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ANNUAL REPORT

OF THE

Medical Officer of Health

OF THE

ST. ALBANS

URBAN SANITARY DISTRICT

FOR THE YEAR 1905,

BY

JOHN MORISON,

M.D., D.P.H., F.G.S., &c.,

Medical Officer of Health,

&c., &c.

ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
FOR THE
St. Albans Urban Sanitary District
For the Year 1905.

TO THE MAYOR AND CORPORATION OF THE
CITY OF ST. ALBAN.

GENTLEMEN,—

I have the honour to present to you my Annual Report for the Year 1905. This is the Sixteenth time I have had the privilege of doing so.

The mean temperature for the year was 49.41° , slightly lower than in 1904, but still considerably above the average of recent years. The first quarter of the year was very mild, the second rather warm, the third about the average temperature with no very warm weather, and the fourth quarter on the whole unusually cold. July was much the warmest month, and the coldest was January. The highest temperature was only 74.2° on July 9th, and the lowest 27.6° on January 16th. The rainfall for the year was 24.4 inches, which is considerably below the average. The wettest months were March, June, and November, and there was a good deal of rain also in April, and August. The driest months were May, and February, but January, July, and December were also very dry. The heaviest rainfall on any one day was on August 28th, when 1.04 inches of rain were registered. The rainfall was rather deficient in the spring, over the average in summer, and considerably under the average in autumn and winter. On the whole we had a mild dry winter, and a cool rather rainy summer.

During the year 1905 there were 228 deaths registered within the City of St. Alban, 113 of males and 115 of females. There were 47 deaths in the Abbey district, 88 in St. Peter's, 38 in St. Michael's, 4 in Sandridge, 8 in the St. Albans and Mid Herts Hospital, and 43 in the Union Workhouse.

Taking the population of the City, as estimated to the middle of 1905, to be 17,800, we find the total death rate is 12.8 per thousand. But to find the true death rate, we must take into account the fact that 18 of the 43 deaths which occurred in the Workhouse, and 3 of the 8 deaths in the Hospital, were of persons who did not belong to our City. In addition to this there was a gentleman resident in Bedford, who was run over and killed on the Midland Railway, as it passes through St. Albans. Deducting these 22 cases, we have 206 as the corrected number of deaths and 11.5 as the true death rate.

This is a considerable improvement on the previous year. In 1904 the total number of deaths was 247, and the gross death rate 13.6; the corrected number of deaths was 224, and the true death rate 12.8. In 1903, however, the total number of deaths was 199, and the gross death rate 11.6; the corrected number of deaths 177, and the true death rate 10.4. The mean total death rate for the previous ten years was 14.1, and the corrected death rate 12.5. We are well under the average for Rural England and Wales, which was 15.3 in 1904.

There were 23 deaths in January, 19 in February, 24 in March, 15 in April, 19 in May, 14 in June, 11 in July, 12 in August, 22 in September, 15 in October, 27 in November, and 27 in December. The healthiest months were therefore July and August, while November and December had the highest mortality.

Of the total deaths 27 were of infants under 1 year of age, giving us an infantile death rate of 1.4. In 1904, the deaths amongst infants were 39, and the infantile death rate was 2.2. The number of deaths of children between 1 and 5 was 11, and of children from 5 to 15, 11. In 1904, these numbers were respectively 10 and 7. From 15 to 25, the deaths were 7, and between 25 and 65, 79; while in 1904 for these ages the deaths were respectively 11 and 64. There were 71 deaths of persons of 65 and upwards, as against 93 in the previous year. There was therefore a decrease in the number of deaths amongst infants and old people, and an increase in the deaths of older children and persons of middle age.

There were 12 deaths from Pneumonia, against 8 in 1904; 20 from Bronchitis and other diseases of the Respiratory System, against 28 in the previous year; 48 from diseases of the Heart, against 50; and 29 from diseases of the Nervous System, against 29 in the year immediately preceding. There were 20 deaths from Phthisis and 13 from other Tubercular maladies, against 23 from Phthisis and 10 from other Tubercular affections in 1904. There were 31 deaths from Cancer and Malignant disease, as compared with 23 in the former year.

There was 1 death registered from Diphtheria, but there was another death certified as due to Bronchitis, which was undoubtedly also a case of Diphtheria. There were 2 deaths from Infantile Diarrhoea, and 2 deaths from Measles. The Zymotic death rate was therefore .26. In 1904 there were 16 deaths from Infantile Diarrhoea, and none from any other Zymotic disease, and the Zymotic death rate was .92. There was therefore an increase in the number of deaths due to Pneumonia and Cancer; and a decrease in the deaths from Bronchitis, diseases of the Heart, and Zymotic diseases. There was 1 death attributed directly to Alcoholism. I trust that something more will soon be done towards lessening the excessive number of Public Houses in our City.

There were 5 deaths due to Accident or Violence during the year. In the month of May a man aged 51, residing in Bedford, died from "injuries received from being struck by a locomotive" on the Midland Railway. In July a young man of 26, a plate-layer, was "accidentally knocked down on the line by a passing express train and died from injuries thus received"; this occurred on the Midland Railway. In September a boy aged 3 died in the Hospital from "burns accidentally received whilst playing with matches." In October a boy of 4 died of "burns accidentally received whilst playing with fire" And in December a young woman 20 years old died in the Hospital from "burns accidentally caused."

On the whole our record for last year was satisfactory, and a decided improvement on the figures for 1904. There was no serious epidemic of any kind. The most unfavourable points are the continued large number of deaths from Tubercle, and the increase in the deaths from Cancer. The climatic conditions were certainly favourable, as we had a mild winter, a warm spring, and a fairly warm summer with no excessive heat.

There were 11 Inquests held during the year: One in January on a man of 64, who died from an "Aortic Aneurism rupturing into the Lungs"; a second in January on a woman of 38, who died of "Pneumonia"; a third also in January on an old woman of 77, who died of "Senile Degeneration" and "Syncope"; a fourth in February on a woman aged 60, who died from "Atheroma and Rupture of the Aortic Valves"; another in June on a man of 31, who died of "Alcoholism and Pneumonia"; another in September on an old woman of 74, who died suddenly in the Cathedral from "Heart Disease" and "Syncope"; and the other five on the cases of death from Accident or Violence mentioned above.

There were two uncertified deaths: one of a man 41 years of age, who died in an "Epileptic Fit"; and the other of a woman aged 70, who is stated to have died of "Dropsy and Heart Failure"

The death rate in the different divisions of the City were as follows:—

Abbey District	...	...	12.4 per thousand
St. Peter's District	...	...	10.8 "
St. Michael's District	...	...	14.6 "
Sandridge District	...	...	5.7 "

The low death rate of Sandridge is remarkable, as in 1904 it was 14.7.

During the year which has just elapsed, there were 371 births, 183 of males and 188 of females. The birth rate for the year was therefore 20.8. It is anything but satisfactory to find that our birth rate is so low, and that year after year it continues diminishing. It is the same story in most other parts of the Country more or less, though we have to confess that the decline is greater in St. Albans than in the majority of other places. The birth rate in 1904 was 21.4, and in 1903, 22.3. And 10 years ago in 1895 the birth rate was 25.6.

Of the births, 17 were illegitimate, and the proportion of illegitimate to legitimate births was therefore 45.8, while in 1904 the proportion was 32. This seems to show that the decline in our birth rate is due to an increasing diminution in the number of children born in wedlock, especially amongst the fairly well to do classes. This is a very serious matter for our Country.

There were 91 deaths in the Abbey District, 167 in St. Peter's, 82 in St. Michael's, 22 in Sandridge, and 9 in the Union Workhouse.

The birth rates for the different divisions of the City were as follows:—

Abbey District	...	...	19.9 per thousand
St. Peter's District	...	...	16.8 "
St. Michael's District	...	...	26.7 "
Sandridge District	...	...	20.9 "

The rate of mortality of children under 1 year of age per thousand registered births is 72.7, last year it was 104.1. This is an improvement, due in part at least to the comparative rarity of Infantile Diarrhoea last Summer. Seeing that our birth rate is so low, it behoves us to do all we can to preserve the infants which are born, in life and in health. I trust the Cards which we had printed last summer giving instructions for the feeding and management of young children, are doing some little good.

Infectious Diseases.

During the year 1905, 65 cases of Infectious Diseases were notified to me, namely: 18 cases of Scarlet Fever, 11 cases of Diphtheria, including 1 so-called case of "Membranous Laryngitis," which on investigation I found to be Diphtheria, 2 of Enteric Fever, 4 of Erysipelas, 26 of Chicken Pox, and 2 of Tuberculosis. Of the Scarlet Fever cases 15 were removed to the Sisters' Hospital. In 1904 there were 69 cases in all notified, including 32 cases of Scarlet Fever (19 of which were treated in the Sisters' Hospital) and 7 cases of Diphtheria.

Once again I would call attention to the fact that in many of the notifications which I receive, the Doctor who notifies omits to insert the age of the patient. This gives me a good deal of unnecessary trouble; and I should esteem it a great favour if Medical Practitioners, when filling up notifications would always be careful to state the ages of the patients.

Scarlet Fever.

A certain number of cases of Scarlet Fever occurred at various times during the year, but at no time was there anything like an epidemic, and the disease was generally of a very mild type. There were 5 cases in February, 1 in May, 1 in July, 3 in October, 6 in November, and 2 in December, 18 in all. There were 2 cases in the Abbey District, 8 in St. Peter's, 7 in St. Michael's, and 1 in Sandridge. No deaths occurred from this disease.

Diphtheria.

There were 11 cases of Diphtheria notified, which occurred at different times of the year, and mostly in widely separated localities. In only one instance were there 2 cases of the disease in one house or in the same street. There were 2 cases in February, 1 in March, 1 in April, 2 in July, 2 in October, and 3 in November. There were 2 cases in the Abbey District, 6 in St. Peter's, and 3 in St. Michael's. There was 1 death registered from this disease, and besides this, in the case of a male child of 2 years, whose death was registered as being due to "Acute Bronchitis and Laryngitis," there is practically no doubt that the true cause of death was Diphtheria.

Enteric Fever.

Two cases of Enteric or Typhoid Fever were notified during the year, one in September which was in all probability an imported case, and the other in October. In the last instance some insanitary conditions of the premises were discovered, which have since been remedied. Both these cases occurred in the Abbey District, and both recovered.

Epidemic Diarrhoea.

There was comparatively little Epidemic or Summer Diarrhoea last summer, and only 2 deaths were recorded. These 2 deaths, 1 of which was that of an illegitimate child, occurred in August and September, 1 in St. Peter's District, in Alexandra Road, and the other in St. Michael's, in Harley Street. The low mortality from this disease was no doubt mainly due to the absence of very hot weather last summer. The Epidemic Diarrhoea of young children is caused by a micro-organism, which flourishes in premises more or less dirty and insanitary, and requires for its development weather warm enough to raise the temperature of the soil to a certain height. But even in hot weather this disease can be entirely prevented by careful attention to cleanliness and sanitation, and by exercising proper care with regard to the diet and management of the children. It is exceedingly important that all the milk consumed by infants which are brought up by hand should be boiled or sterilised, so as to destroy any morbid organism which may find its way into it; and all feeding bottles, tubes, and utensils in which the milk is stored, should be frequently washed and rinsed with boiling water, and kept most scrupulously clean. Feeding-bottles with long tubes should never be used, as it is almost impossible to keep them sufficiently clean. Short india-rubber nipples fitting on to the neck of the bottle are infinitely preferable. In connection with this subject, I may mention that I have separated the births and the deaths of infants under 1 year into 2 portions, the one section consisting of those occurring in the very poorest localities in the City, such as Sopwell Lane, Watson's Row, Christopher Yard, &c., and the other section comprising the births and deaths of infants in better class neighbourhoods, and I find that the relative proportions between births and infantile deaths in these two divisions is markedly different. In the poorer quarters the proportions of deaths of infants under 12 months per thousand registered births is 111, while in the rest of the town it is only 60.5, being little more than half. This disproportion is no doubt to some extent due to improper feeding and faulty management.

Measles and Whooping Cough.

There was an Epidemic of Measles in the beginning of the year and 2 deaths are attributed to this cause. There have also been a few cases of Whooping Cough. Once more I would renew my recommendation of former years, that Measles at any rate should be made a Notifiable Disease. It is very important that your Medical Officer should be informed as soon as possible of the earliest cases of an epidemic of Measles, in order that he may take appropriate measures to prevent the disease from spreading. For Measles is not only attended by considerable mortality amongst

young children, but often prepares the way for the advent of Tubercle or other grave constitutional disease. In view of the expense attending the notification of every case I would suggest that only the first case in a household be notified. In connection with this subject I would mention that I am strongly of opinion that no child under 5 or 6 years old should be sent to the Public Elementary Schools. These very young children learn practically nothing at school, and are specially liable to receive and spread infection. Besides this, I cannot but think that lasting evil often results from such premature exercise of the brain. What little children require is to run about and develop their bodies. The development of the brain should come later.

Influenza.

A certain number of cases of Influenza occurred in the early part of the year, but they were mostly of a mild type. There was no serious epidemic of this disease and no deaths.

Cancer.

There were 31 deaths from Cancer and Malignant Disease, as against 23 in 1904, 18 in 1903, and 14 in 1902. The death rate from Cancer was therefore 1.7, as against 1.3 in 1904. There appears to be a real increase in the mortality from Cancer, and I am sorry to say I can suggest no remedy. I trust however, that at no distant period its causation may be better known, and that Science may be able to furnish us with a means of checking the ravages of this dreadful disease.

Tuberculosis.

I am sorry to have to report that there was no diminution in the number of deaths from Tubercle during the past year. There were 20 deaths from Phthisis, and 13 from other Tubercular diseases; giving us a death rate from Phthisis 1.1, and for Tubercle 1.85. In 1904 the deaths from Phthisis were 23, and from other Tubercular maladies 10; with a death rate from Phthisis of 1.3, and from Tubercle 1.89. In 1903 there were 11 deaths from Phthisis, and 9 from other Tubercular affections; while the death rate for Phthisis and Tubercle were respectively .6 and 1.1.

I have had only 4 notifications of Tubercle during the past year. This is but a small proportion out of the cases which must have occurred, as shown by the number of deaths. Of the total deaths from Phthisis, 20 in number, 16 occurred in working-class houses and the other 4 in the Union Workhouse; and 9 out of the 16 took place in the very poorest localities, such as Christopher Yard, Sopwell Lane, Watson's Row, College Place, &c., these localities having a population not more than one-fifth of the total

population of the City. And the deaths from other Tubercular diseases were also entirely amongst the working classes. I would therefore once more, as a personal favour to myself, earnestly request all Medical Men practising in St. Albans, to notify to me any case of Pulmonary Tuberculosis occurring among their poorer patients. For it is of the utmost importance that your Medical Officer should be informed of cases of Phthisis, which may occur in cottages and small houses where the population is most densely packed, that he may be able officially to impress upon the patients and friends the necessity of using all possible means of preventing the spread of the disease. The Public in general do not seem yet sufficiently to realise that Pulmonary Consumption is an infectious disease, and that special precautions are required to prevent it from spreading. Not the least important of these precautions is the thorough disinfection of the premises and bedding after the removal or death of a Consumptive patient. No person who suffers from Phthisis should sleep in the same room, and still less in the same bed as a healthy person. All expectoration should be carefully disinfected, and spitting in streets or public places should be especially avoided. The Sanitary Inspector has some leaflets for distribution, entitled "Facts with regard to Tuberculosis or Pulmonary Consumption, and Precautions to be taken to prevent the spread of the Disease," and he will give one of those to any person who applies.

It is a matter for serious thought when we consider that Cancer and Tubercle were responsible jointly for two out of every seven of the deaths which occurred in St. Albans during 1905.

The Sisters' Hospital.

In the Sisters' Hospital for Infectious Disease there have been 53 patients admitted during the past year, all suffering from Scarlet Fever. There were 15 cases from the St. Albans Urban District, 37 from St. Albans Rural, and 1 from Harpenden Urban District. In addition to these there were 13 patients remaining under treatment, who were admitted in 1904, so that altogether 66 cases were treated during the year. Of the admissions, 1 was of an infant under 1 year of age, 16 of children between 1 and 5, 25 of children from 5 to 15, 8 of persons from 15 to 25, and 3 patients were over 25.

I understand it will not be long now before an arrangement is finally come to between the different Sanitary Authorities concerned, for the erection of some additional blocks for the reception of cases of Diphtheria and Enteric Fever. Hospital accommodation for Diphtheria at any rate is urgently needed in this locality. I trust that in the spring or early summer we may be ready to commence building operations, so that the additional wards may be open for use before next winter. As I said in my last report we ought to have 3 small blocks added, with male and female wards in each block, one for the reception of Diphtheria, another for Enteric Fever, and a third to be used as an observation block for the admission of doubtful cases.

Small-Pox Hospital.

I also trust that you, in association with the St. Albans Rural District and Harpenden, will decide this year to build a Small-Pox Hospital on the ground which was recently purchased by the Corporation for this purpose at Redbourn. I look upon a Small-Pox Hospital for these districts as an absolute necessity. We are so near London, and so many vagrants pass through our midst, that we may get a case of Small-Pox at any moment, which, if not promptly removed, and properly isolated, may prove the starting point of a most serious epidemic. We have good reason to remember how costly and how disastrous such an epidemic may be. Therefore I trust it will not be long before proper provision is made for the reception of Small-Pox cases.

Water Supply.

During the past year, in spite of the deficient rainfall, we have had as usual a plentiful supply of pure and wholesome water. As our water is derived from the chalk, it is exceedingly hard, and I think it would be a benefit to the public if the Water Company would adopt some means of softening it, and so rendering it more suitable for domestic use. This is done with advantage in some other towns.

Drainage and Sewerage.

I am pleased to report that the drainage of the City is carried out in a thorough and efficient manner. Practically all the W.C.'s are connected with the sewers. There are a few pail-closets in some of the older parts of the town, but we are endeavouring gradually to do away with them.

When it reaches the Sewage Farm between St. Albans and Park Street, the sewage is conducted into an open Septic Tank, where it remains for a short time, while the micro-organisms present in it increase and multiply, and by their agency the solid matter in the sewage is rendered soluble to a great extent, and is dissolved. Thence the sewage is taken successively through coarse and fine Bacteria beds, where by bacterial agency the organic matter and ammonia which it contains in solution are oxidised, and the effluent resulting is tolerably pure. This purified sewage is then conducted over the surface of the land and filtered through the soil. The effluent is then sufficiently pure to be discharged into the river. All offensive smell from the Sewage Farm has been reduced to a minimum.

Ashes and Refuse.

A daily collection of ashes and refuse is now made, I am pleased to say in some of the central parts of the City, but this is hardly

sufficient. A daily collection should be made not only in all the business quarters, but, and this even more important, in all the poorest and most densely populated localities, where the accommodation for storing refuse is often extremely limited. And ashes and refuse ought to be removed from every house within the City at least twice a week. As things are, in most parts of the City the dust-carts do not call more than once a week; and I am informed that in some cases 2 or 3 weeks have elapsed between each visit of the dust-men. This ought not to be; for the decomposition and putrefaction of organic matter in the close vicinity of houses is a fruitful source of disease. And instead of the dust-carts used at present, which are provided with tarpaulins which may or may not be made use of, proper dust-carts with fixed covers ought to be provided, in order to minimise the diffusion through the air of organic matter, which might possibly contain infective germs.

As regards the disposal of the refuse, once again I must urge you to consider the question of erecting a Destructor. I can not look upon our present mode of disposal as at all satisfactory, and during the past year I have received several complaints of the nuisance arising from the pits in which the ashes and refuse from the City are deposited. There is a populous neighbourhood growing up in the vicinity of these pits, and I can not but think that there is some cause for complaint.

Housing of the Working Classes.

There are a number of cottages in the poorer parts of the town which are so old and dilapidated, and in many respects so unsuitable, that at no distant date it will be absolutely necessary to condemn them. One great difficulty is the absence of suitable house accommodation within the means of the poor people who would be displaced. I would therefore ask you to consider whether it be not practicable, under "The Housing of the Working Classes Act" 1903, for the Corporation to erect new buildings, preferably of the cottage type, the rent of which would be within the reach of these poor people, and which would, at the same time, entail no pecuniary loss on the community in general.

Common Lodging Houses.

I have visited the various registered Common Lodging Houses within the City, 3 in all, and 1 unregistered Lodging House in addition, and have found them fairly clean and tolerably well kept. From the information I have received there does not appear to be any serious overcrowding. I would call attention to the fact that in two of them notices or placards containing the cubic space of each room, and the maximum number of persons allowed to sleep there, are not affixed in a suitable and conspicuous position in such room, as is directed by the Byelaws with respect to Common Lodging Houses. Some other infractions of the Byelaws were noted. Steps are being taken to have all these defects remedied.

Slaughter Houses.

I have visited the various Slaughter-houses within the City, and have to report that on the whole they are fairly clean and well kept. In one or two instances however the condition of the premises was not quite all that could be desired. The attention of the proprietors was called to this, and they promised to be more careful. I must however repeat that the continued existence of these Slaughter-houses, some of which are situated in crowded localities, and in the immediate proximity of dwelling-houses, constitutes a serious danger to the community. Even with the most scrupulous care it is next to impossible to keep a Slaughter-house which is closely surrounded by houses, in such a condition that it will not sometimes be a nuisance and a source of danger to health. Therefore I must once more recommend you to consider seriously the question of erecting a public Abattoir in a suitable locality, which would be under the supervision and control of your own Officers.

Dairies, Milk-shops, and Cowsheds.

A register is kept of Dairies and Milk-shops, and they are inspected from time to time to see that they are in a properly Sanitary condition, and comply with the provisions of the Dairies, Cowsheds, and Milk shops Orders of 1885, 1886, and 1899, and also with the Byelaws of the City.

The Cowsheds within the City have all been regularly inspected and their condition as regards air-space, ventilation, cleanliness, drainage, etc., found satisfactory. The Veterinary Inspector frequently inspects the cows, and is specially careful to order the isolation of any cows which may be suffering from Tuberculosis of the udder, and to prohibit the sale of their milk.

Water-Cress Beds.

Last autumn, in compliance with an order received from the Local Government Board, I inspected the different Water-Cress Beds within the City, and made a special report on them. I am pleased to say that they were all clean and well kept, and that there was nothing to suggest the possibility of any sewage contamination.

Bakehouses.

I have visited all the various Bakehouses within the City, and have found all in a satisfactory condition. There are 5 underground bakehouses in use, which have received certificates of suitability from the St. Albans Urban Sanitary Authority. A copy of the requirements of the Sanitary Authority was appended to my report for 1904

Factories and Workshops.

Under the Factories and Workshops Acts, 1901, I have visited all the Factories and Workshops within the City.

As regards the Factories (50 in number), which comprise Straw Hat Factories, Silk Mills, Printing Works, Boot Factories, Laundries, etc., I have to report that they are all very fairly clean and well ventilated, and that sufficient air-space is allowed. Sufficient sanitary accommodation is provided. The provisions for escape in the event of fire appear to be sufficient.

As regards Workshops and Work-places, which number in all 137, I found them all, with 2 exceptions, very fairly clean, all sufficiently ventilated, and none over-crowded. In 2 cases sufficient sanitary accommodation was not provided. These defects have been called attention to, and will be remedied.

The employers of out-workers are by law obliged to send lists of such out-workers, giving their full names and addresses, twice a year, to the Medical Officer of Health or the Sanitary Inspector. This should be done in January and July. I am sorry to report that there is great difficulty in obtaining these lists. I have received 10 lists of out-workers containing 231 names.

Public Baths.

The Public Swimming Baths close to the river were opened last summer, and have proved very successful. They have been highly appreciated, especially by the young people of the City. These Baths are only available in the summer. A public establishment, where hot and cold baths can be provided at a low charge all the year round, is still a desideratum, and I trust it will not be long before the want is supplied.

Byelaws and Regulations.

There are excellent Bye-laws and Regulations in force in the City of St. Albans, with respect to the Good rule and Government of the City, New Streets and Buildings, Nuisances, Common Lodging Houses, Dairies, Cowsheds and Milkshops (dating June 1903), Clarence Park and Recreation Ground, etc.

"The Infectious Diseases (Prevention) Act" 1890, and "The Public Health (Amendment) Act" 1890, "Part III" have been adopted.

I have made systematic inspections of all the various parts of the City at different times throughout the year, but have found nothing, except what is mentioned above, that seems to call for special comment.

I beg to thank his Worship the Mayor and all the Members of the Council for their uniform courtesy and consideration.

My thanks are also due to the Town Clerk, the Inspector of Nuisances, the Surveyor, and all other Officials for their valuable assistance and co-operation.

I am, Gentlemen,

Your most obedient Servant,

JOHN MORISON, M.D., D.P.H.,

Medical Officer of Health.

February 6th, 1906.





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