that of last year, when they totalled 51. The Death rate for the county is 0·01, compared with 0·10 for England and Wales.

The appended Table shows the statistics relating to Measles and also to German Measles:—

AREA.	Notifications.		Deaths.		Case fatality percent. Measles	Death rate for R. Eng-land & Wales	Schools Closed.		
	Measles	German Measles	Measles	Rate.			No.	Average period	Children affected
Urban Districts ..	125	30	1	0·01	0·8	0·10	7	$2\frac{1}{4}$	397
Rural Districts ...	248	28	2	0·01	0·8				
Whole County, 1919	373	58	3	0·01	0·8				

Whooping Cough.

AREA.	DEATHS.		SCHOOLS CLOSED.		
	Leicestershire.		No.	Average Period in Weeks.	Children Affected.
	No.	Rate.			
Urban Districts . . .	2	0'02	12	4½	968
Rural Districts . . .	15	0'10			
Whole County 1919 . .	17	0'07			

There has been a marked decrease in the number of Deaths from Whooping Cough this year as compared with 1918, with a corresponding fall in the Death rate. The number of deaths this year is 17, as against 53 last year, and the Death rate has fallen from '25 to '07.

The Death rate this year is identical with that of Rural England and Wales. Of the 17 deaths two occurred in the Urban and 15 in the Rural Districts.

The number of schools closed was 12, and children so affected 968. The average for the last five years of schools closed, and the children affected was 25 and 2,331 respectively.

The deaths from Whooping Cough occurred in the following Districts:—

Hinckley Urban 1, Shepshed Urban 1, Ashby Rural 1, Barrow-on-Soar 1, Blaby Rural 1, Castle Donington Rural 1, Hallaton Rural 1, Hinckley Rural 1, Market Bosworth Rural 1, Market Harborough Rural 1.

Poliomyelitis.—Three cases were notified during the year:—Ashby-de-la-Zouch Urban 1, Hinckley Urban 1, and Castle Donington Rural 1. None of these cases proved fatal.

This disease, commonly known as Infantile Paralysis, generally attacks children, but adults are not exempt. The paralysis chiefly affects arms or legs or both, and frequently leaves the sufferer with more or less permanent weakness and deformity. The method of its spread is not fully understood, for it is seldom that more than one case occurs at the same time in a family.

Encephalitis Lethargica.—The specific micro-organism of this disease has not yet been isolated, and its cause and method of spread is not as yet known. The disease is characterised by Inflammation of the Brain, associated with lethargy, the patient falling into a stuporous condition with squint and drooping of the upper eyelids. Tremor of the limbs occur with occasional paralysis of one side of the face and a rise of temperature. The lethargy becomes more marked, and the patient is only aroused with difficulty, and then only answers in a sleepy inarticulate fashion, and finally death supervenes.

From this striking symptom of sleepiness or lethargy this disease is commonly called "Sleeping Sickness." Its onset varies from a few hours to two or three weeks. Occasionally the onset is sudden, and the symptoms such as to suggest Poliomyelitis or Cerebro Spinal Fever.

Encephalitis Lethargica having been made a notifiable disease by order of the Ministry of Health, the number of these cases encountered will be recorded each year.

In 1919 no cases of this disease were reported.

Cerebro-Spinal Fever.—On receipt of information that a patient shows symptoms suspicious of Cerebro-Spinal Fever, Dr. Mackarell, the bacteriologist specially appointed for the purpose by the County Council, is informed, and arranges to visit and investigate the case. Should the diagnosis be Cerebro-Spinal Fever, an examination is made in conjunction with the Medical Officer of Health for the District of all contacts of the case.

With the formation of the County Laboratory, the investigation of all these patients will be undertaken by Dr. Fairer, the Assistant County Medical Officer, and all arrangements have been made for this work to be carried out at the commencement of 1920.

During the year 26 cases were reported with symptoms suspicious of Cerebro-Spinal Fever; 17 of these proved positive.

The diagnosis of the majority of the remainder was Tubercular Meningitis. Of the 17 cases, 10 occurred in the Urban Districts (4 at Melton Mowbray, 4 at Hinckley, and 2 at Loughborough), and 7 in the Rural Districts (Desford 2, Countesthorpe, Medbourne, Earl Shilton, Newbold Verdon, and Asfordby one each).

The ages of the patients varied from $2\frac{1}{2}$ to 46 years.

Seven were under 10 years, 4 were between 10 and 20, 1 between 20 and 30, and the remaining 5 were over 30 years of age.

Of the cases at Hinckley all four recovered.

The Medical Officer of Health for the District reports as follows:—

“The first case of this disease occurred on April 9th, the patient was removed to the Isolation Hospital, Leicester. The three contacts were isolated until the result of their swabs were obtained, and these proved negative.

“The second case occurred on April 10th, a boy of six, ill for five days, removed to Leicester. There were four contacts—two proved positive; the isolation of these latter two was continued until swabs were negative. One proved obdurate and was removed to the Isolation Hospital until clear.

“The third case occurred in June, and this was a child who had been ill for a long time, and eventually the diagnosis was made by a lumbar puncture at the Royal Infirmary, whither the child had been sent by a Leicester physician for observation. On receipt of the report the contacts were isolated and swabbed; two, proving positive, were removed to the Isolation Hospital. All three cases recovered.”

Of the four cases at Melton Mowbray, three unfortunately died.. The two Loughborough cases both recovered; and in the Rural Districts the cases at Desford (2) proved fatal, as also did those at Newbold Verdon and Asfordby.

This gives seven deaths out of a total of 17 cases of this disease, a percentage of 41. The total number of swabs taken from contacts was 206, of which 25 were positive. Further examination of these positive contacts were made, and isolation was carried out until the persons concerned were proved to be negative.

The specific micro-organism of this disease (*Meningococcus*) is present in the Cerebro-Spinal fluid, and also in the nose and throat of the sufferer. It has been proved that the micro-organism can be present in the nose and throat of a healthy individual, and the disease be transmitted by this person to others.

The disease tends to occur in epidemic form, cases occurring often in neighbouring towns and villages. However, it is not often spread from the sick to the healthy or from the sufferer to those attending on him.

This is fortunate, as the mortality from Cerebro-Spinal Fever is particularly high. The importance of examining contacts is that any "carrier" of the disease can be kept under observation and treated, so that although himself well he may not inadvertently infect others.

Ophthalmia Neonatorum.—In all, 27 cases were notified, 20 occurring in the Urban and 7 in the Rural Districts. This is a marked increase on last year's notifications, when only 8 were reported. Of the 20 Urban cases, the majority occurred in the Coalville Urban, Loughborough Urban, and Melton Urban Districts.

All these cases are visited repeatedly by the Health Visitor, and enquiries are instituted as to its origin, and every precaution taken that treatment is being given. Strict supervision is made of all Certified Practising Midwives in reference to the disease, and action taken if necessary. During the year no action has been taken against any midwife in reference to this disease.

Pneumonia, Malaria, Dysentery, and Trench Fever.—The following are the particulars with regard to these diseases which became notifiable under the regulations of January 7th, 1919. In reference to Pneumonia the notifications were divided into (1) Primary and (2) Influenzal, the former totalled 5, whilst Influenzal Pneumonia numbered 67.

Only two cases of Dysentery were reported, and no cases of Trench Fever.

The notifications of Malaria were 59; and these all occurred in discharged soldiers.

Influenza.—There is a marked decrease in the number of deaths from Influenza this year as compared with 1918. The actual figures are 279 as against 863, and the percentage of deaths for the County this year is 18, as compared with 22·88 last year. The epidemic of 1918 was most virulent in the Autumn months,

particularly in November and December, and began to abate early in 1919, so that several of the 279 deaths for this year are the aftermath of the true epidemic of 1918.

Towards the end of the year very few cases of Influenza were encountered. As the Respiratory type of the disease predominated Penumonia supervened all too frequently. Hence, together with the decrease in the number of deaths from Influenza this year, as compared with that of last year, there is also a corresponding decline in the number of deaths from Pneumonia.

Appended is a Table showing the Deaths which occurred from Influenza in the Urban and in the Rural Districts, with particulars as to age and sex distribution.

AGE.	URBAN DISTRICTS.			RURAL DISTRICTS.			WHOLE COUNTY.		
	M.	F.	Total	M.	F.	Total	M.	F.	Total
Under one	4	1	5	10	4	14	14	5	19
1 to 2	..	2	2	1	4	5	1	6	7
2 to 5	3	5	8	7	8	15	10	13	23
5 to 15	4	1	5	5	3	8	9	4	13
15 to 25	3	7	10	9	7	16	12	14	26
25 to 45	21	17	38	20	21	41	41	38	79
45 to 65	8	13	21	20	23	43	28	36	64
65 and over	10	6	16	14	18	32	24	24	48
ALL AGES	53	52	105	86	88	174	139	140	279

The large number of deaths (79 out of a total of 279) between the ages of 25 and 45 will be observed.

As was observed last year, more deaths occurred this year in the Rural than in the Urban areas. The Rural Death rate from this disease was 1.2, as against .98 for the Urban Districts. The difference in the Death rate is possibly accounted for by the fact that efficient nursing is more easily procurable in the Urban than in the Rural Districts.

DIARRHOEAL DISEASES.

Deaths under Two Years of Age.										
Year.	Number.			Rate per 1000 Population.			Rate per 1000 Births.			England and Wales Rate per 1000 Births.
	Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County	
1915	35	25	60	0.34	0.17	0.24	14.77	8.05	10.96	...
1916	13	14	27	0.13	0.10	0.11	5.72	4.62	5.09	12.47
1917	11	14	25	0.11	0.10	0.108	5.80	5.50	5.64	12.18
1918	10	16	26	0.10	0.12	0.114	5.52	6.36	6.01	10.99
1919	9	10	19	0.08	0.07	0.08	5.00	3.99	4.41	9.59

Diarrhœal Diseases.

As will be seen by the above Table, there has been a marked decrease in the number of deaths under two years of age. The deaths from Diarrhœal diseases have fallen since 1915 (when the deaths totalled 60), up to the present year, when the deaths recorded are only 19. In 1913 and 1914 the deaths were 73 and 72 respectively. This lessened mortality is particularly gratifying, and emphasises the value of the work undertaken to combat the prevalence of this infantile disease. Unsuitable food, want of cleanliness in its preparation, and unsatisfactory storage, etc., together with insanitary conditions, are answerable for many of these cases of Diarrhœa.

Much of this work has devolved on the County Health Visitor Staff, and it is pleasing to note the marked fall in the number of deaths since 1915.

During this year the Infant Welfare Centre Scheme was initiated, and the organisation of Infant Welfare Centres commenced throughout the County. Particulars of the scheme are alluded to later.

Of the 19 deaths, 18 occurred in children under one year of age, and only one child attained its first birthday.

As was previously noted last year, the higher mortality occurs in the males as compared to the females, there being 12 male to 7 female deaths. Last year the figures were 16 to 9.

Schools Closed.—The following is the detailed school record for the year:—

Diseases.	No. of Departments Closed.	Average Period of Closure in Weeks.	No. on Rolls.
Chicken Pox	11	2½	841
Chicken Pox and Influenza ..	2	2½	150
Coughs and Colds	17	2¾	2019
Diphtheria	4	2¾	518
Diphtheria and Colds	2	2½	359
Influenza	42	2½	4707
Measles	7	2½	397
Mumps	1	3	42
Mumps and Influenza	1	2½	263
Scarlet Fever	5	1½	681
Whooping Cough	12	4½	968
Whooping Cough and Colds ..	2	3½	85
Whooping Cough and Influenza	1	1½	76
Totals	107	3½	11,106

Tuberculosis.

(a) & (b). *Details of Scheme and extent to which already developed.*

The treatment of persons suffering from Phthisis is undertaken by the County Council in their own Institutions, which are all situated in the County.

The Sanatorium is situated at Mowsley, North Kilworth, where there is accommodation for 50 patients. Up to the 30th October, 1919, adults and children of both sexes were treated there, but since this date only women and children of both sexes have been admitted. Of the men generally speaking, ex-soldiers are treated at Snarestone Hospital, where there are 15 beds; and those other than ex-soldiers are sent to the Leicester City Sanatorium, Groby Road, Leicester, where 15 beds are reserved for County patients

at £2 per week per bed, by arrangement with the City Authorities.

The Residential Dispensaries, for the observation of cases, have accommodation for 22 male patients at Hinckley, and 8 female patients at Coalville. (See Table T.B. 2, 3, and 4).

Out-Patient Dispensaries are held at five centres (see Table T.B. 1), and here all patients well enough to attend are kept under the supervision of the Tuberculosis Medical Officers. Generally speaking, the more advanced cases are transferred to the sole care of their own Doctors. Many of these cases, *i.e.*, soldiers for pension purposes, and also cases with a view to the grant of a shelter are periodically examined by the Tuberculosis Medical Officers.

Forty shelters, complete with bedstead and bedding, are used for advanced cases.

(c). *Adequacy or otherwise of provision made.*

The foregoing Scheme of Treatment has been found to be both unsatisfactory and inadequate, as not only is the Sanatorium accommodation for early cases too small to allow them to stay long enough to receive the maximum amount of benefit, but also no accommodation exists for the isolation of advanced cases, which are always highly infectious, and although a fraction of these cases have and use shelters, a number of cases are known where parents have allowed their children to play in and around the shelter.

At present there is no Scheme for the Treatment of Surgical Tuberculosis, and no provision for an Industrial Colony.

(d). *Lines on which Scheme needs to be extended.*

It is proposed to extend the present Scheme of Treatment along the following lines:—

- (1) The provision of a Sanatorium of 100 beds, in conjunction with an Isolation Hospital of 50 beds, with 6 beds for advanced cases in addition. Two sites are being considered, and an Inspector from the Ministry of Health has inspected both. Provisional plans and estimates have been made, and the same will be dispatched to the Ministry of Health on or before June 30th, 1920.
- (2) Provision of blocks of 6 beds for advanced patients at Melton, Hinckley, and Loughborough, in conjunction with the Isolation Hospitals in those areas; also a block of 6 beds

for advanced cases, and 6 beds for observation cases in conjunction with Blaby Isolation Hospital.

- (3) The Snarestone Hospital for the treatment of 15 ex-soldiers to remain as at present, but to be vacated in the event of an outbreak of Small-pox.
- (4) The Residential Dispensary (8 female observation beds) at Coalville to remain as at present.
- (5) Provision of a Tuberculosis Dispensary at Market Harborough; new Tuberculosis Dispensary at Melton, attached to the Melton Cottage Hospital; the Dispensary at the Manor House, Hinckley, to be replaced by a wooden building in the grounds of same; structural alterations and improvements to the Dispensary at 17, Friar Lane, Leicester. The Out-Patient Dispensaries at Loughborough and Coalville to remain as at present.
- (6) It is proposed to treat Surgical Tuberculosis by combining with another or other authorities. Negotiations have already been held with outside authorities for this purpose.
- (7) The Manor House, Hinckley, now used as Residential and Out-Patient Dispensary, to be used for (1) School Clinic, (2) Day Nursery (possibly), (3) for Infant and Child Welfare Work, (4) Maternity beds, (5) Maternity beds for Venereal pregnant women, and (6) Venereal Diseases Clinic. The fate of Mowsley Sanatorium, on completion of the new Sanatorium, has not been decided, but its use as an open-air school has been mooted.

The new scheme, as outlined, will give more adequate accommodation, and more facilities for the treatment of Tuberculosis.

(e). Co-operation of the Medical Profession.

The difficulty has been to get patients for treatment in an early stage. This difficulty still exists to some extent, but there are signs that many more practitioners are availing themselves of the provision made for the treatment of Pulmonary Tuberculosis at an early stage in the disease. When beds for advanced cases have been established, it is possible that a closer touch will be established between the practitioner and the Tuberculosis Medical Officers, for it is the advanced case that troubles the former, and if the Tuberculosis Medical Officer can help in getting these cases away from their homes, the practitioners will be more likely to avail themselves of help in other directions as well.

(f). *Readiness of patients to avail themselves of the facilities provided for diagnosis and treatment.*

There has been a marked improvement in this readiness, especially among the women, and the parents of the children. At Mowsley Sanatorium the average stay of patients has been about five months, and there has been little difficulty in inducing these patients to remain.

Among the men, ex-soldiers included, the same readiness to undergo treatment has not been observed, and many have left the Institutions at their own request, not apparently having the determination and inclination to complete any adequate course of treatment.

(g). *Home Visitation—Search for Contacts—After Care Work.*

Home visiting is done routinely by the Health Visitors, and reports made of the home conditions, health of patient, and the others in the family, such reports being submitted to the Chief Administrative Tuberculosis Officer, and housing defects and nuisances reported are notified to the District Medical Officer of Health concerned for their attention. In all, 494 new patients were visited by the County Health Visitors, and 485 subsequent visits were made, making a total of 979 visits for the year.

These numbers greatly exceed the previous years, due to the fact that the numbers of Health Visitors have been increased, and others have been released from Army Service, to complete the full staff. Visiting at the home is also done by the Tuberculosis Medical Officers wherever required. The health of other members of the family of a Tuberculous patient is looked after as far as practicable. Many contacts are examined at the various dispensaries, and some in the homes of the patients. The School Medical Officers are notified at the examinations of all children who are contacts of Tuberculous patients with a view to a special look out for incipient signs and symptoms of the disease.

After Care Work is badly needed. The provision of such industrial colonies as Papworth Hall will be an immense help in the future. A gratifying readiness on the part of employers to give patients light out-of-door work has many times been noted.

A scheme is required for obtaining suitable employment for patients who have undergone a course of Sanatorium treatment; for giving help to those in necessitous circumstances or for tiding

them over a difficult financial period; for the provision of help in the home, and the care of children whose mothers have to go into a Sanatorium during that time. A live scheme for the general care and well being of Tuberculous cases is lacking at present.

General Information Respecting Prevalence of Tuberculosis in the County.

Pulmonary Tuberculosis alone is responsible for 6.9 % of the total deaths in the County, and ranks fourth this year in the diseases responsible for the highest number of deaths from any defined cause. This is a decrease of 1.1 % on the previous year.

This year the total number of deaths from Phthisis is 225, of which 103 occurred in the Urban Districts and 122 in the Rural, and of these 94 were males and 131 females. The number of deaths from Phthisis is 76 less than the previous year, and 24 less than the average of the last five years.

The actual Tuberculosis Death rate for Pulmonary Tuberculosis is .89, compared with 1.3 of 1918. The Urban Death rate is .97, while that of the Rural District is .84, hence the deaths from Phthisis have decreased this year, although in the previous two years there had been a heavy increase.

As regards Other Forms of Tuberculosis, it is to be noted that the Death rate (.21) is slightly increased on the previous year (.18), but is a marked decrease on the years 1915 to 1917, and is below the five-yearly average of .26. There were 25 male and 29 female deaths, of which 23 occurred in the Urban and 31 in the Rural Districts. The Death rate from All Forms of Tuberculosis is 1.11, which is less than the four preceding years. (See Tables T. B. 5, 6, and 7).

Notifications of Tuberculosis.

As there were 336 cases of Pulmonary Tuberculosis notified, and 225 deaths, the ratio of notifications to deaths was 1.5 to 1. Of the 389 primary notifications (all forms) 204 (or 52 %) occurred between the ages of 15 and 35, showing that Tuberculosis, as previously explained, occurs in the most strenuous working period of life; 77 notifications (or 19 %) in children under 15 years of age, 96 (or 25 %) in persons between 35 and 55 years of age, while only 12 (or 3 %) occurred in persons over the latter age. (See Table T. B. 8).

T.B. 1. STATEMENT OF WORK carried out in connection with the Institutional Treatment of Tuberculosis during the period from 1st Jan., 1919, to the 31st Dec., 1919, and sundry particulars in connection with the scheme of treatment.

I.—DISPENSARIES.

Situation of Dispensary stating whether main or branch Dispensary, or Visiting Station.	Number of persons, including contacts, who were examined for the first time during the period from 1st January, 1919, to the 31st December, 1919, at or in connection with the Dispensary or visiting Station and were :—		Number of persons diagnosed to be suffering from Tuberculosis who were treated or supervised at or in connec- tion with the Dispensary or visiting Station during the year.		No. of Out-Patient Attendances.		
	Diagnosed as suffering from Tuberculosis.	Total number Examined		Insured	Uninsured	Insured.	Uninsured.
		Insured	Uninsured				
COALVILLE, Residential and Visiting Mon. and Fri., 10 a.m.	32	23	42	58	45	359	248
HINCKLEY, Residential and Visiting Tues. and Thurs. 10 a.m.	64	73	11	99	17	436	48
MELTON MOWBRAY, Visiting only Tuesdays Fortnightly, 10 a.m.	30	32	19	43	29	291	174
LOUGHBOROUGH, Visiting only Thursdays, 10 a.m.	54	58	27	93	32	644	124
LEICESTER, Visiting only Friday, 2 p.m.	67	64	39	105	36	508	146
Totals ..	247	250	138	398	159	2248	740

T.B. 2. II.—SANATORIA, HOSPITALS, AND OTHER RESIDENTIAL INSTITUTIONS, FOR THE TREATMENT OF PULMONARY TUBERCULOSIS (including Observation Beds at Dispensaries.)

(1) Name and Situation of Institution.	(2) Number of Beds available for patients sent by the Council.	(3) Number of patients sent by the Council who were under treatment on the 31st Dec., 1918.		(4) Number of Patients sent by the Council during the year ended December 31st, 1919.		(7) Number of Patients sent by the Council who were discharged or died in the Institution during the year ended 31st December, 1919.		(9) Total number of days during which the Patients referred to in columns 5 and 6 were resident in the Institution.		(11) Average number of days which the Patients referred to in columns 5 and 6 were resident in the Institution.		(13) Number of Patients sent by the Council who were under treatment on the 31st Dec., 1919.	
		Insured	Uninsured	Insured	Uninsured	Insured	Uninsured	Insured.	Uninsured	Insured	Uninsured	Insured	Uninsured
Mowsley Sanatorium, North Kilworth, Rugby	50	25 ...	2 12	86 ..	11 42	87 ..	9 32	9903 ..	948 5916	114* ..	105† 184†	24 ..	4 22
Hinckley Residential Dispensary, Manor House, Bond St., Hinckley	22	11 ..	.. 2	72 ..	.. 18	78 ..	.. 14	4986 ..	.. 578	64 ..	.. 41	5 ..	.. 6
Coalville Residential Dispensary, Bakewell St., Coalville, Leicester	8	3 ..	1 3	30 ..	14 23	30 ..	13 24	1332 ..	318 910	44 ..	24 38	3 ...	2 2
Snarestone Hospital, Ashby-de-la-Zouch	15			32 ..		19 ..		1176 ..	..	62 ..	..	13 ..	..
Leicester City Sanatorium, Groby Road, Leicester	15			20 ..	.. 2	7 ..	.. 2	228 ..	..	32 ..	..	13 ..	...
Totals	110	39	20	240	110	221	94	17625	8724	..	..	58	36

*17 patients were in 6 weeks or less---Average stay of remainder was 137 days.

[illegible]

T.B. 3. Table showing condition of patients on discharge.

Institution.		Much Improved.	Improved.	Stationary	Worse.	Stay Insufficient	Total.
Mowsley Sanatorium	...	39	66	12	1	10	128
Snarestone Hospital	...	1	13	4	1	...	19

T.B. 4. Table shewing number of Applications for Treatment and nature of same granted.

		Institutional.	Out-patient Dispensary.	Use of Shelter.	Domicillary.	Not suitable for Treatment.	Total cases considered.
Boys		20	3	1	...	...	24
Girls		27	4	5	...	...	36
Men	{ Insured	109	29	13	10	3	164
	{ Un-insured	...	1	...	...	...	1
Women	{ Insured	59	12	5	17	2	95
	{ Un-insured	22	6	4	...	4	36
TOTAL		237	55	28	27	9	356

T.B. 5. TUBERCULOSIS (Pulmonary and Other.)

Year.	Number of Notifications.			Number of Deaths.			Death Rate.		
	Urban.	Rural.	Whole County.	Urban.	Rural.	Whole County.	Urban.	Rural.	Whole County.
1914	252	298	550	151	152	303	1.43	1.0	1.1
1915	183	253	436	116	176	292	1.13	1.2	1.18
1916	224	236	460	129	164	293	1.28	1.17	1.22
1917	227	193	420	161	197	358	1.65	1.47	1.55
1918	199	201	400	154	188	342	1.61	1.42	1.50
1919	233	156	389	126	153	279	1.18	1.05	1.11

T.B. 6. TUBERCULOSIS (Lungs.)

Year.	Number of Notifications.			Number of Deaths.			Case fatality per cent.			Attack Rate.			Death Rate.		
	Urban	Rural	Whole County.	Urban	Rural	Whole County.	Urban	Rural	Whole County.	Urban	Rural	Whole County.	Urban	Rural	Whole County.
1913	245	253	498	104	141	245	42.5	56.2	49.4	2.3	1.6	1.9	.99	.93	.96
1914	197	259	456	102	124	226	51.8	47.9	49.5	1.9	1.7	1.8	1.0	0.8	0.9
1915	136	191	327	87	133	220	64.0	69.6	67.3	1.3	1.3	1.3	0.8	0.9	0.9
1916	184	206	390	96	128	224	52.2	62.1	57.4	1.84	0.8	1.6	0.9	0.9	0.9
1917	201	171	372	123	154	277	61.2	90.0	74.5	2.07	1.27	1.6	1.3	1.1	1.2
1918	176	179	355	135	166	301	76.7	92.7	84.8	1.8	1.3	1.5	1.4	1.2	1.3
1919	203	133	336	103	122	225	50.7	91.7	67.0	1.9	0.9	1.3	0.97	0.84	0.89
Average last five years	180	176	356	109	140	249	55.5	79.5	69.9	1.79	1.26	1.48	1.08	1.00	1.03

T.B. 7. TUBERCULOSIS (Other.)

Year.	No. of Notifications.			No. of Deaths.			Case fatality per cent.			Attack Rate.			Death Rate.		
	Urban	Rural	Whole County.	Urban	Rural	Whole County.	Urban	Rural	Whole County.	Urban	Rural	Whole County.	Urban	Rural	Whole County.
1913	From Feb 1st, 1913, Under the Public Health			Other Health	Forms of Tuberculosis (Tuberculosis) Regulations, 1912.	Notifiable.									
1914	55	39	94	49	28	77	89	71.8	81.9	0.5	0.3	0.4	0.5	0.2	0.3
1915	47	62	109	29	43	72	61.7	69.4	66.1	0.4	0.4	0.4	0.3	0.3	0.3
1916	40	30	70	33	36	69	82.5	...	98.2	0.4	0.2	0.3	0.3	0.3	0.3
1917	26	22	48	38	43	81	...	...	...	0.27	0.16	0.20	0.4	0.3	0.35
1918	23	22	45	19	22	41	82.6	100.0	91.1	0.2	0.17	0.19	0.19	0.17	0.18
1919	30	23	53	23	31	54	76.7	...	...	0.28	0.16	0.21	0.21	0.21	0.21
Average last five years	33	32	65	28	35	63	84.8	...	96.9	0.33	0.23	0.27	0.28	0.25	0.26

T.B. 8. NOTIFICATION OF TUBERCULOSIS:—Table showing the Number of Notifications on Forms A, B, & C, which have not previously been notified during the period Jan. 1st to Dec. 31st, 1919.

AGE PERIODS (Years).	PULMONARY.				NON-PULMONARY.				ALL FORMS.			
	Males.		Females.		Males.		Females.		Males.		Females.	
	1918	1919	1918	1919	1918	1919	1918	1919	1918	1919	1918	1919
0 to 1	...	...	...	...	1	1	...	1	1	...	1	2
1 to 5	...	...	...	...	5	3	...	4	10	12	22	8
5 to 10	...	...	...	...	13	7	16	13	4	3	5	28
10 to 15	...	...	...	...	13	13	9	13	1	6	3	39
15 to 20	...	...	...	...	27	20	18	34	2	3	5	62
20 to 25	...	...	...	...	26	21	32	33	1	1	2	59
25 to 35	...	...	...	...	41	34	44	44	1	3	4	83
35 to 45	...	...	...	...	33	29	22	32	1	1	2	63
45 to 55	...	...	...	...	15	18	7	13	1	1	...	33
55 to 65	...	...	...	...	2	5	1	3	...	...	1	9
65 and upwards	...	...	...	...	5	1	3	2	...	...	1	3
Total	...	...	...	...	180	149	156	187	17	22	28	389

1918. Total Number of Notifications (including cases notified by other Doctors) .. 400.
1919. Ditto, ditto .. 433.

Venereal Diseases.—During the year 1919 the whole of the treatment of Venereal Disease in the County was carried out at the Leicester Royal Infirmary. Below is the Table showing the services rendered at the Infirmary during the year ending on December 31st, 1919, for both County and Borough cases:—

County or County Borough.	No. of Attend- ances at Out- Patient Clinic.		Aggregate No. of "In-Patient Days."		No. of Doses of Salvarsan Sub- stitutes used in Treatment Centre.		No. of Examinations of Pathological Material made at Treatment Centre.			
	M.	F.	M.	F.	M.	F.	*S	*G	*W	*O
County	2466	784	436	456	521	539	37 5	457 67	333 137	51 15
	3250		892		1060		1102			
County Borough	6850	2603	709	699	798	765	87 20	1558 418	773 600	121 21
	9453		1408		1563		3598			
Total	12,703		2,300		2,623		4,700			

*S—For detection of Spirochetes. *G—For detection of Gonococci. *W—For Wasserman reaction. *O—Other tests.

In reference to the County cases only, these are summarised as follows:—

Total number of persons dealt with during the year at Out-Patients' Clinic:—

New Cases.		Males.		Females.	
Syphilis	...	116	...	74	...
Gonorrhœa	...	141	...	8	...
Not V.D.	...	4	...	1	...
Totals		261	...	83	...

Total Attendances.

Syphilis	...	1040	...	694	...
Gonorrhœa	...	1422	...	88	...
Not V.D.	...	4	...	2	...
Totals		2466	...	784	...

Aggregate "In-Patient Days."

Syphilis	...	...	213	...	245
Gonorrhœa	...	...	200	...	211
Syphilis and Gonorrhœa...			13	...	0
Not V.D.	...	...	10	...	0

The number of Male Clinics per week is four, whilst the Female Clinics number three.

The Male Clinics are in charge of Dr. Blakesley, with Dr. Atkinson as assistant, whilst Miss Bessie Symington attends to the Female Clinics. Each clinic is nominally of two hours duration, but really lasts considerably longer. Dr. Blakesley has also a skilled lay assistant who attends daily for the purpose of performing irrigation treatment.

In addition to the Female Clinics held at the Royal Infirmary, Miss Bessie Symington attends at the St. Mary's Home. Here in-patients are received for treatment, and also a certain number of unmarried girls have been transferred to the St. Mary's Clinic from the Royal Infirmary, as it was considered better influences could be brought to bear upon them at the Home than at the Infirmary.

The following are the reports of Major Blakesley and Dr. Bessie Symington on the work of the Clinics during the year 1919:—

REPORT BY MAJOR BLAKESLEY, IN CHARGE OF THE
MALE V.D. CLINIC.

To the City and County Councils of Leicester and Leicestershire.

16, Severn Street,
Leicester.

Gentlemen,—

I beg to report on the work of the Male Venereal Department of the Leicester Royal Infirmary for the year 1919, under the control of your Councils and the Ministry of Health.

I have received every encouragement and support from the Board of Governors of the Institution, and I have to thank Dr. Mackarell, the Pathologist, for his valuable assistance.

NEW PATIENTS.

During the period January 1st to December 31st, 1919, 852 new patients presented themselves for treatment in the Out-Patient Clinic, 594 being City patients and 258 County patients. Of these 334 were proved to be suffering from Syphilis and 509 from Gonorrhœa, whilst nine were not suffering from Venereal Disease. These figures show an increase of 510 new patients over the previous year.

RENEWED ATTENDANCES.

9,315 renewed attendances were made by patients; 6,847 were City patients, 2,463 County patients, and 15 from other districts.

SPECIAL TREATMENT.

1,170 intravenous injections of Salvarsan substitutes and 1,002 intramuscular injections of Mercury were administered to the Syphilitic cases.

5,405 intra-urethral irrigations for Gonorrhœa were given. Prostatic massage, instillation, and instrumentation for diagnosis and treatment has been carried out in a large number of cases.

This being highly technical work, it is done by the Medical Officers.

IN-PATIENTS.

145 male patients were admitted to the wards, 73 required operations; 57 being very young, old or feeble, were admitted for intravenous injection of Salvarsan substitute, and 15 for intra-spinous injection of Salvarsanised blood serum, these being patients who were suffering from Cerebro-Spinal Syphilis.

ADDITIONAL ACCOMMODATION.

Four Clinics are held weekly, each extending to about three hours. The numbers attending continue to increase. Further accommodation in buildings is necessary, and a self-contained department would conduce to more effective technical treatment, with greater privacy and convenience to the patients.

Additional time and attention by the Medical Officers will be required shortly to cope with the work.

MEDICAL ASSISTANCE.

Previous to December, 1919, the House Surgeon of the Royal

Infirmery was permitted to give me assistance on two or three evenings a week, but this, proving to interfere with the general work of the Institution, Dr. Atkinson was appointed as specially qualified Medical Assistant. He has worked zealously and effectively since his appointment.

The benefit of daily treatment is two-fold; firstly to the patient by relieving him of his acute symptoms, and in many cases of all symptoms of his disease; and, secondly, to the community by rendering him in a few weeks much less dangerous as a medium of infection.

I would emphasise the importance of patients being urged to seek treatment at the earliest opportunity after contracting or suspecting that they have contracted these diseases, as the beneficial effects of early treatment are out of all proportion advantageous to the patient himself, as well as to the community, by preventing the spread of the disease.

My thanks are due to all who have worked in connection with the Department for their willing assistance and loyal support.

I am, Gentlemen,

Yours faithfully,

HENRY J. BLAKESLEY, F.R.C.S. (Eng.),

Major R.A.M.C. (T.).

Medical Officer i/c of the Male
Venereal Diseases Department,
Leicester Royal Infirmary.

30th January, 1920.

REPORT OF FEMALE VENEREAL CLINIC FOR 1919.

During 1919 the Female Venereal Clinics at the Royal Infirmary have been regularly and well attended.

311 new patients have presented themselves for treatment, 228 from the City and 83 from the County.

One Clinic out of the three now held at the Infirmary is set apart for the diagnosis and treatment of mothers and babies, and children under 14 years of age.

This arrangement is appreciated by the mothers, who themselves ask to bring their children for examination. In some cases two, three, or even four persons in one family, or dwelling in the same house, have been found to be infected, and treatment has been begun as soon as possible. About 1,351 attendances of children under 14 years have been made.

Pregnant women cannot be prevailed upon to attend regularly, the chief deterrent cause is the publicity of the waiting room. Only a few patients sent from the Ante-natal Clinics held in the City have had thorough treatment, the majority will not attend.

This important class of patient will only be touched by holding a small Clinic privately where this publicity is avoided.

During the year a new Clinic has been started in the City at St. Mary's Home, the Newarke. This is specially held for the treatment of unmarried girls under 23 years of age. This slightly lessens the number of new patients attending the Infirmary. The arrangement has been made to prevent the young girls from associating with the older married women in the waiting room, who are only too anxious to impart undesirable knowledge.

Up to the present time between 40 and 50 cases have been dealt with in this Clinic.

The Infirmary Ward containing three beds has been occupied continuously; acute cases, and those suffering from complications have been admitted. One bed is kept, if possible, for the immediate use of a very early case.

This year about 60 per cent. of the new cases have been sent by private doctors for treatment or diagnosis.

The number of patients cured is difficult to report. Twelve who began treatment in 1917 and 1918 have reported themselves long enough to fulfil the required tests. 216 are apparently well, but a definite opinion cannot yet be given.

BESSIE W. SYMINGTON, M.D., B.S. (Lond.),

Medical Officer of Female Venereal Clinics.

A separate Report follows on the Venereal Diseases Clinic held at St. Mary's Home:—

The Clinic commenced on July 31st, 1919. Number of sessions held, 22. Number of patients treated, 40.

Syphilis, 9; Gonorrhœa, 18; S. and G., 4; not V.D., 5.

Number of patients discharged, 11.

To other Homes (where treatment will be continued), 6.

As cured: S., 1; G., 3; S. and G., 1; total, 5.

Number of patients discontinuing attendance, 1.

Number of injections given, 48.

Number of operations performed, 1.

Number of anæsthetics given, 1.

Many of the patients treated at St. Mary's Home are very young. Thus one was 16 years, one was 15, two were 14, one was 13, and two were only 12.

No patients over 23 years and no married women are transferred as out-patients from the Royal Infirmary to St. Mary's Home.

BESSIE W. SYMINGTON, M.D., B.S. (Lond.),

Medical Officer of Female Venereal Clinics.

EDUCATIONAL PROPAGANDA.

As regards propaganda work in the County, this campaign has been admirably carried out with indefatigable zeal by the Secretary (Mrs. Brittan) and Committee of the Leicestershire Branch of the National Council for Combating Venereal Disease. The Committee is as follows:—

Sir Thomas Cope, Bart.,	Mrs. John German,
J. W. Black, Esq.,	Mrs. Lilley,
W. H. Hayr, Esq.,	Dr. Bond,
A. Pickard, Esq.,	Dr. Kelly,
E. W. I. Oakley, Esq.,	Dr. Harris,
Thomas Harper, Esq.,	Dr. O'Connor,
Major W. A. Brockington (Sec.),	Dr. Robinson,
Mrs. Brittan (Sec.),	Mrs. Billson,
Mrs. Wykes,	Miss Cauty.
Mrs. Pratt,	

Mrs. Brittan has given me the following particulars of the towns and villages in the County at which lectures were given:—

COALVILLE.

In April, addresses were given to the women of the Co-operative Guild, and also to the mothers at the Maternity and Child Welfare Centre. These addresses were given by Mrs. Brittan.

In May, a lantern slide lecture was given by Dr. Ballard to an audience of over 100.

A full programme of work has been arranged for the ensuing year.

HINCKLEY.

A lecture was given in the Church Hut, in December, to girls, on Sex Hygiene, by Miss Beatrice Flint. The number present was about 40. Arrangements have been made for Medical Lectures to be given in Hinckley during the coming year, and also the exhibition of the film, "The End of the Road."

LOUGHBOROUGH.

Three lectures were given in Loughborough during the months of February and April, the first to women, second to men, and the third, given by Mrs. Billson, to mothers only. A further lecture was given to men only, by Dr. J. A. Fairer, when over 300 were present.

MELTON MOWBRAY.

A course of six lectures to social workers were given during the months of January and February. The lecturers being Mrs. Brittan (2), Miss Wakefield, Mrs. Billson, Dr. Venn Dunn, and Dr. Mary Douie.

MARKET HARBOROUGH.

Addresses were given by Mr. Douglas, Dr. Maud Kerslake, and Mr. W. A. Brockington during the month of January. In February, lectures were given by Miss Wakefield (2), Mrs. Billson, and Miss Norah Marsh. In March, a lecture to mothers was given by Dr. Millard, City Medical Officer of Health for Leicester.

During the months of April and May four lectures were given to girls on Sex Hygiene by Miss Beatrice Flint, the average attendance being from 80 to 100. Two lectures were given by Dr. J. A. Fairer to men and youths, the number attending being 150 and 250 respectively.

ASHBY-DE-LA-ZOUCH.

Four lectures were given during February, the first to the Women's Agricultural Committee, the second to mothers of the Infant Welfare Centre, and the other two at the Munition and Glove Factory respectively.

The lecturers were Miss Wakefield, Mrs. Billson, and Miss Hardy.

A full programme of work has been arranged for 1920, and special arrangements have been made by Mrs. Brittan and Mr. W. A. Brockington, the Honorary Secretaries, for addresses and lectures to be given at Oadby, Fleckney, Rothley, Bagworth, and Lutterworth, and it is hoped to display the film "The End of the Road" in the larger towns of the County.

(a). DETAILS OF THE COUNCIL'S SCHEME.

The following is a Report of the details of the Council scheme. The preliminary scheme for the treatment of Venereal Diseases in the County was submitted to the Council in January, 1919, and was as follows:—

- (1) That a Venereal Diseases Officer for work in the County should be appointed.
- (2) That a Venereal Disease male attendant and a Venereal Disease nurse should be appointed.
- (3) That out-patient treatment centres be established at Loughborough, Coalville, and at Hinckley, and, if possible, in-patient beds should be secured at Loughborough and Hinckley Hospitals for such cases as may be necessary.
- (4) That there should be a weekly clinic at each centre, when the Medical Officer, Nurse, and Attendant would attend. On the other three days in the week the Nurse and Attendant would be in attendance at the centre to see that patients were continuing their treatment. In this way the majority of the patients would attend the centre twice a week.
- (5) The medical practitioners should be encouraged to attend the centres.

- (6) That the general bacteriological work should be carried out by the Medical Officer, except the Wasserman test, as these tests require special arrangements and a special licence from the Home Office. It would be much better, therefore, not to do them in the County.

From this beginning the scheme could be developed in various parts of the County.

To begin with, the Medical Officer's time would not be entirely taken up, and the rest of the available time could be devoted to other work, such as School work, and general County work.

- (7) It will be necessary to co-operate with the Maternity and Child Welfare Committee and the Medical Inspection Committee with regard to any children affected or thought to be affected.
- (8) The provision of the buildings to be used as treatment centres for Venereal Diseases, Tuberculosis, Infant Welfare Work, School Clinics, etc., should be considered for the whole County. Temporary arrangements would, of course, have to be made, but as the work will grow very rapidly, no time should be lost in giving this matter full consideration.
- (9) That the Venereal Diseases Officer and other staff should be on the staff of the County Medical Officer, who should be the Administrative Officer.

(b) EXTENT TO WHICH THE SCHEME HAS ALREADY BEEN DEVELOPED.

Dr. J. A. Fairer, Temporary Surgeon, R.N., was appointed Venereal Diseases Officer as soon as he could be released from the Navy. As this officer's time would not be entirely taken up, he should devote the rest of his available time to general County work, School Medical Inspections, etc. Dr. Fairer commenced duties in April, 1919, and in June the Chairman of the Sanitary Committee, the County Medical Officer, and Dr. Fairer had a special interview with the Local Government Board, at which the following arrangements were made.

The Local Government Board agreed to the formation of a County Laboratory, and were prepared to allow the purchase of a Microscope and necessary adjuncts, the cost of which would be included in the Venereal Diseases scheme. Pathological specimens

examined at the County Council Laboratory would be charged for on the scale allowed by the Local Government Board, and the charges would be included in the Venereal Diseases expenses, and the Local Government Board would repay 75 per cent. General approval was given to the scheme of Clinics as submitted to the Committee, viz., to provide centres at Loughborough, Hinckley, Coalville, and also Melton Mowbray and Market Harborough.

Arrangements were made in July with the Loughborough Hospital Committee for the use of the Out-Patient Department for one afternoon and evening per week. However, no facilities for formation of a Clinic could be obtained at any other centre.

At Hinckley there was not sufficient available space to build any extension to form an Out-Patient Department.

At Coalville the proposal to build a Cottage Hospital (to which the County Council hoped to attach an annexe for the treatment of Venereal Diseases) was after months of discussion finally abandoned in November.

The fact that there is no Cottage Hospital at either Melton Mowbray or Market Harborough has further delayed the Venereal Diseases scheme of the County.

The patients from these areas, however, have been receiving treatment at the Leicester Royal Infirmary.

In reference to Medical attendance at Clinics, it was suggested that there should be attendance at the Clinics twice a week; but, as Dr. Fairer will not be able to attend them all, the Board recommend that the local practitioners should be encouraged to attend and be trained in the work. When this is done, and the Local practitioners become efficient, they will be appointed as assistants, and it will be only necessary for Dr. Fairer to attend a Centre once a week. The local practitioner thus appointed would attend with Dr. Fairer, and also on the other occasion, and be paid at the rate of £1 1s. a session. Where there is more than one practitioner qualified to do the work they will be engaged by rota.

The alteration of the rooms at the County Council Offices to provide a Laboratory was commenced in October, and finally completed in December, 1919.

In October, Mr. J. N. Graham was appointed Assistant at the Venereal Diseases Clinics, and also Laboratory Assistant.

Instruments, appliances, bacteriological stores, etc., for use at Loughborough Clinic, and in the County Laboratory, were ordered from surplus Government stores, in August. These were not finally received until December, a delay of three months, which naturally postponed the work of both Clinics and Laboratory.

In December, the Laboratory was practically completely finished and fairly fully equipped, so that in January, 1920, the General Practitioners of the County were notified as follows:—

17, Friar Lane,
Leicester,
12:1:20.

Dear Sir,—

County Bacteriological Laboratory.

I wish to inform you that the Leicestershire County Council have opened a Bacteriological Laboratory, and having appointed Dr. J. A. Fairer as Bacteriologist, are prepared to undertake, free of charge, bacteriological investigations relative to the following:—

- (1) Sputa for presence of Tubercle Bacilli.
- (2) Throat or nasal swabs for Diphtheria.
- (3) Widal's test for Typhoid and Para-Typhoid "A" and "B" fevers.
- (4) Blood films for presence of Malarial parasites.
- (5) Urethral discharge for Gonococci.
- (6) Examinations for Spirochaeta Pallida from doubtful Syphilitic lesions.
- (7) Examination of Spinal fluid for Cerebro-Spinal Fever.

WASSERMANN TESTS.

Blood specimens for Wassermann Tests for Syphilis are to be forwarded to this office. Although this test will be carried out at the Leicester Royal Infirmary, the reports will be forwarded from here.

Outfits for collecting specimens will be sent on application to this office.

CEREBRO-SPINAL FEVER.

In the past the County Council engaged Dr. Mackarell, M.D., of the Leicester Royal Infirmary, to attend in consultation with general practitioners in suspected cases of Cerebro-Spinal Fever. This arrangement ceases from the end of 1919, and in his place the County Council have appointed Dr. Fairer, Assistant County Medical Officer of Health, for this purpose.

Yours truly,

T. ROBINSON,

County Medical Officer.

(c) ADEQUACY OR OTHERWISE OF PROVISION MADE.

Full provision has been made by the scheme for the treatment of Venereal Disease, but the difficulties in attacking this disease in the smaller towns are fully recognised. The treatment of these patients without arousing the suspicions of the general public as to the nature of the disease is much more difficult in a small town than in a large city. It is hoped that as there is no accommodation in the Cottage Hospitals the County Council will build premises for the treatment of Tuberculosis, and minor ailments of school children; such premises also to be used for Maternity Wards, Day Nurseries, and the Child Welfare Centre of the district. Venereal Diseases could then be treated in a special portion of this building, and persons entering such an institution would not be suspected of being sufferers from these diseases, as they would be if a special Venereal Diseases Hospital were built.

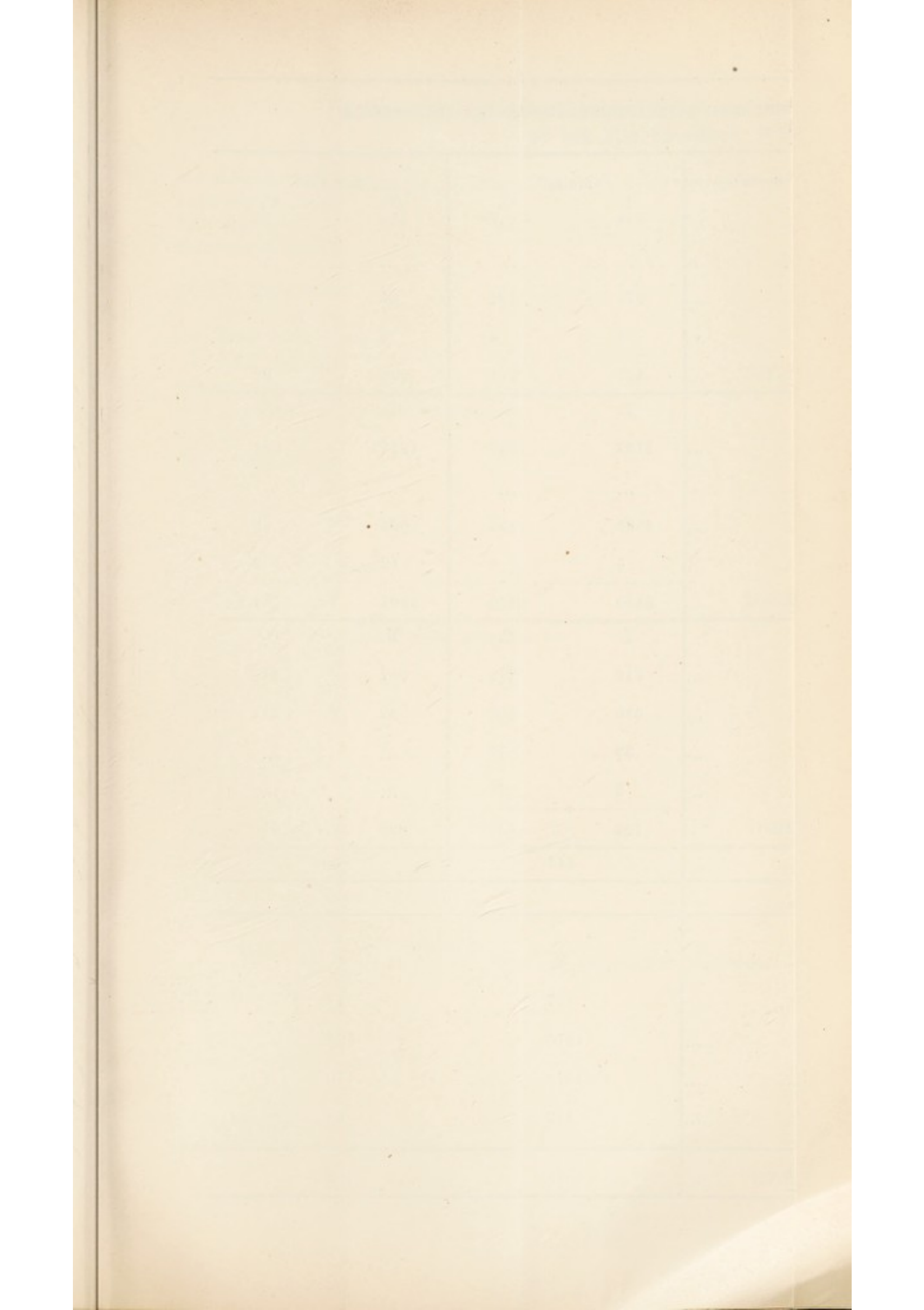
Until such premises are provided, Venereal Diseases are being treated by the General Practitioners or are attending Leicester Infirmary. The County Council allow travelling expenses to and from their homes to Leicester, for any persons requiring treatment and whose financial circumstances are not sufficient to defray this expense.

(d) THE LINES ON WHICH THE SCHEME NEEDS TO BE EXTENDED OR MODIFIED AS THE RESULT OF EXPERIENCE.

When the scheme is in full working order there will be no necessity to make any further provision, as the scheme is quite sufficient for the needs of the County.

(e) EXTENT TO WHICH THE CO-OPERATION OF THE MEDICAL PROFESSION HAS BEEN OBTAINED.

It is too early to state what co-operation will be obtained from



Return relating to persons residing in the County or County Borough of Leicester who were treated during the year ending on the 31st December, 1919.

on the 31st December, 1919.

Number of persons dealt with at or in connection with the out-patient Clinic for the first time and found to be :—						Males.		Females.	
						T.	C.	T.	C.
Suffering from Syphilis	...	...	...	...	...	218	116	184	74
" Soft Chancre	...	...	...	...	...	...	...	...	...
" Gonorrhœa	...	...	...	...	...	374	141	35	8
Not suffering from Venereal Disease	...	...	...	...	...	5	4	9	1
TOTAL						597	261	228	83
Total attendances of all persons at the out-patient Clinic who were :—						T.	C.	T.	C.
Suffering from Syphilis	...	...	...	...	...	2152	1040	1925	694
" Soft Chancre	...	...	...	...	...	...	...	...	...
" Gonorrhœa	...	...	...	...	...	4693	1422	666	88
Not suffering from Venereal Disease	...	...	...	...	...	5	4	12	2
TOTAL						6850	2466	2603	784
Aggregate number of "In-patient days" of treatment given to persons :—						T.	C.	T.	C.
Suffering from Syphilis	...	...	...	...	...	319	213	367	245
" Gonorrhœa	...	...	...	...	...	356	200	332	211
" S. and G.	...	...	...	...	...	32	13	...	...
Negative	...	...	...	...	...	2	10	...	...
TOTAL						709	436	699	456
Number of persons treated with Salvarsan Substitutes						443		303	
Number of doses of Salvarsan Substitute given						2623			
Examination of Pathological material :—						Number.			
Specimens from persons attending at the Treatment Centre which were examined at this Centre :—						T.		C.	
For detection of Spirochetes	...	...	...	...	...	107		42	
" Gonococci	...	...	...	...	...	1976		524	
" Wassermann reaction	...	...	...	...	...	1373		470	
Others	...	...	...	...	...	142		66	
TOTAL						3598		1102	

the Medical Profession, but already several of the County Doctors have attended special courses on Venereal Disease work, and are fully cognisant of, and are already giving, Intravenous Injections of Salvarsan Substitutes.

(f) THE READINESS OR OTHERWISE OF PATIENTS TO AVAIL THEMSELVES OF THE FACILITIES PROVIDED FOR DIAGNOSIS AND TREATMENT.

From information given from the Leicester Infirmary, the County cases are attending the Venereal Diseases Clinic held there very regularly. The number of new cases and of attendances have increased. This indicates that the patients are recognising the benefits of their treatment, and advising similar sufferers to attend these Clinics rather than an increase of the case incidence of these diseases.

Medical men can be supplied with Salvarsan Substitutes to treat patients who do not attend a recognised Venereal Diseases Clinic, provided they can fulfil the conditions laid down by the Local Government Board in their circular of the 29th August, 1916.

Only one General Practitioner applied during the year, 1919 for free supplies of Salvarsan substitutes, and as he was fully qualified to administer the same these were forwarded, and the total number of cases treated was four.

(Several other Medical Practitioners who are qualified to receive supplies of Salvarsan substitutes, have applied for the same during 1920).

All Pathological examinations sent by General Practitioners have been examined at the Royal Infirmary. The number of examinations during the year was 1,102, being 470 Wassermann tests, 524 for the detection of gonococci, 42 for the detection of spirochetes, and 66 others.

In the coming year Gonorrhœal specimens will be examined at the County Laboratory, but the Wassermann tests will be undertaken at the Leicester Royal Infirmary as previously.

No action has been taken in the district during 1919 under the Venereal Diseases Act (1917).

The adjoining Table is the return relating to persons residing in the County and County Borough of Leicester who were treated during the year ending 31st December, 1919 :—

Maternity and Child Welfare.—This branch of the Health Department continues to increase, and it may now be considered as one of the most necessary and important parts of the work of the Health Department.

The appointment of a lady Medical Officer is contemplated, who will devote a portion of her time to Maternity and Child Welfare work. An appointment is also contemplated of a Superintendent Health Visitor.

The general arrangements for the attendance of expectant mothers are as follows:—

These are encouraged to attend the Welfare Centres, to learn what precautions they should observe, and for ante-natal examination.

For unmarried expectant mothers lodgings have been found, when necessary, until the confinement; and work has been found for them afterwards, with suitable provision for the baby.

The contemplated Hostel previously alluded to will be in full working order in the ensuing year for the treatment of unmarried mothers.

The whole object underlying the scheme is to diminish the risks of child-birth which may cause death or subsequent ill-health in either mother or child. It is obvious that pre-natal precautions would minimise many of the troubles which arise in women, following on, or due to, parturition.

The following is the circular approved by the Maternity and Child Welfare Committee, and has been well circulated throughout the County:—

**LEICESTERSHIRE COUNTY COUNCIL.
MATERNITY AND CHILD WELFARE.**

**ARRANGEMENTS FOR ATTENDING TO THE HEALTH OF EXPECTANT
MOTHERS, NURSING MOTHERS, AND CHILDREN UNDER FIVE
YEARS OF AGE.**

The Leicestershire County Council having made certain arrangements for attending to the health of Expectant Mothers, Nursing Mothers, and Children under Five Years of Age, the Maternity and Child Welfare Committee of the Council wish to call the attention of the Committees of the Maternity and Child Welfare Centres in the County to these arrangements.

In drawing up these arrangements, the Regulations of the Local Government Board in their Circular (M. & C. W. 4) of August 9th, 1918, have been followed; under each heading instructions are given for putting the same into operation.

The Maternity and Child Welfare Committee desire that all applications for any of the benefits under this scheme shall be made through the Local Centre, investigated by the Local Committee and reported with any recommendations to the Maternity and Child Welfare Committee. The scope of the Maternity and Child Welfare work has now been very considerably extended, and, in order to make the scheme a complete success, the Maternity and Child Welfare Committee ask for the hearty co-operation of the Local Committees.

SCHEME.

1.—INSPECTION OF MIDWIVES.

2.—NOTIFICATION OF BIRTHS ACT.

The County Health Visitors are the Inspectors of Certified Midwives throughout the whole County and are responsible for the home visiting of births, excepting those in Loughborough Borough and Market Harborough Urban District.

3.—THE PROVISION OF A MIDWIFE FOR NECESSITOUS WOMEN IN CONFINEMENT, AND FOR AREAS WHICH ARE INSUFFICIENTLY SUPPLIED WITH THIS SERVICE.

The County Nursing Association is carrying out this portion of the work for the County Council.

Midwives are being provided for districts in the County where not now available, such districts being necessitous in this respect; and it is expected that shortly the whole County will be so provided.

In addition, certified midwives are provided for necessitous women, such being women (1) who are either not able to obtain the services of a midwife locally, or (2) who are not able to pay the whole or any portion of the fees of such midwife. For this purpose the County Council have made provision for six resident certified midwives at the County Nursing Home.

INSTRUCTIONS.—*Applications for the formation of new districts or the services of such midwives for individual cases to be sent to Miss Cauty, Superintendent of the County Nursing Association, 91, St. Peter's Road, Leicester. Telephone No. 3859.*

Where the expectant mother is attending at a Centre, the question of deciding that the woman is necessitous and the amount of fees she could pay would be decided by the Local Committee; where there is no Centre by the Local Nursing Association, if willing, and in all other cases by the County Nursing Association. A Report on each necessitous case in which fees are remitted entirely or in part, to be sent to the County Medical Officer, for the information of the Committee.

4.—THE PROVISION, FOR NECESSITOUS WOMEN, OF A DOCTOR FOR ILLNESS CONNECTED WITH PREGNANCY, AND FOR AID DURING THE PERIOD OF CONFINEMENT FOR MOTHER AND CHILD.

Under the Midwives' Act, the County Council is responsible for paying the fees of the Doctor called in by a certified midwife, and for recovering the same as far as possible. The conditions of the mother or child under which a certified midwife must send for a doctor are clearly laid down in the Rules of the Central Midwives Board, a copy of which every certified midwife has.

Where a certified midwife is not engaged, and the services of a doctor are required, the fees would be paid by the County Council and recovered as far as possible.

The doctors' fees will be the same in every case in any circumstance, viz.: those fixed by Order of the Local Government Board under the Midwives' Act.

INSTRUCTIONS.—*Where an expectant mother has engaged a certified midwife the Local Committee cannot interfere; but in cases where a certified midwife has not been engaged, the Local Committee should investigate the case and report thereon to the Maternity and Child Welfare Committee. In emergency, the Local Committee should at once make the necessary provision.*

5.—EXPENSES OF A MATERNITY AND CHILD WELFARE CENTRE.

"A Centre is an Institution providing any or all of the following activities:—Medical supervision and advice for expectant and nursing mothers, and children under five years of age, and medical treatment at the Centre for cases needing it."

At the present time a general medical supervision of the Centres by the County Medical Officer or his Assistant only is provided; mothers or babies requiring medical treatment are referred to their own doctor.

All the expenses of the Centre are paid by the County Council, and the County Health Visitor is the responsible nurse. District nurses and certified midwives may, as voluntary helpers (1) attend and assist at the Centre, or (2) assist in the home visiting, by arrangement with the County Medical Officer and the Health Visitor.

These expenses are not to include anything whatever for the cost of teas, etc., or food medicines, for both of which the parents should be charged a price sufficient to cover the cost.

INSTRUCTIONS.—Applications for the formation of a new Centre should be made to the County Medical Officer, 17, Friar Lane, Leicester. The Maternity and Child Welfare Committee will not be responsible for any expenses incurred to which they have not previously given their consent. The County Medical Officer is the Administrative Officer and will issue all instructions.

6.—ARRANGEMENTS FOR INSTRUCTION IN THE GENERAL HYGIENE OF MATERNITY AND CHILDHOOD.

A scheme for instruction in the general hygiene of maternity and childhood will be arranged to be carried out at the various Centres. This will partly be done by (a) medical men, (b) health visitors, and (c) voluntary helpers.

INSTRUCTIONS.—The Local Committee may invite speakers to address the mothers on subjects relating to Maternity and Child Welfare, but it is hoped that such addresses will not be lengthy. No expenses to be incurred without the previous permission of the Maternity and Child Welfare Committee.

7.—HOSPITAL TREATMENT PROVIDED FOR COMPLICATED CASES OF CONFINEMENT, FOR THE CONFINEMENT OF NECESSITOUS WOMEN, ETC.

Arrangements have been made with the Maternity Hospital, Causeway Lane, Leicester, by which 25 cases can be sent from the County to that Institution; these may be ordinary or more complicated cases. For any case requiring serious surgical operation, arrangements would have to be made with one of the general hospitals.

INSTRUCTIONS.—Application for admission of any of these cases should be made to Miss Cauty, Superintendent of the County Nursing Association, 91, St. Peter's Road, Leicester, or in emergency to the Matron of the Maternity Hospital. Miss Cauty will consult the County Medical Officer as occasion arises. A case upon which any extraordinary expenditure may be incurred will, if time permits, have to be first referred to the Maternity and Child Welfare Committee.

8.—HOSPITAL TREATMENT PROVIDED OR CONTRACTED FOR BY LOCAL AUTHORITIES FOR CHILDREN UNDER 5 YEARS OF AGE FOUND TO NEED IN-PATIENT TREATMENT.

The question of making provision under this Regulation is still under the consideration of the Maternity and Child Welfare Committee.

9.—COST OF FOOD PROVIDED FOR EXPECTANT MOTHERS AND NURSING MOTHERS AND FOR CHILDREN UNDER 5 YEARS OF AGE, WHERE SUCH PROVISION IS CERTIFIED BY THE MEDICAL OFFICER OF THE CENTRE, OR BY THE MEDICAL OFFICER OF HEALTH TO BE NECESSARY, AND WHERE THE CASE IS NECESSITOUS.

A limited sum of money has been provided to meet these requirements.

Any grants given in these cases will be in the form of an order on a certain shop or shops and not in money.

INSTRUCTIONS.—The Local Committee is asked to investigate all applications for such assistance, and to report thereon to the

Maternity and Child Welfare Committee on the special form to be provided. In cases of urgency the County Medical Officer is authorised to grant immediate assistance.

When a grant is made, the Local Committee to see that the same is properly administered.

10.—EXPENSES OF CRECHES AND DAY NURSERIES AND OF OTHER ARRANGEMENTS FOR ATTENDING TO THE HEALTH OF CHILDREN UNDER FIVE YEARS OF AGE WHOSE MOTHERS GO OUT TO WORK.

The Maternity and Child welfare Committee will provide the building to be used as a crèche, subject to (1) such building being first approved by the Committee; and (2) that the crèche be otherwise self supporting.

11.—THE PROVISION OF ACCOMMODATION IN CONVALESCENT HOMES FOR NURSING MOTHERS AND FOR CHILDREN UNDER FIVE YEARS OF AGE.

MOTHERS.—A limited sum of money has been provided for sending nursing mothers to Convalescent Homes, where such accommodation can be obtained.

CHILDREN.—Arrangements have also been made with the Charnwood Forest Convalescent Home for Children, Woodhouse Eaves, Loughborough, by which the County Council have secured 15 beds. Children of three and four years of age can be admitted under this scheme. Children between the ages of five and ten can also be admitted, arrangements having been made with the Medical Inspection Committee of the County Education Committee.

Children are received who have been in attendance at the Medical and Surgical Wards of Hospitals, are delicate, or who otherwise require Convalescent Home treatment.

Children who have suffered from, or coming from homes where infectious disease exists are not admitted; nor cases of Phthisis.

Children afflicted with any mental disease, incontinence of urine, or with ringworm, are inadmissible.

Children must come provided with stout boots and slippers, and such other clothing as required.

Children must be sent perfectly clean in clothing and person. Unless their heads are clean, it may be necessary to cut their hair short.

The friends are allowed to visit between the hours of two and four on Saturdays.

INSTRUCTIONS.—The Local Committee are asked to investigate all applications for admission to Convalescent Homes and to report thereon on the form to be specially provided.

The Local Committee may make arrangements with the Convalescent Home for the nursing mother, when such benefit is granted by the Maternity and Child Welfare Committee.

The County Medical Officer will notify the parents and the Centre when there is a vacancy for the child at the Charnwood Forest Convalescent Home.

12.—PROVISION OF HOMES AND OTHER ARRANGEMENTS FOR ATTENDING TO THE HEALTH OF CHILDREN OF WIDOWED, DESERTED, AND UNMARRIED MOTHERS, UNDER FIVE YEARS OF AGE.

The scheme includes provision for the acquisition of a Hostel at which the mother and the child can be kept together in certain cases. The scheme includes looking after the expectant mother and the nursing mother—the woman being admitted to the Maternity Hospital, Leicester, for her confinement. It is hoped to keep the mother and the child together for about a year and to find suitable work for the mother.

INSTRUCTIONS.—A Hostel has been opened in Leicester. Applications for admission, marked "Hostel," should be made to the County Medical Officer, 17, Friar Lane, Leicester.

T. ROBINSON,

County Medical Officer.

17, Friar Lane, Leicester.

This Circular has been approved by the Maternity and Child Welfare Committee, and ordered to be issued.

The following are the Centres that were in operation at the end of 1919, together with the number on the rolls and the average weekly attendance:—

Centre	Opened	No. on Roll	Average attendance per meeting.	
Hinckley,	Oct., 1916	136	...	80
Syston,	Oct., 1916	40	...	15
Thurmaston,	Apr., 1917	75	...	25
Wigston Magna,	May, 1917	95	...	38
Quorn,	Sept., 1917	70	...	30
South Wigston,	Oct., 1917	44	...	15
Ashby-de-la-Zouch,	Jan., 1918	84	...	21
Coalville,	Apr., 1918	235	...	31
Sileby,	July, 1918	91	...	21
Cosby,	Sept., 1918	35	...	20
Narborough,	Sept., 1918	31	...	22
Barrow-on-Soar,	May, 1919	83	...	31
Blaby,	June, 1919	62	...	60
Newbold Verdon,	June, 1919	46	...	17

Centre.	Opened.	No. on Roll.	Average attendance per meeting.
Asfordby,	July, 1919	24	... 8
Whitwick,	Aug., 1919	55	... 15
Melton Mowbray,	Sept., 1919	100	... 24
Moirs and Donisthorpe,	Nov., 1919	55	... 20

The total number of Centres in the County is 18.

It is hoped in the ensuing year of 1920 to open Centres in the following towns and villages:—

Centre	Probable month of opening	Centre	Probable month of opening.
Desford,	January.	Measham,	April.
Fleckney,	January.	Shackerstone,	April.
Mountsorrel,	January.	Earl Shilton,	June.
Rothley,	January.	Oadby,	June.
Whetstone,	April.	Anstey,	July.
Barwell,	April.		

CHARNWOOD FOREST CONVALESCENT HOME.

Arrangements having been made by the County Council to secure 15 out of the 22 beds at this Convalescent Home, the first child was admitted on July 1st, 1919. During the year 22 children have been admitted to this Home, the ages varying from 3½ to 11. The average stay per child was 58 days, and the majority of the cases were suffering from debility following some serious illness.

Health Visitors.—The following is a statement of the work done by the Health Visitors during the year:—

Visits to Births (total) ...	9,300
„ „ Midwives ...	230
„ „ T.B. Patients Homes ...	959
„ „ Pre-natal Cases ...	35
Lectures to Infant Welfare Centres ...	357
Miles Cycled ...	8,121
Number of Parishes Visited ...	2,255

Each of the Health Visitors attends one or more afternoons a week to one or other of the Infant Welfare Centres in the County.

Inspection of Midwives.—With regard to the supervision under the Midwives Acts, 1902 and 1918, this is undertaken by the County Health Visitors, whose numbers have been increased this year from 12 to 16.

The duties are as follows:—

- (1) Inspectors of midwives practising in the County, except in Loughborough Borough and Market Harborough Urban District.
- (2) School Nurses.
- (3) Tuberculosis Visitors.
- (4) Visitors under—
 - (a) The Infant Life Protection Act.
 - (b) The Notification of Births Act.
 - (c) The Ministry of Pensions (Visitors to Children).

The number of Midwives practising in the County total 148. Of these, four ceased to practise in the County before the end of the year. Of the remaining 144, 84 hold the C.M.B. Certificate, 10 the L.O.S. Certificate, and the remaining 50 are *bona-fide*.

During the year 212 visits have been paid to Midwives, and also 18 visits to special cases. On the whole the bags of the Midwives have been found in a satisfactory condition; in several instances the appearance of the bag and its contents gave a good impression of the high standard of work performed by the owner.

The following returns were received from Midwives in the County during the year:—

Medical Help Records...	...	...	224
Still Birth Records	...	...	37
Laying out Dead Records	...	...	41
Notices of Death of Mother or Child	...	...	8
Notices of Liability of Infection	...	...	11
Notice of Change of Address	...	...	5
Notice <i>re</i> Artificial Feeding	...	...	17

The registers of the Midwives are still kept at the County Health Offices. The figures show that 2,159 cases have been attended during the year. Of these 694 have been doctors' cases, where the midwife has been in attendance as well. This leaves 1,465 cases attended by midwives alone, out of the total number of births registered in the County.

The causes for sending for Medical Help were as follows:—

For the Mother.			
Ruptured Perinæum	...	...	39
Prolonged Labour	...	...	36
Abnormal Presentations	...	...	19
Abortion	...	...	18
Temperature	...	...	16
Premature Labour	...	...	12
Adherent Placenta	...	...	10
Hæmorrhage	...	...	10
Still Born	...	...	4
Weakness	...	...	2
Twins	...	...	2
Pains before Labour	...	...	2
Other Causes	...	...	18
Total			188

For the Child.			
Ophthalmia Neonatorum	...	...	7
Baby's Eyes	...	...	11
Feeble Child	...	...	10
Baby Ill	...	...	3
Convulsions	...	...	1
Cleft Palate	...	...	1
Other Defects	...	...	3
Total			36

For the Mother	...	188
For the Child	...	36
		224

Notification of Births Act, 1907.—The County Health Visitors are responsible for the home visiting of births, excepting those in Loughborough Borough and Market Harborough Urban District.

The same procedure under this Act obtains as in former years.

QUARTERLY RETURNS.

Number of Doctors, Certified Midwives, Doctors with Certified Midwives in attendance, and Uncertified Women who were in attendance at the time of the birth as recorded by notifications:—

	Doctors.	Midwives.	Doctors with Midwives.	Other Women.	Total.	
1st Quarter	378	305	148	—	831	} 3671
2nd „	363	297	142	—	802	
3rd „	398	378	132	—	908	
4th „	426	454	250	—	1130	

Number of Doctors, Certified Midwives, Doctors with Certified Midwives in attendance, and Uncertified Women whose names were given to me by the Registrar:—

	Doctors.	Midwives.	Doctors with Midwives.	Other Women.	Total.	
1st Quarter	19	6	10	—	35	} 128
2nd „	12	2	6	2	22	
3rd „	16	4	2	1	23	
4th „	25	19	4	—	48	

Full total of all Doctors, Certified Midwives, Doctors with Certified Midwives in attendance, and Uncertified Women's cases:—

	Doctors.	Midwives.	Doctors with Midwives.	Other Women.	Total.
1st Quarter	397	311	158	—	866
2nd „	375	299	148	2	824
3rd „	414	382	134	1	931
4th „	451	473	254	—	1178
Total	1637	1465	694	3	3799

As will be seen by the above Tables, 1,565 notifications of Births occurring in their practice have been received from Doctors, 1,434 from Midwives, 672 where a Doctor and Midwife have both been in attendance, and 128 were reported by the Registrars, making a total of 3,799.

Of the total of 4,308 births registered, 3,799 were notified, or 85.6 per cent.

Leicestershire Isolation Hospital Committee.

All the Urban and Rural Districts in the County, together with the Borough of Loughborough, have been joined together to form one District for the isolation of infectious diseases under the Isolation Hospital Acts. This Order was made by the County Council, and came into force on the 1st December, 1919.

The principal clause in the Order which sets forth the responsibilities of the new Hospital Committee is Clause 15, as follows:—

“The Hospital Committee shall have full power of providing a hospital or hospitals by purchase or otherwise, and of managing and maintaining the same when provided, together with (subject to the provisions of this Order) all such other powers as are conferred upon a Hospital Committee by the Isolation Hospitals Acts, 1893 and 1901. In particular, the Hospital Committee shall:—

- (a) Provide three new permanent Hospitals, viz., one in each of the Western, North Central, and South-Eastern portions of the Administrative County of Leicester.
- (b) Provide a Convalescent Home for Scarlet Fever patients discharged from the Isolation Hospitals.
- (c) Purchase the existing permanent hospitals at Blaby, Hinckley, and Melton Mowbray, together with the fittings, furniture, stores, and equipment thereof, at a price to be agreed upon by the Hospital Committee and the Joint Hospital Committees of Blaby, Wigston and Oadby, Hinckley, and Melton and Belvoir respectively, or in case of dispute, at a price to be settled by arbitration under Sections 179 and 180 of the Public Health Act, 1875.
- (d) Purchase in a like manner or rent upon the same terms as at present rented the existing Hospitals at Moira, Swannington, Coalville, Ibstock, Market Harborough, and Loughborough, together with their fittings, furniture, stores, and equipment, for temporary use until the permanent Hospitals to be built under this Order are erected and ready for use.
- (e) Provide at least two motor ambulances for the purpose of conveying patients to the Hospitals.

- (f) Give facilities to the Leicestershire County Council (who are the Authority for the treatment of Tuberculosis) to provide, in conjunction with the Isolation Hospitals buildings for the treatment of advanced cases of Phthisis, and administer the same for the County Council upon terms to be hereafter arranged.

And it is declared that it is the intent of this Order that the Hospital Committee shall ultimately provide at least 154 beds in permanent Hospitals, exclusive of beds which may be placed on verandahs."

URBAN DISTRICTS.

Area 39,501 acres.

Population (Census 1911) 101,128. Estimated now—Birth rate 110,997, Death rate 106,553.

Birth rate 16·2. Death rate 12·6.

Infant Mortality 86·0. Zymotic rate 0·34.

Number of Deaths from Zymotic Diseases 36, viz.:—Diphtheria 22, Diarrhœa 9, Scarlet Fever 2, Whooping Cough 2, and Measles 1.

Notification of Infectious Diseases 1,043, viz.:—Scarlet Fever 209, Diphtheria 162, Measles 141, Pneumonia 125, Tuberculosis 120, Other forms of Tuberculosis 28, Chicken Pox 82, Erysipelas 37, German Measles 30, Influenza 29, Malaria 33, Ophthalmia Neonatorum 21, Typhoid Fever 11, Cerebro Spinal Fever 9, Puerperal Fever 4, and Poliomyelitis 2.

Number of Deaths from Phthisis 103. Rate 0·97.

„ „ „ other Tuberculous Diseases 23. Rate 0·21.

Total Tuberculous Deaths 126. Rate 1·18.

ASHBY-DE-LA-ZOUCH URBAN.

Medical Officer of Health, C. R. WILLIAMS, M.D.

Area 4,247 acres.

Population (Census 1911) 4,927. Estimated now—Birth rate 4,529,
Death rate 4,348.

Birth rate 19·6. Death rate 18·4.

Infant Mortality 67·4. Zymotic rate 0·00.

Number of Deaths from Zymotic Diseases:—Nil.

Notification of Infectious Diseases 73, viz.:—Measles 20, Chicken
Pox 25, Phthisis 2, Other Tuberculous Diseases 5, Typhoid
Fever 1, Erysipelas 5, Scarlet Fever 10, Ophthalmia Neo-
natorum 2, Malaria 2, and Poliomyelitis 1.

Number of Deaths from Phthisis 2. Rate 0·46.

„ „ „ Other Tuberculous Diseases 3. Rate 0·68.

Total Tuberculous Deaths 5. Rate 1·14.

Food Supply: The number of parcels of unwholesome food seized
during the year was 2.

Dairies and Cowsheds: There are 16 dairymen (milk-sellers) in the
district, and 10 of these are registered. Thirty-six inspec-
tions of their premises were made. The number of dairymen
(butter and cheese-makers) in the district is 13, and their
premises were inspected 22 times. Three contraventions of
the Regulations were found. Two required sanitary improve-
ments, and these were carried out.

Housing of the Working Classes: The new Regulations of the
Ministry of Health with regard to the Housing question
have been energetically considered by the Council, and in
the month of May, in conjunction with the Sanitary In-
spector, the Medical Officer of Health visited 167 houses in
various parts of the district and made a full report to the
Council. A resolution was passed for building 60 new houses
to meet the requirements of the district.

Adoptive Acts:—

Lodging Houses: The lodging houses number only 2, and these are
regularly inspected.

Slaughter Houses: There are 3 slaughter houses in the district, and these were inspected 46 times. No contraventions of the Bye-Laws were found.

Factory and Workshop Act: The registered workshops number 14, of which 6 are bakehouses. Three defects were found on inspection, and all were remedied. There are 10 out-workers on the register.

Water Supply: The water supply is still being considered.

Sewage Disposal: The disposal of sewage is in perfect order, the system of excrement disposal is also continued as in previous years by special arrangements with the farmers, and all refuse is burnt at the refuse tip on the Nottingham Road. The drainage system works satisfactorily, and the flushing of the drains is done regularly.

Isolation Hospital: —

Other Features: —

Recommendations made: —

ASHBY WOULD'S URBAN.

Medical Officer of Health, R. W. LOGAN, M.R.C.S., L.S.A.

Area 1,978 acres.

Population (Census 1911) 2,783. Estimated now—Birth rate 3,092,
Death rate 2,963.

Birth rate 19·7. Death rate 13·2.

Infant Mortality 65·5. Zymotic rate 0·67.

Number of Deaths from Zymotic Diseases 2, viz.:—Diphtheria 2.

Notification of Infectious Diseases 95, viz.:—Diphtheria 11,
Measles 54, Pulmonary Tuberculosis 4, Other forms of
Tuberculosis 1, Pneumonia 15, Scarlet Fever 6, and
Erysipelas 4.

Number of Deaths from Phthisis 3. Rate 1·01.

„ „ „ other Tuberculous Diseases 2. Rate ·67.

Total Tuberculous Deaths 5. Rate 1·68.

Housing of the Working Classes: Sixty new houses are being built
towards the 100 required.

Adoptive Acts:—

Scavenging: Unsatisfactory, and likely to remain so, owing to
difficulty in getting labour.

Water Supply: The supply from the Ashby and Swadlincote Water
Board has been extended, and now almost the whole of the
district is supplied from their main.

Sewage Disposal: A scheme has been prepared for the extension of
the sewage outfall works in Donisthorpe Lane.

Isolation Hospital: —

Other Features: —

Recommendations made: —

COALVILLE URBAN.

Medical Officer of Health, R. W. JAMIE, M.A., M.B., C.M.,
D.P.H.

Area 6,040 acres.

Population (Census 1911) 18,548. Estimated now—Birth rate
21,999, Death rate 21,118.

Birth rate 20·2. Death rate 11·9.

Infant Mortality 87. Zymotic rate 0·8.

Number of Deaths from Zymotic Diseases 17, viz.:—Diphtheria
13, Scarlet Fever 2, and Diarrhœa (under two years) 2.

Notification of Infectious Diseases 204, viz.:—Diphtheria 60,
Scarlet Fever 102, Ophthalmia Neonatorum 6, Pulmonary
Tuberculosis 13, Other Tuberculous Diseases 4, Erysipelas 3.
Pneumonia and Influenza 8, Measles 6, and Malaria 2.

Number of Deaths from Phthisis 13. Rate 0·62.

„ „ „ other Tuberculous Diseases 4. Rate 0·18.

Total Tuberculous Deaths 17. Rate 0·80.

Food Inspection: Inspections of food exposed for sale in the weekly
market have been made, and also of food exposed in the
shops. Pieces of bacon were found unfit for human food,
and were destroyed.

Dairies and Cowsheds: These have frequently been inspected, and
at several of the farms minor structural improvements have
been carried out. The Veterinary Surgeon appointed by the
Council has inspected and made reports on the examination
of milking cows.

Housing of the Working Classes: Since 1911, 309 houses have been
erected, now giving an average of five persons for each
inhabited house. There is thus a present shortage of practi-
cally 300 houses. Arrangements are nearly complete for the
erection of about 200 houses on three sites. There is also a
scheme before the Housing Commissioners for an additional
500 houses. Forty inspections were made and nine nuisances
were abated.

Adoptive Acts:—

Lodging Houses: Maintained in satisfactory state. The houses are
regularly inspected by periodical visits and also by surprise
visits. 7,221 lodgers were accommodated during the year.

Slaughter Houses: The slaughter houses have been regularly inspected, and with the exception of a few cases of neglect to cleanse and lime-wash, have been kept in a satisfactory manner. The total number in the area is now 18. During the year it was decided that one slaughter house (which had not been used for some years) should be, owing to unsuitability of the building, removed from the Register, and the owner was advised accordingly.

Factory and Workshop Act: The workshops, bakehouses, etc., have been kept under the usual supervision, and the requirements as to cleansing and lime-washing have been complied with. With regard to sanitary accommodation there is still room for further improvement. The position with regard to outworkers remains as before.

Water Supply: The public supply is pumped from a deep well in the sandstone measures. It continues fairly sufficient and of a high standard of organic purity. Samples of it have been regularly analysed.

Sewage Disposal: Except in the rural part the district is drained and sewered throughout. There are two sewage farms—Kelham Bridge on the south side of the district, and Snarrows on the north side. Both sewage farms have worked well, and the effluents have been examined and found satisfactory.

Scavenging: The more general use of dust-bins, and the conversion of ash-privies into water-closets are gradually making efficient scavenging more easy. A portion of the refuse is disposed of on agricultural land, and the rest is deposited in suitable "tips."

Isolation Hospital: An iron hospital, situated in the South Ward, and reserved for Typhoid cases, consisting of one ward with six beds, constitutes the sole provision at present. The Urban District Council, with other authorities, have combined in a scheme for the provision of isolation hospitals for the County of Leicester. As soon as economic and industrial conditions become normal, it is proposed that a hospital of suitable size and accessibility should be erected for this portion of Leicestershire.

Other Features: —

Recommendations made: —

HINCKLEY URBAN.

Medical Officer of Health, J. H. DONNELL, B.A., M.B.,
B.C. (Cantab).

Area 3,729 acres.

Population (Census 1911) 12,837. Estimated now—Birth rate 16,011, Death rate 15,370.

Birth rate 12·99. Death rate 11·12.

Infant Mortality rate 100·9. Zymotic rate ·19.

Number of Deaths from Zymotic Diseases 3, viz.:—Diphtheria 1, Whooping Cough 1, Epidemic Diarrhœa 1.

Notification of Infectious Diseases, 127, viz.:—Diphtheria, 5, Erysipelas 5, Scarlet Fever 2, Enteric Fever 2, Malaria 10, Cerebro Spinal Meningitis 3, Poliomyelitis 1, Ophthalmia Neonatorum 1, Pneumonia 10, Influenzal Pneumonia 29, Measles 6, German Measles 1, Tuberculosis 52.

Number of Deaths from Phthisis 13. Rate 0·84.

„ „ „ other Tuberculous Diseases 3. Rate 0·19.

Total Tuberculous Deaths 16. Rate 1·03.

Food Supply: One sample of milk was certified deficient in milk fat, the vendor was prosecuted and a conviction obtained. Eighty lbs. of mutton, 1 cow (en mass), and 515 lbs. of rabbits were condemned.

Dairies and Cowsheds: There are 34 premises registered, and these are periodically inspected and kept in clean condition. Any work required to be done is readily undertaken by the owners.

Housing of the Working Classes: The number of houses in the district is 3,100. The number for working classes 2,800. Six houses for the working classes are at the present moment in course of erection; there were none completed last year. It is estimated that 400 houses are urgently required, 100 of which it is anticipated will be built by private enterprise. The Council have a scheme for the erection of 300 new houses during the next three years. There are probably 100 cases of overcrowded houses, but as there is no alternative accommodation either in the district or in the neighbouring towns or villages, it has not been possible to take action, except to see that the proper separation of the sexes is provided for. 106 inhabited houses in the district are not considered fit, and cannot be made fit for habitation, and 150 houses are seriously defective, but can be made habitable. As new houses are erected and occupied, steps will be taken to close those which are not fit for habitation.

Adoptive Acts:—

Lodging Houses: Two were registered until December 21st, when one closed. The number of inspections made was 8, and contraventions found 2.

Slaughter Houses: The condition of the 7 slaughter houses remains good. Thirty-three inspections were made.

Factory and Workshop Act: The number of factories is now 38 and Bakehouses 13, total 51. Only 3 cases of nuisances were reported (all in factories), and all have been remedied.

Water Supply: Hinckley is provided with a good constant supply of wholesome water. The source of supply is a deep well at Snarestone, 14 miles away. At the present time an attempt is being made to increase the supply by driving additional adits at the bottom of the well. The chief disadvantages of the water is the excessive hardness, and this, of course, has a detrimental effect on the factory boilers of the town, and the hot-water installations. There is practically no possible source of contamination of the water as delivered to the individual houses and taps. No action has been necessary during the year on this account.

Sewage Disposal: The town is supplied with an adequate system of drainage on the combined system, and practically all the sewers have a sufficient gradient to ensure a self-cleansing velocity. The flat-grated sewers are flushed from time to time. The sewage is disposed of on the broad irrigation system, the sewage farm being situated just outside the boundary and in the Rural district of Hinckley.

Scavenging: The ash-bins and earth closets are emptied weekly, and the ash-pits as required, by the Council's workmen. During recent years it has not been possible to obtain galvanised ash-bins, consequently a great number of boxes and barrels have come into use. This is a great nuisance, and an endeavour is now being made to get every house provided with a proper galvanised dust-bin. The whole of the refuse is taken to a "tip" at the Council's sewage farm, where the "tins" are sorted out, and periodically crushed and sold, and the waste paper, etc., burned. At the present time new boilers are being installed at the Gas Works, in the furnaces of which it is proposed to burn the town refuse, after the tins, etc., have been sorted out.

Cottage Hospital: There were 186 admissions during the year, this total being made up by 109 males and 77 females, and of the total 101 were children under 16 years of age. There also attended at the Hospital 212 out-patients, who between them paid 2,171 visits.

Other Features: —

Recommendations made: —

LOUGHBOROUGH URBAN.

Medical Officer of Health, N. B. M. BLACKHAM, L.R.C.P.I.,
L.R.C.S.I., L.M.

Area 3,045 acres.

Population (Census 1911) 22,990. Estimated now—Birth rate
25,705, Death rate 24,675.

Birth rate 16·06. Death rate 12·65.

Infant Mortality 96. Zymotic rate 0·32.

Number of Deaths from Zymotic Diseases 8, viz.:—Measles 1,
Diphtheria 5, and Diarrhoea (under two years) 2.

Notification of Infectious Diseases 215, viz.:—Diphtheria 35,
Scarlet Fever 16, Erysipelas 6, Influenza and Pneumonia 35,
Ophthalmia Neonatorum 6, Measles and German Measles 28,
Cerebro Spinal Fever 1, Pulmonary Tuberculosis 20, Other
Tuberculous Diseases 4, Malaria 6, Puerperal Fever 1, and
Chicken Pox 57.

Number of Deaths from Phthisis 28. Rate 1·13.

„ „ „ other Tuberculous Diseases 4. Rate 0·16.

Total Tuberculous Deaths 32. Rate 1·29.

Food Supply: Over three tons of beef have been condemned as unfit
for human food, and has been used for salvage purposes. The
majority of this was foreign beef in a state of decomposition.
Three quarters of a ton of ham and bacon have been dealt
with in a similar manner.

Dairies and Cowsheds: There are 90 of these premises on the register
and the majority are in good condition. Notifications have
been served in two cases for want of cleanliness and accumu-
lation of manure.

Housing of the Working Classes: The number of houses inspected
was 860, and of these 69 were found to be defective. The
majority of these defects were remedied. One closing order
was made, and 30 houses have been closed by voluntary
action of the owners. Thirty houses have been demolished as
a result of closing orders made in previous years.

Lodging Houses: There are three registered. Thirty-two inspec-
tions were made and one contravention found.

Slaughter Houses: There are 18 slaughter houses on the register. At present, 12 registered and 6 licensed ones. These premises were inspected 526 times, and three contraventions were found.

Factory and Workshop Act: During the year 209 inspections of these premises were made, and in the great majority of cases their condition was found to be satisfactory. Nine notifications were sent to owners and occupiers for not carrying out the periodical cleansing, and notifications were sent out also for insufficient closet accommodation, drains being stopped up. These notifications have been complied with, with the exception of one, which is in hand.

Water Supply: Twelve houses have been connected up to the town supply. A number of houses are still supplied with water from the wells, and it is proposed to have samples from each taken during the current year.

Sewage Disposal: The sewage and drainage is excellent and sufficient. It is accomplished by (1) the water carriage system, (2) pail closets, (3) common midden privy. The last system, namely, the midden privy system, is being gradually abolished, no such arrangement being permitted for new houses.

Scavenging: This important branch of our work has not been carried out as well as one could have desired, owing to the difficulty of obtaining horses, plant, etc. The sewage is disposed of at a sewage farm by (1) Dortmund tanks by which a large amount of heavy sludge is extracted, (2) by irrigation over a cultivated farm with specially drained sub-soil, (3) by bacteria beds, and (4) by broad irrigation.

Isolation Hospital: —

Other Features: —

Recommendations: —

MARKET HARBOROUGH URBAN.

Medical Officer of Health, C. T. SCOTT, M.A., B.C. (Cantab).

Area 4,520 acres.

Population (Census 1911) 8,853. Estimated now—Birth rate 8,967, Death rate 8,608.

Birth rate 11·4. Death rate 12·0.

Infant Mortality 77·6. Zymotic rate 0·23.

Number of Deaths from Zymotic Diseases 2, viz.:—Diarrhœa (under two years), 2.

Notification of Infectious Diseases 75, viz.:—Measles 8, Scarlet Fever 47, Diphtheria 4, Malaria 4, Pneumonia 5, Erysipelas 6, Meningitis 1.

Number of Deaths from Phthisis 12. Rate 1·4.

„ „ „ other Tuberculous Diseases 3. Rate 0·34.

Total Tuberculous Deaths 15. Rate 1·74.

Food Supply: There is a large factory for the manufacture of dried soups, jellies, etc., this I have inspected frequently, and always found it to be in a most satisfactory condition. The Council have a Veterinary Officer who inspects all animals to be slaughtered for food, other than those graded in the public market. There is a public abattoir, which the Veterinary Inspector reports to be in good condition.

Dairies and Cowsheds: There are 17 dairies and cowsheds, which were inspected every month by the Veterinary Officer, who reported all satisfactory except for one or two cases of defective lime-washing. The milk has been tested from time to time and found to be of a good standard of purity and wholesomeness. No cases of tuberculous milk was reported.

Housing of the Working Classes: Total number of houses 2,063. Number of working class houses 1,688. Working class houses being erected 48. Considerable shortage of small houses, a scheme is in hand for construction of 300 new houses during the next three years.

Adoptive Acts: —

Slaughter Houses: See Food Supply.

Factory and Workshop Act: Number of workshops on register 102, nuisances abated 4. Number of bakehouses registered 17, nuisances abated 1. There are 37 outworkers in 18 houses.

Water Supply: This is from a natural underground reservoir at North Kilworth, eight miles distant. Water is received into a reservoir above the town. The supply yields 200,000 gallons per day, equivalent to about 20 gallons per head of the population. There are also 65 private wells, the water from which is analysed periodically.

Sewage Disposal: The system is in good order and self-cleansing. The total area of the farm is 110 acres, of which 65 are irrigated. The system is capable of dealing with a population of 12,000. Analysis of the effluent has been uniformly satisfactory. Excrement disposal is entirely by the water-carriage system of sewers.

Scavenging: This is effected by the Council's carts once or twice a week as necessary; refuse is conveyed to a nursery outside the town. There are only one or two ash-pits in the district, the remainder being movable ash-bins. There are no cess-pools.

Cottage Hospital: The Cottage Hospital contains 11 beds, and has admitted 161 in-patients during the year. There is no out-patient department. There is one District Nurse, who is a member of the hospital staff.

Other Features: —

Recommendations made: —

MELTON MOWBRAY URBAN.

Medical Officer of Health, J. E. O'CONNOR, M.B., Ch.B., B.A.,
D.P.H., Barrister-at-Law.

Area 2,686 acres.

Population (Census 1911) 9,202. Estimated now—Birth rate 8,958,
Death rate 8,599.

Birth rate 19·6. Death rate 13·2.

Infant Mortality 73. Zymotic rate 0·00.

Number of Deaths from Zymotic diseases, nil.

Notification of Infectious Diseases 135, viz.:—Measles 11, German
Measles 22, Scarlet Fever 5, Diphtheria 12, Enteric Fever 8,
Puerperal Fever 3, Cerebro Spinal Fever 3, Erysipelas 2,
Pulmonary Tuberculosis 16, Ophthalmia Neonatorum 5,
Pneumonia 28, Malaria 6, Other forms of Tuberculosis 14.

Number of Deaths from Phthisis 9. Rate 1·0.

„ „ „ other Tuberculosis Diseases 2. Rate 0·2.

Total Tuberculous Deaths 11. Rate 1·2.

Food Supply: This town is widely known for its manufacture of
pork pies, an industry whose supervision has claimed my
consistent attention and sanitary supervision for many
years. Twenty-five parcels of food were surrendered for
inspection.

Dairies and Cowsheds: There are 17 registered dairymen in the
district, of whose cowsheds and dairies 39 inspections have
been made; structural and sanitary improvements being com-
pleted in three instances.

Housing of the Working Classes: The Council have decided to
build 100 houses, 50 of which are about to be erected. There
are about 80 houses in the town which are more or less over-
crowded, and about 20 others whose closure and ultimate
abolition must be contemplated.

Adoptive Acts: —

Lodging Houses: Two common lodging houses have been regularly
inspected.

Factory and Workshop Act: There are 103 workshops and 70 bake-houses on the register. All are kept in good condition.

Water Supply: The public water supply, which is laid on throughout the town, only outlying property being supplied by wells, is derived from three sources at Scalford, some $3\frac{1}{2}$ miles distant. It is of 24 degrees of hardness, most of which is removed by boiling.

Sewage Disposal: With the exception of the detritus difficulty, which is now claiming your attention, and which gave rise to temporary river pollution, the provision for sewage treatment is ample and adequate, yielding a very good effluent.

Scavenging: The town is systematically scavenged by direct labour. No complaints have been received during the year regarding this, but I think it relevant to direct your attention to the necessity for employing for this purpose proper sanitary transport in lieu of carts.

Isolation Hospital: —

Other Features: —

OADBY URBAN.

Medical Officer of Health, J. E. O'CONNOR, M.B., Ch.B., B.A.,
D.P.H., Barrister-at-Law.

Area 2,164 acres.

Population (Census 1911) 2,609. Estimated now—Birth rate 3,024.
Death rate 2,903.

Birth rate 12·5. Death rate 11·0.

Infant Mortality 26. Zymotic rate 0·00.

Number of Deaths from Zymotic Diseases 13, viz.:—German
Measles 4, Diphtheria 4, Pulmonary Tuberculosis 5.

Number of Deaths from Phthisis 4. Rate 1·4.

„ „ „ other Tuberculous Diseases nil. Rate 0·00.

Total Tuberculous Deaths 4. Rate 1·4.

Food Supply: One parcel of unsound food was surrendered for
examination.

Dairies and Cowsheds: There are 15 dairymen in the district, and
all these are registered. The number of inspections of their
premises was 24, and 4 during milking time.

Housing of the Working Classes: Twenty-one acres of land have
been purchased with a view to the ultimate erection of 100
houses, and the provision of a new recreation ground. Plans
have been submitted for four houses in respect of which a
Government subsidy is being claimed. One of them is now
completed.

Adoptive Acts: —

Slaughter Houses: The number registered is two, and these have
been inspected six times. They were all found to be in a
satisfactory condition.

Factory and Workshops Act: There are 17 workshops (including
three bakehouses), all are registered. Four nuisances have
been abated. There are 42 outworkers in 35 houses. No
infectious disease occurred amongst the latter.

Water Supply: Of 713 houses, 618 are supplied from the Leicester
Corporation mains, which are laid throughout the town. The
remaining houses, many of which lie outside the town, are
supplied chiefly from shallow wells.

Sewage Disposal: The sewers of the district are, on the whole, as
satisfactory as can reasonably be expected, and since 1898
have, in conjunction with provision for sewage disposal,
involved a capital outlay of £13,681. The present difficul-
ties, apart from treatment, are the admission in certain
sections of too much water, and generally inadequate sewer
ventilation. With regard to the latter, I have to recommend
the provision of additional ventilating columns.

Isolation Hospital: —

Other Features: —

Recommendations made: —

QUORN URBAN.

Medical Officer of Health, H. SKIPWORTH, L.R.C.P.I., L.M.,
M.R.C.S.

Area 2,123 acres.

Population (Census 1911) 2,363. Estimated now—Birth rate 2,529, Death rate 2,428.

Birth rate 12·2. Death rate 12·7.

Infant Mortality 31·2. Zymotic rate 0·00.

Number of Deaths from Zymotic Diseases nil.

Notification of Infectious Diseases 12, viz.:—Diphtheria 11, and Erysipelas 1.

Number of Deaths from Phthisis 3. Rate 1·2.

„ „ „ other Tuberculous Diseases 1. Rate 0·4.

Total Tuberculous Deaths 4. Rate 1·6.

Food Supply: 214 lbs. of beef were destroyed as unfit for human consumption.

Dairies and Cowsheds: The number of milk-sellers is 10, and all are registered. Thirty inspections of their premises were carried out, and no defects were found.

Housing of the Working Classes: There are 620 houses in this district, 463 of which are occupied by the working class. The bulk of the houses are in good condition. There is some overcrowding in consequence of young people marrying and living with their friends and relations. Twelve new houses are to be built by the Urban Council. The site has been chosen and has been approved. It is hoped that the houses will soon be erected.

Adoptive Acts: —

Lodging Houses: There are no lodging houses in the district.

Slaughter Houses: The slaughter houses are licensed, and are in a satisfactory condition. There is no public abattoir.

Factory and Workshop Act: The factories and bakehouses have been inspected, and are kept in a clean condition.

Water Supply: There is a good and constant supply of water by the Leicester Corporation from the Derwent Valley. Nearly all the houses take the public supply. There are very few wells in use.

Sewage Disposal: There is a good system of sewage disposal all over the district, one or two outlying farms and houses excepted. More land (about 14 acres) is being acquired for irrigation purposes.

Scavenging: The scavenging is well carried out.

Isolation Hospital: —

Other Features: —

Recommendations made: —

SHEPSHED URBAN.

Medical Officer of Health, T. BELL, M.D.

Area 5,280 acres.

Population (Census 1911) 5,542. Estimated now—Birth rate 5,470, Death rate 5,251.

Birth rate 16·8. Death rate 16·1.

Infant Mortality 119. Zymotic rate 0·76.

Number of Deaths from Zymotic Diseases 4, viz.:—Whooping Cough 1, Diphtheria 1, and Diarrhoea (under 2 years) 2.

Notification of Infectious Diseases 42, viz.:—Scarlet Fever 15, Diphtheria 3, Measles 1, Ophthalmia Neonatorum 1, Pneumonia (all forms) 22.

Number of Deaths from Phthisis 8. Rate 1·52.

„ „ „ other Tuberculous Diseases 0. Rate 0·00.

Total Tuberculous Deaths 8. Rate 1·52.

Food Supply: 933 lbs. of mutton were seized and destroyed.

Dairies and Cowsheds: All the premises were inspected, and in three cases notices were given for cleansing.

Housing of the Working Classes: Number of dwelling houses in the district 1,352. Only six dwelling houses have been erected since 1914. The scheme for the provision of new houses under Section 1 of the Housing, Town Planning, etc., Act, 1919, is that 60 houses be built—12 on Leicester Road site, and 48 on the Oakley Road site, the former to be erected before 31st October, 1920, and the remainder before 31st October, 1922. Eighty houses were inspected, and in 66 of these defects were found. Notices were issued, but nothing was done.

Adoptive Acts: —

Slaughter Houses: These have been frequently inspected, and in two cases alterations were made after notice.

Factory and Workshop Act: There are 18 factories, viz.: Hosiery 9, boot 3, lace 1, joiners 3, blacksmith's shop 1. The workshops number 61. These were inspected and 2 nuisances abated. The 6 bakehouses were inspected, and 1 nuisance abated after notice.

Sewage Disposal: The Manager reports:—"The portion of the sewage farm west of the carrier was thoroughly overhauled and cleaned during the latter part of the summer, and was of considerable value in helping the system of irrigation. With the cutting of the three-year-old osiers on the east side, opportunity should be taken to clean on similar lines, which will be a further help. The Council have called in Mr. T. I. McCarthy, of Coalville, to advise as to a permanent improvement in the whole system being effected."

Scavenging: This work has been carried out by contract fairly satisfactorily.

Isolation Hospital: —

Other Features: —

Recommendations made: —

THURMASTON URBAN.

Medical Officer of Health, J. E. O'CONNOR, M.B., Ch.B., B.A.,
D.P.H., Barrister-at-Law.

Area 1,748 acres.

Population (Census 1911) 1,824. Estimated now—Birth rate
2,109, Death rate 2,025.

Birth rate 12·8. Death rate 10·3.

Infant Mortality 74. Zymotic rate 0·00.

Number of Deaths from Zymotic Diseases nil.

Notification of Infectious Diseases 30, viz.:—Measles 8, Scarlet
Fever 5, Diphtheria 14, Erysipelas 2, Pulmonary Tuberculosis 1.

Number of Deaths from Phthisis 2. Rate 0·98.

„ „ „ other Tuberculous Diseases nil. Rate 0·00.

Total Tuberculous Deaths 2. Rate 0·98.

Food Supply: There were no seizures or surrenders of bad food.

Dairies and Cowsheds: There are 13 dairymen (milk-sellers)
registered in this district, and 39 inspections of their
premises were made.

Housing of the Working Classes: A great deal of work will have
to be completed on private property before the general
standard of the working class dwellings can be considered
satisfactory. There were no houses built in 1919, and none
are in course of erection.

Lodging Houses: None in the district.

Slaughter Houses: There are 4 registered in the district, and 24
inspections of these were made, and all were found satis-
factory.

Factory and Workshop Act: The number of workshops (including
bakehouses) registered is 11. There are 37 outworkers in the
same number of houses, and no case of infectious illness
amongst them.

Water Supply: The Leicester City water supply is laid throughout
the village.

Sewage Disposal: The system of sewage disposal, which is old, makes
no provision for the purification of sewage beyond occasional
catch-pits, which are frequently cleaned. The sewers are
fairly well ventilated by shafts.

Scavenging: Nearly all the houses are provided with pail closets,
and a weekly system of scavenging of night soil and refuse
obtained in this connection, and there can be no doubt that a
small refuse destructor would be a decided sanitary acqui-
sition.

Isolation Hospital: —

Other Features: —

WIGSTON MAGNA URBAN.

Medical Officer of Health, J. E. O'CONNOR, B.B., Ch.B., B.A.,
D.P.H., Barrister-at-Law.

Area 1,941 acres.

Population (Census 1911) 8,650. Estimated now—Birth rate 8,604,
Death rate 8,260.

Birth rate 13·4. Death rate 12·3.

Infant Mortality 86. Zymotic rate 0·00.

Number of Deaths from Zymotic Diseases nil.

Notification of Infectious Diseases 21, viz.:—German Measles 3,
Scarlet Fever 1, Diphtheria 3, Erysipelas 3, Pulmonary
Tuberculosis 7, Pneumonia 2, Malaria 2.

Number of Deaths from Phthisis 6. Rate 0·73.

“ “ “ other Tuberculous Diseases 1. Rate 0·12.
Total Tuberculous Deaths 7. Rate 0·85.

Food Supply: Only one parcel of food was surrendered for examination, and this was found to be in good condition.

Dairies and Cowsheds: These have all been regularly inspected.

Housing of the Working Classes: 825 inspections were made during the year, and 283 nuisances abated, and structural and sanitary improvements were effected on 40 premises. The additional 33 houses were cleansed and lime-washed. Total number of dwelling houses in the district 2,020. The present building programme of the County provides for 122 working class dwellings, 14 of which are in course of erection. One other house is being built by private enterprise. Thirteen houses are overcrowded to the extent of having more than two occupiers per room.

Adoptive Acts: —

Lodging Houses: There are no lodging houses in the district.

Slaughter Houses: Slaughter houses have been regularly inspected.

Factory and Workshop Act.: The number of factories and workshops (including bakehouses) on the register is 22, and the number of bakehouses is 4. All were found to be in a satisfactory condition.

Water Supply: The water supply remains good. One cistern was cleansed and one cistern waste pipe was disconnected from the drain.

Sewage Disposal: The sewers and street gullies were flushed and disinfected during the hot dry weather.

Scavenging: The district is efficiently drained to a large sewage farm, where tanking, filtration, and broad irrigation result in a fairly pure effluent. For the small area of Wigston Fields the sewage is separately dealt with. The necessity for the complete abolition of privies is a sanitary measure which is now claiming systematic attention.

Isolation Hospital: The Isolation Hospital at Blaby has been taken over by the County Central Isolation Hospital Committee.

Other Features: —

Recommendations made: —

RURAL DISTRICTS.

Area 475,541 acres.

Population (Census 1911) 148,203. Estimated now—Birth rate 150,839, Death rate 144,800.

Birth rate 16·6. Death rate 13·0.

Infantile Mortality 79·0. Zymotic rate 0·38.

Number of Deaths from Zymotic Diseases, 53, viz.:—Diphtheria 22, Whooping Cough 13, Diarrhœa 10, Enteric Fever 5, Measles 1, Scarlet Fever 1, and Erysipelas 1.

Notification of Infectious Diseases 1,025, viz.:—Measles 248, Diphtheria 207, Scarlet Fever 198, Pneumonia 64, Erysipelas 50, Enteric Fever 32, Tuberculosis 112, Other forms of Tuberculosis 22, Ophthalmia Neonatorum 9, Malaria, 26, Puerperal Fever 7, German Measles 26, Chicken Pox 13, Impetigo 2, Cerebro Spinal Fever 6, and Dysentery 3.

Number of Deaths from Phthisis 99. Rate 0·68.

„ „ „ other Tuberculous Diseases 26. Rate 0·17.

Total Tuberculous Deaths 125. Rate 0·85.

ASHBY-DE-LA-ZOUCH RURAL.

Medical Officer of Health, G. S. HART, M.D., Ch.B.

Area 31,995 acres.

Population (Census 1911) 16,255. Estimated now—Birth rate 17,190, Death rate 16,502.

Birth rate 23·0. Death rate 13·8.

Infant Mortality 108. Zymotic rate 0·54.

Number of Deaths from Zymotic Diseases 9, viz.:—Enteric Fever 3, Whooping Cough 1, Diphtheria 2, and Diarrhœa (under two years) 3.

Notification of Infectious Diseases 163, viz.:—Scarlet Fever 31, Measles 61, Diphtheria 30, Erysipelas 11, Enteric Fever 5, Pneumonia 7, Phthisis 11, Other Tuberculous Diseases 1, Ophthalmia Neonatorum 2, Malaria 2, Puerperal Fever 2.

Number of Deaths from Phthisis 12. Rate 0·73.

„ „ „ other Tuberculous Diseases 1. Rate 0·06.

Total Tuberculous Deaths 13. Rate 0·79.

Food Supply: Two parcels of unsound food were surrendered. There were no seizures.

Dairies and Cowsheds: There are 227 dairymen registered in the district. The number of inspections of their premises was 322.

Housing of the Working Classes: There is a shortage of houses in the district. The Council have selected building land for the erection of houses (about 140).

Lodging Houses: None in the district.

Slaughter Houses: There are 13 slaughter houses in the district, and 31 inspections of premises were made. No contraventions were found.

Factory and Workshop Act: There were 119 workshops (including 10 bakehouses) registered. The number of outworkers is 27, in the same number of houses. No cases of infectious disease were reported.

Water Supply: A public water supply for Oakthorpe and Donisthorpe is under consideration, and an engineer has been appointed to prepare a scheme. The main supply of water for the district is derived from wells. Number of wells cleansed, repaired, etc., 7. Number of cisterns cleansed 5.

Sewage Disposal: —

Scavenging: Public scavenging is carried out at Measham, Oakthorpe and Donisthorpe, and at Heather. It is of great value, and might well be extended to other parts of your district.

Isolation Hospital: —

Other Features: —

Recommendations made: —

BARROW-ON-SOAR RURAL.

Medical Officer of Health, J. E. O'CONNOR, M.B., Ch.B., M.A.,
D.P.H., Barrister-at-Law.

Area 46,085 acres.

Population (Census 1911) 23,758. Estimated now—Birth rate
24,037, Death rate 23,074.

Birth rate 16·0 Death rate 13·8.

Infant Mortality 88. Zymotic rate 0·26.

Number of Deaths from Zymotic Diseases 6, viz.:—Whooping
Cough 1, Diphtheria 3, Diarrhœa (under two years) 2.

Notification of Infectious Diseases 126, viz.:—Measles 14, German
Measles 6, Scarlet Fever 10, Diphtheria 43, Puerperal Fever
1, Erysipelas 5, Pulmonary Tuberculosis 25, Other forms of
Tuberculosis 5, Pneumonia 17.

Number of Deaths from Phthisis 3. Rate 0·13.

„ „ „ other Tuberculous Diseases 2. Rate 0·08.

Total Tuberculous Deaths 5. Rate 0·21.

Food Supply: Three seizures were made, two summonses issued,
and two convictions obtained. In addition, two parcels of
food were surrendered to the Inspector.

Dairies and Cowsheds: Ninety premises are registered, and 120
inspections of these are recorded; 33 required cleansing, and
in 5 instances structural improvements were necessary.
Thirty-two inspections were made during milking time.

Housing of the Working Classes: The housing requirements of the
district have consistently claimed your most assiduous
attention, and in your comprehensive scheme for the
erection of 306 houses, a most commendable effort is being
made to comply with the requirements of every parish. I
understand that at Anstey and at Rothley the projected
houses will shortly be commenced.

Adoptive Acts: —

Offensive Trade: One offensive trade was established. Two inspec-
tions were made in this connection.

Slaughter Houses: There are 30 slaughter houses in the district, and
61 visits of inspection to these are recorded.

Factory and Workshop Act: There are 71 workshops (including 30 bakehouses) on the register. Fourteen nuisances were abated. The number of outworkers is 432, who occupy 216 houses, in 2 of which infectious disease occurred.

Water Supply: Eleven samples of water were analysed, and all condemned. The number of wells closed was 14, and 1 was repaired. The public supply was substituted for well water in 16 instances.

Scavenging: Eleven villages are systematically scavenged. In the remainder, namely, the smaller and more scattered villages, this work is left to the occupiers.

Sewage Disposal: Most of the larger villages are well sewered, broad irrigation, with or without tanking filtration, being employed in 10 instances.

Isolation Hospital: —

Other Features: —

Recommendations made: —

BELVOIR RURAL DISTRICT.

Medical Officer of Health, F. J. H. MARTIN, M.R.C.S., L.R.C.P.,
D.P.H.

Area 17,352 acres.

Population (Census 1911) 3,255. Estimated now—Birth rate 3,250,
Death rate 3,120.

Birth rate 18·4. Death rate 16·0.

Infant Mortality 150. Zymotic rate 0·0.

Number of Deaths from Zymotic Diseases nil.

Notifications of Infectious Diseases 41, viz.:—Ophthalmia Neonatorum 3, Tuberculous Meningitis 2, Phthisis 3, Pneumonia 4, Chicken Pox 2, Diphtheria 19, Scarlet Fever 1, Malaria 2, Measles and German Measles 5.

Number of Deaths from Phthisis 3. Rate 0·96.

„ „ „ other Tuberculous Diseases 2. Rate 0·64.

Total Tuberculous Deaths 5. Rate 1·60.

Food Supply: Meat has been periodically inspected and found good, and the sanitary conditions of the various shops is satisfactory. No carcasses or part of a carcass has been condemned for tuberculosis.

Dairies and Cowsheds: There are 58 dairymen registered in the district, and 38 inspections of their premises were made. Some of the milk is sent into neighbouring towns, some used locally, and the rest made into cheese. There is one cheese factory.

Housing of the Working Classes: Like most parts of the country more houses are required, 32 is the estimated number, of which 16 are to re-place houses that are regarded as unfit, and 16 to meet the unsatisfied demand. The total number of houses in the district is about 850, of which 500 are occupied by working men. No houses have been erected during the war, and none are in the course of erection.

Slaughter Houses: Number in the district 5, total number if inspections made 10.

Factory and Workshop Act: Number on register 37 (including bakehouses), number of bakehouses registered 6.

Water Supply: Number of samples taken for analysis 1. No part of the district is supplied from water works.

Sewage Disposal: At Croxton and Knipton the sewage from those houses with water closets passes to the filter beds. The effluent at Croxton runs into a dyke, and after two miles of natural filtration, enters the river Devon at Knipton. The Knipton effluent enters the river direct, as also does that of Muston, and a small proportion of that at Bottesford. At Bottesford there is a main sewer which follows the course of the Grantham-Nottingham road, and at the west end of the village is open, and runs as such for two miles to the boundary of the district. The solid matter is removed when necessary, and the main sewer is flushed from the river Devon when required.

Scavenging: There is none in the district.

Hospitals: The Hospitals that are used in the District for general purposes are the Nottingham (General, Children's, and Eye Infirmary), Leicester (The Infirmary), and Grantham.

Other Features: —

Recommendations made: —

BILLESDON RURAL DISTRICT.

Medical Officer of Health, J. E. O'CONNOR, M.B., Ch.B., B.A.,
D.P.H., Barrister-at-Law.

Area 52,482 acres.

Population (Census 1911) 6,913. Estimated now—Birth rate 6,533,
Death rate 6,271.

Birth rate 13·4. Death rate 12·4.

Infant Mortality 68. Zymotic rate 0·16.

Number of Deaths from Zymotic Diseases 1, viz.:—Measles.

Notification of Infectious Diseases 28, viz.:—Measles 1, Scarlet
Fever 4, Enteric Fever 1, Erysipelas 1, Pulmonary Tuberculosis 2,
Other forms of Tuberculosis 2, Pneumonia 3,
Chicken Pox 11, Impetigo 2, Malaria 1.

Number of Deaths from Phthisis 4. Rate 0·63.

„ „ „ other Tuberculous Diseases nil.

Total Tuberculous Deaths 4. Rate 0·63.

Food Supply: Two parcels of food were surrendered and destroyed.

Dairies and Cowsheds: 117 premises are registered, and received
140 inspections, 10 being during milking time. Six contra-
ventions of the Regulations were found, 5 premises required
cleansing, and 5 structural or sanitary improvements. These
requirements were all carried out.

Housing of the Working Classes: The number of dwelling houses
inspected was 70, and the number of inspections 80. Defects
were found in 10 houses, and these were rectified without
recourse of closing orders. Five houses were closed by
voluntary action of the owners.

Adoptive Acts: —

Lodging Houses: None in the district.

Slaughter Houses: There are 8 in the district, and they were each
inspected twice. All were found satisfactory.

Factory and Workshop Act: Fifty workshops (including 7 bake-
houses) are registered. One nuisance was abated. There
are 20 outworkers in the same number of houses. No houses
became infected during the year.

Water Supply: 111 premises derived their water from wells.

Sewage Disposal: Twelve new water closets were provided. Sixty
cesspools are cleansed fortnightly by scavengers.

Scavenging: —

Isolation Hospital: —

Other Features: —

BLABY RURAL DISTRICT.

Medical Officer of Health, J. E. O'CONNOR, M.B., Ch.B., B.A.,
D.P.H., Barrister-at-Law.

Area 29,378 acres.

Population (Census 1911) 16,505. Estimated now—Birth rate 17,018, Death rate 16,337.

Birth rate 13·7. Death rate 12·3.

Infant Mortality 68. Zymotic rate 0·18.

Number of Deaths from Zymotic Diseases 3, viz.:—Scarlet Fever 1, Whooping Cough 1, Diarrhoea (under two years) 1.

Notification of Infectious Diseases 150, viz.:—Measles 76, German Measles 14, Scarlet Fever 21, Diphtheria 8, Enteric Fever 8, Cerebro Spinal Fever 1, Puerperal Fever 1, Erysipelas 4, Pulmonary Tuberculosis 9, Other forms of Tuberculosis 1, Pneumonia 4, and Malaria 3.

Number of Deaths from Phthisis 17. Rate 1·04.

„ „ „ other Tuberculous Diseases 5. Rate 0·30.

Total Tuberculous Deaths 22. Rate 1·34.

Food Supply: No parcels of food were seized during the year.

Dairies and Cowsheds: There are 93 milk-sellers in the district, all of whom are registered, and 114 inspections of their premises were made, 31 being at milking time.

Housing of the Working Classes: Ninety-four dwelling houses were inspected, involving 114 inspections. In 63 houses defects were found; 41 were rectified without recourse to closing orders, 4 representations were made, but no closing orders.

Slaughter Houses: There are 15 slaughter houses in the district, and these were inspected periodically. Total number of inspections made was 43, and 2 contraventions were found.

Factory and Workshop Act: 187 (including 25 bakehouses) on the register, in which 34 (6 bakehouses) nuisances were abated. There are 2,337 outworkers living in 1,945 houses, in 29 of which infectious diseases occurred.

Water Supply: Sixteen samples of well water were taken for analysis, and 3 condemned; 2 wells were closed, 4 repaired, etc., and in 2 instances the public supply was substituted. A supply of wholesome water is urgently needed at Whetstone.

Sewage Disposal: —

Scavenging: —

Isolation Hospital: The district is provided with an Isolation Hospital. The County Council provides for all necessary bacteriological examinations.

Other Features: —

Recommendations made: —

CASTLE DONINGTON RURAL.

Medical Officer of Health, T. J. FLETCHER, M.B., C.M., M.R.C.S.

Area 15,938 acres.

Population (Census 1911) 6,416. Estimated now 5,902.

Birth rate 12·5. Death rate 11·5.

Infant Mortality 69. Zymotic rate 0·3.

Number of Deaths from Zymotic Diseases 2, viz.:—Diphtheria 1, Erysipelas 1.

Notification of Infectious Diseases 47, viz.:—Measles and German Measles 15, Diphtheria 7, Pneumonia 2, Scarlet Fever 1, Malaria (all ex-soldiers) 5, Cerebro Spinal Meningitis 1, Erysipelas 2, Tuberculosis 14.

Number of Deaths from Phthisis 5. Rate 0·8.

„ „ „ other Tuberculous Diseases 1. Rate 0·16.
Total Tuberculous Deaths 6. Rate 1·0.

Food Supply: There were no seizures or surrenders of unsound food.

Dairies and Cowsheds: There are 69 dairymen (milk-sellers) in the district, and 62 are registered; 154 inspections of their premises were made, 97 being during milking time. Eleven contraventions were found and these were all remedied in due course.

Housing of the Working Classes: 564 dwelling houses were inspected involving 708 inspections, and 27 defects were found. Six closing orders were made, and 4 dwelling houses, after making of closing orders, were put into a fit state for human habitation.

Lodging Houses: One lodging house is registered, and this was inspected 7 times. No contraventions were found.

Slaughter Houses: Sixty-four inspections were made of the 16 premises registered, and all were found to be in a satisfactory condition.

Factory and Workshop Act: There are 69 workshops on the register, including 12 bakehouses. The number of nuisances abated was 14. The number of outworkers is 28, living in 19 houses.

Water Supply: The number of premises deriving their water supply from wells is 28, but the main supply is from brooks and pits.

Scavenging: Sixteen privies were repaired and 3 converted into w.c.'s. Six new water closets were provided, and 4 supplied with water, repaired, or otherwise improved.

Sewage Disposal: —

Isolation Hospital: —

Other Features: —

Recommendations made: —

HALLATON RURAL.

Medical Officer of Health, J. E. O'CONNOR, M.B., Ch.B., B.A.,
D.P.H., Barrister-at-Law.

Area 13,604 acres.

Population (Census 1911) 1,867. Estimated now 1,590.

Birth rate 12·0. Death rate 20·7.

Infant Mortality 50. Zymotic rate 1·25.

Number of Deaths from Zymotic Diseases 2, viz.:—Enteric Fever 1, and Whooping Cough 1.

Notification of Infectious Diseases 2, viz.:—Measles 1, Enteric Fever 1.

Number of Deaths from Phthisis nil.

„ „ „ other Tuberculous Diseases nil.

Total Tuberculous Deaths nil.

Food Supply: —

Dairies and Cowsheds: Number of dairymen registered 5, and these were all inspected once. All were found to be in a clean condition.

Housing of the Working Classes: The number of inspections made in this respect was 63, in the same number of houses. Eleven defects were found, but all have since been rectified. Two dwelling houses were demolished by voluntary action of owners.

Adoptive Acts: —

Slaughter Houses: Eleven inspections were made at three slaughter houses. No contraventions found.

Factory and Workshop Act: Number on register (including bake-houses) 16. Number of bakehouses 4. Number of outworkers 3 in the same number of houses. All in good condition.

Water Supply : Chiefly supplied from springs and shallow wells. Most of the village of Hallaton is supplied by spring water conveyed by pipes. It should be supplemented by a similar supply for the remainder of the village.

Sewage Disposal: At Hallaton there is a 4-acre sewage farm. Two-thirds of the houses in this village have hand-flushed water closets. Horninghold possesses an installation for the purification of sewage. Medbourne sewage reaches the brook untreated. The village is low-lying, and any attempt at efficient treatment would involve the expense of pumping.

Scavenging: —

Isolation Hospital: The hospitals in Leicestershire are now available for all districts within the County. The administrative control, including hospital treatment of Tuberculosis, is vested in the County Council.

Other Features: —

Recommendations made: —

HINCKLEY RURAL.

Medical Officer of Health, J. E. O'CONNOR, M.B., Ch.B., B.A.,
D.P.H., Barrister-at-Law.

Area 18,852 acres.

Population (Census 1911) 13,825. Estimated now—Birth rate
15,731, Death rate 15,101.

Birth rate 12·5. Death rate 10·99.

Infant Mortality 90. Zymotic rate 0·46.

Number of Deaths from Zymotic Diseases 7. Whooping Cough 6,
Diphtheria 1.

Notification of Infectious Diseases 51, viz.:—Measles 11, German
Measles 3, Scarlet Fever 6, Diphtheria 6, Enteric Fever 1,
Puerperal Fever 1, Cerebro Spinal Fever 1, Erysipelas 8,
Ophthalmia Neonatorum 1, Pneumonia 6, Malaria 6,
Dysentery 1.

Number of Deaths from Phthisis 18. Rate 1·19.

„ „ „ other Tuberculous Diseases 3. Rate 0·19.

Total Tuberculous Deaths 21. Rate 1·39.

Food Inspection: There is no record of any work done under this
heading.

Housing of the Working Classes: The provision of efficient housing
accommodation for the working classes is a matter which has
received your unremitting attention, and your compre-
hensive building programme, which was greatly delayed by
causes quite beyond the control of the Council, has now been
commenced.

Adoptive Acts: The report contains no record under this heading.

Water Supply: The three largest villages, Earl Shilton, Barwell,
and Burbage have a public water supply obtained from
Snarestone, and Stoney Stanton has a separate public
supply. In all four, however, there is a quatum of shallow
wells, and as these are almost invariably more or less con-
taminated, their closure and the substitution of the public
supply, a work which proceeded apace in 1914, should be
resumed.

LOUGHBOROUGH RURAL.

Medical Officer of Health, N. B. M. BLACKHAM, L.R.C.P.I.,
L.R.C.S.I., L.M.

Area 20,242 acres.

Population (Census 1911) 4,579. Estimated now—Birth rate 4,446, Death rate 4,268.

Birth rate 17·3. Death rate 14·2.

Infant Mortality 89·6. Zymotic rate 0·23.

Number of Deaths from Zymotic Diseases 1, viz.:—Diphtheria.

Notification of Infectious Diseases 22, viz.:—Diphtheria 3, Scarlet Fever 6, Measles 5, Pulmonary Tuberculosis 5, Dysentery 1, and Pneumonia 2.

Number of Deaths from Phthisis 6. Rate 1·40.

„ „ „ other Tuberculous Diseases nil.

Total Tuberculous Deaths 6. Rate 1·40.

Food Inspection: One parcel of unsound food was seized during the year.

Dairies and Cowsheds: Seventy-three premises are registered, and 110 inspections of these were made, 54 required cleansing, and 4 structural improvements.

Housing of the Working Classes: During the latter part of the year I made a survey of the whole district, and furnished particulars of the same to the Housing Committee. I found there were 85 houses in the district uninhabitable, and 37 dilapidated but repairable, the former of which should be closed up in the near future. Of the 85 houses scheduled, the chief cause of defect is that they are dirty and dilapidated.

Adoptive Acts: —

Slaughter Houses: There are 4 slaughter houses in the district, and 11 inspections of their premises were made.

Factory and Workshop Act: There are 140 workshops registered, including 7 bakehouses, and 39 nuisances were abated. There are 163 outworkers living in 141 houses, in 12 of which infectious disease occurred.

Water Supply: Eight samples of water were taken for analysis and 4 condemned; 1 well was closed and 4 cleaned.

Scavenging: This is done by the occupier, there are no public scavengers.

Isolation Hospital: —

Other Features: —

Recommendations made: —

LUTTERWORTH RURAL.

Medical Officer of Health, J. E. O'CONNOR, M.B., Ch.B., B.A.,
D.P.H., Barrister-at-Law.

Area 46,701 acres.

Population (Census 1911) 9,931. Estimated now—Birth rate
9,663, Death rate 9,276.

Birth rate 15·7. Death rate 0·21.

Number of Deaths from Zymotic diseases 2, viz. :—Diarrhœa 2.

Notification of Infectious Diseases 46, viz. :—Measles 5, German
Measles 1, Scarlet Fever 3, Diphtheria 13, Puerperal Fever
1, Erysipelas 2, Pulmonary Tuberculosis 11, Other forms of
Tuberculosis 1, Pneumonia 1, Dysentery 1, and Malaria 7.

Number of Deaths from Phthisis 11. Rate 1·18.

„ „ „ other Tuberculous Diseases 5. Rate 0·53.

Total Tuberculous Deaths 16. Rate 1·72.

Food Inspection: There were 5 parcels of food surrendered for
inspection during the year.

Dairies and Cowsheds: Ninety-seven premises on the register, 146
inspections made, 35 contraventions found, 28 being in
respect of cleanliness, and 7 due to structural conditions.

Housing of the Working Classes: 214 dwelling houses were
inspected, and the number of inspections was 375, and 91
defects were found. Three closing orders were made, 9
houses were demolished by the owners, and 6 as a result of
closing orders.

Adoptive Acts: —

Common Lodging Houses: One common lodging house is registered,
and 6 visits of inspection were made, when 1 contravention
of the regulations was found.

Slaughter Houses: Eighteen in the district, to which 44 visits of
inspection were made.

Factory and Workshop Act: There are 57 workshops, including 15
bakehouses, on the register, and 12 nuisances were abated.
The outworkers number 38, and live in 31 houses.

Water Supply: Three samples analysed and one condemned. One
well was condemned, and in 35 instances the public supply
was substituted.

Isolation Hospital: —

Other Features: —

Recommendations made: —

MARKET BOSWORTH RURAL.

Medical Officer of Health, T. G. KELLY, B.A., M.D., D.P.H.

Area 61,027 acres. Thirty-eight parishes.

Population (Census 1911) 21,858. Estimated now—Birth rate 23,207, Death rate 22,278.

Birth rate 19·13. Death rate 10·91.

Infant Mortality 74. Zymotic rate 0·67.

Number of Deaths from Zymotic Diseases 15, viz.:—Whooping Cough 2, Diphtheria 11, Diarrhœa (under two years) 2.

Notification of Infectious Diseases 200, viz.:—Measles 34, German Measles 2, Scarlet Fever 76, Diphtheria 53, Enteric Fever 4, Cerebro Spinal Fever 2, Erysipelas 12, Pulmonary Tuberculosis 11, other forms of Tuberculosis 4, Ophthalmia Neonatorum 2.

Number of Deaths from Phthisis 8. Rate 3·59.

„ „ „ other Tuberculous Diseases 4. Rate 1·79.

Total Tuberculous Deaths 12. Rate 5·38.

Food Inspection: No records given under this heading.

Housing of the Working Classes: Forty-nine houses were inspected, 35 defects were found and rectified without recourse to closing orders.

MARKET HARBOROUGH RURAL.

Medical Officer of Health, E. V. PHILLIPS, M.R.C.S.,
L.R.C.P., D.P.H.

Area 30,234 acres.

Population Census 1911) 7,770. Estimated now 7,151.

Birth rate 15·40. Death rate 15·52.

Infant Mortality 70·03. Zymotic rate 0·69.

Number of Deaths from Zymotic Diseases 5, viz.:—Diphtheria 3,
Enteric Fever 1, Whooping Cough 1.

Notification of Infectious Diseases 50, viz.:—Scarlet Fever 24,
Diphtheria 9, Typhoid Fever 4, Pulmonary Tuberculosis 4,
Measles 6, Ophthalmia Neonatorum 1, Whooping Cough 1,
Malaria 1.

Number of Deaths from Phthisis 5. Rate 0·69.

„ „ „ other Tuberculous Diseases 1. Rate 0·14.

Total Tuberculous Deaths 6. Rate 0·83.

Food Supply: No report received.

Dairies and Cowsheds: There are 45 dairymen and cow-keepers on the register; 6 have been registered during the year. The premises have been regularly inspected, 121 inspections being made during the year. Notices were given in 17 cases for various infringements of the Regulations.

Housing of the Working Classes: During the year a house-to-house inspection of the district has been made under the above; 1,320 houses have been inspected and particulars recorded of each, viz.: owner and occupier, accommodation, number of occupants, condition of house, water supply, drainage, etc. Sixty-three houses were found to be unfit for habitation. Many of these are at present unoccupied, and are incapable of being made fit. In some cases considerable re-construction would make them into passably good houses. Thirty-four cases of overcrowding were found, but no steps have been taken to remedy these owing to the impossibility of finding accommodation. At the present time 241 houses were found to be without adequate accommodation for the storage of food. 289 were not provided with the facilities for washing. Considering the difficulties in regard to labour and materials during the past few years, the condition of the houses generally as regards repairs and cleanliness was very fair.

Adoptive Acts: —

Slaughter Houses: The number in the district is 17, and these received 24 inspections.

Factory and Workshop Act: There are 19 workshops and 11 bake-houses on the register. Forty-one inspections of these have been made.

Water Supply: During the year two public taps have been fixed to the U.D.C.'s main at Lubenham. These will help a part of the village which has suffered in the past from shortage of good water.

Sewage Disposal: The only public work carried out during the year was the re-laying with earthenware pipes of about 50 yards of sewer at Thorpe Langton.

Scavenging: The scavenging of Fleckney and Kibworth Beauchamp is now carried out by the Council by direct labour and hired team labour. During the past year the work has been carried on with difficulty owing to the shortage of labour. The public scavenging of Kibworth Harcourt is carried out by contract. The remainder of the district has no scavenging system other than the removal of refuse, soil, etc., by the owners and occupiers.

Isolation Hospital: An arrangement exists by which infectious cases can be removed to the Blaby Hospital.

Other features: —

Recommendations made: —

MELTON MOWBRAY RURAL.

Medical Officer of Health, W. TIBBLES, M.D., L.R.C.P.,
M.R.C.S., L.S.A., D.C.L., LL.D.

Area 91,848 acres.

Population (Census 1911) 15,271. Estimated now—

Birth rate 16·5. Death rate 9·9.

Infant Mortality 41·8. Zymotic rate 0·00.

Number of Deaths from Zymotic Diseases nil.

Notification of Infectious Diseases 110, viz.:—Diphtheria 16,
Erysipelas 5, Scarlet Fever 14, Puerperal Fever 1, Cerebro
Spinal Meningitis 1, Pulmonary Tuberculosis 21, Other
Tuberculous Diseases 6, Measles 20, Pneumonia 18, Enteric
Fever 7, Ophthalmia Neonatorum 1.

Number of Deaths from Phthisis 7. Rate 0·50.

„ „ „ other Tuberculous Diseases 2. Rate 0·14.

Total Tuberculous Deaths 9. Rate 0·64.

Unsound food seized: One parcel.

Dairies and Cowsheds: Number of milk-sellers 406, registered 346,
inspection of premises 125. Number of butter and cheese
makers 406, inspection of premises 137, during milking time
18. Contravention of regulations 6, premises required to be
cleansed 4, sanitary improvements needed 2, requirements
carried out 6.

Housing of the Working Classes: Dwelling houses inspected 87,
number of inspections 143, defects found therein 35, defects
rectified 5.

Adoptive Acts: —

Slaughter Houses: Twenty-eight, inspections 65, contravention of
bye-laws nil.

Factory and Workshop Act: Workshops (including bakehouses) 54,
nuisances abated 6, registered bakehouses 35, nuisances
abated 4. Home workers 89, number of houses 89, infected
nil.

Water Supply: Two samples were taken for analysis, but neither
were condemned. The district is for the most part supplied

by wells, which vary from 10 to 20 feet in depth. The water therefore consists chiefly of that which has penetrated through the surrounding soil.

Sewage Disposal: Every village has now its main sewer, and a large percentage of the houses have their drains connected therewith. The prevailing type of drain consists of glazed earthenware pipes, with socket joints, and a gully trap, or stench trap., although open grates are not entirely done away with. In many cases the main drain of the village empties itself into an open dyke. But most of the larger villages have a sewage filtering bed, wherein the sewage undergoes fermentation and purification before the effluent reaches the watercourse.

Scavenging: Where the pail closet system prevails there is a village scavenger, who undertakes to empty the pails every week. It is impossible to state the relative proportion of water closets, pail closets, and conservancy privies until the survey of the district has been completed.

Other Features: —

Recommendations made: —

Causes of Death in Urban Areas 1919.

[illegible]

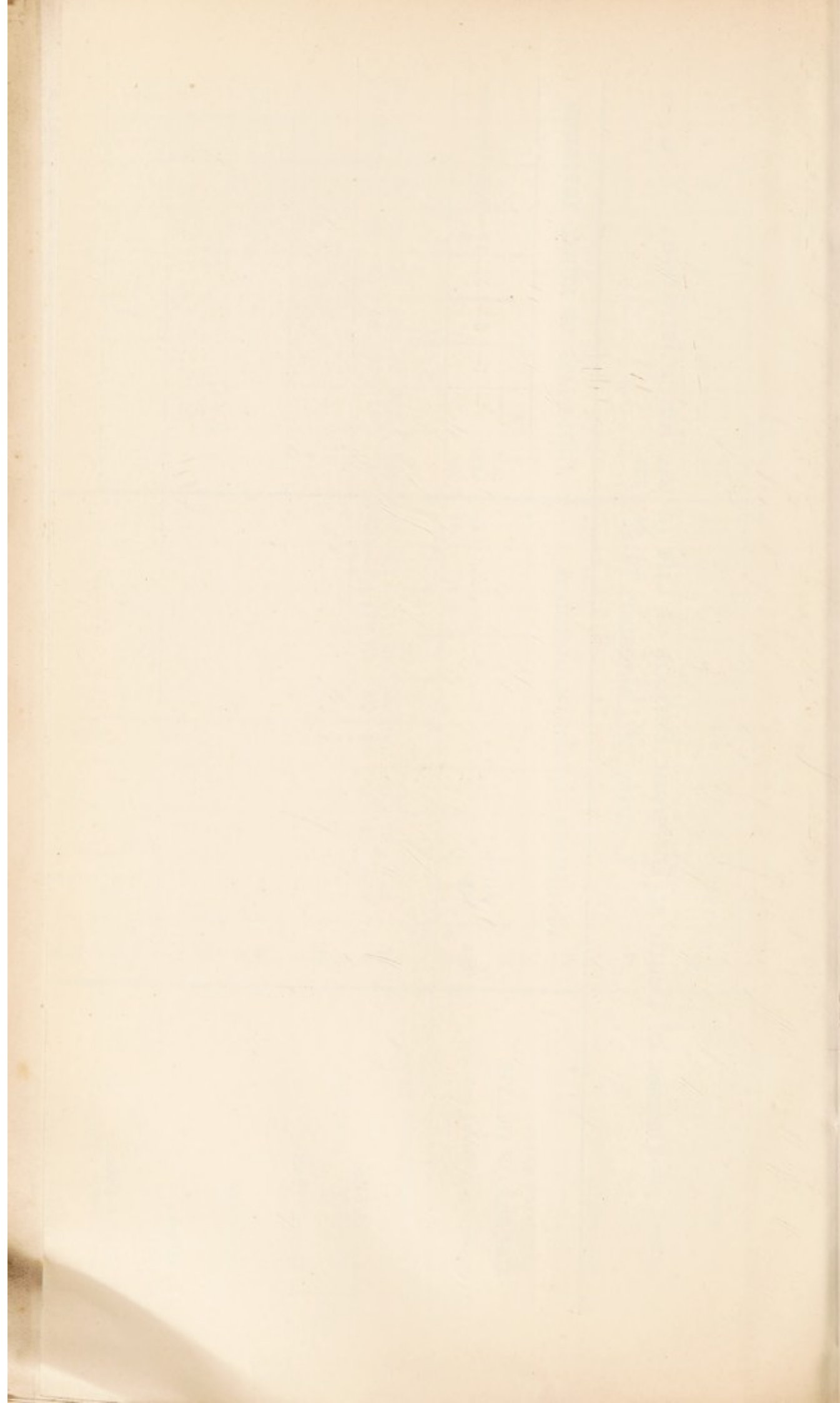
Causes of Death in Rural Areas 1919.

[illegible]

Name		Age		Sex		Occupation		Address	
John Smith		35		Male		Farmer		123 Main St.	
Mary Smith		32		Female		Homemaker		123 Main St.	
Robert Smith		10		Male		Student		123 Main St.	
Elizabeth Smith		8		Female		Student		123 Main St.	
James Smith		5		Male		Student		123 Main St.	
Sarah Smith		3		Female		Student		123 Main St.	
Thomas Smith		2		Male		Student		123 Main St.	
Anna Smith		1		Female		Student		123 Main St.	
William Smith		0		Male		Student		123 Main St.	

Causes of Death at Different Periods of Life in the Administrative
County of Leicester, 1919.

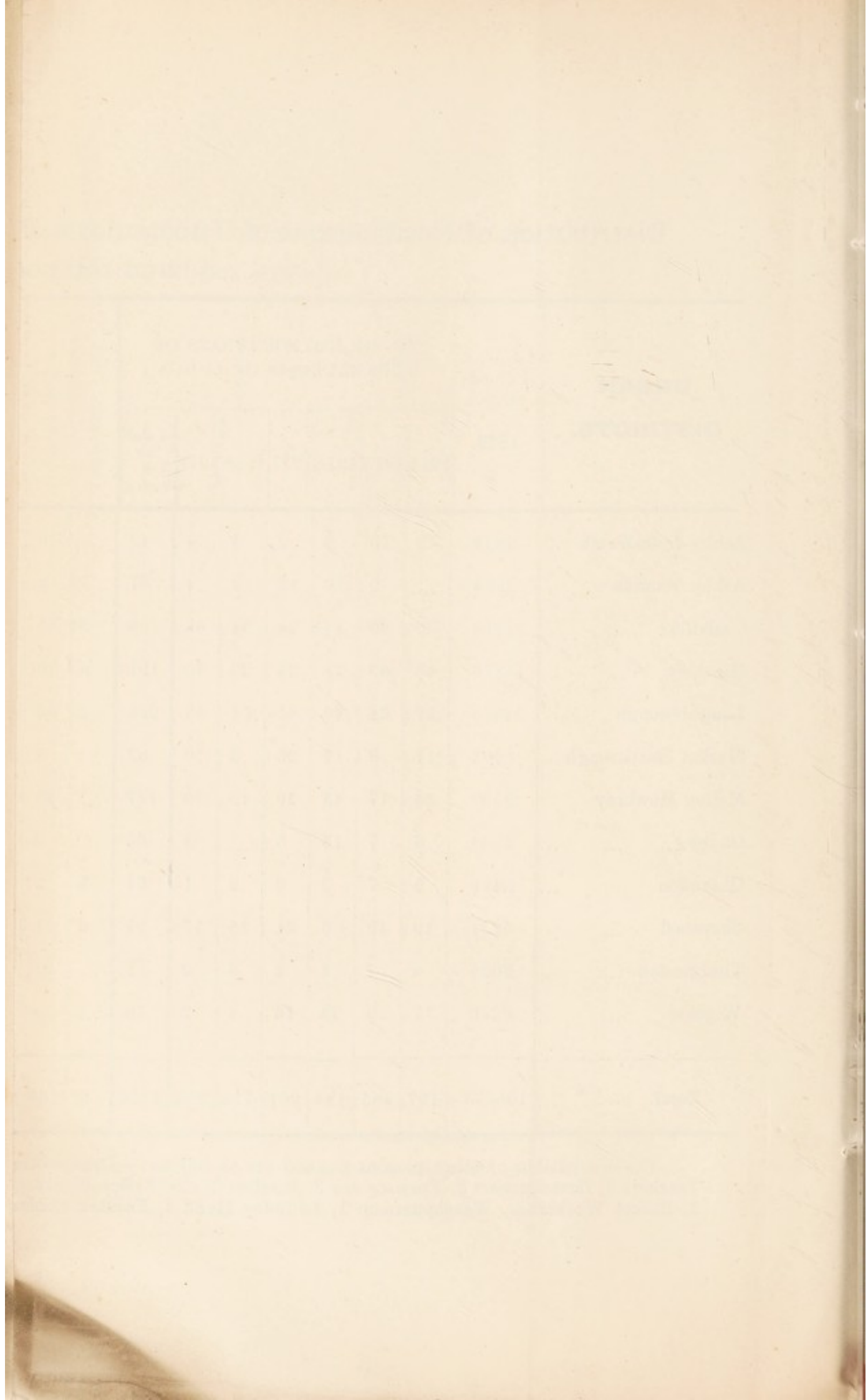
CAUSES OF DEATH.	AGGREGATE OF URBAN DISTRICTS.										AGGREGATE OF RURAL DISTRICTS.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
	Sex.	All Ages.	0—	1—	2—	3—	4—	5—	6—	7—	8—	9—	10—	11—	12—	13—	14—	15—	16—	17—	18—	19—	20—	21—	22—	23—	24—	25—	26—	27—	28—	29—	30—	31—	32—	33—	34—	35—	36—	37—	38—	39—	40—	41—	42—	43—	44—	45—	46—	47—	48—	49—	50—	51—	52—	53—	54—	55—	56—	57—	58—	59—	60—	61—	62—	63—	64—	65—	66—	67—	68—	69—	70—	71—	72—	73—	74—	75—	76—	77—	78—	79—	80—	81—	82—	83—	84—	85—	86—	87—	88—	89—	90—	91—	92—	93—	94—	95—	96—	97—	98—	99—	100—	101—	102—	103—	104—	105—	106—	107—	108—	109—	110—	111—	112—	113—	114—	115—	116—	117—	118—	119—	120—	121—	122—	123—	124—	125—	126—	127—	128—	129—	130—	131—	132—	133—	134—	135—	136—	137—	138—	139—	140—	141—	142—	143—	144—	145—	146—	147—	148—	149—	150—	151—	152—	153—	154—	155—	156—	157—	158—	159—	160—	161—	162—	163—	164—	165—	166—	167—	168—	169—	170—	171—	172—	173—	174—	175—	176—	177—	178—	179—	180—	181—	182—	183—	184—	185—	186—	187—	188—	189—	190—	191—	192—	193—	194—	195—	196—	197—	198—	199—	200—	201—	202—	203—	204—	205—	206—	207—	208—	209—	210—	211—	212—	213—	214—	215—	216—	217—	218—	219—	220—	221—	222—	223—	224—	225—	226—	227—	228—	229—	230—	231—	232—	233—	234—	235—	236—	237—	238—	239—	240—	241—	242—	243—	244—	245—	246—	247—	248—	249—	250—	251—	252—	253—	254—	255—	256—	257—	258—	259—	260—	261—	262—	263—	264—	265—	266—	267—	268—	269—	270—	271—	272—	273—	274—	275—	276—	277—	278—	279—	280—	281—	282—	283—	284—	285—	286—	287—	288—	289—	290—	291—	292—	293—	294—	295—	296—	297—	298—	299—	300—	301—	302—	303—	304—	305—	306—	307—	308—	309—	310—	311—	312—	313—	314—	315—	316—	317—	318—	319—	320—	321—	322—	323—	324—	325—	326—	327—	328—	329—	330—	331—	332—	333—	334—	335—	336—	337—	338—	339—	340—	341—	342—	343—	344—	345—	346—	347—	348—	349—	350—	351—	352—	353—	354—	355—	356—	357—	358—	359—	360—	361—	362—	363—	364—	365—	366—	367—	368—	369—	370—	371—	372—	373—	374—	375—	376—	377—	378—	379—	380—	381—	382—	383—	384—	385—	386—	387—	388—	389—	390—	391—	392—	393—	394—	395—	396—	397—	398—	399—	400—	401—	402—	403—	404—	405—	406—	407—	408—	409—	410—	411—	412—	413—	414—	415—	416—	417—	418—	419—	420—	421—	422—	423—	424—	425—	426—	427—	428—	429—	430—	431—	432—	433—	434—	435—	436—	437—	438—	439—	440—	441—	442—	443—	444—	445—	446—	447—	448—	449—	450—	451—	452—	453—	454—	455—	456—	457—	458—	459—	460—	461—	462—	463—	464—	465—	466—	467—	468—	469—	470—	471—	472—	473—	474—	475—	476—	477—	478—	479—	480—	481—	482—	483—	484—	485—	486—	487—	488—	489—	490—	491—	492—	493—	494—	495—	496—	497—	498—	499—	500—	501—	502—	503—	504—	505—	506—	507—	508—	509—	510—	511—	512—	513—	514—	515—	516—	517—	518—	519—	520—	521—	522—	523—	524—	525—	526—	527—	528—	529—	530—	531—	532—	533—	534—	535—	536—	537—	538—	539—	540—	541—	542—	543—	544—	545—	546—	547—	548—	549—	550—	551—	552—	553—	554—	555—	556—	557—	558—	559—	560—	561—	562—	563—	564—	565—	566—	567—	568—	569—	570—	571—	572—	573—	574—	575—	576—	577—	578—	579—	580—	581—	582—	583—	584—	585—	586—	587—	588—	589—	590—	591—	592—	593—	594—	595—	596—	597—	598—	599—	600—	601—	602—	603—	604—	605—	606—	607—	608—	609—	610—	611—	612—	613—	614—	615—	616—	617—	618—	619—	620—	621—	622—	623—	624—	625—	626—	627—	628—	629—	630—	631—	632—	633—	634—	635—	636—	637—	638—	639—	640—	641—	642—	643—	644—	645—	646—	647—	648—	649—	650—	651—	652—	653—	654—	655—	656—	657—	658—	659—	660—	661—	662—	663—	664—	665—	666—	667—	668—	669—	670—	671—	672—	673—	674—	675—	676—	677—	678—	679—	680—	681—	682—	683—	684—	685—	686—	687—	688—	689—	690—	691—	692—	693—	694—	695—	696—	697—	698—	699—	700—	701—	702—	703—	704—	705—	706—	707—	708—	709—	710—	711—	712—	713—	714—	715—	716—	717—	718—	719—	720—	721—	722—	723—	724—	725—	726—	727—	728—	729—	730—	731—	732—	733—	734—	735—	736—	737—	738—	739—	740—	741—	742—	743—	744—	745—	746—	747—	748—	749—	750—	751—	752—	753—	754—	755—	756—	757—	758—	759—	760—	761—	762—	763—	764—	765—	766—	767—	768—	769—	770—	771—	772—	773—	774—	775—	776—	777—	778—	779—	780—	781—	782—	783—	784—	785—	786—	787—	788—	789—	790—	791—	792—	793—	794—	795—	796—	797—	798—	799—	800—	801—	802—	803—	804—	805—	806—	807—	808—	809—	810—	811—	812—	813—	814—	815—	816—	817—	818—	819—	820—	821—	822—	823—	824—	825—	826—	827—	828—	829—	830—	831—	832—	833—	834—	835—	836—	837—	838—	839—	840—	841—	842—	843—	844—	845—	846—	847—	848—	849—	850—	851—	852—	853—	854—	855—	856—	857—	858—	859—	860—	861—	862—	863—	864—	865—	866—	867—	868—	869—	870—	871—	872—	873—	874—	875—	876—	877—	878—	879—	880—	881—	882—	883—	884—	885—	886—	887—	888—	889—	890—	891—	892—	893—	894—	895—	896—	897—	898—	899—	900—	901—	902—	903—	904—	905—	906—	907—	908—	909—	910—	911—	912—	913—	914—	915—	916—	917—	918—	919—	920—	921—	922—	923—	924—	925—	926—	927—	928—	929—	930—	931—	932—	933—	934—	935—	936—	937—	938—	939—	940—	941—	942—	943—	944—	945—	946—	947—	948—	949—	950—	951—	952—	953—	954—	955—	956—	957—	958—	959—	960—	961—	962—	963—	964—	965—	966—	967—	968—	969—	970—	971—	972—	973—	974—	975—	976—	977—	978—	979—	980—	981—	982—	983—	984—	985—	986—	987—	988—	989—	990—	991—	992—	993—	994—	995—	996—	997—	998—	999—	1000—	1001—	1002—	1003—	1004—	1005—	1006—	1007—	1008—	1009—	1010—	1011—	1012—	1013—	1014—	1015—	1016—	1017—	1018—	1019—	1020—	1021—	1022—	1023—	1024—	1025—	1026—	1027—	1028—	1029—	1030—	1031—



Distribution of Notifications of Tuberculosis of the Lungs in the Urban Districts during the last Six Years
and the occupations, where known.

URBAN DISTRICTS.	Popula- tion. 1919.	NO. OF NOTIFICATIONS OF TUBERCULOSIS OF LUNGS.							Quarrymen.	Domestic Duties.	Hosiery Workers.	School Children.	Shoe Operatives.	Miners.	Labourers.	Clerks.	Mechanics.	Engineers.	Railway Workers.	Corset Hands.	Iron Workers.	Bakers.	Carpenters.	Dyers.	Ex-Soldiers.	No Occupation.	Gardeners.	Shopkeepers.	Total Known Occupations.
		1914	1915	1916	1917	1918	1919	Total for 6 Years.																					
Ashby-de-la-Zouch ...	4348	12	10	8	2	6	4	42	...	10	...	9	...	1	...	3	1	...	...	...	...	...	1	...	...	1	...	...	26
Ashby Woulds ..	2968	...	9	10	12	2	4	37	...	5	...	19	1	5	...	...	...	...	1	...	...	1	...	...	...	...	...	1	33
Coalville	21118	20	20	14	24	34	38	150	1	18	...	23	1	33	4	1	1	3	2	...	3	1	1	...	1	5	...	2	100
Hinekley	15370	40	33	28	24	20	46	191	...	20	62	12	27	...	1	4	4	2	...	1	1	...	1	5	4	4	1	12	161
Loughborough ..	24675	27	31	40	46	64	48	236	...	33	41	13	3	...	4	10	4	13	3	1	6	...	1	1	4	7	1	1	146
Market Harborough ...	8608	17	9	17	23	6	10	82	...	8	8	5	2	...	2	6	...	1	3	10	...	...	...	...	...	3	2	2	52
Melton Mowbray ...	8599	34	17	18	20	19	19	127	...	20	14	23	6	...	6	4	...	1	8	1	4	3	2	...	8	3	2	8	113
Oadby... ..	2903	4	7	13	6	...	5	35	...	2	3	3	1	...	1	1	...	...	...	...	...	...	...	...	1	...	1	2	15
Quorndon	2428	5	7	3	6	2	1	24	1	2	6	4	1	...	...	1	...	...	1	...	...	...	...	...	1	...	1	...	18
Shepshed	5251	19	10	9	21	15	17	91	4	11	19	5	9	3	...	1	...	...	2	...	...	...	...	...	1	3	...	...	58
Thurmaston	2025	2	2	1	1	4	2	12	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	2
Wigston	8260	17	10	23	16	4	9	79	...	9	11	8	8	3	1	1	...	...	4	...	...	2	...	...	2	3	...	2	54
Total	106553	197	165	184	201	176	203	1126	6	138	164	124	59	45	20	32	10	21	24	13	14	7	6	6	22	29	8	30	778

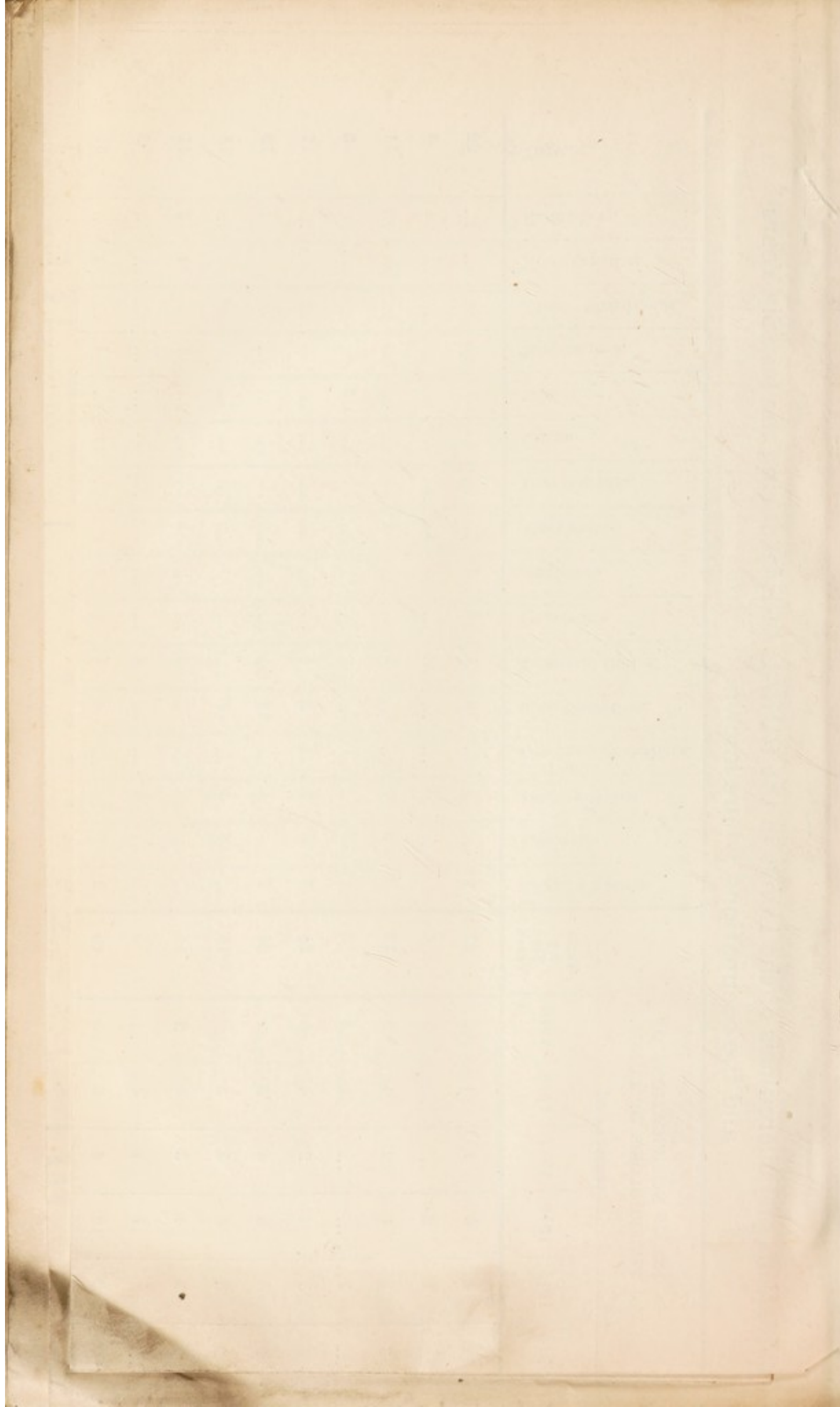
The occupations of other persons notified are as follows:—Dressmakers 5, Vanmen and Grooms 5, Farm Labourers 5, Blacksmiths 5, Tailors 5, Soap Packers 4, Teachers 4, Greengrocers 3, Furnacemen 3, Binders 3, Post Office Workers 3, Butchers 3, Barbers 2, Travellers 2, Chemists 2, Policemen 2, Box Makers 2, Lace Makers 2, Basket Workers 2, Warehousemen 1, Laundry Hand 1, Painter 1, Music Hall Artiste 1, Stonemason 1, and Rag and Bone Merchant 1.



Distribution of Notifications of Tuberculosis of the Lungs in the RURAL AREAS during the last Six Years and the occupations, where known.

PARISH.	Popula- tion 1911 Census.	NO. OF NOTIFICATIONS OF TUBERCULOSIS OF LUNGS.						School Children.	Labourers.	Hortory Hands.	Groom and Carters.	Shoe Operators.	Domestic Duties.	Quarrymen.	Blacksmiths.	Iron Workers.	Carpers.	Miners.	Shopkeepers.	Public Occ. Hands.	No-Occupiers.	Total.		
		1914 1915 1916 1917 1918 1919																						
		Total Six Years																						
Ainstrey	2276	14	4	5	1	1	2	27	1	1	14	1	1	1	1	...	...	...	...	...	...	22		
Arnsby	334	...	1	2	...	...	1	4	...	3	...	...	...	...	...	...	...	...	...	...	...	3		
Austerley	1836	3	1	1	2	4	2	13	3	1	...	...	6	...	1	...	...	...	...	...	...	11		
Bagnorth	1419	...	1	...	...	...	1	3	...	1	...	...	...	...	...	...	...	3	...	...	...	3		
Barrow-on-Soar	2481	5	5	4	2	4	5	25	1	4	8	1	2	1	...	...	...	...	...	...	...	17		
Barwell	2998	8	3	6	4	3	2	26	2	1	15	...	...	...	...	...	...	...	...	...	1	19		
Blaby	1959	2	3	6	5	3	...	19	...	1	5	8	...	...	1	...	...	...	...	...	...	15		
Bottesford	1174	1	1	4	3	2	14	...	...	...	...	6	...	...	1	...	...	...	...	...	1	11		
Broughton Ashby	1389	...	1	1	3	...	...	5	...	1	...	...	...	...	...	...	...	...	...	...	...	2		
Brigs	2412	7	10	12	4	2	5	40	2	1	15	4	3	1	1	...	...	...	...	...	...	22		
Castle Donington	2529	5	2	1	2	...	3	13	2	1	3	...	4	...	...	...	...	...	...	...	...	10		
Coleorton	725	1	2	2	1	...	1	7	...	...	...	...	4	...	...	...	...	3	...	...	...	6		
Cotby	1360	4	4	3	3	...	...	14	1	1	...	4	...	...	...	...	...	...	...	...	...	6		
Countenhorpe	1460	4	4	3	1	...	1	13	1	5	...	...	1	...	...	...	...	...	...	...	1	8		
Croft	742	2	3	1	2	1	1	10	1	...	...	...	...	1	...	...	...	...	...	...	...	4		
Cropton	310	1	...	3	...	...	...	4	...	1	1	1	1	...	...	...	...	...	...	...	...	4		
Desford	1118	2	2	1	...	...	3	9	...	1	...	...	2	...	...	...	...	...	...	...	1	7		
Donisthorpe	2444	5	...	2	3	3	1	14	1	1	...	...	...	...	...	...	...	3	...	...	...	2		
Dunton Bassett	482	1	...	2	1	...	...	5	...	...	...	1	...	...	...	...	...	...	...	...	...	3		
Earl Shilton	4190	19	11	11	8	26	2	77	4	8	17	2	1	2	1	3	...	...	...	...	...	28		
Enderby	2967	6	6	6	6	1	...	25	...	3	1	3	2	...	...	...	...	...	...	...	...	15		
Fleckby	1825	1	...	4	1	2	1	9	...	1	1	...	1	...	...	...	...	...	...	...	...	4		
Gibberton	464	1	1	...	1	1	...	4	1	...	...	1	...	...	...	...	...	...	...	...	...	3		
Glanfield	1105	1	1	1	2	...	1	6	...	1	1	...	...	...	...	...	...	...	...	...	...	2		
Glen Magna	776	3	1	...	...	...	...	4	1	...	...	1	1	...	...	...	...	...	...	...	...	2		
Graby	910	2	1	1	...	...	...	4	...	...	...	...	...	2	...	...	...	...	...	...	...	7		
Hathern	1209	1	4	4	...	4	5	16	...	1	3	1	2	...	...	...	...	...	...	...	...	3		
Higham Hill	614	2	1	3	1	...	1	8	...	...	...	...	2	1	...	...	...	...	...	...	...	2		
Humberstone	538	2	...	3	1	2	2	10	1	...	...	1	...	...	...	...	...	...	...	...	...	3		
Husaste	610	...	1	2	...	1	...	4	1	...	...	...	...	1	...	...	...	...	...	1	...	3		
Ilkeston	4946	4	6	1	6	1	...	18	4	...	...	...	6	...	...	...	1	3	...	...	...	13		
Kegworth	2220	1	1	3	4	3	6	18	1	1	3	...	...	1	...	...	...	...	...	...	...	11		
Kilworth	1807	1	4	4	...	...	...	9	1	1	3	...	...	...	...	...	...	...	...	...	...	7		
Long Whiston	571	1	...	...	1	1	1	4	...	...	...	...	...	2	...	...	...	...	...	...	...	3		
Lutterworth	1896	7	5	6	11	4	5	28	4	3	7	...	8	1	2	1	...	...	...	1	...	28		
Markfield	729	8	5	2	1	3	2	21	3	...	3	...	...	...	...	...	1	2	1	...	...	14		
Masham	2203	3	...	2	2	1	3	10	...	1	...	...	2	1	...	...	...	...	...	...	...	5		
Mountsorrel	2491	10	8	9	4	5	7	41	3	4	6	8	...	...	...	...	2	...	...	...	...	36		
Narborough	1839	2	...	4	1	2	9	1	...	1	...	...	...	...	...	...	1	...	...	...	...	3		
Newbold Verdon	1064	5	...	3	2	1	2	13	...	1	...	...	...	...	...	...	...	...	...	...	...	7		
North Kilworth	405	2	1	1	2	2	...	8	2	...	...	...	...	...	...	...	1	...	...	...	...	3		
Raby	2112	4	...	...	...	...	...	7	1	1	1	1	2	...	...	...	...	...	...	...	...	5		
Rearby	409	2	...	...	...	...	...	4	...	...	...	1	...	...	...	...	...	...	...	...	...	1		
Ratby	2006	1	2	3	2	...	1	9	...	1	2	...	2	1	...	...	...	...	...	...	...	7		
Sayote	872	6	1	3	2	2	1	15	4	1	2	...	3	...	...	...	...	...	...	...	...	11		
Sibby	2082	16	27	6	3	5	1	58	9	1	10	15	6	1	...	...	2	...	...	...	...	46		
Somerby	567	1	1	...	2	...	2	6	...	1	...	...	...	...	...	...	...	...	...	...	...	4		
Stanton under Barton	637	2	...	...	...	...	...	5	...	...	...	...	...	...	...	...	...	...	...	...	...	2		
Stoney Stanton	1529	10	3	7	4	5	5	32	6	6	7	5	5	2	1	...	...	...	...	...	...	22		
Swanington	2050	3	2	4	1	...	1	11	...	1	...	...	...	...	...	...	...	2	...	...	...	5		
Syston	2027	4	5	9	4	12	4	38	1	2	1	6	7	1	...	...	1	1	1	...	...	22		
Walton by Kinosta	485	2	2	...	2	3	...	9	1	...	...	...	...	...	...	...	...	...	...	...	...	6		
Whitston	1386	7	2	3	1	2	1	15	2	1	5	2	...	...	...	...	2	...	...	...	...	13		
Woodhouse	1458	5	3	2	1	...	3	14	2	...	...	...	...	...	...	...	...	...	...	...	...	6		
Wymondham	626	...	1	...	1	1	1	4	1	...	...	...	...	...	...	...	...	...	...	...	...	4		
Other villages	...	49	12	45	56	43	40	245	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
TOTALS	...	229	102	206	171	169	133	1091	70	27	108	8	115	115	29	13	7	6	19	7	6	10	8	567

The occupations of other persons notified are as follows:—Teachers 4, Travellers 4, Gardeners 4, Farmers and Dairywomen 4, Cattlemen 3, Barrowmen 3, Carpenters 3, Barbers 3, Tailors 3, Railway Employees 3, Bakers 2, Dyers 2, Bricklayers 2, Drummers 2, Butchers 2, Stokers 1, Glass Hauls 1, and Painters 1.



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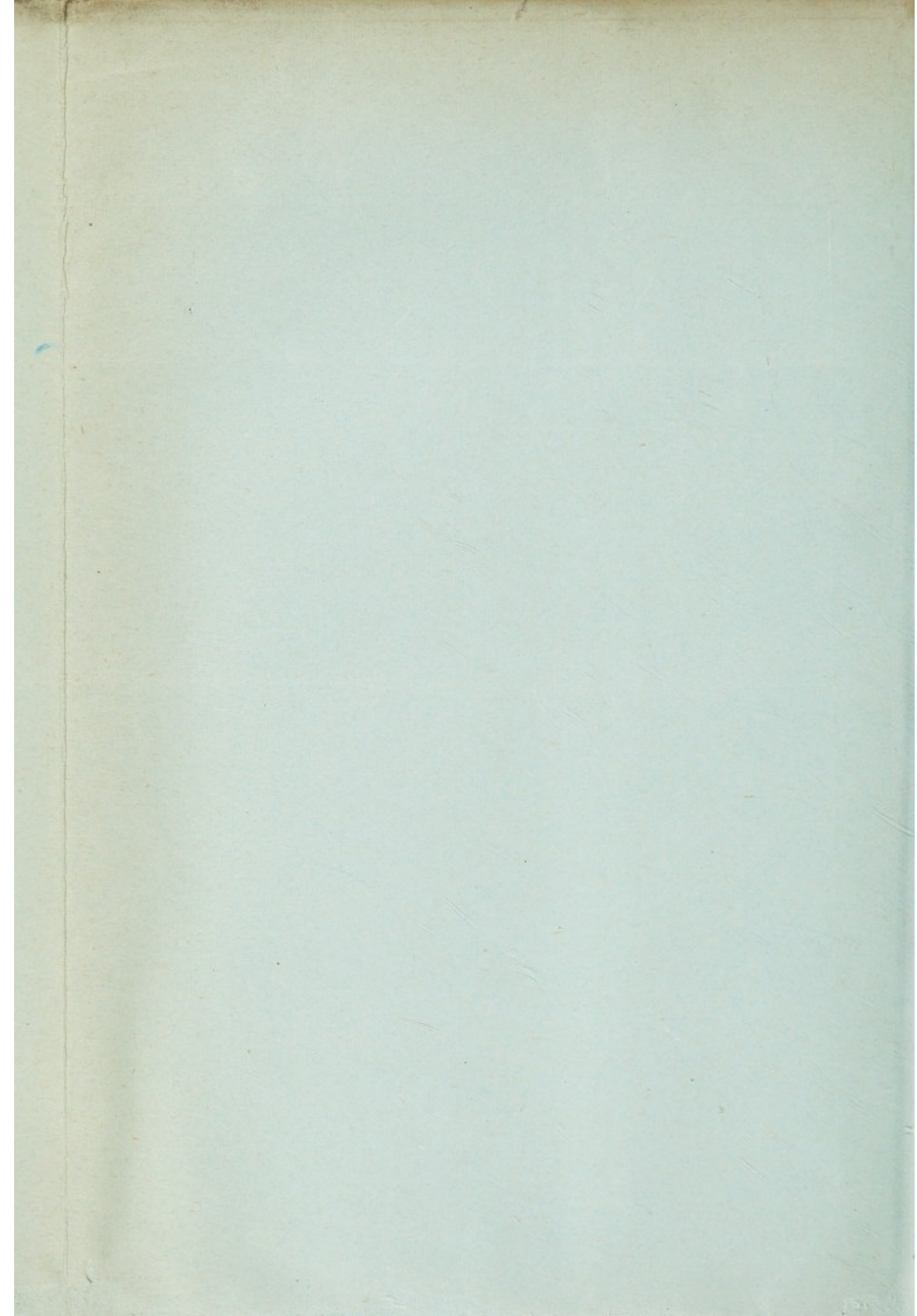
Leicestershire Insurance
Committee.

REPORT ON PULMONARY
TUBERCULOSIS

DURING 1912—19.

BY
THE CONSULTING MEDICAL ADVISER.

W. Thornley & Son, Printers, Bowdley Green Street, Leicester.



To the Leicestershire Insurance Committee.

REPORT ON PULMONARY TUBERCULOSIS.

In compliance with the request of the Leicestershire Insurance Committee, I beg to submit the following Report on the results of Sanatorium Benefit granted to Insured persons from the time the Act came into operation, in 1912, up to the end of the year 1919.

The method adopted by the Committee in dealing with applicants for Sanatorium Benefit is generally as follows :—The application of the Insured person, together with the medical certificate, is forwarded to the County Tuberculosis Medical Officer, who examines and reports on the applicant. These applications, together with the Tuberculosis Medical Officer's Report, are considered by the Special Sub-Committee and divided into two classes :—(a) those early cases who are suitable for Sanatorium treatment, and fairly early cases who with some treatment may become suitable for Sanatorium treatment, and (b) those who are too far advanced and are, therefore, granted Domiciliary treatment.

Originally the Insurance Committee, through the County Council, provided 24 beds in the Sanatorium, 8 at the Hinckley Residential Dispensary (Males), and 4 at the Coalville Residential Dispensary (Females). During the last year or two the County Council have very considerably extended the Sanatorium beds, and have thus been able to give a longer period of treatment to the Sanatorium patients, particularly the women and children.

Practically the whole of the information is given in tabular form :—

Table A. shows the present condition of Insured persons suffering from Pulmonary Tuberculosis who applied for treatment during the years 1912—1919.

Table B. is the same as Table A., but the figures are shown in percentages.

Table C. shows the length of life of Insured persons who applied for treatment.

Table D. shows the occupations of *all* cases of Phthisis notified so far as such were known in Urban Districts.

Table E. shows the occupations of *all* cases of Phthisis notified so far as such were known in the parishes in Rural Districts.

TABLE A.

This shows for each year,—

- (a) The grand total of cases applying for Sanatorium Benefit (in black ink.).
- (b) Those who received Sanatorium treatment (in red ink).
- (c) Those who did not receive Sanatorium Benefit (in green ink).
- (d) The present condition of patients alive when the inquiries were made.
- (e) The year of death of those deceased.
- (f) The number who had left the County.
- (g) The number which could not be traced.

Several explanations with reference to this Table are necessary. In the first place the number of patients stated as not receiving Sanatorium treatment includes patients who may have been admitted into a Dispensary for observation and not sent on to the Sanatorium, and also a few cases who were actually admitted to the Sanatorium but did not stay more than a few days, nor for a period long enough to constitute Sanatorium treatment.

Secondly the classification of the present condition of persons alive was made as clear and distinct as possible so that there could be very little chance of error being made by those carrying out the inquiries.

Thirdly, it was not always possible, by local inquiries, to ascertain exactly in what year a patient died. The doubtful cases are entered in Col. 14.

In making a comparison I have left out of consideration those patients who have left the County (Col. 17), and those who could not be traced (Col. 18), so that the total numbers (Col. 16) known to be alive or dead are the figures from which deductions are drawn.

TABLE B.

The percentages are taken on the totals in Col. 16. The figures in Cols. 17, 18, and 19 are left out of consideration, for the purposes of this table, the latter because the patients had not then completed their course of Sanatorium treatment.

TABLES A. AND B.

There were in all 1,408 persons applying for Sanatorium Benefit in the period under review. Of these 674 received Sanatorium treatment and 734 did not; being rather less than half who received Sanatorium in-patient treatment. Of the 1,272 (Col. 16) known to be alive, or dead, 653 were alive and 619 dead. Comparing the corresponding figures for each year separately, it will be seen that the figures for 1913 show that of the total known alive or dead, in round figures, 30 per cent. were alive and 70 per cent. dead, whilst in 1919, roughly, 80 per cent. were alive and 20 per cent. dead; and that the figures for the intervening years gradually change from one condition to the other. (The figures in 1912 are not taken into consideration as the total number of cases for that year was too small for a reliable comparison).

Taking the 603 (Col. 16) total who received Sanatorium treatment, 389 (or 65 per cent.) were alive, and 214 (or 35 per cent.) dead. The corresponding figures for 1913 show that 39 per cent. of those who received Sanatorium treatment in that year were alive in the

middle of 1920, and 61 per cent. were dead; whereas in 1919 96 per cent. were alive and 4 per cent. dead. The figures for the intervening years gradually changing from one condition to the other.

Of the 669 (Col. 16) who did not receive Sanatorium treatment, 264 (or 40 per cent.) were alive, and 405 (or 60 per cent.) dead. The figures for 1913 show that 25 per cent. are still alive and 75 per cent. dead; whereas in 1919 71 per cent. were alive and 29 per cent. dead; the corresponding figures for 1914-15-16 and 17 give generally much the same result as 1913, showing roughly that one-quarter of the persons not having Sanatorium treatment continued to survive for some years. These will include cases of the very chronic type, as well as some early cases who either did not accept Sanatorium treatment at all or did not stay sufficiently long in the institution to constitute Sanatorium treatment.

TABLE C.

In order to show the length of life of the persons who did and those who did not receive Sanatorium treatment, I have arranged the figures for the years 1913-16 in tabular form. This Table shows the number of persons known to be alive or dead, and of those who died the year in which death occurred.

I have not considered any figures since 1916, thus allowing a period of at least three years in which to obtain results.

Of the total cases 701 (Col. 3), 369 received Sanatorium treatment and 332 did not.

Of the 369 who received Sanatorium treatment in the four years 1913-16, 50 per cent. of them were alive in the middle of 1920.

Of the 332 who did not receive Sanatorium treatment 27 per cent. were alive in the middle of 1920.

The Table clearly shows with reference to the fatal cases how many years after application death occurred. Taking the persons who received Sanatorium treatment the greatest number of deaths were in the second and third year, whilst of those who did not receive Sanatorium treatment the greatest number was in the same year as application and a considerable number in the first year after application. Of those who died and who did not receive Sanatorium treatment (1) nearly one-half died in the same year as application, and (2) over 81 per cent. died within two years after application.

Further, the present condition of the persons alive (Col. 1, Table C.) total 184, shews that 121 (or 2 out of every 3), were in good health and working regularly, and a further 41 were in fair health and doing some work; thus 162 out of 184 could be said to be self-supporting. On the other hand, of the 89 who had not received institutional treatment 49 (or rather more than half) were in good health and working regularly, and 20 were in fair health and doing some work.

It must be remembered that the greater number of the years covered by this Report was the period of the War. It was not possible to carry out such efficient or sufficient treatment or supervision as could be reasonably expected in normal times, and it is acknowledged that the institutional treatment given would have been of a better standard had circumstances permitted.

CONCLUSIONS.

There are one or two points which stand out most prominently :—

- (1) For those persons where the application is made in a sufficiently early stage of the disease much permanent good can be done by Sanatorium treatment.
- (2) The second important fact is the very early death of a very large proportion of those who are not granted Sanatorium treatment, in other words, of those whose application for treatment has been too long delayed.

TABLES D. AND E.

These Tables are copies of those prepared for my Annual Report to the County Council. They show the notifications of all cases of Phthisis (Insured and Non-Insured) for the years 1914-19, together with the occupations so far as they were ascertained.

The information as to the occupations will, I feel sure, be of considerable interest to the members of the Insurance Committee. The influence of the various classes of occupation on the workers is clearly shown in these Tables. In questioning the prevalence of Phthisis in any particular district, due consideration must, therefore, be given to the nature and extent of the various occupations carried out in that District.

RECOMMENDATIONS.

The evidence in this Report is, I am of opinion sufficiently strong to warrant (a) further extended and improved Sanatorium treatment, and this is proposed to be carried out by the County Council; (b) some national steps being taken to ensure earlier application for Institutional treatment, and more preventive measures in factories and workshops. Failing any national steps, I would commend this question to the consideration of the various Workers' Unions, as, after all, it is up to them to assist in maintaining the good health of their members.

T. ROBINSON,

Consulting Medical Adviser.

FEBRUARY, 1921.

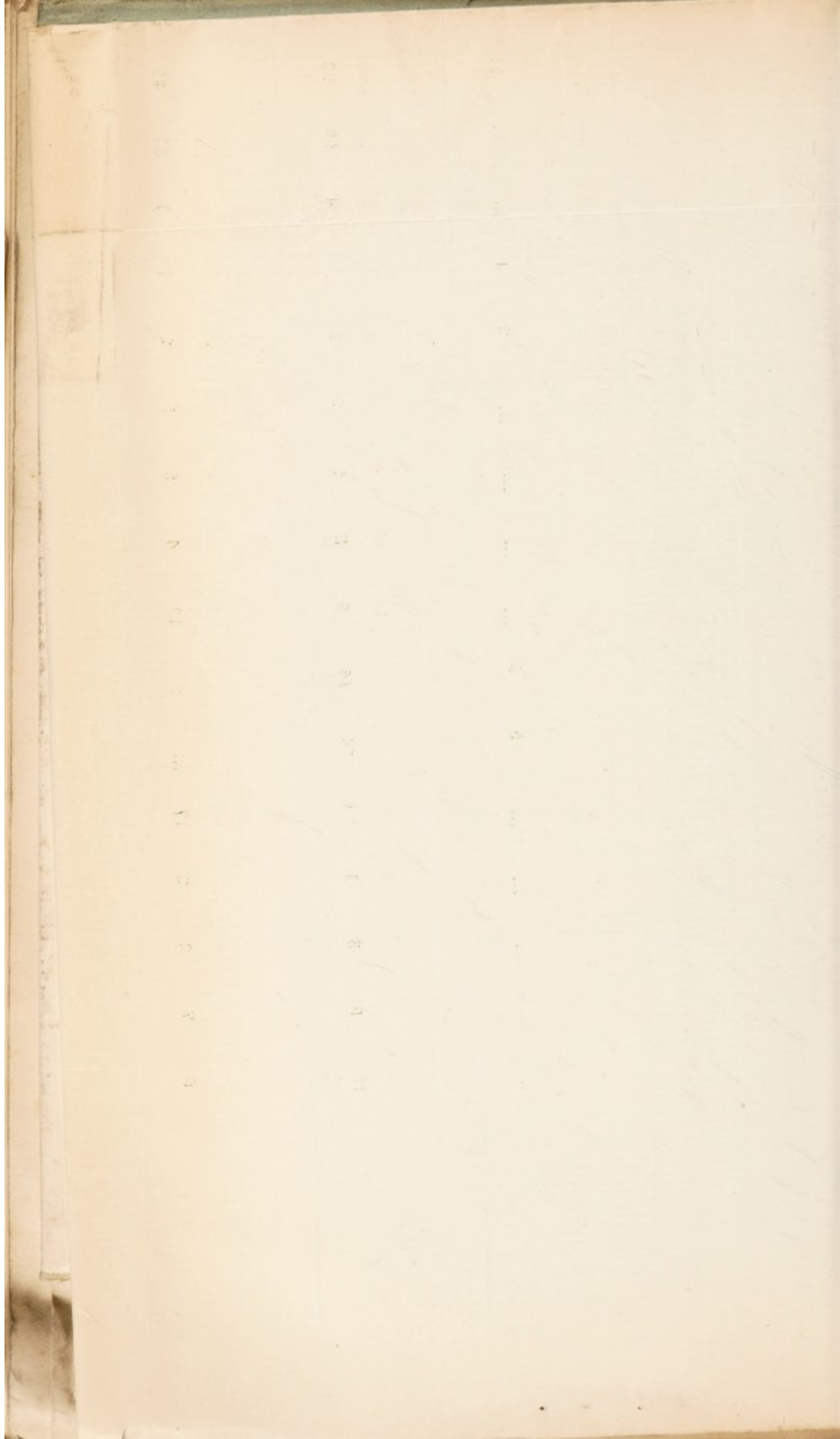
TABLE A.—Report shewing present condition (Aug. 1920) of Insured Persons suffering with Pulmonary Tuberculosis who have applied for treatment during the years 1912—1919.

YEAR OF APPLICATION FOR TREATMENT.	CASES ALIVE AND PRESENT CONDITION.					DECEASED AND YEAR OF DEATH.												Total known ALIVE or DEAD.	Left County Traces.	No In Sanatorium.	GRAND TOTAL.
	A1 (1)	A2 (2)	A3 (3)	A4 (4)	Total. (5)	1913 (6)	1914 (7)	1915 (8)	1916 (9)	1917 (10)	1918 (11)	1919 (12)	1920 (13)	? (14)	Total. (15)						
1912	1	1	1	...	3	6	3	...	...	1	...	2	1	...	13	16	1	1	...	18	
	1	1	1	...	3	1	...	...	...	1	...	...	...	...	2	5	...	...	...	5	
	...	...	...	...	...	5	3	...	...	...	...	2	1	...	11	11	1	1	...	13	
1913	35	15	8	4	62	37	27	20	18	6	8	7	1	6	130	192	8	13	...	213	
	22	9	5	3	39	3	13	12	15	4	6	5	1	2	61	100	5	3	...	108	
	13	6	3	1	23	34	14	8	3	2	2	2	...	4	69	92	3	10	...	105	
1914	41	21	6	2	70	...	33	23	15	13	8	10	3	3	108	178	13	15	...	206	
	35	14	4	...	53	...	4	5	11	8	3	8	2	2	43	96	9	8	...	113	
	6	7	2	2	17	...	29	18	4	5	5	2	1	1	65	82	4	7	...	93	
1915	52	19	4	2	77	...	...	27	16	16	19	10	2	...	90	167	10	12	...	189	
	39	12	1	1	53	...	...	2	7	16	14	7	1	...	41	94	...	...	...	107	
	13	7	3	1	24	...	...	25	9	6	5	3	1	...	49	73	2	7	...	82	
1916	41	11	10	2	64	...	...	...	27	29	22	11	...	11	100	164	4	7	...	175	
	25	6	7	1	39	...	...	...	2	11	14	9	...	4	40	79	2	2	...	83	
	16	5	3	1	25	...	...	...	25	18	8	2	...	7	60	85	2	5	...	92	
1917	47	30	14	1	92	...	...	...	...	25	40	15	1	3	84	176	7	11	...	194	
	34	17	8	...	59	...	...	...	...	...	9	5	1	...	15	74	4	4	...	82	
	13	13	6	1	33	...	...	...	...	25	31	10	...	3	69	102	3	7	...	112	
1918	75	40	22	2	139	...	...	...	...	...	23	29	7	3	62	201	5	8	1	215	
	40	17	13	...	70	...	...	...	...	...	1	4	3	1	9	79	4	1	1	85	
	35	23	9	2	69	...	...	...	...	...	22	25	4	2	53	122	1	7	...	130	
1919	69	39	30	8	146	...	...	...	...	...	...	19	13	...	32	178	2	3	15	198	
	36	21	14	2	73	...	...	...	...	...	...	...	3	...	3	76	...	...	15	91	
	33	18	16	6	73	...	...	...	...	...	...	19	10	...	29	102	2	3	...	107	
Total	361	176	95	21	653	...	...	...	...	...	...	...	...	...	619	1272	50	70	16	1408	
	242	97	53	7	389	...	...	...	...	...	...	...	...	...	214	603	32	23	16	674	
	129	79	42	14	264	...	...	...	...	...	...	...	...	...	405	669	18	47	...	734	

Black Ink ...
Red Ink ...
Green Ink ...

Total Cases.
Those who received Sanatorium Treatment.
Those who did not receive Sanatorium Treatment.

A 1—In good health and working regularly.
A 2—In fair health and doing some work.
A 3—Not at work but about.
A 4—Bed case.



YEAR OF APPLICATION FOR TREATMENT.	CASES ALIVE AND PRESENT CONDITION. (Percentages.)					DECEASED AND YEAR OF DEATH. (Percentages.)														Total known ALIVE or DEAD.	Left County Trace.	In Sanas- torium.	Grand Total.
	A ₁ (1)	A ₂ (2)	A ₃ (3)	A ₄ (4)	Total (5)	1913 (6)	1914 (7)	1915 (8)	1916 (9)	1917 (10)	1918 (11)	1919 (12)	1920 (13)	?	(14)	(15)	(16)	(17)	(18)	(19)	(20)		
1912	6.3	6.3	6.3	...	19	37.5	19	...	...	6.5	...	13	6.5	...	...	81	16	1	1	...	18		
	20	20	20	...	60	20	...	...	20	...	...	...	...	...	...	40	5	...	...	...	5		
	...	...	...	...	...	45.4	27.3	...	...	...	...	18.1	9	...	...	100	11	1	1	...	13		
1913	18	7.8	4.2	2.1	32.3	19.3	14	10.4	9.4	3.1	4.2	3.6	5	3.1	67.7	192	8	13	...	213			
	22	9	5	3	39	3	13	12	15	4	6	5	1	2	61	100	5	3	...	108			
	14.2	6.5	3.2	1.1	25	36.9	15.2	8.7	3.2	2.1	2.1	2.1	...	4.3	75	92	3	10	...	105			
1914	23	11.7	3.4	1.1	39.5	...	18.5	13	8.4	7.3	4.5	5.6	1.7	1.7	60.5	178	13	15	...	206			
	36.5	14.6	4.2	...	55.2	...	4.2	5.2	11.5	8.3	3.1	8.3	2.1	2.1	44.8	96	9	8	...	113			
	7.3	8.5	2.4	2.4	20.7	...	35.4	22	4.9	6.1	6.1	2.4	1.2	1.2	79.3	82	4	7	...	93			
1915	31.1	11.4	2.4	1.2	46	...	...	16.1	9.6	9.6	11.4	6	1.2	...	...	54	167	...	12	...	189		
	41.5	12.8	1.1	1.1	56.4	...	...	2.1	7.4	10.6	14.9	7.4	1.1	...	43.6	94	...	5	...	107			
	17.8	9.6	4.1	1.4	33	...	...	34.2	12.3	8.2	6.8	4.1	1.4	...	67	75	...	7	...	82			
1916	25	6.7	6.1	1.2	39	...	...	...	16.5	17.6	13.4	6.7	...	6.7	61	164	...	7	...	175			
	31.6	7.6	8.9	1.3	49.4	...	...	...	2.5	13.9	17.7	11.4	...	5.1	50.6	79	2	2	...	83			
	18.8	5.9	3.5	1.2	29.4	...	...	...	29.4	21.2	9.4	2.4	...	8.2	70.6	85	2	5	...	92			
1917	26.7	17	7.9	6	52.3	...	...	...	...	14.2	22.7	8.5	6	1.7	47.7	176	7	11	...	194			
	46	23	10.8	...	79.7	...	...	...	...	...	12.2	6.7	1.3	...	20.3	74	4	4	...	82			
	12.7	12.7	5.9	1	32.2	...	...	...	...	24.5	30.4	9.8	...	3	67.8	102	3	7	...	112			
1918	37.5	20	11	1	69.2	...	...	...	...	...	11.5	14.5	3.5	1.5	30.8	201	5	8	1	215			
	50.6	21.5	16.4	...	88.6	...	...	...	...	...	13	5.1	3.8	1.3	11.4	79	4	1	1	85			
	28.7	18.8	7.4	1.6	56.5	...	...	...	...	...	18	20.5	3.2	1.6	43.5	122	1	7	...	130			
1919	38.7	21.9	16.9	4.5	82	...	...	...	...	...	...	10.7	7.3	...	...	18	178	2	3	15	198		
	47.4	27.6	18.4	2.6	96	...	...	...	...	...	...	...	3.9	...	4	96	...	...	15	91			
	32.3	17.6	15.6	5.8	71.5	...	...	...	...	...	...	18.6	9.8	...	...	28.5	102	2	3	...	107		
Total	28.4	13.7	7.4	1.6	51.3	...	...	...	...	...	...	...	...	...	...	48.7	1272	50	70	16	1408		
	38.5	16.1	8.8	1.2	64.5	...	...	...	...	...	...	...	...	...	...	35.5	603	32	23	16	674		
	19.3	11.8	6.3	2.1	39.4	...	...	...	...	...	...	...	...	...	...	60.6	669	18	47	...	734		
Black Ink Red Ink Green Ink	...	...	...	...	Total Cases. Those who received Sanatorium Treatment. Those who did not receive Sanatorium Treatment.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		

Black Ink ... Total Cases.
 Red Ink ... Those who received Sanatorium Treatment.
 Green Ink ... Those who did not receive Sanatorium Treatment.
 A 1—In good health and working regularly.
 A 2—In fair health, doing some work.
 A 3—Not at work but about.
 A 4—Bed cases.

12 1.1 2.4 3.4 30.3 ... 29.4 2.3 4.5 0.1 0.1 3.4 1.5 1.3 13.8 2.5

14.2 4.0 0.0 1.1 0.2 0.0 1.3 0.1 3.3 2.1 3.1 ... 4.0 1.0

15.2 1.1 0.0 1.1 0.2 0.0 3.1 0.1 ... 1.1 1.1 1.0 1.1

TABLE C.—Table shewing length of life of Insured Persons who applied for Treatment.

YEAR OF APPLICATION FOR TREATMENT.	NUMBER OF APPLICANTS.			WHICH YEAR AFTER APPLICATION FOR TREATMENT DEATH OCCURRED.									
	Now Alive (1)	Now Dead. (2)	Total known. (3)	Same Year. (4)	1st. (5)	2nd. (6)	3rd. (7)	4th. (8)	5th. (9)	6th. (10)	7th. (11)	? (12)	TOTAL. (13)
1913	62	130	192	37	27	20	18	6	8	7	1	6	130
	39	61	100	3	13	12	15	4	6	5	1	2	61
	23	69	92	34	14	8	3	2	2	2	...	4	69
1914	70	108	178	33	23	15	13	8	10	3	...	3	108
	53	43	96	4	5	11	8	3	8	2	...	2	43
	17	65	82	29	18	4	5	5	2	1	...	1	65
1915	77	90	167	27	16	16	19	10	2	...	...	...	90
	53	41	94	2	7	10	14	7	1	...	...	...	41
	24	49	73	25	9	6	5	3	1	...	...	...	49
1916	64	100	164	27	29	22	11	...	...	...	...	11	100
	39	40	79	2	11	14	9	...	...	...	...	4	40
	25	60	85	25	18	8	2	...	...	...	...	7	60
TOTAL 1913—16	273	428	701	124	95	73	61	24	20	10	1	20	428
	184	185	369	11	36	47	46	14	15	7	1	8	185
	89	243	332	113	59	26	15	10	5	3	...	12	243
Percentages of Deaths of those who Died		of those	...	29.0	22.2	17.1	14.3	5.6	4.7	2.3	2.3	4.7	...
				5.9	19.5	25.4	24.9	7.6	8.1	3.8	5.4	4.3	...
				46.5	24.3	10.7	6.2	4.1	2.1	1.2	...	4.9	...
Percentages of Deaths of all Applicants				17.7	13.6	10.4	8.7	3.4	2.9	1.4	1.4	2.9	61.1
				3.0	9.8	12.7	12.5	3.8	4.1	1.9	2.7	2.1	50.1
				34.0	17.7	7.8	4.5	3.0	1.5	.9	...	3.6	73.2

Black Ink ... Total Cases.
 Red Ink ... Those who received Sanatorium Treatment.
 Green Ink ... Those who did not receive Sanatorium Treatment.

Table D.—Distribution of Notifications of Tuberculosis of the Lungs in the Urban Districts during the last Six Years and the occupations, where known.

URBAN DISTRICTS.	Popula- tion. 1919.	NO. OF NOTIFICATIONS OF TUBERCULOSIS OF LUNGS.							Quarrymen.	Domestic Duties.	Hosiery Workers.	School Children.	Shoe Operatives.	Miners.	Labourers.	Clerks.	Mechanics.	Engineers.	Railway Workers.	Corset Hands.	Iron Workers.	Bakers.	Carpenters.	Dyers.	Ex-Soldiers.	No Occupation.	Gardeners.	Shopkeepers.	Total Known Occupations.
		1914	1915	1916	1917	1918	1919	Total for 6 Years.																					
		1914	1915	1916	1917	1918	1919	Total for 6 Years.																					
Ashby-de-la-Zouch ...	4348	12	10	8	2	6	4	42	...	10	...	9	...	1	...	3	1	...	...	...	...	...	1	...	...	1	...	...	26
Ashby Woulds ..	2968	...	9	10	12	2	4	37	...	5	...	19	1	5	...	...	...	...	1	...	...	1	...	...	...	...	...	1	33
Coalville ...	21118	20	20	14	24	34	38	150	1	18	...	23	1	33	4	1	1	3	2	...	3	1	1	...	1	5	...	2	100
Hinckley ...	15370	40	33	28	24	20	46	191	...	20	62	12	27	...	1	4	4	2	...	1	1	...	1	5	4	4	1	12	161
Loughborough ..	24675	27	31	40	46	64	48	236	...	33	41	13	3	...	4	10	4	13	3	1	6	...	1	1	4	7	1	1	146
Market Harborough ...	8608	17	9	17	23	6	10	82	...	8	8	5	2	...	2	6	...	1	3	10	...	...	...	...	...	3	2	2	52
Melton Mowbray ..	8599	34	17	18	20	19	19	127	...	20	14	23	6	...	6	4	...	1	8	1	4	3	2	...	8	3	2	8	113
Oadby... ..	2903	4	7	13	6	...	5	35	...	2	3	3	1	...	1	1	...	...	...	...	...	...	...	...	1	...	1	2	15
Quorndon ...	2428	5	7	3	6	2	1	24	1	2	6	4	1	...	...	1	...	...	1	...	...	...	...	...	1	...	1	...	18
Shepshed ...	5251	19	10	9	21	15	17	91	4	11	19	5	9	3	...	1	...	...	2	...	...	...	...	...	1	3	...	...	58
Thurmaston ...	2025	2	2	1	1	4	2	12	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	2
Wigston ...	8260	17	10	23	16	4	9	79	...	9	11	8	8	3	1	1	...	...	4	...	...	2	...	...	2	3	...	2	54
Total ...	106553	197	165	184	201	176	203	1126	6	138	164	124	59	45	20	32	10	21	24	13	14	7	6	6	22	29	8	30	778

The occupations of other persons notified are as follows:—Dressmakers 5, Vanmen and Grooms 5, Farm Labourers 5, Blacksmiths 5, Tailors 5, Soap Packers 4, Teachers 4, Greengrocers 3, Furnacemen 3, Binders 3, Post Office Workers 3, Butchers 3, Barbers 2, Travellet 2, Chemists 2, Policemen 2, Box Makers 2, Lace Makers 2, Basket Workers 2, Warehousemen 1, Laundry Hand 1, Painter 1, Music Hall Artiste 1, Stonemason 1, and Rag and Bone Merchant 1.

Table E.—Distribution of Notifications of Tuberculosis of the Lungs in the RURAL AREAS during the last Six Years and the occupations, where known.

PARISH.	Popula- tion 1911 Census.	NO. OF NOTIFICATIONS OF TUBERCULOSIS OF LUNGS.						School Children.	Labourers.	Timber Trade.	Grass and Cattle.	Stone Operators.	Domestic Purse.	Quarriesmen.	Blacksmiths.	Iron Workers.	Chicks.	Miners.	Shopkeepers.	Habitual Web Hands.	No Occupation.	No-Children.	Total.	
		1914 1915 1916 1917 1918 1919																						
		1914	1915	1916	1917	1918	1919																	
Ainstrey	2976	14	4	5	1	1	2	27	6	1	1	14	1	4	1	1	...	...	...	...	...	...	...	22
Arnsby	234	...	1	2	...	...	1	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5
Asfordby	1255	3	1	1	2	4	2	13	2	1	1	...	6	...	1	...	...	...	...	...	...	...	...	11
Bagworth	1419	...	1	...	...	1	1	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5
Barrow-on-Sour	2481	5	5	4	2	4	5	25	1	4	8	1	2	1	...	...	...	...	...	...	...	...	...	17
Barwell	2998	8	3	6	4	3	2	26	2	1	1	15	...	...	...	...	...	...	...	...	...	...	...	19
Batby	1959	2	3	6	5	3	...	19	1	5	...	8	...	...	...	...	...	...	...	...	...	...	...	15
Bottesford	1174	1	1	4	2	3	2	14	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	21
Broughton Ashby	1239	...	...	1	1	3	...	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Burbage	2412	7	10	12	4	2	5	40	2	1	15	4	5	1	...	1	...	...	...	...	...	...	...	22
Cable Dunnington	2529	5	2	1	2	...	3	13	2	1	3	...	4	...	...	...	...	...	...	...	...	...	...	10
Charneton	735	1	2	2	1	...	1	7	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6
Cotby	1560	4	4	3	3	...	...	14	1	1	...	4	...	...	...	...	...	...	...	...	...	...	...	6
Donisthorpe	1450	4	2	1	...	...	1	13	1	3	...	...	...	...	...	...	...	...	...	...	...	...	...	8
Croft	742	2	3	1	2	1	1	10	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4
Cropton	210	1	...	...	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4
Devedale	1118	2	2	1	...	...	1	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4
Donisthorpe	2444	5	...	2	2	3	1	14	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	7
Duxton Bassett	482	1	...	2	1	...	1	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Earl Shilton	4199	19	11	11	8	26	2	77	4	8	17	2	1	2	...	1	...	...	...	...	...	...	...	38
Enderby	2667	6	6	6	6	1	...	25	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	15
Fleckway	1825	1	...	4	1	2	1	9	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4
Gilmorton	464	1	1	1	1	1	...	4	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Glenfield	1105	3	1	1	2	...	1	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Glen Magna	776	3	1	...	...	...	...	4	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Grobby	910	2	1	1	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Halborn	1209	1	4	4	...	4	3	16	1	3	1	2	...	...	...	...	...	...	...	...	...	...	...	7
Higham Hill	614	2	1	2	1	...	1	8	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Humberstone	538	2	...	3	1	2	2	10	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Hunsley	610	...	1	2	...	1	...	4	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Ibstock	4946	4	6	1	6	1	...	18	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	15
Kegworth	2220	1	1	3	4	3	6	18	...	1	3	...	5	1	...	1	...	...	...	...	...	...	...	11
Kilworth	1807	1	4	4	...	...	...	9	1	1	3	...	...	...	...	2	...	...	...	...	...	...	...	7
Lang Whiston	571	1	...	1	1	1	4	9	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Lutterworth	1896	7	5	6	11	4	5	38	4	3	7	...	8	1	2	1	...	...	...	...	...	...	...	28
Markfield	729	8	5	2	1	3	2	21	3	...	3	...	...	...	...	...	...	...	...	...	...	...	...	14
Mecham	2253	3	...	2	2	1	2	10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5
Mountsorrel	2491	10	8	9	4	3	7	41	5	4	6	8	...	...	...	...	...	...	...	...	...	...	...	36
Narborough	1859	2	...	4	1	2	9	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Newbold Verdon	1064	5	...	2	2	1	2	13	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	7
North Kilworth	405	1	1	2	2	...	...	6	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Ratby	2112	4	...	...	...	...	...	7	1	1	...	1	...	...	...	...	...	...	...	...	...	...	...	5
Rearby	409	2	...	...	...	...	...	1	1	4	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Ratby	2086	1	2	3	2	...	1	9	1	2	...	2	1	...	...	...	...	...	...	...	...	...	...	7
Sapote	872	6	1	3	2	2	1	13	4	1	2	...	...	...	...	...	...	...	...	...	...	...	...	11
Silby	2082	16	27	6	3	5	1	58	9	1	10	...	15	6	1	...	...	...	...	...	...	...	...	46
Somerby	567	1	1	...	2	...	2	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4
Stanton under Bardon	657	2	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Stony Stanton	1339	10	2	7	4	3	5	32	6	...	6	7	5	...	2	1	...	...	...	...	...	...	...	22
Swanington	2056	3	2	4	1	...	1	11	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Syston	2087	4	5	9	4	12	4	38	1	...	2	1	6	7	...	1	...	...	...	...	...	...	...	22
Walton by Kinosta	483	2	2	...	2	3	...	9	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6
Whetstone	1386	7	2	2	1	2	1	15	2	1	5	...	3	1	...	...	...	...	...	...	...	...	...	13
Woodhouse	1458	5	3	2	1	...	3	14	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6
Wymondham	636	...	1	1	1	...	...	4	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4
Other villages	...	49	12	45	56	43	49	245	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTALS	...	239	162	206	171	160	133	1091	79	27	108	8	115	113	29	13	7	6	19	7	6	10	8	547

The occupations of other persons notified are as follows:—Teachers 4, Travellers 4, Gardeners 4, Farmers and Dairywomen 4, Constables 3, Barman 3, Carpenters 2, Barbers 3, Tailors 3, Railway Employers 3, Bakers 3, Dyers 2, Bricklayers 2, Dressmakers 2, Butchers 2, Siders 1, Glove Hands 1, and Painters 1.

